



# City of Appleton

100 North Appleton Street  
Appleton, WI 54911-4799  
www.appleton.org

## Meeting Agenda - Final-revised Safety and Licensing Committee

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Wednesday, March 9, 2022

5:30 PM

Council Chambers, 6th Floor

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1. Call meeting to order

2. Roll call of membership

3. Approval of minutes from previous meeting

[22-0285](#) Safety and Licensing Minutes from February 23rd, 2022.

**Attachments:** [S & L Minutes 2-23-22.pdf](#)

4. **Public Hearings/Apearances**

5. **Action Items**

[22-0046](#) Resolution #1-R-22 Intoxicated Bartender Ordinance

**Attachments:** [#1-R-22 Intoxicated Bartenders.pdf](#)

[Intoxicated Bartender incidents 2021.pdf](#)

**Legislative History**

1/26/22 Safety and Licensing Committee held  
*Motion and second to deny were withdrawn.*

*Motion to hold until February 23rd to allow for additional revisions carried 5/0.*

2/23/22 Safety and Licensing Committee returned without recommendation  
*Ald. Smith stated that he would like to withdraw the Resolution. There were no objections from the Committee members.*

[22-0227](#) Class "B" Beer and Reserve "Class B" Liquor License application for Holidays Pub LLC d/b/a Holidays Pub & Grill, Corey Bringman, Agent, located at 3950 N Richmond St, contingent upon approval from the Health and Inspections departments.

**Attachments:** [Holidays Pub & Grill.pdf](#)

[22-0231](#) Class "B" Beer and Reserve "Class B" Liquor License application for Foster Cocktail Company LLC d/b/a Commodore Club, Patrick Frawley, Agent, located at 231 & 233 E College Ave, contingent upon approval from the Health, Public Works and Inspections departments.

**Attachments:** [Commodore Club.pdf](#)

[SUP 17-15 Transfer\\_Report\\_3-2-22\\_final Commodore Club.pdf](#)

[22-0228](#) Class "B" Beer and "Class B" Liquor Temporary Premise Amendment application for Sangria's Mexican Grill, Sarah Gregory, Agent, located at 215 S Memorial Dr, on May 5, 7 & 8, 2022, contingent upon approvals the Community Development and Health departments.

**Attachments:** [Sangrias S&L.pdf](#)

[22-0236](#) Class "A" Beer and "Class A" Liquor License Change of Agent application for Walgreens Co d/b/a Walgreens #07323, Garrette Kersten, New Agent, located at 3330 E Calumet St.

**Attachments:** [Garrette J Kersten S&L.pdf](#)

[22-0317](#) Cigarette and Tobacco Products Retail License application for Tee Tees Nachos LLC d/b/a Tee Tees Nachos, Timasha Thornton, Person in Charge, located at 550 N Morrison St.

**Attachments:** [Tee Tees Nachos S&L.pdf](#)

## 6. Information Items

[22-0287](#) 2021 Appleton Fire Department Annual Report

**Attachments:** [AppletonFireDepartment2021.pdf](#)

[22-0286](#) Director's Reports

1. City Clerk
2. Police Chief
3. Fire Chief

[22-0288](#) Police Department information on alcohol violations:  
- Dairyland Brewpub, open after hours/failure to vacate - 50 point violation

## 7. Adjournment

*Notice is hereby given that a quorum of the Common Council may be present during this meeting, although no Council action will be taken.*

*Reasonable Accommodations for Persons with Disabilities will be made upon Request and if Feasible.*





# City of Appleton

100 North Appleton Street  
Appleton, WI 54911-4799  
www.appleton.org

## Meeting Minutes - Final Safety and Licensing Committee

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Wednesday, February 23, 2022

5:30 PM

Council Chambers, 6th Floor

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1. Call meeting to order

*The meeting was called to order by Vice-Chair Smith, at 5:33 p.m.*

2. Roll call of membership

*Aldersperson Van Zeeland arrived at 5:37 p.m.*

**Present:** 5 - Reed, Schultz, Van Zeeland, Smith and Hartzheim

3. Approval of minutes from previous meeting

[22-0205](#)

Approval of minutes from previous meeting.

**Attachments:** [S & L Minutes 1-26-22.pdf](#)

**Hartzheim moved, seconded by Reed, that the Minutes be approved. Roll Call.  
Motion carried by the following vote:**

**Aye:** 4 - Reed, Schultz, Smith and Hartzheim

**Excused:** 1 - Van Zeeland

4. **Public Hearings/Apearances**

5. **Action Items**

[22-0046](#)

Resolution #1-R-22 Intoxicated Bartender Ordinance

**Attachments:** [#1-R-22 Intoxicated Bartenders.pdf](#)  
[Intoxicated Bartender incidents 2021.pdf](#)

*Aldersperson Smith stated that he would like to withdraw the Resolution.*

*There were no objections from the Committee members.*

[22-0208](#)

Auto-Aid Addendum with the Neenah/Menasha Fire Rescue

**Attachments:** [Auto-Aid\\_Neenah\\_Menasha\\_Memo.pdf](#)  
[22-0078 - Addendum to Automatic Aid Agrm.pdf](#)  
[2011 Auto Aid Agreement MOU.pdf](#)  
[2010 Shared Response.pdf](#)

Hartzheim moved, seconded by Reed, that the Auto-Aid Addendum be recommended for approval. Roll Call. Motion carried by the following vote:

**Aye:** 5 - Reed, Schultz, Van Zeeland, Smith and Hartzheim

[22-0209](#)

Urban Search and Rescue Contract

**Attachments:** [Urban Search and Rescue Memo.pdf](#)  
[Urban Search and Rescue 2022-2024 Agreement.pdf](#)  
[2021 Act 104.pdf](#)

Hartzheim moved, seconded by Van Zeeland, that the Contract be recommended for approval. Roll Call. Motion carried by the following vote:

**Aye:** 5 - Reed, Schultz, Van Zeeland, Smith and Hartzheim

[22-0047](#)

Reserve "Class B" Liquor and Class "B" Beer License application for Jackson Investment Group d/b/a Jimmy's on the Ave, April Anderson, Agent, located at 409 W College Ave, contingent upon approval from the Community Development, Health and Inspections departments.

**Attachments:** [Jimmys on the Ave.pdf](#)

Hartzheim moved, seconded by Smith, that the License be recommended for approval. Roll Call. Motion carried by the following vote:

**Aye:** 5 - Reed, Schultz, Van Zeeland, Smith and Hartzheim

[22-0067](#)

Class "B" Beer License application for The Breaking Point d/b/a Breaking Point, Courtney J Hayden, Agent, located at 2011 N Richmond St, contingent upon approval the Health and Inspections departments.

**Attachments:** [Breaking Point.pdf](#)  
[Resolution\\_The Breaking Point\\_SUP#5-21\\_SIGNED.pdf](#)  
[StaffReport\\_Breaking Point\\_SUP\\_For01-12-22.pdf](#)

Hartzheim moved, seconded by Smith, that the License be recommended for approval. Roll Call. Motion carried by the following vote:

**Aye:** 5 - Reed, Schultz, Van Zeeland, Smith and Hartzheim

[22-0129](#)

Class "B" Beer License application for Taco House LLC d/b/a Taco House, Roberto Martinez, Agent, located at 135 E Wisconsin Ave, contingent upon approval from the Finance and Inspections departments.

**Attachments:** [Taco House.pdf](#)  
[Resolution\\_135 E Wisconsin Ave\\_SUP#3-20\\_SIGNED\\_attached\\_to\\_liquor\\_license.pdf](#)

**Schultz moved, seconded by Hartzheim, that the License be recommended for approval. Roll Call. Motion carried by the following vote:**

**Aye:** 5 - Reed, Schultz, Van Zeeland, Smith and Hartzheim

[22-0188](#)

Change of Agent application for Aldi Inc d/b/a Aldi #69, Jamison Pierce, New Agent, located at 2310 S Kensington Dr.

**Attachments:** [Jamison Pierce S&L.pdf](#)

**Schultz moved, seconded by Reed, that the Change of Agent be recommended for approval. Roll Call. Motion carried by the following vote:**

**Aye:** 5 - Reed, Schultz, Van Zeeland, Smith and Hartzheim

[22-0189](#)

Change of Agent application for Aldi Inc d/b/a Aldi #68, Michael J Haash, New Agent, located at 116 N Linwood Ave.

**Attachments:** [Michael J Haasch S&L.pdf](#)

**Hartzheim moved, seconded by Schultz, that the Change of Agent be recommended for approval. Roll Call. Motion carried by the following vote:**

**Aye:** 5 - Reed, Schultz, Van Zeeland, Smith and Hartzheim

[22-0083](#)

Cigarette License application for Fox River House LLC d/b/a Fox River House, Cassidy Evers, Agent, located at 211 S Walnut St.

**Attachments:** [Fox River House S&L.pdf](#)

**Hartzheim moved, seconded by Van Zeeland, that the Cigarette License be recommended for approval. Roll Call. Motion carried by the following vote:**

**Aye:** 5 - Reed, Schultz, Van Zeeland, Smith and Hartzheim

## 6. Information Items

[22-0052](#)

Special Events:

Rally for Fair Maps, End Gerrymandering, Fair Maps Team, Houdini Plaza, January 21, 2022

Missing, Murdered Indigenous Women, Girls and 2 Spirits, Houdini Plaza, February 14, 2022

Avenue of Ice, Creative Downtown Appleton, College Ave amenity strip, beginning on February 18, 2022

[22-0206](#)

Police Department Information on alcohol law violations.

[22-0207](#)

Director's Reports

1. City Clerk

- Spring Election updates

2. Police Chief

- Squad design change for special vehicles
- CCRT update
- Staffing update

3. Fire Chief

7. Adjournment

**Hartzheim moved, seconded by Reed, that the meeting be adjourned at 6:00 p.m. Roll Call. Motion carried by the following vote:**

**Aye:** 5 - Reed, Schultz, Van Zeeland, Smith and Hartzheim

**Resolution #1-R-22**  
**Intoxicated Bartender Ordinance**

*Submitted By:* Alderperson Smith

*Date:* 1/19/2022

*Referred To:* Safety & Licensing Committee

Whereas a need has been identified,

Be it resolved that the following resolution is submitted,

It shall be unlawful for the licensee or any employee of a licensed establishment to be under the influence of an intoxicant while performing alcohol beverage services on the licensed premises. Under the influence means that the individual has a blood alcohol content of 0.08 or more or otherwise has consumed a sufficient amount of alcohol, controlled substance, or combination of alcohol and controlled substances or any other drug, to cause the individual to be less able to exercise clear judgement and reasonable care in the exercise of services performed. If a law enforcement officer has probable cause that a violation of this section has occurred, the officer, prior to an arrest, may request the individual to provide a sample of his or her breath for a preliminary breath screening test using a device approved by the State of Wisconsin for this purpose. The officer may request the individual to provide subsequent sample(s) of his or her breath if the officer has probable cause to conduct further preliminary breath screening test(s). The result of the preliminary breath screening may be used by the law enforcement officer for the purpose of deciding whether or not the person shall be arrested for a violation of this section. Refusal to submit to a requested test may be considered by the Common Council as grounds for revocation, suspension, non-issuance, or non-renewal of the server's operator's license.



“Excellence in Police Service”

**Chief Todd Thomas**  
**Appleton Police Department**

222 South Walnut Street • Appleton, WI 54911-5899  
(920) 832-5500

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To: Chairperson Katie Van Zeeland, Safety and Licensing Committee  
Aldersperson Mike Smith

From: Chief Todd Thomas

Date: January 24, 2022

Subject: **Incidents involving intoxicated bartenders - 2021**

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Council Members,

Lt. Adam Nagel did research into the number of incidents where we needed to act on a bartender who was intoxicated. I attached the information he was able to locate, we know there were other incidents that did not rise to the level of a report or citation.

05/17/21

Appleton Officers responded to a disturbance at a bar on N. Richmond St. The bartender and patron were both involved in a physical fight. Both the bartender and patron were cited for Disorderly Conduct. The bartender submitted to a PBT which read 0.197. The officer indicated that alcohol was a contributing factor in the fight.

05/23/21

Appleton Officer conducts a traffic stop on a downtown bartender around bar close. Bartender smelled like alcohol. He claimed it was due to bartending and he had not been drinking. Bartender was arrested for OWI. The blood test came back at 0.202.

05/28/21

Appleton Officers responded to an anonymous complaint of a “very” intoxicated bartender at N. Richmond St bar. They arrived and observed the bartender was extremely intoxicated. They described her as being in no condition to be serving alcohol. She submitted to a PBT which read 0.245.

07/25/21

Appleton Officers responded to a complaint of loud music coming from W College Ave bar. Officers arrived at the bar and observed loud noise. Officers had contact with someone identifying themselves as the owner of the bar. This person had slurred speech and appeared to be highly intoxicated. When asked to vacate the bar at bar close, they argued with officers and were eventually cited for failing to vacate the bar. A PBT sample was not obtained.



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11/04/21

Appleton Officers received a complaint for a welfare check at a College Ave. bar. An anonymous person called dispatch and had a concern about an intoxicated bartender. Officers contacted the bartender. She was described as having slurred speech, redness in her eyes and was stumbling as she walked. The bartender in this case did not submit to a PBT and closed the bar.

12/30/21

At approximately 0255hrs officers noticed that an E Wisconsin Ave bar still had its lights and the OPEN sign on. When they arrived, they found multiple intoxicated people inside the bar. This included a person walking out of the business with two 24 packs of beer. The bar manager and an underage bartender were both intoxicated and no position to safely serve alcohol. Multiple citations issued. Both refused PBTs.

Lt. Nagel also spoke with the Neenah City Attorney about their ordinance. The Neenah ordinance was passed in 2013, before the current attorney was in their position. They looked through the notes for the council meeting at the time and were not able to find a specific reason for enacting the ordinance. They were clear that they don't randomly walk into establishments and PBT bartenders, and he is not aware of any citations being given, but they have used it a few times for educational purposes.

If the ordinance is passed by the council, we would anticipate the same approach. We would investigate only on a complaint or if we are in the establishment for another reason and have probable cause to believe that a bartender is in violation of the ordinance.

Chief Todd Thomas

# Original Alcohol Beverage Retail License Application

(Submit to municipal clerk.)

For the license period beginning: 7/1/2021 ending: 6/30/2022  
(mm dd yyyy) (mm dd yyyy)

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

County of Outagamie Aldermanic Dist. No. \_\_\_\_\_  
 (if required by ordinance)

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

Applicant's Wisconsin Seller's Permit Number <u>[REDACTED]</u>	
FEIN Number <u>[REDACTED]</u>	
TYPE OF LICENSE REQUESTED	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$ <u>100</u>
<input type="checkbox"/> Class C wine	\$
<input type="checkbox"/> Class A liquor	\$
<input type="checkbox"/> Class A liquor (cider only)	\$ N/A
<input checked="" type="checkbox"/> Class B liquor	\$ <u>500</u>
<input type="checkbox"/> Reserve Class B liquor	\$
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$ <u>60</u>
<b>TOTAL FEE</b>	\$

Name (individual / partners give last name, first, middle; corporations / limited liability companies give registered name)  
Holidays Pub, ~~LLC~~ LLC

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

President / Member Last Name <u>Grishaber</u>	(First) <u>Scott</u>	(Middle Name) <u>Thomas</u>	Home Address (Street, City or Post Office, & Zip Code) <u>W6342 Ravine Ct, Menasha, WI 54952</u>
Vice President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Secretary / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Agent Last Name <u>Bringman</u>	(First) <u>Corey</u>	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code) <u>712 N. Hawthorne Dr. Appleton 54915</u>
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

1. Trade Name Holidays Pub & Grill Business Phone Number \_\_\_\_\_  
 2. Address of Premises 3950 N. Richmond St. Post Office & Zip Code Appleton 54913

3. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.)  
Main floor, second floor, and basement area of Holidays Pub as part of a multi-tenant retail center.

4. Legal description (omit if street address is given above): \_\_\_\_\_

5. (a) Was this premises licensed for the sale of liquor or beer during the past license year? .....  Yes  No  
 (b) If yes, under what name was license issued? \_\_\_\_\_



6. Is individual, partners or agent of corporation/limited liability company subject to completion of the responsible beverage server training course for this license period? **If yes, explain**  Yes  No  
*Agent will also bartend.*
7. Is the applicant an employe or agent of, or acting on behalf of anyone except the named applicant?  Yes  No  
**If yes, explain.**
8. Does any other alcohol beverage retail licensee or wholesale permittee have any interest in or control of this business? **If yes, explain**  Yes  No
9. (a) **Corporate/limited liability company applicants only:** Insert state \_\_\_\_\_ and date \_\_\_\_\_ of registration.
- (b) Is applicant corporation/limited liability company a subsidiary of any other corporation or limited liability company? **If yes, explain**  Yes  No  
*It is a disregarded entity under Tomsons of Appleton, Inc*
- (c) Does the corporation, or any officer, director, stockholder or agent or limited liability company, or any member/manager or agent hold any interest in any other alcohol beverage license or permit in Wisconsin? **If yes, explain.**  Yes  No  
*Holidays Pub in Fox Crossing and Sheboygan.*
10. Does the applicant understand they must register as a Retail Beverage Alcohol Dealer with the federal government, Alcohol and Tobacco Tax and Trade Bureau (TTB) by filing (TTB form 5630.5d) before beginning business? [phone 1-877-882-3277]  Yes  No
11. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776]  Yes  No
12. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs?  Yes  No

**READ CAREFULLY BEFORE SIGNING:** Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000. Signer agrees to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants, or one member of a partnership applicant must sign; one corporate officer, one member/manager of Limited Liability Companies must sign.) Any lack of access to any portion of a licensed premises during inspection will be deemed a refusal to permit inspection. Such refusal is a misdemeanor and grounds for revocation of this license.

Contact Person's Name (Last, First, M.I.) <i>Grishaber, Scot T.</i>	Title/Member <i>President</i>	Date <i>1/6/2022</i>
Signature <i>Scot Grishaber</i>	Phone Number 	Email Address 

**TO BE COMPLETED BY CLERK**

Date received and filed with municipal clerk <i>1-17-22</i>	Date reported to council / board	Date provisional license issued	Signature of Clerk / Deputy Clerk
Date license granted	Date license issued	License number issued	



# City of Appleton

## Alcohol License Questionnaire

1. Name of Applicant: Scot Grishaber

2. Name of Business: Holidays Pub & Grill

(Check Applicable Box(s) to identify primary business activity)

- Restaurant
- Tavern/Night Club/Wine Bar
- Microbrewery/Brewpub
- Painting/Craft Studio
- Other (describe) \_\_\_\_\_

3. Address of Business: 3950 N. Richmond St.

4. Have you or any member of your organization ever been convicted of a misdemeanor or ordinance violation? Yes \_\_\_\_\_ No ✓

AND/OR been convicted of a felony? Yes \_\_\_\_\_ No ✓

If yes to either question, please explain in detail below:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

5. List all partners, shareholders or investors of your business. Include full name, middle initial and date of birth. Please use additional sheets if necessary.

<u>Scot</u>	<u>T</u>	<u>Grishaber</u>	<u>          </u> / <u>          </u> / <u>          </u>
First name	M.I.	Last name	Date of Birth
			/ /
First name	M.I.	Last name	Date of Birth
			/ /
First name	M.I.	Last name	Date of Birth
			/ /
First name	M.I.	Last name	Date of Birth
			/ /

6. Name of person/corporation you are buying the premise and equipment from?

Name: N/A

First name	Middle Initial	Last name
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Address: \_\_\_\_\_

City State ZIP

**7. What was the previous name and primary nature of the business operating at this location?**

Name: IBS - Valley Ins.

(Check Applicable Box(s) to identify primary business activity)

- Restaurant
- Tavern/Night Club/Wine Bar
- Microbrewery/Brewpub
- Painting/Craft Studio
- Other (describe) Insurance

**8. Was this premise licensed for alcohol sales/consumption during the past license year?**

Yes      If yes, please contact the Community and Economic Development Department at 832-6468 about obtaining a copy of an existing Special Use Permit and related requirements that may run with property.

No  If no, please contact the Community and Economic Development Department at 832-6468 about obtaining a Special Use Permit. A Special Use Permit may be required for your business activity prior to the issuance of a Liquor License, pursuant to the City of Appleton Zoning Ordinance.

**9. If alcohol sales were a previous use in this building, when did the operation cease?**

N/A months ago.

10. Seating capacity: Inside 400 Outside 25

11. Operating hours (Inside the building): 10am - 2am  
Operating hours (Outdoor seating areas): 10am - 2am

**12. Employees/Staff**

Number of floor personnel 15 Number of door checkers 0

**13. In general, state the size and operational details of the proposed establishment:**

- a. Gross floor building area of the premises to be licensed: 8000-12,000 square feet.
- b. Gross outdoor seating areas of the premises to be licensed: 300 square feet.
- c. Below, identify the operational details of the proposed establishment:

Bar/restaurant/Entertainment Center

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Scott Lushak  
Signature

1/17/2022  
Date

# Schedule for Appointment of Agent by Corporation / Nonprofit Organization or Limited Liability Company

Submit to municipal clerk.

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent. The following questions must be answered by the agent. The appointment must be signed by an officer of the corporation/organization or one member/manager of a limited liability company and the recommendation made by the proper local official.

To the governing body of:  Town  
 Village of Appleton County of Outagamie  
 City

The undersigned duly authorized officer/member/manager of Holidays Pub, LLC.  
(Registered Name of Corporation / Organization or Limited Liability Company)

a corporation/organization or limited liability company making application for an alcohol beverage license for a premises known as Holidays Pub and Grill  
(Trade Name)

located at 3950 N. Richmond St.

appoints Corey Bringman  
(Name of Appointed Agent)  
712 N. Hawthorne Dr. Appleton, WI 54915  
(Home Address of Appointed Agent)

to act for the corporation/organization/limited liability company with full authority and control of the premises and of all business relative to alcohol beverages conducted therein. Is applicant agent presently acting in that capacity or requesting approval for any corporation/organization/limited liability company having or applying for a beer and/or liquor license for any other location in Wisconsin?

Yes  No If so, indicate the corporate name(s)/limited liability company(ies) and municipality(ies).

Is applicant agent subject to completion of the responsible beverage server training course?  Yes  No

How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin? 37

Place of residence last year 712 N. Hawthorne Dr. Appleton, WI 54915

For: Holidays Pub, LLC.  
(Name of Corporation / Organization / Limited Liability Company)

By: Scott J. Grishaber  
(Signature of Officer / Member / Manager)

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

## ACCEPTANCE BY AGENT

I, COREY BRINGMAN, hereby accept this appointment as agent for the  
(Print / Type Agent's Name)

corporation/organization/limited liability company and assume full responsibility for the conduct of all business relative to alcohol beverages conducted on the premises for the corporation/organization/limited liability company.

Corey Bringman 1/6/2022  
(Signature of Agent) (Date)

Agent's age 37

712 N Hawthorne Dr Appleton WI 54915  
(Home Address of Agent)

Date of birth 01/06/1985

## APPROVAL OF AGENT BY MUNICIPAL AUTHORITY (Clerk cannot sign on behalf of Municipal Official)

I hereby certify that I have checked municipal and state criminal records. To the best of my knowledge, with the available information, the character, record and reputation are satisfactory and I have no objection to the agent appointed.

Approved on \_\_\_\_\_ by \_\_\_\_\_ Title \_\_\_\_\_  
(Date) (Signature of Proper Local Official) (Town Chair, Village President, Police Chief)



# Original Alcohol Beverage Retail License Application

(Submit to municipal clerk.)

For the license period beginning: 07/01/2021 ending: 06/30/2022  
(mm dd yyyy) (mm dd yyyy)

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

County of Outagamie Aldermanic Dist. No. \_\_\_\_\_  
 (if required by ordinance)

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

Applicant's Wisconsin Seller's Permit Number ●●●●●●●●●●	
FEIN Number ●●●●●●●●●●	
TYPE OF LICENSE REQUESTED	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$ 100.00
<input type="checkbox"/> Class C wine	\$
<input type="checkbox"/> Class A liquor	\$
<input type="checkbox"/> Class A liquor (cider only)	\$ N/A
<input type="checkbox"/> Class B liquor	\$
<input checked="" type="checkbox"/> Reserve Class B liquor	\$ 10,500.00
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$ 60.00
<b>TOTAL FEE</b>	<b>\$</b>

Name (individual / partners give last name, first, middle; corporations / limited liability companies give registered name)  
Foster Cocktail Company LLC

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

President / Member Last Name <u>Frawley</u>	(First) <u>Patrick</u>	(Middle Name) <u>Joseph</u>	Home Address (Street, City or Post Office, & Zip Code) <u>803. W Winnebago St. Appleton 54914</u>
Vice President / Member Last Name <u>Jones</u>	(First) <u>Zachary</u>	(Middle Name) <u>James</u>	Home Address (Street, City or Post Office, & Zip Code) <u>181 S Riverheath Way Apt. 403 Appleton 54915</u>
Secretary / Member Last Name <u>Witchell</u>	(First) <u>Stephan</u>	(Middle Name) <u>David</u>	Home Address (Street, City or Post Office, & Zip Code) <u>161 S Riverheath Way Apt 621 Appleton 54915</u>
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Agent Last Name <u>Frawley</u>	(First) <u>Patrick</u>	(Middle Name) <u>Joseph</u>	Home Address (Street, City or Post Office, & Zip Code) <u>803. W Winnebago St. Appleton WI 54914</u>
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

1. Trade Name Commodore Club Business Phone Number (920) 858-9352  
 2. Address of Premises 231/233 E College Ave Post Office & Zip Code ~~54914~~ 54911

3. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.)  
Alcohol will be served from the bar or carried to table by employee. It will be stored behind the bar on display or in cooler in prep area, as well as additional storage in secure room in the basement. It will be consumed on sidewalk cafe seating area as well as on the main floor of 231/233 E College Ave and the mezzanine on the 233 side of the building. Alcohol may occasionally be stored in kitchen for food prep.

4. Legal description (omit if street address is given above): \_\_\_\_\_  
 5. (a) Was this premises licensed for the sale of liquor or beer during the past license year? .....  Yes  No  
 (b) If yes, under what name was license issued? \_\_\_\_\_

6. Is individual, partners or agent of corporation/limited liability company subject to completion of the responsible beverage server training course for this license period? **If yes, explain** .....  Yes  No  
Patrick Frawley has a valid Operator's License for Appleton.
7. Is the applicant an employe or agent of, or acting on behalf of anyone except the named applicant? .....  Yes  No  
**If yes, explain.**
8. Does any other alcohol beverage retail licensee or wholesale permittee have any interest in or control of this business? **If yes, explain** .....  Yes  No  
Stephan Witchell owns Lawless Coffee Sturgeon Bay LLC and holds a class A+B license in Sturgeon Bay.
9. (a) Corporate/limited liability company applicants only: Insert state Wisconsin and date 6/19/2022 of registration.
- (b) Is applicant corporation/limited liability company a subsidiary of any other corporation or limited liability company? **If yes, explain** .....  Yes  No
- (c) Does the corporation, or any officer, director, stockholder or agent or limited liability company, or any member/manager or agent hold any interest in any other alcohol beverage license or permit in Wisconsin? **If yes, explain.**  Yes  No
10. Does the applicant understand they must register as a Retail Beverage Alcohol Dealer with the federal government, Alcohol and Tobacco Tax and Trade Bureau (TTB) by filing (TTB form 5630.5d) before beginning business? [phone 1-877-882-3277] .....  Yes  No
11. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776] .....  Yes  No
12. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? .....  Yes  No

**READ CAREFULLY BEFORE SIGNING:** Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000. Signer agrees to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants, or one member of a partnership applicant must sign; one corporate officer, one member/manager of Limited Liability Companies must sign.) Any lack of access to any portion of a licensed premises during inspection will be deemed a refusal to permit inspection. Such refusal is a misdemeanor and grounds for revocation of this license.

Contact Person's Name (Last, First, M.I.) <u>Frawley Patrick J</u>	Title/Member <u>Manager</u>	Date <u>02/18/22</u>
Signature <u>Patrick Frawley</u>	Phone Number 	Email Address 

**TO BE COMPLETED BY CLERK**

Date received and filed with municipal clerk <u>2-18-22</u>	Date reported to council / board	Date provisional license issued	Signature of Clerk / Deputy Clerk
Date license granted	Date license issued	License number issued	



# City of Appleton

## Alcohol License Questionnaire

1. Name of Applicant: Patrick J. Frawley

2. Name of Business: Foster Cocktail Company DBA Commodore Club  
 (Check Applicable Box(s) to identify primary business activity)

- Restaurant
- Tavern/Night Club/Wine Bar
- Microbrewery/Brewpub
- Painting/Craft Studio
- Other (describe) \_\_\_\_\_

3. Address of Business: 231/233 E College Ave Appleton WI 54911

4. Have you or any member of your organization ever been convicted of a misdemeanor or ordinance violation? Yes X No \_\_\_\_\_  
 AND/OR been convicted of a felony? Yes \_\_\_\_\_ No X

If yes to either question, please explain in detail below:

Zachary Jones - Negligent Operation of a Motor Vehicle & Operate with a Restricted Controlled Substance (not criminal offense)

5. List all partners, shareholders or investors of your business. Include full name, middle initial and date of birth. Please use additional sheets if necessary.

<u>Patrick</u>	<u>J</u>	<u>Frawley</u>	●	/	●	/	●	●
First name	M.I.	Last name						Date of Birth
<u>Zachary</u>	<u>J</u>	<u>Jones</u>	●	/	●	/	●	●
First name	M.I.	Last name						Date of Birth
<u>Stephan</u>	<u>D</u>	<u>Witchell</u>	●	/	●	/	●	●
First name	M.I.	Last name						Date of Birth
First name	M.I.	Last name						Date of Birth

6. Name of person/corporation you are <sup>leasing</sup>~~buying~~ the premise and equipment from?

Name: Amanda Furman (Furman Properties LLC)  
 First name Middle Initial Last name

Address: 1050 N. Lynndale Drive Appleton WI 54914  
 City State ZIP



7. What was the previous name and primary nature of the business operating at this location?

Name: Lois Brew

(Check Applicable Box(s) to identify primary business activity)

- Restaurant  
 Tavern/Night Club/Wine Bar  
 Microbrewery/Brewpub  
 Painting/Craft Studio  
 Other (describe) Coffee Shop / Cafe

8. Was this premise licensed for alcohol sales/consumption during the past license year?

Yes      If yes, please contact the Community and Economic Development Department at 832-6468 about obtaining a copy of an existing Special Use Permit and related requirements that may run with property.

No  If no, please contact the Community and Economic Development Department at 832-6468 about obtaining a Special Use Permit. A Special Use Permit may be required for your business activity prior to the issuance of a Liquor License, pursuant to the City of Appleton Zoning Ordinance.

9. If alcohol sales were a previous use in this building, when did the operation cease?

12+ months ago.

10. Seating capacity: Inside TBD Outside     

11. Operating hours (Inside the building): 3PM - 2AM  
Operating hours (Outdoor seating areas): 3PM - 9PM

12. Employees/Staff

Number of floor personnel 2-4 Number of door checkers 1

13. In general, state the size and operational details of the proposed establishment:

a. Gross floor building area of the premises to be licensed: 11,100 square feet.

b. Gross outdoor seating areas of the premises to be licensed: TBD square feet.

c. Below, identify the operational details of the proposed establishment:

Preparation and sale of craft cocktails, sale of craft  
beer and of wine. Preparation <sup>and sale</sup> of small simple dishes/  
appetizers. Host live music (small acts), host events/fundraisers.

Pat Young  
Signature

02/18/22  
Date

# Schedule for Appointment of Agent by Corporation / Nonprofit Organization or Limited Liability Company

Submit to municipal clerk.

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent. The following questions must be answered by the agent. The appointment must be signed by an officer of the corporation/organization or one member/manager of a limited liability company and the recommendation made by the proper local official.

To the governing body of:  Town  Village of APPLETON County of Outagamie  
 City

The undersigned duly authorized officer/member/manager of Foster Cocktail Company  
(Registered Name of Corporation / Organization or Limited Liability Company)

a corporation/organization or limited liability company making application for an alcohol beverage license for a premises known as Commodore Club  
(Trade Name)

located at 231/233 E College Ave Appleton WI 54911

appoints Patrick Joseph Frawley  
(Name of Appointed Agent)

803 W. Winnebago St. Appleton WI 54914  
(Home Address of Appointed Agent)

to act for the corporation/organization/limited liability company with full authority and control of the premises and of all business relative to alcohol beverages conducted therein. Is applicant agent presently acting in that capacity or requesting approval for any corporation/organization/limited liability company having or applying for a beer and/or liquor license for any other location in Wisconsin?

Yes  No If so, indicate the corporate name(s)/limited liability company(ies) and municipality(ies).

Is applicant agent subject to completion of the responsible beverage server training course?  Yes  No Holds Appleton Operator's License  
 How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin? 6 years 9 months

Place of residence last year 803 W Winnebago St. Appleton WI 54914

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

By: Pat J Frawley  
(Signature of Officer / Member / Manager)

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

### ACCEPTANCE BY AGENT

I, Patrick Joseph Frawley, hereby accept this appointment as agent for the  
(Print / Type Agent's Name)  
 corporation/organization/limited liability company and assume full responsibility for the conduct of all business relative to alcohol beverages conducted on the premises for the corporation/organization/limited liability company.

Pat J Frawley 02/18/2022 Agent's age             
(Signature of Agent) (Date)  
803 W Winnebago St Appleton WI 54914 Date of birth             
(Home Address of Agent)

### APPROVAL OF AGENT BY MUNICIPAL AUTHORITY (Clerk cannot sign on behalf of Municipal Official)

I hereby certify that I have checked municipal and state criminal records. To the best of my knowledge, with the available information, the character, record and reputation are satisfactory and I have no objection to the agent appointed.

Approved on \_\_\_\_\_ by \_\_\_\_\_ Title \_\_\_\_\_  
(Date) (Signature of Proper Local Official) (Town Chair, Village President, Police Chief)



*Community and Economic Development*

**Transfer of Special Use Permit #17-15  
231-233 East College Avenue  
Zoning Classification: CBD Central Business District**

**Date:** March 2, 2022

**Background:**

Special Use Permit #17-15 was approved for a restaurant with alcohol sales at 233-231 East College Avenue. The approval allowed the serving and consumption of alcohol in the following locations:

First Floor:	3,465 sq ft (City Assessor records)
Mezzanine Level:	420 sq ft (21' x 20' per SUP #17-15 development plan)
Upper Floor Meeting Space:	644 sq ft (15' x 14' and 31' x 14' per SUP #17-15 development plan)
Sidewalk café area:	(Condition #3 below)

Special use permit #17-15 runs with the land subject to the following conditions:

**On-going Condition of Special Use Permit #17-15:**

1. All applicable codes, ordinances, and regulations, including but not limited to Fire, Building, and Health Codes and the Noise Ordinance, shall be complied with.
2. The applicant shall apply for and receive approval of a Liquor License from the City Clerk prior to serving or consuming alcohol on the premise.
3. The serving and consumption of alcohol is limited to the first floor, mezzanine level, upper floor meeting space, and sidewalk cafe area, as identified on the attached maps. Any future expansions for the serving and/or consumption of alcohol may require a major or minor amendment request to this Special Use Permit, pursuant to Section 23-66(g) of the Municipal Code.
4. Prior to establishing the sidewalk cafe, the applicant must obtain a Street Occupancy Permit from the Department of Public Works. All aspects of the sidewalk cafe, including its location, size, and hours of operation for serving alcoholic beverages, shall comply with the regulations identified in Chapter 9, Article VI, Division 4, Sidewalk Cafes, of the Municipal Code.
5. Compliance with the plan of operation is required at all times. Changes to the plan of operation shall be submitted to the Community and Economic Development Department for review and approval.

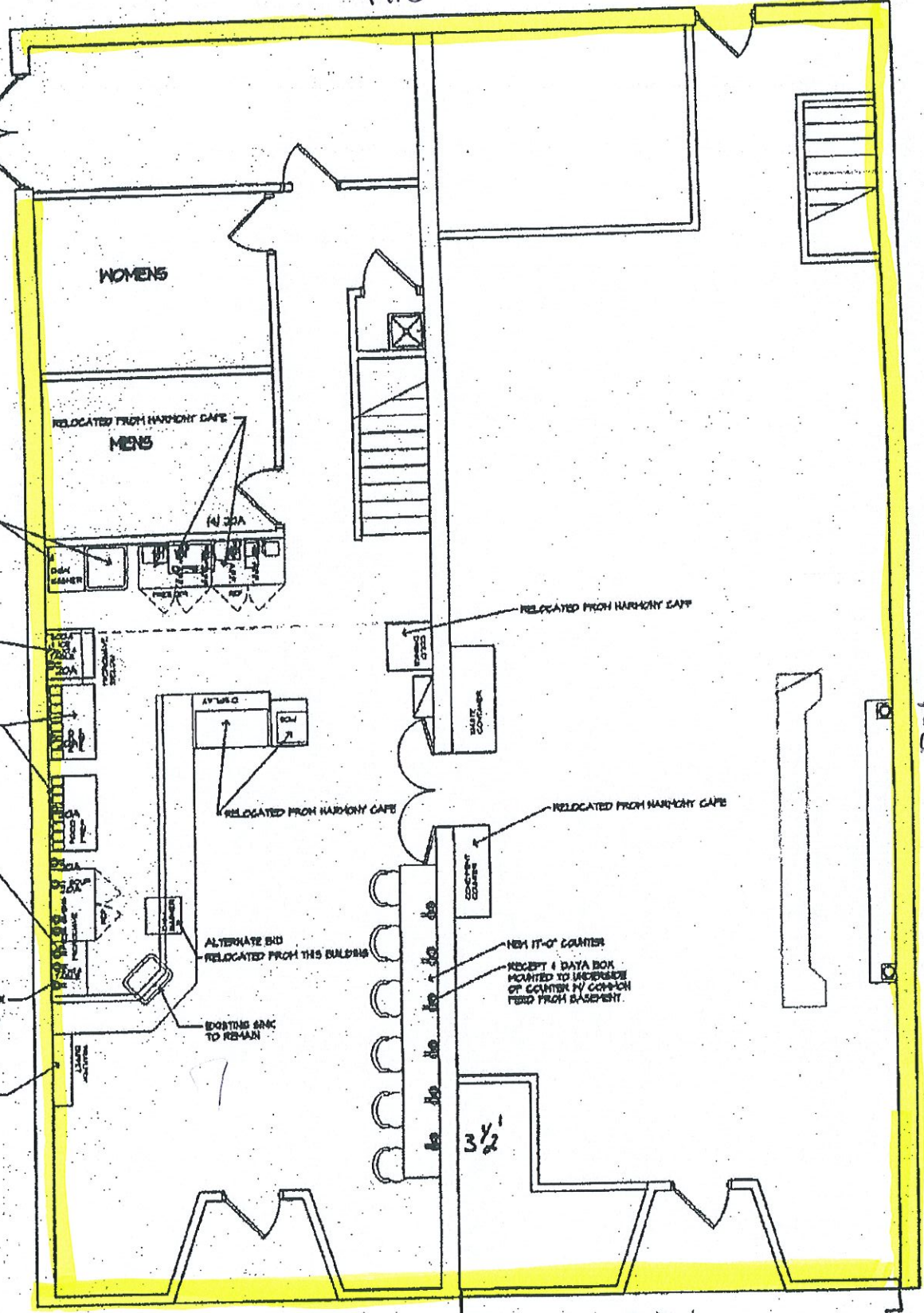
6. The use shall conform to the standards established in Chapter 9, Article III, Alcoholic Beverages, of the Municipal Code.

**Analysis:**

The information listed on Liquor License and Liquor License Questionnaire dated February 18, 2022, appears to be consistent with Special Use Permit #17-15. Therefore, Special Use Permit #17-15 is transferred to the applicant upon the issuance of the Liquor License to allow for the continued use of the premises for on-site alcohol consumption with food sales including a sidewalk café with alcohol consumption subject to the conditions of SUP #17-15 being complied with. (See above)

Please contact the Community and Economic Development Department at (920)832-6468 with any questions or any proposed changes to the development plan(s) or the alcohol license questionnaire.

49.5'



70'

1st Floor = 3465 S.F.

23'

REMOVE EXISTING BACK BAR

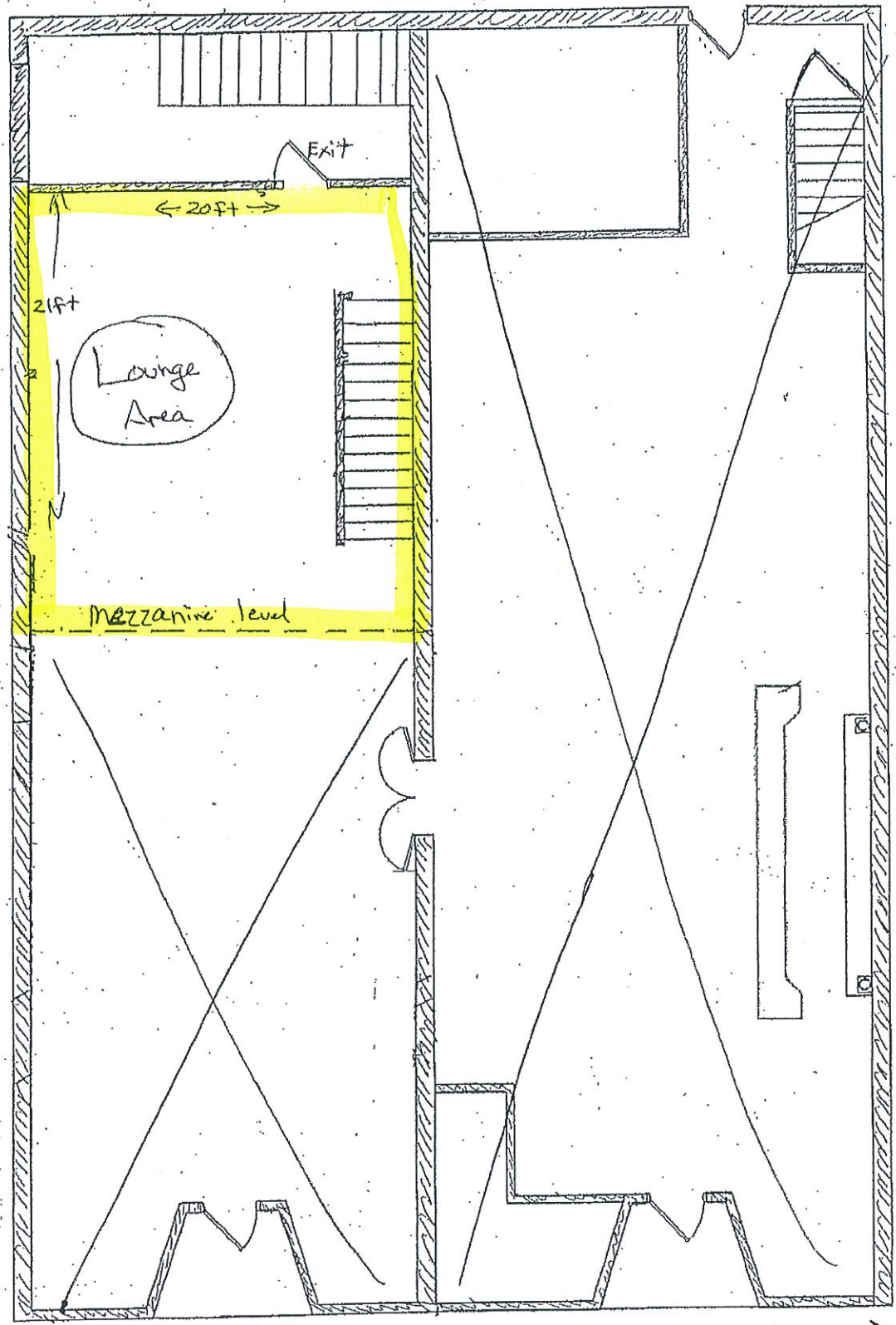
OPTION A FLOOR PLAN

NORTH



1/4" = 1'-0"





Mezzanine  
Level only  
21 x 20  
420 s.f.

Sidewalk  
Cafe  
Dimensions

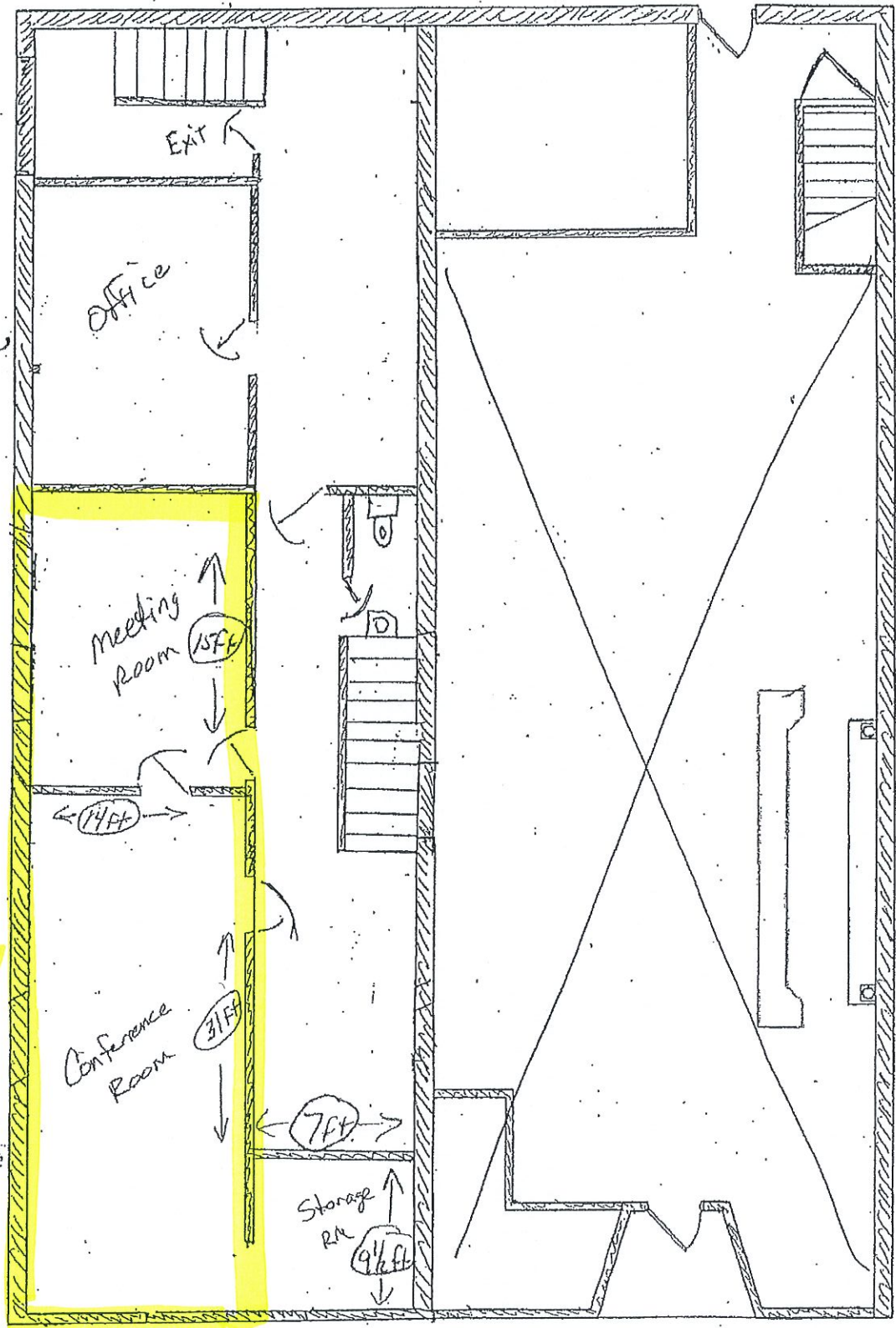
We currently  
have 4-5 tables  
so seating  
would be for  
20-30  
people

MEZZANINE LEVEL

Office = Private

Meeting Rm  
15 x 14

Conference Rm  
31 x 14



2ND Floor



"meeting community needs  
.....enhancing quality of life"

# REQUEST for Alcohol License Premise Amendment

<b>FEES ARE NON-REFUNDABLE</b>	Date Recv'd <u>2/15/22</u>
License Fee \$10.00/event	Acct: <b>CLCAGP</b>
Receipt <u>3212-3</u>	

## SECTION 1 – LICENSE INFORMATION

Name of Establishment <u>Sangria's mexican Grill</u>	
Address of Establishment <u>215 S memorial Dr. Appleton</u>	
Name of Agent <u>Sarah Gregory</u>	Phone Number

## SECTION 2 – PREMISE AMENDMENT

Please describe the change in premises:  
 \*A drawing/diagram of the proposed area must also be submitted with this application\*  
annual outdoor cinco de mayo celebration.  
We close off a section of the parking lot + have an  
outdoor taqueria + party

Is this change Permanent?  <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	If this is temporary please specify the reason for the amendment:  <u>annual party</u>
--	--

Please list the date(s) and time(s) that this temporary premise amendment will be utilized:  
May 5 11am-10pm    May 8 11am-8pm  
May 7 11am-10pm

## SECTION 3 – PENALTY NOTICE

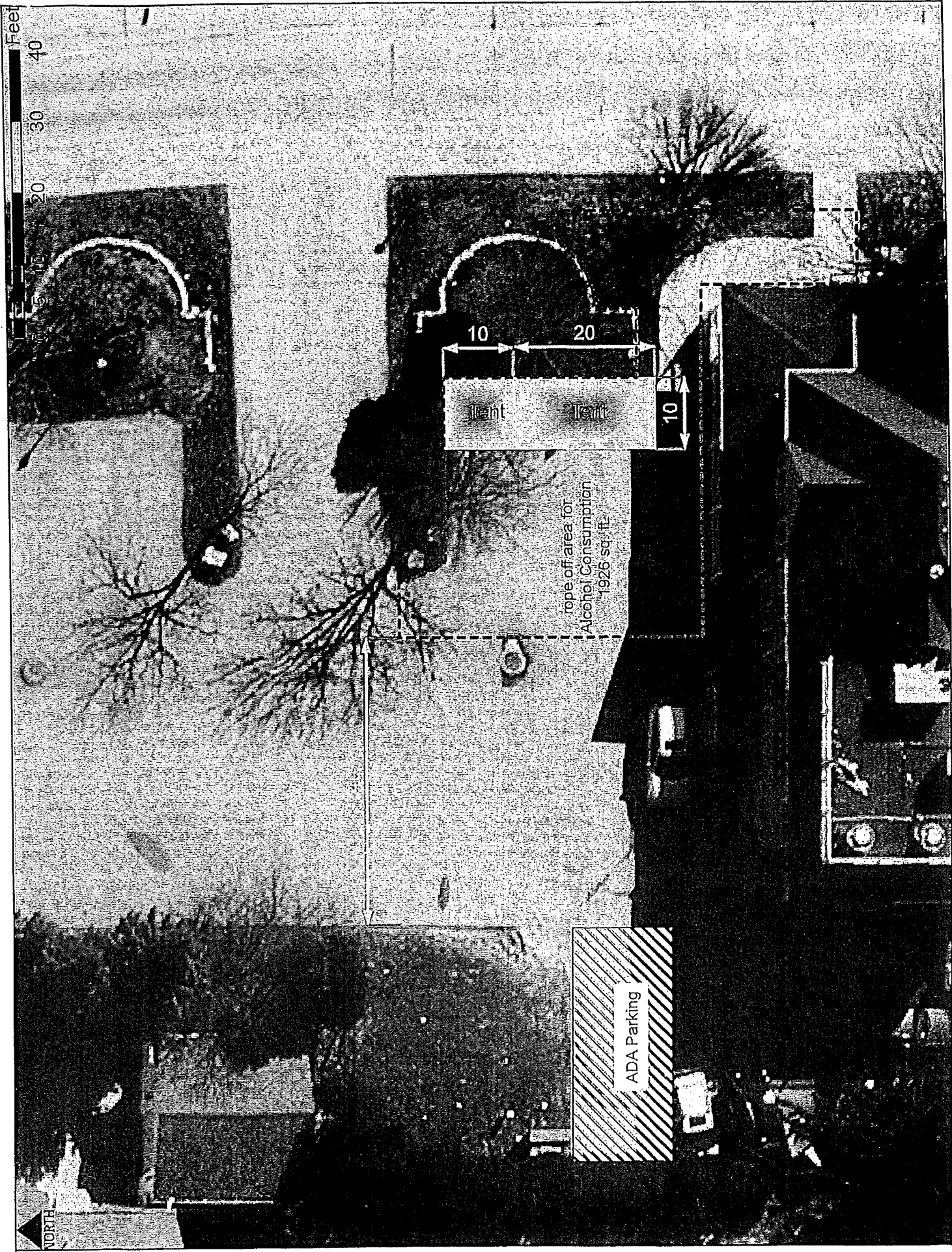
I certify that I am familiar with Section 9-52 of the Municipal Code of the City of Appleton and agree that any license granted under this application may be suspended for cause at any time by the Common Council.  
 Under penalty of law, I swear that the information provided in this application is true and correct to the best of my knowledge and belief.

Signature of Applicant: Sarah Gregory

## FOR OFFICE USE ONLY

Department	Approve	Deny	By	Reason
Comm. Dev.				
Finance				
Fire				
Health				
Inspections				
Police				
S&L <u>3-09-22</u>	Council <u>3-16-22</u>	Date Issued	Exp. Date	License Number





Feet

40

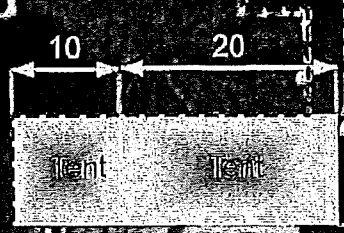
30

20

10

0

NORTH



scope of area for  
Alcohol Consumption  
1926 sq. ft.



### Schedule for Appointment of Agent by Corporation / Nonprofit Organization or Limited Liability Company

Submit to municipal clerk.

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent. The following questions must be answered by the agent. The appointment must be signed by an officer of the corporation/organization or one member/manager of a limited liability company and the recommendation made by the proper local official.

To the governing body of:  Town  Village of Appleton County of Outagamie  
 City

The undersigned duly authorized officer/member/manager of Walgreen Co.  
(Registered Name of Corporation / Organization or Limited Liability Company)

a corporation/organization or limited liability company making application for an alcohol beverage license for a premises known as Walgreens #07323

(Trade Name)  
located at 3330 E Calumet St, Appleton, WI 54915

appoints Garrette Kersten  
(Name of Appointed Agent)

641 Grove St Neenah, WI 54956  
(Home Address of Appointed Agent)

to act for the corporation/organization/limited liability company with full authority and control of the premises and of all business relative to alcohol beverages conducted therein. Is applicant agent presently acting in that capacity or requesting approval for any corporation/organization/limited liability company having or applying for a beer and/or liquor license for any other location in Wisconsin?

Yes  No If so, indicate the corporate name(s)/limited liability company(ies) and municipality(ies).  
Walgreens #11301, New London, WI - in process of agent change

Is applicant agent subject to completion of the responsible beverage server training course?  Yes  No

How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin? 40 years

Place of residence last year 641 Grove St, Neenah, WI 54956

For. Walgreen Co.  
(Name of Corporation / Organization / Limited Liability Company)

By: Susan Dwyer  
(Signature of Officer / Member / Manager)

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

#### ACCEPTANCE BY AGENT

I, Garrette Kersten, hereby accept this appointment as agent for the  
(Print / Type Agent's Name)

corporation/organization/limited liability company and assume full responsibility for the conduct of all business relative to alcohol beverages conducted on the premises for the corporation/organization/limited liability company.

Garrette Kersten 2-10-22 Agent's age             
(Signature of Agent) (Date)  
641 Grove St Neenah, WI 54956 Date of birth             
(Home Address of Agent)

#### APPROVAL OF AGENT BY MUNICIPAL AUTHORITY (Clerk cannot sign on behalf of Municipal Official)

I hereby certify that I have checked municipal and state criminal records. To the best of my knowledge, with the available information, the character, record and reputation are satisfactory and I have no objection to the agent appointed.

Approved on \_\_\_\_\_ by \_\_\_\_\_ Title \_\_\_\_\_  
(Date) (Signature of Proper Local Official) (Town Chair, Village President, Police Chief)

## Auxiliary Questionnaire Alcohol Beverage License Application

Submit to municipal clerk.

Individual's Full Name (please print) (last name)		(first name)		(middle name)	
Kersten		Garrette		James	
Home Address (street/route)		Post Office	City	State	Zip Code
641 Grove St			Neenah	WI	54956
Home Phone Number		Age	Date of Birth	Place of Birth	
●●●●●●		●	●●●●	●●●●	

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

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

which is making application for an alcohol beverage license.

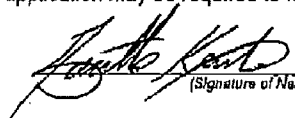
The above named individual provides the following information to the licensing authority:

1. How long have you continuously resided in Wisconsin prior to this date? 40 years
2. Have you ever been convicted of any offenses (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of any other states or ordinances of any county or municipality?  Yes  No  
If yes, give law or ordinance violated, trial court, trial date and penalty imposed, and/or date, description and status of charges pending. (If more room is needed, continue on reverse side of this form.)
3. Are charges for any offenses presently pending against you (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of other states or ordinances of any county or municipality?  Yes  No  
If yes, describe status of charges pending.
4. Do you hold, are you making application for or are you an officer, director or agent of a corporation/nonprofit organization or member/manager/agent of a limited liability company holding or applying for any other alcohol beverage license or permit?  Yes  No  
If yes, identify. (Name, Location and Type of License/Permit)
5. Do you hold and/or are you an officer, director, stockholder, agent or employe of any person or corporation or member/manager/agent of a limited liability company holding or applying for a wholesale beer permit, brewery/winery permit or wholesale liquor, manufacturer or rectifier permit in the State of Wisconsin?  Yes  No  
If yes, identify. (Name of Wholesale Licensee or Permittee) (Address By City and County)

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

Employer's Name	Employer's Address	Employed From	To
Walgreens	3330 E. Calumet St, Appleton WI	1-26-22	Current
Walgreens	981 Shawano St New London	11-19-20	1-25-22

**READ CAREFULLY BEFORE SIGNING:** Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

  
 (Signature of Named Individual)

Tab to navigate within form. Use mouse to check applicable boxes, press spacebar or press Enter.

Save

Print

Clear

Rec 2650-2

MUNICIPAL USE ONLY

# Application for Cigarette and Tobacco Products Retail License

Submit to municipal clerk.

Applicant's Wisconsin 15-digit Sales Tax Account Number  
 [Redacted]

← This must be issued in the same Legal Name of the licensee below.

License Number  
 Period Covered  
 Date of Issuance

Legal Name (corporation, limited liability company, partnership or sole proprietorship) <b>TEE TEES NACHOS LLC</b>			Federal Employer Identification No. (FEIN) [Redacted]		
Trade or Business Name (if different than Legal Name)			Telephone Number <b>(920) 515-4272</b>		
Business Address (License Location) <b>550 Morrison Street</b>		Business Located In <input checked="" type="checkbox"/> City <input type="checkbox"/> Village <input type="checkbox"/> Town		Business Telephone <b>(920) 515-4272</b>	
Municipality <b>Appleton</b>	State <b>WI</b>	Zip Code <b>54911</b>	of:		County
Mailing Address (if different than Business Address) <b>500 S Pierce Ave</b>		Municipality <b>Appleton</b>		State <b>WI</b>	Zip Code <b>54914</b>

Organization (check one)

- Sole Proprietor       Wisconsin Corporation – Enter date incorporated: \_\_\_\_\_
- Partnership       Out-of-State Corporation – Are you registered to do business in Wisconsin?     Yes     No
- Other (describe) \_\_\_\_\_

- Yes     No    1. Does the applicant understand that they must purchase cigarettes and tobacco products only from distributors, jobbers, or subjobbers, who hold a permit with the Wisconsin Department of Revenue?
- Yes     No    2. Does the applicant understand that they must obtain a Tobacco Products Distributor permit if purchasing untaxed tobacco products from an out-of-state company? (Tobacco Products Distributor permit is available from the Wisconsin Department of Revenue at 608-266-6701. See application form CTP-129, [revenue.wi.gov/dor/forms/ctp-129.pdf](http://revenue.wi.gov/dor/forms/ctp-129.pdf).)
- Yes     No    3. Does the applicant understand that they cannot purchase/exchange cigarettes or tobacco products from another retailer, including transferring existing stock to a new owner?
- Yes     No    4. Does the applicant understand that they must provide employees with tobacco sales training approved by the Wisconsin Department of Health Services? (<https://witobaccocheck.org>)
- Yes     No    5. Does the applicant understand that they may not sell, give or otherwise provide cigarettes/tobacco products and nicotine products to minors (including electronic cigarettes containing nicotine)?
- Yes     No    6. Does the applicant understand that they may not sell single cigarettes?
- Yes     No    7. Does the applicant understand that cigarette and tobacco products invoices must be kept on the licensed premises for two years from the date of the invoice and be available for inspection by the Wisconsin Department of Revenue/law enforcement and that failure to comply can result in criminal penalties, including loss of cigarettes/tobacco products?
- Yes     No    8. Does the applicant understand that only cigarettes and roll-your-own (RYO) tobacco products listed on the Wisconsin Department of Justice's website labeled "Directory of Certified Tobacco Manufacturers and Brands" at [www.doj.state.wi.us/dls/tobacco-directory](http://www.doj.state.wi.us/dls/tobacco-directory) may be sold in Wisconsin?

Cigarettes / Tobacco will be sold     over counter     through vending machine     both

**READ CAREFULLY BEFORE SIGNING:** Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the applicant. Applicant agrees to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, cannot be assigned to another. Any lack of access to any portion of a licensed premises during inspection will be deemed a refusal to permit inspection. Such refusal is a misdemeanor and grounds for revocation of this license. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

*[Signature]*  
(Officer of Corporation / Member / Manager of Limited Liability Company / Partner / Individual)

### Applicable Laws and Rules

This document provides statements or interpretations of the following laws and regulations in effect as of September 19, 2019: Sections 134.65, 134.66, 139.321, 139.79, 139.76, 995.10, and 995.12, Wis. Stats.





# Appleton Fire Department

2021 Annual Report



# Contents

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# Message from Fire Chief Hansen



It is my pleasure to present the 2021 Appleton Fire Department Annual Report. This report provides history, activities, and the resulting statistical data for the year. This data is continuously examined throughout the year and is utilized to enhance our service delivery to the community. We are privileged to serve each citizen and visitor in our community. We are also exceptionally proud to provide the highest level of fire, emergency medical, hazardous materials, water rescue, and technical rescue emergency response. In conjunction with our fire inspection, prevention, and public education programming, we strive each day to meet our mission of protecting the community with exceptional service.

The men and women of the Department responded to a historical high of 6,841 incidents during 2021. This represents an increase of 15.7% from last year. As our community continues to grow and our environment changes, our responsibility to provide the highest level of service is unyielding. The Appleton Fire Department, and the services we provide, will continue to adapt to effectively meet the challenges found within our community.

A handwritten signature in black ink, appearing to read 'J. Hansen'.

Jeremy J. Hansen, M.S., EFO, NRP  
Fire Chief

# Our Partners

A special 'thank you' goes out to our community partners:  
Outagamie County Community Emergency Response Team  
Outagamie County Communications Center  
Neenah-Menasha Fire Rescue  
Grand Chute Fire Department  
Gold Cross Ambulance  
American Red Cross



## Mission

With our partners, the Appleton Fire Department protects the community with exceptional service.

## Vision

Pursuing excellence and enhancing the quality of life in Appleton and our regional community.

## Core Values

Partnership  
Respect  
Integrity  
Diversity  
Excellence

9324's Crew



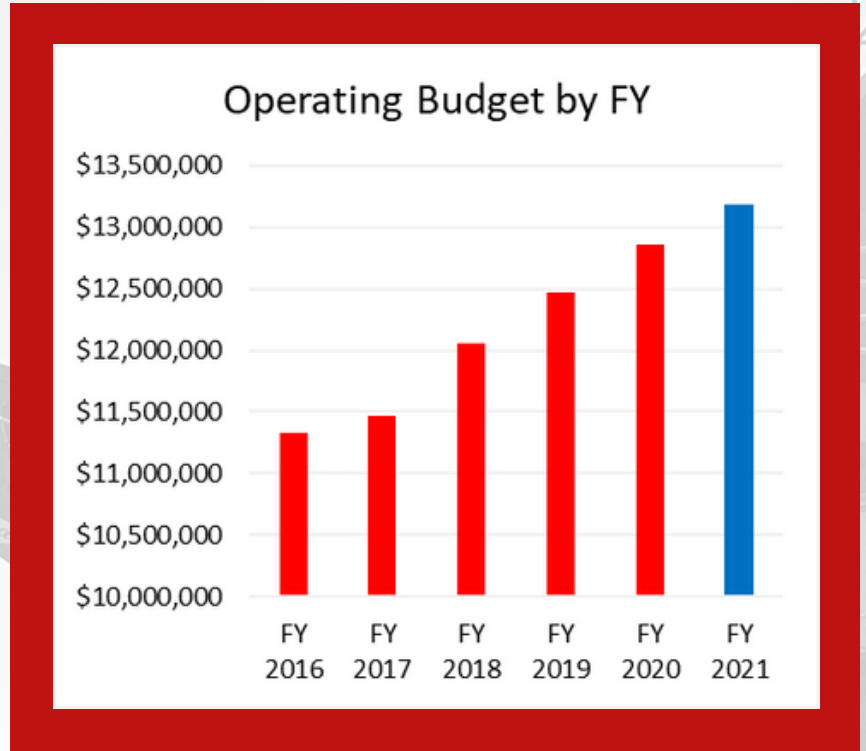
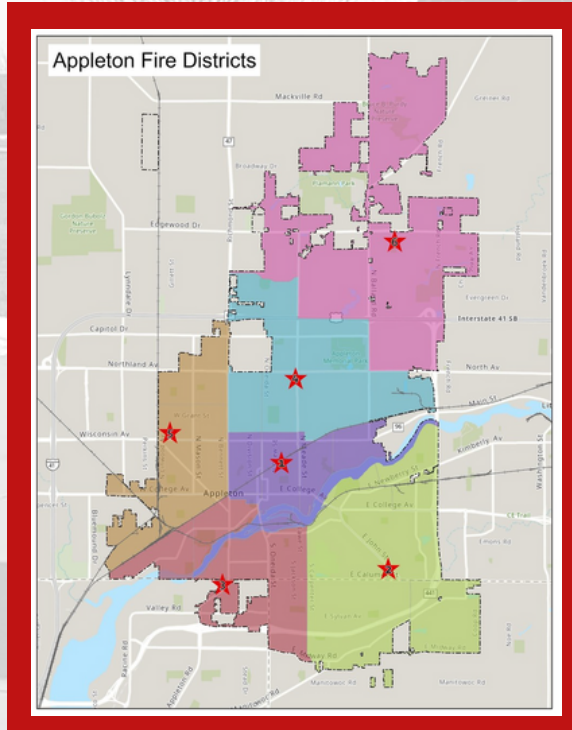
PRIDE.



# Fire Department Information

<b>Total Calls</b>	<b>6,841</b>	<b>Total False Alarms</b>	<b>540</b>
		Malicious False Alarms	12
		System Malfunction	166
<b>Total Fires</b>	<b>106</b>	Unintentional False Alarms	296
Structure Fires	59	Other False Alarms	66
Vehicle Fires	21		
Brush/Grass Fires	8	<b>Total Severe Weather/ Natural Disaster</b>	<b>4</b>
Other Fires	18		
<b>Overpressure/ Overheat</b>	<b>53</b>	<b>Total Special Incident Type</b>	<b>1</b>

<b>Total EMS and Rescue Calls</b>	<b>5,180</b>
EMS Calls	4,932
Vehicle Accidents with Injuries	112
Other Medical Incidents	136
<b>Total Hazardous Conditions</b>	<b>317</b>
<b>Total Service Calls</b>	<b>319</b>
<b>Total Good Intent Calls</b>	<b>321</b>



Operating Budget FY 2021		
Program Area	Cost (\$)	% of Budget
Fire Suppression	\$9,776,162	74.12%
Fire Prevention	\$1,297,018	9.83%
Emergency Medical Services	\$707,085	5.36%
Administration	\$571,993	4.34%
Technical Services	\$421,970	3.20%
Resource Development	\$246,202	1.87%
Special Operations	\$168,735	1.28%
<b>Total</b>	<b>\$13,189,165</b>	<b>100%</b>



# COVID-19

COVID-19 continued to bring challenges for AFD. After having their recruit graduation cancelled due to COVID-19, the new hires from 2020 were able to have a graduation at the end of their probationary period.

Public education engagement has still been reduced due to a number of cancelled events or ones with limited attendance. The department has had to seek out new ways to engage the public.

AFD continued to perform standby operations at the COVID-19 vaccination clinic. These personnel are available to provide immediate emergency medical service in the event a person requires it.

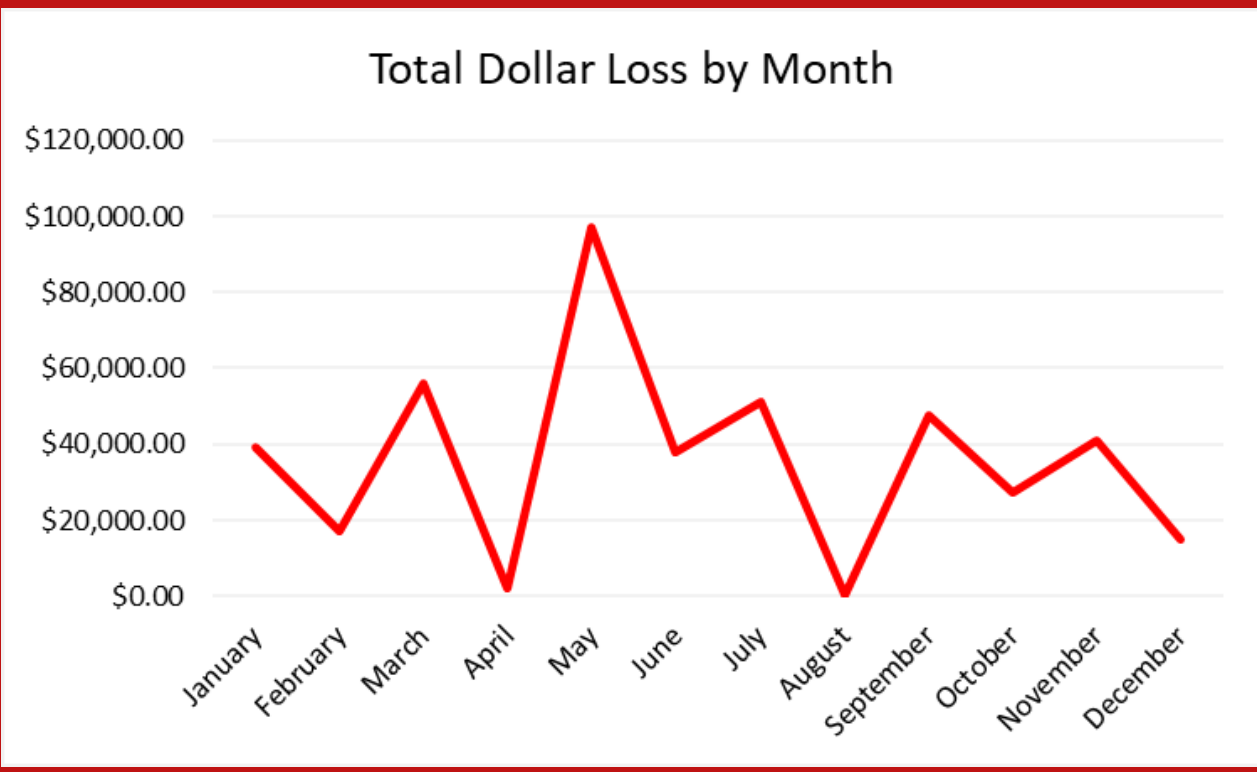
Of the 4,932 EMS calls the department responded to, 285, or 5.7%, were suspected or confirmed to have been COVID related.



2020 Recruit Probation Graduation



# Significant Events



**1/11 W. Summer St.**

Residential structure fire, no injuries, extensive damage to building and contents

**3/22 N. Woodridge Dr. Fire**

Residential structure fire originating in the garage, no injuries, estimated \$200,000 loss

**5/4 S. Mayfair St. Fatal Fire**

Residential structure fire, lone occupant perished in the fire, extensive damage to building and contents

**6/28 S. Eric Dr. Fire**

Residential structure fire, no injuries, extensive damage to building and contents, estimated \$100,000 loss

**9/2 E. Fremont St. Hazmat**

Hazardous materials situation at St. Elizabeth hospital

**11/7 S. Weimar St Fire**

Residential structure fire, no injuries, estimated \$60,000 in damage

**11/23 N. Division St. Fire**

Residential structure fire, no injuries, estimated \$60,000 in damage





# Fire Suppression Division



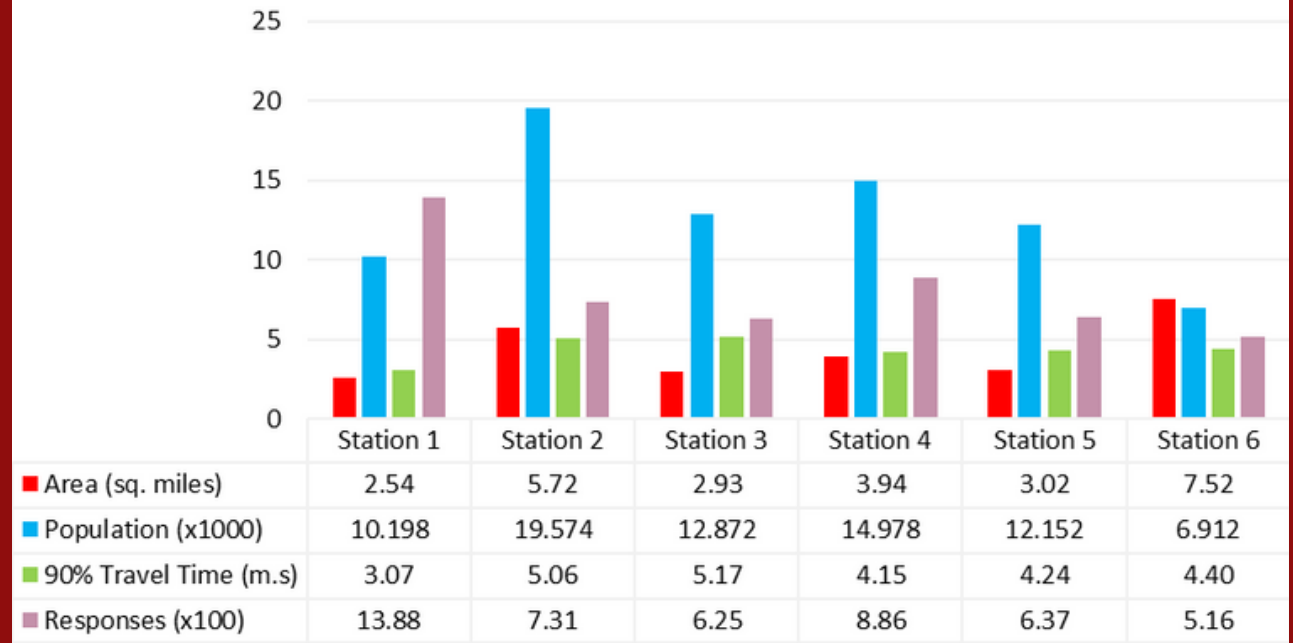
Ryan Weyers  
Deputy Chief

The Appleton Fire Department Suppression Division provides 24/7/365 emergency service to the City of Appleton residents along with regional partnerships for automatic aid for fire response with Grand Chute and mutual aid with agencies in Outagamie, Winnebago, and Calumet Counties. The Fire Suppression Division of the Appleton Fire Department is the largest division of the department and is under the direct supervision of Deputy Fire Chief Ryan Weyers. This division is charged with enhancing the quality of life to our community by providing a safe and healthy environment through our response. The Appleton Fire Department operates out of six strategically located fire stations throughout the city. Each of these stations has a designated fire district.

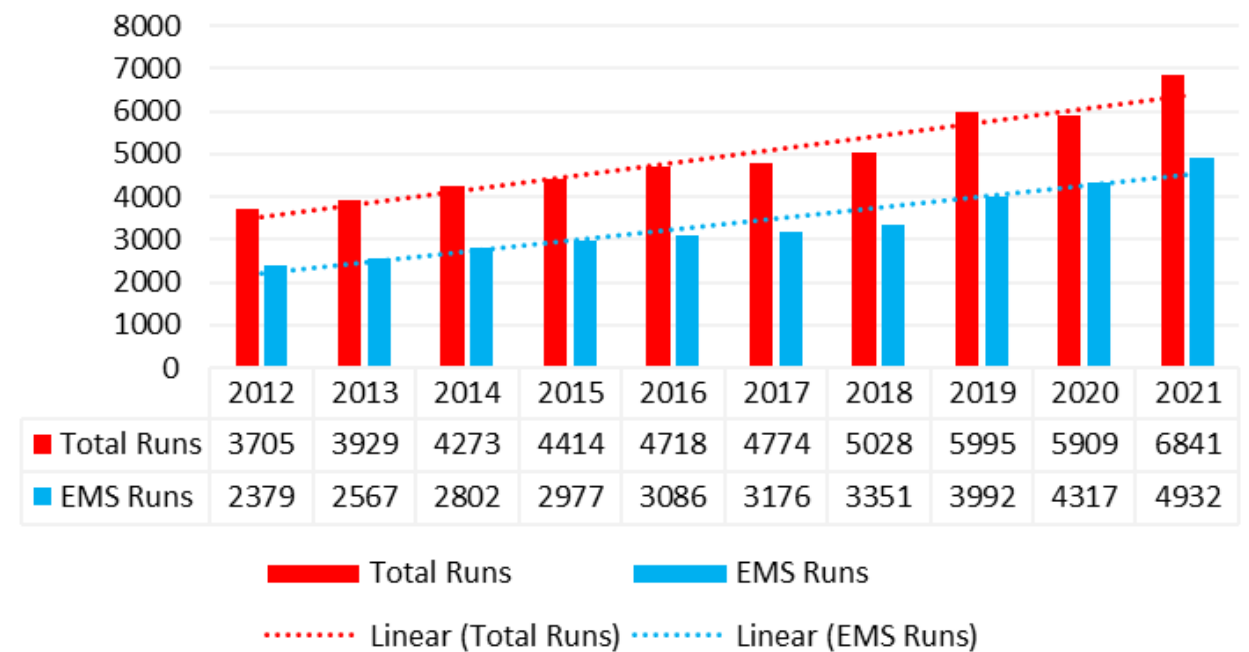
The department is organized into five Engine companies, one Ladder company, one Quint company, and one Command vehicle. Trained personnel also cross-staff a technical rescue unit, two water rescue boats, a rapid response light rescue unit, and a regional hazardous materials unit. The Appleton Fire Department also utilizes management staff to serve additional command roles during emergency incidents.



### Fire District Information



### 10 Year Call Volume





# Special Operations



Doug Vrechek  
Battalion Chief

Legislation for the State of Wisconsin's Urban Search and Rescue Team has passed with plans in progress to rebuild that program. The department was very active on this team previously. Partnerships on the hazardous materials team with Oshkosh and Green Bay are growing and shared resources are beneficial for everyone.



# Resource Development

In 2021, four recruit firefighters graduated from a six-week recruit school and are assigned to response vehicles performing at high levels. The fire department implemented a new tracking platform for data collection of all training. This allows us to manage our time and identify any shortfalls in our training program. A new training cooperative with training officers from other area fire departments has allowed us to schedule joint training sessions and bring in speakers and presentations that the AFD would not be able to do on our own, including a leadership presentation from author, Mike Abrashoff. In 2021, all attack fire hose was brought up to NFPA national standards. This upgrade ensures confidence that our fire hose is dependable when fire crews are inside a burning building.

- Total Training Hours: 26,861.55
- Average Hours per Person: 298.46
- Total Categories: 135
- Total Training Entries: 16,923
- Average Time per Training: 1hr 35min



Rescue Taskforce  
Training



Relief Driver  
Graduation



# Emergency Medical Service

This year, the department selected a new medical director. Dr. Nels Rose, of the Aurora Advocate system, has been visible in many training sessions and has an active role in the continued advancement of EMS at the department. Our Tactical EMS SWAT medics added another paramedic to the team to help with the significant increase in calls for this service. That partnership with Appleton Police Department continues to flourish.



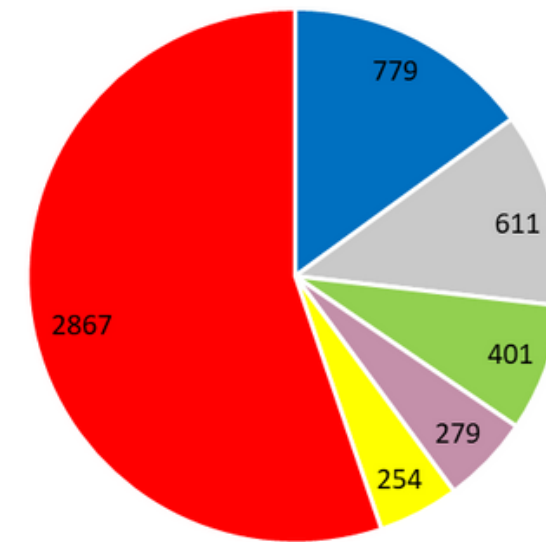
Recruit Water Rescue Training



Technical Rescue Training

## Emergency Medical Dispatch Reasons

- Falls
- Breathing Problem
- Sick Person
- Convulsions/Seizure
- Unconscious/Near Fainting
- Other





# Prevention & Public Education

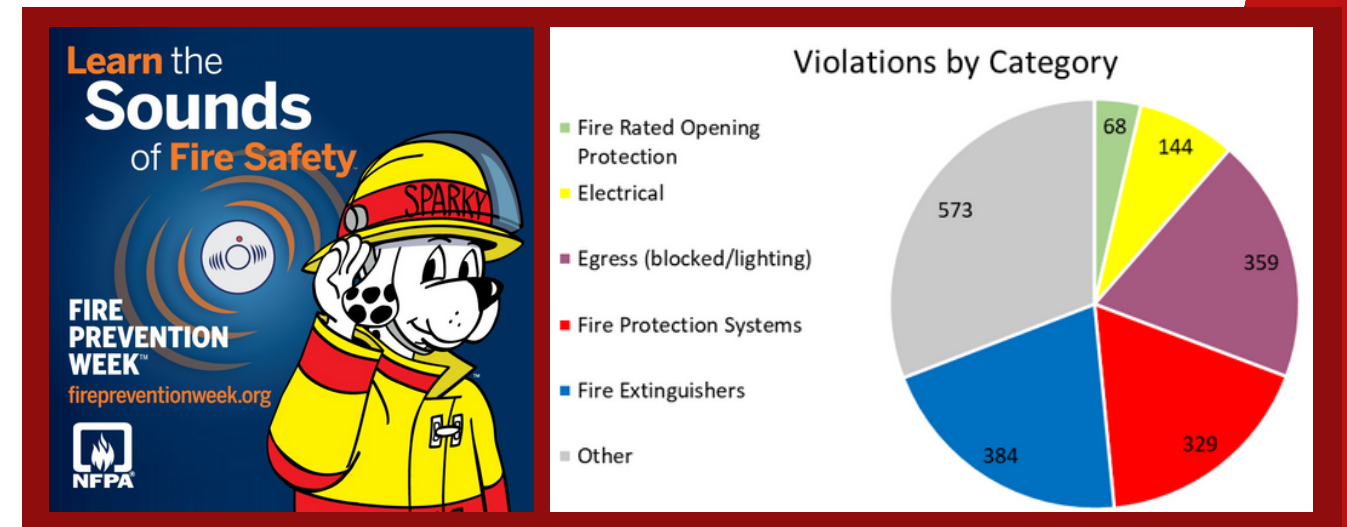


**Derek Henson**  
Battalion Chief

The Fire Prevention Division had an improved year in 2021. Due to COVID-19, public education events were mostly cancelled again; however, inspections resumed as mostly normal. Violations increased sharply this year as businesses worked to recover from their own COVID-19 shutdowns. Prevention staff was tasked with being generous with time to correct violations without allowing unsafe conditions to continue unabated. Work continued on a community risk assessment. As training opportunities arose throughout the state, Prevention staff were able to attend more training in 2021. This provided great opportunities to network with staff from different jurisdictions and to sharpen their investigation and inspection skills. Shift inspectors investigated 30 fires in 2021.



Fire Prevention staff attended the 2021 WSFIA Conference





# Awards & Personnel Updates

Ben Lee



2021 Employee of the Year

Kelly Wheeler



Citizen Award of Merit



2021 Recruit Graduation

## New Hires

Firefighter Cory Asimus  
 Firefighter Jordan Augsburger  
 Firefighter Troy Carpenter  
 Firefighter Devin Halbach

## Retirements

Driver/Engineer Jay Kjorlien  
 Driver/Engineer Steve Kulas  
 Driver/Engineer Tim Blob

## In Memoriam

James Coonan  
 Lawrence Reinke  
 Robert W. Fischer, Jr.

Robert Tuchscherer  
 Louis Gerarden  
 Charles Knuppel

Recognition Award  
 Matt Gludemans  
 Jeremiah Detert  
 Cody Peabody

## Promotions

Driver/Engineer Andrew Dobbe  
 Driver/Engineer Andrew Lane  
 Driver/Engineer Andrew Webb



# Fire Department Staff

**Fire Chief:**

Jeremy Hansen

**Deputy Chief:**

Ryan Weyers

**Assistant to the Fire Chief:**

Sharon Bochtrup

**Support Staff:**

Training & Resource Development Specialist  
 Fire Protection Engineer  
 Fire Inspector  
 Administrative Assistant  
 Clerical Assistant  
 Central Equipment Agency Mechanic

Ed King  
 Steve Patterson  
 Jose Saldivar  
 Nancy Wilcox  
 Sally Dickinson  
 Paul Rynish

**Battalion Chiefs:**

Shannon Young  
 Ethan Kroll  
 Jeff Felauer  
 Doug Vrechek  
 Derek Henson

Jeremy Hotynski  
 Michelle Bialas  
 Bill Calaway  
 Todd Bean  
 Greg Cullen  
 Jerry Borski  
 Corby Henkel

Scott Karpinski  
 Michelle Neeck-Lappen  
 Kraig Kasten  
 Gary Awe  
 Ben Lee  
 Dave Reigles  
 Andy Patz

**Captains:**

Mike Woodzicka  
 Mike Mueller  
 Joe Scott  
 Rick James  
 Jason Lee  
 Scott Pelkin

Tim Meyer  
 Jake Kirchner  
 Steve Unruh  
 Michael Becker  
 Adam Galica  
 Justin Brown

Matt Gerrits  
 Mike Hietpas  
 Mark Deslauriers  
 Brad Brautigam  
 Adam Hansen  
 Ryan Lee  
 Tyler Zunker

**Driver Engineers:**

Darrin Butry  
 Bryan Knauer  
 Brian Cook

Kelly Lynch  
 Andrew Dobbe  
 Andrew Lane  
 Andrew Webb

**Firefighter/Inspectors:**

Jeremiah Detert  
 Nate Milhans  
 Tim Damrow  
 Keegan Murphy  
 Bart Rakun  
 Eric Winger

Casey Kostechka  
 Michael Wirtz  
 Tyler Mickelson  
 Riley Kubisiak  
 Steve Jahr  
 Jordan Ross  
 David Hammer

Tyler Rusch  
 Lukas Syrjamaki  
 Jake Laack  
 Ryan Monaghan  
 Sam Felauer  
 Cory Asimus  
 Jordan Augsburger

**Firefighters:**

Tim Lutz  
 Chad Johnson  
 Todd Hendricks  
 Mike Wiese  
 Troy Kinley  
 Matt Dercks  
 Adam Paiser  
 Joe Kozikowski  
 Chris Britzke

Travis Nate  
 Matt Gloudemans  
 Cody Walesh  
 Bryce Sternhagen  
 Kyle Zuleger  
 Cody Peabody  
 Ilex Smith  
 Tim Verstegen  
 Tyler Linehan  
 Cole Nelson

