



# City of Appleton

100 North Appleton Street  
Appleton, WI 54911-4799  
www.appleton.org

## Meeting Agenda - Final-revised Common Council

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Wednesday, November 18, 2020

7:00 PM

Council Chambers

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- A. CALL TO ORDER
- B. INVOCATION
- C. PLEDGE OF ALLEGIANCE TO THE FLAG
- D. ROLL CALL OF ALDERPERSONS
- E. ROLL CALL OF OFFICERS AND DEPARTMENT HEADS
- F. APPROVAL OF PREVIOUS COUNCIL MEETING MINUTES

[20-1523](#) Common Council Meeting Minutes of November 4, 2020 & November 11, 2020

**Attachments:** [CC Minutes 11-4-2020.pdf](#)  
[CC Minutes 11-11-2020.pdf](#)

- G. BUSINESS PRESENTED BY THE MAYOR

[20-1525](#) Proclamations:  
- Native American Heritage Month  
- Small Business Week

**Attachments:** [Native American Heritage Month Proclamation.pdf](#)  
[Small Business Week Proclamation.pdf](#)

[20-1524](#) COVID-19 Update

**Attachments:** [COVID -19 Cases 11-18-20.pdf](#)

- H. PUBLIC PARTICIPATION
- I. PUBLIC HEARINGS
- J. SPECIAL RESOLUTIONS

K. ESTABLISH ORDER OF THE DAY

L. COMMITTEE REPORTS

**1. MINUTES OF THE MUNICIPAL SERVICES COMMITTEE**

[20-1472](#) Request from Tilson Technology Management for a permanent street occupancy permit to install a 5.5' X 3' X 5' utility cabinet for the TDS 5G Project at the Drew Street/Roosevelt Street intersection. This location is number 1 of 13 total nodes.

**Attachments:** [TDS 5G-Drew St-Roosevelt St.pdf](#)

**Legislative History**

11/9/20 Municipal Services recommended for approval  
Committee

[20-1473](#) Request from Tilson Technology Management for a permanent street occupancy permit to install a 5.5' X 3' X 5' utility cabinet for the TDS 5G Project at the Oneida Street/Northland Avenue intersection. This location is number 2 of 13 total Nodes.

**Attachments:** [TDS 5G-Oneida St-Northland Ave.pdf](#)

**Legislative History**

11/9/20 Municipal Services recommended for approval  
Committee

[20-1474](#) Request from Tilson Technology Management for a permanent street occupancy permit to install a 5.5' X 3' X 5' utility cabinet for the TDS 5G Project at the Kamps Street/Linwood Avenue intersection. This location is number 3 of 13 total Nodes.

**Attachments:** [TDS 5G-Kamps St-Linwood Ave.pdf](#)

**Legislative History**

11/9/20 Municipal Services recommended for approval  
Committee

[20-1499](#) Approve recommendation to modify location for Wisconsin Avenue Enhanced Pedestrian Crossing from Story Street to Bennett Street.

**Attachments:** [Wisconsin Av 2021 Pedestrian Crossing.pdf](#)

**Legislative History**

11/9/20 Municipal Services recommended for approval  
Committee

**2. MINUTES OF THE SAFETY AND LICENSING COMMITTEE**

- [20-1366](#) "Class B" Liquor and Class "B" Beer License application for Poonsiri Parncham d/b/a Jai Sung Mah, located at 122 W Wisconsin Ave, contingent upon approvals from all departments.  
*Attachments:* [Jai Sung Mah - Poonsiri Parncham.pdf](#)
- [20-1510](#) Class "B" Beer and "Class B" Liquor License application for Lou's Brew Cafe & Lounge Inc d/b/a Lou's Brew Cafe, Laura Loukidis, Agent, located at 233 E College Ave, contingent upon approval from all departments.  
*Attachments:* [Lou's Brew Cafe.pdf](#)
- [20-1513](#) "Class B" Liquor and Class "B" Beer License application for Driftwood Special Servicing LLC d/b/a Appleton Red Lion Paper Valley - Banquet Services, Linda M Garvey, Agent, located at 333 W. College Ave, contingent upon approval from all departments.  
*Attachments:* [Red Lion - Banquet Services.pdf](#)
- [20-1514](#) "Class B" Liquor and Class "B" Beer License application for Driftwood Special Servicing LLC d/b/a Appleton Red Lion Paper Valley - Lombardi Bar, Linda M Garvey, Agent, located at 333 W. College Ave, contingent upon approval from all departments.  
*Attachments:* [Red Lion - Lombardi Bar.pdf](#)
- [20-1515](#) "Class B" Liquor and Class "B" Beer License application for Driftwood Special Servicing LLC d/b/a Appleton Red Lion Paper Valley - Blaze, Linda M Garvey, Agent, located at 333 W. College Ave, contingent upon approval from all departments.  
*Attachments:* [Red Lion- Blaze.pdf](#)
- [20-1516](#) "Class B" Liquor and Class "B" Beer License application for Driftwood Special Servicing LLC d/b/a Appleton Red Lion Paper Valley - Clubhouse, Linda M Garvey, Agent, located at 333 W. College Ave, contingent upon approval from all departments.  
*Attachments:* [Red Lion - Clubhouse.pdf](#)
- [20-1517](#) "Class B" Liquor and Class "B" Beer License application for Driftwood Special Servicing LLC d/b/a Fox Cities Exhibition Center, Linda M Garvey, Agent, located at 355 W. Lawrence St, contingent upon approval from all departments.  
*Attachments:* [Fox Cities Exhibition Center.pdf](#)

[20-1518](#) Class "A" Beer and "Class A" Liquor License Change of Agent application for Ultimate Mart LLC d/b/a Pick 'N Save #8187, Ruth K Ackerman, New Agent, located at 511 W Calumet St, contingent upon approval from APD.

**Attachments:** [Ruth K Ackerman S&L.pdf](#)

**3. MINUTES OF THE CITY PLAN COMMISSION**

**4. MINUTES OF THE PARKS AND RECREATION COMMITTEE**

[20-1469](#) Action Item-Request Approval of the Updated Miracle League Field-Rental and Fee Schedule Policy

**Attachments:** [Miracle League Field Policy - Clean.doc](#)

[Miracle League Field Policy - Redlined.pdf](#)

**Legislative History**

11/9/20 Parks and Recreation Committee recommended for approval  
*Approved with change made to date on Fee Schedule to reflect effective date of January 1, 2021*

[20-1477](#) Action Item-Request Approval of Reid Golf Course 2021 Rates Policy

**Attachments:** [2021 Golf Rates Memo.doc](#)

[Reid Rate Policy 2021 Final.docx](#)

[Reid Rate Policy 2021 redline.pdf](#)

**Legislative History**

11/9/20 Parks and Recreation Committee recommended for approval  
*Meeting went into Recess at 6:34 p.m. due to technical issues*  
*Meeting Reconvened at 6:35 p.m.*

[20-1493](#) Action Item-Request to Install Oversized Wooden Letters Spelling "HOPE" within Houdini Plaza

**Attachments:** [Houdini Plaza-HOPE Sign.pdf](#)

**Legislative History**

11/9/20 Parks and Recreation Committee recommended for approval

**5. MINUTES OF THE FINANCE COMMITTEE**

[20-1496](#) Resolution authorizing staff to finalize land transaction terms with the City of Menasha

**Attachments:** [Finance Utilities - CRB Memo - 11-2020 - Authorizing Resolution.pdf](#)  
[Authorizing Resolution \(with Menasha regarding Water Plant land needs\) - 11-5](#)

**Legislative History**

11/9/20 Finance Committee recommended for approval

**6. MINUTES OF THE COMMUNITY AND ECONOMIC DEVELOPMENT COMMITTEE**

[20-1461](#) Request to approve 2021-2022PY Community Development Block Grant (CDBG) Community Partner Allocation Recommendations

**Attachments:** [Alloc Recs Memo to CEDC 11-11-20.pdf](#)  
[2021 CDBG Advisory Board Membership.pdf](#)  
[Approved CDBG Policy 10-14-2020.pdf](#)  
[2021 CDBG Community Partner Award Recommendations.pdf](#)  
[2021 CDBG Simple Summary Award Recommendations.pdf](#)

**Legislative History**

11/11/20 Community & Economic Development Committee recommended for approval

[20-1511](#) Request to approve a six (6) month extension to the Planning Option Agreement with Merge, LLC (d/b/a Merge Urban Development Group) for a potential mixed-use development located on the former Blue Ramp and Conway Hotel sites

**Attachments:** [Merge Option Extension Memo 11-11-20.pdf](#)  
[Term Extension Planning Option Agree MERGE 11-09-2020 Draft.pdf](#)  
[Merge Option Memo to CEDC 1-29-20.pdf](#)  
[Planning Option Agreement Merge LLC-City of Appleton\\_v3\\_Signed.pdf](#)  
[Map Blue Ramp+Conway Hotel.pdf](#)  
[Letter of Intent Merge 11-29-19.pdf](#)  
[Merge Projects + References.pdf](#)

**Legislative History**

11/11/20 Community & Economic Development Committee recommended for approval

**7. MINUTES OF THE UTILITIES COMMITTEE**

[20-1438](#) Revisions to: Chapter 20, Section 20-203(2) and Chapter 20, Section 20-69, Definitions, Pollutant

**Attachments:** [Amend Sec 20-69 .pdf](#)  
[Amend Sec 20-203\(2\).pdf](#)  
[Amend Sec 20-204\(b\).pdf](#)

**Legislative History**

11/4/20 Utilities Committee recommended for approval

[20-1440](#) Approve 2019 AWWTP Improvements Project Engineering Services Amendment #1 increasing the McMahon total contract amount by \$49,630 from \$169,886 to \$219,516.

**Attachments:** [2019 AWWTP Improvements Project McMahon Contract Amendment No1.pdf](#)

**Legislative History**

11/4/20 Utilities Committee recommended for approval

[20-1476](#) Approval to Single-Source and Award 2020H Stormwater Consulting Services Contract for Edgewood Drive (CTH JJ) Drainage Study to raSmith, Inc. in an amount not to exceed \$47,500.

**Attachments:** [2020H Edgewood Drive CTH JJ Drainage Study Approval Memo raSmith final 1](#)

**Legislative History**

11/10/20 Utilities Committee recommended for approval

**8. MINUTES OF THE HUMAN RESOURCES & INFORMATION TECHNOLOGY COMMITTEE**

**9. MINUTES OF THE FOX CITIES TRANSIT COMMISSION**

[20-1482](#) Approve Valley Transit's Public Transportation Agency Safety Plan (PTASP)

**Attachments:** [Valley Transit PTASP.pdf](#)

**Legislative History**

11/10/20 Fox Cities Transit Commission recommended for approval

**10. MINUTES OF THE BOARD OF HEALTH**

**M. CONSOLIDATED ACTION ITEMS**

**N. ITEMS HELD**

O. ORDINANCES

[20-1519](#) Ordinances 128-20 to 130-20

*Attachments:* [Ordinances 128-20 to 130-20.pdf](#)

P. LICENSE APPLICATIONS AND COMMUNICATIONS REFERRED TO COMMITTEES OF JURISDICTION

Q. RESOLUTIONS SUBMITTED BY ALDERPERSONS REFERRED TO COMMITTEES OF JURISDICTION

R. OTHER COUNCIL BUSINESS

S. ADJOURN

Kami Lynch, City Clerk

*Reasonable accommodations for persons with disabilities will be made upon request and if feasible.*



# City of Appleton

100 North Appleton Street  
Appleton, WI 54911-4799  
www.appleton.org

## Meeting Minutes - Final Common Council

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Wednesday, November 4, 2020

7:00 PM

Council Chambers

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A. CALL TO ORDER

*The meeting was called to order by Mayor Woodford at 7:00 p.m.*

B. INVOCATION

*The Invocation was offered by Alderperson Martin.*

C. PLEDGE OF ALLEGIANCE TO THE FLAG

D. ROLL CALL OF ALDERPERSONS

**Present:** 16 - Alderperson William Siebers, Alderperson Vered Meltzer, Alderperson Brad Firkus, Alderperson Joe Martin, Alderperson Katie Van Zeeland, Alderperson Denise Fenton, Alderperson Maiyoua Thao, Alderperson Matthew Reed, Alderperson Alex Schultz, Alderperson Mike Smith, Alderperson Patti Coenen, Alderperson Nate Wolff, Alderperson Kyle Lobner, Alderperson Joe Prohaska, Alderperson Corey Otis and Mayor Jake Woodford

E. ROLL CALL OF OFFICERS AND DEPARTMENT HEADS

*All Departments were represented.*

F. APPROVAL OF PREVIOUS COUNCIL MEETING MINUTES

[20-1457](#)

Common Council Meeting Minutes of October 21, 2020

**Attachments:** [CC Minutes 10-21-2020.pdf](#)

**Alderperson Siebers moved, seconded by Alderperson Otis, that the Minutes be approved. Roll Call. Motion carried by the following vote:**

**Aye:** 15 - Alderperson William Siebers, Alderperson Vered Meltzer, Alderperson Brad Firkus, Alderperson Joe Martin, Alderperson Katie Van Zeeland, Alderperson Denise Fenton, Alderperson Maiyoua Thao, Alderperson Matthew Reed, Alderperson Alex Schultz, Alderperson Mike Smith, Alderperson Patti Coenen, Alderperson Nate Wolff, Alderperson Kyle Lobner, Alderperson Joe Prohaska and Alderperson Corey Otis

**Abstained:** 1 - Mayor Jake Woodford



G. BUSINESS PRESENTED BY THE MAYOR

[20-1467](#)

Proclamations:

- Appleton High Schools DECA Week
- National Runaway Homeless Youth Prevention Month
- Home Care, Palliative Care, & Hospice Services Month

**Attachments:**    [Proclamation- Appleton High Schools DECA Week.pdf](#)  
[Proclamation National Runaway ' Homeless Youth Prevention Month.pdf](#)  
[Proclamation Home Care Palliative Care and Hospice Services Month.pdf](#)

**The Proclamations were presented**

[20-1459](#)

COVID-19 Update

**Attachments:**    [COVID -19 Cases 11-2-20.pdf](#)

**This Item was presented**

H. PUBLIC PARTICIPATION

*There was no one signed up to speak during Public Participation*

I. PUBLIC HEARINGS

[20-1370](#)

Public Hearing for Rezoning #8-20 6th Addition to Emerald Valley

**Attachments:**    [ClassIIPublicHearingNotice\\_6thAddEmeraldValley\\_Rezoning#8-20.pdf](#)

*The public hearing was held. No one spoke during the hearing.*

[20-1371](#)

Public Hearing for Rezoning #9-20 7th Addition to Emerald Valley

**Attachments:**    [ClassIIPublicHearingNotice\\_7thAddEmeraldValley\\_Rezoning#9-20.pdf](#)

*The public hearing was held. No one spoke during the hearing.*

J. SPECIAL RESOLUTIONS

K. ESTABLISH ORDER OF THE DAY

[20-1426](#)

**Meade Street**, from Pacific Street to Commercial Street, be reconstructed with concrete pavement and curb and gutter. The dimensions of the Meade Street reconstruction project are as follows:

Pacific St - Hancock St: New concrete pavement to be constructed to a width of 33' from back of curb to back of curb, which is the same width as the existing street within this portion of the project. On-street parking would be restricted along the east side of Meade Street within this portion of the project.

Hancock St - Commercial St: New concrete pavement to be constructed to a width of 43' from back of curb to back of curb, which is the same width as the existing street within this portion of the project. Existing on-street parking to remain unchanged within this portion of the project.

**Aldersperson Firkus moved, seconded by Aldersperson Otis, that the Street Reconstruction Item be amended to add:**

**'with parking allowed on the West side" after along the east side of Meade Street within this portion of the project (end of the first paragraph).**

**Roll Call. Motion carried by the following vote:**

**Aye:** 15 - Aldersperson William Siebers, Aldersperson Vered Meltzer, Aldersperson Brad Firkus, Aldersperson Joe Martin, Aldersperson Katie Van Zeeland, Aldersperson Denise Fenton, Aldersperson Maiyoua Thao, Aldersperson Matthew Reed, Aldersperson Alex Schultz, Aldersperson Mike Smith, Aldersperson Patti Coenen, Aldersperson Nate Wolff, Aldersperson Kyle Lobner, Aldersperson Joe Prohaska and Aldersperson Corey Otis

**Abstained:** 1 - Mayor Jake Woodford

**Aldersperson Siebers moved, seconded by Aldersperson Otis, that the Item be approved as amended. Roll Call. Motion carried by the following vote:**

**Aye:** 15 - Aldersperson William Siebers, Aldersperson Vered Meltzer, Aldersperson Brad Firkus, Aldersperson Joe Martin, Aldersperson Katie Van Zeeland, Aldersperson Denise Fenton, Aldersperson Maiyoua Thao, Aldersperson Matthew Reed, Aldersperson Alex Schultz, Aldersperson Mike Smith, Aldersperson Patti Coenen, Aldersperson Nate Wolff, Aldersperson Kyle Lobner, Aldersperson Joe Prohaska and Aldersperson Corey Otis

**Abstained:** 1 - Mayor Jake Woodford

## L. COMMITTEE REPORTS

### **Balance of the action items on the agenda.**

**Aldersperson Prohaska moved, Aldersperson Siebers seconded, to approve the balance of the agenda. The motion carried by the following vote:**

**Aye:** 15 - Alderperson William Siebers, Alderperson Vered Meltzer, Alderperson Brad Firkus, Alderperson Joe Martin, Alderperson Katie Van Zeeland, Alderperson Denise Fenton, Alderperson Maiyoua Thao, Alderperson Matthew Reed, Alderperson Alex Schultz, Alderperson Mike Smith, Alderperson Patti Coenen, Alderperson Nate Wolff, Alderperson Kyle Lobner, Alderperson Joe Prohaska and Alderperson Corey Otis

**Abstained:** 1 - Mayor Jake Woodford

## 1. MINUTES OF THE MUNICIPAL SERVICES COMMITTEE

### [20-1430](#)

**Kimball Alley**, from Mason Street to Story Street, be reconstructed with concrete pavement. The dimensions of the Kimball Alley reconstruction project are as follows:

*Mason St - Spruce St:* New concrete pavement to be constructed to a width of 16' from edge of pavement to edge of pavement, which is the same width as the existing alley within this portion of the project.

*Spruce St - Summit St:* New concrete pavement to be constructed to a width of 14' from edge of pavement to edge of pavement, which is the same width as the existing alley within this portion of the project.

*Summit St - Story St:* New concrete pavement to be constructed to a width of 20' from edge of pavement to edge of pavement, which is the same width as the existing alley within this portion of the project.

**This Report Action Item was approved.**

### [20-1431](#)

**Kimball Alley**, from Walnut Street to Lawrence Street, be reconstructed with concrete pavement to a width of 20' from edge of pavement to edge of pavement, which is the same width as the existing alley.

**This Report Action Item was approved.**

## 2. MINUTES OF THE SAFETY AND LICENSING COMMITTEE

[20-1367](#)

"Class A" Liquor and Class "A" Beer License application for Aldi, Inc d/b/a Aldi #86, Julie A Meier, Agent, located at 2702 N Richmond St, contingent upon approval from all departments.

**Attachments:** [Aldi #86.pdf](#)

**This Report Action Item was approved.**

[20-1441](#)

Request to approve the grant from the Wisconsin Elections Commission (WEC) in the amount of \$44,974 for additional election costs incurred due to the COVID-19 pandemic

**Attachments:** [Clerk Appleton 45201 \\$44974.40 WEC CARES Subgrant Award Letter.pdf](#)

**This Report Action Item was approved.**

[20-1442](#)

Request to approve the grant from the Center for Tech and Civic Life in the amount of \$18,330 for expenses necessary to plan and administer safe and secure elections in the City in 2020

**Attachments:** [CTCL Grant Appleton Wisconsin agreement and SVP.pdf](#)

**This Report Action Item was approved.**

### 3. MINUTES OF THE CITY PLAN COMMISSION

[20-1322](#)

Request to approve Rezoning #8-20 to rezone the area generally located along the east and west sides of Providence Avenue for the 6th Addition to Emerald Valley (part of Tax Id #31-1-7600-00), as shown on the attached maps, from AG Agricultural District to R-1B Single-Family District

**Attachments:** [StaffReport\\_Rezoning\\_6thAddEmeraldValley\\_For10-13-20.pdf](#)

**This Report Action Item was approved.**

[20-1324](#)

Request to approve Rezoning #9-20 to rezone the area generally located west of Providence Avenue for the 7th Addition to Emerald Valley (part of Tax Id #31-1-7600-00), as shown on the attached maps, from AG Agricultural District to R1-B Single-family District

**Attachments:** [StaffReport\\_Rezoning\\_7thAddEmeraldValley\\_For10-13-20.pdf](#)

**This Report Action Item was approved.**

[20-1379](#)

Request to approve the Sixth and Seventh Additions to Emerald Valley Preliminary Plat as shown on the attached maps and subject to the conditions in the attached staff report

**Attachments:** [StaffReport\\_PreliminaryPlat\\_6-7thAddEmeraldValley\\_For10-27-20.pdf](#)

This Report Action Item was approved.

[20-1380](#)

Request to approve the Trail View Estates South Final Plat as shown on the attached maps and subject to the conditions in the attached staff report

**Attachments:** [StaffReport\\_TrailViewEstatesSouth\\_FinalPlat\\_For10-27-20.pdf](#)

This Report Action Item was approved.

**4. MINUTES OF THE PARKS AND RECREATION COMMITTEE**

**5. MINUTES OF THE FINANCE COMMITTEE**

[20-1377](#)

Request to award the City of Appleton Wastewater D-Building HVAC Upgrades Phase 1 Project contract to BP Mechanical, Inc in the amount of \$93,976 with a contingency of 10% for a project total not to exceed \$103,374

**Attachments:** [2020 AWWTP D-Building HVAC Upgrades.pdf](#)

This Report Action Item was approved.

[20-1428](#)

Request to approve the following 2020 Budget amendment:

**General Fund - City Clerk**

State Grants	+\$44,974
Postage	+\$44,974

to record a grant from the WI Elections Commission for additional election costs incurred due to the COVID-19 pandemic (2/3 vote of Council required)

**Attachments:** [Clerk Appleton 45201 \\$44974.40 WEC CARES Subgrant Award Letter.pdf](#)

This Report Action Item was approved.

[20-1429](#)

Request to approve the following 2020 Budget amendment:

**General Fund - City Clerk**

Grants	+\$18,330
Election Supplies	+\$18,330

to record a grant from the Center for Tech and Civic Life for additional election costs necessary to provide safe and secure elections (2/3 vote of Council required)

**Attachments:**     [CTCL Grant Appleton Wisconsin agreement and SVP.pdf](#)

**This Report Action Item was approved.**

[20-1432](#)

Request to approve Change Order No 1 for contract 36-20 for 2019 AWWTP Electrical Distribution Upgrades Phase 2 project for refeeding and removal of the E-Building's transformers and motor control centers in the amount of \$95,800 resulting in a decrease of the contingency from \$230,590 to \$134,790. No change to the overall contract amount

**Attachments:**     [2020 AWWTP Electrical Distribution Upgrades Phase 2 Change Order #1.pdf](#)

**This Report Action Item was approved.**

[20-1433](#)

Request to award the Engineering Contract for the 2020 AWWTP V2-F2 Buildings Road Replacement project to McMahon Associates in the amount of \$42,790 plus a 5% contingency for a total not to exceed a project engineering cost of \$44,930

**Attachments:**     [2020 Wastewater Hardscapes Design.pdf](#)

**This Report Action Item was approved.**

- 6.     **MINUTES OF THE COMMUNITY AND ECONOMIC DEVELOPMENT COMMITTEE**
- 7.     **MINUTES OF THE UTILITIES COMMITTEE**
- 8.     **MINUTES OF THE HUMAN RESOURCES & INFORMATION TECHNOLOGY COMMITTEE**
- 9.     **MINUTES OF THE FOX CITIES TRANSIT COMMISSION**

**10. MINUTES OF THE BOARD OF HEALTH**

M. CONSOLIDATED ACTION ITEMS

N. ITEMS HELD

O. ORDINANCES

[20-1454](#) Ordinances 126-20 and 127-20

**Attachments:** [Ordinances 126-20 and 127-20.pdf](#)

**Aldersperson Fenton moved, seconded by Aldersperson Otis, that the Ordinances be approved. Roll Call. Motion carried by the following vote:**

**Aye:** 15 - Aldersperson William Siebers, Aldersperson Vered Meltzer, Aldersperson Brad Firkus, Aldersperson Joe Martin, Aldersperson Katie Van Zeeland, Aldersperson Denise Fenton, Aldersperson Maiyoua Thao, Aldersperson Matthew Reed, Aldersperson Alex Schultz, Aldersperson Mike Smith, Aldersperson Patti Coenen, Aldersperson Nate Wolff, Aldersperson Kyle Lobner, Aldersperson Joe Prohaska and Aldersperson Corey Otis

**Abstained:** 1 - Mayor Jake Woodford

P. LICENSE APPLICATIONS AND COMMUNICATIONS REFERRED TO COMMITTEES OF JURISDICTION

Q. RESOLUTIONS SUBMITTED BY ALDERPERSONS REFERRED TO COMMITTEES OF JURISDICTION

[20-1458](#) #16-R-20 Ellen Kort Peace Park Subcommittee Resolution

**Attachments:** [#16-R-20 Ellen Kort Peace Park SubCommittee.pdf](#)  
[SIGNED Memo to Mayor \(Schultz Resolution\).pdf.pdf](#)

**This Report Action Item was referred to the Parks and Recreation Committee**

R. OTHER COUNCIL BUSINESS

S. ADJOURN

**Aldersperson Otis moved, seconded by Aldersperson Fenton, that the meeting be adjourned at 7:18 p.m. Roll Call. Motion carried by the following vote:**

**Aye:** 15 - Alderperson William Siebers, Alderperson Vered Meltzer, Alderperson Brad Firkus, Alderperson Joe Martin, Alderperson Katie Van Zeeland, Alderperson Denise Fenton, Alderperson Maiyoua Thao, Alderperson Matthew Reed, Alderperson Alex Schultz, Alderperson Mike Smith, Alderperson Patti Coenen, Alderperson Nate Wolff, Alderperson Kyle Lobner, Alderperson Joe Prohaska and Alderperson Corey Otis

**Abstained:** 1 - Mayor Jake Woodford

Kami Lynch, City Clerk





# City of Appleton

100 North Appleton Street  
Appleton, WI 54911-4799  
www.appleton.org

## Meeting Minutes - Final Common Council

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Wednesday, November 11, 2020

6:00 PM

Council Chambers

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### Special Session- Adoption of the 2021 Executive Budget

A. CALL TO ORDER

*The meeting was called to order by Mayor Woodford at 6:00 p.m.*

B. PLEDGE OF ALLEGIANCE TO THE FLAG

C. ROLL CALL OF ALDERPERSONS

**Present:** 16 - Alderperson William Siebers, Alderperson Vered Meltzer, Alderperson Brad Firkus, Alderperson Joe Martin, Alderperson Katie Van Zeeland, Alderperson Denise Fenton, Alderperson Maiyoua Thao, Alderperson Matthew Reed, Alderperson Alex Schultz, Alderperson Mike Smith, Alderperson Patti Coenen, Alderperson Nate Wolff, Alderperson Kyle Lobner, Alderperson Joe Prohaska, Alderperson Corey Otis and Mayor Jake Woodford

D. ROLL CALL OF OFFICERS AND DEPARTMENT HEADS

*All Departments were represented*

E. BUSINESS PRESENTED BY THE MAYOR

F. PUBLIC PARTICIPATION

*Rebecca Kellner, 3226 S Bob O Link Ln*

G. ESTABLISH ORDER OF THE DAY

[20-1502](#)

Approve the Finance Committee Budget Workshop ("Budget Saturday") Minutes for Saturday, October 31, 2020

**Attachments:** [FC Budget Saturday Meeting Minutes 10-31-20.pdf](#)

*The minutes were referred to the Finance Committee (Committee of the Whole) by Alderperson Lobner.*

[20-1503](#)

Suspend the Council Rules to go into the Committee of the Whole to take up the Finance Committee Budget Workshop Minutes

**Attachments:** [2021 Budget Adoption Amendments List.pdf](#)

**Aldersperson Lobner moved, seconded by Aldersperson Otis, that the Council convene into the Committee of the Whole acting as the Finance Committee. Roll Call. Motion carried by the following vote:**

**Aye:** 15 - Aldersperson William Siebers, Aldersperson Vered Meltzer, Aldersperson Brad Firkus, Aldersperson Joe Martin, Aldersperson Katie Van Zeeland, Aldersperson Denise Fenton, Aldersperson Maiyoua Thao, Aldersperson Matthew Reed, Aldersperson Alex Schultz, Aldersperson Mike Smith, Aldersperson Patti Coenen, Aldersperson Nate Wolff, Aldersperson Kyle Lobner, Aldersperson Joe Prohaska and Aldersperson Corey Otis

**Abstained:** 1 - Mayor Jake Woodford

H. COMMITTEE REPORTS

**MINUTES OF THE FINANCE COMMITTEE**

[20-1381](#)

Request to approve the Information Technology Budget (pg 84-92)

**This Report Action Item was approved.**

[20-1382](#)

Request to approve the Information Technology Capital Projects Fund Budget (pg 94-96)

**This Report Action Item was approved**

[20-1383](#)

Request to approve the Facilities and Construction Management Budget (pg 210-218)

**This Report Action Item was approved**

[20-1384](#)

Request to approve the Facilities Capital Projects Fund Budget (pg 220-222)

**This Report Action Item was approved**

[20-1385](#)

Request to approve the Parks and Recreation Department Budget (pg 228-235)

**This Report Action Item was approved**

[20-1386](#) Request to approve the Parks and Recreation Trust Funds Budget (pg 237-242)

**This Report Action Item was approved**

[20-1387](#) Request to approve the Reid Golf Course Budget (pg 244-252)

**This Report Action Item was approved**

[20-1388](#) Request to approve the Valley Transit Budget (pg 276-292)

**This Report Action Item was approved**

[20-1389](#) Request to approve the Health Department Budget (pg 378-388)

**This Report Action Item was approved**

[20-1390](#) Request to approve the Health Grants Special Revenue Funds Budget (pg 390-405)

**This Report Action Item was approved**

[20-1391](#) Request to approve the Human Resources Budget (pg 120-128)

**This Report Action Item was approved**

[20-1392](#) Request to approve the Risk Management Budget (pg 130-137)

**This Report Action Item was approved**

[20-1393](#) Request to approve the Water Utility Budget (pg 472-494)

**This Report Action Item was approved**

[20-1394](#) Request to approve the Wastewater Utility Budget (pg 496-518)

**This Report Action Item was approved**

[20-1395](#) Request to approve the Stormwater Utility Budget (pg 520-534)

**This Report Action Item was approved**

[20-1396](#) Request to approve the Parking Utility Budget (pg 348-360)

**This Report Action Item was approved**

[20-1397](#) Request to approve the Public Works Department Budget (pg 294-319)

**This Report Action Item was approved**

[20-1398](#) Request to approve the Sanitation Special Revenue Fund Budget (pg 322-334)

**This Report Action Item was approved**

[20-1399](#) Request to approve the Wheel Tax Special Revenue Fund Budget (pg 336-338)

**This Report Action Item was approved**

[20-1400](#) Request to approve the Subdivision Capital Projects Fund Budget (pg 340-342)

**This Report Action Item was approved**

[20-1401](#) Request to approve the Public Works Capital Projects Fund Budget (pg 344-346)

**This Report Action Item was approved**

[20-1402](#) Request to approve the Central Equipment Agency Budget (pg 362-371)

**This Report Action Item was approved**

[20-1403](#) Request to approve the CEA Replacement Capital Projects Fund Budget (pg 374-376)

**This Report Action Item was approved**

[20-1404](#) Request to approve the Fire Department Budget (pg 432-449)

**This Report Action Item was approved**

[20-1405](#) Request to approve the Hazardous Materials Type II Special Revenue Fund Budget (pg 452-454)

**This Report Action Item was approved**

[20-1406](#) Request to approve the Police Department Budget (pg 408-421)

**This Report Action Item was approved**

[20-1407](#) Request to approve the Police Grants Special Revenue Fund Budget (pg 424-426)

**This Report Action Item was approved**

[20-1408](#) Request to approve the Public Safety Capital Projects Fund Budget (pg 428-430)

**This Report Action Item was approved**

[20-1409](#) Request to approve the Community and Economic Development Budget (pg 140-152)

**This Report Action Item was approved**

[20-1410](#) Request to approve the Housing and Community Development Grants Special Revenue Fund Budget (pg 154-167)

**This Report Action Item was approved**

[20-1411](#) Request to approve the Industrial Park Land Fund Budget (pg 170-172)

**This Report Action Item was approved**

[20-1412](#) Request to approve the Community Development Capital Projects Budget (pg 174-176)

**This Report Action Item was approved**

[20-1413](#) Request to approve the TIF Districts Budget (pg 178-208)

**This Report Action Item was approved**

[20-1414](#)

Request to approve the Library Budget (pg 254-270)

**This Report Action Item was approved**

[20-1415](#)

Request to approve the Library Grants Special Revenue Budget (pg 272-274)

**This Report Action Item was approved**

[20-1416](#)

Request to approve the Legal Services Department Budget (pg 98-112)

**This Report Action Item was approved**

[20-1417](#)

Request to approve the Tuchscherer Disability Fund Budget (pg 113)

**This Report Action Item was approved**

[20-1418](#)

Request to approve the Mayor Budget (pg 46-54)

**This Report Action Item was approved**

[20-1419](#)

Request to approve the Council Budget (pg 56-58)

**This Report Action Item was approved**

[20-1420](#)

Request to approve the Debt Service Budget (pg 455-461)

**This Report Action Item was approved**

[20-1421](#)

Request to approve the Finance Department Budget (pg 60-68)

**This Report Action Item was approved**

[20-1422](#)

Request to approve the Unclassified Budget (pg 69-74)

**This Report Action Item was approved**

[20-1423](#)

Request to approve the Room Tax Special Revenue Fund Budget (pg 76-78)

**This Report Action Item was approved**

[20-1424](#) Request to approve the Other Post Employment Benefits Budget (pg 80-82)

This Report Action Item was approved

## PROPOSED AMENDMENTS (New)

[20-1507](#) Reinstate \$100,000 advance from general fund to help fund parking lot paving project  
Page 250, Reid Golf Course  
(Martin & Otis)

**Alderson Otis moved, seconded by Alderson Martin, that the Amendment be approved. Roll Call. Motion carried by the following vote:**

**Aye:** 9 - Alderson William Siebers, Alderson Brad Firkus, Alderson Joe Martin, Alderson Katie Van Zeeland, Alderson Alex Schultz, Alderson Mike Smith, Alderson Patti Coenen, Alderson Joe Prohaska and Alderson Corey Otis

**Nay:** 6 - Alderson Vered Meltzer, Alderson Denise Fenton, Alderson Maiyoua Thao, Alderson Matthew Reed, Alderson Nate Wolff and Alderson Kyle Lobner

**Abstained:** 1 - Mayor Jake Woodford

**20-1520** Amend DPW CIP Budget to remove Budget Saturday Amendment

**Alderson Lobner moved, seconded by Alderson Otis, that the Amendment to remove the amendment that passed on Budget Saturday (Moving \$100,000 of projects to the DPW general fund and fund with general fund balance) be approved.**

**Roll Call. Motion carried by the following vote:**

**Aye:** 14 - Alderson William Siebers, Alderson Vered Meltzer, Alderson Brad Firkus, Alderson Katie Van Zeeland, Alderson Denise Fenton, Alderson Maiyoua Thao, Alderson Matthew Reed, Alderson Alex Schultz, Alderson Mike Smith, Alderson Patti Coenen, Alderson Nate Wolff, Alderson Kyle Lobner, Alderson Joe Prohaska and Alderson Corey Otis

**Nay:** 1 - Alderson Joe Martin

**Abstained:** 1 - Mayor Jake Woodford

[20-1502](#) Approve the Finance Committee Budget Workshop ("Budget Saturday") Minutes for Saturday, October 31, 2020

**Attachments:** [FC Budget Saturday Meeting Minutes 10-31-20.pdf](#)

**Alderson Fenton moved, seconded by Alderson Otis, that the Minutes be approved as amended. Roll Call. Motion carried by the following vote:**

**Aye:** 15 - Alderperson William Siebers, Alderperson Vered Meltzer, Alderperson Brad Firkus, Alderperson Joe Martin, Alderperson Katie Van Zeeland, Alderperson Denise Fenton, Alderperson Maiyoua Thao, Alderperson Matthew Reed, Alderperson Alex Schultz, Alderperson Mike Smith, Alderperson Patti Coenen, Alderperson Nate Wolff, Alderperson Kyle Lobner, Alderperson Joe Prohaska and Alderperson Corey Otis

**Abstained:** 1 - Mayor Jake Woodford

## RISE AND REPORT

### [20-1504](#)

Reconvene to Common Council

**Alderperson Otis moved, seconded by Alderperson Prohaska, to reconvene as the Common Council. Roll Call. Motion carried by the following vote:**

**Aye:** 15 - Alderperson William Siebers, Alderperson Vered Meltzer, Alderperson Brad Firkus, Alderperson Joe Martin, Alderperson Katie Van Zeeland, Alderperson Denise Fenton, Alderperson Maiyoua Thao, Alderperson Matthew Reed, Alderperson Alex Schultz, Alderperson Mike Smith, Alderperson Patti Coenen, Alderperson Nate Wolff, Alderperson Kyle Lobner, Alderperson Joe Prohaska and Alderperson Corey Otis

**Abstained:** 1 - Mayor Jake Woodford

### [20-1505](#)

Report of the Committee of the Whole

**Alderperson Lobner moved, seconded by Alderperson Otis, that the Report of the Committee of the Whole be approved. Roll Call. Motion carried by the following vote:**

**Aye:** 15 - Alderperson William Siebers, Alderperson Vered Meltzer, Alderperson Brad Firkus, Alderperson Joe Martin, Alderperson Katie Van Zeeland, Alderperson Denise Fenton, Alderperson Maiyoua Thao, Alderperson Matthew Reed, Alderperson Alex Schultz, Alderperson Mike Smith, Alderperson Patti Coenen, Alderperson Nate Wolff, Alderperson Kyle Lobner, Alderperson Joe Prohaska and Alderperson Corey Otis

**Abstained:** 1 - Mayor Jake Woodford

### [20-1508](#)

2021 Budget Resolution

**Attachments:** [2021 Budget Resolution.pdf](#)

**Alderperson Lobner moved, seconded by Alderperson Otis, that the 2021 Budget Resolution be approved. Roll Call. Motion carried by the following vote:**



**Aye:** 15 - Alderperson William Siebers, Alderperson Vered Meltzer, Alderperson Brad Firkus, Alderperson Joe Martin, Alderperson Katie Van Zeeland, Alderperson Denise Fenton, Alderperson Maiyoua Thao, Alderperson Matthew Reed, Alderperson Alex Schultz, Alderperson Mike Smith, Alderperson Patti Coenen, Alderperson Nate Wolff, Alderperson Kyle Lobner, Alderperson Joe Prohaska and Alderperson Corey Otis

**Abstained:** 1 - Mayor Jake Woodford

[20-1506](#)

Reconsideration of the Report of the Committee of the Whole

**Alderperson Lobner moved, seconded by Alderperson Martin, to reconsider the Report of the Committee of the Whole. Roll Call. Motion failed by the following vote:**

**Nay:** 15 - Alderperson William Siebers, Alderperson Vered Meltzer, Alderperson Brad Firkus, Alderperson Joe Martin, Alderperson Katie Van Zeeland, Alderperson Denise Fenton, Alderperson Maiyoua Thao, Alderperson Matthew Reed, Alderperson Alex Schultz, Alderperson Mike Smith, Alderperson Patti Coenen, Alderperson Nate Wolff, Alderperson Kyle Lobner, Alderperson Joe Prohaska and Alderperson Corey Otis

**Abstained:** 1 - Mayor Jake Woodford

I. OTHER COUNCIL BUSINESS

J. ADJOURN

**Alderperson Lobner moved, seconded by Alderperson Reed, that the meeting be adjourned at 6:40 p.m. Roll Call. Motion carried by the following vote:**

**Aye:** 15 - Alderperson William Siebers, Alderperson Vered Meltzer, Alderperson Brad Firkus, Alderperson Joe Martin, Alderperson Katie Van Zeeland, Alderperson Denise Fenton, Alderperson Maiyoua Thao, Alderperson Matthew Reed, Alderperson Alex Schultz, Alderperson Mike Smith, Alderperson Patti Coenen, Alderperson Nate Wolff, Alderperson Kyle Lobner, Alderperson Joe Prohaska and Alderperson Corey Otis

**Abstained:** 1 - Mayor Jake Woodford

Kami Lynch, City Clerk

# PROCLAMATION



## Office of the Mayor

**WHEREAS**, the City of Appleton is built on the ancestral homelands of the Menominee Nation; and

**WHEREAS**, Menominee Nation ceded this territory to the United States in the Treaty of the Cedars in 1836, with Chief Oshkosh representing the Menominee; and

**WHEREAS**, during National Native American Heritage Month, we celebrate the rich tapestry of Indigenous Peoples and honor their sacrifices, which we recognize as inextricably woven into the history of this country; and

**WHEREAS**, Native American Awareness Week began in 1976 and recognition was expanded by Congress and approved by President George Bush in August 1990, designating the entire month of November as National Native American Heritage Month; and

**WHEREAS**, to honor National Native American Heritage Month, community celebrations as well as numerous cultural, artistic, educational, and historical activities have been planned.

**NOW, THEREFORE, BE IT RESOLVED, THAT I, JACOB A. WOODFORD**, Mayor of the City of Appleton, Wisconsin, do hereby proclaim November as

## Native American Heritage Month

in Appleton and urge all residents to observe this month with appropriate programs, ceremonies, and activities.

Signed and sealed this 4<sup>th</sup> day of November 2020.



  
**JACOB A. WOODFORD**  
MAYOR OF APPLETON

# PROCLAMATION



## Office of the Mayor

**WHEREAS**, the City of Appleton celebrates our local small businesses and the contributions they make to our local economy and community;

**WHEREAS**, support for small businesses directly impacts the local economy as \$.67 is reinvested into our community for every \$1.00 spent with a local business; local businesses provide safe options for online shopping, pickup, delivery, and more; and

**WHEREAS**, supporting a local Fox Cities business supports jobs, boosts our local economy, and preserves our communities; small businesses employ nearly half of all private sector employees in the United States; and

**WHEREAS**, COVID-19 has negatively impacted the stability of small businesses in Appleton; more than half of our small businesses reported that they need consumer spending return to pre-COVID-19 levels by the end of 2020 in order to stay in business; and

**WHEREAS**, local advocacy groups such as the Fox Cities Chamber of Commerce, Appleton Downtown Inc., and the Appleton Northside Business Association, along with private organizations across the country have endorsed the Saturday after Thanksgiving as Small Business Saturday, expanded this year in Appleton to be Small Business Week: November 28 through December 4.

**NOW, THEREFORE, BE IT RESOLVED, THAT I, JACOB A. WOODFORD**, Mayor of the City of Appleton, Wisconsin, do hereby proclaim November 28 – December 4, 2020 as

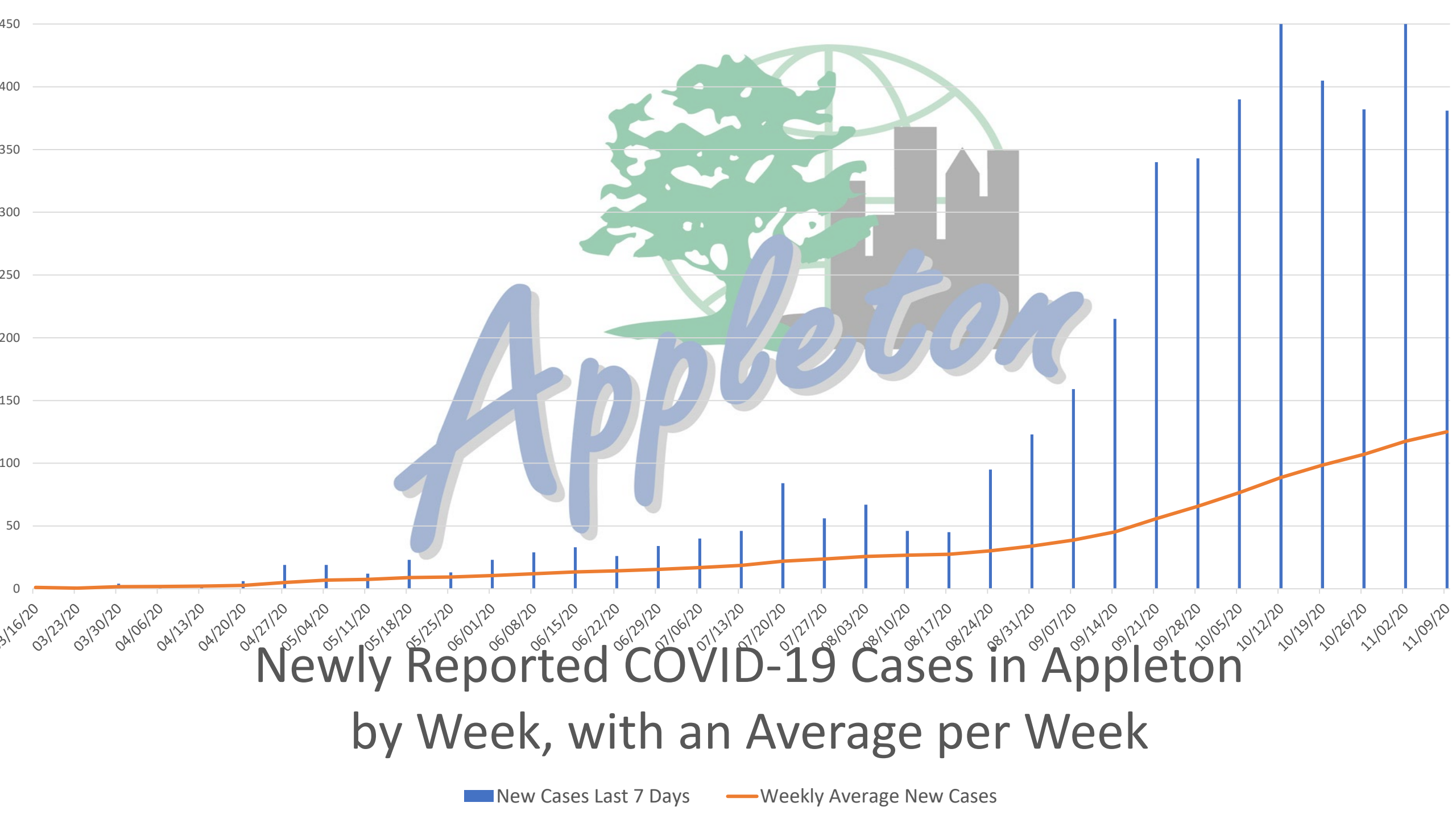
## Small Business Week

in Appleton and urge all Fox Cities residents to support small businesses and merchants during Small Business Week.

Signed and sealed this 4<sup>th</sup> day of November 2020.



  
**JACOB A. WOODFORD**  
MAYOR OF APPLETON



$461 + 381 = 842$  (2 week case counts)

$842 / 75,000 = .0112$  (Appleton population 75,000)

$.00112 \times 100,000 = 1,122$  (equals burden)

**Low** less than or equal to 10 per 100,000 people

**Moderate** greater than 10 but less than 50 per 100,000 people

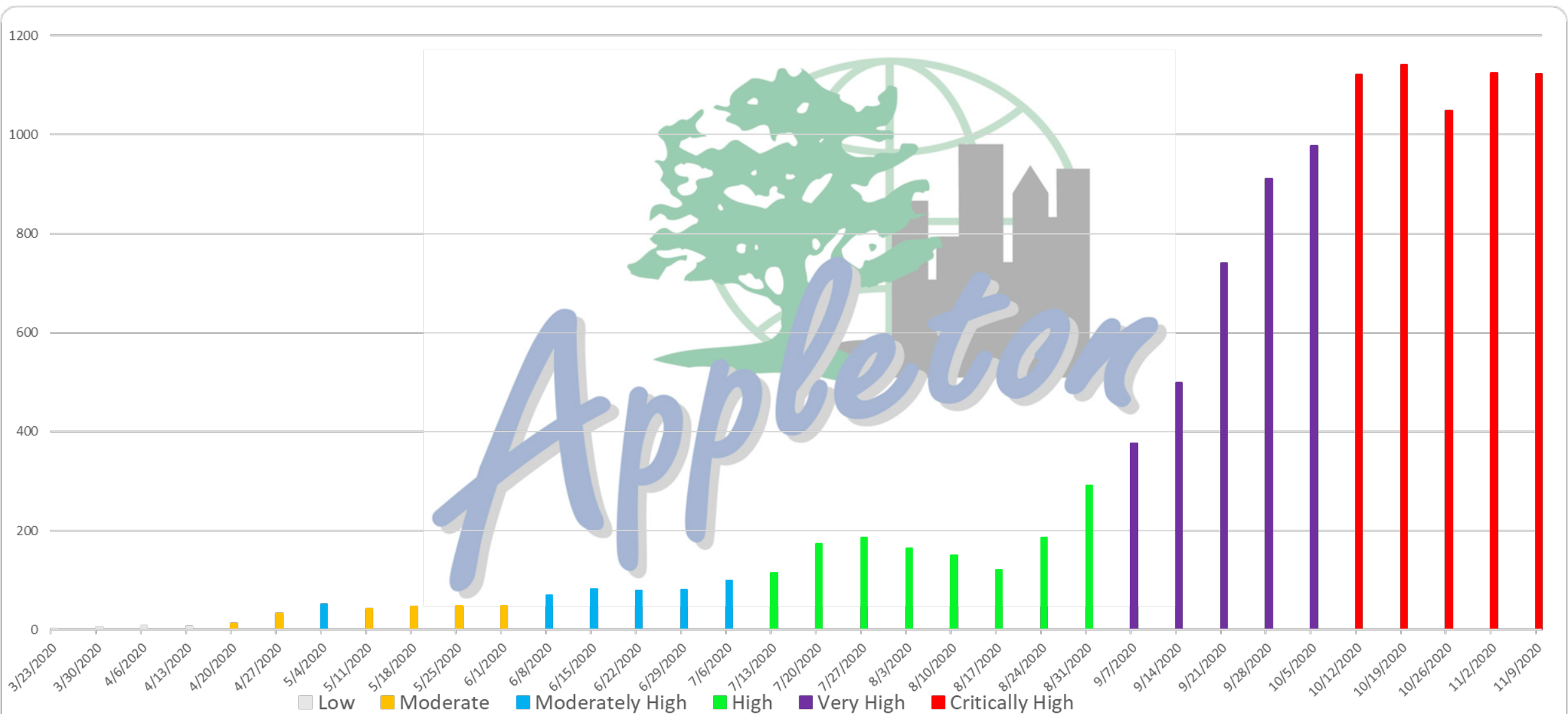
**Moderately High** greater than 50 but less than 100 per 100,000 people

**High** is greater than 100 per 100,000 people

**Very High** is greater than 350 per 100,000 people

**Critically High** is greater than 1,000 per 100,000 people

Table 1. Two indicators being based on confirmed cases: Burden and Trajectory. A third indicator maps Burden and Trajectory indicators into one composite indicator.					
Indicator	Definition	Classes			
Burden	Total number of cases per 100,000 in the last two weeks ( $B$ )	Low	$B \leq 10$		
		Moderate	$10 < B \leq 50$		
		Moderately High	$50 < B \leq 100$		
		High	$100 < B \leq 350$		
		Very High	$350 < B \leq 1000$		
		Critically High	$1000 < B$		
Trajectory	Percent change in the last two weeks ( $T$ ), p-value from a test against $T = 0$ ( $p$ )	Shrinking	$T \leq -10\%$ and $p < 0.025$		
		Growing	$10\% \leq T$ and $p < 0.025$		
		Not changing (No Call)	Otherwise		
Case status indicator(Composite of burden and trajectory)	Summary concern based on Burden and Trajectory classifications		Shrinking	No Call	Growing
		Low	Low	Low	Medium
		Moderate	Medium	Medium	High
		Moderately High	Medium	High	High
		High	High	High	High
		Very High	Very High	Very High	Very High
		Critically High	Critically High	Critically High	Critically High



**Two Week Total New COVID-19 Cases in Appleton,**  
 Rate per 100,000 Population, Risk Level Assessments per WDHS

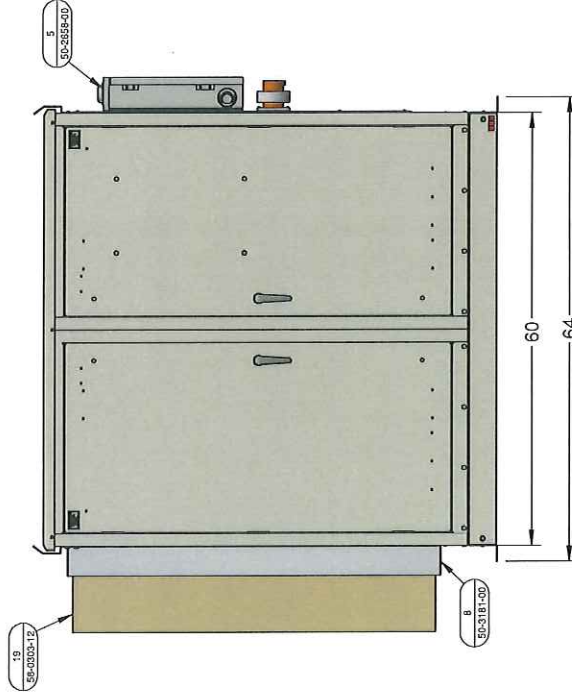
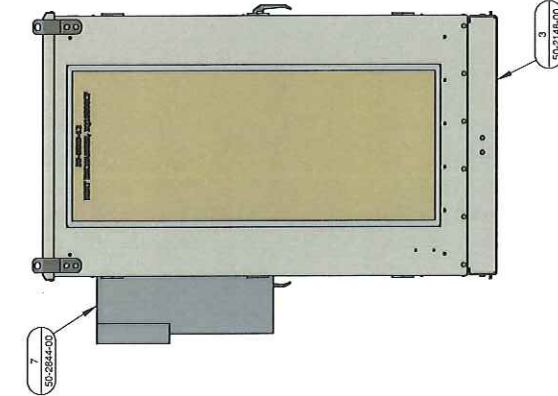
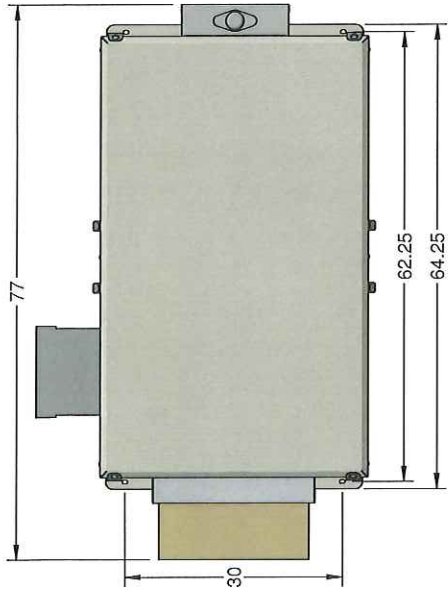




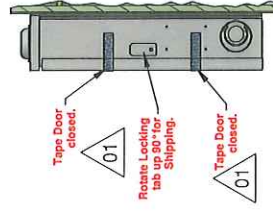
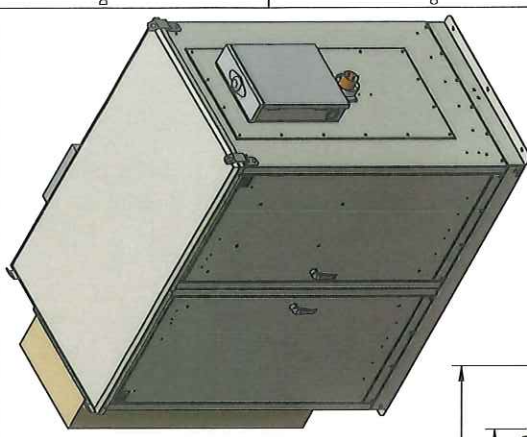
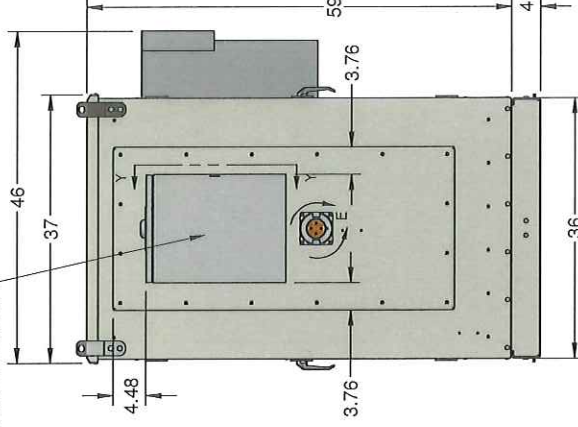
# AM58P-6036-60RU-VIK

**NOTE:**

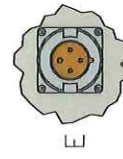
- 1- Both Quad Recep outlets are to be wired SEPERATE to 20amp breakers on RIGHT Side of Load Center, under generator breaker.
- 2- ADD 8-10" of slack from Quad Recepts to J-Box; Per Customer Request.
- 3- Customer Request to leave LEFT Side of Load Center OPEN for 2-Pole Breakers for the Power Bay (we do NOT supply these breakers).



SEE NOTES 1 thru 3 before WIRING!



DETAIL AA



DETAIL E

REV	NO	DATE	DESCRIPTION	APPROVED
1	01	03/11/2015	ISSUE FOR PRODUCTION	WJK
2	02	03/11/2015	ISSUE FOR PRODUCTION	WJK

DESIGNER	DATE	APPROVED
WJK	03/11/2015	WJK
CHECKED	DATE	APPROVED
WJK	03/11/2015	WJK
DRAWN BY	DATE	APPROVED
WJK	03/11/2015	WJK
CHECKED	DATE	APPROVED
WJK	03/11/2015	WJK

REV	NO	DATE	DESCRIPTION	APPROVED
1	01	03/11/2015	ISSUE FOR PRODUCTION	WJK
2	02	03/11/2015	ISSUE FOR PRODUCTION	WJK

\*REFERENCE PAINT SPEC SHEET FOR COLOR

CREATED BY WALKER







"... meeting community needs ... enhancing quality of life."

DEPARTMENT OF PUBLIC WORKS  
Engineering Division – Traffic Section  
2625 E. Glendale Avenue  
Appleton, WI 54911  
TEL (920) 832-5580  
FAX (920) 832-5570

**To:** Municipal Services Committee  
**From:** Eric S. Lom, City Traffic Engineer  
**Date:** November 3, 2020  
**Re:** Recommendation to Modify Location for Wisconsin Av 2021 Enhanced Pedestrian Crossing

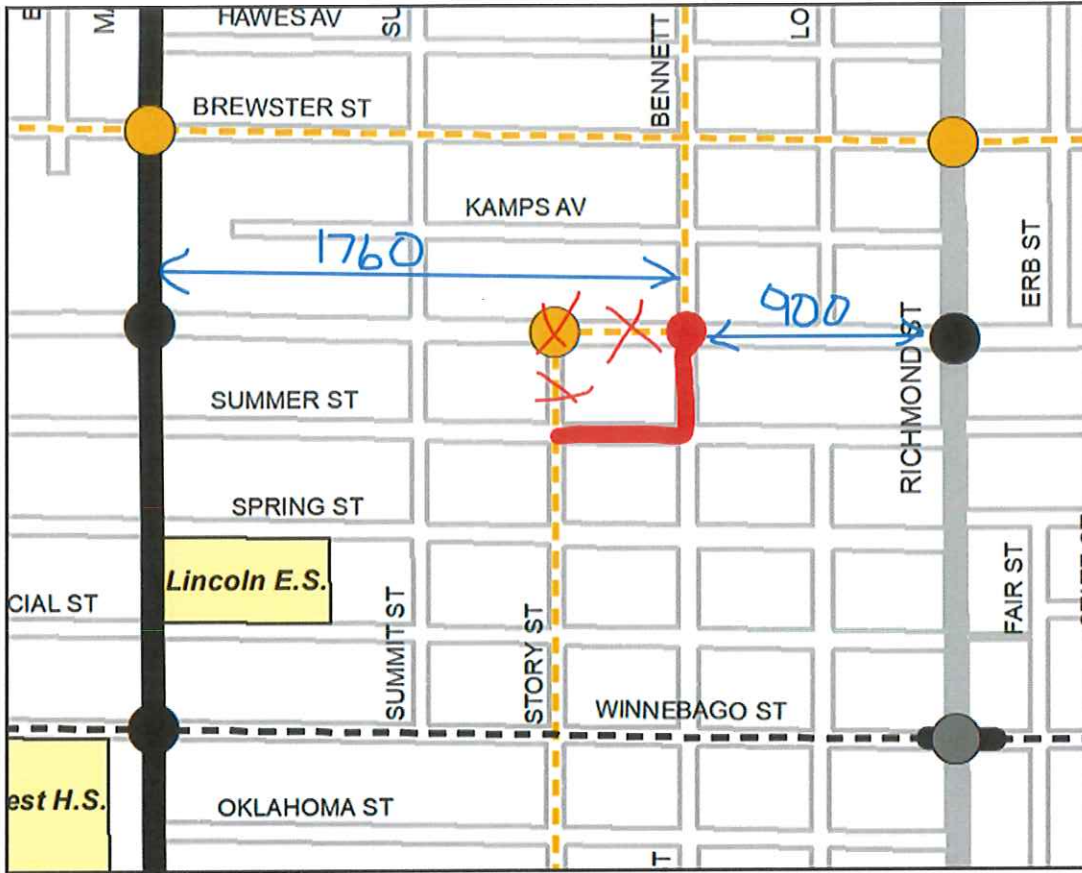
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The Mayor's 2021 Executive Budget includes funding for an enhanced pedestrian crossing across Wisconsin Avenue in the area between Mason Street and Richmond Street. The specific location for the crossing is currently identified as Story Street, which was based on high-level planning efforts from many years ago. However, as we have been working through the detailed design, we ran into some issues related to bicycle connectivity.

The larger picture is that the proposed Story St/Bennett St bike route is intended to be the north/south alternative for bikers in this area since Richmond St is obviously not a desirable route. Since Story St ends at Wisconsin Av, we need to switch bikers over to Bennett St at some point. There are some good reasons for having the crossing at Story Street, such as the fact that Story St perfectly bisects the stretch of Wisconsin between the signals at Mason and at Richmond. The Story St location, for this reason, would be ideal for pedestrians, since it would minimize the need to backtrack in any given direction.

However, what we didn't realize at the time was that this location would be problematic for bicyclists. Under the current plan, northbound bicyclists would be asked to cross Wisconsin Av, ride along the sidewalks on Wisconsin Av, and then head north on Bennett St. Due to our concerns with this concept, we brought this issue to the *Bicycle and Pedestrian Advisory Committee* (BPAC). The members felt strongly that if we were to build the crossing at Story Street, most bicyclists would simply not use the designated crossing, and instead cross at Bennett St, largely defeating the purpose of the investment.

So, based on our design work and on the unanimous feedback from the BPAC, we are proposing to move the crossing to the Bennett intersection. This location would be much cleaner and would function much better for the vast majority of users. The only downside is that would be "off-center" on this uncontrolled stretch of Wisconsin Av. All things considered, we believe the new design would be much better.



# Original Alcohol Beverage Retail License Application

(Submit to municipal clerk.)

For the license period beginning: \_\_\_\_\_ ending: \_\_\_\_\_  
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the:  Town of } APPLETON.  
 Village of }  
 City of }

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

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

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

Name (Individual / partners give last name, first, middle; corporations / limited liability companies give registered name)  
PARNCHARN POONSIRI

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 full name and place of residence of each person.

President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
<u>Parnchaen</u>	<u>Poonsiri</u>		<u>4821 N Latitude Ln Appleton 54913</u>
Vice President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Secretary / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Agent Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

1. Trade Name Jai Sung Mah Business Phone Number [REDACTED]  
 2. Address of Premises 122 W. WISCONSIN AVE. Post Office & Zip Code 54911

3. 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 open area with a kitchen. and a basement.  
one women restroom and one men restroom.  
there're two closet storage to keep all the liquor.  
and store  
there're two fridges to store the liquor. the are of  
the building is a total of 2,500 square feet.

4. Legal description (omit if street address is given above): \_\_\_\_\_  
 5. (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? Nusara Yang.

6. Is individual, partners or agent of corporation/limited liability company subject to completion of the responsible beverage server training course for this license period? **If yes, explain** .....  Yes  No  
The course was completed on 09.28.20.
7. Is the applicant an employe or agent of, or acting on behalf of anyone except the named applicant? .....  Yes  No  
**If yes, explain.**
8. Does any other alcohol beverage retail licensee or wholesale permittee have any interest in or control of this business? **If yes, explain** .....  Yes  No
9. (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? **If yes, explain** .....  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? **If yes, explain.**  Yes  No
10. Does the applicant understand they must register as a Retail Beverage Alcohol Dealer with the federal government, Alcohol and Tobacco Tax and Trade Bureau (TTB) by filing (TTB form 5630.5d) before beginning business? [phone 1-877-882-3277] .....  Yes  No
11. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776] .....  Yes  No
12. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? .....  Yes  No

**READ CAREFULLY BEFORE SIGNING:** Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000. Signer agrees to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants, or one member of a partnership applicant must sign; one corporate officer, one member/manager of Limited Liability Companies must sign.) Any lack of access to any portion of a licensed premises during inspection will be deemed a refusal to permit inspection. Such refusal is a misdemeanor and grounds for revocation of this license.

Contact Person's Name (Last, First, M.I.) <b>PARNCHARN Poonsiri</b>	Title/Member <b>OWNER</b>	Date <b>10.06.2020</b>
Signature 	Phone Number 	Email Address 

**TO BE COMPLETED BY CLERK**

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





7. What was the previous name and primary nature of the business operating at this location?

Name: Jai Sung Mah Pool club.

(Check Applicable Box(s) to identify primary business activity)

- Restaurant
- Tavern/Night Club/Wine Bar
- Microbrewery/Brewpub
- Painting/Craft Studio
- Other (describe) \_\_\_\_\_

8. Was this premise licensed for alcohol sales/consumption during the past license year?

Yes  If yes, please contact the Community and Economic Development Department at 832-6468 about obtaining a copy of an existing Special Use Permit and related requirements that may run with property.

No \_\_\_\_\_ If no, please contact the Community and Economic Development Department at 832-6468 about obtaining a Special Use Permit. A Special Use Permit may be required for your business activity prior to the issuance of a Liquor License, pursuant to the City of Appleton Zoning Ordinance.

9. If alcohol sales were a previous use in this building, when did the operation cease?

14 months ago.

10. Seating capacity: Inside 30 Outside 0

11. Operating hours (Inside the building): 6:00 PM - 2:00 AM  
Operating hours (Outdoor seating areas): \_\_\_\_\_

12. Employees/Staff

Number of floor personnel 1 Number of door checkers 1

13. In general, state the size and operational details of the proposed establishment:

- a. Gross floor building area of the premises to be licensed: 2,500 square feet.
- b. Gross outdoor seating areas of the premises to be licensed: 0 square feet.
- c. Below, identify the operational details of the proposed establishment:

The building is an one open area of 2,500 sq. Ft.  
there a kitchen. Two little storage closet by the wall.  
There 're 1 women restroom, 1 men restroom and a  
basement. All the liquors will be stored in the  
storage closet area and also in the 2 fridges we  
have in the building.

Signature

Date

10.06.2020

# Original Alcohol Beverage Retail License Application

(Submit to municipal clerk.)

For the license period beginning: \_\_\_\_\_ ending: 06-30-2021  
(mm dd yyyy) (mm dd yyyy)

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

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

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

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

Name (individual / partners give last name, first, middle; corporations / limited liability companies give registered name)  
LOU'S BREW CAFE AND LOUNGE, INC.

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 full name and place of residence of each person.

President / Member Last Name <u>LOUKIDIS</u>	(First) <u>LAURA</u>	(Middle Name) <u>ANN</u>	Home Address (Street, City or Post Office, & Zip Code) <u>4769 Indian Bend Rd Oshkosh WI 54904</u>
Vice President / Member Last Name <u>LOUKIDIS</u>	(First) <u>DENO</u>	(Middle Name) <u>JAMES</u>	Home Address (Street, City or Post Office, & Zip Code) <u>4769 Indian Bend Rd Oshkosh WI 54904</u>
Secretary / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Agent Last Name <u>LOUKIDIS</u>	(First) <u>LAURA</u>	(Middle Name) <u>A</u>	Home Address (Street, City or Post Office, & Zip Code) <u>4769 Indian Bend Rd Oshkosh WI 54904</u>
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

1. Trade Name Lou's Brew Cafe Business Phone Number (920) 955-2229

2. Address of Premises 233 E. College Ave Post Office & Zip Code Appleton 54911

3. 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.)  
233 E College Ave Approx 5000 sq ft main floor (cafe and bar area) is where main sale and consumption of alcohol will be sold. Main storage of alcohol will be in the basement where we have a designated room with a lockable door. Occasional consumption may occur on third floor over cafe side. Sidewalk cafe during spring/summer

4. Legal description (omit if street address is given above): \_\_\_\_\_

5. (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? Lou's Brew Cafe and Lounge, Inc.

6. Is individual, partners or agent of corporation/limited liability company subject to completion of the responsible beverage server training course for this license period? **If yes, explain** .....  Yes  No
7. Is the applicant an employe or agent of, or acting on behalf of anyone except the named applicant? .....  Yes  No  
**If yes, explain.**
8. Does any other alcohol beverage retail licensee or wholesale permittee have any interest in or control of this business? **If yes, explain** .....  Yes  No
9. (a) Corporate/limited liability company applicants only: Insert state WI and date 2012 of registration.
- (b) Is applicant corporation/limited liability company a subsidiary of any other corporation or limited liability company? **If yes, explain** .....  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? **If yes, explain.**  Yes  No
10. Does the applicant understand they must register as a Retail Beverage Alcohol Dealer with the federal government, Alcohol and Tobacco Tax and Trade Bureau (TTB) by filing (TTB form 5630.5d) before beginning business? [phone 1-877-882-3277] .....  Yes  No
11. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776] .....  Yes  No
12. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? .....  Yes  No

**READ CAREFULLY BEFORE SIGNING:** Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000. Signer agrees to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants, or one member of a partnership applicant must sign; one corporate officer, one member/manager of Limited Liability Companies must sign.) Any lack of access to any portion of a licensed premises during inspection will be deemed a refusal to permit inspection. Such refusal is a misdemeanor and grounds for revocation of this license.

Contact Person's Name (Last, First, M.I.) <u>LOWRIDIS, LAURA A.</u>	Title/Member <u>OWNER</u>	Date <u>10/27/20</u>
Signature <u>Laura Lowridis</u>	Phone Number <u>( )</u>	Email Address <u></u>

**TO BE COMPLETED BY CLERK**

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



# City of Appleton

## Liquor License Questionnaire

1. Name of Applicant: Laura Loukidis

2. Name of Business: Lous Brew Cafe and Lounge

(Check Applicable Box(s) to identify primary business activity)

- Restaurant
- Tavern/Night Club/Wine Bar
- Microbrewery/Brewpub
- Painting/Craft Studio
- Other (describe) Cafe & bar

3. Address of Business: 233 E College Ave Appleton WI 54911

4. Have you or any member of your organization ever been convicted of a misdemeanor or ordinance violation? Yes \_\_\_\_\_ No

AND/OR been convicted of a felony? Yes \_\_\_\_\_ No

If yes to either question, please explain in detail below:

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5. List all partners, shareholders or investors of your business. Include full name, middle initial and date of birth. Please use additional sheets if necessary.

<u>Laura</u>	<u>A</u>	<u>LOUKIDIS</u>	<u>          </u>
First name	M.I.	Last name	Date of Birth
<u>Dena</u>	<u>J</u>	<u>LOUKIDIS</u>	<u>          </u>
First name	M.I.	Last name	Date of Birth
First name	M.I.	Last name	Date of Birth
First name	M.I.	Last name	Date of Birth

6. Name of person/corporation you are buying the premise and equipment from?

Name: N/A

First name
Middle Initial
Last name

Address: \_\_\_\_\_

City
State
ZIP

7. What was the previous name and primary nature of the business operating at this location?

Name: Low's Brew

(Check Applicable Box(s) to identify primary business activity)

- Restaurant  
 Tavern/Night Club/Wine Bar  
 Microbrewery/Brewpub  
 Painting/Craft Studio  
 Other (describe) Cafe + bar

8. Was this premise licensed for alcohol sales/consumption during the past license year?

Yes  If yes, please contact the Community and Economic Development Department at 832-6468 about obtaining a copy of an existing Special Use Permit and related requirements that may run with property.

No  If no, please contact the Community and Economic Development Department at 832-6468 about obtaining a Special Use Permit. A Special Use Permit may be required for your business activity prior to the issuance of a Liquor License, pursuant to the City of Appleton Zoning Ordinance.

9. If alcohol sales were a previous use in this building, when did the operation cease?

8 months ago.

10. Seating capacity: Inside 100 Outside \_\_\_\_\_

11. Operating hours (Inside the building): 0730 - 1830 7:30 - 6:30 p  
Operating hours (Outdoor seating areas): \_\_\_\_\_

12. Employees/Staff

Number of floor personnel 5 Number of door checkers \_\_\_\_\_

13. In general, state the size and operational details of the proposed establishment:

a. Gross floor building area of the premises to be licensed: 5,000 square feet.

b. Gross outdoor seating areas of the premises to be licensed: 0 square feet.

c. Below, identify the operational details of the proposed establishment:

Cafe and bar. Selling alcohol on both cafe  
and bar side 1st floor and some areas of 2nd  
floor. Storage of alcohol in basement behind locked  
door.

Laura Gorkidis  
Signature

10/28/20  
Date

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

Submit to municipal clerk.

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

To the governing body of:  Town  Village of Appleton County of Outagamie  
 City

The undersigned duly authorized officer/member/manager of Lou's Brew Cafe and Lounge  
(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 Lou's Brew Cafe  
(Trade Name)

located at 233 E. College Ave Appleton WI 54911

appoints Laura Loukidis  
(Name of Appointed Agent)  
4769 Indian Bend Rd Oshkosh WI 54904  
(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? 00 years

Place of residence last year 4769 Indian Bend Rd Oshkosh WI 54904

For: Lou's Brew Cafe and Lounge, Inc  
(Name of Corporation / Organization / Limited Liability Company)  
By: Laura Loukidis  
(Signature of Officer / Member / Manager)

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

### ACCEPTANCE BY AGENT

I, Laura Loukidis, 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.

Laura Loukidis 10/27/20 Agent's age 00  
(Signature of Agent) (Date)  
4769 Indian Bend Rd Oshkosh WI 54904 Date of birth 01/01/00  
(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 \_\_\_\_\_ by \_\_\_\_\_ Title \_\_\_\_\_  
(Date) (Signature of Proper Local Official) (Town Chair, Village President, Police Chief)

# Original Alcohol Beverage Retail License Application

(Submit to municipal clerk.)

For the license period beginning: \_\_\_\_\_ ending: 06-30-2020  
(mm dd yyyy) (mm dd yyyy)

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

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

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

Applicant's Wisconsin Seller's Permit Number ●●●●●●●●●●●●●●●●●●	
FEIN Number ●●●●●●●●	
TYPE OF LICENSE REQUESTED	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$ 100
<input type="checkbox"/> Class C wine	\$
<input type="checkbox"/> Class A liquor	\$
<input type="checkbox"/> Class A liquor (cider only)	\$ N/A
<input checked="" type="checkbox"/> Class B liquor	\$ 500
<input checked="" type="checkbox"/> Reserve Class B liquor	\$ ●●●●●●
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$ 20
<b>TOTAL FEE</b>	\$

Name (individual / partners give last name, first, middle; corporations / limited liability companies give registered name)  
DRIFTWOOD SPECIAL SERVICING, LLC

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 full name and place of residence of each person.

President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
BUDDEMEYER	DAVID	A	3264 WYMBERLY DR, JUPITER, FL 33458
Vice President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
DIAZ	CHARLES	M	528 OVERLOOK DR, N PALM BCH, FL 33408
Secretary / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Agent Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Garvey	Linda	Marie	105 Alexander Dr. Neenah, WI 54956
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

1. Trade Name APPLETON RED LION PAPER VALLEY Business Phone Number 920-733-8000

2. Address of Premises 333 W. COLLEGE AVENUE Post Office & Zip Code 54911

3. 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 SERVICE - ENTIRE HOTEL INCLUDING COURTYARD, DECK AND HOTEL  
PROPERTY IN FRONT OF HOTEL




4. Legal description (omit if street address is given above): \_\_\_\_\_

5. (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? APPLETON HOLDINGS, LLC

6. Is individual, partners or agent of corporation/limited liability company subject to completion of the responsible beverage server training course for this license period? **If yes, explain** .....  Yes  No
7. Is the applicant an employe or agent of, or acting on behalf of anyone except the named applicant? .....  Yes  No  
**If yes, explain.**
8. Does any other alcohol beverage retail licensee or wholesale permittee have any interest in or control of this business? **If yes, explain** .....  Yes  No
9. (a) **Corporate/limited liability company applicants only:** Insert state DE and date 01/30/20 of registration.
- (b) Is applicant corporation/limited liability company a subsidiary of any other corporation or limited liability company? **If yes, explain** .....  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? **If yes, explain.**  Yes  No
10. Does the applicant understand they must register as a Retail Beverage Alcohol Dealer with the federal government, Alcohol and Tobacco Tax and Trade Bureau (TTB) by filing (TTB form 5630.5d) before beginning business? [phone 1-877-882-3277] .....  Yes  No
11. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776] .....  Yes  No
12. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? .....  Yes  No

**READ CAREFULLY BEFORE SIGNING:** Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000. Signer agrees to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants, or one member of a partnership applicant must sign; one corporate officer, one member/manager of Limited Liability Companies must sign.) Any lack of access to any portion of a licensed premises during inspection will be deemed a refusal to permit inspection. Such refusal is a misdemeanor and grounds for revocation of this license.

Contact Person's Name (Last, First, M.I.) Buddemeyer, David, A	Title/Member President	Date 06/04/20
Signature 	Phone Number 	Email Address 

**TO BE COMPLETED BY CLERK**

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





# City of Appleton

## Liquor License Questionnaire

1. **Name of Applicant:** Driftwood Special Servicing, LLC

2. **Name of Business:** Appleton Red Lion Paper Valley Hotel

(Check Applicable Box(s) to identify primary business activity)

- Restaurant
- Tavern/Night Club/Wine Bar
- Microbrewery/Brewpub
- Painting/Craft Studio
- Other (describe) Hotel

3. **Address of Business:** 333 W. College Avenue, Appleton, WI 54911

4. **Have you or any member of your organization ever been convicted of a misdemeanor or ordinance violation?** Yes \_\_\_\_\_ No ✓

**AND/OR been convicted of a felony?** Yes \_\_\_\_\_ No ✓

If yes to either question, please explain in detail below:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

5. **List all partners, shareholders or investors of your business. Include full name, middle initial and date of birth. Please use additional sheets if necessary.**

David	A.	Buddemeyer	● / ● / ●●
First name	M.I.	Last name	Date of Birth
Charles	M.	Diaz	● / ● / ●●
First name	M.I.	Last name	Date of Birth
			/ /
First name	M.I.	Last name	Date of Birth
			/ /
First name	M.I.	Last name	Date of Birth

6. **Name of person/corporation you are buying the premise and equipment from?**

Name: Appleton Holdings LLC

First name Middle Initial Last name

Address: 12 Tidewater Drive Ormond Beach FL 32174  
 City State ZIP



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

Submit to municipal clerk.

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

To the governing body of:  Town  
 Village of APPLETON County of OUTAGAMIE  
 City

The undersigned duly authorized officer/member/manager of DRIFTWOOD SPECIAL SERVICING, 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 APPLETON RED LION PAPER VALLEY HOTEL  
(Trade Name)

located at 333 W. COLLEGE AVENUE, APPLETON, WI 54911

appoints LINDA GARVEY  
(Name of Appointed Agent)

105 Alexander Dr. Neenah, WI 54956  
(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).  
Appleton Holdings

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 yrs

Place of residence last year 105 Alexander Dr. Neenah, WI 54956

For: DRIFTWOOD SPECIAL SERVICING, LLC  
(Name of Corporation / Organization / Limited Liability Company)

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

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

### ACCEPTANCE BY AGENT

I, Linda Garvey, 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 Garvey 10-14-2020 Agent's age [Redacted]  
(Signature of Agent) (Date)  
105 Alexander Dr. Neenah, WI 54956 Date of birth [Redacted]  
(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 \_\_\_\_\_ by \_\_\_\_\_ Title \_\_\_\_\_  
(Date) (Signature of Proper Local Official) (Town Chair, Village President, Police Chief)

600

# Original Alcohol Beverage Retail License Application

(Submit to municipal clerk.)

For the license period beginning: \_\_\_\_\_ ending: 06-30-2021  
(mm dd yyyy) (mm dd yyyy)

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

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

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

Applicant's Wisconsin Seller's Permit Number ●●●●●●●●●●●●●●●●●●●●	
FEIN Number ●●●●●●●●	
TYPE OF LICENSE REQUESTED	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$ 100
<input type="checkbox"/> Class C wine	\$
<input type="checkbox"/> Class A liquor	\$
<input type="checkbox"/> Class A liquor (cider only)	\$ N/A
<input checked="" type="checkbox"/> Class B liquor	\$ 500
<input type="checkbox"/> Reserve Class B liquor	\$
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$ 20
<b>TOTAL FEE</b>	<b>\$</b>

Name (individual / partners give last name, first, middle; corporations / limited liability companies give registered name)  
DRIFTWOOD SPECIAL SERVICING, LLC

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 full name and place of residence of each person.

President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
<u>BUDDEMEYER</u>	<u>DAVID</u>	<u>A</u>	<u>3264 WYMBERLY DR, JUPITER, FL 33458</u>
Vice President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
<u>DIAZ</u>	<u>CHARLES</u>	<u>M</u>	<u>528 OVERLOOK DR, N PALM BCH, FL 33408</u>
Secretary / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Agent Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
<u>Garvey</u>	<u>Linda</u>	<u>Marie</u>	<u>105 Alexander Dr. Neenah, WI 54956</u>
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

1. Trade Name APPLETON RED LION PAPER VALLEY Business Phone Number 920-733-8000

2. Address of Premises 333 W. COLLEGE AVENUE Post Office & Zip Code 54911

3. 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.)  
LOMBARDI BAR, WINE ROOM, DINING ROOM, SERVICE BAR, ROOM SERVICE, ORCHARD RESTAURANT, STORAGE IN BASEMENT

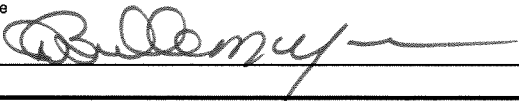


4. Legal description (omit if street address is given above): \_\_\_\_\_

5. (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? APPLETON HOLDINGS, LLC

6. Is individual, partners or agent of corporation/limited liability company subject to completion of the responsible beverage server training course for this license period? **If yes, explain** .....  Yes  No
7. Is the applicant an employe or agent of, or acting on behalf of anyone except the named applicant? .....  Yes  No  
**If yes, explain.**
8. Does any other alcohol beverage retail licensee or wholesale permittee have any interest in or control of this business? **If yes, explain** .....  Yes  No
9. (a) **Corporate/limited liability company applicants only:** Insert state DE and date 01/30/20 of registration.
- (b) Is applicant corporation/limited liability company a subsidiary of any other corporation or limited liability company? **If yes, explain** .....  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? **If yes, explain.**  Yes  No
10. Does the applicant understand they must register as a Retail Beverage Alcohol Dealer with the federal government, Alcohol and Tobacco Tax and Trade Bureau (TTB) by filing (TTB form 5630.5d) before beginning business? [phone 1-877-882-3277] .....  Yes  No
11. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776] .....  Yes  No
12. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? .....  Yes  No

**READ CAREFULLY BEFORE SIGNING:** Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000. Signer agrees to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants, or one member of a partnership applicant must sign; one corporate officer, one member/manager of Limited Liability Companies must sign.) Any lack of access to any portion of a licensed premises during inspection will be deemed a refusal to permit inspection. Such refusal is a misdemeanor and grounds for revocation of this license.

Contact Person's Name (Last, First, M.I.) Buddemeyer, David, A	Title/Member President	Date 06/04/20
Signature 	Phone Number 	Email Address 

**TO BE COMPLETED BY CLERK**

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



# City of Appleton

## Liquor License Questionnaire

1. **Name of Applicant:** Driftwood Special Servicing, LLC

2. **Name of Business:** Appleton Red Lion Paper Valley Hotel - Lombardi Steakhouse and Bar

(Check Applicable Box(s) to identify primary business activity)

- Restaurant
- Tavern/Night Club/Wine Bar
- Microbrewery/Brewpub
- Painting/Craft Studio
- Other (describe) \_\_\_\_\_

3. **Address of Business:** 333 W. College Avenue, Appleton, WI 54911

4. **Have you or any member of your organization ever been convicted of a misdemeanor or ordinance violation?** Yes \_\_\_\_\_ No ✓

**AND/OR been convicted of a felony?** Yes \_\_\_\_\_ No ✓

If yes to either question, please explain in detail below:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

5. **List all partners, shareholders or investors of your business. Include full name, middle initial and date of birth. Please use additional sheets if necessary.**

David	A.	Buddemeyer	● / ● / ●●
First name	M.I.	Last name	Date of Birth
Charles	M.	Diaz	● / ● / ●●
First name	M.I.	Last name	Date of Birth
			/ /
First name	M.I.	Last name	Date of Birth
			/ /
First name	M.I.	Last name	Date of Birth

6. **Name of person/corporation you are buying the premise and equipment from?**

Name: Appleton Holdings LLC

First name Middle Initial Last name

Address: 12 Tidewater Drive Ormond Beach FL 32174

City State ZIP

**7. What was the previous name and primary nature of the business operating at this location?**

**Name:** Appleton Red Lion Paper Valley Hotel - Lombardi Steakhouse and Bar

(Check Applicable Box(s) to identify primary business activity)

- Restaurant
- Tavern/Night Club/Wine Bar
- Microbrewery/Brewpub
- Painting/Craft Studio
- Other (describe) \_\_\_\_\_

**8. Was this premise licensed for alcohol sales/consumption during the past license year?**

**Yes**  *If yes, please contact the Community and Economic Development Department at 832-6468 about obtaining a copy of an existing Special Use Permit and related requirements that may run with property.*

**No** \_\_\_\_\_ *If no, please contact the Community and Economic Development Department at 832-6468 about obtaining a Special Use Permit. A Special Use Permit may be required for your business activity prior to the issuance of a Liquor License, pursuant to the City of Appleton Zoning Ordinance.*

**9. If alcohol sales were a previous use in this building, when did the operation cease?**

\_\_\_\_\_ months ago.

**10. Seating capacity:** Inside \_\_\_\_\_ Outside \_\_\_\_\_

**11. Operating hours** (Inside the building): \_\_\_\_\_  
**Operating hours** (Outdoor seating areas): \_\_\_\_\_

**12. Employees/Staff**

Number of floor personnel \_\_\_\_\_ Number of door checkers \_\_\_\_\_

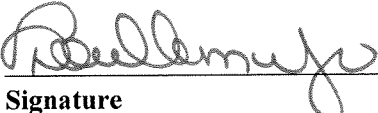
**13. In general, state the size and operational details of the proposed establishment:**

- a. Gross floor building area of the premises to be licensed: \_\_\_\_\_ square feet.
- b. Gross outdoor seating areas of the premises to be licensed: \_\_\_\_\_ square feet.
- c. Below, identify the operational details of the proposed establishment:

Lombardi Steakhouse and Bar located within Appleton Red Lion Paper Valley Hotel, including wine room,

dining room, service bar, and room service.

\_\_\_\_\_  
\_\_\_\_\_

  
**Signature**

8/15/2020  
**Date**

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

Submit to municipal clerk.

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

To the governing body of:  Town  Village  City of APPLETON County of OUTAGAMIE

The undersigned duly authorized officer/member/manager of DRIFTWOOD SPECIAL SERVICING, 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 APPLETON RED LION PAPER VALLEY HOTEL  
(Trade Name)

located at 333 W. COLLEGE AVENUE, APPLETON, WI 54911

appoints LINDA GARVEY  
(Name of Appointed Agent)

105 Alexander Dr. Neenah, WI 54956  
(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).  
Appleton Holdings

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? 00 YRS

Place of residence last year 105 Alexander Dr. Neenah, WI 54956

For: DRIFTWOOD SPECIAL SERVICING, LLC  
(Name of Corporation / Organization / Limited Liability Company)

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

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

### ACCEPTANCE BY AGENT

I, Linda Garvey, 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 Garvey 10-14-2020  
(Signature of Agent) (Date) Agent's age 00

105 Alexander Dr. Neenah, WI 54956  
(Home Address of Agent) Date of birth 0000

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

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

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

600



# Original Alcohol Beverage Retail License Application

(Submit to municipal clerk.)

For the license period beginning: \_\_\_\_\_ ending: 06-30-2021  
(mm dd yyyy) (mm dd yyyy)

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

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

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

Applicant's Wisconsin Seller's Permit Number ●●●●●●●●●●●●●●●●●●●●	
FEIN Number ●●●●●●●●	
TYPE OF LICENSE REQUESTED	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$ 100
<input type="checkbox"/> Class C wine	\$
<input type="checkbox"/> Class A liquor	\$
<input type="checkbox"/> Class A liquor (cider only)	\$ N/A
<input checked="" type="checkbox"/> Class B liquor	\$ 500
<input type="checkbox"/> Reserve Class B liquor	\$
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$ 20
<b>TOTAL FEE</b>	<b>\$</b>

Name (individual / partners give last name, first, middle; corporations / limited liability companies give registered name)  
DRIPTWOOD SPECIAL SERVICING, LLC

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 full name and place of residence of each person.

President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
BUDEMMEYER	DAVID	A	3264 WYMBERLY DR, JUPITER, FL 33458
Vice President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
DIAZ	CHARLES	M	528 OVERLOOK DR, N PALM BCH, FL 33408
Secretary / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Agent Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Garvey	Linda	Marie	105 Alexander Dr. Neenah, WI 54956
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

1. Trade Name APPLETON RED LION PAPER VALLEY Business Phone Number 920-733-8000

2. Address of Premises 333 W. COLLEGE AVENUE Post Office & Zip Code 54911

3. 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.)  
BLAZE TO INCLUDE OUTSIDE DECK AND STORAGE IN BASEMENT




4. Legal description (omit if street address is given above): \_\_\_\_\_

5. (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? APPLETON HOLDINGS, LLC

6. Is individual, partners or agent of corporation/limited liability company subject to completion of the responsible beverage server training course for this license period? **If yes, explain** .....  Yes  No
7. Is the applicant an employe or agent of, or acting on behalf of anyone except the named applicant? .....  Yes  No  
**If yes, explain.**
8. Does any other alcohol beverage retail licensee or wholesale permittee have any interest in or control of this business? **If yes, explain** .....  Yes  No
9. (a) **Corporate/limited liability company applicants only:** Insert state DE and date 01/30/20 of registration.
- (b) Is applicant corporation/limited liability company a subsidiary of any other corporation or limited liability company? **If yes, explain** .....  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? **If yes, explain.**  Yes  No
10. Does the applicant understand they must register as a Retail Beverage Alcohol Dealer with the federal government, Alcohol and Tobacco Tax and Trade Bureau (TTB) by filing (TTB form 5630.5d) before beginning business? [phone 1-877-882-3277] .....  Yes  No
11. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776] .....  Yes  No
12. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? .....  Yes  No

**READ CAREFULLY BEFORE SIGNING:** Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000. Signer agrees to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants, or one member of a partnership applicant must sign; one corporate officer, one member/manager of Limited Liability Companies must sign.) Any lack of access to any portion of a licensed premises during inspection will be deemed a refusal to permit inspection. Such refusal is a misdemeanor and grounds for revocation of this license.

Contact Person's Name (Last, First, M.I.) Buddemeyer, David, A	Title/Member President	Date 06/04/20
Signature 	Phone Number 	Email Address 

**TO BE COMPLETED BY CLERK**

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



# City of Appleton

## Liquor License Questionnaire

1. **Name of Applicant:** Driftwood Special Servicing, LLC

2. **Name of Business:** Appleton Red Lion Paper Valley Hotel - BLAZE Bourbon and Whiskey Bar

(Check Applicable Box(s) to identify primary business activity)

- Restaurant
- Tavern/Night Club/Wine Bar
- Microbrewery/Brewpub
- Painting/Craft Studio
- Other (describe) \_\_\_\_\_

3. **Address of Business:** 333 W. College Avenue, Appleton, WI 54911

4. **Have you or any member of your organization ever been convicted of a misdemeanor or ordinance violation?** Yes \_\_\_\_\_ No ✓

**AND/OR been convicted of a felony?** Yes \_\_\_\_\_ No ✓

If yes to either question, please explain in detail below:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

5. **List all partners, shareholders or investors of your business. Include full name, middle initial and date of birth. Please use additional sheets if necessary.**

David	A.	Buddemeyer	● / ● / ●●
First name	M.I.	Last name	Date of Birth
Charles	M.	Diaz	● / ● / ●●
First name	M.I.	Last name	Date of Birth
			/ /
First name	M.I.	Last name	Date of Birth
			/ /
First name	M.I.	Last name	Date of Birth

6. **Name of person/corporation you are buying the premise and equipment from?**

Name: Appleton Holdings LLC

First name Middle Initial Last name

Address: 12 Tidewater Drive Ormond Beach FL 32174

City State ZIP

**7. What was the previous name and primary nature of the business operating at this location?**

**Name:** Appleton Red Lion Paper Valley Hotel - BLAZE Bourbon and Whiskey Bar

(Check Applicable Box(s) to identify primary business activity)

- Restaurant
- Tavern/Night Club/Wine Bar
- Microbrewery/Brewpub
- Painting/Craft Studio
- Other (describe) \_\_\_\_\_

**8. Was this premise licensed for alcohol sales/consumption during the past license year?**

**Yes**  *If yes, please contact the Community and Economic Development Department at 832-6468 about obtaining a copy of an existing Special Use Permit and related requirements that may run with property.*

**No** \_\_\_\_\_ *If no, please contact the Community and Economic Development Department at 832-6468 about obtaining a Special Use Permit. A Special Use Permit may be required for your business activity prior to the issuance of a Liquor License, pursuant to the City of Appleton Zoning Ordinance.*

**9. If alcohol sales were a previous use in this building, when did the operation cease?**

\_\_\_\_\_ months ago.

**10. Seating capacity:** Inside \_\_\_\_\_ Outside \_\_\_\_\_

**11. Operating hours (Inside the building):** \_\_\_\_\_

**Operating hours (Outdoor seating areas):** \_\_\_\_\_

**12. Employees/Staff**

Number of floor personnel \_\_\_\_\_ Number of door checkers \_\_\_\_\_

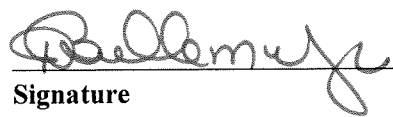
**13. In general, state the size and operational details of the proposed establishment:**

a. Gross floor building area of the premises to be licensed: \_\_\_\_\_ square feet.

b. Gross outdoor seating areas of the premises to be licensed: \_\_\_\_\_ square feet.

c. Below, identify the operational details of the proposed establishment:

BLAZE Bourbon and Whiskey Bar located within Appleton Red Lion Paper Valley Hotel  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

  
**Signature**

8/15/2020  
**Date**

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

Submit to municipal clerk.

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

To the governing body of:  Town  Village of APPLETON County of OUTAGAMIE  
 City

The undersigned duly authorized officer/member/manager of DRIFTWOOD SPECIAL SERVICING, 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 APPLETON RED LION PAPER VALLEY HOTEL  
(Trade Name)

located at 333 W. COLLEGE AVENUE, APPLETON, WI 54911

appoints LINDA GARVEY  
(Name of Appointed Agent)

105 Alexander Dr. Neenah, WI 54956  
(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).  
Appleton Holdings

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? 00 YRS

Place of residence last year 105 Alexander Dr. Neenah, WI 54956

For: DRIFTWOOD SPECIAL SERVICING, LLC  
(Name of Corporation / Organization / Limited Liability Company)

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

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

### ACCEPTANCE BY AGENT

I, Linda Garvey, 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 Garvey 10-14-2020 Agent's age 00  
(Signature of Agent) (Date)

105 Alexander Dr. Neenah, WI 54956 Date of birth 0000  
(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 \_\_\_\_\_ by \_\_\_\_\_ Title \_\_\_\_\_  
(Date) (Signature of Proper Local Official) (Town Chair, Village President, Police Chief)

600

# Original Alcohol Beverage Retail License Application

(Submit to municipal clerk.)

For the license period beginning: \_\_\_\_\_ ending: 06-30-2021  
(mm dd yyyy) (mm dd yyyy)

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

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

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

Applicant's Wisconsin Seller's Permit Number ●●●●●●●●●●●●●●●●●●●●	
FEIN Number ●●●●●●	
TYPE OF LICENSE REQUESTED	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$ 100
<input type="checkbox"/> Class C wine	\$
<input type="checkbox"/> Class A liquor	\$
<input type="checkbox"/> Class A liquor (cider only)	\$ N/A
<input checked="" type="checkbox"/> Class B liquor	\$ 500
<input type="checkbox"/> Reserve Class B liquor	\$
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$ 20
<b>TOTAL FEE</b>	<b>\$</b>

Name (individual / partners give last name, first, middle; corporations / limited liability companies give registered name)  
DRIFTWOOD SPECIAL SERVICING, LLC

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 full name and place of residence of each person.

President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
BUDDEMEYER	DAVID	A	3264 WYMBERLY DR, JUPITER, FL 33458
Vice President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
DIAZ	CHARLES	M	528 OVERLOOK DR, N PALM BCH, FL 33408
Secretary / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Agent Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Garvey	Linda	Marie	105 Alexander Dr. Neenah, WI 54956
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

1. Trade Name APPLETON RED LION PAPER VALLEY Business Phone Number 920-733-8000

2. Address of Premises 333 W. COLLEGE AVENUE Post Office & Zip Code 54911

3. 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.)  
CLUBHOUSE BAR AND STORAGE IN BASEMENT




4. Legal description (omit if street address is given above): \_\_\_\_\_

5. (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? APPLETON HOLDINGS, LLC

6. Is individual, partners or agent of corporation/limited liability company subject to completion of the responsible beverage server training course for this license period? **If yes, explain** .....  Yes  No
7. Is the applicant an employe or agent of, or acting on behalf of anyone except the named applicant? .....  Yes  No  
**If yes, explain.**
8. Does any other alcohol beverage retail licensee or wholesale permittee have any interest in or control of this business? **If yes, explain** .....  Yes  No
9. (a) **Corporate/limited liability company applicants only:** Insert state DE and date 01/30/20 of registration.
- (b) Is applicant corporation/limited liability company a subsidiary of any other corporation or limited liability company? **If yes, explain** .....  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? **If yes, explain.**  Yes  No
10. Does the applicant understand they must register as a Retail Beverage Alcohol Dealer with the federal government, Alcohol and Tobacco Tax and Trade Bureau (TTB) by filing (TTB form 5630.5d) before beginning business? [phone 1-877-882-3277] .....  Yes  No
11. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776] .....  Yes  No
12. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? .....  Yes  No

**READ CAREFULLY BEFORE SIGNING:** Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000. Signer agrees to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants, or one member of a partnership applicant must sign; one corporate officer, one member/manager of Limited Liability Companies must sign.) Any lack of access to any portion of a licensed premises during inspection will be deemed a refusal to permit inspection. Such refusal is a misdemeanor and grounds for revocation of this license.

Contact Person's Name (Last, First, M.I.) Buddemeyer, David, A	Title/Member President	Date 06/04/20
Signature 	Phone Number 	Email Address 

**TO BE COMPLETED BY CLERK**

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



# City of Appleton

## Liquor License Questionnaire

1. **Name of Applicant:** Driftwood Special Servicing, LLC

2. **Name of Business:** Appleton Red Lion Paper Valley Hotel - The Clubhouse Sports Pub

(Check Applicable Box(s) to identify primary business activity)

- Restaurant
- Tavern/Night Club/Wine Bar
- Microbrewery/Brewpub
- Painting/Craft Studio
- Other (describe) \_\_\_\_\_

3. **Address of Business:** 333 W. College Avenue, Appleton, WI 54911

4. **Have you or any member of your organization ever been convicted of a misdemeanor or ordinance violation?** Yes \_\_\_\_\_ No ✓

**AND/OR been convicted of a felony?** Yes \_\_\_\_\_ No ✓

**If yes to either question, please explain in detail below:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

5. **List all partners, shareholders or investors of your business. Include full name, middle initial and date of birth. Please use additional sheets if necessary.**

David	A.	Buddemeyer	● / ● / ●●
First name	M.I.	Last name	Date of Birth
Charles	M.	Diaz	● / ● / ●●
First name	M.I.	Last name	Date of Birth
			/ /
First name	M.I.	Last name	Date of Birth
			/ /
First name	M.I.	Last name	Date of Birth

6. **Name of person/corporation you are buying the premise and equipment from?**

Name: Appleton Holdings LLC

First name Middle Initial Last name

Address: 12 Tidewater Drive Ormond Beach FL 32174

City State ZIP



**7. What was the previous name and primary nature of the business operating at this location?**

**Name:** Appleton Red Lion Paper Valley Hotel - The Clubhouse Sports Pub

(Check Applicable Box(s) to identify primary business activity)

- Restaurant
- Tavern/Night Club/Wine Bar
- Microbrewery/Brewpub
- Painting/Craft Studio
- Other (describe) \_\_\_\_\_

**8. Was this premise licensed for alcohol sales/consumption during the past license year?**

**Yes**  *If yes, please contact the Community and Economic Development Department at 832-6468 about obtaining a copy of an existing Special Use Permit and related requirements that may run with property.*

**No** \_\_\_\_\_ *If no, please contact the Community and Economic Development Department at 832-6468 about obtaining a Special Use Permit. A Special Use Permit may be required for your business activity prior to the issuance of a Liquor License, pursuant to the City of Appleton Zoning Ordinance.*

**9. If alcohol sales were a previous use in this building, when did the operation cease?**

\_\_\_\_\_ months ago.

**10. Seating capacity:** Inside \_\_\_\_\_ Outside \_\_\_\_\_

**11. Operating hours (Inside the building):** \_\_\_\_\_

**Operating hours (Outdoor seating areas):** \_\_\_\_\_

**12. Employees/Staff**

Number of floor personnel \_\_\_\_\_ Number of door checkers \_\_\_\_\_

**13. In general, state the size and operational details of the proposed establishment:**

a. Gross floor building area of the premises to be licensed: \_\_\_\_\_ square feet.

b. Gross outdoor seating areas of the premises to be licensed: \_\_\_\_\_ square feet.

c. Below, identify the operational details of the proposed establishment:

The Clubhouse Sport Pub located within Appleton Red Lion Paper Valley Hotel

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---

  
Signature

8/15/2020  
Date

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

Submit to municipal clerk.

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

To the governing body of:  Town  Village  City of APPLETON County of OUTAGAMIE

The undersigned duly authorized officer/member/manager of DRIFTWOOD SPECIAL SERVICING, 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 APPLETON RED LION PAPER VALLEY HOTEL  
*(Trade Name)*

located at 333 W. COLLEGE AVENUE, APPLETON, WI 54911

appoints LINDA GARVEY  
*(Name of Appointed Agent)*

105 Alexander Dr. Neenah, WI 54956  
*(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).  
Appleton Holdings

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 yrs

Place of residence last year 105 Alexander Dr. Neenah, WI 54956

For: DRIFTWOOD SPECIAL SERVICING, LLC  
*(Name of Corporation / Organization / Limited Liability Company)*

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

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

### ACCEPTANCE BY AGENT

I, Linda Garvey, 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 Garvey 10-14-2020 Agent's age       
*(Signature of Agent)* *(Date)*

105 Alexander Dr. Neenah, WI 54956 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 \_\_\_\_\_ by \_\_\_\_\_ Title \_\_\_\_\_  
*(Date)* *(Signature of Proper Local Official)* *(Town Chair, Village President, Police Chief)*

# Original Alcohol Beverage Retail License Application

(Submit to municipal clerk.)

For the license period beginning: \_\_\_\_\_ ending: \_\_\_\_\_  
(mm dd yyyy) (mm dd yyyy)

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

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

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

Applicant's Wisconsin Seller's Permit Number ●●●●●●●●●●●●●●●●	
FEIN Number ●●●●●●●●	
TYPE OF LICENSE REQUESTED	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$ 100
<input type="checkbox"/> Class C wine	\$
<input type="checkbox"/> Class A liquor	\$
<input type="checkbox"/> Class A liquor (cider only)	\$ N/A
<input checked="" type="checkbox"/> Class B liquor	\$ 500
<input type="checkbox"/> Reserve Class B liquor	\$
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$ ●
<b>TOTAL FEE</b>	\$

Name (Individual / partners give last name, first, middle; corporations / limited liability companies give registered name)  
DRIFTWOOD SPECIAL SERVICING, LLC

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 full name and place of residence of each person.

President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
<u>BUDEMEYER</u>	<u>DAVID</u>	<u>A</u>	<u>3264 WYMBERLY DR, JUPITER, FL 33458</u>
Vice President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
<u>DIAZ</u>	<u>CHARLES</u>	<u>M</u>	<u>528 OVERLOOK DR, N PALM BCH, FL 33408</u>
Secretary / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Agent Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
<u>Garvey</u>	<u>Linda</u>	<u>Marie</u>	<u>105 Alexander Dr. Neenah, WI 54956</u>
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

1. Trade Name FOX CITIES EXHIBITION CENTER Business Phone Number 920-733-8000  
 2. Address of Premises 355 W. LAWRENCE STREET Post Office & Zip Code 54911

3. 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.)

BEVERAGE SERVICE INSIDE EXHIBITION CENTER, OUTDOOR PLAZA AT STREET LEVEL,  
AND PATIO AREA AT EXHIBITION CENTER, PRE FUNCTION AREA




4. Legal description (omit if street address is given above): \_\_\_\_\_

5. (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? APPLETON HOLDINGS, LLC

6. Is individual, partners or agent of corporation/limited liability company subject to completion of the responsible beverage server training course for this license period? **If yes, explain** .....  Yes  No
7. Is the applicant an employe or agent of, or acting on behalf of anyone except the named applicant? .....  Yes  No  
**If yes, explain.**
8. Does any other alcohol beverage retail licensee or wholesale permittee have any interest in or control of this business? **If yes, explain** .....  Yes  No
9. (a) **Corporate/limited liability company applicants only:** Insert state DE and date 01/30/20 of registration.
- (b) Is applicant corporation/limited liability company a subsidiary of any other corporation or limited liability company? **If yes, explain** .....  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? **If yes, explain.**  Yes  No
10. Does the applicant understand they must register as a Retail Beverage Alcohol Dealer with the federal government, Alcohol and Tobacco Tax and Trade Bureau (TTB) by filing (TTB form 5630.5d) before beginning business? [phone 1-877-882-3277] .....  Yes  No
11. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776] .....  Yes  No
12. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? .....  Yes  No

**READ CAREFULLY BEFORE SIGNING:** Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000. Signer agrees to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants, or one member of a partnership applicant must sign; one corporate officer, one member/manager of Limited Liability Companies must sign.) Any lack of access to any portion of a licensed premises during inspection will be deemed a refusal to permit inspection. Such refusal is a misdemeanor and grounds for revocation of this license.

Contact Person's Name (Last, First, M.I.) Buddemeyer, David, A	Title/Member President	Date 06/04/20
Signature 	Phone Number 	Email Address 

**TO BE COMPLETED BY CLERK**

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



# City of Appleton Liquor License Questionnaire

1. Name of Applicant: Driftwood Special Servicing, LLC

2. Name of Business: Appleton Red Lion Paper Valley Hotel - Exhibition Center

(Check Applicable Box(s) to identify primary business activity)

- Restaurant
- Tavern/Night Club/Wine Bar
- Microbrewery/Brewpub
- Painting/Craft Studio
- Other (describe) Exhibition Center

3. Address of Business: 355 Lawrence St.  
333 W. College Avenue, Appleton, WI 54911

4. Have you or any member of your organization ever been convicted of a misdemeanor or ordinance violation? Yes \_\_\_\_\_ No ✓

AND/OR been convicted of a felony? Yes \_\_\_\_\_ No ✓

If yes to either question, please explain in detail below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. List all partners, shareholders or investors of your business. Include full name, middle initial and date of birth. Please use additional sheets if necessary.

David	A.	Buddemeyer	● / ● / ●●
First name	M.I.	Last name	Date of Birth
Charles	M.	Diaz	● / ● / ●●
First name	M.I.	Last name	Date of Birth
			/ /
First name	M.I.	Last name	Date of Birth
			/ /
First name	M.I.	Last name	Date of Birth

6. Name of person/corporation you are buying the premise and equipment from?

Name: Appleton Holdings LLC

First name Middle Initial Last name

Address: 12 Tidewater Drive Ormond Beach FL 32174  
City State ZIP



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

Submit to municipal clerk.

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

To the governing body of:  Town  
 Village of APPLETON County of OUTAGAMIE  
 City

The undersigned duly authorized officer/member/manager of DRIFTWOOD SPECIAL SERVICING, 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 APPLETON RED LION PAPER VALLEY HOTEL  
(Trade Name)

located at 333 W. COLLEGE AVENUE, APPLETON, WI 54911

appoints LINDA GARVEY  
(Name of Appointed Agent)

105 Alexander Dr. Neenah, WI 54956  
(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).  
Appleton Holdings

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 yrs

Place of residence last year 105 Alexander Dr. Neenah, WI 54956

For: DRIFTWOOD SPECIAL SERVICING, LLC  
(Name of Corporation / Organization / Limited Liability Company)

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

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

### ACCEPTANCE BY AGENT

I, Linda Garvey, 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 Garvey 10-14-2020 Agent's age 00  
(Signature of Agent) (Date)

105 Alexander Dr. Neenah, WI 54956 Date of birth 0000  
(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 \_\_\_\_\_ by \_\_\_\_\_ Title \_\_\_\_\_  
(Date) (Signature of Proper Local Official) (Town Chair, Village President, Police Chief)

# Auxiliary Questionnaire Alcohol Beverage License Application

Submit to municipal clerk.

Individual's Full Name (please print) (last name)		(first name)		(middle name)	
ACKERMAN		RUTH		K	
Home Address (street/route)		Post Office	City	State	Zip Code
1114 Melrose Ct #4		54952	Neenan	WI	54952
Home Phone Number		Age	Date of Birth	Place of Birth	
[Redacted]		[Redacted]	[Redacted]	Neenan WI	

The above named individual provides the following information as a person who is (check one):

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

which is making application for an alcohol beverage license.

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

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

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

Employer's Name	Employer's Address	Employed From	To
ROUNDYS SUPERMARKETS	875 E WISCONSIN AVE MKE WI		
Ruth K Ackerman	1114 Melrose Ct #4 Neenan WI 54952		

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

*Ruth K Ackerman*  
(Signature of Named Individual)



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

Submit to municipal clerk.

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

To the governing body of:  Town  Village of APPLETON County of WINNEBAGO  
 City

The undersigned duly authorized officer/member/manager of ULTIMATE MART, 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 PICK 'N SAVE #187

located at 511 W CALUMET ST APPLETON, WI 54915  
(Trade Name)

appoints RUTH ACKERMAN

1114 Melrose Ct #4 (Name of Appointed Agent) NeenaH 54956  
(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? 00

Place of residence last year 1114 Melrose Ct #4

For: ULTIMATE MART, LLC  
(Name of Corporation / Organization / Limited Liability Company)

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

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

### ACCEPTANCE BY AGENT

I, RUTH ACKERMAN, 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.

Ruth Ackerman 09-23-2020  
(Signature of Agent) (Date)

Agent's age 00

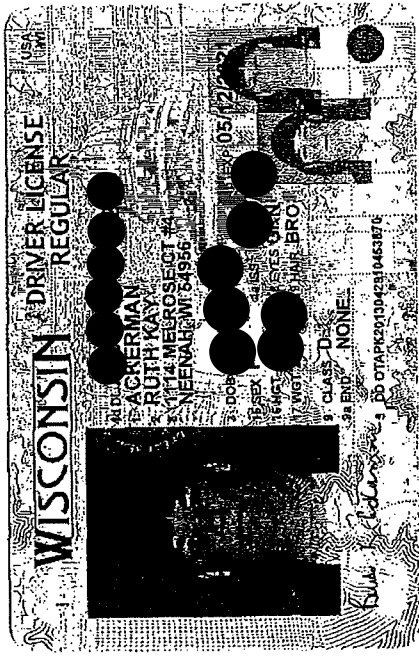
1114 Melrose Ct #4 NeenaH WI 54956  
(Home Address of Agent)

Date of birth 000000

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

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

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



**Beverage Operator's License**

Name: Ruth Ackerman

Address: [Redacted]

City/State/zip: [Redacted]

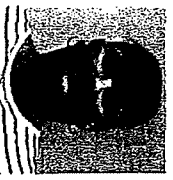


is hereby granted a license to handle the sale of fermented malt, liquors and light wines on any licensed premise in the City of Neenah.

This license expires: **06/30/2022**

*Stephane Chastock*

Stephane Chastock, Deputy Clerk



<b>CITY OF APPLETON POLICY</b>		<b>TITLE: MIRACLE LEAGUE FIELD - RENTAL AND FEE SCHEDULE POLICY</b>	
ISSUE DATE: August 19, 2009	LAST UPDATE: August 12, 2009		
POLICY SOURCE: Parks and Recreation Department		TOTAL PAGES: 5	
Reviewed by Attorney's Office Date: October 13, 2020	Parks and Recreation Committee Approval Date: October 22, 2014	Council Approval Date: November 5, 2014	

**I. Purpose:**

To provide a policy to authorize the Parks, Recreation and Facilities Management Department to equitably administer rules and regulations, policies, fees and charges and manage the schedule and use of the Miracle League Field and associated amenities for personal use, tournaments and/or community events.

**II. Policy:**

This policy authorizes the Parks, Recreation and Facilities Management Department to charge fees and schedule the use of the Miracle League Field and associated amenities within the rate structure and scheduling priorities established by the Parks and Recreation Committee and Common Council. To effectively schedule, manage, protect facilities, and promote the wise use of the Miracle League Field, this policy authorizes the Parks, Recreation and Facilities Management Director and/or designees to:

- Cancel and/or relocate any reservation that potentially threatens the integrity of the park and/or facility due to misrepresentation of information on the Facility Reservation Agreement, conditions of the facility or grounds would potentially create an unsafe situation, or if continued use of the facility by the group/organization may result in damage to the facility that is beyond the normal wear and tear of facility.
- Limit the number of weekend reservations for facilities for anyone or any group, organization or individuals that would dominate the use of a facility and/or restrict equal opportunities to reserve facilities by members of the public at large.
- Deny any facility reservation application if the expected attendance would exceed the safe capacity of the facility so as to endanger public health and safety, or compromise the condition of facilities and/or nearby facilities and/or natural resources.
- Enforce park rules, regulations, and policies.
- Require insurance coverage with limits established by the City Risk Manager, for activities or events that are beyond the scope of the normal and intended guidelines established by the Parks Recreation and Facilities Management Department.
- Require a security deposit and/or performance bond for activities or events that may impact the integrity of the facilities and require significant repairs to the facilities that

would limit the future use of the facilities.

### **III. Definitions:**

- Miracle League Field – This field is located in the northwest corner of the Appleton Memorial Park Ball Diamond complex.
- Category A – Local non-profit organizations that provide ball diamond related recreational services or provide services to individuals with physical, mental, or emotional disabilities to Appleton and the Fox Cities community.
- Category B – For-profit, other non-profit or private groups and organizations.
- Concessions/Sales/Exchange of Money – The sale of food, beverage and other associated products or the exchange of money at an event or program that is held in a city park and/or special area specifically reserved for that event or program.
- Late Reservation – Request for a reservation of city park facility and/or special area that is received less than ten (10) business days before the reservation date.
- Processing Fee – Fee charged to process a refund and/or cancellation request that is received before the reservation date.
- Special Event – Any planned occurrence on public property that exceeds the normal and ordinary use of the property, as defined within the City of Appleton's special event policy.

### **IV. Use of Miracle League Field:**

The use of the Miracle League Field is managed and maintained by the Parks, Recreation and Facilities Management Department and is available to individuals, groups and organizations for exclusive use for practice, league play, and tournaments. The following shall direct the use of athletic facilities:

- All park ordinances shall apply to use of athletic facilities.
- Any additions or modifications to the athletic facilities shall be approved in writing by the Parks, Recreation and Facilities Management Director or designee.
- Individuals, groups and organizations must obtain a permit from the Parks Recreation and Facilities Management Director or designee.
- The display of any advertising, signs, etc. must be approved by the Parks Recreation and Facilities Management Director or designee.
- Access to the athletic facilities will be limited to the times listed on the reservation request form.
- The overnight storage of equipment, supplies, vehicles, etc. is prohibited unless approved by the Parks, Recreation and Facilities Management Department Director or designee.
- No games shall begin before 8:00 A.M. or end after 11:00 P.M. unless approved by the Parks and Recreation Committee.
- The Parks Recreation and Facilities Management Director or designee reserves the right to cancel and/or relocate any reservation if it threatens the integrity of the park and/or athletic facilities due to misrepresentation of information on the reservation request, unsafe facility conditions or weather conditions, or if continued use of the

facility by the group/organization may result in damage to the facility that is beyond the normal wear and tear of facility.

## **V. Reservations:**

The reservation of Miracle League Field shall be directed by the following policies and procedures:

- The use by the Miracle League of the Fox Valley, Appleton Parks, Recreation and Facilities Management Department and other groups and/or organizations shall follow the Miracle League Field Use Policy.
- All groups, individuals and organizations reserving the Miracle League Field will be charged in accordance with the established rate schedule on file with the Parks, Recreation and Facilities Management Department or City Clerk. Reservations that meet certain criteria will be required to obtain a Special Events License.
- All reservations for the Miracle League Field shall submit the necessary payment with the reservation request. Full payment of the reservation fee shall be included with all other athletic facilities reservation requests. Reservations are not valid until a “Field Reservation Agreement” form has been signed by all parties and the required payments have been made.
- Organizations/groups that have reserved the Miracle League Field for special events shall have thirty (30) days after the date of the reservation to reserve the Miracle League Field for the same weekend and/or date for the following year. After thirty (30) days, the Parks, Recreation and Facilities Management Department will make the Miracle League Field available to other interested parties. The Miracle League Field schedule will be held open for events that meet “tournament rental fee” criteria for a period of 6 months to one year before the scheduled event. The Miracle League Field will be available for all events, including non-tournament events on a first-come, first-served basis beginning 6 months before the proposed date.
- All other reservations for the Miracle League Field are on a first-come, first-served basis and may be made no more than one (1) year in advance. Reservations for state, regional and/or national tournaments and/or events that must be scheduled more than one (1) year in advance may submit a written request to the Parks and Recreation Committee for approval.
- All applications for facility reservations must be made at least ten (10) business days in advance of the reservation date. Applications not made before this time period will be charged an additional \$20.00 for each reservation.
- Groups and/or organizations may be required to reserve pavilions and/or special areas if the Parks, Recreation and Facilities Management Department determines the event or activity warrants the additional reservations to minimize impact on other facility users or enhance the event.

## **VI. Scheduling Priorities:**

The Appleton Parks, Recreation and Facilities Management Department will schedule the Miracle League Field according to the following priorities:

1. The Miracle League of the Fox Valley will have the first opportunity to schedule regular programs (games, scheduled practices, instructional programs and scheduled tournaments) Monday through Friday from 4:00 PM to park closing and two weekend days between June 1 and August 15, before any other programs are scheduled with the approval of the Parks, Recreation and Facilities Management Department.
2. All Parks, Recreation and Facilities Management Department programs (games, scheduled practices, matches, camps, instructional programs) will be scheduled after the Miracle League program and before any other programs are scheduled.
3. Local non-profit organizations (Category A organizations) that provide services to individuals with physical, mental, or emotional disabilities to Appleton and the Fox Cities community will be scheduled after programs offered by the Miracle League of the Fox Valley and the Parks, Recreation and Facilities Management Department.
4. Programs sponsored by schools and other local non-profit organizations that offer youth sport programs.

## **VII. Cancellation/Refunds:**

A refund of the rental fee will be made if the reservation for the Miracle League Field is cancelled more than 90 days in advance of the event. Refunds are subject to a \$10.00 processing fee.

A full refund of the rental fee will be made if the reservation is cancelled by the Parks Recreation and Facilities Management Department due to park closings, construction activities, etc. These refunds are not subject to the \$10.00 processing fee.

**Miracle League Field- Fees & Charges**  
(Effective January 1, 2021)

The Miracle League of the Fox Valley - \$1.00 for each yearly season.

*Ball Diamond Rental Fees –*

<u>Category A</u>	<u>Category B</u>
Daily..... \$100.00 per day	Daily ..... \$150.00 per day
West Concession Stand \$50.00 per day	West Concession Stand \$100.00 per day

Full payment for athletic fields are required at the same time the athletic field reservation form is submitted.

**Hourly Ball Diamond Rental Fees –**

<u>Category A</u>	<u>Category B</u>
Ball Diamond Rental Fee ... \$20.00 per hour	\$25.00 per hour

Other permits that must be obtained at the Appleton Parks, Recreation and Facilities Management Department office at least 5 working days prior to the event:

Tents over 200 square feet .....	\$15.00 per tent, per day
Fire Department tent inspection .....	\$25.00
Selling or serving concessions .....	\$25.00 per event

**This policy became effective on January 1, 2015, and shall remain in effect until it is modified, changed, and/or repealed.**

<b>CITY OF APPLETON POLICY</b>		<b>TITLE: MIRACLE LEAGUE FIELD - RENTAL AND FEE SCHEDULE POLICY</b>	
ISSUE DATE: August 19, 2009	LAST UPDATE: August 12, 2009	<del>TEXT NAME:</del>	
POLICY SOURCE: Parks and Recreation Department		TOTAL PAGES: 5	
Reviewed by Attorney's Office Date: <del>October 13, 2020</del> <del>September 15,</del> <del>2014</del>	Parks and Recreation Committee Approval Date: October 22, 2014	Council Approval Date: November 5, 2014	

**I. Purpose:**

To provide a policy to authorize the Parks, Recreation and Facilities Management Department to equitably administer rules and regulations, policies, fees and charges and manage the schedule and use of the Miracle League Field and associated amenities for personal use, tournaments and/or community events.

**II. Policy:**

This policy authorizes the Parks, Recreation and Facilities Management Department to charge fees and schedule the use of the Miracle League Field and associated amenities within the rate structure and scheduling priorities established by the Parks and Recreation Committee and Common Council. To effectively schedule, manage, protect facilities, and promote the wise use of the Miracle League Field, this policy authorizes the Parks, Recreation and Facilities Management Director and/or designees to:

- Cancel and/or relocate any reservation that potentially threatens the integrity of the park and/or facility due to misrepresentation of information on the Facility Reservation Agreement, conditions of the facility or grounds would potentially create an unsafe situation, or if continued use of the facility by the group/organization may result in damage to the facility that is beyond the normal wear and tear of facility.
- Limit the number of weekend reservations for facilities for anyone or any group, organization or individuals that would dominate the use of a facility and/or restrict equal opportunities to reserve facilities by members of the public at large.
- Deny any facility reservation application if the expected attendance would exceed the safe capacity of the facility so as to endanger public health and safety, or compromise the condition of facilities and/or nearby facilities and/or natural resources.
- Enforce park rules, regulations, and policies.
- Require insurance coverage with limits established by the City Risk Manager, for activities or events that are beyond the scope of the “normal and intended guidelines” established by the Parks Recreation and Facilities Management Department.



- Require a security deposit and/or performance bond for activities or events that may impact the integrity of the facilities and require significant repairs to the facilities that would limit the future use of the facilities.

### III. Definitions:

- Miracle League Field – This field is located in the northwest corner of the Appleton Memorial Park Ball Diamond complex.
- Category A – Local non-profit organizations that provide ball diamond related recreational services or provide services to individuals with physical, mental, or emotional disabilities to Appleton and the Fox Cities community.
- Category B – For-profit, other non-profit or private groups and organizations.
- Concessions/Sales/Exchange of Money - The sale of food, beverage and other associated products or the exchange of money at an event or program that is held in a city park and/or special area specifically reserved for that event or program.
- Late Reservation - Request for a reservation of city park facility and/or special area that is received less than ~~five (5)~~ ten (10) business days before the reservation date.
- ~~Normal and Ordinary Use of City of Appleton Parks—Is defined by guidelines established and published by the Parks, Recreation Facilities Management Department.~~
- Processing Fee - Fee charged to process a refund and/or cancellation request that is received before the reservation date.
- ~~Session—A designated period of time that is used to determine the rental fee for the ball diamonds at Appleton Memorial Park.~~
- Special Event – An event or activity that meets the City of Appleton’s requirements for a special event activity, is held in a city park and/or special area, and exceeds the normal and ordinary use of the park and/or special area. Any planned occurrence on public property that exceeds the normal and ordinary use of the property, as defined within the City of Appleton’s special event policy.

### IV. Use of Miracle League Field:

The use of the Miracle League Field is managed and maintained by the Parks, Recreation and Facilities Management Department and is available to individuals, groups and organizations for exclusive use for practice, league play, and tournaments. The following shall direct the use of athletic facilities:

- All park ordinances shall apply to use of athletic facilities.
- Any additions or modifications to the athletic facilities shall be approved in writing by the Parks, Recreation and Facilities Management Director or designee.
- Individuals, groups and organizations must obtain a permit from the Parks Recreation and Facilities Management Director or designee.
- The display of any advertising, signs, etc. must be approved by the Parks Recreation and Facilities Management Director or designee.
- Access to the athletic facilities will be limited to the times listed on the reservation request form.

- The overnight storage of equipment, supplies, vehicles, etc. is prohibited unless approved by the Parks, ~~and~~ Recreation ~~and~~ Facilities Management Department Director or designee.
- No games shall begin before 8:00 A.M. or end after 11:00 P.M. unless approved by the Parks and Recreation Committee.
- The Parks Recreation and Facilities Management Director or designee reserves the right to cancel and/or relocate any reservation if it threatens the integrity of the park and/or athletic facilities due to misrepresentation of information on the reservation request, unsafe facility conditions or weather conditions, or if continued use of the facility by the group/organization may result in damage to the facility that is beyond the normal wear and tear of facility.

## V. Reservations:

The reservation of Miracle League Field shall be directed by the following policies and procedures:

- The use by the Miracle League of the Fox Valley, Appleton Parks, Recreation and Facilities Management Department and other groups and/or organizations shall follow the Miracle League Field Use Policy.
- All groups, individuals and organizations reserving the Miracle League Field will be charged in accordance with the established rate schedule on file with the Parks, Recreation and Facilities Management Department or City Clerk. Reservations that meet certain criteria will be required to obtain a Special Events License.
- All reservations for the Miracle League Field shall submit the necessary ~~deposit~~ **payment** with the reservation request. Full payment of the reservation fee shall be included with all other athletic facilities reservation requests. Reservations are not valid until a “Field Reservation Agreement” form has been signed by all parties and the required ~~deposits~~/payments have been made.
- Organizations/groups that have reserved the Miracle League Field ~~and other athletic facilities~~ for special events shall have thirty (30) days after the date of the ~~special event reservation~~ to reserve the Miracle League Field ~~and other athletic facilities~~ for the same weekend and/or date for the following year. After thirty (30) days, the Parks, Recreation and Facilities Management Department will make the Miracle League ~~Field~~ ~~Field and other athletic facilities~~ available to other interested parties. ~~The reservation may be cancelled if the appropriate facility rental fees are not paid within 30 days of receipt of invoice.~~
- The Miracle League Field schedule will be held open for events that meet “tournament rental fee” criteria for a period of 6 months to one year before the scheduled event. The Miracle League Field will be available for all events, including non-tournament events on a first-come, first-served basis beginning 6 months before the proposed date.
- All other reservations for the Miracle League Field are on a first-come, first-served basis and may be made no more than one (1) year in advance. Reservations for state, regional and/or national tournaments and/or events that must be scheduled more than

one (1) year in advance may submit a written request to the Parks and Recreation Committee for approval.

- All applications for facility reservations must be made at least ~~five-ten~~ (\$10) business days in advance of the reservation date. Applications not made before this time period will be charged an additional \$20.00 for each reservation.
- Groups and/or organizations may be required to reserve pavilions and/or special areas if the Parks, Recreation and Facilities Management Department determines the event or activity warrants the additional reservations to minimize impact on other facility users or enhance the event.

## VI. Scheduling Priorities:

The Appleton Parks, Recreation and Facilities Management Department will schedule the Miracle League Field according to the following priorities:

1. The Miracle League of the Fox Valley will have the first opportunity to schedule regular programs (games, scheduled practices, instructional programs and scheduled tournaments) Monday through Friday from 4:00 PM to park closing and two weekend days between June 1 and August -15, before any other programs are scheduled with the approval of the Parks, Recreation and Facilities Management Department.
2. All Parks, Recreation and Facilities Management Department programs (games, scheduled practices, matches, camps, instructional programs) will be scheduled after the Miracle League program and before any other programs are scheduled.
3. Local non-profit organizations (Category A organizations) that provide services to individuals with physical, mental, or emotional disabilities to Appleton and the Fox Cities community will be scheduled after programs offered by the Miracle League of the Fox Valley and the Parks, Recreation and Facilities Management Department.
4. Programs sponsored by schools and other local non-profit organizations that offer youth sport programs.

## VII. Cancellation/Refunds:

A ~~full~~ refund of the ~~deposit/~~ rental fee will be made if the reservation for the Miracle League Field is cancelled more than 90 days in advance of the event. ~~A full refund of the deposit/rental fee for the cancellation of the Miracle League Field less than 90 days in advance of the event will be made only if the facility can be rented to another party for the date canceled.~~ Refunds are subject to a \$10.00 processing fee.

A full refund of the rental fee will be made if the reservation is cancelled by the Parks Recreation and Facilities Management Department due to park closings, construction activities, etc. These refunds are not subject to the \$10.00 processing fee.

**Miracle League Field- Fees & Charges**  
(Effective January 1, ~~2015~~ 2021)

The Miracle League of the Fox Valley - \$1.00 for each yearly season.

~~Session~~ *Ball Diamond Rental Fees –*

<u>Category A</u>	<u>Category B</u>
<del>Session .....</del> \$50.00 per session	<del>Session .....</del> \$75.00 per session
<del>Daily.....</del> \$100.00 per day	<del>Daily .....</del> \$150.00 per day
<del>West Concession Stand</del> \$50.00 per day	<del>West Concession Stand</del> \$100.00 per day

~~Sessions are defined as:~~

- ~~———— Morning Session — 7:00 AM — Noon~~
- ~~———— Afternoon Session — Noon — 5:00 PM~~
- ~~———— Evening Session — 5:00 PM to Close~~
- ~~———— **Session rental includes Facility Supervisor, field preparation and use of concession stand in the west restroom facility.**~~

Full payment for athletic fields are required at the same time the athletic field reservation form is submitted.

**Hourly Ball Diamond Rental Fees –**

	<u>Category A</u>	<u>Category B</u>
Ball Diamond Rental Fee ...	<del>\$15-20.00</del> per hour	<del>\$20</del> 25.00 per hour
Concession Stand	<del>\$ 5.00</del> per hour	<del>\$10.00</del> per hour
West Restroom Facility		
Facility Supervisor (AMP)...	<del>\$10.00</del> per hour	<del>\$15.00</del> per hour

~~**Ball Diamond Preparation Fees – (Other than tournament rental)**~~

- ~~———— Weekday preparation without overtime.....~~ No Fee
- ~~———— Preparation beyond regular hours and Saturdays ...~~ \$35.00 per hour, per person
- ~~———— Preparation Sunday and Holidays .....~~ \$45.00 per hour, per person

Other permits that must be obtained at the Appleton Parks, Recreation and Facilities Management Department office at least 5 working days prior to the event:

- Tents over 200 square feet ..... \$15.00 per tent, per day
- Fire Department ~~inspection of the tent~~ inspection..... \$15-25.00 per tent
- Selling or serving concessions ..... \$20 25.00 per event

This policy ~~shall become~~became effective on January 1, 2015-~~2021~~, and shall remain in effect until it is modified, changed, and/or repealed.





*"...meeting community needs...enhancing quality of life."*

**PARKS, RECREATION & FACILITIES  
MANAGEMENT**

1819 E. Witzke Boulevard  
Appleton, Wisconsin 54911-8401  
(920) 832-3915 FAX (920) 993-3103  
tom.flick@appleton.org

## Memorandum

**To:** Parks and Recreation Committee  
**From:** Dean Gazza, Parks, Recreation and Facilities Management Department  
**Date:** November 9, 2020  
**Re:** Action Item: Request Approval of Reid Golf Course 2021 Rates Policy

---

Attached is the proposed 2021 Reid Golf Course Rates Policy that outlines the daily fees and pass rates for 2021. The 2021 Reid Golf Course Rates Policy is consistent with the policy adopted by the Committee and Council for 2020.

The policy continues to include a Discount Card that provides a 15% discount on daily fees and removes the afternoon twilight time restriction of 1pm-4pm and weekend twilight time restriction of 4pm-close. The twilight start times are fluid and can change based on demand for tee times. Additional language is also proposed to further define cart rentals are based on double occupancy.

The proposed 2021 golf rates include a \$1.00 increase to twilight unlimited golf riding.

The Parks, Recreation, and Facilities Management Department is requesting approval of the 2021 Reid Golf Course Rates Policy at this time to begin planning for the 2021 season.

Please feel free to contact me at (920) 832-5572 or [dean.gazza@appleton.org](mailto:dean.gazza@appleton.org) if you need additional information or have questions.

<b>CITY OF APPLETON POLICY</b>		<b>TITLE: 2021 REID GOLF COURSE RATES POLICY</b>	
ISSUE DATE: Day of Council Adoption		LAST UPDATE: December 2008, December 2010, December 2011, September 2012, September 2013, August 2014 October 2015, November 2016, November 2017, November 2018, October 2019	LOCATION: J:\Department\Administration\Policies\ Golf Course
POLICY SOURCE: Parks and Recreation Department		TOTAL PAGES: 5	
Reviewed by Attorney's Office Date: October 28 <sup>th</sup> , 2020	Parks and Recreation Committee Approval Date:	Council Approval Date:	

**I. PURPOSE:**

The Appleton Parks, Recreation and Facilities Management Department operates Reid Golf Course to maintain open space and provide for the recreational needs of the Community. The adoption of the rates outlined in this policy provides additional recreational opportunities to the members of the public. In addition, these rates shall provide revenues to meet operational, administrative and debt service expenses. The policy also contains procedures regarding refunds and coupon/pass upgrades that will provide additional golf opportunities, secure additional revenues for the City of Appleton and increase customer satisfaction.

**II. POLICY:**

It is the policy of the City of Appleton to establish daily green fees, discount cards and annual pass rates to meet changing community and participant interests and secure revenues to meet operational, administrative and debt service needs of the golf course. All daily green fees, discount cards and annual pass rates shall be established by the Parks, Recreation and Facilities Management Department and presented to the Parks and Recreation Committee and Council for annual review and adoption. Special and/or seasonal rates shall be established by the Parks, Recreation and Facilities Management Department to address current market conditions, changing competition, local and national trends, seasonal opportunities, golf course conditions, etc.

**III. DEFINITIONS:**

1. Discount Card – Provides 15% discount on regular green fees
2. Weekday – Monday through Friday
3. Weekend – Saturday, Sunday and holidays

4. Dependent - Child age 18 and under, for family passes only
5. Junior – Age 18 and under
6. Junior Associate – Age 19 to 24
7. Associate – Age 25 to 40
8. Adult – Age 41 to 61
9. Senior – Age 62 and up
10. Family – All persons currently residing at the same address who are directly related (mother, father, son, daughter), or are foster children. Families are limited to two adults and the dependents and/or foster children.
11. Guest Round – A free round of golf provided to a guest of Annual pass holder.
12. New Pass Holder – individual and/or family who have not purchased an annual pass the previous year.
13. Business Pass – Pass purchased by businesses and companies for use by employees, business guests, etc. The Business Pass includes a foursome for one tee time and two carts per day.

#### **IV. DISCUSSION:**

1. Weekday daily fees will be charged Monday through Friday, except holidays.
2. Weekend daily fees will be charged Saturdays, Sundays and all holidays.
3. A Weekday Pass:
  - a. Is available for 9-hole or 18-hole play.
  - b. Can be used anytime Monday through Friday.
  - c. Can be used for league play Monday through Friday.
  - d. Cannot be used for tournaments, outings and/or special events.
4. An Associate, Junior Associate, Adult, and Family Annual Pass:
  - a. Is available for 9-hole or 18-hole play.
  - b. Can be used anytime Monday through Sunday and holidays based on availability.
  - c. Can be used for league play Monday through Friday.
  - d. Can be used for tournaments, outings and/or special events.
5. A Junior Annual Pass:
  - a. Is available for 9-hole or 18-hole play.
  - b. Can be used anytime Monday through Friday.
  - c. Can be used Saturdays, Sundays and holidays after 2:00 PM
  - d. Can be used for tournaments, outings and special events.
6. A Junior Summer Pass:
  - a. Is available for 9 or 18 hole play.
  - b. Can be used from Memorial Day to Labor Day only.
  - c. Can be used Monday through Friday from 6:00 am to 3:00 pm.
  - d. Can be used Saturdays, Sundays and holidays after 2:00 PM.
  - e. Cannot be used for tournaments, outings, and/or special events.
7. A New Pass Holder (Weekday or Annual) can purchase a pass for the following year at the end of the current golf season and the pass can be used for the remainder of the current golf season and the entire following golf season. The use of the Weekday and/or



Annual Pass for the remainder of the current golf season will be consistent with #4, #5 and #6 above.

8. The Discount Card is available:
  - a. Provides a 15% discount on all regular green fees.
  - b. Cannot be used for tournaments, outings and/or special events.
9. Discount Cards, Special, Weekday and Annual Passes cannot be transferred to another individual.
10. The Family Annual Pass provides the benefits listed in #5 above to the pass holder and family members. An adult family member must accompany a minor child/children when a Family Annual Pass is used.
11. The Business Pass allows the company and/or business to schedule one (1) foursome for one tee time per day during the golf season and also includes two (2) carts. The company and/or business must schedule the tee time for the foursome with the Pro Shop office at least 24 hours before the tee time by the designated business representative(s). The Business Pass cannot be used for outings or tournaments.
12. The Guest Rounds provided to annual pass holders can only be used when the guest is accompanied by the pass holder. Junior guest passes are only redeemable for juniors.
13. The Guest Rounds are good for either 9-hole or 18-hole rounds. All guest passes are redeemable based on which golf pass was purchased, annual vs. weekday.
14. All Discount Cards, Coupon Books, Weekday and Annual Passes expire at the end of the season for which they were purchased.
15. Twilight rates allow for unlimited play from the established start time until the course closes.
16. Cart rental is based on double occupancy when applicable, including annual individual cart pass.
17. There will be no refunds issued for passes, coupon books or discount cards. Exceptions may be granted in hardship cases by the Parks and Recreation Committee and City Council.

**REID GOLF COURSE – Proposed Fees**

<b>WEEKDAY DAILY FEES</b>	<b>2017</b>	<b>2018</b>	<b>2019</b>	<b>2020</b>	<b>2021</b>	<b>Net</b>
Adult 9	\$17.00	\$17.00	\$17.00	\$17.00	\$17.00	-
Adult 18	\$28.00	\$28.00	\$28.00	\$28.00	\$28.00	-
Senior 9	\$15.00	\$15.00	\$15.00	\$15.00	\$15.00	-
Senior 18	\$24.00	\$24.00	\$24.00	\$24.00	\$24.00	-
Junior w/ restrictions	\$10.00	\$10.00	\$10.00	\$10.00	\$10.00	-
<b>WEEKEND DAILY FEES</b>						
Adult/Junior/Senior 9	\$19.50	\$19.00	\$19.00	\$20.00	\$20.00	-
Adult/Junior/Senior 18	\$31.00	\$31.00	\$31.00	\$31.00	\$31.00	-
<b>REPLAY RATES</b>						
Walking	\$15.00	\$15.00	\$15.00	\$15.00	\$15.00	-
Riding	\$25.00	\$25.00	\$25.00	\$25.00	\$25.00	-
<b>TWILIGHT (unlimited golf)</b>						
Walking	\$11.00	\$11.00	\$11.00	\$12.00	\$12.00	-
Riding	\$22.00	\$22.00	\$22.00	\$23.00	\$24.00	<b>\$1</b>
<b>AFTERNOON TWILIGHT Fri, Sat &amp; Sun</b>						
9 Holes – walking	\$15.00	\$15.00	\$15.00	\$15.00	\$15.00	-
18 Holes – walking	\$24.00	\$24.00	\$24.00	\$24.00	\$24.00	-
<b>DISCOUNT CARDS</b>						
Adults/Seniors	\$31.50	\$31.50	\$31.50	\$31.65	\$31.65	-
<b>SPECIALS</b>						
Junior Summer Pass	\$150	\$150	\$150	\$150	\$150	-
<b>WEEKDAY PASSES (Monday-Friday Only)</b>						
Junior	\$175	\$175	\$175	\$175	\$175	-
Adult	\$815	\$815	\$815	\$815	\$815	-
Senior	\$660	\$660	\$660	\$660	\$660	-
<b>ANNUAL PASSES</b>						
Junior	\$200	\$200	\$200	\$200	\$200	-
Junior Associate	-	\$350	\$350	\$350	\$350	-
Associate	\$735	\$735	\$735	\$735	\$735	-
Adult	\$1105	\$1050	\$1050	\$1050	\$1050	-
Senior	\$790	\$800	\$800	\$800	\$800	-
Family	\$1155	\$1155	\$1155	\$1200	\$1200	-
Business	\$2625	\$2625	\$2625	\$2625	\$2625	-

*\*Tax included on daily fees and annual passes\**

**Returning Pass Holder Loyalties**

**2017 Pass Sales**

- Purchase pass in 2016 and play remainder of year with next year's pass
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ISSUE DATE: Day of Council Adoption	LAST UPDATE: December 2008, December 2010, December 2011, September 2012, September 2013, August 2014 October 2015, November 2016, November 2017, November 2018, October 2019	<u>LOCATION TEXT NAME:</u> J:\Department\Administration\Policies\ Golf Course	
POLICY SOURCE: Parks and Recreation Department		TOTAL PAGES: 5	
Reviewed by Attorney's Office Date: <del>October 28<sup>th</sup>, 2020</del> <del>September 24, 2019</del>	Parks and Recreation Committee Approval Date: <del>October 7, 2019</del>	Council Approval Date: <del>October 16, 2019</del>	

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<b>WEEKEND TWILIGHT Fri, Sat &amp; Sun 4:00-Close</b>						
Walking	-	-	-	<del>\$15.00</del>	-	-
Riding	-	-	-	<del>\$26.00</del>	-	-
<b>AFTERNOON SUPER TWILIGHT Fri, Sat &amp; Sun 1-4 PM</b>						
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# MEMORANDUM

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“...meeting community needs...enhancing quality of life.”

TO: Dean Gazza, Director of Parks, Rec, Facilities and Grounds

FROM: Jessica Titel, Principal Planner

DATE: November 5, 2020

RE: Request to Install Oversized Wooden Letters Spelling “HOPE” within Houdini Plaza

The Appleton Public Arts Committee met on November 5, 2020 and recommended approval of the request from Creative Downtown Appleton Inc. to install oversized wooden letters spelling “HOPE” on City-owned property located within Houdini Plaza at 121 W. College Avenue (Tax Id #31-2-0065-00) to be anchored into a base in the grass along the front angled walkway **as shown on the attached maps and subject to the following conditions.**

1. Agreement between the applicant and the City will be prepared by the City’s Legal Services Department and shall be executed prior to installation. This agreement will memorialize the expectations of the parties including the location of the art, installation and insurance requirements, maintenance, liability, indemnification, and the like.
2. Per the Art in Public Places Policy, any artwork signage shall meet the parameters set forth in Zoning Code Section 23-531(e), which allows each artwork one plaque/sign not to exceed nine square feet in size.
3. Applicant and/or any contractors shall provide proof of minimum liability insurance to meet City requirements, prior to installation.
4. Upon completion of the installation, a structural/professional engineer shall provide certification that the artwork was installed according to specifications and meets required structural standards.
5. The applicant shall coordinate with Parks, Recreation and Facilities Management to determine the exact location of the structure. PRFM shall be onsite for the installation of the structure.

6. Applicant shall contact Digger's Hotline for underground utility locates and Parks, Recreation and Facilities Management for underground sprinkler line locates prior to any site work commencing.
7. Applicant is required to fully restore the grass and/or repair any damage that occurs as a result of this installation.
8. Installation will occur as soon as practical after all approvals are received and the Public Art Agreement is fully executed. HOPE structure shall be removed, and the site fully restored, no later than March 31, 2021.

Per the Art in Public Places Policy, the recommendation from the Appleton Public Arts Committee is forwarded to the committee of jurisdiction, in this case, the Parks and Recreation Committee. Please place this item on the agenda for the November 9, 2020 Parks and Rec Committee agenda. Their recommendation would then be forwarded to the Common Council for final consideration on November 18, 2020.

The Staff Report prepared for the Public Art Committee is attached as reference.



## REPORT TO PUBLIC ARTS COMMITTEE

**Appleton Public Arts Committee Meeting Date:** November 5, 2020

**Parks & Recreation Committee Date:** November 9, 2020

**Common Council Meeting Date:** November 18, 2020

**Item:** HOPE – Houdini Plaza

**Case Manager:** Jessica Titel

### GENERAL INFORMATION

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**Applicant:** Creative Downton Appleton Inc., c/o Jennifer Stephany

**Property Owner:** City of Appleton c/o Dean Gazza, Director of Parks, Recreation and Facilities Management

**Address/Parcel:** Houdini Plaza – 121 W. College Avenue (Tax Id #31-2-0065-00)

**Applicant's Request:** Applicant is requesting to display oversized wooden letters spelling "HOPE" within Houdini Plaza.

### PROJECT DETAILS

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**Brief Description of Project and Location:** The applicant is proposing to install oversized letters spelling the word "Hope" along the walkway in Houdini Plaza. The installation will be displayed through March 2021. The letters will be made of wood and painted green. Each letter will be approximately 4-feet tall by 3-feet wide and will be anchored to a wooden base. The letters will also be lit. The artwork will be owned and maintained by Creative Downton Appleton, Inc.

**Reason for Choosing the Proposed Location:** Houdini Plaza offers great visibility for our community and allows people to walk up and take a picture with the HOPE installation. Proximity to an electrical source was also a consideration for the chosen location.

**Description of How the Work is Installed/Anchored/Attached:** The letters will be made of wood and each letter will be approximately 4-feet tall by 3-feet wide. The letters will be anchored to a 5-foot by 14-foot base that is one foot tall. Engineering specifications are attached.

**Timeline and Duration of Installation:** Installation will occur as soon as practical after approvals are received. HOPE will be displayed until March 31, 2021.

**Maintenance and Cost:** The HOPE installation will be maintained by Creative Downton Appleton Inc. A Public Art Agreement will be prepared by the City's Legal Services Department and will need to be executed prior to installation.

## HOPE – Houdini Plaza

November 5, 2020

Page 2

**Associated Signage:** No signage presented at this time. Per the Art in Public Places Policy, any artwork signage shall meet the parameters set forth in Zoning Code Section 23-531(e), which allows each artwork one plaque/sign not to exceed nine square feet in size.

**Appleton Comprehensive Plan 2010-2030:** The City of Appleton *Comprehensive Plan 2010-2030* illustrates the importance of the arts community to Appleton and encourages the expansion and promotion of placemaking and arts in the City. The proposed public art project is consistent with the following goals and objectives of the *Comprehensive Plan 2010-2030*.

*Chapter 3 – Community Vision #12: Creative place making and public art enhance the public realm and contribute to a vibrant economy.*

*Goal 7 – Agricultural, Natural, and Cultural Resources*

*Appleton will continue to protect and enhance its environmental quality and important natural resources, preserve historic sites, and support cultural opportunities for community residents.*

*Chapter 14 – Downtown Plan*

- *Strategy 1.1 Continue development of entry features on major routes into the downtown*
- *Strategy 1.4 Install sculpture, murals, and other art in public locations throughout the downtown*
- *Strategy 2.1 Maintain and strengthen the vitality of the arts and entertainment niche*

## **RECOMMENDATION**

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Based upon the guidelines outlined in the Art in Public Places Policy, staff recommends that the proposed HOPE installation within Houdini Plaza – 121 W. College Avenue (Tax Id #31-2-0065-00), as shown on the attached maps, **BE APPROVED** subject to the following conditions:

1. Agreement between the applicant and the City will be prepared by the City's Legal Services Department and shall be executed prior to installation. This agreement will memorialize the expectations of the parties including the location of the art, installation and insurance requirements, maintenance, liability, indemnification, and the like.
2. Per the Art in Public Places Policy, any artwork signage shall meet the parameters set forth in Zoning Code Section 23-531(e), which allows each artwork one plaque/sign not to exceed nine square feet in size.
3. Applicant and/or any contractors shall provide proof of minimum liability insurance to meet City requirements, prior to installation.
4. Upon completion of the installation, a structural/professional engineer shall provide certification that the artwork was installed according to specifications and meets required structural standards.
5. The applicant shall coordinate with Parks, Recreation and Facilities Management to determine the exact location of the structure. PRFM shall be onsite for the installation of the structure.
6. Applicant shall contact Digger's Hotline for underground utility locates and Parks, Recreation and Facilities Management for underground sprinkler line locates prior to any site work commencing.

**HOPE – Houdini Plaza**

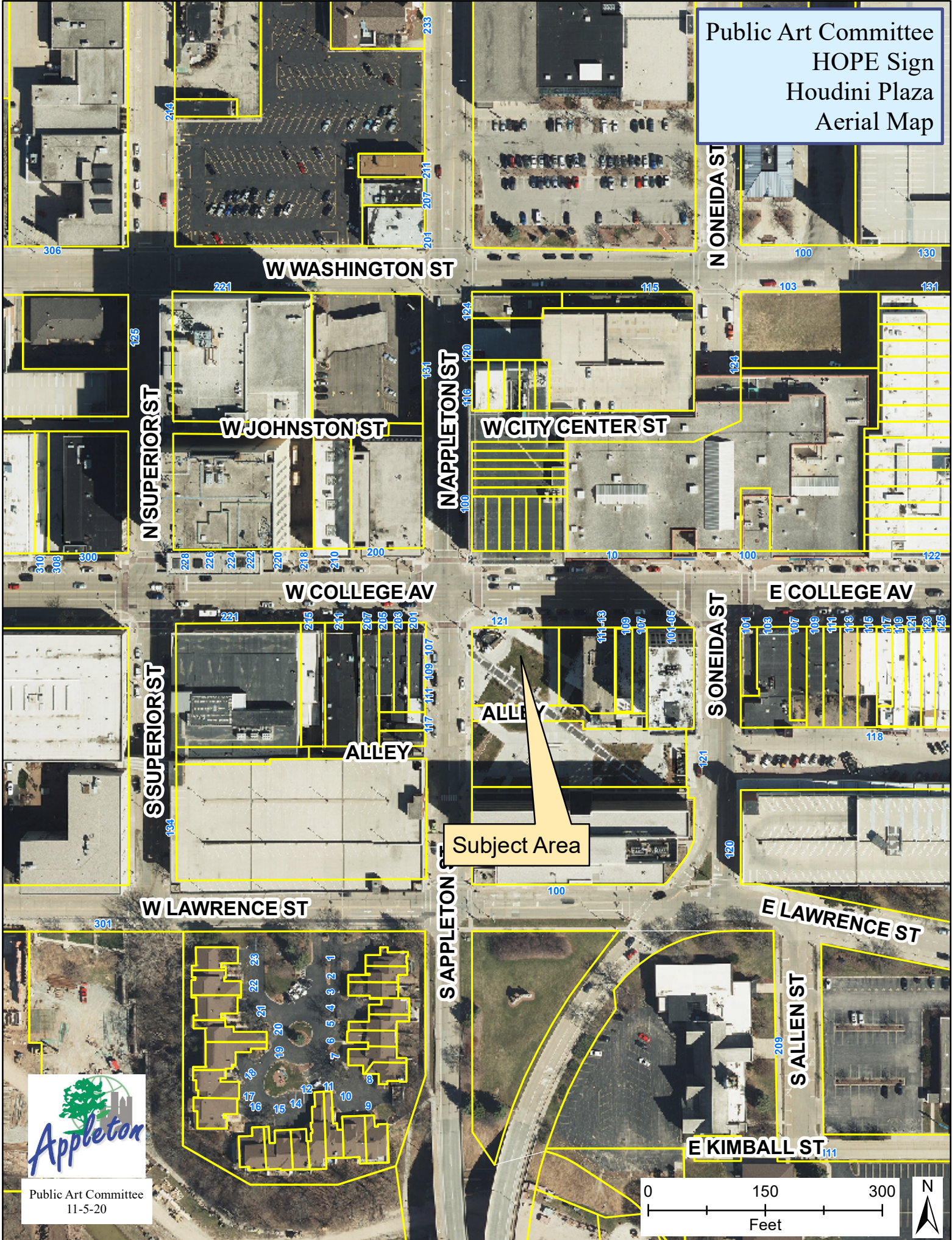
**November 5, 2020**

**Page 3**

7. Applicant is required to fully restore the grass and/or repair any damage that occurs as a result of this installation.
8. Installation will occur as soon as practical after all approvals are received and the Public Art Agreement is fully executed. HOPE structure shall be removed, and the site fully restored, no later than March 31, 2021.



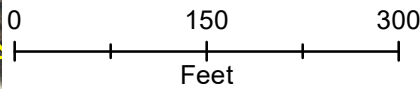
Public Art Committee  
HOPE Sign  
Houdini Plaza  
Aerial Map



Subject Area



Public Art Committee  
11-5-20





# HOUDINI PLAZA



COLLEGE AVENUE

APPLETON STREET

ONEIDA STREET

Fountain

HOPE sign

Basil's

Zuehlke Building

Trout Museum of Art

Olde Town Tavern

Basil's Patio

Stage

Dumpster

Appleton Center

- Legend**
- Bike Rack
  - Electrical Box
  - Toilet
  - Manhole
  - Light
  - Trash/Recycle
  - BENCH
  - DUMPSTER
  - LANDSCAPING
  - GRASS
  - FOUNTAIN
  - BUILDING



A complete submittal includes a completed application signed by the applicant with the following supplementary information:

- Brief description of the proposed artwork

During this very turbulent time, we look to offer HOPE to the Downtown Appleton.

We would like to display oversized letters in Houdini Plaza that spell out HOPE. Letters will be no greater than 5 feet high and 3 feet wide and 1 foot deep. Letters would be anchored into a base of wood or concrete 12 feet long. We are working with Boldt Construction on the final design of the letters and how best to anchor them with a base. An option to have a 1-foot high wood base with 4-foot letters is also being considered.

We want people to be able to walk up and take pictures but want to keep them thin enough, so people don't try to sit on them.

- Photos/sketches of proposed work:

The letters will be a BLOCK type. 4 to 5 feet high, 3 feet wide and up to 1 foot deep with a 12 foot base to anchor them. Letters will be painted green. The letters will not be free standing as shown in the LOVE example image.



Color Sample:

Example image:



- Site plan/location map showing location of proposed work – [attached](#)
- Reason for choosing the proposed location:

Houdini Plaza offers visibility and allows people to walk up to take a picture with HOPE. Close access to the power pedestal is also important to the location.

- Description of how the work is installed/anchored/attached

Boldt is building the letters and will work with the Park and Recreation Department on the best way to anchor. A proposed concrete slab or wooden base are two options. Boldt will install the letters.

- Installation specifications provided by a structural engineer

THIS IS COMING from Boldt

- Timeline and duration of installation

Desired installation is November 13<sup>th</sup> but we will install as soon as we have permission to do so. We would like the letters to remain through March of 2021, if allowed. Boldt has agreed to move them when needed. Our HOPE is to find a location for HOPE to be placed after its time in Houdini Plaza.

- How the artwork will be maintained (including any costs associated with the maintenance and who will be responsible for those costs)

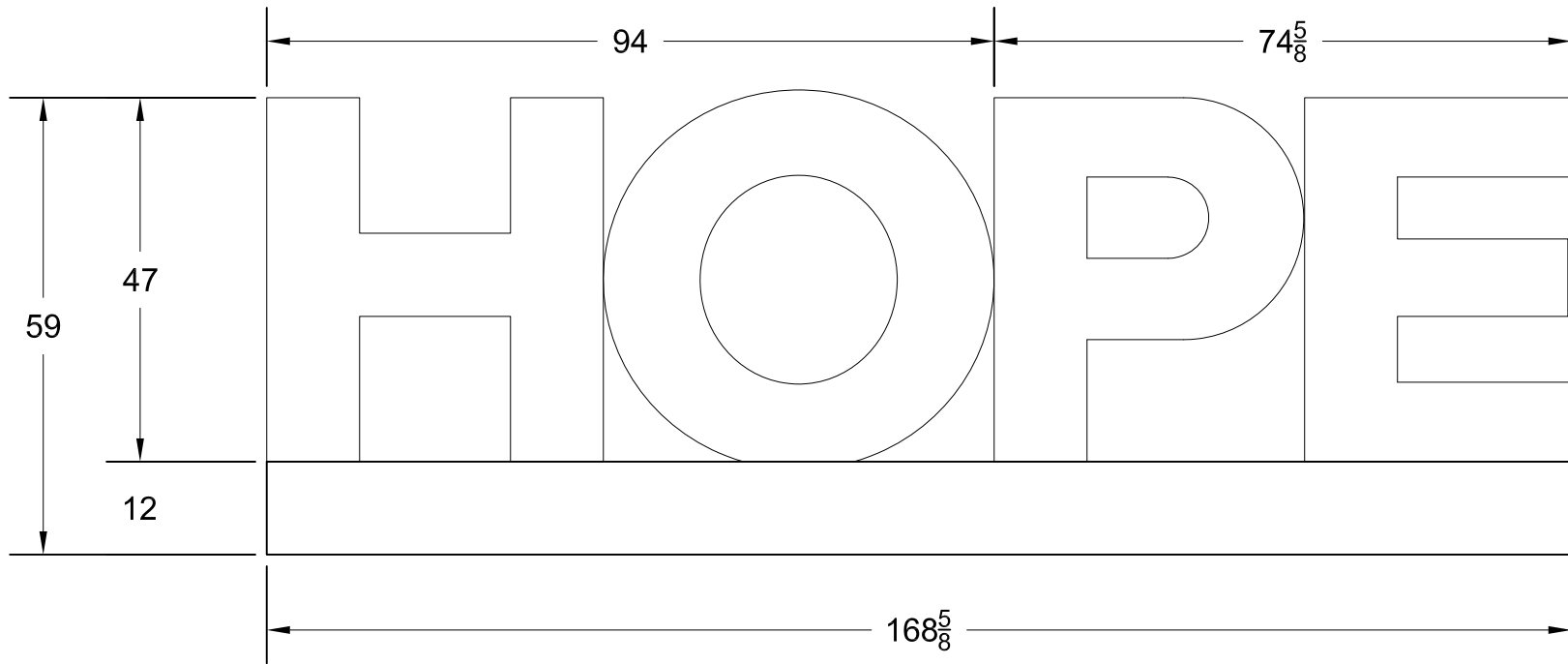
Creative Downtown Appleton Inc. will maintain the letters and provide graffiti removal and paint touch ups as needed. Lighting will also be maintained by CDA.

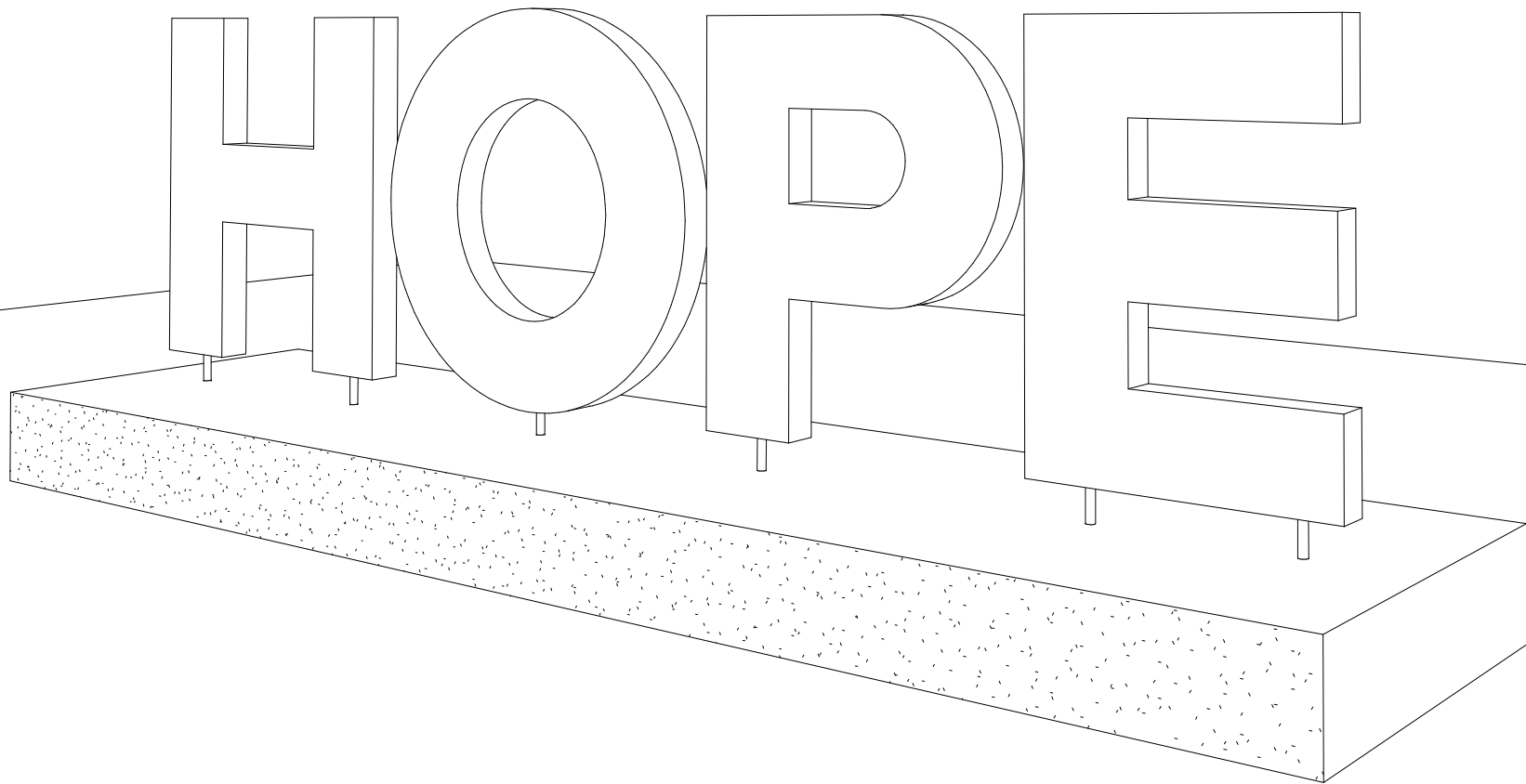
- Description of any associated signage

Attached to the base will be a 1 foot by 2 feet Sign recognizing Boldt and other supporting donors: Azco Inc. Tundraland, and Kimberly Clark

#### Example image







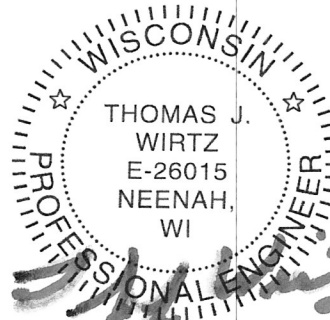
HOPE Sign

Appleton, WI

Structural Calculations

10/23/2020

<u>Item</u>	<u>Page</u>
General	1
Wind Analysis	2
Wood Design	4
Sketch	5



10-25-2020

Codes:

IBC 2015 with Wisconsin Provisions  
ASCE 7-10

Hope Sign - Struct. Calc.

Final Dimension

Base Dimension  $1'-0" \times 14'-0" \times 5'-0"$

Ht of Letters =  $47"$

WIND Calc

IBC 2015  
ASCE 7-10

Use RISK CATEGORY I  
(Low risk to human life)

Temporary structure use 75%  
of Design Loads

WIND FORCES

$V = 105$

$Exp = B$

$h = 5'$

$\Rightarrow K_z = 0.57$

$K_d = 0.85$

$K_{zt} = 1.0$

$Z = 0.00256 (.57)(1)(.85)(105)^2 = 13.67 \text{ psf}$

Treat as OPEN Sign

$\Rightarrow \approx 30\% \text{ OPEN}$

$h = s = 5'$

$B = 14'$

$h/s = 1.0$

$B/s = 2.8$

$C_f = 1.60$

$A_z = 1(14) + 14(4) = 53.2$

$F = 13.67(.85)(1.6)(53.2) = 989 \text{ (Factored)}$

$.6F = .6(989) = 593 \text{ (ASD)}$

<u>LETTERS</u>	$(13.67)(.85)(.7)(14)(4)(1.6) =$	$F = 728 \#$	$\frac{a.m}{3'}$	$\frac{M_o}{2184}$
----------------	----------------------------------	--------------	------------------	--------------------

<u>BASE</u>	$13.67(.85)(1.6)(1)(14) =$	$260 \#$	$.5$	$130$
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$988 \#$   $2314 \#-ft$

$F = .6(988) = 593 \text{ (ASD)}$   $M_o = (.6)(2314) = 1388 \#-ft \text{ (ASD)}$

USE 75% for Temporary Structure

$M_o = 1041 \#-ft$   
 $F = 445 \#$

Wt. of Sign

Letters = (3)  $\frac{3}{4}$ " Plywood  $\Rightarrow$   $2.25(3) = 6.75 \text{ psf}$

$A_L \approx 60\% \left( \frac{47}{12} \times 14' \right) = 16.35 \text{ ft}^2$

$W = 16.75(16.35) = 110 \text{ #}$

Base - 4' WIDE (Assume)

Plywood  $4 \times 14 (.3) = 168 \text{ #}$

Lumber =  $\left[ 4 \left( \frac{11.25}{12} \left( \frac{1.5}{12} \right) \left( \frac{168}{10} \right) + (2) \left( \frac{1.5}{12} \right) 14' \right) \right] 30 \text{ psf}$

$= 252 \text{ #}$

Total wt =  $110 + 168 + 252 = 530 \text{ #}$

$M_R = 530 \left( \frac{4}{2} \right) = 1060 < M_0(1.5) = 1560$

Make Base Larger

TRY 5' wide base

$Wt = 110 + \frac{5}{4}(252 + 168) = 635 \text{ #}$

$M_R = 635 \left( \frac{5}{2} \right) = 1588 \text{ #} - \text{OK}$

OK - USE 5' WIDE BASE



Post

$$M = \frac{wL^2}{2} = 13.67 (.85)(14)(4')(14')(4/2) = 1832$$

$$.6(1832) = 1093 \# - ft$$

use (4) 4x4 post

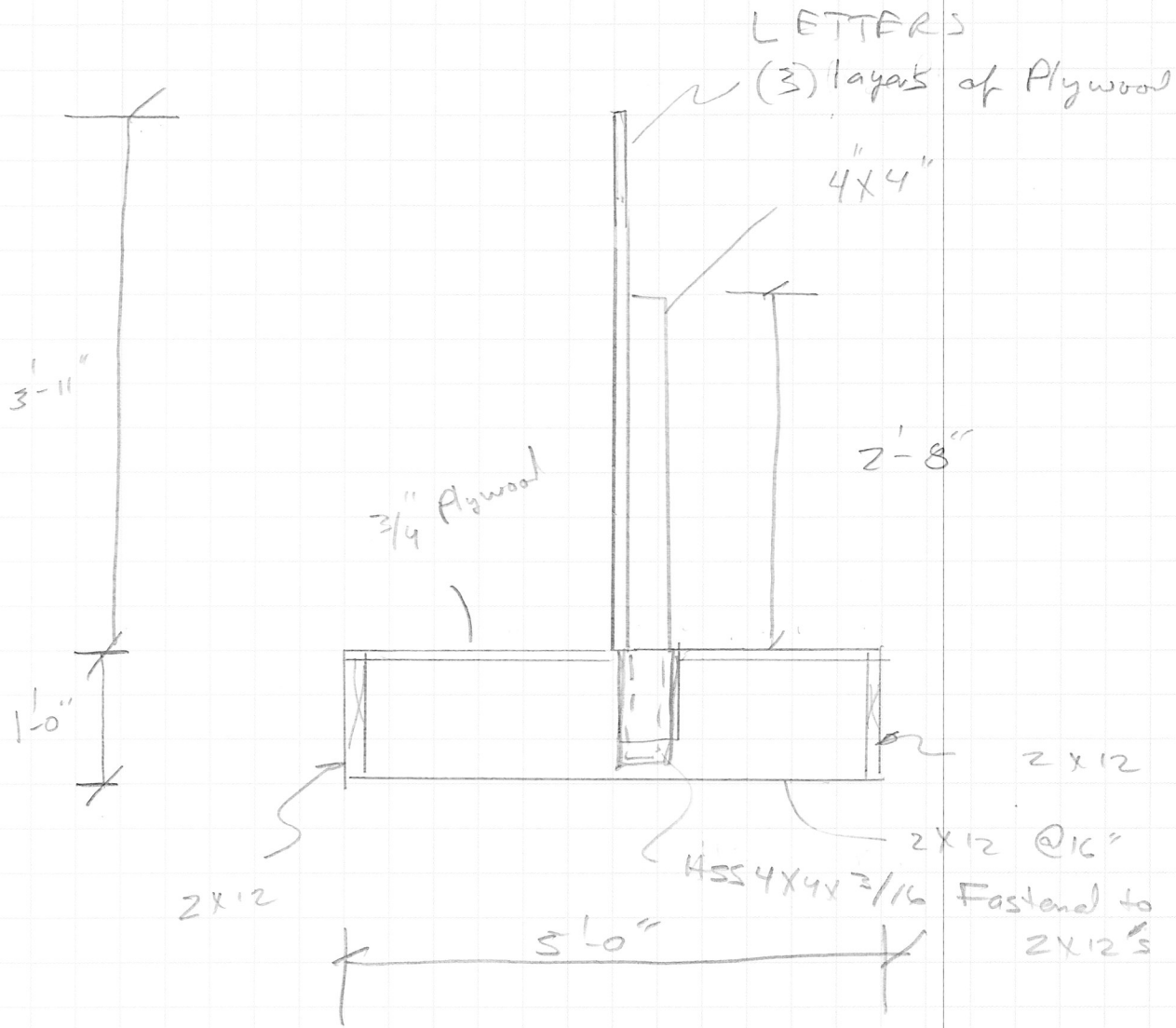
$$M/post = 1093 / 4 = 273 \# - ft$$
$$= 3279 \# - in$$

$$S_x = (3.5)^3 / 6 = 7.14 in^3$$

$$f_b = 3279 / 7.14 = 459 \text{ psi} < 1500 \text{ psi} \quad \underline{\underline{OK}}$$

BASE - 2x12's @ 16" O.C  
OK by Inspector

Job: HOPE SIGN  
Subject: WIND Analysis By: T. Wirtz  
Job No: \_\_\_\_\_ Date: 10/23/20 Sheet: 5/



SIDE VIEW



## **LEGAL SERVICES DEPARTMENT**

### **Office of the City Attorney**


100 North Appleton Street

Appleton, WI 54911

Phone: 920/832-6423

Fax: 920/832-5962

**TO:** Members of the Finance Committee  
Members of the Utilities Committee

**FROM:** Christopher R. Behrens, City Attorney 

**DATE:** November 5, 2020

**RE:** Resolution regarding Appleton-Menasha Water Plant Land Agreement  
Our File No. A18-0684

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Staff from the City of Appleton and City of Menasha have been engaging in ongoing discussions regarding mutual land needs. In particular, Menasha is interested in connecting its existing developments by developing the vacant southern most portion of the Appleton Water Treatment Plant. Appleton has a need to construct a second raw water line to its water plant that will require easements from Menasha.

In order to move forward with developing terms for a formal agreement, Menasha needs to incur the expense of some preliminary plat work on the subject property. In consideration of this pending expense, Menasha has requested some formal assurance that Appleton will continue working in good faith with Menasha to finalize terms of a formal agreement. Once a final agreement is reached, it will be subject to approval by the Common Council.

Accordingly, in order to assure Menasha that it may move forward with preliminary platting so that a finalized agreement may be approved by Appleton and Menasha in the near future, staff recommends:

**APPROVAL** of the resolution authorizing City of Appleton staff to continue its work with the City of Menasha in order to finalize terms of an agreement addressing the land needs of each municipality.

**RESOLUTION  
CITY OF APPLETON**

**RESOLUTION AUTHORIZING CITY OF APPLETON STAFF TO FINALIZE TERMS  
OF AN AGREEMENT WITH THE CITY OF MENASHA**

**WHEREAS**, the Appleton Water Treatment Plant, located within the City of Menasha, has identified a need to install a redundant raw water line extending from the Plant to Lake Winnebago; and

**WHEREAS**, the Appleton Water Treatment Plant sits upon multiple vacant acres of land that were acquired for potential future expansion; and

**WHEREAS**, the City of Menasha and the City of Appleton have been in discussion for several years about Menasha's interest in connecting its residential developments on each side of the Appleton Water Treatment Plant by constructing a roadway through the southern portion of the vacant Appleton Water Treatment Plant property; and

**WHEREAS**, after careful consideration, City staff has determined that if such a roadway were to be developed, the Appleton Water Treatment Plant would retain sufficient vacant land to accommodate any potential future expansion; and

**WHEREAS**, in exchange for the sale of this southern most portion of the vacant Water Treatment Plant property, Menasha would grant the Appleton Water Treatment Plant the necessary easement to allow for installation of a second raw water line; and

**WHEREAS**, the Menasha Common Council has approved this agreement in concept; and

**WHEREAS**, both Appleton and Menasha staff wish to move forward with the next steps that include some preliminary platting south of the proposed roadway, in order to finalize terms of a formal agreement for approval by both the Appleton and Menasha Common Council; and

**WHEREAS**, the formalized support of the Appleton Common Council is a necessary assurance so that staff of both municipalities may continue working towards a final agreement that would be approved in the first quarter of 2021;

**NOW, THEREFORE, BE IT RESOLVED**, by the City of Appleton Common Council does hereby support Appleton staff continuing to work with staff of the City of Menasha to reach an agreement wherein a southern portion of the vacant Appleton Water Treatment Plant land is sold to the City of Menasha and, in exchange, the City of Menasha provides the City of Appleton with an easement necessary for the installation of a second raw water line to its Water Treatment Plant.

Adopted this \_\_\_\_\_ day of \_\_\_\_\_, 2020.

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Jacob A. Woodford, Mayor

ATTEST:

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Kami Lynch, City Clerk

City Law A18-0684



# MEMORANDUM

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“...meeting community needs...enhancing quality of life.”

TO: Community and Economic Development Committee

FROM: Nikki Gerhard, Community Development Specialist

DATE: November 11, 2020

RE: Recommendations for 2021 Community Development Block Grant Funding

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**Background.** The estimated 2021 CDBG award listed in the 2021 City budget was \$591,226. This amount was estimated based on the most recent three years of awards. Staff determined the allocations for the Homeowner Rehabilitation Loan Program, Appleton Housing Authority, and administrative costs. The remaining amount was available for department projects and community partners through a competitive application process.

**Application Information.** CDBG applications from City Departments were due to the Community and Economic Development Department on August 31, 2020. One application was submitted and was recently approved for the full request. CDBG applications from community partners for the 2021 program year were due to the Community and Economic Development Department on September 30, 2020.

Seven applications were submitted under the routine annual allocation process. After awards were allocated for City programs, administration, and the City Department project, the amount available to allocate to the community partner applicants was \$369,849.84. Only 15 percent of a grantee’s allocation may be used for public service activities, per HUD regulations. In this instance, only a maximum of \$88,684 is projected to be available for public service activities. Because the Appleton Police Department’s Summer of Services project fell under the public service category, the remaining balance allowable to community partner applicants was \$16,632.84. The total amount requested by community partner applicants whose activities fell under the public service category was \$16,632.84; while the total amount requested by community partner applicants whose activities did not fall under the public service category was \$384,185. Refer to the attachments for a specific breakdown of the allocations.

**Application Review.** The CDBG Advisory Board met on October 27, 2020. Members were asked to review the applications and decide upon allocation amounts prior to the meeting. The allocation amounts made by each board member were compiled and discussed at the meeting. Allocation recommendations were agreed upon pursuant to this discussion.

**Allocation Approval.** The funding allocation recommendations from the CDBG Advisory Board for community partners are presented in the attached table for CEDC approval.

Staff recommends approval of the preliminary allocations, as presented.

The following attachments are provided for additional information on this action item.

**Attached Documents:**

- 1.) 2021PY CDBG Advisory Board Membership
- 2.) CDBG Policy
- 3.) 2021PY Community Partner Application Award Recommendations
- 4.) 2021PY Simple Summary of Award Recommendations

If you have any questions, please contact me at (920) 832-6469 or [nikki.gerhard@appleton.org](mailto:nikki.gerhard@appleton.org). Thank you!

City of Appleton  
COMMUNITY DEVELOPMENT BLOCK GRANT

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**2021 CDBG ADVISORY BOARD**

<b>Name</b>	<b>Title</b>	<b>Organization</b>	<b>Contact</b>
Jacob Woodford	Mayor	City of Appleton	<a href="mailto:jake.woodford@appleton.org">jake.woodford@appleton.org</a>
Kyle Lobner	President	Common Council	<a href="mailto:District13@appleton.org">District13@appleton.org</a>
Patti Coenen	Chair	CEDC Committee	<a href="mailto:District11@appleton.org">District11@appleton.org</a>
Marissa Downs	Chair	ARA	<a href="mailto:marissadowns@gmail.com">marissadowns@gmail.com</a>
Jennifer Krikava	Community Engagement Manager	Community Foundation for the Fox Valley Region	<a href="mailto:jkrikava@cfoxvalley.org">jkrikava@cfoxvalley.org</a>
Tanya Rabec	Commissioner	City Plan Commission	<a href="mailto:trabec@yahoo.com">trabec@yahoo.com</a>

**City of Appleton Staff**

<b>Name</b>	<b>Title</b>	<b>Contact</b>
Monica Stage	Deputy Director of Community & Economic Development	<a href="mailto:Monica.stage@appleton.org">Monica.stage@appleton.org</a>
Nikki Gerhard	Community Development Specialist	<a href="mailto:Nikki.gerhard@appleton.org">Nikki.gerhard@appleton.org</a>
Ryne Lodi	Coordinated Entry Specialist	<a href="mailto:Ryne.lodi@appleton.org">Ryne.lodi@appleton.org</a>





# City of Appleton COMMUNITY DEVELOPMENT BLOCK GRANT



## Community Development Block Grant (CDBG) Policy

Adopted 9/8/2008

Amended 5/24/2010, 10/3/2012, 12/19/2012, 7/15/2015, 10/21/2020

### I. PURPOSE

To outline the following aspects of the local Community Development Block Grant (CDBG) Program: a) elements to which the City of Appleton must adhere in order to comply with federal regulations; b) locally-established guidelines; and c) priorities for subrecipient and City Program activity.

### II. POLICY

The federal CDBG program was established with the passage of the Housing and Community Development Act of 1974. CDBG funds are distributed to eligible governmental units in two forms:

- (1). Entitlement grants directly to cities and counties, and;
- (2). State grants, which involve annual competitions for non-entitlement communities.

Since 1975, the City of Appleton has received CDBG funds as an entitlement community. The amount of CDBG funds received each year varies based on the appropriation approved by the U.S. Congress and the number of governmental units eligible to participate. While the federal fiscal year operates from October 1 to September 30, the City selected April 1 to March 31 as its CDBG fiscal year. This selection was made as the federal government generally does not release the aforementioned funds until springtime. Federal oversight lies within the U.S. Department of Housing & Urban Development (HUD).

### III. FEDERAL REGULATIONS

*The citation reference from Title 24 Part 570 – Community Development Block Grants can be found in parentheses next to each heading below. Please view that section for more information on the respective item. This Policy will be revised periodically as required to fulfill related Federal, State, and/or local funding requirements.*

#### A. Federal Eligibility (24 CFR 570.201)

CDBG funds may be used for the following basic eligible activities:

- |                                     |  |
|-------------------------------------|--|
| (1). Acquisition                    | (11). Housing Services                             |
| (2). Disposition                    | (12). Privately-Owned Utilities                    |
| (3). Public Facilities/Improvements | (13). Homeownership Assistance                     |
| (4). Clearance/Remediation          | (14). Economic Development Assistance              |
| (5). Public Services                | (15). Technical Assistance                         |
| (6). Interim Assistance             | (16). Institutions of Higher Education             |
| (7). Payment of Non-Federal Share   | (17). Rehabilitation/Preservation (24 CFR 570.202) |
| (8). Urban Renewal Completion       | (18). Planning (24 CFR 570.205)                    |
| (9). Relocation                     | (19). Administration (24 CFR 570.206)              |
| (10). Loss of Rental Income         |  |

#### B. Ineligible Activities (24 CFR 570.207)

The following activities may not be assisted with CDBG funds:

- (1). Buildings (or portions thereof) for the General Conduct of Government
- (2). General Government Expenses
- (3). Political Activities



**City of Appleton**  
**COMMUNITY DEVELOPMENT BLOCK GRANT**



The following activities are not eligible for CDBG funding, but may be allowed under certain circumstances:

- |                                     |                               |
|-------------------------------------|-------------------------------|
| (1). Purchase of Equipment          | (3). New Housing Construction |
| (2). Operating/Maintenance Expenses | (4). Income Payments          |

**C. Special Economic Development Projects (24 CFR 570.203)**

CDBG funds may be used for special economic development activities in addition to other activities. Special economic development activities include:

- (1). Acquisition, construction, reconstruction, rehabilitation or installation of commercial or industrial buildings, structures, and other real property equipment and improvements
- (2). Assistance to a private for-profit business, including, but not limited to, grants, loans, loan guarantees, interest supplements, technical assistance, and other forms of support, for any activity where the assistance is appropriate to carry out an economic development project
- (3). Economic development services, including, but not limited to, outreach efforts; screening of applicants; reviewing/underwriting applications; preparation of all necessary agreements; management of activities; and the screening, referral, and placement of applicants for employment

**D. National Objectives (24 CFR 570.208)**

In order to qualify for funding, activities must meet one of three CDBG national objectives:

- (1). Low & Moderate Income (LMI) Benefit
  - a. Area Benefit: activities available for the benefit of all the residents in a particular area, where at least 51 percent of those residents are LMI persons.
  - b. Limited Clientele: activities benefiting a specific group (i.e. abused children, elderly persons, battered spouses), at least 51 percent of whom are LMI persons.
  - c. Housing: activities carried out for the purpose of providing or improving permanent residential structures that, upon completion, will be occupied by LMI households.
  - d. Job Creation/Retention: activities designed to create or retain permanent jobs where at least 51 percent of the jobs involve the employment of LMI persons.
- (2). Slum & Blight Removal
  - a. Area Basis: activities undertaken to eliminate specific conditions of blight, physical decay, or environmental contamination that are located in a designated area of distress, including acquisition, clearance, relocation, historic preservation, remediation of environmentally contaminated properties, or rehabilitation. Rehabilitation must eliminate conditions that are detrimental to public health/safety; acquisition and relocation must be precursors to other activities that eliminate blight.
  - b. Spot Basis: activities undertaken to eliminate specific conditions of blight, physical decay, or environmental contamination at specific sites not located in designated blighted areas, including acquisition, clearance, relocation, historic preservation, remediation of environmentally contaminated properties, or rehabilitation. Rehabilitation must eliminate conditions that are detrimental to public health/safety; acquisition and relocation must be precursors to other activities that eliminate blight.
- (3). Urgent Need
  - a. Activities designed to alleviate existing conditions of recent origin (18 months) that pose serious threats to the health and welfare of the community; this objective may only be used if the community cannot finance necessary activities with other sources.



**City of Appleton**  
**COMMUNITY DEVELOPMENT BLOCK GRANT**

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**E. Categorical Limits**

- (1). At least 70 percent of CDBG funds utilized during three consecutive program years, as specified by the grantee, must be expended for LMI benefit; the costs of planning and program administration are excluded from this calculation. (24 CFR 570.200(a)(3))
- (2). The amount of CDBG funds obligated for public service activities in each program year may not exceed 15 percent of the total entitlement grant for that program year, plus 15 percent of the program income received during the preceding program year. (24 CFR 570.201(e)(1))
- (3). The amount of CDBG funds obligated for planning and administration activities in each program year may not exceed 20 percent of the total entitlement grant for that program year plus the program income received during that program year. (24 CFR 570.200(g))

**F. Program Income (24 CFR 570.426)**

The City may reuse any revenue generated from projects undertaken with CDBG funding towards other eligible activities within the entitlement community. Furthermore, any program income earned by a subrecipient or City Program may be retained by the subrecipient or City Program provided the income is treated as additional CDBG funds and thus subject to all applicable federal and local requirements.

**G. Fair Housing (24 CFR 570.601)**

The Secretary of HUD requires that:

- (1). Grantees must administer all activities related to housing and community development in a manner to affirmatively further the policies of the Fair Housing Act. (Public Law 90-284)
- (2). Entitlement communities shall conduct an Analysis of Impediments to Fair Housing Choice every five years, take action to overcome the effects of the identified impediments and maintain records reflecting the analysis and related actions taken.

**H. Environmental Review Procedures (24 CFR 570.604)**

The environmental review procedures outlined in 24 CFR part 58 must be completed for each CDBG subrecipient and City Program activity, as applicable.

**I. Faith-Based Activities (24 CFR 570.200)**

Religious or faith-based organizations are eligible to participate in the CDBG program. Local government representatives and CDBG program administrators shall not discriminate against an organization on the basis of its religious affiliation.

**J. Submission Requirements (24 CFR 570.302)**

CDBG entitlement communities must submit the following documents:

- (1). Action Plan → annually
- (2). Consolidated Annual Performance and Evaluation Report (CAPER) → annually
- (3). Consolidated Plan → every three to five years, as chosen by the entitlement community

Creation of these documents must follow HUD requirements for content and citizen participation (see the City of Appleton CDBG Citizen Participation Plan).

**K. Location of Activities (24 CFR 570.309)**

CDBG funds may be awarded to an activity outside the jurisdiction of the entitlement community only if it can be determined that the activity directly benefits the entitlement community's residents. Documentation of these benefits must be provided before CDBG funds are awarded for the activity.



# City of Appleton COMMUNITY DEVELOPMENT BLOCK GRANT



## **L. Conflict of Interest (24 CFR 570.611)**

No persons affiliated with the entitlement community (including subrecipients and City Programs) who exercise or have exercised any responsibilities with respect to CDBG programming, or who are in a position to participate in a decision-making process, may obtain a financial interest or benefit from a CDBG-assisted activity (including subcontracts), either for themselves or those with whom they have business or immediate family ties, during their tenure or for one year thereafter.

## **IV. LOCAL PROGRAM GUIDELINES**

### **A. Program Oversight**

The Community and Economic Development Committee (CEDC) – composed of five aldermen appointed by the Mayor – serves as the jurisdiction for Common Council oversight of the CDBG Program. Local financial oversight lies with the City of Appleton Finance Department. Local administrative/programmatic oversight lies with the City of Appleton Community and Economic Development Department (CEDD).

### **B. Consolidated Plan Submission**

The City of Appleton has elected to submit a Consolidated Plan to HUD every five years. The Citizen Participation Plan provides for and encourages citizens to participate in the development of the Consolidated Plan, which will begin approximately one year before the required submittal date.

### **C. Definitions**

- Subrecipient – an entity charged with implementation of one or more activities funded with Appleton CDBG dollars
  - community partner subrecipient – local agencies awarded CDBG-funding to implement an eligible activity via a competitive application process
  - public services subrecipient – local agencies awarded CDBG-funding to implement an eligible public service activity via a competitive application process
- Adjusted award – the amount of CDBG funds available to City Programs and subrecipients after administration, fair housing, and audit allocations are deducted

### **D. Local Categorical Limits**

The following limits expand upon federal categorical limits associated with the CDBG program:

- (1). At least 70 percent of CDBG funds utilized over three program years must be expended for LMI benefit; this excludes planning/CDBG administration activities.
- (2). The amount of CDBG funds obligated for public service activities in each program year may not exceed 15 percent of the adjusted award for that year unless otherwise specified under the pertinent Federal regulation or applicable waivers to prevent the spread of infectious disease and mitigate economic impacts caused by infectious disease.
- (3). The amount of CDBG funds obligated for planning/CDBG administration activities in each program year may not exceed 20 percent of the total entitlement grant for that year.
- (4). Any single award will not be less than \$10,000.

### **E. Audit Requirements**

Section 2 Part 200 of the Code of Federal Regulations and the State Single Audit Guidelines require major state programs and federal programs to complete a single audit. The necessary amount for fulfilling these requirements will be identified by the Finance Department and the City's independent auditors. This amount will be deducted from the estimated amount available for the program year and not included in the



## City of Appleton COMMUNITY DEVELOPMENT BLOCK GRANT



estimates of the adjusted award.

### F. Fair Housing Services

In keeping with the spirit of federal fair housing requirements, an annual allocation for fair housing services will be approved. This activity will be reported as an administrative expense, which claims no benefit. The City of Appleton will utilize the award to contract with an independent entity qualified to provide residents with a variety of fair housing services. This amount will be deducted from the estimated amount available for the program year and not included in the estimates of the adjusted award.

### G. Program Administration

HUD requires entitlement communities to provide for efficient and adequate administration of CDBG programming. Administration costs may only include: salary/fringe, necessary training/travel, supplies and telephone/postage, in addition to fair housing services and audit costs. The necessary amount for fulfilling this requirement will be identified by the Community and Economic Development and Finance Departments. This amount will be deducted from the estimated amount available for the program year and not included in the estimates of the adjusted award.

### H. Annual Allocation of CDBG Funding

The City of Appleton's Program Year begins April 1 and concludes March 31 of the following year. Each program year, administration, audit and fair housing costs, along with adequate funding for the Homeowner Rehabilitation Loan Program, the Neighborhood Program and Appleton Housing Authority will be subtracted from the annual entitlement award amount to determine the adjusted award. The adjusted award will first be available to City of Appleton Departments/Programs/component units that wish to undertake projects. After the City allocation process is complete, any remaining funds may be allocated to community partner applicants.

### I. City Allocation Process

Each year adequate funding will be allocated through the City Budget process to the following: Homeowner Rehabilitation Loan Program, Neighborhood Program, Administration Costs and Appleton Housing Authority. Then, other City of Appleton Departments will have the opportunity to submit an application for CDBG funding. The application will include information relating to goals, outputs, budget/financing, detailed activity descriptions, capacity and performance. CEDD staff, per HUD rules and regulations, will perform an administrative review of each plan to ensure that:

1. Proposed activities are included within the listing of eligible activities (24 CFR 570.201)
2. Proposed activities do not fall within a category of explicitly ineligible activities (24 CFR 570.207)
3. Proposed activities will meet one of the national objectives of the program (24 CFR 570.200)
4. Proposed activities will address priority needs as identified in the Consolidated Plan

Upon completion of the administrative review, the plans will be presented to the CEDC. CEDC will also review the submitted plans to ensure the proposed activities meet the four standards listed above and allocate adequate funds for each plan. CEDC's recommendation will then be presented to the Common Council for approval.

### J. Community Partner Subrecipient Allocation Process

The community partner application process will begin after allocations for City applications have been approved, and end with recommended allocations being announced after Council approval. Applications



## City of Appleton COMMUNITY DEVELOPMENT BLOCK GRANT



will be made available for approximately one month and should be submitted to the CEDD. All applications must be received by the announced deadline; no exceptions will be made. CEDD staff will perform an administrative review of each proposal, per HUD rules and regulations, to ensure the four standards listed under letter E. above, will be met if proposed activities are funded.

Upon completion of the administrative review, the proposals will be presented to the CDBG Advisory Board which will review and make funding recommendations for each proposal. This Board will consist of the following members:

1. Mayor
2. Common Council President
3. Chairperson of the Community and Economic Development Committee or committee designee
4. Chairperson of the Appleton Redevelopment Authority or committee designee
5. Representative from an Experienced Outside Funding Agency – on a rotating basis (i.e. United Way, Community Foundation, JJ Keller Foundation, U.S. Oil Basic Needs Partnership)
6. Citizen member from the City Plan Commission

CEDD staff will supply the Board with applications and all appropriate guidelines along with a summary of each proposal, and an explanation of the proposal score sheet. Board members are asked to allocate funding among the applicants and return their allocations to CEDD staff who will compile all results and present allocation recommendations at a Board meeting during which allocation amounts will be finalized. In completing their funding recommendation, the Board will utilize an estimated CDBG entitlement award dollar amount, which will be calculated based on past awards and any available information on HUD's future funding strategies. Funding recommendations from this Board will be presented as an Action Item to the CEDC. CEDC's recommendation will then be presented to the Common Council for final approval.

During efforts to prevent the spread of infectious disease and mitigate economic impacts caused by infectious disease, the community partner subrecipient allocation process will be waived. Final approval of allocations and projects will be presented to Common Council, subsequent to the completion of the required public comment period.

### **K. Estimated vs. Actual Entitlement Award**

If there is a differential between the estimated award and the actual award, the CDBG Advisory Board will be consulted and their recommendations will be presented to CEDC and Council for approval.

### **L. Subrecipient Agreement/Letter of Understanding/Training Session**

Community partner subrecipients of CDBG funds must enter into a subrecipient agreement with the City of Appleton. This subrecipient agreement serves as a formal contract addressing the various policies outlined in this document, in addition to contract amount/term, reimbursement requests, accomplishment reporting, monitoring, financial management guidelines, conflict of interest, and additional federal standards, including lead-based paint regulations and the Davis Bacon Act. Furthermore, each City Program receiving CDBG funds must sign a Letter of Understanding (LOU) indicating an understanding of the items above. To ensure all parties understand the requirements of their agreement or LOU, a mandatory training session will be held with new subrecipients before funds are released. Technical assistance from staff will be available to all subrecipients throughout the program year.

### **M. Statement of Work**



## City of Appleton COMMUNITY DEVELOPMENT BLOCK GRANT



All subrecipients and City Programs shall submit a concise Statement of Work that illustrates an implementation plan for their CDBG activity. This Statement, which will be attached to the subrecipient agreement/LOU includes: national objective claimed, activity descriptions, intended beneficiaries (number and type), detailed budget and location(s) of program-related activity.

### **N. Report Submissions**

All subrecipients and City Programs are required to submit a report of their accomplishments with each payment request during the program year when applicable, as well as an Annual Report by April 15th, which is a comprehensive report covering the agreed upon objectives, activities and expenditures for the entire contract period. If said reports are not attached to payment requests when required, payments will be withheld until the report is submitted.

### **O. Change of Use**

If a subrecipient or City Program wishes to utilize funds for an activity not identified on their original application, they are required to submit a detailed letter to the CEDD explaining the reasoning for and amount of the proposed change and a public comment period may be held per the Citizen Participation Plan.

### **P. Displacement/Relocation**

Due to the potential liability for long-term assistance and burdens placed on affected tenants, the City of Appleton will avoid funding CDBG projects that involve permanent residential displacement or business relocation unless displacement/relocation prove to be the only means available to correct a public health/safety hazard or other critical condition.

### **Q. Procurement**

The City of Appleton Procurement Policy applies to all CDBG activities, including both City Programs and subrecipients that involve the purchase of equipment, materials, supplies and/or services. A copy of this policy will be distributed to all subrecipients.

### **R. Audits**

All subrecipients are required to submit one copy of their audited financial statement immediately following the end of their fiscal year during which CDBG funds are received, unless an alternate arrangement has been made with the City of Appleton Finance Department. CDBG applications may include audit costs as a reimbursable expense.

### **S. Disputes**

Any dispute concerning a question of fact arising under a subrecipient program or City Program shall be resolved by CEDD staff, who shall relay his/her decision in writing to the subrecipient or City Program, in addition to furnishing a copy to the Mayor and the CEDC. The decision of CEDD staff shall be final and conclusive unless the subrecipient or City Program furnishes a written appeal to the CEDC within ten days of the date of receipt of such copy. The decision of the CEDC in such appeals shall be final and conclusive unless appealed to a court of competent jurisdiction within 30 days of receipt of the CEDC's decision.

### **T. Unspent Grant Funds**

Any uncommitted CDBG funds remaining at the end of the program year will be reprogrammed for use in the subsequent program year. The subrecipient shall submit a carryover request, including both documentation of plans for expending funds and a timeline for the expenditure, to CEDD staff by April 15.



## City of Appleton COMMUNITY DEVELOPMENT BLOCK GRANT

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If any unspent grant funds remain after September 30, CEDD staff will meet with the subrecipient to determine if further action needs to be taken to expedite the expenditure of funds.

### U. **Termination**

If the subrecipient or City Program fails to fulfill, in timely and proper manner, its obligations under the Statement of Work, or if they violate any stipulations contained within the subrecipient agreement/LOU, the City has the right to terminate funding of their program. Written notice will be delivered at least 30 days before the termination.

### V. **Examination of Records/Monitoring**

The policy of the City of Appleton is to monitor its subrecipients in a manner consistent with the requirements of 24 CFR 570.2, 2 CFR 200.328, and 2 CFR 200.331(d). The subrecipient and City Program shall maintain records (including books, documentation and other evidence) pertaining to the costs of carrying out their activity to the extent of detail that will adequately reflect net costs, direct and indirect labor, materials, equipment, supplies/services, and other expenses. Authorized representatives of the City or HUD shall have access to subrecipient and City Program records at reasonable times of the business day for inspection, audit or reproduction. Subrecipients and City Programs must make these records available throughout the program year and four years after it expires. Furthermore, CEDD staff may schedule monitoring visits with the subrecipient to evaluate the progress/performance of the program and provide technical assistance. The City of Appleton's Grant Administration Procedures manual should be referenced for further guidance on subrecipient tracking and monitoring requirements.

### W. **Financial Management Systems**

Subrecipients and City Programs must employ financial management systems that are capable of generating regular financial status reports indicating the dollar amount allocated (including budget revisions), amount obligated, and amount expended for each activity. The system must permit the comparison of actual expenditures and revenues against budgeted amounts. The City must be able to isolate/trace every CDBG dollar received.

### X. **Payment Requests**

Community partner subrecipients and City Programs will submit requests for payment with attached supporting documentation to the CEDD. Payment requests shall be allowed on a reimbursement basis (i.e. only after expenditures have been incurred) and shall be reviewed to ensure the expenditures are in conformity with the use of funds as described in the Statement of Work. If source documentation is deemed inadequate by Staff, all payments will be withheld until all required documents have been submitted. Payment requests received and approved will be processed and a check issued in accordance with the City of Appleton Finance Department weekly pay cycle. All payment requests must contain an original signature.

### Y. **Program Income**

Any program income (as defined under applicable federal regulations) gained from any activity of the subrecipient may be retained by the subrecipient or City Program provided the income is treated as additional CDBG funds subject to all applicable requirements governing the use of CDBG funds. Anticipated program income must be documented and described in the subrecipient or City Program proposal/application. Furthermore, any and all program income received must be reported to the City of Appleton's Community and Economic Development and Finance Departments, unless otherwise specified in this contract.





## City of Appleton COMMUNITY DEVELOPMENT BLOCK GRANT



### **Z. CDBG Activity Promotion**

All subrecipients and City Programs are required to participate in promotion of the City of Appleton CDBG Program. Expectations will be outlined by staff at the beginning of the program year and may include, but are not limited to:

- Inclusion of the Appleton/CDBG logo in materials/at project sites
- Mentorship of a subrecipient new to the CDBG Program
- Participation in a CDBG Open House to showcase grant activities

### **V. APPLICATION/PROPOSAL EVALUATION CRITERIA**

#### **A. General**

In order to receive CDBG funding, subrecipient and City Programs must meet a priority need, as identified in the Five-Year Consolidated Plan. Additional preference, however, will be given to CDBG applicant activities that meet one or more of the following criteria:

- (1). Seek a one-time use of CDBG funding
- (2). Benefit residents of LMI census tracts (population at least 46.7 percent LMI)
- (3). Will result in additional housing units being placed on the tax roll
- (4). Demonstrate secured complementary sources of funding (i.e. leverage) and/or strong efforts to solicit and secure complementary funding.
- (5). Serve special needs populations, including, but not limited to:
  - a. Elderly/frail elderly
  - b. Persons with disabilities (developmental and physical)
  - c. Persons with HIV/AIDS and their families
  - d. Persons seeking solutions to alcohol and drug addiction

#### **B. Public Services (subject to 15 percent cap)**

Preference will be given to Public Service CDBG applicants whose activities meet one or more of the following criteria:

- (1). Program service costs – one time use
- (2). Administrative expenses – one time use
- (3). Program service costs – continual use
- (4). Administrative expenses – continual use

**Community Partner Application AWARD RECOMMENDATIONS  
for the 2021 CDBG Program Year**

<b>NON-PUBLIC SERVICE</b>	<b>PROJECT ACTIVITY</b>	<b>PROJECTED OUTPUT</b>	<b>FUNDS WILL BE USED TO...</b>	<b>AMOUNT REQUESTED</b>	<b>CDBG ADVISORY BOARD \$ REC</b>
Greater Fox Cities Area Habitat for Humanity	housing	3 properties rehabilitated and sold to qualified homebuyers	acquire 3 properties to do full house rehabilitation and then sell to qualified low or moderate income homebuyers	\$147,000	\$ 147,000
Pillars, Inc Adult & Family Shelter	public facility	security improvements	upgrade/install security improvements	\$27,185	\$ 27,185.00
Rebuilding Together Fox Valley	housing	10 properties rehabilitated	provision of home repairs to low-income homeowners in need, specifically older adults, veterans and individuals with disabilities	\$100,000	\$ 100,000.00
WWBIC (Wisconsin Women's Business Initiative Corporation)	economic development	4 businesses financially support	provide business education and one-on-one individualized counseling for up and coming, and established, small business owners	\$75,000	\$ 59,032.00
The Mooring Programs, Inc. (dba Apricity)	public facility	program rehabilitation	rehabilitation of 5 program houses and the main facility (Phase III)	\$20,000	\$ 20,000.00
Hmong American Partnership	public facility	repair/replace roof	rehabilitation or replacement of facility roof	\$15,000	\$ -
				<b>\$ 384,185.00</b>	<b>\$ 353,217.00</b>
<b>PUBLIC SERVICE</b>	<b>PROJECT ACTIVITY</b>	<b>PROJECTED OUTPUT</b>	<b>FUNDS WILL BE USED TO...</b>	<b>AMOUNT REQUESTED</b>	<b>CDBG ADVISORY BOARD \$ REC</b>
LEAVEN	public service	53 households served	provide rental assistance to those at risk of homelessness through the Emergency Assistance Program	\$16,632.84	\$ 16,632.84
				<b>\$16,632.84</b>	<b>\$16,632.84</b>

**City Programs/Appleton Housing Authority/Administration  
(previously approved)**

**\$149,325.00**

**Appleton Police Department  
(previously approved)**

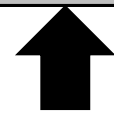
**\$72,051.06**

**CDBG Advisory Board Recommendations**

**\$369,849.84**

**Remaining Unallocated Funds**

**\$591,226**



This amount cannot exceed \$16,632.84 due to 15% cap on Public Service Activities per HUD regulations.

## AWARD RECOMMENDATIONS FOR 2021 CDBG PROGRAM YEAR

City Programs/Appleton Housing Authority/Administration		
City of Appleton Homeowner Rehabilitation Loan Program	\$	29,892.00
Fair Housing Services	\$	25,000.00
Appleton Housing Authority	\$	37,000.00
CDBG Program Administration Costs	\$	57,433.00
Appleton Police Department	\$	72,051.06
Non-Public Service		
Greater Fox Cities Habitat for Humanity	\$	147,000.00
Pillars, Inc	\$	27,185.00
Rebuilding Together Fox Valley	\$	100,000.00
The Mooring Programs	\$	20,000.00
WWBIC	\$	59,032.00
Public Service		
LEAVEN, Inc.	\$	16,632.84
<b>TOTAL</b>	<b>\$</b>	<b>591,226</b>



*"...meeting community needs...enhancing quality of life."*

## MEMORANDUM

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TO: Community and Economic Development Committee

FROM: Matt Rehbein, Economic Development Specialist

DATE: November 11, 2020

RE: Planning Option Agreement Extension for the Blue Ramp and Conway Hotel Sites – Merge, LLC

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The City of Appleton entered into a Planning Option Agreement with Merge, LLC to provide a 9-month initial term to conduct due diligence for a potential mixed-use development on the Blue Ramp and Conway Hotel sites on March 1, 2020. In return for this option, Merge paid the City \$1,000.

This Option expires on November 30, 2020. Merge, LLC has requested an extended term of six (6) months. Per Section 2 of the original Option, Merge, LLC would pay the City an additional \$5,000 for this extension.

Since March 1, 2020, Merge, LLC has been in frequent contact with Community and Economic Development Department staff and has completed interviews with community stakeholders. Conceptual mixed-use plans have been prepared. At this time, plans are not available publicly as due diligence is still underway. Given the cost to conduct the due diligence and prepare conceptual plans, Merge Urban Development Group would like the continued assurance that the City would be interested in selling these parcels for a mixed use development that is aligned with our Comprehensive Plan.

### **Staff Recommendation:**

A six (6) month extension to the Planning Option Agreement for the Blue Ramp and Conway Hotel Sites from Merge, LLC **BE APPROVED**.

**PLANNING OPTION AGREEMENT – TERM EXTENSION**

Merge, LLC (the “Developer”), an Iowa limited liability company d/b/a Merge Urban Development Group, with a business office of 604 Clay Street, Cedar Falls, IA 50613 and the City of Appleton (the “City”) having its office as 100 North Appleton Street, Appleton, WI 549121; and, Developer and the City (hereinafter collectively “Parties”) AGREE AS FOLLOWS:

1. Parties previously entered into an Agreement, attached hereto, granting Developer’s requested planning option to allow time to complete all due diligence necessary to determine the physical and financial feasibility of constructing a mixed-use development with rental units and light-retail space; and
2. The Agreement, and rights conveyed therein, terminates on November 30, 2020 unless extended by mutual agreement.
3. The Parties mutually agree that the Agreement’s termination date shall be extended to May 31, 2021, in accordance with the Extended Term option contained within the Agreement.
4. In order to secure extension, the Developer agrees to pay an additional non-refundable payment of \$5,000.00 to the City as provided in Section 2 of the Agreement.
5. All other terms, conditions and the like of the Agreement shall remain unchanged.

**IN WITNESS WHEREOF**, the undersigned parties have executed this Term Extension Agreement dated this \_\_\_\_ day of November, 2020.

**MERGE, LLC**

Witness: \_\_\_\_\_  
Printed Name: \_\_\_\_\_

By: \_\_\_\_\_  
Printed Name: \_\_\_\_\_  
Title: \_\_\_\_\_

**CITY OF APPLETON**

Witness: \_\_\_\_\_  
Printed Name: \_\_\_\_\_

By: \_\_\_\_\_  
Jacob A. Woodford, Mayor

Witness: \_\_\_\_\_  
Printed Name: \_\_\_\_\_

By: \_\_\_\_\_  
Kami Lynch, City Clerk

## PLANNING OPTION AGREEMENT

This PLANNING OPTION AGREEMENT (this "Agreement"), made and entered into this March 1, 2020 (the "Effective Date"), by and between the City of Appleton having its office at 100 N. Appleton Street, Appleton, WI 54911 (hereinafter the "CITY"), and Merge, LLC, an Iowa limited liability company d/b/a Merge Urban Development Group, having its office at 604 Clay Street, Cedar Falls, Iowa 50613 (hereinafter "DEVELOPER").

WITNESSETH:

WHEREAS, the CITY owns property located at \_\_\_\_\_, in the City of Appleton, County of Outagamie, WI (Tax Parcel(s) 312027200, 312027201, 312027202, 312028101), and more fully described in the legal description, which is attached hereto and incorporated herein as Exhibit A (hereinafter "Project Site"); and

WHEREAS, the DEVELOPER has requested a planning option to allow time to complete all due diligence necessary to determine the physical and financial feasibility of constructing a mixed-use development with rental units and light- retail space; and

WHEREAS, CITY desires to see the Project Site developed in an active mixed-use development that generates economic activity and increases assessed land value, thereby generating additional property tax base for the community; and

WHEREAS, CITY is willing to negotiate a sale of the Project Site with the DEVELOPER upon a determination by both parties of the economic and physical viability of proposed future uses.

NOW, THEREFORE, for good and valuable consideration, the parties mutually agree and state as follows:

1. The CITY hereby grants to DEVELOPER an exclusive Planning Option for an initial term expiring nine (9) months after the Effective Date for the Project Site (the "Initial Term"). This period is required in order to complete all due diligence necessary to determine the physical and financial feasibility of proposed future uses. The Initial Term of this Agreement may be extended by mutual written agreement of the parties, and, if so, such extended term will be known and is hereinafter referred to as the "Extended Term").
2. To secure the Initial Term, DEVELOPER shall pay CITY a non-refundable payment in the amount of One Thousand Dollars (\$1,000.00). If DEVELOPER is awarded the Extended Term, DEVELOPER shall pay to CITY an additional non-refundable payment in the amount of Five Thousand Dollars (\$5,000.00).
3. CITY, during the Initial Term, or any Extended Term, shall provide that the Project Site shall not be sold/conveyed or leased to any other legal entity and hereby agrees to grant to the DEVELOPER exclusive negotiating rights for the purchase or lease of said real property during the Initial Term and any Extended Term.
4. CITY hereby grants DEVELOPER full access to the site for purposes of completing due diligence including, but not limited to, soil testing, engineering analysis, environmental assessments and inspections (including invasive assessments and inspections in the discretion of the DEVELOPER), other inspections and other needs for ingress and egress upon the land. This access is subject to any preexisting easements and licenses on the Project Site. However,

any such licenses will be terminated by CITY in the event the DEVELOPER determines that termination is reasonably necessary for completion of the due diligence necessary for this Agreement, and, in that event, DEVELOPER will be granted a day-by-day/day-to-day extension of the Initial Term or the Extended Term, if any, for the number of days that it takes for CITY to terminate such licenses.

5. CITY shall make available all known environmental reports and activity upon the Project Site. By entering into this Agreement, the DEVELOPER in no way assumes any responsibility or liability for site remediation.
6. During the pendency of this Agreement and upon determination of the feasibility of proposed future uses, the parties shall work in good faith to negotiate and execute a Development Agreement, and any other associated documentation, that shall provide for the acquisition and development of the Project Site to DEVELOPER. Such Development Agreement is subject to the approval of City of Appleton Common Council.
7. It is agreed and understood by the parties that all proposed future uses in the Development Agreement shall complement existing uses on adjacent properties and comply with City of Appleton Comprehensive Plan 2010-2030. The City of Appleton shall coordinate the public agency participation in planning, obtaining data from public records as may be available, reviewing and commenting on aspects of proposed future uses in a timely manner.
8. DEVELOPER shall demonstrate the ability to obtain financing for the proposed future uses prior to the expiration of this Agreement.
9. DEVELOPER understands that CITY shall approve any final design plans as a condition of receiving any financial assistance from CITY. CITY financial assistance may be in the form of Tax Increment Financing or other governmental grants paid to DEVELOPER in accordance with the Development Agreement.
10. If the parties agree upon and execute a Development Agreement prior to the expiration of this Agreement, CITY shall convey the Project Site to the DEVELOPER in accordance with the terms and conditions of the Development Agreement, and any associated documentation.
11. If a Development Agreement is not agreed to by the parties prior to the expiration of this Agreement, and no extension has been agreed to by the parties, this Agreement is hereby terminated and the DEVELOPER shall furnish to CITY all environmental reports and studies, and surveys relating to the Project Site.
12. In the event the DEVELOPER determines that the proposed use on the Project Site is not feasible during the pendency of this Agreement, DEVELOPER may terminate this Agreement and shall notify CITY in writing of the termination.
13. CITY and DEVELOPER shall pay all of their own legal fees, third party fees, customary closing costs and other costs related to this Agreement, the Development Agreement, and any lease or sale associated with this Agreement.

IN WITNESS WHEREOF,

this Agreement has been duly executed as of the Effective Date.

**City of Appleton**



\_\_\_\_\_

**Merge, LLC**



\_\_\_\_\_

Brent Dahlstrom, Manager



EXHIBIT A

Parcel 31-2-0272-00

Part of Lots One (1), Two (2) and Three (3), in Block Twenty-seven (27), APPLETON PLAT, City of Appleton, Outagamie County, Wisconsin, according to the recorded Assessor's Map of said City, bounded and described as follows: Commencing at the Northwest corner of said Lot 1; thence S 0°20'12" E, 34.06 feet along the East right of way line of Appleton Street to the point of beginning; thence N 89°33'28" E, 90.83 feet; thence N 0°26'32" W, 13.00 feet; thence N 89°33'28" E, 193.56 feet; thence S 0°22'55" E, 131.67 feet along the West right of way line of Oneida Street; thence S 89°36'00" W, 185.54 feet along the North right of way line of Midway; thence N 0°22'08" W, 65.17 feet; thence S 89°33'28" W, 98.89 feet; thence N 0°20'12" W, 53.36 feet along the East right of way line of Appleton Street to the point of beginning.

Parcel 31-2-0272-01

Lot One (1) of Certified Survey Map No. 2447, filed in Volume 13 of Certified Survey Maps on page 2447, as Document No. 1177602 of the Outagamie County Register of Deeds, City of Appleton, Outagamie County, Wisconsin.

Parcel 31-2-0272-02

Lot One (2) of Certified Survey Map No. 2447, filed in Volume 13 of Certified Survey Maps on page 2447, as Document No. 1177602 of the Outagamie County Register of Deeds, City of Appleton, Outagamie County, Wisconsin.

Parcel 31-2-0281-01

Being the North 97.17 Feet of Lots One (1) and Two (2) and the North 97.17 Feet of the West 30 Feet of Lot Three (3), Block Twenty-eight (28), Appleton Plat, City of Appleton, Outagamie County, State of Wisconsin, according to the Recorded Assessor's Map of said City.



# MEMORANDUM

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“...meeting community needs...enhancing quality of life.”

TO: Community & Economic Development Committee (CEDC)

FROM: Matt Rehbein, Economic Development Specialist

DATE: January 22, 2020

RE: Planning Option Agreement for the Blue Ramp and Conway Hotel Sites – Merge, LLC

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The City of Appleton has received a Planning Option Agreement from Merge, LLC (attached) to provide Merge a 9-month period (March 1, 2020 to December 31, 2020) to conduct due diligence for a potential mixed-use development on the Blue Ramp and Conway Hotel sites. In return for this option, Merge would pay the City \$1,000. A map of the Blue Ramp site and Conway Hotel site is included with this memo.

Community and Economic Development Department Staff met with Merge on November 6, 2019 to discuss potential sites for development in the City of Appleton. While not actively marketed, these sites were of great interest to Merge due to their proximity to parking, location in an Opportunity Zone and a strong, vibrant downtown. The City received a Letter of Interest from Merge on November 29, 2019 (attached) expressing their interest in investigating these sites further. Given the cost to conduct the due diligence and prepare conceptual plans, Merge Urban Development Group would like exclusive right to conduct due diligence for this term and the assurance that the City would be interested in selling these parcels for a mixed-use development that is aligned with our Comprehensive Plan.

A listing of examples of other projects completed or underway by Merge is attached to this memo. Per Community and Economic Development Department Staff in Oshkosh, this group has met or exceeded their obligations on the Marion Road Redevelopment mixed-use project.

**Staff Recommendation:**

The Planning Option Agreement for the Blue Ramp and Conway Hotel sites from Merge, LLC  
**BE APPROVED.**

## PLANNING OPTION AGREEMENT

This PLANNING OPTION AGREEMENT (this "Agreement"), made and entered into this March 1, 2020 (the "Effective Date"), by and between the City of Appleton having its office at 100 N. Appleton Street, Appleton, WI 54911 (hereinafter the "CITY"), and Merge, LLC, an Iowa limited liability company d/b/a Merge Urban Development Group, having its office at 604 Clay Street, Cedar Falls, Iowa 50613 (hereinafter "DEVELOPER").

WITNESSETH:

WHEREAS, the CITY owns property located at \_\_\_\_\_, in the City of Appleton, County of Outagamie, WI (Tax Parcel(s) 312027200, 312027201, 312027202, 312028101), and more fully described in the legal description, which is attached hereto and incorporated herein as Exhibit A (hereinafter "Project Site"); and

WHEREAS, the DEVELOPER has requested a planning option to allow time to complete all due diligence necessary to determine the physical and financial feasibility of constructing a mixed-use development with rental units and light- retail space; and

WHEREAS, CITY desires to see the Project Site developed in an active mixed-use development that generates economic activity and increases assessed land value, thereby generating additional property tax base for the community; and

WHEREAS, CITY is willing to negotiate a sale of the Project Site with the DEVELOPER upon a determination by both parties of the economic and physical viability of proposed future uses.

NOW, THEREFORE, for good and valuable consideration, the parties mutually agree and state as follows:

1. The CITY hereby grants to DEVELOPER an exclusive Planning Option for an initial term expiring nine (9) months after the Effective Date for the Project Site (the "Initial Term"). This period is required in order to complete all due diligence necessary to determine the physical and financial feasibility of proposed future uses. The Initial Term of this Agreement may be extended by mutual written agreement of the parties, and, if so, such extended term will be known and is hereinafter referred to as the "Extended Term").
2. To secure the Initial Term, DEVELOPER shall pay CITY a non-refundable payment in the amount of One Thousand Dollars (\$1,000.00). If DEVELOPER is awarded the Extended Term, DEVELOPER shall pay to CITY an additional non-refundable payment in the amount of Five Thousand Dollars (\$5,000.00).
3. CITY, during the Initial Term, or any Extended Term, shall provide that the Project Site shall not be sold/conveyed or leased to any other legal entity and hereby agrees to grant to the DEVELOPER exclusive negotiating rights for the purchase or lease of said real property during the Initial Term and any Extended Term.
4. CITY hereby grants DEVELOPER full access to the site for purposes of completing due diligence including, but not limited to, soil testing, engineering analysis, environmental assessments and inspections (including invasive assessments and inspections in the discretion of the DEVELOPER), other inspections and other needs for ingress and egress upon the land. This access is subject to any preexisting easements and licenses on the Project Site. However,

any such licenses will be terminated by CITY in the event the DEVELOPER determines that termination is reasonably necessary for completion of the due diligence necessary for this Agreement, and, in that event, DEVELOPER will be granted a day-by-day/day-to-day extension of the Initial Term or the Extended Term, if any, for the number of days that it takes for CITY to terminate such licenses.

5. CITY shall make available all known environmental reports and activity upon the Project Site. By entering into this Agreement, the DEVELOPER in no way assumes any responsibility or liability for site remediation.
6. During the pendency of this Agreement and upon determination of the feasibility of proposed future uses, the parties shall work in good faith to negotiate and execute a Development Agreement, and any other associated documentation, that shall provide for the acquisition and development of the Project Site to DEVELOPER. Such Development Agreement is subject to the approval of City of Appleton Common Council.
7. It is agreed and understood by the parties that all proposed future uses in the Development Agreement shall complement existing uses on adjacent properties and comply with City of Appleton Comprehensive Plan 2010-2030. The City of Appleton shall coordinate the public agency participation in planning, obtaining data from public records as may be available, reviewing and commenting on aspects of proposed future uses in a timely manner.
8. DEVELOPER shall demonstrate the ability to obtain financing for the proposed future uses prior to the expiration of this Agreement.
9. DEVELOPER understands that CITY shall approve any final design plans as a condition of receiving any financial assistance from CITY. CITY financial assistance may be in the form of Tax Increment Financing or other governmental grants paid to DEVELOPER in accordance with the Development Agreement.
10. If the parties agree upon and execute a Development Agreement prior to the expiration of this Agreement, CITY shall convey the Project Site to the DEVELOPER in accordance with the terms and conditions of the Development Agreement, and any associated documentation.
11. If a Development Agreement is not agreed to by the parties prior to the expiration of this Agreement, and no extension has been agreed to by the parties, this Agreement is hereby terminated and the DEVELOPER shall furnish to CITY all environmental reports and studies, and surveys relating to the Project Site.
12. In the event the DEVELOPER determines that the proposed use on the Project Site is not feasible during the pendency of this Agreement, DEVELOPER may terminate this Agreement and shall notify CITY in writing of the termination.
13. CITY and DEVELOPER shall pay all of their own legal fees, third party fees, customary closing costs and other costs related to this Agreement, the Development Agreement, and any lease or sale associated with this Agreement.

IN WITNESS WHEREOF,

this Agreement has been duly executed as of the Effective Date.

**City of Appleton**


\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Merge, LLC**

  
\_\_\_\_\_

Brent Dahlstrom, Manager

EXHIBIT A

Parcel 31-2-0272-00

Part of Lots One (1), Two (2) and Three (3), in Block Twenty-seven (27), APPLETON PLAT, City of Appleton, Outagamie County, Wisconsin, according to the recorded Assessor's Map of said City, bounded and described as follows: Commencing at the Northwest corner of said Lot 1; thence S 0°20'12" E, 34.06 feet along the East right of way line of Appleton Street to the point of beginning; thence N 89°33'28" E, 90.83 feet; thence N 0°26'32" W, 13.00 feet; thence N 89°33'28" E, 193.56 feet; thence S 0°22'55" E, 131.67 feet along the West right of way line of Oneida Street; thence S 89°36'00" W, 185.54 feet along the North right of way line of Midway; thence N 0°22'08" W, 65.17 feet; thence S 89°33'28" W, 98.89 feet; thence N 0°20'12" W, 53.36 feet along the East right of way line of Appleton Street to the point of beginning.

Parcel 31-2-0272-01

Lot One (1) of Certified Survey Map No. 2447, filed in Volume 13 of Certified Survey Maps on page 2447, as Document No. 1177602 of the Outagamie County Register of Deeds, City of Appleton, Outagamie County, Wisconsin.




Parcel 31-2-0272-02

Lot One (2) of Certified Survey Map No. 2447, filed in Volume 13 of Certified Survey Maps on page 2447, as Document No. 1177602 of the Outagamie County Register of Deeds, City of Appleton, Outagamie County, Wisconsin.

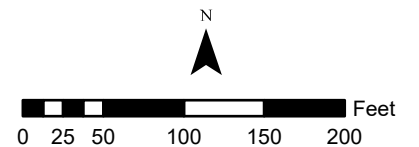
Parcel 31-2-0281-01

Being the North 97.17 Feet of Lots One (1) and Two (2) and the North 97.17 Feet of the West 30 Feet of Lot Three (3), Block Twenty-eight (28), Appleton Plat, City of Appleton, Outagamie County, State of Wisconsin, according to the Recorded Assessor's Map of said City.



- ▭ Subject Area
-  Library
-  City Hall
-  Transit Center

# Blue Ramp & Conway Hotel Planning Option Agreement Map



November 29, 2019

City of Appleton  
Department of Community & Economic Development  
100 N. Appleton Street  
Appleton, WI 54911

Dear Appleton Stakeholders,

On behalf of our development team, thank you for the opportunity to visit Appleton, WI and to tour development sites within the East College Avenue Opportunity Zone.

Merge has pursued OZ development in small to mid-sized communities across the Midwest since the initiative was put into law in late 2017. The markets we seek are usually under 100,000 in population, have a presence of higher-ed, and offer a compelling balance between lifestyle and cost of living. In 2019, our team gained approval of two projects in the State of Wisconsin - the North Side Yard mixed-use project in Stevens Point (\$40M project cost) as well as Mackson Corners & the Brio Building in Oshkosh (\$50M project cost). We continue to plan similar developments across Wisconsin, Iowa, Minnesota, and South Dakota - several of which will break ground next year.

The City of Appleton's East College Avenue Opportunity Zone has attractive features that make mixed-use development projects viable investments when paired with local planning efforts and incentives. Appleton's investments in district parking, strong downtown employment, and diverse retail & entertainment options make it an attractive place for residential density of scale.

Two sites within the City were of near-term interest to Merge: the former Hotel Conway site and the former Blue Ramp Site. Together, these sites have the potential to add significant future taxable value through residential density of scale. Because of their proximity to both College Avenue and the City's parking assets, the sites create an ideal place for 1) urban dwellings that offset daytime parking and 2) thoughtfully placed first-floor retail or amenities for residents that create a pedestrian-friendly experience. Our team would like to bring a sketch and estimate of project costs to facilitate a discussion about Merge mixed-use development on these sites. Before we invest in an architectural concept, we would like to understand that the City is receptive to this type of development on these city-owned properties.

Enclosed please find precedent projects for reference. Please do not hesitate to contact me with questions.

Sincerely,



Brent Dahlstrom



## PRECEDENT *Urban Street Scene*

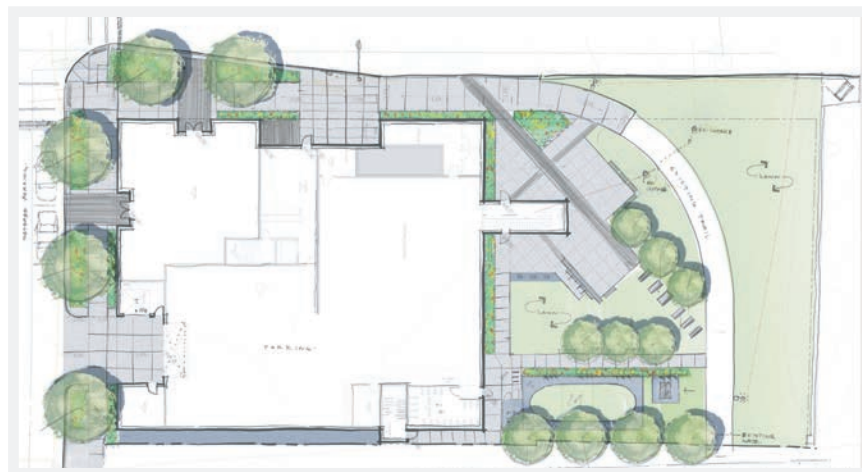


### 6COM MIXED-USE DEVELOPMENT

6th Street & Commercial Street  
Waterloo, Iowa

UNITS: 76    RETAIL: 2,000 sq ft

This project was an open lot with access to the waterfront and proximity to the bike trail. There are many autorelated businesses east and south, while on the west side more banks, restaurants and shops. The goal of the building and its use was to engage the pedestrians along Commercial Street with retail-oriented programs, bring people together at the courtyard level on 2nd floor, and expose residents to amazing city views. The unit mix provides attainable living options for young professionals – small unit scale made comfortable and practical through impeccable design.



#### PROJECT REFERENCE:

Quentin Hart, Mayor of Waterloo  
715 Mulberry Street, Waterloo, IA 50703  
Ph: (319) 291-4301

# PRECEDENT *Urban Street Scape*

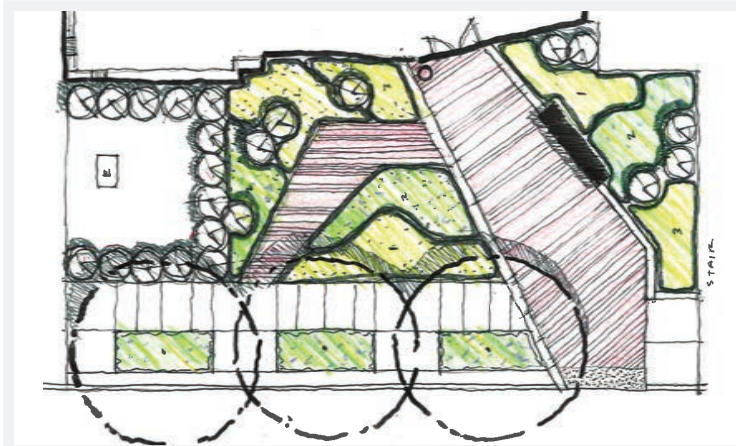


## ART BLOC MIXED-USE DEVELOPMENT

Art Bloc  
Waterloo, Iowa

UNITS: 70    RETAIL: 1,750-3,099 sq ft

This project was one of the first Opportunity Zone developments to break ground in the nation. The existing site had limited “street frontage” and connectivity to the river due to height of the existing raised plaza. To create an active “first floor”, it was critical to create a form that linked the street plane to the plaza out to the amphitheater – an underutilized community asset. The site includes 70 residential units, each with a river-front view.



### PROJECT REFERENCE:

Dana Jergenson, Commercial RM Team Manager  
US Bank, N.A., 425 Cedar St., Waterloo, IA 50704  
Ph: (319) 273-8750  
Email: dana.jergenson@usbank.com

# PRECEDENT *Blending University & Community*



## DRAKE NEIGHBORHOOD MIXED-USE DEVELOPMENT

Des Moines, Iowa

UNITS: 320    RETAIL: 23,727 sq ft

The Drake University Dogtown Neighborhood Plan is the result of an exclusive agreement with Drake University to purchase a section of property adjacent to campus. The area is recovering from a history of deterioration of property and violence. The project is synonymous with Drake University taking the lead on blending University with Neighborhood for the greater good. Communications strategy has been of utmost importance as Drake navigates neighborhood, city, and local business through this new narrative. The development also includes a parking structure.



# PRECEDENT *Liner Building Attached to City Parking*



## PORT OF DUBUQUE MIXED-USE DEVELOPMENT

East 4th / East 5th Street  
Dubuque, Iowa

UNITS: 187    RETAIL: 23,727 sq ft

The City of Dubuque spurred local development through their early investment in a district parking strategy. The parking structure is surrounded by a casino, a hotel, office and entertainment uses. The building is designed as a mass timber structure with a brick exterior, honoring the industrial urban fabric of the city with its exterior material and unique window frames.



# PRECEDENT *Neighborhood Redevelopment Plan*



## MARION ROAD REDEVELOPMENT MIXED-USE DEVELOPMENT

Oshkosh, Wisconsin  
UNITS: 240+    RETAIL: 30,000+ sq ft

Oshkosh, WI is a UW-system city located where the Fox River enters Lake Winnebago. Oshkosh is known as "Wisconsin's Event City" because of the year-round events planned around the lake and its music festivals. The Marion Road Redevelopment Plan consists of 3 sites with environmental contamination due to a history of industrial uses. The neighborhood plan encourages community access to the water and offers a range of housing options to encourage a mixed-income urban neighborhood.



**ADOPTED:**  
**PUBLISHED:**  
Office of the City Clerk

**XX-20**

**AN ORDINANCE AMENDING SECTION 20-69 OF CHAPTER 20 OF THE MUNICIPAL CODE OF THE CITY OF APPLETON, RELATING TO DEFINITIONS.**

(Utilities Committee – / /2020)

The Common Council of the City of Appleton does ordain as follows:

**Section 1:** That Section 20-69 of Chapter 20 of the Municipal Code of the City of Appleton, relating to definitions, is hereby amended to read as follows by adding the following definitions:

**Sec. 20-69. Definitions.**

***Total Kjeldahal Nitrogen (TKN):*** The total amount of nitrogen bound in organize substances and nitrogen in ammonia (NH<sub>3</sub>-N) within wastewater that is obtained through laboratory sample digestion, usually expressed as a concentration (i.e., mg/L).

***Total Phosphorus (TP):*** Multi-step laboratory test which measures all the forms of phosphorus in the unfiltered wastewater sample (e.g., orthophosphate, condensed phosphate, and organize phosphate), usually expressed as a concentration (i.e., mg/L).

**Section 2:** This ordinance shall be in full force and effect from and after its passage and publication.

Dated: \_\_\_\_\_

\_\_\_\_\_  
Jacob A. Woodford, Mayor  
City Law 19-1150

\_\_\_\_\_  
Kami Lynch, City Clerk

**ADOPTED:**  
**PUBLISHED:**  
Office of the City Clerk

**XX-20**

**AN ORDINANCE AMENDING SECTION 20-203(2) OF CHAPTER 20 OF THE MUNICIPAL CODE OF THE CITY OF APPLETON, RELATING TO BASIS.**

(Utilities Committee – / /2020)

The Common Council of the City of Appleton does ordain as follows:

**Section 1:** That Section 20-203(2) of Chapter 20 of the Municipal Code of the City of Appleton, relating to basis, is hereby amended to read as follows:

**Sec. 20-203. Basis.**

- (2) The quantity and quality of sewage discharged into the sewage system. The quantity of sewage shall be measured by meter, weir or other measuring device approved by the Utilities Manager and installed by the industry or user at its own expense. The quality of sewage shall be measured by the pounds of suspended solids, the pounds of biochemical oxygen demand (BOD), the pounds of total phosphorus (TP), and the pounds of total Kjeldahal nitrogen (TKN) contained therein. ~~The determination of suspended solids, BOD, TP, and TKN contained in the waste shall and the pounds of biochemical oxygen demand (BOD) contained therein.~~ ~~The determination of suspended solids and BOD contained in the waste shall~~ be in accordance with guidelines approved by the EPA and DNR establishing test procedures for the analysis of pollutants. To determine the quality of the sewage and waste, samplings and analyses of twenty-four (24) composite samples shall be made daily by and at the expense of the industry or user and accumulated over the billing period. The City shall have the right to access all measurement and analytical facilities and shall cause sufficient tests to be made to establish the validity of the information being supplied.

**Section 2:** This ordinance shall be in full force and effect from and after its passage and publication.

Dated: \_\_\_\_\_

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**Jacob A. Woodford, Mayor**  
City Law: 19-1150

---

**Kami Lynch, City Clerk**



**ADOPTED:**  
**PUBLISHED:**  
Office of the City Clerk

**XX-20**

**AN ORDINANCE AMENDING SECTION 20-204(b) OF CHAPTER 20 OF THE MUNICIPAL CODE OF THE CITY OF APPLETON, RELATING TO RATES.**

(Utilities Committee – / /2020)

The Common Council of the City of Appleton does ordain as follows:

**Section 1:** That Section 20-204(b) of Chapter 20 of the Municipal Code of the City of Appleton, relating to rates, is hereby amended to read as follows:

**Sec. 20-204. Rates.**

(b) The City shall determine the strength of normal domestic waste from its non-monitored customers by subtracting the industrial monitored loading by parameter from the total loading treated by the City. The net pounds of suspended solids, biochemical oxygen demand (BOD), total phosphorus (TP), and total Kjeldahal nitrogen (TKN) ~~biochemical oxygen demand (BOD) and total suspended solids~~ from the non-monitored customers shall be divided by 8.34 (a conversion factor) and then divided by the net billable flow (expressed in millions of gallons) from those non-monitored customers to determine whether the strength of the waste is within a reasonable range for a normal domestic household. The City will consider normal domestic strength waste to have a BOD concentration of not more than three hundred (300) milligrams per liter. Should this calculation for BOD be higher than three hundred (300) milligrams per liter, a review will be done of the city users to determine if there are additional users that should be monitored for high strength water. This methodology shall be followed to assure that the charges are proportionately made to all customers. No users shall pay less per one thousand (1,000) gallons than the current effective rate associated with the per unit costs for environmental treatment based on the waste characteristics determined to be applicable for domestic or industrial users.

**Section 2:** This ordinance shall be in full force and effect from and after its passage and publication.

Dated: \_\_\_\_\_

\_\_\_\_\_

Jacob A. Woodford, Mayor

Kami Lynch, City Clerk



*"...meeting community needs...enhancing quality of life."*

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Department of Utilities  
Wastewater Treatment Plant  
2006 E Newberry Street  
Appleton, WI 54915  
920-832-5945 tel.  
920-832-5949 fax

**TO:** Chairperson Vered Meltzer and Members of the Utilities Committee

**FROM:** Chris Stempa, Utilities Deputy Director

**DATE:** October 22, 2020

**RE:** *Approve: 2019 AWWTP Improvements Project Engineering Services Amendment #1 increasing the McMahon total contract amount by \$49,630 from \$169,886 to \$219,516*

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**BACKGROUND:**

The Appleton Wastewater Treatment Plant (AWWTP) Improvements Project engineering service contract was awarded to McMahon by Common Council in April 2019. This project was originally comprised by five individual projects identified in the 2019 budget that involve the rehabilitation, replacement, or improvements to address immediate needs and long term reliability. Those project elements include Return Activated Sludge (RAS) pump replacement, piping modifications (e.g. blended sludge, waste gas, and filtrate), primary clarifier concrete recoating, and outside secondary containment (chemical offload) repairs.

The filtrate tank repairs and piping modification contract was awarded by Common Council in early March 2020 in an effort to advance the work ahead of the other project elements because of implications to seasonal low-level ammonia effluents. That decision was necessary to ensure compliance with the Wisconsin Pollution Discharge Elimination System (WPDES) permit and specifically ammonia limits during warm weather months. This task demanded the focus of plant staff and McMahon to facilitate the work until it was successfully completed in May 2020. During that initial phase of active construction there were other critical operation and maintenance needs identified which were outside of McMahon's original contract scope. Additionally, the Utilities Department staff acknowledged synergies with parallel efforts required of 2020 Capital Improvement Projects (CIPs) that had not been initiated at that time. McMahon was asked to provide a contract amendment for authorization summarizing the new scope items highlighted below.

1. Plant Effluent Pumping Station #2 Pump Replacement (2020 CIP)
  - a. Perform hydraulic calculations to determine capacity of existing Plant Effluent Pumping Station in Building H.
  - b. Provide options for replacement of the three plant effluent pumps.
  - c. Provide options for increasing access to the lower level of Building H.

- d. Provide final design services for the Plant Effluent Pump replacement, including replacing piping and providing new drives.
  - e. Provide final design services for new controls for the Plant Effluent Pump Station.
  - f. Provide bidding and construction services for this project.
2. Primary Clarifier #5 and #6 Drive Replacement (2020 CIP)
    - a. Provide final design services for raising the bridge of the two clarifiers and replacing the drive units.
    - b. Provide survey services to determine elevations of the primary influent channel, clarifiers previously raised and clarifiers #5 and #6.
    - c. Observe condition of primary clarifiers #5 and #6 tankage and steel and provide memorandum.
    - d. Provide final design services for the coating or primary clarifier #5 and #6 tankage and steel.
    - e. Provide bidding and construction services for the work on Primary Clarifier #5 and #6.
3. B-Building Headworks Slide Gate Replacement
    - a. Observe condition of severely deteriorated aluminum slide gate in Headworks Building.
    - b. Provide plans and specifications for the replacement of the slide.
    - c. Provide bidding and construction services for this work
4. Blended Sludge Piping Replacement
    - a. Provide options for replacing compromised blended sludge piping in pipe chase and lower level of Digester Building.
    - b. Provide plans and specifications for the replacement of the blended sludge piping.
    - c. Provide bidding and construction services for this work.
5. B-Building and D-Building Programmable Logic Controllers (PLC's)
    - a. Provide plans and specifications for the upgrade of unsupported Schneider Quantum Processors to M580s with Programs to Unity Pro.
    - b. Design new communication cable for the PLC replacements.
    - c. Provide bidding and construction services for this work

## **SUMMARY**

The cost of additional engineering services outlined as part of the McMahon Contract Amendment #1 totals \$49,630. The proposed costs take advantage of parallel engineering activities within McMahon's existing contract. It provides opportunity to receive greater value through economy of scale engineering services and public bid construction. As an example, the estimated fees for standalone engineering services comparable to those outlined in Amendment #1 for only the 2020 Plant Effluent Pumping Station #2 Pump Replacement totaled \$75,000.

This amendment would result in the contract amount increasing from \$169,886 to \$219,516. If you have any questions regarding this project, please contact Chris Stempa at ph: 832-5945.

## Department of Public Works – Engineering Division

### MEMO

**TO:** Utilities Committee

**FROM:** Paula Vandehey, Director of Public Works  
Pete Neuberger, Staff Engineer  
Sue Olson, Staff Engineer

**DATE:** November 10, 2020

**RE:** Approval to Single-Source and Award 2020H Stormwater Consulting Services Contract for Edgewood Drive (CTH JJ) Drainage Study to raSmith, Inc. in an amount not to exceed \$47,500.

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The Department of Public Works is requesting approval to single-source and award the 2020H Stormwater Consulting Services Contract for the Edgewood Drive (CTH JJ) Drainage Study to raSmith, Inc. in an amount not to exceed \$47,500. After this contract, \$185,619 will remain in the 2020 stormwater consulting services budget.

In 2020, the City has continued to experience pressure within the North Side Development Corridor area to serve potential development in areas east of Ballard Road, west of French Road, south of Broadway Drive, and north of Edgewood Drive. DPW anticipates that Edgewood Drive (CTH JJ) from French Road to 600 feet east of Lightning Drive will be urbanized within the next six years, in coordination with Outagamie County. The proposed contract will allow the City to continue planning and preliminary engineering for the stormwater infrastructure required to serve this area, and includes preparing a drainage study for the planned urbanization of Edgewood Drive from French Road to approximately 600 feet west of Lightning Drive, and developing 30% concept engineering plans for the planned roadway urbanization and its stormwater management/conveyance practices. The report will also consider potential options to manage post-development runoff for future adjacent tributary parcel areas.

On behalf of DPW, raSmith is currently engaged in, or has recently completed, several study and design contracts within the North Side Development Corridor Area, including: Lightning Drive Study update (2019D contract), French Road Urbanization Study (2019G contract), Lightning Drive Extension 60% Design (2020G contract), and Lightning-French Drainage Corridor Study (2019R contract). Based on raSmith's excellent work on the referenced projects, as well as their familiarity with this area, the City obtained a single-source quote from raSmith. raSmith's prior and ongoing work in this area makes them uniquely qualified to cost-effectively perform the proposed work, and staff considers the costs, hours, and scope provided by raSmith to be in line with expectations based on similar work.



**Valley Transit**

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CONNECTING THE **FOX CITIES**

## Public Transportation Agency Safety Plan

DRAFT

LAST UPDATED October 2020

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DRAFT

# PUBLIC TRANSPORTATION AGENCY SAFETY PLAN for Valley Transit

## Transit Agency Information

<b>Transit Agency</b>	<b>Name</b>		<b>Address</b>
	Valley Transit		801 S Whitman Avenue
<b>Accountable Executive</b>	<b>Name</b>		<b>Title</b>
	Ron McDonald		General Manager
<b>Chief Safety Officer</b>	<b>Name</b>		<b>Title</b>
	Amy Erickson		Assistant General Manager
<b>Mode(s) of Service Covered by This Plan:</b>		<b>List All FTA Funding Types (e.g., 5307, 5337, 5339):</b>	
Fixed Route-Directly Operated		5307	
Paratransit-Contracted		5307	
<b>Mode(s) of Service Provided by the Transit Agency (Directly operated or contracted service)</b>			
Fixed Route-Directly Operated			
Paratransit- Contracted			
<b>Does the agency provide transit services on behalf of another transit agency or entity?</b>	<b>Yes</b>	<b>No</b>	<b>Description of Arrangement(s)</b>
		X	
<b>Transit Agency(ies) or Entity(ies) for Which Service Is Provided</b>	<b>Name</b>		<b>Address</b>

## Plan Development, Approval, and Updates

<b>Signature by the Accountable Executive</b>	<b>Name</b>		<b>Date of Signature</b>
	Ron McDonald		
	<b>Signature</b>		
<b>Approval by Board of Directors (or Equivalent)</b>	<b>Approving Entity</b>		<b>Date of Approval</b>
	Fox Cities Transit Commission		
	<b>Signatures</b>		
	George Dearborn-Chair		
	Bob Buckingham		
	Aldersperson Joe Martin		
	Larry Wurdinger		
	Aldersperson Vared Meltzer		
Richard Detienne			
Carol Kasimor			



	Trish Nau	
	Greg VandeHey	
	Joe Stephenson-Vice Chair	
	Diane Dexter	
	Daniel Wilson	
	Vacant	

## Activity Log

<b>Version Number and Updates</b>			
<i>Complete history of successive versions of this plan</i>			
<b>Version No.</b>	<b>Section/Pages Affected</b>	<b>Reason for Change</b>	<b>Date Issued</b>
1	All	Document Creation	October 2020

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## Background

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The Moving Ahead for Progress in the 21<sup>st</sup> Century (MAP-21) Act grants the Federal Transit Administration (FTA) the authority to establish and enforce a comprehensive regulatory framework to oversee the safety of public transportation throughout the United States. As a component of this safety oversight framework, MAP-21 requires certain recipients of FTA Chapter 53 funding to develop and implement a Public Transit Agency Safety Plan (PTASP).

In addition to greater safety oversight responsibilities, MAP-21’s grant of expanded regulatory authority puts FTA in a position to provide guidance to transit agencies that strengthens the use of safety data to support management decisions, improves the commitment of transit leadership to safety, and fosters a culture of safety that promotes awareness and responsiveness to safety risks. The framework to this approach is called a safety management system (SMS), which moves the transit industry towards a more holistic, performance-based approach to safety. The SMS framework has been adopted by FTA in its National Public Transportation Safety Plan (“national safety plan”).

The PTASP for **Valley Transit (VT)** supports and is consistent with an SMS approach to safety risk management. SMS is an integrated collection of policies, processes, and behaviors meant to ensure a formalized, proactive, and data-driven approach to safety risk management. The aim of an SMS is to increase the safety performance of transit systems by proactively identifying, assessing, and controlling safety risks. The approach is meant to be flexible and scalable, so that transit agencies of all types and sizes can efficiently meet the basic requirements of MAP-21. The PTASP for **Valley Transit (VT)** addresses the following elements, outlined in **Table 1** (below):

<input type="checkbox"/> <b>Safety Management Policy Statement:</b>	A policy statement establishing senior management commitment to continual safety improvement, signed by the executive accountable for the operation of the agency and the board of directors.
<input type="checkbox"/> <b>Document Control:</b>	A description of the regular annual process used to review and update the plan including a timeline for implementation of the process.
<input type="checkbox"/> <b>Core Safety Responsibilities:</b>	A description of the responsibilities, accountabilities, and authority of the accountable executive, the key safety officers, and key members of the safety management team.
<input type="checkbox"/> <b>Safety Training Program:</b>	A description of the comprehensive safety training program for agency staff that ensures that staff are trained and competent to perform their safety duties.
<input type="checkbox"/> <b>Safety Risk Management:</b>	A description of the formal processes the agency uses to identify hazards, analyze and assess safety risks, and develop, implement and evaluate risk controls.
<input type="checkbox"/> <b>Safety Risks:</b>	A description the most serious safety risks to the public, personnel and property.
<input type="checkbox"/> <b>Risk Control:</b>	A description of the risk control strategies and actions that the agency will undertake to minimize exposure of the public, personnel and property to hazards, including a schedule for implementing the risk control strategies and the primary entity responsible for each strategy.
<input type="checkbox"/> <b>Safety Assurance:</b>	A list of defined safety performance indicators for reach priority risk and associated targets the agency will use to determine if it is achieving the specified safety goals.
<input type="checkbox"/> <b>Desired Safety Outcomes:</b>	A description of desired safety outcomes for each risk using the measurable safety performance indicators established.

**Table 1: Elements of a Public Transportation Agency Safety Plan (PTASP)**

# 1 SAFETY POLICIES AND PROCEDURES

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## 1.1 COMMITMENT TO SAFETY

### Policy Statement

The management of safety is one of our core business functions. **Valley Transit** is committed to developing, implementing, maintaining, and constantly improving processes to ensure that all our transit service delivery activities take place under a balanced allocation of organizational resources, aimed at achieving the highest level of safety performance and meeting established standards.

All levels of management and all employees are accountable for the delivery of this highest level of safety performance, starting with the Accountable Executive.

**Valley Transit** commits to:

- Support the management of safety through the provision of appropriate resources, that will result in an organizational culture that fosters safe practices, encourages effective employee safety reporting and communication, and actively manages safety with the same attention to results as the attention to the results of the other management systems of the organization;
- Integrate the management of safety among the primary responsibilities of all managers and employees;
- Clearly define for all staff, managers, and employees, their accountabilities and responsibilities for the delivery of the organization's safety performance and the performance of our Safety Management System (SMS);
- Establish and operate hazard identification and analysis, and safety risk assessment activities, including an employee safety reporting program as a fundamental source for safety concerns and hazard identification, in order to eliminate or mitigate the safety risk of the consequences of hazards resulting from our operations or activities to a point which is consistent with our acceptable level of safety performance;
- Ensure that no action will be taken against any employee who discloses a safety concern through the employee safety reporting program, unless disclosure indicates, beyond any reasonable doubt, an illegal act, gross negligence, or a deliberate or willful disregard of regulations or procedures;
- Comply with, and wherever possible exceed, legislative and regulatory requirements and standards;
- Ensure that sufficient skilled and trained human resources are available to implement safety management processes;
- Ensure that all staff are provided with adequate and appropriate safety-related information and training, are competent in safety management matters, and are allocated only tasks commensurate with their skills;
- Establish and measure our safety performance against realistic and data-driven safety performance indicators and safety performance targets;

- Continually improve our safety performance through management processes that ensure that appropriate safety management action is taken and is effective; and
- Ensure externally supplied systems and services to support our operations are delivered meeting our safety performance standards.

## 1.2 ANNUAL PTASP REVIEW AND UPDATE

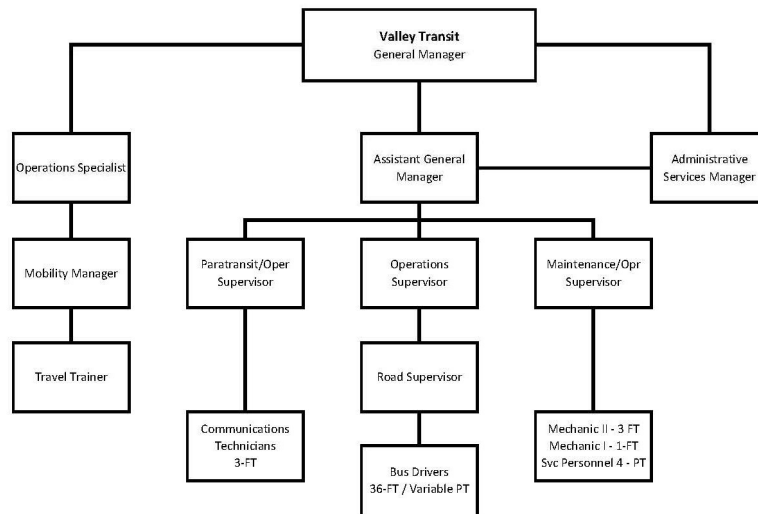
**Valley Transit (VT)** management will review the PTASP annually, update the document as necessary, and implement the changes within a timeframe that will allow the agency to timely submit to any annual or other periodic reviews, including its annual self-certification of compliance. At minimum, annual self-certification will consist of the Accountable Executive signing and dating this document.

Annual review of the PTASP will be conducted by **Valley Transit (VT)** by **December 1** of each calendar year. Necessary updates outside the annual update window may be handled as PTASP addenda. Reviews of the PTASP and any subsequent updates, addenda, adoption, and distribution activities will be documented in the PTASP Activity Log at the beginning of this document.

## 1.3 ORGANIZATION STRUCTURE AND SYSTEM SAFETY RESPONSIBILITIES

While the Accountable Executive has the ultimate responsibility for **Valley Transit's** implementation of its PTASP, **Valley Transit's** executive management has the overall responsibility of safe and secure operations of **Valley Transit** and contract service operators. Each employee is required to carry out specific system safety responsibilities, depending on the employee's position, in compliance with the PTASP.

The information provided in the Staff Safety Roles and Responsibilities table (Appendix A) describes each position and general system safety responsibilities, and the agency's reporting structure.



J:\GM - AGM\Human Resources\Table of Organization\2019\Table of Organization October 2020.xlsx

## 2 SAFETY RISK MANAGEMENT (SRM)

### 2.1 HAZARD IDENTIFICATION

Establishing an effective hazard identification program is fundamental to safety management at **Valley Transit**. Hazard identification can be reactive or proactive in nature: safety event reporting, incident investigation, and trend monitoring are essentially reactive; other hazard identification methods proactively seek feedback through data collection, observation, and day-to-day operations analysis. Common hazard identification activities may include:

- Safety assessments
- Trend monitoring
- Hazard and safety event reporting
- Safety surveys
- Safety audits
- Evaluating customer suggestions and complaints

The number of near misses, known as accident precursor data, is significantly greater than the number of accidents for comparable types of events. The practice of reporting and learning from accident precursor data is a valuable complement to other hazard identification practices. To be successful, hazard identification must take place within a non-punitive and just safety culture. **Valley Transit** employs systematic safety improvements by discovering and learning of potential weaknesses in the system's safety.

### 2.1.1 Non-Punitive Reporting Policy

**Valley Transit** is committed to the safest transit operating standards practicable. To achieve this, it is imperative that **Valley Transit** have uninhibited reporting of all safety events that may compromise safe operations. To this end, every employee is responsible for the communication of any information that may affect the integrity of transit safety. Such communication must be completely free of any form of reprisal.

**Valley Transit** will not take disciplinary action against any employee who discloses a safety event. This policy shall not apply to information received by **Valley Transit** from a source other than the employee, or that involves an illegal act, or a deliberate or willful disregard of rules, regulations, or agency policies or procedures.

**Valley Transit's** method of collection, recording, and disseminating information obtained from transit safety reports has been developed to protect, to the extent permissible by law, the identity of any employee who provides transit safety information.

## 2.2 RISK ASSESSMENT

Once a hazard has been identified, **Valley Transit** will conduct an assessment to determine the potential consequences. Factors to be considered are the likelihood of occurrence, the severity of the consequences (should there be an occurrence), and the level of exposure to the hazard. **Valley Transit** will assess risks subjectively by experienced personnel using a risk assessment matrix. Results of the risk assessment process will help determine whether the risk is being appropriately managed or controlled. If the risks are acceptable, the hazard will continue to be monitored. If the risks are unacceptable, steps will be taken by **Valley Transit** to lower the risk to an acceptable or tolerable level, or to remove, avoid, or otherwise eliminate the hazard.

## 2.3 RISK MITIGATION

The assessment process may indicate that certain hazards have an acceptable level of risk, while others require mitigation to an acceptable or tolerable level. **Valley Transit** will further manage risk by completing a **Hazard Assessment Log (Appendix E)** that can help prioritize safety risks. The level of risk can be lowered by reducing the severity of the potential consequences, likelihood of occurrence, exposure to that risk, or by some combination.

In general, **Valley Transit** will take the following safety actions to mitigate risk – these actions can be categorized into three broad categories, including:

### 1. Physical Defenses:

These include objects and technologies that are engineered to discourage, or warn against, or prevent inappropriate action or mitigate the consequences of events (e.g. traffic control devices, fences, safety restraining systems, transit controls/signals, transit monitoring systems, etc.)

**2. Administrative Defenses:**

These include procedures and practices that mitigate the likelihood of accident/incident (e.g. safety regulations, standard operating procedures, personnel proficiency, supervision inspection, training, etc.)

**3. Behavioral Defenses:**

These include behavioral interventions through education and public awareness campaigns aimed at reducing risky and reckless behavior of motorists, passengers and pedestrians; factors outside the control of the agency (e.g. the *Zero in Wisconsin* campaign)

## 2.4 PRIORITIZE SAFETY RISKS

Once a hazard has been identified and the risk level assessed, **Valley Transit** will prioritize safety risks.

# 3 SAFETY ASSURANCE

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Safety assurance provides the necessary feedback to ensure that the SMS is functioning effectively and that **Valley Transit** is meeting or exceeding its safety objectives. Safety assurance requires a clear understanding of how safety performance will be evaluated, or in other words, what metrics will be used to assess system safety and determine whether the SMS is working properly. Having decided on the metrics by which success will be measured, safety management requires embedding these metrics in the organizational culture and encouraging their use for ongoing performance improvement.

## 3.1 DEFINING SAFETY GOALS AND OBJECTIVES/OUTCOMES

Setting safety goals and objectives is part of strategic planning and establishing safety policy for **Valley Transit**. Clearly defining safety goals is the first part in creating a safety performance measurement system.

**Safety goals** are general descriptions of desirable long-term impacts. For example, a general safety goal might be:

*"Foster agency-wide support for transit safety by establishing a culture where management is held accountable for safety and everyone in the organization takes an active role in securing transit safety."*

**Safety objectives or outcomes** are more specific statements that define measurable results. For example, a specific safety objective for the goal stated above might be:



*"Establish regular transit safety meetings comprised of staff at varying levels, including executives, officers, managers, operators and maintenance personnel."*

The safety objective/outcome will then be measured by defining specific performance metrics, including a baseline and target, that **Valley Transit** will determine is reasonable.

## 3.2 DEFINING SAFETY PERFORMANCE MEASURES

Performance measurement is the regular systematic collection, analysis, and reporting of data that track resources used, work produced, and whether specific outcomes were achieved. In other words, it is a tool to quantify and improve performance, and engage and communicate with **Valley Transit** staff and external stakeholders.

The two core functions of performance measurement include monitoring and evaluating progress. Performance can be measured in terms of inputs, outputs, outcomes, and efficiency, among many other criteria.

**Valley Transit** will utilize these basic principles of performance measurement, including:

- Stakeholder involvement and acceptance
- Focus on agency goals and activities
- Clarity and precision
- Creditability and robustness
- Variety of measures
- Number of measures
- Hierarchy of measures
- Forward-looking measures
- Integration into agency decision-making
- Timely reporting
- Understand agency specifics, including context and scale of operations
- Realism of goals and targets

### 3.2.1 Metrics

System safety data is collected through a variety of sources and includes:

- Near miss information
- Accident investigation reports
- Internal safety audits (or reviews)
- Safety committee meetings
- Injury reports (including occupational injury)
- Event reports (including accidents, incidents, and occurrences)
- System monitoring (including testing and inspection records)
- Hazard management program

This safety data will be analyzed and used for development of key safety performance indicators and targets.

**Valley Transit** will initially focus on areas based on data delivered to the National Transit Database (NTD), as the following:

- **Fatalities**
  - Total number of reportable fatalities, and rate per total vehicle revenue miles
- **Injuries**
  - Total number of reportable injuries, and rate per total vehicle revenue miles
- **Safety Events**
  - Total number of reportable events, and rate per total vehicle revenue miles
- **System Reliability**
  - Mean distance between major mechanical failures

These safety performance measures are used to select improvement targets for these four measures and for each mode of transit, in order to encourage improvements and monitor the safety performance of delivering transit services. In addition, **Valley Transit** will select additional performance measures and targets, both leading and lagging, to insure continual improvement of our SMS.

**Valley Transit** will make its safety performance measures improvement targets available to applicable state agencies and metropolitan planning organizations (MPOs), and, to the maximum extent practicable, will coordinate with both in the selection of safety performance targets.

The safety data collected from the above sources will be analyzed for potential safety impacts. Identified areas of concern are reported to appropriate personnel in the form of specific project reports, memos, and recommendations from the safety committee.

Records of system safety data are maintained for a minimum of three years. Certain information, such as safety certification backup documentation is maintained by **Valley Transit's** document control process. In addition to safety data, **Valley Transit** maintains other data and documentation of activities required by the PTASP. Distribution of safety-related reports and data is accomplished through the **Valley Transit** Forward Focus committee.

### 3.3 MONITORING PERFORMANCE AND EVALUATING RESULTS

Once safety goals, objectives/outcomes, and measures have been defined, they can be organized into a **Safety Performance Matrix (Appendix G)** or **Safety Performance Outline (Appendix F)**. Organizing information, particularly in a matrix, will allow **Valley Transit** to continuously monitor safety performance and evaluate results. **Valley Transit** will evaluate safety performance and update documentation at least semi-annually.

### 3.4 INTEGRATING RESULTS INTO AGENCY DECISION-MAKING PROCESSES

**Valley Transit** is committed to using the data collected and information learned to inform decision making and instill positive change. The main objective is the continuous improvement of transit system safety. When performance goals are not met, **Valley Transit** will work to identify why such

goals were not met and what actions can be taken to minimize the gap in achieving defined goals. However, when goals are easily achieved, action will be taken to exceed expectations and re-establish a reasonable baseline.

Uses of Performance Results include:

- Focus attention on performance gaps and trigger in-depth investigations of what performance problems exist
- Help make informed resource allocation decisions
- Identify needs for staff training or technical assistance
- Help motivate employees to continue making program improvements
- Support strategic planning efforts by providing baseline information for tracking progress
- Identify best practices through benchmarking
- Respond to elected officials and the public's demand for accountability

### 3.5 SUSTAINING A SAFETY MANAGEMENT SYSTEM

In order to sustain the SMS, **Valley Transit** will ensure that particular processes are employed to instill an organizational foundation. Examples of actions taken to sustain the SMS include:

- **Create measurement-friendly culture:**  
All staff, including senior managers, should be actively engaged in creating measurement-friendly culture by promoting performance measurement as a means of continuous improvement. Senior managers will also lead by example and utilize performance metrics in decision making processes.
- **Build organization capacity:**  
Investment in developing skilled human resources capacity is essential to sustaining an SMS. Both technical and managerial skills will be needed for data collection and analysis and setting goals. Managing staff and the governing board will commit the financial resources required for organizational capacity and maintaining an SMS on a continuous basis.
- **Reliability and transparency of performance results:**  
The SMS will be able to produce and report its results, both good and bad. Performance information should be transparent and made available to all stakeholders. Messengers should be protected to preserve the integrity of the measurement system. The focus should be on opportunities for improvement rather than allocating blame.
- **Demonstrate continuous commitment to measurement:**  
Visible commitment to using metrics is a long-term initiative. **Valley Transit** will demonstrate a commitment to performance measurement by establishing a formal process of reporting performance results, such as including transit safety and performance measurement as a standing agenda item at city council and county board meetings.

## 4 SAFETY PROMOTION

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### 4.1 SAFETY PROMOTION, CULTURE AND TRAINING

**Valley Transit** believes safety promotion is critical to the success of an SMS by ensuring that the entire organization fully understands and trusts its safety policies, procedures, and structure. Further, safety promotion involves establishing an organizational and workplace culture that recognizes safety as a core value, training employees in safety principles, and allowing open communications of safety issues.

#### 4.1.1 Safety Culture

Positive safety culture must be generated from the top. The actions, attitudes, and decisions at the policy-making level must demonstrate a genuine commitment to safety. Safety must be recognized as the responsibility of each employee, with the ultimate responsibility for safety resting with the Accountable Executive. Employees must trust that they will have management support for decisions made in the interest of safety, while also recognizing that intentional breaches of safety will not be tolerated.

The primary goal of safety promotion at **Valley Transit** is to develop a positive safety culture that allows the SMS to succeed. A positive safety culture is defined as one which is:

**A. An Informed Culture**

- Employees understand the hazards and risks involved in their areas of operation
- Employees are provided with the necessary knowledge, training and resources
- Employees work continuously to identify and overcome threats to safety

**B. A Just Culture**

- Employees know and agree on what is acceptable and unacceptable behavior
- Human errors must be understood, but negligence and willful violations cannot be tolerated

**C. A Reporting Culture**

- Employees are encouraged to voice safety concerns and to share critical safety information without the threat of punitive action
- When safety concerns are reported, they are analyzed, and appropriate action is taken

**D. A Learning Culture**

- Learning is valued as a lifetime process beyond basic-skills training
- Employees are encouraged to develop and apply their own skills and knowledge to enhance safety
- Employees are updated on safety issues by management, and safety reports are fed back to staff so that everyone learns the pertinent lessons

#### 4.1.2 Training

During the initial implementation of an SMS, specific training will be required for all employees and contract staff, to explain the agency's safety culture and describe how **Valley Transit's** SMS works. The Chief Safety Officer is the resource person for providing a corporate perspective on **Valley Transit's** approach to safety management.

Safety Management training topics may include:

#### **A. Initial Safety Training for All Staff**

1. Basic principles of safety management including the integrated nature of SMS, risk management, safety culture, etc.
2. Corporate safety philosophy, safety goals and objectives, safety policy, and safety standards
3. Importance of complying with the safety policy and SMS procedures, and the approach to disciplinary actions for different safety issues
4. Organizational structure, roles and responsibilities of staff in relation to safety
5. Transit agency's safety record, including areas of systemic weakness
6. Requirement for ongoing internal assessment of organization safety performance (e.g. employee surveys, safety audits, and assessments)
7. Reporting accidents, incidents, and perceived hazards
8. Lines of communication for safety managers
9. Feedback and communication methods for the dissemination of safety information
10. Safety promotion and information dissemination

#### **B. Safety Training for Operations Personnel**

1. Unique hazards facing operational personnel
2. Seasonal safety hazards and procedures (e.g. winter operations)
3. Procedures for hazard reporting
4. Procedures for reporting safety events (accidents and incidents)
5. Emergency procedures

#### **C. Safety Training for Management**

1. Principles of the SMS
2. Management responsibilities and accountabilities for safety
3. Legal issues (e.g. liability)

#### **D. Training for the Safety Officer**

1. Familiarization with different transit modes, types of operation, routes, etc.
2. Understanding the role of human performance in safety event causation and prevention
3. Operation of the SMS
4. Investigating safety events
5. Crisis management and emergency response planning
6. Safety promotion
7. Communication skills
8. Performing safety audits and assessments
9. Monitoring safety performance
10. National Transit Database (NTD) safety event reporting requirements

## **APPENDICES**

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Appendix A – Staff Safety Roles and Responsibilities

Appendix B – Safety Assessment and System Review

Appendix C – Facility Safety and Security Assessment

Appendix D – Risk Assessment Matrix

Appendix E – Hazard Identification and Risk Assessment Log

Appendix F – Prioritized Safety Risk Log

Appendix G – Safety Performance Matrix

Appendix H – Safety Performance Outline

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## APPENDIX A

# Valley Transit STAFF SAFETY ROLES AND RESPONSIBILITIES

<b>Completed by: Amy Erickson</b>	<b>Date: 10/01/20</b>
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Position Title	Name of Staff Member	Position Description	Safety Responsibilities
Accountable Executive	<b>Ron McDonald</b>	<p style="text-align: center;">49 CFR § 673.5 –</p> <p>Accountable Executive means a single, identifiable person who has ultimate responsibility for carrying out the PTASP; responsibility for carrying out the agency's TAM Plan; and control or direction over the human and capital resources needed to develop and maintain both the agency's PTASP, in accordance with 49 U.S.C. § 5329(d), and the agency's TAM Plan in accordance with 49 U.S.C. § 5326.</p>	<ul style="list-style-type: none"> <li>• Ultimate responsibility for carrying out the PTASP</li> <li>• Responsibility for carrying out the TAM Plan</li> <li>• Control or direction over the human and capital resources needed to develop and maintain both plans</li> <li>• Ensuring the agency's SMS is effectively implemented throughout the system</li> <li>• Ensuring action is taken, as necessary, to address substandard performance in the agency's SMS</li> <li>• May delegate specific responsibilities, except ultimate accountability for the agency's safety performance, which always rests with the Accountable Executive</li> </ul>
Chief Safety Officer	<b>Amy Erickson</b>	<p style="text-align: center;">49 CFR § 673.5 –</p> <p>Chief Safety Officer means an adequately trained individual who has responsibility for safety and reports directly to a transit agency's chief executive officer, general manager, president, or equivalent officer.</p> <p>A Chief Safety Officer (CSO) for a small public transportation provider (as defined in Part 673) may serve in capacities (operational or maintenance) unless the agency ceases to be a small public transportation provider or operates a rail transit system.</p>	<ul style="list-style-type: none"> <li>• Is adequately trained</li> <li>• Responsibility for safety</li> <li>• Reports directly to agency's Accountable Executive</li> <li>• Authority and responsibility for day-to-day implementation and operation of agency's SMS</li> </ul>
Safety Manager	<b>Amy Erickson</b>	Ensure coordinated development and implementation of the PTASP	<ul style="list-style-type: none"> <li>• Maintains a safe working environment</li> <li>• Adheres to all safety policies and procedures</li> <li>• Promotes safety awareness throughout the organization</li> <li>• Ensures safety documentation is current and accessible to all employees</li> <li>• Communicates changes in safety documents to all personnel</li> <li>• Monitors effectiveness of corrective actions</li> <li>• Provides periodic reports on safety performance</li> <li>• Renders independent advice to the CEO, senior managers, and other personnel on safety-related matters</li> <li>• Ensures that safety management has a high priority throughout the organization</li> </ul>
Transit Supervisor(s)	<b>Justin Dreger, Matt Anderson, Laura Van Hooreweghe, Jeff Pellegrini</b>	Supervisors are responsible for communicating the transit agency's safety policies to all employees.	<ul style="list-style-type: none"> <li>• Maintains a safe working environment</li> <li>• Adheres to all safety policies and procedures</li> <li>• Full knowledge of all standard and safety operating procedures</li> </ul>

			<ul style="list-style-type: none"> <li>• Ensures that drivers make safety a primary concern when on the job</li> <li>• Listens and acts upon any safety concerns raised</li> <li>• Immediately reports safety concerns to the CSO/SM</li> <li>• Provides leadership and direction to employees during security incidents</li> <li>• Handles minor non-threatening rule violations</li> <li>• Defuses minor arguments</li> <li>• Determines when to call for assistance</li> <li>• Responds to fare disputes and service complaints</li> <li>• Responds to security related calls with police officers when required, rendering assistance with crowd control, victim/witness information gathering, and general on-scene assistance</li> <li>• Completes necessary security related reports</li> <li>• Takes photographs of damage and injuries</li> <li>• Coordinates with all outside agencies at incident scenes</li> </ul>
Bus Operator(s)	<b>Multiple</b>	Drivers are responsible for exercising maximum care and good judgment in identifying and reporting suspicious activities, in managing security incidents, and in responding to emergencies.	<ul style="list-style-type: none"> <li>• Maintains a safe working environment</li> <li>• Adheres to all safety policies and procedures</li> <li>• Takes charge of a hazard incident scene until the arrival of supervisory or emergency personnel</li> <li>• Collects fares in accordance with agency policy</li> <li>• Familiar with Valley Transit Employee Manual and Procedures</li> <li>• Attempts to handle minor non-threatening rule violations</li> <li>• Responds verbally to complaints</li> <li>• Attempts to defuse minor arguments</li> <li>• Determines when to call for assistance</li> <li>• Maintains control of the vehicle</li> <li>• Reports all safety incidents to Supervisor on duty</li> <li>• Completes all necessary safety related reports</li> </ul>
Maintenance	<b>Multiple</b>	Mechanic performs major running repairs of buses. Fully qualified and completely capable of repairing, maintaining, and rebuilding all parts of all equipment.	<ul style="list-style-type: none"> <li>• Maintains a safe working environment</li> <li>• Adheres to all safety policies and procedures</li> <li>• Responsible for repair of vehicle components, including engine and transmission rebuilds</li> <li>• Conducts all levels of inspections</li> <li>• Assists in all aspects of repair and maintenance work</li> <li>• Makes bus assignments (if needed)</li> <li>• Maintains a safe working environment and adheres to all safety policies and procedures</li> <li>• Makes road calls</li> <li>• Tire changes and repairs</li> <li>• Brake relines</li> <li>• Driver reported defects</li> <li>• Supervises bus-washing activities</li> <li>• Fuels/cleans buses</li> </ul>
Communication Technicians	<b>Multiple</b>	Dispatcher for operators, answers telephone calls from the public providing customer service, responds to radio calls from operators for repair calls, normal calls, and emergency transmissions	<ul style="list-style-type: none"> <li>• Maintains a safe working environment</li> <li>• Adheres to all safety policies and procedures</li> <li>• Familiar with Valley Transit Employee Manual and Procedures</li> <li>•</li> <li>•</li> </ul>




**APPENDIX B**

**Valley Transit  
SAFETY ASSESSMENT AND SYSTEM REVIEW**

Complete this form semi-annually to identify potential safety hazards. It is imperative that completion of this review includes only accurate and correct information – data collected from this assessment will guide agency resource allocation and focus priority needs appropriately. Not all questions will apply.

<b>Completed by: Amy Erickson</b>	<b>Date: 10/01/20</b>
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SECTION	REVIEW QUESTIONS	YES	NO	N/A
<b>Safety Policies:</b>	• Are all safety policies up to date and reviewed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	• Is a Public Transit Agency Safety Plan (PTASP) or any other System Safety Plan written for the transit system?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	• Is the Drug and Alcohol Policy current and up to date?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>New Hire Employee Files:</b>	• Was there a structured interview conducted and documented?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	• Is the applicant asked the questions relating to previous experience with drug and alcohol testing?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	• Is the offer of employment documented in writing?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	• Is there a pre-employment drug screen?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	• Is there a pre-employment physical exam?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	• Are safety sensitive responsibilities outlined in the job description?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	• Is there a completed Substance Abuse Policy and Drug Free Workplace Policy Acknowledgement form?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	• Is there a Current Policies and Procedures Acknowledgement Form?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Post Hire Employee Files:</b>	• Is a current employee roster available?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	• Are the employee files maintained by the transit system?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	• Do existing employee files contain:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	➢ Background check?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	➢ Previous employer request form?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	➢ Verification of current driver's license and CDL?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	➢ Current MVR?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	➢ PARS Reports?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	➢ Current copy of physical exam certificate?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	➢ Signed Substance Abuse Policy Acknowledgement?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
➢ Drug and Alcohol Testing Record with COC and authorization forms?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
➢ Record of annual supervisor ride checks and evaluations?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

<b>Education and Training:</b>	• Are operator certifications current and up to date?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	• Have managers completed Safety Management Systems (SMS) training?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	• Are employees familiar with OSHA topics, including:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	➢ Hazard Communication?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	➢ Emergency Action Planning?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	➢ Bloodborne Pathogens?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	➢ Lockout/Tagout?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	➢ Personal Protective Equipment (PPE)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	➢ Injury Prevention Planning?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	• Have all safety sensitive employees received Drug and Alcohol Training?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	• Do new mechanics receive classroom training?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	• Do existing mechanics receive ongoing training?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Safety Meetings:</b>				
	• Is there an active Safety Committee at the transit agency?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	• Are safety meetings held on a regular basis?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	• Are safety meetings and sign in sheets documented, with publically posted agendas and minutes?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	• Do senior managers attend safety meetings?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	• Do vehicle operators attend safety meetings?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	• Do mechanics attend safety meetings?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Incident and Accident Investigation Procedures:</b>				
	• Are policies in place dictating which incidents are reported and which are not?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	• Are incident report forms kept on board the vehicle?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	• Are accident reports completed for all situations?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	• Are incident/accident reports used as pre-accident training material?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	• Are incident/accident reports used as post-accident training material?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	• Are incident/accident reports used to identify potential hazards and analyzed in a Risk Assessment Matrix (RAM)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	• Are complaint forms kept on all vehicles?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	• Are all operators provided with safety vests on their vehicles?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	• Are incident/accident photos taken?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Substance Abuse:</b>				
	• Is there a current and updated Drug and Alcohol Policy?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	• Do all staff members understand the Drug and Alcohol Policy?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	• Is random testing being completed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	• Is reasonable suspicion testing being completed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Facility and Shop Inspections:</b>				
	• Are monthly facility inspections conducted as scheduled?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	• Are facility inspection forms completed properly?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	• Are unsafe conditions or acts, regarding the facility corrected and documented?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	• Are fire extinguishers up to date with annual servicing requirements?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>





## APPENDIX C

# Valley Transit FACILITY SAFETY and SECURITY ASSESSMENT

Complete this form semi-annually to identify potential safety hazards. It is imperative that the completion of this review includes only accurate and correct information – data collected from this assessment will guide agency resource allocation and focus priority needs appropriately. Not all questions will apply.

<b>Completed by: Amy Erickson</b>	<b>Date: 10/01/20</b>
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SECTION	REVIEW QUESTIONS	YES	NO	N/A
<b><i>Buildings and Facility Grounds:</i></b>	• Are facility grounds randomly and frequently patrolled?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	• Are daily security sweeps conducted?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	• Are smoke/fire/carbon monoxide detectors provided and working?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	• Are distribution and number of keys known and controlled?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	• Are all keys labeled as "DO NOT DUPLICATE"?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	• Are all unoccupied areas locked and secured?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b><i>Lighting:</i></b>	• Is entire perimeter of facility properly illuminated?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	• Is lighting mounted at approximately second story level?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	• Are lights provided over all entrance doors?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	• Is lighting provided in staff parking areas?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b><i>Entrance Doors and Windows:</i></b>	• Are all doors:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	➢ Built of commercial grade with metal framing?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	➢ Outside hinges hidden and protected from vandalism?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	➢ Provided with a commercial grade, one-sided lock?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	➢ Provided with push "panic" bar releases?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	➢ In case of breakage or opening are all windows and doors connected to a central station alarm?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b><i>Electronic Surveillance:</i></b>	• Is the entire perimeter of facility protected by a CCTV system?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	• Is this system monitored by management and/or a security company?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	• Is this system always on or activated by motion sensors?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b><i>Non-Employee Access:</i></b>	• Is access restricted to persons without proper credentials and clearance?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	• Are supply deliverers required to show proper I.D. and sign-in a log book?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	• Are all non-employees accompanied and/or observable at all times?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<b>Surrounding Environment:</b>	<ul style="list-style-type: none"> <li>Are there other non-City/County buildings connected to the facility that may be vulnerable to unauthorized entry to City/County property?</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<ul style="list-style-type: none"> <li>Are all utility components (power transformers, back-up generators) protected and secured from vandalism or attack?</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<ul style="list-style-type: none"> <li>Are all outdoor storage areas adequately lighted and secured?</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Material Storage:</b>	<ul style="list-style-type: none"> <li>Are all hazardous and flammable materials properly identified?</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<ul style="list-style-type: none"> <li>Are all materials properly labeled, stored, and secured?</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Forms and Written Plans:</b>	<ul style="list-style-type: none"> <li>Are emergency numbers (police, fire, ambulance, FBI) current and prominently displayed at each phone?</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<ul style="list-style-type: none"> <li>Is a Chain of Command and emergency call list prominently displayed?</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<ul style="list-style-type: none"> <li>Are employees trained and checklists provided on how to handle a physical threat or incident called in on the phone?</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Evacuation Plan/Procedures</b>	<ul style="list-style-type: none"> <li>Are there evacuation plans for this facility?</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<ul style="list-style-type: none"> <li>Are staff members trained on this plan?</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<ul style="list-style-type: none"> <li>Are assembly areas and alternate assembly areas identified, validated and coordinated with the County Emergency Management Office?</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<ul style="list-style-type: none"> <li>Have the primary and alternate assembly areas, evacuation sites, and evacuation routes been verified and coordinated with all appropriate agencies?</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<ul style="list-style-type: none"> <li>Has the Emergency Evacuation Plan been reviewed, coordinated, and briefed to staff as appropriate?</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Training:</b>	<ul style="list-style-type: none"> <li>Is an orientation program in place for each new staff member?</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<ul style="list-style-type: none"> <li>Do all staff members receive safety and security training appropriate to their position and level of responsibility?</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<ul style="list-style-type: none"> <li>Are periodic safety and security training and briefings completed with staff?</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<ul style="list-style-type: none"> <li>Do all new staff members receive briefings on the City/County Evacuation Plan, the Disaster Preparedness Plan, and other security policies and procedures?</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Administrative Procedures:</b>	<ul style="list-style-type: none"> <li>Is a record of emergency data on file for each staff?</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<ul style="list-style-type: none"> <li>Have incident reporting format and procedures been established and staff briefed on them?</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<ul style="list-style-type: none"> <li>Are all incident reports treated with confidentiality and transmitted by secure means to the appropriate City/County department?</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<ul style="list-style-type: none"> <li>Are background checks conducted and verified on all prospective new hires?</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Cash Handling and Transfer:</b>	<ul style="list-style-type: none"> <li>Has a secure method for receipt, transfer and storage of cash been established and have appropriate staff members been trained on them?</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<ul style="list-style-type: none"> <li>Is cash transported by at least two individuals with cash divided between them?</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<ul style="list-style-type: none"> <li>Do all staff members understand that in the event of a robbery they should never risk their lives to protect cash or other valuables?</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<b>Fire and Electrical Safety:</b>	• Are fire extinguishers installed in all appropriate locations?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	• Are smoke and heat detectors installed, at least one on each floor?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	• Is a first aid kit present and maintained?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	• Are all electrical devices, outlets, circuit breakers and cords free of damage that may pose a shock hazard?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	• Are all electrical circuit, gas, and telephone boxes, if accessible from the outside, locked to prevent tampering?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	• Do any non-employees have access from outside the building to any fire escapes, stairways, and/or the roof?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	• Are all outdoor trash containers and storage bins located away from the building in the event of a fire?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



# APPENDIX D - SRM MATRIX a

The tabs in this workbook relate to section 2.3 – Risk Mitigation, in Valley Transit's ASP template. The workbook contains the following tabs:

## **SRM-SA Terms**

Guide to terms used in SRM and SA processes.

## **Safety Risk Management (SRM) Risk Register**

Sample risk register, used to associate identified hazards (and existing mitigations) that are being tracked to their planned implementation dates for proposed mitigations, department(s) responsible for mitigation implementation, and

## **Safety Assurance (SA) Tracker**

Sample hazard tracker, used to track identified hazards and mitigations as determined by your agency. Includes completion dates for mitigation implementation, and the means by which a hazard/mitigation is being monitored.

## **Severity Matrix**

Sample matrix for rating severity; includes criteria for each rating.

## **Likelihood Matrix**

Sample matrix for rating likelihood/frequency; includes practical examples for each rating.

## **Risk Assessment Matrix**

Sample combined severity/likelihood matrix, used by your agency to assess each identified hazard for its risk to your agency.

With respect to prioritization of safety risk mitigations, the template and appendices do not provide a process or criteria that is for each transit agency to assess and develop. The included matrices can help formalize the process.

For additional guidance in this area, consider reviewing FTA's Sample Safety Risk Assessment Matrices for Bus Age

<https://www.transit.dot.gov/regulations-and-guidance/safety/public-transportation>

It provides a structured approach for addressing the requirements to "establish methods or processes to assess the

# nd WORKBOOK

ontains the following:

associated risk level, as determined by your agency. Includes columns for  
nd contact person(s).

olumns for safety performance targets impacted, department(s) responsible for

our transit system.

riteria for determining the level of safety risk associated with each hazard -

encies:

[ion-agency-safety-program/sample-safety-risk](#)

the safety risks associated with identified safety hazards" (§ 673.25(c)).



**APPENDIX F**

**Valley Transit  
PRIORITIZED SAFETY RISK LOG**

This form is used to organize identified safety risks facing **Valley Transit**. The log should be updated frequently to demonstrate continual progress towards risk reduction through mitigation strategies. A timeline is used to highlight projected completion dates.

<b>Completed by: Amy Erickson</b>	<b>Last Updated: 10/01/20</b>
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Priority	Risk Description	Planned Mitigation Strategies	Outcomes of Planned Mitigation Strategies	Responsible Staff	Timeline	Status
1	Non-compliance with agency maintenance protocol	<ul style="list-style-type: none"> <li>• Introduce compliance monitoring</li> <li>• Effective supervision including work compliance assessment</li> <li>• Competency assessments</li> <li>• Maintenance policy to reinforce need for compliance</li> </ul>	•	<ul style="list-style-type: none"> <li>• Safety Assurance</li> <li>• Line Manger</li> <li>• Maintenance Manager</li> </ul>	<ul style="list-style-type: none"> <li>• Begin January 2020</li> <li>• Complete August 2020</li> </ul>	Open
2		•	•	•	•	
3		•	•	•	•	
4		•	•	•	•	
5		•	•	•	•	
6		•	•	•	•	
7		•	•	•	•	
8		•	•	•	•	
9		•	•	•	•	
10		•	•	•	•	

## APPENDIX G

# Valley Transit SAFETY PERFORMANCE MATRIX

This form allows Valley Transit to organize, monitor, and evaluate identified safety goals and objectives/outcomes.

**Examples in this table should be adjusted depending on agency size and scale of operations. Not all examples will apply. Similarly, metrics should be adjusted depending on preference and/or scale of operations.**

<b>Completed by: Amy Erickson</b>	<b>Last Updated: 10/01/20</b>
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**GOAL 1: SMS TO REDUCE CASUALTIES/OCCURRENCES**  
 Valley Transit will utilize a safety management systems framework to identify safety hazards, mitigate risk and reduce casualties and occurrences resulting from transit operations.

OBJECTIVE/OUTCOME	METRICS	BASELINES	TARGETS
Reduce the number of reportable fatalities	Total number of reportable fatalities	Identify	Establish reasonable measure using past and present performance data and trends
	Rate of reportable fatalities per total vehicle revenue miles	Identify	Establish reasonable measure using past and present performance data and trends
Reduce the number of reportable injuries	Total number of reportable injuries	Identify	Establish reasonable measure using past and present performance data and trends
	Rate of reportable injuries per total vehicle revenue miles		Establish reasonable measure using past and present performance data and trends
Reduce the number of reportable safety events	Total number of reportable safety events	Identify	Establish reasonable measure using past and present performance data and trends
	Rate of reportable safety events per total vehicle revenue miles		Establish reasonable measure using past and present performance data and trends
Reduce mean distance between major mechanical failures	Average distance between major mechanical failures	Identify	Establish reasonable measure using past and present performance data and trends
Increase assessment and analysis of existing personnel, equipment and procedures to identify and mitigate any potential safety hazards	Number of safety audits, inspections, or assessments completed per specified period of time	Identify	Establish reasonable measure using past and present performance data and trends
Develop a corrective action plan and mitigation strategies to address identified hazards	Percent of corrective action strategies completed per specified period of time	Identify	Establish reasonable measure using past and present performance data and trends

**GOAL 2: CULTURE**  
 Valley Transit will foster agency-wide support for transit safety by establishing a culture where management is held accountable for safety and everyone in the organization takes an active role in securing transit safety.

OBJECTIVE/OUTCOME	METRICS	BASELINES	TARGETS
Establish a dedicated staff person as the Transit Agency Safety Officer to manage the agency's transit safety program	<i>Number of years of transit safety experience</i>	Identify	Establish reasonable measure using past and present performance data and trends
Establish regular transit safety meetings comprised of staff at varying levels, including	<i>Number of meetings per specified period of time or number of meetings per incidents/occurrences</i>	Identify	Establish reasonable measure using past and present performance data and trends

executives, officers, managers, operators and maintenance personnel			
Develop and promote a Non-Punitive Reporting Policy	<i>Percent of staff receiving Non-Punitive Reporting Policy</i>	Identify	Establish reasonable measure using past and present performance data and trends
Increase the reporting of near miss occurrences and incidents that would otherwise go unreported	<i>Number of near miss occurrences/incidents reported per specified passenger-miles traveled or per specified period of time</i>	Identify	Establish reasonable measure using past and present performance data and trends
Increase employee safety training opportunities and attendance	<i>Number of employee safety training hours completed per specified period of time</i>	Identify	Establish reasonable measure using past and present performance data and trends
Increase safety material distributed amongst employees and the general public	<i>Number of manuals, brochures, posters or campaigns distributed per specified period of time</i>	Identify	Establish reasonable measure using past and present performance data and trends
<b>GOAL 3: SYSTEMS/EQUIPMENT:</b>			
Valley Transit will provide a safe and efficient transit operation by ensuring that all vehicles, equipment and facilities are regularly inspected, maintained and serviced as needed.			
<b>OBJECTIVE/OUTCOME</b>	<b>METRICS</b>	<b>BASELINES</b>	<b>TARGETS</b>
Reduce the number of vehicle/equipment/facility maintenance issues reported	<i>Number of vehicle/equipment/facility maintenance issues reported per specified period of time</i>	Identify	Establish reasonable measure using past and present performance data and trends
Increase scheduled preventative maintenance	<i>Number of preventative maintenance inspections completed per specified period of time or specified vehicle mileage</i>	Identify	Establish reasonable measure using past and present performance data and trends

## APPENDIX H

# TRANSIT AGENCY SAFETY PERFORMANCE OUTLINE

This form allows **TRANSIT AGENCY** to organize, monitor, and evaluate identified safety goals and objectives/outcomes.

**Examples in this outline should be adjusted depending on the Transit Agency size and scale of operations. Not all examples will apply. Similarly, metrics should be adjusted depending on preference and/or scale of operations.**

Completed by: **INSERT REVIEWER NAME**

Last Updated: **INSERT DATE**

---

### GOAL 1: SMS TO REDUCE CASUALTIES/OCCURRENCES

**TRANSIT AGENCY** will utilize a safety management systems framework to identify safety hazards, mitigate risk and reduce casualties and occurrences resulting from transit operations.

1. Objective/Outcome:  
Reduce the number of transit related fatalities
  - a. *Metric: Number of fatalities per specified passenger miles traveled*
  - b. *Baseline: Identify a baseline*
  - c. *Target: Establish a reasonable measure using past and present performance data and trends*
2. Objective/Outcome:  
Reduce the number of transit related injuries
  - a. *Metric: Number of injuries per specified passenger miles traveled*
  - b. *Baseline: Identify a baseline*
  - c. *Target: Establish a reasonable measure using past and present performance data and trends*
3. Objective/Outcome:  
Increase assessment and analysis of existing personnel, equipment and procedures to identify and mitigate any potential safety hazards
  - a. *Metric: Number of safety audits, inspections, or assessments completed per specified period of time*
  - b. *Baseline: Identify a baseline*
  - c. *Target: Establish a reasonable measure using past and present performance data and needs*
4. Objective/Outcome  
Develop a corrective action plan and mitigation strategies to address identified hazards
  - a. *Metric: Percent of corrective action strategies complete per specified period of time*
  - b. *Baseline: Identify a baseline*
  - c. *Target: Establish a reasonable measure using past and present performance data and needs*

### GOAL 2: CULTURE

**TRANSIT AGENCY** will foster agency-wide support for transit safety by establishing a culture where management is held accountable for safety and everyone in the organization takes an active role in securing transit safety.

1. Objective/Outcome:  
Establish a dedicated staff person as the Transit Agency Safety Officer to manage the agency's transit safety program
  - a. *Metric: Number of years of transit safety experience*
  - b. *Baseline: Identify a baseline*
  - c. *Target: Establish reasonable measure using past and present performance data and trends*
  
2. Objective/Outcome:  
Establish regular transit safety meetings comprised of staff at varying levels, including executives, officers, managers, operators and maintenance personnel
  - a. *Metric: Number of meetings per specified period of time or number of meetings per incidents/occurrences*
  - b. *Baseline: Identify a baseline*
  - c. *Target: Establish reasonable measure using past and present performance data and trends*
  
3. Objective/Outcome:  
Develop and promote a Non-Punitive Reporting Policy
  - a. *Metric: Percent of staff receiving Non-Punitive Reporting Policy*
  - b. *Baseline: Identify a baseline*
  - c. *Target: Establish reasonable measure using past and present performance data and trends*
  
4. Objective/Outcome:  
Increase the reporting of near miss occurrences and incidents that would otherwise go unreported
  - a. *Metric: Number of near miss occurrences/incidents reported per specified passenger-miles traveled or per specified period of time*
  - b. *Baseline: Identify a baseline*
  - c. *Target: Establish a reasonable measure using past and present performance data and trends*
  
5. Objective/Outcome:  
Increase employee safety training opportunities and attendance
  - a. *Metric: Number of employee safety training hours completed per specified period of time*
  - b. *Baseline: Identify a baseline*
  - c. *Target: Establish a reasonable measure using past and present performance data and trends*
  
6. Objective/Outcome:  
Increase safety material distributed amongst employees and the general public
  - a. *Metric: Number of manuals, newsletters, brochures, posters or campaigns distributed per specified period of time*
  - b. *Baseline: Identify a baseline*
  - c. *Target: Establish a reasonable measure using past and present performance data and trends*

### **GOAL 3: SYSTEMS/EQUIPMENT:**

**TRANSIT AGENCY** will provide a safe and efficient transit operation by ensuring that all vehicles, equipment and facilities are regularly inspected, maintained and serviced as needed.

1. Objective/Outcome:  
Reduce the number of vehicle/equipment/facility maintenance issues reported



- a. *Metric: number of vehicle/equipment/facility maintenance issues reported per specified period of time*
- b. *Baseline: Identify a baseline*
- c. *Target: Establish a reasonable measure using past and present performance data and trends*

2. Objective/Outcome:

Increase scheduled preventative maintenance

- a. *Metric: Number of preventative maintenance inspections completed per specified period of time or specified vehicle mileage*
- b. *Baseline: Identify a baseline*
- c. *Target: Establish a reasonable measure using past and present performance data and trends*

**ADOPTED: November 18, 2020**  
**PUBLISHED: November 23, 2020**  
Office of the City Clerk

**128-20**

**AN ORDINANCE AMENDING SECTION 20-69 OF CHAPTER 20 OF THE MUNICIPAL CODE OF THE CITY OF APPLETON, RELATING TO DEFINITIONS.**  
(Utilities Committee – 11/4/2020)

The Common Council of the City of Appleton does ordain as follows:

**Section 1:** That Section 20-69 of Chapter 20 of the Municipal Code of the City of Appleton, relating to definitions, is hereby amended to read as follows by adding the following definitions:

**Sec. 20-69. Definitions.**

***Total Kjeldahal Nitrogen (TKN):*** The total amount of nitrogen bound in organize substances and nitrogen in ammonia (NH<sub>3</sub>-N) within wastewater that is obtained through laboratory sample digestion, usually expressed as a concentration (i.e., mg/L).

***Total Phosphorus (TP):*** Multi-step laboratory test which measures all the forms of phosphorus in the unfiltered wastewater sample (e.g., orthophosphate, condensed phosphate, and organize phosphate), usually expressed as a concentration (i.e., mg/L).

**Section 2:** This ordinance shall be in full force and effect from and after its passage and publication.

Dated: November 18, 2020

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Jacob A. Woodford, Mayor  
City Law 19-1150

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Kami Lynch, City Clerk

**ADOPTED: November 18, 2020**  
**PUBLISHED: November 23, 2020**  
Office of the City Clerk

**129-20**

**AN ORDINANCE AMENDING SECTION 20-203(2) OF CHAPTER 20 OF THE MUNICIPAL CODE OF THE CITY OF APPLETON, RELATING TO BASIS.**  
(Utilities Committee – 11/4/2020)

The Common Council of the City of Appleton does ordain as follows:

**Section 1:** That Section 20-203(2) of Chapter 20 of the Municipal Code of the City of Appleton, relating to basis, is hereby amended to read as follows:

**Sec. 20-203. Basis.**

- (2) The quantity and quality of sewage discharged into the sewage system. The quantity of sewage shall be measured by meter, weir or other measuring device approved by the Utilities Manager and installed by the industry or user at its own expense. The quality of sewage shall be measured by the pounds of suspended solids, the pounds of biochemical oxygen demand (BOD), the pounds of total phosphorus (TP), and the pounds of total Kjeldahal nitrogen (TKN) contained therein. The determination of suspended solids, BOD, TP, and TKN contained in the waste shall be in accordance with guidelines approved by the EPA and DNR establishing test procedures for the analysis of pollutants. To determine the quality of the sewage and waste, samplings and analyses of twenty-four (24) composite samples shall be made daily by and at the expense of the industry or user and accumulated over the billing period. The City shall have the right to access all measurement and analytical facilities and shall cause sufficient tests to be made to establish the validity of the information being supplied.

**Section 2:** This ordinance shall be in full force and effect from and after its passage and publication.

Dated: November 18, 2020

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Jacob A. Woodford, Mayor  
City Law: 19-1150

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Kami Lynch, City Clerk

**ADOPTED: November 18, 2020**  
**PUBLISHED: November 23, 2020**  
Office of the City Clerk

**130-20**

**AN ORDINANCE AMENDING SECTION 20-204(b) OF CHAPTER 20 OF THE MUNICIPAL CODE OF THE CITY OF APPLETON, RELATING TO RATES.**  
(Utilities Committee – 11/4/2020)

The Common Council of the City of Appleton does ordain as follows:

**Section 1:** That Section 20-204(b) of Chapter 20 of the Municipal Code of the City of Appleton, relating to rates, is hereby amended to read as follows:

**Sec. 20-204. Rates.**

(b) The City shall determine the strength of normal domestic waste from its non-monitored customers by subtracting the industrial monitored loading by parameter from the total loading treated by the City. The net pounds of suspended solids, biochemical oxygen demand (BOD), total phosphorus (TP), and total Kjeldahal nitrogen (TKN) from the non-monitored customers shall be divided by 8.34 (a conversion factor) and then divided by the net billable flow (expressed in millions of gallons) from those non-monitored customers to determine whether the strength of the waste is within a reasonable range for a normal domestic household. The City will consider normal domestic strength waste to have a BOD concentration of not more than three hundred (300) milligrams per liter. Should this calculation for BOD be higher than three hundred (300) milligrams per liter, a review will be done of the city users to determine if there are additional users that should be monitored for high strength water. This methodology shall be followed to assure that the charges are proportionately made to all customers. No users shall pay less per one thousand (1,000) gallons than the current effective rate associated with the per unit costs for environmental treatment based on the waste characteristics determined to be applicable for domestic or industrial users.

**Section 2:** This ordinance shall be in full force and effect from and after its passage and publication.

Dated: November 18, 2020

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Jacob A. Woodford, Mayor

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Kami Lynch, City Clerk