

# City of Wisconsin Dells

## “Class B” Quota Plus Liquor License Supplemental Form

<input type="checkbox"/> Seller’s Permit Number <input type="checkbox"/> Federal Employer ID Number <input type="checkbox"/> Notarized Original Application Form <input type="checkbox"/> Notarized Supplemental Form	<input type="checkbox"/> Description of Licensed Premise <input type="checkbox"/> Background Investigation Form(s) <input type="checkbox"/> Notarized Transfer of Ownership <input type="checkbox"/> *Articles of Incorporation <input type="checkbox"/> *Notarized Appointment of Agent * Corporation/LLC only	<input type="checkbox"/> Floor Plans <input type="checkbox"/> Lease <input type="checkbox"/> Sample Menu <input type="checkbox"/> Business Plan
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1. Name of Applicant/Partner/Corporation/LLC: \_\_\_\_\_

2. Address of Licensed Premise: \_\_\_\_\_

3. Telephone Number: \_\_\_\_\_ Cell Phone Number: \_\_\_\_\_

4. Anticipated opening date: \_\_\_\_\_

5. Mailing address if not opening immediately: \_\_\_\_\_

6. Business Description, including hours of operation: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

7. Do you plan to have entertainment?  No  Yes—What kind and what effect will it have on the surrounding businesses or residential areas: \_\_\_\_\_

\_\_\_\_\_

8. **Attach** a detailed written description of building, including overall dimensions, seating arrangements, capacity, kitchen, bar size and all areas where alcohol beverages are to be sold and stored. The licensed premise described cannot be expanded or changed without the approval of the Common Council.

9. Describe existing parking: \_\_\_\_\_

\_\_\_\_\_

10. Are you operating under a lease or franchise agreement?    Yes (attach a copy)    No

11. Owner of building where establishment is located: \_\_\_\_\_

Address of Owner: \_\_\_\_\_ Phone Number: \_\_\_\_\_

12. What type of establishment are you? (Check all that apply)    Nightclub    Restaurant    Other

Please Explain: \_\_\_\_\_

\_\_\_\_\_

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**Read carefully before signing.**

This is an application for a special form of "Class B" License to sell alcohol beverages for on premises consumption. The City of Wisconsin Dells refers to these special licenses as "Quota Plus Licenses". They are issued to applicants who meet certain statutory and city criteria in special circumstances. In seeking this license, the applicant has made representations regarding the type of establishment which will be operated pursuant to this license including, without limitation, seating capacity, theme, menu, décor, service level and entertainment. The city may approve this application based upon the unique characteristics of the venue as described and proposed. Absent those unique characteristics, the license may not have been approved and issued.

The city may suspend, revoke or non-renew this Quota Plus "Class B" License if it determines that the licensed premises are not being operated in a manner consistent with the application; or for any other reason pursuant to state law or city code. This license may not be transferred or assigned without the consent of the city.

Subscribed and Sworn to before me:

this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
(SIGNATURE OF APPLICANT)

\_\_\_\_\_  
(PRINTED NAME OF APPLICANT)

\_\_\_\_\_  
(Notary Public)

My commission expires \_\_\_\_\_

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