

CITY OF SPARTA
PUBLIC SAFETY AGENDA
July 6, 2015

CITY HALL

5:30 P.M.

- 1. Call Meeting to Order**
- 2. Consent Agenda: Consisting of Minutes from the June 1, 2015 meeting, and Police Department's monthly report for May and bills**
- 3. Consideration of New or Renewal Bartender's Licenses**

Gerald Lofft	Liberty Bell	Alisa Dragseth	Frances McCoy
Marie Johnson	Penny Eddy	Rebecca Paulson	Peter Larson
Jack Wright	Sarah Pollock		
- 4. Consideration of Denial of Bartender License for Francisco Lugo-Valencia**
- 5. Consideration of Temporary "Class B"/Class "B" License for St. Patrick's Parish for Summerfest on August 9, 2015**
- 6. Consideration of Class "A" Retail Beer License and Cigarette License for AMBA, Inc. dba Sparta Travel Center at 4105 Theater Road**
- 7. Consideration of "Class B"/Class "B" License for Leticia Lugo dba El Vallarta at 223 N. Black River Street**
- 8. Consideration of "Class B" /Class "B" License for Burrito Real Grill Tienda Taqueria Corp. At 620 Industrial Drive, Suite 8 owned by Roberto Garza Contreras & Veronica Valencia**
- 9. Consideration of Second Hand Jewelry License for Sparta Gold Exchange at 418 W. Wisconsin**
- 10. Consideration of Proposed Ordinance Changes to Chapter 10.065 Parking in Grass**
- 11. Discussion of Fireworks Ordinance**
- 12. Items for Future Consideration**
- 13. Adjourn**

A possible quorum of the Common Council may be in attendance at this meeting but no action will be taken by the Council.

Posted: 7-2-15

CITY OF SPARTA
PUBLIC SAFETY MINUTES
June 1, 2015

PRESENT: Jim Church, Josh Lydon, Kevin Brueggeman,

ABSENT: Alli Karrels, Ed Lukasek

ALSO PRESENT: Todd Fahning, Mark Sund, Dave Kuderer, Kevin Riley, Ted Radde, Emilee Nottestad

Chairman Jim Church called the meeting to order at 5:30 p.m.

A motion was made by Josh Lydon and seconded by Kevin Brueggeman to approve the consent agenda consisting of the minutes of the May 4, 2015 meeting and the Police Department's monthly reports for April and bills. Motion carried 3-0.

Upon proper payment of any fees, the following new or renewal bartender license application were approved on a motion by Josh Lydon and seconded by Kevin Brueggeman. Motion carried 3-0.

Makenzie Schure

Bryanna Grandall

Nicholas Bell

Ronald Genske, Jr.

Chief Kuderer is requesting that the Committee not renew Thumper's "Class B" Liquor License for the next year. The owner, Becky Dingman, has been cited numerous times for not having a licensed bartender on duty, she is not buying from a wholesaler, has been issued a citation for permitting underage drinking in the bar and the Police Department has been dispatched 21 times in less than a year. This recommendation is supported by three of our city ordinances. **A motion was made by Josh Lydon and seconded by Kevin Brueggeman not to renew Thumper's "Class B" Liquor license. Motion carried 3-0.**

A motion was made by Josh Lydon and seconded by Kevin Brueggeman that upon proper payment of funds, the following Class "A" Retail Beer License and Miscellaneous Licenses be approved:

Sparta Co-Op	Class "A" and Cigarette
Kwik Trip #317	Class "A" and Cigarette
Kwik Trip #317	Class "A" and Cigarette
Walgreens	Class "A" and Cigarette
Casey's General Store	Class "A" and Cigarette
Sparta Super Gas	Class "A" and Cigarette
Amish Cheese House	Class "A" and Cigarette
Hansen's IGA	Class "A" and Cigarette
Sparta BP	Class "A" and Cigarette
Sparta Travel Center	Class "A", Cigarette and Video Games
Wal Mart	Class "A", Cigarette and Video Games

Motion carried 3-0.

A motion was made by Josh Lydon and seconded by Kevin Brueggeman that upon proper payment of funds, the following Miscellaneous License Renewal including Mobile Home, Second Hand, Taxi, Auto Salvage and Video Game Licenses be approved:

Family Dollar	Cigarette
Denny's Market	Cigarette
Dollar General	Cigarette
Greendale Manor	Mobile Home
River Pines	Mobile Home
Riverside	Mobile Home
Oak Meadows	Mobile Home
Woodside Village	Mobile Home
Sparta Cabs	Taxi
Advantage Auto Salvage	Salvage
Sparta's New & Used	Second Hand
Andy's Resale	Second Hand
Second Season	Second Hand
Ca\$h-4-You	Second Hand Jewelry
Sparta Cinema	Video Games

Motion carried 3-0.

A motion was made by Josh Lydon and seconded by Kevin Brueggeman that upon proper payment of funds, the following "Class B" Liquor, Class "B" Beer, Class "C" Wine and Miscellaneous License Renewals be approved:

Pizza Hut	Class "B" Beer
Dorine's Family Inn	Class "B" Beer & Class "C" Wine
C & D Concessions	Class "B" Beer
Slice of Chicago	Class "B" Beer & Class "C" Wine
Club 16	"Class B" Liquor, Class "B" Beer & video games
Southside Saloon	"Class B" Liquor, Class "B" Beer & video games
Bobby V's	"Class B" Liquor, Class "B" Beer & video games
Sparta Steakhouse	"Class B" Liquor, Class "B" Beer
Harris Crossing	"Class B" Liquor, Class "B" Beer & video games
Italiano's	"Class B" Liquor, Class "B" Beer
Amber Inn	"Class B" Liquor, Class "B" Beer, Cigarette, video games
Shifty's Shack	"Class B" Liquor, Class "B" Beer, Cigarette, video games
American Legion	"Class B" Liquor, Class "B" Beer, video games
VFW post 2112	"Class B" Liquor, Class "B" Beer, video games
Brewski's	"Class B" Liquor, Class "B" Beer, video games
KNS/The Greens	"Class B" Liquor, Class "B" Beer, Cigarette, video games
Jake's Northwoods	"Class B" Liquor, Class "B" Beer, Class "C" Wine
Market Bar	"Class B" Liquor, Class "B" Beer, video games
Lynda Lou's	"Class B" Liquor, Class "B" Beer, video games
The Colonial	"Class B" Liquor, Class "B" Beer, video games

Wayside	"Class B" Liquor, Class "B" Beer, Cigarette, video games
Foxhole Pub	"Class B" Liquor, Class "B" Beer, video games
The Hangout	"Class B" Liquor, Class "B" Beer, video games
Silent Outdoors	"Class B" Liquor, Class "B" Beer

Motion carried 3-0.

A motion was made by Josh Lydon and seconded by Kevin Brueggeman to approve the application for "Class B" Liquor and Class "B" Beer for Country Inn & Suites under new management at 737 Avon Road. Motion carried 3-0.

A motion was made by Josh Lydon and seconded by Kevin Brueggeman to approve the application for a second hand article & jewelry license for Search and Find, LLC at 118 S. Water Street. Motion carried 3-0.

An item mentioned for future consideration was the status of El Vallarta.

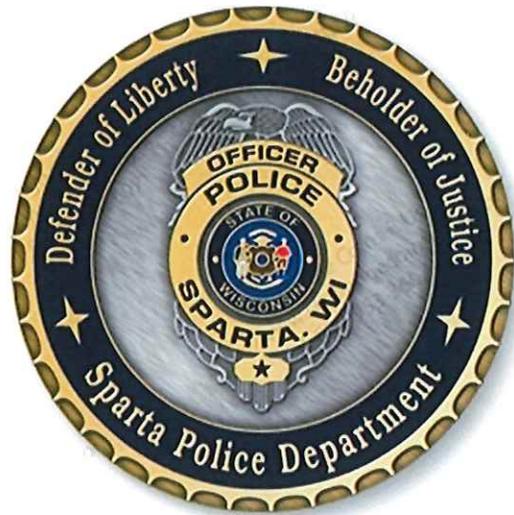
A motion was made by Josh Lydon and seconded by Kevin Brueggeman to adjourn at 5:45 p.m. Motion carried 3-0.

Respectfully Submitted,

Julie Hanson
City Clerk

Sparta Police Department

Monthly Report



May 2015

Activity Report:

During the month of May the Sparta Police Department responded to 1478 calls for service, issued 267 traffic citations, arrested 19 people for Operating While Under the Influence and made 257 non-traffic related arrests. Overall activity level was higher when compared with the prior year.

Index Crimes:

Part I Offenses Reported:

Homicide: 0	Sex Offense: 3	Assault: 3	Burglary: 1
Theft: 30	Motor Vehicle Theft: 2	Arson: 0	Robbery: 0

Part II Offenses Reported:

Fraud: 17	Criminal Damage: 13	Drug: 7
Domestic: 10	Disorderly: 1	Weapons: 1

Part III Traffic Offenses Reported:

Crashes: 29	Traffic Complaints: 52	Traffic Stops: 342
Parking Complaints: 17	Parking Tickets Issued: 21	

Part IV Incidents:

Alarms: 9	Mental: 4	Suspicious: 38	Open door/window: 2
Warrants: 13	Noise: 9	911 hang up: 15	Animal: 35

Citations & Arrests

Traffic: **267**

Non-Traffic: **257**

Speed Related	24	Bail Jumping	21
Traffic Signs & Signals	15	Battery	9
Driver License Violations	54	Burglary	1
Vehicle Registration	25	Disorderly Conduct	27
OMVWI/PAC	29	Obstructing/Resisting	9
Insurance	49	Drug Related	45
Seat Belts	31	Theft	28
All Others	40	Underage Drinking	5
		Curfew	0
		Truancy	6
		All Others	106

Chief's Report

Personnel:

- There are still 2 Patrol Officer Positions that need to be filled and applications were taken until the end of May. Testing will be done in June.
- Lt. Nottestad's has done an excellent job, in her first month with the department.

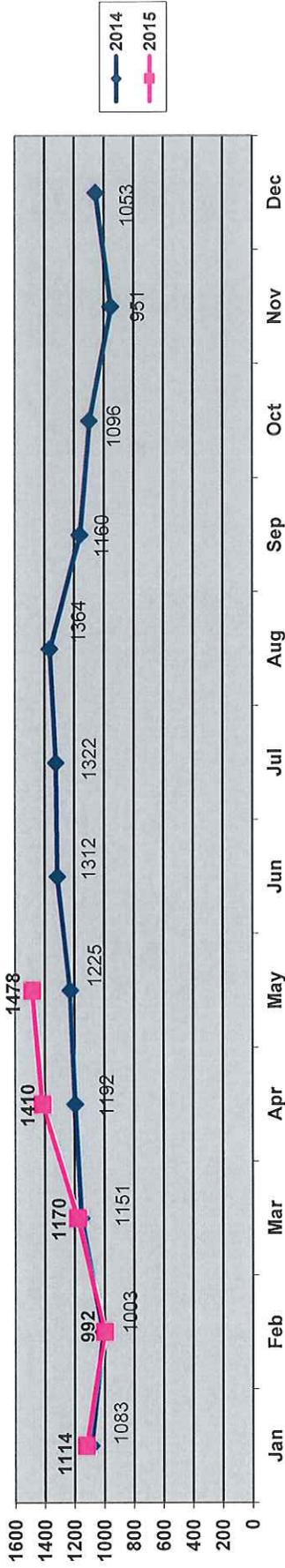
Training

- The Combined Tactical Team conducted training at the Firing Range.
- Sgt. Ames, Sgt. Pipkin, Sgt. Erickson attended Incident command training (ICS 400).
- Sgt. Ferguson completed the 6 week Command College course.
- Sgt. Ames & Det. Kuen attended Crisis Intervention Training.
- Sgt. Erickson completed a 3 week course for Leadership in Police Organizations.
- Officer Fisher & Officer Schroeder attended Drug interdiction training called Operation Rush.
- Chief Kuderer attended Executive training.
- Lt. Nottestad attended training in Discipline & Terminations: Policy & Rules
- Lt. Nottestad attended training on implementing employee personal Improvement Programs (PIP).

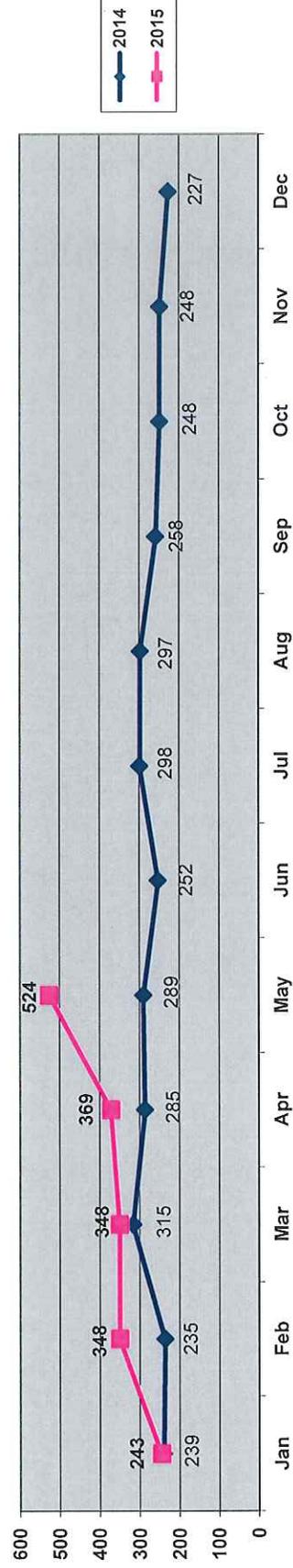
Code Compliance

- Code Officer Christine Haas has been very busy with public nuisance complaints.
- 15 complaints received, 3 citations issued and 11 complaints resolved.
- Most complaints are about garbage in yard.

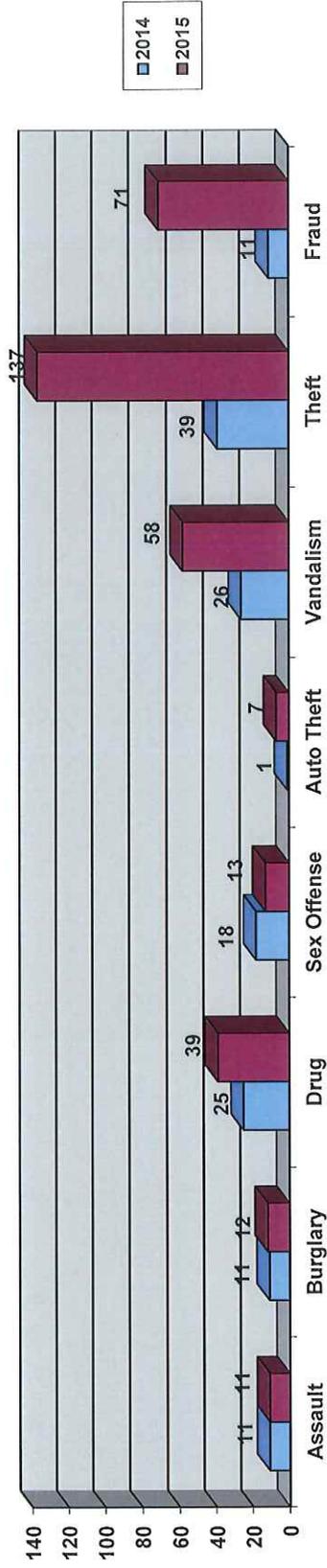
2014/2015 Year to Date
Calls for Service



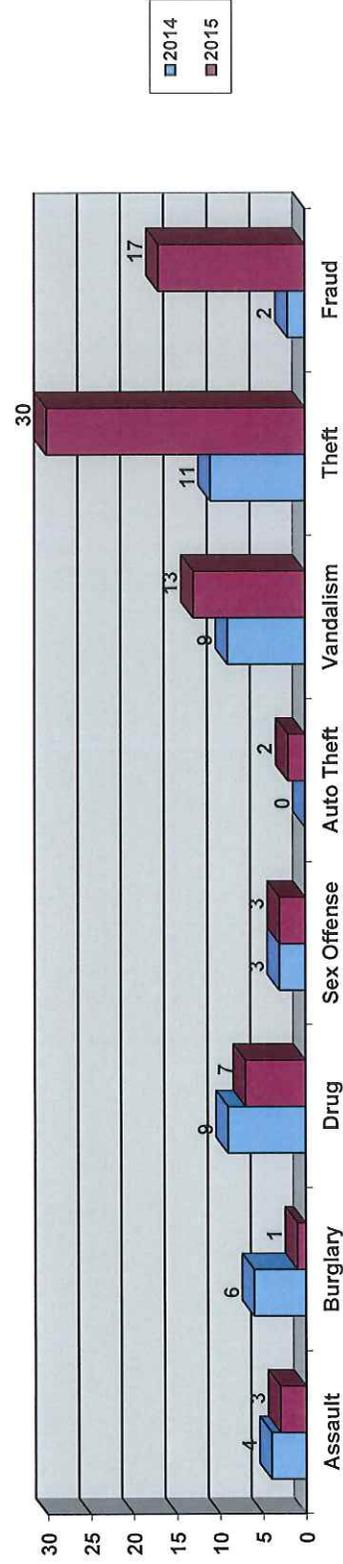
2014/2015 Year to Date
Citations & Arrests



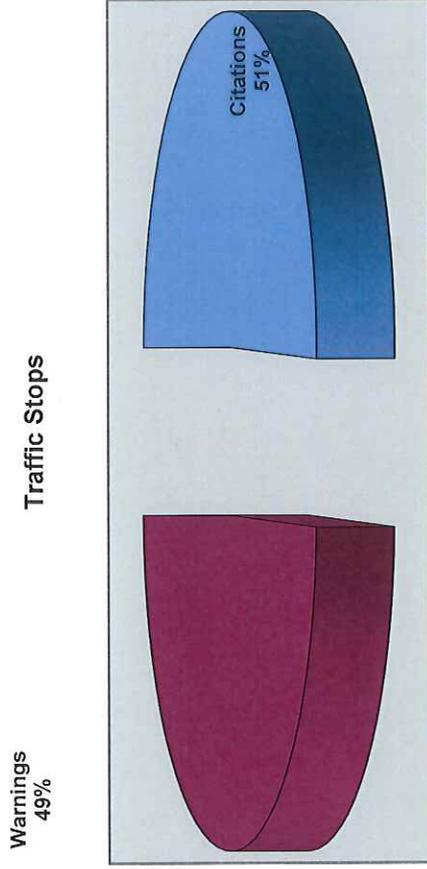
**Year to Date Major Crime Comparison
Running Total 2014/2015**



**Major Crime Comparison
May 2014/2015**

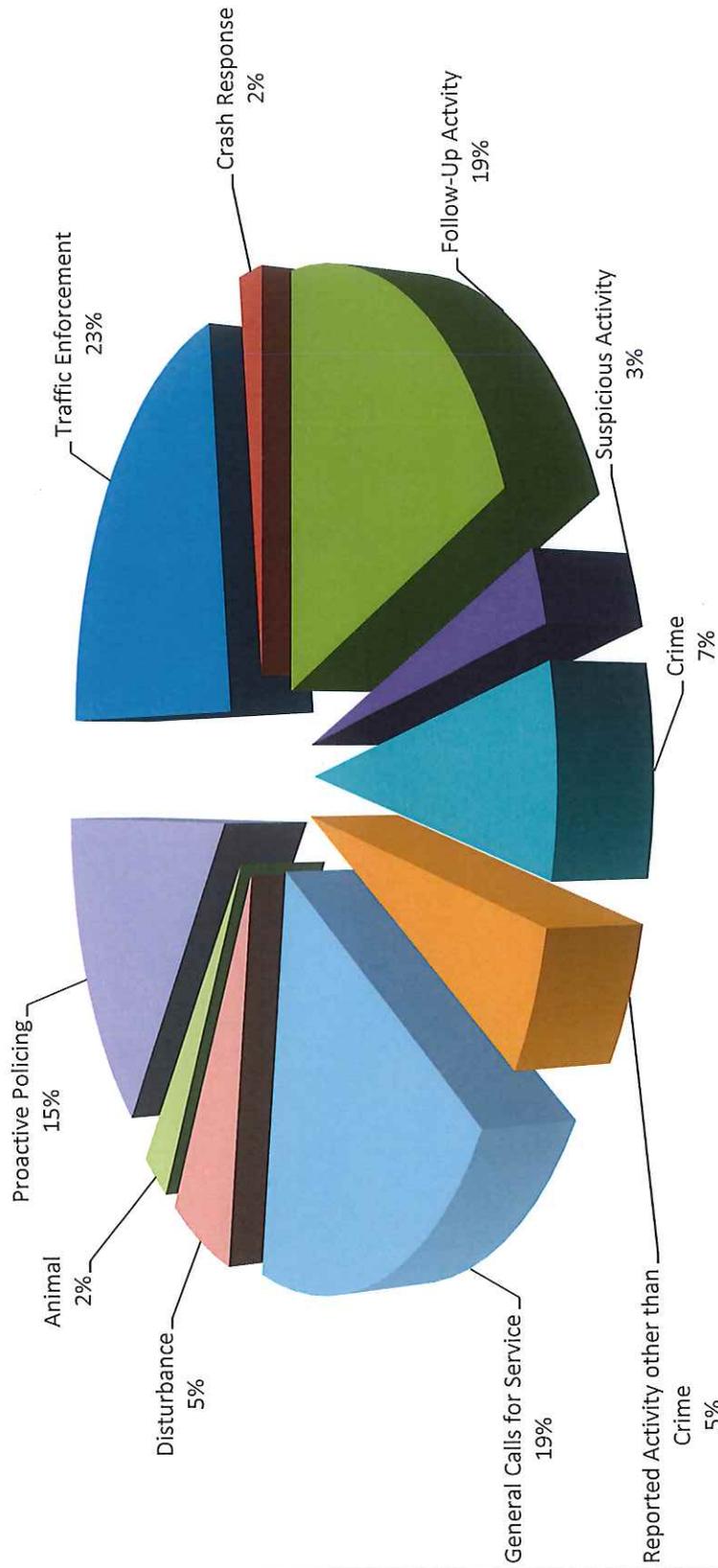


**May 2015 Traffic Stops
Warnings/Citations Comparison ***



* Data does not take into account multiple citations issued on a single stop.

May 2015 Allocation of Police Services



Monthly Transactions3:2

05/13/2015 through 06/10/2015

06/10/2015

Date	Account	Num	Description	Memo	Tag	Amount
Gas and Oil						
05/18/2015	Gas and Oil	44338708	BP	Thru 5/17/2015	[	-2,901.85
Office Supplies						
05/13/2015	Office Supplies	12425	Wal-Mart	Foam Core	[Credit Card	-2.97
05/14/2015	Office Supplies		Wayfair	Bookcase 40 Office	[Credit Card	-107.99
05/14/2015	Office Supplies		Wayfair	Bookcase (3) Training Room, Interv...	[Credit Card	-358.63
06/03/2015	Office Supplies	12426	Staples	Paper, Toner, DVDs	[	-346.42
06/03/2015	Office Supplies	11409770	P & P Products	Name plates pictures in hallway	[	-30.00
06/03/2015	Office Supplies	323628	Staples	Chair Mat - White out	[	-95.68
06/09/2015	Office Supplies		Intuit	Quick Books Online	[Credit Card	-34.94
Operating Supplies						
05/13/2015	Operating Supplies	4371379	US Post Office	Ordinance Violation Letters	[Credit Card	-26.40
05/27/2015	Operating Supplies		Sparta High School	High School Year Book	[	-55.00
06/03/2015	Operating Supplies	17040090	Eo Johnson	Lease Payment	[	-187.00
06/09/2015	Operating Supplies	LMF9846	Iron Mountain	Shredding	[	-154.62
06/09/2015	Operating Supplies	117944	Ripp Distributing Com...	Water Filter Rental	[	-40.00
06/09/2015	Operating Supplies	117946	Wal-Mart	Evidence supplies	[Credit Card	-47.97
06/09/2015	Operating Supplies		The Hardware Store	Speed Trailer Repair	[On Account	-10.17
06/09/2015	Operating Supplies		Pines Kennel	Kenneling for Nitro	[	-82.50
Physicals and Exams						
05/14/2015	Physicals and Exa...		Performance Evaluati...	LT PEP Exams	[	-120.00
06/03/2015	Physicals and Exa...	9761	Backgrounds Online	Robbins, Kendra	[	-19.00
Police Computers						
05/19/2015	Police Computers	18970470101	Tiger Direct	LT Laptop	[	-554.42
06/03/2015	Police Computers		Monoprice	Media Drives Patrol Computers	[Credit Card	-51.87
06/03/2015	Police Computers	61062	CDWG	Microsoft Office 2013	[	-2,403.60
06/09/2015	Police Computers		Coulee Techlink	Patrol installation	[	-950.00
06/09/2015	Police Computers	94588	CDWG	4TB HD for Video Server	[	-162.61
Police Equipment						
06/03/2015	Police Equipment		Theisen's	No Parking Sign Posts	[On Account	-339.75
06/09/2015	Police Equipment		Theisen's	No Parking Sign Posts	[On Account	-328.50
Pubs Seminars Dues						
05/13/2015	Pubs Seminars Dues		David Kuderer	Executive Training 15TR027	[Reimburse...	-36.85
05/14/2015	Pubs Seminars Dues		Van Meter Associates	Discipline & Termination 15TR028 fo...	[Credit Card	-150.00
05/14/2015	Pubs Seminars Dues		Van Meter Associates	Performance Improvement 15TR029...	[Credit Card	-150.00
05/26/2015	Pubs Seminars Dues		Keil Enterprises	RUSH Training 61 & 48	[	-390.00
05/26/2015	Pubs Seminars Dues		IAPE	Evidence Training 50 & 40	[	-725.00

-2,254.85

-668.25

-4,122.50

Monthly Transactions3:2

05/13/2015 through 06/10/2015

06/10/2015

Date	Account	Num	Description	Memo	Tag	Amount
06/02/2015	Pubs Seminars Dues		WINS-CPS Training	Child Safety Seat Training 15TR037 ...		-348.00
06/02/2015	Pubs Seminars Dues		BSSA	Deliberate Leadership 15TR033 for 41		-100.00
06/09/2015	Pubs Seminars Dues		Chula Vista	15TR026 Crime Stoppers	[Credit Card	-70.00
06/09/2015	Pubs Seminars Dues		Holiday Inn Madison	15TR027 Executive Training 40	[Credit Card	-70.00
06/10/2015	Pubs Seminars Dues		Wisconsin Chiefs Of ...	LT Membership dues		-65.00
06/10/2015	Pubs Seminars Dues	20058587	International Associat...	Annual Membership LT		-150.00
	Repair & Maintenance					-2,608.80
06/03/2015	Repair & Maintena...	126806	The Hardware Store	Weld for vehicle printer repair	[On Account	-5.99
06/03/2015	Repair & Maintena...	50898	Kenworthy's Truck & ...	Brakes 01		-692.14
06/09/2015	Repair & Maintena...	50899	Wal-Mart	Wiper blades	[Credit Card	-19.62
06/09/2015	Repair & Maintena...	862540	Loren's Auto Service	01 Oil Change		-43.13
06/10/2015	Repair & Maintena...	3472	Arnold's Service & To...	Squad 21 Generator, radiator, batter...		-1,847.92
	Telephone & Cellular					-1,257.60
05/15/2015	Telephone & Cellular	5/4/15	Century Link	Office Phones		-2.17
05/15/2015	Telephone & Cellular	5/4/15	Century Link	Office Phones (includes service repair)		-639.81
06/09/2015	Telephone & Cellular	5/28	US Cellular	Hot Spots (41-6.9, 01-4.2, 42-8.2, ot...		-306.00
06/09/2015	Telephone & Cellular	5/28	US Cellular	Cellular (Phone for LT)		-309.62
	Uniforms					-919.22
05/19/2015	Uniforms	3487345	Galls	Shirts & Name Tags 41		-99.18
06/03/2015	Uniforms	3546914	Galls	41 Fleece Jacket		-109.99
06/03/2015	Uniforms	30154	Davis & Stanton	Commendation Bars		-124.00
06/03/2015	Uniforms	284933	Chief Supply	41 Badge		-129.57
06/03/2015	Uniforms	3524434	Galls	41 Uniform Shirts		-83.20
06/03/2015	Uniforms	3514921	Galls	50 Mic Holder		-5.60
06/09/2015	Uniforms		Emilee Nottestad	41 Vest reimbursement	[Reimbursa...	-138.09
06/09/2015	Uniforms	3597976	Galls	50 Mic Holder		-83.20
06/09/2015	Uniforms		LA Police Gear	60 Uniform Equipment	[Credit Card	-146.39
				OVERALL TOTAL		-16,452.36

SPARTA POLICE DEPARTMENT

Monthly Generated Income Report to the Common Council

Report for May 2015

PARKING TICKETS:	TOTALS:
Monthly Total	\$520.00

GENERAL FUNDS:	
Direct Seller's Permit & Copy Fees	\$74.93

OTHER INCOMES:	
WTC Vehicle Purchase (Reimburse 401-54010-531)	\$8,000.00
Sparta Area School SRO Reimbursement (100-52100-120)	\$12,562.89
Overpayment to Staples (Reimburse 100-52100-310)	\$202.22
Total Revenue	\$21,360.04
Less Amount Paid Directly or Previously Deposited to City Hall	\$21,085.11
Less Parking Amount Paid Directly to City Hall	\$0.00
Less Parking Paid by Tax Intercept	\$0.00
Less Parking Paid by Credit Card & PayPal	\$81.50
TOTAL DEPOSIT	\$193.43

Highlighted lines indicate previously deposited with City hall with the exception of parking tickets which is indicated on 3rd to last line.

Parking Summary By Ordinance

Sparta Police Department

From 05/01/2015 To 05/31/2015

Date Run: 6/22/2015 9:54AM

Ordinance Description	Current Month		Fine Total	Year To Date	Same Month		Last Year
	Current Month	Year To Date			Prior Year	Last Year	
Alternate	0	186	\$0	186	1	1078	
Excess of 48 Hours	1	4	\$15	4	1	17	
Handicapped	0	0	\$0	0	0	2	
No 2:00 am - 6:00 am	7	32	\$105	32	18	132	
No Parking Anytime	0	0	\$0	0	1	5	
No Truck or Van	0	5	\$0	5	0	1	
Overnight Parking	0	13	\$0	13	0	68	
Residential Parking	0	0	\$0	0	0	1	
Restricted	3	12	\$45	12	5	30	
State Traffic Parking	0	0	\$0	0	0	6	
Two Hour	10	26	\$150	26	0	4	
Totals:	21	278	\$315	278	26	1344	



Sparta Police Department

David Kuderer

Chief of Police

121 E. Oak St.
Sparta, WI
54656

Phone:
608-269-3122

Fax:
608-269-2156

SpartaPD.com

July 2, 2015

Public Safety Committee Members
201 W Oak St.
Sparta, WI 54656

RE: Denial of Operator (Bartender) License for Francisco Lugo-Valencia

Committee Members,

I have reviewed the Operator (Bartender) License application for Francisco Lugo and recommend denial based on the following:

- Applicant was convicted of selling to an underage person in Sept. of 2013.
- Applicant had an ATF violation of selling without a state liquor license on 08/06/14.
- Applicant was charged with selling without a bartender's license on 08/06/14.
- Applicant had an ATF violation of selling without a state liquor license on 05/20/15.

The recommendation is supported by Sparta City Ordinance 12.03(5)B.2 which regulates the issuing of operator licenses and allows the committee to deny a license to a person that has a conviction or pending charges for an offense that substantially relates to the license activity within the past 12 months or history with in the last 24 months.

The above recommendation is made in accordance with current guidelines set by the Public Safety Committee.

Respectfully submitted,

David Kuderer
Chief of Police

e-mailed to SPA 6-22-15

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: 15 JUN 15

Town of Village of City of SPARTA County of MONROE

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. Stat.

at the premises described below during a special event beginning 9 AUG 15 and ending 9 AUG 15 and agrees to comply with all law, resolution, 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 Veteran's Organization Fair Association

- (a) Name ST PATRICKS PARISH
(b) Address 118 SOUTH K STREET, SPARTA WI 54656
(c) Date organized 1906
(d) If corporation, give date of incorporation N/A
(e) Names and addresses of all officers: President FR PATRICK
(f) Name and address of manager or person in charge of affair: JACK WRIGHT 6269 HAMLIN AVE, SPARTA WI 54656

2. LOCATION OF PREMISES WHERE BEER AND/OR WINE WILL BE SOLD:

- (a) Street number 118 SOUTH K STREET, SPARTA WI 54656
(b) Lot N/A Block N/A
(c) Do premises occupy all or part of building? N/A
(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 ST PATRICKS PARISH SUMMERFEST
(b) Dates of event 9 AUG 15

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.

Officer [Signature] (Signature/date)

ST PATRICKS PARISH (Name of Organization)

Officer (Signature/date)

Officer (Signature/date)

Date Filed with Clerk 6-16-15

Date Reported to Council or Board

Date Granted by Council

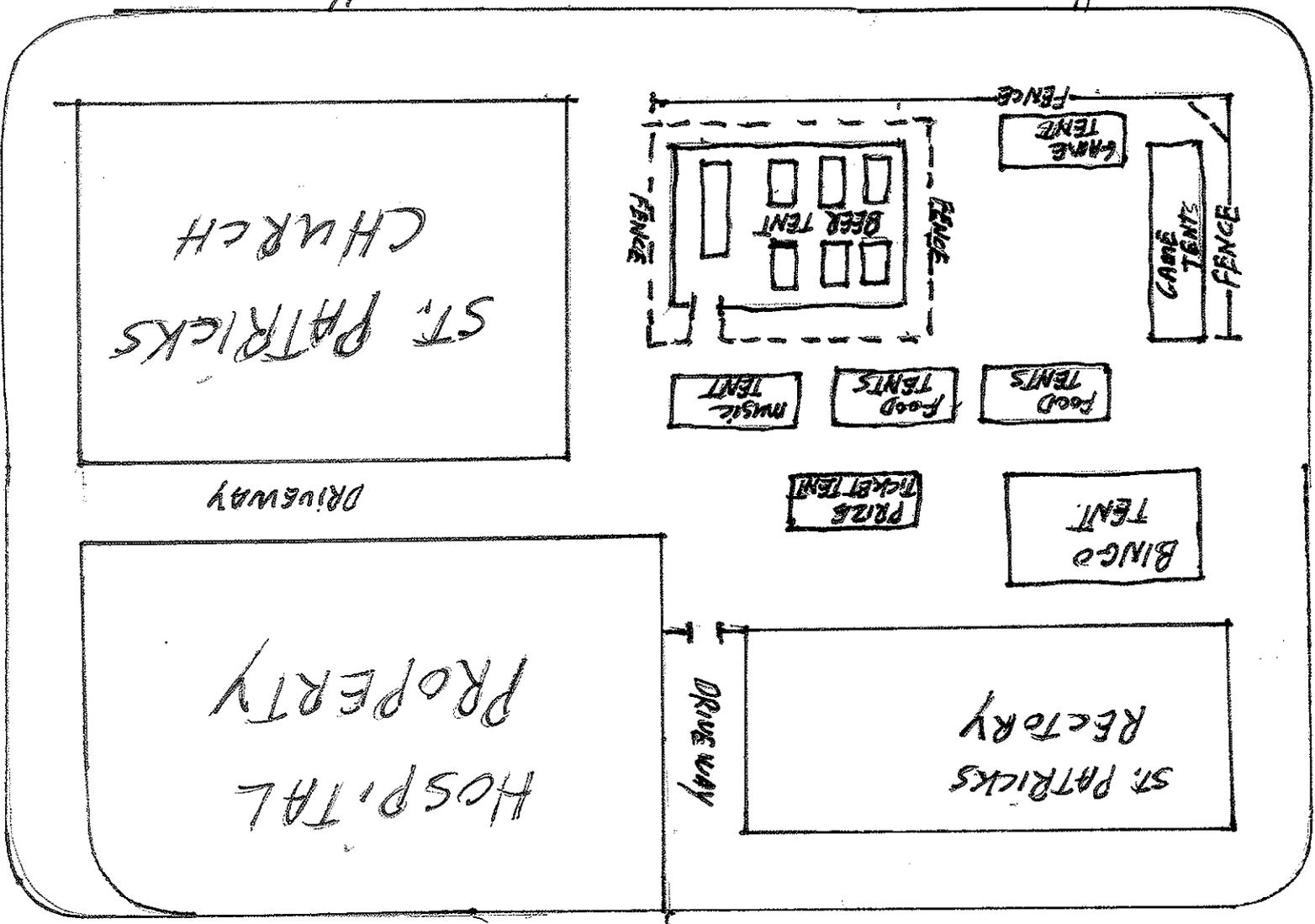
License No.

W. OAK ST

"SUMMER FEST"

"K" STREET

"L" STREET



PARKING LOT



W. MAIN ST.

B. T. L.

**CITY OF SPARTA
201 W. OAK ST.
SPARTA, WI 54656**

LICENSES

AMBA INC dba Sparta Travel Center
Address of business: 4105 theater Rd Sparta WI 54656
Mailing address for license and correspondence: same

Liquor, "Class B" License \$500.00
 Beer, Class "A" Retail License \$250.00
 Beer, Class "B" License \$100.00

Wine, Class "C" License \$100.00

Publication fee for Liquor & Beer Licenses- \$17.00

Bartender's License \$ 60.00 for two year term

Cigarette \$100.00
 Video Games \$10.00 ea. \$ _____
 Second Hand Article License \$ 27.50
 Second Hand Jewelry License \$ 30.00
 Pawn Broker License \$210.00

Taxi cab \$50.00 (first vehicle, \$25.00 each additional) attach application

Mobile Home \$2.00 per space w/ \$25.00 minimum for a MH Park
 Auto Salvage \$10.00

Dated: 6/16/15
Receipt: 37864

License # _____
Issue Date _____

Rev. 8-14 ✓5004 367.00

1 - mailed to SPD 6-19-15

ORIGINAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk.

For the license period beginning 6/28/15 20____ :
ending _____ 20____

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

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

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): AMBA INC

Applicant's Wisconsin Seller's Permit Number:	
Federal Employer Identification Number (FEIN): <u>47-4092284</u>	
LICENSE REQUESTED ▶	
TYPE	FEE
<input checked="" type="checkbox"/> Class A beer	\$ <u>250.00</u>
<input type="checkbox"/> Class B beer	\$
<input type="checkbox"/> Wholesale beer	\$
<input type="checkbox"/> Class C wine	\$
<input type="checkbox"/> Class A liquor	\$
<input type="checkbox"/> Class B liquor	\$
<input type="checkbox"/> Reserve Class B liquor	\$
Publication fee	\$ <u>17</u>
TOTAL FEE	\$

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</u>	<u>JAYMIN PATEL</u>	<u>902 Farmer Ave</u>	<u>Tomah WI 54660</u>
Vice President/Member	"			
Secretary/Member	"			
Treasurer/Member	"			
Agent ▶	"			
Directors/Managers	"			

3. Trade Name ▶ Sparta Travel Center Business Phone Number 608-269-3177
4. Address of Premises ▶ 4105 Theater Rd Post Office & Zip Code ▶ Sparta WI 54660

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 IL and date 6/15 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, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) Cstore
10. Legal description (omit if street address is given above): Cstore
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. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? 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 17th day of June, 2015

Jessie Haraga
(Clerk/Notary Public)

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

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

My commission expires _____

(Additional Partner(s)/Member/Manager of Limited Liability Company if Any)

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk	Date reported to council/board	Date provisional license issued	Signature of Clerk / Deputy Clerk
Date license granted	Date license issued	License number issued	

AUXILIARY QUESTIONNAIRE ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk.

Individual's Full Name (please print) (last name) PATEL		(first name) JAYMIN		(middle name) H	
Home Address (street/route) 902 Farmer Ave		Post Office	City Tomah	State WI	Zip Code 54660
Home Phone Number 608-374-3092		Age 31	Date of Birth 8/3/1982	Place of Birth INDIA	

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.
- JAYMIN PATEL of AMBA INC
(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? 14 yrs
- 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 license, 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
Employer's Name	Employer's Address	Employed From	To

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 17th day of June, 2015

Julie Hansen
(Clerk/Notary Public)

[Signature]
(Signature of Named Individual)

My commission expires _____



Application for Cigarette and Tobacco Products License

MUNICIPAL USE ONLY

Applicant's Wisconsin 15-digit Sales Tax Account Number

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

License Number
Period Covered
Date of Issuance

Legal Name (corporation, limited liability company, partnership or sole proprietorship) AMBA INC			Federal Employer Identification No. (FEIN) 47-4092284		
Trade or Business Name (if different than Legal Name) SPARTA TRAVEL CENTER			Telephone Number (608) 343-0565		
Business Address (Permit Location) 4105 Theater Pk			Business Located In <input checked="" type="checkbox"/> City <input type="checkbox"/> Village <input type="checkbox"/> Town		
City Sparta	State WI	ZIP Code 54656	of: Sparta		
Mailing Address (if different than Business Address) Same			Business Telephone (608) 269 3177		
			County Monroe		
			City		
			State		
			ZIP Code		

Organization (check one)

- Sole Proprietor Wisconsin Corporation – Enter date incorporated: 8/1/15
- 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 only from manufacturers, distributors or jobbers 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 608-261-6435.)
- 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 and Family Services? (SmokeCheck.org)
- YES NO 5. Does the applicant understand that they may not sell, give or otherwise provide cigarettes/tobacco products to minors?
- 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/index.html 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.

SUBSCRIBED AND SWORN TO BEFORE ME

this 17th day of June, 20 15

Julia Hanna
(Clerk / Notary Public)

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

My commission expires _____

36.83 post water

I - mailed to
SPB 6-11-15

PAID

**CITY OF SPARTA
201 W. OAK ST.
SPARTA, WI 54656**

LICENSES

Leticia Lugo dba El Vallarta

Address of business: 223 N. Black River St.

Mailing address for license and correspondence: El Vallarta

- Liquor, "Class B" License \$500.00
- Beer, Class "A" Retail License \$250.00
- Beer, Class "B" License \$100.00

617.00

Wine, Class "C" License \$100.00

Publication fee for Liquor & Beer Licenses- \$17.00

Bartender's License \$ 60.00 for two year term

- Cigarette \$100.00
- Video Games \$10.00 ea. \$ _____
- Second Hand Article License \$ 27.50
- Second Hand Jewelry License \$ 30.00
- Pawn Broker License \$210.00

Taxi cab \$50.00 (first vehicle, \$25.00 each additional) attach application

Mobile Home \$2.00 per space w/ \$25.00 minimum for a MH Park
 Auto Salvage \$10.00

Dated: 6-10-15
Receipt: 2728, 2727

License # _____
Issue Date _____

ORIGINAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk.

For the license period beginning _____ 20____
ending _____ 20____

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

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

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): ▶ _____

Applicant's Wisconsin Seller's Permit Number <u>456-1028271871-03</u>	
Federal Employer Identification Number (FEIN): <u>47-4674408</u>	
LICENSE REQUESTED ▶	
TYPE	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$ <u>100.00</u>
<input type="checkbox"/> Wholesale beer	\$
<input type="checkbox"/> Class C wine	\$
<input type="checkbox"/> Class A liquor	\$
<input checked="" type="checkbox"/> Class B liquor	\$ <u>500.00</u>
<input type="checkbox"/> Reserve Class B liquor	\$
Publication fee	\$ <u>7.00</u>
TOTAL FEE	\$

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	owner	<u>owner</u>	<u>Leticia Logo</u>	<u>304 Central Ave 54656</u>
Vice President/Member				
Secretary/Member				
Treasurer/Member				
Agent ▶		<u>Leticia Logo</u>		
Directors/Managers				

3. Trade Name ▶ El Wallarta Business Phone Number 608-269-0547
4. Address of Premises ▶ 223 N Black River St Post Office & Zip Code ▶ 54656

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 _____ and date _____ 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, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) In side building Dienig Area

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? Francisco Logo Ayala
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. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? 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 10th day of June, 2015
Julie Haron
(Clerk/Notary Public)

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

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

(Additional Partner(s)/Member/Manager of Limited Liability Company if Any)

TO BE COMPLETED BY CLERK			
Date received and filed with municipal clerk	Date reported to council/board	Date provisional license issued	Signature of Clerk / Deputy Clerk
Date license granted	Date license issued	License number issued	

AUXILIARY QUESTIONNAIRE ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk.

Individual's Full Name (please print) (last name) <u>Lugo</u>		(first name) <u>Leticia</u>		(middle name)	
Home Address (street/route) <u>304 Central Ave</u>		Post Office	City <u>Sparta</u>	State <u>WI</u>	Zip Code <u>54656</u>
Home Phone Number <u>608-633-8846</u>		Age <u>35</u>	Date of Birth <u>07-19-1980</u>	Place of Birth <u>Mexico</u>	

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.
- _____ of El Vallarta
(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? 11 Years Since 04-17-04
- 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 license, 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 <u>El Vallarta</u>	Employer's Address <u>509 Superior Ave</u>	Employed From <u>May 2008</u>	To <u>September 2014</u>
Employer's Name <u>El Vallarta</u>	Employer's Address <u>223 N Black River St</u>	Employed From <u>September 2014</u>	To <u>Now</u>

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 10th day of June, 2015
Julie Harvan
(Clerk/Notary Public)

Leticia Lugo
(Signature of Named Individual)

My commission expires _____



CITY OF SPARTA
201 W. OAK ST.
SPARTA, WI 54656

LICENSES

_____ dba Burrito Real Grill
Address of business: 620 Industrial Dr. Suite 8, Sparta
Mailing address for license and correspondence: _____

Liquor, "Class B" License \$500.00
 Beer, Class "A" Retail License \$250.00
 Beer, Class "B" License \$100.00

 Wine, Class "C" License \$100.00
 Publication fee for Liquor & Beer Licenses- \$17.00

867.00
ref. 250.00

_____ Bartender's License \$ 60.00 for two year term

Cigarette \$100.00
_____ Video Games \$10.00 ea. \$ _____
_____ Second Hand Article License \$ 27.50
_____ Second Hand Jewelry License \$ 30.00
_____ Pawn Broker License \$210.00

_____ Taxi cab \$50.00 (first vehicle, \$25.00 each additional) attach application

_____ Mobile Home \$2.00 per space w/ \$25.00 minimum for a MH Park
_____ Auto Salvage \$10.00

Dated: 10-22-15
Receipt: 37915

License # _____
Issue Date _____

Rev. 8-14

Cash 867.00
38019 100.00 cash for cig. lic.

Sec. 180.0202
Wis. Stats.



State of Wisconsin
Department of Financial Institutions

ARTICLES OF INCORPORATION - STOCK FOR-PROFIT CORPORATION

Executed by the undersigned for the purpose of forming a Wisconsin Stock For-Profit Corporation under Chapter 180 of the Wisconsin Statutes:

Article 1. **Name of the corporation:**
BURRITO REAL GRILL TIENDA TAQUERIA CORP.

Article 2. **The corporation is organized under Ch. 180 of the Wisconsin Statutes.**

Article 3. **Name of the initial registered agent:**
ROBERTO GARZA

Article 4. **Street address of the initial registered office:**
620 INDUSTRIAL DR STE 8
SPARTA, WI 54656
United States of America

Article 5. **Number of shares of stock the corporation shall be authorized to issue:**
Number of Shares Authorized: 100
Class: Common

Article 6. **Name and complete address of each incorporator:**
ROBERTO GARZA
620 INDUSTRIAL DR STE 8
SPARTA, WI 54656
United States of America

Other provisions (optional). ARTICLE 7.FULL SERVICES RESTAURANT AND TIENDA

ARTICLE 8.

ARTICLE 9.

Other Information. **This document was drafted by:**
ROBERTO GARZA

Incorporator signature:
ROBERTO GARZA

ORIGINAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk.

For the license period beginning _____ 20 _____
 ending _____ 20 _____

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

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

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): Burrito Real Grill Tenda Taqueria Restaurant

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>Roberto</u>	<u>Roberto Garza Contreras</u>	<u>108 E 6th St Black Riverfall 54615</u>
Vice President/Member	<u>Veronica Valencia</u>	<u>11</u>	<u>11</u>
Secretary/Member			
Treasurer/Member			
Agent	<u>Veronica Valencia</u>	<u>Wife</u>	
Directors/Managers			

3. Trade Name Burrito Real Grill Tenda Taqueria Business Phone Number 608 269 0348
 4. Address of Premises 620 Industrial Dr Suite 8 Post Office & Zip Code Sparta WI 54615

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 _____ and date _____ 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, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) _____
 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. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? 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 22nd day of June, 20 15
Julie Hanna
 (Clerk/Notary Public)
 My commission expires _____

(Officer of Corporation/Member/Manager of Limited Liability Company /Partner/Individual)
Roberto Garza Contreras
 (Officer of Corporation/Member/Manager of Limited Liability Company /Partner)
Veronica Valencia
 (Additional Partner(s)/Member/Manager of Limited Liability Company if Any)

TO BE COMPLETED BY CLERK			
Date received and filed with municipal clerk	Date reported to council/board	Date provisional license issued	Signature of Clerk / Deputy Clerk
Date license granted	Date license issued	License number issued	

AUXILIARY QUESTIONNAIRE ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk.

Individual's Full Name (please print) (last name)		(first name)		(middle name)	
Garza Contreras		Roberto			
Home Address (street/route)		Post Office	City	State	Zip Code
108 E 6th St			Black River Falls WI		54615
Home Phone Number		Age	Date of Birth	Place of Birth	
608 548 0070		36	7-20-77	Mexico	

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.
- _____ of _____
(Officer/Director/Member/Manager/Agent) (Name of Corporation, Limited Liability Company or Nonprofit Organization)

US citizen

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? _____
- 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 license, 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
Olympic Company	2823 Hedberg Drive	2010	Know
Employer's Name	Employer's Address	Employed From	To
	MINNETONKA, MN 55305		

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 2nd day of June, 2015
Julie Hanson
(Clerk/Notary Public)

Roberto Garza Contreras
(Signature of Named Individual)

My commission expires _____

AUXILIARY QUESTIONNAIRE ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk.

Email: Valencia Veronica 12 @ 4134 no

Individual's Full Name (please print) (last name)		(first name)		(middle name)	
Veronica Valencia					
Home Address (street/route)		Post Office	City	State	Zip Code
108 E 6th st			Black River Falls	WI	54615
Home Phone Number		Age	Date of Birth	Place of Birth	
608 548 0070		31	2-18-83	USA Citizen	

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.

_____ of _____
(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:

1. How long have you continuously resided in Wisconsin prior to this date? _____
 2. 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.)

3. 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.

4. 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)

5. 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 license, 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
Regal Deloit.	Bauer Rd BRFWI 54615	2010	know
Employer's Name	Employer's Address	Employed From	To

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 22nd day of June, 2015
 Julie Hansen
(Clerk/Notary Public)

Veronica Valencia
(Signature of Named Individual)

My commission expires _____

Application for Cigarette and Tobacco Products License

MUNICIPAL USE ONLY

Applicant's Wisconsin 15-digit Sales Tax Account Number
456102885145802

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

License Number
Period Covered
Date of Issuance

Legal Name (corporation, limited liability company, partnership or sole proprietorship) <u>Burrito Real Grill Tienda Taqueria inc</u>		Federal Employer Identification No. (FEIN) <u>47-4290110</u>
Trade or Business Name (if different than Legal Name)		Telephone Number <u>(608) 548 0070</u>
Business Address (Permit Location) <u>1020 Industrial st</u>	Business Located In <input checked="" type="checkbox"/> City <input type="checkbox"/> Village <input type="checkbox"/> Town	Business Telephone <u>(608) 269 0348</u>
City <u>sparta</u>	State <u>WI</u>	ZIP Code <u>54656</u>
County <u>monrow</u>	of: <u>sparta</u>	
Mailing Address (if different than Business Address) <u>same above</u>	City	State ZIP Code

Organization (check one)

- Sole Proprietor Wisconsin Corporation -- Enter date incorporated: _____
- 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 only from manufacturers, distributors or jobbers 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 608-261-6435.)
- 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 and Family Services? (SmokeCheck.org)
- YES NO 5. Does the applicant understand that they may not sell, give or otherwise provide cigarettes/tobacco products to minors?
- 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/index.html 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.

SUBSCRIBED AND SWORN TO BEFORE ME

this 2nd day of June, 2015

Julie Harza
(Clerk / Notary Public)

My commission expires _____

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

*e-mailed to SPD
7-1-15*

CITY OF SPARTA
201 W. OAK ST.
SPARTA, WI 54656

LICENSES

Patrick Jenkins dba Sparta Gold Exchange

Address of business: 418 W. Wisconsin St.

Mailing address for license and correspondence: _____

____ Liquor, "Class B" License \$500.00
____ Beer, Class "A" Retail License \$250.00
____ Beer, Class "B" License \$100.00

____ Wine, Class "C" License \$100.00

____ Publication fee for Liquor & Beer Licenses- \$17.00

____ Bartender's License \$ 60.00 for two year term

____ Cigarette \$100.00
____ Video Games \$10.00 ea. \$ _____
____ Second Hand Article License \$ 27.50
✓ Second Hand Jewelry License \$ 30.00
____ Pawn Broker License \$210.00

____ Taxi cab \$50.00 (first vehicle, \$25.00 each additional) attach application

____ Mobile Home \$2.00 per space w/ \$25.00 minimum for a MH Park
____ Auto Salvage \$10.00

Dated: 6-24-15

Receipt: 37975

Rev. 8-14 *2549
✓ 30.00*

License # _____

Issue Date _____

LICENSE APPLICATION

for

PAWNBROKER/SECONDHAND JEWELRY DEALER/SECONDHAND ARTICLE DEALER/SECONDHAND ARTICLE DEALER MALL/FLEA MARKET

CHECK ALL THAT APPLY:

Original Application

Renewal

TYPE:

Pawnbroker Secondhand Jewelry Dealer Secondhand Article Dealer Mall/Flea Market

INSTRUCTIONS:

INDIVIDUAL LICENSE (Complete Sections 1, 2, 3 and 6)
PARTNERSHIP LICENSE (Complete Sections 1, 2, 3, 4 and 6)
CORPORATE LICENSE (Complete Sections 1, 2, 3, 5 and 6)

(SECTION 1) APPLICANT INFORMATION

Applicant Name (Last, First, MI) Judkins, Patrick, D.		Sex M	Race W	Date of Birth 9-15-65	Street Address 1514 Viking Ave.
City Holmen	State WI	ZIP 54636	Home Telephone Number 608-526-4543		Place of Birth (City & State) Eau Claire, WI.

(SECTION 2) CONVICTION RECORD

Have you, or any other person listed on this application, been convicted of any of the following:

A FELONY WITHIN THE LAST 10 YEARS?: YES NO

WITHIN THE LAST 5 YEARS OF:

a misdemeanor? YES NO
 a statutory violation punishable by forfeiture? YES NO
 a county or municipal ordinance violation? YES NO

For each "YES" response provide the date of arrest, the nature of the offense and conviction information:

(SECTION 3) BUSINESS INFORMATION

Business Name Sparta Gold Exchange	Street Address 418 W. Wisconsin St.	State WI	ZIP Code 54656	Telephone Number 608-269-0030
Owner's Name Pat & Roberta Judkins	Street Address 1514 Viking Ave.	State WI	ZIP Code 54636	Telephone Number 608-526-4543
Business Manager's Name Pat Judkins	Street Address 1514 Viking Ave.	State WI	ZIP Code 54636	Telephone Number 608-526-4543
Building Owner's Name Pat & Roberta Judkins	Street Address 1514 Viking Ave.	State WI	ZIP Code 54636	Telephone Number 608-526-4543

(Over)

- (6) PENALTIES. Each and every violation of the provisions of this Section shall constitute a separate offense, and each and every day any provision of this Section is violated shall constitute a separate offense for which a forfeiture may be imposed.

10.65 RESTRICTED PARKING ON RESIDENTIAL PROPERTIES

(1) Definitions:

- (a) Motor Vehicle: Any self-propelled land vehicle which can be used for towing or transporting people or materials, including but not limited to, automobiles, trucks, buses, motorized campers, and tractors.
- (b) Improved surface: Cement, brick, asphalt, pavers, recycled asphalt, or stone consisting of a coarse and fine aggregate with sufficient binder to produce a stable base for surfacing, free from vegetable matter, shale, and lumps of clay. Gradation shall be No. 2 as per section 304.2.6 of the State of Wisconsin, Department of Transportation, Standard Specifications, installed so it does not drain onto neighboring property. It is not a sufficiently improved surface if only the areas under the tires are paved; provided, however, that existing cement strips leading to a parking area are permitted to remain in use.

(2) PARKING RESTRICTIONS:

- (a) No person shall keep, store or park any motor vehicle on any portion of a front yard or corner lot side yard facing a street of a property designed or used as a residence, except on an area that is an improved surface.
- (b) No owner, tenant, manager, or occupant of property used as a residence shall allow or suffer another person to keep, store or park any motor vehicle on any portion of a front yard or corner lot side yard facing a street, except on an area that is an improved surface.

(3) This section shall not prohibit:

- (a) An owner, lessee, or occupant of the property from repairing, washing, cleaning, or servicing personal property that is owned, leased, or rented by the owner, lessee, or occupant of the property, or
- (b) Repairing or servicing of a motor vehicle or part thereof within a completely enclosed building in a lawful manner where it is not visible from the street or other public or private property.

- (4) Improved surface limitations:
- (a) No more than fifty percent of the required front setback for any lot containing a one or two-family dwelling or any lot located in any R-1, R-2, or R-3 or R-6 residential district with a frontage width of forty feet or greater shall contain an improved surface.
 - (b) For lots which have a frontage width less than forty feet, improving the surface in the front setback area is limited to ten feet in width or fifty percent of the width of the lot at any given point, whichever is greater.
 - (c) Notwithstanding subsection 1, for lots which have a frontage width less than forty feet, an improved surface area directly contiguous with, and providing primary access to, two side by side required parking spaces, may exceed the fifty percent limitation as long as it is no more than twenty-five feet long and eighteen feet wide.

10.07 ABATEMENT OF PUBLIC NUISANCES.

- (1) ENFORCEMENT. The Chief of Police, the Chief of the Fire Department, the Building Inspector and Code Compliance Officer shall enforce those provisions of this chapter that come within the jurisdiction of their offices, and they shall make periodic inspections and inspections upon complaint to insure that such provisions are not violated. No action shall be taken under this section to abate a public nuisance unless the officer shall have inspected or caused to be inspected the premises where the nuisance is alleged to exist and has satisfied himself/herself that a nuisance does in fact exist. (Am. #488, 1997)
- (2) SUMMARY ABATEMENT. If the inspecting officer shall determine that a public nuisance exists within the City and that there is great and immediate danger to the public health, safety, peace, morals or decency, the Mayor may direct the proper officer to cause the same to be abated and charge the cost thereof to the owner, occupant or person causing, permitting or maintaining the nuisance, as the case may be.
- (3) ABATEMENT AFTER NOTICE. If the inspecting officer shall determine that a public nuisance exists on private premises but that the nature of such nuisance is not such as to threaten great and immediate danger to the public health, safety, peace, morals or decency, he shall serve notice on the person causing or maintaining the nuisance to remove the same within 10 days. If said nuisance is not removed by said person, such nuisances shall be removed as provided in sub. (2).
- (4) OTHER METHODS NOT EXCLUDED. Nothing in this chapter shall be construed as prohibiting the abatement of public nuisances by the City or its officials in accordance with the laws of the State of Wisconsin.

PUBLIC PEACE AND GOOD ORDER 9.03(2)

(2) No person shall shoot a bow and arrow in a public place, or into or in a building, within the City, except as follows:

- (a) In archery class conducted on school district property under the supervision of a qualified instructor; or
- (b) At any designated archery range located in the City of Sparta; or
- (c) At any bona fide business location where the manufacture or sale of archery equipment takes place; or
- (d) In undeveloped areas (defined as agricultural, wooded or open fields away from public buildings), at least 300 feet from any building or public street, when hunting with a valid archer's license; or
- (e) Allow bow fishing for rough fish. (Amended 587, 2001)

9.04 SALE AND DISCHARGE OF FIREWORKS RESTRICTED. Section 167.10, Wis. Stats., regulating the sale and use of fireworks exclusive of any penalty imposed thereby is adopted by reference and made a part of this section as though set forth in full.

9.05 LOITERING PROHIBITED.

(1) **LOITERING OR PROWLING.** No person shall loiter or prowl in a place, at a time or in a manner not usual for law-abiding individuals under circumstances that warrant alarm for safety or persons or property in the vicinity. Among the circumstances which may be considered in determining whether such alarm is warranted is the fact that the person takes flight upon appearance of a police or peace officer, refuses to identify himself or manifestly endeavors to conceal himself or any object. Unless flight by the person or other circumstances makes it impracticable, a police or peace officer shall, prior to any arrest for an offense under this section, afford the person an opportunity to dispel any alarm which would otherwise be warranted, by requesting him to identify himself and explain his presence and conduct. No person shall be convicted of an offense under this subsection if the police or peace officer did not comply with the preceding sentence, or if it appears at trial that the explanation given by the person was true and, if believed by the police or peace officer at the time, would have dispelled the alarm.

(2) **OBSTRUCTION OF HIGHWAY BY LOITERING.** No person shall obstruct any street, bridge, sidewalk or crossing by lounging or loitering in or upon the same after being requested to move on by any police officer.

(3) **OBSTRUCTION OF TRAFFIC BY LOITERING.** No person shall loaf or loiter in groups or crowds upon the public streets, alleys, sidewalks, street crossings or bridges or in any other public place within the City in such manner as to prevent, interfere with or obstruct the ordinary free use of such public streets, sidewalks,