



Common Council Regular Meeting
Tuesday, October 07, 2025 at 5:30 PM
City Hall, 100 E Fountain St, Dodgeville, WI 53533

AGENDA

- I. CALL TO ORDER AND ROLL CALL
- I. PLEDGE OF ALLEGIANCE
- II. CONSENT AGENDA
 - 1. Approval of Minutes from September 30, 2025.
 - 2. Approval of Claims from October 7, 2025
- III. PUBLIC COMMENT Citizen or delegation presentations, requests or comments and discussion of same, pursuant to Wis. Stat. Sec. 19.83 (2) and Sec. 19.84 (2). Ten minute limit except by consent of council. No action will be taken on any item that is not specifically listed on the agenda.

IV. REPORTS/RECOMMENDATIONS

- 3. Police Report
- 4. Chamber Update
- 5. Recreation Update
- 6. Clerk/Treasurer Report
- 7. Mayor Report
- 8. Library and Admin Building Report

V. NEW BUSINESS

- 9. Approval of the following liquor license application for 2025-2026: Class "A" Retailers Fermented Malt Beverage & "Class A" Intoxicating Liquor License Application for: Laxami Narayan Fuel Inc dba Dodgeville Market Place - Rohitkumar V. Joshi, Agent
- 10. Approval of Cigarette, Tobacco, and Electronic Vaping Device Retail License Application for 2025-2026: Laxami Narayan Fuel Inc dba Dodgeville Market Place - Rohitkumar V. Joshi -Agent
- 11. Discussion and possible action to approve the Special Event License application for the No Kings II Rally event on Saturday, October 18th.
- 12. Discussion and possible action to approve the Special Event License application for the Home for the Holidays Light Parade on Saturday, November 29th.
- 13. Discussion and possible action to approve request from Chamber to help aid in costs of lighting hung on the street for Home for the Holidays.

- 14. Discussion and possible recommendation to Common Council to approve final quote from Gerber Leisure to purchase pool shade structure.
- 15. Consider Ordinance No. 25-19 to Amend the Schedule of Fees in Section 25.045(a), relating to setting fees for Building & Development Planning & Zoning and Building Inspection.
- 16. Discussion and possible action on Work Change Directive #15 for Water System Improvements Project.
- 17. Discussion and possible action on Change Order #2 for Water System Improvements Project.

VI. OLD BUSINESS

VII. ANY OTHER BUSINESS AS ALLOWED BY LAW

VIII. CLOSED SESSION

18. Adjourn to Closed Session pursuant to Wis. State Statute 19.85(1)

IX. OPEN SESSION

- 19. Reconvene to Open Session
- 20. Any Action Needed as a Result of Closed Session

X. ADJOURN

21. Motion to Adjourn

Any person who has a qualifying disability, as defined by the Americans with Disabilities Act, that requires the meeting or material at the meeting to be in an accessible location or format, must contact the City Clerk at the address listed above or call 930-5228, prior to the meeting so that any necessary arrangements can be made to accommodate each request.



PUBLIC NOTICE

Common Council Special Meeting
Tuesday, September 30, 2025 at 5:30 PM
City Hall, 100 E Fountain St, Dodgeville, WI 53533

MINUTES

I. CALL TO ORDER AND ROLL CALL

The meeting was called to order by Mayor Hottmann at 5:30pm. Members present: Reynolds-Lair, Sersch, DeVoss, Weber, Olson, Johnson-Solberg, Tremelling. Members absent: Johnson

Community Members Present: Michelle Godez-Schilling, Claudia Looze, Anthony Wood, Rachel Keller, Melissa Brennum, Jason Reed, and Aaron Boehnen.

II. PLEDGE OF ALLEGIANCE

III. CONSENT AGENDA

Approval of Minutes from September 16, 2025.
 Motion by DeVoss, second by Sersch to approve minutes from September 16, 2025 meeting.

- IV. PUBLIC COMMENT Citizen or delegation presentations, requests or comments and discussion of same, pursuant to Wis. Stat. Sec. 19.83 (2) and Sec. 19.84 (2). Ten minute limit except by consent of council. No action will be taken on any item that is not specifically listed on the agenda.
- During public comment, Dodgeville residents and some living outside of the City of Dodgeville spoke to the council with recommendations transitioning the role of Mayor from a part-time role to a full-time role. Also, during public comment, another community resident also spoke to the council with his recommendation of full-time administrator and part-time mayor.

V. OLD BUSINESS

Discussion and possible action to approve a moving company to assist with the transition to the new administration building.

Motion by DeVoss, second by Weber to approve moving estimate from Hollandale Movers to assist with transition to new administration building. Roll Call Vote 7-0. Motion carries.

VI. NEW BUSINESS

 Consideration and possible action of a recommendation from the Administration & Personnel Committee to approve setting the 2026 employer health insurance contribution rate for nonrepresented employees.

Motion by Johnson-Solberg, second by DeVoss to approve setting the 2026 employer health insurance contribution rate for non-represented employees to 82%. Voice vote 7-0.

4. Consideration and possible action of a recommendation from the Administration & Personnel Committee to set the 2026 Cost of Living Adjustment for non-represented employees.

Motion by DeVoss, second by Reynolds-Lair to set the 2026 Cost of Living Adjustment for non-represented employees to 2.8%. Voice vote 7-0.

Discussion and possible action of a recommendation from the Administration and Personnel Committee on adding another streets crew position.

Motion by Weber, second by Olson to move forward with filling two street crew positions. Voice Vote 7-0.

6. Discussion and possible direction on governance structure, including moving forward with

either a full-time Mayor or a full-time City Administrator with a part-time Mayor

During this discussion, Mayor Hottmann recused himself to allow council members to have an open and honest discussion about their thoughts of either a full-time Mayor and/or Full-Time

Administrator and part-time Mayor. During this discussion, no action was taken, however, several council members showed support towards a part-time mayor with a full-time administrator. After hearing all ideas/thoughts from council members, it was decided that this topic would be discussed

Motion by Olson, second by Reynolds-Lair to discuss full-time Administrator and part-time Mayor role to Administration & Personnel committee, with eventual return to Closed Session Common Council. Voice Vote 7-0. Motion Carried.

at future Admin & Personnel meetings, eventually likely ending up as a closed session item on a

VII. CLOSED SESSION

future council agenda(s).

7. Adjourn to Closed Session pursuant to Wis. State Statute 19.85(1)(c) to consider employment, promotion, compensation or performance evaluation data of any public employee over which the governmental body has jurisdiction or exercises responsibility, specifically related to compensation and benefits of the public works streets foreman and past employee payout. Motion by Olson, second by Johnson-Solberg to adjourn to Closed Session.

VIII. OPEN SESSION

- 8. Reconvene to Open Session
- 9. Any Action Needed as a Result of Closed Session

IX. ADJOURN

Motion to Adjourn
 Motion by Weber, second by Johnson-Solberg
 Time 6:51pm

Any person who has a qualifying disability, as defined by the Americans with Disabilities Act, that requires the meeting or material at the meeting to be in an accessible location or format, must contact the City Clerk at the address listed above or call 930-5228, prior to the meeting so that any necessary arrangements can be made to accommodate each request.

COMMON COUNCIL - CLAIMS REPORT

Tuesday, October 7, 2025

		AMOUNT
Accounts Payable		
Capital Project Fund	\$	113,377.80
Affordable Housing Fund	\$	-
General Fund	\$	88,257.77
Debt Service Fund	\$ \$	27,564.00
Water Fund	\$	28,783.96
Sewer Fund	\$	32,069.10
Library Fund	\$	3,790.83
TID 3 Fund		
TOTAL ACCOUNTS PAYABLE	\$	293,843.46
Payroll		
General Fund (100)	\$	81,587.00
Water Fund (200)	\$	7,482.62
Sewer Fund (300)	\$ \$	7,147.76
Special Purpose Library Fund (150)	\$	9,670.03
TOTAL PAYROLL	\$	105,887.41
TOTALS BY FUND		
GENERAL (100, 140, 150, 160, 161, 170)	\$	324,247.43
WATER (200)	\$	36,266.58
SEWER (300)	\$ \$	39,216.86
TOTAL ALL PAYMENTS	\$	399,730.87

Section II. Item #2.

Oct 06, 2025 11:07AM

Report Criteria:

Report type: Summary

Check.Type = {<>} "Adjustment"

GL Period	Check Issue Date	Check Number	Vendor Number	Payee	Check GL Account	Amount
09/25	09/17/2025	64528	2147	Abracadabra Entertainment	150-21000-000-000	400.00- V
09/25	09/17/2025	64665	296	NAPA AUTO PARTS	100-21000-000-000	10.99- V
10/25	10/02/2025	64686	2154	Traci Fassbender	100-21000-000-000	125.00- V
09/25	09/17/2025	64748	296	NAPA AUTO PARTS	100-21000-000-000	210.46- V
09/25	09/17/2025	64892	879	SECURIAN FINANCIAL GROUP INC	100-21000-000-000	678.57
09/25	09/17/2025	64893	2147	Abracadabra Entertainment	150-21000-000-000	400.00
09/25	09/22/2025	64895	2177	James Stowell	999-21000-000-000	205.15
09/25	09/22/2025	64896	2176	Jesse & Valerie Vood	999-21000-000-000	127.61
09/25	09/22/2025	64897	772	PETTY CASH	100-21000-000-000	100.00
09/25	09/22/2025	64898	89	BAKER & TAYLOR LLC	150-21000-000-000	298.12
09/25	09/22/2025	64899	1830	Playaway Products LLC	150-21000-000-000	200.97
09/25	09/22/2025	64900	794	PROQUEST LLC	150-21000-000-000	1,886.10
09/25	09/22/2025	64901	932	STRANG HEATING & ELECTRIC	160-21000-000-000	263.95
09/25	09/23/2025	64902	1509	AEROCLAVE LLC	100-21000-000-000	779.00
09/25	09/24/2025	64903	2181	Chad Lewis	150-21000-000-000	350.00
10/25	10/02/2025	64905	2154	Traci Fassbender	100-21000-000-000	125.00
10/25	10/07/2025	64906	2175	A.B. Electric LLC	300-21000-000-000	170.00
10/25	10/07/2025	64907	1299	ABT MAILCOM	300-21000-000-000	1,939.50
10/25	10/07/2025	64908	36	AMAZON CAPITAL SERVICES	100-21000-000-000	1,024.82
10/25	10/07/2025	64909	1596	ASSOCIATED APPRAISAL CONSULTANTS INC.	100-21000-000-000	1,555.33
10/25	10/07/2025	64910	1337	BADGER METER	200-21000-000-000	252.34
10/25	10/07/2025	64911	85	BADGER WELDING SUPPLIES INC	100-21000-000-000	62.00
10/25	10/07/2025	64912	120	BOARDMAN & CLARK LLP	100-21000-000-000	21,000.00
10/25	10/07/2025	64913	128	BOUND TREE MEDICAL LLC	100-21000-000-000	712.28
10/25	10/07/2025	64914	188	CINTAS CORPORATION #446	100-21000-000-000	102.36
10/25	10/07/2025	64915	195	CITY OF DODGEVILLE WATER UTILITY	100-21000-000-000	4,627.57
10/25	10/07/2025	64916	218	COMPLIANCE SERVICES INC	100-21000-000-000	235.00
10/25	10/07/2025	64917	1819	Dino's Bar & Grill	100-21000-000-000	131.00
10/25	10/07/2025	64918	2122	Dougherty ICF	100-21000-000-000	2,025.00
10/25	10/07/2025	64919	331	Ehlers	100-21000-000-000	850.00
10/25	10/07/2025	64920	1823	Elan Financial Services	100-21000-000-000	10,178.69
10/25	10/07/2025	64921	371	FIRE SAFETY USA INC	100-21000-000-000	174.45
10/25	10/07/2025	64922	427	HALLADA MOTORS INC	100-21000-000-000	3,167.69
10/25	10/07/2025	64923	440	HENNESSEY IMPLEMENT INC	100-21000-000-000	105.73
10/25	10/07/2025	64924	2182	Hometown Florist	100-21000-000-000	55.00
10/25	10/07/2025	64925	452	INSIGHT FS	100-21000-000-000	940.67
10/25	10/07/2025	64926	458	IOWA COUNTY HIGHWAY DEPARTMENT	100-21000-000-000	3,174.46
10/25	10/07/2025	64927	468	J & R SUPPLY INC	100-21000-000-000	16.00
10/25	10/07/2025	64928	2144	J.F. Ahern Co.	100-21000-000-000	550.00
10/25	10/07/2025	64929	491	JEFFERSON FIRE & SAFETY INC	100-21000-000-000	2,923.70
10/25	10/07/2025	64930	1848	Joseph Pepper	100-21000-000-000	55.00
10/25	10/07/2025	64931	1779	JX Enterprises Inc	100-21000-000-000	2,487.12
10/25	10/07/2025	64932	1954	Kathaleen Gottardo	100-21000-000-000	150.00
10/25	10/07/2025	64933	2183	Maxine Tremelling	100-21000-000-000	150.00
10/25	10/07/2025	64934	1544	MEDLINE INDUSTRIES INC.	100-21000-000-000	412.06
10/25	10/07/2025	64935	668	MHTC-MH	100-21000-000-000	1,819.85
10/25	10/07/2025	64936	2086	Mulcahy Shaw Water Inc	300-21000-000-000	452.52
10/25	10/07/2025	64937	2184	Paul French	100-21000-000-000	3.00
10/25	10/07/2025	64938	778	PILLING ELECTRIC SERVICE LLC	100-21000-000-000	112.50
10/25	10/07/2025	64939	783	POMASL FIRE EQUIPMENT INC	100-21000-000-000	7,438.00
10/25	10/07/2025	64940	790	PREMIUM WATERS INC	200-21000-000-000	79.98
10/25	10/07/2025	64941	795	PUBLIC SERVICE COMMISSION OF WI	200-21000-000-000	1,762.47
10/25	10/07/2025	64942	835	RITCHIE IMPLEMENT INC	100-21000-000-000	498.19

Section II. Item #2. Check Register - Summary Oct 06, 2025 11:07AM

Check Issue Dates: 9/17/2025 - 10/7/2025

3L Period	Check Issue Date	Check Number	Vendor Number	Payee	Check GL Account	Amount
10/25	10/07/2025	64943	851	RULE CONSTRUCTION LTD	300-21000-000-000	2,828.46
10/25	10/07/2025	64944	1335	SCHMITZ JANITORIAL SUPPLY	200-21000-000-000	40.35
10/25	10/07/2025	64945	926	STAPLES ADVANTAGE	100-21000-000-000	279.18
10/25	10/07/2025	64946	1884	Stryker Sales LLC	100-21000-000-000	7,214.40
10/25	10/07/2025	64947	950	SWTC	100-21000-000-000	400.04
10/25	10/07/2025	64948	987	THE SHOE BOX LTD	100-21000-000-000	297.00
10/25	10/07/2025	64949	1040	UPLAND HILLS HEALTH INC	100-21000-000-000	252.44
10/25	10/07/2025	64950	1109	WIL-KIL	100-21000-000-000	53.98
10/25	10/07/2025	64951	1145	ZEPHYR ALUMINUM PRODUCTS INC	300-21000-000-000	686.00
10/25	10/07/2025	64952	36	AMAZON CAPITAL SERVICES	160-21000-000-000	164.99
10/25	10/07/2025	64953	1915	Architectural Design Consultants Inc	160-21000-000-000	15,834.30
10/25	10/07/2025	64954	399	GERBER LEISURE PRODUCTS INC	160-21000-000-000	659.00
10/25	10/07/2025	64955	727	NATURES WAY PORTABLE UNITS	160-21000-000-000	711.00
10/25	10/07/2025	64956	749	OTTER CREEK CONSTRUCTION LLC	160-21000-000-000	26,915.00
10/25	10/07/2025	64957	1881	True North Consultants Inc	160-21000-000-000	675.00
10/25	10/07/2025	64958	1378	VIERBICHER ASSOCIATES	160-21000-000-000	37,771.25
10/25	10/07/2025	64959	2180	WM Corporate Services Inc	160-21000-000-000	13,338.65
09/25	09/17/2025	700193	408	GORDON FLESCH CO INC	100-21000-000-000	11.78
09/25	09/24/2025	700194	1397	DEERE CREDIT INC	160-21000-000-000	1,783.83
09/25	09/30/2025	700195	2063	Employee Benefits Corporation	100-21000-000-000	90.00
09/25	09/17/2025	700196	363	FARMERS SAVINGS BANK	100-21000-000-000	25.00
09/25	09/17/2025	700197	296	NAPA AUTO PARTS	100-21000-000-000	221.45
09/25	09/18/2025	700198	363	FARMERS SAVINGS BANK	100-21000-000-000	50.00
09/25	09/22/2025	700199	1393	TC NETWORKS INC	160-21000-000-000	953.90
09/25	09/22/2025	700200	1776	Blain's Farm & Fleet	100-21000-000-000	50.39
09/25	09/22/2025	700201	408	GORDON FLESCH CO INC	300-21000-000-000	150.05
09/25	09/22/2025	700202	1328	GFC Leasing WI	150-21000-000-000	243.85
09/25	09/22/2025	700203	408	GORDON FLESCH CO INC	100-21000-000-000	41.25
09/25	09/29/2025	700204	34	ALLIANT ENERGY/WP&L (UTILITY PAYMENTS)	150-21000-000-000	105.44
10/25	10/03/2025	700205	1397	DEERE CREDIT INC	160-21000-000-000	1,062.02
09/25	09/30/2025	700206	1482	FARMERS SAVINGS BANK	140-21000-000-000	27,564.00
10/25	10/02/2025	700207	1975	Zift Systems	200-21000-000-000	15.00
10/25	10/02/2025	700208	363	FARMERS SAVINGS BANK	100-21000-000-000	25.00
10/25	10/07/2025	700209	34	ALLIANT ENERGY/WP&L (UTILITY PAYMENTS)	100-21000-000-000	19,575.80
10/25	10/07/2025	700210	1776	Blain's Farm & Fleet	100-21000-000-000	255.22
10/25	10/07/2025	700211	1645	CAPITAL ONE (WALMART)	100-21000-000-000	75.38
10/25	10/07/2025	700212	1328	GFC Leasing WI	200-21000-000-000	459.10
10/25	10/07/2025	700213	296	Napa Auto Parts	100-21000-000-000	50.90
10/25	10/07/2025	700214	1393	TC NETWORKS INC	100-21000-000-000	4,964.20
10/25	10/07/2025	700215	1018	TOWN & COUNTRY ENGINEERING INC	200-21000-000-000	530.86
10/25	10/07/2025	700216	1515	STATE OF WI-ENVIRONMENTAL IMPROVMNT FUN	200-21000-000-000	38,099.01
10/25	10/07/2025	700217	2179	Automation Arts LLC	160-21000-000-000	13,244.91

Grand Totals: 293,831.68

Summary by General Ledger Account Number

CITY OF DODGEVILLE

GL Account	Debit	Credit	Proof
100-13105-000-000	300.00	.00	300.00
100-21000-000-000	356.45	88,602.44-	88,245.99
100-21552-000-000	678.57	.00	678.57
100-44900-000-000	3.00	.00	3.00
100-51300-000-000	21,042.48	.00	21,042.48
100-51410-325-000	325.00	.00	325.00

GL Account	Debit	Credit	Proof
100-51410-390-000	45.98	.00	45.98
100-51420-325-000	145.54	10.00-	135.54
100-51510-210-000	850.00	.00	850.00
100-51530-210-000	1,555.33	.00	1,555.33
100-51600-340-000	251.83	.00	251.83
100-51600-390-000	550.00	.00	550.00
100-51710-222-000	855.91	.00	855.91
100-51710-224-000	230.68	.00	230.68
100-51710-226-000	382.38	.00	382.38
100-51710-240-000	2,086.86	.00	2,086.86
100-51710-310-000	186.37	.00	186.37
100-51912-390-000	100.00	.00	100.00
100-51963-390-000	90.00	.00	90.00
100-52100-210-000	96.91	.00	96.91
100-52100-224-000	307.06	.00	307.06
100-52100-226-000	194.47	.00	194.47
100-52100-240-000	945.90	.00	945.90
100-52100-340-000	415.31	.00	415.31
100-52100-385-000	55.00	.00	55.00
100-52100-610-000	231.15	.00	231.15
100-52100-720-000	55.00	.00	55.00
100-52200-222-000	362.62	.00	362.62
100-52200-224-000	105.17	.00	105.17
100-52200-226-000	145.50	.00	145.50
100-52200-340-000	3,378.81	.00	3,378.81
100-52200-400-000	2,487.12	.00	2,487.12
100-52200-500-000	48.32	.00	48.32
100-52300-210-000	8,101.91	.00	8,101.91
100-52300-222-000	532.45	.00	532.45
100-52300-224-000	349.27	.00	349.27
100-52300-226-000	113.07	.00	113.07
100-52300-310-000	78.74	.00	78.74
100-52300-325-130	400.04	.00	400.04
100-52300-345-000	1,468.77	.00	1,468.77
100-52300-400-000	7,781.10	.00	7,781.10
100-52300-500-000	4,365.03	.00	4,365.03
100-52300-700-000	28.49	.00	28.49
100-52300-720-000	571.01	.00	571.01
100-52400-224-000	45.98	.00	45.98
100-53100-300-000	45.98	.00	45.98
100-53230-390-000	586.57	10.99-	575.58
100-53240-390-000	3,330.65	10.47-	3,320.18
100-53415-390-000	222.34	.00	222.34
100-53420-390-000	4,553.05	.00	4,553.05
100-53421-390-000	743.15	.00	743.15
100-53440-390-000	2,067.64	.00	2,067.64
100-53630-210-000	100.00	.00	100.00
100-54910-222-000	100.47	.00	100.47
100-54910-224-000	64.99	.00	64.99
100-54910-226-000	101.53	.00	101.53
100-54910-340-000	478.16	.00	478.16
100-55200-222-000	1,147.36	.00	1,147.36
100-55200-224-000	69.99	.00	69.99
100-55200-226-000	830.99	.00	830.99
100-55200-400-000	2,032.34	.00	2,032.34
100-55200-600-000	1,777.84	199.99-	1,577.85
100-55200-615-000	940.67	.00	940.67

GL Account	Debit	Credit	Proof	
100-55300-190-000	3,470.00	125.00-	3,345.00	
100-55300-300-000	16.60	.00	16.60	
100-55300-600-000	570.00	.00	570.00	
100-55300-730-000	10.50	.00	10.50	
100-55310-000-000	109.84	.00	109.84	
100-55420-300-000	15.00	.00	15.00	
100-55420-310-000	1,736.10	.00	1,736.10	
100-55420-320-000	680.22	.00	680.22	
100-55420-600-000	456.33	.00	456.33	
140-21000-000-000	.00	27,564.00-	27,564.00-	
140-58100-000-000	26,589.96	.00	26,589.96	
140-58200-000-000	974.04	.00	974.04	
150-21000-000-000	400.00	4,190.83-	3,790.83-	
150-55115-000-000	32.09	.00	32.09	
150-55115-221-000	427.43	.00	427.43	
150-55115-222-000	84.46	.00	84.46	
150-55115-223-000	69.94	.00	69.94	
150-55115-224-000	243.85	.00	243.85	
150-55115-321-000	298.12	.00	298.12	
150-55115-323-000	200.97	.00	200.97	
150-55115-328-000	1,886.10	.00	1,886.10	
150-55115-371-000	750.00	400.00-	350.00	
150-55115-391-000	105.44	.00	105.44	
150-55115-394-000	92.43	.00	92.43	
160-21000-000-000	.00	113,377.80-	113,377.80-	
160-57140-000-000	48,753.86	.00	48,753.86	
160-57210-000-000	164.99	.00	164.99	
160-57230-240-000	26,915.00	.00	26,915.00	
160-57330-000-000	32,821.25	.00	32,821.25	
160-57610-000-000	263.95	.00	263.95	
160-57640-000-000	1,612.90	.00	1,612.90	
160-58100-000-000	2,845.85	.00	2,845.85	
200-18116-000-397	530.86	.00	530.86	
200-21000-000-000	.00	28,451.20-	28,451.20-	
200-53700-000-408	1,762.47	.00	1,762.47	
200-53700-000-427	18,425.42	.00	18,425.42	
200-53700-000-903	9.00	.00	9.00	
200-53700-622-000	4,069.19	.00	4,069.19	
200-53700-623-000	386.17	.00	386.17	
200-53700-632-000	146.72	.00	146.72	
200-53700-641-000	40.35	.00	40.35	
200-53700-653-000	252.34	.00	252.34	
200-53700-660-000	1,003.47	.00	1,003.47	
200-53700-680-100	969.75	.00	969.75	
200-53700-681-000	320.46	.00	320.46	
200-53700-682-000	520.00	.00	520.00	
200-53700-689-000	15.00	.00	15.00	
300-18214-000-332	452.52	.00	452.52	
300-21000-000-000	.00	32,069.10-	32,069.10-	
300-53600-000-427	19,673.59	.00	19,673.59	
300-53600-000-821	1,622.92	.00	1,622.92	
300-53600-000-827	8,243.73	.00	8,243.73	
300-53600-000-834	274.90	.00	274.90	
300-53600-000-840	969.75	.00	969.75	
300-53600-000-851	311.69	.00	311.69	
300-53600-000-852	520.00	.00	520.00	
999-10005-000-000	332.76	.00	332.76	

CITY OF DODGEVILLE

Check Register - Summary Check Issue Dates: 9/17/2025 - 10/7/2025

Section II. Item #2.

Oct 06, 2025 11:07AM

Gl	_ Account	Debit	Credit	Proof
	999-21000-000-000	.00	332.76-	332.76-
Grand Tota	ıls:	295,344.58	295,344.58-	.00
Datada				
				-
Ony Ocamon				-
				-
				-
				_
				-
City Recorder:				
Report Criteria: Report type:	Summary			
	= {<>} "Adjustment"			

CITY OF DODGEVILLE

Payment Approval Report - Fund Totals Report dates: 9/17/2025-10/7/2025

Section II. Item #2.

Oct 06, 2025 11:08AM

Report Criteria:

Invoices with totals above \$0.00 included.

Only paid invoices included.

Vendor	Vendor Name	Invoice Number	Description	Invoice Date	Net Invoice Amount	Amount Paid	Date Paid	Voided
GENERAL FU								
Total GE	ENERAL FUND:				88,257.77	88,257.77		
DEBT SERVIC	CE .							
Total DE	EBT SERVICE:				27,564.00	27,564.00		
SPECIAL PUR	RPOSE LIBRARY FUND							
Total SF	PECIAL PURPOSE LIBRAF	RY FUND:			3,790.83	3,790.83		
CAPITAL PRO	OJECT FUND							
Total CA	APITAL PROJECT FUND:				113,377.80	113,377.80		
WATER								
Total W	ATER:				28,451.20	28,451.20		
SEWER								
Total SE	EWER:				32,069.10	32,069.10		
Total :					332.76	332.76		
Grand T	otals:				293,843.46	293,843.46		
Dated: ₋								
City Council:								
Clerk/Treasure	er:							

Oct 06, 2025 12:38PM

CITY OF DODGEVILLE Payroll Register - Detail - by Name
Check Issue Dates: 09/19/2025 - 09/19/2025

GL Account	Debit	Credit	GL Account	Debit	Credit
200-53700-630-000	1,025.13	.00	200-53700-640-000	3,463.21	.00
200-53700-651-000	244.04	.00	200-53700-652-000	66.50	.00
200-53700-654-000	66.50	.00	200-53700-680-000	950.38	.00
200-53700-680-100	1,101.61	.00	200-53700-686-000	565.25	.00
300-53600-000-831	1,159.88	.00	300-53600-000-832	158.76	.00
300-53600-000-834	3,256.57	.00	300-53600-000-840	2,051.99	.00
300-53600-000-854	520.56	.00	999-10001-000-000	.00	70,576.28-
			Totals:	105,887.41	105,887.41-

09/14/2025 Fund Summary

Fund	Debit	Credit	Fund	Debit	Credit	Fund	Debit	Credit
100	81,587.00	35,311.13-	150	9,670.03	.00	200	7,482.62	.00
300	7,147.76	.00	999	.00	70,576.28-			
						Totals:	105,887.41	105,887.41-

ı #9.

Form **AB-200**

Alcohol Beverage License Application

	Section V. Item
For Municip	oa
Municipality D	dairle
License Period	6

License(s) Requested: (up to two boxes may be checked)			Fees			
☑ Class "A" Beer \$ <u>150</u> □				License Fe	ees	\$ 392'M
☑ "Class A" Liquor \$ Solution "Class B" Liquor \$			— [Backgrour	d Check Fee	5 14.W_
☐ "Class A" Liquor (cider only) \$ ☐	Reserve "Class B" L	iquor \$	[Publication	ı Fee	\$13.00
Class C" Liquor (wine only) \$			[Total Fees	5	\$325°M
Part A: Premises/Business Information						
Legal Business Name (individual name if sole proprie	etorship)					
Laxami Narayan Fuel Inc	•					
2. Business Trade Name or DBA						
Dodgeville Market Place						
3. FEIN		4. Wisconsin S	Seller's Per	rmit Number		
39-3990853		456-10	321649	37-04		
5. Entity Type (check one)						
	Limited Liability	Company	√ Co	rporation	☐ Nonpro	ofit Organization
	7. Date of Organization				n DFI Registrati	
WI	07/15/2025					
9. Premises Address						
420 N Iowa St						
10. City				11, State	12. Zip Code	
Dodgeville				WI	53533	
	4. Governing Municipa	ality: 🔽 City	Town	☐ Village	15. Alderman	ic District
Iowa	of: Dodgevil					
	7. Premises Email			18. We	bsite	
(731) 307-7216	jk patel4@yal	noo.com				
Premises Description - Describe the building or buare kept. Describe all rooms within the building, income only on the premises described in this application. Alcolh will be kept at retained in the same of the content of the	cluding living quarters. Attach a map or diagr ail area on	Authorized al am and additi shelve	cohol beve onal sheets s, fl	erage activitions if necessar	es and storage of y.	of records may occur
20. Mailing Address (if different from premises address	s)					
8817 Wynnfield DR						
21. City				22. State	23. Zip Code	
Evansville				IN	47725	
Part B: Questions						
Has the business (sole proprietorship, partner violating federal or state laws or local ordinance)	ces? Exclude traffic	offenses un	or corpora less relate	ition) been ed to alcoh	convicted of ol beverages.	☐ Yes 🔽 No
If yes, list the details of violation below. Attach		necessary.				
Law/Ordinance Violated	Location				rial Date	
Penalty Imposed Was sentence completed? Yes					Yes No	
Law/Ordinance Violated	Location			Т	rial Date	
Penalty Imposed				ntence com	pleted?	Yes No

Section V. Item #9.

Are charges for any offenses per beverages.	nding against the I	ousiness	? Exclude traffic	offenses	sunles	ss related to alco	ohol 🗌 Ye	s 🗸 No
	tatus of pending c	us of pending charges using the space below. Attach additional sheets as needed.						
, y = 1, = 1 = 1 = 1 = 1 = 1 = 1 = 1 = 1 =	and or portaining o	nargos e	ong the space b	CIOW. 7111	tucii u	aditional sneets	as needed.	
Is the applicant business or any individuals or entities a restricter of the restricter of the restricter.	d investor with an	y interes	st in an alcohol b	everage	produ	acer or distribut	related or? Ye	s 🗸 No
yes, provide the harne of the f	estricted investor	and des	scribe the nature	or the in	iterest			
4. Is the applicant business owned If yes, provide the name(s) and F	by another busine EIN(s) of the bus	ess entity iness en	/? tity owners belov	 v. Attach	additi	onal sheets as i	needed.	s 📝 No
4a. Name of Business Entity			4b. Busines	s Entity F	EIN			
5. Have the partners, agent, or sole this license period? Submit proof	e proprietor satisfied of completion	ed the re	sponsible bevera	ige serve	er trair	ning requiremen	it for 	s No
6. Is the applicant business indebte								
7. Does the applicant business owe					_			
Part C: Individual Information					-		1000	
List the name, title, and phone number f	or each person or e	ntity holdi	ing the following po	sitions in	the ap	plicant business o	or businesses lis	ted in Part B.
Question 4: sole proprietor, all officers, of managers, and agent of a limited liability	directors, and agent	of a corpo	oration or nonprofit	organizat	tion, all	partners of a par	tnership, and al	members,
Include Form AB-100 for each person lis		tions and	LLCs must appoin	t an agen	nt by inc	cluding Form AB-	101.	
Last Name	First Name			Title			Phone	
Joshi	Rohitkı	ımar		Agent	t		(502) 33	88-6573
Patel	Jasmink	umar		Presid	lent		73130772	16
Part D: Attestation								
One of the following must sign and								
	general partner of			е согрога			member of a	
READ CAREFULLY BEFORE SIGNING I am acting solely on behalf of the appli	G: Under penalty of	law, I hav	ve answered each	of the abo	ove qu	estions complete	ly and truthfully	I agree that
rights and responsibilities conferred by	the license(s), if gra	inted, will	not be assigned to	another	individ	dual or entity. Lac	ree to operate	his husiness
according to the law, including but not l to any portion of a licensed premises du	uring inspection will	be deem	ed a refusal to allo	w inspect	tion. Su	uch refusal is a m	isdemeanor an	d arounds for
revocation of this license. I understand understand that I may be prosecuted for	that any license iss	sued cont	rary to Wis. Stat. (Chapter 1	25 sha	all be void under i	penalty of state	law. I further
ingly provides materially false information	on on this application	n may be	e required to forfeit	nnection not more	with the than \$	iis application, an \$1,000 if convicte	व tnat any perso d.	n who know-
Last Name			First Name				V	1.1.
Patel			Jasminkuma	ır				R
Title		Email					Phone	
President		jk_pa	atel4@yahoo	-			(731) 30	7-7216
Signature				Date	9	00/1	0 / 2 5	
Part E: For Clerk Use Only				_		09/1	8/25	
Date Application Was Filed With Clerk	License Number			Dat	te l ice	nse Granted	Date License	Issued
Signature of Clerk/Deputy Clerk						Date Provisional L	icense Issued (f applicable)

AB-200 (R. 1-25)

Form AB-100

Alcohol Beverage Individual Questionnaire

Date	
54.5	

All individuals involved in the alcohol beverage business must complete this form, including:

· sole proprietor

- all officers, directors, and agent of a corporation or nonprofit organization
- · all partners of a partnership

Part A: Business Information

1. Legal Business Name (individual name if sole proprietor)

· members and agent of a limited liability company

Your alcohol beverage application or renewal is not complete until all required Individual Questionnaires are submitted.

Laxa	ami Narayan	Fuel Inc							
2. Busine	ss Trade Name or I	DBA							
Dodg	geville Mar	ketPlace							
3. Entity	Type (check one)								
☐ So	le Proprietor	Partnership	Limited l	_iabilit	ty Compar	ıy 🗸	Corporation	Nonprofit	Organization
Part B:	Individual Inf	ormation							
1. Last N	ame			2. Fi	rst Name				3. M.l.
Pate	el			J	asmink	umar			R
4. Relation	nship to Business (Title)	5. Email					6. Phone	
Pres	sident		jk_pat	el4	@yahoo.	.com		(731)	307-7216
7. Home	Address								
8817	7 Wynnfield	Dr							
8. City					9. State	10. Zip C	ode	11. Date of	
Evar	nsville				IN	477		05/0	
12. Drive	rs License/State ID	Number				1	ers License/State ID St	ate of Issuand	e
7720	0-32-8689					`			
Part C:	Address Hist	orv							
						- 96 - 101 MENTAGO	Called Newly Welsit Malace	100000 N 1040	Yes ✓ No
									MM/YYYY)
If yes	, provide the mor	ith and year wher	n you permanently	move	ed to Wisc	onsin			
2. List ir	n chronological or	der all of your add	dresses within the	last 5	years. At	tach additio	onal sheets if neces	sary	
	Address 1			City			State	- T	е
8817	Wynnfield	DR		Ev	asnvil	le	I	ь 4772	25
	Address 2			City			State	e Zip Coo	е
				'					
Previous	Address 3			City			State	e Zip Cod	е
Previous	Address 4			City			State	e Zip Co	de
Previous	Address 5			City			State	e Zip Co	de
3 lieta	Il etates and cour	nties vou have live	ed in as an adult.	Attach	additiona	I sheets if	necessary.		
					State	County	State	e County	
State	County	State	County		Otate	Journey	Otali	County	
State	County	State	County		State	County	State	e County	

Continued →

Part D: Criminal History			
Have you ever been convicted of any offenses (exclude for violation of any federal, Wisconsin, or another state)	ding traffic offenses unle e's laws or of any coun	ess related to alcohol bev	verages) s?va ☐ Yes ✔ No
If yes to question 1, please list details of each convicti	on below. Attach addition	onal sheets as needed.	
Law/Ordinance Violated	Location		Conviction Date
Penalty Imposed		Was sentence complete	ed? Yes No
Law/Ordinance Violated	Location		Conviction Date
Penalty Imposed		Was sentence complete	ed? Yes No
Law/Ordinance Violated	Location		Conviction Date
Penalty Imposed		Was sentence complete	ed? Yes No
ordinances? If yes to question 2, describe nature and status of pe sheets as needed.			Yes ✓ No
Part E: Attestation			
READ CAREFULLY BEFORE SIGNING: Under pena truthfully. I certify that I am not prohibited from participal beverage industry as a restricted investor. I understand under penalty of state law. I further understand that I may with this application, and that any person who knowing to forfeit not more than \$1,000 if convicted.	ating in this business of that any license issured the prosecuted for sul-	ue to any involvement in ed contrary to Wis. State mitting false statements	n another tier of the alcohol Chapter 125 shall be void and affidavits in connection
Signature	_	Date	09/18/2025

Form

AB-100

Alcohol Beverage Individual Questionnaire

	Section	v. item i
Date		

All individuals involved in the alcohol beverage business must complete this form, including

* sole proprietor

- all officers, directors, and agent of a corporation or nonprofit organization
 members and agent of a limited liability company
- all partners of a partnership

Your alcohol beverage application or renewal is not complete until all required Individual Questionnaires are submitted.

Part A: Business Information					
1. Legal Business Name (individual riame if sole p	roper (or)				
Laxami Narayan Fuel Inc					
Business Trade Name of DBA					
Dodgeville MarketPlace					
3 Entity Typr (check one)					51 O
Sole Proprietor Partnership	Limited L	lability Compan	y 🔽 Corporati	on UN	onprofit Organization
Part B: Individual Information					12.141
Last Name		2 First Name			3 M I
Joshi		Rohitku	mar		V
4. Relationship to Business (Title)	5 Email		6 Phane		
Agent	rajjos	hi1966@gma	il.com		(502) 338-6573
7. Home Addinss					
N5781 Kinney Rd					
8 City		9 State	10 Zip Code	11	Date of Birth
Portage		WI	53901		09/18/66
12 Drivers License/State ID Number			13 Drivers License	/State ID State (of Issuance
J200-7386-6338-05			WI		
Do you currently live in Wisconsin? If yes, provide the month and year when					Yes No
			consin		(MM/YYYY) 04/2024
			consin		(MM/YYYY) 04/2024 y.
2 List in chronological order all of your add			consin		(MM/YYYY) 04/2024 y. Zip Code
2 List in chronological order all of your add Previous Address 1		e last 5 years A	consin	ets if necessar	(MM/YYYY) 04/2024 y.
2 List in chronological order all of your add Previous Address 1 8224 OH~108		e last 5 years A	consin	ets if necessar	(MM/YYYY) 04/2024 y. Zip Code
2 List in chronological order all of your add Previous Address 1		e last 5 years A City Wauseon	consin	State OH	(MM/YYYY) 04/2024 y. Zip Code 43567 Zip Code
2 List in chronological order all of your add Previous Address 1 8224 OH-108 Prinvious Address 2		e last 5 years A City Wauseon	consin	State OH	(MM/YYYY) 04/2024 y. Zip Code 43567
2 List in chronological order all of your add Previous Address 1 8224 OH~108		e last 5 years A City Wauseon City	consin	State OH State	(MM/YYYY) 04/2024 y. Zip Code 43567 Zip Code
2 List in chronological order all of your add Previous Address 1 8224 OH~108 Previous Address 2 Previous Address 3		City Wauseon City City City	consin	State OH State	(MM/YYYY) 04/2024 y. Zip Code 43567 Zip Code
2 List in chronological order all of your add Previous Address 1 8224 OH~108 Previous Address 2 Previous Address 3		e last 5 years A City Wauseon City	consin	State OH State State	y. Zip Code 43567 Zip Code
2 List in chronological order all of your add Previous Address 1 8224 OH=108 Previous Address 2 Previous Address 3 Previous Address 4		City Wauseon City City City	consin	State OH State State	y. Zip Code 43567 Zip Code
2 List in chronological order all of your add Previous Address 1 8224 OH~108 Previous Address 2 Previous Address 3		City Wauseon City City City	consin	State OH State State State State	y. Zip Code 43567 Zip Code Zip Code Zip Code
2 List in chronological order all of your add Previous Address 1 8224 OH-108 Previous Address 2 Previous Address 3 Previous Address 4 Previous Address 5	lresses within the	City Wauseon City City Oity	consin ttach additional shee	State OH State State State State State	y. Zip Code 43567 Zip Code Zip Code Zip Code
2 List in chronological order all of your add Previous Address 1 8224 OH=108 Pri vious Address 2 Previous Address 3 Pruvious Address 4	lresses within the	City Wauseon City City City Attach addition	ttach additional shee	State OH State State State State	y. Zip Code 43567 Zip Code Zip Code Zip Code
2 List in chronological order all of your add Previous Address 1 8224 OH=108 Previous Address 2 Previous Address 3 Previous Address 4 Previous Address 5 3 List all states and counties you have live state County State	lresses within the	City Wauseon City City Oity	consin ttach additional shee	State OH State State State State State	y. Zip Code 43567 Zip Code Zip Code Zip Code
2 List in chronological order all of your add Previous Address 1 8224 OH~108 Previous Address 2 Previous Address 3 Previous Address 4 Previous Address 5 3 List all states and counties you have live	ed in as an adult.	City Wauseon City City City Sidy Attach addition State	at sheets if necessa	State OH State State State State State State State State State	y. Zip Code 43567 Zip Code Zip Code Zip Code Zip Code County
2 List in chronological order all of your add Previous Address 1 8224 OH~108 Previous Address 2 Previous Address 3 Previous Address 4 Previous Address 5 3 List all states and counties you have live state. County State	lresses within the	City Wauseon City City City Attach addition	ttach additional shee	State OH State State State State	y. Zip Code 43567 Zip Code Zip Code Zip Code

Continued →

Part D: Criminal History			
Have you ever been convicted of any for violation of any federal. Wisconsin	offenses (excluding traffic offense or another state's laws or of any	es unless related to alcohol beverages county or municipal ordinances?) Yes 🗸 No
If yes to question 1, please list details	of each conviction below. Attach	additional sheets as needed	
Law Ordinance Violated	LO. Han		Conviction Date
^D enally Imposed		Was sentence completed?	Yes No
aw/Ordinance Violated	Location		Conviction Date
Prinally Imposed		Was sentence completed?	Yes No
Law Ordinance Violated	Location		Conviction Date
Penalty imposed		Was sentence completed?	Yes No
Part E: Attestation			
READ CAREFULLY BEFORE SIGNIF truthfully. I certify that I am not prohibit boverage industry as a restricted inversion under penalty of state law. I further under with this application, and that any persito forfeit not more than \$1,000 if convictions.	ted from participating in this busing stor. I understand that any licens erstand that I may be prosecuted on who knowingly provides mater	ness due to any involvement in anoth e issued contrary to Wis. Stat. Chap for submitting faise statements and af	ner tier of the alcohol ter 125 shall be void fidavits in connection
Signature (Post)		Date 09/3	18/2025

	-	200	666	~	
1/3/60	-	a	w	ю	
	œ	ж.	-	man.	

Section V. Item #9.

Form AB-101

Alcohol Beverage Appointment of Agent

Date		

Agent Type (check one						
		ininal liana	and and w			
Original (no fee)	Successor (\$10 fee for r	nunicipal licen	sees only)			
Part A: Business Info	ormation					
Legal Business Name (inc	lividual name if sole proprietor)					
Laxami Narayan	Fuel Inc					
Business Trade Name or I						
Dodgeville Mar	ketPlace					
Entity Type (check one)	Limited Liability Compar	ny 💌	Corporation	Nor	nprofit Organi	zation
Alcohol Beverage Busines Municipal Retail	s Authorization <i>(check one)</i> License State Permit	5 If successo	agent, provide Stat	te Permit or Mi	unicipal Retail I	icense Number
Describe the reason for ap	ppointing a successor agent, if success	or is checked ab	ove			
Part B: Agent Informa	ation	2 First Name				3. M.I.
Last Name	ation	2 First Name Rohitki	ımar			3. M.I
Last Name Joshi Email		2 First Name Rohitku	ımar		5 Phone	V
Last Name Joshi			umar			
Last Name Joshi Email	mail.com		umar			V
Last Name Joshi Email Rajjoshi1966@g Home Address N5781 Kinnley City	mail.com	Rohitku 8 State	9 Zip Code		(502)	V 338-6573
Last Name Joshi Email Rajjoshi1966@g Home Address N5781 Kinnley City Portage	mail.com Rd	Rohitku	9 Zip Code 53901	ance/State ID 9	(502) 10 Date of B 09/18	V 338-6573
Last Name Joshi Email Rajjoshi1966@g Home Address N5781 Kinnley City	mail.com Rd Number	Rohitku 8 State	9 Zip Code	ense/State ID S	(502) 10 Date of B 09/18	V 338-6573
Last Name Joshi Email Rajjoshi1966@g Home Address N5781 Kinnley City Portage	mail.com Rd Number	Rohitku 8 State	9 Zip Code 53901 12. Drivers Lice	ense/State ID S	(502) 10 Date of B 09/18	V 338-6573 inth /1966
Last Name Joshi Email Rajjoshi1966@g Home Address N5781 Kinnley City Portage Drivers License/State ID J200-7386-6338	mail.com Rd Number -05	Rohitku 8 State	9 Zip Code 53901 12. Drivers Lice	ense/State ID S	(502) 10 Date of B 09/18	V 338-6573 inth /1966
Last Name Joshi Email Rajjoshi1966@g Home Address N5781 Kinnley City Portage 1 Drivers License/State ID J200-7386-6338	mail.com Rd Number -05 ons responsible beverage server train	Rohitku 8 State WI	9 Zip Code 53901 12. Drivers Lice WI	ense/State ID S	(502) 10 Date of Bi 09/18 State of Issuand	V 338-6573 wirth /1966
Last Name Joshi Email Rajjoshi1966@g Home Address N5781 Kinnley City Portage Drivers License/State ID J200-7386-6338 Part C: Agent Question Have you satisfied the Submit proof of completed F	mail.com Rd Number -05 ons responsible beverage server train	Rohitku 8 State WI ing requireme	9 Zip Code 53901 12. Drivers Lice WI nt?	2 F 0 ±	(502) 10 Date of B 09/18 State of Issuand	V 338-6573 inth /1966 ce

Part D: Business Attestation

READ CAREFULLY BEFORE SIGNING: I, the **Undersigned** authorize the above-named individual to act for the above-named corporation, nonprofit organization, or limited hability company with full authority and control of the premises and of all alcohol beverage activities on such premises. I certify that I am authorized by the above-named entity to authorize this individual to act on behalf of the entity. If I am appointing a successor agent, I rescind all previous agent appointments for this premises. Further, I understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Patel	First Name Jasminkumar	M I.	R
Title President	Email jk_patel4@yahoo.com	Phone (731) 307-7	 7216
Signature		09/18/25	

Part E: Agent Attestation

READ CAREFULLY BEFORE SIGNING: I, the **Agent**, hereby accept this appointment as agent for the above-named corporation, nonprofit organization or limited liability company and assume full responsibility for the conduct of all alcohol beverage activities on the premises for the above-named business. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted

Last Name	First Name	: M L
Joshi	Rohitkumar	V
Signature) D	ate
(C FO		09/18/25



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

Contact Information:

Section V. Item #9.

2135 RIMROCK RD PO BOX 8902 MADISON, WI 53708-8902 ph: 608-266-2776 fax: 608-327-0235 email: DORBusinessTax@wisconsin.gov

website: revenue.wi.gov

Letter ID L0533755568



000328

LAXAMI NARAYAN FUEL INC 8817 WYNNFIELD DR EVANSVILLE IN 47725-7705

Wisconsin Business Tax Registration Certificate

Expiration date:

September 30, 2027

Legal/real name:

LAXAMI NARAYAN FUEL INC

- This certificate confirms that you are registered with the Wisconsin Department of Revenue for the tax types shown below.
- This registration certificate is not a seller's permit, and should not be used as proof that you hold a seller's permit.
- You may not transfer this certificate to any other individual or business.

Тах Туре	Account Type	Number		
Sales & Use Tax	Sales & Use Tax	456-1032164937-04		
Withholding Tax	Withholding Tax	036-1032164937-02		

Letter

Section V. Item #9.

The following is a list of the business locations that you have registered with the Department of Revenue.

456-1032164937-04 LAXAMI NARAYAN FUEL INC DODGEVILLE MARKET PLACE 420 N IOWA ST DODGEVILLE WI 53533-1325 Form CTV-100

Cigarette, Tobacco, and Electronic Vaping Device Retail License Application

Г	
FOR CLE	Section V. Item #10.
Municipality DO	louille
License Period	26

Part A: Premises/Busines	s Informati	on						
Legal Business Name (individual	name if sole p	roprietor)						
Laxami Narayan Fuel	Inc							
2. Business Trade Name or DBA								
Dodgeville MarketPla	ce							
3, FEIN 4. Wisconsin Seller's Permit Number								
39-3990853								
5. Entity Type (check one)								
☐ Sole Proprietor	☐ Pa	artnership	Li	mited Liability		✓ Corporation		
6. State of Organization		7. Date of Organiza	ation		8, Wisconsin DFI f	Registration Number		
WI		07/15/2025						
9. Premises Address (do not use P	O Box)							
420 N IOWA ST								
10. City				11, State	12. Zip Code			
DODGEVILLE				WI	53533			
13. County	14. Governing	Municipality: 🕢 Cit	ty 🗌 Town	☐ Village	15. Aldermanic Dis	strict		
IOWA	of: Dodg	eville						
16. Mailing Address (if different from	n premises add	dress)						
8817 Wynnfield Dr								
17. City				18. State	19. Zip Code			
Evansville				IN	47725			
20. Premises Phone		21, Premises Ema	il	*	22. Website			
(731) 307-7216		jk_patel4@y	ahoo.com					
23. Premises Description - Describ Describe all rooms including liv records. Cigarettes, tobacco pr Attach a floor plan if possible. Will be kept behin	ring quarters, if roducts, and el	used, for the sales a ectronic vaping devi	and/or storage of ices may be sol	of cigarettes, to d and stored C	bacco products, and	d electronic vaping devices and		
Bort B. Questions								
Part B: Questions		1 1 2 1 1	11.11					
What products will be sold a Cigarettes	t this busines	s location? (check)	☑ Elec	tronic Vaping Devices		
How will cigarettes, tobacco, Over the counter	and/or electr	ronic vaping devic		heck all that	apply)			
3. Is the applicant business ow If yes, provide the name(s) a								
3a. Name of Business Entity	:							
3b. FEIN of Business Entity:								

Part C: Individual Information

List the name, title, and phone number for each person or entity holding the following titles or positions in the applicant business and any businesses listed in Part B, Question 3: sole proprietor: all officers, directors, and agents of a corporation: all partners of a partnership: and all members and agents of a limited liability company. Attach additional sheets if necessary.

Include Form CTV-101, Individual Questionnaire, for each person listed below.

Last Name	First Name	Title	Phone
Joshi	Rohitkumar	Agent	(502) 338-6573
Patel	Jasminkumar	President	(731) 307-7216

Part D: At	testation
------------	-----------

One of the following must sign and attest to this application:

sole proprietor
 one general partner of a partnership

- one corporate officer
- one managing member of an LLC

READ CAREFULLY BEFORE SIGNING:

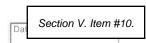
I understand and agree to the following:

- I will only purchase cigarettes, tobacco, and vapor products from distributors, jobbers, or subjobbers permitted by the Wisconsin Department of Revenue, unless I also hold the proper distributor's permit and pay all applicable excise taxes.
- I will not purchase or exchange products from another retailer, including transferring existing stock to a new owner.
- I will provide tobacco sales training that has been approved by the Wisconsin Department of Health Services to my employees. (https://witobaccocheck.org).
- I will not sell single cigarettes.
- I will not sell, give, or otherwise provide cigarettes, tobacco, or any nicotine products to minors.
- I will keep product invoices on the licensed premises for two years and ensure the records are available for inspection by law enforcement. Failure to comply with this will result in criminal penalties, including loss of inventory.
- I will not sell cigarettes or roll-your-own (RYO) tobacco products unless listed on the Wisconsin Department of Justice's directory
 of certified tobacco manufacturers and brands.

Further, under penalty provided by law, I state that this application has been truthfully answered to the best of my knowledge, I agree to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, cannot be assigned to another. Any lack of access to any portion of a licensed premises during inspection will be deemed a refusal to allow inspection. Such refusal is a misdemeanor and grounds for revocation of this license. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Signature	Date	
	09/18/2025	
Name (Last, First, M.I.)		
Patel, Jasminkumar R		
Title	Email	Phone
President	jk_patel4@yahoo.com	(731) 307-7216

Part E: For Clerk Use Only			
Date application was filed with clerk	Date license issued	Date license expires	License number
License fees	Signature of Clerk/Deputy Clerk		



CTV-101

Cigarette, Tobacco, and Electronic Vaping Device - Individual Questionnaire

Part A: Business Information	l						
1 Legal Business Name (individual nar	ne if sole proprietor)						
Laxami Warayan Fuel	Inc						
2. Business Trade Name or DBA							
Dosgeville Market Pl	ace						
3 Entity Tyne (check one)							
Sole Proprietor Partnership Limited Liability Company Corporation							
Part B: Individual Information	n						
1 Name (Last)			ne (First)			3. Name (M.I.)	
Joshi -		Roh	itkuma	r		V	
4. Relationship to Business (Title)		5 Em	ail		6. Phone		
Agent		raj	joshi1	966@gmail.com	(502)	338-6573	
7. Home Address							
N5/81 Kinney Rd							
8_ City			9. State	e 10 Zip Code 11. Date of Birth			
Portage Wi				53901 09/18/66			
12. Drivers License State ID Number				13. Drivers License/State ID State of Issuance			
J200-7386-6358-05 WI							

Part C	: Individual's Add	ress Histo	ry					
List in c	chronological order all	of your addi	resses within th	ne last 5 ye	ars. Atta	ch additional shee	ts if necessary.	
	Address 1 OII - 108			City Wat	seon		State OH	Zip Code 43567
⊃revious	s Address 2			City			State	Zip Code
Previous Address 3			C _I ty	Cty			Zip Code	
Previous Address 4			City	City			Zip Code	
Previous Address 5			City	City			Zip Code	
Previous Acdress 6			City	City			Zip Code	
If applic	cable, list all states an	d counties y	ou have lived in	n as an adı	ult. Attacl	h additional sheets	if necessary.	
State	County Juffers 11	State	County	ounty		County	State	County
State	County	State	County		State	County	State	County

 $Continued \rightarrow$

Part D: Individual's Criminal His	story						
1 Have you ever been convicted of a Wisconsin, or another state's laws	iny offenses (other than traffic o , or of any county or municipal o	ffenses) for violation of a	any federal, Yes ☑ No				
If yes to question 1, please list deta	ils of each conviction below						
Law Ordinance Violated	Location	VIII	Trial Date				
Penalty Imposed		Was sentence	e completed? Yes No				
Law Ordinance Violated	Location		Trial Date				
Penalty Imposed		Was sentence	e completed? Yes No				
Law Ordinance Violated	: ocation		Trial Date				
Penalty Imposed		Was sentence	e completed? Yes No				
Are charges for any offenses currer federal. Wisconsin, or another state	ntly pending against you (other the slaws or any county or municip	nan traffic offenses) for v al ordinances?	iolation of any				
Part E: Attestation by Individua							
READ CAREFULLY BEFORE SIGN connection with this application, and I rette, electronic vaping devices, and	ING: I understand that I may be hat any person who knowingly p topacco products retail license hat I have examined this information.	rovides materially false may be required to forfe	ting false statements and affidavits in information on an application for ciga- eit not more than \$1,000 if convicted, my knowledge, it is true, correct, and				
Signature (iv A	2	C	C9/18/2025				
Part F: Licensing Authority App	roval						
I hereby certify that I have checked muthis individual does not have a criminal electronic vaping device retailer licens	al record that would disqualify th	em from having an inter	wledge, with the available information. est in a cigarette, tobacco product, or				
Name of Local Official		Title					
Signature of Local Official			Pale				

Date	Section V. Item #10.	
		Ξ

Form CTV-101

Cigarette, Tobacco, and Electronic Vaping Device - Individual Questionnaire

Part A: Business Informatio	n						
1, Legal Business Name (individual na	ime if sole proprietor)						
Laxami Narayan Fuel	InC						
2. Business Trade Name or DBA							
Dodgeville Market p	lace						
3. Entity Type (check one)							
☐ Sole Proprietor	Partnership		☐ Lim	ited Liability Company		✓ (Corporation
Part B: Individual Information	on						
1. Name (Last)			ne (First)				3. Name (M.I.)
Patel		Jasminkumar				-	R
4. Relationship to Business (Title)		5. Ema	ail			6. Phone	
President		jk_	patel4	@yahoo.com		(731)	307-7216
7. Home Address							
8817 Wynnfiel Dr							
8. City			9. State	10. Zip Code		11. Date of	
Evansville			IN	47725		05/09	77
12. Drivers License/State ID Number				13. Drivers License/State	e ID Stat	te of Issuanc	е
7720-32-8689				IN			
				•			
Part C: Individual's Address	s History						
List in chronological order all of yo	our addresses within the la	st 5 yea	rs. Attach	additional sheets if neo	cessary		
Previous Address 1		City			State	Zip Cod	е
8817 Wynnfield Dr		Evansville IN 477			4772	5	
Previous Address 2		City			State	Zip Cod	е

List in c	chronological order all of	your addre	esses within the las	st 5 ye	ars. Attacl	n additional shee	ets if necessary.	
Previous Address 1			City	City			Zip Code	
8817 Wynnfield Dr			Eva	Evansville			47725	
Previous Address 2			City			State	Zip Code	
Previous Address 3			City		State	Zip Code		
Previous Address 4			City		State	Zip Code		
Previous Address 5			City		State	Zip Code		
Previous Address 6			City		State	Zip Code		
If applic	cable, list all states and c	ounties yo	u have lived in as	an adı	ılt. Attach	additional sheet	ts if necessary.	
State	County	State	County		State	County	State	County
KY	Bourbon	TN	Henderson		TN			
State	County	State	County		State	County	State	County

 $Continued \rightarrow$

Part D: Individual's Criminal His	story				
Have you ever been convicted of a Wisconsin, or another state's laws,	ny offenses (other than traffic of or of any county or municipal of	offenses) for violation ordinances?	of any federal, Yes V No		
If yes to question 1, please list detai					
Law/Ordinance Violated	Location		Trial Date		
Penalty Imposed		Was sentence completed? Yes No			
Law/Ordinance Violated	Location		Trial Date		
Penalty Imposed		Was sente	ence completed? Yes No		
Law/Ordinance Violated	Location		Trial Date		
Penalty Imposed	2	Was sente	ence completed?		
Are charges for any offenses curren federal, Wisconsin, or another state	tly pending against you (other t 's laws or any county or municip	than traffic offenses) for pal ordinances?	or violation of any		
If yes to question 2, describe nature	e and status of pending charge	s using the space bel	low. Attach additional sheets as needed.		
			→ □		
Part E: Attestation by Individual					
rette, electronic vaping devices, and	hat any person who knowingly p tobacco products retail license nat I have examined this inform	provides materially fall may be required to f	mitting false statements and affidavits in lse information on an application for ciga- forfeit not more than \$1,000 if convicted. t of my knowledge, it is true, correct, and		
Signature			Date Date		
8			09/18/2025		
Part F: Licensing Authority Appr	oval				
I hereby certify that I have checked mu	inicipal and state criminal record	hem from having an ir	knowledge, with the available information, nterest in a cigarette, tobacco product, or		
Name of Local Official		Title			
Signature of Local Official			Date		

Section	1/	Ham	#10	ì
Section	V.	пem	#10).

Form CTV-102

Cigarette, Tobacco, and Electronic Vaping Device Appointment of Agent

Date		
2010		

Part A: Agent Infor	mation	2 First Name		3 M I		
Last Name				V		
Joshi		Rohitkumar	E Dhana	, v		
l Email			5 Phone			
Rajjoshil9660gm	ail com					
Home Address						
NS781 Kinney RD				10.7:00da		
City			8 State WI	9. Zip Code		
Portage				53901		
0 Date of Birth	And the state of t			se/State ID State of Issuance		
09/18/1966	/18/1966 J200-7386-6338-05			WI		
art B: Questions	l Form CTV-101. Cigarette. Tobacco, a					
Original agent	fagent, please describe the reason for					
Part C: Business Ir Legal Business Name (Laxami Narayan	individual name if sole proprietor)					
Daxami Narayan						
Business Trade Name						
2 Business Trade Name	or DSA					
Dodgeville Mark	or DSA etPlace					
Pausiness Trade Name Dodgeville Mark Bantity Type (check one	or DSA etPlace	√ Corpo	ration			
Dodgeville Mark Bentity Type (check one	or DSA etPlace)	✓ Corpo	ration			
Dodgeville Mark Entity Type (check one Premises Address	or DSA etPlace)	✓ Corpo	ration			
Dodgeville Mark Entity Type (check one Premises Address 420 Jowa St	or DSA etPlace)	[√] Corpo	ration 6. State	7 Zip Code		
Dodgeville Mark Entity Type (check one Premises Address 420 Towa St City	or DSA etPlace)	[✓] Corpo		7 Zip Code 53533		
Dodgeville Mark Entity Type (check one Premises Address 420 Towa St City	or DSA etPlace)	☑ Corpo	6. State			
Dodgeville Mark	or D8A et P1ace) Limited Liability Company	[√] Corpo	6. State			
Dodgeville Mark B Entity Type (check one Premises Address 420 Towa St City Dodgeville Part D: Attestation READ CAREFULLY B corporation or limited lid or electronic variety day for submitting false stal	or D8A et P1ace) Limited Liability Company	rmittee: authorize the above of the premises and of all ousing uthorized by the entity to authopointments for this premises his application, and that any	6. State WI p-named individual ness relative to ciga orize this individua	to act for the above-named rettes, tobacco products, and to act on behalf of the entity and that I may be prosecuted.		
Premises Address 420 Towa St City Dodgeville Part D: Attestation READ CAREFULLY B corporation or limited had or electronic vaping day if i am appointing a suc- for submitting false stat information on this appli	s EFORE SIGNING: I the Licensee or Perbilly company with full authority and control or ces conducted therein. I certify that I am at descriptions agent a tements and affidavits in connection with the	rmittee: authorize the above of the premises and of all busin uthorized by the entity to authopointments for this premises his application, and that any han \$1,000 if convicted.	6. State WI p-named individual ness relative to ciga orize this individua	to act for the above-named rettes, tobacco products, and I to act on behalf of the entity and that I may be prosecuted ingly provides materially false		
Premises Address 420 Towa St City Dodgeville Part D: Attestation READ CAREFULLY B corporation of limited lia or electronic vaping day if ham appointing a suc- for submitting false stal information on this appli	EFORE SIGNING: I the Licensee or Perbilly company with full authority and control orces conducted therein. I centry that I am aid described all previous agent a terments and affidavits in connection with the lication may be required to forfeit not more the	rmittee: authorize the above of the premises and of all busin uthorized by the entity to authopointments for this premises his application, and that any han \$1,000 if convicted.	6. State WI e-named individual ness relative to ciga orize this individual . Further, I underst person who knowi Date 09/18/	to act for the above-named rettes, tobacco products, and I to act on behalf of the entity and that I may be prosecuted nigly provides materially false.		
Premises Address 20 Iowa St City Dodgeville Part D: Attestation READ CAREFULLY B corporation or limited ha or electronic vaping day if i am appointing a suc- for submitting false stal information on this appliance of Licenses as	EFORE SIGNING: I the Licensee or Perbilly company with full authority and control onces conducted therein. I centry that I am air dessor agent. I rescind all previous agent a tements and affidavits in connection with the idiation may be required to forfeit not more the permittee (officer member or authorized signals).	rmittee: authorize the above of the premises and of all busin uthorized by the entity to authopointments for this premises his application, and that any han \$1,000 if convicted.	6. State WI e-named individual ness relative to ciga orize this individual Further, I underst person who knowle Date 09/18/ Title	to act for the above-namer rettes, tobacco products, and I to act on behalf of the entity and that I may be prosecuter ngly provides materially false		
Premises Address 20 Towa St City Dodgeville Part D: Attestation READ CAREFULLY B corporation or limited ha or electronic vaping day if ham appointing a suc for submitting false stal information on this appl	EFORE SIGNING: I the Licensee or Perbilly company with full authority and control onces conducted therein. I centry that I am air dessor agent. I rescind all previous agent a lements and affidavits in connection with the idiation may be required to forfeit not more the permittee (officer member or authorized signated).	rmittee: authorize the above of the premises and of all busin uthorized by the entity to authopointments for this premises his application and that any han \$1,000 if convicted.	6. State WI e-named individual ness relative to ciga onze this individua Further, I underst person who knowi Date 09/18/ Title Presid	to act for the above-named rettes, tobacco products, and I to act on behalf of the entity and that I may be prosecuted ingly provides materially false 2025		
Premises Address 420 Towa St City Dodgeville Part D: Attestation READ CAREFULLY B corporation or limited lid or elections gains as of for submitting false state information on this appl large of Licenses 65 large of Person Signing Tasminkumar R P READ CAREFULLY BE company and stage of	EFORE SIGNING: I the Licensee or Perbility company with full authority and control of elements and affidavits in connection with the licetion may be required to forfeit not more the permittee (officer member or authorized signal responsibility for the conduct of all busing premises for the above-named business toon with this grant this premises for the above-named business toon with this form, and that any person who	rmittee. authorize the above of the premises and of all busin uthorized by the entity to authopointments for this premises his application, and that any han \$1,000 if convicted inatory)	6. State WI e-named individual ness relative to ciga orize this individual Further, I underst person who knowi Date 09/18/ Title Presid or the above-named ettes, tobacco products, tobacco products of the prosecuted for	to act for the above-name rettes, tobacco products, and I to act on behalf of the entity and that I may be prosecuteringly provides materially false. 2025 Lent I corporation or limited liability ucts, and/or electronic vapin or submitting false statements.		



at the Fountain St. address.

CITY OF DODGEVILLE SPECIAL EVENT LICENSE

FEE: \$30.00

APPLICANT INFORMATION
ORGANIZATION/ENTITY NAME: Indivisible Southwest
PRIMARY EVENT CONTACT: Bob Breslow PHONE: (608) 206 - 5657
EMAIL: rmbreslow@hotmail.com ALT PHONE: (608) 574 - 3548 (Fr)
ADDRESS: 4560 Goldmine Rd. CITY: Dodgeville STATE: WI ZIP: 53533
EVENT INFORMATION
NAME OF EVENT: No Kings II
START DATE/TIME: 10 / 18 /25 9 : 00 am pm END DATE/TIME: 10 / 18 / 25 1 :00 am pm
(Include set-up and tear-down/clean-up time. A 48-hr notice is required if event time changes or is cancelled. If notice is NOT given, costs may be assessed for loss of City Staff time)
GENERAL EVENT TYPE:
☐ Parade ☐ Block Party ☐ Expo ☑ Other (Describe): Rally and march
EXEPECTED NUMBER OF ATTENDEES:
USE OF STREETS: Are Street Barricades Required? ☐ Yes ✓ No
State or County Approval Required? Yes No (For Events involving or crossing State or County Highways)
DESCRIPTION: Include a detailed description of all event activities such as vending, music, selling of food or alcohol beverages, location and use of tents, stages, sound amplification or other equipment, and attach a detailed plan for clean-up after the event, steps to be taken to prevent vehicular traffic from going through the area (if necessary), and steps that will be done to ensure underage people in are not served alcohol (if applicable). If using public streets, a detailed map MUST be provided with this application. Include additional pages if necessary. No vending, selling of food, or alcohol will be provided. Staging/starting area is the County Courthouse parking lot. A small portable tent and 1 or 2 tables will be used at that location for information and participant sign in. Attendees will march from the courthouse parking
lot to the green space at 105 W. Fountain St. At that address, a small tent will be used along with 1 or 2 tables
to provide information. A larger tent is planned as cover for musical equipment, musicians and guest speakers.
It is not yet determined if a raised platform will be used for musicians and guest speakers. A first aid station will
be available. As for past rallies, event organizers will make a sweep of the green area, march route and
courthouse grounds for event clean-up. Sound amplification will be used at the courthouse and Fountain St. locations
A bullhorn may be used along the route. A portable low noise inverter generator may be used to provide power

Section V. Item #11.



CITY OF DUDGEVILLE SPECIAL EVENT LICENSE

FEE: \$30.00

ADDITIONAL MATERIALS

With your application please include the following materials:

- A detailed map if street use is involved with the event.
- Certificate of Liability Insurance for general liability coverage (minimum of \$300,000 for the injury or death of any one person, \$50,000 for property damage, and \$1,000,000 aggregate coverage for the event). Indivisible Southwest has researched availability of liability insurance, but no companies will insure political action groups. We stipulate that indivisible SW will not hold the City liable.

 Additional applications as needed: Alcohol Licensing, Vending Permits, Facility Use or Pavilion
- rental agreements

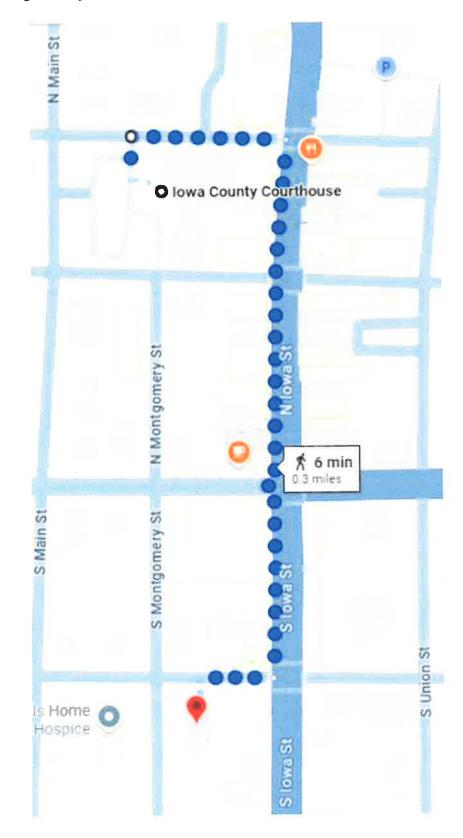
ACKNOWLEDGEMENT

√	If applicable, I understand that I may be required to set up barricades at the locations designated by the City and to take down the barricades after the event. Generally, barricades may be set in place no earlier than ½ hour before the start of the event and must be removed immediately following the event and returned to the location designated by the City no more than 1 hour after the conclusion of the event.
✓	I understand that pursuant to <u>Chapter 12.05</u> of the municipal code, I may be charged for the cost of "Extraordinary Services" provided by the City that exceed \$500 as a result from the Special Event.
✓	I certify that I have read and understand <u>Chapter 12.05</u> of the municipal code, and agree to adhere to all of the rules and requirements outlined in the ordinance.
<	I certify that all information provided on this application is true and correct.
✓	I, Indivisible Southwest , organizer of the event: No Kings II (insert name/organization) (insert name of event) shall indemnify, hold harmless, and defend City of Dodgeville, its officers, agents, and employees from and against all claims, damages, losses, and expenses, including attorneys' fees, which arise
	from or out of the above specified event.

Signature of Applicant

9/22/2025 Date

Route for No Kings II rally and march on October 18, 2025



 111 W. Merrimac
 Telephone: 608-935-3238

 Dodgeville, WI 53533
 Fax: 608-935-9655

Chief of Police Brandon Wilhelm

RE: Special Event Permit Application - "No Kings Rally II"

Event Date: 10-18-2025 at 0900 a.m. through 10-18-2025 through 01:00 p.m.

Location: Iowa County Courthouse proceeding to Fountain St. Park (105 W. Fountain St.) via West sidewalk of N. Iowa St.

FROM: Chief of Police Brandon E. Wilhelm

Public Safety Impact- The use of City property for this event, including sidewalks and a park area, raises concerns for Public Safety related to traffic movement, crowd size, pedestrian, and attendee safety. Political demonstrations also have an increased risk of malicious behaviors due to conflicting ideologies and/or large crowds in confined areas and spaces.

As part of the approval process, it is the recommendation of Chief of Police Brandon Wilhelm, that an Emergency Operations and Response plan be created for this event in partnership with EMS, Fire, and event staff, before the date of the event.

Traffic Movement- Per the proposed license, there is no predetermined impact to traffic. Based on a similar previous event, there were temporary impacts as pedestrians crossed within crosswalk areas. Parade marshals assisted with travel in those situations and will be recommended to do so for this event.

There is no specified detour within this application. When completing the operations plan, a determination will be made if W. Fountain St. and or S. Montgomery St. should be rerouted to ensure the safety of citizens and limit impacts to traffic flow.

Police Protection- This event will require police presence. Presence will be variable based on the completion of the Emergency Operations plan. Certain times of the event may require more officers than other times. Evaluation will be given to the previous similar event to assist with the determination of expected Officer involvement.

At least two additional Officers will be required.

Crowd Control- This function involving participants is of moderate concern, given the estimated crowd at this time. Previous estimates for a similar event vastly underestimated the expected turnout. Constant evaluation throughout the event will be provided by on-scene law enforcement to determine necessary crowd control measures.

State Highway Closure- This regular application does not include State Highway Use.

111 W. Merrimac Dodgeville, WI 53533 Telephone: 608-935-3238 Fax: 608-935-9655

Chief of Police Brandon Wilhelm

Parking- Parking will take place on the adjacent streets, and we do not expect any issues.

Emergency Vehicle Access- Emergency vehicle access will be available via adjacent streets. Access to adjacent private property/residences may be slightly impacted by crowd size, barricades, etc.

Recommendation: It is my recommendation to the Dodgeville Common Council to approve a special event license with a requirement that an emergency operations plan be created with Law Enforcement, Fire and EMS input in conjunction with event staff, prior to the event date.

Brandon E. Wilhelm

Brandon Wilhelm



CITY OF DODGEVILLE SPECIAL EVENT LICENSE FEE: \$30.00

APPLICANT INFORMATION					
ORGANIZATION/ENTITY NAME: Dodgeville Revitalization/Dodgeville Area Chamber of Commerce					
PRIMARY EVENT CONTACT: Jenna Vondra	MARY EVENT CONTACT: Jenna Vondra PHONE: (608) 935-9200				
EMAIL: depot@mhtc.net	ALT PHONE:				
ADDRESS: 338 N Iowa St.	CITY: Dodgeville	STATE: WI	ZIP: 53533		

EVENT INFORMATION					
NAME OF EVENT: Home For the Holidays Light Parade					
START DATE/TIME: 11/29/2025 16:30 END DATE/TIME: 11/29/2025 19:00					
(Include set-up and tear-down/clean-up time. A 48-hr notice is required if event time changes or is cancelled. If notice is NOT given, costs may be assessed for loss of City Staff time)					
GENERAL EVENT TYPE:					
Parade Block Party Expo Other (Describe):					
EXEPECTED NUMBER OF ATTENDEES: 200					
USE OF STREETS: Are Street Barricades Required? Yes					
State or County Approval Required? Yes (For Events involving or crossing State or County Highways)					
DESCRIPTION: Include a detailed description of all event activities such as vending, music, selling of food or alcohol beverages, location and use of tents, stages, sound amplification or other equipment, and attach a detailed plan for clean-up after the event, steps to be taken to prevent vehicular traffic from going through the area (if necessary), and steps that will be done to ensure underage people in are not served alcohol (if applicable). If using public streets, a detailed map MUST be provided with this application. Include additional pages if necessary.					
Holiday lights parade going from Fountain St. to Chapel St.					



CITY OF DODGEVILLE SPECIAL EVENT LICENSE

FEE: \$30.00

ADDITIONAL MATERIALS

With your application please include the following materials:

- A detailed map if street use is involved with the event.
- Certificate of Liability Insurance for general liability coverage (minimum of \$300,000 for the injury or death of any one person, \$50,000 for property damage, and \$1,000,000 aggregate coverage for the event).
- Additional applications as needed: Alcohol Licensing, Vending Permits, Facility Use or Pavilion rental agreements

ACKNOWLEDGEMENT If applicable, I understand that I may be required to set up barricades at the locations designated by the City and to take down the barricades after the event. Generally, barricades may be set in place no earlier than ½ hour before the start of the event and must be removed immediately following the event and returned to the location designated by the City no more than 1 hour after the conclusion of the event. I understand that pursuant to Chapter 12.05 of the municipal code, I may be charged for the cost of "Extraordinary Services" provided by the City that exceed \$500 as a result from the Special Event. I certify that I have read and understand Chapter 12.05 of the municipal code, and agree to adhere to all of the rules and requirements outlined in the ordinance. I certify that all information provided on this application is true and correct. , organizer of the event: Home For the Holiday Lights Parade Dodgeville Chamber of Commerce (insert name of event) (insert name/organization) shall indemnify, hold harmless, and defend City of Dodgeville, its officers, agents, and employees from and against all claims, damages, losses, and expenses, including attorneys' fees, which arise from or out of the above specified event.

09/03/2025

Date

Signature of Applicant

Emily Wolfe

From:

depot@mhtc.net

Sent:

Wednesday, September 17, 2025 10:43 AM

To:

Emily Wolfe

Subject:

RE: Special Event License - Holiday Parade

Emily,

Yes we are thinking of having it before the parade at 5:45 at the same location.

Route would be the same as last year. Line up on W Fountain St and S Montgomery St. EMS, Fire Trucks line up on E Fountain St. if available. Route would go down lowa St. to W Chapel St. or Diagonal St. (which every Brandon and the PD would prefer).

Any additional questions let me know.

Thanks, Jenna

From: Emily Wolfe <deputy@dodgevillewi.gov> Sent: Tuesday, September 16, 2025 12:04 PM

To: Jenna Vondra <depot@mhtc.net>

Subject: Special Event License - Holiday Parade

Good Afternoon,

After sending the Special Event license application to Brandon Wilhelm for review, he has asked the following additional question:

1

- 1. Are you still planning to hold the tree lighting event at the Courthouse this year?
- 2. Do you by chance have a mapped route of the parade route for this year's event?

Please advise on both questions.

Thanks,

Emily Wolfe

Deputy Clerk/Treasurer City of Dodgeville 100 E Fountain St Dodgeville, WI 53533 PH: (608) 930-9485 deputy@dodgevillewi.gov

111 W. Merrimac Dodgeville, WI 53533 Telephone: 608-935-3238 Fax: 608-935-9655

Chief of Police Brandon Wilhelm

RE: Special Event Permit Application - "Home for the Holidays Parade"

Event Date: 11-29-2025 at 04:30 p.m. through 11-29-2025 at 07:00 p.m.

Location: Iowa St. from Walnut St. to Spring St.

FROM: Chief of Police Brandon E. Wilhelm

Public Safety Impact- The use of City property for this event, including sidewalks and streets, raises concerns for Public Safety related to traffic movement, crowd size, pedestrian, and attendee safety.

As part of the approval process, it is the recommendation of Chief of Police Brandon Wilhelm, that an Emergency Operations and Response plan be created for this event in partnership with EMS, Fire, and event staff, before the date of the event.

Traffic Movement/State Highway Closure- Per the proposed license, State Hwy 23 will need to be closed down for this event from Spring St. to Walnut St. Traffic will be detoured at both Spring St. and Walnut St. to Union St.

Police Protection- This event will require police presence. Presence will be variable based on the completion of the Emergency Operations plan. Consideration will be given to previous events to assist with the determination of expected Officer involvement. At least three additional Officers will be required.

Crowd Control- This function involving participants is of moderate concern, given the estimated crowd at this time. Constant evaluation throughout the event will be provided by on-scene law enforcement to determine necessary crowd control measures.

Parking- Parking will take place on the adjacent streets, and we do not expect any issues.

Emergency Vehicle Access- Emergency vehicle access may be slightly impacted by crowd size, barricades, parade floats, etc.

Recommendation: It is my recommendation to the Dodgeville Common Council to approve a special event license with a requirement that an emergency operations plan be created with Law Enforcement, Fire, and EMS input in conjunction with event staff, prior to the event date.

Brandon E. Wilhelm

Brandon Wilhelm

111 W. Merrimac Dodgeville, WI 53533 Telephone: 608-935-3238 Fax: 608-935-9655

Chief of Police Brandon Wilhelm

2025 Holiday Lighting

Renewal 2025

Dodgeville Chamber of Commerce

Jenna Vondra

222 N Iowa St, Dodgeville, WI 53533 (608) 935-9200



Traditions

7182 Hwy 14 #1010 Middleton, WI 53562 prsutter@traditionslighting.com (800) 844-7001

Installation, removal, and storage of existing lights as completed in the previous seasons by Traditions

Adjustments for 2025:

- Branch wrap two trees along the roadside in front of the Courthouse.
 - No longer wrapping the tree near the library, it was cut down, leaving lights in storage this year.
- Branch wrap the tree in front of 112 North Iowa St. (Local Title Company)

PRODUCT	PRICE	QTY TOTAL
	\$0 (0% off)	\$0
Accessory Items	\$0.00	\$0.00
		SURTOTAL: \$0

	SUBTOTAL: \$2,641.80
Installation	\$2,641.80
INSTALLATION	PRICE

REMOVAL & STORAGE	PRICE
Removal	\$2,066.05
Storage	\$448.67
	SUBTOTAL: \$2,514.72

TOTALS	
PRODUCT	\$0.00
INSTALLATION	\$2,641.80
REMOVAL & STORAGE	\$2,514.72
SUBTOTAL TAX (5.5%)	\$5,156.52 \$283.61

PROPOSAL TOTAL

\$5,440.13

Policies & Procedures

1. Typical Project Invoicing

- Upon acceptance of project 75% of project total, will be invoiced for, due on date specified in invoice.
- Remaining project total invoiced for at beginning of new-year, due 30 days from invoice date.

2. Display Maintenance

- If any lights stop working, maintenance is free of charge. Simply contact your representative, and someone will be there to help asap. However, a few restrictions do apply:
- Traditions will only repair lights and decorations that were provided by and installed by Traditions for that project, at no cost. Any items provided by the client (either through client installation, or installation by Traditions), will incur a maintenance charge if repair service is requested.
- Traditions will continue to service displays free of charge, until January 15th of each year. After that point, a maintenance charge will be incurred if service is requested. (This has to do with harsh weather conditions late in winter, and our removal policies, see below).

3. Removal and Storage

- · Removals begin Jan 1 of each year.
- . For best year-to-year light durability, we highly suggest all lights and décor being removed by the end of February of each year.
- Extra lights and décor, that wasn't installed by Traditions, will be removed, and subject to an increased removal & storage cost if size of décor is significantly large.
- Storage is required.
- Removal of lights at end of every season is HIGHLY recommended, if a client does decide to leave the lights up all year long, any repairs or maintenance of the lights will incur a cost beyond this proposal.

4. Lifetime of Lights

Average lifetime of LED lights provided by Traditions is 3 – 5 years, but often longer. However, that's not to say a couple light sets won't need replacing after just one season. Records are kept upon removal to indicate any lights needing replacement for next season. The total lifetime of holiday lights depends almost entirely on the given weather conditions for that season.

Acceptance of Proposal

The above prices, specifications and conditions are satisfactory and are hereby accepted. You are authorized to do the work as specified. Payment will be made as outlined above.

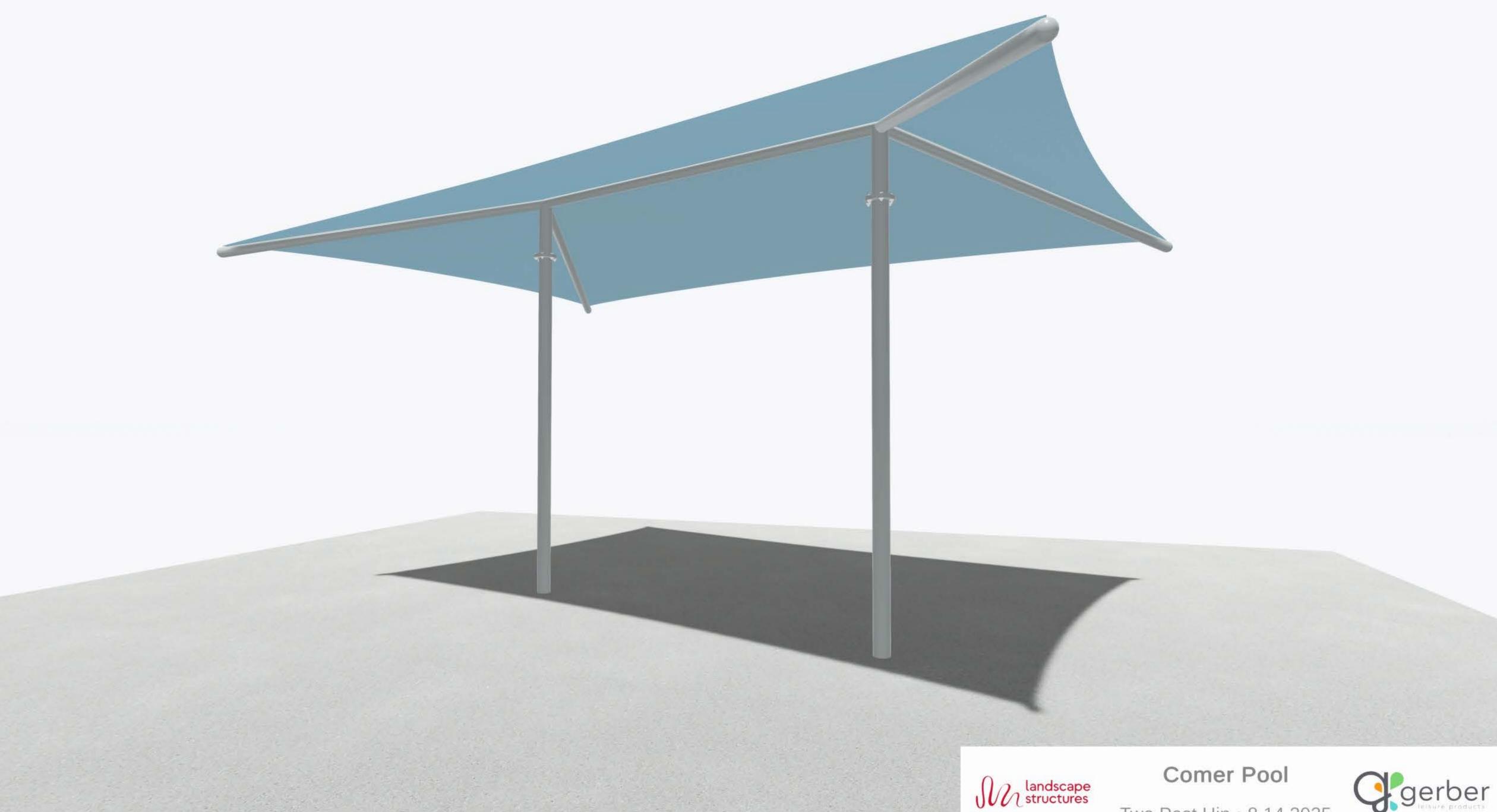
Traditions is a trade name of or division of Traditions, LLC. By agreeing to this contract, client is agreeing to enter into a working contract with Traditions, LLC.

Client Signature:	Date:

*Email Confirmation Acceptable to Proceed with Contract Work

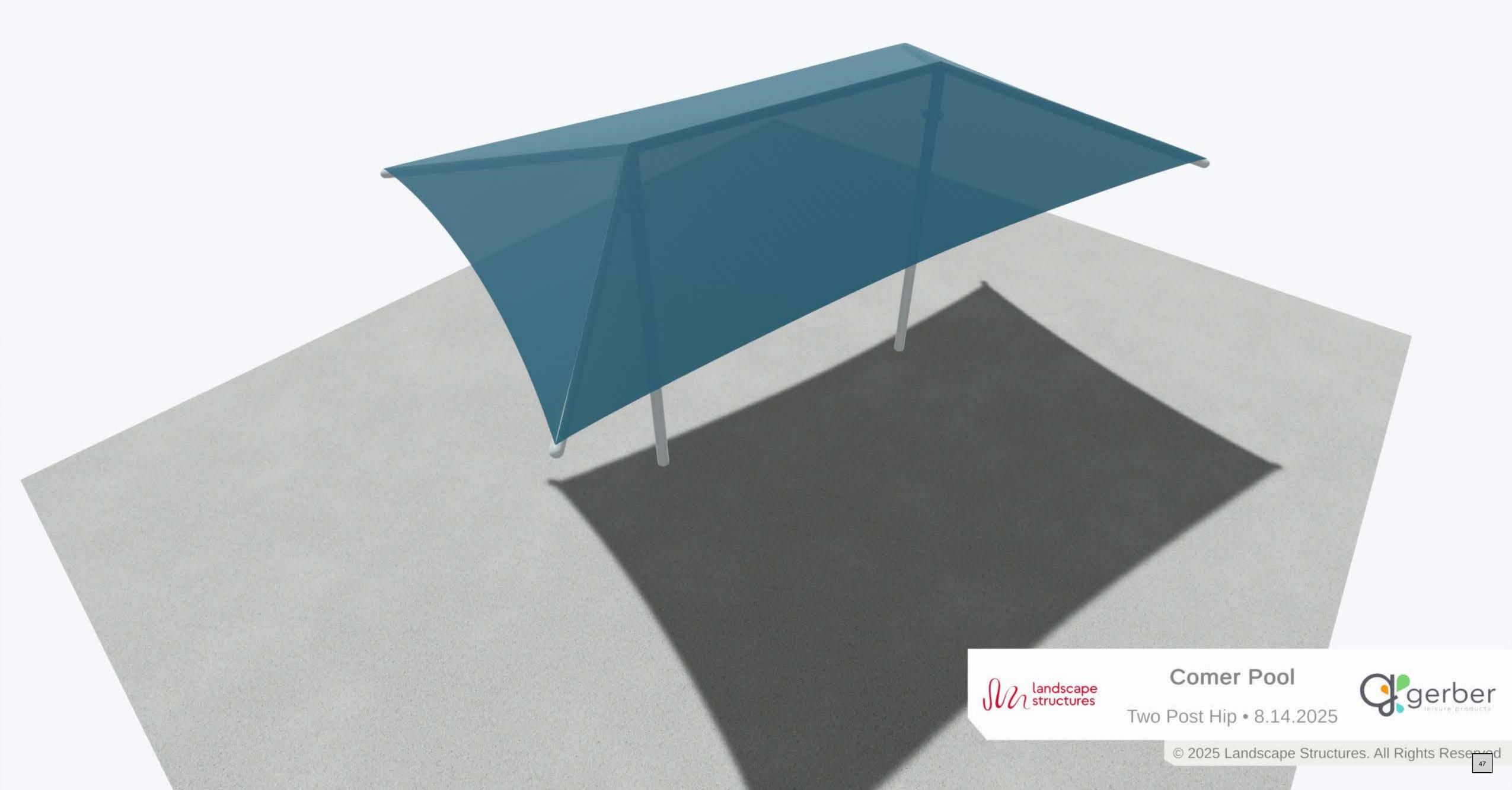
Terms & Conditions

All material is guaranteed to be as specified. All work to be completed in a workmanlike manner according to standard industry practices. Any alteration or deviation from above specifications involving extra costs will be executed only upon written change orders, and will result in additional charges over and above the estimate. All agreements are contingent upon circumstances beyond control of Traditions, LLC, including but not limited to weather emergencies, national emergencies, acts of vandalism, theft, terrorism, changes in trade legislation and labor disruption. Owner's insurance to cover all materials once purchased. Owner's product to be insured by Traditions, LLC once in storage. All employees of Traditions, LLC are covered by worker's compensation.

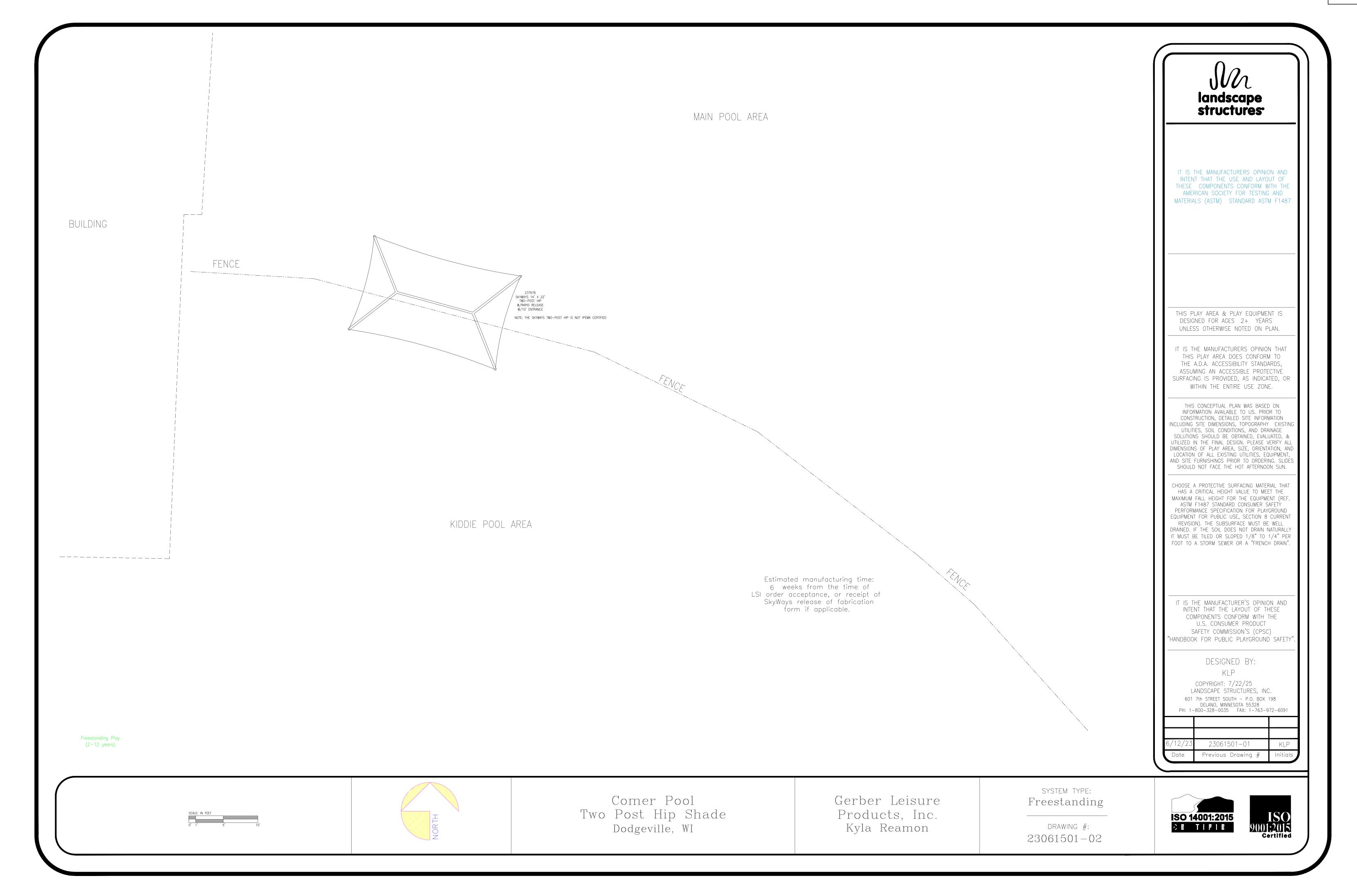


gerber gerber

Two Post Hip • 8.14.2025







PlayStudio® Color Summary

Created By: kphelan

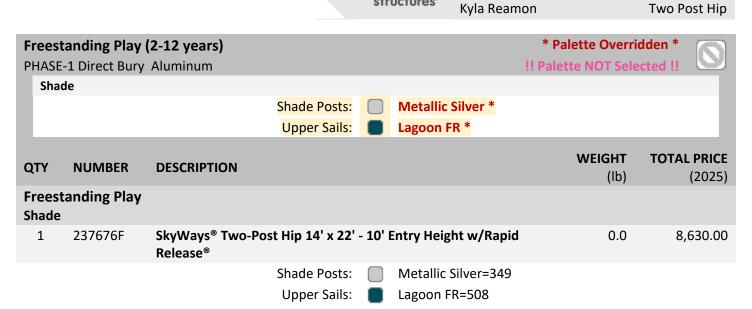
Date: 7/22/2025 2:39:32 PM



Comer Pool Dodgeville, WI Gerber Leisure Products, Inc.

Section V. Item #14.

Two Post Hip



SUMMARY		WEIGHT (lb)	PRICE (2025)
Freestanding Play (2-12 years) PHASE-1		0.0	\$8,630.00
ALL PHASES	Freestanding Play Total	0.0 0.0	\$8,630.00 \$8,630.00

Customer

Dodgeville Comer Pool 501 S Dacotah St Dodgeville, WI 53533

Marking or private lines

Print Name:

Site protection while concrete footer cures

Final color selection of fabric and post

Provide access for our installation team and their skid steer/boom lift

Gerber Leisure Products, INC.

PO Box 42 Mount Horeb, WI 53572

Phone: 800-236-7758

Prepared by: Kyla Reamon - kyla@gerberleisure.com

DATE:

8/12/2025

Two-Post Hip Shade

Valid Until:

QUOTE Name:

30 days

0.00

0.00

0.00

0.00

DESCRIPTION	QTY	PRICE	AMOUNT
New Landscape Structures play equipment, per attached 2D, 3Ds & Component List	1	8630	8,630.00
Discount on equipment, per Kyla	1	-630	-630.00
Freight to installer	1	1190	1,190.00
			0.00
Professional installation of above listed equipment *Includes hole boring through existing concrete and wire mesh, new rebar cages and concrete for a direct bury footer, saw cutting the concrete and assembly of the shade structure.	1	8775	8,775.00
Materials to be stored at Gerber Leisure Products over the winter for a Spring 2026 install			0.00
To be completed by Comer Pool Representatives:			0.00

The equipment that I have proposed would comply with the current ADA guidelines in and of itself assuming that accessible resilient surfacing is supplied underneath the equipment including under and around the auxiliary ground level equipment, and an access pathway to the area is provided

		Subtotal	\$17,965.00
TERMS AND CONDITIONS		Taxable	\$0.00
1. All invoices will be sent via QuickBooks. A 3% CC fee will be applied to any payments.	CC	Tax rate	0.000%
2. Full payment of materials is due to place the order	\$9,190.00		
3. Customer will be billed for applicable installation services and surfacing materials/services at start of work		Tax due	\$0.00
4. Additional agreed upon services will be billed upon completion of the project		Other	\$0.00
5. Final payment will be due within 30 days of invoice date, a late fee of 3% p will be added to any late payments	er month	TOTAL Due	\$17,965.00
6. Please mail or email signed price quote to the address above			
Customer Acceptance (sign below):			

If you have any questions about this price quote, please contact: Kyla Reamon at 608-437-7037 / kyla@gerberleisure.com Thank You For Your Business!

Section V. Item #14.

Gerber Leisure Products, INC.

PO Box 42

Mount Horeb, WI 53572

Phone: 800-236-7758

Filone. 600-230-77

QUOTE

DATE: QUOTE Name:

Valid Until:

8/12/2025 Inclusions

30 days

Prepared by: Kyla Reamon - kyla@gerberleisure.com

Customer

Dodgeville Comer Pool 501 S Dacotah St Dodgeville, WI 53533

DESCRIPTION	Includes	Does NOT Include
New Landscape Structures play equipment, per attached 2D, 3Ds & Component List	all equipment listed and shown on corresponding documents	discounts, shipping, installation, surfacing
Discount on equipment, per Kyla	discount from manufacturer LIST pricing of equipment	discounts of any other kind, unless included in this quote
Freight to installer	safe delivery of the listed equipment to a previously agreed upon location, or our installers warehouse for storage	unloading of freight if not delivered to the site.
Professional installation of above listed equipment	digging footing holes through existing concrere and wire mesh, assembly of equipment, concrete and new rebar for footings, project management, calling diggers, coordination of materials	excavation, site prep/leveling, surfacing, installation of surfacing, private lines marking or responsibility, new wire mesh

To be completed by Comer Pool Representatives:

Marking or private lines

Site protection while concrete footer cures

Provide access for our installation team and their skid steer/boom lift

Final color selection

The equipment that I have proposed would comply with the current ADA guidelines in and of itself assuming that accessible resilient surfacing is supplied underneath the equipment including under and around the auxiliary ground level equipment, and an access pathway to the area is provided

TERMS AND CONDITIONS

- 1. Full payment on materials is due to place the order.
- 2. Customer will be billed for applicable installation services at start of work
- 3. Additional services (surfacing) will be billed upon completion of the project
- 4. Payment will be due within 30 days of invoice date
- 5. Please mail or email signed price quote to the address above *Customer Acceptance (sign below)*:

×.					
Pr	int Name:				

If you have any questions about this price quote, please contact: Kyla Reamon at 608-437-7037 / kyla@gerberleisure.com

Thank You For Your Business!

ORDINANCE NO. 25-19

AN ORDINANCE TO AMEND THE SCHEDULE OF FEES IN SECTION 25.045(a) OF THE MUNICIPAL CODE OF THE CITY OF DODGEVILLE, IOWA COUNTY, WISCONSIN, RELATING TO SETTING FEES FOR BUILDING & DEVELOPMENT - PLANNING & ZONING AND BUILDING INSPECTION.

THE COMMON COUNCIL OF THE CITY OF DODGEVILLE, IOWA COUNTY, WISCONSIN, DO HEREBY ORDAIN AS FOLLOWS:

Section I: The schedule of fees in Section 25.045(a) of the Municipal Code of the City of Dodgeville shall be and hereby is amended as follows:

DESCRIPTION	FEE AMOUNT
Building & Development – Planning & Zoning	Fee
One- and Two-Family Dwelling	New \$100 Addition \$60 Accessory Building \$60 Fence \$60 Deck \$60 Pool \$60
Commercial Building	New \$200 Addition \$150 Accessory Building \$100
Industrial Building	New \$200 Addition \$150 Accessory Building \$100
Building & Development – Building Inspection	Fee
Building Groups: Group - 1 Residential buildings in which families or households live, rooming houses, residential garages, and storage sheds (this group does not include hotels, motels or institutional buildings)	
Group 2 - General and professional offices, barber shops, beauty parlors, bowling alleys, dry-cleaning establishments, clinics, natatoriums, shelters, hotels and motels, taverns, restaurants, cafeterias, retail establishments, commercial garages and service stations, churches, assembly halls, theaters, exhibition buildings, educational institutions, hospitals, nursing homes, places of detention, gymnasiums, daycare centers, arenas, laboratories, lodge halls, funeral homes, libraries, skating rinks, dance halls, and armories.	

	<u> </u>
Group 3 - Warehouses, freight terminals, storage buildings, refrigeration storage, factories, machine shops, electric sub-stations, sewage treatment plants, heating plants, steam and electric generating plants, transformer vaults and other buildings not classified in Groups 1-2. New Construction and Additional Fees	
11ew Constitution and Additional Lees	C 1 00 17 C 1 (1 1 00 00 00 00 00 00 00 00 00 00 00 00
Building Permits	Group 1 \$0.15 per square foot (minimum \$100) Group 2 \$0.30 per square foot (minimum \$150) Group 3 \$0.20 per square foot (minimum \$150)
Building Permits -Plumbing	Group 1 \$0.06 per square foot (minimum \$100) Group 2 \$0.06 per square foot (minimum \$150) Group 3 \$0.05 per square foot (minimum \$150)
Building Permit - Electric	Group 1 \$0.06 per square foot (minimum \$100) Group 2 \$0.06 per square foot (minimum \$150) Group 3 \$0.05 per square foot (minimum \$150)
Building Permit - Heating/Ventilating/Air Conditioning	Group 1 \$0.06 per square foot (minimum \$100) Group 2 \$0.06 per square foot (minimum \$150) Group 3 \$0.05 per square foot (minimum \$150)
Automatic fire suppression and/or fire alarm system inspection permit	Required for new construction or when new system installed in existing building. Group 1 \$0.06 per square foot (minimum \$100) Group 2 \$0.06 per square foot (minimum \$150) Group 3 \$0.05 per square foot (minimum \$150)
General Notes	Areas included for fee calculation purposes shall include all floor levels, basement, attached garages, porches, and all spaces enclosed and under roof. The Building Inspector will be responsible for calculating the square footage of all buildings. All permit fees are rounded to the nearest dollar.
Alterations and Repairs to Existing Buildings	1
Building Permits	1% of building construction cost or a minimum fee which ever is greater Residential \$60 minimum Commercial \$150 minimum
Building Permits - Plumbing	1% of plumbing construction cost or a minimum fee which ever is greater Residential \$60 minimum Commercial \$100 minimum
Building Permits - Electrical	1% of electrical construction cost or a minimum fee which ever is greater Residential \$60 minimum Commercial \$100 minimum
Building Permits - Heating/Ventilating/Air Conditioning	1% of heating/ventilating/air conditioning cost or a minimum fee which ever is greater

	Residential \$60 minimum		
	Commercial \$100 minimum		
	Construction cost includes labor and materials		
	(Projects that have no labor cost will have		
	materials costs doubled for permit fees).		
	materials costs doubled for permit rees).		
	The Building Inspector shall be responsible for		
	estimating construction costs utilizing		
General Notes	information provided by permit applicants.		
General Notes	information provided by permit applicants.		
	All permit fees are rounded to the nearest dollar.		
	Building code reviews and any services requested		
	by the City outside the normal permitted		
	inspections will incur a \$75.00 hourly charge.		
Miscellaneous Fees and Requirements	7 3		
_	\$200 per residential permit		
Permit to Start Early Construction	\$400 per commercial permit		
Wisconsin Uniform Building Permit Seal	\$60 per seal		
Additional and Miscellaneous Inspections	\$150 per inspection		
Residential Plan Review	Single Family \$100		
Residential Fian Review	Multi-Family \$200		
	0 - 25,000 cubic feet \$150		
Commercial Plan Review - New Structures	25,001 - 50,000 cubic feet \$250		
	50,001 - 100,000 Cubic Feet \$300		
	0 - 25,000 cubic feet \$150		
Commercial Plan Review - Remodels	25,001 - 50,000 cubic feet \$200		
	50,001 - 100,000 cubic feet \$300		
Review of Plans that have been examined by DSPS	\$100		
Penalty for Starting without a Building Permit	Double the Permit Fee		
Erosion Control Parmit	Residential \$200		
Erosion Control Permit	Commercial \$300		
Solar Energy Permit	\$0.30 per square foot (minimum \$150)		
Sign Darmit	24 sqft or less \$60		
Sign Permit	More than 24 sqft \$100		
Moving (a building/atmatura) Damait	1/2 of rates charged for new construction		
Moving (a building/structure) Permit	(minimum \$200 per structure)		
Pazing (a building/atrustura) Ess	\$60.00 per residential building		
Razing (a building/structure) Fee	\$100 per commercial building		

Section II: This ordinance shall become effective upon its passage and publication as required by law.

A 1 . 1 1 1.11	1 C	2025
Adopted and approved this	day of	2025.

	Barry Hottmann, Mayor
ATTEST:	
Emily Wolfe, Deputy City Clerk	
Date Ad Date Pu Effectiv	blished:

CITY OF DODGEVILLE NOTICE OF ADOPTION OF ORDINANCE

PLEASE TAKE NOTICE that on **October 7, 2025**, the Common Council of the City of Dodgeville enacted the following ordinance:

ORDINANCE NO: 25-19

TITLE: AN ORDINANCE TO AMEND THE SCHEDULE OF FEES IN SECTION 25.045(a) OF THE MUNICIPAL CODE OF THE CITY OF DODGEVILLE, IOWA COUNTY, WISCONSIN, RELATING TO SETTING FEES FOR BUILDING & DEVELOPMENT – PLANNING & ZONING AND BUILDING INSPECTION.

SUMMARY: The main points of the ordinance are summarized as follows:

- 1. Establish fee amounts for zoning reviews for residential, commercial, and industrial properties.
- 2. Revise fee amounts for new building construction, alterations and repairs to existing buildings, and other miscellaneous fees and requirements.

AVAILABILITY: A copy of the full text of the ordinance may be obtained from:

Office of the City Clerk City Hall 100 E. Fountain Street Dodgeville, Wisconsin 53533 (608) 930-5228 www.cityofdodgeville.com

Emily Wolfe, Deputy City Clerk



Work Change Directive

Portzen Construction, Inc.

(AUTHORIZED SIGNATURE)

WCD No. 15

Date:	9/22/2025	
То:	Andrew Noble Portzen Construction, Inc. 205 Stone Valley Drive Dubuque, IA 52003	
From:	Lisa Twarog, Resident Engineer	
Project: Subject:	City of Dodgeville - 2023 Water Syst WCD No. 15: Chemical Radar	em Improvements
Attachments:	Radar	Radar, Contractor COR #19 Wells 5,8 & 9 Chemical
	ed to proceed promptly with the following cells and install radar sensor and dis	
Reason for Dir	ective: uld like to update their chemical use mo	onitoring at Wells 5_8_ and 9
THE STATE WE	and into to apacto their ottornion about	ormorning at vivolis of o, and s.
involve one or mor	that the above change(s) have affected Contract e of the methods listed below for determining the I times are not to be exceeded without further au	Price or Contract Times, a Change Order based thereon will result of the change(s). If the change involves an increase in thorization.
F	Contract Cost:	Contract Time:
☑ Lump ☐ Unit F	Sum Bid Price	Engineer's Records Contractor's Records
===	and Materials	✓ Other: 0
Estimated co	ontract cost adjustment: Increase \$23,767.00	Estimated increase/decrease in Contract Time: Substantial Completion: 0 days Final Completion: 0 days
AUTHORIZED [*]		RECOMMENDED:
	City of Dodgeville	Town and Country Engineering
Ву:	OWNER	By: ENGINEER
Deter		(AUTHORIZED SIGNATURE)
Date: *Only requi	red with change in contract work scope,	Date: 9/22/2025
	st or contract time.	ACCEPTEO:

TOWN & COUNTRY ENGINEERING, INC.

Please sign and return to sender.

Date:



Construction Correspondence

CC No. 24
Contractor Ref No. 13

□ RFI □ RFP □ Communication

Date: 8/19/2025

To: Andrew Noble

Portzen Construction, Inc. 205 Stone Valley Drive Dubuque, IA 52003

From: Evan Chambers, Project Engineer

Project: City of Dodgeville -- 2023 Water System Improvements

Subject: CC No. 24 - Wells 5, 8 and 9 - Chemical Radar Attachments: Martelle Water Quote and VEGA Cut Sheets

Andrew,

The City is interested in utilizing VEGA Radar units to monitor chemical usage at Wells 5, 8, and 9. Please provide pricing, preferably per Well, to complete this work. Scope to include removal of existing chemical scales for chlorine, fluoride, and aquamag; provide and install VEGAPULS C 11 radar sensor and VEGADIS 82 external display; and wiring back to the respective control panel at each well.

Provide updated controls to monitor the tank level/weight, alarm on low weight, and provide re-order reminder at operator adjustable re-order set-point. Utilize existing chemical tank diameter and chemical density to convert change in level to a usage in terms of weight (pounds).

- Evan Chambers (8/19/2025)

TOWN & COUNTRY ENGINEERING, INC.

Madison ◆ Rhinelander ◆ Kenosha ◆ Platteville
6264 Nesbitt Rd • Madison, WI 53719 • (608) 273-3350 • tce@tcengineers.net



Equipment Quotation

6/24/25

Dodgeville

Item Description	Quantity	Price Each	Total
Vega C-11 Radar Sensor for continuous liquid level measurement with DIS82 Display	1	\$1,700.00	\$1,700.00
Radar Installation hardware	1	\$95.00	\$95.00
Shipping & Handling	n/a	n/a	\$35.00
Installation Labor	1	\$130.00	\$130.00
Travel	2	\$95.00	\$190.00
Installation Materials	n/a	n/a	\$0.00

\$2,150.00

Specification sheet

Section V. Item #16.

VEGAPULS C 11

Two-wire 4 ... 20 mA

Radar sensor for continuous level measurement



Application area

The VEGAPULS C 11 is the ideal radar sensor for non-contact level measurement in all standard applications where a high degree of protection is required. It is particularly suitable for level measurement in water treatment, pumping stations and rain overflow basins, for flow measurement in open channels and level monitoring and for many other industrial applications.

The sensor is suitable both for measuring liquids and for maintenancefree use on small bulk silos or bulk solids containers.

Your benefit

- Maintenance-free operation due to non-contact 80 GHz radar technology
- Exact measuring results independent of product, process and ambient conditions
- · Low-cost sensor for simple measuring tasks

Function

The sensor emits a continuous radar signal through the antenna. The emitted signal is reflected by the medium and received as an echo by the antenna.

The frequency difference between the emitted and received signal is proportional to the distance and depends on the filling height. The determined filling height is converted into a respective output signal and output as measured value.

Technical data

Measuring range up to 8 m (26.25 ft)

Deviation $\leq 5 \text{ mm}$ Beam angle 8°

Output signal 4 ... 20 mA

Process fitting Thread G1½, 1½ NPT, R1½

Mounting connection Thread G1, 1 NPT, R1

Process pressure -1 ... 3 bar (-100 ... 200 kPa/-

14.5 ... 43.51 psig)

Process temperature $-40 \dots +60 \,^{\circ}\text{C} \, (-40 \dots +140 \,^{\circ}\text{F})$ Ambient temperature $-40 \dots +60 \,^{\circ}\text{C} \, (-40 \dots +140 \,^{\circ}\text{F})$

Operating voltage 12 ... 35 V DC

Materials

The wetted parts of the instrument are made of PVDF. The process seal consists of FKM. The connection cable is PVC insulated.

You will find a complete overview of the available materials and seals in the "Configurator" at www.vega.com and "Products".

Housing versions

The housing is optimized for applications in the water/waste water industry and manufactured of PVDF. Due to the encapsulated cable gland, protection rating IP66/IP68 (3 bar) is achieved.

Electronics versions

The devices are constructed with two-wire electronics 4 ... 20 mA.



Adjustment

Wireless adjustment via Bluetooth

The Bluetooth version of the instrument enables a wireless connection to standard adjustment units. This can be smartphones/tablets with iOS or Android operating system or PCs with PACTware and Bluetooth USB adapter.



Wireless connection to standard operating devices

Adjustment is hence carried out via a free-of-charge app from the Apple App Store or the Google Play Store or the adjustment software PACTware and respective DTM.



Adjustment via PACTware or app

Electrical connection

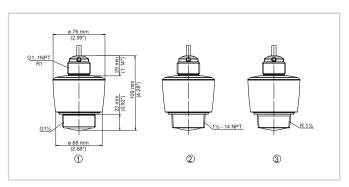


Wire assignment in permanently connected connection cable

- 1 Brown (+) to voltage supply or to the processing system
- 2 Blue (-) to voltage supply or to the processing system

You can find details on electrical connection in the instrument operating instructions at www.vega.com/downloads.

Dimensions



Dimensions VEGAPULS C 11

- 1 Thread G1½
- 2 Thread 1½ NPT
- 3 Thread R1½

Specification sheet

Information

You can find further information on the VEGA product line on our homepage.

In the download section on our homepage you'll find operating instructions, product information, brochures, approval documents, instrument drawings and much, much more.

There, you will also find GSD and EDD files for Profibus PA systems as well as DD and CFF files for Foundation Fieldbus systems.

Instrument selection

On our homepage under "Products" you can select the suitable measuring principle and instrument for your application.

You can find detailed information on the instrument versions at <u>www.vega.com</u> and "*Products*".

Contact

You can find your personal contact person at VEGA on our homepage $\underline{www.vega.com}$ and "Contact".

VEGADIS 82

4 ... 20 mA/HART

External display and adjustment unit for 4 ... 20 mA/HART sensors



Application area

VEGADIS 82 is suitable for measured value indication and adjustment of 4 ... 20 mA/HART sensors. The instrument is looped directly into the signal line at any location. It operates as a pure display instrument in a 4 ... 20 mA current loop and can hence be used as external display for a four-wire sensor or VEGAMET signal conditioning instrument with an active 4 ... 20 mA output.

Your benefit

- Time and cost saving with the parameter adjustment on site with PLICSCOM
- Reliable and easy adjustment through clear text indication with graphic support
- Universal use through HART standard parameters

Function

When used with a 4 ... 20 mA/HART sensor, the VEGADIS 82 operates as display and HART adjustment unit. The parameter adjustment of the sensor is carried out via HART communication. During the parameter adjustment, the VEGADIS 82 works as Master to the sensor.

The housing of VEGADIS 82 contains a filter element for ventilation. Hence the insturment is also used for atmospheric pressure compensation of a connected submersible pressure transmitter.

Technical data

General data

Materials

Housing plastic PBT, Alu die-casting, 316L
 Inspection window in Polycarbonate (UL-746-C listed)

housing lid for display and adjustment module

- Ground terminal 316Ti/316L

Weight approx. 0.35 kg (0.772 lbs)

Signal and supply circuit

Voltage loss (4 ... 20 mA)

Without lighting max. 1.7 VWith lighting max. 3.2 VCurrent range 3.5 ... 22.5 mA

Display and adjustment module

Indication LC display in dot matrix

Adjustment elements 4 keys

Protection rating

unassembled IP 20mounted into VEGADIS IP 40

82 without cover

Materials

- Housing ABS

- Inspection window Polyester foil

Ambient conditions

Storage and transport -40 ... +80 °C (-40 ... +176 °F)

temperature

Ambient temperature -20 ... +70 °C (-4 ... +158 °F)

Electromechanical data

Options of the cable entry

Cable gland
 M20 x 1.5 (cable: Ø 5 ... 9 mm)

- Cable entry 1/2 NPT

Wire cross-section (spring-loaded terminals)

- Massive wire, stranded 0.2 ... 2.5 mm² (AWG 24 ... 14)

wire

- Stranded wire with end 0.2 ... 1.5 mm² (AWG 24 ... 16)

sleeve

Electrical protective measures

Protection rating

- Plastic housing IP 66/IP 67, NEMA Type 4X

- Housing for panel IP 40, NEMA Type 1

mounting (mounted)

Aluminium/Stainless
 IP 66/IP 68 (0.2 bar), NEMA Type 6P

steel housing

Approvals

You can find detailed information on the existing approvals in the "configurator" on our homepage at www.vega.com/configurator.



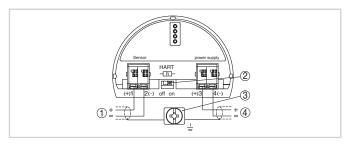
Adjustment

The adjustment of the instrument as well as the connected sensor is carried out via the optional display and adjustment module PLICSCOM. Another adjustment possibility is via a PC with the adjustment software PACTware and respective DTM. The PC is connected to the VEGADIS 82 via the interface adapter VEGACONNECT.



Display and adjustment module PLICSCOM

Electrical connection



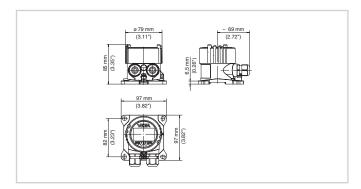
Wiring plan VEGADIS 82 4 ... 20 mA/HART

- 1 To the sensor
- 2 Switch for communication resistor (on = activated, off = deactivated)
- 3 Ground terminal for connection of the cable screen
- 4 For power supply

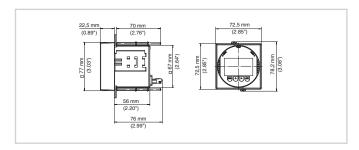
You can find details on electrical connection in the instrument operating instructions at www.vega.com/downloads.

Specification sheet

Dimensions



VEGADIS 82 with plastic housing



VEGADIS 82 with plastic housing for panel mounting

Information

You can find further information on the VEGA product line on our homepage www.vega.com.

In the download section under www.vega.com you'll find free operating instructions, product information, brochures, approval documents, instrument drawings and much, much more.

Contact

You can find the VEGA agency serving your area on our homepage www.vega.com.

Section V. Item #16.



Change Order Request

City of Dodgeville - 2023 Water System Improvements Project #23-02

September 12, 2025		Change	Order Request		19
Lisa Twarog Town & Country Engineering, Inc. 6264 Nesbitt Road Madison, WI 53719			Pages		11
We propose to provide equipment, labor, and materials	s to comp	plete the	following char	nge ord	der:
To remove existing cells and install radar sensor and displadated 08/19/2025.	y at wells	5, 8 & 9	per construction	ı Corres	spondence #24
Description I Pieper Electric 2 5% O&P 3 Martelle Water Treatment, Inc. 4 15% O&P 5 1% Bond	Qty 1 1 1 1 1	Unit LS LS LS LS	Cost \$ 20,056.00 \$ 1,002.80 \$ 2,150.00 \$ 322.50 \$ 235.31	\$ \$	Total 20,056.00 1,002.80 2,150.00 322.50 235.31
Total Additions or (Deductions) from the contract:				\$	23,766.61
Total Contract Adjustment requested:					\$23,767.00
Additional Working Days Requested:					0
If you have any questions regarding this proposal, please co	ontact our	office.			
Sincerely, Brandon Miles Assistant Project Manager					
Please Sign if Propo	sal is	ACCE	PTED		
Authorized F					
Sign: Date:		•			



CHANGE ORDER SUMMARY

JOB NAME: Dodgeville WSI Portzen Construction CHANGE ORDER NUMBER: PCO#8 205 Stone Valey Dr. **REVISION NUMER:** N/A Dubuque, IA 52003 DATE: 9/11/2025 JOB NO: PEI023041 ATTENTION: **Brandon Miles** CONTRACT NO: #23-02 AMOUNT OF C/O: \$20,056

REGARDING YOUR REQUEST FOR QUOTATION:

Proposal for the removal of Chlorine, Flouride, and Polyphosphate scales at wells 5, 8, & 9. Installation of Vega radar units (3), mounting of dispaly units (3) and communication/signal wiring for updated controls. Reuse of existing provisions as available. Procurement of Vega equipment by others. If conduit is deemed not needed please deduct \$2,194.00 from this proposal. Altronex programing is included with this proposal quote on last 2 pages of this document.

SUMMARY:	A. LABOR		\$10,204
	B. MATERIALS		\$1,710
	C. DJE		\$420
SBO	: YES		
	SUBTOTAL		\$12,334
	OVERHEAD & PROFIT	15.00%	\$1,850
	D. SUBCONTRACTS		\$5,592
	OVERHEAD & PROFIT	5.00%	\$280
	SUBTOTAL		\$20,056
	BOND		\$0
	INSURANCE		\$0
	GRAND TOTAL		\$20,056

ADDITIONAL CALENDAR DAYS EXTENDED TO CONTRACT COMPLETION DATE:

THIS AMOUNT ONLY COVERS THE DIRECT COSTS IN LABOR, MATERIALS, SUBCONTRACTS AND EQUIPMENT NECESSARY TO EXECUTE THE CHANGED WORK DESCRIBED IN THE PROPOSAL. AT THE PRESENT TIME, WE CANNOT ASSESS OR EVALUATE THE OVERALL IMPACT OF THE CHANGED WORK ON OUR ORIGINAL CONTRACT SCOPE OF WORK. WE THEREBY RESERVE OUR RIGHTS TO CLAIM FOR ANY INDIRECT COSTS WHICH MAY ARISE IN THE FUTURE AS A RESULT OF DELAYS TO THE WORK, OUT OF SEQUENCE WORK, INEFFICIENCIES, EXTENDED CONTRACT COMPLETION, LABOR AND MATERIAL ESCALATION AND/OR ACCELERATION AND EXTENDED WARRANTIES.

JOB	NUMBER	C.O. NO.	DATE	REVISION
Dodgeville WSI	PEI023041	PCO#8	11-Sep-25	N/A
A. LABOR				
*SUPER INTENDENT	1 HRS @	\$131.78	TOTAL	\$131.78
** SUPERVISOR	1 HRS @	\$134.40	TOTAL	\$134.40
*** SAFETY	1 HRS @	\$113.30	TOTAL	\$113.30
ELECTRICIAN	84 HRS @	\$116.96	TOTAL	\$9,824.64
ESTIMATOR	0 HRS @	\$58.62	TOTAL	\$0.00
ENGINEER	0 HRS @	\$50.00	TOTAL	\$0.00
	@		TOTAL	\$0.00
	@		TOTAL	\$0.00
	@		TOTAL	\$0.00
TRAVEL	@		TOTAL	\$0.00
SUBSISTENCE	@		TOTAL	\$0.00
PREMIUM COSTS			TOTAL	\$0.00
			LABOR TOTAL	\$10,204.12
B. MATERIALS				
MATERIAL PER "TAKE-OFF'	•		TOTAL	\$1,710
MISCELLANEOUS MATERIA	L & WASTE	0.00%	TOTAL	\$0
			SUBTOTAL	\$1,710
	FREIGHT AND HANDLING		TOTAL	\$0
	SPECIAL EXPEDITING		TOTAL	\$0
	SALES TAX	0.0%	TOTAL	\$0
			MATERIAL TOTAL	\$1,710



JOB	NUMBER	C.O. NO.	DATE	REVISION
Dodgeville WSI	PEI023041	PCO#8	11-Sep-25	N/A

C. DJE	QUANTITY	UNIT PRICE	AMOUNT
Field Office			\$0.00
Telephone			\$0.00
Field Office Supplies			\$0.00
Field Office Equipment			\$0.00
Blueprinting			\$0.00
			\$0.00
			\$0.00
First Aid and Safety Supplies			\$0.00
			\$0.00
Warehousing			\$0.00
Storage Charges			\$0.00
Freight Charges			\$0.00
			\$0.00
Special Insurance			\$0.00
openial modification.			\$0.00
Permit and Inspection Fees			\$0.00
Territe and inspection rees			\$0.00
			\$0.00
Equipment and Tools 0.00% of Labor	0	\$0.00	\$0.00
Truck - Jobsite Van	42	\$10.00	\$420.00
Truck - Pick-Up	42	\$10.00	\$0.00
Truck - Stake			\$0.00
Truck - Line			\$0.00
			\$0.00
Fuel - (On Jobsite)			
Transland Trins Consess			\$0.00 \$0.00
Travel and Trips Expenses			•
Lodging Expenses			\$0.00
Living Allowance			\$0.00
Entertainment			\$0.00
Double Union Benefits			\$0.00
			\$0.00
Job Clean-Up			\$0.00
			\$0.00
Temp Power Consumption Charges			\$0.00
Utility Comp Charges - Temp Service			\$0.00
Utility Comp Charges - Perm Service			\$0.00
			\$0.00
			\$0.00
			\$0.00
			\$0.00
			\$0.00
			\$0.00
			\$0.00
			\$0.00
			\$0.00
			\$0.00
			\$0.00
		TOTAL:	\$420



JOB	NUMBER	C.O. NO.	DATE	REVISION
Dodgeville WSI	PEI023041	PCO#8	11-Sep-25	N/A

ACTIVITY		QUANTITY	EACH	SUB-TOTAL	LABOR
TRENCH (4"x3' DEEP) DRIVE-DIG & BACKFILL, TEMP PATCH (100' PLUS)				\$0.00	
Per foot	LABOR				0.00
TRENCH (4"x3' DEEP) DRIVE-DIG & BACKFILL, TEMP PATCH (LESS THAN				\$0.00	
100')	LABOR				0.00
TRENCH (4"x2' DEEP) GRASS-digging backfill				\$0.00	
THENCH (4 XZ DEEF) GRASS-digging backing	LABOR				0.00
BORING-UP TO 100 FEET-LOT PRICE				\$0.00	
BONING OF TO TOUTEET EOTT MICE	LABOR				0.00
BORING-OVER 100 FEET				\$0.00	
BOTTING OVER 100 FEET	LABOR				0.00
FUSING, PER FUSE				\$0.00	
1001110,1121111002	LABOR				0.00
CONCRETE PAD FOR TRANSFORMER-4'X6'-LOT PRICE				\$0.00	
	LABOR				0.00
RIGGING				\$0.00	
ModiNo	LABOR				0.00
CORING-1 HOLE LOT PRICE-CONCOR				\$0.00	
CORING-1 HOLE LOT PRICE-CONCOR	LABOR				0.00
POST AUGERING & INSTALLATION				\$0.00	
POST AUGERING & INSTALLATION	LABOR				0.00
POLE BASE-24"				\$0.00	
POLE BASE-24	LABOR				0.00
DOLE SETTING				\$0.00	
POLE SETTING	LABOR				0.00
DOLE DEMOVAL				\$0.00	
POLE REMOVAL	LABOR				0.00
DOLE DASE DEMOVAL				\$0.00	
POLE BASE REMOVAL	LABOR				0.00
UNLOAD POLES FROM TRUCK				\$0.00	
UNLOAD FOLES FROM TROCK	LABOR				0.00
SAWCUTTING				\$0.00	
SAWCOTTING	LABOR				0.00
Altronex Control Systems		1.00	\$5,592.00	\$5,592.00	
	LABOR	1.00		4	0.00
				\$0.00	0.00
	LABOR			ć0.00	0.00
	14000			\$0.00	0.00
	LABOR			\$0.00	0.00
	LABOR			φυ.υυ	0.00
	LADON			\$0.00	0.00
	LABOR			φυ.συ	0.00
	2,12011		TOTALS	\$5,592.00	0.00



JOB	NUMBER	C.O. NO.	DATE	REVISION
Dodgeville WSI	PEI023041	PCO#8	11-Sep-25	N/A

ACTIVITY	QUANTITY	EACH	SUB-TOTAL	LABOR
			\$0.00	
LABO	OR .			0.00
			\$0.00	
LABO	OR .			0.00
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LABO	OR .			0.00
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LABO)R			0.00
			\$0.00	
LABO)R			0.00
			\$0.00	
LABO)R			0.00
		TOTALS	\$0.00	0.00

ESTIMATING FORM

						_			, ,	Sectio	n V. Item #16	
PROJECT			CODE #	PAGE	OF	PINPARPOWE						
Dodgeville WSI						PIEPER.				-UWER		
LOCATION	Well #5						ARCH. OR ENG.			ESTIMATE NO		
Notes:							SPECIFICATION NO.		SCALE		DRAWING NO.	
ESTIMATED BY		PRICED BY						REVIEWED	T.S. REVIEWED		DATE	
											9/11/2025	

Description	Quan.	Material Unit	Material Extension	Labor Unit	Labor Extension	Notes
PVC SCH 80 3/4"	70	\$0.72	\$50.40	0.066	4.62	
Flex Sealtite, 1/2" diameter	15	\$1.79	\$26.85	0.068	1.02	
Threaded Reducer 3/4" to 1/2"	6	\$6.46	\$38.76			
PVC, #80, Elbows, 3/4" diameter	6	\$1.37	\$8.22	0.227	1.362	
PVC, couplings, 3/4" diameter	12	\$0.34	\$4.08			
Flex Sealtite, connectors, plain, 1/2" diameter	6	\$6.00	\$36.00	0.136	0.816	
TSP 16-2	90	\$4.50	\$405.00	0.022	1.98	
Removal of Loadcell, Display & Wire Identification	3			1.33	3.99	
Removal of existing wiring from Loadcell to Displays	3			0.5	1.5	
Installation of new display and terminations	3			2	6	
pulling and labeling of manufacturer cable	3			1	3	
Altronex coordination	1			1	1	
Mobilization	1			1	1	
Testing and comissioning	1			1	1	
			4			
	this page	-	\$570	-	28	- 71
TS 24 Total	all pages	-	\$1,710	-	84	- [''

ESTIMATING FORM

								/		Sectio	n V. Item #16	
PROJECT			CODE #	PAGE	OF	PURPERPOW				01111		
Dodgeville WSI								TOWELL				
LOCATION	Well #8						ARCH. OR ENG.			ESTIMATE NO		
Notes:							SPECIFICATION NO.		SCALE		DRAWING NO.	
ESTIMATED BY	PRIC	ICED BY						REVIEWED	T.S. REVIEWED		DATE	
											9/11/2025	

Description		Quan.	Material Unit	Material Extension	Labor Unit	Labor Extension	Notes
PVC SCH 80 3/4"		70	\$0.72	\$50.40	0.066	4.62	
Flex Sealtite, 1/2" diameter		15	\$1.79	\$26.85	0.068	1.02	
Threaded Reducer 3/4" to 1/2"		6	\$6.46	\$38.76			
PVC, #80, Elbows, 3/4" diameter		6	\$1.37	\$8.22	0.227	1.362	
PVC, Couplings, 3/4" diameter		12	\$0.34	\$4.08			
Flex Sealtite, connectors, plain, 1/2" diameter		6	\$6.00	\$36.00	0.136	0.816	
TSP 16-2		90	\$4.50	\$405.00	0.022	1.98	
Removal of Loadcell, Display & Wire Identification		3			1.33	3.99	
Removal of existing wiring from Loadcell to Displays		3			0.5	1.5	
Installation of new display and terminations		3			2	6	
pulling and labeling of manufacturer cable		3			1	3	
Altronex coordination		1			1	1	
Mobilization		1			1	1	
Testing and comissioning		1			1	1	
	Total this	page	-	\$570	-	28	-
TS 24	Total all		-	\$1,710	-	84	- 72
1347	. otal all	F~9C3	-	71,710	-	07	-

ESTIMATING FORM

					_				Sectio	n v. item #16
PROJECT		CODE #	PAGE	OF			F Y 2			
Dodgeville WSI					PIEPERPOWER					
LOCATION	Well #9					ARCH. OR ENG.			ESTIMATE NO	
Notes:						SPECIFICATION NO.		SCALE		DRAWING NO.
ESTIMATED BY	PRICED	D BY					REVIEWED	T.S. REVIEWED		DATE
										9/11/2025

Description		Quan.	Material Unit	Material Extension	Labor Unit	Labor Extension	Notes	
PVC SCH 80 3/4"		70	\$0.72	\$50.40	0.066	4.62		
Flex Sealtite, 1/2" diameter		15	\$1.79	\$26.85	0.068	1.02		
Threaded Reducer 3/4" to 1/2"		6	\$6.46	\$38.76				
PVC, #80, Elbows, 3/4" diameter		6	\$1.37	\$8.22	0.227	1.362		
PVC, Couplings, 3/4" diameter		12	\$0.34	\$4.08				
Flex Sealtite, connectors, plain, 1/2" diameter		6	\$6.00	\$36.00	0.136	0.816		
TSP 16-2		90	\$4.50	\$405.00	0.022	1.98		
Removal of Loadcell, Display & Wire Identification		3			1.33	3.99		
Removal of existing wiring from Loadcell to Displays		3			0.5	1.5		
Installation of new display and terminations		3			2	6		
pulling and labeling of manufacturer cable		3			1	3		
Altronex coordination		1			1	1		
Mobilization		1			1	1		
Testing and comissioning		1			1	1		
	Total th	is page	-	\$570	-	28	-	
TS 24	Total al	l pages	-	\$1,710		84	-	73



Project	Change Order Name	Reference/RFI	Change Order #
Dodgeville, WI - 2023 Water System Improvements	Wells 5, 8 & 9 Chemical Tank Leve Radar	CC 24	9418-C006

Dear Customer:

Thank you for your continued interest in SJE products, services and solutions. We are pleased to quote the following scope of work pertaining to the above-referenced project. Only the materials/services listed in the scope below.

Reason for change

The City currently have chemical weight scales at Wells 5, 8 & 9. They want to change those to radar level transmitters and have the PLC convert that level to weight.

Scope of work

Well 5 Local Control Panel W5-LCP Mods

- Input new Radar Unit to PLC
 - Radar to be supplied, installed and started up by Others
- Provide PLC programming to covert level to weight
 - Owner/Contractor to provide the following information for the Chlorine, Fluoride and Polyphosphate
 - Chemical Tank inside diameter
 - Specific Gravity of each chemical.
- SCADA
 - We will continue to use weight in pounds for monitoring, alarming and historicals

Well 8 Local Control Panel W8-LCP Mods

- Input new Radar Unit to PLC
 - Radar to be supplied, installed and started up by Others
- Provide PLC programming to covert level to weight
 - Owner/Contractor to provide the following information for the Chlorine, Fluoride and Polyphosphate
 - Chemical Tank inside diameter
 - Specific Gravity of each chemical.
- SCADA
 - We will continue to use weight in pounds for monitoring, alarming and historicals

Well 9 Local Control Panel W9-MCP Mods

- Input new Radar Unit to PLC
 - Radar to be supplied, installed and started up by Others
- Provide PLC programming to covert level to weight
 - Owner/Contractor to provide the following information for the Chlorine, Fluoride and Polyphosphate
 - Chemical Tank inside diameter
 - Specific Gravity of each chemical.
- SCADA
 - We will continue to use weight in pounds for monitoring, alarming and historicals

Clarifications / Exclusions

NOTE: Customer Supplied Parts - Our scheduling team will issue a zero-cost PO for the parts approximately 14 days prior to the beginning of panel manufacturing. This change will not affect ship date and will help the factory maintain the inventory with customer-supplied parts. Please do not ship customer-supplied parts to the factory until you have received the zero-cost PO from us with shipment instructions.

Items specifically not included in this proposal

- 1. Sales or use tax.
- 2. Installation of equipment and job site labor other than as specified.
- 3. Receiving and storage of equipment on the job site.
- 4. Installation materials, brackets, wire, clamps, piping, junction boxes, etc., not specifically described in our material list.
- 5. Performance, payment or equipment bond of any kind.
- 6. Installation of any instruments.
- 7. Field Terminations.

Respectfully submitted by,

Kurt Atwood

Business Development Manager

katwood@lwallen.com

(608) 210-1455

Proposal Amount \$5,592.00

CHANGE ORDER No. 2

Date of Issuance: October 7, 2025 Effective Date: October 7, 2025

Owner: City	of Dodgeville, Wisconsin	Owner's Contract No.: N/A		
Project: 2023	Water System Improvements	Date of Contract: 1/23/2023		
Contractor:	Portzen Construction, Inc.	Engineer's Project No.: DV-26		

The Contract Documents are modified as follows upon execution of this Change Order:

This Change Order changes the construction contract cost based on the following Work Change Directives:

WCD#	Description	Cost Increase/(Decrease)
1	Metal Roofing	(\$32,750.00)
2	BIL Sign	\$638.00
3	Chemical Pumps and Scales	\$10,172.00
4	Not Used	-
5	Exit & Egress Lighting	\$6,273.00
6	Hollow Metal Interior Window	\$1,500.00
7	Stone Address	\$210.00
8	Upsized Chemical Scales	\$1,734.00
9	Landscaping	\$4,012.00
10	Additional Cylinders and Keys	\$1,094.00
11	Well 5 Sensor	\$7,478.00
12	Well 9 Additional Cylinders and Keys	\$844.00
13	Additional Concrete Pavement	\$5,336.00
14	Well 5 Sensor Additional	\$1,714.00
15	Chemical Radar	\$23,767.00
16	Concrete Finish	(\$885.00)
SUBTOTAL:		\$31,137.00

This Change Order changes the construction contract cost based on the following Allowance Items:

Item	Description	Cost Increase/(Decrease)
1	Electrical Service to Well	(\$17,000.00)
2	Soil Testing	(\$5,000)
3	SCADA Computer Hardware	(\$9,250.15)
4	Temporary Cellular Connection for Union St Lift Station	(\$8,000.00)
5	Asbestos Abatement	(\$1,741.00)
6	Abandon Natural Gas Service	-
7	Existing Submersible Pump Removal	(\$5,000.00)
SUBTOTAL:		(\$45,991.15)

This Change Order changes the construction contract cost based on the following Supplemental Bid Item:

Bid Item	Description	Cost Increase/(Decrease)
B-1	Structural/Trench Excavation	(\$1,000.00)
B-2	Structural/Trench Backfill	(\$1,250.00)
B-3	Reinforced Concrete	(\$3,500.00)
B-4	Crushed Aggregate Base Course	(\$1,250.00)
B-5	Geotextile Fabric	(\$400.00)
B-6	Asphalt Paving	(\$4,850.00)
B-7	19/32" Exterior Grade Plywood	(\$512.00)
B-8	Rock Excavation	(\$930.00)
SUBTOTAL:		(\$13,692.00)

Change Order Total = (\$28,546.15)

Section V. Item #17.

This Change Order adjusts the substantial completion and final completion dates based on completion and acceptance of the project.

CHANGE IN CONTRACT	PRICE:	CHANGI	E IN CONTRACT TIMES:	
Original Contract Price:		Original Contract Times	: Working days X Calendar days	
		_	pletion date: 5/12/2024	
\$ 2,177,562.00			payment (days or date): <u>8/10/2024</u>	
[Increase] [Decrease] from previously approved Change Orders No.		[Increase] [Decrease] fro	om previously approved Change Orders	
		Substantial com	pletion (days): 292	
\$		Ready for final	payment (days): <u>202</u>	
Contract Price prior to this Change	Order:	Contract Times prior to t	his Change Order:	
		Substantial com	pletion date: <u>2/28/2025</u>	
\$ 2,177,562.00		Ready for final	payment (days or date): 2/28/2025	
[Increase] [Decrease] of this Chang	e Order:	[Increase] [Decrease] of	this Change Order:	
		Substantial com	pletion (days or date): 10/7/2025	
\$ (28,546.15)		Ready for final	payment (days or date): 10/7/2025	
Contract Price incorporating this Cl	hange Order:	Contract Times with all	approved Change Orders:	
		Substantial com	pletion date:10/7/2025	
\$ 2,149,015.85		Ready for final payment (days or date):10/7/2025		
RECOMMENDED:	ACCEPTE	D:	ACCEPTED:	
By: Colon	Ву:		ACCEPTED:	
Engineer (Authorized Signature)	Owner (Au	thorized Signature)	Contractor (Authorized Signature)	
Date: 10/3/2025	Date:		Date: 16/3/35	
Approved by Funding Agency (if applicable):			Date:	