

"meeting community needsenhancing quality of life"

REQUEST for Beer/Liquor License Premise Amendment

FEES ARE NON-REFUNDABLE

Date Recv'd 7/18

License Fee

\$ 10.00

Receipt 487 164

Acct, 11030.4306

			ATION

Name of Establishment: Fox Cities Performing Arts Center

Address of Establishment: 400 W College Avenue Appleton WI 54911

Name of Agent: Nicholas J. Reising

Phone Number: 920-737-3782

SECTION 2 - PREMISE AMENDMENT

Please describe the change in premises:

A drawing/diagram of the proposed area must also be submitted with this application

The Fox Cities Performing Arts Center will be hosting our fourth annual cookout for our Annual Partners as a thank you for their financial support throughout this past year. The event will be taking place on Wednesday, August 22, 2018 from 5:30 to 7:30 p.m.

We are planning to host this summer cookout, outdoors at the Performing Arts Center, on our Thrivent Financial Employee Plaza and in the covered valet area. Traditional Wisconsin cookout food such as burgers and brats will be provided along with a variety of beverages. To allow us to serve alcohol at this event we are requesting a one-day amendment to our liquor license.

The space will be fenced in with stanchions and has a capacity of approximately 200 people.

Is this change Permanent?

If this is temporary please specify the reason for the amendment:

YES

NO

Although this event will be hosted on the Fox Cities P.A.C. property, it is outdoors and we will need our liquor license amended for the day to extend outside to this space.

Please list the date(s) and time(s) that this temporary premise amendment will be utilized:

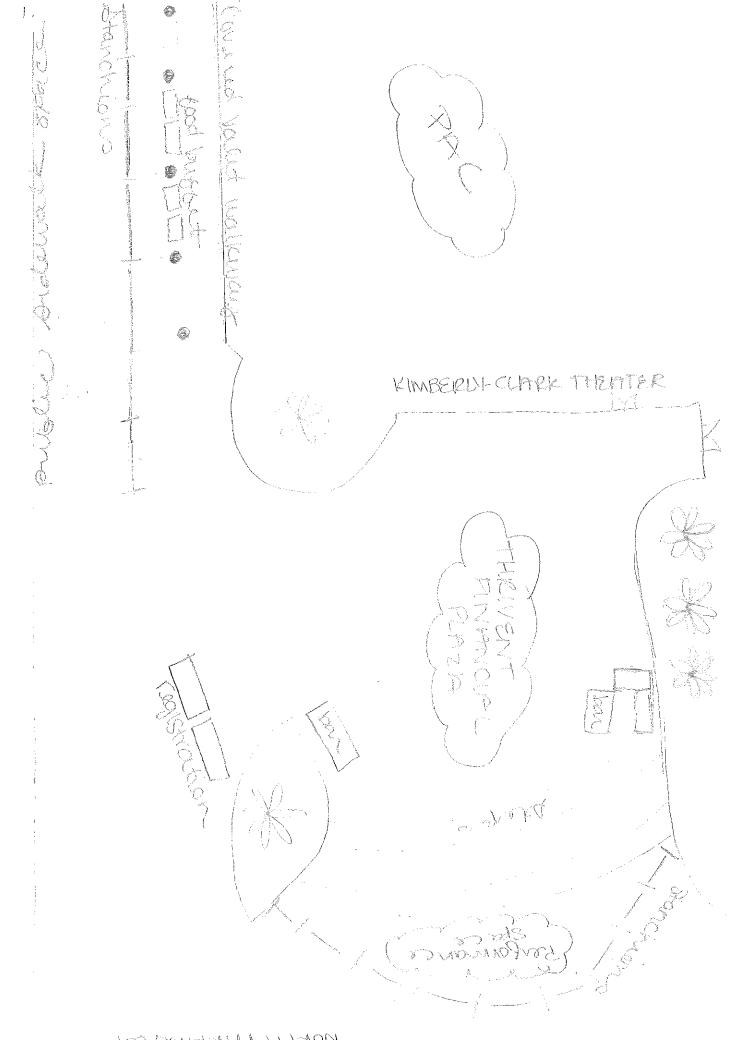
Wednesday, August 22, 2018 from 5:00-8:00pm

SECTION 4 - PENALTY NOTICE

I certify that I am familiar with Section 9-52 of the Municipal Code of the City of Appleton and agree that any license granted under this application may be suspended for cause at any time by the Common Council.

Under penalty of law, I swear that the information provided in this application is true and correct to the best of my knowledge and belief.

Signature of Applicant:



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