

RECEIVED JUN 25 2018

REQUEST FOR EXPANSION OF ALCOHOL BEVERAGE LICENSE & STREET PRIVILEGE PERMIT
(MUST HAVE LICENSE POSTED ON PREMISE BEFORE BEGINNING EVENT)

License Fee: \$ 150.00 (*additional \$50.00 tent fee, if applicable) Receipt #: 157926

\$100.00 Cash Deposit at City Treasurer on: 7/9/18 NA _____

The undersigned licensee requests permission to expand the following licenses onto public property for the purpose set forth below (check all that apply):

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

CHECK ONE: _____ Individual _____ Partnership _____ Corporation LLC

LEGAL/REAL NAME (Individual/Partnership/Corporation/LLC): The Charmant Hotel, LLC

TRADE NAME: The Charmant Hotel

NAME OF AGENT (If Corporation/LLC): Sean Castady _____
(Full Name - First, FULL Middle & Last)

BUSINESS ADDRESS/ADDRESS OF EXPANSION: 101 State St

BUSINESS PHONE NUMBER: 608-519-8815

DATE OF EXPANSION: 8-17-18 TIME OF EXPANSION (start & end times): 10am-11pm

*WILL THERE BE A TENT IN EXCESS OF 400 SQ. FT. (20' x 20')? Yes _____ No If yes, add \$50.

ATTACH DETAILED DESCRIPTION OF EVENT AREA AND ATTACH A DIMENSIONAL DRAWING. Detailed description and dimensional drawing MUST include dimensions of area, where the fencing will be placed, where entrances (s) and exit(s) will be and size of each, dimensions of tent (if a tent is used), and placement of port-a-potties.

DESCRIBE ENTERTAINMENT TO BE PROVIDED, if any. Live Music Performance
(NOTE: If there will be live music in the expanded area, also apply for a Special Event Outdoor Cabaret license.)

CONTACT PERSON: Sean William Castady _____
(Full Name - First, FULL Middle & Last)

ADDRESS OF CONTACT PERSON: 346 Tellin Ct

DAYTIME PHONE NUMBER OF CONTACT PERSON: 3109103722

REASON FOR EXPANSION REQUEST: More space for live music viewing

NUMBER OF PEOPLE ATTENDING THIS EVENT: 1000

AT THE TIME OF APPLICATION, applicant shall provide to the City Clerk a certificate of insurance describing the event and providing liability insurance in the amount of \$1,000,000.00 per occurrence and endorsed naming the City of La Crosse as an additional insured.

I further state that I have received a copy of the Ordinance, Resolution and Conditions for permitting the sale, possession and consumption of alcohol on streets, and agree to abide by the same, and with 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] 6-27-18
Signature of PRESIDENT of Corporation/Partner/Individual/Member Date

[Signature] 6-27-18
Signature of SECRETARY of Corporation/Partner/Member Date

For Office Use Only:
 Introduced - Council Meeting: _____ (applicant does not need to attend this meeting)
 J & A Meeting: _____ (public hearing, attendance recommended) Council Meeting: _____ (final action)
 Original - Council Copy Copy - Applicant Copy - Licensing Clerk

CITY OF LA CROSSE, WI

General Billing - 157926 - 2018

005139-0006 Courtney... 07/09/2018 04:33PM

186679 - CHARMANT HOTEL

Payment Amount: 150.00

We, the undersigned, represent at least two-thirds (2/3) of the abutting and adjacent property owners who are affected by the attached **Application for Expansion of Alcohol Beverage License and Street Privilege Permit** requested by The Charmant Hotel, LLC. We further state that we support the attached application for the event to be held on 8-17-18.

NAME (Print) Dan Trussoni ADDRESS Riverside Park - City of La Crosse
SIGNATURE [Signature] DATE 6/28/18

NAME (Print) Kristine H. Cleary ADDRESS 100 Harborview Plaza - Parcel # 20007-10
SIGNATURE [Signature] DATE 6/26/18 *100 Harborview Plaza - Building - city side*

NAME (Print) Kristine H. Cleary ADDRESS 100 Harborview Plaza - Parcel # 20001-10
SIGNATURE [Signature] DATE 6/26/18 *100 Harborview Plaza - Building*

NAME (Print) Kristine H. Cleary ADDRESS 121 State St - Parcel # 20008-50
SIGNATURE [Signature] DATE 6/26/18 *2nd State lot*

NAME (Print) Kristine H. Cleary ADDRESS 129 State St - Parcel 20008-50
SIGNATURE [Signature] DATE 6/26/18 *2nd State lot*

NAME (Print) _____ ADDRESS _____
SIGNATURE _____ DATE _____

NAME (Print) _____ ADDRESS _____
SIGNATURE _____ DATE _____

NAME (Print) _____ ADDRESS _____
SIGNATURE _____ DATE _____

NAME (Print) _____ ADDRESS _____
SIGNATURE _____ DATE _____







NAME (Print) _____ ADDRESS _____
SIGNATURE _____ DATE _____

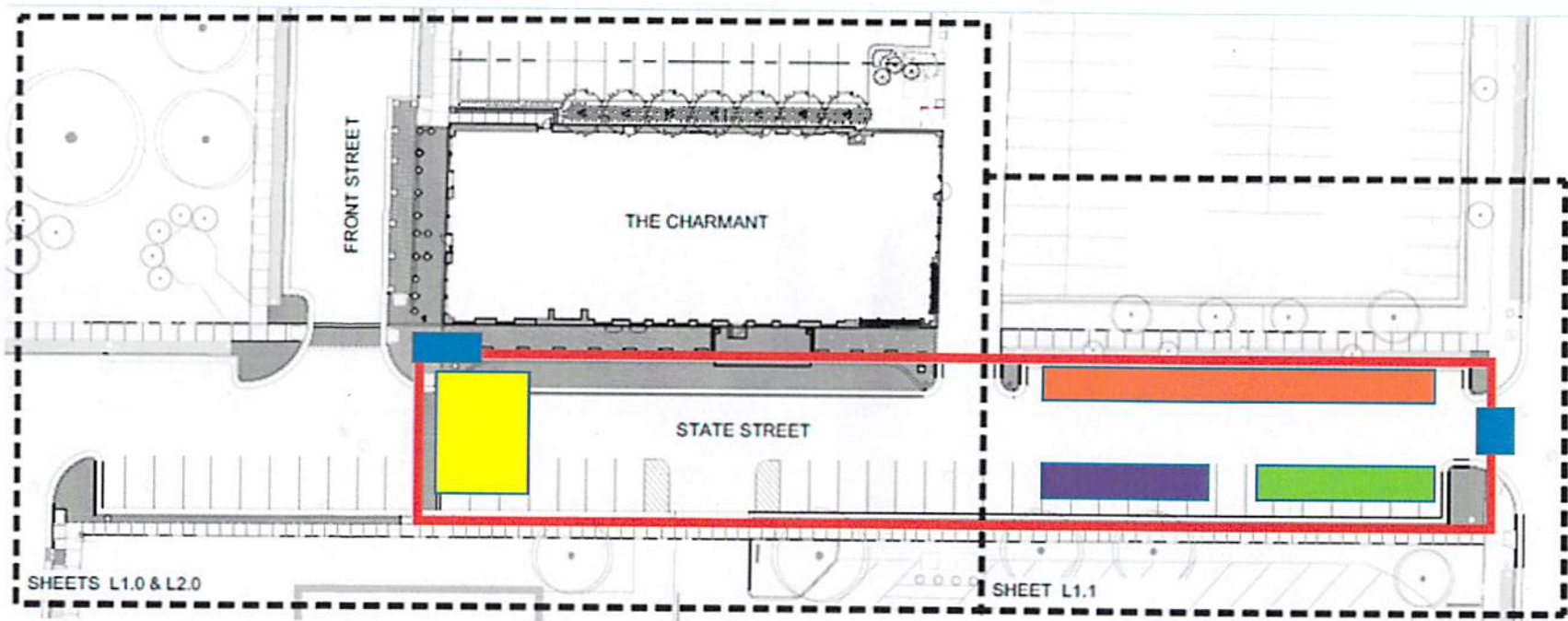
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NAME (Print) _____ ADDRESS _____
SIGNATURE _____ DATE _____

Charmant Hotel – River Roast 2018 Layout 8.17.18

	Stage		Restrooms		Entrance/Exits
	Fencing		F&B Area		Ticket Purchase



RiverRoast is an annual event that highlights live music for the local La Crosse community to enjoy. This event is free to the public and it serves as a thank you to the community for being so supportive of our establishment. We also like to highlight local vendors we work with and use their product in the F&B offerings. We will have music starting at 5pm and ending at 10pm with a few different bands (TBD). We have received approval from the Board of Public Works for a street permit and are requesting an expanded license for alcohol to be served on State St.



THE CHARMANT HOTEL LLC

ZD1 A708994 02

ROBERTSON-RYAN AND ASSOC.

General Liability of Additional Interest

Designated Person/Org CG2026

City of La Crosse
400 La Crosse Street
La Crosse WI 54601

