

### **OFFICIAL PUBLIC NOTICE**

### MEETING OF THE PUBLIC SAFETY COMMITTEE

Tuesday, March 05, 2024 at 5:30 PM

SMALL CONFERENCE ROOM, MUNICIPAL BUILDING; 450 S. MAIN STREET; RICHLAND CENTER, WI 53581

### **AGENDA**

**CALL TO ORDER** Roll Call for the meeting, determine whether a quorum is present; determine whether the meeting has been properly noticed.

### **APPROVAL OF MINUTES**

1. PSC Minutes for 02-06-2024

#### APPROVAL OF OPERATOR LICENSES

### **DISCUSSION AND ACTION ITEMS**

- "Class B" Liquor License Application from RC Tacos, LLC, Carolina Rodriguez agent, for 2320 US Hwy 14 E. and transfer of Class "B" Beer License from 202 S. Orange St. to 2320 US Hwy 14 E effective March 6, 2024
- 3. Temporary Class B Beer & Class B Wine License for Richland County Performing Arts Council on March 23, 2024
- 4. Picnic License Application from St. Mary of the Assumption for April 27, 2024 at 1050 N. Orange Street
- 5. Street Closure for Race for GRACE on May 18, 2024
- 6. Discussion on updating 310.03 Exceptions, to include livestock haulers who may need to keep animals on a trailer overnight or for a set time frame. 12 hour Limit.
- 7. Discussion and Action on Lighted Crosswalk Signs at selected Intersection in the City.
- 8. Discussion of 101.15(3)(a)b) (3) EFFECT OF ALTERNATE SIDE PARKING REGULATIONS UPON SPECIFIED STREETS OR PORTIONS OF STREET-as it pertains to 400 Block of N. Pearl St.

### **CHIEF OF POLICE REPORT**

Police Chief's Report 03/05/2024

**REPORTS, REQUESTS, CONCERNS** No action will be taken on any matter originating under this item.

**SET NEXT MEETING DATE** First Monday of the Month

### **ADJOURNMENT**

Posted this 1st day of March, 2024 by 4:30 PM.

Copy to the official newspaper the Richland Observer.

Aaron Joyce, City Clerk/Treasurer

PLEASE NOTE: That upon reasonable notice, a minimum of 24 hours in advance, 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 Ashley Oliphant, City Administrator at 450 S. Main St., Richland Center, WI. 53581 or call 608-647-3466. Notice is hereby given that the council members who are not members of this committee may attend this meeting so as to constitute a quorum of the city council. Any such council member attendance will be

for information gathering, discussion, and/or related purposes and will not result in the direct decision making by the city council at the committee meeting. The City of Richland Center is an equal opportunity employer, provider, and lender.



### MINUTES OF THE PUBLIC SAFETY COMMITTEE

TUESDAY, FEBRUARY 06, 2024, AT 5:30 PM

SMALL CONFERENCE ROOM, MUNICIPAL BUILDING; 450 S. MAIN STREET; RICHLAND CENTER, WI 53581

### Minutes

**CALL TO ORDER:** at 5:33pm, present, Melby, Downs, Chambers is taking the minutes. The meeting was properly noticed.

### **APPROVAL OF MINUTES**

1-2-2024 PSC Minutes, motion by Melby to approve the minutes, and waive the reading, with a correction to the spelling of Mark Chambers name. Seconded by Downs, motion carried. (3-0)

#### **APPROVAL OF OPERATOR LICENSES**

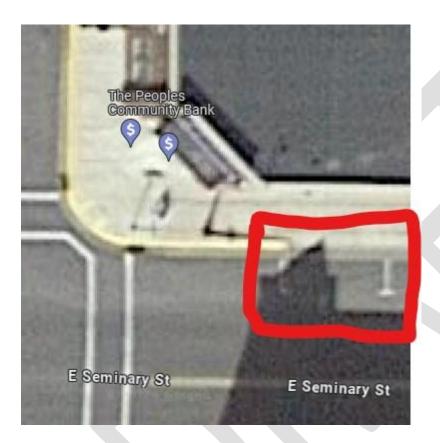
Motion by Downs to approve all the operator licenses, seconded by Melby. Motion carried.(3-0)

#### **DISCUSSION AND ACTION ITEMS**

101.09(6)(j) Authority of Public Safety Committee to Designate Handicapped Parking Zone. The Safety Committee voted to have two handicap parking stalls created and placed, one on S. Central Ave on the same side of the street as the Park Apt. building located at 213 S. Central Ave.



The second stall to be added will be in the 100 block of E. Seminary Street on the north side of the street in front of Community Peoples Bank.



A representative from the Street Department was present and informed the committee that both stalls are available, and signs can be installed using baseplate mounts.

### ASP exemptions on N. Perl Street and N. Park St.

Public representation by Mikayla Morina and Ross Gaston- 459 N. Pearl Street. Concerns are no off-street parking-receiving many ASP tickets. Committee would like to get input for Chief of Police, -Not looking for exemptions for snow emergencies. Just on days with snow. Return to agenda for 3-5-2024.

CHIEF OF POLICE REPORT: 12-2023 PD Report , 2023 Yearly Council Report

### **REPORTS, REQUESTS, CONCERNS:**

Painting crosswalks, Union and Orange Street and Mill and Orange Street

Discusses lighted crosswalk signs in various locations.

Parking one-way streets

**Snow Emergency** 

**SET NEXT MEETING DATE:** March 5<sup>th</sup> at 5:30 PM

ADJOURNMENT: Motion by Downs to adjourn at 6:18PM and seconded by Melby, motion carried. (3-0)



### Form

AT-106

# Original Alcohol Beverage License Application

				ERKS ONL	
١	Municipality	Citv	αf	Richland	Center

Item 2.

License Period - 06/30/2024

icense(s) Requested			
Class "A" Beer \$	☐ "Class A" Liquor \$	License Fees	\$160.27
Class "B" Beer \$	✓ "Class B" Liquor	Publication Fee	\$15.99
] "Class C" Wine \$	☐ "Class A" Liquor (Cider Only) \$	Background Check	\$15.00
Reserve "Class B" Liquor \$	☐ "Class B" (Wine Only) Winery \$	Total Fees	\$191.26
2. Trade Name or DBA  2. Trade Name or DBA  2. Tracos  3. Premises Address  4. County  4. County  7. Mailing Address (if different from premises)  8. FEIN  88-0854438  10. Premises Phone  (OR 383 ) 133  12. Entity Type (check one)  Sole Proprietor  Partners  13. Premises Description - Describe the including living quarters, if used, fo	me or individual's name if sole proprietorship)  5. Municipality  address)  9. Wisconsin Seller's Permit Number  456-103092392  11. Premises Email	Corporation Nor	s and records. Alcoho
this license period? Submit a copy o  2. Does the applicant business or its pa indirect interest in any alcohol bevera	orietor satisfied the responsible beverage serve f Responsible Beverage Server Training Course rtners, officers, directors, managing members, ge wholesaler or producer (e.g., brewer, brewp e below. Attach additional sheets if necessary.	e Certificateor or agent hold a direct or	Yes No

Part C: For Corporate/LLC Appli	cants Only				
1. State of Registration				2. Date of Registr	
Wisconsin 3-04-					<del></del>
<ol><li>Is the applicant business owned by a parent company below, include pare company's principal members, mana</li></ol>	ent company men	nbers in Part D, and at	tach Form AT	-103 for all of the	parent
Name of Parent Company		FEIN of Pa	rent Company		
Does the parent company or any of interest in any other alcohol bevera If yes, please explain using the spa	ge wholesaler or	r producer (e.g., brew	er, brewpub, v		ndirect Yes Z No
5. Agent's Last Name		Agent's First Name	Agent's First Name		Phone
Part D: Individual Information					
A Supplemental Questionnaire, Form AT-10	3 must be complete	ad and attached to this ar	unlication for oa	ch poreon involved i	the applicant husiness and
any parent company as indicated in Part C. or nonprofit organization, all partners of a partners of a partners.	Persons in the app	olicant business include:	sole proprietor,	all officers, directors	
List the full name, title, and phone numb	per for each perso	on below. Attach additi	onal sheets if	necessary.	
Last Name	First Name		Title		Phone
Chroma Rodinguez	Carol	Me	- OU	mer	608 475 9322
Part E: Attestation					
Who must sign this application?					
• sole proprietor • one general p	partner of a partn	ership • one cor	porate officer	one mana	iging member of an LLC
READ CAREFULLY BEFORE SIGNING that I am acting solely on behalf of the application that the rights and responsibilities confer this business according to the law, includ lack of access to any portion of a licensed and grounds for revocation of this licensed state law. I further understand that I may any person who knowingly provides materials.	oplicant business a red by the license ing but not limited to d premises during it e. I understand that be prosecuted for	and not on behalf of any (s), if granted, will not be to, purchasing alcohol be nspection will be deemed t any license issued con submitting false stateme	other individuals assigned to a severages from severages from severages from severages to altrary to Wis. Sints and affidav	I or entity seeking the another individual or state authorized who low inspection. Such tat. Chapter 125 sharts in connection with	ne license. Further, I agree entity. I agree to operate plesalers. I understand that in refusal is a misdemeanor all be void under penalty of this application, and that
Signature <b>Man</b>			Date 0/	115124	
Name (Last, First, M.I.)  Rodriguez Carol	100				
Kodriguez Carol	1 5	Emai <u>l</u>	,		Phone
owner		CR948789@	imai licon		608 475 9322
Part F: For Clerk Use Only					
Date application was filed with clerk	Date report	ed to governing body		Date provisional licer	nse issued (if applicable)
Date license granted	License nui	mber		Date license issued	
Signature of Clerk/Deputy Clerk					

### Schedule for Appointment of Agent by Corporation / Nonprofit Organization or Limited Liability Company

Submit to municipal clerk.

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent. The following questions must be answered by the agent. The appointment must be signed by an officer of the corporation/organization or one member/manager of a limited liability company and the recommendation made by the proper local official. Village To the governing body of: of Richland Center County of Richland ✓ City The undersigned duly authorized officer/member/manager of (Registered Name of Corporation / Organization or Limited Liability Company) a corporation/organization or limited liability company making application for an alcohol beverage license for a premises known as (Trade Name) to act for the corporation/organization/limited liability company with full authority and control of the premises and of all business relative to alcohol beverages conducted therein. Is applicant agent presently acting in that capacity or requesting approval for any corporation/ organization/limited liability company having or applying for a beer and/or liquor license for any other location in Wisconsin? ✓ Yes If so, indicate the corporate name(s)/limited liability company(ies) and municipality(ies). Is applicant agent subject to completion of the responsible beverage server training course? How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin? 23 years Place of residence last year (Name of Corporation / Organization / Limited Liability Company) (Signature of Officer / Member / Manager) Any person who knowingly provides materially false information in an application for a license may be required to forfeit not more than \$1,000. **ACCEPTANCE BY AGENT** \_\_\_\_\_, hereby accept this appointment as agent for the (Print / Type Agent's Name) corporation/organization/limited liability company and assume full responsibility for the conduct of all business relative to alcohol beverages conducted on the premises for the corporation/organization/limited liability company. Agent's age \_\_\_\_ (Signature of Agent) Date of birth (Home Address of Agent) APPROVAL OF AGENT BY MUNICIPAL AUTHORITY (Clerk cannot sign on behalf of Municipal Official) I hereby certify that I have checked municipal and state criminal records. To the best of my knowledge, with the available information, the character, record and reputation are satisfactory and I have no objection to the agent appointed. (Signature of Proper Local Official) (Town Chair, Village President, Police Chief)

AT-104 (R. 4-18)

### Auxiliary Questionnaire Alcohol Beverage License Application

Submit to municipal clerk.

Individual's Full Name (please print) (last name,	) (first n	ame)	(middle na	nme)
Kodriguez	Can	lina		
Home Address (street/route)	Post Office	City	State	Zip Code
2350 US hwy 14		Wichland C		53581
Cos 475 932 C	Age 40	Date of Birth 1197	7 Place of B	1
The above named individual provides the	s following information as a r	erson who is <i>Ichaek ona</i>	al·	
Applying for an alcohol beverage lice	- ,	iorachi wito to (oncon one	·/·	
. A member of a partnership which is		cohol beverage license	ı.	
/ Capling Podraucz	of 🕡	PE TROPS 14	e	
Officer Director / Member / Manager /	Agent)	(Name of Corporation, Limited L	lability Company or Nonprofi	t Organization)
which is making application for an al	cohol beverage license.			
The above named individual provides the	e following information to the	licensing authority:		
1. How long have you continuously resid			ears	
2. Have you ever been convicted of any				
violation of any federal laws, any Wis or municipality?	consin laws, any laws of any		•	Yes No
If yes, give law or ordinance violated,				103 / 140
status of charges pending. (If more re			·	
	L. C. Mariana	- U t ff:l-td-t		`
<ol><li>Are charges for any offenses present for violation of any federal laws, any \( \)</li></ol>				)
municipality?				Yes 🗾 No
If yes, describe status of charges per	nding.			<del>-</del>
4. Do you hold, are you making applicat				
organization or member/manager/age beverage license or permit?	ent of a limited liability comp		tor any other alcoho	
	Seer license	ation and Type of License/Permit		
5. Do you hold and/or are you an officer	, director, stockholder, agen	or employe of any pers	son or corporation o	r
member/manager/agent of a limited l				
brewery/winery permit or wholesale li If yes, identify.	quor, manufacturer or rectifi	er permit in the State of	Wisconsin?	Yes / No
·	Vholesale Licensee or Permittee)	was a second	(Address By City and	(County)
6. Named individual must list in chronol	•	ers.	(Address by only and	·
Employer's Name	Employer's Address		Employed From	То
Manybell Rodinguez	2350 US hwy	14 E	0314122	Prosent-
Employer's Name	Employer's Address 2350 US May	,,, c	Employed From	To answ 1
Kousto Kechique C	CSJOUS May	14 E	0314126	prany.
DEAD OADEEU LY DEFORE GIONING	N			
READ CAREFULLY BEFORE SIGNING been truthfully answered to the best of the				
application; that the applicant has read ar	nd made a complete answer	to each question <sub>fl</sub> and th	nat the answers in ea	ch instance are true and
correct. The undersigned further understa under penalty of state law, the applicant	ands that any license issued	contrary to Chapter 125	of the Wisconsin St	atutes shall be void, and
tion. Any person who knowingly provides	materially false information	on this application may	be required to forfe	it not more than \$1,000.
		1		
	7	///////	Yard	
		V	(Signature of Named	inaividual)

### Application for Transfer of Retail Licenses for Sale of Fermented Malt Beverages and/or Intoxicating Liquor From One Premises to Another

FEE	E \$ _/(	$O_iOO$
		Richland Center, Wisconsin
To 1	the go	verning body of the City Village Town of Richland Units
Co	unty of	f <u>Richland</u> Wisconsin.
	The u	indersigned hereby applies for a transfer of Class license from
202	or abo	to 2320 US hwy 14 E  (Present Location)  Out
1		LICANT: (print name and address plainly)
1.		Full name of applicant Cayolina Rodrigue ? (Re Tacos)
		Address 2350 US hwy 14 E Richland Centr
2.	LOC	ATION AND DESCRIPTION OF PREMISES TO WHICH APPLICATION FOR TRANSFER IS MADE: cribe building or buildings where alcohol beverages are to be sold, served, consumed, and stored.
	(a)	Street number <u>A320</u> VS hwy 14 E
	(b)	Trade name of establishment RC Tacos
	(c)	Physical description of building, buildings and/or, land area comprising licensed premises.  A house by the building owners have, parking lot, drive them,
	(d)	Legal description (omit if street address is given above.)
	(e)	Is any other business conducted on same premises?
	(f)	Was this location licensed for beer or liquor during the past year?
	(g)	Give name and address of previous licensee. 207 S. orange St
	(h)	Will the previous licensee surrender its license?

### ALL APPLICANTS FOR TRANSFER OF CLASS B LICENSES MUST ANSWER THE FOLLOWING:

3.	If granted, state any interest, directly or indirectly, that rectifier will hold in the premises for which you are app	
4.	If you do not own the fixtures, state the manner, terms  **NIA**	and conditions under which said fixtures are held
abov to op	D CAREFULLY BEFORE SIGNING: Under penalty proper questions has been truthfully answered to the best operate this business according to law and that the rights ted, cannot be assigned to another.	f the knowledge of the applicant. Applicant agrees
inspe	lack of access to any portion of a licensed premises du ection. Such refusal is a misdemeanor and grounds for re ides materially false information on this application may	evocation of this license. Any person who knowingly
		(num of
		(Signature)
	CLASS OF BUSINESS	
Nam	ne RC Tacos	
Orig	inal Location 201. Sorange St.	
War	d	
Prop	posed Location 2520 US hwy 14 E	
War	d	
Lice	nse No	
Trea	asurer's Receipt No	
File	1/16/2024	
Sub	mitted to Council or Board	
App	roved Date	

Denied Date

### APPLICATION FOR TEMPORARY CLASS "B"/"CLASS B" RETAILER'S LICENSE

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

Town   Village   City of Richland Ceneter   County of Richland   The named organization applies for: (check appropriate box(es))    A Temporary Class B** license to sell lifermented mait beverages at pionics or similar gatherings under s. 125.26(6), Wis. Stats.   A Temporary Class B** license to sell wine at plonics or similar gatherings under s. 125.51(10), Wis. Stats.   at the premises described below during a special event beginning 03/23/2024 and ending 03/23/2024 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 (a) Name Richland Country Performing Arts Council	FEE \$ 10.00	Application	Date: 02/08/2024				
A Temporary Class "B" license to sell fermented malt beverages at pionics or similar gatherings under s. 125.26(6), Wis. Stats.     A Temporary "Class B" license to sell wine at pionics or similar gatherings under s. 125.51(10), Wis. Stats. at the premises described below during a special event beginning 03/23/2021 and andering 03/23/2024 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 □ Veterans Organization □ Fair Association (a) Name Richland Country Performing Arts Counct1 (b) Address 182 N Central Ave Richland Center WI 53581	☐ Town ☐ Village ☐ City of Richland Cene	eter County of _Ric	hland				
A Temporary Class "B" license to sell fermented malt beverages at pionics or similar gatherings under s. 125.26(6), Wis. Stats.     A Temporary "Class B" license to sell wine at pionics or similar gatherings under s. 125.51(10), Wis. Stats. at the premises described below during a special event beginning 03/23/2021 and andering 03/23/2024 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 □ Veterans Organization □ Fair Association (a) Name Richland Country Performing Arts Counct1 (b) Address 182 N Central Ave Richland Center WI 53581	The named organization applies for: (check appropriate box(es).)						
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 03/23/2024 and ending 03/23/2024 and agrees to comply with all laws, resolutions, ordinances and regulations (state, federal or local) affecting the sale of fermented math beverages and/or wine if the license is granted.  1. ORGANIZATION (check appropriate box)		at picnics or similar gatherings und	ders 125 26(6) Wis Stats				
at the premises described below during a special event beginning 03/23/2024 and ending 03/23/2024 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)			1				
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.    ORGANIZATION (check appropriate Dav)   Bona fide Ciub   Church   Lodge/Society   Veteran's Organization   Fair Association (a) Name Richland Country Performing Arts Council   (b) Address 182 N Central Ave Richland Center WI 53581   Check and Country   Check   Check							
(a) Name Richland County Performing Arts Council (b) Address 182 N Central Ave Richland Center WI 53581    Street   Council	to comply with all laws, resolutions, ordinances and regulations (sta						
(a) Name Richland County Performing Arts Council (b) Address 182 N Central Ave Richland Center WI 53581    Street   Council	1 OPGANIZATION (sheet) convenients how	rah	Ornani-ation				
(b) Address 182 N Central Ave Richland Center WI 53581  (c) Date organized 11/09/2005 (d) If corporation, give date of incorporation 11/15/2005 (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 Norbert Calnin Vice President Susan Calnin Secretary Kent Adsit Treasurer Michael Cosgrove  (g) Name and address of manager or person in charge of affair: Michael Cosgrove  2. LOCATION OF PREMISES WHERE BEER AND/OR WINE WILL BE SOLD: (a) Street number 182 N Central Avenue (b) Lot Block (c) Do premises occupy all or part of building? All interior only top 2 floors (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 Symphony on the Rocks Concert (b) Dates of event March 23, 2024  DECLARATION  The Officer(s) of the organization, individually and together, declare under penalties of law that the information provided in this application is true and correct to the best of their knowledge and belief.  Pichland Cty Performing Arts Counci (Name of Organization)  Officer (Signature/Gate)  Officer (Signature/Gate)  Date Filed with Clerk 2 // 2 // 2 // 2 // 2 // 2 // 2 // 2			s Organization				
(c) Date organized 11/09/2005 (d) If corporation, give date of incorporation 11/15/2005 (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: [7]  (f) Names and addresses of all officers: President Norbert Calnin Vice President Susan Calnin Secretary Kent Adsit Treasurer Michael Cosgrove  (g) Name and address of manager or person in charge of affair: Michael Cosgrove  2. LOCATION OF PREMISES WHERE BEER AND/OR WINE WILL BE SOLD: (a) Street number 182 N Central Avenue (b) Lot Block (c) Do premises occupy all or part of building? All interior only top 2 floors (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 Symphony on the Rocks Concert  (b) Dates of event March 23, 2024  DECLARATION  The Officer(s) of the organization, individually and together, declare under penalties of law that the information provided in this application is true and correct to the best of their knowledge and belief.  Part of Gricer (Signature/date)  Officer (Signature/date)  Officer (Signature/date)  Date Filed with Clerk 2/12/2024  Date Reported to Council or Board	10. 70						
(c) Date organized 11/09/2005 (d) If corporation, give date of incorporation 11/15/2005 (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: 7	(Street)	☐ Town ☐ Village	<b>✓</b> City				
(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 Norbert Calnin Vice President Susan Calnin Secretary Kent Adsit Treasurer Michael Cosgrove  (g) Name and address of manager or person in charge of affair: Michael Cosgrove  2. LOCATION OF PREMISES WHERE BEER AND/OR WINE WILL BE SOLD: (a) Street number 182 N Central Avenue (b) Lot Block (c) Do premises occupy all or part of building? All interior only top 2 floors (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 Symphony on the Rocks Concert (b) Dates of event March 23, 2024  DECLARATION  The Officer(s) of the organization, individually and together, declare under penalties of law that the information provided in this application is true and correct to the best of their knowledge and belief.  Pichland Cty Performing Arts Counci (Name of Organization)  Officer (Signature/date)  Officer (Signature/date)  Date Filed with Clerk 2 / 12 2024  Date Reported to Council or Board	(c) Date organized <u>11/09/2005</u>						
box:  (7) Names and addresses of all officers:     President Norbert Calnin     Vice President Susan Calnin     Secretary Kent Adsit     Treasurer Michael Cosgrove  (9) Name and address of manager or person in charge of affair:  Michael Cosgrove  2. LOCATION OF PREMISES WHERE BEER AND/OR WINE WILL BE SOLD: (a) Street number 182 N Central Avenue (b) Lot Block (c) Do premises occupy all or part of building? All interior only top 2 floors (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 Symphony on the Rocks Concert (b) Dates of event March 23, 2024  DECLARATION  The Officer(s) of the organization, individually and together, declare under penalties of law that the information provided in this application is true and correct to the best of their knowledge and belief.  Richland Cty Performing Arts Counci (Name of Organization)  Officer (Signature/date)  Officer (Signature/date)  Officer (Signature/date)  Date Reported to Council or Board	(d) If corporation, give date of incorporation11/15/200!	<u></u>					
President Norbert Calnin  Vice President Susan Calnin  Secretary Kent Adsit  Treasurer Michael Cosgrove  (g) Name and address of manager or person in charge of affair: Michael Cosgrove  2. LOCATION OF PREMISES WHERE BEER AND/OR WINE WILL BE SOLD:  (a) Street number 182 N Central Avenue  (b) Lot Block  (c) Do premises occupy all or part of building? All interior only top 2 floors  (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 Symphony on the Rocks Concert  (b) Dates of event March 23, 2024  DECLARATION  The Officer(s) of the organization, individually and together, declare under penalties of law that the information provided in this application is true and correct to the best of their knowledge and belief.  Richland Cty Performing Arts Counci (Name of Organization)  Officer (Signature/date)  Officer (Signature/date)  Date Reported to Council or Board		n seller's permit pursuant to s. 77.	54 (7m), Wis. Stats., check this				
Vice President Secretary Kent Adsit Treasurer Michael Cosgrove  (g) Name and address of manager or person in charge of affair: Michael Cosgrove  2. Location of Premises where Beer and/or wine will be sold: (a) Street number 182 N Central Avenue (b) Lot Block (c) Do premises occupy all or part of building? All interior only top 2 floors (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 Symphony on the Rocks Concert (b) Dates of event March 23, 2024  DECLARATION  The Officer(s) of the organization, individually and together, declare under penalties of law that the information provided in this application is true and correct to the best of their knowledge and belief.  Richland Cty Performing Arts Counci (Name of Organization)  Officer	(f) Names and addresses of all officers:						
Secretary   Treasurer   Michael Cosgrove	President Norbert Calnin						
Secretary   Treasurer   Michael Cosgrove	Vice President Susan Calnin						
Treasurer Michael Cosgrove  (g) Name and address of manager or person in charge of affair: Michael Cosgrove  2. LOCATION OF PREMISES WHERE BEER AND/OR WINE WILL BE SOLD:  (a) Street number 182 N Central Avenue  (b) Lot Block  (c) Do premises occupy all or part of building? All interior only top 2 floors  (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 Symphony on the Rocks Concert  (b) Dates of event March 23, 2024  DECLARATION  The Officer(s) of the organization, individually and together, declare under penalties of law that the information provided in this application is true and correct to the best of their knowledge and belief.  Richland Cty Performing Arts Counci (Name of Organization)  Officer Signature/date)  Officer Officer Signature/date)  Date Filed with Clerk 2/12/2024  Date Reported to Council or Board	Secretary Kent Adsit						
(g) Name and address of manager or person in charge of affair: Michael Cosgrove  2. LOCATION OF PREMISES WHERE BEER AND/OR WINE WILL BE SOLD:  (a) Street number 182 N Central Avenue  (b) Lot	Treasurer Michael Cosgrove						
2. LOCATION OF PREMISES WHERE BEER AND/OR WINE WILL BE SOLD:  (a) Street number 182 N Central Avenue  (b) Lot Block  (c) Do premises occupy all or part of building? All interior only top 2 floors  (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 Symphony on the Rocks Concert  (b) Dates of event March 23, 2024  DECLARATION  The Officer(s) of the organization, individually and together, declare under penalties of law that the information provided in this application is true and correct to the best of their knowledge and belief.  Richland Cty Performing Arts Counci  (Name of Organization)  Officer  Officer  (Signature/date)  Date Filed with Clerk 2/12/2024  Date Reported to Council or Board							
(a) Street number 182 N Central Avenue  (b) Lot	(9)						
(a) Street number 182 N Central Avenue  (b) Lot							
(b) Lot							
(c) Do premises occupy all or part of building? All interior only top 2 floors  (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 Symphony on the Rocks Concert  (b) Dates of event March 23, 2024  DECLARATION  The Officer(s) of the organization, individually and together, declare under penalties of law that the information provided in this application is true and correct to the best of their knowledge and belief.  Richland Cty Performing Arts Counci (Name of Organization)  Officer  Officer  Officer  Officer  Officer  Officer  Officer  Officer  Officer  Date Reported to Council or Board  Date Reported to Council or Board							
(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 Symphony on the Rocks Concert  (b) Dates of event March 23, 2024  DECLARATION  The Officer(s) of the organization, individually and together, declare under penalties of law that the information provided in this application is true and correct to the best of their knowledge and belief.  Richland Cty Performing Arts Counci (Name of Organization)  Officer  Officer  Officer  Officer  Officer  Officer  Officer  Officer  Date Reported to Council or Board  Date Reported to Council or Board	(b) Lot						
3. NAME OF EVENT  (a) List name of the event Symphony on the Rocks Concert  (b) Dates of event March 23, 2024  DECLARATION  The Officer(s) of the organization, individually and together, declare under penalties of law that the information provided in this application is true and correct to the best of their knowledge and belief.  Richland Cty Performing Arts Counci (Name of Organization)  Officer  Date Reported to Council or Board							
(a) List name of the event Symphony on the Rocks Concert  (b) Dates of event March 23, 2024  DECLARATION  The Officer(s) of the organization, individually and together, declare under penalties of law that the information provided in this application is true and correct to the best of their knowledge and belief.  Richland Cty Performing Arts Counci (Name of Organization)  Officer (Signature/date)  Officer (Signature/date)  Date Filed with Clerk 2/12/2024  Date Reported to Council or Board		s, or room or rooms, license is to					
(a) List name of the event Symphony on the Rocks Concert  (b) Dates of event March 23, 2024  DECLARATION  The Officer(s) of the organization, individually and together, declare under penalties of law that the information provided in this application is true and correct to the best of their knowledge and belief.  Richland Cty Performing Arts Counci (Name of Organization)  Officer (Signature/date)  Officer (Signature/date)  Date Filed with Clerk 2/12/2024  Date Reported to Council or Board							
(a) List name of the event Symphony on the Rocks Concert  (b) Dates of event March 23, 2024  DECLARATION  The Officer(s) of the organization, individually and together, declare under penalties of law that the information provided in this application is true and correct to the best of their knowledge and belief.  Richland Cty Performing Arts Counci (Name of Organization)  Officer (Signature/date)  Officer (Signature/date)  Date Filed with Clerk 2/12/2024  Date Reported to Council or Board	3. NAME OF EVENT						
DECLARATION  The Officer(s) of the organization, individually and together, declare under penalties of law that the information provided in this application is true and correct to the best of their knowledge and belief.  Pichland Cty Performing Arts Counci (Name of Organization)  Officer  O							
DECLARATION  The Officer(s) of the organization, individually and together, declare under penalties of law that the information provided in this application is true and correct to the best of their knowledge and belief.  Richland Cty Performing Arts Counci (Name of Organization)  Officer  Officer  Officer  (Signature/date)  Date Filed with Clerk  Description:  Officer  Officer  Officer  Officer  Officer  Date Reported to Council or Board	V-00-0 A MARKET MARKET OF THE SPECIAL PROPERTY OF THE						
is true and correct to the best of their knowledge and belief.  Richland Cty Performing Arts Counci (Name of Organization)  Officer  Officer  (Signature/date)  Date Filed with Clerk 2/12/2024  Date Reported to Council or Board		RATION					
is true and correct to the best of their knowledge and belief.  Richland Cty Performing Arts Counci (Name of Organization)  Officer  Officer  (Signature/date)  Date Filed with Clerk 2/12/2024  Date Reported to Council or Board	The Officer(s) of the organization, individually and together, declare u	nder penalties of law that the inform	nation provided in this application				
Officer 2/8/2024 Officer	· · · · · · · · · · · · · · · · · · ·						
Officer 2/8/2024 Officer (Signature/date)  Officer (Signature/date)  Date Filed with Clerk 2/12/2024 Date Reported to Council or Board							
Officer	Mill alchoou	(Name of C	ngamzadon,				
OfficerOfficerOfficer(Signature/date)  Date Filed with Clerk	Officer // My / Clare 2/8/2029	Officer	anature/date)				
Date Filed with Clerk 2/12/2024 Date Reported to Council or Board	/ (Signaturate)	(5)	gratureration				
Date Filed with Clerk 2/12/2024 Date Reported to Council or Board		Officer(Si	gnature/date)				
	2/12/2014	"//	±20				
Date Granted by Council License No	Date Filed with Clerk	Date Reported to Council or Boa	ara				
Elderise No.	Date Granted by Council	License No					
AT-315 (R, 5-11) Wisconsin Department of Revenue		2.501100 140.	Wisconsin Department of Revenue				

### APPLICATION FOR TEMPORARY CLASS "B"/"CLASS B" RETAILER'S LICENSE

See Additional Information on reverse side. Contact the municipal of	clerk if you have questions.		
FEE \$ 10.00	Application Date: $\frac{2/27/24}{}$		
☐ Town ☐ Village	INTER County of RICKLAND		
The named organization applies for: (check appropriate box(es).)			
	at nigning or similar gatherings under a 125 26(6) Wie Chate		
A Temporary "Class B" license to sell wine at picnics or similar g			
at the premises described below during a special event beginningto comply with all laws, resolutions, ordinances and regulations (sta and/or wine if the license is granted.	1-21-2029 and ending 4-21-2029 and agrees te, federal or local) affecting the sale of fermented malt beverages		
1. ORGANIZATION (check appropriate box)  Bona fide Club Chui	rch Lodge/Society Veteran's Organization Fair Association		
(a) Name St. Mary of the Assur			
(b) Address 160 W Fourth St.	RICHAND CENTER, WI 53581		
(Street)	☐ Town ☐ Village ☐ City		
(c) Date organized			
(d) If corporation, give date of incorporation			
<ul><li>(e) If the named organization is not required to hold a Wisconsi box: ☐</li></ul>	n seller's permit pursuant to s. 77.54 (7m), Wis. Stats., check this		
(f) Names and addresses of all officers:			
President			
Vice President			
Secretary			
Treasurer			
(g) Name and address of manager or person in charge of affair	: Monsignor Roger J. Scheckel		
2. LOCATION OF PREMISES WHERE BEER AND/OR WINE WIL	L BE SOLD:		
(a) Street number 1050 N. Orange			
(b) Lot	Block		
(c) Do premises occupy all or part of building?			
	his application, which floor or floors, or room or rooms, license is to		
cover:	application, which look of hoors, or footh of fooths, hoorise is to		
3. NAME OF EVENT			
	5-1-3 1-321		
(a) List name of the event 25 ANNUAL (b) Dates of event	Sportnan, Extravaganza 2024		
(b) Dates of event			
DECLAR	ATION		
The Officer(s) of the organization, individually and together, declare unis true and correct to the best of their knowledge and belief.	nder penalties of law that the information provided in this application		
	(Name of Organization)		
Amorton Coul 50. 1.1	· · · · · · · · · · · · · · · · · · ·		
Officer (Signature/date)	Officer(Signature/date)		
Officer(Signature/date)	Officer(Signature/date)		
Date Filed with Clerk 2/27/2024			
Date i lied with Oldik V- / V / V- V /	Date Reported to Council or Board		
Date Granted by Council	License No.		

## CITY OF RICHLAND CENTER STREET CLOSING APPLICATION FOR EVENTS

Date: 2/7/2024
Name of Event: Race For GRACE
Name of Contact: Allen Kaszubski Telephone Number 608-604-7114
Alternate Contact: Telephone Number
Name of Organization / Business requesting closure: Greater Richland Area Cancer Elimination Ir
Address: PO, BOX 213, Richland Center
Date of Event 5/18/2024
Street Closure Request: North Orange St, starting at 6th St. / W 7th St. starting
at Jefferson St. / N Jefferson St. Starting at 7th St.
Street will be closed between the hours of: 7:30am 10:30am
Explain how the street closure will be marked such as cones or barricades: barricades
Manage Manage Date filed with Clerk 2/7/2024 Signature of Applicant (s)
Referred to Public Safety on
Action of Public Safety





# HELP FIGHT CANCER

1/4 Mile Kids Run I Mile Run/Walk



🛣 Special Firefighters Challenge 🧸



### SATURDAY, MAY

950 N Orange St Richland Center WI

JOIN US TO GET ACTIVE AND HELP PREVENT CANCER WHILE RAISING FUNDS TO HELP OTHERS BATTLING CANCER

### REGISTER AT WALKWITHGRACE.COM

REGISTRATION INCLUDES SWAG BAG AND T-SHIRT

Price increase April 1st; same day registration available 5K & 10K are chip timed



### **CHAPTER 310**

### REGULATING THE KEEPING OF POULTRY AND LIVESTOCK WITHIN THE CITY OF RICHLAND CENTER

[History: Ord 2004-4]

**310.01 Statement of Purpose**. The keeping or feeding of poultry or livestock within the City of Richland Center is declared to be a public nuisance, presenting concerns for health, cleanliness, noxious odors, noise, and safety issues in a close community living situation.

**310.02 Prohibition**. No person shall keep, feed or maintain upon his or her premises or any premises under his or her control, any chickens, ducks, geese or other poultry, or any live cattle, horses, mules, donkeys, sheep, goats, or swine, or any other poultry or livestock normally raised on farms and used for food or fiber, within the City of Richland Center.

**310.03 Exceptions**. The Prohibition of Section 310.02 shall not apply where the creatures are in the care, custody or control of any of the following:

- -A veterinarian for treatment;
- -An agricultural or animal fair, show, or learning seminar;
- -A show or project of a 4-H Club, Boy Scouts, Girl Scouts, or similar club;
- -A display for judging purposes;
- -An itinerant or transient carnival;
- -A circus, parade, or other show;
- -A public or private educational institution; or
- -A pet shop, or retail agri-business dealing in young poultry.

Provided, however, that all of the following requirements are met:

- 1. The presence of the animals within the City is temporary, unless they are being kept at an educational institution;
- 2. The location of the animals conforms to the provisions of the zoning ordinances of the City of Richland Center;
- 3. All animals and animals quarters are kept in a clean and sanitary condition, and are so maintained as to eliminate objectionable odors; and
  - 4. All animals are maintained in quarters so constructed as to prevent their escape.
- **310.04 Penalty**. Any person violating any of the provisions of this Chapter shall, upon conviction thereof, forfeit not less than \$25.00, nor more than \$400.00 for each offense, together with a the costs of prosecution and any applicable penalty assessment, and in case such forfeiture, costs and assessments are not paid, shall be subject to imprisonment in the County Jail until such forfeiture costs and assessments shall be paid, but not to exceed Ninety (90) days. Each day that a violation of this Chapter continues, shall constitute a separate offense.