

**ALCOHOL LICENSING COMMITTEE AGENDA
CITY OF FOND DU LAC, WISCONSIN**

May 29, 2013
4:00 p.m.

Meeting Rooms D & E
City-County Government Center

160 South Macy Street
Fond du Lac, Wisconsin

I. OPENING CEREMONIES

- A. Attendance
- B. Declaration Quorum Present

II. APPROVAL OF MINUTES

April 29, 2013

III. REPORTS OF OFFICERS

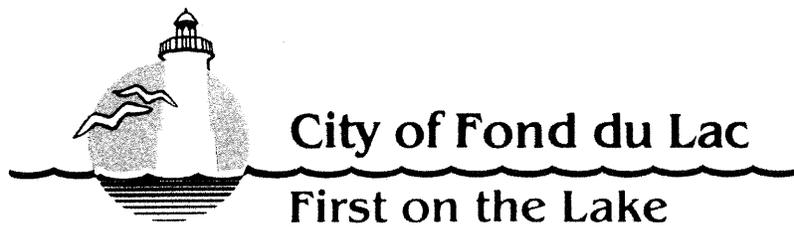
A. REVIEW DELIBERATE AND MAKE RECOMMENDATIONS ON APPLICATION FOR NEW "CLASS B" INTOXICATING LIQUOR AND CLASS "B" FERMENTED MALT BEVERAGE

Corporation: Blazin Wings Inc.
Agent: Darin Reiger
Agent Address: 829 Main Street
Oshkosh, WI
d/b/a: Buffalo Wild Wings
Location of Premises: 121 North Pioneer Road
City Council Meet Date: June 12, 2013

B. REVIEW DELIBERATE AND MAKE RECOMMENDATIONS ON RENEWAL APPLICATION "CLASS B" INTOXICATING LIQUOR AND CLASS "B" FERMENTED MALT BEVERAGE

Limited Liability Co: North Main Hospitality LLC
Agent: Anna Nason
Agent Address: 673 Mount Vernon Street
Oshkosh, WI
d/b/a: Retlaw Plaza Hotel
Location of Premises: One North Main Street

IV. ADJOURN



Alcohol Licensing Committee

May 29, 2013

4:00 P.M.

**ALCOHOL LICENSING COMMITTEE MINUTES
CITY OF FOND DU LAC, WISCONSIN**

April 29, 2013
4:00 P.M.

Meeting Rooms D&E
City-County Government Center

160 South Macy Street
Fond du Lac, Wisconsin

OPENING CEREMONIES

ROLL CALL: Present: - J. Geoffrey Bares
Paul Osterholm
Kerry Strupp
Ray Lapierre
Rob Vande Zande

Absent: - David Hopper (excused)

Administrative Staff: - Wayne Rollin, Dir of Comm Dev
Deb Hoffmann, City Attorney
Steve Klein, Asst. Police Chief
of Operations

Chairman Osterholm declared a quorum present.

APPROVAL OF MINUTES

January 28, 2013

February 25, 2013

Motion made by Bares to approve the minutes of the
January 28, 2013 and February 25, 2013 Alcohol
Licensing Committee minutes as presented.

Seconded by Strupp.

ROLL CALL VOTE: Aye - Bares, Lapierre, Osterholm,
Strupp, Vande Zande
Nay - None

Carried.

REPORTS OF OFFICERS

**REVIEW DELIBERATE AND MAKE RECOMMENDATIONS ON APPLICATION FOR
NEW "CLASS A" INTOXICATING LIQUOR AND CLASS "A" FERMENTED MALT
BEVERAGE**

ALCOHOL LICENSING COMMITTEE MINUTES

April 29, 2013

Page 2

Corporation: Schneider Markets Inc.
Agent: Daniel Jahnke
Agent Address: 329 E North Street
Juneau, WI
d/b/a: Piggly Wiggly
Location of Premises: 131 University Drive
City Council Meet Date: May 8, 2013

Motion made by Strupp to recommend to City Council approval of New "Class A" Intoxicating Liquor and Class "A" Fermented Malt Beverage d/b/a Piggly Wiggly, 131 University Drive.

Seconded by Lapierre.

ROLL CALL VOTE: Aye - Bares, Lapierre, Osterholm,
Strupp, Vande Zande

Nay - None

Carried.

REVIEW DELIBERATE AND MAKE RECOMMENDATIONS ON APPLICATION FOR NEW "CLASS A" INTOXICATING LIQUOR AND CLASS "A" FERMENTED MALT BEVERAGE

Corporation: Gombas Inc.
Agent: James Moses
Agent Address: 35 Hazotte Court
Fond du Lac, WI
d/b/a: Phillys on the Miracle Mile
Location of Premises: 1305 South Main Street
City Council Meet Date: May 8, 2013

Motion made by Bares to recommend to City Council approval of New "Class A" Intoxicating Liquor and Class "A" Fermented Malt Beverage d/b/a Phillys on the Miracle Mile, 1305 South Main Street.

Seconded by Vande Zande.

ROLL CALL VOTE: Aye - Bares, Lapierre, Osterholm,
Strupp, Vande Zande

Nay - None

Carried.

CITY OF FOND DU LAC - Memorandum

City Clerk's Office

Date: May 16, 2013
To: Alcohol License Committee
From: Sue L. Strands, City Clerk
Re: 2013-2014 "Class B" Intoxicating Liquor and Class "B"
Fermented Malt Beverage Application

"CLASS B" INTOXICATING LIQUOR AND CLASS "B" FERMENTED MALT BEVERAGE:

Corporation:	Blazin Wings, Inc.
Agent:	Darin Reiger
Home Address:	829 Main St Oshkosh, WI 54901
d/b/a:	Buffalo Wild Wings
Location of Premises:	121 N Pioneer Road

ORIGINAL ALCOHOL BEVERAGE RETAIL LICENSE APPLICATION

Submit to municipal clerk.

For the license period beginning July 1 20 13 ;
 ending June 30 20 14

TO THE GOVERNING BODY of the: Town of }
 Village of } Fond du Lac
 City of }

County of Fond du Lac Aldermanic Dist. No. _____ (if required by ordinance)

Applicant's Wisconsin Seller's Permit Number: <u>456-0000421768-03</u>	
Federal Employer Identification Number (FEIN): <u>41-1957107</u>	
LICENSE REQUESTED ▶	
TYPE	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$
<input type="checkbox"/> Class C wine	\$
<input type="checkbox"/> Class A liquor	\$
<input checked="" type="checkbox"/> Class B liquor	\$ 600.00
<input checked="" type="checkbox"/> Reserve Class B liquor	\$
Publication fee	\$ 55.00
TOTAL FEE	\$ 655.00

1. The named INDIVIDUAL PARTNERSHIP LIMITED LIABILITY COMPANY
 CORPORATION/NONPROFIT ORGANIZATION

hereby makes application for the alcohol beverage license(s) checked above.

2. Name (individual/partners give last name, first, middle; corporations/limited liability companies give registered name): ▶ Blazin Wings, Inc.
5500 Wayzata Blvd. Suite 1600, Minneapolis, MN 55416

An "Auxiliary Questionnaire," Form AT-103, must be completed and attached to this application by each individual applicant, by each member of a partnership, and by each officer, director and agent of a corporation or nonprofit organization, and by each member/manager and agent of a limited liability company. List the name, title, and place of residence of each person.

Title	Name	Home Address	Post Office & Zip Code
President/Member	<u>Sally J. Wold</u>	<u>7001 Dublin Road Edina, MN 55439</u>	
Vice President/Member	<u>James M. Schmidt</u>	<u>17325 25th Avenue N, Plymouth, MN 55447</u>	
Secretary/Member	<u>Mary Twinem</u>	<u>15015 44th Avenue N, Plymouth, MN 55446</u>	
Treasurer/Member	<u>Matthew K. Broki</u>	<u>10660 Alison Way, Inver Grove Heights, MN 55077</u>	
Agent	▶ <u>Darin Reiger</u>	<u>829 Main Street, Oshkosh, WI 54901</u>	
Director/Managers	<u>Emily Decker</u>	<u>3155 Lafayette Ridge Road, Wayzata, MN 55391</u>	

3. Trade Name ▶ Buffalo Wild Wings Business Phone Number TBD
 4. Address of Premises ▶ 121 N. Pioneer Road Post Office & Zip Code ▶ Fond du Lac, WI 54935

5. Is individual, partners or agent of corporation/limited liability company subject to completion of the responsible beverage server training course for this license period? Yes No
 6. Is the applicant an employe or agent of, or acting on behalf of anyone except the named applicant? Yes No
 7. Does any other alcohol beverage retail licensee or wholesale permittee have any interest in or control of this business? Yes No
 8. (a) Corporate/limited liability company applicants only: Insert state MN and date 12/9/1999 of registration.
 (b) Is applicant corporation/limited liability company a subsidiary of any other corporation or limited liability company? N/A Yes No
 (c) Does the corporation, or any officer, director, stockholder or agent or limited liability company, or any member/manager or agent hold any interest in any other alcohol beverage license or permit in Wisconsin? Please see attached. Yes No
 (NOTE: All applicants explain fully on reverse side of this form every YES answer in sections 5, 6, 7 and 8 above.)

9. 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, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) Alcohol will be stored in Locked Alcohol Storage Area and Beer Cooler. Alcohol will be served/sold in bar, dining, and patio areas.

10. Legal description (omit if street address is given above): N/A
 11. (a) Was this premises licensed for the sale of liquor or beer during the past license year? Yes No
 (b) If yes, under what name was license issued?
 12. Does the applicant understand they must file a Special Occupational Tax return (TTB form 5630.5) before beginning business? [phone 1-800-937-8864] Yes No
 13. Does the applicant understand a Wisconsin Seller's Permit must be applied for and issued in the same name as that shown in Section 2, above? [phone (608) 266-2776] Yes No
 14. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes No

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signers. Signers agree to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants and each member of a partnership applicant must sign; corporate officer(s), members/managers of Limited Liability Companies must sign.) Any lack of access to any portion of a licensed premises during inspection will be deemed a refusal to permit inspection. Such refusal is a misdemeanor and grounds for revocation of this license.

SUBSCRIBED AND SWORN TO BEFORE ME

this 10 day of April, 20 13 [Signature]
(Officer of Corporation/Member/Manager of Limited Liability Company/Partner/Individual)

Kristin Bergerson
(Clerk/Notary Public)

My commission expires 1/31/2016
KRISTIN L. BERGERSON
 NOTARY PUBLIC - MINNESOTA
 MY COMMISSION EXPIRES **JANUARY 31, 2016**
(Officer of Corporation/Member/Manager of Limited Liability Company/Partner/Individual)

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>4-28-13</u>	Date reported to council/board <u>6-12-13</u>	Date provisional license issued	Signature of Clerk / Deputy Clerk
Date license granted	Date license issued	License number issued <u>14-4236</u>	

SCHEDULE FOR APPOINTMENT OF AGENT BY CORPORATION/NONPROFIT ORGANIZATION OR LIMITED LIABILITY COMPANY

Submit to municipal clerk.

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent. The following questions must be answered by the agent. The appointment must be signed by the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

To the governing body of: Town Village of Fond du Lac County of Fond du Lac
 City

The undersigned duly authorized officer(s)/members/managers of Blazin Wings, Inc.
(registered name of corporation/organization or limited liability company)

a corporation/organization or limited liability company making application for an alcohol beverage license for a premises known as Buffalo Wild Wings
(trade name)

located at 121 N. Pioneer Road, Fond du Lac, WI 54935

appoints Darin Reiger
(name of appointed agent)
829 N. Main St. Oshkosh WI 54901
(home address of appointed agent)

to act for the corporation/organization/limited liability company with full authority and control of the premises and of all business relative to alcohol beverages conducted therein. Is applicant agent presently acting in that capacity or requesting approval for any corporation/organization/limited liability company having or applying for a beer and/or liquor license for any other location in Wisconsin?

Yes No If so, indicate the corporate name(s)/limited liability company(ies) and municipality(ies).

Is applicant agent subject to completion of the responsible beverage server training course? Yes No

How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin? 45 yrs

Place of residence last year 829 N. Main St. Oshkosh WI 54901

For: Blazin Wings, Inc.
(name of corporation/organization/limited liability company)

By: [Signature]
(signature of Officer/Member/Manager)

And: [Signature]
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, Darin Reiger, hereby accept this appointment as agent for the
(print/type agent's name)

corporation/organization/limited liability company and assume full responsibility for the conduct of all business relative to alcohol beverages conducted on the premises for the corporation/organization/limited liability company.

Darin Reiger 4-8-13 Agent's age [Redacted]
(signature of agent) (date)
829 N. Main St. Oshkosh WI 54901 Date of birth [Redacted]
(home address of agent)

APPROVAL OF AGENT BY MUNICIPAL AUTHORITY (Clerk cannot sign on behalf of Municipal Official)

I hereby certify that I have checked municipal and state criminal records. To the best of my knowledge, with the available information, the character, record and reputation are satisfactory and I have no objection to the agent appointed.

Approved on 05/22/13 by [Signature] Title ASST. CHIEF OF POLICE
(date) (signature of proper local official) (town chair, village president, police chief)

AUXILIARY QUESTIONNAIRE ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk.

Individual's Full Name (please print) (last name)		(first name)		(middle name)	
Wold		Sally		Jeanne	
Home Address (street/route)		Post Office		City	
7001 Dublin Road				Edina	
				State	
				MN	
				Zip Code	
				55439	
Home Phone Number		Age		Date of Birth	
952-903-9899		[REDACTED]		[REDACTED]	
				Place of Birth	
				[REDACTED]	

The above named individual provides the following information as a person who is (check one):

- Applying for an alcohol beverage license as an **individual**.
- A member of a **partnership** which is making application for an alcohol beverage license.
- President/CEO of Blazin Wings, Inc.
(Officer/Director/Member/Manager/Agent) (Name of Corporation, Limited Liability Company or Nonprofit Organization)

which is making application for an alcohol beverage license.

The above named individual provides the following information to the licensing authority:

- How long have you continuously resided in Wisconsin prior to this date? N/A
- Have you ever been convicted of any offenses (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of any other states or ordinances of any county or municipality? Yes No
If yes, give law or ordinance violated, trial court, trial date and penalty imposed, and/or date, description and status of charges pending. (If more room is needed, continue on reverse side of this form.)
N/A
- Are charges for any offenses presently pending against you (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of other states or ordinances of any county or municipality? Yes No
If yes, describe status of charges pending. N/A
- Do you hold, are you making application for or are you an officer, director or agent of a corporation/nonprofit organization or member/manager/agent of a limited liability company holding or applying for any other alcohol beverage license or permit? Yes No
If yes, identify. Officer of Blazin Wings, Inc. which holds retail liquor licenses throughout the US
(Name, Location and Type of License/Permit)
- Do you hold and/or are you an officer, director, stockholder, agent or employe of any person or corporation or member/manager/agent of a limited liability company holding or applying for a wholesale beer license, brewery/winery permit or wholesale liquor manufacturer or rectifier permit in the State of Wisconsin? Yes No
If yes, identify. _____
(Name of Wholesale Licensee or Permittee) (Address By City and County)
- Named individual must list in chronological order last two employers.

Employer's Name	Employer's Address	Employed From	To
Buffalo Wild Wings, Inc.	5500 Wayzata Blvd., Suite 1600, Minneapolis, MN 55416	11/94	Present
Dahlberg, Inc.	4101 Dahlberg Drive, Golden Valley, MN	10/83	11/94

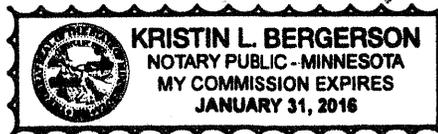
The undersigned, being first duly sworn on oath, deposes and says that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that 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.

Subscribed and sworn to before me

this 10 day of April, 20 13
Kristin Bergerson
(Clerk/Notary Public)

Sally J. Wold
(Signature of Named Individual)

My commission expires 1/31/2016



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Wisconsin Department of Revenue

AUXILIARY QUESTIONNAIRE ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk.

Individual's Full Name (please print) (last name)		(first name)	(middle name)	
Schmidt		James	Michael	
Home Address (street/route)	Post Office	City	State	Zip Code
17325 25th, Ave., N.		Plymouth	MN	55447
Home Phone Number	Age	Date of Birth	Place of Birth	
763-208-4940				

The above named individual provides the following information as a person who is (check one):

- Applying for an alcohol beverage license as an **individual**.
- A member of a **partnership** which is making application for an alcohol beverage license.
- Vice President of Blazin Wings, Inc.
(Officer/Director/Member/Manager/Agent) (Name of Corporation, Limited Liability Company or Nonprofit Organization)

which is making application for an alcohol beverage license.

The above named individual provides the following information to the licensing authority:

- How long have you continuously resided in Wisconsin prior to this date? N/A
- Have you ever been convicted of any offenses (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of any other states or ordinances of any county or municipality? Yes No
 If yes, give law or ordinance violated, trial court, trial date and penalty imposed, and/or date, description and status of charges pending. (If more room is needed, continue on reverse side of this form.)
N/A
- Are charges for any offenses presently pending against you (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of other states or ordinances of any county or municipality? Yes No
 If yes, describe status of charges pending. N/A
- Do you hold, are you making application for or are you an officer, director or agent of a corporation/nonprofit organization or member/manager/agent of a limited liability company holding or applying for any other alcohol beverage license or permit? Yes No
 If yes, identify. Officer of Blazin Wings, Inc. which holds retail liquor licenses throughout the US
(Name, Location and Type of License/Permit)
- Do you hold and/or are you an officer, director, stockholder, agent or employe of any person or corporation or member/manager/agent of a limited liability company holding or applying for a wholesale beer license, brewery/winery permit or wholesale liquor manufacturer or rectifier permit in the State of Wisconsin? Yes No
 If yes, identify. _____
(Name of Wholesale Licensee or Permittee) (Address By City and County)
- Named individual must list in chronological order last two employers.

Employer's Name	Employer's Address	Employed From	To
Buffalo Wild Wings, Inc.	5500 Wayzata Blvd., #1600, Minneapolis, MN 55416	4/2002	Present
Employer's Name	Employer's Address	Employed From	To
Robbins, Kelly, Peterson & Tucker	7 West 7th St., Cincinnati, OH	4/1997	4/2002

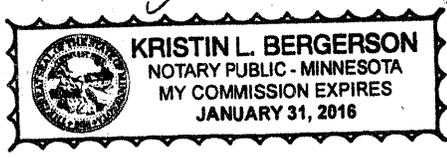
The undersigned, being first duly sworn on oath, deposes and says that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that 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.

Subscribed and sworn to before me

this 10 day of April, 2016
Kristin Bergerson
(Clerk/Notary Public)

James M Schmidt
(Signature of Named Individual)

My commission expires 1/31/2016



AUXILIARY QUESTIONNAIRE ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk.

Individual's Full Name (please print) (last name)		(first name)		(middle name)	
Twinem		Mary		Jane	
Home Address (street/route)		Post Office	City	State	Zip Code
15015 44th Ave., N			Plymouth	MN	55446
Home Phone Number		Age	Date of Birth	Place of Birth	
763-557-6967					

The above named individual provides the following information as a person who is (check one):

- Applying for an alcohol beverage license as an **individual**.
- A member of a **partnership** which is making application for an alcohol beverage license.
- Secretary/Treasurer of Blazin Wings, Inc.
(Officer/Director/Member/Manager/Agent) (Name of Corporation, Limited Liability Company or Nonprofit Organization)

which is making application for an alcohol beverage license.

The above named individual provides the following information to the licensing authority:

1. How long have you continuously resided in Wisconsin prior to this date? N/A
2. Have you ever been convicted of any offenses (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of any other states or ordinances of any county or municipality? Yes No
If yes, give law or ordinance violated, trial court, trial date and penalty imposed, and/or date, description and status of charges pending. (If more room is needed, continue on reverse side of this form.)
N/A
3. Are charges for any offenses presently pending against you (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of other states or ordinances of any county or municipality? Yes No
If yes, describe status of charges pending. N/A
4. Do you hold, are you making application for or are you an officer, director or agent of a corporation/nonprofit organization or member/manager/agent of a limited liability company holding or applying for any other alcohol beverage license or permit? Yes No
If yes, identify. Officer of Blazin Wings, Inc. which holds retail liquor licenses throughout the US
(Name, Location and Type of License/Permit)
5. Do you hold and/or are you an officer, director, stockholder, agent or employe of any person or corporation or member/manager/agent of a limited liability company holding or applying for a wholesale beer license, brewery/winery permit or wholesale liquor manufacturer or rectifier permit in the State of Wisconsin? Yes No
If yes, identify. _____
(Name of Wholesale Licensee or Permittee) (Address By City and County)
6. Named individual must list in chronological order last two employers.

Employer's Name	Employer's Address	Employed From	To
Buffalo Wild Wings, Inc.	5500 Wayzata Blvd., #1600, Minneapolis, MN 55416	01/1995	Present
Employer's Name	Employer's Address	Employed From	To
Dahlberg, Inc.	4101 Dahlberg Drive, Golden Valley, MN	1990	12/1994

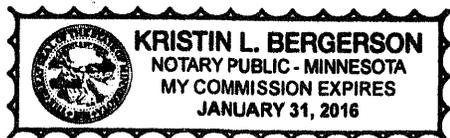
The undersigned, being first duly sworn on oath, deposes and says that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that 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.

Subscribed and sworn to before me

this 10 day of April, 2013
Kristin Bergerson
(Clerk/Notary Public)

[Signature]
(Signature of Named Individual)

My commission expires 1/31/16



AUXILIARY QUESTIONNAIRE ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk.

Individual's Full Name (please print) (last name)		(first name)		(middle name)	
Brokl		Matthew		Kent	
Home Address (street/route)		Post Office		City	
10660 Alison Way				Inver Grove Heights	
				State	
				MN	
				Zip Code	
				55077	
Home Phone Number		Age		Date of Birth	
651-994-6776		[REDACTED]		[REDACTED]	
				Place of Birth	
				[REDACTED]	

The above named individual provides the following information as a person who is (check one):

- Applying for an alcohol beverage license as an **individual**.
- A member of a **partnership** which is making application for an alcohol beverage license.

Vice President of Blazin Wings, Inc.
(Officer/Director/Member/Manager/Agent) (Name of Corporation, Limited Liability Company or Nonprofit Organization)

which is making application for an alcohol beverage license.

The above named individual provides the following information to the licensing authority:

- How long have you continuously resided in Wisconsin prior to this date? N/A
- Have you ever been convicted of any offenses (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of any other states or ordinances of any county or municipality? Yes No
 If yes, give law or ordinance violated, trial court, trial date and penalty imposed, and/or date, description and status of charges pending. (If more room is needed, continue on reverse side of this form.)
N/A
- Are charges for any offenses presently pending against you (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of other states or ordinances of any county or municipality? Yes No
 If yes, describe status of charges pending. N/A
- Do you hold, are you making application for or are you an officer, director or agent of a corporation/nonprofit organization or member/manager/agent of a limited liability company holding or applying for any other alcohol beverage license or permit? Yes No
 If yes, identify. Officer of Blazin Wings, Inc. which holds retail liquor licenses throughout the US
(Name, Location and Type of License/Permit)
- Do you hold and/or are you an officer, director, stockholder, agent or employe of any person or corporation or member/manager/agent of a limited liability company holding or applying for a wholesale beer license, brewery/winery permit or wholesale liquor manufacturer or rectifier permit in the State of Wisconsin? Yes No
 If yes, identify. _____
(Name of Wholesale Licensee or Permittee) (Address By City and County)

6. Named individual must list in chronological order last two employers.

Employer's Name	Employer's Address	Employed From	To
Buffalo Wild Wings, Inc.	5500 Wayzata Blvd., #1600, Minneapolis, MN 55416	4/2002	Present
Campbell Knutson, P.A.	1380 Corporate Ct. Curve#317, Eagan, MN 55721	4/1995	4/2007

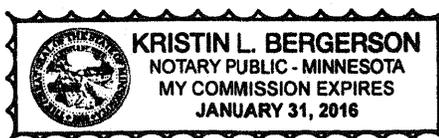
The undersigned, being first duly sworn on oath, deposes and says that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that 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.

Subscribed and sworn to before me

this 10 day of April, 2013
Kristin Bergerson
(Clerk/Notary Public)

Matthew Brokl
(Signature of Named Individual)

My commission expires 1/31/2016



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Wisconsin Department of Revenue

AUXILIARY QUESTIONNAIRE ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk.

Individual's Full Name (please print) (last name)		(first name)		(middle name)	
Decker		Emily		Clark	
Home Address (street/route)		Post Office		City	
3155 Lafayette Ridge Rd.				Wayzata	
Home Phone Number		Age		Date of Birth	
952-353-4940		[REDACTED]		[REDACTED]	
				State	
				MN	
				Zip Code	
				55391	
				Place of Birth	
				[REDACTED]	

The above named individual provides the following information as a person who is (check one):

- Applying for an alcohol beverage license as an **individual**.
- A member of a **partnership** which is making application for an alcohol beverage license.
- Vice President of Blazin Wings, Inc.
(Officer/Director/Member/Manager/Agent) (Name of Corporation, Limited Liability Company or Nonprofit Organization)

which is making application for an alcohol beverage license.

The above named individual provides the following information to the licensing authority:

- How long have you continuously resided in Wisconsin prior to this date? N/A
- Have you ever been convicted of any offenses (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of any other states or ordinances of any county or municipality? Yes No
If yes, give law or ordinance violated, trial court, trial date and penalty imposed, and/or date, description and status of charges pending. (If more room is needed, continue on reverse side of this form.)
N/A
- Are charges for any offenses presently pending against you (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of other states or ordinances of any county or municipality? Yes No
If yes, describe status of charges pending. N/A
- Do you hold, are you making application for or are you an officer, director or agent of a corporation/nonprofit organization or member/manager/agent of a limited liability company holding or applying for any other alcohol beverage license or permit? Yes No
If yes, identify. Officer of Blazin Wings, Inc. which holds retail liquor licenses throughout the US
(Name, Location and Type of License/Permit)
- Do you hold and/or are you an officer, director, stockholder, agent or employe of any person or corporation or member/manager/agent of a limited liability company holding or applying for a wholesale beer license, brewery/winery permit or wholesale liquor manufacturer or rectifier permit in the State of Wisconsin? Yes No
If yes, identify. _____
(Name of Wholesale Licensee or Permittee) (Address By City and County)
- Named individual must list in chronological order last two employers.

Employer's Name	Employer's Address	Employed From	To
Buffalo Wild Wings, Inc.	5500 Wayzata Blvd., #1600, Minneapolis, MN 55416	7/2007	Present
Briggs and Morgan, PA	2200 IDS Center, 80th South 8th St.	9/2004	7/2007

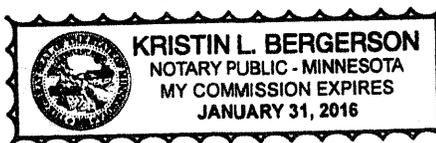
The undersigned, being first duly sworn on oath, deposes and says that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that 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.

Subscribed and sworn to before me

this 10 day of April, 2013
Kristin Bergerson
(Clerk/Notary Public)

[Signature]
(Signature of Named Individual)

My commission expires 1/31/2016



Wisconsin Department of Revenue



ID NO. 8630641

CARD NO. 9808067

ServSafe Alcohol[®] CERTIFICATE

DARIN REIGER

Card expires three years from the date of the examination. Local laws apply.

DATE OF EXAMINATION

3/1/2013

Store	Name	Open Date	Phone	Address1	Address2	City	State	ZIP
65	EAST CALUMET	4/7/2002	920-733-9464	3201 E. Calumet Street		Appleton	WI	54915-4766
81	WAUSAU	7/14/2003	715-845-9464	1819 West Stewart Avenue		Wausau	WI	54401-5373
82	ASHWAUBENON	12/22/2002	920-429-9464	2101 South Oneida Street	Suite 100	Ashwaubenon	WI	54304-4616
94	EAU CLAIRE	2/23/2004	715-858-9453	4612 Keystone Crossing		Eau Claire	WI	54701-5051
132	KENOSHA	3/13/2006	262-857-9992	7127 120th Ave.		Kenosha	WI	53142-7335
156	OSHKOSH	6/11/2007	920-426-8358	500 South Koeller Street		Oshkosh	WI	54902-5548
164	HUDSON	11/5/2007	715-381-6531	913 Pearson DR		Hudson	WI	54016-8741
167	WEST BEND	11/19/2007	262-334-2999	705 West Paradise Drive		West Bend	WI	53095-8530
209	PEWAUKEE	7/28/2008	262-695-3900	1273 Capitol Drive	Suite A	Pewaukee	WI	53072-2526
216	ONALASKA	9/22/2008	608-781-9453	3132 Market Place		Onalaska	WI	54650-6705
219	OAK CREEK	11/24/2008	414-570-9464	8171 S Howell Avenue		Oak Creek	WI	53154-8345
228	JANESVILLE	4/27/2009	608-741-9464	2929 Milton Avenue	Suite 110	Janesville	WI	53545-0253
249	WAUKESHA	10/26/2009	262-832-2999	1180 West Sunset Drive	Ste 106	Waukesha	WI	53189-8422
275	STEVENS POINT	8/30/2010	715-344-3287	5370 Highway 10 East	Suite H	Stevens Pt	WI	54482-8304
281	GLENDALE	9/20/2010	262-369-1600	590 W. Northshore Drive	N-145	Glendale	WI	53217-4533
354	GRAND CHUTE RELOCATION	4/2/2012	920-830-4169	4601 W. College Avenue		Grand Chute	WI	54914
407	WATER STREET	10/1/2012	414-277-0293	1123 North Water Street		Milwaukee	WI	53202-6637
408	MAYFAIR	10/1/2012	414-302-1900	2635 North Mayfair		Wauwatosa	WI	53226-1302
409	WEST ALLIS	10/1/2012	414-431-1100	2950 South 108th Street		West Allis	WI	53227-3520
410	NEW BERLIN	10/1/2012	262-432-0100	15306 West Beloit Road		New Berlin	WI	53151-7447
411	MONONA	10/1/2012	608-237-8686	6544 Monona Drive		Monona	WI	53716-4032
412	FITCHBURG	10/1/2012	608-268-0025	6227 McKee Road	Suite F	Fitchburg	WI	53719-5178
413	EAST TOWNE MALL	10/1/2012	608-268-0802	240 East Towne Mall		Madison	WI	53704-3716
414	UNIVERSITY	10/1/2012	608-255-9464	789 University Avenue		Madison	WI	53715-1037
415	27TH STREET MILWAUKEE	10/1/2012	414-755-0088	3636 South 27th Street		Milwaukee	WI	53221-1303
418	BROOKFIELD, WI	12/17/2012	262-641-8956	16750 W. Bluemound Road	Suite B	Brookfield	WI	53005-5960

BUSINESS PLAN FOR



**121 N. Pioneer Road
FOND DU LAC, WI 54935**

1. Company Information

Buffalo Wild Wings® specializes in a variety of boldly flavored menu items, including New York style chicken wings spun in any of our 21 signature sauces and seasonings. Our restaurants have a family-welcoming atmosphere that offer an extensive multimedia system which appeals to sports fans and families alike!

Buffalo Wild Wings® will be located at 121 N. Pioneer Road, Fond du Lac, WI 54935.

Buffalo Wild Wings® is the trade name of the business which is owned by the corporation Blazin Wings, Inc., which is incorporated in Minnesota.

Blazin Wings, Inc. office is located at 5500 Wayzata Blvd. Suite 1600, Minneapolis, MN 55416.

2. Experience of Owner in Operating a Full Service Restaurant

Buffalo Wild Wings® currently operates 399 corporate owned restaurants in the United States and Canada. Blazin Wings, Inc. operates 27 corporate owned restaurants in Wisconsin.

3. Licenses, Knowledge, and Education of Owner Relating to Operation of a Full Service Restaurant

Blazin Wings, Inc. ensures that all managers of Class B Liquor Licenses in Wisconsin have completed Responsible Alcohol Service training and monitor all employees to ensure they are current with their training.

Blazin Wings, Inc. currently operates 27 Class B Liquor Licenses throughout Wisconsin.

4. Operation and Marketing Plan for BUFFALO WILD WINGS®

A. Goods Sold

Buffalo Wild Wings® specializes in a variety of boldly flavored menu items, including New York style chicken wings spun in any of our 21 signature sauces and seasonings. Buffalo Wild Wings® will also sell non-alcoholic beverages, retail items, beer, liquor and wine.

B. Hours of Operation

- (1) BUFFALO WILD WINGS® will be open for business Monday – Thursday 11:00 am until 1:00 am.
- (2) BUFFALO WILD WINGS® will be open for business Friday – Saturday 11:00 am until 2:00 am.
- (3) BUFFALO WILD WINGS® will be open for business Sunday 11:00 am until 12:00 am.

C. Advertising

Buffalo Wild Wings® restaurants have a family-welcoming atmosphere and offer an extensive multimedia system which appeals to sports fans and families alike. A Grand Opening will be advertised through the community and Buffalo Wild Wings® also has a National Advertising Presence on channels such as ABC, FOX, ESPN, and CBS.

5. Entertainment

A. DJ

Buffalo Wild Wings® will not have a DJ or live music on site.

B. TV and Cable

Buffalo Wild Wings® restaurants have a family-welcoming atmosphere and offer an extensive multimedia system which appeals to sports fans and families alike. Our restaurants have between 40-50 TV's that broadcast any and all sporting events our customers hope to watch while dining at our restaurant.

6. Customer Parking for BUFFALO WILD WINGS®

The landlord has assured Buffalo Wild Wings® that there is sufficient parking to accommodate our customers.

7. Business Competition

1. Applebee's

8. Equipment and Supplies for the Operation of BUFFALO WILD WINGS®

Buffalo Wild Wings® will have all of the equipment and supplies required to operate a full service restaurant. Equipment will include (but not limited to) stoves, vents and hoods, fryers, freezers and coolers, tables, booths, and chairs. Supplies will include (but not limited to) flatware, glasses, food, liquor, beer, wine, and paper supplies.

9. Beer and Liquor Supplies

Once Buffalo Wild Wings® has received full approval through the city, management will order and stock all needed beer, liquor, and wine required to serve our customers.

10. Pre-Paid Insurance by BLAZIN WINGS, INC. for BUFFALO WILD WINGS®

Buffalo Wild Wings® will have adequate liability insurance before the restaurant is open to the public.

11. Signage

There will be multiple signs on the building that will be approved by the City of Fond du Lac before being professionally installed.

12. Floor Plan

- A. There will be one customer entrance and exit. All other exits will be labeled as emergency exits.
- B. All alcohol not being used in the bar will be locked in storage crates or in a locked beer cooler.

13. Business Bank Account

Buffalo Wild Wings® has an account with Wells Fargo Bank and all of the money needed to build, stock, and equip the restaurant will be from corporate earnings.

14. Building

The space that Buffalo Wild Wings® will be occupying at 121 N. Pioneer Road, Fond du Lac, WI 54935 is owned by 121 North Pioneer Road, LLC. The building is leased by Blazin Wings, Inc. for approximately \$8,050.00 a month. 121 North Pioneer Road, LLC and Blazin Wings, Inc. will be entering a lease agreement for 10 years.

15. Federal Employer I.D. Number

Blazin Wings, Inc. Federal Employer Identification Number is 41-1957107.

16. Wisconsin Business Tax Registration Number

Blazin Wings, Inc. has applied for a Wisconsin Business Tax Registration Number through the WI DOR. All 27 restaurants Blazin Wings, Inc. operates in Wisconsin have been issued a Wisconsin Business Tax Registration Number.

17. Building Inspection

When construction of the building is complete, the City of Fond du Lac Building Department will be contacted for an inspection.

18. City Health Inspection

After construction of the building is complete and the City of Fond du Lac Building Department approved the building inspection, the Department of Health will be contacted for an inspection and approval for the sale of our menu items in our full service restaurant.

19. Security

Buffalo Wild Wings® will have an extensive camera security system in place to protect customers and employees alike.

Concluding Statement by BLAZIN WINGS, INC.

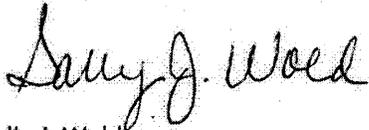
Buffalo Wild Wings® currently operates 399 corporate-owned restaurants in the United States and Canada and currently operates 27 corporate-owned restaurants in Wisconsin.

Money needed to build, stock, and equip the restaurant will be from corporate earnings of Buffalo Wild Wings®.

In the past 5 years, only 2 restaurants operating in Wisconsin have received liquor license violations (both in 2010) with 1 receiving only a warning.

Dated this 16th day of April, 2013

Sincerely,

A handwritten signature in cursive script that reads "Sally J. Wold". The signature is written in black ink and is positioned above the printed name and title.

Sally J. Wold
President
Blazin Wings, Inc.

RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07 01 2013 ending: 06 30 2014
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of } FOND DU LAC
 Village of }
 City of }

County of FOND DU LAC Aldermanic Dist. No. _____ (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Applicant's Wisconsin Seller's Permit Number: <u>YS6-1026804198-03</u>	
Federal Employer Identification Number (FEIN): <u>26-348 1699</u>	
LICENSE REQUESTED	
TYPE	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$ <u>100.00</u>
<input type="checkbox"/> Class C wine	\$
<input type="checkbox"/> Class A liquor	\$
<input checked="" type="checkbox"/> Class B liquor	\$ <u>500.00</u>
<input type="checkbox"/> Reserve Class B liquor	\$
Publication fee	\$ <u>30.00</u>
TOTAL FEE	\$ <u>630.00</u>

Complete A or B. All must complete C.

A. Individual or Partnership:
 Full Name(s) (Last, First and Middle Name) _____ Home Address _____ Post Office & Zip Code _____

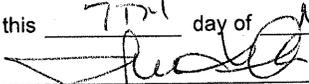
B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company North Main Hospitality, LLC
 Address of Corporation/Limited Liability Company (if different from licensed premises) _____
 All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company:

Title	Name (Inc. Middle Name)	Home Address	Post Office & Zip Code
President/Member	<u>Kurt Pansaric</u>	<u>20957 Jade Ct Oakton, VA</u>	<u>91765</u>
Vice President/Member			
Secretary/Member			
Treasurer/Member			
Agent	<u>Anna Nelson</u>	<u>673 Mount Vernon St</u>	<u>Oshkosh WI 54901</u>
Directors/Managers			

C. 1. Trade Name Retlow Plaza Hotel Business Phone Number 920-923-3000
 2. Address of Premises One N. Main St Post Office & Zip Code FOND 54935

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes No
4. 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, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) Retlow Plaza Hotel - FOND - 54935
5. Legal description (omit if street address is given above): One N. Main St. FOND WI 54935
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, corporation 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 reverse side Yes No Restaurant, Lounge, Banquet, Party rooms
- 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 reverse side 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 a Wisconsin Seller's Permit must be applied for and issued in the same name as that shown under Section A or B above? [phone (608) 266-2776] Yes No
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

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signers. Signers agree to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants and each member of a partnership applicant must sign; corporate officer(s), members/managers of Limited Liability Companies must sign.)

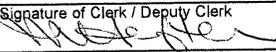
SUBSCRIBED AND SWORN TO BEFORE ME
 this 7th day of May, 2013


(Clerk/Notary Public)
 My commission expires _____

(Officer of Corporation/Member/Manager of Limited Liability Company /Partner/Individual)

(Officer of Corporation/Member/Manager of Limited Liability Company /Partner)

(Additional Partner(s)/Member/Manager of Limited Liability Company if Any)

TO BE COMPLETED BY CLERK		
Date received and filed with municipal clerk <u>5-8-13</u>	Date reported to council/board <u>6-12-13</u>	Date license granted
License number issued <u>14-3283</u>	Date license issued	Signature of Clerk / Deputy Clerk 

AT-115 (R, 1-12)
 Rec# 27672

CITY OF FOND DU LAC - Memorandum

City Attorney's Office

Date: May 23, 2013
To: Alcohol Licensing Committee Members
From: Chad Wade, Assistant City Attorney
Re: Alcohol License Non-Renewal Procedure

Under Wisconsin Statutes §125.10, the City of Fond du Lac has enacted a local ordinance governing the alcohol licensure within the City. Under Fond du Lac Municipal Code §12.03(6.1)(c), the City created the Fond du Lac Alcohol Licensing Committee (“ALC”) as an advisory committee to the City Council. The ALC is tasked to review all applications for new licenses and disciplinary procedures for existing license holders. The ALC does not have a role in the renewal of a license. However, non-renewal of a license is required to be treated as a disciplinary procedure under Wisconsin Statutes §125.12(3).

Under Wisconsin Statutes §125.12(2)(ag) a license may only be non-renewed for one of the statutorily stated reasons. For purposes of this hearing the most relevant statutory bases for non-renewal are:

§125.12(2)(ag)1. The person has violated this chapter or municipal regulations adopted under s. 125.10.

§125.12(2)(ag)4. The person does not possess the qualifications required under this chapter to hold the license.

Once the ALC has made its recommendation, the matter will be presented to the City Council for review.

Along with creating the ALC, the City also adopted Municipal Code §12.03(5), which establishes payment of all taxes, assessments, or other claims of the City as a minimum qualification for a license. The license holder in this matter has failed to meet the minimum qualification for licensure under Fond du Lac Municipal Code by failing to pay all outstanding debts to the City. Further, the nonpayment is a violation of the municipal regulations adopted under §125.10 by the City of Fond du Lac.

**CITY OF FOND DU LAC
ALCOHOL LICENSING COMMITTEE**

**CITY OF FOND DU LAC,
a Wisconsin Municipal Corporation,**

v
**NORTH MAIN HOSPITALITY LLC
dba RETLAW HOTEL
KIRIT PANSURIA, REGISTERED AGENT
1 NORTH MAIN STREET
FOND DU LAC WI 54935**

Complaint

The City of Fond du Lac, by Assistant City Attorney, Chad P. Wade, states as follows:

1. That, North Main Hospitality, LLC, dba Retlaw Hotel, Kirit “Ken” Pansuria, as agent therefore, (hereinafter collectively “North Main”) is the license holder of a combination Class B Fermented Malt Beverage and Intoxicating Liquor License # 12-003283 issued pursuant to Chapter 125, Wisconsin Statutes, and City of Fond du Lac Municipal Code in conformity therewith, for the Retlaw Hotel (formerly known as the Ramada Plaza Hotel), located at 1 North Main Street, in the City of Fond du Lac, Fond du Lac County, Wisconsin.
2. That, under the terms of an Agreement between the City of Fond du Lac and North Main Hospitality’s agent Mr. Pansuria, North Main currently owes \$64,053.02 for unpaid 2013 municipal utility bills and its 2012 Real Estate tax bill. Further, because North Main has failed to fulfill its obligations under the prior agreement the City has reinstated \$81,401.35 in fees and interest that were held in abeyance under the agreement leaving a total balance due of \$145,454.37. Attached as Exhibit A to this complaint is a summary of the amounts due.
3. That Fond du Lac Municipal Code C§ 12.03(5) states, “No license shall be granted to any person who, or premises for which, taxes, assessments or other claims of the City are delinquent and unpaid.”
4. That the foregoing are violations of Fond du Lac Municipal Code adopted pursuant to §125.10, Wisconsin Statutes, and form the basis for nonrenewal, set forth in Wisconsin Statutes §§125.12(2)(ag) & (3), of the Combination Class B Fermented Malt Beverage and Intoxicating Liquor License # 12-003283 issued to North Main Hospitality.

WHEREFORE, the City of Fond du Lac asks that the Fond du Lac Alcohol Licensing Commission recommend non-renewal of North Main Hospitality’s Combination Class B Fermented Malt Beverage and Intoxicating Liquor License # 12-003283.



Chad P. Wade, Assistant City Attorney
City of Fond du Lac

Date: 5/23/13

EXHIBIT A

North Main Hospitality LLC- Retlaw

Balance Due May 22, 2013

Balances due at March 6, 2013

Utility Bill	\$ 42,534.48
Room Taxes	68,507.30
Parking Fees	49,920.00
Real Estate Tax Bill - 2012	51,192.30
Total balances due at March 6, 2013	212,154.08

Activity since March 6, 2013

Fees incurred	18,800.29
Payments received	(85,500.00)

Balance Due May 22, 2013 **145,454.37**

Agreement Adjustments **(81,401.35)**

Balance due May 22, 2013 under agreement **\$ 64,053.02**

**CITY OF FOND DU LAC
ALCOHOL LICENSING COMMITTEE**

**CITY OF FOND DU LAC,
a Wisconsin Municipal Corporation,**

v

NOTICE OF HEARING

**NORTH MAIN HOSPITALITY LLC
dba RETLAW HOTEL
KIRIT PANSURIA, REGISTERED AGENT
1 NORTH MAIN STREET
FOND DU LAC WI 54935**

NOTICE OF HEARING

THE STATE OF WISCONSIN:

To each person named above as a Defendant:

YOU ARE HEREBY NOTIFIED that a hearing regarding your Combination Class B Fermented Malt Beverage and Intoxicating Liquor License no. 12-003283 will be held before the Alcohol Licensing Committee on Wednesday, May 29, 2013, at 4:00 p.m. in Rooms D and E of the City/County Government Center, 160 S. Macy Street, Fond du Lac, Wisconsin. The purpose of this hearing is to determine whether your license is eligible for renewal based upon unpaid taxes, assessments, and fees.

If you fail to appear before the Alcohol Licensing Committee on the above date and place, the allegations above shall be taken as true and your license may be not be renewed.

In addition to any other procedural due process rights that may attach, you are hereby afforded the following:

1. Notice of the hearing as stated above: Wednesday May 29, 2013 at 4:00 p.m., in Rooms D and E of the City/County Government Center, 160 S. Macy Street, Fond du Lac, Wisconsin.
2. Opportunity to examine, at and prior to the hearing, all documents and records to be used by the City Council; such documents will be open to examination upon reasonable notice to the Fond du Lac Police Department at 126 N. Main Street, Fond du Lac, Wisconsin.
3. Opportunity to present and argue your own case or have an attorney of your choice present and argue your case; legal counsel, if desired, must be provided at your own expense.

4. Opportunity to bring witnesses to testify on your behalf (if subpoenas are necessary, you may obtain subpoenas from the Fond du Lac Clerk of Courts office.)
5. Opportunity to establish all pertinent facts and circumstances.
6. Opportunity to question or refute any testimony or evidence, including the right to cross-examine adverse witnesses.
7. Opportunity to request a written transcript of the hearing at your expense.

The quasi-judicial hearing will be recorded.

ISSUED at Fond du Lac, Wisconsin, this 23rd day of May, 2013.

FOND DU LAC CITY ATTORNEY'S OFFICE

By: 
Chad P Wade
Assistant City Attorney

State Bar No. 1070906

City of Fond du Lac
City Attorney's Office
160 S. Macy Street
P O Box 150
Fond du Lac, WI 54936-0150
(920) 322-3424