

# HEALTH & RECREATION COMMITTEE

City of Kaukauna  
**Council Chambers**  
Municipal Services Building  
144 W. Second Street, Kaukauna



Monday, July 15, 2024 at 6:15 PM

## AGENDA

### In-Person and Remote Teleconference via ZOOM

1. Correspondence.
2. Discussion Topics.
  - [a.](#) Temporary Class B License to Fox Cares Foundation for Bike to the Beat on August 3, 2024 at the Grignon Mansion.
  - [b.](#) Special Event Application and Amplified Music Request to Michael Jarosinski for the Community Appreciation Event on July 24, 2024 from 11 am to 2 pm at the Bank of Kaukauna.
  - [c.](#) Bounce House Request to Amy Brick, Kaukauna Utilities on August 8, 2024 at La Follette Park.
  - [d.](#) Temporary Class B License to Kaukauna Lion's Club on August 9 - 10, 2024 for the Kaukauna Music Festival.
  - [e.](#) Amplified music request from John Moore, Kaukauna Lion's Club for the Kaukauna Music Festival at Hydro Park on August 9 from 4-11 PM and August 10 from 12-10:30 PM.
3. Adjourn.

## NOTICES

Notice is hereby given that a majority of the City Council will be present at the meeting of the Health and Recreation Committee scheduled for Monday, July 15, 2024 at 6:15 P.M. to gather information about a subject over which they have decision making responsibility.

**IF REQUESTED THREE (3) DAYS PRIOR TO THE MEETING, A SIGN LANGUAGE INTERPRETER WILL BE MADE AVAILABLE AT NO CHARGE.**

## **MEETING ACCESS INFORMATION:**

You can access this meeting by one of three methods: from your telephone, computer, or by an app. Instructions are below.

To access the meeting by telephone:

1. Dial 1-312-626-6799
2. When prompted, enter Meeting ID 234 605 4161 followed by #
3. When prompted, enter Password 54130 followed by #

To access the meeting by computer:

1. Go to <http://www.zoom.us>
2. Click the blue link in the upper right hand side that says Join a Meeting
3. Enter Meeting ID 234 605 4161
4. Enter Password 54130
5. Allow Zoom to access your microphone or camera if you wish to speak during the meeting

To access the meeting by smartphone or tablet:

1. Download the free Zoom app to your device
2. Click the blue button that says Join a Meeting
3. Enter Meeting ID 234 605 4161
4. Enter Password 54130
5. Allow the app to access your microphone or camera if you wish to speak during the meeting

\*Members of the public will be muted unless there is an agenda item that allows for public comment or if a motion is made to open the floor to public comment.\*

## Application for Temporary Class "B" / "Class B" Retailer's License

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

FEE \$ \_\_\_\_\_

Application Date: 06/18/2024

☐ Town ☐ Village ☒ City of Kaukauna

County of Outagamie

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

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

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

at the premises described below during a special event beginning 08/03/2024 and ending 08/03/2024 and agrees to comply with all laws, resolutions, ordinances and regulations (state, federal or local) affecting the sale of fermented malt beverages and/or wine if the license is granted.

### 1. Organization (check appropriate box) →

- ☒ Bona fide Club ☐ Church ☐ Lodge/Society  
☐ Veteran's Organization ☐ Fair Association or Agricultural Society  
☐ Chamber of Commerce or similar Civic or Trade Organization organized under ch. 181, Wis. Stats.

(a) Name Fox Cares Foundation

(b) Address 3401 E Calumet St. Appleton WI 54915

(Street)

☐ Town ☐ Village ☐ City

(c) Date organized 06/16/2016

(d) If corporation, give date of incorporation 06/16/2016

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

(f) Names and addresses of all officers:

President Bruce Kotarek 1605 Rustic Way, Green Bay, WI 54313

Vice President John Wanie 3524 S. Bobolink Lane, Appleton, WI 54915

Secretary Amanda Brown N2007 Municipal Drive, Greenville, WI 54942

Treasurer James Kilsdonk 772 Blackmoor Circle, Neenah, WI 54956

(g) Name and address of manager or person in charge of affair: Cathy Harvath - Fox Cares Foundation Executive Director.

3401 E Calumet St. Appleton WI 54915

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

(a) Street number Grignon Mansion 1313 Augustine Street Kaukauna, WI 54130

(b) Lot \_\_\_\_\_ Block \_\_\_\_\_

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

(d) If part of building, describe fully all premises covered under this application, which floor or floors, or room or rooms, license is to cover: Front Lawn only, not inside premises

### 3. Name of Event

(a) List name of the event Bike To The Beat

(b) Dates of event 08/03/2024

### DECLARATION

An officer of the organization, declares under penalties of law that the information provided in this application is true and correct to the best of his/her knowledge and belief. Any person who knowingly provides materially false information in an application for a license may be required to forfeit not more than \$1,000.

Officer \_\_\_\_\_

(Signature / Date)

6/18/24

Fox Cares Foundation

(Name of Organization)

Date Filed with Clerk \_\_\_\_\_

Date Reported to Council or Board \_\_\_\_\_

Date Granted by Council \_\_\_\_\_

License No. \_\_\_\_\_

## Additional Information

**May be Granted and Issued only to** (secs. 125.26(6), and 125.51(10), Wis. Stats.):

- (1) Bona fide clubs.
- (2) State, county, or local fair associations, or agricultural societies.
- (3) Churches, lodges, or societies that have been in existence for at least 6 months prior to the date of application.
- (4) Posts of veterans organizations.
- (5) Chambers of commerce or similar civic or trade organizations organized under ch. 181, Wis. Stats.

**Application:**

- (1) Filing: In writing, for each event, on Form AT-315.
- (2) The local licensing authority may act on application or authorize an official or body of the municipality to issue the license. (secs. 125.26(1) and 125.51(10), Wis. Stats.)
- (3) The written application shall be filed with the clerk of the municipality in which premises are located:

Class "B" (Beer):

- a. The governing body shall establish any waiting period before granting of a license for events lasting less than 4 days (sec. 125.04(3)(f), Wis. Stats.)
- b. At least 15 days prior to the granting of the license for events lasting 4 or more days.

"Class B" (Wine):

The application shall be filed with the clerk of the local municipality in which the event will be held at least 15 days prior to the granting of the license.

- (4) Seller's Permit: (sec. 77.54 (7m), Wis. Stats.), provides an exemption from Wisconsin sales and use taxes relating to **certain sales by a nonprofit organization**. Check the box if your organization qualifies for the exemption and therefore is not required to hold a seller's permit.
- (5) Publication: Not required. (sec. 125.04(3)(g), Wis. Stats.)

**Fee:** Determined by the municipality, but may not exceed \$10. (Exception: No additional fee may be charged if organization is applying for both a Temporary Class "B" and a Temporary "Class B" license for the same event.) (secs. 125.26(6) and 125.51(10), Wis. Stats.)

**Duration:** The day, or consecutive days, that the specified event is in progress. A municipality may issue up to 20 licenses to the same licensee for a single event, if each license is issued for the same date and time. (sec. 125.51(10)(b), Wis. Stats.)

**Restrictions:**

- (1) License may not be issued to individuals. (secs. 125.02 (14), 125.26(6), 125.51(10), Wis. Stats.)
- (2) Licenses to organizations, other than ex-servicemen's organizations, can be issued only for a picnic or similar gathering. (secs. 125.26(6) and 125.51(10), Wis. Stats.)
- (3) License may cover either a specified area or the entire picnic grounds. (secs. 125.26(6) and 125.51(10), Wis. Stats.)
- (4) License issued to a county or district fair must cover the entire fairgrounds (secs. 125.26(6) and 125.51(10), Wis. Stats.)
- (5) No license to clubs having any indebtedness to any wholesaler for more than 15 days for beer (sec. 125.33(7), Wis. Stats.) and 30 days for wine (s. 125.69(4)(b), Wis. Stats.)
- (6) Licensed operator(s) must be present at all times (secs. 125.17, 125.26(6), 125.32(2) - Beer; 125.17, 125.51(10), 125.68(2) - Wine; Wis. Stats.)
- (7) The licensed club, club members, or any other persons are not permitted to possess intoxicating liquor on licensed premises on the Temporary Class "B"/"Class B" licensed picnic area. (sec. 125.32(6), Wis. Stats.)
- (8) Not more than 2 wine licenses may be issued to any club, county or local fair association, agricultural association, church, lodge, society, chamber of commerce or similar civic or trade organization or veterans' post in any 12 month period. A municipality may issue up to 20 wine licenses to the same licensee if: 1) each license is issued for the same date and times, 2) the licensee is the sponsor of an event held at multiple locations within the municipality on this date and at these times, 3) an admission fee is charged for participation in the event and no additional fee is charged for service of alcohol beverages at the event, and 4) within the immediately preceding 12-month period, the municipality has issued these multiple licenses for fewer than 2 events. In addition, each event for which multiple licenses are issued shall count as one license toward the 2-license limit. (sec. 125.51(10), Wis. Stats.)
- (9) Licensed organizations must purchase their alcohol beverages only from permitted Wisconsin wholesalers, breweries and brewpubs. (secs. 125.33(6), and 125.69(6), Wis. Stats.)

UPDATED 04.01.2021



## SPECIAL EVENT APPLICATION FORM

EVENT APPLICATION MUST BE SUBMITTED AT LEAST 30 DAYS IN ADVANCE OF AN EVENT

### SECTION 1 – APPLICANT INFORMATION

Information about the person applying to have a special event or applying on behalf of an organization.

Name: *MICHAEL J. JAROSINSKI*

Date of Birth: \*Event organizers must be at least 18 years old. *06/25/1985*

Address: *264 W. Wisconsin Ave - KAUKAUNA, WI 54130*

Phone Number: *920-639-1581*

Email Address: *Mjarosinski@bankofkaukauna.com*

### SECTION 2 – ORGANIZATION INFORMATION

Information about the organization having the special event, if applicable.

Organization's Name: *Bank of Kaukauna*

Organization's Address: *264 W. Wisconsin Ave. Kaukauna.com*

Organization's Phone Number: *920-766-4674*

Organization's Email Address or Website: *www.bankofkaukauna.com*

Applicant's Relationship to Organization: *Employee*

### SECTION 3 – EVENT INFORMATION

Name of Event: *Community Appreciation*

Event Location: *Bank of Kaukauna*

Event Date: \*If a multi-day event, please list all days. *July 24th*

Event Start Time - End Time: *11am - 2pm*

Security Contact Name and Phone Number: \*The name and contact information of the individual who emergency responders may contact in case of an emergency during the event.

*Mindy Casper - 920-309-0930*

Total Anticipated Attendance for Event: *200*

Additional Event Information (Purpose, Activity, Who Can Participate, whether this is a First-Time event, etc.): *open to all in the community*

#### SECTION 4 – APPLICANT CHECKLIST

Applicant is responsible for contacting all necessary City departments and for obtaining all required reservations, permits, licenses, and variances. \*Please note that some permits require Common Council or committee approval and may take up to two weeks to be considered and approved.

##### General Information:

1. Will food be prepared and/or served at the event? YES ☒ NO ☐
2. Will there be a band or amplified music/noise? YES ☒ NO ☐
3. Will there be portable restrooms? YES ☒ NO ☒
4. Do you have proper insurance for your event and have you provided it to the City?  
\*Insurance coverage is required for all events held in the City and a certificate of insurance must be provided to the City if your event involves more than 250 attendees.  
YES ☐ NO ☒

##### Fire Department Information: (920) 766-6320

1. Will the event be held indoors? YES ☐ NO ☒
2. Will a tent or temporary structure be erected? YES ☒ NO ☐
3. Will there be a tent larger than 200 SF? YES ☒ NO ☐
4. Will fireworks/pyrotechnics be used during the event? YES ☐ NO ☒

**Street and Parks Department: (920) 766-6337**

- |   |   |  |
|---|---|--|
| 1. Are you requiring street closure for the event?    | YES <input checked="" type="checkbox"/> | NO <input type="checkbox"/>            |
| 2. Are you providing your own barricades?             | YES <input type="checkbox"/>            | NO <input checked="" type="checkbox"/> |
| 3. Did you include a map of the event location/route? | YES <input checked="" type="checkbox"/> | NO <input type="checkbox"/>            |
| 4. For park events, have you reserved the park?       | YES <input type="checkbox"/>            | NO <input checked="" type="checkbox"/> |
| 5. Will there be rides at the event?                  | YES <input type="checkbox"/>            | NO <input checked="" type="checkbox"/> |

**Police Department: (920) 766-6333**

- |  |   |  |
|--|---|--|
| 1. Do you have a plan for medical emergencies?   | YES <input checked="" type="checkbox"/> | NO <input type="checkbox"/>            |
| 2. Is security needed for the event?             | YES <input type="checkbox"/>            | NO <input checked="" type="checkbox"/> |
| 3. Will the event need any parking restrictions? | YES <input type="checkbox"/>            | NO <input checked="" type="checkbox"/> |

**City Clerk's Office: (920) 766-6300**

- |   |                              |  |
|---|------------------------------|--|
| 1. Will alcoholic beverages be served/sold? | YES <input type="checkbox"/> | NO <input checked="" type="checkbox"/> |
|---|------------------------------|--|

**Section 5 – Insurance Requirements**

Insurance coverage will be required for every special event held in the City. Event organizers must provide the City with a Certificate of Insurance if the event involves more than 250 people, you request a street closure, or you are bringing additional items/structures into the public premises. Proof of coverage MUST include naming the City of Kaukauna as an additional insured party. The amount and type of insurance coverage varies, although \$1 million - \$2 million is a typical level.

**General Liability Coverage:**

1. Commercial General Liability
  - a. \$1,000,000 general aggregate – per project
  - b. \$1,000,000 products – completed operations aggregate
  - c. \$1,000,000 personal injury and advertising injury
  - d. \$1,000,000 each occurrence limit
2. Claims made form of coverage is not acceptable.

3. Insurance must include:
  - a. Premises and Operations Liability
  - b. Contractual Liability including coverage for the joint negligence of the City of Kaukauna, its officers, Council members, agents, employees, authorized volunteers and the named insured
  - c. Personal injury
  - d. Explosion, collapse, and underground coverage
  - e. Products/Completed Operations
  - f. The general aggregate must apply separately to this project/location
4. Additional Provisions
  - a. Additional Insured – On the General Liability coverage, Business Automobile coverage, Aircraft Liability and Liquor Liability.
  - b. Endorsement – The Additional Insured Policy endorsement must accompany the Certificate of Insurance.
  - c. Certificates of Insurance – A copy of the Certificate of Insurance must be on file with the City of Kaukauna.
  - d. Notice – City of Kaukauna requires 30-day written notice of cancellation, non-renewal, or material changes in the insurance coverage.
  - e. Carriers – The insurance coverage required must be provided by an insurance carrier with the "best" rating of "A-VII" or better. All carriers shall be admitted carriers in the State of Wisconsin.

### Section 5 – Indemnification and Disclaimer

By signing below, I certify that I am at least 18 years of age. My signature further confirms that I understand the filing of this application does not ensure the issuance of a Special Event license. I will be responsible for ensuring the event and event participants comply with all applicable City ordinances, traffic rules, park rules, state health laws, fire codes and liquor licensing regulation and any other applicable laws, rules, and regulations. I confirm that I am authorized to apply for this Special Event License on behalf of the organization hold the event (if applicable) and that the information contained in this application is true to the best of my knowledge. I understand that intentionally providing false or misleading information in this Application may lead to civil or criminal penalties.

Indemnification: By signing below, I acknowledge that for good and valuable consideration, I, the applicant, on behalf of myself and the organization, if applicable, agree to indemnify, defend, and hold harmless the City of Kaukauna and its officers, officials, employees, and agents from and against any and all liability, loss, damage, expenses and costs, including attorney fees, arising out of the activities performed as described herein, caused in whole or in part by any negligent act or omission of the applicant/organization, anyone directly or indirectly employed by any of them or anyone whose acts any of them may be liable, except where caused by the sole negligence or willful misconduct of the City.

By signing below, I agree to follow any state and/or local guidelines in place to prevent the spread of COVID-19.

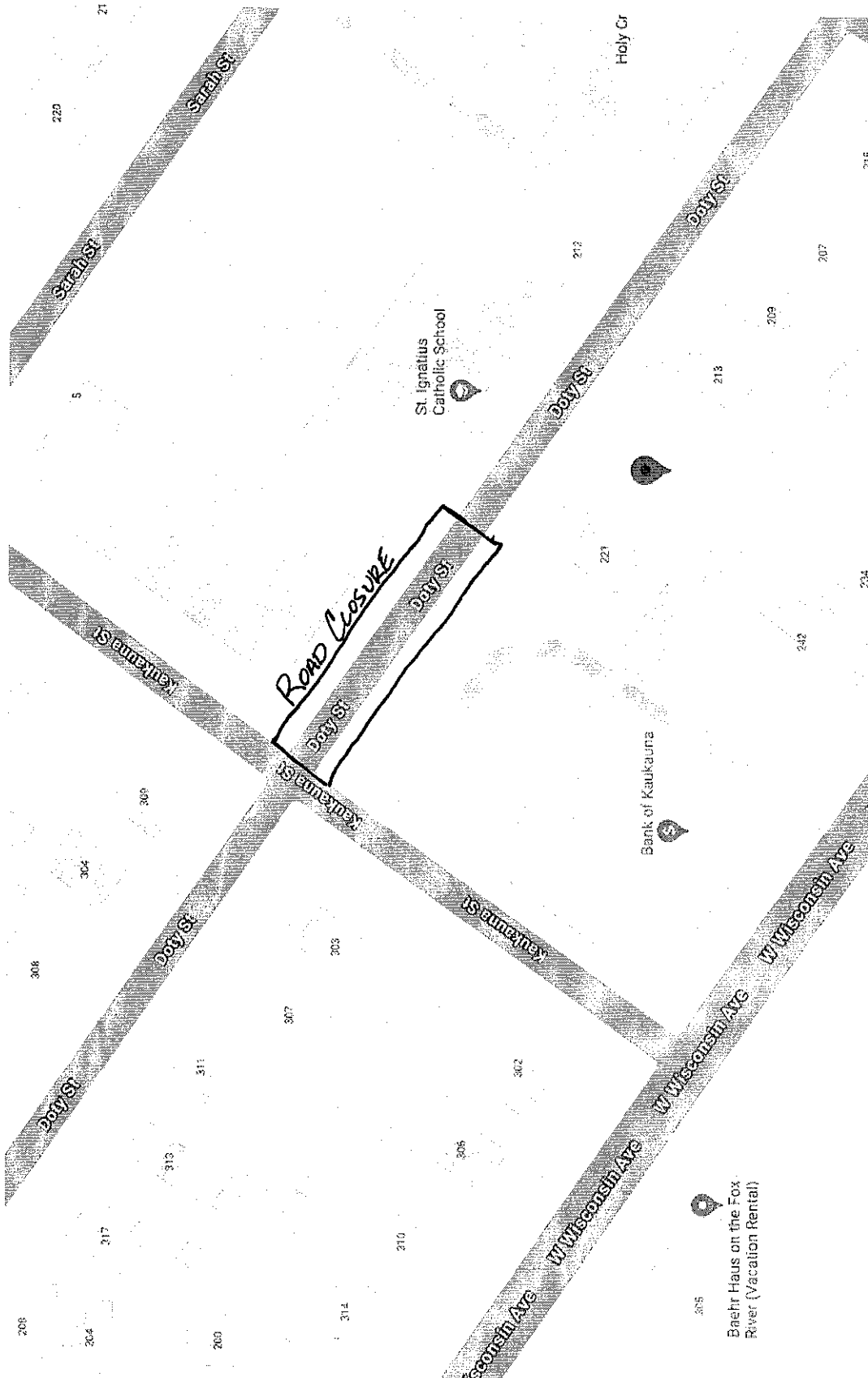
Signature of Applicant:



Printed name of Applicant:

MICHAEL J. JAROSINSKI





- Road closure will not block any driveways

Hi Terri,

We would like to have a bounce house at our summer picnic on August 8<sup>th</sup> at La Follette Park.

Thanks and have a great weekend!

**Amy Brick**

Administrative/HR Coordinator

**KAUKAUNA UTILITIES**

920-462-0227

[abrick@ku-wi.org](mailto:abrick@ku-wi.org)

[www.kaukaunautilities.com](http://www.kaukaunautilities.com)

Customer Driven / Community Minded / Environmentally Responsible

## Application for Temporary Class "B" / "Class B" Retailer's License

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

FEE \$ 10.<sup>00</sup>

Application Date: 7/10/2024

☐ Town ☐ Village ☒ City of Kaukauna

County of Outagamie

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

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

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

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

**1. Organization** (check appropriate box) →

☒ Bona fide Club

☐ Church

☐ Lodge/Society

☐ Veteran's Organization

☐ Fair Association or Agricultural Society

☐ Chamber of Commerce or similar Civic or Trade Organization organized under ch. 181, Wis. Stats.

(a) Name Kaukauna Lions Club

(b) Address \_\_\_\_\_

(Street)

☐ Town

☐ Village

☒ City

(c) Date organized June 1936

(d) If corporation, give date of incorporation \_\_\_\_\_

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

(f) Names and addresses of all officers:

President Al Thiede WS904 Easter Lily Dr. Appleton 54915

Vice President Pat Goff N9440 Evan St. Appleton, WI 54915

Secretary Katie Goff " " " " "

Treasurer Dennis Wittman 1905 Thietea Ave Kaukauna, WI 54130

(g) Name and address of manager or person in charge of affair: John P. Moore

2381 Fairway Dr. Kaukauna, WI 54130

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

(a) Street number Hydro Park 100 - Brooks Ave.

(b) Lot \_\_\_\_\_ Block \_\_\_\_\_

(c) Do premises occupy all or part of building? No

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

**3. Name of Event**

(a) List name of the event Kaukauna Music Festival

(b) Dates of event 8/9 and 8/10 2024

### DECLARATION

An officer of the organization, declares under penalties of law that the information provided in this application is true and correct to the best of his/her knowledge and belief. Any person who knowingly provides materially false information in an application for a license may be required to forfeit not more than \$1,000.

Officer

John P. Moore  
(Signature / Date)

Kaukauna Lions  
(Name of Organization)

Date Filed with Clerk 7-10-2024

Date Reported to Council or Board 7-15-2024

Date Granted by Council \_\_\_\_\_

License No. \_\_\_\_\_



## REQUEST FOR AMPLIFIED MUSIC

City of Kaukauna  
144 W Second St  
Kaukauna, WI 54130

Applicant Information

Name: John P. Moore Date of Birth: 12/19/1947  
 Address: 2381 Fairway Dr. Kaukauna, WI Phone number: 920-213-3469  
 Organization Name, if applicable: Kaukauna Lions  
 Email address: jmoore2@new.rr.com

Event Information

Name of Event: Kaukauna Music Festival  
 Event location (s): Hydro Park Date of Event: 8/9-8/10, 2024  
 Event Start time- End time: Fri 4:00-11:00 Sat. 12-10:30  
 Number of people attending: 800 est.

This application will be formally reviewed by the Health and Recreation Committee.  
Please allow up to 3 weeks for a response. If you do not hear from City staff: request is approved.

For questions: [tvosters@kaukauna-wi.org](mailto:tvosters@kaukauna-wi.org)