



FINANCE, LICENSE & REGULATION COMMITTEE

TUESDAY, MAY 16, 2017 – 6:00 PM

CITY HALL MEETING ROOM 2A

AMENDED AGENDA

1. Call to Order by Alderman Kordus Added item 9.b.
2. Roll Call
3. 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.
4. Approve the Regular Finance, License and Regulation Committee Meeting minutes of May 2, 2017, as prepared and distributed.
5. Discussion/Action on Election of a Vice-Chairperson
6. **Licenses & Permits**
 - a. Change of Agent application filed by ALDI Inc Wisconsin d/b/a ALDI #56, 200 N Edwards Blvd, Lake Geneva, to Danielle Quale, 1301 Orchard Street, Racine
 - b. **Renewal “Class A”/Class “A” Liquor & 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) Brutap LLC d/b/a Bruno’s Liquors, 524 Broad St, James Sharkus, Agent
 - 2) Queso Corp d/b/a The Cheese Box, 801 S Wells St, Zbigniew Borowiec, Agent
 - 3) Hare Krishna Liquor Inc d/b/a Geneva Liquor, 797 Wells St, Dixit Patel, Agent
 - 4) Prairie State Enterprises of Darien LLC d/b/a Lake Geneva Mobil, 350 N Edwards Blvd, Kenneth Kearns, Agent
 - 5) New World Wine Shop Inc d/b/a New World Wine Shop, 830 W Main St, Jerry Sibbing, Agent
 - 6) QuickNSave LLC d/b/a QuickNSave, 1231 Grant St, Jatinder Dhillon, Agent
 - 7) Stinebrink’s Lake Geneva Foods LLC d/b/a Stinebrink’s Piggly Wiggly, 100 E Geneva Sq, Mark Stinebrink, Agent
 - 8) Stop-N-Go of Madison Inc d/b/a Stop-N-Go #265, 896 Wells St, Andrew Bowman, Agent
 - 9) Target Corporation d/b/a Target Store T2348, 660 N Edwards Blvd, Nicholas Schmidt, Agent
 - 10) Wal-Mart Stores East LP d/b/a Walmart #910, 201 S Edwards Blvd., Barbara Godan, Agent
 - c. **Renewal “Class A” Liquor License application filed by Lake Geneva School of Cooking LLC d/b/a Lake Geneva School of Cooking, 727 Geneva St, John Bogan, 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**
 - d. **Renewal Class “B” Fermented Malt Beverage application filed by B&B Lake Geneva LLC d/b/a Board & Brush Creative Studio Lake Geneva, 252 Center St, Julie Selby, 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**

- e. **Renewal 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) Breakfast Bungalow LLC d/b/a Great Eggs, 220 Cook St, Justin Ochalek, Agent
 - 2) Happy Restaurant Inc d/b/a Happy Café, 526 Wells St, Min Ting Zhong, Agent
 - 3) Mama Ciminis d/b/a Mama Ciminis Pizzeria, 131 S Wells St, Nicolo Cimino, Agent
 - 4) Marsala’s Pizza Inc d/b/a Marsala’s Pizza, 820 Williams St, Miguel Barcena, Agent,
 - 5) Martins Olympic Restaurant LLC d/b/a Olympic Restaurant, 748 W Main St, Yolanda Zavaleta, Agent
 - 6) The Noodle Shop CO – Colorado Inc, Noodles & Company, 351 Peller Rd, Michael Pittenger, Agent
 - 7) PH Hospitality Group LLC d/b/a Pizza Hut, 801 Williams St, Kate Rath, Agent

- f. **Renewal “Class B”/Class “B” Intoxicating Liquor & Fermented Malt Beverage License (Hotel Exemption) application filed by Harbor Shores Hotel Management Inc d/b/a Harbor Shores on Lake Geneva, 300 Wrigley Dr, William Strangeway, 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**

- g. **Renewal Reserve “Class B”/Class “B” Intoxicating Liquor & 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) Meridian Condominium Association Inc d/b/a Bella Vista Suites, 335 Wrigley Dr, Charles Lorenzi, Agent
 - 2) Su Wings Corp d/b/a Su Wings Chinese Restaurant, 743 North St, Siu Wing Leung, Agent
 - 3) The Restaurant Tempura House LLC d/b/a Tempura House, 306 Center St, Pai Tsung Wang, Agent

- h. **Renewal “Class B”/Class “B” Intoxicating Liquor & 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) Stone Soup LLC d/b/a Baker House, 327 Wrigley Dr, Charles Fritz IV, Agent
 - 2) Mercedes or Bust LLC d/b/a The Bottle Shop, 617 W Main St, Elizabeth Tumas, Agent
 - 3) Samson Enterprises LLC d/b/a Carvetti’s, 642 W Main St, Eugene Grahler, Agent
 - 4) 422 S. Wells St. LTD d/b/a Celebration on Wells, 422 S Wells St, Charles Lorenzi, Agent
 - 5) L&B Main Street Inc d/b/a Champs Sports Bar & Grill, 747 W Main St, Jessica Bush, Agent
 - 6) Chubby Kitty LLC d/b/a Fat Cat’s, 104 Broad St, Mark Basil, Agent
 - 7) Hogs & Kisses Inc d/b/a Hogs & Kisses, 149 Broad St, Linda Chironis, Agent
 - 8) Sandal Inc d/b/a Lake Geneva Lanes, 192 E Main St, Franklin Guske, Sr, Agent
 - 9) Geneva Bay Club LLC d/b/a Maxwell Mansion, 421 Baker St, Charles Fritz IV, Agent
 - 10) DCR Restaurant Group LLC d/b/a Next Door Pub & Pizzeria, 411 Interchange North, Chad Bittner, Agent
 - 11) SS2 Inc d/b/a The Red Geranium Restaurant, 393 N Edwards Blvd, Lyle Swatek, Agent
 - 12) Two Thumbs Up LLC d/b/a Thumbs Up, 260 Broad St, Benjamin Barels, Agent
 - 13) LG Hospitality Group LLC d/b/a Tuscan Tavern & Grill, 430 Broad St, James Georgalas, Agent

- i. Original 2017-2018 Operator’s (Bartender) License applications filed by Craig Evans, Rhonda Holden, Judy Honegger, Joshua Hughes, Kelly Lei, Chelsea Matthews, Carly Sinclair
- j. Renewal of 2017-2018 Operator’s (Bartender) License applications as listed in packet
- k. Renewal of Taxi Driver License applications as listed in packet (*approved by Police Chief; informational only*)

- l. Park Reservation Permit application filed by VISIT Lake Geneva for Concerts in the Park at the Flat Iron Park gazebo and Brunk Pavilion every Thursday from July 6, 2017 through August 24, 2017 (excluding August 17) from 6:00pm to 8:00pm with request to waive all fees excluding the \$25.00 application fee *(Board of Park Commissioners recommended approval on May 3, 2017)*
- m. Street Use Permit application filed by Cindy Forster Fueredi on behalf of the Maple Park Homeowners Association for closure of Geneva Street between Madison and Warren Street on June 24, 2017 from 4:00pm to 9:00pm for a block park
- n. Park Reservation Permit application filed by Jeffrey Siegal on behalf of the Buffalo Grove High School to use Flat Iron Park June 13 - June 15, 2017 from 10:00 am to 6:00 pm for Cheerleading Camp *(Board of Park Commissioners recommended approval on May 3, 2017)*
- o. Park Reservation Permit application filed by Parker Wade on behalf of the Universal Cheerleaders Association to use Seminary Park May 31 - June 3, 2017 from 8:00 am to 9:00 pm for the UCA Midwest Instructional Staff Training *(Board of Park Commissioners recommended approval on May 3, 2017)*
- p. Park Reservation Permit application filed by Shawn Kremlich on behalf of Baseball365 Inc. to use Molitor Field at Veterans Park July 7, 2017 from 8:30am to 10:00pm; all fields July 8 – July 9, 2017 from 8:30am to 10:00pm; Molitor Field on July 14, 2017 from 8:30am to 10:00pm; all fields from on July 15 – July 16, 2017 from 8:30am to 10:00pm; for the Lake Geneva Invitational – Lake Geneva Grand Slam Tournament with fees of \$150 for July 7th, \$300 for July 8th, \$300 for July 9th, \$150 for July 14th, \$300 for July 15, \$300 for July 16th, \$25 application fee, and \$1,000 security deposit, for a total of \$2,525.00 *(Board of Park Commissioners recommended approval on May 3, 2017)*
- q. Discussion/Recommendation/Action on application filed by Demetra Condos on behalf of the Central Denison PTO to waive fees in the amount of \$150 for the use of 10 picnic tables on May 12th for a Color Run at Central Denison playground

7. Public Works *(Pending consideration from Public Works on May 16, 2017)*

- a. Discussion/Recommendation/Action on Greg Powers placing and operating a hot dog stand in Flat Iron Park
- b. Discussion/Recommendation on creating Center Street Park & Trails in association with TreadHead Cycling with \$20,000 for surveying, gravel, and restrooms funded from Capital Projects
- c. Discussion/Recommendation of White River/Disc Golf Bridge Replacement Project for \$50,000 funded from Capital Projects

8. Board of Parks Commissioners

- a. Discussion/Recommendation on establishing a tournament permit application and fee schedule for Veteran’s Park at \$150 for Friday, \$300 for Saturday, \$300 for Sunday, and \$1,000 deposit for season tournaments *(Board of Park Commissioners recommended approval on May 3, 2017)*

9. Presentation of Accounts

- a. Purchase Orders (none)
- b. Prepaid Bills \$6,743.97
- c. Regular Bills in the amount of \$120,086.05

10. 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.

5/12/2017 7:15pm-Original Posting 5/15/2017 4:30pm-Amended Posting
 cc: Committee Members, Mayor & remaining Council, Administrator, Attorney

FINANCE, LICENSE & REGULATION COMMITTEE
TUESDAY, MAY 2, 2017 – 6:00 PM
MEETING ROOM 2A, CITY HALL

Alderman Kordus called the meeting to order at 6:00pm.

Roll Call. Present: Aldermen Kordus, Skates, Halverson, Hedlund and Howell. Also Present: Mayor Kupsik, City Administrator Oborn, Police Chief Rasmussen, Comptroller Slater, Parking Manager Mullally, and City Clerk Waswo

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. None.

Approval of Minutes. Howell/Skates motion to approve the Regular Finance, License and Regulation Committee Meeting minutes of April 18, 2017, as prepared and distributed. Unanimously carried.

LICENSES & PERMITS

Street Use Permit application filed by Badger High School to close a portion of South Wells Street from E. South Street/N. Bloomfield Road, south to the end of the City of Lake Geneva's jurisdiction on Sunday, May 28, 2017 from 12:30pm to 3:30pm for the Badger High School Graduation

Howell/Halverson motion to recommend approval. Unanimously carried.

Original 2017-2018 Operator's (Bartender) License applications filed by Allison Dertz, Logan Farrar, Carrie Hill, John Kobernick, Dustin Meyer and Melissa Allen

Halverson/Hedlund motion to recommend approval. Unanimously carried.

Renewal of 2017-2018 Operator's (Bartender) License applications as listed in packet

Howell/Halverson motion to recommend approval. Unanimously carried.

Renewal of Taxi Driver License application filed by Richard Skipper Sr. (approved by Police Chief; informational only)

Personnel Committee (*Pending consideration from Personnel on May 2, 2017*)

Discussion/Recommendation to Hire an Additional Police Officer

City Administrator Oborn stated the Personnel Committee recommended adding the position. The additional cost for the police office for this year is \$27,776.07. The Chief is down a position as they have an officer out on worker's comp and is not expected to be back for another 6 months. In January another officer is retiring. This is an early hiring to replace that position. They will go back down to 23 officers once that officer retires.

Howell/Halverson motion to recommend hiring an additional police officer. Unanimously carried.

Discussion/Update on Employee Health Benefits costs and programs

This item is informational; the chart is shown in the packet. Ald. Skates noted it's a good track.

Discussion/Recommendation on Aurora Clinic for City Employees

The City Administrator is still negotiating this item. It was discussed to have the clinic open more often with minimum hours. There is a possibility that a room is available at the Aurora Clinic. The consensus was to send this to Council if Mr. Oborn can negotiate a favorable schedule.

Discussion/Recommendation on Organizational Chart Revision

The revision is creating a Police Department Lead Booking Officer and recognizing the Utility Commission changes. Hedlund/Skates motion to approve. Unanimously carried.

Discussion/Recommendation of acceptance of Lake Geneva Jaycees donation of a refrigerator for the City Hall Second Floor Room 2C

Parking Manager Mullally explained the second floor community room would be a good place for the refrigerator and an area for her staff to cool down in the summer. There is also a card club that plays in this room who would benefit from the fridge as well. City Clerk Waswo received a letter from the Tuesday Bridge Group thanking the city for providing the room and noting the addition of a refrigerator would be a pleasant surprise.

Ald. Skates disagreed with the donation of the fridge and felt it was a horrible precedent to set. When the Police, Fire or Street Departments receive donations of equipment, tools or vests, it is for a public purpose. The public and residents benefit as these departments are safer and can run more economical. He feels it is wrong for the city to accept the donation that only benefits 10 people when there are needy organizations getting denied.

Ms. Mullally stated she takes her staff very seriously and requested money to buy a refrigerator but was denied. Ald. Skates said if they need a fridge in the basement or their office environment needs to approved, it should be put in the budget process where we can all see what is being done. Ald. Howell and Halverson agreed that it is a bad perception.

City Administrator Oborn noted room 2C is a community room where senior citizens hold card clubs every Tuesday and Thursday and would be able to use the refrigerator. This would be a benefit for more than just the Parking Department. Mayor Kupsik stated if we need a refrigerator for employees, we should buy it.

Skates/Halverson motion to deny donation. Unanimously carried.

Discussion/Recommendation on updated Committee meeting calendar

Mr. Oborn explained the Tourism Commission was added, the Geneva Lake Use was put on the correct day and the Historic Preservation Commission decided to stay on Thursday. Ald. Skates said the Park Commission is switching to the 4th Wednesday of the month starting in June.

Presentation of Accounts

Purchase Orders (none)

Howell/Halverson motion to approve the Prepaid Bills in the amount of \$14,958.21. Unanimously carried.

Howell/Skates motion to approve the Regular Bills in the amount of \$109,390.94. Unanimously carried.

Hedlund/Howell motion to approve the Treasurer's Report for February 2017. Unanimously carried.

Adjournment

Halverson/Hedlund motion to adjourn at 6:34pm. Unanimously carried.

/s/ Sabrina Waswo, City Clerk

THESE MINUTES ARE NOT OFFICIAL UNTIL APPROVED BY THE FINANCE, LICENSE & REGULATION COMMITTEE

ONE 54

AT-107a: SCHEDULE FOR SUCCESSOR OF AGENT

If there is a change in agent, each club, corporation, or limited liability company who holds a retail permit to sell fermented malt beverages and/or intoxicating liquor must appoint a successor agent pursuant to sec. 125.04(6), Wis. Stats. There is a \$10 change in agent processing fee due with this form. The following questions must be answered by the Agent. The appointment must be signed by the President and Secretary or members of limited liability company. The appointment must be approved by the licensing authority.

City of Lake Geneva Wisconsin 5, 10 20 17
(Municipality) (Date)

1. Name of agent DANIELLE QUALE

- | | Yes | No | |
|----|-------------------------------------|-------------------------------------|--|
| 2. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Are you of legal drinking age? |
| 3. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Have you been a resident of Wisconsin for at least 90 continuous days prior to the date of appointment as agent? |
| 4. | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Have you ever been convicted of a federal law violation? |
| 5. | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Have you ever been convicted of a State law violation? |
| 6. | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Have you ever been convicted of a Local ordinance violation? |
| 7. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Have you completed the required responsible beverage server program per sec. 125.04(5)(a)5, Wis. Stats.? |

UNDER PENALTY OF LAW, I declare that all of the above information is true and correct to the best of my knowledge and belief.

Danielle Quale
(Signature of Agent)
1301 Orchard St. Racine, WI 53405
(Address)

SUCCESSOR AGENT

The undersigned appoints DANIELLE QUALE as agent in accordance with sec. 125.04(6), Wis. Stats.

Name of Permittee AUDI, INC. (WISCONSIN)
Date May 3rd 20 17
By Charles E. Youngstrom (Signature of President/Member)
Ken E. Hall (Signature of Secretary/Member)

I hereby accept appointment as agent for AUDI #54 and assume full responsibility or the conduct of the business relative to fermented malt beverages and intoxicating liquors.

Date 5/10/2017
Danielle Quale (Signature of Agent)

THE AGENT APPOINTED ABOVE MUST BE APPROVED BY THE LICENSING AUTHORITY TO BE EFFECTIVE. (See sec. 125.04(6), Wis. Stats.)

City of Lake Geneva WI 20
(Municipality) (Date)

(Signature of Official)
(Title)

RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07/01/2017 ending: 06/30/2018
(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.:		FEIN Number:	
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>25.00</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) SHARKUS JAMES Home Address 1101 W 3104 CONANT ST. Post Office & Zip Code L. Geneva WI 53147

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company ▶ BRUTAP 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	_____	_____	_____
Vice President/Member	_____	_____	_____
Secretary/Member	_____	_____	_____
Treasurer/Member	_____	_____	_____
Agent ▶	<u>JAMES B. SHARKUS</u>	_____	_____
Directors/Managers	_____	_____	_____

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

2. Address of Premises ▶ 524 BRAD ST. Post Office & Zip Code ▶ L. 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 PREMISES AND 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

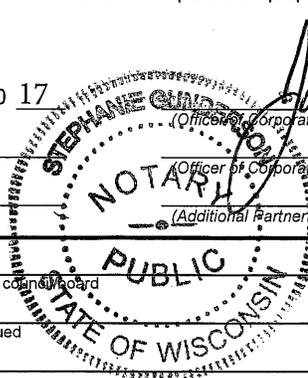
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? Yes No

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 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 BEFORE ME

this 5 day of May, 20 17
Stephanie Dunderson (Clerk/Notary Public)
 My commission expires 4/13/18
James B. Sharkus (Officer of Corporation/Member/Manager of Limited Liability Company /Partner/Individual)
 _____ (Officer of Corporation/Member/Manager of Limited Liability Company /Partner)
 _____ (Additional Partners/Member/Manager of Limited Liability Company if Any)



TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>5/5/17</u>	Date reported to community board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

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 the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

Town

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

City

The undersigned duly authorized officer(s)/members/managers of Brunas 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 Brunas Liquors
(trade name)

located at 524 Broad St.

appoints JAMES E. SHACKUS
(name of appointed agent)

W3104 CONANT ST. Lake Geneva Wis
(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? 19 YEARS

Place of residence last year W3104 Conant St.

For: Brunas LLC
(name of corporation/organization/limited liability company)

By: James E. Shackus
(signature of Officer/Member/Manager)

And: James E. Shackus
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, JAMES E. SHACKUS
(print/type agent's name), hereby accept this appointment as agent for the

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.

James E. Shackus 5-4-2017 Agent's age _____
(signature of agent) (date)
W3104 Conant St. LG, Wis 53147 Date of birth _____
(home address of agent)

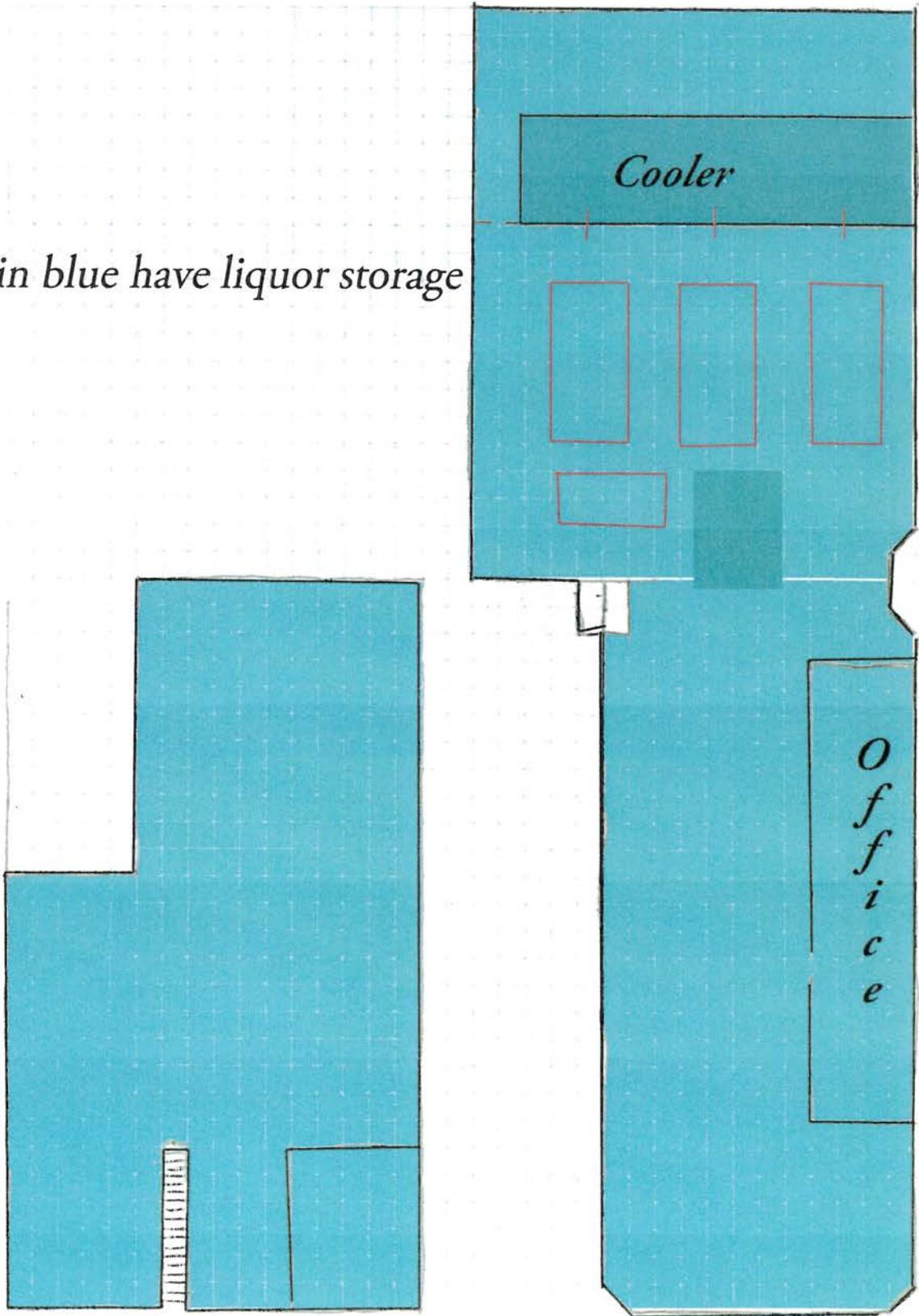
**APPROVAL OF AGENT BY MUNICIPAL AUTHORITY
(Clerk cannot sign on behalf of Municipal Official)**

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 5-12-17 by [Signature] Title Police Chief
(date) (signature of proper local official) (town chair, village president, police chief)

Bruno's Liquors 524 Broad Street

Areas in blue have liquor storage



Basement

Main Floor

Broad Street

RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07/01/2017 ending: 06/30/2018
(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 Queso Corp

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>Zbigniew John Borowiec</u>	<u>PO Box 399 Geneva City WI 53128</u>	<u>WI 53128</u>
Vice President/Member	<u>Cheryl Ann Borowiec</u>	<u>PO Box 399 Geneva City WI 53128</u>	<u>WI 53128</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 53127

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.) Actual Space 1st floor 100m 2nd 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

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 5 day of May, 20 17

Stephanie Gunderson (Clerk/Notary Public)
Cheryl Ann Borowiec (Officer of Corporation/Member/Manager of Limited Liability Company /Partner)
Zbigniew J Borowiec (Officer of Corporation/Member/Manager of Limited Liability Company /Partner)

My commission expires 4/13/18
 (Additional Partner(s)/Member/Manager of Limited Liability Company if any)

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>5/5/17</u>	Date reported to council/board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

C/S A Retail

Applicant's WI Seller's Permit No.:	FEIN Number:
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)	\$ <u>N/A</u>
<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</u>

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 the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

Town

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

City

The undersigned duly authorized officer(s)/members/managers of Queso Corp
(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 The Cheese Box
(trade name)

located at 801 S Wells St

appoints Zbigniew J Borowiec
(name of appointed agent)

603 Freeman St PO Box 399 Genoa City WI 53128
(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? 36 years

Place of residence last year Wisconsin

For: Queso Corp
(name of corporation/organization/limited liability company)

By: Cheryl A Borowiec
(signature of Officer/Member/Manager)

And: J [Signature]
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, Zbigniew J Borowiec, 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] 5/1/17 Agent's age
(signature of agent) (date)

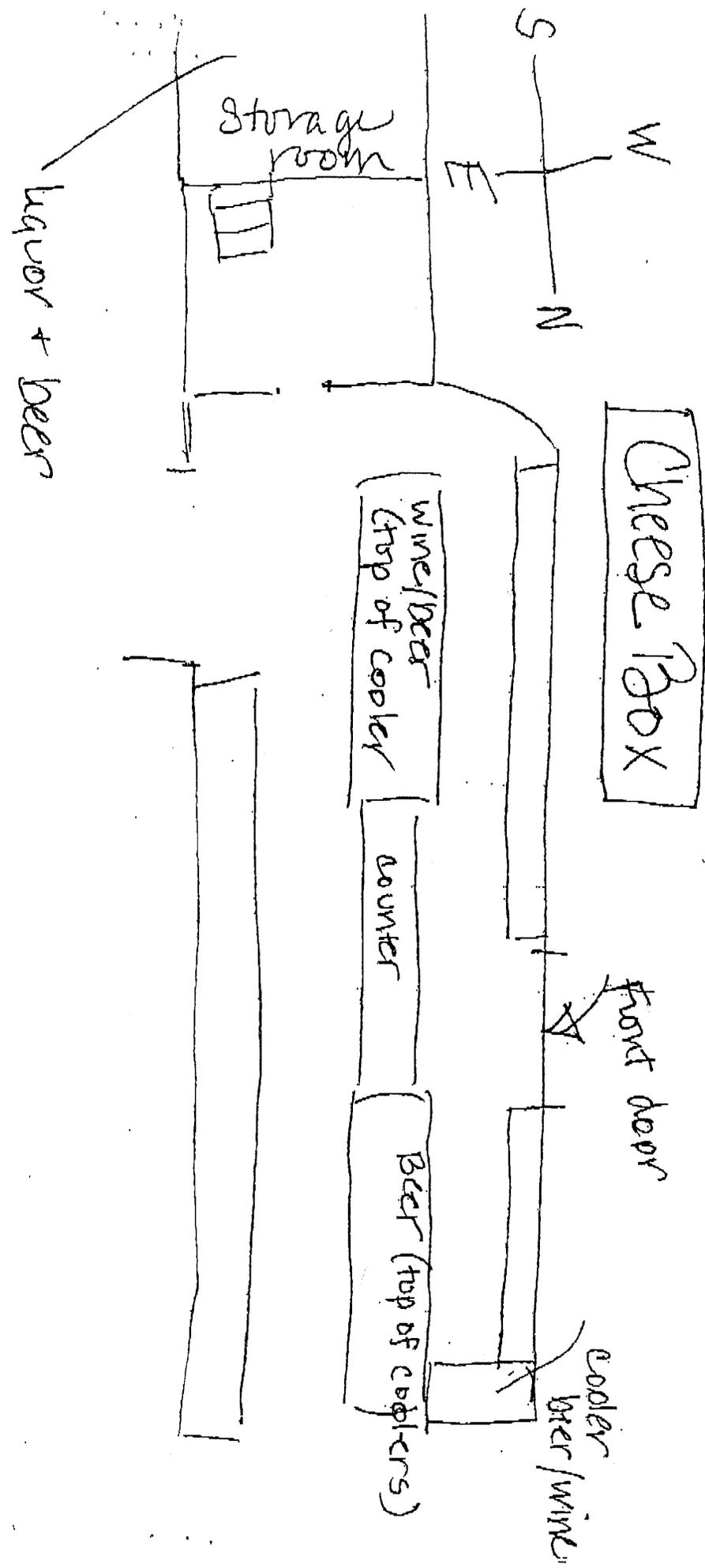
603 Freeman St PO Box 399 Genoa City WI Date of birth
(home address of agent)

**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 5-12-17 by [Signature] Title Police Chief
(date) (signature of proper local official) (town chair, village president, police chief)

DUI WELD 21. LOWE CENTER W1 2014 |



...

RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07/01/2017 ending: 06/30/2018
(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.:		FEIN Number:	
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>25.00</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) PATEL DIXIT R Home Address 6536 BISCAYNE AVE MT. PLEASANT, WI 53406 Post Office & Zip Code 53406

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company ▶ HARE KRISHNA LIQUOR INC

Address of Corporation/Limited Liability Company (if different from licensed premises) ▶ 797 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>PATEL DIXIT R</u>	<u>6536 BISCAYNE AVE MT. PLEASANT WI 53406</u>	<u>53406</u>
Vice President/Member			
Secretary/Member			
Treasurer/Member			
Agent ▶	<u>DIXIT PATEL</u>		

C. 1. Trade Name ▶ GENEVA LIQUOR Business Phone Number 262-248-5000

2. Address of Premises ▶ 797 WELLS ST LAKE GENEVA, WI Post Office & Zip Code ▶ 53127

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 BLDG &

5. Legal description (omit if street address is given above): BACK ROOM ~~AND~~ COOLER, storage & Retail Floor

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 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 13 day of April, 20 17
Sabrina M. Waswo
(Clerk/Notary Public)
 My commission expires 7-20-2019

Dixit Patel
State of Wisconsin
Officer of Corporation/Member/Manager of Limited Liability Company /Partner/Individual
Notary Public
Officer of Corporation/Member/Manager of Limited Liability Company /Partner
Sabrina M. Waswo
(Additional Partner(s)/Member/Manager of Limited Liability Company if Any)

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>4-13-2017</u>	Date reported to council/board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

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 the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

Town

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

City

The undersigned duly authorized officer(s)/members/managers of HARE KRISHNA LIQUOR INC
(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 GENEVA LIQUORS
(trade name)

located at 797 S WELLS ST LAKE GENEVA, WI 53147

appoints DIXIT PATEL
(name of appointed agent)

6536 BISCAYNE AVE MT. PLEASANT, WI 53406
(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? 13 YEARS

Place of residence last year RACINE

For: HARE KRISHNA LIQUOR INC
(name of corporation/organization/limited liability company)

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

And: _____
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, DIXIT PATEL, 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] 04/13/2017 Agent's age _____
(signature of agent) (date)

6536 Biscayne Ave Racine WI 53406 Date of birth _____
(home address of agent)

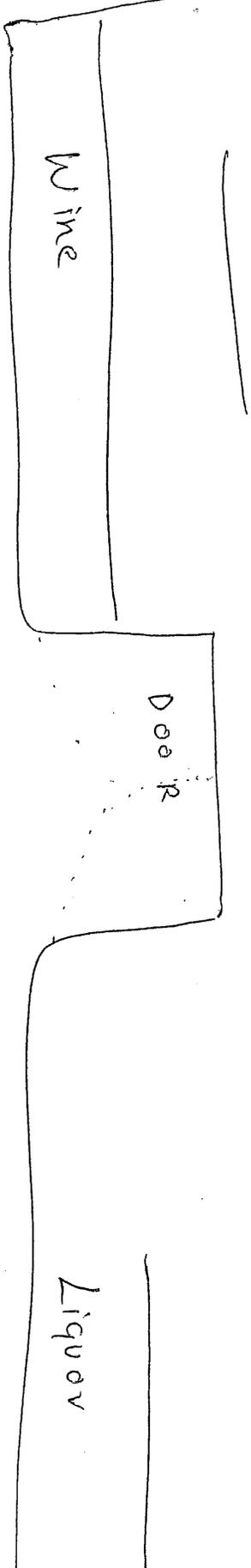
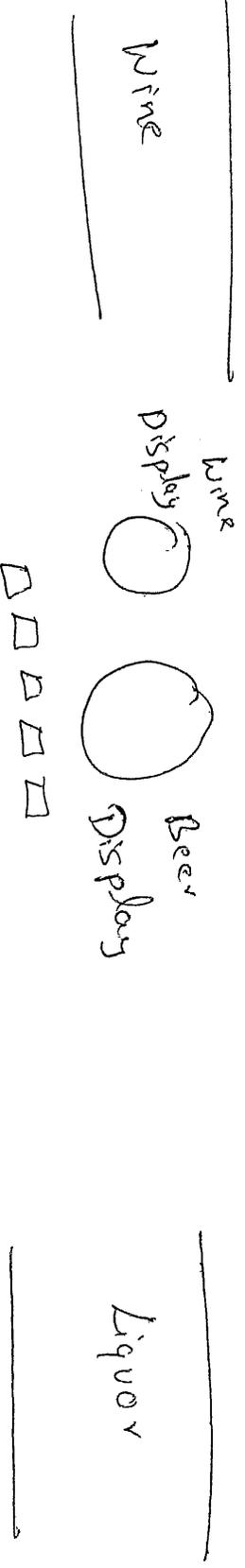
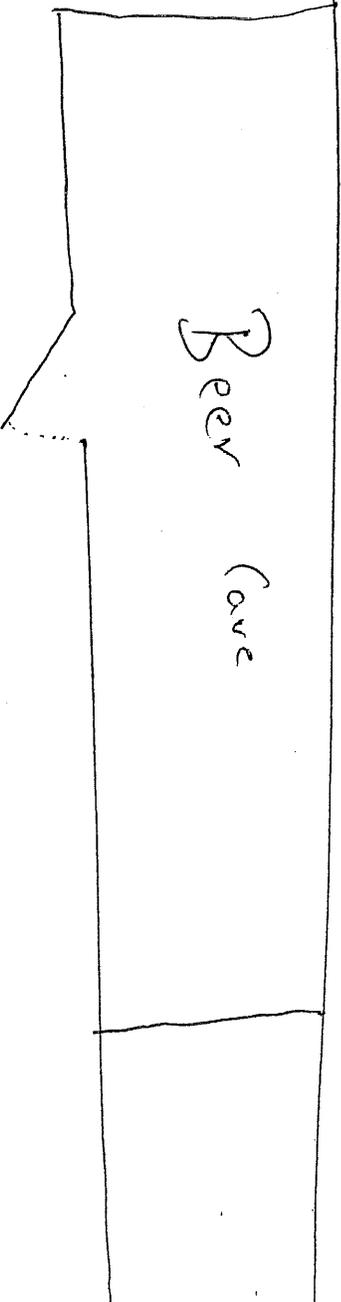
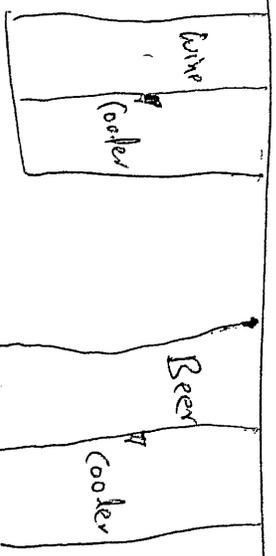
APPROVAL OF AGENT BY MUNICIPAL AUTHORITY

(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 4-24-17 by [Signature] Title Police Chief
(date) (signature of proper local official) (town chair, village president, police chief)

Geneva Liquors 797 S Wells Street



Front Parking

Road

RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07/01/2017 ending: 06/30/2018
(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,
 All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company: IL 60010
 Title Name (Inc. Middle Name) Home Address Post Office & Zip Code
 President/Member MEMBER RICHARD JAMES MISTRETTA 22751 N. BRIDLE TRL, KILDEER, IL 60047
 Vice President/Member MEMBER KENNETH BARTHOLOMEW KEARNS 5912 N. RIVER BAY RD., WATERFORD, WI 53185
 Secretary/Member _____
 Treasurer/Member _____
 Agent ► MEMBER KENNETH BARTHOLOMEW KEARNS 5912 N. RIVER BAY RD., WATERFORD, WI 53185
 Directors/Managers _____

- C. 1. Trade Name ► LAKE GENEVA MOBIL Business Phone Number 262-248-2365
 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 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 25th day of APRIL 2017

James M. Heidrich
 (Clerk/Notary Public)
 My commission expires 5-23-2020
Kenneth Kearns C.O.O.
 (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)

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>5/2/17</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:	
LICENSE REQUESTED ►	
TYPE	FEE
<input checked="" type="checkbox"/> Class A beer	\$ <u>160.00</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>

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 the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

Town

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

City

The undersigned duly authorized officer(s)/members/managers of PRAIRIE STATE ENTERPRISES OF DARIEN, 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
LAKE GENEVA MOBIL
(trade name)

located at 350 N. EDWARDS BLVD., LAKE GENEVA, WI 53147

appoints KENNETH KEARNS
(name of appointed agent)

5912 N. RIVER BAY RD., WATERFORD, WI 53185
(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? 9 YEARS

Place of residence last year 5912 N. RIVER BAY RD., WATERFORD, WI 53185

For: PRAIRIE STATE ENTERPRISES OF DARIEN, LLC
(name of corporation/organization/limited liability company)

By: *Kenneth Kearns* C.O.O.
(signature of Officer/Member/Manager)

And: _____
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, KENNETA KEARNS, 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.

Kenneth Kearns 4-25-77 Agent's age _____
(signature of agent) (date)

5912 N. RIVER BAY RD., WATERFORD, WI 53185 Date of birth _____
(home address of agent)

**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 5-9-17 by *[Signature]* Title Police Chief
(date) (signature of proper local official) (town chair, village president, police chief)



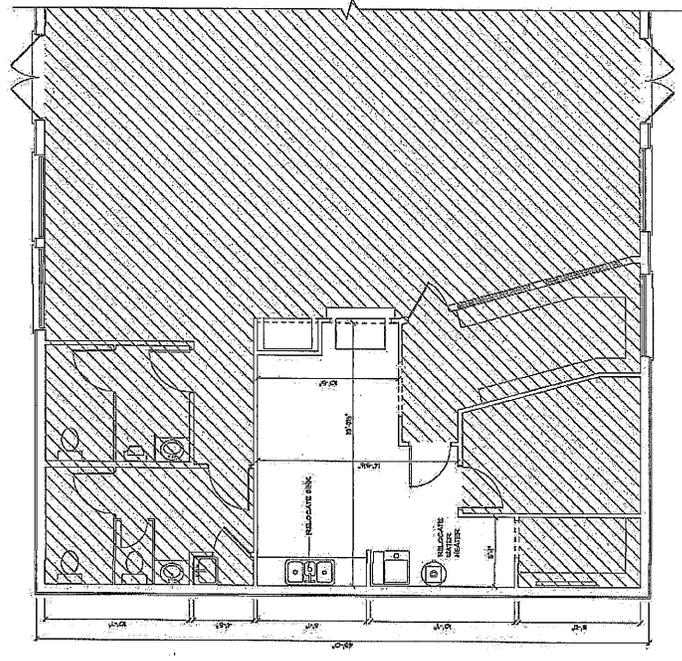
LAKWOOD CONSTRUCTION SERVICES
 691 INTERCHANGE NORTH
 LAKE GENEVA, WI 53147
 262-248-2910 FAX 262-745-8138

LAKE GENEVA MOBIL
 360 N EDWARDS BLVD
 LAKE GENEVA, WI 53147
 FLOOR PLAN

DATE
 9-29-15

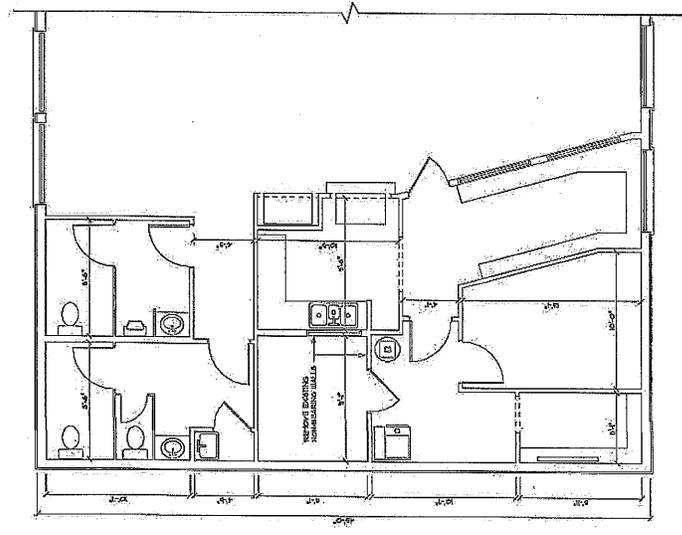
SHEET NO.
1

LAKE GENEVA MOBIL
 350 N EDWARDS BLVD
 LAKE GENEVA, WI 53147



NOTE:
 ALL DIMENSIONS SHOWN TO
 THE FACE OF WALLS
 UNLESS NOTED OTHERWISE

NEW FLOOR PLAN
 SCALE: 1/4" = 1' 0"



EXISTING FLOOR PLAN
 SCALE: 1/4" = 1' 0"

RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07/01/2017 ending: 06/30/2018
(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) Sibbing Jerry Thomas Home Address 428 N Lakeshore Dr Fontana WI 53125 Post Office & Zip Code 53125

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) 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>Jerry Thomas Sibbing</u>	<u>428 N Lakeshore Dr</u>	<u>Fontana WI 53125</u>
Vice President/Member	<u>N/A</u>		
Secretary/Member	<u>N/A</u>		
Treasurer/Member	<u>N/A</u>		
Agent	<u>Jerry Thomas Sibbing</u>		
Directors/Managers	<u>N/A</u>		

C.1. Trade Name New World Wine Shop Business Phone Number 262-812-4088
 2. Address of Premises 830 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.) Retail Shop within Mall - see addendum
5. Legal description (omit if street address is given above): Fancy Fair Mall - Unit G
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 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 05 day of MAY, 20 17
Suzanne Gunderson
(Clerk/Notary Public)
 My commission expires 4/13/18

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

TO BE COMPLETED BY CLERK		
Date received and filed with municipal clerk <u>5-5-2017</u>	Date reported to council/board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

QUESTION 4: SALES FLOOR AND IN OUR
STAND UP COOLER AND IN
PARTITION AREA BEHIND
CASH OUT.

- RECORDS ARE ALL KEPT IN
THE OFFICE IN FILE
CABINET.

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 the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

Town

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

City

The undersigned duly authorized officer(s)/members/managers of New World Wine Shop Inc
(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 New World Wine Shop
(trade name)

located at 830 W Main St Lake Geneva WI 53147

appoints Jerry T. Sibbins
(name of appointed agent)

428 N Lakeshore Drive Fontana WI 53125
(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? 4 or 5 yrs.

Place of residence last year 248 N. Lakeshore Dr. Fontana, WI 53125

For: NEW WORLD WINE SHOP
(name of corporation/organization/limited liability company)

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

And: _____
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, JERRY SIBBINS, 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] 5-5-17 Agent's age _____
(signature of agent) (date)

_____ Date of birth _____
(home address of agent)

**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 5-12-17 by [Signature] Title Police Chief
(date) (signature of proper local official) (town chair, village president, police chief)

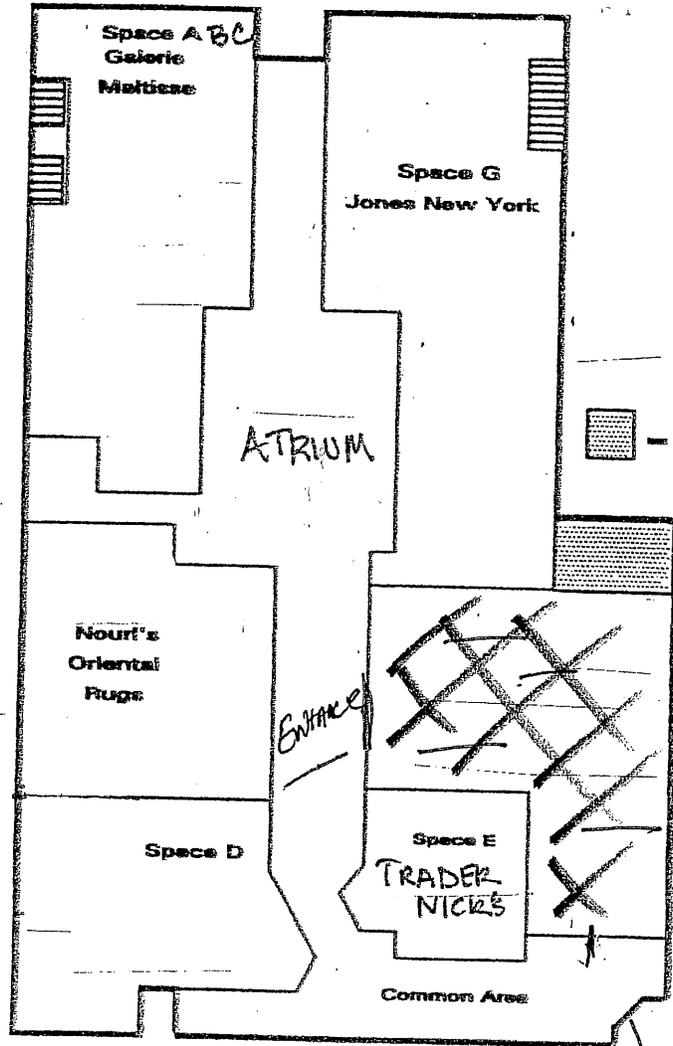
FS W16W

"A"

830 West Main St
Lake Geneva WI 53147

FIRST FLOOR

Fancy Faire Mall



Area included in LeCookery

NEW WORLD WINE SHOP INC

Wine Liquor Display Retail

Wine Liquor Storage

Rear Entrance

RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07/01/2017 ending: 06/30/2018
(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
▶ DHILLON JATINDER SINGH 9879 W SAINT STEPHAN DR FRANKLIN WI 53132

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company ▶ QUICK N SAVE
 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>JATINDER S DHILLON</u>	<u>9879 W SAINT STEPHAN DR FRANKLIN</u>	<u>WI 53132</u>
Vice President/Member			
Secretary/Member			
Treasurer/Member			
Agent	<u>Jatinder S. Dhillon</u>		
Directors/Managers			

C. 1. Trade Name ▶ QUICK N SAVE Business Phone Number 262-203-5148
 2. Address of Premises ▶ 1231 GRANITE ST Post Office & Zip Code ▶ LAKE GENEVA WI 53132

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 Counter/BACK ROOM/OFFICE
5. Legal description (omit if street address is given above): WALKIN COOLERS
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 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 5 day of May, 20 17
Stephanie Anderson (Clerk/Notary Public)
J S Dhillon (Officer of Corporation/Member/Manager of Limited Liability Company /Partner/Individual)
 My commission expires 4/13/18
 (Additional Partners)/Member/Manager of Limited Liability Company if Any

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>5-5-2017</u>	Date reported to council/board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

(Class A Retail Combo)

Applicant's WI Seller's Permit No.:	FEIN Number:
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	\$ 25.00
TOTAL FEE	\$ <u>1025-</u>



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 the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

Town

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

City

The undersigned duly authorized officer(s)/members/managers of QUICK N SAVE
(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 QUICK N SAVE
(trade name)

located at 1231 GRANT ST

appoints JATINDER S DHILLON
(name of appointed agent)

9879 W SAINT STEPHAN DR FRANKLIN WI 53132
(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).

Quick Mart LLC 19400 W College Ave New Berlin WI 53146

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? 15

Place of residence last year 9879 W Saint Stephen Dr Franklin WI

For: QUICK N SAVE
(name of corporation/organization/limited liability company)

By: JS DHILLON
(signature of Officer/Member/Manager)

And: JATINDER S DHILLON
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, JATINDER S DHILLON, 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.

JS DHILLON 5/5/17 Agent's age _____
(signature of agent) (date)

9879 W SAINT STEPHAN DR FRANKLIN WI 53132 Date of birth _____
(home address of agent)

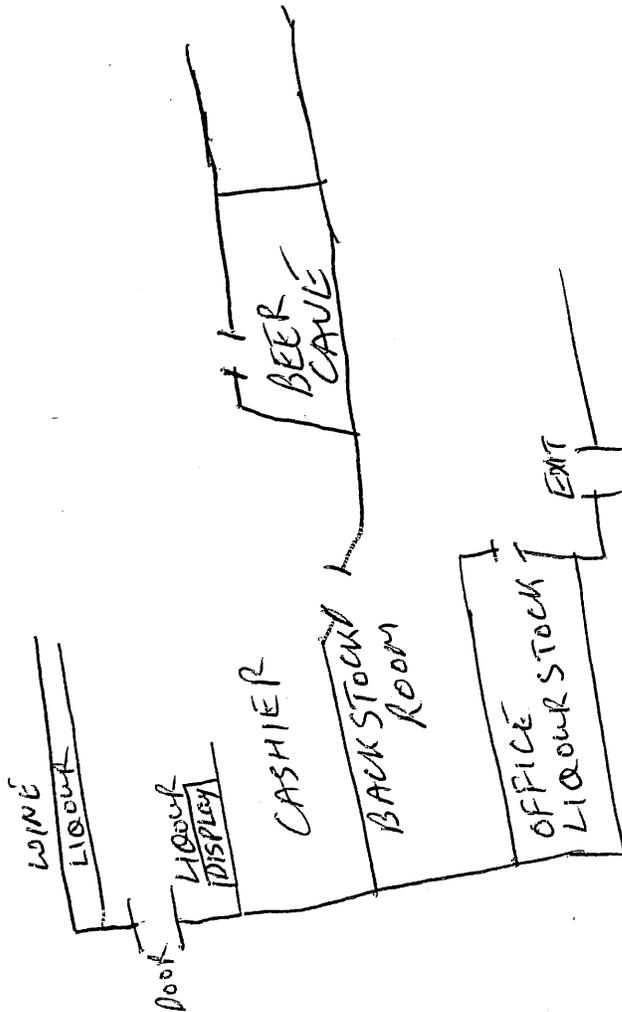
**APPROVAL OF AGENT BY MUNICIPAL AUTHORITY
(Clerk cannot sign on behalf of Municipal Official)**

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 5/12/17 by [Signature] Title Police Chief
(date) (signature of proper local official) (town chair, village president, police chief)



QUICK N SAVE
1231 GRANT ST



RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07 01 2017 ending: 06 30 2018
(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 ▶ STINEBRINK'S LAKE GENEVA FOODS 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/Officer	MARK EDWARD STINEBRINK	N3776 BOWERS RD	LAKE GENEVA 53147
Vice President/Member	BRETT MICHAEL STINEBRINK	1129 GRANT ST	LAKE GENEVA 53147
Secretary/Member	NONE		
Treasurer/Member	NONE		
Agent	MARK STINEBRINK		
Directors/Managers	NONE		

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 inside & locked liquor case in 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 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 21 day of April, 2017
Michael B. [Signature]
(Clerk/Notary Public)
 My commission expires 6-17-17

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

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

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>4-21-17</u>	Date reported to council/board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

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 the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

Town

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

City

The undersigned duly authorized officer(s)/members/managers of Stinebrink's Lake Geneva Foods 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

Stinebrink's Piggly Wiggly
(trade name)

located at 100 E. Geneva Sq

appoints Mark Stinebrink
(name of appointed agent)

N3776 Bowers Rd. Lake Geneva, WI 53147
(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).

Stinebrink's Delwan Foods LLC, Stinebrink's Kenosha Foods LLC

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? 64 year

Place of residence last year N3776 Bowers Rd, Lake Geneva, WI 53147

For: Stinebrink's Lake Geneva Foods LLC
(name of corporation/organization/limited liability company)

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

And: _____
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, Mark Stinebrink, 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.

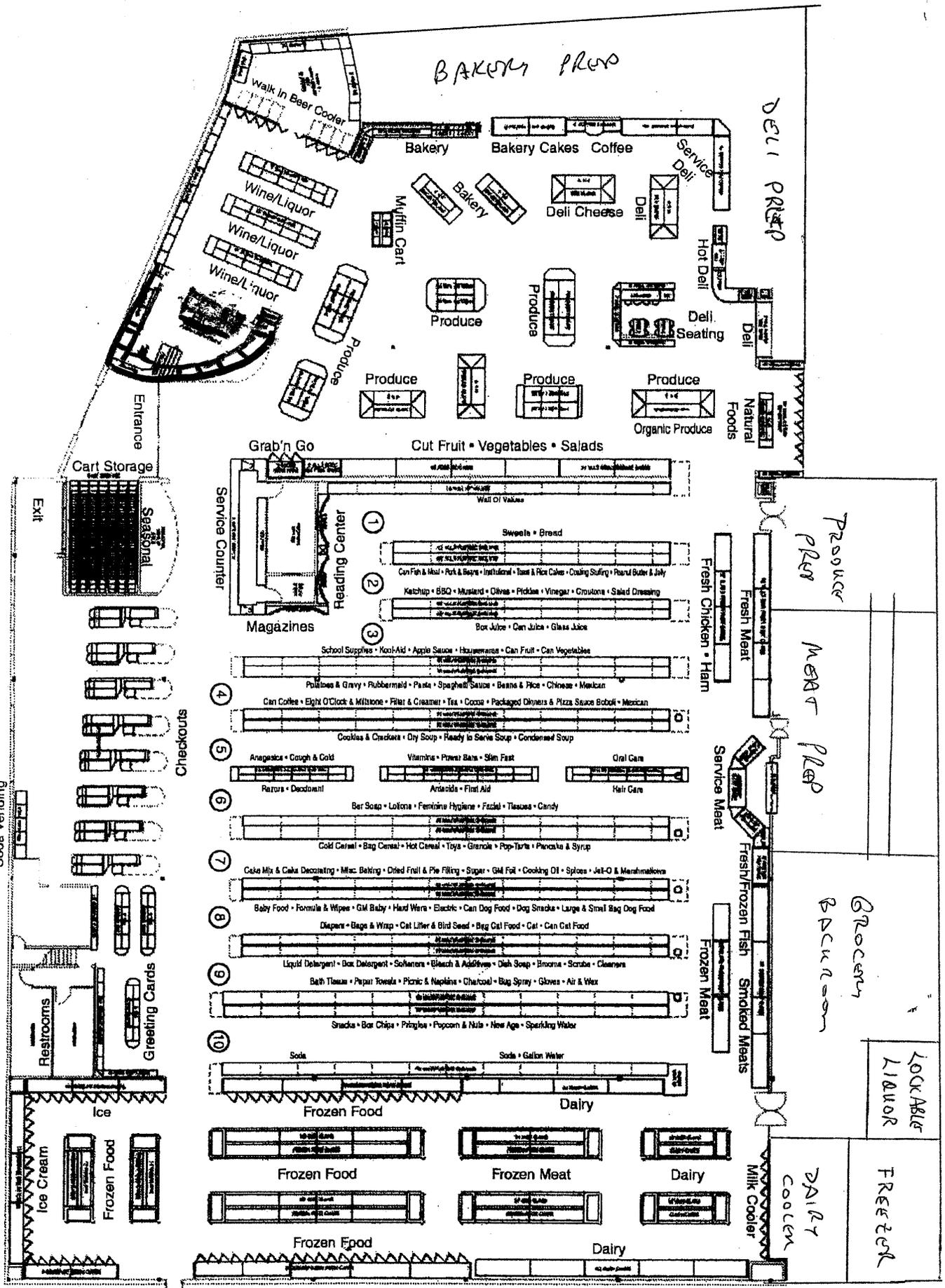
[Signature] 04/21/17 Agent's age _____
(signature of agent) (date)

N3776 Bowers Rd Lake Geneva WI 53147 Date of birth _____
(home address of agent)

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 5-1-17 by [Signature] Title Police Chief
(date) (signature of proper local official) (town chair, village president, police chief)



RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07 01 2017 ending: 06 30 2018
(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 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	Post Office & Zip Code
President/Member	ANDREW J BOWMAN	4213 SOMERSET LANE	MADISON, WI 53711
Vice President/Member			
Secretary/Member	KEVIN O'BRIEN	405 W HAVEN DR	ARLINGTON HTS, IL 60005
Treasurer/Member	ANDREW J BOWMAN	4213 SOMERSET LANE	MADISON, WI 53711
Agent	ANDREW J BOWMAN	4213 SOMERSET LANE	MADISON, WI 53711
Directors/Managers	ANDREW J BOWMAN	4213 SOMERSET LANE	MADISON, WI 53711

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'X60' ALCOHOL STORED IN COOLER

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

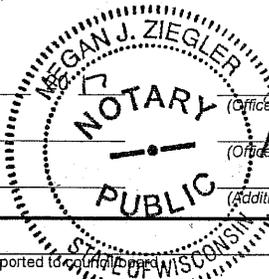
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? Yes No

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 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 10th day of April
Megan J. Ziegler
(Clerk/Notary Public)



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

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>4-20-2017</u>	Date reported to county board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

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	\$ 25
TOTAL FEE	\$ 625

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 the officer(s) of the corporation/organization or members/managers 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(s)/members/managers of Stop-N-Go of Madison, Inc.
(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 Stop-N-Go #265
(trade name)

located at 896 Wells Street, Lake Geneva, WI 53147

appoints Andrew J. Bowman
(name of appointed agent)

4213 Somerset Lane, Madison, WI 53711
(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?

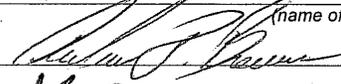
Yes No If so, indicate the corporate name(s)/limited liability company(ies) and municipality(ies).
see attached

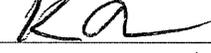
Is applicant agent subject to completion of the responsible beverage server training course? Yes No

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

Place of residence last year 4213 Somerset Lane, Madison, WI 53711

For: Stop-N-Go of Madison, Inc.
(name of corporation/organization/limited liability company)

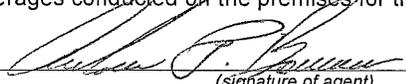
By: 
(signature of Officer/Member/Manager)

And: 
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, Andrew J. Bowman, hereby accept this appointment as agent for the
(print/type agent's name)

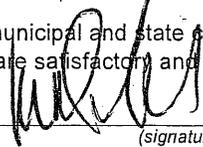
corporation/organization/limited liability company and assume full responsibility for the conduct of all business relative to alcohol beverages conducted on the premises for the corporation/organization/limited liability company.

 4/10/17 Agent's age _____
(signature of agent) (date)

4213 Somerset Lane, Madison, WI 53711 Date of birth _____
(home address of agent)

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 4-24-17 by  Title Police Chief
(date) (signature of proper local official) (town chair, village president, police chief)

RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07/01/2017 ending: 06/30/2018
(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 ▶ Target Corporation
 Address of Corporation/Limited Liability Company (if different from licensed premises) ▶ 33 S. 6th St. CC-1028, 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 ▶ Nicholas Schmidt 123 Fremont St. Walworth, WI 53184
 Directors/Managers _____

C. 1. Trade Name ▶ Target Store T2348 Business Phone Number 262-248-5610
 2. Address of Premises ▶ 660 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.) See attached fixture plan
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 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 25th day of April, 20 17

[Signature] (Officer of Corporation/Member/Manager of Limited Liability Company /Partner/Individual)
[Signature] (Clerk/Notary Public)
CHAD MICHAEL KISSINGER
 Notary Public (Officer of Corporation/Member/Manager of Limited Liability Company /Partner)
 State of Minnesota
 My Commission Expires January 31, 2019
 My commission expires 1/31/19 (Additional Partner(s)/Member/Manager of Limited Liability Company if Any)

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>5/4/17</u>	Date reported to council/board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

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 the officer(s) of the corporation/organization or members/managers 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(s)/members/managers of Target Corporation
(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
Target Store T2348
(trade name)

located at 660 N. Edwards Blvd. Lake Geneva, WI 53147

appoints Nicholas Schmidt
(name of appointed agent)

123 Fremont St., Walworth, WI 53184
(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?

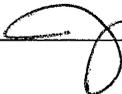
Yes No If so, indicate the corporate name(s)/limited liability company(ies) and municipality(ies).

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? 10 yrs

Place of residence last year 123 Fremont St., Walworth, WI 53184

For: Target Corporation
(name of corporation/organization/limited liability company)

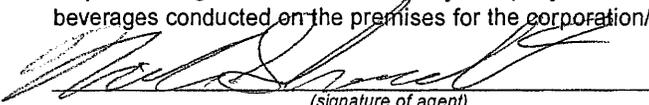
By: 
(signature of Officer/Member/Manager)

And: _____
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, Nicholas Schmidt, hereby accept this appointment as agent for the
(print/type agent's name)

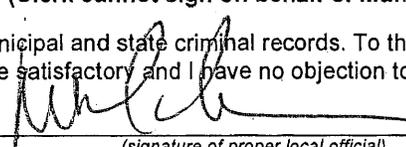
corporation/organization/limited liability company and assume full responsibility for the conduct of all business relative to alcohol beverages conducted on the premises for the corporation/organization/limited liability company.

 4/28/2017 Agent's age _____
(signature of agent) (date)

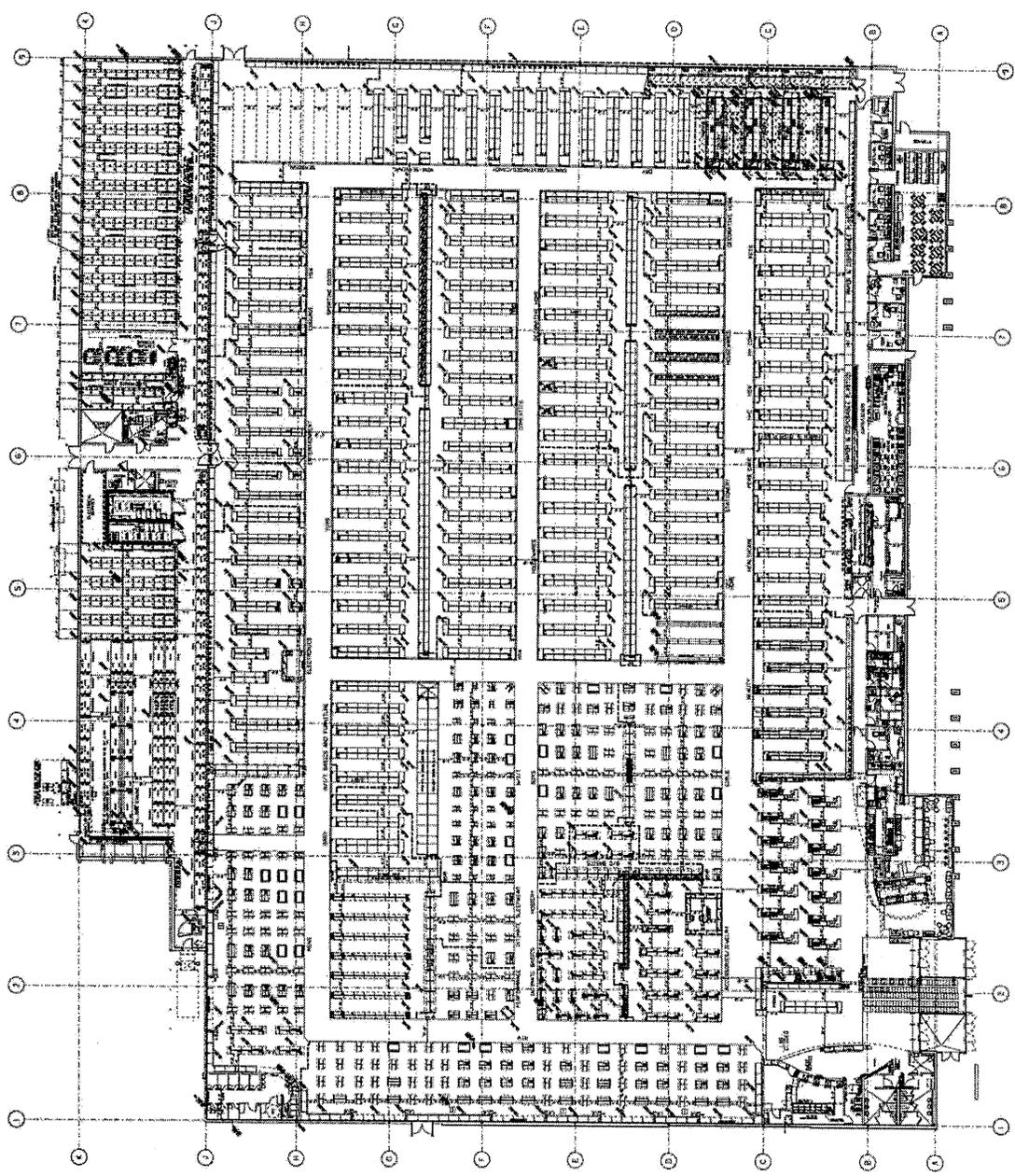
123 Fremont St., Walworth, WI 53184 Date of birth _____
(home address of agent)

**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 5-2-17 by  Title Police Chief
(date) (signature of proper local official) (town chair, village president, police chief)

TARGET CORPORATION
 TARGET CORPORATION, ACTIVITY DEVELOPMENT
 10000 W. BROADWAY, SUITE 100
 DENVER, CO 80231-1000
 TEL: (303) 752-1000
 FAX: (303) 752-1001
 WWW.TARGET.COM



AS-BUILT CHECKLIST

VERIFY DATA SETTING, RECORD SIZE, TO PRINTERS IN CLAMP LOCATIONS.
VERIFY THE UNIT HAS BEEN ADJUSTED TO WORK AROUND OBSTACLES.
ANY WALLS SHOULD BE DIFFERENT THAN WHAT IS SHOWN ON PLAN.
INDIVIDUAL SETTINGS ON EXPOSURE SHOULD BE SPAWN ON PLAN.
VERIFY ALL FLOOR FINISH, INTERLOCKS AT ENTRY WALLS TO MAKE CORRECT DECISION.
VERIFY ALL INTERLOCK DIMENSIONS.
VERIFY ALL BATTERY TYPING LOCATIONS AS SHOWN ON PLAN.
INDOOR AIR QUALITY CONTROL PANEL FEATURES SHOULD BE SHOWN ON PLAN AND NOT ELIMINATE.
VERIFY ALL DIMENSIONS DIFFERENT THAN SHOWN ON PLAN.

INSTALLATION
 PUBLICATION

TARGET

DATE: 07/15/03
 DRAWN BY: LAMAR B. ANDERSON
 SCALE: 1/8" = 1'-0"

OCT 07 NEW STORE
 LAKE GENEVA, WI
 LAKE GENEVA, WI

T-2348

TYPE: FIXTURE PLAN

PLAN NO: 894-383
 SHEET NO: FW1

RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07 01 2017 ending: 06 30 2018
(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 Street, Licensing Dept 8916 Post Office & Zip Code Bentonville, AR 72716-0500

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>See List Attached</u>		
Vice President/Member			
Secretary/Member			
Treasurer/Member			
Agent	<u>Barbara C. Godan, 715 Tenderfoot Trail, Eagle, WI 53119</u>		
Directors/Managers	<u>See List Attached</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	\$ <u>25.00</u>
TOTAL FEE	\$ <u>625.00</u>

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

2. Address of Premises ▶ 201 South Edwards Boulevard 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 room, 1 story, approximately 188,249 sq. ft.

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.** Change of corporate officer 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 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 13 day of March, 2017

C. Glen Fulkerson
(Clerk/Notary Public)
 My commission expires 5/28/24

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

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

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>4-19-2017</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

Renewal Alcohol Beverage License Application

Response to Item C.4 - Premises Description:

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.

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 the officer(s) of the corporation/organization or members/managers 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(s)/members/managers of WAL-MART STORES EAST, LP
(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 WALMART STORE #910
(trade name)

located at 201 S. EDWARDS BOULEVARD, LAKE GENEVA, WI 53147

appoints BARBARA C. GODAN
(name of appointed agent)
715 TENDERFOOT TRAIL, EAGLE, WI 53119
(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? 32 YEARS

Place of residence last year 715 TENDERFOOT TRAIL, EAGLE, WI 53119

For: WAL-MART STORES EAST, LP
(name of corporation/organization/limited liability company)

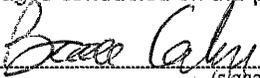
By: _____
(signature of Officer/Member/Manager)

And: _____
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

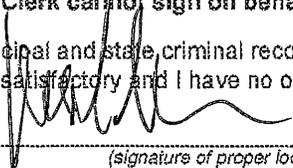
I, BARBARA C. GODAN, hereby accept this appointment as agent for the
(print/type agent's name)

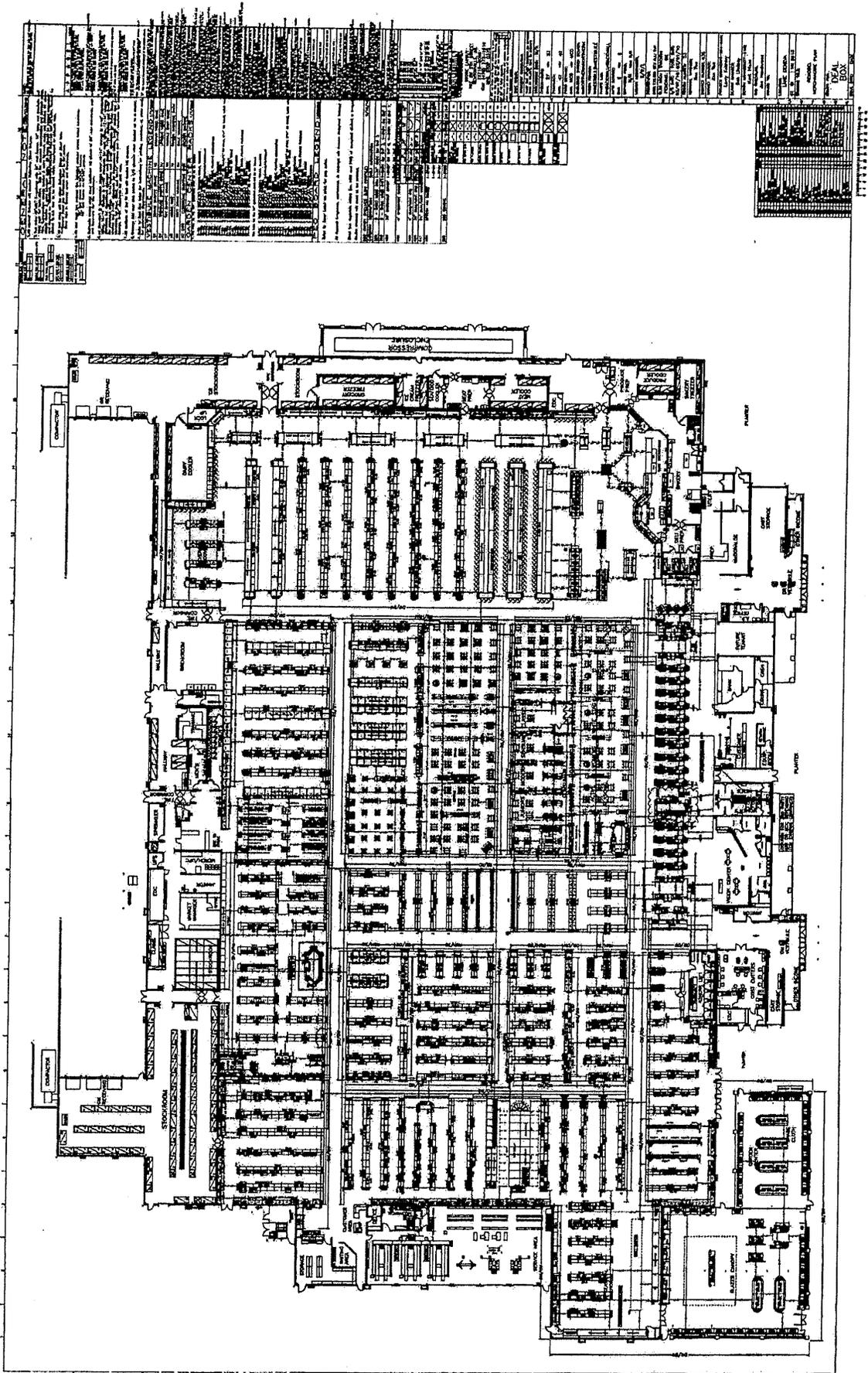
corporation/organization/limited liability company and assume full responsibility for the conduct of all business relative to alcohol beverages conducted on the premises for the corporation/organization/limited liability company.

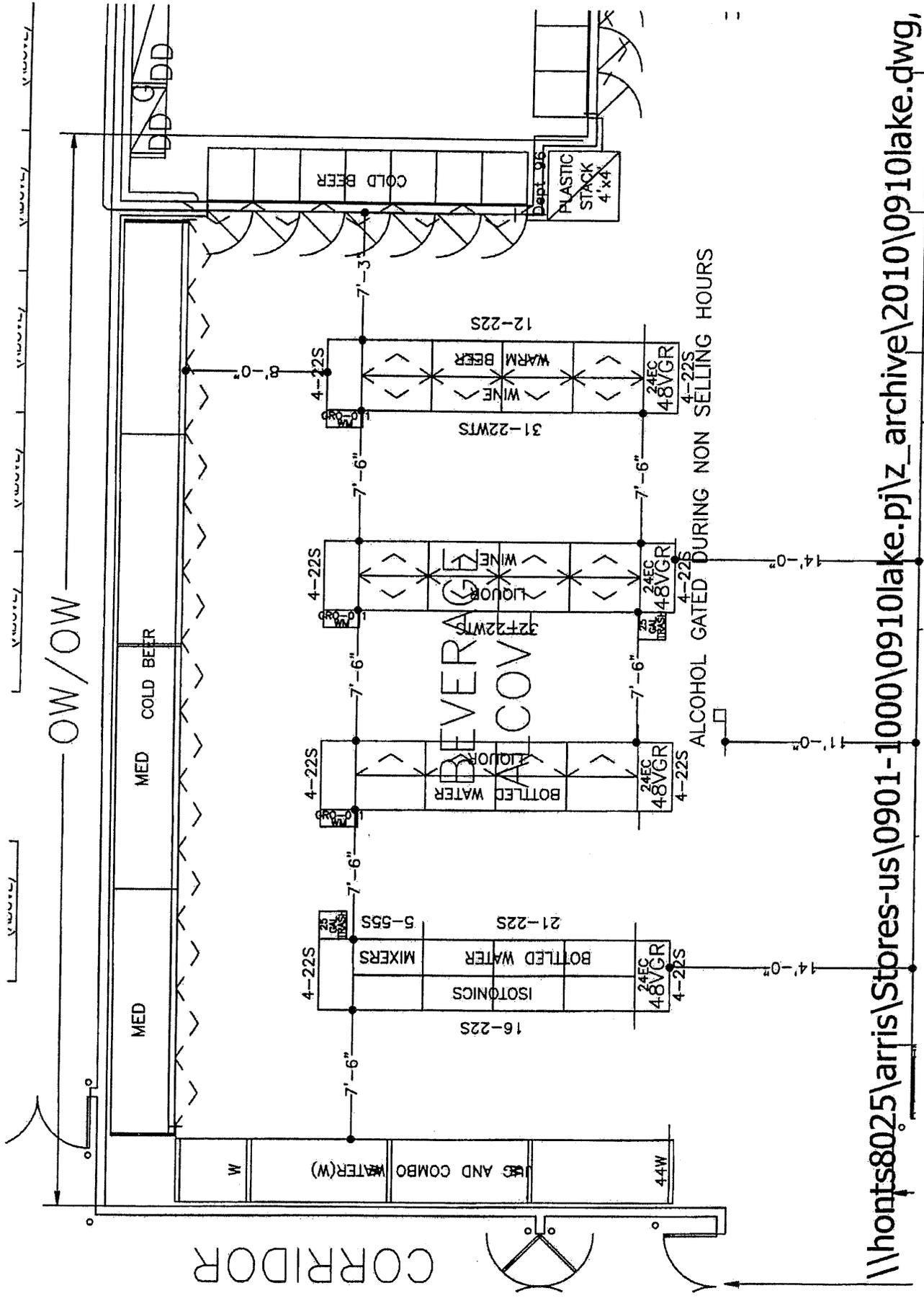
 2-23-17 Agent's age _____
(signature of agent) (date)
715 TENDERFOOT TRAIL, EAGLE, WI 53119 Date of birth _____
(home address of agent)

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 4-24-17 by  Title Police Chief
(date) (signature of proper local official) (town chair, village president, police chief)





\\honts8025\arris\Stores-us\0901-1000\0910lake.pj\z_archive\2010\0910lake.dwg,

RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07/01/2017 ending: 06/30/2018
(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 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>	<u>79 Congress St, Williams Bay, WI</u>	<u>53191</u>
Vice President/Member	_____	_____	_____
Secretary/Member	_____	_____	_____
Treasurer/Member	_____	_____	_____
Agent	<u>John Bernard Bogan</u>	<u>79 Congress St, Williams Bay, WI</u>	<u>53191</u>
Directors/Managers	_____	_____	_____

C. 1. Trade Name Lake Geneva School of Cooking Business Phone Number (262) 248-3933
 2. Address of Premises 727 Geneva 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.) retail area within Geneva Village Shops, kitchen
5. Legal description (omit if street address is given above): Office, area for cooking, 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 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 27th day of April
Stephanie Gunderson (Clerk/Notary Public)
 My commission expires 4/13/18
John Bogan (Officer of Corporation/Member/Manager of Limited Liability Company /Partner/Individual)
John Bogan (Officer of Corporation/Member/Manager of Limited Liability Company /Partner)
 _____ (Additional Partner(s)/Member/Manager of Limited Liability Company if Any)

TO BE COMPLETED BY CLERK		
Date received and filed with municipal clerk <u>5/2/17</u>	Date reported to council/Board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

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>25.00</u>
TOTAL FEE	\$ <u>525.00</u>

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 the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

Town

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

City

The undersigned duly authorized officer(s)/members/managers of Lake Geneva School of Cooking 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 Lake Geneva School of Cooking
(Trade name)

located at 727 Geneva St. Lake Geneva, WI 53147

appoints John Bogan
(name of appointed agent)

79 Congress St Williams Bay, WI 53191
(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?

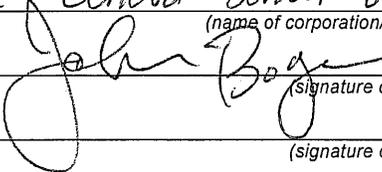
Yes No If so, indicate the corporate name(s)/limited liability company(ies) and municipality(ies).

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? 24 years

Place of residence last year 79 Congress St. Williams Bay, WI 53191

For: Lake Geneva School of Cooking LLC
(name of corporation/organization/limited liability company)

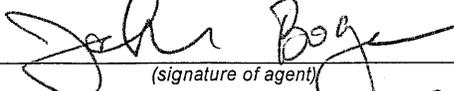
By: 
(signature of Officer/Member/Manager)

And: _____
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, JOHN BOGAN
(print/type agent's name), hereby accept this appointment as agent for the

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.

 4/27/17
(signature of agent) (date)

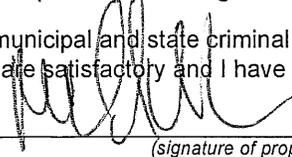
Agent's age _____

79 Congress St Williams Bay, WI 53191
(home address of agent)

Date of birth _____

**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.

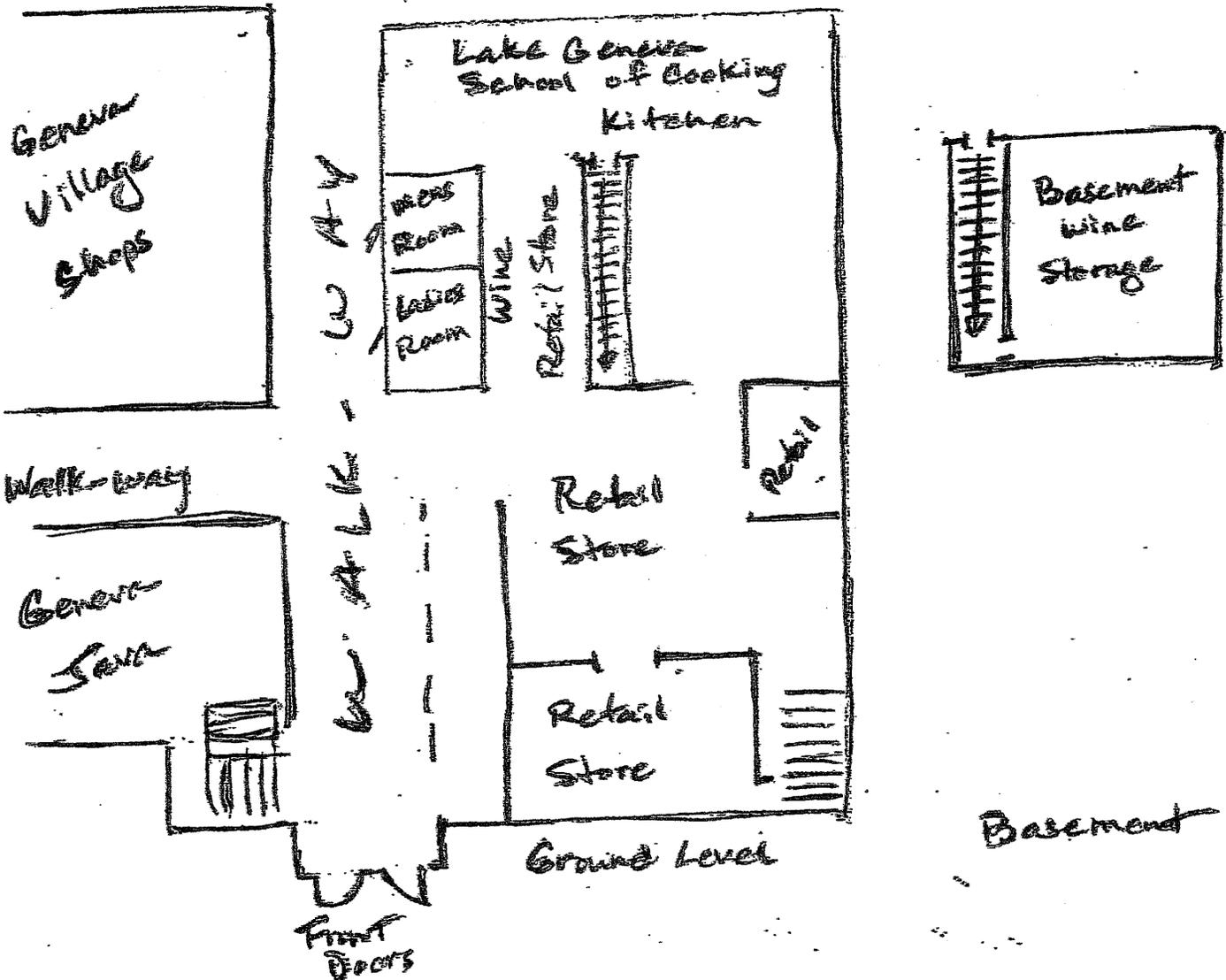
Approved on 5-9-17 by  Title Police Chief
(date) (signature of proper local official) (town chair, village president, police chief)



JOHN BOGAN CEC
CHEF/OWNER

727 Geneva Street
Lake Geneva, Wisconsin 53147
262-248-3933

www.lakegenesaschoolofcooking.com
info@lakegenesaschoolofcooking.com



RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07/01/2017 ending: 06/30/2018
(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
▶ <u>Julie Selby</u>	<u>800 N Bluespruce Cir</u>	<u>Hartland 53029</u>
<u>Curtis Edward Selby</u>	<u>800 N Bluespruce Cir</u>	<u>Hartland 53029</u>

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 Limited Liability Company:

Title	Name (Inc. Middle Name)	Home Address	Post Office & Zip Code
President/Member	<u>Julie Selby</u>	<u>800 N Bluespruce Cir</u>	<u>Hartland 53029</u>
Vice President/Member	<u>Curtis Edward Selby</u>	<u>800 N Bluespruce Cir</u>	<u>Hartland 53029</u>
Secretary/Member	_____	_____	_____
Treasurer/Member	_____	_____	_____
Agent ▶	<u>Julie Selby</u>	_____	_____
Directors/Managers	_____	_____	_____

C. 1. Trade Name ▶ Board & Brush Creative Studios Lake Geneva Business Phone Number 262-409-1639
 2. Address of Premises ▶ 262 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.) 1000 Sq. Ft Studio w/ Craft Tables Beverage

5. Legal description (omit if street address is given above): Stored in October Beer Coolers. Receipts kept under

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

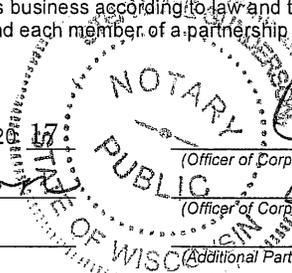
11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? Yes No

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the 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 3 day of May, 2017
Stephanie Gunderson (Clerk/Notary Public)
 My commission expires 4/13/18

Julie Selby (Officer of Corporation/Member/Manager of Limited Liability Company/Partner/Individual)
Curtis Edward Selby (Officer of Corporation/Member/Manager of Limited Liability Company/Partner)
 (Additional Partner(s)/Member/Manager of Limited Liability Company if Any)



TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>5/3/17</u>	Date reported to council/board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

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 the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

Town

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

City

The undersigned duly authorized officer(s)/members/managers of B+B Lake Geneva 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 Board + Brush Creative Studio - Lake Geneva

located at 262 Center St
(trade name)

appoints Julie Selby
(name of appointed agent)

800 N Blue Spruce Cir Hartland WI 53029
(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).
Board + Brush LLC Hartland, WI Class B - Beer + Class C - Wine

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? 34 mos.

Place of residence last year Hartland, WI

For: B+B Lake Geneva LLC
(name of corporation/organization/limited liability company)

By: Julie Selby
(signature of Officer/Member/Manager)

And: [Signature]
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, Julie Selby, 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.

Julie Selby 5/3/17 Agent's age _____
(signature of agent) (date)

800 N Blue Spruce Cir Hartland WI 53029 Date of birth _____
(home address of agent)

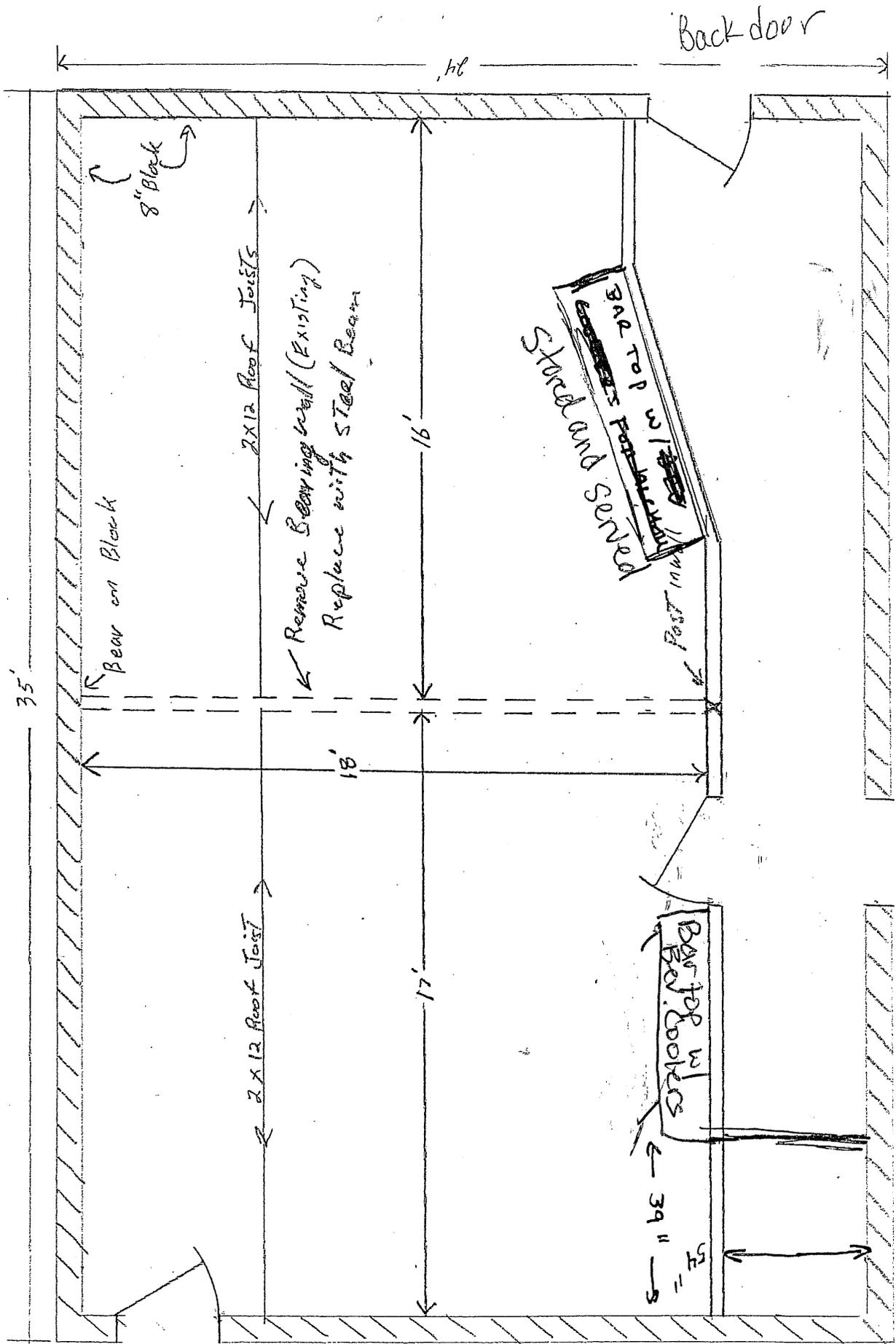
**APPROVAL OF AGENT BY MUNICIPAL AUTHORITY
(Clerk cannot sign on behalf of Municipal Official)**

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 5-2-17 by [Signature] Title Police Chief
(date) (signature of proper local official) (town chair, village president, police chief)

252 Center Street
LAKELAND, Wisconsin

Flat Roof



RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07/01/2017 ending: 06/30/2018
(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 BREAKFAST BUNGALOW LLC
 Address of Corporation/Limited Liability Company (if different from licensed premises) 220 COOK STREET 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>JUSTIN OCHALEK</u>	<u>13058 URANUS RD LAKE GENEVA WI</u>	<u>53147</u>
Vice President/Member			
Secretary/Member			
Treasurer/Member			
Agent	<u>JUSTIN OCHALEK</u>	<u>13058 URANUS RD LAKE GENEVA WI</u>	<u>53147</u>
Directors/Managers	<u>PAUL OCHALEK</u>	<u>13058 URANUS RD LAKE GENEVA WI</u>	<u>53147</u>

C. 1. Trade Name GREAT EGGS Business Phone Number 262-812-2077

2. Address of Premises 220 COOK STREET 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.) FIRST FLOOR OF UNIT 101 AND OUTDOOR SEATS

5. Legal description (omit if street address is given above): Kitchen, dining room, closet in 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

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 OFFICER FROM EMMA SEITZ TO J. OCHALEK 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 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 5th day of May, 20 17

Anthony Moorefield
(Clerk/Notary Public)

My commission expires 4-25-2021

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

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

Justin Ochalek
(Officer of Corporation/Member/Manager of Limited Liability Company if Any)

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>5-5-2017</u>	Date reported to county clerk <u>Notary Public</u>	Date license granted
License number issued	Date license issued <u>State of Wisconsin</u>	Signature of Clerk / Deputy Clerk

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 the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

Town

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

City

The undersigned duly authorized officer(s)/members/managers of BREAKFAST BUNGALOW 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 GREAT EGGS
(trade name)

located at 220 COOK STREET #101

appoints JUSTIN OCHALEK
(name of appointed agent)

N 3058 URANUS RD LAKE GENEVA WI 53147
(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? 27 YEARS

Place of residence last year N 3058 URANUS RD LAKE GENEVA WI 53147

For: BREAKFAST BUNGALOW LLC
(name of corporation/organization/limited liability company)

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

And: [Signature]
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, JUSTIN OCHALEK, 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] 5-5-17 Agent's age _____
(signature of agent) (date)

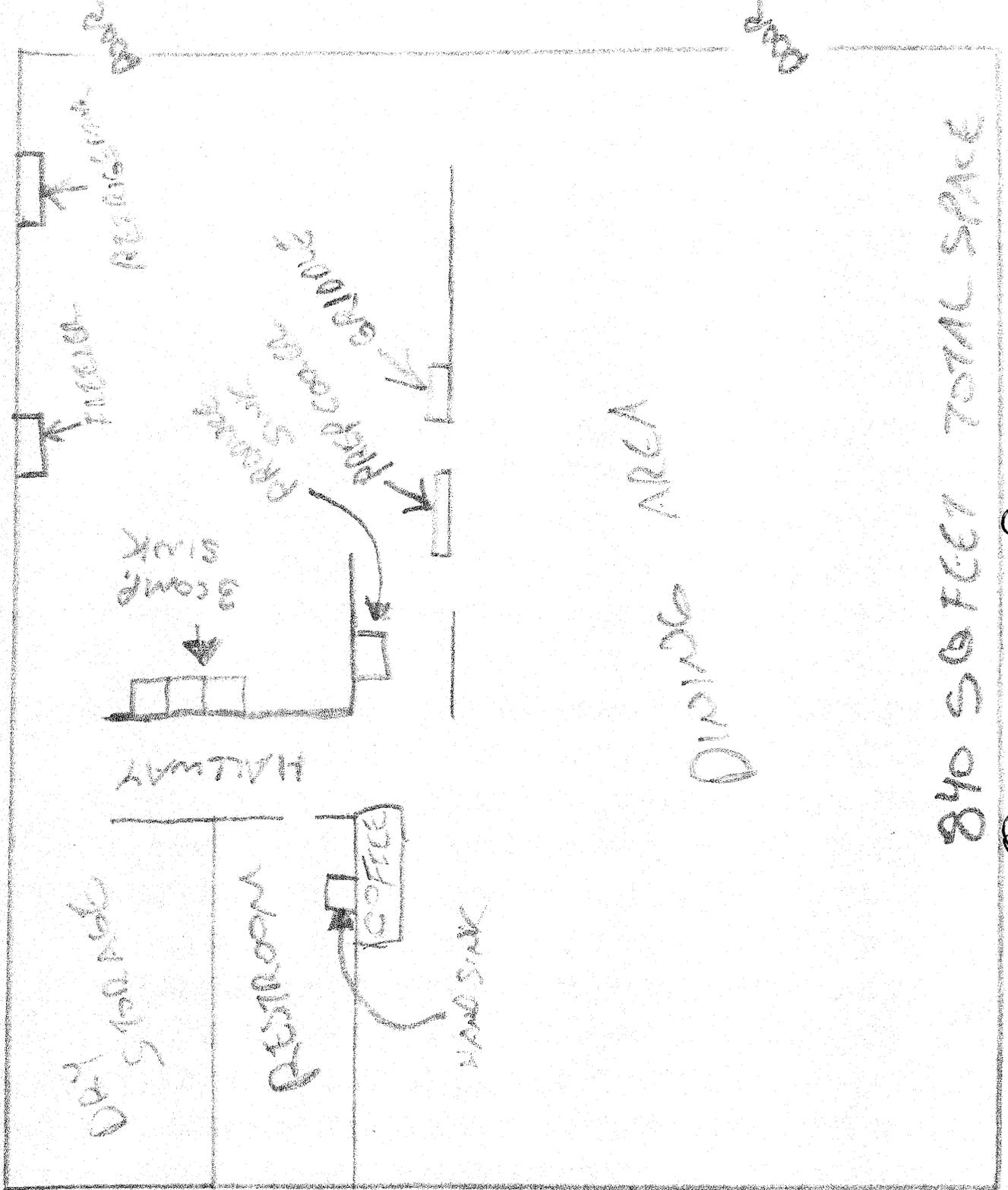
N 3058 URANUS RD LAKE GENEVA WI 53147 Date of birth _____
(home address of agent)

**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 5-12-17 by [Signature] Title Police Chief
(date) (signature of proper local official) (town chair, village president, police chief)

GREAT EGGS LAKE GENEVA



OUTDOOR SEATING

840 SQ FEET TOTAL SPACE

OUTDOOR SEATING

COOK STREET

RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07/01/2017 ending: 06/30/2018
(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) Zhong, Min Ting Home Address 118 S Wells St / 526 S Wells St Post Office & Zip Code Lake Geneva, WI 53147

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company Happy Cafe / Happy Restaurant Inc.

Address of Corporation/Limited Liability Company (if different from licensed premises) 526 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>Yongzhong, Liang</u>	<u>526 S Wells St</u>	<u>Lake Geneva WI 53147</u>
Vice President/Member	<u>Min Ting Zhong</u>	<u>"526 S Wells St"</u>	<u>"Lake Geneva WI 53147"</u>
Secretary/Member			
Treasurer/Member			
Agent	<u>Min Ting Zhong</u>		
Directors/Managers			

C.1. Trade Name Happy Cafe Business Phone Number (608) 795-3382 (762) 795-3382

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 in 10 kid area

5. Legal description (omit if street address is given above): Beer Dining Room Kitchen 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 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 2 day of May, 20 17
Stephanee Sunderson
(Clerk/Notary Public)
 My commission expires 4/13/18

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

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>May 2, 2017</u>	Date reported to council/board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

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 the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

Town

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

City

The undersigned duly authorized officer(s)/members/managers of Happy Cafe
(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 Happy Cafe
(trade name)

located at 526 S Wells St Lake Geneva WI 53147

appoints Min Ting Zhong
(name of appointed agent)

526 Wells St Lake Geneva WI 53147
(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? 13

Place of residence last year 526 Wells St Lake Geneva WI 53147

For: Happy Cafe
(name of corporation/organization/limited liability company)

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

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

ACCEPTANCE BY AGENT

I, Min Ting Zhong
(print/type agent's name), hereby accept this appointment as agent for the 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] (signature of agent) _____ (date) Agent's age _____

526 Wells St Lake Geneva WI 53147 (home address of agent) Date of birth _____

**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 5-9-17 by [Signature] Title Police Chief
(date) (signature of proper local official) (town chair, village president, police chief)

HAPPY cafe

S26/528 Well St. Lake Geneva. WI 53147
(262) 248-8181



RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07/01/2017 ending: 06/30/2018
(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.:		FEIN Number:	
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>	

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name(s) (Last, First and Middle Name) Antonio Cimino Nicolo Home Address 7208 Cornflower Way Spring Grove IL 60081 Post Office & Zip Code IL 60081

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company ▶ Mama Ciminos
 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>Nick Cimino</u>	<u>7208 Cornflower Way, Spring Grove IL 60081</u>	<u>IL 60081</u>
Vice President/Member	_____	_____	_____
Secretary/Member	_____	_____	_____
Treasurer/Member	_____	_____	_____
Agent ▶	<u>Nick Cimino</u>	_____	_____

C. 1. Trade Name ▶ Mama Ciminos Pizzeria Business Phone Number (262) 348-9077

2. Address of Premises ▶ 131 S. Wells St Lake Geneva Post Office & Zip Code ▶ 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.) Sold in dining room / Stored in cooler back room
Filing cabinet

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 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 4 day of May, 20 17
Sabrina M. Wipac
(Clerk/Notary Public)
 My commission expires 7-20-2019

Nick Cimino
(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)

Date received and filed with municipal clerk <u>5-4-2019</u>	Date reported to council/board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

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 the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

Town

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

The undersigned duly authorized officer(s)/members/managers of _____
(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

located at Mama Ciminos Pizzeria
(trade name)
131 S. Wells St Lake Geneva WI 53147

appoints Nicolo Cimino
(name of appointed agent)
7208 Cornflower Way Spring Grove IL 60081
(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? _____

Place of residence last year 131 S. Wells St. Lake Geneva

For: Mama Ciminos
(name of corporation/organization/limited liability company)

By: Nicolo Cimino
(signature of Officer/Member/Manager)

And: _____
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, Nicolo Cimino
(print/type agent's name), hereby accept this appointment as agent for the

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.

Nicolo Cimino 5-4-2017 Agent's age _____
(signature of agent) (date)
Date of birth _____
(home address of agent)

**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 5-12-17 by [Signature] Title Police Chief
(date) (signature of proper local official) (town chair, village president, police chief)

Front Entrance

Front Desk

Table

cooler

Pick up

Desk

Freezer

Stove

Sink

Table

Table

Pick up

Freezer

Prep Table

Prep Table

Table

Shelf

Desk

Bathroom

ough cooler

Xtra Freezer

Salad cooler

Back Room

Soda Fountain

Beer cooler

Door

Countertop

Runner

Table

Wall

Dish Room

Table

Table

RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07/01/2017 ending: 06/30/2018
(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
MARSAJA'S PIZZA INC 7724 N. MORNING MEADOW EVANSVILLE WI 53536

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company MARSAJA'S PIZZA 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>Miguel BARCONA</u>	<u>7724 N. MORNING MEADOW</u>	<u>53536</u>
Vice President/Member			
Secretary/Member			
Treasurer/Member			
Agent	<u>Miguel BARCONA</u>		
Directors/Managers			

C. 1. Trade Name Marsaja's Pizza Business Phone Number _____
 2. Address of Premises 820 Williams 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.) LIQUOR KEPT IN COOLING IN KITCHEN SERVED IN DINING ROOM OFFICE
5. Legal description (omit if street address is given above): KITCHEN SERVED IN DINING ROOM 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 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 5 day of May, 20 17.
Stephanie Gunderson (Clerk/Notary Public)
 My commission expires 4/13/18

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

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>5/5/17</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:	
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-</u>

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 the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

Town

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

City

The undersigned duly authorized officer(s)/members/managers of MARSALA'S PIZZA INC.
(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 MARSALA'S PIZZA
(trade name)

located at 820 WILLIAMS LAKE GENEVA WI 53147

appoints MIGUEL BARLOW
(name of appointed agent)

7728 N. MORNING MEADOW EVANSVILLE WI 53536
(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? 26 yrs

Place of residence last year 7728 N. MORNING MEADOW EVANSVILLE WI 53536

For: MARSALA'S PIZZA INC.
(name of corporation/organization/limited liability company)

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

And: _____
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, MIGUEL BARLOW
(print/type agent's name), hereby accept this appointment as agent for the

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] 5-5-17
(signature of agent) (date)

Agent's age 6

7728 N. MORNING MEADOW EVANSVILLE WI
(home address of agent)

Date of birth _____

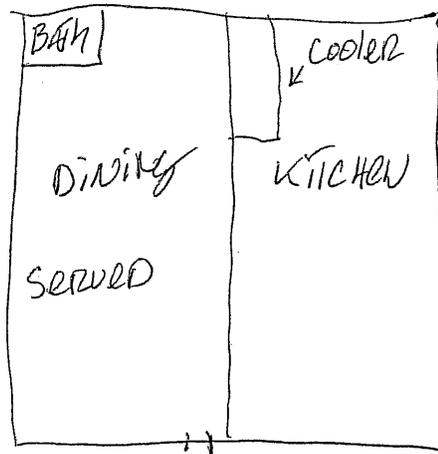
**APPROVAL OF AGENT BY MUNICIPAL AUTHORITY
(Clerk cannot sign on behalf of Municipal Official)**

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 5-12-17 by [Signature] Title Police Chief
(date) (signature of proper local official) (town chair, village president, police chief)

820 WILLIAM'S ST

1500 SQ. FT.



RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07/01/2017 ending: 06/30/2018
(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) Volanda Zavalita Home Address w1728 State Rd 11 Burlington, WI 53105 Post Office & Zip Code 53105

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company Martin's Olympic Restaurant 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	<u>Volanda Zavalita</u>	<u>w1728 State Rd 11</u>	<u>Burlington WI 53105</u>
Vice President/Member	_____	_____	_____
Secretary/Member	_____	_____	_____
Treasurer/Member	_____	_____	_____
Agent	<u>Volanda Zavalita</u>	_____	_____
Directors/Managers	_____	_____	_____

C. 1. Trade Name Olympic Restaurant Business Phone Number (262) 248-6541
 2. Address of Premises 748 W. Main 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.) Storage in locked room in basement of each shift
- Legal description (omit if street address is given above): Restaurant back cooler by kitchen door in
- 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. Different state 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 28 day of April, 2017
Stephanie Gundlach (Clerk/Notary Public)
Volanda Zavalita (Officer of Corporation/Member/Manager of Limited Liability Company /Partner/Individual)
 My commission expires 4/13/18
 _____ (Officer of Corporation/Member/Manager of Limited Liability Company /Partner)
 _____ (Additional Partner(s)/Member/Manager of Limited Liability Company if Any)

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>4-28-2017</u>	Date reported to council/board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

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 the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

Town

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

City

The undersigned duly authorized officer(s)/members/managers of Martins Olympic Restaurant 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

Olympic Restaurant
(trade name)

located at 749 W. Main St Lake Geneva WI 53147

appoints Yolanda Zavaleta Zavaleta
(name of appointed agent)

W 1728 State Rd 11 Burlington WI 53105
(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? 28 years

Place of residence last year Same as above

For: Martins Olympic Restaurant LLC
(name of corporation/organization/limited liability company)

By: Yolanda Zavaleta
(signature of Officer/Member/Manager)

And: _____
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, Yolanda Zavaleta, 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.

Yolanda Zavaleta 4-27-2017 Agent's age --
(signature of agent) (date)

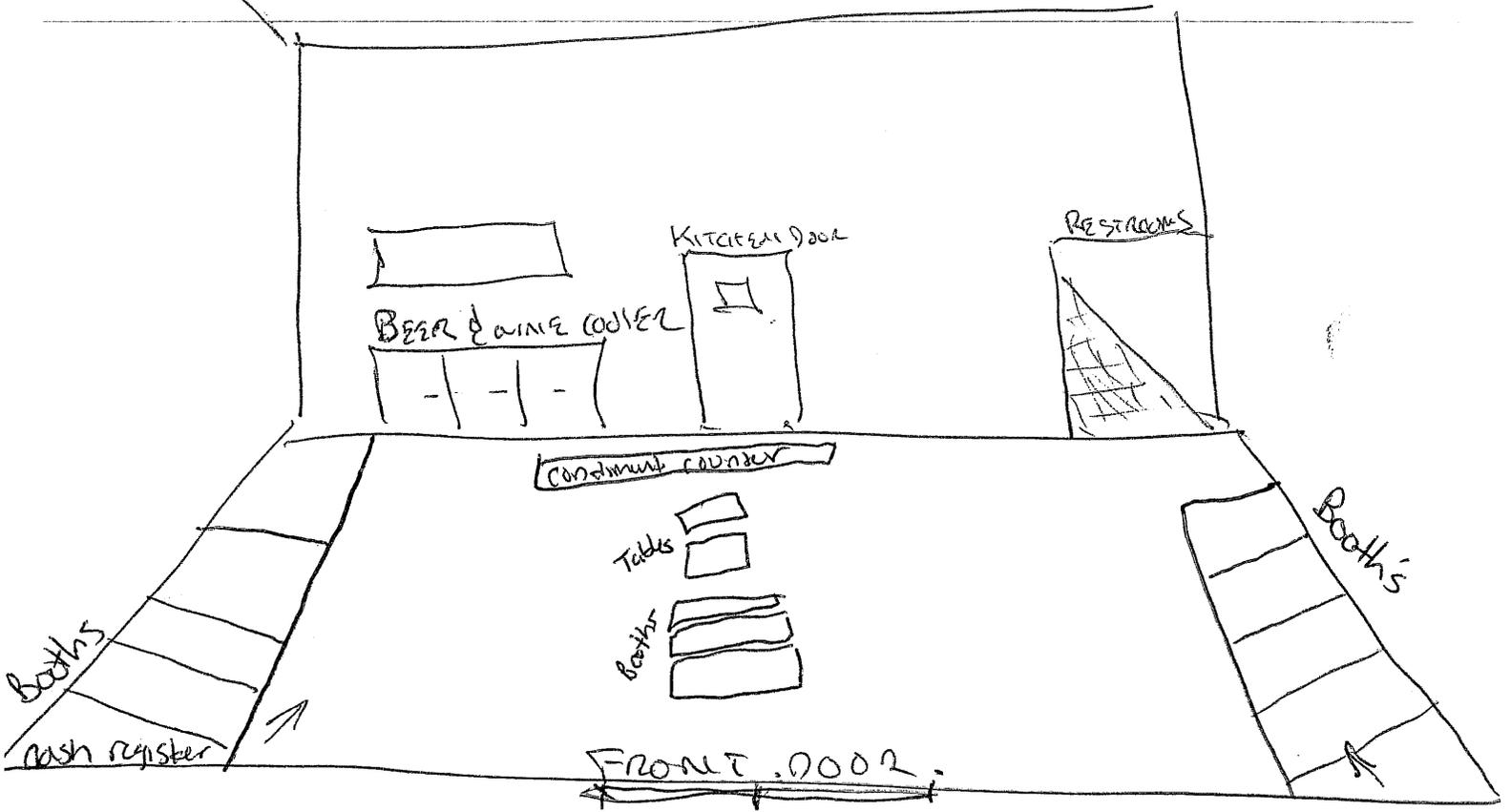
W 1728 State Rd 11 Burlington WI Date of birth: _____
(home address of agent)

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

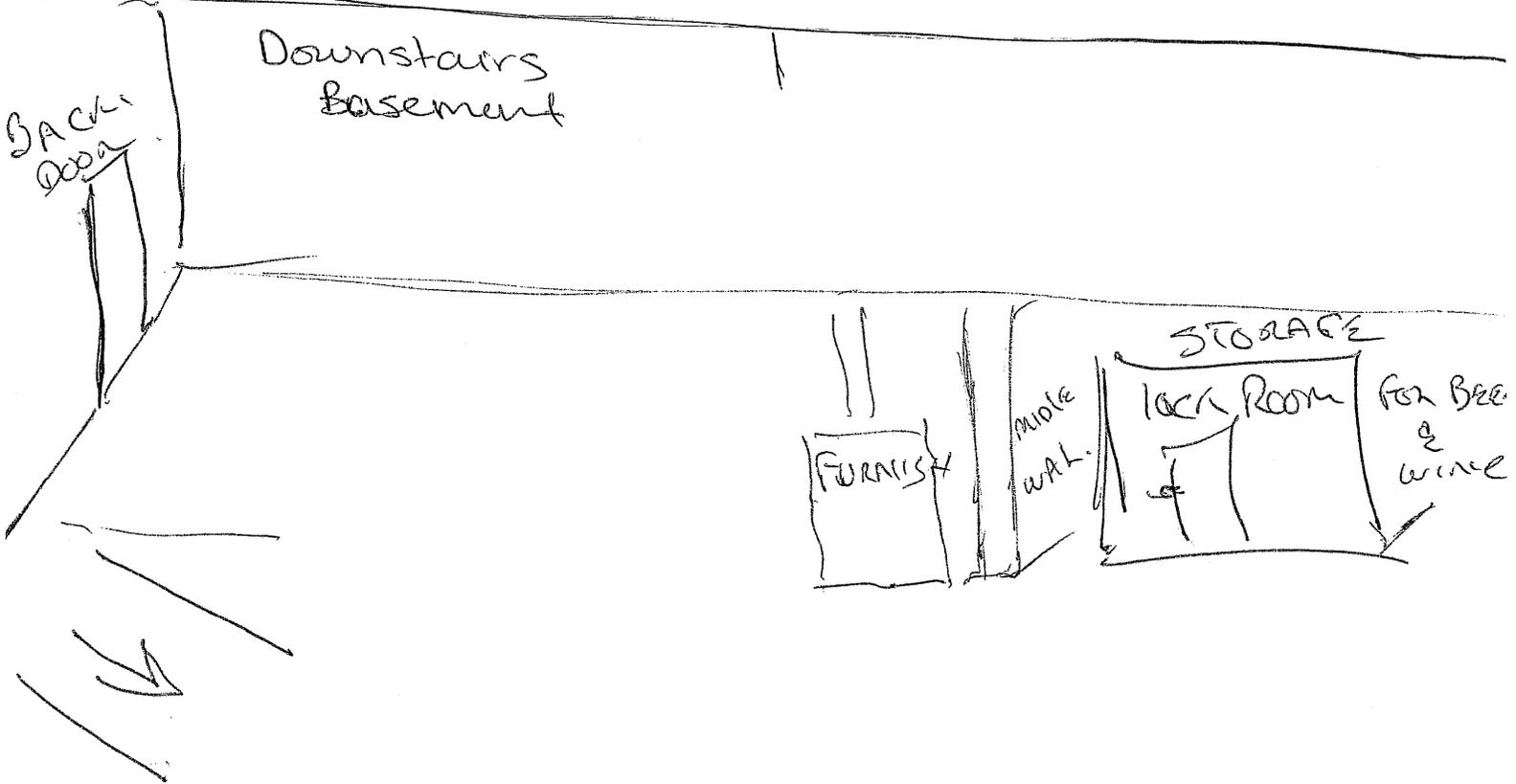
I hereby certify that I have checked municipal and state criminal records. To the best of my knowledge, with the available information, the character, record and reputation are satisfactory and I have no objection to the agent appointed.

Approved on 5-2-17 by [Signature] Title Police Chief
(date) (signature of proper local official) (town chair, village president, police chief)

Upstairs Dining room



Downstairs Basement



RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07 01 2017 ending: 06 30 2018
(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 The Noodle Shop, Co-Colorado, Inc.
 Address of Corporation/Limited Liability Company (if different from licensed premises) 520 Zeng St, Ste D, Broomfield CO
 All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company: 80021

Title	Name (Inc. Middle Name)	Home Address	Post Office & Zip Code
President/Member	<u>Paul Astrasen</u>	<u>White Aider Littleton CO</u>	<u>80127</u>
Vice President/Member	<u>Paul Astrasen</u>	<u>same as above</u>	
Secretary/Member	<u>Dana J. Boennighausen</u>	<u>2380 95th St, Boulder CO</u>	<u>80301</u>
Treasurer/Member	<u>n/a</u>		
Agent	<u>Michael James Potenger</u>	<u>2954 S. 92nd St. #11, West Allis, WI</u>	<u>53227</u>
Directors/Managers	<u>Paul Astrasen</u>	<u>same as above</u>	

C. 1. Trade Name Noodles + Company Business Phone Number 262-248-3644
 2. Address of Premises 351 Peller Rd Post Office & Zip Code Walworth 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.) 2600 sq ft restaurant w/ 510 sq ft outdoor 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 see attached 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. Dana Boennighausen has a new 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

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 25th day of April, 2018

Jennifer McVay
 Notary Public
 State of Colorado
 Notary ID 20064024472
 My Commission Expires June 23, 2018

My commission expires April 23, 2018

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>5/4/17</u>	Date reported to council/board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk



The Noodle Shop, Co. – Colorado, Inc., d/b/a Noodles & Company (the “Company”)
Address of Premise 351 Peller Road, Lake Geneva, WI 53147

ATTACHMENT TO ORIGINAL ALCOHOL BEVERAGE LICENSE APPLICATION

QUESTION 10 - PREMISES DESCRIPTION

The premises is a one story 2600 square foot restaurant with a kitchen that is open to the dining room where customers order at the counter. The beer and wine stock will be store in a security cage in the back of the restaurant. The premises also has a 500 square foot outdoor patio at the back of the restaurant that has a railing around the entire patio with a gate that is intended primarily for egress.

NOODLES, SALADS & SANDWICHES *from* **AROUND THE WORLD**

520 Zang Street | Broomfield, Colorado 80021 | 720.214.1900 | noodles.com

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 must first incorporate liquor must appoint an agent. The following questions must be answered by the agent. The appointment must be signed by the officer(s) of the corporation/organization or members/managers 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 [X] City

The undersigned duly authorized officer(s)/members/managers of THE NOODLE SHOP CO - COLORADO 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 NOODLES AND COMPANY (trade name)

located at 351 PELLER RD

appoints MICHAEL PITTENGER (name of appointed agent)

1155 S WELLS ST #4 LAKE GENEVA WI 53147 (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 [X] 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? [X] Yes [] No

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

Place of residence last year 2954 S 92ND ST #111 WEST ALLIS WI 53227

For: THE NOODLE SHOP CO - WISCONSIN INC (name of corporation/organization/limited liability company)

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

And: [Signature] (signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, MICHAEL PITTENGER (print/type agent's name), hereby accept this appointment as agent for the

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] (signature of agent) 5-5-17 (date)

Agent's age

1155 S WELLS ST #4 LAKE GENEVA WI 53147 (home address of agent)

Date of birth

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 5-12-17 (date) by [Signature] (signature of proper local official)

Title Chief of Police (town chair, village president, police chief)

GENERAL NOTES

1. GO TO REFER TO MILLWORK SHOP DRAWINGS FOR SPECIFIC NEEDS AND DETAILS.
2. CHAIR RIBS TABLES TO WALL.
3. CHAIR RIBS AND BASE TO BE INSTALLED AFTER BOOTING FOR TIGHTEST FIT POSSIBLE.
4. EQUIPMENT AND TABLE DIMENSIONS TO BE COORDINATED WITH KITCHEN EQUIPMENT DIMENSIONS AND TABLE DIMENSIONS TO BE COORDINATED WITH KITCHEN EQUIPMENT DIMENSIONS.
5. COME BRILL STUCCO AND BOLT DOWN TABLES IF BASE ON BRASS U.A.O.
6. CENTERLINE OF STOOLS TO BE LOCATED 1/2" FROM FACE OF TABLE EDGE. IF BASE STOOLS 1/4" APART, O.C.
7. TABLES WITH SINGLE BASE TO HAVE BASE MOUNTED AT THE CENTER POINT.
8. REFER TO PLAN FOR TABLE BASE DIMENSIONS FOR TABLES WITH MORE THAN ONE BASE.
9. STOOL BASE TUBE COVERS SHALL BE DRILLED AND TAPPED WITH SET SCREW INSTALLED TO PREVENT CENTER FROM MOVING.

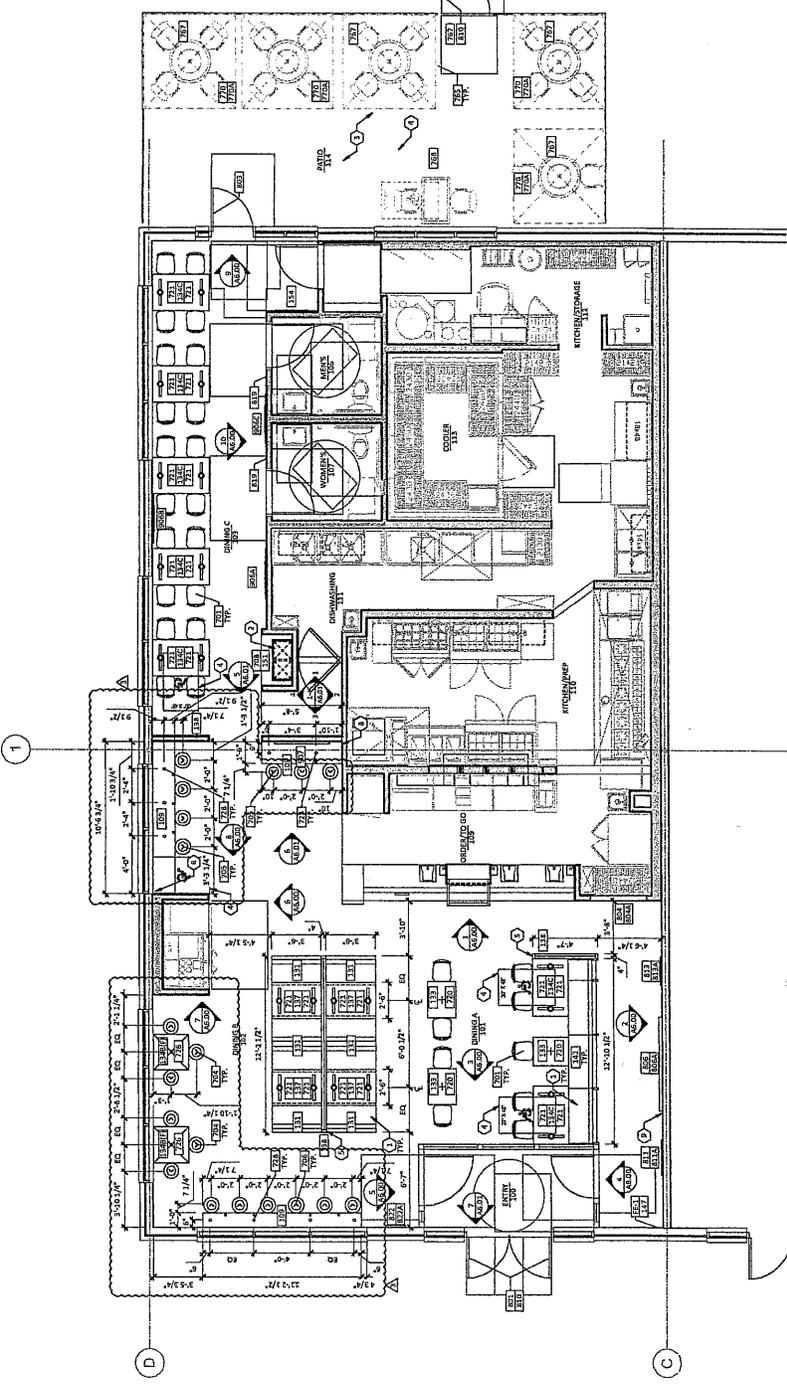
KEY NOTES

1. BROWN AND BANGUETTE LIGHTING TO BE BUILT WITH STORAGE.
2. BROWNE SUE (SUE), BY MILLWORK SUPPLIER, W/ JKS. GO TO INSTALL.
3. USE 2" X 4" WALL BRACKET AND ANCHOR. MIN. 50 FT. LATCHIN. TO USE 2" X 4" WALL BRACKET AND ANCHOR.
4. 2" X 4" MIN. CLEAR TYP. AT ACCESSIBLE SEATING.
5. G.C. TO COORDINATE SUPPORT CONNECTIONS AT SLAB WITH MILLWORK SHOP DRAWINGS PRIOR TO STARTING CONSTRUCTION.
6. NOT USED.
7. NOT USED.
8. WALL CLEAR SUPPORT. GO TO COORDINATE WITH MILLWORK FOR INSTALLATION.
9. G.C. TO VERIFY THESE ARE AS SHOWN. USE MILLWORK. VERIFY KITCHENS, FRIGERS, ETC. ON THE WALL TO INTERFERE WITH THE WALL HUNG MENU BOARD.

ART SCHEDULE

NO.	QTY	SIZE	DESCRIPTION
806A	1	47" X 41"	BLACK PHOTO WITH FRAME
806B	1	47" X 41"	BLACK PHOTO WITH FRAME
806C	0	47" X 41"	BLACK PHOTO WITH FRAME
806D	0	47" X 41"	BLACK PHOTO WITH FRAME
806E	0	47" X 41"	BLACK PHOTO WITH FRAME
806F	0	47" X 41"	BLACK PHOTO WITH FRAME
807	1	39" X 48 1/2" W	YIN-YANG PRINT
808	0	CUSTOM	WALL MURAL

NOTES:
 1. ARTWORK SHOULD BE MOUNTED 4" TO CENTER.
 2. ARTWORK SHOULD BE MOUNTED TO CENTER.
 3. ARTWORK SHOULD BE MOUNTED TO CENTER.
 4. ARTWORK SHOULD BE MOUNTED TO CENTER.
 5. ARTWORK SHOULD BE MOUNTED TO CENTER.
 6. ARTWORK SHOULD BE MOUNTED TO CENTER.
 7. ARTWORK SHOULD BE MOUNTED TO CENTER.
 8. ARTWORK SHOULD BE MOUNTED TO CENTER.
 9. ARTWORK SHOULD BE MOUNTED TO CENTER.
 10. ARTWORK SHOULD BE MOUNTED TO CENTER.



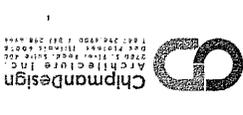
FURNITURE PLAN
 1/8" = 1'-0"

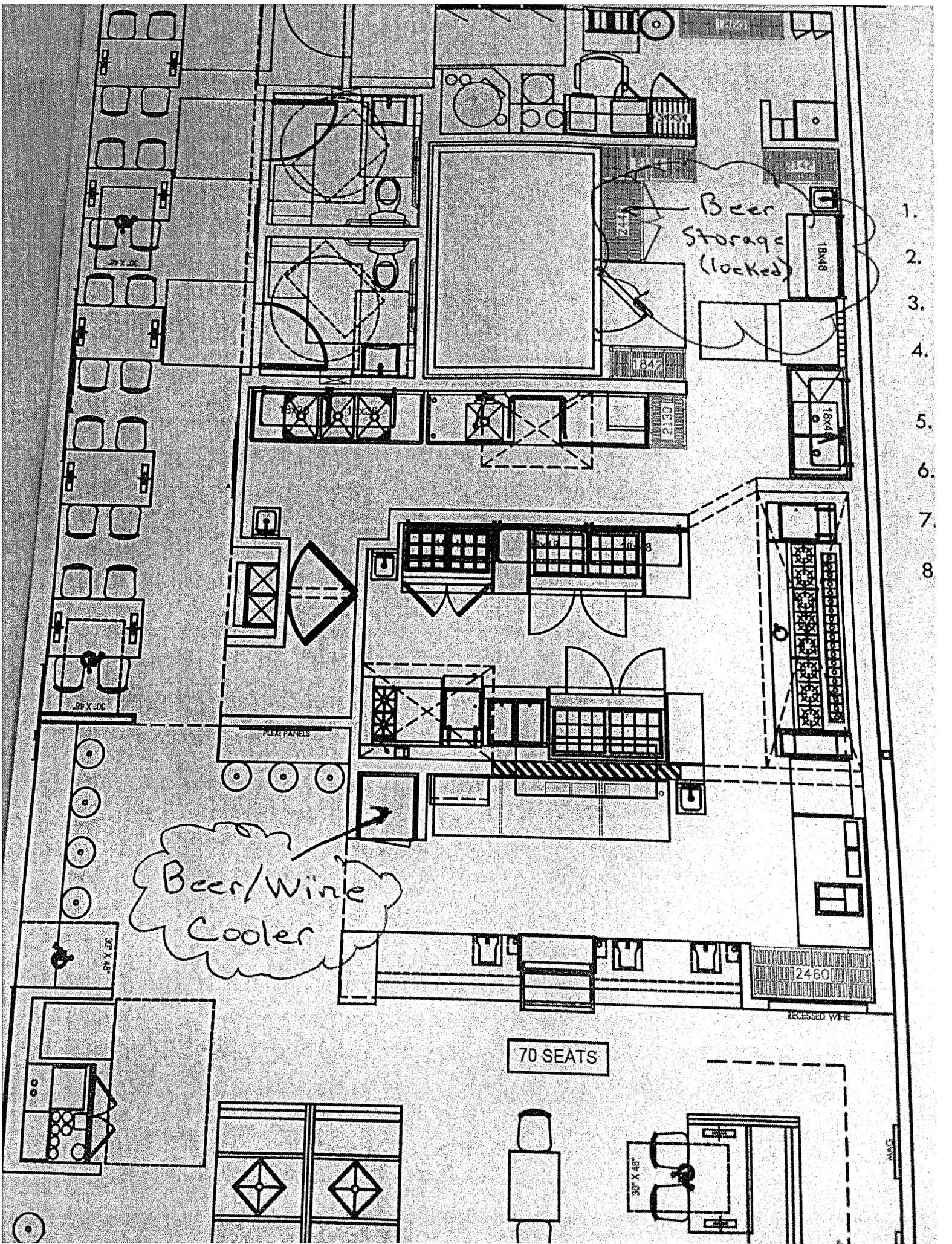


FURNITURE PLAN & NOTES

PROJECT NUMBER: 15-0016
 NODDLES & CO.
 351 PELTER ROAD
 LAKE GENEVA, WI 53147
 FOR: NODDLES & COMPANY (#243)
 520 ZANG ST. STE D, BROOMFIELD, CO 80021

DATE: 07/21/2016
 DRAWN BY: [Name]
 CHECKED BY: [Name]
 PROJECT: [Name]





Beer Storage (locked)

Beer/Wine Cooler

70 SEATS

RECESSED WIRE

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.

MASS

RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07/01/2017 ending: 06/30/2018
(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 PH Hospitality Group, LLC
 Address of Corporation/Limited Liability Company (if different from licensed premises) 2120 Pewaukee Rd, #200, Waukesha 53188
 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 Mark Louis Dillon 34737 Elm Street, Oconomowoc, WI 53066
 Vice President/Member _____
 Secretary/Member _____
 Treasurer/Member _____
 Agent Kate Rath 424 James Street, Burlington 53104
 Directors/Managers _____

C. 1. Trade Name Pizza Hut Business Phone Number 262-248-9221
 2. Address of Premises 801 Williams 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.) One story restaurant: Beer and Wine sold in dining room, stored at server station & cooler in kitchen
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 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 4th day of May, 20 17

(Clerk/Notary Public)
 My commission expires _____

PH Hospitality Group, LLC

(Officer of Corporation/Member/Manager of Limited Liability Company /Partner/Individual)
 By Mark Dillon, President

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

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

TO BE COMPLETED BY CLERK		
Date received and filed with municipal clerk <u>5-5-2017</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:	
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)	\$ <u>N/A</u>
<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>

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 the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

Town

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

City

The undersigned duly authorized officer(s)/members/managers of PH Hospitality Group, 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
(trade name)

located at 801 Williams Street, Lake Geneva

appoints Kate Frances Rath
(name of appointed agent)

424 James Street, Burlington, WI 53104
(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?

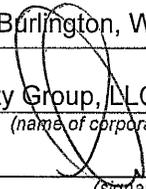
Yes No If so, indicate the corporate name(s)/limited liability company(ies) and municipality(ies).

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? 52 years

Place of residence last year 424 James Street, Burlington, WI 53104

For: PH Hospitality Group, LLC
(name of corporation/organization/limited liability company)

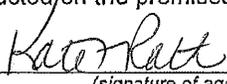
By: 
(signature of Officer/Member/Manager)

And: By Mark Dillon, President
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, Kate Frances Rath, hereby accept this appointment as agent for the
(print/type agent's name)

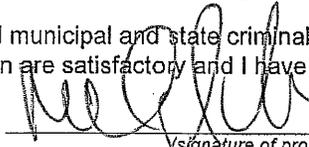
corporation/organization/limited liability company and assume full responsibility for the conduct of all business relative to alcohol beverages conducted on the premises for the corporation/organization/limited liability company.

 4/24/17 Agent's age _____
(signature of agent) *(date)*

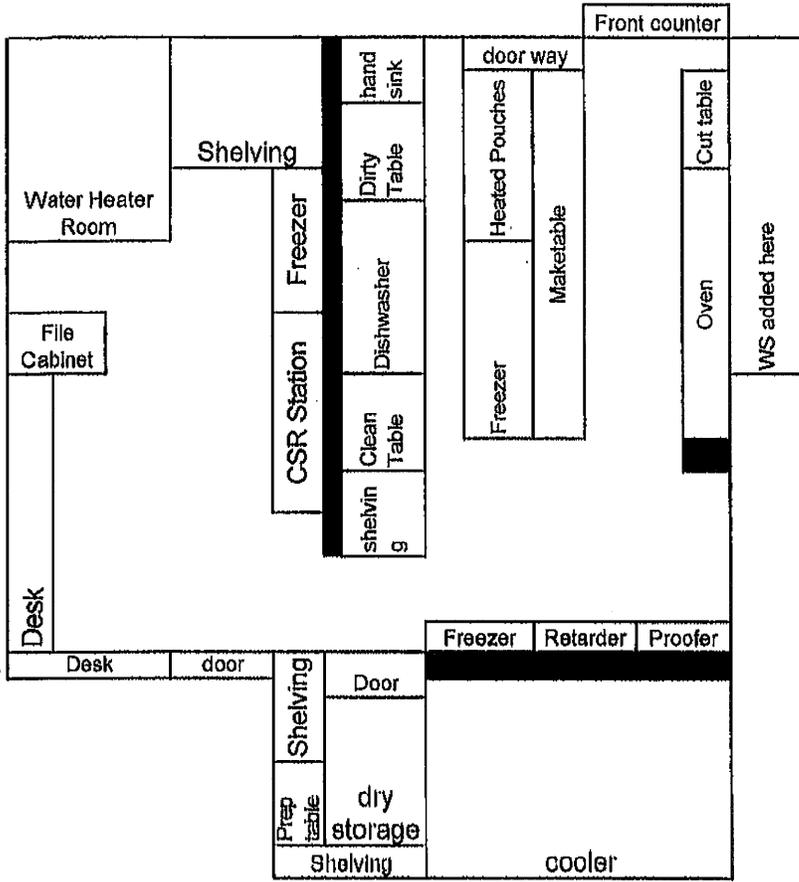
424 James Street, Burlington, WI 53104 Date of birth _____
(home address of agent)

**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 5-9-17 by  Title Police Chief
(date) *(signature of proper local official)* *(town chair, village president, police chief)*

Plans are not to scale



RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07/01/2017 ending: 06/30/2018
(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 ▶ Harbor Shares Hotel Ringgold Ave (LaQuinn's East)
 Address of Corporation/Limited Liability Company (if different from licensed premises) ▶ 300 Lakeside Dr.
 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 Weaver Jr</u>	<u>2444 Polking, Port Jervis, Elgin IL 60124</u>	
Vice President/Member	<u>Kevin Elbert</u>	<u>829 Hammarichmidt, Lombard IL 60140</u>	
Secretary/Member	<u>George Walsh</u>	<u>225 Ashbury, Park Ridge IL 60068</u>	
Treasurer/Member	<u>Kevin O'Connell</u>	<u>3123 W Windsor Dr, Arlington Heights IL 60004</u>	
Agent ▶	<u>William Strangeway</u>	<u>5407 W Princeton Pkwy, Franklin WI 53132</u>	

C. 1. Trade Name ▶ Harbor Shares on Lake Geneva Business Phone Number 262.242.9181
 2. Address of Premises ▶ 300 Lakeside 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, bar area, pool, restaurant
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 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 11 day of April, 20 17

William E. Strangeway
 (Officer of Corporation/Member/Manager of Limited Liability Company /Partner/Individual)

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

My commission expires 11/11/18

JORDAN WEBER
 NOTARY PUBLIC
 STATE OF WISCONSIN

TO BE COMPLETED BY CLERK		
Date received and filed with municipal clerk <u>4-19-17</u>	Date reported to council/board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

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 the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

Town

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

City

The undersigned duly authorized officer(s)/members/managers of Harbor Shores Hotel Agent Inc
(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

Harbor Shores on Lake Geneva
(trade name)

located at 300 Wrigley Dr

appoints William Strangeway
(name of appointed agent)

5407 W Princeton Pines Franklin WI 53132
(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? 3 1/2 yrs

Place of residence last year 5407 W Princeton Pines Franklin WI 53132

For: Harbor Shores Hotel Agent Inc
(name of corporation/organization/limited liability company)

By: Charmie Carstensen
(signature of Officer/Member/Manager)

And: [Signature]
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, William Strangeway, 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.

William E. Strangeway 2/24/17 Agent's age _____
(signature of agent) (date)

5407 W. PRINCETON PINES CT. FRANKLIN, WI 53132 Date of birth _____
(home address of agent)

**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.

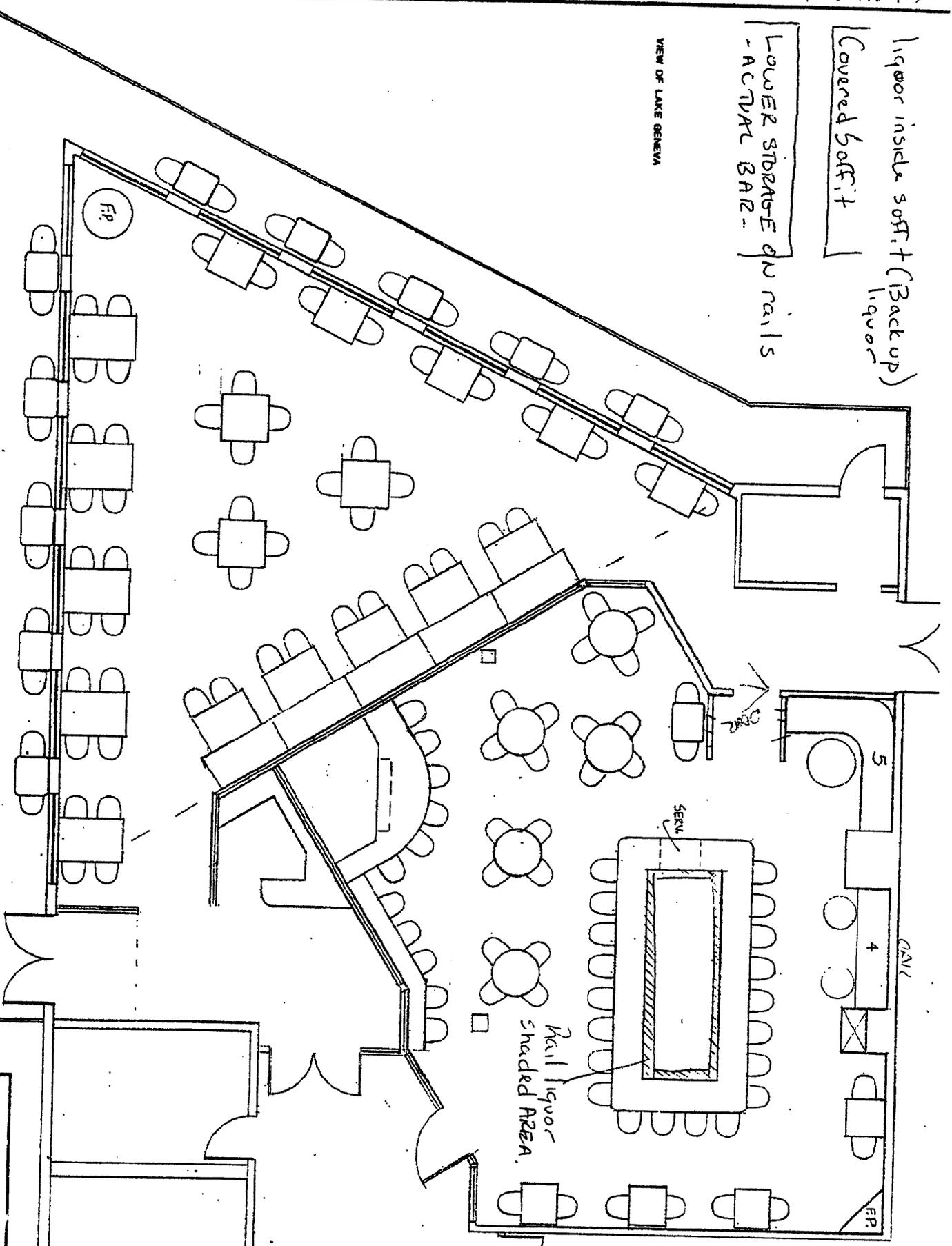
Approved on 4-24-17 by [Signature] Title Police Chief
(date) (signature of proper local official) (town chair, village president, police chief)

62 (D)
70 (B)

liquor inside soft + (Backup)
liquor
Covered Soft +

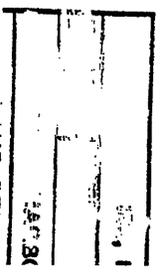
LOWER STRAP-E ON nails
- ACTUAL BAR -

VIEW OF LAKE GENEVA



OUTDOOR BEER SERVICING

$$62(D) \\ 70(B) = 152$$

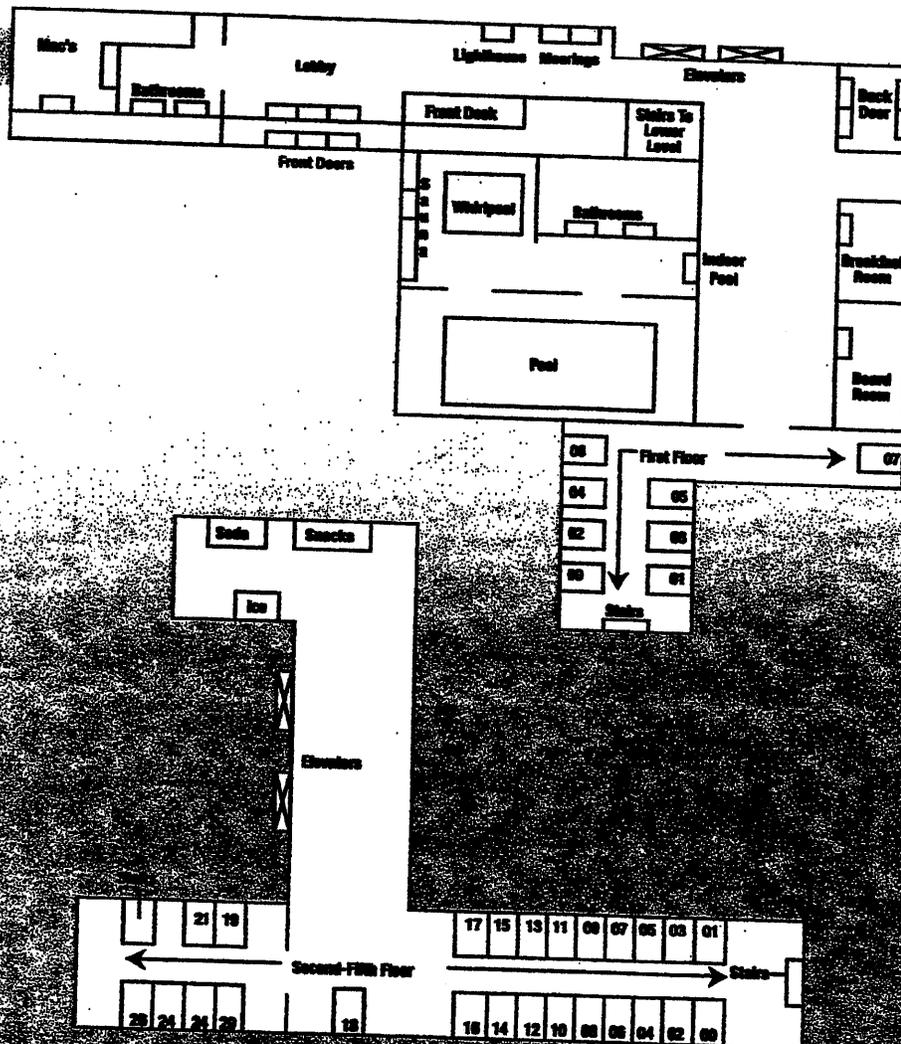


TV Channels

02	WBBM-CBS	30	ESPN	57	CARTOON NETWORK
03	TBS	31	FSN	58	DISNEY
04	WTMJ-NBC	32	TWS	59	AMC
05	WMAQ-NBC	33	TNT	60	TCM
06	WITI-FOX	34	USA	61	TV LAND
07	WLS-ABC	35	FX	62	HALLMARK
08	WDJT-CBS	36	LIFETIME NETWORK	63	JWLTV
09	WGN	37	HOME & GARDEN	64	THE WEATHER CHANNEL
10	WMVS-PBS	38	TRAVEL CHANNEL	65	LMN
11	WTTW-PBS	39	HISTORY CHANNEL	66	DISCOVERY HEALTH
12	WISN-ABC	40	TLC	67	FOOD NETWORK
13	WFLD-FOX	41	DISCOVERY CHANNEL	68	VERSUS
15	WPXE-PAX	42	A&E	69	NGC
16	WMVT-PBS	43	ANIMAL PLANET	70	BRAVO
17	ABC FAMILY	44	CNN	71	STYLE
18	WVTV	45	CNN HEADLINE NEWS	72	EI
19	WJJA-IND	46	MSNBC	73	OXYGEN
20	EDUCATIONAL ACCESS	47	CNBC	74	WE
21	UNIVISION	48	FOX NEWS	75	HSN
22	CHRISTIAN	49	COURT TV	77	BRAVO
23	WVCY	50	VH-1	78	C-SPAN
24	WCGV-UPN	51	SPIKE TV	95	LEASED
25	LOCAL GOVERNMENT ACCESS	52	MTV	96	LOCAL ACCESS
26	QVC	53	GAC	99	TV GUIDE
27	TELEMUNDO	54	COMEDY CENTRAL		
28	GOLF	55	SCI-FI		
29	ESPN2	56	NICKELODEON		

*Channels are subject to change.
See channel 99 for an up-to-date guide.

Property Layout

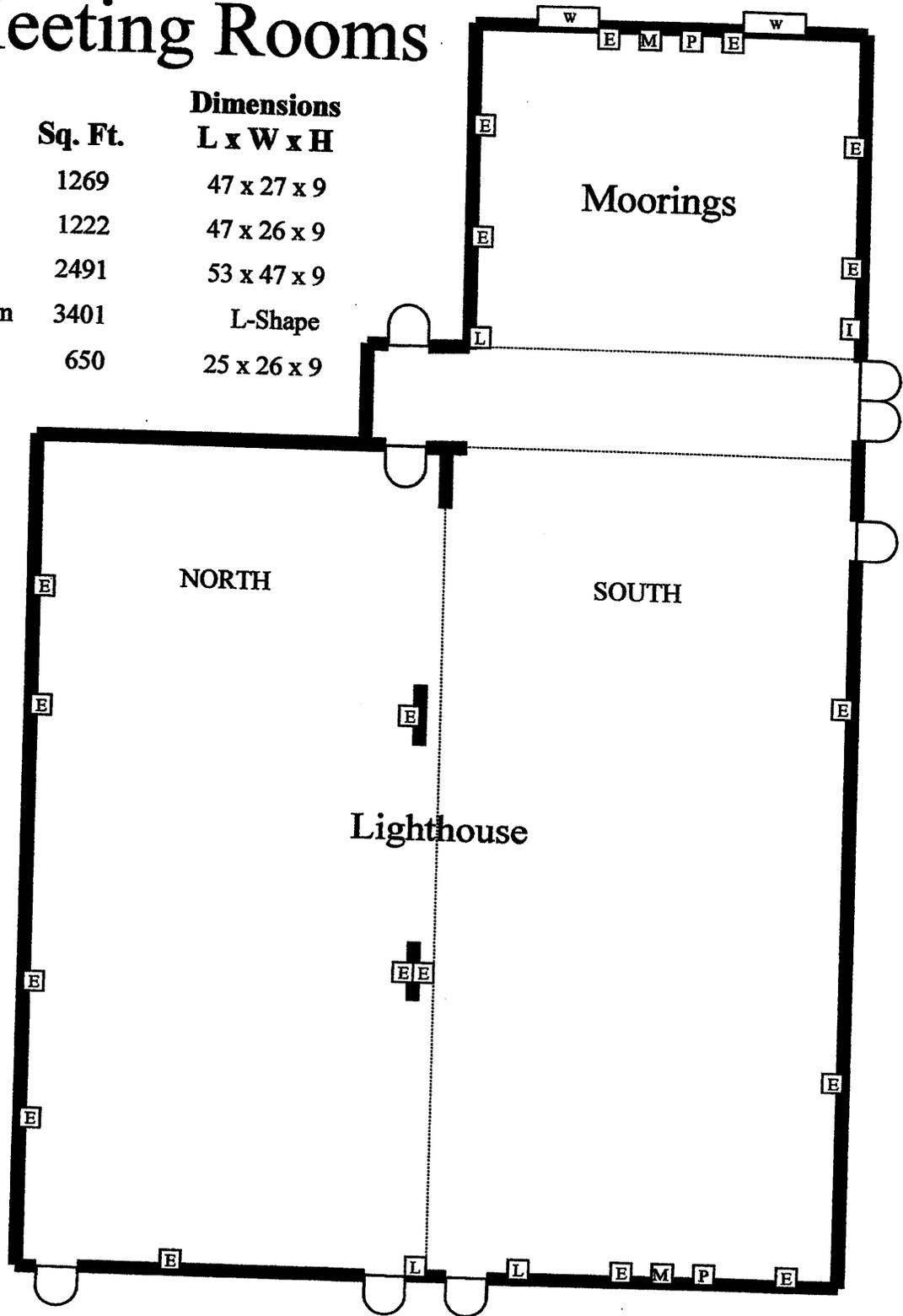


5 Floors
Guest room
beyond



Meeting Rooms

Room Name	Sq. Ft.	Dimensions L x W x H
Lighthouse North	1269	47 x 27 x 9
Lighthouse South	1222	47 x 26 x 9
Lighthouse N & S	2491	53 x 47 x 9
Lighthouse Ballroom	3401	L-Shape
Moorings	650	25 x 26 x 9



E - Electrical Outlet

I - Internet

L - Light Switch

M - Microphone

P - Phone Jack

W - Window

Meeting Room Capacities

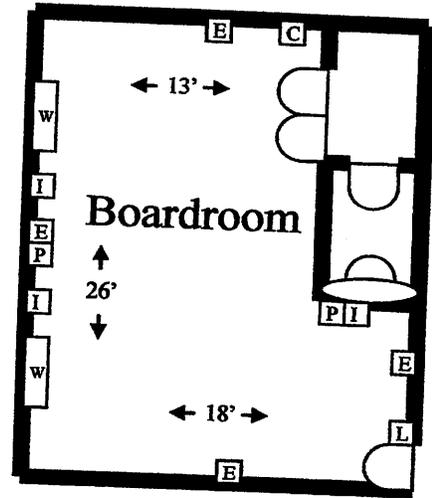
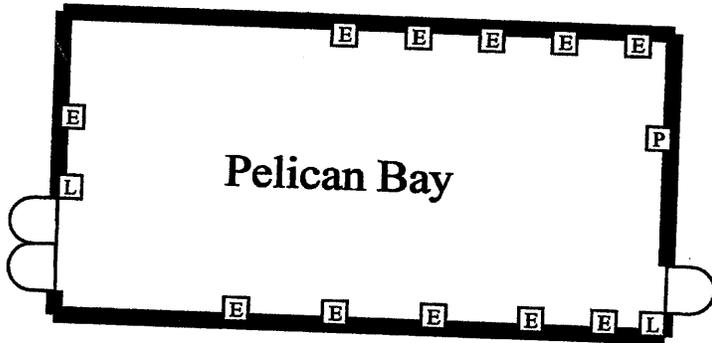
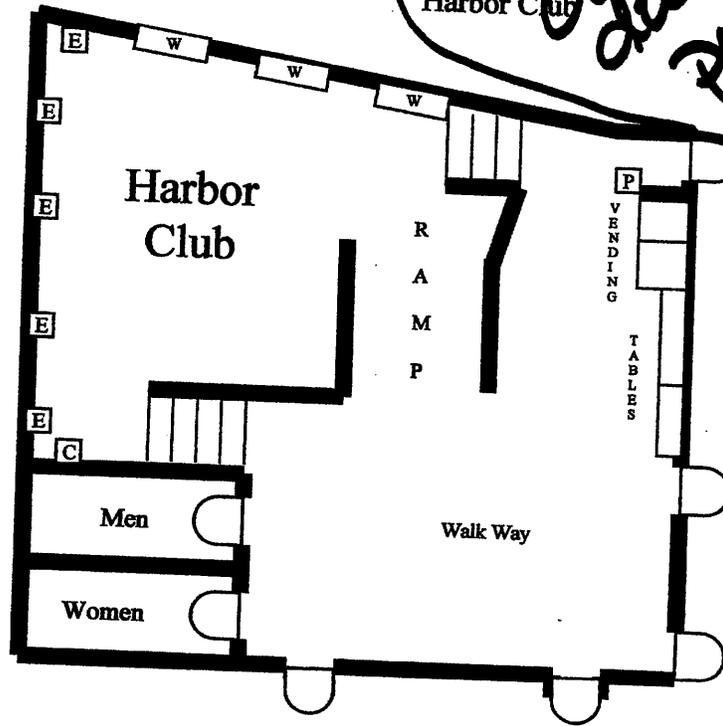
	Classroom	Theatre	Banquet	Conference	Cost
Lighthouse North or South	65ppl	125ppl	80ppl	65ppl	\$500.00
Lighthouse North & South	150ppl	200ppl	150ppl	150ppl	\$750.00
Lighthouse Ballroom	150ppl	250ppl	200ppl	150ppl	\$1000.00
Moorings	32ppl	50ppl	25ppl	32ppl	\$200.00



Meeting Rooms

Room Name	Sq. Ft.	Dimensions L x W x H
Pelican Bay	860	43 x 20 x 9
Boardroom	403	L-Shape
Harbor Club	700	50 x 14 x 9

- E – Electrical Outlet
- I – Internet
- L – Light Switch
- M – Microphone
- P – Phone Jack
- W – Window
- C – Cable Hookup



Meeting Room Capacities	Classroom	Theatre	Banquet	Conference	Cost
Pelican Bay	40ppl	50ppl	48ppl	40ppl	\$350.00
Boardroom	20ppl	20ppl	20ppl	20ppl	\$150.00
Harbor Club	20ppl	40ppl	40ppl	20ppl	\$250.00

RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07/01/2017 ending: 06/30/2018
(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 Meridian Condo Assoc
 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>Cherale Lovencil</u>	<u>1540 W. Main St., L.G. WI 53147</u>	_____
Directors/Managers	_____	_____	_____

C. 1. Trade Name Bella Vista Suites Business Phone Number 262-248-2100
 2. Address of Premises 335 W. Ugly Dr. Post Office & Zip Code _____

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.) Lounge area, front bar, room service
5. Legal description (omit if street address is given above): bar, pub
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 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 3 day of May, 20 17
Sabrina M. Wesley
(Clerk/Notary Public)
 My commission expires 7-20-2019

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

TO BE COMPLETED BY CLERK		
Date received and filed with municipal clerk <u>5-3-2017</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: _____	
LICENSE REQUESTED ▶	
TYPE	FEE
<input type="checkbox"/> Class A beer	\$ _____
<input checked="" type="checkbox"/> Class B beer	\$ <u>100.00</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>500.00</u>
<input type="checkbox"/> Class B (wine only) winery	\$ _____
Publication fee	\$ <u>25.00</u>
TOTAL FEE	\$ <u>625.00</u>

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 the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

Town

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

City

The undersigned duly authorized officer(s)/members/managers of MERIDIAN CONDO ASSOC.
(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 Bella Vista Suites on the shores of Lake Geneva
(trade name)

located at 335 W. Maple Dr

appoints Charles Lorenze
(name of appointed agent)

1540 W. MAIN ST L.G. WI 53147
(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).
MERIDIAN CONDOMINIUM ASSOCIATION

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? 25+ years

Place of residence last year 1540 W. MAIN ST. L.G. WI 53147

For: MERIDIAN CONDO ASSOC. DBA Bella Vista Suites
(name of corporation/organization/limited liability company)

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

And: _____
(signature of Officer/Member/Manager)

I, Charles Lorenze, **ACCEPTANCE BY AGENT**
(print/type agent's name), hereby accept this appointment as agent for the

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.

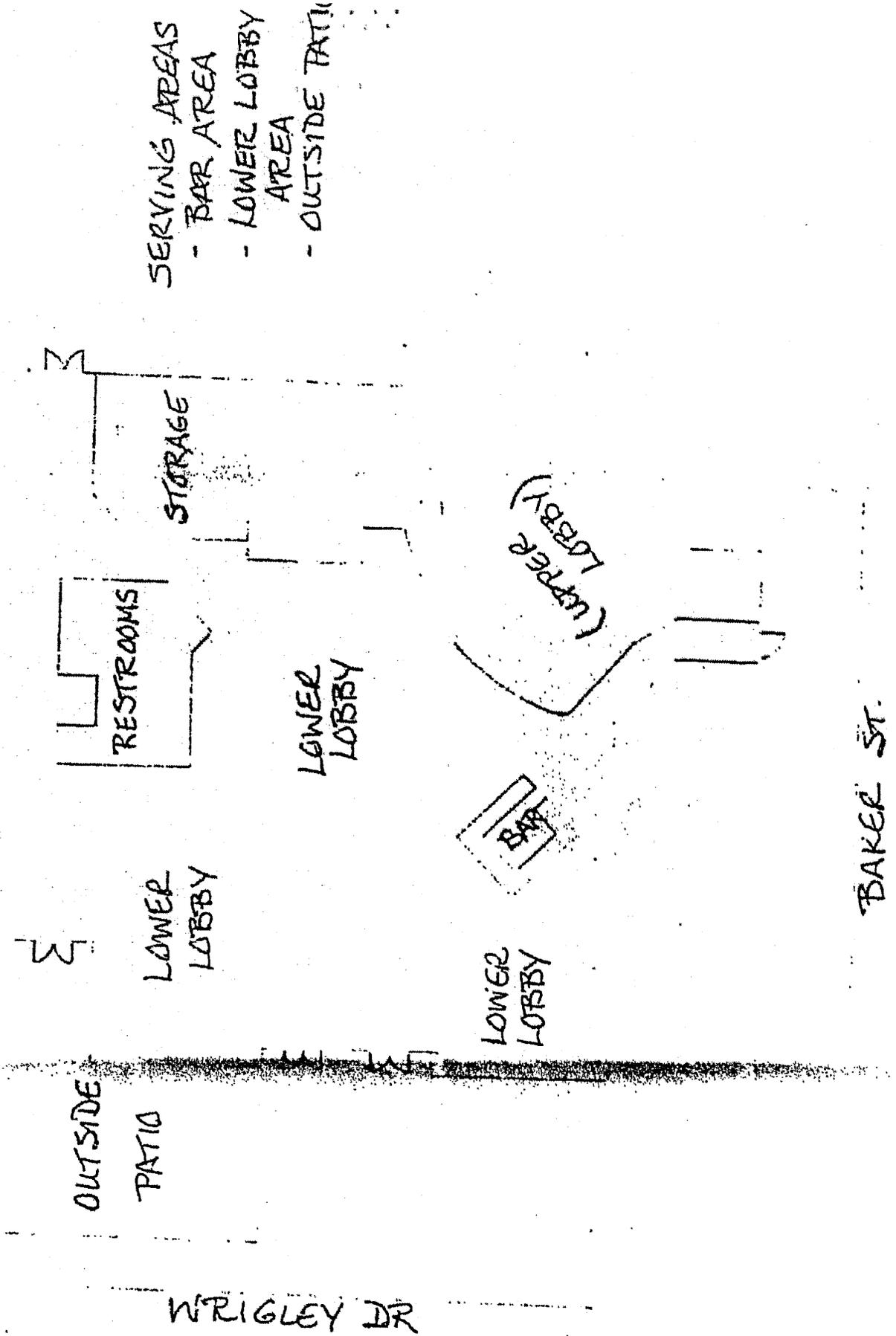
[Signature] 5-13-16 Agent's age _____
(signature of agent) (date)
1540 W. Main St 53147 Date of birth _____
(home address of agent)

**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 5-12-17 by [Signature] Title Police Chief
(date) (signature of proper local official) (town chair, village president, police chief)

BELLA VISTA SUITES HOTEL



- SERVING AREAS
- BAR AREA
- LOWER LOBBY AREA
- OUTSIDE PATIO

RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07/01/2017 ending: 06/30/2018
(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 SU 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 Siu Wing Leung, N3230 WILLIAMS ST, LAKE GENEVA, WI 53147

Vice President/Member RAN SI LEI, W3537 PATRIK DRIVE, LAKE GENEVA, WI 53147

Secretary/Member LARRY R. SANDY, N6386 WOODRIDGE DRIVE, ELKHORN, WI 53121

Treasurer/Member

Agent Siu Wing Leung, N3230 WILLIAMS ST. LAKE GENEVA, WI 53147

Directors/Managers SAME AS OFFICERS, ABOVE

C. 1. Trade Name SU 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 BAR, DINING ROOM, JURY ROOM, 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 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 2 day of May, 20 17

Sabrina M. Wasno
(Clerk/Notary Public)

My commission expires 7-20-2019

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

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

Larry R. Sandy
(Additional Partner(s)/Member/Manager of Limited Liability Company if Any)

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>5/2/2017</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:

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	\$ 25.00
TOTAL FEE	\$ <u>625.00</u>

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 the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

Town

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

City

The undersigned duly authorized officer(s)/members/managers of SU WINGS CORP
(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
SU WINGS CHINESE RESTAURANT
(trade name)

located at 743 NORTH ST. LAKE GENEVA, WI 53147

appoints Siu Wing Leung
(name of appointed agent)

N3230 WILLIAMS ST. LAKE GENEVA, WI 53147
(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).

NOW ACTING: SU WINGS CORP.

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? 40+ years

Place of residence last year N3230 WILLIAMS ST., LAKE GENEVA, WI 53147

For: SU WINGS CORP
(name of corporation/organization/limited liability company)

By: _____
(signature of Officer/Member/Manager)

And: Sam R. Sandy, VP, Sec. & Treasurer
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, Siu Wing Leung, 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.

Siu W Leung 5/2/2017 Agent's age _____
(signature of agent) (date)

N3230 WILLIAMS ST. LAKE GENEVA, WI 53147 Date of birth 1/1/...
(home address of agent)

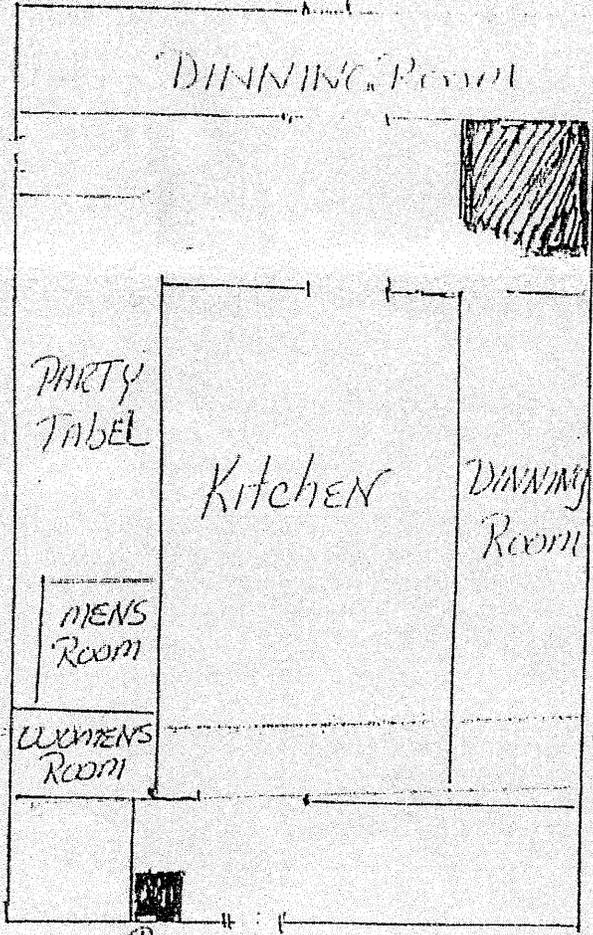
APPROVAL OF AGENT BY MUNICIPAL AUTHORITY
(Clerk cannot sign on behalf of Municipal Official)

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 5-9-17 by [Signature] Title Police Chief
(date) (signature of proper local official) (town chair, village president, police chief)

First Floor

Basement



Storage for
LIQUORE

Su Wing's Corp.
743 North St.
Lake Geneva

RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07/01/2017 ending: 06/30/2018
(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) Home Address Post Office & Zip Code

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company The Restaurant Tempura House LLC
 Address of Corporation/Limited Liability Company (if different from licensed premises) 306 Center 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	<u>Pai Tsung Wang</u>	<u>715 Geneva St. Lake Geneva, WI 53147</u>	
Vice President/Member	<u>Mei Bao Wang</u>	<u>— Same as Above —</u>	
Secretary/Member			
Treasurer/Member			
Agent	<u>Pai Tsung Wang</u>	<u>715 Geneva St. Lake Geneva, WI 53147</u>	
Directors/Managers			

C. 1. Trade Name The Restaurant Tempura House LLC Business Phone Number 262-249-8822
 2. Address of Premises 306 Center St. Lake Geneva 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.) office
As per attached sheets

5. Legal description (omit if street address is given above): 1st & 2nd Floor Restaurant Area, Bar, 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
Storage, Outside Tables

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 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 5th day of May, 2017

Sabrina M. Wesler
(Clerk/Notary Public)

My commission expires 7/20/2019

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

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

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

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>5/2/2017</u>	Date reported to council/board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

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 the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

Town

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

City

The undersigned duly authorized officer(s)/members/managers of The Restaurant Tempura House 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

(trade name)

located at 306 Center St. Lake Geneva, WI 53147

appoints Pai Tsung Wang
(name of appointed agent)

715 Geneva St. Lake Geneva, WI 53147
(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? Since 1979, 37 yrs.

Place of residence last year 6654 Lakeside Rd. Lake Geneva, WI 53147

For: The Restaurant Tempura House LLC
(name of corporation/organization/limited liability company)

By: Pai Tsung Wang
(signature of Officer/Member/Manager)

And: Mei Bao Wang
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, Pai Tsung Wang, hereby accept this appointment as agent for the
(print/type agent's name)

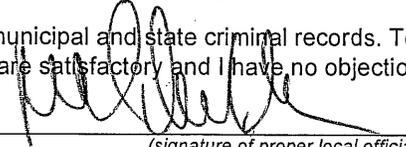
corporation/organization/limited liability company and assume full responsibility for the conduct of all business relative to alcohol beverages conducted on the premises for the corporation/organization/limited liability company.

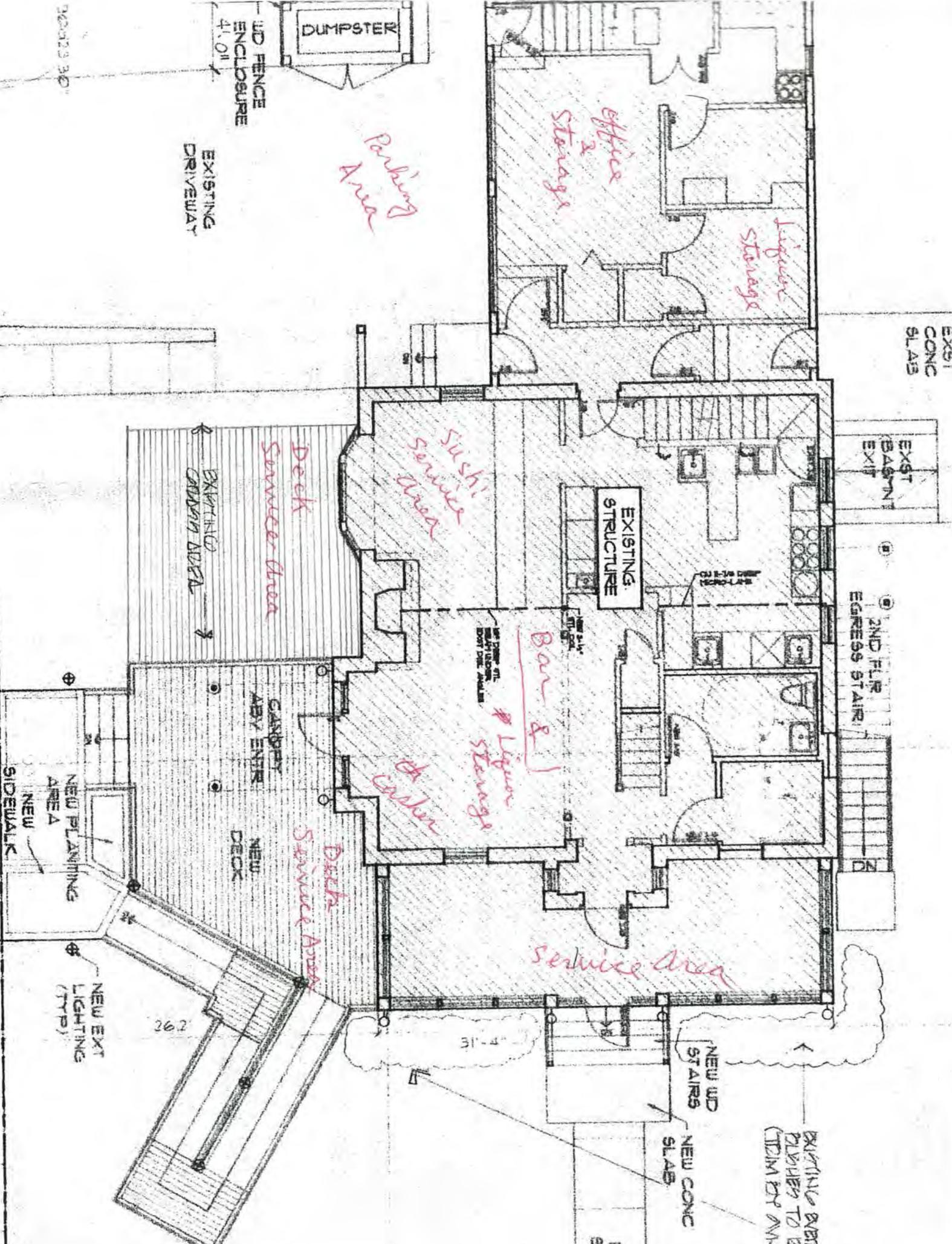
 5/2/17 Agent's age _____
(signature of agent) (date)

715 Geneva St. Lake Geneva, WI 53147 Date of birth _____
(home address of agent)

**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 5-9-17 by  Title Police Chief
(date) (signature of proper local official) (town chair, village president, police chief)



DUMPSTER

EXISTING CONC SLAB

EXISTING DRIVEWAY

Parking Area

Office & Storage

Liquor Storage

EXIST CONC SLAB

EXIST BATHN EXIT

EXISTING STRUCTURE

Sushi Service Area

Deck Service Area

EXISTING CONC SLAB

2ND FLR EGRESS STAIR

Bar & Liquor Storage

Cashier

Cashier

Baths Service Area

NEW DECK

Service Area

NEW UP STAIRS

NEW CONC SLAB

PRINTING AREA PLANNED TO BE TURNED ON

NEW SIDEWALK

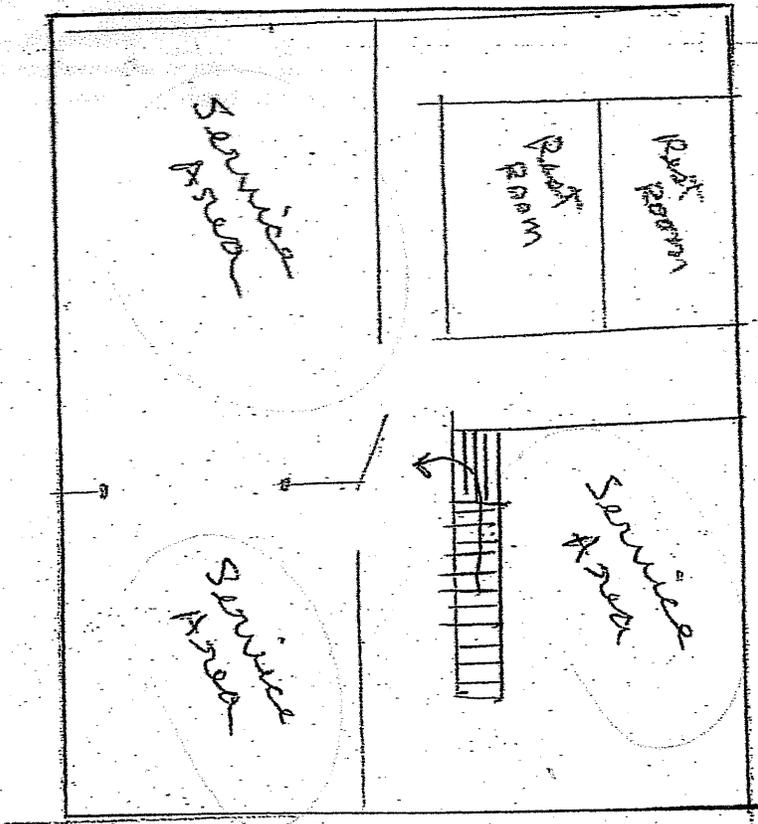
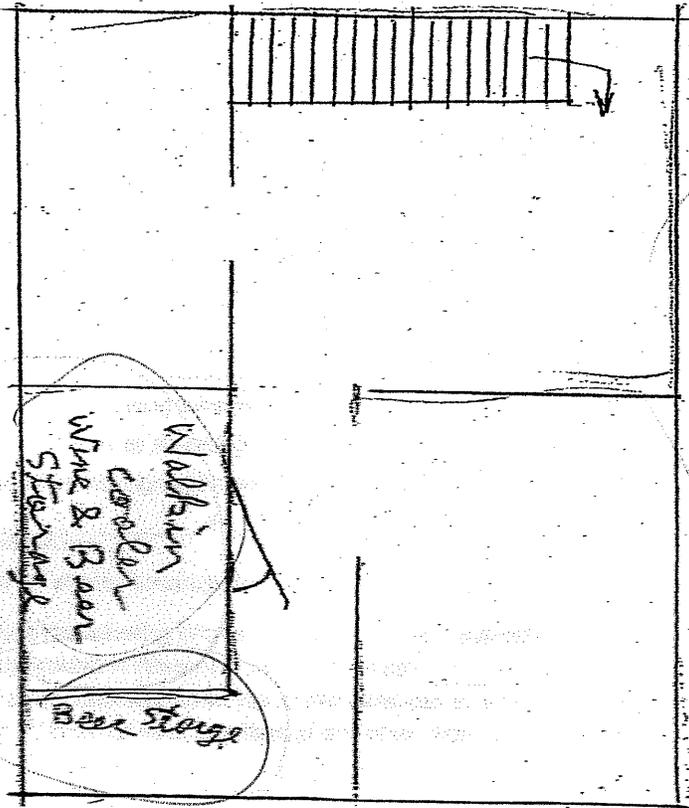
NEW PLANNING AREA

NEW EXT LIGHTING (TYP)

262

31'-4"

E 51



RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07/01/2017 ending: 06/30/2018
(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 STONE SOUP, 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>Charles Andrew Fritz</u>	<u>329 Wrigley Dr</u>	<u>53147</u>
Vice President/Member	_____	_____	_____
Secretary/Member	_____	_____	_____
Treasurer/Member	_____	_____	_____
Agent	<u>Charles Andrew Fritz</u>	_____	_____
Directors/Managers	_____	_____	_____

C. 1. Trade Name BAKER HOUSE Business Phone Number 262-248-4700
 2. Address of Premises 327 WRIGLEY DRIVE 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.) Hotel & Lounge, Restaurant & Banquet area including
5. Legal description (omit if street address is given above): Records kept in office 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 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 27 day of April, 2017
Stephanie Bunderson (Clerk/Notary Public)
[Signature] (Officer of Corporation/Member/Manager of Limited Liability Company /Partner/Individual)
[Signature] (Officer of Corporation/Member/Manager of Limited Liability Company /Partner)
 My commission expires 4/3/18
 _____ (Additional Partner(s)/Member/Manager of Limited Liability Company if Any)

TO BE COMPLETED BY CLERK		
Date received and filed with municipal clerk <u>4/27/17</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:	
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>25.00</u>
TOTAL FEE		\$	<u>625</u>

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 the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

Town

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

City

The undersigned duly authorized officer(s)/members/managers of STONE SOUP, 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

BAKER HOUSE
(trade name)

located at 327 WRIGLEY DRIVE, LAKE GENEVA, WI 53147

appoints CHARLES ANDREW FRITZ, IV
(name of appointed agent)

327 WRIGLEY DRIVE, LAKE GENEVA, WI 53147
(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? _____

Place of residence last year _____

For: STONE SOUP, LLC
(name of corporation/organization/limited liability company)

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

And: _____
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, Charles Andrew Fritz, IV
(print/type agent's name), hereby accept this appointment as agent for the

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] 4/4/2017 Agent's age _____
(signature of agent) (date)

327 WRIGLEY DRIVE, LAKE GENEVA WI 53147 Date of birth _____
(home address of agent)

**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 5-2-17 by [Signature] Title Police Chief
(date) (signature of proper local official) (town chair, village president, police chief)

Baker House

LEGEND

1. PROPERTY SURVEY BOUNDARIES	2. EXISTING BUILDINGS
3. EXISTING DRIVEWAYS	4. EXISTING UTILITY LINES
5. EXISTING FENCES	6. EXISTING EASEMENTS
7. EXISTING SETBACKS	8. EXISTING CURBS
9. EXISTING SIDEWALKS	10. EXISTING STAIRS
11. EXISTING PATIOS	12. EXISTING PORCHES
13. EXISTING DECKS	14. EXISTING TERRACES
15. EXISTING DRIVEWAYS	16. EXISTING DRIVEWAYS
17. EXISTING DRIVEWAYS	18. EXISTING DRIVEWAYS
19. EXISTING DRIVEWAYS	20. EXISTING DRIVEWAYS
21. EXISTING DRIVEWAYS	22. EXISTING DRIVEWAYS
23. EXISTING DRIVEWAYS	24. EXISTING DRIVEWAYS
25. EXISTING DRIVEWAYS	26. EXISTING DRIVEWAYS
27. EXISTING DRIVEWAYS	28. EXISTING DRIVEWAYS
29. EXISTING DRIVEWAYS	30. EXISTING DRIVEWAYS
31. EXISTING DRIVEWAYS	32. EXISTING DRIVEWAYS
33. EXISTING DRIVEWAYS	34. EXISTING DRIVEWAYS
35. EXISTING DRIVEWAYS	36. EXISTING DRIVEWAYS
37. EXISTING DRIVEWAYS	38. EXISTING DRIVEWAYS
39. EXISTING DRIVEWAYS	40. EXISTING DRIVEWAYS
41. EXISTING DRIVEWAYS	42. EXISTING DRIVEWAYS
43. EXISTING DRIVEWAYS	44. EXISTING DRIVEWAYS
45. EXISTING DRIVEWAYS	46. EXISTING DRIVEWAYS
47. EXISTING DRIVEWAYS	48. EXISTING DRIVEWAYS
49. EXISTING DRIVEWAYS	50. EXISTING DRIVEWAYS
51. EXISTING DRIVEWAYS	52. EXISTING DRIVEWAYS
53. EXISTING DRIVEWAYS	54. EXISTING DRIVEWAYS
55. EXISTING DRIVEWAYS	56. EXISTING DRIVEWAYS
57. EXISTING DRIVEWAYS	58. EXISTING DRIVEWAYS
59. EXISTING DRIVEWAYS	60. EXISTING DRIVEWAYS
61. EXISTING DRIVEWAYS	62. EXISTING DRIVEWAYS
63. EXISTING DRIVEWAYS	64. EXISTING DRIVEWAYS
65. EXISTING DRIVEWAYS	66. EXISTING DRIVEWAYS
67. EXISTING DRIVEWAYS	68. EXISTING DRIVEWAYS
69. EXISTING DRIVEWAYS	70. EXISTING DRIVEWAYS
71. EXISTING DRIVEWAYS	72. EXISTING DRIVEWAYS
73. EXISTING DRIVEWAYS	74. EXISTING DRIVEWAYS
75. EXISTING DRIVEWAYS	76. EXISTING DRIVEWAYS
77. EXISTING DRIVEWAYS	78. EXISTING DRIVEWAYS
79. EXISTING DRIVEWAYS	80. EXISTING DRIVEWAYS
81. EXISTING DRIVEWAYS	82. EXISTING DRIVEWAYS
83. EXISTING DRIVEWAYS	84. EXISTING DRIVEWAYS
85. EXISTING DRIVEWAYS	86. EXISTING DRIVEWAYS
87. EXISTING DRIVEWAYS	88. EXISTING DRIVEWAYS
89. EXISTING DRIVEWAYS	90. EXISTING DRIVEWAYS
91. EXISTING DRIVEWAYS	92. EXISTING DRIVEWAYS
93. EXISTING DRIVEWAYS	94. EXISTING DRIVEWAYS
95. EXISTING DRIVEWAYS	96. EXISTING DRIVEWAYS
97. EXISTING DRIVEWAYS	98. EXISTING DRIVEWAYS
99. EXISTING DRIVEWAYS	100. EXISTING DRIVEWAYS



SOUTH MAP

TO INSIDE OUTLINED SERVICE AREA LIMITED PERIMETER

THIS PLAN IS A COPY OF THE ORIGINAL SURVEY AND IS NOT TO BE USED FOR ANY OTHER PURPOSE. ANY REVISIONS TO THIS PLAN SHALL BE MADE BY THE ORIGINAL SURVEYOR.

100 90 80 70 60 50 40 30 20 10 0 10 20 30 40 50 60 70 80 90 100



BAKER STREET

ALTA/COSM LAND TITLE SURVEY

THIS SURVEY WAS CONDUCTED IN ACCORDANCE WITH THE ALTA/COSM STANDARD PRACTICES FOR SURVEYING AND MAPPING. THE SURVEYOR HAS REVIEWED THE RECORDS OF THE LAND TITLE OFFICE AND HAS FOUND NO DISCREPANCIES. THE SURVEYOR HAS ALSO REVIEWED THE RECORDS OF THE MUNICIPALITY AND HAS FOUND NO DISCREPANCIES. THE SURVEYOR HAS ALSO REVIEWED THE RECORDS OF THE DISTRICT COURT AND HAS FOUND NO DISCREPANCIES. THE SURVEYOR HAS ALSO REVIEWED THE RECORDS OF THE COUNTY COURT AND HAS FOUND NO DISCREPANCIES. THE SURVEYOR HAS ALSO REVIEWED THE RECORDS OF THE STATE COURT AND HAS FOUND NO DISCREPANCIES. THE SURVEYOR HAS ALSO REVIEWED THE RECORDS OF THE FEDERAL COURT AND HAS FOUND NO DISCREPANCIES. THE SURVEYOR HAS ALSO REVIEWED THE RECORDS OF THE SUPREME COURT AND HAS FOUND NO DISCREPANCIES. THE SURVEYOR HAS ALSO REVIEWED THE RECORDS OF THE CONSTITUTIONAL COURT AND HAS FOUND NO DISCREPANCIES. THE SURVEYOR HAS ALSO REVIEWED THE RECORDS OF THE INTERNATIONAL COURT OF JUSTICE AND HAS FOUND NO DISCREPANCIES. THE SURVEYOR HAS ALSO REVIEWED THE RECORDS OF THE INTERNATIONAL COURT OF ARBITRATION AND HAS FOUND NO DISCREPANCIES. THE SURVEYOR HAS ALSO REVIEWED THE RECORDS OF THE INTERNATIONAL COURT OF CONCILIATION AND HAS FOUND NO DISCREPANCIES. THE SURVEYOR HAS ALSO REVIEWED THE RECORDS OF THE INTERNATIONAL COURT OF SETTLEMENTS AND HAS FOUND NO DISCREPANCIES. THE SURVEYOR HAS ALSO REVIEWED THE RECORDS OF THE INTERNATIONAL COURT OF TRADE AND HAS FOUND NO DISCREPANCIES. THE SURVEYOR HAS ALSO REVIEWED THE RECORDS OF THE INTERNATIONAL COURT OF INVESTMENT AND HAS FOUND NO DISCREPANCIES. THE SURVEYOR HAS ALSO REVIEWED THE RECORDS OF THE INTERNATIONAL COURT OF ENERGY AND HAS FOUND NO DISCREPANCIES. THE SURVEYOR HAS ALSO REVIEWED THE RECORDS OF THE INTERNATIONAL COURT OF ENVIRONMENTAL AND HAS FOUND NO DISCREPANCIES. THE SURVEYOR HAS ALSO REVIEWED THE RECORDS OF THE INTERNATIONAL COURT OF CULTURAL AND HAS FOUND NO DISCREPANCIES. THE SURVEYOR HAS ALSO REVIEWED THE RECORDS OF THE INTERNATIONAL COURT OF EDUCATIONAL AND HAS FOUND NO DISCREPANCIES. THE SURVEYOR HAS ALSO REVIEWED THE RECORDS OF THE INTERNATIONAL COURT OF SCIENTIFIC AND HAS FOUND NO DISCREPANCIES. THE SURVEYOR HAS ALSO REVIEWED THE RECORDS OF THE INTERNATIONAL COURT OF TECHNICAL AND HAS FOUND NO DISCREPANCIES. THE SURVEYOR HAS ALSO REVIEWED THE RECORDS OF THE INTERNATIONAL COURT OF ECONOMIC AND HAS FOUND NO DISCREPANCIES. THE SURVEYOR HAS ALSO REVIEWED THE RECORDS OF THE INTERNATIONAL COURT OF SOCIAL AND HAS FOUND NO DISCREPANCIES. THE SURVEYOR HAS ALSO REVIEWED THE RECORDS OF THE INTERNATIONAL COURT OF HUMAN RIGHTS AND HAS FOUND NO DISCREPANCIES. THE SURVEYOR HAS ALSO REVIEWED THE RECORDS OF THE INTERNATIONAL COURT OF LABOR AND HAS FOUND NO DISCREPANCIES. THE SURVEYOR HAS ALSO REVIEWED THE RECORDS OF THE INTERNATIONAL COURT OF ENVIRONMENTAL AND HAS FOUND NO DISCREPANCIES. THE SURVEYOR HAS ALSO REVIEWED THE RECORDS OF THE INTERNATIONAL COURT OF CULTURAL AND HAS FOUND NO DISCREPANCIES. THE SURVEYOR HAS ALSO REVIEWED THE RECORDS OF THE INTERNATIONAL COURT OF EDUCATIONAL AND HAS FOUND NO DISCREPANCIES. THE SURVEYOR HAS ALSO REVIEWED THE RECORDS OF THE INTERNATIONAL COURT OF SCIENTIFIC AND HAS FOUND NO DISCREPANCIES. THE SURVEYOR HAS ALSO REVIEWED THE RECORDS OF THE INTERNATIONAL COURT OF TECHNICAL AND HAS FOUND NO DISCREPANCIES. THE SURVEYOR HAS ALSO REVIEWED THE RECORDS OF THE INTERNATIONAL COURT OF ECONOMIC AND HAS FOUND NO DISCREPANCIES. THE SURVEYOR HAS ALSO REVIEWED THE RECORDS OF THE INTERNATIONAL COURT OF SOCIAL AND HAS FOUND NO DISCREPANCIES. THE SURVEYOR HAS ALSO REVIEWED THE RECORDS OF THE INTERNATIONAL COURT OF HUMAN RIGHTS AND HAS FOUND NO DISCREPANCIES. THE SURVEYOR HAS ALSO REVIEWED THE RECORDS OF THE INTERNATIONAL COURT OF LABOR AND HAS FOUND NO DISCREPANCIES.

NATIONAL Survey & Engineering

1000 10th Street, Suite 1000
 Ottawa, Ontario K1P 1G1
 Canada
 Tel: (613) 566-1111
 Fax: (613) 566-1112
 Email: info@national-survey.com
 Website: www.national-survey.com

DATE: 10/1/2011
 DRAWN BY: [Signature]
 CHECKED BY: [Signature]

RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07/01/2017 ending: 06/30/2018
(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.: FEIN Number:	
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>25.00</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) Tomas Elizabeth A Home Address 1142 Cypress point Post Office & Zip Code Twin Lakes 53181

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) ▶ 1142 Cypress point, Twin Lakes
 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. Tomas 1142 Cypress Pt. Twin Lakes 53181
 Vice President/Member _____
 Secretary/Member _____
 Treasurer/Member _____
 Agent ▶ Elizabeth A. Tomas
 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 ▶ 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.) Retail store, Store room, Patio, lounge + store RM
5. Legal description (omit if street address is given above): 460
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

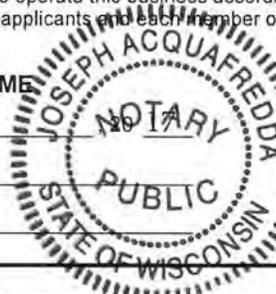
READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signers. Signers agree to operate this business according to law and that the rights and responsibilities conferred by the 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 3rd day of May, 2017

[Signature]
 (Clerk/Notary Public)

My commission expires 10/20/2018



Elizabeth A. Tomas
 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)

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>5-4-2017</u>	Date reported to council/board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

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 the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

Town

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

The undersigned duly authorized officer(s)/members/managers of Mercedes or Bust
(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

The Bottle Shop
(trade name)

located at 617 W. Main St. Lake Geneva, WI 53147

appoints Elizabeth Tumas
(name of appointed agent)

1142 Cypress Point Twin Lakes, WI 53147
(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? 24 yrs.

Place of residence last year 1142 Cypress Point Twin Lakes WI 53181

For: Mercedes or Bust, L.L.C. dba The Bottle Shop
(name of corporation/organization/limited liability company)

By: Elizabeth A Tumas President
(signature of Officer/Member/Manager)

And: _____
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, Elizabeth Tumas, 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.

Elizabeth Tumas 5-1-17 Agent's age _____
(signature of agent) (date)

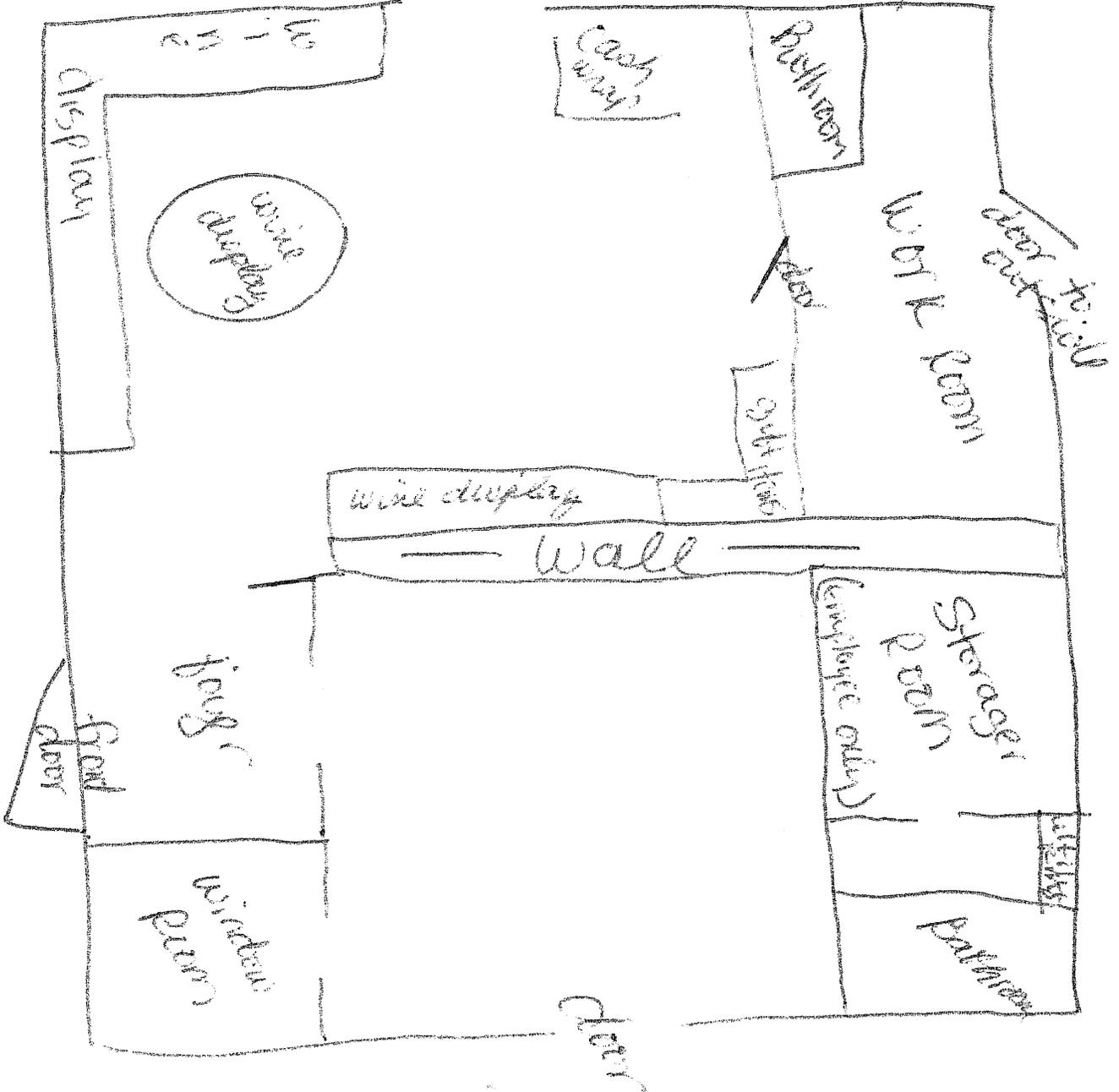
1142 Cypress Point Twin Lakes WI 53147 Date of birth _____
(home address of agent)

**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 5-12-17 by [Signature] Title Police Chief
(date) (signature of proper local official) (town chair, village president, police chief)

The Bottle Shop
617 W Main St
Lake Geneva, WI



RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07/01/2017 ending: 06/30/2018
(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
CARAVETTE, Daniel Christopher 3900 101 DEAN LANE, St. Charles, IL 60175

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company SAMSON Enterprises, 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 Daniel Christopher Caravette 39W101 DEAN LANE St. Charles, IL
 Vice President/Member _____ 60175
 Secretary/Member _____
 Treasurer/Member _____
 Agent Eugene Geahler
 Directors/Managers _____

C. 1. Trade Name Carvettis Business Phone Number 262-248-9752
 2. Address of Premises 642 W. 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.) RESTAURANT, BAR, PATIO
5. Legal description (omit if street address is given above): Basement 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 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 2 day of May
Stephanie Gunderson (Clerk/Notary Public)
 My commission expires 4/13/18
Eugene Geahler (Officer of Corporation/Member/Manager of Limited Liability Company /Partner/Individual)
Eugene Geahler (Officer of Corporation/Member/Manager of Limited Liability Company /Partner)
 (Additional Partner(s)/Member/Manager of Limited Liability Company if Any)

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>5/2/17</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:	
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>25.00</u>
TOTAL FEE	\$ <u>675.00</u>

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 the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

Town

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

City

The undersigned duly authorized officer(s)/members/managers of SAMSON Enterprises 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 Carvetti's

located at 642 W. MAIN ST. LAKE GENEVA, WI 53147
(trade name)

appoints EUGENE GRAHLER
(name of appointed agent)

PO Box 563 Pell Lake, WI 53157
11465 Clover Rd Pell Lake, WI 53157
(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? 45 years

Place of residence last year 11465 Clover Rd Pell Lake, WI 53157

For: SAMSON Enterprises, LLC
(name of corporation/organization/limited liability company)

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

And: Eugene J. Meaher
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, Eugene Grahlér, 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.

Eugene J. Meaher 5/2/17 Agent's age 2
(signature of agent) (date)

PO Box 563 Pell Lake, WI 53157 Date of birth 1/17
11465 Clover Rd Pell Lake, WI 53157
(home address of agent)

**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.

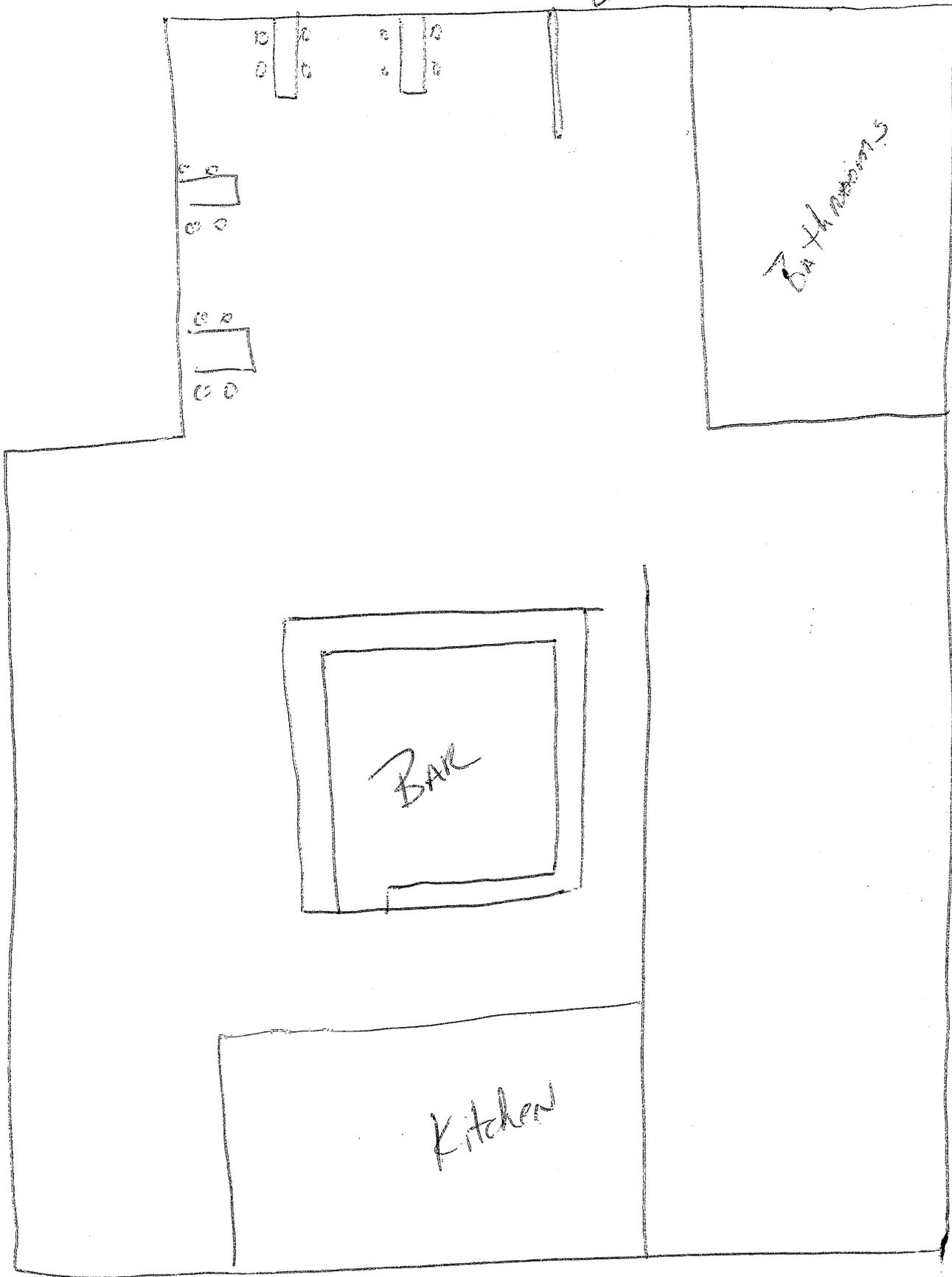
Approved on 5-9-17 by [Signature] Title Police Chief
(date) (signature of proper local official) (town chair, village president, police chief)

Entrance

Bathrooms

BAR

Kitchen

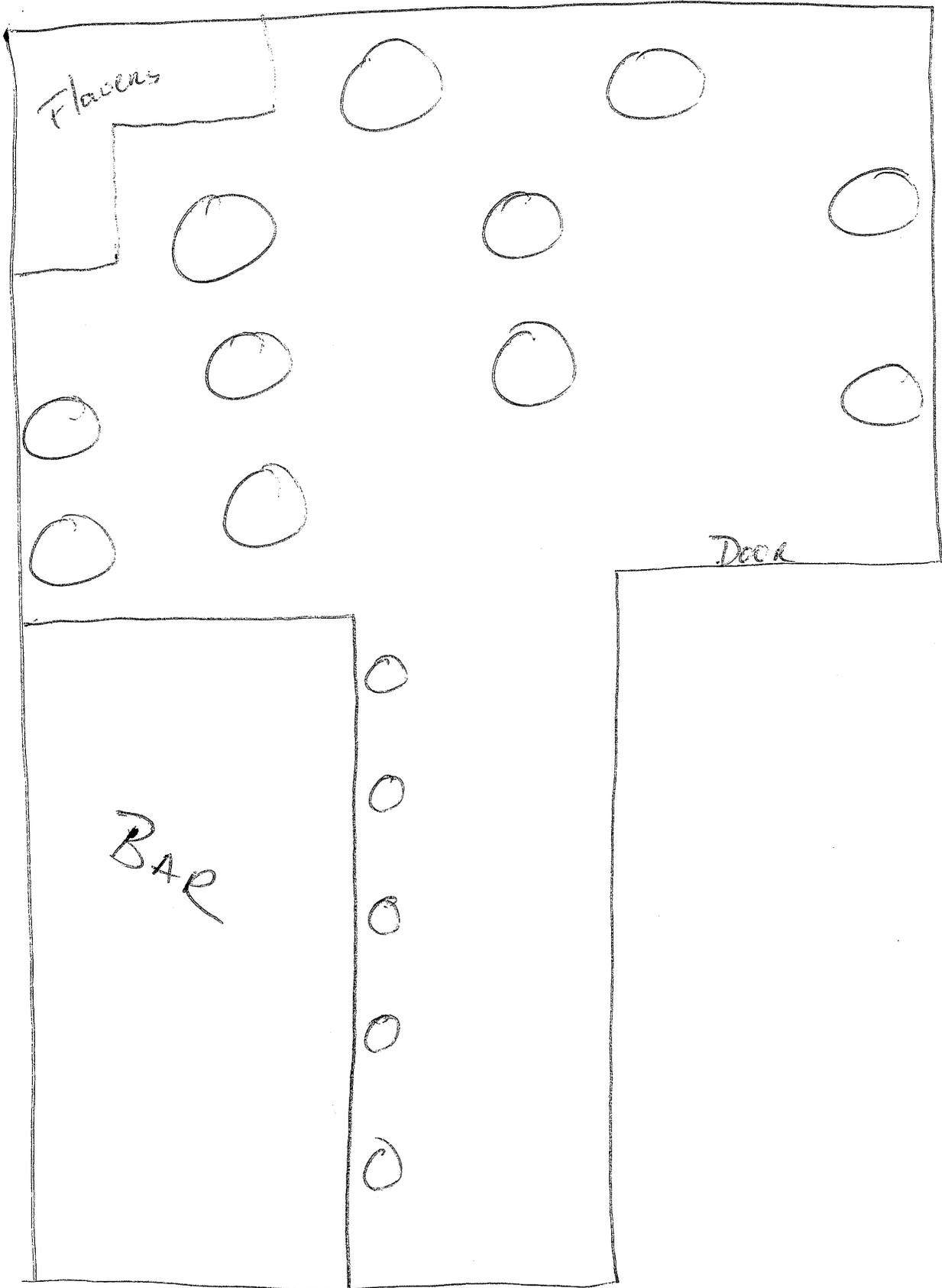


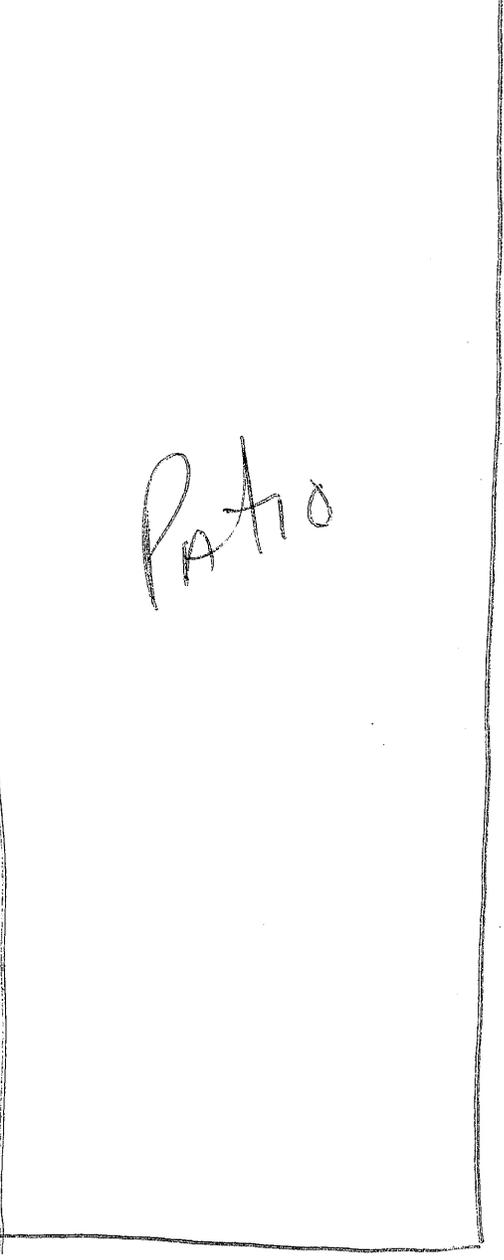
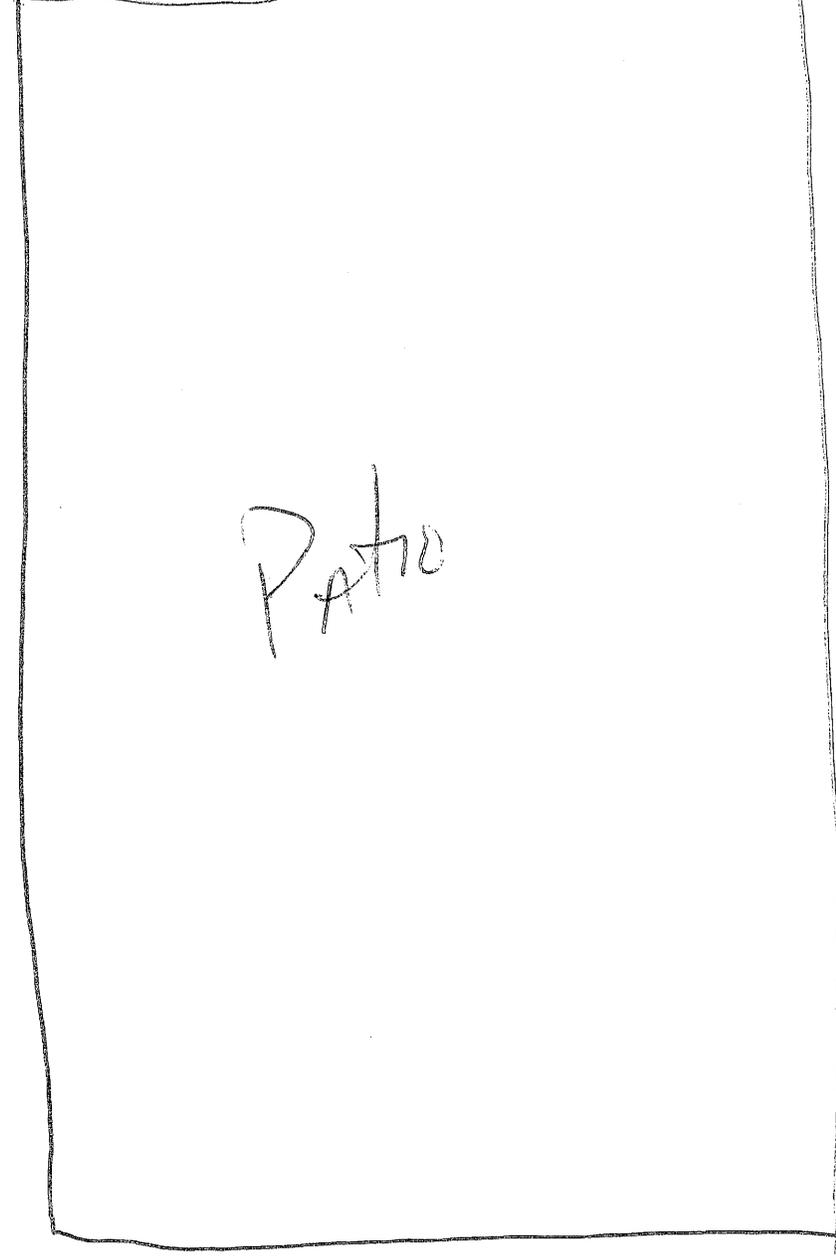
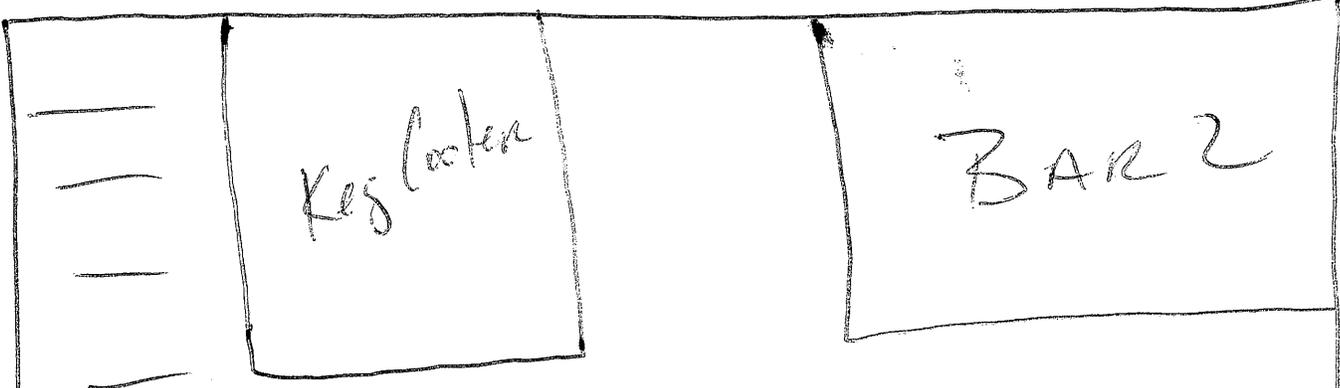
Office

Key Cabin
Beer

Lounge Room

Wine
Storage
Beer





RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07/01/2017 ending: 06/30/2018
(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
<u>LORENZI, CHARLES B.</u> <u>Charles B. Lorenzi</u>	<u>1540 W. MAIN ST.</u>	<u>L.G. WI 53147</u>

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company 422 S Wells St Ltd DBA Celebration on Wells
 Address of Corporation/Limited Liability Company (if different from licensed premises) 422 S Wells St Ltd DBA Celebration on Wells

Title	Name (Inc. Middle Name)	Home Address	Post Office & Zip Code
President/Member	<u>Charles B. Lorenzi</u>	<u>1540 W. Main St</u>	<u>Lake Geneva WI 53147</u>
Vice President/Member	_____	_____	_____
Secretary/Member	_____	_____	_____
Treasurer/Member	_____	_____	_____
Agent	<u>Charles B. Lorenzi</u>	_____	_____
Directors/Managers	_____	_____	_____

C. 1. Trade Name Celebration on Wells Catering Business Phone Number 262 248 2555
 2. Address of Premises 422 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.) Banquet Hall/Bar area @ Celebration location
5. Legal description (omit if street address is given above): Kitchen 422 S. Wells St. office area
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 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 3 day of May, 20 17
Sabrina M. Wasno
(Clerk/Notary Public)
 My commission expires 7-20-2019

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

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>5/3/2017</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:
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	\$ 25.00
TOTAL FEE	\$ <u>625-</u>

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 the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

Town

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

City

The undersigned duly authorized officer(s)/members/managers of 422 S wells Ltd
(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 Celebration on wells Catering

located at 422 S. Well, st. L.G. 53147
(trade name)

appoints Charles Lorenzi
(name of appointed agent)
1540 W. Main St. L.G. WI 53147
(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).
Bella Vista Suites - L.G. WI 53147

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? 25+ years

Place of residence last year 1540 W. Main St. L.G. 53147

For: 422 S. wells st LTD DSA Celebration on wells st
(name of corporation/organization/limited liability company)

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

And: _____
(signature of Officer/Member/Manager)

I, Charles Lorenzi
(print/type agent's name), hereby accept this appointment as agent for the

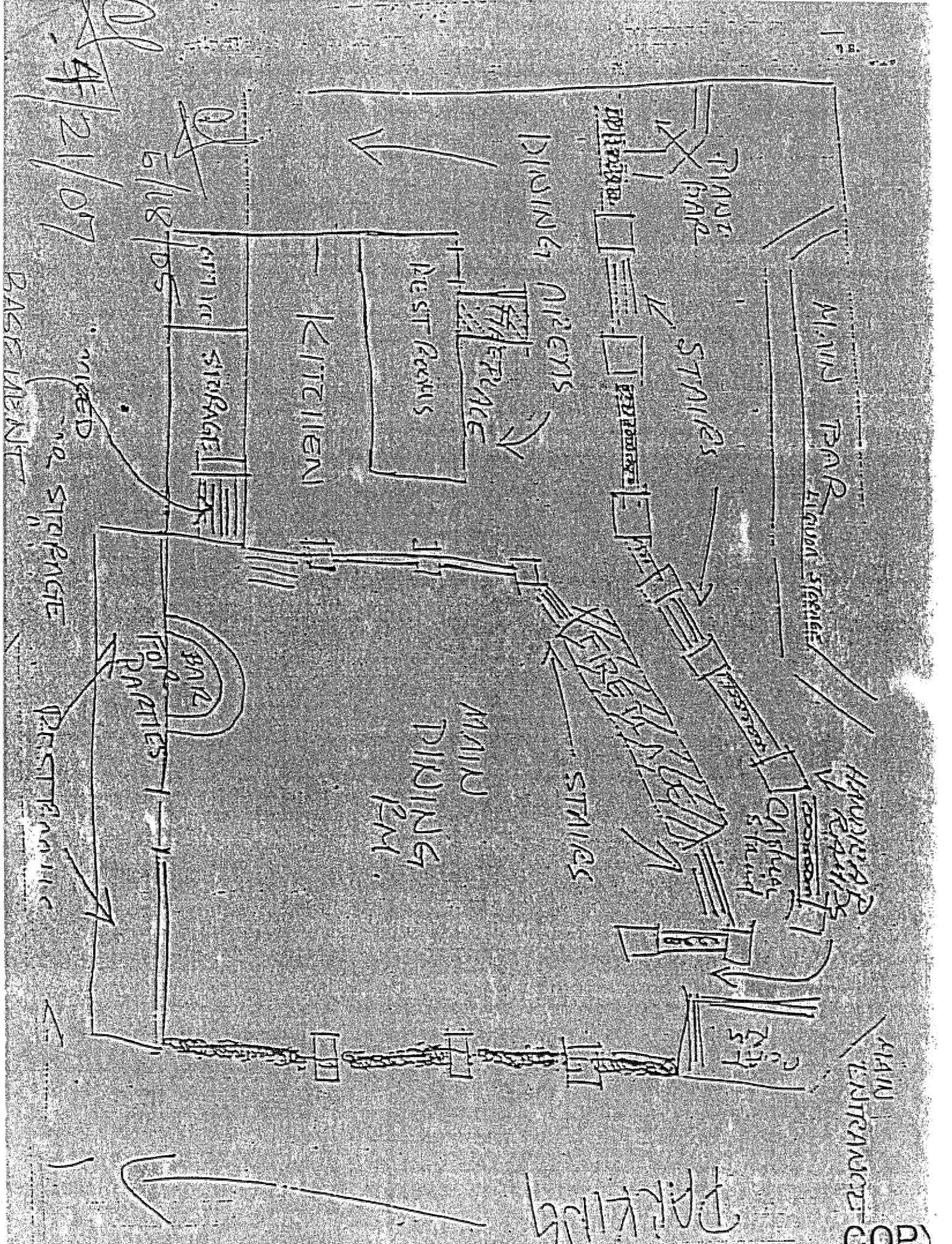
corporation/organization/limited liability company and assume full responsibility for the conduct of all business relative to alcohol beverages conducted on the premises for the corporation/organization/limited liability company.

[Signature] 5-13-16 Agent's age _____
(signature of agent) (date)
1540 W. Main St L.G. WI 53147 Date of birth _____
(home address of agent)

**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 5-12-17 by [Signature] Title Police Chief
(date) (signature of proper local official) (town chair, village president, police chief)



4/2/07

5/18/05

BASEMENT

STAIRS

STAIRS

RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07/01/2017 ending: 06/30/2018
(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
Gregory James Bush 110-1 West St Lake Geneva, WI 53147
Jessica Dawn Bush 1515 Dodge St Lake Geneva, WI 53147

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>	<u>110-1 West St Lake Geneva, WI</u>	<u>53147</u>
Vice President/Member	<u>Jake Bush</u>	<u>2215 S Choptank St Denver, CO</u>	<u>80223</u>
Secretary/Member	<u>Jessica Bush</u>	<u>1515 Dodge St Lake Geneva, WI</u>	<u>53147</u>
Treasurer/Member	<u>Grace Bush</u>	<u>2741 N Russell St #2 Chicago, IL</u>	<u>60614</u>
Agent	<u>Jessica Bush</u>		
Directors/Managers			

C. 1. Trade Name L & B Mainstreet LLC Business Phone Number 262 903 2486 008

2. Address of Premises 747 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.) basement, beer garden, loft, coolers

5. Legal description (omit if street address is given above): MATH BAR area, 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 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 applicant, State of Wisconsin, and partnership applicant must sign; corporate officer(s), members/managers of Limited Liability Companies must sign.)

SUBSCRIBED AND SWORN TO BEFORE ME this 25 day of April, 20 17

Notary Public
Sabrina M. Waswo

Sabrina M. Waswo
(Clerk/Notary Public)

My commission expires 7-20-2019

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

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

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

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>4/25/17</u>	Date reported to council/board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

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 the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

Town

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

City

The undersigned duly authorized officer(s)/members/managers of L+B Mainstreet
(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

Champs Sports Bar & Grill
(trade name)

located at 747 W Main St Lake Geneva, WI 53147

appoints Jessica Bush
(name of appointed agent)

1515 Dodge St Lake Geneva WI 53147
(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? _____

Place of residence last year 1515 Dodge St

For: L+B Mainstreet LLC / Champs
(name of corporation/organization/limited liability company)

By: Jessica Bush
(signature of Officer/Member/Manager)

And: Jess Bush
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, Jessica Bush, 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.

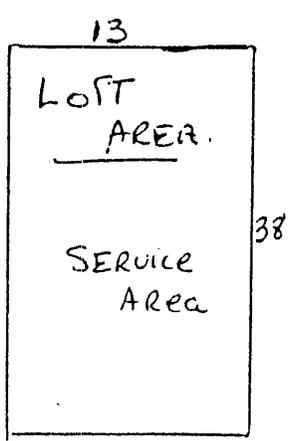
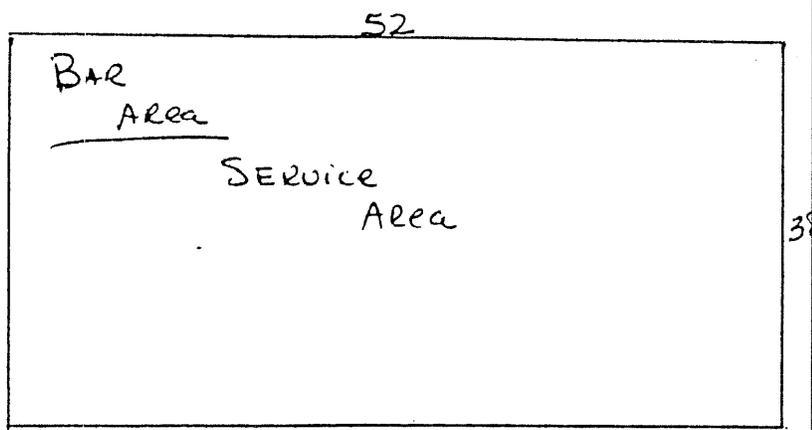
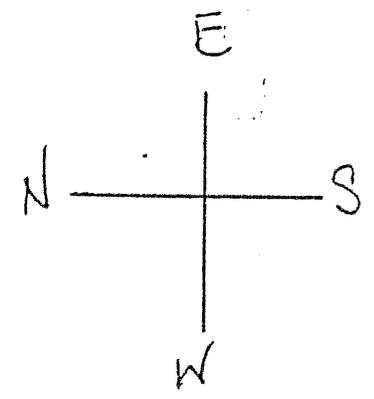
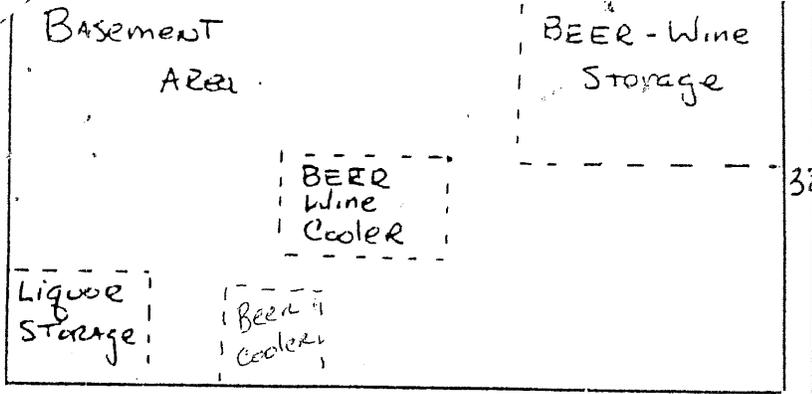
Jess Bush 9/24/17 Agent's age _____
(signature of agent) (date)

1515 Dodge St Lake Geneva, WI Date of birth _____
(home address of agent)

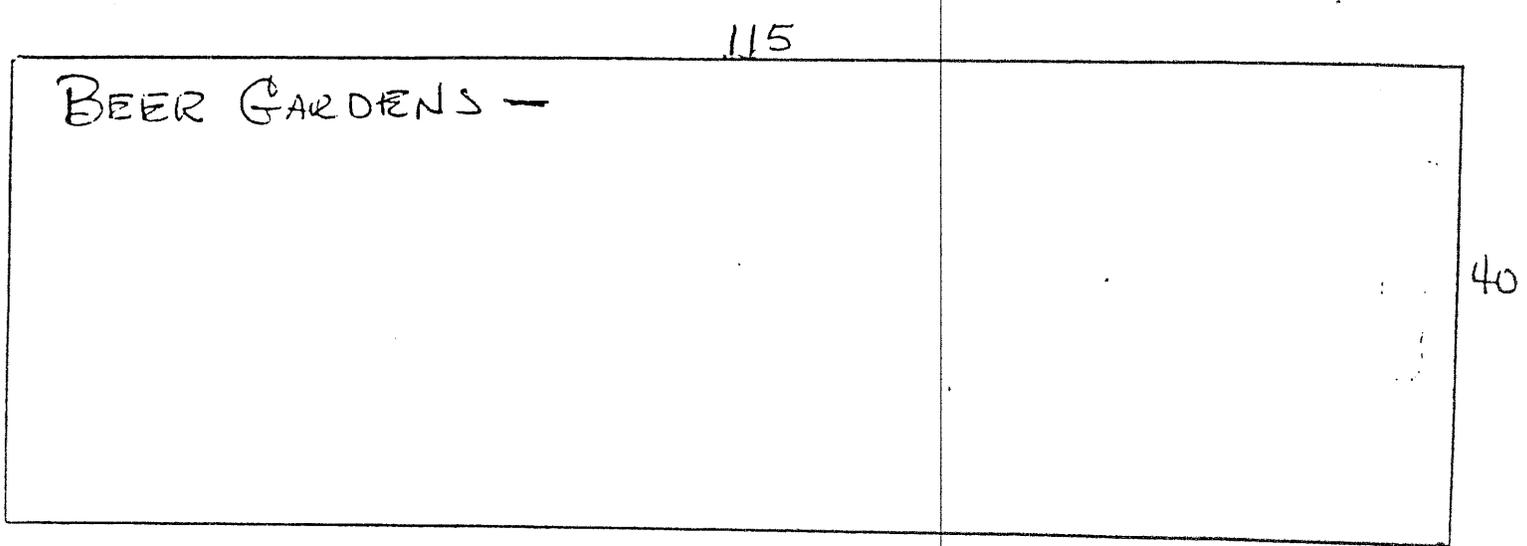
**APPROVAL OF AGENT BY MUNICIPAL AUTHORITY
(Clerk cannot sign on behalf of Municipal Official)**

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.

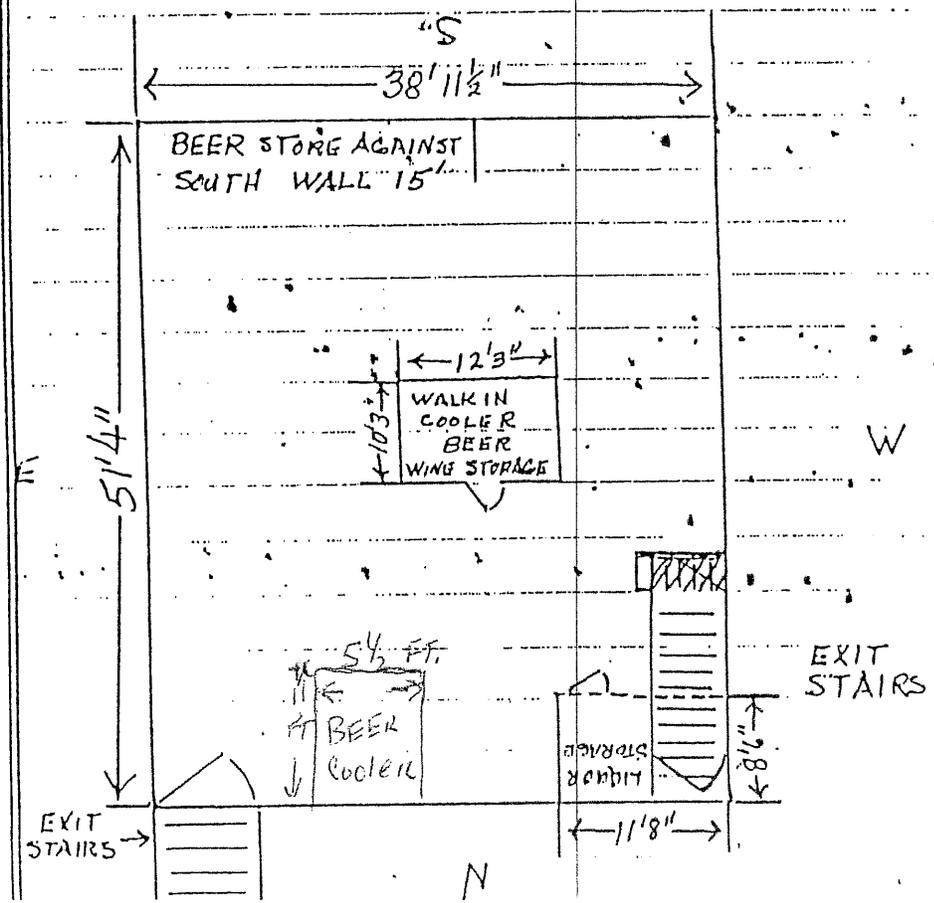
Approved on 5-1-17 by [Signature] Title Police Chief
(date) (signature of proper local official) (town chair, village president, police chief)

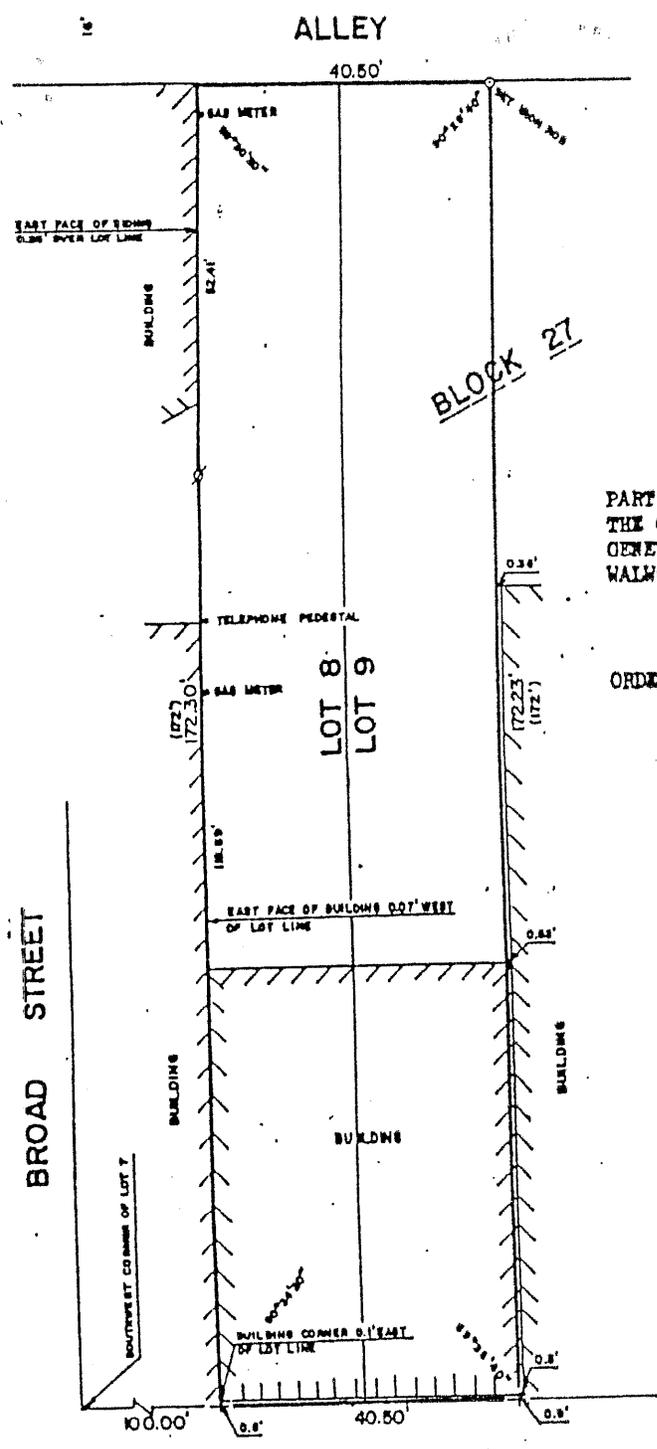


Champs Sports BAR
 747 MAIN ST.
 LAKE GEORGE Ws
 53147



This chart is NOT drawn to scale. Shows the area where Alcoholic Beverages are stored, sold or serviced.





BLOCK 27

PLAT OF SURVEY OF
 PART OF LOTS 8 AND 9, BLOCK 27 OF
 THE ORIGINAL PLAT OF THE VILLAGE OF
 GENEVA (NOW CITY OF LAKE GENEVA),
 WALWORTH COUNTY, WISCONSIN.

ORDERED BY: CHARLES LOTH
 747 WEST MAIN STREET
 LAKE GENEVA, WISCONSIN

BROAD STREET

MAIN STREET



SCALE: 1"=20'

o - IRON ROD FOUND
 + - CUT CROSS IN CONCRETE
 () - RECORDED AS

I, ROBERT M. BAERENWALD, DO HEREBY CERTIFY THAT I
 HAVE SURVEYED THE PROPERTY HEREON DESCRIBED ACCORDING
 TO THE OFFICIAL RECORDS AND THAT THE PLAT HEREON IS A
 CORRECT REPRESENTATION OF THE PROPERTY LINES TO THE
 BEST OF MY KNOWLEDGE AND BELIEF.

Robert M. Baerenwald
 ROBERT M. BAERENWALD
 WISCONSIN REGISTERED LAND SURVEYOR, S-1508

March 16, 1987
 DATE: _____ JOB NO. 0956

NOTE: THIS IS NOT A CERTIFIED COPY UNLESS SEALED.

RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07/01/2017 ending: 06/30/2018
(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.:		FEIN Number:	
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		\$	25.00
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) Basil, Mark D Home Address 1881 Dodge St. L.6. Post Office & Zip Code 53147

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company ▶ Chubby Kitty LLC DBA Fat Cats
 Address of Corporation/Limited Liability Company (if different from licensed premises) ▶ 104 Broad St. L.6. 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 Mark D Basil 1881 Dodge St L.6. 53147
 Vice President/Member _____
 Secretary/Member _____
 Treasurer/Member _____
 Agent ▶ Mark D Basil 1881 Dodge St L.6. 53147
 Directors/Managers _____

C. 1. Trade Name ▶ FAT CATS Business Phone Number 262 248 6838
 2. Address of Premises ▶ 104 Broad St L.6 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.) 104 Broad St UPSTAIRS + DOWNSTAIRS
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 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 13 day of May, 2017
Stephanie Dunclison (Clerk/Notary Public)
 My commission expires 4/13/18
Mark Basil (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)

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>5-5-2017</u>	Date reported to council/board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

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 the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

Town

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

The undersigned duly authorized officer(s)/members/managers of Chubby Betty 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 Fat Cat's
(trade name)

located at 104 Broad St.

appoints Mark Basil
(name of appointed agent)

1881 Dodge St. L.G. WI 53147
(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? 20 years

Place of residence last year 1881 Dodge St.

For: Chubby Betty LLC
(name of corporation/organization/limited liability company)

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

And: _____
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, Mark Basil, 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] 5-5-17 Agent's age _____
(signature of agent) (date)

1881 Dodge St. Date of birth _____
(home address of agent)

**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 5-12-17 by [Signature] Title Police Chief
(date) (signature of proper local official) (town chair, village president, police chief)

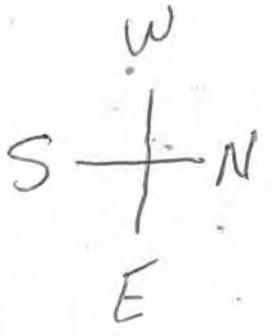
STAIRS

Video
CAMP

OFFICE

Womens
Bathroom

Mens
Bathroom



Pool
Table

Jukebox

ATM

Video

Nat'l

Video

Games

1st FLOOR

BAR

TAPS

LIQUOR

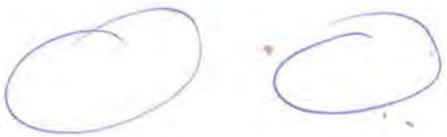


FAT CATS

104 BROAD ST

Liquor
Storage

1st Floor



Liquor Storage

2022

Stairs

Liquor Storage

Emergency Exit

Hallway



ice

Beer & Cooler
= Basement =

FAT CATS
104 Broad St
Basement

RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07 01 2017 ending: 06 30 2018
(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	W3441 MCDONALD ROAD, LAKE GENEVA, WI	53147
Vice President/Member			
Secretary/Member	LINDA CHIRONIS	W3441 MCDONALD ROAD, LAKE GENEVA, WI	53147
Treasurer/Member	LINDA CHIRONIS	W3441 MCDONALD ROAD, LAKE GENEVA, WI	53147
Agent	LINDA CHIRONIS	W3441 MCDONALD ROAD, LAKE GENEVA, WI	53147
Directors/Managers	LINDA CHIRONIS, RANDI TOMPKINS		

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>

- C. 1. Trade Name HOGS & KISSES Business Phone Number 262-248-7447
2. Address of Premises 149 BROAD STREET 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 STREET
5. Legal description (omit if street address is given above): Bar, Restaurant, Storage Room, 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? Yes No
 [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

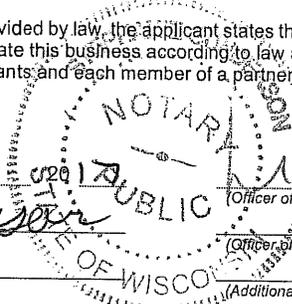
READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signers. Signers agree to operate this business according to law and that the rights and responsibilities conferred by the 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 1 day of May

Stephanie Henderson
(Clerk/Notary Public)

My commission expires 4/13/18



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

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

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

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>5/1/17</u>	Date reported to council/board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

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 the officer(s) of the corporation/organization or members/managers 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(s)/members/managers of HOGS & KISSES, INC
(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 HOGS & KISSES
(trade name)

located at 149 BROAD STREET, LAKE GENEVA, WI 53147

appoints LINDA CHIRONIS
(name of appointed agent)

W3441 MCDONALD ROAD, LAKE GENEVA, WI 53147
(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? 34 YEARS

Place of residence last year W3441 MCDONALD ROAD, LAKE GENEVA, WI 53147

For: HOGS & KISSES
(name of corporation/organization/limited liability company)

By: _____
(signature of Officer/Member/Manager)

And: _____
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, LINDA CHIRONIS, 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.

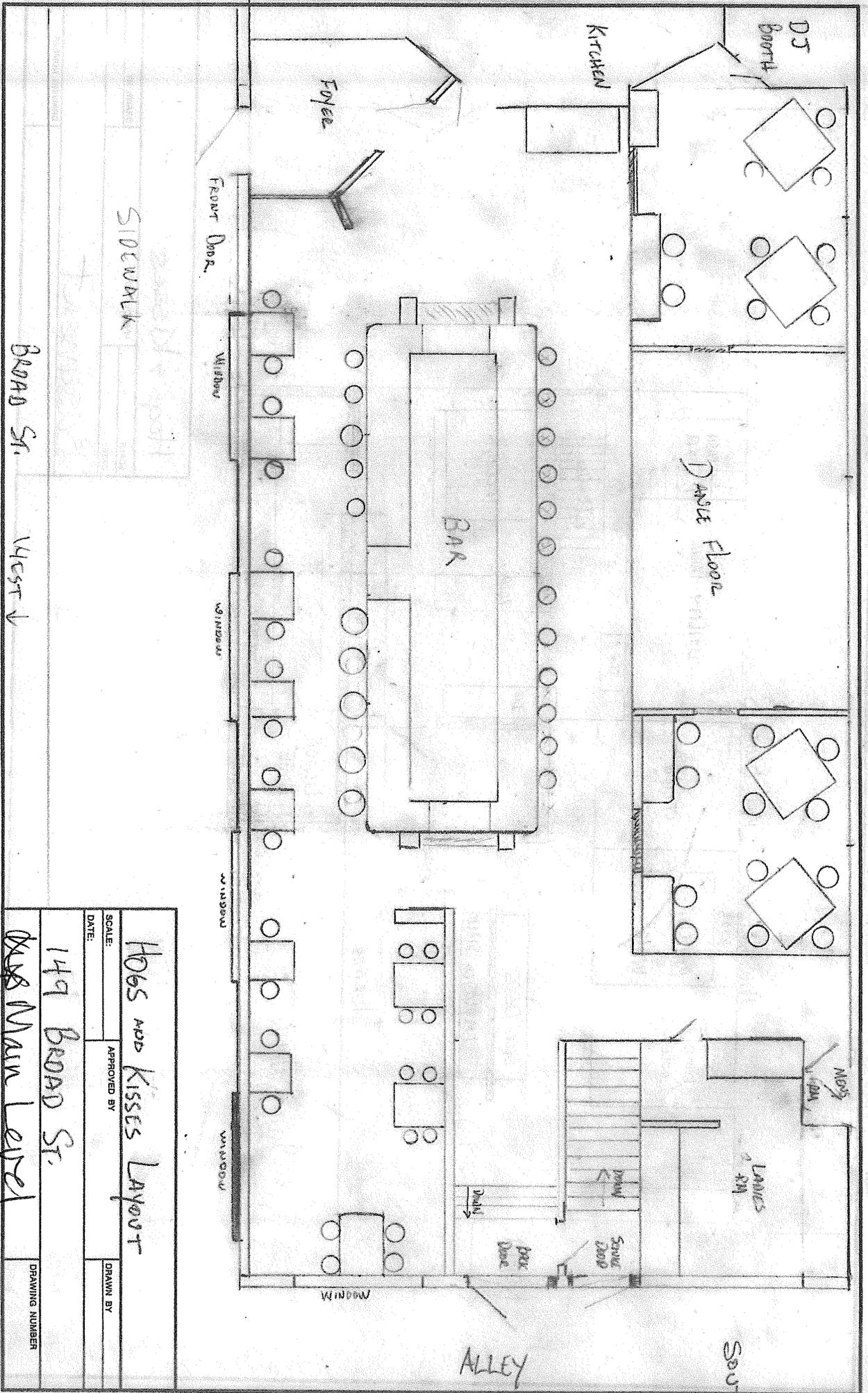
Linda Chironis _____ Agent's age _____
(signature of agent) (date)

W3441 MCDONALD ROAD, LAKE GENEVA, WI 53147 Date of birth _____
(home address of agent)

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.

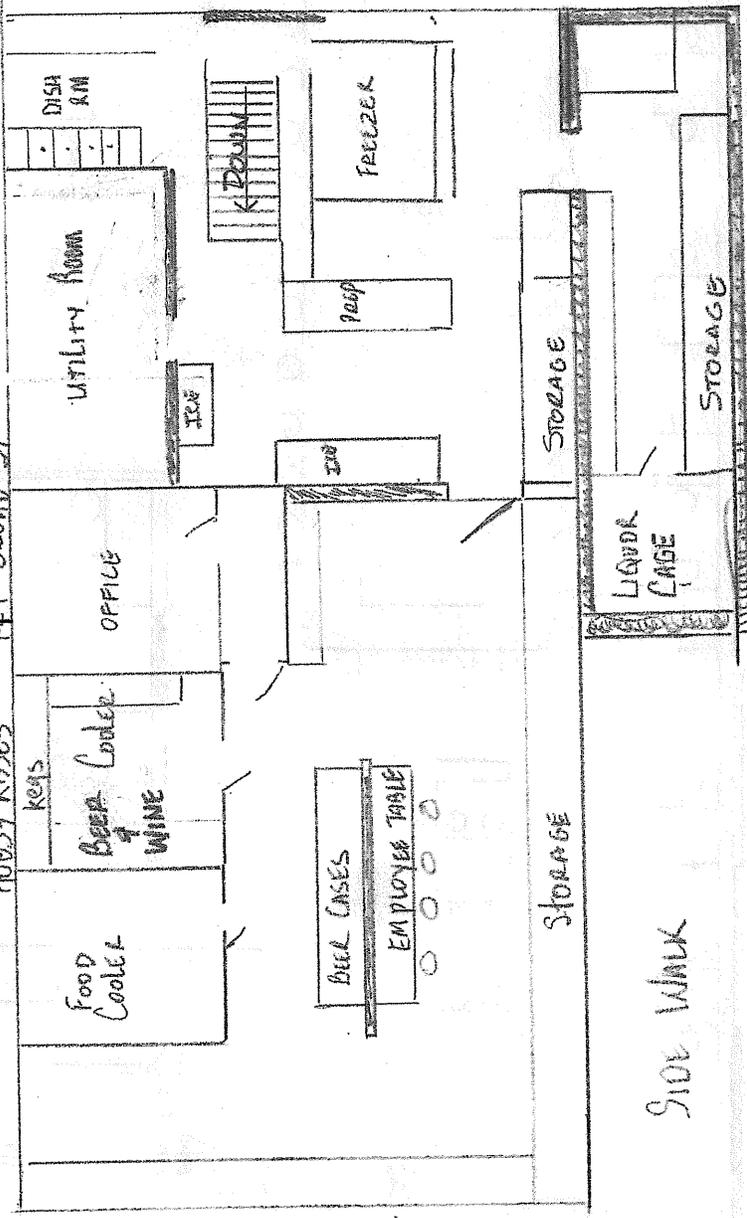
Approved on 5-2-17 by [Signature] Title Chief of Police
(date) (signature of proper local official) (town chair, village president, police chief)



PROFESSIONAL SEAL NO. 18841317

<p>Hogs and Kisses Layout</p>	
<p>SCALE:</p>	<p>APPROVED BY:</p>
<p>DATE:</p>	<p>DRAWN BY:</p>
<p>149 BROAD ST.</p>	<p><i>[Signature]</i></p>
<p>BROAD ST. WEST ↓</p>	<p>DRAWING NUMBER</p>

Hoggs Kisses 49 Broad St



NORTH
←

Hoggs Kisses

SCALE:	APPROVED BY:	DRAWN BY:
DATE:		

Basement

DRAWING NUMBER

ORIGINAL ALCOHOL BEVERAGE RETAIL LICENSE APPLICATION

Submit to municipal clerk.

For the license period beginning July 1 20 17 ;
ending June 30 20 18

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): Franklin D Guske Sr, PO Box 46, W797 Myrtle Rd, Pell Lake WI 53157

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	Home Address	Post Office & Zip Code
President/Member	Franklin D. Guske Sr,	PO Box 46, W797 Myrtle Rd.	Pell Lake WI 53157
Vice President/Member	See Attached		
Secretary/Member	Anna C. Guske,	PO Box 46, W797 Myrtle Rd.,	Pell Lake WI 53157
Treasurer/Member	Anna C. Guske,	PO Box 46, W797 Myrtle Rd.,	Pell Lake WI 53157
Agent	Franklin D Guske Sr,	PO Box 46, W797 Myrtle Rd.,	Pell Lake WI 53157
Directors/Managers	See Attached		

3. Trade Name Lake Geneva Lanes Business Phone Number (262) 248-4805

4. Address of Premises 192 E. Main St., PO Box 366 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 _____ 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, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) 16 Lanes, 1st fl, 1 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? _____

12. Does the applicant understand they must file a Special Occupational Tax return (Form 5630.5) before beginning business? [phone 1-800-937-8864] Yes No

13. Does the applicant understand a Wisconsin Seller's Permit must be applied for and issued in the same name as that shown in Section 2, above? [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 signers. Signers agree to operate this business according to law and their 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 officers, members/managers 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.

SUBSCRIBED AND SWORN TO BEFORE ME

this 2nd day of May, 20 17,
Cherie Morone State of Wisconsin
(Clerk/Notary Public) County of Walworth

Franklin D. Guske Sr
(Officer of Corporation/Member/Manager of Limited Liability Company/Partner/Individual)

My commission expires 2/18/2019

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

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

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>5/2/2017</u>	Date reported to council/board	Date provisional license issued	Signature of Clerk / Deputy Clerk
Date license granted	Date license issued	License number issued	

Applicant's Wisconsin Seller's Permit Number _____	
Federal Employer Identification Number (FEIN): _____	
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 checked="" type="checkbox"/> Class B liquor	\$ <u>560</u>
<input type="checkbox"/> Reserve Class B liquor	\$
Publication fee	\$ <u>25</u>
TOTAL FEE	\$ <u>625</u>

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 the officer(s) of the corporation/organization or members/managers 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(s)/members/managers of SANDAL INC., DBA LAKE GENEVA LANES
(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 LAKE GENEVA LANES
(trade name)

located at 192 E. MAIN ST, PO BOX 366, LAKE GENEVA WI 53147

appoints FRANKLIN D GUSKE SR.
(name of appointed agent)

W797 MYRTLE RD, PO BOX 46, PELL LAKE, WI 53157
(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? _____

Place of residence last year _____

For: _____
(name of corporation/organization/limited liability company)

By: _____
(signature of Officer/Member/Manager)

And: _____
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, FRANKLIN D GUSKE SR., 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.

Franklin D Guske Sr. 4/27/2017 Agent's ag
(signature of agent) (date)

W797 MYRTLE RD, PO BOX 46, PELL LAKE, WI 53157 Date of birth _____
(home address of agent)

**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 5-12-17 by [Signature] Title Chief of Police
(date) (signature of proper local official) (town chair, village president, police chief)

16 Bowling Lanes

LOCKER ROOM

CLEANING CLOSET

LIQUOR STORE ROOM

MEN'S RESTROOM

WOMEN'S RESTROOM

PRO SHOP

COUNTER

OFFICE

KITCHEN

1st Floor lounge

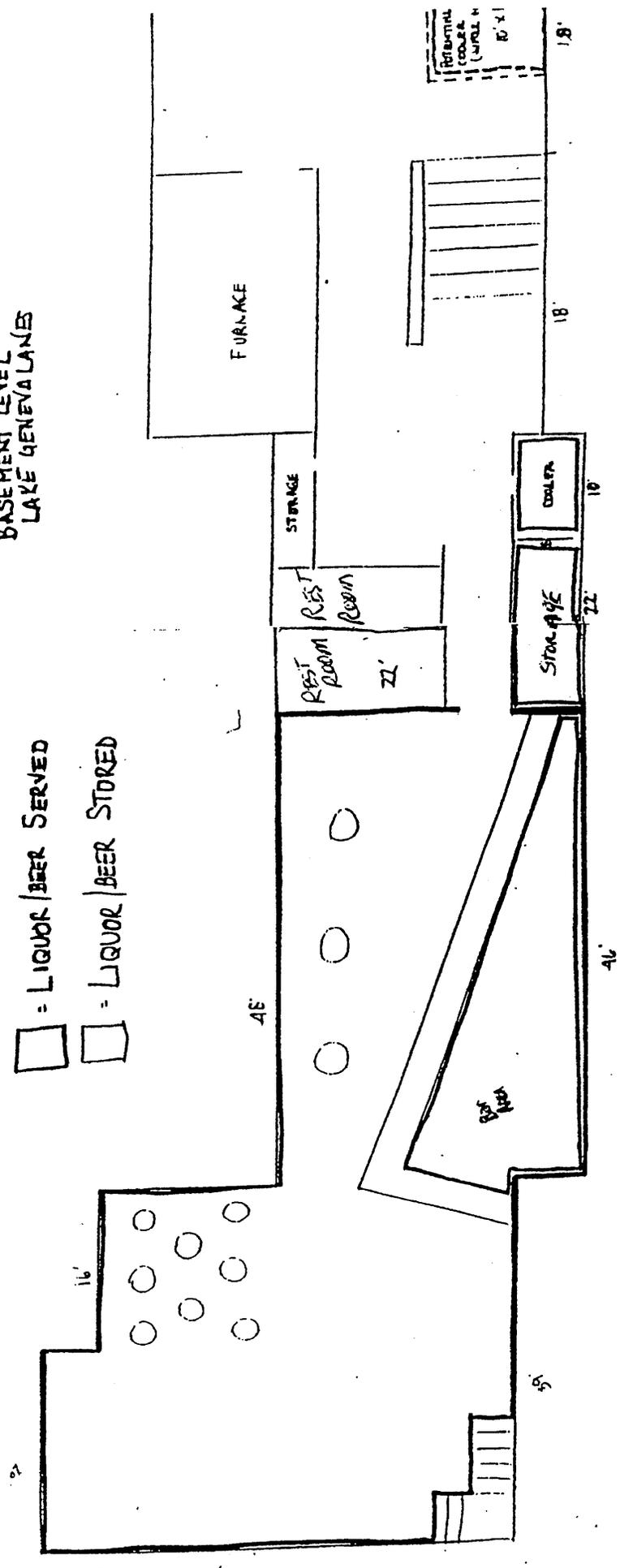
BAR

GAME ROOM



BASEMENT LEVEL
LAKE GENERAL STORE

□ = LIQUOR / BEER SERVED
 □ = LIQUOR / BEER STORED



RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07/01/2017 ending: 06/30/2018
(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 Green Bay Club LLC

Address of Corporation/Limited Liability Company (if different from licensed premises) PO Box 1087 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	<u>Charles Andrew Fritz</u>	<u>327 Wrigley Drive</u>	<u>53147</u>
Vice President/Member	_____	_____	_____
Secretary/Member	_____	_____	_____
Treasurer/Member	_____	_____	_____
Agent	<u>Charles Andrew Fritz II</u>	_____	_____
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 1087 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 Mansion, Bar, Lounge, Event Space, Basement, Carrels with pool, Records kept in Baker House 327 Wrigley Dr.

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

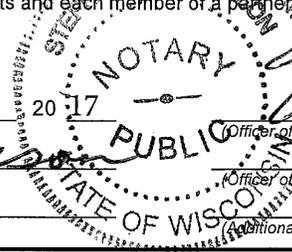
10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? Yes No

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 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 27 day of April 2017



Stephanie Gunderson (Clerk/Notary Public)
 _____ Officer of Corporation/Member/Manager of Limited Liability Company /Partner/Individual
 _____ Officer of Corporation/Member/Manager of Limited Liability Company /Partner

My commission expires 4/13/18
 _____ Additional Partner(s)/Member/Manager of Limited Liability Company if Any)

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>4/27/17</u>	Date reported to council/board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

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 the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

Town

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

City

The undersigned duly authorized officer(s)/members/managers of GENEVA BAY CLUB, 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 MAXWELL MANSION
(trade name)

located at 421 BAKER STREET, LAKE GENEVA, WI, 53147

appoints CHARLES ANDREW FRITZ, IV
(name of appointed agent)

327 WRIGLEY DRIVE, LAKE GENEVA WI 53147
(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).

STONE SOUP, LLC

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? SEVEN YEARS

Place of residence last year 327 WRIGLEY DRIVE, LAKE GENEVA, WI 53147

For: GENEVA BAY CLUB, LLC
(name of corporation/organization/limited liability company)

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

And: _____
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, CHARLES ANDREW FRITZ, 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] 4/4/10
(signature of agent) (date)

Agent's age _____

327 WRIGLEY DRIVE, LAKE GENEVA WI 53147
(home address of agent)

Date of birth _____

**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 5-2-17 by [Signature] Title Police Chief
(date) (signature of proper local official) (town chair, village president, police chief)

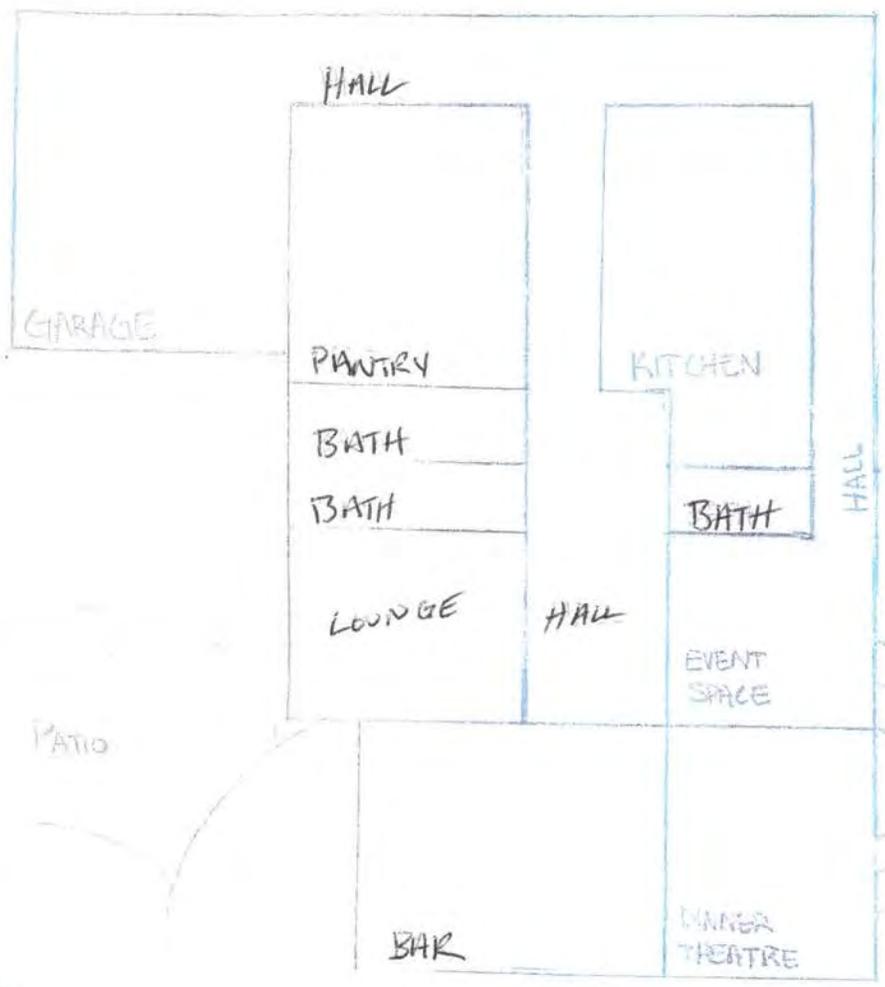
4 N

MAXWELL MANSION 1856

421 BAKER STREET

2/1/23

ENCLOSED PROPERTY



REAR OUTDOOR POOL
← PRIVACY FENCE →

ENCLOSED PROPERTY FENCE

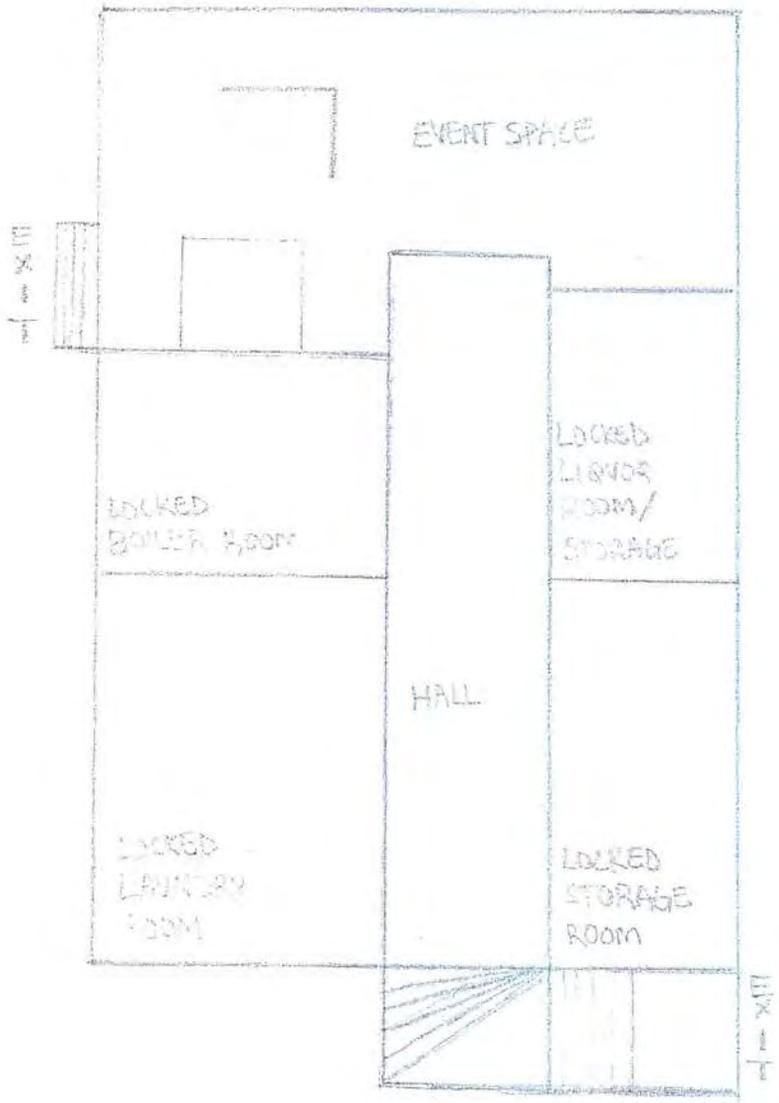
ENCLOSED PROPERTY FENCE

Alcohol To be SERVED:

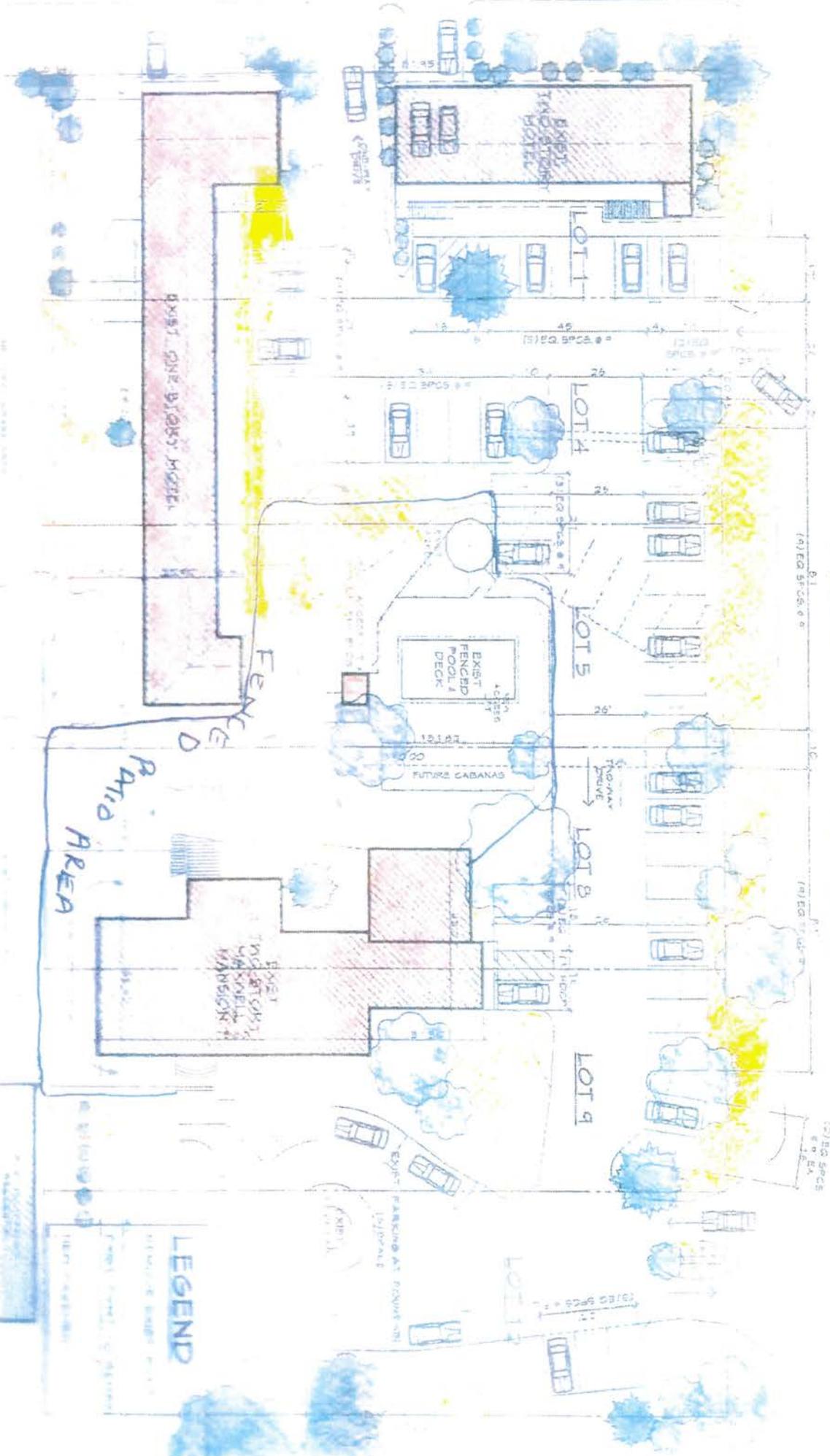
- Event Space
- Dinner Theater
- BAR / LOUNGE
- SPEAKEASY-EVENT SPACE

SEASONALLY: POOL/GAZEBO

AZ



MELLS STREET



Vertical text on the left side of the plan, possibly a title or reference number, oriented vertically.

LEGEND

FENCED
PAVED
AREA

EXIST. ONE-BLOCK MODEL

EXIST.
FENCED
POOL &
DECK

EXIST.
TWO-BLOCK
MAXWELL
MARSH

EXIST.
TWO-BLOCK
HOTEL

LOT 1

LOT 4

LOT 5

LOT 8

LOT 9

LOT 11

EXIST. PARKING AT FRONT OF LOT 11

THRUWAY DRIVE

FUTURE CABANAS

EXIST. PARKING AT FRONT OF LOT 11

RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07/01/2017 ending: 06/30/2018
(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 ▶ DCR Restaurant Group, LLC
 Address of Corporation/Limited Liability Company (if different from licensed premises) ▶ 411 Interchange N. L.G. 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>	<u>919 Platt Ave Lake Geneva, WI</u>	<u>53147</u>
Vice President/Member	<u>Rick Bittner</u>	<u>259 Skyline, Lake Geneva, WI</u>	<u>53147</u>
Secretary/Member			
Treasurer/Member			
Agent	<u>Chad Bittner</u>	<u>919 Platt Ave Lake Geneva, WI</u>	<u>53147</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, 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 Area, Patio
5. Legal description (omit if street address is given above): Office, full Anniversary Party, outdoor waiting area
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 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 3 day of May, 20 17
Sabrina M. Wanko
(Clerk/Notary Public)
 My commission expires 7-20-2019

[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)

TO BE COMPLETED BY CLERK		
Date received and filed with municipal clerk <u>5-3-2017</u>	Date reported to council/board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

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	\$ 25.00
TOTAL FEE	\$ <u>625-</u>

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 the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

Town

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

City

The undersigned duly authorized officer(s)/members/managers of DCR Restaurant Group 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

Next Door Pub & Pizzeria
(trade name)

located at 411 Interchange N. Lake Geneva, WI 53147.

appoints Chad Bittner
(name of appointed agent)

919 Platt Ave. Lake Geneva, WI 53147
(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? 16 yrs

Place of residence last year Lake Geneva, WI

For: DCR Restaurant Group LLC
(name of corporation/organization/limited liability company)

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

And: _____
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, Chad Bittner, 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] 4/10/17
(signature of agent) (date)

Agent's age _____

919 Platt Ave Lake Geneva, WI 53147
(home address of agent) Date of birth _____

**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 5-12-17 by [Signature] Title Police Chief
(date) (signature of proper local official) (town chair, village president, police chief)

The Next Door Pub & Pizzeria, 411 Interchange N, Lake Geneva, WI 53147



RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07/01/2017 ending: 06/30/2018
(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 SWATEK SALES CORP. / SS 2 INC
 Address of Corporation/Limited Liability Company (if different from licensed premises) 3937 EDWARDS BLVD. LK. 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	<u>WYLLIE H. SWATEK</u>	<u>2873 DERRICK RD. DUNELINGTON, WI</u>	<u>53105</u>
Vice President/Member			
Secretary/Member			
Treasurer/Member			
Agent	<u>WYLLIE H. SWATEK</u>		
Directors/Managers			

C. 1. Trade Name THE RED BERANIUM RESTAURANT Business Phone Number 262-248-3637
 2. Address of Premises 3937 EDWARDS BLVD. Post Office & Zip Code LK. GENEVA, WI 5347

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 CONCRETE 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 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 07 day of July, 20 17
David A. Clark
(Clerk/Notary Public)
 My commission expires 01/27/18

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

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>5-3-2017</u>	Date reported to council/board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

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 the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

Town

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

City

The undersigned duly authorized officer(s)/members/managers of SWATEK SALES CORP / SSR INC
(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 THE RED GERANIUM RESTAURANT
(trade name)

located at 393 W. EDWARDS BLVD. LAKE GENEVA, WI 53147

appoints LYLE H. SWATEK
(name of appointed agent)
2873 BERNDT RD. BUCKINGTON, WI 53105
(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? _____

Place of residence last year SAME AS ABOVE

For: SWATEK SALES / SSR INC
(name of corporation/organization/limited liability company)

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

And: _____
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, LYLE H. SWATEK, 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.

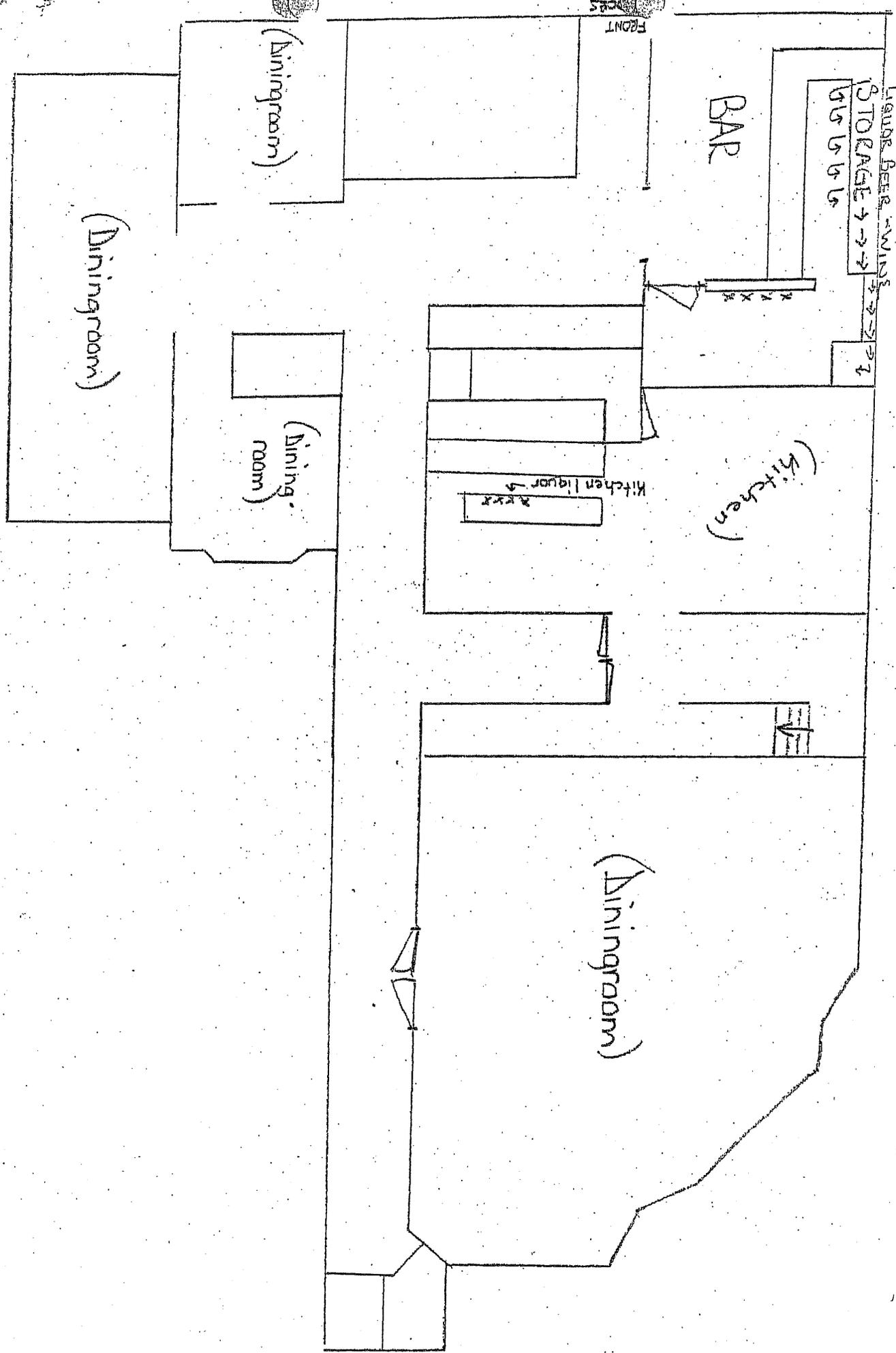
[Signature] 5/02/17 Agent's age _____
(signature of agent) (date)
2873 BERNDT RD. BUCKINGTON, WI 53105 Date of birth _____
(home address of agent)

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

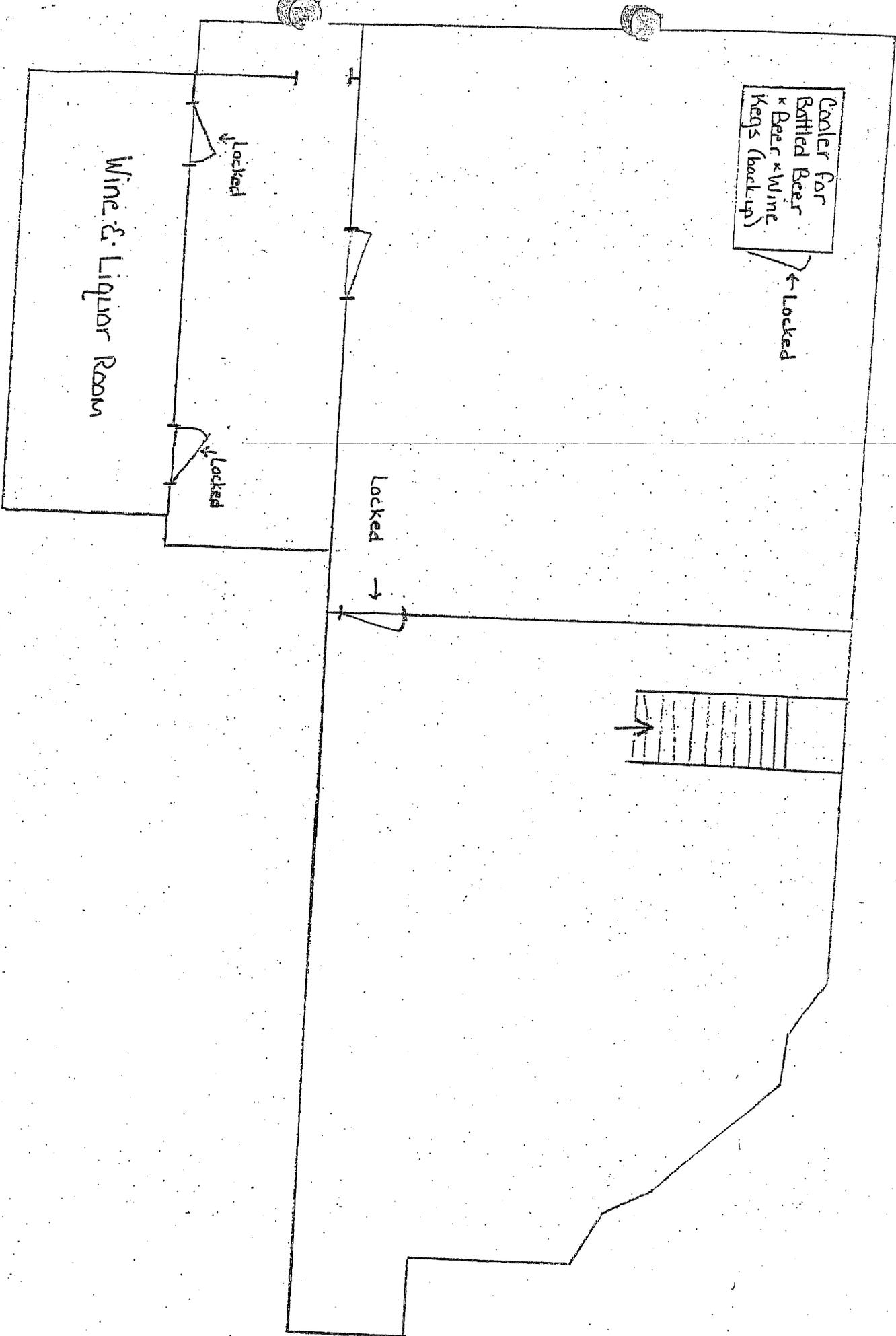
I hereby certify that I have checked municipal and state criminal records. To the best of my knowledge, with the available information, the character, record and reputation are satisfactory and I have no objection to the agent appointed.

Approved on 5-12-17 by [Signature] Title Police Chief
(date) (signature of proper local official) (town chair, village president, police chief)

Red Geranium Main Level (1st Floor)



116A Geranium Basement



RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07/01/2017 ending: 06/30/2018
(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

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>25.00</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 _____
 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>Benjamin C Borels</u>	<u>754 Willow Bend Dr</u>	<u>Watertown WI 53185</u>
Vice President/Member			
Secretary/Member			
Treasurer/Member			
Agent	<u>Benjamin Borels</u>		
Directors/Managers			

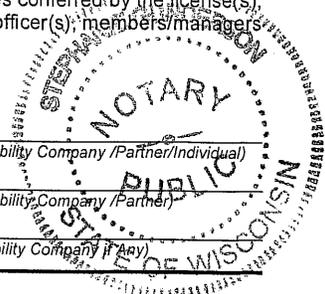
C. 1. Trade Name Thumbs up Business Phone Number 262 245 2111
 2. Address of Premises 260 Broad St Post Office & Zip Code Lake Geneva WI

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.) over
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 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 5 day of May, 20 17
Stephanie Henderson
(Clerk/Notary Public)
 My commission expires 4/13/18

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



TO BE COMPLETED BY CLERK		
Date received and filed with municipal clerk <u>5-5-2017</u>	Date reported to council/board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

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 the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

Town

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

City

The undersigned duly authorized officer(s)/members/managers of Two Thumbs Up 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

Thumbs Up Salon
(trade name)

located at 260 Broad St. Lake Geneva

appoints Benjamin Berels
(name of appointed agent)

754 Willow Bend Dr. Watertown WI 53185
(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).

Senlite Enterprises DBA Lucky Mojitos Burlington WI

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? 15 years

Place of residence last year 754 Willow Bend Dr. Watertown WI 53185

For: Two Thumbs Up
(name of corporation/organization/limited liability company)

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

And: _____
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, Benjamin C Berels
(print/type agent's name), hereby accept this appointment as agent for the

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] 5/1/2017
(signature of agent) (date)

Agent's age 31

754 Willow Bend Dr. Watertown WI 53185
(home address of agent)

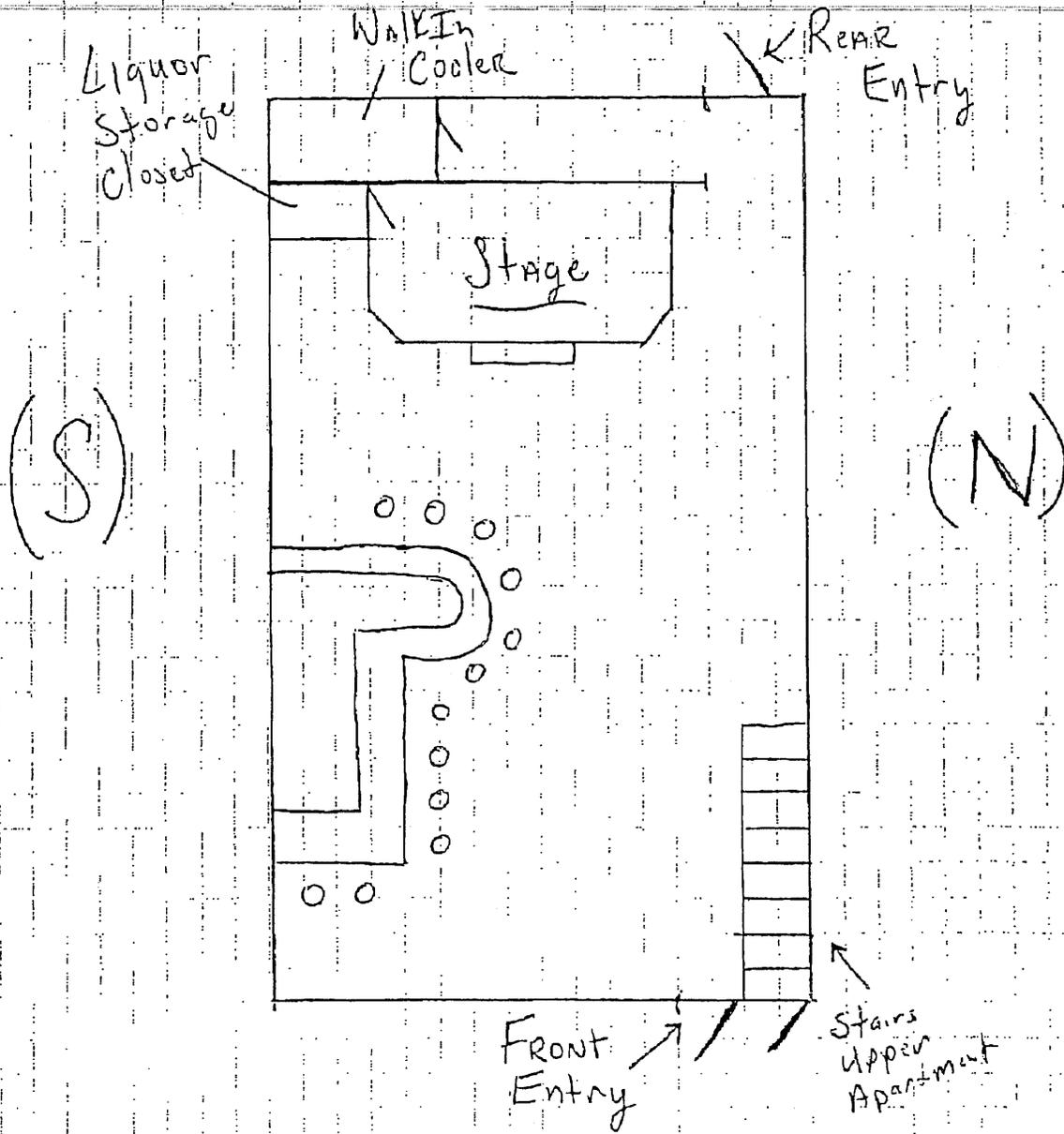
Date of birth 1/17/85

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 5.12.17 by [Signature] Title Police Chief
(date) (signature of proper local official) (town chair, village president, police chief)

"Thumbs Up"
260 BROAD ST.
LAKE Geneva, WI 53147



RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07/01/2017 ending: 06/30/2018
(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

LICENSE REQUESTED	
TYPE	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$ <u>100.00</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>625.00</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
Thomas Anthony Romano 3851 N Southport Ave Chicago IL 60613

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 Thomas Romano 3851 N Southport Ave

Vice President/Member _____

Secretary/Member _____

Treasurer/Member _____

Agent James Georgakis 529 Madison St Lake Geneva WI 53147

Directors/Managers _____

C. 1. Trade Name TUSCAN TAVERN AND CAFE Business Phone Number 262-248-0392

2. Address of Premises 433 Beacon St Post Office & Zip Code _____

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, Bar, outdoor seating area 1st floor storage

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

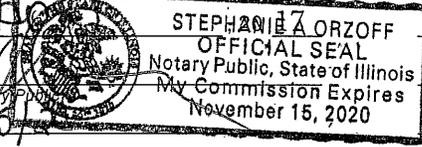
9. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776] Yes No

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 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 10th day of April 2017

Thomas Romano Officer of Corporation/Member/Manager of Limited Liability Company /Partner/Individual
Stephanie A. Orzoff Clerk/Notary Public
My commission expires 11/15/2020

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

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>4/12/17</u>	Date reported to council/board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

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 the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

Town

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

The undersigned duly authorized officer(s)/members/managers of LS Hospitality
(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 TUSCAN TAVERN and Grill
(trade name)

located at 430 BROAD ST LAKE GENÈVE WI 53147

appoints JAMES GEORGALIS
(name of appointed agent)
507 MADISON ST LAKE GENÈVE WI 53147
(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? 54 mos

Place of residence last year SAME

For: _____
(name of corporation/organization/limited liability company)

By: LS Hospitality DBA TUSCAN TAVERN and Grill
(signature of Officer/Member/Manager)

And: [Signature]
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, James Georgalis, hereby accept this appointment as agent for the
(print/type agent's name)

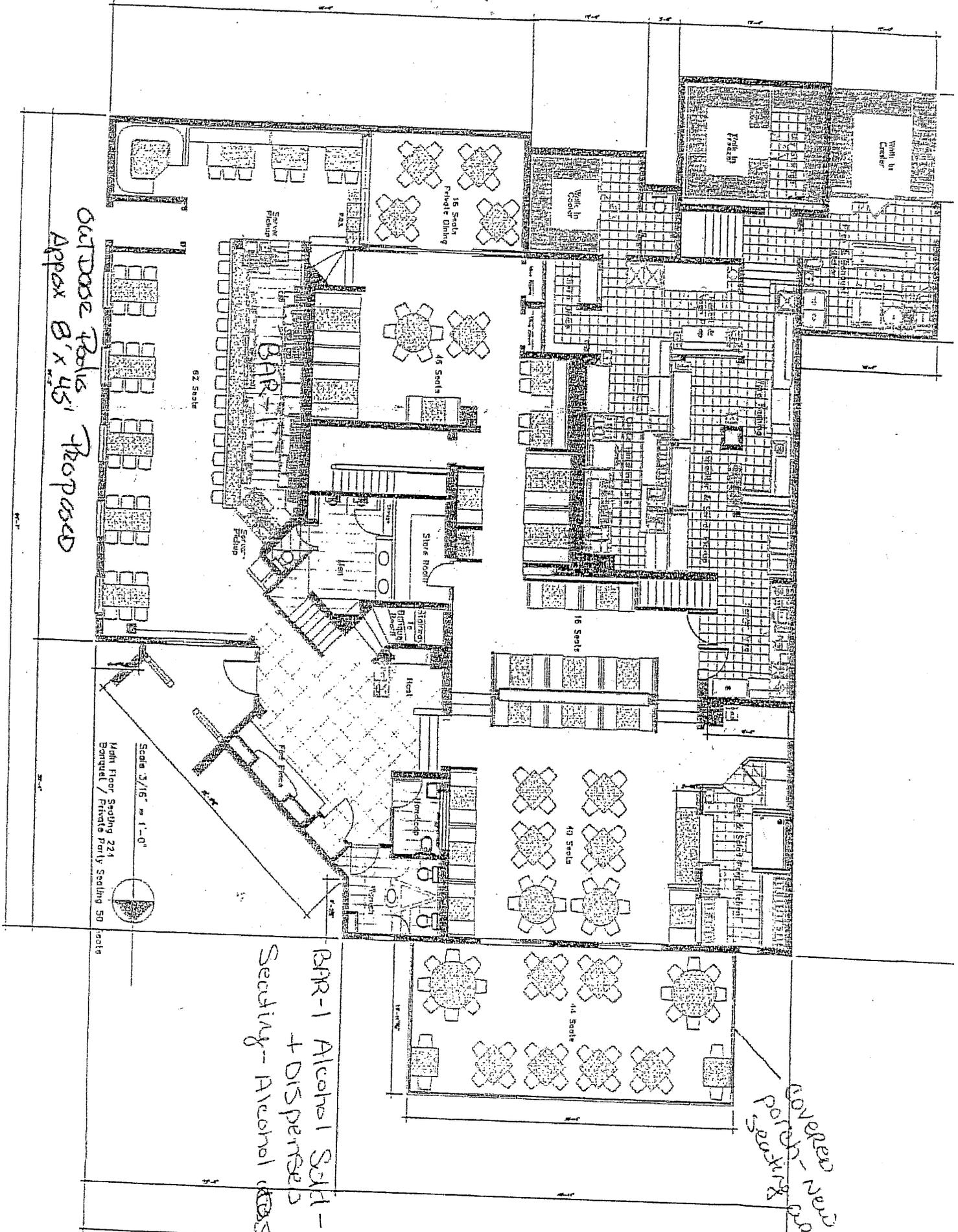
corporation/organization/limited liability company and assume full responsibility for the conduct of all business relative to alcohol beverages conducted on the premises for the corporation/organization/limited liability company.

[Signature] 4/12/17 Agent's age _____
(signature of agent) (date)
507 Madison St Lake Geneva WI 53147 Date of birth. _____
(home address of agent)

**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 4-24-17 by [Signature] Title Police Chief
(date) (signature of proper local official) (town chair, village president, police chief)



Outdoor Seating
Approx 8' x 45'

Scale 3/16" = 1'-0"
Main Floor Seating 224
Bar/Hotel / Private Party Seating 50
seats

BAR-1 Alcohol Sold - Store
+ DISPENSES
Seating - Alcohol dispenser

Covered New area
Seating

USCOM

City of Lake Geneva

Licenses Issued Between: 5/22/2017 and 5/22/2017

Date: 5/12/2017

Time: 1:23 PM

Page: 1

Operator's Regular - Original

<u>Issued</u>	<u>License No</u>	<u>Customer</u>	<u>Address</u>		<u>Total</u>
5/22/2017	2017 -90	Craig R. Evans	717 Geneva Street	Lake Geneva, WI 5	50.00
5/22/2017	2017 -91	Rhonda Holden	N295 Hillside Rd	Lake Geneva, WI 5	50.00
5/22/2017	2017 -92	Judy Honegger	W1051 Juneau Rd	Genoa City, WI 53	50.00
5/22/2017	2017 -93	Joshua G. Hughes	415 Cass St #8	Lake Geneva, WI 5	50.00
5/22/2017	2017 -94	Kelly Lei	W3537 Park Dr	Lake Geneva, WI 5	50.00
5/22/2017	2017 -95	Chelsea Matthews	5264 Warren Rd	Burlington, WI 53	50.00
5/22/2017	2017 -96	Carly Ann Sinclair	5338 State Rd 50	Burlington, WI 53	50.00

Operator's Regular

Count: 7

City of Lake Geneva

Licenses Issued Between: 5/23/2017 and 5/23/2017

Date: 5/12/2017

Time: 4:03 PM

Page: 1

Operator's Regular - Renewal

<u>Issued</u>	<u>License No</u>	<u>Customer</u>	<u>Address</u>		<u>Total</u>
5/23/2017	2017 -88	Thomas W. Trilla Employer: Barrique Wine & Brew Bar / Bea	4612 Burman Dr. 835 Wrigley Dr	Crystal Lake, IL Lake Geneva, WI 53147	50.00
5/23/2017	2017 -97	Dimitrius Anagnos Employer: Popeye's Galley & Grog, LTD DB	148 Cass St. 811 Wrigley Dr.	Lake Geneva, WI 5 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -98	Christine Lynn Anderson Employer: Stop N Go #265	903 Wells St 896 Wells St.	Lake Geneva, WI 5 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -99	Demetrius G. Argiropoulos Employer: Lake Aire LLC DBA Lake Aire Re	248 Lookout Dr 804 W Main St	Lake Geneva, WI 5 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -100	Troy A. Bartz Employer: The Red Geranium Restaurant /	1703 E Norwich 393 N. Edwards Blvd.	St. Francis, WI 5 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -101	Zachary I. Belanus Employer: Stinebrink's Piggly Wiggly	1400 Hunters Ridge Dr Uni 100 East Geneva Square	Lake Geneva, WI 5 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -102	Marilyn Bellafaire Employer: Walmart Supercenter #910	400 S Edwards Blvd #227 201 S. Edwards Blvd.	Lake Geneva, WI 5 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -103	Latrese Bishop Employer: Walmart Supercenter #910	4211 N Sherman Blvd 201 S. Edwards Blvd.	Milwaukee, WI 532 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -104	Nina T. Bowler Employer: The Red Geranium Restaurant /	6111 Water Street 393 N. Edwards Blvd.	Lyons, WI 53105 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -105	Calli A. Brellenthin Employer: DCR Restaurant Group d/b/a Nex	4948 Hickory Court 411 Interchange N.	Elkhorn, WI 53121 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -106	Wendy C. Brewington Employer: Walmart Supercenter #910	N1368 Thistle Dr. 201 S. Edwards Blvd.	Genoa City, WI 53 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -107	Tracy A. Cantu Employer: Stop N Go #265	1114 S Wells Street Apt 896 Wells St.	Lake Geneva, WI 5 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -108	David Aaron Cox Employer: Stop N Go #265	N3616 Elm Ridge Rd 896 Wells St.	Delavan, WI 53115 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -109	Elizabeth Czadzeck Employer: Walmart Supercenter #910	9416 276th Ave 201 S. Edwards Blvd.	Salem, WI 53168 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -110	Shelly Ann Day Employer: Walmart Supercenter #910	7031 Clover Ct. 201 S. Edwards Blvd.	Burlington, WI 53 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -111	Christopher A. Dopke Employer: Walmart Supercenter #910	N7330 Hwy ES 201 S. Edwards Blvd.	Elkhorn, WI 53121 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -112	Stacy Lynn Edwards Employer: Midwest Fuel Inc dba Northside	6089 S Railroad St 501 Interchange N	Lyons, WI 53148 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -113	Amy E. Eling Employer: Popeye's Galley & Grog, LTD DB	1031 Bonnie Brae Lane 811 Wrigley Dr.	Lake Geneva, WI 5 Lake Geneva, WI 53147	50.00

City of Lake Geneva

Licenses Issued Between: 5/23/2017 and 5/23/2017

Date: 5/12/2017

Time: 4:03 PM

Page: 2

Operator's Regular - Renewal

<u>Issued</u>	<u>License No</u>	<u>Customer</u>	<u>Address</u>	<u>Total</u>	
5/23/2017	2017 -114	Rachael Engelhardt Employer: Stinebrink's Piggly Wiggly	622 Walworth St 100 East Geneva Square	Lake Geneva, WI 53147 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -115	Scott R. Fazel Employer: Bella Vista Suites	114 S Wisconsin St #102 335 Wrigley Dr.	Elkhorn, WI 53121 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -116	Morgan T. Foley Employer: Thumbs Up / Two Thumbs Up LLC	118 Evelyn Lane 260 Broad St	Lake Geneva, WI 53147 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -117	Charles Andrew Fritz, IV Employer: Baker House / Stone Soup LLC	327 Wrigley Drive 327 Wrigley Dr	Lake Geneva, WI 53147 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -118	James W. Fritz Employer: Hogs & Kisses Inc	1332 Marion St. 149 Broad St	Lake Geneva, WI 53147 PO Box 536 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -120	Michael J. Fryar Employer: Stinebrink's Piggly Wiggly	4218 Locust St. 100 East Geneva Square	Delavan, WI 53115 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -121	Gweneth G. Garber Employer: The Restaurant Tempura House L	998 Timothy Dr. 306 Center St.	Lake Geneva, WI 53147 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -122	Moises Garcia Jr. Employer: DCR Restaurant Group d/b/a Nex	917 Badger Ln 411 Interchange N.	Lake Geneva, WI 53147 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -123	Barbara C. Godan Employer: Walmart Supercenter #910	715 Tenderfoot Trail 201 S. Edwards Blvd.	Eagle, WI 53119 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -124	Marianne Goodfellow Employer: Popeye's Galley & Grog, LTD DB	6322 Second Avenue 811 Wrigley Dr.	Lake Geneva, WI 53147 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -125	Alexander H. Gygax Employer: Sprecher's Restaurant & Pub /	1118 Wisconsin St 111 Center Street	Lake Geneva, WI 53147 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -126	Dawn D. Hancock Employer: Walmart Supercenter #910	421 Walworth St. 201 S. Edwards Blvd.	Lake Geneva, WI 53147 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -127	Connie L. Howen Employer: DCR Restaurant Group d/b/a Nex	N4449 County Road H 411 Interchange N.	Elkhorn, WI 53121 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -128	Bridget Ann Ieronimo Employer: Walgreens #5600	N2341 Shore View Dr 351 N Edwards Blvd	Lake Geneva, WI 53147 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -129	Cheryl Ann Jarka Employer: Sopra / Geneagles LLC	79 Eagle Point Road 724 W. Main Street	Fox Lake, IL 6002 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -130	Jessica J. Jenner Employer: DCR Restaurant Group d/b/a Nex	W3566 Park Dr. 411 Interchange N.	Lake Geneva, WI 53147 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -131	Kevin R. Kazimier Employer: Lake Aire LLC DBA Lake Aire Re	403 Tower Ave 804 W Main St	Genoa City, WI 53147 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -132	Thomas H. Kelley Employer: Stop N Go #265	N2425 Phyllis Wheatly Dr. 896 Wells St.	Burlington, WI 53147 Lake Geneva, WI 53147	50.00

City of Lake Geneva

Licenses Issued Between: 5/23/2017 and 5/23/2017

Date: 5/12/2017

Time: 4:03 PM

Page: 3

Operator's Regular - Renewal

<u>Issued</u>	<u>License No</u>	<u>Customer</u>	<u>Address</u>		<u>Total</u>
5/23/2017	2017 -133	Karen Kube Employer: The Red Geranium Restaurant /	23323 83rd PL 393 N. Edwards Blvd.	Salem, WI 5316853 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -134	Ran Si Lei Employer: Su Wings Corp DBA Su Wing's Ch	W3537 Park Drive 743 North St.	Lake Geneva, WI 5 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -135	Laura Lopresto Employer: Walmart Supercenter #910	673 Bluebill Lane 201 S. Edwards Blvd.	Genoa City, WI 53 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -136	Rachel Mapes Employer: The Cove of Lake Geneva / Cove	W1226 N Lake Shore Dr 111 Center St.	Genoa City, WI 53 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -137	Britta Enre Martisse Employer: Stop N Go #265	1321 W Main Street #204A 896 Wells St.	Lake Geneva, WI 5 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -138	Jacob Michael McGuire Employer: Stop N Go #265	22826 83rd St 896 Wells St.	Salem, WI 53168 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -139	Traci A. Millard Employer: Stop N Go #265	816 West St. 896 Wells St.	Beloit, WI 53511 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -140	Sheila F. Miller Employer: Walmart Supercenter #910	47 N. Walworth 201 S. Edwards Blvd.	Darien, WI 53114 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -142	Amanda J. Morales Employer: DCR Restaurant Group d/b/a Nex	1705 Hwy 120 411 Interchange N.	Springfield, WI 5 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -143	Jean M. Morales Employer: Popeye's Galley & Grog, LTD DB	130 Pearson Dr. 811 Wrigley Dr.	Lake Geneva, WI 5 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -144	Klaus Helmuth Nitsch Employer: Gino's East DBA GE Geneva, LL	826 Vanslyke Dr 300 Wrigley Drive	Fontana, WI 53125 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -145	Jennifer M. Odegaard Employer: Sprecher's Restaurant & Pub /	1700 Miller Rd 111 Center Street	Lake Geneva, WI 5 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -146	Dawn Noel Ogren Employer: Popeye's Galley & Grog, LTD DB	240 Jackson Street 811 Wrigley Dr.	Darien, WI 53114 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -147	Robert S. Peters Employer: Stinebrink's Piggly Wiggly	7185 Buckby Rd 100 East Geneva Square	Lake Geneva, WI 5 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -148	Daniel Pieratos Employer: Popeye's Galley & Grog, LTD DB	114 Hank Jay Drive, Unit 811 Wrigley Dr.	Lake Geneva, WI 5 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -149	Chuck Pietsch Employer: The Red Geranium Restaurant /	N3394 Oak Rd 393 N. Edwards Blvd.	Lake Geneva, WI 5 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -150	Linda M. Pietsch Employer: The Red Geranium Restaurant /	N3394 Oak Rd. 393 N. Edwards Blvd.	Lake Geneva, WI 5 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -151	Barbara Ann Plaza Employer: Walmart Supercenter #910	W933 Myrtle Rd 201 S. Edwards Blvd.	Geona City, WI 53 Lake Geneva, WI 53147	50.00

City of Lake Geneva

Licenses Issued Between: 5/23/2017 and 5/23/2017

Date: 5/12/2017

Time: 4:03 PM

Page: 4

Operator's Regular - Renewal

<u>Issued</u>	<u>License No</u>	<u>Customer</u>	<u>Address</u>		<u>Total</u>
5/23/2017	2017 -152	Austen E. Racette Employer: Sopra / Gleneagles LLC	2722 Henzada Avene 724 W. Main Street	McHenry, IL 60050 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -153	Eric C. Rude Employer: DCR Restaurant Group d/b/a Nex	929 Marshall St 411 Interchange N.	Lake Geneva, WI 5 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -154	Teresa Ann Schneider Employer: The Bottle Shop / Mercedes Or	469 Country Club Dr #3 617 W Main St	Lake Geneva, WI 5 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -155	Daniel Benjamin Schroeder Employer: Gino's East DBA GE Geneva, LL	713 S. Lakeshore Drive, U 300 Wrigley Drive	Lake Geneva, WI 5 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -156	Jesse C. Skewes Employer: DCR Restaurant Group d/b/a Nex	1635 Walberg Rd 411 Interchange N.	Burlington, WI 53 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -157	Roxanne C. Smith Employer: Su Wings Corp DBA Su Wing's Ch	1230 Tomike St. 743 North St.	Lake Geneva, WI 5 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -158	Johnathan E. Steltenpohl Employer: Stinebrink's Piggly Wiggly	506 W Walworth St 100 East Geneva Square	Elkhorn, WI 53121 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -159	David Jerome Stinebrink Employer: Stinebrink's Piggly Wiggly	400 S. Creek Drive 100 East Geneva Square	Elkhorn, WI 53121 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -160	Timothy Jon Stinebrink Employer: Stinebrink's Piggly Wiggly	1502 Conant St. 100 East Geneva Square	Lake Geneva, WI 5 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -162	Jeremiah VanDan Employer: Walgreens #5600	1220 Barnes St 351 N Edwards Blvd	Delavan, WI 53115 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -163	Deiona Gail Villiard Employer: Stop N Go #265	W184 Hilltop Rd 896 Wells St.	Genoa City, WI 53 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -164	Chaz T. Wagner Employer: Baker House / Stone Soup LLC	421 Baker St 327 Wrigley Dr	Lake Geneva, WI 5 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -165	Noelle L. Warntjes Employer: The Red Geranium Restaurant /	264 Shenandoah Ct 393 N. Edwards Blvd.	Burlington, WI 53 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -166	Dianne Louise Watson Employer: The Bottle Shop / Mercedes Or	670 Southwind Dr. Apt. 20 617 W Main St	Lake Geneva, WI 5 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -168	Ryan White Employer: Sprecher's Restaurant & Pub /	N1555 Linn Rd 111 Center Street	Lake Geneva, WI 5 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -169	Denise Marie Whitehead Employer: The Red Geranium Restaurant /	1620 Willow Rd 393 N. Edwards Blvd.	Twin Lakes, WI 53 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -170	Emily Wise Employer: Lake Aire LLC DBA Lake Aire Re	1050 Cumberland Trail 804 W Main St	Lake Geneva, WI 5 Lake Geneva, WI 53147	50.00
5/23/2017	2017 -171	Cynthia A. Wisniewski Employer: Stinebrink's Piggly Wiggly	W1148 Celandine Road, Pell Lake, WI 100 East Geneva Square		50.00

Count: 72

City of Lake Geneva

Licenses Issued Between: 5/22/2017 and 5/22/2017

Date: 5/12/2017

Time: 4:45 PM

Page: 1

Taxi Cab Driver - Renewal

<u>Issued</u>	<u>License No</u>	<u>Customer</u>	<u>Address</u>		<u>Total</u>
5/22/2017	2017 -2	Russell G. Ford Employer: N & T Enterprises, Inc. D/B/A	214 S. 6th Street 112 S 4TH STREET	Delavan, WI 53115 Delavan, WI 53115	25.00
5/22/2017	2017 -3	Kristin Hannah Employer: Luxury Car Service	1185 Elm Street 1185 Elm Street	Lake Geneva, WI 5 Lake Geneva, WI 53147	25.00
5/22/2017	2017 -5	Gordon E. Perlee III Employer: Senior Cab Plus, LLC	225 Country Club Dr. #3C W3099 Krueger Rd.	Lake Geneva, WI 5 Lake Geneva, WI 53147	25.00
5/22/2017	2017 -6	Robert K. Phelps Employer: N & T Enterprises, Inc. D/B/A	1012 Lake Geneva Blvd. 112 S 4TH STREET	Lake Geneva, WI 5 Delavan, WI 53115	25.00
5/22/2017	2017 -7	David Rock Employer: N & T Enterprises, Inc. D/B/A	1325 E Memorial Dr 112 S 4TH STREET	Janesville, WI 53 Delavan, WI 53115	25.00
5/22/2017	2017 -8	Nancy Rock Employer: N & T Enterprises, Inc. D/B/A	112 S. 4th St. 112 S 4TH STREET	P.O. Box 382 Delavan, WI 53115	Delavan, WI 53115 25.00
5/22/2017	2017 -9	Keith Woods Employer: All Star Cab	N2424 Howard Dr. W1044 Evergreen Road	Burlington, WI 53 P.O. Box 396	Pell Lake, WI 53157 25.00

Taxi Cab Driver

Count: 7

Board of Park Commissioners' Minutes
Wednesday, May 3, 2017 – 6:30pm
City Hall, Meeting Room 2A

Roll Call: Present: President Esarco, Barb Hartigan, John Swanson, Doug Skates, Brian Olsen, Dave Quickel, Mayor Al Kupsik. Peggy Schneider and Lynn excused absences.

Staff Present: Blaine Oborn

Public Present: Kent Lambert and Dan Getzen (Treadhead Cycling), Anders Haldorsen (LFL), Nan Elder (Visit Lake Geneva), Mike Coolidge (YMCA), Dick Malmin, Rod Brenner, Chris Schultz (Lake Geneva Regional News).

Quickel/Kupsik: Approval of Board of Park Commissioners meeting minutes from April 5, 2017, with the correction that they be changed to note Quickel abstained from the motion to approve Jr. Badger Baseball permit request for Fields 1, 2, 3, and 4 for tournaments on May 20-21 and June 17-18 from 9am-6pm. Unanimously carried.

Comments from public limited to 5 minutes:

Nan Elder, request to please keep application fee for Concert in the Park at \$25.

Report YMCA/Veteran's Park

Mike Coolidge presented May through October 2017 schedule for Veterans Park. Currently all teams are practicing, including Jr. Badger teams using the fields. YMCA is taking care of the fields including marking and grooming. Field number 5 needs some work, playable but should be budgeted for next year maintenance. Swanson asked about the grass planting last year, and was informed that was for field numbers 3 and 4. Per Skates, field number 5 needs to be leveled.

Permits/Park Donations:

Kupsik/Swanson: Motion to approve Visit Lake Geneva's request for Concert in the Park use of Flat Iron Park on Thursdays from July 6 through August 24 (except August 17) from 6-8pm, as submitted. Waive fees except for application fee. Unanimously carried.

Kupsik/Olsen: Motion to approve Baseball 365 Inc for Lake Geneva Grand Slam permit request at Veterans Park on July 7, 8, 9, and 14, 15, 16 from 8:30-10pm as submitted. 6-1 (Quickel opposed) Motion Carried.

Skates/Swanson: Motion to approve Jeffrey Siegal Cheerleaders camp permit request for Flat Iron for June 13, 14, and 15 from 10-6pm as submitted. Unanimously carried.

Swanson/Hartigan: Motion to approve Parker Wade Universal Cheerleaders permit request for use of Seminary Park from May 31 through June 3, from 8am-9pm as submitted. Unanimously carried.

Lake Geneva

April 11, 2017

Mr. Blaine Oborn
City Administrator
City of Lake Geneva
626 Geneva Street
Lake Geneva, WI 53147

Dear Blaine,

Please find attached our permit for the Concert in the Park music series which is now entering its 24th year. This free concert series is a popular event for residents and visitors alike and is made possible through the support of sponsors and the City of Lake Geneva.

While we work hard to secure sponsors, like Brunk Industries, to cover the cost of the seven bands, this event has relied on the waiving of park fees by the Lake Geneva City Council to hold the concerts in Flat Iron Park at the Brunk Performance Pavilion.

We respectfully submit this letter as our formal request of the Lake Geneva City Council to waive the park and pavilion fees for Concerts in the Park, allowing us to once again just pay the permit application fee of \$25 for the 2017 concert series.

We are proud to work with the City of Lake Geneva and our sponsors to continue to offer this legacy event at no cost to our residents. The Concerts in the Park music series will be held every Thursday from 6:00 to 8:00 pm starting July 6 – August 24 except for August 17 which is the Venetian Festival.

Thank you for your consideration.

Best Regards,


Darien Schafer
President and CEO
VISIT Lake Geneva

CITY OF LAKE GENEVA EVENT PERMIT APPLICATION



Please fill in all blanks completely, as incomplete applications will be rejected.
Applications must be submitted **AT LEAST 10 WEEKS** prior to the proposed event date(s).

Section I - What type of Permit(s) will your event require?

- Parade Permit.** Required for any parade on public property.
 - Map or description of the requested route to be traveled.
- Public Assembly Permit.** Required for any public gathering on public property. No fee required.
- Street Use Permit.** Required for any event using a public street. Per Sec. 62-243 of the municipal code, this application must include the following attachments:
 - Certificate of Comprehensive General Liability Insurance with the City, its employees and agents as additional insured with coverage for contractual liability with minimum limits of \$500,000 per occurrence for bodily injury and property damage limits of \$250,000 per occurrence.
 - Petition signed by more than half of the residential dwelling units and/or commercial units residing along that portion of the street designated for the proposed use or whose property is denied access by virtue of the granting of the permit.
- Parking Stall Bag Request.** Required for reserving the use of any City parking stall in conjunction of with an event.
- Park Reservation Permit.** Required for reserving the use of a park facility or shelter.
 - Brunk Pavilion.** Requires rental of Flat Iron Park. Additional rental fees apply.
- Beach Reservation Permit.** Required for reserving the use of the beach.

Section II - Applicant Information

1. Applicant Name: Nancy Elder Date of Application: April 11, 2017
2. Organization Name: VISIT Lake Geneva
3. Organization Type: For Profit Non-Profit (501(c)____) Tax ID: _____
4. Mailing Address: 527 Center Street
5. City, State, Zip: Lake Geneva, WI 53147
6. Phone: _____ E-mail: _____
7. Applicant's Drivers License #: _____ State license issued: _____
8. Are you applying as a resident of the City of Lake Geneva? Yes No
If yes, proof of residency must be attached.

Section III - Event Information

1. Title of Event: Concerts in the Park
2. Date(s) of Event: July 6, 13, 20, 27 & August 3, 10, (NOT 17 Venetian), 24
3. Location(s) of Event: Flat Iron Park, Gazebo & Brunk Pavillion
4. Hours: 6:00 to 8:00 pm

Start Time

End Time

5. Event Chair/Contact Person: Nancy Elder Phone: _____

6. Day of Event Contact Name: Nancy Elder Phone: _____

7. Is the event open to the public? Yes No

8. Will you charge an admission fee? Yes No

9. Estimated Attendance Number: 500 per concert series

10. Basis for Estimate: Previous Year's Attendance

11. Will you be setting up a tent? Yes No

If yes, list the location, size, Rental Company, and proof of completion of locates.

Just outside of the backdoor behind the Visitor's Center 10 x 10 (no-stakes) it's a personally owned tent (non-rental).

12. Will there be any animals? Yes No

If yes, what type and how many: _____

13. Detailed description of proposed event with map of exact location of the event and/or route.
A 24 year tradition of entertainment every Thursday evening from 6:00 to 8:00 pm in July and August (except August 17th, which is Venetian Festival) at Flat Iron Park. The concerts are open to the public free of charge. The event is supported through corporate sponsorships which include the opportunity for VISIT Lake Geneva and/or a sponsoring business to have a branded pop-up tent with table and chairs, a branded food truck, or sponsored activities i.e. we will have various artists from Gallery 223, The Geneva Lake Art Foundation featured in the gazebo area. A vendor(s) will be selling food and/or merchandise in Flat Iron Park for the Concerts in the Park Series on dates specified. Musical Groups will also sell CD's

14. Description of plan for handling refuse collection and after-event clean-up:

Clean-up will be handled by the staff and recruited volunteers.

15. Description of plan for providing event security (if applicable):

N/A

16. Will there be fireworks or pyrotechnics at your event? Yes No

If yes, please attach a fireworks display permit or application.

17. Will your event include the sale of beer and/or wine? Yes No

If yes, please attach a completed Temporary Alcohol License & Temporary Operator License Application.

18. Will you or any other vendors be selling food or merchandise? Yes No

If yes, please attach list of proposed vendors, including business name and type of food/merchandise sold.

Section IV - Street Use

Check if this section does not apply.

1. Description of the portion(s) of road(s) to be used:

Road closures must include rental of barricades.

N/A

2. Will any parking stalls be used or blocked during the event? Yes No

Date(s) of use: _____

Total Number of Stalls Request: _____

Stall Number(s) and Location: _____

Additional Information:

3. Description of signage to be used during event:

If requesting City banner poles, please include a Street Banner Display Application.

Staked banners, 3' x 8' near the performance area and signicades as needed.

Anticipated Services

Please indicate below any additional services you are requesting for your event. Estimated Fees or Deposits for these services may be required prior to issuance of permit(s).

- Electricity Explain: Use of electrical outlets in pavilion.
- Water Explain: _____
- Traffic Control Explain: _____
- Police Services Explain: _____
- Fire/EMS Services Explain: _____
- Other Explain: _____

Section V- Fees

Application and Permit Fees		Unit Fee			Applicable Fee
Parade Permit					
Application Fee		\$25.00			_____
Street Use Permit					
Application Fee		\$25.00			_____
Permit Fee - Events lasting 2 days or less		\$40.00			_____
Permit Fee - Events lasting more than 2 days		\$100.00			_____
Parking Stall Bag Request					
Administrative Fee		\$10.00			_____
Parking Stall Usage/Blockage Fee - Per Stall, Per Day			# of Stalls	# of Days	
March 1 - November 14	\$20.00	x	_____	x _____ =	_____
November 15 - February 29	\$10.00	x	_____	x _____ =	_____
Park Reservation Permit					
Application Fee		\$25.00			\$25.00
Security Deposit					
Non-Profit or Resident					
49 Attendees or Less		\$50.00			_____
50-149 Attendees		\$100.00			_____
150 or more Attendees		<i>Determined by Park Board</i>			_____
Non-Resident					
49 Attendees or Less		\$100.00			_____
50-149 Attendees		\$150.00			_____
150 or more Attendees		<i>Determined by Park Board</i>			_____
Park Reservation Fees - Per Location, Per Day					
Non-Profit or Resident					
49 Attendees or Less	\$30.00	x	# of Parks	# of Days	= _____
50-149 Attendees	\$55.00	x	_____	x _____ =	_____
150 or more Attendees	\$105.00	x	1	x 7 =	waived
Non-Resident					
49 Attendees or Less	\$75.00	x	_____	x _____ =	_____
50-149 Attendees	\$125.00	x	_____	x _____ =	_____
150 or more Attendees	\$225.00	x	_____	x _____ =	_____
Brunk Pavilion Rental Permit					
<i>Must also include rental of Flat Iron Park to rent Pavilion</i>					
Non-Profit or Resident	\$250.00			# of Days	x 7 = waived
Non-Resident	\$500.00			x _____ =	_____
Additional Park Amenities					
Equipment (with delivery)	Rental Fee		# Requested	Sec. Dep.	Applicable Fee
Benches	\$5.00 each		x _____ +	\$50.00 =	_____
Picnic Tables	\$15.00 each		x _____ +	\$50.00 =	_____
Barricades	\$5.00 each		x _____ +	\$50.00 =	_____
Trash Receptacles	\$8.00 each		x _____ +	\$50.00 =	_____
Dumpster Delivery	\$50.00 each		x _____ +	\$0 =	_____
Dumpster Pick-up	\$50.00 plus additional landfill		_____		_____
Fencing - Snow	\$30.00 per 50 feet		_____		_____
<i>Requests for equipment are subject to availability.</i>					Subtotal: \$ waived

For Office Use Only

Date Filed with Clerk: 4/20/17 Payment with Application: \$ 25.00 Receipt # 170400-18

Additional Fees Collected: \$

Receipt #

Departmental review (all that apply):

Police Chief: Approved Denied Signed: [Signature]

Additional services needed:

Additional fees or deposit:

Fire Chief: Approved Denied Signed: [Signature]

Additional services needed:

Additional fees or deposit:

Animal Dept: Approved Denied Signed: [Signature]

Additional services needed:

Additional fees or deposit:

Planning Dept: Approved Denied Signed: [Signature]

Additional services needed: NO Staffs requested

Additional fees or deposit:

Parks, Recreation & Landmarks: Approved Denied Signed:

Additional services needed:

Additional fees or deposit:

Committee/Council review (all that apply):

Park Board: Meeting Date(s): May 5, 2017 Approved Denied

Reasons/Conditions: [Signature]

Finance, License & Regulation: Meeting Date(s): Approved Denied

Reasons/Conditions:

Council: Meeting Date(s): Approved Denied

Reasons/Conditions:

Clerk's Office Completion:

Total Add'l fee/ deposit to be collected: \$ Receipt #

Permit(s) issued: Parade/PA Street Use Park Permit

Date of issue: Deposit Returned: \$ Deposit withheld: \$

Reason withheld:

CITY OF LAKE GENEVA EVENT PERMIT APPLICATION



Please fill in all blanks completely, as incomplete applications will be rejected.

Applications must be submitted AT LEAST 10 WEEKS prior to the proposed event date(s).

Section I - What type of Permit(s) will your event require?

- Parade Permit. Required for any parade on public property.
 - Map or description of the requested route to be traveled.
- Public Assembly Permit. Required for any public gathering on public property. No fee required.
- Street Use Permit. Required for any event using a public street. Per Sec. 62-243 of the municipal code, this application must include the following attachments:
 - Certificate of Comprehensive General Liability Insurance with the City, its employees and agents as additional insured with coverage for contractual liability with minimum limits of \$500,000 per occurrence for bodily injury and property damage limits of \$250,000 per occurrence.
 - Petition signed by more than half of the residential dwelling units and/or commercial units residing along that portion of the street designated for the proposed use or whose property is denied access by virtue of the granting of the permit.
- Parking Stall Bag Request. Required for reserving the use of any City parking stall in conjunction of with an event.
- Park Reservation Permit. Required for reserving the use of a park facility or shelter.
 - Brunk Pavilion. Requires rental of Flat Iron Park. Additional rental fees apply.
- Beach Reservation Permit. Required for reserving the use of the beach.

Section II - Applicant Information

1. Applicant Name: Cindy Forster Furevedi Date of Application: 4/25/17
2. Organization Name: Maple Park Home Owners
3. Organization Type: For Profit Non-Profit (501(c)) Tax ID: _____
4. Mailing Address: 1010 Geneva St
5. City, State, Zip: Lake Geneva
6. Phone: _____ fax: _____
7. Applicant's Drivers License # _____ to license issued: _____
8. Are you applying as a resident of the City of Lake Geneva? Yes No
If yes, proof of residency must be attached.

Section III - Event Information

1. Title of Event: Block Party
2. Date(s) of Event: 6/24/17
3. Location(s) of Event: 1005 Geneva St 1 blk.
4. Hours: 4-9 pm
Start Time End Time

5. Event Chair/Contact Person: Cindy Forster-Fuenedi Phone: _____

6. Day of Event Contact Name: Sam Phone: _____

7. Is the event open to the public? Yes No

8. Will you charge an admission fee? Yes No

9. Estimated Attendance Number: 25

10. Basis for Estimate: last yrs event

11. Will you be setting up a tent? Yes No
If yes, list the location, size, Rental Company, and proof of completion of locates.

12. Will there be any animals? Yes No
If yes, what type and how many: _____

13. Detailed description of proposed event with map of exact location of the event and/or route.
Block Party for Maple Park Residents
on Geneva St. 1 block
1005 Geneva St

14. Description of plan for handling refuse collection and after-event clean-up:
We will use personal garbage cans.

15. Description of plan for providing event security (if applicable):

16. Will there be fireworks or pyrotechnics at your event? Yes No
If yes, please attach a fireworks display permit or application.

17. Will your event include the sale of beer and/or wine? Yes No
If yes, please attach a completed Temporary Alcohol License & Temporary Operator License Application.

18. Will you or any other vendors be selling food or merchandise? Yes No
If yes, please attach list of proposed vendors, including business name and type of food/merchandise sold.

Section IV - Street Use

Check if this section does not apply.

1. Description of the portion(s) of road(s) to be used:

Road closures must include rental of barricades.

1005 Geneva St →

one block

2. Will any parking stalls be used or blocked during the event? Yes No

Date(s) of use: _____

Total Number of Stalls Request: _____

Stall Number(s) and Location: _____

Additional Information:

Ø

3. Description of signage to be used during event:

If requesting City banner poles, please include a Street Banner Display Application.

Ø

Anticipated Services

Please indicate below any additional services you are requesting for your event. Estimated Fees or Deposits for these services may be required prior to issuance of permit(s).

- Electricity Explain: _____
- Water Explain: _____
- Traffic Control Explain: _____
- Police Services Explain: _____
- Fire/EMS Services Explain: _____
- Other Explain: _____

Ø

Section V - Fees

Application and Permit Fees	Unit Fee			Applicable Fee
Parade Permit				
Application Fee	\$25.00			_____
Street Use Permit				
Application Fee	\$25.00			_____
Permit Fee - Events lasting 2 days or less	\$40.00			_____
Permit Fee - Events lasting more than 2 days	\$100.00			_____
Parking Stall Bag Request				
Administrative Fee	\$10.00			_____
Parking Stall Usage/Blockage Fee - Per Stall, Per Day		# of Stalls	# of Days	
March 1 - November 14	\$20.00	x _____	x _____	= _____
November 15 - February 29	\$10.00	x _____	x _____	= _____
Park Reservation Permit				
Application Fee	\$25.00			_____
Security Deposit				
Non-Profit or Resident				
49 Attendees or Less	\$50.00			_____
50-149 Attendees	\$100.00			_____
150 or more Attendees	<i>Determined by Park Board</i>			_____
Non-Resident				
49 Attendees or Less	\$100.00			_____
50-149 Attendees	\$150.00			_____
150 or more Attendees	<i>Determined by Park Board</i>			_____
Park Reservation Fees - Per Location, Per Day				
Non-Profit or Resident				
49 Attendees or Less	\$30.00	x _____	x _____	= _____
50-149 Attendees	\$55.00	x _____	x _____	= _____
150 or more Attendees	\$105.00	x _____	x _____	= _____
Non-Resident				
49 Attendees or Less	\$75.00	x _____	x _____	= _____
50-149 Attendees	\$125.00	x _____	x _____	= _____
150 or more Attendees	\$225.00	x _____	x _____	= _____
Brunk Pavilion Rental Permit				
<i>Must also include rental of Flat Iron Park to rent Pavilion</i>				
			# of Days	
Non-Profit or Resident	\$250.00	x _____	x _____	= _____
Non-Resident	\$500.00	x _____	x _____	= _____
Additional Park Amenities				
Equipment (with delivery)	Rental Fee	# Requested	Sec. Dep.	Applicable Fee
Benches	\$5.00 each	x _____ +	\$50.00 =	_____
Picnic Tables	\$15.00 each	x _____ +	\$50.00 =	_____
Barricades	\$5.00 each	x <u>4</u> +	\$50.00 =	<u>70</u>
Trash Receptacles	\$8.00 each	x _____ +	\$50.00 =	_____
Dumpster Delivery	\$50.00 each	x _____ +	\$0 =	_____
Dumpster Pick-up	\$50.00 plus additional landfill	_____		_____
Fencing - Snow	\$30.00 per 50 feet	_____		_____
<i>Requests for equipment are subject to availability.</i>				
			Subtotal: \$	<u>70</u> <u>65</u> <u>135</u>

Application and Permit Fees	Unit Fee			Applicable Fee
Beach Reservation Permit				
<i>Excludes Normal Beach Hours Memorial Day through Labor Day 9am-5pm</i>				
<i>Opening/Cleaning of Beach Bathrooms will be invoiced at an Hourly Rate</i>				
Application Fee	\$25.00			_____
Security Deposit				_____
Non-Profit or Resident				
49 Attendees or Less	\$50.00			_____
50-149 Attendees	\$100.00			_____
150 or more Attendees	<i>Determined by Piers, Harbors & Lakefront</i>			_____
Non-Resident				
49 Attendees or Less	\$100.00			_____
50-149 Attendees	\$150.00			_____
150 or more Attendees	<i>Determined by Piers, Harbors & Lakefront</i>			_____
Beach Reservation Fees - Per Day				
Non-Profit or Resident		# of Days		
49 Attendees or Less	\$30.00	x	_____ =	_____
50-149 Attendees	\$55.00	x	_____ =	_____
150 or more Attendees	\$105.00	x	_____ =	_____
Non-Resident				
49 Attendees or Less	\$75.00	x	_____ =	_____
50-149 Attendees	\$125.00	x	_____ =	_____
150 or more Attendees	\$225.00	x	_____ =	_____
Subtotal: \$				_____
+ Subtotal from Page 4: \$				_____

Total PAID with Application: \$ _____

Accepted by cash, credit card or checks (payable to the City of Lake Geneva)

Section VI - Signature of Applicant

“The information provided in this application is true and correct to the best of my knowledge and belief. I understand that cancellation of any event, for any reason, shall result in the forfeiture of permit fees. I understand that application fees are not refunded in the event the application is not approved. I understand that in addition to the schedule of fees, if any additional City services are requested or determined to be impacted, an additional fee will be charged for those services. I agree to comply with all applicable state, federal and municipal regulations and ordinances.”

APPLICANT SIGNATURE:

Cindy Forster Fueredi DATE: 4/25/17

For Office Use Only

Date Filed with Clerk: 4/28/17 Payment with Application: \$ 135.00 Receipt: C170428-22

Additional Fees Collected: \$ _____ Receipt # _____

Departmental review (all that apply):

Police Chief: Approved Denied

Signed: [Signature]

Additional services needed: _____

Additional fees or deposit: _____

Fire Chief: Approved Denied

Signed: [Signature]

Additional services needed: _____

Additional fees or deposit: _____

Street Dept.: Approved Denied

Signed: [Signature]

Additional services needed: _____

Additional fees or deposit: _____

Parking Dept.: Approved Denied

Signed: [Signature]

Additional services needed: no stalls requested

Additional fees or deposit: _____

Piers, Harbors & Lakefront: Approved Denied Signed: _____

Additional services needed: _____

Additional fees or deposit: _____

Committee/Council review (all that apply):

Park Board: Meeting Date(s): _____ Approved Denied

Reasons/Conditions: _____

Finance, License & Regulation: Meeting Date(s): _____ Approved Denied

Reasons/Conditions: _____

Council: Meeting Date(s): _____ Approved Denied

Reasons/Conditions: _____

Clerk's Office Completion:

Total Add'l fee/deposit to be collected: \$ _____ Receipt # _____

Permit(s) issued: Parade/PA Street Use Park Permit

Date of issue: _____ Deposit Returned: \$ _____ Deposit withheld: \$ _____

Reason withheld: _____

This is a petition for the residents of Geneva St. to authorize this street closing for the ANNUAL MAPLE PARK HOMEOWNERS BLOCK PARTY on JUNE 24, 2017, SATURDAY, 4-9pm. The street closing will involve two blocks from 1004 Geneva St. to ~~1005~~ Geneva St.

Your signature is statement of approval. Thank you!

DATE	NAME/SIGNATURE	ADDRESS
4/10/17	Cindy Furedi	1010 Geneva St.
4/10/17	Alisha Benson	1017 Geneva St.
4/13/17	Bob	1017 GENEVA ST
4/14/17	Sara Danko	1017 Geneva St Apt 8
4/14/17	John L	1017 Geneva St. Apt 2
4-14-2017	JM Salmon	1017 Geneva St. Apt 7 L.G.Wi 59147
4.14/17	Rani Khezeli	1017 Geneva St. apt. 1
4-14-17	Tina Law	1017 Geneva St apt 2
4-14-17	Adam Low	1017 Geneva St. Apt 4
4-24-17	Gregory Cupp	1005 GENEVA ST.

CITY OF LAKE GENEVA EVENT PERMIT APPLICATION



Please fill in all blanks completely, as incomplete applications will be rejected.
Applications must be submitted **AT LEAST 10 WEEKS** prior to the proposed event date(s).

Section I - What type of Permit(s) will your event require?

- Parade Permit. Required for any parade on public property.
 - Map or description of the requested route to be traveled.
- Public Assembly Permit. Required for any public gathering on public property. No fee required.
- Street Use Permit. Required for any event using a public street. Per Sec. 62-243 of the municipal code, this application must include the following attachments:
 - Certificate of Comprehensive General Liability Insurance with the City, its employees and agents as additional insured with coverage for contractual liability with minimum limits of \$500,000 per occurrence for bodily injury and property damage limits of \$250,000 per occurrence.
 - Petition signed by more than half of the residential dwelling units and/or commercial units residing along that portion of the street designated for the proposed use or whose property is denied access by virtue of the granting of the permit.
- Parking Stall Bag Request. Required for reserving the use of any City parking stall in conjunction of with an event.
- Park Reservation Permit. Required for reserving the use of a park facility or shelter.
 - Brunk Pavilion. Requires rental of Flat Iron Park. Additional rental fees apply.
- Beach Reservation Permit. Required for reserving the use of the beach.

Section II - Applicant Information

1. Applicant Name: Jeffrey Siegal Date of Application: 4/12/17
2. Organization Name: Buffalo Grove High School
3. Organization Type: For Profit Non-Profit (501(c)) Tax ID: _____
4. Mailing Address: 1102 W. Dundee Road
5. City, State, Zip: Buffalo Grove, IL 60089
6. Phone _____ E-mail: _____
7. Applicant's Drivers License #: _____ State license issued: _____
8. Are you applying as a resident of the City of Lake Geneva? Yes No
If yes, proof of residency must be attached.

Section III - Event Information

1. Title of Event: Cheerleading Camp
2. Date(s) of Event: June 13 - June 15, 2017
3. Location(s) of Event: Flat Iron Park
4. Hours: 10:00 a.m. - 6:00 p.m.
Start Time End Time

5. Event Chair/Contact Person: Jeffrey Siegal Phone: _____

6. Day of Event Contact Name: Jeffrey Siegal Phone: _____

7. Is the event open to the public? Yes No

8. Will you charge an admission fee? Yes No

9. Estimated Attendance Number: 55

10. Basis for Estimate: Number of cheerleaders per team

11. Will you be setting up a tent? Yes No
If yes, list the location, size, Rental Company, and proof of completion of locates.

12. Will there be any animals? Yes No
If yes, what type and how many: _____

13. Detailed description of proposed event with map of exact location of the event and/or route.
This is our annual cheerleading camp and team leadership camp that we have. We will be staying at the Cove Hotel and hopefully have camp outside at Flat Iron Park. Teams will learn cheer skills and leadership / team building skills. ~~we will just use the park.~~

14. Description of plan for handling refuse collection and after-event clean-up:
All athletes and coaches will make sure the area is clean.

15. Description of plan for providing event security (if applicable):
N/A

16. Will there be fireworks or pyrotechnics at your event? Yes No
If yes, please attach a fireworks display permit or application.

17. Will your event include the sale of beer and/or wine? Yes No
If yes, please attach a completed Temporary Alcohol License & Temporary Operator License Application.

18. Will you or any other vendors be selling food or merchandise? Yes No
If yes, please attach list of proposed vendors, including business name and type of food/merchandise sold.

Section IV - Street Use

Check if this section does not apply.

1. Description of the portion(s) of road(s) to be used:

Road closures must include rental of barricades.

2. Will any parking stalls be used or blocked during the event? Yes No

Date(s) of use: _____

Total Number of Stalls Request: _____

Stall Number(s) and Location: _____

Additional Information:

3. Description of signage to be used during event:

If requesting City banner poles, please include a Street Banner Display Application.

Anticipated Services

Please indicate below any additional services you are requesting for your event. Estimated Fees or Deposits for these services may be required prior to issuance of permit(s).

- Electricity Explain: _____
- Water Explain: _____
- Traffic Control Explain: _____
- Police Services Explain: _____
- Fire/EMS Services Explain: _____
- Other Explain: _____

Section V- Fees

Application and Permit Fees		Unit Fee			Applicable Fee
Parade Permit					
Application Fee		\$25.00			_____
Street Use Permit					
Application Fee		\$25.00			_____
Permit Fee - Events lasting 2 days or less		\$40.00			_____
Permit Fee - Events lasting more than 2 days		\$100.00			_____
Parking Stall Bag Request					
Administrative Fee		\$10.00			_____
Parking Stall Usage/Blockage Fee - Per Stall, Per Day			# of Stalls	# of Days	
March 1 - November 14	\$20.00	x	_____	x _____	= _____
November 15 - February 29	\$10.00	x	_____	x _____	= _____
Park Reservation Permit					
Application Fee		\$25.00			<u>25.00</u>
Security Deposit					
Non-Profit or Resident					
49 Attendees or Less		\$50.00			_____
50-149 Attendees		\$100.00			<u>100.00</u>
150 or more Attendees		<i>Determined by Park Board</i>			_____
Non-Resident					
49 Attendees or Less		\$100.00			_____
50-149 Attendees		\$150.00			_____
150 or more Attendees		<i>Determined by Park Board</i>			_____
Park Reservation Fees - Per Location, Per Day					
Non-Profit or Resident					
49 Attendees or Less	\$30.00	x	# of Parks	# of Days	
50-149 Attendees	\$55.00	x	<u>1</u>	x <u>3</u>	= <u>165.00</u>
150 or more Attendees	\$105.00	x	_____	x _____	= _____
Non-Resident					
49 Attendees or Less	\$75.00	x	_____	x _____	= _____
50-149 Attendees	\$125.00	x	_____	x _____	= _____
150 or more Attendees	\$225.00	x	_____	x _____	= _____
Brunk Pavilion Rental Permit					
<i>Must also include rental of Flat Iron Park to rent Pavilion</i>					
Non-Profit or Resident	\$250.00	x		# of Days	= _____
Non-Resident	\$500.00	x		_____	= _____
Additional Park Amenities					
Equipment (with delivery)	Rental Fee		# Requested	Sec. Dep.	Applicable Fee
Benches	\$5.00 each	x	_____ +	\$50.00 =	_____
Picnic Tables	\$15.00 each	x	_____ +	\$50.00 =	_____
Barricades	\$5.00 each	x	_____ +	\$50.00 =	_____
Trash Receptacles	\$8.00 each	x	_____ +	\$50.00 =	_____
Dumpster Delivery	\$50.00 each	x	_____ +	\$0 =	_____
Dumpster Pick-up	\$50.00 plus additional landfill		_____		_____
Fencing - Snow	\$30.00 per 50 feet		_____		_____
<i>Requests for equipment are subject to availability.</i>					Subtotal: \$ <u>290.00</u>

Application and Permit Fees	Unit Fee	Applicable Fee
Beach Reservation Permit		
<i>Excludes Normal Beach Hours Memorial Day through Labor Day 9am-5pm</i>		
<i>Opening/Cleaning of Beach Bathrooms will be invoiced at an Hourly Rate</i>		
Application Fee	\$25.00	_____
Security Deposit		_____
Non-Profit or Resident		
49 Attendees or Less	\$50.00	_____
50-149 Attendees	\$100.00	_____
150 or more Attendees	<i>Determined by Piers, Harbors & Lakefront</i>	_____
Non-Resident		
49 Attendees or Less	\$100.00	_____
50-149 Attendees	\$150.00	_____
150 or more Attendees	<i>Determined by Piers, Harbors & Lakefront</i>	_____
Beach Reservation Fees - Per Day		
Non-Profit or Resident		
49 Attendees or Less	\$30.00	x _____ = _____
50-149 Attendees	\$55.00	x _____ = _____
150 or more Attendees	\$105.00	x _____ = _____
Non-Resident		
49 Attendees or Less	\$75.00	x _____ = _____
50-149 Attendees	\$125.00	x _____ = _____
150 or more Attendees	\$225.00	x _____ = _____
		Subtotal: \$ _____
		+ Subtotal from Page 4: \$ _____

Total PAID with Application: \$ _____

Accepted by cash, credit card or checks (payable to the City of Lake Geneva)

Section VI - Signature of Applicant

"The information provided in this application is true and correct to the best of my knowledge and belief. I understand that cancellation of any event, for any reason, shall result in the forfeiture of permit fees. I understand that application fees are not refunded in the event the application is not approved. I understand that in addition to the schedule of fees, if any additional City services are requested or determined to be impacted, an additional fee will be charged for those services. I agree to comply with all applicable state, federal and municipal regulations and ordinances."

APPLICANT SIGNATURE:

Jessy Spauld

DATE: *4/12/17*

For Office Use Only

Date Filed with Clerk: 4/21/17 Payment with Application: \$ 290.00 Receipt: C170421-6

Additional Fees Collected: \$ _____ Receipt # _____

Departmental review (all that apply):

Police Chief: Approved Denied Signed: [Signature]
Additional services needed: _____

Fire Chief: Approved Denied Signed: [Signature]
Additional services needed: _____

Street Dept: Approved Denied Signed: Neil Wasno
Additional services needed: _____

Parking Dept: Approved Denied Signed: [Signature]
Additional services needed: no stalls requested

Piers, Harbors & Lakefront: Approved Denied Signed: _____
Additional services needed: _____

Additional fees or deposit: _____

Committee/Council review (all that apply):

Park Board: Meeting Date(s): 5.3.2017 Approved Denied
Reasons/Conditions: Approved Thursday 5/3/2017

Finance, License & Regulation: Meeting Date(s): _____ Approved Denied
Reasons/Conditions: _____

Council: Meeting Date(s): _____ Approved Denied
Reasons/Conditions: _____

Clerk's Office Completion:

Total Add'l fee/deposit to be collected: \$ _____ Receipt # _____

Permit(s) issued: Parade/PA Street Use Park Permit

Date of issue: _____ Deposit Returned: \$ _____ Deposit withheld: \$ _____

Reason withheld: _____

CITY OF LAKE GENEVA EVENT PERMIT APPLICATION



Please fill in all blanks completely, as incomplete applications will be rejected.
Applications must be submitted **AT LEAST 10 WEEKS** prior to the proposed event date(s).

Section I - What type of Permit(s) will your event require?

- Parade Permit.** Required for any parade on public property.
 - Map or description of the requested route to be traveled.
- Public Assembly Permit.** Required for any public gathering on public property. No fee required.
- Street Use Permit.** Required for any event using a public street. Per Sec. 62-243 of the municipal code, this application must include the following attachments:
 - Certificate of Comprehensive General Liability Insurance with the City, its employees and agents as additional insured with coverage for contractual liability with minimum limits of \$500,000 per occurrence for bodily injury and property damage limits of \$250,000 per occurrence.
 - Petition signed by more than half of the residential dwelling units and/or commercial units residing along that portion of the street designated for the proposed use or whose property is denied access by virtue of the granting of the permit.
- Parking Stall Bag Request.** Required for reserving the use of any City parking stall in conjunction of with an event.
- Park Reservation Permit.** Required for reserving the use of a park facility or shelter.
 - Brunk Pavilion.** Requires rental of Flat Iron Park. Additional rental fees apply.
- Beach Reservation Permit.** Required for reserving the use of the beach.

Section II - Applicant Information

1. Applicant Name: Parker Wade Date of Application: 3/6/2017
2. Organization Name: Universal Cheerleaders Association
3. Organization Type: For Profit Non-Profit (501(c)____) Tax ID: _____
4. Mailing Address: 6745 Lenox Center Court Suite 300
5. City, State, Zip: Memphis, TN 38115
6. Phone: _____ E-mail: _____
7. Applicant's Drivers License #: _____ State license issued: _____
8. Are you applying as a resident of the City of Lake Geneva? Yes No
If yes, proof of residency must be attached.

Section III - Event Information

1. Title of Event: UCA Midwest Instructional Staff Training
2. Date(s) of Event: May 31-June 3
3. Location(s) of Event: Seminary Park
4. Hours: Start 8:00am - End 9:00pm

5. Event Chair/Contact Person: Parker Wade Phone: _____

6. Day of Event Contact Name: Parker Wade Phone: _____

7. Is the event open to the public? Yes No

8. Will you charge an admission fee? Yes No

9. Estimated Attendance Number: 325

10. Basis for Estimate: All attendees are hired employees of Varsity Brands dba UCA

11. Will you be setting up a tent? Yes No
If yes, list the location, size, Rental Company, and proof of completion of locates.

12. Will there be any animals? Yes No
If yes, what type and how many: _____

13. Detailed description of proposed event with map of exact location of the event and/or route.
Training sessions will be held at Seminary Park each day beginning at 8 AM on Wednesday May 31 through 9 PM on June 3rd

14. Description of plan for handling refuse collection and after-event clean-up:
UCA staff will remove all materials from Seminary Park

15. Description of plan for providing event security (if applicable):
Members of UCA's corporate office will attend the entire event

16. Will there be fireworks or pyrotechnics at your event? Yes No
If yes, please attach a fireworks display permit or application.

17. Will your event include the sale of beer and/or wine? Yes No
If yes, please attach a completed Temporary Alcohol License & Temporary Operator License Application.

18. Will you or any other vendors be selling food or merchandise? Yes No
If yes, please attach list of proposed vendors, including business name and type of food/merchandise sold.

Section IV - Street Use

Check if this section does not apply.

1. Description of the portion(s) of road(s) to be used:
Road closures must include rental of barricades.

2. Will any parking stalls be used or blocked during the event? Yes No

Date(s) of use: _____

Total Number of Stalls Request: _____

Stall Number(s) and Location: _____

Additional Information:

3. Description of signage to be used during event:
If requesting City banner poles, please include a Street Banner Display Application.

Anticipated Services

Please indicate below any additional services you are requesting for your event. Estimated Fees or Deposits for these services may be required prior to issuance of permit(s).

- Electricity Explain: Electricity will be needed daily (8AM - 9PM)
- Water Explain: _____
- Traffic Control Explain: _____
- Police Services Explain: _____
- Fire/EMS Services Explain: _____
- Other Explain: Kindly have grass mowed prior to May 31

Section V - Fees

Application and Permit Fees		Unit Fee			Applicable Fee
Parade Permit					
Application Fee		\$25.00			_____
Street Use Permit					
Application Fee		\$25.00			_____
Permit Fee - Events lasting 2 days or less		\$40.00			_____
Permit Fee - Events lasting more than 2 days		\$100.00			_____
Parking Stall Bag Request					
Administrative Fee		\$10.00			_____
Parking Stall Usage/Blockage Fee - Per Stall, Per Day			# of Stalls	# of Days	
March 1 - November 14	\$20.00	x	_____	x _____	= _____
November 15 - February 29	\$10.00	x	_____	x _____	= _____
Park Reservation Permit					
Application Fee		\$25.00			25.00
Security Deposit					
Non-Profit or Resident					
49 Attendees or Less		\$50.00			_____
50-149 Attendees		\$100.00			_____
150 or more Attendees		<i>Determined by Park Board</i>			_____
Non-Resident					
49 Attendees or Less		\$100.00			_____
50-149 Attendees		\$150.00			_____
150 or more Attendees		<i>Determined by Park Board</i>			_____
Park Reservation Fees - Per Location, Per Day					
Non-Profit or Resident					
49 Attendees or Less	\$30.00	x	_____	x _____	= _____
50-149 Attendees	\$55.00	x	_____	x _____	= _____
150 or more Attendees	\$105.00	x	_____	x _____	= _____
Non-Resident					
49 Attendees or Less	\$75.00	x	_____	x _____	= _____
50-149 Attendees	\$125.00	x	_____	x _____	= _____
150 or more Attendees	\$225.00	x	1	x 4	= 225.00 <u>900.00</u>
400.00 (* based on previous years pricing)					
Brunk Pavilion Rental Permit					
<i>Must also include rental of Flat Iron Park to rent Pavilion</i>					
Non-Profit or Resident	\$250.00			# of Days	x _____ = _____
Non-Resident	\$500.00				x _____ = _____
Additional Park Amenities					
Equipment (with delivery)	Rental Fee		# Requested	Sec. Dep.	Applicable Fee
Benches	\$5.00 each		x _____	+ \$50.00	= _____
Picnic Tables	\$15.00 each		x _____	+ \$50.00	= _____
Barricades	\$5.00 each		x _____	+ \$50.00	= _____
Trash Receptacles	\$8.00 each		x _____	+ \$50.00	= _____
Dumpster Delivery	\$50.00 each		x _____	+ \$0	= _____
Dumpster Pick-up	\$50.00 plus additional landfill		_____		_____
Fencing - Snow	\$30.00 per 50 feet		_____		_____
<i>Requests for equipment are subject to availability.</i>					
Subtotal: \$					650.00 <u>1375</u>

Application and Permit Fees	Unit Fee	Applicable Fee
Beach Reservation Permit		
<i>Excludes Normal Beach Hours Memorial Day through Labor Day 9am-5pm</i>		
<i>Opening/Cleaning of Beach Bathrooms will be invoiced at an Hourly Rate</i>		
Application Fee	\$25.00	_____
Security Deposit		_____
Non-Profit or Resident		
49 Attendees or Less	\$50.00	_____
50-149 Attendees	\$100.00	_____
150 or more Attendees	<i>Determined by Piers, Harbors & Lakefront</i>	_____
Non-Resident		
49 Attendees or Less	\$100.00	_____
50-149 Attendees	\$150.00	_____
150 or more Attendees	<i>Determined by Piers, Harbors & Lakefront</i>	_____
Beach Reservation Fees - Per Day		
Non-Profit or Resident		
49 Attendees or Less	\$30.00	x _____ = _____
50-149 Attendees	\$55.00	x _____ = _____
150 or more Attendees	\$105.00	x _____ = _____
Non-Resident		
49 Attendees or Less	\$75.00	x _____ = _____
50-149 Attendees	\$125.00	x _____ = _____
150 or more Attendees	\$225.00	x _____ = _____
Subtotal: \$		0
+ Subtotal from Page 4: \$		650.00 1325

Total PAID with Application: \$ ~~650.00~~ 1325

Accepted by cash, credit card or checks (payable to the City of Lake Geneva)

Section VI - Signature of Applicant

"The information provided in this application is true and correct to the best of my knowledge and belief. I understand that cancellation of any event, for any reason, shall result in the forfeiture of permit fees. I understand that application fees are not refunded in the event the application is not approved. I understand that in addition to the schedule of fees, if any additional City services are requested or determined to be impacted, an additional fee will be charged for those services. I agree to comply with all applicable state, federal and municipal regulations and ordinances."

APPLICANT SIGNATURE:

Parku Wade

DATE: 3/6/2017

For Office Use Only

Date Filed with Clerk: 4/3/17 Payment with Application: \$ 1,325.00 Receipt: C170403-4

Additional Fees Collected: \$ _____ Receipt # _____

Departmental review (all that apply):

Police Chief: Approved Denied Signed: [Signature]

Additional services needed: _____

Additional fees or deposit: _____

Fire Chief: Approved Denied Signed: [Signature]

Additional services needed: _____

Additional fees or deposit: _____

Street Dept.: Approved Denied Signed: [Signature]

Additional services needed: _____

Additional fees or deposit: _____

Parking Dept.: Approved Denied Signed: [Signature]

Additional services needed: NO STALLS REQUESTED

Additional fees or deposit: _____

Piers, Harbors & Lakefront: Approved Denied Signed: [Signature]

Additional services needed: _____

Additional fees or deposit: _____

Committee/Council review (all that apply):

Park Board: Meeting Date(s): 5-3-2017 Approved Denied

Reasons/Conditions: AGREASCO

Finance, License & Regulation: Meeting Date(s): _____ Approved Denied

Reasons/Conditions: _____

Council: Meeting Date(s): _____ Approved Denied

Reasons/Conditions: _____

Clerk's Office Completion:

Total Add'l fee/deposit to be collected: \$ _____ Receipt # _____

Permit(s) issued: Parade/PA Street Use Park Permit

Date of issue: _____ Deposit Returned: \$ _____ Deposit withheld: \$ _____

Reason withheld: _____

CITY OF LAKE GENEVA EVENT PERMIT APPLICATION



Please fill in all blanks completely, as incomplete applications will be rejected.
Applications must be submitted **AT LEAST 10 WEEKS** prior to the proposed event date(s).

Section I - What type of Permit(s) will your event require?

- Parade Permit.** Required for any parade on public property.
 - Map or description of the requested route to be traveled.
- Public Assembly Permit.** Required for any public gathering on public property. No fee required.
- Street Use Permit.** Required for any event using a public street. Per Sec. 62-243 of the municipal code, this application must include the following attachments:
 - Certificate of Comprehensive General Liability Insurance with the City, its employees and agents as additional insured with coverage for contractual liability with minimum limits of \$500,000 per occurrence for bodily injury and property damage limits of \$250,000 per occurrence.
 - Petition signed by more than half of the residential dwelling units and/or commercial units residing along that portion of the street designated for the proposed use or whose property is denied access by virtue of the granting of the permit.
- Parking Stall Bag Request.** Required for reserving the use of any City parking stall in conjunction of with an event.
- Park Reservation Permit.** Required for reserving the use of a park facility or shelter.
 - Brunk Pavilion.** Requires rental of Flat Iron Park. Additional rental fees apply.
- Beach Reservation Permit.** Required for reserving the use of the beach.

Section II - Applicant Information

1. Applicant Name: SHAWN KRANICH Date of Application: 3-31-17
2. Organization Name: BASEBALL365 INC
3. Organization Type: For Profit Non-Profit (501(c)____) Tax ID: _____
4. Mailing Address: 111W29510 KINGS WAY
5. City, State, Zip: WAUKESHA WI 53188
6. Phon. _____ E-mail: _____
7. Applicant's Drivers License #: _____ State license issued: _____
8. Are you applying as a resident of the City of Lake Geneva? Yes No
If yes, proof of residency must be attached.

Section III - Event Information

1. Title of Event: LAKE GENEVA INVITATIONAL LAKE GENEVA GRAND SLAM
2. Date(s) of Event: JULY 7th-9th AND JULY 14th-16th
3. Location(s) of Event: VETERAN'S PARK
4. Hours: 8:30AM Start Time 10:00PM End Time

5. Event Chair/Contact Person: _____ Phone: _____

6. Day of Event Contact Name: SHAWN KRAMLICH Phone: _____

7. Is the event open to the public? Yes No

8. Will you charge an admission fee? Yes No

9. Estimated Attendance Number: 125

10. Basis for Estimate: 3 or 4 BASEBALL GAMES W/OUT OF PLAYERS AND PARENTS

11. Will you be setting up a tent? Yes No
If yes, list the location, size, Rental Company, and proof of completion of locates.

12. Will there be any animals? Yes No
If yes, what type and how many: _____

13. Detailed description of proposed event with map of exact location of the event and/or route.
2 BASEBALL TOURNAMENTS ON BASEBALL FIELDS

14. Description of plan for handling refuse collection and after-event clean-up:
THE CONCESSION PROVIDER AND YMCA ARE RESPONSIBLE

15. Description of plan for providing event security (if applicable):

16. Will there be fireworks or pyrotechnics at your event? Yes No
If yes, please attach a fireworks display permit or application.

17. Will your event include the sale of beer and/or wine? Yes No
If yes, please attach a completed Temporary Alcohol License & Temporary Operator License Application.

18. Will you or any other vendors be selling food or merchandise? Yes No
If yes, please attach list of proposed vendors, including business name and type of food/merchandise sold.

Section IV - Street Use

Check if this section does not apply.

1. Description of the portion(s) of road(s) to be used:
Road closures must include rental of barricades.

2. Will any parking stalls be used or blocked during the event? Yes No

Date(s) of use: _____

Total Number of Stalls Request: _____

Stall Number(s) and Location: _____

Additional Information:

3. Description of signage to be used during event:
If requesting City banner poles, please include a Street Banner Display Application.

Anticipated Services

Please indicate below any additional services you are requesting for your event. Estimated Fees or Deposits for these services may be required prior to issuance of permit(s).

- Electricity Explain: _____
- Water Explain: _____
- Traffic Control Explain: _____
- Police Services Explain: _____
- Fire/EMS Services Explain: _____
- Other Explain: _____

Section V - Fees

Application and Permit Fees		Unit Fee			Applicable Fee
Parade Permit					
Application Fee		\$25.00			_____
Street Use Permit					
Application Fee		\$25.00			_____
Permit Fee - Events lasting 2 days or less		\$40.00			_____
Permit Fee - Events lasting more than 2 days		\$100.00			_____
Parking Stall Bag Request					
Administrative Fee		\$10.00			_____
Parking Stall Usage/Blockage Fee - Per Stall, Per Day			# of Stalls	# of Days	
March 1 - November 14	\$20.00	x	_____	x _____ =	_____
November 15 - February 29	\$10.00	x	_____	x _____ =	_____
Park Reservation Permit					
Application Fee		\$25.00			_____
Security Deposit					
Non-Profit or Resident					
49 Attendees or Less		\$50.00			_____
50-149 Attendees		\$100.00			_____
150 or more Attendees		<i>Determined by Park Board</i>			_____
Non-Resident					
49 Attendees or Less		\$100.00			_____
50-149 Attendees		\$150.00	<i>x 6 DAYS</i>		<i>#900-</i>
150 or more Attendees		<i>Determined by Park Board</i>			_____
Park Reservation Fees - Per Location, Per Day					
Non-Profit or Resident					
49 Attendees or Less	\$30.00	x	_____	x _____ =	_____
50-149 Attendees	\$55.00	x	_____	x _____ =	_____
150 or more Attendees	\$105.00	x	_____	x _____ =	_____
Non-Resident					
49 Attendees or Less	\$75.00	x	_____	x _____ =	_____
50-149 Attendees	\$125.00	x	_____	x _____ =	_____
150 or more Attendees	\$225.00	x	_____	x _____ =	_____
Brunk Pavilion Rental Permit					
<i>Must also include rental of Flat Iron Park to rent Pavilion</i>					
Non-Profit or Resident					
	\$250.00			x _____ =	_____
Non-Resident					
	\$500.00			x _____ =	_____
Additional Park Amenities					
Equipment (with delivery)	Rental Fee		# Requested	Sec. Dep.	Applicable Fee
Benches	\$5.00 each		x _____ +	\$50.00 =	_____
Picnic Tables	\$15.00 each		x _____ +	\$50.00 =	_____
Barricades	\$5.00 each		x _____ +	\$50.00 =	_____
Trash Receptacles	\$8.00 each		x _____ +	\$50.00 =	_____
Dumpster Delivery	\$50.00 each		x _____ +	\$0 =	_____
Dumpster Pick-up	\$50.00 plus additional landfill		_____		_____
Fencing - Snow	\$30.00 per 50 feet		_____		_____
<i>Requests for equipment are subject to availability.</i>					Subtotal: \$ _____

Application and Permit Fees	Unit Fee			Applicable Fee
Beach Reservation Permit				
<i>Excludes Normal Beach Hours Memorial Day through Labor Day 9am-5pm</i>				
<i>Opening/Cleaning of Beach Bathrooms will be invoiced at an Hourly Rate</i>				
Application Fee	\$25.00			_____
Security Deposit				_____
Non-Profit or Resident				
49 Attendees or Less	\$50.00			_____
50-149 Attendees	\$100.00			_____
150 or more Attendees	<i>Determined by Piers, Harbors & Lakefront</i>			_____
Non-Resident				
49 Attendees or Less	\$100.00			_____
50-149 Attendees	\$150.00			_____
150 or more Attendees	<i>Determined by Piers, Harbors & Lakefront</i>			_____
Beach Reservation Fees - Per Day				
Non-Profit or Resident		# of Days		
49 Attendees or Less	\$30.00	x	_____ =	_____
50-149 Attendees	\$55.00	x	_____ =	_____
150 or more Attendees	\$105.00	x	_____ =	_____
Non-Resident				
49 Attendees or Less	\$75.00	x	_____ =	_____
50-149 Attendees	\$125.00	x	_____ =	_____
150 or more Attendees	\$225.00	x	_____ =	_____
Subtotal: \$				_____
+ Subtotal from Page 4: \$				_____

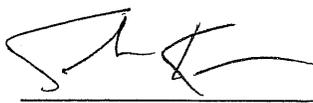
Total PAID with Application: \$ _____

Accepted by cash, credit card or checks (payable to the City of Lake Geneva)

Section VI - Signature of Applicant

"The information provided in this application is true and correct to the best of my knowledge and belief. I understand that cancellation of any event, for any reason, shall result in the forfeiture of permit fees. I understand that application fees are not refunded in the event the application is not approved. I understand that in addition to the schedule of fees, if any additional City services are requested or determined to be impacted, an additional fee will be charged for those services. I agree to comply with all applicable state, federal and municipal regulations and ordinances."

APPLICANT SIGNATURE:

 PRESIDENT BOSSEBALL 365 INC DATE: 3-31-17

For Office Use Only

Date Filed with Clerk: 5/12/17 Payment with Application: \$ 900.00 Receipt: C170512-14

Additional Fees Collected: \$ _____ Receipt # _____

Departmental review (all that apply):

Police Chief: Approved Denied Signed: [Signature]

Additional services needed: _____

Additional fees or deposit: _____

Fire Chief: Approved Denied Signed: [Signature]

Additional services needed: _____

Additional fees or deposit: _____

Street Dept.: Approved Denied Signed: [Signature]

Additional services needed: _____

Additional fees or deposit: _____

Parking Dept.: Approved Denied Signed: [Signature]

Additional services needed: No stalls required

Additional fees or deposit: _____

Piers, Harbors & Lakefront: Approved Denied Signed: _____

Additional services needed: _____

Additional fees or deposit: _____

Committee/Council review (all that apply):

Park Board: Meeting Date(s): May 3, 2017 Approved Denied A. DiCaro

Reasons/Conditions: fee \$150 each Friday + \$200 each Saturday + application fee + \$1000 security deposit

Finance, License & Regulation: Meeting Date(s): _____ Approved Denied

Reasons/Conditions: _____

Council: Meeting Date(s): _____ Approved Denied

Reasons/Conditions: _____

Clerk's Office Completion:

Total Add'l fee/deposit to be collected: \$ _____ Receipt # _____

Permit(s) issued: Parade/PA Street Use Park Permit

Date of issue: _____ Deposit Returned: \$ _____ Deposit withheld: \$ _____

Reason withheld: _____

5. Event Chair/Contact Person: Demetra Condos Phone: _____

6. Day of Event Contact Name: Demetra Condos Phone: _____

7. Is the event open to the public? Yes No

8. Will you charge an admission fee? Yes No

9. Estimated Attendance Number: 200

10. Basis for Estimate: pre sign up

11. Will you be setting up a tent? Yes No
If yes, list the location, size, Rental Company, and proof of completion of locates.

12. Will there be any animals? Yes No
If yes, what type and how many: _____

13. Detailed description of proposed event with map of exact location of the event and/or route.
We are in need of picnic tables for people to sit at on our playground while they are eating following the color run.

14. Description of plan for handling refuse collection and after-event clean-up:
Custodial

15. Description of plan for providing event security (if applicable):
N/A

16. Will there be fireworks or pyrotechnics at your event? Yes No
If yes, please attach a fireworks display permit or application.

17. Will your event include the sale of beer and/or wine? Yes No
If yes, please attach a completed Temporary Alcohol License & Temporary Operator License Application.

18. Will you or any other vendors be selling food or merchandise? Yes No
If yes, please attach list of proposed vendors, including business name and type of food/merchandise sold.

Section IV - Street Use

Check if this section does not apply.

N/A

1. Description of the portion(s) of road(s) to be used:
Road closures must include rental of barricades.

2. Will any parking stalls be used or blocked during the event? Yes No

Date(s) of use: _____

Total Number of Stalls Request: _____

Stall Number(s) and Location: _____

Additional Information:

3. Description of signage to be used during event:
If requesting City banner poles, please include a Street Banner Display Application.

Anticipated Services

Please indicate below any additional services you are requesting for your event. Estimated Fees or Deposits for these services may be required prior to issuance of permit(s).

- Electricity Explain: _____
- Water Explain: _____
- Traffic Control Explain: _____
- Police Services Explain: _____
- Fire/EMS Services Explain: _____
- Other Explain: _____

Section V- Fees

Application and Permit Fees		Unit Fee			Applicable Fee
Parade Permit					
Application Fee		\$25.00			_____
Street Use Permit					
Application Fee		\$25.00			_____
Permit Fee - Events lasting 2 days or less		\$40.00			_____
Permit Fee - Events lasting more than 2 days		\$100.00			_____
Parking Stall Bag Request					
Administrative Fee		\$10.00			_____
Parking Stall Usage/Blockage Fee - Per Stall, Per Day			# of Stalls	# of Days	
March 1 - November 14	\$20.00	x	_____	x _____	= _____
November 15 - February 29	\$10.00	x	_____	x _____	= _____
Park Reservation Permit					
Application Fee		\$25.00			_____
Security Deposit					
Non-Profit or Resident					
49 Attendees or Less		\$50.00			_____
50-149 Attendees		\$100.00			_____
150 or more Attendees		<i>Determined by Park Board</i>			_____
Non-Resident					
49 Attendees or Less		\$100.00			_____
50-149 Attendees		\$150.00			_____
150 or more Attendees		<i>Determined by Park Board</i>			_____
Park Reservation Fees - Per Location, Per Day					
Non-Profit or Resident					
49 Attendees or Less	\$30.00	x	_____	x _____	= _____
50-149 Attendees	\$55.00	x	_____	x _____	= _____
150 or more Attendees	\$105.00	x	_____	x _____	= _____
Non-Resident					
49 Attendees or Less	\$75.00	x	_____	x _____	= _____
50-149 Attendees	\$125.00	x	_____	x _____	= _____
150 or more Attendees	\$225.00	x	_____	x _____	= _____
Brunk Pavilion Rental Permit					
<i>Must also include rental of Flat Iron Park to rent Pavilion</i>					
Non-Profit or Resident	\$125.00			# of Days	x _____ = _____
Non-Resident	\$250.00			# of Days	x _____ = _____
Additional Park Amenities					
Equipment (with delivery)	Rental Fee		# Requested	Sec. Dep.	Applicable Fee
Benches	\$5.00 each		x _____	+ \$50.00	= _____
Picnic Tables	\$15.00 each		x <u>10</u>	+ \$50.00	= <u>200.00</u>
Barricades	\$5.00 each		x _____	+ \$50.00	= _____
Trash Receptacles	\$8.00 each		x _____	+ \$50.00	= _____
Dumpster Delivery	\$50.00 each		x _____	+ \$0	= _____
Dumpster Pick-up	\$50.00 plus additional landfill		_____		_____
Fencing - Snow	\$30.00 per 50 feet		_____		_____
<i>Requests for equipment are subject to availability.</i>					Subtotal: \$ <u>200.00</u>

please waive this fee for our school.

For Office Use Only

Date Filed with Clerk: 5/11/17 Payment with Application: \$ 0 Receipt: _____

Additional Fees Collected: \$ _____ Receipt # _____

Departmental review (all that apply):

Police Chief: Approved Denied Signed: _____

Additional services needed: _____

Additional fees or deposit: _____

Fire Chief: Approved Denied Signed: _____

Additional services needed: _____

Additional fees or deposit: _____

Street Dept.: Approved Denied Signed: Neil Wasson

Additional services needed: _____

Additional fees or deposit: _____

Parking Dept.: Approved Denied Signed: _____

Additional services needed: _____

Additional fees or deposit: _____

Piers, Harbors & Lakefront: Approved Denied Signed: _____

Additional services needed: _____

Additional fees or deposit: _____

Committee/Council review (all that apply):

Park Board: Meeting Date(s): _____ Approved Denied

Reasons/Conditions: _____

Finance, License & Regulation: Meeting Date(s): _____ Approved Denied

Reasons/Conditions: _____

Council: Meeting Date(s): _____ Approved Denied

Reasons/Conditions: _____

Clerk's Office Completion:

Total Add'l fee/deposit to be collected: \$ _____ Receipt # _____

Permit(s) issued: Parade/PA Street Use Park Permit

Date of issue: _____ Deposit Returned: \$ _____ Deposit withheld: \$ _____

Reason withheld: _____

CITY OF LAKE GENEVA

626 Geneva Street
Lake Geneva, WI 53147
(262) 248-3673
www.cityoflakegeneva.com



Memorandum

Date: May 10, 2017
To: Public Works Committee
From: Blaine Oborn, City Administrator
Subject: Discussion/Recommendation/Action on Greg Powers placing and operating a hot dog stand in Flat Iron Park

Attached is the Park Use Permit for Greg Powers placing and operating a hot dog stand in Flat Iron Park. The Board of Park Commissions reviewed the permit request and forwarded it to the Public Works Commission without a recommendation.

The City has a long history and the attached City ordinance Section 54-35(a) generally prohibiting business in City parks. A number of exceptions are provided in Section 54-35(b) with this request not fitting into one of the exceptions. Every year City staff turn down approaches for conducting business in City parks based upon this ordinance.

I recommend that the City Council deny the request by Greg Powers placing and operating a hot dog stand in Flat Iron Park thus following the City Ordinance and a long standing practice.

The City Council has the option to approve the request to conduct business in a City park. If the City Council decides to go in this direction, then it is the advice of the City Attorney to amend the City Ordinance accordingly to allow Business in City parks before approving this request.

Other issues to consider if allowing Business in City parks:

- 1) Equity, why is this request being selected over others. May want to do a vetting process for business allowed to conduct business in City Parks. Also, is it fair to allow competition with City businesses in buildings that pay property taxes for City services?
- 2) Days and hours of operation. There are a number of events in the park that the City allows limited business per City Ordinance that may conflict with the request. Therefore blackout days would likely need to be developed.
- 3) Rent. Any private business should pay for use of City property to conduct business.

Chapter 54. Parks and Recreation

Article II. RULES OF CONDUCT AND BEHAVIOR

Sec. 54-35. Business in parks.

[Code 1992, § 12.11]

- (a) Prohibited generally. Except as provided in this section, no person shall conduct any business of any nature for private gain or offer for sale or consideration any service of any kind or operate any business or conduct any sales booth, stand or other contrivance, whether the same be portable or stationary, for the sale of any merchandise, within or upon any public parks, public grounds or docks or piers extending from any public park or public grounds or from any public highway within the City or upon the water of Geneva Lake.
- (b) Exception; permit. The Council may, by special permit for the purpose of accommodating the public in the parks, lake shore, piers, docks or public highways, rent concessions to churches, religious, charitable or benevolent organizations, the American Legion or such persons or other organizations as the Council may deem fit to operate such concessions under such terms and conditions as the Council may provide or impose.

CITY OF LAKE GENEVA EVENT PERMIT APPLICATION



Please fill in all blanks completely, as incomplete applications will be rejected.
Applications must be submitted **AT LEAST 10 WEEKS** prior to the proposed event date(s).

Section I - What type of Permit(s) will your event require?

- Parade Permit.** Required for any parade on public property.
 - Map or description of the requested route to be traveled.
- Public Assembly Permit.** Required for any public gathering on public property. No fee required.
- Street Use Permit.** Required for any event using a public street. Per Sec. 62-243 of the municipal code, this application must include the following attachments:
 - Certificate of Comprehensive General Liability Insurance with the City, its employees and agents as additional insured with coverage for contractual liability with minimum limits of \$500,000 per occurrence for bodily injury and property damage limits of \$250,000 per occurrence.
 - Petition signed by more than half of the residential dwelling units and/or commercial units residing along that portion of the street designated for the proposed use or whose property is denied access by virtue of the granting of the permit.
- Parking Stall Bag Request.** Required for reserving the use of any City parking stall in conjunction of with an event.
- Park Reservation Permit.** Required for reserving the use of a park facility or shelter.
 - Brunk Pavilion.** Requires rental of Flat Iron Park. Additional rental fees apply.
- Beach Reservation Permit.** Required for reserving the use of the beach.

Section II - Applicant Information

1. Applicant Name: Greg Powers Date of Application: 04/05/2017
2. Organization Name: TOP Dawg LLC
3. Organization Type: For Profit Non-Profit (501(c)___) Tax ID: _____
4. Mailing Address: W3776 WOODLAND
5. City, State, Zip: LK Geneva, WI 53147
6. Phone: _____ E-mail: _____
7. Applicant's Drivers License #: _____ State license issued: _____
8. Are you applying as a resident of the City of Lake Geneva? Yes No
If yes, proof of residency must be attached.

Section III - Event Information

1. Title of Event: HOT Dog Sales
2. Date(s) of Event: Friday, Sat sun Throughout Summer (HOT season)
3. Location(s) of Event: FLAT IRON PARK
4. Hours: VARIOUS (Sun Open)

5. Event Chair*/Contact Person: _____ Phone: _____

6. Day of Event Contact Name: _____ Phone: _____

7. Is the event open to the public? Yes No

8. Will you charge an admission fee? Yes No

9. Estimated Attendance Number: open to public

10. Basis for Estimate: _____

11. Will you be setting up a tent? Yes No

If yes, list the location, size, Rental Company, and proof of completion of locates.

Mobile Restaurant Cart

12. Will there be any animals? Yes No

If yes, what type and how many: _____

13. Detailed description of proposed event with map of exact location of the event and/or route.

In front of dam on concrete slab.

14. Description of plan for handling refuse collection and after-event clean-up:

Clean-up + disposal of refuse daily

15. Description of plan for providing event security (if applicable):

16. Will there be fireworks or pyrotechnics at your event? Yes No
If yes, please attach a fireworks display permit or application.

17. Will your event include the sale of beer and/or wine? Yes No
If yes, please attach a completed Temporary Alcohol License & Temporary Operator License Application.

18. Will you or any other vendors be selling food or merchandise? Yes No
If yes, please attach list of proposed vendors, including business name and type of food/merchandise sold.

Section IV - Street Use

Check if this section does not apply.

1. Description of the portion(s) of road(s) to be used:
Road closures must include rental of barricades.

2. Will any parking stalls be used or blocked during the event? Yes No

Date(s) of use: _____

Total Number of Stalls Request: 1

Stall Number(s) and Location: To Be Determined

Additional Information:

3. Description of signage to be used during event:

If requesting City banner poles, please include a Street Banner Display Application.

Anticipated Services

Please indicate below any additional services you are requesting for your event. Estimated Fees or Deposits for these services may be required prior to issuance of permit(s).

- Electricity Explain: _____
- Water Explain: _____
- Traffic Control Explain: _____
- Police Services Explain: _____
- Fire/EMS Services Explain: _____
- Other Explain: _____

Section V- Fees

Application and Permit Fees		Unit Fee			Applicable Fee
Parade Permit					
Application Fee		\$25.00			_____
Street Use Permit					
Application Fee		\$25.00			_____
Permit Fee - Events lasting 2 days or less		\$40.00			_____
Permit Fee - Events lasting more than 2 days		\$100.00			_____
Parking Stall Bag Request					
Administrative Fee		\$10.00			_____
Parking Stall Usage/Blockage Fee - Per Stall, Per Day			# of Stalls	# of Days	
March 1 - November 14	\$20.00	x	_____	x _____ =	_____
November 15 - February 29	\$10.00	x	_____	x _____ =	_____
Park Reservation Permit					
Application Fee		\$25.00			_____
Security Deposit					
Non-Profit or Resident					
49 Attendees or Less		\$50.00			_____
50-149 Attendees		\$100.00			_____
150 or more Attendees		<i>Determined by Park Board</i>			_____
Non-Resident					
49 Attendees or Less		\$100.00			_____
50-149 Attendees		\$150.00			_____
150 or more Attendees		<i>Determined by Park Board</i>			_____
Park Reservation Fees - Per Location, Per Day					
Non-Profit or Resident					
49 Attendees or Less	\$30.00	x	_____	x _____ =	_____
50-149 Attendees	\$55.00	x	_____	x _____ =	_____
150 or more Attendees	\$105.00	x	_____	x _____ =	_____
Non-Resident					
49 Attendees or Less	\$75.00	x	_____	x _____ =	_____
50-149 Attendees	\$125.00	x	_____	x _____ =	_____
150 or more Attendees	\$225.00	x	_____	x _____ =	_____
Brunk Pavilion Rental Permit					
<i>Must also include rental of Flat Iron Park to rent Pavilion</i>				# of Days	
Non-Profit or Resident	\$250.00	x	_____	=	_____
Non-Resident	\$500.00	x	_____	=	_____
Additional Park Amenities					
Equipment (with delivery)	Rental Fee		# Requested	Sec. Dep.	Applicable Fee
Benches	\$5.00 each	x	_____ +	\$50.00 =	_____
Picnic Tables	\$15.00 each	x	_____ +	\$50.00 =	_____
Barricades	\$5.00 each	x	_____ +	\$50.00 =	_____
Trash Receptacles	\$8.00 each	x	_____ +	\$50.00 =	_____
Dumpster Delivery	\$50.00 each	x	_____ +	\$0 =	_____
Dumpster Pick-up	\$50.00 plus additional landfill		_____		_____
Fencing - Snow	\$30.00 per 50 feet		_____		_____
<i>Requests for equipment are subject to availability.</i>					Subtotal: \$ _____

Application and Permit Fees	Unit Fee			Applicable Fee
Beach Reservation Permit				
<i>Excludes Normal Beach Hours Memorial Day through Labor Day 9am-5pm</i>				
<i>Opening/Cleaning of Beach Bathrooms will be invoiced at an Hourly Rate</i>				
Application Fee	\$25.00			_____
Security Deposit				
Non-Profit or Resident				
49 Attendees or Less	\$50.00			_____
50-149 Attendees	\$100.00			_____
150 or more Attendees	<i>Determined by Piers, Harbors & Lakefront</i>			_____
Non-Resident				
49 Attendees or Less	\$100.00			_____
50-149 Attendees	\$150.00			_____
150 or more Attendees	<i>Determined by Piers, Harbors & Lakefront</i>			_____
Beach Reservation Fees - Per Day				
Non-Profit or Resident		# of Days		
49 Attendees or Less	\$30.00	x _____	= _____	_____
50-149 Attendees	\$55.00	x _____	= _____	_____
150 or more Attendees	\$105.00	x _____	= _____	_____
Non-Resident				
49 Attendees or Less	\$75.00	x _____	= _____	_____
50-149 Attendees	\$125.00	x _____	= _____	_____
150 or more Attendees	\$225.00	x _____	= _____	_____
Subtotal: \$				_____
+ Subtotal from Page 4: \$				_____

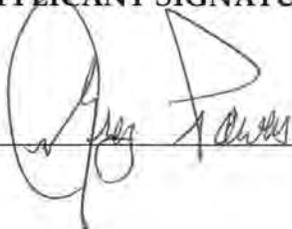
Total PAID with Application: \$ _____

Accepted by cash, credit card or checks (payable to the City of Lake Geneva)

Section VI - Signature of Applicant

“The information provided in this application is true and correct to the best of my knowledge and belief. I understand that cancellation of any event, for any reason, shall result in the forfeiture of permit fees. I understand that application fees are not refunded in the event the application is not approved. I understand that in addition to the schedule of fees, if any additional City services are requested or determined to be impacted, an additional fee will be charged for those services. I agree to comply with all applicable state, federal and municipal regulations and ordinances.”

APPLICANT SIGNATURE:



DATE: 04/05/2017

For Office Use Only

Date Filed with Clerk: 4/5/17 Payment with Application: \$ 0 Receipt: _____

Additional Fees Collected: \$ _____ Receipt # _____

Departmental review (all that apply):

Police Chief: Approved Denied Signed: [Signature]

Additional services needed: _____

Additional fees or deposit: 0

Fire Chief: Approved Denied Signed: [Signature]

Additional services needed: _____

Additional fees or deposit: _____

Street Dept.: Approved Denied Signed: [Signature]

Additional services needed: _____

Additional fees or deposit: _____

Parking Dept.: Approved Denied Signed: [Signature]

Additional services needed: STATUS TO Be determined

Additional fees or deposit: _____

Piers, Harbors & Lakefront: Approved Denied Signed: [Signature]

Additional services needed: _____

Additional fees or deposit: _____

Committee/Council review (all that apply): not forwarded without recommendation

Park Board: Meeting Date(s): _____ Approved Denied

[Signature] Reasons/Conditions: _____

Finance, License & Regulation: Meeting Date(s): _____ Approved Denied

Reasons/Conditions: _____

Council: Meeting Date(s): _____ Approved Denied

Reasons/Conditions: _____

Clerk's Office Completion:

Total Add'l fee/deposit to be collected: \$ _____ Receipt # _____

Permit(s) issued: Parade/PA Street Use Park Permit

Date of issue: _____ Deposit Returned: \$ _____ Deposit withheld: \$ _____

Reason withheld: _____



Center Street Park

Lake Geneva, WI

rd. TreadHead Cycling

Park Goals

Center Street Park & trails will be used for:

1. Mountain Biking
2. Walking/Hiking
3. Trail running
4. Community events

In the future, there is hope that Center St may connect to Lake Geneva Canopy Tour Trails, and the Lake Geneva Bike Path System. TreadHead Cycling would like to see Center Street Park named to give the developers and workers credit, so something like Treadhead Trails.

Phase 1

1. Gate at trail head for closed trails for longer periods of time like early spring or large rain events
 2. Laying out potential loops by difficulty/distance use ski levels? Green, blue, black
 3. Map out trails with GPS
 4. Clear the trail make adjustments for safety (hikers, bikers)
 5. Signage plan:
 - a. Trails sign (mileage markers, location, difficulty)
 - b. Park info and contact info
 - c. Rules sign
1. Gravel parking area (any idea on how many cars it can hold? Or maybe this is yet to be determined)
 2. Facebook page for trail information and closures as well as website link can be off the TreadHead Cycling site.
 3. Bench at the trail head
 4. Benches in a few key area of the trail (rest area or viewing area)

Park Rules

Park rules: (A few suggestions)

- 1) Hiking is done in the opposite direction of biking for maximum visibility and safety.
- 2) Dogs must remain on a leash and in control.
- 3) Clean up after your pet!
- 4) Know the trail conditions before you ride or hike (check facebook page/phone message),
 - a) Use same rules as DNR? Look at Silver Lake Trails

Phase 2 - Infrastructure

1. Bike Wash - need water source
2. Bike racks
3. Work stand with pump
4. Skills riding area
5. Pump Track

Phase 3 - Amenities

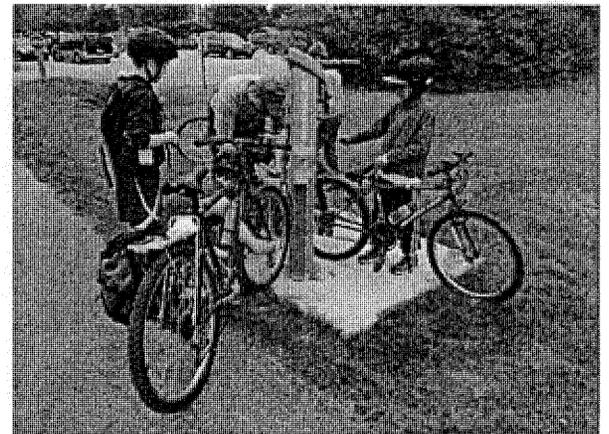
Shelter / small pavilion for community events

1. Picnic tables and or benches
2. Grill
3. Fire pit
4. Restrooms (flushable or pit type like Kettle Moraine, White River County Park)?

Infrastructure

Bike wash - They have this at the John Muir trails at Kettle Moraine South and it's great for washing off your bike and your person from potential poison ivy exposure.

Tool Stand - Sometimes things happen and its great to have some typical hand tools for those emergencies so people can come and ride. Saw this at Indiana University, Bloomington on campus.



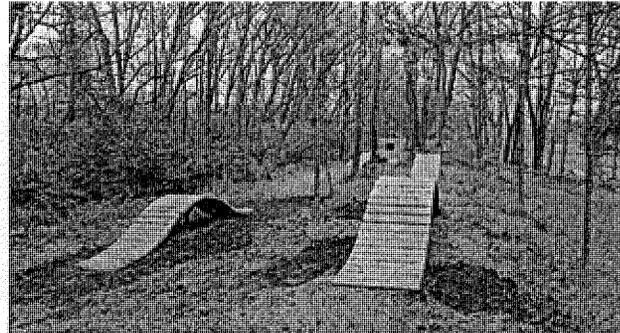
Skills Course

Skills courses are great for riders of all ages!

Can be built of various materials, rocks, logs, wood.

Can be graded, easy, hard, expert.

Can be laid out in a natural progression of skill building.

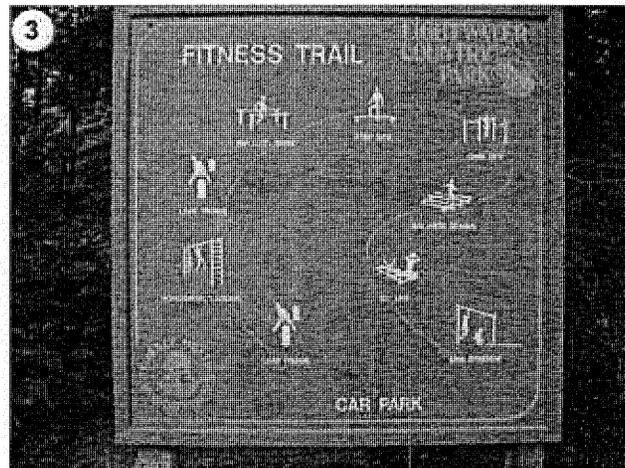
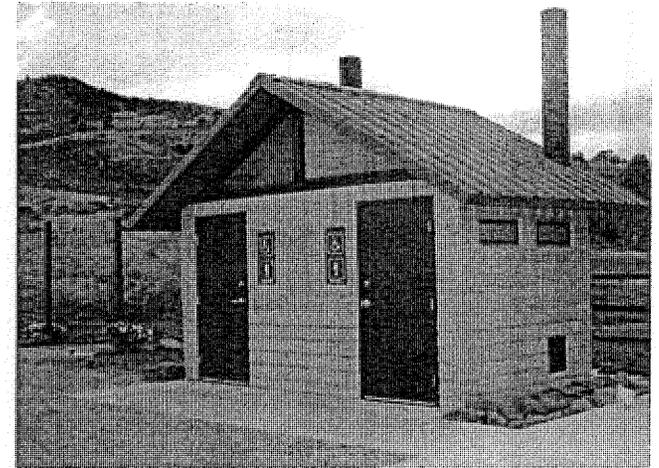


Amenities

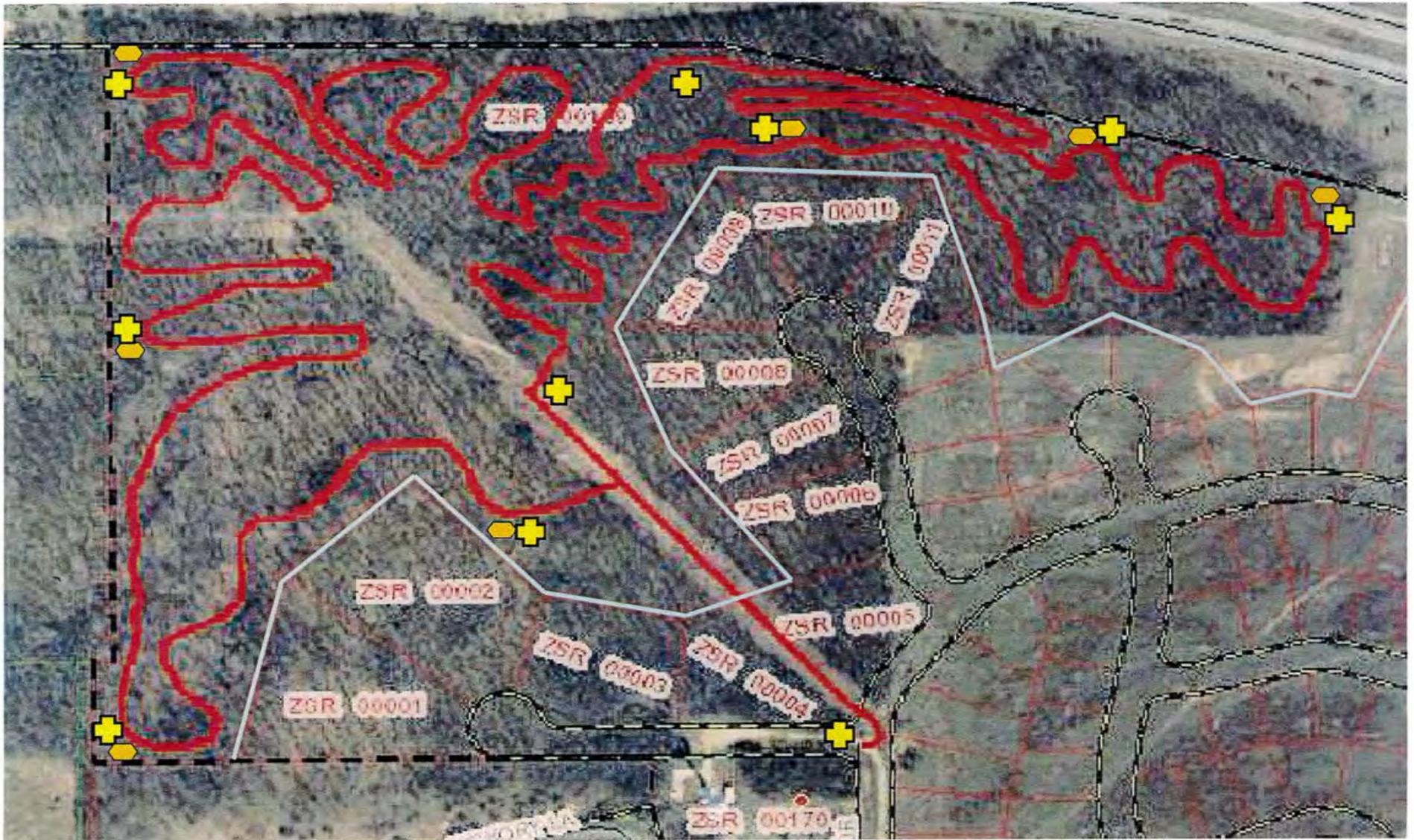
Bathrooms and a Multi-use pavilion are going to add a lot more use and draw to the park.

Ex: Will be able to use park for an event when trails are too wet to ride/hike.

Also could install a Fitness trail with the benches



Center Street Park Prospective Trail Map



Board of Park Commissioners' Minutes
Wednesday, May 3, 2017 – 6:30pm
City Hall, Meeting Room 2A

Discussions on Park Assignments/repair update/maintenance

Swanson presented report stating all are in good shape, but wet, due to the weather.

New Business:

Veterans Park Permits and Fees – Motion by Skates/Kupsik to form ad hoc committee to review agreement and financial arrangement between City and YMCA. Ad hoc committee members are Schneider, Olsen, Esarco. Unanimously carried.

Concession Stand Contract at Veterans Park – Oborn stated that we have a two-year contract that will expire at the end of 2017. The contract has been with Brenner for the last 18-19 years. Renewal should be completed by November 2017, unless we want to make a change. Brenner stated tournaments do get hectic on the weekends; people come with their own food and want the concession stand to refrigerate. He stated that a security camera would be a nice addition to help keep track of the people coming and going. The cost of a security camera was discussed.

Swanson suggested putting the contract out for a bid, but with no grill, no wood, no fryer, we may get limited responses. Olsen stated contract should go to one person for the season, not a new person every tournament. Quickel stated we have time, look at proposals of activities. Tournaments are where the money is made. Investigate what other tournaments do. Quickel volunteered to do some research. Kupsik reminded us that there is to be no business in the park, can't sell anything, concession stand has its own separate contract with Brenner. Quickel stated that Brenner may be only interested party and he pays a \$1,500 fee. We just want to investigate to see what options may exist.

Tree Board Appointments – Skates/Kupsik motion to appoint Candy Kirchberg and Bob Peters to tree board for three-year term to expire on May 1, 2020. Unanimously carried.

Tree Board Policy/Ordinance – item carried forward.

Funding for Center Street Park – Capital budget approved \$20,000 for the use of Center Street Park development. Oborn noted need to verify public access at pole line with Public Works, and then bring back to Park Board. Swanson stated that he believed the City would not fund the project. Swanson also concerned about emergency access. Skates stated that he believes police and fire have reviewed and Chief Peters feels that the flat areas are fine, but the valleys may be a concern. Swanson states that while this is a great idea, we may have other needs that should come first. It is suggested that the \$20,000 be used for partial surveying, gravel, restrooms. Trails should be 100 feet off property lines, builders of trail (Treadhead Cycling suggest at least 150 feet off property lines).

Olsen/Hartigan recommend to move Center Street project forward to Public Works for their decision. 6-1 (Swanson, opposed).

Board of Park Commissioners' Minutes
Wednesday, May 3, 2017 – 6:30pm
City Hall, Meeting Room 2A

Little Free Libraries and Leadership Dynamics at Badger High School – Anders Haldorsen representing the Leadership Dynamics committee at Badger High School requested installation of Little Free Library boxes in city parks. Oborn and Skates expressed concern about maintenance of the boxes and vandalism of the boxes and books. Haldorsen stated that when the boxes are registered to the Little Free Library network a steward is picked to maintain the location. Haldorsen stated that the location in front of the Chamber building is registered.

Skates/Olsen motion that a Little Free Library location be approved at Maple Park and the Tot Lot on the condition that it is registered with the Little Free Library organization and a steward is solidified before the installation. The Leadership Dynamics committee is to work with City Staff to find the best location within those parks. Unanimously carried.

Secretary for Park Board –Esarco requested that a community member be made a non-voting member of the Park Board and to serve the duties of Secretary for the Park Board. Oborn to check with the City Attorney regarding the possibility of this. Carried forward to next month.

Tournament Permit Application Fee Schedule – Kupsik stated that City does not have specific fee for field use, only for park use. City should know the financing needed to maintain the field. Currently it is believed that \$300 day for Saturday and Sunday and \$100 for Friday is covering the City's cost. Jr. Badger's have two tournaments coming up, TOC also has two tournaments coming up.

Motion Skates/Esarco recommend tournament fees for Friday at \$150, and Saturday and Sunday at \$300 each day. 6-0-1 (Quickel abstain)

Old Business:

Flag Installation at Home Depot, Flat Iron Park, and Veteran's Park. Olsen reported that one flag installation will be provided at Flat Iron Park as a donation from the Lake Geneva Jaycees.

Motion by Swanson/Quickel to accept donation from the Lake Geneva Jaycees to install flag at Flat Iron Park, coordinating with city staff, at a donated value of \$1,200. Unanimously carried.

Manning Way – City approved \$40,000, impact fees will provide \$20,000. Total project budget \$60,000.

Vandewalle Bike Study Proposal –

Skates/Olsen motion to move to Public Works for discussion of the Vandewalle City Wide Multi Use Plan. Unanimously approved. City Clerk to review.

Future meeting agenda items old:

Tree Board Policy Ordinance
Center Street Park
Secretary for Park Board

**City of Lake Geneva
Finance, License, & Regulation Committee
May 16, 2017**

Prepaid Checks

4/30/17 - 5/12/17

**Total:
\$6,743.97**

**Checks over \$5,000:
\$ -**

DATE: 05/15/2017
 TIME: 16:09:38
 ID: AP450000.WOW

CITY OF LAKE GENEVA
 PAID INVOICE LISTING

FROM 05/10/2017 TO 05/12/2017

VENDOR #	INVOICE #	ITEM DESCRIPTION	ACCOUNT NUMBER	INV. DATE	P.O. NUM	CHECK #	CHK DATE	CHECK AMT	INVOICE AMT/ ITEM AMT
ATC	AMERICAN TEST CENTER								
	2170799	01 ANNUAL LADDER TESTS	1122005820	04/24/17		65130	05/10/17	1,295.00	1,295.00 1,295.00
VENDOR TOTAL:									1,295.00
BOUND	BOUND TREE MEDICAL LLC								
	82467365	01 GLOVES	1122005810	04/17/17		65131	05/10/17	817.25	125.90 125.90
	82470125	01 ORAL AIRWAY	1122005810	04/19/17		65131	05/10/17	817.25	1.22 1.22
	82473729	01 ELECTRODE PADS,EKGPAPER,SHARPS	1122005810	04/24/17		65131	05/10/17	817.25	690.13 690.13
VENDOR TOTAL:									817.25
BUDGET	BUDGET LIBRARY SUPPLIES								
	14982	01 DVD CASES,TAGS	9900005512	01/04/17		65132	05/10/17	614.00	614.00 614.00
VENDOR TOTAL:									614.00
EQUAL	EQUAL RIGHTS DIVISION								
	250-4/17	01 WORK PERMITS-APR	1100002422	04/30/17		700043	05/10/17	75.00	75.00 75.00
VENDOR TOTAL:									75.00
GLOBAI	GLOBAL IMPORTS INC								
	392116	01 RECHARGEABLE BATTERY	1122005340	02/22/17		65133	05/10/17	59.74	59.74 59.74
VENDOR TOTAL:									59.74
GREAT	GREAT AMERICA LEASING CORP								
	20514249	01 BIZHUB-APR	1122005340	04/17/17		65134	05/10/17	170.31	170.31 170.31
VENDOR TOTAL:									170.31
KEIL	KEIL ENTERPRISES								
	TRNG-5/17	01 DRUG CLASSFCN TRNG-TYLER	1121005410	05/04/17		65135	05/10/17	195.00	195.00 195.00
VENDOR TOTAL:									195.00

FROM 05/10/2017 TO 05/12/2017

VENDOR #	INVOICE #	ITEM DESCRIPTION	ACCOUNT NUMBER	INV. DATE	P.O. NUM	CHECK #	CHK DATE	CHECK AMT	INVOICE AMT/ ITEM AMT
MILLM	MILLER MOTOR SALES INC								
	67532	01 FUEL INJECTOR-AMB 3	1122005240	04/19/17		65136	05/10/17	824.29	824.29
									824.29
									VENDOR TOTAL:
									824.29
MILLS	MICHAEL MILLS								
	REIMB 4/17	01 MABAS MTG-FOOD	1122005399	04/21/17		65137	05/10/17	124.13	124.13
									124.13
									VENDOR TOTAL:
									124.13
MUTUA	MUTUAL OF OMAHA								
	RE050817	01 CEM DISABILITY-JUN	4800005137	04/19/17		65138	05/10/17	1,216.18	1,216.18
		02 PKG DISABILITY-JUN	4234505137						29.16
		03 CH DISABILITY-JUN	1110205134						16.81
		04 LIB DISABILITY-JUN	9900005137						146.67
		05 PD DISABILITY-JUN	1110205134						55.48
		11 STR DISABILITY-JUN	1110205134						544.37
		12 UTIL DISABILITY-JUN	1100001634						210.41
		13 WWTF DISABILITY-JUN	1100001634						154.50
									58.78
									VENDOR TOTAL:
									1,216.18
PAUL	PAUL CONWAY SHIELDS INC								
	402543-IN	01 SCBA STRAPS	1122005800	04/20/17		65139	05/10/17	469.96	469.96
									469.96
									VENDOR TOTAL:
									469.96
RELIANT	RELIANT FIRE APPARATUS INC								
	I17-17116	01 SWITCH-SQ #1	1122005351	04/03/17		65140	05/10/17	509.92	70.31
									70.31
	I17-17117	01 RELAY SWITCH-SQ #1	1122005351	04/03/17		65140	05/10/17	509.92	297.46
									297.46
	I17-17207	01 STROBE-SQ #1	1122005351	04/19/17		65140	05/10/17	509.92	142.15
									142.15
									VENDOR TOTAL:
									509.92
T0001430	WI CRISIS NEGOTIATOR'S ASSOEN								
	WCNA SPR TRNG-5/17			04/28/17		65141	05/10/17	35.00	35.00

DATE: 05/15/2017
TIME: 16:09:38
ID: AP450000.WOW

CITY OF LAKE GENEVA
PAID INVOICE LISTING

FROM 05/10/2017 TO 05/12/2017

VENDOR #	INVOICE #	ITEM DESCRIPTION	ACCOUNT NUMBER	INV. DATE	P.O. NUM	CHECK #	CHK DATE	CHECK AMT	INVOICE AMT/ ITEM AMT
	WCNA SPR TRNG-5/17			04/28/17		65141	05/10/17	35.00	35.00
	01 RICHARDSON TRNG		1121005410						35.00
								VENDOR TOTAL:	35.00
VERIZON	VERIZON WIRELESS								
	9784585041			04/23/17		65142	05/10/17	338.19	338.19
	01 CELL CHGS-APR		1122005262						338.19
								VENDOR TOTAL:	338.19
								TOTAL --- ALL INVOICES:	6,743.97

City of Lake Geneva
Finance, License, & Regulation Committee
May 16, 2017

Accounts Payable

	<u>Fund #</u>	
1. General Fund	11	\$ 99,531.68
2. Debt Service	20	\$ -
3. TID #4	34	\$ -
4. Lakefront	40	\$ 16,694.08
5. Capital Projects	41	\$ -
6. Parking	42	\$ -
7. Cemetery	48	\$ 1,294.41
8. Equipment Replacement	50	\$ 1,469.00
9. Library Fund	99	\$ 1,096.88
10. Impact Fees	45	\$ -
11. Tax Agency Fund	89	\$ -
Total All Funds		<u><u>\$120,086.05</u></u>

**CITY OF LAKE GENEVA
ACCOUNTS PAYABLE UNPAID ITEMS OVER \$5,000**

**FINANCE, LICENSE, & REGULATION COMMITTEE
FLR Meeting Date: 5/16/17**

TOTAL UNPAID ACCOUNTS PAYABLE **\$ 120,086.05**

ITEMS > \$5,000

Johns Disposal Service Inc - May Refuse & Recycling Service	\$ 38,069.23
Alliant Energy - April Electric Bills	\$ 19,449.93
Vandewalle & Associates - Apr Planning Services	\$ 10,220.41
Lake Geneva Jaycees - Fireworks Contribution	\$ 10,000.00
Kapur & Associates - Apr Engineering Services	\$ 5,660.15

Balance of Other Items \$ 36,686.33

DATE: 05/12/17
TIME: 17:48:25
ID: AP441000.WOW

CITY OF LAKE GENEVA
DETAIL BOARD REPORT

INVOICES DUE ON/BEFORE 05/23/2017

INVOICE #	INVOICE DATE	ITEM #	DESCRIPTION	ACCOUNT #	P.O. #	DUE DATE	ITEM AMT
RE051218	05/18/17	01	ACCT #026273-HAVENWOOD FLSH	1134105222		05/23/17	10.93
		02	ACCT #057300-SOUTH/WELLS FLSH	1134105222			15.79
		03	ACCT #064443-WELLS ST FLSH	1134105222			17.06
		04	ACCT #072470-MAIN ST LITES	1134105223			199.96
		07	ACCT #108571-1055 CAREY	1132105222			190.79
		08	ACCT #111395-BROAD ST TRFC LT	1134105223			44.81
		11	ACCT #148614-HWY 50/12 FLASHER	1134105222			14.12
		12	ACCT #152472-W COOK SIREN	1129005222			21.36
		13	ACCT #161895-RIVIERA ELEC	4055305222			2,316.34
		14	ACCT #165231-BEACH HOUSE	4054105222			323.45
		15	ACCT #178450-INTCHG N/SHER SPR	1134105223			58.11
		16	ACCT #182684-HWY 120/BLMFLD LT	1134105223			90.45
		17	ACCT #243254-LIBRARY PARK	1152005222			24.88
		18	ACCT #252132-EDWDS BLVD/WM SIG	1134105223			82.34
		20	ACCT #293132-SAGE ST/DUNN SRN	1129005222			4.69
		21	ACCT #303645-MS2 STREET LTS	1134105223			303.49
		22	ACCT #327582-DUNN FIELD	1152005922			103.04
		23	ACCT #339772-SNAKE RD/HWY 50	1134105222			15.32
		24	ACCT #363673-VETS PK/TWNLN RD	1152015222			94.76
		25	ACCT #393713-MUSEUM 256 MILL	1151105222			991.60
		27	ACCT #401872-WELLS ST FLSH	1134105222			13.68
		28	ACCT #414694-HOST DR WATER TWR	1122005222			141.39
		29	ACCT #422323-GENEVA SQ TRF LT	1134105223			31.25
		30	ACCT #433371-LIBRARY	9900005222			808.88
		31	ACCT #457625-LOT LITE GNVA ST	1134105223			298.25
		32	ACCT #462852-WELLS ST FLSH	1134105222			76.61
		33	ACCT #549716-FLAT IRON PARK	1152005222			129.04
		34	ACCT #566211-W HWY 50 BLK FLSH	1134105222			15.32
		35	ACCT #595515-LIB PARK RESTROOM	1152005222			168.43
		36	ACCT #602235-724 WILLIAMS ST	1134105223			22.44
		37	ACCT #604445-S LAKESHORE DR FL	1134105222			11.26
		38	ACCT #622184-S LAKESHORE DR	1152005222			25.17
		39	ACCT #630016-COOK ST/HWY 50	1134105223			41.70
		40	ACCT #661112-OAK HILL CEMETERY	4800005222			114.94

INVOICES DUE ON/BEFORE 05/23/2017

INVOICE #	INVOICE DATE	ITEM #	DESCRIPTION	ACCOUNT #	P.O. #	DUE DATE	ITEM AMT

ALLIANT	ALLIANT ENERGY						
RE051218	05/18/17	41	ACCT #684954-730 MARSHALL SRN	1129005222		05/23/17	26.89
		43	ACCT #688465-TENNIS CTS/SCHL	1152005222			24.30
		44	ACCT #718894-OAK HILL CEMETERY	4800005222			26.01
		46	ACCT #732492-389 EDWDS TRF LT	1134105223			113.87
		47	ACCT #734115-HWY 50/HWY 12 LTS	1134105222			29.88
		48	ACCT #738154-RUSHWOOD PARK	1152005222			27.41
		49	ACCT #758433-700 GENEVA ST LOT	1134105223			159.62
		50	ACCT #758940-1065 CAREY ST	1132105222			492.47
		51	ACCT #759513-STREET LIGHTS	1134105223			6,870.39
		52	ACCT #800930-VETS PK SCOREBRD	1152015222			153.57
		53	ACCT #837813-SEM PARK RESTROOM	1152005222			20.59
		54	ACCT #895526-HWY 50 TRF LT	1134105223			137.98
		55	ACCT #912610-GEORGE ST FLSHR	1134105222			11.56
		56	ACCT #923482-1070 CAREY ST	1132105222			234.65
		59	ACCT #926683-FLAT IRON PK/WRGL	1152005222			16.12
		60	ACCT #932215-DODGE ST FLSHR	1134105222			11.86
		63	ACCT #940353-IMPND 1070 CAREY	1121005222			28.53
		64	ACCT #952816-FIRE HOUSE	1122005222			763.20
		65	ACCT #957203-HWY 120/TWNLD RD	1134105222			86.34
		66	ACCT #965570-201 EDWARDS SIREN	1129005222			18.70
		67	ACCT #969933-CITY HALL	1116105222			3,045.50
		68	ACCT #973443-VETS PARK PAVLN	1152015222			188.86
		69	ACCT #980910-DONIAN PARK	1152005222			114.00
		70	ACCT #998403-COBB PARK	1152005222			25.98
						INVOICE TOTAL:	19,449.93
						VENDOR TOTAL:	19,449.93
AUROL	AURORA HEALTH CARE						
733561	04/23/17	01	DRUG TESTS	1132105205		05/23/17	200.00
						INVOICE TOTAL:	200.00
						VENDOR TOTAL:	200.00
BATZN	BATZNER PEST CONTROL						

INVOICES DUE ON/BEFORE 05/23/2017

INVOICE #	INVOICE DATE	ITEM #	DESCRIPTION	ACCOUNT #	P.O. #	DUE DATE	ITEM AMT

BATZN	BATZNER PEST CONTROL						
APRIL2017	05/12/17	01	PEST CONTROL-APRIL	4055205360		05/23/17	324.00
						INVOICE TOTAL:	324.00
						VENDOR TOTAL:	324.00
BRUCE	BRUCE EQUIPMENT INC						
P03279	05/12/17	01	TUBE/TUBE BROOM-SWEEPER	1132105351		05/23/17	878.00
						INVOICE TOTAL:	878.00
P03280	05/12/17	01	STRIP BROOMS-SWEEPER	1132105351		05/23/17	630.00
						INVOICE TOTAL:	630.00
						VENDOR TOTAL:	1,508.00
BSL	BADGER STATE INDUSTRIES						
306-171384	05/12/17	01	PAPER TOWEL,TP,CAN LINERS	1116105350		05/23/17	214.08
		02	TOILET PAPER	1151105240			29.07
						INVOICE TOTAL:	243.15
						VENDOR TOTAL:	243.15
BUMPL	BUMPER TO BUMPER AUTO PARTS						
6620357912	05/12/17	01	HEADLAMP	1132105250		05/23/17	9.19
						INVOICE TOTAL:	9.19
						VENDOR TOTAL:	9.19
CES	CES						
LKG/038188	04/26/17	01	SWITCHES-1065 CAREY ST	1132105350		05/23/17	12.27
						INVOICE TOTAL:	12.27
LKG/038204	04/26/17	01	WIRE CONNECTION	1134105261		05/23/17	51.42
						INVOICE TOTAL:	51.42
LKG/038213	04/27/17	01	BALLAST-WEST END BATHRM	1152005350		05/23/17	23.76
						INVOICE TOTAL:	23.76

DATE: 05/12/17
 TIME: 17:48:25
 ID: AP441000.WOW

CITY OF LAKE GENEVA
 DETAIL BOARD REPORT

INVOICES DUE ON/BEFORE 05/23/2017

INVOICE #	INVOICE DATE	ITEM #	DESCRIPTION	ACCOUNT #	P.O. #	DUE DATE	ITEM AMT
CES	CES						
LKG/038241	04/28/17	01	BALLAST-LIBR BATHRM	1152005350		05/23/17	23.76
						INVOICE TOTAL:	23.76
						VENDOR TOTAL:	111.21
D&K	D&K SERVICES						
2017097	05/05/17	01	SEWER RODDING-GAGE KITCHEN	4055205360		05/23/17	250.00
						INVOICE TOTAL:	250.00
						VENDOR TOTAL:	250.00
DELS	DEL'S SERVICE						
8092	04/17/17	01	FUEL,GAS	1132105341		05/23/17	294.60
						INVOICE TOTAL:	294.60
8094	04/18/17	01	FUEL,GAS	1132105341		05/23/17	149.36
						INVOICE TOTAL:	149.36
8096	04/19/17	01	FURL,GAS	1132105341		05/23/17	32.42
						INVOICE TOTAL:	32.42
						VENDOR TOTAL:	476.38
DUNN	DUNN LUMBER & TRUE VALUE						
682935	05/02/17	01	PAINT,TAPE,TRAY LINER	1152005350		05/23/17	43.37
		02	DISCOUNT	1100004819			-0.57
						INVOICE TOTAL:	42.80
682978	05/02/17	01	KEY SET-SWEEPER #32	1132105351		05/23/17	32.99
		02	DISCOUNT	1100004819			-1.65
						INVOICE TOTAL:	31.34
682984	05/02/17	01	BEE KILLER,STEEL WOOL	1152005350		05/23/17	17.37
		02	DISCOUNT	1100004819			-0.87
						INVOICE TOTAL:	16.50

INVOICES DUE ON/BEFORE 05/23/2017

INVOICE #	INVOICE DATE	ITEM #	DESCRIPTION	ACCOUNT #	P.O. #	DUE DATE	ITEM AMT

DUNN	DUNN LUMBER & TRUE VALUE						
683285	05/04/17	01	PAINT-SNOW PLOW	1132125250		05/23/17	17.94
						INVOICE TOTAL:	17.94
683772	05/12/17	01	BUG FOGGER-3 PK	1152005350		05/23/17	6.99
		02	DISCOUNT	1100004819			-0.35
						INVOICE TOTAL:	6.64
683981	05/12/17	01	HOSE CLAMP	1134105374		05/23/17	3.58
		02	DISCOUNT	1100004819			-0.18
						INVOICE TOTAL:	3.40
684043	05/12/17	01	ROD/SCREEN KIT #19	1132105351		05/23/17	55.93
		02	DISCOUNT	1100004819			-2.80
						INVOICE TOTAL:	53.13
						VENDOR TOTAL:	171.75
DUO	DUO SAFETY LADDER CORPORATION						
447222	12/23/14	01	RUNG REAMER TOOL RETURN	1122005351		03/16/16	-126.00
		02	REFUND CK RECD-TOOL RETURN	1122005351			126.00
						INVOICE TOTAL:	0.00
						VENDOR TOTAL:	0.00
ELKHO	ELKHORN CHEMICAL CO INC						
587297	05/12/17	01	HAND SOAP	1116105350		05/23/17	94.00
						INVOICE TOTAL:	94.00
						VENDOR TOTAL:	94.00
ENTRA	ENTRANCE SYSTEMS LLC						
17229	05/12/17	01	SERVICE CALL-AUTO GATES	1132105360		05/23/17	161.00
						INVOICE TOTAL:	161.00
						VENDOR TOTAL:	161.00

DATE: 05/12/17
TIME: 17:48:25
ID: AP441000.WOW

CITY OF LAKE GENEVA
DETAIL BOARD REPORT

INVOICES DUE ON/BEFORE 05/23/2017

INVOICE #	INVOICE DATE	ITEM #	DESCRIPTION	ACCOUNT #	P.O. #	DUE DATE	ITEM AMT

EVERG	EVERGREEN SEPTIC SERVICE LLC						
2626	04/27/17	01	CLEAN GREASE TRAPS	4055205360		05/23/17	250.00
						INVOICE TOTAL:	250.00
						VENDOR TOTAL:	250.00
FLOWE	JIM FLOWER						
MILEAGE-04/17	04/27/17	01	APR-160 MILES C/E	1124005330		05/23/17	85.60
						INVOICE TOTAL:	85.60
						VENDOR TOTAL:	85.60
FORD	FORD OF LAKE GENEVA						
57774	05/01/17	01	REAR HANDLES FIX-EXPLORER	1132105250		05/23/17	106.09
						INVOICE TOTAL:	106.09
						VENDOR TOTAL:	106.09
GENON	GENEVA ONLINE INC						
1046234	05/01/17	01	EMAIL SVC-MAY	1112005221		05/23/17	2.00
						INVOICE TOTAL:	2.00
						VENDOR TOTAL:	2.00
GEOSY	GEO-SYNTHETICS LLC						
125972	04/27/17	01	STRAW NETTING	1152005352		05/23/17	108.00
						INVOICE TOTAL:	108.00
						VENDOR TOTAL:	108.00
HOME	HOME DEPOT CREDIT SERVICES						
6564764	03/28/17	01	WEED TRIMMERS	1152005399		05/23/17	398.00
						INVOICE TOTAL:	398.00
						VENDOR TOTAL:	398.00
ITU	ITU ABSORB TECH INC						

INVOICES DUE ON/BEFORE 05/23/2017

INVOICE #	INVOICE DATE	ITEM #	DESCRIPTION	ACCOUNT #	P.O. #	DUE DATE	ITEM AMT

ITU	ITU ABSORB TECH INC						
6789253	05/05/17	01	MATS,TOWELS	1132105360		05/23/17	80.70
						INVOICE TOTAL:	80.70
6789254	05/05/17	01	MATS	1116105360		05/23/17	77.13
						INVOICE TOTAL:	77.13
						VENDOR TOTAL:	157.83
JERRY	JERRY WILLKOMM INC						
231511	04/05/17	01	1500 GALS GAS	1132105341		05/23/17	3,388.50
						INVOICE TOTAL:	3,388.50
						VENDOR TOTAL:	3,388.50
JOHNS	JOHNS DISPOSAL SERVICE INC						
119015	05/12/17	01	CEMETARY GARBAGE PICKUP	1136005296		05/23/17	144.00
						INVOICE TOTAL:	144.00
120063	05/05/17	01	MAY SVC	1136005294		05/23/17	26,916.68
		02	MAY SVC	1136005297			11,008.55
						INVOICE TOTAL:	37,925.23
						VENDOR TOTAL:	38,069.23
KAEST	KAESTNER AUTO ELECTRIC CO						
252995	05/12/17	01	LED ROOF WARNING LIGHT	1132105351		05/23/17	269.99
						INVOICE TOTAL:	269.99
						VENDOR TOTAL:	269.99
KAPUR	KAPUR & ASSOCIATES, INC						
89743	05/12/17	01	2016 MAIN ST WIDENING	1130005216		05/23/17	623.00
						INVOICE TOTAL:	623.00
90528	05/12/17	01	STORM WATER ORD	1130005216		05/23/17	1,444.50
						INVOICE TOTAL:	1,444.50

INVOICES DUE ON/BEFORE 05/23/2017

INVOICE #	INVOICE DATE	ITEM #	DESCRIPTION	ACCOUNT #	P.O. #	DUE DATE	ITEM AMT

KAPUR	KAPUR & ASSOCIATES, INC						
90563	05/12/17	01	2017 LAKE GENEVA PLAN REVIEW	1130005216		05/23/17	1,176.00
						INVOICE TOTAL:	1,176.00
90572	05/12/17	01	SYMPHONY BAY ENG/SURV	1100001391		05/23/17	2,048.65
						INVOICE TOTAL:	2,048.65
90574	05/12/17	01	COVE LOT ENGINEERING	1130005216		05/23/17	368.00
						INVOICE TOTAL:	368.00
						VENDOR TOTAL:	5,660.15
LAKWF	LAKEWOOD FILTERS INC						
117651	05/12/17	01	FILTER CHANGES	1116105360		05/23/17	260.20
						INVOICE TOTAL:	260.20
						VENDOR TOTAL:	260.20
LASERE	LASER ELECTRIC SUPPLY						
1452751	04/18/17	01	BALLASTS	1132105350		05/23/17	199.89
		02	W/PROOF REMOTE HEAD	1151105240			37.26
		03	DISCOUNT	1100004819			-4.74
						INVOICE TOTAL:	232.41
						VENDOR TOTAL:	232.41
LGJAY	LAKE GENEVA JAYCEES						
FIREWORKS-2017	05/03/17	01	FIREWORKS CONTRIBUTION-2017	4054105780		05/23/17	10,000.00
						INVOICE TOTAL:	10,000.00
						VENDOR TOTAL:	10,000.00
MAILF	MAILFINANCE						
N6512929	04/25/17	01	METER LEASE JUN-AUG	1116105532		05/23/17	891.00
						INVOICE TOTAL:	891.00
						VENDOR TOTAL:	891.00

INVOICES DUE ON/BEFORE 05/23/2017

INVOICE #	INVOICE DATE	ITEM #	DESCRIPTION	ACCOUNT #	P.O. #	DUE DATE	ITEM AMT

MARED	MARED MECHANICAL						
101954	04/27/17	01	HVAC INSPECTION	1116105360		05/23/17	764.50
						INVOICE TOTAL:	764.50
101955	04/27/17	01	HVAC INSPECT/PM	1151105240		05/23/17	816.50
						INVOICE TOTAL:	816.50
101956	04/27/17	01	HVAC INSPECT/PM	1122005360		05/23/17	502.00
						INVOICE TOTAL:	502.00
102547	05/12/17	01	REPLACE ZONE VALVE	1116105360		05/23/17	230.00
						INVOICE TOTAL:	230.00
						VENDOR TOTAL:	2,313.00
MIDST	MIDSTATE EQUIPMENT						
V73245	05/02/17	01	WEED EATERS,OIL,STRING	4800005810		05/23/17	735.60
						INVOICE TOTAL:	735.60
						VENDOR TOTAL:	735.60
MIDWED	MIDWEST DOOR COMPANY						
2410	05/12/17	01	NEW OPENER-1065 LOADING DOCK	1132105240		05/23/17	700.00
						INVOICE TOTAL:	700.00
						VENDOR TOTAL:	700.00
MIKER	MIKES REPAIR SERVICE						
47567	05/02/17	01	HYDR FILTER-TRACTOR #53	1132105351		05/23/17	11.00
						INVOICE TOTAL:	11.00
						VENDOR TOTAL:	11.00
NAPAE	ELKHORN NAPA AUTO PARTS						
75398	05/05/17	01	WATER PUMP-FORKLIFT	1132105351		05/23/17	150.41
						INVOICE TOTAL:	150.41

INVOICES DUE ON/BEFORE 05/23/2017

INVOICE # VENDOR #	INVOICE DATE	ITEM #	DESCRIPTION	ACCOUNT #	P.O. #	DUE DATE	ITEM AMT

NAPAE	ELKHORN NAPA AUTO PARTS						
75659	05/12/17	01	FORKLIFT BELT,BLUE DEF	1132105351		05/23/17	79.78
						INVOICE TOTAL:	79.78
75680	05/08/17	01	BATTERY-MOWER	1152005250		05/23/17	172.28
						INVOICE TOTAL:	172.28
						VENDOR TOTAL:	402.47
OFFIC	OFFICE DEPOT						
923569601001	04/26/17	01	LABELS	1114305310		05/23/17	14.51
		02	TONER,PENS,RIBBON	1115105310			175.27
		03	LEAD PENCIL	1114205310			3.38
						INVOICE TOTAL:	193.16
						VENDOR TOTAL:	193.16
OILEQ	OIL EQUIPMENT COMPANY						
241417-IN	04/28/17	01	FUEL SYSTEM FIX	1132105341		05/23/17	544.72
						INVOICE TOTAL:	544.72
						VENDOR TOTAL:	544.72
PAL	PAL STEEL COMPANY INC						
45920	05/02/17	01	HITCH-TRK #27	1132105351		05/23/17	21.10
						INVOICE TOTAL:	21.10
46975	04/28/17	01	STEEL-SNOW PLOW	1132125250		05/23/17	210.89
						INVOICE TOTAL:	210.89
						VENDOR TOTAL:	231.99
PECK	PECK & WEIS HEATING & COOLING						
897540	04/25/17	01	GAS PIPE LEAK FIX	1132105360		05/23/17	640.34
						INVOICE TOTAL:	640.34
						VENDOR TOTAL:	640.34

DATE: 05/12/17
TIME: 17:48:25
ID: AP441000.WOW

CITY OF LAKE GENEVA
DETAIL BOARD REPORT

INVOICES DUE ON/BEFORE 05/23/2017

INVOICE #	INVOICE DATE	ITEM #	DESCRIPTION	ACCOUNT #	P.O. #	DUE DATE	ITEM AMT

REINDER REINDERS INC							
984482	05/12/17	01	WEED KILLER-30 GAL	1152005399		05/23/17	1,450.00
						INVOICE TOTAL:	1,450.00
						VENDOR TOTAL:	1,450.00
RHYME RHYME BUSINESS PRODUCTS							
AR139801	04/27/17	01	SHARP-APR B&W	1116105531		05/23/17	120.07
		02	SHARP-APR COLOR	1116105531			103.96
						INVOICE TOTAL:	224.03
SO 050317	05/10/17	01	COURT COPY MACHINE-KYOCERA	5000005800		05/16/17	1,469.00
						INVOICE TOTAL:	1,469.00
						VENDOR TOTAL:	1,693.03
ROTE ROTE OIL COMPANY							
1711600013	04/26/17	01	206.6 DYED DIESEL	1132105341		05/23/17	382.00
						INVOICE TOTAL:	382.00
1711600014	04/26/17	01	351.9 CLEAR DIESEL	1132105341		05/23/17	759.75
						INVOICE TOTAL:	759.75
94170401	05/12/17	01	FUEL- 128 GAL	1132105341		05/23/17	285.97
						INVOICE TOTAL:	285.97
						VENDOR TOTAL:	1,427.72
RUNDL RUNDLE SPENCE							
S2564125.001	04/25/17	01	FLOAT-EXTRACTION PIT	1116105240		05/23/17	32.01
						INVOICE TOTAL:	32.01
						VENDOR TOTAL:	32.01
SUPPLY THE SUPPLY CORPORATION							
66289-IN	04/26/17	01	MARKING PAINT	1132105340		05/23/17	195.12
						INVOICE TOTAL:	195.12
						VENDOR TOTAL:	195.12

DATE: 05/12/17
TIME: 17:48:25
ID: AP441000.WOW

CITY OF LAKE GENEVA
DETAIL BOARD REPORT

INVOICES DUE ON/BEFORE 05/23/2017

INVOICE # VENDOR #	INVOICE DATE	ITEM #	DESCRIPTION	ACCOUNT #	P.O. #	DUE DATE	ITEM AMT

T0001431 NICOLE DJUKIC							
REFUND	05/09/17	01	DJUKIC-SEC DEP 5/6/17	4055102353		05/23/17	1,000.00
		02	DJUKIC-SETUP,SEC GRD 5/6/17	4055104674			-253.00
						INVOICE TOTAL:	747.00
						VENDOR TOTAL:	747.00
T0001432 VERONICA MORALES							
REFUND	05/03/17	01	MORALES-SEC DEP 4/29/17	4055102353		05/23/17	1,000.00
		02	MORALES-SETUP,SEC GRD 4/29/17	4055104674			-344.00
						INVOICE TOTAL:	656.00
						VENDOR TOTAL:	656.00
T0001433 JOHN STENSLAND							
REFUND	05/03/17	01	STENSLAND-SEC DEP 4/28/17	4055102353		05/23/17	1,000.00
		02	STENSLAN-SETUP,SEC GRD 4/28/17	4055104674			-682.00
						INVOICE TOTAL:	318.00
						VENDOR TOTAL:	318.00
T0001434 VILLAGE OF PEWAUKEE							
REFUND	05/12/17	01	SCHERRER-CASE#T721318-3	1112002428		05/23/17	398.80
						INVOICE TOTAL:	398.80
						VENDOR TOTAL:	398.80
T0001435 MIKE FRAZIER							
REFUND	05/12/17	01	FRAZIER-REFUND 2017 BOUY RENTA	4052104677		05/23/17	822.75
		02	FRAZIER-REFUND 2017 BOUY RENTA	1100002421			45.25
						INVOICE TOTAL:	868.00
						VENDOR TOTAL:	868.00
TSC TRACTOR SUPPLY CREDIT PLAN							
100471574	04/17/17	01	GRASS SEED	1132135430		05/23/17	279.95
						INVOICE TOTAL:	279.95
						VENDOR TOTAL:	279.95

DATE: 05/12/17
 TIME: 17:48:25
 ID: AP441000.WOW

CITY OF LAKE GENEVA
 DETAIL BOARD REPORT

INVOICES DUE ON/BEFORE 05/23/2017

INVOICE #	INVOICE DATE	ITEM #	DESCRIPTION	ACCOUNT #	P.O. #	DUE DATE	ITEM AMT
UNEMP UNEMPLOYMENT INSURANCE							
8346085	05/12/17	01	UE-STREETS	1110005154		05/23/17	470.10
						INVOICE TOTAL:	470.10
						VENDOR TOTAL:	470.10
UNITE UNITED LABORATORIES							
INV18640	05/12/17	01	URINAL TREATMENTS	4055205350		05/23/17	529.79
						INVOICE TOTAL:	529.79
						VENDOR TOTAL:	529.79
VANDE VANDEWALLE & ASSOCIATES INC							
201704039	05/12/17	01	PLANNING-APR	1100001391		05/23/17	10,220.41
						INVOICE TOTAL:	10,220.41
						VENDOR TOTAL:	10,220.41
WALCOC WALWORTH COUNTY CLERK							
ELECTION 4/17	05/04/17	01	BALLOTS, PROGRAMMING-4/4/17	1114305311		05/23/17	428.14
						INVOICE TOTAL:	428.14
						VENDOR TOTAL:	428.14
WALCOT WALWORTH COUNTY TREASURER							
INV 64-246 4/17	04/30/17	01	COURT FINES-APR 2017	1112002420		05/23/17	661.50
						INVOICE TOTAL:	661.50
						VENDOR TOTAL:	661.50
WEENE WE ENERGIES							
RE051218	05/15/17	01	7891-194-618 APR GAS BILL	1116105224		05/23/17	606.59
		03	7837-744-963 APR GAS BILL	1122005224			216.72
		04	0480-524-472 APR GAS BILL	4055105224			156.75
		06	0847-573-906 APR GAS BILL-ST#2	1122005224			94.75

DATE: 05/12/17
 TIME: 17:48:25
 ID: AP441000.WOW

CITY OF LAKE GENEVA
 DETAIL BOARD REPORT

INVOICES DUE ON/BEFORE 05/23/2017

INVOICE #	INVOICE DATE	ITEM #	DESCRIPTION	ACCOUNT #	P.O. #	DUE DATE	ITEM AMT

WEENE WE ENERGIES							
RE051218	05/15/17	07	5288-664-956 APR GAS BILL	1151105224		05/23/17	246.13
		08	8052-439-940 APR GAS BILL-1055	1132105224			72.96
		09	8017-524-022 APR GAS BILL-1065	1132105224			61.14
		10	6602-046-262 APR GAS BILL-1070	1132105224			182.21
		11	7283-171-261 APR GAS BILL	1152015224			67.92
		12	1885-876-489 APR GAS BILL	4800005224			54.86
		13	3843-358-997 APR GAS BILL	9900005222			84.00
		14	5604-510-433 APR GAS BILL	9900005222			204.00
						INVOICE TOTAL:	2,048.03
						VENDOR TOTAL:	2,048.03
WESTS WESTSIDE LANDSCAPE PRODUCTS							
42817	04/25/17	01	11 YDS TOPSOIL	4800005360		05/23/17	363.00
						INVOICE TOTAL:	363.00
						VENDOR TOTAL:	363.00
WIAGR WI DEPT OF AG, TRADE &							
115-0000004957	04/28/17	01	YRLY WEIGHTS/MEASURES	1124005218		05/23/17	4,800.00
						INVOICE TOTAL:	4,800.00
						VENDOR TOTAL:	4,800.00
WISC STATE OF WISCONSIN							
INV 64-246 4/17	04/30/17	01	COURT FINES-APR 2017	1112002424		05/23/17	2,109.56
						INVOICE TOTAL:	2,109.56
						VENDOR TOTAL:	2,109.56
WOODH WOODHILL FARMS NURSERY							
41832	04/27/17	01	TREE-ARBOR DAY	1132135346		05/23/17	800.00
						INVOICE TOTAL:	800.00
						VENDOR TOTAL:	800.00

DATE: 05/12/17
TIME: 17:48:25
ID: AP441000.WOW

CITY OF LAKE GENEVA
DETAIL BOARD REPORT

INVOICES DUE ON/BEFORE 05/23/2017

INVOICE #	INVOICE DATE	ITEM #	DESCRIPTION	ACCOUNT #	P.O. #	DUE DATE	ITEM AMT

YARDD	CHRIS RIZZO						
1702	12/20/16	01	SNOW VIOLATIONS	1132125344		05/23/17	440.00
						INVOICE TOTAL:	440.00
						VENDOR TOTAL:	440.00
ZSCAPE	Z-SCAPE, LLC						
5666	05/01/17	01	POND MAINT-APR	1152005362		05/23/17	300.00
		02	LOW VOLT TRANSFORMER	1152015952			200.00
						INVOICE TOTAL:	500.00
						VENDOR TOTAL:	500.00
						TOTAL ALL INVOICES:	120,086.05