#### 7747 County Road N, Sun Prairie WI 53590 April 10, 2023, at 6:00 pm

#### Town Board Meeting

The Bristol Town Board will hold a regular monthly town board meeting on Monday, April 10, 2023, at 6:00 p.m., located at the Bristol Town Hall, 7747 County Road N, Sun Prairie WI 53590.

#### **AGENDA**

- I. Order of Business
  - a. Call to Order
  - b. Pledge of Allegiance
  - c. Approval of Minutes from March 13, 2023 Board Meeting
  - d. Approval of Check Register for March 2023 & Treasurer's Report
- II. Public Comment items not on the agenda
- III. Parks Committee Report
- IV. Business
  - a. Discuss/Consider Approval of Prairie Pines Golf Course Operator Licenses for April 11, 2023 to June 30, 2023
  - b. Move to <u>CLOSED SESSION</u> under WI Stats. Sec. 19.85(1)(C) for purposes of employment, compensation, or performance evaluation of any public employee over which the Governmental body has jurisdiction or exercises responsibility. For this purpose, is to conduct an interview for a Town Administrative Assistant position.
  - c. Return to **OPEN SESSION** to formally dispose of any discussions in closed session.
- V. Set Future Meetings and Agendas
- VI. Adjourn.

Notice is hereby given that it is possible that a majority of other governmental body may be present at the above meeting of the Town Board to gather information about a subject over which they have ultimate decision-making responsibility. If such a majority is present, it will constitute a meeting other governmental body under Wisconsin's Open Meeting Laws and is hereby being noticed as such, although only the Town Board will take formal action at the above meeting.

Any person who has a qualifying disability as defined by the American with Disabilities Act that requires the meeting or materials at the meeting to be in an accessible location or format must contact the clerk at 608-837-6494, 7747 County Road N, Sun Prairie, WI 53590, at least 24 hours prior to the meeting so the necessary arrangements can be made to accommodate each request.

Kim Grob, Town Clerk-Treasurer

Certified Posting: 4-7-2023 Town Hall and website.

# 7747 County Road N, Sun Prairie WI 53590 Jt. Plan Commission and Town Board Meeting March 13, 2023, at 6:00 pm

#### ORDER OF BUSINESS

#### a. CALL TO ORDER

The meeting was called to order at 6:01pm by Chairman Derr. Board Members Present –Derr, Willison and Grove. Planning Commission Members Present: Steve Schwartzer, Jim Ringelstetter, Al Rogers, Travis Larson, and Brian Willison. Sign-in sheet on file in Clerk's office.

#### b. PLEDGE OF ALLEGIANCE - RECITED

#### c. APPROVAL OF MINUTES FROM FEBRUARY 13, 2023, JT. PLAN-BOARD MEETING

Motioned by Ringelstetter and seconded by Rogers to approve February 13, 2023, Jt. Plan-Board minutes as written. All ayes, Motion carried. Motioned by Grove and seconded by Willison to approve February 13, 2023, Jt. Plan-Board minutes as written. All ayes, Motion carried.

#### d. APPROVAL OF CHECK REGISTER & TREASURER'S REPORT FOR FEBRUARY 2023

Motioned by Willison and seconded by Grove to approve February 2023 check register. All ayes, Motion - carried. Motioned by Grove and seconded by Willison to approve February 2023 Treasurers Report. All ayes, Motion -carried.

#### **PUBLIC COMMENT**

Annie Tremaine inquired if the new fire truck has been put into service.

#### PARKS COMMITTEE REPORT

Tamara Sondgeroth reported that April 22 is scheduled for park clean-up where mulch will be spread, and any branches / debris will be cleaned up. Shelters are planned to be installed in early spring. May 6 & 7 is planned for the installation of the new playground structure at Brooks Ridge Park. Adult volunteers are needed for the project. The Parks Committee received a grant for plants that will be placed around park signs. The Committee set-up a two-year Parks Committee term and they will be looking for two new people to join the committee. Their future agenda items that they will be working on is a 10 year park plan and looking at a reservation system. Next meeting May 9.

#### BUSINESS

a. DISCUSSION/CONSIDER CSM & REZONE APPROVAL ON PARCEL 0911-141-8240-0 OF 31.36 ACRES TO CREATE A .74 ACRE LOT SEPARATING THE HOUSE AND SMALL SHED. REZONE OF PROPOSED LOT 1 (.74 ACRES) TO SFR AND REMAINDER ACRES OF 30.62, LOT 2 AS AG.

The applicant wishes to separate the existing house and small shed, creating a .74 acre parcel which would be rezoned to SFR. The remainder acres of 30.62 as Lot 2 will be rezoned to AG. Planning – Motioned by Ringelstetter and seconded by Rogers to approve the CSM & Rezone of parcel 0911-141-8240-0, 7277 County Hwy VV, creating a .74 acres parcel, Lot 1 zoned as SFR and a 30.62 acre parcel, Lot 2 zoned as AG with a deed restriction on Lot 2 of a non-buildable lot. All ayes, Motion carried. Board – Motioned by Willison and seconded by Grove to accept the Planning Commission recommendation and approve the CSM & Rezone of parcel 0911-141-8240-0, 7277 County Hwy VV creating a .74 acres parcel, Lot 1 zoned as SFR and a 30.62 acre parcel, Lot 2 zoned as AG with a deed restriction on Lot 2 of a non-buildable lot. All ayes, Motion carried.

# 7747 County Road N, Sun Prairie WI 53590 Jt. Plan Commission and Town Board Meeting March 13, 2023, at 6:00 pm

#### b. DISCUSS/CONSIDER TREE TRIMMING QUOTE TO COMPLETE TREE MAINTENANCE ALONG TOWN ROADS.

Public Works Lead, Dustin Ward received a quote from The Tree Trimmer to complete maintenance tree trimming along town roads. The board discussed of identifying certain areas within the town that need cutting back the most. Motioned by Grove and seconded by Willison to table the acceptance of the quote from The Tree Trimmer. All ayes, Motion carried.

#### c. DISCUSS/CONSIDER OPERATOR'S LICENSE FOR LISA BARRIENTOS-SCHRARD THROUGH JUNE 30, 2023.

Lisa Barrientos completed the required paperwork and her background search came back satisfactory for an Operator's License. Motioned by Grove and seconded by Willison to approve the Operator's License for Lisa Barrientos-Schroud from March 14 – June 30, 2023. All ayes, motion carried.

#### d. DISCUSS/CONSIDER SPRING BURN DATE FOR SUBDIVISIONS

Motioned by Grove and seconded by Willison to approve the spring burn dates for subdivisions starting March 30 and running every other weekend Thursday – Sunday until May 14. All ayes, Motion carried.

#### CHAIRMAN'S REPORT

#### a. ROAD CONDITIONS

Road weight limits are in enforce until the spring thaw is complete. Scott's Construction plan to have a Regional Manager come look at the bumpy road conditions from their work last fall.

#### b. LAND USE ISSUES

Prairie Athletic Club owners plan to purchase the Sun Prairie Golf Course and it will remain a golf course.

#### SET FUTURE MEETINGS AND AGENDAS

Board Meeting – April 10, 2023 Annual Meeting – April 18, 2023

#### **ADJOURN**

Planning - Motioned by Rogers and seconded by Larson to adjourn at 7:03 p.m. All ayes, Motion carried. Board - Motioned by Grove and seconded by Willison to adjourn at 7:03 p.m. All ayes, Motion carried.

Submitted by Kim Grob, Clerk-Treasurer

# The Town of Bristol Account QuickReport As of March 31, 2023

Туре	Date	Num	Name	Memo	Amount
1001 · Bank of SP - o	ash & investme	ents	1		
100 · General Fur				8	
Liability Check	03/01/2023	E-pay	United States Treasury	39-6005805 QB Tracking # -4	-2,071.14
Liability Check	03/02/2023		QuickBooks Payroll Ser	Created by Payroll Service on	-1,378.90
Liability Check Paycheck	03/02/2023 03/03/2023	DD3025	QuickBooks Payroll Ser Derr, Gerald H	Created by Payroll Service on Direct Deposit	-6,429.03 0.00
Paycheck	03/03/2023	DD3025	Grove, Benjamin A	Direct Deposit	0.00
Paycheck	03/03/2023	DD3027	Grob, Kimberly M	Direct Deposit	0.00
Paycheck	03/03/2023	DD3028	Johnson, Lynnette R	Direct Deposit	0.00
Paycheck	03/03/2023	DD3029	Koltes, Robert J	Direct Deposit	0.00
Paycheck	03/03/2023	DD3030	Kraus, Jane L.	Direct Deposit	0.00
Paycheck Paycheck	03/03/2023 03/03/2023	DD3031 29337	Scherbarth, Reinhart G	Direct Deposit	0.00 -426.72
Paycheck	03/03/2023	DD3032	Schultz, Daryl A Ward, Dustin	Direct Deposit	0.00
Paycheck	03/03/2023	DD3033	Winters, Michael J	Direct Deposit	0.00
Bill Pmt -Check	03/13/2023	29338	Alliant Energy/WPL	3 11 15 2 PA 46 A 10 0 C 15 2 B 10 4 5 C PA 10 A 1	-1,319.41
Bill Pmt -Check	03/13/2023	29339	Associated Appraisal C	51501 - March Srvs & 2023 R	-10,106.28
Bill Pmt -Check	03/13/2023	29340	Axley Brynelson, LLP	51310 - Legal Services	-883.30
Bill Pmt -Check Bill Pmt -Check	03/13/2023 03/13/2023	29341 29342	Bear Graphics Burke Truck & Equipment	51418 - Election Eps	-473.23 -199.81
Bill Pmt -Check	03/13/2023	29343	Capital Area Regional P	56903 - Zoning Map Admend	-422.55
Bill Pmt -Check	03/13/2023	29344	CyberReef	514062 - February Internet Se	-60.00
Bill Pmt -Check	03/13/2023	29345	DANE COUNTY TREA	52500 - Jul - Dec 2022 DaneC	-1,912.80
Bill Pmt -Check	03/13/2023	29346	Dane County Treasurer'	24310 - 2023 Town's Septic F	-9.83
Bill Pmt -Check	03/13/2023	29347	Horstman Networks	514062 - March IT Services	-65.00
Bill Pmt -Check Bill Pmt -Check	03/13/2023 03/13/2023	29348 29349	Jefferson Fire & Safety Krista Scott	51603 - Annual Fire Ext. Inspe 55204 - Ice Rink Snow Shovel	-118.00 -89.67
Bill Pmt -Check	03/13/2023	29350	Madison Sand & Gravel	53308 - Sand for Roads	-375.23
Bill Pmt -Check	03/13/2023	29351	MG&E	51602 - Feb Cell Phone Srvs	-983.89
Bill Pmt -Check	03/13/2023	29352	Office Depot Business	51418, 51400 - Election & Offi	-706.89
Bill Pmt -Check	03/13/2023	29353	Pellitteri Waste Systems	53604, 53606 - Feb Srvs Recy	-2,608.54
Bill Pmt -Check	03/13/2023	29354	Steve Shaw	41111 - Tax Reimburse	-93.70 -190.00
Bill Pmt -Check Bill Pmt -Check	03/13/2023 03/13/2023	29355 29356	Stranders Sanitary Servi Sundance BioClean Inc.	51601 - Septic Tan Servicing 51603 - February Cleaning Se	-320.00
Bill Pmt -Check	03/13/2023	29357	Terminator Pest Control	51603 - Building Maint	-52.00
Bill Pmt -Check	03/13/2023	29358	Truck Country	53307 - Truck Repair	-853.36
Bill Pmt -Check	03/13/2023	29359	US Cellular	514061- Feb Cell Phone Srvs	-182.49
Bill Pmt -Check	03/13/2023	29360	Wisconsin Dept. of Rev	51501 - 2022 Muni Fee for As	-90.70
Bill Pmt -Check Bill Pmt -Check	03/13/2023 03/13/2023	29361 29362	Barry Thoma Bonnie Schmidt	51416 - February 2023 Election 51416 - February 2023 Wages	-200.00 -105.00
Bill Pmt -Check	03/13/2023	29363	Cynthia Mestelle	51416 - February 2023 Wages 51416 - February 2023 Election	-210.00
Bill Pmt -Check	03/13/2023	29364	Dave Suchomel	51416 - February 2023 Election	-116.25
Bill Pmt -Check	03/13/2023	29365	Janet Storch	51416 - February 2023 Election	-120.00
Bill Pmt -Check	03/13/2023	29366	Julie Mallder	51416 - February 2023 Election	-97.50
Bill Pmt -Check	03/13/2023	29367	Kay Radke	51416 - February 2023 Election	-101.25
Bill Pmt -Check Bill Pmt -Check	03/13/2023 03/13/2023	29368 29369	Lisa Rickert Marcia Forbes	51416 - February 2023 Election 51416 - February 2023 Election	-217.50 -112.50
Bill Pmt -Check	03/13/2023	29370	Marilyn Silvester 1	51416 - February 2023 Election	-105.00
Bill Pmt -Check	03/13/2023	29371	Pete Vickerman	51416 - February 2023 Election	-105.00
Bill Pmt -Check	03/13/2023	29372	Sandra Dulin	51416 - February 2023 Election	-112.50
Bill Pmt -Check	03/13/2023	29373	Sue Suchomel	51416 - February 2023 Election	-116.25
Liability Check Liability Check	03/15/2023 03/16/2023	E-pay	United States Treasury QuickBooks Payroll Ser	39-6005805 QB Tracking # -5 Created by Payroll Service on	-1,790.44 -6,152.39
Liability Check	03/16/2023		QuickBooks Payroll Ser	Created by Payroll Service on	-413.45
Paycheck	03/17/2023	DD3034	Grob, Kimberly M	Direct Deposit	0.00
Paycheck	03/17/2023	DD3035	Johnson, Lynnette R	Direct Deposit	0.00
Paycheck	03/17/2023	DD3036	Kraus, Jane L.	Direct Deposit	0.00
Paycheck	03/17/2023	DD3037	Scherbarth, Reinhart G	Direct Deposit	0.00
Paycheck Paycheck	03/17/2023 03/17/2023	29374 DD3038	Schultz, Daryl A Ward, Dustin	Direct Deposit	-182.85 0.00
Paycheck	03/17/2023	DD3039	Winters, Michael J	Direct Deposit	0.00
Paycheck	03/17/2023	DD3040	Willison, Brian L	Direct Deposit	0.00
Bill Pmt -Check	03/27/2023	29375	Aegis Corporation	51901 Bonding Town Officials	-280.00
Bill Pmt -Check	03/27/2023	29376	Bellin Health	514141 - Medical Testing Ann	-45.00
Bill Pmt -Check	03/27/2023 03/27/2023	29377 29378	Burke Truck & Equipment Community Insurance C	53322 - Broom Replacement	-1,118.00 -24,062.00
Bill Pmt -Check Bill Pmt -Check	03/27/2023	29378	Dane County Towns As	51104 - 2023 Membership Da	-2,900.00
Bill Pmt -Check	03/27/2023	29380	DANE COUNTY TREA	52600 - February 2023 Police	-5,190.76
Bill Pmt -Check	03/27/2023	29381	Decker Supply Company	53341 - Signs & Posts	-107.45
Bill Pmt -Check	03/27/2023	29382	Frontier	51406 - April Internet Srvcs	-76.53
Bill Pmt -Check Bill Pmt -Check	03/27/2023 03/27/2023	29383 29384	General Engineering Co Insight FS		-9,974.07 -2,737.21
Bill Pmt -Check	03/27/2023	29385	John Deere Financial	53306 - Machine Maint & Repair	-604.60
Bill Pmt -Check	03/27/2023	29386	League of Wisconsin M	51104 - 2023 Stormwater Group	-200.00

# The Town of Bristol Account QuickReport As of March 31, 2023

Туре	Date	Num	Name	Memo	Amount
Bill Pmt -Check	03/27/2023	29387	LRS		-407.00
Bill Pmt -Check	03/27/2023	29388	Stafford Rosenbaum LLP	51310 - Legal Services	-63.00
Bill Pmt -Check	03/27/2023	29389	Terminator Pest Control	paragraph and the state of the	-104.00
Bill Pmt -Check	03/27/2023	29390	Visa - Cardmember Ser		-698.96
Bill Pmt -Check	03/27/2023	29391	WEISENSEL ELECTRI	51603 - Outside Lighting Repa	-2,490.00
Bill Pmt -Check	03/27/2023	29392	Wingra Stone Company	53308 - Gravel/Stone	-991.87
Bill Pmt -Check	03/27/2023	29393	Wisconsin Towns Assoc	51412 - Publication for Admin	-30.00
Bill Pmt -Check	03/27/2023	29394	Yes Equipment & Servic	53307 - Truck - Maintenance	-2,273.23
Liability Check	03/29/2023	E-pay	Wisconsin Department	39-6005805 QB Tracking # 18	-633.09
Liability Check	03/29/2023	E-pay	United States Treasury	39-6005805 QB Tracking # 18	-1,664.14
Liability Check	03/30/2023		QuickBooks Payroll Ser	Created by Payroll Service on	-5,917.77
Paycheck	03/31/2023	29396	Schultz, Daryl A		-223.18
Paycheck	03/31/2023	DD3041	Grob, Kimberly M	Direct Deposit	0.00
Paycheck	03/31/2023	DD3042	Johnson, Lynnette R	Direct Deposit	0.00
Paycheck	03/31/2023	DD3043	Kraus, Jane L.	Direct Deposit	0.00
Paycheck	03/31/2023	DD3044	Scherbarth, Reinhart G	Direct Deposit	0.00
Paycheck	03/31/2023	DD3045	Ward, Dustin	Direct Deposit	0.00
Paycheck	03/31/2023	DD3046	Winters, Michael J	Direct Deposit	0.00
Total 100 · Genera	al Fund				-105,472.21
Total 1001 · Bank of S	SP - cash & inves	stments			-105,472.21
TOTAL					-105,472.21

# Town of Bristol Treasurer's Report April 7, 2023

Total Funds Availab	le \$	479,448.45
ARPA Funds		(223,824.92)
Parks Fund - LGIP		80,423.51
Total Funds As April 7, 202	23 \$	622,849.86
<u>Equipment</u> Current Balance	\$	4.54
<u>Parks</u> Current Balance	\$	80,423.51
LGIP Fund <u>General</u> Current Balance	\$	237,775.82
ICS Account Ending Balance	\$	1,852.36
Money Market Ending Balance	\$	107,746.14
General Fund Ending Balance	\$	195,047.49

# Cover Sheet for Agenda Packet Section

IV. Business

a.

New CCAP

I, the undersigned, hereby make application to the local governing body of the Town of Bristol in Dane County, for an "Operator's" License as provided by WI Statute 125.17, for the license year 03/17/2023 through June 30, 2023.

I certify that I am 53 years of age, and am familiar with the laws, ordinances, and regulations governing the sale and service Nov of alcoholic beverages, and agree, if granted this license, to obey all provisions of local and state laws governing such sale and service.

Drivers License   Current Address   2958 Latigo Trace Sun Prairie WI 53590 Phone #  Street Address, City, State, Zip  List all prior addresses for the last 5 years:  Street Address   City State Zip From To  3078 Happy Valley Rd Sun Prairie WI 53590 WI 53590 Phone #  City and State where you were born: Madison, Wisconsin  Name of Employer's Business Prairie Athletic Club Phone # 608-837-4646  HAVE you ever held an alcohol or operator's license from the Town of Bristol? Yes_x_No  If Yes, specify where and when: Sun Prairie - current  HAVE you eVer held an alcohol or operator's license from another municipality/township? x_Yes_No  If Yes, specify where and when: Sun Prairie - current  HAVE you EVER been convicted of ANY offenses in ANY State? Yes_x_No  If Yes:  For what? When Which Court?  For what? When Which Court?  HAVE you completed the state-required "Beverage Server" Course? x_Yes_No. If yes, please provide a copy certificate of completion with this application. If No, we will issue a Provisional License for 60 days (if you pass the backgroucheck), within which time you must complete this course and provide the certificate of completion. I turther understand that any incomplete, inaccurate or false answers will constitute sufficient reason for rejection, denial or revocation of the license.  Subscribed and sworn to before me this day of Operator's - S25.00 Cash Ck  Signature: Clerk / Notary Background Check - S25.00 Cash Ck	Name	Simon	Peter	J Middle	Date of B	irth <u>-</u>			
Current Address  2958 Latigo Trace Sun Prairie WI 53590 State Zip From To  3078 Happy Valley Rd Sun Prairie  City State Zip From To  3078 Happy Valley Rd Sun Prairie  City and State where you were born:  Madison, Wisconsin Name of Employer's Business Prairie Athletic Club Phone # 608-837-4646  HAVE you ever held an alcohol or operator's license from the Town of Bristol?  HAVE you ever held an alcohol or operator's license from another municipality/township?x Yes No  If Yes, specify where and when: Sun Prairie - current  HAVE you EVER been convicted of ANY offenses in ANY State? Yes No  If Yes: For what?  When Which Court?  For what?  When Which Court?  Have you completed the state-required "Beverage Server" Course? x Yes No  If Yes:  Have you completed the state-required this course and provide the certificate of completion with this application. If No, we will issue a Provisional License for 60 days (if you pass the backgroutheck), within which time you must complete this course and provide the certificate of completion.  It hereby affirm that the above questions have been truthfully answered. I also authorize the Town of Bristol to review a theck the information on this application and to refer this application for a full background investigation. I further understand that any incomplete, inaccurate or false answers will constitute sufficient reason for rejection, denial or revocation of the license.  Subscribed and sworn to before me this	Drivers Li	Last cense # -	First	Middle	Social S	Security	#		
Street Address for the last 5 years:    Street Address	Dilvers Li	cense <u>i</u>							
Street Address  Street Address  Street Address  Street Address  Street Address  Sun Prairie  Sun Prairie  Wil 53590  City State Zip From To  Sun Prairie  Wil 53590  City and State where you were born: Madison, Wisconsin  Name of Employer's Business Prairie Athletic Club Phone # 608-837-4646  HAVE you ever held an alcohol or operator's license from the Town of Bristol? Yes_xNo  HAVE you ever held an alcohol or operator's license from another municipality/township?xYesNo  If Yes, specify where and when:Sun Prairie - current  HAVE you EVER been convicted of ANY offenses in ANY State?Yes_xNo  If Yes: For what?  When Which Court?  For what?  When Which Court?  HAVE you completed the state-required "Beverage Server" Course? xYes No. If yes, please provide a copy certificate of completion with this application. If No, we will issue a Provisional License for 60 days (if you pass the backgroutheck), within which time you must complete this course and provide the certificate of completion.  It hereby affirm that the above questions have been truthfully answered. I also authorize the Town of Bristol to review a check the information on this application and to refer this application for a full background investigation. I further understand that any incomplete, inaccurate or false answers will constitute sufficient reason for rejection, denial or revocation of the license.  Subscribed and sworn to before me this	Current A	ddress 29			00 Phone #				
Street Address    Sun Prairie   Sun Prairie			Street Address, City	y, State, Zip					
Street Address    Sun Prairie   Sun Prairie	ist all prio	r addresses for t	the last 5 years:						
City and State where you were born:   Madison, Wisconsin   Name of Employer's Business   Prairie Athletic Club   Phone # 608-837-4646				Cit		Chaha	7:	Fuom	To
City and State where you were born: Madison, Wisconsin Name of Employer's Business Prairie Athletic Club Phone # 608-837-4646  HAVE you ever held an alcohol or operator's license from the Town of Bristol?								From	10
Name of Employer's Business Prairie Athletic Club Phone # 608-837-4646  HAVE you ever held an alcohol or operator's license from the Town of Bristol?	30/8 Hap	py valley Kd		Sun France		VV I	33390		
Name of Employer's Business Prairie Athletic Club Phone # 608-837-4646  HAVE you ever held an alcohol or operator's license from the Town of Bristol?									
Name of Employer's Business Prairie Athletic Club Phone # 608-837-4646  HAVE you ever held an alcohol or operator's license from the Town of Bristol?									
Name of Employer's Business Prairie Athletic Club Phone # 608-837-4646  HAVE you ever held an alcohol or operator's license from the Town of Bristol?									
HAVE you ever held an alcohol or operator's license from the Town of Bristol?  HAVE you ever held an alcohol or operator's license from another municipality/township?x	City and S	state where you	were born: Ma	adison, Wisconsin					
HAVE you ever held an alcohol or operator's license from another municipality/township?xYesNo	Name of E	imployer's Busin	ness Prairie Ath	letic Club Phon	e # <u>608-837-4</u>	646			
HAVE you ever held an alcohol or operator's license from another municipality/township?xYesNo	20 72 72				CD :	10	Va		No
If Yes, specify where and when:Sun Prairie - current  HAVE you EVER been convicted of ANY offenses in ANY State?YesxNo  If Yes: For what?	HAVE	you ever held an	alcohol or operator	r's license from the	lown of Bristo	01?	Y e	sx	_140
If Yes, specify where and when:Sun Prairie - current  HAVE you EVER been convicted of ANY offenses in ANY State?YesxNo  If Yes: For what?	HAVE	you ever held an	alcohol or operato	r's license from anot	her municipal	ity/town	ship? x	Yes	No
HAVE you EVER been convicted of ANY offenses in ANY State?	If	Ves. specify whe	re and when:	Sun Prairie - current	t	ity/to mi	p		
If Yes: For what? When Which Court?  For what? When Which Court?  HAVE you completed the state-required "Beverage Server" Course? _x Yes No. If yes, please provide a copy tertificate of completion with this application. If No, we will issue a Provisional License for 60 days (if you pass the backgrout wheck), within which time you must complete this course and provide the certificate of completion.  Thereby affirm that the above questions have been truthfully answered. I also authorize the Town of Bristol to review a check the information on this application and to refer this application for a full background investigation. I further inderstand that any incomplete, inaccurate or false answers will constitute sufficient reason for rejection, denial or revocation of the license.  Subscribed and sworn to before me this									
For what?  When Which Court?  For what?  When Which Court?  HAVE you completed the state-required "Beverage Server" Course?_x Yes No. If yes, please provide a copy sertificate of completion with this application. If No, we will issue a Provisional License for 60 days (if you pass the backgroutheck), within which time you must complete this course and provide the certificate of completion.  hereby affirm that the above questions have been truthfully answered. I also authorize the Town of Bristol to review a check the information on this application and to refer this application for a full background investigation. I further inderstand that any incomplete, inaccurate or false answers will constitute sufficient reason for rejection, denial or revocation of the license.  Subscribed and sworn to before me this	HAVE	you EVER been	convicted of ANY	offenses in ANY St	ate?	Yes_x	No		
When Which Court?	If '	Yes:							
When Which Court?	Fo	r what?							
When Which Court?	W	hen		Which C	ourt?				
HAVE you completed the state-required "Beverage Server" Course? x Yes No. If yes, please provide a copy certificate of completion with this application. If No, we will issue a Provisional License for 60 days (if you pass the background check), within which time you must complete this course and provide the certificate of completion.  If hereby affirm that the above questions have been truthfully answered. I also authorize the Town of Bristol to review a check the information on this application and to refer this application for a full background investigation. I further understand that any incomplete, inaccurate or false answers will constitute sufficient reason for rejection, denial or revocation of the license.    Subscribed and sworn to before me this		1 (0							
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check), within which time you must complete this course and provide the certificate of completion.  I hereby affirm that the above questions have been truthfully answered. I also authorize the Town of Bristol to review a check the information on this application and to refer this application for a full background investigation. I further understand that any incomplete, inaccurate or false answers will constitute sufficient reason for rejection, denial or revocation of the license.    Applicant's Signature	W	nen		Which C	ourt?				
check), within which time you must complete this course and provide the certificate of completion.  I hereby affirm that the above questions have been truthfully answered. I also authorize the Town of Bristol to review a check the information on this application and to refer this application for a full background investigation. I further understand that any incomplete, inaccurate or false answers will constitute sufficient reason for rejection, denial or revocation of the license.  Subscribed and sworn to before me this  day of	UAVE vou	completed the s	tate-required "Re	verage Server" Col	irse? x	Yes	No. If ves	, please p	rovide a copy o
check), within which time you must complete this course and provide the certificate of completion.  I hereby affirm that the above questions have been truthfully answered. I also authorize the Town of Bristol to review a check the information on this application and to refer this application for a full background investigation. I further understand that any incomplete, inaccurate or false answers will constitute sufficient reason for rejection, denial or revocation of the license.    Applicant's Signature	certificate o	f completion with	this application.	If No, we will issue	a Provisional	icense	for 60 days (if	you pass	the background
hereby affirm that the above questions have been truthfully answered. I also authorize the Town of Bristol to review a check the information on this application and to refer this application for a full background investigation. I further inderstand that any incomplete, inaccurate or false answers will constitute sufficient reason for rejection, denial or revocation of the license.    Applicant's Signature	heck), with	nin which time yo	ou must complete th	nis course and provid	le the certifica	te of cor	npletion.		
Applicant's Signature  Subscribed and sworn to before me this	- cass (c. ). <del>2</del> 520								
Applicant's Signature  Subscribed and sworn to before me this	hereby af	firm that the ab	ove questions have	e been truthfully an	swered. I als	o autho	rize the Tow	n of Brist	of to review an
Applicant's Signature  Subscribed and sworn to before me this	check the i	nformation on th	nis application and	d to refer this applic	cation for a fi	III back	ground inves	tigation.	denial or
Applicant's Signature  Subscribed and sworn to before me this  day of			plete, inaccurate	or taise answers wil	i constitute si	micient	reason for r	ejection, (	demai oi
Applicant's Signature  Subscribed and sworn to before me this  day of, 20  Operator's - S25.00 Cash _ Ck Provisional - \$10.00 Cash _ Ck	revocation	of the ficense.	// -				2 111	77	
Subscribed and sworn to before me this day of, 20  Operator's - \$25.00 CashCk Provisional - \$10.00 CashCk		) A/	1/				5.14	173	
Subscribed and sworn to before me this	1	Applie	ant's Signature		<del></del>		Da	te	
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Operator's - \$25.00 Cash Ck Provisional - \$10.00 Cash Ck					J	EES:			
Provisional - \$10.00 Cash Ck		day of	,	20		Incust-	m¹c	\$25.00	Cash Ck
D. J. Charle 525 00 Cosh Ck									
Signature. Cici K / Notary	C:	anoture: Clar	rk / Notary						
	51	gnature: Cie	ik/ Hotaly						
pproved Rejected at Town Board meeting on Date	nnroyed	Painatad	at Lown Board r	neering on		Date			



This certifies that

Peter John Simon

is awarded this certificate for

Wisconsin Responsible Beverage Server Training







Official Signature

This certificate is non-transfereable and represents the successful completion of an approved Wisconsin Department of Revenue Responsible Beverage Server Course in compliance with secs. 125.04(5)(a)5., 125.17(6), and 134.66(2m), Wis. Stats.

t, the undersigned, hereby make application to the local governing body of 'Operator's" License as provided by WI Statute 125.17, for the license yea	the Town of	Bristol in D	ane County rough June	y, for an e 30, 202	CCIA NON
certify that I am 50 years of age, and am familiar with the laws, ording service of alcoholic beverages, and agree, if granted this license, to obey all sale and service.	ances and r	egulations g	overning th	ie sale an	ıd 🦾
Name Simon Middle Middle	_ Date of B	irth			-
Drivers License # Social	Security #_	<u> </u>		-	
Current Address 2958 Lakigo Ir. Street Address, City, State, Zip				_	-
List all prior addresses for the last 5 years:					
Street Address City	State	Zip	From	To	
3078 Happy Valley ld. Sun traine	(W)	35590	7/14	14/21	
City and State where you were born: CONOMOUSC WI Name of Employer's Business YON' RHHUTE GOLF CHW	SPhone#_	(008-8	37-6211	n li	08. B
HAVE you ever held an alcohol or operator's license from the Town of B	ristol?	Ye	s	0	46
		hin?	Yes	No	
HAVE you ever held an alcohol or operator's license from another municiple.	ipanty/towns				
HAVE you EVER been convicted of ANY offenses in ANY State?  If Yes:	Yes	No			
For what?					
When Which Court?					
For what?					_
When Which Court?					
HAVE you completed the state-required "Beverage Server" Course?	ficate of con	of 60 days (1	i you pass u	ic ouckgr	ound
I hereby affirm that the above questions have been truthfully answered. I check the information on this application and to refer this application for understand that any incomplete, inaccurate or false answers will constitute that the same of the constitution of the	a full dacks	round inves	digation. I	Iui thei	w and
revocation of the license.	3	11/1/2			
Applicant's Signature		D:	ate		
Subscribed and sworn to before me this	FEES:				
day_of	Operator		\$25.00		
	Provision	nal - und Check	\$10.00 ( - \$25.00 (		Ck Ck
Signature: Clerk / Notary					
For Office Use: ApprovedRejected at Town Board meeting on					



This certifies that

Jennifer Simon

is awarded this certificate for

Wisconsin Responsible Beverage Server Training

Certificate # WI-00610356

This certificate is non-transfereable and represents the successful completion of an approved Wisconsin Department of Revenue Responsible Beverage Server Course in compliance with secs. 125.04(5)(a)5., 125.17(6), and 134.66(2m), Wis. Stats.

I, the undersigned, hereby make application to th "Operator's" License as provided by WI Statute	e local governing body of t 125.17, for the license year	he Town o	of Bristol in	Dane Count hrough June	y, for an CCTH 2 30, 2023.
I certify that I am years of age, and am fan service of alcoholic beverages, and agree, if grant sale and service.	ed this license, to obey all p	rovisions	of local and	state laws g	overning such $N$
Name Simon Carter	Thompson	Date of I	Birth		
Drivers License #_	Middle Social S	Security #			
Name Simon Carter  Last Firet  Drivers License #  Current Address 3958 Latigo  Street Address, City, State  List all prior addresses for the last 5 years:	Trace, SP. W.F	Phone #			
Street Address, City, Stat	te, Zip	Thone #	J		
List all prior addresses for the last 5 years:	22770				
Street Address	City	State	Zip	From	To
3078 Happy Valley rd	Sun Prairie	FW	53590	9012	7091
11/					
City and State where you were born:		4			
Name of Employer's Business Prairie A	thletic club	Phone #	(80)	7-4640	
HAVE you ever held an alcohol or operator's lie	Ves Golf Course		Ye	1	
HAVE you ever held an alcohol or operator's lice		-	-:-0	y (	No
If Yes, specify where and when:		ility/towns	nip?	Y es	No
HAVE you EVER been convicted of ANY offe	nses in ANV State?	Yes J	No		
If Yes:		_ 1 00			
For what?When	Which Court?			******	
					77
For what?When	Which Count?				
No. of the second secon					
HAVE you completed the state-required "Beverage certificate of completion with this application. If No check), within which time you must complete this co	, we will issue a Provisional	License fo	r 60 days (if	please provid you pass the	e a copy of the background
I hereby affirm that the above questions have been check the information on this application and to runderstand that any incomplete, inaccurate or fall revocation of the license.	efer this application for a f se answers will constitute s	ull backgr ufficient r	ound invest eason for re	igation. I fu ejection, deni	rther
Canton Dumon		3/2	$\frac{3}{3}$		
Carter timon Applicant's Signature			Dat	e	
Subscribed and sworn to before me this		FEES:			
320,3		Operator'		\$25.00 Ca	
Signature: Clerk / Notary		Provisiona Backgrou		\$10.00 Ca \$25.00 Ca	
For Office Use: Approved Rejected at Town Board meetin	g on	Date	••••••		•••••••••



This certifies that

Carter Simon

is awarded this certificate for

Wisconsin Responsible Beverage Server Training

Completion Date 03/18/2023

Expiration Date 03/17/2025

Certificate # WI-00610532

Surk Nagyor Official Signature

This certificate is non-transfereable and represents the successful completion of an approved Wisconsin Department of Revenue Responsible Beverage Server Course in compliance with secs. 125.04(5)(a)5., 125.17(6), and 134.66(2m), Wis. Stats.

I, the undersigned, hereby make application to the local governing body of "Operator's" License as provided by WI Statute 125.17, for the license yea	the Town of Bristol in Dane County, for an Nor
I certify that I am 23 years of age, and am familiar with the laws, ordine service of alcoholic beverages, and agree, if granted this license, to obey all sale and service.	ances, and regulations governing the sale and provisions of local and state laws governing such
Name Simon Carly Grace	_ Date of Birth
Last Firs Middle	Security #
LO 1 118 O Co var Street Address, City, State, Zip	Phone # _ aligo Trace Sur Prairie
Street Address City	State Zip From To
17006 ASINCOMBURGY Stro	FL 33928 May 2/21 May 2022
20071 Seagrove St Estern	FL 33928 Feb 2120 may 2021
2958 latigo Trace Jun prairie	W1 55514
City and State where you were born: MACISON, WI	
Name of Employer's Business Vraine Athletic	Phone # 608.837-4646
HAVE you ever held an alcohol or operator's license from the Town of Bri	2 lings"
HAVE you ever held an alcohol or operator's license from another municip If Yes, specify where and when:  HAVE you EVER been convicted of ANY offenses in ANY State?  If Yes:	
For what?	
When Which Court?	
For what?	
When Which Court?	
HAVE you completed the state-required "Beverage Server" Course?	Il License for 60 days (if you pass the background cate of completion.  Also authorize the Town of Bristol to review and full background investigation. I further
understand that any incomplete, inaccurate or false answers will constitute revocation of the liceuse.	
Applicant's Signature	03/20/2023 Date
Subscribed and sworn to before me this, 20	FEES:
	Operator's - \$25.00 Cash Ck Provisional - \$10.00 Cash Ck
Signature: Clerk / Notary	Provisional - \$10.00 CashCk Background Check - \$25.00 CashCk
For Office Use: ApprovedRejected at Town Board meeting on	Date



This certifies that

Carly Simon

is awarded this certificate for

Wisconsin Responsible Beverage Server Training

**Expiration Date** 

Certificate # WI-00610566

Official Signature

This certificate is non-transfereable and represents the successful completion of an approved Wisconsin Department of Revenue Responsible Beverage Server Course in compliance with secs. 125.04(5)(a)5., 125.17(6), and 134.66(2m), Wis. Stats.

, the undersigned, hereby make applicatio Operator's" License as provided by WI S	on to the local governing b tatute 125.17, for the licer	ody of the Town o	of Bristol in	Dane Coun through Jur	ty, for an ne 30, 2023.
certify that I am <u>42</u> years of age, and a ervice of alcoholic beverages, and agree, it ale and service.	am familiar with the laws f granted this license, to o	ordinances, and bey all provisions	regulations of local and	governing t state laws	he sale and governing suc
Name Horning Mich	ael A	Date of	Birth		
Last First	Middle	Social Security #		r	1
Drivers License #	1	Social Security #	-		5
Name Hovnor Mich.  Last First  Drivers License #  Current Address 3041 Box Lev  Street Address,	VW Sun Prairie h City, Stafe, Zip	<u>T,5350</u> Phone #		5	S
ist all prior addresses for the last 5 years:	:				
Street Address	City	State	Zip	From	To
NIA					
/					
City and State where you were born: Name of Employer's Business Praivie	ladison, WI				
2	D CICCLI	DI			
				,	
HAVE you ever held an alcohol or opera	ator's license from the Tow	n of Bristol?	Y	esN	0
					/ No
HAVE you ever held an alcohol or opera If Yes, specify where and when:	ator's license from another	municipality/towns	ship?	YesU	NO NO
HAVE you EVER been convicted of All	NY offenses in ANY State?	Yes	No		
If Yes:					
For what? When		?			
,					
For what?					
When	Which Cour	:?			
AVE you completed the state-required "ertificate of completion with this application heck), within which time you must complete hereby affirm that the above questions heck the information on this application and erstand that any incomplete, inaccurate	<ul> <li>If No, we will issue a Property of this course and provide the ave been truthfully answered and to refer this application.</li> </ul>	ovisional License f e certificate of con red. I also author on for a full backg	or 60 days (in pletion.  rize the Town ground investigation.	if you pass the value of Bristol stigation. I	to review and
evocation of the license.					
W/1/2		21	28/22		
Applicant's Signature			D	ate	
//		FDDC			
subscribed and sworn to before me this	, 20	FEES:		;	
day of	_, 40	Operator	·'s -	\$25.00	CashCk
		Provision	ıal -	The state of the s	CashCk
Signature: Clerk / Notary		Backgrou	and Check	\$25.00	CashCk
or Office Use:	•••••••	•••••	•••••	••••••	
ApprovedRejected at Town Board	d meeting on	Date			



# Wisconsin Responsible Beverage Seller/Server Training

# MICHAEL HORNUNG

has met all training requirements and successfully completed the above course and or exam.

Certification Number: SL 172863

Date of Completion: 03/24/2023

Kuly Bailey

Authorized Signature

This certificate represents the successful completion of an approved Wisconsin Department of Revenue Responsible Beverage Server Course in compliance with secs. 125.04(5)(a)5., 125.17(6), and 134.66(2m), Wis. Stats. Present this certificate to your local municipal clerk's office to receive your Operator's or Retail license.

1007 APO1

I, the undersigned, hereby make application to the "Operator's" License as provided by WI Statute	ne local governing body of 125.17, for the license yea	the Town o	of Bristol in I	Dane County hrough June	y, for an 230, 2023.
I certify that I am 23 years of age, and am fan service of alcoholic beverages, and agree, if grant sale and service.	niliar with the laws, ordinated this license, to obey all	ances, and provisions	regulations g of local and	governing th state laws go	e sale and CLA
Name Ruand Erin Last First	E	Date of 1	Birth		DO
Last First_ Drivers License #	Middle, Social	Security #	_		110
With the Control of Co					
Current Address <u>590 Schoolstone Tvi</u> Street Address, City, Sta	tc, Zip 53590	Phone #	_		
List all prior addresses for the last 5 years:	2 2010				
Street Address	City	State	Zip	From	To
540 Sand Stone Tri	Sun Prairie	Wi	53590	2017	PREENT
					770307
City and State where you were born: Mudi	son Wi				
Name of Employer's Business Prairie Pine	s Goif Club	Phone #	1008-31	4-021	75
HAVE you ever held an alcohol or operator's li	cense from the Town of Bri	istol?	Yes	No No	
HAVE you ever held an alcohol or operator's li  If Yes, specify where and when:	cense from another municip	pality/towns	hip?	Yes X	No
HAVE you EVER been convicted of ANY offe If Yes:		Yes_X	_No		
For what?	WI. 1 C 40				
When	Which Court?				
For what?	12				
When	TT / 1 C (0				
HAVE you completed the state-required "Bevera certificate of completion with this application. If No check), within which time you must complete this co	o, we will issue a Provisiona	al License fo	or 60 days (if	please provid you pass the	e a copy of the background
I hereby affirm that the above questions have been check the information on this application and to runderstand that any incomplete, inaccurate or fall revocation of the license.	efer this application for a	full backgr	round investi	igation. I fu	rther
akuland		041	04/12		
Applicant's Signature		//	Date	e	
Subscribed and sworn to before me this		FEES:			
day of, 20	<del></del>		9		
*		Operator's Provisiona		\$25.00 Cas \$10.00 Ca	
Signature: Clerk / Notary		Backgroun	nd Check -	\$25.00 Cas	shCk
For Office Use:  ApprovedRejected at Town Board meetin	ig on	Date			



This certifies that

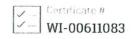
Erin Ruland

is awarded this certificate for

Wisconsin Responsible Beverage Server Training







Sark Nogari Official Signature

This certificate is non-transfereable and represents the successful completion of an approved Wisconsin Department of Revenue Responsible Beverage Server Course in compliance with secs. 125.04(5)(a)5., 125.17(6), and 134.66(2m), Wis. Stats.

Cover Sheet for Agenda Packet Section

IV. Business

b.

No Packet Material For This Item