

City of La Crosse, Wisconsin

APPLICATION FOR EXPANSION OF ALCOHOL BEVERAGE LICENSE

*Must be filed in conjunction with a Special Event Application.

Fee: \$ 150.00

The undersigned licensee	requests permission to expand the following license(s) onto private property for the
	Check all license that apply.

Combination "Class B" Beer & Liquor

☐ Class "B" Beer

☐ "Class C" Wine

BUSINESS INFORMATION			
Legal/Real Name:	Trade Name:		
Dream Owce LLC	The Arterial Bar + Grill		
Business Address:			
1003 16 th St. 5, La Crosse, WI, 54601 Business Phone Number: Name of Agent (If Corporation/LLC):			
Business Phone Number:	Name of Agent (If Corporation/LLC):		
608-881-8877	Mark Branson		
EXPANSION INFORMATION			
Date of Expansion:			
5/25/22 - Fall			
Time of Expansion - when alcohol will be sold, possessed or co	onsumed in the public way:		
Start Weekday - 1 am 10pm Weeklevd 9am End 10pm Describe Area of Expansion - Where Alcohol Will be Present:			
Describe Area of Expansion Where Alexand Will be Present	De la Companya del Companya de la Companya del Companya de la Comp		
Patio area by pop muchine adjacent to South-side of building			
Reason for Expansion Request:			
Outdoor cute program - Same area a	6 used in 2020/2021		
constitution of the programme same with the	to blood along		
	and the over a manufacture of the last of the control of the contr		
PERSON IN CHARGE Name: First Middle	Last		
and the same of th			
Mark R	Branson		
Address: Street	City State Zip Code		
N2065 Valley Rd	La Crosse WI 54601		
Phone Number:			
608-397-7348			
000 011 1078			

The above hereby makes application to expand its alcohol beverage license onto private property as described. I agree to abide by 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 of Applicant

5/24/22

Date

