

**LICENSE REVIEW COMMITTEE
TUESDAY – DECEMBER 11, 2012
MONONA CITY HALL
LARGE CONFERENCE ROOM
4:00 P.M.**

1. Call To Order
2. Roll Call
3. Approval of Minutes of November 13, 2012
4. Appearances
5. Unfinished Business
6. New Business
 - A. Consideration Of 2012/2013 Operator’s License Application For Austen R. Williams, 58 Northridge Terrace, Apartment #202, Madison, Wisconsin 53714.
 - B. Consideration Of 2012 Temporary Class “B” Fermented Malt Beverage and “Class B” Wine Retailer’s License Application For The Aldo Leopold Nature Center, President Kathe C. Conn, 12003 West County M, Evansville, Wisconsin 53536, For The Period Of December 20, 2012.
 - C. Consideration Of 2012/2013 “Class A” Liquor License Application For Kwik Trip, Inc., d/b/a Tobacco Outlet Plus #531, 6300 Monona Drive, Suite 2, Monona, Wisconsin, 53716, Agent Judith A. Crusan, 1525 Fairview Drive, Prairie du Sac, Wisconsin, 53578.
7. Miscellaneous Business
8. Adjournment

NOTE: Upon reasonable notice, the City of Monona will accommodate the needs of disabled individuals through auxiliary aids or services. For additional information or to request this service, contact Joan Andrusz at (608) 222-2525 (not a TDD telephone number), FAX: (608) 222-9225, or through the City Police Department TDD telephone number 441-0399.

The public is notified that any final action taken at a previous meeting may be reconsidered pursuant to the City of Monona ordinances. A suspension of the rules may allow for final action to be taken on an item of New Business.

It is possible that members of and a possible quorum of members of other governmental bodies of the municipality may be in attendance at the above stated meeting to gather information or speak about a subject, over which they have decision-making responsibility. Any governmental body at the above stated meeting will take no action other than the governmental body specifically referred to above in this notice.

**CITY OF MONONA
LICENSE REVIEW COMMITTEE
TUESDAY – November 13, 2012
MINUTES**

1. Call to Order: Chair Wood called the meeting to order at 4:00 P.M.

2. Roll Call:

Committee Members Present: Doug Wood, Jim Pflasterer and John Klinzing

Excused: Scott Warner and Wayne Kimmell

Staff Present: Police Chief Ostrenga filling in for Clerk Andrusz

3. Minutes: A motion was made by Klinzing and a second by Pflasterer to approve the minutes of the October 9, 2012 meeting. Motion approved unanimously.

4. Appearances: none

5. Unfinished Business none

6. New Business

6A. Consideration of 2012/2013 Operator's License Application for Jeremy B. Brown, 5012 Camden Road, Madison, Wisconsin 53716.

Police Chief Ostrenga, Speedway Store Manager Michael Stacey and Jeremy B. Brown provided information and answered member's questions regarding Mr. Brown's Operator's license application. After discussion:

A motion was made by Klinzing and a second by Pflasterer to approve the 2012/2013 Operator's License for Jeremy B. Brown, 5012 Camden Road, Madison, Wisconsin 53716, was carried.

Police Chief Ostrenga presented Mr. Brown his license.

7. Miscellaneous Business

There was no Miscellaneous Business

8. Adjournment Motion was made by Klinzing and seconded by Pflasterer to adjourn. Motion approved unanimously at 4:08 P.M.

*Walter Ostrenga
Police Chief*



5211 SCHLUTER ROAD ☐ MONONA, WI 53716-2598
CITY HALL (608) 222-2525
FAX (608) 222-9225
<http://www.mymonona.com>

November 15, 2012

Mr. Austen R. Williams
58 Northridge Terrance, Apartment #202
Madison, Wisconsin 53714

Dear Mr. Williams:

This letter is to inform you that following review by the Monona Police Department your application for an Operator's license for 2012/2013 is being denied. This denial is based on Underage Alcohol violations within the last five years that you did not reveal on your application.

If you so desire, you may request reconsideration of your Operator's license application by the License Review Committee at its next regularly scheduled meeting on Tuesday, December 11, 2012, at 4:00 p.m. in the City Hall Large Conference Room, 5211 Schluter Road, Monona, Wisconsin. At such a reconsideration hearing, you may present evidence and testimony as to why your license should be granted.

You may wish to have your employer attend the review hearing with you. Employer input gives the License Review Committee important information to assist in their decision-making process.

If you wish to appear before the License Review Committee, please contact me at (608) 222-2525 by December 3, 2012.

Sincerely,

Joan Andrusz
City Clerk

Cc: License Review Committee
Walter Ostrenga, Police Chief
Pizza Oven

CITY OF MONONA - OPERATOR LICENSE APPLICATION

Pursuant to Section 23.01(8), subject to limitations imposed by as 125.17 and 125.68(2)

FEES ARE NON-REFUNDABLE

Operator's - Regular - \$40.00

Operator's - Provisional - \$15.00

Operator's - Two Year - \$65.00

Operator's - Temporary - \$10.00

New License Renewal License

This license expires on June 30, 20 13

Full Name of Applicant: <u>Austen R Williams</u>	Sex: <input checked="" type="radio"/> Male / <input type="radio"/> Female
Street Address: <u>58 Northridge Ter. apt. #202</u>	
City: <u>Madison</u>	State: <u>WI</u> Zip Code: <u>53714</u>
Date of Birth: <u>[REDACTED]</u>	Telephone Number: <u>[REDACTED]</u>
Drivers License Number and State: <u>[REDACTED]</u>	

How long have you continuously resided in Wisconsin? 22 years

Place of employment as an Operator: The Pizza Oven Telephone: 608-222-8722

Have you registered for the Alcohol Awareness Program? (Circle One) Yes / No Date of Class: 11/07/12
Have you completed the Alcohol Awareness Program? (Circle One) Yes / No Date Completed: 11/07/12

Have you ever been convicted of a misdemeanor or felony in the past 5 years? (Circle One) Yes / No
If yes, please explain: Battery - Transit operator, Criminal Damage property, Disorderly Cond
Are there any pending criminal charges against you? (Circle One) Yes / No
If yes, please explain: _____
Are there any pending drug/alcohol related offenses against you? (Circle One) Yes / No
If yes, please explain: _____
Have you been convicted of drug/alcohol related offenses in the last 5 years? (Circle One) Yes / No
If yes, please explain: Battery Transit operator

ANY FALSE OR MISSING INFORMATION ON THIS APPLICATION WILL RESULT IN DENIAL OF YOUR OPERATOR'S LICENSE. The undersigned affirms that he/she made complete and true answers to each question, and understands his/her past record will become a part of this application. I understand that I am subject to a driver's license check, a local police records check, and a criminal history background check by the City of Monona Police Department. I give permission to make my juvenile records available for this application.

Subscribed and sworn before me
this 9th day of November, 20 12

Jean Andrusz Signature of Applicant: Austen Williams
Notary Public

My Commission expires: 9-20-15

Police Department Review: Recommend Approval Recommend Denial Review

Reason for denial, if not recommended: DID NOT DISCLOSE PRIOR UNDER AGE

Signature of Police Chief: [Signature] Date: 11/15/12
Approval of City Clerk: [Signature] Date: _____

License No. Issued: Provisional # 31 Operator # _____ Date Issued: Provisional 11-9-12 Operator _____

CITY OF MONONA, COUNTY OF DANE
APPLICATION FOR TEMPORARY CLASS "B" / "CLASS B" RETAILER'S LICENSE

See Additional Information on reverse side. Contact the City Clerk at (608) 222-2525 if you have questions.



FEE: \$10.00

Application Date: 12/4/12

The named organization applies for (Check appropriate box(es).)

A Temporary Class "B" license to sell fermented malt beverages at picnics or similar gatherings under s. 125.26(6) Wis. Stats.

A Temporary "Class B" license to sell wine at picnics or similar gatherings under s. 125.51(10), Wis. Stat.

at the premises described below during a special event and agrees to comply with all law, resolution, ordinances and regulations (state, federal or local) affecting the sale of fermented malt beverages and/or wine if the license is granted.

1. EVENT

(a) List name of the event Aldo After Dark
(b) Dates of event 12/20/2012
(c) Full name and address of manager or person(s) in charge of event: (PERSON(S) SUBJECT TO A POLICE BACKGROUND CHECK)
Name Paul Houseman Date of Birth [REDACTED] Phone 608-221-0404
Address 330 Femrite Dr monona WI 53716
(Street) (City) (State) (Zip)
Name _____ Date of Birth _____ Phone _____
Address _____
(Street) (City) (State) (Zip)

2. ORGANIZATION (check appropriate box) Bona fide Club Church Lodge/Society Veteran's Organization Fair Association

(a) Name Aldo Leopold Nature Center
(b) Address 330 Femrite DRIVE Monona WI 53716
(Street) (City) (State) (Zip)
(c) Date Organized 4/18/1994 If corporation, give date of incorporation _____
(d) Full names and addresses of all officers, including date of birth:
President Terry Kelly, 401 Charmany DR Suite 200 Madison, WI 53719, [REDACTED]
Vice President Howard Mead, 6010 South Highland Ave, Madison, WI 53705 [REDACTED]
Secretary Anne Res, 150 East Gilman St, Madison, WI 53703 [REDACTED]
Treasurer Charles Carpenter, 3445 Crestwood Dr, Madison WI 53705 [REDACTED]

3. LOCATION OF PREMISES WHERE BEER AND/OR WINE WILL BE SOLD

(a) Address Aldo Leopold Nature Center 330 Femrite Dr Monona WI 53716
(Street) (City) (State) (Zip)
(b) Do premises occupy all or part of building? No
(c) If part of building, describe fully all premises covered under this application, which floor or floors, or room or rooms, license is to cover:
Fermented beverage service will be limited to a closed off bar area with guests allowed access to the bar area and main room.

4. NAMES OF LICENSED BEVERAGE SERVERS (A Licensed Operator must be on premises at all times when beer or wine is served.)

Zachary Billings Mandy O'Connell Ben Wilke

5. ANTICIPATED NUMBER OF ATTENDEES 150

DECLARATION

The Officer(s) of the organization, individually and together, declare under penalties of law that the information provided in this application is true and correct to the best of their knowledge and belief.

Officer [Signature]
(Signature/Date)

Date Filed with Clerk 12-5-12 Date Reported to License Review Committee 12-11-12

Police Chief Approval _____ Date Granted by Council _____ License No. _____

Joan Andrusz

From: William S. Cole - Work <wcole@execpc.com>
Sent: Thursday, November 29, 2012 12:06 PM
To: KAMartin@foley.com
Cc: Patrick Marsh; Joan Andrusz; Walter Ostrenga
Subject: Aldo Leopold Nature Center

Kevin,

I have reviewed your email concerning Aldo Leopold's desire to apply for temporary beer licenses. I would agree that they would likely meet the legal qualifications for such licenses. It will boil down to a policy decision of the city council as to whether such licenses are appropriate given the proximity to Tellurian, Woodland Park and other factors. If ALNC wishes to apply for such licenses it should coordinate with the city clerk, Joan Andrusz. Given the policy considerations involved I would suggest any application include detailed information concerning Aldo Leopold's intentions, such as:

1. How many events? You will need to state the dates of the events for the temporary licenses.
2. The times of day the events will occur.
3. The extent of the "premises" (i.e. will it be limited to easily secured areas of the center, outdoors, etc).
4. Number of people that will be in attendance.
5. Specific plans to ensure the beer is dispensed/consumed in a controlled manner (i.e. physical security, security personnel, etc.)
6. Specific plans to address parking, noise mitigation, etc.

As to the private events ALNC intends to hold, I would agree the lease permits it to hold fundraising events and rent out facilities. The lease does not, however, contemplate the dispensing of alcohol on the leased premises without the city's consent. ALNC will need to provide the city with specific information as to what it proposes concerning these events (see above) as well as what type of events are planned.

As always, feel free to call me if you wish to discuss this further.

Bill

William S. Cole

2945 Triverton Pike Drive, Suite 101
Fitchburg, Wisconsin 53711-7508
608/221-0079
608/221-7335 FAX
wcole@execpc.com

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ORIGINAL ALCOHOL BEVERAGE RETAIL LICENSE APPLICATION

Submit to municipal clerk.

For the license period beginning Upon approval 20 ;
 ending June 30 20 13

TO THE GOVERNING BODY of the: Town of }
 Village of } Monona
 City of }

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

1. The named INDIVIDUAL PARTNERSHIP LIMITED LIABILITY COMPANY
 CORPORATION/NONPROFIT ORGANIZATION

hereby makes application for the alcohol beverage license(s) checked above.

2. Name (individual/partners give last name, first, middle; corporations/limited liability companies give registered name): ► Kwik Trip, Inc.
1626 Oak St., P.O. Box 2107, La Crosse, WI 54602-2107

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 name, title, and place of residence of each person.

Title	Name	Home Address	Post Office & Zip Code	DOB
President/Member	President Donald P. Zietlow	802 Bergamot Pl	Onalaska, WI 54650	
Vice President/Member				
Secretary/Member	Secretary Steven D. Zietlow	N2448 Three Town Rd.	La Crosse, WI 54601	
Treasurer/Member		<u>1525 Fairview Dr.</u>		
Agent ►	Store Leader Judith A. Crusan	6300 Monona Dr.	Prairie du Sac, WI 53578	
Directors/Managers	Donald P. Zietlow & Steven D. Zietlow			

3. Trade Name ► Tobacco Outlet Plus #531 Business Phone Number 608/221-3005
 4. Address of Premises ► 6300 Monona Dr., Suite 2 Post Office & Zip Code ► Monona 53717

5. Is individual, partners or agent of corporation/limited liability company subject to completion of the responsible beverage server training course for this license period? Yes No
 6. Is the applicant an employe or agent of, or acting on behalf of anyone except the named applicant? Yes No
 7. Does any other alcohol beverage retail licensee or wholesale permittee have any interest in or control of this business? Yes No
 8. (a) **Corporate/limited liability company applicants only:** Insert state Wisconsin and date 10/07/64 of registration.
 (b) Is applicant corporation/limited liability company a subsidiary of any other corporation or limited liability company? 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? Please see enclosed list. Yes No
 (NOTE: All applicants explain fully on reverse side of this form every YES answer in sections 5, 6, 7 and 8 above.)

9. 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, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) One-story frame construction with storage in coolers and sales floor.

10. Legal description (omit if street address is given above):
 11. (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? Tobacco Outlet Plus #531
 12. Does the applicant understand they must file a Special Occupational Tax return (TTB form 5630.5) before beginning business? [phone 1-800-937-8864] Yes No
 13. Does the applicant understand a Wisconsin Seller's Permit must be applied for and issued in the same name as that shown in Section 2, above? [phone (608) 266-2776] Yes No
 14. 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 signers. Signers agree to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants and each member of a partnership applicant must sign; corporate officer(s), members/managers of Limited Liability Companies must sign.) 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.

SUBSCRIBED AND SWORN TO BEFORE ME

this 2nd day of November, 2012
Deanna Hafner (Clerk/Notary Public) 1-19-12
 (Officer of Corporation/Member/Manager of Limited Liability Company/Partner/Individual)
 (Officer of Corporation/Member/Manager of Limited Liability Company/Partner)
 (Additional Partner(s)/Member/Manager of Limited Liability Company if Any)

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk	Date reported to council/board	Date provisional license issued	Signature of Clerk / Deputy Clerk
<u>11-16-12</u>	<u>LRC 12-11 CC 10-11</u>	<u> </u>	<u> </u>
Date license granted	Date license issued	License number issued	
<u> </u>	<u> </u>	<u> </u>	

ok. w. [Signature] 11/19/12
Police Lt. [Signature]

