



# BOARD OF LICENSE EXAMINERS AGENDA

February 03, 2026 at 5:00 PM

City Hall - Room 106, 828 Center Avenue, Sheboygan, WI

It is possible that a quorum (or a reverse quorum) of the Sheboygan Common Council or any other City committees/boards/commissions may be in attendance, thus requiring a notice pursuant to State ex rel. Badke v. Greendale Village Board, 173 Wis. 2d 553, 494 N.W.2d 408 (1993).

Persons with disabilities who need accommodations to attend this meeting should contact the Building Inspection office, (920) 459-3477. Persons other than commission, committee, and board members who wish to participate remotely shall provide notice to the Building Inspection office at 920-459-3477 at least 24 hours before the meeting so that the person may be provided a remote link for that purpose. All Committee members may attend the meeting remotely.

## OPENING OF MEETING

1. Roll Call
2. Call to Order
3. Pledge of Allegiance
4. Introduction of Commission members and staff

## MINUTES

- [5.](#) Review minutes of December 2, 2025 Board of License Examiners meeting.

## ITEMS FOR DISCUSSION AND POSSIBLE ACTION

- [6.](#) Review and discuss qualifications and experience of Seth Steffen, #6734, applying for a Carpenter Contractor license.
- [7.](#) Review and discuss qualifications and experience of Brian L Van Wageningen, #34933, applying for a Carpenter Contractor license.

## NEXT MEETING DATE

8. Next scheduled meeting: April 7, 2026 at 5:00 P.M.

## ADJOURN

9. Motion to Adjourn

***In compliance with Wisconsin's Open Meetings Law, this agenda was posted in the following locations more than 24 hours prior to the time of the meeting:***

*City Hall • Mead Public Library*  
*Sheboygan County Administration Building • City's website*

## CITY OF SHEBOYGAN

## BOARD OF LICENSE EXAMINERS MINUTES

Tuesday, December 02, 2025

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Persons with disabilities who need accommodations to attend this meeting should contact the Building Inspection office, (920) 459-3477. Persons other than commission, committee, and board members who wish to participate remotely shall provide notice to the Building Inspection office at 920-459-3477 at least 24 hours before the meeting so that the person may be provided a remote link for that purpose.

## OPENING OF MEETING

1. Roll Call

**Board Members Present:** Dan Zelm, Todd Thone, Sam Payne, Martin Perez

**Staff/Officials Present:** Building Inspector Pat Eirich (Secretary)

**Others Present:** Boyd Philippi (by phone), Jeffrey Hassinger (by phone)

2. Call to Order

Sam Payne called the meeting to order at 5:00 p.m.

3. Pledge of Allegiance

Pledge of Allegiance was recited by all present.

4. Introduction of Commission members and staff

Each member introduced themselves to attendees and attendees introduced themselves to board members.

## MINUTES

5. Review minutes of October 7, 2025 Board of License Examiners meeting.

Reviewed minutes of **October 7, 2025**. Motion by Dan Zelm, seconded by Todd Thone to approve the minutes of **October 7, 2025**. Motion carried.

## ITEMS FOR DISCUSSION AND POSSIBLE ACTION

6. Review and discuss qualifications and experience of Boyd Philippi Jr, #1506, applying for a Carpenter Contractor license.

Motion by Dan Zelm, seconded by Todd Thone to approve temporary carpenter. Motion carried.

7. Review and discuss qualifications and experience of Jeffrey Hassinger, #2715, applying for a Carpenter Contractor license.

Motion by Dan Zelm, seconded by Martin Perez to approve taking General Contractor exam. Motion carried.

8. Review and discuss qualifications and experience of Juan Carlos Castro, #50122, applying for a Carpenter and Moving/Razing Contractor license.

Motion by Dan Zelm, seconded by Todd Thone to Deny application for carpenter contractor and moving/razing as applicant did not show, has a lack of experience submitted and did not supply enough additional information when requested by board. Motion carried.

#### **NEXT MEETING DATE**

9. Next scheduled meeting: February 3, 2026 at 5:00 P.M.

Motion by Todd Thone, seconded by Dan Zelm to have next meeting on **February 3, 2026** at 5:00 P.M.  
Motion carried.

#### **ADJOURN**

10. Motion to Adjourn

Motion by Dan Zelm, seconded by Sam Payne to adjourn at 5:23 P.M. Motion carried.

***In compliance with Wisconsin's Open Meetings Law, this agenda was posted in the following locations more than 24 hours prior to the time of the meeting:***

*City Hall • Mead Public Library  
Sheboygan County Administration Building • City's website*

Customer No.: 6734 Application Date: 01/06/2026 Approved: \_\_\_\_\_ on: \_\_\_\_\_  
Payment \_\_\_\_\_ Card \_\_\_\_\_  
Check/Card #: \_\_\_\_\_ Amount Pd: \_\_\_\_\_ Bill #: \_\_\_\_\_ Printed: \_\_\_\_\_  
In the city of Sheboygan, Wisconsin, for the year ending December 31, 20 26. The application/temporary License fee of \$ 75.00 has been paid to the Building Inspection Division as shown by receipt # \_\_\_\_\_. The license/certificate fee of \$ \_\_\_\_\_ is to be made upon application approval for each license/certificate.

DO NOT COMPLETE BLANKS ABOVE THIS LINE

Please type or print neatly and legibly in black or dark blue ink - pencil not acceptable. Incomplete applications will be rejected.

## TO THE BOARD OF LICENSE EXAMINERS, CITY OF SHEBOYGAN, WISCONSIN

All license applications requiring Board of License Examiners approval must be submitted by Wednesday prior to the scheduled meeting.

The undersigned hereby applies for a (select those that apply):

Annual: X Temporary: \_\_\_\_\_ Temporary Job Location: \_\_\_\_\_

License		
General Contractor <u>SE</u>	Board Meeting YES	Exam <u>YES</u>
Carpenter <u>✓</u>	YES	NO
Carpenter-Accessory _____	YES	NO

Note: Temporary does not attend Board Meeting

Certificate	
Moving/Razing _____	Excavating _____
Concrete/Asphalt _____	Masonry _____
Steel Erecting _____	Tuckpointing _____
Roofing _____	Siding _____
Doors/Windows _____	Insulation _____
Drywall _____	Fences _____
Cabinets/Countertops _____	Waterproofing _____

All of the following questions/blanks must be completed:

1 First Name Seth Middle Initial P Last Name Steffen  
Home Address 1395 Stand Hill Circle Cell #: (262) 483-0994  
City West Bend State WI Zip(+4) 53090-8209  
2 Preferred Email sssteffen@kelmann.com  
3 Name of Current Employer: Kelmann Restoration  
How long have you been employed: years: \_\_\_\_\_ months: 5 Number of employees: 80  
Business Address 4307 S TAYLOR DR. Work #: (920) 689 6688  
City Sheboygan State WI Zip(+4) 53081-8485  
4 State Credentials: Dwelling Contractor #: \_\_\_\_\_ - DC Dwelling Qualifier: 4323 - DCQ

5 Work Experience (Do not list contract work): For whom were you employed? How did you gain your construction experience?

For <u>Self Employed - Steffen Interiors LLC</u>	Address <u>1395 Stand Hill Circle, West Bend, WI</u>
From Date <u>2005 - 2017</u>	To Date <u>2017</u>
For <u>CAPRI COMMUNITIES - MAINTENANCE</u>	Address <u>425 W WAITERS ST. PORT WASHINGTON</u>
From Date <u>MAY, 2014</u>	To Date <u>JUNE, 2024</u>
For <u>Anderson Ashton - CONST. SUPERINTENDENT</u>	Address <u>2746 S 166th St. New Berlin, WI</u>
From Date <u>JUNE, 2024</u>	To Date <u>MAY, 2025</u>
For <u>Home Inspector - Wisconsin</u>	Address <u>-</u>
From Date <u>APRIL, 2023</u>	To Date <u>APRIL, 2025</u>



6 State in detail type of construction work you have performed: Int/Ext Remodeling & Repairs, Framing, Electrical, Plumbing, Insulating, Drywall, Painting, Finish Carpentry, Flooring,  
Type of construction work you expect to complete in the future: General Contracting, Project Management, Restoration

7 Have you attended a trade school? NO. If yes, give date, name and address of school(s) attended:

8 Did you serve an apprenticeship period? NO. If so, state with whom, and dates:

9 Have you held a City Contractor related license/certification? \_\_\_\_\_ If YES, list type and dates:  
HOME INSPECTOR License, WI - 2023 - 2025

Have you ever had a City contractor license/certification denied, refused, or revoked? \_\_\_\_\_

If YES, list date and reason: NO

10 Have you read the Ordinance and all amendments to date which were passed by the Common Council of the City of Sheboygan, Wisconsin, pertaining to the License/Certification you are applying for? Yes. Are you familiar with the definition of, and can perform the work required under the City Ordinance? Yes.

11 If you are granted a license/certification, will you comply with the Ordinance and its amendments, and with the orders of the Inspector? Yes.

I, the applicant, mentioned in the foregoing application for a City of Sheboygan Contractor License/Certification, have read each of the foregoing questions from 1 to 11 inclusive; to which I have made answer, and said answers in each instance are true and correct. I understand false statements or willful omission of pertinent information will be grounds for denial or revocation of a license/certificate.

I, the applicant, further acknowledge:

- a) Receipt of City Ordinance Chapter 12 Division 12-II-3 - Contractors
- b) License/Certification applied for expires at end of current calendar year
- c) It is my responsibility to renew license prior to expiration until such time as not needed
- d) It is my responsibility to submit timely a valid Certificate of Insurance (COI)

\_\_\_\_\_  
APPLICANT SIGNATURE

\_\_\_\_\_  
DATE

Signature Witnessed by: \_\_\_\_\_

Print Witness Name: \_\_\_\_\_

Witness Address: \_\_\_\_\_

## APPLICANT:

It is important to emphasize the process and procedures provided for in city and state codes for required inspections. Please read the "Required Building Inspections" handout carefully and adhere to the requirements. If a required inspection is not requested of an inspector, a penalty inspection fee of \$50 will be assessed. The inspection, at your own expense, is still required even if this means having to uncover, dismantle, or excavate the area.

## BUILDING INSPECTION DIVISION

After you read the "Required Building Inspections" handout, please sign below. **This sheet must accompany your license/certification application and will be kept on file.**



Applicant Signature

1-6-26

Date of Signature

Seth Steffen

Applicant (please print name)

FOR SOLE PROPRIETORS, PARTNERSHIPS, OR LLCs WITH NO EMPLOYEES, PLEASE READ AND SIGN BELOW TO WAIVE WORKER'S COMPENSATION REQUIREMENT. (CORPORATIONS ARE *NOT* ELIGIBLE FOR THIS OPTION.)

Please be advised that \_\_\_\_\_ have/has no employees at this time. If in the future employees are hired, a certificate of insurance reflecting a policy of workman's compensation will be provided.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



Customer No.: 34933 Application Date: 12/1/2025 Approved: \_\_\_\_\_ on: \_\_\_\_\_  
Payment \_\_\_\_\_ Card \_\_\_\_\_  
Check/Card #: \_\_\_\_\_ Amount Pd: \_\_\_\_\_ Bill #: \_\_\_\_\_ Printed: \_\_\_\_\_  
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License		
	Board Meeting	Exam
General Contractor _____	YES	YES
Carpenter <u>X</u> _____	YES	NO
Carpenter-Accessory _____	YES	NO

Note: Temporary does not attend Board Meeting

Certificate	
Moving/Razing _____	Excavating _____
Concrete/Asphalt _____	Masonry _____
Steel Erecting _____	Tuckpointing _____
Roofing _____	Siding _____
Doors/Windows _____	Insulation _____
Drywall _____	Fences _____
Cabinets/Countertops _____	Waterproofing _____

All of the following questions/blanks must be completed:

1 First Name Brian Middle Initial L Last Name VanWageningen  
Home Address 386 Niagara St Cell #: (920) 377 0027  
City Kiel State WI Zip(+4) 53042

2 Preferred Email blprobuilders@gmail.com

3 Name of Current Employer: Self  
How long have you been employed: years: 8 months: \_\_\_\_\_ Number of employees: 0  
Business Address 386 Niagara St Work #: (920) 377 0027  
City Kiel State WI Zip(+4) 53042

4 State Credentials: Dwelling Contractor #: \_\_\_\_\_ - DC Dwelling Qualifier: 112201249 - DCQ

5 Work Experience (Do not list contract work): For whom were you employed? How did you gain your construction experience?

For <u>BPK Glass Pro LLC</u>	Address <u>3325 Behrens Pkwy Sheboygan</u>
From Date <u>April</u> , 2017	To Date <u>Present</u>
For _____	Address _____
From Date _____,	To Date _____,
For _____	Address _____
From Date _____,	To Date _____,
For _____	Address _____
From Date _____,	To Date _____,



6 State in detail type of construction work you have performed: Framing new windows & doors, drywall, windows & doors, roofing, siding, framing interior walls, insulation

Type of construction work you expect to complete in the future: General carpentry, windows, doors, framing, drywall, remodeling

7 Have you attended a trade school? No. If yes, give date, name and address of school(s) attended:

8 Did you serve an apprenticeship period? No. If so, state with whom, and dates:

9 Have you held a City Contractor related license/certification? Yes If YES, list type and dates: windows/doors  
2017 - present

Have you ever had a City contractor license/certification denied, refused, or revoked? no  
If YES, list date and reason:


10 Have you read the Ordinance and all amendments to date which were passed by the Common Council of the City of Sheboygan, Wisconsin, pertaining to the License/Certification you are applying for? Yes. Are you familiar with the definition of, and can perform the work required under the City Ordinance? Yes.


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APPLICANT SIGNATURE  
12/1/25  
DATE

Signature Witnessed by:   
Print Witness Name: \_\_\_\_\_  
Witness Address: \_\_\_\_\_

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Applicant Signature

12/1/25  
Date of Signature

Brian Van Wageningen  
Applicant (please print name)

**FOR SOLE PROPRIETORS, PARTNERSHIPS, OR LLCs WITH NO EMPLOYEES, PLEASE READ AND SIGN BELOW TO WAIVE WORKER'S COMPENSATION REQUIREMENT. (CORPORATIONS ARE NOT ELIGIBLE FOR THIS OPTION.)**

Please be advised that \_\_\_\_\_ have/has no employees at this time. If in the future employees are hired, a certificate of insurance reflecting a policy of workman's compensation will be provided.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_