



# City of Appleton

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

## Meeting Agenda - Final-revised Safety and Licensing Committee

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Wednesday, July 27, 2022

5:30 PM

Council Chambers, 6th Floor

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1. Call meeting to order

2. Roll call of membership

3. Approval of minutes from previous meeting

[22-0941](#) Approval of minutes from July 13, 2022 meeting.

**Attachments:** [S & L Minutes 7-13-22.pdf](#)

4. **Public Hearings/Apearances**

5. **Action Items**

[22-0968](#) Resolution #8-R-22 Requesting an Advisory Referendum related to Marijuana Legalization for the November 8, 2022 election ballot

**Attachments:** [#8-R-22 Advisory Referendum Res- Marijuana Legalization..pdf](#)  
[Memo RE Res 8-R-22 Advisory Referendum.pdf](#)

[22-0238](#) Class "B" Beer and "Class B" Liquor License application for Chandelier LLC d/b/a Broken Chandelier, Kyle E Jones, Agent, located at 215 W College Ave, contingent upon approval from the Health and Inspections departments.

**Attachments:** [Broken Chandelier.pdf](#)  
[SUP 13-08 Transfer Report 3-18-22 final- Broken Chandelier.pdf](#)

[22-0872](#) Class "B" Beer License application for The Breaking Point LLC d/b/a Breaking Point, Courtney Hayden, Agent, located at 2011 N Richmond St, contingent upon approval from the Health and Inspections departments.

**Attachments:** [Breaking Point -1.pdf](#)  
[Resolution\\_The Breaking Point\\_SUP#5-21\\_SIGNED\\_LiquorLicense.pdf](#)

- [22-0963](#) Class "B" Beer and "Class B" Liquor License application for Tippy Taco & Tequila Bar LLC d/b/a Tippy Taco & Tequila Bar, Sarah J Gregory, Agent, located at 127 S Memorial Dr, contingent upon approval from the Inspections department.  
**Attachments:** [Tippy Taco & Tequila Bar-1.pdf](#)
- [22-0593](#) Temporary Class "B" Beer and "Class B" Liquor License Premise Amendment application for Stone Arch Brewpub, Steve Lonsway, Agent, located at 1004 S Olde Oneida St, on August 4-7, 2022, contingent upon approval from the Community Development and Inspections departments.  
**Attachments:** [Stone Arch Brewpub.pdf](#)
- [22-0902](#) Temporary Class "B" Beer and "Class B" Liquor Premise Amendment application for S C Carrow Corp d/b/a Rookies Sports Bar & Grill, Steve Carrow, Agent, located at 325 N Appleton St, on August 4-7, 2022, contingent upon approval from the Inspections department.  
**Attachments:** [Rookies Sports Bar & Grill S&L.pdf](#)
- [22-0776](#) Temporary Class "B" Beer and "Class B" Wine License application for St. Pius X Catholic Church, Andrew Miles, Person in Charge, located at 500 W. Marquette St, on August 26-28, 2022, contingent upon approval from the Inspections department.  
**Attachments:** [St Pius X Church Picnic S&L.pdf](#)
- [22-0883](#) Temporary Class "B" Beer and "Class B" Wine License application for Creative Downtown Appleton Inc, Jennifer Stephany, Person in Charge, at Jones Park, on August 4-7, 2022, contingent upon approval from the Health and Inspections departments.  
**Attachments:** [Mile of Music - Jones Park S&L.pdf](#)
- [22-0758](#) Temporary Class "B" Beer and "Class B" Wine License application for Irish Fest of the Fox Cities, Matthew F Miller, Person in Charge, Jones Park, September 16-17, 2022, contingent upon approval from the Inspections department.  
**Attachments:** [Irish Fest of the Fox Cities S&L.pdf](#)
- [22-0911](#) Temporary Class "B" Beer License application for Democratic Party of Outagamie County, Jacklyn J Fischer, Person in Charge, Derks Park, 3220 Guyette Dr, August 15, 2022, contingent upon approval from the Health department.  
**Attachments:** [Democratic Party of Outagamie County S&L.pdf](#)

[22-0961](#) Class "A" Beer / "Class A" Liquor - Cider Only License Change of Agent application for True North Energy LLC d/b/a True North #822, Michelle A Knox, New Agent, located at 3411 N Ballard Rd.

**Attachments:** [Michelle A Knox S&L.pdf](#)

[22-0945](#) Taxicab Company & Limousine Service License Application for Dynasty Limousine Service LLC, 1900 Vandenberg Ln, Kaukauna, WI 54130, Diana & John Wolters.

**Attachments:** [Diana Wolters- Dynasty Limousine Service LLC.pdf](#)

## 6. Information Items

[22-0944](#) Traffic Safety Update  
- Introduction of Traffic Safety Officer Ryan McCord  
- Traffic Stop Heat Map- June 2022

**Attachments:** [Traffic Stop data June 2022.docx](#)

[22-0880](#) 2022 Fire Department Mid-Year Report

**Attachments:** [2022 Mid-Year Report - 06-30-22.doc](#)

[22-0970](#) 2022 Legal Services-City Clerk's Office Mid-Year Report

**Attachments:** [2022 Mid Year Report-Legal Services.pdf](#)

[22-0969](#) Speakeasy Bar Concerns

**Attachments:** [Speakeasy Bar Concerns 7-19-2022.pdf](#)

[22-0943](#) Police Department information on Alcohol Law Violations  
- Appleton Clark Gas Station, Sell alcohol to minor: 80 point violation  
Total Points: 80

[22-0942](#) Director Reports

1. City Clerk  
- Partisan Primary Election Information
2. Police Chief
3. Fire Chief

## 7. Adjournment

*Notice is hereby given that a quorum of the Common Council may be present during this meeting, although no Council action will be taken.*

*Reasonable Accommodations for Persons with Disabilities will be made upon Request and if Feasible.*





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## Meeting Minutes - Final Safety and Licensing Committee

---

Wednesday, July 13, 2022

5:30 PM

Council Chambers, 6th Floor

---

1. Call meeting to order

*The meeting was called to order by Chair Croatt at 5:30 p.m.*

2. Roll call of membership

**Present:** 4 - Schultz, Hartzheim, Croatt and Wolff

**Excused:** 1 - Alfheim

3. Approval of minutes from previous meeting

[22-0877](#)

Minutes from the June 22, 2022 meeting.

**Attachments:** [S & L Minutes 6-22-22.pdf](#)

Hartzheim moved, seconded by Wolff, that the Minutes be approved. Roll Call.  
Motion carried by the following vote:

**Aye:** 4 - Schultz, Hartzheim, Croatt and Wolff

**Excused:** 1 - Alfheim

4. Public Hearings/Appearances

5. Action Items

[22-0810](#)

Taxicab Driver License Application for Torrey Cronce.

**Attachments:** [Torrey Cronce.pdf](#)

[Memo Re Taxicab Drive Lic. 6-22-22.pdf](#)

[TorreyCronceDenial \(002\).docx](#)

*Mr. Cronce was not in attendance.*

Hartzheim moved, seconded by Schultz, that the license be recommended for denial. Roll Call. Motion carried by the following vote:

**Aye:** 4 - Schultz, Hartzheim, Croatt and Wolff

**Excused:** 1 - Alfheim

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

Hartzheim moved, Wolff seconded, to approve the balance of the agenda. The motion carried by the following vote:

**Aye:** 4 - Schultz, Hartzheim, Croatt and Wolff

**Excused:** 1 - Alfheim

[22-0882](#)

"Class B" Liquor License application for Bowl Ninety-One LLC d/b/a Bowl Ninety-One, Thong Vue, Agent, located at 100 E College Ave, contingent upon approval from the Health and Inspections departments.

**Attachments:** [Bowl Ninety-One.pdf](#)

**This Report Action Item was recommended for approval**

[22-0847](#)

Class "B" Beer License application for Mai's Deli LLC d/b/a Mai's Deli, Fong Lee, Agent, located at 104 S Memorial Dr, contingent upon approval from the Inspections and Public Works departments.

**Attachments:** [Mai's Deli.pdf](#)

**This Report Action Item was recommended for approval.**

[22-0831](#)

Class "B" Beer and "Class B" Liquor License application for Appleton Nickel Inc d/b/a Glass Nickel Pizza Co, Stacy Knaack, Agent, located at 2120 W College Ave, contingent upon approval from the Community Development, Health and Public Works departments.

**Attachments:** [Glass Nickel Pizza Co.pdf](#)

**This Report Action Item was recommended for approval.**

[22-0775](#)

Class "B" Beer and "Class B" Liquor License Temporary Premise Amendment application for Grand Meridian Inc d/b/a Grand Meridian, Ken Vandeyacht, Agent, located at 2621 N Oneida St, on August 11-13, 2022, contingent upon approval from the Finance, Health and Inspections departments.

**Attachments:** [Grand Meridian.pdf](#)

**This Report Action Item was recommended for approval.**

[22-0812](#)

Temporary Class "B" Beer and "Class B" Liquor License Premise Amendment application for DDCT Inc d/b/a Jim's Place, Jay Plamann, Agent, located at 223 E College Ave, on August 4-7, 2022, contingent upon approval from the Fire, Health and Inspections departments.

**Attachments:** [Jim's Place S&L.pdf](#)

**This Report Action Item was recommended for approval.**

[22-0813](#)

Temporary Class "B" Beer and "Class B" Liquor License Premise Amendment application for Wooden Nickel Restaurant & Lounge Inc d/b/a Wooden Nickel Sports Bar & Grill, Anthony Mueller, Agent, located at 217 E College Ave, on August 4-7, 2022, contingent upon approval from the Fire, Health and Inspections departments.

**Attachments:** [Wooden Nickel Restaurant S&L.pdf](#)

**This Report Action Item was recommended for approval.**

[22-0814](#)

Temporary Class "B" Beer and Reserve "Class B" Liquor License Premise Amendment for The 10th Frame LLC d/b/a The 10th Frame, Chad Van Daalwyk, Agent, located at 618 W Wisconsin Ave, on September 10, 2022, contingent upon approval from the Finance, Inspections and Police departments.

**Attachments:** [The 10th Frame S&L.pdf](#)

**This Report Action Item was recommended for approval.**

[22-0815](#)

Temporary Class "B" Beer and Reserve "Class B" Liquor License application for The Trout Museum of Art Inc, Christina S Turner, Agent, located at 111 W College Ave, on August 26, 2022, contingent upon approval from the Inspections department.

**Attachments:** [Trout Museum of Art.pdf](#)

**This Report Action Item was recommended for approval.**

[22-0819](#)

Temporary Class "B" Beer and Reserve "Class B" Liquor Premise Amendment application for the Fox Cities Performing Arts Center, Maria Van Laanen, Agent, located at 400 W College Ave, on August 16, 2022, contingent upon approval from the Fire and Health departments.

**Attachments:** [Fox Cities Performing Arts Center.pdf](#)

**This Report Action Item was recommended for approval.**

[22-0830](#)

Temporary Class "B" Beer and "Class B" Liquor Premise Amendment application for TNE Inc, d/b/a Emmett's Bar & Grill, Sharon Reader, Agent, located at 139 N Richmond St, contingent upon approval from the Health department.

**Attachments:** [Emmetts Bar & Grill S&L.pdf](#)

**This Report Action Item was recommended for approval.**

[22-0871](#)

Temporary Class "B" Beer and "Class B" Liquor Premise Amendment application for Gregg Van Dinter d/b/a Riverside Bar & Grill, located at 906 S Olde Oneida St, on August 4-7, 2022, contingent upon approval from the Community Development, Health, Inspections and Police departments.

**Attachments:** [Riverside Bar & Grill.pdf](#)

**This Report Action Item was recommended for approval.**

[22-0826](#)

Class "A" Beer and "Class A" Liquor - Cider Only License Change of Agent application for Kwik Trip Inc d/b/a Kwik Trip #182, Isaac A Peterson, New Agent, located at 306 N Richmond St.

**Attachments:** [Isaac A Peterson S&L.pdf](#)

**This Report Action Item was recommended for approval.**

[22-0841](#)

Class "A" Beer and "Class A" Liquor License Change of Agent application for Ultimate Mart LLC d/b/a Pick N Save #187, Lyndsey Lawrence, New Agent, located at 511 W Calumet St, contingent upon approval from the Police department.

**Attachments:** [Lyndsey Lawrence S&L.pdf](#)

**This Report Action Item was recommended for approval.**

[22-0827](#)

Cigarette and Tobacco Products Retail License application for James Holder d/b/a D8D Hemp, located at 2929 N Richmond Street Ste 1.

**Attachments:** [D8D Hemp S&L.pdf](#)

**This Report Action Item was recommended for approval.**

[22-0828](#)

Pet Store License renewal application for Petco #1656, located at 3829 E Calumet St, contingent upon approval from the Inspections department.

**Attachments:** [Petco #1656 S&L.pdf](#)

**This Report Action Item was recommended for approval.**

[22-0857](#)

Temporary Class "B" Beer and Temporary "Class B" Wine application for Sacred Heart Church, David J Erickson, Person in Charge, located at 222 E Fremont St.

**Attachments:** [Sacred Heart Church S&L.pdf](#)

**This Report Action Item was recommended for approval.**

## 6. Information Items

- [22-0875](#) 2022 Police Department Mid-Year Report  
**Attachments:** [APD 2022 Mid-Year Budget Report.pdf](#)
- [22-0873](#) Appleton Police Department completion of the 2022 Edward Byrne Memorial Justice Assistance Grant (JAG) application.
- [22-0874](#) Appleton Police Department Safer Communities Grant Allocation from the Wisconsin DOA
- [22-0879](#) Special Events:  
Appleton Area Jaycees / Festival Food Fireworks, Memorial Park, July 3, 2022  
Bigger Productionz, Hip Hop for Humanity, Pierce Park, July 9, 2022  
Fox Cities Kiwanis Club, 44th Annual Car Show and Swap Meet, Pierce Park, July 16, 2022  
Church of the Resurrection Worship Service & Picnic, Pierce Park, July 24, 2022  
Appleton Parks & Recreation Kids Rummage Sale, Pierce Park, July 26, 2022  
Mission Church Arts Camp Celebration, Pierce Park, August 12, 2022
- [22-0878](#) Director's Reports  
City Clerk  
Fire Chief  
    -Request to Apply for an EMS Grant  
    -Hiring Update  
Police Chief  
    -Update on Traffic Safety Officer Position  
    -Lateral Hiring Bonuses

## 7. Adjournment

**Hartzheim moved, seconded by Wolff, that the meeting be adjourned at 5:58 p.m. Roll Call. Motion carried by the following vote:**

**Aye:** 4 - Schultz, Hartzheim, Croatt and Wolff

**Excused:** 1 - Alfheim

**RESOLUTION to add legalization advisory referendum to Fall Election Ballot**

providing for an advisory referendum on the November 8, 2022, election ballot to measure public opinion on allowing adults 21 years of age and older to engage in the personal use of marijuana, while also regulating commercial marijuana-related activities, and imposing a tax on the sale of marijuana

WHEREAS, criminalizing marijuana or cannabis use has failed to curb its use and, according to a Gallup survey conducted in July 2021, 49 percent of Americans say they have used marijuana, up from 30 percent in 1985; and

WHEREAS, in a Marquette University Law School poll conducted in February 2022, 61 percent of Wisconsinites said that marijuana should be “fully legalized and regulated like alcohol”, and recent polls show a majority of Americans favor legalization of adult recreational use of marijuana; and

WHEREAS, the majority of Democratic, Republican, and Independent voters favor marijuana legalization.

WHEREAS, thirty-seven states, including every state surrounding Wisconsin, have legalized some form of marijuana; and

WHEREAS, a study in late 2021 by municipal bond strategists at Barclays and reported in Fortune Magazine suggests that by 2030 states that have legalized marijuana and regulate its sale may realize \$12 billion per year in tax revenue to help balance their budgets; and

WHEREAS, Appleton is failing to benefit from marijuana-related small business opportunities and sales tax that neighboring states are increasingly capitalizing on; and

WHEREAS, marijuana use as an alternative to prescription pain killers has been shown to reduce opioid addiction, and 22% of U.S. military veterans report using medical marijuana to treat Post Traumatic Stress Disorder; and

WHEREAS, legalization would undercut the illicit market, and ensure that marijuana use and sale are regulated and safe; and

WHEREAS, the time Appleton law enforcement officers spend enforcing existing marijuana laws and ordinances negatively impacts the time they have available to solve more serious crimes and apprehend more dangerous criminals.

NOW THEREFORE, BE IT RESOLVED, that the Common Council of Appleton, Wisconsin, request the following:

Section 1. Referendum Election. The City Clerk is hereby directed to call an advisory referendum election to be held in the City of Appleton at the regularly scheduled election to be held November 8, 2022, for the purpose of submitting to the qualified electors of Appleton the proposition of whether the State of Wisconsin should legalize and regulate the full adult use of marijuana in Wisconsin.

Section 2. Official Referendum Ballot Form. The ballot to be used at the referendum election shall be prepared in accordance with the provisions of Sections 5.64 (2) and 7.08 (1)(a) of the Wisconsin Statutes. The ballot shall be substantially in the form attached hereto as Exhibit A.

## **EXHIBIT A**

### OFFICIAL REFERENDUM BALLOT

**November 8, 2022**

### **ADVISORY REFERENDUM**

Should marijuana be legalized for adult-use, taxed, and regulated like alcohol?

Yes

No

Submitted July 20, 2022

Alderspersons:

Schultz, District 9  
Meltzer, District 2  
DeToro, District 4  
Thyssen, District 8  
Fenton, District 6  
Wolff, District 12  
Jones, District 10

Referred to the Safety & Licensing Committee



## LEGAL SERVICES DEPARTMENT

Office of the City Clerk

**Kami Lynch, Clerk**

100 North Appleton Street

Appleton, WI 54911

Phone: 920/832-6443

Fax: 920/832-5823

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### MEMORANDUM

**To:** Safety & Licensing Committee (Chris Croatt, Chairperson), Common Council  
**From:** Kami Lynch, City Clerk  
**Date:** July 26, 2022  
**Re:** Resolution #8-R-22 Advisory Referendum for Nov. 8<sup>th</sup> Election Ballot

Resolution #8-R-22 provides for adding an advisory referendum to the November election ballot. Wis. Stat. § 5.02(16s) defines “referendum” as an election at which an advisory, validating or ratifying question is submitted to the electorate.” Broadly speaking, “referendum” or “referenda” are general terms that refer to a question appearing on the ballot to be voted on by voters. Direct action by a governing body that clearly establishes the referendum question is one of the ways in which a referendum arrives on the ballot. Advisory referendums are non-binding questions which survey electors to elicit their views on a question, but advisory referendums do not have the force of law. Wisconsin Statutes give no legal effect to the results of an advisory referendum, other than the weight that the governing body voluntarily assigns to the results.

The deadline for a referendum question to be approved for ballot placement for the November 8<sup>th</sup>, 2022 election is no later than August 30<sup>th</sup>.

As the proposed referendum is for a municipal advisory referendum, the cost of adding this item to the November election ballot falls on the City of Appleton. Costs related to contests on the ballot are variable in nature and dependent upon a variety of factors such as the number of other contests on the ballot, the size of the ballot, the portion taken up by the contest (referendum) on the ballot, and the total number of ballots ordered. Given that information, a rough estimate of the cost of adding this advisory referendum to the ballot for the November 8<sup>th</sup>, 2022, election is \$2,250. The exact cost of the advisory referendum will not be available until ballots are ordered, printed, and election programming is complete.

Please do not hesitate to contact me with any questions.

# Original Alcohol Beverage Retail License Application

(Submit to municipal clerk.)

07/01/2022

06/30/2023

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

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

County of Doutagamie 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>	<b>\$ 600</b>

Name (individual / partners give last name, first, middle; corporations / limited liability companies give registered name)  
Chandelier 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 <u>Sippola</u>	(First) <u>Kimberly</u>	(Middle Name) <u>Ann</u>	Home Address (Street, City or Post Office, & Zip Code) <u>N1374 Tuckaway Ct, Greenville, WI, 54942</u>
Vice President / Member Last Name <u>Jones</u>	(First) <u>Kyle</u>	(Middle Name) <u>Edward</u>	Home Address (Street, City or Post Office, & Zip Code) <u>739 Grove Street, Oshkosh, WI, 54901</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>Jones</u>	(First) <u>Kyle</u>	(Middle Name) <u>Edward</u>	Home Address (Street, City or Post Office, & Zip Code) <u>739 Grove Street, Oshkosh, WI, 54901</u>
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

1. Trade Name Broken Chandelier Business Phone Number 330 705 0238  
 2. Address of Premises 215 W. College 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.)  
2500 Sq Feet  
Bar Area  
Walk-in Cooler in Basement  
Storage Room

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? Bad Badger

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  
Completed Responsible Beverage Course on 02/11/2022
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 10/22/21 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>Jones, Kyle, E</b>	Title/Member <b>General Partner</b>	Date <b>02/11/2022</b>
Signature 	Phone Number 	Email Address 

**TO BE COMPLETED BY CLERK**

Date received and filed with municipal clerk <b>02/21/2022</b>	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 Alcohol License Questionnaire

1. Name of Applicant: Kyle Jones

2. Name of Business: Broken Chandelier

(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: 215 W. 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 X

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

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.

<u>Sippola</u>	<u>Kimberly</u>	<u>A</u>	<u>Kimberly</u>	<u>Sippola</u>	●	/	●	/	●●
First name	M.I.		Last name						Date of Birth
<u>Jones</u>	<u>Kyle</u>	<u>E</u>	<u>Jones</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: GK Ventures Inc.  
First name Middle Initial Last name

Address: 3321 Knox Lane Neenah WI 54956  
City State ZIP

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

Name: Bad Badger

(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 X 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?

0 months ago.

10. Seating capacity: Inside 35 Outside 0

11. Operating hours (Inside the building): 4:00<sup>PM</sup> - 2:00 AM  
Operating hours (Outdoor seating areas): N/A

12. Employees/Staff

Number of floor personnel 2 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: 2500 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:

Seating for guests will be indoors within a 2500 sq ft. area and along the bar.

  
Signature

02/11/2022  
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 Chandelier 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 Broken Chandelier  
(Trade Name)

located at 215 W. College Ave, Appleton, WI 54911

appoints Kyle Jones  
(Name of Appointed Agent)  
739 Grove Street, Oshkosh, WI 54901  
(Home Address of Appointed Agent)

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

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

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

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

Place of residence last year 739 Grove St, Oshkosh, WI 54901

For: Chandelier 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, Kyle Jones, hereby accept this appointment as agent for the  
(Print / Type Agent's Name)

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

[Signature] 02/11/2022 Agent's age       
(Signature of Agent) (Date)

739 Grove Street, Oshkosh, WI 54901 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)



*Community and Economic Development*

**Transfer of Special Use Permit #13-08  
215 West College Avenue  
Zoning Classification: CBD Central Business District**

**Date:** March 2, 2022

**Background:**

Special Use Permit #13-08 was approved for a tavern at 215 West College Avenue. The approval allowed the serving and consumption of alcohol in the following location:

First Floor: 3,000 square feet (per SUP #13-08 development plan)

Special use permit #13-08 runs with the land subject to the following conditions:

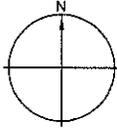
**On-going Condition of Special Use Permit #13-08:**

- a) The serving and consumption of alcohol is limited to the interior 1<sup>st</sup> floor of the existing building as shown on the attached Development Plan. Any deviations from the approved Development Plans may require a major or minor change request to this Special Use Permit pursuant to Section 23-66(g) of the Zoning Ordinance.
- b) All City of Appleton Fire Codes must be met.
- c) All City of Appleton Building and State of Wisconsin Building Codes must be met.
- d) All City of Appleton Health codes must be met.
- e) The use shall conform to the standards established on Chapter 9, Article III, Alcoholic beverages, of the Appleton Municipal Code.

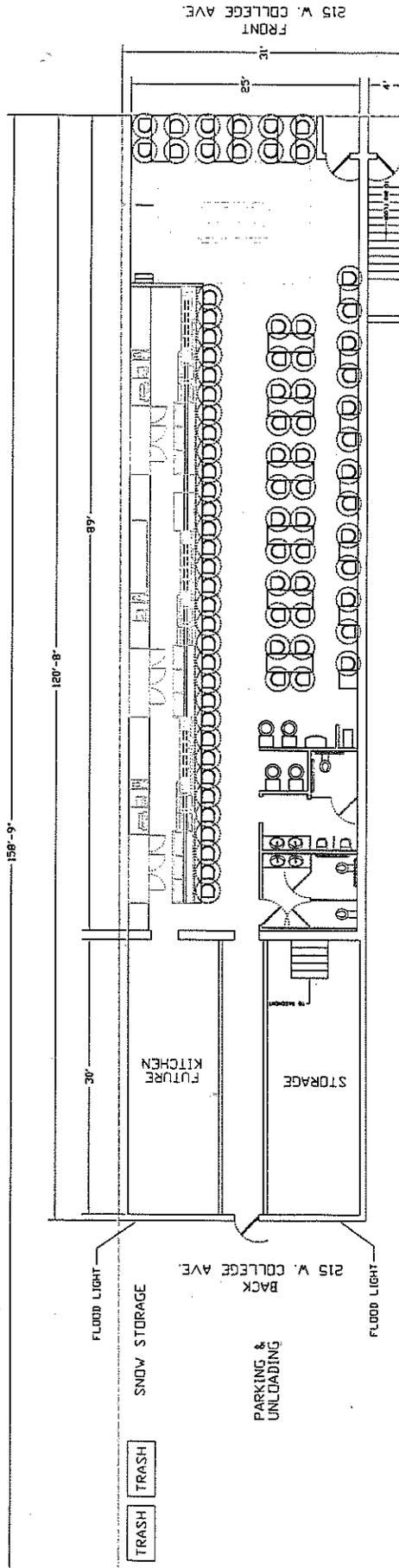
**Analysis:**

The information listed on Liquor License and Liquor License Questionnaire dated February 11, 2022, appears to be consistent with Special Use Permit #13-08. Therefore, Special Use Permit #13-08 is transferred to the applicant upon the issuance of the Liquor License to allow for the continued use of the premises for on-site alcohol consumption subject to the conditions of SUP #13-08 being complied with. (See above)

Please contact the Community and Economic Development Department at (920)832-6468 with any questions or any proposed changes to the development plan(s) or the alcohol license questionnaire.



THIS LOT IS OCCUPIED BY: M&I BANK  
LOT ADDRESS: 221 W. COLLEGE AVE.  
USE: BANKING



THIS LOT IS OCCUPIED BY: GIBSON GRILL  
LOT ADDRESS: 211 W. COLLEGE AVE.  
USE: RESTAURANT & BAR

THIS LOT IS OCCUPIED BY: MUNICIPAL PARKING GARAGE  
USE: PUBLIC PARKING

ALLEY

City Plan Commission  
Appleton, Wisconsin  
09-08-08

215 W. College Avenue  
Special Use Permit  
Alcohol Sales and Service

NTS

# Original Alcohol Beverage Retail License Application

(Submit to municipal clerk.)

7/01/2022

6/30/2023

For the license period beginning: 7/1/22 ending: 6/30/23  
(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 <u>[REDACTED]</u>	
FEIN Number <u>[REDACTED]</u>	
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 type="checkbox"/> Class B liquor	\$
<input type="checkbox"/> Reserve Class B liquor	\$
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$ 60
<b>TOTAL FEE</b>	<b>\$ 160</b>

Name (individual / partners give last name, first, middle; corporations / limited liability companies give registered name)  
Courtney Joyce Hayden The Breaking Point 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 <u>Hayden</u>	(First) <u>Courtney</u>	(Middle Name) <u>Joyce</u>	Home Address (Street, City or Post Office, & Zip Code) <u>W5939 County Road A Black Creek 54106</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 <u>Hayden</u>	(First) <u>Courtney</u>	(Middle Name) <u>Joyce</u>	Home Address (Street, City or Post Office, & Zip Code) <u>W5939 County Rd A Black Creek 54106</u>
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

1. Trade Name Breaking Point Business Phone Number 920-205-3780  
 2. Address of Premises 2011 N. Richmond St 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.)  
rage room(2), paint splatter room, air soft indoor target range, small beer/seltzer bar  
3,000 sq ft  
beer will be stored behind the bar in a locked cooler  
beer will be served & kept up at the bar

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? \_\_\_\_\_

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  
Course completed on Jan 10th 2022  
Valid for 2 years
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 March 2018 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>Haupen, Courtney J</u>	Title/Member <u>owner</u>	Date <u>1/27/22</u>
Signature <u>Courtney J Haupen</u>	Phone Number <u>[REDACTED]</u>	Email Address <u>[REDACTED]</u>

**TO BE COMPLETED BY CLERK**

Date received and filed with municipal clerk <u>1-27-22</u>	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: Elite Wrestling

(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 X 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?

1 months ago.

10. Seating capacity: Inside 15 Outside —

11. Operating hours (Inside the building): (4pm - 9pm M,T,Th) (4pm - 11pm Fri) (11am - 11pm Sat)  
Operating hours (Outdoor seating areas): —

12. Employees/Staff

Number of floor personnel 1-4 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: 3,000 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:

rage room, paint splatter room, airsoft range  
beer/seltzer will be kept at a small  
beer near the front of our premises.

Christy Taylor  
Signature

1/27/22  
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 The Breaking Point 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 The Breaking Point  
(Trade Name)

located at 2011 N Richmond St

appoints Courtney Hayden  
(Name of Appointed Agent)

WS939 County Road A Black Creek WI 54106  
(Home Address of Appointed Agent)

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

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

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

How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin? 34 years

Place of residence last year WS939 County Road A Black Creek WI 54106

For: The Breaking Point LLC  
(Name of Corporation / Organization / Limited Liability Company)

By: Courtney Hayden  
(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, Courtney Hayden, 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.

Courtney Hayden 11/27/22  
(Signature of Agent) (Date)  
WS939 County Road A Black Creek WI 54106  
(Home Address of Agent)

Agent's age 34  
 Date of birth 11/27/88

### 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)

**RESOLUTION**

**CITY OF APPLETON  
RESOLUTION APPROVING SPECIAL USE PERMIT #5-21**

**WHEREAS**, Courtney Hayden, owner of The Breaking Point has applied for a Special Use Permit to allow alcohol sales and consumption on the premises located at 2009 & 2011 N. Richmond Street, and also identified as Parcel Number 31-5-2326-00, and

**WHEREAS**, the location for the proposed indoor recreational use with alcohol sales and service is located in the C-2 General Commercial District, and the proposed use may be permitted by Special Use Permit within this zoning district pursuant to Chapter 23 of the Municipal Code; and

**WHEREAS**, the City of Appleton Plan Commission held a public hearing on January 12, 2022 on Special Use Permit #5-21 at which all those wishing to be heard were allowed to speak or present written comments and other materials presented at the public hearing; and

**WHEREAS**, the City of Appleton Plan Commission has reviewed and considered the Community and Economic Development Department's staff report and recommendation and other spoken and written evidence and testimony presented at the public hearing; and

**WHEREAS**, the City of Appleton Plan Commission reviewed the standards for granting a Special Use Permit under Sections 23-66(e)(1-8) of the Municipal Code; and

**WHEREAS**, the City of Appleton Plan Commission reviewed the standards for imposing conditions on the Special Use Permit under Section 23-66(c)(5) of the Municipal Code, and forwarded Special Use Permit #5-21 to the City of Appleton Common Council with a favorable conditional or not favorable (CIRCLE ONE) recommendation; and

**WHEREAS**, the City of Appleton Common Council has reviewed the report and recommendation of the City of Appleton Plan Commission at their meeting on January 19, 2022.

**NOW, THEREFORE, BE IT RESOLVED, DETERMINED AND ORDERED** by the Common Council, based on Community and Economic Development Department's staff report and recommendation, as well as other spoken and written evidence and testimony presented at the public hearing and Common Council meeting, and having considered the recommendation of the City Plan Commission, that the Common Council:

1. Determines all standards listed in Sections 23-66(e)(1-8) are found in the affirmative YES or NO (CIRCLE ONE)
2. If NO, the City of Appleton Common Council hereby denies Special Use Permit #5-21 for alcohol sales and consumption on the premises located at 2009 & 2011 N. Richmond Street, and also identified as Parcel Number 31-5-2326-00, based upon the following standards and determinations: (List reason(s) why the Special Use Permit was denied)

3. If YES, the City of Appleton Common Council hereby approves Special Use Permit #5-21 for alcohol sales and consumption on the premises located at 2009 & 2011 N. Richmond Street, and also identified as Parcel Number 31-5-2326-00, subject to the following conditions:

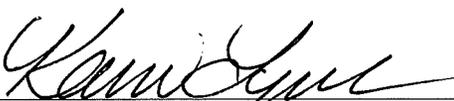
**CONDITIONS OF SPECIAL USE PERMIT #5-21:**

- A. All applicable codes, ordinances, and regulations, including but not limited to Fire, Building, and Health Codes and the Noise Ordinance, shall be complied with.
  - B. This Special Use Permit is needed for the on-site alcohol sales and consumption, not the indoor recreational use. Any expansions of the special use, changes to the development plan(s), plan of operation or any conditions of approval may require a major or minor amendment request to this Special Use Permit pursuant to Section 23-66(g) of the Zoning Ordinance. Contact the Community and Economic Development Department to discuss any proposed changes.
  - C. The applicant shall receive approval of a Liquor License from the City Clerk prior to serving alcohol on the premises.
  - D. The use shall conform to the standards established in Chapter 9, Article III, Alcoholic Beverages, of the Appleton Municipal Code.
4. The City Clerk's Office is hereby directed to give a copy of this resolution to the owner/applicant, Community and Economic Development Department, Inspections Division, and any other interested party.

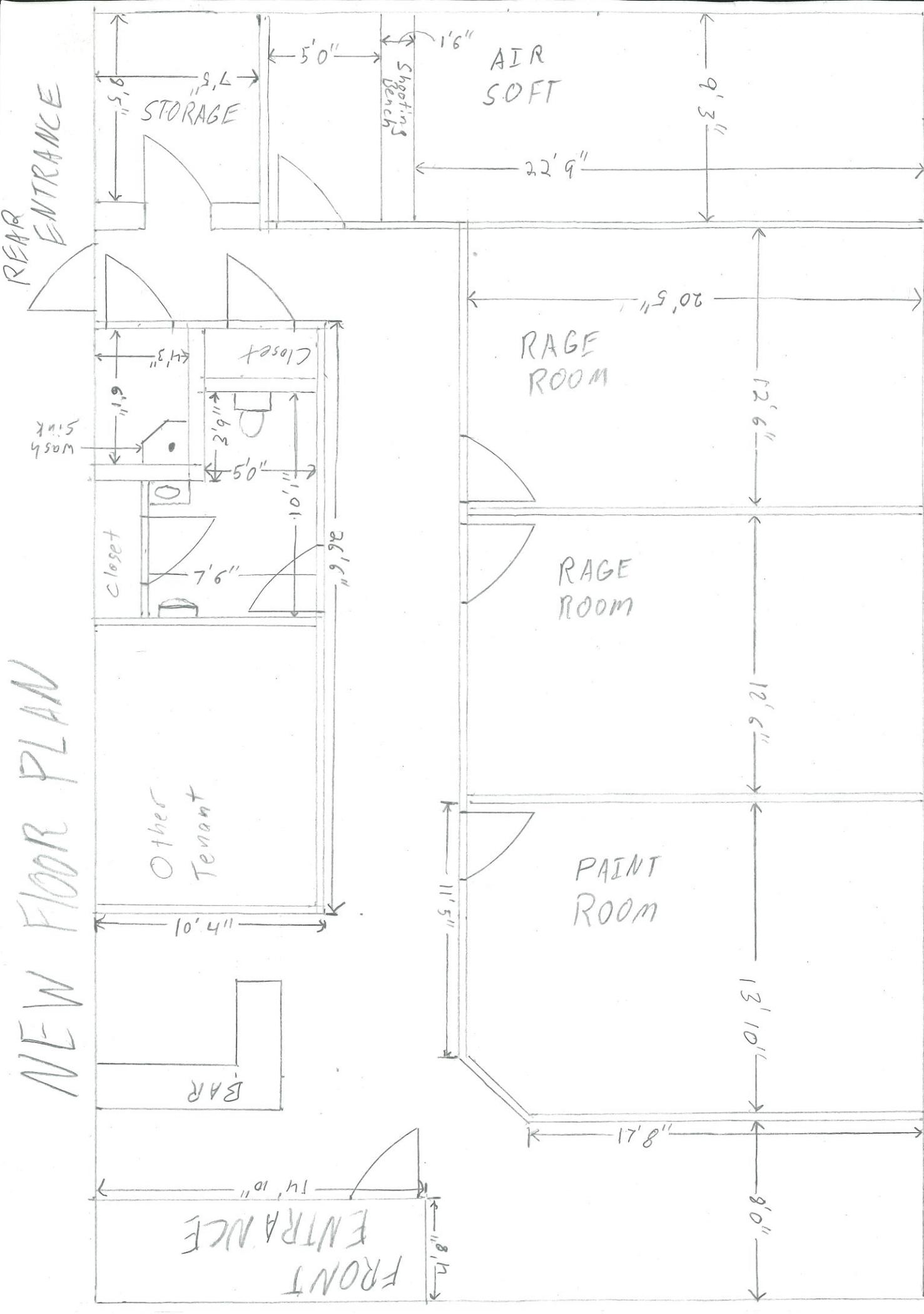
Adopted this 19<sup>th</sup> day of January 2022.

  
\_\_\_\_\_  
Jacob A. Woodford, Mayor

ATTEST:

  
\_\_\_\_\_  
Kami Lynch, City Clerk

# NEW FLOOR PLAN



**PLAN OF OPERATION AND LOCATIONAL INFORMATION**

**Business Information:**

Name of business: The Breaking Point LLC

(Check applicable proposed business activity(s) proposed for the building or tenant space)

- Restaurant
- Bar/Night Club
- Wine Bar
- Microbrewery
- Other amusement

Years in operation: 2 years

Percentage of business derived from food service: 0 %

Type of proposed establishment (detailed explanation of business operations):

amusement  
2 rage rooms  
1 paint splatter room, air soft target shooting  
small beer/seltzer bar

**Proposed Hours of Operation for Indoor Uses:**

Day	From	To
Week Days Monday thru Thursday	4pm	9pm
Friday	4pm	11pm
Saturday	11am	11pm
Sunday	closed	

**Building Capacity and Area:**

Maximum number of persons permitted to occupy the building or tenant space as determined by the International Building Code (IBC) or the International Fire Code (IFC), whichever is more restrictive: 16-18 persons

Gross floor area of the existing building(s): 2,400

Gross floor area of the proposed building(s): 2,400

**Describe Any Potential Noise Emanating From the Proposed Use:**

Describe the noise levels anticipated from all equipment or other mechanical sources:

Mostly evening hrs (4pm-9pm)  
On a noise scale from 1-10, I'd rate  
our noise level a 5.

Describe how the crowd noise will be controlled inside and outside the building:

no anticipated outside crowds  
Inside gatherings will be kept  
to minimum

If off-street parking is available for the business, describe how noise from the parking lot will be controlled:

~~\_\_\_\_\_~~  
~~\_\_\_\_\_~~  
~~\_\_\_\_\_~~

**Outdoor Space Uses:**

(Check applicable proposed area)

- Patio
- Deck
- Sidewalk Café
- Other \_\_\_\_\_
- None

Size: \_\_\_\_\_ square feet.

Type of materials used and height of material to enclose the perimeter of the outdoor space:

Fencing  Landscaping  Other \_\_\_\_\_. Height \_\_\_\_\_ feet.

Is there any alcohol service incorporated within the outdoor space? Yes \_\_\_ No \_\_\_

Are there plans for outdoor music/entertainment? Yes \_\_\_ No \_\_\_

If yes, describe how the noise will be controlled:

\_\_\_\_\_

Is there any food service incorporated within the outdoor space? Yes \_\_\_ No \_\_\_

**Proposed Hours of Operation for Outdoor Space:**

Day	From	To
Week Days: Monday thru Thursday		
Friday		
Saturday		
Sunday		

**NOTE: Hours of Operation for Outdoor Uses (Sidewalk Café with Alcohol):**

**\*\*\*\*Municipal Code Section 9-262(b)(4): The permit holder can begin serving alcoholic beverages in the sidewalk café at 4:00 p.m. Monday through Friday and 11:00 a.m. on Saturday and Sunday. All alcoholic beverages must be removed from the sidewalk café by 9:30 p.m.**

**Off-Street Parking:**

Number of spaces existing: 30

Number of spaces proposed: 30

**Other Licensed Premises:**

The number of licensed premises within the immediate geographic area of the proposed location will be considered in order to avoid an undue concentration that may have the potential of creating public safety problems or deterring neighborhood development.

List nearby licensed premises:

~~Bark at the Moon - dog grooming~~  
~~Just Pets - pet store~~

**Number of Employees:**

Number of existing employees: 4

Number of proposed employees: 4

Number of employees scheduled to work on the largest shift: 4

# Original Alcohol Beverage Retail License Application

(Submit to municipal clerk.)

7/1/22 <sup>SG</sup> 6/30/23 <sup>SG</sup>  
 For the license period beginning: 7/1/22 ending: 6/30/23  
(mm dd yyyy) (mm dd yyyy)

Applicant's Wisconsin Seller's Permit Number ██	
Firm 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	\$
<input checked="" type="checkbox"/> Reserve Class B liquor	\$ 500
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$ 60
<b>TOTAL FEE</b>	<b>\$</b>

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

County of Outagamie Aldermanic Dist. No. \_\_\_\_\_  
 (if required by ordinance) <sup>SG</sup>

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

Name (Individual / partners give last name, first, middle; corporations / limited liability companies give registered name)  
Tipsy Taco + Tequila Bar 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 <u>Gregory</u>	(First) <u>Sarah</u>	(Middle Name) <u>Jane</u>	Home Address (Street, City or Post Office, & Zip Code) <u>111 E Water St Apt 105 Appleton, 54911</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 <u>Gregory</u>	(First) <u>Sarah</u>	(Middle Name) <u>Jane</u>	Home Address (Street, City or Post Office, & Zip Code) <u>111 E Water St. Apt 105 Appleton 54911</u>
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

1. Trade Name TipsyTaco + Tequila Bar Business Phone Number \_\_\_\_\_  
 2. Address of Premises 127 S Memorial 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.)  
4 dining rooms, bar, bar tables, 2 portable indoor bars.  
Storage room.

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? \_\_\_\_\_

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 11/31/22 of registration.
- (b) Is applicant corporation/limited liability company a subsidiary of any other corporation or limited liability company? **If yes, explain** .....  Yes  No  
Sangria's Mexican Grill 2 LLC  
215 S Memorial Dr.  
Appleton WI 54911
- (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>Gregory, Sarah J</u>	Title/Member <u>owner</u>	Date <u>3/11/22</u>
Signature <u>Sarah J Gregory</u>	Phone Number 	Email Address 

**TO BE COMPLETED BY CLERK**

Date received and filed with municipal clerk <u>3-14-22</u>	Date reported to council / board <u>Rev 7/19/22</u>	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: Sarah Gregory

2. Name of Business: Tipsy Taco & Tequila 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: 127 S Memorial Dr 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.

<u>Sarah</u>	<u>J</u>	<u>Gregory</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
			/ /
First name	M.I.	Last name	Date of Birth

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

Name: ZCF QOZB LLC Christopher Francy managing member  
 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: \_\_\_\_\_

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

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

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 300 Outside 0

11. Operating hours (Inside the building): Sun 11am-8pm M-Th 11am-9pm Fri/Sat 11am-10pm  
Operating hours (Outdoor seating areas): NA

12. Employees/Staff

Number of floor personnel 12-15 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: 7758 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:

full service restaurant/Bar

4 dining rooms

Bar + 2 mobile bars + tequila Bar

Lounge area

Sauahel

Signature

3/14/22

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 Tipsy Taco + Tequila Bar 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 Tipsy Taco + Tequila Bar  
(Trade Name)

located at 127 S Memorial Dr. Appleton, WI 54911

appoints Sarah Gregory  
(Name of Appointed Agent)  
111 E Water St apt 105 Appleton, WI 54911  
(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).  
Sangria's Mexican Grill, Appleton, WI

Is applicant agent subject to completion of the responsible beverage server training course?  Yes  No  
How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin? 20+ years

Place of residence last year 121 E Water St apt 118 Appleton, WI 54911

For: Tipsy Taco + Tequila Bar LLC  
(Name of Corporation / Organization / Limited Liability Company)

By: Sarah Gregory  
(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, Sarah Gregory, 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.

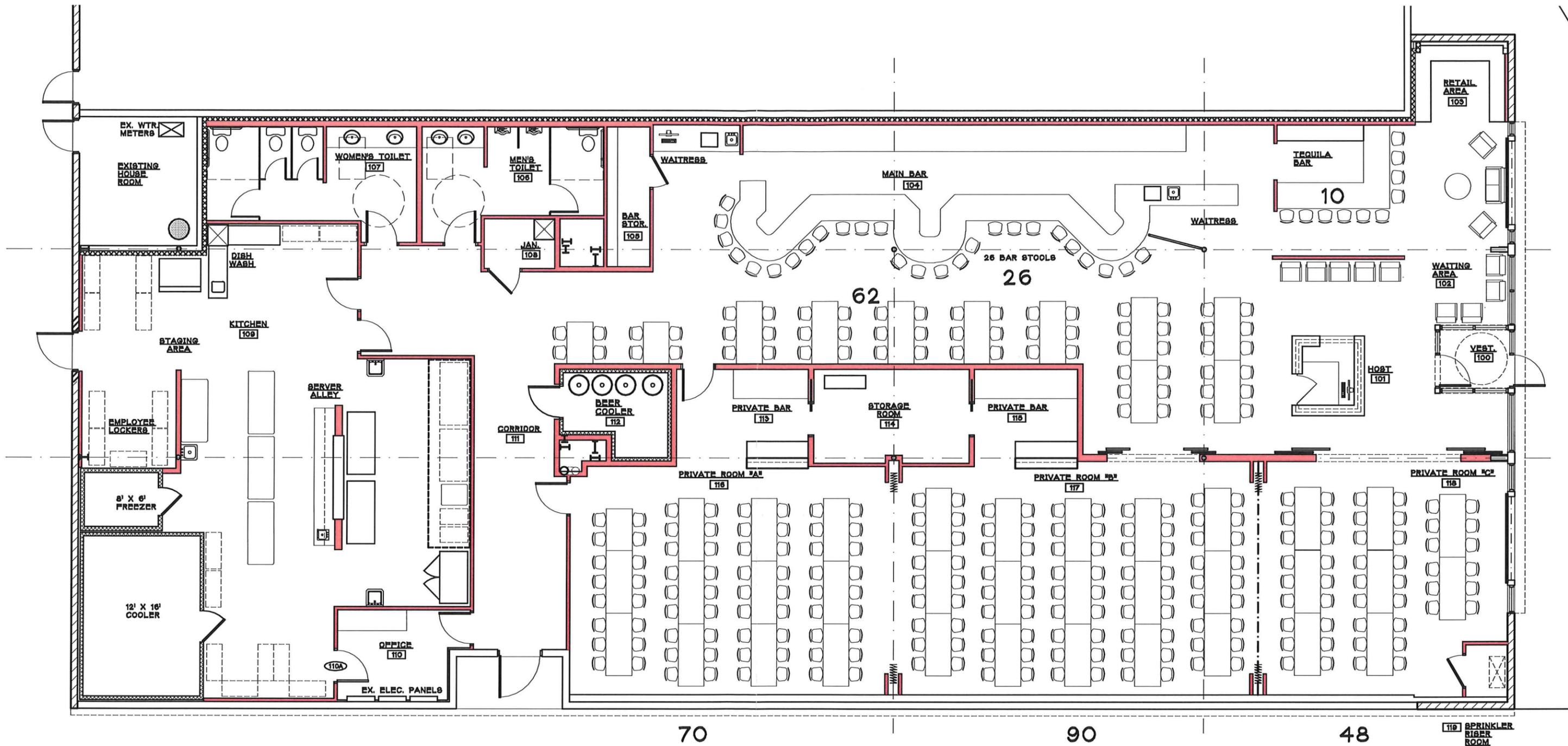
Sarah Gregory 3/11/22  
(Signature of Agent) (Date)  
111 E Water St apt 105 Appleton, WI 54911  
(Home Address of Agent)

Agent's age             
Date of birth           

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

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

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



450 MAX CAPACITY PER TOILET FIXTURE COUNT  
 306 SEATING CAPACITY

7,758 sf  
**FLOOR PLAN** NORTH  
 SCALE: 3/16"=1'-0"



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22-0593

# REQUEST for Alcohol License Premise Amendment

<b>FEES ARE NON-REFUNDABLE</b>		Date Recv'd <u>4/28/22</u>
License Fee	\$10.00/event	Acct: CLCAGP
Receipt	<u>3546-</u>	

## SECTION 1 - LICENSE INFORMATION

Name of Establishment <u>Stone Arch Brewpub, Inc.</u>	
Address of Establishment <u>1004 S. Olde Oneida St.</u>	
Name of Agent <u>Steve Lonsway</u>	Phone Number <u>920-735-0507</u>

## SECTION 2 - PREMISE AMENDMENT

Please describe the change in premises:  
 \*A drawing/diagram of the proposed area must also be submitted with this application\*  
We hope to utilize our North area for live music on Tuesday evenings from 5p-11p (music ends @ 9p) and during Mile of Music week. Diagrams attached

Is this change Permanent?  <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	If this is temporary please specify the reason for the amendment:
--	---

Please list the date(s) and time(s) that this temporary premise amendment will be utilized:  
Mile of Music Week  
(August 4-7) 12p-11p 8/4  
12p-11p 8/5  
12p-11p 8/6  
12p-5p 8/7

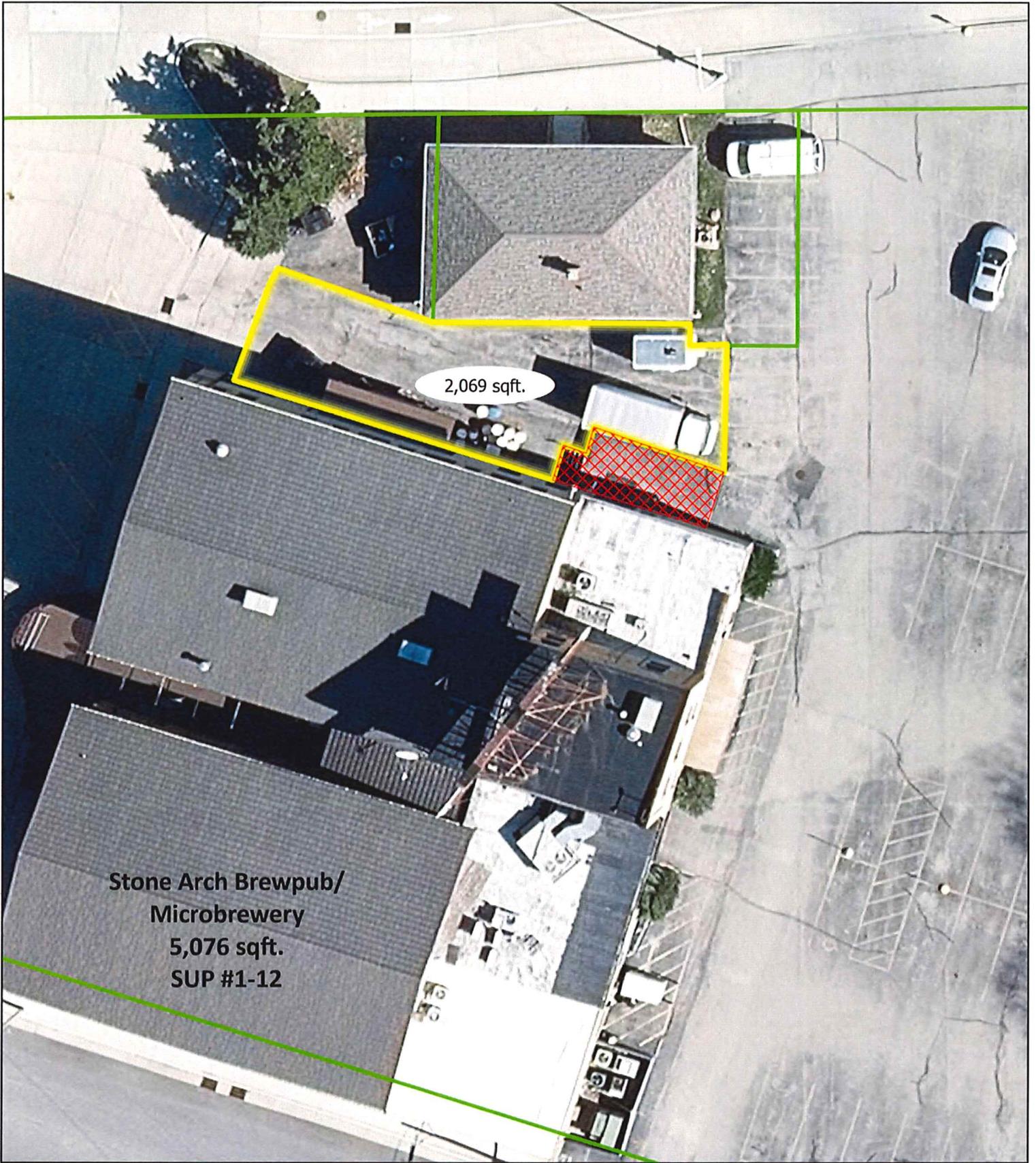
## SECTION 3 - PENALTY NOTICE

I certify that I am familiar with Section 9-52 of the Municipal Code of the City of Appleton and agree that any license granted under this application may be suspended for cause at any time by the Common Council.  
 Under penalty of law, I swear that the information provided in this application is true and correct to the best of my knowledge and belief.  
 Signature of Applicant: Steve Lonsway

## FOR OFFICE USE ONLY

Department	Approve	Deny	By	Reason
Comm. Dev.				
Finance	<u>4-28</u>		<u>Burton</u>	
Fire	<u>4-28</u>		<u>Henson</u>	
Health	<u>5-4</u>		<u>Roberts</u>	
Inspections				
Police	<u>4-29</u>		<u>Nagele</u>	
S&L	Council	Date Issued	Exp. Date	License Number

sent 4-28



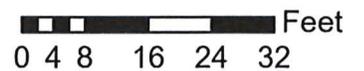
2,069 sqft.

Stone Arch Brewpub/  
Microbrewery  
5,076 sqft.  
SUP #1-12

### Legend

-  Loading Dock
-  Option 3
-  Parcels

# Option 3





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# REQUEST for Alcohol License Premise Amendment

<b>FEES ARE NON-REFUNDABLE</b>		Date Recv'd <u>7/13/22</u>
License Fee	\$10.00/event	Acct: CLCAGP
Receipt	<u>3820-3</u>	

## SECTION 1 – LICENSE INFORMATION

Name of Establishment

ROOKIES SPORTS BAR & GRILL

Address of Establishment

325 N. APPLETON ST

Name of Agent

STEVE CARROW

Phone Number



## SECTION 2 – PREMISE AMENDMENT

Please describe the change in premises:

\*A drawing/diagram of the proposed area must also be submitted with this application\*

See attached.

Is this change Permanent?

YES

NO

If this is temporary please specify the reason for the amendment:

mile of music

Please list the date(s) and time(s) that this temporary premise amendment will be utilized:

August 4 - 7, 2022

11:00 AM - 10:00 PM daily

## SECTION 3 – PENALTY NOTICE

I certify that I am familiar with Section 9-52 of the Municipal Code of the City of Appleton and agree that any license granted under this application may be suspended for cause at any time by the Common Council.

Under penalty of law, I swear that the information provided in this application is true and correct to the best of my knowledge and belief.

Signature of Applicant: \_\_\_\_\_

## FOR OFFICE USE ONLY

Department	Approve	Deny	By	Reason
Comm. Dev.				
Finance				
Fire				
Health				
Inspections				
Police				

S&L 07/27/2022

Council 08/03/2022

Date Issued

Exp. Date

License Number





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<b>FEES ARE NON-REFUNDABLE</b>	Date Rec'd <u>6/8/22</u>
License Fee - \$10.00 per event	Acct Code: CLCSPB
Investigation Fee _____ + 7.00	Acct Code: CLCPIF
Total Amount Paid <u>17</u>	Receipt <u>3702-5</u>

**Application for Temporary Class "B" Beer or "Class B" Wine License**

\*Application MUST be on file for 10 days prior to event, please allow 2-3 weeks for processing\*

<b>The named organization applies for: (Please check one or both)</b>								
<input checked="" type="checkbox"/> A temporary Class "B" license to sell FERMENTED MALT BEVERAGES at picnics or similar gathering under s. 125.26(6) Wis. Stats.								
<input checked="" type="checkbox"/> A temporary "Class B" license to sell WINE at picnics or similar gathering under s. 125.51(10) Wis. Stats. (Limit 2 licenses in a 12 month period)								
<b>SECTION 1 – ORGANIZATION INFORMATION – Answer all questions completely. Please PRINT clearly</b>								
Name of Organization (Bona fide club, lodge or society, veteran's organization or fair association) <u>ST. PIUS X CATHOLIC CHURCH</u>						Date Organized <u>1957</u>		
Address <u>500 W. MARQUETTE ST.</u>				City <u>APPLETON</u>		State <u>WI</u>	Zip <u>54911</u>	
Person in Charge of Event:			Name: Last <u>MILES</u>		First <u>ANDREW</u>	M. I. <u>J.</u>	Date of Birth <u>[REDACTED]</u>	
Address <u>1427 E. KEYSTONE LANE</u>			City <u>APPLETON</u>		State <u>WI</u>	Zip <u>54913</u>	Person in charge phone number: <u>[REDACTED]</u>	
President		Last	First	Middle Initial		Date of Birth	Male	Female
Address				City		State	Zip	
Vice President		Last	First	Middle Initial		Date of Birth	Male	Female
Address				City		State	Zip	
Secretary		Last	First	Middle Initial		Date of Birth	Male	Female
Address				City		State	Zip	
Treasurer		Last	First	Middle Initial		Date of Birth	Male	Female
Address				City		State	Zip	
<b>SECTION 2 – EVENT INFORMATION SECTION</b>								
Date(s) of Event: Beginning <u>08/26/2022</u> Ending: <u>08/28/2022</u>				Hours		AM / PM	AM / PM	
Please describe the type of event you are going to have: <u>CHURCH PICNIC w/ FOOD, BEER TENT, GAMES, AND MUSIC</u>				<u>FRI: 3-10 PM / SAT: 1-11 PM / SUN: 10:30 AM - 1:30 PM</u>				
Do you plan to serve food at this event?			No	<input checked="" type="checkbox"/> Yes	If yes, contact the Appleton Health Department. (920.832.6429)			
Location where beer or wine will be sold or served: <u>BEER TENT IN PARKING LOT OF CHURCH</u>								
Address <u>500 W. MARQUETTE ST.</u>				City <u>APPLETON</u>		State <u>WI</u>	Zip <u>54911</u>	
Describe actual location and dimensions of area to be licensed below: - BE PRECISE!				Will minors be present?		No	<input checked="" type="checkbox"/> Yes	
<u>LARGE TENT IN PARKING LOT</u>				If yes, how will you prevent minors from obtaining alcoholic beverages? <u>WRISTBANDS WILL BE USED</u>				
<b>SECTION 3 – PENALTY SECTION</b>								
This application must be on file in the Office of the City Clerk for at least ten (10) business days prior to granting the license. If the event will last more than four (4) days, the application shall be filed 15 days prior to the granting of the license. This organization also agrees to comply with all laws, resolutions, ordinances and regulations (state, federal or local) affecting the sale of fermented malt beverages if the license is granted. The officer(s) of the organization, individually and together, declare under penalties of law that the information provided in this application is true and correct to the best of their knowledge and belief.								
Signature of Officer <u>[Signature]</u>								
<b>FOR OFFICE USE ONLY</b>								
Dept	Approve	Deny	By	Reason				
Police								
Fire								
Health								
Inspection								
S&L <u>07/27/22</u>		Date Issued		Exp. Date		License Number		



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**FEES ARE NON-REFUNDABLE**

License Fee - \$10.00 per event  
Investigation Fee + 7.00  
Total Amount Paid 17.00

Date Rec'd 7/5/2022

Acct Code: CLCSPB

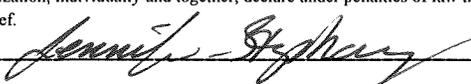
Acct Code: CLCPIF

Receipt Paper 088820

3802-2

**Application for Temporary Class "B" Beer or "Class B" Wine License**

\*Application MUST be on file for 10 days prior to event, please allow 2-3 weeks for processing\*

<b>The named organization applies for: (Please check one or both)</b>							
<input checked="" type="checkbox"/>	A temporary Class "B" license to sell FERMENTED MALT BEVERAGES at picnics or similar gathering under s. 125.26(6) Wis. Stats.						
<input checked="" type="checkbox"/>	A temporary "Class B" license to sell WINE at picnics or similar gathering under s. 125.51(10) Wis. Stats. (Limit 2 licenses in a 12 month period)						
<b>SECTION 1 – ORGANIZATION INFORMATION – Answer all questions completely. Please PRINT clearly</b>							
Name of Organization (Bona fide club, lodge or society, veteran's organization or fair association) Creative Downtown Appleton Inc.						Date Organized 10.22.2014	
Address 333 W. College Avenue, Ste. 100				City Appleton	State WI	Zip 54911	
Person in Charge of Event: 			Name: Last Stephany		First Jennifer	M. I. L.	Date of Birth ●●●●
Address c/o ADI 333 W. College Ave., Ste. 100			City Appleton	State WI	Zip 54911	Person in charge phone number: 954-9112 Office ●●●●●● Cell	
President	Last Vargasko	First Laura	Middle Initial E.	Date of Birth ●●●●		Male	Femal <input checked="" type="checkbox"/>
Address 4321 N. Ballard St.				City Appleton	State WI	Zip 54919	
Vice President	Last King	First Lyssa	Middle Initial M	Date of Birth ●●●●		Male	Femal <input checked="" type="checkbox"/>
Address 211 W. College Avenue				City Appleton	State WI	Zip 54911	
Secretary	Last Klister	First Tom	Middle Initial J	Date of Birth ●●●●		Male <input checked="" type="checkbox"/>	Femal
Address 100 W. Lawrence St., Ste. 2				City Appleton	State WI	Zip 54911	
Treasurer	Last Lonsway	First Steve	Middle Initial T	Date of Birth ●●●●		Male <input checked="" type="checkbox"/>	Femal
Address				City Appleton	State WI	Zip 54911	
<b>SECTION 2 – EVENT INFORMATION SECTION</b>							
Date(s) of Event: Beginning		08 / 04 / 2022	Ending: 08 / 07 / 2022		Hours	11 a.m.	AM / PM 11 p.m. AM / PM
Please describe the type of event you are going to have: Mile of Music - free music event featuring live original "crafted" music							
Do you plan to serve food at this event?		No	Yes <input checked="" type="checkbox"/>	If yes, contact the Appleton Health Department. (920.832.6429)			
Location where beer or wine will be sold or served: Jones Park							
Address Water Street and Lawrence				City Appleton	State WI	Zip 54911	
Describe actual location and dimensions of area to be licensed below: - BE PRECISE!				Will minors be present?		No	Yes <input checked="" type="checkbox"/>
Full use of park area. Wristbands and tickets purchased at designated areas marked clearly. Beer stations will be set up separately, keeping flow of customers moving and utilizing the full space.				If yes, how will you prevent minors from obtaining alcoholic beverages? Wristband required with ID, tickets used for alcohol purchase. Licensed bartenders on site.			
<b>SECTION 3 – PENALTY SECTION</b>							
This application must be on file in the Office of the City Clerk for at least ten (10) business days prior to granting the license. If the event will last more than four (4) days, the application shall be filed 15 days prior to the granting of the license. This organization also agrees to comply with all laws, resolutions, ordinances and regulations (state, federal or local) affecting the sale of fermented malt beverages if the license is granted. The officer(s) of the organization, individually and together, declare under penalties of law that the information provided in this application is true and correct to the best of their knowledge and belief.							
Signature of Officer							
<b>FOR OFFICE USE ONLY</b>							
Dept.	Approve	Deny	By	Reason			
Police							
Fire							
Health							
Inspection							
S&L	07/27/2022	Date Issued		Exp. Date	License Number		



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<b>FEES ARE NON-REFUNDABLE</b>		Date Rec'd <u>6/1/22</u>
License Fee - \$10.00 per event		Acct Code: CLCSPB
Investigation Fee <u>+7.00</u>		Acct Code: CLCPIF
Total Amount Paid <u>10</u>		Receipt <u>3685-3</u>

**Application for Temporary Class "B" Beer or "Class B" Wine License**

\*Application MUST be on file for 10 days prior to event, please allow 2-3 weeks for processing\*

**The named organization applies for: (Please check one or both)**

A temporary Class "B" license to sell FERMENTED MALT BEVERAGES at picnics or similar gathering under s. 125.26(6) Wis. Stats.

A temporary "Class B" license to sell WINE at picnics or similar gathering under s. 125.51(10) Wis. Stats. (Limit 2 licenses in a 12 month period)

**SECTION 1 – ORGANIZATION INFORMATION – Answer all questions completely. Please PRINT clearly**

Name of Organization (Bona fide club, lodge or society, veteran's organization or fair association) IRISH FEST OF THE FOX CITIES Date Organized 1/19/2020

Address 201 S. WALNUT City APPLETON State WI Zip 54911

Person in Charge of Event: Name: Last MILLER First MATTHEW M. I. F Date of Birth [REDACTED]

Address 201 S. WALNUT City APPLETON State WI Zip 54911 Person in charge phone number [REDACTED]

President Last HOGERTY First JOHN Middle Initial \_\_\_\_\_ Date of Birth \_\_\_\_\_ Male  Female \_\_\_\_\_

Address W6309 FIRELANE 9 City MENASHA State WI Zip 54952

Vice President Last MCGUIRE First MARK Middle Initial \_\_\_\_\_ Date of Birth \_\_\_\_\_ Male  Female \_\_\_\_\_

Address 2091 W HERON LANE City APPLETON State WI Zip 54913

Secretary Last HIGGINS First TIM Middle Initial \_\_\_\_\_ Date of Birth \_\_\_\_\_ Male  Female \_\_\_\_\_

Address 909 CAMBRIDGE CT City APPLETON State WI Zip 54915

Treasurer Last FOGARTY First MARK Middle Initial \_\_\_\_\_ Date of Birth \_\_\_\_\_ Male  Female \_\_\_\_\_

Address 2825 E INCLINE WAY City APPLETON State WI Zip 54913

**SECTION 2 – EVENT INFORMATION SECTION**

Date(s) of Event: Beginning 9/16/22 Ending: 9/17/22 Hours 11:00  AM / 10:00  PM

Please describe the type of event you are going to have:  
MUSIC AND CULTURAL FESTIVAL

Do you plan to serve food at this event? No  Yes  If yes, contact the Appleton Health Department. (920.832.6429)

Location where beer or wine will be sold or served: JONES PARK

Address W. LAWRENCE ST City APPLETON State WI Zip 54911

Describe actual location and dimensions of area to be licensed below: - **BE PRECISE!** \_\_\_\_\_ Will minors be present? No  Yes

JONES PARK SHELTER & LOT - PARKING If yes, how will you prevent minors from obtaining alcoholic beverages? SECURITY AND WRIST BANDS

**SECTION 3 – PENALTY SECTION**

This application must be on file in the Office of the City Clerk for at least ten (10) business days prior to granting the license.  
If the event will last more than four (4) days, the application shall be filed 15 days prior to the granting of the license.  
This organization also agrees to comply with all laws, resolutions, ordinances and regulations (state, federal or local) affecting the sale of fermented malt beverages if the license is granted. The officer(s) of the organization, individually and together, declare under penalties of law that the information provided in this application is true and correct to the best of their knowledge and belief.

Signature of Officer Matthew F Miller

**FOR OFFICE USE ONLY**

Dept.	Approve	Deny	By	Reason
Police				
Fire				
Health				
Inspection				
S&L				

Date Issued \_\_\_\_\_ Exp. Date \_\_\_\_\_ License Number \_\_\_\_\_



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<b>FEES ARE NON-REFUNDABLE</b>	Date Rec'd <u>7/14/22</u>
License Fee - \$10.00 per event	Acct Code: CLCSPB
Investigation Fee <u>+ 7.00</u>	Acct Code: CLCPIF
Total Amount Paid <u>10</u>	Receipt <u>3829-1</u>

**Application for Temporary Class "B" Beer or "Class B" Wine License**

\*Application MUST be on file for 10 days prior to event, please allow 2-3 weeks for processing\*

<b>The named organization applies for: (Please check one or both)</b>				
<input checked="" type="checkbox"/> A temporary Class "B" license to sell FERMENTED MALT BEVERAGES at picnics or similar gathering under s. 125.26(6) Wis. Stats.				
<input type="checkbox"/> A temporary "Class B" license to sell WINE at picnics or similar gathering under s. 125.51(10) Wis. Stats. (Limit 2 licenses in a 12 month period)				
<b>SECTION 1 – ORGANIZATION INFORMATION – Answer all questions completely. Please PRINT clearly</b>				
Name of Organization (Bona fide club, lodge or society, veteran's organization or fair association)				Date Organized
<u>Democratic Party of Outagamie County</u>				<u>2003</u>
Address		City	State	Zip
<u>516 W College Ave</u>		<u>Appleton</u>	<u>WI</u>	<u>54911</u>
Person in Charge of Event:		Name: Last	First	M. I.
		<u>Fischer</u>	<u>Jacklyn</u>	<u>J</u>
Address		City	State	Zip
<u>95 Estherbrook Ct</u>		<u>Appleton</u>	<u>WI</u>	<u>54915</u>
Person in charge phone number:				
President	Last	First	Middle Initial	Date of Birth
	<u>Tseffus</u>	<u>Emily</u>	<u>D</u>	
Address		City	State	Zip
<u>W3847 Highview Dr</u>		<u>Appleton</u>	<u>WI</u>	<u>54913</u>
Vice President	Last	First	Middle Initial	Date of Birth
	<u>Fischer</u>	<u>Jacklyn</u>	<u>J</u>	
Address		City	State	Zip
<u>95 Estherbrook Ct</u>		<u>Appleton</u>	<u>WI</u>	<u>54915</u>
Secretary	Last	First	Middle Initial	Date of Birth
	<u>Quinn</u>	<u>Grace</u>		
Address		City	State	Zip
<u>1501 Cranberry Dr</u>		<u>Appleton</u>	<u>WI</u>	<u>54915</u>
Treasurer	Last	First	Middle Initial	Date of Birth
	<u>Lee</u>	<u>Tom</u>		
Address		City	State	Zip
<u>1002 N Drew St</u>		<u>Appleton</u>	<u>WI</u>	<u>54911</u>
<b>SECTION 2 – EVENT INFORMATION SECTION</b>				
Date(s) of Event: Beginning		Ending:	Hours	AM (PM)
<u>8/15/22</u>		<u>8/15/22</u>	<u>5</u>	<u>PM</u>
Please describe the type of event you are going to have:				
<u>Social (corn roast) + fundraiser</u>				
Do you plan to serve food at this event?		If yes, contact the Appleton Health Department. (920.832.6429)		
No		Yes		
Location where beer or wine will be sold or served:				
<u>Devks Park Pavillion</u>				
Address		City	State	Zip
<u>3220 Guyette Dr</u>		<u>Appleton</u>	<u>WI</u>	<u>54915</u>
Describe actual location and dimensions of area to be licensed below: - BE PRECISE!			Will minors be present?	
			No Yes	
<u>The Devks Park pavillion area and the immediate grilling area surrounding the pavillion</u>			<u>If yes, how will you prevent minors from obtaining alcoholic beverages? We will have a licensed bartender checking IDs on site morder to be served</u>	
<b>SECTION 3 – PENALTY SECTION</b>				
This application must be on file in the Office of the City Clerk for at least ten (10) business days prior to granting the license.				
If the event will last more than four (4) days, the application shall be filed 15 days prior to the granting of the license.				
This organization also agrees to comply with all laws, resolutions, ordinances and regulations (state, federal or local) affecting the sale of fermented malt beverages if the license is granted. The officer(s) of the organization, individually and together, declare under penalties of law that the information provided in this application is true and correct to the best of their knowledge and belief.				
Signature of Officer <u></u>				
<b>FOR OFFICE USE ONLY</b>				
Dept.	Approve	Deny	By	Reason
Police				
Fire				
Health				
Inspection				
S&L <u>7-27-22</u>	Date Issued		Exp. Date	License Number

# 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 Brown Outagamie  
 City

The undersigned duly authorized officer/member/manager of True North Energy, 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 True North #822

located at 3411 N. Ballard Rd., Appleton, WI 54911  
*(Trade Name)*

appoints Michelle A. Knox  
*(Name of Appointed Agent)*

W. 1224 Harvestore Rd., Brillion, WI 54110  
*(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?

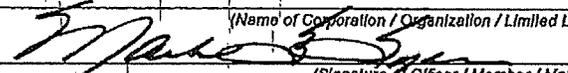
Yes  No If so, indicate the corporate name(s)/limited liability company(ies) and municipality(ies).  
True North Energy, LLC SEE ATTACHED

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

How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin? 37 YEARS

Place of residence last year W 1224 Harvestore Rd., Brillion, WI 54110

For: True North Energy, LLC  
*(Name of Corporation / Organization / Limited Liability Company)*

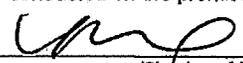
By:   
*(Signature of Officer / Member / Manager)*

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, Michelle A. Knox, 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.

 7/13/22 Agent's age 37  
*(Signature of Agent)* *(Date)*

W 1224 Harvestore Rd., Brillion, WI 54110 Date of birth 08/08/85  
*(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)	
KNOX		MICHELLE		AUTUMN	
Home Address (street/route)		Post Office		City	
W 1224 HARVESTORE RD.				BRILLION	
Home Phone Number		Age		Date of Birth	
●●●●●●●●		●		●/●/●●	
				State	
				WI	
				Zip Code	
				54110	
				Place of Birth	
				WOODSTOCK, IL	

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 **TRUE NORTH ENERGY, LLC**  
(Officer / Director / Member / Manager / Agent) (Name of Corporation, Limited Liability Company or Nonprofit Organization)
- which is making application for an alcohol beverage license.

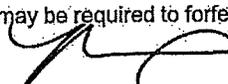
The above named individual provides the following information to the licensing authority:

- How long have you continuously resided in Wisconsin prior to this date? 37
- 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.)  
Fined for trespass ordinance violation - Calumet County on/near 1999
- 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. I will be the agent on the attached permits.  
(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 Licensee 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
Truenorth Energy LLC	1273 Glory Rd, Green Bay WI	11/15/2021	
Titletown Oil Corp	1275 Glory Rd, Green Bay WI	03/17/2017	11/14/2021

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

  
 \_\_\_\_\_  
 (Signature of Named Individual)

**FEES ARE NON-REFUNDABLE**

License fee EACH Vehicle \$30.00  
 Investigation fee \$ 7.00  
 Total fee paid \$ 97.00

Date Recv'd

Acct. CLLTSE

Acct. CLLPIF

Receipt

6/28/2037715**LICENSE APPLICATION**

for

**TAXICAB COMPANY AND LIMOUSINE SERVICE** Original Application Renewal - License # 5-22**SECTION 1 - APPLICANT INFORMATION**

Name of Company

DYNASTY Limousine Service LLC

Business Phone

920-954-9111

Business Street Address

1900 Vandenberg Ln

City

Kaukauna

State

WI

Zip

54130

Owner's Name

Diana Wolters

Date of Birth

●●●●●● - ●● Individual Partnership Corporation

Owner's Name

John Wolters

Date of Birth

●●●●●● - ●●**SECTION 2 - VEHICLES TO BE OPERATED**

(Attach additional sheets if necessary)

Vehicle Number	Capacity	Make/Model	DOT License Plate Number
<u>12</u>	<u>5</u>	<u>Cadillac Escalade</u>	
<u>10</u>	<u>10</u>	<u>Mercedes Sprinter</u>	<u>DNSTY10</u>
<u>8</u>	<u>5</u>	<u>Cadillac Escalade</u>	<u>ADP 2679</u>

**SECTION 3 - COMPANY HISTORY**

Is the company currently licensed in any other municipality?

YES

 NO

If Yes, what municipality?

Has the company ever been denied a license by any municipality?

YES

 NO

If Yes, please explain:

Have any of the owners ever been convicted of a crime?

YES

 NO

If Yes, please explain:

Describe the basic operations of the company:

Luxury chartered transportation

If the business is located in the City limits, Municipal Code requires that off-street parking is provided for. If applicable, what provisions have been made for off street parking?

Not in city limits**SECTION 4 - INSURANCE NOTICE**Insurance Coverage:

Insurance Carrier:

Progressive

Insurance Agent Name and Phone Number:

family insurance center 920-757-1010

Policy Number:

08086522

Policy Period:

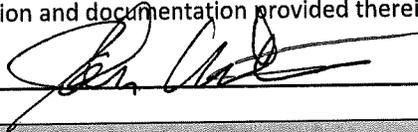
8-27-21 to 8-27-22

I confirm that I have the authority to sign and certify the information contained herein as the permittee/licensee, or duly authorized representative of the entity obtaining this permit/license. I have reviewed and understand the insurance requirements of the City of Appleton. I hereby certify that I, or the company I represent, have insurance in the amounts required to obtain this permit/license, have named the City of Appleton as an additional insured for purposes of this permit/license and have provided the name of my insurance carrier, the policy number, and policy period above. Further, I agree to maintain appropriate insurance coverage for the duration of this permit/license and to indemnify, defend and

hold harmless the City of Appteton and its officers, officials, employees and agents from and against any and all liability, loss, damage, expenses, costs, including attorneys fees arising out of the activities performed as described herein, caused in whole or in part by any negligent act or omission of the applicant, anyone directly or indirectly employed by any of them, which may arise from the use of city right-of-way or property under this permit or license.

I certify that this application, and all information and documentation provided therein, is true and accurate.

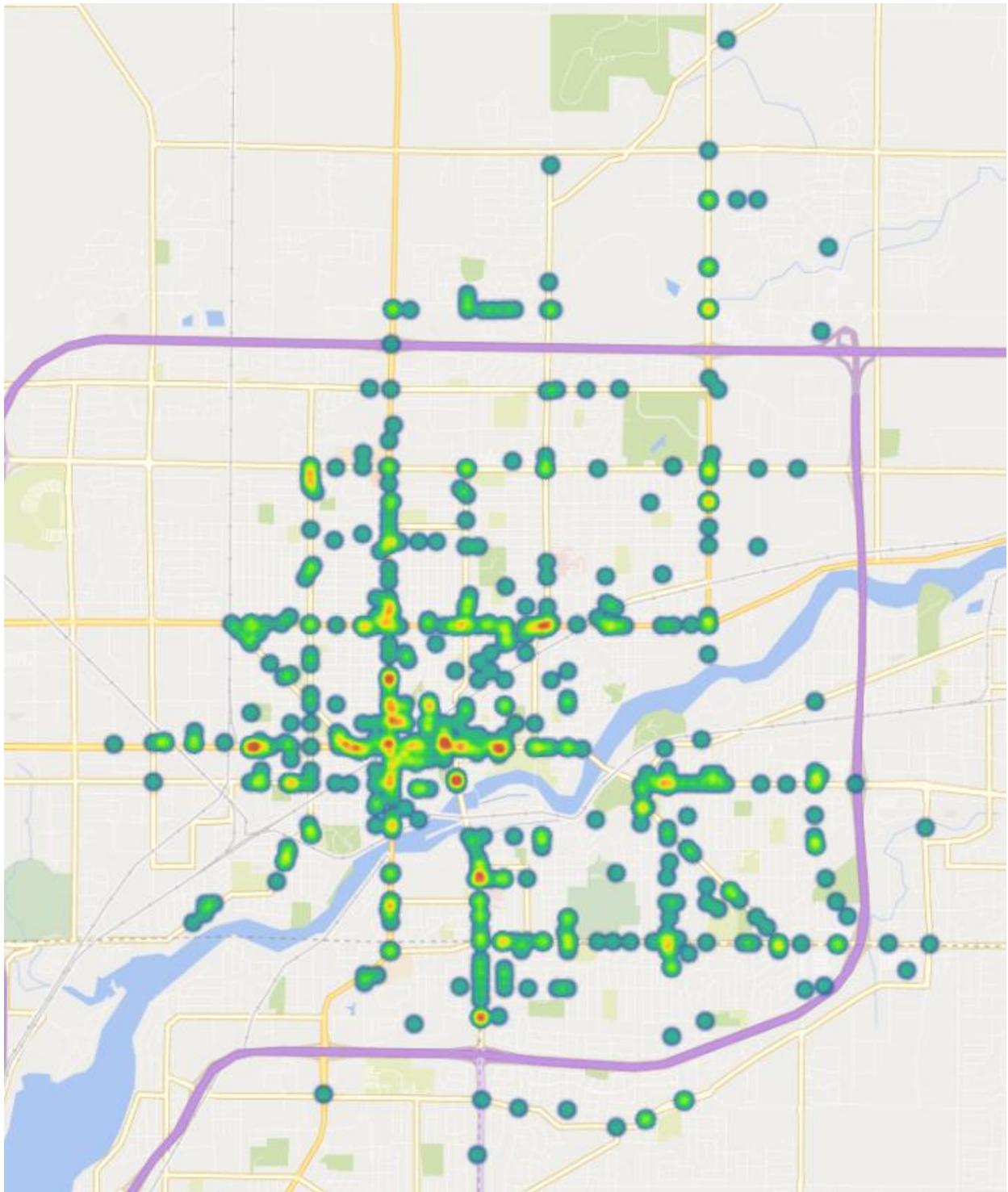
Applicant's Signature \_\_\_\_\_



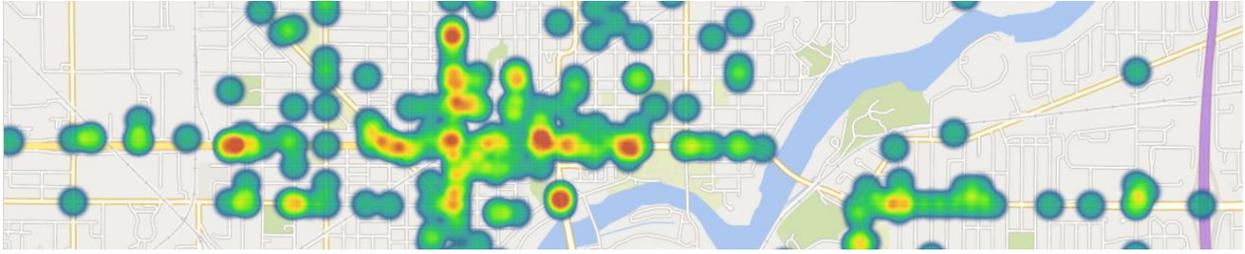
FOR OFFICE USE ONLY					COI on file? YES NO	
Sealer	Approve	Deny	By	Reason	S&L Date	
Police					Common Council	
Fire					Date issued	
Inspection					Exp. date	

4/25/19

Date sent for approvals: 6/28/22



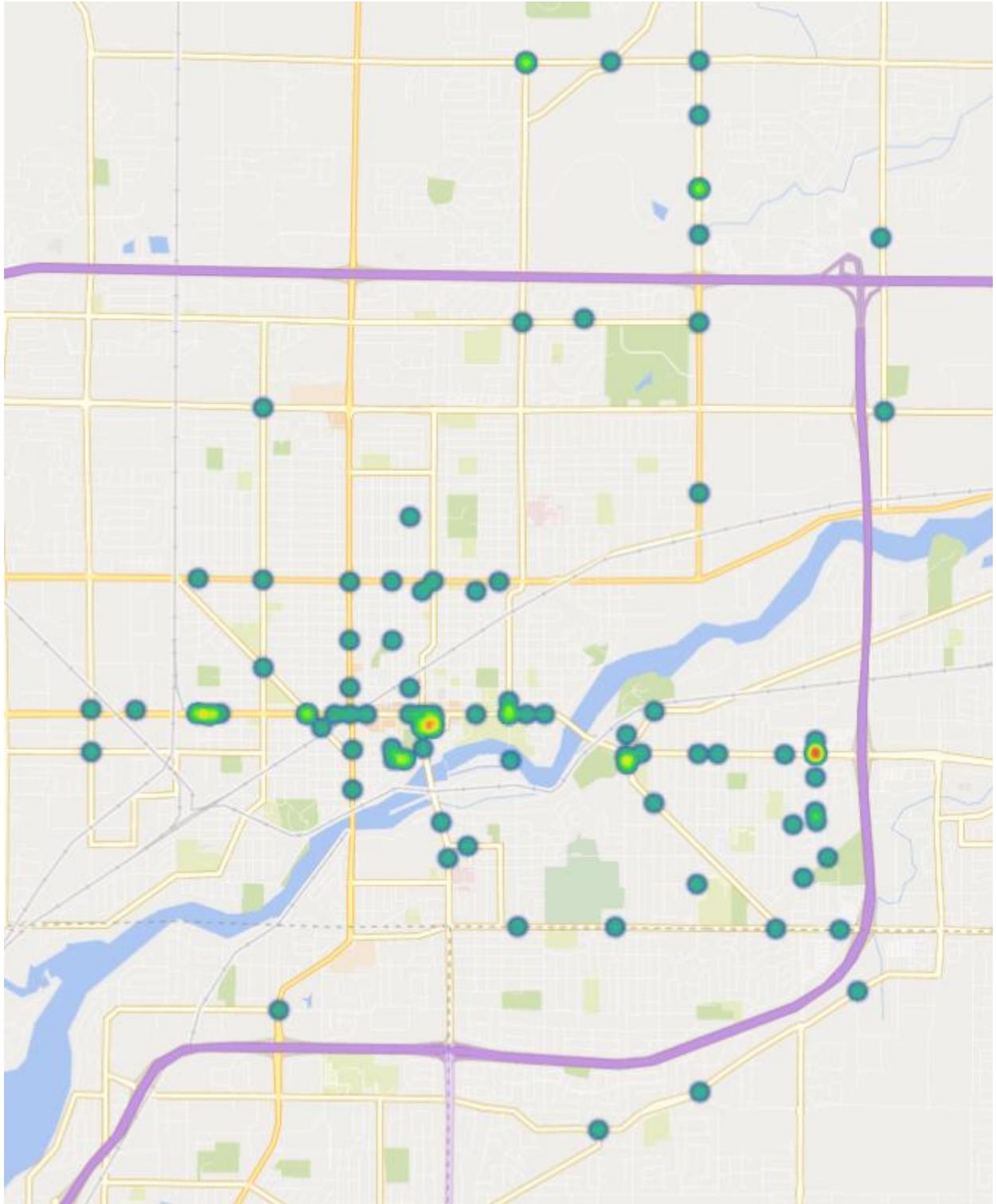
All Traffic Stops June 1-30, 2022, obtained from Spillman CAD screens on 7/15/2022 by S. Gallagher.



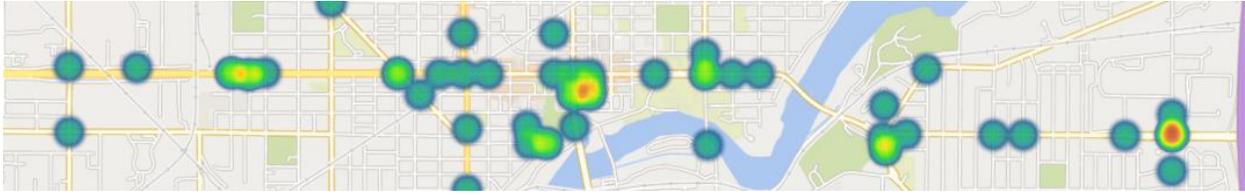
College Avenue West to East.



Wisconsin Avenue West to East.



All Traffic Stops made by Traffic Officer June 1-30, 2022, obtained from Spillman CAD screens on 7/15/2022 by S. Gallagher.



College Avenue West to East.



Wisconsin Avenue West to East.



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

**APPLETON FIRE DEPARTMENT  
MID-YEAR REVIEW  
All figures through June 30, 2022**

**Significant 2022 Events**

In the first quarter, the department had two captain retirements that were filled through internal promotions causing two lieutenant vacancies and subsequently, two driver/engineer vacancies. All positions were filled through internal promotions resulting in two firefighter vacancies. The department participated in the regional hiring process and hired two recruit firefighters. They started in March and have joined the ranks of the front-line operations staff after a six-week recruit academy. Department staff members have been working to improve the diversity of our applicant pool by inviting students from Fox Valley Technical College to participate in our 'ride along' program.

The Fire Protection Engineer of fifteen years also retired; however, the department was unsuccessful finding a candidate to fill that position due to the unique qualifications of the position. A change to the table of organization was proposed to add a Public Education Specialist position and remove the Fire Protection Engineer. This change will fill a gap in the service delivery of our public education efforts. The Battalion Chief of Fire Prevention and Public Education will take on plan review duties while the Public Education Specialist will be responsible for curriculum development, social media management, and organizing special events.

The Appleton Fire Department served as the host agency for a regional radio grant through the Assistance to Firefighters Grant (AFG). If awarded, the grant would provide intrinsically safe portable radio components for eighteen fire and EMS agencies in Outagamie County. As host agency, the department gathered information from all participating agencies and completed the grant application. The grant awards have not been announced, however, are expected in the coming months.

In addition to the regional AFG grant, the department applied for an Assistance to Firefighter's Grant that would provide paramedic training for six Appleton Fire Department personnel. Preliminary work has been completed with the Human Resources Department and bargaining unit to address the class schedule and work rules should the grant be awarded. Participation in this grant is another step toward a higher level of emergency medical service by having paramedic engine companies.

The Resource Development and Special Operations Division collaborated with area fire departments to bring in the nationally recognized speaker and author, Captain Michael Abrashoff, to speak to department leaders and area businesses. In addition, the department hosted an incident safety officer class for both our personnel and area fire department personnel. A confined space class was provided resulting in 20 additional members qualified as confined space technicians. A ropes class was offered bringing all personnel to the operations level for ropes. Fourteen members participate in a hazardous materials drill

with our partners in Manitowoc. Out-of-state training opportunities that fire department personnel participated in included a hazardous materials meter repair class, a hazardous materials conference, and the Fire Department Instructor's Conference.

The Appleton Fire Department, along with other agencies, worked with Wisconsin Emergency Management (WEM) to develop a contract for the Wisconsin Task Force 1 (WI-TF1). WI-TF1 had been dormant for a few years until efforts to bring it back to an operational status were pursued. The task force is expected to be fully operational by midyear. Department personnel can attend advanced level rescue operations training otherwise not available. Knowledge and skills learned during these training opportunities are brought back and shared with the remainder of the department improving our ability to respond to these types of incidents locally.

Fire department personnel along with Facilities staff have had preliminary meetings with an architectural firm to develop plans for the newly constructed Fire Station # Four based on a programming discussion and space needs analysis. An emphasis is being placed on 'interior response time' with main access corridors allowing ease of flow from the station spaces to the truck floor.

On May 15, 2022, the department recognized the three-year anniversary of the line-of-duty death of Driver/Engineer Mitchell Lundgaard. The plans for Lundgaard Park continue to move forward with the development of a concept plan. This vision will be utilized as the city works toward a \$3 million fundraising goal with the Friends of the Appleton Fire Department. It is hopeful that a final design and construction will occur in the next one to two years. Representatives from the Appleton Fire Department, the Lundgaard family, and City staff continue to be involved with this project.

In May, the department ordered a new fire engine prior to a material price increase. In addition, the city was able to realize cost savings by taking advantage of a pre-payment option. Unfortunately, the delivery of the new firetruck is approximately two years so late 2023 or early 2024.

In 2021, the fire chiefs from the Appleton, Grand Chute, Kaukauna, Neenah-Menasha, and Oshkosh Fire Departments approached the Wisconsin Policy Forum to request a report on working together to promote greater efficiency and teamwork enhanced by an existing strong cooperative spirit. It is believed that our departments could benefit further from enhanced collaboration in the areas of training, special operations, community risk reduction, fleet maintenance, and EMS quality control and oversight. The Wisconsin Policy Forum is the state's leading source of nonpartisan, independent research on state and local public policy. They produce reports that help generate informed and fact-based public policy decision making. They released a report responding to our request and suggested options for enhanced collaborations between the departments. Within each functional area, they presented options that would allow departments to "start small" and potentially build over time toward more comprehensive collaborations.

With rising costs related to personal protective equipment (PPE), the department evaluated its replacement practice for protective clothing and will be closely scrutinizing replacement PPE when employee retirement is within a five-year timeframe. This adjustment to current practice will help absorb the rising costs passed down from suppliers in the coming years.

The current bargaining agreement with Local 257 is in effect through December 31, 2022. City staff from the fire department and Human Resources are beginning negotiation preparation of the next bargaining agreement. Formal meetings will begin in July.

## **ADMINISTRATION**

### **Objectives**

- Identifying currently provided service levels and evaluating their effectiveness and customer value.
- Addressing service needs created by continued City growth.
- Maintaining staffing levels as detailed in the table of organization and approved by the Common Council.
- Continuing the development of joint service opportunities and regional relationships with neighboring fire departments.
- Enhancing internal and external communications and working relationships.
- Continuing to implement the records management system (RMS) for improved reporting capabilities.

## **FIRE SUPPRESSION**

### **Objectives**

- Identify and develop pre-fire plans for new structures and update pre-fire plans for existing structures, and develop emergency response plans for special events which present potential risks within the community
- Proactively pursuing, with our regional partners, the enhancement of our current mutual aid agreements and automatic aid agreements, evaluation of shared resources, updating of emergency management planning, and cooperative training exercises to help reduce the threats to our regional security and economy.
- Identifying and developing employee safety programs, practices, and training for reducing the impact of lost time work-related injuries.

## **SPECIAL OPERATIONS**

### **Objectives**

- Providing for local hazardous materials response in jurisdictions as defined by contract.
- Seeking grant opportunities for equipment and training available through local and state organizations.
- Maintaining necessary equipment and skill levels for local incidents.
- Participating on the county Local Emergency Planning Committee.
- Continuing the partnership with Winnebago County (Oshkosh Fire Department) and Brown County (Green Bay Metro Department).
- Providing specialized emergency response to include local hazardous materials response, confined space rescue, water rescue, structural collapse response, and trench rescue

## **RESOURCE DEVELOPMENT**

### **Objectives**

- Maintain compliance with federal and State mandatory class requirements
- Investigate and encourage attendance at specialized training to expand personal growth and development
- Facilitate and coordinate the Safety Committee meetings for the Department to promote health and safety among the department employees
- Seek opportunities to provide leadership training, including command level training, through internal and/or external sources
- Continuing to define our role as fire and EMS providers at active shooter incidents.

## **EMERGENCY MEDICAL SERVICES**

### **Objectives**

- To provide timely, state of the art pre-hospital care to all people within our service area that are subject to illness or injury
- To provide quality, consistent pre-hospital medical training to all employees of the Fire Department resulting in all employees being certified at the Emergency Medical Technician - Basic level
- To maintain compliance with department, local and State codes, laws, guidelines, and regulations
- To ensure continuous program development and quality improvement
- Working with our Medical Director, monitor the percentage of cardiac patients who were discovered in ventricular fibrillation that survived and were discharged from the hospital
- To participate with other fire departments, Gold Cross Ambulance, and other agencies during medical training or exercises

## **FIRE PREVENTION & PUBLIC EDUCATION**

### **Objectives**

- Perform all state-mandated fire and life safety inspections in all buildings, and all plan reviews of State and locally required fire protection systems
- Review all license applications for compliance with the provisions of the Fire Prevention Code
- Continue proactive involvement with all City departments, as well as surrounding community departments to create a more consistent and cohesive code enforcement process throughout our community
- Implement pre-plan incident reports utilizing the records management system
- Develop, implement, coordinate, and evaluate risk reduction programs designed to meet the needs of our community's diverse populations
- Provide public information at emergency incidents and throughout the year
- Define media relationship strategy as method/vehicle to communicate prevention messages
- Enhance smoke detector awareness in the City of Appleton

## TECHNICAL SERVICES

### Objectives

- Providing and tracking all preventive, scheduled, and emergency maintenance on all non-motorized fire equipment to meet applicable standards.
- Researching, purchasing, and distributing equipment needed by the Fire Department.
- Providing on-going technical training for fire personnel.

### Areas of Primary Concentration in 2022

In 2022, the Appleton Fire Department will concentrate on the following:

- Continue the review of issues and potential solutions to the drop in response time performance within the city and to seek opportunities to increase effective use of existing resources.
- Recruit and train employees to fill vacant positions within the authorized table of organization.
- Continue work on implementation of the fire service records management system.
- Continue working with our automatic aid partners--the Town of Grand Chute and the Cities of Neenah and Menasha.

### Budget Performance Summary

**City of Appleton Fire Department  
Mid-Year Budget Report  
For the Period Ending June 30, 2022**

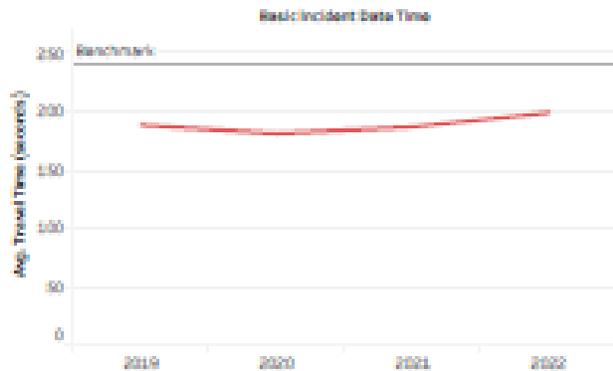
<b>Description</b>	<b>Year-to-Date Expense</b>	<b>Full Year Amended Budget</b>	<b>Percent of Amended Budget</b>
Administration	\$264,698	\$585,881	45.2%
Fire Suppression	\$4,564,896	\$9,926,758	46.0%
Special Operations	\$76,874	\$181,255	42.4%
Resource Development	\$118,815	\$259,057	45.9%
Emergency Medical Services	\$316,983	\$740,417	42.8%
Fire Prevention/Public Education	\$536,672	\$1,247,001	43.0%
Technical Services	\$180,849	\$433,122	41.8%
<b>Fire Department Total</b>	<b>\$6,059,787</b>	<b>\$13,373,491</b>	<b>45.3%</b>

# Appleton Fire Department

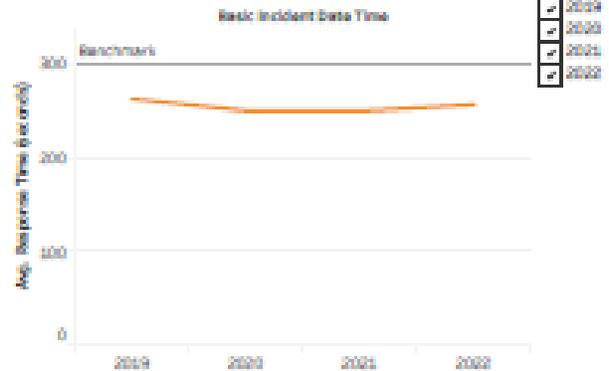
With our partners, the Appleton Fire Department protects the community with exceptional service. We pursue excellence and enhance the quality of life in Appleton and our regional community. The department is responsible for saving lives and protecting property with exceptional service. The role of the Fire Department is evolving to improve awareness of all facets of life safety.

All 2022 numbers are reflective through June 30th, 2022.

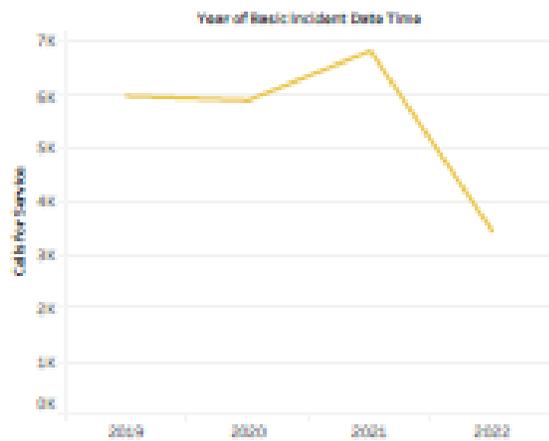
## Travel Time



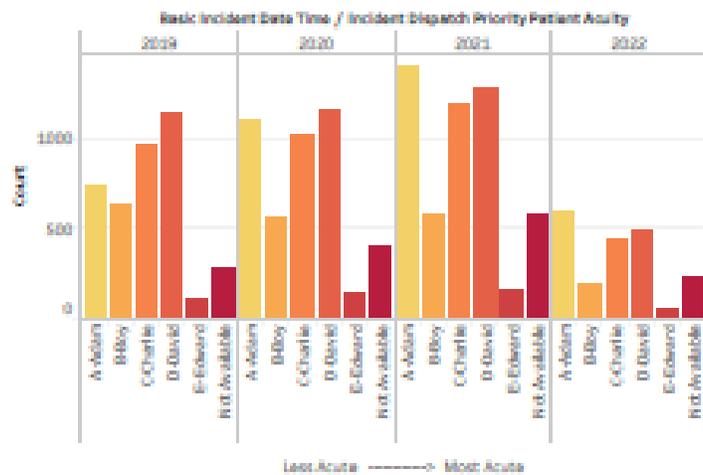
## Response Time



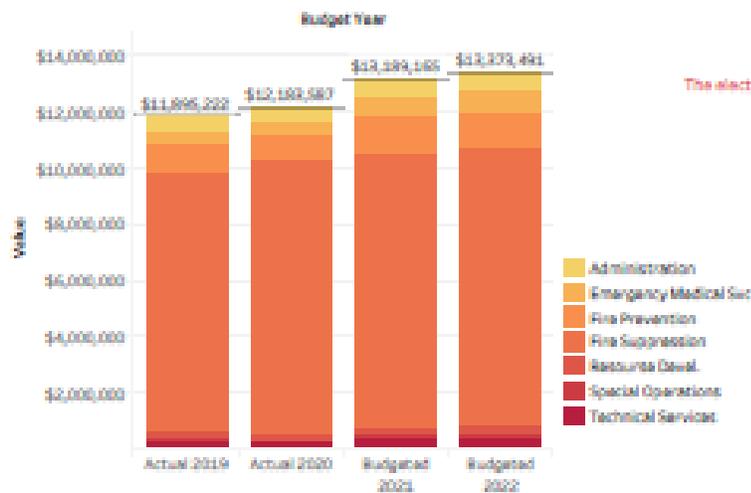
## Total Calls for Service



## Patient Acuity



## Department Budget Summary



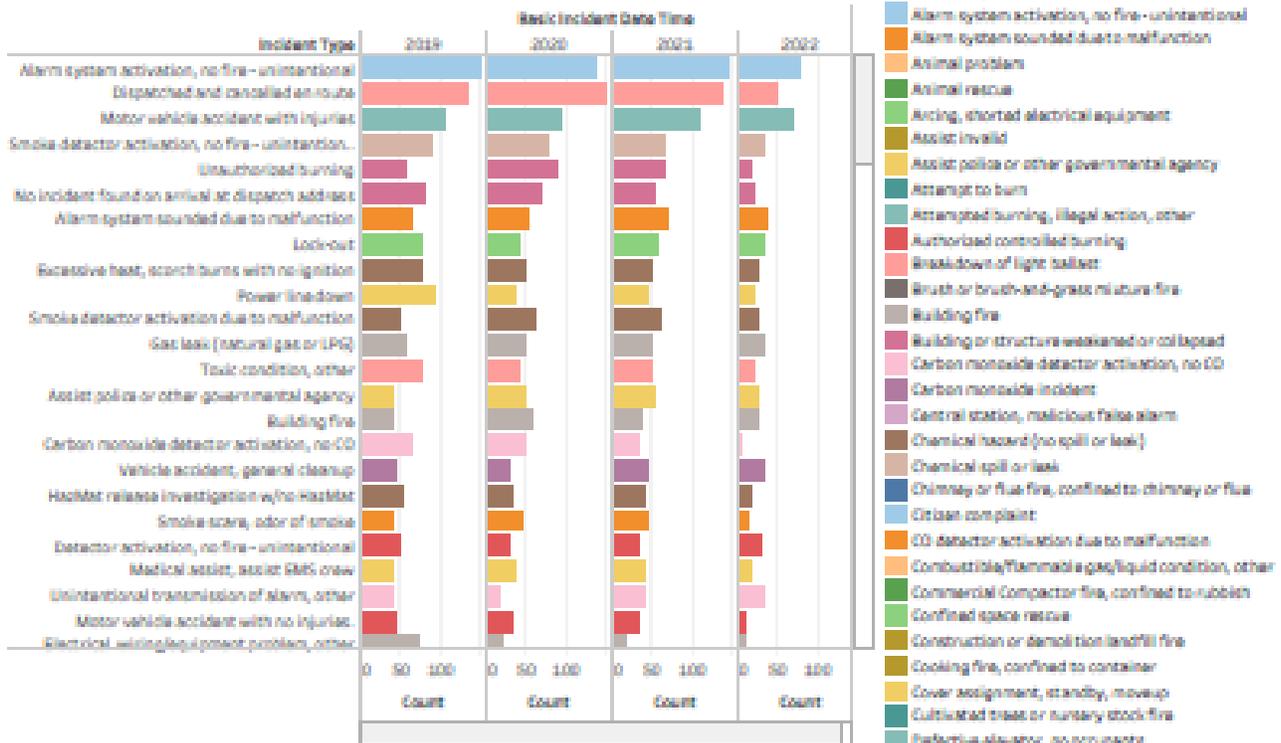
The electronic version of this dashboard includes a second page with charts illustrating

number of incidents categorized by type and incidents by station.

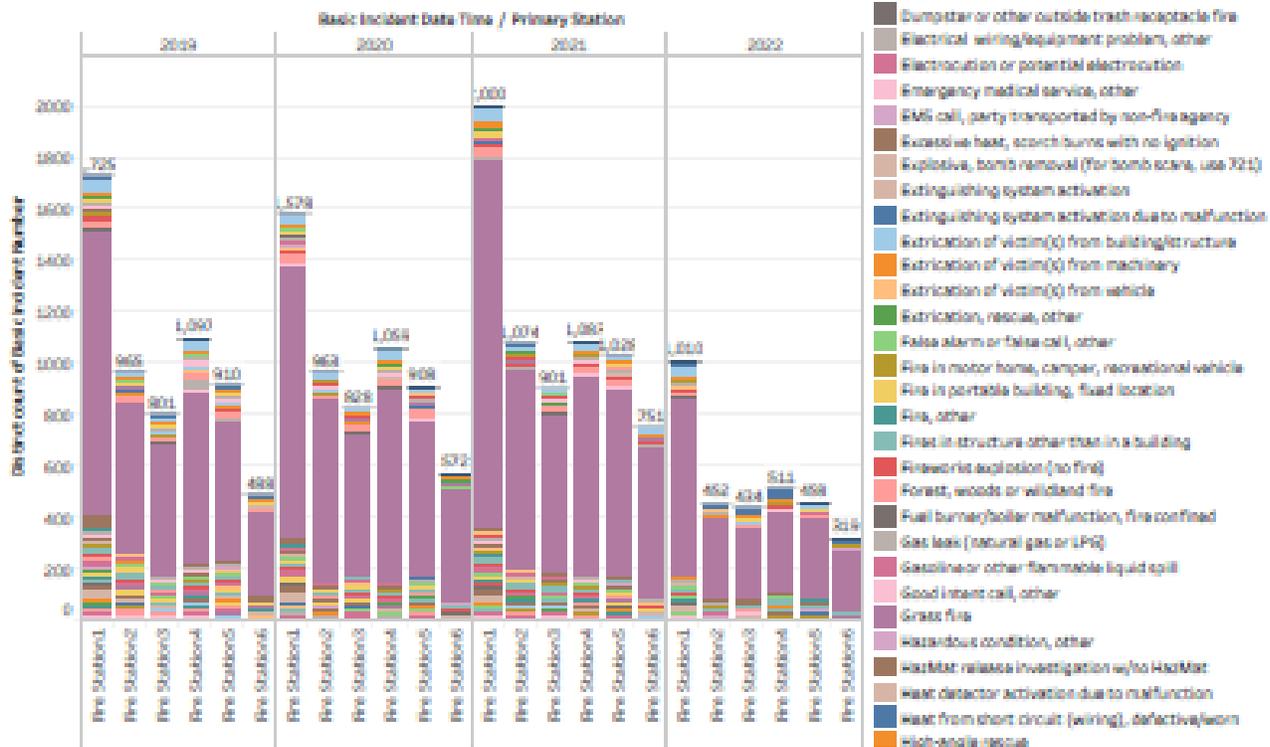
# Appleton Fire Department

All 2022 numbers are reflective through June 30th, 2022.

## Incidents by Type



## Incidents by Station



## LEGAL SERVICES DEPARTMENT MID-YEAR REVIEW

All figures through June 30, 2022

### **Significant 2022 Events:**

The Legal Services Department has been engaged in a number of matters through the first half of 2022. Below are some of the highlights for the first half of the year:

#### **City Attorney's Office**

- As of April 29, represented the City in traffic and ordinance related matters in 2022 including 1,875 scheduled initial court appearances, 59 scheduled jury and court trials and 767 scheduled pre-trials/jury trial conferences or motion hearings.
- Provided guidance and training to the newly-seated Council and completed a significant revision to the Alderperson Handbook.
- Actively engaged in litigation including defense of a variety of lawsuits including, but not limited to, employment matters, land use, property damage, foreclosures, and small claims.
- Worked with the Department of Public Works on two eminent domain processes to acquire the necessary land for future roadway and a second raw water line (PLE).
- Provided ongoing assistance in various roles in support of the Library building project.
- Drafted or assisted in amending or creating a number of ordinances, including redistricting, parking, a stormwater ordinance rewrite and changes to the solid waste ordinances in Chapter 15.
- Legal Services represented the Complainant and separately advised the Safety and Licensing Committee in the revocation of a tavern's alcohol license.
- In the first six months of 2022, the Attorney's Office has processed over 250 new agreements/contracts. Processing a contract includes the preparation of the contract document, circulation for signatures, tracking, and distribution.

#### **City Clerk's Office:**

- Performed an operational analysis of electronic poll book equipment to detect necessary hardware upgrades/repairs
- Responded to a considerable number of extensive records requests related to elections.
- Restructured the filing system in the vault to make them more identifiable and accessible.
- Digitized files to increase accessibility of records and documents.
- Drafted and mailed letters to all properties affected by Redistricting.
- Worked with the Counties and State to make Ward and Aldermanic boundary adjustments to accommodate new legislative district changes as a result of a court ruling modifying the previously adopted districts.
- Implemented all redistricting changes through election plan modifications in WisVote.
- Revised the alcohol license demerit point tracking and notification process.

**Areas of Primary Concentration for the remainder of 2022:**

- We will continue working with other departments in the City to ensure that City projects run smoothly and there is no delay in project completions.
- The City Attorney’s Office will continue to vigorously defend the City of Appleton in actions filed against the City of Appleton.
- We will continue to assist, guide and advise City staff from all departments as well as elected officials on legal matters in a timely fashion.
- The City Clerk’s Office will administer 2 more elections, including a General Election with a voter turnout that is anticipated to be very high.
- The City Clerk’s Office will continue to process and send a significant number of absentee ballots for each upcoming election.
- The City Clerk’s Office will recruit and train additional election workers to administer the busy November Election.
- The City Clerk’s Office will continue streamlining and organizing all City records to enhance accessibility to City documents.

**Budget Performance Summary**

<b>ORG</b>	<b>ACCOUNT DESCRIPTION</b>	<b>ORIGINAL APPROP</b>	<b>REVISED BUDGET</b>	<b>YTD EXPENDED</b>	<b>% USED</b>
14510	Administration	\$374,357	\$374,357	\$172,685	46.10%
14521	Litigation	\$178,901	\$178,901	\$122,903	68.70%
14530	Recordkeeping	\$90,381	\$90,381	\$50,914	56.30%
14540	Licensing	\$69,546	\$69,546	\$31,376	45.10%
14550	Elections	\$224,166	\$224,166	\$77,098	34.40%
14560	Mail/Copy Services	\$188,916	\$188,916	\$111,815	59.20%
	Revenue Total	\$0	\$0	\$0	0.00%
	Expense Total	\$1,126,267	\$1,126,267	\$566,794	50.30%
	<b>Grand Total</b>	<b>\$1,126,267</b>	<b>\$1,126,267</b>	<b>\$566,794</b>	<b>50.30%</b>

# Legal Services - Attorney's Office

The Legal Services Department is committed to being a resource; providing information to external customers and information, legal advice, and guidance to internal customers. In the continuously changing landscape of the pandemic, local, state, and federal orders all required hours of research, interpretation, and consultation with various City Departments. The City Attorney's Office provides advice and direction to City staff along with the Common Council.

All 2022 numbers are reflective through June 30th, 2022.

\*The Agreements and Contracts chart is reflective of new agreements and contracts only. It does not include extensions, amendments, or task orders that fall under a master agreement.

Average Number of New Matters Opened Annually

982

Yearly total as of 6/30/22: 561

Average Number of Agreements and Contracts Created Annually

236

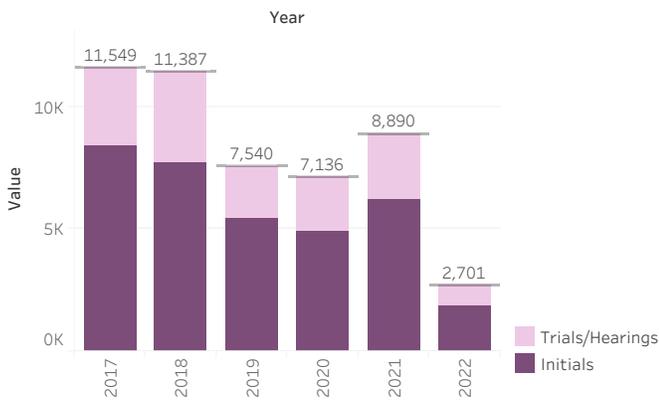
Yearly total as of 6/30/22: 258

Average Number of Ordinances Adopted or Published Annually

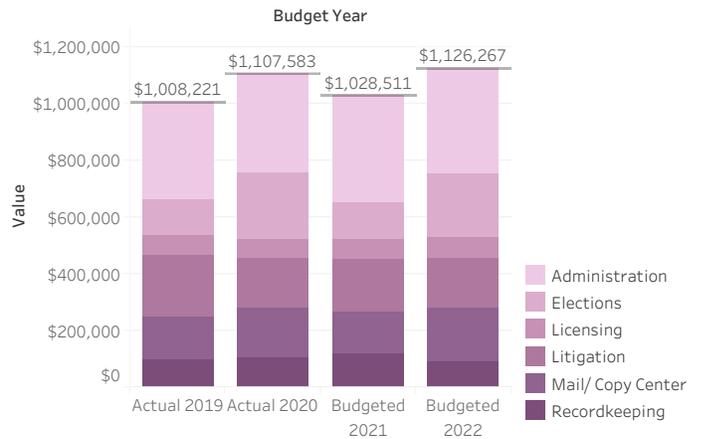
104

Yearly total as of 6/30/22: 44

## Annual Initial Appearances and Annual Trials and Hearings



## Department Budget Summary

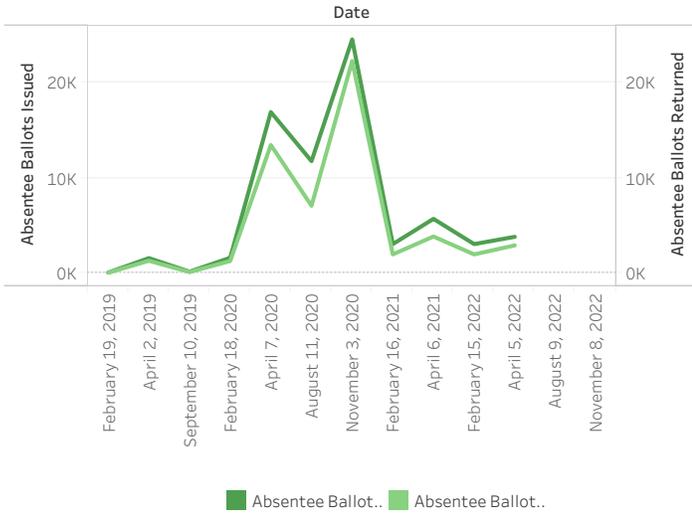


# Legal Services - City Clerk

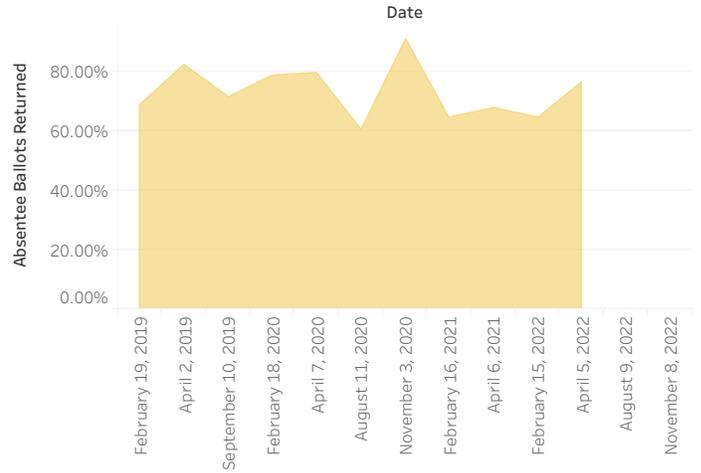
The Legal Services Department is committed to being a resource; providing information to external customers and information, legal advice, and guidance to internal customers. In the continuously changing landscape of the pandemic, local, state, and federal orders all required hours of research, interpretation, and consultation with various City Departments.

All 2022 numbers are reflective through June 30, 2022.

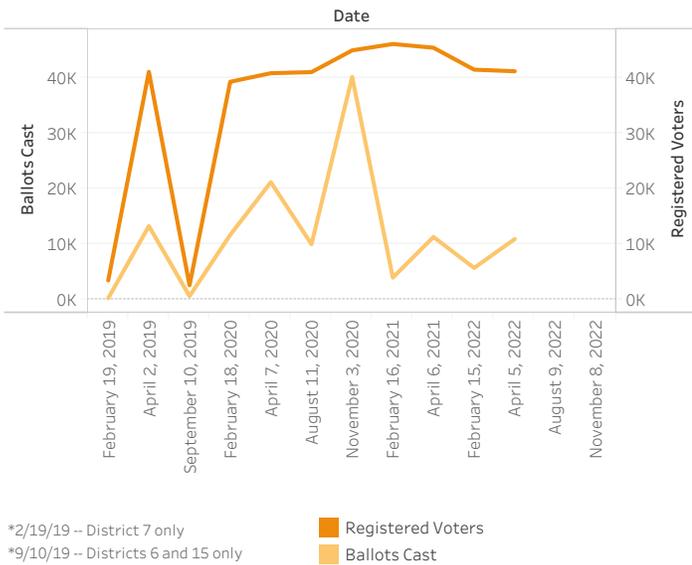
## Absentee Ballots



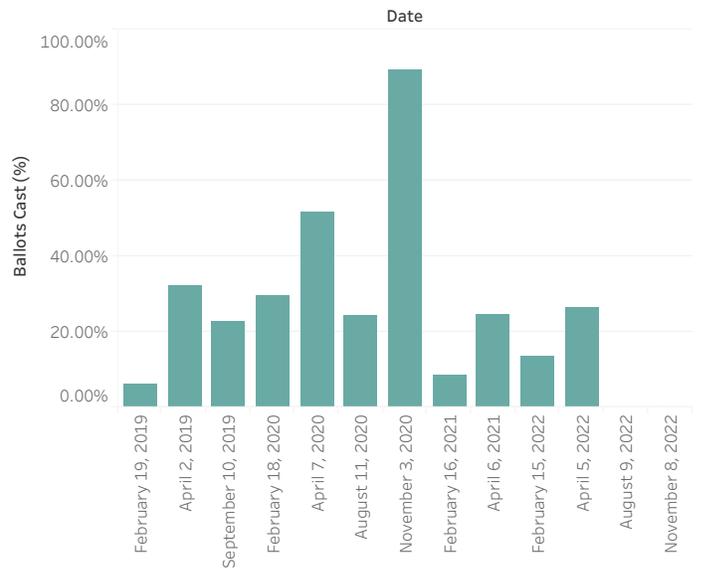
## Percent of Absentee Ballots Returned



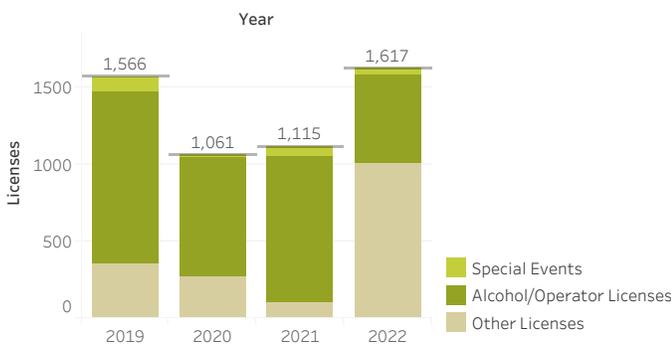
## Ballots Cast and Registered Voters\*



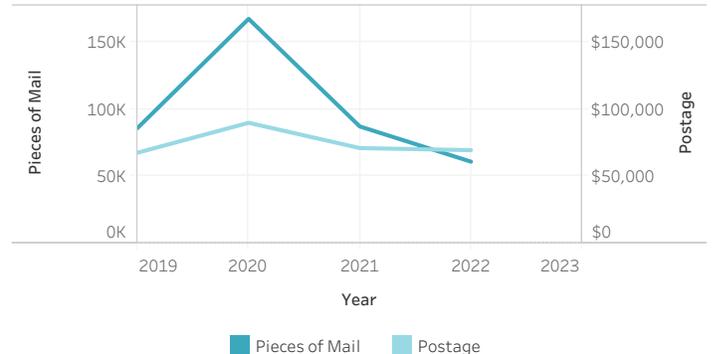
## Voter Turnout



## Licenses Issued



## Pieces of Metered Mail and Postage Costs





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Appleton Police Department

222 South Walnut Street  
Appleton, WI 54911 - 5899  
(920)832-5500  
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<http://www.appleton.org/police>

**Date:** July 19<sup>th</sup>, 2022  
**To:** Appleton Safety and Licensing Committee  
**CC:** Chief Todd Thomas, Asst. Chief Polly Olson, Capt. Mike Frisch  
**From:** Lt. Adam Nagel  
**Subject:** Significant incidents at Speakeasy Bar, 425 W College Ave.

In the past six months we have seen an increase in calls for service at the *Speakeasy Bar* at 425 W. College Ave. The data indicates that this increase is mainly due to fights in and around the establishment. The data, confirmed by the observations of our officers and supervisors, is that many of these incidents are large or multiple physical fights occurring at the same time, resulting in significant injuries. We have worked with the owner of Speakeasy, Ted Suess, but we are still seeing a higher number of more significant issues at the establishment.

There have been five (5) fights involving patrons reported to the APD in or outside of the front doors of Speakeasy that have resulted in several physical arrests or citations in the last six months. There is another bar on College Ave. that has had more calls for service during this time frame, but with less serious types of calls, that is currently being addressed. As a comparison to the five (5) calls at Speakeasy, the bar with the next closest number of calls had two (2) disturbances and needed little police intervention. An APD Lieutenant who arrived on scene to one of the fights at Speakeasy on 07/02/22 observed approximately five different fights occurring at the same time. The traffic camera footage from this incident shows a very dangerous and chaotic scene.

It is clear that the most dangerous incidents happen on nights they host a performer or special event. We do not have incidents on every one of these nights, however, they clearly increase the frequency and significance of the problem. As an example, there is an event being promoted called a "Trap House Party", scheduled for July 23, 2022. If you are not aware of it, dictionary.com defines "Trap House" as a place where illicit drugs are bought, sold, or used. This event features a musician who is seen in a recently released music video displaying multiple guns, and the last time this entertainer performed at Speakeasy we had significant disturbances.

We have worked with the establishment to try and assist them in resolving some of the issues..

- Capt. Frisch, ACA Nicholas VandeCastle and I met with Ted Suess and his bar manager after a large fight in front of Speakeasy on 04/10/22. We suggested increasing bar staff, closing the bar earlier and having bouncers assist with clearing patrons from the front of the bar after bar close.

Mr. Suess took those suggestions and it appeared to help with some of the issues. On some occasions officers complimented his staff for the extra work they put in.

- Another fight occurred in Speakeasy on 05/29/22. During this fight a patron was hit in the head with a glass. This fight was handled by officers and two different people were cited. I met with Mr. Suess after this incident and continued to provide suggestions for more staff when they are hosting events. Mr. Suess was responsive to these requests.
- We had another fight on 06/11/22 that resulted in criminal charges, another large disturbance on 06/25/22, and a large fight involving multiple groups of people on 07/02/22. Officers have also observed the back door of the business being open and multiple people coming in and out of it.
- On the weekend of 07/09/22 officers observed that Speakeasy had closed the blinds on the front of the business. I spoke to Mr. Suess on 07/19/22 and expressed my concerns. Mr. Suess was unaware that the back door was being used by patrons. He was aware of the manager and other performers using the door. When asked about the blinds being closed, he stated that they closed them due to hosting a Lingerie Party

The Appleton Police Department has made several attempts to address on-going safety concerns. The safety of anyone patronizing this establishment or visiting our downtown entertainment district is our priority. The number of issues we have seen around Speakeasy is not acceptable and we are concerned for the patrons, citizens, and our officers' safety if these incidents continue. The information provided to the Safety and Licensing committee is informational at this time. It is important for this committee to hear these concerns. All videos, still images and documents can be shared with any member of the committee. Please reach out to me with any other questions or concerns.

Lieutenant Adam Nagel #9191  
Patrol Division  
Appleton Police Department  
222 South Walnut Street  
Appleton, WI 54911  
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Main: 920.832.5500