



# BOARD OF LICENSE EXAMINERS AGENDA

**April 05, 2022 at 5:00 PM**

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

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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
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



www.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 Equipment~~ ~~Installation~~ ~~Carpenter~~ ~~Cabinets~~ LICENSE/REGISTRATION 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:

1 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

2 Date of Birth 8/10/70 Place of Birth West Allis, WI

3 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

4 State Credentials: Dwelling Contractor: DLQ 082100883 Dwelling Qualifier: DL 082100908

5 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 \_\_\_\_\_

6 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



www.sheboyganwi.gov

BUILDING INSPECTION DEPARTMENT  
828 Center Avenue, Suite 200  
Sheboygan, WI 53081-4442  
Phone: (920) 459-3477  
buildinginspection@sheboyganwi.gov

Item 7.

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 Y/A 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 3<sup>rd</sup> 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: Ellise Rose  
Print Name: Ellise Rose  
Address: 828 Center Ave  
Sheboygan WI 53081

[Signature]  
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

11-9-21  
Date

Steve Coffey  
\_\_\_\_\_  
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-102001018 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



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 3<sup>rd</sup> 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: Amber L. Herdic  
Print Name: Amber L. Herdic  
Address: 3123 N. 12th St.  
Sheboygan, WI 53083-4010

[Signature]  
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: [dspscradtrades@wi.gov](mailto:dspscradtrades@wi.gov)  
Website: [www.dsps.wi.gov](http://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](http://www.eSLA.wi.gov).

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

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](mailto: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: [dspscradtrades@wi.gov](mailto:dspscradtrades@wi.gov)  
Website: [www.dsp.wi.gov](http://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.

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

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](mailto: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 Consp 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:

1 Name Jace Bissonette Work telephone # (920) 905-3736  
Address 1715 Cedar Grove Drive Apt 2A Home telephone # (920) 905-3736  
City Manitowish State WI Zip 54220

2 Date of Birth 01/30/1996 Place of Birth Wisconsin Jace Bissonette

3 Are you employed? Yes For Whom? Ryan Peters LLC, 14826 Wroslon Lane Valders, WI 54245  
(GIVE NAME AND ADDRESS)  
How long have you been employed by them 3 years 0 months.

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

5 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 Wroslon Lane Valders, WI 54245  
From \_\_\_\_\_ to \_\_\_\_\_  
For \_\_\_\_\_ Address \_\_\_\_\_  
From \_\_\_\_\_ to \_\_\_\_\_  
For \_\_\_\_\_ Address \_\_\_\_\_  
From \_\_\_\_\_ to \_\_\_\_\_  
For \_\_\_\_\_ Address \_\_\_\_\_

6 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

7 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:

8 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 \_\_\_\_\_

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 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).

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 examiners approval must be submitted by the 3<sup>rd</sup> 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: \_\_\_\_\_

Jace Bissonette  
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.

Jim Beuth  
Building Contractor - Signature

3/24/22  
Date

Jace Bissonette  
Building Contractor - please print

4986  
 03/28/22  
 TO THE BOARD OF EXAMINERS OF THE CITY OF SHEBOYGAN, WISCONSIN  
 The undersigned hereby applies for a Bldg Comp REGISTRATION/LICENSE  
 as a Contractor in the City of Sheboygan, Wisconsin during the year ending December 31, 2022  
 The Applicant has yes  no  been paid to the Building Inspection Department as shown by their receipt no. \_\_\_\_\_ Registration License Fee of \$ \_\_\_\_\_  
 to be made upon issuance of License/Registration.  
 All of the following questions must be answered:  
 1. Name Eric Carriveau Phone (include if home telephone) 700 450-6113  
 Address 1321 S 21st Home telephone # \_\_\_\_\_  
 City Manitowish State WI Zip 54230  
 2. Date of birt 8-21-1974 Place of birt Manitowish Eric Carriveau  
 3. Are you employed? yes For whom? Ryan Peters LLC 14826 Wrolsen Lane  
 How long have you been employed for them? 2 years 10 months Valders, WI 54245  
 4. Did you serve an apprenticeship? no If so, state with whom, and give dates \_\_\_\_\_  
 5. How long have you worked as a window & door installer 2 1/2 years  
 For whom and for how long during this period? Not more than the last 10 years need be given  
 For Ryan Peters 2019 Address 14826 Wrolsen Lane Valders, WI 54245  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 6. State in detail the type of work you have been doing: window & door installation  
 the type of work you expect to do in the future: retrofit window insulation, siding  
 7. What schools have you attended? (include grade, high school, and college, if any)  
Lincoln High School  
 Have you attended a trade school? no If yes, give name and address of school attended \_\_\_\_\_  
 8. Have you ever applied for a license? no If no, give year, place, and date \_\_\_\_\_  
 When 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 Registration/licenses you are applying for? yes Are you familiar with the definition of a \_\_\_\_\_ and can perform the work required under the Municipal Code? yes Are you willing to take a written examination for a \_\_\_\_\_ license if required to do so by the BOARD OF EXAMINERS? yes (License scope (if any)) city contractors  
 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 regarding Board of examiners approval must be submitted by the 31st Friday of each month.  
 I, the applicant mentioned in the foregoing application for a city contractors 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.  
 Eric Carriveau  
 APPLICANT  
 Witnessed: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 PLANT ELECTRICIANS ONLY  
 Applicant \_\_\_\_\_  
 This is to certify that \_\_\_\_\_ is hereby approved as a plant electrician  
 At \_\_\_\_\_ Address \_\_\_\_\_  
 Signed \_\_\_\_\_ Title \_\_\_\_\_

Phone: (920) 459-  
buildinginspection@sheboygan.gov

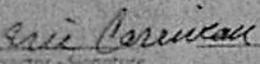
Date: 3/24/02

**TO ALL BUILDING CONTRACTORS:**

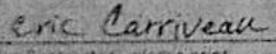
In order to save each of your hours of building inspection department services, it is important to re-emphasize the process provided for in city and state codes for required inspections. Please read the attached carefully and adhere to requirements. If a required inspection is not completed or not approved by the department, a penalty inspection fee of \$20 will be assessed. The inspection at your own expense, is still required even if this means having to support, dismantle, or excavate the structure.

**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

3-24-02  
 Date

  
 Building Contractor - please print