A meeting of the City of Evansville Public Safety will be held on the date and time stated below. Requests for persons with disabilities who need assistance to participate in this meeting should be made by calling City Hall at (608) 882-2266 with as much notice as possible. Copies of the packet and agenda are available at:

www.ci.evansville.wi.gov/city government/public agendas minutes/public safety.php

#### **Public Safety Committee**

Regular Meeting Wednesday, June 7, 2023 6:00 p.m. City Hall, 31 S. Madison Street, Evansville, WI

#### **AGENDA**

- 1. Call to Order.
- 2. Roll Call.
- **3.** Motion to approve the Agenda.
- **4.** Motion to approve the May 3, 2023 Public Safety regular meeting minutes.
- **5.** Citizen appearances other than agenda items listed.
- 6. Old Business.
- 7. New Business.
  - **A.** Motion to approve the Operator's License Application(s) for: (recommended by Evansville Police Department).
    - 1) Stephen John Selgrat
    - 2) Candace Lee Andrews
    - 3) Debra J. Carlson
    - 4) Allan L Hurst
    - 5) Lynda Marie Laursen
    - 6) Brittany Lee Long
    - 7) John Paul Petterson
    - 8) David Duane Powers
    - 9) John Leigh Schneider
    - 10) Michelle Lee Thompson
    - 11) Marisol McElroy Lopez
    - 12) Michael John George
    - 13) John Thomas Meredith
    - 14) Dulcie Gwen Bergsma
    - 15) Denise Ann Halvensleben
    - **16)** Jessica Ann Hall
    - 17) Gail Mary Henry
    - 18) Karen M. Frey
    - 19) Jon M Frey
    - 20) Michael E. Maves

- 21) Michelle May Allen
- 22) Lisa A Sonnentag
- 23) Erin Margaret Bradley
- 24) Tiffany M. Myers
- 25) Michelle Marie Bauwens
- **26)** Tyler John Rufenacht
- 27) Grace Lynn Marshall
- 28) Madison Elizabeth Strahota
- 29) Amber Rae Knetter
- **B.** Discussion with possible motion to approve the Operator's License Application(s) for: (non-recommended by Evansville Police Department).
  - 1) Jacqueline Marie Tomlin

#### C. Discussion with possible motion to approve the Class "B"/Class B" Retailer License Application for:

- 1) Evansville Chamber of Commerce Business After 5: Hagen CPA, 1 N. Madison Street, Evansville, WI 53536 from 5 p.m. to 7 p.m. on August 8, 2023
- 2) Evansville Community Partnership Lake Leota 4<sup>th</sup> of July 15 Antes Drive, Evansville, WI 53536, Jim Brooks 563 6<sup>th</sup> St., Evansville, WI 53536
  - June 30, 2023 to July 4, 2023
- **3)** Evansville Underground Music Summer Series Evansville Underground Music 1<sup>st</sup> Street, Evansville, WI 53536 from 4 p.m. to 10 p.m.
  - Saturday, July 1, 2023
  - Friday, July 21, 2023
  - Saturday, August 26, 2023
  - Saturday, September 23, 2023
  - Saturday, October 14, 2023

#### D. Discussion with possible motion to approve the Long Term Street Use License Application for:

- 1) Evansville Underground Music Summer Series Evansville Underground Music 477 W. Main Street, Evansville, WI 53536 from 4 p.m. to 10 p.m. Closing 1<sup>st</sup> Street to Montgomery Court to Main Street.
  - Saturday, July 1, 2023
  - Friday, July 21, 2023
  - Saturday, August 26, 2023
  - Saturday, September 23, 2023
  - Saturday, October 14, 2023

#### E. Discussion on the Short Term Street Use License Application(s) for:

1) Friends of Eager Free Public Library 113 W. Church Street, Evansville, WI 53536. From 1<sup>st</sup> Street from Main to Montgomery Ct. from 4:00 p.m. to 8 p.m.

- Friday, June 30, 2023
- 2) <u>St. Paul Catholic Church</u> at 39 Garfield St, Evansville, WI 53536. From corner of Garfield Ave. & First Street and Montgomery Court from 2 p.m. to 6 p.m.
  - Sunday, June 11, 2023
- **8.** Evansville Police Department Report.
- **9.** Evansville Emergency Medical Services Report.
- 10. Meeting Reminder: Next regular meeting scheduled for Wednesday, July 5, 2023 at 6:00 p.m.
- 11. Motion to adjourn.

Erika Stuart, Chairperson

#### **Public Safety Committee**

Regular Meeting Wednesday, May 3, 2023 6:00 p.m. City Hall, 31 S. Madison Street, Evansville, WI

#### **MINUTES**

- 1. Call to Order. by Chairperson Stuart at 6:00 p.m.
- 2. Roll Call.

3. <u>Members</u>	Present/Absent	Others Present
Alderperson Erika Stuart, Chair	P	Patrick Reese, Chief
Alderperson Gene Lewis	P	Carolyn Kleisch, Chief
Alderperson Ben Corridon	P	Chris Jones, Lt.
		Rittenhouse, Det. Sgt
		Morgan Katzenmeyer, EMT
		Jolene Klitzman, Deputy Clerk
		Leah Hurtley, City Clerk
		Mark Schnepper, EUM President
		Greg Ardisson, Night Owl
		Orion Hunt, Senior project
		Dillon Elliott, Senior project
		Ann Elliott, Citizen

- 4. Motion to approve the Agenda. by Stuart, Seconded Corridon. Motion passed 3-0
- 5. Motion to approve the April 5, 2023 Public Safety regular meeting minutes. by Stuart, Seconded Corridon. Motion passed 3-0
- **6.** Citizen appearances other than agenda items listed. *None*
- 7. Old Business.
  - A. Discussion with possible motion to approve the <u>Temporary Class "B" Retailer's License Application for</u>: by Stuart, Seconded by Corridon.
    - 1) Evansville Underground Music (EUM), 23 N. First St, Evansville, WI 53536 for the following dates:
      - Friday, May 5, 2023 26 W. Main Street (Weirdo Thrift) *Motion passed 3-0*
      - Friday, June 2, 2023 23 N. First Street *Motion passed 3-0*
      - 1. Leah explained the 3 questions the committee had from the April 5, 2023 meeting on ordinance we justify the reasons to recommend or non-recommend.
      - 2. Corridon asked about paying for both license. EUM let us know a few days in advance which one they will need and pays for just that one.
      - 3. Stuart questioned the risk of setting a president, clerks explained the conditions needed to be able to hold the concerts.
      - 4. Chief Reese is good with using it for rain dates only as they have not seen any issues with underage or over serving issues.

#### **8.** New Business.

- **A.** Discussion on senior project "Run the Lake" at Lake Leota Park: Fundraiser for Cross County and Track program at the schools.
  - Saturday August 5<sup>th</sup> from 6 a.m. to 12 p.m., or (*Garage sale days*)
  - Saturday August 12<sup>th</sup> from 6 a.m. to 12 p.m.

Seniors Orion Hunt and Dillon Elliott explained their senior project to the committee on closing the park entrances to have a 5K fun run with the community/Alumni to raise funds to support the Evansville High School Cross Country and Track Teams. Chief Reese and Chief Kleisch asked for them to reach out to them for a meeting to finalize routes and what will be needed from them.

- **B.** Motion to approve the <u>Operator's License Application(s)</u> for: (recommended by Evansville Police Department unless otherwise noted).
  - 1) Quinatia A Faherty
  - 2) Mallory Elizabeth Isbell
  - 3) Ann Marie Reeves
  - 4) Mary Catherine Rooney
  - 5) Hannah Marie Vanthoernoot
  - 6) Dorry A. Weigel
  - 7) Anthony Alejandro Aranda
  - 8) Jeanette L. Gulledge

by Stuart, Seconded Corridon, Motion passed 3-0

- 9) James Alan Brooks
- 10) Jessica Elizabeth Golz
- 11) Jeremy James Welter
- 12) Linda Dawn Orton
- 13) David Alan Knoll
- 14) Christal R. Helgesen
- 15) Gregory B. Helgesen
- **16)** Forrest Palmer Johnson
- 17) Randy David Carlson
- 18) Erik J. Reines
- **19)** Kari Ann Fehrenbacher
- 20) John Carlos Lara
- 21) Joshua Michael Blosser
- 22) Dean William Colstad
- 23) Adam E. Crook
- **24)** Andrea Jean Hance (Provisional to expire May 9, 2023)

Discussion on ordinance with Vanthoernoot applicate and Chief Reese stating Hance has completed the trail with no issues and feels comfortable with allowing original operators license.

- C. Discussion with possible motion to approve the Short Term Street Use License Application(s) for:
  - 1) Evansville Tourism Commission at 228 W. Main St, Evansville, WI 53536. From Madison Street to the Railroad Tracks from 9 a.m. to 10 a.m.
    - Thursday, May 27, 2023 by Stuart, Seconded Corridon, Motion passes 3-0
- D. Discussion and motion to recommend to Common Council Ordinance 2023-06, Amending Chapter 6 Alcohol Beverages. Leah explained the changes and to why we were updating the ordinance. By Stuart, Seconded Corridon. Motion passed 3-0
- E. Motion to recommend to the Common Council approval of the Original Alcohol Beverage License Applications for a <u>Class A Beer/Class A Liquor License</u> for: (background check recommendations provided by Chief Reese, unless otherwise noted)
  - 1) Family Dollar Stores of Wisconsin, LLC, Priscilla Santos, Agent, 6627 33<sup>rd</sup> Avenue, Kenosha, WI 53142 d/b/a Family Dollar Store #24446, 28 County Highway M, Evansville, WI 53536 by Stuart, Seconded Corridon. Motion passed 3-0

Jonathan Crumly representative from Decisions Consulting was there to answer questions and informed the committee on how they will have staff, security and scanning of driver's license to purchase the alcohol.

Leah read an email from the landlords asking the committee to not approve the license as it is not in agreement with the signed lease. This is a civil suit action and the committee cannot refuse the license due to this request.

Corridon questioned why they were on for Original and Renewal. Explained the time frame is from July 1 to June 30 for licenses and they would like to not have a gap in their license so running both together.

- F. Motion to recommend to common council approval of the Original Alcohol Beverage License Application for Class B Beer/Class B Liquor License for:
  - 1) <u>Pete's Inn Inc.</u>, Bret Church, Agent, 555 S. Fifth Street, Evansville, WI 53536, d/b/a Pete's Inn Inc., 14 N. Madison Street, Evansville, WI 53536. by Stuart, Seconded Corrison. Motion passed 3-0 with pending condition of Chief Reese recommendation and police inspection recommendation.
- G. Motion to recommend to the Common Council approval of the Renewal Alcohol Beverage License Applications for a <u>Class A Beer/Class A Liquor License</u> for: (background check recommendations provided by Chief Reese, unless otherwise noted) by Stuart, Seconded Lewis. Motion passed 3-0
  - 1) <u>Casey's Marketing Company</u>, Anthony W. Hawks, Agent, 538 Biese Street, Combined Locks, WI 54113, d/b/a Casey's General Store # 3583, 230 E. Main Street, Evansville, WI 53536.
  - **2)** Kopecky's Worldwide Foods, Inc., James Dean Kopecky, Agent, 8017 N. Ridge Court, Evansville, WI, 53536, d/b/a Kopecky's Piggly Wiggly, 8 N. County Road M, Evansville, WI 53536.
  - 3) <u>Madison Street Express, Inc.</u>, Parminder K. Sekhon, Agent, 2644 Granite Road, Fitchburg, WI 53711, d/b/a All-N-One, 104 S. Madison Street, Evansville, WI 53536.
  - **4)** Olin Oil Co. Inc., Kristin Olin Olmedo, Agent, 603 E 2<sup>nd</sup> Avenue, Brodhead, WI 53520, d/b/a Evansville Gas N Go, 350 Union Street, Evansville, WI 53536.
  - 5) <u>Consumers Cooperative Oil Company</u>, Eric Cantwell, Agent, 1201 Jacob Dr. Prairie Du Sac, WI 53578 d/b/a Consumer Coop Oil Company, 9 John Lindemann Dr., Evansville, WI 53536
  - **6)** Family Dollar Stores of Wisconsin, LLC, Priscilla Santos, Agent, 6627 33<sup>rd</sup> Avenue, Kenosha, WI 53142 d/b/a Family Dollar Store #24446, 28 County Highway M, Evansville, WI 53536

- H. Motion to recommend to the Common Council approval of the Renewal Alcohol Beverage License applications for a Class B Beer/Class B Liquor License for: (background check recommendations provided by Chief Reese, unless otherwise noted) by Stuart, Seconded Corridon. Motion passed 3-0
  - 1) Bessire Bowl, LLC, Joel Bessire, Agent, 221 Noah's Arc Ct, Evansville, WI 53536, d/b/a Blue Devil Bowl, 108 E. Main Street, Evansville, WI 53536.
  - 2) <u>Creekside Place Inc.</u>, Nicholle L Wagner, Agent, 14246 W Golf Air Drive, Evansville, WI 53536, d/b/a Creekside Place Inc., 102 Maple Street, Evansville, WI 53536.
  - 3) The Night Owl Food & Spirits Inc., Gregory P Ardisson, Agent, 217 N. Sixth Street, Evansville, WI 53536, d/b/a The Night Owl Sports Pub & Eatery, 189 E. Main Street, Evansville, WI 53536.
  - **Trappers Bar & Grill LLC**, **Travis Schuh**, **Agent**, 3942 State Road 213, Footville, WI 53520, d/b/a Trappers Bar & Grill, 50 Union Street, Evansville WI 53536.
  - 5) El Vallarta De Evansville LLC, Marco Antonio Lugo Valencia, Agent, 438 Almeron St, WI 53536, d/b/a El Vallarta, 609 E Main Street, Evansville WI 53536.
  - 6) Evansville Memorial Post 6905 VFW, John L Schneider, Agent, 15542 W. Francis Road, Evansville, WI 53536, d/b/a VFW Memorial Post, 179 E. Main Street, Evansville, WI 53536.
  - 7) Slice Golf, LLC, Andrew Tomlin, Agent, 300 S. 1st Street, Evansville, WI 53536, d/b/a Slice Golf, 1 E. Main Street, Evansville, WI 53536
  - 8) <u>Ceili, LLC</u>, Shannon R. Arndt, Agent, 414 Meadow Lane, Evansville, WI 53536, d/b/a Ceili Coffee and Wine, 16 W. Main Street, Evansville, WI 53536.
- 9. Evansville Police Department Report. Chief Reese reported on officer training, Community relations, Monthly updates, Calls for Service, Accreditation and Notable calls/incidents. Stuart commented on talking with the kids about crosswalk safety.
- 10. Evansville Emergency Medical Services Report. Chief Kleisch reported on Calls for service, Refresher with Mercy, completion of training with Fire Department and the Police Department. Library staff will be done in May. Generator should be up and running by May 5<sup>th</sup>. Council members grabbed some yard signs to put up in their yards.
- 11. Meeting Reminder: Next regular meeting scheduled for Wednesday, June 7, 2023 at 6:00 p.m.
- 12. Motion to adjourn. 7:07 p.m. by Stuart, Seconded Corridon.

Jolene Klitzman, Deputy Clerk

7-A



# APPLICATION FOR OPERATOR'S LICENSE

CITY OF EVANSVILLE CITY CLERK'S OFFICE

	rator's Li	icense: \$35.00	L	Provisional L	icense:	\$15.00
NOTE: APPLICATION FEE WILL NOT BE  A Police check will be completed. Please read carefully and answer honestly. Falsifice cannot reapply for a 6 month period from date of denial. If you have any doubt as to w information. If you are unsure about how to respond to any questions on this form, ch and conviction record from the police department and/or the court with <a href="https://www.wicourts.gov/casesearch.htm">https://www.wicourts.gov/casesearch.htm</a> (CCAP may not provide comprehensive lies.	ation and/o whether to in eck with the which	or misrepresentation mandled the facts of a speciel city Clerk for clarification interacted.	y be grou ific incid	unds for denial of I ent it is recommen	ded that you	disclose the
1. LEGAL NAME: Stephen John	Se	larat	DAT	E OF BIRTH:		
First Middle		Laut			LWEN .	
ADDRESS:		A - 4-0 A	РНО	NF.		
CITY: EVANSUITE STATE: WI	Z	IP: 53536	GEN	DER: Male	Fem	ale
Driver's License No.:	ls	suing State: W	Con	777		
HOW LONG HAVE YOU LIVED AT ABOVE ADDRESS?	E	ormer Name(s):				
Prior Street Address if Above Address is Less Than 5 Years State Zip From To	City	State		Zip	From	To
Bennty Dr. Poplar Grore, IL						
ARREST AND COL						£
(Anywhere within the U 2. Have you ever been cited and/or convicted of a felony?	Inited State	s of America).				
Have you ever been cited and/or convicted of a misdemeanor?				Yes	——	No
4. Within the past ten (10) years, have you been arrested for, received a summons to	appear in o	ourt for or forfeited a	and for			No
a) Any underage alcohol violation?	appear it a	variation, or torretted a l	JOHN TO	Yes	8.	(No
b) Operating a motor vehicle while intoxicated?  c) Selling or furnishing alcoholic beverages to underage person?				Yes		
d) Permitting underage person on licensed premises?			_	Yes Yes		No
e) Allowing persons on licensed premises after closing?				Yes		
f) Any alcohol related violation other than a, b, c, d, and e?	M			Yes		No
g) Sale of legal or illegal drugs to include prescription medications or possession of any medications not prescribed to you?	/ illegal drug	gs to include prescription	า	Yes	1 8	(No)
h) Fighting, disorderly conduct, assault, or battery?				Yes		ANS.
<ul> <li>i) Resisting arrest, interfering with a police officer or obstructing an officer?</li> <li>j) Any crime or ordinance violation not listed above other than traffic or parking tickets</li> </ul>				Yes		No
5. For each YES response above, you must identify all violations below. Attach addition		If necessary or continue	on the b	Yes -	(	No
TYPE OF ARREST, SUMMONS, VIOLATION OR CHARGE	lar since co	MONTH/YEAR	OII the L	CITY	tion.	STATE
mariyuana possesion	8	cet 2012		Evansy 116	) (	7I
Within the last two (2) years, did you have and/or complete one of the following:	Att	tach certificate of comp	etion fo	Responsible Alcol	hol Servers	Course
☐ Successfully completed a Responsible Alcohol Servers Course		☐ An alcohol age				course
Held an Operator's License issued in Wisconsin		The sole propr	ietor of r	etail alcohol license		
6. CERTIFICATION: I do hereby swear, under penalty of perjury, that I am the person statements herein are complete, true and correct. I further understand a full backgroun ation of this application. Additionally, Lungerstand that this application may be denied in do further agree to comply with all laws resolutions, ordinances, and regulations, federal Signature:  Printed Name:	d investigat if it contains al, state or i Email: _	tion may be conducted t	oy the Evi at I will n I fermen	ansville Police Depa	artment pric	to consider
FOR MUNICIPALITY USE	ONLY BELC	DW THIS LINE	O-i-d	7 170		
olica Department Recommendation and Comments:	Public Sa Approved	ifety Committee: d: Den		of Evansville Date:		
	- 0	Clerk's Office Signature			Date ,	
- X.	Receipt #			ipt: 1.153075	1	5.00
pproved: Denied:				N ONE 2, 2023 11:39AF	1	



CITY OF EVANSVILLE CITY CLERK'S OFFICE

New Operator's License:			s License: \$35.00		Provisiona	al License: \$	\$15.00	
A Reliandaria (III)	NOTE: APPLICATION FEE WILL NOT	BE REFUN	IDED IF DENIED OR WIT	HDRAWN	٧.	PW		
A Police check will be completed. Please cannot reapply for a 6 month period from information. If you are unsure about how and conviction record from the polhttps://www.wicourts.gov/casesearch.h	date of denial. If you have any doubt as to to respond to any questions on this form, ice department and/or the court w	o whether , check with vith whici	to include the facts of a spe the City Clerk for clarificat the your interacted, or to	ecific incidi	ent it is recomn an obtain infor	mended that you mation regarding	disclose the	
1. LEGAL NAME: Candace	Lee		ndrews	DATI	OF BIRTH.		-	
ADDRESS:	. / Middle		Last	РНО	NE:			
CITY: Footville STATE: WIT ZIP: 53537					GENDER: Male (Female)			
Driver's License No.:	10		Issuing State: W.5	cons	in			
HOW LONG HAVE YOU LIVED AT ABOVE A Prior Street Address if Above Address is L	ADDRESS? 22 years		Former Name(s):	,				
Prior Street Address if Above Address is L	ass than 5 Years State Zip From To	City	State	+	Zip	From	То	
				-				
	ARREST AND C				200 8		-	
2. Have you ever been cited and/or convic	(Anywhere within the cted of a felony?	ie Onitea S	tates of America).		Yes		(No)	
3. Have you ever been cited and/or convic	ted of a misdemeanor?				Yes		(No)	
4. Within the past ten (10) years, have you	been arrested for, received a summons	to appear	in court for, or forfeited a	bond for		owing:		
a) Any underage alcohol violation?					Yes		(No)	
b) Operating a motor vehicle while intoxic					Yes		(No)	
<ul> <li>c) Selling or furnishing alcoholic beverage</li> <li>d) Permitting underage person on license</li> </ul>	s to underage person?				Yes		(No)	
e) Allowing persons on licensed premises					Yes		(No)	
f) Any alcohol related violation other than					Yes		(No.)	
g) Sale of legal or illegal drugs to include p		any illegal	drugs to include prescription	on	Yes		(No)	
medications not prescribed to you?		,6	and Barra manage presempti	011	Yes		(No)	
h) Fighting, disorderly conduct, assault, or					Yes		(No)	
<ul> <li>Resisting arrest, interfering with a police</li> </ul>	officer or obstructing an officer?				Yes		(No)	
j) Any crime or ordinance violation not list					Yes		(No)	
5. For each YES response above, you must		itional she	ets if necessary or continu	e on the b	ack of this spr	olication.		
TYPE OF ARREST, SUMMONS,	VIOLATION OR CHARGE		MONTH/YEAR		CITY		STATE	
Militaria abada atau (M)								
Successfully completed a Respon	ave and/or complete one of the followin	ıg:	Attach certificate of completion for Responsible Alcohol Servers Course  An alcohol agent for a retail alcohol license					
11 - 1					etail alconol lic			
Held an Operator's License issue     CERTIFICATION: I do hereby swear, und	d in Wisconsin							
statements herein are complete, true and c ation of this application. Additionally, I und do further agree to comply with all laws, re	correct. I further understand a full backgro erstand that this application may be denie	ound inves ed if it con	tigation may be conducted tains any falsification-and t	l by the Ev	ansville Police I	Department price	or to consider-	
Signature: Canoline & Fin	dieus	Em	ail:		1			
Printed Name: Candace L. Ar	ndrews	Dat	2/10/20	23	7			
	FOR MUNICIPALITY L	JSE ONLY I	BELOW THIS LINE					
olice Department Recommendation and Co	imments:	Publ	ic Safety Committee:					
		Appr	roved: De	nied:		)ate:		
			Clark's Office Simon		<del>-</del>			
<u>&gt;</u>		Recei	Clerk's Office Signature	2		Date		
pproved:	Denied:	_	r - ··					
	5/15/23							
Police Chief's Signature	Date							



CITY OF EVANSVILLE CITY CLERK'S OFFICE

31 S. Madison St, PO Box 529, Evansville, WI 53536

| September 2015 | Provision | Provisi

	itor's License: \$35.00	Provisional License	: \$12.00				
NOTE: APPLICATION FEE WILL NOT BE F	REFUNDED IF DENIED OR WITHD	RAWN.	COMPLETE I				
A Police check will be completed. Please read carefully and answer honestly. Falsificat	tion and/or misrepresentation may b	e grounds for denial of license/p	ermit. Applicant				
cannot reapply for a 6 month period from date of denial. If you have any doubt as to wh	ether to include the facts of a specific	incident it is recommended that	you disclose the				
information. If you are unsure about how to respond to any questions on this form, che	ck with the City Clerk for clarification.	You can obtain information regar	rding your arrest				
and conviction record from the police department and/or the court with <a href="https://www.wicourts.gov/casesearch.htm">https://www.wicourts.gov/casesearch.htm</a> (CCAP may not provide comprehensive lis	which you interacted, or the	Wisconsin Circuit Court Acce	ss website at:				
	t of all arrests/convictions).						
1. LEGAL NAME: DEDICA	Carlson	DATE OF BIRTH:					
Firet Middle	Last		. , ., ,				
ADDRESS:		PHONE:					
S	P 2 P 2 F	7.11-112	. /				
CITY: Evansuille STATE: WI	ZIP: 535 <b>36</b>	GENDER: Male F	emale X				
Driver's License No.:							
Driver's License No.:	Issuing State: UI						
HOW LONG HAVE YOU LIVED AT ABOVE ADDRESS? ZUCAYS	Former Name(s): MC	Gan, Kuska					
Prior Street Address if Above Address is Less Than 5 Years State Zip From To	City State	Zip From					
			To				
6553 N. South 5+55t &	vansuille WI	53536 4/20	14 /202				
3 M M		7	1 1000				
	IVICTION RECORD		15.00				
	nited States of America).		-				
2. Have you ever been cited and/or convicted of a felony?		Yes	(No)				
3. Have you ever been cited and/or convicted of a misdemeanor?		Yes	(No)				
4. Within the past ten (10) years, have you been arrested for, received a summons to a	unnear in court for, or forfeited a hor						
a) Any underage alcohol violation?	press in court for, or for elect a bur	Yes Yes					
b) Operating a motor vehicle while intoxicated?			(No)				
c) Selling or furnishing alcoholic beverages to underage person?		Yes	SNo S				
d) Permitting underage person on licensed premises?		Yes Yes	(No				
e) Allowing persons on licensed premises after closing?		Yes	(No				
f) Any alcohol related violation other than a, b, c, d, and e?		Yes	CNO				
g) Sale of legal or illegal drugs to include prescription medications or possession of any	illegal drugs to include prescription	res	(No)				
medications not prescribed to you?	megal drugs to include prescription	Yes	(No)				
h) Fighting, disorderly conduct, assault, or battery?		Yes	(No)				
i) Resisting arrest, interfering with a police officer or obstructing an officer?		Yes	(No)				
j) Any crime or ordinance violation not listed above other than traffic or parking tickets	?	Yes	(No)				
5. For each YES response above, you must identify all violations below. Attach addition			(110)				
TYPE OF ARREST, SUMMONS, VIOLATION OR CHARGE							
The state of the s	MONTH/YEAR	CITY	STATE				
Within the last two (2) years, dld you have and/or complete one of the following:	A						
	Attach certificate of completion for Responsible Alcohol Servers Course						
The state of the post state of the state of		for a retail alcohol license					
Held an Operator's License Issued in Wisconsin		or of retail alcohol license					
6. CERTIFICATION: I do hereby swear, under penalty of perjury, that I am the person	who made and signed the foregoing	application for an emergency U.	ense, and that all				
and perior , that the person	mile made and signed the foreBonig	application for an operator's lici					
statements nerein are complete, true and correct, I further understand a full background	investigation may be conducted by	the Evancuille Police Department	prior to consider				
statements herein are complete, true and correct. I further understand a full background attended if the property of this application. Additionally, I understand that this application may be denied if	I investigation may be conducted by it contains any falsification and that	the Evansville Police Department	prior to consider-				
statements nerein are complete, true and correct, I further understand a full background	I investigation may be conducted by it contains any falsification and that	the Evansville Police Department	prior to consider-				
ation of this application. Additionally, I understand that this application may be denied if do further agree to comply with all laws, resolutions, ordinances, and regulations, federa	investigation may be conducted by it contains any falsification-and that it, state or local affecting the sale of f	the Evansville Police Department	prior to consider-				
statements herein are complete, true and correct. I further understand a full background attended if the property of this application. Additionally, I understand that this application may be denied if	I investigation may be conducted by it contains any falsification and that	the Evansville Police Department	prior to consider-				
ation of this application. Additionally, I understand that this application may be denied if do further agree to comply with all laws, resolutions, ordinances, and regulations, federa	investigation may be conducted by it contains any falsification-and that it, state or local affecting the sale of f	the Evansville Police Department	prior to consider-				
ation of this application. Additionally, I understand that this application may be denied if do further agree to comply with all laws, resolutions, ordinances, and regulations, federal signature:	it contains any falsification-and that it state or local affecting the sale of falsification.  Email: 3-27-20	the Evansville Police Department	prior to consider-				
ation of this application. Additionally, I understand that this application may be denied if do further agree to comply with all laws, resolutions, ordinances, and regulations, federal signature:  Printed Name:  FOR MUNICIPALITY USE	it contains any falsification-and that it state or local affecting the sale of falsification.  Email: 3-27-20	the Evansville Police Department	prior to consider-				
ation of this application. Additionally, I understand that this application may be denied if do further agree to comply with all laws, resolutions, ordinances, and regulations, federal signature:	in contains any falsification-and that it state or local affecting the sale of falsification.  Email:	the Evansville Police Department	prior to consider-				
ation of this application. Additionally, I understand that this application may be denied if do further agree to comply with all laws, resolutions, ordinances, and regulations, federal signature:  Printed Name:  FOR MUNICIPALITY USE	investigation may be conducted by it contains any falsification-and that it, state or local affecting the sale of false.  Date: 3-27-26  ONLY BELOW THIS LINE  Public Safety Committee:	the Evansville Police Department I will not be able to reapply for a ermented malt beverages and int	prior to consider-				
ation of this application. Additionally, I understand that this application may be denied if do further agree to comply with all laws, resolutions, ordinances, and regulations, federal signature:  Printed Name:  FOR MUNICIPALITY USE	in contains any falsification-and that it state or local affecting the sale of falsification.  Email:	the Evansville Police Department I will not be able to reapply for a ermented malt beverages and int	prior to consider-				
ation of this application. Additionally, I understand that this application may be denied if do further agree to comply with all laws, resolutions, ordinances, and regulations, federal signature:  Printed Name:  FOR MUNICIPALITY USE	investigation may be conducted by it contains any falsification-and that it, state or local affecting the sale of false.  Date: 3-27-26  ONLY BELOW THIS LINE  Public Safety Committee:	the Evansville Police Department I will not be able to reapply for a ermented malt beverages and int	prior to consider-				
ation of this application. Additionally, I understand that this application may be denied if do further agree to comply with all laws, resolutions, ordinances, and regulations, federal signature:  Printed Name:  FOR MUNICIPALITY USE	investigation may be conducted by it contains any falsification-and that it, state or local affecting the sale of false.  Date: 3-27-26  ONLY BELOW THIS LINE  Public Safety Committee:	the Evansville Police Department I will not be able to reapply for a ermented malt beverages and int	prior to consider-				
ation of this application. Additionally, I understand that this application may be denied if do further agree to comply with all laws, resolutions, ordinances, and regulations, federal signature:  Printed Name:  FOR MUNICIPALITY USE oblice Department Recommendation and Comments:	Investigation may be conducted by it contains any falsification-and that it, state or local affecting the sale of falsification.  Date: 3-27-20  ONLY BELOW THIS LINE  Public Safety Committee: Approved: Denies	the Evansville Police Department I will not be able to reapply for a ermented malt beverages and interest of the Police Department Date:	prior to consider-				
ation of this application. Additionally, I understand that this application may be denied if do further agree to comply with all laws, resolutions, ordinances, and regulations, federal signature:  Printed Name:  FOR MUNICIPALITY USE	Investigation may be conducted by it contains any falsification-and that it state or local affecting the sale of falsification.  Email:	the Evansville Police Department I will not be able to reapply for a ermented malt beverages and interest of the Police Department Date:	prior to consider-				
ation of this application. Additionally, I understand that this application may be denied if do further agree to comply with all laws, resolutions, ordinances, and regulations, federal signature:  Printed Name:  FOR MUNICIPALITY USE oblice Department Recommendation and Comments:	Investigation may be conducted by it contains any falsification-and that it, state or local affecting the sale of falsification.  Date: 3-27-20  ONLY BELOW THIS LINE  Public Safety Committee: Approved: Denies	the Evansville Police Department I will not be able to reapply for a ermented malt beverages and interest of the Police Department Date:	prior to consider-				
ation of this application. Additionally, I understand that this application may be denied if do further agree to comply with all laws, resolutions, ordinances, and regulations, federal signature:  Printed Name:  FOR MUNICIPALITY USE oblice Department Recommendation and Comments:	Investigation may be conducted by it contains any falsification-and that it, state or local affecting the sale of falsification.  Date: 3-27-20  ONLY BELOW THIS LINE  Public Safety Committee: Approved: Denies	the Evansville Police Department I will not be able to reapply for a ermented malt beverages and interest of the Police Department Date:	prior to consider-				
ation of this application. Additionally, I understand that this application may be denied if do further agree to comply with all laws, resolutions, ordinances, and regulations, federal signature:  Printed Name:  FOR MUNICIPALITY USE oblice Department Recommendation and Comments:	Investigation may be conducted by it contains any falsification-and that it, state or local affecting the sale of falsification.  Date: 3-27-20  ONLY BELOW THIS LINE  Public Safety Committee: Approved: Denies	the Evansville Police Department I will not be able to reapply for a ermented malt beverages and interest of the Police Department Date:	prior to consider-				



CITY OF EVANSVILLE CITY CLERK'S OFFICE

31 S. Madison St, PO Box 529, Evansville, WI 53536
New/Renewal Operator's License: \$35.00
Provisional Sec.

(2) Marty Martines a Decliner \$33,00					e: \$15.00		
NOTE: APPLICATION FEE WILL NO	T BE REFU	NDED	F DENIED OR WIT	HDRAWN			
A Police check will be completed. Please read carefully and answer honestly. Fa	aisification a	ind/or n	hisrepresentation me	y be grou	nds for denial	of license/pern	nit, Applicant
arrest and conviction record from the police department and/or the continuous https://www.wicourts.gov/cosesearch.htm (CCAP may not provide comprehen				the Wisc	onsin Circuit	Court Access	website at:
1. LEGAL NAME: BILAN	are not or a	7	- 12 c ==				
First Ballelile		-17	UR51	DATE	OF BIRTH:		
ADDRESS:		La	st				-
Housess.		·		PHON	IE:	- V	
CITY: EVANSOINE STATE: WI		ZIP:	53530	Gend	or: Male	1/	
		1		Geno	ar: wate	/_ Femal	6
HOW LONG HAVE YOU LIVED AT ABOVE ADDRESS? 50 4RS		Form	er Name(s):				
Prior Street Address if Above Address is Less Than 5 Years State Zip From To	City	Υ	State		Zip	From	To
Driver's License No.:							
	0.0011111		g State:				
ARREST AND	CONVICT	ION RE	CORD				
2. Have you ever been convicted of a felony?					Yes		No
3. Within the past ten (10) years, have you been arrested for, received a summo	ons to appe	ar in cou	art for, or forfeited a	band for	env of the foll-	owing in the	
and or companie or the state of saucousins						and the	
a) Any underage alcohol violation?					Yes		No
b) Operating a motor vehicle while intoxicated?					Yes		No \
c) Selling or furnishing alcoholic beverages to underage person? d) Permitting underage person on licensed premises?					Yes		No )
e) Allowing persons on licensed premises after closing?							No
1) Any alcohol related violation other than a, b, c, d, and e?			Ye				No
g) Sale of legal or illegal drugs to include prescription medications or possession	of any Man				Yes		No
medications not prescribed to you?	or any mega	or arugs	to include prescription	on	10.0		
h) Fighting, disorderly conduct, assault, or battery?					Yes		No )
i) Resisting arrest, interfering with a police officer or obstructing an officer?					Yes	$\rightarrow \rightarrow$	No /
j) Any crime or ordinance violation not listed above other than traffic or parking	tickets?				Yes		No No
5. For each YES response in #3, you must identify all violations below. Attach ad	ditional she	eats If no	COSSESSE OF CONTINUE	on the he	ch of this anni	teatlan	- No
TYPE OF ARREST, SUMMONS, VIOLATION OR CHARGE		MONTH/YEAR					
			MOISTIN/ TEAM		CITY		STATE
	1400						
Within the last two (2) years, did you have and/or complete one of the follow	ving:	Attach	certificate of comp	etion for	Responsible Al	icohol Servera C	Course
Successfully completed a Responsible Alcohol Servers Course				nt for a rei	all alcohol lice	nse	
Held an Operator's License issued in Wisconsin		-					
6. CERTIFICATION: I do hereby swear, under penalty of perjury, that I am the ac-	erson who r	vada aa	d stanged the farmer	and the second			
eration of this application. Additionally, I understand that this application may be did of further agree to comply with all laws, resolutions, ordinances, and regulations,	denied if it co	ontains	iny falsification and	that I will i	not be able to r	eapply for a fin	nonth period.
to director agree to comply with all laws, resolutions, ordinances, and regulations,	federal, sta	te or loc	al affecting the sale	of ferment	ad malt bever	iges and intoxic	ating liquors.
Signature: / letan / furit	Ēma	lls.					
0110 11.00			-1				
Printed Name: AllAN HURST	Date	<u>د ،</u>	4-23				
ilice Department Recommendation and Comments:	USE ONLY	MITOM	THISTINI				
nce department recommendation and comments:							
	-						
	-	City	Clark's Signature			Date	
N. O	Receip	ot #					
proved: Denled:							
VXXX 1 61.6123							
Police Chief's Signature Date							
Police Chier's Signature Date							



CITY OF EVANSVILLE CITY CLERK'S OFFICE

31 S. Madison St, PO Box 529, Evansville, WI 53536

New Operator's License: \$35.00 Renewal Operator	ator's License: \$35.00	Provisional Licens	ie: \$15.00			
NOTE: APPLICATION FEE WILL NOT BE	REFUNDED IF DENIED OR WITHDI	RAWN.	EX 184			
A Police check will be completed. Please read carefully and answer honestly. Falsifica cannot reapply for a 6 month period from date of denial. If you have any doubt as to will information. If you are unsure about how to respond to any questions on this form, che and conviction record from the police department and/or the court with <a href="https://www.wicourts.gov/casesearch.htm">https://www.wicourts.gov/casesearch.htm</a> (CCAP may not provide comprehensive list	hether to include the facts of a specific eck with the City Clerk for clarification, which you interacted, or the	incident it is recommended that	at you disclose the			
1. LEGAL NAME: LUNCA MONTE	Laursen	DATE OF BIRTH				
First Middle	Last	DATE OF BIRTH:				
ADDRESS:		PHONE				
CITY: EVansville STATE: WI	zip: 53536	GENDER: Male (	Female			
Driver's License No.:	Issuing State: W150	ionsin				
HOW LONG HAVE YOU LIVED AT ABOVE ADDRESS? 13 YES.		e501				
Prior Street Address if Above Address is Less Than 5 Years State Zip From To	City State	Zip From	То			
	NVICTION RECORD	TOP STREET				
2. Have you ever been cited and/or convicted of a felony?	mited States of America).	Yes	(No)			
3. Have you ever been cited and/or convicted of a misdemeanor?		Yes	W Company			
4. Within the past ten (10) years, have you been arrested for, received a summons to	appear in court for, or forfeited a bon		-			
a) Any underage alcohol violation?		Yes	(No)			
b) Operating a motor vehicle while intoxicated? c) Selling or furnishing alcoholic beverages to underage person?		Yes	(40)			
d) Permitting underage person on licensed premises?		Yes	Que _			
e) Allowing persons on licensed premises after closing?		Yes Yes	(No.)			
f) Any alcohol related violation other than a, b, c, d, and e?		Yes	(No)			
g) Sale of legal or illegal drugs to include prescription medications or possession of any	illegal drugs to include prescription					
medications not prescribed to you?		Yes	No			
h) Fighting, disorderly conduct, assault, or battery?		Yes	(Nb)			
<ul> <li>i) Resisting arrest, interfering with a police officer or obstructing an officer?</li> <li>j) Any crime or ordinance violation not listed above other than traffic or parking tickets</li> </ul>		Yes Yes	(Nay			
5. For each YES response above, you must identify all violations below. Attach addition			(40)			
TYPE OF ARREST, SUMMONS, VIOLATION OR CHARGE	MONTH/YEAR	CITY	STATE			
Wilhlis the Later (2) and the later (2)						
Within the last two (2) years, did you have and/or complete one of the following:  Successfully completed a Responsible Alcohol Servers Course	Attach certificate of completion for Responsible Alcohol Servers Course  An alcohol agent for a retail alcohol license					
Held an Operator's License issued in Wisconsin		or of retail alcohol license				
5. CERTIFICATION: I do hereby swear, under penalty of perjury, that I am the person statements herein are complete, true and correct. I further understand a full background ation of this application. Additionally, I understand that this application may be denied if do further agree to comply with all laws, resolutions, ordinances, and regulations, federal signature:	d investigation may be conducted by t	the Evansville Police Departmen I will not be able to reapply for ermented malt beverages and in	nt prior to consider-			
		>				
FOR MUNICIPALITY USE plice Department Recommendation and Comments:	ONLY BELOW THIS LINE					
and comments.	Public Safety Committee: Approved: Denied	f:Date:				
	Clerk's Office Signature	Date				
proved: Denied:	Receipt #	L				
DUL 5/15/23						
Police Chler's Signature Date						



CITY OF EVANSVILLE CITY CLERK'S OFFICE

New Operator's License:	\$35.00 Renewal Op	erator's	Licens	e: \$35.00	Pro	visional I	icense: \$	15.00
	NOTE: APPLICATION FEE WILL NOT I	BE REFUN	DED IF D	ENIED OR WITH	IDRAWN.	April 11	150 TSP (\$	18181600
A Police check will be completed. Please r	ead carefully and answer honestly. Falsi	ification an	d/or misre	presentation ma	v be grounds	for denial of	license/perm	it. Applicant
cannot reapply for a 6 month period from a	late of denial. If you have any doubt as to	o whether i	o include	the facts of a spec	cific incident it	is recommen	ded that you	disclose the
information. If you are unsure about how t	o respond to any questions on this form,	, check with	the City C	lerk for clarificati	on. You can ob	otain informa	tion regarding	your arrest
and conviction record from the police https://www.wicourts.gov/casesearch.htm	m (CCAP may not provide comprehensiv	e list of all	arrests/co	teracted, or th	e Wisconsin	Circuit Col	art Access v	website at:
1. LEGAL NAME: Brittany	100			i i i i i i i i i i i i i i i i i i i	- Daywer Sand	4000000000		
1. LEGAL NAIME: DITTIANS	Middle		one		DATE OF	BIRTH: _		
ADDRESS:			1934			1 10-5	20-47	24
					PHONE:	600	70	וט
any: Evansville	STATE: WI		ZIP: 5	3536	GENDER:	Male	Fema	ile
Driver's License No	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~			tate: WI				
Oliver a dicense ite	714-	·			• •	, ,		
HOW LONG HAVE YOU LIVED AT ABOVE A			Former	Name(s): Br	ttany	forr	ett	
Prior Street Address if Above Address is Le	ss Than 5 Years State Zip From To	City		State	Zip		From	То
	1		- 1					
			-+			_		
	ARREST AND ( (Anywhere within th							18 15
2. Have you ever been cited and/or convict		ie United 3	lates of Al	nerica).				
						Yes		No
3. Have you ever been cited and/or convict						Yes		(No)
4. Within the past ten (10) years, have you	been arrested for, received a summons	to appear	in court fo	or, or forfeited a	bond for any o		ng:	
a) Any underage alcohol violation?     b) Operating a motor vehicle while intoxical.	that?					Yes		(D)
c) Selling or furnishing alcoholic beverages						Yes		9
d) Permitting underage person on licensed	premises?					Yes Yes		(No)
e) Allowing persons on licensed premises a						Yes		6
f) Any alcohol related violation other than						Yes		60
g) Sale of legal or illegal drugs to include pr	escription medications or possession of	any illegal	drugs to in	clude prescriptio	n			_
medications not prescribed to you?						Yes		<b>6</b>
<ul> <li>h) Fighting, disorderly conduct, assault, or</li> <li>i) Resisting arrest, interfering with a police</li> </ul>						Yes		(B)
j) Any crime or ordinance violation not liste	ed above other than traffic or parking tiel	kotr2				Yes		902
5. For each YES response above, you must i			ate if mone	sannt av samtlavis	an the back.	Yes	- Alb	No
TYPE OF ARREST, SUMMONS, N		illional site	OLS II INDCO		on the back (		tuon.	ALIEN STATE
	NO DE CHARGE			MONTH/YEAR		CITY		STATE
Within the last two (2) years, did you ha		tg:	Attach ce	ertificate of comp	letion for Res	ponsible Alco	ohol Servers (	Course
Successfully completed a Respons	ible Alcohol Servers Course			An alcohol age	ent for a retail	alcohol licens	se	
Held an Operator's License issued	in Wisconsin			The sole propr				
6. CERTIFICATION: I do hereby swear, unde	r penalty of perjury, that I am the pers	son who m	ade and s	igned the forego	ing application	for an oper	ator's license	, and that all
statements herein are complete, true and co ation of this application. Additionally, Lunde	orrect. Crurtner understand a full backgro	ound invest	igation ma	av be conducted l	by the Evansyi	lle Police Der	artment nein	r to consider
do further agree to comply with all laws, roo	plutions, ordinances, and regulations, fer	deral, state	or local a	ffecting the sale of	of fermented o	e able to reap nait beverage	ply for a 6 mo	onth period. I
MOOD I HOUSE	MAC.				A -	* 1 -	a und modice	ating iiquora.
Signature:	2	Ema	ان: <u>مح</u> ــــ	<u> </u>				
Printed Name: Brittony Y	one	Date	4-9	5-23	•			
	0							
	FOR MUNICIPALITY L	JSE ONLY E	ELOW TH	IS LINE	700000	000		
olice Department Recommendation and Co	mments:	Publi	c Safety C	ommittee:	Pato		***	
			oved:		nied: City	of Evansyi	rie	
			Clerk's	Office Signature			Date	
1		Dagat		= -(B):Id1d16	*****			*******
pproved:	Denied:	Recei	br u		Recei	pt: 1.1531	18	315.00
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\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	C 15/0.7				May 5	, 2023 11	:19AM	
	) (1)(/)	1						
Police Chief's Signature	Date							



Police Chief's Signature

#### APPLICATION FOR OPERATOR'S LICENSE

CITY OF EVANSVILLE CITY CLERK'S OFFICE

31 S. Madison St, PO Box 529, Evansville, WI 53536

New Operator's License: \$35.00 Renewal Operator's License: \$35.00 Provisional License: \$15.00 NOTE: APPLICATION FEE WILL NOT BE REFUNDED IF DENIED OR WITHDRAWN. A Police check will be completed. Please read carefully and answer honestly. Falsification and/or misrepresentation may be grounds for denial of license/permit. Applicant cannot reapply for a 6 month period from date of denial. If you have any doubt as to whether to include the facts of a specific incident it is recommended that you disclose the information. If you are unsure about how to respond to any questions on this form, check with the City Clerk for clarification. You can obtain information regarding your arrest and conviction record from the police department and/or the court with which you interacted, or the Wisconsin Circuit Court Access website at: https://www.wicourts.gov/casesearch.htm (CCAP may not provide comprehensive list of all arrests/convictions). 1. LEGAL NAME: JOHN AUL DATE OF BIRTH: ADDRESS: PHONE: CITY: EUANSVILLE GENDER: Driver's License No.: Issuing State: WISCONSIN HOW LONG HAVE YOU LIVED AT ABOVE ADDRESS? 30 Former Name(s): Prior Street Address if Above Address is Less Than 5 Years State Zip From To From To ARREST AND CONVICTION RECORD (Anywhere within the United States of America). 2. Have you ever been cited and/or convicted of a felony? Yes 3. Have you ever been cited and/or convicted of a misdemeanor? 4. Within the past ten (10) years, have you been arrested for, received a summons to appear in court for, or forfeited a bond for any of the following: a) Any underage alcohol violation? Yes No b) Operating a motor vehicle while intoxicated? No Yes c) Selling or furnishing alcoholic beverages to underage person? Yes No d) Permitting underage person on licensed premises? Yes (No e) Allowing persons on licensed premises after closing? Yes No f) Any alcohol related violation other than a, b, c, d, and e? Yes No g) Sale of legal or illegal drugs to include prescription medications or possession of any illegal drugs to include prescription medications not prescribed to you? (No Yes h) Fighting, disorderly conduct, assault, or battery? Yes No i) Resisting arrest, interfering with a police officer or obstructing an officer? Yes No j) Any crime or ordinance violation not listed above other than traffic or parking tickets? Yes No 5. For each YES response above, you must identify all violations below. Attach additional sheets if necessary or continue on the back of this application. TYPE OF ARREST, SUMMONS, VIOLATION OR CHARGE CITY STATE Within the last two (2) years, did you have and/or complete one of the following: Attach certificate of completion for Responsible Alcohol Servers Course Successfully completed a Responsible Alcohol Servers Course An alcohol agent for a retail alcohol license The sole proprietor of retail alcohol license Held an Operator's License issued in Wisconsin 6. CERTIFICATION: I do hereby swear, under penalty of perjury, that I am the person who made and signed the foregoing application for an operator's license, and that all statements herein are complete, true and correct. I further understand a full background investigation may be conducted by the Evansville Police Department prior to consideration of this application. Additionally, I understand that this application may be denied if it contains any falsification and that I will not be able to reapply for a 6 month period. I do further agree to comply with all laws, resolutions, ordinances, and regulations, federal, state or local affecting the sale of fermented malt beverages and intoxicating liquors. Signature: Email: FOR MUNICIPALITY USE ONLY BELOW THIS LINE Police Department Recommendation and Comments: **Public Safety Committee:** Approved: Denied: Date: Clerk's Office Signature Receipt # Approved: Denied:



CITY OF EVANSVILLE CITY CLERK'S OFFICE 31 S. Madison St. PO Box 529. Evansville, WI 53536

New Operator's License: \$35.0	3. MIGGISON SI, PO		s License: \$35.00	1 5353		isional Lic	onco: 6	15.00
	APPLICATION FEE WILL NOT			HDRAW	N.	risional Lic	ense: 3	12.00
A Police check will be completed. Please read ca cannot reapply for a 6 month period from date of information. If you are unsure about how to resp and conviction record from the police de https://www.wicourts.gov/casesearch.htm (CCC	refully and answer honestly. Falsi denial. If you have any doubt as to ond to any questions on this form, partment and/or the court y	ification ar o whether , check wit with whic	nd/or misrepresentation ma to include the facts of a spe h the City Clerk for clarificat h you interacted or the	ey be grou cific incid	unds fo	recommende	d that you	disclose the
1. LEGAL NAME: DAVID		e iise or di			W75.800 1807.2	DOMESTICAL CONTRACTOR OF THE PARTY OF THE PA		
First	DUANE Middle		FOWERS	DAT	E OF BI	RTH:		1 4 4
ADDRESS:				PHO	NE:			
CITY: EVANSVILLE	STATE: WI		zip: 53536	GEN	IDER:	Male	Fema	ıle
Driver's License No.:	<b>.</b>		issuing State:	I				
HOW LONG HAVE YOU LIVED AT ABOVE ADDRES	57 19 YEARS		Former Name(s):					
Prior Street Address if Above Address is Less Tha		City			Zip		From	То
	ARREST AND ( (Anywhere within th							
2. Have you ever been cited and/or convicted of	a felony?					Yes		(No)
3. Have you ever been cited and/or convicted of	a misdemeanor?					Yes		(No)
4. Within the past ten (10) years, have you been	arrested for, received a summons	to appear	In court for, or forfeited a	bond for	any of	the following		
a) Any underage alcohol violation?						Yes		NO
b) Operating a motor vehicle while intoxicated?						Yes		NO
<ul> <li>c) Selling or furnishing alcoholic beverages to unc</li> <li>d) Permitting underage person on licensed premi</li> </ul>	serage person?				_	Yes		(NO)
e) Allowing persons on licensed premises after cl	sesr osing?				Yes		-	MO
f) Any alcohol related violation other than a, b, c,	d, and e?				Yes Yes		-	(NO)
g) Sale of legal or illegal drugs to include prescrip	tion medications or possession of	any illegal	drugs to include prescription	n .	_	162	_	(NO
medications not prescribed to you?		,				Yes		(No)
h) Fighting, disorderly conduct, assault, or batter	R					Yes		(No)
i) Resisting arrest, interfering with a police officer	or obstructing an officer?					Yes		(No)
j) Any crime or ordinance violation not listed above						Yes		(No)
5. For each YES response above, you must identify		itional she		e on the b	ack of	this application	on.	The same of
TYPE OF ARREST, SUMMONS, VIOLAT	TON OR CHARGE		MONTH/YEAR			CITY	-	STATE
Within the last two (2) years, did you have and	4 /ee earnalate erro all the fall				L			
Successfully completed a Responsible A		ig:	Attach certificate of comp  An alcohol age				ol Servers (	Course
Held an Operator's License issued in Wis			The sole prop					
6. CERTIFICATION: I do hereby swear, under pens statements herein are complete, true and correct. ation of this application. Additionally, I understand do further agree to comply with all laws, resolution	alty of perjury, that I am the pers I further understand a full backgro that this application may be denie	ound inves ed if it can	nade and signed the forego	ing applic	cation f	or an operate Police Depar	tment prio	r to consider
Signature: Day D Br	بعب		ail:	-				acting inquiries
Printed Name: DAVID D BWG	ir.	Dat	e: MARCH 30 , 20	023				
	FOR MUNICIPALITY L	JSE ONLY	BELOW THIS LINE					
olice Department Recommendation and Commen	ts:	Publ	ic Safety Committee:					
		Арр	roved: De	nied:		Date:_		
		-	Clerk's Office Signature				Date	
pproved: Denie	d·	Rece	pt#					
Denie	5/15/23							



CITY OF EVANSVILLE CITY CLERK'S OFFICE 31 S. Madison St, PO Box 529, Evansville, WI 53536

New Operator's License:			's License: \$35.00		Provision	al License:	\$15.00	
A Delice of coll will be	NOTE: APPLICATION FEE WILL NOT	BE REFU	NDED IF DENIED OR WITH	IDRAWN	artial/as		Lives I	
A Police check will be completed. Please of cannot reapply for a 6 month period from conformation. If you are unsure about how the and conviction record from the police https://www.wicourts.gov/cosesearch.html	late of denial. If you have any doubt as to o respond to any questions on this form, se department and/or the court y	a whether , check wit with which	to include the facts of a spec th the City Clerk for clarificati the your interacted on the	cific incide	nt it is recomi	mended that you	u disclose the	
1. LEGAL NAME: Ohn	Leigh 5	-	ne ider	DATE	OF BIRTH:			
ADDRESS: ,	- Middle_ \		Last	PHO	 VE	72		
CITY: EY ansuille	STATE: WI		zip:53536	GENI	-	e) Ferr	nale	
Driver's License No.			Issuing State: WI	-				
HOW LONG HAVE YOU LIVED AT ABOVE A			Former Name(s):					
Prior Street Address if Above Address is Le	ss Than 5 Years State Zip From To	Cit	y State		Zip	From	То	
				-				
	ARREST AND	CONVICT	ION RECORD	-	15.00	- Jakan		
2. Have you ever been cited and/or convict	(Anywhere within the	e United	States of America).		Ves		(10)	
3. Have you ever been cited and/or convict					Yes		(No)	
4. Within the past ten (10) years, have you		to appea	r in court for, or forfeited a l	bond for a		nwina:	(NO)	
a) Any underage alcohol violation?		- Сррси	The state of the s	JOHO IOI 8	Yes	Ownig,	CNS	
b) Operating a motor vehicle while intoxica	ited?				Yes		CARD .	
<ul> <li>c) Selling or furnishing alcoholic beverages</li> <li>d) Permitting underage person on licensed</li> </ul>					Yes		(Na	
e) Allowing persons on licensed premises a					Yes		CN <sub>0</sub>	
f) Any alcohol related violation other than	a, b, c, d, and e?				Yes		CM9	
g) Sale of legal or illegal drugs to include pr	escription medications or possession of	any illega	drugs to include prescription	n	163	_	CONTO	
medications not prescribed to you?					Yes		w	
h) Fighting, disorderly conduct, assault, or b	pattery?				Yes		(M)	
<ul> <li>i) Resisting arrest, interfering with a police</li> <li>j) Any crime or ordinance violation not liste</li> </ul>	officer or obstructing an officer?				Yes		(11)	
					Yes		(NP	
<ol> <li>For each YES response above, you must in TYPE OF ARREST, SUMMONS, N</li> </ol>	VIOLATION OF CHARGE	itional sn		on the b			STATES TO SALE	
The second secon	TODATION ON CHARGE		MONTH/YEAR		CIT	Y	STATE	
Within the last two (2) years, did you ha	no sedden ar dan	910				- 1 V/2		
Successfully completed a Respons		ng:	Attach certificate of completion for Responsible Alcohol Servers Course  An alcohol agent for a retail alcohol license					
Held an Operator's License issued			The sole proprietor of retail alcohol license					
6. CERTIFICATION: I do hereby swear, unde statements herein are complete, true and co atlon of this application. Additionally, I under do further agree to comply with all laws, resc Signature:	stand that this application may be deni	ed if it cor deral, stat	stigation may be conducted to stains any falsification-and the e or local affecting the sale of	oy the Eva lat I will no of ferment	nsville Police	Department pri	or to consider-	
	FOR MUNICIPALITY (	JSE ONLY	BELOW THIS LINE					
olice Department Recommendation and Cor	nments:	Pub	lic Safety Committee:					
				ied:		)ate:		
			Clerk's Office Signature			Date		
pproved:	Denied:	Rece	ipt#					
Police Chief's Signature	5/5/13							



Police Chief's Signature

#### APPLICATION FOR OPERATOR'S LICENSE

CITY OF EVANSVILLE CITY CLERK'S OFFICE 31 S. Madison St, PO Box 529, Evansville, WI 53536

New Operator's License: \$35.00 Renewal Operator's License: \$35.00 Provisional License: \$15.00 NOTE: APPLICATION FEE WILL NOT BE REFUNDED IF DENIED OR WITHDRAWN. A Police check will be completed. Please read carefully and answer honestly. Falsification and/or misrepresentation may be grounds for denial of license/permit. Applicant cannot reapply for a 6 month period from date of denial. If you have any doubt as to whether to include the facts of a specific incident it is recommended that you disclose the information. If you are unsure about how to respond to any questions on this form, check with the City Clerk for clarification. You can obtain information regarding your arrest and conviction record from the police department and/or the court with which you interacted, or the Wisconsin Circuit Court Access website at: https://www.wicourts.gov/casesearch.htm (CCAP may not provide comprehensive list of all arrests/convictions). 1. LEGAL NAME: MICHELLE DATE OF BIRTH: Middle ADDRESS: PHONE: CITY: EVANSVILLE STATE: W) ZIP: 535360 **GENDER:** Male Femal Driver's License No.: Issuing State: WISCONS IN HOW LONG HAVE YOU LIVED AT ABOVE ADDRESS? LO YEARS Former Name(s): CV4 K9 Prior Street Address if Above Address is Less Than 5 Years State Zip From To City State To ARREST AND CONVICTION RECORD (Anywhere within the United States of America) 2. Have you ever been cited and/or convicted of a felony? Yes No 3. Have you ever been cited and/or convicted of a misdemeanor? Yes No 4. Within the past ten (10) years, have you been arrested for, received a summons to appear in court for, or forfeited a bond for any of the following: a) Any underage alcohol violation? No Yes b) Operating a motor vehicle while intoxicated? Yes No c) Selling or furnishing alcoholic beverages to underage person? No Yes d) Permitting underage person on licensed premises? Yes No e) Allowing persons on licensed premises after closing? Yes No f) Any alcohol related violation other than a, b, c, d, and e? Yes No g) Sale of legal or illegal drugs to include prescription medications or possession of any illegal drugs to include prescription medications not prescribed to you? Yes No h) Fighting, disorderly conduct, assault, or battery? No Yes i) Resisting arrest, interfering with a police officer or obstructing an officer? Yes No J) Any crime or ordinance violation not listed above other than traffic or parking tickets? Yes No 5. For each YES response above, you must identify all violations below. Attach additional sheets if necessary or continue on the back of this application. TYPE OF ARREST, SUMMONS, VIOLATION OR CHARGE MONTH/YEAR STATE Within the last two (2) years, did you have and/or complete one of the following: Attach certificate of completion for Responsible Alcohol Servers Course Successfully completed a Responsible Alcohol Servers Course An alcohol agent for a retail alcohol license Held an Operator's License issued in Wisconsin The sole proprietor of retail alcohol license 6. CERTIFICATION: I do hereby swear, under penalty of perjury, that I am the person who made and signed the foregoing application for an operator's license, and that all statements herein are complete, true and correct. I further understand a full background investigation may be conducted by the Evansville Police Department prior to consideration of this application. Additionally, I understand that this application may be denied if it contains any falsification and that I will not be able to reapply for a 6 month period. I do further agree to comply with all laws, resolutions, ordinances, and regulations, federal, state or local affecting the sale of fermented mait beverages and intoxicating liquors. 1 Printed Name: MIC Police Department Recommendation and Comments: Public Safety Committee: Approved: Denled: Date: Clerk's Office Signature Date Receipt # Denied:



CITY OF EVANSVILLE CITY CLERK'S OFFICE

New Operator's License: \$35.00	Renewal Op					<b>Provisiona</b>	l License:	\$15.00
NOTE: AP	PLICATION FEE WILL NOT	BE REFUN	IDED IF D	ENIED OR WI	THDRAWN	1.		
A Police check will be completed. Please read carefu cannot reapply for a 6 month period from date of den information. If you are unsure about how to respond and conviction record from the police depart	ial. If you have any doubt as to to any questions on this form,	whether check with	to include n the City (	the facts of a sp clerk for clarification	pecific incide atlan. You ca	ent it is recomm	ended that yo	ou disclose the
https://www.wicourts.gov/casesearch.htm (CCAP n	nay not provide comprehensive	e list of all	arrests/co	nvictions).				website at.
1. LEGAL NAME: MariSOI	- MCElroy	Lope	Last		DATE	OF BIRTH:		
ADDRESS:	widate 0		Last					
					PHO	NE:		
city: Evansiable	STATE: WI			3534	GENI	DER: Male	Fen	nale
Driver's License No.:	<u> </u>		tssuing 5	itate: W I				
HOW LONG HAVE YOU LIVED AT ABOVE ADDRESS?	5 years		Former	Name(s):	Laris	ol Lope	2	
Prior Street Address If Above Address Is Less Than 5 Y	ears State Zlp From To	City		State		Zip	From	То
			- 1					
	ARREST AND C	ONVICTI	ON RECO	RD				
	(Anywhere within the							
2. Have you ever been cited and/or convicted of a fel	ony?					Yes		(No)
3. Have you ever been cited and/or convicted of a mis						Yes		(No)
4. Within the past ten (10) years, have you been arres	ted for, received a summons	to appear	in court fo	or, or forfeited	a bond for a	any of the follo	wing:	
a) Any underage alcohol violation?						Yes		(No)
b) Operating a motor vehicle while intoxicated?						Yes		(No)
<ul> <li>c) Selling or furnishing alcoholic beverages to underaged) Permitting underage person on licensed premises?</li> </ul>						Yes		(No)
e) Allowing persons on licensed premises after closing						Yes		(NO)
f) Any alcohol related violation other than a, b, c, d, a						Yes Yes		No
g) Sale of legal or illegal drugs to include prescription		any illegal	drues to ir	ctude prescript	ion	res		(No)
medications not prescribed to you?		,	arago to n	iciade presempt		Yes		No
h) Fighting, disorderly conduct, assault, or battery?						Yes		(No)
i) Resisting arrest, interfering with a police officer or of	bstructing an officer?					Yes		(No)
j) Any crime or ordinance violation not listed above of						Yes		○N <sub>®</sub>
5. For each YES response above, you must identify all	violations below. Attach addi	tional she	ets if nece			ack of this appl	ication.	
TYPE OF ARREST, SUMMONS, VIOLATION	OR CHARGE			MONTH/YEAR	L	CITY		STATE
Within the last two (2) years, did you have and/or	complete one of the followin	g:	Attach co	ertificate of cor	npletion for	Responsible A	lcohol Server	s Course
Successfully completed a Responsible Alcohol				The same of the sa	Take the second second	etail alcohol lice		7 00 21 30
☐ Held an Operator's License issued in Wiscon						etail alcohol lice		
6. CERTIFICATION: I do hereby swear, under penalty of statements herein are complete, true and correct. I fur ation of this application. Additionally, I understand that do further agree to comply with all laws, resolutions, or	of perjury, that I am the person ther understand a full backgro t this application may be denie	und inves	tigation m tains any f	ay be conducte alsification-and	d by the Eve	insville Police D	epartment pri	ior to consider-
Signature: Wif M		Em	ail:					
Printed Name: Marisol McElvoy Lope;	2	Dat	e: 05/0	5/2023				
	FOR MUNICIPALITY U	SE ONLY	BELOW TH	IS LINE	13,113			-41 14 75 18
olice Department Recommendation and Comments:		0.00	55	ommittee:	inalis di		and the	
		Appr	oved:		enled:	Da	ıte:	
				Office Signatu	re		Date	
pproved: Denied:	<del></del>	Rece	ipt#					
Police Chief's Signature	15 23 bate	-						



CITY OF EVANSVILLE CITY CLERK'S OFFICE

New Operator's License: \$35		erator'	s License: \$35.0	0	Provision	al License: \$	15.00
A Police check will be completed. Please read of cannot reapply for a 6 month period from date of information. If you are unsure about how to resume and conviction record from the police of https://www.wicourts.gov/casesearch.htm (Control of the police o	of denial. If you have any doubt as to pond to any questions on this form, lepartment and/or the court v	ification and ownerher of the character	d/or misrepresentation to include the facts of the City Clerk for claim to your interacted to the control of th	on may be gro a specific inci	ounds for denial	mended that you	disclose the
1. LEGAL NAME: MIChael	Tohn C	TEOI	arrests/convictions).	DA:	TE OF BIRTH: \		
First	Middle	000	Last	DA	E OF BIRTH: \		
ADDRESS:				PH	ONE:	v	
CITY: Albany	STATE: W/		ZIP: 5350	5 2 GE	NDER: Mai	e) Fema	ale
Driver's License No.:	*		Issuing State:	The state of the s	onsiv	1	
HOW LONG HAVE YOU LIVED AT ABOVE ADDRE			Former Name(s):				
Prior Street Address if Above Address is Less Th	an 5 Years State Zip From To	City	State		Zip	From	To
124							
	ARREST AND C			1456 SMARKED	ertonia de como de	NUMBER	Stiller Wile
	(Anywhere within th	ne United S	tates of America).	1000	The fill of the second		
2. Have you ever been cited and/or convicted or					Yes		(No)
3. Have you ever been cited and/or convicted of					Yes		(No)
4. Within the past ten (10) years, have you been a) Any underage alcohol violation?	arrested for, received a summons	to appear	In court for, or forfelt	ted a bond fo		owing:	
b) Operating a motor vehicle while intoxicated?					Yes Yes		(No)
c) Selling or furnishing alcoholic beverages to ur					Yes		No
d) Permitting underage person on licensed pren					Yes		(No)
e) Allowing persons on licensed premises after	closing?				Yes		
<ul> <li>f) Any alcohol related violation other than a, b,</li> <li>g) Sale of legal or illegal drugs to include prescri</li> </ul>	c, d, and e?		for 4 - 1 - 1 - 1 - 1 - 1 - 1 - 1	Mira Para	Yes		(No)
medications not prescribed to you?	puon medications or possession or	any illegal	drugs to include presc	ription	Yes		(II)
h) Fighting, disorderly conduct, assault, or batte	ry?						(No)
i) Resisting arrest, interfering with a police office	er or obstructing an officer?				Yes Yes		(No)
j) Any crime or ordinance violation not listed about					Yes		No
5. For each YES response above, you must ident	fy all violations below. Attach add	litional she	ets if necessary or con	ntinue on the	back of this app	olication.	
TYPE OF ARREST, SUMMONS, VIOLE	ATION OR CHARGE		MONTH/Y	EAR	CITY	STATE	
			Α				
			1				
Marie I at 1 at 2	New York Control of the Control of t		ELVINO VIEW SING	NEWS STIE	L		
Within the last two (2) years, did you have an	nd/or complete one of the following	ng:	Attach certificate of				Course
Successfully completed a Responsible			An alcoh				
Held an Operator's License issued in W	/isconsin	10 March 1971			retail alcohol lic		
6. CERTIFICATION: I do hereby swear, under per statements herein are complete, true and correct ation of this application. Additionally, I understan do further agree to comply with all laws, resolution.	d that this application may be deni-	ound invest led if it cont	ligation may be condu tains any falsification.	icted by the E	vansville Police	Department prio	r to consider-
Signature: Michigan Dop		Ema	all;				
Printed Name: Michael J. Co	eorge	Dat	e: 5-5-2	023			
uwa ishilisha sanka le kupisak	FOR MUNICIPALITY (	USE ONLY	SELOW THIS LINE	STORY OF	OHAR IRIS	HI K. LOCK	
olice Department Recommendation and Comme	nts:	Publi	c Safety Committee:				
			oved:	Denled:		Date:	
\ 6			Clerk's Office Sign	ature	-	Date	
pproved	nd:	Recel			1	•	
pproved	\$15/23						
Police Chief's Signature	Date						



CITY OF EVANSVILLE CITY CLERK'S OFFICE

New Operator's License: \$35.00	X Renewal Ope	rator's	License: \$35.00		Provisiona	l License:	\$15.00
NOTE: APPLICAT	TION FEE WILL NOT BE	REFUND	ED IF DENIED OR WIT	HDRAWN			
A Police check will be completed. Please read carefully and	answer honestly, Falsific	ation and	/or misrepresentation ma	av he groui	nds for denial	of license/pern	nit. Applicant
cannot reapply for a 6 month period from date of denial. If y	ou have any doubt as to w	vhether to	include the facts of a soe	cific incide	nt it is recomn	nended that you	disclose the
information. If you are unsure about how to respond to any and conviction record from the police department	questions on this form, ch	neck with	the City Clerk for clarificat	ion. You ca	n obtain infor	mation regardin	ig your arrest
https://www.wicourts.gov/casesearch.htm (CCAP may not	provide comprehensive l	ist of all a	rests/convictions)	ne wiscor	isin Circuit t	Court Access	website at:
(m1/A)	Link	ISC OT UN B	MICHINITH				
1. LEGAL NAME: First A_ N	VIIIV		MEREUIT	DATE	OF BIRTH:	2548 727	
Maria	liddle		Last		10-		e)
ADDRESS:	1.16			PHON	VE.		
CITY: EVALULE STAT	E: WI		ZIP: 53536	GENE	DER: Male	Fem	ala
2000	577		111	/	PER. Wille	rem	die
Driver's License No.:	1		Issuing State:	7			
HOW LONG HAVE YOU LIVED AT ABOVE ADDRESS?	40VIS		Former Name(s):				
Prior Street Address if Above Address is Less Than 5 Years 5	tate Zip From To	City	State	1	Zip	Erom	7-
	and any vision to	City	Juste		Zip	From	To
							4
	ARREST AND CO	NVICTIO	N RECORD	_			
	(Anywhere within the						
2. Have you ever been cited and/or convicted of a felony?					Yes		(No)
3. Have you ever been cited and/or convicted of a misdemen	anor?						
		varana.	41 24 22 0	2 (5)	Yes		(No)
4. Within the past ten (10) years, have you been arrested for a) Any underage alcohol violation?	, received a summons to	appear	n court for, or forfeited a	bond for a		wing:	
b) Operating a motor vehicle while intoxicated?					Yes		(No-)
c) Selling or furnishing alcoholic beverages to underage pers	on?				Yes		(No.)
d) Permitting underage person on licensed premises?					Yes Yes	-	No
e) Allowing persons on licensed premises after closing?					Yes		(No)
f) Any alcohol related violation other than a, b, c, d, and e?					Yes	_	No
g) Sale of legal or illegal drugs to include prescription medical	itions or possession of an	y illegal d	rugs to include prescription	on			
medications not prescribed to you?					Yes		(No.)
h) Fighting, disorderly conduct, assault, or battery?					Yes		No
i) Resisting arrest, interfering with a police officer or obstruct	ting an officer?				Yes		(No
j) Any crime or ordinance violation not listed above other the					Yes		(No)
5. For each YES response above, you must identify all violation		onal shee		e on the ba	ack of this app	lication.	
TYPE OF ARREST, SUMMONS, VIOLATION OR CH	ARGE		MONTH/YEAR		CITY	··	STATE
Within the last two (2) years, did you have and/or comple	ete one of the following:		Attach certificate of com	nletion for	Pasnansible A	Icohal Santare	Course
☐ Successfully completed a Responsible Alcohol Serve					tail alcohol lic		Course
Held an Operator's License issued in Wisconsin	ars course				tail alcohol (ic		
5. CERTIFICATION: I do here successe issued in wisconsin	ury that I am the never	who ear					
reactivenes never are complete, true and correct. I further up	iderstand a full backgrour	ad investi	pation may be conducted	hy the Eva	nsvilla Dolica I	Janzetmant aria	arta cancida-
and of this application. Additionally I understand that this at	oblication may be denied.	if it conta	ins any falsification-and t	hat I will no	at he shie to re	aannly for a C m	anek marinal I
to further agree to comply with all laws, resolutions, ordinance	es, and regulations, fede	ral, state	or local affecting the sale	of ferment	ed malt bever	ages and intoxic	ating liquors.
Signature: Jo 17 M Quell		F					
AL TO CALL	X	Emai			7		
Printed Name:		Date	3-29-20	123	A		
olice Department Recommendation and Comments:	FOR MUNICIPALITY USE	E ONLY BE	LOW THIS LINE				
sice department recommendation and comments:		Public	Safety Committee:				
		Appro	ved: De	nied:	D	ate:	
127			Clerk's Office Signature			Date	
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pproved:		Receip	. "				
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	1175						
$\times \times $	40 1 1 /	1					
Police Chief's Signature	500						



CITY OF EVANSVILLE CITY CLERK'S OFFICE

New Operator's License:			License: \$35.00		Provisional Li	cense: \$1	5.00
	NOTE: APPLICATION FEE WILL NOT					7/7/25	
A Police check will be completed. Please re cannot reapply for a 6 month period from a information. If you are unsure about how t and conviction record from the polic https://www.wicourts.gov/casesearch.htm	ead carefully and answer honestly. Falsil late of denial. If you have any doubt as to o respond to any questions on this form, te department and/or the court w	fication and whether t check with with which	d/or misrepresentation o include the facts of a the City Clerk for clarit you interacted, o	n may be grou specific incide fication, You ca	nds for denial of li nt it is recommend n obtain informatk	led that you di on regarding y	sclose the our arrest
1. LEGAL NAME: DUCCE	Gwen	B	ergsma	DATE	OF BIRTH:		
ADDRESS:	Middle		tast	PHO	VE		1 8 %s
CITY: Evansville	STATE: WI		zip: 5353	G GENE	DER: Male	Female	×
Driver's License No.:			Issuing State: W		sin	AC 750	
HOW LONG HAVE YOU LIVED AT ABOVE A			Former Name(s):	Dulcik	_ ('arste	ens	
Prior Street Address if Above Address is Le	ss Than 5 Years State Zip From To	City	State		Zip	From	To
	ARREST AND ( (Anywhere within th						
2. Have you ever been cited and/or convict			•		Yes	(	No
3. Have you ever been cited and/or convict	ted of a misdemeanor?				Yes		No
4. Within the past ten (10) years, have you	been arrested for, received a summons	to appear	in court for, or forfelt	ed a bond for	any of the followin	ıg:	
a) Any underage alcohol violation?	*				Yes		(No)
<ul> <li>b) Operating a motor vehicle while intoxic</li> <li>c) Selling or furnishing alcoholic beverages</li> </ul>					Yes Yes		No )
d) Permitting underage person on licensed					Yes		No.
e) Allowing persons on licensed premises a					Yes		No )
f) Any alcohol related violation other than					Yes		No.
g) Sale of legal or illegal drugs to include promedications not prescribed to you?	rescription medications or possession of	any illegal	drugs to include presc	ription	Yes	(	No
h) Fighting, disorderly conduct, assault, or	battery?				Yes	<b>-</b>	No
i) Resisting arrest, interfering with a police					Yes	_ ~	No
j) Any crime or ordinance violation not liste	ed above other than traffic or parking tic	kets?			Yes		No )
5. For each YES response above, you must		litional she				- T	MILITARY S
TYPE OF ARREST, SUMMONS,	VIOLATION OR CHARGE		MONTH/Y	EAR	CITY		STATE
						_	
	ave and/or complete one of the following	ng:	Attach certificate of		r Responsible Alco etail alcohol licens		ourse
Successfully completed a Respon					etail alcohol licens		
Held an Operator's License issued  6. CERTIFICATION: I do hereby swear, und	in Wisconsin er penalty of perjury, that I am the per	san who n	1/0 N-01 TO-50				and that all
statements herein are complete, true and c ation of this application. Additionally, I unde do further agree to comply with all laws, res	orrect. I further understand a full backgr erstand that this application may be den	ound inves led if it con	tigation may be condu tains any falsification-	icted by the Ev and that I will r	ansville Police Dep not be able to reap	artment prior ply for a 6 mo	to consider- nth period. I
Signature: Duluw Bus	8mu	Em			31 1.7K3 1 ==	7	4
Printed Name: DUICIL E	Bergsma	Da	te: <u>3/29</u>	12023	3		
	FOR MUNICIPALITY	USE ONLY	BELOW THIS LINE				
Police Department Recommendation and Co	omments:	Pub	lic Safety Committee:				
		Арр	roved:	Denied:	Date	N	
			Clark's Office Sign	natura.		Data	
$\sim$		Paca	Clerk's Office Sign lpt #	ature		Date	
Approved:	Denied:	wece.	ipt#				
	5/15/23						
Police Chief's Signature	Date	===-4					



CITY OF EVANSVILLE CITY CLERK'S OFFICE

				$ \sqcup$	Provisional	License	: \$15.00
A B 15 1 1 1 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1	NOTE: APPLICATION FEE WILL NOT B	E REFU	NDED IF DENIED OR WITH	IDRAWI	١.		
A Police check will be completed. Please	read carefully and answer honestly. Falsif	ication a	nd/or misrepresentation ma	y be grou	inds for denial o	f license/p	ermit. Applicant
carmot reapply for a 6 month period from	date of denial. If you have any doubt as to	whether	to include the facts of a spec	tific incide	ent it is recomme	tedt babne	you disclose the
information. If you are unsure about how	to respond to any questions on this form,	check wit	h the City Clerk for clarificati	on, You c	an obtain inform	ation regar	ding your arrest
and conviction record from the pol	ice department and/or the court wi	ith which	th you interacted, or th	e Wisco	nsin Circuit Co	ourt Acces	is website at:
https://www.wicourts.gov/casesearch.ht	m (CCAP may not provide comprehensive	list of al	arrests/convictions).	-			
1. LEGAL NAME: Denise	Ann		alvensleben	DAT	OF BIRTH:		
First	Middle	-	Last	UAI	OF BIRTH.		
ADDRESS:							
			1	PHO	NE:		- 404
CITY: Evansville	STATE: UT		ZIP: 53536	GEN	DER: Male	Æ	emale)
Principle May Area Cont.			1	Jacie	DEN. WIE		emale)
Driver's License No.:			Issuing State: US	Cons	n		
HOW LONG HAVE YOU LIVED AT ADONE	75 11-416			77-21-1			
HOW LONG HAVE YOU LIVED AT ABOVE A			Former Name(s): UC	cke			
Prior Street Address if Above Address is Le	ess Than 5 Years State Zip From To	Cit	State		Zip	From	To
	ARREST AND C	ONVICT	ON RECORD				
	(Anywhere within the						
2. Have you ever been cited and/or convic					V		
					Yes		(No)
3. Have you ever been cited and/or convic					(Yes)		No
4. Within the past ten (10) years, have you	been arrested for, received a summons t	o appea	in court for, or forfeited a l	ond for	any of the follow	ving:	
a) Any underage alcohol violation?					Yes	Ĭ	(No)
<ul> <li>b) Operating a motor vehicle while intoxic</li> </ul>					Yes		(No)
<ul> <li>c) Selling or furnishing alcoholic beverage:</li> </ul>					Yes		No
<ul> <li>d) Permitting underage person on licenses</li> </ul>					Yes		(No)
e) Allowing persons on licensed premises	after closing?				Yes		No
f) Any alcohol related violation other than	a, b, c, d, and e?				Yes		No
g) Sale of legal or illegal drugs to include p	rescription medications or possession of a	ny illegal	drugs to include prescription	n	163		CNO
medications not prescribed to you?		,g	are go in mercure prescription	•	Yes		(No)
h) Fighting, disorderly conduct, assault, or	battery?				Yes	_	The state of the s
i) Resisting arrest, interfering with a police						-	(No)
j) Any crime or ordinance violation not list	ed above other than traffic or parking ticks	etc?			Yes		(No)
5. For each YES response above, you must					Tes)		No
TYPE OF ARREST, SUMMONS,	WOLATION OR CHARGE	ionai sii	Company of the Compan	on the D		cation.	A CONTRACTOR
			MONTH/YEAR		CITY		STATE
Ciked For Selling Cigarre	ks to an linder aged De	150m	January 20	33	Evansv	1110	WI
,							00 1
	ave and/or complete one of the following	:	Attach certificate of comp	letion for	Responsible Ale	cohol Serve	ers Course
Successfully completed a Respon	sible Alcohol Servers Course		☐ An alcohol age	nt for a r	etail alcohol licer	nse	
Held an Operator's License issued			The sole propr	ietor of re	etail alcohol licer	nse	
6. CERTIFICATION: I do hereby swear, und	er nanalty of portury that I am the norse	w who e					
statements herein are complete, true and continued this application. Additionally, building	orrect. I further understand a full backgrou	and inves	tigation may be conducted it	ng applic	ation for an ope	rator's lice	nse, and that all
anon or this application, Auditionally, Tunge	rstanu that this application may be denie	d if it con	tains any faisification and th	at I will n	ot ha abla to ran	anly for a f	and a second second second second
do further agree to comply with all laws, res	olutions, ordinances, and regulations, fed	eral, stat	e or local affecting the sale of	f fermen	ted malt hoverage	ipply for a t	month period. I
Who notes	200		the sale o	701111011	teo mar ocrera	es and mice	Alcacing ilquors.
Signature: Music (1 / 1)	Chestel	Em	ail:				
Davis and Wal	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	- 1	Out a la				
Printed Name: Denise A. Hal	vens)eben	Dat	e 04 20 20	23			
Jolles Department Review 1 1 1	FOR MUNICIPALITY US	SE ONLY	BELOW THIS LINE				
Police Department Recommendation and Co	mments:	Publ	lc Safety Committee:				
			PERSONAL PROPERTY SECURITION SECU	ied:	Dat	te:	
<b>&gt;</b>			Clerk's Office Signature			Date	
$\sim$		Rece	ipt#	1			
Approved:	Denied:		Control of the Contro				
~ N 1	1						
$\mathcal{N} \cup \mathcal{N}$	1/02						
$\sim \sim$	7113165						
Police Chief's Signature							



CITY OF EVANSVILLE CITY CLERK'S OFFICE

New Operator's License: \$35.00 Renewal Operator				$\Box$	Provisional	License:	\$15.00
NOTE: APPLICATION FEE WILL NOT B	BE REFUN	DED I	F DENIED OR WITH	DRAW	٧.		
A Police check will be completed. Please read carefully and answer honestly. Falsif	fication an	d/or n	isrepresentation may	be grou	unds for denial of	license/per	mit. Applicant
cannot reapply for a 6 month period from date of denial. If you have any doubt as to	whether	to inclu	ide the facts of a speci	fic incide	ent it is recomme	nded that vo	ou disclose the
information. If you are unsure about how to respond to any questions on this form,	check with	the C	ty Clerk for clarificatio	n. You c	an obtain informa	ation regard	ing your arrest
and conviction record from the police department and/or the court w	rith which	n you	interacted, or the	Wisco	nsin Circuit Co	urt Access	website at:
https://www.wicourts.gov/casesearch.htm (CCAP may not provide comprehensive	e list of all	arrest	/convictions).	_			
1. LEGAL NAME: JUSSICA ANA		tal	1	DAT	E OF BIRTH:		
First		Li	st			, ,	
ADDRESS:				PHO	NE:		
CITY: EVANSVILLE STATE: WIT		71D-	53536	GEN	DER: Male	Con	Colores
•				TOTIO	DEN. Widle	rei	male/
Driver's License No.:		Issui	ng State: WI				
HOW LONG HAVE YOU LIVED AT ABOVE ADDRESS? 5 GEATS		Forn	ner Name(s): \	Sic	a Halva	enslel	$\sim$
Prior Street Address If Above Address is Less Than 5 Years State Zip From To	City	•	State	, , , ,	Zip	From	To
							- ,-
ARREST AND C						A-1	WITTER S
(Anywhere within the	e United S	tates o	f America).				
2. Have you ever been cited and/or convicted of a felony?					Yes		(No)
3. Have you ever been cited and/or convicted of a misdemeanor?					Yes		No
4. Within the past ten (10) years, have you been arrested for, received a summons	to appear	in cou	rt for, or forfeited a b	ond for	any of the follow	ing:	
a) Any underage alcohol violation?					Yes		(No)
b) Operating a motor vehicle while intoxicated?					(Yes)		No
c) Selling or furnishing alcoholic beverages to underage person?					Yes		(No)
d) Permitting underage person on licensed premises?					Yes		
e) Allowing persons on Ilcensed premises after closing?					Yes		(NO)
f) Any alcohol related violation other than a, b, c, d, and e?					Yes		(No)
g) Sale of legal or illegal drugs to include prescription medications or possession of a	any illegal	drugs t	o include prescription				$\tilde{}$
medications not prescribed to you?					Yes		(No)
h) Fighting, disorderly conduct, assault, or battery?					Yes		(No)
i) Resisting arrest, interfering with a police officer or obstructing an officer?					Yes		(No)
j) Any crime or ordinance violation not listed above other than traffic or parking tick					Yes		(No)
5. For each YES response above, you must identify all violations below. Attach additional actions are selected as a selected selected and selected as a sele	itional she	ets if r	ecessary or continue	on the l	back of this applic	ation.	
TYPE OF ARREST, SUMMONS, VIOLATION OR CHARGE		_	MONTH/YEAR		CITY		STATE
OWI		091	2021		oregon		WI
					1		
Within the last two (2) years, did you have and/or complete one of the followin	E:	Attac	h certificate of compl	etion fo	r Rasnansihia Ala	ohol Server	COURSE
Successfully completed a Responsible Alcohol Servers Course		Γ	_		retail alcohol licer		3 (00136
Held an Operator's License issued in Wisconsin		1			etail alcohol licen		
6. CERTIFICATION: I do hereby swear, under penalty of perjury, that I am the pers	on who m						and and all and the
statements herein are complete, true and correct. I further understand a full backgro							
ation of this application. Additionally, I understand that this application may be denie	ed if it con	tains a	ny falsification-and tha	atil will r	not be able to rea	nnly for a 6	month period 1
do further agree to comply with all laws, resolutions, ordinances, and regulations, fed	deral, state	e or loc	al affecting the sale of	f fermer	ited malt beverag	es and intox	dicating liquors.
Signature: Jesaca hall				3 8 8			N
	Em	all:		JU	Janier	<del></del>	
Printed Name: <u>Jessica</u> Hall	Dat	e:	5/11:	23			
							•
FOR MUNICIPALITY U	JSE ONLY I	BELOW	THIS LINE				
Police Department Recommendation and Comments:	Publ	lc Safe	ty Committee:				
	Appr	roved:	Deni	ed:	Dat	e:	
\_	_	Cla	rk's Office Signature		<del>, .</del>	Date	
$\sim$ $\gamma$			J Omice Jignotule			Dete	
Approved: Denied:	Recei	pt#					
1 5 1101/07							
Police Chief's Signature Date							



CITY OF EVANSVILLE CITY CLERK'S OFFICE

01 3. Madisort 31, 1 O t						
New Operator's License: \$35.00 Renewal Op					nal License:	\$15.00
NOTE: APPLICATION FEE WILL NOT B						
A Police check will be completed. Please read carefully and answer honestly. Faisif	fication an	d/or misrepres	entation may be	grounds for deni	al of license/per	mit. Applicant
cannot reapply for a 6 month period from date of denial. If you have any doubt as to	whether t	o include the f	acts of a specific in	ncident It is recon	nmended that yo	u disclose the
information. If you are unsure about how to respond to any questions on this form,	check with	the City Clerk	for clarification. Y	ou can obtain info	ormation regard	ng your arrest
and conviction record from the police department and/or the court w https://www.wicourts.gov/casesearch.htm (CCAP may not provide comprehensive				isconsin Circuit	Court Access	website at:
	e list of all	arrests/convict	ionsj.			
1. LEGAL NAME: Gail Mary		Henr	<b>y</b>	DATE OF BIRTH:		
First A Middle		Lact	, ,			
ADDRESS:		10		PHONE:		
CITY: Evansuille STATE: WI			2526			
CITY: LUGINSUITE STATE: WL		ZIP: 5	3536	GENDER: Ma	ale (Fer	nale )
Driver's License No.:		Issuing State:	AZ			
1 = 1		1.5	2.77		2 2 V	
HOW LONG HAVE YOU LIVED AT ABOVE ADDRESS?	r 5	Former Name	e(s): Maide	n nane;	Flood	
Prior Street Address if Above Address is Less Than 5 Years State Zip From To	City		State	Zip	From	То
					_	
ARREST AND C	ONVICTIO	ON RECORD	BANKER LEADER	e con en en en en	A. E. P. C. F. F. F. C. F.	
(Anywhere within the	e United St	ates of Americ	a).			
2. Have you ever been cited and/or convicted of a felony?				Ye	s	WO
3. Have you ever been cited and/or convicted of a misdemeanor?				Ye		No
						-
4. Within the past ten (10) years, have you been arrested for, received a summons	to appear	in court for, or	forfelted a bond			102
a) Any underage alcohol violation?				Ye		(No.) st
b) Operating a motor vehicle while intoxicated? c) Selling or furnishing alcoholic beverages to underage person?			<del></del>	Ye.		NO)
d) Permitting underage person on licensed premises?				Ye		(TO)
e) Allowing persons on licensed premises after closing?				Ye:		(No)
f) Any alcohol related violation other than a, b, c, d, and e?				Yes		No
g) Sale of legal or illegal drugs to include prescription medications or possession of a	any Illegal (	drugs to include	nrescription	Te.		(No)
medications not prescribed to you?	arry megari	ardea to menuo	e prescription	Yes	.	No
h) Fighting, disorderly conduct, assault, or battery?				Yes		7005
i) Resisting arrest, interfering with a police officer or obstructing an officer?				Yes		000
j) Any crime or ordinance violation not listed above other than traffic or parking tick	ets?			Yes		(No)
5. For each YES response above, you must identify all violations below. Attach addi	tional shee	ats if necessary	or continue on t	he back of this a	polication.	55000
TYPE OF ARREST, SUMMONS, VIOLATION OR CHARGE			NTH/YEAR	Ci	And the second second	STATE
						JIHIL
						1.000
Within the last two (2) years, did you have and/or complete one of the following	g:	Attach certific	ate of completio	n for Responsible	Alcohol Servers	Course
Successfully completed a Responsible Alcohol Servers Course			n alcohol agent fo			
The state of the s			ne sole proprietor			
Held an Operator's License issued in Wisconsin	on who m					70
<ol><li>CERTIFICATION: I do hereby swear, under penalty of perjury, that I am the persistatements herein are complete, true and correct. I further understand a full backgro</li></ol>	on who m	ade and signed	the foregoing a	ppiication for an e Evansville Police	operator's licen	se, and that all
ation of this application. Additionally, I understand that this application may be denie	ed if It cont	ains any faisific	cation-and that I v	vill not be able to	reapply for a 6 i	month period. I
do further agree to comply with all laws, resolutions, ordinances, and regulations, fed	deral, state	or local affecti	ng the sale of fer	mented malt bev	erages and intox	icating liquors.
u -0410						81.049
Signature: Down Henry	Ema	il:	70			
Printed Name: Gail Herry	Date	41	2 23			-
The state of the s	00		V. 1 V. J			70 1
FOR MUNICIPALITY U	JSE ONLY B	ELOW THIS LIN	NE			- 511
olice Department Recommendation and Comments:		c Safety Comm				
		oved:	Denied:		Date:	-1
	1.77				water,	
	_					72.
	1	Clerk's Offic	e Signature		Date	
Ψ	Recei	pt#				
pproved:						-
						100
V/ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \						
	!					-
Police Chief's Signature Date						



CITY OF EVANSVILLE CITY CLERK'S OFFICE

Renewal Oper			Provi	sional License	: \$15.00
NOTE: APPLICATION FEE WILL NOT BE	REFUND	D IF DENIED OR WITH	HDRAWN.		
A Police check will be completed. Please read carefully and answer honestly. Falsification of the state of th	ation and/	or misrepresentation ma	y be grounds for	denial of license/pr	ermit, Applicant
Trainioc reapply for a dimonth period from date of genial, if you have any doubt as to w	vhether to	nclude the facts of a coo	cific incident it is	rocommonded that	and the state of the state of
information. If you are unsure about now to respond to any questions on this form, ch	neck with th	ne City Clerk for clarificat	ion. Vou can obtai	n information roses	
and conviction record from the police department and/or the court with	h which	you interacted or th	ne Wisconsin Ci	rcuit Court Acces	is website at:
The state of the s	ist of all ar	ests/convictions).			
1. LEGAL NAME: Kalen M	I	1001	DATE OF BIR	TH-	
First Middle		Last	DATE OF BIK	in. / · · /	•
ADDRESS:		/	numarin.		
		F_ 12 2 2 2	PHONE:		,
CITY: EVENSUILLE STATE: WI	- 3	IP: 53536	GENDER:	Male P	emale
But the state of t		1 )			
Driver's License No	1	ssuing State:	+		
HOW LONG HAVE YOU LIVED AT ABOVE ADDRESS? 2/ VCASS			wien (	Soper	
Prior Street Address if Above Address is Less Than 5 Years State Zip From To					
The state of the s	City	State	Zip	From	To
1 A					
/01					_
ARREST AND CO	NVICTION	RECORD			
(Anywhere within the L	United Stat	es of America).			
2. Have you ever been cited and/or convicted of a felony?				Yes	NO.
3. Have you ever been cited and/or convicted of a misdemeanor?				Yes	8
	personal and I				do
4. Within the past ten (10) years, have you been arrested for, received a summons to a) Any underage alcohol violation?	appearin	court for, or forfeited a	bond for any of the		
b) Operating a motor vehicle while intoxicated?				Yes	<b>8</b>
c) Selling or furnishing alcoholic beverages to underage person?				Yes	<u>M</u>
d) Permitting underage person on licensed premises?				Yes	No
e) Allowing persons on licensed premises after closing?				Yes	<b>888</b>
f) Any alcohol related violation other than a, b, c, d, and e?				Yes	(Np
g) Sale of legal or illegal drugs to include prescription medications or possession of any	. 911 -			Yes	M
medications not prescribed to you?	y illegal dru	gs to include prescriptio	n	20	
h) Fighting, disorderly conduct, assault, or battery?				Yes	<b>®</b>
i) Resisting arrest, interfering with a police officer or obstructing an officer?				Yes	<u></u>
Any crime or ordinance violation not listed above other than traffic or parking tickets	-3			Yes	NO
5. For each VES response above, you must blood to all utalities to be a few to the state of the	ST SOLA WATER	A STATE OF THE STA		Yes	NO
5. For each YES response above, you must identify all violations below. Attach addition	onal sheets	if necessary or continue	on the back of the	ils application.	
TYPE OF ARREST, SUMMONS, VIOLATION OR CHARGE		MONTH/YEAR		CITY	STATE
,) A					
N / J					
MINE ALL DEL MONTO DE CONTROL DE DESCRIPTO DE CONTROL D	_				
Within the last two (2) years, did you have and/or complete one of the following:	A	ttach certificate of comp	oletion for Respon	sible Alcohol Serve	rs Course
Successfully completed a Responsible Alcohol Servers Course			ent for a retail alco		
Held an Operator's License issued in Wisconsin		The sole propi	rietor of retail alco	hol license	
6. CERTIFICATION: I do hereby swear, under penalty of perjury, that I am the person	who made	and signed the forego	ing application to		1.1.
statements never are complete, true and correct, i further unperstant a full backgroup	id invoctios	tion may be conducted i	by the Eugenille F	Jalian Danada III	7
do further agree to comply with all laws, resolutions, ordinances, and regulations, feder	al, state or	local affecting the sale of	of fermented malt	beverages and into	xicating liquors.
Signature: Maren Jun		7,00	141		0
aignature:	Email:				
Printed Name: Koren Frey	D-4	4/20/22			
	Date:	1/20/07			
FOR MUNICIPALITY USE	ONLY BEL	OW THIS LINE			
olice Department Recommendation and Comments:			Paid To:		
	The second second	afety Committee:	MINISTER MARCIL	vansville	
	Approve	ea: Der	nied: City of E	Vol Date LE	
			1		
		Clerk's Office Signature		Data.	
V				Date	
pproved: Denied:	Receipt		Receipt:	1 153147	105.00
$\sim$ 1			•		reasing
1)				LE HOME TALENT	
X			May 9, 20	123 08:00AM	
Police Chief's Signature Date	-				
Police Chier's Signature J Date	1				



CITY OF EVANSVILLE CITY CLERK'S OFFICE

New Operator's License:					Provision	nal License: \$	15.00
	NOTE: APPLICATION FEE WILL NOT B	BE REFU	NDED IF DE	NIED OR WITHDA	RAWN.		
cannot reapply for a 6 month period from information. If you are unsure about how and conviction record from the po	read carefully and answer honestly. Falsifi date of denial. If you have any doubt as to to respond to any questions on this form, lice department and/or the court w ton (CCAP may not provide comprehensive	whether check wit which	to include to the City Cl the you into	he facts of a specific lerk for clarification eracted. or the	Incident it is recor	mmended that you	disclose the
1. LEGAL NAME: VOL	M	L IIJC OT an	Frey	wictionsy.	DATE OF BIRTH:		
ADDRESS:	Middle		Last		PHONE:	, ,,	(
city: Evansville	STATE: WI		ZIP: 5	3536	-	ale) Femi	ale
Driver's License No.:			Issuing St	110			
HOW LONG HAVE YOU LIVED AT ABOVE A			Former N		i de la companya de l		
Prior Street Address II Above Address Is L	ess Than 5 Years State Zip From To	City		State	Zip	From	То
NA							
	ARREST AND C						
2. Have you ever been cited and/or convi-		e ormed :	AUTO OF AIR	ierica).	Ye		<b>(6)</b>
3. Have you ever been cited and/or convi-	cted of a misdemeanor?				Ye		<b>6</b>
4. Within the past ten (10) years, have yo	The state of the s	to appear	in court for	r or forfeited a bon			(40)
a) Any underage alcohol violation?	The state of the s	to appear	in court (o	r, or iorieited a pori	Ye		Ng
b) Operating a motor vehicle while intoxi-					Ye		Mg
c) Selling or furnishing alcoholic beverage					Ye		M
d) Permitting underage person on license					Ye	s	NO
e) Allowing persons on licensed premises					Ye	S	No
f) Any alcohol related violation other than	1 a, b, c, d, and e?				Ye	S	10
g) Sale of legal or fliegal drugs to include p	prescription medications or possession of a	any illegal	drugs to inc	clude prescription			
medications not prescribed to you?  h) Fighting, disorderly conduct, assault, or	r hattan 2				Ye		(6)
i) Resisting arrest, interfering with a police					Ye		(NB)
i) Any crime or ordinance violation not list	ted above other than traffic or parking tick	otr3			Ye		(No)
5. For each YES response above, you must			nate II nassa		Ye	5	(NO)
TYPE OF ARREST, SUMMONS,		LIONAL SIL					
THE OF PARTIES 1, SOUTH TOTAL	VIOLATION OR CHARGE		-	MONTH/YEAR	CI	TY	STATE
ALX.							
1001							
Within the last two (2) years, did you h	nave and/or complete one of the following	g:	Attach ce	rtificate of complet	ion for Responsible	e Alcohol Servers	Course
Successfully completed a Respon	Andrew Color				for a retail alcohol		course
Held an Operator's License issue			H		or of retail alcohol		
	der penalty of perjury, that I am the person	on who m					
rialements herem are complete, true and o	correct. I further understand a full backgrou	und inves	itigation ma	y be conducted by t	he Evaneville Polic	a Danartment aria	e to consider
ition of this application. Additionally, I und	erstand that this application may be denie	ed if it con	itains any fa	sification-and that	will not be able to	reapply for a 6 m	anth marind 1
lo further agree to comply with all laws, re	soutions ordinances, and regulations, fed	ieral, stati	e or local aff	fecting the sale of fe	ermented mait bev	erages and intoxic	ating liquors.
ignature:	Vyh	Em	aile				
	7 11/1			- 1 - 1	- 91	0	
rinted Name:	710	Dat	te: <u>4/</u>	30/23			
1 0	FOO BALLINICIDALITY III	ICC ONLY					
olice Department Recommendation and C	FOR MUNICIPALITY U						
	omments:	100	ic Safety Co	5.40 0.0			
•		App	roved:	Denied	1:	Date:	
			Clerk's (	Office Signature		Date	
9		Rece	ipt#				
pproved:	Denied;		(5)				
`XU\	5/15/23						
Police Chief's Signature							



CITY OF EVANSVILLE CITY CLERK'S OFFICE

New Operator's License: \$35.00 Renewal Ope						nal Licen	se: \$15.00	_
NOTE: APPLICATION FEE WILL NOT B	E REFUN	DED IF DE	NIED OR WITH	RAWN				
A Police check will be completed. Please read carefully and answer honestly. Falsifi cannot reapply for a 6 month period from date of denial. If you have any doubt as to information. If you are usually about his property	ication an	d/or misre	presentation may	be groun	ds for den	ial of license	a/permit. Applica	nt
I mornation. If you are unsure about now to respond to any questions on this form, of	theck with	n the City Cl	erk for clarification	n Vaurai	n obtain int	formation re	garding vous ores	
and conviction record from the police department and/or the court wi	ith which	n vou int	eracted or the	Wiscon	sin Circui	t Court Ad	ccess website a	at:
https://www.wicaurts.gov/casesearch.htm (CCAP may not provide comprehensive				_			- 3	
1. LEGAL NAME: Michael E		nase.	\$	DATE	OF BIRTH:			
ADDRESS:		Last					/	
				PHON	E:			
CITY: EVA-Suille STATE: WI		ZIP: 5	3536	GEND	ER: M	ale	Female	
Driver's License No.:		Issuing St	tate: W1					_
HOW LONG HAVE VOLUMED AT ADDRESS TO THE STATE OF THE STAT								_
HOW LONG HAVE YOU LIVED AT ABOVE ADDRESS?  Prior Street Address if Above Address is Less Than 5 Years State Zip From To	-	Former N	The second secon		200			
The street Hadress is Above Address is Less Thair 5 Tears State Zip From 10	City	_	State	- 7	Zip	Fro	m To	
112								
V 4.1								
ARREST AND CO								-
(Anywhere within the	United S	tates of Am	erica).					
2. Have you ever been cited and/or convicted of a felony?					Ye	es	No	
3. Have you ever been cited and/or convicted of a misdemeanor?					de	3	No	
4. Within the past ten (10) years, have you been arrested for, received a summons t	o appear	in court fo	r, or forfeited a bo	nd for ar	ny of the fo	ollowing:		
a) Any underage alcohol violation?      b) Operating a motor vehicle while intoxicated?					Ye		(NB	_
c) Selling or furnishing alcoholic beverages to underage person?				-+	Ye Ye		(Alb.	_
d) Permitting underage person on licensed premises?					Ye		(4)	-
e) Allowing persons on licensed premises after closing?					Ye		(No.	_
f) Any alcohol related violation other than a, b, c, d, and e?					Ye	es .	ad	
g) Sale of legal or illegal drugs to include prescription medications or possession of al medications not prescribed to you?	ny illegal (	drugs to inc	lude prescription	- 1			6	
h) Fighting, disorderly conduct, assault, or battery?					Ye		NO	_
i) Resisting arrest, interfering with a police officer or obstructing an officer?					Ye		(No)	_
j) Any crime or ordinance violation not listed above other than traffic or parking ticke	ets?				Ye	:S	No	
5. For each YES response above, you must identify all violations below. Attach addit	ional she	ets if neces	sary or continue	n the ba	ck of this a	pplication.		
TYPE OF ARREST, SUMMONS, VIOLATION OR CHARGE			MONTH/YEAR		С	ITY	STATE	
Within the last two (2) years, did you have and/or complete one of the following	=	Attach ce	rtificate of comple	tion for f	Responsibl	e Alcohol Se	ervers Course	
Successfully completed a Responsible Alcohol Servers Course			An alcohol agen					
Held an Operator's License issued in Wisconsin			The sole proprie	tor of ret	ail alcohol	license		
6. CERTIFICATION: I do bereby swear, under penalty of perjury, that I am the perso statements herein are complete, true and correct. I further understand a full background in a full sample and correct of that this application as a full background in the full sample and correct of the full sample and correct o								
and the state of t	1 IF IT CONT	'DIME SOU TO	leitication and the	بمصالنيينا ا	* ha abla *.			
do further agree (a) comply with all faws, resolutions, ordinances, and regulations, feder	eral, state	or local aff	ecting the sale of	fermente	d malt bev	erages and	intoxicating liquor	rs.
Signature:	Ema	iil: 🕒 🕓					34	
Printed Name: Michael Mares		<	12127				-	
Thirtee Hallies	Date	2:	12/23					
FOR MUNICIPALITY US	E ONLY B	ELOW THIS	LINE					
olice Department Recommendation and Comments:	Publi	c Safety Co	mmittee:					
	Appr	oved:	Denie	d:		Date:		
		Clerk's (	Office Signature			Date	3	-
pproved: Denied:	Receip	pt#						
pproved:								
ـ ا اسم ا ا								
5 115123								
Police Chief's Signature	-:							



CITY OF EVANSVILLE CITY CLERK'S OFFICE

New Operator's License: \$3	5.00 X Renewal Op	erator'	s Licens				al License: \$	15.00
NO	TE: APPLICATION FEE WILL NOT	BE REFU	NDED IF D	ENIED OR WITH	DRAWN	1.		
A Police check will be completed. Please read	carefully and answer honestly. Fals	ification ar	nd/or misr	epresentation ma	y be grou	nds for denial	of license/perm	it. Applicant
cannot reapply for a 6 month period from date information. If you are unsure about how to re	sol denial. If you have any doubt as t	a wnetner	to include	the facts of a spec	itic incide	ent it is recomn	nended that you	disclose the
and conviction record from the police	department and/or the court v	with which	h vou in	steracted or the	on. You ca	an obtain intori	mation regardin	g your arrest
https://www.wicourts.gov/casesearch.htm	CCAP may not provide comprehensive	ve list of all	arrests/co	invictions).	. **13201	nisiii Circuit	Court Access	website at:
1. LEGAL NAME: MIChelle	MAIL		11.7	len				
First	Middle		7710	en	DATE	OF BIRTH:		
ADDRESS:	·		Last					
			1		PHO	NE:		
CITY: Evansuller	STATE: W(		ZIP:	53536	GENI	DER: Male	e Fem	ale )
Debroe's Liennes No .	-		Manager Co.	tali				
Driver's License No.:			Issuing	State: W				
HOW LONG HAVE YOU LIVED AT ABOVE ADDI	RESS? JOYCAVS		Former	Name(s):				
Prior Street Address if Above Address is Less 1		City		State		Zip	From	То
								10
	ARREST AND	CONVICT	ION RECO	ORD	-			
	(Anywhere within the							
2. Have you ever been cited and/or convicted	of a felony?					Yes		No
3. Have you ever been cited and/or convicted	of a misdemeanor?					Yes		(No)
4. Within the past ten (10) years, have you bed		12000000	· 1	an anganganana	10			(140)
a) Any underage alcohol violation?	arrested for, received a summons	to appea	r in court t	or, or forfeited a l	ond for		owing:	(1)
b) Operating a motor vehicle while intoxicated	12					Yes		(No)
c) Selling or furnishing alcoholic beverages to						Yes Yes		(No
d) Permitting underage person on licensed pre						Yes		No
e) Allowing persons on licensed premises after						Yes		No
f) Any alcohol related violation other than a, b						Yes		(NO
g) Sale of legal or illegal drugs to include preso	ription medications or possession of	any illegal	drugs to it	nclude prescription	n			-1
medications not prescribed to you?						Yes		(NO
h) Fighting, disorderly conduct, assault, or bat	tery?					Yes		(N)
i) Resisting arrest, interfering with a police offi	cer or obstructing an officer?					Yes		(NO)
j) Any crime or ordinance violation not listed a			O On Generally	-		Yes	Z000 - 100 -	(No)
S. For each YES response above, you must iden		itional shi	ests if nece		on the b	ack of this app	olication.	Service Co.
TYPE OF ARREST, SUMMONS, VIO	LATION OR CHARGE			MONTH/YEAR		CITY		STATE
Within the last two (2) years, did you have	and/or complete one of the following	ne:	Attach c	ertificate of comp	letion for	Parnoncible	Alcohol Somore	Caller
☐ Successfully completed a Responsible		.0.		An alcohol age				Course
			==	The sole propr				
6. CERTIFICATION: I do hereby swear, under p statements herein are complete, true and corre	ct. I further understand a full backer	ound inves	nade and s	signed the foregoi	ng applic	ation for an o	perator's license	e, and that all
ation of this application. Additionally, I understa	ind that this application may be deni	ied if it con	itains any i	falsification-and th	at I will n	of he able to r	earnly for a 6 m	onth ported II
do further agree to comply with all laws, resolut	ions, ordinances, and regulations, fe	deral, stat	e or local a	iffecting the sale of	f fermen	ted malt bever	ages and intoxic	ating liquors.
Signature: Www. Axiv								
2.1		Em	ail:		1-1-	-		
Printed Name: Michelle Hilen	V:	Dat	te: 5/	10/2023				
* U 3 t 3 t - 10 t - 10 t								
	FOR MUNICIPALITY	USE ONLY	BELOW TH	IIS LINE				
olice Department Recommendation and Comm	ents:	Pub!	lic Safety (	Committee:		aid lo:		
			roved:		ied:C	ity of Evag	stelle	
S24			Clast-2	Office Cinner			-	
- V				Office Signature		*****	Date	******
pproved:De	nied:	Rece	ipt#			Receipt: 1.1	153175	35.00
						MICHELLE AL		00.500
	1/2/07							
X. C	ンバングン				۳	fay 10, 2023	) ITIULAN	
Police Chief's Signature	Date							



CITY OF EVANSVILLE CITY CLERK'S OFFICE

New Operator's License: \$35.0		ator'	s License: \$35.00	$\sqcup$	<b>Provisional Licens</b>	e: \$15.00	0
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A Police check will be completed. Please read car cannot reapply for a 6 month period from date of information, If you are unsure about how to respo and conviction record from the police dep	denial. If you have any doubt as to wond to any questions on this form, chostment and/or the court with	hether eck witi 1 whic	to include the facts of a specific h the City Clerk for clarification. h you interacted or the V	incide	nt it is recommended that	t you disclos	se the
https://www.wicourts.gov/casesearch.htm (CCA	P may not provide comprehensive li-	st of all	arrests/convictions).	1113001	isin circuit court Acc	233 MEDZICE	: a(,
1. LEGAL NAME: LISC	A		C. 1	L	Careasan		
First	Middle	-	-onnentag	DATE	OF BIRTH:		
ADDRESS:	Middle		Last		74		
ADDRESS.		_		PHO	VE:		
CITY: Evansuille	STATE: (a) I		ZIP: 53536	GENI	DER: Male	Female	
			21F. J JJ JG	GENI	CR: Iviale (	remaje	
Driver's License No.:			Issuing State: LO I				
HOW LONG HAVE YOU LIVED AT ABOVE ADDRESS	113 - 7						
HOW LONG HAVE YOU LIVED AT ABOVE ADDRESS Prior Street Address if Above Address is Less Than	E Vana State 21 Man Pos	1200	Former Name(s): Liset	A.			
THE SECT AGE STE ADDRE AGGESS IS LESS THAN	3 rears State Zip From 10	City	State		Zip From		To
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	ARREST AND COM	NVICTI	ON RECORD				2.4
2 1/	(Anywhere within the U	Inited S	tates of America).			D 11 1/16	1165
2. Have you ever been cited and/or convicted of a					(Yes>	No	
3. Have you ever been cited and/or convicted of a	misdemeanor?				(Pes	No	
4. Within the past ten (10) years, have you been a	rested for, received a summons to	appear	in court for, or forfeited a bone	d for a	ny of the following:		
a) Any underage alcohol violation?		Maria .			Yes	100	
b) Operating a motor vehicle while intoxicated?					Yes	NO	
c) Selling or furnishing alcoholic beverages to under	erage person?				Yes	408	
d) Permitting underage person on licensed premis					Yes	573	
e) Allowing persons on licensed premises after clo	sing?				Yes	639	
f) Any alcohol related violation other than a, b, c, c	l, and e?				Yes	NØ	
g) Sale of legal or illegal drugs to include prescripti	on medications or possession of any	illegal	drugs to include prescription				
medications not prescribed to you?  h) Fighting, disorderly conduct, assault, or battery					Yes	MG	
i) Resisting arrest, interfering with a police officer		_			Yes	100	
Any crime or ordinance violation not listed above	or obstructing an officer?			_	Yes	NG.	
S. For each YES response above, you must identify	all relations below that it stills	or a Walker			Yes	100	
TYPE OF ARREST, SUMMONS, VIOLATI	ON OR CHARGE	nai sne		the b	CONTRACTOR OF THE PROPERTY OF	and the second	ME N
do the roots and the same of t	A		MONTH/YEAR	-	CITY	STATE	
waspacty to crime	but get tull Wans	12	2: 220123		Auct Washington	WI	-
3			y Lass ago		Ozarakie.		
			maybe more	27	COLATY		
Within the last two (2) years, did you have and	or complete one of the following:		Attach certificate of completion	on for		uave Causes	TREE I
Successfully completed a Responsible Ald					tail alcohol license	rers course	
Held an Operator's License issued in Wisc		-	The sole proprieto				
6. CERTIFICATION: I do hereby swear, under penal	ty of periury that I am the person	1415				0.17004100	CIT-CHIT
statements herein are complete, true and correct. I	further understand a full backgroup	d Inves	tigation may be conducted by the	applica	ition for an operator's li	cense, and the	hat all
alion of this application. Additionally, I understand t	that this application may be denied it	fit con	tains any falcification and that I	mill m	* bo abla ** *******************************		1 4 7
do further agree to comply with all laws, resolutions	, ordinances, and regulations, federa	al, state	or local affecting the sale of fer	rment	ed malt beverages and in	toxicating lic	quors.
Signature: Isali Lounes #	30					Manage Ma	Acres
Signature.	<del>-</del>	Ema	all:	7	7	<u></u>	
Printed Name: h. Sa A. San H	100	Dat	e: 5~9~2013		*		
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The same of the sa	FOR MUNICIPALITY USE	ONLY	BELOW THIS LINE	70000	C		
olice Department Recommendation and Comment	ii .	Publi	ic Safety Committee:		1 10:		
1776 Charges in 070	ivilee county		oved: Denied:	Cit	of Evansville		
2001 Charles in Por	t unchington						-
J. J	- W. O. O. C	T	Clarkie Citi Ci				
			Clerk's Office Signature		Date		
pproved: Denied		Recei	pt #	Rec	eipt: 1,153195	35.0	חו
Olir		-			NENTAG LISA A	24 4 71	102
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インレー ! 5	1/7127			пау	11, 2023 02:06FM		
Police Chief's Signature	Onto	-					
, since similar angliature	Date						



CITY OF EVANSVILLE CITY CLERK'S OFFICE

New Operator's License: \$35.00		Operator'	s Licer	ise: \$35.00		Provisio	nal License:	\$15.00
A Police shock will be completed Please and save	PPLICATION FEE WILL N	OT BE REFU	NDED IF	DENIED OR WIT	HDRAWN			A 100 100 100 100
A Police check will be completed. Please read caref cannot reapply for a 6 month period from date of de information. If you are unsure about how to responsand conviction record from the police deparattps://www.wicourts.gov/casesearch.htm (CCAP	nial, if you have any doubt a d to any questions on this fo rtment and/or the cour	as to whether orm, check wit t with whic	to includ th the City the you	le the facts of a spo / Clerk for clarifica interacted.gorgo	ecific incide	nt it is recor	mmended that y	ou disclose the
1. LEGAL NAME: ETIM	Morgare)		-7	acley	DATE	OF BIRTH:		t-1111
First	Middle		Las	t (			1 1	
ADDRESS:	T		<u> </u>		PHON	IE:		10.0
CITY: Evensuille	STATE: WI			53536	GENE		ale Fe	male /
Driver's License No.:			Issuing	State: Wis	scon:	Sin		
HOW LONG HAVE YOU LIVED AT ABOVE ADDRESS?  Prior Street Address if Above Address is Less Than 5	Vanue Chata No France To	T		r Name(s):		Ten Military I		
Secure of France (Fig. 2) and (Fig. 2)	1	City		State		Zip	From	То
9148 W Seemen R	1	Every	الماند	WI	53	536	2001	new
	ARREST AN	ID CONVICT	ON REC	ORD	E CONTR		T. I. West	
2. Have you ever been cited and/or convicted of a fe	(Anywhere within	n the United	states or	America).		Va		( W.
3. Have you ever been cited and/or convicted of a m						Ye		No
4. Within the past ten (10) years, have you been arro		ons to appear	r in court	for, or forfeited a	bond for a			INO
a) Any underage alcohol violation?				101121120	Jona IO. U	Ye		(No)
b) Operating a motor vehicle while intoxicated?						Ye	es .	(No
<ul> <li>c) Selling or furnishing alcoholic beverages to under</li> <li>d) Permitting underage person on licensed premises</li> </ul>						Ye		(No
e) Allowing persons on licensed premises after closic						Ye		(No)
f) Any alcohol related violation other than a, b, c, d,	and e?					Ye Ye		(No)
<li>g) Sale of legal or illegal drugs to include prescription</li>	n medications or possession	of any illegal	drugs to	include prescription	on			Chic
medications not prescribed to you?						Ye	s	(No
<ul> <li>h) Fighting, disorderly conduct, assault, or battery?</li> <li>i) Resisting arrest, interfering with a police officer or</li> </ul>	-b					Ye		CNO.
j) Any crime or ordinance violation not listed above	other than traffic or parking	tickets?				Ye: Ye:		CNO
5. For each YES response above, you must identify a			ets if ne	cessary or continu	e on the ba	ck of this a	polication	(Na)
TYPE OF ARREST, SUMMONS, VIOLATIO	N OR CHARGE			MONTH/YEAR			TY	STATE
							. 1	JIAIL
Within the last two (2) years, did you have and/o	r complete one of the follo	wine:	Attach	certificate of com	nietles for	Dasa anallal	a Alexhal Carre	W
Successfully completed a Responsible Alcol								s Course
Held an Operator's License issued in Wisco			Ē					
6. CERTIFICATION: I do hereby swear, under penalty statements herein are complete, true and correct. I fu ation of this application. Additionally, I understand the do further agree to comply with all laws, resolutions,	of perjury, that I am the parties and a full back at this application may be d	kground inves lenied if it con	itigation i	signed the forego	oing applica	ntion for an	operator's licer e Department pr	ior to consider-
Signature: Maraelley			ail:			<del></del>		
Printed Name: Crin m Brackley	-	Dat						
olice Department Recommendation and Comments:	FOR MUNICIPALI	TY USE ONLY	BELOW T	HIS LINE	740	o 10:		
once began ment necommendation and comments;		I have	ic Safety	Committee: De		y of Evar	Date:	
			Clerk	's Office Signature	e		Date	
pproved: Denied:		Rece	pt#		Rec	eipt: 1.1	153201	35.00
XU	5/17/23				ÐR	ADLEY ERI		20.00
Police Chief's Signature	Date							



CITY OF EVANSVILLE CITY CLERK'S OFFICE

31 S. Madison St, PO Bo		- T G T 10 T 111 O , T T 1	5050	_			
New Operator's License: \$35.00 Renewal Oper				Provision	nal Licer	se: \$15	.00
NOTE: APPLICATION FEE WILL NOT BE	REFUNDED	IF DENIED OR WITH	DRAWN				
A Police check will be completed. Please read carefully and answer honestly. Falsification	ation and/or i	misrepresentation may	be grou	nds for deni	al of licens	e/permit. /	policant
cannot reapply for a 6 month period from date of denial. If you have any doubt as to w	hether to incl	lude the facts of a spec	ific incide	nt it is recon	imended ti	hat you dis	loca the
information. If you are unsure about how to respond to any questions on this form, ch	neck with the (	City Clerk for clarification	n. You ca	n obtain info	rmation re	parding vo	ur arrest
and conviction record from the police department and/or the court with	h which you	u interacted, or the	Wiscor	nsin Circuit	Court A	ccess web	site at:
https://www.wicourts.gov/casesearch.htm (CCAP may not provide comprehensive in	ist of all arres	ts/convictions).					_
1. LEGAL NAME: \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	V	nuers	DATE	OF BIRTH:			e 0
Middle (	,	ast		100		-	^
ADDRESS:			PHO	NE:	22	2 4 6	· · · ·
CITY: JONESVILLE STATE: U)T		53545	2010	5276.7			1/
CITY: OCT VICE STATE: U	ZIP	004 12	GENE	DER: Ma	ale	Female	
Driver's License No.:	Issu	ing State: U					
HOW LONG HAVE YOU LIVED AT ADOLE ADDRESS 31 45 S		The state of the s	14-	, D'	salc's	1-	
Prior Street Address if Above Address is Less Than 5 Years State Zip From To		mer Name(s): Sch	0112	-, Di	etric	Jh,	
2000	City	State		Zip'	Fro	m	То
Motel Ca	ubridge	(A) T					
WO	U						
ARREST AND CO							
2. Have you ever been cited and/or convicted of a felony?	Jinteu States	or America).					_
				Ye	S	-	lo)
3. Have you ever been cited and/or convicted of a misdemeanor?				Yes			lo )
4. Within the past ten (10) years, have you been arrested for, received a summons to	appear in cou	urt for, or forfeited a b	ond for a	iny of the fol	llowing:		
a) Any underage alcohol violation?				Yes	s	(1	0)
b) Operating a motor vehicle while intoxicated?				Yes	5	(	0)
c) Selling or furnishing alcoholic beverages to underage person?				Yes	5		رو
d) Permitting underage person on licensed premises? e) Allowing persons on licensed premises after closing?				Yes	5	(1	0
f) Any alcohol related violation other than a, b, c, d, and e?				Yes			۹)
g) Sale of legal or illegal drugs to include prescription medications or possession of any	. : : : : : : : : : : : : : : : : : : :	Andready I are the		Yes	5		0)
medications not prescribed to you?	y illegal drugs	to include prescription	'				=>
h) Fighting, disorderly conduct, assault, or battery?				Yes		-	٥
i) Resisting arrest, interfering with a police officer or obstructing an officer?				Yes		-	•
N.A.				163		( )	0)
<ol> <li>Any crime or ordinance violation not listed above other than traffic or parking ticket.</li> </ol>	s?			Vec			3
j) Any crime or ordinance violation not listed above other than traffic or parking ticket 5. For each YES response above, you must identify all violations below. Attach addition		necessary or continue	on the b	Yes			•)
5. For each YES response above, you must identify all violations below. Attach addition			on the b	ack of this ap	plication.		
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5. For each YES response above, you must identify all violations below. Attach addition			on the b	ack of this ap	plication.		
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5. For each YES response above, you must identify all violations below. Attach addition TYPE OF ARREST, SUMMONS, VIOLATION OR CHARGE  Within the last two (2) years, did you have and/or complete one of the following:	onal sheets if		etion for	ack of this ap Ci	pplication. TY  Alcohol Se	ST	ATE
5. For each YES response above, you must identify all violations below. Attach addition TYPE OF ARREST, SUMMONS, VIOLATION OR CHARGE  Within the last two (2) years, did you have and/or complete one of the following:  Successfully completed a Responsible Alcohol Servers Course	onal sheets if	MONTH/YEAR  ch certificate of complement of the	etion for	ck of this ap CI Responsible	Populication. TY  Palcohol Solicense	ST	ATE
5. For each YES response above, you must identify all violations below. Attach addition TYPE OF ARREST, SUMMONS, VIOLATION OR CHARGE  Within the last two (2) years, did you have and/or complete one of the following:  Successfully completed a Responsible Alcohol Servers Course  Held an Operator's License issued in Wisconsin  6. CERTIFICATION: I do hereby swear, under penalty of perjury, that I am the person	Atta	ch certificate of complement of the sole proprint signed the foregoing	etion for nt for a re etor of re	CITE Responsible et all alcohol letail alcohol leta	Alcohol Solicense	ST S	ATE  TSE
5. For each YES response above, you must identify all violations below. Attach addition TYPE OF ARREST, SUMMONS, VIOLATION OR CHARGE  Within the last two (2) years, did you have and/or complete one of the following:  Successfully completed a Responsible Alcohol Servers Course  Held an Operator's License issued in Wisconsin  6. CERTIFICATION: I do hereby swear, under penalty of perjury, that I am the person statements herein are complete, true and correct. I further understand a full background	Atta  who made a	ch certificate of complements of the sole propried and signed the foregoing may be conducted by	etion for nt for a re etor of re ng applica	Responsible	Alcohol Solicense	ST ervers Cou	ATE
5. For each YES response above, you must identify all violations below. Attach addition TYPE OF ARREST, SUMMONS, VIOLATION OR CHARGE  Within the last two (2) years, did you have and/or complete one of the following:  Successfully completed a Responsible Alcohol Servers Course  Held an Operator's License issued in Wisconsin  6. CERTIFICATION: I do hereby swear, under penalty of perjury, that I am the person statements herein are complete, true and correct. I further understand a full backgroun ation of this application. Additionally, I understand that this application may be deried	Atta  who made and investigation if it contains a	ch certificate of complement of the sole proprior of may be conducted by the sole proprior of	etion for nt for a re etor of re ng applica y the Eva	Responsible etail alcohol leatin for an insville Police of the able to	e Alcohol Solicense icense operator's a perparting reapply for	ST S	ATE  rse  id that all consider-
5. For each YES response above, you must identify all violations below. Attach addition TYPE OF ARREST, SUMMONS, VIOLATION OR CHARGE  Within the last two (2) years, did you have and/or complete one of the following:  Successfully completed a Responsible Alcohol Servers Course  Held an Operator's License issued in Wisconsin  6. CERTIFICATION: I do hereby swear, under penalty of perjury, that I am the person statements herein are complete, true and correct. I further understand a full background	Atta  who made and investigation if it contains a	ch certificate of complement of the sole proprior of may be conducted by the sole proprior of	etion for nt for a re etor of re ng applica y the Eva	Responsible etail alcohol leatin for an insville Police of the able to	e Alcohol Solicense icense operator's a perparting reapply for	ST S	ATE  rse  id that all consider-
5. For each YES response above, you must identify all violations below. Attach addition TYPE OF ARREST, SUMMONS, VIOLATION OR CHARGE  Within the last two (2) years, did you have and/or complete one of the following:  Successfully completed a Responsible Alcohol Servers Course  Held an Operator's License issued in Wisconsin  6. CERTIFICATION: I do hereby swear, under penalty of perjury, that I am the person statements herein are complete, true and correct. I further understand a full backgroun ation of this application. Additionally, I understand that this application may be deried	Atta  who made and investigation if it contains a ral, state or lo	ch certificate of complement of the sole propried on may be conducted by any falsification-and the cal affecting the sale of	etion for nt for a re etor of re ng applica y the Eva at I will nu f ferment	Responsible etail alcohol l	e Alcohol Solicense icense operator's a perparting reapply for	ST S	ATE  rse  id that all consider-
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Within the last two (2) years, did you have and/or complete one of the following:  Successfully completed a Responsible Alcohol Servers Course  Heid an Operator's License issued in Wisconsin  CERTIFICATION: I do hereby swear, under penalty of perjury, that I am the person statements herein are complete, true and correct. I further understand a full backgroun ation of this application. Additionally, I understand that this application may be denied do further agree to comply with all laws, resolutions, ordinances, and regulations, feder signature:  For MUNICIPALITY USE	Atta  who made a di novestigatio if it contains a ral, state or lo  Emall:  Date:	MONTH/YEAR  ch certificate of complement of the sole propriet of the foregoin may be conducted being falsification and the cal affecting the sale of the sole of t	etion for nt for a re etor of re ng applica y the Eva at I will nu f ferment	Responsible stail alcohol latail alcohol la innsville Police of be able to ed malt bevo	e Alcohol Solicense icense operator's e Departme reapply foerages and	ST S	ATE  rse  id that all consider-
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CITY OF EVANSVILLE CITY CLERK'S OFFICE

31 S. Madison St, PO Box 529, Evansville, WI 53536

New Operator's License: \$35.00 Renewal Operator's License: \$35.00 Provisional License: \$15.00 NOTE: APPLICATION FEE WILL NOT BE REFUNDED IF DENIED OR WITHDRAWN. A Police check will be completed. Please read carefully and answer honestly. Falsification and/or misrepresentation may be grounds for denial of license/permit. Applicant cannot reapply for a 6 month period from date of denial. If you have any doubt as to whether to include the facts of a specific incident it is recommended that you disclose the information. If you are unsure about how to respond to any questions on this form, check with the City Clerk for clarification. You can obtain information regarding your arrest and conviction record from the police department and/or the court with which you interacted, or the Wisconsin Circuit Court Access website at: https://www.wicourts.gov/casesearch.htm (CCAP may not provide comprehensive list of all arrests/convictions). 1. LEGAL NAME: MAVIE Bauwens DATE OF BIRTH: ADDRESS: PHONE: Evansville CITY: WI ZIP: 53536 GENDER: Female Driver's License No.: Wisconsin Issuing State: HOW LONG HAVE YOU LIVED AT ABOVE ADDRESS? 10 425 Former Name(s): N/A Prior Street Address if Above Address is Less Than 5 Years State Zip From To City From To ARREST AND CONVICTION RECORD (Anywhere within the United States of America). 2. Have you ever been cited and/or convicted of a felony? (No) Yes 3. Have you ever been cited and/or convicted of a misdemeanor? No Yes 4. Within the past ten (10) years, have you been arrested for, received a summons to appear in court for, or forfeited a bond for any of the following: a) Any underage alcohol violation? 8 b) Operating a motor vehicle while intoxicated? Yes c) Selling or furnishing alcoholic beverages to underage person? (N) Yes d) Permitting underage person on licensed premisés? Yes No e) Allowing persons on licensed premises after closing? (No Yes f) Any alcohol related violation other than a, b, c, d, and e? Yes (No g) Sale of legal or illegal drugs to include prescription medications or possession of any illegal drugs to include prescription medications not prescribed to you? Yes (No h) Fighting, disorderly conduct, assault, or battery? Yes (No. i) Resisting arrest, interfering with a police officer or obstructing an officer? Yes No j) Any crime or ordinance violation not listed above other than traffic or parking tickets? Yes No 5. For each YES response above, you must identify all violations below. Attach additional sheets if necessary or continue on the back of this application. TYPE OF ARREST, SUMMONS, VIOLATION OR CHARGE MONTH/YEAR STATE Within the last two (2) years, did you have and/or complete one of the following: Attach certificate of completion for Responsible Alcohol Servers Course Successfully completed a Responsible Alcohol Servers Course An alcohol agent for a retail alcohol license Held an Operator's License issued in Wisconsin The sole proprietor of retail alcohol license 6. CERTIFICATION: I do hereby swear, under penalty of perjury, that I am the person who made and signed the foregoing application for an operator's license, and that all statements herein are complete, true and correct. I further understand a full background investigation may be conducted by the Evansville Police Department prior to consideration of this application. Additionally, I understand that this application may be denied if it contains any falsification-and that I will not be able to reapply for a 6 month period. I do further agree to comply with all laws, resolutions, ordinances, and regulations, federal, state or local affecting the sale of fermented malt beverages and intoxicating liquors. Signature: William FOR MUNICIPALITY USE ONLY BELOW THIS LINE Police Department Recommendation and Comments: City of Evansyille **Public Safety Committee:** Approved: Denied: Clerk's Office Signature Receipt: 1.153216 35. DD Receipt # MICHELLE MARIE BAUWENS May 12, 2023 03:50FM Police Chief's Signature



CITY OF EVANSVILLE CITY CLERK'S OFFICE
31 S. Madison St. PO Box 529, Evansville, WI 53536

New Operator's License: \$35.00 Renewal O						nal License:	\$1E.00		
NOTE: APPLICATION FEE WILL NOT	T BE REFUND	DED IF D	ENIED OR WITH	IDRAWN					
A Police check will be completed. Please read carefully and answer honestly. Fal cannot reapply for a 6 month period from date of denial. If you have any doubt as information. If you are unsure about how to respond to any questions on this form and conviction record from the police department and/or the court <a href="https://www.wicourts.gov/casesearch.htm">https://www.wicourts.gov/casesearch.htm</a> (CCAP may not provide comprehens	Isification and to whether to n, check with with which	f/or misre include the City C	epresentation ma the facts of a spe Elerk for clarificati	y be grou cific incide	nds for den	mmended that yo	u disclose the		
1. LEGAL NAME: Tyles John	OC	enac	1 1	DATE	OF BIRTH:				
First Middle			Last						
ADDRESS:				PHO	IE:				
CITY: Evansuille STATE: WI			ZIP: 53536 GENDER: Male X Female						
Driver's License No.:			Issuing State: Wisconsin						
HOW LONG HAVE YOU LIVED AT ABOVE ADDRESS? 3 VECTS	,	Former	50 256						
Prior Street Address if Above Address is Less Than 5 Years State Zip From To	City	Former	State		Zip	From	То		
125 N Park St.	Bellevi	lle	WI	53508		2015	2020		
ARREST AND	CONVICTIO	N PECO	20						
(Anywhere within t	the United Sta	ites of An	nerica).						
2. Have you ever been cited and/or convicted of a felony?					Ye	!S	(No)		
3. Have you ever been cited and/or convicted of a misdemeanor?					Ye	es	(No)		
4. Within the past ten (10) years, have you been arrested for, received a summon a) Any underage alcohol violation?	ns to appear in	n court fo	r, or forfeited a l	ond for a	ny of the fo	flowing:			
b) Operating a motor vehicle while intoxicated?					Yes		(NO)		
c) Selling or furnishing alcoholic beverages to underage person?		_			Ye		(NO)		
d) Permitting underage person on licensed premises?		_			Ye		(NO)		
e) Allowing persons on licensed premises after closing?					Ye		(No)		
f) Any alcohol related violation other than a, b, c, d, and e?					Yes Yes		No		
g) Sale of legal or illegal drugs to include prescription medications or possession of	f any illegal di	rugs to in	clude prescription	1	re	3	NO		
medications not prescribed to you?	, ,	0			Ye	s	(NO)		
h) Fighting, disorderly conduct, assault, or battery?					Yes		No		
i) Resisting arrest, interfering with a police officer or obstructing an officer?					Yes		W)		
Any crime or ordinance violation not listed above other than traffic or parking tickets?						s	NO		
5. For each YES response above, you must identify all violations below. Attach ad	ditional sheet	ts if neces	sary or continue	on the ba	ck of this a	pplication.	TO SECTION		
TYPE OF ARREST, SUMMONS, VIOLATION OR CHARGE			MONTH/YEAR			TY	STATE		
Within the last two (2) years, did you have and/or complete one of the followi	lne:	Attach co	rtificate of some	lasta - f			<u> </u>		
Successfully completed a Responsible Alcohol Servers Course			Attach certificate of completion for Responsible Alcohol Servers Course  An alcohol agent for a retail alcohol license						
Held an Operator's License issued in Wisconsin			The sole proprietor of retail alcohol license						
i. CERTIFICATION: I do hereby swear, under penalty of perjury, that I am the person who made and signed the foregoing application for an operator's license, and to						series .			
lo further agree to comply with all laws, resolutions, ordinances, and regulations, fe	ederal, state o	or local af	fecting the sale o	f fermente	ed malt bev	erages and intoxic	ating liquors.		
ignature: dule luceutts	Email								
41,000			- 400 40						
rinted Name: Tyles Rute noucht	Date:	Date: 5/18/23							
FOR MUNICIPALITY lice Department Recommendation and Comments:	USE ONLY BE	LOW THIS	LINE						
nice Department Recommendation and Comments:	Public	Safety Co	mmittee:	Paid					
	Approv		Den	ied: City	of Evans	Oate!			
			Clerk's Office Signature			D-t-			
	Receipt				Date				
proved: Denied:	песегре	Reco			ceipt: 1,153316		35.00		
					JFENACHT TYLER				
W 1 6125 W7				May 2	23, 2023	11:36 AM			
Police Chief's Signature Date									



CITY OF EVANSVILLE CITY CLERK'S OFFICE

New Operator's License: \$35.0							l License:	\$15.00		
A Police check will be completed. Please read care cannot reapply for a 6 month period from date of c information. If you are unsure about how to respo and conviction record from the police dep <a href="https://www.wicourts.gov/casesearch.htm">https://www.wicourts.gov/casesearch.htm</a> (CCA	lenial. If you have any doubt as nd to any questions on this form artment and/or the court	sification ar to whether n, check wit with whice	nd/or misre to include th the City C th you in	epresentation ma the facts of a spe llerk for clarificati teracted, or th	y be grour cific incider ion. You ca	nds for denial nt it is recomn n obtain infor	nended that you mation regardin	u disclose the		
1. LEGAL NAME: Grace Lynn Marshall DATE					DATE	TE OF BIRTH:				
First Middle ADDRESS:					PHON	3.5				
atti Evansuille	CITY: Evansuille STATE: WI				ZIP: 53536 GENDER: Male (Female)					
Driver's License No:			Issuing State: W							
	13 years	8		,	_					
HOW LONG HAVE YOU LIVED AT ABOVE ADDRESS'		City	Former Name(s):				Zip From To			
Prior Street Address if Above Address is Less Than 5 Years State Zlp From To				State		Zip Fro		То		
	ARREST AND	CONVICT	ION RECO	RD			5 F. 9 F. S.			
	(Anywhere within t	he United S	States of Ar	nerica).		17.5				
2. Have you ever been cited and/or convicted of a						Yes		(ND)		
3. Have you ever been cited and/or convicted of a						Yes		(N)		
4. Within the past ten (10) years, have you been ar	rested for, received a summon	s to appear	r in court fo	or, or forfelted a	bond for a	ny of the follo	wing:			
a) Any underage alcohol violation? b) Operating a motor vehicle while interior and a						Yes		No		
b) Operating a motor vehicle while intoxicated? c) Selling or furnishing alcoholic beverages to underage person?					Yes		No			
d) Permitting underage person on licensed premise						Yes Yes		(NO)		
e) Allowing persons on licensed premises after clos						Yes		(P)		
f) Any alcohol related violation other than a, b, c, o						Yes		No		
g) Sale of legal or illegal drugs to include prescription	on medications or possession of	f any illegal	drugs to in	clude prescriptio	n			_		
medications not prescribed to you?					Yes		No			
h) Fighting, disorderly conduct, assault, or battery?						Yes		(NO)		
i) Resisting arrest, interfering with a police officer or obstructing an officer? j) Any crime or ordinance violation not listed above other than traffic or parking tickets?					Yes		(402)			
5. For each YES response above, you must identify			note If noce	seary or continu	o an the he	Yes	Heatlan	No		
TYPE OF ARREST, SUMMONS, VIOLATION OR CHARGE			MONTH/YEAR			CITY		STATE		
Within the last two (2) years, did you have and/or complete one of the following:			Attach certificate of completion for Responsible Alcohol Servers Course							
Successfully completed a Responsible Alcohol Servers Course			An alcohol agent for a retail alcohol license							
Held an Operator's License issued in Wisconsin			The sole proprietor of retail alcohol license							
6. CERTIFICATION: I do hereby swear, under penal statements herein are complete, true and correct. I ation of this application. Additionally, I understand t do further agree to comply with all laws, resolutions	further understand a full backg hat this application may be den	round inves nied if it cor	stigation m ntains any f	ay be conducted alsification-and to	by the Eva	nsville Police I ot be able to r	Department pri-	or to consider-		
Signature: Signature: Email:								Con		
Carreto Marchall				Date: 5/24/23						
	FOR MUNICIPALITY	<b>USE ONLY</b>	BELOW TH	IS LINE	- 21			F 7"8"		
olice Department Recommendation and Comment	s:	Pub	lic Safety C	ommittee:	City	of Evansvill	.e			
			roved:		nied:		ate:			
		-	Clark's	Office Signature			Date			
1 -		Rece	eipt#	Office Signature		/t: 1.153349		5.00		
pproved: Denied	Deha		,			IALL GRACE 1, 2023 244				
5	12/2									



CITY OF EVANSVILLE CITY CLERK'S OFFICE

New Operator's License: \$35.00	Renewal Op			se: \$35.00		Provision	al License:	\$15.00			
NOTE: AP	PLICATION FEE WILL NOT	BE REFUN	NDED IF	DENIED OR WITH	DRAWN						
A Police check will be completed. Please read careful	lly and answer honestly. Falsi	fication ar	nd/or mi	representation ma	y be grou	nds for denia	ıl of license/pe	rmit. Applicant			
cannot reapply for a 6 month period from date of den information. If you are unsure about how to respond	ial. It you have any doubt as to	o whether	to includ	le the facts of a spec	ific incide	nt it is recom	mended that y	ou disclose the			
and conviction record from the police departs	ment and/or the court w	vith whic	h vou	interacted or th	on roug e Wisco	in oblain info nsin Circuit	rmation regard	ing your arrest			
https://www.wicourts.gov/casesearch.htm (CCAP m	ay not provide comprehensiv	e list of all	arrests/	convictions).	- 111300	isiii circuit	court Access	WCD3RC at.			
Elizabeth Strangard					DATE	PATE OF BIRTH:					
First	Middle		Las	t			,				
ADDRESS:					PHO	PHONE:					
CITY: Edgerton VIII STATE: WI ZIP: 5353					GEN	DER: Ma	le Œ	male			
Driver's License No.:			Issuing	State: W				$\sim$			
HOW LONG HAVE YOU LIVED AT ABOVE ADDRESS?				Former Name(s): Madison Hilliard							
Prior Street Address if Above Address is Less Than 5 Y	ears State Zip From To	City	- Annual Control of the last o	State	11 000	Zip	From	То			
111111111111111111111111111111111111111			State			Z.ip	10				
			_					_			
	ARREST AND ( (Anywhere within th										
2. Have you ever been cited and/or convicted of a fel-	The factor of the contract of	ie Officeu 3	otates of	Americaj.		Yes		(No.)			
3. Have you ever been cited and/or convicted of a mis	- Carlotte					Yes					
4. Within the past ten (10) years, have you been arres		to annear	in court	for an forfaited a l	and for						
a) Any underage alcohol violation?	TOTAL TELESTICA & SOLITIONS	to appear	iii court	ior, or iorieited a i	וסוום וטר	Yes		No			
b) Operating a motor vehicle while intoxicated?						Yes		No			
c) Selling or furnishing alcoholic beverages to underage						Yes		NO			
d) Permitting underage person on licensed premises?						Yes		(Ng)			
<ul> <li>e) Allowing persons on licensed premises after closing</li> <li>f) Any alcohol related violation other than a, b, c, d, a</li> </ul>						Yes					
g) Sale of legal or illegal drugs to include prescription		any illenat	drugs to	include procesintio		Yes		(NB)			
medications not prescribed to you?	inculcations of possession of	any megai	urugs to	melade prescription	1	Yes		No			
h) Fighting, disorderly conduct, assault, or battery?					Yes		NB				
i) Resisting arrest, interfering with a police officer or of	bstructing an officer?					Yes		CNO			
Any crime or ordinance violation not listed above or						Yes		(No)			
5. For each YES response above, you must identify all		itional she	ets if ne	cessary or continue	on the b	ack of this ap	plication.				
TYPE OF ARREST, SUMMONS, VIOLATION	OR CHARGE		MONTH/YEAR			CITY		STATE			
STANDS W. E. S.											
Within the last two (2) years, did you have and/or complete one of the following:			Attach certificate of completion for Responsible Alcohol Servers Course								
Successfully completed a Responsible Alcohol Servers Course			An alcohol agent for a retail alcohol license								
Held an Operator's License issued in Wisconsin				The sole proprietor of retail alcohol license							
6. CERTIFICATION: I do hereby swear, under penalty of statements herein are complete, true and correct. I fur	of perjury, that I am the pers	son who m	nade and	signed the foregoi	ing applic	ation for an	operator's licer	ise, and that all			
ation of this application. Additionally, I understand that	this application may be denie	ed if it con	itains any	ufalsification-and th	at I will n	ot he able to	reannly for a 6	month period I			
do further agree to comply with all laws, resolutions, or	rdinances, and regulations, fe	deral, state	e or local	affecting the sale of	f fermen	ted malt beve	rages and into	xicating liquors.			
Signature: Machen Solchals. Email:				Email: M. Strahotazz agmail. com							
Printed Name: Madison Strahota Date				Date: 5/31/23							
Dat				Date:							
	FOR MUNICIPALITY L	JSE ONLY	BELOW 1	THIS LINE							
Police Department Recommendation and Comments:		Publ	lic Safety	Committee:							
		App	roved:	Der	iled:		Date:				
	9		Clerk	s's Office Signature			Date				
pproved: Denied:		Recei	ipt#								
Defiled:		-4	1.14	53453							
* \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \											
411 673 5-31-23											
Police Chief's Signature	Date	_									
CONTROL MANAGEMENT MAN											



# **APPLICATION FOR OPERATOR'S LICENSE**

CITY OF EVANSVILLE CITY CLERK'S OFFICE

31 S. Madison St, PO Box 529, Evansville, WI 53536						
New Operator's License: \$35.00 Renewal Oper	rator	License: \$35.00			nal License:	\$15.00
NOTE: APPLICATION FEE WILL NOT BE			DRAWN	10113101	idi Licciisc.	713.00
A Police check will be completed. Please read carefully and answer honestly. Falsifica	ation an	d/or misrepresentation may	he grour	ds for deni	al of license lease	mit Applicant
annot reapply for a 6 month period from date of denial. If you have any doubt as to w	/hether 1	to include the facts of a speci	ific incides	at it is recon	nmended that we	u disclasa tha
Information are unsure about how to respond to any questions on this form, che	eck with	the City Clerk for clarification	n Vouca	n obtain info	ormation regardi	an vous assoch
and conviction record from the police department and/or the court with	n which	1 you interacted, or the	Wiscon	sin Circuit	Court Access	website at:
https://www.wicourts.gov/casesearch.htm (CCAP may not provide comprehensive list	ist of all	arrests/convictions).				
1. LEGAL NAME: AMBER Rae		Knetter	DATE	OF BIRTH		~ .
First Middle		Last	DATE	OF BIRTH:	1	)
ADDRESS:			PHON	e		-
GUADE ILLA		-2-21	FRON			
CITY: EVANSVILLE STATE: WT		zip: 53534	GEND	ER: Ma	ale Fem	nale
Driver's License No.:		Issuing State: WI				
O Vien			T.		100	~
HOW LONG HAVE YOU LIVED AT ABOVE ADDRESS?		Former Name(s):	mbe	r Do	aftron/ 6	orman
Prior Street Address if Above Address is Less Than 5 Years State Zip From To	City	State		Zip	Front	To
2.0	WI		5	536	2016	202
	007			320	0.010	200
102						
ARREST AND CON (Anywhere within the U	NVICTIO	ON RECORD			75	
2. Have you ever been cited and/or convicted of a felony?	micca o	des of America).		.,		
Have you ever been cited and/or convicted of a misdemeanor?				Ye		No
				Ye.		No
4. Within the past ten (10) years, have you been arrested for, received a summons to a a) Any underage alcohol violation?	appear	in court for, or forfeited a b	ond for a	ny of the fo	llowing:	
b) Operating a motor vehicle while intoxicated?				Ye		(No)
c) Selling or furnishing alcoholic beverages to underage person?				Ye		(No.)
d) Permitting underage person on licensed premises?				Ye		No
e) Allowing persons on licensed premises after closing?				Ye		(No.)
f) Any alcohol related violation other than a, b, c, d, and e?				Ye:		(No)
g) Sale of legal or illegal drugs to include prescription medications or possession of any	/ illegal r	drugs to include prescription		16:		(NO
medications not prescribed to you?	0			Yes		(No)
h) Fighting, disorderly conduct, assault, or battery?				Yes		(No)
i) Resisting arrest, interfering with a police officer or obstructing an officer?				Yes		NO
j) Any crime or ordinance violation not listed above other than traffic or parking tickets	5?			Yes		No
5. For each YES response above, you must identify all violations below. Attach addition	nal she	ets if necessary or continue	on the ba	ck of this a	oplication.	
TYPE OF ARREST, SUMMONS, VIOLATION OR CHARGE		MONTH/YEAR		CI	ry	STATE
<u> </u>						
Within the last two (2) years, did you have and/or complete one of the following:		Assemble and the second				Target services
		Attach certificate of compl				Course
The second responsible Alcohol Servers Course	-	An alcohol ager				
Held an Operator's License issued in Wisconsin		The sole proprie	etor of ret	ail alcohol l	icense	
6. CERTIFICATION: I do hereby swear, under penalty of perjury, that I am the person statements herein are complete, true and correct. I further understand a full background ation of this application. Additionally, handware of the state of	Who m	ade and signed the foregoin	ig applica	tion for an	operator's licens	e, and that all
ation of this application. Additionally, I understand that this application may be depied if	it it cont	ains any falsification and the	مطاانيدا عد	+ ha abl- +-		
do further agree to comply with all laws, resolutions, ordinances, and regulations, federa	al, state	or local affecting the sale of	fermente	d malt beve	erages and intoxic	cating liquors.
Signature Amble X (LLL)		and a China	77	01	clared	
Signature The State of the Stat	Ema	il: _ auth for	10	(0)1	1000-0	on
Printed Name: FM Der KNPHGP	Date	. (011123				
FOR MUNICIPALITY USE	ONLY B	ELOW THIS LINE				
olice Department Recommendation and Comments:	Publi	c Safety Committee:	City o	if Evansvi	lle	
	Appr		ed:		Date:	
	1	Clark's Office Classes			******	96-4 H = H
	Recei	Clerk's Office Signature	Receio	it: 1.1534	58 Date	5.00
V	- Kecel	h. u	111747415-051084	ER AMBER	vert. 13	
pproved:				2023 11	•52 AM	
11-1	1		JUHI L	- 5050 II	AVE TH	
100 617127						
Police Chief's Signature Date	1					

# City of Evansville

www.ci.evansville.wi.gov

31 S Madison St PO Box 529 Evansville, W 53536 (608) 882-2266

May 17, 2023

Jacqueline Marie Tomlin 134 S. Madison Street Evansville WI 53536

Dear Jacqueline:

This letter is notification of the Police Departments' non-recommendation for issuance of your operator's license possibly due to misstatements and/or omissions on your application.

Final action will be taken by the Public Safety Committee at their next meeting on Wednesday, June 7th at 6:00 p.m. This meeting is open to the public and I would encourage you to attend so that you can respond to questions regarding violations on your application before they make a final decision to grant or deny your license.

If you have any questions please feel free to contact me at 608-882-2266 option 2.

Sincerely,

Jolene Klitzman

Deputy Clerk

cc: Erika Stuart, Public Safety Chairperson

Patrick Reese, Police Chief



# APPLICATION FOR OPERATOR'S LICENSE

CITY OF EVANSVILLE CITY CLERK'S OFFICE

New Operator's License: \$35.00 Renewal Operator's License: \$35.00 Provisional License: \$15.00							
A Delivery to a 1916	NOTE: APPLICATION FEE WILL NOT	SE REFUN	IDED IF DENIED	OR WITHDRAY	VN.		
information. If you are unsure about how and conviction record from the pol	A Police check will be completed. Please read carefully and answer honestly. Falsification and/or misrepresentation may be grounds for denial of license/permit. Applicant cannot reapply for a 6 month period from date of denial. If you have any doubt as to whether to include the facts of a specific incident it is recommended that you disclose the information. If you are unsure about how to respond to any questions on this form, check with the City Clerk for clarification. You can obtain information regarding your arrest and conviction record from the police department and/or the court with which you interacted, or the Wisconsin Circuit Court Access website at: <a href="https://www.wicourts.gov/casesearch.htm">https://www.wicourts.gov/casesearch.htm</a> (CCAP may not provide comprehensive list of all arrests/convictions).						
1. LEGAL NAME: Jacqueline	Marie	e list of all	Tombin		TE OF BIRTH:		
ADDRESS:	A , Middle		Last	Di	ione:		
CITY: EVansville	STATE: W		ZIP: 535	1/	NDER: Mai	ie Va	male
Driver's License No.:			Issuing State:	WI	7474		
HOW LONG HAVE YOU LIVED AT ABOVE A	ADDRESS? + 20 4rs		Former Name(s	1: Schu	17_		
Prior Street Address if Above Address is L	ess Than 5 Years State Zip From To	City		ate	Zip	From	To
	ADDECTAND						
	ARREST AND C (Anywhere within the						
2. Have you ever been cited and/or convic					Yes		NO
3. Have you ever been cited and/or convic	ted of a misdemeanor?				Yes		160
4. Within the past ten (10) years, have you		to appear	In court for, or fo	rfeited a bond fo			Go
a) Any underage alcohol violation?		to appear	in court idi, or id	mented a done it	Yes		(No)
b) Operating a motor vehicle while intoxic					Yes		No
<ul> <li>c) Selling or furnishing alcoholic beverage</li> </ul>					Yes		Nο
d) Permitting underage person on license					Yes		No
e) Allowing persons on licensed premises					Yes		No
f) Any alcohol related violation other than					Yes		No
g) Sale of legal or illegal drugs to include p medications not prescribed to you?	rescription medications or possession of a	any illegal	drugs to include p	rescription	.,		
h) Fighting, disorderly conduct, assault, or	hattan/2				Yes		Na
i) Resisting arrest, interfering with a police					Yes		No
j) Any crime or ordinance violation not list	ed above other than traffic or parking tick	ets?			Yes		No No
5. For each YES response above, you must			ets if necessary o	r continue on the			TO LANGUAGE
TYPE OF ARREST, SUMMONS,				H/YEAR	CIT		STATE
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					-		
tender of the tender			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
	ave and/or complete one of the followin	g:		e of completion			rs Course
Successfully completed a Respon	sible Alcohol Servers Course			Icohol agent for			
Held an Operator's License issue				sole proprietor o			
6. CERTIFICATION: I do hereby swear, und	er penalty of perjury, that I am the pers	on who m	nade and signed t	he foregoing app	lication for an o	perator's licer	nse, and that all
statements herein are complete, true and c ation of this application. Additionally, I und	orrect. I further understand a full backgro	iund inves	tigation may be co	onducted by the	Evansville Police	Department p	rior to consider-
do further agree to comply with all laws, re	solutions, ordinances, and regulations, fed	leral, stati	e or local affecting	the sale of ferm	ented malt beve	reapply for a 6	ricating liquors
Signature: Vocaseo Pine,	do further agree to comply with all laws, resolutions, ordinances, and regulations, federal, state or local affecting the sale of fermented malt beverages and intoxicating liquors.						meaning inquiri
					_		
Printed Name: Jacque Ine Tomban Date: 4-7.23				-			
	FOR MUNICIPALITY U	SE ONLY	BELOW THIS LINE				
olice Department Recommendation and Co			ic Safety Committ	ree.			
Incomplete forum		10101010	roved:	Denied:		Date:	
onverted 1982 The	Ft / Party to A (rime		Clerk's Office	Signature	-	Date	
pproved:	Denied:	Rece	ipt#				
$\cap II$							
XVC	5/15/23						
Police Chief's Signature	Date	_					

a



# Temporary Class "B"/ "Class B" Retailer's License Application CITY OF EVANSVILLE CLERK'S OFFICE

Application Fee: \$10.00 per Licensed Pre	mises APPLIC	ATION FEE WILL NOT BE REF	UNDED IF DENIED OR \	NITHDRAWN
Number of Licensed Premis	ses:/	x \$10.00 = \$	Total Due	
License Type: (Check one)	Beer Only	Wine Only	Beer & Wine	9
Event Name: Businesi	After 5			
Event Date: august 8,	2023	Event Time: 57	pm	
Name of Person in Charge of Event:	Tegri N	Weekoci	4	
	Orga	nization		
Bona fide Club Chamber of Commerce/ similar	Church		Lodge/Society	
Civic or Trade Organization	Fair Assoc,	/Agricultural Society	Veteran's Organ	nization
Organization Name: The Condition Name: Address:	PA *	Evansvill	e Champer Mais St.	of Com
1000	oration, Date of	1	reach of	
organization is not required to hold a Wiscon			Stats., Check here	
Names	and addresses o	f all Organization Officers:		' '
resident/Primary Officer: Dull Name Vice President: Dense U	theses	4/10 Tragles	DDL Stylstate/Zip	ely le/5
ecretary: # Shaum	Durphy	Address W. Tra	City/state/Zip	nsville
reasurer:		Address	City/State/Zip	
Name	will be seemed as	Address	City/State/Zip	
ocation of Premises were Beer and/or Wine	be served, con	sumed, or stored and areas watered:	here Alcohol Beverage	Records will
ddress/Location Description:	ledison o	& Esmoule	W 53536	2
premises occupy all or part of building?	ree_			
part of building, fully describe all premises co	overed under this	application, which floor(s) & r	oom(s) licenses is to cov	rer:
claration: An officer of the ergonization, deal				
claration: An officer of the organization, declar d correct to the best of his/her knowledge and plication for a license may be required to forfe	d belief. Any perso	n who knowingly provides ma	provided in this applicati terially false information	ion is true in an
* Law	n Deyla	Than Ch	¥ *	
(Officer Signature/Date)		IName !	of Organization)	
		y (ivaine)	n organización)	



# Temporary Class "B"/ "Class B" Retailer's License AFFIRMATION OF UNDERSTANDING FOR EVENT MANAGER

CITY OF EVANSVILLE CLERK'S OFFICE

EVENT DATE: 8 8 23	EVENT TIME: 5:00					
NAME: Shawn Dunphy	DATE OF BIRTH: 8/5/69					
ADDRESS: 25W. Main Street						
EMAIL: dunphys91@gmail.com	PHONE: 608-751-5363					
Chapter 6 of the Evansville Code and the WI Publication 309 (Retail Alcohol Beverage Licensing Information) specifies all the laws and requirements which you are governed by and with which you are responsible for knowing and must comply with. The City Clerk's Office will provide you a copy of this ordinance and the State publication if you desire a copy. This application must be fully completed, and submitted to the City Clerk's Office at 31 S Madison St, Evansville WI 53536, with the required fees.						
ATTESTATION AND ACKNOWLEDGEMENT OF RESPONSIBLE PA	RTY					
<ul> <li>I, the undersigned being duly sworn on oath, affirm that withir following:</li> <li>Successfully completed a responsible Alcohol Servers of</li> </ul>						
<ul> <li>Held a Wisconsin Operator's License</li> </ul>	ourse					
<ul> <li>An Alcohol Agent for a Retail Alcohol License</li> <li>The Sole Proprietor of Retail Alcohol License.</li> </ul>						
l acknowledge I am the responsible party for this event and I ag for said event. I further acknowledge that I am familiar with or Signature of Ma	pree to obey all the laws which regulate the activities planned have asked for copies of such laws.  5/25/23  nager/Person in Charge of event  Date					
Police Chief Recommend	ation and Comments:					
Recommend Non-Recommend	Recommend with conditions					
Police Chief's Signature  5/25/23  Date						
	Date License Issued:					
Public Safety: 6-7-23	Clerk's Signature:					
Notes & Receipt Information:						

# Application for Temporary Class "B" / "Class B" Retailer's License See Additional Information on reverse side. Contact the municipal start if your

Ger Additional Information on reverse side. Contact the	municipal clerk if you have	e questions.	-//
FEE \$ 10.00		Application Date:	6/1/23
☐ Town ☐ Village ☑ City of <b>Evansvill</b>		County of Rock	
The named organization applies for: (check appropriate bd  A Temporary Class "B" license to sell fermented malt  A Temporary "Class B" license to sell wine at picnics of  at the premises described below during a special event bo  to comply with all laws, resolutions, ordinances and regular  and/or wine if the license is granted.	beverages at picnics or sinor similar gatherings under	s. 125.51(10), Wis. Stats	1/-3
1. Organization (check appropriate box) → □ Bona □ Vetera □ Cham	an's Organization	Fair Association or Agricu	dge/Society iltural Society zation organized under
(a) Name Evansville Community Pa (b) Address 15 Antes Drive (PO Box	artnership ( 691) Evansvill		
<ul> <li>(c) Date organized 06/14/2000</li> <li>(d) If corporation, give date of incorporation 06/14</li> <li>(e) If the named organization is not required to hold a box:</li> </ul>	/2000	/illage City	Wio State about the
(f) Names and addresses of all officers:  President SUL NEELY 636  Vice President	IfICCSIDE C	T	vvis. Stats., check this
Coordiary			
Treasurer			
(g) Name and address of manager or person in charge <b>Evansville.WI 53536</b>	of affair: Jim Brook	ks 563 6th St.	
<ol><li>Location of Premises Where Beer and/or Wine Will Beverage Records Will be Stored:</li></ol>		umed, or Stored, and A	reas Where Alcohol
(a) Street number			
(b) Lot	Block		
(c) Do premises occupy all or part of building?	v v 200 - 8		
(d) If part of building, describe fully all premises covered to cover: Lake Leula Falk Hollil a	IIU WEST OF DEI	hich floor or floors, or roo LUVVEI	m or rooms, license is
3. Name of Event  (a) List name of the event Lake Leota 4th o  (b) Dates of event 4/30/23 ~ 7/4/25			•
(b) Dates of event $\frac{2}{30/23} - \frac{2}{30/23} - \frac{2}{30/23} = \frac{2}{30/23} - \frac{2}{30/23} = \frac{2}{30/2$	S		
DE	CLARATION		
An officer of the organization, declares under penalties of lav best of his/her knowledge and bellef. Any person who know may be required to forfeit not more than \$1,000.	w that the information	ided in this application is t alse information in an ap	rue and correct to the plication for a license
Officer (Signature / Date)	EUNWSUIC	(Namo of Grand Little)  City of Ev	PARTNINSYIP
Date Filed with Clerk 5 · 31 · 23	Date Reported to		
Date Granted by Council		***********	*************
AT-315 (R. 0-19)	License No	Receipt: 1. EVANSVILLE Jun 1, 2023	COMMUNITY FA

64 617123pm



Evansville Underground Music 104 Garfield Ave. Evansville, WI 53536-1113

May 26, 2023

City of Evansville – Public Safety Committee 31 S. Madison Street, PO Box 76 Evansville, WI 53536

Dear Public Safety Committee:

Evansville Underground Music, Inc. is requesting a Class B Beer License for 23 N. First Street and a Street Closure permit for the block of 23 N. First Street as well for the following dates: 7/1/2023, 7/21/2023, 8/26/23, 9/23/23, 10/14/23.

Please find enclosed:

Application Form
Exhibit A-Evansville Underground Music Officers
Exhibit B-Location of Premises

I will attend the next public safety committee meeting on June 7, 2023.

If you questions regarding this application, before the next Public Safety Committee Meeting: please call me at 608-213-0797.

Kind regards,(

President – Evansville Underground Music



# Temporary Class "B"/ "Class B" Retailer's License Application CITY OF EVANSVILLE CLERK'S OFFICE

Application Fee: \$10.00 per Licensed Premises APPLICATION FEE WILL NOT BE REFUNDED IF DENIED OR WITHDRAW				
Number of Licensed Prem	ises:	x \$10.00 = \$_		Total Due
License Type: (Check one)	Beer Only	Wine Only	,	Beer & Wine
Event Name: Evansuile	Orde	erground Mu	sic Su	MMOR SOCIES
Event Date: 7-/-23, 7-2/-33  Name of Person in Charge of Event:	9-26-2	3 Event Time:	40m-1	0.000
Name of Person in Charge of Event:	-23-25 1APX	X 10-14.23		EKAETHER
		Organization	4	Challack
Bona fide Club	Chi	urch		
Chamber of Commerce/ similar	Citi	MI CII		Lodge/Society
Civic or Trade Organization	Fai	r Assoc/Agricultural Soci	ety	Veteran's Organization
Organization Name: Evansul Address: 104 Garfiedd	1 1	nderground 1	nusic	
Date Organized: 3-11-2- If Corp		Date of Incorporation	3-11-	17
If organization is not required to hold a Wiscor	nsin Seller's	Permit Pursuant to SS 77 F	4/7m-1 14/1 60	
Names	and addr	esses of all Organization	Officers	ets., Check here
President/Primary Officer: Se	e Ex	hibit A	Omecia,	
/ice President:		Address		City/State/Zip
Name Secretary:		Address		City/State/Zip
reasurer:		Address		City/State/Zip
Name		Address		City/State/7in
ocation of Premises were Beer and/or Wine	will be serv	ved, consumed, or stored a	nd areas where	e Alcohol Beverage Records will
ddress/Location Description: See		be stored: 477	W. MAJ	N ST. Evansuille
o premises occupy all or part of building?	ZXVI	1017 5		
part of building, fully describe all premises co	vered und	er this application, which f	loor(s) & room	(s) licenses is to cover:
cclaration: An officer of the organization, declar d correct to the best of his/her knowledge and plication for a license may be required to forfe			formation prov ovides materia	ided in this application is true lly false information in an
Nouk H. Schnofee	$\sim$	Franco	16/20	Lerginard Musica
(Officer Signature/Date)		120,,0	(Name of Or	ganization)
plication for a license may be required to forfe  Noul H. Schwege			16 Unc	lly false information in an  Leground Music



# Temporary Class "B"/ "Class B" Retailer's License AFFIRMATION OF UNDERSTANDING FOR EVENT MANAGER

CITY OF EVANSVILLE CLERK'S OFFICE

RESS: 477 MAIN ST. EUGNS.  RESIDENCE Grail. (Comphone:  (Compho	
RESS: Y 7 7 MAIN ST. EUGNS.  III.: MARKSCHN PPER @ Gmail., Compense: (planter 6 of the Evansville Code and the WI Publication 309 (Retail Alcohol B ws and requirements which you are governed by and with which you are received Clerk's Office will provide you a copy of this ordinance and the State plication must be fully completed, and submitted to the City Clerk's Office in required fees.  TESTATION AND ACKNOWLEDGEMENT OF RESPONSIBLE PARTY  The undersigned being duly sworn on oath, affirm that within the last two (2) owing:  Successfully completed a responsible Alcohol Servers course  Held a Wisconsin Operator's License  An Alcohol Agent for a Retail Alcohol License  The Sole Proprietor of Retail Alcohol License.  An Alcohol Agent for a Retail Alcohol License.  An Alcohol Agent for a Retail Alcohol License.  An Alcohol Agent for a Retail Alcohol License  The Sole Proprietor of Retail Alcohol License  Non-Recommend  Non-Recommend  Non-Recommend  Re  Police Chief's Signature  The Clerk's Signature  The Sole Proprietor of Retail Alcohol License  The Sole Proprietor of Retail Alcohol License  An Alcohol Agent for a Retail Alcohol License  The Sole Proprietor of Retail Alcohol License  T	
ILL: MARK SCHN PPER @ Gmail, Comphone:  Japter 6 of the Evansville Code and the WI Publication 309 (Retail Alcohol B ws and requirements which you are governed by and with which you are reference in the City Clerk's Office will provide you a copy of this ordinance and the State plication must be fully completed, and submitted to the City Clerk's Office required fees.  TESTATION AND ACKNOWLEDGEMENT OF RESPONSIBLE PARTY  The undersigned being duly sworn on oath, affirm that within the last two (2) owing:  Successfully completed a responsible Alcohol Servers course  Held a Wisconsin Operator's License  An Alcohol Agent for a Retail Alcohol License  The Sole Proprietor of Retail Alcohol License.  An Alcohol Agent for a Retail Alcohol License.  An Alcohol Agent for a Retail Alcohol License.  An Alcohol Agent for a Retail Alcohol License  The Sole Proprietor of Retail Alcohol License  Non-Recommend  Non-Recommend  Non-Recommend  Re  Police Chief's Signature  Police Chief's Signature  License Issuer (2) Octobre Signature  Police Chief's Signature  Clerk's Signature	DATE OF BIRTH: 5-30-1969
apter 6 of the Evansville Code and the WI Publication 309 (Retail Alcohol B ws and requirements which you are governed by and with which you are re e City Clerk's Office will provide you a copy of this ordinance and the State plication must be fully completed, and submitted to the City Clerk's Office e required fees.  TESTATION AND ACKNOWLEDGEMENT OF RESPONSIBLE PARTY  The undersigned being duly sworn on oath, affirm that within the last two (2 owing:  Successfully completed a responsible Alcohol Servers course  Held a Wisconsin Operator's License  An Alcohol Agent for a Retail Alcohol License  The Sole Proprietor of Retail Alcohol License.  Anowledge I am the responsible party for this event and I agree to obey all said event. I further acknowledge that I am familiar with or have asked for Signature of Manager/Person in Mon-Recommend  Non-Recommend  Non-Recommend  Re  Police Chief's Signature  Led with Clerk: 5 - 26 - 3 3 Date License Issuers  Clerk's Signature  Clerk's Signature	ville, wt 53536
e City Clerk's Office will provide you a copy of this ordinance and the State plication must be fully completed, and submitted to the City Clerk's Office a required fees.  TESTATION AND ACKNOWLEDGEMENT OF RESPONSIBLE PARTY the undersigned being duly sworn on oath, affirm that within the last two (2 owing:  Successfully completed a responsible Alcohol Servers course  Held a Wisconsin Operator's License  An Alcohol Agent for a Retail Alcohol License  The Sole Proprietor of Retail Alcohol License.  knowledge I am the responsible party for this event and I agree to obey all said event. I further acknowledge that I am familiar with or have asked for Signature of Manager/Person in Mon-Recommend  Non-Recommend  Re  Police Chief's Signature  Date License Issuers  Safety: 6-7-33  Clerk's Signature	08-213-0797
he undersigned being duly sworn on oath, affirm that within the last two (2 owing:  Successfully completed a responsible Alcohol Servers course  Held a Wisconsin Operator's License  An Alcohol Agent for a Retail Alcohol License  The Sole Proprietor of Retail Alcohol License.  knowledge I am the responsible party for this event and I agree to obey all said event. I further acknowledge that I am familiar with or have asked for Signature of Manager/Person in Police Chief Recommendation and Commend  Non-Recommend  Re  Police Chief's Signature  Led with Clerk: 5 - 26 - 3 Date License Issues Safety: 6 - 7 - 9 3 Clerk's Signature	esponsible for knowing and must comply with
Successfully completed a responsible Alcohol Servers course  Held a Wisconsin Operator's License  An Alcohol Agent for a Retail Alcohol License  The Sole Proprietor of Retail Alcohol License.  knowledge I am the responsible party for this event and I agree to obey all said event. I further acknowledge that I am familiar with or have asked for Signature of Manager/Person in Police Chief Recommendation and Commend  Non-Recommend  Re  Police Chief's Signature  Red  August 1  Police Chief's Signature  Date License Issues Safety: 6-7-33  Clerk's Signature	
• Held a Wisconsin Operator's License • An Alcohol Agent for a Retail Alcohol License • The Sole Proprietor of Retail Alcohol License.  knowledge I am the responsible party for this event and I agree to obey all said event. I further acknowledge that I am familiar with or have asked for Signature of Manager/Person in Police Chief Recommendation and Commend  Non-Recommend  Recommend  Police Chief's Signature  Police Chief's Signature  License Issues  Safety: 6-7-33  Clerk's Signature	2) years have been/or completed one of the
An Alcohol Agent for a Retail Alcohol License The Sole Proprietor of Retail Alcohol License.  knowledge I am the responsible party for this event and I agree to obey all said event. I further acknowledge that I am familiar with or have asked for Signature of Manager/Person in Police Chief Recommendation and Commend  Non-Recommend  Recommend  Police Chief's Signature  Ided with Clerk: 5-26-33  Date License Issues Safety: 6-7-33  Clerk's Signature	
The Sole Proprietor of Retail Alcohol License.  knowledge I am the responsible party for this event and I agree to obey all said event. I further acknowledge that I am familiar with or have asked for Signature of Manager/Person in Police Chief Recommendation and Commend  Non-Recommend  Recommend  Police Chief's Signature  Ided with Clerk: 5-26-33  Date License Issues Safety: 6-7-33  Clerk's Signature	
knowledge I am the responsible party for this event and I agree to obey all said event. I further acknowledge that I am familiar with or have asked for Signature of Manager/Person in Police Chief Recommendation and Commendation	
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Signature of Manager/Person in Police Chief's Signature  Ided with Clerk: 5-26-33  Clerk's Signature	I the laws which regulate the activity
Signature of Manager/Person in Police Chief Recommendation and Commendation and Commendatio	t the laws which regulate the activities planne Copples of such laws
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Police Chief Recommendation and Comm mmend Non-Recommend Re  Police Chief's Signature  Police Chief's Signature  Led with Clerk: 5-26-33 Date License Issues Clerk's Signature	20
Police Chief's Signature    Police Chief's Signature	Marie Marie Committee Comm
led with Clerk: 5-26-33  Date License Issues Gefety: 6-7-33  Clerk's Signature	ecommend with conditions
led with Clerk: 5-26-33  Date License Issues Gefety: 6-7-33  Clerk's Signature	
led with Clerk: 5-26-33  Date License Issues Gefety: 6-7-33  Clerk's Signature	
led with Clerk: 5-26-33  Date License Issues Gefety: 6-7-33  Clerk's Signature	5/30/23
Safety: 6-7-33 Clerk's Signature	Date
Safety: 6-7-33 Clerk's Signature	
Cierk's Signature	
ે Receipt Information:	e:
- massife must midtion!	<del></del>

#### Exhibit A

Evansville Underground Music, Inc. 104 Garfield Ave. Evansville, WI 535361113

Officers:

Mark Schnepper-President Einar Floan-Vice President Event Manager-Joe Kaether Treasurer/Secretary-Ry Thompson

Addresses of people in charge of event:

Mark Schnepper 477 W. Main St. Evansville, WI 53536

Einar Floan 114 S. Third Street Evansville, WI 53536

Joe Kaether 23 N. 1<sup>st</sup> Street Evansville, WI 53536

Ry Thompson 104 Garfield Ave. Evansville, WI 53536

**Exhibit B** 



## **Attached Petition**

This petition contains the signature of two thirds (2/3) of at least one resident or business owner of the addresses on the portion of the street to be used as allowed under 106-163(f). No application fee is required if completed correctly.

I petition the City of Evansvill	e to approve this Long Term Stree	et Use Permit for the following:	
Event Location: 1st St	reet-Montgome	ory Court to Ma.	in St.
Event Date(s): 7-1-23	7-21-23, 8-26-23,	9-23-23, 10-14-23	- 100 - 100
Name	Address	Signature	Date
Bop ALLEN Lawonne Winger Evika Stoker	29 N. First	Robert Dalle	5-26-23
Lawonne Winger	17 N. First	davona Wing	5-26-23
Erika Stoker	20 N. First	Phylips	5 29 23
T.			
			x
	*		

# **APPLICATION FOR** Street Closure License

(Section 106 Municipal Code)

CITY OF EVANSVILLE CLERK'S OFFICE 31 S. Madison St, PO Box 529, Evansville, WI 53536 66 - Fax (608) 882-2282

	CONS	(608) 882-226
X	Application Fee:	APPLICATION

Application Fee: \$25.00 per Event	APPLICATION FEE	WILL NOT BE REFUNDED IF DENIED OR WITHDRAWN
	s or less) Street Closure	Long Term (More than 4 hours) Street Closure
This permit shall license the cl	osure of a City Street for the purn	(The attached Petition must be included with at least 2/3 signatures) ose of business, celebration or other event that would require the
	full or partial closure of a	road for a set period of time.
Name of Organization:	gnsville und	erg Nound Music Phone: 608-213-0797
		Evansville WI 53536
Responsible Person: MARK	<u> </u>	H. SCHNEPPER Last
Home Address: 477	U. MAIN S	Ti
City EVANSUTU.	E State: WIT	zip: 53536
Phone No: 608 - 213 - 6	797 Email Address: Eva	nsville Underground Music @ Gamail com
Date(s) of Event(s): 7-1-	23, 7-21-23,	8-26:23, 9-23-27, 10-14-23
Location of Event: 15+ 5	treet - Monto	SOMERY COUIT INHISPECTION
to Main St	Intersection	2
		1.
Diagrap		
riedse (	arrach a copy of map, showing wh	ere you wish to have the road blocked off.
or death of any person or dam granted. As evidence of the a may require the applicant to fu employees and agents as an a minimum limits in an amount as	admage or expense asserte age to any property caused pplicant's ability to perform Irnish a certificate of compraditional insured. The insured required by the public safe	and hold the city and its employees and agents harmless d against or incurred by the city on account of any injury by or resulting from the activities for which the license is the conditions of the license, the public safety committee ehensive general liability insurance with the city and its ance shall include coverage for a contractual liability with the committee. The certificate of insurance shall provide enewal or material change in policy.
Cancellation- The city, through authorized by a street use licen.	its police department or oth se if the health, safety or we d with the use or if there are	ner agents, may terminate, without prior notice, any use Ifare of the public appears to be endangered by activi-
	*For Long Term Stre	
<b>Public Hearing and/or Petition-</b> Ting the petition attached to this ing the instructions on the attac	permi. The applicant has t	to pay the fee for holding a public hearing; or complet- been honest and truthful to his or her best ability in follow-

Signature of Applicant

	FOR MUNICIPALITY U  Police Chief Recommend	SE ONLY BELOW THIS LINE
Recommend		Recommend with conditions
	Police Chief's	5 1 3 0 1 2 3 Signature Date
	Municipal Services Recomme	
Recommend	Non-Recommend	Recommend with conditions
	Municipal Service	
Public Safety Meeting (	City Clerk's Yes No	If Yes, Meeting Date: 67-23
ate License Issued:	in the second se	ii res, meeting bale.
Clerks Notes and Rece	ipt Information:	



#### Jolene Klitzman <jolene.klitzman@ci.evansville.wi.gov>

#### **Street Closures**

Dale Roberts <dale.roberts@ci.evansville.wi.gov> To: Jolene Klitzman <jolene.klitzman@ci.evansville.wi.gov>

Tue, May 30, 2023 at 7:13 AM

Looks good to me.

Dale Roberts

**Public Works Foreman** 

City of Evansville

535 S Madison St

(608) 516-2680

[Quoted text hidden]



# APPLICATION FOR Street Closure License

(Section 106 Municipal Code)

CITY OF EVANSVILLE CLERK'S OFFICE 31 S. Madison St, PO Box 529, Evansville, WI 53536 (608) 882-2266 – Fax (608) 882-2282

Application Fee: \$25.00 per Event	APPLICATION F	EE WILL NOT BE REFUN	NDED IF DENIED OR WITHD	RAWN
Short Term (4 hours	or less) Street Closure		erm (More than 4 hours) St od Petition must be included with at lo	
This permit shall license the cl	osure of a City Street for the pu full or partial closure of	rpose of business, celebr a road for a set period o	ation or other event that woul f time.	d require the
Name of Organization: Fri	ends of Eager Frae Pu	ble Library	Phone: 408 69	8 8985
Organization address:				
Responsible Person: Kat	harine Jo	anna Middle	Seberger-to	strom
Home Address: 113	W Churcust	्य करन्य सम्बद्धः 	-	
city Evansulle	State: W/		Zip: 53536	
Phone No: 608 - 698 -	8985 Email Address: 12	S-forstr	on e gmail.	om
Date(s) of Event(s):	June June	30,2023	U	
Hours of Operation: $U_{i}$	00 - 8100			
Location of Event: & M	nmas table			
please Stock	aft 1st stree	of them in	ain to Montgor	novy Ct.
Please	attach a copy of map, showing	where you wish to have th	ne road blocked off.	11-0-

Hold Harmless- The applicant agrees to indemnify, defend and hold the city and its employees and agents harmless against all claims, liability, loss, damage or expense asserted against or incurred by the city on account of any injury or death of any person or damage to any property caused by or resulting from the activities for which the license is granted. As evidence of the applicant's ability to perform the conditions of the license, the public safety committee may require the applicant to furnish a certificate of comprehensive general liability insurance with the city and its employees and agents as an additional insured. The insurance shall include coverage for a contractual liability with minimum limits in an amount as required by the public safety committee. The certificate of insurance shall provide 30 days written notice to the city upon cancellation, non-renewal or material change in policy.

**Cancellation-** The city, through its police department or other agents, may terminate, without prior notice, any use authorized by a street use license if the health, safety or welfare of the public appears to be endangered by activities generated by or associated with the use or if there are activities that violate any condition specified by the public safety committee when authorizing the issuance of the street use license.

#### \*For Long Term Street Closures Only\*

**Public Hearing and/or Petition-**The applicant further agrees to pay the fee for holding a public hearing; or completing the petition attached to this permit. The applicant has been honest and truthful to his or her best ability in following the instructions on the attached petition.

MOSFORSTrom

Signature of Applicant

May 2 2023

Date

See attach Emm)  Police Chief's Signature  Municipal Services Recommendation and Comment	Date
See attach Emm)  Police Chief's Signature  Municipal Services Recommendation and Comment  Recommend Non-Recommend Recommend	Date ts:
See affach Emm)  Police Chief's Signature  Municipal Services Recommendation and Comment  Recommend Non-Recommend Recomment	Date ts:
Police Chief's Signature  Municipal Services Recommendation and Comment  Recommend Non-Recommend Recommend	ts:
Municipal Services Recommendation and Comment	ts:
Municipal Services Recommendation and Comment	ts:
Municipal Services Recommendation and Comment Recommend Non-Recommend Recommend	ts:
Recommend Non-Recommend Recommend	
Recommend Non-Recommend Recommend	
	d with conditions
Municipal Services Signature	Date
City Clerk's Office:	1.7.13
Public Safety Meeting required? Yes No If Yes, Meeting D	Date: 6723
Date License Issued:	
Clerks Notes and Receipt Information: Pd \	
	Paid To:
	City of Evansville
	Receipt: 1.153082 25.00 SEBORGER-FORSTROM KATHA



Evansville has planning, zoning, permitting and code enforcement as services to its residents. This one-stop process can help streamline your new deck, remodel or business expansion.

#### **Zoning Code**

Click Here To Access Our Zoning Code.

Click on the buttons to access information about recent changes to our R-1 and R-2 zoning districts, and for more information on Accessory Dwelling Units (ADUs).





Colette Spranger

Community Development Director

608-882-2263

colette sprangenieci evansville wiceov

#### Permits, Forms and Applications:

Click on a form below to view and download

Annexation

**Building Permit** 

Comprehensive Plan Amendment

Conditional Use

Chicken Keeping

Floodplain

Land Division Preliminary

Land Division Final

Rezone

Sign

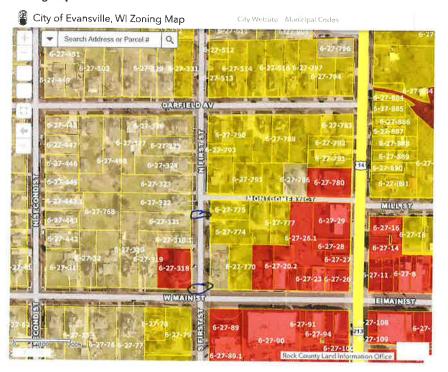
Site Plan

Variance

Historic Preservation - Certificate of Appropriateness

Historic Preservation Demolition

#### Zoning Map



nontgomory Ct.



#### Jolene Klitzman <jolene.klitzman@ci.evansville.wi.gov>

#### **Street Closure License**

Patrick Reese <p.reese@ci.evansville.wi.gov> Wed, May 3, 2023 at 9:20 AM To: Jolene Klitzman <jolene.klitzman@ci.evansville.wi.gov>, Dale Roberts <dale.roberts@ci.evansville.wi.gov>

I'm A-OKAY with this:

[Quoted text hidden]



#### Jolene Klitzman <jolene.klitzman@ci.evansville.wi.gov>

#### **Short Term Street Closure**

Dale Roberts <a href="mailto:ci.evansville.wi.gov">dale.roberts@ci.evansville.wi.gov</a> To: Jolene Klitzman <jolene.klitzman@ci.evansville.wi.gov>

Fri, May 19, 2023 at 2:04 PM

Sorry, That looks good also.

**Dale Roberts** 

**Public Works Foreman** 

City of Evansville

535 S Madison St

(608) 516-2680

[Quoted text hidden]



**Location of Event:** 

## APPLICATION FOR Street Closure License

(Section 106 Municipal Code)

CITY OF EVANSVILLE CLERK'S OFFICE 31 S. Madison St, PO Box 529, Evansville, WI 53536

(608) 882-2266 - Fax (608) 882-2282

Application Fee: \$25.00 per Event	APPLICATION F	FEE WILL NOT BE REFUN	DED IF DENIED OR WITHDRAWN
Short Term (4 hou	rs or less) Street Closure	I be a second	rm (More than 4 hours) Street Closure Petition must be included with at least 2/3 signatures)
This permit shall license the		urpose of business, celebro a road for a set period of	ition or other event that would require the time.
Name of Organization:	- Paul Catholic	Church	Phone: 608-882-4138
Organization address: 30	7 Garfield Ave	Evansvil	le, WI 53536
Responsible Person: $M$	lary	Anne	A1+
Firs	t J	Middle	Last
Home Address: 2/6	b W. Main		
city Evansville	State: WI		Zip: 53536
Phone No: 608 - 751	8402 Email Address:	Mary Anne A	1+216@gmail.com
Date(s) of Event(s):	inday, June	(1	J
Hours of Operation:	KLANT VEN MANO	BLA SU	245-6

will

into thestreet

N. First - We

OU

Tor the Corner

house forch. The avests

Hold Harmless- The applicant agrees to indemnify, defend and hold the city and its employees and agents harmless against all claims, liability, loss, damage or expense asserted against or incurred by the city on account of any injury or death of any person or damage to any property caused by or resulting from the activities for which the license is granted. As evidence of the applicant's ability to perform the conditions of the license, the public safety committee may require the applicant to furnish a certificate of comprehensive general liability insurance with the city and its employees and agents as an additional insured. The insurance shall include coverage for a contractual liability with minimum limits in an amount as required by the public safety committee. The certificate of insurance shall provide 30 days written notice to the city upon cancellation, non-renewal or material change in policy.

attach a copy of map, showing where you wish to have the road blocked off.

Cancellation- The city, through its police department or other agents, may terminate, without prior notice, any use authorized by a street use license if the health, safety or welfare of the public appears to be endangered by activities generated by or associated with the use or if there are activities that violate any condition specified by the public safety committee when authorizing the issuance of the street use license. City of Evansville

#### \*For Long Term Street Closures Only\*

Public Hearing and/or Petition-The applicant further agrees to pay the fee for holding a public hearing: or completing the petition attached to this permit. The applicant has been honest and truthful to his permit ability in following the instructions on the attached petition LCan You drop off Street barricades ST. PAUL CATHOLIC CHURC

May 19, 2023 2:37 PM

having a band

in chairs, etc

Signature of Applicant

Date



Jolene Klitzman <jolene.klitzman@ci.evansville.wi.gov>

#### **Short Term Street Closure**

Patrick Reese <p.reese@ci.evansville.wi.gov> Fri, May 19, 2023 at 10:59 AM To: Jolene Klitzman <jolene.klitzman@ci.evansville.wi.gov>, Dale Roberts <dale.roberts@ci.evansville.wi.gov>

I'm fine w/ this

[Quoted text hidden]



#### Jolene Klitzman <jolene.klitzman@ci.evansville.wi.gov>

#### **Short Term Street Closure**

Dale Roberts <dale.roberts@ci.evansville.wi.gov> To: Jolene Klitzman <jolene.klitzman@ci.evansville.wi.gov>

Fri, May 19, 2023 at 1:33 PM

looks good!

**Dale Roberts Public Works Foreman** City of Evansville

535 S Madison St

(608) 516-2680

[Quoted text hidden]

4	Police Chief Recom	mendation and Comments:	
Recommend	Non-Recommend	Recommend with	h conditions
	Police	e Chief's Signature	Date
	unicipal Services Rec	ommendation and Comments:	
Recommend	Non-Recommend	Recommend with	n conditions
		Services Signature	Date
Public Safaty Masting a service d2	City C	Clerk's Office:	
Public Safety Meeting required?  Date License Issued:		Clerk's Office:	Date 6-7-23



# Evansville Public Safety Police Report

June 7th, 2023

### **Committee Members:**

Chair Erika Stuart
Alderperson Gene Lewis
Alderperson Ben Corridon

# **City Representatives:**

Mayor: Dianne Duggan
City Administrator: Jason Sergeant
Prepared by: Chief Patrick Reese

## **Officer Training:**

Officer Nankee will be attending Tactical Response Training at BTC

Officer Tway will be attending Emergency Vehicle Operations Instructor Course

Detective Sgt. Rittenhouse will be attending the Rock County LGBTQ+ Summit at BTC

All staff will be attending a course on de-escalation techniques

### **Community Relations:**

- Chief Reese & Lt. Jones sat in on the forensic science class at the request of Mrs. Marlin and watched the students present
- Third shift officers visited with and conducted extra patrol for the senior camp out at the high school
- Ofc. Johnson was awarded the Hometown Hero Award by the WI State Assembly and will receive his awared during assembly session on 06/07
- Staff will assist with the school walk/run on 06/08
- Ofc. Wicksum will participate in Cruise Night at Creeekside Place

## **Monthly Update:**

Technology/Equipment/Building Update:

Patrol staff participated in the Click it or Ticket Campaign

Plumbing issues in two of our restrooms resulted in the replacement of one toilet and repair to another

Our radio booster has failed. Gen Comm has it out for repair or replacement. We are still waiting on cost assessment

#### Police Commission/Staffing:

The Police Commission did not meet this month

Update: We are still down one full time officer due to light duty

Ofc. Raupp resigned as part time. He accepted the Police Chief job in Brodhead

Calls for Service (through 03/30/23 10:01AM):

May 2022: 1267 May 2023: 1037

#### Accreditation:

Lt. Jones finished up the CORE assessment of Jackson PD

#### Notable calls/incidents by Sergeant Rittenhouse (4/28):

- Officers investigated 9 separate disorderly conduct incidents. Several subjects were cited for disorderly conduct
- Officer Tway arrested a subject for OWI
- A juvenile was taken into custody after a battery to one of their siblings
- Ofc Johnson and Sgt. Reilly investigated a child neglect case. An arrest was made
- Ofc Johnson and Sgt. Rittenhouse investigated a child neglect case. An arrest was made (different from above)
- A juvenile was referred for second degree reckless endangering safety after a battery involving a weapon, Sgt. Rittenhouse and Ofc. Johnson investigated the incident
- 48 9-1-1 abandoned calls were responded to. This is a big uptick and is happening county wide
- 50 Traffic stops were conducted

#### Memorial Day weekend:

- Sgt. Rittenhouse led an investigation into two missing teens who ran away from home. They were found safely and returned to Evansville. There was no threat to safety. Thank you to the Department of Criminal Investigations and Milwaukee PD for their assistance
- Sgt. Rittenhouse and Ofc. Lomax investigated a domestic incident and a subject was arrested
- Sgt. Rittenhouse and Ofc. Schmidt investigated a domestic incident and a subject was arrested
- 2 subjects were cited for underage drinking

# **Calls for Service by Type and Location - Summary**

#### **EVPD**

From 5/1/2023 To 5/31/2023

Туре	Description		Count
911	911 ABANDONED OR HANGUP OR OPEN LINE	Total:	58
ACIT	ASSIST CITIZEN	Total:	48
ALARM	ALARM	Total:	5
ALC	ALCOHOL VIOLATION	Total:	2
ANM	ANIMAL COMPLAINT	Total:	14
AVR	ABANDONED VEHICLE	Total:	1
ВСК	BUSINESS CHECK	Total:	43
BUR	BURGLARY	Total:	1
CD	CIVIL DISPUTE	Total:	6
CHILD	CHILD OFFENSE	Total:	1
CPS	CIVIL PAPER SERVICE	Total:	1
DC	DISORDERLY CONDUCT	Total:	9
DIST	DISTURBANCE	Total:	3
DOA	DEATH INVESTIGATION	Total:	1
DRUG	DRUG OFFENSE	Total:	2
ESCORT	ESCORT/TRANSPORT	Total:	1
FAM	FAMILY PROBLEM	Total:	5
FAST	ASSIST FIRE OR EMS	Total:	69
FOL	FOLLOWUP	Total:	79
FOOT	FOOT PATROL	Total:	36
FRD	FRAUD/FORGERY	Total:	1
HAR	HARASSMENT	Total:	3
HAZC	HAZARDOUS CONDITION	Total:	3
HR	HIT & RUN	Total:	3

# **Calls for Service by Type and Location - Summary**

#### **EVPD**

From 5/1/2023 To 5/31/2023

Туре	Description		Count
KID	KID PROBLEM	Total:	5
LOIT	LOITERING	Total:	1
LOUD	LOUD NOISE	Total:	4
NOWN	UNWANTED PERSON	Total:	1
OJUR	ASSIST OTHER JURISDICTION	Total:	22
OPEN	OPEN DOOR/WINDOW	Total:	1
ORD	ORDINANCE VIOLATION	Total:	6
OWI	OPERATING WHILE	Total:	1
ows	OUT WITH SUBJECT	Total:	5
PARK	PARKING COMPLAINT	Total:	17
PHONE	PHONE MESSAGE FOR OFFICER	Total:	5
PROPERTY	PROPERTY	Total:	6
PWU	PUBLIC WORKS/UTILITY	Total:	2
RUN	RUNAWAY	Total:	1
SCHOOL	SCHOOL PATROL	Total:	49
SECK	SECURITY CHECK	Total:	360
SEX	SEX OFFENSE	Total:	2
SPAS	SPECIAL ASSIGNMENT	Total:	24
SPEV	SPECIAL EVENT	Total:	1
STALLD	STALLED VEHICLE	Total:	3
SUSP	SUSPICIOUS	Total:	19
Т	TRAFFIC STOP	Total:	54
TA	TRAFFIC ACCIDENT	Total:	5

# **Calls for Service by Type and Location - Summary**

#### **EVPD**

#### From 5/1/2023 To 5/31/2023

Туре	Description		Count
TC	TRAFFIC COMPLAINT	Total:	25
THFT	THEFT	Total:	7
THREAT	THREAT	Total:	2
TRU	TRUANCY	Total:	1
UNLK	VEHICLE UNLOCK	Total:	6
WELF	WELFARE CHECK	Total:	7
		Total Incidents:	1037

City of Evansville EMS 11 W. Church St. Evansville, WI 53536 (608)882-2269 Chief Carolyn Kleisch Public Safety Meeting June 7<sup>th</sup> 2023

#### 1. Calls for Service:

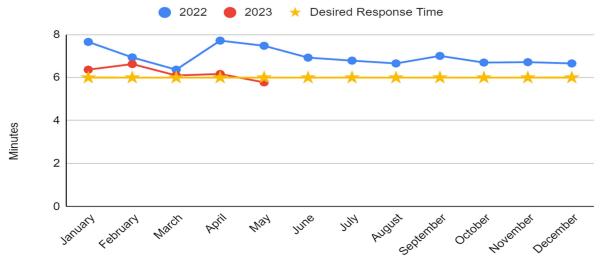
- a. 81 Calls during the month of May 2023. (641-78 /642-3)
- b. 63 Calls during the month of May 2022. (641-60/642-3)
- c. To date call volume 2023-329
- d. To date call volume 2022-310

#### **Updates:**

- a. Congrats to Josh Piper!! He has passed his NREMT, obtained his WI State EMT license and gone through his affiliation with Mercy. Now he is riding as an EMT and able to help cover shift.
- b. We treated EMS personnel and spouses to dinner for EMS Week.
- c. EMS Service License has been renewed for 2023-2026 licensing period.
- d. The refresher cycle for EMTs has been completed, most staff have already renewed their personal licenses. Renewal due by June 30<sup>th</sup>
- e. Morgan and Carolyn completed the Death Scene Investigation training.
- f. Morgan, Karla and Carolyn attended the Mental Health and Wellness Symposium.
- g. Keri presented 2 EMS Scholarships to High school Seniors.
- h. Keri, Karla and Carolyn attended the 6<sup>th</sup> grade Civics Day along with PD and Fire at the Middle School.
- i. Karla, Scott, Keri, Meegan, and Dennis participated in the Reality Maze put on by the High School.
- j. I finished and submitted the CMS data reports to Medicare/Medicaid system.
- k. Karla, Morgan and I wrapped up CPR with the Library staff.

	Avg Unit Notified to Enroute in Minutes	Avg Unit Enroute to Arrived at Scene in Minutes	Avg Unit Arrived on Scene to Left Scene in Minutes	Avg Unit Left Scene to Arrived at Destination in Minutes	Avg Unit Arrived at Destination to Unit Back In Service in Minutes	Number of Runs
ſ	5.78	3.78	20.82	26.91	42.14	81

## Average Response Times per Month



M	10	٦t	h

Incident Complaint Reported By Dispatch (eDispatch.01)	Number of Runs	Percent of Total Runs
Falls	22	27.16%
Invalid Assist/Lifting Assist	9	11.11%
Breathing Problem	5	6.17%
Chest Pain (Non-Traumatic)	5	6.17%
Unconscious/Fainting/Near-Fainting	5	6.17%
Heart Problems/AICD	3	3.70%
Motor Vehicle Crash	3	3.70%
Sick Person	3	3.70%
Stroke/CVA	3	3.70%
Bleeding	2	2.47%
Chronic Illness/Medical Condition	2	2.47%
Convulsions/Seizure	2	2.47%
Fire	2	2.47%
Fire Standby	2	2.47%
No Other Appropriate Choice	2	2.47%
Pain	2	2.47%
Traumatic Injury	2	2.47%
Abdominal Pain/Problems	1	1.23%
Back Pain (Non-Traumatic)	1	1.23%
Cardiac Arrest/Death	1	1.23%
Hypotension / hypertension	1	1.23%
Motorcycle Collision	1	1.23%
Syncope/near-fainting	1	1.23%
Unresponsive	1	1.23%
	Total: 81	Total: 100.00%