



Larger than 35 days

PERMIT TO OCCUPY THE PUBLIC RIGHT-OF-WAY

Permit #: 21-127-
Effective Date: 9/11-9/17
Expiration Date: 9/17 - o longer
Fee: 40.00
Paid (yes or no): 97721047

Rev. 04-10-15

Applicant Information

Name (print): Linda Garvey Company: Paper Valley Hotel
 Address: 333 W. College Ave. Telephone: 920-735-2775 FAX: _____
Appleton, WI 54911 e-mail: lgarvey@appletonpvh.com
 Applicant Signature: Linda Garvey Date: 9-8-21

Occupancy Information

General Description: Dumpsters for building renovations. Occupying 5 spaces for roll-off space
CAW 305, 307, 309, 311, 313
 Street Address: 333 W. College Ave Tax Key No.: _____
 - or -
 Street: _____ From: 9-1-2021 To: 9-17-2021
 Multiple Streets: _____

(Department use only)

Occupancy Type	Sub-Type	Location
<input type="checkbox"/> Permanent (\$40)	<input type="checkbox"/> Sandwich Board	<input type="checkbox"/> Sidewalk
<input checked="" type="checkbox"/> Temporary - max. 35 days (\$40)	<input type="checkbox"/> Tables / Chairs	<input type="checkbox"/> Terrace
<input type="checkbox"/> Amenity/Annual (\$40)	<input checked="" type="checkbox"/> Dumpster	<input checked="" type="checkbox"/> Roadway
<input type="checkbox"/> Blanket/Annual (\$250)	<input type="checkbox"/> POD / Container	
<input type="checkbox"/> Block Party (\$15)	<input type="checkbox"/> Obstruction / Other	

Additional Requirements

Plan/Sketch Certificate of Insurance Bond
 Other: _____

Traffic Control Requirements

N/A Contact Traffic Division (832-2379) 1 business day prior to any lane closure, or 2 business days prior to a full road closure.
 Additional Requirements: _____
 Type of Street: Arterial/CBD Collector Local
 Proposed Traffic Control: City Manual Page(s) State Manual Page(s) Other (attach plan)
 Approved by: _____ Date: _____

- This permit approval is subject to the following conditions:
1. Permittee is responsible to obtain any further permits that may be required as part of this occupancy.
 2. Permittee shall adhere to any plan(s) that were submitted to the City of Appleton as part of this application.
 3. This permit is subject to IMMEDIATE REVOCATION and/or Issuance of a MUNICIPAL CITATION if conditions of the permit are not met.
 4. This permit is subject to IMMEDIATE REVOCATION if unfavorable traffic conditions develop during the period the occupancy is permitted.
 - 5.
 - 6.

This permit is issued to the applicant upon payment of the permit fee and is expressly limited to the location and type described herein. The applicant, in exchange for receiving this permit, warrants that all street occupancies will be performed in conformity to City ordinances, standards and policies, be properly barricaded and lighted, and be performed in a safe manner. By applying for and accepting this permit, the applicant assumes full liability and/or any costs incurred by the City for corrective work required to bring the subject area into compliance with said ordinances, standards, policies and permit conditions. No occupancy shall occur prior to approval of this permit by the Department of Public Works.

The Grantee shall guarantee at their expense, the repair or replacement of pavement, sidewalk and any other facilities within the public right-of-way damaged or destroyed by the Grantee or any sub-contractor working for them. The Grantee shall assume complete and full liability and responsibility, in accordance with existing ordinances and policies, in the event of injury or damage to persons or property resulting from their facilities within the public right-of-way.

APPROVED BY: Will go to MSC Council (Department of Public Works) DATE: 9/9/21



PERMIT TO OCCUPY THE PUBLIC RIGHT-OF-WAY

Permit #: 21-27-T
 Effective Date: 7/26/21
 Expiration Date: 8/26/21
 Fee: 40.00
 Paid (yes or no): 97721047

Rev. 04-10-15

Applicant Information

Name (print): DRIFTWOOD HOSPITALITY MANAGEMENT Company: RED LION HOTEL PAPER VALLEY
 Address: 333 W. COLLEGE AVE Telephone: 920-733-5000 FAX: _____
APPLETON, WI 54911 e-mail: LHOFFMAN@DHMHOTELS.COM
 Applicant Signature: Lori Hoffman on behalf of Driftwood Hospitality Date: 7/19/21

Occupancy Information

General Description: (2)30 YARD DUMPSTERS ON COLLEGE AVENUE
 Street Address: 333 W. COLLEGE AVE Tax Key No.: _____
 - or -
 Street: _____ From: _____ To: _____
 Multiple Streets: _____

(Department use only)

Occupancy Type	Sub-Type	Location
<input type="checkbox"/> Permanent (\$40)	<input type="checkbox"/> Sandwich Board	<input type="checkbox"/> Sidewalk
<input checked="" type="checkbox"/> Temporary - max. 35 days (\$40)	<input type="checkbox"/> Tables / Chairs	<input type="checkbox"/> Terrace
<input type="checkbox"/> Amenity/Annual (\$40)	<input checked="" type="checkbox"/> Dumpster	<input checked="" type="checkbox"/> Roadway
<input type="checkbox"/> Blanket/Annual (\$250)	<input type="checkbox"/> POD / Container	
<input type="checkbox"/> Block Party (\$15)	<input type="checkbox"/> Obstruction / Other	

Additional Requirements

Plan/Sketch Certificate of Insurance Bond
 Other : _____

Traffic Control Requirements

N/A

Type of Street: _____ Proposed Traffic Control: _____
 Arterial/CBD City Manual Page(s) _____
 Collector State Manual Page(s) _____
 Local Other (attach plan) _____

Contact Traffic Division (832-2379) 1 business day prior to any lane closure, or 2 business days prior to a full road closure.
 Additional Requirements: _____

Approved by: _____ Date: _____

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- 5.
- 6.

This permit is issued to the applicant upon payment of the permit fee and is expressly limited to the location and type described herein. The applicant, in exchange for receiving this permit, warrants that all street occupancies will be performed in conformity to City ordinances, standards and policies, be properly barricaded and lighted, and be performed in a safe manner. By applying for and accepting this permit, the applicant assumes full liability and/or any costs incurred by the City for corrective work required to bring the subject area into compliance with said ordinances, standards, policies and permit conditions. No occupancy shall occur prior to approval of this permit by the Department of Public Works.

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APPROVED BY:

Lori Hoffman
 (Department of Public Works)

DATE:

7/26/21

Paula Vandehey

From: Linda Garvey <lgarvey@appletonpvh.com>
Sent: Wednesday, September 8, 2021 5:21 PM
To: Paula Vandehey; Lisa M. Lau
Cc: Customer Service 5th Floor
Subject: RE: Dumpsters
Attachments: 20210908162622147.pdf

CAUTION: This email originated from outside your organization. Exercise caution when opening attachments or clicking links, especially from unknown senders.

Here we go, pause after Sep 17th for a short break, then License to Cruise and Octoberfest.

Hoping we will resume around the 27th.

Application is attached. Thanks everyone!

Linda Garvey | Hotel GM
T 9207338000ext1660 | lgarvey@appletonpvh.com

Red Lion Hotel Paper Valley
333 W College Ave Appleton WI 54911 US
redlion.com | [Facebook](#) | [Twitter](#)



From: Paula Vandehey [mailto:Paula.Vandehey@Appleton.org]
Sent: Wednesday, September 08, 2021 2:56 PM
To: Linda Garvey <lgarvey@appletonpvh.com>; Lisa M. Lau <Lisa.Lau@Appleton.org>
Cc: Customer Service 5th Floor <CustomerService5thFloor@Appleton.org>
Subject: RE: Dumpsters

Linda, If I can get the request (even via email) by tomorrow at noon I can add it to our special Municipal Services Committee before Council next Wednesday.

Paula

From: Linda Garvey <lgarvey@appletonpvh.com>
Sent: Wednesday, September 8, 2021 2:49 PM
To: Lisa M. Lau <Lisa.Lau@Appleton.org>
Cc: Customer Service 5th Floor <CustomerService5thFloor@Appleton.org>; Paula Vandehey <Paula.Vandehey@Appleton.org>
Subject: RE: Dumpsters



ADDITIONAL REMARKS SCHEDULE

AGENCY MHBT, a Marsh & McLennan Agency, LLC company		NAMED INSURED Driftwood Hospitality Management LLC Driftwood Hospitality Management II LLC 11770 US Hwy One East Tower Suite 202 North Palm Beach FL 33408	
POLICY NUMBER		EFFECTIVE DATE:	
CARRIER	NAIC CODE		

ADDITIONAL REMARKS

**THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: 25 FORM TITLE: CERTIFICATE OF LIABILITY INSURANCE**

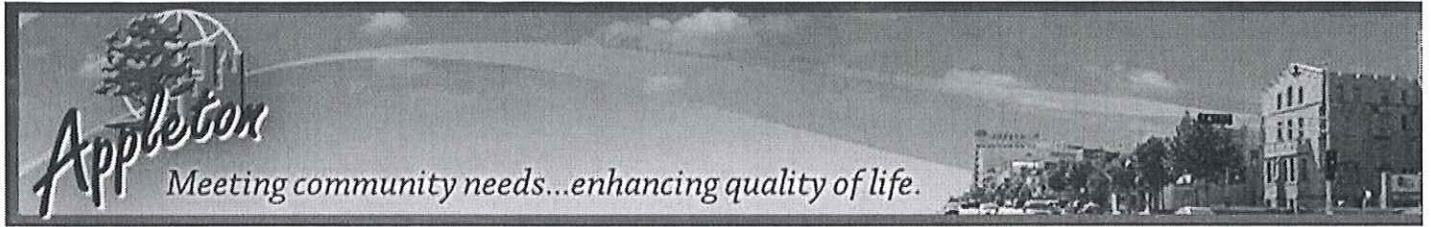
Excess Liability: Policy No. USL014028216 - Policy Period: 3/19/21-22 - Fireman's Fund Insurance Company - NAIC 21873 - Limit: \$25,000,000 Excess \$50,000,000

Excess Liability: Policy No. CX00G1421 - Policy Period: 3/19/21-22 - Aspen American Insurance Company - NAIC 43460 - Limit: \$25,000,000 Excess \$75,000,000

RE: Red Lion Hotel Paper Valley - 333 West College Avenue, Appleton, WI 54911

Additional Named Insured: 333 West College Ave, LLC

Certificate Holder Includes: Red Lion Hotels Corporation, Red Lion Hotels Franchising, Inc., all related entities, subsidiaries and affiliates of these companies, including their employees, officers and directors, now existing or which may hereafter exist



Step 1: Select Payments

Step 2: Review and Submit

Step 3: Confirmation and Receipt

Step 3: Confirmation and Receipt

Result: Payment Authorized Confirmation Number: 97721047

Your payment has been authorized successfully and payment will be processed.

The City of Appleton Inspections thanks you for your payment. For questions about your account, please call 920-832-6413. Thank you for using our bill payment services.

Please save or print a copy of this receipt for record keeping purposes.

My Bills

Description	Amount
Street Occupancy Permit payment of \$40.00 on Permit Description Temporary - \$40	\$40.00

Customer Information

First Name: David
Last Name: Buddemeyer
Address Line 1: 11770 US Highway One
Address Line 2: Ste 200
City: North Palm Beach
State: Florida
Zip Code: 33408
Phone Number: 561-207-2700
Email Address: lhoffman@dhmhotels.com

Subtotal:	\$40.00
Convenience Fee:	\$1.50
Total Payment:	\$41.50

Payment Information

Payment Date: 07/26/2021
Card Type: Optima
Card Number: *****138

Print

Finished