



BOARD OF LICENSE EXAMINERS AGENDA

June 06, 2023 at 5:00 PM

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

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

MINUTES

- [5.](#) Approval of Minutes

ITEMS FOR DISCUSSION AND POSSIBLE ACTION

- [6.](#) Contractor 5070 - Joseph L Tichy - Carpenter
- [7.](#) Contractor 35126 - Verlin C Wicker - Carpenter Accessory
- [8.](#) Contractor 40409 - Brian M Koehler - Carpenter
- [9.](#) Contractor 45985 - Tommy J Mathis - Carpenter
10. Review additional applications received after meeting agenda published.

NEXT MEETING DATE

11. Next scheduled meeting: August 8, 2023 at 5:00 PM

ADJOURN

12. 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, April 04, 2023

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: Ald. Barbara Felde, Dan Zelm and Todd Thone

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

Others Present: Joel Beeck and Thomas Knapp

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

MINUTES

5. Approval of Minutes - February 7, 2023

Approved minutes of February 7, 2023 meeting. Motion by Dan Zelm, seconded by Todd Thone to approve minutes. Motion carried.

ITEMS FOR DISCUSSION AND POSSIBLE ACTION

6. Contractor 5218 - Joel D Beeck - Carpenter Accessory - Review Application

Motion by Todd Thone, seconded by Dan Zelm to grant city Carpenter Accessory license. Motion carried.

7. Contractor #5245 - Curt A Bushman - Carpenter Contractor - Review Application

Motion by Dan Zelm, seconded by Todd Thone to grant city Carpenter Contractor license. Motion carried.

8. Review additional applications received after meeting agenda published.

Contractor 5150 - Thomas A Knapp - Carpenter Accessory

Motion by Dan Zelm, seconded by Todd Thone to grant city Carpenter Accessory license. Motion carried.

9. City license/certification classification definition review - Final Approval

Motion by Dan Zelm, seconded by Todd Thone to approve license/certification classification definition as documented and add to city ordinance. Motion carried.

Item 5.

NEXT MEETING DATE

10. Next scheduled meeting: June 6, 2023 at 5:00 P.M.

Motion by Todd Thone, seconded by Dan Zelm to have next meeting on June 6, 2023 at 5:00 P.M.
Motion carried.

ADJOURN

11. Motion to Adjourn

Motion by Todd Thone, seconded by Dan Zelm to adjourn at 5:25 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.: 5070

Application Date: 05/01/2023 Approved: _____

on: _____

----- DO NOT COMPLETE BLANKS ABOVE THIS LINE -----

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

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

All 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

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

(do not complete this section) in the city of Sheboygan, Wisconsin for the year ending December 31, 2023. The application fee of \$ 2500 has been paid to the Building Inspection Department as shown by Receipt Number 189571. License/Certificate Fee of \$ _____ is to be made upon application approval for License/Certificate.

All of the following questions/blanks must be completed:

- 1 First Name Joseph Middle Initial L Last Name Tichy
 Home Address 1908 North 1st St. Cell #: (920) 791-1197
 City Sheboygan State WI Zip(+4) 53081-2905
- 2 Email Joe.SuperiorFlooring@gmail.com
- 3 State Credentials: Dwelling Contractor: _____ Dwelling Qualifier: _____
- 4 Current Employer Self employed Superior Flooring & Remodeling
 How long have you been employed: _____ years _____ months. Number of employees: 2
 Work Address 1908 North 1st Street Work #: (920) 791-1197
 City Sheboygan State WI Zip(+4) 53081-2905
- 5 Work Experience: For whom have you worked? How did you gain your contracting experience?

For <u>D&M K Baer</u>	Address _____
From Date <u>2007</u> , <u>2012</u>	To Date _____
For <u>Scotts Ind Alabama</u>	Address _____
From Date <u>2013</u> , <u>2015</u>	To Date _____
For <u>Self Employed</u>	Address _____
From Date <u>2015</u> , <u>present</u>	To Date _____
For <u>S&R siding</u>	Address _____
From Date <u>2005</u> , <u>2007</u>	To Date _____

6 State in detail the type of work you have been doing: installing flooring, tile showers
Back splashes, cabinet and counter install, Rough and Finish
Framing, finish work Residential Remodeling and garage frame
and the type of work you expect to do in the future: high home remodeling, flooring
cabinets, counters, decks attached and detached

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 ever held a Construction related license? no If YES, list type, date and jurisdiction.

Have you ever had a construction related license denied, refused, or revoked? yes If YES, list date, place and reason:
did remodel in plymouth without a lic "Beth" Nov 2022

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 Municipal Code? 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? _____.

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.



APPLICANT SIGNATURE
4/28/2023
DATE

Witnessed by: 

Print Name: _____
Address: _____

Applicant acknowledges:

- a) Receipt of City Ordinance Chapter 26 Division 3 - Contractors
- b) License expires at end of calendar year
- c) It is my responsibility to renew license prior to expiration.
- d) It is my responsibility to submit timely Certificate of Insurance to keep file current

October 26, 2001

TO ALL BUILDING CONTRACTORS:

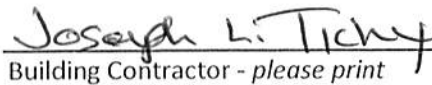
To better utilize available hours of Building Inspection Department personnel, it is important to reemphasize the process and procedures provided for in city and state codes for required inspections. Please read the attached carefully and adhere to the requirements. If a required inspection is not requested of our department, 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 DEPARTMENT

After you read the attached required inspections, please sign below. **This sheet must accompany your annual license renewal and will be kept on file.**


Building Contractor - Signature

4/28/2023
Date


Building Contractor - please print

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 _____ has/have 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: _____

Bill #
25
CK #

Application No. 35126 Sheboygan, Wis., 20
Approved by: _____ on 1-26-20

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

The undersigned hereby applies for a Carpenter Apprentice LICENSE/REGISTRATION
to allow him/her to do work at: _____ or in the City of
Sheboygan, Wisconsin during the year ending December 31, 20____.

The Application fee of \$ 25 has been paid to the Building Inspection Department as shown by Receipt
Number _____ License/Registration Fee of \$ _____ is to be made upon issuance of the
License/Registration.

All of the following questions must be answered:

- First Name Verlin Middle Initial C Last Name Wicker
Home Address 110 Rangeline Road Phone # (920) 377-1796
City Kohler State WI Zip(+4) 53044
- Date of Birth 01/02/1968 Place of Birth New Castle Ind.
- Are you employed? yes For Whom? RN Property Maintenance LLC
How long have you been employed by them 6 years 11 months.
email rnpropcare@yahoo.com
Work Address 110 Rangeline Road Phone # (920) 377-1796
City Kohler State WI Zip(+4) 53044
- State Credentials: Dwelling Contractor: _____ Dwelling Qualifier: DCCQ-071500074
- How long have you worked as a Contractor ? Answer: 20 years.
For whom did you work during this period? (List only the last 10 years)
For RN Property Maintenance LLC Address 110 Rangeline Road Kohler WI: 53044
From 4-1-2004 To 4-26-2022 RECENT
CRAFTED For MAINTENANCE / MAINTENANCE Address Random Lake Sheboygan
PLST:CS From 2012 To 2004
For lakeside Foods / maintenance Address Random Lake
From 2010 To 2012
- State in detail the type of work you have been doing: Remodel Existing Cabinetry, Flooring
DIY Wall Repair, Concrete, Bo:IT / Framed Sided Roofed Sheds, Doors, Tr: m
and the type of work you expect to do in the future: Doors, Fences, Decks, Porch repair
Tr: m, Flooring, Windows, Painting, Board ups, Remodels,
MAINTENANCE

I do own Rental Properties, that require me to
MAINTAIN.



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

7 Have you attended a trade school: NA. If yes, give name and address of school(s) attended:

Did you serve an apprenticeship period? NA. If so, state with whom, and give dates:

8 Have you ever applied for a City license? MILWAUKEE If so, give type, place, and date CONTRACTOR / APRIL 2022

Was it granted? Waiting to get it in the mail Have you ever had a license denied, refused, or revoked? NO

If so, explain; giving place and date

9 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/Registration you are applying for? Yes. Are you familiar with the definition of, and can perform the work required under the Municipal Code? Yes. Are you willing to take a written examination for a _____ license/registration if required to do so by the BOARD of LICENSE EXAMINERS (License application only)? Yes.

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

All Applications requiring Board of License Examiners approval must be submitted by 3rd Wednesday prior to scheduled meeting.

I, the applicant, mentioned in the foregoing application for a _____ License/Registration, have read each of the foregoing questions from 1 to 10 inclusive; to which I have made answer, and said answers in each instance are true and correct.

Witnessed:

Print Name:

Address:

APPLICANT SIGNATURE



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

October 26, 2001

TO ALL BUILDING CONTRACTORS:

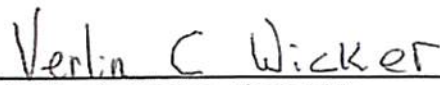
To better utilize available hours of Building Inspection Department personnel, it is important to reemphasize the process and procedures provided for in city and state codes for required inspections. Please read the attached carefully and adhere to the requirements. If a required inspection is not requested of our department, 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 DEPARTMENT

After you read the attached required inspections, please sign below. This sheet must accompany your annual license renewal and will be kept on file.


Building Contractor - Signature

4-26-2022
Date


Building Contractor - please print



www.sheboyganwi.gov

BUILDING INSPECTION DIVISION

828 Center Avenue, Suite 208

Sheboygan, WI 53081-4442

Phone: (920) 459-3477

Fax: (920) 459-0210

buildinginspection@sheboyganwi.gov

Item 7.

Contractor License/Certification RENEWAL

WICKER, VERLIN C.
110 RANGELINE RD
KOHLER, WI 53044-1202

CUSTOMER #: 35126
BUSINESS ID.: C35126
LICENSE NO.: 35126

LICENSE RENEWAL	FEES
BUILDING COMPONENT INSTALLER	\$100.00

Masonry holders circle the type of work you perform – **Concrete, Masonry or Waterproofing.**

Building Component Installer holders circle the type of work you perform – **Fencing, Steel Erecting, Windows/Doors, or Cabinets.**

TO THE LICENSE/CERTIFICATION HOLDER:

No work may be performed under present license/certification beyond 12/31/2022.

This application must be properly signed and returned before 12/31/2022. The required fee is **\$100.00**. Renewals received after 12/31/2022 also require an application fee of \$25 for each license/certification listed and renewed.

APPLICATION IS NOT COMPLETE UNTIL ALL OF THE FOLLOWING DOCUMENTS HAVE BEEN RECEIVED:

- Renewal Application including Licensee signature; (return this entire form)
- Required Fee (**include** \$25 application fee for each license/certification if returned after 12/31/2022)
- Supporting Documentation
 - Worker's Compensation requirements. If you are unsure whether worker's compensation is required for the business, contact the Department of Workforce Development – Worker's Compensation Division online at <http://dwd.wisconsin.gov/we> or call 608-266-1340.
 - Statement certifying federal and/or state unemployment insurance contributions (if required to pay) are paid up to date.
 - Proof of Financial Responsibility:
 - Liability Insurance policies (Certificate of Insurance). **Attach** a copy of your current (not expired) Insurance Certificate.
- Is name on all credentials the same? If not, list former/maiden name(s): _____

TO THE BOARD OF EXAMINERS:

The undersigned hereby makes application for renewal of City license/certification as described above expiring 12/31/2022.

x Verlin C Wicker
Signature of License Holder (required)

rnpropcare@yahoo.com
Email Address

Residence Address, City State:

110 Rangeline Rd
Kohler WI 53044

Cell Phone: (920) 377-1796

Business Address, City State:

110 Rangeline Rd
Kohler WI 53044

Business Phone: (920) 377-1796

To confirm the license status, you may contact us at: BuildingInspection@sheboyganwi.gov

----- DO NOT WRITE IN SPACE BELOW -----

Date: 5/10/2023 Bill No.: 4305 Check/CC No: 135394472 Fee Pd: \$125 Card: 05/10/2023

May 3, 2023



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

Customer No.: 4366Application Date: 05/10/2023

Approved: _____

on: _____

DO NOT COMPLETE BLANKS ABOVE THIS LINE

TO THE BOARD OF LICENSE EXAMINERS OF THE CITY OF SHEBOYGAN, WISCONSIN*Please type or print neatly and legibly in black or dark blue ink - pencil not acceptable. Incomplete applications will be rejected.***All 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

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

(do not complete this section) in the city of Sheboygan, Wisconsin for the year ending December 31, 20____. The application fee of \$_____ has been paid to the Building Inspection Department as shown by Receipt Number _____. License/Certificate Fee of \$_____ is to be made upon application approval for License/Certificate.

All of the following questions/blanks must be completed:

1 First Name Brian Middle Initial M Last Name Koehler
Home Address W3939 Linden Ct Cell #: () 920-238-0660
City Malone State WI Zip(+4) _____

2 Email briank@sidexsideconstruction.com

3 State Credentials: Dwelling Contractor: None Dwelling Qualifier: None

4 Current Employer Side x Side Construction, LLC

How long have you been employed: 12 years 0 months. Number of employees: 21

Work Address 805 Park Ridge Lane Work #: () 920-238-0660

City N. Fond du Lac State WI Zip(+4) _____

5 Work Experience: For whom have you worked? How did you gain your contracting experience?

For <u>Side x Side Construction, LLC</u>	Address <u>805 Park Ridge Lane, N. Fond du Lac, WI</u>
From Date <u>May 1, 2011</u>	To Date <u>Current</u>
For <u>Stodola Contracting Solutions</u>	Address <u>195 Trowbridge Dr, Fond du Lac, WI</u>
From Date <u>Oct, 2009</u>	To Date <u>April 30, 2011</u>
For <u>Stodola Maas Construction Inc</u>	Address <u>195 Trowbridge Dr, Fond du Lac, WI</u>
From Date <u>June, 1992</u>	To Date <u>Oct, 2009</u>
For _____	Address _____
From Date _____	To Date _____



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

- 6 State in detail the type of work you have been doing: Commercial Carpentry. Both Rough and Finish Carpentry
- and the type of work you expect to do in the future: Commercial Carpentry. Both Rough and Finish Carpentry
- 7 Have you attended a trade school: Yes. If yes, give date, name and address of school(s) attended:
Moraine Park Technical College - Fond du Lac, WI Fall 1993 to Spring 1997
- 8 Did you serve an apprenticeship period? Yes. If so, state with whom, and dates:
ABC of Wisconsin - Fall 1993 to Spring 1997
- 9 Have you ever held a Construction related license? No If YES, list type, date and jurisdiction. _____
- Have you ever had a construction related license denied, refused, or revoked? No If YES, list date, place 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 Municipal Code? 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.

Brian Kuchler
 APPLICANT SIGNATURE
5/9/2023
 DATE

Witnessed by: Donald Schneider
 Print Name: Donald Schneider
 Address: 805 Park Ridge Lane
N. Fond du Lac, WI 54937

Applicant acknowledges:

- a) Receipt of City Ordinance Chapter 26 Division 3 - Contractors
- b) License expires at end of calendar year
- c) It is my responsibility to renew license prior to expiration.
- d) It is my responsibility to submit timely Certificate of Insurance to keep file current



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

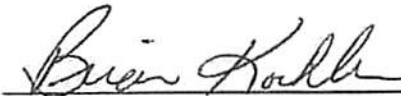
October 26, 2001

TO ALL BUILDING CONTRACTORS:

To better utilize available hours of Building Inspection Department personnel, it is important to reemphasize the process and procedures provided for in city and state codes for required inspections. Please read the attached carefully and adhere to the requirements. If a required inspection is not requested of our department, 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 DEPARTMENT

After you read the attached required inspections, please sign below. **This sheet must accompany your annual license renewal and will be kept on file.**



Building Contractor - Signature

5-9-2023

Date

Side x Side Construction, LLC

Building Contractor - please print

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 _____ has/have 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: _____

Side X Side

CONSTRUCTION

May 9, 2023

City of Sheboygan
Building Inspection Department
828 Center Ave – Suite 105
Sheboygan, WI 53081-4442

RE: Carpenter License

To whom it may concern:

Side x Side Construction, LLC is registered with the State of Wisconsin. Here are our registration Numbers:

Federal Id #: 27-2773468
State Id: 0361027205286-05
Unemployment Comp #: 782304-000-2

All of our taxes are paid on time and have no unpaid taxes

If you need anything further, please let me know.

Sincerely



Donald Schneider
Member

805 Park Ridge Lane
North Fond du Lac, WI 54937

Phone: 920.933.2298
Fax: 920.933.2350

COPY

March 9, 2020

45985

Mr. Tommy J Mathis
1614 S 9th St
Sheboygan WI 53081-5837

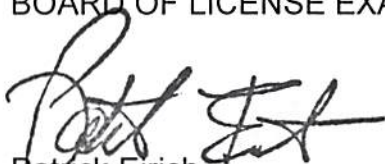
Dear Mr. Mathis:

Your application for Carpenter Contractor has been approved.

We will need a current Certificate of Insurance listing the "City of Sheboygan – Building Inspection" as the Certificate Holder and the \$150.00 fee to process this license. Please procure this license within 30 days of this notice or it will become void.

If you have any questions, please feel free to call me at (920) 459-3480.

BOARD OF LICENSE EXAMINERS



Patrick Eirich
Secretary

PE:gva

BUILDING INSPECTION

CITY HALL
828 CENTER AVENUE
SUITE 208
SHEBOYGAN, WI 53081

920/459-3477 (Phone)
920/459-0210 (Fax)

www.sheboyganwi.gov

yes

yes

January 31, 2020

Mr. Tommy J Mathis
1614 S 9th St
Sheboygan WI 53081-5837

COPY

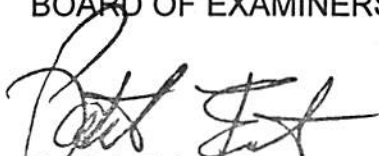
Dear Mr. Mathis:

Please plan to attend the meeting for the Board of License Examiners to discuss your application for a carpenter contractor license. The meeting is scheduled for Tuesday, February 4, 2020 @ 5:00 p.m.

Please come to Conference Room 207 in City Hall at 828 Center Avenue prior to 5:00 p.m. on Tuesday, February 4, 2020. Enter the building on the north side by the flag poles. You will be admitted to the conference room to review your application and discuss your contractor experience.

If you have any questions, please feel free to call me at (920) 459-3480.

BOARD OF EXAMINERS FOR BUILDING CONTRACTORS



Patrick Eirich
Secretary

PE:gva

BUILDING INSPECTION

CITY HALL
828 CENTER AVE., SUITE 208
SHEBOYGAN, WI
53081-4442

920/459-3477
FAX 920/459-0210

www.sheboyganwi.gov

Application No. 45985

Sheboygan, Wis.,

20

Approved by: _____

on _____

Item 9.

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

The undersigned hereby applies for a Carpenter REGISTRATION / LICENSE
to allow him/her to do work at: _____ or in the City of
Sheboygan, Wisconsin during the year ending December 31, 20____.

The Application fee of \$ _____ has been paid to the Building Inspection Department as shown
by their Receipt No. _____. Registration / License Fee of \$ 25 is to be made upon
issuance of the License/Registration.

All of the following questions must be answered:

- 1 First Name Tommy Middle Initial J. Last Name Matthis
Home Address 1614 S. 9th ST. Phone # (920) 627-6489
City Sheboygan State WI Zip (+415) 53081-5837
- 2 Date of Birth 04/04/1975 Place of Birth Butler Co. Missouri
- 3 Are you employed? Yes For Whom? Architectural Products of Wausau
How long have you been employed by them 11 years 8 months.
email Tommy Matthis 3B@gmail.com
Work Address 227400 Rib Mountain Dr Phone # (715) 848-4008
City Wausau State WI Zip (+415) 54401-5048
- 4 State Credentials: Dwelling Contractor: _____ Dwelling Qualifier: _____
- 5 Did you serve an apprenticeship period? NO, If so, state with whom, and give dates: _____
- 6 How long have you worked as a Carpenter? Answer: 25 years.
For whom did you work during this period? (List only the last 10 years)
For Architectural Products Address 227400 Rib Mountain Dr.
From June 08 to Present
For _____ Address _____
From _____ to _____
For _____ Address _____
From _____ to _____
- 7 State in detail the type of work you have been doing: Commercial Construction
New & Remodel
and the type of work you expect to do in the future: Carpentry - Decks, Fences
small remodels
- 8 What schools have you attended? (Give grade, high school, and college, if any):
Orekee High School, Wisconsin Carpentry training
Have you attended a trade school: Yes. If yes, give name and address of school(s) attended:
Wisconsin Carpentry training Center, N25W23055 Paul Rd #3 Pewaukee WI.
- 9 Have you ever applied for a City license? NO If so, give type, place, and date _____
Was it granted? _____. Have you ever had a license denied, refused, or revoked? _____.
If so, explain; giving place and date _____
- 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 Registration/License you are applying
for? Yes Are you familiar with the definition of, and can perform the work required under the
Municipal Code? Yes. Are you willing to take a written examination for a Carpentry
license if required to do so by the BOARD OF EXAMINERS? Yes (License application only).
- 11 If you are granted a registration/license, will you comply with the Ordinance and its amendments,
and with the orders of the Inspector? Yes.

All Applications requiring Board of License Examiners approval must be submitted by 3rd Wednesday prior to meeting.

I, the applicant, mentioned in the foregoing application for a _____ Registration/License,
have read each of the foregoing questions from 1 to 10 inclusive; to which I have made answer, and said
answers in each instance are true and correct.

Witnessed: _____

Print Name: Tommy J. MatthisAddress: 1614 S. 9th ST.
Sheboygan WI 53081

APPLICANT SIGNATURE

October 18, 2018

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For
CASH
\$25
See
Attached

My construction history.

1993-1994 Universal levels, Fredonia Wi,

Production, assembly

Supervisor - Peter Locker

General labor

Equipment used - Table saw, time saver sander, drum sander, table Sanders, super set 23 molder, Drill press and countless hand tools.

Tasks- Brass bound levels, fireplace mantles, custom radius staircase railings, mill works.

1995-1996 Daystar shelter corporation, Bethel Mn,

Construction training program

Instructor-Severin Chmielewski

Equipment used- Table saw, swing saw, panel saw, routers, rip saw, forklift, scaffolding, Extension ladders, step ladders, pneumatic nailers, dry wall left.

Tasks- Complete construction of geodesic dome homes, gazebos, decks, construction of window frames and sashes, construction of doors, framing, window installation, Storm window installation, storm door Installation, Green treated foundations, footings, Asphalt and flat rubber roofing

1997 Creative wood products, Blaine Mn,

Supervisor owner- David Yonchin

Mill work apprentice

Equipment used- Forklift, dovetail machine, drill press, super set 23 molder, time savers, drum Sanders, routers, profile matic, shapers karma table saw, pneumatic tools

I completed a 80 a mill work class for certification of operation and die cutting of knives for the super set 23 molder Certification as operator of this 6 head machine.

Forklift certification

CPR certification

Tasks- Custom cabinets, Raised panel doors, grid doors, mill works

1998 Dave's siding and trim, Sheboygan Wi,

Supervisor owner- David Outland

General labor foreman

Equipment used- 10' siding brake, walk plank, scaffolding, extension ladder, step ladders, Pneumatic nailers, countless other tools

Tasks- Residential siding, roofing, doors and windows

1999-2000 Mantech All-fab, Belgium Wi,

Supervisor owner -Mark Manzeck superintendent Tim Waker

Metal fabricator

Equipment used- Brakes, shears, laminating tables, welder, forklift, router, table saw, drill press

Tasks- Metal panel fabricator, flashing fabricator

2001-2002 Architectural products of Wausau, Wausau Wi,

Supervisor owner-John Schremp

Carpenter Foreman

Equipment used- Aerial lifts, all trained forklift, skid Steer, scaffolding, Scissor lift

Item 9.

New certifications- Osha 10, aerial lift platform, CPR refresher, windload, insulation, framing, silica

Tasks- Commercial Siding installer

2003-2004 Hartman's furniture, Sheboygan Wi,

Supervisor Owner- Bruce Hartman

Finish carpenter custom furniture builder

Equipment used- Table saw, routers, drill press, Sanders, drills, Lathe, Pneumatic tools

Tasks- Custom cabinets, custom furniture, Laminate countertops, butcher block countertops

2005-2008 Allterior carpentry, Franklyn wi,

Equipment used- Mini excavator, skid steer, augurs, pneumatic tools, many different kinds of saws general carpentry tools

Tasks- Remodellings, decks, roofing, fences, flooring repair, tile repair, dry wall, framing, garages, Additions

June of 2008 till present day

Architectural products of wausau

I returned to architectural products of Wausau and joined the carpenters Union in 2008, I worked as a carpenter Foreman from 08-10. In 2010 I was promoted to superintendent and Have run all of architectural products of law saws fieldwork in Southeastern Wisconsin as well as some work in Madison.

Jobs such as-

2008 Columbia Saint marys-Milwaukee wi,

Commerce state bank-West Bend Wi,

2009 bio Kim UW Madison-Madison, drumlane Hall-Whitewater Wi

2010 Milwaukee job Corp- Milwaukee Wi,

2011 1550 water street Prince Fielder's condos

2012 Ryan Braun restaurant and condo-Milwaukee, Mercury Marine addition-fon da lac

2013 Aurora Burlington, Burlington Wi,

2014 summer fest world headquarters office building

2015 general Mitchell International airport baggage claims care so 1 through 5 interior and exterior,

Augustine preparatory Academy- Milwaukee, pro health medical facility-Pewaukee Wi,

2016 corners of Brookfield -Brookfield wi, Marshall's shopping center -West Allis Wi,

2017 84 South mall- Greenfield Wi, Aurora urgent care West Allis, Alington elementary school- Alington Wi, Slinger high school-slinger Wi, Sheboygan South high school Main entrance canopy

2018 1840 North Farwell condos a 152 units 14 story building complete exterior, Aurora Greenfield, General Mitchell International firehouse

2019 Sussex intermediate school- Sussex Wi

New certifications- Osha 30, industrial rigging, swing stage aerial lift platforms, CPR refresher course, drafting blue print reading, drafting blue print drawing , Air barrier weather proofing ,

I am currently the superintendent and project manager for our company for the exterior of the Aurora Kohler hospital, My intentions are to slowly throughout the course of 2020 and to 2021 move into my own private business, I would like to bring the talents and skills that I have learned over the years closer to home, I moved to Sheboygan in 1998. My wife and I raised our family here, we have 3 wonderful children ages 22, 17, 9.

My 22 year old son Has worked with me in the Union for the past 3 and a 1/2 years, He will complete his apprenticeship this year and we have hopes that he will join me in a family business in the future, This is our 1st step in our new journey.

Ironwood **Carpentry, LLC**

Item 9.

Tommy Mathis

920-627-8122

ironwood2023@gmail.com

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CITY OF SHEBOYGAN
828 CENTER AVE

SHEBOYGAN, WI 53081

MISCELLANEOUS PAYMENT RECPT#: 190657
DATE: 05/19/23 TIME: 10:02:33
CLERK: wierus DEPT: BUILDING IN
S
CUSTOMER#: 45985
MATHIS, TOMMY J.
COMMENT: LIC 2023 APP FEE

CHARGES:
 X0001 BI - CONTRACTOR 25.00
AMOUNT: 25.00

AMOUNT DUE: 25.00

PAID BY: MATHIS, TOMMY J.
PAYMENT METH: CASH
PAYMENT REF#:

GL REFERENCE:

AMT TENDERED: 25.00
AMT APPLIED: 25.00
CHANGE: 0

MISCELLANEOUS PAYMENT RECEIPT#
CITY OF SHEBOYGAN
828 CENTER AVENUE
SHEBOYGAN WI 53081

DATE: 02/03/20 TIME: 09:16
CLERK: bicntr DEPT: BUILDING INSPE
CTION
CUSTOMER#: 45985
CUSTOMER NAME: MATHIS, TOMMY J.
COMMENT: CARP LIC APP FEE

CHARGES:
X0001 BI - CONTRACTORS LICENSES CARPENTER
LIC APP FEE 25.00

AMOUNT PAID: 25.00
PAID BY: MATHIS, TOMMY J.
PAYMENT METHOD: CASH

REFERENCE: GVA

AMT TENDERED: 25.00
AMT APPLIED: 25.00
CHANGE: .00