License Committee

Regular Meeting

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

Agenda

Tuesday, November 7, 2017 | **7:15 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 **November 7, 2017** at **7:15 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 October 17, 2017 License Committee Meeting.
3. Public Comment Period and other Announcements.
4. Operator License Applications.*
5. Application for a Class "B" Fermented Malt Beverage License for De Pere Deacons Hockey Team, Inc. (DBA De Pere Deacons Hockey Team), 1450 Fort Howard Av. Submitted by De Pere Deacons Hockey Team, Inc., Agent: David E. Lepp, De Pere, WI.*
6. Adjournment.

Respectfully Submitted,

Shana Ledvina, 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
Ashley M. Bielski
Alicia B. Bakken
Ana L. Bakken
Paul Bakken
Sara L. Brooks
Anita S. Demske
Catherine H. Gundrum
Melissa A. Heezen
Amy M. Jordan
Mathew K. Luedtke
Michelle L. McArdle
Austin A. Reckelberg
Donna L. Upthegrove

David E. Lepp

City of De Pere, Wisconsin

Request For License Committee Action

MEETING DATE:	**November 7, 2017**
DEPARTMENT:	**City Clerk-Treasurer**
FROM:	**Shana Ledvina**
SUBJECT:	**Approval of the Minutes of the October 17, 2017 License Committee Meeting.**

ATTACHMENTS:

- 10-17-17 License Committee Minutes (DOC)

License Committee

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

Regular Meeting

Draft Minutes

Tuesday, October 17, 2017 | 7:15 PM | De Pere City Hall Riverview Room

1. Call to Order. The meeting was called to order at 7:15 PM by Ald. Boyd.

Attendee Name	Title	Status
James Boyd	Alderperson	Present
Dan Carpenter	Alderperson	Present
Jonathon Hansen	Alderperson	Present

2. Approval of the Minutes of the October 3, 2017 License Committee Meeting.

RESULT:	**ADOPTED [UNANIMOUS]**
MOVER:	Dan Carpenter, Alderperson
SECONDER:	Jonathon Hansen, Alderperson
AYES:	James Boyd, Dan Carpenter, Jonathon Hansen

3. Public Comment Period and other Announcements. None.

4. Operator License Applications.*

CITY OF DE PERE
License Committee - October 17, 2017

New Operator License Applications	
1	BIELSKI, ASHLEY M.
2	CARMODY, DIANE M.
3	CLAUSELL-MOBLEY, KRISTIAN S.
4	FALLS, NICOLE A.
5	GODRES, MIRANDA L.
6	KING, SCOTT J.
7	MC DONALD, JOHNATHAN D.
8	SERVER, HOLLY L.
9	TITULAER, ADAM M.
10	WALL, COLBY L.

Operator License Application #1 for Ashley M. Bielski was presented. Alderperson Boyd moved, seconded by Alderperson Carpenter to table the application. Upon vote, motion carried unanimously.
Operator License Application #2 for Diane M. Carmody was presented. Alderperson Carpenter moved, seconded by Alderperson Boyd to open the meeting. Upon vote, motion carried unanimously. The applicant answered the Committee's questions. Discussion followed. Operator License Application #7 for Johnathan D. Mc Donald was presented. The applicant answered the Committee's questions. Discussion followed. Alderperson Carpenter moved, seconded by Alderperson Boyd to close the meeting. Upon vote, motion carried unanimously.
Alderperson Boyd moved, seconded by Alderperson Carpenter to table Operator License Application #9. Upon vote, motion carried unanimously.

Alderperson Boyd moved, seconded by Alderperson Hansen to approve Operator License Applications #2-8 and 10. Upon vote, motion carried unanimously.

5. Adjournment.

Alderperson Boyd moved, seconded by Alderperson Hansen to adjourn the meeting at 7:27 p.m. Upon vote, motion carried unanimously.

Respectfully submitted,

Shana Ledvina, Clerk-Treasurer

City of De Pere, Wisconsin

Request For License Committee Action

MEETING DATE: **November 7, 2017**

DEPARTMENT: **City Clerk-Treasurer**

FROM: **Shana Ledvina**

SUBJECT: **Operator License Applications.***

ATTACHMENTS:

- 11-7-17 (PDF)

CITY OF DE PERE
License Committee - November 7, 2017

Previously Tabled Operator License Applications	
1	BIELSKI, ASHLEY M.

New Operator License Applications	
1	BAKKEN, ALICIA B.
2	BAKKEN, ANA L.
3	BAKKEN, PAUL
4	BROOKS, SARA L.
5	DEMSKE, ANITA S.
6	GUNDRUM, CATHERINE H.
7	HEEZEN, MELISSA A.
8	JORDAN, AMY M.
9	LUEDTKE, MATHEW K.
10	MC ARDLE, MICHELLE L.
11	RECKELBERG, AUSTIN A.
12	UPTHEGROVE, DONNA L.

City of De Pere, Wisconsin

Request For License Committee Action

MEETING DATE:	**November 7, 2017**
DEPARTMENT:	**City Clerk-Treasurer**
FROM:	**Shana Ledvina**
SUBJECT:	**Application for a Class "B" Fermented Malt Beverage License for De Pere Deacons Hockey Team, Inc. (DBA De Pere Deacons Hockey Team), 1450 Fort Howard Av. Submitted by De Pere Deacons Hockey Team, Inc., Agent: David E. Lepp, De Pere, WI.***

ATTACHMENTS:

- De Pere Deacons_11-7-17 (PDF)

RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. **Read instructions on reverse side.**

For the license period beginning: 12.01.17 (MM DD YYYY) ending: 05.01.18 (MM DD YYYY)

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

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

CHECK ONE ☐ Individual ☐ Partnership ☐ Limited Liability Company ☑ Corporation/Nonprofit Organization

Applicant's WI Seller's Permit No.:	FEIN Number:
Tax Exempt	468893404

LICENSE REQUESTED ▶ TYPE	FEE
☐ Class A beer	$
☒ Class B beer	$
☐ Class C wine	$
☐ Class A liquor	$
☐ Class A liquor (cider only)	$ N/A
☐ Class B liquor	$
☐ Reserve Class B liquor	$
☐ Class B (wine only) winery	$
Publication fee	$ 30 -
TOTAL FEE	$

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name(s) (Last, First and Middle Name)	Home Address	Post Office & Zip Code
▶ DEPERE DEACONS HOCKEY TEAM, INC.		

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company ▶

Address of Corporation/Limited Liability Company (if different from licensed premises) ▶

All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company:

Title	Name (Inc. Middle Name)	Home Address	Post Office & Zip Code
President/Member	DAVID E LEPP	[redacted]	[redacted]
Vice President/Member	CRAIG F NUTTALS		
Secretary/Member			
Treasurer/Member			
Agent ▶	DAVID E LEPP		
Directors/Managers	DAVID E LEPP		

C. 1. Trade Name ▶ DEPERE DEACONS HOCKEY TEAM, INC. Business Phone Number 920.660.0933

2. Address of Premises ▶ 1450 FT. HOWARD AV Post Office & Zip Code ▶ DEPERE, WI 54115

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? ☑ Yes ☐ No

4. 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.) 2ND + 1ST FLOOR @ DEPERE ICE ARENA

5. Legal description (omit if street address is given above): _____

6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, corporation licensee, or nonprofit organization licensee been **convicted** of **any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete reverse side** ☐ Yes ☑ No

b. Are **charges** for **any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on reverse side** ☐ Yes ☑ No

7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain.** _____ ☐ Yes ☑ No

8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? If not, explain. _____ ☑ Yes ☐ No

9. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776] PER CARRIE WE ARE EXEMPT FROM NEEDING A S.P. ☐ Yes ☐ No

10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☑ Yes ☐ No

11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ 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.)

SUBSCRIBED AND SWORN TO BEFORE ME

this 23 day of October, 2017

Lenore Epp
(Clerk/Notary Public)

My commission expires 11/6/18

David E Lepp
(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 license granted
10-24-17		
License number issued	**Date license issued**	**Signature of Clerk / Deputy Clerk**

AT-115 (R. 7-15) Wisconsin

RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. **Read instructions on reverse side.**

Applicant's WI Seller's Permit No.:	FEIN Number:
Tax Exempt	468893404

LICENSE REQUESTED ▶

TYPE	FEE
☐ Class A beer	$
☒ Class B beer	$
☐ Class C wine	$
☐ Class A liquor	$
☐ Class A liquor (cider only)	$ N/A
☐ Class B liquor	$
☐ Reserve Class B liquor	$
☐ Class B (wine only) winery	$
Publication fee	$
TOTAL FEE	$

For the license period beginning: 12-1-17 (MM DD YYYY) ending: 5-1-18 (MM DD YYYY)

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

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

CHECK ONE ☐ Individual ☐ Partnership ☐ Limited Liability Company ☒ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name(s) (Last, First and Middle Name)	Home Address	Post Office & Zip Code
▶ De Pere Deacons Hockey Team, Inc.		

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company ▶

Address of Corporation/Limited Liability Company (if different from licensed premises) ▶

All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company:

Title	Name (Inc. Middle Name)	Home Address	Post Office & Zip Code
President/Member	David C. Lepp	[redacted]	[redacted]
Vice President/Member	Gregory E. Nuthals		
Secretary/Member			
Treasurer/Member			
Agent ▶	David C. Lepp		
Directors/Managers	David C. Lepp		

C. 1. Trade Name ▶ De Pere Deacons Hockey Team, Inc. Business Phone Number 920-660-0933

2. Address of Premises ▶ 1170 PT Howard Ave Post Office & Zip Code ▶ De Pere, WI 54115

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? ☒ Yes ☐ No

4. 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.) 2nd & 1st Floor @ De Pere Ice Arena

5. Legal description (omit if street address is given above): _____

6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, corporation licensee, or nonprofit organization licensee been **convicted** of **any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? **If yes, complete reverse side** ☐ Yes ☒ No

b. Are **charges** for **any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? **If yes, explain fully on reverse side** ☐ Yes ☒ No

7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? **If yes, explain.** _____ ☐ Yes ☒ No

8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? If not, explain. _____ ☒ Yes ☐ No

9. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776] Yes. Currently are exempt from reading & S. P. ☐ Yes ☐ No

10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No

11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ 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.)

SUBSCRIBED AND SWORN TO BEFORE ME

this 18th day of Oct.

Susan Schneider
(Clerk/Notary Public)

My commission expires 11/8/18

SUSAN SCHNEIDER NOTARY PUBLIC State of Wisconsin

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 license granted
10-24-17		
License number issued	**Date license issued**	**Signature of Clerk / Deputy Clerk**

AT-115 (R. 7-15) Wisconsin D