ORDINANCE, LICENSES, AND PERMITS COMMITTEE MEETING AGENDA

July 14, 2026 at 6:20 PM

303 Mansion Street Mauston, WI

1. **Call to Order/Roll Call**
2. **Appointment of Secretary**
3. **Discussion and Action Regarding Minutes**
   - **a.** June 9, 2026
4. **Discussion and Recommendation Regarding Ordinance 2026-2086 and the 2026-2034 Comprehensive Plan**
   - **a.** Ordinance 2026-2086
5. **Discussion and Recommendation Regarding Burton-Koppang American Legion Change of Agent**
   - **a.** Change of Agent
6. **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 Carole Wolff at (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 MEETING MINUTES

June 09, 2026 at 5:30 PM

303 Mansion Street Mauston, WI

1. **Call to Order/Roll Call:** The Ordinance, Licenses, and Permits Committee meeting was called to order on June 9, 2026, at 5:40 p.m. by Chair Jim Allaby. Members present were Jim Allaby and Leanna Hagen. Also present were Mayor Darryl Teske, City Administrator Daron Haugh, and Deputy Clerk Carole Wolff. Absent was Vivian Gabower.
2. **Minutes:** Motion by Hagen, seconded by Allaby, to approve the May 12, 2026, minutes. Motion carried by voice vote.
3. **Alcohol License Renewals:** Motion by Allaby, seconded by Hagen, to recommend Council approval of the annual alcohol license renewals as presented. Motion carried by voice vote.
4. **Closed Session:** Motion by Hagen, seconded by Allaby, to convene in closed session pursuant to Wis. Stat. § 19.85(1)(b). The Committee entered closed session at 5:55 p.m.
   a. Appeal of Rebalaine Dick for the Denial of Operator License
5. **Reconvene in Open Session:** Motion by Allaby, seconded by Hagen, to reconvene in open session at 6:11 p.m. Motion carried by voice vote.
6. **Result of Closed Session:** Chair Allaby, recommended that the appeal of Rebalaine Dick regarding the denial of an operator license be forwarded to the Common Council for consideration. No action was taken by the Committee.
7. **Adjourn:** Motion by Hagen, seconded by Allaby, to adjourn. Motion carried by voice vote. Meeting adjourned at 6:14 p.m.

_____ _____

Chair Date

ORDINANCE NO. 2026-2086

An Ordinance Adopting the *City of Mauston 2026-2036*

Comprehensive Plan

City of Mauston, Juneau County, Wisconsin

BE IT ORDAINED by the Common Council, City of Mauston, Juneau County, Wisconsin as follows:

WHEREAS, pursuant to Wis. Stats. §§62.23(2) and (3), the City of Mauston is authorized to prepare and adopt a comprehensive plan as defined in Wis. Stats. §§ 66.1001(1)(a) and 66.1001(2); and

WHEREAS, the City Plan Commission fostered public participation in every stage of preparing the comprehensive plan as required by Wis. Stats. § 66.1001(4)(a); and

WHEREAS, on April 23, 2026, the City of Mauston Plan Commission, adopted Resolution 2026-03 recommending to the Common Council the adoption of the Comprehensive Plan, containing all of the elements specified in Wis. Stats. § 66.1001(2); and

WHEREAS, on June 9, 2026, the city held a public hearing on the draft comprehensive plan and this ordinance in compliance with the requirements of Wis. Stats. § 66.1001(4)(d);

NOW, THEREFORE BE IT RESOLVED, on a motion duly made and seconded, the Common Council of the City of Mauston, Juneau County, Wisconsin, does, by enactment of this ordinance, formally adopt the document titled *"CITY OF MAUSTON 2026-2036 COMPREHENSIVE PLAN,"* pursuant to Wis. Stats. § 66.1001 (4)(c).

NOW, THEREFORE BE IT FURTHER RESOLVED, that this ordinance shall take effect upon passage by a majority vote of the members of the Common Council and publication as required by law. APPROVED:

ATTEST:

_____ _____

Darryl D.D. Teske, Mayor Daron Haugh, Administrator

- Date of Plan Commission Recommendation (if applicable): 4/23/26
- Date of Public Hearing (if applicable): 6/9/26
- Date of Readings: _____ _____
- Date of Adoption: _____
- Votes: _____
  - Ayes___ Nays___ Absent___Abstention _____
- Date of Publication: _____

WH: 39782 Save Print Clear

Section 5, Item a.

Form **AB-100**

Alcohol Beverage Individual Questionnaire

Date

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

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

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

Part A: Business Information

1. Legal Business Name (individual name if sole proprietor): Burton-Kopping American Legion Post 81
2. Business Trade Name or DBA:
3. Entity Type *(check one)*: ☐ Sole Proprietor ☐ Partnership ☐ Limited Liability Company ☐ Corporation ☒ Nonprofit Organization

Part B: Individual Information

1. Last Name	2. First Name	3. M.I.
Balderston	Francis	J

4. Relationship to Business (Title)	5. Email	6. Phone
Finance Officer	[redacted]	

7. Home Address: [redacted]

8. City	9. State	10. Zip Code	11. Date of Birth
Mauston	WI	53948	[redacted]

12. Driver's License/State ID Number	13. Driver's License/State ID State of Issuance
[redacted]	Wisconsin

Part C: Address History

1. Do you currently live in Wisconsin? ☒ Yes ☐ No

   If yes, provide the month and year when you permanently moved to Wisconsin (MM/YYYY): 06/2020

2. List in chronological order all of your addresses **within the last 5 years**. Attach additional sheets if necessary.

	City	State	Zip Code
Previous Address 1: [redacted]	Mauston	WI	53948
Previous Address 2			
Previous Address 3			
Previous Address 4			
Previous Address 5			

3. List all states and counties you have lived in as an adult. Attach additional sheets if necessary.

State	County	State	County	State	County	State	County
State	County	State	County	State	County	State	County

Continued

4

Part D: Criminal History

1. Have you ever been convicted of any offenses (excluding traffic offenses unless related to alcohol beverages) for violation of any federal, Wisconsin, or another state's laws or of any 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	Location	Conviction Date

Penalty Imposed	Was sentence completed?..... ☐ Yes ☐ No

Law/Ordinance Violated	Location	Conviction Date

Penalty Imposed	Was sentence completed?..... ☐ Yes ☐ No

Law/Ordinance Violated	Location	Conviction Date

Penalty Imposed	Was sentence completed?..... ☐ Yes ☐ No

2. Are charges for any offenses currently pending against you (excluding traffic offenses unless related to alcohol beverages) for violation of any federal, Wisconsin, or another state's laws or any county or municipal ordinances?..... ☐ Yes ☒ No

If yes to question 2, describe nature and status of pending charges using the space below. Attach additional sheets as needed.

Part E: Attestation

READ CAREFULLY BEFORE SIGNING: Under penalty of law, I have answered each of the above questions completely and truthfully. I certify that I am not prohibited from participating in this business due to any involvement in another tier of the alcohol beverage industry as a restricted investor. 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.

Signature	Date
[redacted]	7-3-26

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Section 5, Item a.

Form
AB-101

Alcohol Beverage Appointment of Agent

Date

Agent Type *(check one)*

☐ Original (no fee) ☑ Successor ($10 fee for municipal licensees only)

Part A: Business Information

1. Legal Business Name (individual name if sole proprietor)
Berton-Koppang American Legion Post 81

2. Business Trade Name or DBA

3. Entity Type *(check one)*
☐ Limited Liability Company ☐ Corporation ☑ Nonprofit Organization

4. Alcohol Beverage Business Authorization *(check one)*
☐ Municipal Retail License ☐ State Permit

5. If successor agent, provide State Permit or Municipal Retail License Number
4275

6. Describe the reason for appointing a successor agent, if successor is checked above.
Agent was stepped down and resigned his position.

Part B: Agent Information

1. Last Name	2. First Name	3. M.I.
Balderston	Francis	J

4. Email [redacted]

5. Phone [redacted]

6. [redacted]

7. City	8. State	9. Zip Code	10. Date of Birth
Mauston	Wi	53948	[redacted]

11. Driver's License/State ID Number [redacted]

12. Driver's License/State ID State of Issuance
Wisconsin

Part C: Agent Questions

1. Have you satisfied the responsible beverage server training requirement? Submit proof of completion. ☑ Yes ☐ No

2. Have you completed Form AB-100, *Alcohol Beverage Individual Questionnaire* (licensee) or Form AB-300, *Alcohol Beverage Personal Questionnaire* (permittee)? ☑ Yes ☐ No

3. Have you been a Wisconsin resident for at least 90 continuous days? See instructions for exceptions. ☑ Yes ☐ No

Continued →

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 liability 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.

Last Name	First Name	M.I.
Balderston	Francis	J

Title	Email	Phone
Finance Officer	[redacted]	

Signature	Date
[redacted]	7-3-26

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.I.
Balderston	Francis	J

Signature	Date
[redacted]	7-3-26