

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: 6-10-2022

Town Village City of Two Rivers

County of Manitowoc

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 Time: 1:00 PM and ending Time: 9:00 PM 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 Two Rivers Main Street, Inc.

(b) Address 1608 Washington St., Two Rivers, WI 54241
(Street) Town Village City

(c) Date organized 1996

(d) If corporation, give date of incorporation 1996

(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 Gina Krahn 3721 Adams St, Two Rivers 54241

Vice President Travis Sterens 818 Bucholz St, Two Rivers 54241

Secretary Emilee Kysticken 1200 Washington St, Two Rivers 54241

Treasurer Jeff Sachse 1002 E. Crescent Drive, Manitowoc 54220

(g) Name and address of manager or person in charge of affair: Nathan Kronforst
phone number: 920-242-1755

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 West Central Park, West Park St.

(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. Name of Event

(a) List name of the event Bryan Lee Memorial Blues Fest

(b) Dates of event July 9, 2022

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 [Signature] 6-10-2022
(Signature / Date)

Two Rivers Main Street
(Name of Organization)

Date Filed with Clerk 6/10/22

Date Reported to Council or Board 6/20/22

Date Granted by Council _____

License No. _____



Office of City Clerk
1717 East Park Street
Post Office Box 87
Two Rivers WI 54241-0087
Telephone 920/793-5526
FAX 920/793-5512

NOTE:

THIS FORM TO BE COMPLETED AND ATTACHED TO ALL APPLICATIONS FOR SPECIAL CLASS B MALT LICENSES FOR PICNICS & GATHERINGS

* * * * *

The applicant hereby agrees to indemnify and hold the City of Two Rivers harmless from and against any and all claims, actions, causes of action, damages, expenses, and liabilities which may be imposed upon, incurred by or asserted against the City of Two Rivers by reason of any injury or claim of injury or damage to any person or property which is associated with or arises out of the applicant's use of the City property and the dispensing of fermented malt beverage to any person pursuant to any license issued upon this application.

Two Rivers Main Street
Organization

Roger Russove
By

6-10-2022
Date