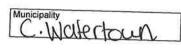
## Form

**AB-220** 

## **Temporary Alcohol Beverage License**



License(s) Requested			F	ees
☐ Temporary "Class B" Wine	s=1		License Fees	\$ 10.0
	ine Temporary Clas	ss "B" Beer	Background Check	\$
			Total Fees	\$ 10.00
				10.00
art A: Organization Informatio	on .			
Organization Name				
Whitetails	Unlimited	/		
ryalization Permanent Address				-
2100 Michie	jan Di			
Sturgeon 1	Ban		4. State 5. Z	ip Code
Mailing Address (if different from perma	anent address)		141 5	4235
2100 Michia	an St. POBO	x720,5	warm B	y WI 54 2
39-1415070	8. Date of Organization/Inco	prporation	9. State of Organization	(Incorporation
Phone.	1/1/148	2	770	
800 274-5471	11. Email			-
Organization type (check one)				
Bona Fide Club Ch	urch	n/Agricultural Society		_
☐ Lodge/Society	amber of Commerce or similar	Civic or Trade Organ	y	Organization
				, vvis. Stats.
s this organization required to hold	a Wisconsin Seller's permit?			Yes 🗌 No
Visconsin Seller's Permit Number (if ap	plicable)			7
0555 68417				
D. Individual Co.				
B: Individual Information				
the name, title, and phone number m AB-100) for each person listed b	r for all officers, directors, and a	gent of the organiza	ation. Include an Indiv	idual Questionnaire
orations must also include Alcohol				
	t Name	Title	Phon	е
1000 Z	Son	Co Chai	0 976	1000 E-XID
2 4		Co Chai	120	79885Z19 72618932
	San	Co Chair	r 1926	2618935

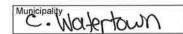
 $Continued \rightarrow$ 

Part C: Event Information						
1. Name of Event (if applicable)						
Sounds of Summer Concert Series						
2. Dates of Operation 3. Hours of Operation Corporation Corporation						
4. Premises Address Bentzin Family To	wn Square, I W. Main St., Watertown					
5. City. Vater town 6. State 7. Zip Code W 53094						
8. County efferson 9.	Governing Municipality City Town Village 10. Aldermanic District of:					
11. Organizer of Event (if not the named applicant)	12. Email and/or Phone Number for Organizer of Event S \ W \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \					
13. Organizer Website	14. Event Website Water town w. gov/departments/part revent					
stored, or consumed, and related records a alcohol beverage activities and storage of or diagram and additional sheets if necessary	g or buildings and any outside areas where alcohol beverages and records are sold, are kept. Describe all rooms within the building, including living quarters. Authorized records may occur only on the premises described in this application. Attach a map ary.					
Bentzin Family Town Square is a city park located at corner of wirman st. and S. Waterst.						
at corner of W. Man S. and S. Water ST.						
Alcohol seles will be 10 cated on S. Water St. adjacent						
to 18ah Square						
Part D: Attestation						
Who must sign this application?						
one officer or director of the nonprofit orga	anization					
READ CAREFULLY BEFORE SIGNING: Un truthfully, I agree that I am acting solely on bo	der penalty of law, I have answered each of the above questions completely and					
seeking the license. Further, I agree that the r to another individual or entity. I agree to open from Wisconsin-permitted wholesalers. I under be deemed a refusal to allow inspection. Such that any license issued contrary to Wis. Stat. be prosecuted for submitting false statements	ehalf of the applicant organization and not on behalf of any other individual or entity rights and responsibilities conferred by the license(s), if granted, will not be assigned rate according to the law, including but not limited to, purchasing alcohol beverages estand that lack of access to any portion of a licensed premises during inspection will the refusal is a misdemeanor and grounds for revocation of this license. I understand Chapter 125 shall be void under penalty of state law. I further understand that I may and affidavits in connection with this application, and that any person who knowingly application may be required to forfeit not more than \$1,000 if convicted.					
seeking the license. Further, I agree that the r to another individual or entity. I agree to open from Wisconsin-permitted wholesalers. I under be deemed a refusal to allow inspection. Such that any license issued contrary to Wis. Stat. be prosecuted for submitting false statements	rate according to the law, including but not limited to, purchasing alcohol beverages stratand that lack of access to any portion of a licensed premises during inspection will h refusal is a misdemeanor and grounds for revocation of this license. I understand Chapter 125 shall be void under penalty of state law. I further understand that I may and affidavits in connection with this application, and that any person who knowingly					
seeking the license. Further, I agree that the r to another individual or entity. I agree to ope from Wisconsin-permitted wholesalers. I unde be deemed a refusal to allow inspection. Suc that any license issued contrary to Wis. Stat. be prosecuted for submitting false statements provides materially false information on this a	rights and responsibilities conferred by the license(s), if granted, will not be assigned rate according to the law, including but not limited to, purchasing alcohol beverages extand that lack of access to any portion of a licensed premises during inspection will the refusal is a misdemeanor and grounds for revocation of this license. I understand Chapter 125 shall be void under penalty of state law. I further understand that I may and affidavits in connection with this application, and that any person who knowingly application may be required to forfeit not more than \$1,000 if convicted.  First Name  M.I.  Phone					
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seeking the license. Further, I agree that the reto another individual or entity. I agree to oper from Wisconsin-permitted wholesalers. I under be deemed a refusal to allow inspection. Such that any license issued contrary to Wis. Stat. be prosecuted for submitting false statements provides materially false information on this at Last Name  Title  Signature  Part E: For Clerk Use Only	rights and responsibilities conferred by the license(s), if granted, will not be assigned rate according to the law, including but not limited to, purchasing alcohol beverages extand that lack of access to any portion of a licensed premises during inspection will he refusal is a misdemeanor and grounds for revocation of this license. I understand Chapter 125 shall be void under penalty of state law. I further understand that I may and affidavits in connection with this application, and that any person who knowingly application may be required to forfeit not more than \$1,000 if convicted.  First Name  Phone  Phone  Phone  Date  Phone  Date  Phone  Date					
seeking the license. Further, I agree that the reto another individual or entity. I agree to oper from Wisconsin-permitted wholesalers. I under be deemed a refusal to allow inspection. Such that any license issued contrary to Wis. Stat. be prosecuted for submitting false statements provides materially false information on this at the contract of th	rights and responsibilities conferred by the license(s), if granted, will not be assigned rate according to the law, including but not limited to, purchasing alcohol beverages strated that lack of access to any portion of a licensed premises during inspection will the refusal is a misdemeanor and grounds for revocation of this license. I understand Chapter 125 shall be void under penalty of state law. I further understand that I may and affidavits in connection with this application, and that any person who knowingly application may be required to forfeit not more than \$1,000 if convicted.  First Name  Date  Phone  Date  License Number					
seeking the license. Further, I agree that the reto another individual or entity. I agree to open from Wisconsin-permitted wholesalers. I under be deemed a refusal to allow inspection. Such that any license issued contrary to Wis. Stat. be prosecuted for submitting false statements provides materially false information on this at Last Name  Title  Signature  Part E: For Clerk Use Only  Date Application Was Filed With Clerk	rights and responsibilities conferred by the license(s), if granted, will not be assigned rate according to the law, including but not limited to, purchasing alcohol beverages extand that lack of access to any portion of a licensed premises during inspection will he refusal is a misdemeanor and grounds for revocation of this license. I understand Chapter 125 shall be void under penalty of state law. I further understand that I may and affidavits in connection with this application, and that any person who knowingly application may be required to forfeit not more than \$1,000 if convicted.  First Name  Phone  Phone  Phone  Date  Phone  Date  Phone  Phone  Phone  Date					

Form

**AB-220** 

## **Temporary Alcohol Beverage License**



License(s) Requested			Fees		
☐ Temporary "Class B" Wine		Licens	se Fees	\$ 10.00	
	Vine 💢 Temporary Class "B" Beer	B" Beer Backg	round Check	\$	
	(6) (6)	Total	Fees	\$ 10.00	
				.0.0	
Part A: Organization Informati  1. Organization Name					
whitetails (	Infrancted				
2. Organization Permanent Address 2)00 Mr Chro	St. St				
3. City	199 0.	4	State 5. Z	Zip Code	
Sturgeon ?	13ay		W 5	54235	
6. Mailing Address (Addresent from perr 2100 M, Chiqan	manent address) BA x 723	), Sturgeon	Back , (A	11 54235	
7. FEIN	8. Date of Organization/Incor		e of Organization	n/Incorporation	
39-1415070	7/1/198	2			
10, Phone	11. Email				
400-274-547					
12. Organization type (check one)					
· ·	_	n/Agricultural Society	_	Organization	
☐ Lodge/Society →	Chamber of Commerce or similar (	Civic or Trade Organizatio	n under ch. 18	31, Wis. Stats.	
13. Is this organization required to he	old a Wisconsin Seller's permit?	i kateli kateli kateli kateli kateli	. 22.24. 22.24 22.2	🔀 Yes 🗌 No	
14. Wisconsin Seller's Permit Number (if				N	
0355684 1	9				
				<del>-</del>	
Part B: Individual Information					
List the name, title, and phone num			Include an Inc	dividual Questionnaire	
(Form AB-100) for each person liste Corporations must also include Alco					
·			Dh		
	First Name	Title Water town		one	
Bartz	Don	Waterfood	/	20-988-529	
Bacts	Dan	Worker fown U	apter 9	20-261-893	
1,41,12	() () () () () () () () () () () () () (	CO COQIA		(10/2	

 $Continued \rightarrow$ 

Part C: Event Information					
1. Name of Event (if applicable)					
Sounds of Symmer Concert Series					
2. Dates of Operation	3. Hours of Operation				
	Cpm-10 pm				
4. Premises Address Bentzu Family Toan Square, I W. Main St., Water Hoan WI					
Watertown	W 53094				
8. County 9. Governing Municipality City Town Village 10. Aldermanic District of: Water Town					
11. Organizer of Event (if not the named applicant) 12.	Email and/or Phone Number for Organizer of Event				
	Juhl@ Watertown wi, god				
13. Organizer Website Water 1800 NWI. 90V/department	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					
Bentzen Family Town Sq	mare is a city park located				
Bentzin family Town Square is a city park located at corner of whoman st. and swater st.					
Hicohol Sales will be located on 5. water 2. adjacen					
to BFTS					
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 Dance				
Title Water town Charter Co Chair debart & Qattinet 920-201-893					
Signature Date 5/2/2024					
Part E: For Clerk Use Only					
Date Application Was Filed With Clerk	License Number				
Date License Granted	Date License Issued				
I .	Bate Electrice todaed				
Signature of Clerk/Deputy Clerk	Date Election issued				