

5h

# 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 REC'D AUG 22 2012

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 Oct 13<sup>th</sup> 2012 and ending Oct 14<sup>th</sup> 2012 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 \_\_\_\_\_
- (b) Address \_\_\_\_\_  
(Street)  Town  Village  City
- (c) Date organized \_\_\_\_\_
- (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 \_\_\_\_\_  
 Vice President \_\_\_\_\_  
 Secretary \_\_\_\_\_  
 Treasurer \_\_\_\_\_
- (g) Name and address of manager or person in charge of affair: \_\_\_\_\_

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

- (a) Street number 4054 Shawano Av Green Bay, WI 54313 621-5209
- (b) Lot \_\_\_\_\_ Block \_\_\_\_\_
- (c) Do premises occupy all or part of building? Building and tent next to building
- (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 Kickin' Cancer
- (b) Dates of event Oct 13<sup>th</sup> - Oct 14<sup>th</sup>

**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.

Officer BS's Bar Sheila Derpinghaus \_\_\_\_\_  
 (Signature/date) (Name of Organization)

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. \_\_\_\_\_