CITY OF WASHBURN 119 Washington Avenue P.O. Box 638 Washburn, WI 54891



715-373-6160 715-373-6161 FAX 715-373-6148

#### NOTICE OF FINANCE COMMITTEE MEETING

Monday, May 8, 2023 City Hall 4:30PM

■ Committee Review-Monthly Expenditures

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#### NOTICE OF CITY COUNCIL MEETING

Monday, May 8, 2023 Washburn City Hall 5:30 PM

This meeting may have members participating via tele or web conferencing. Public participants can listen to the proceedings by utilizing a computer or smart phone and using the link:

https://us02web.zoom.us/j/86381058510?pwd=TjZyTFV6amRIRENBV0E4U2o0eWZkQT09 by calling 1-888-788-0099 (Toll Free) and entering Webinar ID: **863 8105 8510** with passcode **050823** as opposed to being present for the meeting.

The Council may elect to go into Closed Session for a portion of the meeting pursuant to Wisconsin State Statutes 19.85(1)(f) to consider financial, medical, social or personal histories or disciplinary data of specific persons which, if discussed in public, would be likely to have a substantial adverse effect upon the reputation of any person referred to in such histories or data in order to discuss and consider a personnel matter involving a City employee and an elected official following which the Council may reconvene back into Open Session to take any action necessary on the closed session items.

#### **AGENDA**

- Call to Order/Roll Call/Pledge of Allegiance
- Approval of Minutes City Council April 10 and 18, 2023; Historic Preservation April 10, 2023
- Approval of Monthly Expenditures via Roll Call Vote
- Public Comment
- Mayoral Announcements, Proclamations, Appointments
- o Proclamations for National Skilled Nursing Care Week, National Police Week, Emergency
  Medical Services Week, Historic Preservation Month, and Arbor Day

  7. Floation of Council Provident and Floation of Plan Council Provident (2/2 Nata Provident)
- Election of Council President and Election of Plan Commission Member (2/3 Vote Required)
- Discussion & Action on Resolution #23-010 Ratifying the Mayor's Proclamation of April 20, 2023 and
   Declaring a Disaster in the City of Washburn Due to High Water and Flooding
- Discussion & Action on Draft Certified Survey Map for a Portion of Lot 52 at S. 8<sup>th</sup> Avenue West and Holman Lakeview Drive (Tax ID 32922)
- Discussion & Action on Resolution 2023-009 Terminating TID #2

  TAB 4
- Discussion & Action on Acceptance of Bid for Road Gravel

  TAB 5
- Discussion & Action on Ordinance 2023-003 Establishing the Process for the Issuance of Provisional Alcohol Licenses

  TAB 6
- Discussion & Action on Authorization of Notice for Class "B" (Beer) and "Class B" (Liquor) licenses to Chequamegon Bait at 10 W. Bayfield Street, Kelsey Lindsey – Agent
- Discussion & Action on Notice of Annual Alcohol License Renewals
   Discussion & Action on Special Event Request for Superior Vistas Bike Tour on June 24, 2023 Including

  TAB 8
- Discussion & Action on Special Event Request for Superior Vistas Bike Tour on June 24, 2023 Including Relaxation of Open Container and Noise Ordinances and Sale of Beer at Thompson's West End Park -Washburn Chamber, Petitioner
- Discussion & Action on Special Event Request for Closure of Central Avenue on July 29, 2023
   Historic Civic Center Foundation, Petitioner
- Closed Session Items
  - o Discussion & Action on a Personnel Matter involving a City Department Head and an Elected Official.
- Adjourn

April 10, 2023 HISTORIC PRESERVATION COMMISSION

5:30PM Washburn City Hall & Remote Call-In

Present: Carl Broberg, Karen Spears-Novachek, Tom Neimes,

Jennifer Maziasz, Dave Anderson, Laura Tulowitzky

Present, remote: none

Municipal Personnel: Mayor Mary D. Motiff, City Administrator Scott J. Kluver,

Assistant City Administrator Tony Janisch, City Attorney

Max Lindsey

Excused Absence: Mary McGrath

**Called to Order** – Meeting called to order at 5:30pm by Mayor Motiff. Roll call attendance depicted six (6) of seven (7) members of the Historic Preservation Commission in attendance. Quorum of the Commission recognized.

Discussion & Action on Issuance of Certificate of Appropriateness for Proposed Washburn City Hall Windows – Moved by Novachek to approve and issue a Certificate of Appropriateness for proposed City Hall Windows from either vendor, seconded by Broberg. Motion carried unanimously.

**Adjourn** – Mayor Motiff adjourned the meeting at 5:35pm.

Tony Janisch

Assistant City Administrator

#### April 10, 2023 CITY OF WASHBURN COMMON COUNCIL MEETING

5:30PM Washburn City Hall & Remote Call-In

City Council Members:

Present, in-person: Karen Spears-Novachek, Tom Neimes, Carl Broberg, Dave

Anderson, Laura Tulowitzky, Jennifer Maziasz

Present, remote: none

Municipal Personnel:

Present in-person: Mayor Mary D. Motiff, City Administrator Scott J. Kluver,

Assistant City Administrator Tony Janisch, City Attorney Max

Lindsey

Present, remote: none

Absent: Mary McGrath

**Call to Order** - Meeting called to order at 5:35PM by Mayor Motiff. Roll call attendance depicted six (6) of seven (7) members of the Common Council in attendance. Quorum of the Council recognized.

Approval of Minutes – City Council of March 13, 2023 - A motion was made by Neimes to approve the March 13, 2023 minutes of the City Council, second by Novachek. Motion carried unanimously.

Approval of Expenditures – A motion was made by Novachek to approve the monthly expenditures as reviewed, second by Anderson. Motion carried unanimously via a roll-call vote.

**Public Comment** – Roth Edwards, 221 W 6<sup>th</sup> St., began by stating that the Bayfield St. Reconstruction Project is much needed and recommends the City spend as much time and energy needed on the project as it can and forgo the open-field glamping project. He then read a statement from past Washburn mayor Edith Merila, who was mayor from 1976-1980 when the Walking Trail was originally built by the community; it was the people's path.

Teena Racheli, 111 W 3<sup>rd</sup> St., first thanked Council for the opportunity to share her comments, then shared her gut feel that the land along the lakeshore trail is beautiful, it is not in the best health. There is erosion and other signs of decline, and it needs tangible actions and policy for a goal of restoration. She continued that the proposed camping project, while interesting, is not environmentally focused. Racheli does not feel that the income generated by this camping wouldn't be a substantial way to address the fiscal needs. The lakeshore walking trail and the land that supports it are truly irreplaceable community treasures and hopes Council decides "No" on recreation camping proposals and instead seek ways to restore the vitality to the lakeshore.

Taura Edwards, 80765 State Hwy 13, ask City Council to think more carefully about the land before moving forward with development. She continued that citizens stepped forward and built the path; the people's path. The area is special and different, and we are fortunate to experience this kind of open space and green space, and to keep it open of the public and the citizens.

**Mayoral Announcements, Proclamations, Appointments** – The Mayor noted the start of warming weather and the heavy snow melt, along with the concern of overflow at the waste treatment plant.

She then encouraged citizens to conserve water and thanked staff for keeping an eye on the situation. The Mayor next recognized and presented certificates to outgoing council members Karen Novachek, Laura Tulowitzky, and Carl Broberg; and thanked them for their service to the citizens of Washburn. The Mayor concluded by nominating John Hopkins, Mike Wrobleski, Karen Novachek, Rick Grubele, and Matt Crowell to the Citizen Participation Committee which is required for the CDBG Grant application. Neimes moved to appoint Hopkins, Wrobleski, Novachek, Grubele, and Crowell to the Citizen Participation Committee, seconded by Broberg. Motion carried unanimously.

Discussion & Action on Resolution 2023-007 Committing to Match Requirement for Community Development Block Grant Application and Certifying Match Available – Neimes moved to approve Resolution 2023-007, seconded by Novachek. Motion carried unanimously via a roll-call vote.

Discussion & Action on Resolution 2023-008 Authorizing Application to the Community Development Block Grant Program – Novachek moved to approve Resolution 2023-008, seconded by Anderson. Motion carried unanimously via a roll-call vote.

**Discussion & Action on Acceptance of Proposal to Replace City Hall Windows** – Kluver began discussion stating that because energy efficiency is one of the factors in the purchase of windows, the City is exempt from State bidding laws. He continued that two proposals were received for window replacement; both are local manufacturers. John Hipp, H-Window representative, presented to Council, gave costs, and answered questions about their proposal. Next, Ron Anderson, ANDCO Inc. representative, presented, gave costs, and answered questions about their proposal. Discussion began regarding style of window and converting the round-top back to glass, a more historic look, or keeping as such. The Mayor called for a 5-minute break, inviting Council to go outside and look at the current window configuration.

The Mayor called the meeting back to order at 6:35PM. Discussion continued regarding window style and additional costs for varying amenities. <u>Anderson moved to approve H-Window's proposal</u> including awning style and a glass round-top, seconded by Novachek. Motion carried unanimously.

Presentation of 2022 Library Report – Darrell Pendergrass, Presenter – Library Director Pendergrass presented the 2022 annual report of the Library. He included that there were 24,795 checkouts in 2022, and that this number can be used to project funding from Bayfield County for 2024, estimating \$58,800. Maziasz asked about computer usage. Pendergrass answered that there has been a decline of usage since before Covid, but that the 24 hr. Free Wi-Fi had received 15,600 individual uses in the last year. Pendergrass added that the elevator repairs have just been completed and for the first time a wheel-bound person can enter the Library and go to the main floor without any assistance.

### Public Hearing, Discussion, & Action on Ordinance 2023-002 Adopting the City of Washburn Comprehensive Plan 2023-2043

Harbor Commission Request to Change Future Land Use Map Re: Lot 48 (Tax ID 32607) from Waterfront Mixed Use to Marina –

Tulowitzky moved by to open Public Hearing, seconded by Neimes. Motion carried unanimously. Nicholas Suminski, 845 County Hwy C, member of the Harbor Commission, stated that the Harbor Commission voted 7-0 to change the zoning of Lot 48 from Mixed-Use to Marina. He added that the Plan Commission recently voted 4-2 not to change the current zoning. Suminski continued that the current owner of the boat storage buildings at the Marina would like to expand to Lot 48 but could not with the current mixed-use zoning. There has been no interest in this lot since the

Pearl Beach proposal and should show that there is an interest in more marina business. With the cost share agreement for the operation of the marina, this would be a benefit for the Harbor Commission and the City. Suminski concluded that it would be a shame to see the lot still empty five years from now. Roth Edwards, 221 W 6<sup>th</sup> St., stated support for an Architectural Review ordinance at least for Bayfield Street. Broberg moved to closed Public Hearing, seconded by Neimes. Motion carried unanimously.

The Mayor stated that the Plan Commission spent a lot of time reviewing updates to the Comprehensive Plan, and specifically looked at Lot 48 and felt it was not intended for boat storage. Broberg noted that the Plan does include expanding boat storage facilities at the Marina. Discussion began. Broberg added that Lot 48 was the only practical location to expand boat storage, being adjacent to the Marina. If they were to place a building on the Marina property, they would lose outdoor storage for larger commercial boats. Attorney Lindsey noted that the current zoning of Lot 48 does allow for outside boat storage, but not for indoor boat storage. Anderson commented that people want to look at the Lake, not a pole building. Novachek added that there are many views of the lakeshore throughout the City, and the 1.5 acres of Lot 48 does not remove all of the views of Lake Superior. Discussion continued. Broberg moved to change the Future Land Use Map for Lot 48 to Marina Zoning, seconded by Novachek. Motion failed three (3) to four (4). Neimes, Novachek, Broberg voting in favor; Maziasz, Tulowitzky, Anderson voting against; with the Mayor voting nay. Novachek moved to approve Ordinance 2023-002 adopting the City of Washburn Comprehensive Plans 2023-2043, seconded by Anderson. Motion carried unanimously.

Public Hearing, Discussion & Action on Approval of Recommended Changes to the Land Sale List – Novachek moved to open the Public Hearing, seconded by Neimes. Motion carried unanimously. Jewel Pickert, 17 E 3<sup>rd</sup> St., asked if Lot 48 was included in the Land Sale List, and if so, she would be in favor of the zoning change to marina. She also commented that it seems like people are not for business and making money for the City. She continued that they were not asking for pole barns along the entire lakeshore, there are many places to see the lake. She concluded wondering why there is such a push to not be for business. Leann House, 329 W 5<sup>th</sup> St., agrees with the previous speaker and wonders why parking RVs and expanding the campgrounds is not going to destroy the view of the lakefront, but putting a metal building by the Marina on Lot 48 will; and which would give revenue to the City. She concluded that if economic development was a concern, why this wouldn't be considered. Novachek moved to closed Public Hearing, seconded by Neimes. Motion carried unanimously. Novachek moved to approve recommended changes to the Land Sale List, seconded by Anderson. Motion carried unanimously.

Discussion & Action on Bayfield Street Project Phase 2 Design Elements Including Turn Lanes, Bump Outs, and Decorative Features – Novachek asked about extending a sidewalk to Superior Ave. knowing that the housing development project is not finalized. Kluver responded that the motion for a sidewalk could be contingent on the housing project moving forward. If this is a desired feature, it would be good to know as the design could change the profile of the highway. Novachek moved to approve a Sidewalk on the northside of Bayfield Street to Superior Ave. contingent on the Housing Project, as well as Curve Bump Outs on the westside of E. 3<sup>rd</sup> Ave. for Phase 2 Design, seconded by Tulowitzky. Discussion occurred, including public comments regarding decorative features and the survey being conducted by the Washburn Chamber. Motion carried unanimously.

Discussion & Action on Contract Amendment with Marina Management Inc. Related to Financial Review/Compilation for 2022 – Broberg moved to approve a Contract Amendment with Marina Management Inc. to allow a compilation for Fiscal Year 2022, seconded by Novachek. Motion carried unanimously.

Discussion & Action on Agreement with Cooper Engineering to Prepare Final Plans and Cost Estimates for West End Park Campground Expansion Project – Neimes moved to approve an agreement with Cooper Engineering to prepare Final Plans & Cost Estimates for the West End Campground Expansion Project, seconded by Anderson. The Mayor began discussion by responding to previous comments that restoration work and invasive species control is happening on the lakefront trail, and this is not an either/or scenario, develop this or take care of that. This City will continue to take care of the lakefront trail, regardless of campground expansion. Discussion occurred, including Cooper Engineering meeting with the Parks Committee as the work commences.

Maziasz moved to open the floor, seconded by Tulowitzky. Motion carried unanimously. Roth Edwards, 221 W 6<sup>th</sup> Ave., added that Council's argument against a marina storage shed should also pertain to the preservation of public green space on Holman Lakeview Dr. He continued that another \$73,000 is being proposed, above the \$77,000 that was already spent and stated that the matter needs to be tabled and brought before the new council and the public. He concluded that tourism is Washburn's primary path forward, and do we really think selling off the lakefront with more development is going to be a charm that brings folks here or will keeping the lakefront be an advantage to the community and the people that will visit here; and that a decision should not be made tonight.

John Hopkins, 631 W Bayfield St., commented that the overflow area, being developed, will take quite a bit of time and money. Is it possible to wait and see how we do at the overflow and have more discussion before developing the other area.

Leann House, 329 W 5<sup>th</sup> St., stated to err on the side of caution that just because we got a plan, we got to keep marching forward, seems like flawed logic and a rush to judgement. And back to Lot 48 that it could gain revenue but it ruins the aesthetic, but yet destroys the aesthetic of the lakefront near the West End campground. She continued that at the past council meeting she's attended it seemed that 98% of the people that spoke had concerns about the development and asked Council to protect Washburn's public land. She heard that someone started a petition asking to put this to a referendum and it seems the communities is asking Council to table this matter regarding campground expansion and let the people vote on it. She concluded stating that you don't know what you've got 'til it's gone; if you let this go, you'll never be able to change it back.

Jared Trimbo, 24 E 3<sup>rd</sup> St., commented that he's followed this discussion a long time and if you asked people to choose between greenspace or something developed, they say greenspace all the time; but when you get into it, it's not so simple. He continued that he supports going forward and thinks it's something the city needs. Novachek moved to close the floor, seconded by Neimes. Motion carried unanimously. Discussion continued.

<u>Tulowitzky moved to re-open the floor, seconded by Maziasz. Motion carried unanimously.</u> Genevie Dwyer, Connecticut, stated that she grew up in Washburn and that she cherishes the natural areas and it's important to share that the lakefront is very cherished and appreciates the Park Committee to propose alternatives. <u>Novachek moved to close the floor, seconded by Neimes.</u> <u>Motion carried unanimously.</u> <u>Motion to approve an agreement with Cooper Engineering carried five (5) to one (1); Tulowitzky voting against.</u>

Discussion & Action on Special Event Request to Temporarily Restrict Parking on S. 2nd Ave W. and Harbor View Drive for North Coast Car Show, Use of Omaha Property for Parking, and Relaxation of Open Container on July 29, 2023 – Tammy DeMars/Jeff Moberg, Petitioners – No discussion.

Discussion & Action on Use of Thompson's West End Park, Memorial Park, Wikdal Park, and the Coal Dock; Closure of Portions of N. 3rd Ave. West and S. 4th Avenue West; and Relaxation of Open Container and Noise Ordinances all at Certain Times During Brownstone Block Party Activities July 28 through July 30, 2023 – Washburn Chamber, Petitioner – No discussion.

Discussion & Action on Recurring Special Event Request to Temporarily Close Central Avenue from Bayfield Street North to the Alley on Wednesdays from 1:00PM until 7:00PM Starting June 14 until October 18 for the Washburn Farmers Market – Aaron Irmiter, Petitioner – No discussion.

Discussion & Action on Special Event Request to Temporarily Close N. 3rd Ave. West from Bayfield Street to the Alley on June 24th for Dandelion Days – Ava Kay, Petitioner – No discussion.

A motion was made by Novachek to approve the identified Special Event Requests for the North Coast Car Show on July 29<sup>th</sup>, the Brownstone Block Party on July 28<sup>th</sup>-30<sup>th</sup>, Washburn Farmers Market on Wednesdays June 14<sup>th</sup> to October 18<sup>th</sup>, and Dandelion Days on June 24<sup>th</sup>, second by Neimes. Motion carried unanimously.

Adjourn – Mayor Motiff adjourned the meeting at 8:55PM.

Tony Janisch Assistant City Administrator

#### FINANCE COMMITTEE MEETING 4:00pm

Committee Members Karen Spears-Novachek & Laura Tulowitzky reviewed monthly expenditure vouchers.

#### April 18, 2023 CITY OF WASHBURN RE-ORGANIZATIONAL

**COMMON COUNCIL MEETING** 

5:30PM Washburn City Hall & Remote Video Conferencing

City Council Members:

Present, in-person: Tom Neimes, Jennifer Maziasz, Jared Trimbo

Present, remote: John Hopkins

Municipal Personnel:

Present, in-person: Mayor Mary D. Motiff, City Administrator Scott J. Kluver,

Asst. City Administrator Tony Janisch

Present, remote: none

Absent: Mary McGrath, Tracey Snyder, Dave Anderson

**Call to Order** - Meeting called to order at 5:30pm by Mayor Motiff. Roll call attendance depicted four (4) of seven (7) members of the Common Council in attendance. Quorum of the Council recognized.

**Mayoral Announcements and Proclamations** – The Mayor mentioned the unfortunate passing of Fire Chief Mike Pedersen last Friday, and that the service will occur at the Fire Hall this coming Saturday with a visitation at 1:00pm and funeral following at 2:00pm. The Mayor then called for a Moment of Silence in his memory.

The Mayor next gave a shout-out to Joel & Ross at the Wastewater Treatment Plant for keeping on top of the heavy snow melt situation and to everyone that was conserving water to help out with the issue. The Mayor then made the proclamation for No-Mow May, to encourage property owners to provide early season foraging resources for pollinators. The Mayor concluded with the opportunity for council members to attend the Local Government 101 Workshop sponsored by the League of Wisconsin Municipalities, either in-person or online.

**Election of Council President** – Trimbo nominated Jen Maziasz for Council President. Neimes nominated himself for Council President. The Mayor questioned if she could break a tie vote for Council President, should one occur. <u>Maziasz moved to postpone the vote for Council President until the May Council meeting, second by Neimes. Motion carried unanimously</u>.

**Election of Plan Commission Member (2/3 Vote Required)** – Maziasz nominated Dave Anderson to continue serving on the Plan Commission. Kluver stated that because of the required 2/3 vote, at least five (5) council members needed to be present for the vote to occur. <u>Maziasz moved to postpone the vote for Plan Commission until the May Council meeting, second by Trimbo. Motion carried unanimously.</u>

Confirmation of Council Member Appointments to Boards, Commissions, Committees - Mayor is asking for the following City Council appointments: Mary McGrath, Tracey Snyder, and Tom Neimes to Personnel/Finance, John Hopkins to Library Board, Tom Neimes to BART Board, Jared Trimbo to Harbor Commission, and Jennifer Maziasz to Parks Committee. Moved by Neimes to confirm the Mayoral appointments of Council members to the various boards, commissions, and committees, second by Trimbo. Motion carried unanimously.

Confirmation of Citizen Appointments to Boards, Commissions, Committees - The Mayor nominated the following Citizens for appointments: Caroline Nelson & Candace Kolenda to Harbor Commission; Felix Kalinowski to Plan Commission; Linda Barnes, Sherry Mager & Karen Novachek as chair to Zoning Board of Appeals; Erika Lang & Susan Hall to Parks Committee; Tony Janisch as alternate to Wis. Lake Superior Byway Council; and Diane Posner & Margo Smith to Library Board. Moved by Maziasz to approve all citizen appointments, second by Neimes. Motion carried unanimously.

**Appointment of Weed Commissioner** – The Mayor requested that Gerry Schuette be appointed as Weed Commissioner. <u>Moved by Maziasz to appoint Director of Public Works Gerry Schuette as the Weed Commissioner, second by Neimes. <u>Motion carried unanimously.</u></u>

**Designation of Public Depository (s)** – A motion was made by Maziasz to approve all listed below as the public depository(s), second by Neimes. Motion carried unanimously.

- o Bremer Bank
- o Chippewa Valley Bank
- Northern State Bank

**Designation of Official Newspaper-** A motion was made by Neimes to designate the Ashland Daily Press as the official paper, second by Maziasz. Motion carried unanimously.

**Discussion of Orientation and Other Training for Council Members** – City Administrator Kluver stated that an orientation and training is typically offered and scheduled for new council members, and that he will coordinate with the city attorney to provide anything that is needed. Hopkins asked about the Local Government 101 workshop. Maziasz answered that it was a very informative workshop and well worth the time.

**Adjourn** – Mayor Motiff adjourned the meeting at 5:55 pm.

Tony Janisch Assistant City Administrator 

#### **National Skilled Nursing Care Week 2023 Proclamation**

To designate the Week of May 14-20, 2023, as Skilled Nursing Care Week

WHEREAS, the citizens of Washburn and area communities who now reside in nursing homes and assisted living facilities have contributed immeasurably to the heritage, growth and success of our community; and

WHEREAS, staff at our nursing care centers work tirelessly doing the important work of caring for our loved ones every day; and

WHEREAS, nursing homes across the nation are holding events in observance of National Skilled Nursing Care Week, guided by this year's theme of "Cultivating Kindness," that will honor the collaborative commitment of skilled nursing care facilities and their staff in providing compassionate care to their residents, and

WHEREAS, National Skilled Nursing Care Week takes place May 14-20, 2023; now

THEREFORE, I, Mary D. Motiff, Mayor of the City of Washburn, in recognition of this event do hereby proclaim the week of May 14-20, 2023, as

#### SKILLED NURSING CARE WEEK in WASHBURN

And encourage all citizens to recognize and support Washburn's nursing home and assisted living staff in whatever way they can.

Mary	D.	Motiff,	Mayor	

#### **National Police Week 2023 Proclamation**

To designate the Week of May 14-20, 2023, as National Police Week

WHEREAS, The Congress and President of the United States have designated May 15<sup>th</sup> as Peace Officers' Memorial Day, and the week in which May 15<sup>th</sup> falls dedicated as "National Police Week" and

WHEREAS, the Members of the Law Enforcement Agency of the City of Washburn play an essential role in safeguarding the rights and freedoms of the City of Washburn; and

WHEREAS, it is important that all citizens know and understand the duties, responsibilities, hazards, and sacrifices of their law Enforcement Agency, and that members of our Law Enforcement Agency recognize their duty to serve the people by safeguarding life and property, by protecting them against violence and disorder, and by protecting the innocent against deception and the weak against oppression; and

WHEREAS, the officers of the Police Department of the City of Washburn unceasingly provide this vital public service; and

WHEREAS, it is appropriate to recognize the importance of this vital public service; then

THEREFORE, I, Mary D. Motiff, Mayor of the City of Washburn, in recognition of this event, declare the week of May 14<sup>th</sup> – May 20<sup>th</sup>, 2023, as Police Week. I further call upon all citizens of the City of Washburn to observe Monday, May 15, 2023, as Peace Officers Memorial Day in honor of those Law Enforcement Officers who, through their courageous deeds, have made the ultimate sacrifice in service to their community or have become disabled in the performance of duty, and let us recognize and pay respect to the survivors of our fallen heroes.

	-		
Mary	n	Motitt	Mayor

#### **EMS Week Proclamation**

To designate the Week of May 21-27, 2023, as Emergency Medical Services Week

WHEREAS, emergency medical services are a vital public service; and

WHEREAS, the members of emergency medical services teams are ready to provide lifesaving care to those in need 24 hours a day, seven days a week; and

WHEREAS, access to quality emergency care dramatically improves the survival and recovery rate of those who experience sudden illness or injury; and

WHEREAS, the emergency medical services system consists of emergency physicians, emergency nurses, emergency medical technicians, paramedics, firefighters, educators, administrators and others; and

WHEREAS, the members of emergency medical services teams, whether career or volunteer, engage in thousands of hours of specialized training and continuing education to enhance their lifesaving skills; and

WHEREAS, it is appropriate to recognize the value and the accomplishments of emergency medical services providers by designating Emergency Medical Services Week; now

THEREFORE, I, Mary D. Motiff, Mayor of the City of Washburn, in recognition of this event do hereby proclaim the week of May 21-27, 2023, as

#### **EMERGENCY MEDICAL SERVICES WEEK**

And encourage all citizens to recognize and support the work of our EMS providers in whatever way possible.

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Mary	D.	Motiff,	Mayor	

#### **Historic Preservation Month Proclamation**

To designate May 2023, as Historic Preservation Month

WHEREAS, the National Trust for Historic Preservation established May as Historic Preservation Month in 1973, as a way to promote historic places for the purpose of instilling national and community pride, promoting heritage tourism, and showing the social and economic benefits of historic preservation; and

WHEREAS, the Wisconsin Historical Society recognizes May as Historic Preservation Month and sponsors annual events around the state of Wisconsin to instill awareness and promote the historic assets in Wisconsin; and

WHEREAS, the mission of the Washburn Heritage Association is to enrich the experience of living in our community by telling our compelling stories and preserving the historic buildings and culture of the Washburn area; and

WHEREAS, the Washburn Heritage Association, in partnership with the Bayfield County Courthouse, has planned a variety of activities for all ages for the month of May; and

WHEREAS, celebrating the role of history in our lives and the contributions of individuals and groups working to preserve tangible aspects of Washburn's heritage has helped to shape us individually and our communities; now

THEREFORE, I, Mary D. Motiff, Mayor of the City of Washburn, do hereby proclaim May 2023 as Preservation Month in Washburn and call upon the people of Washburn to participate in the month-long activities, observe our community's numerous historic structures, and celebrate the role history plays in our lives.



Whereas, In 1872 J. Sterling Morton proposed to the Nebraska Board of Agriculture that a special day be set aside for the planting of trees, and

Whereas, this holiday, called Arbor Day, was first observed with the planting of more than a million trees in Nebraska, and

Whereas, 2023 is the 151<sup>st</sup> anniversary of the holiday and Arbor Day is now observed throughout the nation and the world, and

Whereas, trees can reduce the erosion of our precious topsoil by wind and water, cut heating and cooling costs, moderate the temperature, clean the air, produce life-giving oxygen, and provide habitat for wildlife, and

Whereas, trees are a renewable resource giving us paper, wood for our homes, fuel for our fires, healthy perennial foods while beautifying our community, and

Whereas, trees, wherever they are planted, are a source of joy and spiritual renewal.

Now, Therefore, I, Mary D. Motiff. Mayor of the

City of Washburn, do hereby proclaim

Tuesday, May 16, 2023 as the 151th anniversary celebration of



in the City of Washburn, and I urge all citizens to celebrate Arbor Day and to support efforts to carefully manage our forest resources, and *Further*, I urge all citizens to plant trees to promote the well-being of this and future generations.

Dated this 8<sup>th</sup> day of May, 2023

Mary D. Motiff MAYOR

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CITY OF WASHBURN 119 Washington Avenue P.O. Box 638 Washburn, WI 54891



715-373-6160 715-373-6161 FAX 715-373-6148

To: Honorable Mayor and City Council Members

From: Scott J. Kluver, Administrator

Re: Disaster Proclamation Ratification

Date: April 21, 2023

The Mayor's Disaster Proclamation is enclosed along with a resolution to ratify it. The purpose of this is to make the City eligible for potential funding, specifically to address the Bigelow Street culvert, road, and guardrail which was damaged by the high waters. Specifically, we are looking to apply to the DOT Road Disaster Fund for a long-term repair to this area.

#### CITY OF WASHBURN COMMON COUNCIL RESOLUTION #23-10 RATIFYING MAYOR'S EMERGENCY DECLARATION

The Common Council of the City of Washburn, Bayfield County, Wisconsin, by this resolution, adopted by a majority of the Common Council with a quorum present and voting and proper notice having been given, resolves and orders as follows:

WHEREAS, the Section 323.14(4)(b) of Wisconsin Statutes provides that the local governing body shall ratify, modify, or repeal a Disaster Proclamation as soon as they are able to meet, and

WHEREAS, on April 20, 2023 Mayor Motiff proclaimed that a disaster exists in the City of Washburn due to the rapid snow melt and rain that occurred from the period of April 10<sup>th</sup> through April 20<sup>th</sup> 2023, and

WHEREAS, the rapid snow melt and rain has caused high water along Thompson's creek causing road and culvert damage, culvert damage and washouts at other locations in the city, and high flows to the wastewater treatment plant causing an overflow, and

NOW, THEREFORE BE IT RESOLVED, that the Common Council ratifies and declares that a local emergency existed in the City of Washburn during the period of April 10<sup>th</sup>, 2023 through April 21, 2023 and that damage to City infrastructure occurred during this period.

IT IS FURTHER RESOLVED that the Mayor and City Administrator are authorized to take necessary steps to mitigate and repair damage caused by the emergency.

	Attest:	
Mary D. Motiff	Scott J. Kluver	
Mayor	City Clerk	
Adopted:		

#### City of Washburn Municipal Disaster Proclamation

WHEREAS, a disaster, namely rapid snow melt and heavy rains from April 10 through April 20, 2022 causing high water and flooding has struck the City of Washburn; and

WHEREAS, because of such emergency conditions, the Common Council is unable to meet with promptness,

NOW THEREFORE BE IT RESOLVED, pursuant to Wisconsin State Statute 166.23, as Chief Elected Official of the City of Washburn, I do hereby proclaim a state of emergency in effect until further notice.

IN TESTIMONY WHEREOF I have hereunto set my have caused the great seal of the City of Washburn to be affixed.

Done at the City Hall this 20th Day of April, 2023

Mary D. Motiff

Mayor

Attest Scott J. Kluver, City Clerk

The City does have on hand, and fully intends to contribute 30% cost match as their share of the total storm related damage.

Mary D. Motiff

Mayor

## 

CITY OF WASHBURN 119 Washington Avenue P.O. Box 638 Washburn, WI 54891



715-373-6160 715-373-6161 FAX 715-373-6148

To: Honorable Mayor and City Council Members

From: Scott J. Kluver, Administrator

Re: Proposed Certified Survey Map of Lot 52

Date: July 21, 2021

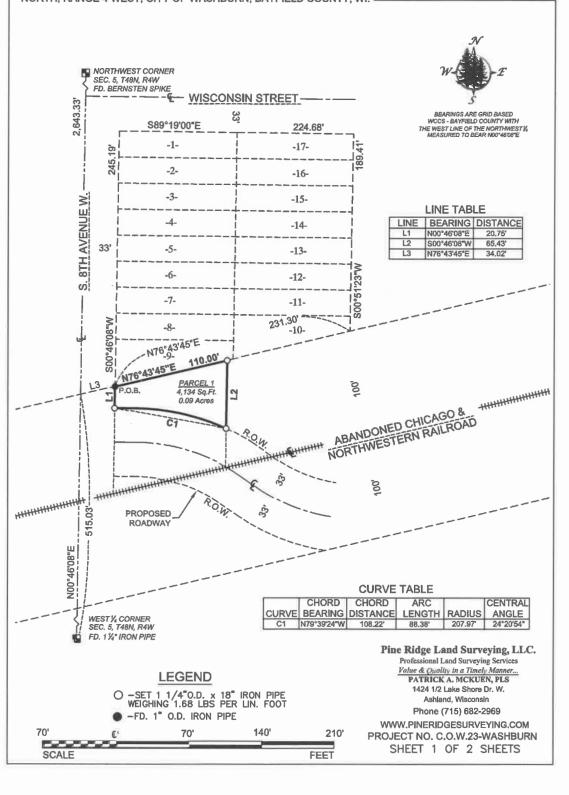
Enclosed you will find a copy of a draft certified survey map that divides Lot 52. A portion of this lot is being used for the re-route of Holman Lakeview Drive. Based on previous Council action, the remainder of the lot is intended to be transferred to the neighboring property owner, Megan Collins, as the road is now going to be a lot closer to her home, the existing structure is not conforming to the setback, and the City is not going to want to maintain responsibility for this "leftover" parcel.

This parcel is non-conforming as it is too small to be built upon and does not meet street width requirements, but as I stated it is intended to be transferred and combined with the neighboring property. A CSM is still required to get the proper legal description to do so. The zoning for the lot is Lakefront Corridor, but the intention is that it will eventually be joined with the R-6 property. The zoning can remain as it would continue to be green space.

If the Council approves this CSM, we would be able to present the formal transfer request at a subsequent meeting. Please let me know if you have any questions on this matter.

### BAYFIELD COUNTY CERTIFIED SURVEY MAP NO.

A PARCEL OF LAND LOCATED WITHIN THE ABANDONED RAILROAD RIGHT OF WAY, LOCATED ADJACENT TO LOT 9, BLOCK 3 OF THE ORIGINAL TOWNSITE OF WASHBURN, SECTION 5, TOWNSHIP 48 NORTH, RANGE 4 WEST, CITY OF WASHBURN, BAYFIELD COUNTY, WI.



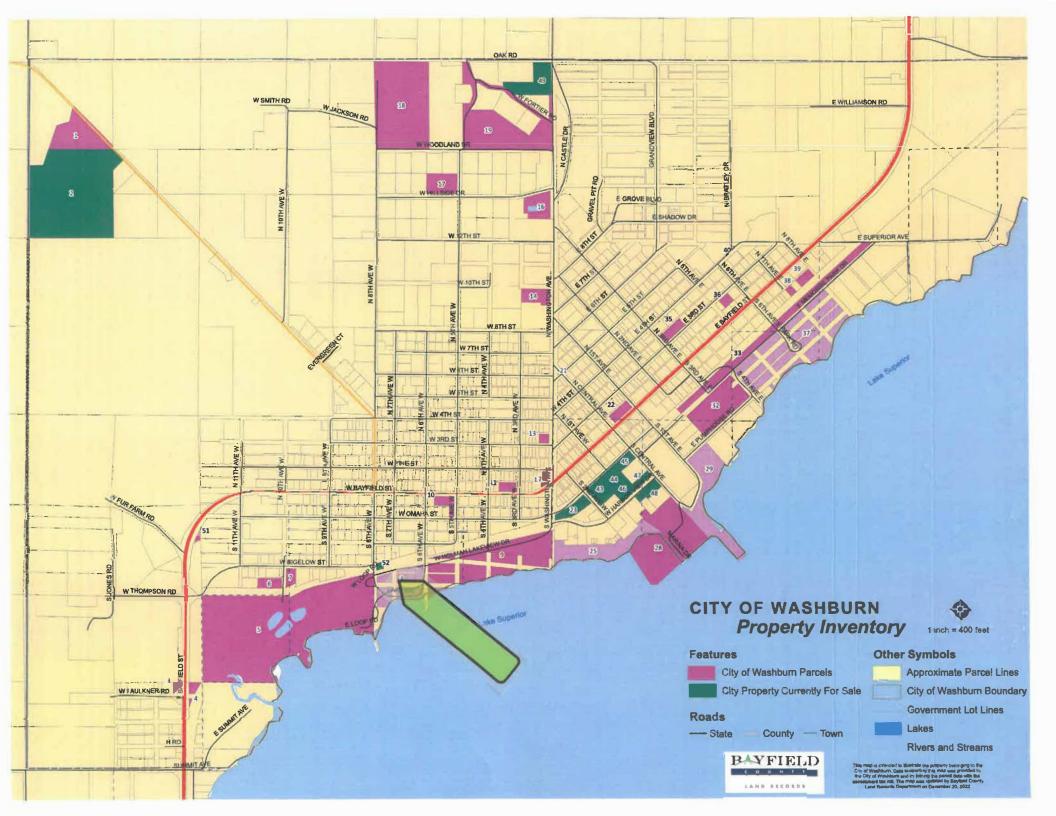
### BAYFIELD COUNTY CERTIFIED SURVEY MAP NO.

A PARCEL OF LAND LOCATED WITHIN THE ABANDONED RAILROAD RIGHT OF WAY, LOCATED ADJACENT TO LOT 9, BLOCK 3 OF THE ORIGINAL TOWNSITE OF WASHBURN, SECTION 5, TOWNSHIP 48 NORTH, RANGE 4 WEST, CITY OF WASHBURN, BAYFIELD COUNTY, WI.

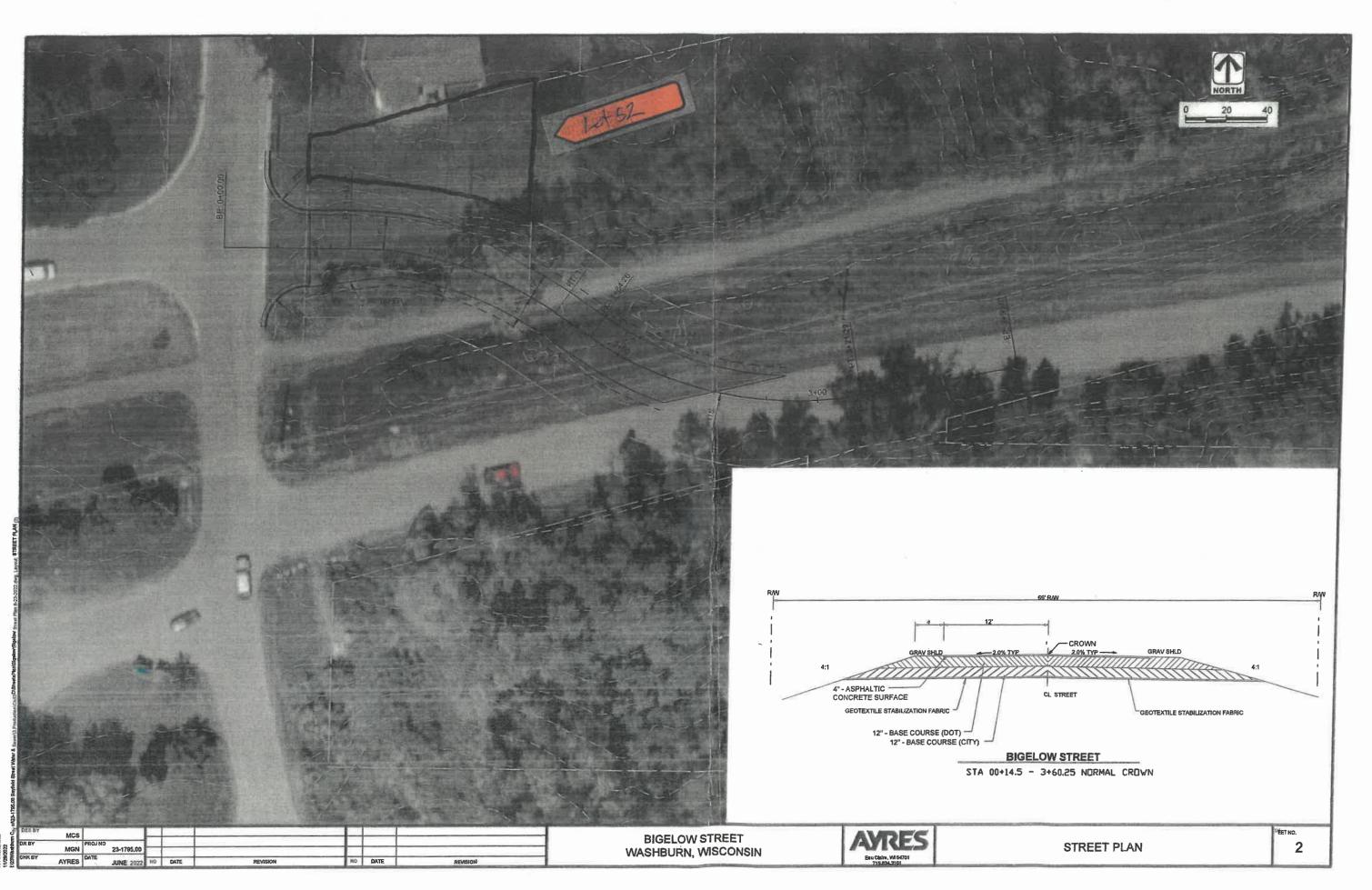
Surveyor's Certificate

I, Patrick A. McKuen, Professional Land Surveyor S-2992, hereby certify that I have surveyed, divided and mapped; A parcel of land located within the abandoned railroad right of way, located adjacent to Lot 9, Block 3 of the Original Townsite of Washburn, Section 5, Township 48 North, Range 4 West, City of Washburn, Bayfield County, WI more particularly described as follows: Commencing at the West ¼ Corner of said section; Thence N00°46'08"E along the west line of the NW ¼ of said section a distance of 515.03 feet to the Intersection with the northerly right of way of the abandoned Chicago & Northwestern Railroad; Thence N76°43'45"E along said right of way a distance of 34.02 feet to the intersection of the east right of way of S. 8th Ave. W. which is the Point of Beginning; Thence N76"43'45"E and continuing along said northerly right of way a distance of 110.00 feet; Thence S00°46'08"W a distance of 65.43 feet to the northerly right of way of a proposed roadway. Thence continuing along said northerly right of way of the proposed roadway 88.38 feet along a curve to the left, said curve having a radius of 207.97 feet, a central angle of 24°20'54" and a chord which bears N79°39'24"W a distance of 108.22 feet to the intersection with the east right of way of S. 8th Ave. W.; Thence N00°46'08"E along said east right of way a distance of 20.75 feet to the intersection with the northerly right of way of the abandoned Chicago & Northwestern railroad which is the Point of Beginning. That the above described parcel of land contains 4,134 square feet or 0.09 acres. That I have made this map at the direction of Scott Kluver, Agent for sald lands. That said parcel is subject to any easements, restrictions and right-of-ways of record. That I have fully complied with the provisions of Section 236.34 of Wisconsin Statutes and with the subdivision regulations of the City of Washburn in surveying, dividing and mapping said parcel. That this map correctly and accurately depicts the exterior boundaries of said parcel and the division thereof made. dated this \_\_ day of\_\_\_ Pine Ridge Land Surveying Patrick A. McKuen WI PLS S-2992 CITY OF WASHBURN ZONING APPROVAL CERTIFICATE I, SCOTT KLUVER, CITY OF WASHBURN ZONING DIRECTOR, DO HEREBY APPROVE THIS BAYFIELD COUNTY CERTIFIED SURVEY MAP SIGNED: \_\_\_ Pine Ridge Land Surveying, LLC. SCOTT KLUVER Professional Land Surveying Services Value & O. alin in a Timel Manner...
PATRICK A. MCKUEN, PLS 1424 1/2 Lake Shore Dr. W. DATED THIS \_\_\_\_\_\_, 2023. Ashland, Wisconsin Phone (715) 682-2969

> WWW.PINERIDGESURVEYING.COM PROJECT NO. C.O.W.23-WASHBURN SHEET 2 OF 2 SHEETS







AA-Standard oth

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CITY OF WASHBURN 119 Washington Avenue P.O. Box 638 Washburn, WI 54891



715-373-6160 715-373-6161 FAX 715-373-6148

To: Honorable Mayor and City Council Members

From: Scott J. Kluver, Administrator

Re: Termination of TID #2

Date: April 18, 2023

Enclosed you will find a resolution to terminate Tax Increment District #2. I recommend approving this resolution to stay in good graces with the state. TID #2 has come to the legal end of its life. Do know however that because of the timelines of the state tax process, TID #2 will generate revenue for the next fiscal year. It is this revenue that will be used for an affordable housing project, and the Council has dedicated those dollars to the Cinnaire housing project proposal assuming it goes through.

Tax Increment Financing is the process where a dedicated area is approved for development, redevelopment, or remediation and an initial investment is made for a project that would not otherwise happen. That investment is then repaid by the increased property taxes that result from the improvements made to the property. If any Council member would like a more detailed explanation on TIF/TIDs, please let me know and I will prepare some materials.

TID #3 is still in existence and has about another 12 years of life. The expiration of TID #2 will allow a little more room to create a new TID if needed in the future.

Please let me know if you have any questions on this matter.

#### **Tax Incremental District (TID) Termination Resolution**

City of	Washburn	TID	2	Resolution	2023- 009
(town, village, city)	(municipali ty)		(number)		(number)
WHEREAS, the City a project plan in the same year	of Washburn ar, and	create	d TID 2	on <u>09</u>	25 , 1995 , and adopted (year)
WHEREAS, all TID 2 pro	ojects were complet	ed in the pres	scribed allo	wed time; and	d:
WHEREAS, sufficient incr project costs.	ement was collected	d as of the 20	022 tax roll	, payable 20	23, to cover TID2_
☐ WHEREAS, insufficient in	crement was collect	ted to cover p	roject costs	S.	
THEREFORE BE IT RESOLV	ED, that the City	<b>o</b> f	Washburn	termina	ates TID <u>2</u> ; and
BE IT FURTHER RESOLVED within sixty (60) days of this rehas been terminated; and		_	-		epartment of Revenue (DOR), hever comes first, that the TID
BE IT FURTHER RESOLVED Date form (PE-223) agreeing and:		_		•	Final Accounting Submission counting information to DOR;
BE IT FURTHER RESOLVE providing for ongoing expendetermined in the final audit	enses of the TID, to		axing distri	cts with prope Eagle Audit	& Accounting LLC
	IED About Abo City		\A/aabb	·	nuditor name)
BE IT FURTHER RESOLV	W-1	of	Washbu auditor,		I accept all remaining debts for
TID 2 as determined	in the imal addit by	trie City	auditor,		(auditor name)
Adopted this 8 day of	May , 2	023 <del>year) -</del>			
Resolution introduced and ad	option moved by ald	derperson			(name)
Motion for adoption seconded	l by alderperson			(name)	
On roll call motion passed by	a vote ofay	es to	nays	(name)	
			ATTEST:		
(Mayor/Head of Government Signatu	ıre)		(Clerk Signatu	ire)	

PE-613 (R. 11-21) Wisconsin Department of Revenue



#### State of Wisconsin • DEPARTMENT OF REVENUE

DIVISION OF STATE AND LOCAL FINANCE . OFFICE OF TECHNICAL & ASSESSMENT SERVICES . MADISON, W.

Mailing Address 2135 Rimrock Road PO Box 8971 • MS 6-97 Madison, WI 53708-8971 Phone: (608) 266-7750 tif@wisconsin.gov

March 20, 2023

04-291

Scott J Kluver Municipal Clerk PO Box 638 Washburn, WI 54891-0638

RE: Maximum Life — City of Washburn Tax Incremental District (TID) 002

Dear Scott J Kluver:

The Wisconsin Department of Revenue (DOR) records show your municipality created TID 002 on September 25, 1995 and must terminate this TID by May 9, 2023.

#### To terminate a TID, your municipality must:

- 1. Adopt a termination resolution by May 9, 2023.
- 2. Notify DOR within 60 days of the resolution or by April 15, whichever comes first
- 3. Email the following to tif@wisconsin.gov:
  - · Adopted termination resolution
  - Completed Terminated TID Final Accounting Submission Date Agreement (Form PE-223)

If you have questions, contact us at tif@wisconsin.gov.

Sincerely,

Kristin Filipiak

**Community Services Specialist** 

Kon Flysa

Office of Technical and Assessment Services

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CITY OF WASHBURN 119 Washington Avenue P.O. Box 638 Washburn, WI 54891



715-373-6160 715-373-6161 FAX 715-373-6148

To: Honorable Mayor and City Council Members

From: Scott J. Kluver, Administrator

Re: Road Gravel Bid

Date: April 21, 2023

I am asking the Council to approve the lowest responsible bidder for road gravel for this year for an estimated 2,400 tons. This road gravel is for the approved budget expense for alley/street/park improvements throughout the City. This is a very simple bid process, and the results were opened on April 20<sup>th</sup>. The lowest responsible bidder this year is Bob Olson & Co. at \$18.50 per ton for an estimated total of \$44,400. You will see that the results were very competitive. Please let me know if you have any questions.

#### **BID TABULATION**

Project: Road Gravel 2023

Date of Bid Opening: April 20, 2023 Time of Bid Opening: 2:00 PM

Contractor	Unit Price/Ton	Bid Total	Bid Form
Olson Bros Brule WI	\$19.00	\$45,600	Y
Trusty Trucking, Inc Iron River WI	\$21.75	\$52,200	Y
South Shore Sand & Gravel - Iron River WI	\$18.95	\$45,480	Y
Bob Olson – Washburn WI	\$18.50	\$44,400	Y
	\$	\$	

Attendees at Bid Opening: City Admin Scott Kluver; DPW Director Gerry Schuette

#### BID FORM - ROAD GRAVEL - March 28, 2023

Due: 2:00 PM on April 20, 2023

TO: City of Washburn 119 Washington Ave PO Box 638 Washburn, WI 54891

Bid dated this

**Specifications:** 2,400 Tons of <sup>3</sup>⁄<sub>4</sub> inch Road Base bed material from a hard rock quarry shall be delivered to the City of Washburn at the yard waste site on CTH "C" in the City of Washburn. Deliveries will be accepted Monday through Friday from 7:00 a.m. to 4:00 p.m. after seasonal road weight limits are removed. All deliveries will be completed by September 1, 2023.

	•	on 7.00 a.m. to 4.00 p.m. otember 1, 2023.	i. after seaso	onai ioad weight milits	s are removed.	All deliveries w
Base	Bid					
	Item	Estimated Quantity	Units	<u>Unit Price</u>	Amoun	<u>t</u>
1.	Stone Base	2,400	Ton	\$ /8, 50 Ton	\$44	400,00
	To	$\overline{T}$	- 15	F //		
	roe	TY FOUR THOUS	(Written	Bid Amount)	DEED &	JOHNARS
2. Th	ne undersigne	ed understands and agrees	`	,	s issued for the	is work.
3. Th	ne undersigne	ed acknowledges receipt of	of any adder	nda numbers:		
(	)	BIDDER:	BOB OLS	ON & CO.		
		NAME: ADDRESS:		nger Rd. WL 54891		
(Cor	porate Seal)	BY: Lobert	W DI	on		
		(Authorized Signat				
		(Title)				
			1	<i>3</i> /		

day of April

2023.



CITY OF WASHBURN 119 Washington Avenue P.O. Box 638 Washburn, WI 54891



715-373-6160 715-373-6161 FAX 715-373-6148

To: Honorable Mayor and City Council Members

From: Tony Janisch, Assistant City Administrator

Re: Provisional Retail Alcohol Licensing

Date: April 26, 2023

With the pending sale of the Firehouse Bar, and any establishment for that matter, there is a procedural time lag in the issuance of an alcohol license. Since alcohol licenses for retail sales are specific to locations/premises and issued/granted to a specific licensee. Alcohol licenses are not transferable upon the sale of a premises. The new owner must then also apply for an alcohol beverage retail license.

Wisconsin State Statute 125.185 allows municipal governing bodies to issue provisional retail alcohol licenses, as the licensing process commences, providing the municipality has established an ordinance for such.

The provisional license shall expire 60 days after issuance, with a fee not to exceed \$15 per license, as stipulated by Stats. 125.185.

Attached is an ordinance (23-003) to establish the issuance of Provisional Retail Licenses. It is recommended that the City Clerk's Office approve provisional retail alcohol licenses. Council will retain approval of general alcohol licenses as is the current practice.

Please let me know if you have any questions related to this proposed ordinance.

### CITY OF WASHBURN Ordinance No. 23-003

An ordinance adopted by the Common Council for the City of Washburn at its regular meeting of May 8. 2023, for the purpose of establishing standards for issuing provisional retail alcohol licenses as allowed by Wis. Stats. 125.185.

1. Add Sec. 7-2-4(j), as follows:

### Sec. 7-2-4 Classes of Licenses

- (j) Provisional Retail Licenses. Individuals who apply for the following licenses may be issued a provisional retail license by the Clerk's office: provisional Class "A" fermented malt beverage, "Class A" Cider license, "Class A" intoxicating liquor, Class "B" fermented malt beverage, "Class B" intoxicating liquor license, or "Class C" wine license. A provisional license only authorizes the activities that the type of retail license applied for authorizes. The application will be reviewed and approved by the City Clerk's Office. The fee for a provisional license shall be \$15.00 each with the exception of no fee for a "Class A" Cider license. The provisional license will expire 60 days after its issuance or when the applicant receives a regular license, whichever is first. The Clerk's office may revoke the provisional license if the Clerk discovers the holder made a false statement on the application. The City of Washburn will not issue a provisional license for a "Class B" liquor license if the quota has been met. The City of Washburn will not issue a provisional license for a "Class A" cider license if the applicant does not have a Class "A" fermented malt license for the same location. No person may hold more than one provisional retail license for each type of license applied for by the holder each year.
- 2. <u>Effective Date of Ordinance</u>: This ordinance shall take effect upon passage and publication.

	Attest:	
Mary D. Motiff Mayor	Scott J. Kluver City Clerk	_
Adopted: May 8, 2023	Date of publication:	



CITY OF WASHBURN 119 Washington Avenue P.O. Box 638 Washburn, WI 54891



715-373-6160 715-373-6161 FAX 715-373-6148

To: Honorable Mayor and City Council Members

From: Tony Janisch, Assistant City Administrator

Re: Alcohol Licensing

Date: April 24, 2023

Chequamegon Bait, LLC (Kelsey Lindsey) has applied for an alcohol beverage retail license of Class "B" Fermented Malt Beverage (beer) and "Class B" Intoxicating Liquor to be sold on premise at 10 W. Bayfield St.; currently Firehouse Bar. Ms. Lindsey is in the process of buying the Firehouse from the current owner, Harlan Guske. The closing date for purchase is scheduled before the May 8<sup>th</sup> Council Meeting.

While alcohol licenses are for retail sales at specific locations/premises; they are issued/granted to a specific licensee. As such, alcohol licenses are not transferable upon the sale of a premises. The new owner must also apply for an alcohol beverage retail license.

If Council determines that the application has been filed without any major concern or issue, Council is requested to instruct the city staff to issue public notification and to begin the administrative process.

Following this meeting, if instructed, a public notice of this application will be sent to the Ashland Daily Press and alerts will be issued to any interested parties.

Final approval for these licenses would occur at the June meeting. And if the Issuance of Provisional Alcohol Licenses (Ordinance 23-003) is approved by the Council, then provisional licenses will be issued to Chequamegon Bait LLC after the ordinance takes effect.

### **CITY OF WASHBURN**

# Notice of Application Filed for Alcohol Beverage License 07/01/2023 - 6/30/2024

1. Chequamegon Bait LLC, Kelsey Lindsey agent, dba Chequamegon Bait, Corporation Class "B" Fermented Malt Beverage & "Class B" Intoxicating Liquor, 10 West Bayfield Street.

Tony Janisch Assistant City Administrator Daily Press - legal notice – May 12, 2023; May 16, 2023; and May 19, 2023

<b>Original Alcohol Be</b>	verage Retai	I License A	pplication	Applicant's Wisconsin Seller's Pe	rmit Nymber
(Submit to municipal clerk.)	07/01/202		130/2024	4-6-1051 74-15 FEIN Number	77-04
		ending	, , ,	92.2688841	
For the license period beginning	ng (mm dd yyyy)	TYPE OF LICENSE			
	(		(mm dd yyyy)	REQUESTED	FEE
	☐ Town of )	. م. أما يسرد		☐ Class A beer	\$
To the Governing Body of the: ☐ Village of				Class B beer	\$
	☑ City of			Class C wine	\$
	1			Class A liquor	\$
County of Bautin	01		c Dist. No	Class A liquor (cider only)	\$ N/A
		(if required	d by ordinance)	A Class B liquor	:\$
				Reserve Class B liquor	\$
Check one: Individual	Limited Liability	Company		Class B (wine only) winery	- manufic
☐ Partnership	☐ Corporation/No		tion	Publication fee	S
_ rattlersinp		inprome Organizat		TOTAL FEE	15
Name (individual / partners give last r	name, first, middle; corpor	ations / limited liabilit	y companies give register	ed name)	
Chequeuncego	700	4		•	
L'ACONTECTION OF THE PARTY OF T	VI TOOLT	· · ·			
An "Auxiliary Questionnaire	" Form AT-103 mu	et he complete	d and attached to t	hie application by each indi	vidual applicant
by each member of a partne					
each member/manager and	agent of a limited l	iability compan	v. I ist the full name	and place of residence of ea	inzation, and by
President / Member Last Name				· ·	or porcon.
	(First)	(Middle Name)	Home Address (Street,	City or Post Office, & Zip Code)	141144
Lindsu	Kulsun	Lynn	436 BW	ckland Rd. Was	,nburn
Vice President / Member Last Name	(First)	(Middle Name)	Home Address (Street,	City or Post Office, & Zip Code)	PRINT MANAGEMENT AND ADDRESS OF THE PRINT OF
Indsu	Max	Trumas	Wi. 54		
Secretary / Member Last Name	(First)	(Middle Name)		City or Post Office, & Zip Code)	
		(			
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street.	City or Post Office, & Zip Code)	
		(,		,,,,	1
Agent Last Name	(First)	(Middle Name)	Home Address (Street )	City or Post Office ( Zin Code)	
indala	KILCALA	(Middle Name)	OZL BILL	City or Post Officer & Allip Code )	na.m
Directors / Managers Last Name	(First)	(Middle Name)	1	City or Post Office, & Zip Code)	icoviii
Directors / Wasing 612 Fast 144116	(rwat)	(Misule Name)	none Address (Sueer,	Sity of Post Office, & Zap Code)	
1. Trade Name	WEGGINE	ut W	Business Pho	ne Number <u>715</u> 373 5	5780
2. Address of Premises				Zip Code 54 1	
2. Address of Premises	VV Intelle	11 11	Post Unice &	Zip Code	
3. Premises description: Des	scribe building or bu	ildings where al	cohol beverages are	to be sold and stored. The	
				ervice, consumption, and/or	
	ges and records. (A	Icohol beverages	s may be sold and s	tored only on the premises	
described.)		9. 9.	12. 0		
mi stor	brick 6	MILAINE	, with b	er Garain	
-	)		Ú .		
_					
4. Legal description (omit if s	treet address is give	n above):			
5. (a) Was this premises lice	nsed for the sale of	iquor or beer du	ring the past license	year?	K Yes □ No
		Fivales	Mr. Ran		1
(b) If yes, under what nam	e was license issued	d? 1176 VIO	VICE DUV		

Is individual, partners or agent of corporation/limited liability company subject to completion of the respons beverage server training course for this license period? If yes, explain	ible · · · Yes	□ No
Is the applicant an employe or agent of, or acting on behalf of anyone except the named applicant?  If yes, explain.	Yes	ј∕Д №
Does any other alcohol beverage retail licensee or wholesale permittee have any interest in or control of business? If yes, explain	this Yes	∭A No
(a) Corporate/limited liability company applicants only: Insert state and date 3 /2 of registration.	123	
		⊠ No
	nsin?   Yes	No
Does the applicant understand they must register as a Retail Beverage Alcohol Dealer with the federal government, Alcohol and Tobacco Tax and Trade Bureau (TTB) by filing (TTB form 5630.5d) before beginniousiness? [phone 1-877-882-3277]	ng · · Yes	□ No
Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776]	Yes	□ No
Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesaler breweries and brewpubs?	s, Yes	□ No
pest of the knowledge of the signer. Any person who knowingly provides materially false information on this application may be \$1,000. Signer agrees to operate this business according to law and that the rights and responsibilities conferred by the licengued to another. (Individual applicants, or one member of a partnership applicant must sign; one corporate officer, one member/	required to forfeit se(s), if granted, v manager of Limite	not more will not be d Liability
act Person's Name (Last, First, M.I.)  Title/Member  Date  VP dunt	23	
Phone Number 970 250 4319 CMg	bartegn	riful con
BE COMPLETED BY CLERK		
received and filled with municipal clerk   Date reported to council / board   Date provisional license issued   Signature of Clerk / Deputy Clerk   1/20/23		
Cens egrap ed Date license (ssued License number issued		
	beverage server training course for this license period? If yes, explain  Is the applicant an employe or agent of, or acting on behalf of anyone except the named applicant? If yes, explain.  Does any other alcohol beverage retail licensee or wholesale permittee have any interest in or control of business? If yes, explain  (a) Corporate/limited liability company applicants only: Insert state  and date 3 2 3 3 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	Yes   Yes

### Schedule for Appointment of Agent by Corporation / Nonprofit Organization or Limited Liability Company

Submit to municipal clerk.

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent. The following questions must be answered by the agent. The appointment must be signed by an officer of the corporation/organization or one member/manager of a limited liability company and the recommendation made by the proper local official.

		· Town	4		÷
To the go	verning body of		of Washburn	County	of Kalield
The under	rsigned duly au	City thorized officer/n	nember/manager of Lhd	Registered Name of Corporation	MIT (Company)
a corporat	ion/organization	or limited liabilit			license for a premises known as
	47.5			_	
located at	10 W	Par l'ela	Tait (Trade Name)	"in WI 54	4
appoints	til	sus li	ndicus		
	936 E	3nek an	(Name of Appointe (Home Address of App	d Agent)  NN WI 540  pinted Agent)	9
to alcohol	beverages con-	ducted therein. Is	ed liability company with full a	authority and control of the ting in that capacity or re	e premises and of all business relative questing approval for any corporation/ ner location in Wisconsin?
Yes	No if	so, indicate the	corporate name(s)/limited liab	ility company(ies) and mu	nicipality(ies).
ls applican	t agent subject	to completion of	the responsible beverage ser	ver training course?	Yes No
How long i	mmediately pric	or to making this a	application has the applicant	agent resided continuously	y in Wisconsin?
Place of re	esidence last ye	ar _43 E	Buckland Fil.	lushbum u	1 54891
	F	or: C	Name of Corporate	rit LLC	
	6	By: Little	(Name of Corporati	on / Organization / Limited Liabi	iity Company)
			C C C Caland	ire of Officer / Member / Manage	er)
Any persor \$1,000.	n who knowingly	provides materia	ally false information in an ap	plication for a license may	be required to forfeit not more than
L	1, 1	. ,	ACCEPTANCE B	AGENT	
1, <u>K</u>	elsun L	indsul (Print/Type	Agent's Name)	, hereby ac	cept this appointment as agent for the
			mpany and assume full res the corporation/organization/		ct of all business relative to alcohol
Litu	de Th	ullan		4 11:2023	Agent's age
936 P	ruck a	Signature of Agent) (Home	Ushburn WI Se Address of Agent)	(Date)	Date of birth
			PROVAL OF AGENT BY MU lerk cannot sign on behalf		
			pal and state criminal records tisfactory and I have no obje		ledge, with the available information, ted.
Approved o	on	by		Title	e
	(Date)		(Signature of Proper Local		(Town Chair, Village President, Police Chief)

## Auxiliary Questionnaire Alcohol Beverage License Application

Submit to municipal clerk.

Ī	ndividual's Full Name (please print) (last name)	(first no	ame)	(middle n	name)	
	Home Address (street/route)  G36 Buckleud Rd.	Post Office	Washburr	State W)	Zip Code 54801	1
	970 USD 4319	Age 34	- 07 04 198	Place of E Anc	birth Lora	A
<u>ד</u>	he above named individual provides the foll  Applying for an alcohol beverage license  A member of a partnership which is ma  Officer   liector / Member / Manager / Agent  which is making application for an alcohol	e as an <b>individual</b> . king application for an alo	•	1 + WC y Company or Nonprofi	it Organizətian)	
1.	he above named individual provides the follow long have you continuously resided in Have you ever been convicted of any offer violation of any federal laws, any Wiscons or municipality?  If yes, give law or ordinance violated, trial status of charges pending. (If more room is	in Wisconsin prior to this nses (other than traffic unin laws, any laws of any control to the court, trial date and pena	date? (01 / r S  prelated to alcohol beverage other states or ordinances alty imposed, and/or date, or	of any county	Yes	≥ No
	Are charges for any offenses presently performed for violation of any federal laws, any Wiscomunicipality?	onsin laws, any laws of o	ther states or ordinances o	f any county or		∑√ No
7.	organization or member/manager/agent or beverage license or permit?	f a limited liability compar	ny holding or applying for a	ny other alcohol	. Yes	⊠ No
5.	Do you hold and/or are you an officer, dire member/manager/agent of a limited liabilit brewery/winery permit or wholesale liquor, If yes, identify.	y company holding or app	plying for a wholesale beer	permit,		Ø No
6	(Name of Wholesa Named individual must list in chronologica	le Licensee or Permittee)		(Address By City and C	County)	
Ο.	Employer's Name  Sufficiently Control	yer's Address	Empoye 6120 Employe Minul W16.2	021	Presur 6/1021	4

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

(Signature of Named Individual)

## Auxiliary Questionnaire Alcohol Beverage License Application

Submit to municipal clerk.

1	ndividual's Full Name (please print) (last name)	(first nar	ne)	(middle name)			
	Lindse	Max	7	homas			
1	136 Buck and Ril	Post Office	Washlern	State Zip Code S489/			
H	ome Phone Number	Age	Date of Birth	Place of Birth			
1	113-209-2554	34	08/14/1988	Washburn			
T	ne above named Individual provides the fo	ollowing information as a per	rson who is (check one):				
Γ	Applying for an alcohol beverage licens	se as an individual.					
	A member of a partnership which is m		phol beverage license.	LC any or Nonprofit Organizat Ion)			
	which is making application for an alco	hol beverage license.	•				
1.	ne above named Individual provides the form	in Wisconsin prior to this d	ate? 5/2	years			
2.	Have you ever been convicted of any of violation of any federal laws, any Wiscon or municipality?	nsin laws, any laws of any of	ther states or ordinances of any ty imposed, and/or date, descri	county Yes	No		
3.	Are charges for any offenses presently provided for violation of any federal laws, any Wismunicipality?	consin laws, any laws of oth	ner states or ordinances of any	county or	No		
4.	Do you hold, are you making application for or are you an officer, director or agent of a corporation/nonprofit organization or member/manager/agent of a limited (lability company holding or applying for any other alcohol beverage license or permit?						
_	De you hald and/or one you an affice di		n e rd Type of License/Permit)	annilan av			
5.	Do you hold and/or are you an officer, di member/manager/agent of a limited liab brewery/winery permit or wholesale ilque if yes, identify.	ilty company holding or appi r, manufacturer or rectifler p	lying for a wholesale beer perm	nit,	// No		
_		sale Licensee or Permittee)		s By City and County)			
6.	Named Individual must list in chronologic	cal order last two employers. ployer's Address	. Employed From	To	_		
	Anich Wichman + Linke, S.C. Z Employer & Name	20 Sth Ave WA	Slaw WIS48 09/2 Employed From	10/7 Present			
	Whitema Osterman Hanna On	· Compresce Plaza Albi	any NY 12260 04/20	19 01/2011			
			f .	1			

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to force not more than \$1,000.

( gnature of Name Individual)



1.5

CITY OF WASHBURN 119 Washington Avenue P.O. Box 638 Washburn, WI 54891



715-373-6160 715-373-6161 FAX 715-373-6148

To:

Honorable Mayor and City Council Members

From:

Tony Janisch, Assistant City Administrator

Re:

Alcohol Licensing Renewal Process

Date:

April 21, 2023

Included with this memo are the Alcohol License renewal applications for businesses within the City. At the May Council Meeting, these applications are first introduced to Council. If Council determines that all applications have been filed without any major concern or issue, Council is requested to instruct city staff to issue public notification and begin the administrative process.

Following this meeting, public notice of applications will be sent to the Ashland Daily Press and alerts will be issued to any interested parties. A copy of this notice is also included in the packet.

During the month of May and early June, the administrative review process will begin. Staff will investigate any delinquent obligations due to the City and the Police Department will inspect the premises of all applicants to ensure compliance with Ordinance 7-2-8.

Council will be asked to revisit these applications at the June Council Meeting, where it will have the opportunity to grant, deny, or place restrictions on any license renewal. The June Council Meeting Packet will include a detailed report on any alcohol distributor notices, delinquent obligations due the City, and inspection results.

You will notice that the renewal list includes Firehouse Bar, owner Dauson INC (Harlan Guske). The Firehouse is in the process of being sold, but at the time of this memo, ownership was still retained by Guske. However, the closing is scheduled for before the May 8<sup>th</sup> Council Meeting. Mr. Guske wished to remain on the list in case there were complications in the sale. If sale has occurred and Mr. Guske has surrendered his alcohol licenses, then Dauson INC will be removed from the renewal list.

It is my recommendation to approve the renewal list for publication and authorize staff to begin the administrative process.

#### CITY OF WASHBURN

### Notice of Applications Filed for Alcohol Beverage Licenses

#### Renewals 7/1/2023 - 6/30/2024

- 1. StageNorth, LLC, Bob Adams agent, dba Stage Door Bar, Corporation Class "B" Fermented Malt Beverage & "Class B" Intoxicating Liquor, 123 West Omaha Street.
- 2. Dauson, Inc., Harlan Guske agent, dba Firehouse Bar, Corporation Class "B" Fermented Malt Beverage & "Class B" Intoxicating Liquor, 10 West Bayfield Street.
- 3. 211 Martini Bar LLC, Mark Nelson agent, dba 211 Martini, Corporation Class "B" Fermented Malt Beverage & "Class B" Intoxicating Liquor, 211 West Bayfield Street.
- 4. Washburn Development Property LLC, Jeffery Moberg agent, dba The Harbor View, Corporation Class "B" Fermented Malt Beverage & "Class B" Intoxicating Liquor, 128 Harbor View Drive.
- 5. The Snug, LLC, Kristi M. Doman agent, dba The Snug, Corporation Class "B" Fermented Malt Beverage & "Class B" Intoxicating Liquor, 308 West Bayfield Street
- 6. David Nickels, dba A Nickel's Worth Bar-n-Grill, Individual Class "B" Fermented Malt Beverage & "Class B" Intoxicating Liquor, 800 West Bayfield Street.
- 7. Superior Shores Eats Inc, Robert Stadler agent, dba Patsy's Bar & Grill, Corporation Class "B" Fermented Malt Beverage & "Class B" Intoxicating Liquor, 328 West Bayfield Street.
- 8. Karlyn Yellowbird Gallery LLC, Erik Gruber agent, dba Karlyn Yellowbird Gallery, Corporation Class "B" Fermented Malt Beverage, 318 West Bayfield Street.
- 9. Naturally Superior, Inc., Dale A. Brevak agent, dba Lake Superior View Golf, Corporation Class "B" Fermented Malt Beverage, 950 County Hwy C.
- 10. DaLou's Bistro, Inc., Dale Hanson agent, dba DaLou's Bistro, Corporation Class "B" Fermented Malt Beverage & "Class C" Wine, 310 West Bayfield Street.
- 11. Santa Leyenda LLC, Nestor Tapia Estrada agent, dba Santa Leyenda, Corporation Class "B" Fermented Malt Beverage & "Class C" Wine, 901 West Bayfield Street.
- 12. Hansen's IGA Inc. dba as Hansen's IGA Washburn, Kristy Larson agent, Corporation Class "A" Fermented Malt Beverage & "Class A" Intoxicating Liquor, 226 West Bayfield Street.
- 13. Indianhead Oil Co. LLC., Eugene Rich agent, dba Holiday Station store #227, Corporation Class "A" Fermented Malt Beverage, 606 West Bayfield Street.
- 14. Midland Services Inc., Trent Allen agent, Corporation Class "A" Fermented Malt Beverage, 137 West Bayfield Street.

Renewal Alcohol (Submit to municipal clerk.	_	• '	plication	Applicant's Wisconsin Seller's Per 456000 /53/2	mit Number
	1. 1.		1- 1	39-1984532	
For the license period beginn	(mm dd yyyy)	23 ending: O	6/30/2024 (mm dd yyyy)	TYPE OF LICENSE REQUESTED	FEE
	Town of		_	Class A beer	\$
To the Governing Body of the		WASHBUI	RN	X Class B beer	\$
	City of			Class C wine	\$
County of RAUS.C.		A1.1		Class A liquor	¢
County of BAYFIEL	2	- 1	nic Dist. No.	Class A liquor (cider only)	\$ N/A
		(ii require	ed by ordinance)	Class B liquor	g 1977
Check one: Individual	∠ Limited Liabili	ty Company		Reserve Class B liquor	S
Partnership	_	lonprofit Organiza	ation		4.7
raitieisiip	Corporation	onpront Organiza	XLIOI1	Class B (wine only) winery	}
Complete A or B. All must	complete C.			Publication fee TOTAL FEE	\$
-	•			IOIAL FEE	\$
A. Individual or Partnership	- Service - Trick	ALTERNATION .			
Full Name (Last)	(First)	(Middle Name)	Home Address (Street,	City or Post Office, & Zip Code)	
				~	
Full Name (Last)	(First)	(Middle Name)	Home Address (Street,	City or Post Office, & Zip Code)	
Full Name (Last)	(First)	(Middle Name)	Home Address (Street,	City or Post Office, & Zip Code)	
B. LLC or Corporation (and			,		
STAGE NOR		ted Liability Company	Address of Corporation / I	imited Liability Company (if different fro	m licensed premises)
		companies applyin	or for a license to se	Il fermented malt beverages a	nd/or intovicating
liquor must appoint an agent.	or miniou mapiney o	ompanio applyii	.9 .0. 2	in formation man bororages a	Trainer interactions
Agent Last Name	(First)	(Middle Name)	Home Address (Street.	City or Post Office, & Zip Code)	
ADAMS	ROBERT	(,		C RO WASHBURN WI	CUROI
a st. a section of the section of th	Total Transition			and the contract of the contra	270 11
All Officer(s) Director(s) of	The state of the s				
President / Member Last Name	(First)	(Middle Name)		City or Post Office, & Zip Code)	
WEINEL	JOHN		H 721 OSPREY	AUS MATINES MAN .	55033
Vice President / Member Last Name	(First)	(Middle Name)		City or Post Office, & Zip Code)	
WEINEL	ANA		11331 ACOPEN A	VES HATIMES, MAN S	5033
Secretary / Member Last Name	(First)	(Middle Name)		City or Post Office, & Zip Code)	3033
	(,	(			
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street,	City or Post Office, & Zip Code)	
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street,	City or Post Office, & Zip Code)	
AOAMS Directors / Managers Last Name	ROBERT (First)	(Middle Name)		RO WAS ABURY WI S City or Post Office, & Zip Code)	14891
ADAMS	DEBORAH	(modio rearre)		RD WASHBURN, WIL	SU291
C. Business Information	<u> </u>				, , , ,
1. Trade Name BELLTO	WER BAR		Rusiness Dho	ne Number 7/5-373-//	74
2. Address of Premises /2		MA ST			
1				Zip Code WASABARV w .	77071
<ol><li>Does the applicant unders breweries and brewpurbs?</li></ol>	tand that they mus	t purchase alcoho	ol beverages only fro	m Wisconsin wholesalers,	Yes No
4. Premises description: De	escribe building or	buildings where	alcohol beverages a	re to be sold and stored. The	applicant must
include all rooms including	g living quarters, if	used, for the sale	s, service, consump	tion, and/or storage of alcohologd.)  RELL TOWER ZAR	
				STATE OF THE PARTY	
THIO DECK , IN	PATER UP	SIAIRS COBB	Y, KITCHEN	, BASEMENT STI	76E
-	Ř				

5.	. Legal description (omit if street address is give	n on previous page):		
6.	member, officer, director, manager or ager organization licensee been convicted of a for violation of any federal laws, any Wisco	named licensee, any member of a partnership licensee, or any it for either a limited liability company licensee, or nonprofit inny offenses (excluding traffic offenses not related to alcohol) insin laws, any laws of other states, or ordinances of any county	□ Vee	(See Ald
	or municipality? If yes, complete page 3		Yes	X No
		nding (excluding traffic offenses not related to alcohol) against filiated with this license? If yes, explain fully on page 3	☐ Yes	<b>™</b> No
7.		een any changes in the answers to the questions as submitted? If yes, explain	☐ Yes	<b>⊠</b> No
8.		everages for the previous year reported on the Wisconsin Income explain	Yes Yes	□ No
	[phone (608) 266-2776]	a Wisconsin Seller's Permit?	Yes	□No
		inspection by law enforcement?	Yes	☐ No
11.	. Is the applicant indebted to any wholesaler bey	rond 15 days for beer or 30 days for liquor?	☐ Yes	No.
12.		es, assessments, or other fees?ses	☐ Yes	<b>⊠</b> No
bee app and voi this	en truthfully answered to the best of the knowled plication; that the applicant has read and made a d correct. The undersigned further understands id, and under penalty of state law, the applicant i	nalty provided by law, the undersigned states that each of the abo ge of the signer. The signer agrees that he/she is the person name complete answer to each question, and that the answers in each that any license issued contrary to Chapter 125 of the Wisconsin may be prosecuted for submitting false statements and affidavits in s materially false information on this application may be required to	d in the fo instance a Statutes s n connecti	regoing are true shall be ion with
	ontact Person's Name (Last, First, M.I.)	Title / Member  DIRSCTOR  Date  APRIL 1	2.0	9
Sig	ADAMS ROBERT	Phone Number Email Address		_
	Robert Colons	715-373-5763 ROBERT ADA	MS 50 (	2
	BE COMPLETED BY CLERK			
Dat	te received and filed with municipal clerk  Date re	ported to council / board Date license granted		
Lice	ense number issued Date lic	ense issued Signature of Clerk / Deputy Clerk		

Renewal Alcohol	Beverage L	icense Ap <sub>l</sub>	plication	Applicant's Wisconsin Seller's Per	rmit Number
(Submit to municipal clerk. F	Read instructions	on page 3.)		FEIN Number	- o3
For the tiernes and of the signif	1-1-93		1-30-24	FEIN Number 3842	
For the license period beginni				TYPE OF LICENSE REQUESTED	FEE
To the Governing Body of the	☐ Town of )	wank hura	,	☐ Class A beer	\$
To the Governing Body of the	: 🔲 Village of 🔪	00871121. V		Class B beer	\$
	City of      ✓      City of      City of      City of      ✓      City of      City of			Class C wine	S
County of Bayfield			ic Dist. No	☐ Class A liquor	\$
County of			d by ordinance)	Class A liquor (cider only)	\$ N/A
		(	,,	Class B liquor	\$
Check one: Individual	☐ Limited Liabili	ty Company		Reserve Class B liquor	\$
☐ Partnership	▼ Corporation/N	lonprofit Organiza	tion	Class B (wine only) winery	\$
Complete A on B. All months				Publication fee	\$
Complete A or B. All must o	complete C.			TOTAL FEE	\$
A. Individual or Partnership	:				
Full Name (Łast)	(First)	(Middle Name)	Home Address (Street	t, City or Post Office, & Zip Code)	
Full Name (Last)	(First)	(Middle Name)	Home Address (Street	t, City or Post Office, & Zip Code)	
Full Name (Last)	(First)	(Middle Name)	Home Address (Street	t, City or Post Office, & Zip Code)	
B. LLC or Corporation (and	Amenth				
		ad Liability Company	Address of Comomics /	Limited Liability Company (if different fro	m licensed numbers
D I USON IN		ed Liability Company	Address of Corporation /	Circules Craping Company (# different fic	яп псепаец ргеннаса)
All corporations/organizations liquor must appoint an agent.	or limited liability of	companies applying	g for a license to se	ell fermented mait beverages a	ind/or intoxicating
Agent Last Name	(First)	(Middle Name)	Home Address (Street	. City or Post Office, & Zip Code)	
GUSKE	Harlan	James	WACHEUTZ	City or Post Office, & Zip Code)	
All Officer(s) Director(s) of (			-		
President / Member Last Name	(First)	(Middle Name)		, City or Post Office, & Zip Code)	
Guske	Harlan			080x160 54891	
Vice President / Member Last Name	(First)	フなべっとS (Middle Name)		City or Post Office, & Zip Code)	
AND LIOSIDERLY MOUNTED LABITAGING	(Filet)	(widdle Name)	nome Address (Saeet)	, City of Post Office, & Zip Code)	
Secretary / Member Last Name	(First)	(Middle Name)	Home Address (Street	, City or Post Office, & Zip Code)	
Treasurer / Member Last Name	(First)	(Middle Name)	Horne Address (Street,	, City or Post Office, & Zip Code)	
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street,	, City or Post Office, & Zip Code)	
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street,	, City or Post Office, & Zip Code)	
C. Business Information  1. Trade Name Fire No.	ouse Bar		Business Pho	one Number 715-373	5780
2. Address of Premises 10		eld St		Zip Code PO BOX 160 3	
3. Does the applicant unders	tand that they mus	t purchase alcoho	ol beverages only fro	om Wisconsin wholesalers, bre	
and brewpubs?				Yes	⊠ □ No
include all rooms including	living quarters, if	used, for the sale	s, service, consum	are to be sold and stored. The ption, and/or storage of alcoholibed.) $000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < 000 < $	ol beverages and
Buildin	WiTh Be	er Garlen			

5.	Legal description (omit if street address	is given on previous pa	ge):				
6.	a. Since filing of the last application, he member, officer, director, manager of organization licensee been convict for violation of any federal laws, any or municipality? If yes, complete p	or agent for either a lin ted of any offenses (e Wisconsin laws, any li	nited liability company excluding traffic offens aws of other states, or	licensee, or es not relate r ordinances	nonprofit d to alcohol) of any county	☐ Yes	<b>₩</b> No
	o. manopanty: 11 yes, complete p	agoo				□ .00	١١١٠
	b. Are charges for any offenses prese the named licensee or any other per					☐ Yes	<b>⊠</b> No
7.	Except for questions 6a and 6b, have to by you on your last application for this	here been any change license? If yes, expla	es in the answers to the	ne questions	as submitted	☐ Yes	⊠ No
8.	Was the profit or loss from the sale of all or Franchise Tax return of the licensee?	If not, explain		0. s. c. c. v.).		Yes	□ No
	Does the applicant understand they mu [phone (608) 266-2776]  Does the applicant understand that alcohold the detection of th	shol beverage invoices i	must be kept at the lice	ensed premis	ses for 2 years		□ No
	from the date of invoice and made availa					Yes	□ No
11.	Is the applicant indebted to any wholesa	aler beyond 15 days for	r beer or 30 days for li	quor?	OE - 100 - 8 - 1 - 1	☐ Yes	⊠ No
12.	Does the applicant owe municipal proper (Note: Renewal of licenses may be detassessments or other fees).					☐ Yes	⊠ No
app app and void this	AD CAREFULLY BEFORE SIGNING: Upon truthfully answered to the best of the kelication; that the applicant has read and a correct. The undersigned further undersigned further undersigned further undersigned further undersigned, and under penalty of state law, the application. Any person who knowingly in \$1,000.	nowledge of the signer. made a complete answ stands that any license plicant may be prosecu	The signer agrees that yer to each question, a sissued contrary to Ch ted for submitting false	at he/she is the and that the a napter 125 of a statements	ne person name nswers in each f the Wisconsin and affidavits in	d in the fo instance a Statutes s n connecti	regoing are true shall be ion with
Coi	ntact Person's Name (Last, First, M.I.)		Title / Member		Date /	- 2	
	GUSSIE Harlan J		President		4/5/	23	
Sig	GVSIE Harlan J nature Harlan Llude		Phone Number 715-373-09	11	Email Address		
_							
то	BE COMPLETED BY CLERK						
Dat	te received and filed with municipal clerk	Date reported to council / bo	oard	Date license g	ranted		
Lic	ense number issued	Date license issued		Signature of C	lerk / Deputy Clerk		

Renewal Alcohol	Beverage L	icense Apr	plication	Applicant's Wisconsin Seller's Pen	mit Number
(Submit to municipal clerk. F	_			456- 1030606200	1-2
		,	16/31/2024	FEIN Number 397-8120	
For the license period beginn	_	ending.	(mm do yyyy)	TYPE OF LICENSE REQUESTED	FEE
	☐ Town of	t Decilorens		Class A beer	\$
To the Governing Body of the	: U Village of	MAJARAN		Class B beer	\$
	City of			Class C wine	S
County of BAYFILLD		Alderman	io Diet No	Class A liquor	\$
County of			ed by ordinance)	Class A liquor (cider only)	\$ N/A
	,	` .	d by ordinarios,	Class B liquor	\$
Check one: Individual	☑ Limited Liabilit	y Company		Reserve Class B liquor	\$
☐ Partnership	Corporation/N	onprofit Organiza	ation	Class B (wine only) winery	\$
				Publication fee	\$
Complete A or B. All must of	complete C.			TOTAL FEE	\$
A. Individual or Partnership	:				
Full Name (Last)	(First)	(Middle Name)	Home Address (Street	City or Post Office, & Zip Code)	
		,,		,,	
Full Name (Last)	(First)	(Middle Name)	Home Address (Street	City or Post Office, & Zip Code)	
(220)	(1100)	(middle Harrie)	Hollie Maless (Order)	Only of Post Office, & Zip Code/	
Full Name (Last)	(First)	(Middle Name)	Manna Address (Ctoo)	City or Post Office, & Zip Code)	
run wante (Last)	(Filse)	(middle Name)	nome Address (Street,	City of Post Office, a Zip Code)	
B. LLC or Corporation (and					
Full Legal Name of Corporation / Non	profit Organization / Limit	ed Liability Company	Address of Corporation /	Limited Liability Company (if different fro	m licensed premises)
211 warning BAT	LL(				
All corporations/organizations liquor must appoint an agent.	or limited liability c	ompanies applyir	ng for a license to se	ell fermented malt beverages a	nd/or intoxicating
Agent Last Name	(First)	(Middle Name)	Home Address (Street	City or Post Office, & Zip Code)	
Nelson	MARIC	1 1		ed mason wi	54856
All Officer(s) Director(s) of ( President / Member Last Name					
h -	(First)	(Middle Name)		City or Post Office, & Zip Code)	
Necson	Brithary	Rochelle		own hy wason w:	54856
Vice President / Member Last Name	(First)	(Middle Name)		City or Post Office, & Zip Code)	
There	DAMO	Monton	58335 NO	10 ad muson we	24820
Secretary / Member Last Name	(First)	(Middle Name)		City or Post Office, & Zip Code)	
Muser	MATIC	My AN	27100 30	in ad massi w	2 54856
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street,	City or Post Office, & Zip Code)	
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street,	City or Post Office, & Zip Code)	
Discourse (186-1-19)	I IP!A				
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street,	City or Post Office, & Zip Code)	
C. Business Information					
1. Trade Name 211 M	MAN BAT		Business Pho	one Number 303 995 42	26
2. Address of Premises 1	W. By Few ST	(00, 95)	Post Office &	Zip Code Was HBJAN 5	4891
3. Does the applicant unders	tand that they must	t purchase alcoho	ol beverages only fro	om Wisconsin wholesalers, bre	
and brewpubs?				Yes	☐ No
4. Premises description: De	scribe building or	buildings where	alcohol beverages a	are to be sold and stored. The	applicant must
include all rooms including	ı living guarters, if I	used, for the sale	es, service, consumi	otion, and/or storage of alcohol	I beverages and
records. (Alcohol beverag	es may be sold an	a stored only on	tne premises descri	bed.) ALL portions of t	he interior
of the bulling at	211 W. ST FIR	ost, the	attaches outon	building, patio and The	And
my potent of the	Progre Sidewark	Mana	between the	building patro and The	- parking
lot AS Allower					

5.	Legal description (omit if street address is gire	ven on previous pa	ige):			
6.	a. Since filing of the last application, has the member, officer, director, manager or agorganization licensee been convicted of for violation of any federal laws, any Wistor municipality? If yes, complete page	ent for either a lin f any offenses (e consin laws, any l	nited liability company excluding traffic offens laws of other states, o	y licensee, or nonprofit ses not related to alcohol) or ordinances of any county	☐ Yes	<b>O</b> NO
	b. Are charges for any offenses presently the named licensee or any other persons				☐ Yes	<b>P</b> No
7,	Except for questions 6a and 6b, have there by you on your last application for this licer	been any change nse? If yes, expla	es in the answers to the	he questions as submitted	☐ Yes	☑No
8.	Was the profit or loss from the sale of alcoho or Franchise Tax return of the licensee? If no	ot, explain	previous year reporte	2 1221111211111 242-11	√Yes	□ No
9.	Does the applicant understand they must he [phone (608) 266-2776]	old a Wisconsin Se	ller's Permit?		<b></b> Yes	□ No
10.	Does the applicant understand that alcohol be from the date of invoice and made available				<b>☑</b> Yes	□ No
<b>1</b> 1.	Is the applicant indebted to any wholesaler b	peyond 15 days for	r beer or 30 days for li	iquor?	☐ Yes	☑ No
12.	Does the applicant owe municipal property to (Note: Renewal of licenses may be denied assessments or other fees).	axes, assessment pursuant to a loca	s, or other fees? I ordinance, if the lice	nsee owes municipal taxes,	☐ Yes	☑ No
bee app and voice this tha	AD CAREFULLY BEFORE SIGNING: Under an truthfully answered to the best of the knowled correct. The undersigned further understand, and under penalty of state law, the applicate application. Any person who knowingly provin \$1,000.	edge of the signer. e a complete answ is that any license nt may be prosecu	The signer agrees that ver to each question, a issued contrary to Chated for submitting false e information on this a	at he/she is the person name and that the answers in each napter 125 of the Wisconsin e statements and affidavits in	d in the for instance a Statutes s n connecti	regoing are true shall be on with
Cor	ntact Person's Name (Last, First, M.I.)		Title / Member  DUNY MANAGE	Date 6 MCIL 2	2	
Sign	nature		Phone Number 303 - 995 - Yell	Email Address  ANE C POLON	tus, org	
то	BE COMPLETED BY CLERK					
Dat	Date of 105/2023	reported to council / bo	pard	Date license granted		
Lice	enae numbe/ issued Date	license issued		Signature of Clerk / Deputy Clerk		

Renewal Alcohol	_		olication	Applicant's Wisconsin Seller's Per	
(Submit to municipal clerk. F	lead instructions	on page 3.)		FEIN Number	
For the license period beginni	ng: 07/01/	20 23 ending: 0	6/30/202Y	81-4417452	
, ,	,			TYPE OF LICENSE REQUESTED	FEE
To the Governing Body of the	☐ Town of	N. a. a. F. E.		Class A beer	\$
To the Governing Body of the	: U Village of	Washborn		Class B beer	\$
	City of			FEIN Number  **TYPE OF LICENSE REQUESTED  Class A beer  Class B beer  Class C wine  Class A liquor  Class A liquor  Class B liquor  Reserve Class B liquor  Publication fee  TOTAL FEE  **Et, City or Post Office, & Zip Code)  **It, City or Post Office, & Zip Code)	\$
County of Bay field		Alderman	ic Dist. No	Class A liquor	\$
County of Cay Treez			d by ordinance)	Class A liquor (cider only)	\$ N/A
		(ii roquiro	a by oralination,	Class B liquor	\$
Check one: Individual	Limited Liabili	ity Company			\$
☐ Partnership	☐ Corporation/N	lonprofit Organiza	tion	☐ Class B (wine only) winery	\$
				Publication fee	\$
Complete A or B. All must of	complete C.			TOTAL FEE	\$
A. Individual or Partnership	:			-	
Full Name (Last)	(First)	(Middle Name)	Home Address (Street	t, City or Post Office, & Zip Code)	
Full Name (Last)	(First)	(Middle Name)	Home Address (Street	t, City or Post Office, & Zip Code)	
Full Name (Last)	(First)	(Middle Name)	Home Address (Street	t. City or Post Office, & Zip Code)	
B. LLC or Corporation (and	Agent):				
Full Legal Name of Corporation / Non	profit Organization / Limi	ited Liability Company	Address of Corporation /	Limited Liability Company (if different fro	om licensed premises)
Washburn Develo	OMENT PUODE	PTU LLL	2052 55th	AVE Dresser WI	POOYE
				ell fermented malt beverages a	ind/or intoxicating
Agent Last Name	(Firat)	(Middle Name)	Home Address (Street	t City or Post Office & Zin Code)	
Mobers	Jeffrey	Robert		**	54009
			1		t simi
All Officer(s) Director(s) of					
President / Member Last Name	(First)	(Middle Name)			
Vice President / Member Last Name	Jeffrey	Robert	2052 85	- AUR DIESSI- W	T 54009
Vice President / member Last Name	(First)	(Middle Name)	Home Address (Street	t, City or Post Office, & Zip Code)	
Secretary / Member Last Name	Michael (First)	Charly 5 (Middle Name)	Home Address (Street	RD M Stur Prairie, City or Post Office, & Zip Code)	54026
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street	t, City or Post Office, & Zip Code)	
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street	t, City or Post Office, & Zip Code)	
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street	t, City or Post Office, & Zip Code)	
C. Business Information					
	Men Su	nie Censu	Business Ph	one Number 7/5 373	5492
2. Address of Premises   2					
	tand that they mus	st purchase alcoho	ol beverages only fr	om Wisconsin wholesalers, bre	eweries
4. Premises description: De	escribe building or g living quarters, if	buildings where used, for the sale	alcohol beverages es, service, consum	are to be sold and stored. The option, and/or storage of alcohol	e applicant must
		_	1		
WIN	DOWS De	r Coy c	religionce		

AT-115 (R. 5-19)

5.	Legal description (omit if street address	is given on previous pa	ge):			
6.	a. Since filing of the last application, had member, officer, director, manager of organization licensee been convicts for violation of any federal laws, any or municipality? If yes, complete p	or agent for either a lin ed of any offenses (e Wisconsin laws, any l	nited liability company excluding traffic offense aws of other states, or	licensee, or nonprofit es not related to alcohol) r ordinances of any county	☐ Yes	⊠ No
	b. Are charges for any offenses prese the named licensee or any other per				☐ Yes	⊠ No
7	Except for questions 6a and 6b, have t by you on your last application for this				☐ Yes	⊠ No
•				d as the Manager II as a second		
8.	Was the profit or loss from the sale of alcor Franchise Tax return of the licensee?				)X Yes	□No
9.	Does the applicant understand they mus [phone (608) 266-2776]	st hold a Wisconsin Se	eller's Permit?		∑ Yes	□ No
10.	Does the applicant understand that alco from the date of invoice and made availa				X Yes	□ No
11.	Is the applicant indebted to any wholesa	aler beyond 15 days fo	r beer or 30 days for li	quor?	☐ Yes	<b>⋈</b> No
12.	Does the applicant owe municipal prope (Note: Renewal of licenses may be der assessments or other fees).				☐ Yes	<b>⊠</b> No
bee app and voic this	AD CAREFULLY BEFORE SIGNING: Un truthfully answered to the best of the kilication; that the applicant has read and correct. The undersigned further undersigned further undersigned further undersigned further undersigned state law, the application. Any person who knowingly in \$1,000.	nowledge of the signer. made a complete answ stands that any license blicant may be prosecu	The signer agrees that wer to each question, as issued contrary to Ch ted for submitting false	It he/she is the person name nd that the answers in each apter 125 of the Wisconsin a statements and affidavits is	d in the fo instance : Statutes : n connect	regoing are true shall be ion with
	tact Person's Name (Last, First, M.I.)		DWN 0 / Presi	dent 4/10/202	ζ.	
Sign	Moberg, Jeffrey R Hay R. Mph		Phone Number 7/5 781 48	dent 4/10/202 Email Address 70 Washburni	n N Osma	1,00
то	BE COMPLETED BY CLERK					
Dat	e received and filed with municipal clerk	Date reported to council / b	oard	Data license granted		
Lice	nse number issued	Date license issued		Signature of Clerk / Deputy Clerk		

Renewal Alcohol (Submit to municipal clerk. F	_		plication	Applicant's Wisconsin Setler's Per 456 [027722043] FEIN Number	
For the Bosses are all the story	· · · · · · · · · · · · · · · · · · ·		. 4 . 4	45 4364902	_
For the license period beginning	ng: (11 2 (mm dd yyy)	<u>-623</u> ending: <u>(</u>	(min dd yyyy)	TYPE OF LICENSE REQUESTED	FEE
To the Governing Body of the	☐ Town of )	2 Y		Class A beer	\$
To the Governing Body of the	: 🔲 Village of 🍃	Vashbuch		Class B beer	\$
	City of			Class C wine	\$
County of The Catal		Aldermen	ic Dist. No	Class A figuor	\$
County of Bayfield			ed by ordinance)	Class A liquor (cider only)	\$ N/A
		(ii require	o by ordinance,	Class B liquor	\$
Check one: Individual	Limited Liabi	lity Company		Reserve Class B liquor	\$
☐ Partnership	Corporation/	Nonprofit Organiza	ition	Class B (wine only) winery	\$
•				Publication fee	\$
Complete A or B. All must	complete C.			TOTAL FEE	\$
A. Individual or Partnership	:				
Full Name (Last)	(First)	(Middle Name)	Home Address (Street	t, City or Post Office, & Zip Code)	
Doman	Daniel	T	511 W Bayfi	eld St Washburn WI &	54891
Full Name (Last)	(First)	(Middle Name)		t, City or Post Office, & Zlp Code)	-100
Doman	Kristi	i na		reid St. Washburn WE	64891
Full Name (Last)	(First)	(Middle Name)	Home Address (Street	t, City or Post Office, & Zip Code)	
		,	,	, ,	
B. LLC or Corporation (and	Agent):				
Full Legal Name of Corporation / Non		ited Liability Company	Address of Corporation /	Limited Liability Company (if different fro	m licensed premises)
The Snug, LLC				feld St Washburn w	
All corporations organizations liquor must appoint an agent.	or limited liability	companies applyin	ng for a license to so	ell fermented malt beverages a	ind/or intoxicating
Agent Last Name	(First)	(Middle Name)		, City or Post Office, & Zip Code)	
Doman	Krist	m	SIL W BAYF	fuld St Washburn Let s	54891
All Officer(s) Director(s) of (	Corporation and	Members / Manac	ers of Limited Lia	hility Company:	
President / Member Last Name	(First)	(Middle Name)		, City or Post Office, & Zip Code)	
	Daniel			eld st Washburn wi	CUSCII
'Doman Vice President / Member Last Name	(First)	(Middle Name)		City or Post Office, & Zip Code)	340-11
THE THEOREM THOMAS LAST NAME	(rnet)	(middle Hallis)	Homo Admoss (Orect	, ony or rost office, a zip occupy	
Secretary / Member Last Name	(First)	(Middle Name)	Home Address (Street	, City or Post Office, & Zip Code)	
Treasurer / Member Last Name	(First) KnSt	(Middle Name)		, City or Post Office, & Zip Code)	
Deman	knsh	M	511 WBayfo	eld St Washburn WI St	891
Directors / Managers Last Name	(First)	(Middle Name)		, City or Post Office, & Zip Code)	
Domain	Daniel	7	511 WBAYF	eid St Washburn wi	54891
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street	, City or Post Office, & Zip Code)	
C. Business Information					
1. Trade Name The	Shug		Business Pho	one Number 719 373 0	338
2. Address of Premises 303	W Butifiel	1 51	Post Office &	Zip Code Washbuin 5	54891
3. Does the applicant unders	stand that they mu	st purchase alcoho	ol beverages only fro	om Wisconsin wholesalers, bre	eweries
and brewpubs?					Ø □ No
include all rooms including records. (Alcohol beverage	g living quarters, i ges may be sold a	f used, for the sale nd stored only on	es, service, consum the premises descr	are to be sold and stored. The ption, and/or storage of alcohoribed.)	beverages and
Restavant with	1 basemur	Storage a	IN SMIT D	ack deck / beer	garden

5.	Legal description (omit if street address	s is given on previous pa	ige):				
6.	<ul> <li>Since filing of the last application, I member, officer, director, manager organization licensee been convic for violation of any federal laws, an or municipality? If yes, complete</li> </ul>	or agent for either a lin ted of any offenses (e y Wisconsin laws, any l	nited liability company excluding traffic offens aws of other states, o	licensee, or es not relate r ordinances	nonprofit d to alcohol) of any county	☐ Yes	MN
	<ul> <li>b. Are charges for any offenses pres the named licensee or any other per</li> </ul>					☐ Yes	No
7.	Except for questions 6a and 6b, have by you on your last application for this					☐ Yes	Ø No
8.	Was the profit or loss from the sale of a or Franchise Tax return of the licensee?					₩ Yes	□ No
9.	Does the applicant understand they me [phone (608) 266-2776]	ust hold a Wisconsin Se	iller's Permit? .	72 70		Yes	□ No
	Does the applicant understand that alc from the date of invoice and made avail					Yes	□ No
11.	is the applicant indebted to any wholes	saler beyond 15 days for	r beer or 30 days for li	iquor? 👵		☐ Yes	No.
	Does the applicant owe municipal prop (Note: Renewal of licenses may be de assessments or other fees).					☐ Yes	No
app and void this	AD CAREFULLY BEFORE SIGNING: Untruthfully answered to the best of the blication; that the applicant has read and correct. The undersigned further under, and under penalty of state law, the apapplication. Any person who knowingly a \$1,000.	knowledge of the signer.  I made a complete answerstands that any license oplicant may be prosecu	The signer agrees that yer to each question, a sissued contrary to Ch ted for submitting false	it he/she is the and that the a napter 125 of a statements	e person name nswers in each the Wisconsin and affidavits in	d in the fo instance a Statutes a connect	regoing are true shall be ion with
Con	tact Person's Name (Last First, M.I.)		Title / Member		Date 4/14/2	<u>.</u>	
Sign	ature		Phone Number		Email Address	avale	10 .
	Hist Doman		715 209 436	25	asmo pors	e 7470	
TO	BE COMPLETED BY CLERK						
_	received and filed with municipal clerk 4/14/2-23	Date reported to council / bo	pard	Date license g	ranted		
Lice	nse numbe/issued	Date license issued	1	Signature of C	erk / Deputy Clerk		

Renewal Alcohol Beverage License Application (Submit to municipal clerk. Read instructions on page 3.)				Applicant's Wisconsin Seller's Permit Number  456-2000/36.33/2-03  FEIN Number		
Faatha liaanaa waxia dhaalaal	1 13+				28	
For the license period beginni				TYPE OF LICENSE REQUESTED	FEE	
To the Governing Body of the	☐ Town of 🔒	1 2 1 .		☐ Class A beer	\$	
To the Governing Body of the:	: ☐ Village of <code>}_</code>	Washha	<u> </u>	Class B beer	\$	
	City of	•••	•	Class C wine	\$	
	A			☐ Class A liquor	\$	
County of Bay-Pick	d	Alderman	ic Dist. No		+	
. '		, ,	d by ordinance)	Class A liquor (cider only)	\$ N/A	
Check one: Individual Partnership		lih . Camanamı		Class B liquor	\$	
Check one: 12 Individual		iity Company		Reserve Class B liquor	\$	
□ Partnership	Corporation/	Nonprofit Organiza	tion	Class B (wine only) winery	\$	
				Publication fee	\$	
Complete A or B. All must of	omplete C.			TOTAL FEE	\$	
A. Individual or Partnership						
Full Name (Last)	(First)	(Middle Name)	Home Address (Street.	City or Post Office, & Zip Code)		
	1 a	0	1.00	15 Val to an around		
Full Name (Last)	Davd	ma: ( )	DOD a Degti	City or Post Office, & Zip Code)	WI 24891	
Full Name (Last)	(First)	(Middle Name)	Home Address (Street,	City or Post Office, & Zip Code)		
Full Name (Last)	(First)	(Middle Name)	Home Address (Street,	City or Post Office, & Zip Code)		
B. LLC or Corporation (and	Agent):					
All corporations/organizations				Imited Liability Company (if different fro		
liquor must appoint an agent.					nordi intoxicating	
Agent Last Name	(First)	(Middle Name)	Home Address (Street,	City or Post Office, & Zip Code)		
All Officer(s) Director(s) of C	orporation and	Members / Manag	ers of Limited Liab	ility Company:		
President / Member Last Name	(First)	(Middle Name)		City or Post Office, & Zip Code)		
Vice President / Member Last Name	(First)	(Middle Name)	Home Address (Street,	City or Post Office, & Zip Code)		
Secretary / Member Last Name	(First)	(Middle Name)	Home Address (Street,	City or Post Office, & Zip Code)		
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street,	City or Post Office, & Zip Code)		
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street,	City or Post Office, & Zip Code)		
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street,	City or Post Office, & Zip Code)		
C. Business Information						
1. Trade Name A NS	Kels Wart	A Bar-n-G	Business Pho	ne Number (715) 37	3-5421	
2. Address of Premises	OO W Bas	Pieled St	Post Office &	Zip Code washbac	1.W15489	
	•	,			•	
<ol><li>Does the applicant unders and brewpubs?</li></ol>		st purchase alcoho	-	om Wisconsin wholesalers, bre	ewerjes 🔲 No	
include all rooms including records. (Alcohol beverag	living quarters, i es may be sold a	f used, for the sale nd stored only on	es, service, consump the premises descri	- Latter Contract	ol beverages and	
Westend	of said	propert	4, with a	ttached deck		

5.	Legal description (omit if street address is give	n on previous page):			
6.	a. Since filing of the last application, has the member, officer, director, manager or ager organization licensee been convicted of for violation of any federal laws, any Wisco or municipality? If yes, complete page 3	nt for either a limited liability co any offenses (excluding traffic onsin laws, any laws of other st	ompany licensee, or nonprofit coffenses not related to alcoho tates, or ordinances of any cou	l) nty	<b>≱</b> No
	b. Are charges for any offenses presently per the named licensee or any other persons a				<b>⊠</b> No
7	Except for questions 6a and 6b, have there b by you on your last application for this license	een any changes in the answe e? If yes, explain	ers to the questions as submitte	ed Yes	MNG
				_	
8.	Was the profit or loss from the sale of alcohol b or Franchise Tax return of the licensee? If not,				□ No
	Does the applicant understand they must hold [phone (608) 266-2776]	a Wisconsin Seller's Permit?	. N. Service Service - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	Yes	□ No
10.	Does the applicant understand that alcohol between the date of invoice and made available for				□ No
11.	Is the applicant indebted to any wholesaler be	yond 15 days for beer or 30 da	ys for liquor?	Yes	MNO
12.	Does the applicant owe municipal property tax ( <b>Note:</b> Renewal of licenses may be denied pu assessments or other fees).				MNO
bee app and void	AD CAREFULLY BEFORE SIGNING: Under person truthfully answered to the best of the knowled plication; that the applicant has read and made and correct. The undersigned further understands d, and under penalty of state law, the applicant is application. Any person who knowingly provided in \$1,000.	ige of the signer. The signer agr a complete answer to each que that any license issued contra may be prosecuted for submitti	rees that he/she is the person na stion, and that the answers in e ry to Chapter 125 of the Wiscor ing false statements and affidav	med in the fo ach instance isin Statutes its in connect	regoing are true shall be ion with
Cor	ntact Person's Name (Last, First, M.I.)	Tite / Member	Date 9-14	- 72	
Sig	nature David P	Phone Number (215) 3	Cloperatos 4-14 Email Address		
TC	BE COMPLETED BY CLERK				
		eported to council / board	Date license granted		
Lice		cense issued	Signature of Clerk / Deputy C	lerk	

Renewal Alcohol	Beverage Li	icense App	olication	Applicant's Wisconsin Seller's Peri	mit Number
(Submit to municipal clerk. F	Read instructions	on page 3.)	1 1	FFIN Number	9096-04
For the license period beginn	ina: 7/1/20	23 ending:	6/30/24	88-08	9020
, er and nooned period beginn	(mm'dd yyyy)	, onding.	(mm dd yyyy)	TYPE OF LICENSE REQUESTED	FEE
To the Course of the of the	Town of	MASURX	2x )	Class A beer	\$
To the Governing Body of the	: U Village of }	441241	<u></u>	Class B beer	\$
_	City of			Class C wine	\$
County of BAYFIE	W	Alderman	ic Dist. No	Class A liquor	\$
***			d by ordinance)	Class A liquor (cider only)	\$ N/A
		_	-	Class B liquor	\$
Check one: Individual	Limited Liabilit			Reserve Class B liquor	\$
☐ Partnership	Corporation/No	onprofit Organiza	ition	Class B (wine only) winery	
Complete A or B. All must o	complete C.			Publication fee TOTAL FEE	\$
A. Individual or Partnership	:				
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, C	City or Post Office, & Zip Code)	
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, C	City or Post Office, & Zip Code)	
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, C	City or Post Office, & Zip Code)	
B. LLC or Corporation (and	Agent):		dba PATS	NS BAR + 684	ı
Full Legal Name of Corporation / Non	profit Organization / Limite	d Liability Company	Address of Corporation / Lin	mited Liabity Company (if different from	m licensed premises)
SUATRIOR SHOP	ES EATS	INC	29189 US	HWYZ ASKLANT	LDI 54806
All corporations/organizations	or limited liability of	4.80			
liquor must appoint an agent.	Of infilted liability of	ompanies applyin	ig ioi a licerise to sell	lerificited mail peverages a	nd/or intoxicating
Agent Last Name	(First)	(Middle Name)	Home Address (Street, C	City or Post Office, & Zip Code)	
STADLESS	ROBERT	L	50268 B	PASER RO ARHUAN	DW154806
	and the second Manager				
All Officer(s) Director(s) of ( President / Member Last Name	(First)			itty Company: lity or Post Office, & Zip Code)	
0		(Middle Name)	Home Address (Street, C		111 SVON
TADLEGE	ROBERT	_	5000 D		the WI 54300
Vice President / Member Last Name	(First)	(Middle Name)		ity or Post Office, & Zip Code)	2
IVIARA N'SEN	BREGORY	D	29189 05	HWY a MSHUM	DW154806
Secretary / Member Last Name	(First)	(Middle Name)	Home Address (Street, C	ity or Post Office, & Zip Code)	
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street, C	tity or Post Office, & Zip Code)	
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, C	ity or Post Office, & Zip Code)	
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, C	ity or Post Office, & Zip Code)	
0 B 1 1 1 1 1 1 1	1		1		
C. Business Information					
1. Trade Name + ATSY	S TARZ &	Gene	Business Phon	ne Number 715 373	5792
2. Address of Premises 3	9 W BAY	GED SC	Post Office & Z	ip Code WASHBURN	WI 54891
3. Does the applicant unders	tand that they much	nuvohana alaaha	al barrarana ambridan	y Missessia wholeseless bro	wasiaa
and brewpubs?					Werles ☐ No
Premises description: De include all rooms including records. (Alcohol beverage)	g living quarters, if I	used, for the sale	es, service, consumpt	ion, and/or storage of alcoho	
BUILDING and	R Atteches	Parken	g LOT @ 30		ST WATHBORN WI
BLOWE 535, L	ots 1,23	1	BUILDING,		WOOD SIDE PARCH
Sudc. 16 Head AT-115 (R. 5-18) Appeared Y	, , <u> </u>	AND C		MSCONSIN	Department of Revenue
4 Johnson J	rious tia	mining Los	UMISION P	LANUS	

	Legal description (omit if street address is ç	jiven on previous page):			
6. 4	a. Since filing of the last application, has t member, officer, director, manager or a organization licensee been convicted for violation of any federal laws, any W or municipality? If yes, complete page	gent for either a limited liability compa of any offenses (excluding traffic offer isconsin laws, any laws of other states,	ny licensee, or nonprofit nses not related to alcohol) or ordinances of any county	☐ Yes	Хио
t	<ul> <li>Are charges for any offenses presently the named licensee or any other persor</li> </ul>			☐ Yes	<b>⊠</b> No
7. E	Except for questions 6a and 6b, have then by you on your last application for this lice	re been any changes in the answers to ense? If yes, explain	the questions as submitted	☐ Yes	∕ENo
	Nas the profit or loss from the sale of alcoh				<b></b>
	or Franchise Tax return of the licensee? If t	10t, explain	8-Grace - 1-9 B H - 11 - 97	Yes	₩No
9. E	Does the applicant understand they must he phone (608) 266-2776]	nold a Wisconsin Seller's Permit?	,	Yes	□ No
	Ooes the applicant understand that alcohol rom the date of invoice and made available			<b>✓</b> Yes	□ No
11. l	s the applicant indebted to any wholesaler	beyond 15 days for beer or 30 days for	r liquor?	☐ Yes	<b>Z</b> No
(	Does the applicant owe municipal property Note: Renewal of licenses may be denied assessments or other fees).	taxes, assessments, or other fees? d pursuant to a local ordinance, if the lic	ensee owes municipal taxes,	☐ Yes	Z No
been appli and ( void, this a	D CAREFULLY BEFORE SIGNING: Under truthfully answered to the best of the know cation; that the applicant has read and macorrect. The undersigned further understal and under penalty of state law, the application. Any person who knowingly pro \$1,000.	viedge of the signer. The signer agrees t de a complete answer to each question nds that any license issued contrary to ant may be prosecuted for submitting fa	hat he/she is the person name , and that the answers in each Chapter 125 of the Wisconsin Ise statements and affidavits i	d in the fo instance a Statutes s n connect	regoing are true shall be ion with
been appli and o void, this a than	truthfully answered to the best of the know cation; that the applicant has read and ma correct. The undersigned further understal and under penalty of state law, the application. Any person who knowingly pro	viedge of the signer. The signer agrees to de a complete answer to each question nds that any license issued contrary to ant may be prosecuted for submitting favides materially false information on this	hat he/she is the person name, and that the answers in each Chapter 125 of the Wisconsin lse statements and affidavits is application may be required to	d in the fo instance : Statutes : n connect to forfeit n	regoing are true shall be ion with ot more
been appli and o void, this a than	a truthfully answered to the best of the know cation; that the applicant has read and ma correct. The undersigned further understar and under penalty of state law, the application. Any person who knowingly pro \$1,000.	viedge of the signer. The signer agrees to de a complete answer to each question and that any license issued contrary to ant may be prosecuted for submitting fa vides materially false information on this	hat he/she is the person name, and that the answers in each Chapter 125 of the Wisconsin lse statements and affidavits is application may be required to	d in the fo instance : Statutes : n connect to forfeit n	regoing are true shall be ion with
been appli and void, this a than	a truthfully answered to the best of the know cation; that the applicant has read and ma correct. The undersigned further understar and under penalty of state law, the application. Any person who knowingly pro \$1,000.	viedge of the signer. The signer agrees to de a complete answer to each question nds that any license issued contrary to ant may be prosecuted for submitting favides materially false information on this Title / Member  Manuelle Phone Number	hat he/she is the person name, and that the answers in each Chapter 125 of the Wisconsin lse statements and affidavits is application may be required to	d in the fo instance : Statutes : n connect to forfeit n	regoing are true shall be ion with ot more
been appli and void, this a than	a truthfully answered to the best of the know cation; that the applicant has read and ma correct. The undersigned further understar and under penalty of state law, the application. Any person who knowingly pro \$1,000.	viedge of the signer. The signer agrees to de a complete answer to each question nds that any license issued contrary to ant may be prosecuted for submitting favides materially false information on this Title / Member  Manuelle Phone Number	hat he/she is the person name, and that the answers in each Chapter 125 of the Wisconsin lse statements and affidavits is application may be required to	d in the fo instance : Statutes : n connect to forfeit n	regoing are true shall be ion with ot more

Renewal Alcohol	Beverage L	icense Ap <sub>l</sub>	plication	Applicant's Wisconsin Seller's Per	
(Submit to municipal clerk. R	ead instructions	on page 3.)		496-1031058XG	9-04
	07-01-20	22 6	1-36-2024	84-457875	5
For the license period beginni	ng: (mm dd yyyy)	ending;	(mm dd yyyy)	TYPE OF LICENSE REQUESTED	FEE
	☐ Town of >				
To the Governing Body of the:	☐ Village of }	Wishburr	1	Class A beer	S
,	City of			Class B beer	+-
0 01	,—			Class C wine	\$
County of Burghela	<u> </u>		nic Dist. No	Class A liquor	+
V	AR)	(if require	ed by ordinance)	Class A liquor (cider only)	\$ N/A
Check one:  Individual	Limited Liabilit	h Company		☐ Class B liquor ☐ Reserve Class B liquor	\$
Partnership		onprofit Organiza	Aina	Class B (wine only) winery	\$
Partiteisnip	Corporation/M	oripront Organiza	luori	Publication fee	+
Complete A or B. All must o	omplete C.			TOTAL FEE	\$
	•			TOTAL PEE	4
A. Individual or Partnership		[maidul-11-15			
Full Name (Last)	(First)	(Middle Name)	Home Address (Street	, City or Post Office, & Zip Code)	
Full Name (Last)	(First)	(Middle Name)	Home Address (Street	, City or Post Office, & Zip Code)	
Full Name (Last)	(First)	(Middle Name)	Home Address (Street	City or Post Office, & Zip Code)	
B. I.I.C. on Composition (and	A ====4\(\).				
B. LLC or Corporation (and		4114499	1.1.1	11.11.11.11.11.11.11.11.11.11.11.11.11.	- P
Full Legal Name of Corporation / Nonp	A 1/2/2	ed Liability Company			im licensed premises)
Karlyn Yclowsu	d mlery		318 W Bu	Thilld St.	
All corporations/organizations liquor must appoint an agent.	or limited liability c	ompanies applyir	ng for a license to se	ell fermented malt beverages a	ind/or intoxicating
Agent Last Name	(First)	(Middle Name)	Home Address (Street,	City or Post Office, & Zip Code)	
17 va 1361	ENL	Richard		Mytheld WI SY8	114
All Officer(s) Director(s) of C		lembers / Manag			
President / Member Last Name	(First)	(Middle Name)	Home Address (Street,	City or Post Office, & Zip Code)	
Lundpern	Julsey	Lunn	PO 216	Bunned WI SY	XIL
Vice President / Member Last Name	(First)	(Middle Name)		City or Post Office, & Zip Code)	~
Gulda	Finh	Vilage	100 7.110	Busheld WIS	1814
Secretary / Mamber Last Name	(Firsi)	(Middle Name)		City or Post Office, & Zip Code)	
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street,	City or Post Office, & Zip Code)	
Directors / Managers Last Name	(Fine)	(Middle Name)	Llama Address /Chrost	City or Post Office, & Zip Code)	
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Sueer,	City of Post Office, a 2/p Code)	
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street,	City or Post Office, & Zip Code)	Laborator .
C. Business information					
	Valland	and balle	Bueinese Dhe	one Number 115 - 313	- 7517.7-
2. Address of Promises 21	gn Yellowl	CIL ST	Dusiness File	Zip Code Po 265	Silvai
<ol> <li>Address of Premises 3</li> <li>Does the applicant unders</li> </ol>		/1		•	
and brewpubs?		purchase alcond	oi beverages only tro	om vvisconsin wholesalers, bre	eweries
<ol> <li>Premises description: De include all rooms including records. (Alcohol beverag</li> </ol>	living quarters, if	used, for the sale	es, service, consum	ption, and/or storage of alcoho	
	Harbinert	•			
318 W B	whold s		whire	any and	
Str	1. 11 14 14 1	n Car I	23/015	ď	

5.	Legal description (omit if street address is	s given on previous pa	ge):			
6.	a. Since filing of the last application, ha member, officer, director, manager or organization licensee been convicts for violation of any federal laws, any or municipality? If yes, complete pa	r agent for either a lin e <mark>d of any offenses</mark> (e Wisconsin laws, any l	nited liability company excluding traffic offens aws of other states, o	vicensee, or nonprofit les not related to alcohol) or ordinances of any county	☐ Yes	No No
	<ul> <li>Are charges for any offenses preser the named licensee or any other pers</li> </ul>				☐ Yes	⊠No
7,	Except for questions 6a and 6b, have the by you on your last application for this li	ere been any change icense? If yes, expla	es in the answers to the in	ne questions as submitted	☐ Yes	⊠iNo
8.	Was the profit or loss from the sale of alc		previous year reporte			
0.	or Franchise Tax return of the licensee? I	If not, explain Wは、AとW	rinistered a	util	☐ Yes	⊠No
		jeny				
9.	Does the applicant understand they mus [phone (608) 266-2776]	t hold a Wisconsin Se	ller's Permit? .		✓ Yes	□No
	Does the applicant understand that alcoh from the date of invoice and made availal				✓ Yes	□No
11.	Is the applicant indebted to any wholesal	er beyond 15 days fo	r beer or 30 days for l	quor?	☐ Yes	<b>⊠</b> No
	Does the applicant owe municipal proper (Note: Renewal of licenses may be deni assessments or other fees).				☐ Yes	₽No
bee app and voic this	AD CAREFULLY BEFORE SIGNING: Un in truthfully answered to the best of the kni lication; that the applicant has read and m correct. The undersigned further undersi , and under penalty of state law, the appli application. Any person who knowingly p \$1,000.	owledge of the signer, nade a complete answ tands that any license icant may be prosecu	The signer agrees that yer to each question, a sissued contrary to Cl ted for submitting false	at he/she is the person name and that the answers in each napter 125 of the Wisconsin a statements and affidavits in	d in the fo instance Statutes o connect	regoing are true shall be ion with
Con	tact Person's Name (Last, First, M.I.)		Title / Member  Own Phone Number  651-442-	S27 Lello 2 L	23	ic is
-				The state of the s	Ja	12.w
	BE COMPLETED BY CLERK received and filed with municipal clerk	Date reported to council / b	nami	Date license granted		
	4/5/2023		ogi u			
Lice	nse number issued	Date license issued		Signature of Clerk / Deputy Clerk		

Renewal Alcohol	Reverage Li	cense Ani	nlication	Applicant's Wisconsin Seller's Per	rmit Number
	_		Jiioatioii	456-102010022-	
(Submit to municipal clerk. F	lead instructions	on page 3.)		FEIN Number	
Eartha license period beginni	na 0.2/21/2	252 anding D	6/70/100	39-1968736	
For the license period beginni	(mm dd wy)	zs ending.	(mm dd yyyy)	TYPE OF LICENSE REQUESTED	FEE
	☐ Town of	1		Class A beer	\$
To the Governing Body of the	: 🔲 Village of 🄰 🕹	Vashburr		Class B beer	S
	Z City of			Class C wine	S
County of Branking		Aldamaan	in Diet No	Class A liquor	S
Courtly of Jacob La 14			ic Dist. No d by ordinance)	Class A liquor (cider only)	S N/A
,		(ii require	d by ordinance)	Class B liquor	\$
Check one:  Individual	Limited Liabilit	v Company		Reserve Class B liquor	S
☐ Partnership	▼ Corporation/No		tion	Class B (wine only) winery	ļ.
	M corboration	onpront organiza		Publication fee	\$
Complete A or (B) All must of	complete©			TOTAL FEE	S
A. Individual or Partnership	:				
Full Name (Last)	(First)	(Middle Name)	Home Address (Street	t, City or Post Office, & Zip Code)	
Full Name (Last)	(First)	(Middle Name)	Home Address (Street	t, City or Post Office, & Zip Code)	
Full Name (Last)	(First)	(Middle Name)	Home Address (Street	, City or Post Office, & Zip Code)	
B IIC on Composition (and	A				
B. LLC or Corporation (and		d Lieblik Gomeon	Address of O	Links of Links Comment of Education	ti
Naturall Supe			The state of the s	Limited Liability Company (if different fro	
	or limited liability of	ompanies applyin	ig for a license to si	ell fermented malt beverages a	and/or intoxicating
liquor must appoint an agent.	1				
Agent Last Name	(First)	(Middle Name)		, City or Post Office, & Zip Code)	11 000
Date 1 Drevat	Dale	Arden	19035 Un	dosagn Rd Wasi	nburn 5484
All Officer(s) Director(s) of	Corporation and M	embers / Manag	ers of Limited Lia	bility Company:	
President / Member Last Name	(First)	(Middle Name)		, City or Post Office, & Zip Code)	
Q 11- 4.	Date	Andre	JUDIE BA	Jackson Pablack	11 1 1 1 1 1 COI
Vice President / Member Last Name	Dale (First)	(Middle Name)	Home Address (Street	Josenam Rd Washb. (City or Port Office, & Zip Code)	WA 2.4171
0					
Secretary / Member Last Name	(First)	ton	1292 144	de fo Marsh Cield dity or Post Office, & Zip Code)	5444
/1	,	(Middle Name)	Home Address (Street	, city or Post Office, & Zip Code)	1.2
Grevel	Donalee	Marie	14035 Un	dossain Rd Wash	burn 6489,
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street	, City or Post Emice, & Zip Code)	
Hudson	Dana	Ingrid	234 Blue S	ky Dr. Glenwood Cit	(4013
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street	, Oity or Post Office, & Zip Code)	1
Brevak	Donales	marie	74035 B	idossaym RI 548	9
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street	City or Post Office, & Zip Code)	•/
	(	(micele riame)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, , ,	
C. Business Information					
1. Trade Name Lake	La perior Vi	(W) 6018	Business Pho	one Number 7/5-3736/	501
				Zip Code Washburn	
2. Address of Premises 9 57	10. Huy		Post Office &	Zip Code Tashburh	3489
	stand that they mus			om Wisconsin wholesalers, bre	eweries ☑ □ No
4. Premises description: De	escribe building or	buildings where	alcohol beverages	are to be sold and stored. Th	e applicant must
	g living quarters, if	used, for the sale	es, service, consum	ption, and/or storage of alcoho	
Clubhouse St	rea Carts	a. 11 gol	+ course	Divivie	
			/	/	

5.	Legal description (omit if street address is given	on previous page):			
6.	a. Since filing of the last application, has the n member, officer, director, manager or agent organization licensee been convicted of a for violation of any federal laws, any Wiscor or municipality? If yes, complete page 3.	t for either a limited liability compar ny offenses (excluding traffic offer nsin laws, any laws of other states,	ny licensee, or nonprofit nses not related to alcohol) or ordinances of any county	☐ Yes	∯ No
	b. Are charges for any offenses presently per the named licensee or any other persons aff			☐ Yes	<b>₽</b> No
7.	Except for questions 6a and 6b, have there be by you on your last application for this license			☐ Yes	⊠ No
8.	Was the profit or loss from the sale of alcohol be				
	or Franchise Tax return of the licensee? If not,	explain	.,,	Yes Yes	□No
9.	Does the applicant understand they must hold a [phone (608) 266-2776]	a Wisconsin Seller's Permit?		∑ Yes	□ No
10.	Does the applicant understand that alcohol bever from the date of invoice and made available for			Yes Yes	□No
11.	Is the applicant indebted to any wholesaler bey	ond 15 days for beer or 30 days for	liquor?	☐ Yes	⊠ No
12.	Does the applicant owe municipal property taxe (Note: Renewal of licenses may be denied pur assessments or other fees).			☐ Yes	Ю́Ио
bee app and voic this	AD CAREFULLY BEFORE SIGNING: Under per en truthfully answered to the best of the knowledge plication; that the applicant has read and made a d correct. The undersigned further understands to d, and under penalty of state law, the applicant no a application. Any person who knowingly provides in \$1,000.	ge of the signer. The signer agrees to complete answer to each question, that any license issued contrary to may be prosecuted for submitting fal	hat he/she is the person name and that the answers in each Chapter 125 of the Wisconsin Ise statements and affidavits in	d in the folianstance a Statutes so connecti	regoing are true shall be ion with
	ntact Person's Name (Last, First, M.I.)	Title / Member	Date	4	
Sign	Brace In Brevak	Phone Number	Email Address	1023	
d	Consee M. Brevak	715-373-0	04/1)/a Email Address  ddbreval  Cent	eryte	finet
TO	BE COMPLETED BY CLERK				
		ported to council / board	Date license granted		
Lice		ense issued	Signature of Clerk / Deputy Clerk		

Renewal Alcohol	_		plication	Applicant's Wisconsin Seller's Per	mit Number			
(Submit to municipal clerk. F			.1 1	FEIN Number	1			
For the license period beginning	na: June 303	23 ending: J	06/30/2024	26-3701001	7			
	07/01	2023	(mm dd yyfy)	TYPE OF LICENSE REQUESTED	FEE			
	☐ Town of			Class A beer	\$			
To the Governing Body of the				☑ Class B beer	\$			
2 7	City of			Class C wine	\$			
County of Bantic	11	Aldormor	ic Dist. No	Class A liquor	\$			
County of	- feet		d by ordinance)	Class A liquor (cider only)	\$ N/A			
		(ii roquiro	a by Gramanocy	Class B liquor	\$			
Check one:  Individual	☐ Limited Liabil	ity Company		Reserve Class B liquor	s			
☐ Partnership	-	Vonprofit Organiza	ition	Class B (wine only) winery				
	C CO. PORCE.	p.io.ii. o.iguitico		Publication fee	\$			
Complete A or B. All must of	complete C.			TOTAL FEE \$				
	•			TOTALTEL	4			
A. Individual or Partnership								
Full Name (Last)	(First)	(Middle Name)	Home Address (Street,	City or Post Office, & Zip Code)				
Full Name (Last)	(First)	(Middle Name)	Home Address (Street,	City or Post Office, & Zip Code)				
Full Name (Last)	(First)	(Middle Name)	Home Address (Street,	City or Post Office, & Zip Code)				
B. LLC or Corporation (and Full egal Name of Corporation / None Decority 15 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	profit Organization / Limi	ited Liability Company	Address of Corporation / I	imited Liability Company (if different fro	m licensed premises)			
All corporations/organizations	1	companies applyin	g for a license to se	ell fermented malt beverages a	nd/or intoxicating			
liquor must appoint an agent.	Toma a	1						
Agent Last Name HANSON	PALE	(Middle Name) GOT & Sh	FZY WA	City or Post Office, & Zip Code) SHINGHON AND	54891			
All Officer(s) Director(s) of (	Corporation and I	Members / Manag	ers of Limited Liab	ollity Company:				
President / Member Last Name	(First)	(Middle Name)		City or Post Office, & Zip Code)				
0/1/-	Dale	6			5489			
Vice President / Member Last Name			)a/ W2)	City or Post Office, & Zip Code)	17 01011			
	(First)	(Middle Name)	Home Address (Street,	City or Post Office, & Zip Code)	51189			
) tensusci	Lois	)	DA / Dushin	ten AUP Walle	11070/			
Secretary / Member Last Name	(First)	(Middle Name)	Home Address (Street,	city or Post Office, & Zip Code)				
Stynsvad	(015	1	SAME A	tbove				
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street,	City or Post Office, & Zip Code)				
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street,	City or Post Office, & Zip Code)				
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street,	City or Post Office, & Zip Code)				
C. Business Information			,					
	15_B15+1	0	Business Pho	ne Number 715-373	-1125			
2. Address of Premises 316	West B	14 tield St	Post Office &	2 : 00	x 677			
3. Does the applicant unders and brewpubs?				om Wisconsin wholesalers, bre	eweries			
	living quarters, if	used, for the sale	s, service, consump	otion, and/or storage of alcoho	e applicant must			
records. (Alcohol beverag	Standage	COED ON	/ deck	in Summer	<u>n / </u>			
2 coolers	UPIN	main	part of	business				
			7					

AT-115 (R. 5-19)

5.	. Legal description (omit if street address is given on	previous page):			
6.	a. Since filing of the last application, has the nam member, officer, director, manager or agent fo organization licensee been convicted of any for violation of any federal laws, any Wisconsis or municipality? If yes, complete page 3	r either a limited liability company offenses (excluding traffic offense laws, any laws of other states, or	licensee, or nonprofit es not related to alcohol) ordinances of any county	☐ Yes	<b>⊠</b> No
	b. Are charges for any offenses presently pendle the named licensee or any other persons affilia			☐ Yes	⊠No
7	Except for questions 6a and 6b, have there been by you on your last application for this license?	any changes in the answers to the fyes, explain	e questions as submitted	☐ Yes	⊠No
8.	. Was the profit or loss from the sale of alcohol beve or Franchise Tax return of the licensee? If not, ex	rages for the previous year reported		Yes	
9.	Does the applicant understand they must hold a V [phone (608) 266-2776]	sisconsin Seller's Permit?	MIN I . N SHATIF FOR	Ves	□No
10.	<ol> <li>Does the applicant understand that alcohol bevera from the date of invoice and made available for ins</li> </ol>	ge invoices must be kept at the lice pection by law enforcement?	ensed premises for 2 years	Yes	□No
11.	. Is the applicant indebted to any wholesaler beyone	d 15 days for beer or 30 days for lie	quor?		
12.	<ol> <li>Does the applicant owe municipal property taxes, (Note: Renewal of licenses may be denied pursu assessments or other fees).</li> </ol>			Yes	<b>D</b> (No
app and voi this	EAD CAREFULLY BEFORE SIGNING: Under penal ten truthfully answered to the best of the knowledge oplication; that the applicant has read and made a confect. The undersigned further understands that id, and under penalty of state law, the applicant may is application. Any person who knowingly provides man \$1,000.	of the signer. The signer agrees that mplete answer to each question, a trany license issued contrary to Ch to be prosecuted for submitting false	t he/she is the person name nd that the answers in each apter 125 of the Wisconsin statements and affidavits	ed in the for instance a Statutes s in connecti	regoing are true shall be on with
Co	ontact Person's Name (Last, First, M.I.)	Title / Member	1 Date	- 72	
Sig	Grand (45)	Phone Number 373 - 11 25	Email Address daveandlo	ine y	ahoo
TO	D BE COMPLETED BY CLERK				
Dat	ate received and filed with municipal clerk  Date reports	ed to council / board	Date license granted		
Lic	cense number/issued Date license	eissued	Signature of Clerk / Deputy Clerk		

Renewal Alcohol I	Beverage Lic	ense App	lication		onsin Setter's Pen	
(Submit to municipal clerk. R	ead instructions o	n page 3.)		Mary Mary Control of the Party	0761472-0	P(
			6.1-	FEIN Number	154238	
For the license period beginning	ng: 07/01/2023	ending: 06	(mnl dd yyyy)	TYPE OF	LICENSE ESTED	FEE
	☐ Town of ゝ	4.000		Class A bee		Š
To the Governing Body of the:	☐ Village of >	washburn		Class B bee		S
	City of			Class C win		S
Barill				Class A liqu		S
County of <u>Bayfield</u> Aldermanic Dist. No.					or (cider only)	\$ N/A
· ·		(ir required	by ordinance)	Class B liqu		S
Check one:  Individual	☑ Limited Liability	Company		Reserve Cla		S
☐ Partnership	☐ Corporation/Nor		on	Class B (wir		S
		ibiour oilauman		Publicat		S
Complete A or B. All must o	omplete C.			TOTAL FEE		S
A. Individual or Partnership:			,			
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, Cit	y or Post Office, &	Zip Code)	
Tapia Estrada	Nostan	,		dr washl		5484
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, Cit		_	0 1011
	1	(Middle Haille)				54806
(3) ancartc	Greta (First)	(Middle Name)	Home Address (Street, Cit	7 AVC A		37800
2 1	Victor		And the second s			
banez bottericz	Arctor	Jas	PO Box 35	2 washbut	n wi	
B. LLC or Corporation (and	Agent):					
Full Legal Name of Corporation / Nonp	rofit Organization / Limited	Liability Company   A	ddress of Corporation / Limi	ited Liability Compa	any (if different from	n licensed premises)
Santa Levena	a LLC		901 W Bays	ield st	washbin	wi
All corporations/organizations liquor must appoint an agent.		npanies applying	11			
Agent Last Name	(First)	(Middle Name)	Home Address (Street, Cit	v or Post Office. &	Zip Code)	
Tapla Estrada	Nestor	(madio mano,	712 Hillside		horn w	54891
	1 30				(1)(O17) W]	7.01
All Officer(s) Director(s) of C President / Member Last Name	(First)		Home Address (Street, Cit		Zin Cada)	
Freshert / Member Last Name	(Filst)	(Middle Name)	nome Address (Street, Cit	y or Post Office, &	zip Code)	
Vice President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City	y or Post Office, &	Zip Code)	
Secretary / Member Last Name	(First)	(Middle Name)	Home Address (Street, Cit	y or Post Office, &	Zip Code)	ALLES TRANSPORTE AND
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street, City	y or Post Office, &	Zip Code)	
Directors / Managers Last Name	(Eiret)	(Middle Name)	Home Address (Street, Cit	u os Dost Office d	7in Code'	
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, Cri	y or Post Office, &	Zip Code)	
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City	y or Post Office, &	Zip Code)	
C. Business Information				_		
1. Trade Name 5an-	a levenda		Business Phone	Number	71581216	99
2. Address of Premises 90		d st	Post Office & Zip		54891	
Does the applicant understand brewpubs?					olesalers, bre	weries No
Premises description: De include all rooms including	living quarters, if us	sed, for the sales	. service, consumption	on, and/or stor	age of alcohol	
records. (Alcohol beverag	es may be sold and	stored only on the	ne premises describe	d.) Walki	n cooler	in Promises
and been coole	r in promise	2)				

5.	Legal description (omit if street address	is given on previous p	page):				
6.	a. Since filing of the last application, h member, officer, director, manager organization licensee been convict for violation of any federal laws, any or municipality? If yes, complete p	or agent for either a li ted of any offenses ( y Wisconsin laws, any	mited liability compan (excluding traffic offens laws of other states, (	y licensee, o ses not relate or ordinances	r nonprofit ed to alcohol) s of any county	☐ Yes	Ø No
	b. Are <b>charges</b> for <b>any offenses</b> prese the named licensee or any other per	ently <b>pending</b> (excluding) rsons affiliated with thi	ing traffic offenses not is license? If yes, exp	related to ale	cohol) against page 3	☐ Yes	Ø No
7,	Except for questions 6a and 6b, have by you on your last application for this	there been any chang license? If yes, expl	ges in the answers to t	the questions	s as submitted	☐ Yes	Z No
8.	Was the profit or loss from the sale of all or Franchise Tax return of the licensee?	If not, explain	e previous year reporte			☑ Yes	□ No
9.	Does the applicant understand they mu [phone (608) 266-2776]	ust hold a Wisconsin S	seller's Permit?	. (4.50)	182 1 2 1	· Yes	□ No
10.	Does the applicant understand that alco	phol beverage invoices able for inspection by	must be kept at the lice law enforcement?	censed premi	ses for 2 years	☑ Yes	□ No
11.	is the applicant indebted to any wholes	aler beyond 15 days fo	or beer or 30 days for I	liquor?		☐ Yes	✓ No
12.	Does the applicant owe municipal property (Note: Renewal of licenses may be deassessments or other fees).					☐ Yes	Ø No
app and void this	AD CAREFULLY BEFORE SIGNING: Usen truthfully answered to the best of the kalication; that the applicant has read and a correct. The undersigned further under d, and under penalty of state law, the application. Any person who knowingly in \$1,000.	nowledge of the signer made a complete answ stands that any licenso plicant may be prosect	<ul> <li>The signer agrees the wer to each question, a e issued contrary to C uted for submitting fals</li> </ul>	at he/she is the and that the a hapter 125 of statements	he person name answers in each f the Wisconsin s and affidavits in	d in the fo instance : Statutes : connect	regoing are true shall be ion with
Con	Nestor Tapla Estrada		Title / Member		Date 4/15	123	
Sign	nature		Phone Number B162232759		Email Address thenestor		n.com
TO	BE COMPLETED BY CLERK						
-	e received and filed with municipal clerk  4/15/2023	Date reported to council / t	board	Date license g	ranted		
Lice	nse number issued		Signature of Clerk / Deputy Clerk				

Renewal Alcohol Beverage License Application				Applicant's Wisconsin Seller's Permit Number 456-0000340870-03			
(Submit to municipal clerk. R	ead instructions	on page 3.)		FEIN Number			
For the license period beginning: 07 01 2023 ending: 06 30 2024 (mm dd yyyy) ending: 06 30 2024			39-1098106  TYPE OF LICENSE		FEE		
	☐ Town of →			REQUESTED	-		
To the Governing Body of the	Village of V	Vashburn		Class A beer	\$	110	
To the Governing Body of the:	City of			Class B beer	\$		
	E City of			Class C wine	\$		
County of Bayfield		Alderman	Class A liquor	\$	350		
		(if require	d by ordinance)	Class A liquor (cider only)	\$	N/A	
0				Class B liquor	\$		
Check one: Individual	Limited Liabili			Reserve Class B Ilquor	\$		
Partnership	✓ Corporation/N	lonprofit Organiza	tion	Class B (wine only) winery	\$		
Complete A or B. All must o	complete C			Publication fee	\$	18	
	-			TOTAL FEE	\$	478	
A. Individual or Partnership		7					
Full Name (Last)	(First)	(Middle Name)	Home Address (Street	t, City or Post Office, & Zip Code)			
Full Name (Last)	/Eirot\	(Middle Name)	Liama Addesas (Chrost	, City or Post Office, & Zip Code)	_		
Full Harrie (Last)	(First)	(Middle Name)	nome Address (Street	, City of Post Office, & Zip Gode)			
Full Name (Last)	(First)	(Middle Name)	Home Address (Street	, City or Post Office, & Zip Code)			
B. LLC or Corporation (and		had Liebille Commen	Address of Ossessables /	Number of the little Community of the control			
Hansen's IGA Inc.	profit Organization / Limi			Limited Liability Company (if different from Bangor, WI 54614	m licer	nsed premises)	
All corporations/organizations liquor must appoint an agent.	or limited liability	companies applyin	g for a license to s	ell fermented malt beverages a	ınd/or	intoxicating	
Agent Last Name	(First)	(Middle Name)	Home Address (Street	, City or Post Office, & Zip Code)			
Larson	Kristy		228 W 3rd St	Washburn WI 54891			
All Officer(s) Director(s) of (	Corporation and I	Members / Manag	ers of Limited Lia	bility Company:			
President / Member Last Name	(First)	(Middle Name)		, City or Post Office, & Zip Code)			
Hansen	Gregory	J	1320 Cardina	al St., Bangor, WI 54	614		
Vice President / Member Last Name	(First)	(Middle Name)		, City or Post Office, & Zip Code)			
Hansen	Nicholas	L	,	wood Ct., LaCrosse,	MT 5	4601	
Secretary / Member Last Name	(First)	(Middle Name)		, City or Post Office, & Zip Code)	MT 2	4001	
					C1 A		
Hansen Traccurer (Member) and Name	Kari	L (Middle Nome)		al St., Bangor, WI 54	014		
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street	, City or Post Office, & Zip Code)			
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street	, City or Post Office, & Zip Code)			
	(,	(,		, a., a aa., a.a., p. a.a.,			
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street	, City or Post Office, & Zip Code)			
C. Business Information							
1. Trade Name Hansen's	TGA Inc		Rusiness Ph	one Number 715-373-5566			
2. Address of Premises 226	W Bayfield S	St	Post Office &	Zip Code Washburn 5489	1		
<ol><li>Does the applicant unders breweries and brewpurbs?</li></ol>	tand that they mus	st purchase alcoho	ol beverages only fr	om Wisconsin wholesalers,		Yes □ No	
include all rooms including	a living quarters if	fused for the sale	s service consum	are to be sold and stored. The ption, and/or storage of alcohoribed.) 27,000 Sq ft bui	al hev	eranae and	
Grocery store, ent				:	.ldir	ng	
-							

5.	Legal description (omit if street address i	s given on previous pa	ge):				
6.	a. Since filing of the last application, ha member, officer, director, manager o organization licensee been convicte for violation of any federal laws, any or municipality? If yes, complete page	r agent for either a lim ed of any offenses (e Wisconsin laws, any li	ited liability company xcluding traffic offense aws of other states, or	licensee, or s not relate ordinances	nonprofit d to alcohol) of any county	☐ Yes	<b>₩</b> No
	<ul> <li>b. Are charges for any offenses prese the named licensee or any other pers</li> </ul>					☐ Yes	<b>☑</b> No
7.	Except for questions 6a and 6b, have to by you on your last application for this	license? If yes, expla				☐ Yes	<b>☑</b> No
٥	Was the profit or loss from the sale of alc		provious veer reported				
0,	or Franchise Tax return of the licensee?					✓ Yes	□ No
9.	Does the applicant understand they mus [phone (608) 266-2776]	st hold a Wisconsin Se	iller's Permit?			Yes Yes	□ No
10.	Does the applicant understand that alcolorom the date of invoice and made available.					✓ Yes	□ No
11.	Is the applicant indebted to any wholesa	aler beyond 15 days fo	r beer or 30 days for lie	quor?		☐ Yes	<b>☑</b> No
12.	Does the applicant owe municipal prope (Note: Renewal of licenses may be der assessments or other fees).					☐ Yes	☑ No
app and void this	AD CAREFULLY BEFORE SIGNING: Use the truthfully answered to the best of the knowledge of the sublication; that the applicant has read and a correct. The undersigned further undersigned f	nowledge of the signer. made a complete answ stands that any license blicant may be prosecu	The signer agrees that wer to each question, as a issued contrary to Chated for submitting false	t he/she is to nd that the a apter 125 o statements	he person name answers in each of the Wisconsin a and affidavits in	d in the fo instance a Statutes a connect	regoing are true shall be ion with
1	ntact Person's Name (Last, First, M.I.)		Title / Member		Date		
	nsen Nicholas L	7.10 IV	owner/VP		F		
Sig	nature Minds L Hav	yer	Phone Number Email Address  608-486-2049 #118 nlhansen@l		nlhansen@ha	ansensi	.ga.co
то	BE COMPLETED BY CLERK						
Dat	e received and filed with municipal clerk	Date reported to council / b	oard	Date license g	ranted		
Lic	anse number issued		Signature of Clerk / Deputy Clerk				

## Application for Cigarette and Tobacco Products Retail License

Submit to municipal clerk.							Period Covered 7/1/2023-6/30/2024				
	Wisconsin 15-dig			umber		st be issued in the same ame of the licensee below.	pe issued in the same				
Legal Name	(corporation, limite	d liabilit	y company, partne	rship or s	ole proprietorship)		Federal	Employer Identification No. (FEIN)			
Hansen's IGA Inc.							1	1098106			
	siness Name (if o			me)				ne Number			
		(	)								
Business Ad	idress (License L	ocation	n)			Business Located In	Busines	Business Telephone			
226 W	I Bayfie	1d	St			City Village Tow	vn (715	) 373-5566			
Municipality			State	Zip	Code		County				
Washb	ourn		WI	5	4891	of: Washburn	Bay	field			
Mailing Add	ress (if different t	han Bu	siness Address	)		Municipality	State	Zip Code			
P.O. 1	Box 160					Bangor	WI	54614			
Organizat	ion (check or	ne)									
☐ Sole F	Proprietor	•	Wisco	nsin C	orporation - Ent	er date incorporated:					
						-	in Wissens	in? Yes No			
Partne	•		☐ Out-01	-State	Corporation – A	re you registered to do business	in wiscons	all? Tes 140			
Other	(describe)_										
✓ Yes	☐ No					that they must purchase ciga ers, who hold a permit with the					
<b>V</b> Yes	Yes No 2. Does the applicant understand that they must obtain a Tobacco Products Distributor permit if purchasing untaxed tobacco products from an out-of-state company? (Tobacco Products Distributor permit is available from the Wisconsin Department of Revenue at 608-266-6701. See application form CTP 129, revenue wi.gov/dorforms/ctp-129.pdf.)							oducts Distributor permit is			
✓ Yes	☐ No					that they cannot purchase/exc ransferring existing stock to a					
✓ Yes	☐ No	4.				at they must provide employed Health Services? (https://wit					
✓ Yes	☐ No					that they may not sell, give or o minors (including electronic					
✓ Yes	☐ No	6.	Does the a	pplica	nt understand t	hat they may not sell single ci	garettes?				
<b>✓</b> Yes											
✓ Yes	☐ No		the Wiscon	sin De	epartment of Jus	nat only cigarettes and roll-your stice's website labeled "Direct .us/dls/tobacco-directory may	ory of Certi	fied Tobacco Manufacturers			
Cigarette	s / Tobacco	will b	e sold	V	over counter	through vending m	achine	☐ both			
been truth that the ri por-tion o	READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the applicant. Applicant agrees to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, cannot be assigned to another. Any lack of access to any por-tion of a licensed premises during inspection will be deemed a refusal to permit inspection. Such refusal is a misdemeanor and grounds for revocation of this license. Any person who knowingly provides materially false information on this application may be										

(Officer of Corporation / Member / Manager of Limited Liability Company / Partner / Individual)

#### **Applicable Laws and Rules**

This document provides statements or interpretations of the following laws and regulations in effect as of September 19, 2019: Sections 134.65, 134.66, 139.321, 139.79, 139.76, 995.10, and 995.12, Wis. Stats.

required to forfeit not more than \$1,000.

MUNICIPAL USE ONLY

License Number

## Auxiliary Questionnaire Alcohol Beverage License Application

Submit to municipal clerk.

Individual's Full Name (please print) (last name)		(first name)			(middle name)		
Hansen	G	Gregory			J		
Home Address (street/route)	Post Office		City		State	Zip Code	
1320 Cardinal St			Bangor		WI	54614	1
Home Phone Number		Age	Date of Birth		Place of B		
		53	04/10/1969	.	LaCr	osse WI	
			04/10/1303	1	Daor	0000 111	
The above named individual provides the t	ollowing information	as a per	son who is (check o	ne);			
Applying for an alcohol beverage licer	-	-	·	•			
A member of a partnership which is r			hol beverage licen	se			
☑ Agent			IGA Inc.				
(Officer / Director / Member / Manager / Ag			ame of Corporation, Limite	d Liability Company	or Nonprofi	t Organization)	
which is making application for an alco	ohol beverage licens	e.					
The above named individual provides the f	following information	to the lic	eneina authority:				
How long have you continuously reside	-		- · · · · ·	2			
Have you ever been convicted of any	•						
violation of any federal laws, any Wisco	•				ountv		
or municipality?	-	-		anocs of any o		Yes	✓ No
If yes, give law or ordinance violated, to				date, description	on and	, <u> </u>	
status of charges pending. (If more roor				•			
3. Are charges for any offenses presently		•			_	)	
for violation of any federal laws, any W							
municipality?			• • • • • • • • • • • • • • • • • • • •			∐ Yes	✓ No
If yes, describe status of charges pend		en 11-					
<ol> <li>Do you hold, are you making application or member/manager/agen</li> </ol>						ı	
beverage license or permit?							□No
If yes, identify.						11	
	(Na	me, Location	n and Type of License/Perr	nit)			
5. Do you hold and/or are you an officer, of						r	
member/manager/agent of a limited lial						-	
brewery/winery permit or wholesale liqu	uor, manufacturer or	rectifier <sub>l</sub>	permit in the State	of Wisconsin?.		Yes	✓ No
If yes, identify.							
-	olesale Licensee or Permittee	•		(Address E	ly City and	County)	
Named individual must list in chronolog     Employer's Name	MICAL OFCIEF 18ST TWO EI	npioyers		Employed From		То	
	.O. Box 160	Bang	or WI5/61/	1 1	03	04/01/20	723
	mployer's Address	Daily	OT M124614	Employed From	793	To	123
DEAD AADESIII IV DEEDDE MANING							
READ CAREFULLY BEFORE SIGNING: been truthfully answered to the best of the	Under penalty provi	ded by la	w, the undersigned	d states that ea	ach of th	ne above quest	ions has
application; that the applicant has read and							
correct. The undersigned further understan	ds that any license is	sued co	ntrary to Chapter 12	25 of the Wisco	nsin Sta	itutes shall be	void, and
under penalty of state law, the applicant ma	ay be prosecuted for	submittii	ng false statements	and affidavits	in conn	ection with this	applica-
tion. Any person who knowingly provides n	naterially false inform	nation on	this application ma	y be required t	to forfeit	not more than	\$1,000.
			1 12	11	/	X:	

## Auxiliary Questionnaire Alcohol Beverage License Application

Submit to municipal clerk.

Individual's Full Name (please print) (last name)			(first name)			(middle name)	
Hansen	Ka	Kari			L		
Home Address (street/route)	Post Office		Clty		State	Zip Code	
1320 Cardinal St			Bangor		WI	54614	
Home Phone Number		Age	Date of Birth		Place of E		
		51	11/29/1971		WI		1
		0.2	11/25/15/1				
The above named individual provides the fol	lowing information	as a pers	on who is (check o	ne):			
Applying for an alcohol beverage license	as an individual	,					
A member of a partnership which is ma			nol beverage licens	se.			
☑ Agent	<b>-</b>		IGA Inc.				
(Officer / Director / Membar / Manager / Agen	0		me of Corporation, Limite	d Liability Company	ar Nonprofi	t Organization)	
which is making application for an alcoh	ol beverage licens	e.					
The above named individual provides the fol	laving information	ta tha lia	analas authoritus				
How long have you continuously resided							
Have you ever been convicted of any offer	•			oversion) for			
violation of any federal laws, any Wiscon					county		
or municipality?	*			-	-	Yes	V No
If yes, give law or ordinance violated, tria	l court, trial date a	nd penalt	/ imposed, and/or	date, descripti	ion and		
status of charges pending. (If more room							
3. Are charges for any offenses presently p						)	
for violation of any federal laws, any Wise				_	-	□ v	Ed M
municipality?				* * * * * * * * * * * * * * * * * * * *		Yes	✓ No
Do you hold, are you making application		fficer dire	ector or agent of a	corporation/ne	nnrofit		
organization or member/manager/agent						I	
beverage license or permit?							No
If yes, Identify.							
	(Na	me, Location	and Type of License/Pern	nit)			
5. Do you hold and/or are you an officer, dir						r	
member/manager/agent of a limited liabil							
brewery/winery permit or wholesale liquo	r, manufacturer or	rectifier p	ermit in the State	of Wisconsin?		Yes	No.
If yes, identify.							
·	sale Licensee or Permittee	•		(Address	By Clty and	County)	
Named individual must list in chronologic     Employer's Name     Employer's Name	al Order last two el	npioyers.		Employed From		То	
	-	Banco	or WI54614		007	04/01/20	123
	loyer's Address	Dalige	OI WID4014	Employed From	<i>331</i>	To To	123
AltaGenetic							
IAIT.aGenetic				01/01/1	994	12/31/19	996

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

(Signature of Named Individual)

## Auxiliary Questionnaire Alcohol Beverage License Application

Submit to municipal clerk.

Individual's Full Name (please print) (lest name)	(first name)			(middle name)			
Hansen	N	ichola	as		L		
Home Address (street/route)	Post Office		City	State Zip Code		Zip Code	
5225 Brackenwood Ct			LaCrosse		WI	54601	
Home Phone Number		Age	Date of Birth		Place of B	irth	
		44	06/07/1978	}	LaCro	osse WI	
The above named individual provides the fo	llowing information	as a nere	on who is <i>(check o</i>	noi:			
Applying for an alcohol beverage licens	_		SON WINO IS (GNOCK D.				
A member of a partnership which is ma			nol heverage licens	20			
Agent			IGA Inc.				
(Officer / Director / Member / Manager / Age			ame of Corporation, Limite	d Liability Company	or Nonprofil	t Organization)	
which is making application for an alcoh	ol beverage license	θ.					
The above named individual provides the fo	llowing information	to the lice	ensing authority:				
How long have you continuously resided							
2. Have you ever been convicted of any off				everages) for			
violation of any federal laws, any Wiscor					county		
or municipality?						. Yes	<b>✓</b> No
If yes, give law or ordinance violated, tria	al court, trial date ar	nd penalt	y imposed, and/or	date, descript	ion and		
status of charges pending. (If more room	is needed, continue o	n reverse	side of this form.)				
Are charges for any offenses presently p	ending against you	(other th	an traffic unrelated	I to alcohol he	veranes'	1	
for violation of any federal laws, any Wis	~ ~ .	•				,	
municipality?				-	-	Yes	<b>✓</b> No
If yes, describe status of charges pending							
4. Do you hold, are you making application							
organization or member/manager/agent	•						□ N1.
beverage license or permit?  If yes, identify.		• • • • • • •			• • • • • • •	Yes	∐ No
ii yes, identily.	(Na	me, Location	and Type of License/Pem	nit)			
5. Do you hold and/or are you an officer, di	rector, stockholder,	agent or	employe of any pe	erson or corpo	ration or	r	ł
member/manager/agent of a limited liab							_
brewery/winery permit or wholesale liquo	or, manufacturer or	rectifier p	ermit in the State	of Wisconsin?		Yes	✓ No
If yes, identify.							
6. Named individual must list in chronologic	sale Licensee or Permittee	•		(Address	By City and	County)	
	ployer's Address	npioyers.		Employed From		То	-
	O. Box 160	Bang	or WT54614		008	04/01/20	123
	ployer's Address	-4119	- 1,201024	Employed From		To	
Brunswick Corp 25	125 N Rive	rwood	s Mettawa	01/01/2	003	03/01/20	800
				, , , ,			

**READ CAREFULLY BEFORE SIGNING:** Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

(Signature of Named (Individual)

Renewal Alcohol	_		plication	Applicant's Wisconsin Seller's Per	mit Number
(Submit to municipal clerk.				FEIN Number 41-0880612	
For the license period begin	ning: 07 01 20		(mm dd yyyy)	TYPE OF LICENSE REQUESTED	FEE
	Town of			Class A beer	\$
To the Governing Body of th		Washburn		Class B beer	\$
	✓ City of	)		Class C wine	\$
County of Bayfield		Aldorman	ic Dist. No.	Class A liquor	\$
County of Baylicia			d by ordinance)	☑ Class A liquor (cider only)	\$ N/A
		(ii require	d by ordinance)	☐ Class B figuor	\$
Check one:  Individual	☑ Limited Lia	bility Company		Reserve Class B liquor	\$
☐ Partnership		n/Nonprofit Organiza	tion	Class B (wine only) winery	
	corporado	intonpront organiza		Publication fee	\$
Complete A or B. All must	complete C.			TOTAL FEE	\$
A. Individual or Partnershi	ion e			TOTALIZE	•
Full Name (Last)	(First)	(Middle Name)	Home Address (Street	City or Post Office, & Zip Code)	
Ton Harris (acce)	(1 1134)	(Middle Halle)	Tiothe Address (blieb)	ony or i ost office, a zip oode)	
Full Name (Last)	(First)	(Middle Name)	Homo Address (Ctrost	City or Deat Office & Zin Code)	
ruii Name (Last)	(First)	(Middle Name)	Home Address (Street,	, City or Post Office, & Zip Code)	
· · · · · · · · · · · · · · · · · · ·					
Full Name (Last)	(First)	(Middle Name)	i Home Address (Street,	City or Post Office, & Zip Code)	
B. LLC or Corporation (and	d Agent):				
Full Legal Name of Corporation / No		Limited Liability Company	Address of Comomittee /	Limited Liability Company (if different fro	m licensed promises)
Indianhead Oil LLC	inploid Olgarization	Littlied Clability Company		lumbus, IN 47202	m licensed premises)
All corporations/organization liquor must appoint an agent.		ty companies applyir	ng for a license to se	ell fermented mait beverages a	ind/or intoxicating
Agent Last Name	(First)	(Middle Name)	Home Address (Street,	City or Post Office, & Zip Code)	
RICH JR	EUGENE		702 WEST PIN	E ST WASHBURN, WI 54	891
All Officer(s) Director(s) of	Corporation an	d Mamhere / Manac	are of Limited Liet	aility Company:	
President / Member Last Name	(First)	(Middle Name)		City or Post Office, & Zip Code)	
	, ,	(wadio reality)	Tromo Addicos (Odoo),	ony or rost omos, a lip occo,	
See List Attached		A MANAGEMENT OF A	The second secon	MARKETTAN VILLE ALBERTA	
Vice President / Member Last Name	(First)	(Middle Name)	Home Address (Street,	City or Post Office, & Zip Code)	
Secretary / Member Last Name	(First)	(Middle Name)	Home Address (Street,	City or Post Office, & Zip Code)	
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street,	City or Post Office, & Zip Code)	
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street,	City or Post Office, & Zip Code)	
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street.	City or Post Office, & Zip Code)	
	, ,	, , ,	,	,	
C. Business Information					
1. Trade Name Holiday	Stationstor	o #227	Rusiness Pho	ne Number 715-373-2305	
i. Hade Name notiday	BLACIONSCOI	E #221	Dualitesa Filo	THE NUMBER 713 373 2303	
<ol><li>Address of Premises</li></ol>	<u>606 W</u> Bayfie	eld St	Post Office &	Zip Code Washburn, WI	54891
				om Wisconsin wholesalers, bre	
and brewpubs?					☑ ∐ No
include all rooms includi	no livino quarters	if used, for the sale	es service consumi	are to be sold and stored. The otion, and/or storage of alcoholibed.)  Entire Building	

AT-115 (R. 5-19)

5.	Legal description (omit if street addres	s is given on previous pa	ige):				
6.	<ul> <li>a. Since filing of the last application, member, officer, director, manager organization licensee been conviction of any federal laws, and</li> </ul>	r or agent for either a lin <b>cted of any offenses</b> (e ny Wisconsin laws, any l	nited liability company excluding traffic offens laws of other states, or	licensee, des not relat r ordinance	or nonprofit ed to alcohol) s of any county		
	or municipality? If yes, complete	page 3		• • • • • • • • •	• • • • • • • • • • • • • • • • • • • •	Yes Yes	<b>∠</b> No
	b. Are charges for any offenses pre- the named licensee or any other pe					☐ Yes	☑ No
7.	Except for questions 6a and 6b, have by you on your last application for thi					☑ Yes	□ No
	Richard Johnson removed a	s officer effecti	ive.				
8.	Was the profit or loss from the sale of a or Franchise Tax return of the licensee	alcohol beverages for the ? If not, explain	previous year reported	d on the Wis	sconsin Income	✓ Yes	□ No
9.	Does the applicant understand they m [phone (608) 266-2776]	oust hold a Wisconsin Se	eller's Permit?		A. 2. 1	<b>∀</b> Yes	□ No
10.	Does the applicant understand that ald from the date of invoice and made available.					☑ Yes	□ No
11.	Is the applicant indebted to any whole	saler beyond 15 days fo	r beer or 30 days for li	quor?		☐ Yes	<b>☑</b> No
12.	Does the applicant owe municipal pro (Note: Renewal of licenses may be d assessments or other fees).					☐ Yes	☑ No
app and void this	AD CAREFULLY BEFORE SIGNING: n truthfully answered to the best of the lication; that the applicant has read and correct. The undersigned further under and under penalty of state law, the application. Any person who knowingly a \$1,000.	knowledge of the signer. d made a complete answerstands that any license pplicant may be prosecu	The signer agrees that ver to each question, a e issued contrary to Ch ted for submitting false	t he/she is t nd that the sapter 125 o statement	the person name answers in each of the Wisconsin s and affidavits i	d in the fo instance a Statutes a connecti	regoing are true shall be ion with
Cor	tact Person's Name (Last, First, M.I.)		Title / Member		Date		
	ant, Gary M		V.P. of Operat	ions	03/28/2023		
Sig	nature S +		Phone Number		Email Address		
	0712		812-379-9227 ex	kt 1166	holidaylic @holidaycompan		
_							
	BE COMPLETED BY CLERK						
Dat	e received and filed with municipal cterk	Date reported to council / b	card	Date license			
Lice	nse númber issued	Date license issued		Signature of e	Clerk / Deputy Clerk		

### OFFICERS AND MEMBER OF INDIANHEAD OIL CO., LLC

### Officers:

Gary Melburn Brant Vice President of Operations 700 East 3rd Street Monticello, MN 55362 (612) 210-5985

Valery Zamuner, Corporate Secretary 1304 Boulevard Mont-Royal Outremont, Quebec Canada H2V 2J1 (450) 662-6632 ext 4549

Kathleen Kerr Cunnington Treasurer and Senior Vice President Global Shared Services 3424 E. Equestrian Trail Phoenix, AZ 85044 (602) 728-7137

Sole Member: 100% Ownership Holiday Stationstores, LLC 4080 W. Jonathan Moore Pike PO Box 347 Columbus IN 47202 Phone: (812) 379-9227

FEIN: 41-0880942

#### MUNICIPAL USE ONLY **Application for Cigarette and** License Numbe **Tobacco Products Retail License** Period Covered Submit to municipal clerk. Date of Issuance Applicant's Wisconsin 15-digit Sales Tax Account Number This must be issued in the same 456-0000432420-04 Legal Name of the licensee below. Federal Employer Identification No. (FEIN) Legal Name (corporation, limited liability company, pertnarship or sole procrietorship) 41-0880612 INDIANHEAD OIL Co., LLC Trade or Business Name (if different than Legal Name) Telephone Number (715) 373-2305 Holiday Stationstore # 227 Business Telephone Business Located In Business Address (License Location) Town (812) 379-9227 X1166 City Village 606 W Bayfield St Zip Code County Municipality State of: Washburn Bayfield WI 54891 Washburn Malling Address (if different than Business Address) Zip Code Municipality State **COLUMBUS** IN 47202 **PO BOX 347** Organization (check one) Wisconsin Corporation -- Enter date incorporated: Sole Proprietor Out-of-State Corporation - Are you registered to do business in Wisconsin? Yes No Partnership WISCONSIN LLC V: Other (describe) V Yes No 1. Does the applicant understand that they must purchase cigarettes and tobacco products only from distributors, jobbers, or subjobbers, who hold a permit with the Wisconsin Department of Revenue? V: Yes No 2. Does the applicant understand that they must obtain a Tobacco Products Distributor permit if purchasing untaxed tobacco products from an out-of-state company? (Tobacco Products Distributor permit is available from the Wisconsin Department of Revenue at 608-266-6701. See application form CTP-129, revenue wi gov/dorforms/ctp-129.pdf.) 3. Does the applicant understand that they cannot purchase/exchange cigarettes or tobacco products V Yes No from another retailer, including transferring existing stock to a new owner? 4. Does the applicant understand that they must provide employees with tobacco sales training approved √ Yes No by the Wisconsin Department of Health Services? (https://witobaccocheck.org) 5. Does the applicant understand that they may not sell, give or otherwise provide cigarettes/tobacco V Yes No products and nicotine products to minors (including electronic cigarettes containing nicotine)? No V Yes 6. Does the applicant understand that they may not sell single cigarettes? V Yes 7. Does the applicant understand that cigarette and tobacco products invoices must be kept on the licensed premises for two years from the date of the invoice and be available for inspection by the Wisconsin Department of Revenue/law enforcement and that failure to comply can result in criminal penalties, including loss of cigarettes/tobacco products? 8. Does the applicant understand that only cigarettes and roll-your-own (RYO) tobacco products listed on V. Yes No the Wisconsin Department of Justice's website labeled "Directory of Certified Tobacco Manufacturers and Brands" at www.doj.state.wi.us/dls/tobacco-directory may be sold in Wisconsin? Cigarettes / Tobacco will be sold over counter through vending machine both READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the applicant. Applicant agrees to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, cannot be assigned to another. Any lack of access to any por-tion of a licensed premises during inspection will be deemed a refusal to permit inspection. Such refusal is a misdemeanor and grounds for revocation of this license. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

#### **Applicable Laws and Rules**

(Officer of Corporation / Mamber / Manager of Limited Liability Company / Partner / Individual)

This document provides statements or interpretations of the following laws and regulations in effect as of September 19, 2019: Sections 134.65, 134.66, 139.321, 139.79, 139.76, 995.10, and 995.12, Wis. Stats.

CTP-201 (R. 9-19) Wisconsin Department of Revenue

	Deverage L	icense App	dication	Applicant's Wisconsin Seller's Pan	mit Number
Submit to municipal clerk. R	Read instructions	on page 3.)	1 1 }	FEIN Number	17)00
or the license period beginni	ing: 00/01	2002 anding: 0	10 RN DONE	39.01/92	30
çi. ure ilcerise period beginni	(mm dd yyyy)		(Inra dd yyyy)	TYPE OF LICENSE REQUESTED	FEE
	Town of	1 Josh	150	☐ Class A beer	\$
o the Governing Body of the		CHOICIO	~~~	Class B beer	\$
	City of			Class C wine	\$
county of Bay Fiel	1	Aldermeni	c Dist. No	Class A liquor	\$
builty of			by ordinance)	Class A liquor (cider only)	\$ N/A
		(ii reduinot	a by ordinance,	☐ Class B liquor	S
Check one: Individual	Limited Liabili	ty Company		Reserve Class B liquor	\$
☐ Partnership	Corporation/N		tion	Class B (wine only) winery	S
				Publication fee	\$
complete A or B. All must o	complete C.			TOTAL FEE	\$
•	•			TOTALLE	Ψ
. Individual or Partnership					
Full Name (Last)	(First)	(Middle Name)	Home Address (Street,	City or Post Office, & Zip Code)	
Full Name (Last)	(First)	(Middle Name)	Home Address (Street,	City or Post Office, & Zip Code)	
Full Name (Last)	(First)	(Middle Name)	Home Address (Street.	City or Post Office, & Zip Code)	
	1,	,,		,	
quor must appoint an agent.  Agen Last Name  III Officer(s) Director(s) of Oresident/ Member Last Name  Frost Warne  Vice President / Member Last Name	(Eiret)	Middle Name)	Home Address (Street, 2510) Lo2  ers of Limited Liab  Home Address (Street, 2511) Lo2	City or Post Office, & Zip Code,	hland w75
Secretary/Member Last Name Tetzner	(First)  (First)	(Middle Name)	Home Address (Street, 30840 W)	City or Post Office, & Zip Code)  An nebo Ra Wash  City or Post Office, & Zip Code)	and W75/17 on W75/437 lburn W757
Secretary / Member Last Name Tetzner Treasurer / Member Last Name	Peter	(Middle Name)	Home Address (Street, 30840 W) Home Address (Street,	City or Post Office, & Zip Code)  (An nebo Rd Wish City or Post Office, & Zip Code)	on WI547 burn WI3
Treasurer / Member Last Name  Alle	(First) Veter (First) 1 rent	(Middle Name)  (Middle Name)  (Middle Name)	Home Address (Street, 30840 W) Home Address (Street, 25100 Co.	City or Post Office, & Zip Code)  A n nebo Rd Wish  City or Post Office, & Zip Code)  2 Corner Rd P	on WI5457
Secretary / Member Last Name Tetzner Treasurer / Member Last Name	(First) (First)	(Middle Name)	Home Address (Street, 30840 W) Home Address (Street, 25100 Co. Home Address (Street,	City or Post Office, & Zip Code)  (An nebo Rd Wish City or Post Office, & Zip Code)	on WI547 burn WI3

5.	Legal description (omit if street address is (	given on previous pa	ge):			
6.	a. Since filing of the last application, has member, officer, director, manager or a organization licensee been convicted for violation of any federal laws, any W or municipality? If yes, complete pag	ngent for either a lim of any offenses (e fisconsin laws, any l	nited liability company excluding traffic offens aws of other states, or	licensee, or nonprofit es not related to alcohol) r ordinances of any county	☐ Yes	<b>≥</b> No
	b. Are charges for any offenses present the named licensee or any other person				☐ Yes	DW.
7.	Except for questions 6a and 6b, have the by you on your last application for this lice	ense? If yes, expla		NAME OF STREET	☐ Yes	□ No
8.	Was the profit or loss from the sale of alcohor Franchise Tax return of the licensee? If	not, explain	60 + 10 + 10 + 10 + 10 + 10 + 10 + 10 +	101010101000000000000001	Yes	□ No
	Does the applicant understand they must in [phone (608) 266-2776]				ΈΩ Yes	□No
10.	Does the applicant understand that alcohol from the date of invoice and made available				Yes	□ No
11.	is the applicant indebted to any wholesaler	beyond 15 days for	r beer or 30 days for li	quor?	res	(X) No
12.	Does the applicant owe municipal property (Note: Renewal of licenses may be denied assessments or other fees).				☐ Yes	Ž\\\o
bee app and void this	AD CAREFULLY BEFORE SIGNING: Under truthfully answered to the best of the know blication; that the applicant has read and mail correct. The undersigned further understand, and under penalty of state law, the application. Any person who knowingly proin \$1,000.	viedge of the signer. de a complete answ nds that any license ant may be prosecut	The signer agrees that er to each question, and issued contrary to Chated for submitting false	t he/she is the person name nd that the answers in each apter 125 of the Wisconsin a statements and affidavits i	d in the fo instance : Statutes : n connect	regoing are true shall be ion with
Cor	mact Person's Name (Last, First, M.I.)		eneral Ma	enager Date 443	3	
Sig	nature francis aller		115.685 124			
то	BE COMPLETED BY CLERK					
Dat	be received and filed with municipal clerk  U/12/2023	ate reported to council / bo	pard	Date license granted		
Lice	icense number issued  Date license Issued			Signature of Clerk / Deputy Clerk		

#### Application for Cigarette and MUNICIPAL USE ONLY License Number **Tobacco Products Retail License** Period Covered Submit to municipal clerk. Applicant's Weconsin 15-digit Sales Tax Account Number Date of Issuance This must be issued in the same 456.000029417 Legal Name of the licensee below. Legal Name (corporation, limited liability company, partnership or sole proprietorship) Dervices In corporated Trade or Business Name (if different than Legal Name) Business Address (License Location) Davtield City Village (15)3 Municipality KISKDUTIT Mailing Address (Adifferent than Business Address) Organization (check one) 1935 Sole Proprietor Wisconsin Corporation – Enter date incorporated: Partnership Out-of-State Corporation - Are you registered to do business in Wisconsin? No Other (describe) Yes Yes No 1. Does the applicant understand that they must purchase cigarettes and tobacco products only from distributors, jobbers, or subjobbers, who hold a permit with the Wisconsin Department of Revenue? Yes 2. Does the applicant understand that they must obtain a Tobacco Products Distributor permit if purchasing No untaxed tobacco products from an out-of-state company? (Tobacco Products Distributor permit is available from the Wisconsin Department of Revenue at 608-266-6701. See application form CTP-129, revenue wi gov/dorforms/ctp-129 pdf.) 3. Does the applicant understand that they cannot purchase/exchange cigarettes or tobacco products ☐ No from another retailer, including transferring existing stock to a new owner? No 4. Does the applicant understand that they must provide employees with tobacco sales training approved by the Wisconsin Department of Health Services? (https://witobaccocheck.org) No 5. Does the applicant understand that they may not sell, give or otherwise provide cigarettes/tobacco products and nicotine products to minors (including electronic cigarettes containing nicotine)? 6. Does the applicant understand that they may not sell single cigarettes? No Yes No 7. Does the applicant understand that cigarette and tobacco products invoices must be kept on the licensed premises for two years from the date of the invoice and be available for inspection by the Wisconsin Department of Revenue/law enforcement and that failure to comply can result in criminal penalties, including loss of cigarettes/tobacco products? N Yes No 8. Does the applicant understand that only cigarettes and roll-your-own (RYO) tobacco products listed on the Wisconsin Department of Justice's website labeled "Directory of Certified Tobacco Manufacturers and Brands" at www.doj.state.wi.us/dls/tobacco-directory may be sold in Wisconsin? Cigarettes / Tobacco will be sold over counter through vending machine both READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the applicant. Applicant agrees to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, cannot be assigned to another. Any lack of access to any por-tion of a licensed premises during inspection will be deemed a refusel to permit inspection. Such refusal is a misdemeanor and grounds for revocation of this license. Any person who knowingly of vides materially false information on this application may be

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required to forfeit not more than \$1,000.

(Officer of Corporation / Member / Manager of Limited Liability Company / Pertner / Individual)

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CITY OF WASHBURN 119 Washington Avenue P.O. Box 638 Washburn, WI 54891



715-373-6160 715-373-6161 FAX 715-373-6148

To: Honorable Mayor and City Council Members

From: Tony Janisch, Assistant City Administrator

Re: Special Event Request – Superior Vistas Bike Tour

Date: April 20, 2023

Enclosed you will find a request from the Washburn Chamber related to the Superior Vistas Bike Tour (June 24, 2023). The Chamber requests relaxation of open container and noise ordinances, as well as the sale of beer by South Shore Brewery at Thompson's West End Park. These requests have been reviewed by Chief Johnson, and there are no objections. Please let me know if you have any questions on this request.



April 14, 2023

Mayor Motiff & Washburn City Council Members,

Please accept this communication as our official requests for the following items to be considered at the next available council meeting in regards to this year's Superior Vistas Bike Tour.

- 1. Relaxation of the open container and noise ordinance from 9am to 4pm on June 24, 2023 at Thompson's West End Park.
- 2. Sale of beer by the South Shore Brewery from 11am 4pm on June 24, 2023 at Thompsons West End Park.

We are making this request specifically for the after party for our event. This is the first year that we will be able to host the afterparty at the park since 2019. Covid concerns kept us from hosting the event in 2020 and the after party at the park in 2021 & 2022. In order to make it a special occasion and encourage registrations, we would like to have music and a beer tent near the pavilion at Thompson's West End Park for the after party. The after party is for participants of the event and will not be publicized outside of that capacity. Music would not be live, but either performed by a DJ or piped in through our equipment like in the past. We want to be respectful of those who are camping at the park and we will do our best to contain the party down by the lake as much as possible. We are expecting about 200 riders for this event from all over the Midwest.

Thank you for your consideration.

Mdissa Marlinez

Director, Washburn Area Chamber of Commerce

www.washbumchamber.com

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CITY OF WASHBURN 119 Washington Avenue P.O. Box 638 Washburn, WI 54891



715-373-6160 715-373-6161 FAX 715-373-6148

To: Honorable Mayor and City Council Members

From: Scott J. Kluver, Administrator

Re: Special Event Request – The Club

Date: April 21, 2023

Enclosed you will find a request from the Historic Civic Center Foundation to close the adjacent Central Avenue from Bayfield Street to the alley on July 29 for a Brownstone Block Party related event. The requests have been reviewed by Chief Johnson. There are no objections to this request. Please let me know if you have any questions.



April 18, 2023

To: Washburn City Council

From: Historic Civic Center Foundation, The Club

Re: Street Closure Request

The Historic Civic Center Foundation Board of Directors would like to request the temporary closure of Central Avenue, from Bayfield Street to the adjacent alley on Saturday, July 29, 2023 from 8am to 7pm. This closure is in conjunction with the Brownstone Block Party. Community activities are being planned for this space. Barricades will already be at The Club for use during the weekly farmer's market, which can be placed by board members the day of. Thank you for your consideration.

Regards,

Arianna Austin

HCCF, vice president