



A PERFECT ENVIRONMENT

Residential Recreational Responsible

Chair
Ron Troy
Supervisors
Edward Kranick
Steve Michels
Joe Woelfle
Magalie Miller
Clerk/Treasurer
Dan Green

**TOWN OF DELAFIELD BOARD OF SUPERVISORS MEETING
TUESDAY, MAY 24, 2022**

6:30 PM

DELAFIELD TOWN HALL – W302 N1254 MAPLE AVENUE, DELAFIELD, WI

AGENDA

1. Call to Order
2. Pledge of Allegiance
3. Roll Call
4. Citizen Comments: Public comments from citizens regarding items on, or not on the agenda. The Board may not engage in a discussion with the citizen making the comments. Individual presentations are limited to three minutes and citizens shall follow the rules set forth in Section 2.04(1)(d) of the Town Code.
5. Approval of Minutes:
 - A. May 10, 2022, Town Board Minutes
6. Action on vouchers submitted for payment:
 - A. Report on budget sub-accounts and action to amend 2022 budget
 - B. 1) Accounts payable; 2) Payroll
7. Communications (for discussion and possible action)
8. Unfinished Business - None
9. New Business
 - a. Discussion and possible action on the approval of Alcoholic Beverage “Class B” Liquor, and “Class B” Beer renewal licenses for the licensing period of July 1, 2022, to June 30, 2023, to Pewaukee Yacht Club Inc., Western Lakes Golf Club, and BuckRub Outfitters, Ltd.
 - b. Discussion and possible action on the approval of bartender licenses for Christopher Elrod, Tiana Jenig, Joseph Moriarty, Garrett Mack, Jason Hoelz, Megan Zielsdorf, Elsa Sheperd, Jacob Warren, Madeline Warren, Abigail Zorn, Elizabeth Ostop, and Jennifer Bartolomeo, for the licensing period of July 1, 2022, to June 30, 2024.
 - c. Discussion and possible action on the replacement of the old furnace and installation of an air conditioning unit in Fire Station #2 by Sprung Heating and Pump Service LLC.
 - d. Discussion and possible action on the sale of a 1998 International plow truck from the Highway fleet with a reserve of \$15,000.
 - e. Discussion and possible action on the approval of the 2022 Amended Fee Schedule.
 - f. Closed Session: The items to be discussed in Closed Session are as enumerated in Section 19.85(1)(c) of the Wisconsin Statutes. (c) Considering employment, promotion, compensation, or performance evaluation data of any public employee over which the governmental body has jurisdiction or exercises responsibility, more specifically: Town Administrator performance review

Following the closed session, the Town Board will reconvene in open session, and may take action on any matter discussed in closed session.

10. Announcements and Planning items

- A. Plan Commission – Tuesday, June 7th @ 6:30 PM
- B. Town Board – Tuesday, June 14th @ 6:30 PM
- C. Board of Review – Monday, June 20th @ 5:00 PM
- D. The following Town Board meetings will be cancelled: June 28, 2022, July 26, 2022, and August 9, 2022.

11. Adjournment



Dan Green
Town of Delafield Clerk/Treasurer

PLEASE NOTE:

- ✓ It is possible that action will be taken on any of the items on the agenda and that the agenda may be discussed in any order. It is also possible that a quorum of other governmental bodies of the municipality may be in attendance at the above-stated meeting to gather information; no action will be taken by any governmental body at the above-stated meeting other than the governmental body specifically referred to above in this notice.
- ✓ Also, upon reasonable notice, efforts will be made to accommodate the needs of disabled individuals through appropriate aids and services. For additional information or to request this service, contact Town Clerk Dan Green (262) 646-2398.

**TOWN OF DELAFIELD BOARD OF SUPERVISORS MEETING
MAY 10, 2022 @ 6:30 PM**

Video Link: <https://www.youtube.com/watch?v=MbgOLDWNE2I>

First order of business: Call to Order

Chairman Troy called the meeting to order at 6:30 p.m.

Second order of business: Pledge of Allegiance

Third order of business: Roll Call

Present: Supervisor Kranick, Supervisor Miller, and Chairman Troy. Also present was Administrator Dan Green.

Supervisors Woelfle and Michels were excused.

Fourth order of business: Citizen Comments:

Kemos Spero, W304N2426 Maple Avenue, explained that speeding on Maple Avenue has been out of control. He expressed concerns about the 45 MPH speed limit that he stated should be reduced to 35 MPH. The Waukesha County Sheriff's Office is not the best for patrolling speeding, which he stated Maple Avenue needs more of. He stated he was frustrated with the lack of response and lack of service for controlling the speeding issue.

Fifth order of business:

- A. Approval of the April 26, 2022, Town Board Minutes

Motion by Supervisor Kranick to approve the minutes from April 26, 2022. Seconded by Supervisor Miller. Motion passed 3-0.

Sixth order of Business: Action on vouchers submitted for payment:

- A. Report on budget sub-accounts and action to amend 2021 budget

- B.1) Accounts payable; 2) Payroll

Motion by Supervisor Kranick to approve payment of checks #65682-#65685 and checks #65687-#65714 in the amount of \$153,514.62, and payrolls dated May 13, 2022, in the amount of \$14,222.14. Seconded by Supervisor Miller. Motion passed 3-0.

Seventh order of Business: Communications (*for discussion and possible action*)

Eighth order of Business: Unfinished Business: NONE

Ninth order of Business: New Business:

- a. Discussion and possible action on a sponsorship agreement with Bluebell Realty for scoreboard advertising.

Administrator Green explained these contracts are for the new scoreboards that will be installed on the baseball fields at the Sports Commons. The attorney drafted the agreement for both Bluebell and the Chocolate Factory.

Motion by Supervisor Kranick to approve a sponsorship agreement with Bluebell Realty for scoreboard advertising. Seconded by Supervisor Miller. Motion passes 3-0.

- b. Discussion and possible action on a sponsorship agreement with The Chocolate Factory for scoreboard advertising.

Motion by Supervisor Kranick to approve a sponsorship agreement with The Chocolate Factory for scoreboard advertising. Seconded by Supervisor Miller. Motion passed 3-0.

- c. Discussion and possible action on the approval of bartender licenses for Aaron Frank and Michael Oechsner.

Motion by Supervisor Kranick to approve bartender licenses for Aaron Frank and Michael Oechsner. Seconded by Supervisor Miller. Motion passed 3-0.

- d. Discussion and possible action on the recommendation from the Plan Commission to approve the request from John and Kathleen Zautcke Thomas, for a Certified Survey Map to combine parcels into one lot at W283N3312 Lakeside Road.

Motion by Supervisor Kranick approve the request from John and Kathleen Zautcke Thomas for a Certified Survey Map to combine parcels into one lot at W283N3312 Lakeside Road dated May 2, 2022, with completion of any staff comments. Seconded by Supervisor Miller. Motion passed 3-0.

- e. Discussion and possible action on the appointment of Dave Mihalovich to the Board of Appeals as an alternate member, with a term beginning May 11, 2022, and expiring May 10, 2023.

Motion by Supervisor Kranick to appoint Dave Mihalovich to the Board of Appeals as an alternate member, with a term beginning May 11, 2022, and expiring May 10, 2023. Seconded by Supervisor Miller. Motion passed 3-0.

- f. Discussion and possible action on awarding a construction contract for the 2022 Road Improvement Project.

Engineer Barbeau reviewed the bid documents. The Town received 2 bids, Wolf Paving and Payne and Dolan. The budget for the program is \$605,000. Out of that, Don uses \$35,000 for road work. From that, we have \$575,000 for this contract. He reviewed the roadwork to be done in 2022. Brynn Drive will be done in two more sections, but will use any leftover funds from the roadway budget to extend as far as possible. We are working on the middle section and hope to do the last section next year. The Town staff is looking for approval so they can get the contracts signed by mid-June and give the contractor 75 days to complete. He explained the pricing from Wolf Paving was good, but asphalt was up 35% from last year. Supervisor Kranick questioned if there were any further upgrades to Elmhurst Drive, beyond milling and paving. The engineer explained he attempted to get an easement for drainage, but no one was willing to have an easement on their property. There will be only a 2-inch milling and paving on that road.

Motion by Supervisor Kranick to award a construction contract for the 2022 Road Improvement Project to the lowest responsible bidder, Wolf Paving for \$578,907.00. Seconded by Supervisor Miller. Motion passed 3-0.

Tenth order of Business: Announcements and Planning items

- A. Town Board - Tuesday, May 24th @ 6:30 PM
- B. Plan Commission – Tuesday, June 7th @ 6:30 PM
- C. Town Board – Tuesday, June 14th @ 6:30 PM

Thirteenth order of Business: Adjournment:

Motion by Supervisor Kranick to adjourn the Tuesday, May 10, 2022, Town Board meeting at 6:50 PM. Seconded by Supervisor Miller. Motion passed 3-0.

Respectfully submitted:

Dan Green, CMC/WCMC
Administrator - Town Clerk/Treasurer



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Dan Green

To: Town Chairman
Town Board Members
From: Dan Green, Administrator
Date: May 24, 2022
Subject: Bartender License Applications & Liquor Licenses

Overview:

The following businesses made applications for renewing their liquor licenses. Licenses are good for the licensing period beginning July 1, 2022, to June 30, 2023.

“Class B” Liquor License: Pewaukee Yacht Club & Western Lakes Golf Club
Class “B” Beer license: BuckRub Outfitters, LLC

Recommendation:

Staff recommends approval of alcoholic beverage “Class B” Liquor, and Class “B” Beer renewal licenses for the licensing period of July 1, 2022, to June 30, 2023, to Pewaukee Yacht Club, Inc., Western Lakes Golf Club, and BuckRub Outfitters, Ltd.

Overview:

Below, please find the following applicants for their perspective establishments who are applying for, or renewing their bartender licenses. All applicants have no criminal record.

Western Lakes Golf Club

Jennifer Bartolomeo
Tiana Jenig
Jason Hoelz
Garrett Mack
Joseph Moriarty
Christopher Elrod

Pewaukee Yacht Club

Megan Zielsdorf
Elizabeth Ostop
Abigail Zorn
Jacob Warren
Madeline Warren
Elsa Sheperd

Recommendation: Staff recommends approval of the above list of bartender licenses for the licensing period of July 1, 2022, thru June 30, 2024.

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning 01/01/2022 ending: 06/30/2023
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: Town of } Deafield
 Village of }
 City of }

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

Check one: Individual Limited Liability Company
 Partnership Corporation/Nonprofit Organization

Complete A or B. All must complete C.

Applicant's Wisconsin Seller's Permit Number <u>490-0600204271-03</u>	
FEIN Number <u>39-1847262</u>	
TYPE OF LICENSE REQUESTED	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$ <u>100</u>
<input type="checkbox"/> Class C wine	\$
<input type="checkbox"/> Class A liquor	\$
<input type="checkbox"/> Class A liquor (cider only)	\$ N/A
<input type="checkbox"/> Class B liquor	\$
<input type="checkbox"/> Reserve Class B liquor	\$
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$ <u>30</u>
TOTAL FEE	\$ <u>130</u>

A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company <u>Buck Pub Outfitters, Ltd.</u>	Address of Corporation / Limited Liability Company (if different from licensed premises) <u>N13W28400 Silvermail Rd. Pewaukee</u>
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All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent.

Agent Last Name <u>Kazmieriski</u>	(First) <u>Greg</u>	(Middle Name) <u>Joseph</u>	Home Address (Street, City or Post Office, & Zip Code) <u>N33057650 City Rd EE Mukwonago 53149</u>
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All Officer(s) Director(s) of Corporation and Members / Managers of Limited Liability Company:

President / Member Last Name <u> </u>	(First) <u> </u>	(Middle Name) <u> </u>	Home Address (Street, City or Post Office, & Zip Code) <u> </u>
Vice President / Member Last Name <u> </u>	(First) <u> </u>	(Middle Name) <u> </u>	Home Address (Street, City or Post Office, & Zip Code) <u> </u>
Secretary / Member Last Name <u> </u>	(First) <u> </u>	(Middle Name) <u> </u>	Home Address (Street, City or Post Office, & Zip Code) <u> </u>
Treasurer / Member Last Name <u> </u>	(First) <u> </u>	(Middle Name) <u> </u>	Home Address (Street, City or Post Office, & Zip Code) <u> </u>
Directors / Managers Last Name <u> </u>	(First) <u> </u>	(Middle Name) <u> </u>	Home Address (Street, City or Post Office, & Zip Code) <u> </u>
Directors / Managers Last Name <u> </u>	(First) <u> </u>	(Middle Name) <u> </u>	Home Address (Street, City or Post Office, & Zip Code) <u> </u>

C. Business Information

1. Trade Name Buck Pub Outfitters Ltd. Business Phone Number 262-547-0535
 2. Address of Premises N13W28400 Silvermail Rd. Post Office & Zip Code 53072

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.) Indoor Range, lounge AREA, store room

5. Legal description (omit if street address is given on previous page): _____
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, 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 page 3** 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 page 3.** 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? Yes No
[phone (608) 266-2776]
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
12. Does the applicant owe municipal property taxes, assessments, or other fees? Yes No
(Note: Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees 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 the 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. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) <i>KAZMIERSKI Greg J</i>	Title / Member <i>Pres</i>	Date <i>05/05/22</i>
Signature <i>Greg Kazmierki</i>	Phone Number <i>262-547-0535</i>	Email Address

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk	Date reported to council / board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Instructions for Renewal Alcohol Beverage License Application

THIS RENEWAL FORM CANNOT BE USED IF:

1. There is a change in business entity (i.e., individual has changed to partnership or corporation/limited liability company; partnership changed to individual or corporation/limited liability company; corporation changed to individual, partnership or limited liability company) and if limited liability company has been dissolved.
2. Partners are added or dropped.
3. Application is made in a different municipality.

PARTNERSHIPS:

Indicate full name and home address of each partner. One partner must sign application. **Reminder:** If partners have been added or dropped since your last application, you must use Form AT-106 (Original Beverage License Application).

CORPORATIONS:

One officer must sign application. Be sure to answer Question No. 7 by indicating any change of officers, directors, and/or changes in home address. If there are any changes in officers and/or directors each must complete Form AT-103 (Auxiliary Questionnaire). If there has been a change in agent since your last approved agent, he/she must complete Forms AT-104 (Schedule for Appointment of Agent) **AND** AT-103 (Auxiliary Questionnaire) in addition to this (AT-115) form.

LIMITED LIABILITY COMPANY:

One member/manager must sign application. Follow procedure under Corporations for any change of members or agent.

NOTE: Use ink or typewriter when filling in applications. Be sure to answer all questions fully and accurately. 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.

DISCRIMINATION CLAUSE – (City of Milwaukee only)

The applicant shall not willfully refuse to provide those services offered under this license or refuse to employ or discharge any person otherwise qualified because of race, color, creed, sex, national origin or ancestry, the applicant shall not seek information as a condition of employment, or penalize any employee or discriminate in the selection of personnel for training or promotion solely on the basis of such information. The applicant also shall not discriminate against any member of the military service dressed in uniform by willfully refusing services offered under this license.

Complete, sign and return this form to the clerk.

If answer to Questions No. 6a and/or 6b on page 2 are "YES," outline details below:

CONVICTIONS

1. NAME _____	STATUTE NO./LOCAL ORDINANCE _____
CHARGE _____	WHERE CONVICTED _____
DATE _____ PENALTY _____	<input type="checkbox"/> MISDEMEANOR <input type="checkbox"/> FELONY
2. NAME _____	STATUTE NO./LOCAL ORDINANCE _____
CHARGE _____	WHERE CONVICTED _____
DATE _____ PENALTY _____	<input type="checkbox"/> MISDEMEANOR <input type="checkbox"/> FELONY
3. NAME _____	STATUTE NO./LOCAL ORDINANCE _____
CHARGE _____	WHERE CONVICTED _____
DATE _____ PENALTY _____	<input type="checkbox"/> MISDEMEANOR <input type="checkbox"/> FELONY

PENDING CHARGE

1. NAME _____	STATUTE NO./LOCAL ORDINANCE _____
PENDING CHARGE _____	DATE _____

Auxiliary Questionnaire Alcohol Beverage License Application

Submit to municipal clerk.

Individual's Full Name (please print) (last name)		(first name)		(middle name)	
KAZMIERSKI		Greg		Joseph	
Home Address (street/route)	Post Office	City	State	Zip Code	
W3305760 City Rd EE		Mukwonago	WI	53149	
[Redacted]				Place of Birth	
[Redacted]				Milwaukee	

The above named individual provides the following information as a person who is (check one):

- Applying for an alcohol beverage license as an **individual**.
- A member of a **partnership** which is making application for an alcohol beverage license.
- Greg Kazmierski Pres of Buck Pub Outfitters, Ltd.
(Officer / Director / Member / Manager / Agent) (Name of Corporation, Limited Liability Company or Nonprofit Organization)
- which is making application for an alcohol beverage license.

The above named individual provides the following information to the licensing authority:

- How long have you continuously resided in Wisconsin prior to this date? _____
- Have you ever been convicted of any offenses (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of any other states or ordinances of any county or municipality? Yes No
 If yes, give law or ordinance violated, trial court, trial date and penalty imposed, and/or date, description and status of charges pending. (If more room is needed, continue on reverse side of this form.) _____
- Are charges for any offenses presently pending against you (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of other states or ordinances of any county or municipality? Yes No
 If yes, describe status of charges pending. _____
- Do you hold, are you making application for or are you an officer, director or agent of a corporation/nonprofit organization or member/manager/agent of a limited liability company holding or applying for any other alcohol beverage license or permit? Yes No
 If yes, identify. _____
(Name, Location and Type of License/Permit)
- Do you hold and/or are you an officer, director, stockholder, agent or employe of any person or corporation or member/manager/agent of a limited liability company holding or applying for a wholesale beer permit, brewery/winery permit or wholesale liquor, manufacturer or rectifier permit in the State of Wisconsin? Yes No
 If yes, identify. _____
(Name of Wholesale Licensee or Permittee) (Address By City and County)
- Named individual must list in chronological order last two employers.

Employer's Name <u>Buck Pub Archery</u>	Employer's Address <u>N31N28400 Silvernail Rd</u>	Employed From <u>1978</u>	To <u>2021</u>
Employer's Name <u>Egofskie Porter Drilling</u>	Employer's Address <u>out of business</u>	Employed From <u>1973</u>	To <u>1978</u>

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees 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 the 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. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.


(Signature of Named Individual)

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 an officer of the corporation/organization or one member/manager of a limited liability company and the recommendation made by the proper local official.

To the governing body of: Town Village City of Delafield County of Waukesha

The undersigned duly authorized officer/member/manager of Buck Pub Outfitters Ltd.
(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 Buck Pub Outfitters, Ltd.
(Trade Name)

located at N13 W28400 Silverhill Rd Pewaukee 53072

appoints Greg Kazmierski
(Name of Appointed Agent)

W330 S7650 Cty Rd EE Mukwonago 53149
(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? 66 yrs

Place of residence last year _____

For: _____
(Name of Corporation / Organization / Limited Liability Company)

By: _____
(Signature of Officer / Member / Manager)

Any person who knowingly provides materially false information in an application for a license may be required to forfeit not more than \$1,000.

ACCEPTANCE BY AGENT

I, Greg Kazmierski, 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.

Greg Kazmierski 5/5/22
(Signature of Agent) (Date)

Agent's age

Date of birth

(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)



WISCONSIN DEPARTMENT OF REVENUE
PO BOX 8902
MADISON, WI 53708-8902

Contact Information:

2135 RIMROCK RD PO BOX 8902
MADISON, WI 53708-8902
ph: 608-266-2776 fax: 608-264-6884
email: DORBusinessTax@revenue.wi.gov
website: revenue.wi.gov

Letter ID L1008267360

BUCK RUB OUTFITTERS, LTD.
N13W28400 SILVERNAIL RD
PEWAUKEE WI 53072-5162

Wisconsin Department of Revenue Seller's Permit

Legal/real name: BUCK RUB OUTFITTERS, LTD.

Business name:
N13W28400 SILVERNAIL RD
PEWAUKEE WI 53072-5162

- This certificate confirms you are registered with the Wisconsin Department of Revenue and authorized in the business of selling tangible personal property and taxable services.
- You may not transfer this permit.
- This permit must be displayed at the place of business and is not valid at any other location.
- If your business is not operated from a fixed location, you must carry or display this permit at all events.

Tax Type

Sales & Use Tax

Account Type

Seller's Permit

Account Number

456-0000204271-03

TOWN OF DELAFIELD

W302N1254 Maple Avenue Phone: 262-646-2398
Delafield, WI 53018 Fax: 262-646-8687

Receipt Number: _____
Amount Paid: \$5.00
License Number: _____

**APPLICATION FOR SODA WATER BEVERAGE LICENSE
TOWN OF DELAFIELD**

To the Town Board of the Town of Delafield
Waukesha County, Wisconsin

The undersigned hereby makes application of a license for the sale of Soda Water Beverages at the following described premises in the Town of Delafield:

Business Name: Book Pub Outfitters, Ltd.

Street Address: N13W28400 Silvernail Rd Pewaukee 53072

Name of Applicant (Please Print): Greg Kazmierki

All licenses are effective from July 1st of the year applied for through June 30th of the following year, subject to all provisions of Wisconsin Statutes, Section 66.0433 (2), and all regulations adopted by the Town Board. Licenses applied for after July 1st will expire on June 30th of the following year.

Applicant Signature Greg Kazmierki Date 5/5/22

Applicant Address (if different from business location):
W330 S7650 Cty Rd EE Mukwonago WI 53149

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 07/01/2022 ending: 06/30/2023
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: Town of } DELAFIELD
 Village of }
 City of }

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

Check one: Individual Limited Liability Company
 Partnership Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company	Address of Corporation / Limited Liability Company (if different from licensed premises)
<u>WESTERN LAKES GOLF CLUB</u>	

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent.

Agent Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
<u>ESSIG</u>	<u>GREGORY</u>	<u>DONALD</u>	<u>W338 53715 MESA TRAIL, DOWNSMAN, WI 53118</u>

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

President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
<u>ESSIG</u>	<u>GREGORY</u>	<u>DONALD</u>	<u>W338 53715 MESA TRAIL, DOWNSMAN, WI 53118</u>
Vice President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Secretary / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
<u>ESSIG</u>	<u>PAULA</u>	<u>MARIE</u>	<u>W338 53715 MESA TRAIL, DOWNSMAN, WI 53118</u>
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
<u>HOELZ</u>	<u>JASON</u>	<u>CHRISTOPHER</u>	<u>W312 N983 CHURCHVIEW DR, WAUKESHA, WI 53188</u>
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

C. Business Information

- Trade Name WESTERN LAKES GOLF CLUB Business Phone Number 262-691-0900
- Address of Premises W357 N963 OAKTON ROAD Post Office & Zip Code PWAWKEE, WI 53072

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.)

CLUBHOUSE (TURN BAR, MAIN BAR & TENT BAR), PRO SHOP, BEVERAGE CARTS, HALFWAY HARRY'S (ON COURSE BAR)

Applicant's Wisconsin Seller's Permit Number	
<u>456-0000531137-03</u>	
FEIN Number	
<u>39-1609094</u>	
TYPE OF LICENSE REQUESTED	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$ <u>100</u>
<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	\$ <u>500</u>
<input type="checkbox"/> Reserve Class B liquor	\$
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$ <u>30</u>
TOTAL FEE	\$ <u>630</u>

5. Legal description (omit if street address is given on previous page): _____
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, 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 page 3** 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 page 3** 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 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
12. Does the applicant owe municipal property taxes, assessments, or other fees? Yes No
 (**Note:** Renewal of licenses may be denied pursuant to a local ordinance, if the licensee owes municipal taxes, assessments or other fees).

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees 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 the 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. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Contact Person's Name (Last, First, M.I.) ESSIG, GREGORY D.	Title / Member PRESIDENT	Date 5/6/22
Signature <i>Greg Essig D.</i>	Phone Number [REDACTED]	Email Address [REDACTED]

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk 5/6/2022	Date reported to council / board 5/24/2022	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Instructions for Renewal Alcohol Beverage License Application

THIS RENEWAL FORM CANNOT BE USED IF:

1. There is a change in business entity (i.e., individual has changed to partnership or corporation/limited liability company; partnership changed to individual or corporation/limited liability company; corporation changed to individual, partnership or limited liability company) and if limited liability company has been dissolved.
2. Partners are added or dropped.
3. Application is made in a different municipality.

PARTNERSHIPS:

Indicate full name and home address of each partner. One partner must sign application. **Reminder:** If partners have been added or dropped since your last application, you must use Form AT-106 (Original Beverage License Application).

CORPORATIONS:

One officer must sign application. Be sure to answer Question No. 7 by indicating any change of officers, directors, and/or changes in home address. If there are any changes in officers and/or directors each must complete Form AT-103 (Auxiliary Questionnaire). If there has been a change in agent since your last approved agent, he/she must complete Forms AT-104 (Schedule for Appointment of Agent) **AND** AT-103 (Auxiliary Questionnaire) in addition to this (AT-115) form.

LIMITED LIABILITY COMPANY:

One member/manager must sign application. Follow procedure under Corporations for any change of members or agent.

NOTE: Use ink or typewriter when filling in applications. Be sure to answer all questions fully and accurately. 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.

DISCRIMINATION CLAUSE – (City of Milwaukee only)

The applicant shall not willfully refuse to provide those services offered under this license or refuse to employ or discharge any person otherwise qualified because of race, color, creed, sex, national origin or ancestry, the applicant shall not seek information as a condition of employment, or penalize any employee or discriminate in the selection of personnel for training or promotion solely on the basis of such information. The applicant also shall not discriminate against any member of the military service dressed in uniform by willfully refusing services offered under this license.

Complete, sign and return this form to the clerk.

If answer to Questions No. 6a and/or 6b on page 2 are "YES," outline details below:

CONVICTIONS

1. NAME _____ STATUTE NO./LOCAL ORDINANCE _____
CHARGE _____ WHERE CONVICTED _____
DATE _____ PENALTY _____ MISDEMEANOR FELONY
2. NAME _____ STATUTE NO./LOCAL ORDINANCE _____
CHARGE _____ WHERE CONVICTED _____
DATE _____ PENALTY _____ MISDEMEANOR FELONY
3. NAME _____ STATUTE NO./LOCAL ORDINANCE _____
CHARGE _____ WHERE CONVICTED _____
DATE _____ PENALTY _____ MISDEMEANOR FELONY

PENDING CHARGE

1. NAME _____ STATUTE NO./LOCAL ORDINANCE _____
PENDING CHARGE _____ DATE _____

Auxiliary Questionnaire Alcohol Beverage License Application

Submit to municipal clerk.

Individual's Full Name (please print) (last name)		(first name)		(middle name)	
ESSIG		GREGORY		DONALD	
Home Address (street/route)		Post Office	City	State	Zip Code
W388 S3715 MESATRAIL			DOWSMAN	WI	53118
Home Phone Number		Age	Date of Birth	Place of Birth	

The above named individual provides the following information as a person who is (check one):

- Applying for an alcohol beverage license as an **individual**.
- A member of a **partnership** which is making application for an alcohol beverage license.
- AGENT** of **WESTERN LAKES GOLF CLUB**
(Officer / Director / Member / Manager / Agent) (Name of Corporation, Limited Liability Company or Nonprofit Organization)

which is making application for an alcohol beverage license.

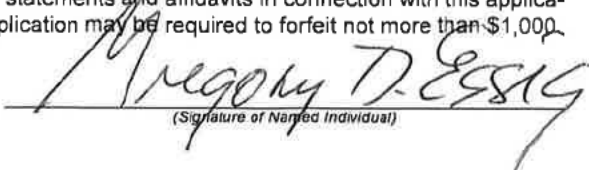
The above named individual provides the following information to the licensing authority:

1. How long have you continuously resided in Wisconsin prior to this date? _____
2. Have you ever been convicted of any offenses (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of any other states or ordinances of any county or municipality? Yes No
 If yes, give law or ordinance violated, trial court, trial date and penalty imposed, and/or date, description and status of charges pending. (If more room is needed, continue on reverse side of this form.) _____
3. Are charges for any offenses presently pending against you (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of other states or ordinances of any county or municipality? Yes No
 If yes, describe status of charges pending. _____
4. Do you hold, are you making application for or are you an officer, director or agent of a corporation/nonprofit organization or member/manager/agent of a limited liability company holding or applying for any other alcohol beverage license or permit? Yes No
 If yes, identify. _____
(Name, Location and Type of License/Permit)
5. Do you hold and/or are you an officer, director, stockholder, agent or employe of any person or corporation or member/manager/agent of a limited liability company holding or applying for a wholesale beer permit, brewery/winery permit or wholesale liquor, manufacturer or rectifier permit in the State of Wisconsin? Yes No
 If yes, identify. _____
(Name of Wholesale Licensee or Permittee) (Address By City and County)

6. Named individual must list in chronological order last two employers.

Employer's Name	Employer's Address	Employed From	To
WESTERN LAKES GOLF CLUB	W387 N1163 OAKTON RD, PEWAUKEE, WI	1988	PRESENT
Employer's Name	Employer's Address	Employed From	To

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees 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 the 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. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.


 (Signature of Named Individual)

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 an officer of the corporation/organization or one member/manager of a limited liability company and the recommendation made by the proper local official.

To the governing body of: Town Village City of DELAFIELD County of WAUKESHA

The undersigned duly authorized officer/member/manager of WESTERN LAKES GOLF CLUB
(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 WESTERN LAKES GOLF CLUB
(Trade Name)

located at W287 N1963 BAYTON ROAD, PEWAUKEE, WI 53072

appoints GREGORY DONALD ESSIG
(Name of Appointed Agent)

W238 S3715 MESA TRAIL, DOUSMAN, WI 53118
(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? 49 years

Place of residence last year W238 S3715 MESA TRAIL, DOUSMAN, WI 53118

For: WESTERN LAKES GOLF CLUB
(Name of Corporation / Organization / Limited Liability Company)

By: _____
(Signature of Officer / Member / Manager)

Any person who knowingly provides materially false information in an application for a license may be required to forfeit not more than \$1,000.

ACCEPTANCE BY AGENT

I, GREGORY DONALD ESSIG, 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.

Gregory D. Essig 5/6/22
(Signature of Agent) (Date)

Agent's age

Date of birth

W238 S3715 MESA TRAIL, DOUSMAN, WI 53118
(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)

TOWN OF DELAFIELD

W302N1254 Maple Avenue Phone: 262-646-2398
Delafield, WI 53018 Fax: 262-646-8687

Receipt Number: _____
Amount Paid: \$5.00
License Number: _____

**APPLICATION FOR SODA WATER BEVERAGE LICENSE
TOWN OF DELAFIELD**

To the Town Board of the Town of Delafield
Waukesha County, Wisconsin

The undersigned hereby makes application of a license for the sale of Soda Water Beverages at the following described premises in the Town of Delafield:

Business Name: WESTERN LAKES GOLF CLUB

Street Address: W287 N1963 OAKTON RD, PEWANEE, WI 53072

Name of Applicant (Please Print): GREGORY DONALD ESSIG

All licenses are effective from July 1st of the year applied for through June 30th of the following year, subject to all provisions of Wisconsin Statutes, Section 66.0433 (2), and all regulations adopted by the Town Board. Licenses applied for after July 1st will expire on June 30th of the following year.

Applicant Signature Gregory D. Essig Date 5/6/22

Applicant Address (if different from business location):

W238 S3715 MESA TRAIL, DOWSMAN, WI 53118



WISCONSIN DEPARTMENT OF REVENUE
 PO BOX 8902
 MADISON, WI 53708-8902

Contact Information:

2135 RIMROCK RD PO BOX 8902
 MADISON, WI 53708-8902
 ph: 608-266-2776 fax: 608-327-0235
 email: DORBusinessTax@wisconsin.gov
 website: revenue.wi.gov



WESTERN LAKES GOLF CLUB, INC.
 W287N1963 OAKTON RD
 PEWAUKEE WI 53072-5080

Letter ID L1028214992



Wisconsin Business Tax Registration Certificate

Expiration date: April 30, 2024

Legal/real name: WESTERN LAKES GOLF CLUB, INC.

- This certificate confirms that you are registered with the Wisconsin Department of Revenue for the tax types shown below.
- This registration certificate is not a seller's permit, and should not be used as proof that you hold a seller's permit.
- You may not transfer this certificate to any other individual or business.

Tax Type	Account Type	Number
Sales & Use Tax	Sales & Use Tax	456-0000531137-03
Withholding Tax	Withholding Tax	036-0000531137-04

The following is a list of the business locations that you have registered with the Department of Revenue.

456-0000531137-03
WESTERN LAKES GOLF CLUB, INC.
WESTERN LAKES GOLF CLUB
W287N1963 OAKTON RD
PEWAUKEE WI 53072-5080

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. Read instructions on page 3.)

For the license period beginning: 7/1/2022 ending: 6/30/2023
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: Town of } Delafield
 Village of }
 City of }

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

Check one: Individual Limited Liability Company
 Partnership Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company: Pewaukee Yacht Club, Inc Address of Corporation / Limited Liability Company (if different from licensed premises): P.O. Box 101, Pewaukee, WI 53072

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent.

Agent Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
<u>Schnittke</u>	<u>Briana</u>	<u>M</u>	<u>307 E Wisconsin Ave Pewaukee, WI 53072</u>

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

President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
<u>Weber</u>	<u>Matt</u>		
<u>Perrigo</u>	<u>Dave</u>		
<u>Esser</u>	<u>Kim</u>		<u>N39 W27493 Hillside Grove Rd, Pewaukee WI 53072</u>
<u>Duchow</u>	<u>Craig</u>		<u>N22 W28192 Louis Ave Pewaukee WI 53072</u>
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

C. Business Information

1. Trade Name Pewaukee Yacht Club Business Phone Number 262-691-9927
 2. Address of Premises N22 W28204 Edgewater Dr. Post Office & Zip Code Pewaukee, WI 53072

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.)

One Strong Frame and metal Storage shed

Applicant's Wisconsin Seller's Permit Number	
<u>456-1020156327-03</u>	
FEIN Number	
TYPE OF LICENSE REQUESTED	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$ <u>100.00</u>
<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	\$ <u>500.00</u>
<input type="checkbox"/> Reserve Class B liquor	\$
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$ <u>30.00</u>
TOTAL FEE	\$

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 an officer of the corporation/organization or one member/manager of a limited liability company and the recommendation made by the proper local official.

To the governing body of: Town Village City of Delafield County of Waukesha

The undersigned duly authorized officer/member/manager of Pewaukee Yacht Club, 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 Pewaukee Yacht Club
(Trade Name)

located at 122 W28204 Edgewater Dr. Pewaukee, WI 53072

appoints Briana Schnittke
(Name of Appointed Agent)

367 E Wisconsin Ave Pewaukee, WI 53072
(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? 36

Place of residence last year _____

For: _____
(Name of Corporation / Organization / Limited Liability Company)

By: _____
(Signature of Officer / Member / Manager)

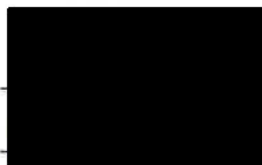
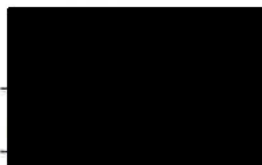
Any person who knowingly provides materially false information in an application for a license may be required to forfeit not more than \$1,000.

ACCEPTANCE BY AGENT

I, Briana Schnittke, 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.

Briana Schnittke 4-14-2022
(Signature of Agent) (Date)
367 E Wisconsin Ave Pewaukee WI 53072
(Home Address of Agent)

Agent's age 
Date of birth 

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)

Auxiliary Questionnaire Alcohol Beverage License Application

Submit to municipal clerk.

Individual's Full Name (please print) (last name) Schnittke		(first name) Briana		(middle name) M	
Home Address (street/route) 367 E WISCONSIN AVE		Post Office	City Pewaukee	State WI	Zip Code 53072
Home Phone Number		Age	Date of Birth	Place of Birth	

The above named individual provides the following information as a person who is (check one):

Applying for an alcohol beverage license as an **individual**.
 A member of a **partnership** which is making application for an alcohol beverage license.
 Agent of **Pewaukee Yacht Club**
(Officer / Director / Member / Manager / Agent) (Name of Corporation, Limited Liability Company or Nonprofit Organization)

which is making application for an alcohol beverage license.

The above named individual provides the following information to the licensing authority:

- How long have you continuously resided in Wisconsin prior to this date? 36 years
- Have you ever been convicted of any offenses (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of any other states or ordinances of any county or municipality? Yes No
If yes, give law or ordinance violated, trial court, trial date and penalty imposed, and/or date, description and status of charges pending. (If more room is needed, continue on reverse side of this form.)
- Are charges for any offenses presently pending against you (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of other states or ordinances of any county or municipality? Yes No
If yes, describe status of charges pending.
- Do you hold, are you making application for or are you an officer, director or agent of a corporation/nonprofit organization or member/manager/agent of a limited liability company holding or applying for any other alcohol beverage license or permit? Yes No
If yes, identify. (Name, Location and Type of License/Permit)
- Do you hold and/or are you an officer, director, stockholder, agent or employe of any person or corporation or member/manager/agent of a limited liability company holding or applying for a wholesale beer permit, brewery/winery permit or wholesale liquor, manufacturer or rectifier permit in the State of Wisconsin? Yes No
If yes, identify. (Name of Wholesale Licensee or Permittee) (Address By City and County)

6. Named individual must list in chronological order last two employers.

Employer's Name Messner Catholic Schools	Employer's Address 514 N 31st St. Milwaukee WI 53208	Employed From	To Present
Employer's Name	Employer's Address	Employed From	To

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees 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 the 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. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.


 (Signature of Named Individual)

TOWN OF DELAFIELD

W302N1254 Maple Avenue Phone: 262-646-2398
Delafield, WI 53018 Fax: 262-646-8687

Receipt Number: _____ Amount Paid: <u>\$5.00</u> License Number: _____
--

**APPLICATION FOR SODA WATER BEVERAGE LICENSE
TOWN OF DELAFIELD**

To the Town Board of the Town of Delafield
Waukesha County, Wisconsin

The undersigned hereby makes application of a license for the sale of Soda Water
Beverages at the following described premises in the Town of Delafield:

Business Name: Pewaukee Yacht Club, inc

Street Address: N22 W28204 Edgewater, Dr. Pewaukee WI 53072

Name of Applicant (Please Print): Briana Schnittke

All licenses are effective from July 1st of the year applied for through June 30th of the
following year, subject to all provisions of Wisconsin Statutes, Section 66.0433 (2), and
all regulations adopted by the Town Board. Licenses applied for after July 1st will expire
on June 30th of the following year.

Applicant Signature Briana Schnittke Date 4-14-2022

Applicant Address (if different from business location):
307 E Wisconsin Ave Pewaukee, WI 53072

Auxiliary Questionnaire Alcohol Beverage License Application

Submit to municipal clerk.

Individual's Full Name (please print) (last name) <u>Wtz</u>		(first name) <u>Christopher</u>		(middle name) <u>W</u>	
Home Address (street/route) <u>N27W2703R Woodland Dr</u>		Post Office	City <u>Pewaukee</u>	State <u>WI</u>	Zip Code <u>53072</u>
Home Phone Number	Age	Date of Birth	Place of Birth		

The above named individual provides the following information as a person who is (check one):

- Applying for an alcohol beverage license as an **individual**.
- A member of a **partnership** which is making application for an alcohol beverage license.

_____ of _____
(Officer / Director / Member / Manager / Agent) (Name of Corporation, Limited Liability Company or Nonprofit Organization)

which is making application for an alcohol beverage license.

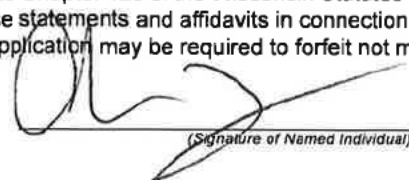
The above named individual provides the following information to the licensing authority:

1. How long have you continuously resided in Wisconsin prior to this date? _____
2. Have you ever been convicted of any offenses (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of any other states or ordinances of any county or municipality? Yes No
 If yes, give law or ordinance violated, trial court, trial date and penalty imposed, and/or date, description and status of charges pending. (If more room is needed, continue on reverse side of this form.) _____
3. Are charges for any offenses presently pending against you (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of other states or ordinances of any county or municipality? Yes No
 If yes, describe status of charges pending. _____
4. Do you hold, are you making application for or are you an officer, director or agent of a corporation/nonprofit organization or member/manager/agent of a limited liability company holding or applying for any other alcohol beverage license or permit? Yes No
 If yes, identify. _____
(Name, Location and Type of License/Permit)
5. Do you hold and/or are you an officer, director, stockholder, agent or employe of any person or corporation or member/manager/agent of a limited liability company holding or applying for a wholesale beer permit, brewery/winery permit or wholesale liquor, manufacturer or rectifier permit in the State of Wisconsin? Yes No
 If yes, identify. _____
(Name of Wholesale Licensee or Permittee) (Address By City and County)

6. Named individual must list in chronological order last two employers.

Employer's Name	Employer's Address	Employed From	To
Employer's Name	Employer's Address	Employed From	To

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees 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 the 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. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.



(Signature of Named Individual)

Auxiliary Questionnaire Alcohol Beverage License Application

Submit to municipal clerk.

Individual's Full Name (please print) (last name)		(first name)		(middle name)	
Gialante		Lauren		Ann	
Home Address (street/route)	Post Office	City	State	Zip Code	
458 Park Ave		Pewaukee	WI	53072	
Home Phone Number	Age	Date of Birth	Place of Birth		
[REDACTED]					

The above named individual provides the following information as a person who is (check one):

- Applying for an alcohol beverage license as an individual.
- A member of a partnership which is making application for an alcohol beverage license.

Officer of Pewaukee Yacht Club
(Officer / Director / Member / Manager / Agent) (Name of Corporation, Limited Liability Company or Nonprofit Organization)

which is making application for an alcohol beverage license.

The above named individual provides the following information to the licensing authority:

1. How long have you continuously resided in Wisconsin prior to this date? 30 years
2. Have you ever been convicted of any offenses (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of any other states or ordinances of any county or municipality? Yes No
 If yes, give law or ordinance violated, trial court, trial date and penalty imposed, and/or date, description and status of charges pending. (If more room is needed, continue on reverse side of this form.)
3. Are charges for any offenses presently pending against you (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of other states or ordinances of any county or municipality? Yes No
 If yes, describe status of charges pending.
4. Do you hold, are you making application for or are you an officer, director or agent of a corporation/nonprofit organization or member/manager/agent of a limited liability company holding or applying for any other alcohol beverage license or permit? Yes No
 If yes, identify. _____
(Name, Location and Type of License/Permit)
5. Do you hold and/or are you an officer, director, stockholder, agent or employe of any person or corporation or member/manager/agent of a limited liability company holding or applying for a wholesale beer permit, brewery/winery permit or wholesale liquor, manufacturer or rectifier permit in the State of Wisconsin? Yes No
 If yes, identify. _____
(Name of Wholesale Licensee or Permittee) (Address By City and County)

6. Named individual must list in chronological order last two employers.

Employer's Name	Employer's Address	Employed From	To
Children's Wisconsin	8915 W. Connell Ct. Milwaukee WI 53224	01/2010	Current
Pro Health Care	117 W 24100 Riverwood Dr Waukesha WI 53188	08/2020	09/2021

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees 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 the 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. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Lauren Gialante
(Signature of Named Individual)

Auxiliary Questionnaire Alcohol Beverage License Application

Submit to municipal clerk.

Individual's Full Name (please print) (last name)		(first name)		(middle name)	
PERRIGO		DAVID		AARON	
Home Address (street/route)		Post Office	City	State	Zip Code
NAY W 30373 CRYSTAL MINGS DR.			PEWAUKEE	WI	53072
Home Phone Number	Age	Date of Birth	Place of Birth		
[REDACTED]					

The above named individual provides the following information as a person who is (check one):

- Applying for an alcohol beverage license as an individual.
- A member of a partnership which is making application for an alcohol beverage license.

_____ of _____
(Officer / Director / Member / Manager / Agent) (Name of Corporation, Limited Liability Company or Nonprofit Organization)

which is making application for an alcohol beverage license.

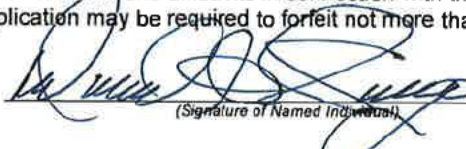
The above named individual provides the following information to the licensing authority:

- How long have you continuously resided in Wisconsin prior to this date? LIFE
- Have you ever been convicted of any offenses (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of any other states or ordinances of any county or municipality? Yes No
 If yes, give law or ordinance violated, trial court, trial date and penalty imposed, and/or date, description and status of charges pending. (If more room is needed, continue on reverse side of this form.)
- Are charges for any offenses presently pending against you (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of other states or ordinances of any county or municipality? Yes No
 If yes, describe status of charges pending.
- Do you hold, are you making application for or are you an officer, director or agent of a corporation/nonprofit organization or member/manager/agent of a limited liability company holding or applying for any other alcohol beverage license or permit? Yes No
 If yes, identify. _____
(Name, Location and Type of License/Permit)
- Do you hold and/or are you an officer, director, stockholder, agent or employe of any person or corporation or member/manager/agent of a limited liability company holding or applying for a wholesale beer permit, brewery/winery permit or wholesale liquor, manufacturer or rectifier permit in the State of Wisconsin? Yes No
 If yes, identify. _____
(Name of Wholesale Licensee or Permittee) (Address By City and County)

6. Named individual must list in chronological order last two employers.

Employer's Name	Employer's Address	Employed From	To
UBS FINANCIAL	17705 W. BLUEMOUND RD.	1997	PRESENT
Employer's Name	Employer's Address	Employed From	To

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees 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 the 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. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.


 (Signature of Named Individual)

Sprung Heating and Pump Service LLC

PO Box 3024
Merton, WI 53056
262-538-1400
sprungheating@gmail.com | www.SprungHeating.com



RECIPIENT:

Town of Delafield Highway Dept

N14w30782 Golf Rd
Delafield, Wisconsin 53018

SERVICE ADDRESS:

W329 s690 kettle moraine dr
Delafield, Wi 53018

Quote #1971

Sent on

05/05/2022

PRODUCT / SERVICE	DESCRIPTION	QTY.	TOTAL
Commercial Equipment Install	<p>This is a quotation for the replacement of the old furnace and installation of air conditioning. Cost includes:</p> <ol style="list-style-type: none">1. Removal and disposal of old unit2. Installation of an Armstrong 45000 BTU downflow furnace with a cased coil and 1.5 Ton condenser3. Media filter cabinet4. Line set5. Gas, low voltage, and venting connections6. Adding PVC intake pipe7. Honeywell T4 Thermostat8. Labor and materials <p>Line voltage wiring to condenser by others</p>	1	\$8,382.00*

* Non-taxable

AS REQUIRED BY THE WISCONSIN CONSTRUCTION LIEN LAW, BUILDER HEREBY NOTIFIES OWNER THAT PERSONS OR COMPANIES FURNISHING LABOR OR MATERIALS FOR THE CONSTRUCTION ON OWNER'S LAND MAY HAVE LIEN RIGHTS ON OWNER'S LAND AND BUILDINGS IF NO PAID. THOSE ENTITLED TO LIEN RIGHTS, IN ADDITION TO THE UNDERSIGNED BUILDER, ARE THOSE WHO CONTRACT DIRECTLY WITH THE OWNER OR WHO GIVE THE OWNER NOTICE WITHIN 60 DAYS AFTER THEY FIRST FURNISH LABOR OR MATERIALS FOR THE CONSTRUCTION. ACCORDINGLY, OWNER PROBABLY WILL RECEIVE NOTICES FORM THOSE WHO FURNISH LABOR OR MATERIALS FOR THE CONSTRUCTION, AND SHOULD GIVE A COPY OF EACH NOTICE RECEIVED TO HIS MORTGAGE LENDER, IF ANY. BUILDER AGREES TO CO-OPERATE WITH THE OWNER AND HIS LENDER, IF ANY, TO SEE THAT ALL POTENTIAL LIEN CLAIMANTS ARE DULY PAID.

Signature: _____ Date: _____



A PERFECT ENVIRONMENT

Residential Recreational Responsible

Chair
Ron Troy
Supervisors
Edward Kranick
Steve Michels
Joe Woelfle
Magalie Miller
Clerk/Treasurer
Dan Green

To: Town Chairman
Town Board Members
From: Dan Green, Administrator
Date: May 24, 2022
Subject: Fee Schedule Amendments

Overview:

The fee schedule amendments being proposed are based on local prices for building permits. Safebuilt proposed the changes outlined in the attached document to stay current. The fee schedule was updated last year, and we will be reviewing the schedule every year to ensure we are staying on top of price fluctuations. The only other changes that are not related to building permits fees are the park reservation fees. The increase is only reflecting the increase in the refundable deposit that went from \$50 to \$100.

Recommendation: Staff recommends approval of the revised 2022 fee schedule as submitted.

Town of Delafield Fee Schedule

Clerk's Office Fees

Licenses

Class "A" Beer.....	\$100.00
Class "B" Beer.....	\$100.00
"Class A" Liquor.....	\$500.00
"Class B" Liquor.....	\$500.00
"Class C" Wine.....	\$100.00
Special Class "B" (Picnic).....	10.00
Reserve "Class B" Liquor.....	\$10,000.00
Cigarette.....	\$100.00
Soda.....	\$5.00
Bartender's License (2-year).....	\$40.00
Direct Seller/Peddler (90 day).....	\$100.00
<i>(\$25.00 Registration fee & \$75.00 License Fee)</i>	

Administrative Fees

Publication/Administrative Fee Liquor/Beer).....	\$30.00
Background Check (Liquor/Beer/Bartender).....	\$10.00

Dog/Chicken License

Male/Female (unaltered).....	\$15.00
Neutered/Spayed.....	\$10.00
Hobby Kennel (4 or more dogs).....	\$25.00
<i>(Conditional Use Permit Required. See Engineering Fees below)</i>	
Chicken License.....	\$75.00 new/\$25 renewal
Dog at Large – 1 st offense.....	\$50.00
Dog at Large – 2 nd offense.....	\$75.00
Dog at Large – 3 rd offense.....	\$100.00

Miscellaneous Fees

Photo Copies.....	\$.25/page
Poll List.....	Visit Wisconsin Election Commission website
Special Assessment Letters.....	\$25.00 (\$40.00 for 48 hr. notice)
Returned Check (NSF)	\$25.00
Garbage/Recycle pick up (New construction)	\$213.00

Plan Commission Fees

Site Plan/Plan of Operation.....	\$150.00
Site Grading Plan.....	\$50.00
Lighting Plan.....	\$50.00
Signage Plan.....	\$50.00
Preliminary Plat.....	\$300.00
Final Plat.....	\$150.00
Certified Survey Map.....	\$250.00
Developer's Agreement.....	\$100.00
Home Occupation.....	\$50.00
Zoning Amendment.....	\$300.00
Land Use Amendment.....	\$300.00
Conditional Use.....	\$225.00
Planned Unit Development.....	\$225.00
Conceptual Plan Review.....	\$100.00
Other.....	\$50.00 min

Building Inspector Fees

Residential

Zoning Permit Fees

New Dwelling	\$290.00
Addition/Alteration	\$180.00
Accessory Building, Fence, Decks, Pools	\$140.00

Building Permit Fees

New Dwelling	<i>\$.41/square foot of all floor areas</i>
Additions.....	<i>\$.41/square foot of all floor areas</i>
Remodels.....	<i>\$14.00 per \$1,000 of evaluation for remodels</i> <i>(Plus \$.33/square foot for accessory structures)</i>
Decks (less than 100 square feet).....	\$90.00
Decks (100 square feet or more).....	\$175.00
Sheds and Commercial Tents (400 square feet or more, 50+ occupants).....	\$70.00

Early Start..... \$230.00

Commercial

Zoning Permit Fees

New Structure Application Fee.....\$410.00

Addition/Alteration Application Fee\$360.00

Building Permit Fees

Multi-Family (3 family or more) Motels, CBRF.....\$.43/sq. ft.

Mercantile, Restaurants, Taverns Assembly Halls, Offices.....\$.41/sq. ft.

Schools, Institutional, Hospitals.....\$.41/sq. ft.

Manufacturing and Industrial.....\$.41/sq. ft.

Vehicle Repair and Vehicle Storage.....\$.41/sq. ft.

Warehouse, Mini Warehouse, Building Shells for\$.41/sq. ft.

Multi-Tenant Buildings.....\$.41/sq. ft.

Build-Out.....\$.41/sq. ft.

Signage Plan.....\$165.00 plus \$1.25/sq. ft.

Special Occupancies (Outdoor Pools, Towers, Tents, etc.).....\$14.00 per \$1,000 eval

Erosion Control.....\$275/first acre, \$135/second + acres

Remodel, Reroof, Residing.....\$70.00 plus \$.06 S.F. feet of all areas

Occupancy, Change of Use.....\$75.00/unit

Plan Review Fees

One and Two Family Residence.....\$275.00

Apartment, 3-Family Residence, Row Housing, Multi-Family Building.....\$300.00

Plus \$33/unit

Commercial/Industrial.....Per SBD 118

Additions to One & Two Family Dwellings.....\$95.00

Alterations to One & Two Family Dwellings.....\$70.00

Accessory Buildings, greater than 300 square feet.....\$75.00

Decks, Swimming Pools.....\$65.00

Heating, lighting and energy plans, including calcs to heating plans.....\$65.00 each

Occupancy Permit

Single-family/Multi-family Residential.....\$55.00/unit

Additions, Alterations or accessory buildings less than \$300 sq. ft.....\$55.00/unit

Commercial/Industrial building, Alterations & Additions.....\$230.00

Temporary Occupancy Permit (6 months or less).....\$580.00

Erosion Control Permit

New Home.....\$190.00

Addition.....\$95.00

Plumbing Permit

Residential

One & Two Family New Building/Addition.....\$75.00 plus \$.10 S.F. feet of all areas
One & Two Family Alteration.....\$75.00 plus \$.10 per S.F. Alteration area
Replacement & Miscellaneous Items.....\$75.00
Outside Sewer & Water.....980.00

Commercial

New Building/Addition.....\$75.00 plus \$.10 S.F. feet of all areas
Alterations.....\$75.00 plus \$.10 per S.F. Alteration area
Replacement & Miscellaneous Items.....\$75.00
Outside Sewer & Water.....\$90.00

Electrical Permit

Residential

One & Two Family New Building/Addition.....\$75.00 plus \$.10/S.F. feet of all areas
One & Two Family Alteration.....\$75.00 plus \$.10/S.F. Alteration area
Replacement & Miscellaneous Items.....\$75.00

Commercial

New Building/Addition.....\$75.00 plus \$.10/S.F. feet of all areas
Alterations.....\$75.00 plus \$.10/S.F. Alteration area
Replacement & Miscellaneous Items.....\$70.00

HVAC Permit

Residential

One & Two Family New Building/Addition.....\$75.00 plus \$.10/S.F. feet of all areas
One & Two Family Alteration.....\$75.00 plus \$.10/per S.F. Alteration area
Replacement & Miscellaneous Items.....\$75.00
Razing Fee.....\$95.00 plus \$.13/S.F. of all areas
Completion Deposit Inspection.....\$80.00/unit
Other.....\$105 min

Commercial

New Building/Addition.....\$70.00 plus \$.10/S.F. feet of all areas
Alterations.....\$70.00 plus \$.10/S.F. Alteration area
Replacement & Miscellaneous Items.....\$75.00
Commercial Plan Review - Certified Muni. Per SPS 302.31.....See SBD Form
Commercial/Industrial Exhaust Hoods and Exhaust Systems.....\$195/unit
Fire Suppression Systems.....\$75.00 plus \$.06/S.F. feet of all areas
Early Start Permit (Footings/Foundations per SPS 361.32).....\$80.00
Razing Fee.....\$95.00 plus \$.13/S.F. of all areas
Completion Deposit Inspection\$80.00/unit
Other.....\$105 min

Agricultural Buildings (Unheated)

New Buildings.....\$.08/sq. ft. all floor areas

Remodel.....	\$7.00/thousand of valuation
Other.....	\$70.00

Miscellaneous

Re-inspection Fee.....	\$70.00
Failure to call for inspection.....	\$70.00
<i>(Quad fees due if work is started before permit is issued)</i>	
<i>(Permit Renewal – 50% of the original permit fee amount)</i>	
Temporary Occupancy.....	\$115.00
Ditch & Occupancy Bond Inspection.....	\$70.00
State Seal.....	\$65.00
Occupancy Bond.....	\$1,000.00
Temporary Occupancy Bond.....	\$580.00
Ditch Bond.....	\$1,000.00
Engineering, Grade Set.....	\$40.00
New Construction Set.....	\$25.00
Impact Fee.....	\$1,993.00

Highway Department

Culvert Installation.....	\$23.65/foot
20 Foot Culvert.....	\$472.95
22 Foot Culvert.....	\$520.25
24 Foot Culvert.....	\$567.54
Labor.....	\$225.00
Weed/Grass Cutting.....	\$75.00/hour
Opening in Streets & Highways Permit.....	\$50.00
Roadway Cut-in Permit.....	\$150.00
After the Fact Roadway Cut-in Permit.....	\$300.00

Parks (All fees include \$100.00 refundable deposit)

Resident – 0 to 50 persons.....	\$150.00
Non Resident - 0 to 50 persons.....	\$170.00
Resident - 51-100 persons.....	\$175.00
Non Resident - 51 to 100 persons.....	\$195.00
Resident - Over 100 persons.....	\$200.00
Non Resident - Over 100 persons.....	\$220.00
Alcohol Permit Deposit - Resident or Non-Resident.....	\$100.00

Town of Delafield Fee Schedule

Clerk's Office Fees

Licenses

Class "A" Beer.....	\$100.00
Class "B" Beer.....	\$100.00
"Class A" Liquor.....	\$500.00
"Class B" Liquor.....	\$500.00
"Class C" Wine.....	\$100.00
Special Class "B" (Picnic).....	10.00
Reserve "Class B" Liquor.....	\$10,000.00
Cigarette.....	\$100.00
Soda.....	\$5.00
Bartender's License (2-year).....	\$40.00
Direct Seller/Peddler (90 day).....	\$100.00
<i>(\$25.00 Registration fee & \$75.00 License Fee)</i>	

Administrative Fees

Publication/Administrative Fee Liquor/Beer).....	\$30.00
Background Check (Liquor/Beer/Bartender).....	\$10.00

Dog/Chicken License

Male/Female (unaltered).....	\$15.00
Neutered/Spayed.....	\$10.00
Hobby Kennel (4 or more dogs).....	\$25.00
<i>(Conditional Use Permit Required. See Engineering Fees below)</i>	
Chicken License.....	\$75.00 new/\$25 renewal
Dog at Large – 1 st offense.....	\$50.00
Dog at Large – 2 nd offense.....	\$75.00
Dog at Large – 3 rd offense.....	\$100.00

Miscellaneous Fees

Photo Copies.....	\$.25/page
Poll List.....	Visit Wisconsin Election Commission website
Special Assessment Letters.....	\$25.00 (\$40.00 for 48 hr. notice)
Returned Check (NSF)	\$25.00
Garbage/Recycle pick up (New construction)	\$213.00

Plan Commission Fees

Site Plan/Plan of Operation.....	\$150.00
Site Grading Plan.....	\$50.00
Lighting Plan.....	\$50.00
Signage Plan.....	\$50.00
Preliminary Plat.....	\$300.00
Final Plat.....	\$150.00
Certified Survey Map.....	\$250.00
Developer’s Agreement.....	\$100.00
Home Occupation.....	\$50.00
Zoning Amendment.....	\$300.00
Land Use Amendment.....	\$300.00
Conditional Use.....	\$225.00
Planned Unit Development.....	\$225.00
Conceptual Plan Review.....	\$100.00
Other.....	\$50.00 min

Building Inspector Fees

Residential

Zoning Permit Fees

New Dwelling	\$290.00
Addition/Alteration	\$180.00
Accessory Building, Fence, Decks, Pools	\$140.00

Building Permit Fees

New Dwelling	\$.4137 /square foot of all floor areas
Additions.....	\$.3741 /square foot of all floor areas
Remodels.....	\$.1150 14.00 per \$1,000 of evaluation for

remodels

(Plus \$.303 /square foot for accessory structures)	
Decks (less than 100 square feet).....	\$9080.00
Decks (100 square feet or more).....	\$16075.00
Sheds and Commercial Tents (400 square feet or more, 50+ occupants).....	\$70.00

Early Start	\$2130.00
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Commercial

Zoning Permit Fees

New Structure Application Fee.....\$410.00
Addition/Alteration Application Fee\$360.00

Building Permit Fees

Multi-Family (3 family or more) Motels, CBRF.....\$.4337/sq. ft.
Mercantile, Restaurants, Taverns Assembly Halls, Offices.....\$.4135/sq. ft.
Schools, Institutional, Hospitals.....\$.3415/sq. ft.
Manufacturing and Industrial.....\$.4130/sq. ft.
Vehicle Repair and Vehicle Storage.....\$.4135/sq. ft.
Warehouse, Mini Warehouse, Building Shells for\$.4130/sq. ft.
Multi-Tenant Buildings.....\$.4130/sq. ft.
Build-Out.....\$.4135/sq. ft.
Signage Plan.....\$165.00 plus \$1.25/sq. ft.
Special Occupancies (Outdoor Pools, Towers, Tents, etc.).....\$12.5014.00 per \$1,000

eval

Erosion Control.....\$26075/first acre, \$1235/second + acres
Remodel, Reroof, Residing.....\$70.00 plus \$.06 S.F. feet of all areas
Occupancy, Change of Use.....\$705.00/unit

Plan Review Fees

One and Two Family Residence.....\$25075.00
Apartment, 3-Family Residence, Row Housing, Multi-Family Building.....\$300.00
Plus \$2733/unit

Commercial/Industrial.....Per SBD 118
Additions to One & Two Family Dwellings.....\$985.00
Alterations to One & Two Family Dwellings.....\$5570.00
Accessory Buildings, greater than 300 square feet.....\$765.00
Decks, Swimming Pools.....\$655.00
Heating, lighting and energy plans, including calcs to heating plans.....\$65.00 each

Occupancy Permit

Single-family/Multi-family Residential.....\$55.00/unit
Additions, Alterations or accessory buildings less than \$300 sq. ft.....\$55.00/unit
Commercial/Industrial building, Alterations & Additions.....\$21530.00
Temporary Occupancy Permit (6 months or less).....\$580.00

Erosion Control Permit

New Home.....\$17590.00
Addition.....\$985.00

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Plumbing Permit

Residential

- One & Two Family New Building/Addition.....\$705.00 plus \$.1006 S.F. feet of all areas
- One & Two Family Alteration.....\$750.00 plus \$.0610 per S.F. Alteration area
- Replacement & Miscellaneous Items.....\$705.00
- Outside Sewer & Water.....9\$80.00

Commercial

- New Building/Addition.....\$705.00 plus \$.0610 S.F. feet of all areas
- Alterations.....\$705.00 plus \$.0610 per S.F. Alteration area
- Replacement & Miscellaneous Items.....\$705.00
- Outside Sewer & Water.....\$980.00

Electrical Permit

Residential

- One & Two Family New Building/Addition.....\$705.00 plus \$.0610/S.F. feet of all areas
- One & Two Family Alteration.....\$705.00 plus \$.0610/S.F. Alteration area
- Replacement & Miscellaneous Items.....\$705.00

Commercial

- New Building/Addition.....\$705.00 plus \$.0106/S.F. feet of all areas
- Alterations.....\$705.00 plus \$.1006/S.F. Alteration area
- Replacement & Miscellaneous Items.....\$70.00

HVAC Permit

Residential

- One & Two Family New Building/Addition.....\$705.00 plus \$.0610/S.F. feet of all areas
- One & Two Family Alteration.....\$705.00 plus \$.0610/per S.F. Alteration area
- Replacement & Miscellaneous Items.....\$705.00
- Razing Fee.....\$975.00 plus \$.0513/S.F. of all areas
- Completion Deposit Inspection.....\$80.00/unit
- Other.....\$105 min

Commercial

- New Building/Addition.....\$70.00 plus \$.0610/S.F. feet of all areas
- Alterations.....\$70.00 plus \$.0610/S.F. Alteration area
- Replacement & Miscellaneous Items.....\$705.00
- Commercial Plan Review - Certified Muni. Per SPS 302.31.....See SBD Form
- Commercial/Industrial Exhaust Hoods and Exhaust Systems.....\$18095/unit
- Fire Suppression Systems.....\$6075.00 plus \$.06/S.F. feet of all areas
- Early Start Permit (Footings/Foundations per SPS 361.32).....\$80.00
- Razing Fee.....\$975.00 plus \$.0513/S.F. of all

areas

Completion Deposit Inspection\$80.00/unit
 Other.....\$105 min

Agricultural Buildings (Unheated)

New Buildings.....\$.08/sq. ft. all floor areas
 Remodel.....\$7.00/thousand of valuation
 Other.....\$70.00

Miscellaneous

Re-inspection Fee.....\$70.00
 Failure to call for inspection.....\$70.00
(Quad fees due if work is started before permit is issued)
(Permit Renewal – 50% of the original permit fee amount)
 Temporary Occupancy.....\$115.00
 Ditch & Occupancy Bond Inspection.....\$70.00
 State Seal.....\$65.00
 Occupancy Bond.....\$1,000.00
 Temporary Occupancy Bond.....\$580.00
 Ditch Bond.....\$1,000.00
 Engineering, Grade Set.....\$40.00
 New Construction Set.....\$25.00
 Impact Fee.....\$1,993.00

Highway Department

Culvert Installation.....\$23.65/foot
 20 Foot Culvert.....\$472.95
 22 Foot Culvert.....\$520.25
 24 Foot Culvert.....\$567.54
 Labor.....\$225.00
 Weed/Grass Cutting.....\$75.00/hour
 Opening in Streets & Highways Permit.....\$50.00
 Roadway Cut-in Permit.....\$150.00
 After the Fact Roadway Cut-in Permit.....\$300.00

Parks (All fees include \$100~~50~~.00 refundable deposit)

Resident – 0 to 50 persons.....\$150~~00~~.00
 Non Resident - 0 to 50 persons.....\$1270.00
 Resident - 51-100 persons.....\$1275.00
 Non Resident - 51 to 100 persons.....\$1945.00
 Resident - Over 100 persons.....\$15200.00

Non Resident - Over 100
persons.....-~~\$17~~2200.00
Alcohol Permit Deposit - Resident or Non-Resident.....\$100.00