



## ORDINANCE, LICENSES AND PERMITS COMMITTEE AGENDA

May 13, 2025 at 6:00 PM

303 Mansion Street Mauston, WI

1. **Call to Order/Roll Call**
2. **Discussion and action relating to Minutes**
  - a. April 22, 2025
3. **Discussion and recommendation regarding Heinie's Tavern request for a Temporary Amendment to Premises, to include a fenced in 10 X 20 tent in back parking lot for an event on May 17, 2025.**
  - a. Application request
4. **Adjourn**

### NOTICE:

*It is possible that action will be taken on any of the items on the agenda and that the agenda may be discussed in any order. It is also possible that a quorum of other governmental bodies of the municipality may be in attendance at the above-stated meeting to gather information; no action will be taken by any governmental body at the above-stated meeting other than the governmental body specifically referred to above in this notice.*

*Also, upon reasonable notice, efforts will be made to accommodate the needs of disabled individuals through appropriate aids and services. For additional information or to request this service, contact City Deputy Clerk Nicole Lyddy (608) 747-2706.*

*Any member of the public wishing to join the meeting telephonically should call City Hall by 4pm the day of the meeting. Staff will be happy to provide instructions on joining the meeting by phone. City Hall main number: 608-847-6676*



## ORDINANCE, LICENSES, AND PERMITS COMMITTEE MINUTES

April 22, 2025 at 6:00 PM

303 Mansion Street Mauston, WI

1. **Call to Order/Roll Call:** The Ordinance, Licensing, and Permits Committee was called to order on April 22, 2025, by member Jim Allaby at 6:00 p.m. Attending members were Jim Allaby, Courtney Ray and Leanna Hagen. Mayor Darryl Teske, Administrator Daron Haugh, and Deputy Clerk Nicole Lyddy were also present.
2. **Appointment of Chair:** Motion made by Hagen, seconded by Ray, to appoint Allaby as chair. Motion carried.
3. **Appointment of Secretary:** Motion made by Hagen, seconded by Allaby, to appoint Ray as secretary. Motion carried.
4. **Minutes:** Motion made by Ray, seconded by Hagen, to approve minutes of April 8, 2025. Motion carried.
5. **Carl's Bright Spot's Request for a Temporary Amendment to Premises:** Motion made by Ray, seconded by Hagen, to recommend council approval of the amendment to premises. Motion carried.
6. **Adjourn:** Motion made by Ray, seconded by Hagen, to adjourn. Motion carried at 6:01 p.m.

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Chair

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Date

Form  
**AB-200**

## Alcohol Beverage License Application

For Municipal Use		Section 3, Item a.
Municipality	Mauston	
License Period		

License(s) Requested: (up to two boxes may be checked)

- ☐ Class "A" Beer ..... \$ .....   
 ☐ Class "B" Beer ..... \$ .....  
☐ "Class A" Liquor ..... \$ .....   
 ☐ "Class B" Liquor ..... \$ .....  
☐ "Class A" Liquor (cider only) \$ .....   
 ☐ Reserve "Class B" Liquor \$ .....  
☐ "Class C" Liquor (wine only) \$ .....

Fees	
License Fees	\$ 10
Background Check Fee	\$
Publication Fee	\$
<b>Total Fees</b>	<b>\$ 10</b>

### Part A: Premises/Business Information

1. Legal Business Name (individual name if sole proprietorship) <i>Henrie's Tavern LLC</i>		
2. Business Trade Name or DBA <i>Henrie's Tavern</i>		
3. [REDACTED]	4. Wisconsin Seller's Permit Number	
5. <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Partnership <input checked="" type="checkbox"/> Limited Liability Company <input type="checkbox"/> Corporation <input type="checkbox"/> Nonprofit Organization		
6. State of Organization <i>WI</i>	7. Date of Organization <i>6/1/2022</i>	8. Wisconsin DFI Registration Number
9. Premises Address <i>607 N Union St.</i>		
10. City <i>Mauston</i>	11. State <i>WI</i>	12. Zip Code <i>53548</i>
13. County <i>Juneau</i>	14. Governing Municipality: <input checked="" type="checkbox"/> City <input type="checkbox"/> Town <input type="checkbox"/> Village of: _____	15. Aldermanic District
16. Premises Phone <i>(608) 747-2025</i>	17. Premises Email <i>henriestavern@gmail</i>	18. Website
19. Premises Description - Describe the building or buildings where alcohol beverages are produced, sold, stored, or consumed, and related records are kept. Describe all rooms within the building, including living quarters. Authorized alcohol beverage activities and storage of records may occur only on the premises described in this application. Attach a map or diagram and additional sheets if necessary. <i>May 17, 2025 I would like to have an outside, fenced in area for alcohol. It would be for one day only. This is to provide additional seating area for a motorcycle ride we are a step for.</i>		
20. Mailing Address (if different from premises address) <i>10X20 tent in back parking lot with fence around it</i>		
21. City	22. State	23. Zip Code

### Part B: Questions

1. Has the business (sole proprietorship, partnership, limited liability company, or corporation) been convicted of violating federal or state laws or local ordinances? Exclude traffic offenses unless related to alcohol beverages. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, list the details of violation below. Attach additional sheets if necessary.		
Law/Ordinance Violated	Location	Trial Date
Penalty Imposed		Was sentence completed? . . . . <input type="checkbox"/> Yes <input type="checkbox"/> No
Law/Ordinance Violated	Location	Trial Date
Penalty Imposed		Was sentence completed? . . . . <input type="checkbox"/> Yes <input type="checkbox"/> No

2. Are charges for any offenses pending against the business? Exclude traffic offenses unless related to alcohol beverages. ☐ Yes ☒ No

If yes, describe the nature and status of pending charges using the space below. Attach additional sheets as needed.

3. Is the applicant business or any of its officers, directors, members, agent, employees, owners, or other related individuals or entities a restricted investor with any interest in an alcohol beverage producer or distributor? ☐ Yes ☒ No  
If yes, provide the name of the restricted investor and describe the nature of the interest.

4. Is the applicant business owned by another business entity? ☐ Yes ☒ No  
If yes, provide the name(s) and FEIN(s) of the business entity owners below. Attach additional sheets as needed.

4a. Name of Business Entity

4b. Business Entity FEIN

5. Have the partners, agent, or sole proprietor satisfied the responsible beverage server training requirement for this license period? Submit proof of completion. ☒ Yes ☐ No
6. Is the applicant business indebted to any wholesaler beyond 15 days for beer or 30 days for liquor/wine? ☐ Yes ☒ No
7. Does the applicant business owe past due municipal property taxes, assessments, or other fees? ☐ Yes ☒ No

**Part C: Individual Information**

List the name, title, and phone number for each person or entity holding the following positions in the applicant business or businesses listed in Part B, Question 4: sole proprietor, all officers, directors, and agent of a corporation or nonprofit organization, all partners of a partnership, and all members, managers, and agent of a limited liability company. Attach additional sheets if necessary.

Include Form AB-100 for each person listed below. Corporations and LLCs must appoint an agent by including Form AB-101.

Last Name	First Name	Title	
Jones	Chad	owner	
Jones	Amy	owner	

**Part D: Attestation**

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

- sole proprietor • one general partner of a partnership • one corporate officer • one member of an LLC

**READ CAREFULLY BEFORE SIGNING:** Under penalty of law, I have answered each of the above questions completely and truthfully. I agree that I am acting solely on behalf of the applicant business and not on behalf of any other individual or entity seeking the license. Further, I agree that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another individual or entity. I agree to operate this business according to the law, including but not limited to, purchasing alcohol beverages from state authorized wholesalers. I understand that 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. I understand that any license issued contrary to Wis. Stat. Chapter 125 shall be void under penalty of state law. 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 Jones		First Name Amy		M.I. J
Title owner		Email heinies.tavern@gmail		
Signature Amy Jones			Date	

**Part E: For Clerk Use Only**

Date Application Was Filed With Clerk 5/6/25	License Number	Date License Granted	Date License Issued
Signature of Clerk/Deputy Clerk		Date Provisional License Issued (if applicable)	