



"meeting community needs
.....enhancing quality of life"

FEES ARE NON-REFUNDABLE		Date Rec'd <u>4/27/18</u>
License Fee - \$10.00 per event		Acct. 11030.4322
Investigation Fee + 7.00		Acct. 100.2359
Total Amount Paid <u>17.</u>		Receipt <u>470 9625</u>

Application for Special Class "B" License to Sell Fermented Malt Beverages at Picnics or Gatherings

The named organization applies for:					
<input checked="" type="checkbox"/> A temporary Class "B" license to sell FERMENTED MALT BEVERAGES at picnics or similar gathering under s. 125.26(6) Wis. Stats.					
<input type="checkbox"/> A temporary Class "B" license to sell WINE at picnics or similar gathering under s. 125.51(10) Wis. Stats. (Limit 2 permits in a 12 month period)					
SECTION 1 - ORGANIZATION INFORMATION - Answer all questions completely. Please PRINT clearly					
Name of Organization (Bona fide club, lodge or society, veteran's organization or fair association) <u>Celebration Church</u>				Date Organized <u>JAN 2010</u>	
Address <u>303 N. Oneida St.</u>		City <u>Appleton</u>	State <u>WI</u>	Zip <u>54911</u>	
Person in Charge of Event: Name: Last <u>Mike VanThull</u>		First <u>Mike</u>	Middle Initial <u>J</u>	Date of Birth 	
Address <u>120 N. Morrison St Suite 200</u>		City <u>Appleton</u>	State <u>WI</u>	Zip <u>54911</u>	
Person in charge phone number: 					
President Last <u>Gungor</u>	First <u>Mark</u>	Middle Initial <u>-</u>	Date of Birth 	Male <input checked="" type="checkbox"/>	Female <input type="checkbox"/>
Address <u>3475 Humboldt Rd</u>		City <u>Green Bay</u>	State <u>WI</u>	Zip <u>54311</u>	
Vice President Last <u>Duncan</u>	First <u>Lathan</u>	Middle Initial <u>M</u>	Date of Birth 	Male <input checked="" type="checkbox"/>	Female <input type="checkbox"/>
Address <u>3475 Humboldt Rd</u>		City <u>Green Bay</u>	State <u>WI</u>	Zip <u>54311</u>	
Secretary Last	First	Middle Initial	Date of Birth	Male	Female
Address		City	State	Zip	
Treasurer Last	First	Middle Initial	Date of Birth	Male	Female
Address		City	State	Zip	
SECTION 2 - EVENT INFORMATION SECTION					
Date(s) of Event: Beginning <u>08/03/2017</u>		Ending: <u>08/06/2017</u>		Hours <u>2 AM (PM)</u> <u>10 AM (PM)</u>	
Please describe the type of event you are going to have: <u>venue for Mile of Music</u>					
Do you plan to serve food at this event? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, contact the Appleton Health Department. (920.832.6429)					
Location where beer or wine will be sold: <u>Main Hall</u>					
Address <u>303 N. Oneida St.</u>		City <u>Appleton</u>	State <u>WI</u>	Zip <u>54911</u>	
Are you requesting an "open concept" license? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			Will minors be present? No <input type="checkbox"/> Yes <input checked="" type="checkbox"/>		
Describe actual location and dimensions of area to be licensed - Be precise! - <u>Main Hall</u> <u>- 50 x 60</u>			If yes, how will you prevent minors from obtaining alcoholic beverages? <u>Everyone carded</u>		
SECTION 3 - PENALTY SECTION					
This application must be on file in the Office of the City Clerk for at least ten (10) business days prior to granting the license. If the event will last more than four (4) days, the application shall be filed 15 days prior to the granting of the license. This organization also agrees to comply with all laws, resolutions, ordinances and regulations (state, federal or local) affecting the sale of fermented malt beverages if the license is granted. The officer(s) of the organization, individually and together, declare under penalties of law that the information provided in this application is true and correct to the best of their knowledge and belief.					
Signature of Officer <u>[Signature]</u>					
FOR OFFICE USE ONLY					
Dept.	Approve	Deny	By	Reason	
Police					
Fire					
Health					
Inspection					
S&L	Council	Date Issued	Exp. Date	License Number	