

RESOLUTION # _____ OF THE CITY OF BROOKFIELD, WISCONSIN

Committee: Legislative & Licensing
Committee Date: March 21, 2023
Committee Recommendation:

Public Hearing: n/a
Council Date: April 4, 2023
Council Action:

***Renewal Class B Beer License (6 months) for an applicant –
Brookfield Bulldogs/Blue Sox Baseball Club, Inc., d/b/a:
Brookfield Bulldogs/Blue Sox Baseball Club, 18875 Wilderness
Way (McCoy Field), Agent: Jason A. Booth***

WHEREAS, an applicant, Brookfield Bulldogs/Blue Sox Baseball Club, Inc., 18875 Wilderness Way (McCoy Field), requests a Renewal Class B Beer License (6 months) in the City of Brookfield, and

WHEREAS, the Legislative & Licensing Committee considered the Renewal Class B Beer License (6 months) application at its meeting held on March 21, 2023 and recommends _____ thereof.

NOW, THEREFORE, BE IT RESOLVED, by the Common Council of the City of Brookfield that it hereby _____ a Renewal Class B Beer License (6 months) for Brookfield Bulldogs/Blue Sox Baseball Club, Inc., 18875 Wilderness Way (McCoy Field), and

BE IT FURTHER RESOLVED, that the proper city official(s) be hereby authorized and directed to carry out the council’s action, including, but not limited to signing documents, implementing technical revisions to documents to effectuate the best interest of the City, and correcting scrivener’s errors.

Adopted this 4th day of April, 2023.

Approved:

Mayor Steven V. Ponto

Attested:

City Clerk Michelle Luedtke

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 04 01 2023 ending: 09 30 2023
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: Town of } Brookfield
 Village of }
 City of }

County of Waukesha Aldermanic Dist. No. _____
 (if required by ordinance)

Check one: Individual Limited Liability Company
 Partnership Corporation/Nonprofit Organization

Complete A or B. All must complete C.

B6V = 24⁰⁰

Applicant's Wisconsin Seller's Permit Number <u>CS 42548</u>	
FEIN Number <u>39-1885822</u>	
TYPE OF LICENSE REQUESTED	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$ 50
<input type="checkbox"/> Class C wine	\$
<input type="checkbox"/> Class A liquor	\$
<input type="checkbox"/> Class A liquor (cider only)	\$ N/A
<input type="checkbox"/> Class B liquor	\$
<input type="checkbox"/> Reserve Class B liquor	\$
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$ 20
TOTAL FEE	\$ 70

+24 (2 background checks) = \$94

A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company <u>BULLDOGS/BLUE SOX BASEBALL CLUB, INC</u>	Address of Corporation / Limited Liability Company (if different from licensed premises)
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All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent.

Agent Last Name <u>BOOTH</u>	(First) <u>JASON</u>	(Middle Name) <u>ALLEN</u>	Home Address (Street, City or Post Office, & Zip Code) <u>N75W28382 STILLWATER CT HARTLAND WI 53029</u>
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All Officer(s) Director(s) of Corporation and Members / Managers of Limited Liability Company:

President / Member Last Name <u>BOOTH</u>	(First) <u>JASON</u>	(Middle Name) <u>ALLEN</u>	Home Address (Street, City or Post Office, & Zip Code) <u>N75W28382 STILLWATER CT HARTLAND WI 53029</u>
Vice President / Member Last Name <u>TOBIASZ</u>	(First) <u>PAT</u>	(Middle Name) <u>JOHN</u>	Home Address (Street, City or Post Office, & Zip Code) <u>12910 W. WIMBLEDON DR NEW BERLIN WI 53151</u>
Secretary / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

C. Business Information

- Trade Name BULLDOGS/BLUE SOX BASEBALL CLUB, INC Business Phone Number 262-293-5150
- Address of Premises 18875 WILDERNESS WAY BROOKFIELD Post Office & Zip Code 53045
- Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes No
- Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.)
FREE-STANDING, 1 ROOM, 3 REFRIGERATORS

5. Legal description (omit if street address is given on previous page): _____
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3** Yes No
- b. Are **charges for any offenses presently pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3.** Yes No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** Yes No
- _____
- _____
- _____
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** Yes No
- _____
- _____
- _____
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? Yes No
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? Yes No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? Yes No
12. Does the applicant owe municipal property taxes, assessments, or other fees? Yes No
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) BOOTH, JASON A.	Title / Member PRESIDENT	Date 02/20/2023
Signature <i>Jason Booth</i>	Phone Number 262-293-5150	Email Address

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <i>2-23-23 MD</i>	Date reported to council / board <i>3-21-23</i>	Date license granted <i>4-4-23</i>
License number issued	Date license issued	Signature of Clerk / Deputy Clerk