

R#90653  
7/1/14 } \$20.00

# 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: 6-18-13

☐ Town ☒ Village ☐ City of Allouez County of Brown

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 7/31/14 <sup>5:30 - 9:00 PM</sup> and ending 7/31/14 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

(a) Name Resurrection Catholic Parish

(b) Address 333 Hilltop Dr., Green Bay, WI 54301  
(Street) ☐ Town ☒ Village ☐ City

(c) Date organized 10/1963

(d) If corporation, give date of incorporation 10/1963

(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 Bishop Robert Morneau

Vice President \_\_\_\_\_

Secretary Kathryn Barry

Treasurer Paul Defriet

(g) Name and address of manager or person in charge of affair: Shirley Dehaca, 333 Hilltop Dr., Green Bay WI 54301 <sup>SOL</sup> Craig Siminski

2. LOCATION OF PREMISES WHERE BEER AND/OR WINE WILL BE SOLD:

(a) Street number 333 Hilltop

(b) Lot \_\_\_\_\_ Block \_\_\_\_\_

(c) Do premises occupy all or part of building? Welcoming Center, Gathering area

(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 Brats, Beer and Bingo

(b) Dates of event 7-31-14

## 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.

Resurrection Catholic Parish  
(Name of Organization)

Officer \_\_\_\_\_  
(Signature/date)

Officer Robert J. Morneau 7/1/14 6/14/13  
(Signature/date)

Officer \_\_\_\_\_  
(Signature/date)

Officer Paul Defriet 7/1/14  
(Signature/date)

Date Filed with Clerk \_\_\_\_\_

Date Reported to Council or Board \_\_\_\_\_

Date Granted by Council \_\_\_\_\_

License No. \_\_\_\_\_

**NOISE VARIANCE PERMIT APPLICATION  
VILLAGE OF ALLOUEZ**

Please return completed application at least four weeks before the event to the Allouez Administrator, 1900 Libal Street, Green Bay, WI 54301. Applications received after that time may not be processed.

Please Type or Print -

Type of Event: Brats, Beer and Bingo

Date(s) of Event: 7/31/2014

Time(s) of Operation: 6:30 - 9:00 PM

Location of Event: Park grounds

Approx. # of people attending 60

Security Provisions (DEO Officer will need to sign off after consultation)

- PLANNING ON BEING INSIDE - R. Zapp - AED

Name of Applicant: Sheila DeLuca Phone #: 920 336 7768

Address of Applicant: 333 Hilltop Dr.

Reason for Noncompliance with Noise Ordinance: outside picnic  
if weather is good

Describe steps applicant can reasonably take to minimize noise:

Microphone

Equipment and Operation involved: microphone, music

Place on the \_\_\_\_\_ Village Board agenda.

Name of responsible person who will be in attendance at event: Sheila DeLuca

Contact phone #: 920 336 7768 Site Contact phone #: SAME

\*\*\*Any and all additional police service expenditures will be billed to applicant\*\*\*

Sheila DeLuca 7-1-14  
Applicant's Signature Date Signed

Please refer to the Village of Allouez Noise Ordinance