

## LICENSING BOARD MEETING - SPECIAL AGENDA

TUESDAY, JULY 01, 2025 AT 6:45 PM

# WATERTOWN MUNICIPAL BUILDING - 106 JONES STREET, WATERTOWN, WI 53094 UPPER LEVEL ROOM 2044

Virtual Meeting Info: https://us06web.zoom.us/join Meeting ID: 917 858 0897 Passcode: 53094 One tap mobile +16469313860

https://us06web.zoom.us/j/9178580897?pwd=eUOpCUyvIV65zIPMYImMdPU1LVLx5I.1

### 1. CALL TO ORDER

#### 2. BUSINESS

A. Review and take action: application for a Temporary "Class B" Wine and Temporary Class "B" Beer License for the July 4th Celebration event on July 3 and July 4, 2025 sponsored by American Legion Pitterle-Beaudoin Post 189 during the hours of 8 a.m. and 10 p.m. for location at Riverside Park

### 3. ADJOURNMENT

Persons requiring other reasonable accommodations for any of the above meetings, may contact the office of the City Clerk at <a href="mailto:cityclerk@watertownwi.gov">cityclerk@watertownwi.gov</a> phone 920-262-4000

A quorum of any City of Watertown Council, Committee, Board, Commission, or other body, may be present at this meeting for observing and gathering of information only

AB-220

## **Temporary Alcohol Beverage License**

License(s) Requested		Fe	es
▼ Temporary "Class B" Wine		License Fees \$  Background Check \$ PREVIOUS  Total Fees \$ 1000	\$ 10.00
	▼ Temporary Class "B" Beer		\$ PREVIOUSLY Paid
			\$ 10.00

Part A: Organization Information					
1. Organization Name					
AMERICAN LEGION 1	PITTER	LE - BEAUDOIN Pas	ST 189		
2. Organization Permanent Address					
206 S. FIRST ST,	POBO	0X 22			
3. City				4. State	5. Zip Code
WATERTOWN				WI	53094
6. Mailing Address (if different from perr	manent a	ddress)			
				-	
7. FEIN		8. Date of Organization/Incor	poration	9. State of Organiz	zation/Incorporation
39-0784079		10/10/1935		WISCONSI	N
10. Phone		11. Email			
920-262-9189		rogsan8152 at	tonet		
12. Organization type (check one)		G			
☐ Bona Fide Club	Church	☐ Fair Association	n/Agricultural Socie	ety 🔀 Veter	ran's Organization
☐ Lodge/Society	Chambe	er of Commerce or similar (	Civic or Trade Orga	anization under c	h. 181. Wis. Stats.
13. Is this organization required to hold a Wisconsin Seller's permit?					
14. Wisconsin Seller's Permit Number (if	f applicab	le)			
456-103034777	2-03	2			
1					
Part B: Individual Information	1				
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 Na	ime	Title		Phone
ZILLMER	STEP	HEN	COMMANDE	2	920-960-9111
ZILLMER GRILL	KIR	ı)	ADJUTANT		920-960-9111
ORILL	NIK	K	I PIRT O CUTT		700-203-1211
HERBERT	ROGE	ER	FINANCE C	PFICER	920-253-0373

Section		

Part C: Event Information						
1. Name of Event (if applicable)						
JULY 4th CELEBRATION						
2. Dates of Operation		3. H	3. Hours of Operation			
JULY 3 AND JULY 4 202	JULY 3 AND JULY 4, 2025 4. Premises Address			m - 1	OPM	
4. Premises Address			10.1			
RIVERSIDE PARK						
5. City				6. State	7. Zip Code	е
WATERTOWN				WI	5309	4
8. County	9. Governing Municipality X City Town Village 10. Aldermanic District			District		
JEFFERSON	of: WATERTOWN					
11. Organizer of Event (if not the named applicant		12. Email and/or Phone N	Number fo	or Organize	er 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.  ENTIRE RIVERSIDE PARK, INCLUDING, BUT NOT LIMITED TO, UPPER PAVILION, CELIBRATION SHELTER, ISLAND (FOR FIREWORKS).						
Part D: Attestation Who must sign this application?						
<ul> <li>one officer or director of the nonprofit or</li> </ul>	rganization					
<b>READ CAREFULLY BEFORE SIGNING:</b> 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				M.I.
HERBERT		ROGER				w.
Title	Email	1100 mK			Phone	100.
Employ Decrees		015 7 #	T			C2 0200
FINANCE OFFICER Signature	1 rogs	san 815 ad attine	1	Date	720-2	53-7373
De Water				4	125	
Roger W. Herord				6/10	100	
			****			
Part E: For Clerk Use Only						
Date Application Was Filed With Clerk		License Number				
06-10-2025		2025-027	2025-027			
Date License Granted		Date License Issued	Date License Issued			
Signature of Clerk/Deputy Clerk						



Office of the Cle 106 Jones PO Box 477 Watertown, WI 53094-0477 (920) 262-4000

# Outdoor Open Container Entertainment Event Permit Application

The following items MUST accompany this app  Event map including fencing plans and  Specific plan indicating where patrons  Detailed description of all public entert  Detailed security plan for the event  Proof of insurance must be provided no	I street closures will be permitted to carry alcol ainment associated with the ev	/ent	s
Section 1 – Applicant Information			
Corporation/ Organization Name:			
AMERICAN LEGION PITTERLE - BE Responsible Party:	AUDOIN POST 189		
Responsible Party:	Driver's License # (list State	e if not WI):	Date of Birth:
ROGER W. HERBERT	H616-7394-806	7-01	2/27/1948
Address:	H616-7394-806 City:	State:	Zip Code:
1502 UTAH ST	WATERTOWN	WI	53094
Telephone Number:	E-mail Address:		
920-253-7373	rogsan815Datt	net	
Section 2 – Event Information			
Name of Event:			
JULY 4th CELEBRATION  Purpose of Event:  ALLOW COMMUNITY AND VISITORS  Locations/Address of Event (must include event m  RIVERSIDE PARK, 916 LABARER ST, 1	nap including fencing plans, barrio		
Event Dates (limit 4 consecutive days):	Event Hours (must be bety	ween 6 a.m. & 1	1 p.m.):
JULY 3-4, 2025	8AM - 10 PM		
ALCOHOLIC BEVERACES WILL ONLY BE A EBLARATION SHELTER. THIS WILL ALS ENTERTAIN MENT WILL BE. BASIC SECUR	and a companied the property	- from	num Daily Attendance:
Have you applied for a temporary Class "B" malt of If no, contact Clerk's Office to obtain proper licenses/pe	r temporary "Class B" wine licens	se for the event	? ⊠ Yes □ No
Have you applied for a special event permit for the If no, contact Clerk's Office to obtain proper licenses/pe			
Permit # (office use only)  Date Ap	plication Received:	proved $\square$	Denied □

Section 2, Item A.

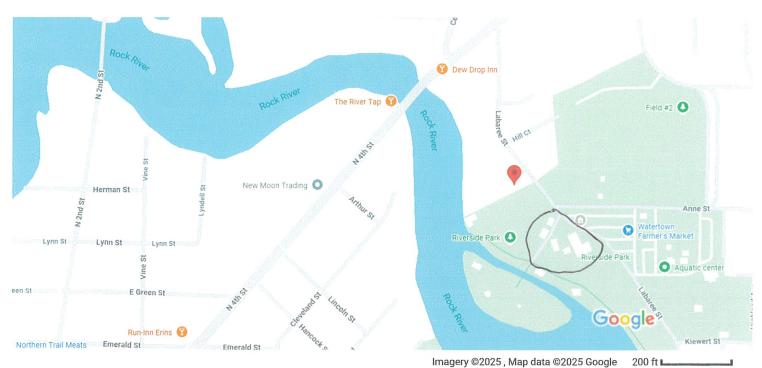
## **INSURANCE**

Each applicant shall furnish to the City, no later than 10 days prior to the event, a certificate of insurance written by a company licensed in the State of Wisconsin, approved by the City Attorney and covering any and all liability or obligations which may result from the operations by the applicant's employees, agents, contractors or subcontractors, and including workers' compensation coverage in accordance with Ch. 101, Wis. Stats. The certificate shall provide that the company will furnish the City with a 10-day prior written notice of cancellation, nonrenewal or material change. The insurance shall be written in comprehensive form and shall protect the applicant and City against claims arising from injuries to members of the public or damage to property of others arising out of any act or omission of the applicant, its employees, agents, contractors and subcontractors. The policy of insurance shall provide minimum combined single limits for bodily injury and property damage of at least \$1,000,000.00 per person/aggregate.

I hereby make an application for an Outdoor Open Container Entertainment E indemnify and hold harmless the City from and against all liabilities, claims, deequity, costs and expenses, including reasonable attorney fees, for injury or dany person, firm, organization or corporation, arising in any way as a consequence Container Entertainment Event.	emands, judgments, losses and all suits at law or in leath of any person or loss or damage to the property of
Signature: Roger W. Herbert	Date Signed: 6/10/2025



## 916 Labaree St





THERE WILL BE NO FENCING, BARRICADES OR STREET CLOSURES.

## 916 Labaree St

Building











**Directions** 

Save

Nearby

Send to phone

Share



916 Labaree St, Watertown, WI 53098

**Photos**