

AGENDA FOR REGULAR MEETING OF COMMON COUNCIL

To be held on Tuesday, September 21, 2021 at 6:30 P.M. in the City Hall
Council Chambers, 30 West Central Street, Chippewa Falls, WI

The meeting may be viewed via livestream at the
www.chippewafalls-wi.gov/council live stream link.

1. **CLERK CALLS THE ROLL**
2. **APPROVAL OF MINUTES OF PREVIOUS MEETING**
 - (a) Approve minutes of the Regular Council Meeting of September 7, 2021.
3. **PERSONAL APPEARANCES BY CITIZENS** - No matter presented by a citizen shall be acted on at the meeting except in emergencies affecting the public health, safety or welfare.
4. **PUBLIC HEARINGS** – None
5. **COMMUNICATIONS** – None
6. **REPORTS**
 - (a) Consider Board of Public Works minutes of September 13, 2021.
 - (b) Consider Plan Commission minutes of September 13, 2021.
7. **COUNCIL COMMITTEE REPORTS** in the order in which they are named in Section 2.21 of the Municipal Code
 - (a) Park Board minutes of September 14, 2021.
 - (b) Library Board minutes of August 18, 2021.
8. **APPLICATIONS**
 - (a) Consider Original Alcohol Beverage Retail License Application of A-1 Properties, LLC, William Proud, Agent, for a Reserve Class “B”/“Class B” Intoxicating Liquor and Malt Beverage License for the Eagle Ridge Festival Grounds, 2302 Nelson Road.
 - (b) Consider Applications for Temporary Class “B” Beer Retailer’s License from the Chippewa Youth Hockey Association for the Chippewa Steel games to be held at 839 First Avenue on various dates in accordance with the attached applications.
 - (c) Consider Application for Temporary Class “B” Beer Retailer’s License from the Chippewa Youth Hockey Association for a WI Badgers vs. Duluth Bulldogs Pre-Season Scrimmage to be held at 839 First Avenue on October 3, 2021.
 - (d) Consider Street Use Permit Application from Chippewa Falls Main Street for Paint the Town Pink to be held on October 7, 2021 from 3:00 pm – 7:00 pm utilizing the 100 – 500 blocks of N Bridge Street.
 - (e) Consider Street Use Permit Application from the Chippewa County Recycling Program for the Chippewa County Clean Sweep to be held on Saturday, October 23, 2021 from 7:00 am – 12:15 pm utilizing Charles Street as the entrance to the Northern Wisconsin State Fairgrounds and North Street as an exit.
9. **PETITIONS** - None
10. **MAYOR ANNOUNCES APPOINTMENTS** - None
11. **MAYOR’S REPORT**
 - (a) Proclamation declaring September 20 – 26, 2021 as National Rail Safety Week.
12. **REPORT OF OFFICERS** - None
13. **ORDINANCES**
 - (a) Consider **Ordinance #2021-15 Entitled:** An Ordinance Repealing and Terminating Committee No. 5 as a Standing Committee under §2.21(5) of the City Code of Ordinances.

14. RESOLUTIONS

(a) Consider **Resolution #2021-40 Entitled:** Resolution Approving a Certified Survey Map (dividing a lot at 1830 Wheaton Street into two).

15. OTHER NEW OR UNFINISHED BUSINESS AS AUTHORIZED BY LAW

(a) Review, discuss, and consider adjustments to City Aldermanic Districts and Ward boundaries based upon the Tentative County Supervisory District Plan.

(b) Discuss and consider Supplemental Letter Agreement from SEH for support services for the City Fuel System Upgrade, 5 Bjork-Riverside Drive.

(c) Discuss and consider Lease Agreement for Family Dollar Parking Lot located at the SE Corner of Bay Street and Central Street.

16. CLAIMS

(a) Consider claims as recommended by the Claims Committee.

17. CLOSED SESSION - None

18. ADJOURNMENT

The Claims Committee will meet at 6:00 PM to review the claims of various boards and departments of the City.

NOTE: REASONABLE ACCOMMODATIONS FOR PARTICIPATION BY INDIVIDUALS WITH DISABILITIES WILL BE MADE UPON REQUEST. FOR ADDITIONAL INFORMATION OR TO REQUEST THIS SERVICE, CONTACT THE CITY CLERK AT 726-2719.

Due to COVID-19, public attendance is at your own risk.

Please note that attachments to this agenda may not be final and are subject to change.

This agenda may be amended as it is reviewed.

CERTIFICATION OF OFFICIAL NEWSPAPER

I, hereby, certify that a copy of this notice has been posted on the bulletin board at City Hall and a copy has been given to the Chippewa Herald on September 18, 2021 at 10:00 am by BNG.

MINUTES OF THE REGULAR MEETING OF THE COMMON COUNCIL

The regular meeting of the Common Council of the City of Chippewa Falls was held on Tuesday, September 7, 2021 in the City Hall Council Chambers. Council President Chuck Hull called the meeting to order at 6:30 pm. The Pledge of Allegiance was recited.

CLERK CALLS THE ROLL

Council Members present: John Monarski, Rob Kiefer, Christopher Gilliam, Hayden Frey, and Jason Hiess. Absent was Paul Nadreau.

Also Present: City Attorney Robert Ferg; Finance Manager/Treasurer Lynne Bauer; Director of Public Works/City Engineer/Utilities Manager Rick Rubenzer; City Planner/Transit Manager Brad Hentschel; Police Chief Matt Kelm; Fire Chief Lee Douglas; Library Director Joe Niese; Assistant City Engineer Bill McElroy; City Clerk Bridget Givens; and those on the attached sign-in sheet.

APPROVAL OF MINUTES OF PREVIOUS MEETING

(a) **Motion by Kiefer/Monarski** to approve the minutes of the Regular Council Meeting of August 17, 2021. **All present voting aye, motion carried.**

PERSONAL APPEARANCES BY CITIZENS

(a) Rick Flynn, 1304 Perry Street, appeared to state that the City should explore a public safety referendum.

PUBLIC HEARINGS - None

COMMUNICATIONS - None

REPORTS

(a) **Motion by Hiess/Frey** to approve the Board of Public Works minutes of August 23, 2021. It was noted that Item #4 of the minutes referencing a quit claim deed for a portion of a parcel to Daniel and Robert Burtness was not necessary as the City does not own the property as initially thought. Attorney Ferg advised it would be permissible to approve the minutes as is; the quit claim deed would just not be prepared. **All present voting aye, motion carried.**

(b) **Motion by Kiefer/Hiess** to approve the BID Board minutes of August 31, 2021. Councilor Hiess questioned the amount of the second payment of the 2021 BID funding. City Planner/Transit Manager Hentschel advised it is \$34,650. **Roll Call Vote: Aye – Kiefer, Hiess, Monarski, Gilliam, Frey. Motion carried.**

COUNCIL COMMITTEE REPORTS in the order in which they are named in Section 2.21 of the Municipal Code

(a) **Motion by Kiefer/Gilliam** to approve the Joint Committee #1 Revenues, Disbursements, Water and Wastewater and Committee #2 Labor Negotiations, Personnel, Policy and Administration minutes of September 2, 2021. Discussion was had regarding setting the Police Department residency requirement at 45 minutes from the City Limits. It was noted that is becoming the standard in neighboring departments. This, combined with reducing the minimum age requirements for officers, should assist with recruitment efforts. **Roll Call Vote: Kiefer, Gilliam, Frey, Hiess, Monarski. Motion carried.**

(b) **Motion by Gilliam/Hiess** to approve the Committee #1 Revenues, Disbursements, Water and Wastewater minutes of September 2, 2021. Discussion was had relative to the status of the new EMS Response Vehicles and the method of disposition for the old rescue boat. **Roll Call Vote: Aye – Gilliam, Hiess, Monarski, Kiefer, Frey. Motion carried.**

(c) **Motion by Monarski/Gilliam** to approve the Committee #3 Transportation, Construction, Public Safety and Traffic minutes of September 1, 2021. Clerk Givens advised that she spoke with Bill Proud of A-1 Properties and advised him of the Committee's recommended action to not revise the ordinance to exempt seasonal businesses from the 20-hour per week requirement. Mr. Proud is still interested in obtaining the reserve liquor license but could not be at the meeting. The Council discussed concern with awarding a liquor license to an establishment that could not use it on a full-time basis in addition to rules not being applied consistently to all liquor license holders. **Roll Call Vote: Aye – Monarski, Gilliam, Frey, Hiess, Kiefer. Motion carried.**

(d) **Motion by Monarski/Kiefer** to approve the Committee of the Whole minutes of August 31, 2021. **All present voting aye, motion carried.**

COUNCIL COMMITTEE REPORTS (continued)

- (e) The Library Board Minutes of July 14, 2021 were presented.
- (f) The Library Board Minutes of August 4, 2021 were presented.

APPLICATIONS

Motion by Monarski/Kiefer to consider items (a) – (d) in one motion. **All present voting aye, motion carried.**

Motion by Monarski/Hiess to approve items (a) – (d) as follows:

- (a) Street Use Permit Application from Brian Flug on behalf of the Chippewa Falls Senior High School for the Homecoming Parade and Bonfire on September 17, 2021 utilizing various City Streets and to charge for requested City services.
- (b) Application for Temporary Class "B"/"Class B" Beer and Wine Retailer's License from the Tilden Lions Club for the Tilden Lions Mega Raffle to be held at the Knights of Columbus, 236 Pumphouse Road, on October 9, 2021.
- (c) Application for Temporary Class "B"/"Class B" Beer and Wine Retailer's License from the McDonell Athletic Booster Club for the 31st Annual Spirit of the Macks to be held at McDonell Central Catholic High School, 1316 Bel Air Blvd, on October 2, 2021.
- (d) Application for Temporary Class "B"/"Class B" Beer and Wine Retailer's License from the Church of Notre Dame for the Notre Dame Summer Event to be held on September 17 – 19, 2021 at 22 S Prairie Street.

All present voting aye, motion carried.

PETITIONS - None

MAYOR ANNOUNCES APPOINTMENTS - None

MAYOR'S REPORT - None

REPORT OF OFFICERS - None

ORDINANCES

(a) The First Reading of **Ordinance #2021-15 Entitled:** An Ordinance Repealing and Terminating Committee No. 5 as a Standing Committee under §2.21(5) of the City Code of Ordinances was held.

RESOLUTIONS

- (a) **Motion by Kiefer/Frey** to approve **Resolution #2021-38 Entitled:** Resolution Approving a Certified Survey Map (Lots 4, 5, and 6 – Tropicana City Addition). Councilor Hiess referenced corrections that should be made to the CSM prior to execution. **Roll Call Vote: Aye – Kiefer, Frey, Hiess, Monarski, Gilliam. Motion carried.**
- (b) **Motion by Kiefer/Gilliam** to approve **Resolution #2021-39 Entitled:** Resolution Regarding Exemption from Library Levy. **Roll Call Vote: Aye – Kiefer, Gilliam, Frey, Hiess, Monarski. Motion carried.**

OTHER NEW/UNFINISHED BUSINESS - None

CLAIMS

(a) **Motion by Kiefer/Monarski** to approve the claims as recommended by the Claims Committee.

City General Claims:	\$633,404.65
Authorized/Handwritten Claims:	\$382,898.91
Department of Public Utilities:	\$99,529.32
Total of Claims Presented	<u>\$1,115,832.88</u>

Roll Call Vote: Aye – Kiefer, Monarski, Gilliam, Frey, Hiess. Motion carried.

CLOSED SESSION

(a) **Motion by Monarski/Kiefer** to go into Closed Session under Wis. Stats. Sec. 19.85(1)(e) for "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" to discuss and consider the following:

- a. EMS per capita rates; and to include Council, Mayor, Ferg, Bauer, Douglas, and Givens; may return to Open Session for possible action on Closed Session item.

Roll Call Vote: Aye – Monarski, Kiefer, Gilliam, Frey, Hiess. Motion carried.

Council discussed item (a) above.

Motion by Monarski/Kiefer to return to Open Session. All present voting aye, motion carried.

ADJOURNMENT

Motion by Monarski/Frey to adjourn at 7:19 pm. All present voting aye, motion carried.

Submitted by:
Bridget Givens, City Clerk

CITY COUNCIL ATTENDANCE SHEET - September 7, 2021

NAME	ADDRESS
Rick Flynn	1304 Perry CF

**CITY OF CHIPPEWA FALLS
BOARD OF PUBLIC WORKS
MEETING MINUTES
MONDAY, SEPTEMBER 13, 2021 – 5:30 PM**

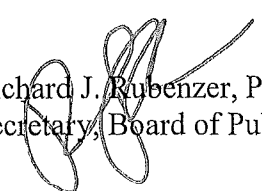
The Board of Public Works met in City Hall on Monday, September 13, 2021 at 5:30 PM. Attending were Vice-President Tom Hubbard, Director of Public Works Rick Rubenzer P.E., Finance Manager Lynne Bauer and Alderperson Hayden Frey. Mayor Greg Hoffman was absent.

1. **Motion** by Bauer, seconded by Frey to approve the minutes of the August 23, 2021 Board of Public Works meeting. **All present voting aye. MOTION CARRIED.**

2. The Board of Public Works considered and discussed the attached five year parking lot lease agreement with Family Dollar. The prevailing idea is that the parking lot is used far less by the public than in years past and mainly for Family Dollar customers. A compromise was proposed to keep the same terms as the 2016-2021 lease except to shorten the lease time to two years. Director of Public Works Rubenzer noted the existing lease was set to expire in October, 2021. **Motion** by Hubbard, seconded by Bauer to recommend the Common Council renew the lease with Family Dollar for public use of the parking lot at the southeast corner of Bay Street and Central Street under the same terms as the 2016-2021 lease except to shorten the length of the lease to two years. Also, to authorize Mayor Hoffman to execute the said lease. **All present voting aye. MOTION CARRIED.**

3. The Board of Public Works considered two proposals for replacement of the City wide diesel and unleaded fueling station. Proposals were submitted by Ayres Associates Inc. and S.E.H. Inc. Proposals were ranked according to work program, project schedule, previous experience, key personnel and roles, familiarity with locality, level of effort and not to exceed fee. The proposals were evaluated and rated by Director of Public Works Rubenzer, Assistant City Engineer McElroy and Street Manager Ruf. The results of the rankings are attached. Director of Public Works Rubenzer stated that both proposals submitted were excellent proposals and that he would be happy working with either engineering company. He continued that the evaluation ranking revealed that S.E.H. was the higher ranked. Director of Public Works Rubenzer stated that the proposal amounts for Task 1, Task 2, Task 3, Option 3, Task 4 and Task 5 were Ayres \$62,894 and S.E.H. \$48,360. The Board of Public Works also discussed the project schedule and new fueling station location. **Motion** by Hubbard, seconded by Frey to recommend the Common Council accept the proposal from S.E.H. Inc. and award the City refueling station project to S.E.H. Inc. and authorize Mayor Hoffman to execute the corresponding project agreement. **All present voting aye. MOTION CARRIED.**

4. **Motion** by Bauer, seconded by Frey to adjourn. **All present voting aye. MOTION CARRIED.** The Board of Public Works meeting adjourned at 5:47 P.M.


Richard J. Rubenzer, PE
Secretary, Board of Public Works

**CITY OF CHIPPEWA FALLS
BOARD OF PUBLIC WORKS
MEETING MINUTES
MONDAY, AUGUST 23, 2021 – 5:30 PM**

The Board of Public Works met in City Hall on Monday, August 23, 2021 at 5:30 PM. Attending were Mayor Greg Hoffman, Director of Public Works Rick Rubenzer P.E., Finance Manager Lynne Bauer, Alderperson Hayden Frey and Tom Hubbard. Assistant City Engineer Bill McElroy P.E. also attended and those on the attached attendance roster.

1. **Motion** by Hubbard, seconded by Bauer to approve the minutes of the July 26, 2021 Board of Public Works meeting. **All present voting aye. MOTION CARRIED.**

2. Jim Schuh and Frank Smoot appeared on behalf of the Chippewa Area History Center (CAHC) to request that eleven CAHC blue guidance/directional signs be placed on existing poles around the city as shown on the attachment. Director of Public Works Rubenzer stated that the city had adopted Wisconsin Department of Transportation rules and guidance for placement of blue guidance/directional signs in public right-of-way and that the city controlled this type of sign placement along connecting highways (in this case STH #124). Director of Public Works Rubenzer continued that the Park Board was in the process of requesting placement of similar guidance/directional signage around the city for Irvine Park and that this may be an opportunity for doubling up since both locations are essentially the same. Director of Public Works Rubenzer continued that signage in or along the Riverfront at River and Bridge streets had been previously and is currently discouraged. He stated that people looking for a destination generally use GPS these days but that signs within a couple of blocks of the destination (in this case Bridgewater Avenue and Jefferson Avenue-STH #124) make sense. Mr. Schuh stated that the signs were requested at high traffic locations where more motorists would see them. Mr. Smoot laid out a tentative schedule hoping for completion of the Chippewa Area History Center around February 2022. Mayor Hoffman suggested CAHC representatives discuss possible dual signage with Park and Recreation Director John Jimenez and the Park Board. Director of Public Works Rubenzer will discuss the sign request with West Central Regional Plan Commission. **No action was taken.**

3. The Board of Public Works considered the request for exception to Chippewa Falls Municipal Code 8.06(5)(f) seven year street cut moratorium from St. Charles to install a two inch water service in Spruce Street due to unforeseen circumstances. Director of Public Works Rubenzer stated that Spruce Street paving was five years old and that he didn't believe St. Charles could have anticipated the need for a 2" water service in 2016 when Spruce Street was reconstructed. He stated he had no issues with granting the exception to Chippewa Falls Municipal Code 8.06(5)(f).
Motion by Hoffman, seconded by Hubbard to grant the request for exception to Chippewa Falls Municipal Code 8.06(5)(f) seven year street cut moratorium from St. Charles to install a two inch water service in Spruce Street due to unforeseen circumstances. **All present voting aye. MOTION CARRIED.**

4. Dan and Roberta Burtness appeared to request that part of parcel #22809-1241-60790004 be quit claimed to them as about a third of a pole shed they own encroached onto the parcel. Burtness's have recently purchased the property from Ronald and Janice Gantner who previously obtained the parcel from Floyd Hallum. Mr. Burtness provided the attached documentation showing the Railroad quit claimed (Deed #268427) the parcel to

Please note, these are draft minutes and may be amended until approved by the Common Council.

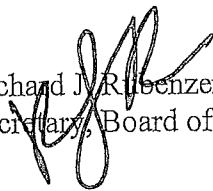
Hallum's in 1953 for \$183. Director of Public Works Rubenzer stated that the city obtained this parcel from American Materials Corporation in 1976 for \$8,500 and received the attached Quit Claim Deed #386157 (recorded December 2, 1976). He continued that he believes that is why the Chippewa County GIS map lists the City of Chippewa Falls as the owner. Director of Public Works Rubenzer stated his opinion was that the parcel could be sold or quit claimed to the Burtness's. Attorney Ferg had opined that if the pole shed had been there for a long time, it would probably constitute adverse possession for the area that it is on and advised to either take no action or solicit a proposal with an appropriate legal description for the area that the shed is on.

Motion by Hoffman, seconded by Hubbard to recommend the Common Council quit claim part of a parcel around a pole shed encroaching on parcel #22809-1241-60790004 to Daniel and Roberta Burtness. **Voting Aye were Hoffman, Hubbard, Frey and Rubenzer.**
Voting nay was Bauer. MOTION CARRIED.

5. Assistant City Engineer Bill McElroy presented background information and a history of Prentice Street between Morris Street and Fourth Avenue (see attached). After discussion about the project, Assistant City Engineer McElroy will review possible segments of Prentice Street to present to the Board of Public Works for inclusion in the Five Year Street Improvement Program and propose moving other proposed projects down the list. **No Action Taken.**

6. Assistant City Engineer McElroy presented background information and a history of River Street between Bridge Street and USH #53 (see attached). The Board of Public Works discussed when the segment between Fleet Street and USH #53 might be reconstructed and funding alternatives for the same.
Motion by Hoffman, seconded by Hubbard to recommend the Common Council move forward with bonding for reconstruction of River Street between Fleet Street and USH #53 in 2023. **All present voting aye. MOTION CARRIED.**

7. **Motion** by Hubbard, seconded by Bauer to adjourn. **All present voting aye. MOTION CARRIED.** The Board of Public Works meeting adjourned at 7:00 P.M.


Richard J. Rubenzer, PE
Secretary, Board of Public Works

BOARD OF PUBLIC WORKS ATTENDANCE SHEET

DATE: August 23, 2021

NAME	COMPANY REPRESENTING	ADDRESS	PHONE #	EMAIL
DANIEL BURTNESS		4535 - 167 st	715 829 7400	
ROBERTA BURTNESS		4535 117th St. C.F	715-829-2858	
JIM SCHUKA	Chippewa County Agricultural Society	5432 198th St. C.F	715-726-2276	
FRANK SMOOT	"	321 EAST GREENVILLE	715 225 - 7469	

Law Offices Of
Ferg & Sinclair, Ltd.
411 North Bridge Street
Chippewa Falls, Wisconsin 54729-2420
Telephone (715) 723-4443
Fax (715) 723-5905

BMO Harris Bank
Enter Back Lobby
Elevator Or Stairs
2nd Floor, Suite 201

Robert A. Ferg
Vance I. Sinclair (1915-2007)

August 2, 2016

The Ladner Group
ATTN: JASON LADNER & SANDY MARTINO
8555 W. Forest Home Ave., Ste. 205
Greenfield, WI 53228

RE: Family Dollar
Chippewa Falls, WI

Dear Jason Ladner & Sandy Martino:

This letter is coming to you in my capacity as City Attorney for the City of Chippewa Falls. The enclosed Lease Agreement needs to be executed before October 1st. The Chippewa Falls Department of Public Works and the Chippewa Falls Common Council are firm in their decision that the City is only interested in leasing this parking space with the conditions set forth in the enclosed Lease Agreement.

If this is not acceptable and the Lease Agreement is not executed and returned by October 1st, then Family Dollar will have to assume parking enforcement and winter maintenance beginning with the 2016-17 winter season.

Thank you.

Very truly yours,
FERG & SINCLAIR, LTD



Robert A. Ferg
RAF/hlm

cc: Mayor Gregory S. Hoffman
City Clerk Bridget Givens
Public Works Director Richard Rubenzer

LEASE AGREEMENT

THIS LEASE, made between Family Dollar, Lessor, and the City of Chippewa Falls, Lessee,

WITNESSETH:

1. The Lessor does hereby let and lease unto the Lessee the following described lands in the City of Chippewa Falls, Chippewa County, Wisconsin:

Lot 2, Block 21 of the City of Chippewa Falls Plat, Chippewa County, Wisconsin. Except the area used in conjunction with the loading dock and the single parking stall North and adjacent to the loading dock. Also excepting an 8'x12' area located along the West edge of the building, and the South right-of-way line of Central Street. Said 8'x12' area is used as a public doorway.

Located at 33 West Central Street.

2. The term of the Lease shall be five years. However, either party may terminate this lease for any reason or without reason or cause upon delivery of written notice to the other of termination not less than 120 days thereafter.
3. In consideration thereof, Lessee shall:
- a) Sign and enforce a 2 hour non-metered parking limit.
 - b) Sweep and remove snow on the regular schedule as performed on municipal owned parking lots.
 - c) Provide liability insurance coverage with limits of \$100,000.00 and \$300,000.00 and a \$1,000,000.00 umbrella. Lessor shall also continue its' own liability insurance in the same amounts covering the leased premises.
4. This Lease shall bind the parties hereto, their representatives and assigns and shall go into effect upon signatures herein.
5. Lessor may place, at Lessor's expense, a sign on the leased property, provided any such sign complies with the City's sign code.

Dated this _____ day of _____, 2021.

FAMILY DOLLAR, LESSOR

CITY OF CHIPPEWA FALLS, LESSEE

By: _____

By: _____
Gregory S. Hoffman, Mayor
Bridget Givens, City Clerk

City of Chippewa Falls Refueling System/Station

TOTALS SUMMARY SHEET

		Consultant	
		S.E.H. Inc.	Ayres Assoc.
Summary of Rating of Consultant from RFQ Submittals		Total Points possible	3 person Summary
Rating System: 1-5; 1 = Poor, 3 = Average/Fair, 5 = Excellent			3 person Summary
City of Chippewa Falls Refueling System/Station			
1	Work Program	90	79
2	Project Schedule	30	19
3	Previous experience	60	59
4	Key Personnel and Roles	30	29
5	Familiarity with local geography, area and project issues	30	30
6	Level of Effort	30	22
7	Not to Exceed fee	30	30
		300	263
			254

City of Chippewa Falls Refueling System/Station

Name of Evaluator

Rick Rubenzer, Rick Ruf, Bill McElroy

Date Ranking was done

September 16, 17, and 20

BPW09/13/2021

Itemized Budget/Estimate

Ayres' fee for engineering and design consulting services related to the UST system removal, associated closure TSSA, AST fuel distribution system installment, SPCC plan updates, and additional services are provided below.

This is a Time and Material T&M not-to-exceed fee according to the breakout of project tasks listed in the table.

ITEM	COSTS
Task 1 - Tank System Site Assessment	\$5,560
Task 2 - SPCC Plan Updates	\$5,358
Task 3 - Engineering for New AST System	
Option 1	\$14,017
Option 2	\$22,618
Option 3	\$31,877
Subtotal	\$24,935 - \$42,795
ADDITIONAL SERVICES (OPTIONAL)	
Task 4 - Regrading Plans and Surveying	\$7,956
Task 5 - Construction Oversight Services	\$12,143
Total (including additional services, if requested)	\$45,034 - \$62,894

Notes: Fees are for A/E direct labor, direct expenses from laboratory testing, and associated expenses related to individual tasks. See Detailed A/E Fee Breakdown Sheet for further breakdown of tasks in Level of Effort and estimated fees (LOE).

Personnel Fee Schedule

PERSONNEL HOURLY RATE SCHEDULE	
CLASSIFICATION	2021 HOURLY RATE
Manager 2	\$183.90
Scientist 2	\$108.01 - \$111.60
Scientist 3	\$129.28 - \$133.60
Engineer 3	\$148.74
Engineer 1	\$87.85
Technician 5	\$98.22
Surveyor	\$94.50 - \$104.74
Administrative Assistant	\$66.84 - \$78.75

Costs

SEH

The removal of the UST system must be performed by a state certified tank remover/cleaner. The UST system removal services will be contracted directly between the City and the remover/cleaner contractor. Therefore, costs for UST system excavation, cleaning, removal and disposal and related or ancillary services are not included herein.

SEH proposes the following SEH fees per task per the RFP:

TASK	DESCRIPTION	SCOPE	PROPOSED COST
1	Tank System Site Assessment (Soil Sampling) for UST System Removal	Soil sampling (assumes 28 samples), lab analysis, regulatory reporting including tank closure/removal oversight.	\$3,730
2	SPCC Plan Updates for New AST System	Site visit, drafting of SPCC plan and figures (price dependent on existing plan details and suitability).	\$3,930
3	Engineering for New Above Ground Storage Tank(AST) System		
	Option 1 (does not include bid package preparation)	Client Request for Information (RFI) on fuel system install, tech specs and single sheet conceptual design drawing, submittal review (If incorporated into a bid set and contractor will seek approval from the Department of Agriculture Trade and Consumer Protection [DATCP]).	\$11,000
	Option 2	Client RFI, front end specs with pre-qual, tech specs, bid package drawings, DATCP Plan Review, bid assistance with walkthrough.	\$18,000
	Option 3	Client RFI, front end specs with pre-qual, tech specs, bid package drawings, DATCP Plan Review, bid assistance, submittal reviews, progress meetings, two site visits, closeout with as-builts.	\$23,700
4 optional	Regrading Plans and Surveying	Survey and regrading design (two new plan sheets, tech specs and incorporate in remaining bid package drawings) to occur (ballpark range with need to be adjusted if site grading is adjusted).	\$5,450
5 optional	Construction Oversight Services	Approximately 100 hours of field oversight and administrative services.	\$11,550

The fee provided for the TSSA in the table above is based on the assumption that SEH's certified site assessor does not provide construction observation services during the remover/cleaner contractor's complete tank system cleaning, excavation, backfill and site restoration project. Rather, the fee estimate is based on the site assessor being on site at appropriate times to collect samples from the floor(s) and sidewall(s) of the excavation(s), as well as beneath piping runs and dispensers, as warranted.

If full observation services are required, many factors such as field conditions, weather, contractor equipment, tank system condition, configuration and others will drive the actual amount of time in the field and that can vary substantially. For purposes of this proposal, and if requested by the City, we assume that up to an additional 20 hours (\$2,100) of field and documentation time may be necessary for "non-certified site assessor-required" UST system removal services.

Total of Circled Items is \$48,780
 SEH
 237000

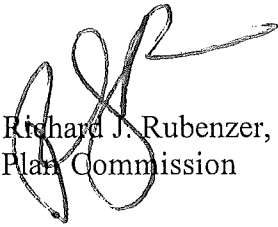
**MINUTES OF THE PLANCOMMISSION MEETING
CITY OF CHIPPEWA FALLS
MONDAY, SEPTEMBER 13, 2021- 6:30 PM**

The Plan Commission met in City Hall on Monday, September 13, 2021 at 6:30 P.M. Present were Commissioners Dave Cihasky, Greg Misfeldt, Mike Tzanakis, Dan Varga, Alderperson Jason Hiess, Secretary Rick Rubenzer and Vice-Chairperson Tom Hubbard. Absent were Mayor Greg Hoffman, Dennis Doughty, Beth Arneberg and Jerry Smith. Also attending was Professional Land Surveyor James Scheffler.

1. **Motion** by Misfeldt, seconded by Varga to approve the minutes of the August 9, 2021 Plan Commission meeting. **All present voting aye. Motion carried.**

2. The Plan Commission discussed the attached proposed Certified Survey Map subdividing a five acre lot located at 1830 Wheaton Street into two lots. The Certified Survey Map was presented on behalf of owner, Forever Associates LLC by Professional Land Surveyor James Scheffler. A revised Certified Survey Map was handed out that showed revisions after comments (ten) by Chippewa County Surveyor Samuel Wenz. Commissioner Hiess added that the Harrison Monument should list monument size, dimensions and composition. Mr. Scheffler stated he would make the correction. Director of Public Works Rubenzer noted that there was a 1976 conditional use permit on the parcel allowing a transitus half-way house on the property. The conditional use permit had expired due to the transitus house use ceasing for a continuous two year period. He added that the property was zoned R-3A Multi-Family Residential District and surrounded by R-1A and R-1B Single Family Residential zoning districts. Inspector Lasiewicz did the calculations and the existing buildings on Lot 2 meet setback, area and other R-3A Multi-Family zoning requirements after subdivision. The Plan Commission discussed the future use of proposed Lot 1.
Motion by Hiess, seconded by Tzanakis to recommend the Common Council approve the attached two lot Certified Survey Map submitted on behalf of Forever Associates LLC by Scheffler Land Surveying for Parcel #4773 located at 1830 Wheaton Street. Said approval contingent on:
 - 1) Receipt of required review fees.
 - 2) Submission and approval of any necessary storm water management plan.
 - 3) Including the revisions recommended by County Surveyor Samuel Wenz and those recommended by the Plan Commission, (labeling the Harrison Monument with size, dimensions and composition).**All present voting aye. Motion carried.**

3. **Motion** by Varga, seconded by Cihasky to adjourn. **All present voting aye. Motion carried.** The Plan Commission adjourned at 6:45 P.M.


Richard J. Rubenzer, P.E., Secretary
Plan Commission

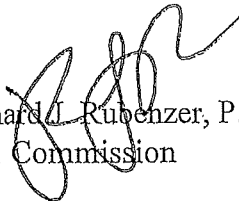
**MINUTES OF THE PLANCOMMISSION MEETING
CITY OF CHIPPEWA FALLS
MONDAY, AUGUST 9, 2021-6:30 PM**

The Plan Commission met in City Hall on Monday, August 9, 2021 at 6:30P.M. Present were Commissioners Dave Cihasky, Greg Misfeldt, Dan Varga, Beth Arneberg, Secretary Rick Rubenzer and Mayor Greg Hoffman. Absent were Dennis Doughty, Mike Tzanakis, Jerry Smith, Alderperson Jason Hiess and Vice-Chairperson Tom Hubbard. Also attending was Professional Land Surveyor John Mickesh.

1. **Motion** by Misfeldt, seconded by Arneberg to approve the minutes of the July 12, 2021 Plan Commission meeting. **All present voting aye. Motion carried.**

2. Professional Land Surveyor John Mickesh appeared to present the attached Certified Survey Map of Lots 4, 5 and 6, Block 1 of Tropicana City Addition combining three lots into one lot. Mr. Mickesh stated that the owners wanted to eliminate the lot lines so they could build structures over the existing lot lines. These lots are zoned R-1B Single Family Residential District.
Motion by Misfeldt, seconded by Varga to recommend the Common Council approve the attached Certified Survey Map of Lots 4, 5 and 6, Block 1 of Tropicana City Addition combining three lots into one lot contingent on payment of required review fees. **All present voting aye. Motion carried.**

3. **Motion** by Cihasky, seconded by Arneberg to adjourn. **All present voting aye. Motion carried.** The Plan Commission adjourned at 6:35 P.M.


Richard J. Rubenzer, P.E., Secretary
Plan Commission

Rick Rubenzer

From: Jim Scheffler <jim@schefflersurveying.com>
Sent: Sunday, September 12, 2021 9:57 AM
To: Samuel Wenz; Rick Rubenzer
Cc: Jason Hiess
Subject: [EXTERNAL] Re: 1830 Wheaton Street CSM Forever Associates/Scheffler Land Surveying
Attachments: 1830 Wheaton CSM pg 1 REVISED.pdf; 1830 Wheaton CSM pg 2 REVISED.pdf

***** [CAUTION - EXTERNAL EMAIL] DO NOT reply, click links, or open attachments unless you have verified the sender and know the content is safe *****

Attached is the revised CSM.

Thanks,
Jim

From: Samuel Wenz <swenz@co.chippewa.wi.us>
Sent: Friday, September 10, 2021 8:45 AM
To: Rick Rubenzer <rRubenzer@chippewafalls-wi.gov>; Jim Scheffler <jim@schefflersurveying.com>
Cc: Jason Hiess <jhiess@chippewafalls-wi.gov>
Subject: RE: 1830 Wheaton Street CSM Forever Associates/Scheffler Land Surveying

Hi Jim,

Here are my comments:

1. Header - Please add Vol. 4, Pages 64-65 of CSM's as Document #515248. 3 places - Sheet 1, sheet2, and Surveyor's Certificate.
2. Header on sheet 1 and 2 - Add (part of) before Northeast $\frac{1}{4}$ of the Southeast $\frac{1}{4}$ - this is correct in the Surveyors Certificate. They should all match.
3. Adjoiner to the North - Lot 1, CSM #1134
4. Please add the record distance from CSM 1134 on North line (555.90').
5. Please add with dashed underscore within proposed lots - Lot 1, CSM #1050
6. Exterior bearings and distances are too small - please increase the size of the font for readability and copy clarity.
7. Partial distance along the section line of 11462.98' is incorrect (typo).
8. Please add the record bearing and distance along the section line (S01-41-34W, 2631.25')
9. There is a missing line from the bearing and distance along the section line going North to the East $\frac{1}{4}$ (dimensioning line).
10. Please add a note that the ties were verified for the section corners shown.

Thank you,

Sam Wenz
Chippewa County Surveyor

From: Rick Rubenzer <rRubenzer@chippewafalls-wi.gov>
Sent: Wednesday, September 8, 2021 8:32 AM
To: Samuel Wenz <swenz@co.chippewa.wi.us>
Cc: Jason Hiess <jhiess@chippewafalls-wi.gov>
Subject: 1830 Wheaton Street CSM Forever Associates/Scheffler Land Surveying

CHIPPEWA CO. CERTIFIED SURVEY
MAP NO. _____

RECORDED IN VOL. _____ OF THE
CERTIFIED SURVEY MAPS PAGE

REGISTER

All of Lot 1, Certified Survey Map number 1050 located in Volume 4,
Pages 64-65 of Certified Survey Maps as Document #515248,
Located in part of the Southeast 1/4 of the Southeast 1/4 and part of
the Northeast 1/4 of the Southeast 1/4, Section 36, Town 29 North,
Range 9 West, City of Chippewa Falls, Chippewa County, Wisconsin

SURVEYOR'S CERTIFICATE:

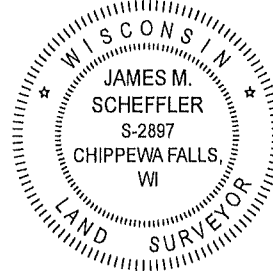
*I, James M. Scheffler, Professional Land Surveyor in the State of Wisconsin, do hereby certify that by the order of
Mish Klejick, I have surveyed All of Lot 1 of Certified Survey Map number 1050, Located in part of the Southeast 1/4
of the Southeast 1/4 and part of the Northeast 1/4 of the Southeast 1/4, Section 36, Town 29 North, Range 9 West, City
of Chippewa Falls, Chippewa County, Wisconsin.*

*Said parcel contains 218,562 square feet or 5.02 acres, more or less. The bearings are orientated to the East line of
the Southeast 1/4 of Section 36, which bears N00°46'21"E.*

*I also certify that I have complied with the provisions of Chapter A-E 7 of the Wisconsin Administrative Code and
Chapter 236.34 of the Wisconsin Statutes. I further certify to the best of my knowledge and belief that the
accompanying map is a true and correct representation of the exterior boundaries of the land surveyed and the
division thereof made.*

Dated this _____ day of _____, 2021.

James M. Scheffler, Wisconsin Professional Land Surveyor, S-2897



CITY COUNCIL APPROVAL

Resolved that this Certified Survey Map in the City of Chippewa Falls is hereby approved.

Gregory Hoffman, Mayor Date

Bridget Givins, City Clerk Date

PARKS, RECREATION & FORESTRY BOARD MEETING
Tuesday, September 14, 2021

1. Call to order by John Abbe at 6:01 p.m.
Roll Call: Members Present: Carmen Muenich, John Abbe, Christopher Gilliam and Audrey Stowell. Absent: Justin Agnew, Beth Arneberg, Travis Siebert.
Staff present: John Jimenez, Kevin Sweeney, Jack Hays
2. Approval of Minutes: August 10, 2021. **Motion by Muenich/Stowell to approve minutes of August 10, 2021. Motion passed.**
3. Personal Appearances By Citizens. None.
Travis Siebert arrives.
4. Discuss/Consider Special Event Applications. **Motion by Muenich/Gilliam to approve special event applications for Girl Scouts / Boy Scouts and Valley Vineyard as presented. Motion passed.**
5. Discuss/Consider
 - d. Trail Work. Ron Bakken reports on hiring Mike Dahlby to clear invasive species and perform forest management on 2 acres to the north of Ashley Way and 8 acres south of Ashley Way at Erickson Park. Ron also proposes fencing changes and improvements to the switch back trail from the parking lot to the bridge as well as culverts and fill on path from bridge to Bear Den. In addition, Ron indicates there are four benches and historic panels that need to be installed. Cost of total improvements will be about \$31,000. **Motion by Abbe/Gilliam to perform forest management to the north and south of Ashley Lane, fencing installation, and improve trail work from bridge to Bear Den.** Discussion regarding improvements to trail from Girl Scouts butterfly garden to the tributary. **Motion amended to include improvements to trail from the Girl Scouts Butterfly Garden to the tributary. Motion passed.**
 - a. Flag Hill Update. John J. reports Flag Hill is almost complete. September 3 was original deadline, which was pushed to September 17. There is a change order for \$9,677.85 to have power doors at bathrooms. Not having them has been a complaint at Riverfront Park. Total project is now approximately \$654,000. John J. suggests doing playground equipment as phase 2 so that new playground equipment will be in place when old is demolished. John J. indicates there was a generous donation which paid for the pavilion and leaves an additional approximately \$181,000 for playground equipment and other improvements at Flag Hill. John J. recommends we look into having this playground be all inclusive. **Motion by Siebert/Stowell to prioritize playground construction over shelter construction for next phase of construction at Flag Hill. Motion passed.** Discussion regarding change order for power doors at bathroom. **Motion by Siebert/Muenich to approve power doors at bathrooms as proposed. Motion passed.**

- b. Safety Training. There were some hazards identified during a walk-through. John J. is looking for someone to come in and train staff on working with certain tools, etc.
 - c. Pool Facility. John J. reports quotes are coming for improvements at the pool and splash pad. Assessment of pool is \$4,800. **Motion by Abbe/Siebert to approve \$4,800 to have pool assessed. Motion passed.** John J. also reports he is looking into possibility of contracting out pool concessions for next year.
 - e. Donations and Memorials. Discussion regarding pre-identifying items and/or places for memorials or donations. A centralized memorial is discussed. Board to discuss in future meetings. John J. will bring proposed policy to next meeting.
 - f. Recreation Report. Jack reports soccer has started – 181 total participants. Fee is \$30.00 per participant, with decreased fee for kids in same family. Jack reviews expenses and revenue. Adult basketball and volleyball starting. Survey results to date reviewed.
 - g. Director Report. John J. reports there is money available for roof replacements this year. Kevin gave report for roofing and requests our thoughts on shingles vs. steel. Priority roofs are big truck shed, little truck shed, maintenance facility by elk, splash pad building, filter building by pool slide, and red barn at Casper Park. He's obtaining costs. Pickle ball raised over \$6,000 to put in new posts. Street Department is helping out with installation of new posts. Discussion regarding progress of disc golf course. Design of course is laid out.
6. Approve Claims. **Motion by Gilliam/Abbe to approve claims in the amount of \$227,413.43. Motion passed.**
7. Park Board Members' Concerns or Comments. None.
8. Adjournment. **Motion by Muenich/Abbe to adjourn at 7:42 p.m. Motion passed.**

Submitted by:
Audrey Stowell, Secretary

**Minutes of the
Meeting of the Chippewa Falls Public Library Board of Trustees
August 18, 2021**

1. Call to Order

Meeting was called to order by President Hiess at 5:00 p.m. at Chippewa Falls Public Library Virginia O. Smith Meeting Room.

2. Roll Call of Members

Members Present: Dremel, Hiess, Jones, King, Newton, Russell

Absent: Ambelang

Others Present: Director Joe Niese, Confidential Administrative Assistant Deb Braden,

3. Approval of Agenda

Motion by Jones seconded by King to approve the agenda. All present Voting Aye. Motion carried.

4. Disposition of the minutes of the Board of Trustees meeting of July 14, 2021.

Motion made by Jones seconded by Russell to approve the minutes of the Board of Trustees meeting of July 14, 2021. All present Voting Aye. Motion carried.

5. Disposition of the minutes of the Special Board of Trustees meeting of August 4, 2021.

Motion made by King seconded by Drehmel to approve the minutes of the Special Board of Trustees meeting of August 4, 2021. All present Voting Aye. Motion carried.

6. Disposition of the vouchers to be paid from the 2021 budget after September 7, 2021.

Motion made by Russell seconded by Newton to approve the vouchers to be paid from the 2021 budget after September 7, 2021. Roll Call Vote. Voting Aye: Drehmel, Hiess, Jones, King, Newton and Russell. Motion carried.

7. Public Appearances

None

8. Correspondence

None

9. Management report

Director Niese talked about highlights from the Management Report. It has been a busy July. Boys and Girls Club used the Library a number of days due to an air conditioning problem at their facility. We will be resuming fines on September 7th.

10. Committee Reports

a) None

11. Current Business

a) Food for Fines

Director Niese asked that we do the Food for Fines this year thru Thanksgiving. The Board of Trustees gave him approval to extend the program thru Thanksgiving.

**12. Closed Session under WI Statues 19.85(1) "Considering employment, promotion, compensation or performance evaluation data of any public employee over which the governmental body has jurisdiction or exercises responsibility, "To
a) Positions compensation**

Motion made by Drehmel, seconded by King to go into closed Session under WI Statues 19.85(1) "Considering employment, promotion, compensation or performance evaluation data of any public employee over which the governmental body has jurisdiction or exercises responsibility, "To positions compensation.

Roll Call Vote: Voting Aye: Drehmel, Jones, King, Newton, Russell, Hiess. Motion carried. When into closed session at 5:10pm.

Motion made by Russell, seconded by King to return to Open Session. Motion carried. All Voting Aye. Returned to open session at 5:37pm.

Direction to Director Niese to invite the City Finance Manager to the next Board of Trustees Meeting in September.

13. Announcements

None

13. Items for future consideration

- a) Presentation from Jenni Gilles-Turner on Diversity Inclusion Action Plan
- b)

14. Adjournment

Motion made to adjourn by King seconded by Drehmel. All present Voting Aye. Motion carried. Meeting adjourned at 5:39 p.m.

Respectfully Submitted,
Deb Braden, Confidential Administrative Assistant

Original Alcohol Beverage Retail License Application

(Submit to municipal clerk.)

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

To the Governing Body of the: Town of } CHIPPEWA FALLS
 Village of }
 City of }

County of CHIPPEWA 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
<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	\$ 10000
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$
TOTAL FEE	\$ 10,100.00

Name (individual / partners give last name, first, middle; corporations / limited liability companies give registered name)
A-1 PROPERTIES, 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)
PECHA	TERRANCE	J	11380 280TH AVE, NEW AUBURN, WI 54757
Vice President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
PECHA	TODD	A	17108 97TH ST, BLOOMER, WI 54724
Secretary / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
MUMM	PAUL	V	665 25TH ST, CHETEK, WI 54728
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)
<u>Hould</u>	<u>William</u>	<u>W</u>	<u>14251 109th Ave, Chippewa Falls</u> <u>WI 54729</u>
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

1. Trade Name EGALE RIDGE FESTIVAL AND CAMPGROUND Business Phone Number 715-210-8855

2. Address of Premises 2302 NELSON ROAD Post Office & Zip Code CHIPPEWA FALLS, WI 54729

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.)

~~2302 NELSON RD - BEVERAGE TRAILER FOR FESTIVALS AND EVENTS FOR THE CAMPGROUNDS AND FESTIVALS GROUND; STORAGE AREA IN FESTIVAL GROUNDS KITCHEN COOLERS.~~
entire fenced area of festival grounds

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? _____

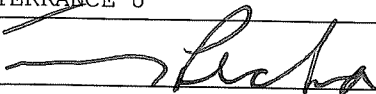
6. Is individual, partners or agent of corporation/limited liability company subject to completion of the responsible beverage server training course for this license period? **If yes, explain** Yes No
 NEW LICENSE _____
7. Is the applicant an employe or agent of, or acting on behalf of anyone except 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 03/31/95 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.) PECHA, TERRANCE J	Title/Member MEMBER	Date
Signature 	Phone Number 715-568-4141	Email Address tjpecha@a1excavating.com

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	

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: 8/23/2021

Town Village City of Chippewa Falls

County of Chippewa

The named organization applies for: (check appropriate box(es).)

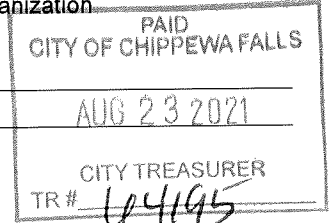
A Temporary Class "B" license to sell fermented malt beverages at picnics or similar gatherings under s. 125.26(6), Wis. Stats.

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 9/30/2021 and ending 10/2/2021 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
 Chamber of Commerce or similar Civic or Trade Organization
 Veteran's Organization Fair Association



(a) Name Chippewa Youth Hockey Association

(b) Address 839 First Ave, PO Box 131, Chippewa Falls, WI 54729
(Street) Town Village City

(c) Date organized 1969

(d) If corporation, give date of incorporation 1972

(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, addresses and phone numbers of all officers:

President Robert Normand, 640 S Main St, Chippewa Falls, WI 54729 715-456-1316

Vice President Steve Gibbs, 3320 172nd St, Chippewa Falls, WI 54729 715-828-2272

Secretary Jodi Ash, 509 W Columbia St, Chippewa Falls, WI 54729 218-779-6979

Treasurer Jennifer Lindstrom, 15872 93rd Ave, Chippewa Falls, WI 54729 715-579-8598

(g) Name and address of manager or person in charge of affair: Robert Normand, 640 S Main St, Chippewa Falls, WI 54729

2. Location of Premises Where Beer and/or Wine Will Be Sold, Served, Consumed, or Stored, and Areas Where Alcohol Beverage Records Will be Stored:

(a) Street number 839 First Ave, Chippewa Falls, WI 54729

(b) Lot _____ Block _____

(c) Do premises occupy all or part of building? Part - South Rink bleachers, mezzanine, standing room viewing areas, concession area.
Alcohol will not be allowed outside of the premises or in locker rooms.

(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:

(e) Will minors be present? Yes Reason for minors being present: Spectators at games

Security measures: Licensed bartenders, security personnel to check IDs

3. Name of Event

(a) List name of the event Chippewa Steel vs Anchorage Wolverines Games

(b) Dates and times of event September 30 - October 2, 2021 5:00PM-12:00AM, Games start at 7:00 PM

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.

Chippewa Youth Hockey Association
(Name of Organization)

Officer Robert Normand 8/23/21
(Signature/date)

Officer _____
(Signature/date)

Officer [Signature] 8/23/21
(Signature/date)

Officer _____
(Signature/date)

Date Filed with Clerk _____

Date Reported to Council or Board _____

Date Granted by Council _____

License No. _____

Police Department Approval [Signature]

Date _____ Wisconsin Department of Revenue

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: 8/23/2021

Town Village City of Chippewa Falls

County of Chippewa

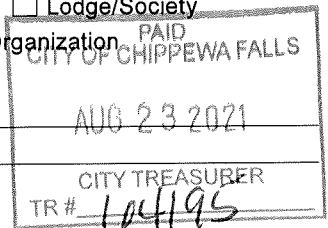
The named organization applies for: (check appropriate box(es).)

- 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 10/8/2021 and ending 10/9/2021 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
 Chamber of Commerce or similar Civic or Trade Organization
 Veteran's Organization Fair Association



(a) Name Chippewa Youth Hockey Association

(b) Address 839 First Ave, PO Box 131, Chippewa Falls, WI 54729
(Street) Town Village City

(c) Date organized 1969

(d) If corporation, give date of incorporation 1972

(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, addresses and phone numbers of all officers:

President Robert Normand, 640 S Main St, Chippewa Falls, WI 54729 715-456-1316

Vice President Steve Gibbs, 3320 172nd St, Chippewa Falls, WI 54729 715-828-2272

Secretary Jodi Ash, 509 W Columbia St, Chippewa Falls, WI 54729 218-779-6979

Treasurer Jennifer Lindstrom, 15872 93rd Ave, Chippewa Falls, WI 54729 715-579-8598

(g) Name and address of manager or person in charge of affair: Robert Normand, 640 S Main St, Chippewa Falls, WI 54729

2. Location of Premises Where Beer and/or Wine Will Be Sold, Served, Consumed, or Stored, and Areas Where Alcohol Beverage Records Will be Stored:

(a) Street number 839 First Ave, Chippewa Falls, WI 54729

(b) Lot _____ Block _____

(c) Do premises occupy all or part of building? Part - South Rink bleachers, mezzanine, standing room viewing areas, concession area.
Alcohol will not be allowed outside of the premises or in locker rooms.

(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:

(e) Will minors be present? Yes Reason for minors being present: Spectators at games

Security measures: Licensed bartenders, security personnel to check IDs

3. Name of Event

(a) List name of the event Chippewa Steel vs Springfield Jr. Blues Games

(b) Dates and times of event October 8-9, 2021 5:00PM-12:00AM, Games start at 7:00 PM

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.

Chippewa Youth Hockey Association
(Name of Organization)

Officer Robert Normand 8/23/21
(Signature/date)

Officer _____
(Signature/date)

Officer [Signature] 8-23-21
(Signature/date)

Officer _____
(Signature/date)

Date Filed with Clerk _____

Date Reported to Council or Board _____

Date Granted by Council _____

License No. _____

Police Department Approval [Signature]

Date _____ Wisconsin Department of Revenue

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: 8/23/2021

Town Village City of Chippewa Falls

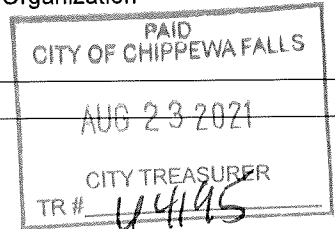
County of Chippewa

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 10/28/2021 and ending 10/30/2021 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
 Chamber of Commerce or similar Civic or Trade Organization
 Veteran's Organization Fair Association



(a) Name Chippewa Youth Hockey Association

(b) Address 839 First Ave, PO Box 131, Chippewa Falls, WI 54729
(Street) Town Village City

(c) Date organized 1969

(d) If corporation, give date of incorporation 1972

(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, addresses and phone numbers of all officers:

President Robert Normand, 640 S Main St, Chippewa Falls, WI 54729 715-456-1316

Vice President Steve Gibbs, 3320 172nd St, Chippewa Falls, WI 54729 715-828-2272

Secretary Jodi Ash, 509 W Columbia St, Chippewa Falls, WI 54729 218-779-6979

Treasurer Jennifer Lindstrom, 15872 93rd Ave, Chippewa Falls, WI 54729 715-579-8598

(g) Name and address of manager or person in charge of affair: Robert Normand, 640 S Main St, Chippewa Falls, WI 54729

2. Location of Premises Where Beer and/or Wine Will Be Sold, Served, Consumed, or Stored, and Areas Where Alcohol Beverage Records Will be Stored:

(a) Street number 839 First Ave, Chippewa Falls, WI 54729

(b) Lot _____ Block _____

(c) Do premises occupy all or part of building? Part - South Rtnk bleachers, mezzanine, standing room viewing areas, concession area.
Alcohol will not be allowed outside of the premises or in locker rooms.

(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:

(e) Will minors be present? Yes Reason for minors being present: Spectators at games

Security measures: Licensed bartenders, security personnel to check IDs

3. Name of Event

(a) List name of the event Chippewa Steel vs MN Wilderness/MN Magicians Games

(b) Dates and times of event October 28-30, 2021 5:00PM-12:00AM, Games start at 7:00 PM

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.

Chippewa Youth Hockey Association
(Name of Organization)

Officer Robert Normand 8/23/21
(Signature/date)

Officer _____
(Signature/date)

Officer [Signature] 8-23-21
(Signature/date)

Officer _____
(Signature/date)

Date Filed with Clerk _____

Date Reported to Council or Board _____

Date Granted by Council _____

License No. _____

Police Department Approval BTDY

Date _____ Wisconsin Department of Revenue

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: 8/23/2021

Town Village City of Chippewa Falls

County of Chippewa

The named organization applies for: (check appropriate box(es).)

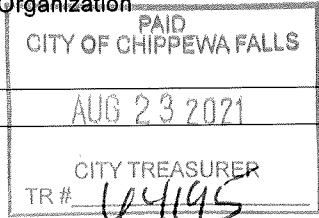
A Temporary Class "B" license to sell fermented malt beverages at picnics or similar gatherings under s. 125.26(6), Wis. Stats.

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 11/13/2021 and ending 11/13/2021 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
 Chamber of Commerce or similar Civic or Trade Organization
 Veteran's Organization Fair Association



(a) Name Chippewa Youth Hockey Association

(b) Address 839 First Ave, PO Box 131, Chippewa Falls, WI 54729
 (Street) Town Village City

(c) Date organized 1969

(d) If corporation, give date of incorporation 1972

(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, addresses and phone numbers of all officers:

President Robert Normand, 640 S Main St, Chippewa Falls, WI 54729 715-456-1316

Vice President Steve Gibbs, 3320 172nd St, Chippewa Falls, WI 54729 715-828-2272

Secretary Jodi Ash, 509 W Columbia St, Chippewa Falls, WI 54729 218-779-6979

Treasurer Jennifer Lindstrom, 15872 93rd Ave, Chippewa Falls, WI 54729 715-579-8598

(g) Name and address of manager or person in charge of affair: Robert Normand, 640 S Main St, Chippewa Falls, WI 54729

2. Location of Premises Where Beer and/or Wine Will Be Sold, Served, Consumed, or Stored, and Areas Where Alcohol Beverage Records Will be Stored:

(a) Street number 839 First Ave, Chippewa Falls, WI 54729

(b) Lot _____ Block _____

(c) Do premises occupy all or part of building? Part - South Rink bleachers, mezzanine, standing room viewing areas, concession area.
Alcohol will not be allowed outside of the premises or in locker rooms.

(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:

(e) Will minors be present? Yes Reason for minors being present: Spectators at games
 Security measures: Licensed bartenders, security personnel to check IDs

3. Name of Event

(a) List name of the event Chippewa Steel vs MN Magicians Game

(b) Dates and times of event November 13, 2021 5:00PM-12:00AM, Games starts at 7:00 PM

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.

Chippewa Youth Hockey Association
 (Name of Organization)

Officer Robert Normand 8/23/21
 (Signature/date)

Officer _____
 (Signature/date)

Officer [Signature] 8-23-21
 (Signature/date)

Officer _____
 (Signature/date)

Date Filed with Clerk _____

Date Reported to Council or Board _____

Date Granted by Council _____

License No. _____

Police Department Approval [Signature]

Date _____ Wisconsin Department of Revenue

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: 8/23/2021

Town Village City of Chippewa Falls

County of Chippewa

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 11/18/2021 and ending 11/18/2021 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
 Chamber of Commerce or similar Civic or Trade Organization
 Veteran's Organization Fair Association

(a) Name Chippewa Youth Hockey Association

(b) Address 839 First Ave, PO Box 131, Chippewa Falls, WI 54729
(Street) Town Village City

(c) Date organized 1969

(d) If corporation, give date of incorporation 1972

(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, addresses and phone numbers of all officers:

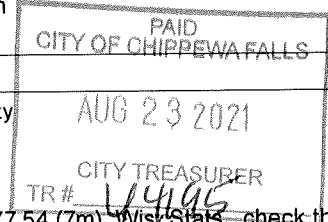
President Robert Normand, 640 S Main St, Chippewa Falls, WI 54729 715-456-1316

Vice President Steve Gibbs, 3320 172nd St, Chippewa Falls, WI 54729 715-828-2272

Secretary Jodi Ash, 509 W Columbia St, Chippewa Falls, WI 54729 218-779-6979

Treasurer Jennifer Lindstrom, 15872 93rd Ave, Chippewa Falls, WI 54729 715-579-8598

(g) Name and address of manager or person in charge of affair: Robert Normand, 640 S Main St, Chippewa Falls, WI 54729



2. **Location of Premises Where Beer and/or Wine Will Be Sold, Served, Consumed, or Stored, and Areas Where Alcohol Beverage Records Will be Stored:**

(a) Street number 839 First Ave, Chippewa Falls, WI 54729

(b) Lot _____ Block _____

(c) Do premises occupy all or part of building? Part - South Rtnk bleachers, mezzanine, standing room viewing areas, concession area. Alcohol will not be allowed outside of the premises or in locker rooms.

(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:

(e) Will minors be present? Yes Reason for minors being present: Spectators at games
 Security measures: Licensed bartenders, security personnel to check IDs

3. **Name of Event**

(a) List name of the event Chippewa Steel vs MN Wilderness Game

(b) Dates and times of event November 18, 2021 5:00PM-12:00AM, Game starts at 7:00 PM

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.

Chippewa Youth Hockey Association
(Name of Organization)

Officer Robert Normand 8/23/21
(Signature/date)

Officer _____
(Signature/date)

Officer [Signature] 8-23-21
(Signature/date)

Officer _____
(Signature/date)

Date Filed with Clerk _____

Date Reported to Council or Board _____

Date Granted by Council _____

License No. _____

Police Department Approval [Signature]

Date _____ Wisconsin Department of Revenue

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: 8/23/2021

Town Village City of Chippewa Falls

County of Chippewa

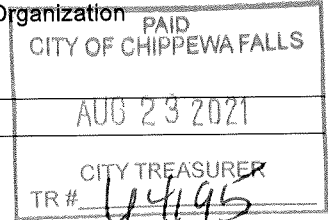
The named organization applies for: (check appropriate box(es).)

- 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 11/26/2021 and ending 11/26/2021 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
 Chamber of Commerce or similar Civic or Trade Organization
 Veteran's Organization Fair Association



(a) Name Chippewa Youth Hockey Association

(b) Address 839 First Ave, PO Box 131, Chippewa Falls, WI 54729
(Street) Town Village City

(c) Date organized 1969

(d) If corporation, give date of incorporation 1972

(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, addresses and phone numbers of all officers:

President Robert Normand, 640 S Main St, Chippewa Falls, WI 54729 715-456-1316

Vice President Steve Gibbs, 3320 172nd St, Chippewa Falls, WI 54729 715-828-2272

Secretary Jodi Ash, 509 W Columbia St, Chippewa Falls, WI 54729 218-779-6979

Treasurer Jennifer Lindstrom, 15872 93rd Ave, Chippewa Falls, WI 54729 715-579-8598

(g) Name and address of manager or person in charge of affair: Robert Normand, 640 S Main St, Chippewa Falls, WI 54729

2. Location of Premises Where Beer and/or Wine Will Be Sold, Served, Consumed, or Stored, and Areas Where Alcohol Beverage Records Will be Stored:

(a) Street number 839 First Ave, Chippewa Falls, WI 54729

(b) Lot _____ Block _____

(c) Do premises occupy all or part of building? Part - South Rink bleachers, mezzanine, standing room viewing areas, concession area.
Alcohol will not be allowed outside of the premises or in locker rooms.

(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:

(e) Will minors be present? Yes Reason for minors being present: Spectators at games

Security measures: Licensed bartenders, security personnel to check IDs

3. Name of Event

(a) List name of the event Chippewa Steel vs MN Wilderness Game

(b) Dates and times of event November 26, 2021 5:00PM-12:00AM, Game starts at 7:00 PM

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.

Chippewa Youth Hockey Association
(Name of Organization)

Officer Robert Normand 8/23/21
(Signature/date)

Officer _____
(Signature/date)

Officer [Signature] 8/23/21
(Signature/date)

Officer _____
(Signature/date)

Date Filed with Clerk _____

Date Reported to Council or Board _____

Date Granted by Council _____

License No. _____

Police Department Approval [Signature]

Date _____ Wisconsin Department of Revenue

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: 8/23/2021

Town Village City of Chippewa Falls

County of Chippewa

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 12/3/2021 and ending 12/3/2021 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
 - Chamber of Commerce or similar Civic or Trade Organization
 - Veteran's Organization
 - Fair Association

(a) Name Chippewa Youth Hockey Association

(b) Address 839 First Ave, PO Box 131, Chippewa Falls, WI 54729
(Street)

Town Village City

(c) Date organized 1969

(d) If corporation, give date of incorporation 1972

(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, addresses and phone numbers of all officers:

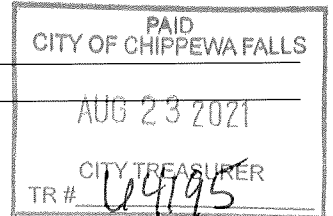
President Robert Normand, 640 S Main St, Chippewa Falls, WI 54729 715-456-1316

Vice President Steve Gibbs, 3320 172nd St, Chippewa Falls, WI 54729 715-828-2272

Secretary Jodi Ash, 509 W Columbia St, Chippewa Falls, WI 54729 218-779-6979

Treasurer Jennifer Lindstrom, 15872 93rd Ave, Chippewa Falls, WI 54729 715-579-8598

(g) Name and address of manager or person in charge of affair: Robert Normand, 640 S Main St, Chippewa Falls, WI 54729



2. Location of Premises Where Beer and/or Wine Will Be Sold, Served, Consumed, or Stored, and Areas Where Alcohol Beverage Records Will be Stored:

(a) Street number 839 First Ave, Chippewa Falls, WI 54729

(b) Lot _____ Block _____

(c) Do premises occupy all or part of building? Part - South Rink bleachers, mezzanine, standing room viewing areas, concession area.
Alcohol will not be allowed outside of the premises or in locker rooms.

(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:

(e) Will minors be present? Yes Reason for minors being present: Spectators at games
Security measures: Licensed bartenders, security personnel to check IDs

3. Name of Event

(a) List name of the event Chippewa Steel vs MN Magicians Game

(b) Dates and times of event December 3, 2021 5:00PM-12:00AM, Game starts at 7:00 PM

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.

Chippewa Youth Hockey Association
(Name of Organization)

Officer Robert Normand 8/23/21
(Signature/date)

Officer _____
(Signature/date)

Officer [Signature] 8-23-21
(Signature/date)

Officer _____
(Signature/date)

Date Filed with Clerk _____

Date Reported to Council or Board _____

Date Granted by Council _____

License No. _____

Police Department Approval BDM

Date _____ Wisconsin Department of Revenue

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: 8/23/2021

Town Village City of Chippewa Falls

County of Chippewa

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 12/10/2021 and ending 12/11/2021 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
 Chamber of Commerce or similar Civic or Trade Organization
 Veteran's Organization Fair Association

(a) Name Chippewa Youth Hockey Association

(b) Address 839 First Ave, PO Box 131, Chippewa Falls, WI 54729
(Street)

Town Village City

(c) Date organized 1969

(d) If corporation, give date of incorporation 1972

(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, addresses and phone numbers of all officers:

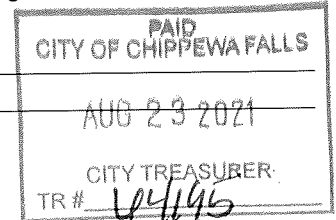
President Robert Normand, 640 S Main St, Chippewa Falls, WI 54729 715-456-1316

Vice President Steve Gibbs, 3320 172nd St, Chippewa Falls, WI 54729 715-828-2272

Secretary Jodi Ash, 509 W Columbia St, Chippewa Falls, WI 54729 218-779-6979

Treasurer Jennifer Lindstrom, 15872 93rd Ave, Chippewa Falls, WI 54729 715-579-8598

(g) Name and address of manager or person in charge of affair: Robert Normand, 640 S Main St, Chippewa Falls, WI 54729



2. Location of Premises Where Beer and/or Wine Will Be Sold, Served, Consumed, or Stored, and Areas Where Alcohol Beverage Records Will be Stored:

(a) Street number 839 First Ave, Chippewa Falls, WI 54729

(b) Lot _____ Block _____

(c) Do premises occupy all or part of building? Part - South Rink bleachers, mezzanine, standing room viewing areas, concession area.
Alcohol will not be allowed outside of the premises or in locker rooms.

(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:

(e) Will minors be present? Yes Reason for minors being present: Spectators at games

Security measures: Licensed bartenders, security personnel to check IDs

3. Name of Event

(a) List name of the event Chippewa Steel vs Fairbanks Ice Dogs Games

(b) Dates and times of event December 10-11, 2021 5:00PM-12:00AM, Games start at 7:00 PM

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.

Chippewa Youth Hockey Association
(Name of Organization)

Officer Robert Normand 8/23/21
(Signature/date)

Officer _____
(Signature/date)

Officer [Signature] 8-23-21
(Signature/date)

Officer _____
(Signature/date)

Date Filed with Clerk _____

Date Reported to Council or Board _____

Date Granted by Council _____

License No. _____

Police Department Approval [Signature]

Date _____ Wisconsin Department of Revenue

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: 8/23/2021

Town Village City of Chippewa Falls

County of Chippewa

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 12/17/2021 and ending 12/17/2021 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
 Chamber of Commerce or similar Civic or Trade Organization
 Veteran's Organization Fair Association

(a) Name Chippewa Youth Hockey Association

(b) Address 839 First Ave, PO Box 131, Chippewa Falls, WI 54729
(Street) Town Village City

(c) Date organized 1969

(d) If corporation, give date of incorporation 1972

(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, addresses and phone numbers of all officers:

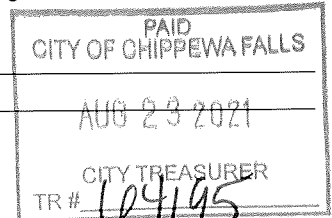
President Robert Normand, 640 S Main St, Chippewa Falls, WI 54729 715-456-1316

Vice President Steve Gibbs, 3320 172nd St, Chippewa Falls, WI 54729 715-828-2272

Secretary Jodi Ash, 509 W Columbia St, Chippewa Falls, WI 54729 218-779-6979

Treasurer Jennifer Lindstrom, 15872 93rd Ave, Chippewa Falls, WI 54729 715-579-8598

(g) Name and address of manager or person in charge of affair: Robert Normand, 640 S Main St, Chippewa Falls, WI 54729



2. Location of Premises Where Beer and/or Wine Will Be Sold, Served, Consumed, or Stored, and Areas Where Alcohol Beverage Records Will be Stored:

(a) Street number 839 First Ave, Chippewa Falls, WI 54729

(b) Lot _____ Block _____

(c) Do premises occupy all or part of building? Part - South Rink bleachers, mezzanine, standing room viewing areas, concession area.
Alcohol will not be allowed outside of the premises or in locker rooms.

(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:

(e) Will minors be present? Yes Reason for minors being present: Spectators at games

Security measures: Licensed bartenders, security personnel to check IDs

3. Name of Event

(a) List name of the event Chippewa Steel vs MN Magicians Game

(b) Dates and times of event December 17, 2021 5:00PM-12:00AM, Game starts at 7:00 PM

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.

Chippewa Youth Hockey Association
(Name of Organization)

Officer Robert Normand 8/23/21
(Signature/date)

Officer _____
(Signature/date)

Officer [Signature] 8-23-21
(Signature/date)

Officer _____
(Signature/date)

Date Filed with Clerk _____

Date Reported to Council or Board _____

Date Granted by Council _____

License No. _____

Police Department Approval [Signature]

Date _____ Wisconsin Department of Revenue

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: 8/23/2021

Town Village City of Chippewa Falls

County of Chippewa

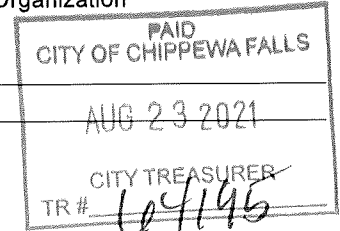
The named organization applies for: (check appropriate box(es).)

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 1/14/2022 and ending 1/14/2022 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
 Chamber of Commerce or similar Civic or Trade Organization
 Veteran's Organization Fair Association



(a) Name Chippewa Youth Hockey Association

(b) Address 839 First Ave, PO Box 131, Chippewa Falls, WI 54729
(Street) Town Village City

(c) Date organized 1969

(d) If corporation, give date of incorporation 1972

(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, addresses and phone numbers of all officers:

President Robert Normand, 640 S Main St, Chippewa Falls, WI 54729 715-456-1316

Vice President Steve Gibbs, 3320 172nd St, Chippewa Falls, WI 54729 715-828-2272

Secretary Jodi Ash, 509 W Columbia St, Chippewa Falls, WI 54729 218-779-6979

Treasurer Jennifer Lindstrom, 15872 93rd Ave, Chippewa Falls, WI 54729 715-579-8598

(g) Name and address of manager or person in charge of affair: Robert Normand, 640 S Main St, Chippewa Falls, WI 54729

2. Location of Premises Where Beer and/or Wine Will Be Sold, Served, Consumed, or Stored, and Areas Where Alcohol Beverage Records Will be Stored:

(a) Street number 839 First Ave, Chippewa Falls, WI 54729

(b) Lot _____ Block _____

(c) Do premises occupy all or part of building? Part - South Rink bleachers, mezzanine, standing room viewing areas, concession area.
Alcohol will not be allowed outside of the premises or in locker rooms.

(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:

(e) Will minors be present? Yes Reason for minors being present: Spectators at games

Security measures: Licensed bartenders, security personnel to check IDs

3. Name of Event

(a) List name of the event Chippewa Steel vs Janesville Jets Game

(b) Dates and times of event January 14, 2022 5:00PM-12:00AM, Game starts at 7:00 PM

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.

Chippewa Youth Hockey Association
(Name of Organization)

Officer Robert Normand 8/23/21
(Signature/date)

Officer _____
(Signature/date)

Officer [Signature] 8-23-21
(Signature/date)

Officer _____
(Signature/date)

Date Filed with Clerk _____

Date Reported to Council or Board _____

Date Granted by Council _____

License No. _____

Police Department Approval [Signature]

Date _____

Wisconsin Department of Revenue

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: 8/23/2021

Town Village City of Chippewa Falls

County of Chippewa

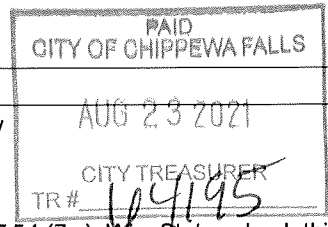
The named organization applies for: (check appropriate box(es).)

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 1/28/2022 and ending 1/28/2022 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
 Chamber of Commerce or similar Civic or Trade Organization
 Veteran's Organization Fair Association



- (a) Name Chippewa Youth Hockey Association
 (b) Address 839 First Ave, PO Box 131, Chippewa Falls, WI 54729
 (Street) Town Village City
 (c) Date organized 1969
 (d) If corporation, give date of incorporation 1972
 (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, addresses and phone numbers of all officers:
 President Robert Normand, 640 S Main St, Chippewa Falls, WI 54729 715-456-1316
 Vice President Steve Gibbs, 3320 172nd St, Chippewa Falls, WI 54729 715-828-2272
 Secretary Jodi Ash, 509 W Columbia St, Chippewa Falls, WI 54729 218-779-6979
 Treasurer Jennifer Lindstrom, 15872 93rd Ave, Chippewa Falls, WI 54729 715-579-8598
 (g) Name and address of manager or person in charge of affair: Robert Normand, 640 S Main St, Chippewa Falls, WI 54729

2. Location of Premises Where Beer and/or Wine Will Be Sold, Served, Consumed, or Stored, and Areas Where Alcohol Beverage Records Will be Stored:

- (a) Street number 839 First Ave, Chippewa Falls, WI 54729
 (b) Lot _____ Block _____
 (c) Do premises occupy all or part of building? Part - South Rink bleachers, mezzanine, standing room viewing areas, concession area.
Alcohol will not be allowed outside of the premises or in locker rooms.
 (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:
 (e) Will minors be present? Yes Reason for minors being present: Spectators at games
 Security measures: Licensed bartenders, security personnel to check IDs

3. Name of Event

- (a) List name of the event Chippewa Steel vs MN Wilderness Game
 (b) Dates and times of event January 28, 2022 5:00PM-12:00AM, Game starts at 7:00 PM

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 <u>Robert Normand 8/23/21</u> (Signature/date) Officer <u>[Signature] 8/23/21</u> (Signature/date) Date Filed with Clerk _____ Date Granted by Council _____ Police Department Approval <u>BDM</u>	Chippewa Youth Hockey Association (Name of Organization) Officer _____ (Signature/date) Officer _____ (Signature/date) Date Reported to Council or Board _____ License No. _____ Date _____ Wisconsin Department of Revenue
--	---

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: 8/23/2021

Town Village City of Chippewa Falls

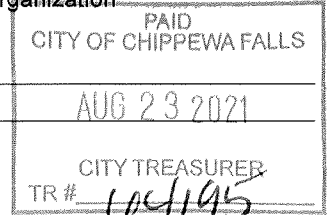
County of Chippewa

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 2/4/2022 and ending 2/5/2022 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
 Chamber of Commerce or similar Civic or Trade Organization
 Veteran's Organization Fair Association



(a) Name Chippewa Youth Hockey Association

(b) Address 839 First Ave, PO Box 131, Chippewa Falls, WI 54729
(Street) Town Village City

(c) Date organized 1969

(d) If corporation, give date of incorporation 1972

(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, addresses and phone numbers of all officers:

President Robert Normand, 640 S Main St, Chippewa Falls, WI 54729 715-456-1316

Vice President Steve Gibbs, 3320 172nd St, Chippewa Falls, WI 54729 715-828-2272

Secretary Jodi Ash, 509 W Columbia St, Chippewa Falls, WI 54729 218-779-6979

Treasurer Jennifer Lindstrom, 15872 93rd Ave, Chippewa Falls, WI 54729 715-579-8598

(g) Name and address of manager or person in charge of affair: Robert Normand, 640 S Main St, Chippewa Falls, WI 54729

2. Location of Premises Where Beer and/or Wine Will Be Sold, Served, Consumed, or Stored, and Areas Where Alcohol Beverage Records Will be Stored:

(a) Street number 839 First Ave, Chippewa Falls, WI 54729

(b) Lot _____ Block _____

(c) Do premises occupy all or part of building? Part - South Rink bleachers, mezzanine, standing room viewing areas, concession area.
Alcohol will not be allowed outside of the premises or in locker rooms.

(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:

(e) Will minors be present? Yes Reason for minors being present: Spectators at games
 Security measures: Licensed bartenders, security personnel to check IDs

3. Name of Event

(a) List name of the event Chippewa Steel vs Kenai River Brown Bears Games

(b) Dates and times of event February 4-5, 2022 5:00PM-12:00AM, Games start at 7:00 PM

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.

Chippewa Youth Hockey Association
(Name of Organization)

Officer Robert Normand 8/23/21
(Signature/date)

Officer _____
(Signature/date)

Officer [Signature] 8-23-21
(Signature/date)

Officer _____
(Signature/date)

Date Filed with Clerk _____

Date Reported to Council or Board _____

Date Granted by Council _____

License No. _____

Police Department Approval [Signature]

Date _____ Wisconsin Department of Revenue

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: 8/23/2021

Town Village City of Chippewa Falls

County of Chippewa

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.

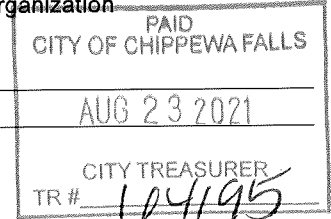
A Temporary "Class B" license to sell wine at picnics or similar gatherings under s. 125.51(10), Wis. Stats.

at the premises described below during a special event beginning 2/11/2022 and ending 2/12/2022 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

Chamber of Commerce or similar Civic or Trade Organization

Veteran's Organization Fair Association



(a) Name Chippewa Youth Hockey Association

(b) Address 839 First Ave, PO Box 131, Chippewa Falls, WI 54729
(Street) Town Village City

(c) Date organized 1969

(d) If corporation, give date of incorporation 1972

(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, addresses and phone numbers of all officers:

President Robert Normand, 640 S Main St, Chippewa Falls, WI 54729 715-456-1316

Vice President Steve Gibbs, 3320 172nd St, Chippewa Falls, WI 54729 715-828-2272

Secretary Jodi Ash, 509 W Columbia St, Chippewa Falls, WI 54729 218-779-6979

Treasurer Jennifer Lindstrom, 15872 93rd Ave, Chippewa Falls, WI 54729 715-579-8598

(g) Name and address of manager or person in charge of affair: Robert Normand, 640 S Main St, Chippewa Falls, WI 54729

2. Location of Premises Where Beer and/or Wine Will Be Sold, Served, Consumed, or Stored, and Areas Where Alcohol Beverage Records Will be Stored:

(a) Street number 839 First Ave, Chippewa Falls, WI 54729

(b) Lot _____ Block Part - South Rink bleachers, mezzanine, standing room viewing areas, concession area.

(c) Do premises occupy all or part of building? Alcohol will not be allowed outside of the premises or in locker rooms.

(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:

(e) Will minors be present? Yes Reason for minors being present: Spectators at games
Security measures: Licensed bartenders, security personnel to check IDs

3. Name of Event

(a) List name of the event Chippewa Steel vs Fairbanks Ice Dogs/Janesville Jets Games

(b) Dates and times of event February 11-12, 2022 5:00PM-12:00AM, Games start at 7:00 PM

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.

Chippewa Youth Hockey Association
(Name of Organization)

Officer Robert Normand 8/23/21
(Signature/date)

Officer _____
(Signature/date)

Officer [Signature] 8-23-21
(Signature/date)

Officer _____
(Signature/date)

Date Filed with Clerk _____

Date Reported to Council or Board _____

Date Granted by Council _____

License No. _____

Police Department Approval [Signature]

Date _____ Wisconsin Department of Revenue

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: 8/23/2021

Town Village City of Chippewa Falls

County of Chippewa

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 3/5/2022 and ending 3/5/2022 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
 Chamber of Commerce or similar Civic or Trade Organization
 Veteran's Organization Fair Association

(a) Name Chippewa Youth Hockey Association

(b) Address 839 First Ave, PO Box 131, Chippewa Falls, WI 54729
(Street) Town Village City

(c) Date organized 1969

(d) If corporation, give date of incorporation 1972

(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, addresses and phone numbers of all officers:

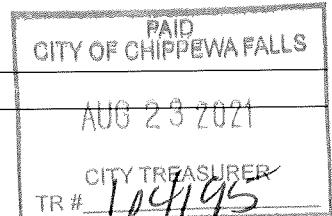
President Robert Normand, 640 S Main St, Chippewa Falls, WI 54729 715-456-1316

Vice President Steve Gibbs, 3320 172nd St, Chippewa Falls, WI 54729 715-828-2272

Secretary Jodi Ash, 509 W Columbia St, Chippewa Falls, WI 54729 218-779-6979

Treasurer Jennifer Lindstrom, 15872 93rd Ave, Chippewa Falls, WI 54729 715-579-8598

(g) Name and address of manager or person in charge of affair: Robert Normand, 640 S Main St, Chippewa Falls, WI 54729



2. Location of Premises Where Beer and/or Wine Will Be Sold, Served, Consumed, or Stored, and Areas Where Alcohol Beverage Records Will be Stored:

(a) Street number 839 First Ave, Chippewa Falls, WI 54729

(b) Lot _____ Block _____

(c) Do premises occupy all or part of building? Part - South Rink bleachers, mezzanine, standing room viewing areas, concession area.
Alcohol will not be allowed outside of the premises or in locker rooms.

(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:

(e) Will minors be present? Yes Reason for minors being present: Spectators at games

Security measures: Licensed bartenders, security personnel to check IDs

3. Name of Event

(a) List name of the event Chippewa Steel vs Janesville Jets Game

(b) Dates and times of event March 5, 2022 5:00PM-12:00AM, Game starts at 7:00 PM

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.

Chippewa Youth Hockey Association
(Name of Organization)

Officer Robert Normand 8/23/21
(Signature/date)

Officer _____
(Signature/date)

Officer [Signature] 8-23-21
(Signature/date)

Officer _____
(Signature/date)

Date Filed with Clerk _____

Date Reported to Council or Board _____

Date Granted by Council _____

License No. _____

Police Department Approval [Signature]

Date _____ Wisconsin Department of Revenue

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: 8/23/2021

Town Village City of Chippewa Falls

County of Chippewa

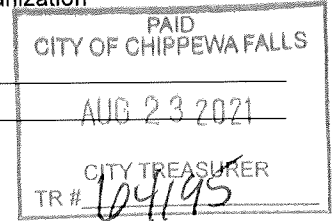
The named organization applies for: (check appropriate box(es).)

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 3/11/2022 and ending 3/11/2022 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
 Chamber of Commerce or similar Civic or Trade Organization
 Veteran's Organization Fair Association



(a) Name Chippewa Youth Hockey Association

(b) Address 839 First Ave, PO Box 131, Chippewa Falls, WI 54729
(Street) Town Village City

(c) Date organized 1969

(d) If corporation, give date of incorporation 1972

(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, addresses and phone numbers of all officers:

President Robert Normand, 640 S Main St, Chippewa Falls, WI 54729 715-456-1316

Vice President Steve Gibbs, 3320 172nd St, Chippewa Falls, WI 54729 715-828-2272

Secretary Jodi Ash, 509 W Columbia St, Chippewa Falls, WI 54729 218-779-6979

Treasurer Jennifer Lindstrom, 15872 93rd Ave, Chippewa Falls, WI 54729 715-579-8598

(g) Name and address of manager or person in charge of affair: Robert Normand, 640 S Main St, Chippewa Falls, WI 54729

2. Location of Premises Where Beer and/or Wine Will Be Sold, Served, Consumed, or Stored, and Areas Where Alcohol Beverage Records Will be Stored:

(a) Street number 839 First Ave, Chippewa Falls, WI 54729

(b) Lot _____ Block _____

(c) Do premises occupy all or part of building? Part - South Rink bleachers, mezzanine, standing room viewing areas, concession area.
Alcohol will not be allowed outside of the premises or in locker rooms.

(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:

(e) Will minors be present? Yes Reason for minors being present: Spectators at games
 Security measures: Licensed bartenders, security personnel to check IDs

3. Name of Event

(a) List name of the event Chippewa Steel vs MN Magicians Game

(b) Dates and times of event March 11, 2022 5:00PM-12:00AM, Game starts at 7:00 PM

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.

Chippewa Youth Hockey Association
(Name of Organization)

Officer Robert Normand 8/23/21
(Signature/date)

Officer _____
(Signature/date)

Officer [Signature] 8-23-21
(Signature/date)

Officer _____
(Signature/date)

Date Filed with Clerk _____

Date Reported to Council or Board _____

Date Granted by Council _____

License No. _____

Police Department Approval BTD

Date _____ Wisconsin Department of Revenue

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: 8/23/2021

Town Village City of Chippewa Falls

County of Chippewa

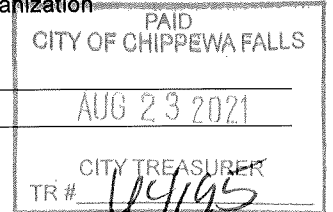
The named organization applies for: (check appropriate box(es).)

- 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 3/18/2022 and ending 3/18/2022 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
 Chamber of Commerce or similar Civic or Trade Organization
 Veteran's Organization Fair Association



(a) Name Chippewa Youth Hockey Association

(b) Address 839 First Ave, PO Box 131, Chippewa Falls, WI 54729
(Street) Town Village City

(c) Date organized 1969

(d) If corporation, give date of incorporation 1972

(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, addresses and phone numbers of all officers:

President Robert Normand, 640 S Main St, Chippewa Falls, WI 54729 715-456-1316

Vice President Steve Gibbs, 3320 172nd St, Chippewa Falls, WI 54729 715-828-2272

Secretary Jodi Ash, 509 W Columbia St, Chippewa Falls, WI 54729 218-779-6979

Treasurer Jennifer Lindstrom, 15872 93rd Ave, Chippewa Falls, WI 54729 715-579-8598

(g) Name and address of manager or person in charge of affair: Robert Normand, 640 S Main St, Chippewa Falls, WI 54729

2. Location of Premises Where Beer and/or Wine Will Be Sold, Served, Consumed, or Stored, and Areas Where Alcohol Beverage Records Will be Stored:

(a) Street number 839 First Ave, Chippewa Falls, WI 54729

(b) Lot _____ Block _____

(c) Do premises occupy all or part of building? Part - South Rink bleachers, mezzanine, standing room viewing areas, concession area.
Alcohol will not be allowed outside of the premises or in locker rooms.

(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:

(e) Will minors be present? Yes Reason for minors being present: Spectators at games

Security measures: Licensed bartenders, security personnel to check IDs

3. Name of Event

(a) List name of the event Chippewa Steel vs Janesville Jets Game

(b) Dates and times of event March 18, 2022 5:00PM-12:00AM, Game starts at 7:00 PM

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.

Chippewa Youth Hockey Association
(Name of Organization)

Officer Robert Normand 8/23/21
(Signature/date)

Officer _____
(Signature/date)

Officer Jodi Ash 8-23-21
(Signature/date)

Officer _____
(Signature/date)

Date Filed with Clerk _____

Date Reported to Council or Board _____

Date Granted by Council _____

License No. _____

Police Department Approval BDM

Date _____

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: 8/23/2021

Town Village City of Chippewa Falls

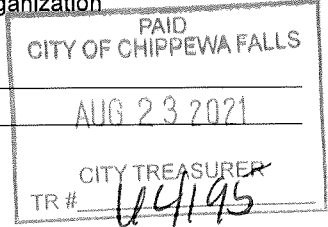
County of Chippewa

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 4/7/2022 and ending 4/8/2022 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
 Chamber of Commerce or similar Civic or Trade Organization
 Veteran's Organization Fair Association



- (a) Name Chippewa Youth Hockey Association
 (b) Address 839 First Ave, PO Box 131, Chippewa Falls, WI 54729
 (Street) Town Village City
 (c) Date organized 1969
 (d) If corporation, give date of incorporation 1972
 (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, addresses and phone numbers of all officers:
 President Robert Normand, 640 S Main St, Chippewa Falls, WI 54729 715-456-1316
 Vice President Steve Gibbs, 3320 172nd St, Chippewa Falls, WI 54729 715-828-2272
 Secretary Jodi Ash, 509 W Columbia St, Chippewa Falls, WI 54729 218-779-6979
 Treasurer Jennifer Lindstrom, 15872 93rd Ave, Chippewa Falls, WI 54729 715-579-8598
 (g) Name and address of manager or person in charge of affair: Robert Normand, 640 S Main St, Chippewa Falls, WI 54729

2. Location of Premises Where Beer and/or Wine Will Be Sold, Served, Consumed, or Stored, and Areas Where Alcohol Beverage Records Will be Stored:

- (a) Street number 839 First Ave, Chippewa Falls, WI 54729
 (b) Lot _____ Block _____
 (c) Do premises occupy all or part of building? Part - South Rink bleachers, mezzanine, standing room viewing areas, concession area.
Alcohol will not be allowed outside of the premises or in locker rooms.
 (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:
 (e) Will minors be present? Yes Reason for minors being present: Spectators at games
 Security measures: Licensed bartenders, security personnel to check IDs

3. Name of Event

- (a) List name of the event Chippewa Steel vs Springfield Jr. Blues Games
 (b) Dates and times of event April 7-8, 2022 5:00PM-12:00AM, Games start at 7:00 PM

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.

Chippewa Youth Hockey Association
(Name of Organization)

Officer Robert Normand 8/23/21 (Signature/date)
 Officer _____ (Signature/date)
 Officer [Signature] 8-23-21 (Signature/date)
 Officer _____ (Signature/date)

Date Filed with Clerk _____ Date Reported to Council or Board _____

Date Granted by Council _____ License No. _____

Police Department Approval [Signature] Date _____ Wisconsin Department of Revenue

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: 8/23/2021

Town Village City of Chippewa Falls

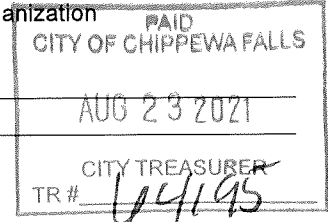
County of Chippewa

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 4/15/2022 and ending 4/15/2022 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
 Chamber of Commerce or similar Civic or Trade Organization
 Veteran's Organization Fair Association



(a) Name Chippewa Youth Hockey Association

(b) Address 839 First Ave, PO Box 131, Chippewa Falls, WI 54729
(Street) Town Village City

(c) Date organized 1969

(d) If corporation, give date of incorporation 1972

(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, addresses and phone numbers of all officers:

President Robert Normand, 640 S Main St, Chippewa Falls, WI 54729 715-456-1316

Vice President Steve Gibbs, 3320 172nd St, Chippewa Falls, WI 54729 715-828-2272

Secretary Jodi Ash, 509 W Columbia St, Chippewa Falls, WI 54729 218-779-6979

Treasurer Jennifer Lindstrom, 15872 93rd Ave, Chippewa Falls, WI 54729 715-579-8598

(g) Name and address of manager or person in charge of affair: Robert Normand, 640 S Main St, Chippewa Falls, WI 54729

2. Location of Premises Where Beer and/or Wine Will Be Sold, Served, Consumed, or Stored, and Areas Where Alcohol Beverage Records Will be Stored:

(a) Street number 839 First Ave, Chippewa Falls, WI 54729

(b) Lot _____ Block _____

(c) Do premises occupy all or part of building? Part - South Rink bleachers, mezzanine, standing room viewing areas, concession area.
 Alcohol will not be allowed outside of the premises or in locker rooms.

(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:

(e) Will minors be present? Yes Reason for minors being present: Spectators at games
 Security measures: Licensed bartenders, security personnel to check IDs

3. Name of Event

(a) List name of the event Chippewa Steel vs MN Wilderness Game

(b) Dates and times of event April 15, 2022 5:00PM-12:00AM, Game starts at 7:00 PM

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 Robert Normand 8/23/21
(Signature/date)

Chippewa Youth Hockey Association
(Name of Organization)

Officer [Signature] 8-23-21
(Signature/date)

Officer _____
(Signature/date)

Date Filed with Clerk _____

Date Reported to Council or Board _____

Date Granted by Council _____

License No. _____

Police Department Approval [Signature]

Date _____ Wisconsin Department of Revenue

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: 9/7/2021

Town Village City of Chippewa Falls

County of Chippewa

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 10/3/2021 and ending 10/3/2021 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
 - Chamber of Commerce or similar Civic or Trade Organization
 - Veteran's Organization
 - Fair Association

(a) Name Chippewa Youth Hockey Association

(b) Address 839 First Ave, PO Box 131, Chippewa Falls, WI 54729
(Street) Town Village City

(c) Date organized 1969

(d) If corporation, give date of incorporation 1972

(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, addresses and phone numbers of all officers:

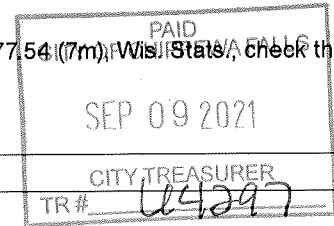
President Robert Normand, 640 S Main St, Chippewa Falls, WI 54729 715-456-1316

Vice President Steve Gibbs, 3320 172nd St, Chippewa Falls, WI 54729 715-828-2272

Secretary Jodi Ash, 509 W Columbia St, Chippewa Falls, WI 54729 218-779-6979

Treasurer Jennifer Lindstrom, 15872 93rd Ave, Chippewa Falls, WI 54729 715-579-8598

(g) Name and address of manager or person in charge of affair: Robert Normand, 640 S Main St, Chippewa Falls, WI 54729



2. Location of Premises Where Beer and/or Wine Will Be Sold, Served, Consumed, or Stored, and Areas Where Alcohol Beverage Records Will be Stored:

(a) Street number 839 First Ave, Chippewa Falls, WI 54729

(b) Lot _____ Block _____
Part - South Rink bleachers, mezzanine, standing room viewing areas, concession area. Outdoor Rink, grounds surrounding the outdoor rink on the north, east, west. Alcohol will not be allowed in locker rooms.

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

(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: _____

(e) Will minors be present? Yes Reason for minors being present: Spectators at games
 Security measures: Licensed bartenders, security personnel to check IDs

This area will be fenced off. sm

3. Name of Event

(a) List name of the event Wisconsin Badgers vs Duluth Bulldogs Pre-Season Scrimmage

(b) Dates and times of event October 3, 2021 12:00 PM-6:00 PM, Game starts at 1:00 PM

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.

Chippewa Youth Hockey Association
(Name of Organization)

Officer Robert Normand 9/7/2021
(Signature/date)

Officer _____
(Signature/date)

Officer Ryger 9-8-21
(Signature/date)

Officer _____
(Signature/date)

Date Filed with Clerk _____

Date Reported to Council or Board _____

Date Granted by Council _____

License No. _____

Police Department Approval ASD 21

Date _____ Wisconsin Department of Revenue



CITY OF CHIPPEWA FALLS STREET USE PERMIT APPLICATION

Applicant Name and Address: Teri Ouimette, 514 N Bridge St, Chippewa Falls, WI 54729	Applicant Phone Number: 715-723-6661
---	---

<input checked="" type="checkbox"/> Please check here if the applicant is the individual in charge of the event. If not, please indicate Name, Address and Phone Number of responsible individual.	Name, Address and Phone Number of the headquarters of the organization and responsible head of such organization: Chippewa Falls Main Street 514 N Bridge St Chippewa Falls, WI 54729 715-723-6661
--	--

Name of the event: Paint the Town Pink	Estimated number of persons participating: 500
---	---

Date and start and end times requested for street use:
Thursday, October 7, 2021 3-7 p.m.

Accurate description of the portion of the street or streets being requested for use (attach maps if necessary):
100-500 blocks of N Bridge Street

Use, described in detail, for which the street use permit is requested:
Car show during Paint the Town Pink

City services requested for the event (e.g., Street Department or Police Department staff time)
Barricades to block off streets. Cross roads will be kept open.

The applicant agrees to indemnify, defend, and hold the City and its employees and agents harmless against all claims, liability, loss, damage or expense incurred by the City or account of any injury to, or death of, any persons or any damage to property caused by or resulting from the activities for which the permit is granted. This Street Use Permit for the event may be terminated by the Chippewa Falls Police Department if the health, safety, and welfare of the public appears to be endangered by the activities or if the event is in violation of any of the conditions of the permit or regulations adopted by the Common Council. **Applicant understands they shall be present when the Board of Public Works or City Council considers the request for Street Use Permit. Failure to appear may be grounds for denial of the requested permit.**

 Signature of Applicant	8/19/2021 Date
---	-------------------

OFFICE USE ONLY

Estimated cost of City services requested (to be completed by Police Chief and Director of Public Works):
*Street Dept. - 6 hrs @ 50/hr = 300 Rjk
09/16/2021*

Requirements of Applicant:

Approved by: <i>See cover sheet</i> Signature of Chief of Police	<i>Richard J. Kelly</i> PE 09/16/2021 Signature of Director of Public Works
--	--

Recommendation of Board of Public Works (if required): Approved Denied

Decision of City Council (required): Approved Denied

SPECIAL EVENT COVER SHEET

This form was developed to ensure that organizations wishing to have a special event in the City of Chippewa Falls have completed all appropriate applications associated with the event. Additionally, in the interest of promoting a safe and enjoyable event, to provide emergency services personnel the opportunity to review the applications and discuss any potential concerns.

Name of Event: <i>Paint the Town Pink Car Show</i>	Event Description (e.g. walk, concert, etc.): <i>Health awareness retail event / car show</i>
Name and Address of Sponsoring Organization: <i>Chippewa Falls Main Street, 514 N. Bridge St., Chippewa Falls, WI 54729</i>	
Contact Name: <i>Teri Quimette</i>	Contact Address: <i>514 N. Bridge St., Chippewa Falls</i>
Work Phone: <i>715-723-6661</i>	Cell Phone: <i>—</i>
Email: <i>teri@cfms.us</i>	Day of Event Contact Name and Number (if different): <i>Same</i>
Date(s) of Event: <i>October 7, 2021</i>	Estimated Daily Attendance: <i>500</i>

Location(s) of Event:
100-500 blocks of N. Bridge St.

City Services/Equipment Requested:
Barricades
None from CPD. ~~SB105~~

Please check each box below that applies to your event.

Corresponding applications must be completed and attached to this document.

- | | |
|--|--|
| <input type="checkbox"/> Temporary Class "B"/"Class B" Retailer's License (Picnic License) Application | <input type="checkbox"/> Food Vendors*
<small>*supply proof of licensure from Chippewa County</small> |
| <input checked="" type="checkbox"/> Street Use Permit Application | <input type="checkbox"/> Dance/Music Application |
| <input type="checkbox"/> Fireworks Permit | <input type="checkbox"/> Temporary Extension of Premises
<small>(in relation to existing license holders)</small> |

Events to be held in any City Park must complete a special event application with the Parks, Recreation and Forestry Department for consideration by the Park Board.

FOR OFFICE USE ONLY - ROUTING VERIFICATION

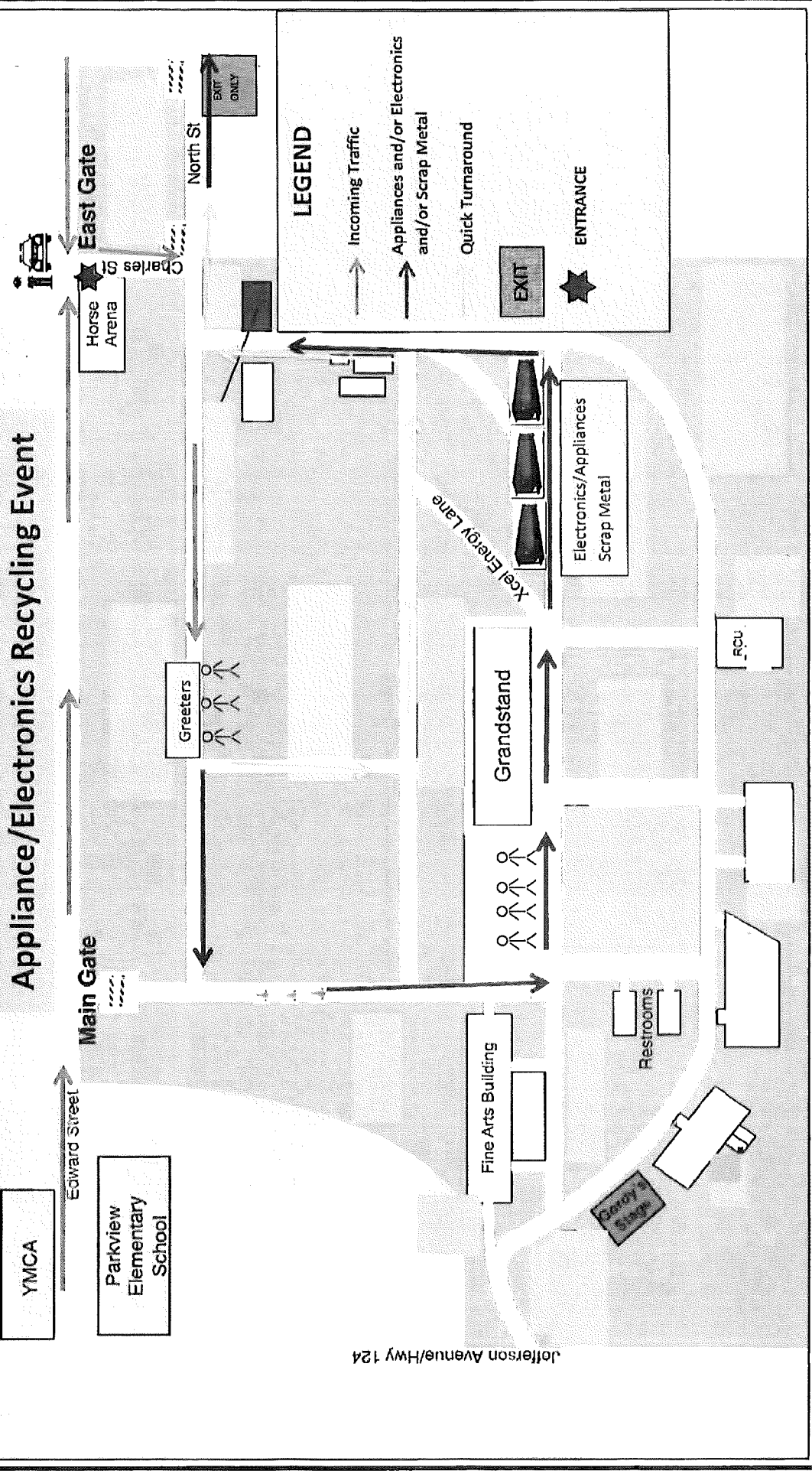
Police Chief Signature: 	Date: <i>09/16/2021</i>
Fire Chief Signature: 	Date: <i>9-17-2021</i>
Director of Public Works/City Engineer/Utilities Manager: <i>Richard J. Rudy PE</i>	Date: <i>09/16/2021</i>



CITY OF CHIPPEWA FALLS STREET USE PERMIT APPLICATION

Applicant Name and Address: Chippewa County Recycling Program, 711 N. Bridge Street, Chippewa Falls WI		Applicant Phone Number: 715-726-7999
<input checked="" type="checkbox"/> Please check here if the applicant is the individual in charge of the event. If not, please indicate Name, Address and Phone Number of responsible individual.	Name, Address and Phone Number of the headquarters of the organization and responsible head of such organization:	
Name of the event: Chippewa County Clean Sweep	Estimated number of persons participating: 700 vehicles	
Date and start and end times requested for street use: Saturday, October 23, 2021 from 7 am - 12:15 pm		
Accurate description of the portion of the street or streets being requested for use (attach maps if necessary): Charles St. would be the only entrance to the Northern WI State Fairgrounds. North St. would be an exit only for the event.		
Use, described in detail, for which the street use permit is requested: Restricted use during the event.		
City services requested for the event (e.g., Street Department or Police Department staff time) <i>Not needed in the fall cleanup -</i> Police officer to be present at Charles/Edward Street and three barricades (Main Gate, North/State St., Charles/North St.)		
The applicant agrees to indemnify, defend, and hold the City and its employees and agents harmless against all claims, liability, loss, damage or expense incurred by the City or account of any injury to, or death of, any persons or any damage to property caused by or resulting from the activities for which the permit is granted. This Street Use Permit for the event may be terminated by the Chippewa Falls Police Department if the health, safety, and welfare of the public appears to be endangered by the activities or if the event is in violation of any of the conditions of the permit or regulations adopted by the Common Council. Applicant understands they shall be present when the Board of Public Works or City Council considers the request for Street Use Permit. Failure to appear may be grounds for denial of the requested permit.		
Signature of Applicant <i>Alexee Yohnk, Chippewa Co. Recycling Coord.</i>		Date 9-9-21
OFFICE USE ONLY		
Estimated cost of City services requested (to be completed by Police Chief and Director of Public Works): <i>None from CPD. \$0105</i>		
Requirements of Applicant:		
Approved by: 	Signature of Director of Public Works <i>David J. Ruby PE 09/14/2021</i>	
Signature of Chief of Police	Signature of Director of Public Works	
Recommendation of Board of Public Works (if required):	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied
Decision of City Council (required):	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied

Northern Wisconsin State Fairgrounds



NOTE: Dumpsters must be placed on blacktop or gravel road ways and not on the grass.

DIRECTIONS: State Hwy 53N to Cty Trk S East. At the first roundabout, take the first right onto State Hwy 124 South. Continue approx. 3-4 miles. Turn left on Edward Street (between YMCA and Parkview School). The Northern WI State Fairgrounds is on the right (south side).

Bridget Givens

From: Renee Yohnk
Sent: Thursday, September 9, 2021 10:49 AM
To: Bridget Givens
Subject: Street Use Permit Application for Chippewa County Recycling Event - Oct 23
Attachments: scan_ryohnk_2021-09-09-10-42-56.pdf

Good morning Bridgett,

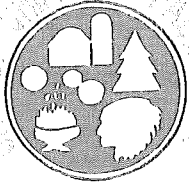
Attached please find the map of the NWSF for the 2021 Fall Recycling Event. Everything will run the same in the past with traffic flow and street use but we will NOT be accepting hazardous chemicals due to a backlog at the incinerators. We will only be accepting appliances, electronics and scrap metal.

Thank you.

Sincerely,

Renee Yohnk
Chippewa County Recycling Coordinator

Helping people in Chippewa County – Reduce-Reuse-Recycle
Department of Land Conservation and Forest Management
711 N. Bridge Street
Chippewa Falls, WI 54729
715-726-7999
www.co.chippewa.wi.us/lcfm



City of Chippewa Falls

30 WEST CENTRAL STREET, CHIPPEWA FALLS, WISCONSIN 54729

PROCLAMATION

WHEREAS, 1,889 rail grade crossing collisions resulted in 678 personal injuries and were responsible for 201 fatalities in the United States during 2020; and

WHEREAS, 1,088 trespassing incidents have occurred in the United States resulting in 532 pedestrians being killed and another 556 injured while trespassing on railroad property rights of way during 2020; and

WHEREAS, educating and informing the public about rail safety, reminding the public that railroad right of ways are private property, enhancing public awareness of the dangers associated with highway rail grade crossings, ensuring pedestrians and motorists are looking and listening while near railways, and obeying established traffic laws will reduce the number of fatalities and injuries; and

WHEREAS, the International Association of Chiefs of Police, National Operation Lifesaver, United States Department of Transportation, and all local, state, county, and railroad law enforcement officers, first responders, and railroad corporations commit to partnering together in an effort to educate at a national level all aspects of railroad safety, to enforce applicable laws in support of National Rail Safety Week;

NOW, THEREFORE, I, Greg Hoffman, Mayor of the City of Chippewa Falls, do hereby proclaim September 20-26, 2021 as National Rail Safety Week and encourage all citizens to recognize the importance of rail safety education.

IN WITNESS WHEREOF, I have hereunto set my hand and signed this on the 21st day of September, 2021.

Signed _____

Greg Hoffman, Mayor
Chippewa Falls, Wisconsin

Home of The World's Purest Water

715-726-2701 • FAX - 715-726-2759

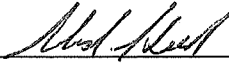
AN ORDINANCE REPEALING AND TERMINATING
COMMITTEE NO. 5 AS A STANDING COMMITTEE
UNDER § 2.21(5) OF THE CITY CODE OF ORDINANCES

**THE COMMON COUNCIL OF THE CITY OF CHIPPEWA FALLS, WISCONSIN DO
ORDAIN AS FOLLOWS:**

That § 2.21(5) of the Chippewa Falls Municipal Code of Ordinance, Committee on Oversight of Economic Development in the City, is hereby repealed and terminated as a standing committee as being redundant to the work of other standing committees.

Dated this 21st day of September, 2021.

ALDERPERSON: _____


Chuck Hull, Council President

APPROVED: _____

Gregory S. Hoffman, Mayor

ATTEST: _____

Bridget Givens, City Clerk

RESOLUTION NO. 2021-40

**RESOLUTION
APPROVING A CERTIFIED SURVEY MAP**

RESOLVED, that a Certified Survey Map prepared by Scheffler Land Surveying on behalf of Forever Associates LLC is hereby approved by the Chippewa Falls Common Council. Said parcel being all of Lot 1, Certified Survey Map number 1050, located in Volume 4, pages 64-65 of Certified Survey Maps as Document number 515248. Located in part of the Southeast ¼ of the Southeast ¼, and part of the Northeast ¼ of the Southeast ¼, Section 36, T29N, R9W, City of Chippewa Falls, Chippewa County, Wisconsin.

Dated this 21st day of September, 2021

ADOPTED: _____

Council President

APPROVED: _____

Mayor

I hereby certify that the foregoing is a copy of a Resolution adopted by the Common Council of the City of Chippewa Falls, Wisconsin.

ATTEST: _____

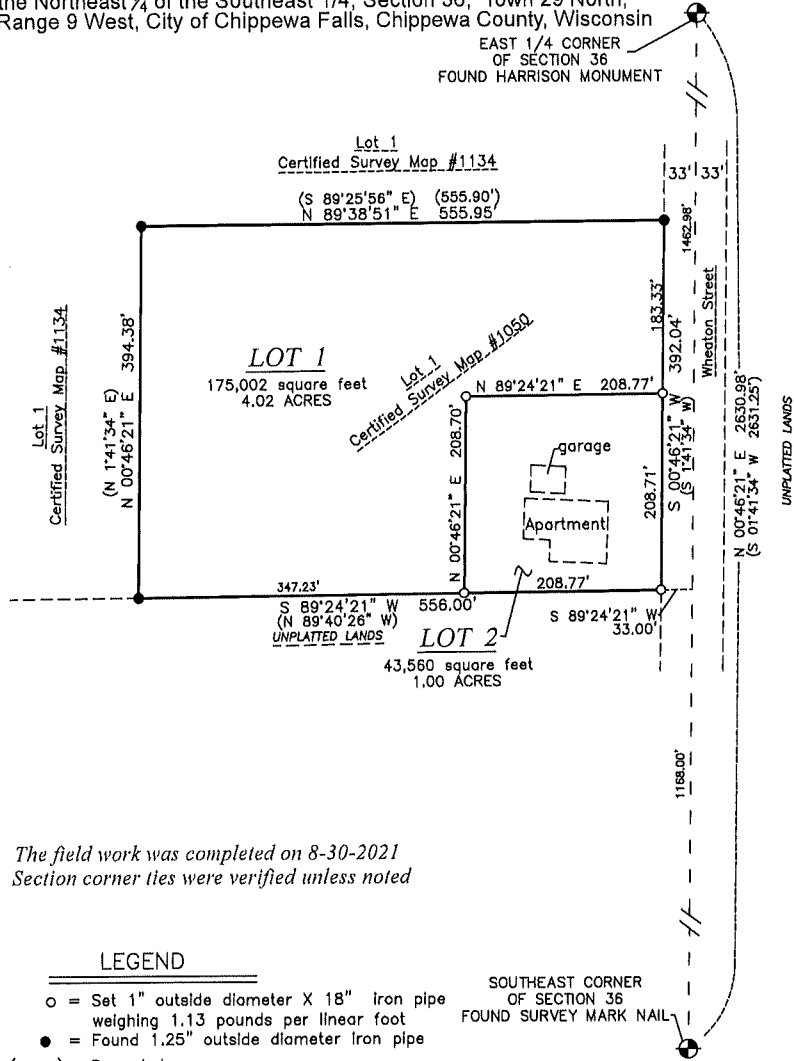
City Clerk

CHIPPEWA CO. CERTIFIED SURVEY
 MAP NO. _____

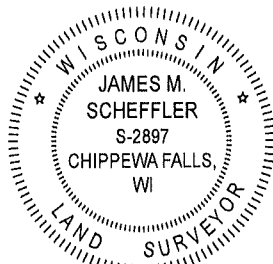
RECORDED IN VOL. _____ OF THE
 CERTIFIED SURVEY MAPS PAGE _____

REGISTER

All of Lot 1, Certified Survey Map number 1050 located in Volume 4,
 Pages 64-65 of Certified Survey Maps as Document #515248,
 Located in part of the Southeast 1/4 of the Southeast 1/4 and part of
 the Northeast 1/4 of the Southeast 1/4, Section 36, Town 29 North,
 Range 9 West, City of Chippewa Falls, Chippewa County, Wisconsin



The field work was completed on 8-30-2021
 Section corner ties were verified unless noted



CHIPPEWA CO. CERTIFIED SURVEY
MAP NO. _____

RECORDED IN VOL. _____ OF THE
CERTIFIED SURVEY MAPS PAGE

REGISTER

All of Lot 1, Certified Survey Map number 1050 located in Volume 4, Pages 64-65 of Certified Survey Maps as Document #515248, Located in part of the Southeast 1/4 of the Southeast 1/4 and part of the Northeast 1/4 of the Southeast 1/4, Section 36, Town 29 North, Range 9 West, City of Chippewa Falls, Chippewa County, Wisconsin

SURVEYOR'S CERTIFICATE:

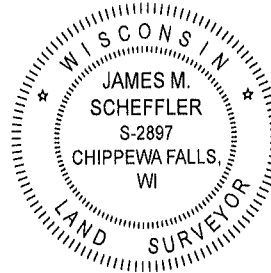
I, James M. Scheffler, Professional Land Surveyor in the State of Wisconsin, do hereby certify that by the order of Mish Ktejik, I have surveyed All of Lot 1 of Certified Survey Map number 1050, Located in part of the Southeast 1/4 of the Southeast 1/4 and part of the Northeast 1/4 of the Southeast 1/4, Section 36, Town 29 North, Range 9 West, City of Chippewa Falls, Chippewa County, Wisconsin.

Said parcel contains 218,562 square feet or 5.02 acres, more or less. The bearings are orientated to the East line of the Southeast 1/4 of Section 36, which bears N00°46'21"E.

I also certify that I have complied with the provisions of Chapter A-E 7 of the Wisconsin Administrative Code and Chapter 236.34 of the Wisconsin Statutes. I further certify to the best of my knowledge and belief that the accompanying map is a true and correct representation of the exterior boundaries of the land surveyed and the division thereof made.

Dated this _____ day of _____, 2021.

James M. Scheffler, Wisconsin Professional Land Surveyor, S-2897



CITY COUNCIL APPROVAL

Resolved that this Certified Survey Map in the City of Chippewa Falls is hereby approved.

Gregory Hoffman, Mayor Date

Bridget Givins, City Clerk Date

Supplemental Letter Agreement

In accordance with the Master Agreement for Professional Services between the City of Chippewa Falls ("Client"), and Short Elliott Hendrickson Inc. ("Consultant"), effective October 23, 2013, this Supplemental Letter Agreement dated September 16, 2021 authorizes and describes the scope, schedule, and payment conditions for Consultant's work on the Project described as: City Fuel System Upgrade Support Services for 5 Bjork-Riverside Drive, Chippewa Falls, Wisconsin.

Client's Authorized Representative: Richard Rubenzer, PE, DPW, City Engineer, Utilities Manager
Address: 30 W. Central Street
Chippewa Falls, WI 54729
Telephone: 715.726.2729 **email:** rrubenzer@chippewafalls-wi.gov

Project Manager: Bruce Olson, PE (IL, IN, WI)
Address: 10 N. Bridge Street
Chippewa Falls, WI 54729-2550
Telephone: 715.271.7515 **email:** bolson@sehinc.com

Scope: In accordance with the Scope of Services in the Client's Request for Qualifications and Proposal and the Consultants corresponding proposal dated September 8, 2021, the basic services to be provided by Consultant for this project, excerpted from the September 8, 2021 proposal, are summarized in the tasks below. Per your September 15, 2021 email correspondence, the scope below includes Option 3 of Task 3 from our proposal and includes Task 5 as an option.

Client's current fueling station system consists of one 10,000 gallon underground storage tank (UST) and two associated pump dispensers for unleaded gasoline and one 10,000 gallon UST with two associated pump dispensers for diesel fuel. The system also features a key reader capable of handling 200 vehicles and 125 users. In recent years Client has made certain upgrades to the system, but a system replacement is warranted due to current system age, regulatory requirements and insurance costs. Consultant understands that Client plans to replace the USTs with an aboveground storage tank (AST) system.

Task 1 – Tank System Site Assessment (TSSA) for UST Removal

Consultant understands Client will contract separately and directly with a certified remover/cleaner contractor that will conduct the removal and disposal of the tank system according to the Wisconsin Department of Agriculture Trade and Consumer Protection (DATCP) requirements. Consultant will provide a Wisconsin-certified site assessor to complete the TSSA following the contractor's removal of the USTs and associated fuel lines. The assessment will include soil sampling and visual inspection of the USTs in accordance with ATCP 93.580 and a guidance document referenced therein entitled *Tank-System Site Assessment, A Guide to the Assessment and Reporting of Suspected or Obvious Releases from Underground and Aboveground Storage Tank Systems (ERS-10874)*. Consultant proposes that 28 soil samples will be collected from the floor(s) and sidewalls of the excavation(s) and possibly near piping and dispensers. The samples will be collected in locations as recommended in the guidance document and based on system configuration. All soil samples will be analyzed for concentrations of petroleum volatile organic compounds (PVOCs) plus naphthalene. The soil samples will be analyzed at a Wisconsin certified analytical laboratory. Consultant assumes no groundwater samples will be collected and removal observation and soil sampling activities can be completed during one mobilization in less than one day. Additional samples or observation and sampling time, if needed, will be performed upon approval from the Client and will be billed as extra services.

Following receipt of laboratory analytical results, Consultant will complete Part B of the *Tank System Service and Closure Assessment Report (Form ERS 8951)*. Consultant will attach the original version Part B to a photocopy of Part A that will be completed by the contractor performing the tank removal and submit the form to DATCP

Bureau of Weights and Measures. Client will be responsible for providing Consultant with said copy of the completed Part A of Form ERS 8951. Consultant will also submit a copy of Part B to Client for record keeping purposes.

If warranted based on the field sampling activities and/or analytical results, Consultant can assist Client with reporting results to the Wisconsin Department of Natural Resources (WDNR) and can provide recommendations for additional investigation or remediation activities. Reporting results to WDNR and subsequent additional investigation or remediation services would be considered extra services. Consultant would prepare a fee estimate for the extra services and perform the services upon approval from Client.

Task 2 – Spill Prevention, Control and Countermeasure (SPCC) Plan Preparation for New AST System

A registered professional engineer, or designee, will complete a site reconnaissance of the facility to document existing conditions and develop a draft site drainage base map for the facility. The site reconnaissance will include, but will not be limited to, inspection and documentation of the new AST fueling system and the following:

- Other oil storage areas, including oil storage equipment and controls
- Oil transfer operations and/or areas
- Containment or diversionary structures and equipment
- Areas of previous spill events, if any
- Drainage areas and systems
- Site security measures
- Other spill prevention equipment or procedures

The purpose of the records review is to obtain and review reasonably ascertainable records from standard sources that will assist in preparing the SPCC Plan. Consultant's records review will include, but will not be limited to, the following information:

- Documentation of discharges occurring within the last year, if any, and corrective actions taken and preventive measures implemented
- Other discharge or contingency related documents previously prepared for the facility
- A current USGS 7.5 minute topographic map (or equivalent) or facility-specific documentation to support preparation of a site drainage map
- Previous inspection records, if any
- Oil storage system design
- Personnel training records

The purpose of conducting interviews is to obtain information to support the records review and site reconnaissance. Consultant will interview personnel designated by Client who are familiar with oil storage, handling and use, as well as existing spill prevention, control and countermeasure procedures. Consultant will also make reasonable attempts to interview local and/or state government officials, as necessary and as authorized by Client, to obtain additional information pertaining to SPCC Plan requirements at the facility.

Upon completion of the site reconnaissance, records review and interviews and if warranted, Consultant will prepare a memorandum summarizing facility practices, modifications or additions that may be required to comply with SPCC requirements. Design and construction engineering services that may be required for site modifications will be considered additional work. Prior to completion of the SPCC Plan, Consultant will discuss the recommendations contained in the summary memorandum with Client. Upon confirmation of practices, modifications and/or additions that Client may perform, Consultant will commence with completion of the draft then final SPCC Plan.

For the purposes of this Agreement, Consultant assumes a draft SPCC Plan will be prepared for the facility upon Client's commitment to implement or complete actions, if any, outlined in the summary memorandum or otherwise agreed to. The draft SPCC Plan will summarize the findings of the records review, interviews and site reconnaissance. The draft SPCC Plan will also identify spill prevention measures, such as tank and piping inspection, proper facility transfer operations and truck loading/unloading procedures, and it will address security, personnel training, record keeping and amendment requirements. One copy of the draft SPCC Plan will be submitted to Client for review and comment.

Upon completion of actions outlined in the summary memorandum, Consultant will prepare a final SPCC Plan for the facility. Two copies of the final SPCC Plan, incorporating comments and/or revisions from Client's review of the draft SPCC Plan, will be submitted to Client. The final SPCC Plan will be reviewed and stamped by a Professional Engineer as required by 40 CFR 112. The SPCC Plan must also have the full approval of Client management at a level with authority to commit the necessary resources.

The SPCC Plan scope and fee do not include any design services for site modifications that may be required to comply with the SPCC rules. If design services for areas not associated with the new AST system design and installation are required, a scope modification will be prepared for Client's review and approval. Client will be responsible for implementing any facility modifications that may be required to meet the SPCC requirements.

Task 3 – Aboveground Storage Tank (AST) System Engineering

Prior to beginning design, Consultant will work with Client to fully understand Client's existing use and practices with the UST system. In addition, Consultant will assess site features and discuss future use considerations (traffic flow, types of equipment and vehicles in the fleet, user capabilities, automation and inventory control, safety, frequency of fueling, supplier considerations and others). Consultant will interview Rick Ruf, Rick Rubenzer and others Client may identify to understand where the system can be best located.

Consultant will gain an understanding of existing site electrical and controls and design the new system for seamless integration. Tank design will include containment and fire rating specification and force protection in compliance with state fire code and local fire marshal requirements. The piping will incorporate overfill and spill protection, anti-siphon valve and fusible fire link, and pressure relief and an appropriate end of pipe venting location. Lighting and fencing needs will be reviewed for site safety and security.

Dispenser design will consider appropriate flow rates, fuel filter and component compatibility with unleaded and diesel fuels. General operations requirements will be reviewed with Client for site reporting and planning considerations. Point of sales will be specified to simplify communications with the site dispenser and meet Client fleet needs. Consultant's design will also include containment considerations and recommendations compatible with the site SPCC and stormwater plan requirements with commensurate spill kit, runoff and spill containment measures considered.

Consultant's engineers and technicians will be available to coordinate between Client, contractors and fueling system vendors during various stages of the fuel system installation to answer questions and verify suitability of specified equipment.

Per Client's September 15, 2021 email, Consultant is including the following tasks for Option 3 from Client's request for proposal:

- Client RFI
- Front end specifications and pre-qualification
- Technical specifications
- Plan sheets with DATCP Review
- Bidding assistance and walkthrough
- Submittal reviews
- Progress meetings
- Two site visits
- Closeout with Record Drawings

Task 4 – Site Grading Design and Surveying

Consultant will collect field topography of the project site, including contacting the Diggers Hotline to locate existing buried facilities. Consultant will prepare site construction plans, including removals plan, site plan, grading plan, erosion control plan and construction details. Consultant will prepare site construction technical standards. Plans and specifications will be incorporated into the bid package discussed in Task 3.

Task 5 (Optional) – Construction Observation Services

If requested, Consultant can provide a resident project representative (RPR) to observe and document that installation of the AST system is in general accordance with the approved design, plans and specifications. The

RPR, and Consultant office staff as necessary, would work with the installation contractor(s) and Client to address any field changes or concerns during the construction project. Upon completion of construction, Consultant would provide a report to Client summarizing the construction and substantial material changes from the approved design. For purposes of this agreement, and in accordance with Client's request, we have included fees for up to 100 hours of field observation and administrative services.

Schedule: Consultant understands Client's goal is to complete the project by December 31, 2021. Consultant understands Client anticipates approval of the Agreement at the City Council meeting on September 21, 2021. Consultant will schedule a kickoff teleconference with Client as soon thereafter as feasible to establish a preliminary schedule for the project.

Consultant indicated in Consultant's September 8, 2021 proposal that the schedule will likely be primarily driven by the availability of the certified remover/cleaner to remove the existing UST system, availability of new AST systems and winter construction weather. Consultant has communicated with several AST system vendors and current AST lead times can be up to three months. With design time, system lead time and construction, meeting a December 31, 2021 project completion is unlikely. Close coordination between Consultant's design team, Client and vendor(s) will be required and Consultant will work closely with Client along the way to keep Client informed of schedule issues.

For Task 1, Consultant will coordinate the availability of our certified TSSA assessor with the remover/cleaner. For Task 2, Consultant will prepare a SPCC Plan so the Plan is complete prior to bringing the new AST system on-line. For Task 3, engineering for the new AST system and preparation of bid documents would be expected to be completed within six weeks of Council's approval to proceed, assuming necessary information is available within that time frame. Bidding and contracting for the AST system would follow, likely leading to ordering an AST system in late 2021. For Task 4, regrading plans and surveying will be completed in conjunction with the engineering for the new AST system and once a preliminary AST system design and location are chosen. For Task 5, if requested, construction observation services would be coordinated and performed in conjunction with the AST system installation contractor.

Payment: The estimated fee for Tasks 1 – 4 is \$36,810 including expenses and equipment. The estimated fee for Optional Task 5 is \$11,550 including expenses and equipment. The payment method, basis, frequency and other special conditions are set forth in attached Exhibit A-1.

Other Terms and Conditions: Other or additional terms contrary to the Master Agreement for Professional Services that apply solely to this project as specifically agreed to by signature of the Parties and set forth herein: None.

x:\ael\clfcit\pursuits\p162292_city fuel system_en_09.21\5. proposal docs\city fuel system upgrade suppl ltr agreement_9.16.21.docx

CITY OF CHIPPEWA FALLS

By: _____ Date: _____
Mayor – Honorable Gregory Hoffman

Attest: _____ Date: _____
City Clerk – Bridget Givens

Approved as to Form:

By: _____ Date: _____
City Attorney

I, Lynne R. Bauer, hereby certify that sufficient funds are in the Treasury of the City of Chippewa Falls, to meet the expense of this Contract, or that provisions have been made to pay the liability that will accrue thereunder.

Lynne R. Bauer, Finance Director

SHORT ELLIOTT HENDRICKSON INC.

By: 
Bruce Olson, PE (IL, IN, WI)
Principal | Client Service Manager

Date: 9/16/2021

Exhibit A-1
to Supplemental Letter Agreement
Between City of Chippewa Falls (Client)
and
Short Elliott Hendrickson Inc. (Consultant)
Dated September 16, 2021

Payments to Consultant for Services and Expenses
Using the Hourly Basis Option

The Agreement for Professional Services is amended and supplemented to include the following agreement of the parties:

A. Hourly Basis Option

The Client and Consultant select the hourly basis for payment for services provided by Consultant. Consultant shall be compensated monthly. Monthly charges for services shall be based on Consultant's current billing rates for applicable employees plus charges for expenses and equipment. Consultant will provide an estimate of the costs for services in this Agreement. Compensation to Consultant based on the rates is conditioned on completion of the work within the effective period of the rates. Should the time required to complete the work be extended beyond this period, the rates shall be appropriately adjusted.

B. Expenses

The following items involve expenditures made by Consultant employees or professional consultants on behalf of the Client. Their costs are not included in the hourly charges made for services and shall be paid for as described in this Agreement but instead are reimbursable expenses required in addition to hourly charges for services:

1. Transportation and travel expenses.
2. Long distance services, dedicated data and communication services, teleconferences, Project Web sites, and extranets.
3. Lodging and meal expense connected with the Project.
4. Fees paid, in the name of the Client, for securing approval of authorities having jurisdiction over the Project.
5. Plots, Reports, plan and specification reproduction expenses.
6. Postage, handling and delivery.
7. Expense of overtime work requiring higher than regular rates, if authorized in advance by the Client.
8. Renderings, models, mock-ups, professional photography, and presentation materials requested by the Client.
9. All taxes levied on professional services and on reimbursable expenses.
10. Other special expenses required in connection with the Project.
11. The cost of special consultants or technical services as required. The cost of subconsultant services shall include actual expenditure plus 10% markup for the cost of administration and insurance.

The Client shall pay Consultant monthly for expenses.

C. Equipment Utilization

The utilization of specialized equipment, including automation equipment, is recognized as benefiting the Client. The Client, therefore, agrees to pay the cost for the use of such specialized equipment on the project. Consultant invoices to the Client will contain detailed information regarding the use of specialized equipment on the project and charges will be based on the standard rates for the equipment published by Consultant.

The Client shall pay Consultant monthly for equipment utilization.

LEASE AGREEMENT

THIS LEASE, made between Family Dollar, Lessor, and the City of Chippewa Falls, Lessee,

WITNESSETH:

1. The Lessor does hereby let and lease unto the Lessee the following described lands in the City of Chippewa Falls, Chippewa County, Wisconsin:

Lot 2, Block 21 of the City of Chippewa Falls Plat, Chippewa County, Wisconsin. Except the area used in conjunction with the loading dock and the single parking stall North and adjacent to the loading dock. Also excepting an 8'x12' area located along the West edge of the building, and the South right-of-way line of Central Street. Said 8'x12' area is used as a public doorway.

Located at 33 West Central Street.

2. The term of the Lease shall be two years. However, either party may terminate this lease for any reason or without reason or cause upon delivery of written notice to the other of termination not less than 120 days thereafter.
3. In consideration thereof, Lessee shall:
 - a) Sign and enforce a 2 hour non-metered parking limit.
 - b) Sweep and remove snow on the regular schedule as performed on municipal owned parking lots.
 - c) Provide liability insurance coverage with limits of \$100,000.00 and \$300,000.00 and a \$1,000,000.00 umbrella. Lessor shall also continue its' own liability insurance in the same amounts covering the leased premises.
4. This Lease shall bind the parties hereto, their representatives and assigns and shall go into effect upon signatures herein.
5. Lessor may place, at Lessor's expense, a sign on the leased property, provided any such sign complies with the City's sign code.

Dated this 21st day of September, 2021.

FAMILY DOLLAR, LESSOR

CITY OF CHIPPEWA FALLS, LESSEE

By: _____

By: _____
Gregory S. Hoffman, Mayor

Attest: _____
Bridget Givens, City Clerk