



CITY HALL  
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Oshkosh, WI 54903-1130

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Special "Class B" Licenses can only be held by non-profit organizations (see Additional Information for listing). The forms need to be completed in full and signed by two of the officers from question 1-f.

A layout/map of the event needs to be attached to the application (SUNNYVIEW EXPO CENTER & LEACH AMPHITHEATER EVENTS DO NOT NEED A MAP)

The person in charge of the event needs to have taken the Responsible Beverage Service course in the last 2 years or hold a current Oshkosh operator's license – this is per State Statute. A copy of the certificate needs to be attached. If using a current license, we can look that up. These forms need to be filed in the City Clerk's Office at least 30 DAYS prior to event date.

Name of Event: \_\_\_\_\_

Fee \$10.00 Per Event

APPLICATION FOR TEMPORARY CLASS "B" RETAILER'S LICENSE – CITY OF OSHKOSH

**NOTE: Include a map of the requested license area**

The named organization applies for: (check appropriate box (es).)

- ☐ Temporary Class "B" license to sell fermented malt beverages at picnics/similar gatherings under s. 125.26 (6), Wis. Stats.  
☐ 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 said organization agrees to comply with all law, resolution, ordinances and regulations (state, federal or local) affecting the sale of fermented malt beverages and/or wine if the license is granted.

**1. ORGANIZATION** (Bona fide club, church, lodge or society, veteran's organization or fair association):

(a) Name \_\_\_\_\_

(b) Address \_\_\_\_\_ City of Oshkosh

(c) Date organized \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

(d) If corporation, give date of incorporation \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

(e) If the named organization is not required to hold a Wisconsin seller's permit pursuant to s.77.54 (7m), Wis. Stats., check here \_\_\_\_\_

**(f) Names and addresses of all officers:**

President \_\_\_\_\_

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

Secretary \_\_\_\_\_

Treasurer \_\_\_\_\_

**(g) Manager/person in charge of affair:** First \_\_\_\_\_ Initial \_\_\_\_\_ Last \_\_\_\_\_

Date of Birth \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ Address \_\_\_\_\_

Phone No. \_\_\_\_\_ **Class Attendance Date** \_\_\_\_\_

**2. LOCATION OF PREMISES WHERE BEER AND/OR WINE WILL BE SOLD, SERVED, CONSUMED OR STORED & AREAS WHERE ALCOHOL BEVERAGE RECORDS WILL BE STORED:**

(a) Street number \_\_\_\_\_

(b) Do premises occupy all or part of building: \_\_\_\_\_

(c) 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. DATE & TIMES FERMENTED MALT AND/OR WINE WILL BE SOLD AT YOUR EVENT:

Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Start: \_\_\_\_\_ End: \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Start: \_\_\_\_\_ End: \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Start: \_\_\_\_\_ End: \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Start: \_\_\_\_\_ End: \_\_\_\_\_

4. Are you aware that all beverages must be dispensed and possessed in the original container, a transparent or semi-transparent container (per municipal code-section 4-23 adopted 10/28/2003)?      yes      no
5. How many stations will you have at your event \_\_\_\_\_ the person in charge must be capable of supervising & controlling the alcohol sales of the venue – IF you have multiple stations it is suggested that there be licensed operators at each station. (Licensed operator(s) must be present at all times (ss. 125.26(6), 125.32(2))
6. Describe what precautions will be taken to prevent service and/or consumption of beer/alcohol to underaged persons \_\_\_\_\_

Amplified sound or music shall not be permitted after 10:00 p.m. Sunday through Thursday and after 11:00 p.m. on Friday and Saturday evenings. This section shall not be construed to limit the authority of the police department to respond to complaints and take any appropriate action in response thereto.

REQUEST FOR:

\_\_\_\_\_ WAIVER OF FENCING FOR BEER GARDEN  
\_\_\_\_\_ NO CARRY-INS IN A CITY PARK

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.

DECLARATION

Officer: \_\_\_\_\_

Officer: \_\_\_\_\_

FOR OFFICE USE ONLY

Date Filed: \_\_\_\_/\_\_\_\_/\_\_\_\_

Date Approved: \_\_\_\_/\_\_\_\_/\_\_\_\_

Chief of Police Signature: \_\_\_\_\_

Council Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

License No: \_\_\_\_\_