



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

<b>FEES ARE NON-REFUNDABLE</b>		Date Rec'd <u>5/15/19</u>
License Fee - \$10.00 per event		Acct. 11030.4322
Investigation Fee <del>7.00</del>		Acct. 100.2359
Total Amount Paid <u>10.00</u>		Receipt <u>9530</u>

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

<b>The named organization applies for:</b>							
<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)							
<b>SECTION 1 – ORGANIZATION INFORMATION – Answer all questions completely. Please PRINT clearly</b>							
Name of Organization (Bona fide club, lodge or society, veteran's organization or fair association)					Date Organized		
United Sports Association for Youth, Inc USA Sports Complex					March 1996		
Address		P.O. Box 530	City	State	Zip		
3300 E. Evergreen Dr.		Appleton, WI 54912	Appleton	WI	54913		
Person in Charge of Event:		Name: Last	First	Middle Initial	Date of Birth		
		Orintein	Joe	D.	●●●●●●		
Address		City	State	Zip	Person in charge phone number:		
941 E. Pacific St		Appleton	WI	54913	●●●●●●●●●●		
President	Last	First	Middle Initial	Date of Birth	Male	Female	
	Orintein	Joe		●●●●●●	X		
Address		City	State	Zip			
941 E. Pacific St		Appleton	WI	54911			
Vice President	Last	First	Middle Initial	Date of Birth	Male	Female	
	Peter	Steve			X		
Address		City	State	Zip			
4506 N. Snowy Owl Ct		Appleton	WI	54913			
Secretary	Last	First	Middle Initial	Date of Birth	Male	Female	
	Hahn	Aaron			X		
Address		City	State	Zip			
317 E. Clearfield Ln.		Appleton	WI	54913			
Treasurer	Last	First	Middle Initial	Date of Birth	Male	Female	
	Ramczyk	Rick			X		
Address		City	State	Zip			
2624 W. Junyview Cir		Appleton	WI	54914			
<b>SECTION 2 – EVENT INFORMATION SECTION</b>							
Date(s) of Event: Beginning		Ending:	Hours	AM	PM	AM	PM
5/24/19		5/24/19	4:30		PM	10:30	AM
Please describe the type of event you are going to have:							
Neighborhood Beer Garden							
Do you plan to serve food at this event?		No	Yes	If yes, contact the Appleton Health Department. (920.832.6429)			
			X				
Location where beer or wine will be sold:							
Concession Stand at USA Sports Complex							
Address		City	State	Zip			
3300 E. Evergreen Dr.		Appleton	WI	54913			
Are you requesting an "open concept" license?		No	Yes	Will minors be present?		No	Yes
			X				X
Describe actual location and dimensions of area to be licensed – Be precise!			If yes, how will you prevent minors from obtaining alcoholic beverages?				
Concession area at USA Sports Complex			wristbands + id checks				
<b>SECTION 3 – PENALTY SECTION</b>							
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							
<b>FOR OFFICE USE ONLY</b>							
Dept.	Approve	Deny	By	Reason			
Police							
Fire							
Health							
Inspection							
S&L	Council	Date Issued	Exp. Date	License Number			