

CITY OF ONALASKA MEETING NOTICE

COMMITTEE/BOARD: Administrative & Judiciary Committee
DATE OF MEETING: April 8, 2015 (Wednesday)
PLACE OF MEETING: City Hall – 415 Main Street (Room 112)
TIME OF MEETING: 6:00 P.M.

PURPOSE OF MEETING

1. Call to Order and roll call.
2. Approval of minutes from the previous meeting.
3. Public Input: (limited to 3 minutes/individual)

Consideration and possible action on the following items:

Administrative

4. Approval of Operator's Licenses as listed on report dated April 8, 2015
5. Approval of The Rugged Run, June 28, 2015 from 6-11 a.m. starting at Van Riper Park.
6. Approval of the Fleis Nightfall Frolic 5K, April 17, 2015 from 5-9 p.m. starting at Rowe Park
7. Approval for a variance to the noise ordinance from June 26-June 28, 2015 for Celebrate Onalaska until 11:30 p.m. (11 p.m. previously approved).
8. Approval of Class Picnic License for Rotary of Onalaska for Spring Mixer held at Clearwater Farms, 760 Green Coulee Road, Onalaska on Saturday, May 16, 2015.
9. Approval of appointment of agent for Scott R. Hinkel for Walmart #1679, 3107 Market Place, Onalaska.
10. Miscellaneous licensing reporting

Judiciary

1. **Ordinance No. 1497-2015** to amend Title 6 Chapter 2 of the City of Onalaska Code of Ordinances related to snow and ice removal (First and Second Reading)

Adjournment

PLEASE TAKE FURTHER NOTICE that members of the Common Council of the City of Onalaska who do not serve on the Board may attend this meeting to gather information about a subject over which they have decision making responsibility.

Therefore, further notice is hereby given that the above meeting may constitute a meeting of the Common Council and is hereby noticed as such, even though it is not contemplated that the Common Council will take any formal action at this meeting.

NOTICES MAILED TO:

Mayor Joe Chilsen

* Ald. Erik Sjolander - Vice Chair Admin & Chair Jud

Ald. Jim Olson

Ald. Bob Muth.

Ald. Jim Bialecki

* Ald. Harvey Bertrand

*Ald. Jack Pogreba- Chair Admin.&Vice Chair Jud

City Attorney Dept Heads Charter Com. WXOW

La Crosse Tribune Onalaska Holmen Courier Life

WIZM WKTY WLXR WKBH WKBT WLSU

*Committee Members

Dan Wick

Anthony Schmidt

Date Notices Mailed and Posted: 4/1/15

In compliance with the Americans with Disabilities Act of 1990, the City of Onalaska will provide reasonable accommodations to qualified individuals with a disability to ensure equal access to public meetings provided notification is given to the City Clerk within seventy-two (72) hours prior to the public meeting and that the requested accommodation does not create an undue hardship for the City.

PACKET: 01127 License Packet april operators

SEQUENCE: License #

ID	PERIOD	-----NAME-----		LICENSE CODE
01036	3/11/15- 6/30/16	CROOK	JOEL	OPRATOR OPERATORS - 2 YEAR
01037	3/12/15- 6/30/15	BEYER	ANNA MAE	OPRATOR OPERATORS - 1 YEAR
01054	3/20/15- 6/30/16	HUDSON	LAURA	OPRATOR OPERATORS - 2 YEAR
01081	3/25/15- 6/30/16	RAVENS CROFT	PATRICK	OPRATOR OPERATORS - 1 YEAR
01083	3/26/15- 6/30/16	WAGNER	ELIZABETH	OPRATOR OPERATORS - 2 YEAR
01085	3/26/15- 6/30/16	GIBBS	BRITTANY BAYE	OPRATOR OPERATORS - 2 YEAR
04557	3/05/15- 6/30/16	TABBERT	MEGAN	OPRATOR OPERATORS - 2 YEAR
04577	3/26/15- 6/30/16	GIERTYCH	DANIEL	OPRATOR OPERATORS - 2 YEAR



CITY OF ONALASKA

415 Main Street • Onalaska, WI 54650-2953 • (608) 781-9530 fax (608) 781-9534 • www.cityofonalaska.com

SPECIAL EVENTS PERMIT APPLICATION

Date: 3/11/15

Cost: \$ _____

(Please Print)

Application is for:

- Bicycle Races
- Marathons
- Parades
- Procession(s)
- Runs
- Block Party¹
- Other:

Requestor Information			
Organization/Requestor Name: <u>Onalaska Park & Rec Department</u>		Phone: <u>(608) 781-9560</u>	
Officer of Corporation or Director of Event: <u>Don Wick</u>			
Address of Organization: <u>415 Main St</u>			
City: <u>Onalaska</u>	State: <u>WI</u>	Zip: <u>54650</u>	
Contact Person: <u>Don Wick</u>		Phone: <u>()</u>	
Address: <u>Same as above</u>			
City:	State:	Zip:	
Purpose/Description of Event: <u>The Rugged Run - Celebrate Onalaska Event</u>			

EVENT INFORMATION			
Name of Event: <u>The Rugged Run</u>	Date of Event: <u>6-28-15</u>	Time (beginning): <u>6:00</u> <small>am/pm</small>	Time (ending): <u>11:00</u> <small>am/pm</small>
Starting Point or Block to Be Closed: <u>Van Riper Park - No closing needed</u>			
Route or Specific Location (List Abutting Streets): <u>All located inside Van Riper Park</u>			
Termination Point: <u>Van Riper Park</u>			
Estimated Maximum Number of Units/Persons Attending Event: <u>400-500</u>			

¹Attach signatures of at least 51% of all households abutting the proposed block to be closed for said party

**** NOTE ** CERTIFICATE OF INSURANCE REQUIRED,**
 With the City of Onalaska listed as additional Insured.
Original Certificate of Insurance must accompany this application

SPECIAL EVENTS REQUIRED INFORMATION

The following information must be completed and received by the City of Onalaska City Clerk's Office no less than 30 days (60 days for special events) prior to the scheduled event for processing. Failure to provide complete information could void your permit and cancel your event. Also, a Special Event Permit is not valid until insurance has been provided, all fees have been paid, and all necessary approval signatures have been obtained.

TELL US ABOUT YOUR EVENT:

1. Will food be prepared and/or served at the event? YES NO

If yes, please explain in detail what food service you will provide:

Donations for post Race snacks
bananas, milk, bagels

(Please contact the La Crosse County Health Department (608) 785-9872 to sell/serve food)

2. Will alcoholic beverages be served/sold? YES NO

If yes, a "Special Class B" license will allow you to serve/sell beer and/or wine.

working with celebrate onalaska

(The Office of the City Clerk (608) 781-9530 will assist you with obtaining the license)

3. Will you be having a band or amplified music? YES NO

If yes, a Variance Permit may be needed.

(Please contact the Onalaska Police Department (608) 781-9550 for additional information on noise and noise ordinance)

4. Do you require any special parking restrictions? YES NO

If yes, please indicate what type, when and where:

working directly with celebrate onalaska

5. Will you require the use of any City Services and/or equipment?

Barricades YES NO If yes, approximately how many: _____

Cones YES NO If yes, approximately how many: _____

Street Sweeper YES NO If yes, approximate time needed: _____ a.m./p.m.

(Please contact the Onalaska Public Works Department (608) 781-9537 to make arrangements)

6. Will temporary signage be used? YES NO

If yes, please indicate what type and where:

Yard Signs + banners in parks

(Please contact the Onalaska Planning Department (608) 781-9590 to inquire about City Regulations)

7. Will there be a fireworks display? YES NO

If yes, please indicate what type and where:

(Please contact the Office of the Fire Department (608) 781-9546 to inquire about City Regulations)

8. Do you have a plan in place to deal with any medical emergencies that may occur during your event? YES NO

If yes, please explain:

Medical Volunteers on site for celebrate onalaska

(The Onalaska Police Department (608) 781-9550 will assist you with defining your safety/security needs)

9. An emergency/evacuation plan is needed. Please submit a plan not less than fourteen (14) business days prior to the event.

(The Onalaska Police Department (608) 781-9550 will assist you with your plan)

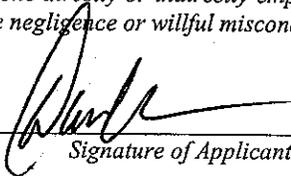
10. Other special assistance requested:

N.A.

I understand the filing of this application does not ensure the issuance of this license. I also understand that all Special Events sponsors must comply with all applicable city Ordinances, traffic rules, park rules, state health laws, fire codes and liquor licensing regulations. Fees for park facilities, food sales permits, tent, signage and fireworks permits are in addition to the fees submitted for the Special Events Application. I further understand that an incomplete application may be cause for denial of the event.

Hold Harmless Indemnification and Defense.

The applicant and/or the organization agrees to indemnify, defend and hold harmless the City of Onalaska and its officers, officials, employees and agents from and against any and all liability, loss, damage, expenses, costs, including attorney fees, arising out of the activities performed as described herein, caused in whole or in part by any negligent act or omission of the applicant/organization, anyone directly or indirectly employed by any of them, or anyone whose acts any of them may be liable, except where caused by the sole negligence or willful misconduct of the City.


Signature of Applicant

3/12/15
Date

Fees are Non-Refundable. Submit completed application along with any required information to:

Onalaska City Clerk's Office
415 Main Street
Onalaska, WI 54650

FOR OFFICE USE ONLY

Name & Date of Event: The Ragged Run - 6/28/15

City Clerk	<input checked="" type="checkbox"/> APPROVED	<input type="checkbox"/> DENIED	Reason: <u>C. Burmaster</u>	Date: <u>3-12-15</u>
Fire Dept	<input checked="" type="checkbox"/> APPROVED	<input type="checkbox"/> DENIED	Reason: <u>J. Jh</u>	Date: <u>3-12-15</u>
Police Dept	<input checked="" type="checkbox"/> APPROVED	<input type="checkbox"/> DENIED	Reason: <u>W. Jh</u>	Date: <u>3-13-15</u>
Public Works	<input checked="" type="checkbox"/> APPROVED	<input type="checkbox"/> DENIED	Reason: <u>Y. Jh</u>	Date: <u>3-16-15</u>
Health Dept	<input type="checkbox"/> APPROVED	<input type="checkbox"/> DENIED	Reason: _____	Date: _____
Planning	<input checked="" type="checkbox"/> APPROVED	<input type="checkbox"/> DENIED	Reason: <u>B. Ogawa</u>	Date: <u>3/17/15</u>
Parks & Rec	<input checked="" type="checkbox"/> APPROVED	<input type="checkbox"/> DENIED	Reason: <u>W. Jh</u>	Date: <u>3/17/15</u>

Site Diagram Sketch Attached: YES NO

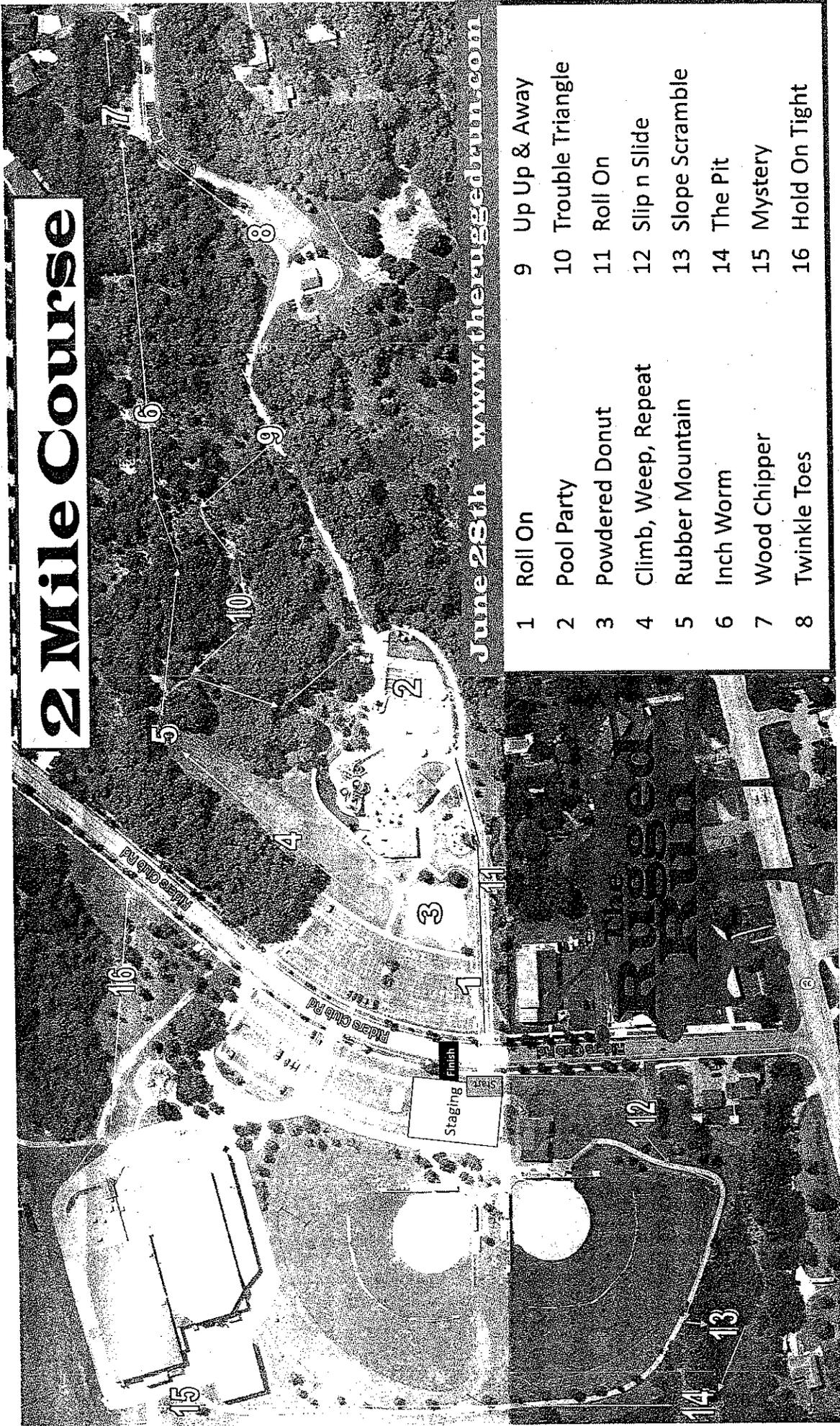
GIS Dept. Map Prepared: ___/___/___

Insurance Required: YES NO Certificate of Insurance on File: YES NO COI Expires: ___/___/___

Special Class B License Required: YES NO Date of Special Class B Application: ___/___/___

Approved By A&J: ___/___/___ Date License Issued: ___/___/___ License No: _____

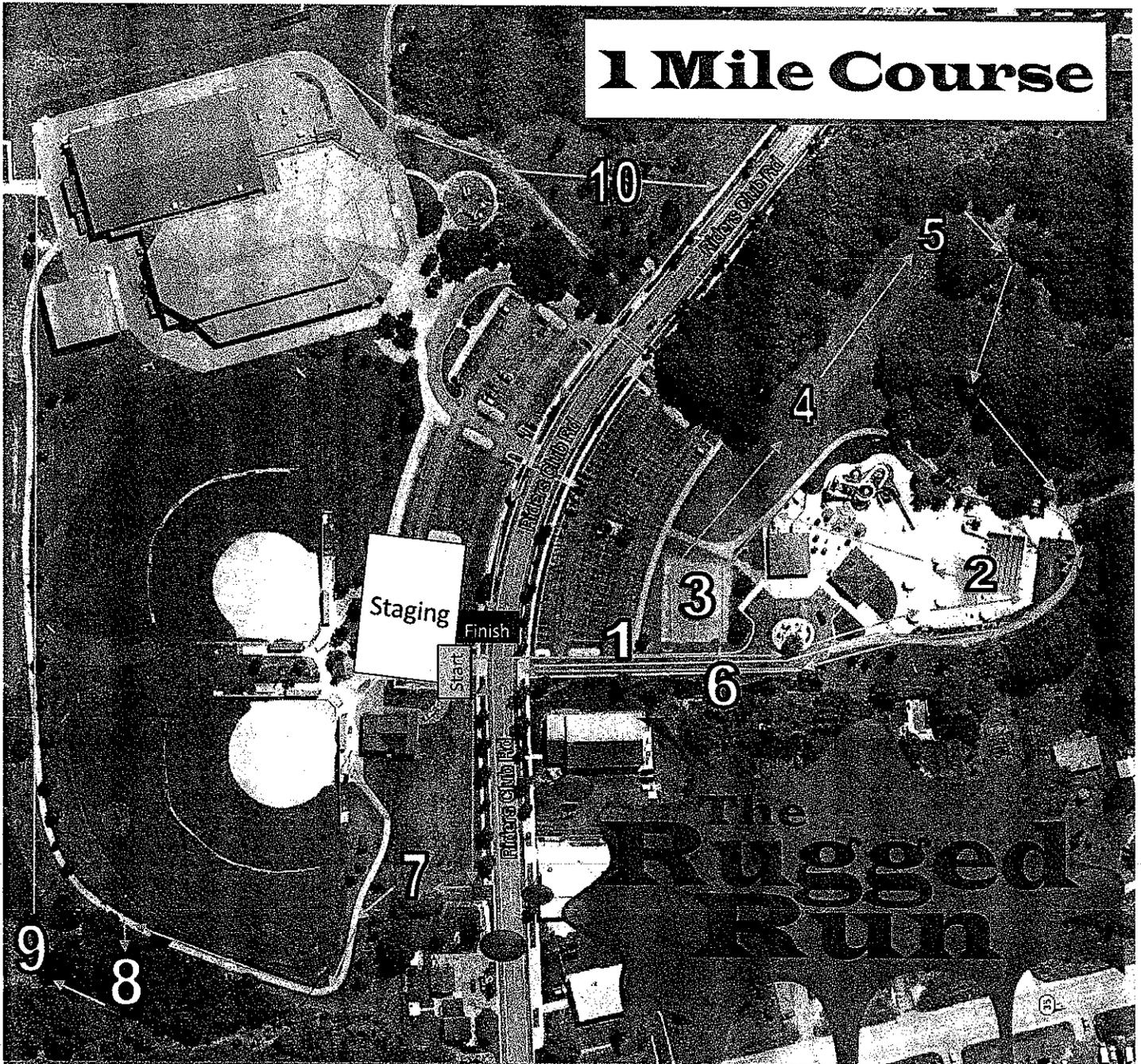
2 Mile Course



June 28th www.themerged.com

- | | | | |
|---|---------------------|----|------------------|
| 1 | Roll On | 9 | Up Up & Away |
| 2 | Pool Party | 10 | Trouble Triangle |
| 3 | Powdered Donut | 11 | Roll On |
| 4 | Climb, Weep, Repeat | 12 | Slip n Slide |
| 5 | Rubber Mountain | 13 | Slope Scramble |
| 6 | Inch Worm | 14 | The Pit |
| 7 | Wood Chipper | 15 | Mystery |
| 8 | Twinkle Toes | 16 | Hold On Tight |

1 Mile Course



June 28th www.theruggedrun.com

1 Roll On

2 Pool Party

3 Powdered Donut

4 The Climb

5 Rubber Mountain

6 Roll On

7 Slip n Slide

8 Slope Scramble

9 The Pit

10 Hold On Tight



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SPECIAL EVENTS PERMIT APPLICATION

Date: 3/11/15

Cost: \$ _____

(Please Print)

Application is for:

- Bicycle Races
- Marathons
- Parades
- Procession(s)
- Runs
- Block Party¹
- Other:

Organization/Requester Name: Onalaska Park & Rec Dept.			Phone: (608) 781-9560		
Officer of Corporation or Director of Event: Dan Wick					
Address of Organization: 415 Main St					
City: Onalaska		State: WI		Zip: 54650	
Contact Person: Dan Wick			Phone: ()		
Address: same as above					
City:		State:		Zip:	
Purpose/Description of Event: Charity 5K Run/Walk - John Pleis Scholarship					

EVENT INFORMATION			
Name of Event: Fleis Nightfall Frolic 5K	Date of Event: 4/17/15	Time (beginning): 5:00	Time (ending): 9:00 <small>am/pm</small>
Starting Point or Block to Be Closed: Rowe Park - no closing necessary			
Route or Specific Location (List Abutting Streets): Rowe Park - Oak Forest Drive - Pinecrest Ln - Wilson St - Hilltop Drive			
Termination Point: Rowe Park			
Estimated Maximum Number of Units/Persons Attending Event: 200 - 250			

¹Attach signatures of at least 51% of all households abutting the proposed block to be closed for said party

**** NOTE ** CERTIFICATE OF INSURANCE REQUIRED,**
 With the City of Onalaska listed as additional Insured.
Original Certificate of Insurance must accompany this application

SPECIAL EVENTS REQUIRED INFORMATION

The following information must be completed and received by the City of Onalaska City Clerk's Office no less than 30 days (60 days for special events) prior to the scheduled event for processing. Failure to provide complete information could void your permit and cancel your event. Also, a Special Event Permit is not valid until insurance has been provided, all fees have been paid, and all necessary approval signatures have been obtained.

TELL US ABOUT YOUR EVENT:

1. Will food be prepared and/or served at the event? YES NO
If yes, please explain in detail what food service you will provide:

Donations of post-race food - bagels, bananas,
chocolate milk, hot dogs

(Please contact the La Crosse County Health Department (608) 785-9872 to sell/serve food)

2. Will alcoholic beverages be served/sold? YES NO
If yes, a "Special Class B" license will allow you to serve/sell beer and/or wine.

(The Office of the City Clerk (608) 781-9530 will assist you with obtaining the license)

3. Will you be having a band or amplified music? YES NO
If yes, a Variance Permit may be needed.

Radio station doing announcing & entertainment
(Please contact the Onalaska Police Department (608) 781-9550 for additional information on noise and noise ordinance)

4. Do you require any special parking restrictions? YES NO
If yes, please indicate what type, when and where:

5. Will you require the use of any City Services and/or equipment?

Barricades YES NO If yes, approximately how many: 15
Cones YES NO If yes, approximately how many: 100
Street Sweeper YES NO If yes, approximate time needed: _____ a.m./p.m.

(Please contact the Onalaska Public Works Department (608) 781-9537 to make arrangements)

6. Will temporary signage be used? YES NO
If yes, please indicate what type and where:

Yard signs

(Please contact the Onalaska Planning Department (608) 781-9590 to inquire about City Regulations)

7. Will there be a fireworks display? YES NO
If yes, please indicate what type and where:

(Please contact the Office of the Fire Department (608) 781-9546 to inquire about City Regulations)

8. Do you have a plan in place to deal with any medical emergencies that may occur during your event? YES NO
If yes, please explain:

(The Onalaska Police Department (608) 781-9550 will assist you with defining your safety/security needs)

9. An emergency/evacuation plan is needed. Please submit a plan not less than fourteen (14) business days prior to the event.

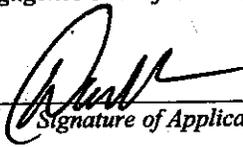
(The Onalaska Police Department (608) 781-9550 will assist you with your plan)

10. Other special assistance requested:

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Hold Harmless Indemnification and Defense.

The applicant and/or the organization agrees to indemnify, defend and hold harmless the City of Onalaska and its officers, officials, employees and agents from and against any and all liability, loss, damage, expenses, costs, including attorney fees, arising out of the activities performed as described herein, caused in whole or in part by any negligent act or omission of the applicant/organization, anyone directly or indirectly employed by any of them, or anyone whose acts any of them may be liable, except where caused by the sole negligence or willful misconduct of the City.


Signature of Applicant

3/11/15
Date

Fees are Non-Refundable. Submit completed application along with any required information to:

Onalaska City Clerk's Office
415 Main Street
Onalaska, WI 54650

FOR OFFICE USE ONLY

Name & Date of Event: Feis Nightfall Frolic 4-17-15

City Clerk	<input checked="" type="checkbox"/> APPROVED	<input type="checkbox"/> DENIED	Reason: <u>C. Burmaster</u>	Date: <u>3-11-15</u>
Fire Dept	<input checked="" type="checkbox"/> APPROVED	<input type="checkbox"/> DENIED	Reason: <u>NS</u>	Date: <u>3-11-15</u>
Police Dept	<input checked="" type="checkbox"/> APPROVED	<input type="checkbox"/> DENIED	Reason: <u>none</u>	Date: <u>3-13-15</u>
Public Works	<input checked="" type="checkbox"/> APPROVED	<input type="checkbox"/> DENIED	Reason: <u>JK</u>	Date: <u>3-16-15</u>
Health Dept	<input type="checkbox"/> APPROVED	<input type="checkbox"/> DENIED	Reason: _____	Date: _____
Planning	<input checked="" type="checkbox"/> APPROVED	<input type="checkbox"/> DENIED	Reason: <u>fill out Temp. Sign Comm. Event App.</u>	Date: <u>3/16/15</u>
Parks & Rec	<input checked="" type="checkbox"/> APPROVED	<input type="checkbox"/> DENIED	Reason: _____	Date: <u>3/17/15</u>

Site Diagram Sketch Attached: YES NO

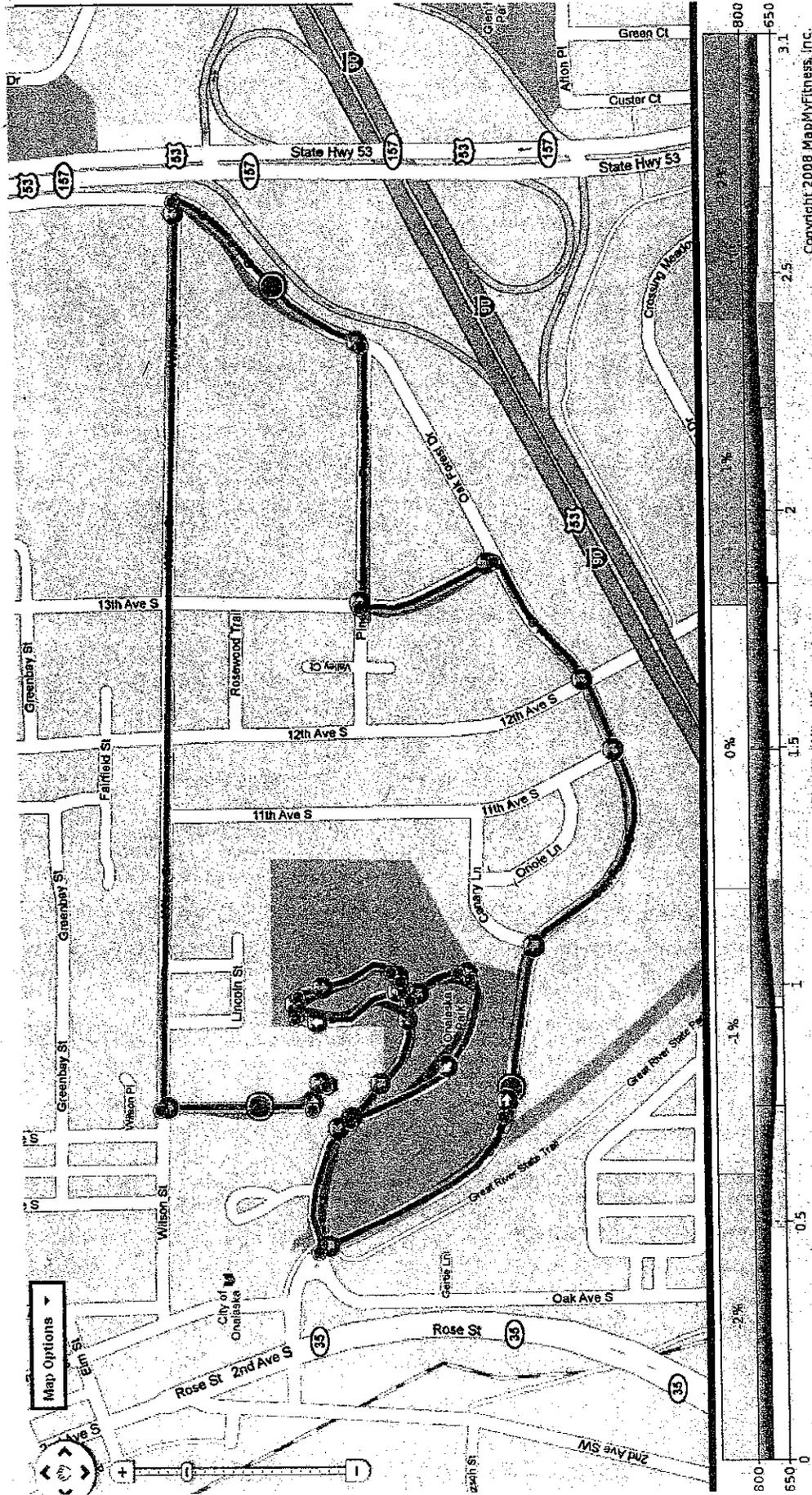
GIS Dept. Map Prepared: / /

Insurance Required: YES NO Certificate of Insurance on File: YES NO COI Expires: / /

Special Class B License Required: YES NO Date of Special Class B Application: / /

Approved By A&J: / / Date License Issued: / / License No:

5K Run/Walk Route



Copyright 2008 MapMyFitness, Inc.

Feet (F) / Miles (M)

ACTION PLAN

FLEIS NIGHTFALL FROLIC 5K

Location

Oak Forest & Hilltopper
 Oak Forest & 12th South
 12th South & Wilson

Reserve Officer

Adam, Tim (Squad)
 Ramon, Nate (Squad)
 Sean, Dominick (Squad)

Location

Parks Department Staff

<u>Oak Forest & Canary</u>	_____
Oak Forest & 11 th Ave	_____
<u>Oak Forest & 13th Ave</u>	_____
<u>Oak Forest & Wilson</u>	_____
<u>13th Ave & Pinecrest</u>	_____
<u>Oak Forest & Pinecrest</u>	_____
Wilson & 11 th Ave	_____
Wilson & Tillman	_____
Wilson & Johnson	_____
<u>Wilson at OHS</u>	_____

*Try to fill all locations, if short of help fill highlighted areas first.

** Please announce to all participants they should use the left side of the road or the sidewalks. They should not run or walk on the right side of the road.

Special Event Warning Sign Locations (Deployed & Picked up by Reserves)

- | | |
|--|-----------------|
| 1. Oak Forest North of Wilson Street | (Sean/Dominick) |
| 2. Oak Forest West of Hilltopper | (Adam/Tim) |
| 3. 12 th Ave South at I90 | (Ramon/Nate) |
| 4. 12 th Ave South 500' North of Oak Forest Drive | (Ramon/Nate) |
| 4. 12 th Ave South between Wilson and Fairfield Streets | (Sean/Dominick) |
| 5. Wilson at 9 th Avenue South | (Ramon/Nate) |
| 6. Oak Ave South near Happy Joes | (Adam/Tim) |

*If room allows, signs should be at least 500' back from the event area.

Squad Assignments

Adam	28
Ramon	31
Sean	37

01101

APPLICATION FOR TEMPORARY CLASS "B"/"CLASS B" RETAILER'S LICENSE

See Additional Information on reverse side. Contact the municipal clerk if you have questions.

FEE \$ 10.00

Application Date: 3-31-15

Town Village City of Onalaska County of LaCrosse

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. Stats.

at the premises described below during a special event beginning May 16 and ending May 16 and agrees to comply with all laws, resolutions, ordinances and regulations (state, federal or local) affecting the sale of fermented malt beverages and/or wine if the license is granted.

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

(a) Name Rotary of Onalaska

(b) Address 1231 Oak Forest Drive
(Street) Town Village City

(c) Date organized 1964

(d) If corporation, give date of incorporation _____

(e) If the named organization is not required to hold a Wisconsin seller's permit pursuant to s. 77.54 (7m), Wis. Stats., check this box:

(f) Names and addresses of all officers:

President Lori Poede

Vice President Todd Olson

Secretary Kendra Garbricht

Treasurer Dan Kusilek

(g) Name and address of manager or person in charge of affair: Anthony Schmat, 1231 oak forest drive
Onalaska WI 54650

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

(a) Street number 760 Green Lake Rd

(b) Lot _____ Block _____

(c) Do premises occupy all or part of building? Yes

(d) If part of building, describe fully all premises covered under this application, which floor or floors, or room or rooms, license is to cover: All premise

3. NAME OF EVENT

(a) List name of the event Onalaska Rotary Wine Mixer

(b) Dates of event May 16 2015

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] 3-31
(Signature/date)

Officer [Signature] 3-31
(Signature/date)

Date Filed with Clerk _____

Date Granted by Council _____

Onalaska Rotary
(Name of Organization)

Officer _____
(Signature/date)

Officer _____
(Signature/date)

Date Reported to Council or Board _____

License No. _____

CHARGE	APPLIED	OK 10.00 REF:EE 5639	0110105/16/15 ONALASKA ROTARY CLUB
TENDERED	10.00		CLASS B - PICNIC
	10.00		10.00CR
	0.00		

AT-315 (R 5-11)

ok [Signature] 4/1/15

CLIT UP UNALASKA
REC#: R00000590 03/31/2015 9:47 AM
TRAN: 30 LICENSES
OPER: C1 TERM: 1
TRBY: CASH 01

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 the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

To the governing body of: Town
 Village of ONALASKA County of LA CROSSE
 City

The undersigned duly authorized officer(s)/members/managers of WAL-MART STORES EAST, LP
(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 WALMART #1679

(trade name)

located at 3107 MARKET PLACE, ONALASKA, WI 54650

appoints SCOTT R. HINKEL
(name of appointed agent)

W5527 INNSBRUCK ROAD, WEST SALEM, WI 54669
(home address of appointed agent)

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

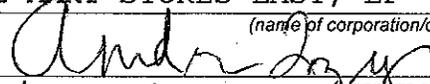
Yes No If so, indicate the corporate name(s)/limited liability company(ies) and municipality(ies).

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

How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin? 36 YEARS

Place of residence last year W5527 INNSBRUCK ROAD, WEST SALEM, WI 54669

For: WAL-MART STORES EAST, LP
(name of corporation/organization/limited liability company)

By: 
(signature of Officer/Member/Manager)

And: Amy Shasher
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, SCOTT R. HINKEL, 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.

 3-23-15
(signature of agent) (date)

W5527 INNSBRUCK ROAD, WEST SALEM, WI 54669
(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 _____
(date) (signature of proper local official)

CITY OF ONALASKA
 REC#: R00000413 03/20/2015 12:56 PM
 TRAN: 198 REVENUE ACOUNT
 OPER: 02 ERM: 2
 TRBY: 02 CASH 02
 WALMART CHANGE \$6
 REVENUE ACOUNT 10.00
 100-00000-44110 -10.00
 Paid by: 10.00
 CK 10.00 REF: SW 12153
 APR 10 10:00
 TENDERED
 CHANGE

4/01/2015 7:42 AM

L I C E N S E M A S T E R R E P O R T

LICENSES: ALL

SORTED BY: LICENSE NUMBER

EFFECTIVE

LICENSE CODES: Include: RECBURN-O

EXPIRATIO

CLASSES: All

COMMENT:

STATUS: ACTIVE

PAY STATU

CITY LIMITS: INSIDE, OUTSIDE

ID	CODE	NAME/ PROPERTY ADDRESS	STATUS	CLASS/ REPORT	ORIG/ RENEW	TERM/ PRINTED
00101	RECBURN-O	GORDON 1103 OAK FOREST DR	TRAVIS ACTIVE	REC BURN REC BURN	4/30/2012	3/23/2015
00697	RECBURN-O	THOMETZ 1074 GREEN ST	JONATH ACTIVE	REC BURN REC BURN	8/15/2012	
01009	RECBURN-O	PLATT 1935 MAPLEWOOD PL	MARK ACTIVE	REC BURN REC BURN	12/26/2012	
01041	RECBURN-O	NANTZ 519 11TH AVE N	OLEN ACTIVE	REC BURN REC BURN	3/16/2015	3/23/2015
01042	RECBURN-O	ALLEN 1514 FRANKLIN ST	RYAN ACTIVE	REC BURN REC BURN	3/16/2015	3/23/2015
01050	RECBURN-O	KASTEN 524 8TH AVE N	WILLIA ACTIVE	REC BURN REC BURN	3/19/2015	3/25/2015
01051	RECBURN-O	GRIFFIN 2003 FRANKLIN ST	LARRY ACTIVE	REC BURN REC BURN	3/20/2015	3/25/2015
01052	RECBURN-O	WEIGEL 742 JULINE WAY	DEBRA ACTIVE	REC BURN REC BURN	3/20/2015	3/25/2015
01055	RECBURN-O	MOORE 323 3RD AVE N	JENNIF ACTIVE	REC BURN REC BURN	3/20/2015	3/25/2015
01056	RECBURN-O	WOODLIFF 444 4TH AVE N	DAVID ACTIVE	REC BURN REC BURN	3/20/2015	3/25/2015
01076	RECBURN-O	GUTH 1892 WOOD RUN PL	ERIC & ACTIVE	REC BURN REC BURN	3/23/2015	3/25/2015
01078	RECBURN-O	SCHUMAN 557 20TH AVE S	RITA & ACTIVE	REC BURN REC BURN	3/23/2015	3/25/2015

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L I C E N S E M A S T E R R E P O R T

LICENSES: ALL

SORTED BY: LICENSE NUMBER

EFFECTIVE

LICENSE CODES: Include: RECBURN-O

EXPIRATIO

CLASSES: All

COMMENT:

STATUS: ACTIVE

PAY STATU

CITY LIMITS: INSIDE, OUTSIDE

ID	CODE	NAME/ PROPERTY ADDRESS	STATUS	CLASS/ REPORT	ORIG/ RENEW	TERM/ PRINTED
01086	RECBURN-O	HUGHES 595 COURT RD	TIMOTH ACTIVE	REC BURN REC BURN	3/26/2015	
01090	RECBURN-O	LOUGH 315 10TH AVE N	BRITTA ACTIVE	REC BURN REC BURN	3/27/2015	
02742	RECBURN-O	DRURY 601 OAK AVE. N.	MIKE & ACTIVE	REC BURN REC BURN	3/15/2013	
02930	RECBURN-O	MILLER 1534 CLIFFVIEW AVE	JESSIC ACTIVE	REC BURN REC BURN	5/02/2013	3/23/2015
02972	RECBURN-O	BAUER 2309 THOMAS CT	BRETT ACTIVE	REC BURN REC BURN	5/10/2013	
03021	RECBURN-O	OTZELBERGER 519 13TH PL N	MICHAE ACTIVE	REC BURN REC BURN	5/17/2013	
03027	RECBURN-O	NORDMAN 516 HICKORY ST	TINA ACTIVE	REC BURN REC BURN	5/17/2013	3/23/2015
03079	RECBURN-O	RICKERT 2219 CRAIG LN W	WILLIA ACTIVE	REC BURN REC BURN	5/29/2013	3/23/2015
03084	RECBURN-O	TEALE 312 11TH AVE S	JAMES ACTIVE	REC BURN REC BURN	5/31/2013	
03097	RECBURN-O	GILBECK 423 11TH AVE S	CHAD ACTIVE	REC BURN REC BURN	6/03/2013	
03143	RECBURN-O	WALLACE 302 14TH AVE N	JARED ACTIVE	REC BURN REC BURN	6/11/2013	
03163	RECBURN-O	SCHROEDER 2101 MAPLEWOOD DR	JAMES ACTIVE	REC BURN REC BURN	6/17/2013	3/23/2015

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L I C E N S E M A S T E R R E P O R T

LICENSES: ALL

SORTED BY: LICENSE NUMBER

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EXPIRATIO

CLASSES: All

COMMENT:

STATUS: ACTIVE

PAY STATU

CITY LIMITS: INSIDE, OUTSIDE

ID	CODE	NAME/ PROPERTY ADDRESS	STATUS	CLASS/ REPORT	ORIG/ RENEW	TERM/ PRINTED
03190	RECBURN-O	FORSYTHE 583 COURT RD	DANIEL ACTIVE	REC BURN REC BURN	6/27/2013	3/25/2015
03262	RECBURN-O	FREYBLER 1033 CANARY LN	CINDY ACTIVE	REC BURN REC BURN	7/24/2013	3/23/2015
03361	RECBURN-O	MCLEES 1704 HICKORY ST	DEREK ACTIVE	REC BURN REC BURN	8/26/2013	
03393	RECBURN-O	BOESE 918 CHARLES CT	PETER ACTIVE	REC BURN REC BURN	9/13/2013	3/12/2015
03455	RECBURN-O	LOPES 221 16TH AVE S	MICHAEL ACTIVE	REC BURN REC BURN	10/21/2013	3/23/2015
04559	RECBURN-O	SEVERSON 802 WESTWOOD DR	JULIE ACTIVE	REC BURN REC BURN	3/06/2015	3/12/2015
04566	RECBURN-O	PICKETT 4004 BEVERLY DR	TERRY ACTIVE	REC BURN REC BURN	3/09/2015	3/23/2015
04571	RECBURN-O	LUHMAN 415 MAIN	KEITH ACTIVE	REC BURN REC BURN	3/13/2015	3/23/2015
04576	RECBURN-O	UDERMANN 1301 3RD AVE N	BRIAN ACTIVE	REC BURN REC BURN	3/19/2015	3/25/2015

REPORT TOTALS:

33 LICENSES

ORDINANCE NO. 1497 - 2015

AN ORDINANCE TO AMEND TITLE 6 CHAPTER 2 OF THE CITY OF ONALASKA CODE OF ORDINANCES RELATED TO SNOW AND ICE REMOVAL

THE COMMON COUNCIL OF THE CITY OF ONALASKA DOES HEREBY ORDAIN AS FOLLOWS:

SECTION I. Section 8 of Chapter 2 of Title 6 of the Code of Ordinances of the City of Onalaska is hereby deleted and replaced as follows:

Sec. 6-2-8 Snow and Ice Removal.

- (a) **Removal From Sidewalks.** The owner, occupant or person in charge of any parcel or lot which fronts upon or abuts any sidewalk shall keep said sidewalk clear of all snow and ice. In the event of snow accumulating on said sidewalk due to natural means and/or by any other means, said sidewalks shall be cleared of all accumulated snow and/or ice within twenty-four (24) hours from the time the snow ceases to accumulate on said sidewalk. Sidewalks are to be kept clear of snow and ice to the width of the sidewalk. In the event that ice has formed on any sidewalk in such a manner that it cannot be removed, the owner, occupant or person in charge of the parcel or lot which fronts upon or adjoins said sidewalk shall keep the sidewalk sprinkled with material to accelerate melting or prevent slipping. In case snow shall continue to fall for some time, then and in that case it shall be removed immediately after it shall cease to fall. The owner, agent, occupant or person in charge of a corner lot shall also clear, sand or salt, as set forth herein, to the curb, that portion of the sidewalk commonly referred to as the corner crosswalk. A corner lot is defined as a lot abutting upon two (2) or more streets.
- (b) **Inspection Department to Remove.**
- (1) In any case where any sidewalk in front of or adjoining any lot or parcel of land shall remain covered in any part with snow or ice after twenty-four (24) hours when it ceased to fall, the Inspection Department, may grant a courtesy notice to the owner, agent or occupant to remove said snow. It shall be the duty of the Inspection Department, to thereafter cause such snow or ice to be so removed from the full width of such sidewalk. The costs incurred by the City for the removal of snow or ice shall be fully accounted and charged to the lot or parcel of land adjoining. If the costs and expenses remain unpaid, the City Clerk shall enter those charges onto the tax roll as a special charge and shall be collected as other taxes upon real estate are collected.
 - (2) The charge for said service shall be a minimum of Seventy-five Dollars (\$75.00) per front or side or, in the alternative, actual cost, whichever is greater.

- (c) **Snow and Ice Not to Encroach.** No person shall push, shove or in any way deposit any snow or ice onto any public streets, alley, sidewalk or public lands dedicated to public use except for parcels or lots located where existing buildings are constructed within five (5) feet of the street right-of-way and the sidewalks exist from the City right-of-way to the curb line. In such instances, the owners, occupants and/or employees of parcels or lots shall be permitted to deposit snow and ice from their sidewalks only onto the public streets. Snow from public sidewalks shall not be stored in any manner which will obstruct or limit vehicular or pedestrian vision, movement or access. The deposit of any snow or ice upon any sidewalk, alley or street of the City, contrary to the provisions of this Section, is a nuisance; and in addition to the penalty provided for violation of this Section, the City may summarily remove any snow or ice so deposited and cause the cost of said removal to be charged to the owner of the property from which said snow or ice had been removed.
- (d) **Enforcement.** The Inspection Department officers are hereby authorized and directed to enforce the provisions of this Section.
- (e) **Continued Violations.** Each twenty-four (24) hour period where a violation occurs shall constitute a separate offense under this Section for enforcement purposes. Repeated violations or subsequent additional accumulations of snow and/or ice shall not nullify any pending notice issued under this Section.
- (f) **Penalty.** In addition to the provisions set forth in this Section, any person, firm or corporation which violates the provisions of this Section shall be subject to a penalty as provided in Section 1-1-7 of this Code of Ordinances.

State Law Reference: Secs. 66.60(16) and 66.615(3)(f) and (5), Wis. Stats.

SECTION VII. This Ordinance shall take effect and be in force from and after its passage and publication.

Dated this ____ day of _____, 2015.

CITY OF ONALASKA

By: _____
Joe Chilsen, Mayor

By: _____
Caroline Burmaster, Clerk

PASSED:
APPROVED:
PUBLISHED: