

**AGENDA**  
**LICENSING/PERMIT COMMITTEE**  
**Kenosha Municipal Office Building – Room 202**  
**Monday, August 12, 2013**  
**6:30 p.m.**

**Chairman: Jesse Downing**  
**Vice Chair: Patrick Juliana**  
**Aldersperson: Anthony Kennedy**

**Aldersperson: Curt Wilson**  
**Aldersperson: Chris Schwartz**

**CALL TO ORDER**  
**ROLL CALL**

Approval of the minutes of the regular meeting held July 29, 2013.

*NOTE: All licenses and permits are subject to withholding of issuance by the City Clerk as specified in Section 1.045 of the Code of General Ordinances.*

1. Applications for new Operator's (Bartender) licenses, with a recommendation from the City Attorney to grant, subject to:  
**- 20 demerit points:**
  - a. Amanpreet Singh
  - b. David Strohm
  - c. Heidi Reau
2. Application of Lori McDonald for a new Operator's (Bartender) license, with a recommendation from the City Attorney to deny, based on material police record. (*Deferred from the meeting on July 29, 2013*)
3. Application of Scott Poskus for a new Taxi Driver's License, with a recommendation from the City Attorney to defer. Applicant needs to provide additional documentation. (*Deferred from the meeting on July 29, 2013*)
4. Application of Larry Sherrod for a new Taxi Driver's License, with a recommendation from the City Attorney to deny, based on material police record.
5. Application of Taste of NY Pizzeria, LLC, (Amber Bajrami, Agent, 5703 - 6<sup>th</sup> Ave., *Slice of NY Pizzeria*), for an Outdoor Dining Area License, with no adverse recommendations. (2<sup>nd</sup> District)
6. Application of Flint's Inn, Inc., for a change in closing hours of the Outdoor Extension located at 4708 - 22<sup>nd</sup> Avenue, (Flint's Inn), to midnight, with no adverse recommendations. (7<sup>th</sup> District)
7. Application of Antonio's Pizza & Pasta, LLC, (*Dale Rice, Agent, 2410 - 52<sup>nd</sup> Street, 5 Fifty Pizza & Pub*) for a Yearly Cabaret License (2013-2014 Term), with no adverse recommendations. (7<sup>th</sup> District)
8. Application of A-N-T Transportation, Inc., (5701 - 75<sup>th</sup> Street), for a Taxicab Permit, with no adverse recommendations. (14<sup>th</sup> District)
9. Application of First Step Services, Inc., for a Refuge Center License at 1017 63<sup>rd</sup> Street, with no adverse recommendations. (3<sup>rd</sup> District)
10. Ordinance by Aldersperson Michael J. Orth – To Repeal and Recreate Section 13.035.B.2 of the Code of General Ordinances for the City of Kenosha Regarding Peddler's Stands Operation.

**CITIZENS COMMENTS/BUSINESS AS AUTHORIZED BY LAW**  
**ALDERMEN COMMENTS**

NOTICE IS HEREBY GIVEN THAT A MAJORITY OF THE MEMBERS OF THE COMMON COUNCIL MAY BE PRESENT AT THE MEETING, AND ALTHOUGH THIS MAY CONSTITUTE A QUORUM OF THE COMMON COUNCIL, THE COUNCIL WILL NOT TAKE ANY ACTION AT THIS MEETING.

IF YOU ARE DISABLED AND IN NEED OF ASSISTANCE, PLEASE CALL 653-4020 BEFORE THIS MEETING

**Licensing/Permit Committee**  
**Minutes of Meeting Held July 29, 2013**

A meeting of the Licensing/Permit Committee was held on July 29, 2013 in Room 202 of the Kenosha Municipal Building.

The meeting was called to order at 7:10 p.m. by Chair Downing.

At roll call, the following members were present: Alderpersons Juliana, Wilson, Kennedy and Schwartz. Deputy City Attorney Matt Knight was present.

Approval of the minutes of the meeting held July 8<sup>th</sup>, 2013.

**It was moved by Alderperson Juliana, seconded by Alderperson Wilson to approve. Motion carried unanimously.**

1. Applications for new Operator's (Bartender) licenses, with a recommendation from the City Attorney to grant, subject to:
  - **20 demerit points:**
    - a. Devin Dorsey
    - b. April Gustafson
    - c. Daniel Leiting
    - d. Keli Mielke
    - e. Maureen Modory
    - f. Jagjit Singh
    - g. Holly Schonscheck
    - h. Hector Cedenno Silva
  - **40 demerit points:**
    - i. Lisette Gomez
    - j. Matthew Freeman
  - **60 demerit points:**
    - k. Scott Bohlman
  - **80 demerit points:**
    - l. Baron Olsen

**It was moved by Alderperson Wilson, seconded by Alderperson Juliana to concur with the recommendation of the City Attorney. Motion carried unanimously.**

2. Application of Lori McDonald for a new Operator's (Bartender) license, with a recommendation from the City Attorney to deny, based on material police record.

**Applicant was present and spoke. Alderpersons Kennedy and Juliana spoke. It was moved by Alderperson Juliana, seconded by Alderperson Wilson to concur with the recommendation of the City Attorney. Motion was withdrawn. It was moved by Alderperson Kennedy, seconded by Alderperson Schwartz to defer to the meeting on August 12, 2013. Motion carried unanimously.**

3. Application of Christopher Johnson for a new Taxi Driver's License, with a recommendation from the City Attorney to grant, subject to 40 demerit points.

**Applicant was present and spoke. It was moved by Alderperson Juliana, seconded by Alderperson Wilson to concur with the recommendation of the City Attorney. Motion carried unanimously.**

4. Application of Scott Poskus for a new Taxi Driver's License, with a recommendation from the City Attorney to defer. Applicant needs to provide additional documentation.

**It was moved by Alderperson Juliana, seconded by Alderperson Wilson to defer to the meeting on August 12, 2013. Motion carried unanimously.**

5. Application of N&S Source, Inc., Nihal Singh, Agent, for a Class "A" Retail Beer Only License located at 6119 - 22<sup>nd</sup> Avenue, (Uptown Pantry), to be effective August 6<sup>th</sup>, 2013, upon surrender of a similar license from Gala Corporation, with no adverse recommendations. (3<sup>rd</sup> District)

**Applicant was present and spoke. Alderperson Kennedy spoke. It was moved by Alderperson Juliana, seconded by Alderperson Kennedy to approve. Motion carried unanimously.**

6. Application of Kavalauskas, LLC, (2325 - 52<sup>nd</sup> Street, Spanky's Bar & Grill), for a Temporary Outdoor Extension on August 9<sup>th</sup> and August 10<sup>th</sup>, 2013, with no adverse recommendations. (7<sup>th</sup> District)

**Applicant was present and spoke. It was moved by Alderperson Juliana, seconded by Alderperson Schwartz to approve. Motion carried unanimously.**

7. Application of Sunset Grille, LLC, (Stacey West-Rivera, Agent, 2500 52<sup>nd</sup> St., Sunset Grille & Mulligan's Pub), for a Daily Cabaret License on August 10, 2013. (7<sup>th</sup> District)

**It was moved by Alderperson Juliana, seconded by Alderperson Kennedy to approve. Motion carried unanimously.**

8. Application of Kavalauskas, LLC, (Rick Kavalauskas, Agent, 2325 - 52<sup>nd</sup> Street, Spanky's Bar & Grill), for a Yearly Cabaret License (2013-2014 Term), with no adverse recommendations. (7<sup>th</sup> District)

**It was moved by Alderperson Juliana, seconded by Alderperson Schwartz to approve. Motion carried unanimously.**

9. Application of Groby, LLC, (Mark Gerber, Agent, 2627 - 63<sup>rd</sup> Street, Gerb's Tap), for a Yearly Cabaret License (2013-2014 Term), with no adverse recommendations. (3<sup>rd</sup> District)

**It was moved by Alderperson Juliana, seconded by Alderperson Schwartz to approve. Motion carried unanimously.**

10. Application of Abdul Kaisani (3214 - 60<sup>th</sup> Street, Pop's Place), for a Yearly Cabaret License (2013-2014 Term), with an adverse recommendation from the Police Department. (11<sup>th</sup> District) (*Deferred from the meeting on July 29, 2013*)

**No action taken.**

11. Application of Kavalauskas, LLC, (2325 - 52<sup>nd</sup> Street, Spanky's Bar & Grill), for an Outdoor Area – Cabaret/Amplified License on August 9<sup>th</sup> and August 10<sup>th</sup>, 2013, with no adverse recommendations. (7<sup>th</sup> District)

**It was moved by Alderperson Juliana, seconded by Alderperson Schwartz to approve. Motion carried unanimously.**

12. Application of Traci Peterson, (2425 - 60<sup>th</sup> Street, Hatrix), for an Outdoor Area-Cabaret/Amplified License on August 10<sup>th</sup> and August 11<sup>th</sup>, 2013, with no adverse recommendations. (3<sup>rd</sup> District)

**It was moved by Alderperson Juliana, seconded by Alderperson Schwartz to approve. Motion carried unanimously.**

13. Application of 52<sup>nd</sup> Gold Exchange, Inc., for a Secondhand Jewelry Dealer License located at 7519 - 22<sup>nd</sup> Avenue, (52<sup>nd</sup> Gold Exchange), with no adverse recommendations. (13<sup>th</sup> District) (*Deferred from the meetings on February 25<sup>th</sup>, March 11<sup>th</sup>, and July 8<sup>th</sup>, 2013*)

**Alderperson Wilson spoke. It was moved by Alderperson Wilson, seconded by Alderperson Schwartz to deny, based on inaccurate description of business. Motion carried unanimously.**

14. Application of Jadvyga Valiauga for a Massage Therapist License, with no adverse recommendations.

**It was moved by Alderperson Kennedy, seconded by Alderperson Wilson to approve. Motion carried unanimously.**

15. Application of Michael Hogan for a Pet Fancier Permit, with no adverse recommendations.

**Applicant was present and spoke. Alderperson Kennedy spoke. It was moved by Alderperson Kennedy, seconded by Alderperson Downing to approve. Motion carried unanimously.**

16. Ordinance by Alderperson Jesse Downing – To Repeal, Recreate and Renumber Various Subsections of 10.03 and 10.063 of the Code of General Ordinances for the City of Kenosha Regarding Demerit Points.

**Shirley Willie, Deputy City Attorney Knight and Alderperson Kennedy spoke. It was moved by Alderperson Kennedy, seconded by Alderperson Juliana to defer to the meeting on August 26, 2013. Motion carried unanimously.**

**CITIZEN COMMENTS: None.**

**STAFF/ALDERMEN COMMENTS: Deputy City Attorney Matt Knight spoke regarding establishing dates for revocation hearings.**

**There being no further business to come before the Licensing/Permit Committee, it was moved, seconded and unanimously carried to adjourn at 7:50 p.m.**

**NEW BARTENDER License**

**Police Record Report**

**APPLICANT INFORMATION**

<b>Date of Application</b> 7/29/2013	<b>Name of Applicant</b> Amanpreet Singh	<b>Applicant's Date of Birth</b> [REDACTED]	<b>Driver's License Status</b> Valid
<b>License Number</b> N140632	<b>Address of Applicant</b> 7029 S. Carmel Drive	<b>Business (where license is to be used)</b> 22nd Mobil	<b>Business Address</b> 4433-22nd Ave

<b>DATE OF CHARGE</b>	<b>OFFENSE</b>	<b>CASE STATUS</b>	<b>OFFENSE LISTED ON APPLICATION</b>	<b>POINTS</b>
8/11/2009	OPERATING W/O LICENSE	GUILTY	Y	20

**CITY ATTORNEY'S RECOMMENDATION**

<b>Offense Demerit Points</b>	20	
<b>Were all offenses listed on the application?</b>	Y	
<b>TOTAL DEMERIT POINTS</b>	20	

**CITY ATTORNEY'S COMMENTS**


**FINAL RECOMMENDATION**

**GRANT**, Subject to  Demerit Points  
 **DENY**, based on material police record (substantially related to the license activity)  
 **DEFER or GRANT** subject to Non-Renewal Revocation due to False Application



**APPLICANT INFORMATION**

<b>Date of Application</b>	<b>Name of Applicant</b>	<b>Applicant's Date of Birth</b>	<b>Driver's License Status</b>
7/26/2013	Heidi Reau		Suspended
<b>License Number</b>	<b>Address of Applicant</b>	<b>Business (where license is to be used)</b>	<b>Business Address</b>
N140631	3824-14th Ave., Lower	Lou Ferrine's	

<b>DATE OF CHARGE</b>	<b>OFFENSE</b>	<b>CASE STATUS</b>	<b>OFFENSE LISTED ON APPLICATION</b>	<b>POINTS</b>
3/29/2012	ANIMAL LAWS, OTHER - Failure to remove Animal	GUILTY	Y	
6/14/2012	ANIMAL AT LARGE	GUILTY	Y	
6/14/2012	ANIMAL LAWS, OTHER - Rabies	GUILTY	Y	
6/14/2012	ANIMAL LAWS, OTHER - No Dog License	GUILTY	Y	20

**CITY ATTORNEY'S RECOMMENDATION**

<b>Offense Demerit Points</b>	20
<b>Were all offenses listed on the application?</b>	Y
<b>TOTAL DEMERIT POINTS</b>	20

**CITY ATTORNEY'S COMMENTS**


**FINAL RECOMMENDATION**

- GRANT**, Subject to  Demerit Points
- DENY**, based on material police record (substantially related to the license activity)
- DEFER or GRANT subject to Non-Renewal Revocation due to False Application**

**NEW BARTENDER License**

**Police Record Report**

**APPLICANT INFORMATION**

<b>Date of Application</b> 7/9/2013	<b>Name of Applicant</b> Lori McDonald	<b>Applicant's Date of Birth</b>	<b>Driver's License Status</b> Valid
<b>License Number</b> N140594	<b>Address of Applicant</b> 1301-52nd Avenue	<b>Business (where license is to be used)</b> Red Robin	<b>Business Address</b> 6610 Green Bay Rd.

<b>DATE OF CHARGE</b>	<b>OFFENSE</b>	<b>CASE STATUS</b>	<b>OFFENSE LISTED ON APPLICATION</b>	<b>POINTS</b>
3/16/2010	OPERATING WHILE INTOXICATED - 3RD 2010CT281	GUILTY	Y	80
3/17/2010	IMPLIED CONSENT 2010TR2446	GUILTY	Y	20

**CITY ATTORNEY'S RECOMMENDATION**

<b>Offense Demerit Points</b>	100
<b>Were all offenses listed on the application?</b>	Y
<b>TOTAL DEMERIT POINTS</b>	100

**CITY ATTORNEY'S COMMENTS**


**FINAL RECOMMENDATION**

**GRANT**, Subject to  Demerit Points  
 **DENY**, based on material police record (substantially related to the license activity)  
 **DEFER or GRANT** subject to Non-Renewal Revocation due to False Application

Adverse

FOR OFFICE USE ONLY:

New License # 140594 Issue Date \_\_\_\_\_

Beverage Course OK  HOLD for Beverage Course Initials RS

APPLICATION  
CITY OF KENOSHA OPERATOR'S (BARTENDER) LICENSE  
(\$125.17, Wisconsin Statutes, §10.02 C. of the  
City of Kenosha Code of General Ordinances)  
FEE: \$75.00 (Type 217)

City of Kenosha  
625-52nd St, Room 105  
Kenosha, WI 53140  
262-653-4020

I hereby apply for an Operator's License to serve Alcoholic Beverages in any place of business operated under a Class "B", "Class B", Class "A", "Class A" License in the City of Kenosha to and including the 30<sup>th</sup> day of June, 2015. (Unless sooner revoked). I hereby note that I am responsible for knowing and abiding by the contents of Chapter 125, Wisconsin Statutes and Chapter 10 of the Code of General Ordinances and that my license may be suspended, revoked, or not renewed, and/or I may be subject to a civil forfeiture for non-compliance therewith.

THE FOLLOWING QUESTIONS MUST BE ANSWERED (PLEASE READ)

Last Name McDONALD First Name Lori MI A  
(NOTE: Name must appear exactly as it appears on driver's license or state ID)

Date of Birth \_\_\_\_\_ Sex F Day Phone # 262-515-1338

Home Address 1301 SAND AVENUE

City/State/Zip Kenosha, WI 53144

Email Address MCLORIA@AOL.COM

Driver's License or State ID Number \_\_\_\_\_  
(Must indicate the state if this is not a Wisconsin DL or ID)

Name of Business Where License is to be Used (If Unknown At This Time, Leave Blank. NOTE: license may only be utilized in the City of Kenosha) Red Robin

Address of Business Where License is to be Used 14010 Sunlight Ave Kenosha WI

1. Have you, as an adult, ever been convicted of a major crime (felony), a minor crime (misdemeanor), or of violating a municipal or county ordinance in Wisconsin or in any other state, or do you have such a charge pending at this time?  
 Yes  No If Yes, state charge, year offense committed or alleged to be committed, and disposition:  
3/2010 Refusal to take test 4/5/10 OWI JAN 2011 OWI & 1 previous OWI April 2011?  
All fines & punishment have been served/paid

2. Have you, as an adult, ever served time, or been sentenced to serve time, in a jail or prison in Wisconsin or in any other state?  Yes  No If yes, please explain:  
2003 OWI served jail time. I no longer drink. I have not had a drink since 3/10/10. I got professional help in the form of a counselor. And no longer have a problem with alcohol.

3. Have you ever had your driver's license suspended or revoked in Wisconsin or in any other state?  Yes  No If yes, please explain:  
yes 7/2009 unpaid parking ticket & 2010 for refusal to take test

4. Have you received any traffic citations in Wisconsin or in any other state within the past five years, or do you have any such citations pending?  Yes  No If yes, state charge, year offense committed or alleged to be committed, and disposition:  
One other one, no.

5. Have you, as an adult, been convicted of any state or federal charges, or do you have such charges pending at this time, involving unfair trade practices, unethical conduct, or discrimination?  Yes  No If yes, state charge, year offense committed or alleged to be committed, and disposition: \_\_\_\_\_

6. List the name and address of all employers for which you have worked and/or businesses you have operated in the past five years: (Please include employment that is not related to the license applied for.)

Red Lobster 10110 Greenway RD, Kenosha, WI

7. List all addresses at which you have lived in the past five years: 1301 5th Ave Kenosha, WI

8. I have read and understand the "Applicants Please Read" section of this application. I hereby certify that I am the applicant named in the foregoing application, and I have read each and every question and answered each and every question truly, correctly, and completely, under penalty of law for failure to do so.

Signed: [Signature]

APPLICANT'S SIGNATURE

Date: 7/9/2013

### APPLICANTS PLEASE READ

**NOTICE:** If this application contains statements or information which is untrue, incorrect and/or incomplete in any material respect, it will be denied.

**A. Prohibition** - It shall be unlawful for any person, acting as an individual, a partner, a corporate officer, or an agent, to execute or file with any City Department, or to authorize any person to do so on their behalf, a license or permit application which is not true, correct and/or complete in all material respects and which was known by said person to be untrue, incorrect and/or incomplete. The term "in all material respects" shall mean with respect to some fact, which, if known to the granting authority, would be a basis or a consideration for license or permit denial.

**B. Penalty** 1) Any person violating Subsection A. above, shall, upon conviction thereof, be subject to a forfeiture not to exceed Five Hundred (\$500) Dollars, plus the payment of the costs of prosecution, and, in default of the timely payment thereof, shall be committed to the County Jail until such forfeiture has been paid, but not to exceed a period of thirty (30) days. 2) The license or permit granting authority may grant, but withhold the issuance of, any license or permit for a period not to exceed thirty (30) days from the date of granting under circumstances wherein an application is found by the granting authority to have violated Section A. above, and the applicant was provided with an opportunity to appear before the granting authority. The granting authority may also issue a written warning to the applicant which shall be made part of their license/permit record for two consecutive license/permits years. Where such finding and penalty is made and imposed by other than the Common Council, applicant may, within ten days of receipt of oral or written notice of the imposition of any such penalty, whichever is first, if both oral and written notice is provided, file a Notice of Appeal with the City Clerk and have such matter reviewed by the Common Council.

Per §1.225 of the Code of General Ordinances, "The first Twenty-Five Dollars of the application fee for any License/Permit shall be retained by the City in the event of a License/Permit denial or the withdrawal of the application by applicant for administrative and processing costs, and the balance, if any, refunded to the applicant. Where the application fee is less than Twenty-five Dollars, the entire application fee shall be retained by the City for administrative and processing costs.

Please file this application and pay the appropriate fee in person.

July 24, 2013

To: The City Attorney and the Members of the Licensing Committee

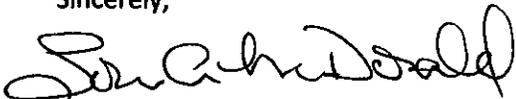
I am applying for a Bartenders License as a new requirement for a job that I have had for over 6 years. Red Robin has changed its structure in the restaurant and to be able to work in the bar area, I am now required to have a Bartender's License.

Three years ago in March, I screwed up. I drank too much and attempted to drive home. I was arrested for my 3<sup>rd</sup> DUI (OWI). But that was really a God favor to me. It required that I go to Hope Counsel for help. I had several options, and I choose to go to Interconnections for treatment. There I met with Don Walters and got to the root of my drinking problem. When I appeared before Judge Mary Kay Wagner, she told me that I would never be able to drink again. I have followed her advice, and I am proud to say that I have not had a drink since my accident over 3 years ago. I am now attending my church on a regular basis, and do not feel any need to drink.

I normally work the day shift at Red Robin from 10:30 am to around 4:30 pm. We are not allowed to drink while working. We are not even allowed to sit at the bar when we are not working. I enjoy my job, and would hate to lose it.

I understand that you have requirements for granting a Bartender License. If there is anything that I can do to meet those requirements, please let me know, and I will gladly follow any directions from you.

Sincerely,

A handwritten signature in black ink, appearing to read "Lori McDonald". The signature is fluid and cursive, with the first name "Lori" being more prominent and the last name "McDonald" following in a similar style.

Lori McDonald

August 7, 2013

To the Committee of Permits and Licensing

RE: Lori McDonald Bartenders License

With only a week to compile a list of evidence that I have changed in the last 3 almost 4 years, I feel that the task is beyond my talents. How does someone prove that they have changed? The changes cannot be measured by a ruler or a scale. The changes are seen in day to day interaction with people.

Unfortunately some of the people who have seen the changes are out of town. Others are busy in their own lives and did not have the time to create letters for me. My former therapist did not have any appointments for me to see him, so that he could write me a letter

I apologize that this packet is so small. But since I do not go to bars anymore, my world has shrunk to work, family and church. I hope that you can see that I have changed.

Sincerely

A handwritten signature in cursive script that reads "Lori McDonald". The signature is written in black ink and is positioned below the word "Sincerely".

Lori McDonald

To whom it may concern,

My name is Michael Stein, and I am the general manager of the Red Robin Gourmet Burgers in Kenosha. I have had the privilege of working with Lori McDonald for over 3 years. In the past 3 years Lori has grown as a bartender, team member and as a person. I have continually asked her to become part of my management team so that she may pass on her invaluable experience to every team member in the restaurant. Unfortunately due to her unwavering commitment to her church and her family she has been unable to commit to such a strenuous schedule.

Lori has been the key element of my training team. She has trained or has had something to do with the training for each and every new team member to walk through the door. And I am proud to say that the Red Robin Gourmet Burgers in Kenosha has the lowest team member turnover rate in the region. This is unquestionably a direct result of Lori's training skills and as her ability to develop a strong professional relationship with everyone she comes in to contact with.

Lori is the first person that team members turn to with their own personal issues. Lori's strong relationship with her church and her family gives her the knowledge to counsel other employees with issues that they are dealing with in their personal lives. Through Lori's life experiences she is able to coach team members on how to deal with their own addictions and gives them valuable resources to change their lives for the better.

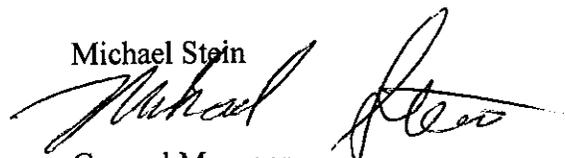
On a personal level, my wife and I gave birth to a beautiful baby boy 15 months ago. With my continually changing schedule it has not always been easy to find childcare. With no doubts, my wife and I trust Lori to watch our son when need be. There has not been one time when Lori has not jumped at the occasion of watching our son. We know that he is in great hands with Lori as she is now part of our family.

My wife prior to having our son found herself in the middle of her own addiction. This addiction resulted in making the stupid decision of getting behind the wheel of a vehicle after she had been drinking. She was pulled over, arrested and charged with driving under the influence. Lori was the first person my wife called for help. And without question Lori was there helping my wife get through this challenging time. I am proud to say that with counseling from Lori, my wife has changed her life around for the better and is now living a healthy and safe life.

Time and time again Lori has been counted on to perform different tasks within the restaurant and outside the restaurant. She is not trying to obtain a bartenders license as a means to find alternate employment, but to ensure the restaurant is within compliance of local Kenosha county guidelines.

Please feel free to reach out to me with any other questions regarding this matter. Thank you for your time and understanding.

Michael Stein



General Manager  
Red Robin Gourmet Burgers  
Kenosha Store #626

July 30, 2013

To Whom it May Concern:

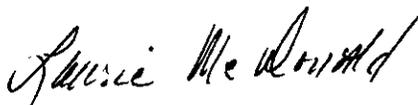
I have known Lori McDonald in a variety of capacities for the past 33 years. I first met her in high school and later, became her sister-in-law.

While Lori has had her personal struggles, she is a caring, determined and extremely competent individual. In the past 4 years, she has made significant strides in turning her life around. First and foremost, she has given up consuming alcohol. Second, she gives back to her community by volunteering as a tax preparer for United Way of Kenosha County and the Volunteer Income Tax Assistance (VITA) program. She was considerate of her clients receiving help and did her best to make sure they had a good experience. She also helped at our remote site in Salem, WI. Third, she is an active member at her church, Immanuel Baptist in Racine, WI.

In summary, I feel confident in saying that Lori is capable of handling any situation with thoughtfulness and maturity. She sincerely cares about her job, her co-workers and patrons.

If you have any questions, please do not hesitate to contact me.

Sincerely,

A handwritten signature in cursive script that reads "Laurie McDonald".

Laurie McDonald

262-859-0317

July 28, 2013

City of Kenosha Licensing Board

To Whom It May Concern,

I am writing this letter in support of Lori McDonald. I have known Lori for the past thirty years. I have witnessed her transformation from a young woman with alcohol dependency issues to a self-assured, confident, strong woman in control of her life.

It took Lori several years to come to terms with her dependency, but since attending counseling and doing some personal goal setting, she has come to terms with the reality of what it means to be an alcoholic. She has accepted responsibility for the incidents in her life prior to her decision to stop drinking, and each day she makes the decision to continue on the path she has set for herself.

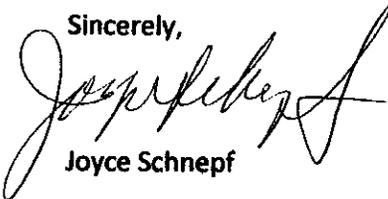
Lori is active in her church, a leader at her work, and often takes time to talk to others who come to her with their own addiction issues. It has been gratifying to me to see her transformation. At times in her life I struggled to believe it would happen.

I retired from Kenosha Unified School District where I was a counselor for twenty-six years. I did not know Lori in that capacity, but rather as a friend of her family. She has put her life on a healthy, alcohol free path. She is good at her job and respected by her employers. Please give her the opportunity to be licensed and continue to be productive member of the Kenosha community.

All of the events of our lives contribute to make us the people we are – the things we are proud of as well as the decisions we made that we wish we could take back. Lori has chosen to accept and learn from her mistakes to become the competent, contributing, woman she is.

If you have any questions, please feel free to contact me.

Sincerely,

A handwritten signature in cursive script, appearing to read "Joyce Schnepf".

Joyce Schnepf

4543 Meachem Road

Racine, WI 53403

262-552-8587

August 1, 2013

To the Committee of Permits and Licensing

As a committee, I realize that the only way you have of evaluating a person is thru the eyes of others. However, if you had the opportunity to really know Lori McDonald, there would not be any doubt in your mind that she is a different person today.

As parents we instilled in our children the importance of loving God, loving family, and doing your very best in whatever you were trying to accomplish. Lori was very successful in her work and relations with others until she moved to Indiana and married.

Because she thought she could deal with it, Lori did not tell us about the very abusive behavior of her husband for several years. When we found out, we brought her home, but the damage was already done. I knew that she needed therapy, but she did not think it was necessary, and when life got too much for her she self-medicated with alcohol.

In 2010, Lori had an automobile accident when she was drinking and she had no choice but to go to therapy. I will always be grateful to Don Walters, her therapist, for helping her deal with the emotional devastation that was the result of her abusive message.

From that point on, Lori has been a different person. She understands now the reason for her drinking and has taken responsibility for her actions. Alcohol is no longer a part of her life. She has learned more appropriate tools for dealing with life's issues.

Lori is an encourager and because of this trait, the young adults at our church and her work place seek her out. She always takes this opportunity to share her story with those who come to her with addiction problems of their own and encourages them to get help.

I believe that the hard times in our lives can either break us or make us stronger. Although as her mother, it was heart wrenching to watch, I am very grateful to God, that the hard times in Lori's life has helped her become that strong, confident person who sees each day as a new opportunity to be the very best person that she can be, a person who is a blessing to others.

Sincerely,

A handwritten signature in cursive script that reads "Ann McDonald".

Ann McDonald  
1301 52<sup>nd</sup> Avenue  
Kenosha, Wi 53144

# INTERCONNECTION, S.C DISCHARGE SUMMARY

Client Name: Lori McDowell Date: 1/12/11

Therapist: D. Walters Diagnosis: \_\_\_\_\_

Initial GAF: 60 Discharge GAF: 75

Target Goals	Successful	Partially Successful	Unsuccessful
<u>maintain abstinence</u>	<input checked="" type="checkbox"/>		
<u>W anxiety</u>	<input checked="" type="checkbox"/>		
<u>skills for managing son</u>	<input checked="" type="checkbox"/>		

Date of Discharge: 1/12/11 With Client or Without Client \_\_\_\_\_

**Reason for Discharge:**

- a) Client is satisfied with level of achievement.
- b) Client has chosen to discontinue treatment. \_\_\_\_\_
- c) Client has reached maximum benefit from treatment. \_\_\_\_\_
- d) Client failed \_\_\_\_\_ appointments. \_\_\_\_\_
- e) Client did not reschedule an appointment. \_\_\_\_\_

**Rate clients' level of improvement:**

Better  Somewhat improved \_\_\_\_\_ Same \_\_\_\_\_ Worse \_\_\_\_\_

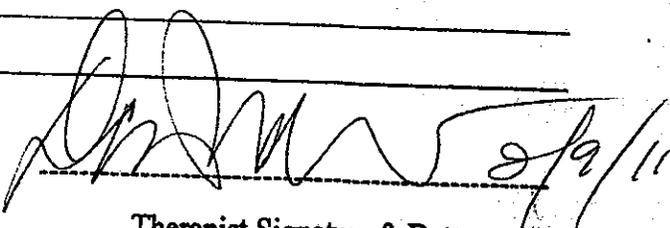
**Recommendations for further services:**

None needed  Referred to: \_\_\_\_\_

**Additional Comments:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Client Signature & Date

  
\_\_\_\_\_  
Therapist Signature & Date 2/9/11

Attempts to Notify Client: \_\_\_\_\_

MONTHLY REPORT

Name of reporting agency: Inter Connections  
Name of referring HOPE Council Assessor: Elizabeth Sandholm  
Name of therapist: Don Walters Date: 11/15/10  
Client: Lori McDonald D.O.B. 1-1-11  
Date admitted to Program: 4/28/10

**PROGRAM INVOLVEMENT:**

- Total number of sessions 12
- Individual Counseling
- Group Therapy
- Aftercare
- IOP
- Antabuse Therapy
- A.A. Attendance
- Other self-help meetings (specify)

**AS OF CLIENT IS:**

- Continuing in program
- Re-admitted to program
- Discharged in Non-Compliance
- Discharged in Compliance
- Diagnosis: Alc Dep

Prognosis Very good

**DEGREE OF ABSTINENCE:**

- Total w/ U.A. verification
- Copy of U.A. report enclosed
- Total w/o U.A. verification
- Partial

Client's Progress: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Should there be a significant change in the client status, please notify the assessor immediately.

MONTHLY REPORTS ARE MANDATORY

**FAXED**  
*5/25/11*

TREATMENT PLAN FOR: Lori McDonald DATE: 4/28/10

DIAGNOSIS: Axis I 303.90 Axis II 309.81 Axis III \_\_\_\_\_ Axis IV \_\_\_\_\_ Axis V \_\_\_\_\_

Intake: 60 Supervisor: Theresa Stent Date: 5-5-10

TARGET PROBLEM (in client's words) GOALS Review Date/Tx Evaluation (improvement 0 - 100%)

alcohol - maintain abstinence  
anxiety - strengthen sober lifestyle  
trauma history - improved skills for managing stress in healthy ways  
Stress

[Signature] 5/17/10  
Client Signature Date

[Signature] 5/17/10  
Therapist Signature Date

Three Month Reviews:

Michael Radke Date 8/11/10 GAF \_\_\_\_\_  
Date GAF

Michael Radke Date 11/10/10 GAF \_\_\_\_\_  
Date GAF

Termination Summary (including reason for discharge, evaluation of progress and level of progress) GAF \_\_\_\_\_

Follow-up Contact

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



# Kenosha Intoxicated Driver Intervention Program

1000-55th Street, Public Safety Building, Room 220, Kenosha, WI 53140

Phone: (262) 605-5095 Fax: (262) 605-5096 www.wiscs.org

WCS advocates for justice and community safety, providing innovative opportunities for individuals to overcome adversity.

## WCS- INTOXICATED DRIVER INTERVENTION PROGRAM CLIENT STATUS UPDATE

Date Nov 16, 2010

To: Interconnections

Fax # 654-7818

RE: McDonald, Lou DOB: 1 1

Our records indicate that the above named individual is in AODA education and/or treatment through you or your agency. WCS is responsible for providing the court regular updates regarding the client's status in treatment. Please provide the following information:

Date admitted to treatment 4/28/10

Number of treatment sessions completed: (group/individual) 12

Approximate number of treatment sessions remaining (if known): 0

Frequency of treatment sessions: \_\_\_\_\_ time(s) per week/ month (circle one)

Date client  completed  should complete treatment (if known): 11/13/10

Please comment on Client's attitude toward treatment, participation level, and progress toward treatment goals:

very cooperative, has made adjustments in her life style which support sobriety

Please fax this form back to WCS at (262) 605-5096 by 11/23/10 or contact the client's caseworker by phone at (262) 605-5095.

- (Signed information release form attached)
- (Signed information release form already filed)

Thank you for your time,

Matthew Ruehle  
Assistant Program Director  
WCS OWI Program

Janelle Kreitlow  
WCS OWI Caseworker

Kenneth Torres  
WCS OWI Caseworker

Please Note: The information on the following pages of this FAX may be CONFIDENTIAL and LEGALLY PRIVILEGED. It is intended only for the use of the individual named above. If the reader of this message is not the intended recipient, you are hereby notified that any dissemination, distribution, or copy of this message is strictly prohibited. If you have received this communication in error, please notify us immediately by telephone and return the original message to the above address. If you experience any difficulty receiving this message, please call (262) 605-5095. Thank you.

**FAXED**  
11/17/10

**TAXI License**

**Police Record Report**

**APPLICANT INFORMATION**

<b>Date of Application</b> 7/3/2013	<b>Name of Applicant</b> Scott Poskus	<b>Applicant's Date of Birth</b>	<b>Driver's License Status</b> Valid
<b>License Number</b> N140027	<b>Address of Applicant</b> 1118-62nd Street	<b>Business (where license is to be used)</b> My Way Cab	<b>Business Address</b>

<b>DATE OF CHARGE</b>	<b>OFFENSE</b>	<b>CASE STATUS</b>	<b>OFFENSE LISTED ON APPLICATION</b>	<b>POINTS</b>
5/18/2009	DC PERSON	GUILTY	N	
6/8/2011	ESCAPE FROM JUSTICE	CUSTODY ONLY	N	

**SEX OFFENDER REGISTRANT - UNSURE OF CHARGES**

<b>DATE OF CHARGE</b>	<b>OFFENSE</b>	<b>CASE STATUS</b>	<b>OFFENSE LISTED ON APPLICATION</b>	<b>POINTS</b>
6/8/2011	EXTRADITED 2011CF540			

**CITY ATTORNEY'S RECOMMENDATION**

<b>Offense Demerit Points</b>	
<b>Were all offenses listed on the application?</b>	
<b>TOTAL DEMERIT POINTS</b>	

**CITY ATTORNEY'S COMMENTS**

<b>DEFER - NEEDS TO PROVIDE ADDITIONAL DOCUMENTATION</b>

**FINAL RECOMMENDATION**

**GRANT**, Subject to  Demerit Points  
 **DENY**, based on material police record (substantially related to the license activity)  
 **DEFER or GRANT** subject to Non-Renewal Revocation due to False Application

## APPLICANT INFORMATION

Date of Application	Name of Applicant	Applicant's Date of Birth	Driver's License Status
8/1/2013	Larry D. Sherrod		Valid
License Number	Address of Applicant	Business (where license is to be used)	Business Address
N 140032	141 S. Main Street, #214 Racine	A-N-T Transportation	

DATE OF CHARGE	OFFENSE	CASE STATUS	OFFENSE LISTED ON APPLICATION	POINTS
8/15/2008	OPERATING WHILE SUSPENDED	GUILTY	N	50
8/15/2008	SPEEDING IN EXCESS	GUILTY	N	50
8/21/2008	OPERATING WHILE SUSPENDED	GUILTY	N	50
2/9/2009	FAILURE TO OBEY TRAFFIC SIGN	GUILTY	N	20
2/9/2009	OPERATING AFTER REVOCATION	GUILTY	N	50
3/30/2009	OPERATING AFTER REVOCATION	GUILTY	N	50
6/4/2009	OPERATING WHILE INTOXICATED	GUILTY	N	20
10/6/2009	OPERATING AFTER REVOCATION	GUILTY	N	50
3/27/2011	RECKLESS DRIVING	GUILTY	N	50
3/27/2011	FAILURE TO OBEY TRAFFIC SIGN	GUILTY	N	20
3/27/2011	OPERATING AFTER REVOCATION	GUILTY	N	50
4/23/2011	IMPLIED CONSENT	GUILTY	N	
5/25/2012	SPEEDING INTERMEDIATE	GUILTY	N	40
5/25/2012	LICENSE NOT ON PERSON	GUILTY	N	20
6/6/2012	OPERATING AFTER REVOCATION	GUILTY	N	50
6/6/2012	FAILURE TO FASTEN SEATBELT	GUILTY	N	10
6/23/2012	OPERATING AFTER REVOCATION	GUILTY	N	50
DATE OF CHARGE	OFFENSE	CASE STATUS	OFFENSE LISTED ON APPLICATION	POINTS
1/30/2013	COMPULSORY NO INSURANCE	GUILTY	N	
1/30/2013	LICENSE NOT ON PERSON	GUILTY	N	20
2/9/2009	DC/PERSON	DISPO PENDING	N	20

2/9/2009	RESIST/OBSTRUCT OFFICER	DISPO PENDING	N	20
3/30/2009	CONTEMPT,BAIL JUMPING	DISPO PENDING	N	20
1/29/2011	DC/DOMESTIC ABUSE	DISPO PENDING	N	20
4/30/2011	DC/PERSON	DISPO PENDING	N	20
5/29/2012	DC PERSON	DISPO PENDING	N	20
7/12/2012	CONTEMPT,BAIL JUMPING	DISPO PENDING	N	20

CITY ATTORNEY'S RECOMMENDATION		
Offense Demerit Points	790	
Were all offenses listed on the application?	N	
<b>TOTAL DEMERIT POINTS</b>	<b>815</b>	

CITY ATTORNEY'S COMMENTS

FINAL RECOMMENDATION
<input type="checkbox"/> GRANT, subject to <input type="checkbox"/> Demerit Points
<input checked="" type="checkbox"/> DENY, based on material police record (substantially related to the license activity)
<input type="checkbox"/> DEFER or GRANT subject to Non-Renewal Revocation due to False Application

Advice

FOR OFFICE USE ONLY:

5630-8245-7256-04  
License Number

Date Granted

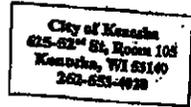
Date Issued

CITY OF KENOSHA, WISCONSIN  
APPLICATION FOR TAXI DRIVER'S LICENSE

Fee: \$30.00 New/\$30.00 Renewal

Expires: April 30th

Type: 144



The undersigned requests that a license be granted in accordance with Chapter XIII, Section 13.07 G. of the Code of General Ordinances of the City of Kenosha, and certifies that the following information is true and correct to the best of his/her knowledge.

Sherrod Last Name Larry First Name D. Middle Initial

141 S. Main Street Apt - 214 Racine, WI 53401-6288  
Address City State Zip Phone Number

07-16-1957 Date of Birth  
2020 State of Wisconsin Driver's License Number and Expiration Date (Required)

5630-8245-7256-04

Name of Business & Address of Business Where License is to be Used (If Unknown At This Time, Leave Blank)

1. Have you, as an adult, ever been convicted of a major crime (felony), a minor crime (misdemeanor), or of violating a municipal or county ordinance in Wisconsin or in any other state, or do you have such a charge pending at this time?  Yes  No If Yes, state charge, year offense committed or alleged to be committed, and disposition: 1997 State of ILLINOIS
2. Have you, as an adult, ever served time, or been sentenced to serve time, in a jail or prison in Wisconsin or in any other state?  Yes  No If yes, please explain:
3. Have you ever had your driver's license suspended or revoked in Wisconsin or in any other state?  Yes  No If yes, please explain: 2009
4. Have you received any traffic citations in Wisconsin or in any other state within the past five years, or do you have any such citations pending?  Yes  No If yes, state charge, year offense committed or alleged to be committed, and disposition: Kenosha, Racine
5. Have you, as an adult, been convicted of any state or federal charges, or do you have such charges pending at this time, involving unfair trade practices, unethical conduct, or discrimination?  Yes  No If yes, state charge, year offense committed or alleged to be committed, and disposition:

6. List the name and address of all employers for which you have worked and/or businesses you have operated in the past five years: (Please include employment that is not related to the license applied for.)  
LPT Kenosha WI. Unfidel Solutioan Kenosha  
Rhind, Paltic Kenosha  
Lowell Kenosha Kenosha Beef Kenosha Fenecocks  
Kenosha WI.

7. List all addresses at which you have lived in the past five years:  
6235 7th Ave #104 Kenosha WI  
UNION, Grove Vets Center  
1017 Maryville, St. Racine, 741 S. main Racine WI

8. I have read and understand the "Applicants Please Read" section of this application. I certify that I am the applicant named in the foregoing application, and that I have read each and every question and answered each and every question truly, correctly and completely, under penalty of law for failure to do so. I also certify that:

- I am able to read and write the English language, and I am not addicted to the use of intoxicating liquors or drugs.
- I am at least 18 years of age and that I have a valid Wisconsin Driver's License.
- I have never been arrested, except as listed above.

Aug 1, 2013  
July 31 - 2013  
DATE

SIGNATURE

**APPLICANTS PLEASE READ**

NOTICE: If this application contains statements or information which is not true, correct and/or complete in any material respect, it may be denied. You may be subject to a forfeiture of five hundred (\$500) dollars, your license fee will be forfeited, you may be ineligible to reapply for this license for thirty days, and you may be subject to twenty-five demerit points. §1.22 of the Code of General Ordinances states the following:

A. **Prohibition** - It shall be unlawful for any person, acting as an individual, a partner, a corporate officer, or an agent, to execute or file with any City Department, or to authorize any person to do so on their behalf, a license or permit application which is not true, correct and/or complete in all material respects and which was known by said person to be untrue, incorrect and/or incomplete. The term "in all material respects" shall mean with respect to some fact, which, if known to the granting authority, would be a basis or a consideration for license or permit denial.

B. **Penalty** 1) Any person violating Subsection A. above, shall, upon conviction thereof, be subject to a forfeiture not to exceed Five Hundred (\$500) Dollars, plus the payment of the costs of prosecution, and, in default of the timely payment thereof, shall be committed to the County Jail until such forfeiture has been paid, but not to exceed a period of thirty (30) days. 2) The license or permit granting authority may grant, but withhold the issuance of, any license or permit for a period not to exceed thirty (30) days from the date of granting under circumstances wherein an application is found by the granting authority to have violated Section A. above, and the applicant was provided with an opportunity to appear before the granting authority. The granting authority may also issue a written warning to the applicant which shall be made part of their license/permit record for two consecutive license/permit years. Where such finding and penalty is made and imposed by other than the Common Council, applicant may, within ten days of receipt of oral or written notice of the imposition of any such penalty, whichever is first, if both oral and written notice is provided, file a Notice of Appeal with the City Clerk and have such matter reviewed by the Common Council.

Per §1.225 of the Code of General Ordinances, "The first Twenty-five Dollars of the application fee for any License/Permit shall be retained by the City in the event of a License/Permit denial or the withdrawal of the application by applicant for administrative and processing costs, and the balance, if any, refunded to the applicant. Where the application fee is less than Twenty-five Dollars, the entire application fee shall be retained by the City for administrative and processing costs.

**After filing this application for a Taxi Driver's License with the City Clerk, you must go to the Safety Buidling at 1000-55th Street, to have your picture and fingerprints taken. You must do this Monday through Friday between the hours of 1:00 and 3:00 p.m. ONLY.**

E-MAILED JUL 22 REC'D

CITY OF KENOSHA  
CITY CLERK-625 - 52ND STREET, KENOSHA, WI 53140  
262-653-4020  
NEW APPLICATION  
OUTDOOR DINING AREA

District # 2

Fee (Check One):

\$150.00 (Type 99) = Outdoor Dining Area Only {\$50.00 initial review fee (one time only) + \$100.00 annual permit fee = \$150.00} Renewal-\$150.00

\$300.00 (Type 100 & Type 210) Outdoor Dining Area accompanied by Outdoor Extension application (two applications) \$50.00 initial review fee (one time only)+\$100.00 annual permit fee+\$150.00 outdoor extension license fee (one time only) = \$300.00 Renewal - \$150.00

Expires: December 31, 2013

\*\*Permits are not transferable or assignable\*\*

1. Applicant Name (Corporation/Partnership/Individual) Taste of NY Pizzeria, LLC  
(tenant(s) or property owner(s))

2. If Corporation or Partnership, list names and addresses of all members  
Amber M. Bajrami, 4119 Washington Road Kenosha, WI 53144

3. Applicant Address 4119 Washington Road Kenosha WI 53144  
(Address/City/ST/Zip)

4. Applicant Phone Number 262-939-3036

5. Business Name Slice of NY Pizzeria

6. Business Address & Phone Number 5703 6th Ave. Kenosha WI 53140, 262-925-1150

7. What is the Zoning District of the business? B-3 If business is not in a B-1, B-2 or B-3 Zoning District, do not continue with this application due to the property being in a non-conforming district.

8. What type of business will be conducted in the outdoor dining area?  
 bakery     candy and/or ice cream store     coffee shop  
 food store     grocery store     delicatessen     restaurant

9. Does the outdoor dining area extend beyond the frontage of the business? Yes \_\_\_\_\_ No X  
If yes, a statement approving the placement of the outdoor dining area in front of adjacent business(es) fronting the street must be signed by the adjacent owners or tenants (include names, addresses and phone numbers) \*Check if statement is attached N/A.

10. What are the maximum number of tables? 4  
What are the maximum number of chairs? 12

11. Operational information:

a. Hours 11am-12pm Sun-Thurs Days and months of operation Monday-Sunday, May-September  
11am-3pm Fri+Sat (April+October - depending on weather)

b. Planned capacity of outdoor dining area 12

12. Please attach the following:

a. Is outdoor dining area permanent? Yes \_\_\_\_\_ No X If yes attach specifications and Street Encroachment Agreement. \*Check if street encroachment agreement is attached N/A. Note: If no street encroachment agreement, contact Public Works Department to apply. Street encroachment agreements must be approved by Common Council. Approval of this application is conditioned upon approval of the Street Encroachment Agreement.

\*Check here if specifications are attached. \_\_\_\_\_

b. Lighting and signage plan.

\*Check here if lighting and signage plan is attached N/A

c. A scaled site plan indicating: The location and boundary of the proposed outdoor dining area; the dimension of the remaining width of the sidewalk outside the outdoor dining area; the dimension from the outdoor dining area to the curb and all buildings; and, the location of awnings, and Dining Appurtenances within the outdoor dining area. The plans shall also indicate: existing property lines; associated building(s) and entrance(s); adjacent building(s) and entrance(s); extent of sidewalk adjacent to business(es), face of curb, location of fire hydrants, bus shelters and/or stops, trees, planters, utility poles, signs, benches, light poles, waste receptacles, driveways, alleys, vaults and any other obstructions within the public right-of-way at proposed location of outdoor dining area and for an additional twenty (20') feet extending therefrom.

\*Check here if scaled site plan is attached ✓ yes

d. Photograph(s), a minimum of four (4") by six (6") inches, showing the entire sidewalk and Major Street Setback Area with building facade proposed for the outdoor dining area.

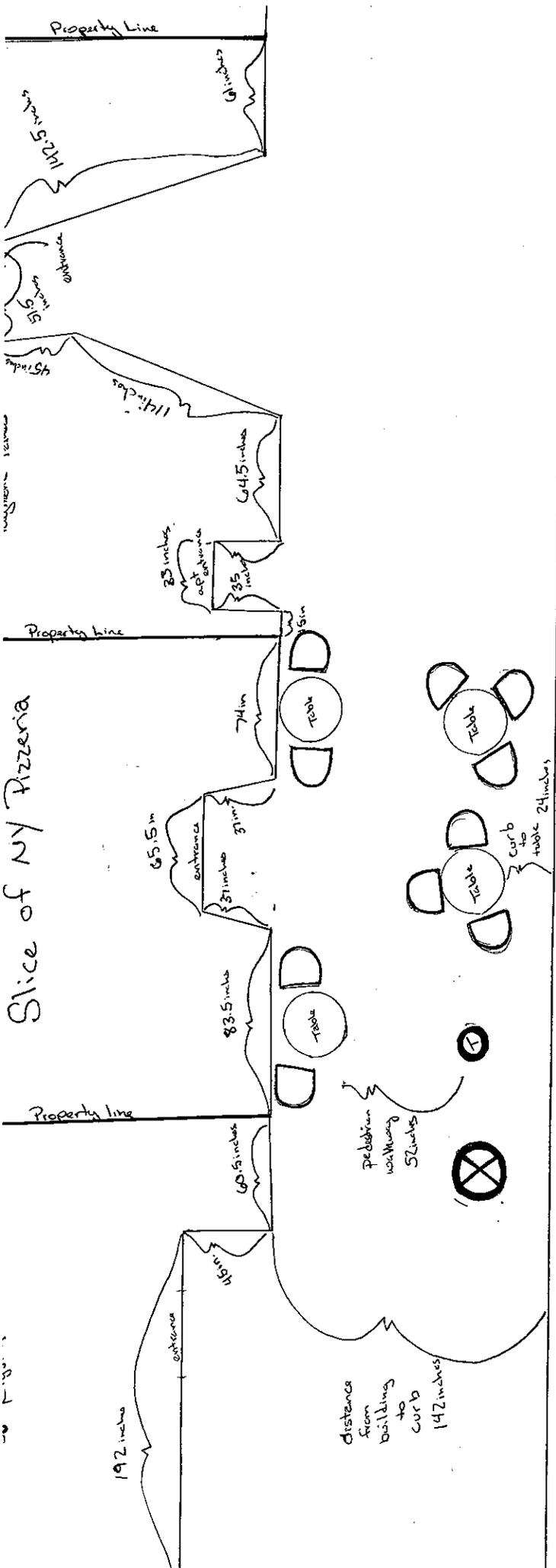
\*Check here if photographs are attached ✓ yes

e. Certificate of Liability Insurance, with Contractual Liability Endorsement, showing insurance in force and effect in the minimum amount of One Million (\$1,000,000.00) Dollar single limits, providing coverage for claims involving death, personal injury and property damage. The City of Kenosha shall be a named additional insured under the terms of this policy.

\*Check here if certificate of liability insurance is attached \_\_\_\_\_  
will provide.



# Slice of NY Pizzeria



**Map Key**

one inch = 4 feet

1 foot = .25 inches

Trash can

Tree

Chair

1/24/2010







MENS APPAREL

ST. GEORGE'S PIZZERIA

RAYMOND JAMES

5703

Buy the Pie

the Slice



*By the Slice*



# SLICEORNY PIZZERIA



By the Slice

OPEN

Buy the Pie

RAY  
FINNA



INDEMNITY AND HOLD HARMLESS AGREEMENT

Applicant, in consideration of having the City of Kenosha, Wisconsin grant this application, herein and hereby agrees to indemnify and hold harmless the City of Kenosha, Wisconsin and its officers, employees and agents against any and all losses, claims, damages, costs, expenses, judgments, awards, attorney fees, or settlements which they may incur as a result of use of the public right-of-way or Major Street Setback Area for the Outdoor Dining Area which is the subject of this agreement.

Dated at Kenosha, Wisconsin this 22 day of July, 2013

Amber M Bajrami  
Applicant Name (Please Print)

\_\_\_\_\_  
Applicant Name (Please Print)

Amber M Bajrami  
Signature of Applicant

\_\_\_\_\_  
Signature of Applicant

Title: Owner

Title: \_\_\_\_\_

\_\_\_\_\_  
Applicant Name (Please Print)

\_\_\_\_\_  
Applicant Name (Please Print)

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Signature of Applicant

Title: \_\_\_\_\_

Title: \_\_\_\_\_

Subscribed and sworn to before me this 22 day of July, 2013.

Michelle L Nelson  
Notary Public, Kenosha County, Wisconsin.

My Commission Expires 4-11-17

ATTN: CLERKS OFFICE



**CERTIFICATE OF LIABILITY INSURANCE**

SLICE-1

OP ID: DB

DATE (MM/DD/YYYY)  
07/23/13

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER CRB Insurance 1400 Newman Road Racine, WI 53406 Linda Proeber	262-884-0900 262-884-6161	CONTACT NAME: PHONE (A/C, No, Ext): FAX (A/C, No): E-MAIL ADDRESS:
INSURED Slice of New York Inc → <i>S/B Taste of NY Pizzeria, LLC</i> Amber M Bajrami 5703 6th Ave Kenosha, WI 53140		INSURER(S) AFFORDING COVERAGE INSURER A: Society Insurance NAIC # 15261 INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	UBER WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Business Owners GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	X		TRM549386	03/14/13	03/14/14	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 CSL \$ 1,000,000
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS			TRM549386	03/14/13	03/14/14	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	UMBRELLA LIAB EXCESS LIAB OCCUR CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in WI) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A	WC 549387	03/14/13	03/14/14	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 100,000 E.L. DISEASE - EA EMPLOYEE \$ 100,000 E.L. DISEASE - POLICY LIMIT \$ 500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)  
 City of Kenosha is an additional insured for general liability as respects operations of the named insured.  
 30 days notice of cancellation applies per form #TBP2024.

<b>CERTIFICATE HOLDER</b>  KENOS  City of Kenosha 625 52nd St Rm 105 Kenosha, WI 53140	<b>CANCELLATION</b>  SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.  AUTHORIZED REPRESENTATIVE Linda Proeber
--	---

**Zimbra****mnelson@kenosha.org**

---

**Outdoor Dining Area**

---

**From :** Kelly Andreoli <kma360@kenoshapolice.com> Tue, Jul 23, 2013 11:22 AM**Subject :** Outdoor Dining Area**To :** Michelle Nelson (mnelson@kenosha.org)  
<mnelson@kenosha.org>, Lisa May  
(lmay@kenosha.org) <lmay@kenosha.org>

Per Inspector Lindquist, there are no adverse recommendations for an outdoor dining area for Taste of NY, located at 5703-6<sup>th</sup> Avenue.

**Kelly M. Andreoli**  
**Clerical Supervisor**  
**Kenosha Police Department**  
**1000-55<sup>th</sup> Street**  
**Kenosha, WI 53140**  
**(262) 605-5237**

---

CITY OF KENOSHA  
625 - 52nd Street, Room 105  
Kenosha, Wisconsin 53140-3480  
Phone (262)653-4020  
Fax (262)653-4023  
cityclerk@kenosha.org  
www.kenosha.org



Debra L. Salas  
City Clerk - Treasurer

Karen J. Forsberg  
Deputy City Clerk-Treasurer

July 23, 2013

Amber Bajrami  
Taste of NY Pizzeria, LLC  
4119 Washington Rd  
Kenosha, WI 53144

RE: Slice of NY Pizzeria/Outdoor Dining Only

Dear Applicant:

Your license application will be presented to the Licensing/Permit Committee on:

**Date: Monday, August 12, 2013**  
**Time: 6:30 pm**  
**Location: Kenosha Municipal Building, 625-52<sup>nd</sup> Street, Room 202**

**You and/or your representative are required to attend this meeting.** Additionally, please read the reverse side of this notice regarding an advisory recommendation from the Licensing/Permit Committee.

If you have any questions, please contact 653-4271.

Sincerely,

A handwritten signature in black ink, appearing to read 'Michelle Nelson'.

Michelle Nelson  
Information Coordinator  
City of Kenosha

**c: Ald. Schwartz**

-Over-

**COPY**

✓ 2/8/12  
E-MAILED JUL 30 REC'D  
cc 8/19  
NO ADV.

**OUTDOOR EXTENSION  
CITY ORDINANCE §10.075**

**REQUEST TO CHANGE CLOSING HOURS  
TO 12:00 MIDNIGHT TO 8:00 AM**

Dist # 7

Licensee Name Flint's Inn, Inc

Trade Name Flint's Inn

Trade Address 4708-22 Ave

Current closing time = 10:00pm

The undersigned is hereby applying for a change of the closing hours of the outdoor extension of the Class "B" Beer/"Class B" Liquor Combination license in accordance with §10.075 of the Code of General Ordinances to 12:00 Midnight to 8:00 am.

In making this application, I understand that amplified music or sound otherwise permitted under Section 10.75 E.2. shall not be allowed after 10:00.

Bob Verlan  
(Individual/Partner/President of Corporation)

\_\_\_\_\_  
(Partner/Secretary of Corporation)

SUBSCRIBED TO AND SWORN TO BEFORE ME

THIS 30 OF July, 2013.

Michelle L Nelson  
Notary Public

My commission expires 4-11-17

APPLICATION FOR YEARLY CABARET LICENSE  
CITY OF KENOSHA

E-MAILED AUG - 5 REC'D

NOTE: ALLOW 15 DAYS FOR PROCESSING & APPROVAL

PLEASE NOTE: This license is non-renewable. Applications shall be referred by the City Clerk to the Police Department. The Police Department shall make a report, in writing, to the City Attorney as to any police record of the applicant, which may reflect upon good moral character or business responsibility. The City Attorney shall examine said record and make a recommendation to the Committee on Licenses/Permits based thereon as to whether the license shall be granted. The Committee on Licenses/Permits shall review all applications, any reports, the recommendation of the City Attorney and all other information before it. Said Committee shall recommend to the Common Council either the granting or denial of each application. (In accordance to Chapter X, Section 10.07 of the Code of General Ordinances of the City of Kenosha.)

Type: 212-Yearly (lavender) Expires: June 30<sup>th</sup> \$300.00/Year

Date of Application 8/1/13 Contact Phone Number 262 344 2083 District 7

1. Licensee Name ANTONIO'S PIZZA & PASTA LLC DALE S. RICE  
(NOTE: must be same name as beer/liquor license)  
5 FIFTH AVE + Ball

2. Business Name & Address ANTONIO'S PIZZA & PASTA LLC 2410 5<sup>TH</sup> STREET

3. If license is in the name of a Corporation or LLC, Agent Name DALE S. RICE

Licensee: Individual, or if Corporation/LLC, Agent completes following:

4. Date of Birth of Agent (if Corporation/LLC) or Individual MAY 30, 1948

5. Address 8221-65<sup>TH</sup> AVENUE KENOSHA, WI 53142

6. Driver's License Number: R200-1774-8690-09  
(MUST INDICATE IF THIS IS NOT A WISCONSIN DL)

7. Have you, as an adult, ever been convicted of a major crime (felony) or minor crime (misdemeanor) in Wisconsin, or in any other State, or do you have such a charge pending at this time?  Yes  No If yes, state charge, year offense committed or alleged to be committed, and disposition:

8. Have you, as an adult, ever been convicted of violating a municipal or county ordinance in Wisconsin or in any state, or do you have such a charge pending at this time?  Yes  No If yes, state charge and year offense committed or alleged to be committed, and disposition:

TICKETED FOR NO LICENSE BAR TENDER ON DUTY  
ALTHOUGH THERE WAS A LICENSED BAR TENDER ON THE  
PREMISES.

9. Have you, as an adult, ever served time, or been sentenced to serve time, in a jail or prison in Wisconsin or in any other State?  Yes  No If yes, explain:

10. Have you ever had your driver's license suspended or revoked in Wisconsin or in any other State?  
 Yes  No If yes, explain:

11. Have you received any traffic citations in Wisconsin or in any other State within the past five (5) years, or do you have any such citations pending?  Yes  No If yes, state charge, year offense committed or alleged to be committed, and disposition:

RECALLED OF LEFT TURN ON Red Arrow 2012

12. Have you, as an adult, within the past five (5) years, while operating a business or engaged in a profession, been convicted of any state or federal charges, or do you have such charges pending at this time involving unfair trade practices, unethical conduct, or discrimination?  Yes  No If yes, state charge, year offense committed or alleged to be committed, and disposition:

13. List the name and address of all employers for which you have worked and/or businesses you have operated in the past five (5) years:

NONE - RETIRED

14. List all addresses at which you have lived in the past five (5) years:

8881-65th Ave Kenosha, WI 53142 (23 years)

Applicant's Signature

Dale S. Rice

Date:

8/1/13

**PLEASE READ: §1.22 LICENSE/PERMIT APPLICATIONS - CODE OF GENERAL ORDINANCES**

A. Prohibition It shall be unlawful for any person, acting as an individual, a partner, a corporate officer, or an agent, to execute or file with any City Department, or to authorize any person to do so on their behalf, a license or permit application which is not true, correct and/or complete in all material respects and which was known by said person to be untrue, incorrect and/or incomplete. The term "in all material respects" shall mean with respect to some fact, which, if known to the granting authority, would be a basis or a consideration for license or permit denial.

B. Penalty 1) Any person violating Subsection A. above, shall, upon conviction thereof, be subject to a forfeiture not to exceed Five Hundred (\$500) Dollars, plus the payment of the costs of prosecution, and, in default of the timely payment thereof, shall be committed to the County Jail until such forfeiture has been paid, but not to exceed a period of thirty (30) days.

2) The license or permit granting authority may grant, but withhold the issuance of, any license or permit for a period not to exceed thirty (30) days from the date of granting under circumstances wherein an application is found by the granting authority to have violated Section A. above, and the applicant was provided with an opportunity to appear before the granting authority. The granting authority may also issue a written warning to the applicant which shall be made part of their license/permit record for two (2) consecutive license/permit years.

Where such finding and penalty is made and imposed by other than the Common Council, applicant may, within ten (10) days of receipt of oral or written notice of the imposition of any such penalty, whichever is first, if both oral and written notice is provided, file a Notice of Appeal with the City Clerk and have such matter reviewed by the Common Council.

**§1.225 ADMINISTRATIVE CHARGE FOR PROCESSING LICENSE/PERMIT APPLICATIONS**

The first Twenty-five (\$25) Dollars of the application fee for any License/Permit shall be retained by the City in the event of a License/Permit denial or the withdrawal of the application by applicant for administrative and processing costs, and the balance, if any, refunded to the applicant. Where the application fee is less than Twenty-five (\$25) Dollars, the entire application fee shall be retained by the City for administrative and processing costs.

CITY OF KENOSHA  
APPLICATION FOR TAXICAB PERMIT  
(\$13.07 City of Kenosha Code of General Ordinances)

LP 8/12  
CC 8/19  
E-MAILED JUL 24 10:00 AM '14

Type: 143  
Fee: \$75.00/per vehicle  
If this is a transfer, fee is \$20.00 per # of cabs listed on affidavit.

I hereby apply for permit to engage in the business of conveyance of persons for hire (taxicab) within the City of Kenosha to and including the 30th day of June, 2014

THE FOLLOWING QUESTIONS MUST BE ANSWERED (PLEASE PRINT).

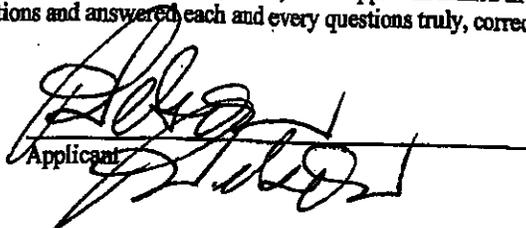
Licensee Name A-N-T TRANSPORTATION, INC District 14  
Business Name A-N-T TRANSPORTATION  
Business Address 5701 75th ST (HWY-50) KENOSHA, WI 53142  
Phone # 262-764-3441 (B) 262-460-9413 (E) 262-344-0494 (H)  
 Business  Cell  Home

How would you like to receive your license?  pick up  mail

The following items must be attached to this application before filing:

1. Taxi cab listing, which identifies 1 number of cabs. ✓
2. "Applicant's Report of Police Record". The Police Department will verify the information and forward their report to the City Attorney, who will make a recommendation as to whether or not applicant is of sufficient moral character to be entitled to the privilege of being awarded a taxicab permit. Check here if attached . x 2 ✓
3. Insurance policy providing coverage for liability of a minimum of Twenty-Five Thousand Dollars (\$25,000.00) for injury or death to any one person, and subject to the same limit per person, a maximum liability of Fifty Thousand Dollars (\$50,000.00) for the injury or death of any number of persons in any one accident and a maximum liability of Ten Thousand Dollars (\$10,000.00) for property damage in any one accident, containing the provision for Fifty Dollars (\$50.00) deductible insurance on the property damage only; or, a certificate of insurance acceptable to the State of Wisconsin. Said policy or certificate shall further provide that the same cannot be canceled until thirty (30) days notice of such cancellation shall be given to the City Clerk. Check here if attached . ✓
4. CITY OF KENOSHA TAXICAB SAFETY AND PERFORMANCE CHECKLIST for each vehicle must be completed by an Automotive Service Excellence (A.S.E.) Certified Technician. A copy of the technician's certification, or proof of certification (i.e. business card) must be attached. Check here if attached . ✓
5. Section 13.07 G.4.h. of the Code of General Ordinances regulates rates and fares according to the City of Kenosha Zone Map and states that permit holders shall charge for tips beyond the zones according to a schedule of rates to be filed with the City Clerk/Treasurer's office.
  - a. Check here if you have received the City of Kenosha Zone Map . ✓
  - b. Check here if schedule of rates is attached . ✓

THE UNDERSIGNED, BEING FIRST DULY SWORN ON OATH, deposes and says that (he/she) is the applicant named in the foregoing application and that (he/she) had read each and every questions and answered each and every questions truly, correctly, and completely, under penalty of law for failure to do so.

  
Applicant

Subscribed and sworn to before me this  
24 day of July, 2013  
  
Notary Public  
My Commission Expires 4-11-17

# A-N-T TRANSPORTATION, INC

## CODE OF GENERAL ORDINANCES, 2013 - KENOSHA, WISCONSIN

### ZONE FARE

1. \$5.25

2. \$5.50

3. 6.00

4. 6.50

5. 7.00

6. 8.00

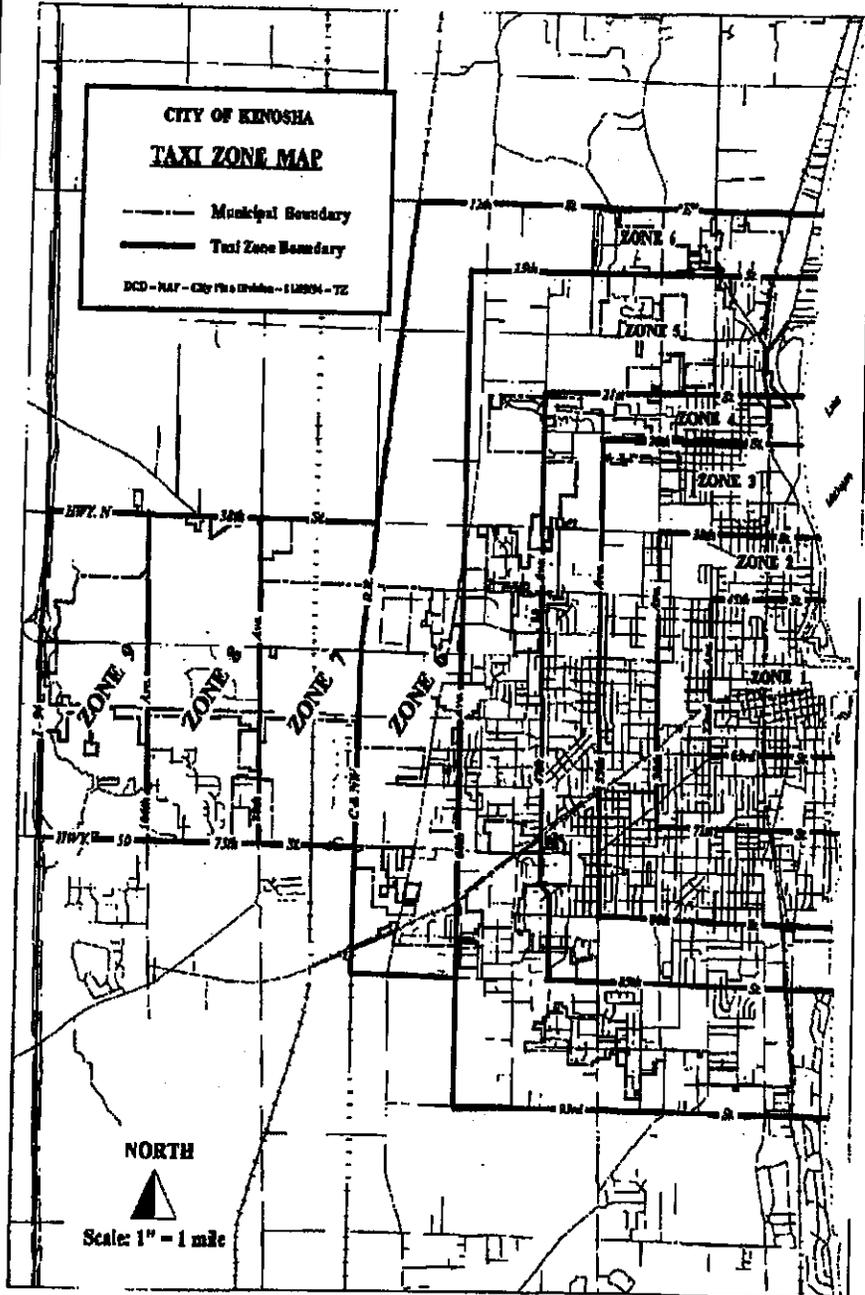
7. 9.00

8. 11.00

9. 13.00

10. 15.00

11. 17.00



EFFECTIVE: July 24, 2013

XII-53

*[Handwritten signature]*  
A-N-T Transportation, Inc

# **A-N-T TRANSPORTATION**

## **RATES AND FARE FOR TAXI SERVICE IN KENOSHA**

**Effective: July 23, 2013**

**For travel between city of Kenosha and:**

**Village of Gurnee: \$20.00**

**Village of Vernon Hills: \$45.00**

**O'Hare Airport: \$70.00**

**Midway Airport \$105.00**

**Downtown Chicago: \$95.00**

**Mitchell Field Airport: \$55.00**

**Downtown Milwaukee: \$65.00**

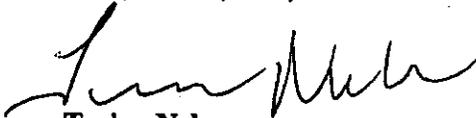
**Lake Geneva: \$55.00**

**Such rates shall be effective upon hire for the first passenger, and one dollar (\$1.00) may be charged for each additional passenger above the age of one year old.**

**Two dollars (\$2.00) upon hire for the first passenger and one dollar (\$1.00) for each additional passenger above the age of one year old;**

**Two dollars (\$2.00) for each mile or fraction thereof that is traveled in A-N-T Transportation Taxi Service; and**

**Forty cents (\$0.40) for each one minute of waiting time or traffic delay**



**Terina Nelson**

**Management**

CEH  
DPR  
Neath  
Police

LD 7/29  
CC 8/5

**APPLICATION  
REFUGE CENTER LICENSE  
(CHAPTER 13.13, CODE OF GENERAL ORDINANCES)**

District #3

License Type: 50

License Period: May 1st through April 30th

Check One:  Original Application  Renewal Application

How would you like to receive your license?  pick up  mail

CALL 262-818-0685  
FOR PICK UP.

The Named (check one):

- INDIVIDUAL (Complete Sections 1, 4, 5, 6 and 7)
- PARTNERSHIP (Complete Sections 2, 4, 5, 6 and 7)
- CORPORATION/LIMITED LIABILITY COMPANY (Complete Sections 3, 4, 5, 6 and 7)

hereby makes application for the Refuge Center License checked above

**(SECTION 1) INDIVIDUAL INFORMATION**

Name of Applicant \_\_\_\_\_  
 Last First M.  
 Residence Address \_\_\_\_\_  
 Street City State Zip  
 Date of Birth \_\_\_\_\_ Phone Number \_\_\_\_\_  
 DOB  Business  Cell  Home  
 Email Address \_\_\_\_\_

**(SECTION 2) PARTNERSHIP INFORMATION**

Partnership Name \_\_\_\_\_

List Name, Residence Address, Phone Number, Date of Birth, and Email Address of all Partners: (Attach Additional Sheets if necessary)

Name of Applicant \_\_\_\_\_  
 Last First M.  
 Residence Address \_\_\_\_\_  
 Street City State Zip  
 Date of Birth \_\_\_\_\_ Phone Number \_\_\_\_\_  
 DOB  Business  Cell  Home  
 Email Address \_\_\_\_\_

Name of Applicant \_\_\_\_\_  
 Last First M.  
 Residence Address \_\_\_\_\_  
 Street City State Zip  
 Date of Birth \_\_\_\_\_ Phone Number \_\_\_\_\_  
 DOB  Business  Cell  Home  
 Email Address \_\_\_\_\_

**RECEIVED**  
 JUL 08 2013  
 CITY OF KENOSHA  
 CITY CLERK-TREASURER

(SECTION 3) CORPORATE INFORMATION

Corporation Name FIRST STEP SERVICES INC State of Incorporation WI

List Name, Residence Address, Phone Number, Date of Birth, and Email Address of all Partners: (Attach Additional Sheets if necessary)

Name of Applicant SANCHEZ TRACY LYNN  
Residence Address 7316 23RD AVE KENOSHA WI 53140  
Date of Birth 1-1-67 DOB 262-237-1606 Phone Number  
Email Address FIRSTSTEP1017@AOL.COM ALTERNATE 262-818-0685

Name of Applicant \_\_\_\_\_  
Residence Address \_\_\_\_\_  
Date of Birth \_\_\_\_\_  
Email Address \_\_\_\_\_

Name of Applicant \_\_\_\_\_  
Residence Address \_\_\_\_\_  
Date of Birth \_\_\_\_\_  
Email Address \_\_\_\_\_

(SECTION 4) BUSINESS INFORMATION

Business Name, Street Address, State, Zip Code and Business Number: FIRST STEP SERVICES INC  
1017 63RD ST, KENOSHA, WI 53140 262-605-8859

Building Owner's Name, Home Address, State, Zip, Phone Number: TRACY SANCHEZ 7316 23RD AVE  
KENOSHA, WI, 53140 262-237-1606

Manager or Proprietor of Business, Home Address, State, Zip, Phone Number: N/A

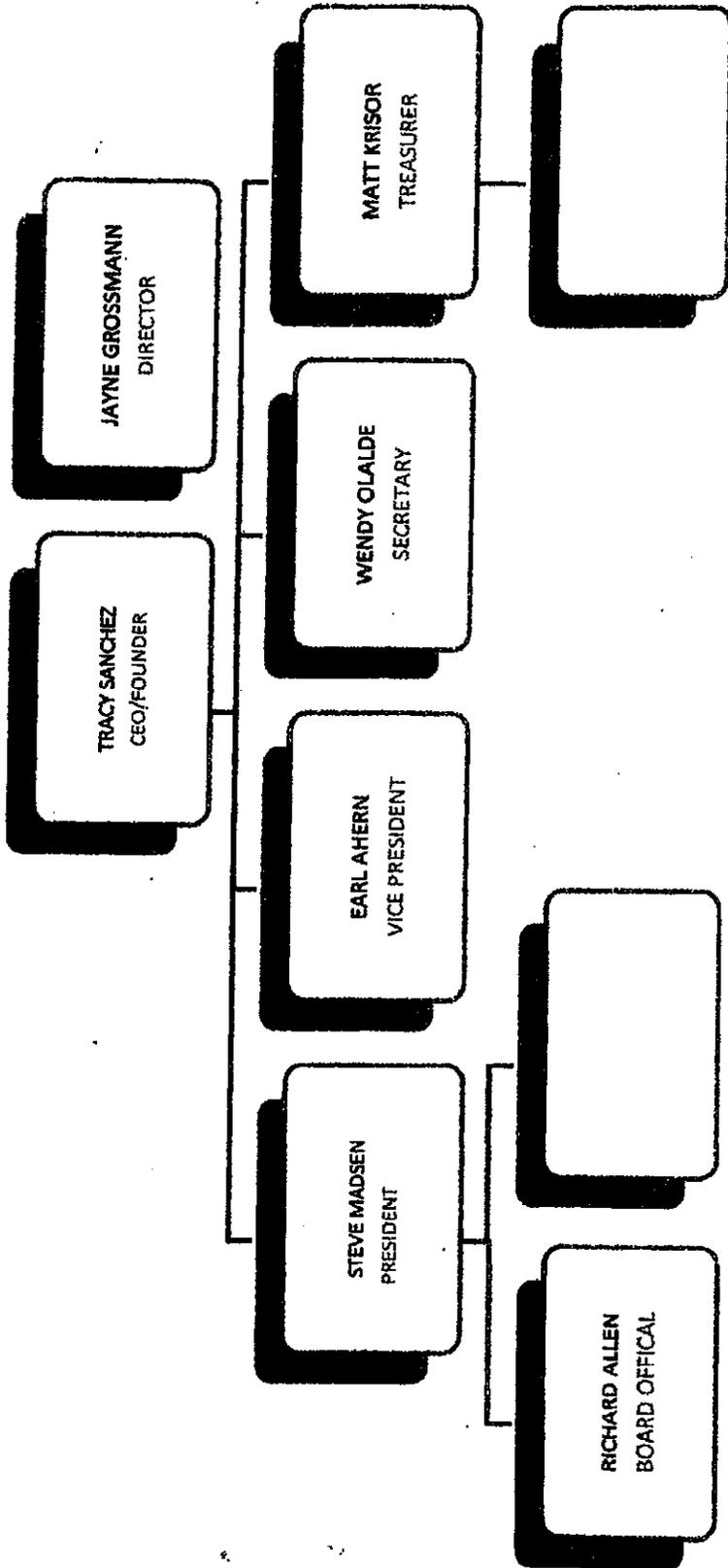
(SECTION 5) GENERAL INFORMATION

Organizational Chart listing supervisory personnel by name. \*Check if Attached ✓

Complete list of the services and programs provided at the Center. \*Check if Attached ✓

Floor plan identifying size and location of all Centers area. \*Check if Attached ✓

# FIRST STEP SERVICES, INC.



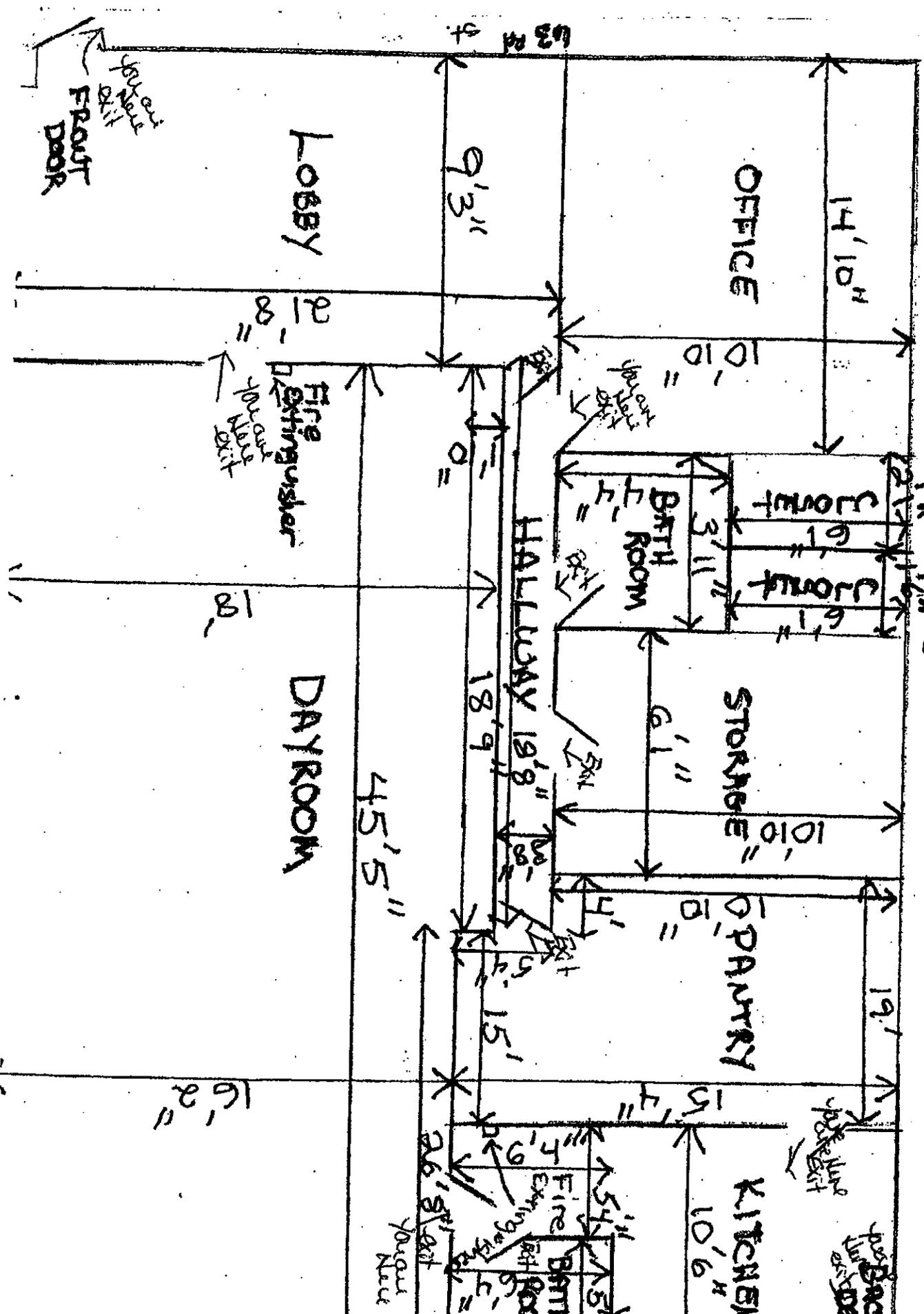
**FIRST STEP SERVICES, INC.  
SERVICES AND PROGRAMS**

Two meals daily  
Clothing and hygiene items as available  
Shower facilities  
Use of computer  
Assistance with resume writing and job application forms  
Telephone and message service  
Use of address for postal needs  
Local newspaper for employment and housing searches  
Referrals to local private or government agencies for a variety of services  
Networking with local churches and thrift stores  
As available: bus tokens and I.D. assistance  
Aftercare following the acquisition of housing including packages, counseling, etc.  
KHDS counselor available by appointment  
Government cell phones as available  
Veterans Affairs agent available once a month or by appointment  
Small library and day room including television  
Bikes as available from the KAC or other donors  
Tutoring various subject areas periodically on a scheduled day of the week  
Storage area as available for personal property  
Wet shelter at night during the winter  
First aid supplies for minor problems  
Community outreach for the benefit of our neighbors

For current details and scheduling see a staff member or call the office at 262-605-8859.

# Emergency Plan

← N



- Dates & Hours of operation:  Sunday \_\_\_\_\_  
 Monday \_\_\_\_\_  
 Tuesday \_\_\_\_\_  
 Wednesday \_\_\_\_\_  
 Thursday \_\_\_\_\_  
 Friday \_\_\_\_\_  
 Saturday \_\_\_\_\_

SEE ATTACHED  
HOURS OF OPERATION

Code of Conduct Plan which addresses the expectations and accountability of the clientele, including while on the Refuge Center premises and while off-site. \*Check if Attached

The undersigned, understand that this license may be denied or revoked by the Common Council for fraud, misrepresentation or false statement contained in the application or for any violation of §943.34 (receiving stolen property), 948.62 (receiving stolen property from a child) or 948.63 (receiving property from a child), Wisconsin Statutes. The undersigned, being first duly sworn on oath, disposes and says that (he/she is) (they are) the applicant(s) named in the foregoing application; that (he/she has) (they have) read each and every question and answered each and every question truly, correctly and completely, under penalty of law for failure to do so.

Applicants Signature  
(Individual/Partner/President)

Applicants Signature  
(Partner/Secretary or other)

*Jacques Sanchez*  
Applicants Signature  
(Partner/other corporation member)

Applicants Signature  
(Corporation member)

Date of application 7/8/13 Clerk initials mm Date granted \_\_\_\_\_ Date issued \_\_\_\_\_

June 2013

**FIRST STEP SERVICES, INC  
GENERAL HOURS OF OPERATION**

**SUMMER: (April 1<sup>st</sup> to October 31<sup>st</sup>)**

<b>Sunday</b>	<b>9am – 2pm</b>
<b>Monday through Saturday</b>	<b>8am - 2pm</b>
<b>Monday only</b>	<b>5pm – 6pm</b>

**WINTER: (November 1<sup>st</sup> to March 31<sup>st</sup>)**

<b>Sunday</b>	<b>9am - 4pm</b>	<b>7pm – 6am</b>
<b>Monday through Saturday</b>	<b>7am – 4pm</b>	<b>7pm - 6am</b>
<b>Monday only</b>	<b>5pm- 6pm</b>	

**Hours subject to immediate change due to staff availability, weather, etc.**

## FIRST STEP EXPECTS FROM GUESTS

1. Treat everyone here with respect and dignity
2. Communicate to the staff your questions, concerns, and anything else that will help you improve your life situation.
3. You can submit grievances, but in the meantime you must comply with staff directives
4. No smoking indoors.
5. Do not bring into the building any alcohol, drugs, or weapons. Medicines must be declared during check-in.
6. Each day make specific efforts to improve your housing and/or job situation.
7. Do whatever you can to keep our Dayroom clean and orderly. Ask what you can do to help First Step's operation.
8. When you leave our facility, please do your best to obey all laws, respect the property rights of our neighbors, and to assist others as the opportunity presents itself.

## **EXPECTATIONS FOR FIRST STEP STAFF AND /OR VOLUNTEERS:**

- **BE POLITE AND RESPECTFUL**
- **BE FRIENDLY" COURTEOUS AND PROFESSIONAL**
- **TREAT GUESTS FAIRLY AND EQUITABLY**
- **BE RESPONSIVE TO GUESTS NEEDS/CONCERNS**
- **DIRECT AND REFER GUESTS TO OTHER APPROPRIATE SERVICES**
- **KEEP PERSONAL INFORMATION CONFIDENTIAL**
- **PROVIDE OUR GUESTS WITH KNOWLEDGE OF ALL PROGRAMS APPLICABLE**
- **BE ON TIME FOR SCHEDULED MEETINGS AND/OR APPOINTMENTS**
- **(RESCHEDULE WHEN NECESSARY)**
- **RETURN PHONE CALLS TIMELY**
- **PROCESS ALL INFORMATION/PAPERWORK/REFERRALS/ETC. TIMELY AND ACCURATELY**
- **NO FRATERNIZING OR OUTSIDE PERSONAL RELATIONSHIPS**
- **(THAT COULD JEOPARDIZE SERVICES)**
- **NO SEXUAL HARASSMENT**
- **WORK TOGETHER AS TEAM PLAYERS STAFF AND VOLUNTEERS**
- **PLEASE RECOGNIZE THAT GUESTS ARE THE PURPOSE OF OUR WORK!**

ORDINANCE NO. \_\_\_\_\_

**Draft 05/23/13**

**SPONSOR: ALDERPERSON MICHAEL J. ORTH**

**TO REPEAL AND RECREATE SECTION 13.035.B.2 OF  
THE CODE OF GENERAL ORDINANCES FOR THE  
CITY OF KENOSHA REGARDING PEDDLER'S STANDS  
OPERATION**

The Common Council of the City of Kenosha, Wisconsin, do ordain as follows:

**Section One:** Section **13.035** of the Code of General Ordinances for the City of

Kenosha, Wisconsin, is hereby repealed and recreated as follows:

**(2) Probationary** Term. An approved location shall be ~~limited to~~ subject to a probationary period of thirty (30) consecutive days. If no written complaints or objections with respect to the approved location are received by the Clerk during the probationary period, the location shall be the "location" of the stand for the remainder of the licensing period. If a complaint or objection is received, it shall be forwarded to the Common Council for further consideration of the stand location. The probationary period shall be extended as long as the location remains under Council consideration. The Council shall either confirm or amend the location. Each stand may be relocated subject to the filing of a new permit application during the term of the permit and upon Common Council approval.

**Section Two:** This Ordinance shall become effective upon passage and publication.

ATTEST: \_\_\_\_\_ City Clerk

APPROVED: \_\_\_\_\_ Mayor

Passed:

Published:

Drafted By:  
MATTHEW A. KNIGHT  
Deputy City Attorney