



License Committee

335 South Broadway

De Pere, WI 54115

<http://www.de-pere.org>

Regular Meeting

Agenda

Tuesday, September 1, 2015

6:15 PM

De Pere City Hall Riverview Room

Pursuant to Wisconsin Statutes 19.84, Notice is hereby given to the public that a meeting of the **License Committee** of the City of De Pere will be held on **September 1, 2015** at **6:15 PM** in the **De Pere City Hall Riverview Room, 335 S. Broadway, De Pere, WI 54115**.

Call to Order

1. Roll Call
2. Approval of the Minutes of the August 18, 2015 License Committee Meeting.
3. Public Comment Period and other Announcements.
4. Operator License Applications.*
5. Application for a Temporary Premise Description Change for the Drift Inn on September 19-20, 2015 for the Jerry Parins Cruise for Cancer.*
6. Adjournment.

Respectfully Submitted,

Shana Defnet, Clerk - Treasurer

Any person wishing to attend this meeting who, because of disability, requires special accommodations should contact the Clerk-Treasurer's office at 339-4050 by Noon, the previous day so that arrangements can be made.

Mayor
Alderspersons
Department Heads
TV, Newspapers & Radio Stations
Kress Family Library
De Pere Chamber of Commerce
CARTIER, MICHELLE R.
DEICHER, CRYSTAL C.
HEMMERICH, ALEXIS R.
HENSE II, THOMAS F.
LEWIS, MAUREEN T.
PHILLIPS, BRYANT J.
ROBB, ADAM L.
KOZLOVSKY, GAIL

City of De Pere, Wisconsin



Request For License Committee Action

MEETING DATE: September 1, 2015

DEPARTMENT: City Clerk-Treasurer

FROM: Shana Defnet

SUBJECT: Approval of the Minutes of the August 18, 2015 License Committee Meeting.

ATTACHMENTS:

- 8-18-2015 License Committee Minutes (DOC)



License Committee

335 South Broadway

De Pere, WI 54115

<http://www.de-pere.org>

Regular Meeting

Draft Minutes

Tuesday, August 18, 2015

7:00 PM

De Pere City Hall Riverview Room

1. Call to Order: The meeting was called to order at 7:00 PM by Alderperson Bauer.

Attendee Name	Title	Status	Arrived
Kevin Bauer	Aldersperson	Present	
James Boyd	Aldersperson	Present	
Dean Raasch	Aldersperson	Present	

2. Approval of the Minutes of the August 4, 2015 License Committee Meeting.

RESULT: ADOPTED [UNANIMOUS]
MOVER: Dean Raasch, Aldersperson
SECONDER: James Boyd, Aldersperson
AYES: Kevin Bauer, James Boyd, Dean Raasch

3. Application for a Temporary Class "B" Retailer's License for Hmong Wisconsin Labor Day Sports and Music Festival September 5-6, 2015 submitted by United States Special Guerilla Unit, Inc.

RESULT: ADOPTED [UNANIMOUS]
MOVER: Dean Raasch, Aldersperson
SECONDER: James Boyd, Aldersperson
AYES: Kevin Bauer, James Boyd, Dean Raasch

4. Application for a Temporary Class "B" Retailer's License for EastWest Music Fest Closing Showcase on August 30, 2015 submitted by Downtown De Pere, Inc. d/b/a Definitely De Pere.

RESULT: ADOPTED [UNANIMOUS]
MOVER: Dean Raasch, Aldersperson
SECONDER: James Boyd, Aldersperson
AYES: Kevin Bauer, James Boyd, Dean Raasch

5. Operator License Applications.

CITY OF DE PERE -August 18, 2015					
ITEM	NAME	ADDRESS	CITY	ST	ZIP
Previously Tabled Operator License Applications					
1	DE BEUKELAR, AMANDA L.	1001 GRAY ST.	GREEN BAY	WI	54303
Temporary Operator License Applications					
1	LEE, LUE	118 S. JOSEPH ST., #4	APPLETON	WI	54915
2	LEE, MAIL.	118 S. JOSEPH ST., #4	APPLETON	WI	54915
3	WATSON, ALLYSON G.	314 SEMINOLE LN.	GREEN BAY	WI	54313
4	XIONG, XAISAWAN	2216 VIENNA TER.	EAU CLAIRE	WI	54703
New Operator License Applications for the 2014-2016 Licensing Period					
1	BAUER, KEVIN A.	842 WESTWOOD DR.	DE PERE	WI	54115
2	BRUINOOG, JONATHAN L.	212 BELLEVUE ST.	GREEN BAY	WI	54302
3	CHARLIER-YALE, LAURA A.	1607 SUBURBAN DR.	DE PERE	WI	54115
4	DOXTATOR, SUSANNA L.	2650 TROJAN DR., #812	GREEN BAY	WI	54304
5	ELWELL, DANIELLE D.	N990 SLEEPY HOLLOW RD.	DENMARK	WI	54208
6	JENKINS, JON F.	146 LAZARRE AVE.	GREEN BAY	WI	54301
7	KUDICK, AMY L.	E788 LANGES CORNERS RD.	DENMARK	WI	54208
8	LAMORE, BREEANNA D.	608 MOLLIES WAY	DE PERE	WI	54115
9	OTHON, MELANIE N.	436 COLLEGE AVE.	DE PERE	WI	54115
10	PEVEZ, ELMER A.	510 N. 10TH ST., APT. 9	DE PERE	WI	54115
11	PHILLIPS, JENNIFER L.	123 1/2 S. BROADWAY ST.	DE PERE	WI	54115
12	PUTT, DESIRAE J.	1310 SCHEURING RD., APT. 3	DE PERE	WI	54115
13	SWANSON, JOSHUA D.	569 EDGEWOOD DR.	GREEN BAY	WI	54302
14	VIQUEZ, JUAN P.	N5641 COUNTY RD. E	DE PERE	WI	54115
15	WEBER, KATRINA S.	413 N. LINCOLN ST.	ELKHORN	WI	53121

Previously Tabled Operator License Application #1 for Amanda L De Beukelar was presented. Alderperson Bauer moved, seconded by Alderperson Raasch to open the meeting. Upon vote, motion carried unanimously. The applicant answered the Committee's questions. Alderperson Bauer moved, seconded by Alderperson Raasch to close the meeting. Upon vote, motion carried unanimously. Alderperson Bauer moved, seconded by Alderperson Boyd to approve the application. Upon vote, motion carried unanimously.

Temporary Operator License Applications #1-4 were presented. Alderperson Bauer moved, seconded by Alderperson Raasch to approve the applications. Upon vote, motion carried unanimously.

Operator License Application #11 for Jennifer L. Phillips was presented. Alderperson Bauer moved, seconded by Alderperson Raasch to open the meeting. Upon vote, motion carried unanimously. The applicant answered the Committee's questions. Alderperson Bauer moved, seconded by Alderperson Raasch to close the meeting. Upon vote, motion carried unanimously.

Alderperson Bauer moved, seconded by Alderperson Raasch to approve Operator License Applications #2-15. Upon vote, motion carried unanimously.

Alderperson Boyd moved, seconded by Alderperson Raasch to approve Operator License Application #1. Upon vote, motion carried 2-0 with Alderperson Bauer abstaining.

6. Application for a Temporary Premise Description Change for EastWest Music Closing Showcase on August 30, submitted by Gallagher's Pizza, Inc.*

RESULT:	ADOPTED [UNANIMOUS]
MOVER:	Dean Raasch, Alderperson
SECONDER:	James Boyd, Alderperson
AYES:	Kevin Bauer, James Boyd, Dean Raasch

7. Public Comment Period and other Announcements. None.
8. Adjournment. Alderperson Bauer moved, seconded by Alderperson Raasch to adjourn the meeting at 7:10 p.m. Upon vote, motion carried unanimously.

Respectfully submitted,

Shana Defnet, Clerk - Treasurer

City of De Pere, Wisconsin



Request For License Committee Action

MEETING DATE: September 1, 2015
DEPARTMENT: City Clerk-Treasurer
FROM: Vicki Scray
SUBJECT: Operator License Applications.*

ATTACHMENTS:

- 09-01-15 OPERATOR LICENSE LIST.PDF (PDF)

CITY OF DE PERE - September 1, 2015

ITEM	NAME	ADDRESS	CITY	ST	ZIP
New Operator License Applications for the 2014-2016 Licensing Period					
1	CARTIER, MICHELLE R.	1005 CORAL ST., #2	DE PERE	WI	54115
2	DEICHER, CRYSTAL C.	2246 IMPERIAL LN.	GREEN BAY	WI	54302
3	HEMMERICH, ALEXIS R.	818 OREGON ST.	GREEN BAY	WI	54303
4	HENSE II, THOMAS F.	512 N. TENTH ST., #27	DE PERE	WI	54115
5	LEWIS, MAUREEN T.	816 MANDALAY TER.	DE PERE	WI	54115
6	PHILLIPS, BRYANT J.	605 DORELLE ST.	KEWAUNEE	WI	54216
7	ROBB, ADAM L.	1641 SMITH ST.	GREEN BAY	WI	54302

City of De Pere, Wisconsin**Request For License Committee Action**

MEETING DATE: September 1, 2015

DEPARTMENT: City Clerk-Treasurer

FROM: Shana Defnet

SUBJECT: Application for a Temporary Premise Description Change for the Drift Inn on September 19-20, 2015 for the Jerry Parins Cruise for Cancer.*

ATTACHMENTS:

- 09-01-15 TEMP PREM DESCRIP CHANGE JERRY PARINS.PDF (PDF)

ORIGINAL ALCOHOL BEVERAGE RETAIL LICENSE APPLICATION

Submit to municipal clerk.

For the license period beginning Sept 19 20 15 ;
ending Sept 20 20 15 ;TO THE GOVERNING BODY of the: ☐ Town of
☐ Village of } De Pere
☒ City ofCounty of Brown Aldermanic Dist. No. _____ (if required by ordinance)

Applicant's Wisconsin Seller's Permit Number: <u>4561672376800</u>	
Federal Employer Identification Number (FEIN): <u>03102672376802</u>	
LICENSE REQUESTED	
TYPE	FEE
☐ Class A beer	\$
☒ Class B beer	\$
☐ Class C wine	\$
☐ Class A liquor	\$
☐ Class B liquor	\$
☐ Reserve Class B liquor	\$
Publication fee	\$
TOTAL FEE	\$ No Fee

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): Robert & Gail Koslowsky 4900 Spornman Dr De Pere WI

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>Owner</u>	<u>Gail</u>	<u>4900 Spornman Dr De Pere</u>	
Vice President/Member	<u>Owner</u>	<u>Robert</u>	<u>4900 Spornman Dr De Pere</u>	
Secretary/Member				
Treasurer/Member				
Agent		<u>Gail Koslowsky</u>		
Directors/Managers		<u>Owner</u>		

3. Trade Name Drift Inn Business Phone Number 920.336.5929
4. Address of Premises 1535 N Ashland Post Office & Zip Code De Pere WI 54115

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 employee 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. ☐ Yes ☒ No
- (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, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) ON BACK OF SHEET

10. Legal description (omit if street address is given above): 1535 N Ashland Av

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? Drift Inn

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 a Wisconsin Seller's Permit must be applied for and issued in the same name as that shown in Section 2, above? [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 Sept 19 day of Sept 20 15Aug 18, 2015

(Clerk/Notary Public)

My commission expires May 31, 2019

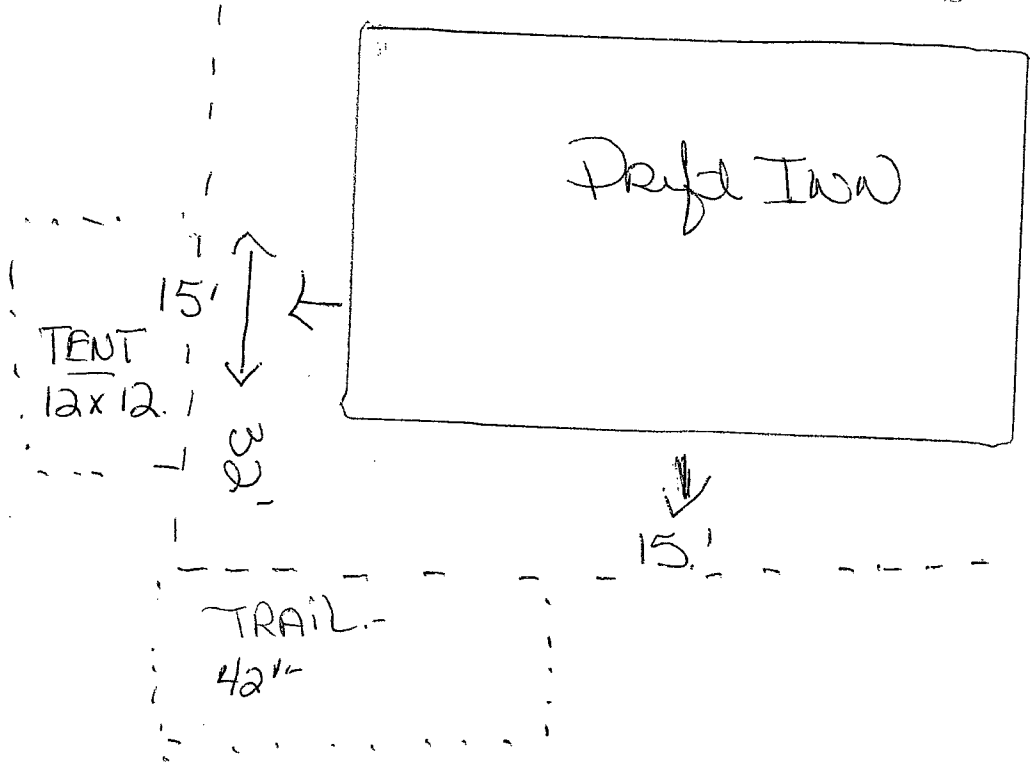
(Officer of Corporation/Member/Manager of Limited Liability Company/Partner/Individual)

(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>8-18-15</u>	Date reported to council/board	Date provisional license issued	Signature of Clerk / Deputy Clerk
Date license granted	Date license issued	License number issued	



Ashland Av

