



License Committee

Regular Meeting

335 South Broadway
De Pere, WI 54115
www.deperewi.gov

Agenda

Tuesday, October 7, 2025

7:00 PM

Council Chambers and Virtual

Pursuant to Wisconsin Statute 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 **October 7, 2025** at **7:00 PM** in the **COUNCIL CHAMBERS, 2ND FLOOR CITY HALL, 335 S. BROADWAY STREET. DE PERE.**

The Public or Members of the License Committee, which may count toward an official quorum, may attend the meeting either in person in the Council Chambers or telephonically or electronically via video conferencing or other appropriate technological means. Telephonic or electronic access to the meeting is provided below:

Computer/smart phone accessing <https://www.gotomeet.me/DePere>

OR

You can also dial in using your phone.
United States (Toll Free): [1 866 899 4679](tel:18668994679)
United States: [+1 \(312\) 757-3117](tel:+13127573117)
Access Code: 154-883-285

This meeting may also be rebroadcast on TV throughout the week and available on demand at <https://deperewi.portal.civicclerk.com/>.

I. Call to Order

1. Approval of the minutes of the September 2, 2025 License Committee meeting.

II. Public Comment

Comments made during the public comment period shall pertain only to matters under the jurisdiction of the License Committee. §6-3(f) DPMC

Public comment upon matters not on the agenda. Comments made during the public comment period shall pertain only to matters under the jurisdiction of the License Committee. §6-3(f) DPMC

III. Action Items

1. Renewal application for a Class "B" Fermented Malt Beverage License for De Pere Deacons Hockey Team, Inc. (DBA De Pere Deacons), 1450 Fort Howard Av. Agent: David E. Lepp, Green Bay WI.*
2. Application for a Class "B" Fermented Malt Beverage/"Class B" Intoxicating Liquor License

for Lucky Lotus LLC (DBA Lucky Lotus - Asian Fusion), 101 Fort Howard Av. Agent:
Alison C. Porter, Appleton WI.*

IV. Future Agenda Items

V. Adjournment

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

Agenda Sent To:

Alderspersons

City Manager

Mayor

Department Heads

TV, Newspapers & Radio Stations

Kress Family Library

De Pere Chamber of Commerce

Definitely De Pere



City of De Pere, Wisconsin

I.1

Request for License Committee Action

MEETING DATE: October 7, 2025
DEPARTMENT: City Clerk
FROM: Carey Danen, City Clerk
SUBJECT: Approval of the minutes of the September 2, 2025 License Committee meeting.
RECOMMENDED ACTION: Motion to approve.

ATTACHMENTS:
9-2-25 License Committee minutes_draft



License Committee

Regular Meeting

Minutes

335 South Broadway
De Pere, WI 54115
www.deperewi.gov

Tuesday, September 2, 2025

7:00 PM

City Hall, Council Chambers 335 S.
Broadway

I. Call to Order

The meeting was called to order at 7:00 PM by Alderperson Dan Carpenter.

a. Roll call.

Present: Dan Carpenter, Pamela Gantz, Devin Perock.

Also present: City Attorney Joanne Bungert and City Clerk Carey Danen

b. Approval of the minutes of the July 15, 2025 License Committee meeting.

RESULT:	APPROVED [UNANIMOUS]
MOVER:	Dan Carpenter
SECONDER:	Pamela Gantz
AYES:	Dan Carpenter, Pamela Gantz, Devin Perock

II. Public Comment

Comments made during the public comment period shall pertain only to matters under the jurisdiction of the License Committee. §6-3(f) DPMC

None.

III. Action Items

c. Application for a Class "B" Fermented Malt Beverage/"Class B" Intoxicating Liquor License for Otters on Birch LLC (DBA Otters on Birch), 617 Birch St. Agent: William A. Faucett, Appleton, WI.*

Alderperson Carpenter moved, seconded by Alderperson Perock to approve the application contingent upon the successful completion of the agent background check. Alderperson Carpenter then moved, seconded by Alderperson Gantz to open the meeting. Upon vote, motion carried unanimously. Owners Kevin Bauer and Will Faucett answered committee members' questions and explained their plan for the bar and restaurant. Alderperson Carpenter moved, seconded by Alderperson Gantz to close the meeting. Upon vote, motion carried unanimously.

RESULT:	APPROVED [UNANIMOUS]
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MOVER:	Dan Carpenter
SECONDER:	Devin Perock
AYES:	Dan Carpenter, Pamela Gantz, Devin Perock

IV. Future Agenda Items

None.

V. Adjournment

Aldersperson Carpenter moved, seconded by Aldersperson Gantz to adjourn the meeting at 7:05 PM. Upon vote, motion carried unanimously.

Respectfully submitted,
Carey Danen, City Clerk



City of De Pere, Wisconsin

III.1

Request for License Committee Action

MEETING DATE: October 7, 2025
DEPARTMENT: City Clerk
FROM:
SUBJECT: Renewal application for a Class "B" Fermented Malt Beverage License for De Pere Deacons Hockey Team, Inc. (DBA De Pere Deacons), 1450 Fort Howard Av. Agent: David E. Lepp, Green Bay WI.*
RECOMMENDED ACTION: Approval

The agent background check results have been reviewed and approved by the Police Department.

ATTACHMENTS:

De Pere Deacons_application, De Pere Deacons_agent form, De Pere Deacons_individual questionnaires

Form
AB-200

Alcohol Beverage License Application

For Municipal Use Only	
Municipality	
License Period	

License(s) Requested: (up to two boxes may be checked)

- ☐ Class "A" Beer \$ _____ ☒ Class "B" Beer \$ _____
- ☐ "Class A" Liquor \$ _____ ☐ "Class B" Liquor \$ _____
- ☐ "Class A" Liquor (cider only) \$ _____ ☐ Reserve "Class B" Liquor \$ _____
- ☐ "Class C" Liquor (wine only) \$ _____

Fees	
License Fees	We will invoice you separately.
Background Check Fee	
Publication Fee	
Total Fees	\$ 30.00

Att
20398

Part A: Premises/Business Information

1. Legal Business Name (individual name if sole proprietorship)

DEPERE DEACONS HOCKEY TEAM, INC

2. Business Trade Name or DBA

3. FEIN

460893404

4. Wisconsin Seller's Permit Number

EXEMPT

5. Entity Type (check one)

- ☐ Sole Proprietor ☐ Partnership ☐ Limited Liability Company ☐ Corporation ☒ Nonprofit Organization

6. State of Organization

WI

7. Date of Organization

12.20.12

8. Wisconsin DFI Registration Number

0049911

9. Premises Address

1450 FT. HOWARD AV

10. City

Delaone

11. State

WI

12. Zip Code

54115

13. County

BROWN

14. Governing Municipality: ☒ City ☐ Town ☐ Village

of:

15. Aldermanic District

16. Premises Phone

920.403.2000

17. Premises Email

18. Website

19. Premises Description - Describe the building or buildings where alcohol beverages are produced, sold, stored, or consumed, and related records are kept. Describe all rooms within the building, including living quarters. Authorized alcohol beverage activities and storage of records may occur only on the premises described in this application. Attach a map or diagram and additional sheets if necessary.

1ST AND SECOND FLOORS OF DEPERE ICG ALONG

20. Mailing Address (if different from premises address)

21. City

22. State

WI

23. Zip Code

Part B: Questions

1. Has the business (sole proprietorship, partnership, limited liability company, or corporation) been convicted of violating federal or state laws or local ordinances? Exclude traffic offenses unless related to alcohol beverages. ☐ Yes ☒ No

If yes, list the details of violation below. Attach additional sheets if necessary.

Law/Ordinance Violated

Location

Trial Date

Penalty Imposed

Was sentence completed? ☐ Yes ☐ No

Law/Ordinance Violated

Location

Trial Date

Penalty Imposed

Was sentence completed? ☐ Yes ☐ No

2. Are charges for any offenses pending against the business? Exclude traffic offenses unless related to alcohol . . . ☐ Yes ☒ No beverages.

If yes, describe the nature and status of pending charges using the space below. Attach additional sheets as needed.

3. Is the applicant business or any of its officers, directors, members, agent, employees, owners, or other related individuals or entities a restricted investor with any interest in an alcohol beverage producer or distributor? . . . ☐ Yes ☒ No
If yes, provide the name of the restricted investor and describe the nature of the interest.

4. Is the applicant business owned by another business entity? . . . ☐ Yes ☒ No
If yes, provide the name(s) and FEIN(s) of the business entity owners below. Attach additional sheets as needed.

4a. Name of Business Entity

4b. Business Entity FEIN

5. Have the partners, agent, or sole proprietor satisfied the responsible beverage server training requirement for this license period? Submit proof of completion. ☒ Yes ☐ No

6. Is the applicant business indebted to any wholesaler beyond 15 days for beer or 30 days for liquor/wine? ☐ Yes ☒ No

7. Does the applicant business owe past due municipal property taxes, assessments, or other fees? ☐ Yes ☒ No

Part C: Individual Information

List the name, title, and phone number for each person or entity holding the following positions in the applicant business or businesses listed in Part B, Question 4: sole proprietor, all officers, directors, and agent of a corporation or nonprofit organization, all partners of a partnership, and all members, managers, and agent of a limited liability company. Attach additional sheets if necessary.

Include Form AB-100 for each person listed below. Corporations and LLCs must appoint an agent by including Form AB-101.

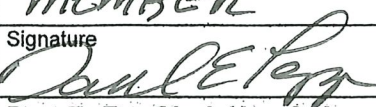
Last Name	First Name	Title	Phone
LEPP	DAVID E	MEMBER	
NUTALLS	GABRIEL F	MEMBER	

Part D: Attestation

One of the following must sign and attest to this application:

- sole proprietor
- one general partner of a partnership
- one corporate officer
- one member of an LLC

READ CAREFULLY BEFORE SIGNING: Under penalty of law, I have answered each of the above questions completely and truthfully. I agree that I am acting solely on behalf of the applicant business and not on behalf of any other individual or entity seeking the license. Further, I agree that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another individual or entity. I agree to operate this business according to the law, including but not limited to, purchasing alcohol beverages from state authorized wholesalers. I understand that lack of access to any portion of a licensed premises during inspection will be deemed a refusal to allow inspection. Such refusal is a misdemeanor and grounds for revocation of this license. I understand that any license issued contrary to Wis. Stat. Chapter 125 shall be void under penalty of state law. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Last Name LEPP		First Name DAVID		M.I. E
Title MEMBER		Email,		Phone
Signature 		Date 8.22.25		

Part E: For Clerk Use Only

Date Application Was Filed With Clerk 8/25/25	License Number	Date License Granted	Date License Issued
Signature of Clerk/Deputy Clerk		Date Provisional License Issued (if applicable)	



City of De Pere, Wisconsin

III.2

Request for License Committee Action

MEETING DATE: October 7, 2025
DEPARTMENT: City Clerk
FROM:
SUBJECT: Application for a Class "B" Fermented Malt Beverage/"Class B" Intoxicating Liquor License for Lucky Lotus LLC (DBA Lucky Lotus - Asian Fusion), 101 Fort Howard Av. Agent: Alison C. Porter, Appleton WI.*
RECOMMENDED ACTION: Approval

The agent background check results have been reviewed and approved by the Police Department.

ATTACHMENTS:

Lucky Lotus_application, Lucky Lotus_agent form, Lucky Lotus_individual questionnaires

Form
AB-200

Alcohol Beverage License Application

For Municipal Use Only	
Municipality	
License Period	

License(s) Requested: (up to two boxes may be checked)

- ☐ Class "A" Beer \$ _____ ☐ Class "B" Beer \$ _____
- ☐ "Class A" Liquor \$ _____ ☐ "Class B" Liquor \$ _____
- ☐ "Class A" Liquor (cider only) \$ _____ ☐ Reserve "Class B" Liquor \$ _____
- ☐ "Class C" Liquor (wine only) \$ _____

Fees	
License Fees	We will invoice you separately.
Background Check Fee	
Publication Fee	
Total Fees	\$ 30.00

R#
2040

Part A: Premises/Business Information

1. Legal Business Name (individual name if sole proprietorship) Lucky Lotus LLC		
2. Business Trade Name or DBA Lucky Lotus - Asian Fusion		
3. FEIN	4. Wisconsin Seller's Permit Number	
5. Entity Type (check one) ☐ Sole Proprietor ☐ Partnership ☒ Limited Liability Company ☐ Corporation ☐ Nonprofit Organization		
6. State of Organization Wisconsin	7. Date of Organization	8. Wisconsin DFI Registration Number
9. Premises Address 101 Fort Howard Ave		
10. City De Pere	11. State WI	12. Zip Code 54115
13. County Brown	14. Governing Municipality: ☒ City ☐ Town ☐ Village of: De Pere	15. Aldermanic District
16. Premises Phone 920-209-1574	17. Premises Email porter.restaurant@gmail	18. Website
19. Premises Description - Describe the building or buildings where alcohol beverages are produced, sold, stored, or consumed, and related records are kept. Describe all rooms within the building, including living quarters. Authorized alcohol beverage activities and storage of records may occur only on the premises described in this application. Attach a map or diagram and additional sheets if necessary. 3 Separate Levels For Seating and serving approximately 75 seats plus Patio/Deck Bar on main level. Liquor Storage in locked Room in basement Plus walk in cooler		
20. Mailing Address (if different from premises address)		
21. City	22. State	23. Zip Code

Part B: Questions

1. Has the business (sole proprietorship, partnership, limited liability company, or corporation) been convicted of violating federal or state laws or local ordinances? Exclude traffic offenses unless related to alcohol beverages. ☐ Yes ☒ No
- If yes, list the details of violation below. Attach additional sheets if necessary.

Law/Ordinance Violated	Location	Trial Date
Penalty Imposed		Was sentence completed? ☐ Yes ☐ No
Law/Ordinance Violated	Location	Trial Date
Penalty Imposed		Was sentence completed? ☐ Yes ☐ No

2. Are charges for any offenses pending against the business? Exclude traffic offenses unless related to alcohol . . ☐ Yes ☒ No beverages. If yes, describe the nature and status of pending charges using the space below. Attach additional sheets as needed.			
3. Is the applicant business or any of its officers, directors, members, agent, employees, owners, or other related individuals or entities a restricted investor with any interest in an alcohol beverage producer or distributor? . . ☐ Yes ☒ No If yes, provide the name of the restricted investor and describe the nature of the interest.			
4. Is the applicant business owned by another business entity? ☐ Yes ☒ No If yes, provide the name(s) and FEIN(s) of the business entity owners below. Attach additional sheets as needed.			
4a. Name of Business Entity		4b. Business Entity FEIN	
5. Have the partners, agent, or sole proprietor satisfied the responsible beverage server training requirement for this license period? Submit proof of completion. ☒ Yes ☐ No			
6. Is the applicant business indebted to any wholesaler beyond 15 days for beer or 30 days for liquor/wine? ☐ Yes ☒ No			
7. Does the applicant business owe past due municipal property taxes, assessments, or other fees? ☐ Yes ☒ No			
Part C: Individual Information			
List the name, title, and phone number for each person or entity holding the following positions in the applicant business or businesses listed in Part B, Question 4: sole proprietor, all officers, directors, and agent of a corporation or nonprofit organization, all partners of a partnership, and all members, managers, and agent of a limited liability company. Attach additional sheets if necessary. Include Form AB-100 for each person listed below. Corporations and LLCs must appoint an agent by including Form AB-101.			
Last Name	First Name	Title	Phone
Maass	Tori	Owner	
Porter	Alison	President	
Part D: Attestation			
One of the following must sign and attest to this application: • sole proprietor • one general partner of a partnership • one corporate officer • one member of an LLC			
READ CAREFULLY BEFORE SIGNING: Under penalty of law, I have answered each of the above questions completely and truthfully. I agree that I am acting solely on behalf of the applicant business and not on behalf of any other individual or entity seeking the license. Further, I agree that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another individual or entity. I agree to operate this business according to the law, including but not limited to, purchasing alcohol beverages from state authorized wholesalers. I understand that lack of access to any portion of a licensed premises during inspection will be deemed a refusal to allow inspection. Such refusal is a misdemeanor and grounds for revocation of this license. I understand that any license issued contrary to Wis. Stat. Chapter 125 shall be void under penalty of state law. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.			
Last Name Maass		First Name Tori	M.I. L
Title Owner	Email		Phone
Signature <i>Tori Maass</i>	Date 9/2/2025		
Part E: For Clerk Use Only			
Date Application Was Filed With Clerk 9/2/25	License Number	Date License Granted	Date License Issued
Signature of Clerk/Deputy Clerk		Date Provisional License Issued (if applicable)	