



OUTDOOR ALCOHOLIC BEVERAGE AREA

PERMIT APPLICATION

_____ Renewal _____ Initial Permit

All Fields Must Be Completed

\$200.00

1. Name of Applicant(s): _____
2. Name of Licensed Premises: _____
3. Address of Licensed Premises: _____
4. List all partners, shareholders, or investors. Include full name, middle initial, and date of birth. Please use additional sheets or continue on back if necessary.

_____	_____	_____	_____	____/____/____
First Name	Initial	Last Name	Nature of Ownership/Interest	Date of Birth

_____	_____	_____	_____	____/____/____
First Name	Initial	Last Name	Nature of Ownership/Interest	Date of Birth

_____	_____	_____	_____	____/____/____
First Name	Initial	Last Name	Nature of Ownership/Interest	Date of Birth

5. What was the previous name and nature of the business operating at this location?

6. Are alcohol sales a new use for the Licensed Premises to which this outdoor area permit applies? Yes _____ No _____
7. Operating hours:
 - a. Inside Licensed Premises _____ Outdoor Alcoholic Beverage Area _____
8. Number of floor personnel:
 - a. Inside Licensed Premises _____ Outdoor Alcoholic Beverage Area _____
9. Please attach a separate statement and site plan describing details of the Licensed Premises and proposed Outdoor Alcoholic Beverage Area, including dimensions, enclosures, entrances and exits, and any operational details.
10. If this is a renewal, has the physical area described in the original application been altered in any way? If yes, please explain _____

Applicant Signature

Date

Based upon information provided above, and based upon review of City staff, it is recommended that the Outdoor Alcoholic Beverage Area Permit be:

Approved _____ Denied _____

If approved, said permit shall be subject to all provisions of the City of Kaukauna Municipal Code, and shall be further subject to the additional terms and requirements set forth by City staff in the document attached hereto titled "Permit Requirements."

By:

Date:

