

CITY OF CHIPPEWA FALLS, WISCONSIN
NOTICE OF PUBLIC MEETING

SPECIAL COUNCIL MEETING

In accordance with the provisions of the Wisconsin State Statutes, Sec. 19.84, notice is hereby given that a public meeting of the:

COMMON COUNCIL will be held on **Thursday, June 28, 2018 at 10:00 am**

City Hall, Council Chambers, 30 West Central Street, Chippewa Falls, WI.

Items of business to be discussed or acted upon at this meeting are shown on the agenda below:

1. **CLERK CALLS THE ROLL**
2. **APPLICATIONS**
 - (a) Consider Operator (Bartender) License Applications as approved by the Police Department. *(Complete list provided prior to Council meeting)*.
 - (b) Consider Application for Temporary Class "B" Beer Retailer's License from the St. Charles Parish for the St. Charles Church Picnic to be held on June 30, 2018 at 810 Pearl Street.
3. **ADJOURNMENT**

NOTE: REASONABLE ACCOMMODATIONS FOR PARTICIPATION BY INDIVIDUALS WITH DISABILITIES WILL BE MADE UPON REQUEST. FOR ADDITIONAL INFORMATION OR TO REQUEST THIS SERVICE, CONTACT THE CITY CLERK AT 726-2719.

Please note that attachments to this agenda may not be final and are subject to change.
This agenda may be amended as it is reviewed.

CERTIFICATION OF OFFICIAL NEWSPAPER

I hereby certify that a copy of this notice has been posted on the bulletin board at City Hall and a copy has been given to the Chippewa Herald on June 27, 2018 at 7:15 am by BNG.

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: 6/25/18

Town Village City of Chippewa Falls

County of Chippewa

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 6/30/18 and ending 6/30/18 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: ~~Greg Gilbertson~~ St. Charles Parish

(b) Address: 810 Pearl St., Chippewa Falls, WI 54729
(Street) Town Village City

(c) Date organized 1884

(d) If corporation, give date of incorporation N/A

(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, addresses and phone numbers of all officers:

President Mrs. Michael Gorman: 810 Pearl St, Chippewa Falls, WI 54729

Vice President Fr. Mark Miller

Secretary J. McMahon

Treasurer Janet Wolke

(g) Name and address of manager or person in charge of affair: Greg Gilbertson, (715) 225-1995
602 Miles St, CF

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 St. Charles Church, ~~810~~ 810 Pearl St, CF

(b) Lot _____ Block _____

(c) Do premises occupy all or part of building? Festivities in Church, School ~~Building~~ basement +

(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: Church building, outdoor grounds, & School basement Family event

(e) Will minors be present? Yes Reason for minors being present: Security measures: Beer sold on grounds for adults only

3. Name of Event

(a) List name of the event St. Charles Church Picnic

(b) Dates and times of event 6/30/18 5:00pm - 10:00pm

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.

St. Charles Parish
(Name of Organization)

Officer Fr. Mark Miller
(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. _____

Police Department Approval _____

Date _____ Wisconsin Department of Revenue