



BOARD OF LICENSE EXAMINERS AGENDA

October 06, 2026 at 5:00 PM

City Hall - Room 207, 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 June 2nd, 2026 Board of License Examiners Meeting.

ITEMS FOR DISCUSSION AND POSSIBLE ACTION

6. Review and discuss qualifications and experience of Yamil A. Perez #5108, applying for a Carpenter Contractor license.
7. Review and discuss qualifications and experience of Adam Uraynar #61428, applying for a Carpenter Contractor license.
8. Review and discuss qualifications and experience of Austin Jaeger #69238, applying for a Carpenter Accessory license.

NEXT MEETING DATE

9. Next scheduled meeting: December 01, 2026 at 5:00 PM

ADJOURN

10. 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, June 02, 2026

OPENING OF MEETING

1. Roll Call

Board Members Present: Ald. Joe Heidemann, Craig Seider, Todd Thone, Dan Zelm, Sam Payne.

Staff/Officials Present: Director Taylor Zeinert, Permit Clerk Savanna Kapelka (secretary)

Others Present: Timothy Hephner, Joel Nyhof

2. Call to Order

Ald. Joe Heidemann 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 board member introduced themselves to attendees and attendees introduced themselves to board members.

MINUTES

5. Review minutes of April 7, 2026 Board of License Examiners meeting.

Reviewed minutes of April 7th, 2026. Motion by Dan Zelm, seconded by Todd Thone to approve the minutes of April 7th, 2026. Motion carried.

ITEMS FOR DISCUSSION AND POSSIBLE ACTION

6. Review and discuss qualifications and experience of Timothy Hephner, #0000, applying for a General Contractor license.

Motion by Dan Zelm, seconded by Todd Thone to approve general contractor upon passing exam. Motion carried.

7. Review and discuss qualifications and experience of Joel Nyhof, #2093, applying for a Carpenter Contractor license.

Motion by Todd Thone, seconded by Craig Seider to approve carpenter contractor. Motion carried.

8. Review and discuss qualifications and experience of Travis Kissel, #6969, applying for Carpenter Contractor license. Item 5.

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

NEXT MEETING DATE

9. Next scheduled meeting: August 04, 2026 at 5:00 PM

ADJOURN

10. Motion to Adjourn

Motion by Dan Zelm, seconded by Todd Thone to adjourn at 5:14 P.M. Motion carried.



BUILDING INSPECTION DIV Item 6.
 828 Center Avenue, Suite 208
 Sheboygan, WI 53081-4442
 Phone: (920) 459-3477
 Fax: (920) 459-0210
 buildinginspection@sheboyganwi.gov

Customer No.: 5128 Application Date: _____ Approved: _____ on: _____
 Payment _____ Card _____
 Check/Card #: _____ Amount Pd: _____ Bill #: _____ Printed: _____
 In the city of Sheboygan, Wisconsin, for the year ending December 31, 20____. The application/temporary License fee of \$_____ 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: ☒ Temporary: _____ Temporary Job Location: _____

License		
	Board Meeting	Exam
General Contractor _____	YES	YES
<u>Carpenter</u> _____	<u>YES</u>	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 Samir A. Middle Initial A Last Name Perez
 Home Address 1338 Carl Ave Cell #: 920 254 6978
 City Sheboygan State WI Zip(+4) 83081
 2 Preferred Email perc2bastida18@gmail.com
 3 Name of Current Employer: Madison concrete brothers LLC
 How long have you been employed: years: 8 months: 1 Number of employees: 1
 Business Address 1338 Carl Ave Work #: 920 254 6978
 City sheboygan State WI Zip(+4) 83081
 4 State Credentials: Dwelling Contractor #: _____ - DC Dwelling Qualifier: _____ - DCQ

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

For <u>Oostburg concrete</u>	Address <u>110 S Business Park Dr</u>
From Date: <u>1/1/19</u>	To Date <u>1/1/22</u>
For <u>Van Wykes</u>	Address <u>W 4291 Church Rd</u>
From Date <u>1/1/18</u>	To Date <u>1/1/19</u>
For _____	Address _____
From Date _____	To Date _____
For _____	Address _____
From Date _____	To Date _____

**BUILDING INSPECTION DIV**

828 Center Avenue, Suite 208
Sheboygan, WI 53081-4442
Phone: (920) 459-3477
Fax: (920) 459-0210

buildinginspection@sheboyganwi.gov

Item 6.

Item 6.

6 State in detail type of construction work you have performed: concrete work

Type of construction work you expect to complete in the future: carpenter,

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? _____. If so, state with whom, and dates:

9 Have you held a City Contractor related license/certification? ✓ If YES, list type and dates: 1, 1, 2028

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? _____. Are you familiar with the definition of, and can perform the work required under the City Ordinance? _____.

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

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)

[Signature]
APPLICANT SIGNATURE

7, 17, 2026
DATE

Signature Witnessed by: Annel Garcia

Print Witness Name: Annel B Garcia

Witness Address: 2708 Pershing Av.

**BUILDING INSPECTION DIVISION**

828 Center Avenue, Suite 208

Sheboygan, WI 53081-4442

Phone: (920) 459-3477

Fax: (920) 459-0210

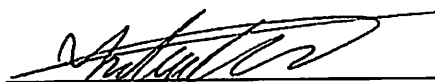
buildinginspection@sheboyganwi.gov

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

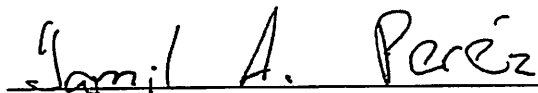
After you read the "Required Building Inspections" handout, please sign below. This sheet must accompany your license/certification application and will be kept on file.



Applicant Signature



Date of Signature



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: _____

App fee - \$50
card: 202743338

BUILDING INSPECTION DIV Item 7.



828 Center Avenue, Suite 208
Sheboygan, WI 53081-4442
Phone: (920) 459-3477
Fax: (920) 459-0210
buildinginspection@sheboyganwi.gov

Customer No.: <u>61428</u>	Application Date: <u>8/10/24</u>	Approved: _____	on: _____
Payment	Check/Card #: _____	Amount Pd: _____	Bill #: _____
			Card Printed: _____
In the city of Sheboygan, Wisconsin, for the year ending December 31, 20 <u>24</u> . The application/temporary License fee of \$ <u>50</u> 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		
	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:

- First Name Adam Middle Initial _____ Last Name Uraynar
Home Address 1018A N 11th St Cell #: (920) 5223483
City Sheboygan State WI Zip(+4) 53081 -
2 Preferred Email adamuraynar@gmail.com
- Name of Current Employer: self-employed
How long have you been employed: years: 3 months: _____ Number of employees: 0
Business Address 807 Center Ave #8 Work #: () _____
City Sheboygan State WI Zip(+4) 53081 -
- State Credentials: Dwelling Contractor #: _____ - DC Dwelling Qualifier: 5135 - DCQ
- Work Experience (Do not list contract work): For whom were you employed? How did you gain your construction experience?

For HarborStone Homes carpenter (full-time)	Address <u>Camelback Rd Phoenix AZ</u>
From Date <u>Apr 2024</u> ,	To Date <u>Dec 2024</u> ,
For HarborStone Homes carpenter (part-time)	Address <u>Camelback Rd Phoenix AZ</u>
From Date <u>Sep 2023</u> ,	To Date <u>Apr 2024</u> ,
For Duane Ahlers Construction carpenter	Address <u>Brookings SD</u>
From Date <u>Jan 2016</u> ,	To Date <u>Jan/Feb 2019</u> ,
For Habitat For Humanity general laborer	Address <u>Sheboygan and Plymouth</u>
From Date <u>2013</u> ,	To Date <u>2016</u> ,

6 State in detail type of construction work you have performed: Flooring, painting, carpentry, trim carpentry, framing, repairs, etc.

Helped build 2642 N 19th St, 1036 Erie Ave and two other houses in Sheboygan with Habitat for Humanity as well.

Also did commercial reno converting motel rooms into apartments.

Type of construction work you expect to complete in the future: Residential remodels, mostly interior.

Detached garage siding.

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

Engineering degree (UW-Platteville).

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? No If YES, list type and dates:

Have you ever had a City contractor license/certification denied, refused, or revoked? No

If YES, list date and reason:

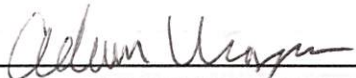
10 Have you read the Ordinance and all amendments to date which were passed by the Common Council of the City of Sheboygan, Wisconsin, pertaining to the License/Certification you are applying for? Yes. Are you familiar with the definition of, and can perform the work required under the City Ordinance?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

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

5/29/26

DATE

Signature Witnessed by: 

Print Witness Name: Fay Wagner

Witness Address: 3122 N 27th St

Sheboygan, WI

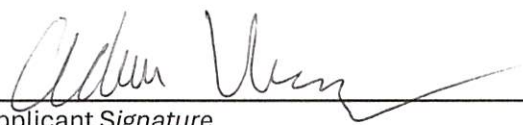
53083

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

5/29/26
Date of Signature

Adam Uraynar

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 Adam Uraynar 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: Adam Uraynar Date: 5/29/26

Customer No.: <u>09238</u>	Application Date: _____	Approved: _____	on: _____
Payment			Card
Check/Card #: _____	Amount Pd: _____	Bill #: _____	Printed: _____

In the city of Sheboygan, Wisconsin, for the year ending December 31, 20____. The application/temporary License fee of \$_____ 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.

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

Annual: X Temporary: _____ Temporary Job Location: _____

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

Note: Temporary does not attend Board Meeting

Certificate	
Moving/Razing _____	Excavating <u>X</u>
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 Austin Middle Initial W Last Name Jaeger
 Home Address 716 Highland Terrace Cell #: (920) 9186283
 City Sheboygan State WI Zip(+4) 53083
 - 2 Preferred Email jaeger home services@gmail.com
 - 3 Name of Current Employer: Jaeger Home Services LLC
 How long have you been employed: years: _____ months: 3 Number of employees: 0
 Business Address 716 Highland Terrace Work #: (920) 9186283
 City Sheboygan State WI Zip(+4) 53083
 - 4 State Credentials: Dwelling Contractor #: 5060-DCFR - DC Dwelling Qualifier: 5728 - DCQ
 - 5 Work Experience (Do not list contract work): For whom were you employed? How did you gain your construction experience?
- | | |
|---|---|
| For <u>Burger Boats</u> | Address <u>1811 Spring Street Manitowoc</u> |
| From Date <u>May 2026</u> | To Date <u>July 2026</u> |
| For <u>Altmyer Electric</u> | Address <u>827 521st Sheboygan</u> |
| From Date <u>Feb 2026</u> | To Date <u>May 2026</u> |
| For <u>Four Seasons Burger Boats</u> | Address <u>1811 Spring Street Manitowoc</u> |
| From Date <u>Sept 2025</u> | To Date <u>Feb 2026</u> |
| For <u>Four Seasons Comfort</u> | Address <u>1444 Pershing Ave Sheboygan</u> |
| From Date <u>Aug 2021</u> | To Date <u>Sept 2025</u> |

- 6 State in detail type of construction work you have performed: HVAC, Egress windows, Basement Finishing, Finish Carpentry, garages, Sun rooms, concrete, electrical, Plumbing, Handyman, excavation
- Type of construction work you expect to complete in the future: Egress windows, Handyman work, Carpentry, Finish Carpentry, Additions, excavation
- 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? NO If YES, list type and dates:
- 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.
- 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.

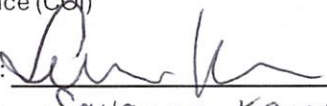
I, the applicant, mentioned in the foregoing application for a City of Sheboygan Contractor License/Certification, have read each of the foregoing questions from 1 to 11 inclusive; to which I have made answer, and said answers in each instance are true and correct. I understand false statements or willful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

21 Aug 2026
DATE

Signature Witnessed by: 

Print Witness Name: Savanna Kapelka

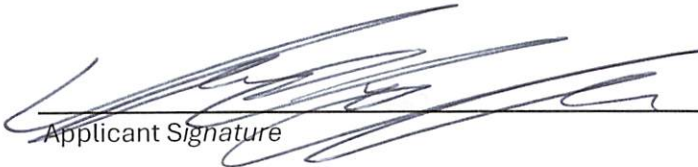
Witness Address: 828 Center Ave
Sheboygan, WI 53081

APPLICANT:

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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

21 Aug 2026
Date of Signature

Austin Jaeger
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 Jaeger Home Services LLC 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: 21 Aug 2026