CITY OF STOUGHTON

FEE: $30.00

SPECIAL EVENT LICENSE APPLICATION

I. APPLICANT

Name	Address	Home Telephone #	Work Telephone #
Michael Engelberger	[redacted]	[redacted]	same

II. ORGANIZATION

Name	Address	Telephone #
Sustainable Stoughton Inc.	209 N. Harrison St Stoughton WI 53589	(608)444-5990

III. EVENT

Type of event: ☐ Outdoor ☒ Indoor ☐ Parade

Name of Event: Earth Day Expo

Date and time: From April 21, 2018 3 PM To April 21, 2018 10 PM

Location: Lagaret 515 E. Main St Stoughton WI 53589

Will there be any activity taking place that involves music, amplifiers, loudspeakers, etc?

☒ Yes (attach additional sheet with description and times of activities) ☐ No Indoor only

License applying for: $10.00 individually or for both

☒ Temporary Class "B" beer ☒ Temporary Class "B" wine

Persons proposed to sell fermented malt beverages and/or wine (attach additional sheet if necessary)

Name	Address	Prior relevant experience(s)
Vik Malling	[redacted]	Bar Owner
+ Employees		

ATTACH: A sketch showing the layout for handling fermented malt beverages and/or wine.
A copy of the application or license of each person(s) who will be holding the beverage operator's license who requires the supervision of the sale of fermented malt beverages and/or wine.
A list of adjacent property owners and a copy of the form used to notify them of the event. (outdoor event only)

I, Michael Engelberger (applicant), agree to promptly pay the City for the City's charges incurred either in regulating this license or remedying any unsatisfactory post-event maintenance by the above named person or organization as required.

Signature: [signature] Date: 2/6/2018

Office Use: Date Paid _____ Amount Paid _____ Receipt Number _____

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 $_ Application Date: 2/6/2018

☐ Town ☐ Village ☒ City of Stoughton County of Dane

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 3:00 pm and ending 10:00 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 ☒ Chamber of Commerce or similar Civic or Trade Organization ☐ Veteran's Organization ☐ Fair Association

(a) Name Sustainable Stoughton Inc

(b) Address 209 N. Harrison St Stoughton WI 53589
(Street) ☐ Town ☐ Village ☒ City

(c) Date organized _____

(d) If corporation, give date of incorporation 6/15/2015

(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 Kristi Panthofer
Vice President Roger Springman
Secretary Michael Engelberger
Treasurer Regina Hirsch

(g) Name and address of manager or person in charge of affair: Michael Engelberger
[redacted] Stoughton WI 53589

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 The Lagaret 515 E. Main St Stoughton WI 53589

(b) Lot _____ Block _____

(c) Do premises occupy all or part of building? All

(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 Earth Day Expo

(b) Dates of event Saturday April 21, 2018 3pm-5pm 1st floor, 5pm-10pm 2nd floor

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.

Sustainable Stoughton
(Name of Organization)

Officer [signature] (Signature/date)

Officer [signature] (Signature/date)

Officer [signature] (Signature/date)

Officer [signature] 2/3/18 (Signature/date)

Date Filed with Clerk _____

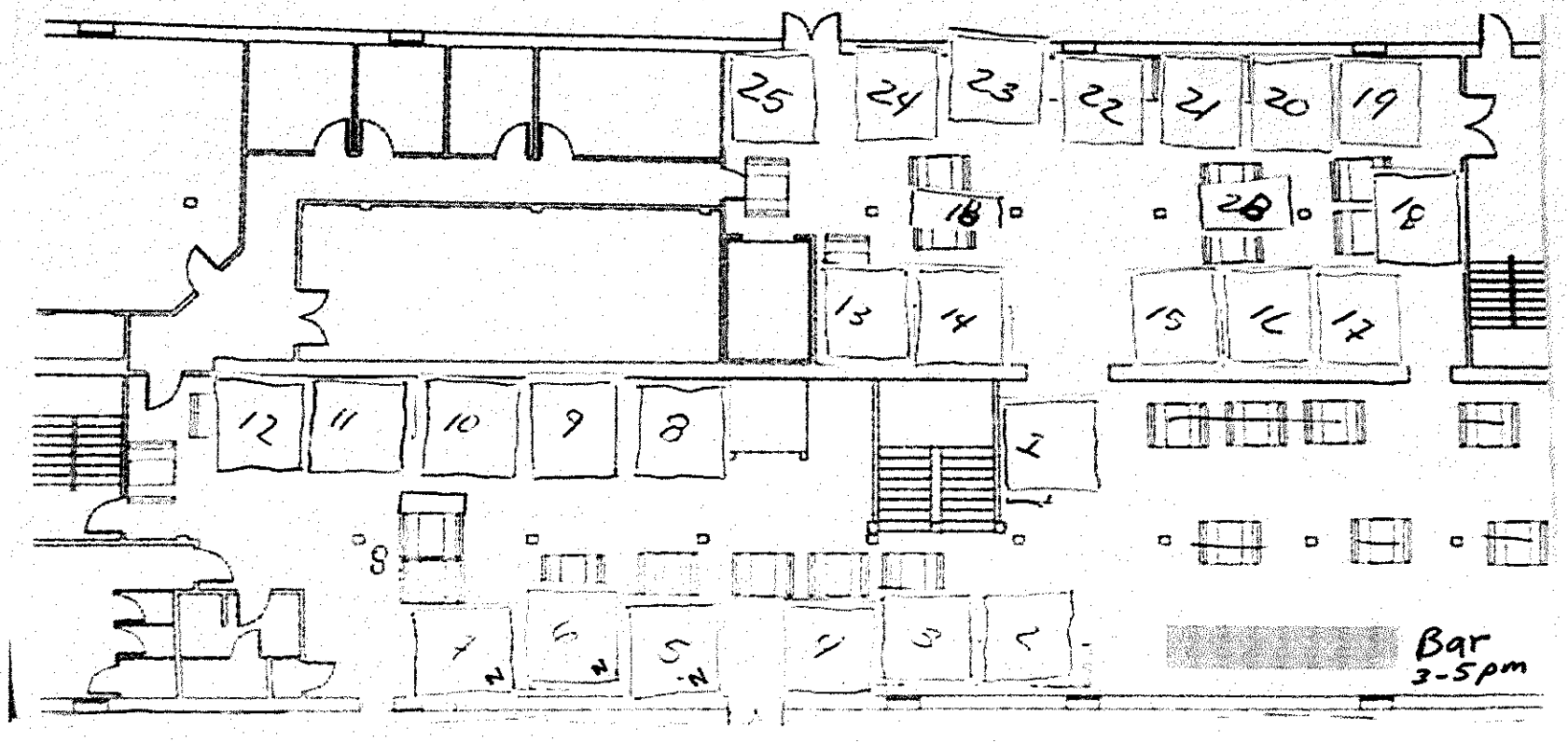
Date Reported to Council or Board _____

Date Granted by Council _____

License No. _____

MAIN ST.

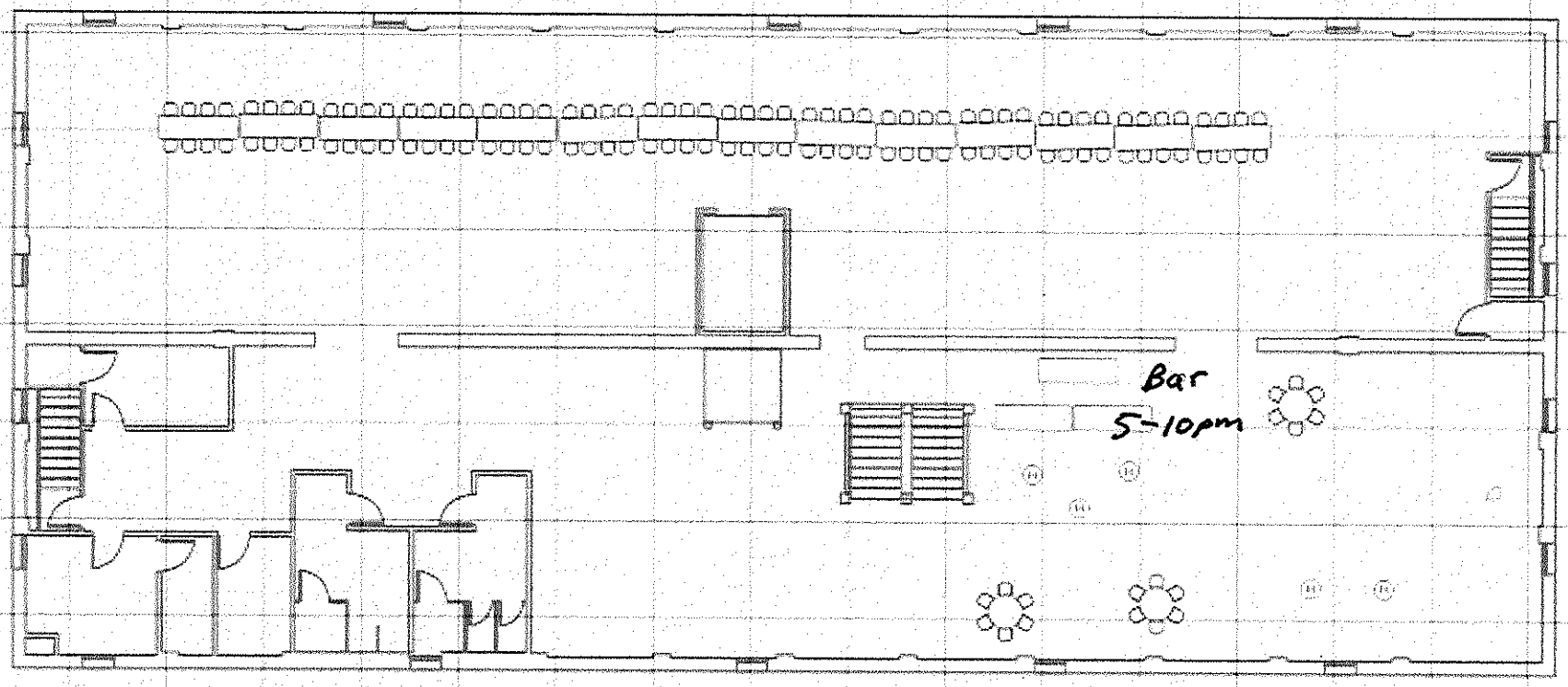
Lagaret 515 E. Main St



1st floor

Main St

Lagaret 515 E. Main St



2nd floor