License Committee

335 South Broadway
De Pere, WI 54115
http://www.de-pere.org

Regular Meeting

Agenda

Tuesday, December 3, 2013 **7:00 PM** **De Pere City Hall Riverview Room**

Pursuant to Wisconsin Statutes 19.84, Notice is hereby given to the public that a Regular Meeting of the **License Committee** of the City of De Pere will be held on **December 3, 2013** at **7:00 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 November 19, 2013 License Committee Meeting.
3. Operator License Applications.
4. Application for Change of Agent for The Green Room
5. Application for a Temporary Premise Description Change for St. Norbert College.
6. Public Comment Period and other Announcements.
7. 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
Alderpersons
Department Heads
TV, Newspapers & Radio Stations
Kress Family Library
De Pere Chamber of Commerce
TREPANIER, KRISTIN N.
BERO, MISTY M.
KREBSBACH, EMILY M.
LIBASSI, SAVANNAH
STROOBANTS, JULIE A.
YOUNG, LONDON S.
DUBOIS, TERRIE
ESERKALN, MIKE T.

City of De Pere, Wisconsin

Request For License Committee Action

MEETING DATE: **December 3, 2013**

DEPARTMENT: **City Clerk-Treasurer**

FROM: **Vicki Scray**

SUBJECT: **Approval of the Minutes of the November 19, 2013 License Committee Meeting.**

ATTACHMENTS:

- 11-19-2013 Minutes License (PDF)

License Committee

335 South Broadway
De Pere, WI 54115
http://www.de-pere.org

Regular Meeting

Draft Minutes

Tuesday, November 19, 2013 7:15 PM De Pere City Hall Riverview Room

1. Call to Order

The meeting was called to order at 7:15 PM by

Attendee Name	Title	Status	Arrived
Kevin Bauer	Alderperson	Present	
James Boyd	Alderperson	Present	
Bob Heuvelmans	Alderperson	Present	

2. Approval of the Minutes of the 11-05-2013 License Committee Meeting.

RESULT:	**ADOPTED [UNANIMOUS]**
MOVER:	Bob Heuvelmans, Alderperson
SECONDER:	James Boyd, Alderperson
AYES:	Kevin Bauer, James Boyd, Bob Heuvelmans

3. Public comment period and other announcements.

None.

4. Operator License Applications
Previously Tabled Operator License #1 for Rodrick J. Crawford was presented. Alderperson Bauer moved, seconded by Alderperson Heuvelmans to open the meeting. Upon vote, motion carried unanimously. The applicant answered the committee's questions. Alderperson Bauer moved, seconded by Alderperson Heuvelmans to close the meeting. Upon vote, motion carried unanimously. Alderperson Heuvelmans moved, seconded by Alderperson Bauer to approve the application. Upon vote, motion carried unanimously.

Operator License Application #3 for Kristin N. Trepanier was presented. Alderperson Heuvelmans moved, seconded by Alderperson Boyd to table the application. Upon vote, motion carried unanimously.

Alderperson Bauer moved, seconded by Alderperson Heuvelmans to approve Operator License Application #1 for Brittany D. Hannon and Operator License Application #2 for Bonnie H. Lemke. Upon vote, motion carried unanimously.

5. Adjournment.

Upon motion by Alderperson Bauer, seconded by Alderperson Boyd, the License Committee Meeting was adjourned at 7:20 p.m. The next License Committee Meeting will be held on December 3, 2013.

Respectfully submitted,

Shana Defnet
Clerk - Treasurer

City of De Pere, Wisconsin

Request For License Committee Action

MEETING DATE: **December 3, 2013**

DEPARTMENT: **City Clerk-Treasurer**

FROM: **Shana Defnet**

SUBJECT: **Operator License Applications.**

ATTACHMENTS:

- 12-03-13 Operator License List (PDF)

CITY OF DE PERE - DECEMBER 3, 2013					
ITEM#	NAME	ADDRESS	CITY	ST	ZIP
PREVIOUSLY TABLED OPERATOR LICENSE APPLICATIONS					
1	TREPANIER, KRISTIN N.	1187 OREGAN ST.	GREEN BAY	WI	54303
OPERATOR LICENSE APPLICATIONS FOR THE 2012-2014 LICENSING PERIOD					
1	BERO, MISTY M.	1410 S. NORWOOD AVE.	GREEN BAY	WI	54304
2	KREBSBACH, EMILY M.	892 WAVERLY PL.	GREEN BAY	WI	54304
3	LIBASSI, SAVANNAH	2682 ALLOUEZ AVE.	GREEN BAY	WI	54311
4	STROOBANTS, JULIE A.	1326 CHICAGO ST.	GREEN BAY	WI	54301
5	YOUNG, LONDON S.	3079 CORNELIUS CT.	GREEN BAY	WI	54311

City of De Pere, Wisconsin

Request For License Committee Action

MEETING DATE: **December 3, 2013**

DEPARTMENT: **City Clerk-Treasurer**

FROM: **Vicki Scray**

SUBJECT: **Application for Change of Agent for The Green Room**

ATTACHMENTS:

- 12-03-13 Recommendation for Change of Agent public(PDF)

ORIGINAL ALCOHOL BEVERAGE RETAIL LICENSE APPLICATION

Submit to municipal clerk.

Applicant's Wisconsin Seller's Permit Number:	456/0280550 -0
Federal Employer Identification Number (FEIN):	46-1332825

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	$ N/C

For the license period beginning Dec. 4 20 13 ;
ending June 20 14

TO THE GOVERNING BODY of the: ☐ Town of ☐ Village of ☒ City of De Pere

County of Brown 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): ▶ Green Room Theatre, LLC

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

Title	Name	Home Address	Post Office & Zip Code
President/Member	Mike T Esenkaln	224 Fort Howard	De Pere, WI 54115
Vice President/Member			
Secretary/Member			
Treasurer/Member			
* Agent ▶	Mike T Esenkaln	Same	Same
Directors/Managers			

3. Trade Name ▶ The Green Room — Business Phone Number 920-983-0966
4. Address of Premises ▶ 353 Main Ave — 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 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 WI and date 11-5-2012 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, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) Bar/Lobby, Storage Room, Basement, Performance Space
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? Venture Theatre LLC
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 18th day of November, 2013

Jamie Tolson
(Clerk/Notary Public)

My commission expires 8-3-14

X _____
(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	Date reported to council/board	Date provisional license issued	Signature of Clerk / Deputy Clerk
11-18-13	12-3-13	-0-	
Date license granted	**Date license issued**	**License number issued**	

AT-106 (R. 1-12) Wisconsin Department of Revenue

City of De Pere, Wisconsin

Request For License Committee Action

MEETING DATE:	**December 3, 2013**
DEPARTMENT:	**City Clerk-Treasurer**
FROM:	**Shana Defnet**
SUBJECT:	**Application for a Temporary Premise Description Change for St. Norbert College.**

ATTACHMENTS:

- 12-03-13 Recommendation from License Committee on Application for Premise Description Change-SNC (PDF)

5.a

Attachment: 12-03-13 Recommendation from License Committee on Application for Premise Description

Packet Pg. 9

TEMPORARY PREMISE DESCRIPTION CHANGE

ORIGINAL ALCOHOL BEVERAGE RETAIL LICENSE APPLICATION

Submit to municipal clerk.

For the license period beginning July 1 20 13 ;
ending June 30 20 14

TO THE GOVERNING BODY of the: ☐ Town of ☐ Village of ☑ City of DePere

County of Brown Aldermanic Dist. No. ____ (if required by ordinance)

Applicant's Wisconsin Seller's Permit Number:	458-1020112251-03
Federal Employer Identification Number (FEIN):	39-1399196

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	$ N/C

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): ▶ St. Norbert College, 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	President	Thomas Kunkel	1527 Fox Ridge Ct.	54115
Vice President/Member				
Secretary/Member	Secretary	Amy Sorenson	1521 Bay Highlands	Green Bay 54311
Treasurer/Member	Treasurer	Eileen Jahnke	3435 Bay Highlands	Green Bay 54311
Agent ▶	Assoc Dir Catering/Conf	Terrie DuBois	729 Bascom Way	Green Bay 54311
Directors/Managers				

3. Trade Name ▶ St. Norbert College Business Phone Number 9204031352
4. Address of Premises ▶ applying for extension see attach Post Office & Zip Code ▶ 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 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, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) see attached for buildings, dates and times
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 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 14th day of November, 20 13

Patricia A. Wery
(Clerk/Notary Public)

My commission expires Jan. 31, 2016

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

Amy Sorenson
(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	Date reported to council/board	Date provisional license issued	Signature of Clerk / Deputy Clerk
11-13-13	12-3-13		
Date license granted	**Date license issued**	**License number issued**	

Extension of Premise for:

Cassandra Voss Center first floor, 311 Grant Street

Dates: Jan 16, 2014; 4:30-6:30pm

March 17, 2014; 4:30-6:30pm

June 2, 2014; 4:30-6:30pm

Mulva Library Studio Lower level, 400 Third Street

Date: Dec. 19, 2013 3:00-6:30pm

Bush Art Center Gallery first floor, 403 Third Street

Additional Date: Feb. 4th, 2014; 4:30-7:30