

Temporary B License

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

licensing@cityofmadison.com 608-266-4601

	070-0005
(Number)	
(scanned)	
□No	⊠ Yes
(STREET USE?)	

continued on page two - OVER

(Processing step)

(initials)

Alder	r Name: Sally Rohrer	_ Dist #:	8	Police Sector: _	402			
0	o 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.							
0								
0	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.							
0	At least one licensed bartender must be present.							
0	 The fee is \$10 for beer and/or wine per event – events may have consecutive days. 							
0	Other requirements are on the accompanying sheet	. Attache	ed					
	1							
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 ☐ Church ☐ Lodge/Society ☐ Veteran's Organization ☐ Fair Association								
	nization Name: MADISON FESTAVALS, IN C.							
Address: 2995 SUBJENO PLUY Email: EVENTS WADGONFESTWAY Website: MADISON FESTINGY. COM								
Date or	rganized: If a corpo	oration, giv	e date of	f incorporation: <u>64</u>	105/1993			
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	S'ARA KLEMME	FSTOHISURG, WIT					
Vice President	JAMIE PATRICE		<i>¥</i>				
Treasurer	MARL ANDERSON	, , , , , , , , , , , , , , , , , , , ,					
Secretary_	MEHV WESTED						
Person in charge of event	Name	Phone	Email				
UICE CHAIR Event Information	ALEX PLEC		1				
Event Name: Run Mankaun Half Marathun Event dates & time(s): 5/23/20 -6:pm - 10pm; 5/24/20, 7am - 12 Event Address: Leberry Man / State of mall Estimated Attendance: 2000 Both 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):							
Explain the purpose and nature of the event: RUNNERS FUENT & FEWESHLENTE SECURETY, RAPPERATE SECURETY, RAPPERATE SECURETY, RAPPERATE OFFICERY How many security persons will you have on the licensed premises? & PREMATE OFFICERY							
If you are on a City right-of	-way or property, w	vill an application for waive	or of insurance be filed? If Yes □ No				
If you are on a City right-of-way or property, will an application for waiver of insurance be filed? WYes \(\) No Wholesaler who will supply fermented malt beverage: \(\)							
Will food be served?							
Will the street be used? ☐ Yes ☑ No Will wine be served? ☐ No ☑ Yes: ☐ of 2 per year							
Wholesaler who will supply	wine: The BEC	Quantities ordered:	<u>40 e4555</u> □ N.A.				
Declaration							
☐ The information provided in this application is true and correct to the best of my knowledge and belief. Officer Signature ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐							
		C K () / 1 / 1					
Printed name of Officer who is signing OM (TOTAL)							

REV 04/2016