

**CITY OF SHEBOYGAN FALLS COMMON COUNCIL MEETING
SHEBOYGAN FALLS MUNICIPAL BUILDING
1ST FLOOR COUNCIL CHAMBERS
375 BUFFALO STREET**

**COUNCIL MEETING
FEBRUARY 15, 2023
6:30 P.M.**

Committee of the Whole

5:45 P.M.

ROLL CALL

MINUTES

GENERAL

1. Appearances
2. Correspondence
3. Announcements
4. Municipal Court Update – Paul Seymour
5. Travel Request – Judge Wallace T. Endsley to Attend Municipal Judge Association Conference

PROPERTY

1. Allocate \$45,000 of Park Development Funds Toward Kayak Launch in Order to Bid Project
2. Allocate \$5,000 of Park Funds to Prepare Final Bid Documents

FINANCE & PERSONNEL

1. Property & Liability Insurance Renewal

PUBLIC HEALTH & WELFARE

1. Application for a Class “B” Beer and Liquor License: OFC Acquisition, LLC
2. Application for an Animal Fancier Permit – Gina Schultz, 336 Pine Street

BILLS

1. Approve: T.V.E & A.M.

ADJOURN

Please Note:

There has been a Zoom Conference meeting set up for the Committee of the Whole and Common Council Meeting. Members of the Council may be appearing remotely. The public is welcome to attend online or via phone. Please contact the City Clerk’s office to obtain the Meeting ID at 920-467-7900 ext. 5



City of
SHEBOYGAN FALLS

MEETING NOTICE

**COMMITTEE OF THE WHOLE
WEDNESDAY, FEBRUARY 15, 2023
1ST FLOOR COUNCIL CHAMBERS
MUNICIPAL BUILDING, 375 BUFFALO STREET**

5:45 P.M.

I. PROPERTY

1. Additional Lighting in Municipal Building Parking Lot
2. Allocate \$45,000 of Park Development Funds Toward Kayak Launch in Order to Bid Project
3. Allocate \$5,000 of Park Funds to Prepare Final Bid Documents

BY ORDER OF THE CHAIRPERSON:

TOM BIGLER

MEMBERS:

PETER WEBER

RACHEL HOWARD

II. FINANCE & PERSONNEL

1. Property & Liability Insurance Renewal

BY ORDER OF THE CHAIRPERSON:

TERRY VAN ENGEN

MEMBERS:

PETER WEBER

ALAN MAYER

III. PUBLIC SAFETY

1. Discussion of Speed Limit Reduction Request on HWY 32 Between 23 and Willow.
2. Information on Controlled Burn

BY ORDER OF THE CHAIRPERSON:

JACOB IMMEL

MEMBERS:

TERRY VAN ENGEN

TOM BIGLER

Please Note:

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CITY OF SHEBOYGAN FALLS COMMON COUNCIL MEETING MINUTES

FEBRUARY 1, 2023

CALLED TO ORDER: 6:30 P.M.

ADJOURNED: 6:38 P.M.

Alderspersons present: Alan Mayer, Terry Van Engen, Peter Weber, Tom Bigler, Jacob Immel, and Rachel Howard. Mayor Randy Meyer presiding.

Minutes:

Alderperson Immel made a motion to approve the minutes from January 18, 2023. Alderperson Howard seconded the motion. The motion was carried on unanimous voice vote of the council.

Appearances: Dean Schaap of 509 Western Avenue appeared before the council to address the parking issue on Bemis Street. The council thanked him for his appearance and Mayor Meyer assigned the concern to the Property Committee.

Correspondence: None

Announcements: City Clerk Paul Seymour announced that the Primary for the Spring Election will be February 21, 2023, and that In-Person Absentee Voting at City Hall on the Second Floor begins Tuesday, February 7th, and will run weekdays from 9-3 until February 17th.

Property

Alderperson Bigler made a motion to approve Ordinance #9 – An Ordinance Amending the Zoning Code, Chapter 17 of the Ordinances of the City of Sheboygan Falls and Accompanying Map by Changing Property From its Present Zoning Classification of A (Agricultural) to I1 (Light Industrial) and R3 (Two Family Residence) - Richardson. Alderperson Howard seconded the motion. The motion was carried with a unanimous voice vote of the council.

City Services

Alderperson Weber made a motion to approve the Engineering Agreement with Donohue & Associates for the Fond du Lac Avenue Booster Station, not to exceed \$127,770. Alderperson Howard seconded the motion. The motion was carried with a unanimous voice vote of the council.

Alderperson Weber made a motion to approve the filing of an Electric Rate Application with the Public Service Commission of Wisconsin. Alderperson Bigler seconded the motion. The motion was carried with a unanimous voice vote of the council.

Public Safety

Alderperson Immel made a motion to approve the Travel Request for the Members of the Fire Department to attend the State Fire Conference. Alderperson Van Engen seconded the motion. The motion was carried on a unanimous voice vote of the council.

Public Health & Welfare

Alderperson Howard made a motion to approve the application for Temporary Class "B"/Class "B" Beer Retailer's License for Blessed Trinity Parish for a Trivia Night, to be held on March 11, 2023 at 319 Giddings Avenue. Alderperson Immel seconded the motion. The motion was carried on unanimous voice vote of the council.

Bills

Bills were assigned to Alderspersons Van Engen and Mayer.

Aldersperson Van Engen made a motion to adjourn. Aldersperson Immel seconded the motion. The motion was carried on unanimous voice vote of the council.

Randy J. Meyer, Mayor

Paul Seymour, City Clerk

CITY OF SHEBOYGAN FALLS COMMITTEE OF THE WHOLE MEETING MINUTES

FEBRUARY 1, 2023

CALLED TO ORDER: 5:45 P.M.

CLOSED: 7:28 P.M.

Alderspersons present: Alan Mayer, Peter Weber, Jacob Immel, Terry Van Engen, Tom Bigler, and Paul Jensen. Mayor Randy Meyer Presiding.

I. BOARD OF PUBLIC WORKS

Brian Roemer and Lisa Trebatoski from Ehlers presented a rate increase scenario for the City of Sheboygan Falls Electric Utility. Alderperson Van Engen made a motion to recommend the filing of an electric rate application with the Public Service Commission of Wisconsin to the council for approval. Alderperson Mayer seconded the motion. The motion was carried with a unanimous voice vote of the committee.

II. CITY SERVICES

Alderperson Weber made a motion to recommend the engineering agreement with Donohue & Associates for the Fond du Lac Avenue Water Booster Station to the council for approval. Alderperson Bigler seconded the motion. The motion was carried with a unanimous voice vote of the committee.

Mayor Meyer suspended the Committee of the Whole meeting at 6:32 P.M. for the Common Council Meeting.

The Committee of the Whole reconvened at 6:38 P.M.

III. PROPERTY

The committee discussed the language in Chapter 17 of the Zoning Code, specifically Section 17.08.70 Nostalgic District (R7). The committee supported the future amendment of the language concerning square footage of first and second floors of new one and two-family residences.

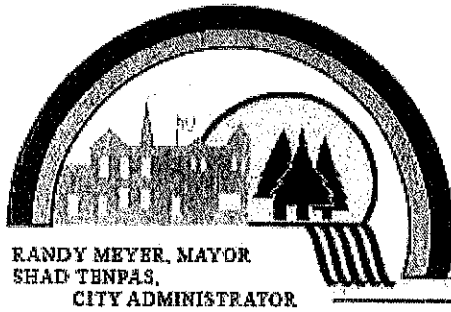
IV. ECONOMIC DEVELOPMENT

Alderperson Mayer moved to go into closed session pursuant to WI State Statute 19.85 (1)(E)-Deliberating or negotiating the purchasing of public properties, the investing of public funds, or conducting other specified public business, whenever competitive or bargaining reasons require a closed session. The committee returned to open session on a unanimous voice vote of the committee.

Mayor Meyer closed the Committee of the Whole meeting at 7:28 P.M.

Randy J. Meyer, Mayor

Paul Seymour, City Clerk



City of SHEBOYGAN FALLS

February 8, 2023

Wisconsin Department of Transportation DTSD NE Region Traffic
Rod Hamilton
944 Vanderperren Way
P.O. Box 28080
Green Bay, WI 54324-0080

Dear Mr. Hamilton;

The City of Sheboygan Falls requests a speed reduction on Highway 32 from the roundabout to Willow Road, which is less than one mile. Currently the speed limit is 45 mph, we request the speed limit be dropped to 35 mph. An increase in residential and business growth in this area makes reducing the speed limit a public safety priority.

Recent development:

- Kwik Trip
- Plankview Green shopping center (full),
- Plank Trail Apartments (96 units),
- Healthy Paws Veterinary Clinic Second Expansion,
- Meadowland Credit Union,
- Hotel Major Remodel,
- Vintage Willow Subdivision (Willow Road is now a connector road),
- Increased Pine Haven Nursing Home traffic

Upcoming development:

- 54 homes and 25 duplexes to be completed in the next two years
- proposed 40-unit apartment building

There is a major development happening that will add to the traffic flow. In particular, I want to highlight the Sheboygan County Economic Development Corporations innovative plan to construct 104 housing units in the next two years (54 single family homes and 25 duplexes). Four Sheboygan County companies (Kohler Company, Sargento, Masters Gallery, and Johnsonville Foods) have each put \$2,000,000 into a fund to build reasonably priced workforce housing, allowing the completion of the entire project by the end of 2025.

Attached is a map showing the growth I referenced above.

You will not find a single City of Sheboygan Falls resident who does not support this speed reduction. All the growth and increased traffic in this area, makes the speed reduction imperative to public safety. Our Police Department is prepared to educate the public and enforce the new speed limit, as they have successfully done when we made other speed reductions in Sheboygan Falls.

Sincerely,

Randy Meyer, Mayor

Shad Tenpas, City Administrator

Aaron Wigen, Police Chief/Director of Public Safety

Scott Hoogester, Deputy Police Chief

Jerry Benzschawel, Director of Public Works

Chris Wesendorf, Fire Chief

Al Mayer, District 1 Alderperson

Terry Van Engen, District 1 Alderperson

Pete Weber, District 2 Alderperson

Rachel Howard, District 2 Alderperson

Tom Bigler, District 3 Alderperson

Jacob Immel, District 3 Alderperson

Original Alcohol Beverage Retail License Application

(Submit to municipal clerk.)

For the license period beginning: 2.1.23 ending: 6.30.23
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: Town of } Sheboygan Falls
 Village of }
 City of }

County of Sheboygan 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>456-1031200757-04</u>	
FEIN Number <u>42-1694444</u>	
TYPE OF LICENSE REQUESTED	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$ 1.00
<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	\$ 2.00
<input type="checkbox"/> Reserve Class B liquor	\$
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$ 50
TOTAL FEE	\$ 350

Name (Individual / partners give last name, first, middle; corporations / limited liability companies give registered name)
OFC, Acquisition, 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	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
<u>Kroemer</u>	<u>Scott</u>	<u>R</u>	<u>1121 Forest Hills Dr Howard's Grove WI 53083</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	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

1. Trade Name Odyssey Fun Center Business Phone Number 920 467 3578
 2. Address of Premises 100 Haman Dr Post Office & Zip Code Sheboygan Falls 53085

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.)

One story of metal building, Lounge, Bowling lanes, Restaurant & volleyball court

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

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 Wisconsin and date 11/3/23 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>Scott Kraemer R</u>	Title/Member <u>President</u>	Date <u>2/1/23</u>
Signature <u>[Signature]</u>	Phone Number <u>920 377 0139</u>	Email Address <u>odysseysk@sbloglobal.net</u>

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
Date license granted	Date license issued	License number issued	

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

Submit to municipal clerk.

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

To the governing body of: Town Village City of Sheboygan Falls County of Sheboygan

The undersigned duly authorized officer/member/manager of Odyssey Fun Center
(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 Odyssey Fun Center
(Trade Name)

located at 100 Hamann Drive

appoints Scott Kraemer
(Name of Appointed Agent)

1121 Forest Hills Dr
(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? 50 year

Place of residence last year 1121 Forest Hills Dr

For: Odyssey Fun Center
(Name of Corporation / Organization / Limited Liability Company)

By: [Signature]
(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, _____, 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.

(Signature of Agent) _____
(Date) Agent's age _____

(Home Address of Agent) Date of birth _____

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

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

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

Auxiliary Questionnaire Alcohol Beverage License Application

Submit to municipal clerk.

Individual's Full Name (please print) (last name)		(first name)		(middle name)	
Kraemer		Scott		Richard	
Home Address (street/route)	Post Office	City	State	Zip Code	
1121 Forest Hills Dr	53083	Howards Grove	WI	53083	
Home Phone Number	Age	Date of Birth	Place of Birth		
920 377 0139	50	12/19/72	Sheboygan		

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

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

which is making application for an alcohol beverage license.

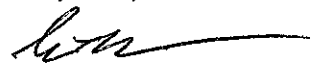
The above named individual provides the following information to the licensing authority:

- How long have you continuously resided in Wisconsin prior to this date? 50 years
- Have you ever been convicted of any offenses (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of any other states or ordinances of any county or municipality? Yes No
If yes, give law or ordinance violated, trial court, trial date and penalty imposed, and/or date, description and status of charges pending. (If more room is needed, continue on reverse side of this form.)
- Are charges for any offenses presently pending against you (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of other states or ordinances of any county or municipality? Yes No
If yes, describe status of charges pending.
- Do you hold, are you making application for or are you an officer, director or agent of a corporation/nonprofit organization or member/manager/agent of a limited liability company holding or applying for any other alcohol beverage license or permit? Yes No
If yes, identify. _____
(Name, Location and Type of License/Permit)
- Do you hold and/or are you an officer, director, stockholder, agent or employe of any person or corporation or member/manager/agent of a limited liability company holding or applying for a wholesale beer permit, brewery/winery permit or wholesale liquor, manufacturer or rectifier permit in the State of Wisconsin? Yes No
If yes, identify. _____
(Name of Wholesale Licenses 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
Scott Kraemer	1121 Forest Hills Dr	Howards Grove 97	present
Employer's Name	Employer's Address	Employed From	To

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


(Signature of Named Individual)



January 9, 2023

Paul Seymour
City of Sheboygan Falls,
Sheboygan Falls, WI 53085

Dear Paul,

I am hereby notifying you that Odyssey Fun Center, Inc. will surrender its liquor license contingent upon the Common Council approving the license application for Scott Kraemer's new LLC/ Corp.

Please let me know if there is anything else that you need.

Sincerely,

A handwritten signature in black ink, appearing to read "David L. Bardon", written over a horizontal line.

David L. Bardon
Owner



[Help](#) | [Apply for New EIN](#) | [Exit](#)

EIN Assistant

- Your Progress:
- 1. Identity ✓
- 2. Authenticate ✓
- 3. Addresses ✓
- 4. Details ✓
- 5. EIN Confirmation

Congratulations! The EIN has been successfully assigned.

EIN Assigned: **92-1694444**

Legal Name: **OFC ACQUISITION LLC**

The confirmation letter will be mailed to the applicant. This letter will be the applicant's official IRS notice and will contain important information regarding the EIN. Allow up to 4 weeks for the letter to arrive by mail.

We strongly recommend you print this page for your records.

Click "Continue" to get additional information about using the new EIN.

[Continue >>](#)

Help Topics



[Can the EIN be used before the confirmation letter is received?](#)

[IRS Privacy Policy](#) | [Accessibility](#)



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

Contact Information:

2135 RIMROCK RD PO BOX 8902
 MADISON, WI 53708-8902
 ph: 608-266-2776 fax: 608-224-5761
 email: DORBusinessTax@wisconsin.gov
 website: revenue.wi.gov

Letter ID L1545980368

OFC ACQUISITION, LLC
 100 HAMANN DR
 SHEBOYGAN FALLS WI 53085-3329

Wisconsin Department of Revenue Seller's Permit

Legal/real name: OFC ACQUISITION, LLC
Business name: OFC ACQUISITION, LLC
 100 HAMANN DR
 SHEBOYGAN FALLS WI 53085-3329

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

Tax Type	Account Type	Account Number
Sales & Use Tax	Seller's Permit	456-1031200757-04

Licensing Year: 2023

APPLICATION FOR ANIMAL FANCIER PERMIT

Fee: \$100

In addition to the Animal Fancier Permit, each animal MUST be individually licensed

Last Name	Schultz	First Name	Gina
Address	336 Pine St		
Phone Number	920-918-3333		

Maximum Total of 6 Animals

Animal 1 Dog Cat

Name	Benji	Breed	Maltese/Poodle
License Number	31222	Rabies Tag Number	
Rabies Vaccination Date	3/25/2022	Rabies Vaccination Exp. Date	3/24/2025

Animal 2 Dog Cat

Name	Jessie	Breed	Maltese/Poodle
License Number	31221	Rabies Tag Number	
Rabies Vaccination Date	10/25/2021	Rabies Vaccination Exp. Date	10/24/2024

Animal 3 Dog Cat

Name	Duke	Breed	Maltese/Poodle
License Number	31220	Rabies Tag Number	
Rabies Vaccination Date	10/25/2021	Rabies Vaccination Exp. Date	10/24/2024

Animal 4

Dog

Cat

Name	Tyson	Breed	Chihuahua
License Number	31219	Rabies Tag Number	
Rabies Vaccination Date	10/14/2021	Rabies Vaccination Exp. Date	10/13/2024

Animal 5

Dog

Cat

Name	Bella	Breed	Maltese/Poodle
License Number	31218	Rabies Tag Number	
Rabies Vaccination Date	1/9/2021	Rabies Vaccination Exp. Date	1/9/2024

Animal 6

Dog

Cat

Name	Jack	Breed	Border Collie/Terrier
License Number	31217	Rabies Tag Number	
Rabies Vaccination Date	1/10/22	Rabies Vaccination Exp. Date	1/9/2025

Total Permit Fee: \$100

Signature of Applicant: _____

Date: _____

Permit expires on December 31st of the licensing year.