4c

REC'D APR 25 2013

APPLICATION FOR TEMPORARY CLASS "B"/"CLASS B" RETAILER'S LICENSE

See Additional Information on reverse side. Contact the municipal clerk if you have questions.

FEE $ 10 — Application Date: 4-25-13

☐ Town ☒ Village ☐ City of Howard County of Brown

The named organization applies for: *(check appropriate box(es).)*

☒ A Temporary Class "B" license to sell fermented malt beverages at picnics or similar gatherings under s. 125.26(6), Wis. Stats.

☐ A Temporary "Class B" license to sell wine at picnics or similar gatherings under s. 125.51(10), Wis. Stats.

at the premises described below during a special event beginning Aug 24th 13 and ending Aug 24th 2013 and agrees to comply with all laws, resolutions, ordinances and regulations (state, federal or local) affecting the sale of fermented malt beverages and/or wine if the license is granted.

1. ORGANIZATION *(check appropriate box)* ☐ Bona fide Club ☐ Church ☐ Lodge/Society ☐ Veteran's Organization ☐ Fair Association

(a) Name Avenue Bar LLC

(b) Address 1745 Velp Ave *(Street)* ☐ Town ☒ Village ☐ City

(c) Date organized Aug. 24. 2013

(d) If corporation, give date of incorporation _____

(e) If the named organization is not required to hold a Wisconsin seller's permit pursuant to s. 77.54 (7m), Wis. Stats., check this box: ☐

(f) Names and addresses of all officers:

President Steven J. Van Straten

Vice President _____

Secretary _____

Treasurer _____

(g) Name and address of manager or person in charge of affair: Steven J. Van Straten

2. LOCATION OF PREMISES WHERE BEER AND/OR WINE WILL BE SOLD:

(a) Street number 1745 Velp Ave / Small portion of property for Tent Just West of Property

(b) Lot _____ Block Already Insured and part

(c) Do premises occupy all or part of building? yes of parking lot is on

(d) If part of building, describe fully all premises covered under this application, which floor or floors, or room or rooms, license is to cover:

3. NAME OF EVENT

(a) List name of the event Avenue Bar Customer Appreciation Party

(b) Dates of event Aug 24th 2013

DECLARATION

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.

_____ *(Name of Organization)*

Officer [signature] 4-25-13 *(Signature/date)* Officer _____ *(Signature/date)*

Officer _____ *(Signature/date)* Officer _____ *(Signature/date)*

Date Filed with Clerk _____ Date Reported to Council or Board _____

Date Granted by Council _____ License No. _____