



BOARD OF LICENSE EXAMINERS AGENDA

April 05, 2022 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 - February 1, 2022

ITEMS FOR DISCUSSION AND POSSIBLE ACTION

6. Contractor #51958 - Max R Maigatter - General (Exam)
- [7.](#) Contractor #39784 - Steve J Coffee - Carpenter
- [8.](#) Contractor #1934 - Damir Herdic - Carpenter
- [9.](#) Contractor #4991 - Jace Bissonette - Building Component Installer
- [10.](#) Contractor #4986 - Carriveau, Eric - Building Component Installer
11. Complaint - Charles Yurk by Key Ins

NEXT MEETING DATE

12. Next scheduled meeting: June 7, 2022 at 5:00 PM

ADJOURN

13. 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*

MINUTES

Item 5.

BOARD OF LICENSE EXAMINERS - 5:00 PM (Tuesday, February 1, 2022)

Generated by Gary Van Auken on Thursday, February 3, 2022

1. OPENING OF MEETING

Action, Procedural: 1.1 Roll Call

Board Members Present: Ald. Markus Savaglio, Andy Hopp, Craig Seider, Todd Thone

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

Others Present: Max Maigatter, Jesus Cervantes

Procedural: 1.2 Call to Order

Procedural: 1.3 Pledge of Allegiance

Procedural: 1.4 Introduction of Commission members and staff

2. MINUTES

Action, Minutes: 2.1 Approval of Minutes

Motion by Todd Thone, seconded by Ald. Markus Savaglio to approve the minutes of December 7, 2021. Motion carried.

3. ITEMS FOR ACTION

Action: 3.1 Contractor #39784 - Steve J Coffee - Carpenter

Motion by Andy Hopp, seconded by Todd Thone to hold over to next meeting. Motion carried.

Action: 3.2 Contractor #51958 - Max R Maigatter - General

Motion by Craig Seider, seconded by Todd Thone to take exam for General Contractor. Motion carried.

Action: 3.3 Contractor #34448 - Jesus J Cervantes - Carpenter

Motion by Andy Hopp, seconded by Craig Seider to grant city Carpenter Accessory license. Motion carried.

4. NEXT MEETING DATE

Action: 4.1 Next scheduled meeting April 12, 2022 at 5:00 p.m.

Motion by Andy Hopp, seconded by Todd Thone to have next meeting on April 12, 2022. Motion carried.

5. ADJOURN

Action: 5.1 Motion to Adjourn

Motion by Craig Seider, seconded by Andy Hopp to adjourn meeting at 5:30 p.m. Motion carried.



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

Application No. 39784 Sheboygan, Wis., 11-9, 20 21
Approved by: _____ on _____

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

The undersigned hereby applies for a Carpenter Building Carpenter Installation Carpenter Cabinet
to allow him/her to do work at: 2042 Jay Road or in the City of
Sheboygan, Wisconsin during the year ending December 31, 20____.

The Application fee of \$25.25 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 Steve Middle Initial J Last Name Coffee
Home Address 854 Delta Street Phone # (262) 443-2762
City Cleveland State WI Zip(+4) 53015-1582
- Date of Birth 8/10/70 Place of Birth West Allis, WI
- Are you employed? yes For Whom? T. Coffee Construction
How long have you been employed by them 8 years _____ months.
email sjcoffee@yahoo.com
Work Address 854 Delta Street Phone # (262) 443-2762
City Cleveland State WI Zip(+4) 53015
- State Credentials: Dwelling Contractor: DLQ 082100883 Dwelling Qualifier: DL 082100908
- How long have you worked as a Contractor? Answer: 30 years.
For whom did you work during this period? (List only the last 10 years)
For LEATHERNECKS Address 711 York St Manitowish
From 1994 To 2019
For T. Coffee Const Address 854 Delta Street
From 2020 To Present
For _____ Address _____
From _____ To _____
- State in detail the type of work you have been doing: Deck & Fence Construction,
Shed & Garage Construction, Flooring, Interior Remodels, etc.
and the type of work you expect to do in the future: Same

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

Superior College
VT Carpentry

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

8 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 _____

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 yes license/registration if required to do so by the BOARD of LICENSE EXAMINERS (License application only)? ____.

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: _____

Ellise Rose
Ellise Rose
828 Center Ave
Sheboygan WI 53081

Secc

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

11-8-21
Date


Building Contractor - please print



Application No. 1934 Sheboygan, Wis., 02/16, 20 22
Approved by: _____ on _____

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

The undersigned hereby applies for a Carpenter 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 \$ 25.00 has been paid to the Building Inspection Department as shown by Receipt
Number 161531. License/Registration Fee of \$ 150.00 is to be made upon issuance of the
License/Registration.

All of the following questions must be answered:

- 1 First Name Damir Middle Initial _____ Last Name Herdic
Home Address 3123 N. 12th Street Phone # (920) 889-6257
City Sheboygan State WI Zip(+4) 53083-4010
- 2 Date of Birth 12/10/1982 Place of Birth Bosnia
- 3 Are you employed? Self For Whom? Lakefront Home Improvements
How long have you been employed by them 2 years 1 months.
email lfhi920@gmail.com
Work Address 3123 N. 12th Street Phone # (920) 889-6257
City Sheboygan State WI Zip(+4) 53083-4010
- 4 State Credentials: Dwelling Contractor: DC-102001068 Dwelling Qualifier: DCQ-102001125
- 5 How long have you worked as a General Carpenter ? Answer: 22 years.
For whom did you work during this period? (List only the last 10 years)
For S+H Remodeling Inc. Address 12016 MacArthur Ave. Sheboygan, WI
From July 2008 To May 2020 53083
For _____ Address _____
From _____ To _____
For _____ Address _____
From _____ To _____
- 6 State in detail the type of work you have been doing: Exterior Renovations: including vinyl siding,
stucco, LP siding, as well as, kitchen installs, baths, texture, painting, tile install
and the type of work you expect to do in the future: Same as listed above
General Carpenter



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

Item 8.

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

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

8 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 _____

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 Carpenter 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 Carpenter 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: _____

Amber L. Herdic
Amber L. Herdic
3123 N. 12th St.
Sheboygan, WI 53083-4010

APPLICANT SIGNATURE

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

02-06-2022

Date

DAMIR HERDIC

Building Contractor - please print

Division of Professional Credential
Processing
4822 Madison Yards Way
Madison, WI 53705
Phone: (608) 266-2112
Fax: (608) 267-0592
Email: dspsc CredTrades@wi.gov
Website: www.dsps.wi.gov

Item 8.

Certification, License, or Registration Card

Below you will find your certification, license or registration card. This card serves as an additional piece of documentation of licensure that may be carried on person. To view details about your credential or continuing education log into the eSLA portal where you can view your credential status or use the public lookup to verify the status of your CE. To access the eSLA portal, navigate to **www.eSLA.wi.gov**.

Wisconsin Department of Safety and Professional Services	
Damir Herdic	
Credential ID: DCQ-102001125	
Customer ID:	
Certification, License, or Registration Name	Expires:
Dwelling Contractor Qualifier	2022-10-12
Signature:	

Please review the information on the card. If errors or discrepancies are found, you may contact the Department at 608-266-2112 or email DSPSCredTrades@wi.gov, and provide your ID number printed on the card. The Department should be notified of changes in addresses as they occur. Notification of address changes is the responsibility of the credential holder. A renewal notice will be emailed to the email address on file 30 and 60 days before expiration. Before the expiration date of each credential indicated on the card. Renewals are contingent upon compliance with the requirements specified in Wisconsin Administrative Code SPS 305.

Division of Professional Credential
Processing
4822 Madison Yards Way
Madison, WI 53705
Phone: (608) 266-2112
Fax: (608) 267-0592
Email: dspsc CredTrades@wi.gov
Website: www.dsp.wi.gov

Item 8.

Certification, License, or Registration Card

Below you will find your certification, license or registration card. This card serves as an additional piece of documentation of licensure that may be carried on person. To view details about your credential or continuing education log into the eSLA portal where you can view your credential status or use the public lookup to verify the status of your CE.

Wisconsin Department of Safety and Professional Services	
Lakefront Home Improvements LLC	
Credential ID: DC-102001068	
Certification, License, or Registration Name	Expires:
Dwelling Contractor	2022-10-13
Signature:	

Please review the information on the card. If errors or discrepancies are found, you may contact the Department at 608-266-2112 or email DSPSCredTrades@wi.gov, and provide your ID number printed on the card. The Department should be notified of changes in addresses as they occur. Notification of address changes is the responsibility of the credential holder. A renewal notice will be emailed to the email address on file 30, 60, and 90 days before expiration. Before the expiration date of each credential indicated on the card. Renewals are contingent upon compliance with the requirements specified in Wisconsin Administrative Code SPS 305.

Application No. _____

Sheboygan, Wis.,

03/24, 2022

Item 9.

Approved by: _____ on _____

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

The undersigned hereby applies for a Bldg Comp 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 \$ _____ Dollars (\$ _____) has been paid to the Building Inspection
Department as shown by their Receipt No. _____. Registration / License Fee of \$ _____
is to be made upon issuance of License/Registration.

All of the following questions must be answered:

- Name Jace Bissonette Work telephone # (920) 905-3736
Address 1745 Cedar Grove Drive Apt 2A Home telephone # (920) 905-3736
City Manitowish State WI Zip 54220
- Date of Birth 01/30/1996 Place of Birth Wisconsin Jace Bissonette
- Are you employed? Yes For Whom? Ryan Peters LLC, 14826 Wroton Lane Valders, WI 54245
(GIVE NAME AND ADDRESS)
How long have you been employed by them 3 years 0 months.
- Did you serve an apprenticeship period? NO If so, state with whom, and give dates: _____
- How long have you worked as a Window/door installer? Answer: 3 years.
For whom did you work during this period? Not more than the last 10 years need be given.
For Ryan Peters LLC Address 14826 Wroton Lane Valders, WI 54245
From _____ to _____
Address _____
For _____ to _____
Address _____
For _____ to _____
Address _____
For _____ to _____
Address _____
- State in detail the type of work you have been doing: Window/door installation/siding
the type of work you expect to do in the future: Window/door installation/siding
- What schools have you attended? (Give grade, high school, and college, if any):
Mishicot High School, Lakeshore Technical HSED
- Have you attended a trade school: _____. If yes, give name and address of school(s) attended: _____
- Have you ever applied for a 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 _____
- 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 City contractor's license if required to do so by the BOARD OF EXAMINERS? Yes (License application only).
- 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 examiners approval must be submitted by the 3rd Friday of each month.

I, the applicant mentioned in the foregoing application for a City contractor's 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: _____

Address: _____

APPLICANT

PLANT ELECTRICIANS ONLY

Applicant _____

This is to certify that _____ is hereby approved as a plant electrician

at _____

Address: _____

Signed _____

Title _____



BUILDING INSPECTION DEPARTMENT Item 9.
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

3/24/22
Date

Jace Bissonette
Building Contractor - please print

4986 Sherboyan, Wis. 03/28/22

Application for a Bldg Comp REGISTRATION LICENSE

The undersigned hereby applies for a Bldg Comp REGISTRATION LICENSE in the City of Sherboyan, Wisconsin during the year ending December 31, 2022.

The Applicant has (X) YES () NO been paid to the Building Inspection Department as shown by their receipt No. _____ Registration License Fee of \$ ____.

All of the following questions must be answered:

- Name Eric Carriveau Home telephone # 700 650-6143
Address 1321 S 21st Home telephone # 54330
City Manitowish State WI Zip 54245
- Date of Exp. 8-31-19 Place of Birth Manitowish Eric Carriveau
Valders, WI 54245
- Are you employed? YES For whom? Ryan Peters LLC
How long have you been employed by them? 2 years 10 months
- Did you serve as an apprenticeship? NO If so, state with whom and give dates
- How long have you worked as a windows & door installer 2 1/2 years.
For whom? Ryan Peters Address 14826 Wrolsen Lane Valders, WI 54245
City Valders State WI Zip 54245
- State in detail the type of work you have been doing: windows & door installation
the type of work you expect to do in the future: windows & door installation
- What school have you attended? (high school, college, etc.)
Lincoln High School
Have you attended a trade school? NO If yes, give name and address of school attended
- Have you ever applied for a license? NO If yes, give year, place, and date
When a license? _____ Have you ever had a license denied, refused, or revoked? _____
If so, explain, giving place and date
- Have you read the Ordinance and all amendments to date which were passed by the Common Council of the City of Sherboyan, Wisconsin, pertaining to the Registration License you are applying for? YES Are you familiar with the definition of a city contractor? YES Are you willing to take a written examination for a license if required by the BOARD OF EXAMINERS? YES (License application only)
- If you are granted a registration license, will you comply with the Ordinance and amendments, and with the orders of the Inspector? YES

All Applications requiring Board of examiners approval must be submitted by the 2nd Friday of each month.

I, the applicant mentioned in the foregoing application for a city contractor 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: Eric Carriveau
Address: _____ APPLICANT

PLANT ELECTRICIANS ONLY

Applicant _____
This is to certify that _____ is hereby approved as a plant electrician
At _____ Address _____
Signed _____ Title _____

Phone: (920) 452-
buildinginspection@sheboygan.gov

Sheboygan

Order No. 76 (1/11)

TO ALL BUILDING CONTRACTORS:

In order to ensure the safety of building inspection personnel, it is important to reemphasize the 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 completed or not inspected by our department, a penalty inspection fee of \$25 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.

Eric Cariveau 3-24-22
Building Contractor - Signature Date

Eric Cariveau
Building Contractor - please print