Form
AB-220

Temporary Alcohol Beverage License

Municipality
C. Watertown

License(s) Requested		Fees	
☑ Temporary "Class B" Wine	☐ Temporary Class "B" Beer	License Fees	$ 10.00
		Background Check	$
		Total Fees	$ 10.00

Part A: Organization Information

1. Organization Name
Watertown Area Chamber of Commerce

2. Organization Permanent Address
519 E Main St

3. City	4. State	5. Zip Code
Watertown	WI	53094

6. Mailing Address (if different from permanent address)

7. FEIN	8. Date of Organization/Incorporation	9. State of Organization/Incorporation
39-0689225	08/20/1920	Wisconsin

10. Phone	11. Email
920-261-6320	linden@watertownchamber.com

12. Organization type *(check one)*

☐ Bona Fide Club ☐ Church ☐ Fair Association/Agricultural Society ☐ Veteran's Organization
☐ Lodge/Society ☑ Chamber of Commerce or similar Civic or Trade Organization under ch. 181, Wis. Stats.

13. Is this organization required to hold a Wisconsin Seller's permit? ☐ Yes ☑ No

14. Wisconsin Seller's Permit Number (if applicable)

Part B: Individual Information

List the name, title, and phone number for all officers, directors, and agent of the organization. Include an Individual Questionnaire (Form AB-100) for each person listed below. Attach additional sheets if necessary.

Corporations must also include Alcohol Beverage Appointment of Agent (Form AB-101).

Last Name	First Name	Title	Phone
Wagner	Cassandra	Board Chair	(920) 988-7517
Van Ert	Bridget	Vice Chair	(262) 434-0027
Lanser	Karen	Secetary	(920) 988-8294
Heinzelman	Sharon	Treasurer	(262) 844-3369
Peacy	Linden	Executive Director	(414) 303-2079

TO PD
7110 -NF

Continued →

Part C: Event Information

1. Name of Event (if applicable)
10th Annual Wine Walk

2. Dates of Operation
09/10/2026

3. Hours of Operation
4:30-8pm

4. Premises Address
217 E Main Street (Bradley's Jewelers)

5. City
Watertown

6. State
WI

7. Zip Code
53094

8. County
Jefferson

9. Governing Municipality ☒ City ☐ Town ☐ Village
of: Watertown

10. Aldermanic District
7

11. Organizer of Event (if not the named applicant)
Watertown Area Chamber of Commerce

12. Email and/or Phone Number for Organizer of Event
linden@watertownchamber.com

13. Organizer Website
watertownchamber.com

14. Event Website

15. Premises Description - Describe the building or buildings and any outside areas where alcohol beverages and records are sold, stored, or consumed, and related records are kept. Describe all rooms within the building, including living quarters. Authorized alcohol beverage activities and storage of records may occur only on the premises described in this application. Attach a map or diagram and additional sheets if necessary.

Retail sales floor, 1st floor inside only

Part D: Attestation

Who must sign this application?

- one officer or director of the nonprofit organization

READ CAREFULLY BEFORE SIGNING: Under penalty of law, I have answered each of the above questions completely and truthfully. I agree that I am acting solely on behalf of the applicant organization and not on behalf of any other individual or entity seeking the license. Further, I agree that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another individual or entity. I agree to operate according to the law, including but not limited to, purchasing alcohol beverages from Wisconsin-permitted wholesalers. I understand that lack of access to any portion of a licensed premises during inspection will be deemed a refusal to allow inspection. Such refusal is a misdemeanor and grounds for revocation of this license. I understand that any license issued contrary to Wis. Stat. Chapter 125 shall be void under penalty of state law. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than $1,000 if convicted.

Last Name	First Name	M.I.
Peacy	Linden	

Title	Email	Phone
Executive Director	linden@watertownchamber.com	(920) 261-6320

Signature

Date 7/7/26

Part E: For Clerk Use Only

Date Application Was Filed With Clerk	License Number
7/10/26	
Date License Granted	Date License Issued
Signature of Clerk/Deputy Clerk	

Form
AB-220

Temporary Alcohol Beverage License

Municipality: C. Watertown

License(s) Requested	Fees	
☑ Temporary "Class B" Wine ☐ Temporary Class "B" Beer	License Fees	$ 10.00
	Background Check	$
	Total Fees	$ 10.00

Part A: Organization Information

1. Organization Name: Watertown Area Chamber of Commerce

2. Organization Permanent Address: 519 E Main St

3. City	4. State	5. Zip Code
Watertown	WI	53094

6. Mailing Address (if different from permanent address)

7. FEIN	8. Date of Organization/Incorporation	9. State of Organization/Incorporation
39-0689225	08/20/1920	Wisconsin

10. Phone	11. Email
920-261-6320	linden@watertownchamber.com

12. Organization type *(check one)*

☐ Bona Fide Club ☐ Church ☐ Fair Association/Agricultural Society ☐ Veteran's Organization
☐ Lodge/Society ☑ Chamber of Commerce or similar Civic or Trade Organization under ch. 181, Wis. Stats.

13. Is this organization required to hold a Wisconsin Seller's permit? ☐ Yes ☑ No

14. Wisconsin Seller's Permit Number (if applicable)

Part B: Individual Information

List the name, title, and phone number for all officers, directors, and agent of the organization. Include an Individual Questionnaire (Form AB-100) for each person listed below. Attach additional sheets if necessary.

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Last Name	First Name	Title	Phone
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Van Ert	Bridget	Vice Chair	(262) 434-0027
Lanser	Karen	Secetary	(920) 988-8294
Heinzelman	Sharon	Treasurer	(262) 844-3369
Peacy	Linden	Executive Director	(414) 303-2079

TO PD
7/10 NF

Continued →

Part C: Event Information

1. Name of Event (if applicable)
10th Annual Wine Walk

2. Dates of Operation
09/10/2026

3. Hours of Operation
4:30-8pm

4. Premises Address
1018 E Main Street (Dragers floral)

5. City
Watertown

6. State
WI

7. Zip Code
53094

8. County
Jefferson

9. Governing Municipality ☒ City ☐ Town ☐ Village
of: Watertown

10. Aldermanic District
4

11. Organizer of Event (if not the named applicant)
Watertown Area Chamber of Commerce

12. Email and/or Phone Number for Organizer of Event
linden@watertownchamber.com

13. Organizer Website
watertownchamber.com

14. Event Website

15. Premises Description - Describe the building or buildings and any outside areas where alcohol beverages and records are sold, stored, or consumed, and related records are kept. Describe all rooms within the building, including living quarters. Authorized alcohol beverage activities and storage of records may occur only on the premises described in this application. Attach a map or diagram and additional sheets if necessary.

Retail sales floor, 1st floor inside only

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Last Name	First Name	M.I.
Peacy	Linden	

Title	Email	Phone
Executive Director	linden@watertownchamber.com	(920) 261-6320

Signature

Date 7/7/26

Part E: For Clerk Use Only

Date Application Was Filed With Clerk	License Number
7/10/26	
Date License Granted	Date License Issued
Signature of Clerk/Deputy Clerk	

Form
AB-220

Temporary Alcohol Beverage License

Municipality
C. Watertown

License(s) Requested	Fees	
☑ Temporary "Class B" Wine ☐ Temporary Class "B" Beer	License Fees	$ 10.00
	Background Check	$
	Total Fees	$ 10.00

Part A: Organization Information

1. Organization Name
Watertown Area Chamber of Commerce

2. Organization Permanent Address
519 E Main St

3. City	4. State	5. Zip Code
Watertown	WI	53094

6. Mailing Address (if different from permanent address)

7. FEIN	8. Date of Organization/Incorporation	9. State of Organization/Incorporation
39-0689225	08/20/1920	Wisconsin

10. Phone	11. Email
920-261-6320	linden@watertownchamber.com

12. Organization type *(check one)*

☐ Bona Fide Club ☐ Church ☐ Fair Association/Agricultural Society ☐ Veteran's Organization
☐ Lodge/Society ☑ Chamber of Commerce or similar Civic or Trade Organization under ch. 181, Wis. Stats.

13. Is this organization required to hold a Wisconsin Seller's permit? ☐ Yes ☑ No

14. Wisconsin Seller's Permit Number (if applicable)

Part B: Individual Information

List the name, title, and phone number for all officers, directors, and agent of the organization. Include an Individual Questionnaire (Form AB-100) for each person listed below. Attach additional sheets if necessary.

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Last Name	First Name	Title	Phone
Wagner	Cassandra	Board Chair	(920) 988-7517
Van Ert	Bridget	Vice Chair	(262) 434-0027
Lanser	Karen	Secetary	(920) 988-8294
Heinzelman	Sharon	Treasurer	(262) 844-3369
Peacy	Linden	Executive Director	(414) 303-2079

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Continued →

Part C: Event Information

1. Name of Event (if applicable)
10th Annual Wine Walk

2. Dates of Operation
09/10/2026

3. Hours of Operation
4:30-8pm

4. Premises Address
14 E Main (White Oak)

5. City
Watertown

6. State
WI

7. Zip Code
53094

8. County
Jefferson

9. Governing Municipality ☒ City ☐ Town ☐ Village
of: Watertown

10. Aldermanic District
7

11. Organizer of Event (if not the named applicant)
Watertown Area Chamber of Commerce

12. Email and/or Phone Number for Organizer of Event
linden@watertownchamber.com

13. Organizer Website
watertownchamber.com

14. Event Website

15. Premises Description - Describe the building or buildings and any outside areas where alcohol beverages and records are sold, stored, or consumed, and related records are kept. Describe all rooms within the building, including living quarters. Authorized alcohol beverage activities and storage of records may occur only on the premises described in this application. Attach a map or diagram and additional sheets if necessary.

Retail sales floor, 1st floor inside only

Part D: Attestation

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Last Name	First Name	M.I.
Peacy	Linden	

Title	Email	Phone
Executive Director	linden@watertownchamber.com	(920) 261-6320

Signature

Date 7/7/26

Part E: For Clerk Use Only

Date Application Was Filed With Clerk	License Number
7/10/26	
Date License Granted	Date License Issued
Signature of Clerk/Deputy Clerk	

Form
AB-220

Temporary Alcohol Beverage License

Municipality
C. Watertown

License(s) Requested	Fees	
☑ Temporary "Class B" Wine ☐ Temporary Class "B" Beer	License Fees	$ 10.00
	Background Check	$
	Total Fees	$ 10.00

Part A: Organization Information

1. Organization Name
Watertown Area Chamber of Commerce

2. Organization Permanent Address
519 E Main St

3. City	4. State	5. Zip Code
Watertown	WI	53094

6. Mailing Address (if different from permanent address)

7. FEIN	8. Date of Organization/Incorporation	9. State of Organization/Incorporation
39-0689225	08/20/1920	Wisconsin

10. Phone	11. Email
920-261-6320	linden@watertownchamber.com

12. Organization type *(check one)*

☐ Bona Fide Club ☐ Church ☐ Fair Association/Agricultural Society ☐ Veteran's Organization
☐ Lodge/Society ☑ Chamber of Commerce or similar Civic or Trade Organization under ch. 181, Wis. Stats.

13. Is this organization required to hold a Wisconsin Seller's permit? ☐ Yes ☑ No

14. Wisconsin Seller's Permit Number (if applicable)

Part B: Individual Information

List the name, title, and phone number for all officers, directors, and agent of the organization. Include an Individual Questionnaire (Form AB-100) for each person listed below. Attach additional sheets if necessary.

Corporations must also include Alcohol Beverage Appointment of Agent (Form AB-101).

Last Name	First Name	Title	Phone
Wagner	Cassandra	Board Chair	(920) 988-7517
Van Ert	Bridget	Vice Chair	(262) 434-0027
Lanser	Karen	Secetary	(920) 988-8294
Heinzelman	Sharon	Treasurer	(262) 844-3369
Peacy	Linden	Executive Director	(414) 303-2079

TO PD
7/10 NF

Continued →

Part C: Event Information

1. Name of Event (if applicable)
10th Annual Wine Walk

2. Dates of Operation
09/10/2026

3. Hours of Operation
4:30-8pm

4. Premises Address
212 E Main Street (Brown Shoes)

5. City
Watertown

6. State
WI

7. Zip Code
53094

8. County
Jefferson

9. Governing Municipality ☒ City ☐ Town ☐ Village
of: Watertown

10. Aldermanic District
7

11. Organizer of Event (if not the named applicant)
Watertown Area Chamber of Commerce

12. Email and/or Phone Number for Organizer of Event
linden@watertownchamber.com

13. Organizer Website
watertownchamber.com

14. Event Website

15. Premises Description - Describe the building or buildings and any outside areas where alcohol beverages and records are sold, stored, or consumed, and related records are kept. Describe all rooms within the building, including living quarters. Authorized alcohol beverage activities and storage of records may occur only on the premises described in this application. Attach a map or diagram and additional sheets if necessary.

Retail sales floor, 1st floor inside only

Part D: Attestation

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Last Name	First Name	M.I.
Peacy	Linden	

Title	Email	Phone
Executive Director	linden@watertownchamber.com	(920) 261-6320

Signature

Date 7/7/26

Part E: For Clerk Use Only

Date Application Was Filed With Clerk	License Number
7/10/26	
Date License Granted	**Date License Issued**

Signature of Clerk/Deputy Clerk

Form
AB-220

Temporary Alcohol Beverage License

Municipality: C. Watertown

License(s) Requested	Fees	
☑ Temporary "Class B" Wine ☐ Temporary Class "B" Beer	License Fees	$ 10.00
	Background Check	$
	Total Fees	$ 10.00

Part A: Organization Information

1. Organization Name: Watertown Area Chamber of Commerce

2. Organization Permanent Address: 519 E Main St

3. City	4. State	5. Zip Code
Watertown	WI	53094

6. Mailing Address (if different from permanent address)

7. FEIN	8. Date of Organization/Incorporation	9. State of Organization/Incorporation
39-0689225	08/20/1920	Wisconsin

10. Phone	11. Email
920-261-6320	linden@watertownchamber.com

12. Organization type *(check one)*

☐ Bona Fide Club ☐ Church ☐ Fair Association/Agricultural Society ☐ Veteran's Organization
☐ Lodge/Society ☑ Chamber of Commerce or similar Civic or Trade Organization under ch. 181, Wis. Stats.

13. Is this organization required to hold a Wisconsin Seller's permit? ☐ Yes ☑ No

14. Wisconsin Seller's Permit Number (if applicable)

Part B: Individual Information

List the name, title, and phone number for all officers, directors, and agent of the organization. Include an Individual Questionnaire (Form AB-100) for each person listed below. Attach additional sheets if necessary.

Corporations must also include Alcohol Beverage Appointment of Agent (Form AB-101).

Last Name	First Name	Title	Phone
Wagner	Cassandra	Board Chair	(920) 988-7517
Van Ert	Bridget	Vice Chair	(262) 434-0027
Lanser	Karen	Secetary	(920) 988-8294
Heinzelman	Sharon	Treasurer	(262) 844-3369
Peacy	Linden	Executive Director	(414) 303-2079

TD PD 7/10 NF

Continued →

Part C: Event Information

1. Name of Event (if applicable)
10th Annual Wine Walk

2. Dates of Operation
09/10/2026

3. Hours of Operation
4:30-8pm

4. Premises Address
300 E Main Street (Central Block)

5. City
Watertown

6. State
WI

7. Zip Code
53094

8. County
Jefferson

9. Governing Municipality ☒ City ☐ Town ☐ Village
of: Watertown

10. Aldermanic District
7

11. Organizer of Event (if not the named applicant)
Watertown Area Chamber of Commerce

12. Email and/or Phone Number for Organizer of Event
linden@watertownchamber.com

13. Organizer Website
watertownchamber.com

14. Event Website

15. Premises Description - Describe the building or buildings and any outside areas where alcohol beverages and records are sold, stored, or consumed, and related records are kept. Describe all rooms within the building, including living quarters. Authorized alcohol beverage activities and storage of records may occur only on the premises described in this application. Attach a map or diagram and additional sheets if necessary.

Retail sales floor, 1st floor inside only

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Last Name	First Name	M.I.
Peacy	Linden	

Title	Email	Phone
Executive Director	linden@watertownchamber.com	(920) 261-6320

Signature

Date 7/2/26

Part E: For Clerk Use Only

Date Application Was Filed With Clerk	License Number
7/10/26	
Date License Granted	**Date License Issued**
Signature of Clerk/Deputy Clerk	

Form
AB-220

Temporary Alcohol Beverage License

Municipality: C. Watertown

License(s) Requested	Fees	
☑ Temporary "Class B" Wine ☐ Temporary Class "B" Beer	License Fees	$ 10.00
	Background Check	$
	Total Fees	$ 10.00

Part A: Organization Information

1. Organization Name: Watertown Area Chamber of Commerce

2. Organization Permanent Address: 519 E Main St

3. City	4. State	5. Zip Code
Watertown	WI	53094

6. Mailing Address (if different from permanent address)

7. FEIN	8. Date of Organization/Incorporation	9. State of Organization/Incorporation
39-0689225	08/20/1920	Wisconsin

10. Phone	11. Email
920-261-6320	linden@watertownchamber.com

12. Organization type *(check one)*

☐ Bona Fide Club ☐ Church ☐ Fair Association/Agricultural Society ☐ Veteran's Organization
☐ Lodge/Society ☑ Chamber of Commerce or similar Civic or Trade Organization under ch. 181, Wis. Stats.

13. Is this organization required to hold a Wisconsin Seller's permit? ☐ Yes ☑ No

14. Wisconsin Seller's Permit Number (if applicable)

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Lanser	Karen	Secetary	(920) 988-8294
Heinzelman	Sharon	Treasurer	(262) 844-3369
Peacy	Linden	Executive Director	(414) 303-2079

TO PD
7/10 NF

Continued →

Part C: Event Information

1. Name of Event (if applicable)
10th Annual Wine Walk

2. Dates of Operation
09/10/2026

3. Hours of Operation
4:30-8pm

4. Premises Address
114 W Main St. (Sassy Sweets)

5. City
Watertown

6. State
WI

7. Zip Code
53094

8. County
Jefferson

9. Governing Municipality ☒ City ☐ Town ☐ Village
of: Watertown

10. Aldermanic District
7

11. Organizer of Event (if not the named applicant)
Watertown Area Chamber of Commerce

12. Email and/or Phone Number for Organizer of Event
linden@watertownchamber.com

13. Organizer Website
watertownchamber.com

14. Event Website

15. Premises Description - Describe the building or buildings and any outside areas where alcohol beverages and records are sold, stored, or consumed, and related records are kept. Describe all rooms within the building, including living quarters. Authorized alcohol beverage activities and storage of records may occur only on the premises described in this application. Attach a map or diagram and additional sheets if necessary.

Retail sales floor, 1st floor inside only

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Last Name	First Name	M.I.
Peacy	Linden	

Title	Email	Phone
Executive Director	linden@watertownchamber.com	(920) 261-6320

Signature

Date 7/7/26

Part E: For Clerk Use Only

Date Application Was Filed With Clerk	License Number
7/10/26	
Date License Granted	**Date License Issued**
Signature of Clerk/Deputy Clerk	

Form
AB-220

Temporary Alcohol Beverage License

Municipality
C. Watertown

License(s) Requested	Fees	
☑ Temporary "Class B" Wine ☐ Temporary Class "B" Beer	License Fees	$ 10.00
	Background Check	$
	Total Fees	$ 10.00

Part A: Organization Information

1. Organization Name
Watertown Area Chamber of Commerce

2. Organization Permanent Address
519 E Main St

3. City	4. State	5. Zip Code
Watertown	WI	53094

6. Mailing Address (if different from permanent address)

7. FEIN	8. Date of Organization/Incorporation	9. State of Organization/Incorporation
39-0689225	08/20/1920	Wisconsin

10. Phone	11. Email
920-261-6320	linden@watertownchamber.com

12. Organization type *(check one)*

☐ Bona Fide Club ☐ Church ☐ Fair Association/Agricultural Society ☐ Veteran's Organization
☐ Lodge/Society ☑ Chamber of Commerce or similar Civic or Trade Organization under ch. 181, Wis. Stats.

13. Is this organization required to hold a Wisconsin Seller's permit? ☐ Yes ☑ No

14. Wisconsin Seller's Permit Number (if applicable)

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Lanser	Karen	Secetary	(920) 988-8294
Heinzelman	Sharon	Treasurer	(262) 844-3369
Peacy	Linden	Executive Director	(414) 303-2079

TO PD
7/10 NF

Continued →

Part C: Event Information

1. Name of Event (if applicable)
10th Annual Wine Walk

2. Dates of Operation
09/10/2026

3. Hours of Operation
4:30-8pm

4. Premises Address
118 W Main Street (Oswald-Konz)

5. City
Watertown

6. State
WI

7. Zip Code
53094

8. County
Jefferson

9. Governing Municipality ☒ City ☐ Town ☐ Village
of: Watertown

10. Aldermanic District
7

11. Organizer of Event (if not the named applicant)
Watertown Area Chamber of Commerce

12. Email and/or Phone Number for Organizer of Event
linden@watertownchamber.com

13. Organizer Website
watertownchamber.com

14. Event Website

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Retail sales floor, 1st floor inside only

Part D: Attestation

Who must sign this application?

- one officer or director of the nonprofit organization

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Last Name	First Name	M.I.
Peacy	Linden	

Title	Email	Phone
Executive Director	linden@watertownchamber.com	(920) 261-6320

Signature

Date 7/7/26

Part E: For Clerk Use Only

Date Application Was Filed With Clerk	License Number
7/10/26	
Date License Granted	**Date License Issued**

Signature of Clerk/Deputy Clerk

Form
AB-220

Temporary Alcohol Beverage License

Municipality: C. Watertown

License(s) Requested	Fees	
☑ Temporary "Class B" Wine ☐ Temporary Class "B" Beer	License Fees	$ 10.00
	Background Check	$
	Total Fees	$ 10.00

Part A: Organization Information

1. Organization Name: Watertown Area Chamber of Commerce

2. Organization Permanent Address: 519 E Main St

3. City	4. State	5. Zip Code
Watertown	WI	53094

6. Mailing Address (if different from permanent address)

7. FEIN	8. Date of Organization/Incorporation	9. State of Organization/Incorporation
39-0689225	08/20/1920	Wisconsin

10. Phone	11. Email
920-261-6320	linden@watertownchamber.com

12. Organization type *(check one)*

☐ Bona Fide Club ☐ Church ☐ Fair Association/Agricultural Society ☐ Veteran's Organization
☐ Lodge/Society ☑ Chamber of Commerce or similar Civic or Trade Organization under ch. 181, Wis. Stats.

13. Is this organization required to hold a Wisconsin Seller's permit? ☐ Yes ☑ No

14. Wisconsin Seller's Permit Number (if applicable)

Part B: Individual Information

List the name, title, and phone number for all officers, directors, and agent of the organization. Include an Individual Questionnaire (Form AB-100) for each person listed below. Attach additional sheets if necessary.

Corporations must also include Alcohol Beverage Appointment of Agent (Form AB-101).

Last Name	First Name	Title	Phone
Wagner	Cassandra	Board Chair	(920) 988-7517
Van Ert	Bridget	Vice Chair	(262) 434-0027
Lanser	Karen	Secetary	(920) 988-8294
Heinzelman	Sharon	Treasurer	(262) 844-3369
Peacy	Linden	Executive Director	(414) 303-2079

TO PD
7/10 NF

Continued →

Part C: Event Information

1. Name of Event (if applicable)
10th Annual Wine Walk

2. Dates of Operation
09/10/2026

3. Hours of Operation
4:30-8pm

4. Premises Address
120 W Main Street Chapman Bowls

5. City
Watertown

6. State
WI

7. Zip Code
53098

8. County
Jefferson

9. Governing Municipality of: ☒ City ☐ Town ☐ Village
Watertown

10. Aldermanic District
7

11. Organizer of Event (if not the named applicant)
Watertown Area Chamber of Commerce

12. Email and/or Phone Number for Organizer of Event
linden@watertownchamber.com

13. Organizer Website
watertownchamber.com

14. Event Website

15. Premises Description - Describe the building or buildings and any outside areas where alcohol beverages and records are sold, stored, or consumed, and related records are kept. Describe all rooms within the building, including living quarters. Authorized alcohol beverage activities and storage of records may occur only on the premises described in this application. Attach a map or diagram and additional sheets if necessary.

Retail sales floor, 1st floor inside only

Part D: Attestation

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Form
AB-220

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Municipality: C. Watertown

License(s) Requested	Fees	
☑ Temporary "Class B" Wine ☐ Temporary Class "B" Beer	License Fees	$ 10.00
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Peacy	Linden	Executive Director	(414) 303-2079

TD PD
7110 NF

Continued →

Part C: Event Information

1. Name of Event (if applicable)
10th Annual Wine Walk

2. Dates of Operation
09/10/2026

3. Hours of Operation
4:30-8pm

4. Premises Address
110 N 3rd Street (Badger State Hydrate)

5. City
Watertown

6. State
WI

7. Zip Code
53094

8. County
Jefferson

9. Governing Municipality ☒ City ☐ Town ☐ Village
of: Watertown

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