

**VILLAGE OF ELLSWORTH SPECIAL VILLAGE BOARD MEETING**

**March 5, 6:00pm**

**130 N. Chestnut St. Lower-Level Boardroom (East Rear Entrance)**

View Zoom Meeting

<https://us06web.zoom.us/j/88435641424?pwd=ZEPDbAa1xGfJfmEGHCc6pM3fK4Z9R.1>

Meeting ID: 884 3564 1424

Passcode: 590149

**AGENDA**

1. Call to Order
2. Pledge of Allegiance to the Flag
3. Public comment on non-agenda items

**New Business:**

4. Discuss/Possible Action on a request to relinquish the Class B Beer and Liquor License at 252 N. Broadway St, by Shotguns Bar
5. Discuss/Possible Action on BW's Tavern, Class B Beer and Liquor License at 252 N. Broadway St.

**Adjournment**

Posted at the Village Hall, Village Website, and Ellsworth Public Library.

# VILLAGE OF ELLSWORTH

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130 N CHESTNUT STREET, ELLSWORTH, WI 54011 | PHONE 715-273-4742 | FAX 715-273-6460

## **Village Board, March 5, 2026**

### **Agenda #4 – Discuss/Possible Action on a request to relinquish the Class B Beer and Liquor License at 252 N. Broadway St, by Shotguns Bar**

#### **Background**

Shotguns Bar is relinquishing the Class B Beer and Class B Liquor licenses at 252 N. Broadway St.

#### **Recommendation:**

Staff recommends the Village Board accept the relinquished licenses.

## WRITTEN CONFIRMATION OF LIQUOR LICENSE RELINQUISHMENT

I, **Tom Bullock**, owner and operator of **Shotguns**, located at **252 N Broadway St, Ellsworth, Wisconsin 54011**, hereby formally state and confirm the following:

I am voluntarily **relinquishing and surrendering my liquor license** associated with the above-referenced business and premises back to the **Village of Ellsworth**, effective immediately.

I acknowledge that I am no longer conducting business under this liquor license and that I have no further claim, right, or interest in the license. I understand that the liquor license shall revert to the control of the Village of Ellsworth and may be reissued or transferred only in accordance with applicable municipal and state laws.

This relinquishment is made knowingly, willingly, and without coercion.

**Dated:** February 17, 2026

**License Holder / Seller:**

A handwritten signature in black ink, appearing to read "Tom Bullock", written over a horizontal line.

**Tom Bullock**  
Shotguns

# VILLAGE OF ELLSWORTH

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130 N CHESTNUT STREET, ELLSWORTH, WI 54011 | PHONE 715-273-4742 | FAX 715-273-6460

## **Village Board, March 5, 2026**

### **Agenda #5 – Discuss/Possible Action on BW’s Tavern, Class B Beer and Liquor Licenses at 252 N. Broadway St.**

#### **Background**

The Village has received an application for the sale of intoxicating liquor and fermented malt beverages “Class B” from BW’s Tavern, 252 N. Broadway St, agent – Bobbie Jo Olson.

The prior Class B license for the sale intoxicating liquor and fermented malt beverages issued to Shotguns, LLC, at the property 252 N. Broadway St was relinquished and returned to the Village. This license could be issued to the applicant. The state limits the number of liquor licenses each municipality has. The Village has 8 regular licenses and one reserve license.

The Village Code 12.06(4)(d)(2) requires the Chief of Police to conduct an investigation of the applicant to determine whether the applicant is a suitable candidate for issuance of the license requested. No issues were identified.

#### **Recommendation:**

Staff recommends the Village Board approve the Class B Beer and Liquor licenses for BW’s Tavern.

# Alcohol Beverage License Application

For Municipal Use Only	
Municipality	
License Period	

**License(s) Requested:** (up to two boxes may be checked)

- |   |  |
|---|--|
| <input type="checkbox"/> Class "A" Beer ..... \$ _____          | <input checked="" type="checkbox"/> Class "B" Beer ..... \$ <u>100</u>   |
| <input type="checkbox"/> "Class A" Liquor ..... \$ _____        | <input checked="" type="checkbox"/> "Class B" Liquor ..... \$ <u>500</u> |
| <input type="checkbox"/> "Class A" Liquor (cider only) \$ _____ | <input type="checkbox"/> Reserve "Class B" Liquor \$ _____               |
| <input type="checkbox"/> "Class C" Liquor (wine only) \$ _____  |  |

Fees	
License Fees	\$ _____
Background Check Fee	\$ _____
Publication Fee	\$ <u>35</u>
<b>Total Fees</b>	<b>\$ _____</b>

**Part A: Premises/Business Information**

1. Legal Business Name (individual name if sole proprietorship) BW's Tavern			
2. Business Trade Name or DBA			
3. FEIN <u>41-4241517</u>		4. Wisconsin Seller's Permit Number <u>456-1032279924-02</u>	
5. Entity Type (check one) <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Partnership <input checked="" type="checkbox"/> Limited Liability Company <input type="checkbox"/> Corporation <input type="checkbox"/> Nonprofit Organization			
6. State of Organization WISCONSIN		7. Date of Organization <u>2/11/2026</u>	8. Wisconsin DFI Registration Number <u>B126436</u>
9. Premises Address 252 N Broadway Street			
10. City Maiden Rock		11. State WI	12. Zip Code 54750
13. County Pierce	14. Governing Municipality: <input type="checkbox"/> City <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village of: <u>Ellsworth</u>		15. Aldermanic District
16. Premises Phone (715) 279-7119	17. Premises Email bwstavern@gmail.com		18. Website
19. Premises Description - Describe the building or buildings where alcohol beverages are produced, sold, stored, or consumed, and related records are kept. Describe all rooms within the building, including living quarters. Authorized alcohol beverage activities and storage of records may occur only on the premises described in this application. Attach a map or diagram and additional sheets if necessary.			
20. Mailing Address (if different from premises address) N2781 320th Street			
21. City Maiden Rock		22. State WI	23. Zip Code 54750

**Part B: Questions**

1. Has the business (sole proprietorship, partnership, limited liability company, or corporation) been convicted of violating federal or state laws or local ordinances? Exclude traffic offenses unless related to alcohol beverages.  Yes  No  
If yes, list the details of violation below. Attach additional sheets if necessary.

Law/Ordinance Violated	Location	Trial Date
Penalty Imposed	Was sentence completed? . . . . <input type="checkbox"/> Yes <input type="checkbox"/> No	
Law/Ordinance Violated	Location	Trial Date
Penalty Imposed	Was sentence completed? . . . . <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Are charges for any offenses pending against the business? Exclude traffic offenses unless related to alcohol . .  Yes  No beverages.

If yes, describe the nature and status of pending charges using the space below. Attach additional sheets as needed.

3. Is the applicant business or any of its officers, directors, members, agent, employees, owners, or other related individuals or entities a restricted investor with any interest in an alcohol beverage producer or distributor? . .  Yes  No  
If yes, provide the name of the restricted investor and describe the nature of the interest.

4. Is the applicant business owned by another business entity? . . . . .  Yes  No  
If yes, provide the name(s) and FEIN(s) of the business entity owners below. Attach additional sheets as needed.

4a. Name of Business Entity	4b. Business Entity FEIN
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5. Have the partners, agent, or sole proprietor satisfied the responsible beverage server training requirement for this license period? Submit proof of completion. . . . .  Yes  No

6. Is the applicant business indebted to any wholesaler beyond 15 days for beer or 30 days for liquor/wine? . . . . .  Yes  No

7. Does the applicant business owe past due municipal property taxes, assessments, or other fees? . . . . .  Yes  No

**Part C: Individual Information**

List the name, title, and phone number for each person or entity holding the following positions in the applicant business or businesses listed in Part B, Question 4: sole proprietor, all officers, directors, and agent of a corporation or nonprofit organization, all partners of a partnership, and all members, managers, and agent of a limited liability company. Attach additional sheets if necessary.

Include Form AB-100 for each person listed below. Corporations and LLCs must appoint an agent by including Form AB-101.

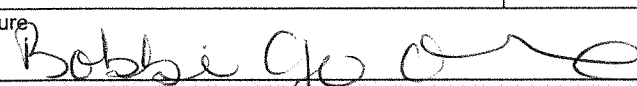
Last Name	First Name	Title	Phone
Olson	Bobbie Jo	Owner	(715) 279-7119

**Part D: Attestation**

One of the following must sign and attest to this application:

- sole proprietor      • one general partner of a partnership      • one corporate officer      • one member of an LLC

**READ CAREFULLY BEFORE SIGNING:** Under penalty of law, I have answered each of the above questions completely and truthfully. I agree that I am acting solely on behalf of the applicant business and not on behalf of any other individual or entity seeking the license. Further, I agree that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another individual or entity. I agree to operate this business according to the law, including but not limited to, purchasing alcohol beverages from state authorized wholesalers. I understand that lack of access to any portion of a licensed premises during inspection will be deemed a refusal to allow inspection. Such refusal is a misdemeanor and grounds for revocation of this license. I understand that any license issued contrary to Wis. Stat. Chapter 125 shall be void under penalty of state law. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Last Name Olson	First Name Bobbie Jo	M.I. J
Title Owner	Email bwstavern@gmail.com	Phone (715) 279-7119
Signature 		Date 02/16/26

**Part E: For Clerk Use Only**

Date Application Was Filed With Clerk	License Number	Date License Granted	Date License Issued
Signature of Clerk/Deputy Clerk		Date Provisional License Issued (if applicable)	

The premises are located at **252 N Broadway St, Ellsworth, WI** and consist of a bar occupying the ground floor of the building. A residential apartment is located above the bar and is completely separated from all alcohol-related activities. The apartment is not used for any licensed business purposes, and no alcoholic beverages or business records are stored or maintained in the residential area.

The bar portion of the premises includes the following areas:

- Main bar area where alcoholic beverages are sold and consumed
- Kitchen and food preparation area located within the bar
- Two (2) restrooms located within the bar
- Alcohol storage areas, including behind the bar and a walk-in cooler located in the basement

Alcoholic beverages are sold, stored, and consumed only within the bar portion of the premises. Alcohol storage is limited to the areas described above.

Business and alcohol-related records are maintained in a file box located behind the bar.

Authorized alcohol beverage activities and record storage occur only on the premises described in this application.