€ 100.00 REQUEST TO AMEND PREMISES DESCRIPTION

License Fee:

188487 Invoice No .:

TYPE OF LICENSE (check all that apply):



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

Class "A" Beer Class "A" Beer & "Class A" Liquor

To the Common Council of the City of La Crosse:

The undersigned licensee requests to amend its premises description at the address described below pursuant to Secs. 4-51 and 4-115 of the Code of Ordinances for the City of La Crosse.

Licensee Legal/Real Name: Ardie's Food Service Inc.
Trade Name (DBA): Restaurast (Flipsid Pubic Gul)
Address of Licensed Premises: 400 Ligng Duive Lacrosse
Name of Agent: Dave Lezpona
Agent Daytime Phone Number:386_8613
Name of Contact Person (if someone other than Agent):
Contact Person Daytime Phone Number:
Description of Proposed Change (include detailed floor plan): <u>Expanding existing L shaped</u> Patio 140 to our 50 parking Lot, <u>Approximately 14000 sqft to</u>
be feached in. Z volleyball courts à verving area.

Proposed Premise Description

Sales & Service: 1 story concrete block building and fenced-in beer garden area located on the south side of the building

First Floor of bui Storage: rage On (Authorized Signatu (Date)

****A DETAILED FLOOR PLAN MUST ACCOMPANY THIS APPLICATION****

Note: Before sales, service or consumption can occur in any new area, the premise must be inspected and a new license issued with the new premise description.

FOR OFFICE USE ONLY			
Date Filed with Clerk:	Date Routed:	Date Granted:	

