



# Temporary B License

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

[licensing@cityofmadison.com](mailto:licensing@cityofmadison.com)  
608-266-4601

(Agenda Item number) -if Street Use-

(Legistar file number) -if Street Use-

Percps-2024-00079  
(License number)

4  
(Alder District #) (Police Sector)

Office Use Only

Street Use:  No  **YES**  
Office Use Only

- o Temporary Class "B" (beer) and "Class B" (wine) licenses are available to **bona fide clubs, chambers of commerce, 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.

The named organization applies for:

- 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  Chamber of Commerce  Church  
 Lodge/Society  Veteran's Organization  Fair Association

Organization Name: \_\_\_\_\_ Phone: \_\_\_\_\_

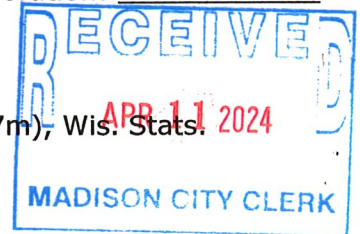
Address: \_\_\_\_\_ Email: \_\_\_\_\_ Website: \_\_\_\_\_

Date organized: \_\_\_\_\_ If a corporation, give date of incorporation: \_\_\_\_\_

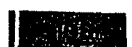
WI State Seller's Permit ID: \_\_\_\_\_

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.



Organization Officers	Name	City, State	Birthdate
President			
Vice President			
Treasurer			
Secretary			
Person in charge of event	Name	Phone	Email



### 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 \$ \_\_\_\_\_

Town  Village  City of Madison

Application Date: 03/12/2024

County of Dane

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 08/14/2024 and ending 08/14/2024 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 or Agricultural Society
- Chamber of Commerce or similar Civic or Trade Organization organized under ch. 181, Wis. Stats.

(a) Name Gay Straight Alliance for Safe Schools, Inc. (DBA: GSAFE)

(b) Address 122 E Olin Ave Ste 122, Madison, WI 53713

(Street)

Town  Village  City

(c) Date organized 1991

(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 Jeremy Pagel

Vice President NA

Secretary Laura McNeil

Treasurer Kayla McGhee

(g) Name and address of manager or person in charge of affair: Dino A. Maniaci 314 S. Midvale Blvd, Madison, W

2. Location of Premises Where Beer and/or Wine Will Be Sold, Served, Consumed, or Stored, and Areas Where Alcohol Beverage Records Will be Stored:

(a) Street number 114 King Street

(b) Lot \_\_\_\_\_ Block 100 block King st

(c) Do premises occupy all or part of 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

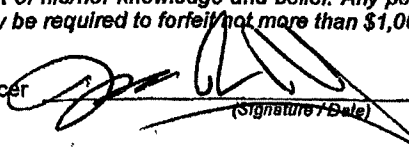
(a) List name of the event WOOF'S PRIDE (King Street) Block Party

(b) Dates of event 08/14/2024 (8/17/24)

#### DECLARATION

An officer of the organization, declares under penalties of law that the information provided in this application is true and correct to the best of his/her knowledge and belief. Any person who knowingly provides materially false information in an application for a license may be required to forfeit not more than \$1,000.

Officer

 4/4/24  
(Signature / Date)

GSAFE

(Name of Organization)

Date Filed with Clerk \_\_\_\_\_

Date Reported to Council or Board \_\_\_\_\_

Date Granted by Council \_\_\_\_\_

License No. \_\_\_\_\_

**Event Information**

Event Name: KING ST PRIDE Event dates & time(s): 8/17/24  
Event Address: 100 BLOCK KING ST. Estimated Attendance: 1200

Do the premises you want to license occupy *all* of the building/property? \_\_\_\_\_ No? Then please describe fully which parts of the property or building you want to be covered with this license. (Which section of the parking lot, which floor of the building, or which specific rooms in it. etc): \_\_\_\_\_

100 BLOCK KING STREET / ADJACENT PRIVATE LOT

Explain the purpose and nature of the event: COMMUNITY CELEBRATION, OUTREACH, COMMEMORATION PRIDE

Describe your planned method of crowd control: WOODS STAFF / VOLUNTEERS

How many security persons will you have on the licensed premises? 8

Will food be served?  Yes  No Will a tent be used?  Yes  No

Will the street be used?  Yes  No Will wine be served?  No  Yes: \_\_\_\_\_ of 2 per year

Wholesaler/distributor/brewery who will supply fermented malt beverage: WISC. DISTRIBUTORS

Quantities ordered: 24 KEYS

(If serving wine) Wholesaler/distributor/winery who will supply wine: SWISS CELLARS

Quantities ordered: 8 CASES

**Declaration**

The information provided in this application is true and correct to the best of my knowledge and belief.

Officer Signature [Signature] Date: 7/4/24

Printed name of **Officer** who is signing: JEREMY PAGEL