

APPLICATION FOR SPECIAL CLASS "B" RETAILER'S LICENSE TO SELL FERMENTED MALT BEVERAGES AT PICNICS OR GATHERINGS

Wisconsin Department of Revenue
Inheritance and Excise Tax Bureau

(See Additional Information on reverse side)

FEE \$ _____ Wis., _____ 19____

To the governing body of the

Town of _____

Village of _____

City of _____ County of _____

Under the provisions of Sec. 125.26(6), Wis. Stats., the named organization applies for a special Class "B" license to sell fermented malt beverages and wine not more than 6% alcohol my volume at the premises described below in the _____

Town Village City

of _____, County of _____, State of Wisconsin, during a special event beginning _____ and ending _____ and agrees to comply with all laws, resolutions, ordinances and regulations (state, federal or local) affecting the sale of fermented malt beverages and wine coolers if the license is granted.

1. ORGANIZATION (Bona fide club, lodge or society, veteran's organization or fair association):

(a) Name _____

(b) Address _____
Street Town Village City

(c) Date organized _____

(d) If corporation, give date of incorporation _____

(e) Names and address of all officers:

President _____

Vice President _____

Secretary _____

Treasurer _____

(f) Name and address of manager or person in charge of affair: _____

2. LOCATION OF PREMISES WHERE FERMENTED MALT BEVERAGES WILL BE SOLD:

(a) Street number _____

(b) Lot _____ Block _____

(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. Have you made application for more than one other Class "B" license for any other location in Wisconsin? _____

If yes, give place and date of applications _____

DECLARATION

The president and secretary 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

President _____
(Signature)

Secretary _____
(Signature)

Date Filed _____

Date Reported to Council or Board _____

Date Approved _____

License No. _____