

**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 10, 2021 City Hall 4:30PM  
▪ Committee Review-Monthly Expenditures

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**NOTICE OF CITY COUNCIL MEETING**  
Monday, May 10, 2021 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/81207035650?pwd=ZkdMOFBps1F1cVZNTjRFcFILYUFWZz09> with passcode 051021 or by calling 1-888-788-0099 (Toll Free) and entering Webinar ID: 812 0703 5650 with passcode 051021 as opposed to being present for the meeting. The meeting will also be broadcast on Washburn Cable Access Television, and be live streamed on the City of Washburn YouTube Channel. Limited seating will be available at the meeting and guests are asked to keep a six-foot distance from one another.

**AGENDA**

- Call to Order/Roll Call/Pledge of Allegiance
- Approval of Minutes – City Council Meetings – April 12, 2021; April 20, 2021
- Approval of Monthly Expenditures via Roll Call Vote
- Public Comment
- Mayoral Announcements, Proclamations, Appointments
  - Proclamations for National Skilled Nursing Care Week, National Police Week, Emergency Medical Services Week, Week of the Young Child, Historic Preservation Month, and Arbor Day **TAB 1**
- Discussion & Action on Resolution #21-003 Recognizing the Washburn High School 2021 Girls Volleyball Team for Winning the State Championship **TAB 2**
- Discussion & Action on Second Driveway Access at 205 W. Harborview Dr. – James Thoreson & Edith Deutsch, Petitioners **TAB 3**
- Discussion & Action on Second Driveway Access at 701 W. Hillside Dr. – Paul Haugen, Petitioner **TAB 4**
- Discussion & Action on Decorative Streetlight Design for Bayfield Street Reconstruction **TAB 5**
- Discussion & Action on Bayfield County Resolution to form EMS Study Committee **TAB 6**
- Discussion & Action on Resolution #21-004 Requesting the Legislature Increase Funding for the Shared Revenue Program **TAB 7**
- Discussion & Action on Special Event Request to Temporarily Restrict Parking on S. 2<sup>nd</sup> Ave W. and Harbor View Drive for North Coast Car Show on July 24, 2021 – Tammy DeMars, Petitioner **TAB 8**
- Discussion & Action on Special Event Request to Temporarily Close Central Avenue from Bayfield Street to the Alley on Saturday, May 22 for Historic Preservation Celebration – Karen Novachek, Petitioner **TAB 9**
- Discussion & Action on Chamber of Commerce Use of Thompson’s West End Park, Memorial Park, Wikdal Park, and the Coal Dock; Closure of Portions of N. 3<sup>rd</sup> Ave. West and S. 4<sup>th</sup> Avenue West; and Relaxation of Open Container and Noise Ordinances all at Certain Times during Brownstone Block Party Activities July 23 through July 25, 2021 **TAB 10**
- Discussion & Action on Notice of Annual Alcohol License Renewals **TAB 11**
- Adjourn

April 12, 2021

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

Present, remote:

Jennifer Maziasz, Laura Tulowitzky

Municipal Personnel:

Present in-person:

Mayor Mary D. Motiff, City Administrator Scott J. Kluver, Assistant City Administrator Tony Janisch

Present, remote:

City Attorney Max Lindsey, Director of Public Works Gerry Schuette

Absent:

Mary McGrath

**Call to Order** - Meeting called to order at 5:30PM 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 Meeting of March 8, 2021** - A motion was made by Neimes to approve the March 8, 2021 minutes of the City Council with the corrections noted, second by Novachek. Motion carried unanimously.

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

**Public Comment** – Jeremy Oswald, 401 W 5<sup>th</sup> St, encouraged the City to continue working with Lost Apostle Brewing LLC for the redevelopment of the Brokedown Palace. Nick Wills, 208/210 W Bayfield St, owner of Coco’s Bakery, stated that he’s fine if the Brokedown building needs to be torn down but is a bit concerned about the shared common wall.

**Mayoral Announcements, Proclamations, Appointments-** The Mayor congratulated the re-election of all council members on the ballot and thanked all the poll-workers for their help carrying out the election. The Mayor further noted that the cases of Covid-19 are on the rise again in Bayfield County and urged everyone to continue wearing masks, and to get vaccinated, to protect the community and get the virus under control. The Mayor mentioned that the recently launched Community Branding Survey has already received 300 submittals and a link to the survey can be found on the City’s website. She also noted that two more food distributions were occurring this month, on the 14<sup>th</sup> and 28<sup>th</sup>. The Mayor concluded with the upcoming Earth Week Pick-up; mentioning that gloves & trash bags can be picked up at the City Garage and that the Washburn High School Ecology Club has adopted Bayfield Street and will be picking up on Saturday, April 24<sup>th</sup>.

**Discussion & Action on Structure at 204/206 W Bayfield Street to Retain or Allow it to be Razed as Part of New Development** – Badger Colish stated that after a roof and building assessment; the building is wet and degraded beyond easy repair. Colish added that the best scenario, and most cost effective, would be to raze the building and start new. Novachek advocated for the new building to be designed in a way to accommodate a second story addition in the future. Colish responded that architects are working on a design, and that he would like to include patio seating on the roof but was concerned about costs if an elevator was needed. Maziasz noted that given the cost comparison, it seems to make more sense to build new. She then asked about the vision/look of the new building. Colish stated that the look has not been defined yet, but that the Plan Commission would have to approve it. Broberg moved to allow the building to be removed and replaced, seconded by Novachek. Tulowitzky moved to open the floor, seconded by Anderson. Motion carried unanimously. Nick Wills, Coco’s Bakery, commented that Washburn doesn’t really have a building style, but that anything would be better that what is currently there. Anderson moved to close the floor, seconded by Novachek. Motion carried unanimously. Anderson stated it would be nice if Washburn had a building theme so the building can be designed as such; to fit with the community. Tulowitzky suggested that, if possible, materials of value be resourced and reused. Motion to allow the building to be removed and replaced passed unanimously.

**Discussion & Action on Renewal of Lease Agreement of Thompson’s West End Park Boat Ramp Area for North Coast Community Sailing- Becky Zelent, Petitioner** – Janisch stated that he met with Bayfield Rec Center staff on site to discuss other possible locations for the program, noting that this beach was the best spot at West End Park for this type of programming. Maziasz stated that this was a good program and good for the community, but that beach space is a limited resource in Washburn. Discussion continued. It was clarified that Recreation and Fitness Resources, Inc. is a not-for-profit organization. Maziasz moved to approve the lease agreement with North Coast Community Sailing, seconded by Broberg. Maziasz reiterated the benefit to the community. The Mayor suggested a presentation to Council as the end of the season of how the program went. Motion carried unanimously.

**Discussion & Action on Decorative Streetlight Design for Bayfield Street Reconstruction** – Mike Stoffel, Ayres & Associates, presented three options for decorative lighting styles along the Bayfield Street downtown corridor. Tulowitzky questioned if lighting was required. Stoffel answered that the DOT does not require lighting along the highway, but that if lighting is installed, it must meet a certain luminosity. Neimes proposed an additional candy cane style arm fixture and provided an example. Novachek asked for the timeline on needing a decision. The Mayor answered that a decision must be made by the May meeting. Novachek suggested that community input be gathered. Broberg included that costs must be a factor in the decision making. Discussion continued. Novachek moved to delay the decision to the May Meeting, include the candy cane style as an option along with its costs, and seek public input, seconded by Neimes. Motion carried unanimously.

**Discussion & Action on Streetlight Options Outside Decorative Zone for Bayfield Street Reconstruction** – Kluver stated two options for lighting outside the decorative zone. These being continue with the current Xcel streetlighting, or replace with DOT lighting. Discussion occurred regarding benefits and drawbacks of each option. Broberg moved to approve option 1 to continue with Xcel lighting outside of the decorative zone, seconded by Broberg. Motion carried unanimously.

**Discussion & Action on Master Contract with Ayres & Associates, Inc. and Supplement Agreement for Services Related to the STH 13 Reconstruction Projects; and Formalization of City Working Group for Bayfield Street Reconstruction Projects** – Kluver presented the need for a supplement to the master agreement with Ayres & Associates; stating that Ayres will provide additional guidance and assistance with the DOT outside of the original scope of services in the original contract. Broberg moved to approve the supplement to the master agreement, seconded by Neimes. Motion carried unanimously. Kluver further stated the need to formalize a working group to make minor decisions regarding the Bayfield Street Reconstruction project; especially when time constraints are at play. Broberg moved to approve a working group for the Bayfield St. Project consisting of the current members involved, seconded by Novachek. Motion carried unanimously.

The Mayor requested moving up the alcohol licensing agenda item. A motion was made by Anderson to amend the agenda and move up discussion of approval for a “Class B” alcohol license, second by Novachek. Motion carried unanimously.

**Discussion & Action on Approval of a “Class B” Alcohol License for 211 Martini Bar LLC, at 211 W. Bayfield Street** – David Sneed, part-owner of 211 Martini Bar stated that he envisions opening a place where people can go to socialize, while also having a drink; and further stated that the hours of operation would be limited, likely 4pm to 9 pm. Novachek moved to approval the “Class B” Alcohol License for 211 Martini Bar LLC, seconded by Anderson. Motion carried unanimously.

**Discussion & Action on Updating Job Description for Utility Operator** – Kluver stated that this was an update to a current position within Public Works. Novachek moved to approve the updated position description for Utility Operator, seconded by Broberg. Motion carried unanimously.

**Discussion & Action on Request to Hire an Intern** – Kluver stated that given the current finances, there is an opportunity to allocate \$13,000, approximately 800 hours, to hire an Intern. He envisions the position to carry out specific projects, potentially associated with the Bayfield Street Redevelopment; to be filled by a current or recently graduated college student. Novachek moved to approve the hiring of an Intern for up to 20 weeks at \$15.00 per hour, seconded by Maziasz. Motion carried unanimously.

**Adjourn – Motion to adjourn by Anderson, seconded by Broberg. Motion carried unanimously. Meeting adjourned at 7:30PM.**

Tony Janisch, Assistant City Administrator

**FINANCE COMMITTEE MEETING 4:30pm**

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

April 20, 2021

**CITY OF WASHBURN RE-ORGANIZATIONAL  
COMMON COUNCIL MEETING**

5:30PM

Washburn City Hall & Remote Video Conferencing

City Council Members:

Present, in-person:

Karen Spears-Novachek, Tom Neimes, Carl Broberg, Mary McGrath

Present, remote:

Jennifer Maziasz, Laura Tulowitzky

Municipal Personnel:

Present, in-person:

Mayor Mary D. Motiff, City Administrator Scott J. Kluver,  
Asst. City Administrator Tony Janisch, Director of Public Works  
Gerry Schuette.

Present, remote:

none

Absent:

Dave Anderson

**Call to Order** - Meeting called to order at 5:30pm by Mayor Motiff. Roll call attendance depicted six (6) of seven (7) members of the Common Council in attendance. Quorum of the Council recognized.

**Mayoral Announcements and Proclamations** – The Mayor congratulated the Washburn High School Girls Volleyball Team for their recent State Championship victory and undefeated season. She further encouraged voting for Caitlin Wheeler, who had been nominated for Wisconsin Sports VNN Athlete of the Week. Voting can be found on-line. The Mayor mentioned the upcoming Bayfield County Save to Give Challenge sponsored by Focus on Energy where residents can raise money for area non-profits by saving energy. The Mayor concluded by encouraging residents to join along with the High School Ecology Club with the City-wide Earth Week Spring Pick-Up.

**Election of Council President** – Neimes nominated Karen Novachek for Council President, no other nominations were received. The motion was made by Neimes to elect Novachek to Council President, second by McGrath. Motion carried unanimously.

**Election of Plan Commission Member (2/3 Vote Required)** – Novachek nominated Dave Anderson to the Plan Commission. Moved by Novachek to elect Anderson to Plan Commission, second by Maziasz. Motion carried unanimously.

**Confirmation of Council Member Appointments to Boards, Commissions, Committees** - Mayor is asking for the following City Council appointments: Laura Tulowitzky to Library Board, Tom Neimes to Bart Board, Carl Broberg to Harbor Commission, Jennifer Maziasz to Parks Committee, Personnel/Finance Mary McGrath, Laura Tulowitzky, and Karen Spears-Novachek. Moved by Novachek to confirm the Mayor appointments of Council members to the various boards, commissions, and committees, second by McGrath. Motion carried unanimously.

**Confirmation of Citizen Appointments to Boards, Commissions, Committees** - The Mayor nominated the following Citizens for appointments: John Baregi & Nick Suminski to Harbor Commission, Britt Serrine & Adeline Swiston to Plan Commission, Tom Pankratz & Jeffrey Olsen to Zoning Board of Appeals, Angel Croll to Parks Committee and Mary O'Brian-Cotheman & Leslie Alldritt to Library Board. A motion was made by Novachek to approve all citizen appointments, second by McGrath. Motion carried unanimously.

**Appointment of Weed Commissioner** – The Mayor requested that Gerry Schuette be appointed as Weed Commissioner. Moved by McGrath to appoint Director of Public Works Gerry Schuette as the Weed Commissioner, second by Neimes. Motion carried unanimously. The Mayor further thanked Assistant City Administrator Tony Janisch for his service in this position for the past year.

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

- Bremer Bank
- Chippewa Valley Bank
- Northern State Bank

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

**Discussion of Orientation and Other Training for Council Members –** City Administrator Kluver stated that typically an orientation and training is offered and scheduled for new council members, but since there are none, a refresher can be scheduled if anyone is interested. Novachek asked for an opportunity to discuss the impending federal stimulus. Kluver stated that the stimulus should be around \$200,000; with half coming this year and half next year. He further stated that there would be restrictions on spending, but they are still unknown. Novachek added that it would be mindful to spend wisely given this one time only opportunity. The Mayor included that the City would have 3 years to spend the funds.

**Adjourn – Mayor Motiff adjourned the meeting at 5:49 pm.**

Tony Janisch  
Assistant City Administrator

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## **National Skilled Nursing Care Week 2021 Proclamation**

*To designate the Week of May 9-15, 2021, 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 "Together Through the Seasons," 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 9-15, 2021; now**

***THEREFORE, I, Mary D. Motiff, Mayor of the City of Washburn, in recognition of this event do hereby proclaim the week of May 9-15, 2021, as***

**SKILLED NURSING CARE WEEK in WASHBURN**

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**Mary D. Motiff, Mayor**

## National Police Week 2021 Proclamation

*To designate the Week of May 9-15, 2021, 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 13<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 9<sup>th</sup> – May 15<sup>th</sup>, 2021**, as Police Week. I further call upon all citizens of the City of Washburn to observe **Saturday, May 15, 2021**, 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.

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Mary D. Motiff, Mayor

## **EMS Week Proclamation**

*To designate the Week of May 16-22, 2021, 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 16-22, 2021, as**

**EMERGENCY MEDICAL SERVICES WEEK**

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**Mary D. Motiff, Mayor**

## **Historic Preservation Month Proclamation**

*To designate May, 2021, 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 Historic Civic Center Foundation, 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, 2021 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.***

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**Mary D. Motiff, Mayor**



*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*, 2021 is the 149<sup>th</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*

*Wednesday, May 26, 2021 as the 149<sup>th</sup> anniversary celebration of*



**Arbor Day**

*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 10<sup>th</sup> day of May, 2021*

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Mary D. Motiff  
MAYOR

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**COMMON COUNCIL FOR THE  
CITY OF WASHBURN, WISCONSIN**  
Resolution No. 2021-003

**Recognition of the Washburn High School 2021 Girls Volleyball Team**

**WHEREAS**, the Washburn Castle Guards Volleyball program has had “decades of success” and is one of the premiere high school volleyball programs in Northern Wisconsin; and

**WHEREAS**, the Washburn Castle Guards Volleyball program has produced numerous athletes who competed and played college volleyball; and

**WHEREAS**, the Washburn Castle Guards Volleyball program has won more WIAA Conference and Regional Championships than any other school in northern Wisconsin; and

**WHEREAS**, the 2021 Washburn Castle Guards State Volleyball Championship is the second state title in Washburn Volleyball school history; and

**WHEREAS**, the 2021 Washburn Girls Volleyball team is one of the few teams in Wisconsin sports history to have an undefeated season;

**NOW, THEREFORE BE IT RESOLVED**, that the Common Council of the City of Washburn recognizes, commends and congratulates the Washburn High School 2021 Girls Volleyball Team for winning the State Championship; and

**BE IT FURTHER RESOLVED**, that the Washburn City Council recognizes and thanks the parents, family, fans and coaches who supported the team along the way.

Adopted by the Common Council for the City of Washburn, Wisconsin this the 10th day of May, 2021.

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Mary D. Motiff, Mayor

STATE OF WISCONSIN     )  
  )  
COUNTY OF BAYFIELD    )

I hereby certify that the foregoing resolution is a true, correct and complete copy of a Resolution #2021-003 duly and regularly adopted by the Common Council for the City of Washburn on the 10th day of May 2021 and that said resolution has not been repealed or amended, and is now in full force and effect.

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Scott J. Kluver, City Clerk

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**CITY OF WASHBURN**  
**Office of Director of Public Works**  
**502 W Bayfield St**  
**P.O. Box 638**  
**Washburn, WI 54891**



**Mobile 715-292-1205**  
**Office 715-373-6160**  
**Office 715-373-6161**  
**FAX 715-373-6148**

4/20/2021

Tammy Demars  
City of Washburn

RE: City of Washburn Driveway Permit  
James Thoreson  
205 W Harborview Dr.  
Washburn WI 54891  
715-812-1182  
715-292-0260

Request for installation of said second driveway entrance onto Harborview Dr.

1. New 15-inch culvert with end walls, have been installed, and is adequate for drainage in the existing ditch Line and per Ordinance 6-3-2a 1.
2. Existing East Drive does **not** comply with Ordinance 6-3-2c (1), included in this permit is for approval of City of Washburn Council to review and approve Department of Public Works recommendation to allow East Drive Entrance to remain 21' blacktop surface.
3. Per Ordinance 6-3-2 (1) your request for second entrance to property does meet this requirement of separation of 15ft.
4. Per Ordinance 6-3-2a (2) proposed new West Driveway entrance onto Harborview Dr. will need approval from City Council prior to permit being valid, Washburn Department of Public Works find no other contradictions to ordinance 6-3-1 Driveway Permit Required or 6-3-2 Driveway Location Design, and Construction Requirements and is here by approved with the Approval of City of Washburn Council.
5. Department of Public Works Recommends proposed Second Drive entrance not to exceed a width of 21ft @ Culvert Line to match existing drive to East.

Feel free to contact me for additional information if required.

*Gerald J Schuette*

Gerald J Schuette  
Director of Public Works



# CITY OF WASHBURN DRIVEWAY PERMIT APPLICATION

Driveway Permit (Section 6-3-11c) Code of Ordinances: \$25.00 if permeable surface used  
 (No charge if applied for with building permit for new structure construction) \$50.00 if impervious surface used

Complete the following with name, address, & phone

Property Owner(s): James R Thoreson & Edith M Deutsch  
 Street Address: 205 W Harborview Dr  
 Mailing Address: 205 W Harborview Dr  
 Home Phone: (715) 811-1182 Business Phone: ( )  
 Jim's-cell: 715-292-0260

Existing Driveway on Property Yes  No  Existing Sidewalk on Property Yes  No   
 Location of Planned Driveway: Street  Avenue  Alley

**(A DRAWING MUST BE ATTACHED TO THE APPLICATION DEPICTING STREET, ALLEY, AND OR AVENUE ADJACENT THE PROPERTY, AND INCLUDING ALL STRUCTURES AND LOCATION OF INGRESS/EGRESS)**

Description of work - width, length, material used Approx-35x34-BlackTop Estimated Project Cost \$4,500.00

I agree to comply with all applicable codes, statutes and ordinances and with the conditions of this permit, understand that the issuance of the permit creates no legal liability, express or implied, on the State of Wisconsin or the City of Washburn, and certify that all of the above information is accurate. I also agree to abide by any special condition or restriction placed on me by this permit

James Thoreson Edith Deutsch Applicant Signature April-13-2021 Date

CULVERT STATUS	NONE _____ NEW _____	EXISTING _____ TEMPORARY _____	CULVERT SPECIFICATIONS
<u>DIAMETER</u>	<u>LENGTH</u>		
NONE _____			CULVERT TYPE
8 INCH _____	10-15 FEET _____		GALVINIZED _____
10 INCH _____	15-20 FEET _____		PLASTIC _____
12 INCH _____	20-25 FEET _____		END SECTIONS REQUIRED
15 INCH _____	25-30 FEET _____		YES _____
18 INCH _____	30-35 FEET _____		NO _____
21 INCH _____	35-40 FEET _____		
24 INCH _____	OTHER _____		

Municipal Approval \_\_\_\_\_ Date \_\_\_\_\_

CONDITIONS OF APPROVAL This permit is issued pursuant to the following conditions. Failure to comply with these conditions may result in suspension or revocation of this permit or other penalty.

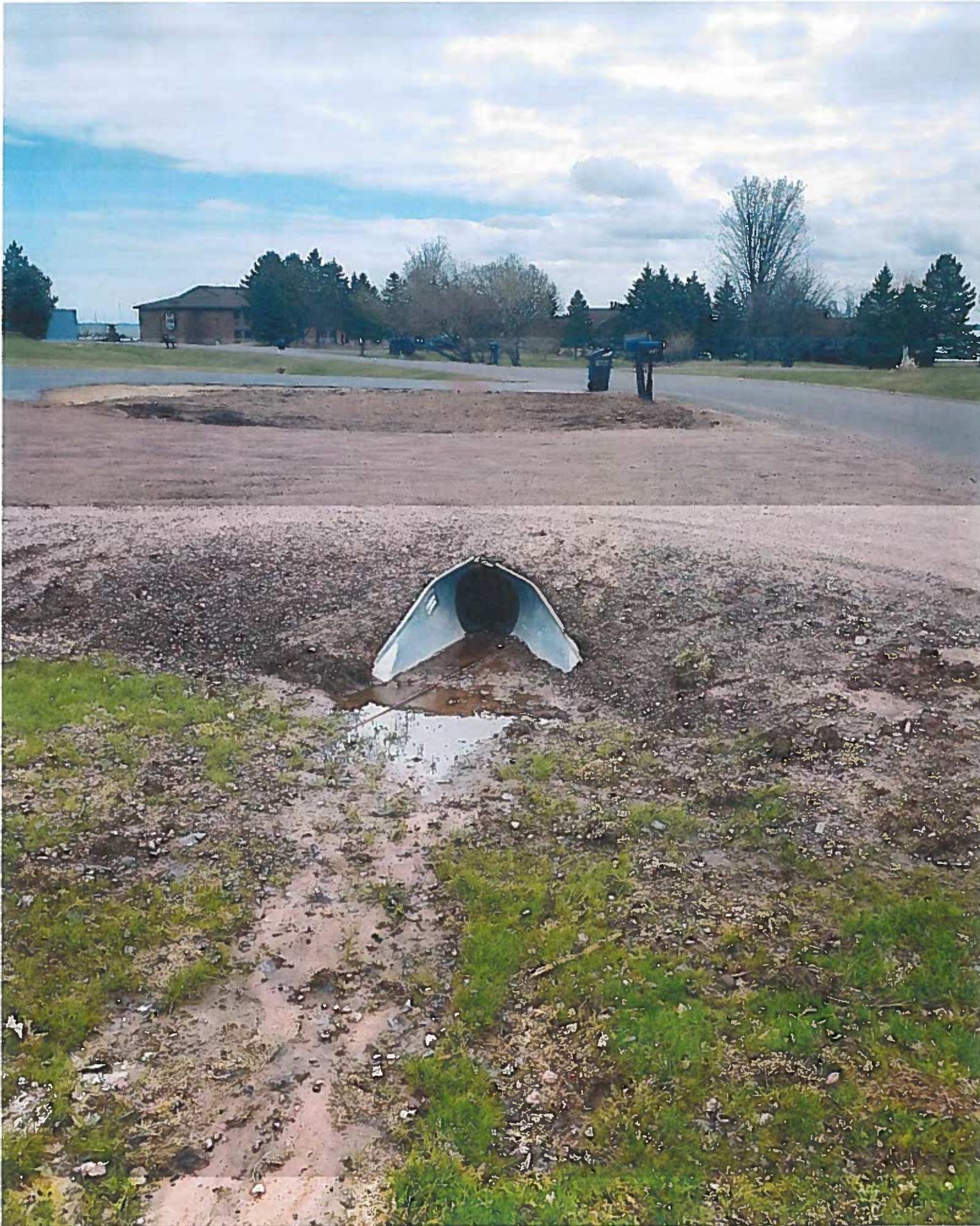
See attached documents



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# Bayfield County, WI







## Title 6 ► Chapter 3

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### Driveways

**6-3-1** Driveway Permit Required

**6-3-2** Driveway Location, Design and Construction Requirements

#### **Sec. 6-3-1 Driveway Permit Required.**

- (a) **Purpose.** For the safety of the general public, the City shall determine the location, size, construction and number of access points to public roadways within the City limits. It is the City's intent to provide safe access to properties abutting public roadways suitable for the property to be developed to its highest and best use, provided that access is not deficient or dangerous to the general public.
- (b) **Permit Required to Construct, Reconstruct, Alter or Enlarge.** No person, firm or corporation shall construct, reconstruct, alter or enlarge any private driveway within the limits of the dedicated portion of any public street under the control and jurisdiction of the City of Washburn without first obtaining a permit therefor as provided by this Chapter.
- (c) **Application.** Application for such permit shall be made to the City Clerk on a form provided by the City and shall be accompanied by a drawing accurately depicting the portion of the proposed private driveway to be constructed, reconstructed, altered or enlarged lying within the dedicated portion of the public street, the dimensions thereof and a statement of the materials proposed to be used. The applicant shall pay a fee of ~~Five~~<sup>Ten</sup> Dollars (\$~~5.00~~<sup>10.00</sup>). Upon receipt of the application and the fee if required, unless the proposed private driveway is a part of construction for a building or other structure for which a building permit has been applied for, in which case no additional fee is required, the City Clerk shall approve such application if the proposed driveway complies with the terms and conditions of this and any other applicable City ordinance.
- (d) **Application Provisions.** All driveway permit applications shall contain the applicant's statement that:
- (1) The applicant represents all parties in interest, and that such proposed driveway is for the bona fide purpose of securing access to his property and not for the purpose of parking or servicing vehicles, advertising, storage or merchandising of goods within the dedicated portion of the City street, or for any other purpose.
  - (2) The City, notwithstanding the construction of such driveway, reserves the right to make any changes, additions, repairs or relocations within the dedicated portion of the

City street at any time, including relocation, reconstruction, widening and maintaining the street without compensating the owner of such private driveway for the damage or destruction of such private roadway.

- (3) The permittee, his successors or assigns, agrees to indemnify and hold harmless the City of Washburn, its officials, officers, agents or employees, against any claim or any cause of action for personal injury or property damage sustained by reason of the exercise of such permit.
- (4) The City does not assume any responsibility for the removal or clearance of snow, ice or sleet or the opening of any windrows of such material upon such portion of such driveway within the dedicated portion of the City street.

### **Sec. 6-3-2 Driveway Location, Design and Construction Requirements.**

- (a) **General Requirements.** The location, design and construction of driveways shall be in accordance with the following:
  - (1) **General Design.** Private driveways shall be of such width and so located that all of such driveways and their appurtenances are within the limits of the frontage abutting the street of the property served. Driveways shall not provide direct ingress or egress to or from any street intersection area and shall not encroach upon or occupy areas of the street right-of-way required for effective traffic control or for street signs or signals. A driveway shall be so located and constructed that vehicles approaching or using it shall have adequate sight distance along the street. Driveway approaches shall be at least ten (10) feet apart except by special permission from the Common Council, or committee thereof, and driveways shall in all cases be placed wherever possible as not to interfere with utilities in place.
  - (2) **Number.** The number of driveways to serve an individual property fronting on a street shall be one (1), except where deemed necessary and feasible by the Common Council, or committee thereof, for reasonable and adequate service to the property, considering the safety, convenience and utility of the street.
  - (3) **Island Area.** The island area in the street right-of-way between successive driveways or adjoining a driveway and between the highway shoulder and right-of-way shall constitute a restricted area and may be filled in and graded only as provided in Subsection (7).
  - (4) **Drainage.** The surface of the driveway connecting with street cross sections shall slope downward and away from the highway shoulder a sufficient distance to preclude ordinary surface water drainage flowing onto the street roadbed.
  - (5) **Culverts.** Driveways shall not obstruct or impair drainage in street ditches or roadside areas. Driveway culverts, where required, shall be adequate for surface water

drainage along the street and shall not be less than the equivalent of a 12-inch diameter pipe. The distance between culverts under successive driveways shall not be less than ten (10) feet except as such restricted area is permitted to be filled in pursuant to the provisions of Subsection (7) hereof.

- (6) **Reconstruction of Sidewalks, Curb and Gutter.** When the construction of a driveway requires the removal of a curb or gutter, or both, the new connection shall be of equivalent acceptable material and the curb return shall be provided or restored in a neat, workmanlike manner. The driveway surface shall be connected with the highway or roadway pavement and the sidewalk, if any, in a neat, workmanlike manner. In the event the driveway construction shall require the replacement, removal, or reconstruction of the sidewalk area, the area formerly occupied by sidewalk may be replaced with an asphalt surface, rather than a concrete surface; however, in such event, the asphalt surface can only extend along the width of the driveway where the sidewalk would otherwise be located, and on either side of said driveway, where the driveway adjoins and meets the sidewalk, the level of the asphalt on the driveway shall be no less than one-fourth (1/4) inch above or more than one-fourth (1/4) inch below the grade of the sidewalk which adjoins either side of said driveway. No other material other than asphalt may be used to replace a sidewalk within the width of said driveway. In the event an existing sidewalk is not to be replaced or repaired when a private driveway or other driveway obtains an asphalt surface, the asphalt surface which adjoins the existing sidewalk which crosses the driveway width shall adjoin said sidewalk and be no more than one-fourth (1/4) inch above, or more than one-fourth (1/4) inch below, the grade of said sidewalk, and in no event shall a paved asphalt surface be placed over an existing sidewalk or cause the grade or level of the driveway to exceed one-fourth (1/4) inch above or below the immediate level of grade and line of the adjoining sidewalk on either side of said driveway. Standard thicknesses of driveway approaches will be six (6) inches thick.
- (7) **Restricted Areas.** The restricted area between successive driveways may be filled in and graded only when the following requirements are complied with:
- a. The filling or draining shall be to grades approved by the Director of Public Works and, except where highway drainage is by means of curb and gutter, water drainage of the area shall be directed away from the street roadbed in a suitable manner.
  - b. Culvert extensions under the restricted area shall be of the same size and of equivalent acceptable material as the culvert under the driveway. Intermediate manholes adequate for cleanout purposes may be required where the total culvert length is excessive.
  - c. Where no street side ditch separates the restricted area from the street roadbed, permanent provision may be required to separate the area from the street roadbed to prevent its use for driveway or parking purposes by construction of a border, curb, rail or posts as may be required by the Director of Public Works.

- (8) **Relocation of Utilities.** Any costs of relocating utilities shall be the responsibility of the property owner with approval of the Common Council necessary before any utility may be relocated and the driveway installed.
  - (9) **Construction Across Sidewalks.** All driveway entrances and approaches which are constructed across sidewalks shall be paved in accordance with the requirements for sidewalk construction in Section 6-2-2 of this Code insofar as such requirements are applicable, including thickness requirements, except as otherwise provided for in Section 6-3-2(a)(6).
  - (10) **Variances.** Any of the above requirements may be varied by the Common Council in such instances where the peculiar nature of the property or the design of the street may make the rigid adherence to the above requirements impossible or impractical.
- (b) **Special Requirements for Commercial and Industrial Driveways.** The following regulations are applicable to driveways serving commercial or industrial establishments:
- (1) **Width of Drive.** No part of a private driveway located within the dedicated area of a public street shall, except as hereinafter provided, have a width greater than thirty (30) feet measured at right angles to the center line of said driveway, except as increased by permissible radii. In instances where the nature of the commercial or industrial activity or the physical characteristics of the land would require a driveway of greater width than herein specified, the Common Council in its discretion may permit a driveway of additional width.
  - (2) **Angular Placement of Driveway.** The angle between the center line of the driveway and the curb line shall not be less than 45°.
  - (3) **Island Areas.** Where the public sidewalk is adjacent to the curb, an island of a minimum length of six (6) feet measured along the curb line shall be placed between each entrance to a City street. The curb shall be left intact for the length of this island. Where the public sidewalk is remote from the curb, an island of a minimum length of ten (10) feet measured along the right-of-way line shall be maintained along each entrance to the City street. All flares shall be tangent to the curb line. A curb length of not less than three (3) feet shall be left undisturbed adjacent to each property line to serve as an island area in the event an adjoining property owner applies for a driveway permit to serve his property.
- (c) **Special Requirements for Residential Driveways.** The following regulations are applicable to driveways serving residential property:
- (1) Unless special permission is first received from the Common Council, or committee thereof, a residential single-type driveway shall be no greater than eighteen (18) feet wide at the curb line and fifteen (15) feet wide at the outer or street edge of the sidewalk; residential double-type driveways shall be no greater than twenty-four (24) feet wide at the curb line and eighteen (18) feet wide at the outer or street edge of the sidewalk.
  - (2) **Angular Placement.** The center line of the drive may be parallel to the property line of the lot where access is required or at right angles to the curb line.

- (d) **Appeal from Permit Refusal.** Any person feeling himself aggrieved by the refusal of the City Clerk to issue a permit for a private driveway may appeal such refusal to the Common Council within twenty (20) days after such refusal to issue such permit is made.
- (e) **Prohibited Driveways.**
- (1) No person, firm or corporation shall place, construct, locate in, or cause to be placed, constructed or located in, any obstruction or structure within the limits of any public road, highway or street in the City of Washburn except as permitted by this Section. As used herein the word "structure" includes private driveways, a portion of which extends into any public road, highway or street, and which is in non-conformance with this Chapter.
  - (2) No driveway shall be closer than fifteen (15) feet to the extended street line at an intersection. At street intersections a driveway shall not provide direct ingress or egress to or from the street intersection area and shall not occupy areas of the roadway deemed necessary by the City for effective traffic control or for highway signs or signals.
  - (3) The grade of that portion of any private driveway or pedestrian path located within the limits of any public road, highway or street shall be such as shall meet the grade of the existing public roadway at its edge and not cause an obstruction to the maintenance or clearing of such public roadway.
  - (4) No driveway apron shall extend out into the street further than the facing of the curb and under no circumstances shall such driveway apron extend into any gutter area. All driveway entrances and approaches shall be constructed as not to interfere with the drainage of streets, side ditches or roadside areas, or with any existing structure on the right-of-way.
  - (5) No portion of any curb, parapet or retaining wall, rising above the grade of the driveway, erected by the owner of the premises involved shall extend beyond the culvert spanning the water course located in such public way.

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**CITY OF WASHBURN**  
**Office of Director of Public Works**  
**502 W Bayfield St**  
**P.O. Box 638**  
**Washburn, WI 54891**



**Mobile 715-292-1205**  
**Office 715-373-6160**  
**Office 715-373-6161**  
**FAX 715-373-6148**

4/20/2021

Tammy Demars  
City of Washburn

RE: City of Washburn Driveway Permit  
Paul Haugen  
701 Hillside Dr.  
Washburn WI 54891

Request for installation of said second driveway entrance onto Hillside Dr.

1. Per Ordinance 6-3-2 a (5) No culvert is required after inspection 4-20-2021 conducted by Department of Public Works.
2. Existing Drive does comply with Ordinance 6-3-2c (1),
3. Per Ordinance 6-3-2 (1) your request for second entrance to property does meet this requirement of separation of 15ft.
4. Per Ordinance 6-3-2 a (4) Installation will **not** met recommended backslope per City of Washburn Ordinance, Installation is approved with condition an Impervious Surface is installed from edge of Roadway Hard Surface to extend pass Right of Way approx. 40' in length of new drive and is maintained throughout its intended use as primary/Secondary drive.
5. Department of Public Works Recommends proposed Second Drive entrance not to exceed a width of 18'ft @ Center Line of Ditch, Mr. Haugen will need to make contact with Director of Public Works prior to Installation due to slope of existing area to ensure proper watershed not to interfere with roadway or snowplowing.

Page 1 of 2

6. Per Ordinance 6-3-2a (2) proposed new Driveway entrance onto Hillside Dr. will need approval from City Council prior to permit being valid, Washburn Department of Public Works find no other contradictions to ordinance 6-3-1 Driveway Permit Required or 6-3-2 Driveway Location Design, and Construction Requirements and is here by approved with the Approval of City of Washburn Council
7. On 4-21-2021 Permit Conditions were explained to Mr. Haugen via phone conversation @ 9:30am and agreed to conditions of permit moving forward.

Feel free to contact me for additional information if required.

Gerald J Schuette

Gerald J Schuette  
Director of Public Works

Page 2 of 2



# CITY OF WASHBURN DRIVEWAY PERMIT APPLICATION

Driveway Permit (Section 6-3-1(c), Code of Ordinances)  
(No charge if applied for with building permit for new structure construction)

\$25.00 if permeable surface used

\$50.00 if impervious surface used

Complete the following with name, address, & phone

Property Owner(s): PAUL HAUSEN  
Street Address: 701 HILLSIDE DRIVE, WASHBURN, WI 54891  
Mailing Address: SAME AS ABOVE  
Home Phone: (715) 575-4184 Business Phone: NA ( )

Existing Driveway on Property Yes  No  Existing Sidewalk on Property Yes  No   
Location of Planned Driveway: Street  Avenue  Alley

*SEE ATTACHED* (A DRAWING MUST BE ATTACHED TO THE APPLICATION DEPICTING STREET, ALLEY, AND/OR AVENUE ADJACENT THE PROPERTY, AND INCLUDING ALL STRUCTURES AND LOCATION OF INGRESS/EGRESS)

Description of work - width, length, material used \_\_\_\_\_  
Estimated Project Cost \$1,000.00 or less

I agree to comply with all applicable codes, statutes and ordinances and with the conditions of this permit; understand that the issuance of the permit creates no legal liability, express or implied, on the State of Wisconsin or the City of Washburn; and certify that all of the above information is accurate. I also agree to abide by any special condition or restriction placed on me by this permit.

Applicant Signature: Paul Hausen Date: 4-20-21

CULVERT STATUS		NONE _____ NEW _____	EXISTING _____ TEMPORARY _____	CULVERT SPECIFICATIONS
<u>DIAMETER</u>		<u>LENGTH</u>		CULVERT TYPE
NONE	_____			GALVINIZED _____
8 INCH	_____	10-15 FEET	_____	PLASTIC _____
10 INCH	_____	15-20 FEET	_____	END SECTIONS REQUIRED
12 INCH	_____	20-25 FEET	_____	YES _____
15 INCH	_____	25-30 FEET	_____	NO _____
18 INCH	_____	30-35 FEET	_____	
21 INCH	_____	35-40 FEET	_____	
24 INCH	_____	OTHER	_____	

Municipal Approval \_\_\_\_\_ Date \_\_\_\_\_

CONDITIONS OF APPROVAL This permit is issued pursuant to the following conditions. Failure to comply with these conditions may result in suspension or revocation of this permit or other penalty.

See attached documents

CITY OF WASHBURN DRIVEWAY PERMIT APPLICATION  
PAUL C HAUGEN  
701 HILLSIDE DRIVE  
WASHBURN, WI 54891

I am requesting to be permitted to create a second driveway on my property primarily for the purpose of leading to my new main entrance on the west side of my home and secondly for ease of getting boats and trailers in and out of my property. Additionally, my intent is to have the ability to wrap around the back of my home to the existing driveway. I intend to use the new driveway all year around and the existing driveway seasonally during the warmer months of the year.

Width: Approximately 12'

Length: Approximately 200'

Material: Property is primarily sand which should suffice but I may opt to add a top layer of gravel.

Cost: Minimal relating to cost of any gravel used. I would cut grade with my tractor.

Culvert Analysis: The proposed driveway would enter my property at the crest of west Hillside drive supported by measurement with level devices. Furthermore, having no culvert would more easily allow for the new driveway entrance to be below street shoulder level as specified under Sec. 6-3-2.

Thank you for considering my request.

PAUL HAUGEN  
701 HILLSIDE DRIVE

4-20-21

DRIVEWAY PERMIT APPLICATION



Bayfield County Land Records and GIS 1.3

[Land Records Home] [Help]



47' 125' 57'

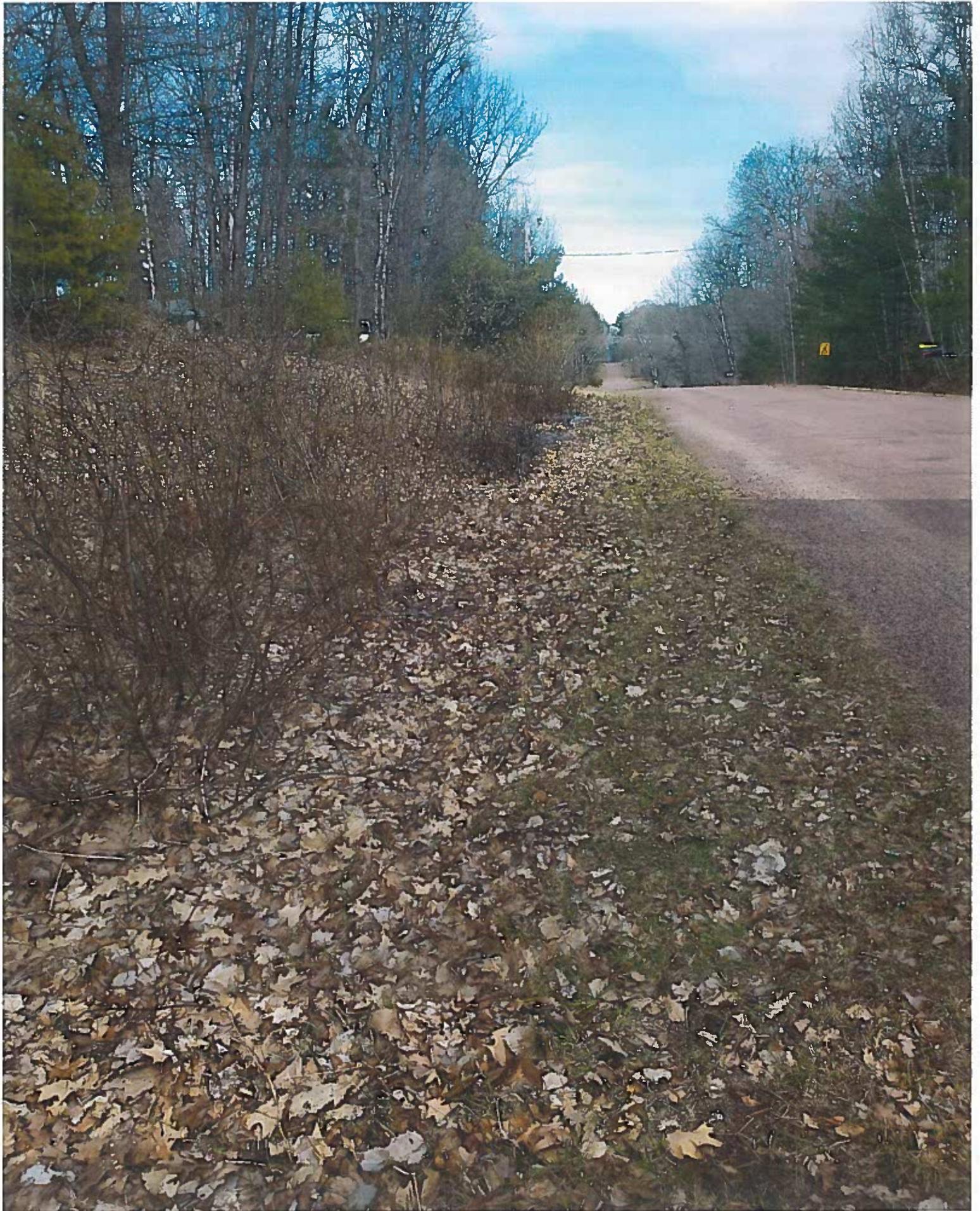
CREST OF WEST HILLSIDE DRIVE

PROPOSED DRIVEWAY

EXISTING DRIVEWAY



812 735.9696 492 378 1735 Feet







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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**

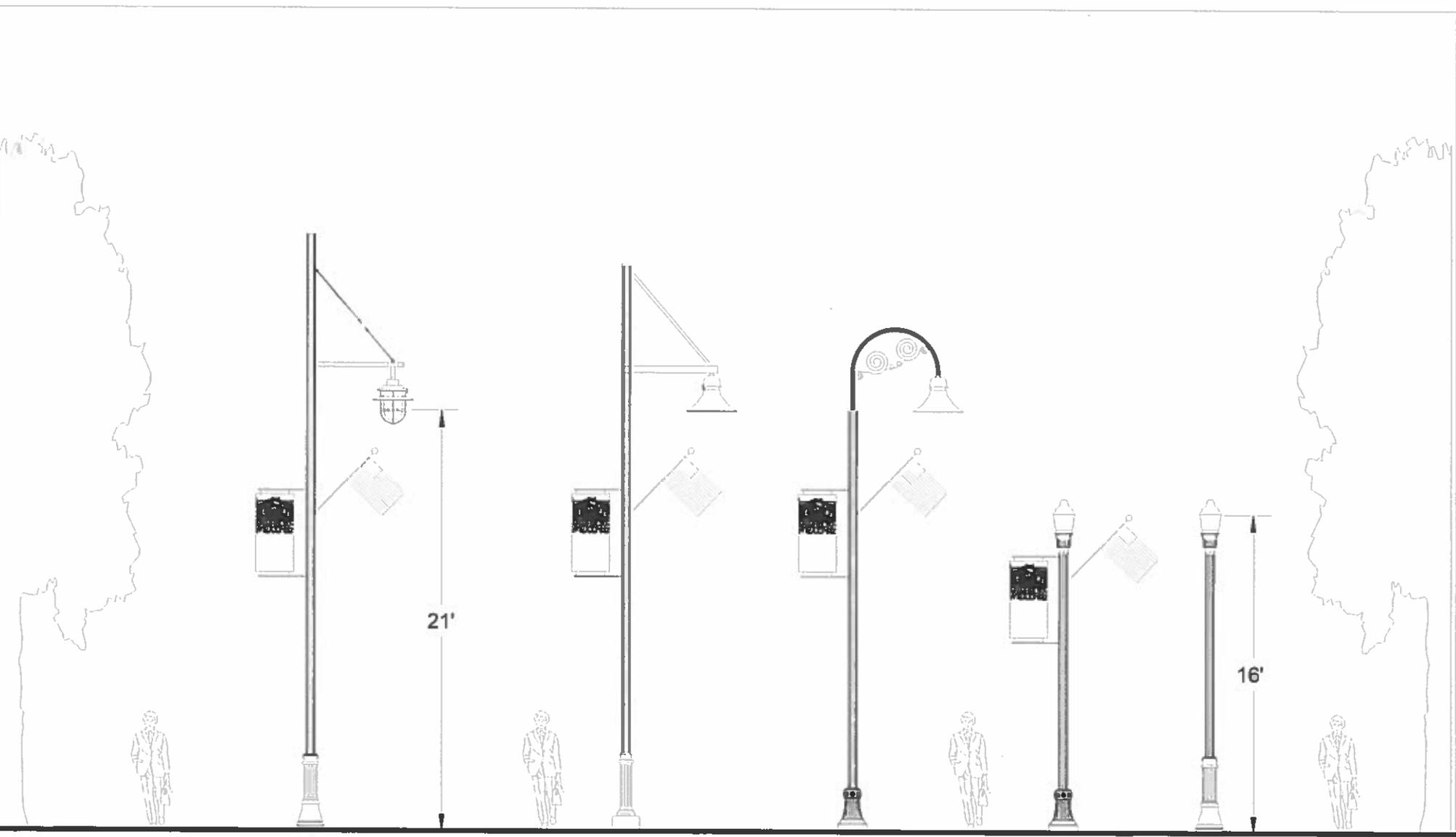
To: Honorable Mayor and City Council Members  
From: Scott J. Kluver, <sup>SK</sup>Administrator  
Re: Bayfield Street Project - Streetlights  
Date: April 20, 2021

Enclosed is an updated rendering of the proposed street light options for the Bayfield Street Project. To make the style selection that you prefer, please follow the decision matrix which is the next document. You may also wish to consider cost, which is also included.

It is our intention to post this information on our website and do a Facebook post to get public comment as well. We will do our best of compile that information prior to the meeting. We will not have the time or ability to do this in a scientific manner.

## Decorative Lighting Decision Matrix

1. Select fixture orientation
  - a. Pendant style (Options 1 & 2)
  - b. Post top style (Option 3)
  - c. Comments?
2. If pendant style then select one of the following 2 light fixtures
  - a. Marina (Option 1)
  - b. GlassWerks (Option 2)
  - c. Comments?
3. If pendant style then select one of the following 3 arm options
  - a. Round horizontal arm (Option 1)
  - b. Flat rectangular arm (Option 2a)
  - c. Candy cane arm (Option 2b)
  - d. Comments?
4. If horizontal arm select type of bracing back to pole
  - a. Cable brace (Option 1)
  - b. Rigid brace (Option 2a)
  - c. Comments?
5. Select the style of decorative base
  - a. Charleston Base (Options 1, and 3b)
  - b. Hamilton Base (Option 2a)
  - c. North Yorkshire Base (Options 2b and 3a)
  - d. Comments?

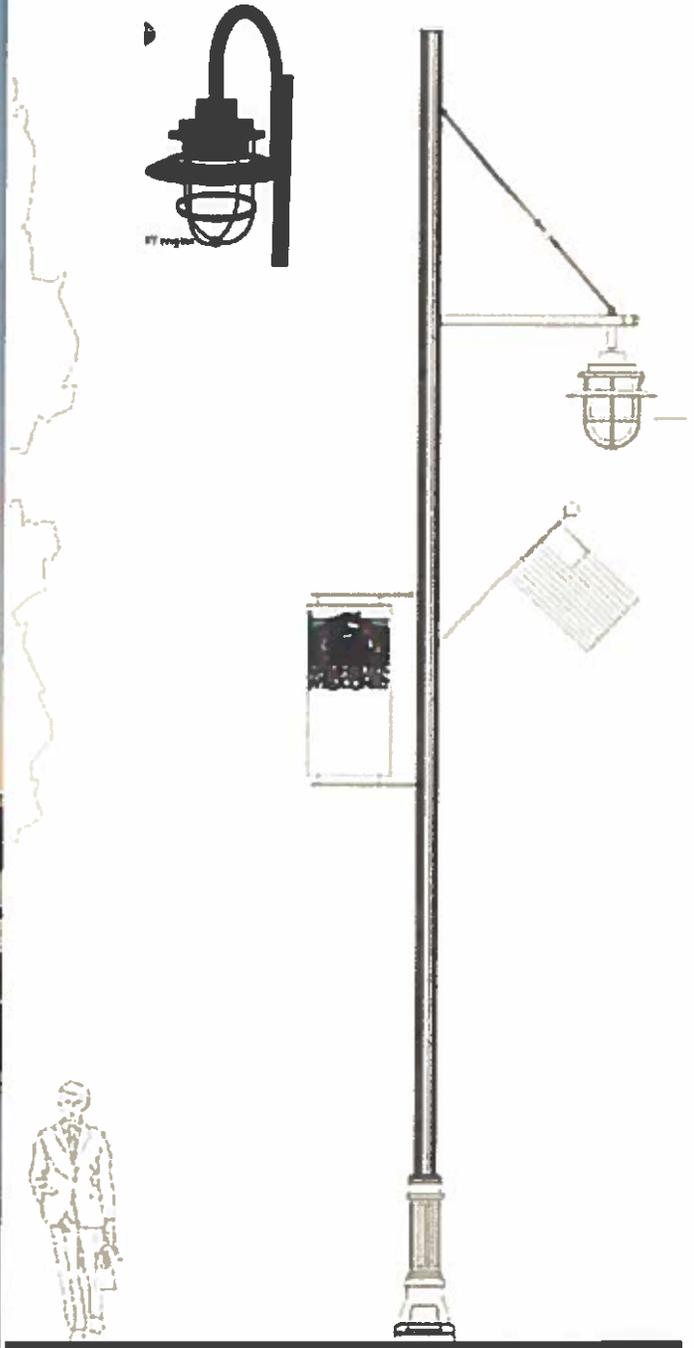
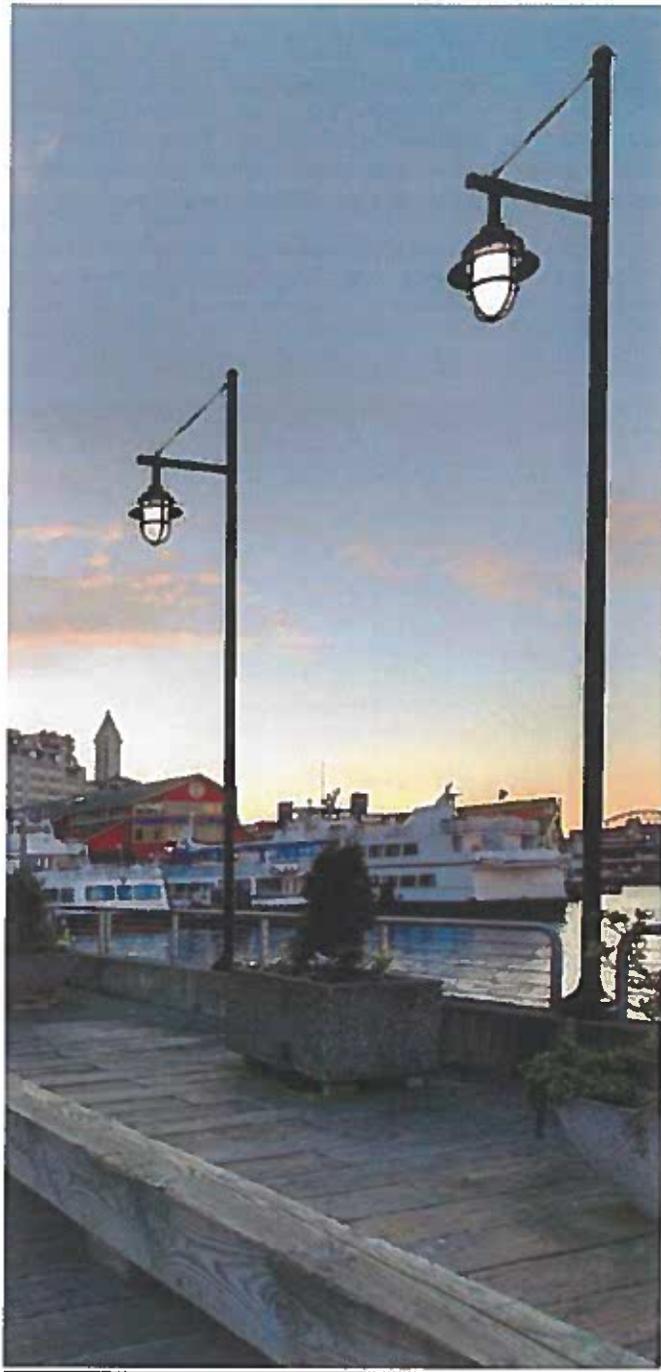


**OPTION 1  
MARINA**

**OPTION 2a  
GLASSWERKS**

**OPTION 2b  
GLASSWERKS**

**OPTION 3  
GRANVILLE**



OPTION 1 – MARINA FIXTURE

**Option 1 Marina Features:**

- ◆ Nautical Theme Pendant Style fixture†
- ◆ Flat Glass Lens
- ◆ 3K-4K Temperature Color
- ◆ 21 FT Mounting Height
- ◆ Cable Anchor to Pole Top†
- ◆ Charleston Decorative Base†
- ◆ Flag Holders†
- ◆ Black Finish Color
- ◆ Energy Efficient LED Lighting
- ◆ Dark Sky Compliant
- ◆ Dimmable
- ◆ 4 FT Long Round Horizontal Arm†
- ◆ SiteLink Fluted Decorative Pole
- ◆ Banners†
- ◆ Aluminum Construction

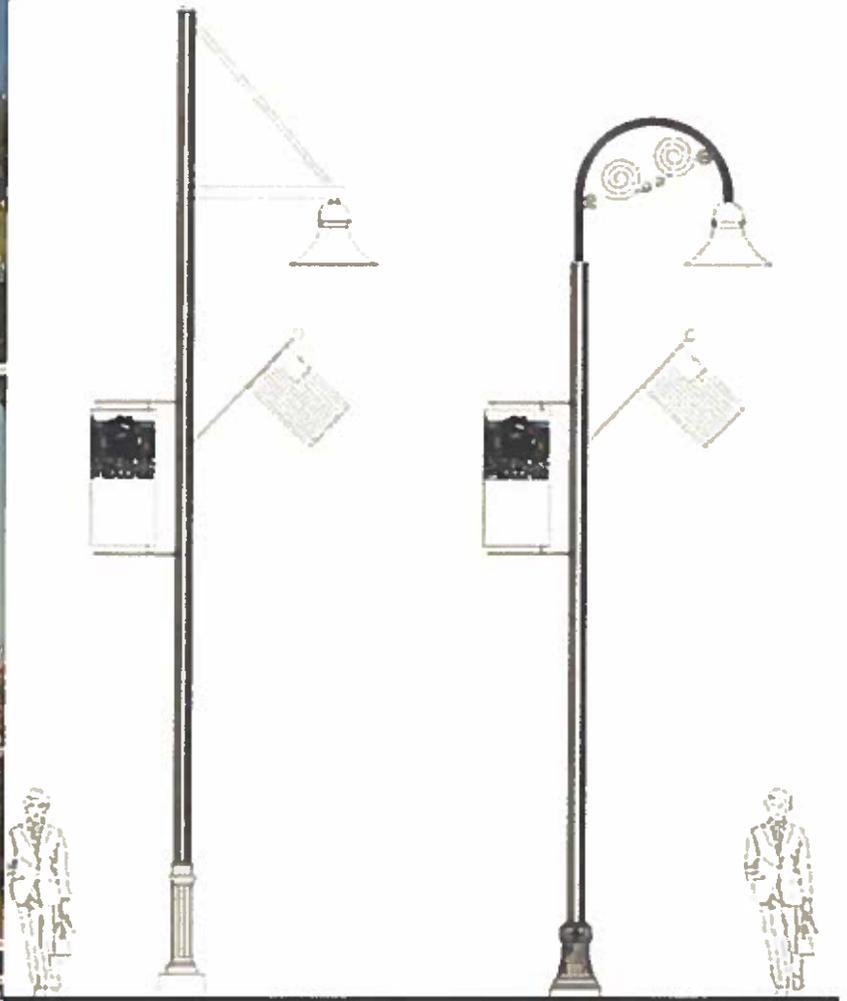
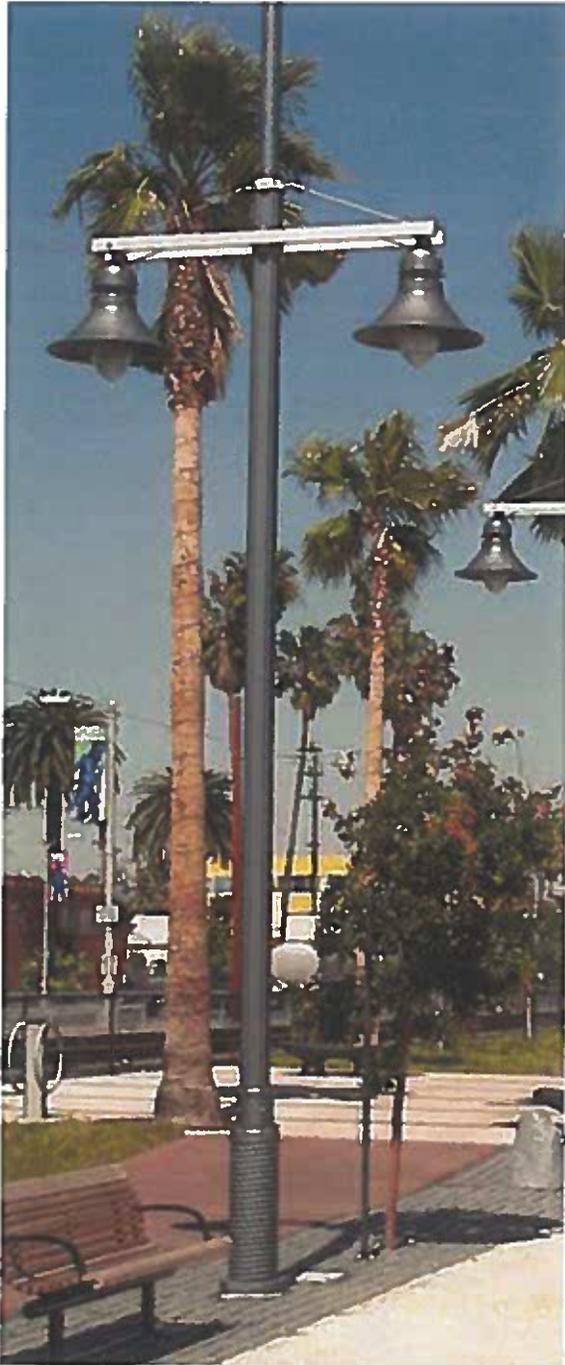
† Interchangeable items

**Advantages:**

- ◆ Nautical Theme
- ◆ Soft Color Temperature
- ◆ Corrosion Resistant Aluminum
- ◆ 125' Alternating Pole Spacing
- ◆ Energy Efficient LED
- ◆ Dark Sky Compliant
- ◆ Dimmable
- ◆ Not the costliest Alternative

**Disadvantages:**

- ◆ Flat Glass Lens (Globe disperses light too greatly)
- ◆ Not the least costly Alternative



**OPTION 2a  
GLASSWERKS**

**OPTION 2b  
GLASSWERKS**

**OPTION 2 – GLASWERKS FIXTURE**

### Option 2 GlasWerks Features:

- ◆ Pendant Euro Style fixture†
- ◆ Flat Glass Lens
- ◆ 3K-4K Temperature Color
- ◆ 21 FT Mounting Height
- ◆ 2a=Round Rod Anchor to Pole Top†
- ◆ 2a=Hamilton Decorative Base†
- ◆ Flag Holders†
- ◆ Black Finish Color
- ◆ Aluminum Construction
- ◆ Energy Efficient LED Lighting
- ◆ Dark Sky Compliant
- ◆ Dimmable
- ◆ 2a=4 FT Long Square Horizontal Arm†
- ◆ 2b=Candy Cane Arm†
- ◆ 2b=North Yorkshire Base†
- ◆ SiteLink Fluted Decorative Pole
- ◆ Banners†
- ◆

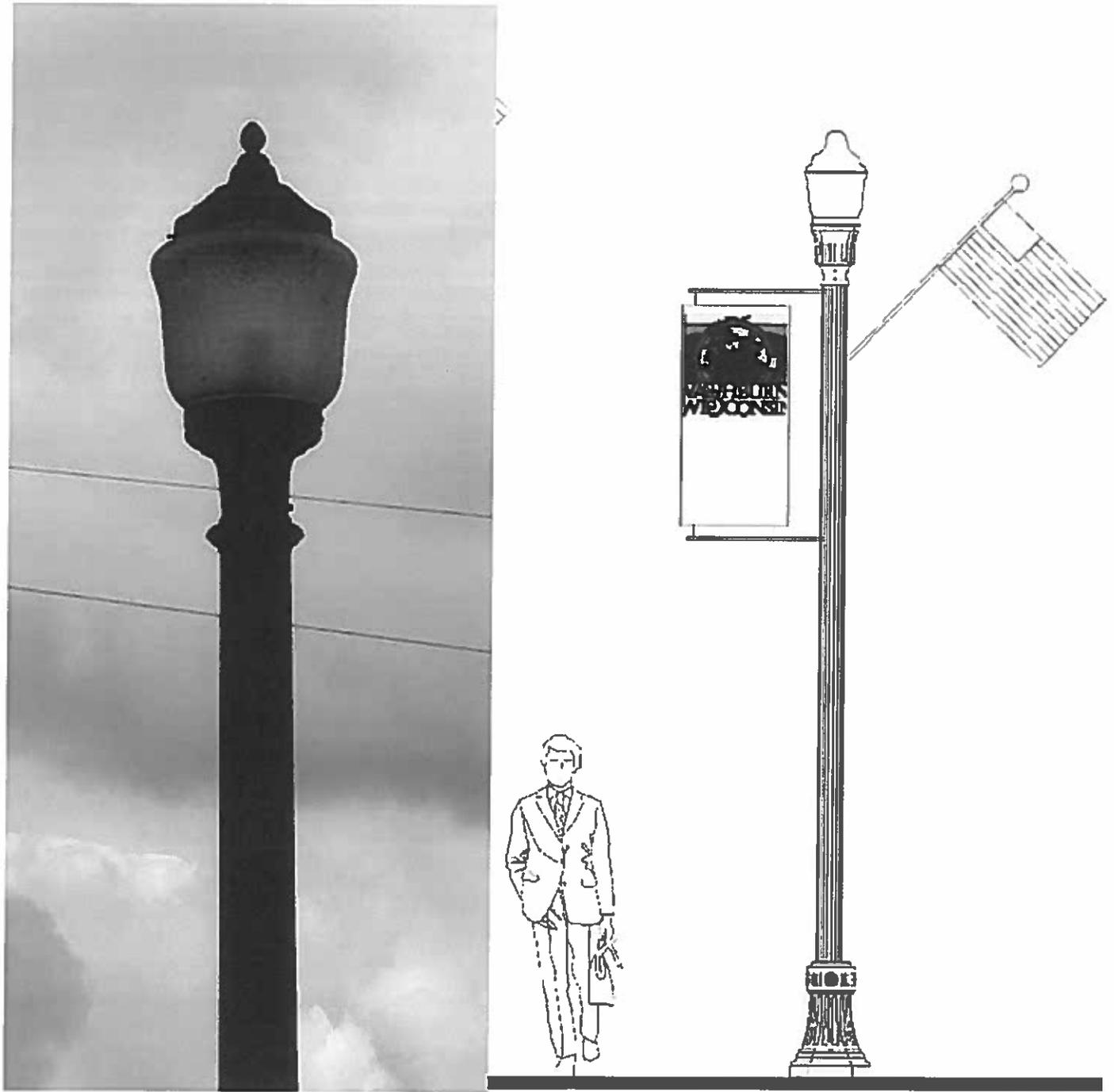
† Interchangeable items

### Advantages:

- ◆ Soft Color Temperature
- ◆ Corrosion Resistant Aluminum
- ◆ 135' Alternating Pole Spacing
- ◆ The least costly Alternative
- ◆ Energy Efficient LED
- ◆ Dark Sky Compliant
- ◆ Dimmable

### Disadvantages:

- ◆ Flat Glass Lens (Globe disperses light too greatly)
- ◆ Not as Nautical as Option 1



OPTION 3 – GRANVILLE FIXTURE

**Option 3 Granville Features:**

- ◆ Post Top Style fixture†
- ◆ Historic Washburn Glass Globe
- ◆ 3K-4K Temperature Color
- ◆ 16 FT Mounting Height
- ◆ North Yorkshire Decorative Base†
- ◆ Flag Holders†
- ◆ Black Finish Color
- ◆ Energy Efficient LED Lighting
- ◆ Dark Sky Compliant (with Cover)
- ◆ Dimmable
- ◆ SiteLink Fluted Decorative Pole
- ◆ Banners†
- ◆ Aluminum Construction

† Interchangeable items

**Advantages:**

- ◆ Historic Washburn Theme
- ◆ Soft Color Temperature
- ◆ Dimmable
- ◆ Energy Efficient LED
- ◆ Corrosion Resistant Aluminum

**Disadvantages:**

- ◆ Short Mounting Height (Decreased spacing)
- ◆ 70' Alternating Pole Spacing
- ◆ Not a nautical theme
- ◆ The costliest Alternative



**PUBLIC WORKS IMPROVEMENT  
OPINION OF PROBABLE CONSTRUCTION COST**

**Bayfield Street Decorative Lighting (6th Ave W- 1st Ave E)**

Date: March 29, 2021

**City of Washburn**

Estimator: MCS

3600 Ft. Long

DESCRIPTION	UNITS	APPROX. QUANTITY	UNIT PRICE	TOTAL PRICE
<b>OPTION 1 (MARINA FIXTURE 21 FT)</b>				
Marina Fixture, Site Link Pole, Festoon	Each	32	\$8,000.00	\$256,000.00
Concrete Base Type 5	L.F.	32	\$750.00	\$24,000.00
Electrical Wire Lighting 12 AWG	L.F.	3000	\$0.75	\$2,250.00
Electrical Wire Festoons 12 AWG	L.F.	1700	\$0.75	\$1,275.00
Electrical Wire Lighting 8 AWG	L.F.	21600	\$1.10	\$23,760.00
Electrical Wire Festoons 6 AWG	L.F.	11000	\$1.25	\$13,750.00
Electrical Wire Festoons 4 AWG	L.F.	11000	\$1.85	\$20,350.00
Pull Boxes Steel 24x42-Inch	Each	38	\$800.00	\$30,400.00
Conduit Rigid Nonmetallic Schedule 40 2-Inch	L.F.	8100	\$6.50	\$52,650.00
Electrical Service Meter Breaker Pedestal	Each	2	\$1,000.00	\$2,000.00
Concrete Control Cabinet Bases Type L30	Each	2	\$1,500.00	\$3,000.00
Lighting Control Cabinet 120/240 L30	Each	2	\$6,000.00	\$12,000.00
Contingency (10%)				\$44,000.00
3-Year Inflation (3% Annually)				\$45,000.00
Approximate WisDOT Credit				(\$120,000.00)
<b>TOTAL ESTIMATED OPTION 1 COST</b>				<b>\$410,000.00</b>
<b>OPTION 2 (GLASWERKS FIXTURE 21 FT)</b>				
Glaswerks Fixture, Site Link Pole, Festoon	Each	29	\$7,000.00	\$203,000.00
Concrete Base Type 5	L.F.	29	\$750.00	\$21,750.00
Electrical Wire Lighting 12 AWG	L.F.	2700	\$0.75	\$2,025.00
Electrical Wire Festoons 12 AWG	L.F.	1600	\$0.75	\$1,200.00
Electrical Wire Lighting 8 AWG	L.F.	21600	\$1.10	\$23,760.00
Electrical Wire Festoons 6 AWG	L.F.	11000	\$1.25	\$13,750.00
Electrical Wire Festoons 4 AWG	L.F.	11000	\$1.85	\$20,350.00
Pull Boxes Steel 24x42-Inch	Each	38	\$800.00	\$30,400.00
Conduit Rigid Nonmetallic Schedule 40 2-Inch	L.F.	8100	\$6.50	\$52,650.00
Electrical Service Meter Breaker Pedestal	Each	2	\$1,000.00	\$2,000.00
Concrete Control Cabinet Bases Type L30	Each	2	\$1,500.00	\$3,000.00
Lighting Control Cabinet 120/240 L30	Each	2	\$6,000.00	\$12,000.00
Contingency (10%)				\$39,000.00
3-Year Inflation (3% Annually)				\$39,000.00
Approximate WisDOT Credit				(\$120,000.00)
<b>TOTAL ESTIMATED OPTION 1 COST</b>				<b>\$340,000.00</b>
<b>OPTION 3 (POST TOP HISTORICAL FIXTURE 16 FT)</b>				
Post Top Fixture, Site Link Pole, Festoon	Each	57	\$5,000.00	\$285,000.00
Concrete Base Type 5	L.F.	57	\$750.00	\$42,750.00
Electrical Wire Lighting 12 AWG	L.F.	5300	\$0.75	\$3,975.00
Electrical Wire Festoons 12 AWG	L.F.	3100	\$0.75	\$2,325.00
Electrical Wire Lighting 8 AWG	L.F.	21600	\$1.10	\$23,760.00
Electrical Wire Festoons 6 AWG	L.F.	14700	\$1.25	\$18,375.00
Electrical Wire Festoons 4 AWG	L.F.	14700	\$1.85	\$27,195.00
Pull Boxes Steel 24x42-Inch	Each	38	\$800.00	\$30,400.00
Conduit Rigid Nonmetallic Schedule 40 2-Inch	L.F.	8100	\$6.50	\$52,650.00
Electrical Service Meter Breaker Pedestal	Each	2	\$1,000.00	\$2,000.00
Concrete Control Cabinet Bases Type L30	Each	2	\$1,500.00	\$3,000.00
Lighting Control Cabinet 120/240 L30	Each	2	\$6,000.00	\$12,000.00
Contingency (10%)				\$50,000.00
3-Year Inflation (3% Annually)				\$51,000.00
Approximate WisDOT Credit				(\$120,000.00)
<b>TOTAL ESTIMATED OPTION 1 COST</b>				<b>\$480,000.00</b>

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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 <sup>SK</sup>  
Re: Bayfield County Resolution on EMS Study Committee  
Date: April 18, 2021

Enclosed you will find a draft resolution sponsored by Bayfield County to create an EMS Study Committee to gather information, review, and plan to maintain and sustain EMS service within all of Bayfield County. Recently, some locations in Ashland County were left without service, and one of the goals is to avoid having that happen in Bayfield County.

As proposed, there would be two City representatives (presumably one from Bayfield and one from Washburn) among other representatives. There is time in making that selection, which would likely follow the same general process of a Mayoral nomination with Council confirmation.

I recommend that the City approve this resolution and participate. That being said, the City should continue its own efforts in seeking to maintain a sustainable ambulance service, which is already underway. Recommendations may be coming forward in the next month or two.



**Bayfield County Administrator**  
117 E 5<sup>th</sup> Street, PO Box 878, Washburn, WI 54891  
Ph: 715-373-6181    Fax: 715-373-6153

Mark Abeles-Allison, *County Administrator*  
Kristine Kavajecz, *Human Resources Director*  
Paige Terry, *Clerk*

To: Bayfield County EMS Council  
Bayfield County Towns  
Red Cliff Band of Lake Superior Chippewa  
City of Washburn  
City of Bayfield  
Village of Mason

Re: Advisory EMS Study Committee Inquiry

From: Mark Abeles-Allison, Bayfield County Administrator

Date: April 1, 2021

---

Over the past several years, Bayfield County has heard various concerns from county EMS providers regarding staffing and the decreased enrollment of volunteers. Recently these concerns have increased as COVID has impacted staffing, and at the same time, several towns in Ashland County are without EMS service.

Bayfield County understands that EMS is a municipal service and is willing to facilitate a study committee to gather information, research options, and develop a long-range plan. Bayfield County has a history of yearlong advisory committees with CAFO and CWD study committees over the past five years.

Attached is a DRAFT resolution establishing a committee.

Please review this and share your thoughts with the County, the Towns Association, or the EMS Council. We have proposed a September 2021 start date.

Please respond by May 30 with your thoughts.

Thank you! If you have any questions please call me at 715 373 6181 or via email, [mark.abeles-allison@bayfieldcounty.wi.gov](mailto:mark.abeles-allison@bayfieldcounty.wi.gov)

**DRAFT DRAFT DRAFT**



# Resolution

**No. 2021-xx**

**Bayfield County Towns Association, The Cities of Washburn and Bayfield, The Village of Mason, Bayfield County Emergency Medical Council, The Red Cliff Tribe and Bayfield County Government  
Joint Advisory Study Committee Resolution**

**WHEREAS**, Emergency Medical Services are critical to Bayfield County; *and*,

**WHEREAS**, Bayfield County is fortunate to have nine top quality EMS agencies serving the County; *and*,

**WHEREAS**, Changing demographics and the pandemic are creating challenges to EMS Agency operations across the county, region and State; *and*,

**WHEREAS**, other Wisconsin counties, Ashland and Florence Counties are struggling to deliver services to all their residents; and Sawyer County to the south has had a County Wide EMS system in place for many years; *and*,

**WHEREAS**, all three parties agree that focused study, evaluation and dialogue amongst the parties is important to the long-term success of EMS in Bayfield County; *and*,

**WHEREAS**, The Town's Association, the Cities of Washburn and Bayfield, the Red Cliff Tribal Council, the Bayfield EMS Council and Bayfield County Board of Supervisors are willing to put forth the time and effort and work together for the betterment of countywide communities; *and*,

**NOW, THEREFORE, BE IT RESOLVED**, The Bayfield County Towns Association, the Cities of Washburn and Bayfield, the Red Cliff Tribal Council, the Bayfield County EMS Council and the Bayfield County Board of Supervisors agree to establish a joint Advisory Committee beginning in September of 2021; *and*,

**BE IT FURTHER RESOLVED**, the mission of the Committee shall be to:

Determine the strengths and weaknesses of Bayfield County Emergency Services, propose recommendations to ensure continued and successful operations over the next 10 years and establish an action plan to carry out those activities; *and*,

**BE IT FURTHER RESOLVED**, that the Committee shall meet as necessary in September, October, and November of 2021 and January, February, and March of 2022, and at other times as necessary and shall submit a final report by May 31, 2022; *and*,

**BE IT FURTHER RESOLVED**, that the Committee shall be made up of 15 members including the following:

- 3 Town Representatives
- 2 City Representatives

- 4 EMS Agency Representatives
- 2 County Board Representatives
- 1 Village Representative
- 2 Citizen Representatives
- 1 Tribal Representative; *and,*

**BE IT FURTHER RESOLVED**, that each of the seven entities shall select their own members. Applications shall be taken by Bayfield County for the two Citizen Representatives. The seven entities shall review applications and choose 2 citizen members via consensus to participate on the committee. *and,*

**BE IT FURTHER RESOLVED** that the committee shall elect a chair and vice-chair to organize meeting agendas with the first meeting being an organizational and planning meeting; *and,*

**BE IT FURTHER RESOLVED** that Bayfield County commits to provide a location, staffing and meeting agenda organizational assistance during these meetings.

By Action of the:  
**Bayfield County Board of Supervisors**

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Dennis M. Pocernich, *Chair*

**Bayfield County Towns Association**

---

Tony Johanik, *Chair*

**Bayfield County Emergency Medical Services Council**

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Tam Hoffman, *President*

**Village of Mason**

---

David Larson, Village President,

**City of Bayfield**

---

Gordy Ringberg, Mayor

**City of Washburn**

---

Mary Motiff, Mayor

**Red Cliff Band of Lake Superior Chippewa**

---

Richard Peterson, Tribal Chair

STATE OF WISCONSIN )  
 ) ss.  
COUNTY OF BAYFIELD )

I, Lynn M. Divine, Bayfield County Clerk, hereby certify that the foregoing is a true and correct copy of Resolution No. 2021-xx, Volume 29, adopted by the Bayfield County Board of Supervisors at their meeting held on the xx day of xxx 2021.

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Lynn M. Divine, *Bayfield County Clerk*

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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: <sup>SSK</sup> Scott J. Kluver, Administrator  
Re: Resolution on Shared Revenue  
Date: April 20, 2021

Enclosed you will find a draft resolution to encourage the Legislature to increase the Shared Revenue Program for municipalities. I can not say what the status of the proposed state budget will be by the time of the meeting, but if it is still undecided, I encourage the Council to pass this resolution.

While Shared Revenue currently makes up over 26 percent of the City's operating budget revenues, we are getting less than we received 20 years ago. As noted in the resolution, the program has been slashed several times which has significantly impacted City operations. This, coupled with levy limits, have been a significant portion of the limitations and cutbacks we have had to deal with in the budget for the past 15 years.

**COMMON COUNCIL FOR THE  
CITY OF WASHBURN, WISCONSIN**  
Resolution No. 2021-004

**Requesting Increased Funding of the Shared Revenue Program**

**WHEREAS**, for over ninety years the state shared revenue program has been a key component of Wisconsin's state and local relationship and an important part of the state's overall program of property tax relief; and

**WHEREAS**, over the last 20 years shared revenue funding for municipalities has been cut by \$94 million; and

**WHEREAS**, over the last generation, property taxes have grown as a share of city and village revenues as shared revenue and other state aid to Wisconsin municipalities has lagged; and

**WHEREAS**, state aid provided a larger share of municipal revenues in Wisconsin than property taxes from 1975 to 1997. Today property taxes account for more than twice as much municipal revenue as state aid; and

**WHEREAS**, to create and maintain quality communities that attract businesses and families, municipalities must invest in services and infrastructure that people and businesses expect, like police protection, fire suppression, road maintenance, snowplowing, libraries, and parks;

**WHEREAS**, the state should reinvest a portion of its sales and income tax revenue growth in local communities to spur further economic growth and make Wisconsin communities places where people want to live and work

**NOW, THEREFORE BE IT RESOLVED**, that the Common Council of the City of Washburn calls on the Legislature to pass a state budget increasing funding for the shared revenue program and directs the Clerk to send a copy of this resolution to the state legislators representing the City of City of Washburn, to Governor Tony Evers, and to the League of Wisconsin Municipalities.

Adopted by the Common Council for the City of Washburn, Wisconsin this the 10th day of May, 2021.

---

Mary D. Motiff, Mayor

STATE OF WISCONSIN     )  
  )  
COUNTY OF BAYFIELD    )

I hereby certify that the foregoing resolution is a true, correct and complete copy of a Resolution #2021-004 duly and regularly adopted by the Common Council for the City of Washburn on the 10th day of May 2021 and that said resolution has not been repealed or amended, and is now in full force and effect.

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Scott J. Kluver, City Clerk

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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, <sup>SK</sup> Administrator  
**Re:** Special Event Request – North Coast Car Show  
**Date:** April 18, 2021

Enclosed you will find various request to restrict parking on certain streets for the North Coast Car Show which this year will be held at the Harbor View Event Center. This request has been reviewed by Chief Johnson, and there is no objection. If approved, emergency services will be notified of the closure.

Know that at this time, I have not received any other special requests related to activities for the 2021 Brownstone Days events.

April 15, 2021

To: Mayor Motiff and Washburn City Council

The annual North Coast Car Show will be held on Saturday, July 24, 2021 from 9am to 3:00pm at the new location of 130 W. Harbor View Drive. Past shows have shown us that parking for spectators can cause congestion on the streets, to ensure that all emergency vehicles can get through and pedestrians are able to walk safely, we are asking the City to place no parking signs along the West side of S. Second Avenue West and the South Side of Harbor View Drive from Second Avenue South to Central Avenue.

Sincerely,



Tammy DeMars

For North Coast Car Show

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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, <sup>SK</sup>Administrator  
Re: Temporary Street Closure  
Date: April 20, 2021

Please see the attached request to temporarily close Central Avenue on Saturday, May 22<sup>nd</sup> from 3:00 to 7:00 from Bayfield Street north to the alley. Staff has no issue with the request. I recommend approval.

TO: Scott J. Kluver, Administrator

City of Washburn

FROM: Karen S. Novachek, representing Washburn Heritage Association

SUBJECT: Street Closure Request-May 22, 2021 from 3pm to 7pm

The Washburn Heritage Association (WHA), a private, non-profit local organization, is requesting a street closure on Saturday, May 22, 2021 from the hours of 3pm to 7pm for the purpose of celebrating May Preservation Month. The event will originate near the Club and will include a small music group, gathering of participants to listen to music and dancing. The closure request is for Central Avenue from the alley behind the Club and Cultural Center to Bayfield Street from the hours between 3pm and 7pm.

This request is not in conflict with federal or state laws and complies with all local ordinances. In addition, the closure will not hinder the movement of police, fire or emergency vehicles.

WHA will consult with the Bayfield County Health Department regarding the event to ensure that all health safety precautions are followed.

WHA will remove all vehicles, equipment and property associated the event.

Thank you for your consideration of this request.

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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 *Tony*  
Re: Special Event Request – Brownstone Block Party  
Date: April 20, 2021

Enclosed you will find a request from the Washburn Chamber related to the Brownstone Block Party (July 23-25, 2021). These requests have been reviewed by Chief Johnson. It should also be clarified that open container is only along Bayfield Street and it goes from alley to alley, except where otherwise designated. Please let me know if you have any questions on this request. The Chamber will be responsible for covering the event on their insurance.



April 19, 2021

Mayor Motiff and Councilors,

Please accept this communication as our official request for the following items to be considered at the next available council meeting in regards to this year's Brownstone Block Party.

- 1.) Relaxation of the open container and noise ordinance beginning July 24, 2021 and ending at 5PM on July 26 between 9<sup>th</sup> Ave. W. and Central Ave. along Bayfield St. Also, the open container to be 9AM on Friday, until 4AM on Saturday, 9AM on Saturday until 4AM on Sunday, and from 9AM until 5PM on Sunday.
- 2.) Exclusive Chamber use of Wikdal Park beginning at 7AM on July 24 and ending at 5PM on July 25.
- 3.) Use of Thompson's West End Park and pavilion beginning at 10AM on July 25 and ending at 5PM the same day.
- 4.) Use of West End Park on July 24 at 7:30AM until 12PM to accommodate the Scavenger Hunt.
- 5.) Request of the closure of the following streets:
  - a. South 4<sup>th</sup> Ave. W. between Bayfield St. and the alley starting at 3PM on Friday, July 23<sup>rd</sup> through Sunday, July 25<sup>th</sup> at 5PM (Staying within Patsy's regular bar hours).
- 6.) Use of the Coal Dock for fireworks on the 24<sup>th</sup>.

WASHBURN AREA CHAMBER OF COMMERCE

P.O. Box 74 - 126 W. Bayfield St Washburn, WI 54891 715-373-5017 [info@washburnchamber.com](mailto:info@washburnchamber.com) [www.washburnchamber.com](http://www.washburnchamber.com)



Will there be an admission charge, sale, solicitation, donation, or collection involved with your use? maybe

What will the money raised be used for? If anything money would go towards the next black party or Homecoming 2025 (Raffle tickets)

Will there be vendors and/or concession booths at event provided by individuals not associated with sponsor?

Yes  No  Will there be a charge to vendors/concession booths?  If yes, amount of charge: \$ 15-35

Will paid performers, speakers, etc., be used during the event? yes

Will there be a separate charge to attend the speakers program? no If yes, the amount of the charge \$ \_\_\_\_\_

Planned Activities:			Estimated Attendance: _____		
Yes	No	Check all Planned Activities	Yes	No	Check All Planned Activities
	<input checked="" type="checkbox"/>	Is food to be served by applicant?		<input checked="" type="checkbox"/>	Will caterer be used?
	<input checked="" type="checkbox"/>	Will alcohol be served? Sold? <u>Not by Applicant</u>			Alcohol Beverage License: _____
<input checked="" type="checkbox"/>		Will Fireworks be displayed?			Fireworks Display Permit: _____
<input checked="" type="checkbox"/>		Will Porta-Toilets be provided?			Number of Porta-Toilets Planned: _____
	<input checked="" type="checkbox"/>	Will a dance be held? <u>Not by Applicant but by local businesses</u>		<input checked="" type="checkbox"/>	Bonfire?
<input checked="" type="checkbox"/>		Tents, canopies to be placed?	<input checked="" type="checkbox"/>		Amplified sound equipment to be used?
<input checked="" type="checkbox"/>		Stages to be placed?	<input checked="" type="checkbox"/>		Generators to be used?
<input checked="" type="checkbox"/>		Electricity to be used?			
<input checked="" type="checkbox"/>		On-site signs/banners to be placed?	<input checked="" type="checkbox"/>		Off site signs/banners to be placed?

If off site signs/banners are to be placed, note types and dimensions: Our Usual Black party Signs - Vinyl

Provide locations for off-site signs & banners: On trees coming into town just before 11th Ave W

Applicant's Certificate of Insurance Must Be Received By the City at Least 10 Days Prior to the Event			
Who is providing Insurance Coverage? Applicant? <input type="checkbox"/> Chamber? <input checked="" type="checkbox"/> Other: _____			
Type of Insurance	Name of Insurance Co.	Per Occurrence Limit	Aggregate Limit
General Liability		\$	\$
Alcohol Liability		\$	\$
Spectator Liability		\$	\$

**APPLICANT'S RESPONSIBLE PARTY WHO IS TO BE ON-SITE ON THE DAY OF THE EVENT**

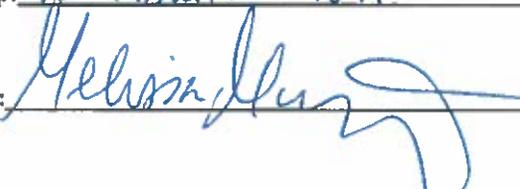
Name: Melissa Martinez

Cell Phone: 715-292-4562 Home Phone: ~~8~~

Any change, alteration or modification of intended use must be approved by the Common Council. Change of intended use, change in charges and fees, or change in disposition of funds raised may result in cancellation of this permit or a change in municipal fees. Any misrepresentation of your group or use, or failure to comply with municipal rules may result in expulsion from the park, forfeiture of future use and/or forfeiture of all fees & deposits.

**IT IS EXPRESSLY UNDERSTOOD AND AGREED THAT APPLICANT/ORGANIZATION SHALL HOLD THE CITY OF WASHBURN, ITS OFFICERS, AGENTS, EMPLOYEES AND VOLUNTEERS HARMLESS FROM ALL DAMAGES, COSTS, OR EXPENSES IN LAW OR EQUITY THAT MAY AT ANY TIME ARISE OR BE SET UP BECAUSE OF DAMAGES TO PROPERTY OR PERSONAL INJURY RECEIVED BY REASON OF OR IN THE COURSE OF USING OR OCCUPYING THE FACILITY.**

I and/or my organization, further expressly certify that I and/or my organization will be responsible for any damage or loss sustained to the grounds, building furnishings or equipment occurring, or clean-up required as the result of my and/or my organization's occupancy of the municipal facility.

Print Name: Melissa Martinez WI Driver's License: \_\_\_\_\_  
 Title or Position: Director Home Phone: 715-292-4562  
 Address: 100 W Bayfield St. Work Phone: 715-373-5017  
 City & Zip: Washburn, 54891 Fax: \_\_\_\_\_  
 Signature:  e-mail: director@washburnchamber.com  
 Date: 4/19/2021

<b>FOR OFFICIAL USE ONLY</b>		<b>PERMIT NO:</b> _____				
Application Reviewed by Common Council (Date): _____		Approved _____ Denied _____				
Authorized Signature: _____		Date: _____				
Fee	Amount	Date Paid	Receipt No.	Waived By Council?	YES	NO
Facility Deposit	\$			Waived By Council?		
Cleanup Deposit	\$			Waived By Council?		
Pavilion Fee	\$			Waived By Council?		
Campsite Fee Charged	\$			Waived By Council?		
Park Use Fee	\$			Waived By Council?		
	\$					

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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: Alcohol Licensing Renewal Process

Date: April 30, 2021

Alcohol License Renewal Applications for businesses were due on April 15<sup>th</sup>. At the May Council Meeting, 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 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.

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 7/1/2021 - 6/30/2022

1. DaLou's Bistro, Inc., Dale Hanson agent, dba DaLou's Bistro, Corporation Class "B" Fermented Malt Beverage & "Class C" Wine, 310 West Bayfield Street.
2. StageNorth, LLC, Bob Adams agent, dba Stage Door Bar, Corporation Class "B" Fermented Malt Beverage & "Class B" Intoxicating Liquor, 123 West Omaha Street.
3. Washburn Development Property LLC, dba The Harbor View, Jeffery Moberg agent, Corporation Class "B" Fermented Malt Beverage & "Class B" Liquor, 128 Harbor View Drive.
4. Lyndale Terminal LLC., dba Holiday Station store #227, Eugene Rich agent, Corporation Class "A" Fermented Malt Beverage, 606 West Bayfield Street.
5. 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.
6. Dauson, Inc., Harlan Guske agent, dba Firehouse, Corporation Class "B" Fermented Malt Beverage & "Class B" Intoxicating Liquor, 10 West Bayfield Street.
7. Naturally Superior, Inc., Dale A. Brevak agent, dba Lake Superior View Golf, Corporation Class "B" Fermented Malt Beverage, 950 County Hwy C.
8. David. Nickels, dba A Nickel's Worth Bar-n-Grill, Individual Class "B" Fermented Malt Beverage & "Class B" Intoxicating Liquor, 800 West Bayfield Street.
9. Uncle Walleyes LLC, Barbara K. Engelhard agent, dba Patsy's Bar, Corporation Class "B" Fermented Malt Beverage & "Class B" Intoxicating Liquor, 328 West Bayfield Street.
10. 211 Martini Bar LLC, Mark Nelson agent, dba 211 Martini, Corporation "Class B" Intoxicating Liquor, 211 West Bayfield Street.
11. Midland Services Inc., Trent Allen agent, Corporation Class "A" Fermented Malt Beverage, 137 West Bayfield Street.
12. The Snug, LLC, dba The Snug, Kristi M. Doman agent, Corporation Class "B" Fermented Malt Beverage & "Class B" Intoxicating Liquor, 308 West Bayfield Street
13. Karlyn Yellowbird Gallery LLC, Ron Piercy agent, dba Karlyn Yellowbird Gallery, Corporation Class "B" Fermented Malt Beverage & "Class C" Wine, 318 West Bayfield Street.

Tony Janisch

Assistant City Administrator

Daily Press - legal notice - May 14, 2021; May 18, 2021; and May 21, 2021

# Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07/01/2021 ending: 06/30/2022  
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the:  Town of } Washburn  
 Village of }  
 City of }

County of Bayfield Aldermanic Dist. No. \_\_\_\_\_  
 (if required by ordinance)

Check one:  Individual  Limited Liability Company  
 Partnership  Corporation/Nonprofit Organization

Complete A or B. All must complete C.

Applicant's Wisconsin Seller's Permit Number <u>456102656758303</u>	
FEIN Number <u>26-3901851</u>	
TYPE OF LICENSE REQUESTED	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$
<input checked="" type="checkbox"/> Class C wine	\$
<input type="checkbox"/> Class A liquor	\$
<input type="checkbox"/> Class A liquor (cider only)	\$ N/A
<input type="checkbox"/> Class B liquor	\$
<input type="checkbox"/> Reserve Class B liquor	\$
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$
<b>TOTAL FEE</b>	<b>\$</b>

## A. Individual or Partnership:

Full Name (Last) <u>Stensvad</u>	(First) <u>Lars</u>	(Middle Name) <u>Janet</u>	Home Address (Street, City or Post Office, & Zip Code) <u>524 WASHINGTON AVE</u>
Full Name (Last) <u>HANSON</u>	(First) <u>DALE</u>	(Middle Name) <u>GORDON</u>	Home Address (Street, City or Post Office, & Zip Code) <u>P.O. BOX 677</u>
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code) <u>SAME AS ABOVE</u>

## B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company	Address of Corporation / Limited Liability Company (if different from licensed premises)
---	--

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent.

Agent Last Name <u>Hanson</u>	(First) <u>Dale</u>	(Middle Name) <u>G</u>	Home Address (Street, City or Post Office, & Zip Code) <u>524 Washington Ave. 54891</u>
----------------------------------	------------------------	---------------------------	--

## All Officer(s) Director(s) of Corporation and Members / Managers of Limited Liability Company:

President / Member Last Name <u>Hanson</u>	(First) <u>Dale</u>	(Middle Name) <u>G</u>	Home Address (Street, City or Post Office, & Zip Code) <u>524 Washington Ave 54891</u>
Vice President / Member Last Name <u>Stensvad</u>	(First) <u>Lars</u>	(Middle Name) <u>J</u>	Home Address (Street, City or Post Office, & Zip Code) <u>524 Washington Ave. 54891</u>
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 Dalou's BISTRO Business Phone Number 715-373-1125  
 2. Address of Premises 310 West Bayfield St. Post Office & Zip Code PO Box 677

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? ..... Yes  No

4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.)  
dining room Deck  
AREA, coolers, locked storage, waitress station

5. Legal description (omit if street address is given on previous page): \_\_\_\_\_
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been convicted of any offenses (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? If yes, complete page 3 . . . . .  Yes  No
- b. Are charges for any offenses presently pending (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? If yes, explain fully on page 3. . . . .  Yes  No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? If yes, explain . . . . .  Yes  No
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? If not, explain . . . . .  Yes  No
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? . . . . .  Yes  No  
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? . . . . .  Yes  No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? . . . . .  Yes  No
12. Does the applicant owe municipal property taxes, assessments, or other fees? . . . . .  Yes  No  
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

**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.

Contact Person's Name (Last, First, M.I.) <i>Stensvad Lois J</i>	Title / Member <i>owner/operator</i>	Date <i>3-</i>
Signature <i>Stensvad Lois J</i>	Phone Number <i>715-812-1005</i>	Email Address <i>daleandboise@yahoo.com</i>

**TO BE COMPLETED BY CLERK**

Date received and filed with municipal clerk <i>3/23/21</i>	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

# Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07/01/2021 ending: 06/30/2022  
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the:  Town of } WASHBURN  
 Village of }  
 City of }

County of BAYFIELD Aldermanic Dist. No. \_\_\_\_\_  
 (if required by ordinance)

Check one:  Individual  Limited Liability Company  
 Partnership  Corporation/Nonprofit Organization

Complete A or B. All must complete C.

Applicant's Wisconsin Seller's Permit Number <u>4560000 15312 003</u>	
FEIN Number <u>39-1984532</u>	
TYPE OF LICENSE REQUESTED	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$
<input type="checkbox"/> Class C wine	\$
<input type="checkbox"/> Class A liquor	\$
<input type="checkbox"/> Class A liquor (cider only)	\$ N/A
<input checked="" type="checkbox"/> Class B liquor	\$
<input type="checkbox"/> Reserve Class B liquor	\$
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$
<b>TOTAL FEE</b>	<b>\$</b>

### 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 Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company <u>STAGE NORTH LLC</u>	Address of Corporation / Limited Liability Company (if different from licensed premises)
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All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent.

Agent Last Name <u>ADAMS</u>	(First) <u>ROBERT</u>	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code) <u>28445 OLD C RD WASHBURN 54891</u>
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### All Officer(s) Director(s) of Corporation and Members / Managers of Limited Liability Company:

President / Member Last Name <u>WEINEL</u>	(First) <u>JOHN</u>	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code) <u>11721 OSPREY AVE S HASTINGS, MN 55033</u>
Vice President / Member Last Name <u>WEINEL</u>	(First) <u>ANA</u>	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code) <u>11721 OSPREY AVE S HASTINGS, MN 55033</u>
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 <u>ADAMS</u>	(First) <u>ROBERT</u>	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code) <u>28445 OLD C RD WASHBURN, WI 54891</u>
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

### C. Business Information

1. Trade Name STAGE DOOR BAR Business Phone Number 715-373-1194  
 2. Address of Premises 123 W OMAHA ST Post Office & Zip Code WASHBURN, WI 54891

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? ..... Yes  No

4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) STAGE DOOR BAR, PATIO DECK, THEATER, UPSTAIRS LOBBY, KITCHEN, BASEMENT, STAGE

5. Legal description (omit if street address is given on previous page): \_\_\_\_\_
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been convicted of any offenses (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? If yes, complete page 3 . . . . .  Yes  No
- b. Are charges for any offenses presently pending (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? If yes, explain fully on page 3. . . . .  Yes  No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? If yes, explain . . . . .  Yes  No
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? If not, explain . . . . .  Yes  No
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? . . . . .  Yes  No  
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? . . . . .  Yes  No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? . . . . .  Yes  No
12. Does the applicant owe municipal property taxes, assessments, or other fees? . . . . .  Yes  No  
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

**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.

Contact Person's Name (Last, First, M.I.) <b>ADAMS, ROBERT</b>	Title / Member <b>DIRECTOR</b>	Date <b>MARCH 24, 2021</b>
Signature <i>Robert Adams</i>	Phone Number <b>715-373-5763</b>	Email Address <b>ROBERTADAMS@6MAN.com</b>

**TO BE COMPLETED BY CLERK**

Date received and filed with municipal clerk <b>3/23/21</b>	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

# Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07/01/2021 ending: 06/30/2022  
(mm/dd/yyyy) (mm/dd/yyyy)

To the Governing Body of the:  Town of } Washburn  
 Village of }  
 City of }

County of Bayfield Aldermanic Dist. No. \_\_\_\_\_  
 (if required by ordinance)

Check one:  Individual  Limited Liability Company  
 Partnership  Corporation/Nonprofit Organization

Complete A or B. All must complete C.

## A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
<u>Moberg</u>	<u>Jeffrey</u>	<u>Robert</u>	<u>2052 85<sup>th</sup> AVE DRESSER WI 54009</u>
<u>Anderson</u>	<u>Michael</u>	<u>Charles</u>	<u>39 CTY RD M STAR PRAIRIE WI 54026</u>
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

## B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company <u>Washburn Development Property LLC</u>	Address of Corporation / Limited Liability Company (if different from licensed premises) <u>2052 85<sup>th</sup> AVE DRESSER, WI 54009</u>
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All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent.

Agent Last Name <u>Moberg</u>	(First) <u>Jeffrey</u>	(Middle Name) <u>Robert</u>	Home Address (Street, City or Post Office, & Zip Code) <u>2052 85<sup>th</sup> AVE DRESSER, WI 54009</u>
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## All Officer(s) Director(s) of Corporation and Members / Managers of Limited Liability Company:

President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
<u>Moberg</u>	<u>Jeffrey</u>	<u>Robert</u>	
Vice President / Member Last Name <u>Anderson</u>	(First) <u>Michael</u>	(Middle Name) <u>Charles</u>	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

- Trade Name The Harbor View Event Center Business Phone Number 715 373 5492
- Address of Premises 128 Harbor View Drive Post Office & Zip Code Washburn, WI 54891
- Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? ..... Yes  No
- Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) Main level Bldg / Patio

Applicant's Wisconsin Seller's Permit Number <u>456 10293147 2002</u>	
FEIN Number <u>81-4417452</u>	
TYPE OF LICENSE REQUESTED	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$
<input type="checkbox"/> Class C wine	\$
<input type="checkbox"/> Class A liquor	\$
<input type="checkbox"/> Class A liquor (cider only)	\$ N/A
<input checked="" type="checkbox"/> Class B liquor	\$
<input type="checkbox"/> Reserve Class B liquor	\$
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$
<b>TOTAL FEE</b>	\$

5. Legal description (omit if street address is given on previous page): \_\_\_\_\_
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3** . . . . .  Yes  No
- b. Are **charges for any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3.** . . . . .  Yes  No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** . . . . .  Yes  No
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** . . . . .  Yes  No
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? . . . . .  Yes  No  
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? . . . . .  Yes  No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? . . . . .  Yes  No
12. Does the applicant owe municipal property taxes, assessments, or other fees? . . . . .  Yes  No  
**(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).**

**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.

Contact Person's Name (Last, First, M.I.) <i>Moberg, Jeffrey R</i>	Title / Member <i>PRESIDENT</i>	Date <i>3/23/21</i>
Signature <i>Jeffrey Moberg</i>	Phone Number <i>715 781 6870</i>	Email Address <i>Washburnina@gmail.com</i>

**TO BE COMPLETED BY CLERK**

Date received and filed with municipal clerk	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

# Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 7/1/2021 ending: 06/30/2022  
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the:  Town of } Washburn  
 Village of }  
 City of }

County of Bayfield Aldermanic Dist. No. \_\_\_\_\_  
 (if required by ordinance)

Check one:  Individual  Limited Liability Company  
 Partnership  Corporation/Nonprofit Organization

Complete A or B. All must complete C.

**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 Agent):**

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company <u>Indianhead Oil Co., LLC</u>	Address of Corporation / Limited Liability Company (if different from licensed premises)
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All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent.

Agent Last Name <u>Rich Jr</u>	(First) <u>Eugene</u>	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code) <u>702 West Pine St. Washburn, WI 54891</u>
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**All Officer(s) Director(s) of Corporation and Members / Managers of Limited Liability Company:**

President / Member Last Name <u>Johnson</u>	(First) <u>Richard</u>	(Middle Name) <u>David</u>	Home Address (Street, City or Post Office, & Zip Code) <u>970 Redwood Drive, Apple Valley, MN 55124</u>
Vice President / Member Last Name <u>Brant</u>	(First) <u>Gary</u>	(Middle Name) <u>Melburn</u>	Home Address (Street, City or Post Office, & Zip Code) <u>700 East 3rd Street, Monticello, MN 55362</u>
Secretary / Member Last Name <u>Zamuner</u>	(First) <u>Valéry</u>	(Middle Name) <u>--</u>	Home Address (Street, City or Post Office, & Zip Code) <u>1304 Boulevard Mont-Royal, Outremont, Quebec, Can</u>
Treasurer / Member Last Name <u>Lueth</u>	(First) <u>James</u>	(Middle Name) <u>William</u>	Home Address (Street, City or Post Office, & Zip Code) <u>3400 West 84th St, Bloomington, MN 55431</u>
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)

Applicant's Wisconsin Seller's Permit Number <u>456000043242004</u>	
FEIN Number <u>41-0880612</u>	
TYPE OF LICENSE REQUESTED	FEE
<input checked="" type="checkbox"/> Class A beer	\$
<input type="checkbox"/> Class B beer	\$
<input type="checkbox"/> Class C wine	\$
<input type="checkbox"/> Class A liquor	\$
<input checked="" type="checkbox"/> Class A liquor (cider only)	\$ N/A
<input type="checkbox"/> Class B liquor	\$
<input type="checkbox"/> Reserve Class B liquor	\$
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$
<b>TOTAL FEE</b>	<b>\$</b>

**C. Business Information**

1. Trade Name Holiday Stationstore #227 Business Phone Number 715-373-2305

2. Address of Premises 606 West Bayfield PO Box 183 Post Office & Zip Code Washburn WI 54891

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? ..... Yes   No

4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.)

Entire Building

5. Legal description (omit if street address is given on previous page): \_\_\_\_\_
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been convicted of any offenses (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? If yes, complete page 3 . . . . .  Yes  No
- b. Are charges for any offenses presently pending (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? If yes, explain fully on page 3. . . . .  Yes  No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? If yes, explain . . . . .  Yes  No
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? If not, explain . . . . .  Yes  No
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? . . . . .  Yes  No  
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? . . . . .  Yes  No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? . . . . .  Yes  No
12. Does the applicant owe municipal property taxes, assessments, or other fees? . . . . .  Yes  No  
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

**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.

Contact Person's Name (Last, First, M.I.) Brant, Gary Melburn	Title / Member V. P. of Operations	Date 03/25/2021
Signature 	Phone Number 952-830-8700	Email Address

**TO BE COMPLETED BY CLERK**

Date received and filed with municipal clerk 3/29/21	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

# Application for Cigarette and Tobacco Products Retail License

Submit to municipal clerk.

MUNICIPAL USE ONLY

Applicant's Wisconsin 15-digit Sales Tax Account Number  
456000043242004

← This must be issued in the same Legal Name of the licensee below.

License Number
Period Covered
Date of Issuance

Legal Name (corporation, limited liability company, partnership or sole proprietorship) Indianhead Oil Co., LLC		Federal Employer Identification No. (FEIN) 41-0880612	
Trade or Business Name (if different than Legal Name) Holiday Stationstore #227		Telephone Number ( 715) 373-2305	
Business Address (License Location) 606 West Bayfield PO Box 183		Business Located In <input checked="" type="checkbox"/> City <input type="checkbox"/> Village <input type="checkbox"/> Town	
Municipality Washburn	State WI	Zip Code 54891	Business Telephone ( 952) 830-8700
Mailing Address (if different than Business Address) 4567 American Blvd W		County Bayfield	of: Washburn
		Municipality Bloomington	State   Zip Code MN   55437

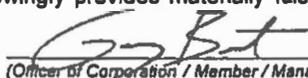
Organization (check one)

- Sole Proprietor       Wisconsin Corporation – Enter date incorporated: \_\_\_\_\_  
 Partnership       Out-of-State Corporation – Are you registered to do business in Wisconsin?     Yes     No  
 Other (describe) LLC

- 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     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/dor/forms/ctp-129.pdf](http://revenue.wi.gov/dor/forms/ctp-129.pdf).)  
 Yes     No    3. Does the applicant understand that they cannot purchase/exchange cigarettes or tobacco products from another retailer, including transferring existing stock to a new owner?  
 Yes     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>)  
 Yes     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)?  
 Yes     No    6. Does the applicant understand that they may not sell single cigarettes?  
 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?  
 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](http://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 portion 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.

  
(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.

# Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 06 30 2021 ending: 07 01 2022  
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the:  Town of } WASHBURN  
 Village of }  
 City of }

County of BAYFIELD Aldermanic Dist. No. \_\_\_\_\_  
 (if required by ordinance)

Check one:  Individual  Limited Liability Company  
 Partnership  Corporation/Nonprofit Organization

Complete A or B. All must complete C.

## A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

## B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company <u>Hansens's IGA Inc.</u>	Address of Corporation / Limited Liability Company (if different from licensed premises) <u>P.O. Box 160, Bangor WI 54614</u>
--	--

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent.

Agent Last Name <u>Larson</u>	(First) <u>Kristy</u>	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code) <u>228 W 3rd St. Washburn, WI 54891</u>
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## All Officer(s) Director(s) of Corporation and Members / Managers of Limited Liability Company:

President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
<u>Hansen</u>	<u>Gregory</u>	<u>J</u>	<u>1320 Cardinal St, Bangor WI 54614</u>
Vice President / Member Last Name <u>Hansen</u>	(First) <u>Nicholas</u>	(Middle Name) <u>L</u>	Home Address (Street, City or Post Office, & Zip Code) <u>5225 Brackenwood Ct LaCrosse WI 54601</u>
Secretary / Member Last Name <u>Hansen</u>	(First) <u>Kari</u>	(Middle Name) <u>L</u>	Home Address (Street, City or Post Office, & Zip Code) <u>1320 Cardinal St, Bangor WI 54614</u>
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)

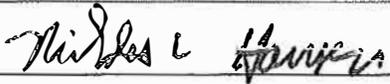
## C. Business Information

- Trade Name Hansen's IGA Inc. Business Phone Number 715-373-5566
- Address of Premises 226 W Bayfield ST Post Office & Zip Code 54891
- Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? ..... Yes  No
- Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) 27,000 sq ft bldg  
Grocery Store, entire building

Applicant's Wisconsin Seller's Permit Number <u>456-0000340870-03</u>	
FEIN Number <u>39-1098106</u>	
TYPE OF LICENSE REQUESTED	FEE
<input checked="" type="checkbox"/> Class A beer	\$ 110
<input type="checkbox"/> Class B beer	\$
<input type="checkbox"/> Class C wine	\$
<input checked="" type="checkbox"/> Class A liquor	\$ 350
<input type="checkbox"/> Class A liquor (cider only)	\$ N/A
<input type="checkbox"/> Class B liquor	\$
<input type="checkbox"/> Reserve Class B liquor	\$
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$ 18
<b>TOTAL FEE</b>	<b>\$ 478</b>

5. Legal description (omit if street address is given on previous page): \_\_\_\_\_
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3** . . . . .  Yes  No
- b. Are **charges for any offenses presently pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3.** . . . . .  Yes  No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** . . . . .  Yes  No
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** . . . . .  Yes  No
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? . . . . .  Yes  No  
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? . . . . .  Yes  No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? . . . . .  Yes  No
12. Does the applicant owe municipal property taxes, assessments, or other fees? . . . . .  Yes  No  
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

**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.

Contact Person's Name (Last, First, M.I.) Hansen, Nicholas L	Title / Member owner/VP	Date
Signature 	Phone Number 608-486-2049 #118	Email Address nlhansen@hansensiga.com

**TO BE COMPLETED BY CLERK**

Date received and filed with municipal clerk	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

# Application for Cigarette and Tobacco Products Retail License

MUNICIPAL USE ONLY

Submit to municipal clerk.

Applicant's Wisconsin 15-digit Sales Tax Account Number  
456-0000340870-03

← This must be issued in the same Legal Name of the licensee below.

License Number
Period Covered 7/1/2021-6/30/2022
Date of Issuance

Legal Name (corporation, limited liability company, partnership or sole proprietorship) Hansen's IGA Inc.		Federal Employer Identification No. (FEIN) 39-1098106	
Trade or Business Name (if different than Legal Name)		Telephone Number ( )	
Business Address (License Location) 226 W Bayfield St		Business Located In <input checked="" type="checkbox"/> City <input type="checkbox"/> Village <input type="checkbox"/> Town	
Municipality Washburn	State WI	Zip Code 54891	Business Telephone (715) 373-5566
Mailing Address (if different than Business Address) P.O. Box 160		County Bayfield	
Municipality Bangor		State WI	Zip Code 54614

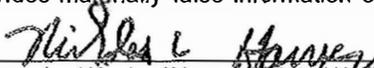
Organization (check one)

- Sole Proprietor       Wisconsin Corporation – Enter date incorporated: \_\_\_\_\_
- Partnership       Out-of-State Corporation – Are you registered to do business in Wisconsin?     Yes     No
- Other (describe) \_\_\_\_\_

- 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     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/dor/forms/ctp-129.pdf](http://revenue.wi.gov/dor/forms/ctp-129.pdf).)
- Yes     No    3. Does the applicant understand that they cannot purchase/exchange cigarettes or tobacco products from another retailer, including transferring existing stock to a new owner?
- Yes     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>)
- Yes     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)?
- Yes     No    6. Does the applicant understand that they may not sell single cigarettes?
- 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?
- 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](http://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 portion 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.

  
(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.

# Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 7-1-21 ending: 6-30-22  
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the:  Town of } Washburn  
 Village of }  
 City of }

County of Bayfield Aldermanic Dist. No. \_\_\_\_\_  
 (if required by ordinance)

Check one:  Individual  Limited Liability Company  
 Partnership  Corporation/Nonprofit Organization

Complete A or B. All must complete C.

### A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

### B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company <u>DAVSON INC</u>	Address of Corporation / Limited Liability Company (if different from licensed premises)
--	--

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent.

Agent Last Name <u>GUSKE</u>	(First) <u>Harlan</u>	(Middle Name) <u>JAMES</u>	Home Address (Street, City or Post Office, & Zip Code) <u>Washburn P.O. Box 160 54891</u>
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### All Officer(s) Director(s) of Corporation and Members / Managers of Limited Liability Company:

President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
<u>GUSKE</u>	<u>Harlan</u>	<u>JAMES</u>	<u>Washburn P.O. Box 160 54891</u>
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 FIRE House Bar Business Phone Number 715-373-5780

2. Address of Premises 10 West Bayfield St Post Office & Zip Code P.O. Box 160 54891

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? ..... Yes  No

4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) ONE story brick

Building with Beer Garden

Applicant's Wisconsin Seller's Permit Number <u>456 0000440 530 -03</u>	
FEIN Number <u>39-179 2882</u>	
TYPE OF LICENSE REQUESTED	FEE
<input type="checkbox"/> Class A beer	\$
<input type="checkbox"/> Class B beer	\$
<input type="checkbox"/> Class C wine	\$
<input type="checkbox"/> Class A liquor	\$
<input type="checkbox"/> Class A liquor (cider only)	\$ N/A
<input type="checkbox"/> Class B liquor	\$
<input type="checkbox"/> Reserve Class B liquor	\$
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$
<b>TOTAL FEE</b>	<b>\$</b>

5. Legal description (omit if street address is given on previous page): \_\_\_\_\_
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been convicted of any offenses (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? If yes, complete page 3. . . . .  Yes  No
- b. Are charges for any offenses presently pending (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? If yes, explain fully on page 3. . . . .  Yes  No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? If yes, explain . . . . .  Yes  No
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? If not, explain . . . . .  Yes  No
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? . . . . .  Yes  No  
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? . . . . .  Yes  No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? . . . . .  Yes  No
12. Does the applicant owe municipal property taxes, assessments, or other fees? . . . . .  Yes  No  
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

**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.

Contact Person's Name (Last, First, M.I.) GUSKE HARLAN J.	Title / Member President	Date 3-31-21
Signature Harlan Guske	Phone Number 715-373-0911	Email Address

**TO BE COMPLETED BY CLERK**

Date received and filed with municipal clerk 3/31/2021	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

# Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07/01/2021 ending: 06/30/2022  
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the:  Town of } Washburn  
 Village of }  
 City of }

County of Bayfield Aldermanic Dist. No. \_\_\_\_\_  
 (if required by ordinance)

Check one:  Individual  Limited Liability Company  
 Partnership  Corporation/Nonprofit Organization

Complete A or B. All must complete C.

Applicant's Wisconsin Seiler's Permit Number <u>456-1020100 222-04</u>	
FEIN Number <u>39-1968736</u>	
TYPE OF LICENSE REQUESTED	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$
<input type="checkbox"/> Class C wine	\$
<input type="checkbox"/> Class A liquor	\$
<input type="checkbox"/> Class A liquor (cider only)	\$ N/A
<input type="checkbox"/> Class B liquor	\$
<input type="checkbox"/> Reserve Class B liquor	\$
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$
<b>TOTAL FEE</b>	<b>\$</b>

## 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 Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company <u>Naturally Superior Inc.</u>	Address of Corporation / Limited Liability Company (if different from licensed premises)
---	--

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent.

Agent Last Name <u>Brevak</u>	(First) <u>Dale</u>	(Middle Name) <u>Arden</u>	Home Address (Street, City or Post Office, & Zip Code) <u>74035 Ondossagon Rd Washburn, 54891</u>
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## All Officer(s) Director(s) of Corporation and Members / Managers of Limited Liability Company:

President / Member Last Name <u>Brevak</u>	(First) <u>Dale</u>	(Middle Name) <u>Arden</u>	Home Address (Street, City or Post Office, & Zip Code) <u>74035 Ondossagon Rd Washburn, 54891</u>
Vice President / Member Last Name <u>Brevak</u>	(First) <u>Donalee</u>	(Middle Name) <u>Marie</u>	Home Address (Street, City or Post Office, & Zip Code) <u>74035 Ondossagon Rd Washburn, 54891</u>
Secretary / Member Last Name <u>Brevak</u>	(First) <u>Derek</u>	(Middle Name) <u>Jon</u>	Home Address (Street, City or Post Office, & Zip Code) <u>8292 Hwy 80, Marshfield 54449</u>
Treasurer / Member Last Name <u>Hudson</u>	(First) <u>Dana</u>	(Middle Name) <u>Ingrid</u>	Home Address (Street, City or Post Office, & Zip Code) <u>234 Blue Sky Dr. Glenwood City, 54013</u>
Directors / Managers Last Name <u>Brevak</u>	(First) <u>Donalee</u>	(Middle Name) <u>Marie</u>	Home Address (Street, City or Post Office, & Zip Code) <u>74035 Ondossagon Rd Washburn, 54891</u>
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

## C. Business Information

1. Trade Name Lake Superior View Golf Business Phone Number 715-373-1100 <sup>Seasonal</sup> 0393  
 2. Address of Premises 950 Co. Hwy. G Post Office & Zip Code Washburn, 54891 <sup>ORP</sup>

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? ..... Yes  No

4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) Storage shed  
Clubhouse, golf carts, all golf course property

5. Legal description (omit if street address is given on previous page): \_\_\_\_\_
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete page 3** .....  Yes  No
- b. Are **charges for any offenses presently pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on page 3.** .....  Yes  No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain** .....  Yes  No
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? **If not, explain** .....  Yes  No
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? .....  Yes  No  
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? .....  Yes  No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? .....  Yes  No
12. Does the applicant owe municipal property taxes, assessments, or other fees? .....  Yes  No  
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

**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.

Contact Person's Name (Last, First, M.I.) <i>Brevak, Donalee, M</i>	Title / Member <i>Vice-president</i>	Date <i>April 6, 2021</i>
Signature <i>Donalee M. Brevak</i>	Phone Number <i>715-373-0393</i>	Email Address <i>dbrevak@contemporary.net</i>

**TO BE COMPLETED BY CLERK**

Date received and filed with municipal clerk <i>4/7/21</i>	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

# Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: July 1st 2021 ending: June 30, 2022  
(mm/dd/yyyy) (mm dd yyyy)

To the Governing Body of the:  Town of } Washburn  
 Village of }  
 City of }

County of Bayfield Aldermanic Dist. No. \_\_\_\_\_  
 (if required by ordinance)

Check one:  Individual  Limited Liability Company  
 Partnership  Corporation/Nonprofit Organization

Complete A or B. All must complete C.

### A. Individual or Partnership:

Full Name (Last) <u>David P. Nickel</u>	(First) <u>David</u>	(Middle Name) <u>P</u>	Home Address (Street, City or Post Office, & Zip Code) <u>800 W. Bayfield St Washburn WI 54891</u>
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):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company	Address of Corporation / Limited Liability Company (if different from licensed premises)
---	--

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent.

Agent Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
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### All Officer(s) Director(s) of Corporation and Members / Managers of Limited Liability Company:

President / Member Last Name	(First)	(Middle Name)	Home Address (Street, 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

- Trade Name A Nickels' Worth Bar-n-Grill Business Phone Number (715) 373-5421
- Address of Premises 800 W. Bayfield St Post Office & Zip Code Washburn, WI 54891
- Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? ..... Yes  No
- Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) Building located on west end of said property, with attached deck.

Applicant's Wisconsin Seller's Permit Number <u>456-00001363318-03</u>	
FEIN Number <u>39-1784528</u>	
TYPE OF LICENSE REQUESTED	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$
<input type="checkbox"/> Class C wine	\$
<input type="checkbox"/> Class A liquor	\$
<input type="checkbox"/> Class A liquor (cider only)	\$ N/A
<input checked="" type="checkbox"/> Class B liquor	\$
<input type="checkbox"/> Reserve Class B liquor	\$
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$
<b>TOTAL FEE</b>	<b>\$</b>

5. Legal description (omit if street address is given on previous page): \_\_\_\_\_
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been convicted of any offenses (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? If yes, complete page 3 . . . . .  Yes  No
- b. Are charges for any offenses presently pending (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? If yes, explain fully on page 3. . . . .  Yes  No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? If yes, explain . . . . .  Yes  No
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? If not, explain . . . . .  Yes  No
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? . . . . .  Yes  No  
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? . . . . .  Yes  No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? . . . . .  Yes  No
12. Does the applicant owe municipal property taxes, assessments, or other fees? . . . . .  Yes  No  
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

**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.

Contact Person's Name (Last, First, M.I.) <i>Nickels, David P.</i>	Title / Member <i>Owner</i>	Date <i>4-12-21</i>
Signature <i>David Nickels</i>	Phone Number <i>(715) 373-5580</i>	Email Address

**TO BE COMPLETED BY CLERK**

Date received and filed with municipal clerk <i>4/13/21</i>	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

# Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07/1/2021 ending: 06-30-2022  
(mm dd yyyy) (mm dd yyyy)

Applicant's Wisconsin Seller's Permit Number <u>456-0002932055-02</u>	
FEIN Number <u>20-4998672</u>	
TYPE OF LICENSE REQUESTED	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$
<input type="checkbox"/> Class C wine	\$
<input type="checkbox"/> Class A liquor	\$
<input type="checkbox"/> Class A liquor (cider only)	\$ N/A
<input checked="" type="checkbox"/> Class B liquor	\$
<input type="checkbox"/> Reserve Class B liquor	\$
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$
<b>TOTAL FEE</b>	<b>\$</b>

To the Governing Body of the:  Town of } Washburn  
 Village of }  
 City of }

County of \_\_\_\_\_ Aldermanic Dist. No. \_\_\_\_\_  
 (if required by ordinance)

Check one:  Individual  Limited Liability Company  
 Partnership  Corporation/Nonprofit Organization

Complete A or B. All must complete C.

## A. Individual or Partnership:

Full Name (Last) <u>ENGELHARD</u>	(First) <u>Barbara</u>	(Middle Name) <u>H.</u>	Home Address (Street, City or Post Office, & Zip Code) <u>77905 WASHINGTON AVE WASHBURN WI 54891</u>
Full Name (Last) <u>ENGELHARD</u>	(First) <u>George</u>	(Middle Name) <u>W.</u>	Home Address (Street, City or Post Office, & Zip Code) <u>77905 WASHINGTON AVE WASHBURN WI 54891</u>
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

## B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company <u>Uncle Walkeyes LLC / DBA Patsys Bar</u>	Address of Corporation / Limited Liability Company (if different from licensed premises) <u>77905 WASHINGTON AVE WASHBURN WI 54891</u>
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All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent.

Agent Last Name <u>Engelhard</u>	(First) <u>Barbara</u>	(Middle Name) <u>H.</u>	Home Address (Street, City or Post Office, & Zip Code) <u>77905 WASHINGTON AVE WASHBURN WI 54891</u>
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## All Officer(s) Director(s) of Corporation and Members / Managers of Limited Liability Company:

President / Member Last Name <u>ENGELHARD</u>	(First) <u>Barbara</u>	(Middle Name) <u>H.</u>	Home Address (Street, City or Post Office, & Zip Code) <u>77905 WASHINGTON AVE WASHBURN WI 54891</u>
Vice President / Member Last Name <u>Engelhard</u>	(First) <u>George</u>	(Middle Name) <u>W.</u>	Home Address (Street, City or Post Office, & Zip Code) <u>77905 WASHINGTON AVE WASHBURN WI 54891</u>
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 Patsys Bar + Grill Business Phone Number 715-373-5792  
 2. Address of Premises 328 W. Bayfield ST WASHBURN WI 54891 Post Office & Zip Code PO. Box 188 - 54891

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? ..... Yes  No

4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) Block 935, Lots 1, 2, 3

Entire Building Covered porch, wood side porch, smoking area + Beer garden

5. Legal description (omit if street address is given on previous page): \_\_\_\_\_
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been convicted of any offenses (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? If yes, complete page 3 .....  Yes  No
- b. Are charges for any offenses presently pending (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? If yes, explain fully on page 3. ....  Yes  No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? If yes, explain .....  Yes  No
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? If not, explain .....  Yes  No
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? .....  Yes  No  
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? .....  Yes  No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? .....  Yes  No
12. Does the applicant owe municipal property taxes, assessments, or other fees? .....  Yes  No  
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

**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.

Contact Person's Name (Last, First, M.I.) <i>Ernesto Baerba H</i>	Title / Member <i>owner</i>	Date <i>4-12-2021</i>
Signature <i>Ernesto Baerba</i>	Phone Number <i>715-373-5792</i>	Email Address <i>GTNFla@aol.com</i>

**TO BE COMPLETED BY CLERK**

Date received and filed with municipal clerk <i>4/13/2021</i>	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

# Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07-01-2021 ending: 06-30-2022  
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the:  Town of } WASHINGTON  
 Village of }  
 City of }

County of Bayfield Aldermanic Dist. No. \_\_\_\_\_  
 (if required by ordinance)

Check one:  Individual  Limited Liability Company  
 Partnership  Corporation/Nonprofit Organization

Complete A or B. All must complete C.

## A. Individual or Partnership:

Full Name (Last) <u>NELSON</u>	(First) <u>Ryan</u>	(Middle Name) <u>MARK</u>	Home Address (Street, City or Post Office, & Zip Code) <u>27100 Brown Rd Mason WI 54856</u>
Full Name (Last) <u>NELSON</u>	(First) <u>Anthony</u>	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code) <u>27100 Brown Rd Mason WI 54856</u>
Full Name (Last) <u>Sneed</u>	(First) <u>DAVID</u>	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code) <u>58335 N10 Rd Mason WI 54856</u>

## B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company <u>211 Martini, LLC</u>	Address of Corporation / Limited Liability Company (if different from licensed premises) <u>P.O. Box 95 WASHINGTON, WI 54891</u>
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All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent.

Agent Last Name <u>MARK NELSON</u>	(First) <u>MARK</u>	(Middle Name) <u>Ryan</u>	Home Address (Street, City or Post Office, & Zip Code) <u>27100 Brown Rd</u>
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## All Officer(s) Director(s) of Corporation and Members / Managers of Limited Liability Company:

President / Member Last Name	(First)	(Middle Name)	Home Address (Street, 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 211 Martini, LLC Business Phone Number 303 995 4224  
 2. Address of Premises 211 W. Bayfield St Post Office & Zip Code WASHINGTON 54891

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? ..... Yes  No

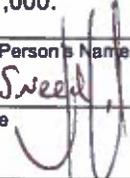
4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.)

THE ENTIRE BUILDING AND: THE FRONT ROOM, THE PAVAGE ROOM, THE HALLWAY, AND THE EMPLOYEE LOUNGE/LOCKER ROOM.

Applicant's Wisconsin Seller's Permit Number <u>456-1030606209-02</u>	
FEIN Number <u>86-2350579</u>	
TYPE OF LICENSE REQUESTED	FEE
<input type="checkbox"/> Class A beer	\$
<input type="checkbox"/> Class B beer	\$
<input type="checkbox"/> Class C wine	\$
<input type="checkbox"/> Class A liquor	\$
<input type="checkbox"/> Class A liquor (cider only)	\$ N/A
<input checked="" type="checkbox"/> Class B liquor	\$
<input type="checkbox"/> Reserve Class B liquor	\$
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$
<b>TOTAL FEE</b>	<b>\$</b>

5. Legal description (omit if street address is given on previous page): \_\_\_\_\_
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been convicted of any offenses (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? If yes, complete page 3 . . . . .  Yes  No
- b. Are charges for any offenses presently pending (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? If yes, explain fully on page 3. . . . .  Yes  No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? If yes, explain . . . . .  Yes  No
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? If not, explain . . . . .  Yes  No
- this license is too new, was not in use during 2020
- \_\_\_\_\_
- \_\_\_\_\_
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? . . . . .  Yes  No  
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? . . . . .  Yes  No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? . . . . .  Yes  No
12. Does the applicant owe municipal property taxes, assessments, or other fees? . . . . .  Yes  No  
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

**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.

Contact Person's Name (Last, First, M.I.) <u>Sweed, David N</u>	Title / Member <u>owner</u>	Date <u>14 April 21</u>
Signature 	Phone Number <u>303-995-4226</u>	Email Address <u>DAVE@REPLANTUS.org</u>

**TO BE COMPLETED BY CLERK**

Date received and filed with municipal clerk <u>4/14/21</u>	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

# Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07/01/2021 ending: 06/30/2022  
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the:  Town of  Village of  City of } Washburn, WI

County of Bayfield Aldermanic Dist. No. \_\_\_\_\_  
 (if required by ordinance)

Check one:  Individual  Limited Liability Company  
 Partnership  Corporation/Nonprofit Organization

Complete A or B. All must complete C.

Applicant's Wisconsin Seller's Permit Number <u>456 0000294177-02</u>	
FEIN Number <u>39-0119250</u>	
TYPE OF LICENSE REQUESTED	FEE
<input checked="" type="checkbox"/> Class A beer	\$
<input type="checkbox"/> Class B beer	\$
<input type="checkbox"/> Class C wine	\$ <u>---</u>
<input type="checkbox"/> Class A liquor	\$ <u>---</u>
<input type="checkbox"/> Class A liquor (cider only)	\$ N/A
<input type="checkbox"/> Class B liquor	\$ <u>---</u>
<input type="checkbox"/> Reserve Class B liquor	\$ <u>---</u>
<input type="checkbox"/> Class B (wine only) winery	\$ <u>---</u>
Publication fee	\$
<b>TOTAL FEE</b>	<b>\$</b>

## 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 Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company <u>Midland Services, Inc.</u>	Address of Corporation / Limited Liability Company (if different from licensed premises) <u>220 Third Ave. W. PO Box 500 Ashland WI 54806</u>
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All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent.

Agent Last Name <u>Allen</u>	(First) <u>Trent</u>	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code) <u>25100 Cozy Corner Rd, Ashland, WI 54806</u>
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## All Officer(s) Director(s) of Corporation and Members / Managers of Limited Liability Company:

President / Member Last Name <u>Frostman</u>	(First) <u>Richard</u>	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code) <u>2571 Junction Rd Ashland WI 54806</u>
Vice President / Member Last Name <u>Massolin</u>	(First) <u>Gregory</u>	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code) <u>9181 Old Hwy 10 Saxon, WI 54559</u>
Secretary / Member Last Name <u>Tetzner</u>	(First) <u>Pete</u>	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code) <u>30840 Wannebo Rd. Washburn, WI 54891</u>
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 Midland Services - Washburn Business Phone Number 715-373-5722  
 2. Address of Premises 137 W. Bayfield St. Post Office & Zip Code Washburn WI 54806

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? ..... Yes  No

4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.)  
Convenience Store building

5. Legal description (omit if street address is given on previous page): \_\_\_\_\_
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been convicted of any offenses (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? If yes, complete page 3 .....  Yes  No
- b. Are charges for any offenses presently pending (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? If yes, explain fully on page 3. ....  Yes  No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? If yes, explain .....  Yes  No
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? If not, explain .....  Yes  No
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? .....  Yes  No  
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? .....  Yes  No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? .....  Yes  No
12. Does the applicant owe municipal property taxes, assessments, or other fees? .....  Yes  No  
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

**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.

Contact Person's Name (Last, First, M.I.) <b>Allen, Trent</b>	Title / Member <b>Gen. Manager</b>	Date <b>4-6-21</b>
Signature <b>Trent Allen</b>	Phone Number <b>715-682-5528</b>	Email Address <b>tallen@midlandservices.com</b>

**TO BE COMPLETED BY CLERK**

Date received and filed with municipal clerk <b>4/14/21</b>	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

# Application for Cigarette and Tobacco Products Retail License

Submit to municipal clerk.

MUNICIPAL USE ONLY

License Number
Period Covered
Date of Issuance

Applicant's Wisconsin 15-digit Sales Tax Account Number  
**456-0000294177-02**

← This must be issued in the same Legal Name of the licensee below.

Legal Name (corporation, limited liability company, partnership or sole proprietorship) <b>Midland Services, Inc.</b>			Federal Employer Identification No. (FEIN) <b>39-0119250</b>	
Trade or Business Name (if different than Legal Name) <b>Midland Services, Inc.</b>			Telephone Number <b>(715) 682-5528</b>	
Business Address (License Location) <b>137 W. Bayfield St.</b>		Business Located In <input checked="" type="checkbox"/> City <input type="checkbox"/> Village <input type="checkbox"/> Town of: <b>Washburn</b>		Business Telephone <b>(715) 373-5722</b>
Municipality <b>Washburn</b>	State <b>WI</b>	Zip Code <b>54891</b>	County <b>Bayfield</b>	
Mailing Address (if different than Business Address) <b>PO Box 500 Ashland, WI 54806</b>		Municipality <b>Ashland</b>	State <b>WI</b>	Zip Code <b>54806</b>

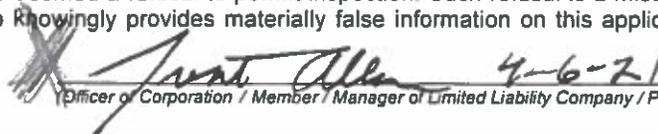
Organization (check one)

- Sole Proprietor       Wisconsin Corporation – Enter date incorporated: \_\_\_\_\_  
 Partnership       Out-of-State Corporation – Are you registered to do business in Wisconsin?     Yes     No  
 Other (describe) \_\_\_\_\_

- 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     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/dor/forms/ctp-129.pdf](http://revenue.wi.gov/dor/forms/ctp-129.pdf).)  
 Yes     No    3. Does the applicant understand that they cannot purchase/exchange cigarettes or tobacco products from another retailer, including transferring existing stock to a new owner?  
 Yes     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>)  
 Yes     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)?  
 Yes     No    6. Does the applicant understand that they may not sell single cigarettes?  
 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?  
 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](http://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 portion 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.

  
 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.

# Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07/01/21 ending: 06/30/22  
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the:  Town of } Washburn  
 Village of }  
 City of }

County of Bayfield Aldermanic Dist. No. \_\_\_\_\_  
 (if required by ordinance)

Check one:  Individual  Limited Liability Company  
 Partnership  Corporation/Nonprofit Organization

Complete A or B. All must complete C.

Applicant's Wisconsin Seller's Permit Number <u>45610277220432</u>	
FEIN Number <u>454364902</u>	
TYPE OF LICENSE REQUESTED	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$
<input type="checkbox"/> Class C wine	\$
<input type="checkbox"/> Class A liquor	\$
<input type="checkbox"/> Class A liquor (cider only)	\$ N/A
<input checked="" type="checkbox"/> Class B liquor	\$
<input type="checkbox"/> Reserve Class B liquor	\$
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$
<b>TOTAL FEE</b>	<b>\$</b>

## 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 Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company <u>The Snug, LLC</u>	Address of Corporation / Limited Liability Company (if different from licensed premises)
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All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent.

Agent Last Name <u>Doman</u>	(First) <u>Kristi</u>	(Middle Name) <u>m</u>	Home Address (Street, City or Post Office, & Zip Code) <u>511 W Bayfield St Washburn WI 54891</u>
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## All Officer(s) Director(s) of Corporation and Members / Managers of Limited Liability Company:

President / Member Last Name <u>Doman</u>	(First) <u>Daniel</u>	(Middle Name) <u>T</u>	Home Address (Street, City or Post Office, & Zip Code) <u>511 W Bayfield St Washburn WI 54891</u>
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 <u>Doman</u>	(First) <u>Kristi</u>	(Middle Name) <u>m.</u>	Home Address (Street, City or Post Office, & Zip Code) <u>511 W Bayfield St Washburn WI 54891</u>
Directors / Managers Last Name <u>Doman</u>	(First) <u>Daniel</u>	(Middle Name) <u>T</u>	Home Address (Street, City or Post Office, & Zip Code) <u>511 W Bayfield St Washburn WI 54891</u>
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

## C. Business Information

1. Trade Name The Snug Business Phone Number 715 373 0338

2. Address of Premises 308 W Bayfield St Post Office & Zip Code Washburn WI 54891

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? ..... Yes  No

4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.)

Single story  
pub/restaurant with beer garden & basement storage

5. Legal description (omit if street address is given on previous page): \_\_\_\_\_
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been convicted of any offenses (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? If yes, complete page 3 . . . . .  Yes  No
- b. Are charges for any offenses presently pending (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? If yes, explain fully on page 3. . . . .  Yes  No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? If yes, explain . . . . .  Yes  No
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? If not, explain . . . . .  Yes  No
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? . . . . .  Yes  No  
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? . . . . .  Yes  No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? . . . . .  Yes  No
12. Does the applicant owe municipal property taxes, assessments, or other fees? . . . . .  Yes  No  
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

**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.

Contact Person's Name (Last, First, M.I.) Doman, Kristi M	Title / Member owner/agent	Date 4/12/21
Signature 	Phone Number 715 209 4863	Email Address asnugpub@yahoo.com

**TO BE COMPLETED BY CLERK**

Date received and filed with municipal clerk 4/14/21	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

# Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07/01/2021 ending: 06/30/2022  
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the:  Town of } WASHBURN  
 Village of }  
 City of }

County of BAYFIELD Aldermanic Dist. No. \_\_\_\_\_  
 (if required by ordinance)

Check one:  Individual  Limited Liability Company  
 Partnership  Corporation/Nonprofit Organization

Complete A or B. All must complete C.

## A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

## B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company <u>KARLYN Yellowbird Gallery LLC</u>	Address of Corporation / Limited Liability Company (if different from licensed premises) <u>318 W. BAYFIELD ST. WASHBURN, WI 54891</u>
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All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent.

Agent Last Name <u>Piercy</u>	(First) <u>RONALD</u>	(Middle Name) <u>✓</u>	Home Address (Street, City or Post Office, & Zip Code) <u>318 W. BAYFIELD ST WASHBURN, WI 54891</u>
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## All Officer(s) Director(s) of Corporation and Members / Managers of Limited Liability Company:

President / Member Last Name <u>PIERCY</u>	(First) <u>RONALD</u>	(Middle Name) <u>✓</u>	Home Address (Street, City or Post Office, & Zip Code) <u>318 W. BAYFIELD ST WASHBURN, WI 54891</u>
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 KARLYN'S Business Phone Number 715-373-2922  
 2. Address of Premises 318 W. BAYFIELD ST Post Office & Zip Code WASHBURN, WI 54891

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? ..... Yes  No

4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.)

MEZZANINE BETWEEN THE LOWEST AND HIGHEST LEVELS OF FIRST FLOOR.  
GALLERY IS LOWEST LEVEL, CLASSROOM IS HIGHEST LEVEL.

Applicant's Wisconsin Seller's Permit Number <u>456-1029822727-02</u>	
FEIN Number <u>84-4578755</u>	
TYPE OF LICENSE REQUESTED	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$
<input checked="" type="checkbox"/> Class C wine	\$
<input type="checkbox"/> Class A liquor	\$
<input type="checkbox"/> Class A liquor (cider only)	\$ N/A
<input type="checkbox"/> Class B liquor	\$
<input type="checkbox"/> Reserve Class B liquor	\$
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$
<b>TOTAL FEE</b>	<b>\$</b>

5. Legal description (omit if street address is given on previous page): \_\_\_\_\_
6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, or nonprofit organization licensee been convicted of any offenses (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? If yes, complete page 3 . . . . .  Yes  No
- b. Are charges for any offenses presently pending (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? If yes, explain fully on page 3. . . . .  Yes  No
7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? If yes, explain . . . . .  Yes  No
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? If not, explain . . . . .  Yes  No
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? . . . . .  Yes  No  
[phone (608) 266-2776]
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? . . . . .  Yes  No
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? . . . . .  Yes  No
12. Does the applicant owe municipal property taxes, assessments, or other fees? . . . . .  Yes  No  
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

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Contact Person's Name (Last, First, M.I.) Ron V Pienly	Title / Member 100% member	Date 4/12/2021
Signature 	Phone Number 214-370-8343	Email Address Ron@yellowburiant.us

**TO BE COMPLETED BY CLERK**

Date received and filed with municipal clerk 4/20/21	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk