



# City of La Crosse, Wisconsin

## APPLICATION FOR *EXPANSION OF ALCOHOL BEVERAGE LICENSE*

\*Must be filed in conjunction with a Special Event Application.

Fee: \$ \_\_\_\_\_

The undersigned licensee requests permission to expand the following license(s) onto private property for the purpose set forth below. Check all license that apply.

- Combination "Class B" Beer & Liquor
- Class "B" Beer
- "Class C" Wine

BUSINESS INFORMATION					
Legal/Real Name:	Trade Name:				
Business Address:					
Business Phone Number:	Name of Agent (If Corporation/LLC):				
EXPANSION INFORMATION					
Date of Expansion:					
Time of Expansion – when alcohol will be sold, possessed or consumed in the public way:					
Start	End				
Describe Area of Expansion – Where Alcohol Will be Present:					
Reason for Expansion Request:					
PERSON IN CHARGE					
Name:	<table style="width: 100%; border: none;"> <tr> <td style="width: 25%; border: none;">First</td> <td style="width: 25%; border: none;">Middle</td> <td style="width: 25%; border: none;">Last</td> </tr> </table>	First	Middle	Last	
First	Middle	Last			
Address:	<table style="width: 100%; border: none;"> <tr> <td style="width: 40%; border: none;">Street</td> <td style="width: 20%; border: none;">City</td> <td style="width: 20%; border: none;">State</td> <td style="width: 20%; border: none;">Zip Code</td> </tr> </table>	Street	City	State	Zip Code
Street	City	State	Zip Code		
Phone Number:					

The above hereby makes application to expand its alcohol beverage license onto private property as described. I agree to abide by all applicable state and local regulations including, but not limited, to the sale and service of alcoholic beverages, fencing and adherence to noise levels.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date