


Application Submittal Checklist

Each application will need the following detail in order to be considered a complete application and be processed and reviewed:

- 1) A fully completed and signed application. (EACH PAGE MUST BE SIGNED AND DATED)
- 2) If the applicant is not the owner of the building/property, acknowledgment from the building/property owner must be attached as proof they are aware of the application being submitted to the City.
- 3) Nature of business, to include business hours, days and months of operation, the planned capacity of the outdoor dining area, and a lighting and signage plan.
- 4) A scaled site plan for an outdoor dining area, to include the location and boundary of the proposed outdoor dining area; the dimensions of the remaining width of the sidewalk outside the outdoor dining area; the dimension from the outdoor dining area to the curb and all buildings; and the location of awnings, dining appurtenances within the outdoor dining area. The plans shall also indicate: existing property lines; associated buildings and entrances; extent of sidewalk adjacent to businesses, face of curb, location of fire hydrants, bus shelters and/or stops, trees, utility poles, signs, benches, light poles, waste receptacles, driveways, alleys, vaults and any other obstructions within the public right-of-way at the proposed location of the outdoor dining area and for an additional 20 feet there from. Site Plan shall also include dimensions of the proposed outdoor dining area, the number of tables/seats and the distances between them, and the location of all fencing with a description of type and materials.
- 5) Plans for any proposed structures such as raised platforms, enclosures, and/or roofs.
- 6) Photos, attachments, and/or renderings or any other information that will help the City better understand, review and process your application.
- 7) Any other items pertaining to the Street Privilege Permit Process.

Signature  Date 5/29/24
Signature may be typed if completing electronically





City of La Crosse, Wisconsin

APPLICATION FOR EXPANSION OF ALCOHOL BEVERAGE LICENSE INTO OUTDOOR DINING AREA

Fee: \$ 150.00

The undersigned licensee requests permission to expand the following alcohol beverage license(s) into outdoor dining area pursuant to Sec. 4-45(b) and/or 4-109(b) of the Municipal Code. Check all license that apply.

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

BUSINESS INFORMATION				
Legal/Real Name of Business: <i>The Root Note LLC</i>				
Business Address: <i>115 4th St S. La Crosse, WI 54601</i>				
Business Phone Number: <i>608 782 7668</i>		Business Email: <i>therootnote@gmail.com</i>		
PREMISES INFORMATION				
Trade Name of Business: <i>The Root Note</i>				
Address of Premise: <i>115 4th St S. La Crosse, WI 54601</i>				
EXPANSION INFORMATION				
Dates of Expansion - must be between April 1 and October 31 (unless otherwise permitted by the Board of Public Works) <i>May 16 - October 31</i>				
Description of Proposed Expansion - Where Alcohol Will be Present (square feet, physical location, etc.): <i>Same as our 2023 plan.</i>				
AGENT INFORMATION				
Agent Name:		First	Middle	Last
		<i>Corrie</i>		<i>Brekke</i>
Agent Home Address:		Street	City	State Zip Code
		<i>113 4th St S.</i>	<i>La Crosse</i>	<i>WI 54601</i>
Phone Number:		Email:		
<i>608 797 0654</i>		<i>Corrie.brekke@gmail.com</i>		

The above hereby makes application to expand its alcohol beverage license into outdoor dining area pursuant to Sec. 4-45(b) and/or 4-109(b) and the provisions of Sec. 40-106(3) of the Municipal Code. I agree to abide by all applicable state and local regulations including, but not limited, to the sale and service of alcoholic beverages and adherence to noise levels.



 Signature of Applicant

 5/25/24
 Date



REVOCABLE OCCUPANCY / STREET PRIVILEGE PERMIT

*** RENEWAL or TERMINATION FORM ***

City of La Crosse Engineering Department

Phone: 608-789-7505 Email: engineering@cityoflacrosse.org http://cityoflacrosse.org

Encroachment Owner: The Root Note

Owner Address: 115 4th St S. City: LaCrosse State: WI Zip: 54601

Phone # 608 782 7668 Email Address therootnote@gmail.com

Type of Encroachment:

Outdoor patio seating / alcohol outside

Encroachment Address:

115 4th St S. La Crosse, WI 54601

Tax Parcel Number:

17-20023-10

Issued Permit Number:

** If Encroachment has been removed & permit to be terminated (Sign Name in Box Below):

Sign Name: [Signature] Print Name: Corrie Brekke Date: 5/29/24

The above Signatory States that the Encroachment has been removed and right of way restored

Please return the completed renewal form in January annually along with valid insurance certificate and renewal fee to the following: **Attn: Engineering Department, City of La Crosse, 400 La Crosse Street, La Crosse, WI 54601**

BELOW THIS LINE TO BE COMPLETED BY CITY STAFF ONLY

Required items to be provided by Applicant:

Certificate of Insurance (City as additional Insured)

Annual Renewal Fee Enclosed \$ _____

Encroachment Type:

Permit Number:

RENEWAL YEAR _____

