



OFFICIAL PUBLIC NOTICE
MEETING OF THE PUBLIC SAFETY COMMITTEE
TUESDAY, JUNE 03, 2025 AT 5:30 PM

SMALL CONFERENCE ROOM, MUNICIPAL BUILDING; 450 S. MAIN STREET; RICHLAND CENTER, WI 53581

AGENDA

CALL TO ORDER *Roll Call for the meeting, determine whether a quorum is present; determine whether the meeting has been properly noticed.*

APPROVAL OF MINUTES

1. PSC Minutes from 5-5-2025

APPROVAL OF OPERATOR LICENSES

DISCUSSION AND ACTION ITEMS

2. Approval of Alcohol Beverage License.
3. Approval of Municipal Licenses
4. Application for Temporary "Class B" Retailer License for the Greater Richland Area Chamber Taste of the Hills event on 6/21/2025 from 4pm -9pm at Krouskop Park
5. Application for Temporary Class "B" Retailer License for Southwest Partners Inc dba Richland Rejuvenates RC Thunderfest event on 6/28/2025 from 12pm -11pm at Krouskop Park
6. Application for Temporary "Class B" Retailer License for AD German Warehouse Conservancy for a private event on 6/21/2025 from 12pm-6pm in the warehouse alley
7. Application for Temporary Class "B" Retailer License for Driftless Angler & Fly-Fishing Show at the Starlight 14 Drive-In on 6/6/2025 from 3pm-11pm
8. Street Closure Request for Cops and Bobbers on June 7th 7:30a to 11a. Eldon Store Drive.

CHIEF OF POLICE REPORT

REPORTS, REQUESTS, CONCERNS *No action will be taken on any matter originating under this item.*

SET NEXT MEETING DATE *First Monday of the Month*

ADJOURNMENT

Posted this 2nd day of June, 2025 by 4:30 PM.
Copy to the official newspaper the Richland Observer.

PLEASE NOTE: That upon reasonable notice, a minimum of 24 hours in advance, efforts will be made to accommodate the needs of disabled individuals through appropriate aids and services. For additional information or to request this service contact Ashley Oliphant, City Administrator at 450 S. Main St., Richland Center, WI. 53581 or call 608-647-3466. Notice is hereby given that the council members who are not members of this committee may attend this meeting so as to constitute a quorum of the city council. Any such council member attendance will be for information gathering, discussion, and/or related purposes and will not result in the direct decision making by the city council at the committee meeting. The City of Richland Center is an equal opportunity employer, provider, and lender.



MINUTES OF THE PUBLIC SAFETY COMMITTEE

MONDAY, MAY 05, 2025 AT 5:30 PM

SMALL CONFERENCE ROOM, MUNICIPAL BUILDING; 450 S. MAIN STREET; RICHLAND CENTER, WI 53581

Minutes

The meeting is called to order at 5:30 PM Fruit, and Downs all present.

APPROVAL OF MINUTES

Motion by Downs to approve the 4-14-2025 PSC minutes, seconded by Fruit. Motion carried. 2-0

APPROVAL OF OPERATOR LICENSES

Motion by Fruit to approve operator licenses as presented, seconded by Downs. Motion carried. 2-0

DISCUSSION AND ACTION ITEMS

2. Discussion by Safety Committee about Halloween 2025 Date and Time. Committee settled on 10-31-2025 from 4:30 PM to 7:00 PM
3. Motion by Downs to approve the Application for Mobile Dessert Establishment for Grandma's Ice Cream. Owner Nancy Schoepp, seconded by Fruit. Motion carried. 2-0
4. Discussion of streamlining the approval process of the way Municipal License's get approval. PSC likes the idea of streamlining the application process and being more applicant friendly.

CHIEF OF POLICE REPORT

5. RCPD April Report- Chief Jones Presented

REPORTS, REQUESTS, CONCERNS

Gas motor on a bicycle on the bike trail down in the area of White House.

Delivery Trucks unloading on Church Street to the North of Court St.

Ask Officer Wilson to talk or post Walk your Wheels posters in the school.

SET NEXT MEETING DATE: June 2nd, 2025, at 5:30 PM

ADJOURNMENT

Motion by Downs to adjourn the meeting at 6:14 PM, seconded by Fruit. Motion carried 2-0

CITY OF RICHLAND CENTER - AGENDA ITEM DATA SHEET

Item 2.

Agenda Item: License Renewals

Committee Review: Safety Committee

Meeting Date: June 3, 2025

Background: Annual Liquor, Tobacco, and Municipal Licenses

Department Recommendation: Approve the following annual license renewals

1. Alcohol Licenses – See attached list

2. Tobacco Licenses

Trade Name	Agent	Premise Address
Family Dollar Stores of Wisconsin, #24085	Todd Littler	390 S Main Street, Richland Center
Richland Smokes, LLC	Anan Barbarawi	165 Richland Square, Richland Center
Jax Enterprises IV Dba Richland Mobil Mart	Dennie Jax	1001 Hwy 14 West, Richland Center
Jax Enterprises II Dba Eastside BP	Dennie Jax	2407 Hwy 14 East, Richland Center
Kwik Trip, Inc #363	Lisa Granger	2393 Hwy 14 East, Richland Center
Kwik Trip, Inc #788	Monica Wheaton	378 W Seminary Street, Richland Center
Shaa LLC, Dba Triangle Kwik Stop	Harmit Miranpuri	845 Sextonville Road, Richland Center

3. Municipal Licenses

Trade Name	Agent	Premise Address	Type of License
Richland Locker Company	Craig C Huth	590 S Main Street, Richland Center	Abattoir
Jax Enterprises IV DBA Richland Mobil Mart	Dennie Jax	1001 Hwy 14 West, Richland Center	Arcade

4. Operator Licenses

- Donald McCarthy
- Dallas Johnson
- Monica Rynes
- Jane Kintz
- Christina Adsit
- Tim Oman
- Sheila Melby
- Steven Walther
- Kayla M Anderson
- Laurie L Perkins
- Alayne Hendricks
- Shauni Fink
- Emolyn Evans
- Morgen Hass
- Zachary Sittig
- Kandis Rutkowski
- Mini Pauls

Requested Action:

SAFETY:

- Motion to recommend to the Common Council to approve the presented list of alcohol license renewals, contingent upon final review and verification of each applicant's seller's permit and confirmation that their alcohol vendor account is in good standing.
- Motion to approve the presented list of Tobacco, Municipal, and Operator License renewals.

COUNCIL:

- Motion to approve the presented list of alcohol license renewals, contingent upon final review and verification of each applicant's seller's permit and confirmation that their alcohol vendor account is in good standing.
- Motion to approve the presented list of Tobacco and Municipal License renewals.

Attachment(s):

- Liquor License List – Published May 22, 2025

Notice is hereby given that a renewal application has been filed in the office of the Clerk of the City of Richland Center, Richland County Wisconsin for the following types of licenses.

<u>"Class A" Beer:</u>	<u>Address:</u>	<u>Registered Agent:</u>
Kwik Trip, Inc. #363	2393 Hwy 14 East	Lisa L. Granger
Tienda Mexicana Oasis	170 N. Main Street	Reynaldo Pedro-Landa

<u>Class "A" Liquor:</u>		
Turnipseed Properties, dba Added Touch Floral & Gifts	339 N. Main St.	Angela Turnipseed

<u>"Class A" Liquor: CIDER ONLY</u>		
Kwik Trip Inc. #363	2393 Hwy 14 East	Lisa L. Granger

<u>"Class A" Liquor and Beer:</u>		
Wal-Mart Stores East, LP	2401 Hwy 14 East	Donald Fieldhouse
Jax Enterprises IV (Mobile Mart)	1001 Hwy 14 West	Dennie Jax
Jax Enterprises II (Eastside BP)	2407 Highway 14 East	Dennie Jax
Kwik Trip, Inc. #788	378 W. Seminary St.	Monica L. Wheaton
Richland Locker Co.	590 S. Main St.	Craig Huth
Shaa LLC (Triangle Kwik Stop)	845 Sextonville Road	Harmit Miranpuri
Ocooch Books & Libations LLC	130 S. Main St.	Daniel T. Miller

<u>Class "B" Beer:</u>		
Mellem's Fish House LLC	1885 Allison Park Drive	Brenda A. Walther
Richland Family Restaurant LLC	211 N. Main St.	Abidin Bajrami
Pine River Smoke Co.	249 W. Court	Douglas Kratochwill
AD German Warehouse Conservancy	300 S. Church St	Timothy Abair
Delicias De Las 4 Hermanas LLC	146 S. Main St.	Joselin De La Cruz Garcia

<u>Class "B" Liquor and Beer:</u>		
Richland Center American Legion Club, Ltd.	900 Flag Park Drive	Richard Cairns
Center Lanes, Inc. dba The Phoenix Center	100 S. Orange Street	Amy Schoepp
TKO BBQ Bar & Grill	165 W. Court Street	Tim Oman
La Fritanga, LLC	1450 Veterans Drive	Marlon Lacayo
Los Amigos II Mexican Restaurant, LLC	100 N. Main St.	German Vasquez Hernandez
RC Tacos, LLC	2320 US Hwy 14 E.	Carolina Rodriguez

<u>Class "C" Wine:</u>		
Mellem's Fish House LLC	1885 Allison Park Dr.	Brenda A. Walther
Richland Family Restaurant LLC	211 N. Main St.	Abidin Bajrami
Pine River Smoke Co.	249 W. Court	Douglas Kratochwill
AD German Warehouse Conservancy	300 S. Church St	Timothy Abair

The original license will expire June 30, 2024 and the renewal will be from July 1, 2025 through June 30, 2026. Persons having any objections to the granting of such licenses may file their objections with the City Clerk's office on or before June 3, 2025.

Dated this 16th day of May, 2025
Amanda Keller, City Clerk

License(s) Requested	Fees	
	License Fees	\$ 10.00
	Background Check	\$
	Total Fees	\$ 10.00

Part A: Organization Information

1. Organization Name Greater Richland Area Chamber of Commerce		
2. Organization Permanent Address 397 West Seminary Street		
3. City Richland Center	4. State WI	5. Zip Code 53581
6. Mailing Address (if different from permanent address) PO Box 473		
7. FEIN	8. Date of Organization/Incorporation	9. State of Organization/Incorporation Wisconsin
10. Phone (608) 649-3376	11. Email info@rcchamber.org	
12. Organization type (check one) <input type="checkbox"/> Bona Fide Club <input type="checkbox"/> Church <input type="checkbox"/> Fair Association/Agricultural Society <input type="checkbox"/> Veteran's Organization <input type="checkbox"/> Lodge/Society <input checked="" type="checkbox"/> 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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
Adsit	Christy	President	
Craig	Woodhouse	Vice-President	
Katie	Bedward	Secretary	
John	Edgington	Treasurer	

Continued →

Part C: Event Information

1. Name of Event (if applicable) Taste of the Hills			
2. Dates of Operation 6/21/2025		3. Hours of Operation 4PM - 9PM	
4. Premises Address Krouskop Park - 1050 N Orange Street			
5. City Richland Center		6. State WI	7. Zip Code 53581
8. County Richland	9. Governing Municipality <input checked="" type="checkbox"/> City <input type="checkbox"/> Town <input type="checkbox"/> Village of: <u>Richland Center</u>		10. Aldermanic District Dist #4
11. Organizer of Event (if not the named applicant) 6086493376		12. Email and/or Phone Number for Organizer of Event info@rcchamber.org	
13. Organizer Website www.rcchamber.org		14. Event Website www.rcchamber.org/taste-of-the-hills	
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. Free event hosted at Krouskop Park with food vendors, food trucks, local craft vendors, childrens activities, and live music. Alcohol will be sold and consumed within the beer tent and fenced event area.			

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 Adsit		First Name Christy	M.I.
Title President	Email		Phone
Signature		Date	

Part E: For Clerk Use Only

Date Application Was Filed With Clerk 05/12/25	License Number 2025-04 Picnic
Date License Granted	Date License Issued
Signature of Clerk/Deputy Clerk	

License(s) Requested	Fees	
<input type="checkbox"/> Temporary "Class B" Wine <input checked="" type="checkbox"/> Temporary Class "B" Beer	License Fees	\$ 10.00
	Background Check	\$
	Total Fees	\$ 10.00

Part A: Organization Information

1. Organization Name Southwest Partners Inc dba Richland Rejuvenates		
2. Organization Permanent Address		
3. City Richland Center	4. State WI	5. Zip Code 53581
6. Mailing Address (if different from permanent address) PO Box 651		
7. FEIN	8. Date of Organization/Incorporation 03/03/16	9. State of Organization/Incorporation Wisconsin
10. Phone -	11. Email	
12. Organization type (check one) <input type="checkbox"/> Bona Fide Club <input type="checkbox"/> Church <input type="checkbox"/> Fair Association/Agricultural Society <input type="checkbox"/> Veteran's Organization <input type="checkbox"/> Lodge/Society <input type="checkbox"/> 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? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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
Breiningner	Michael	President	
Bender	Dale	Vice-President	
Perkins	Liz	Secretary	
Cosgrove	Michael	Treasurer	

Continued →

Part C: Event Information

1. Name of Event (if applicable) RC Thunderfest			
2. Dates of Operation 6/28/2025		3. Hours of Operation 12PM - 11PM	
4. Premises Address Krouskop Park - 1050 N Orange Street			
5. City Richland Center		6. State WI	7. Zip Code 53581
8. County Richland	9. Governing Municipality <input checked="" type="checkbox"/> City <input type="checkbox"/> Town <input type="checkbox"/> Village of: <u>Richland Center</u>		10. Aldermanic District Dist #4
11. Organizer of Event (if not the named applicant) Michael Cosgrove		12. Email and/or Phone Number for Organizer of Event	
13. Organizer Website		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. An all-day Independence Celebration in Krouskop Park with food trucks, beer garden, kids' games, bounce houses, and bands playing from noon to midnight.			

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Last Name Cosgrove		First Name Michael	M.I. J
Title Treasurer	Email		Phone
Signature		Date	

Part E: For Clerk Use Only

Date Application Was Filed With Clerk 05/20/25	License Number 2025-05 Picnic
Date License Granted	Date License Issued
Signature of Clerk/Deputy Clerk	

License(s) Requested	Fees	
<input checked="" type="checkbox"/> Temporary "Class B" Wine <input checked="" type="checkbox"/> Temporary Class "B" Beer	License Fees	\$ 10.00
	Background Check	\$
	Total Fees	\$ 10.00

Part A: Organization Information

1. Organization Name AD German Warehouse Conservancy, Inc.		
2. Organization Permanent Address 300 S Church St		
3. City Richland Center	4. State WI	5. Zip Code 53581
6. Mailing Address (if different from permanent address)		
7. FEIN	8. Date of Organization/Incorporation 08/15/20	9. State of Organization/Incorporation Wisconsin
10. Phone (608) 561-3745	11. Email infoadgermanwarehouse@gmail.com	
12. Organization type (check one) <input checked="" type="checkbox"/> Bona Fide Club <input type="checkbox"/> Church <input type="checkbox"/> Fair Association/Agricultural Society <input type="checkbox"/> Veteran's Organization <input type="checkbox"/> Lodge/Society <input type="checkbox"/> 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? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
14. Wisconsin Seller's Permit Number (if applicable) 456-1028648447-03		

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
Marshall	Barbara	President	
Kintz	Jane	Vice-President	
Abair	Timothy	Treasurer	
Motts	Ashley	Secretary	
Bender	Amy	Board Member	

Continued →

Part C: Event Information

1. Name of Event (if applicable) Madison Trust for Historic Preservation Event			
2. Dates of Operation 6/21/2025		3. Hours of Operation 12PM - 6PM	
4. Premises Address 300 S Church St			
5. City Richland Center		6. State WI	7. Zip Code 53581
8. County Richland	9. Governing Municipality <input checked="" type="checkbox"/> City <input type="checkbox"/> Town <input type="checkbox"/> Village of: <u>Richland Center</u>		10. Aldermanic District Dist #1
11. Organizer of Event (if not the named applicant)		12. Email and/or Phone Number for Organizer of Event	
13. Organizer Website <u>www.adgermanwarhouse.org</u>		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. Current Class B Beer & C Wine licenses valid for warehouse - Private Event will take place in alley owned by the Conservancy between buildings they also own.			

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 Abair		First Name Timothy	M.I. A
Title Treasurer	Email		Phone
Signature		Date	

Part E: For Clerk Use Only

Date Application Was Filed With Clerk 05/27/25	License Number 2025-06 Picnic
Date License Granted	Date License Issued
Signature of Clerk/Deputy Clerk	

License(s) Requested	Fees	
<input type="checkbox"/> Temporary "Class B" Wine <input checked="" type="checkbox"/> Temporary Class "B" Beer	License Fees	\$ 10.00
	Background Check	\$
	Total Fees	\$ 10.00

Part A: Organization Information		
1. Organization Name Driftless Angler / Geri Meyer		
2. Organization Permanent Address 106 S Main Street		
3. City Viroqua	4. State WI	5. Zip Code 54665
6. Mailing Address (if different from permanent address)		
7. FEIN	8. Date of Organization/Incorporation	9. State of Organization/Incorporation Wisconsin
10. Phone (608) 637-8779	11. Email info@driftlessangler.com	
12. Organization type (check one) <input checked="" type="checkbox"/> Bona Fide Club <input type="checkbox"/> Church <input type="checkbox"/> Fair Association/Agricultural Society <input type="checkbox"/> Veteran's Organization <input type="checkbox"/> Lodge/Society <input type="checkbox"/> 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? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
14. Wisconsin Seller's Permit Number (if applicable) 456-1020037982-03		

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
Meyer	Geri	Owner/Agent	

Continued →

Part C: Event Information

1. Name of Event (if applicable) Driftless Angler & Fly Fishing Show at the Starlight 14 Drive-In			
2. Dates of Operation 6/6/2025		3. Hours of Operation 3PM - 11PM	
4. Premises Address Starlight 14 - US Hwy 14 E			
5. City Richland Center		6. State WI	7. Zip Code 53581
8. County Richland	9. Governing Municipality <input checked="" type="checkbox"/> City <input type="checkbox"/> Town <input type="checkbox"/> Village of: <u>Richland Center</u>		10. Aldermanic District
11. Organizer of Event (if not the named applicant) Geri Meyer		12. Email and/or Phone Number for Organizer of Event	
13. Organizer Website www.driftlessangler.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. Enclosed - Drive In Grounds only. Fly Fishing Booths, Carnival Games, Fly Fishing Movies.			

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 Meyer		First Name Geri	M.I. A
Title Owner/President	Email		Phone
Signature		Date	

Part E: For Clerk Use Only

Date Application Was Filed With Clerk 05/27/20	License Number 2025-07 Picnic
Date License Granted	Date License Issued
Signature of Clerk/Deputy Clerk	