



P.O. Box 352 • 150 S. Bridge St. • Markesan, WI 53946 • P: (920) 398-3031 • F: (920) 398-3991

**SPECIAL
CITY OF MARKESAN COMMON COUNCIL**

Markesan City Hall

AGENDA

March 24, 2022

6:00 PM

1. Preliminaries
 - 1.1. Call to Order
 - 1.2. Roll Call by the Clerk-Treasurer
 - 1.3. Pledge of Allegiance
 - 1.4. Citizen's Comments
2. New Business
 - 2.1. Discussion and Action on the new Parks Coordinator Position
 - 2.2. Confirm Offer Employment to Tyler Stocker for the Public Property and Streets Supervisor Position
 - 2.3. Approval of the Proclamation Recognizing the Passage of the Federal Fair Housing Act for the Month of April 2022
 - 2.4. Approval of Temporary Class "B" Retailer's License for Markesan Sno-Drifters for May 15, 2022 and June 5, 2022
 - 2.5. Approval of Class A Beer and Class A Liquor Licenses for the period ending 6/30/2022 to Lucas Oil, LLC, Paul Cristea-Rist, Owner
 - 2.6. Approval of Soda Water License for the period ending 6/30/22 to Lucas Oil, LLC
 - 2.7. Approval of Cigarette License for the period ending 6/30/22 to Lucas Oil, LLC
3. Schedule Future Meetings and Agenda Items
4. Adjournment

The Common Council welcomes all visitors to listen & observe, but only Council members & those invited to speak will be permitted to do so, except during any posted Public Hearing. Citizen's Comments is where any citizen may comment on an issue, but the Council may only listen and may not reply to or address the issue unless it is an item on the agenda.

Any person requiring special assistance to participate in this meeting should contact the Clerk-Treasurer at 398-3031 at least 24 hours prior to the meeting so appropriate accommodations can be made.

Posted: Horicon Bank City Hall
 ERGO Bank Post Office
 www.markesanwi.gov

Dated March 23, 2022
Elizabeth A Amend, Clerk-Treasurer

POSITION DESCRIPTION

TITLE: Parks Maintenance Supervisor

DEPARTMENT: Public Property and Health Committee

A. JOB DESCRIPTION

The Parks Maintenance Supervisor plans, organizes, prioritizes, implements, and evaluates the maintenance of park grounds and facilities, including Soldiers & Sailors, Hein, Riverdale and Zanto Park. The position will supervise, direct, coordinate and perform park maintenance activities.

B. DUTIES AND RESPONSIBILITIES

1. Prepares shelters and parks for rentals.
2. Responsible for landscaping, lawn mowing, and garbage removal of park properties.
3. Assist with tree removal, pruning, planting, picking up brush and litter as needed.
4. Coordinates volunteer groups during parks maintenance projects and spring clean-up.
5. Provides park oversight and assistance for facility repair, construction projects, and the purchasing of parks maintenance supplies.
6. Conducts safety inspections of parks equipment including but not limited to playgrounds, shelters and chain link fences.
7. Assists with the coordination and implementation of all safety related issues and guidelines as they relate to park maintenance operations.
8. Assists with park development, maintenance planning, and preparation of the park maintenance budget.
9. Operates a variety of machines such as bucket truck, end loaders, sweepers, backhoe, skid steer, various mowers, tractors, stump grinder, chainsaw, brush chipper, and other equipment as needed.
10. Works varying hours to meet the needs of events conducted outside of normal office hours.

C. QUALIFICATIONS

1. Ability to work independently.
2. Knowledge of management, planning and budgeting.
3. Knowledge or experience in machine operation, light carpentry, electrical, plumbing or landscaping.
4. Communication and interpersonal skills as applied to interaction with co-workers, supervisor, and the general public that is sufficient to exchange and convey information and to receive work directions.

D. PHYSICAL REQUIREMENTS

The physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

While performing the duties of this job, the employee is regularly required to talk or hear. The employee frequently is required to walk; use hands to finger, handle or feel; and reach with hands and arms. The employee is occasionally required perform moderately physically demanding work, typically involving some combination of climbing and balancing, stooping, kneeling, crouching, crawling, lifting, carrying, pushing and pulling moderately heavy objects and materials twenty to fifty pounds. Specific vision abilities required by this job include close vision, distance vision, color vision, peripheral vision, depth perception, and ability to adjust focus. Employee is regularly exposed to outside weather conditions during all seasons of the year.

E. REASONING ABILITY

Requires the ability to apply principles of rational systems. Ability to interpret instructions furnished in written, oral, diagrammatic or schedule form. Ability to exercise independent judgement to adopt or modify methods and standards to meet variations in assigned objective.

Requires the ability to exercise the judgement, decisiveness and creativity required insituations involving the evaluation of information against sensory, judgmental and/or subjective criteria, as opposed to criteria that are clearly measurable or verifiable.

Park Supervisor Hours Breakdown

	Task Time	Total Time
Zanto Park	0.5	
Hein Park	1	
Kiwanis Park	2	
Lion's Park	6	
	<hr/>	
	9.5 hrs	
*Average 18 times a year		171
Weekly Park Maintenance	3 hrs	
* Average 18 times		54
Park Rental Maintenance	3 hrs	
* Average 10 times		30
Repairs/Projects/Administration		45
		<hr/>
		300 total hours



150 S. BRIDGE ST. • MARKESAN, WI 53946 • 920-398-3031

PROCLAMATION

Recognizing the Passage of the Federal Fair Housing Act

Whereas, The City of Markesan recognizes the passage of the Federal Fair Housing Act; Title VIII of the Civil Rights Act of 1968, as amended; and

Whereas, this law guarantees that housing throughout the United States should be made available to all citizens without regard to race, color, religion, sex, family status, disability or national origin; and

Whereas, equality of opportunity for all is a fundamental policy of this nation, state and city, and

Whereas, barriers which diminish the rights and limit the options of any citizen will ultimately diminish the right of all citizens;

Whereas, the cooperation, commitment and support of all the residents of the City of Markesan is necessary to removing barriers to the enjoyment of living where one chooses within one's means.

Now, Therefore, I, Rich Slate, City Mayor, do hereby proclaim the month of April, 2022 as **FAIR HOUSING MONTH** and request and encourage every citizen and business of our community to support and endorse Fair Housing; to reaffirm their commitment to Fair Housing for all, and wholeheartedly recognize these rights and responsibilities throughout the year.

Dated this 24th day of March, 2022.

Rich Slate, City of Markesan Mayor

Application for Temporary Class "B" / "Class B" Retailer's License

See Additional Information on reverse side. Contact the municipal clerk if you have questions.

FEE \$ 10.00

Application Date: 3-10-22

Town Village City of Marhezan

County of Green Lake

The named organization applies for: (check appropriate box(es).)

- A Temporary Class "B" license to sell fermented malt beverages at picnics or similar gatherings under s. 125.26(6), Wis. Stats.
 A Temporary "Class B" license to sell wine at picnics or similar gatherings under s. 125.51(10), Wis. Stats.

at the premises described below during a special event beginning May 15, 22 and ending May 15, 2022 and agrees to comply with all laws, resolutions, ordinances and regulations (state, federal or local) affecting the sale of fermented malt beverages and/or wine if the license is granted.

1. Organization (check appropriate box) → Bona fide Club Church Lodge/Society
 Chamber of Commerce or similar Civic or Trade Organization
 Veteran's Organization Fair Association

(a) Name Marhezan Sno-Drifters

(b) Address 360 Enterprise Dr
(Street) Town Village City

(c) Date organized 1967

(d) If corporation, give date of incorporation 1967

(e) If the named organization is not required to hold a Wisconsin seller's permit pursuant to s. 77.54 (7m), Wis. Stats., check this box:

(f) Names and addresses of all officers:

President Eric Kraumenaur

Vice President Aaron Kocher

Secretary Scott Zacharias

Treasurer Scott Zacharias

(g) Name and address of manager or person in charge of affair:
John Zimmerman

2. Location of Premises Where Beer and/or Wine Will Be Sold, Served, Consumed, or Stored, and Areas Where Alcohol Beverage Records Will be Stored:

(a) Street number W1996 Hwy 44

(b) Lot _____ Block _____

(c) Do premises occupy all or part of building? Big Building - Surrounding area

(d) If part of building, describe fully all premises covered under this application, which floor or floors, or room or rooms, license is to cover:

3. Name of Event

(a) List name of the event 12th Annual Car Show

(b) Dates of event May 15, 2022

DECLARATION

The Officer(s) of the organization, individually and together, declare under penalties of law that the information provided in this application is true and correct to the best of their knowledge and belief.

Marhezan Sno-Drifters
(Name of Organization)

Pres Officer [Signature]
(Signature/date)

Sec Officer Scott Zacharias
(Signature/date)

Vice Pres Officer Aaron Kocher
(Signature/date)

Sec Officer Scott Zacharias
(Signature/date)

Date Filed with Clerk 3/14/2022

Date Reported to Council or Board _____

Date Granted by Council _____

License No. _____

W.P

OK

03-15-22

Application for Temporary Class "B" / "Class B" Retailer's License

See Additional Information on reverse side. Contact the municipal clerk if you have questions.

FEE \$ 10.00

Application Date: 3-10-22

Town Village City of Marsheson

County of Cocoa Lake

The named organization applies for: (check appropriate box(es).)

- A Temporary Class "B" license to sell fermented malt beverages at picnics or similar gatherings under s. 125.26(6), Wis. Stats.
 A Temporary "Class B" license to sell wine at picnics or similar gatherings under s. 125.51(10), Wis. Stats.

at the premises described below during a special event beginning June 5, 22 and ending June 5, 22 and agrees to comply with all laws, resolutions, ordinances and regulations (state, federal or local) affecting the sale of fermented malt beverages and/or wine if the license is granted.

1. Organization (check appropriate box) → Bona fide Club Church Lodge/Society
 Chamber of Commerce or similar Civic or Trade Organization
 Veteran's Organization Fair Association

(a) Name Marsheson Sno-Drifters

(b) Address 360 Enterprise Dr Marsheson
(Street) Town Village City

(c) Date organized 1967

(d) If corporation, give date of incorporation 1967

(e) If the named organization is not required to hold a Wisconsin seller's permit pursuant to s. 77.54 (7m), Wis. Stats., check this box:

(f) Names and addresses of all officers:
 President Eric Krumenauer
 Vice President Baron Koehn
 Secretary Scott Zacharis
 Treasurer Scott Zacharis

(g) Name and address of manager or person in charge of affair:
Eric Krumenauer

2. Location of Premises Where Beer and/or Wine Will Be Sold, Served, Consumed, or Stored, and Areas Where Alcohol Beverage Records Will be Stored:

(a) Street number 360 Enterprise Dr, Marsheson

(b) Lot _____ Block _____

(c) Do premises occupy all or part of building? Entire building at 360 Enterprise

(d) If part of building, describe fully all premises covered under this application, which floor or floors, or room or rooms, license is to cover:

3. Name of Event

(a) List name of the event Open House (

(b) Dates of event June 5, 2022

DECLARATION

The Officer(s) of the organization, individually and together, declare under penalties of law that the information provided in this application is true and correct to the best of their knowledge and belief.

Pres. Officer [Signature]
(Signature/date)
 Vice Pres Officer [Signature]
(Signature/date)

Marsheson Sno-Drifters
(Name of Organization)
 Sec Officer Scott Zacharis
(Signature/date)
 Treas. Officer Scott Zacharis
(Signature/date)

Date Filed with Clerk 3/14/2022

Date Reported to Council or Board _____

Date Granted by Council _____

License No. _____

W.P ok 03-15-22

ORIGINAL ALCOHOL BEVERAGE RETAIL LICENSE APPLICATION

Submit to municipal clerk.

For the license period beginning April 1st 20 22 ;
ending June 30 20 22

TO THE GOVERNING BODY of the: Town of } MARKESSAN
 Village of }
 City of }

County of GREEN LAKE Aldermanic Dist. No. _____ (if required by ordinance)

Applicant's WI Seller's Permit No.:		FEIN Number:	
LICENSE REQUESTED ▶			
TYPE		FEE	
<input checked="" type="checkbox"/>	Class A beer	\$	100
<input type="checkbox"/>	Class B beer	\$	
<input type="checkbox"/>	Class C wine	\$	
<input checked="" type="checkbox"/>	Class A liquor	\$	400
<input type="checkbox"/>	Class B liquor	\$	
<input type="checkbox"/>	Reserve Class B liquor	\$	
<input type="checkbox"/>	Class B (wine only) winery	\$	
Publication fee		\$	29.5
TOTAL FEE		\$	154.01

PRD-
rated
\$125.01

1. The named INDIVIDUAL PARTNERSHIP LIMITED LIABILITY COMPANY
 CORPORATION/NONPROFIT ORGANIZATION

hereby makes application for the alcohol beverage license(s) checked above.

2. Name (individual/partners give last name, first, middle; corporations/limited liability companies give registered name): ▶ LUCAS OIL LLC

An "Auxiliary Questionnaire," Form AT-103, must be completed and attached to this application by each individual applicant, by each member of a partnership, and by each officer, director and agent of a corporation or nonprofit organization, and by each member/manager and agent of a limited liability company. List the name, title, and place of residence of each person.

Title	Name	Home Address	Post Office & Zip Code
President/Member	<u>OWNER PAUL CRISTEA-KIST</u>	<u>604 E. SOUTH ST</u>	<u>53916</u>
Vice President/Member	_____	_____	_____
Secretary/Member	_____	_____	_____
Treasurer/Member	_____	_____	_____
Agent ▶	_____	_____	_____
Directors/Managers	_____	_____	_____

3. Trade Name ▶ LUCAS OIL LLC Business Phone Number _____
4. Address of Premises ▶ 544 N MARGARET ST Post Office & Zip Code ▶ 55946

5. Is individual, partners or agent of corporation/limited liability company subject to completion of the responsible beverage server training course for this license period? Yes No
6. Is the applicant an employe or agent of, or acting on behalf of anyone except the named applicant? Yes No
7. Does any other alcohol beverage retail licensee or wholesale permittee have any interest in or control of this business? Yes No
8. (a) Corporate/limited liability company applicants only: Insert state WI and date 2/26/22 of registration.
(b) Is applicant corporation/limited liability company a subsidiary of any other corporation or limited liability company? Yes No
(c) Does the corporation, or any officer, director, stockholder or agent or limited liability company, or any member/manager or agent hold any interest in any other alcohol beverage license or permit in Wisconsin? Yes No

(NOTE: All applicants explain fully on reverse side of this form every YES answer in sections 5, 6, 7 and 8 above.)

9. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) Inside convenience store shelves and coolers.
10. Legal description (omit if street address is given above): _____
11. (a) Was this premises licensed for the sale of liquor or beer during the past license year? Yes No
(b) If yes, under what name was license issued? _____
12. Does the applicant understand they must file a Special Occupational Tax return (TTB form 5630.5) before beginning business? [phone 1-800-937-8864] Yes No
13. Does the applicant understand a Wisconsin Seller's Permit must be applied for and issued in the same name as that shown in Section 2, above? [phone (608) 266-2776] Yes No
14. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes No

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signers. Signers agree to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants and each member of a partnership applicant must sign; corporate officer(s), members/managers of Limited Liability Companies must sign.) Any lack of access to any portion of a licensed premises during inspection will be deemed a refusal to permit inspection. Such refusal is a misdemeanor and grounds for revocation of this license.

SUBSCRIBED AND SWORN TO BEFORE ME

this 04th day of March 2022
Rachel Heiling (Clerk/Notary Public)
_____ (Officer of Corporation/Member/Manager of Limited Liability Company/Partner/Individual)
_____ (Officer of Corporation/Member/Manager of Limited Liability Company/Partner)
My commission expires 5/8/2025
_____ (Additional Partner(s)/Member/Manager of Limited Liability Company If Any)

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk	<u>3/8/22</u>	Date reported to council/board	<u>3/24/22</u>	Date provisional license issued	_____	Signature of Clerk / Deputy Clerk	_____
Date license granted	_____	Date license issued	_____	License number issued	_____	_____	_____

SCHEDULE FOR APPOINTMENT OF AGENT BY CORPORATION/NONPROFIT ORGANIZATION OR LIMITED LIABILITY COMPANY

Submit to municipal clerk.

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent. The following questions must be answered by the agent. The appointment must be signed by the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

To the governing body of: Town Village of MARKESAN County of GREEN LAKE
 City

The undersigned duly authorized officer(s)/members/managers of LUCAS OIL LLC
(registered name of corporation/organization or limited liability company)

a corporation/organization or limited liability company making application for an alcohol beverage license for a premises known as LUCAS OIL LLC
(trade name)

located at 544 N. MARGARET ST. MARKESAN, WI 53946

appoints PAUL CRISTEA-RIST
(name of appointed agent)
604 E. SOUTH ST. BEAVER DAM, WI 53916
(home address of appointed agent)

to act for the corporation/organization/limited liability company with full authority and control of the premises and of all business relative to alcohol beverages conducted therein. Is applicant agent presently acting in that capacity or requesting approval for any corporation/organization/limited liability company having or applying for a beer and/or liquor license for any other location in Wisconsin?

Yes No If so, indicate the corporate name(s)/limited liability company(ies) and municipality(ies).

Is applicant agent subject to completion of the responsible beverage server training course? Yes No

How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin? 35 years

Place of residence last year 604 E. SOUTH ST. BEAVER DAM, WI 53916

For: LUCAS OIL LLC
(name of corporation/organization/limited liability company)

By: [Signature]
(signature of Officer/Member/Manager)

And: _____
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, PAUL CRISTEA-RIST, hereby accept this appointment as agent for the
(print/type agent's name)

corporation/organization/limited liability company and assume full responsibility for the conduct of all business relative to alcohol beverages conducted on the premises for the corporation/organization/limited liability company.

[Signature] 3/8/2022 Agent's age 42
(signature of agent) (date)
604 E. SOUTH ST. BEAVER DAM, WI 53916 Date of birth 4/2/1979
(home address of agent)

**APPROVAL OF AGENT BY MUNICIPAL AUTHORITY
 (Clerk cannot sign on behalf of Municipal Official)**

I hereby certify that I have checked municipal and state criminal records. To the best of my knowledge, with the available information, the character, record and reputation are satisfactory and I have no objection to the agent appointed.

Approved on 03-09-22 by [Signature] Title Police Chief
(date) (signature of proper local official) (town chair, village president, police chief)

AUXILIARY QUESTIONNAIRE ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk.

Individual's Full Name (please print) (last name)		(first name)		(middle name)	
CRISTEA-RIST		PAUL		SOREN	
Home Address (street/route)	Post Office	City	State	Zip Code	
604 E. SOUTH ST.		BEAVER DAM	WI	53416	
Home Phone Number	Age	Date of Birth	Place of Birth		
	42	4/2/1979	ROMANIA		

The above named individual provides the following information as a person who is (check one):

Applying for an alcohol beverage license as an individual.

A member of a partnership which is making application for an alcohol beverage license.

MEMBER of LINEAS OIL LLC
(Officer/Director/Member/Manager/Agent) (Name of Corporation, Limited Liability Company or Nonprofit Organization)

which is making application for an alcohol beverage license.

The above named individual provides the following information to the licensing authority:

- How long have you continuously resided in Wisconsin prior to this date? 35 years
- Have you ever been convicted of any offenses (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of any other states or ordinances of any county or municipality? Yes No
If yes, give law or ordinance violated, trial court, trial date and penalty imposed, and/or date, description and status of charges pending. (If more room is needed, continue on reverse side of this form.)
- Are charges for any offenses presently pending against you (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of other states or ordinances of any county or municipality? Yes No
If yes, describe status of charges pending.
- Do you hold, are you making application for or are you an officer, director or agent of a corporation/nonprofit organization or member/manager/agent of a limited liability company holding or applying for any other alcohol beverage license or permit? Yes No
If yes, identify. _____
(Name, Location and Type of License/Permit)
- Do you hold and/or are you an officer, director, stockholder, agent or employe of any person or corporation or member/manager/agent of a limited liability company holding or applying for a wholesale beer permit, brewery/winery permit or wholesale liquor, manufacturer or rectifier permit in the State of Wisconsin? Yes No
If yes, identify. _____
(Name of Wholesale Licensee or Permittee) (Address By City and County)

6. Named individual must list in chronological order last two employers.

Employer's Name	Employer's Address	Employed From	To
MAALIBI TAN & SFA	704 N. SPRING ST. 53416	2017	2022
DIGITAL AMUSEMENT	604 E. SOUTH ST. 53416	2010	2022

The undersigned, being first duly sworn on oath, deposes and says that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application.

Subscribed and sworn to before me
this 8th day of March, 2022
Rachel Heiling
(City/Notary Public)
My commission expires 5/8/2025



[Signature]
(Signature of Named Individual)



CITY OF MARKESAN
Application for Soda Water Beverages

PLEASE PRINT CLEARLY. This license is applied for under Chapter 318 of the City of Markesan Code of Ordinances, and Wisconsin Statutes, Ss. 66.0433, which requires all of the following information. Please answer all questions completely. Incomplete or illegible forms will be returned.

BUSINESS NAME LACAS OIL LLC BUSINESS PHONE 720 319-1900

BUSINESS ADDRESS 544 N MARGARET ST. MARKESAN WI 53946
Street City State Zip

ADDRESS WHERE SODA WILL BE SOLD _____
(if different) Street City State Zip

BUSINESS FEIN 88-1068792

TYPE OF BUSINESS CONDUCTED CONVENIENCE STORE

APPLICANT NAME PAUL CRISTEA-RIST PHONE (best # to reach you) _____
(Person Responsible)

I hereby make application to the Common Council of the City of Markesan, Green Lake County, Wisconsin, for a License to sell soda water beverages. I understand that, if granted, the license shall be conspicuously displayed on the premises at all times. I hereby certify that the information provided on this application is true and correct. I understand that failure to provide all required information or that falsification of any information may be grounds for denial or revocation of this license.

SIGNATURE OF APPLICANT :



Date 3/8/2022

FOR OFFICE USE ONLY (R 5-15)

Date Returned 3/8/22 Amount Paid 5.- Receipt Number 24319

Common Council: Date Approved _____ Denied _____

License Number _____ Expiration Date June 30, 2022

Application for Cigarette and Tobacco Products Retail License

Submit to municipal clerk.

MUNICIPAL USE ONLY

License Number
Period Covered
Date of Issuance

Applicant's Wisconsin 15-digit Sales Tax Account Number
456-1030942416-04

← This must be issued in the same Legal Name of the licensee below.

Legal Name (corporation, limited liability company, partnership or sole proprietorship) LUCAS OIL LLC			Federal Employer Identification No. (FEIN) 88-1068792		
Trade or Business Name (if different than Legal Name)			Telephone Number		
Business Address (License Location) 544 N MARGARET ST		Business Located In <input checked="" type="checkbox"/> City <input type="checkbox"/> Village <input type="checkbox"/> Town of: MARKESAN		Business Telephone ()	
Municipality MARKESAN	State WI	Zip Code 53946	County GREEN LAKE		
Mailing Address (if different than Business Address) 604 E SOUTH ST		Municipality BEAVER DAM		State WI	Zip Code 53916

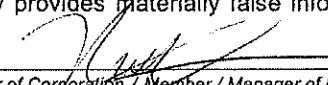
Organization (check one)

Sole Proprietor Wisconsin Corporation – Enter date incorporated: 2/26/2022
 Partnership Out-of-State Corporation – Are you registered to do business in Wisconsin? Yes No
 Other (describe) _____

- Yes No 1. Does the applicant understand that they must purchase cigarettes and tobacco products only from distributors, jobbers, or subjobbers, who hold a permit with the Wisconsin Department of Revenue?
- Yes No 2. Does the applicant understand that they must obtain a Tobacco Products Distributor permit if purchasing untaxed tobacco products from an out-of-state company? (Tobacco Products Distributor permit is available from the Wisconsin Department of Revenue at 608-266-6701. See application form CTP-129, revenue.wi.gov/dor/forms/ctp-129.pdf.)
- Yes No 3. Does the applicant understand that they cannot purchase/exchange cigarettes or tobacco products from another retailer, including transferring existing stock to a new owner?
- Yes No 4. Does the applicant understand that they must provide employees with tobacco sales training approved by the Wisconsin Department of Health Services? (<https://witobaccocheck.org>)
- Yes No 5. Does the applicant understand that they may not sell, give or otherwise provide cigarettes/tobacco products and nicotine products to minors (including electronic cigarettes containing nicotine)?
- Yes No 6. Does the applicant understand that they may not sell single cigarettes?
- Yes No 7. Does the applicant understand that cigarette and tobacco products invoices must be kept on the licensed premises for two years from the date of the invoice and be available for inspection by the Wisconsin Department of Revenue/law enforcement and that failure to comply can result in criminal penalties, including loss of cigarettes/tobacco products?
- Yes No 8. Does the applicant understand that only cigarettes and roll-your-own (RYO) tobacco products listed on the Wisconsin Department of Justice's website labeled "Directory of Certified Tobacco Manufacturers and Brands" at www.doj.state.wi.us/dls/tobacco-directory may be sold in Wisconsin?

Cigarettes / Tobacco will be sold over counter through vending machine both

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the applicant. Applicant agrees to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, cannot be assigned to another. Any lack of access to any portion of a licensed premises during inspection will be deemed a refusal to permit inspection. Such refusal is a misdemeanor and grounds for revocation of this license. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.


 (Officer of Corporation / Member / Manager of Limited Liability Company / Partner / Individual)

Applicable Laws and Rules

This document provides statements or interpretations of the following laws and regulations in effect as of September 19, 2019: Sections 134.65, 134.66, 139.321, 139.79, 139.76, 995.10, and 995.12, Wis. Stats.