

SPECIAL COMMON COUNCIL MEETING NOTICE

NOTICE IS HEREBY GIVEN that a Special Meeting of the Wisconsin Dells Common Council will be held on Thursday, May 26, 2016 at 5:45P.M. at the Municipal Building, 300 La Crosse Street, to consider the following agenda items:

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			
AGENDA ITEMS				
3	APPLICATIONS FOR BARTENDER LICENSES			
4	APPLICATION FOR AND ORIGINAL CLASS B BEER & CLASS B (QUOTA PLUS) LIQUOR LICENSE SUBMITTED BY TRAVEL MART INC, RICHARD CHRISTENSEN AGENT, FOR THE TASTE OF NEW ORLEANS RESTAURANT, 452 BROADWAY, FOR THE LICENSING PERIOD OF MAY 27, 2016 THROUGH JUNE 30, 2016			
5	APPLICATION FOR A TAXICAB SERVICE LICENSE SUBMITTED BY SADAR KHAN FOR RST TAXI FOR THE LICENSING PERIOD THRU MARCH 31, 2017			
RESOLUTIONS				
6	RESOLUTION TO APPROVE A CONDITIONAL USE PERMIT TO KEITH KOEHLER IN ORDER TO ALLOW COMMERCIAL ACTIVITY WITHOUT A PERMANENT STRUCTURE, OUTDOOR COMMERCIAL FOOD & BEVERAGE SERVICE, OUTDOOR VENDOR, AND WALK-UP SERVICE WINDOW AT 720 OAK STREET			
7	RESOLUTION TO APPROVE PARKING STALL RENTAL TO VICKI MARQUARDT			
8	RESOLUTION TO APPROVE PARKING STALL RENTAL TO JEREMY RINGDAHL			
ORDINANCES				
9	SECOND READING OF ORDINANCE TO UPDATE CODE SEC. 16.12 – CLASS B QUOTA PLUS LIQUOR LICENSES			
CLOSING				
10	BUSINESS FOR REFERRAL TO COMMITTEES OR SUBSEQUENT MEETINGS			
11	ADJOURNMENT			
	NANCY R. HOLZEM CITY CLERK/COORDINATOR DISTRIBUTED: 05/24/2016			

PLEASE BE ADVISED: UPON REASONABLE NOTICE THE CITY OF WISCONSIN DELLS WILL FURNISH APPROPRIATE AUXILIARY AIDS AND SERVICES TO AFFORD INDIVIDUALS WITH DISABILITIES AN EQUAL OPPORTUNITY TO PARTICIPATE IN MEETING ACTIVITIES.

- Have you been convicted of any felony or misdemeanor? Yes ___ No
- 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
- Are there currently any charges, federal, state, or local pending against you? Yes ___ No
- 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 SAUK, COLUMBIA, 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: *Jonathan K. Brubaker* Date: 5-17-16

Subscribed and sworn to before me this 17th day
of May, 2016.
Tammy L Miller SAUK, COLUMBIA, ADAMS & JUNEAU COUNTIES
Notary Public
My Commission Expires: 4-14-18



(Continued)

- 1. Have you been convicted of any felony or misdemeanor? Yes ___ No
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Signature of Applicant: Bianna Bygn Date: 5/13/16
Bianna Bygn 5/13/16

Subscribed and sworn to before me this 13th day
of May, 2016.
Tammy L Miller
Notary Public

(SEAL)



My Commission Expires: 4-14-18

(Continued)

- 1. Have you been convicted of any felony or misdemeanor? Yes ___ No
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COUNTIES OF COLUMBIA, SAUK, ADAMS & JUNEAU

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Signature of Applicant Ashley J. Deschamps Date: ~~05/13~~ 05/13/2016

Subscribed and sworn to before me this 13th day of May, 2016.
Tammy L Miller
Notary Public
My Commission Expires: 4-14-18



(Continued)

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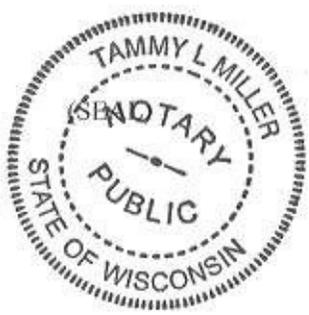
STATE OF WISCONSIN

COUNTIES OF COLUMBIA, SAUK, ADAMS & JUNEAU

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Signature of Applicant: Michael Federer Date: 5-16-16

Subscribed and sworn to before me this 16th day of May, 2016.
Tammy L Miller
Notary Public
My Commission Expires: 4-14-18



Tammy Miller

Michael Fischer

From: Brianna Sanner [bsanner@wdpd.com]
Sent: Monday, May 23, 2016 11:36 AM
To: Tammy Miller
Subject: Re: Bartender license

If he signed off on it then it was checked. He gets them after dispatch.

Dispatcher Brianna Sanner
Wisconsin Dells Police Dept
712 Oak St, Wisconsin Dells, WI 53965
(608) 253-1611 Phone
(608) 254-4375 Fax

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On Mon, May 23, 2016 at 10:34 AM, Tammy Miller <tmiller@dellscitygov.com> wrote:

Hi Brianna,

Jody signed off on this one, but I see there's no PD verification. Can you do this for me? There's a special Council Meeting on Thurs, so would like to include this one.

Thanks! ☺

Tammy

(Continued)

- 1. Have you been convicted of any felony or misdemeanor? Yes ___ No
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Signature of Applicant: *[Handwritten Signature]* Date: 5/17/16

Subscribed and sworn to before me this 17th day of May, 2016.
Tammy R Miller
Notary Public

My Commission Expires: 4-14-18



(Continued)

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<u>Date</u>	<u>Nature of Offense</u>	<u>County</u>	<u>State</u>
2000	Identity Theft	united state	wisconsin.

STATE OF WISCONSIN

COUNTIES OF COLUMBIA, SAUK, ADAMS & JUNEAU

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Signature of Applicant: Tommy Bajinka Date: May 17, 2016

Subscribed and sworn to before me this 17th day
of May, 2016.
[Signature]
Notary Public

My Commission Expires: 10/25/2019



ORIGINAL ALCOHOL BEVERAGE RETAIL LICENSE APPLICATION

Submit to municipal clerk.

For the license period beginning MAY 27 20 16 ;
ending JUNE 20 16

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

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): ▶

TRAVEL MART INC

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

	Title	Name	Home Address	Post Office & Zip Code
President/Member	<u>PRESIDENT</u>	<u>GARY GUSSEL</u>	<u>25 SISKIYOU CIR</u>	<u>MADISON 53719</u>
Vice President/Member	<u>VICE PRESIDENT</u>	<u>DAVID GUSSEL</u>	<u>NE97 1ST RD</u>	<u>BRIGGSVILLE 53920</u>
Secretary/Member	<u>SECRETARY</u>	<u>JOSEPH GUSSEL</u>	<u>421 CHURCH</u>	<u>WIS DELLS 53965</u>
Treasurer/Member	<u>TREASURER</u>	<u>BERNARD E GUSSEL JR</u>	<u>505 CEDAR</u>	<u>WIS DELLS 53965</u>
Agent	<u>AGENT</u>	<u>RICHARD CHRISTENSEN</u>	<u>646 GILLETTE DR</u>	<u>WIS DELLS 53965</u>

Directors/Managers

3. Trade Name ▶ TASTE OF NEW ORLEANS RESTAURANT Business Phone Number _____
4. Address of Premises ▶ 452 BROADWAY 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 _____ and date _____ of registration.
(b) Is applicant corporation/limited liability company a subsidiary of any other corporation or limited liability company? Yes No
(c) Does the corporation, or any officer, director, stockholder or agent or limited liability company, or any member/manager or agent hold any interest in any other alcohol beverage license or permit in Wisconsin? Yes No

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

9. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) DINING ROOM, STORAGE AREA, OUTSIDE PATIO

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? TASTE OF NEW ORLEANS INC. (SAM ROTOLO)

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? Yes No
[phone (608) 266-2776]

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 State of Wisconsin 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 9th day of May, 20 16

Margaret Czuprynska
(Clerk/Notary Public)

My commission expires 9-9-18

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

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

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>05-09-16</u>	Date reported to council/board <u>05-26-16</u>	Date provisional license issued	Signature of Clerk / Deputy Clerk
Date license granted	Date license issued	License number issued	

ITEM 4

Applicant's WI Seller's Permit No. _____ FEIN Number _____	
LICENSE REQUESTED ▶	
TYPE	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$
<input type="checkbox"/> Class C wine	\$
<input type="checkbox"/> Class A liquor	\$
<input type="checkbox"/> Class A liquor (cider only)	\$ N/A
<input checked="" type="checkbox"/> Class B liquor	\$ 10000
<input type="checkbox"/> Reserve Class B liquor	\$
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$
TOTAL FEE	\$ 10000

SCHEDULE FOR APPOINTMENT OF AGENT BY CORPORATION/NONPROFIT ORGANIZATION OR LIMITED LIABILITY COMPANY

Submit to municipal clerk.

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

To the governing body of: Town Village of WISCONSIN DELLS County of COLUMBIA
 City

The undersigned duly authorized officer(s)/members/managers of TRAVEL MART INC
(registered name of corporation/organization or limited liability company)

a corporation/organization or limited liability company making application for an alcohol beverage license for a premises known as
TASTE OF NEW ORLEANS
(trade name)

located at 452 BROADWAY

appoints RICHARD CHRISTENSEN
(name of appointed agent)

646 GILLETTE DRIVE, WISCONSIN DELLS, WI 53965
(home address of appointed agent)

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

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

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

How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin? 47 YEARS

Place of residence last year 646 GILLETTE DRIVE, WISCONSIN DELLS, WI 53965

For: TRAVEL MART INC
(name of corporation/organization/limited liability company)

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

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

ACCEPTANCE BY AGENT

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

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

[Signature] 5/9/16 Agent's age 47
(signature of agent) (date)

646 GILLETTE DRIVE WIS. DELLS WI 53965 Date of birth 9/30/68
(home address of agent)

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

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

Approved on _____ by _____ Title _____
(date) (signature of proper local official) (town chair, village president, police chief)

CITY OF WISCONSIN DELLS
LICENSE APPLICATION FOR:
TAXICAB SERVICE LICENSE

Fee: \$150

(Plus \$50 for first vehicle, \$25 each additional vehicle)

ITEM ⁵
COPY

New Renewal

Date Submitted: 5-18-16 Amount Paid: \$ 150.⁰⁰ Receipt No. 55272

Name of Applicant (Last, First, MI): KHAN SARDAR ABDUL SAMI

Address of Applicant: 822 Oak St Wisconsin Dells 53965

Date of Birth: 11-18-1977 Daytime Telephone Number: 507-254-8919

Applicant's Drivers License Number: Q827151313017 State: MO

Business Name: RST TAXI Telephone No. _____

Business Address: 822 - Oak St Wisconsin Dells, WI 53965

Proposed hours of Operation: 24/7 (During Summer)

Name of Auto Insurance Carrier: (Attach Proof of Coverage): _____

Proposed Rate Schedule: Before Midnight \$2 Per Person + \$2 Per Mile.

After Midnight \$3 Per Person + \$3 Per Mile.

\$10.00 Minimum Charge at all times.

I hereby certify that the information provided on this application is correct. I understand that failure to provide all required information or falsification of any information shall be grounds for denial or revocation of my license. I acknowledge that I have read Wisconsin Dells Taxicab Ordinance 16.21 and am familiar with all appropriate laws and ordinances pertaining to vehicles for hire. I understand that the Police Department will conduct a criminal history and driving record check and those results may be considered in the licensing process.

Abdul Sami Khan

Signature of Applicant

05-18-16

Date

License subject to compliance with Wisconsin Dells Code Section 16.21.

Background check completed. _____

License Approved: _____ License Valid from _____, 20____ through March 31, 20____

Conditions (if any): _____

Date Denied: _____ Reason(s): _____



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

12/8/2015

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER P.A. Post Agency, LLC One International Blvd. Suite 405 Mahwah NJ 07495-0025 INSURED RST Taxi, LLC. 25 9-1/2 St. SE Rochester MN 55904	CONTACT NAME: Donika Lamcaj PHONE (A/C, No, Ext): (201) 252-3010 FAX (A/C, No): (201) 252-3011 E-MAIL ADDRESS: dlamcaj@postfinancial.com
	INSURER(S) AFFORDING COVERAGE NAIC # INSURER A: NY Marine & Gen Ins Co. INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:

COVERAGES

CERTIFICATE NUMBER: 15-16

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:					EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COM/POP AGG \$ \$
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS <input checked="" type="checkbox"/> 10		A02015TLP03549	12/21/2015	12/21/2016	COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ 300,000 BODILY INJURY (Per accident) \$ 500,000 PROPERTY DAMAGE (Per accident) \$ 50,000 Underinsured motorist BI split \$ 25,000
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$					EACH OCCURRENCE \$ AGGREGATE \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below N/A					PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Certificate holder is included as additional insured, but only as respects to the operations of the named insured.

CERTIFICATE HOLDER**CANCELLATION**

CITY OF ROCHESTER
CITY CLERK
ROOM 135
201 4TH ST. SE
ROCHESTER, MN 55904

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Bradley Post/DL

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ITEM 6

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 May 26, 2016 meeting;

To APPROVE a Conditional Use Permit to Keith Koehler in order to allow Commercial Activity without a Permanent Structure, Outdoor Commercial Food & Beverage Service, Outdoor Vendor and Walk-up Service Window at 720 Oak Street, with the contingencies listed in the City Planner's staff report.

Brian L. Landers, Mayor

Nancy R. Holzem, City Clerk

Vote: _____ ayes _____ nays
Date Introduced: May 26, 2016
Date Passed:
Date Published:

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	55218
Application number	

1. Applicant information

Applicant name KEITH KOEHLER

Street address 237 CAPITAL ST

City WI DELLS

State and zip code WI 53965

Daytime telephone number 608 434 0888

Fax number, if any _____

E-mail, if any KKOEHLER1@CHARTER.NET

2. Subject property information

Street address	<u>720 OAK ST</u>	
Parcel number	<u>73</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)		
Describe the current use	<u>LOT WITH CONCRETE SLAB LEFT FROM DEMO</u>	

3. Proposed use. Describe the proposed use.

ASA UP TO TWO FOOD TRUCK TRAILERS TO SITE

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

11am - 11pm WILL NOT AFFECT SURROUNDING PROPERTIES

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.

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

PART OF THE PROPOSED PLAN FOR FUTURE DEVELOPMENT OF PROPERTY

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

X

- c. The suitability of the subject property for the proposed use

PERFECT

- d. Effects of the proposed use on the natural environment

X

- e. Effects of the proposed use on surrounding properties, including operational considerations relating to hours of operation and creation of potential nuisances

X

- f. Effects of the proposed use on the normal and orderly development and improvement of the surrounding property for uses permitted in the district

- g. Effects of the proposed use on the city's financial ability to provide public services

720 Oak St

Conditional Use Permit – Commercial use without a permanent structure, Outdoor commercial food and beverage service, Outdoor vender, and Walk up service window

Staff Report for Plan Commission, 05/26/16

The Planning & Zoning office has received a Conditional Use Permit application from Keith Koehler to allow two (2) food trucks on his property at 720 Oak St, tax parcel 73, which is in the C-2 Commercial-downtown Zoning district. This property is adjacent to the applicant's permanent business of The Keg and The Patio. The applicant purchased the property and removed the structure that was on the property. On April 27 the applicant received approval from the Design Review Committee to fence in a portion of the new vacant property and install additional outdoor seating for the patrons of The Keg and The Patio. Subsequently, Mr. Koehler secured interest from Jose's Mexican restaurant to bring a food trailer onto Mr. Koehler's property, next to the new outdoor seating. A food truck or trailer requires a "Mobile Restaurant" license from the Wisconsin Department of Health Services.

The City Zoning Code requires any Mobile Restaurant to obtain a Conditional Use permit per Code section 19.675, which requires all Commercial activity to take place within a permanent structure with a washroom.

Mr. Koehler also owns a food franchise, Chuckies, that has food trucks. A Chuckies food truck may also be also located on this property. The site map provided shows the location of these facilities.

The Keg and The Patio have 9 bathrooms which is adequate for servicing 360 people. There is currently seating for 146 people, and the new outdoor seating provides an additional 60 seats, for a total of 206 seats.

The new outdoor seating area will have a 36" gate for emergency exiting directly from the outdoor area to the sidewalk, which is adequate for at least 180 people. The new outdoor seating area will have open access to The Patio area through the existing exterior deck. This deck exits to a parking area in the rear of the building that connects on grade directly to the alley. The 10 ft rear exit has an egress capacity of 600 people. There appears to be ample exiting from the new, fenced in outdoor seating area, without patrons having to enter to existing interior spaces.

There is not a parking requirement for the C-2 Zoning District. However, there are two (2) City parking lots in the immediate vicinity of this property. The Oak St. parking lot is heavily used, but the Elm St. parking lot, just across the alley from the Keg is underutilized. There is another underutilized City parking lot immediately opposite Elm St.

It appears that the main concern for this request is the use of a Mobile Restaurant in the downtown area. The City has historically been resistant to allowing Mobile Restaurants in the downtown area. One of the reasons Mobile Restaurant have been discouraged is the low investment required to open and operate a Mobile Restaurant. This is seen as unfair to business owners that operate out of permanent structures, as a permanent structure requires a much more significant investment on City property and result in significant property taxes that are utilized to provide all City services. As a non-permanent structure, a Mobile Restaurant would not pay real property taxes, and it is not clear they would pay their personal property taxes to the City of Wis. Dells. Due to the normally transient nature of Mobile Restaurant, there is also concern they would not pay their Sales Tax and Premier Resort Tax to the City of Wisconsin Dells. These tax concerns could be addressed by charging an annual fee as a Payment In Lieu Of Taxes, and making any approval contingent on the operator of the Mobile Restaurant providing clear documentation of their payment of PRT taxes to the City.

However, ensuring comparable tax payments still does not encourage the business and property owner to make a more significant investment in the City to grow their business. Another concern with Mobile

Restaurants is that the limited investment required to open such a business makes it less likely that the operator will continue to make an adequate investment in time and money to properly maintain the trailer. As such, the trailer could become a form of blight to the downtown. There is also a concern that the limited investment in Mobile Restaurant in the first place causes them to be a less desirable business for the City. This department feels that poor management and maintenance of any business or property can cause it to become blight to the downtown. As Mobile Restaurants require a Conditional Use Permit to operate in the City, any approval can carry the condition that the City may revoke the permit at any time, at its sole discretion, if the City feels the maintenance and management of the trailer to be substandard.

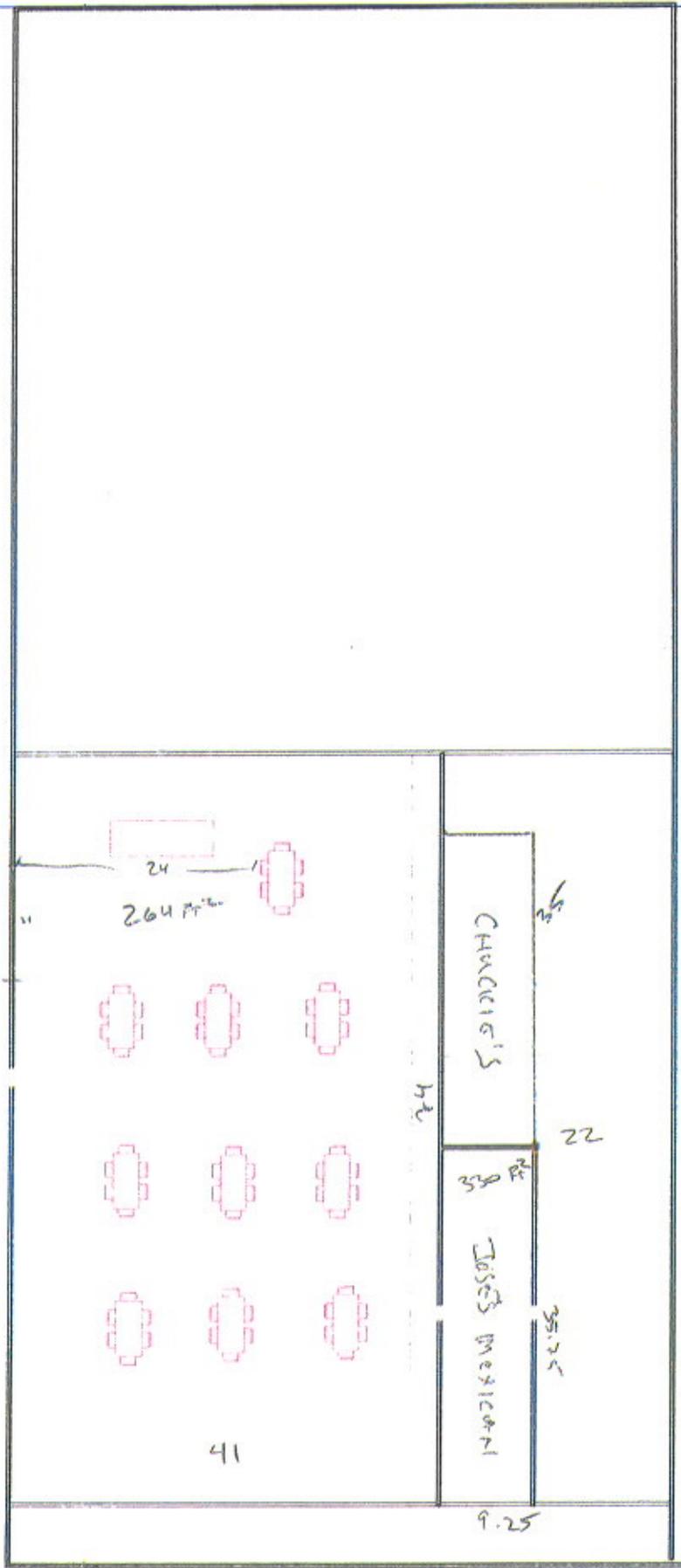
Even given the measures the City can take to address the concerns with Mobile Restaurant operating in the downtown, the problem of setting a precedent by allowing this Mobile Restaurant in the downtown zone remains. This department believes that if clear standards are developed for Mobile Restaurant; the City can maintain the right to deny future requests. This department feels that there are some properties specific to this request that can be identified and use to evaluate future requests to operate a Mobile restaurant in the downtown zone. First, this Mobile Restaurant exists within and existing permanent business, which is itself a restaurant. It would seem that the business that would be most impacted by the Mobile Restaurant would be The Keg and Patio. Customers that want to get to the Mobile Restaurant will have to first go into The Patio. The Keg and Patio will have to give up some of their new outdoor seating to accommodate customers to the Mobile Restaurant. This makes it seem to this department like the Mobile Restaurant is within and an extension of the existing permanent business, and it is not a stand along business without a permanent structure. Second, the applicant has stated that this arrangement is temporary and that a more permanent investment and development will be made on this property next year. Third, this project is not located directly on Broadway. These three aspects could lay the groundwork for evaluating future requests, such as: A Mobile Restaurant in the downtown zone must be accessed through a permanent structure; a location in the downtown zone can operate a mobile restaurant for a maximum of two (2) years; a mobile restaurant may not be located directly on Broadway.

It should be noted that the DRC approval of this project was only for 1 year. The DRC did not think Mobile Restaurants were a desirable long term option. The DRC also expressed concern with setting a precedent that would allow food trucks on Broadway. The DRC did not want to see different food trucks in and out at this location. The DRC felt it was important the food trucks paid taxes comparable to what other businesses pay. Based on the 2015 City and School taxes collected on this property (a rate of 0.01581524), if the Mobile Restaurant is valued at \$20,000 the taxes would be \$316.

Suggested Conditional to any approval:

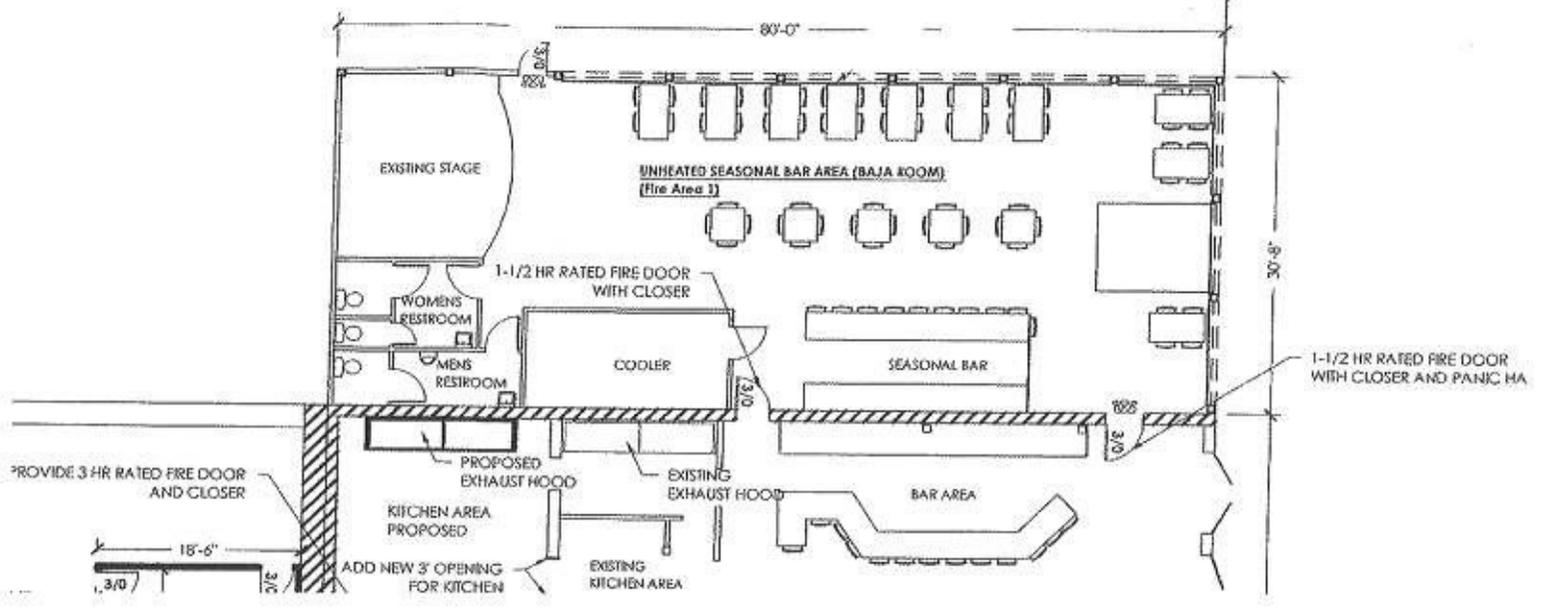
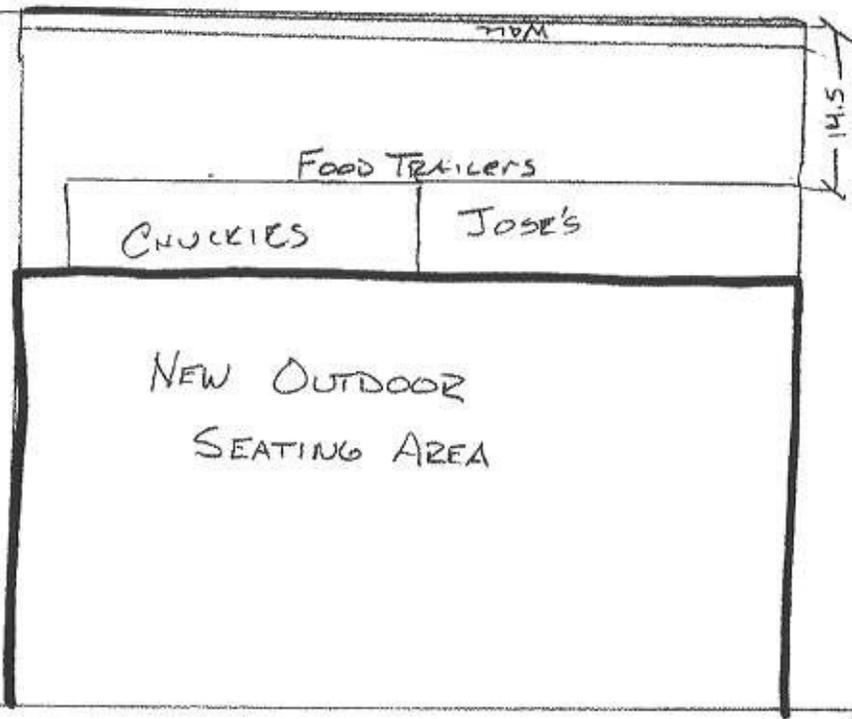
- 1) All associated licenses are obtained and in good standing.
- 2) CUP is only issued for one year. The expectation is that the applicant will be moving forward with a larger development of this property next year.
- 3) This permit is revocable if the Mobile Restaurants are not operated and maintained to a high standard as determined by the City.
- 4) The Mobile Restaurant pays an annual fee as determined by the City.

Prepared by:
Chris Tollaksen

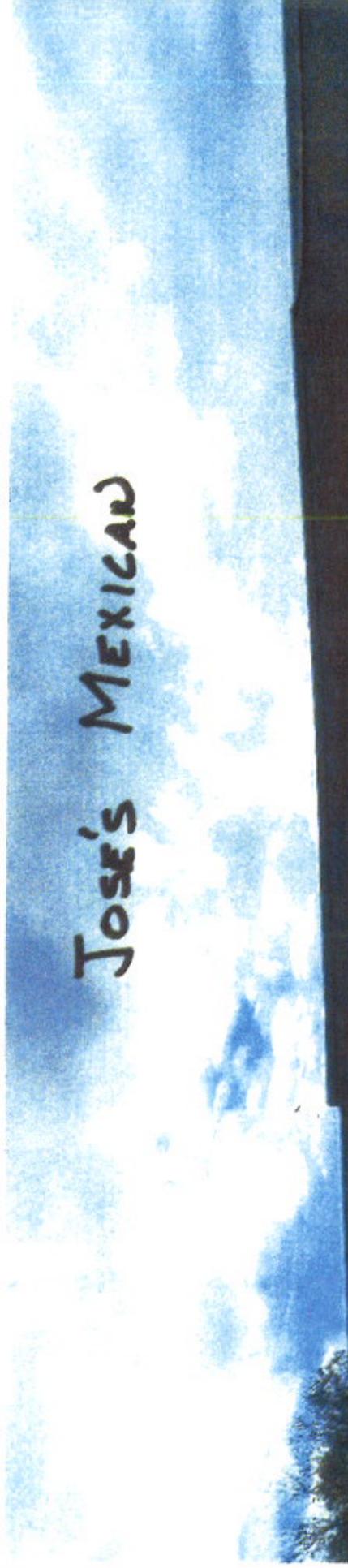


SCALE 60" = 2.64"

PROPERTY LINE



JOSE'S MEXICAN



**IOWA
BREADED**



**PORK
TENDERLOIN**

**BREADED PORK
TENDERLOIN**
Dewitt, IA

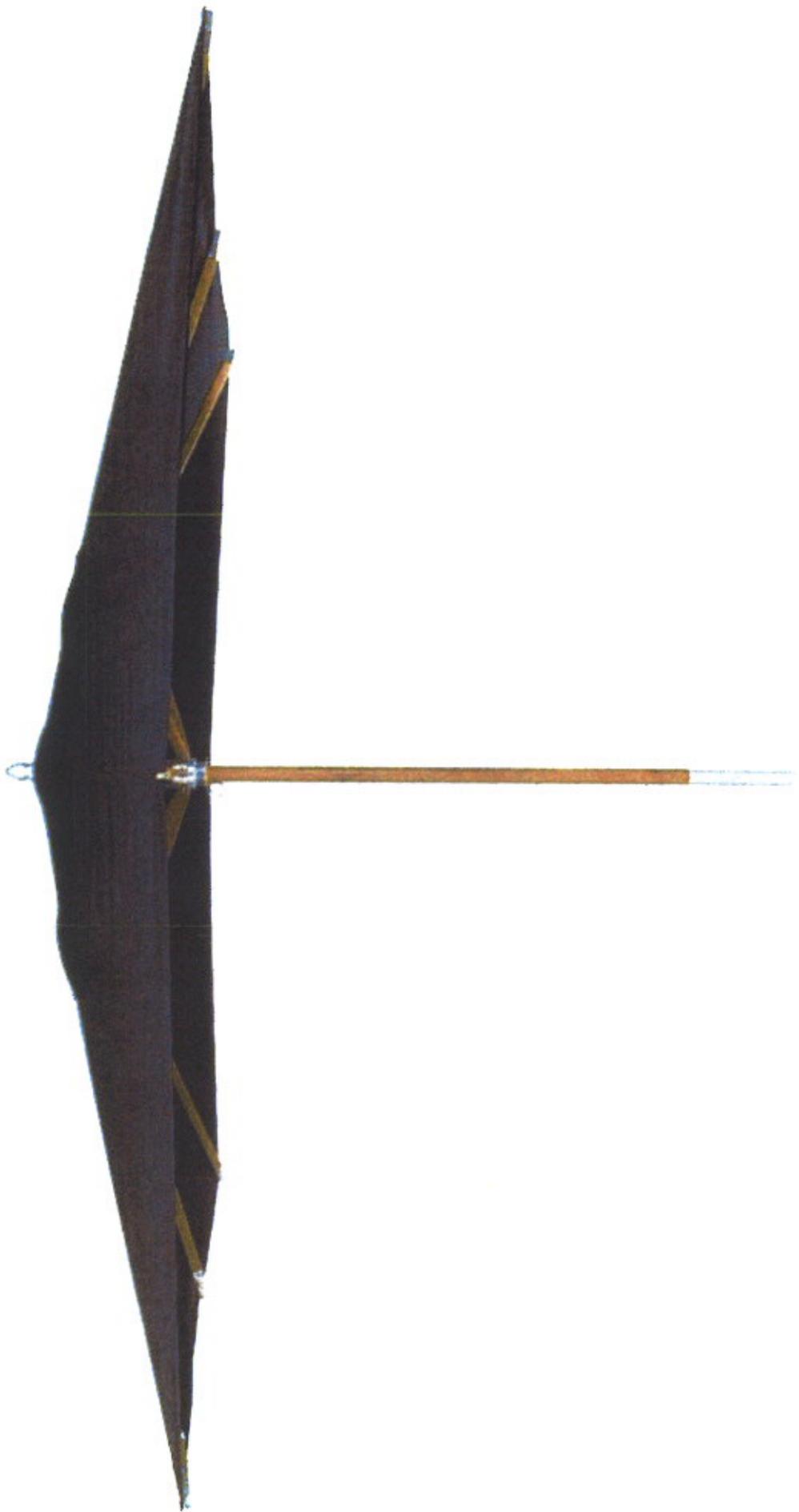


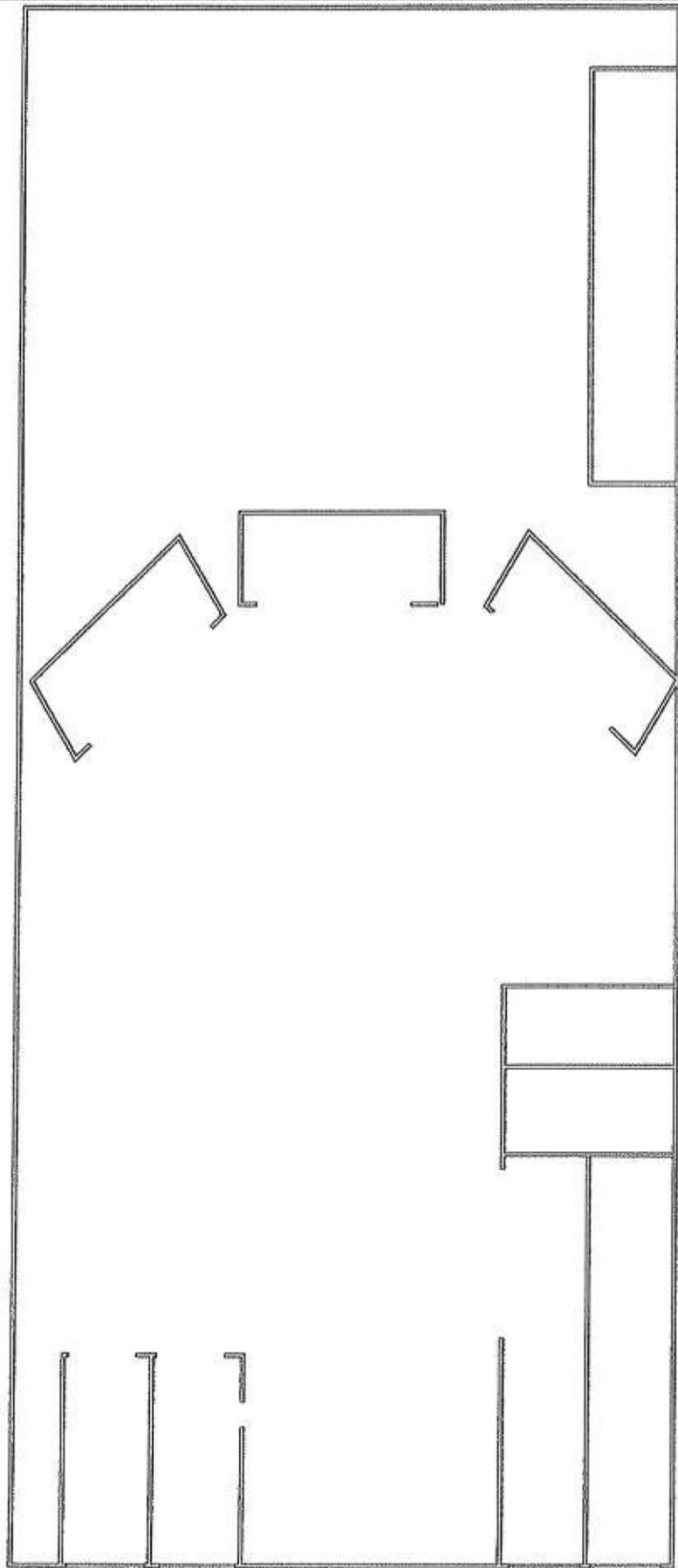
...ndow!



**CUT FRESH
HAND
BREADED**







OAK ST

PRELIMINARY PLANS

DESIGN REVIEW COMMITTEE
CITY OF WISCONSIN DELLS
MUNICIPAL BUILDING-300 LACROSSE STREET
April 27, 2016

Aldersperson Mor called the meeting to order at 10:00 AM. Notice of the meeting was provided to the Dells Events, WNNO/WDLS Radio, and posted in accordance with State Statutes

1. Present:Ald. Mor, Dan Gavinski, Maria Rosholt, Jacqueline Morse Absent: Ben Borchert

Others: City Planner/Zoning Administrator Chris Tollaksen, Juli Mor, Ald. Brian Holzem, Mark Sweet, John Langhans of MSA, Aaron Tollaksen, Kyler Royston, Fire Inspector Jerry Wolfram, Keith Koehler and Ed Legge from the *Dells Events*.

2. Motion by Morse, seconded by Gavinski approve the minutes of the April 13, 2016 meeting. Motion carried.

3. Two signs presented by Spring Brook Resort. Motion Gavinski, second by Rosholt, with Mor abstaining. Sign was approved.

Two signs presented for approval by LEAF (Little Eagle Arts Foundation). Motion by Gavinski, second by Morse to approve. Motion carried.

Belgiis Waffle Bar presented a sandwich board for approval. Motion by Gavinski to approve with the reminder that it should be right up against the building, second by Rosholt. Motion carried.

Signs presented by Wisconsin Deer Park. Motion by Gavinski, second by Rosholt to approve. Motion carried.

Sign presented by JustAGame with a Wilderness logo/sponsorship that is already up on the building. Mor commented that the presence of the logo makes it an off-premise sign which is no longer allowed under the current code. Royston said that was not the main idea and was not meant in that fashion but he understands it is border line. Attorney Joe Hasler was consulted and he said under the current standards it is an off-premise sign. Royston asked to table so he can discuss with Attorney Hasler himself. Motion to table by Gavinski, second by Rosholt. Sign will be tabled until further notice.

Gavinski presented a Boat information sign to replace a Great Harvest one. Motion by Rosholt, second by Morse, Gavinski abstains to replace the Great Harvest sign with the boat info sign. Motion carried.

4. Question was raised by Tollaksen, when we get these applications for outdoor seating on private property or off Broadway, how rigid are we going to be with the BID standards, ie. block colors, seating choices, etc.

5. Kohler from The Keg/Patio presented red picnic tables, pallet fencing and overall plans for his new area next to the Keg. Discussion ensued on how to get a uniform look with the rest of the Bid district. John from MSA said the block coloring is not just for uniformity but is also to help with way finding. This is private property off Broadway so there is flexibility. Koehler said they will be using sails instead of umbrellas and it was asked if they could be the Tuscan Orange block color. Morse suggested a neutral palette for the picnic tables such as titanium, gray, dark brown. Mor would like the BID to weigh in on how to enforce the color standards and when. John said there can be many shades of the suggested color also. Wolfram brought up the safety issue for these outdoor seating plans. He would like to be informed so that number of bathrooms, total number of people allowed, and fencing for instance is discussed prior to approval. He would like occupancy signs (once approved) to be put up at the venue. Mor said the site plan needs to be in more detail. This kind of oversight used to happen at the Planning Commission level. Chris needs to refer safety concerns to KFD such as egress, occupancy, etc. Motion by Morse, second by Rosholt to approve the picnic tables in a neutral color such as titanium and approve the pallet fencing with a stain color from his sign. Motion carried. He will come back with colors for his sails.

6. Sidewalk/outdoor café furnishings: John showed examples of lower-priced furnishings. He did not find another table that would be suitable. He had 2 different titanium chair alternatives. The BID did not choose. They would like to view and sit on them first. It will need to be discussed who will

purchase the furniture in the café zone. Chris T will clarify this with BID. John says there is a furnishing budget included that was passed. Then we could have use agreements with businesses. Holzem believes the businesses must have something invested. Question was raised do the businesses rent or purchase from the city? This discussion is ongoing and the DRC needs some clarification from the BID. Morse says private property does not have to use the actual furnishings but we would like it to tie in with the city's furnishings.

7. Items for referral: Furnishings, Café zone layouts. Wolfram asked Chris what the time table was for interior signs to uphold the new sign standards ie. blocking the entire window with signs. Chris said approximately one year roll-out, with new info being sent out and then notices sent.
8. Next meeting: May 18 10 am, unless Chris gets too many sign requests.
9. Motion by Morse, second by Rosholt to adjourn. Motion carried and the meeting was adjourned at 10:57 am.

Juli Mor

CHANGED TO GRAY
PER DRC





GRASS

FENCE
2 TALL

ALL
TIME
SPACE

GRAVE

FENCE
SINGLE

CONCRETE

WOOD
PATIO

2

FENCE

FENCE
SINGLE

WINE WALK

OAK

SP

Chris Tollaksen

From: kkoehler1@charter.net
Date: Monday, April 18, 2016 9:28 PM
To: Chris Tollaksen
Subject: RE: Meeting
Attachments: Painted-Wooden-Picnic-Table.jpg

We would like to ad 10 - 8 seat picnic tables. Color red. (picture attached). Sails will be designed and submitted after fence & picnic tables are approved. If we get something done prior we will get it to you for this meeting. We would like to ad outdoor string lighting also.

We have 9 total toilet/urinals. We currently have 146 seats between Keg & Patio.

Thanks,

From: "Chris Tollaksen"
To: "Keith Koehler"
Cc:
Sent: Mon, 18 Apr 2016 19:54:29 +0000
Subject: RE: Meeting

I need a picture of the tables and chairs and a layout of the how many will be put out. I will also need a picture of the sails and where they will be going.

Plus, I need verify the occupancy with the added seating. Mostly this is based on the number of bathrooms (1 toilet/40 people). So I need to have the number of toilets (and/or urinals) and the total maximum occupancy with the outdoor seating.

Chris Tollaksen
City Planner/Zoning Administrator
City of Wis. Dells
(608) 253-2542
Fax (608) 254-8904

-Chris

From: Keith Koehler [mailto:kkoehler1@charter.net]
Sent: Monday, April 18, 2016 11:42 AM
To: Chris Tollaksen
Subject: Meeting

Attached is a picture and a sketch of fencing. Let me know what else you may need.

 Thanks,

Keith Koehler

ITEM 7

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 Parking Board from their May 26, 2016 meeting;

IT APPROVES the rental of parking stall(s) to the Vicki Marquardt in the following location _____ for a annual cost of \$ _____ .

Brian L. Landers, Mayor

Nancy R. Holzem, City Clerk

Vote: _____ ayes _____ nays
Date Introduced: May 26, 2016
Date Passed:
Date Published:

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 Parking Board from their May 26, 2016 meeting;

IT APPROVES the rental of parking stall(s) to the Jeremy Ringdahl in the following location _____ for a annual cost of \$ _____ .

Brian L. Landers, Mayor

Nancy R. Holzem, City Clerk

Vote: _____ ayes _____ nays
Date Introduced: May 26, 2016
Date Passed:
Date Published:

ORDINANCE NO. _____
(Quota Plus "Class B" Liquor License)

ITEM. 9

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

SECTION I: PURPOSE

2015 Wisconsin Act 286, effective June 1, 2016, clarifies for the purpose of restaurant exception to the quota system for "Class B" licenses, the establishment's 300-person seating capacity must be interior and permanent. This Ordinance adds that language to the city code as well as the longstanding statutory hotel exception.

SECTION II: PROVISION REPEALED AND RECREATED

Wisconsin Dells Code Sec. 16.12(16) is repealed and recreated.

SECTION III: PROVISION AS REPEALED AND RECREATED

16.12(16) "Class B" Quota Plus Exceptions

Pursuant to Wis. Stat. Sec. 125(51)(4)(v) and notwithstanding the City's "Class B" quota, the City may issue a license for the following:

- (a) A full-service restaurant that has an interior, permanent seating capacity of 300 or more persons.
- (b) A hotel that has 50 or more rooms of sleeping accommodations that has either an attached restaurant with a seating capacity of 150 or more persons or a banquet room in which banquets are attended by 400 or more person may be held.

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 and as provided by statute.

SECTION VII: PART OF CODE

This ordinance becomes a part of Wisconsin Dells Code, Chapter 16.