

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 \$ 10.00

Application Date: 03/27/2026

Town Village City of Richland Center County of Richland

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 05/09/2026 and ending 05/09/2026 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 SW Partners dba Richland Rejuvenates

(b) Address 1313 W Seminary St. PO BOX 651 Richland Center WI 53581
(Street) Town Village City

(c) Date organized 03/03/2016

(d) If corporation, give date of incorporation 03/04/2016

(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 Michael Breininger

Vice President Kent Adsit

Secretary Liz Perkins

Treasurer Michael Cosgrove

(g) Name and address of manager or person in charge of affair: Michael Cosgrove

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

(a) Street number 182 N Central Avenue City Auditorium

(b) Lot _____ Block _____

(c) Do premises occupy all or part of building? All interior only top 2 floors

(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 Concert "High Mileage"

(b) Dates of event May 9th 2026 6pm to 11p

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.

SWPartners dba Richland Rejuvenates
(Name of Organization)

Officer Michael Cosgrove 03-27-26
(Signature/date)

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. _____