

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

## FEES ARE NON-REFUNDABLE

License Fee - \$10.00 per event

Investigation Fee
Total Amount Paid \_

+-7.6

Acct Code: CLCSPB
Acct Code: CLCPIF

Receipt 5618 - 2

Date Rec'd 9/12/33

## Application for Temporary Class "B" Beer or "Class B" Wine License

*Application MUST be on file for 10 days prior to event, please allow 2-3 weeks for processing*												
The named organization applies for: (Please check one or both)												
X A temporary Class "B" license to sell FERMENTED MALT BEVERAGES at picnics or similar gathering under s. 125.26(6) Wis. Stats.												
X A temporary "Class B" license to sell WINE at picnics or similar gathering under s. 125.51(10) Wis. Stats. (Limit 2 licenses 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) Appleton Downtown, Inc.  Date Organized 04/02/1993												
Address 333 W. College Ave., Suite 100						Appleton			State WI		<sup>Zip</sup> 54911	
Person in Cha	ohany	ny <sup>First</sup> Jennifer			M. I. L. Date of Birth REDACTED							
Address c/o ADI 333 W. College Ave., Suite 100 Appleton						State Zip			Person in charge p		ımber:	
President	Last King	3		First Lyssa	Middle I	nitial M.		Date	of Birth	Male	Female X	
Address 211 W. C	211 W. College Ave.				City Appleton			REDACTED State WI		Zip 54912		
Vice President	Lonsway				Middle Initial T.			Date of Birth REDACTED		Male X	Female	
Address 1004 S. Olde Oneida St.						City Appleton			State WI		<sup>Zip</sup> 54911	
Secretary	* Kiluli Roby					Middle Initial			e of Birth DACTED	Male X	Female	
Address 901 S. Lawe St.					City Appleton						915	
Treasurer	Tallotto					Middle Initial J.			Date of Birth REDACTED		Female	
Address 100 W. Lawrence St.  City Appleton  State WI  Zip 54911												
SECTION 2 - EVENT INFORMATION SECTION   Date(s) of Event: Beginning   11 / 11 / 2023   Ending:   11 / 11 / 2023   Hours   3:00   AM /PM   7:00   AM /PM   AM /PM   7:00   AM												
Please describe the type of event you are going to have: Light Up Appleton												
Do you plan to serve food at this event? No Yes If yes, contact the Appleton Health Department. (920.832.6429)												
Location where beer or wine will be sold or served: Houdini Plaza												
Address Houdini Plaza						City Appleton			State WI	Zip 549	11	
Describe actual location and dimensions of area					Will minors be present?					No	Yes X	
to be licensed below:- BE PRECISE!						If yes, how will you prevent minors from obtaining alcoholic						
Houdini Plaza. Full use of park area.					beverages? Wristband required with ID tickets with licensed bartenders							
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 2000 11 11 11 11 11 11 11 11 11 11 11 11												
FOR OFFICE US	F ONLY	/		$\mathcal{U}$	$\bigcup$				····	**************************************		
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Police	-FF	,			110000							
Fire												
Health												
581 00/07/000	70.7 00/07/0000											
S&L 09/27/202	.5	Date Issu	cu		Exp. I	<b>Jate</b>		1	License Numbe	Γ		