



REGULAR CITY COUNCIL MEETING MONDAY, JUNE 10, 2019 – 6:00 PM COUNCIL CHAMBERS, CITY HALL

Members:

Mayor Tom Hartz, Council President, John Halverson, Council Vice President, Cindy Flower,
Alderspersons: Selena Proksa, Doug Skates, Tim Dunn, Ken Howell, Shari Straube, and Rich Hedlund

AGENDA

1. Mayor Hartz calls the meeting to order
2. Pledge of Allegiance – Alderperson Hedlund
3. Roll Call
4. Awards, Presentations, Proclamations, and Announcements
5. Re-consider business from previous meeting
6. Comments from the public as allowed by Wis. Stats. §19.84(2), limited to items on this agenda, except for public hearing items. Comments will be limited to 5 minutes
7. Acknowledgement of Correspondence
8. Approve Regular City Council Meeting minutes of May 28, 2019, as prepared and distributed
9. **CONSENT AGENDA**– *Recommended by Finance, Licensing and Regulation on June 4, 2019*
Any item listed on the consent agenda may be removed at the request of any member of the Council. The request requires no second, is not discussed, and is not voted upon.
 - a. 2019-2020 Original & Renewal Operator License applications filed by various applicants as listed in packet
 - b. **Renewal of 2019-2020 “Class A” Intoxicating Liquor & Class “A” Fermented Malt Beverage License applications filed by the following, contingent upon payment of all outstanding liabilities and delinquencies with the City of Lake Geneva and wholesaler invoices, and clearance of any Department of Revenue holds:**
 - 1) ALDI Inc Wisconsin d/b/a ALDI #56, 200 N. Edwards Blvd, Lake Geneva, Ryan McDermid, Agent
 - 2) Cove Condominium Association Inc d/b/a The Cove of Lake Geneva (Gift Shop), 111 Center St, Patrick McCarthy, Agent
 - 3) Kwik Trip Inc d/b/a Kwik Trip #219, 710 Williams St, Stephen Abel, Agent
 - 4) Maya Geneva Inc d/b/a Maya Geneva Inc, 605 Williams St, Wayne Schwartz, Agent
 - 5) Midwest Fuel Inc d/b/a Northside Mobil, 501 Interchange North, John Consolino, Agent
 - 6) Walgreen Co. d/b/a Walgreens #05600, 351 Edwards Blvd, Suzanne Tiedke, Agent
 - 7) Quick and Save LLC d/b/a Quick and Save, 1231 Grant St, Pradip Patel, Agent
 - 8) Stinebrinks Lake Geneva Foods LLC d/b/a Stinebrink’s Piggly Wiggly, 100 East Geneva Sq, Mark Stinebrink, Agent
 - 9) Walmart Stores INC d/b/a Walmart Store #910, 201 S Edwards Blvd, Rebecca Edwards, Agent
 - 10) Target Corp d/b/a Target Store T2348, 660 N Edwards Blvd, Katherine Johnson, Agent
 - 11) StopNGo of Madison INC d/b/a StopNGo Store # 265, 896 Wells St, Andrew Bowman, Agent
 - 12) New World Wine Shop INC d/b/a New World Wine Shop, 830 W Main St Suite G, Jerry Sibbing, Agent

- 13) Prairie State Enterprises of Darien LLC d/b/a Lake Geneva Mobil, 350 N Edwards Blvd, Kenneth Kearns, Agent
 - 14) Queso LLC d/b/a The Cheese Box, 801 S Wells St, Zbigniew Boroweic, Agent
 - 15) Brutap LLC d/b/a Bruno's Liquors, 524 Broad St, James Sharkus, Agent
- c. Renewal of 2019-2020 "Class A" Intoxicating Liquor License application filed by the following, contingent upon payment of all outstanding liabilities and delinquencies with the City of Lake Geneva and wholesaler invoices, and clearance of any Department of Revenue holds:**
- 1) Lake Geneva School of Cooking LLC d/b/a Lake Geneva School of Cooking, 727 Geneva St, John Bogan, Agent
 - 2) Lake-Ben INC d/b/a Cornerstone Shop & Gallery, 214 Broad St, Karin Bennett, Agent
- d. Renewal of 2019-2020 "Class B" Intoxicating Liquor & Class "B" Fermented Malt Beverage License (Hotel Exemption) application filed by the following, contingent upon payment of all outstanding liabilities and delinquencies with the City of Lake Geneva and wholesaler invoices, and clearance of any Department of Revenue holds**
- 1) Cove Condominium Association Inc d/b/a The Cove of Lake Geneva, 111 Center St, Patrick McCarthy, Agent
 - 2) Harbor Shores Hotel Management INC d/b/a Harbor Shores on Lake Geneva, 300 Wrigley Dr, William Strangeway, Agent
- e. Renewal of 2019-2020 Class "B" Fermented Malt Beverage & "Class C" Wine License applications filed by the following, contingent upon payment of all outstanding liabilities and delinquencies with the City of Lake Geneva and wholesaler invoices, and clearance of any Department of Revenue holds:**
- 1) Beachside Hospitality Inc d/b/a Barriquee Wine & Brew Bar, 835 Wrigley Dr, Nancy Trilla, Agent
 - 2) Simple Café LLC d/b/a Simple Café, 525 Broad St, Thomas Hartz, Agent
 - 3) Plaza Media LLC d/b/a Geneva Theater, 244 Broad St, Shad Branen, Agent
 - 4) Martins Olympic Restaurant LLC d/b/a Olympic Restaurant, 748 Main St, Yolanda Zavaleta, Agent
 - 5) Happy Restaurant INC d/b/a Happy Café, 526 Wells St, Min Ting Zhong, Agent
 - 6) Breakfast Bungalow LLC d/b/a Great Eggs, 220 Cook St #101, Justin Ochlek, Agent
 - 7) D & D Restaurant Group INC d/b/a Flat Iron Tap, 150 Center St, John Sherman Lindsey, Agent
 - 8) Sabai Sabai Thai Cuisine, INC d/b/a Sabai Sabai Thai Cuisine, 306 Center St, Jirapa Cox, Agent
 - 9) DCRB Inc d/b/a Avant Cycle Café, 234 Broad St, Andrew Gruber, Agent
 - 10) Mama Cimino's LLC d/b/a Mama Cimino's, 131 S Wells St, John Bobak, Agent
 - 11) EYM Pizza of Wisconsin LLC d/b/a Pizza Hut, 801 Williams St, John Dethloff, Agent
 - 12) Ovalle-Perez LLC d/b/a Taqueria el Gallo de Oro, 820 Williams St, Cynthia Perez, Agent
- f. Renewal of 2019-2020 Class "B" Fermented Malt Beverage License application filed by the following, contingent upon payment of all outstanding liabilities and delinquencies with the City of Lake Geneva and wholesaler invoices, and clearance of any Department of Revenue holds**
- 1) KNMG Hotels LLC d/b/a Comfort Suites, 300 E Main St, Eric Schmitt, Agent
 - 2) B & B Lake Geneva LLC d/b/a Board & Brush Lake Geneva, 262 Center St, Julie Selby, Agent
- g. Renewal of 2019-2020 "Class B" Intoxicating Liquor & Class "B" Fermented Malt Beverage License applications filed by the following, contingent upon payment of all outstanding liabilities and delinquencies with the City of Lake Geneva and wholesaler invoices, and clearance of any Department of Revenue holds:**
- 1) American Legion Post 24 d/b/a American Legion, 735 Henry St, Charles Schlehlein, Agent
 - 2) Harry's Café & Place Inc d/b/a Harry's Café, 808 Main St, James Chironis, Agent
 - 3) Medusa Grill & Bistro LLC d/b/a Medusa Grill & Bistro, 501 Broad St, Gregory Anagnos, Agent
 - 4) Popeye's Galley & Grog LTD d/b/a Popeye's on Lake Geneva, 811 Wrigley Dr, Veronica Anagnos, Agent
 - 5) Gleneagles LLC d/b/a Sopra, 724 W Main St, Alastair Cumming, Agent
 - 6) Capitol Geneva LLC d/b/a Sprecher's Restaurant & Pub, 111 Center St, Susan Getgen, Agent
 - 7) Stone Soup LLC d/b/a Baker House, 327 Wrigley Dr, Roland Wolff, Agent
 - 8) Mercedes or Bust LLC d/b/a The Bottle Shop, 617 W Main St, Elizabeth Tumas, Agent

- 9) 422 S. Wells St. LTD d/b/a Celebration on Wells, 422 S Wells St, Charles Lorenzi, Agent
- 10) L&B Main Street Inc d/b/a Champs Sports Bar & Grill, 747 W Main St, Jessica Bush, Agent
- 11) Chubby Kitty LLC d/b/a Fat Cat's, 104 Broad St, Mark Basil, Agent
- 12) Hogs & Kisses Inc d/b/a Hogs & Kisses, 149 Broad St, Linda Chironis, Agent
- 13) Sandal Inc d/b/a Lake Geneva Lanes, 192 E Main St, Franklin Guske, Jr, Agent
- 14) Geneva Bay Club LLC d/b/a Maxwell Mansion, 421 Baker St, Charles Fritz IV, Agent
- 15) DCR Restaurant Group LLC d/b/a Next Door Pub & Pizzeria, 411 Interchange North, Chad Bittner, Agent
- 16) SS2 Inc d/b/a The Red Geranium Restaurant, 393 N Edwards Blvd, Troy Bartz, Agent
- 17) Two Thumbs Up LLC d/b/a Thumbs Up, 260 Broad St, Benjamin Barels, Agent
- 18) LG Hospitality Group LLC d/b/a Tuscan Tavern & Grill, 430 Broad St, James Georgalas, Agent
- 19) Oakfire LLC d/b/a Oakfire, 831 Wrigley Dr, David Scotney, Agent

h. Renewal of 2019-2020 "Class B" Winery License & Class "B" Fermented Malt Beverage License application filed by Jackson Wine LLC d/b/a Studio Winery, 401 Sheridan Springs Rd., Kathleen Jackson, Agent, contingent upon payment of all outstanding liabilities and delinquencies with the City of Lake Geneva and wholesaler invoices, and clearance of any Department of Revenue holds

i. Renewal of 2019-2020 Reserve "Class B" Intoxicating Liquor & Class "B" Fermented Malt Beverage License applications filed by the following, contingent upon payment of all outstanding liabilities and delinquencies with the City of Lake Geneva and wholesaler invoices, and clearance of any Department of Revenue holds:

- 1) Lake Aire LLC d/b/a Lake Aire Restaurant, 804 W Main St, George Argiropoulos, Agent
- 2) Harborside Pub & Grill LLC d/b/a Harborside Pub & Grill, 100 Broad St, Spyro Condos, Agent
- 3) Su Wings Corp d/b/a Su Wing's Chinese, 743 North St, Siu Wing Leung, Agent
- 4) Bella Vista Suites on the Shores of Lake Geneva, INC d/b/a Bella Vista Suites on the Shores of Lake Geneva, 335 Wrigley Dr, Charles Lorenzi, Agent

j. Renewal of 2019-2020 Massage Establishment License applications filed by the following:

- 1) Element Massage Studio, 647 W Main St
- 2) Lake Geneva Massage Therapy, 905 Marshall St
- 3) Healing Muscle Therapies, 201 Broad St Suite D
- 4) Clear Waters Salon Spa, 734 Main St
- 5) Bella Vista Suites and the Lakeview Spa, 335 Wrigley Dr
- 6) Therapeutic Touch, 601 W Main St

k. Renewal 2019-2020 of Taxi Cab Company License applications filed by the following *(Approval contingent upon favorable review of Insurance by City Attorney)*

- 1) Senior Cab, W3099 Krueger Rd
- 2) Lakefront Shuttle, 300 Wrigley Dr

10. Items Removed from the Consent Agenda

11. First Reading of Ordinance 19-09 an ordinance amending sub-sub-subsection 1a, Land Use requirement of sub-subsection (y), Tourist Rooming House, of subsection (8) Accessory Land Uses, of Section 98-206, Detailed Land Use descriptions and regulations of Chapter 98: Zoning Ordinance, of the City of Lake Geneva Zoning Ordinance to clarify where Tourist Rooming House may be located

12. Second Reading of Ordinance 19-08 an ordinance amending Chapter 62, Streets, Sidewalks and other Public Places, Article III, Obstructions and Encroachments, Section 62-67, exceptions, by adding Subsection (9), Sidewalk Furnishings: Benches and Planters within Public Rights-Of-Way, allowing certain furnishings within the Public Right-Of-Way

13. Discussion/Action regarding amending provisions of the City of Lake Geneva ordinance concerning Child Safety Zones

14. Recommendation of the Finance, Licensing, and Regulation Committee of June 4, 2019- Ald Howell

- a. Discussion/Action regarding **Resolution 19-R43** authorizing the use of Contingency funds for additional Comprehensive Plan workshops and focus groups, in an amount not to exceed \$6,716
- b. Discussion/Action regarding **Resolution 19-R44** updating of City of Lake Geneva Wage Scale for Full-Time Employees
- c. Discussion/Action regarding **Resolution 19-R45** updating of City of Lake Geneva Wage Scale for Part-Time Employees
- d. Discussion/Action regarding update to City of Lake Geneva Compensation Policy

15. Adjournment

Requests from persons with disabilities, who need assistance to participate in this meeting or hearing, should be made to the City Clerk's office in advance so the appropriate accommodations can be made.

REGULAR CITY COUNCIL MEETING MINUTES
TUESDAY, MAY 28, 2019 – 6:00 PM
COUNCIL CHAMBERS, CITY HALL

Members: Mayor Tom Hartz, Council President, John Halverson, Council Vice President, Cindy Flower, Alderpersons: Selena Proksa, Doug Skates, Tim Dunn, Ken Howell, Shari Straube, and Rich Hedlund

Mayor Hartz called the meeting to order at 6:00 p.m.

Aldersperson Halverson led the Council in the Pledge of Allegiance.

Roll Call

Present: Proksa, Skates, Dunn, Flower, Straube, Halverson, Hedlund, and Howell

Absent: None

Awards, Presentations, Proclamations, and Announcements

Patty Holwick Retirement Certificate of Recognition

Mayor Hartz recognized Patty Holwick's retirement and her years of service to the City.

Charles Gray Retirement Certificate of Recognition

Mayor Hartz recognized Charles Gray's retirement and his years of service to the City.

Re-consider business from previous meeting

None

Comments from the public as allowed by Wis. Stats. §19.84(2), limited to items on this agenda, except for public hearing items. Comments will be limited to 5 minutes

Melissa Rouse; 218 Skyline Dr; Spoke in favor of the approval of Ordinance 19-08. She also spoke in favor of looking at the current ordinance that bans merchandise to be displayed outside.

Bob Lee; 120 Broad St; Spoke in opposition of the approval of Ordinance 19-08 and spoke in opposition to the current ordinance (98-206) which bans merchandise being displayed outside a store.

Kevin Flemming; 1032 Wisconsin St; Spoke in favor of the approval of Ordinance 19-08.

Demitri Anaganos; 1040 Cass St; Spoke in opposition of the closure of Wrigley Drive.

Richard Madaus; 310 Walworth St; Spoke in opposition of the sign to be placed at West end Pier that would prohibit fishing.

Charlene Klein; 1018 Wisconsin St; Spoke in regards to the General Development Plan and Precise Implementation Plan for 940 Maytag Rd. She also spoke in opposition to the approval of the event permit for Knockerball.

Acknowledgement of Correspondence

Clerk Kropf noted that she received one item of correspondence from Tammie Carstensen speaking in favor of the Knockerball Permit being approved. This correspondence has been distributed to the Council.

Approve Regular City Council Meeting minutes of May 13, 2019, as prepared and distributed

Motion by Skates to approve, second by Heldund. No discussion. Motion carried 8-0.

CONSENT AGENDA– Recommended by Finance, Licensing and Regulation on May 21, 2019

Any item listed on the consent agenda may be removed at the request of any member of the Council. The request requires no second, is not discussed, and is not voted upon.

-2019-2020 Original & Renewal Operator License applications filed by various applicants as listed in packet

-Agent Change for EYM Pizza of Wisconsin LLC d/b/a Pizza Hut to John Dethloff

-Agent Change for Stone Soup LLC d/b/a Baker House to Robert Lopez

-Agent Change for Quick and Save LLC d/b/a Quick and Save to Pradip Patel

-Agent Change for Target Corporation d/b/a Target Store T2348 to Katherine Johnston

-Agent Change for D & D Restaurant Group Inc d/b/a Flat Iron Tap to John Sherman Lindsey

Motion by Hedlund to approve the consent agenda, second by Halverson. No discussion. Motion carried

Items Removed from the Consent Agenda

None

Second Reading of **Ordinance 19-04** an ordinance creating Section 6-37, Operator Licenses, of Division 1, Generally, of Article II, Licenses, of Chapter 6, Alcohol Beverages, of the Municipal Code of the City of Lake Geneva; Relating to the Issuance of Operator Licenses to serve or sell alcohol

Motion by Hedlund to approve Ordinance 19-04, second by Flower. Hedlund spoke in favor of the ordinance as it will help the City Clerk and Police Chief with the approval process. Motion carried 8-0.

First Reading of **Ordinance 19-08** an ordinance amending Chapter 62, Streets, Sidewalks and other Public Places, Article III, Obstructions and Encroachments, Section 62-67, exceptions, by adding Subsection (9), Sidewalk Furnishings: Benches and Planters within Public Rights-Of-Way, allowing certain furnishings within the Public Right-Of-Way
Mayor Hartz offered Ordinance 19-08 as a first reading and stated that the Council will be able to take action at the next meeting.

Discussion/Action regarding **Resolution 19-R38** a resolution updating the City of Lake Geneva Schedule of Fees; Updating the fees for City of Lake Geneva Operator Licenses

Motion by Howell to approve Resolution 19-R38, second by Hedlund. No discussion. Motion carried 8-0.

Recommendation of the Finance, Licensing, and Regulation Committee of May 21, 2019- Ald Howell

Discussion/Action regarding an application for a "Class A" Intoxicating Liquor License and Class "A" Fermented Malt Beverage License filed by Simple Spirits Inc d/b/a Geneva Liquors, Agent, Sachdeva Rajesh located at 797 S Wells St, Lake Geneva, WI

Motion by Howell to approve, second by Hedlund. Howell noted that this was approved by the Finance Committee on May 7, 2019. Motion carried 8-0.

Discussion/Action regarding the purchase of two standing mowers from Larry's Towing in an amount not to exceed \$16,308 to be paid from the Equipment Replacement Fund

Motion by Howell to approve, second by Flower. Howell noted that these mowers see the most use and are being purchased locally. Mayor Hartz noted that there were three bids received for this purchase. Motion carried 8-0.

Discussion/Action regarding **Resolution 19-R37** a resolution authorizing the carryover of 2018 Equipment Replacement Funds to the 2019 Equipment Replacement Fund Budget and authorizing additional 2019 purchases from the Equipment Replacement Fund

Motion by Howell to approve, second by Hedlund. Finance Director Hall stated that the City Hall HVAC update was approved in the 2018 budget, however it was completed until 2019. She did indicate that the other charge was for an emergency ambulance purchase. Motion carried 8-0.

Discussion/Action regarding an Event Permit Application filed by Knockerball Southern Lakes LLC requesting the use of Seminary Park on Fridays, Saturdays, Sundays, and Mondays from May 31, 2019 to August 11, 2019 and August 20, 2019 to September 2, 2019 from 11:00 a.m. to 10:00 p.m.; Applicant is requesting use of boat trailer parking stall at a rate of \$11 per day of use total cost \$561; Finance, Licensing, and Regulation Committee approved the refund of overpayment in the amount of \$514

Motion by Howell to approve, second by Skates. Howell noted that the Finance Committee did restrict the number of days and the committee thought it was be a good activity downtown. Howell noted that this would be a trial for the year. Motion carried 8-0.

Discussion/Action regarding purchase and installation of sign at West End Pier; Sign to be crafted from Aluminum composite material in an amount not to exceed \$565 to be paid from the Lakefront Fund

Motion by Howell to approve, second by Hedlund. Howell noted that this option was the least exclusive from the gate option that was previously discussed. Skates noted that this rendering has several grammatical errors and that the “Do Not Enter” should be removed. Flower stated that she would like to see the “Pier is for Boat Slip Renters Only” removed as well as it is a public pier. The motioner and second agreed to remove the “Do Not Enter” , “Pier is for Boat Slip Renters Only”, and indicated that the sign should say “No Unleashed Dogs” from the sign as part of the motion.

Second Amendment: The sign should remove the “Pier is for Boat Slip Renters Only” and indicated “No Non-Tenant Unleashed Dogs”. Second amendment carried 8-0.

First Amendment: The Sign should say “City of Lake Geneva” not City of Lake Genena, West End Pier should be two words, and that the sign should indicate “No Unleashed Dogs”. Motion carried 8-0.

The original motion was then read and carried 8-0.

Recommendation of the Plan Commission of May 20, 2019- Ald Skates

Discussion/Action regarding **Resolution 19-R42** for an application for Land Division Review – Plat of Condominium for McMurr II, LLC. 351W. Hubbard, suite 610. Chicago, IL 60654. To file the declaration and Plat of Condominium for the property located in the Summerhaven Subdivision on Lake Geneva Blvd. for the 4 dwelling units on Murry Dr., to create 4 buildable lots as identified on the certified survey map dated 4/2/2019 project no. 8868 prepared by Farris, Hansen & Associates Inc. for Tax Key No. ZSUM00001

Motion by Skates to approve, second by Dunn. Skates noted that this is the final action for Phase II of this development. Motion carried 8-0.

Discussion/Action regarding **Resolution 19-R41** for a Conditional Use Permit filed by Douglas Powell, 1014 W. Altgeld St., Chicago, IL 60614, for the installation and addition of 20’ long section of pier for a total length of 83’ located at 1540 Lake Shore Dr., located within the Estate Residential – 1 (ER-1) zoning district, Tax Key No. ZLM00047

Motion by Skates to approve contingent on DNR approval, second by Flower. No discussion.

Discussion/Action regarding an application for a General Development Plan (GDP) filed by Patrick & Rachel Lynch, 30715 Cedar Drive, Burlington, WI 53105, requesting to allow the razing and reconstruction of a new Single Family Home and to rebuild the structure closer to the lakeshore than the existing foundation. This request in addition would allow the new structure to be in-line with the neighboring dwellings. The property is located at 940 Maytag Rd., situated in Estate Residential (ER- 1) zoning district and to utilize the Single Family – 4 (SR-4) setbacks, Tax Key No. ZCE00005
Motion by Skates to approve with staff recommendations and findings of fact in the affirmative, second by Hedlund. Skates noted that this was brought back to the Plan Commission from the Council. Skates noted that the Plan Commission did agree that this would be allowable is it was in line with the neighboring homes. Motion carried 8-0.

Discussion/Action regarding Resolution 19-R39 for an application for a Precise Implementation Plan (PIP) filed by Patrick & Rachel Lynch, 30715 Cedar Drive, Burlington, WI 53105, requesting to allow the razing and reconstruction of a new Single Family Home and to rebuild the structure closer to the lakeshore than the existing foundation. This request in addition would allow the new structure to be in-line with the neighboring dwellings. The property is located at 940 Maytag Rd., situated in Estate Residential (ER- 1) zoning district and to utilize the Single Family – 4 (SR-4) setbacks, Tax Key No. ZCE00005

Motion by Skates to approve with staff recommendations and finding of fact in the affirmative, second by Hedlund. Skates noted that this plan would help any potential water issues that could be presented. Mayor Hartz noted that their landscape plan follows the recommendations of the DNR as it relates to creating habitats for native animal species. Motion carried 8-0.

Discussion/Action regarding Resolution 19-R40 a resolution recommending the adoption of a Public Participation Plan for the update of the Comprehensive Plan for the City of Lake Geneva, Wisconsin

Motion by Skates to approve 19-R40, second by Flower. No discussion. Motion carried 8-0.

Discussion/Action regarding approving additional funds to facilitate a second Comprehensive Plan Vision Workshop, Comprehensive Plan workshops with the aldermanic districts, and Comprehensive Plan focus groups with Spanish speaking citizens in an amount not to exceed \$6,716 to be paid from the contingency fund

Motion by Skates to approve, second by Flower. Skates gave the price breakdown for the various additional workshops and gave ideas where the aldermanic meetings might take place. Mayor Hartz noted that these additional meetings will add approximately a month to the timeline, however the City will still be on schedule to complete the Comprehensive Plan by the end of the year. Motion carried 8-0.

Presentation of Accounts – Ald. Howell (Recommended by the Finance, Licensing and Regulation Committee on May 21, 2019)

Prepaid Bills in the amount of \$55,286.04

Motion by Howell to approve, second by Straube. No discussion. Motion carried 8-0.

Regular Bills in the amount of \$124,416.32

Motion by Howell to approve, second by Skates. No discussion. Motion carried 8-0.

Motion to go into Closed Session pursuant to Wis. Stat. 19.85(1)(b) considering dismissal, demotion, licensing or discipline of any public employee or person licensed by a board or commission or the investigation of charges against such person, or considering the grant or denial of tenure for a university faculty member, and the taking of formal action on any such matter; provided that the faculty member or other public employee or person licensed is given actual notice of any evidentiary hearing which may be held prior to final action being taken and of any meeting at which final action may be taken. The notice shall contain a statement that the person has the right to demand that the evidentiary hearing or meeting be held in open session regarding: Operator License Denial for Amanda Brasseaux

Motion by Hedlund to convene the Council into Closed Session to include City Staff and the applicant, second by Skates. The motion carried on a roll call vote 8-0. The Council convened into Closed Session at 7:27 p.m.

Motion to return to open session pursuant to Wisconsin Statutes 19.85 (2) and take action on any items discussed in closed session

Motion by Howell to reconvene the Council into Open Session, second by Halverson. The motion carried 8-0 on a roll call vote. The Council reconvened into Open Session at 8:02 p.m.

Motion by Hedlund to grant the issuance of the Operator License for a six month probationary period contingent upon the applicant disclosing her employer, second by Flower. Motion carried 8-0.

Adjournment

Motion by Flower to adjourn second by Skates. The motion carried 8-0. The meeting adjourned at 8:04 p.m.

Original License:

Leigh Ann Myers
Mckinley Veith
Brandon Coolman
Paul Meckler
Sarah Siudak
Kendra Holmes
Samantha Knapp
Brianna Kincaid
Andrea Behm
John Nichols
Sharon Klein
Antoinette Moritz

Renewal Operator:

Roxanne Smith
Calli Brellenthin
Jessica Jenner
Eric Rude
Alexander Klotz
Charles Rude
Moises Garcia
Jean Morales
Amanda Morales
Nicholas Grimme
James Georgalas
Jessica Christenson
Dean Leptich
Evan Knutson
Megan Hall
Chelsea Matthews
Steven Hahn
Michael Fryar
Timothy Stinebrink
Andrew Newcomb
Thomas Trilla
Dana Trilla
Linda Diamond
Alexander Gygax
Kyle Cary
Amor Sanchez
Henri Lorenzi
Amanda Andrews
Ransi Lei
Kelly Lei
Varsha Shah

Kevin Dickey
Anthony Silverstri
Barbara Morris
Beth Jurgensen
Dawn Hancock
Sheila Miller
Laura Lopresto
Chandler Carlson
Wendy Brewington
Kevin Kazimier
Kelsie Rammel
Nancy Lazansky
Crystal Bauman
Jennifer Jones
Scott Fazel
Chase Brugger
Emily Mills
Amy Yachik
Dan Kuhl
Nicholas Bertram
Kevin Andresen
Rhonda Holden
Zachary Belanus
Cynthia Wisniewski
Rachael Engelhardt
Veronika Vigil
David Stinebrink
Robert Peters
Terence Conell
Wendy Anderson
Donald Weber
Chaz Wagner
Wayne Sertzel Jr.
Catherine Petrassi
Tai Serna
Michelle Bane
Austen Racette
Paul Ochalek
Kendra Feld
Kevin Smith
Kathleen Consolino

DAK #56

Renewal Alcohol Beverage License Application

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07 01 2019 ending: 06 30 2020
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of } LAKE GENEVA
 Village of }
 City of }

County of WALWORTH Aldermanic Dist. No. _____ (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Applicant's WI Seller's Permit No.: 456000008901401		FEIN Number: 36-3498392	
LICENSE REQUESTED ▶			
TYPE	FEE		
<input checked="" type="checkbox"/> Class A beer	\$	100	
<input type="checkbox"/> Class B beer	\$		
<input type="checkbox"/> Class C wine	\$		
<input checked="" type="checkbox"/> Class A liquor	\$	500	
<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	\$	25	
TOTAL FEE	\$	625	

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name(s) (Last, First and Middle Name)	Home Address	Post Office & Zip Code
-	-	-

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company ▶ ALDI, INC (WISCONSIN)
Address of Corporation/Limited Liability Company (if different from licensed premises) ▶ 9342 S. 13TH ST. OAK CREEK, WI
All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company:

Title	Name (Inc. Middle Name)	Home Address	Post Office & Zip Code
President/Member	<u>CHARLES E. YOUNGSTROM</u>	-	-
Vice President/Member	<u>N/A</u>	-	-
Secretary/Member	<u>TERRY E. PFORTMILLER</u>	-	-
Treasurer/Member	<u>TERRY E. PFORTMILLER</u>	-	-
Agent	<u>RYAN MCDERMID</u>	-	-
Directors/Managers	<u>RYAN MCDERMID</u>	-	-

C. 1. Trade Name ▶ ALDI #56 Business Phone Number 262-249-0205

2. Address of Premises ▶ 200 N. EDWARDS BLVD Post Office & Zip Code ▶ LAKE GENEVA 53147

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 BRICK BLDG: SALES/BACKRM

5. Legal description (omit if street address is given above): GROCERY STORE

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, corporation 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 reverse side** 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 reverse side** 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

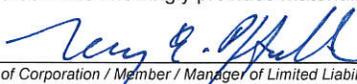
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? If not, explain. Yes No

9. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776] Yes No

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

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.


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

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>May 1, 2019</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 reverse side.

For the license period beginning: 07 01 2019 ending: 06 30 2020
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of Village of City of } LAKE GENEVA

County of WALWORTH Aldermanic Dist. No. _____ (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name(s) (Last, First and Middle Name) Home Address Post Office & Zip Code 43019
 ▶ MCCARTHY, PATRICK JOSEPH 10 KINGSWOOD CIRCLE, VERONA, WI 53593

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company ▶ COVE CONDOMINIUM ASSOCIATION, INC.

Address of Corporation/Limited Liability Company (if different from licensed premises) ▶ _____

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

Title	Name (Inc. Middle Name)	Home Address	Post Office & Zip Code
President/Member	<u>KAYE ROSE LOWMAN</u>	_____	_____
Vice President/Member	<u>JAMES ALAN PATERA</u>	_____	_____
Secretary/Member	<u>PATRICK JOSEPH MCCARTHY</u>	_____	_____
Treasurer/Member	<u>MARK WILLIAM DUSKI</u>	_____	_____
Agent	<u>PATRICK JOSEPH MCCARTHY</u>	_____	_____
Directors/Managers	<u>MARK WILLIAM DUSKI</u>	_____	_____

C.1. Trade Name ▶ THE COVE OF LAKE GENEVA Business Phone Number 262-249-9460

2. Address of Premises ▶ 111 CENTER STREET Post Office & Zip Code ▶ LAKE GENEVA 53147

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.) A. GIFT SHOP AND STORAGE

5. Legal description (omit if street address is given above): _____

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, corporation 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 reverse side** 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 reverse side** 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? [phone (608) 266-2776] Yes No

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

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.

Patrick Joseph McCarthy

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

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>Apr 30, 2019</u>	Date reported to council/board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Applicant's WI Seller's Permit No.: <u>456-1020042-03</u>	FEIN Number: <u>39-1819821</u>
LICENSE REQUESTED ▶	
TYPE	FEE
<input checked="" type="checkbox"/> Class A beer	\$ 100
<input type="checkbox"/> Class B beer	\$
<input type="checkbox"/> Class C wine	\$
<input checked="" type="checkbox"/> Class A liquor	\$ 500
<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	\$ 25
TOTAL FEE	\$ 625

Agent Changed to Stephen Abel- previously approved

Renewal Alcohol Beverage License Application

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07/01/2019 ending: 06/30/2020
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of Village of City of } Lake Geneva City of

County of Walworth Aldermanic Dist. No. _____ (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name(s) (Last, First and Middle Name) Home Address

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company Kwik Trip, Inc.

Address of Corporation/Limited Liability Company (if different from licensed premises) PO Box 2107, La Crosse, WI 54602-2107

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

Title Name (Inc. Middle Name) Home Address Post Office & Zip Code
President/Member President, Donald Paul Zietlow _____ La Crosse, WI 54601

Vice President/Member _____

Secretary/Member _____

Treasurer/Member Treasurer, Jeffrey James Wrobel _____

Directors: Donald P. Zietlow

C. 1. Trade Name KWIK TRIP 219

2. Address of Premises 710 Williams St Business Phone Number 262/249-0523

Post Office & Zip Code Lake Geneva, 53147

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 frame construction with storage in lockable walk-in cooler & cabinetry

5. Legal description (omit if street address is given above): _____

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, corporation 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 reverse side** 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 reverse side** 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? [phone (608) 266-2776] Yes No

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

Applicant's WI Seller's Permit No.: <u>456-0000287614-03</u>		FEIN Number: <u>39-1036365</u>	
LICENSE REQUESTED			
TYPE	FEE		
<input checked="" type="checkbox"/> Class A beer	\$	<u>100.00</u>	
<input type="checkbox"/> Class B beer	\$		
<input type="checkbox"/> Class C wine	\$		
<input checked="" type="checkbox"/> Class A liquor	\$	<u>500.00</u>	
<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	\$	<u>25.00</u>	
TOTAL FEE	\$	<u>625.00</u>	

Post Office & Zip Code pd 419119

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.

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

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>4/9/19</u>	Date reported to council/board	Date license granted
License number issued <u>18.000001</u>	Date license issued	Signature of Clerk / Deputy Clerk

RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07/01/2019 ending: 06/30/2020
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of } LAKE GENEVA
 Village of }
 City of }

County of WALWORTH Aldermanic Dist. No. _____ (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Applicant's WI Seller's Permit No.: 456102921698802		FEIN Number: 814710508	
LICENSE REQUESTED ▶			
TYPE		FEE	
<input checked="" type="checkbox"/> Class A beer		\$	100
<input type="checkbox"/> Class B beer		\$	
<input type="checkbox"/> Class C wine		\$	
<input checked="" type="checkbox"/> Class A liquor		\$	500
<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		\$	25
TOTAL FEE		\$	625

Complete A or B. All must complete C.

A. Individual or Partnership:
Full Name(s) (Last, First and Middle Name) SHIKHA DADHWAL

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company ▶ MAYA GENEVA INC
 Address of Corporation/Limited Liability Company (if different from licensed premises) ▶ _____

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

Title	Name (Inc. Middle Name)	Home Address	Post Office & Zip Code
President/Member			
Vice President/Member			
Secretary/Member			
Treasurer/Member			
Agent ▶	<u>WAYNE WARREN SCHWARTZ</u>		
Directors/Managers			

C. 1. Trade Name ▶ MAYA GENEVA INC Business Phone Number 2622482248
 2. Address of Premises ▶ 605 WILLIAMS ST LAKE GENEVA Post Office & Zip Code ▶ 53147

- 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.) GAS STATION/CONVINENCE STORE/BEER COOLER/LIQUOR BEHIND COUNTER
- Legal description (omit if street address is given above): _____
- 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, corporation 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 reverse side** 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 reverse side** Yes No
- 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
- 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
- Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776] Yes No
- 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
- Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? Yes No

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 signers. Signers agree to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants and each member of a partnership applicant must sign; corporate officer(s), members/managers of Limited Liability Companies must sign.)

SUBSCRIBED AND SWORN TO BEFORE ME

this N/A day of _____, 20____

(Clerk/Notary Public)

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

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

(Additional Partner(s)/Member/Manager of Limited Liability Company if Any)

My commission expires _____

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>May 8, 2019</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 reverse side.

For the license period beginning: 07 01 2019 ending: 06 30 2020
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of } LAKE GENEVA
 Village of }
 City of }

County of WALWORTH Aldermanic Dist. No. N/A (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:
Full Name(s) (Last, First and Middle Name) **Home Address** **Post Office & Zip Code**

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company ▶ Midwest Fuel Inc
 Address of Corporation/Limited Liability Company (if different from licensed premises) ▶ _____

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

Title	Name (Inc. Middle Name)	Home Address
President/Member	<u>PRESIDENT JOHN J CONSOLINO</u>	<u>53147</u>
Vice President/Member	_____	_____
Secretary/Member	_____	_____
Treasurer/Member	_____	_____
Agent	<u>JOHN CONSOLINO</u>	_____
Directors/Managers	_____	_____

C. 1. Trade Name ▶ NORTHSIDE MOBILE Business Phone Number 262-248-2910
 2. Address of Premises ▶ SUI INTERCHANGE Post Office & Zip Code ▶ 53147

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.) Liquor dept, sold @ counter, stored in liquor-dept
5. Legal description (omit if street address is given above): _____
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, corporation 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 reverse side** 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 reverse side** 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? [phone (608) 266-2776] Yes No
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

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

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

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>Apr 17, 2019</u>	Date reported to council/board	Date license granted
License number Issued	Date license issued	Signature of Clerk / Deputy Clerk

Applicant's WI Seller's Permit No. / FEIN Number: <u>456102738963902 / 202273799</u>	
LICENSE REQUESTED	
TYPE	FEE
<input checked="" type="checkbox"/> Class A beer	\$ <u>100</u>
<input type="checkbox"/> Class B beer	\$
<input type="checkbox"/> Class C wine	\$
<input checked="" type="checkbox"/> Class A liquor	\$ <u>800</u>
<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	\$ <u>25</u>
TOTAL FEE	\$ <u>625</u>

4/17/19

Renewal Alcohol Beverage License Application

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07/01/2019 ending: 06/30/2020
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of Village of City of } Lake Geneva

County of Walworth Aldermanic Dist. No. _____ (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name(s) (Last, First and Middle Name) **Home Address** **Post Office & Zip Code**

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company ▶ Walgreen Co.

Address of Corporation/Limited Liability Company (if different from licensed premises) ▶ PO Box 901 Deerfield, IL 60015

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

Title	Name (Inc. Middle Name)	Home Address	Post Office & Zip Code
President/Member	<u>Alexander W. Gourley</u>		
Vice President/Member	<u>Mark D. Weisz</u>		
Secretary/Member	<u>Joseph B. Amsbary Jr.</u>		
Treasurer/Member	<u>Hari K. Avula</u>		
Agent	<u>Suzanne Tiedke, Store Manager</u>		
Directors/Managers			

- C. 1. Trade Name ▶ Walgreens #05600 Business Phone Number 262-248-7885
 2. Address of Premises ▶ 351 Edwards Blvd. Post Office & Zip Code ▶ Lake Geneva, WI 53147
 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.) retail drug store with sundries in a one-story building of
 5. Legal description (omit if street address is given above): 15,795 sq ft.
 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, corporation 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 reverse side** 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 reverse side** 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.** Change of Officers 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? [phone (608) 266-2776] Yes No
 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

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.


 (Officer of Corporation / Member / Manager of Limited Liability Company / Partner / Individual)
Joseph Amsbary, Secretary

Applicant's WI Seller's Permit No.: FEIN Number: <u>456-0000455404-05</u> <u>36-1924025</u>	
LICENSE REQUESTED ▶	
TYPE	FEE
<input checked="" type="checkbox"/> Class A beer	\$ 500.00
<input type="checkbox"/> Class B beer	\$
<input type="checkbox"/> Class C wine	\$
<input checked="" type="checkbox"/> Class A liquor	\$ 100.00
<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	\$ 25.00
TOTAL FEE	\$ 625.00

pg 4/17/19

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>Apr 17, 2019</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 reverse side.

For the license period beginning: 07 01 2019 ending: 06 30 2020
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of Village of City of } LAKE GENEVA

County of Waukegan Aldermanic Dist. No. _____ (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name(s) (Last, First and Middle Name) PATEL NARENDRA Home Address _____ Post Office & Zip Code _____

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company QUICK AND SAYE, LLC
 Address of Corporation/Limited Liability Company (if different from licensed premises) _____

All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company:
 Title Name (Inc. Middle Name) Home Address Post Office & Zip Code
 President/Member NARENDRA PATEL _____
 Vice President/Member ANITA PATEL _____
 Secretary/Member _____
 Treasurer/Member PRADIP PATEL _____
 Agent DOORJIT K PATEL _____
 Directors/Managers _____

C. 1. Trade Name QUICK AND SAYE Business Phone Number 608-359-5110
 2. Address of Premises 1231 Grant St, Lake Geneva, WI Post Office & Zip Code 53147

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.) in the front of store, and storage in back office.
5. Legal description (omit if street address is given above): _____
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, corporation 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 reverse side** 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 reverse side** 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? [phone (608) 266-2776] Yes No
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

Applicant's WI Seller's Permit No.: FEIN Number: <u>456103018121002/832192427</u>	
LICENSE REQUESTED	
TYPE	FEE
<input checked="" type="checkbox"/> Class A beer	\$ 1.00
<input type="checkbox"/> Class B beer	\$
<input type="checkbox"/> Class C wine	\$
<input checked="" type="checkbox"/> Class A liquor	\$ 5.00
<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	\$ 25
TOTAL FEE	\$ 625

pd 4/18/19

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.

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

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>Apr 18, 2019</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 reverse side.

For the license period beginning: 07 01 2019 ending: 06 30 2020
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of Village of City of } LAKE GENEVA

County of WALWORTH Aldermanic Dist. No. N/A (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:
 Full Name(s) (Last, First and Middle Name) Home Address Post Office & Zip Code

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company STINEBRINK'S LAKE GENEVA FOODS LLC
 Address of Corporation/Limited Liability Company (if different from licensed premises) [REDACTED]
 All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company:

Title	Name (Inc. Middle Name)	Home Address	Post Office & Zip Code
President/Member	<u>MANAGER MARK EDWARD STINEBRINK</u>	[REDACTED]	[REDACTED]
Vice President/Member	<u>MEMBER BRETT MICHAEL STINEBRINK</u>	[REDACTED]	[REDACTED]
Secretary/Member			
Treasurer/Member			
Agent	<u>MARK STINEBRINK</u>		
Directors/Managers			

C. 1. Trade Name STINEBRINK'S PIGGLY WIGGLY Business Phone Number 262-248-8798
 2. Address of Premises 100 E. GENEVA SQ Post Office & Zip Code LAKE GENEVA 53147

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.) LIQUOR DEPARTMENT IN STORE AND LOCKED
5. Legal description (omit if street address is given above): GROCERY STORE LIQUOR CAGE IN BACK ROOM
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, corporation 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 reverse side** 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 reverse side** 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? [phone (608) 266-2776] Yes No
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

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.

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

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>Apr 9, 2019</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 reverse side.

For the license period beginning: 07 01 2019 ending: 06 30 2020
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of Village of City of } LAKE GENEVA

County of WALWORTH Aldermanic Dist. No. _____ (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name(s) (Last, First and Middle Name) WAL-MART STORES EAST, LP **Home Address** 702 SW 8TH ST., LICENSING DEPT. 8916
Post Office & Zip Code BENTONVILLE, AR 72716-0500 *pd 4/18/19*

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company _____

Address of Corporation/Limited Liability Company (if different from licensed premises) _____

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

Title	Name (Inc. Middle Name)	Home Address	Post Office & Zip Code
President/Member	SEE LIST ATTACHED		
Vice President/Member			
Secretary/Member			
Treasurer/Member			
Agent	SHEILA MILLER, [REDACTED]		
Directors/Managers	SEE LIST ATTACHED		

C. 1. Trade Name WALMART #910 Business Phone Number (262) 248-2266

2. Address of Premises 201 SOUTH EDWARDS BLVD. Post Office & Zip Code LAKE GENEVA, WI 53147

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.) 1 RM., 1 STORY, APPROX. 188,249 SQ. FT. (See Attached)

5. Legal description (omit if street address is given above): _____

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, corporation 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 reverse side** 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 reverse side** 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.** CHANGE OF AGENT 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? [phone (608) 266-2776] Yes No

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

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

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

Applicant's WI Seller's Permit No.: 456-1020028180-05		FFIN Number: 71-0862119	
LICENSE REQUESTED			
TYPE		FEE	
<input checked="" type="checkbox"/> Class A beer		\$ 100 ⁻	
<input type="checkbox"/> Class B beer		\$	
<input type="checkbox"/> Class C wine		\$	
<input checked="" type="checkbox"/> Class A liquor		\$ 500 ⁻	
<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		\$ 25 ⁻	
TOTAL FEE		\$ 625⁻	

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>Apr 18, 2019</u>	Date reported to council/board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

WAL-MART STORES EAST, LP

**Attachment to
Renewal Alcohol Beverage License Application
for Walmart #910**

PREMISES DESCRIPTION

Walmart #910
201 South Edwards Blvd.
Lake Geneva, WI

1 room, 1 story, approximately 188,249 sq. ft. Product is located in coolers and on shelves and end caps in Grocery Department and displayed in seasonal aisles and main aisle in Grocery. Overstock of beer is located on pallets in Receiving area; overstock of alcohol is located in locked room in Receiving area (Managers and Receiving Clerk are only employees with access). Records/receipts are located in Invoice Office in back room.

Renewal Alcohol Beverage License Application

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07/01/2019 ending: 06/30/2020
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of Village of City of } Lake Geneva
 County of Walworth Aldermanic Dist. No. _____ (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name(s) (Last, First and Middle Name)

Home Address

Post Office & Zip Code pd 4/17/19

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company Target Corporation

Address of Corporation/Limited Liability Company (if different from licensed premises) 33 S 6th St, CC-1128 Minneapolis, MN 55402

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

Title

Name (Inc. Middle Name)

Home Address

Post Office & Zip Code

President/Member See attached list

Vice President/Member _____

Secretary/Member _____

Treasurer/Member _____

Agent Katherine Johnson

Directors/Managers _____

C. 1. Trade Name Target Store T2348

2. Address of Premises 660 N Edwards Blvd

Business Phone Number 262-248-5610

Post Office & Zip Code Lake Geneva, WI 53147

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.) No change, see description on file

5. Legal description (omit if street address is given above): _____

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, corporation 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 reverse side** 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 reverse side** 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? [phone (608) 266-2776] Yes No

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 Yes No

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

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

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 reverse side.

Applicant's Wm Seller's Permit No.: 456000015686103	FEIN Number: 39-1018040
LICENSE REQUESTED ▶	
TYPE	FEE
<input checked="" type="checkbox"/> Class A beer	\$ 100
<input type="checkbox"/> Class B beer	\$
<input type="checkbox"/> Class C wine	\$
<input checked="" type="checkbox"/> Class A liquor	\$ 500
<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	\$ 25
TOTAL FEE	\$ 625

For the license period beginning: 07 01 2019 ending: 06 30 2020
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of } LAKE GENEVA
 Village of }
 City of }

County of WALWORTH Aldermanic Dist. No. _____ (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

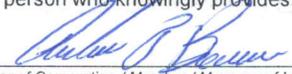
A. Individual or Partnership:
Full Name(s) (Last, First and Middle Name) _____ **Home Address** _____ **Post Office & Zip Code** pd 4117/19

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company ▶ STOP-N-GO OF MADISON, INC.
 Address of Corporation/Limited Liability Company (if different from licensed premises) ▶ 2934 FISH HATCHERY RD, MADISON
 All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company:

Title	Name (Inc. Middle Name)	Home Address
President/Member	ANDREW J BOWMAN	[REDACTED]
Vice President/Member		
Secretary/Member	KEVIN O'BRIEN	[REDACTED]
Treasurer/Member	ANDREW J BOWMAN	[REDACTED]
Agent ▶	ANDREW J BOWMAN	[REDACTED]

- C. 1. Trade Name ▶ STOP-N-GO #265 Business Phone Number 262-248-4582
 2. Address of Premises ▶ 896 WELLS STREET Post Office & Zip Code ▶ LAKE GENEVA 53147
 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.) 39'X60X ALCOHOL STORED IN COOLER & BACK ROOM
 5. Legal description (omit if street address is given above): _____
 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, corporation 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 reverse side** 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 reverse side** 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? [phone (608) 266-2776] Yes No
 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

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.


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

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>APR 17, 2019</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 reverse side.

456-1028896518-02

Applicant's WI Seller's Permit No.:	FEIN Number:
	47-3418492
LICENSE REQUESTED	
TYPE	FEE
<input checked="" type="checkbox"/> Class A beer	\$ 100-
<input type="checkbox"/> Class B beer	\$
<input type="checkbox"/> Class C wine	\$
<input checked="" type="checkbox"/> Class A liquor	\$ 500-
<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	\$ 25-
TOTAL FEE	\$ 625-

PAID 4/18/19

For the license period beginning: 07 01 2019 ending: 06 30 2020
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of Village of City of } LAKE GENEVA

County of WALWORTH Aldermanic Dist. No. N/A (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:
 Full Name(s) (Last, First and Middle Name) Jerry Thomas Sibbing Home Address [Redacted]

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company New World Wine Shop Inc.
 Address of Corporation/Limited Liability Company (if different from licensed premises) [Redacted]

All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company:
 Title Name (Inc. Middle Name) Home Address Post Office & Zip Code
 President/Member Jerry Thomas Sibbing [Redacted]
 Vice President/Member _____
 Secretary/Member _____
 Treasurer/Member _____
 Agent Jerry Thomas Sibbing
 Directors/Managers _____

C. 1. Trade Name New World Wine Shop Business Phone Number 262-812-4086
 2. Address of Premises [Redacted] Post Office & Zip Code Lake Geneva WI 53147

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.) 1W Store
5. Legal description (omit if street address is given above): Fancy Fair Mall 830 W Main St Lake Geneva WI
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, corporation 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 reverse side** 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 reverse side** 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? [phone (608) 266-2776] Yes No
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

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

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

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk Apr 18, 2019	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 reverse side.

For the license period beginning: 07 01 2019 ending: 06 30 2020
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of } LAKE GENEVA
 Village of }
 City of }

County of WALWORTH Aldermanic Dist. No. _____ (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name(s) (Last, First and Middle Name)

Home Address

Post Office & Zip Code

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company ▶ PRAIRIE STATE ENTERPRISES OF DARIEN, LLC

Address of Corporation/Limited Liability Company (if different from licensed premises) ▶ 22285 N. PEPPER RD., UNIT 101, LAKE BARRINGTON, IL 60010

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

Title	Name (Inc. Middle Name)	Home Address	Post Office & Zip Code
President/Member	<u>MEMBER RICHARD JAMES MISTRETTA</u>	[REDACTED]	[REDACTED]
Vice President/Member	<u>MEMBER KENNETH BARTHOLOMEW KEARNS</u>	[REDACTED]	[REDACTED]
Secretary/Member			
Treasurer/Member			
Agent ▶	<u>MEMBER KENNETH BARTHOLOMEW KEARNS</u>	[REDACTED]	[REDACTED]
Directors/Managers			

C. 1. Trade Name ▶ LAKE GENEVA MOBIL Business Phone Number (262) 248-2305

2. Address of Premises ▶ 350 N. EDWARDS BLVD. Post Office & Zip Code ▶ LAKE GENEVA, WI 53147

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, 1 STORY MASONRY & FRAME W/COOLERS, OFFICES & 2 RESTROOMS

5. Legal description (omit if street address is given above): _____

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, corporation 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 reverse side** 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 reverse side** 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? [phone (608) 266-2776] Yes No

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

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

[Signature]
 (Officer of Corporation / Member / Manager of Limited Liability Company / Partner / Individual)
Montana

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>Apr 17, 2019</u>	Date reported to council/board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Applicant's WI Seller's Permit No.: <u>456000234243802</u>	FEIN Number: <u>510416880</u>
LICENSE REQUESTED ▶	
TYPE	FEE
<input checked="" type="checkbox"/> Class A beer	\$ 100
<input type="checkbox"/> Class B beer	\$
<input type="checkbox"/> Class C wine	\$
<input checked="" type="checkbox"/> Class A liquor	\$ 500
<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	\$ 25
TOTAL FEE	\$ 625

pt 4/17/19

Renewal Alcohol Beverage License Application

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07 01 2019 ending: 06 30 2020
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of Village of City of } LAKE GENEVA

County of WALWORTH Aldermanic Dist. No. N/A (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:
Full Name(s) (Last, First and Middle Name) _____ **Home Address** _____ **Post Office & Zip Code** _____

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company Queso Corp LLC
 Address of Corporation/Limited Liability Company (if different from licensed premises) _____
 All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company:

Title	Name (Inc. Middle Name)
President/Member	<u>Zbigniew J Borowiec</u>
Vice President/Member	<u>Cheryl A Borowiec</u>
Secretary/Member	_____
Treasurer/Member	_____
Agent	<u>Zbigniew J Borowiec</u>
Directors/Managers	_____

C. 1. Trade Name The Cheese Box Business Phone Number 262-248-3440
 2. Address of Premises 801 S Wells St Post Office & Zip Code Lake Geneva WI 53179

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.) Cheese box retail space - Storage Room upper level
5. Legal description (omit if street address is given above): _____
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, corporation 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 reverse side** 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 reverse side** 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? [phone (608) 266-2776] Yes No
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

Applicant's WI Seller's Permit No.: <u>4561028621165102/37-1759272</u>	FEIN Number:
LICENSE REQUESTED	
TYPE	FEE
<input checked="" type="checkbox"/> Class A beer	\$ <u>100.00</u>
<input type="checkbox"/> Class B beer	\$
<input type="checkbox"/> Class C wine	\$
<input checked="" type="checkbox"/> Class A liquor	\$ <u>500.00</u>
<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	\$ <u>25.00</u>
TOTAL FEE	\$ <u>625.00</u>

pd 4/22/19

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.

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

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>Apr 22, 2019</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 reverse side.

For the license period beginning: 07 01 2019 ending: 06 30 2020
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of } LAKE GENEVA
 Village of }
 City of }

County of WALWORTH Aldermanic Dist. No. N/A (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name(s) (Last, First and Middle Name)

Home Address

Post Office & Zip Code

▶ SHARKUS JAMES ELIOT

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company ▶

BRUNAP LLC.

Address of Corporation/Limited Liability Company (if different from licensed premises) ▶ 524 Broad St. Lake Geneva WI 53147

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

Title

Name (Inc. Middle Name)

Home Address

Post Office & Zip Code

President/Member JAMES ELIOT SHARKUS

Vice President/Member

Secretary/Member

Treasurer/Member

Agent ▶

Directors/Managers

C. 1. Trade Name ▶ BRUNO'S LIQUORS Business Phone Number 262-248-6407

2. Address of Premises ▶ 524 Broad St. Post Office & Zip Code ▶ 53147 LAKE GENEVA

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.)

5. Legal description (omit if street address is given above):

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, corporation 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 reverse side** 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 reverse side** 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? [phone (608) 266-2776] Yes No

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

Applicant's WI Seller's Permit No.: <u>456102715452303</u> FEIN Number: <u>273223289</u>	
LICENSE REQUESTED ▶	
TYPE	FEE
<input checked="" type="checkbox"/> Class A beer	\$ <u>100-</u>
<input type="checkbox"/> Class B beer	\$
<input type="checkbox"/> Class C wine	\$
<input checked="" type="checkbox"/> Class A liquor	\$ <u>500-</u>
<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	\$ <u>25-</u>
TOTAL FEE	\$ <u>625</u> <i>nd 4/15/19</i>

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.

James E. Shuman
(Officer of Corporation / Member / Manager of Limited Liability Company / Partner / Individual)

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>Apr 15, 2019</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 reverse side.

For the license period beginning: 07 01 2019 ending: 06 30 2020
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of } LAKE GENEVA
 Village of }
 City of }

County of WALWORTH Aldermanic Dist. No. N/A (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name(s) (Last, First and Middle Name)

Home Address

Post Office & Zip Code

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company Lake Geneva School of Cooking LLC
 Address of Corporation/Limited Liability Company (if different from licensed premises)

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

Title	Name (Inc. Middle Name)	Home Address	Post Office & Zip Code
President/Member	<u>John Bernard Bogan</u>	[REDACTED]	[REDACTED]
Vice President/Member			
Secretary/Member			
Treasurer/Member			
Agent	<u>John Bernard Bogan</u>		
Directors/Managers			

C. 1. Trade Name Lake Geneva School of Cooking LLC Business Phone Number 262 248-3933
 2. Address of Premises 727 Geneva St. P.O. Box 1082 Post Office & Zip Code Lake Geneva WI 53147

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.) Retail area within Geneva Village shops, kitchen area

5. Legal description (omit if street address is given above): for cooking, office (basement for storage)

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, corporation 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 reverse side** 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 reverse side** 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? [phone (608) 266-2776] Yes No

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

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.

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

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>Apr 9, 2019</u>	Date reported to council/board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

26-852617

Applicant's WI Seller's Permit No. / FEIN Number: <u>456-1026678393-63</u>	
LICENSE REQUESTED	
TYPE	FEE
<input type="checkbox"/> Class A beer	\$
<input type="checkbox"/> Class B beer	\$
<input type="checkbox"/> Class C wine	\$
<input checked="" type="checkbox"/> Class A liquor	\$ <u>500</u>
<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	\$ <u>25</u> pd + 1919
TOTAL FEE	\$ <u>525</u>

Renewal Alcohol Beverage License Application

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07 01 2019 ending: 06 30 2020
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of } LAKE GENEVA
 Village of }
 City of }

County of WALWORTH Aldermanic Dist. No. N/A (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name(s) (Last, First and Middle Name) Home Address Post Office & Zip Code

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company LAKE BEN INC CORNERSTONE SHOP and GALLERY
 Address of Corporation/Limited Liability Company (if different from licensed premises) LAKE GENEVA WI 53147
 All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company:

Title	Name (Inc. Middle Name)	Home Address	Post Office & Zip Code
President/Member	BRUCE BENNETT	[REDACTED]	[REDACTED]
Vice President/Member	KARIN BENNETT	[REDACTED]	[REDACTED]
Secretary/Member	KARIN BENNETT	[REDACTED]	[REDACTED]
Treasurer/Member	BRUCE BENNETT	[REDACTED]	[REDACTED]
Agent	KARIN BENNETT	[REDACTED]	[REDACTED]

C. 1. Trade Name CORNERSTONE SHOP & GALLERY Business Phone Number 262-248-6988
 2. Address of Premises 214 BROAD STREET Post Office & Zip Code LAKE GENEVA WI 53147

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.) RETAIL STORE - 214 BROAD ST. LAKE GENEVA WI
5. Legal description (omit if street address is given above): see attached map 53147
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, corporation 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 reverse side** 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 reverse side** 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? [phone (608) 266-2776] Yes No
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

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

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

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>Apr 15, 2019</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 reverse side.

For the license period beginning: 07 01 2019 ending: 06 30 2020
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of } LAKE GENEVA
 Village of }
 City of }

County of WALWORTH Aldermanic Dist. No. _____ (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name(s) (Last, First and Middle Name) **Home Address** **Post Office & Zip Code**
 ▶ MCCARTHY, PATRICK JOSEPH 10 KINGSWOOD CIRCLE, VERONA, WI 53593 pg 4130/19

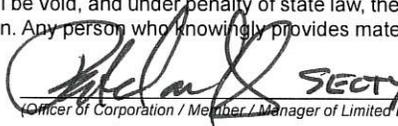
B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company ▶ COVE CONDOMINIUM ASSOCIATION, INC.
 Address of Corporation/Limited Liability Company (if different from licensed premises) ▶ _____
 All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company:

Title	Name (Inc. Middle Name)	Home Address	Post Office & Zip Code
President/Member	<u>KAYE ROSE LOWMAN</u>	_____	_____
Vice President/Member	<u>JAMES ALAN PATERA</u>	_____	_____
Secretary/Member	<u>PATRICK JOSEPH MCCARTHY</u>	_____	_____
Treasurer/Member	<u>MARK WILLIAM DUSKI</u>	_____	_____
Agent	<u>PATRICK JOSEPH MCCARTHY</u>	_____	_____
Directors/Managers	<u>MARK WILLIAM DUSKI</u>	_____	_____

C. 1. Trade Name ▶ THE COVE OF LAKE GENEVA Business Phone Number 262-249-9460
 2. Address of Premises ▶ 111 CENTER STREET Post Office & Zip Code ▶ LAKE GENEVA 53147

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.) B. INDOOR POOL, OUTDOOR POOL, MEETING ROOMS AND STORAGE
5. Legal description (omit if street address is given above): _____
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, corporation 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 reverse side** 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 reverse side** 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? [phone (608) 266-2776] Yes No
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

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.



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

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>Apr 30, 2019</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 reverse side.

For the license period beginning: 07 01 2019 ending: 06 30 2020
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of } LAKE GENEVA
 Village of }
 City of }

County of WALWORTH Aldermanic Dist. No. N/A (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name(s) (Last, First and Middle Name) Home Address Post Office & Zip Code
Harbor Shores Hotel Mgmt Inc
300 Wrigley Dr, Lake Geneva WI

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company

Address of Corporation/Limited Liability Company (if different from licensed premises)

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

Title	Name (Inc. Middle Name)	Home Address	Post Office & Zip Code
President/Member	<u>Samuel Weaver</u>	[REDACTED]	[REDACTED]
Vice President/Member	<u>Kevin Estab</u>	[REDACTED]	[REDACTED]
Secretary/Member	<u>George Walsh</u>	[REDACTED]	[REDACTED]
Treasurer/Member	<u>Kevin O'Connell</u>	[REDACTED]	[REDACTED]
Agent	<u>William Strongway</u>	[REDACTED]	[REDACTED]
Directors/Managers			

C. 1. Trade Name Harbor Shores on Lake Geneva Business Phone Number 262-248-9181

2. Address of Premises 300 Wrigley Dr Post Office & Zip Code 53147

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.) Meeting rooms, restaurant, hotel rooms, (Giness East)

5. Legal description (omit if street address is given above): Stored in lower level storage office - Restaurant pool's

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, corporation 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 reverse side** 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 reverse side** 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? [phone (608) 266-2776] Yes No

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

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.

William J. Coorsten
(Officer of Corporation / Member / Manager of Limited Liability Company / Partner / Individual)

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>Apr 17, 2019</u>	Date reported to council/board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

FEIN-39-199-4766

Applicant's WI Seller's Permit No.: <u>456-0000172</u>	FEIN Number: <u>5128-02</u>
LICENSE REQUESTED	
TYPE	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$ <u>100-</u>
<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	\$ <u>500-</u>
<input type="checkbox"/> Reserve Class B liquor	\$
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$ <u>25-</u>
TOTAL FEE	\$ <u>625</u>

pd 4/17/19

Renewal Alcohol Beverage License Application

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07 01 2019 ending: 06 30 2020
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of Village of City of } LAKE GENEVA

County of WALWORTH Aldermanic Dist. No. N/A (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:
 Full Name(s) (Last, First and Middle Name) _____ Home Address _____ Post Office & Zip Code _____

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company BEACHSIDE HEALTH, INC.
 Address of Corporation/Limited Liability Company (if different from licensed premises) _____
 All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company:

Title	Name (Inc. Middle Name)	Home Address	Post Office & Zip Code
President/Member	<u>TOM TRILLA</u>	_____	_____
Vice President/Member	_____	_____	_____
Secretary/Member	_____	_____	_____
Treasurer/Member	_____	_____	_____
Agent	<u>NANCY L. TRILLA</u>	_____	_____
Directors/Managers	_____	_____	_____

- C. 1. Trade Name BARRIQUE BISTRO & WINE BAR Business Phone Number 262-248-1948
 2. Address of Premises 835 WRIGLEY DR., LAKE GENEVA, WI 53147 Post Office & Zip Code 53147
 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.) 1100 S. LINNEN ROOM, KITCHEN, BREAK ROOM, BAR/REST & PATIO
 5. Legal description (omit if street address is given above): _____
 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, corporation 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 reverse side** 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 reverse side** 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? [phone (608) 266-2776] Yes No
 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

Applicant's WI Seller's Permit No.: <u>456-1058104918-02</u>		FEIN Number: <u>46-258851</u>	
LICENSE REQUESTED			
TYPE	FEE		
<input type="checkbox"/> Class A beer	\$		
<input checked="" type="checkbox"/> Class B beer	\$ <u>100.00</u>		
<input checked="" type="checkbox"/> Class C wine	\$ <u>100.00</u>		
<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	\$ <u>25.00</u>		
TOTAL FEE	\$ <u>225.00</u>		

pd 8/21/19

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

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

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>Mar 21, 2019</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 reverse side.

For the license period beginning: 07 01 2019 ending: 06 30 2020
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of } LAKE GENEVA
 Village of }
 City of }

County of WALWORTH Aldermanic Dist. No. N/A (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name(s) (Last, First and Middle Name) THOMAS ANDREW HARTZ Home Address [REDACTED] Post Office & Zip Code [REDACTED]

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company Simple Cafe LLC
 Address of Corporation/Limited Liability Company (if different from licensed premises) [REDACTED]
 All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company:

Title	Name (Inc. Middle Name)	Home Address	Post Office & Zip Code
President/Member			
Vice President/Member			
Secretary/Member			
Treasurer/Member			
Agent	<u>THOMAS HARTZ</u>		
Directors/Managers			

C. 1. Trade Name SIMPLE CAFE Business Phone Number 262 248 3556
 2. Address of Premises 525 BROAD ST Post Office & Zip Code LAKE GENEVA WI 53147

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.) 525 BROAD ST. PATIO / DINING ROOM / BASEMENT / KITCHEN / STORAGE.
5. Legal description (omit if street address is given above): _____
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, corporation 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 reverse side** 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 reverse side** 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? [phone (608) 266-2776] Yes No
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

456-1027064196-03

Applicant's WI Seller's Permit No.:	FEIN Number:
	<u>27-1037204</u>
LICENSE REQUESTED	
TYPE	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$ <u>100</u>
<input checked="" type="checkbox"/> Class C wine	\$ <u>100</u>
<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	\$ <u>25.00</u>
TOTAL FEE	\$ <u>225.00</u>

pd 4/9/2019

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.

Thomas Hartz member & founding partner
 (Officer of Corporation / Member / Manager of Limited Liability Company / Partner / Individual)

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>Apr 9, 2019</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 reverse side.

For the license period beginning: 07 01 2019 ending: 06 30 2020
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of Village of City of } LAKE GENEVA

County of WALWORTH Aldermanic Dist. No. N/A (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:
 Full Name(s) (Last, First and Middle Name) _____ Home Address _____ Post Office & Zip Code _____

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company Plaza Media LLC
 Address of Corporation/Limited Liability Company (if different from licensed premises) _____
 All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of _____
 Title Name (Inc. Middle Name) _____ Code _____
 President/Member Shed Branen
 Vice President/Member _____
 Secretary/Member _____
 Treasurer/Member _____
 Agent Shed Branen
 Directors/Managers _____

C. 1. Trade Name Geneva Theater Business Phone Number _____
 2. Address of Premises 244 Broad St, Lake Geneva Post Office & Zip Code 53147

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.) Throughout premises including concessions stand, meeting area and auditorium.
5. Legal description (omit if street address is given above): _____
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, corporation 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 reverse side** 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 reverse side** 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? [phone (608) 266-2776] Yes No
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

Applicant's WI Seller's Permit No.: <u>456102714485203</u>		FEIN Number: <u>272952942</u>	
LICENSE REQUESTED			
TYPE	FEE		
<input type="checkbox"/> Class A beer	\$		
<input checked="" type="checkbox"/> Class B beer	\$ <u>100</u>		
<input checked="" type="checkbox"/> Class C wine	\$ <u>100</u>		
<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	\$ <u>25</u>		
TOTAL FEE	\$ <u>225</u>		

pd 4/24/19

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.

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

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>Apr 24, 2019</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 reverse side.

For the license period beginning: 07 01 2019 ending: 06 30 2020
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of Village of City of } LAKE GENEVA

County of WALWORTH Aldermanic Dist. No. N/A (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:
 Full Name(s) (Last, First and Middle Name) MARTINS OLYMPIC RESTAURANT L.L.C Home Address _____
 Post Office & Zip Code 02415119

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company _____
 Address of Corporation/Limited Liability Company (if different from licensed premises) _____
 All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company:
 Title Name (Inc. Middle Name) Home Address Post Office & Zip Code
 President/Member YOLANDA ZAVALETA _____
 Vice President/Member _____
 Secretary/Member _____
 Treasurer/Member _____
 Agent YOLANDA ZAVALETA _____
 Directors/Managers _____

C. 1. Trade Name OLYMPIC RESTAURANT Business Phone Number 262 248 6541
 2. Address of Premises 748 MAIN ST. LAKE GENEVA Post Office & Zip Code 53147

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.) _____
5. Legal description (omit if street address is given above): _____
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, corporation 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 reverse side** 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 reverse side** 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.** HOME ADDRESS 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? [phone (608) 266-2776] Yes No
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

Applicant's WI Seller's Permit No.: <u>456-1029039444-02</u> FEIN Number: <u>47-4859796</u>	
LICENSE REQUESTED	
TYPE	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$ <u>100</u>
<input checked="" type="checkbox"/> Class C wine	\$ <u>100</u>
<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	\$ <u>25</u>
TOTAL FEE	\$ <u>225</u>

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.

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

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>Apr 15, 2019</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 reverse side.

For the license period beginning: 07 01 2019 ending: 06 30 2020
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of Village of City of } LAKE GENEVA

County of WALWORTH Aldermanic Dist. No. N/A (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:
 Full Name(s) (Last, First and Middle Name) HAPPY Restaurant, Inc Home Address _____ Post Office & Zip Code _____

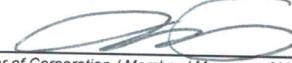
B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company _____
 Address of Corporation/Limited Liability Company (if different from licensed premises) _____
 All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company:

Title	Name (Inc. Middle Name)	Home Address	Post Office & Zip Code
President/Member	<u>Yang Zhong Liang</u>	[REDACTED]	[REDACTED]
Vice President/Member	<u>Min Ting Zhang</u>	[REDACTED]	[REDACTED]
Secretary/Member	_____	_____	_____
Treasurer/Member	_____	_____	_____
Agent	<u>Min Ting Zhang</u>	_____	_____
Directors/Managers	_____	_____	_____

C. 1. Trade Name Happy Cafe Business Phone Number 202 745-3382
 2. Address of Premises 526 S Wells St Post Office & Zip Code Lake Geneva WI 53147

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.) restaurant and storage located in dining room kitchen office
5. Legal description (omit if street address is given above): _____
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, corporation 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 reverse side** 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 reverse side** 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? [phone (608) 266-2776] Yes No
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

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.


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

Applicant's WI Seller's Permit No. / FEIN Number: <u>450102721321003 / 274215114</u>	
LICENSE REQUESTED	
TYPE	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$ 100-
<input checked="" type="checkbox"/> Class C wine	\$ 100-
<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	\$ 25-
TOTAL FEE	\$ <u>225</u>

pd 4/18/19

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>Apr 18, 2019</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 reverse side.

For the license period beginning: 07 01 2019 ending: 06 30 2020
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of } LAKE GENEVA
 Village of }
 City of }

County of WALWORTH Aldermanic Dist. No. N/A (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:
 Full Name(s) (Last, First and Middle Name) _____ Home Address _____ Post Office & Zip Code _____

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company BREAKFAST BUNGALOW LLC
 Address of Corporation/Limited Liability Company (if different from licensed premises) 220 COOK STREET #101 LAKE GENEVA
 All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company:
 Title Name (Inc. Middle Name)
 President/Member JUSTIN TAYLOR OCHALEK _____
 Vice President/Member _____
 Secretary/Member _____
 Treasurer/Member _____
 Agent JUSTIN TAYLOR OCHALEK _____
 Directors/Managers PAUL OCHALEK _____

C. 1. Trade Name GRAT EGGS Business Phone Number 262-812-4077
 2. Address of Premises 220 COOK STREET #101 LAKE GENEVA Post Office & Zip Code 53147

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.) FIRST FLOOR UNIT 101, KITCHEN, DINING ROOM, CLOSET AND OUTDOOR SEATING
5. Legal description (omit if street address is given above): _____
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, corporation 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 reverse side** 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 reverse side** 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

Applicant's WI Seller's Permit No.:	FEIN Number:
<u>456102761007102</u>	<u>82136877</u>
LICENSE REQUESTED	
TYPE	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$ <u>100.00</u>
<input checked="" type="checkbox"/> Class C wine	\$ <u>100.00</u>
<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	\$ <u>25.00</u>
TOTAL FEE	\$ <u>225.00</u>

od 4/22/19

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

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

TO BE COMPLETED BY CLERK		
Date received and filed with municipal clerk <u>Apr 22, 2019</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 reverse side.

For the license period beginning: 07 01 2019 ending: 06 30 2020
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of Village of City of } LAKE GENEVA

County of WALWORTH Aldermanic Dist. No. _____ (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Applicant's WI Seller's Permit No.: <u>456102943303902</u> FEIN Number: <u>815116545</u>	
LICENSE REQUESTED ▶	
TYPE	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$ 100
<input checked="" type="checkbox"/> Class C wine	\$ 100
<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	\$ 25
TOTAL FEE	\$ 225

Complete A or B. All must complete C.

A. Individual or Partnership:
 Full Name(s) (Last, First and Middle Name) _____ Home Address _____ Post Office & Zip Code 53142/19

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company ▶ D&D Restaurant Group Inc
 Address of Corporation/Limited Liability Company (if different from licensed premises) ▶ _____
 All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company:
 Title Name (Inc. Middle Name) Home Address
 President/Member David J Wingate, _____
 Vice President/Member _____
 Secretary/Member _____
 Treasurer/Member _____
 Agent ▶ _____
 Directors/Managers _____
 Agent Changed to John Sherman Lindsey

C. 1. Trade Name ▶ Flat Iron Tap Business Phone Number 262-812-4064
 2. Address of Premises ▶ 150 Center St. Post Office & Zip Code ▶ Lake Geneva 53147

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.) First floor, dining area, Bar, cooler
5. Legal description (omit if street address is given above): stored in Basement, records in Basement
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, corporation 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 reverse side** 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 reverse side** 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? [phone (608) 266-2776] Yes No
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

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.


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

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>Apr 22, 2019</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 reverse side.

For the license period beginning: 07 01 2019 ending: 06 30 2020
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of } LAKE GENEVA
 Village of }
 City of }

County of WALWORTH Aldermanic Dist. No. N/A (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:
 Full Name(s) (Last, First and Middle Name) _____ Home Address _____ Post Office & Zip Code _____

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company Sabai Sabai Thai Cuisine, Inc
 Address of Corporation/Limited Liability Company (if different from licensed premises) _____
 All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company:
 Title Name (Inc. Middle Name) Home Address
 President/Member Jirapa Cox _____
 Vice President/Member Sumalee Brewer _____
 Secretary/Member _____
 Treasurer/Member _____
 Agent Jirapa Cox _____
 Directors/Managers _____

C. 1. Trade Name Sabai Sabai Thai Cuisine Business Phone Number 262-812-4114
 2. Address of Premises 306 Center St. Post Office & Zip Code Lake Geneva, 53147

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.) See attached map
5. Legal description (omit if street address is given above): N/A
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, corporation 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 reverse side** 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 reverse side** 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? [phone (608) 266-2776] Yes No
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

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.

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

Applicant's WI Seller's Permit No.: <u>45610315704903</u> FEIN Number: <u>823817988</u>	
LICENSE REQUESTED	
TYPE	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$ <u>100-</u>
<input checked="" type="checkbox"/> Class C wine	\$ <u>100-</u>
<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	\$ <u>25</u>
TOTAL FEE	\$ <u>225</u> <i>pd 412119</i>

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>Apr 2, 2019</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 reverse side.

For the license period beginning: 07 01 2019 ending: 06 30 2020
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of Village of City of } LAKE GENEVA

County of WALWORTH Aldermanic Dist. No. N/A (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:
 Full Name(s) (Last, First and Middle Name) _____ Home Address _____ Post Office & Zip Code _____

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company DCRB Incorporated
 Address of Corporation/Limited Liability Company (if different from licensed premises) _____
 All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company:

Title	Name (Inc. Middle Name)	Home Address
President/Member	<u>ANN ESARCO</u>	[REDACTED]
Vice President/Member		[REDACTED]
Secretary/Member		[REDACTED]
Treasurer/Member		[REDACTED]
Agent	<u>ANDREW GRUBER</u>	[REDACTED]
Directors/Managers		[REDACTED]

C. 1. Trade Name AVANT CYCLE CAFE Business Phone Number 262-203-5141
 2. Address of Premises 234 BROAD ST LAKE GENEVA WI Post Office & Zip Code 53147

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.) SEE ATTACHED
5. Legal description (omit if street address is given above): _____
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, corporation 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 reverse side** 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 reverse side** 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? [phone (608) 266-2776] Yes No
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

Applicant's WI Seller's Permit No. <u>450102970428002</u> FEIN Number: <u>832278727</u>	
LICENSE REQUESTED	
TYPE	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$ <u>100-</u>
<input checked="" type="checkbox"/> Class C wine	\$ <u>100-</u>
<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	\$ <u>25-</u>
TOTAL FEE	\$ <u>225-</u>

4/15/19

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.

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

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>Apr 15, 2019</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 reverse side.

For the license period beginning: 07 01 2019 ending: 06 30 2020
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of } LAKE GENEVA
 Village of }
 City of }

County of WALWORTH Aldermanic Dist. No. N/A (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:
 Full Name(s) (Last, First and Middle Name) CIRINO NICK Home Address [Redacted] Post Office & Zip Code [Redacted]

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company MAMA CIRINO'S, LLC
 Address of Corporation/Limited Liability Company (if different from licensed premises) [Redacted]
 All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company:

Title	Name (Inc. Middle Name)	Home Address	Post Office & Zip Code
President/Member	<u>NICK CIRINO</u>	[Redacted]	[Redacted]
Vice President/Member		[Redacted]	[Redacted]
Secretary/Member		[Redacted]	[Redacted]
Treasurer/Member		[Redacted]	[Redacted]
Agent	<u>JOHN BOBAIL</u>	[Redacted]	[Redacted]
Directors/Managers		[Redacted]	[Redacted]

C. 1. Trade Name Mama Cirino's Business Phone Number 262-348-9077
 2. Address of Premises 131 Sweets St Post Office & Zip Code Lake Geneva WI

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.)
5. Legal description (omit if street address is given above): _____
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, corporation 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 reverse side** 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 reverse side** 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? [phone (608) 266-2776] Yes No
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

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

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

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>4 May 7, 2019</u>	Date reported to council/board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Applicant's WI Seller's Permit No. <u>450102744882</u> Number: <u>822232333</u>	
LICENSE REQUESTED ▶	
TYPE	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$ <u>100</u>
<input checked="" type="checkbox"/> Class C wine	\$ <u>100</u>
<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	\$ <u>25</u>
TOTAL FEE	\$ <u>225</u>

Renewal Alcohol Beverage License Application

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

For the license period beginning: _____ ending: 1/30/2020
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: Town of }
 Village of } Lake Geneva
 City of }

County of Walworth 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>EYM Pizza of Wisconsin, LLC</u>	Address of Corporation / Limited Liability Company (if different from licensed premises) [REDACTED]
---	--

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>Dethloff</u>	(First) <u>John</u>	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code) [REDACTED]
------------------------------------	------------------------	---------------	--

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>Diaz</u>	<u>Eduardo</u>	<u>E</u>	[REDACTED]
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)
<u>Elias</u>	<u>Salvador</u>	<u>M</u>	[REDACTED]
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

C. Business Information

- Trade Name Pizza Hut# 35640 Business Phone Number 262-248-9221
- Address of Premises 801 Williams St Post Office & Zip Code 53147
- 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.) see attached

floor plan

Applicant's Wisconsin Seller's Permit Number <u>456102964726804</u>	
FEIN Number <u>831085705</u>	
TYPE OF LICENSE REQUESTED	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$ <u>100-</u>
<input checked="" type="checkbox"/> Class C wine	\$ <u>100-</u>
<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	\$ <u>25-</u>
TOTAL FEE	\$ <u>225-</u>

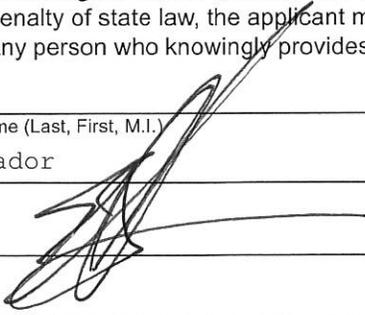
pd 5/1/19

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
 Change of Agent. Old Agent is no longer with the company.

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.) Elias, Salvador	Title / Member Director	Date 5/6/19
Signature 	Phone Number [REDACTED]	Email Address [REDACTED]

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk May 9, 2019	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Instructions for Renewal Alcohol Beverage License Application

THIS RENEWAL FORM CANNOT BE USED IF:

1. There is a change in business entity (i.e., individual has changed to partnership or corporation/limited liability company; partnership changed to individual or corporation/limited liability company; corporation changed to individual, partnership or limited liability company) and if limited liability company has been dissolved.
2. Partners are added or dropped.
3. Application is made in a different municipality.

PARTNERSHIPS:

Indicate full name and home address of each partner. One partner must sign application. **Reminder:** If partners have been added or dropped since your last application, you must use Form AT-106 (Original Beverage License Application).

CORPORATIONS:

One officer must sign application. Be sure to answer Question No. 7 by indicating any change of officers, directors, and/or changes in home address. If there are any changes in officers and/or directors each must complete Form AT-103 (Auxiliary Questionnaire). If there has been a change in agent since your last approved agent, he/she must complete Forms AT-104 (Schedule for Appointment of Agent) **AND** AT-103 (Auxiliary Questionnaire) in addition to this (AT-115) form.

LIMITED LIABILITY COMPANY:

One member/manager must sign application. Follow procedure under Corporations for any change of members or agent.

NOTE: Use ink or typewriter when filling in applications. Be sure to answer all questions fully and accurately. 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.

DISCRIMINATION CLAUSE – (City of Milwaukee only)

The applicant shall not willfully refuse to provide those services offered under this license or refuse to employ or discharge any person otherwise qualified because of race, color, creed, sex, national origin or ancestry, the applicant shall not seek information as a condition of employment, or penalize any employee or discriminate in the selection of personnel for training or promotion solely on the basis of such information. The applicant also shall not discriminate against any member of the military service dressed in uniform by willfully refusing services offered under this license.

Complete, sign and return this form to the clerk.

If answer to Questions No. 6a and/or 6b on page 2 are "YES," outline details below:

CONVICTIONS

1. NAME _____ STATUTE NO./LOCAL ORDINANCE _____
CHARGE _____ WHERE CONVICTED _____
DATE _____ PENALTY _____ MISDEMEANOR FELONY
2. NAME _____ STATUTE NO./LOCAL ORDINANCE _____
CHARGE _____ WHERE CONVICTED _____
DATE _____ PENALTY _____ MISDEMEANOR FELONY
3. NAME _____ STATUTE NO./LOCAL ORDINANCE _____
CHARGE _____ WHERE CONVICTED _____
DATE _____ PENALTY _____ MISDEMEANOR FELONY

PENDING CHARGE

1. NAME _____ STATUTE NO./LOCAL ORDINANCE _____
PENDING CHARGE _____ DATE _____

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

Submit to municipal clerk.

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

To the governing body of: Town
 Village of Lake Geneva County of Walworth
 City

The undersigned duly authorized officer/member/manager of EYM Pizza of Wisconsin, LLC
(Registered Name of Corporation / Organization or Limited Liability Company)

a corporation/organization or limited liability company making application for an alcohol beverage license for a premises known as Pizza Hut #35640
(Trade Name)

located at 801 Williams St, Lake Geneva Wisconsin 53147

appoints John Dethloff
(Name of Appointed Agent)

[Redacted Address]

(Home Address of Appointed Agent)

to act for the corporation/organization/limited liability company with full authority and control of the premises and of all business relative to alcohol beverages conducted therein. Is applicant agent presently acting in that capacity or requesting approval for any corporation/organization/limited liability company having or applying for a beer and/or liquor license for any other location in Wisconsin?

Yes No If so, indicate the corporate name(s)/limited liability company(ies) and municipality(ies).

Is applicant agent subject to completion of the responsible beverage server training course? Yes No

How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin? 6 years

Place of residence last year [Redacted]

For: EYM Pizza of Wisconsin, LLC
(Name of Corporation / Organization / Limited Liability Company)

By: [Signature]
(Signature of Officer / Member / Manager)

Any person who knowingly provides materially false information in an application for a license may be required to forfeit not more than \$1,000.

ACCEPTANCE BY AGENT

I, John Dethloff, hereby accept this appointment as agent for the
(Print / Type Agent's Name)

corporation/organization/limited liability company and assume full responsibility for the conduct of all business relative to alcohol beverages conducted on the premises for the corporation/organization/limited liability company.

[Signature]

08/15/19

Agent's age [Redacted]

APPROVAL OF AGENT BY MUNICIPAL AUTHORITY (Clerk cannot sign on behalf of Municipal Official)

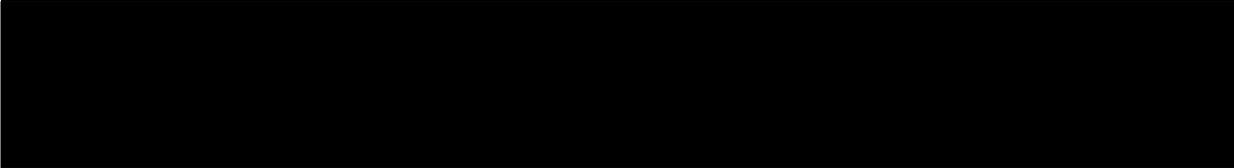
I hereby certify that I have checked municipal and state criminal records. To the best of my knowledge, with the available information, the character, record and reputation are satisfactory and I have no objection to the agent appointed.

Approved on _____ by _____ Title _____
(Date) (Signature of Proper Local Official) (Town Chair, Village President, Police Chief)

Auxiliary Questionnaire Alcohol Beverage License Application

Submit to municipal clerk.

Individual's Full Name (Please print) (last name)	(first name)	(middle name)
DETHLOFF	JOHN	



- Applying for an alcohol beverage license as an individual.
- A member of a partnership which is making application for an alcohol beverage license.
- AGENT** of **EYM PIZZA OF WISCONSIN, LLC**
(Officer / Director / Member / Manager / Agent) (Name of Corporation, Limited Liability Company or Nonprofit Organization)

which is making application for an alcohol beverage license.

The above named individual provides the following information to the licensing authority:

1. How long have you continuously resided in Wisconsin prior to this date? 6 years
2. Have you ever been convicted of any offenses (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of any other states or ordinances of any county or municipality? Yes No
If yes, give law or ordinance violated, trial court, trial date and penalty imposed, and/or date, description and status of charges pending. (If more room is needed, continue on reverse side of this form.)
OWI aka suspended drivers license (reinstated) case is closed
3. Are charges for any offenses presently pending against you (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of other states or ordinances of any county or municipality? Yes No
If yes, describe status of charges pending.
4. Do you hold, are you making application for or are you an officer, director or agent of a corporation/nonprofit organization or member/manager/agent of a limited liability company holding or applying for any other alcohol beverage license or permit? Yes No
If yes, identify. (Name, Location and Type of License/Permit)
5. Do you hold and/or are you an officer, director, stockholder, agent or employe of any person or corporation or member/manager/agent of a limited liability company holding or applying for a wholesale beer permit, brewery/winery permit or wholesale liquor, manufacturer or rectifier permit in the State of Wisconsin? Yes No
If yes, identify. (Name of Wholesale License or Permit) (Address by City and County)

6. Named individual must list in chronological order last two employers.

Employer's Name	Employer's Address	Employed From	To
EYM GROUP, INC	450 E. JOHN CARPENTER FWY	05/03/2019	Present

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

Signature of named individual

WISCONSIN SELLER / SERVER CERTIFICATION

Trainee Name: John Dethloff

School Name: 360training.com, Inc.

Date of Completion: 05/14/2019

Certification #: WI-97498

I, 

Certify that the above named person
successfully completed an approved
Learn2Serve Seller/Server course.

COMPLIES WITH WISCONSIN STATUTES 125.04, 125.17, 134.66



Corporate Headquarters

6801 N Capital of Texas Hwy, Suite 150
Austin, TX 78731
P: 877.881.2235

Renewal Alcohol Beverage License Application

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07 01 2019 ending: 06 30 2020
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of Village of City of } LAKE GENEVA

County of WALWORTH Aldermanic Dist. No. N/A (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name(s) (Last, First and Middle Name) Qualle - Perez LLC Home Address 820 Williams St Post Office & Zip Code Lake Geneva, WI 53147
pd 4/22/19

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company

Address of Corporation/Limited Liability Company (if different from licensed premises)

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

Title	Name (Inc. Middle Name)	Home Address
President/Member	<u>Francisco H Perez</u>	[REDACTED]
Vice President/Member	<u>Efren Qualle</u>	[REDACTED]
Secretary/Member		[REDACTED]
Treasurer/Member		[REDACTED]
Agent	<u>Cynthia E Perez</u>	[REDACTED]
Directors/Managers		[REDACTED]

C. 1. Trade Name Taqueria El Gallo de Oro Business Phone Number 702-729-4055

2. Address of Premises 820 Williams St Post Office & Zip Code Lake Geneva WI 53147

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.)

5. Legal description (omit if street address is given above):

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, corporation 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 reverse side** 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 reverse side** 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. we just started selling after the 1st of the year 2019 Yes No

9. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776] Yes No

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

Applicant's WI Seller's Permit No.:		FEIN Number:	
<u>456-1030363273-02</u>		<u>1 83 1709 227</u>	
LICENSE REQUESTED			
TYPE	FEE		
<input type="checkbox"/> Class A beer	\$		
<input checked="" type="checkbox"/> Class B beer	\$ <u>100</u>		
<input checked="" type="checkbox"/> Class C wine	\$ <u>100</u>		
<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	\$ <u>25</u>		
TOTAL FEE	\$ <u>225</u>		

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.

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

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>Apr 22, 2019</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 reverse side.

For the license period beginning: 07 01 2019 ending: 06 30 2020
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of } LAKE GENEVA
 Village of }
 City of }

County of WALWORTH Aldermanic Dist. No. _____ (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name(s) (Last, First and Middle Name)

Home Address

Post Office & Zip Code

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company ▶ KNMG Hotel LLC

Address of Corporation/Limited Liability Company (if different from licensed premises) ▶ _____

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

Title	Name (Inc. Middle Name)	Home Address	Post Office & Zip Code
President/Member	<u>Narendra Patel</u>	_____	_____
Vice President/Member	<u>Mahendra Patel</u>	_____	_____
Secretary/Member	<u>Ghanshyam Patel</u>	_____	_____
Treasurer/Member	_____	_____	_____
Agent	<u>Eric Schmitt</u>	_____	_____
Directors/Managers	_____	_____	_____

C. 1. Trade Name ▶ Comfort Suites Business Phone Number 262-248-2300

2. Address of Premises ▶ 300 E Main St Lake Geneva Post Office & Zip Code ▶ 53147

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.) lobby, pool, guest room, club house, office

5. Legal description (omit if street address is given above): _____

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, corporation 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 reverse side** 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 reverse side** 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? [phone (608) 266-2776] Yes No

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

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.


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

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>Apr 16, 2019</u>	Date reported to council/board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Applicant's WI Seller's Permit No.: <u>456102927460704</u> FEIN Number: <u>47-3821689</u>	
LICENSE REQUESTED ▶	
TYPE	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$ 100
<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	\$ 25
TOTAL FEE	\$ 125

pd 4/16/19

Renewal Alcohol Beverage License Application

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07 01 2019 ending: 06 30 2020
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of } LAKE GENEVA
 Village of }
 City of }

County of WALWORTH Aldermanic Dist. No. N/A (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Applicant's WI Seller's Permit No.: <u>456-102988977-0247-5316798</u>	
FEIN Number: _____	
LICENSE REQUESTED ▶	
TYPE	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$ <u>100⁰⁰</u>
<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	\$ <u>25⁰⁰</u>
TOTAL FEE	\$ <u>125⁰⁰</u>

Complete A or B. All must complete C.

A. Individual or Partnership:
 Full Name(s) (Last, First and Middle Name) _____ Home Address _____ Post Office & Zip Code pd 51119

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company ▶ B & B Lake Geneva LLC
 Address of Corporation/Limited Liability Company (if different from licensed premises) _____
 All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of _____

Title	Name (Inc. Middle Name)	Home Address	Post Office & Zip Code
President/Member	<u>Julie P. Selby</u>	_____	_____
Vice President/Member	<u>Curtis E. Selby</u>	_____	_____
Secretary/Member	_____	_____	_____
Treasurer/Member	_____	_____	_____
Agent ▶	<u>Julie Selby</u>	_____	_____
Directors/Managers	_____	_____	_____

C. 1. Trade Name ▶ Board & Brugh Lake Geneva Business Phone Number 262-409-1639
 2. Address of Premises ▶ 262 Center St. Post Office & Zip Code ▶ Lake Geneva, WI 5302A
 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.) 1300 S. Ft. Studio Bx. Storage in cooler and shelves in back of studio.
 5. Legal description (omit if street address is given above): _____
 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, corporation 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 reverse side** 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 reverse side** 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? [phone (608) 266-2776] Yes No
 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

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.

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

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>May 1, 2019</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 reverse side.

456-0000612400-03

Applicant's WI Seller's Permit No.: FEIN Number: 39-0407795

LICENSE REQUESTED	
TYPE	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$ 100-
<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	\$ 500-
<input type="checkbox"/> Reserve Class B liquor	\$
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$ 25-
TOTAL FEE	\$ 625-

For the license period beginning: 07 01 2019 ending: 06 30 2020
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of } LAKE GENEVA
 Village of }
 City of }

County of WALWORTH Aldermanic Dist. No. N/A (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:
 Full Name(s) (Last, First and Middle Name) Home Address Post Office & Zip Code

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company AMERICAN LEGION Post 24
 Address of Corporation/Limited Liability Company (if different from licensed premises) LAKE GENEVA WA 53147

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

Title	Name (Inc. Middle Name)
President/Member	<u>LEONARD JEGERSKI</u>
Vice President/Member	<u>THOMAS KEHL</u>
Secretary/Member	<u>ROBERT MILLER</u>
Treasurer/Member	<u>CHARLES J. SCHLEHLEIN</u>
Agent	<u>CHARLES J. SCHLEHLEIN</u>
Directors/Managers	

C. 1. Trade Name AMERICAN LEGION POST 24 Business Phone Number 262-248-9767
 2. Address of Premises 735 HENRY ST Post Office & Zip Code LAKE GENEVA WA 53147

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.) RECORDS IN BASEMENT
5. Legal description (omit if street address is given above): SEE ADDITIONAL MAPPED AREAS
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, corporation 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 reverse side** 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 reverse side** 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? [phone (608) 266-2776] Yes No
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

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

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

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>APR 22, 2019</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 reverse side.

For the license period beginning: 07 01 2019 ending: 06 30 2020
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of Village of City of } LAKE GENEVA

County of WALWORTH Aldermanic Dist. No. _____ (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name(s) (Last, First and Middle Name)	Home Address	Post Office & Zip Code

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company HARRYS CAFE & PLACE INC.

Address of Corporation/Limited Liability Company (if different from licensed premises) 808 MAIN ST

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

Title	Name (Inc. Middle Name)	Home Address	Post Office & Zip Code
President/Member	<u>JAMES G. CHIRONIS</u>		
Vice President/Member	<u>HARRY S. CHIRONIS</u>		
Secretary/Member	<u>HARRY S. CHIRONIS</u>		
Treasurer/Member	<u>JAMES G. CHIRONIS</u>		
Agent	<u>JAMES G. CHIRONIS</u>		
Directors/Managers	<u>LOUIS S. CHIRONIS</u>		

C.1. Trade Name Harrys Cafe Business Phone Number 262-248-3494

2. Address of Premises 808 Main St Post Office & Zip Code LAKE GENEVA 53147

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/RECORDS IN OFFICE

5. Legal description (omit if street address is given above): STORAGE (OFFICE-BAR-BASEMENT-CAFE-KITCHEN-SIDEWAL

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, corporation 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 reverse side** 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 reverse side** 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? [phone (608) 266-2776] Yes No

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

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.

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

Applicant's WI Seller's Permit No.: 456000060124103	FEIN Number: 39150551
LICENSE REQUESTED ▶	
TYPE	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$ 100
<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	\$ 500
<input type="checkbox"/> Reserve Class B liquor	\$
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$ 25
TOTAL FEE	\$ 625

pd
3/28/19

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>4 Mar 28, 2019</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 reverse side.

For the license period beginning: 07 01 2019 ending: 06 30 2020
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of
 Village of } LAKE GENEVA
 City of }

County of WALWORTH Aldermanic Dist. No. _____ (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name(s) (Last, First and Middle Name) ▶ GREGORY ANAGNOS Home Address N1567 CLOVER RD Post Office & Zip Code LAKE GENEVA, WI 53147

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company ▶ MEDUSA GRILL & BISTRO LLC

Address of Corporation/Limited Liability Company (if different from licensed premises) ▶ _____

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

Title Name (Inc. Middle Name) Home Address Post Office & Zip Code

President/Member GREGORY ANAGNOS _____

Vice President/Member _____

Secretary/Member _____

Treasurer/Member _____

Agent ▶ GREGORY ANAGNOS

Directors/Managers _____

C. 1. Trade Name ▶ MEDUSA GRILL & BISTRO Business Phone Number 262-249-8644

2. Address of Premises ▶ 501 BROAD STREET Post Office & Zip Code ▶ LAKE GENEVA, WI 53147

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.) REST- 2 DIN.RMS W/BARS - BASEMENT OFFICE

5. Legal description (omit if street address is given above): _____

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, corporation 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 reverse side** 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 reverse side** 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? [phone (608) 266-2776] Yes No

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

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.

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

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>Apr 16, 2019</u>	Date reported to council/board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Applicant's WI Seller's Permit No.: <u>600-002765267-4</u>	FEIN Number: <u>20-4154247</u>
LICENSE REQUESTED ▶	
TYPE	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$ <u>100</u>
<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	\$ <u>500</u>
<input type="checkbox"/> Reserve Class B liquor	\$
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$ <u>25</u>
TOTAL FEE	\$ <u>625</u> <i>pt 4.11.19</i>

Renewal Alcohol Beverage License Application

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07 01 2019 ending: 06 30 2020
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of
 Village of } LAKE GENEVA
 City of }

County of WALWORTH Aldermanic Dist. No. N/A (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name(s) (Last, First and Middle Name) Home Address Post Office & Zip Code

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company POPEYE'S GALLEY & GROG, LTD.

Address of Corporation/Limited Liability Company (if different from licensed premises) _____

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

Title	Name (Inc. Middle Name)	Home Address	Post Office & Zip Code
President/Member	VERONICA ANAGNOS	[REDACTED]	[REDACTED]
Vice President/Member			
Secretary/Member			
Treasurer/Member			
Agent	VERONICA ANAGNOS	[REDACTED]	[REDACTED]
Directors/Managers			

C. 1. Trade Name POPEYE'S ON LAKE GENEVA Business Phone Number 262-248-4381

2. Address of Premises 811 WRIGLEY DR Post Office & Zip Code 53147

- 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.) BASEMENT, CAFE, BARS, STORAGE, DIN ROOM
- Legal description (omit if street address is given above): SEE ATTACHED DOCUMENT
- 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, corporation 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 reverse side** 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 reverse side** Yes No
- 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
- 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
- Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776] Yes No
- 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
- Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? Yes No

Applicant's WI Seller's Permit No.: 456102784430902	FEIN Number: 45-4669918
LICENSE REQUESTED	
TYPE	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$ 100
<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	\$ 500
<input type="checkbox"/> Reserve Class B liquor	\$
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$ 25
TOTAL FEE	\$ 625

Handwritten note: add 4/11/19

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.

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

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>Apr 11, 2019</u>	Date reported to council/board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

FEIN 26-1269448

Renewal Alcohol Beverage License Application

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07 01 2019 ending: 06 30 2020
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of } LAKE GENEVA
 Village of }
 City of }

County of WALWORTH Aldermanic Dist. No. N/A (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Applicant's WI Seller's Permit No. FEIN Number <u>456-7026406069-02</u>	
LICENSE REQUESTED	
TYPE	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$ <u>100</u>
<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	\$ <u>500</u>
<input type="checkbox"/> Reserve Class B liquor	\$
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$ <u>25</u>
TOTAL FEE	\$ <u>625</u>

pdf
4/9/19

Complete A or B. All must complete C.

A. Individual or Partnership:
Full Name(s) (Last, First and Middle Name) Home Address Post Office & Zip Code

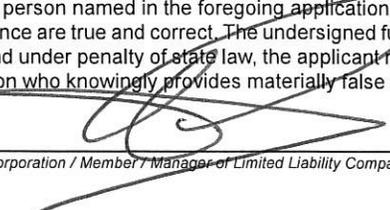
B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company GLENEAGES LLC dba SOPRA
Address of Corporation/Limited Liability Company (if different from licensed premises)

All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company:
Title Name (Inc. Middle Name) Home Address Post Office & Zip Code
President/Member ALASTAIR MUNCKO CUMMING
Vice President/Member
Secretary/Member
Treasurer/Member
Agent ALASTAIR M. CUMMING
Directors/Managers

C. 1. Trade Name SOPRA Business Phone Number 262 249 0800
2. Address of Premises 724 W. MAIN ST. LAKE GENEVA Post Office & Zip Code 53147

- 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.) SIDEWALK CAFE RESTAURANT BASEMENT
- 5. Legal description (omit if street address is given above): RECORDS IN BASEMENT. BEHIND BAR
- 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, corporation 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 reverse side** 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 reverse side** 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? [phone (608) 266-2776] Yes No
- 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

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.


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

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>4/9/19</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 reverse side.

For the license period beginning: 07 01 2019 ending: 06/30/2020
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of Village of City of } LAKE GENEVA

County of WALWORTH Aldermanic Dist. No. _____ (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name(s) (Last, First and Middle Name) Home Address Post Office & Zip Code 51119

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company CAPITOL GENEVA LLC

Address of Corporation/Limited Liability Company (if different from licensed premises) _____

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

Title	Name (Inc. Middle Name)	Home Address	Post Office & Zip Code
President/Member	KEVIN S LEDERER	[REDACTED]	
Vice President/Member	KATRINA L LEDERER	[REDACTED]	
Secretary/Member	FELIX B RICHGELS	[REDACTED]	
Treasurer/Member	KRISTIN L RICHGELS	[REDACTED]	
Agent	ELIZABETH DION	[REDACTED]	
Directors/Managers	SUSAN GETGEN	[REDACTED]	

C. 1. Trade Name SPRECHER'S RESTAURANT & PUB Business Phone Number 242-248-7047

2. Address of Premises 111 CENTER ST Post Office & Zip Code 53147

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.) BAR DINING ROOM BANQ RM STORAGE COOLER

5. Legal description (omit if street address is given above): PATIO, SPRECHTOBERFEST OUTDOOR EVENT

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, corporation 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 reverse side 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 reverse side 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? [phone (608) 266-2776] Yes No

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

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.

Kevin S Lederer / Felix B Richgels
(Officer of Corporation / Member / Manager of Limited Liability Company / Partner / Individual)
 MANAGING MEMBER MEMBER

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>May 1, 2019</u>	Date reported to council/board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Applicant's WI Seller's Permit No. FEIN Number: <u>450102720382303 272378492</u>	
LICENSE REQUESTED	
TYPE	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$ <u>100-</u>
<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	\$ <u>500-</u>
<input type="checkbox"/> Reserve Class B liquor	\$
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$ 25
TOTAL FEE	\$ <u>625-</u>

Please See current application on file for 2019-2020.

Original Alcohol Beverage Retail License Application

Submit to municipal clerk.

For the license period beginning 20 19 :
ending June 30 20 20

TO THE GOVERNING BODY of the: Town of } Lake Geneva
 Village of }
 City of }

County of Walworth Aldermanic Dist. No. _____ (if required by ordinance)

1. The named Individual Partnership Limited Liability Company
 Corporation / Nonprofit Organization

hereby makes application for the alcohol beverage license(s) checked above.

2. Name (individual/partners give last name, first, middle; corporations/limited liability companies give registered name): Andrew Fritz
Stone Soup LLC Roland C. Wolff

An "Auxiliary Questionnaire," Form AT-103, must be completed and attached to this application by each individual applicant, by each member of a partnership, and by each officer, director and agent of a corporation or nonprofit organization, and by each member/manager and agent of a limited liability company. List the name, title, and place of residence of each person.

Title	Name (Last, First, M.I.)	Home Address	Post Office & Zip Code
President (Member)	<u>Managing Member</u>	<u>Wolff, Roland C.</u>	[REDACTED]
Vice President/Member			
Secretary/Member			
Treasurer/Member			
Agent	<u>Robert Lopez</u>		
Directors/Managers			

3. Trade Name Baker House 1885 Business Phone Number 262 248 4100
4. Address of Premises 327 Waugley Drive Post Office & Zip Code Lake Geneva 53147

5. Is individual, partners or agent of corporation/limited liability company subject to completion of the responsible beverage server training course for this license period? Yes No
6. Is the applicant an employe or agent of, or acting on behalf of anyone except the named applicant? Yes No
7. Does any other alcohol beverage retail licensee or wholesale permittee have any interest in or control of this business? Yes No
8. (a) Corporate/limited liability company applicants only: Insert state Wisc. and date 1-07-10 of registration.
(b) Is applicant corporation/limited liability company a subsidiary of any other corporation or limited liability company? Yes No
(c) Does the corporation, or any officer, director, stockholder or agent or limited liability company, or any member/manager or agent hold any interest in any other alcohol beverage license or permit in Wisconsin? Yes No
(NOTE: All applicants explain fully on reverse side of this form every YES answer in sections 5, 6, 7 and 8 above.)

9. 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.) Same

10. Legal description (omit if street address is given above): _____
11. (a) Was this premises licensed for the sale of liquor or beer during the past license year? Yes No
(b) If yes, under what name was license issued? Stone Soup LLC

12. Does the applicant understand they must register as a Retail Beverage Alcohol Dealer with the federal government, Alcohol and Tobacco Tax and Trade Bureau (TTB) by filing (TTB form 5630.5d) before beginning business? [phone 1-877-882-3277]. Yes No
13. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776]. Yes No
14. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes No

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 signer. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000. Signer agrees to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants, or one member of a partnership applicant must sign; one corporate officer, one member/manager of Limited Liability Companies must sign.) 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.

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

TO BE COMPLETED BY CLERK

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

Renewal Alcohol Beverage License Application

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07 01 2019 ending: 06 30 2020
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of } LAKE GENEVA
 Village of }
 City of }

County of WALWORTH Aldermanic Dist. No. N/A (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Applicant's WI Seller's Permit No.: <u>4501021643611902</u> FEIN Number: <u>474458435</u>	
LICENSE REQUESTED ▶	
TYPE	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$ <u>100-</u>
<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	\$ <u>500-</u>
<input type="checkbox"/> Reserve Class B liquor	\$
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$ <u>25-</u>
TOTAL FEE	\$ <u>(225-)</u>

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name(s) (Last, First and Middle Name) Elizabeth A. Tumas Home Address [Redacted] Post Office & Zip Code [Redacted] pt 4/22/19

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company ▶ Mercedes or Bust, L.L.C.
 Address of Corporation/Limited Liability Company (if different from licensed premises) ▶ _____

All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company:
 Title Name (Inc. Middle Name) Home Address Post Office & Zip Code
 President/Member Elizabeth A. Tumas [Redacted]
 Vice President/Member _____
 Secretary/Member _____
 Treasurer/Member _____
 Agent ▶ Elizabeth Tumas
 Directors/Managers _____

C. 1. Trade Name ▶ The Bottle Shop Business Phone Number 262-348-9463
 2. Address of Premises ▶ 617 W. Main St. Post Office & Zip Code ▶ 53147

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.) Retail Store, lounge, patio & Store Rooms
5. Legal description (omit if street address is given above): _____
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, corporation 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 reverse side** 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 reverse side** 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? [phone (608) 266-2776] Yes No
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

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.

Elizabeth A. Tumas
 (Officer of Corporation / Member / Manager of Limited Liability Company / Partner / Individual)

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>Apr 22, 2019</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 reverse side.

For the license period beginning: 07 01 2019 ending: 06 30 2020
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of } LAKE GENEVA
 Village of }
 City of }

County of WALWORTH Aldermanic Dist. No. N/A (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name(s) (Last, First and Middle Name) Charles B Lorenzi Home Address 1940 W Main St Post Office & Zip Code L.G. WI 53147

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company Celebration on Wells
 Address of Corporation/Limited Liability Company (if different from licensed premises) 422 S. Wells St
 All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company:

Title	Name (Inc. Middle Name)	Home Address	Post Office & Zip Code
President/Member	<u>Charles B Lorenzi</u>	[REDACTED]	[REDACTED]
Vice President/Member			
Secretary/Member			
Treasurer/Member			
Agent			
Directors/Managers			

C. 1. Trade Name Celebration on Wells Catering Business Phone Number 262-248-2595
 2. Address of Premises 422 S Wells St Post Office & Zip Code L.G. WI 53147

- 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.) banquet hall, catering 10, whole building
- Legal description (omit if street address is given above): basement, office area, kitchen
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, corporation 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 reverse side** Yes No
6. 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 reverse side** Yes No
- 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
- 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
- Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776] Yes No
- 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
- Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? Yes No

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

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

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>4/6/19</u>	Date reported to council/board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Applicant's WI Seller's Permit No.:	FEIN Number:
<u>456-0000567704-03</u>	<u>39-1631275</u>
LICENSE REQUESTED	
TYPE	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$ <u>100</u>
<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	\$ <u>500.00</u>
<input type="checkbox"/> Reserve Class B liquor	\$
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$ <u>25.00</u>
TOTAL FEE	\$ <u>(625)</u> <u>PD 4/6/19</u>

39-1534508

Renewal Alcohol Beverage License Application

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07 01 2019 ending: 06 30 2020
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of Village of City of } LAKE GENEVA

County of WALWORTH Aldermanic Dist. No. N/A (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Applicant's WI Seller's Permit No.:		FEIN Number:	
		<u>456-0000338-</u>	
LICENSE REQUESTED ▶		<u>497-03</u>	
TYPE		FEE	
<input type="checkbox"/> Class A beer		\$	
<input checked="" type="checkbox"/> Class B beer		\$	<u>100-</u>
<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		\$	<u>500-</u>
<input type="checkbox"/> Reserve Class B liquor		\$	
<input type="checkbox"/> Class B (wine only) winery		\$	
Publication fee		\$	<u>25-</u>
TOTAL FEE		\$	<u>650-</u>

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name(s) (Last, First and Middle Name) Home Address Post Office & Zip Code
▶ L+B Main Street

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company ▶

Address of Corporation/Limited Liability Company (if different from licensed premises) ▶

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

Title	Name (Inc. Middle Name)	Home Address	Post Office & Zip Code
President/Member	<u>Greg Bush</u>	[REDACTED]	[REDACTED]
Vice President/Member	<u>Jake Bush</u>	[REDACTED]	[REDACTED]
Secretary/Member	<u>Jessica Christensen</u>	[REDACTED]	[REDACTED]
Treasurer/Member	<u>Grace Bush</u>	[REDACTED]	[REDACTED]
Agent	<u>Jes Christensen</u>	[REDACTED]	[REDACTED]
Directors/Managers			

all owners

C. 1. Trade Name ▶ Champs Sports Bar & Grill Business Phone Number 2622486008

2. Address of Premises ▶ 747 W Main St LG WI Post Office & Zip Code ▶ 53147

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.) upstairs & downstairs bar & garden bar

5. Legal description (omit if street address is given above):

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, corporation 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 reverse side** 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 reverse side** 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? [phone (608) 266-2776] Yes No

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

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.

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

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>Apr 16, 2019</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 reverse side.

For the license period beginning: 07 01 2019 ending: 06 30 2020
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of } LAKE GENEVA
 Village of }
 City of }

County of WALWORTH Aldermanic Dist. No. _____ (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name(s) (Last, First and Middle Name) Home Address Post Office & Zip Code

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company Chubby Kitty LLC
 Address of Corporation/Limited Liability Company (if different from licensed premises) _____
 All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company:

Title	Name (Inc. Middle Name)	Home Address	Post Office & Zip Code
President/Member	<u>Mark Basil</u>	[REDACTED]	[REDACTED]
Vice President/Member	_____	_____	_____
Secretary/Member	_____	_____	_____
Treasurer/Member	_____	_____	_____
Agent	<u>Mark Basil</u>	_____	_____
Directors/Managers	_____	_____	_____

C. 1. Trade Name Fat Cats Business Phone Number 262 745 1213

2. Address of Premises 104 Broad St LkG 53147 Post Office & Zip Code 53147

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.) Behind bar, under stairs, cooler in

5. Legal description (omit if street address is given above): basement, special storage in cabinet n. of entrance.

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, corporation 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 reverse side** 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 reverse side** 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? [phone (608) 266-2776] Yes No

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

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

[Signature] 4-19-19
 (Officer of Corporation / Member / Manager of Limited Liability Company / Partner / Individual)

Applicant's WI Seller's Permit No. / FEIN Number: <u>456027472908202 454497705</u>	
LICENSE REQUESTED ▶	
TYPE	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$ <u>100-</u>
<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	\$ <u>500-</u>
<input type="checkbox"/> Reserve Class B liquor	\$
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$ <u>25-</u>
TOTAL FEE	\$ <u>626-</u>

pd 4/22/19

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>Apr 22 2019</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 reverse side.

For the license period beginning: 07 01 2019 ending: 06 30 2020
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of Village of City of } Lake Geneva

County of Walworth Aldermanic Dist. No. _____ (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name(s) (Last, First and Middle Name) Home Address Post Office & Zip Code

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company ▶ HOGS & KISSES, INC

Address of Corporation/Limited Liability Company (if different from licensed premises) ▶ PO BOX 536, LAKE GENEVA, WI

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

Title	Name (Inc. Middle Name)	Home Address	Post Office & Zip Code
President/Member	LINDA CHIRONIS	[REDACTED]	[REDACTED]
Vice President/Member		[REDACTED]	[REDACTED]
Secretary/Member	LINDA CHIRONIS	[REDACTED]	[REDACTED]
Treasurer/Member	LINDA CHIRONIS	[REDACTED]	[REDACTED]
Agent	LINDA CHIRONIS	[REDACTED]	[REDACTED]
Directors/Managers	LINDA CHIRONIS	[REDACTED]	[REDACTED]

C.1. Trade Name ▶ HOGS & KISSES Business Phone Number 262-248-7447

2. Address of Premises ▶ 149 BROAD ST, LAKE GENEVA Post Office & Zip Code ▶ PO BOX 536 53147

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.) BRICK BUILDING @ 149 BROAD ST,

5. Legal description (omit if street address is given above): INCLUDING BAR, RESTAURANT, STORAGE & OFFICE

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, corporation 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 reverse side** 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 reverse side** 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? [phone (608) 266-2776] Yes No

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

Applicant's WI Seller's Permit No.: 456000047935803	FEIN Number: 391353912
LICENSE REQUESTED ▶	
TYPE	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$ 100
<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	\$ 500
<input type="checkbox"/> Reserve Class B liquor	\$
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$ 25
TOTAL FEE	\$ 625

pdf 4/21/19

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.

Linda Chironis

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

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>Apr 2, 2019</u>	Date reported to council/board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Original Alcohol Beverage Retail License Application

Submit to municipal clerk.

For the license period beginning JULY 1 20 19 ;
ending JUNE 30 20 _____

TO THE GOVERNING BODY of the: Town of }
 Village of } LAKE GENEVA
 City of }

County of WALWORTH Aldermanic Dist. No. _____ (if required by ordinance)

1. The named Individual Partnership Limited Liability Company
 Corporation / Nonprofit Organization

hereby makes application for the alcohol beverage license(s) checked above.

2. Name (individual/partners give last name, first, middle; corporations/limited liability companies give registered name): **▶** SANDAL, INC., DBA LAKE GENEVA LANES

An "Auxiliary Questionnaire," Form AT-103, must be completed and attached to this application by each individual applicant, by each member of a partnership, and by each officer, director and agent of a corporation or nonprofit organization, and by each member/manager and agent of a limited liability company. List the name, title, and place of residence of each person.

Title	Name (Last, First, M.I.)	Home Address	Post Office & Zip Code
President/Member	<u>PRESIDENT, GUSKE, ANNA, C.,</u>	<u>[REDACTED]</u>	<u>[REDACTED]</u>
Vice President/Member	<u>SEE ATTACHED</u>	<u>[REDACTED]</u>	<u>[REDACTED]</u>
Secretary/Member	<u>ANNA C. GUSKE,</u>	<u>[REDACTED]</u>	<u>[REDACTED]</u>
Treasurer/Member	<u>ANNA C. GUSKE,</u>	<u>[REDACTED]</u>	<u>[REDACTED]</u>
Agent	<u>▶ FRANKLIN D. GUSKE, JR.</u>	<u>[REDACTED]</u>	<u>[REDACTED]</u>
Directors/Managers	<u>SEE ATTACHED</u>	<u>[REDACTED]</u>	<u>[REDACTED]</u>

3. Trade Name **▶** LAKE GENEVA LANES Business Phone Number (262) 248-4805
4. Address of Premises **▶** 192 E. MAIN STREET Post Office & Zip Code **▶** LAKE GENEVA, WI 53147

5. Is individual, partners or agent of corporation/limited liability company subject to completion of the responsible beverage server training course for this license period? Yes No
6. Is the applicant an employe or agent of, or acting on behalf of anyone except the named applicant? Yes No
7. Does any other alcohol beverage retail licensee or wholesale permittee have any interest in or control of this business? Yes No
8. (a) Corporate/limited liability company applicants only: Insert state _____ and date _____ of registration.
(b) Is applicant corporation/limited liability company a subsidiary of any other corporation or limited liability company? Yes No
(c) Does the corporation, or any officer, director, stockholder or agent or limited liability company, or any member/manager or agent hold any interest in any other alcohol beverage license or permit in Wisconsin? Yes No
(NOTE: All applicants explain fully on reverse side of this form every YES answer in sections 5, 6, 7 and 8 above.)

9. 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.) 16 LANES, 1ST FL, LOWER FL, BAR, COOLER, STORAGE

10. Legal description (omit if street address is given above): _____
11. (a) Was this premises licensed for the sale of liquor or beer during the past license year? Yes No
(b) If yes, under what name was license issued? FRANKLIN D. GUSKE JR.

12. Does the applicant understand they must register as a Retail Beverage Alcohol Dealer with the federal government, Alcohol and Tobacco Tax and Trade Bureau (TTB) by filing (TTB form 5630.5d) before beginning business? [phone 1-877-882-3277]. Yes No
13. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776]. Yes No
14. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes No

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 signer. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000. Signer agrees to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants, or one member of a partnership applicant must sign; one corporate officer, one member/manager of Limited Liability Companies must sign.) 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.

Jaquelyn A. Urbahn
(Officer of Corporation / Member / Manager of Limited Liability Company / Partner / Individual)

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>APR 9, 2019</u>	Date reported to council / board	Date previous license issued	Signature of Clerk / Deputy Clerk
Date license granted	Date license issued	License number issued	

Applicant's WI Seller's Permit No.: <u>456-000060940</u> FEIN Number: <u>39-1225711</u>	
LICENSE REQUESTED ▶	
TYPE	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$ <u>100-</u>
<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	\$ <u>500-</u>
<input type="checkbox"/> Reserve Class B liquor	\$
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$ <u>25-</u>
TOTAL FEE	\$ <u>(625)</u> pd 4/9/19

ok

Renewal Alcohol Beverage License Application

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07 01 2019 ending: 06 30 2020
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of } LAKE GENEVA
 Village of }
 City of }

County of WALWORTH Aldermanic Dist. No. N/A (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:
 Full Name(s) (Last, First and Middle Name) _____ Home Address _____ Post Office & Zip Code _____

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company ▶ Geneva Bay Club LLC
 Address of Corporation/Limited Liability Company (if different from licensed premises) ▶ 421 Baker St
 All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company:

Title	Name (Inc. Middle Name)	Home Address	Post Office & Zip Code
President/Member	<u>Charles Andrew Fritz</u>	[REDACTED]	[REDACTED]
Vice President/Member	_____	_____	_____
Secretary/Member	_____	_____	_____
Treasurer/Member	_____	_____	_____
Agent ▶	<u>Charles Andrew Fritz</u>	[REDACTED]	[REDACTED]

 Directors/Managers _____

C. 1. Trade Name ▶ Maxwell Mansion Business Phone Number 262-248-9711
 2. Address of Premises ▶ 421 Baker St Post Office & Zip Code ▶ Lake Geneva WI 53147

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.) Hotel w/3 Buildings & Enclosed Pool - storage in Basement
5. Legal description (omit if street address is given above): _____
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, corporation 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 reverse side 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 reverse side 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? [phone (608) 266-2776] Yes No
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

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

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

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>4/17/2019</u>	Date reported to council/board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Applicant's WI Seller's Permit No. <u>456-102785636-02</u> FEIN Number: <u>45-454420</u>	
LICENSE REQUESTED ▶	
TYPE	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$ <u>100</u>
<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	\$ <u>500</u>
<input type="checkbox"/> Reserve Class B liquor	\$
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$ <u>25</u>
TOTAL FEE	\$ <u>625</u>

pd 4/17/19

Renewal Alcohol Beverage License Application

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07 01 2019 ending: 06 30 2020
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of } LAKE GENEVA
 Village of }
 City of }

County of WALWORTH Aldermanic Dist. No. N/A (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Applicant's WI Seller's Permit No.: <u>456000234319202</u>		FEIN Number: <u>20-3313403</u>	
LICENSE REQUESTED ▶			
TYPE	FEE		
<input type="checkbox"/> Class A beer	\$		
<input checked="" type="checkbox"/> Class B beer	\$ <u>100-</u>		
<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	\$ <u>500-</u>		
<input type="checkbox"/> Reserve Class B liquor	\$		
<input type="checkbox"/> Class B (wine only) winery	\$		
Publication fee	\$ <u>25-</u>		
TOTAL FEE	\$ <u>625-</u>		

Complete A or B. All must complete C.

A. Individual or Partnership:
 Full Name(s) (Last, First and Middle Name) _____ Home Address _____ Post Office & Zip Code pd 410119

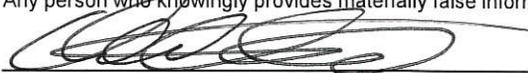
B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company ▶ DCR Restaurant Group, LLC
 Address of Corporation/Limited Liability Company (if different from licensed premises) ▶ 411 Interchange N. Lake Geneva, WI 53147
 All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company:

Title	Name (Inc. Middle Name)	Home Address	Post Office & Zip Code
President/Member	<u>Chad Bittner</u>	[REDACTED]	[REDACTED]
Vice President/Member	<u>Richard Bittner</u>	[REDACTED]	[REDACTED]
Secretary/Member	_____	_____	_____
Treasurer/Member	_____	_____	_____
Agent ▶	<u>Chad Bittner</u>	_____	_____
Directors/Managers	_____	_____	_____

C. 1. Trade Name ▶ Next Door Pub & Pizzeria Business Phone Number 262-248-9551
 2. Address of Premises ▶ 411 Interchange N. Post Office & Zip Code ▶ Lake Geneva, WI 53147

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.) Restaurant, Bar, Storage Room, Patio, Office, Outdoor Waiting Area, Basement, Fall Anniversary Party
5. Legal description (omit if street address is given above): _____
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, corporation 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 reverse side** 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 reverse side** 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? [phone (608) 266-2776] Yes No
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

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.


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

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>Apr 2, 2019</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 reverse side.

For the license period beginning: 07 01 2019 ending: 06 30 2020
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of } LAKE GENEVA
 Village of }
 City of }

County of WALWORTH Aldermanic Dist. No. N/A (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Applicant's WI Seller's Permit No. <u>456 DDD548839</u> FEIN Number: <u>3914994824</u>	
LICENSE REQUESTED ▶	
TYPE	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$ <u>100</u>
<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	\$ <u>500</u>
<input type="checkbox"/> Reserve Class B liquor	\$
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$ <u>25</u>
TOTAL FEE	\$ <u>625.00</u>

Complete A or B. All must complete C.

A. Individual or Partnership:
 Full Name(s) (Last, First and Middle Name) _____ Home Address _____ Post Office & Zip Code _____

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company ▶ SWATEK SALES CORP / SS2 Trk.
 Address of Corporation/Limited Liability Company (if different from licensed premises) ▶ 393 W. EDWARDS BLD. LK. GENEVA, W.
 All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company:

Title	Name (Inc. Middle Name)	Home Address	Post Office & Zip Code
President/Member	<u>DOROTHY SWATEK</u>	_____	_____
Vice President/Member	_____	_____	_____
Secretary/Member	_____	_____	_____
Treasurer/Member	_____	_____	_____
Agent	<u>TROY A. BARTA</u>	_____	_____
Directors/Managers	_____	_____	_____

C. 1. Trade Name ▶ THE GEO CERANIUM RESTAURANT Business Phone Number 262-248-3637
 2. Address of Premises ▶ 393 W. EDWARDS BLD. Post Office & Zip Code ▶ LK. GENEVA, W. 53147

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.) TWO STORY FRAMED RESIDENCE CONSIDERED AS PATIO
5. Legal description (omit if street address is given above): RESTAURANT BAR AREA, PATIO, STORAGE OFFICE
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, corporation 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 reverse side** 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 reverse side** 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? [phone (608) 266-2776] Yes No
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

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.

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

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>4/5/19</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 reverse side.

For the license period beginning: 07 01 2019 ending: 06 30 2020
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of } LAKE GENEVA
 Village of }
 City of }

County of WALWORTH Aldermanic Dist. No. N/A (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name(s) (Last, First and Middle Name)

Home Address

Post Office & Zip Code

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company ▶ "Two Thumbs Up LLC"

Address of Corporation/Limited Liability Company (if different from licensed premises)

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

Title	Name (Inc. Middle Name)	Home Address	Post Office & Zip Code
President/Member	<u>Kimberly C Freely</u>	[REDACTED]	[REDACTED]
Vice President/Member			
Secretary/Member			
Treasurer/Member			
Agent	<u>Kimberly Freely</u>		
Directors/Managers			

C. 1. Trade Name ▶ "Thumbs Up" Business Phone Number 262-248-6111

2. Address of Premises ▶ 260 N. Broad St Post Office & Zip Code ▶ Lake Geneva WI 53147

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.) Ground floor bar room w/ closet for storage + walk in cooler

5. Legal description (omit if street address is given above):

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, corporation 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 reverse side** 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 reverse side** 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? [phone (608) 266-2776] Yes No

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

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.

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

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>Apr 17, 2019</u>	Date reported to council/board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

FEIN: # 46-2429666

Applicant's WI Seller's Permit No. FEIN Number: <u>456-1027919952-02</u>	
LICENSE REQUESTED ▶	
TYPE	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$ <u>100-</u>
<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	\$ <u>500-</u>
<input type="checkbox"/> Reserve Class B liquor	\$
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$ <u>25-</u>
TOTAL FEE	\$ <u>625-</u>

pd 4/17/19

Renewal Alcohol Beverage License Application

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07 01 2019 ending: 06 30 2020
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of } LAKE GENEVA
 Village of }
 City of }

County of WALWORTH Aldermanic Dist. No. N/A (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name(s) (Last, First and Middle Name) ROMANO, Thomas Anthony

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company LG Hospitality Group LLC

Address of Corporation/Limited Liability Company (if different from licensed premises) 16 Hospitality Group LLC

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

Title	Name (Inc. Middle Name)	Home Address	Post Office & Zip Code
President/Member			
Vice President/Member			
Secretary/Member			
Treasurer/Member			
Agent	<u>JAMES GEORGALUS</u>		
Directors/Managers			

C. 1. Trade Name TUSCAN TAVERN and Grill Business Phone Number 262.248.0888

2. Address of Premises 436 BROAD ST Post Office & Zip Code 53147

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.) Basement, Bar, outdoor seating area 1st floor Storage lower level storage

5. Legal description (omit if street address is given above):

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, corporation 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 reverse side** 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 reverse side** 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? [phone (608) 266-2776] Yes No

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

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.

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

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>Apr 8, 2019</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 reverse side.

Applicant's WI Seller's Permit No. 456-1028656597-02		FEIN Number: 471614401	
LICENSE REQUESTED ▶			
TYPE		FEE	
<input type="checkbox"/>	Class A beer	\$	
<input checked="" type="checkbox"/>	Class B beer	\$	100.00
<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	\$	500.00
<input type="checkbox"/>	Reserve Class B liquor	\$	
<input type="checkbox"/>	Class B (wine only) winery	\$	
Publication fee		\$	25.00
TOTAL FEE		\$	625.00

For the license period beginning: 07 01 2019 ending: 06 30 2020
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of } LAKE GENEVA
 Village of }
 City of }

County of WALWORTH Aldermanic Dist. No. N/A (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:
 Full Name(s) (Last, First and Middle Name) Home Address Post Office & Zip Code

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company ▶ OAKFIRE, LLC
 Address of Corporation/Limited Liability Company (if different from licensed premises) ▶ 831 WRIGLEY DR. LAKE GENEVA, WI. 53147
 All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company:
 Title Name (Inc. Middle Name) Home Address Post Office & Zip Code
 President/Member DAVID R. SCOTNEY
 Vice President/Member _____
 Secretary/Member _____
 Treasurer/Member _____
 Agent ▶ David Scotney
 Directors/Managers _____

- C. 1. Trade Name ▶ OAKFIRE Business Phone Number 262-812-8007
 2. Address of Premises ▶ 831 WRIGLEY DR. LAKE GENEVA, WI Post Office & Zip Code ▶ 53147
 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.) WHOLE BUILDING
 5. Legal description (omit if street address is given above): N/A
 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, corporation 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 reverse side** 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 reverse side** 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? [phone (608) 266-2776] Yes No
 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

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

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

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>Apr 15, 2019</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 reverse side.

For the license period beginning: 07 01 2019 ending: 06 30 2020
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of } LAKE GENEVA
 Village of }
 City of }

County of WALWORTH Aldermanic Dist. No. N/A (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Applicant's WI Seller's Permit No.: <u>456600389925202</u> / FEIN Number: <u>261237633</u>	
LICENSE REQUESTED ▶	
TYPE	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$ <u>100</u>
<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 checked="" type="checkbox"/> Class B (wine only) winery	\$ <u>500</u>
Publication fee	\$ <u>25</u>
TOTAL FEE	\$ <u>625</u> pd 4/16/19

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name(s) (Last, First and Middle Name) Home Address Post Office & Zip Code

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company ▶ Jackson Wine LLC
 Address of Corporation/Limited Liability Company (if different from licensed premises) ▶ _____
 All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company:

Title	Name (Inc. Middle Name)	Home Address	Post Office & Zip Code
President/Member	<u>KATHLEEN A JACKSON</u>	[REDACTED]	[REDACTED]
Vice President/Member	<u>DAVID G. JACKSON</u>	[REDACTED]	[REDACTED]
Secretary/Member	_____	_____	_____
Treasurer/Member	_____	_____	_____
Agent ▶	_____	_____	_____
Directors/Managers	_____	_____	_____

C. 1. Trade Name ▶ Studio Winery Business Phone Number 262 348 9100
 2. Address of Premises ▶ 401 Sheridan Springs Road Post Office & Zip Code ▶ Lake Geneva 53147

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 lower level of
5. Legal description (omit if street address is given above): _____
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, corporation 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 reverse side** 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 reverse side** 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? [phone (608) 266-2776] Yes No
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

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

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

TO BE COMPLETED BY CLERK

Date received, and filed with municipal clerk <u>4/16/19 10.003143</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 reverse side.

For the license period beginning: 07 01 2019 ending: 06 30 2020
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of } LAKE GENEVA
 Village of }
 City of }

County of WALWORTH Aldermanic Dist. No. N/A (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name(s) (Last, First and Middle Name)

▶ GEORGE D. ARGIROPOULOS

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company ▶ LAKE AIRE LLC, DBA LAKE AIRE RESTAURANT.

Address of Corporation/Limited Liability Company (if different from licensed premises) ▶ 804 W. MAIN ST., LAKE GENEVA, WI 53147

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

Title Name (Inc. Middle Name) Home Address Post Office & Zip Code

President/Member GEORGE D. ARGIROPOULOS

Vice President/Member DEMETRIUS ARGIROPOULOS

Secretary/Member _____

Treasurer/Member _____

Agent ▶ GEORGE D. ARGIROPOULOS

Directors/Managers _____

C. 1. Trade Name ▶ LAKE AIRE RESTAURANT Business Phone Number 262-248-9913

2. Address of Premises ▶ 804 W. MAIN ST., LAKE GENEVA, WI 53147 Post Office & Zip Code ▶ LAKE GENEVA, WI 53147

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.) STORED IN BASEMENT & DINING ROOM. SOLD IN DINING ROOM AND SIDEWALK CAFE.

5. Legal description (omit if street address is given above): _____

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, corporation 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 reverse side** 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 reverse side** 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

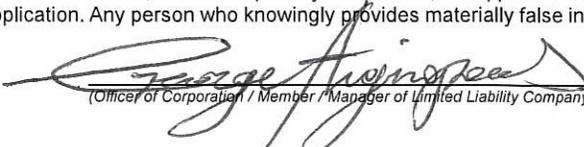
8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? If not, explain. Yes No

9. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776] Yes No

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

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.


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

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>APR 1, 2019</u>	Date reported to council/board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Applicant's WI Seller's Permit No.: <u>456-1028914898-02</u> FEIN Number: <u>81-0928145</u>	
LICENSE REQUESTED	
TYPE	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 checked="" type="checkbox"/> Reserve Class B liquor	\$ <u>600.00</u>
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$ <u>25.00</u>
TOTAL FEE	\$ <u>625.00</u> 11/19

4561029969354-02
 82-4462437

Renewal Alcohol Beverage License Application

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07 01 2019 ending: 06 30 2020
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of } LAKE GENEVA
 Village of }
 City of }

County of WALWORTH Aldermanic Dist. No. N/A (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

LICENSE REQUESTED	
TYPE	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$ <u>100</u>
<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 checked="" type="checkbox"/> Reserve Class B liquor	\$ <u>500</u>
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$ <u>25</u>
TOTAL FEE	\$ <u>625</u>

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name(s) (Last, First and Middle Name) Home Address Post Office & Zip Code

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company HARBORSIDE Pub & Grill, LLC
 Address of Corporation/Limited Liability Company (if different from licensed premises)

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

Title	Name (Inc. Middle Name)	Home Address	Post Office & Zip Code
President/Member	<u>SPYRO CONDOOS</u>	[REDACTED]	[REDACTED]
Vice President/Member	<u>PATRICIA CONDOOS</u>	[REDACTED]	[REDACTED]
Secretary/Member			
Treasurer/Member			
Agent	<u>SPYRO CONDOOS</u>		
Directors/Managers			

C. 1. Trade Name HARBOR SIDE Pub & Grill LLC Business Phone Number 262 248 3835

2. Address of Premises 100 BROAD STREET Post Office & Zip Code 53147

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.) CEMENT WALK - BASEMENT STORAGE

5. Legal description (omit if street address is given above): SEE ATTACHED MAP

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, corporation 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 reverse side** 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 reverse side** 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? [phone (608) 266-2776] Yes No

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

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

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

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>APR 9, 2019</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 reverse side.

For the license period beginning: 07 01 2019 ending: 06 30 2020
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of } LAKE GENEVA
 Village of }
 City of }

County of WALWORTH Aldermanic Dist. No. N/A (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name(s) (Last, First and Middle Name)	Home Address	Post Office & Zip Code

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company ▶ SIL WINGS CORP.

Address of Corporation/Limited Liability Company (if different from licensed premises) ▶ SAME

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

Title	Name (Inc. Middle Name)	Home Address	Post Office & Zip Code
President/Member	<u>Siu Wing Leung</u>		
Vice President/Member	<u>RAN SI LEU</u>		
Secretary/Member	<u>LARRY R. SANDY</u>		
Treasurer/Member			
Agent	<u>Siu Wing Leung</u>		
Directors/Managers	<u>SAME AS ABOVE</u>		

C. 1. Trade Name ▶ SIL WINGS CHINESE RESTAURANT Business Phone Number 262-248-1178

2. Address of Premises ▶ 743 NORTH ST. Post Office & Zip Code ▶ LAKE GENEVA WI 53147

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.) BAR, BACK ROOM, DINING ROOM, OFFICE, KITCHEN, SIDEWALK

5. Legal description (omit if street address is given above):

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, corporation 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 reverse side** 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 reverse side** 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? [phone (608) 266-2776] Yes No

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

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.

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

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>April 4, 2019</u>	Date reported to council/board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Applicant's WI Seller's Permit No.: <u>456 000 208013-03</u>	FEIN Number: <u>39-1670031</u>
LICENSE REQUESTED ▶	
TYPE	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$ <u>100</u>
<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 checked="" type="checkbox"/> Reserve Class B liquor	\$ <u>500</u>
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$ <u>25</u>
TOTAL FEE	\$ <u>(1025)</u> PAID 4/4/19

Renewal Alcohol Beverage License Application

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07 01 2019 ending: 06 30 2020
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: Town of } LAKE GENEVA
 Village of }
 City of }

County of WALWORTH Aldermanic Dist. No. N/A (if required by ordinance)

CHECK ONE Individual Partnership Limited Liability Company
 Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name(s) (Last, First and Middle Name) Home Address Post Office & Zip Code

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company Bella Vista Suites on the shores of Lake Geneva Hotel Condominium
 Address of Corporation/Limited Liability Company (if different from licensed premises) Condominium
 All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company:

Title	Name (Inc. Middle Name)	Home Address	Post Office & Zip Code
President/Member			
Vice President/Member	<u>Charles Lorenzi</u>		
Secretary/Member			
Treasurer/Member			
Agent			
Directors/Managers			

C. 1. Trade Name Bella Vista Suites on the shores of Lake Geneva Hotel Condominium Phone Number 262-248-2100
 2. Address of Premises 335 Wingley Dr. Post Office & Zip Code Lake Geneva 53147

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.) garage, front porch, basement, patio, room
5. Legal description (omit if street address is given above): garage, front porch, basement, patio, room
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, corporation 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 reverse side** 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 reverse side** 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? [phone (608) 266-2776] Yes No
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

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

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

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>Apr 8, 2019</u>	Date reported to council/board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk



CITY OF LAKE GENEVA MASSAGE ESTABLISHMENT APPLICATION

\$50.00 ANNUAL LICENSE FEE

EXPIRES JUNE 30TH EACH YEAR

Is Application: Original or Renewal

Application must be accompanied by the following documents:

1. \$50.00 License fee, payable to the City of Lake Geneva and due upon application
2. Copy of Applicant's Driver's License
3. A listing of the name and address of each Massage Technician employed or subcontracted by the establishment
4. Copy of each Massage Technician's Current and Valid State of Wisconsin Massage Therapist or Bodywork Therapist Certificate
5. Copy of each Massage Technician's Driver's License
6. If the applicant business is a corporation, include a report of the names and current addresses of all officers, directors, and stockholders owning more than 10% of stock in the corporation

BUSINESS INFORMATION

Trade Name: Element Massage Studio

Corporate Name (if applicable): _____

Business Address (Physical): 647 W. Main St.

Mailing Address (if different): _____

City, State, Zip: Lake Geneva WI 53147

Phone: 414-324-2496 Email: elementmassages@yahoo.com

Please explain the nature of services to be provided: Massage Therapy
(Therapeutic Massage)

BUSINESS OWNER (APPLICANT) INFORMATION

Please include information for all business owners

Full Name: Dale Martin

[Redacted area]

Copy of Driver's License Attached

Please provide names and addresses of any and all previous establishments where applicant was employed or subcontracted as a Massage technician during the last 3 years, including type of work performed and dates of employment:

Same Place

Have you ever had a massage or similar license/permit revoked, suspended, or denied?

NO YES If yes, please explain: _____

Have you ever been arrested, charged, and/or convicted for any offense, other than misdemeanor traffic violations, in Wisconsin or any other state?

NO YES If yes, provide the offense, date, location, and disposition: _____

The undersigned hereby swears, under penalty of law, that the foregoing information provided in this application is true and correct to the best of his/her knowledge and belief.

APPLICANT SIGNATURE: [Signature] Date: 4-22-19

For Office Use Only

Date Filed: Apr 24, 2019 Receipt #: 10003292 Amt Paid: 150
Forwarded to Police Dept: Apr 24, 2019 Background Completed: 4-29-19 gjt
Police Chief Recommendation: _____ Approved Denied
Fingerprinting required for new establishments - Fingerprinted by LGPD:
Forwarded to Building Dept: _____ *Inspector approval required for new establishments*
Building Inspector Recommendation: _____ Approved Denied
FLR/Council Approval Dates: _____ License #: _____
Verified: Stark MSI Notes/Conditions: _____

Copies to: Building & Zoning Police Chief Fire Chief



CITY OF LAKE GENEVA MASSAGE ESTABLISHMENT APPLICATION

\$50.00 ANNUAL LICENSE FEE

EXPIRES JUNE 30TH EACH YEAR

Is Application: Original or Renewal

Application must be accompanied by the following documents:

1. \$50.00 License fee, payable to the City of Lake Geneva and due upon application
2. Copy of Applicant's Driver's License
3. A listing of the name and address of each Massage Technician employed or subcontracted by the establishment
4. Copy of each Massage Technician's Current and Valid State of Wisconsin Massage Therapist or Bodywork Therapist Certificate
5. Copy of each Massage Technician's Driver's License
6. If the applicant business is a corporation, include a report of the names and current addresses of all officers, directors, and stockholders owning more than 10% of stock in the corporation

BUSINESS INFORMATION

Trade Name: Lake Geneva Massage Therapy

Corporate Name (if applicable): _____

Business Address (Physical): 905 Marshall St

Mailing Address (if different): _____

City, State, Zip: Lake Geneva, WI 53147

Phone: 262-249-1230 Email: lg massage@yahoo.com

Please explain the nature of services to be provided: Massage Therapy

BUSINESS OWNER (APPLICANT) INFORMATION

Please include information for all business owners

Full Name: Mark W. Mitchell

Address: [REDACTED] _____

City, State: [REDACTED] _____

Phone: [REDACTED] _____ Driver's License Attached

Please provide names and addresses of any and all previous establishments where applicant was employed or subcontracted as a Massage technician during the last 3 years, including type of work performed and dates of employment:

N/A

Have you ever had a massage or similar license/permit revoked, suspended, or denied?

NO YES If yes, please explain: _____

Have you ever been arrested, charged, and/or convicted for any offense, other than misdemeanor traffic violations, in Wisconsin or any other state?

NO YES If yes, provide the offense, date, location, and disposition: _____

The undersigned hereby swears, under penalty of law, that the foregoing information provided in this application is true and correct to the best of his/her knowledge and belief.

APPLICANT SIGNATURE: X _____ Date: 5/3/19

For Office Use Only

Date Filed: May 3, 2019 Receipt #: 17000030 Amt Paid: 650

Forwarded to Police Dept: May 3, 2019 Background Completed: 5-5-19 JA

Police Chief Recommendation: _____ Approved Denied

Fingerprinting required for new establishments - Fingerprinted by LGPD:

Forwarded to Building Dept: _____ Inspector approval required for new establishments

Building Inspector Recommendation: _____ Approved Denied

FLR/Council Approval Dates: _____ License #: _____

Verified: Stark MSI Notes/Conditions: _____

Copies to: Building & Zoning Police Chief Fire Chief



CITY OF LAKE GENEVA MESSAGE ESTABLISHMENT APPLICATION

\$50.00 ANNUAL LICENSE FEE

EXPIRES JUNE 30TH EACH YEAR

Is Application: Original or Renewal

Application must be accompanied by the following documents:

1. \$50.00 License fee, payable to the City of Lake Geneva and due upon application
2. Copy of Applicant's Driver's License
3. A listing of the name and address of each Massage Technician employed or subcontracted by the establishment
4. Copy of each Massage Technician's Current and Valid State of Wisconsin Massage Therapist or Bodywork Therapist Certificate
5. Copy of each Massage Technician's Driver's License
6. If the applicant business is a corporation, include a report of the names and current addresses of all officers, directors, and stockholders owning more than 10% of stock in the corporation

BUSINESS INFORMATION

Trade Name: HEALING MUSCLE THERAPIES

Corporate Name (if applicable): -

Business Address (Physical): 201 BROAD ST, SUITE D, LAKE GENEVA, WI 53147

Mailing Address (if different): -

City, State, Zip: LAKE GENEVA, WI 53147

Phone: 262-515-7035 Email: info@healingmt.com

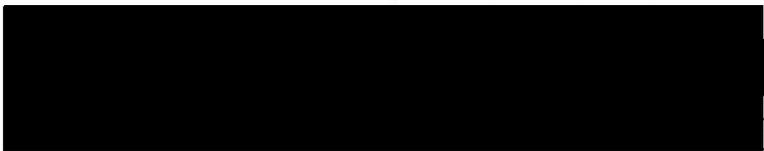
Please explain the nature of services to be provided: THERAPEUTIC MASSAGE

SERVICES including: Warm Salt Stone Massage + Traditional Thai Massage

BUSINESS OWNER (APPLICANT) INFORMATION

Please include information for all business owners

Full Name: MARTHA (marti) DOOLITTLE



Copy of Driver's License Attached

Please provide names and addresses of any and all previous establishments where applicant was employed or subcontracted as a Massage technician during the last 3 years, including type of work performed and dates of employment:

Have you ever had a massage or similar license/permit revoked, suspended, or denied?

NO YES If yes, please explain: _____

Have you ever been arrested, charged, and/or convicted for any offense, other than misdemeanor traffic violations, in Wisconsin or any other state?

NO YES If yes, provide the offense, date, location, and disposition: _____

The undersigned hereby swears, under penalty of law, that the foregoing information provided in this application is true and correct to the best of his/her knowledge and belief.

APPLICANT SIGNATURE: Maitha E. Dorrville Date: 4/20/19

For Office Use Only

Date Filed: 4/22/19 Receipt #: 18.0000016 Amt Paid: 50.00
Forwarded to Police Dept: _____ Background Completed: _____
Police Chief Recommendation: [Signature] Approved Denied
Fingerprinting required for new establishments - Fingerprinted by LGPD:
Forwarded to Building Dept: _____ *Inspector approval required for new establishments*
Building Inspector Recommendation: _____ Approved Denied
FLR/Council Approval Dates: _____ License #: _____
Verified: Stark MSI Notes/Conditions: _____
Copies to: Building & Zoning Police Chief Fire Chief



CITY OF LAKE GENEVA MASSAGE ESTABLISHMENT APPLICATION

\$50.00 ANNUAL LICENSE FEE

EXPIRES JUNE 30TH EACH YEAR

Is Application: Original or Renewal

Application must be accompanied by the following documents:

1. \$50.00 License fee, payable to the City of Lake Geneva and due upon application
2. Copy of Applicant's Driver's License
3. A listing of the name and address of each Massage Technician employed or subcontracted by the establishment
4. Copy of each Massage Technician's Current and Valid State of Wisconsin Massage Therapist or Bodywork Therapist Certificate
5. Copy of each Massage Technician's Driver's License
6. If the applicant business is a corporation, include a report of the names and current addresses of all officers, directors, and stockholders owning more than 10% of stock in the corporation

BUSINESS INFORMATION

Trade Name: Clear Waters Salon Spa

Corporate Name (if applicable): Clear Waters Salon Spa Inc.

Business Address (Physical): 734 Main St.

Mailing Address (if different): same

City, State, Zip: Lake Geneva WI 53147

Phone: 262-248-2444 Email: clearwaterssalonspa13@gmail.com

Please explain the nature of services to be provided: hair, nails, skin care + body massage

BUSINESS OWNER (APPLICANT) INFORMATION

Please include information for all business owners

Full Name: Dawn Marie Mancuso | Jennifer Keith

Address: [Redacted]

City, State: [Redacted]

Phone: [Redacted]

Copy of Driver's License Attached

Please provide names and addresses of any and all previous establishments where applicant was employed or subcontracted as a Massage technician during the last 3 years, including type of work performed and dates of employment:

Clear Waters Salon Spa -
18 W. Geneva St
Williams Bay WI 53191

Have you ever had a massage or similar license/permit revoked, suspended, or denied?

NO YES If yes, please explain: _____

Have you ever been arrested, charged, and/or convicted for any offense, other than misdemeanor traffic violations, in Wisconsin or any other state?

NO YES If yes, provide the offense, date, location, and disposition: _____

The undersigned hereby swears, under penalty of law, that the foregoing information provided in this application is true and correct to the best of his/her knowledge and belief.

APPLICANT SIGNATURE: Dawn Marie Mancoske Date: 4/27/19

For Office Use Only

Date Filed: May 6, 2019 Receipt #: 17000043 Amt Paid: \$50-

Forwarded to Police Dept: May 6, 2019 Background Completed: _____

Police Chief Recommendation: _____ Approved Denied

Fingerprinting required for new establishments - Fingerprinted by LGPD:

Forwarded to Building Dept: _____ *Inspector approval required for new establishments*

Building Inspector Recommendation: _____ Approved Denied

FLR/Council Approval Dates: _____ License #: _____

Verified: Stark MSI Notes/Conditions: _____

Copies to: Building & Zoning Police Chief Fire Chief



CITY OF LAKE GENEVA MASSAGE ESTABLISHMENT APPLICATION

\$50.00 ANNUAL LICENSE FEE

EXPIRES JUNE 30TH EACH YEAR

Is Application: Original or Renewal

Application must be accompanied by the following documents:

1. \$50.00 License fee, payable to the City of Lake Geneva and due upon application
2. Copy of Applicant's Driver's License
3. A listing of the name and address of each Massage Technician employed or subcontracted by the establishment
4. Copy of each Massage Technician's Current and Valid State of Wisconsin Massage Therapist or Bodywork Therapist Certificate
5. Copy of each Massage Technician's Driver's License
6. If the applicant business is a corporation, include a report of the names and current addresses of all officers, directors, and stockholders owning more than 10% of stock in the corporation

BUSINESS INFORMATION

Trade Name: Bella Vista Suites and the Lakeview Spa

Corporate Name (if applicable): Bella Vista Suites on the shores of Lake Geneva Hotel Condominium

Business Address (Physical): 335 Wrigley Drive

Mailing Address (if different): _____

City, State, Zip: Lake Geneva, WI 53147

Phone: 262-248-2100 Email: clorenzi@bellavistasuites.com

Please explain the nature of services to be provided: _____

BUSINESS OWNER (APPLICANT) INFORMATION

Please include information for all business owners

Full Name: Charles Lorenzi

Address: 335 Wrigley Drive

City, State, Zip: Lake Geneva, WI 53147

Phone: 262-248-2100 Copy of Driver's License Attached



CITY OF LAKE GENEVA MASSAGE ESTABLISHMENT APPLICATION

\$50.00 ANNUAL LICENSE FEE

EXPIRES JUNE 30TH EACH YEAR

Is Application: Original or Renewal

Application must be accompanied by the following documents:

- ✓1. \$50.00 License fee, payable to the City of Lake Geneva and due upon application
- ✓2. Copy of Applicant's Driver's License
- ✓3. A listing of the name and address of each Massage Technician employed or subcontracted by the establishment
- 4. Copy of each Massage Technician's Current and Valid State of Wisconsin Massage Therapist or Bodywork Therapist Certificate
- 5. Copy of each Massage Technician's Driver's License
- ✓6. If the applicant business is a corporation, include a report of the names and current addresses of all officers, directors, and stockholders owning more than 10% of stock in the corporation

BUSINESS INFORMATION

Trade Name: The Therapeutic Touch

Corporate Name (if applicable): M & M Clausen dba The Therapeutic Touch, LLC

Business Address (Physical): 1001 W. Main St., Lake Geneva, WI

Mailing Address (if different): Same

City, State, Zip: Lake Geneva, WI 53147

Phone: 262-248-6888 Email: info@the-therapeutic-touch.com

Please explain the nature of services to be provided: massages & facials

BUSINESS OWNER (APPLICANT) INFORMATION

Please include information for all business owners

Full Name: Max Clausen / Monica Clausen



Copy of Driver's License Attached

Please provide names and addresses of any and all previous establishments where applicant was employed or subcontracted as a Massage technician during the last 3 years, including type of work performed and dates of employment:

See attached

Have you ever had a massage or similar license/permit revoked, suspended, or denied?

NO YES If yes, please explain: _____

Have you ever been arrested, charged, and/or convicted for any offense, other than misdemeanor traffic violations, in Wisconsin or any other state?

NO YES If yes, provide the offense, date, location, and disposition: _____

The undersigned hereby swears, under penalty of law, that the foregoing information provided in this application is true and correct to the best of his/her knowledge and belief.

APPLICANT SIGNATURE: [Signature] Date: 5-22-19

For Office Use Only

Date Filed: May 22, 2019 Receipt #: 10003923 Amt Paid: \$50-

Forwarded to Police Dept: May 22, 2019 Background Completed: 5-26-19

Police Chief Recommendation: [Signature] Approved Denied

Fingerprinting required for new establishments - Fingerprinted by LGPD:

Forwarded to Building Dept: _____ Inspector approval required for new establishments

Building Inspector Recommendation: _____ Approved Denied

FLR/Council Approval Dates: _____ License #: _____

Verified: Stark MSI Notes/Conditions: _____

Copies to: Building & Zoning Police Chief Fire Chief



CITY OF LAKE GENEVA

TAXI COMPANY LICENSE APPLICATION

Please Check:

- Original Application
- Renewal of Current License

Fees of \$50.00 for first car and \$25.00 per each additional car are due upon application

Annual License Expires June 30th each year

Please fill in all blanks completely, as incomplete applications will be rejected.

NOTE: Application must be accompanied by the following documents:

- Copy of policy of liability insurance covering all vehicles, insuring the licensee against loss from liability to the amount of \$300,000 for the injury or death of one or more persons and in the amount of \$100,000 for damage to property of others for any one accident due to negligent operation of vehicle.
- Copy of certificate of inspection signed by a reputable automobile mechanic or public garage owner certifying that the vehicle sought to be licensed is mechanically sound and in a thoroughly safe condition for the transportation of passengers and in clean, fit and good appearance.
- Taxi/Trolley Driver License Application(s) for any drivers who are not currently licensed with the City of Lake Geneva.

ANY APPLICATION SUBMITTED WITHOUT THE REQUIRED DOCUMENTATION SHALL BE CONSIDERED INCOMPLETE AND REJECTED.

BUSINESS INFORMATION

Business Name: Senior Cab

Bus. Address (Physical): [REDACTED]

Mailing Address (if different): _____

City, State, Zip: Lake Geneva, WI 53147

Bus. Phone: [REDACTED] Fax: _____

E-Mail: [REDACTED]

Name of Liability Carrier: [REDACTED]

Policy Number: [REDACTED]

BUSINESS OWNER/AGENT INFORMATION

Owner/ Agent Name: Larry Rygielski



PLEASE ANSWER THE FOLLOWING QUESTIONS COMPLETELY

1. Have you been previously licensed to operate a taxicab company? YES NO
If Yes, please state where: Lake Geneva since 2004

2. Have you ever had a license revoked? YES NO
If Yes, please explain: GWI - Walworth County
23 years ago

TAXI VEHICLE INFORMATION

Total Number of Vehicles to be operated: 2

Vehicle #1			
<u>Dodge</u>	<u>Grand Caravan</u>	<u>2008</u>	
Make	Model	Year	
<u>7</u>	<u>879VFA</u>		
Capacity	License Plate No.		
<u>2D8HN44H58R634130</u>			
VIN	Certificate of Title No.		

Vehicle #2			
<u>Chevrolet</u>	<u>Express G3500</u>	<u>2010</u>	
Make	Model	Year	
<u>14</u>	<u>253YVP</u>		
Capacity	License Plate No.		
<u>1GA2G1DG5A1156718</u>			
VIN	Certificate of Title No.		

Vehicle #3		
Make	Model	Year
Capacity	License Plate No.	
VIN	Certificate of Title No.	

Vehicle #4		
Make	Model	Year
Capacity	License Plate No.	
VIN	Certificate of Title No.	

APPLICANT SIGNATURE

Lenny R. Rinaldi DATE: 4/25/19

For Office Use Only

Date Filed: <u>Apr 29, 2019</u>	Police Chief
Receipt No: <u>10003350</u>	Recommendation: <u>W</u>
Total Amount: <u>\$75-</u>	<u>Approved</u> Denied
Forwarded to Police Chief: <u>Apr 29, 2019</u>	City Attorney Approval of Liability Insurance: _____
Forwarded to City Attorney: _____	License Date: _____
Verified: Stark <input type="checkbox"/> MSI <input type="checkbox"/>	License Number: _____
Notes: _____	
FLR Approval: _____	
Council Approval: _____	



CITY OF LAKE GENEVA

TAXI COMPANY LICENSE APPLICATION

Please Check:

Original Application

Renewal of Current License

Fees of \$50.00 for first car and \$25.00 per each additional car are due upon application

Annual License Expires June 30th each year

Please fill in all blanks completely, as incomplete applications will be rejected.

NOTE: Application must be accompanied by the following documents:

- Copy of policy of liability insurance covering all vehicles, insuring the licensee against loss from liability to the amount of \$300,000 for the injury or death of one or more persons and in the amount of \$100,000 for damage to property of others for any one accident due to negligent operation of vehicle.
- Copy of certificate of inspection signed by a reputable automobile mechanic or public garage owner certifying that the vehicle sought to be licensed is mechanically sound and in a thoroughly safe condition for the transportation of passengers and in clean, fit and good appearance.
- Taxi/Trolley Driver License Application(s) for any drivers who are not currently licensed with the City of Lake Geneva.

ANY APPLICATION SUBMITTED WITHOUT THE REQUIRED DOCUMENTATION SHALL BE CONSIDERED INCOMPLETE AND REJECTED.

BUSINESS INFORMATION

Business Name: Lakefront Shuttle

Bus. Address (Physical): 300 Wrigley Dr Lake Geneva, WI 53147

Mailing Address (if different): _____

City, State, Zip: _____

Bus. Phone: 262-203-4769 Fax: _____

E-Mail: info@lakefrontshuttle.com

Name of Liability Carrier: National Liability & Fire Ins / Glass Insurance

Policy Number: _____

BUSINESS OWNER/AGENT INFORMATION

Owner/Agent Name: Robert McAllister



PLEASE ANSWER THE FOLLOWING QUESTIONS COMPLETELY

1. Have you been previously licensed to operate a taxicab company? YES NO
If Yes, please state where: _____

2. Have you ever had a license revoked? YES NO
If Yes, please explain: _____

TAXI VEHICLE INFORMATION

Total Number of Vehicles to be operated: 1

Vehicle #1		
<u>Ford</u>	<u>E450</u>	<u>2005</u>
Make	Model	Year
<u>12 plus driver</u>	License Plate No.	
Capacity	<u>1FDXE45S55HB31415</u>	
VIN	Certificate of Title No.	

Vehicle #2		
Make	Model	Year
Capacity	License Plate No.	
VIN	Certificate of Title No.	

Vehicle #3		
Make	Model	Year
Capacity	License Plate No.	
VIN	Certificate of Title No.	

Vehicle #4		
Make	Model	Year
Capacity	License Plate No.	
VIN	Certificate of Title No.	

APPLICANT SIGNATURE

[Handwritten Signature]

DATE: 5/12/19

For Office Use Only

Date Filed: <u>May 17, 2019</u>	Police Chief
Receipt No: <u>10008799</u>	Recommendation: <u>[Signature]</u>
Total Amount: <u>\$50</u>	Approved <input checked="" type="checkbox"/> Denied <input type="checkbox"/>
Forwarded to Police Chief: <u>5/17/19</u>	City Attorney Approval of Liability
Forwarded to City Attorney: _____	Insurance: _____
Verified: Stark <input type="checkbox"/> MSI <input type="checkbox"/>	License Date: _____
Notes: _____	License Number: _____
FLR Approval: _____	
Council Approval: _____	

VEHICLE SAFETY INSPECTION

Instructions: The licensee shall provide this form to the garage, dealership or auto repair shop to be completed by the inspector upon completion of the vehicle inspection. The licensee shall submit the completed form to the City Clerk.

Bo McAllister
Vehicle Owner/Agent Name

Vehicle - Year	Make	Model	Color	Odometer Reading	License Plate Number
2005	Ford	E450	White	99,924	673YUP
Name - Inspecting Company or Agency			Name - Inspector		Telephone Number
Mike's Auto Repair			Eduardo Soto		262-248-3300
Address			City	State	Zip Code
923 Williams St			Lake Geneva	WI	53147

VEHICLE INSPECTION CHECKLIST

Item	Pass	Repair / Replace	Item	Pass	Repair / Replace
BRAKES	<input checked="" type="checkbox"/>	<input type="checkbox"/>	SAFETY FEATURES	<input checked="" type="checkbox"/>	<input type="checkbox"/>
1. Failure indicator light	<input checked="" type="checkbox"/>	<input type="checkbox"/>	17. Turn signals operational	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. System integrity	<input checked="" type="checkbox"/>	<input type="checkbox"/>	18. Head lights	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. Pedal reserve	<input checked="" type="checkbox"/>	<input type="checkbox"/>	19. Tail lights	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4. Disc / drum condition	<input checked="" type="checkbox"/>	<input type="checkbox"/>	20. Brake lights	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5. Hoses and assembly	<input checked="" type="checkbox"/>	<input type="checkbox"/>	21. Horn	<input checked="" type="checkbox"/>	<input type="checkbox"/>
SUSPENSION	<input checked="" type="checkbox"/>	<input type="checkbox"/>	22. Windows / Windshield (cracks / chips)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6. Shock absorbers / struts	<input checked="" type="checkbox"/>	<input type="checkbox"/>	23. Front seat safety belts condition	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7. Springs	<input checked="" type="checkbox"/>	<input type="checkbox"/>	24. Back seat safety belts condition	<input checked="" type="checkbox"/>	<input type="checkbox"/>
8. Shackles	<input checked="" type="checkbox"/>	<input type="checkbox"/>	25. Door locks operational	<input checked="" type="checkbox"/>	<input type="checkbox"/>
9. Modifications	<input checked="" type="checkbox"/>	<input type="checkbox"/>	WIPERS / WIPER BLADES	<input checked="" type="checkbox"/>	<input type="checkbox"/>
STEERING	<input checked="" type="checkbox"/>	<input type="checkbox"/>	26. Wipers operational	<input checked="" type="checkbox"/>	<input type="checkbox"/>
10. Lash	<input checked="" type="checkbox"/>	<input type="checkbox"/>	27. Blades contact	<input checked="" type="checkbox"/>	<input type="checkbox"/>
11. Free turning	<input checked="" type="checkbox"/>	<input type="checkbox"/>	28. Blades condition	<input checked="" type="checkbox"/>	<input type="checkbox"/>
12. Linkage play	<input checked="" type="checkbox"/>	<input type="checkbox"/>	TIRES - FRONT	Lft	Rt
13. Power system	<input checked="" type="checkbox"/>	<input type="checkbox"/>	29. Tread depth	15/32 <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
EXHAUST SYSTEM	<input checked="" type="checkbox"/>	<input type="checkbox"/>	30. Matching	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
14. Leaks	<input checked="" type="checkbox"/>	<input type="checkbox"/>	31. Condition	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
15. Legal muffler	<input checked="" type="checkbox"/>	<input type="checkbox"/>	TIRES - REAR	Lft	Rt
16. Tailpipe	<input checked="" type="checkbox"/>	<input type="checkbox"/>	32. Tread depth	7/32 <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
			33. Matching	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
			34. Condition	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

Brief Comments - Refer to Item Number

SIGNATURE - Inspector

Date - Inspection

05/14/19

ORDINANCE OF THE COMMON COUNCIL

An ordinance amending sub-sub-subsection 1a, Land Use requirement of sub-subsection (y), Tourist Rooming House, of subsection (8) Accessory Lane Uses, of Section 98-206, Detailed Land Use descriptions and regulations of Chapter 98: Zoning Ordinance, of the City of Lake Geneva Zoning Ordinance to clarify where Tourist Rooming House may be located

Committee	N/A		
Fiscal Impact:	N/A		
File Number:	19-09	First Reading :	June 10, 2019
		Second Reading :	June 24, 2019

The Common Council of the City of Lake Geneva, Wisconsin, does hereby ordain as follows:

1. Sub-sub-subsection 1a, Land Use Requirement, of Sub-subsection (y) Tourist Rooming House, of Subsection (8) **Accessory Land Uses** of Section 98-206 Detailed Land Use Descriptions and Regulations of Chapter 98: Zoning Ordinance of the City of Lake Geneva Zoning Ordinance is amended to read as follows:

(y) Tourist Rooming House

Description: Includes all lodging places and tourist cabins and cottages, other than hotels and motels, in which sleeping accommodations are offered for pay to tourists and transients. It does not include private boarding houses or rooming houses not accommodating tourists or transients, or bed and breakfast establishments regulated under ACTP 73.

1. Permitted by Right: All zoning districts.
 - a. Land Use Requirement:

Tourist Rooming House shall only be located as an Accessory Land Use within ~~a Single Family Detached Dwelling Unit as defined in Section 18-55(a)~~ zoning districts that allow “residential dwellings” as that term is defined in Section 66.1014, Wis. Stats.

ORDINANCE OF THE COMMON COUNCIL

An ordinance amending Chapter 62, Streets, Sidewalks and other Public Places, Article III, Obstructions and Encroachments, Section 62-67, exceptions, by adding Subsection (9), Sidewalk Furnishings: Benches and Planters within Public Rights-Of-Way, allowing certain furnishings within the Public Right-Of-Way

Committee	Finance, Licensing, and Regulation Committee to consider on May 21, 2019		
Fiscal Impact:	N/A		
File Number:	19-08	First Reading :	May 28, 2019
		Second Reading :	June 10, 2019

The Common Council of the City of Lake Geneva, Wisconsin, does hereby ordain as follows:

1. That the Municipal Code of the City of Lake Geneva, Wisconsin is hereby amended by adding subsection (9), Sidewalk Furnishings: Benches and Planters within Public Rights-of-way, to Section 62-67, Exceptions, of ARTICLE III, OBSTRUCTIONS AND ENCROACHMENTS, of Chapter 62, STREETS, SIDEWALKS AND OTHER PUBLIC PLACES, which said subsection reads as follows:

Sec. 62-67 Exceptions.

[Code 1992, § 8.03(2)]

The prohibitions of Section 62-66 shall not apply to the following:

- (9) Sidewalk Furnishings: Benches, and Planters within Public Rights-of-Way
Sidewalk furnishings such as benches and plant containers may be placed within a public right-of-way with satisfaction and continuous compliance with the following requirements:
 - a. General Permitted Locations: The provisions of this sub-section are limited to rights-of-way adjacent to properties within the Neighborhood Office, Neighborhood Business, General Business, and Central Business Zoning Districts.
 - b. Specific Placement and Clear Path Requirements: Sidewalk furnishings such as benches and plant containers may be placed by an owner on a sidewalk within 32 inches of the owner’s building. In no instance shall the distance between the sidewalk furnishing and the edge of the sidewalk adjacent to the owner’s building be less than sixty inches (60”) (hereinafter defined as “clear path.”)
 - c. In those instances that a clear path of sixty inches cannot be provided because of a permanent obstruction the pedestrian passageway may be reduced to four feet (48 inches) for a distance not to exceed five feet upon review and approval of the City Public Works Director.
 - d. No sidewalk furnishings shall be allowed to be placed on the sidewalk right of way until the owner provides the City Clerk with evidence of public liability insurance naming the City

of Lake Geneva as an additional insured for any liability resulting from the placement of the sidewalk furnishing in the City sidewalk right of way. The owner hereby agrees to indemnify and hold the City harmless from any actions that may arise from the placement of sidewalk furnishing in the City sidewalk right-of-way pursuant to this ordinance. The minimum required insurance coverage shall be in an amount not less than \$1,000,000.00.

e. Signage and Colors are Restricted: No signage, logo, or text is permitted on any sidewalk furnishings except a 24 inch wide by 36 inch tall chalk sandwich board. Fluorescent “day glow” colors are not permitted on any sidewalk furnishings. Where colors constitute a component of a standardized corporate color theme or identity association with the abutting parcel, muted versions of such colors shall be used.

2. That this ordinance shall take effect upon passage and publication, as provided by law.

Adopted, passed, and approved by the Common Council of the City of Lake Geneva, Walworth County, Wisconsin, this 10th day of June, 2019.

Council Action: **Adopted** **Failed** **Vote** _____

Mayoral Action: **Accept** **Veto**

Thomas Hartz, Mayor

Date

Attest:

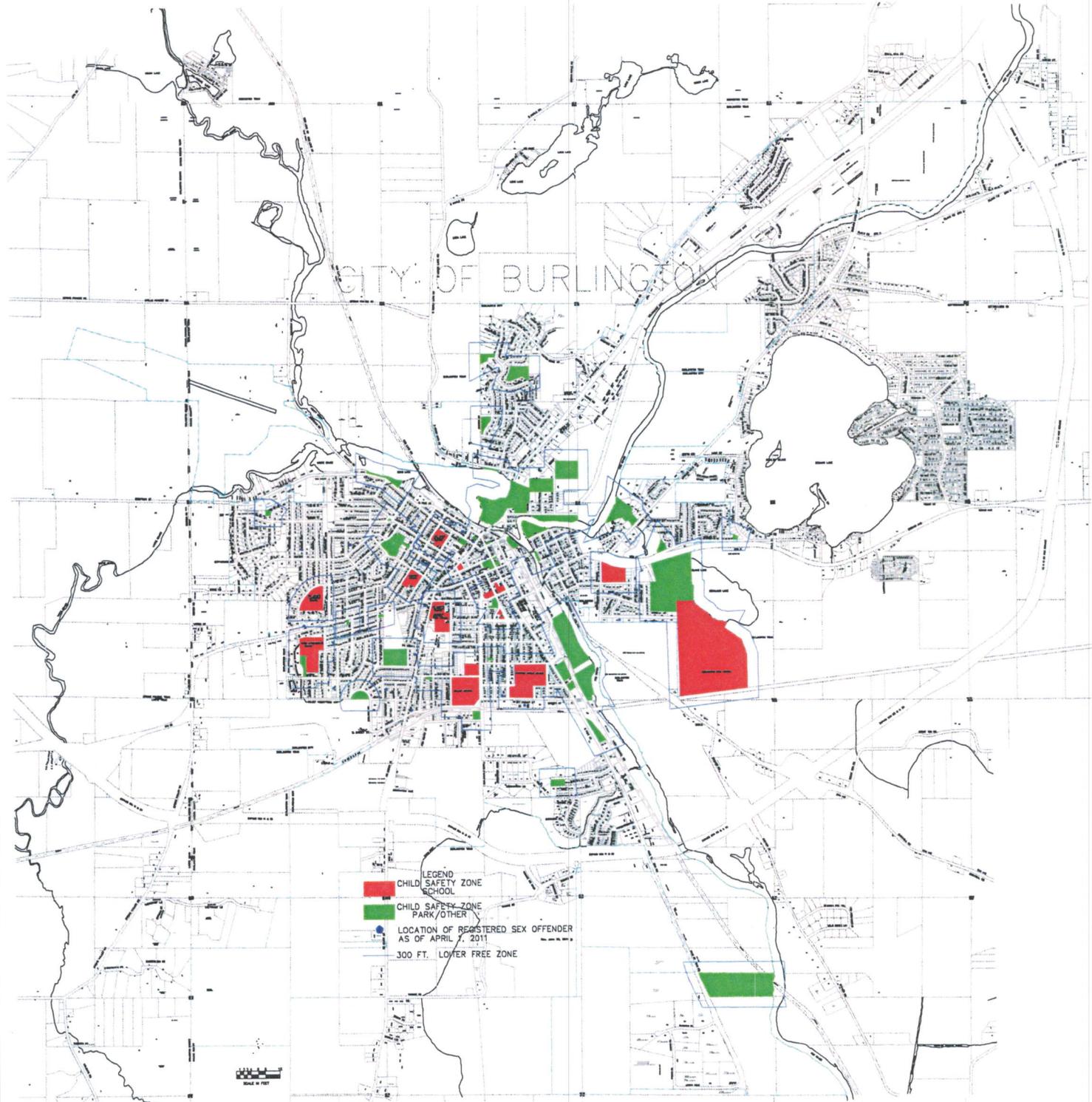
Lana Kropf, City Clerk

Date

CHILD SAFETY ZONES

Pewaukee	750 feet
Menomonee Falls	1,500 feet
Mequon	2,000 feet
Nashotah	2,000 feet
Racine	750 feet
Oconomowoc	1,000 feet
Spooner	1,000 feet
Chetek	200 feet
Brown Deer	1,500 feet
Sun Prairie	500 feet
Yorkville	1,000 feet
Cuba City	500 feet
Germantown	2,000 feet
Howard	2,500 feet
Delafield	2,000 feet
Mukwonago	1,500 feet
Fort Atkinson	1,500 feet
Union Grove	1,000 feet
Seymour & Outagamie Counties	1,500 feet
Bayside	2,000 feet
Berlin	300 feet
Elkhorn	2,000 feet
Bonduel	1,500 feet
Little Chute	2,000 feet
Wautoma	250 feet
Cudahy	500 feet
Minocqua	1,500 feet
Eagle River	2,000 feet
Thiensville	2,000 feet
West Milwaukee	1,000 feet
Ashwaubenon	1,500 feet
Raymond	2,000 feet
Kohler	1,500 feet
Brillion	750 feet
Sheboygan	1,000 feet
Waukesha	750 feet
City of Delavan	1,000 feet
Brookfield	1,500 feet
Waterford	750 feet

CITY OF BURLINGTON

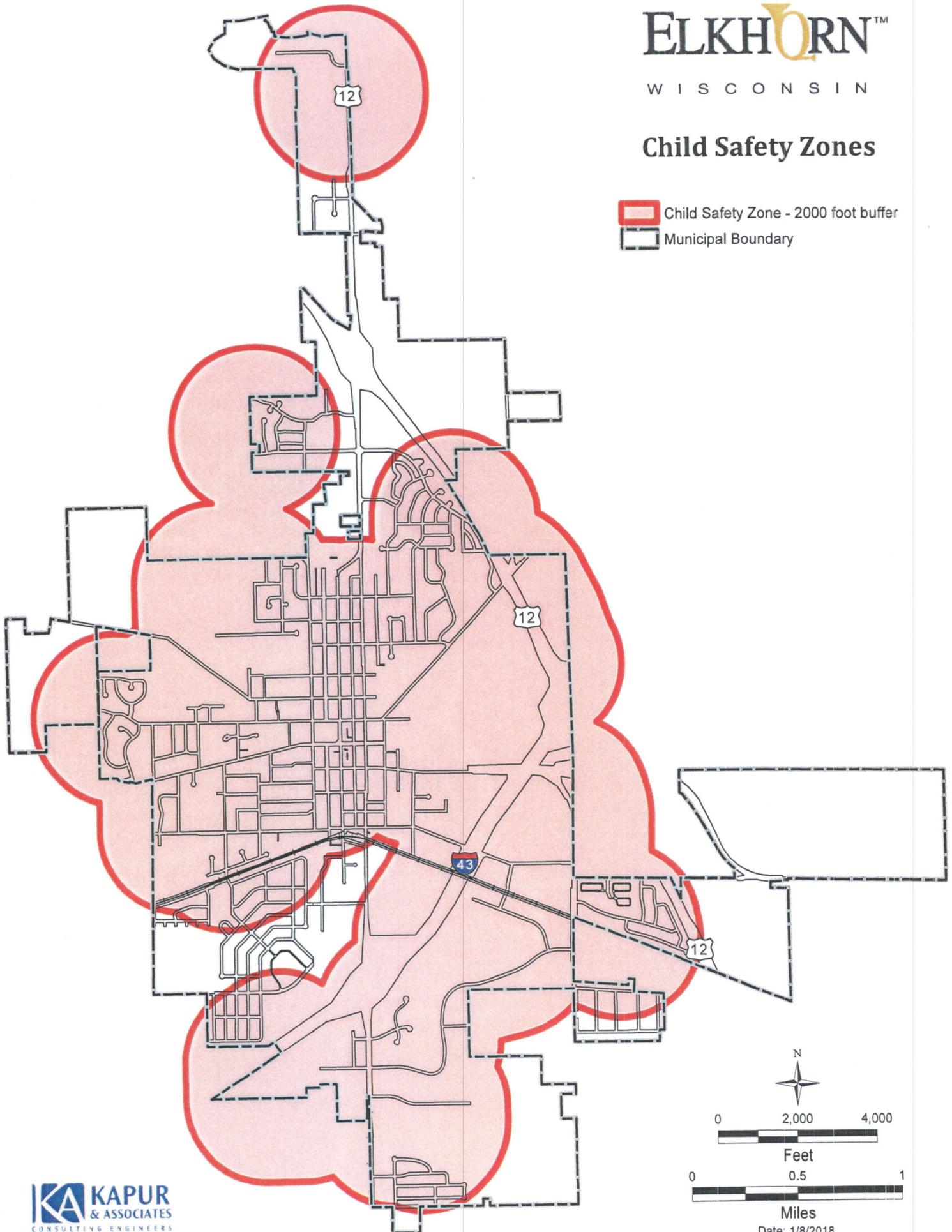


- LEGEND
- CHILD SAFETY ZONE SCHOOL
 - CHILD SAFETY ZONE PARK/OTHER
 - LOCATION OF REGISTERED SEX OFFENDER AS OF APRIL 7, 2011
 - 300 FT. LOWER FREE ZONE

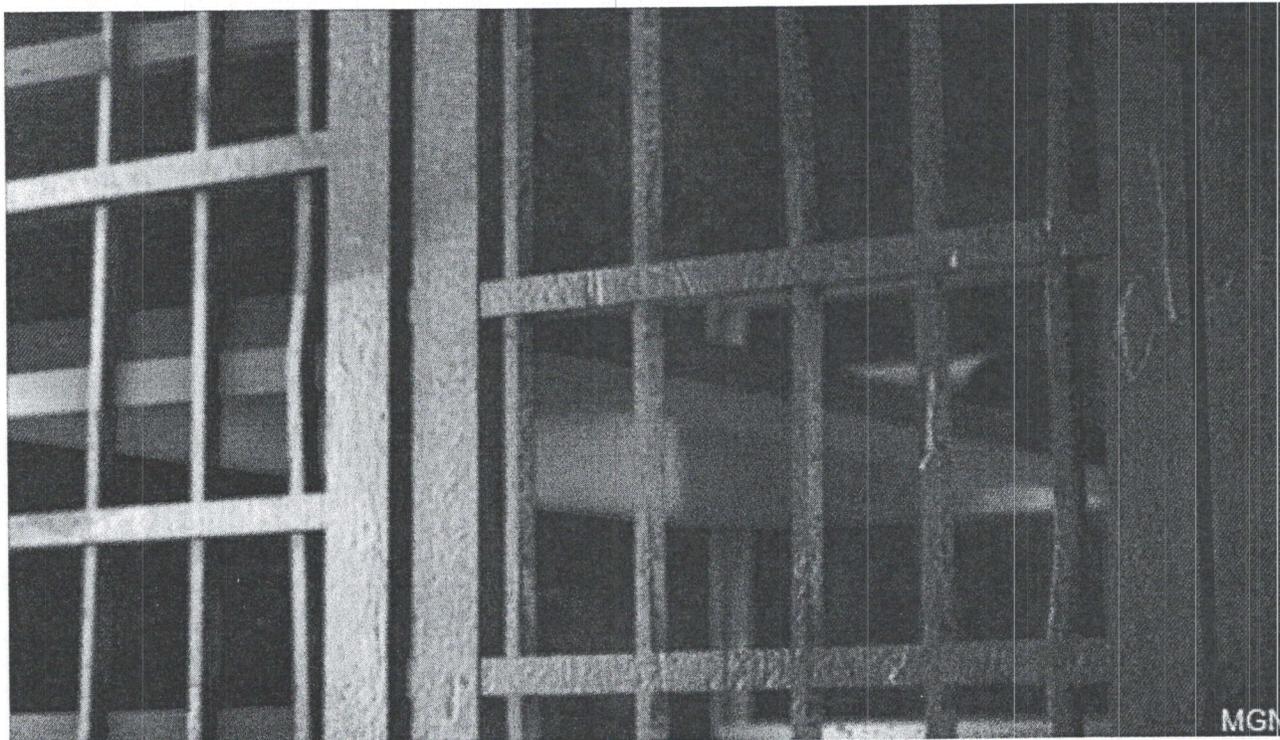
CHILD SAFETY ZONES

Child Safety Zones

-  Child Safety Zone - 2000 foot buffer
-  Municipal Boundary



Wisconsin cities amend sex offender residency rules



Posted: Sun 3:19 PM, Feb 03, 2019

MILWAUKEE (AP) - Dozens of Wisconsin municipalities have expanded the areas where convicted sex offenders are allowed to live after they're released from prison.

Wisconsin Public Radio reports that Milwaukee, Waukesha and most recently Brookfield are among the cities that changed their sex offender ordinance following a federal court case in Pleasant Prairie. A judge in 2017 determined that the village's ordinance barring sex offenders from living in 90 percent of the town violated the equal protection clause of the U.S. Constitution.

Deputy city attorney Adam Stephens says Milwaukee loosened its rules to give convicted sex offenders more options after the case.

Brookfield repealed and recreated its ordinance last month to allow sex offenders to live in 24 percent of the city.

City attorney Jenna Merten says the change will protect Brookfield from future lawsuits.

—

Information from: Wisconsin Public Radio, <http://www.wpr.org>

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JCPenney
SUMMER RIFFIC
Sale
40-50% OFF
50% OFF
50% OFF

Hover for Circula

PETSMART
for the love of pets
CANIDAE
premium nutrition
40-50% OFF
50% OFF
50% OFF

Hover for Circula

petco
FOR CLEAN NUTRITION
50% off
Free
COME GET

Hover for Circula

Powered by

Document: Hoffman v. Vill. of Pleasant Prairie, 249 F. Supp. 3d 951

Hoffman v. Vill. of Pleasant Prairie, 249 F. Supp. 3d 951

Copy Citation

United States District Court for the Eastern District of Wisconsin

April 17, 2017, Decided; April 17, 2017, Filed

Case No. 16-CV-697-JPS

Reporter

249 F. Supp. 3d 951 * | 2017 U.S. Dist. LEXIS 58269 ** | 2017 WL 1380560

FRANKLYN HOFFMAN, KENNETH DERKSON, JOHNNY WOOTEN, ERIC SANDERS, MICHAEL O'CONNELL, STEPHEN HART, WILLIAM JOHNSON, JAMES NORGAARD, and ALTON ANTRIM, Plaintiffs, v. VILLAGE OF PLEASANT PRAIRIE, Defendant.

Subsequent History: Dismissed by Hoffman v. Vill. of Pleasant Prairie, 2017 U.S. Dist. LEXIS 113090 (E.D. Wis., July 20, 2017)

Core Terms

Ordinance, Offenders, Designated, sex offender, residency, domiciled, banishment, recidivism, damages, summary judgment, restrictions, law law law, Facto, moot, chart, rationally, quotation, parties, Lived, equal protection claim, grandfather clause, ex post facto, non-punitive, punitive, factors, percent, rights, zone, individualized, registrants

Counsel: [**1] For Franklyn Hoffman, Franklyn Hoffman, Kenneth Dirkson, Johnny Wooten, Eric Sanders, Michael O'Connell, Stephen Hart, William Johnson, James Norgaard, Alton Antrim, Plaintiffs: Mark G Weinberg ▼, Law Office of Mark G Weinberg, Chicago, IL; Adele D Nicholas ▼,

Law Office of Adele D Nicholas ▼, Chicago, IL.

For Village of Pleasant Prairie, Defendant: Raymond V Anderson, LEAD ATTORNEY, Matteo Reginato, Remzy D Bitar ▼, Arenz Molter Macy Riffle & Larson SC, Waukesha, WI.

Judges: J.P. Stadtmueller ▼, United States District Judge.

Opinion by: J.P. Stadtmueller ▼

Opinion

[*953] ORDER

1. INTRODUCTION

On February 8, 2017, Plaintiffs Franklyn Hoffman ("Hoffman"), Kenneth Derkson ("Derkson"), [1](#) Johnny Wooten ("Wooten"), Eric Sanders ("Sanders"), Michael O'Connell ("O'Connell"), Stephen Hart ("Hart"), William Johnson ("Johnson"), James Norgaard ("Norgaard"), and Alton Antrim ("Antrim") filed a motion for summary judgment. (Docket #41). Defendant Village of Pleasant Prairie (the "Village") opposed the motion on March 2, 2017. Plaintiffs replied in support of their motion to March 15, 2017. For the reasons stated below, Plaintiffs' motion must be granted in part. [2](#)

2. STANDARD OF REVIEW

Federal Rule of Civil Procedure 56 provides the mechanism for seeking summary judgment. Rule 56 states that **[**2]** the "court shall grant summary judgment if the movant shows that there is no genuine dispute as to any material fact and the movant is entitled to judgment as a matter of law." Fed. R. Civ. P. 56(a); see *Boss v. Castro*, 816 F.3d 910, 916 (7th Cir. 2016). A "genuine" dispute of material fact is created when "the evidence is such that a reasonable **[*954]** jury could return a verdict for the nonmoving party." *Anderson v. Liberty Lobby, Inc.*, 477 U.S. 242, 248, 106 S. Ct. 2505, 91 L. Ed. 2d 202 (1986). The Court construes all facts and reasonable inferences in a light most favorable to the non-movant. *Bridge v. New Holland Logansport, Inc.*, 815 F.3d 356, 360 (7th Cir. 2016).

3. RELEVANT FACTS

The material facts are almost entirely undisputed. [3](#) On April 18, 2016, the Village passed an ordinance regulating residency for child sex offenders within its borders (the "Ordinance"). Plaintiffs initiated the instant suit on June 9, 2016, challenging its constitutionality. The Ordinance prohibited child sex offenders, called "designated offenders" (hereinafter "Designated Offenders"), from residing in the Village within 3,000 feet of a "prohibited location." "Prohibited locations" included "[a]ny school, licensed day-care center, park, trail, playground, place of

worship, athletic field used by Minors, or any other place designated by the Village as a place where Minors are known to congregate." (Docket #43-1 at 2). The Ordinance also prevented [**3] Designated Offenders from moving into the Village unless they were already domiciled in the Village at the time of their most recent offense. Designated Offenders were excluded from any potential violation of the Ordinance if they resided continuously in a home prior to and after its effective date. This provision was limited by a ban on renewing rental agreements with Designated Offenders which would extend for more than six months beyond the Ordinance's effective date.

The Ordinance further restricted where Designated Offenders could live with respect to each other; offenders were banned from residing within 500 feet of each other. The Ordinance applied to all Designated Offenders without any inquiry into the danger any individual offender posed to the community. It did, however, contain a grandfather clause. The grandfather clause allowed Designated Offenders to stay in their residence if a "prohibited location" was established near them after they took residence. It also permitted them to live with their close family members, provided those family members had resided in the otherwise prohibited area for at least two years.

The Court recognizes that this explanation is somewhat [**4] confusing when stated in prose. To better understand the effect of the Ordinance on various Designated Offenders, the Court has prepared the following chart:

[*955]

Nature of Offender	Restriction Imposed
1) Domiciled in the Village at time of most recent offense	None, as long as the offender's home complied with the distance-related restrictions
2) Lived in the Village when Ordinance was passed	
1) Not domiciled in the Village at time of most recent offense	Permanently banned from the Village
2) Not domiciled in Village when Ordinance was passed	
1) Not domiciled in the Village at time of most recent offense	Must leave the Village by October 18, 2016, and may never return
2) Lived in the Village when Ordinance was passed	
3) Rented property that did not comply with distance restrictions	
1) Not domiciled in the Village at time of most recent offense	May remain in that property, but may not move to another home in the Village. If the offender leaves their home for more than thirty days, they may never return.
2) Lived in the Village when Ordinance was passed	
3) Owned home or lived with family	

See (Docket #45 at 4-5).

In passing the Ordinance, the Village prepared a map showing its projected effect on Designated Offender residency. [**5] The map revealed that more than ninety percent of the Village would be off-limits to Designated Offenders under the Ordinance. The remaining ten percent was largely non-residential. Moreover, the interaction between the 3,000 foot prohibited zone and the rule against Designated Offenders living near one another further limited the possible dwelling places. Most of the Village's low-income housing, which is all that most of these plaintiffs could afford, was excluded.

When enacting the Ordinance, the Village did not obtain or consider any studies or data regarding the safety risk of allowing Designated Offenders to live near the various "prohibited locations" identified above, or near one another. In fact, the Village's administrator, Michael Pollocoff ("Pollocoff"), testified that turning child sex offenders into outcasts can create "more deleterious impacts." (Docket #45 at 6). The Village also had no evidence that Designated

Offenders domiciled outside the Village at the time of their last offense posed a greater safety risk than those who were. Pollocoff stated that the Ordinance's purpose and goal was to reduce the number of child sex offenders living in the Village.

[*956] All Plaintiffs [**6] but Norgaard,⁴ O'Connell,⁵ and Hoffman⁶ were not domiciled in the Village at the time of their offense, and rented their abodes, and so fell into the third category from the chart above.⁷ Each was told that, in light of the Ordinance's passage, they had to leave the Village by October 18, 2016. Plaintiffs were variously notified of their need to vacate by a letter from the Village's Chief of Police, by conversations with their probation officers, or by conversations with other Designated Offenders. Each Plaintiff has suffered stress as a result of the threat posed by the Ordinance, the difficulties in attempting to secure new housing, and fear of the consequences of homelessness.

The Ordinance was repealed, and a new one created in its place, on September 6, 2016 (the "Amended Ordinance"). The Amended Ordinance lowered the 3,000 foot prohibited zone to 1,500 feet. This would still cut Designated Offenders out of over sixty percent of the Village's land area and seventy-five percent of its residences. The restriction on Designated Offenders living near each other was removed entirely, as was the limit on renewing leases for Designated Offenders living in a prohibited zone. Finally, the Amended [**7] Ordinance stated that it did not apply to a Designated Offender whose latest conviction was ten or more years prior to them taking residence in the Village.

4. ANALYSIS

Plaintiffs' Second Amended Complaint advances three causes of action. Count One alleges that the Ordinance violates the Ex Post Facto Clause in Article I of the Constitution, because "it makes more burdensome the punishment imposed for offenses committed prior to enactment of the Ordinance and it applies retroactively[.]" (Docket #30 at 22). Plaintiffs seek an injunction against its enforcement and money damages on Count One. *Id.* at 23. Count Two states that the Ordinance also violates the Equal Protection Clause of the Fourteenth Amendment because it differentiates between Designated Offenders who were or were not domiciled in the Village at the time of their most recent offense, without a rational basis for doing so. *Id.* at 23-24. Plaintiffs also seek injunctive and monetary relief on Count Two. *Id.* at 24. Finally, Count Three seeks a declaratory judgment in favor of O'Connell on the issue of whether he had to leave the [*957] Village. *Id.* at 24-25; *see supra* note 5. Plaintiffs' instant motion requests judgment on Counts One and Two as to liability only.⁸ The Court addresses each claim in turn.

4.1 Ex Post Facto

Initially, the Village contends that Plaintiffs' ex post [**8] facto claim is mooted by its repeal of the Ordinance. This Court may only exercise its jurisdiction over live controversies. *Campbell-Ewald Co. v. Gomez*, 136 S. Ct. 663, 669, 193 L. Ed. 2d 571 (2016). This requirement applies not only at the start of the litigation, but throughout its entire pendency. *Id.* An action becomes moot, and must therefore be dismissed, when "an intervening circumstance deprives the plaintiff of a personal stake in the outcome of the lawsuit." *Id.* (quotation omitted). A court must take care not to paint over a lawsuit's claims with a broad brush, however. A case only becomes moot "when it is impossible for a court to grant any effectual relief whatever to the prevailing party. As long as the parties have a concrete interest, however small, in the outcome of the litigation, the case is not moot." *Id.* (citations and quotations omitted).

The Village contends that Plaintiffs' claims became moot on September 6, 2016, approximately three months after this action was filed. On that date, the original Ordinance they complained-of in the Second Amended Complaint was repealed and replaced with the Amended Ordinance, which either eliminated or limited the effect of the allegedly unlawful provisions. Plaintiffs concede that this renders moot [**9] their requests for injunctive relief. Enacting the Amended Ordinance does not, however, do anything to address Plaintiffs' requests for money damages.

Campbell-Ewald (as well as the Village's own citations) stands for the proposition that Plaintiffs' damages claim, and thus the ex post facto claim as a whole, remains a live controversy. *Fed'n of Adver. Indus. Reprs., Inc. v. City of Chicago*, 326 F.3d 924, 929 (7th Cir. 2003) ("[A] defendant's change in conduct cannot render a case moot so long as the plaintiff makes a claim for damages."). The Village's mootness argument is without merit.

The Village next asserts that the Ordinance did not actually violate the Ex Post Facto Clause because it did not impose a punishment on Plaintiffs. The Clause prohibits retroactive punishment by the government, and as applied here, it restricts how far a governmental entity can go in limiting the rights of sex offenders. *Smith v. Doe*, 538 U.S. 84, 92, 123 S. Ct. 1140, 155 L. Ed. 2d 164 (2003). The *Smith* court began its ex post facto analysis with two questions. First, did the government, in enacting the restriction, intend to "establish civil proceedings," or impose punishment? *Id.* (internal quotation marks omitted). If the government intended to punish, the law violates the Ex Post Facto Clause and the inquiry ends there. *Id.* The Ordinance's stated purpose is "not to impose a criminal penalty" but to instead protect [**10] the health and welfare of the Village's [*958] citizens. (Docket #43-1 at 1). The Court must defer to that statement of intent. *Smith*, 538 U.S. at 92-93 ("[C]onsiderable deference must be accorded to the intent as the legislature has stated it.").

Nevertheless, even if a law purports to be civil in nature, the Court "must further determine whether the statutory scheme is "so punitive either in purpose or effect as to negate [the Village's] intention to deem it civil." *Id.* at 92 (quotations omitted). The Supreme Court requires "the clearest proof" to override the government's stated intention. *Id.* To assess the punitive nature of a restriction, courts analyze five factors:

- (1) Does the law inflict what has been regarded in our history and traditions as punishment?
- (2) Does it impose an affirmative disability or restraint?
- (3) Does it promote the traditional aims of punishment?
- (4) Does it have a rational connection to a non-punitive purpose?
- (5) Is it excessive with respect to this purpose?

Does #1-5 v. Snyder, 834 F.3d 696, 701 (6th Cir. 2016) (citing *Smith*, 538 U.S. at 97).

The Village's argument on this point is brief, conclusory, and fails to meaningfully address any of these factors. It instead gestures at a few cases which it contends have ruled in its favor on this issue, and asks the Court to evaluate [**11] and follow those decisions. The Village is mistaken on the law and the Court's duties. The most relevant decisions from across the nation reveal that the Ordinance is nigh unprecedented in its punitive effect. The Court will not distinguish those opinions where the Village has made no effort to do so itself.

As to the first factor, the Ordinance banished Plaintiffs from the Village. Banishment is a traditional form of punishment, and historically "involved the complete expulsion of an offender from a socio-political community." *Shaw v. Patton*, 823 F.3d 556, 566 (10th Cir. 2016). Unlike many other laws restricting sex offender residency, the Ordinance did not simply limit where such people could live. The Ordinance prevented any sex offenders from moving into the Village and, more importantly, required all sex offenders in leaseholds to leave within six months after its passage. This is, in the Court's view, nothing short of affirmative banishment. *Id.* at 567-68 (residency provision did not resemble historical banishment because it only limited sex offender residency, but did not expel them entirely); *Doe v. Miller*, 405 F.3d 700, 719 (8th Cir. 2005) (same). Not all Plaintiffs are in the same position on this issue, however. Norgaard, O'Connell, and Hoffman were not (properly) subject to the banishment [**12] provision of the Ordinance. However, as discussed below, this difference does not change the outcome on this claim.

Even had it tried, the Village could not reasonably contest the second factor. The Ordinance imposed severe restraints on Designated Offenders, limiting their residence to ten percent of the Village's land area, an area which is itself largely non-residential. See *Doe v. Miami-Dade County, Fla.*, 846 F.3d 1180, 1185 (11th Cir. 2017) (this inquiry focuses on the "how the effects of the [Ordinance] are felt by those subject to it," and these offenders alleged homelessness as a result of the county's residency ordinance) (quoting *Smith*, 538 U.S. at 99-100). The third factor is likewise present, though it is of limited importance because punishment

goals often overlap legitimate civil regulatory goals. *Snyder*, 834 F.3d at 704. Still, the Ordinance advances the traditional [*959] punishment aims of incapacitation, in keeping Designated Offenders segregated to tiny zones of the community; retribution, by imposing its restrictions based solely on Plaintiffs' prior offense conduct; and deterrence, in attempting to keep Designated Offenders away from children to deter recidivism. *Id.* The fourth and fifth factors are usually considered together, for the less rational a restriction's connection to its [*13] stated purpose, the more excessive it will be in addressing that purpose. See *Smith*, 538 U.S. at 104-05; *Snyder*, 834 F.3d at 704-05; *Miller*, 405 F.3d at 721-723. This is the most important consideration in the ex post facto analysis. *Smith*, 538 U.S. at 102. Further, "to avoid a[n] [excessive] punitive effect, a statute imposing a particularly harsh disability or restraint must allow an individualized assessment. An individualized assessment helps to ensure that a statute's particularly harsh disability or restraint is rationally related to a non-punitive purpose." *Shaw*, 823 F.3d at 575; *Weems v. Little Rock Police Dep't*, 453 F.3d 1010, 1017 (8th Cir. 2006) ("Unlike the Iowa law [at issue in *Miller*], the Arkansas statutory plan calls for a particularized risk assessment of sex offenders, which increases the likelihood that the residency restriction is not excessive in relation to the rational purpose of minimizing the risk of sex crimes against minors.").

Decisions from other circuits provide a useful contrast to the Ordinance. In *Miller*, expert testimony was received on the effect of a 2,000-foot residency restriction on sex offender recidivism. *Miller*, 405 F.3d at 722-23. While this testimony was not definitive as to the propriety of that distance as compared to any others, the Eighth Circuit held that it supplied a sufficient rational basis connected to the legislature's non-punitive purpose. *Id.* [*14] In *Miami-Dade*, the subject ordinance established a 2,500-foot exclusion zone for schools, with exceptions when "(1) [t]he sexual offender or sexual predator established a residence prior to the effective date of th[e] [O]rdinance; (2) [t]he sexual offender or sexual predator was a minor when he or she committed the sexual offense and was not convicted as an adult; and (3) [t]he school was opened after the sexual offender or sexual predator established the residence." *Miami-Dade*, 846 F.3d at 1183 (internal quotation marks omitted). The *Miami-Dade* plaintiffs alleged that this ordinance violated the Ex Post Facto Clause because it did not include an individualized risk assessment, it applied to an offender for life, and was passed without any evidence connecting the restriction to an improvement on safety or recidivism concerns. *Id.* at 1185-86. The Eleventh Circuit found that these assertions stated an ex post facto cause of action. *Id.* Finally, *Duarte* highlights the importance of an efficacious grandfather clause, which in that case allowed offenders to stay in their current homes after the subject ordinance was passed. *Duarte v. City of Lewisville*, 136 F. Supp. 3d 752, 781-82 (E.D. Tex. 2015). The *Duarte* ordinance also contained "multiple affirmative defenses that, if argued and proven, exempt the child sex offender from the residency restrictions." *Id.* at 782. [9](#)

[*960] The Ordinance goes further than any these examples. The Ordinance bans Designated Offenders from the Village without any individualized inquiry into their risk to the community. In a similar vein, it did not offer any method for a Designated Offender to obtain an exemption, even in limited circumstances. Like the *Miami-Dade* ordinance, the Ordinance's banishment applies to Designated Offenders for life. Unlike *Duarte*, the Ordinance's grandfather clause was of limited help to Plaintiffs, because for most of them, it only permitted them to remain until October 2016. Most importantly, the Village has admitted that the Ordinance was based on its own conjecture about the dangers posed by sex offenders. No data or studies on the matter were considered in passing the Ordinance.

The lack of evidence eliminates the possibility that the Village's action was rational. In *Snyder*, the Sixth Circuit faced a comprehensive sex offender registration and residency statute. *Snyder*, 834 F.3d at 697-98. The court found that the statute was not rationally related to the purpose of reduced sex [*15] offender recidivism and public safety. *Id.* at 704-05. Though the Supreme Court in *Smith* stated that recidivism rates among sex offenders are "frightening and high," the *Snyder* court found that support for the proposition was lacking in empirical studies. *Id.* at 704. It specifically noted that "nothing . . . in the record suggests that the residential restrictions have any beneficial effect on recidivism rates." *Id.* at 705. *Snyder* found no evidence that "the difficulties the statute imposes on registrants are counterbalanced by any positive effects. Indeed, Michigan has never analyzed recidivism rates despite having the data to do so." *Id.*

The Village fell into the same trap as the Michigan legislature. The Village could have sought objective evidence to support the Ordinance's severe restrictions but chose not to. [10](#) Plaintiffs were required to come forward with "the clearest proof" that the Ordinance was

intended as punishment. *Smith*, 538 U.S. at 92. If the Village had even a sliver of factual material to support the stated goals of the Ordinance, the outcome of this claim would likely be different. As it stands, however, the Court has no choice but to find that the restrictions imposed by the Ordinance are not rationally connected to its [**16] purposes.

[*961] The Court concludes that, in balancing the *Smith* factors, Plaintiffs have produced sufficient proof that the Ordinance's stated non-punitive purpose is overborne by its punitive effects. The Ordinance therefore violated the Ex Post Facto Clause and Plaintiffs are entitled to summary judgment on that claim. This result is clearly true for the plaintiffs who were subject to banishment under the Ordinance, namely Derkson, Wooten, Sanders, Hart, Johnson, and Antrim. The Ordinance would not have necessarily banished Hoffman, O'Connell, and Norgaard, for various reasons. See *supra* notes 3-5. As to those three, the lack of banishment makes this case much closer to the others cited above, where the law in question withstood Ex Post Facto Clause review. The Court has not differentiated between these sets of plaintiffs, [**17] however, because the Village has not argued that it should. The Court will not craft appropriate arguments for a litigant and, particularly in the case of represented parties, will assume that the omission of apparently relevant argument was a strategic choice rather than mere oversight. *John v. Barron*, 897 F.2d 1387, 1393 (7th Cir. 1990) ("This court is not obligated to research and construct legal arguments open to parties, especially when they are represented by counsel as in this case."); *Gold v. Wolpert*, 876 F.2d 1327, 1333 (7th Cir. 1989).

4.2 Equal Protection

The Village first argues that Plaintiffs lack standing to pursue an equal protection claim. The standing doctrine requires that a party must actually have an interest in a case to invoke federal jurisdiction. *Lujan v. Defenders of Wildlife*, 504 U.S. 555, 560, 112 S. Ct. 2130, 119 L. Ed. 2d 351 (1992). Though there are many nuances to standing, its application here is relatively simple. As raised by the Village, the standing doctrine requires that Plaintiffs must have suffered a concrete injury and favorable decision in the case must offer redress for their injury. *Id.* at 560-61. The Village argues that Plaintiffs were grandfathered into the Amended Ordinance, and with the repeal of the original Ordinance, they now lack standing to maintain an equal protection claim.

The Village's argument misses the mark in two respects. First, [**18] as with the mootness issue, the Village focuses on the ameliorative effect of the Amended Ordinance. This is not the relevant inquiry. Plaintiffs have standing to remedy a past wrong, namely the constitutionally violative original Ordinance, regardless of whether they are suffering an injury today. Second, even when one's focus is properly directed to the original Ordinance, Plaintiffs were not grandfathered in as the Village suggests. As discussed above, most of the plaintiffs were subject to banishment within six months of the Ordinance's passage. Plaintiffs further argue that O'Connell and Hoffman suffered stress because they knew they would have to leave the Village if they ever left their current homes. As before, the Village does not differentiate between each set of plaintiffs. The Court finds, then, that all Plaintiffs but Norgaard have standing because they suffered injury by way of the Ordinance. Norgaard is different because Plaintiffs do not attempt to argue that he suffered a violation of his equal protection rights. (Docket #48 at 4-5). The Court must, therefore, deny summary judgment to him on this claim.

The Village next attacks the substance of Plaintiffs' equal protection [**19] claim. The Fourteenth Amendment's Equal Protection Clause "commands that no State shall deny to any person within its jurisdiction the equal protection of the laws, which is essentially a direction that all persons similarly situated should be [*962] treated alike." *City of Cleburne, Tex. v. Cleburne Living Ctr.*, 473 U.S. 432, 439, 105 S. Ct. 3249, 87 L. Ed. 2d 313 (1985) (quotation omitted). Usually, laws pass muster under the Equal Protection Clause "if the classification drawn by the statute is rationally related to a legitimate state interest." *Id.* at 440. However, when a statute burdens a person's fundamental constitutional rights, courts apply a higher level of scrutiny. See *Atty. Gen. of N.Y. v. Soto-Lopez*, 476 U.S. 898, 904, 106 S. Ct. 2317, 90 L. Ed. 2d 899 (1986).

The parties dispute whether Plaintiffs are members of a protected class, such that the Court would need to give increased scrutiny to the Ordinance. The Court need not wade into that fray, as the Ordinance fails to pass even the lesser threshold of rationality. To prove an equal

protection claim under rational basis review, Plaintiffs must show: "(1) the [Village] intentionally treated [them] differently from others similarly situated, (2) the [Village] intentionally treated [them] differently because of [their] membership in the class to which [they] belonged, and (3) the difference in treatment was not rationally related to a legitimate state interest." *Smith v. City of Chicago*, 457 F.3d 643, 650-51 (7th Cir. 2006). "Under this lenient standard," the Seventh [**20] Circuit instructs, a law "must be upheld if [the Court] can reasonably conceive of any justification for it." *Shaw v. Smith*, 206 F. App'x 546, 548 (7th Cir. 2006).

Plaintiffs contend that the Ordinance violates their equal protection rights because it treats certain Designated Offenders differently from others without reason. Those in the first chart category, who were domiciled in the Village at the time of their last offense, were allowed to remain in the Village. Those in the other three chart categories, who were not so domiciled, were variously blocked from moving into the Village, compelled to leave in a short time frame, or forced to remain in their current home forever if they wished to stay in the Village. The Village has admitted that it has no evidence that the difference between these groups—domicile at the time of their last offense—has any bearing on their safety risk to the community.

The Village makes no attempt to address this claim. Instead, it appears to believe that Plaintiffs advance an equal protection claim based on their status as sex offenders versus non-sex offenders. The Village states its position as follows: "The Village of Pleasant Prairie certainly has a rational basis for protecting children against the [**21] risks of recidivism of convicted sex offenders." (Docket #46 at 12). This is not the relevant question, and because of its misunderstanding of Plaintiffs' claim, the Village offers almost no relevant argument in opposition to the actual claim presented. Even so, the Court must uphold a law if it "can reasonably conceive of any justification for it." *Shaw*, 206 F. App'x at 548. Thus, the Court would likely be compelled to find the Ordinance constitutional if the Village had offered any evidence providing such a justification, even as late as its briefing on the instant motion. It did not, and this failure leaves the Court no choice but to conclude that the Ordinance violated Plaintiffs' equal protection rights in making an irrational domicile-based distinction between Designated Offenders. This comports with the purpose of the Equal Protection Clause. The "bare . . . desire to harm a politically unpopular group cannot constitute a legitimate governmental interest." *U.S. Dep't of Agric. v. Moreno*, 413 U.S. 528, 534, 93 S. Ct. 2821, 37 L. Ed. 2d 782 (1973). In light of Pollocoff's comments, and the lack of evidence supporting the Ordinance's restrictions, it appears this is precisely what motivated the Village's action.

[*963] 5. CONCLUSION

In light of the foregoing, the Court grant Plaintiffs' request for summary judgment as to [**22] the liability elements of Counts One and Two of their Second Amended Complaint, for all of the plaintiffs save Norgaard. Norgaard is entitled to summary judgment on Count One but not Count Two. Plaintiffs' damages on those counts will be determined by the jury. The Court treats Plaintiffs' claims for injunctive relief as abandoned. This matter remains set for a pretrial conference on May 9, 2017, and a jury trial beginning on May 15, 2017.

Accordingly,

IT IS ORDERED that Plaintiffs' motion for summary judgment (Docket #41) be and the same is hereby **GRANTED in part** and **DENIED in part** in accordance with the terms of this Order; and

IT IS FURTHER ORDERED that Plaintiffs' motion to file an oversized brief (Docket #44) be and the same is hereby **GRANTED**.

Dated at Milwaukee, Wisconsin, this 17th day of April, 2017.

BY THE COURT:

/s/ J.P. Stadtmueller ▼

J.P. Stadtmueller ▼

U.S. District Judge

Footnotes**1**

Plaintiffs spell the name "Dirkson" in their Second Amended Complaint, (Docket #30 at 1, 9-11), and "Derkson" in their summary judgment materials, (Docket #42 at 13-15). The Court will use "Derkson," the name he signed to his affidavit, (Docket #43-8 at 3), and amend the case caption accordingly.

2

Plaintiffs also requested leave to file an oversized brief. (Docket #44). Though much of the excess of the brief was ultimately unnecessary, the Court will nevertheless grant the request.

3

The facts discussed below are drawn from the parties' respective factual briefs and responses thereto unless otherwise noted. (Docket #45 and #49). The Court further notes that the Village raises a number of "disputes" in its response to Plaintiffs' statement of facts. *See, e.g.*, (Docket #45 at 8). The "disputes" are inappropriate because they cite no evidence, and are generally pure legal argument, which is reserved for the parties' legal memoranda, not factual briefing. The Court has ignored those attempted "disputes."

4

Norgaard is the manager of the King's Motel, where a number of other designated offenders also live. He did not fear the Ordinance because he was domiciled in the Village at the time he committed his last offense, and the other offenders in the Motel would be moving away, eliminating any conflict with the 500-foot restriction. Norgaard thus fell into the first chart category.

5

O'Connell lived at a home owned entirely by his girlfriend and did not pay rent. He was thus exempt, per the fourth chart category, from having to move out of the Village, so long as he did not leave the home. He was nonetheless told that he had to leave the Village. The misunderstanding was corrected during the course of this litigation, specifically by a letter sent to O'Connell on August 4, 2016.

6

Hoffman lived with his mother rent-free, and so fell into the fourth chart category. When his mother decided to sell her home and move to senior housing, Hoffman knew the Ordinance would prevent him from staying in the Village.

7

This fact is undisputed as to Hoffman, Sanders, Antrim, and Wooten. It is not explicitly stated as to Derkson or Johnson, but the other facts related to those plaintiffs suggest that they to are covered by the third chart category. In any event, it is undisputed that Derkson and Johnson were told that they were subject to the Ordinance and would have to leave the Village.

8

Plaintiffs' opening brief discusses their entitlement to compensatory damages for the stress and fear they suffered while the Ordinance remained in force. Confusingly, the brief does not explain why Plaintiffs did so; did Plaintiffs want the Court to award damages at the summary judgment stage? The Village believed so, and responded that Plaintiffs' evidence does not adequately support their claim for damages at this stage. Plaintiffs' reply clarifies that they do not seek an award of damages now, but wish to have their damages evaluated by the jury at trial. With that clarification, the propriety of Plaintiffs' damages becomes a non-issue. Plaintiffs could have prevented confusion for all involved by appropriately titling their motion as one for partial summary judgment.

9

The Village cites two Wisconsin appellate court opinions upholding sex offender residency restrictions. Neither case has much persuasive value. *Menomonee Falls v. Ferguson* decided whether an offender was protected by an ordinance's grandfather clause, and said nothing of the constitutionality of the ordinance. See generally 2011 WI App 73, 334 Wis. 2d 131, 799 N.W.2d 473 (Wis. Ct. App. 2011). *City of South Milwaukee v. Kester* actually addressed the ex post facto issue. 2013 WI App 50, 347 Wis. 2d 334, 830 N.W.2d 710 (Wis. Ct. App. 2013). *Kester* found that the ordinance passed muster under the Ex Post Facto Clause because it did not banish the plaintiff sex offender and, even without an individual risk assessment, the city was entitled to make a reasonable categorical judgment that all sex offenders are dangerous to the community. *Id.* at 719-21. *Kester* is unpersuasive for two reasons. First, the Ordinance is different from *Kester's* ordinance because it includes an expulsion provision. Second, in line with the above-cited federal precedent, this Court disagrees with *Kester* to the extent that a broad, evidence-free assumption about sex offenders (*Kester* mentions no data or studies on the dangerousness of such persons in the community) is sufficient to make a regulation non-punitive.

10

In fact, the Village apparently had evidence that the Ordinance could be counterproductive. Pollocoff stated that the Ordinance could have a negative effect on sex offender recidivism and community safety by making them outcasts. *Snyder* discussed the same issue:

In fact, one statistical analysis in the record concluded that laws such as SORA actually *increase* the risk of recidivism, probably because they exacerbate risk factors for recidivism by making it hard for registrants to get and keep a job, find housing, and reintegrate into their communities.

See [J.J. Prescott & Jonah E. Rockoff, *Do Sex offender Registration and Notification Laws Affect Criminal Behavior?*, 54 J.L. & Econ. 161 (2011)].
Snyder, 834 F.3d at 704-05 (emphasis in original).

Content Type: Cases

Terms: Hoffman v. Vill. of Pleasant Prairie, 249 F. Supp. 3d 951

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Resolution 19-R44

The Common Council of the City of Lake Geneva hereby establishes the following Pay Scale Grades and Pay Scale for the following Full-time Non-Represented Employees for the 2019 Budget Year effective January 1, 2019:

Position	Assigned Pay Scale Grade	Grade Salary Range		
		Min	Mid	Max
Full Time Salaried Staff:				
City Administrator	23	96,575.06	111,061.32	125,547.57
Police Chief	19	76,496.49	87,970.96	99,445.44
Finance Director (Comptroller)	18	72,166.50	82,991.48	93,816.45
Director of Public Works	18	72,166.50	82,991.48	93,816.45
Police Administrative Lieutenant	17	68,081.60	78,293.85	88,506.09
Police Patrol Lieutenant	16	64,227.93	73,862.12	83,496.31
Building & Zoning Administrator	15	60,592.39	69,681.24	78,770.10
Police Sergeant*	14	57,162.63	65,737.02	74,311.42
City Clerk	13	53,927.01	62,016.06	70,105.11
Parking Manager	12	50,874.54	58,505.72	66,136.90
PD Communications Supervisor*	10	45,278.16	52,069.88	58,861.60
PD Data Systems Administrator*	7	38,016.41	43,718.87	49,421.34
PD Confidential Administrative Assistant*	7	38,016.41	43,718.87	49,421.34
Telecommunicators*	6	35,864.54	41,244.22	46,623.90
Data Specialist*	6	35,864.54	41,244.22	46,623.90
Full time Hourly Staff:				
DPW Superintendent	14	27.4820	31.6043	35.7266
Lead Financial Analyst/Treasurer	11	23.0744	26.5356	29.9968
Human Resources/Benefits Specialist	11	23.0744	26.5356	29.9968
DPW Arborist/Lead	11	23.0744	26.5356	29.9968
DPW Lead Operator	10	21.7683	25.0336	28.2988
Assistant City Clerk	9	20.5362	23.6166	26.6970
Cemetery Sexton	8	19.3737	22.2798	25.1859
Heavy Equipment Operators	8	19.3737	22.2798	25.1859
Equipment Operators	7	18.2771	21.0187	23.7603
Cemetery Equipment Operator	7	18.2771	21.0187	23.7603
Riviera Maintenance Engineer	7	18.2771	21.0187	23.7603
Building & Grounds Administrator	7	18.2771	21.0187	23.7603
Municipal Court Clerk	7	18.2771	21.0187	23.7603
Front Desk Counter Clerk	7	18.2771	21.0187	23.7603
Building & Zoning Adm. Asst.	7	18.2771	21.0187	23.7603
Parking Clerk	7	18.2771	21.0187	23.7603
Cemetery Laborer / Operator	6	17.2426	19.8290	22.4153
DPW Laborer / Operator	6	17.2426	19.8290	22.4153
Custodian	5	16.2666	18.7066	21.1465
Permanent Part-time Staff:				

Pay Scale 21 to 23

Corrected Pay Grade 8

Notes:

* Salaried Employees that receive Overtime.

Resolution 19-RXX

The Common Council of the City of Lake Geneva hereby establishes the following Pay Scale Grades and Pay Scale for the following Part-time Non-Represented Employees for the 2019 Budget Year effective January 1, 2019:

Position	% Pro Rated	Assigned Pay Scale Grade	Grade Salary Range		
			Min	Mid	Max
Permanent Part Time Salaried Staff:					
City Attorney *	60%	22	54,665.13	62,864.90	71,064.67
City Judge *	15%	20	12,162.94	13,987.38	15,811.82
Fire Chief	50%	17	34,040.80	39,146.92	44,253.04
Deputy Fire Chief	8%	12	4,069.96	4,680.46	5,290.95
Assistant Fire Chief	5%	10	2,263.91	2,603.49	2,943.08
Emergency Mgmt Deputy Director	30%	10	13,583.45	15,620.96	17,658.48
Permanent Part Time Hourly Staff:					
PD Part time Patrol Officer		9	20.5362	23.6166	26.6970
Financial Analyst		9	20.5362	23.6166	26.6970
Harbormaster		7	18.2771	21.0187	23.7603
Assisstant Building Inspector/Code Enforcement		7	18.2771	21.0187	23.7603
City Hall Counter Clerk		7	18.2771	21.0187	23.7603
Part-time Telecommunicator		6	17.2426	19.8290	22.4153
Lead Booking Officer		4	15.3458	17.6477	19.9496
FD Confidential Administrative Assistant		4	15.3458	17.6477	19.9496
Assistant Court Clerk		4	15.3458	17.6477	19.9496
PD Booking Officer		3	14.4772	16.6488	18.8203
Parking Maintenance Lead		2	13.6577	15.7064	17.7550
Parking Enforcement		1	12.8846	14.8173	16.7500
Videographer		1	12.8846	14.8173	16.7500
Chief Inspector poll workers per hour		0.4	9.0832	10.4456	11.8081
Poll Workers per hour		0.2	8.0840	9.2966	10.5092
Seasonal Part-time Hourly Staff:					
Beach Supervisor		1	12.8846	14.8173	16.7500
Street Seasonal Lead		1	12.8846	14.8173	16.7500
Asst Beach Supervisor		0.9	12.1553	13.9786	15.8019
Street Seasonal		0.9	12.1553	13.9786	15.8019
Boat Launch Attendants		0.8	11.4673	13.1874	14.9075
Riviera Security Guards		0.8	11.4673	13.1874	14.9075
Beach Attendants		0.5	9.6282	11.0724	12.5166
Crossing Guards		0.5	9.6282	11.0724	12.5166

 THOMAS HARTZ, Mayor

 LANA KROPF, City Clerk



CITY OF LAKE GENEVA PERSONNEL POLICY

COMPENSATION POLICY

Adopted by Common Council	7/11/2016
Amended by Common Council	11/14/2016 2/13/2017 <u>6/10/2019</u>

I. PURPOSE

The City recognizes that employees play a significant role in the provision of services in the community. The City strives to recruit and retain high quality employees to provide public services. It is the policy of the City to provide fair and competitive pay and benefits to its employees. Compensation, inclusive of all pay and benefits, shall be established and adjusted periodically to ensure the city's ability to recruit, motivate and retain quality employees. The City's pay plan shall be based on the principles of job content and responsibility, with compensation based on merit and local market conditions.

II. DEPARTMENT RESPONSIBLE

The City Administrator will ensure that this policy is enforced.

III. COMMITTEE OVERSIGHT

The Personnel Committee and Common Council will oversee this policy.

IV. OBJECTIVES

- Provide fair and equitable rates of pay to employees with respect to comparable municipal employers.
- Maintain an equitable compensation relationship among the various positions within the City.
- Provide a rational, consistent, and objective method to establish and maintain a wage/salary structure that includes a market rate, with a minimum and maximum wage rate, for each position.

- Ensures pay rates and employee progression through the pay range are based on individual performance that meets or exceeds expectations and reflects changing economic conditions.
- Establishes and maintains a market position which is fiscally responsible with public resources.
- Establishes pay rates that allow the City to successfully compete for, recruit and retain qualified employees

V. POSITION CLASSIFICATION PLAN

The City of Lake Geneva utilizes an objective classification system to rate job positions. The basis of the system is a written job description and job evaluation points for each position. The City Administrator is responsible for the administration and maintenance of the Classification Plan with job classification changes approved by the Personnel Committee and City Council.

The job description includes essential duties; education; experience; training; licensure; certification(s); level of knowledge; and skills and abilities required to perform essential duties of the position.

Job evaluation points are assigned to each position. Job descriptions are the basis for the assignment of job evaluation points. The job evaluation point totals are used to assign a position to a pay range.

VI. PAY RATE ADJUSTMENTS

The City Administrator shall be responsible for implementing all salary adjustments. Employees shall be advised of all salary changes. Salary adjustments may occur as result of the following:

- **Cost-of-Living Adjustment to Pay Scale:** The Common Council may grant a cost-of-living adjustment each fiscal year based on the recommendation of the City Administrator and budgetary constraints. Cost of living increases shall be applied uniformly to each pay range in the Pay Scale.
- **Performance-Based Increase:** Performance-based increases may be awarded in conjunction with the City's Performance Evaluation Program. The Performance Evaluation Program shall include the following performance levels:
 - Excellent (E)
 - Very Good (VG)

- Satisfactory (S)
- Needs Improvement (NI)

Employees who receive a performance rating below “satisfactory” shall be placed on a performance improvement plan and shall be ineligible for a performance-based wage increase.

VII. PERFORMANCE EVALUATIONS

Employee performance evaluations shall be completed annually, between July and November, for implementation in January of the subsequent year. Performance increases are based on individual employee’s performance evaluation rating. The maximum amount of a performance adjustment shall be established annually by the Common Council.

VIII. PERFORMANCE-BASED INCREASE

Employees whose base pay is less than the maximum rate established for their respective position range will be eligible for an annual step advancement and performance adjustment in accordance with the following:

1) Performance Advancement for Employees Below Maximum Range: Annually and until the employee reaches the maximum rate of the pay range, covered employees shall be eligible to advance to a higher pay rate amount in the Wage and Salary Schedule. Advancement shall be granted as a percentage, up to 100%, of the maximum allowed Performance Based Increase in accordance with the scoring method.

~~2) Performance Adjustment for Employees above Mid Range: Upon attaining the mid-point rate of the pay range, covered employees become eligible for a performance increase annually thereafter. Advancement beyond the mid-point of the salary range shall be granted as a percentage, up to 75%, of the maximum allowed Performance Based Increase in accordance with the scoring method.~~

~~3)2) Performance Bonus for Employees above the Maximum Range: An employee shall not be paid at a rate exceeding the maximum step in the pay range. Employees whose base pay has reached the maximum rate for their respective position range shall be eligible to receive a Performance Bonus. The criteria for a performance bonus shall be the same as established for performance adjustment for employees below the maximum. A performance bonus shall be recognized to be a one-time payment that does not increase the employee’s base pay rate.~~

~~4)3) Scoring Method for Performance Based Increase. Using the Employee Performance Evaluation Form, the scoring for each goal/criteria item and for the overall goals and performance rating, shall be as follows:~~

Excellent (E) equals 10 points.
Very Good (VG) equals 8 points.
Satisfactory (S) equals 6 points.
Needs Improvement (NI) equals 4 points.

The completed Employee Performance Evaluation Form shall be submitted to the City Human Resources Department (HR). HR shall calculate the Total Evaluation Score and the Total Score Possible and then derive the Percentage Eligible Score. The Total Merit Increase percentage as determined by the Common Council shall be multiplied by the Percentage Eligible Score to determine the Merit Increase % (percentage) Earned. The Merit Increase % Earned shall be applied as set forth in the Compensation Policy, Section VIII Items (1), (2), and (3).

IX. NEW EMPLOYEES

The annual step advancement or performance adjustment for employees with less than one year of service shall be postponed to the anniversary date of employment and unless otherwise agreed upon by the Personnel Committee. ~~The City Administrator may approve hiring from the minimum to midpoint pay range.~~ Starting salary will be substantiated based on skills and experience. ~~Hiring above midpoint shall require Personnel Committee approval.~~ The City Administrator shall approve pay wage within appropriate wage grade, prior to employment offer is initiated by Department Head.

X. SPECIAL ADJUSTMENTS

In the event that an employee's experience; and/or skills and abilities; and/or performance substantially exceed expectations for an employment position(s), the Personnel Committee may recommend special adjustments in addition to the cost-of-living and performance-based increases. The City Administrator may approve progress promotions (already approved progressions such as Laborer to Equipment Operator, and Equipment Operator to Heavy Equipment Operation) from the minimum to mid point in the new pay scale range. New salary will be substantiated based on skills and experience. Promotions above midpoint shall require Personnel Committee approval.

XI. ELECTED POSITIONS OF CITY ATTORNEY AND MUNICIPAL JUDGE

The elected positions of City Attorney and Municipal Judge are exempt from the annual evaluation process and shall receive the annual cost of living increase when there is one.