



Temporary B License

City of Madison Clerk 210 MLK Jr Blvd, Room 103 Madison, WI 53703

licensing@cityofmadison.com 608-266-4601

(Number) (scanned)	
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	. >
□No	Yes

410

(Processing step

(initials)

Alder Name:	Marsha Rommel	Dist #:	Police Sector: Toothow

- Temporary Class "B" (beer) and "Class B" (wine) licenses are available to **bona fide clubs, churches,** Lodges/Societies, Veteran's Organizations, and Fair Associations only. Being a non-profit company is not enough.
- O You may get an unlimited number of temporary licenses for Beer, but **only two licenses for wine** each twelve months.
- o If your plans include using the street for your event, you will need a **Street Use Permit** and you must apply at least 60 days before your event.
- o At least one licensed bartender must be present.
- o The fee is \$10 for beer and/or wine per event events may have consecutive days.
- o Other requirements are on the accompanying sheet. □ Attached

The named organization applies for:

REV 06/2017

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.

Organization Pick one: Bona fide Club Church Lodge/Society Veteran's Organization	□ Fair Association					
Organization Name: Wit-Mar Weighborhood Wher I	Phone: <u>688-257-4576</u>					
Address: 953 Jenifor freet Email: Jellinu Wil-Mar.org Website: www wil-mar arg						
Date organized: If a corporation, give date of incorporation:						
WI State Seller's Permit ID:						
We are not required to hold a Wisconsin seller's permit pursuant to s. 77.54 (7m), Wis. Stats.						
☐ We have been convicted of a violation of Chapter 38.						
	continued on page two - OVER					

Organization Officers	Name	City, State	Birthdate
President	Bob Hemaner	Madison, wi	
Vice President	TOCK JENSE O	0	
Treasurer	Rob Hetzel	ts 0	
Secretary	Shown Abshere	te te	
Person in charge of event	Name	Phone	Email
	Beating Gladiaian	608-520-2291	beathcrowil-mar.org
Event Information			
Event Name: Attack	Event da	ites & time(s):	27428; llam-lopm; llam-8
Event Address: 2000 8100	ckof Alwood - From Win	nebagoto Estimated A	ttendance: 5000/day
describe fully which parts	to license occupy <i>all</i> of the of the property or building yoor of the building, or which	you want to be covered wi	No? Then please the this license. (Which section):
			3
Explain the purpose and na	nture of the event: Placer	uting & community-	boilding: Fundraising
Describe your planned me	thod of crowd control:	t-duty MPD o	fficers; private security
guards + appr	nximately 20 e	vent organizers & W	cadors. All have 2-wayradi
How many security person	s will you have on the licen	sed premises? 20HPD	+ 20 ofly community levertless
		LISTOMEN PICTURA HOIS &	ntities ordered: 50 Banels
Will food be served? ✓ Ye	s □ No Will a tent	be used? Yes □ No	
Will the street be used?	Yes □ No Will wine b	oe served? □ No □ Yes: _	of 2 per year
Wholesaler who will suppl	ly wine: L'eft Bank	_ Quantities ordered:2	O cars \square N.A.
Declaration			
☐ The information provide	ed in this application is true	and correct to the best of	my knowledge and belief.
Officer Signature	Sob Herrof	Date	4/26/2019
Printed name of Officer w	ho is signing Rob	Hemaver	-

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