

A CITY OF WISCONSIN DELLS MEETING AGENDA

Meeting Description COMMON COUNCIL MEETING

Date: MONDAY, AUGUST 15, 2016 Time: 7:00PM Location: MUNICIPAL BUILDING
300 LA CROSSE STREET, WISCONSIN DELLS, WI

MAYOR		COUNCIL MEMBERS		
BRIAN L. LANDERS		FIRST DISTRICT	SECOND DISTRICT	THIRD DISTRICT
		Jesse DeFosse	Mike Freel	Ed Fox
		Brian Holzem	Dar Mor	Ed Wojnicz
OPENING				
1	CALL TO ORDER & ROLL CALL			
2	PLEDGE OF ALLEGIANCE			
3	APPROVAL OF CONSENT AGENDA ITEMS: <ol style="list-style-type: none"> a. Approval of the July 18, 2016 Common Council Meeting Minutes b. Schedule of Bills Payable dated August 15, 2016 c. Applications for Bartender Licenses d. Application for a Special Events Permit received from the BID Committee for a Farmers Market Festival on Sunday, September 11, 2016 9:00am to 1:00pm on Oak Street (south side) e. Application for a Special Events/Parade Permit submitted by the WoZhaWa Committee for the annual parade September 18, 2016 f. Application for a Special Events Permit received from Wis Dells Festivals Inc/WDVCB for the Annual Fall Festival, October 14-15, 2016 g. Applications for a Temporary Beer (Picnic) License submitted by American Legion Post 187 for WoZhaWa September 16-18, 2016 h. Application for a Temporary Beer (Picnic) License submitted by Wisconsin Dells Lions Club for events September 9-10, 2016 and September 16-18, 2016. i. Application for a Temporary Beer (Picnic) License submitted by VFW Post 9387 for WoZhaWa September 15-18, 2016 j. Application for a Temporary Beer (Picnic) License submitted by Wis Dells Festivals Inc. for Dells on Tap, October 16, 2016 			
4	COMMITTEE UPDATES BY CHAIRPERSONS: (PARKS & REC, LIBRARY, LEGISLATIVE, PARKING BOARD, PLAN COMMISSION, FINANCE, PUBLIC WORKS, DESIGN REVIEW COMMITTEE, PUBLIC SAFETY AND BID)			
PUBLIC HEARINGS				
5	PUBLIC HEARING ON REVISIONS TO THE HEIGHT LIMITATION ZONING MAP FOR THE BARABOO-WISCONSIN DELLS AIRPORT, DUE TO RECENT LAND ACQUISITION			
AGENDA ITEMS				
6	CITIZEN APPEARANCES/PUBLIC COMMENT FOR ANY NON-AGENDA ITEM			
7	APPLICATION FOR AN ORIGINAL CLASS B BEER LICENSE SUBMITTED BY EDYTKA'S POLISH RESTAURANT INC, FOR EDYTKA'S POLISH RESTAURANT, 221 BROADWAY, FOR THE LICENSING PERIOD OF AUGUST 16, 2016 THROUGH JUNE 30, 2017			
RESOLUTIONS				
8	RESOLUTION TO APPROVE A ROOM TAX REFUND TO INDIAN TRAILS MOTEL FOR OVERSTATED TAX AMOUNTS			

- 1. Have you been convicted of any felony or misdemeanor? Yes ___ No
- 2. Have you been convicted of any license law or ordinance regulating the sale and/or consumption of fermented malt beverages or intoxicating liquors? Yes ___ No
- 3. Are there currently any charges, federal, state, or local pending against you? Yes ___ No
- 4. Do you currently have any outstanding forfeitures owed to the City of Wisconsin Dells? Yes ___ No

If you answered yes to any of the above questions, list the offense convicted of, pending conviction, date of conviction, and state and county of conviction.

<u>Date</u>	<u>Nature of Offense</u>	<u>County</u>	<u>State</u>

STATE OF WISCONSIN
COUNTIES OF COLUMBIA, SAUK, ADAMS & JUNEAU

The undersigned, being first duly sworn on oath, deposes and says 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 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.

Signature of Applicant: *[Handwritten Signature]* Date: 7/13/16

Subscribed and sworn to before me this 13th day of July, 2016.

[Handwritten Signature]
Notary Public

(SEAL)

My Commission Expires: May 15, 2020

(Continued)

- 1. Have you been convicted of any felony or misdemeanor? Yes ___ No X
- 2. Have you been convicted of any license law or ordinance regulating the sale and/or consumption of fermented malt beverages or intoxicating liquors? Yes ___ No X
- 3. Are there currently any charges, federal, state, or local pending against you? Yes ___ No X
- 4. Do you currently have any outstanding forfeitures owed to the City of Wisconsin Dells? Yes ___ No X

If you answered yes to any of the above questions, list the offense convicted of, pending conviction, date of conviction, and state and county of conviction.

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STATE OF WISCONSIN

COUNTIES OF COLUMBIA, SAUK, ADAMS & JUNEAU

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Signature of Applicant: *Dethany Bradley* Date: 7/8/16

Subscribed and sworn to before me this 8th day of July, 2016.

Susan M Bremer
Notary Public *Susan M Bremer*
My Commission Expires: 11/9/18



State of WI Sauk Co

- 1. Have you been convicted of any felony or misdemeanor? Yes ___ No
- 2. Have you been convicted of any license law or ordinance regulating the sale and/or consumption of fermented malt beverages or intoxicating liquors? Yes ___ No
- 3. Are there currently any charges, federal, state, or local pending against you? Yes ___ No
- 4. Do you currently have any outstanding forfeitures owed to the City of Wisconsin Dells? Yes ___ No

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<u>Date</u>	<u>Nature of Offense</u>	<u>County</u>	<u>State</u>

STATE OF WISCONSIN
COUNTIES OF COLUMBIA, SAUK, ADAMS & JUNEAU

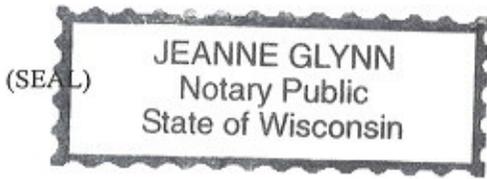
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Signature of Applicant: [Signature] Date: 7-8-16

Subscribed and sworn to before me this 8th day of July, 2016.

[Signature]
Notary Public

My Commission Expires: 10-2-2016



**CITY OF WISCONSIN DELLS
OPERATOR'S (BARTENDER) LICENSE APPLICATION**

FOR OFFICE USE ONLY

Receipt# _____
 Amount Paid: \$ 60.00 56417
 License Exp. Date Provisional: _____ (not more than 60 days)
 Operators-June 30, 2018 (even year)
 Temporary Period _____ (not more than 14 days)
 Council Date Granted: _____
 License #: _____ Date Issued: _____

Police Dept Verification: 7-2316 (no ch) (LC)
 Police Chief: _____ Approved: [Signature]
 Denied: _____

Please Note:

- You must be 18 years of age or older to apply.
- Answer all questions truthfully and completely. A background record check will be conducted by the Police Dept.
- A Beverage Server Certificate, proof of registration in the class, or proof of having an Operator License within the last two years must accompany all New License Applications.

Application Date 07/11/2016

License Applying For:

- New \$60 22
- Renewal \$60
- Provisional \$10
- Temporary \$10 (Bona Fide Clubs Only)
 Date(s) Needed (14 day max.): _____
 Limited to one per year. No training course required.

Check the appropriate box that applies to you:

- I have an Operator's License in effect at this time. (Attach proof if not held w/City of Wisconsin Dells)
- I have held an Operator's License within past 2 years (Attach proof)
- I have completed the Beverage Server Training Course within past 2 years (Attach Completion Certificate)
- I am enrolled in the Beverage Server Training Course
 Class Date and Location: _____
 (After completing the course, bring in your certificate to receive license)
- I am applying for a Temporary Operator's License

To the Common Council of the City of Wisconsin Dells, Wisconsin:

I herby apply for a license to serve from the date hereof to **June 30, 2018**, inclusive, fermented malt beverages and intoxicating liquors, subject to limitations imposed by Secs. 125.04, 125.12, 125.32, 125.68 of the Wisconsin Statutes and all acts amendatory thereof and supplementary thereto, and hereby agree to comply with all laws, resolutions, ordinances and regulations, federal, state, or local, affecting the sale of such beverages and liquors if a license is granted to me.

PLEASE PRINT

Name Dawson Bonellow Orian
 Last First Middle
 Home Address 1041 Cree Ave. Friendship WI 53934
 Street City State Zip

Mail License to (if different from Home Address) _____
 Street City State Zip

Previous Addresses within the past 10 years
~~105~~ 105 East Center St Adams WI
53910

Drivers License # D256-7349-6143-09 State Issued Wisconsin U.S.A.

Phone Number (608) 740181 Date of Birth 04/23/1996 Place of Birth California

Physical Description Sex M Race Black Height 5'-07" Eye Color: Dark Brown Hair Color: Dark Brown

License to be used at (Name of Business) Americ Inn Wisconsin Dells

- 1. Have you been convicted of any felony or misdemeanor? Yes ___ No
- 2. Have you been convicted of any license law or ordinance regulating the sale and/or consumption of fermented malt beverages or intoxicating liquors? Yes ___ No
- 3. Are there currently any charges, federal, state, or local pending against you? Yes ___ No
- 4. Do you currently have any outstanding forfeitures owed to the City of Wisconsin Dells? Yes ___ No

If you answered yes to any of the above questions, list the offense convicted of, pending conviction, date of conviction, and state and county of conviction.

<u>Date</u>	<u>Nature of Offense</u>	<u>County</u>	<u>State</u>

STATE OF WISCONSIN
COUNTIES OF COLUMBIA, SAUK, ADAMS & JUNEAU

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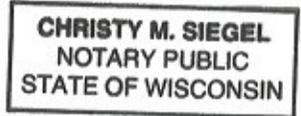
Signature of Applicant: *Kenneth Dawson* Date: 04/14/2016

Subscribed and sworn to before me this 21 day of July, 2016.

Christy M. Siegel
Notary Public

My Commission Expires: 12/09/2019

(SEAL)



(Continued)

- 1. Have you been convicted of any felony or misdemeanor? Yes ___ No
- 2. Have you been convicted of any license law or ordinance regulating the sale and/or consumption of fermented malt beverages or intoxicating liquors? Yes ___ No
- 3. Are there currently any charges, federal, state, or local pending against you? Yes ___ No
- 4. Do you currently have any outstanding forfeitures owed to the City of Wisconsin Dells? Yes ___ No

If you answered **yes** to any of the above questions, list the offense convicted of, pending conviction, date of conviction, and state and county of conviction.

<u>Date</u>	<u>Nature of Offense</u>	<u>County</u>	<u>State</u>

STATE OF WISCONSIN

COUNTIES OF COLUMBIA, SAUK, ADAMS & JUNEAU

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Signature of Applicant:  Date: 7-
 7-7-2016

Subscribed and sworn to before me this 7th day
of July, 2016.
Tammy L. Miller
Notary Public
My Commission Expires: 4-14-18



(Continued)

- 1. Have you been convicted of any felony or misdemeanor? Yes No
- 2. Have you been convicted of any license law or ordinance regulating the sale and/or consumption of fermented malt beverages or intoxicating liquors? Yes No
- 3. Are there currently any charges, federal, state, or local pending against you? Yes No
- 4. Do you currently have any outstanding forfeitures owed to the City of Wisconsin Dells? Yes No

If you answered yes to any of the above questions, list the offense convicted of, pending conviction, date of conviction, and state and county of conviction.

<u>Date</u>	<u>Nature of Offense</u>	<u>County</u>	<u>State</u>
1-30-07	Criminal Damage to Property	Sauk	WI

STATE OF WISCONSIN

COUNTIES OF COLUMBIA, SAUK, ADAMS & JUNEAU

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Signature of Applicant: Alicia Khorkkan Date: 7-15-16

Subscribed and sworn to before me this 15th day of July, 2016.

Susan M. Bremer
Notary Public

My Commission Expires: 11/9/18



- 1. Have you been convicted of any felony or misdemeanor? Yes No
- 2. Have you been convicted of any license law or ordinance regulating the sale and/or consumption of fermented malt beverages or intoxicating liquors? Yes No
- 3. Are there currently any charges, federal, state, or local pending against you? Yes No
- 4. Do you currently have any outstanding forfeitures owed to the City of Wisconsin Dells? Yes No

If you answered yes to any of the above questions, list the offense convicted of, pending conviction, date of conviction, and state and county of conviction.

<u>Date</u>	<u>Nature of Offense</u>	<u>County</u>	<u>State</u>
1998	Trespassing	Norfolk	VA

STATE OF WISCONSIN
COUNTIES OF COLUMBIA, SAUK, ADAMS & JUNEAU

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Signature of Applicant:  Date: 7-22-16

Subscribed and sworn to before me this 22 day of July, 2016.


Notary Public

My Commission Expires: 06/09/2018

(SEAL)

(Continued)

- 1. Have you been convicted of any felony or misdemeanor? Yes ___ No
- 2. Have you been convicted of any license law or ordinance regulating the sale and/or consumption of fermented malt beverages or intoxicating liquors? Yes ___ No
- 3. Are there currently any charges, federal, state, or local pending against you? Yes ___ No
- 4. Do you currently have any outstanding forfeitures owed to the City of Wisconsin Dells? Yes ___ No

If you answered **yes** to any of the above questions, list the offense convicted of, pending conviction, date of conviction, and state and county of conviction.

<u>Date</u>	<u>Nature of Offense</u>	<u>County</u>	<u>State</u>

STATE OF WISCONSIN

COUNTIES OF COLUMBIA, SAUK, ADAMS & JUNEAU

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Signature of Applicant: *[Handwritten Signature]* Date: 08/09/16

Subscribed and sworn to before me this 9th day
of August, 2016.
Tammy L Miller
Notary Public
My Commission Expires: 4-14-8



(Continued)

- 1. Have you been convicted of any felony or misdemeanor? Yes ___ No
- 2. Have you been convicted of any license law or ordinance regulating the sale and/or consumption of fermented malt beverages or intoxicating liquors? Yes ___ No
- 3. Are there currently any charges, federal, state, or local pending against you? Yes ___ No
- 4. Do you currently have any outstanding forfeitures owed to the City of Wisconsin Dells? Yes ___ No

If you answered **yes** to any of the above questions, list the offense convicted of, pending conviction, date of conviction, and state and county of conviction.

<u>Date</u>	<u>Nature of Offense</u>	<u>County</u>	<u>State</u>

STATE OF WISCONSIN

COUNTIES OF COLUMBIA, SAUK, ADAMS & JUNEAU

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Signature of Applicant:  Date: 8/4/16

Subscribed and sworn to before me this 4th day
of August, 2016.
Tammy L Miller
Notary Public
My Commission Expires: 4-14-18



(Continued)

- 1. Have you been convicted of any felony or misdemeanor? Yes ___ No X
- 2. Have you been convicted of any license law or ordinance regulating the sale and/or consumption of fermented malt beverages or intoxicating liquors? Yes ___ No X
- 3. Are there currently any charges, federal, state, or local pending against you? Yes ___ No X
- 4. Do you currently have any outstanding forfeitures owed to the City of Wisconsin Dells? Yes ___ No X

If you answered **yes** to any of the above questions, list the offense convicted of, pending conviction, date of conviction, and state and county of conviction.

<u>Date</u>	<u>Nature of Offense</u>	<u>County</u>	<u>State</u>

STATE OF WISCONSIN
COUNTIES OF COLUMBIA, SAUK, ADAMS & JUNEAU

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Signature of Applicant: *Christine Webb* Date: 7/8/16

Subscribed and sworn to before me this 8th day
of July, 2016.
Tammy L Miller
Notary Public
My Commission Expires: 4-14-18



- 1. Have you been convicted of any felony or misdemeanor? Yes ___ No X
- 2. Have you been convicted of any license law or ordinance regulating the sale and/or consumption of fermented malt beverages or intoxicating liquors? Yes ___ No X
- 3. Are there currently any charges, federal, state, or local pending against you? Yes ___ No X
- 4. Do you currently have any outstanding forfeitures owed to the City of Wisconsin Dells? Yes ___ No X

If you answered **yes** to any of the above questions, list the offense convicted of, pending conviction, date of conviction, and state and county of conviction.

<u>Date</u>	<u>Nature of Offense</u>	<u>County</u>	<u>State</u>
5-16	Speeding	Adams	Wi
12-12	Speeding	Adams	Wi
6-14	Seat belt	Adams	Wi

STATE OF WISCONSIN
COUNTIES OF COLUMBIA, SAUK, ADAMS & JUNEAU

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Signature of Applicant: [Handwritten Signature] Date: 7-14-2016

Subscribed and sworn to before me this 14th day
of July, 2016
[Handwritten Signature]
Notary Public
My Commission Expires: 10/25/2019



(Continued)

- 1. Have you been convicted of any felony or misdemeanor? Yes No
- 2. Have you been convicted of any license law or ordinance regulating the sale and/or consumption of fermented malt beverages or intoxicating liquors? Yes No
- 3. Are there currently any charges, federal, state, or local pending against you? Yes No
- 4. Do you currently have any outstanding forfeitures owed to the City of Wisconsin Dells? Yes No

If you answered yes to any of the above questions, list the offense convicted of, pending conviction, date of conviction, and state and county of conviction.

<u>Date</u>	<u>Nature of Offense</u>	<u>County</u>	<u>State</u>

STATE OF WISCONSIN

COUNTIES OF COLUMBIA, SAUK, ADAMS & JUNEAU

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Signature of Applicant: *Jim Naw* Date: 7/15/16

Subscribed and sworn to before me this 15th day
of July 2016.
Tammy L Miller
Notary Public
My Commission Expires: 4-14-18



(Continued)

- 1. Have you been convicted of any felony or misdemeanor? Yes ___ No X
- 2. Have you been convicted of any license law or ordinance regulating the sale and/or consumption of fermented malt beverages or intoxicating liquors? Yes ___ No X
- 3. Are there currently any charges, federal, state, or local pending against you? Yes ___ No X
- 4. Do you currently have any outstanding forfeitures owed to the City of Wisconsin Dells? Yes ___ No X

If you answered **yes** to any of the above questions, list the offense convicted of, pending conviction, date of conviction, and state and county of conviction.

<u>Date</u>	<u>Nature of Offense</u>	<u>County</u>	<u>State</u>

STATE OF WISCONSIN
COUNTIES OF COLUMBIA, SAUK, ADAMS & JUNEAU

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Signature of Applicant: *Josh Thaler* Date: 7/19/16

Subscribed and sworn to before me this 19th day
of July, 2016.
Tammy L Miller
Notary Public
My Commission Expires: 4-14-18



(Continued)

- 1. Have you been convicted of any felony or misdemeanor? Yes No
- 2. Have you been convicted of any license law or ordinance regulating the sale and/or consumption of fermented malt beverages or intoxicating liquors? Yes No
- 3. Are there currently any charges, federal, state, or local pending against you? Yes No
- 4. Do you currently have any outstanding forfeitures owed to the City of Wisconsin Dells? Yes No

DONT think so

If you answered **yes** to any of the above questions, list the offense convicted of, pending conviction, date of conviction, and state and county of conviction.

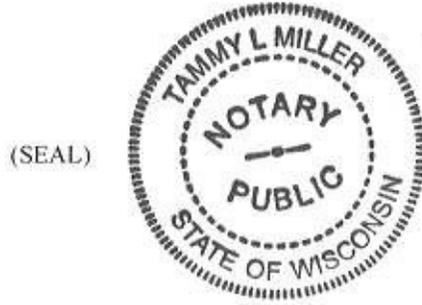
<u>Date</u>	<u>Nature of Offense</u>	<u>County</u>	<u>State</u>
?	BATTERY TO OFFICER	ADAMS	WI
	D.U.I in ADAMS IM fighting right now		
	paying on fines in COLUMBIA COUNTY		

STATE OF WISCONSIN
COUNTIES OF COLUMBIA, SAUK, ADAMS & JUNEAU

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Signature of Applicant: *Deon Stebe* Date: 7-14-14

Subscribed and sworn to before me this 14th day
of July, 2016.
Tammy L Miller
Notary Public
My Commission Expires: 4-14-18



- 1. Have you been convicted of any felony or misdemeanor? Yes ___ No
- 2. Have you been convicted of any license law or ordinance regulating the sale and/or consumption of fermented malt beverages or intoxicating liquors? Yes ___ No
- 3. Are there currently any charges, federal, state, or local pending against you? Yes ___ No
- 4. Do you currently have any outstanding forfeitures owed to the City of Wisconsin Dells? Yes ___ No

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STATE OF WISCONSIN
COUNTIES OF COLUMBIA, SAUK, ADAMS & JUNEAU

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Signature of Applicant: *[Signature]* Date: 8/5/2016

Subscribed and sworn to before me this 8th day
of August, 2016.
Tammy L Miller
Notary Public
My Commission Expires: 4-18-18



(Continued)

- 1. Have you been convicted of any felony or misdemeanor? Yes ___ No
- 2. Have you been convicted of any license law or ordinance regulating the sale and/or consumption of fermented malt beverages or intoxicating liquors? Yes ___ No
- 3. Are there currently any charges, federal, state, or local pending against you? Yes ___ No
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STATE OF WISCONSIN

COUNTIES OF COLUMBIA, SAUK, ADAMS & JUNEAU

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Signature of Applicant:  Date: 8-5-16

Subscribed and sworn to before me this 5th day
of August, 2016.
Tammy L Miller
Notary Public
My Commission Expires: 4-14-18



(Continued)

- 1. Have you been convicted of any felony or misdemeanor? Yes ___ No
- 2. Have you been convicted of any license law or ordinance regulating the sale and/or consumption of fermented malt beverages or intoxicating liquors? Yes ___ No
- 3. Are there currently any charges, federal, state, or local pending against you? Yes ___ No
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<u>Date</u>	<u>Nature of Offense</u>	<u>County</u>	<u>State</u>

STATE OF WISCONSIN

COUNTIES OF COLUMBIA, SAUK, ADAMS & JUNEAU

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Signature of Applicant:  Date: 7-15-2016

Subscribed and sworn to before me this 15th day
of July, 2016.
Tammy L Miller
Notary Public
My Commission Expires: 4-14-18



- 1. Have you been convicted of any felony or misdemeanor? Yes No
- 2. Have you been convicted of any license law or ordinance regulating the sale and/or consumption of fermented malt beverages or intoxicating liquors? Yes No
- 3. Are there currently any charges, federal, state, or local pending against you? Yes No
- 4. Do you currently have any outstanding forfeitures owed to the City of Wisconsin Dells? Yes No

If you answered **yes** to any of the above questions, list the offense convicted of, pending conviction, date of conviction, and state and county of conviction.

<u>Date</u>	<u>Nature of Offense</u>	<u>County</u>	<u>State</u>
2012 2012	POSSESSION THC	SAUK	WISCONSIN
2014	DRIVING w/ SUSPENDED LICENSE	SAUK	WISCONSIN
2013	DRINKING w/ SUSPENDED LICENSE	"	"
2007	UNDERAGE DRINKING	SAUK	WISCONSIN DELLS

STATE OF WISCONSIN

COUNTIES OF COLUMBIA, SAUK, ADAMS & JUNEAU

The undersigned, being first duly sworn on oath, deposes and says 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 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.

Michael Richards

Signature of Applicant:

Michael Richards

Date:

8-5-2016

Subscribed and sworn to before me this 5th day

of August, 2016.

Tammy L Miller
Notary Public

My Commission Expires: 4-14-18



City of Wisconsin Dells

Application for: SPECIAL EVENTS PERMIT

ITEM 3d

Application Date: 07.20.2016 FEE \$160.00 Receipt No. —

Name of Applicant: BID Committee

Address of Applicant: 300 LaCrosse Street

Daytime Telephone Number: (608) 254-2012 Email Address: nholzem@dellscitygov.com

Name & Address of Officers, if Corporation: _____

FOR SPECIAL EVENTS PERMIT:

Date(s) of Event: Sunday, September 11, 2016

Type of Event: Farmers' Market Festival

Location of Event: 700 Block of Oak Street
(From Broadway to the entrance of Parking lot)

Number and Types of Participants: 15 Vendors, Music (Swing Crew)

Contact Person: Nancy Holzem Telephone No: (608) 254-2012

Fireworks: YES or NO

Beer/Wine Served or Sold: YES or NO (If yes, Temporary Class B Beer/Wine License must be applied for.)

FOR PARADE/OR RUNNING/WALKING EVENT:

Assembly Area: _____

Starting Time & Estimated Ending Time: _____

Starting Point: _____

Parade/Run Route: _____

Estimated Number of Units/or Runners: _____

Nancy Holzem

Printed Name of Applicant

Nancy Holzem

Signature of Applicant

7.20.2016

Date

Subject to compliance with Wisconsin Dells Municipal Code chapter 24

Date Approved: _____ day of _____ 20____

Date Denied: _____ Reason(s): _____

Note: Incomplete, false, or misleading information on the application form can delay the review process and/or be grounds for denial of permit or license. Rev. 9/15

BROADWAY

OAK STREET

Source: Esri, DigitalGlobe, GeoEye, Earthstar Geographics,
CNES/Airbus DS, USDA, USGS, AEX, Getmapping, Aerogrid, IGN,
© P, swisstopo, and the GIS User Community

City of Wisconsin Dells

Application for: SPECIAL EVENTS & PARADE PERMIT

ITEM 3e

Date From: September 16-18, 2016

FEE \$160

Receipt No. 56758

Name of Applicant: WoZhaWa Committee

Address of Applicant: PO Box 485, Wisconsin Dells, WI 53965

Daytime Telephone Number: () _____ Email Address: _____

Name & Address of Officers, if Corporation: _____

FOR SPECIAL EVENTS PERMIT:

Type of Event: Wo-Zha-Wa Fall Festival

Location of Event: Downtown Wisconsin Dells

Number and Types of Participants: _____

Contact Person: Ed Wojnicz Telephone No: _____

Fireworks: NO

FOR PARADE PERMIT:

Assembly Area: Line up on Oak & Washington

Starting Time & Estimated Length: Start time is 1:30P.M. Parade lasts approximately 2 hours

Starting Point: Superior Street

Parade Route: Parade begins on Superior Street, turns on to Broadway and ends on Vine and Washington

Number of Units: _____

Signature of Applicant

Subject to compliance with Wisconsin Dells Municipal Code chapter 24

Date Approved: _____ day of _____ 20__

Date Denied: _____ Reason(s): _____

Note: Incomplete, false, or misleading information on the application form can delay the review process and/or be grounds for denial of permit or license. Rev. 01/07

City of Wisconsin Dells

Application for: SPECIAL EVENTS PERMIT

ITEM 3 *r*

Date From: Friday, October 14, 2016- Saturday, October 15, 2016 FEE: WAIVED Receipt No. NA

Name of Applicant: Wisconsin Dells Festivals, Inc. / Wisconsin Dells Visitor & Convention Bureau

Address of Applicant: PO Box 390, 701 Superior St, Wisconsin Dells, WI 53965

Daytime Telephone Number: (608) 254-9879 Email Address: Jenifer@wisdells.com

Name & Address of Officers, if Corporation: Jill Diehl, Tommy Bartlett Inc. President; Dan Gavinski, Original Wisconsin Ducks®, Secretary/Treasurer; Jesse DeFosse, Showboat, Vice President

FOR SPECIAL EVENTS PERMIT:

Type of Event: 19th Annual Fall Festival - A Festival that celebrates Autumn in Wisconsin Dells. Events Include: Craft Beer Walk, Children's Activities, Pony Rides, Petting Zoo, Live Entertainment, Dells On Tap Microbrew Tasting, Concessions, Arts & Crafts Marketplace, 5K Run/Walk & Kids Dash and many other activities.

Location of Event: Downtown Wisconsin Dells - Wisconsin Dells Festivals Site - Parking Areas Behind Municipal Building, Memorial Park, Land Adjacent to the Canadian Pacific Railway Fence.

Number and Types of Participants: Approximately 20,000 Visitors

Contact Person: Jenifer Dobbs, Festivals Manager Telephone No: 608-254-9879 or 608-516-7101 Fireworks: NO

Sandwich Board Signs: YES

FOR PARADE PERMIT:

Assembly Area: _____

Starting Time & Estimated Length: _____

Starting Point: _____

Parade Route: _____

Number of Units: _____


Signature of Applicant

Subject to compliance with Wisconsin Dells Municipal Code chapter 24

Date Approved: _____ day of _____ 20____

Date Denied: _____ Reason(s): _____

Note: Incomplete, false, or misleading information on the application form can delay the review process and/or be grounds for denial of permit or license. Rev. 01/10

Application for Temporary Class "B" / "Class B" Retailer's License

ITEM 39

See Additional Information on reverse side. Contact the municipal clerk if you have questions.

FEE \$ 10.00

Application Date: 8-8-2016
County of COLUMBIA

Town Village City of WISCONSIN DELLS

The named organization applies for: (check appropriate box(es).)

- A Temporary Class "B" license to sell fermented malt beverages at picnics or similar gatherings under s. 125.26(6), Wis. Stats.
A Temporary "Class B" license to sell wine at picnics or similar gatherings under s. 125.51(10), Wis. Stats.

at the premises described below during a special event beginning 09/16/2016 and ending 09/18/2016 and agrees to comply with all laws, resolutions, ordinances and regulations (state, federal or local) affecting the sale of fermented malt beverages and/or wine if the license is granted.

- 1. Organization (check appropriate box) -> Bona fide Club, Church, Lodge/Society, Chamber of Commerce or similar Civic or Trade Organization, Veteran's Organization, Fair Association

(a) Name AMERICAN LEGION POST187

(b) Address 609 WISCONSIN AVE WISCONSIN DELLS, WI 53965
(Street) Town Village City

(c) Date organized 10 FEB 1929

(d) If corporation, give date of incorporation

(e) If the named organization is not required to hold a Wisconsin seller's permit pursuant to s. 77.54 (7m), Wis. Stats., check this box: [checked]

(f) Names and addresses of all officers:

President DALE TOMPKINS

Vice President GARY THOMPSON

Secretary HENRY LUKASAVAGE

Treasurer ED LUKASZEWICZ

(g) Name and address of manager or person in charge of affair: DALE TOMPKINS
809 ILLINOIS AVE WISCONSIN DELLS 53965

2. Location of Premises Where Beer and/or Wine Will Be Sold, Served, Consumed, or Stored, and Areas Where Alcohol Beverage Records Will be Stored:

(a) Street number NORTH SIDE OF BROADWAY & ELM IN THE STREET.

(b) Lot Block

(c) Do premises occupy all or part of building? NO

(d) If part of building, describe fully all premises covered under this application, which floor or floors, or room or rooms, license is to cover:

3. Name of Event

(a) List name of the event WO ZHA WA

(b) Dates of event 9-16-2016 9-18-2016

DECLARATION

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.

AMERICAN LEGION POST187

(Name of Organization)

Officer Ed Lukaszewicz TRES (Signature/date)

Officer (Signature/date)

Officer (Signature/date)

Officer (Signature/date)

Date Filed with Clerk

Date Reported to Council or Board

Date Granted by Council

License No.

Application for Temporary Class "B" / "Class B" Retailer's License

ITEM 3h

See Additional Information on reverse side. Contact the municipal clerk if you have questions.

FEE \$ 10.00 R#56757

Application Date: 8-10-16

Town Village City of WISCONSIN DELLS

County of COLUMBIA

The named organization applies for: (check appropriate box(es).)

- A Temporary Class "B" license to sell fermented malt beverages at picnics or similar gatherings under s. 125.26(6), Wis. Stats.
 A Temporary "Class B" license to sell wine at picnics or similar gatherings under s. 125.51(10), Wis. Stats.

at the premises described below during a special event beginning 9-9-16 and ending 9-10-16 and agrees to comply with all laws, resolutions, ordinances and regulations (state, federal or local) affecting the sale of fermented malt beverages and/or wine if the license is granted.

- 1. Organization** (check appropriate box) → Bona fide Club Church Lodge/Society
 Chamber of Commerce or similar Civic or Trade Organization
 Veteran's Organization Fair Association

(a) Name Wisconsin Dells Lions Club

(b) Address PO Box 461 Wisconsin Dells, WI 53965
(Street) Town Village City

(c) Date organized 1978

(d) If corporation, give date of incorporation _____

(e) If the named organization is not required to hold a Wisconsin seller's permit pursuant to s. 77.54 (7m), Wis. Stats., check this box:

(f) Names and addresses of all officers:

President	<u>Steve Dorko</u>	<u>PO Box 805</u>	<u>Wisconsin Dells</u>
Vice President	<u>Lisa Beers</u>		<u>Wisconsin Dells</u>
Secretary	<u>Kathy Dmytro</u>	<u>PO Box 805</u>	<u>Wisconsin Dells</u>
Treasurer	<u>Kathy Dmytro</u>	<u>PO Box 805</u>	<u>Wisconsin Dells</u>

(g) Name and address of manager or person in charge of affair: _____

2. Location of Premises Where Beer and/or Wine Will Be Sold, Served, Consumed, or Stored, and Areas Where Alcohol Beverage Records Will be Stored:

(a) Street number Camp Wabek / Broadway + Elm

(b) Lot _____ Block _____

(c) Do premises occupy all or part of building? no

(d) If part of building, describe fully all premises covered under this application, which floor or floors, or room or rooms, license is to cover: _____

3. Name of Event

(a) List name of the event BMW Club / Wo Zha Wo

(b) Dates of event 9-9-16 to 9-10-16 / 9-16-16 to 9-18-16

DECLARATION

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.

Wisconsin Dells Lions Club
(Name of Organization)

Officer [Signature] 8-11-16
(Signature/date)

Officer _____
(Signature/date)

Officer [Signature] 8-11-16
(Signature/date)

Officer _____
(Signature/date)

Date Filed with Clerk 08-11-2016

Date Reported to Council or Board _____

Date Granted by Council _____

License No. _____

APPLICATION FOR TEMPORARY CLASS "B"/"CLASS B" RETAILER'S LICENSE

See Additional Information on reverse side. Contact the municipal clerk if you have questions.

FEE \$ 10.00

Application Date: AUG. 8, 2016

City of WISCONSIN DELLS, WI County of COLUMBIA

The named organization applies for: (check appropriate box(es).)

- A Temporary Class "B" license to sell fermented malt beverages at picnics or similar gatherings under s. 125.26(6), Wis. Stats.
A Temporary "Class B" license to sell wine at picnics or similar gatherings under s. 125.51(10), Wis. Stats.

at the premises described below during a special event beginning SEPT. 15, 2016 and ending SEPT. 18, 2016 and agrees to comply with all laws, resolutions, ordinances and regulations (state, federal or local) affecting the sale of fermented malt beverages and/or wine if the license is granted.

1. ORGANIZATION (check appropriate box) Bona fide Club Church Lodge/Society Veteran's Organization Fair Association

(a) Name VETERANS OF FOREIGN WARS POST 9387

(b) Address 609 WISCONSIN AVE. WIS. DELLS, WI 53965

(c) Date organized MAY 1967

(d) If corporation, give date of incorporation MAY 1967

(e) If the named organization is not required to hold a Wisconsin seller's permit pursuant to s. 77.54 (7m), Wis. Stats., check this box: [X]

(f) Names and addresses of all officers:

President JEFFERY BOYER 40 FAWN DR. BARABOO, WI 53913

Vice President JUSTIN LICHT 85A GRAND CANYON DR. BARABOO, WI

Secretary GILES SVEHLEK 4144 HWY. 13 WIS. DELLS, WI 53965

Treasurer MARC BERNANDER E11469 HILLSIDE DR. WIS. DELLS, WI

(g) Name and address of manager or person in charge of affair: JEFFERY BOYER 40 FAWN DR. BARABOO, WI

2. LOCATION OF PREMISES WHERE BEER AND/OR WINE WILL BE SOLD:

(a) Street number BOWMAN ROAD AT BROADWAY AVENUE

(b) Lot ON STREET Block 700

(c) Do premises occupy all or part of building? NO

(d) If part of building, describe fully all premises covered under this application, which floor or floors, or room or rooms, license is to cover:

3. NAME OF EVENT

(a) List name of the event NO-ZHA-WA FALL FESTIVAL

(b) Dates of event SEPT. 15, 16, 17, 18, 2016

DECLARATION

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.

Officer [Signature] 8-9-16 (Signature/date)

VETERANS OF FOREIGN WARS POST 9387 WISCONSIN DELLS (Name of Organization) Officer [Signature] (Signature/date)

Officer [Signature] 8/8/2016 (Signature/date)

Officer Marc Bernander 8/8/2016 (Signature/date)

Date Filed with Clerk

Date Reported to Council or Board

Date Granted by Council

License No.

Application for Temporary Class "B" / "Class B" Retailer's License

ITEM 3j

See Additional Information on reverse side. Contact the municipal clerk if you have questions.

FEE \$ 10.00

Application Date: 7-21-2016

Town Village City of WISCONSIN DELLS

County of COLUMBIA

The named organization applies for: (check appropriate box(es).)

- A Temporary Class "B" license to sell fermented malt beverages at picnics or similar gatherings under s. 125.26(6), Wis. Stats.
A Temporary "Class B" license to sell wine at picnics or similar gatherings under s. 125.51(10), Wis. Stats.

at the premises described below during a special event beginning 10/15/2016 and ending 10/15/2016 and agrees to comply with all laws, resolutions, ordinances and regulations (state, federal or local) affecting the sale of fermented malt beverages and/or wine if the license is granted.

- 1. Organization (check appropriate box) -> Bona fide Club, Church, Lodge/Society, Chamber of Commerce or similar Civic or Trade Organization, Veteran's Organization, Fair Association

(a) Name WISCONSIN DELLS FESTIVALS, INC.

(b) Address 701 SUPERIOR ST, WISCONSIN DELLS, WI 53965 (Street) Town Village City

- (c) Date organized 10/16/1990
(d) If corporation, give date of incorporation 10/16/1990
(e) If the named organization is not required to hold a Wisconsin seller's permit pursuant to s. 77.54 (7m), Wis. Stats., check this box: []

(f) Names and addresses of all officers:
President JILL DIEHL, TOMMY BARTLETT EXPLORATORY
Vice President JESSE DEFOSSE, SHOWBOAT SALOON
Secretary DAN GAVINSKI, ORIGINAL WISCONSIN DUCKS
Treasurer DAN GAVINSKI, ORIGIANL WISCONSIN DUCKS

(g) Name and address of manager or person in charge of affair: JENIFER DOBBS, WD FESTIVALS, INC. 701 SUPERIOR ST, WISCONSIN DELLS, WI 53965

2. Location of Premises Where Beer and/or Wine Will Be Sold, Served, Consumed, or Stored, and Areas Where Alcohol Beverage Records Will be Stored:

- (a) Street number CITY LOT, 300 LA CROSSE ST, WISCONSIN DELLS, WI 53965
(b) Lot Block
(c) Do premises occupy all or part of building? ALL OF THE PARKING LOT
(d) If part of building, describe fully all premises covered under this application, which floor or floors, or room or rooms, license is to cover:

3. Name of Event

- (a) List name of the event DELLS ON TAP
(b) Dates of event 10/15/2016

DECLARATION

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.

Officer [Signature] (Signature/date)

Officer [Signature] (Signature/date)

Date Filed with Clerk 7-21-2016

Date Granted by Council

WISCONSIN DELLS FESTIVALS, INC. (Name of Organization)

Officer [Signature] (Signature/date)

Officer [Signature] (Signature/date)

Date Reported to Council or Board 8-15-2016

License No.

Notice of Public Hearing
In the Matter of Adopting a Revised Height Limitation Zoning Map
for the Baraboo-Wisconsin Dells Municipal Airport

The Baraboo-Wisconsin Dells Airport recently acquired property adjacent to the northerly limits of the Airport thereby expanding its boundary;

Wis. Stat. § 114.136 (2)(b) authorizes airports to protect their aerial approaches within 3 miles of the airport boundary. Since the boundary of the airport has changed as a result of the recent land acquisition, it is necessary to revise the Height Limitation Zoning Map accordingly.

Notice is hereby given that the City of Wisconsin Dells Common Council will hold a Public Hearing on Monday, August 15, 2016 at 7:00pm in the council chambers at the Wisconsin Dells Municipal Building, 300 La Crosse Street.

All interested persons are invited to attend and present their views on the proposed revisions to the Height Limitation Zoning Map. The map is available for viewing on the city's website of citywd.org under Public Hearings.

Nancy R. Holzem
City Clerk/Coordinator

Published: July 23, July 30 & August 6, 2016

ITEM 7

ORIGINAL ALCOHOL BEVERAGE RETAIL LICENSE APPLICATION

Submit to municipal clerk.

For the license period beginning 8/16 2016 ending 6/30 2017

TO THE GOVERNING BODY of the: Town of Village of City of } WISCONSIN DELLS

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

- 1. The named INDIVIDUAL PARTNERSHIP LIMITED LIABILITY COMPANY CORPORATION/NONPROFIT ORGANIZATION

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

- 2. Name (individual/partners give last name, first, middle; corporations/limited liability companies give registered name): Edyta Kapusta EDYTKA'S POLISH RESTAURANT INC. 97.30

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

Title	Name	Home Address	Post Office & Zip Code
President/Member		<u>1590 LENOX CI</u>	
Vice President/Member		<u>PARTLETTL 60103</u>	
Secretary/Member		<u>3901 River Rd, Wis. Dells</u>	
Treasurer/Member			
Agent	<u>EDYTKA KAPUSTA</u>		

- 3. Trade Name Edytkas Polish Restaurant Business Phone Number 630 439-5701
- 4. Address of Premises 221 Broadway, Wis Dells Post Office & Zip Code 53965

- 5. Is individual, partners or agent of corporation/limited liability company subject to completion of the responsible beverage server training course for this license period? Yes No
- 6. Is the applicant an employe or agent of, or acting on behalf of anyone except the named applicant? Yes No
- 7. Does any other alcohol beverage retail licensee or wholesale permittee have any interest in or control of this business? Yes No
- 8. (a) Corporate/limited liability company applicants only: Insert state Wisconsin and date 7/2016 of registration.
 - (b) Is applicant corporation/limited liability company a subsidiary of any other corporation or limited liability company? Yes No
 - (c) Does the corporation, or any officer, director, stockholder or agent or limited liability company, or any member/manager or agent hold any interest in any other alcohol beverage license or permit in Wisconsin? Yes No

(NOTE: All applicants explain fully on reverse side of this form every YES answer in sections 5, 6, 7 and 8 above.)

- 9. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) walk in cooler in rear, front counter
- 10. Legal description (omit if street address is given above): _____
- 11. (a) Was this premises licensed for the sale of liquor or beer during the past license year? Yes No
(b) If yes, under what name was license issued? _____
- 12. Does the applicant understand they must file a Special Occupational Tax return (TTB form 5630.5) before beginning business? [phone 1-800-937-8864] Yes No
- 13. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776] Yes No
- 14. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes No

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signers. Signers agree to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants and each member of a partnership applicant must sign; corporate officer(s), members/managers of Limited Liability Companies must sign.) Any lack of access to any portion of a licensed premises during inspection will be deemed a refusal to permit inspection. Such refusal is a misdemeanor and grounds for revocation of this license.

SUBSCRIBED AND SWORN TO BEFORE ME this 19th day of July 2016

[Signature]
(Clerk/Notary Public)

My commission expires 10/25/2017



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

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

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

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>7-19-2017</u>	Date reported to council/board	Date provisional license issued	Signature of Clerk / Deputy Clerk
Date license granted	Date license issued	License number issued	

RESOLUTION NO. _____

BE IT HEREBY RESOLVED by the City of Wisconsin Dells, Columbia, Sauk, Adams and Juneau Counties, Wisconsin, based upon the recommendation of the Finance Committee from their August 15, 2016 meeting;

IT APPROVES an overpayment room tax refund as requested by Indian Trails Motel.

Brian L. Landers, Mayor

Attest:

Nancy R. Holzem, City Clerk/Coordinator

Vote: _____ ayes _____ nays
Date Introduced: August 15, 2016
Date Passed:
Date Published:

July 7, 2015

Indian Trail Motel
1013 Broadway
Wisconsin Dells, WI 53965

To whom it may concern,

It came to our attention that a report in Lodgical Solution Property Management Software, running at the Indian Trail Motel in Wisconsin Dells, was misrepresenting financial data earlier this year. The report overstated guest services and taxes as a result of showing duplicating transactions. The actual guest records correctly stated revenue, and all guests paid the correct amount owed to the property, and did not over pay. Unfortunately, because of the error on this report, when their bookkeeper prepared their quarterly tax reporting, they overstated the amount of tax which was collected due to the error in the reporting.

The quarterly tax statements have been amended to show the correct, actual, amount of taxes collected and charged to the guests. A refund in the amount to cover the costs of taxes over paid should be paid to the property, as the property over paid their taxes.

Please feel free to contact me if you have any questions.

\$ 2102.27

Sincerely,



Gregory Swain
President

Bay Lakes Information Systems LLC
34 West Oak Street
Sturgeon Bay, WI 54235
920.746.0606

City of WD
Rec'd 7-21-2015

RESOLUTION NO. _____

ITEM 9

BE IT HEREBY RESOLVED by the City of Wisconsin Dells, Columbia, Sauk, Adams and Juneau Counties, Wisconsin, that based upon the recommendation of the FINANCE COMMITTEE from their August 15, 2016 meeting;

IT APPROVES supporting Option ___ for the Baraboo-Wisconsin Dells Airport Runway project.

Brian L. Landers, Mayor

Attest: _____
Nancy R. Holzem, City Clerk

Vote: ___ ayes ___ nays
Date Introduced: August 15, 2016
Date Passed:
Date Published:

Baraboo-Wisconsin Dells Airport Owners

Runway 01/19 Reconstruction/Widening Options

Discussion Points

Summary: The Airport Owners will meet again in September to discuss the runway reconstruction/widening alternatives and possible funding sources. A delegate from your community will be invited to represent your community's views on this project and make a decision on how to proceed.

Alternative A = Reconstruction of existing footprint at B-II standards

Alternative B = Reconstruction and widening from 75' to 100' as federal/state project with design of C-II standards.

Alternative C = Reconstruction and widening from 75' to 100' Hybrid of C-II standards for 100' runway, but B-II standards for other features

Option B is considered a long range goal and is not achievable at this time due to the existing condition of the pavement. Options A and C remain as current solutions.

Local Funding Requirement of options:

Option	Cost Estimate	Local Share	Each Owner	Completion
A	\$2.9M	145,000	36,250	2018
B	\$8.5 M	425,000	106,250	2028?
C	\$3.7M	945,000	236,250	2018

1. Is there local funding available for widening as detailed in Alternative C and where will this funding come from?

---Local Funding options to be considered:

Payment up front by Owners

Installment payments (assumes project is funded by one owner or outside entity)

General Obligation Bonds (individual communities borrow their portion of debt)

Contributions from Airport Patrons (private funds)

Capital Contribution Identified in Intergovernmental Agreement (Current Agreement expires in 2023—would need to extend agreement to cover term of debt)

Combination of above options

2. If funding is available, should the Airport owners proceed with Alternative C?

BARABOO – WISCONSIN DELLS AIRPORT
Runway 1/19 Reconstruction Alternatives Matrix

Alternative A	Alternative B	Alternative C
<ul style="list-style-type: none"> • 75' wide runway • B-II design standards 	<ul style="list-style-type: none"> • 100' wide runway • C-II design standards 	<ul style="list-style-type: none"> • 100' wide runway = C-II design standards • B-II design standards for other features • Hybrid mix of design standards
<ul style="list-style-type: none"> • Length remains same @ 5,010' 	<ul style="list-style-type: none"> • Length remains same @ 5,010' 	<ul style="list-style-type: none"> • Length remains same @ 5,010'
<ul style="list-style-type: none"> • Eligible for state and federal funding as B-II 	<ul style="list-style-type: none"> • Need justification to meet eligibility for state and federal funding as C-II 	<ul style="list-style-type: none"> • 75' of pavement would be eligible for state and federal funding as B-II • 25' of pavement would be locally funded
<ul style="list-style-type: none"> • 	<ul style="list-style-type: none"> • User study and projections needed to justify 500 annual operations by "C" aircraft 	<ul style="list-style-type: none"> •
<ul style="list-style-type: none"> • 	<ul style="list-style-type: none"> • Master Plan generally required by FAA to document need for upgrading to serve "C" aircraft • Change in the class of aircraft being served is a triggering event that requires Master Plan 	<ul style="list-style-type: none"> •
<ul style="list-style-type: none"> • No Environmental Study required as the construction footprint for the project is not changing from existing conditions. 	<ul style="list-style-type: none"> • Environmental Study after Master Plan • Change in the class of aircraft being served is a triggering event that requires Environmental Study 	<ul style="list-style-type: none"> • Small Environmental Study required because construction footprint is slightly wider than existing conditions
<ul style="list-style-type: none"> • No Runway Protection Zone (RPZ) Analysis required. No change in class of aircraft being served 	<ul style="list-style-type: none"> • Runway Protection Zone (RPZ) Analysis. Change in the class of aircraft being served is a triggering event that requires RPZ Analysis or RPZ must be owned in fee by Airport and be free of objects and incompatible land uses 	<ul style="list-style-type: none"> • No Runway Protection Zone (RPZ) Analysis required. FAA funding only "B" class of aircraft and therefore no change in class of aircraft being served

Alternative A	Alternative B	Alternative C
<ul style="list-style-type: none"> • See sketch to show relationship to the Airport environs • There are no direct impacts or consequences anticipated with the reconstruction. <ul style="list-style-type: none"> ✓ The RPZ for Runway 19 approach contains North Reedsburg Road. A reconstruction project with the same footprint does not trigger the requirement for the RPZ to be a completely free of objects and incompatible land uses ✓ The Airport should upgrade the Clear Zone Easement (CZE) in the approach to Runway 1 to eliminate the irrigation equipment in the RPZ and CZE 	<ul style="list-style-type: none"> • See sketch to show relationship to the Airport environs • Anticipated Impact and consequences of change to "C" aircraft standards. Dimensional standards for "C" aircraft are generally wider and longer than "B" aircraft. Runway is currently built to "B" standards. <ul style="list-style-type: none"> ✓ Runway Protection Zone (RPZ) size increases and North Reedsburg Road is located in the RPZ of Runway 19. North Reedsburg Road would have to be closed or relocated outside the RPZ or the runway would have to be shifted south to remove the road from the RPZ. There are no plans to close or relocate the Road, therefore the graphics show the runway shifted south. ✓ Shifting the RPZ south requires the end of the runway to be shifted south approximately 825' ✓ Shifting the runway south requires approximately 825' of new runway and taxiway pavement and removal of the old pavements. ✓ Runway Safety Area (RSA) size increases which will require additional grading of a much larger area to FAA standards both off the runway ends and along the runway. ✓ Shifting the runway south would require additional land acquisition. ✓ Shifting the runway south moves the Runway 1 RPZ south, bringing Pit Road into the RPZ. Pit Road would need to be relocated outside the RPZ 	<ul style="list-style-type: none"> • See sketch to show relationship to the Airport environs • There are no direct impacts or consequences anticipated with the reconstruction. <ul style="list-style-type: none"> ✓ The RPZ for Runway 19 approach contains North Reedsburg Road. A reconstruction project with the same footprint does not trigger the requirement for the RPZ to be a completely free of objects and incompatible land uses ✓ The Airport should upgrade the Clear Zone Easement (CZE) in the approach to Runway 1 to eliminate the irrigation equipment in the RPZ and CZE

Alternative A	Alternative B	Alternative C
	<ul style="list-style-type: none"> ✓ Shifting the runway south may require additional obstruction removal ✓ The localizer for the Runway 1 approach may need to be relocated or a new unit installed because the runway is shifted south approximately 825' ✓ New approaches to both runway ends would be required. This effort would require following FAA AGIS process. 	
<p>Timetable– years are cumulative</p> <ul style="list-style-type: none"> ✓ Justification to meet funding eligibility ✓ Airport Master Plan ✓ Environmental Study ✓ RPZ Analysis ✓ ALP Update ✓ Land Acquisition ✓ Design 1 year ✓ New approaches ✓ Construction +1year 	<p>Timetable – years are cumulative</p> <ul style="list-style-type: none"> ✓ Justification to meet funding eligibility ✓ Airport Master Plan ≥ 2 years ✓ ALP Update w/ Master Plan ✓ Environmental Study ≥2 years ✓ RPZ Analysis at same time as Environmental ✓ Land Acquisition ≥ 1 year after approved Environmental document ✓ Design +1 year after approved Environmental document ✓ New approaches to Runway 2 years, occurs concurrently with design & construction ✓ Construction +1 year 	<p>Timetable– years are cumulative</p> <ul style="list-style-type: none"> ✓ Justification to meet funding eligibility ✓ Airport Master Plan ✓ Environmental Study ✓ RPZ Analysis ✓ ALP Update ✓ Land Acquisition ✓ Design 1 year ✓ New approaches ✓ Construction +1year
	<p>Runway 1/19 is in poor condition and needs to be reconstructed in the near future, and the lighting system is very old and needs replacement. Alternative B which requires the funding justification process, a Master Plan, ALP, RPZ analysis, environmental documents, and land acquisition) could take up to 10 years, a time frame that the existing pavement and lighting system may not survive.</p>	

RESOLUTION NO. _____

BE IT HEREBY RESOLVED by the City of Wisconsin Dells, Columbia, Sauk, Adams and Juneau Counties, Wisconsin, based upon the recommendation of the City Plan Commission from their August 8, 2016 meeting;

IT APPROVES a Conditional Use Permit to US Cellular Operating Company LLC, in order to allow an unconcealed telecommunications facility (cell phone tower) on parcel 291-0030-0000 (Chula Vista) in Adams County, with the contingencies listed in the City Planner's staff report.

Brian L. Landers, Mayor

Attest:

Nancy R. Holzem, City Clerk/Coordinator

Vote: _____ ayes _____ nays
Date Introduced: August 15, 2016
Date Passed:
Date Published:

Conditional Use and Site Plan Permits

17.2 Unconcealed telecommunication facility

Staff Report for Plan Commission, 8/08/2016

The City has received an application from United State Cellular Operating Company, LLC / Todd Anderson Agent to construct a 170' tall monopole Cell Phone Tower located on Tax Parcel 291-00300-0000 in the Adams Co. portion of the City of Wisconsin Dells. This use would be defined as an "Unconcealed telecommunication facility" per the City zoning code. Parcel 291-00300-0000 is currently in the Planned Development District 1, which will consider this request per the requirements of the C-4 Commercial – large scale zoning district. In 2013 the State created Statute 66.0404 which prohibits the City from prohibiting any Cell Towers in any Zoning District. Therefore, the City is evaluating this proposal as if a Cell Tower were permitted as a Conditional Use in this Zoning District.

As a new commercial development a Site Plan application was submitted as well.

The applicant has stated that the new tower is required because the existing antenna on the roof of one of the Chula Vista buildings is not capable of being upgraded to transmit 4G data, and therefore must be replaced by a regular or full cell site. This new tower would be a direct replacement for the existing roof-top unit that currently serves Chula Vista, and the primary target coverage would be into the resort. The US Cellular RF Design Engineer has stated that any tower more than one (1) mile from the Chula Vista resort would not be able to produce sufficient signal levels to meet the design criteria of this site. There are no existing towers within one (1) mile of the Chula Vista resort, so a new tower must be constructed.

The applicant has included a statement, sealed by a professional engineer that the 150 foot tall monopole structure is designed with a minimum factor of safety of 25% and is therefore very unlikely to fail. The engineer also states that if the monopole were to fail, the entire structure would not fall over, but rather the top of the structure would fold over onto itself.

Any approval of this use should carry the following contingencies.

1. The applicant gain rights to the property.
2. The applicant conforms to all the requirements in the proposed newly created Sec. 19.728 of the City Zoning Code
3. The applicant remain compliant with the FCC, FAA, and any other applicable regulatory agencies
4. The applicant does not unreasonably prevent any other carrier from co-locating on this tower.

Chris Tollaksen
Wis. Dells Public Works



June 15, 2016

Chris Tollaksen
City Planner/ Zoning Administrator
300 La Crosse Street
Wisconsin Dells, WI 53965

Dear MR. Tollaksen:

To meet the growing demand for wireless communications at the Chula Vista Resort in Wisconsin Dells, U.S. Cellular (USCC) has submitted an application to build a wireless tower near the maintenance facilities, in the southern part of the Chula Vista Golf Course. This new tower will benefit area residents by providing increased wireless call quality and clarity.

This particular location was selected because USCC currently has a high power repeater on top of the indoor waterpark, at the Chula Vista resort, that not only serves the resort buildings, but the surrounding areas, for a short distance. This repeater is only capable of retransmitting Cellular CDMA signals (primarily voice), and is not capable of being upgraded to retransmit LTE (4G data) signals, in all of the bands USCC currently uses for 4G data. Therefore USCC is forced to replace this repeater, with a regular or full cell site. This new tower would be a direct replacement for this repeater, and its primary target coverage would be into the resort, and immediate surrounding areas. Any additional surrounding coverage from this site would be considered an added bonus, but not the primary objective of this new site.

USCC currently serves most of the resort and attraction areas of Lake Delton/ Wisconsin Dells, from 4 existing tower locations. One on the south side near Ishnala & Gasser Rds.(785313 Wisconsin Dells). One on the monopole just east of the Fairview & Skyline motels along Hwy 12 in DT Wisconsin Dells (785322 DT WI Dells). One about .75 mi NE of the intersection I-94 & Hwy 12 (774365 Witches Gulch), and one about 1.25 mi. NE of the Christmas Mountain Resort (785397 Christmas Mountain). Please see the attached map for additional clarity. We also have 6 supplemental In-Building systems that enhance coverage in some of our customers facilities, including the Kalahari , Wilderness, and Chula Vista Resorts.

USCC looked at a total of 5 locations in the Chula Vista Resort area, including one existing tower that is over 1.5 mi. SE of the resort. It is my professional opinion that any tower that is 1.0 mile or more away from the primary buildings of the Chula Vista resort, would not be able to produce sufficient signals levels to meet the design criteria of this site or project. Therefore, there are only a very few sites that would work for USCCs purposes, none of which are existing sites, and some of them have been eliminated due to distance &/or other logistical problems encountered during our site selection processes.

I understand that you, or members of the City board, have identified 2 or 3 other tower locations in the general downtown area of the City of Wisconsin Dells, as possible alternate candidates

for us to analyze, for this project. Since it is my understanding that all of these candidates are in either Sauk or Columbia counties, and would be more than 1.5 miles away from the Chula Vista Resort (and closer to 2.5 miles) , they would not meet the tight requirements that we have for the placement of this site. Therefore they would not be viable candidates, or alternate locations, for this project, and our proposed tower location near the Chula Vista Resort. If you are aware of any other towers that are that closer to the Chula Vista resort, I would be most happy to run them through our propagation analysis tool, and see if they would be viable candidates

Given this information, we hope that you have a clearer understanding of the cellular needs of US Cellular, and our reasoning for attempting to locate a new cellular facility near the golf course maintenance facilities of the Chula Vista resort, and why we have respectfully rejected the attempts to locate our cellular communications equipment on these particular existing tower sites in the City of Wisconsin Dells.

Should you have any other questions or concerns regarding this matter, please feel free to contact me at 262 993-3188 or at mark.digerness@uscellular.com

Sincerely,



Mark Digerness
RF Design Engineer
U.S. Cellular
Brookfield, WI

CONDITIONAL USE APPLICATION

Wisconsin Dells, Wisconsin

Version: May 21, 2007

General instructions. Complete this application as it applies to your project and submit one copy to the zoning administrator along with the required application fee. Before you formally submit your application and fee, you may submit one copy to the zoning administrator who will ensure it is complete. If you have any questions, don't hesitate to contact the zoning administrator at 608-253-2542. You may obtain a digital copy of this file from the zoning administrator.

- Office Use Only -

Initial application fee	\$525.00
Receipt number	56369
Application number	18-2006

1. Applicant information

Applicant name United States Cellular Operating Company LLC, /Todd Anderson Agent

Street address N64W12883 Daylily Court

City Menomonee Falls

State and zip code WI 53051

Daytime telephone number 414-308-2886

Fax number, if any _____

E-mail, if any toddanderson@wirelessplanning.com

2. Subject property information

Street address	4082 River Road	
Parcel number	291-00300-0000 (Lease Area) 291-00290-0000 & 291-00400-0000 (Easements)	Note: the parcel number can be found on the tax bill for the property or may be obtained from the City.
Current zoning classification(s)	G-2 Commercial	
Describe the current use	Golf Course	

3. Proposed use. Describe the proposed use.

USCOC is proposing to build a 170' monopole on the side of the golf course.

4. Operating conditions. For non-residential uses, describe anticipated operating conditions (hours of operation, conditions that may affect surrounding properties, etc.)

After construction, which should take about 3 weeks, there will be very little traffic to the site. The site would only be visited for maintenance or if there was an outage. I would estimate that the site would be visited monthly.

CONDITIONAL USE APPLICATION
Wisconsin Dells, Wisconsin

Version: May 21, 2007

5. **Off-site effects.** Describe any potential nuisances and mitigating circumstances relating to street access, traffic visibility, parking, loading, exterior storage, exterior lighting, vibration, noise, air pollution, odor, electromagnetic radiation, glare and heat, fire and explosion, toxic or noxious materials, waste materials, drainage, and hazardous materials.

There should be no nuisances once the site is completed. During construction there will be excavators, concrete trucks and other equipment required for the construction.

6. **Review criteria.** The plan commission in making its recommendation and the common council in making its decision must consider the factors listed below. Provide a response to each. (See Section 19.373 of the Municipal Code.)

a. **Consistency of the proposed use with the city's comprehensive plan and neighborhood plan or other subarea plan, if any**
The tower was proposed at this location because of the coverage need of USCOC. The Landowner owns a large amount of property in the area and this location was selected by USCOC and approved by the Landowner.

b. **Effects of the proposed use on traffic safety and efficiency and pedestrian circulation, both on-site and off-site**
No effect. There will be very little traffic once the site is completed and there will be no pedestrian traffic in the area except for customers of Chula Vista.

c. **The suitability of the subject property for the proposed use**
The site is located on the Landowners property and there is a need for his customers to have reliable coverage when they are at his resort.

d. **Effects of the proposed use on the natural environment**
The proposed location will not affect the natural environment. The site is not in the wetlands and there will only be minor clearing of brush for the proposed site. An erosion control plan will be drawn up to satisfy the City requirements.

e. **Effects of the proposed use on surrounding properties, including operational considerations relating to hours of operation and creation of potential nuisances**
This site is not manned and will only be visited by USCOC employees or contractors for maintenance issues or outages.

f. **Effects of the proposed use on the normal and orderly development and improvement of the surrounding property for uses permitted in the district**
This proposed project should not effect any future developments or improvements in the area.

g. **Effects of the proposed use on the city's financial ability to provide public services**
There should be none.

CONDITIONAL USE APPLICATION
Wisconsin Dells, Wisconsin
 Version: May 21, 2007

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7. **Project map.** Attach a scaled map showing the information as listed at the end of this application. Use one of the following page sizes as appropriate: 8½" x 11", 11" x 17", or 24" x 36".

8. Applicant certification

<p>◆ I certify that the application is true as of the date it was submitted to the City for review.</p> <p>◆ I understand that I may be charged additional fees (above and beyond the initial application fee) consistent with the agreement below.</p>	
	<p>7/19/16</p>

Applicant Signature

Date

Governing Regulations	The procedures and standards governing this application process are found in Chapter 19, Article 4, Division 6, of the City's Municipal Code.
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Reimbursement Agreement for Application Review Costs

A. Payment for Eligible Costs.

By submitting this application for review, the applicant agrees to pay all administrative costs incurred by the City in the processing, study, and review of the application including costs for planning, legal, engineering, and related services, referred to herein as eligible costs.

B. Guarantee of Payment.

To guarantee reimbursement, the applicant shall submit one of the following along with this application:

1. an irrevocable letter of credit in the name of the City in an amount as set by the zoning administrator; or
2. a cash deposit in an amount as set by the zoning administrator.

If a cash deposit is used to guarantee reimbursement, the City will periodically deduct from the cash account such amounts necessary to pay for eligible costs and submit a written statement to the applicant. If a letter of credit is used, the applicant agrees to pay such amounts as invoiced within 7 days of the invoice date. An interest rate of 1½ percent shall be charged on invoices not paid within 30 days of the invoice date. The City shall access the letter of credit to pay for overdue invoices, including late penalty charges, and submit a written notice to the applicant.

If remaining monies in the cash account are insufficient to pay for current and reasonably anticipated eligible costs, the applicant agrees to deposit additional monies into the cash account in an amount as set by the zoning administrator. If the principal amount of the irrevocable letter of credit is insufficient to pay for current and reasonably anticipated eligible costs, the applicant agrees to submit a second letter of credit in an amount as set by the zoning administrator. The applicant may withdraw this application prior to final action by the City Council by submitting a written letter to the City. Upon such notice, the City shall cease all work related to the review of the application. However, withdrawal of this application does not terminate this reimbursement agreement.

If the applicant does not pay for eligible costs, the City Clerk/Treasurer shall add the outstanding balance to the tax roll as a special assessment against the subject property. In addition, the City may pursue other legal means to obtain the outstanding balance as allowed by law.

C. Termination of Guarantee.

If a cash deposit is used to guarantee reimbursement, the City agrees to reimburse the applicant any unused monies in the cash account, including earned interest, within 60 days of the date when the City Council takes final action on the application. If a letter of credit is used, the City shall send a written letter to the applicant releasing the applicant from the letter of credit when all outstanding invoices have been paid.

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Applicant Signature

Date

RESOLUTION NO. _____

BE IT HEREBY RESOLVED by the City of Wisconsin Dells, Columbia, Sauk, Adams and Juneau Counties, Wisconsin, based upon the recommendation of the City Plan Commission from their August 8, 2016 meeting;

IT APPROVES the Site Plan Application submitted by US Cellular Operating Company LLC, for the construction of an unconcealed telecommunications facility (cell phone tower) on parcel 291-0030-0000 (Chula Vista) in Adams County, with the contingencies listed in the City Planner's staff report.

Brian L. Landers, Mayor

Attest:

Nancy R. Holzem, City Clerk/Coordinator

Vote: _____ ayes _____ nays
Date Introduced: August 15, 2016
Date Passed:
Date Published:

SITE PLAN APPLICATION

Wisconsin Dells, Wisconsin

Version: February 27, 2008

General instructions. Complete this application as it applies to your project and submit one copy to the zoning administrator along with the required application fee. Before you formally submit your application and fee, you may submit one copy to the zoning administrator who will ensure it is complete. If you have any questions, don't hesitate to contact the zoning administrator at 608-253-2542. You may obtain a digital copy of this form from the zoning administrator.

- Office Use Only -

Initial application fee	
Receipt number	
Application number	

1. Applicant information

Applicant name United States Cellular Operating Company LLC/ Todd Anderson - Agent

Street address N64W12865 Daylily Court

City Menomonone Falls

State and zip code WI 53851

Daytime telephone number 414-306-2886

Fax number, if any _____

E-mail, if any toddanderson@wirelessplanning.com

2. Subject property information

Street address	<u>4082 River Road</u>	
Parcel number	<u>291-00300-0000 (Lease Area)</u> <u>291-00290-0000 (Easement)</u> <u>291-00400-0010 (Easement)</u>	Note: the parcel number can be found on the tax bill for the property or may be obtained from the City.
Current zoning classification(s)	<u>G-2 Commercial</u>	
Describe the current use	<u>The property is currently a golf course.</u>	

3. Proposed use. Describe the proposed use.

USCCG is proposing to build a 170' menopole on the side of the golf course.

4. Operating conditions. For non-residential uses, describe anticipated operating conditions (hours of operation, conditions that may affect surrounding properties, etc.)

After construction, which should take about 3 weeks, there would be very little traffic to the site. The site would only be visited for maintenance or if there was an outage. I would estimate that the site would be visited monthly.

5. Potential nuisances. Describe any potential nuisances relating to street access, traffic visibility, parking, loading, exterior storage, exterior lighting, vibration, noise, air pollution, odor, electromagnetic radiation, glare and heat, fire and explosion, toxic or noxious materials, waste materials, drainage, and hazardous materials

There should be no nuisances once the site construction is completed. During construction there will be excavators on site and concrete trucks and other equipment required to construct the site and pole.

SITE PLAN APPLICATION

Wisconsin Dells, Wisconsin

Version: February 27, 2008

6. **Review criteria.** In making its decision, the Plan Commission must consider five factors as listed below. Provide a response to each. (See Section 19.393 of the Municipal Code.)

a. **Consistency of the project with the city's comprehensive plan and neighborhood plan or other subarea plan, if any**

The tower was proposed at this location because of the coverage needs of USCOC. The Landowner owns a large amount of the property in the area and this location was selected by USCOC and approved by the Landowner.

b. **Effects of the project on traffic safety and efficiency and pedestrian circulation, both on-site and off-site**

No effect. There will be very little traffic once the site is complete and there will not be any pedestrian traffic in the area except for customers of Cruise Vista.

c. **Effects of the project on the natural environment**

The proposed location will not affect the natural environment. The site is not in wetlands and there will only be minor clear of brush for the proposed site. An erosion control plan will be drawn up to satisfy the City requirements.

d. **Effects of the project on surrounding properties, including operational considerations relating to hours of operation and creation of potential nuisances**

The site is not manned and will only be visited by USCOC employees or contractors for maintenance issues or outages.

e. **The overall appearance of the project**

The proposed monopole is a preferred tower by the City and USCOC is proposing to also put slats in the fence as per the drawings to block the ground equipment. USCOC would also like to be able to run their transmission lines directly from the monopole to the shelter instead of underground from the monopole to the shelter. This will allow their shelter and future collocators to be closer to the monopole and keep a smaller compound, because we would not have to meet the bend radius of the coax.

f. **If the project is a multi-family real estate development (more than 3 dwelling units), does the project meet the following standards:**

1. All setback areas fronting on or visible from an adjacent public street, and all recreation, leisure and open space areas shall be landscaped in accordance with the project plan. Decorative design elements, such as fountains, pools, benches, sculpture, planters, exterior recreational facilities and similar elements may be permitted, providing such elements are incorporated as part of the landscaping plan; and, permanent and automatic irrigation facilities are provided in all planted landscaped area.
2. Minimum open space is thirty (30%) percent of the net area being developed. The net area shall exclude dedicated or proposed-dedicated public rights-of-way.

SITE PLAN APPLICATION
Wisconsin Dells, Wisconsin

Version: February 27, 2008

3. Common open space areas are designed and located within the project to afford use by all residents of the project. These common areas may include, but are not limited to: game courts or rooms, swimming pools, garden roofs, sauna baths, putting greens, or play lots.

4. Active recreation and leisure areas, except those located completely within a structure, used to meet the open space requirement, shall not be located within fifteen (15) feet of any door or window of a dwelling unit.

5. Private waterways, including pools, streams and fountains, may be used to satisfy not more than fifty (50%) percent of the required open space.

6. Trash collection areas shall be provided within two hundred and fifty (250') feet of the units they are designed to serve. Such areas shall be enclosed within a building or screened with masonry walls having a minimum height of five feet. Access gates or doors to any trash area, not enclosed within a building, are to be of opaque material.

7. **Project map.** Attach a scaled map showing the information as listed at the end of this application. Use one of the following page sizes as appropriate: 8½" x 11", 11" x 17", or 24" x 36".

8. Applicant certification

◆ I certify that the application is true as of the date it was submitted to the City for review.

SITE PLAN APPLICATION
Wisconsin Dells, Wisconsin

Version: February 27, 2008

♦ I understand that I may be charged additional fees (above and beyond the initial application fee) consistent with the agreement below.



Applicant Signature

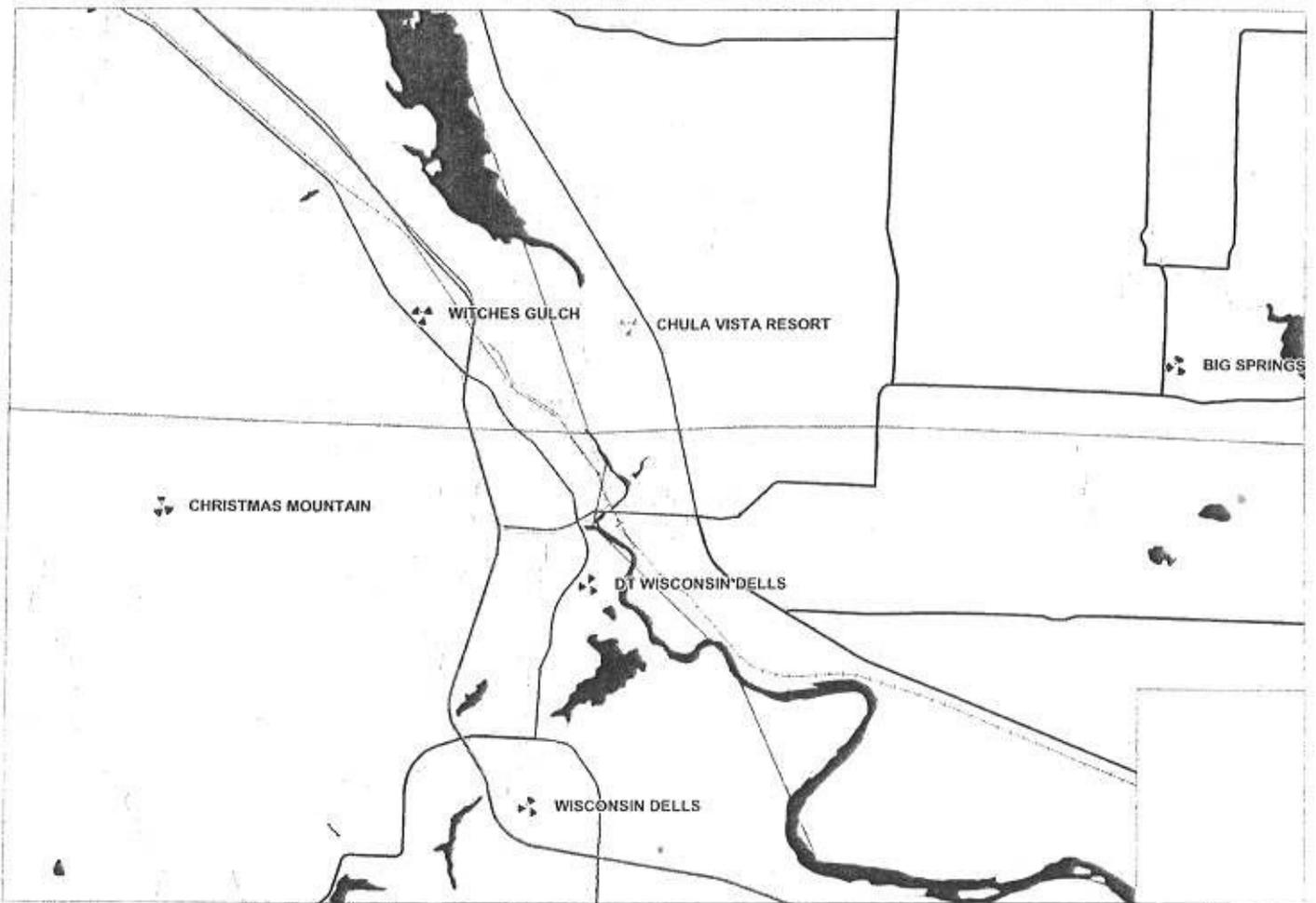
7/12/16

Date

Governing Regulations

The procedures and standards governing this application process are found in Chapter 19, Article 4, Division 6, of the City's Municipal Code.

774518 Chula Vista Resort



Chris Tollaksen

From: Mike Kaminski [mikek@chulavistaresort.com]
Sent: Wednesday, July 27, 2016 12:24 PM
To: Chris Tollaksen; 'Todd Anderson'
Subject: FW: Chula Vista- USCC Proposed Tower off N. River Road- Landowner Permission

Hi Chris. Please accept this email as my evidence that I am working with Wireless Planning to erect a Cell Tower at Chula Vista Golf Resort Inc. Thanks. Mike Kaminski

From: Todd Anderson [mailto:toddanderson@wirelessplanning.com]
Sent: Wednesday, July 27, 2016 11:08 AM
To: mikek@chulavistaresort.com; ctollaksen@dellscitygov.com
Subject: Chula Vista- USCC Proposed Tower off N. River Road- Landowner Permission

Mike,

I am starting the permitting process for the proposed tower on your property and the City has asked me to provide them proof of permission from the Landowner.

If you would please confirm that you are aware of and approve the proposed tower by responding to Chris Tollaksen, the City planner, who is copied on this email, and myself it would be appreciated.

Please let me know if you have any questions.

Thank you,

Todd Anderson
Wireless Planning Consultants
414-308-2886
toddanderson@wirelessplanning.com

RESOLUTION NO. _____

BE IT HEREBY RESOLVED by the City of Wisconsin Dells, Columbia, Sauk, Adams and Juneau Counties, Wisconsin, based upon the recommendation of the City Plan Commission from their August 8, 2016 meeting;

IT APPROVES the Site Plan application submitted by Roger Sarazin in order to construct two additions on to the Dells Animal Hospital at 4135 State Hwy. 13, parcel 291-00521-0000.

Brian L. Landers, Mayor

Attest:

Nancy R. Holzem, City Clerk/Coordinator

Vote: _____ ayes _____ nays
Date Introduced: August 15, 2016
Date Passed:
Date Published:

Site Plan Application

Roger Sarazin – Veterinary Addition

Plan Commission, 8/08/16

The City has received a Site Plan Application from Roger Sarazin to construct two additions to his Wisconsin Dells Veterinary Clinic located at 4135 Hwy 13. This property is located on Tax parcel 291-00521-0000, which is located in the Adams Co. portion of Wis. Dells. This parcel is zoned C-3 Commercial – highway, which permits a Veterinary Clinic by right.

Site Plan approval is required for any addition to a commercial building that is larger than 500 sq ft. One addition is for additional examination rooms and the other is for additional office space.

This addition will require State approved building plans. One additional is 36' x 40' and the other addition is 24'x40'. The existing building is 136'x40'. The parking requirement is 1 stall for every 300 sq ft of gross floor area. With the additions, the gross floor area will be 7840 sq ft, which will require 27 parking stalls. The applicant has indicated that there are currently 18 parking stalls at the site and an additional 10 will be added as part of the new construction, for a total of 28 stalls. There is space for additional parking on site if deemed necessary.

Chris Tollaksen

City of Wisconsin Dells

8/8 9 300.00

SITE PLAN APPLICATION Wisconsin Dells, Wisconsin

Version: February 27, 2008

General instructions. Complete this application as it applies to your project and submit one copy to the zoning administrator along with the required application fee. Before you formally submit your application and fee, you may submit one copy to the zoning administrator who will ensure it is complete. If you have any questions, don't hesitate to contact the zoning administrator at 608-253-2542. You may obtain a digital copy of this form from the zoning administrator.

- Office Use Only -

Initial application fee	300
Receipt number	56650
Application number	SP 14-2016

1. Applicant information

Applicant name Roger Sarazin
 Street address 4135 Hwy 13
 City Wisconsin Dells
 State and zip code WI 53965
 Daytime telephone number 608-253-7361
 Fax number, if any _____
 E-mail, if any doggyplumber@hotmail.com

2. Subject property information

Street address	<u>4135 Hwy 13</u>	
Parcel number	<u>291-00521-0000</u>	Note: the parcel number can be found on the tax bill for the property or may be obtained from the City.
Current zoning classification(s)	<u>C3</u>	
Describe the current use	<u>Small animal veterinarian clinic</u>	

3. Proposed use. Describe the proposed use.

Additions + remodel of existing veterinarian clinic

4. Operating conditions. For non-residential uses, describe anticipated operating conditions (hours of operation, conditions that may affect surrounding properties, etc.)

8-7 Mon + Thur
8-6 Tues, Wed, Fri
8-12 Sat

5. Potential nuisances. Describe any potential nuisances relating to street access, traffic visibility, parking, loading, exterior storage, exterior lighting, vibration, noise, air pollution, odor, electromagnetic radiation, glare and heat, fire and explosion, toxic or noxious materials, waste materials, drainage, and hazardous materials.

SITE PLAN APPLICATION

Wisconsin Dells, Wisconsin

Version: February 27, 2008

3. Common open space areas are designed and located within the project to afford use by all residents of the project. These common areas may include, but are not limited to: game courts or rooms, swimming pools, garden roofs, sauna baths, putting greens, or play lots.

4. Active recreation and leisure areas, except those located completely within a structure, used to meet the open space requirement, shall not be located within fifteen (15) feet of any door or window of a dwelling unit.

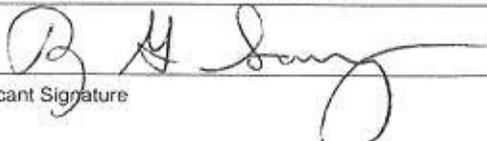
5. Private waterways, including pools, streams and fountains, may be used to satisfy not more than fifty (50%) percent of the required open space.

6. Trash collection areas shall be provided within two hundred and fifty (250') feet of the units they are designed to serve. Such areas shall be enclosed within a building or screened with masonry walls having a minimum height of five feet. Access gates or doors to any trash area, not enclosed within a building, are to be of opaque material.

7. **Project map.** Attach a scaled map showing the information as listed at the end of this application. Use one of the following page sizes as appropriate: 8½" x 11", 11" x 17", or 24" x 36".

8. **Applicant certification**

- ◆ I certify that the application is true as of the date it was submitted to the City for review.
- ◆ I understand that I may be charged additional fees (above and beyond the initial application fee) consistent with the agreement below.

	8/9/16
Applicant Signature	Date

SITE PLAN APPLICATION

Wisconsin Dells, Wisconsin

Version: February 27, 2008

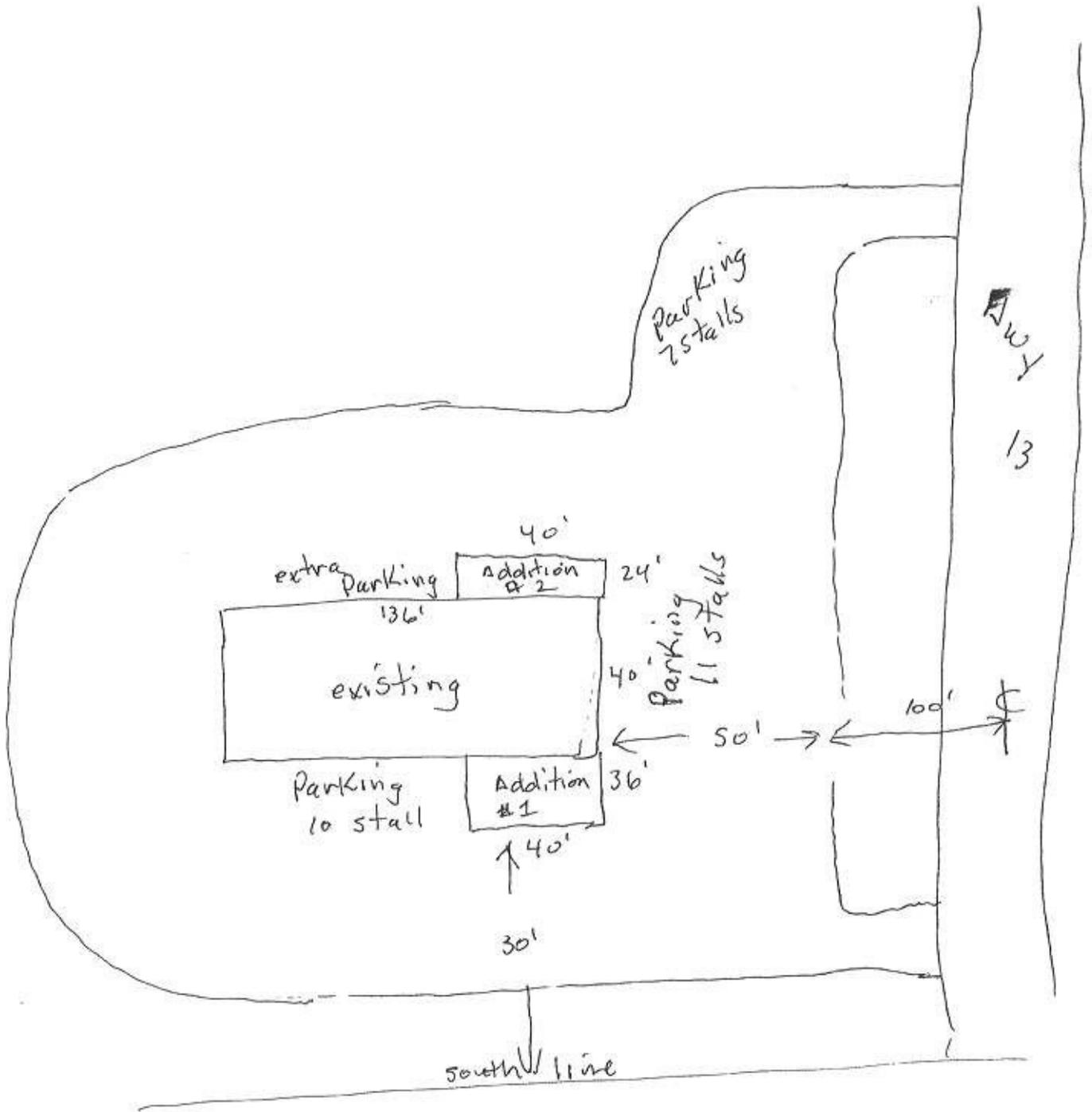
Site Plan Check List

Project Information	Included ? Yes / No
Project name (e.g., business name, subdivision name)	Y / N
Applicant name	Y / N
Preparation date	Y / N
Survey Information	
North arrow and graphic scale	Y / N
Address of subject parcel or legal description	Y / N
Property boundaries	Y / N
Acreage of subject parcel	Y / N
Project Development Information	
Easements/rights-of-ways (location, width, purpose, ownership)	Y / N
Common areas/conservancy areas (location, purpose, ownership)	Y / N
Setting	
Property boundaries within 50' of the subject parcel	Y / N
Land uses within 50' of the subject parcel	Y / N
Zoning district boundaries within 50' of the subject parcel	Y / N
Municipal boundaries within 50' of the subject parcel	Y / N
Site Features (Existing and Proposed)	
Ground contours when any slope exceeds 10 percent	Y / N
Wetlands	Y / N
Woodlands	Y / N
Wildlife habitat, including critical wildlife habitat	Y / N
Environmentally sensitive features	Y / N
Water resources (rivers, ponds, etc.)	Y / N
Floodplain boundaries	Y / N
Environmental and man-made hazards including brownfields, contaminated sites, unstable soils, high groundwater, bedrock, high-pressure natural gas lines, and others as appropriate	Y / N
Fences, buffers, and berms	Y / N
Pervious and impervious surfaces by type	Y / N
Site amenities (benches, fountains, etc.)	Y / N
Existing trees and other prominent vegetation	Y / N
Trees / shrubs to be planted, including a plant list and specs.	Y / N
Trees / shrubs to be retained	Y / N
Outdoor Lighting (Existing and Proposed)	
Location	Y / N
Fixture specifications	Y / N
Utilities (Existing and Proposed)	
Location	Y / N
Type (sewer, telephone, etc.) (buried or overhead, if applicable)	Y / N
Stormwater Facilities (Existing and Proposed)	
Location	Y / N
Specifications for each facility	Y / N
Solid Waste Collection	
Location	Y / N
Enclosed	Y / N

Transportation Facilities (Existing and Proposed)	Included ? Yes / No
Streets	Y / N
Driveways and road access onto public and private roads	Y / N
Sidewalks / trails	Y / N
Clear visibility triangles (location and dimensions)	Y / N
Buildings / Structures (footprint, use, etc.)	
Existing and proposed within subject parcel	Y / N
Existing within 50' of subject parcel	Y / N
Signs (Existing and Proposed)	
Location	Y / N
Specifications for each sign including type, height, dimensions, lighting, and other factors considered during the	Y / N
Parking	
Number of stalls	Y / N
Dimensions of stalls	Y / N

Dells Animal Hospital

existing Building	40x136	5440 sq ft
Addition #1	36x40	1440 sq ft
Addition #2	24x40	960 sq ft
28 parking stall		<u>7840 sq ft</u>



**ORDINANCE NO. A-802
(New Stop Sign)**

The City of Wisconsin Dells, Columbia, Sauk, Adams and Juneau Counties, Wisconsin, does hereby ordain as follows:

SECTION I: PURPOSE

The purpose of this ordinance is to install a stop sign on Wisconsin Avenue at Oak Street.

SECTION II: PROVISION AMENDED

Wisconsin Dells Code sec. 10.21(1)

SECTION III: PROVISION AS AMENDED

Wisconsin Dells Code sec. 10.21(1) is amended as follows:

Stops Signs

<u>On Street</u>	<u>At Street</u>	<u>Direction</u>
Wisconsin Avenue	Oak Street	West

SECTION IV: VALIDITY

Should any section, clause or provision of the ordinance be declared by the courts to be invalid, the same shall not affect the validity of the ordinance as a whole or any part thereof, other than the part so declared to be invalid.

SECTION V: CONFLICTING PROVISIONS REPEALED

All ordinances in conflict with any provisions of this ordinance are hereby repealed.

SECTION VI: EFFECTIVE DATE

This ordinance shall be in force from and after its introduction and publication as provided by statute.

SECTION VII:

This ordinance becomes a part of Wisconsin Dells Code, Chapter 10.

Brian Landers, Mayor

Nancy R. Holzem, City Clerk

CITY OF WISCONSIN DELLS
ORDINANCE No. _____
AMENDING AIRPORT HEIGHT LIMITATION ZONING MAP

WHEREAS, pursuant to Wis. Stat. § 114.136, the owners of the Baraboo-Wisconsin Dells Airport are authorize to protect the aerial approaches within 3 miles of the airport boundary;

WHEREAS, the boundary of the airport has changed as a result of the recent land acquisition, it is necessary to revise the Height Limitation Zoning Map and ordinance regulating the height of structure and trees and the use of property in the vicinity of the Baraboo-Wisconsin Dells Airport;

WHEREAS, Pursuant to Wis. Stat. §114.136, the ordinance amendment must be adopted by all the governing bodies of the joint airport owners;

WHEREAS, on August 15, 2016, the Wisconsin Dells Common Council held a Public Hearing on this ordinance, in compliance with §114.136(2);

NOW, THEREFORE, BE IT RESOLVED BY THE COMMON COUNCIL OF THE CITY OF BARABOO, SAUK COUNTY; **THE COMMON COUNCIL OF THE CITY OF WISCONSIN DELLS, COLUMBIA, SAUK, ADAMS & JUNEAU COUNTIES**; THE VILLAGE BOARD OF THE VILLAGE OF LAKE DELTON, SAUK COUNTY; AND THE TOWN BOARD OF THE TOWN OF DELTON, SAUK COUNTY, THAT WE DO ORDAIN THE FOLLOWING AMENDMENT:

26.02 ZONES. All zones established by this section are as shown on the Map dated ~~February 13, 1998~~ **April 14, 2016** entitled, "Height Limitation Zoning Map, Baraboo-Wisconsin Dells Airport, Sauk County, Wisconsin" which is attached hereto and adopted as part of this ordinance.

This Ordinance shall take effect upon passage of all the owners of the airport and publication as provided by law.

Dated this 15th day of August, 2016.

Brian L. Landers, Mayor

Attest:

Nancy R. Holzem, City Clerk

Public Hearing Held: August 15, 2016
Ordinance Introduced: August 15, 2016
Passed: August 15, 2016
Published: August 20, 2016