

City of Appleton

100 North Appleton Street Appleton, WI 54911-4799 www.appleton.org

Meeting Agenda - Final Safety and Licensing Committee

Wednesday, January 23, 2019

5:30 PM

Council Chambers, 6th Floor

- 1. Call meeting to order
- 2. Roll call of membership
- 3. Approval of minutes from previous meeting

<u>19-0066</u> Approval of minutes from previous meeting

Attachments: S&L Minutes 1-9-19.pdf

4. Public Hearings/Appearances

5. Action Items

<u>19-0067</u>	Class "B" Beer and "Class C" Wine application of Garden View Family Restaurant LLC, Located at 216 E College Ave., Rose Villanueva Salinas, Agent, contingent upon approval from all departments.
	Attachments: Liquor License Garden View Application.pdf
<u>19-0080</u>	Operator's Licenses
	Attachments: Operator's Licenses for 1-23-19 S & L.pdf
<u>19-0065</u>	Special Class "B" Beer/Wine License application for Littlest Tumor Foundation, Katharine E. Patience, Person in Charge, on 2-15-2019, contingent upon approval from all departments. <u>Attachments:</u> <u>Littlest Tumor spec B S.L 1.15.19.pdf</u>

19-0078 Special Class "B" Beer/Wine License application of NAMI Fox Valley, Kathleen

M. Kumbier, Person in Charge, 2351 Fiesta Ct, Neenah, April 4, 2019,

contingent upon approval from all departments

Attachments: NAMI Fox Valley special B-S.L. 1.23.19.pdf

19-0068 Special Class "B" License applications filed after the agenda was

published.

6. Information Items

<u>19-0069</u> Special Events:

Esto Vir- Mend for All Seasons Conference- St Pius X, 500 W Marquette

St, March 2, 2019

<u>19-0082</u> <u>Director's Reports</u>

-City Clerk -Fire Chief -Police Chief

<u>19-0081</u> Police Department information on liquor law violation convictions.

7. Adjournment

Notice is hereby given that a quorum of the Common Council may be present during this meeting, although no Council action will be taken.

Reasonable Accommodations for Persons with Disabilities will be made upon Request and if Feasible.



City of Appleton

100 North Appleton Street Appleton, WI 54911-4799 www.appleton.org

Meeting Minutes - Final Safety and Licensing Committee

Wednesday, January 9, 2019

5:30 PM

Council Chambers, 6th Floor

1. Call meeting to order

The meeting was called to order by Chair Lobner at 5:30 p.m.

2. Roll call of membership

Present: 4 - Lobner, Konetzke, Reed and Siebers

Excused: 1 - Williams

3. Approval of minutes from previous meeting

<u>19-0056</u> Minutes from previous meeting

Attachments: S&L Minutes 12-12-18.pdf

Siebers moved, seconded by Reed, that the Minutes be approved. Roll Call. Motion carried by the following vote:

Aye: 4 - Lobner, Konetzke, Reed and Siebers

Excused: 1 - Williams

4. Public Hearings/Appearances

5. Action Items

18-1859 Operator's License application of Mark S. Stein, 2509 N. Locust Street

Attachments: Mark S. Stein.pdf

SL Denial- Stein, 1-9-19.pdf

Mr. Stein was present and addressed the Committee.

Siebers moved, seconded by Lobner, that the Operator License be recommended for denial. Roll Call. Motion carried by the following vote:

Aye: 3 - Lobner, Reed and Siebers

Nay: 1 - Konetzke

Excused: 1 - Williams

<u>19-0016</u> Operator's License application of Benjamin Lasfalk, 516 Nicolet Blvd.

Attachments: Benjamin D. Lasfalk.pdf

SL Denial-Lasfalk 1-9-19.pdf

B. Lasfalk Recommendation Letter.pdf

Mr. Lasfalk was present and addressed the Committee. Eric Anderson, owner of Stuc's Pizza also spoke on behalf of Mr. Lasfalk.

Konetzke moved, seconded by Lobner, that the Operator License be recommended for approval. Roll Call. Motion failed by the following vote:

Nay: 4 - Lobner, Konetzke, Reed and Siebers

Excused: 1 - Williams

The Motion to approve failed, a second vote was taken on a Motion to deny the license.

Reed moved, seconded by Lobner, that the Operator License be recommended for denial. Roll Call. Motion carried by the following vote:

Aye: 3 - Lobner, Reed and Siebers

Nay: 1 - Konetzke

Excused: 1 - Williams

Balance of the action items on the agenda.

Konetzke moved, Reed seconded, to approve the balance of the agenda. The motion carried by the following vote:

Aye: 4 - Lobner, Konetzke, Reed and Siebers

Excused: 1 - Williams

19-0052 "Class A" Liquor and Class "A" Beer License Application from Pedro Juarez of

Lindo Michoacan Mexican Restaurant, LLC, located at 211 N Richmond

Street.

<u>Attachments:</u> Lindo Michoacan Class A Application-S&L1-9-19.pdf

This Report Action Item was recommended for approval.

19-0058 Affidavit of Correction for Ward Designation of Leona Pond Annexation

<u>Attachments:</u> Memo- Leona Pond Annex. Ward Correction.pdf

Leona Pond Annexation Ward Correction.pdf

This Report Action Item was recommended for approval.

<u>19-0057</u>	Operator's Licenses
	Attachments: Operator's Licenses for 1-9-19 S & L.pdf
	This Report Action Item was recommended for approval.
<u>18-1863</u>	Pawnbroker License Renewal application of JGB LLC d/b/a Mister Money, Gregory A. Baer, Applicant, 1933B N. Richmond St., contingent upon approval from all departments.
	This Report Action Item was recommended for approval.
<u>19-0017</u>	Secondhand Article License Renewal application of Scott A. Gonnering, d/b/a Scooter G Sports, 129 E. College Ave., contingent upon approval from all departments.
	This Report Action Item was recommended for approval.
<u>19-0018</u>	Secondhand Article License Renewal application of James A. Boylan, d/b/a The Attique Resale, 415 N. Oneida St., contingent upon approval from all departments.
	This Report Action Item was recommended for approval.
<u>19-0019</u>	Secondhand Article License Renewal application of Dean M. Vandenhoy, d/b/a Richmond Resale, LLC, 204 N. Richmond St., contingent upon approval from all departments.
	This Report Action Item was recommended for approval.
<u>19-0039</u>	Special Class "B" Beer License applications filed after the agenda was published.
	There were no applications filed.

6. Information Items

<u>19-0037</u> Director's Reports:

City Clerk

-Hiring Update

-Spring Election Update

Police Chief

- Employee Wellness Committee

Fire Chief

- Update on hiring process

- 2019 Retirements

<u>19-0038</u> Police Department information on liquor law violation convictions

This Item was presented.

7. Adjournment

Konetzke moved, seconded by Reed, that the meeting be adjourned at 6:07 p.m. Roll Call. Motion carried by the following vote:

Aye: 4 - Lobner, Konetzke, Reed and Siebers

Excused: 1 - Williams

The license period beginning ending 20 ; Class A beer \$ \$ Class A beer \$ \$ Class A beer \$ \$ Class A liquor \$ Class B liquor \$ \$ Clty of Class A liquor \$ Clty of Class A liquor \$ Clty of Class A liquor \$ Class B	Original Alcohol Beverage Retail License Application	'icant's WI Seller's Permit No.: FEIN	Number:
THE GOVERNING BODY of the: Town of Class A beer S Class B beer	Submit to municipal clerk.	LICENSE REQUESTED	
THE GOVERNING BODY of the: Village of Applican	For the license period beginning 20 :		·
THE GOVERNING BODY of the: Village of Applican	ending 20	☐ Class A beer	
THE GOVERNING BODY of the: Village of City of Ci		☑ Class B beer	\$
City of Class A liquor (cider only) S		Class C wine	\$.
unty of Ovaga We Aldermanic Dist. No	OTHE GOVERNING BODY of the: U Village of \ Hpp/e for	Class A liquor	\$
The named Individual Partnership Limited Liability Company Class B (wine only) winery \$ Publication fee \$ TOTAL FEE \$ Name (Individual/partners give last name, first, middle; corporations/limited liability companies give registered name): An "Auxiliary Questionnaire," Form AT-103, must be completed and attached to this application by each individual applicant, by each member o partnership, and by each officer, director and agent of a corporation or nonprofit organization, and by each member/manager and agent of a limit liability company. List the name, title, and place of residence of each person. Title Name (Last, First, M.1.) Home Address Post Office & Zip Code President/Member Secretary/Member Secretary/Mem	∠ City of • //	Class A liquor (cider only)	\$ N/A
The named Individual Partnership Limited Liability Company Class B (wine only) winery \$ Publication fee \$ TOTAL FEE \$ Name (Individual/partners give last name, first, middle; corporations/limited liability companies give registered name): An "Auxiliary Questionnaire," Form AT-103, must be completed and attached to this application by each individual applicant, by each member o partnership, and by each officer, director and agent of a corporation or nonprofit organization, and by each member/manager and agent of a limit liability company. List the name, title, and place of residence of each person. Title Name (Last, First, M.1.) Home Address Post Office & Zip Code President/Member Secretary/Member Secretary/Mem	County of OUTO AO MIP Aldermanic Diet No. (if required by ardinance)	Class B liquor	\$
Publication fee \$ TOTAL FEE \$	Addefinance Dist. No(in required by drainfance)	Reserve Class B liquor	\$
Corporation / Nonprofit Organization Fruinization Fruinizati	1 The named Mindividual Destroyabin Milimited Lightlity Company	Class B (wine only) winery	\$
Name (individual/partners give last_name, first, middle; corporations/l/mited liability companies give registered name): An "Auxiliary Questionnaire," Form AT-103, must be completed and attached to this applicant by each individual applicant, by each member of partnership, and by each officer, director and agent of a corporation or nonprofit organization, and by each member/manager and agent of a limit liability company. List the name, title, and place of residence of each person. Title Name (Last, First, M.I.) Home Address Post Office & Zip Code President/Member Secretary/Member Treasurer/Member Agent Address of Premises Address of Premis		Publication fee	\$
Name (individual/partners give last_name, first, middle; corporations/limited liability companies give registered name): An "Auxillary Questionnaire," Form AT-103, must be completed and attached to this application by each individual applicant, by each member of partnership, and by each officer, director and agent of a corporation or nonprofit organization, and by each member/manager and agent of a limit liability company. List the name, title, and place of residence of each person. Title Name (Last, First, M.I.) President/Member Secretary/Member Treasurer/Member Treasurer/Member Agent Address of Premises \(\) \(· · · · · ·	TOTAL FEE	\$
An "Auxiliary Questionnaire," Form AT-103, must be completed and attached to this application by each individual applicant, by each member or partnership, and by each officer, director and agent of a corporation or nonprofit organization, and by each member/manager and agent of a limit liability company. List the name, title, and place of residence of each person. Title Name (Last, First, M.I.) Name (Last, First, M.I.) Home Address Post Office & Zip Code President/Member Secretary/Member Treasurer/Member Treasurer/Membe	• • • • • • • • • • • • • • • • • • • •	ogistored name):	
An "Auxiliary Questionnaire," Form AT-103, must be completed and attached to this application by each individual applicant, by each member of partnership, and by each officer, director and agent of a corporation or nonprofit organization, and by each member/manager and agent of a limit liability company. List the name, title, and place of residence of each person. Title Name (Last, First, M.I.) Name (L	2. Name (individual/parties give last name, inst, indiae, corporations/inflited liability companies give last name).	b	
Treasurer/Member Agent	partnership, and by each officer, director and agent of a corporation or nonprofit organization liability company. List the name, title, and place of residence of each person. Title Name (Last, First, M.I.) President/Member Selvas (///anvelva Rose Vice President/Member	, and by each member/manager ar	nd agent of a limited
Directors/Managers Trade Name Post Office & Zip Code	Transcription		
Directors/Managers Trade Name CALY COLLEGE AVE. Post Office & Zip Code Appleton: Will 5 Is individual, partners or agent of corporation/limited liability company subject to completion of the responsible beverage server training course for this license period? Is the applicant an employe or agent of, or acting on behalf of anyone except the named applicant? Does any other alcohol beverage retail licensee or wholesale permittee have any interest in or control of this business? (a) Corporate/limited liability company applicants only: Insert state (b) Is applicant corporation/limited liability company a subsidiary of any other corporation or limited liability company? (c) Does the corporation, or any officer, director, stockholder or agent or limited liability company, or any member/manager or agent hold any interest in any other alcohol beverage license or permit in Wisconsin? (NOTE: All applicants explain fully on reverse side of this form every YES answer in sections 5, 6, 7 and 8 above.) Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) Next To The Day Will be the refrigeration. Legal description (omit if street address is given above): (a) Was this premises licensed for the sale of liquor or beer during the past license year? (b) If yes, under what name was license issued?	1) 1/1/1 01/10/10		
Address of Premises Addres	U		
Address of Premises Addres	Ulrectors/Managers		
training course for this license period?	3. Trade Name \ \ \ \(\frac{17 \text{VI POPULATION Busines}}{1 \text{VI POPULATION Busines}}	ss Phone Number	
training course for this license period?	4. Address of Premises ▶ 2/6 E. COLLEGE AVE. Post Of	fice & Zip Code ▶ <u>Apple 70</u>	on W154
training course for this license period?	5. Is individual, partners or agent of corporation/limited liability company subject to completion of the re	sponsible beverage server	
Does any other alcohol beverage retail licensee or wholesale permittee have any interest in or control of this business?	training course for this license period?		.∐ Yes 🔀 No
(a) Corporate/limited liability company applicants only: Insert state			
(b) Is applicant corporation/limited liability company a subsidiary of any other corporation or limited liability company?	Does any other alcohol beverage retail licensee or wholesale permittee have any interest in or control	ol of this business?	. ☐ Yes 🔀 No
(c) Does the corporation, or any officer, director, stockholder or agent or limited liability company, or any member/manager or agent hold any interest in any other alcohol beverage license or permit in Wisconsin?	8. (a) Corporate/limited liability company applicants only: Insert state and a	date _Sep. //g of registration.	• /
(c) Does the corporation, or any officer, director, stockholder or agent or limited liability company, or any member/manager or agent hold any interest in any other alcohol beverage license or permit in Wisconsin?			.□ Yes 🖾 No
(NOTE: All applicants explain fully on reverse side of this form every YES answer in sections 5, 6, 7 and 8 above.) Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) NETT TO THE DOY WILL BE THE REFRIGERATION OF SOLD AND THE POWN OF SOLD AND THE			`
(NOTE: All applicants explain fully on reverse side of this form every YES answer in sections 5, 6, 7 and 8 above.) Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) NETT TO THE BOX WILL be the retribute of the retribute of the retribute of the retribute of the sale of liquor or beer during the past license year? (a) Was this premises licensed for the sale of liquor or beer during the past license year? (b) If yes, under what name was license issued?	agent hold any interest in any other alcohol beverage license or permit in Wisconsin?		. Yes ELNo
all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) Nerl To The Day will be the refrigerator	(NOTE: All applicants explain fully on reverse side of this form every YES answer in sections 5, 6, 7	and 8 above.)	
(a) Was this premises licensed for the sale of liquor or beer during the past license year?	all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcomay be sold and stored only on the premises described.) <u>NEXT</u> To The Do	ohol beverages and records. (Alcohol	crafor 57
(b) If yes, under what name was license issued?			
			.□ Yes 📈 No
Does the applicant understand they must register as a Potail Reverge Alcohol Dealer with the federal government. Alcohol and			
		ne 1-877-882-3277]	. X Yes ☐ No
Does the applicant understand they must hold a Wisconsin Seller's Permit?	Does the applicant understand they must hold a Wisconsin Seller's Permit?		•
[phone (608) 266-2776]	[phone (608) 266-2776]		.⊠ Yes · □ No
	4. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin who	lesalers, breweries and brewpubs?	.⊠ Yes □ No
Tobacco Tax and Trade Bureau (TTB) by filing (TTB form 5630.5d) before beginning business? [phone 1-877-882-3277]	 (a) Was this premises licensed for the sale of liquor or beer during the past license year?	ral government, Alcohol and ne 1-877-882-3277]	Yes [
Does the conflicent and design of the title and the title	t. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin who	lesalers, breweries and brewpubs?	.⊠ Yes ∐ No
Does the applicant understand that they must purchase alcohol heverages only from Wisconsin wholesalers, browning and browning. At You	READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the ab knowledge of the signer. Any person who knowingly provides materially false information on this application may be rehis business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be a partnership applicant must sign; one corporate officer, one member/manager of Limited Liability Companies must during inspection will be deemed a refusal to permit inspection. Such refusal is a misdemeanor and grounds for revo	ove questions has been truthfully answ equired to forfeit not more than \$1,000. S he assigned to another. (Individual applic sign.) Any lack of access to any portion ocation of this license.	rered to the best of the igner agrees to opera ants, or one member of a licensed premise
AD CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of tweledge of the signer. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000. Signer agrees to operabusiness according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants, or one member artnership applicant must sign; one corporate officer, one member/manager of Limited Liability Companies must sign.) Any lack of access to any portion of a licensed premising inspection will be deemed a refusal to permit inspection. Such refusal is a misdemeanor and grounds for revocation of this license.	(Officer of Corporation / M	lember / Manager of Limited Liability Compa	any / Partner / Individual)
AD CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of twieldge of the signer. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000. Signer agrees to operabusiness according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants, or one member artnership applicant must sign; one corporate officer, one member/manager of Limited Liability Companies must sign.) Any lack of access to any portion of a licensed premise.	1	•	•
AD CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of tweledge of the signer. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000. Signer agrees to operabusiness according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants, or one member artnership applicant must sign; one corporate officer, one member/manager of Limited Liability Companies must sign.) Any lack of access to any portion of a licensed premising inspection will be deemed a refusal to permit inspection. Such refusal is a misdemeanor and grounds for revocation of this license.	O DE COMPLETED DV CLEDY		
AD CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of twieldge of the signer. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000. Signer agrees to operation business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants, or one member artnership applicant must sign; one corporate officer, one member/manager of Limited Liability Companies must sign.) Any lack of access to any portion of a licensed premising inspection will be deemed a refusal to permit inspection. Such refusal is a misdemeanor and grounds for revocation of this license. **Confidence of Corporation / Member / Manager of Limited Liability Company / Partner / Individual applicants.** **Confidence of Corporation / Member / Manager of Limited Liability Company / Partner / Individual applicants.**		Signature of Clode / Danute Clade	
AD CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of twieldge of the signer. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000. Signer agrees to operate business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants, or one member artnership applicant must sign; one corporate officer, one member/manager of Limited Liability Companies must sign.) Any lack of access to any portion of a licensed premising inspection will be deemed a refusal to permit inspection. Such refusal is a misdemeanor and grounds for revocation of this license. **Confidence of Corporation / Member / Manager of Limited Liability Company / Partner / Individual Applicants.** **Confidence of Corporation / Member / Manager of Limited Liability Company / Partner / Individual Applicants.** **Representation of the best of	1/1D/19	Oignature of Clerk / Deputy Clerk	
AD CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of twiledge of the signer. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000. Signer agrees to opera business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants, or one member artnership applicant must sign; one corporate officer, one member/manager of Limited Liability Companies must sign.) Any lack of access to any portion of a licensed premising inspection will be deemed a refusal to permit inspection. Such refusal is a misdemeanor and grounds for revocation of this license. **Confidence of Corporation / Member / Manager of Limited Liability Company / Partner / Individual applicants, or one member artnership applicant must sign.) Any lack of access to any portion of a licensed premising inspection will be deemed a refusal to permit inspection. Such refusal is a misdemeanor and grounds for revocation of this license. **Confidence of Corporation / Member / Manager of Limited Liability Company / Partner / Individual applicants, or one member artnership applicant must sign.) Any lack of access to any portion of a licensed premision in grounds for revocation of this license. **Confidence of Corporation / Member / Manager of Limited Liability Company / Partner / Individual applicants, or one member artnership applicant must sign.) Any lack of access to any portion of a licensed premision in grounds for revocation of this license. **Confidence of Corporation / Member / Manager of Limited Liability Company / Partner / Individual applicants, or one member artnership applicants and supplicants, or one member artnership applicants and supplicants.			
AD CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of twieldge of the signer. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000. Signer agrees to operate business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants, or one member artnership applicant must sign; one corporate officer, one member/manager of Limited Liability Companies must sign.) Any lack of access to any portion of a licensed premising inspection will be deemed a refusal to permit inspection. Such refusal is a misdemeanor and grounds for revocation of this license. **Conficer of Corporation / Member / Manager of Limited Liability Company / Partner / Individual Applicants.** **Conficer of Corporation / Member / Manager of Limited Liability Company / Partner / Individual Applicants.** **Description of Clerk / Deputy Clerk**	Licoline limiting leaded		

AT-106 (R. 7-18)

Wisconsin Department of Revenue

Operator's Licenses for 1/23/19 S & L

Approved

James J. Carter Angelina B. Cousineau Rachel S. Couillard

Mark. A. Doering Black D. Fowler

Jason L. Gengler

Niruta Khatri Daniel Knueppel

Kenneth R. Loehrke

Moria M. McHugh

Margaret A. O'Neill Dominic I. Pingel

Tiffany R. Schepis

Samantha J. Schilly Robyn L Schulz

Justin D. Schuman

Haley J. Sorensen Noah P. Spinner

Chyenne S. Steffens

Juan C. Vera

Teresa M. Verkuilen

631 Strawberry Ln Kimberly

5475 W Edgewood Dr Appleton

417 Durkee St #3 Appleton 1209 N Drew St Appleton

1785 Sanctuary Ct #94 Appleton2400 W Cherokee Dr Appleton155 W Calumet St Appleton

537 E Calumet St Appleton

8255 Cty Rd T Larsen

W7197 Prairie Ct Greenville 2316 N Rankin St Appleton

418 6th St Menasha

421 E Brewster St Appleton 730 Fairwood Dr Apt 4 Neenah

209 Berkley St Neenah

413 E Evergreen Dr Kaukauna

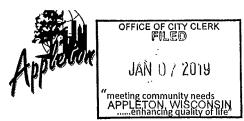
1604 Acorn Ct Menasha

740 N Mayflower Dr Apt 3 Appleton

1409 E Taft Ave Appleton

2125 N Appleton St Appleton

1225 E Pauline St Appleton



FEES ARE NON-REFUNDABLE

License Fee - \$10.00 per event

Investigation Fee + 7.00

Total Amount Paid

Date Rec'd 1/7/19

Acct. 11030.4322

Acct. 100.2359

Receipt_

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

The named or										
A temporary Cl	ass "B" licens	e to sell FE	RMENTED	MALT BEVERAC	GES at picn	ics or similar gather	ing under s	. 125.26(6) Wis. S	tats.	
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 - O								Please PRIN	T clearly	,
Name of Organiza	LAWY FR			ociety, veterar	n's organi	zation or fair asso	ciation)	Date Organize 3 / 9 / 20 /		
Address PO Box	1 7051					City Appleton	Stat	e, /	Zip 549	12
Person in Charge of Event: Name: Last First Middle Initial Date of Birth										
Address 130 Cherry Cf City State Zip Person in charge phone number: Apple for WI 5495										
President	Last		.5	Eirst	М	iddle Initial	D	ate of Birth	Male	Female
Address 4200 N Windwars Dr City Appleton State WI Zip 54913										1913
Vice President Last First Middle Initial Date of Birth Male Female										Female
Address 140 N Jefferson Rd Schild Buxlington State VT Zip 05403										
SecretaryAddress	- Lasti			Firet	N.	(iddle Initial		ate of Birth	Male	Female
Address City State Zip Treasurer Last First Middle Initial Date of Birth Male Female										
Address	Last			1.1120	. 141	City	Stat		Zip	remale
SECTION 2 – E	VENIT INIE) DNAAT	ION SEC	TION		·	, , , ,		Zip	
Date(s) of Event:	Beginning	2/10	- 110	Ending:	2115	//4 Hours	7.21) AM (PM)	10:00	AM PM
Please describe th	e type of eve	ent you ar	e going to	have: Bin	100 + 1	Rollo.	7. 30		10,00.	
Do you plan to serve food at this event? No. (Vos.) If you contact the Appleton Health December 1020 822 6420)										
Location where beer or wine will be sold: Copper Rock Party Room We will order load. Always Copper lock Additional Copper Rock Party Room 420.882.0429)										
Address 210 W College Ave City State Zip 54911										
Are you requesting an "open concept" license? No Yes Will minors be present? No Yes										
Describe actual location and dimensions of area to be licensed — If yes, how will you prevent minors from obtaining alcoholic										
Be precise! Coppar Lock Party Room - Capacity 75 beverages? We will ask for 1D										
SECTION 3 - P	ENALTY SE	CTION		******			***************************************		****	
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 mait 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:										
· 等方面的是否的是一种是一种的。	82		Dra							
FOR OFFICE US	SE ONLY		V		***************************************		***************************************			
Dept.	Approve	Deny	Ву			Reason				
Police								****		
Fire										
Health Inspection		 								
S&L	Council	L	l n	ate Issued		Exp. Date		License Numbe	1'	
			L. ^D			LAP. Date	•	License Runne		



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

FEES ARE NON-REFUNDABLE

License Fee - \$10.00 per event

Investigation Fee + 7.00 Total Amount Paid <u>17,80</u> Date Rec'd <u>| / 16/19</u> Acct. 11030.4322 CLC SPB Acct. 100.2359 CLC Pi F Receipt <u>3ン</u>9円

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

The named orga	mization a	nnlies 4	ior:							
The named orga	s "B" license to	sell FERI	MENTED MALT B	EVERAGES at pi	cnics or sin	nilar gathe	ring unde	er s. 125.26(6) Wis. S	itats.	
A temporary Class	s "B" license to	sell WIN	E at picnics or si	milar gathering	under s. 12	25.51(10) W	Vis. Stats	. (Limit 2 permits in	a 12 month	period)
SECTION 1 - OR	GANIZATIO	ON INFO	ORMATION	– Answer a	I questi	ons com	pletel	y. Please PRIN	T clearly	
Name of Organizati NAMI Fox Valley	on (Bona fid	e club, lo	dge or society,	veteran's orga	nization o	or fair asso	ociation)	Date Organize 04/07/1981	ed	
Address 211 E. Franklin St					City Applet	on		State /I	Zip 54911	
Person in Char	ge of Eve	nt:	Name	: Last Kumbier		First Kathleen		Middle Initial M	Date of	
Address 2351 Fiesta Ct.				City Neenah		State WI	Zip 5495	Person in char	ge phone nu	mber:
President	Last		First		Middle Ir	nitial		Date of Birth	Male	Female
Address	Address							State	Zip	
Vice President	Last		First		Middle I	nitial		Date of Birth	Male	Female
Address City State Zip							Zip			
Secretary	Last		First		Middle l	nitial		Date of Birth	Male	Female
Address					City			State	Zip	
Treasurer	Last		First		Middle I	nitial		Date of Birth	Male	Female
Address					City			State	Zip	
SECTION 2 – EV										w 60
Date(s) of Event: E				ding: 04 /04	/19	Hour	rs 5:30	AM(PM)	3:00	AM (M)
Please describe the	type of even	t you are	going to have:	、 Fundrai:						
Do you plan to ser	ve food at thi	s event?	No Yes	If yes, cont	tact the Ap	ppleton H	ealth De	partment. (920.83	2.6429)	
Location where be	er or wine wi	ll be solo	l: Sacred H	eart Parish						
Address City State Zip Appleton WI 54915										
Are you requesting an "open concept" license? No Yes Will minors be present? No Open concept actual location and dimensions of area to be licensed — If yes, how will you prevent minors from obtaining alcoholic										
Describe actual loc Be precise!				icensed –	beverage				aining alco	holic
Gymnasium at			311		Darton	4010 11111	0110011			
This application must be If the event will last mo This organization also a license is granted. The correct to the best of the Signature of Officer	e on file in the O re than four (4) of grees to comply officer(s) of the eir knowledge an	ffice of the lays, the ap with all law organization	plication shall be fi	led 15 days prior to nances and regulat	o the grantin tions (state, f	g of the licen ederal or loc	ise. al) affectir	ng the sale of fermented	malt beverage	es if the true and
FOR OFFICE US	E ONLY									
Dept.	Approve	Deny	Ву		Reaso	n				
Police										
Fire										
Health	1-17-19		Mirke	5						
Inspection S&L	Council		Date Is	ssued	I E	xp. Date		License Nun	nber	
Dan	Council					·		-unat and if foasib	.I.a	

11-01-09 Reasonable accommodations for persons with disabilities will be made upon request and if feasible.

Return application to: City Clerk, 100 North Appleton Street, Appleton, WI 54911-4799

