Village of Colfax Village Board Regular Meeting Agenda Tuesday, December 27, 2016 Village Hall, 613 Main Street 7:00 p.m.

- 1. Call to Order
- 2. Roll Call
- 3. Public Appearances
- 4. Consent Agenda
 - a. Minutes
 - Regular Board Meeting Minutes, December 12, 2016
 - b. Training Requests William Anderson January 17-19, 2017 Law Enforcement Management Conference
 - c. Facility Rental none
 - d. Licenses
 - i. 2017 Mobile Home Park License Donald & Marcia Henderson
 - ii. 2017 Secondhand Jewelry Dealers License Nancy Odom Mouledoux DBA Twice Blessed Treasurers
 - iii. Operator's License December 27, 2016 to June 30, 2017 Abigail A. Bachim Buck Snort
- 5. Communications Village President
- 6. Consideration Items
 - a. Consideration of the Plan Commission recommendation to get RFP's for railroad spur engineering
 - b. 2017 fee schedules
 - . Village fees
 - ii. Sewer rates
 - iii. Rescue rates
- Review/Approval Bills December 12, 2016 December 25, 2016
- 8. Committee/Department Reports (NO ACTION)
 - a. Colfax Police Department November Report
 - b. Building Permits Issued 2016
- 9. Adjourn

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: Lynn Niggemann, Administrator-Clerk-Treasurer, 613 Main Street, Colfax, WI (715) 962-3311 by 2:00 p.m. the Friday prior to the meeting so that any necessary arrangements can be made to accommodate each request.

It is possible that members of and possibly a quorum of members of the governmental bodies of the municipality may be in attendance at the above-stated meeting to gather information; no action will be taken by any governmental body at the above-stated meeting other than the governmental body specifically referred to above in this notice.

Village Board Meeting - December 12, 2016

On December 12, 2016, the Village Board meeting was held at 7:00 p.m. at the Village Hall, 613 Main Street, Colfax, Wl. Members present: Trustees Halpin, Davis, Wolff, Rihn, Burcham and President Gunnufson. Excused: Trustee Schieber. Others present included Rick Johnson, Director of Public Works Bates, and LeAnn Ralph with the Messenger and Administrator-Clerk-Treasurer Niggemann.

Public Appearances –none.

Minutes- Regular Board Meeting November 28, 2016 - A motion was made by Trustee Halpin and seconded by Trustee Rihn to approve the Regular Board meeting minutes from November 28, 2016. Voting For: Trustees Burcham, Rihn, Wolff, Davis, Halpin and Gunnufson. Voting Against: none. Motion carried.

Minutes- Special Budget Hearing December 1, 2016 - A motion was made by Trustee Halpin and seconded by Trustee Wolff to approve the Regular Board meeting minutes from December 1, 2016. Voting For: Trustees Halpin, Davis, Wolff, Rihn, Burcham and Gunnufson. Voting Against: none. Motion carried.

Communications - Village President — Still working to set a date for the Planning Commission meeting to discuss the future of the Industrial Park.

Consideration of the Plan Commission recommendation of East View Development – Gunnufson explained the Plan Commission's recommendations as follows.

- Lot #6 Potential buyers have expressed a concern regarding the size of the lots. They are interested in more lawn or additional land to building an additional garage. Blomberg had expressed that bigger lots have been the trend in developments. To accommodate the larger lot, Blomberg stated that properties can be marketed with the home or at an increased priced for the current lot plus the additional half lot.
- Possibility of accommodating more rental units or housing for the elderly population. The current trends for this market are Townhouses. Lot # 1 and #2 would be an ideal location for the Townhomes. The Lots would need to be rezoned to accommodate this.
- Developer interest in Townhomes. Phase 2 included this option once the development was going. If a Developer were interested in developing the entire Phase 2, Village could consider a plan which would have the Developer pay the utilities to be installed in trade for the land purchase fee.

To summarize the options, Lot # 1 and #2 would be Townhomes, Lot #3 would remain as is, and Lot #4 and #6 could possibly be converted to a lot and a half to include half of Lot #5 with each Lot #4 & #6. The purpose of these possible changes is to promote the start of the development.

A motion was made by Trustee Davis and seconded by Trustee Rihn to approve the Planning Commission's recommendation to allow Lot # 6 at 302 Dunn Street to be marketed two ways. One way would be with the house lot and the second way would be with the house lot and an additional half lot. Voting For: Trustees Halpin, Davis, Wolff, Rihn, Burcham and Gunnufson. Voting Against: none. Motion carried.

A motion was made Trustee Davis and seconded by Trustee Rihn to entertain any discussions with builders that are interested in building Twinhomes on Lots #1 and #2. If interest is expressed, the

Planning Commission and the Board would like to discussion options with the building. Voting For: Trustees Burcham, Rihn, Wolff, Davis, Halpin and Gunnufson. Voting Against: none. Motion carried.

A motion was made by Trustee Rihn and seconded by Trustee Halpin to entertain any discussions with a single developer that may be interested developing all of Phase 2. Some possibilities would be instead of selling the lots to the developer, trade the land for the installation of the services to the Phase 2 lots. Other incentives may include negotiations of possible partial reimbursement after first building is complete, additional reimbursement after second building is built, etc. Voting For: Trustees Halpin, Davis, Wolff, Rihn, Burcham and Gunnufson. Voting Against: none. Motion carried.

Bauman Associates Engagement Letter – 2016 Audit – A motion was made by Trustee Davis and seconded by Trustee Halpin to approve the 2016 audit agreement with Bauman Associates. Voting For: Trustees Halpin, Davis, Wolff, Rihn, Burcham and Gunnufson. Voting Against: none. Motion carried.

Bauman Associates Engagement Letter – 2016 TIF annual Reports – A motion was made by Trustee Halpin and seconded by Trustee Wolff to approve the 2016 Tiff annual reports creation by Bauman Associates. Voting For: Trustees Burcham, Rihn, Wolff, Davis, Halpin and Gunnufson. Voting Against: none. Motion carried.

Nevins Flooring Estimate for Village Hall – Clerk's office – A motion was made by Trustee Halpin and seconded by Trustee Rihn approve the estimate for carpet tiles for the Clerk's office at the estimated price of \$2,580.24. The funding will come from the Clerk's Office Equipment under designated funds. Voting For: Trustees Burcham, Rihn, Wolff, Davis, Halpin and Gunnufson. Voting Against: none. Motion carried.

Review/Approval – Bills – November 28, 2016 to December 11, 2016 – A motion was made by Trustee Davis and seconded by Trustee Rihn to approve the November 28 to December 11, 2016 bills for payment. Voting For: Trustees Halpin, Davis, Wolff, Rihn, Burcham and Gunnufson. Voting Against: none. Motion carried.

Adjourn: A motion was made by Trustee Wolff and seconded by Trustee Rihn to adjourn Village Board meeting at 7:48 p.m. A voice vote was taken with all members voting yes. Motion carried.

Scott Gunnufson, Village President

Attest:

Lynn Niggemann

Administrator-Clerk-Treasurer

Meeting / Continuing Education Travel / Meeting Request Form

Date(s) of meeting 01/17/2017 – 01/19/2017 Name of Requested meeting: Law Enforcement Management Conference How will this improve your ability to perform your job? Keep up to date with current issues in a policing environment and enhance management skills What alternatives are there to attending this meeting? (In-house resources, literature review, participation in meetings closer to Eau Claire, etc.) How will you share what you have learned with others? Please include any additional comments on the back of this form: I will be traveling with the City of Bloomer Chief of Police and we will be sharing a room and splitting the cost of lodging Expense Estimate: \$325.00 Requested Approved Tuition / Registration \$197.25 *Are others attending this meeting YES / NO Mileage / Airfare 0 (If yes, list names) Lodging \$90.00 *Would like the Registration Fee Miscellaneous pre paid and mailed with your registration YES / NO Total \$325.00 Time Request: Requested Approved Number of days absent: 3 From Work Setting Vacation Paid Conference Time X	Date 12/20/2016	Position Chief of Police Department Police
Date(s) of meeting 01/17/2017 - 01/19/2017 Employee is / NOT required to attend (circle one) Name of Requested meeting: Law Enforcement Management Conference How will this improve your ability to perform your job? Keep up to date with current issues in a policing environment and enhance management skills What alternatives are there to attending this meeting? (In- house resources, literature review, participation in meetings closer to Eau Claire, etc.) How will you share what you have learned with others? Please include any additional comments on the back of this form: I will be traveling with the City of Bloomer Chief of Police and we will be sharing a room and splitting the cost of lodging Expense Estimate: \$325.00 Requested Approved Tuition / Registration \$197.25 *Are others attending this meeting YES / NO Mileage / Airfare 0 (If yes, list names) Lodging \$90.00 *Would like the Registration Fee Miscellaneous pre paid and mailed with your registration YES / NO Total \$325.00 Time Request: Requested Approved Number of days absent: 3 From Work Setting Vacation Paid Conference Time X	1515015010	
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	Absent Without Pay (own time)	

A COPY OF THE MEETING DESCRIPTION AND AGENDA MUST BE ATTACHED TO THIS REQUEST

Other

Welcome, WILLIAM J ANDERSON

Search Submit

Training Announcement Details

Law Enforcement Management Conference

Provider:	Wisconsin Indianhead Technical College - South Region
Date(s):	01/17/2017 - 01/19/2017
Cost:	\$197.25
Instructor/Vendor:	Grossman, Prochut, Johnson, Strobel, and others
Training Site Location:	Barker's Island Inn Resort
	300 Marina Drive, Superior, WI, 54880
Geographical Location:	NWAR
Description:	This three-day Management Conference will provide 20 hours of tailored training to leaders in the law enforcement profession. The training topics were selected to enhance the leadership skills of attendees during a trying time in American law enforcement. Lt. Col. Dave Grossman, Mercedes Ramirez Johnson, Chris Prochut, Neil Strobel, Dave Perlman, Tony Barthuly
Contact:	Tom Richie, Academy Director
Phone:	(715) 234-7082 Ext. 5292
Email:	tom.richie@witc.edu
Internet Address:	www.witc.edu/continuing-education/law.htm



January 1, 2017 – December 31, 2017 Application for License to Operate Mobile Home Park

Annual Fee: \$100.00 for each fifty (50) mobile home spaces or fraction thereof

I hereby apply for license to operate a mobile home park in the Village of Colfax, Wisconsin under Charter 13-1-187 of the Municipal Code of the Village of Colfax and hereby agree to comply with all provisions of said ordinance and any amendments thereof, if license is granted to me.

Name of Applicant
Donald + Marcia Henderson
Address of Applicant
N8561 State Rd 40 Co/Fax, W; 54730
Location and local departs to the second control of the second con
122 Park Dr 4 118 Park Dr Tax Parce 111-1007-03-
Name and address of owner of the
Donald & Marcia Henderson
Dimension of park
10.65 Acres
Sanitary facilities of park
Village water + sewer
Maximum number of mobile homes that park will accommodate:
Marcia Venderson 12-19-16 Signature of applicant Date
Date Date

Village of Colfax

Box 417 - Colfax, Wisconsin 54730 - Phone 715-962-3311 Fax 715-962-2221

> Scott A. Gunnufson, President Lynn Niggemann, Administrator-Clerk-Treasurer

APPLICATION FOR SECONDHAND JEWELRY DEALER

RECEIVED

Date: 12/16/2016	DEC 15 2016
	Village of Colfax
Name: NANCY ODOM MOULEDOUX	
Business: TWICE BLESSED TREASURES	
Address: 405 MAIN ST., COUFAX	····
Phone: 715 962 2007	
Seller's Permit No: 456-1021709 623-03	
NONREFUNDABLE FEE: \$30.00 CK RECEIPT#	dom Mouledous
Police Chief Notification: Applicant sig	nature

July 1, 2016 - June 30, 2017 Application for License to Serve Fermented Malt Beverages

		and Into	oxicatir	ng Lic	quor	S	FeerESPIVEL	
							DEC 13 2010	
							Village of Colfax	K
To the	Clerk	of the_	Village	of		Colfax	Wisconsin	
Beverages an	d Intoxicating Liqu	ense to serve, from ors, subject to the lin and supplementary al, affecting the sale	nitations impo	hereby agre	ee to con	ply with all laws	ooner revoked), Fermented Ma (2) of the Wisconsin Statutes s, resolutions, ordinances and me,	lt : 1
I certif	y that I am <u>ZZ</u>	years of age.		Mu	Y	Box Signature of App	licant	 =
Answer tl	ne following qu	estions fully a	nd complet	tely:				
Name of App	licant <u>Abic</u>	* 1 /	'And	10:00				- 2590
Address of Ap		220年	- 5321	6 Be	Mac	ndd Si	n Prairie WI	_ 50, /-
Have you bee	en convicted of any	elony or of violating	any law of the			r of the United Sta	ites?	_
Date of such	conviction							
Name of Cou	rt		. •)
Nature of offe			1					
	en convicted or viola	ting any license law	or ordinance re	gulating the	sale of be	verages or intoxic	ating liquors?	
THE P STATES	OTAPLE OF WISCOME	LLP 7.3	: 1 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	an American	W	Signature of App	licant	_
******	William Day							
person who r	made and signed the	foregoing application	on for an operat	tor's license;	that all th	being first duly ne statements mad	sworn on oath says that he is the by the applicant are true.	10
Subsc	ribed and sworn to b	efore me this	JAN			Applica	nt Sign he re	_
day of	Mec 20	olle				7		
July	uy9S	Molecu	nnty Wis					

COLFAX POLICE DEPARTMENT

Village of Colfax P.O. Box 417 Colfax, Wisconsin 54730

Supplemental - General License Application

Instructions: Fill in all blanks, if a blank doesn't apply to your situation; fill in with "NA". A \$5.00 Investigation Fee is due to the Village of Colfax when submitting this application. The Investigation Fee does not apply to: fermented beer, liquor, or on-off sale licenses. The fee, if applicable, will be instituted by the Village Clerk. Your receipt of this application will be accepted or denied within 72 hours (3 days) by the Colfax Police Department upon receipt of this application. This form is to be filled out in addition to any others required by the Village of Colfax. Any information on this application found to be false will be grounds for non-approval of this application. NOTE: If any further explanation is needed, please continue on back of application.

Full Name-First, Middle, Last Abigail A. Bochin Business/Organization Name Full Prior Names (nicknames, maiden names, etc. Date of Birth Place of Birth Moudison WI Sex__ Race Social Security No. Have you ever been arrested for, or convicted of any laws, including traffic? If yes, list offense, date and place occurring. List prior addresses for the past five years 2044 11th AVR. E List three personal references, not related to you. Include name. address & phone number Shiey flashha Kinsey Franks Briztany Jordan Have you ever been a member of the Military Service? Discharge? _____ Education- include name of High School, location, grade completed and any training beyond high school. Prairie FFE High School, Son Prairie, wI, I certify that I am familiar with the laws, ordinances and regulations, and hereby agree, if granted a license, to obey all provisions of such laws. I further certify that all information included in this application is true, accurate Date 11-30-/6 and complete to the best of my knowledge. Signature Official Use Only-Below This Line Date Received 12-13-16 Date Approved _____ Date Denied_____ Researcher Approving Officer Signature_____

WISCONSIN

SELLER / SERVER CERTIFICATION

Trainee Name: Abigail Bachim

Date of Completion: 04/27/2016

School Name: 360training.com, Inc.

Certification # WI-38609

certify that the above named person successfully completed an approved Learn2Serve Seller/Server course.

COMPLIES WITH WISCONSIN STATUTES 125.04, 125.17, 134.66



Corporate Headquarters
13801 Burnet Rd., Suite 100
Austin, Texas 78727
P: 800-442-1149

Fees Schedule

The following is a list of fees either now in the Code or mentioned in the text of codified ordinances. It is not a comprehensive list of Village fees, but it is a starting point of what was found by the editor during the Analysis of the Code. Where fee amounts are in the Code they have also been noted in the Analysis with the option of taking them out and replacing them with language that indicates fees are as set by the Village Board.

Fee Description/Location in Code	Amount (if in Code)
Plan Commission special meeting, § 14-71	"as prescribed by the Village of Colfax fee schedule"
Statement of Real Property Status, § 38-11	\$5
Records copying, § 84-4F	\$0.25 per page
Special meeting, Village Board, § 98-12B	\$100
Water and sewer utilities, Ch. 105:	
General public service, metered	\$0.20 per 1,000 gallons
General public service, unmetered (single-family home or small commercial user)	\$3.75 per quarter
Alarms; fee for answering false alarms	Not a fee; this is actually a fine
Private alarm system permit fee, § 125-11A	\$10
Dog and cat license fees: (§ 131-3A)	
Neutered males, spayed females	\$5
Unneutered males and unsprayed females	\$8
Kennel license fee: (§ 131-3B)	
12 or fewer dogs	\$35.30 36.50
More than 12	\$4 for each additional
Dog license late fee; § 131-4	\$5
Domestic chickens permit, § 131-13F(1)	\$10 per parcel for 10 or less chickens
Bicycle registration, § 137-6B	\$2

Building permit, § 145-14	"as established by resolution"
Cigarette license fee, § 159-2	\$5
Construction site erosion control, Chapter 166:	
Major land-disturbing activity permit; § 166-8F(2), application fee	\$20
Minor land disturbing activity permit; § 166-8F(3), application fee	\$10; \$5 if in conjunction with building permit
Appeal or variance request, § 166-11A(1), filing	3 \$25
Appeal of any order, decision, determination of inaction of the Village in administering or enforcing Chapter 166, § 166-11A(2)(a)	r \$50
Driveway permit, § 173-1C	No fee
Burning permit, § 189-8	(No fee mentioned)
latural lawn permit filing fee, § 205-5C(1)	\$25
lcohol beverage licenses, § 225-5A through H	
Class "A"	\$10
Class "B"	\$100
Temporary Class "B" fermented malt beverage	\$10 per event
Temporary "Class B" wine	\$10 per event
Fermented malt beverage wholesaler's	\$25
"Class A" retailer's	\$50
"Class B" retailer's	\$400; (\$50 for American legion)
"Class C" wine	\$200
Fransfer fee, § 225-11A	\$10
Outdoor sports event application, § 225-19D	\$10

Operator's license, § 225-20D	\$5 (plus \$5 investigation fee) 6/10
Provisional operator's license	\$15 \$10
Nonmetallic mining permit, § 248-5A	\$50
Blasting and rock crushing, § 248-7F	\$10
Parks and Recreation, Chapter 272	
Use of public property, 272-6C:	
Municipal building Auditorium	\$30 per day plus a \$20 security deposit
Fairgrounds	\$30 per day plus a \$20 security deposit
Fairgrounds/F.F.A. Building	\$30 per day plus a \$20 security deposit
Fairgrounds Camping	\$5 per night
Archery permit, annual, § 285-3G(2)	No fee charged
Sewers, Ch. 315	See Rate Schedules for Users Charges (Art. II)
Street opening fee, § 315-11A	\$1,000
Quarterly wastewater system maintenance fee, § 315-11D	\$10
Streets and Sidewalks, Ch. 328	
Public sidewalk lay or repair, § 328-5C	No fee
Permit renewal, § 328-6E	\$5
Street opening permit, § 328-6F(2),	\$5
Street privilege permit, § 328-9C	\$5
Transient Merchants, Ch. 336.	
Application for registration, § 336-4C	\$10
Annual registration fee, § 336-4D(1)	\$50
Per-day fee, § 336-4D(2)	\$5

Water, Ch. 365, Art. I	See User Rate Schedules
Ch. 412, Shoreland-Wetland Zoning, § 412-18	"Fees by resolution of Village Board"
Ch. 430, Zoning	
PUD review fee, § 430-34B	\$25
Sign permit (§ 430-62)	Amount not listed in code
Zoning permit fee receipt , § 430-95B(6)	\$20
Variance application fee receipt, § 430-104B(6)	\$25
Mobile home parks, Art. XVIII	
Mobile home park developer permit, § 430- 111C	\$25
Mobile home park license, § 430-113C	\$100/50 spaces; transfer of license: \$10

12.22.2016 Sewer Volume Anaylsis

Data from October 2015 to October 2016 billing.

				3% increase	5% increase	10% increase	15% increase	20% increase	25% increase
	Volume(gals) Vol. by 1,000's		\$4.29/1000 gal	\$4.29/1000 gal \$4.42/1000 gal \$4.50/1000 gal \$4.72/1000 gal \$4.93/1000 gal \$5.15/1000 gal \$5.35/1000	\$4.50/1000 gal	\$4.72/1000 gal	\$4.93/1000 gal	\$5.15/1000 gal	\$5.36/1000 gal
Residential	13,175,611	13,176	\$56,523.37	\$58,236.20	\$59,290.25	\$58,236.20 \$59,290.25 \$62,188.88	\$64.955.76	\$67.854.40	\$70 621 27
Commercial	8,228,714	4 8,229	\$35,301.18		\$36,370.92 \$37,029.21	\$38,839.53	\$40,567.56	\$42.377.88	
Industrial	103,384	103	\$443.52	\$456.96	\$465.23	\$487.97	\$509.68		\$554 14
Public Authority	3,435,400	3,435	\$14,737.87		\$15,184.47 \$15,459.30	Ϋ́	\$16,936.52	V	\$18 413 74
Sewer est. annual income	ome		\$107,005.94	\$107,005.94 \$110,248.54 \$112,243,99 \$117,731.47 \$122,969.53 \$128,457.01	\$112,243.99	\$117,731.47	\$122 969 53	\$128 457 01	10
Annual increase				\$3,242.60	\$5,238.05	\$3,242.60 \$5,238.05 \$10,725.54 \$15,963.59 \$71,451.07 \$76,689.13	\$15,963,59	\$21 451 07	-
								10:10:	720,000,25
-	,								
Kesidental - sewer rate	9,200) 9.2	\$39.47	\$40.66	\$41.40	\$43.42	\$45.36	\$47.38	\$49.31
Avg. bill			\$152.58	\$153.78	\$154.51	\$156.54	\$158.47	\$160.49	\$162.42
Net Change Quarterly				\$1.20	\$1.93	\$3.96	\$5.89	\$7.91	\$9.84

Colfax Rescue fee schedule for 2017

<u>Discription</u>	<u>C</u>	<u>harge</u>
*** Allowable patient billables are charged at 35% markup over list price	es.	
ALS non resident base rate	\$	1,146.26
ALS spinal immobilization base rate non resident	\$	1,246.26
ALS resident base rate	\$	937.15
ALS resident base rate spinal immobilization	\$	1,037.15
BLS resident	\$	851.95
BLS resident spinal immobilizion	\$	951.95
BLS non resident	\$	1,010.42
BLS non resident spinal immobilization	\$	1,110.42
Refused transport	\$	196.12
Resident loaded mileage per loaded mile	\$	16.79
Non resident mileage per loaded mile	\$	18.09
Standby at school events flat fee	\$	60.00
EMT at private events hourly	\$	30.00
Ambulance standby at private event hourly	\$	40.00
House number 2 sided	\$	12.00
House numbers one sided	\$	10.00
Certification of Medical Records***Statute allowed amount***		
Certification	\$	8.26
Copies 1-25 per page	\$	1.04
Copies 26-50 per page	\$	0.76
Copies 51-100 per page	\$	0.51
actual postage cost including envelope		

COLFAX POLICE DEPARTMENT

PO BOX 417, 613 MAIN ST.

COLFAX, WI 54730

NOVEMBER 2016 MONTHLY POLICE REPORT

CALLS FOR SERVICE: 48

TRAFFIC STOPS: 9

8	ASSIST	OTHER	AGENCY:	4
•			I I I I I I I I I I	

- TRAFFIC ACCIDENT SOUTH OF TOWN, RUNAWAY JUVENILE, PEOPLE HUNTING FROM ROAD IN COUNTY, RECKLESS DRIVER
- ASSIST MOTORIST:
 - o SEMI STUCK IN MUD
- AMBULANCE ASSIST:
- 2
- TRAFFIC COMPLAINT:
 - HIGH SPEED ON MAIN ST, NOT STOPPING FOR STOP SIGNS, NOT YIELDING TO PEDESTRIANS IN CROSSWALK
- DOMESTIC:
- 1
- o FAMILY ARGUMENT
- SUSP PERSON/CAR:
- 2
- o SUSPICIOUS GRAY VAN, SUSPICIOUS MALE BEHIND RESIDENCE
- CHECK WELFARE:
- 3
- 2 CALLS FOR SUICIDAL SUBJECTS, SUICIDAL SUBJECT AT HOSPITAL
- NOISE COMPLAINT:
- 1
- o LOUD DOWNSTAIRS NEIGHBOR
- JUVENILE COMPLAINT: 2
 - o DRUG PARARHERNALIA, POSSESSION OF THC
- NEIGHBOR DISPUTE:
- 1
- GARBAGE FROM NEIGHBOR'S PROPERTY
- OPEN DOOR:
- 1
- COLD STORAGE AT DPW NOT SECURE
- GARBAGE DUMPING:
- 1

- GARBAGE DUMPED AT BUSINESS
- 911 HANGUP/MISDIAL:
- 1
- HARASSMENT:
- 3
- EX BOYFRIEND HARASSMENT, PHONE CALL (SCAM) HARASSMENT
- ANIMAL COMPLAINT:
 - o NEIGHBOR'S CATS, DOG AT LARGE KILLED CHICKENS
- LOST / FOUND:

1

2

- o TOOL BOX FOUND ON ROADWAY ON MAIN ST IN FRONT OF BREMER BANK
- CIVIL:

3

- o PROPERTY EXCHANGES
- MISCELLANEOUS:

2

- o ABANDONED VEHICLE, RETRIEVE PROPERTY
- TRAFFIC ACCIDENT:

1

- o HIT AND RUN IN PARKING LOT OF CENEX
- WARRANT:

1

- o -SUBJECT WITH FELONY WARRANTS LOCATED AT RESIDENCE
- DRUG COMPLAINT:
- 1

- THEFT:

2

POSSESSION OF DRUG PARAPHERNALIA

o STOLEN CAR, GAS SKIP



Activity Report

Village of Colfax

January

Date	Customer Service		Pass/Fail	Project				
1/15/2016	DeMoe	Electrical Hook-up	Passed					
1/19/2016	DeMoe	Basement Plumbing	Passed					
1/25/2016	Arntson	Rough Construction	Passed					
1/25/2016	Arntson	Rough Electrical	Passed					
1/25/2016	Arntson	Rough Plumbing	Passed					
1/26/2016	Arntson	Electrical Hook-up	Passed					
1/29/2016	DeMoe	Rough Construction	Passed					
1/29/2016	DeMoe	Rough Plumbing	Passed					



Activity Report

Village of Colfax

February

Date	Customer	Service	Pass/Fail	Project	
2/2/2016	Arntson	Insulation	Passed		
2/4/2016	DeMoe	Insulation	Passed		
2/4/2016	DeMoe	Rough HVAC	Passed		
2/4/2016	DeMoe	Rough Electrical	Passed		
2/25/2016	Sundby	Rough Construction	Passed		
2/25/2016	Sundby	Permit Issued		Remodel	



Activity Report

Village of Colfax

April

Date	Customer	Service	Pass/Fail	Project
4/16/2016	Tuschl	Permit Issued	1	New Home Construction
4/18/2016	Kiekhafer	Permit Issued		Remodel



Activity Report

Vi	llage of Co	lfax		May					
	Date	Customer	Project	·					
	5/4/2016	Tuschl	Footing	Passed					
	5/4/2016	Rihn	Permit Issued		Remodel				
	5/6/2016	Kiekhafer	Slab Footing	Passed					
	5/6/2016	Kiekhafer	Slab Plumbing	Passed					
	5/31/2016	Kiekhafer	Footing	Passed					
	5/31/2016	Ziebell	Permit Issued		Remodel				
	5/31/2016	Smith	Permit Issued		Remodel				



Activity Report

Village of Colfax

June

Date	Customer	Service	Pass/Fail	Project	
6/6/2016	Smith	Footing	Passed		
6/8/2016	Tuschi	Final Inspection/Occupancy	Passed		
6/9/2016	Smith	Final Inspection/Occupancy	Passed		
6/23/2016	Ziebell	Rough Construction	Passed		



Activity Report

Village of Colfax

July

Date

Customer

Service

Pass/Fail

Project

7/28/2016

Arntson

Final Inspection/Occupancy

Passed



8/11/2016

Schneider

Mobile: 715-556-0066 FAX: 715-231-2447 www.we berin spections.cominspector@weberinspections.com

Activity Report

Village of Co	lfax		August	
Date	Customer	Service	Pass/Fail	Project
8/11/2016	Schneider	Permit Issued		Remodel

Permit Issued



Activity Report

Village of Colfax

September

Date	Customer	Service	Pass/Fail	Project	
0/2/2016	Calamaidan	Duoin Tile	Daggad		
9/2/2016	Schneider	Drain Tile	Passed		
9/2/2016	Schneider	Footing	Passed		



10/19/2016

DeMoe

Mobile: 715-556-0066 FAX: 715-231-2447 www.weberinspections.com inspector@weberinspections.com

Activity Report

Village of Col	fax		October	
Date	Customer	Service	Pass/Fail	Project
10/14/2016	Nelson	Permit Issued		Remodel

Final Inspection/Occupancy

Passed

process restrictions and the second													
Wisconsin Division of Safety and Buildings		UNIFO	VILLA ORM BUILDI	GE OF CO	LFAX IT APP	LTCA	M		Applic 2		No.		Staliona Administratory
Wisconsin Stats, 101.6	53, 101.73			THE						No.	***************************************		***************************************
PERMIT REQU	ESTED	Constr	. ПНУАС Г	Electric [Plumbir	10 ПБ	Proci	on Co	ntral	Oth			
Owner's Name Annie Schieber			Mailing Addre	\$\$ 1 D 1	1	15 11	<i>a</i> 051	on co.	nu Oi	Te	er:		
Contractor's Name:	Con Lelec [HVAC [PIL	og Lic/Cert#	ss As F Rev / Mailing A	ddress	10/40	X	WI	54730	7/	<u>5</u> 55	6-4	110
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Contractor's Name:	Con TElec F	HVAC FIRIT	og Lic/Cert#	Moiling A	44					FA			
		JANUA ELE	BIOCOLLA	Mailing A	aaress					Tel			
Contractor's Name: ☐	on Flec F	HVAC FINIS	g Lic/Cert#	25.13	1 1		**************************************			FA	X#		
	2011 [_]2100 [_	MAC END	g LickCen#	Mailing A	ddress					Tel	•		
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Contractor 3 Tamic.	on Dace C	DVAC [PIO	g Lic/Cert#	Mailing A	ddress					Tel.		m-promised-t-	
DOOTECO	T = -									FAX	X #		
PROJECT LOCATION	Lot area		Sq. ft.		1/4,	1/4	of Sac	tion	7	٠	~~~		
Building Address 805 Eastk	2 / 4 2 00	Sub	division Name				Lot		, l	Blo	N, F		E (or) \
Zoning District(s)		Zoning Permi	1 No.	Setbacks:	Front		Dan	-	17	<u> </u>	r	**************************************	~
1, PROJECT						ft.	Rear	ft	Lef	t	ft.	Right	·
New □Repair	3. OCCUPA ☐Single Far		6. ELECTRICAL Entrance Panel	9. HVAC EQU Forced Air F	IPMENT	12. EN		SOURC	· · · · · · · · · · · · · · · · · · ·			~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	
☐Alteration ☐Raze ☐Addition ☐Move	☐Two Fami		Amps:	Radiant Base		Space I		Nat Gas	LP	Oil	Elec	Solid	Sola
Other:	☐Garage ☐Other:		☐Underground ☐Overhead	☐Heat Pump ☐Boiler		Water I		[]		n	71	11	1.2
2. AREA INVOLVED			7. FOUNDATION	Central Air C	ond.	heating of	Hing u equipm	mit has 3 nent capa	kilowat citv.	t or m	ore in el	ectric sp	ace
Unfin.	4. CONST. 1	YPE	☐Concrete ☐Masonry	Other:		13. HE					*************		
Bsmt Sq Ft	□Mfd: □W	'I UDC	☐Treated Wood	10. SEWER						T) (7)			*****
Living		S. HUD	☐Other:	☐Municipal		Envelope and Infiltration Losses ("Maximum Allowable						oulated Ne	
AreaSq Ft	5. STORIES		8. USE Seasonal	☐Sanitary Perm	it No.:	Heating.	Equip	ment Out	put ^B on l	Energy	y Works	sheet;	,,,,
arage Sq Ft	□2-Story	- 1	☐Permanent	11. WATER		"Total B	uilding	3 Heating	Load"	on WI	Scheck	eport)	
eckSq Ft.	□Other: □Plus Basem		□Other:	☐Municipal Uti	lity			· · · · · · · · · · · · · · · · · · ·			····		-
agree to comply with all apr	olicable codes, s	tatutes and ord	inances and with the co	☐Private On-Sit onditions of this po		s /C				nit cre	ates no	legal lia	hility
express or implied, on the star have read the cautionary star uthorized agent, permission	tement recordin	a contractor fin	ongiel roomemal-itie	nation is accurate.	n ram an	owner app	iying j	ior an erc	sion cor	ntrol o	r constri	uction pe	ermit.
APPLICANT'S SIG			The both in 10 abreling a	i an reasonable no	urs and tor	any propei	r purpo	se to insp 'E SIG	pect the	work	which is	being d	lone.
APPROVAL COND	The second secon	This permit is	issued pursuant to the	following conditi	ons. Failure	e to compl	v mov	result in	suspens	ion or	revocat	ion of th	nis
New 6		Permitte of Other	er penalty. See at	tached for cond	itions of a	pproval.				***************************************			
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						Mur	ncipal	ity Numb	er of Du	velling	, Locati	on	

PERMIT ISSUED BY:

Cert No.

Name George Entzminger

Date 4-13-16 Tel. 715-962-4402

Total \$ \(\subseteq \omega \) | \(\subseteq \omega \) | Erosion Control |

Distribution: \(\subseteq \omega \) | - Issuing Jurisdiction \(\subseteq \omega \) | 2 - Owner/Agent \(\subseteq \omega \) | Copy 3 - Inspector

PERMIT(S) ISSUED

Construction
HVAC
Electrical

☐Plumbing ☐Erosion Control

FEES: Plan Review

Wis. Permit Seal

Inspection

Other

Wisconsin Division

١	pp	lication	No

Wisconsin Division										Ap	plicat	ion N	lo.	Zimoha a a a a a	ARTHUR TECHNOLOGY
of Safety and Buildings					GE OF CO						20	16-	Q		
		UNI	FOR	RM BUILDII	NG PERMI	T APPI	JICA'	rioi	N		2.0	1.0	બ		
Wisconsin Stats. 101.63	3, 101.73									Parcel No.					
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Mickey	11/C(48	bean		Mailing Addres	Pain St.	10 fc.	x, a	2/							
Contractor's Name: Excon Letec LHVAC LPlbg Lic/Cert# Mailing Address												Tel.	715-	55%	9021
Jim Herrick Co	hst.		į	1049407	10100	695-10	RAIN	11.6	Kix,	, lu	"	FAX	(#		
Contractor's Name: Con Elec HVAC Plbg Lic/Cert# Mailing Address Tel.															
FAX#															
Contractor's Name:	on Elec [HVAC [Plbg	Lic/Cert#	Mailing A	ddress	· · · · · · · · · · · · · · · · · · ·				\dashv	Tel.			
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Contractor's Name:	on Elec F	нуас г	Plbg	Lic/Cert#	Mailing A	ddress		************	******************			Tel.			Marie and American Street, or other Publisher,
Enquis											-	FAX	741		240-8)
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PROJECT LOCATION	Lot area		Sq	ı, ft.	***************************************	1/4,	1/4,	of Se	ction		, T		N, R		E (or) W
Building Address	<u></u>		Subdiv	vision Name				Lot	No.			Blo	ck No.	(Title Table Special)	
Zoning District(s)	<i>Df_r</i>	Zoning Po	i+ N	I.a.	Setbacks:	T Frank		D.		·	Y 0				
Zoning District(s)		Zoning r	cinnt iv		Setbacks;	Front	ft.	Rea		ft.	Left		ft.	Right	ft.
1. PROJECT	3. OCCUPA	And the supplemental state of the supplement		ELECTRICAL	9. HVAC EQU		- Committee of the Comm		SOUR	COLUMN TO WAR	or other designation and				
⊠New	☐Single Fa		i	ntrance Panel mps:	☐Forced Air F		Fue Space	-	Nat Gas	~~~		Oil	Elec	Solid	i Solar □
☐Addition ☐Move	Garage	-	[]Underground	Heat Pump		Water	Htg							
Other: Roo f	Other:			Overhead FOUNDATION	☐Boiler ☐Central Air (Cond			unit has			or mo	re in el	ectric s	pace
2. AREA INVOLVED	4. CONST.	TYPE]Concrete	Other:	, onu.	heating equipment capacity. 13. HEAT LOSS								
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Living AreaSq Ft	5. STORIE							tration Losses ("Maximum Allowable t Output" on Energy Worksheet;							
	□1-Story			Seasonal	 					ating Load" on WIScheck report)					
GarageSq Ft	☐2-Story ☐Other:			Permanent Other:	11. WATER ☐Municipal U	rility	******************		LDING						
Deck Sq Ft.	☐Plus Base				☐Private On-S	ite Well			o, Z						
I agree to comply with all ap express or implied, on the sta	plicable codes	, statutes, an	d ordin	ances and with the	conditions of this	permit; unde	rstand th	at the i	ssuance	of th	ie perr	nit cre	ates no	legal li	ability,
I have read the cautionary sta authorized agent, permission	itement regard	ing contract	or finan	cial responsibility of	mation is accurate mathe reverse side	of the last p	ly. I expi	essly 6	grant the	erosi buil	on cor ding i	ntroi o nspect	r constr or, or th	uction ie inspr	permit, ector's
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APPROVAL CONI	DITIONS			ssued pursuant to the penalty. See a					y result	in sı	ıspens	ion or	revoca	tion of	this
New Ros	f -	permit	n onici	penalty. LI See a	mached for con-	aitions or	approva	11.			K				
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FEES: Plan Review \$	·			IT(S) ISSUED			PERMIT	ISSU	ED BY:						
Inspection \$			HV.				Name	Geo	orge	E	ntz	mir	ager	•	
Wis. Permit Seal \$			Elec			I									
Other \$		-	□Plur □Eros	nbing sion Control			Date <u>4</u>	* 400	10	el.		13-	204	- 44(J Z
Total \$	5.00						Cert No.	·							
Distribution: Copy 1 - Issu	ing Jurisdiction	п Сору	2 – Owi	ner/Agent Copy	3 - Inspector				·						

Wisconsin Division of Safety and Buildings

VILLAGE OF COLEAN

Application	No
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Wisconsin Stats. 101.63	101 73	OLÁTRA	DRM BUILDII	ac lekim	IAPPI	LICAT	ION	D1	N T.		O Company London Source	
Wisconsin State. 101.05	, 101.75							Parcel	NO.			
PERMIT REQUI	ESTED	ПСonstr	. []HVAC []	Electric []]	Plumbin	о ПЕ	rosion C	ontrol	Othe	zh.		to the Control of Cont
			Mailing Address									
Owner's Name	1501	THU C FROM	219/21	emar K		00	Hax,	101	71	5-97	62-4	379
Contractor's Name:	ou Friec F	HVAC LIPII	og Lic/Cert#	Mailing A	ddress				Tel.			
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Contractor's Name: Co	on Elec E	HVAC PIL	g Lic/Cert#	Mailing A	ddress		3		Tel.		***************************************	
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PROJECT	Lot area				· · · · · · · · · · · · · · · · · · ·					×17		NAME OF THE OWNER, OWNE
LOCATION	Lorure		Sq. ft.		1/4,	1/4,	of Section	,	T	N, F	E E	E (or) W
Building Address	0 6	Sul	odivision Name			T	Lot No.		Blo	ck No	•	
319 Teleman / Zoning District(s)	C Circ	Zoning Perm	÷ No	Cathaalaa	Front		n	Υ			T	*************
Zoning District(s)	ľ	Zoning Ferni	it Nọ.	Setbacks:	From	ft.	Rear	ft.	eft	ft.	Right	ft,
1. PROJECT	3. OCCUPA	Assessment Constitution of the Constitution of	6. ELECTRICAL	9. HVAC EQU		12. EN	ERGY SOU			processors and the second		
□New PRepair □Alteration □Raze	☐Single Fa ☐Two Fam		Entrance Panel Amps:	☐Forced Air F☐Radiant Base		Fuel Space I		as LP	Oil	Elec	Solid	Solar
☐Addition ☐Move	☐Garage	•	☐Underground	☐Heat Pump		Water I	Itg 🗆					
Other: Krtchen	☐Other:		☐Overhead 7. FOUNDATION		Cond				att or mo	ore in el	ectric sp	ace
2. AREA INVOLVED	4. CONST.	TYPE	Concrete	N Central Air Cond. heating equipment capacity. 13. HEAT LOSS							·	·
Unfin.	□Site-Built		☐Masonry	□ Boiler □ Dwelling unit has 3 kilowatt or more in heating equipment capacity. □ Other: □ 13. HEAT LOSS ■ BTU/H						····		
BsmtSq Ft	□Mfd: □V		☐Treated Wood]					otal Calc	
Living AreaSq Ft		J.S. HUD	Other:		nit Na .	Envelope and Infiltration Losses ("Maximum Allowable						ole
AteaSq Ft	1-Story	• • • • • • • • • • • • • • • • • • •	□Seasonal	Sanitary Permit No.: Heating Equipment Output" on Energy Worksher "Total Building Heating Load" on WIScheck rep								
GarageSq Ft	☐2-Story		Permanent	11. WATER			. BUILDIN					
Deck Sq Ft.	Other:	ment	☐Other:	☐Municipal Ut☐Private On-S		\$ 2	5,000	,00	,			
I agree to comply with all app	licable codes,	statutes, and or	dinances and with the o	conditions of this	permit; unde	rstand tha	t the issuance	e of the n	ermit cre	eates no	legal lia	bility.
express or implied, on the state	te or municipa	lity; and certify	that all the above infor	mation is accurate	. If I am an	owner ap	plying for an	erosion	control c	or const	ruction p	ermit.
I have read the cautionary state authorized agent, permission	to enter the pro	emiser for which	handlar responsionly of	at all reasonable h	or the last p	any prope	essiy grant in Er purpose to	e ounding inspect t	g inspeci he work	tor, or to which	ne inspectis being d	tors done.
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			is issued pursuant to th	e following condi	tions Failu							
APPROVAL COND	TTIONS	permit or ot	her penalty. 🔲 See a	ttached for con	ditions of	approva	l.	· m susp	J1151011 01	101000	mon or u	113
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Municipality Number of Dwelling Location												
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FEES: Plan Review \$		Construction			EWALL	ISSUED BY						
Inspection \$			IVAC		1	Name	George	Ent	zmi	ngei	<u> </u>	_
Wis. Permit Seal \$ Other \$,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Electrical Plumbing			Data 5 -	12. K	Tal	715-	15-962-4402		
	-00		Erosion Control		.	valo	12 14	101.			7 1 0	-
	5,28					Cert No.						_
Distribution: Copy 1 - Issui	ng Jurisdiction	Сору 2-	Owner/Agent Copy	3 - Inspector	·							i

Wisconsin Division
Wisconsin Division of Safety and Buildings

Application No. VILLAGE OF COLFAX 2016-4 UNIFORM BUILDING PERMIT APPLICATION Wisconsin Stats. 101.63, 101.73 PERMIT REQUESTED | Constr. CHVAC | Electric | Plumbing | Erosion Control Other: Mailing Address
305 Dann St. Collax, W1

Lic/Cert# Mailing Address Owner's Name

Terry Moen

Contractor's Name: Con Elec HVAC Pibg FAX# Contractor's Name: Con Elec HVAC Plbg Lic/Cert# Mailing Address Tel. FAX# Contractor's Name: Con Elec HVAC Plbg Lic/Cert# Mailing Address Tel. FAX# Contractor's Name: Con Elec HVAC Plbg Lic/Cert# Mailing Address Tel. FAX# Lot area **PROJECT** Sq. ft. 1/4, _____ 1/4, of Section LOCATION N, R E (or) W Building Address
305 Dann St. Subdivision Name Lot No. Block No. Zoning District(s) Zoning Permit No. Setbacks: Front Rear Left Right ft. ft. 1. PROJECT 3. OCCUPANCY 6. ELECTRICAL 9. HVAC EQUIPMENT 12. ENERGY SOURCE ⊠Repair □Raze New Single Family ☐Forced Air Furnace **Entrance Panel** Nat Gas Fuel Oil Solid Solar □Alteration ☐Two Family Amps: ☐Radiant Basebd/ Panel Space Htg □ Addition ☐Move ☐Garage Underground ☐Heat Pump Water Htg П \Box Other: Oriveway □Other: ☐Overhead ☐Boiler Dwelling unit has 3 kilowatt or more in electric space 7. FOUNDATION Central Air Cond. heating equipment capacity. 2. AREA INVOLVED 4. CONST. TYPE ☐Concrete Other: 13. HEAT LOSS Site-Built Unfin. Bsmt ____Sq Ft ☐Mfd: ☐WI UDC ☐Treated Wood 10. SEWER BTU/HR Total Calculated ☐U.S. HUD Other: ☐Municipal Living Envelope and Infiltration Losses ("Maximum Allowable Area___ Sq Ft 5. STORIES 8. USE ☐Sanitary Permit No.: Heating Equipment Output" on Energy Worksheet: ☐1-Story ☐Seasonal "Total Building Heating Load" on WIScheck report) Garage Sq Ft □2-Story □Permanent 11. WATER 14. EST. BUILDING COST Other: ☐Other: ☐Municipal Utility Deck _Sq Ft. ☐Plus Basement ☐Private On-Site Well I agree to comply with all applicable codes, statutes, and ordinances and with the conditions of this permit; understand that the issuance of the permit creates no legal liability, express or implied, on the state or municipality; and certify that all the above information is accurate. If I am an owner applying for an erosion control or construction permit, I have read the cautionary statement regarding contractor financial responsibility on the reverse side of the last ply. I expressly grant the building inspector, or the inspector's authorized agent, permission to enter the premises for which this permit is sought at all reasonable hours and for any proper purpose to inspect the work which is being done. Terry Donoer DATE SIGNED 5-19-2016 APPLICANT'S SIGNATURE This permit is issued pursuant to the following conditions. Failure to comply may result in suspension or revocation of this APPROVAL CONDITIONS Municipality Number of Dwelling Location FEES: PERMIT(S) ISSUED PERMIT ISSUED BY: ☐Construction☐HVAC☐Electrical☐Plumbing Plan Review Name George Entzminger Inspection Wis. Permit Seal Date ______Tel. __715-962-4402 Other ☐Erosion Control Cert No.

Distribution: Copy 1 - Issuing Jurisdiction Copy 2 - Owner/Agent Copy 3 - Inspector

Wisconsin Division Application No. of Safety and Buildings VILLAGE OF COLFAX 2016-5 UNIFORM BUILDING PERMIT APPLICATION Wisconsin Stats. 101.63, 101.73 Constr. HVAC Electric Plumbing Erosion Control Other: PERMIT REQUESTED Mailing Address + St. Co / Fax, W/ 54730

Lic/Cert# Mailing Address Owner's Name | Scott | Tolinson |
Contractor's Name: | Con | Blec | IVAC | Plbg Tel. 7/5-556-2567 Tel. FAX# Contractor's Name: Con Elec HVAC Pibg Lic/Cert# Mailing Address Tel. FAX# Contractor's Name: Con Elec HVAC Plbg Lic/Cert# Mailing Address Tel. FAX# Contractor's Name: Con Elec HVAC Plbg Lie/Cert# Mailing Address Tel. FAX# Lot area PROJECT Sq. ft. 1/4, _____ 1/4, of Section , T E (or) W N, R LOCATION Building Address Subdivision Name Lot No. Block No. Zoning Permit No. Zoning District(s) Setbacks: Front Rear Left Right ft. 1. PROJECT 3. OCCUPANCY 6. ELECTRICAL 9. HVAC EQUIPMENT 12. ENERGY SOURCE New ☐ Alteration Repair Single Family Entrance Panel ☐Forced Air Furnace Nat Gas LP Oil Elec Solid Solar Space Htg Raze ☐Two Family Amps: ☐Radiant Basebd/ Panel □Addition □Move ☐Garage Underground ☐Heat Pump Water Htg □Boiler □Other: Other: Overhead Dwelling unit has 3 kilowatt or more in electric space (sause 7. FOUNDATION Central Air Cond. heating equipment capacity. 2. AREA INVOLVED 4. CONST. TYPE ☐Concrete Other: 13. HEAT LOSS ☐Site-Built ☐Masonry Unfin. Bsmt Sq Ft ☐Mfd: ☐WI UDC ☐Treated Wood 10. SEWER BTU/HR Total Calculated ☐U.S. HUD ☐Other: ☐Municipal Envelope and Infiltration Losses ("Maximum Allowable Living 8. USE Heating Equipment Output" on Energy Worksheet; Sq Ft 5. STORIES ☐Sanitary Permit No.: Area □1-Story □Seasonal "Total Building Heating Load" on WIScheck report) Sq Ft ☐2-Story □Permanent 11. WATER 14, EST. BUILDING COST Garage ☐Municipal Utility Other: Other: 14,000. Sq Ft. ☐Plus Basement ☐Private On-Site Well I agree to comply with all applicable codes, statutes, and ordinances and with the conditions of this permit; understand that the issuance of the permit creates no legal liability, express or implied, on the state or municipality; and certify that all the above information is accurate. If I am an owner applying for an crossion control or construction permit, I have read the cautionary statement regarding contractor financial responsibility on the reverse side of the last ply. I expressly grant the building inspector, or the inspector's authorized agent, permission to enter the premises for which this permit is sought at all reasonable hours and for any proper purpose to inspect the work which is being done. APPLICANT'S SIGNATURE DATE SIGNED This permit is issued pursuant to the following conditions. Failure to comply may result in suspension or revocation of this APPROVAL CONDITIONS permit or other penalty.

See attached for conditions of approval. ewroavase Municipality Number of Dwelling Location PERMIT(S) ISSUED PERMIT ISSUED BY: FEES: Plan Review □ Construction Name George Entzminger **THVAC** Inspection Wis. Permit Seal □Electrical Date 6-16-16 Tel. 715-962-4402 Plumbing Other ☐Erosion Control Cert No.

Distribution: Copy 1 - Issuing Jurisdiction Copy 2 - Owner/Agent Copy 3 - Inspector

Wisconsin Division										A	pplica	tion N	o.			
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Wisconsin Stats. 101.63,	101 72	UN	IFO	KM	BUILDID	IG PERMI	T APP	LICAT	IION	D	arcel N		<u>~</u>			
Wisconsin Stats. 101.05,	101.75										aicci i	40.				
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Owner's Name	6			M	ailing Addres	\$ + 34	015	!				Tel.	5-2	97-6	678	
Contractor's Name:	on Elec [HVAC	_Plbg	g Li	c/Cert#	Mailing A	ddress		Allegerene et miss au St. en. opt.			Tel.	7/5-	690.9	25 R	
Francy Porto	n FRANC-	o Rom	iod 1 e	26								FAX		27- 1	/	
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Contractor's Name:	n Blec [HVAC	Plbg	g Li	c/Cert#	Mailing A	ddress					Tel.				
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PROJECT	Lot area	So B 1/4 1/4 of Section									<u> </u>	-	-	***************************************		
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Other:	Other:			□Ov	erhead	□Boiler		Dv	elling un	it has 3	kilowa			ectric spa		
Koo I	4 CONET	anather.			UNDATION	☐Central Air ☐Other:	Cond.		equipme	nt capacity.						
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Unfin. BsmtSq Ft					ated Wood	10. SEWER		1				BT	U/HR T	otal Calc	ulated	
Living		U.S. HUD		Oth	ner;	Municipal		Envelo	pe and Ir	filtratio	n Loss	es ("Ma	aximum	Allowab	le	
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GarageSq Ft	☐1-Story ☐2-Story			□Sea	isonai manent	11. WATER			Building T. BUIL			on WI	Scheck	report)		
	☐Other:			Oti		Municipal U			,000		-					
Deck Sq Ft.	☐Plus Bas			17		Private On-								Linut Ba	L.1112.	
I agree to comply with all app express or implied, on the sta	te or municin	ality; and	certify	that all	the above infor	rmation is accurat	te, If I am a	n owner a	pplying f	or an er	osion c	ontrol o	or const	ruction pa	ermit.	
I have read the cautionary sta authorized agent, permission	tement regard	ding contra	ctor fir	nancial	responsibility of	on the reverse sid	e of the last	ply. I exp	ressly gra	nt the b	uilding	inspec	tor, or t	he inspec	tors	
ì					eriin is songin	at an reasonable	noars and it	n any prop					WHICH	s being o	ione,	
APPLICANT'S SIG	NATUR	- Lander	7/1	2000	125	A 11			DAT		manage data					
APPROVAL COND	ITIONS					ne following conductation				result ii	suspe	nsion o	r revoca	tion of th	118	
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		Municipality Number of Dwelli								ng Loca	tion					
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FEES:	S: PERMIT(S) ISSUED PERMIT ISSUE							T ISSUE	D BY:							
Plan Review \$ Inspection \$				Constr FVAC	uction			Name	Geo:	rae	Ent	zmi	nae	r		
Inspection \$ Wis. Permit Seal \$				Electri	,										_	
Other				Plumb				Date Z	1:15	NO T	el	115	-962	-440	2	
Total \$	5.00		LJ!	STOS10	n Control			Cert No)						_	
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Distribution: Copy 1 - Issuing Jurisdiction Copy 2 - Owner/Agent Copy 3 - Inspector

Wisconsin Division				7				Ap	plicati	on No.		***************************************	***************************************				
of Safety and Buildings				GE OF COI					20	16-	7						
		UNIFO	DRM BUILDII	NG PERMI	T APPI	LICAT	NOI				/						
Wisconsin Stats. 101.63	, 101.73							Par	cel No),							
PERMIT REQUI	ESTED	Constr	. HVAC	Flectric []	Plumbin	o []F	rosion (onti	rol (Other							
Owner)'s Name	11			SS/)	. //	<u> </u>	/ C31011 C	,		Tel.							
Owner)s Name Faul (1) Contractor's Name:	++ boc	TIVA O FINI	og Lic/Cert#	R005+1	10/4	10/4	ax ju	7/53	1730	7/5-9	PEY	1-43	368				
				Mailing A	adress				_	Tel.			,				
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Contractor's Name: Co	on [Elec [_HVAC L_PIE	og Lic/Cert#	Mailing A	ddress					Tel.							
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Contractor's Name: ☐Co	on ∐Elec [HVAC □PIb	g Lic/Cert#	Mailing A	ddress					Tel.							
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PROJECT	Lot area Sq. ft1/4,1/4, of Sc																
LOCATION Duilding Address	Sq. ft1/4,								, T		N, R		€ (or) W				
Building Address,	velt	Sui	outvision manne				Lot No.		i	Block No.							
Zoning District(s)		Zoning Perm	it No.	Setbacks:	Front	~	Rear	0	Left			Right	_				
1. PROJECT	3. OCCUP	ANCY	6. ELECTRICAL	9. HVAC EQU	JIPMENT	ft. 12. EN	ERGY SOU	ft, URCE	<u> </u>	i	ît.		fl				
New ☐Repair	Single F		Entrance Panel	Forced Air I	umace	Fue	1 Nat (Gas			lec	Solid					
☐Alteration ☐Raze ☐Addition ☐Move	☐Two Fan ☐Garage	niiy	Amps:	☐Radiant Bas	end/ Panel	Space Water		<u>П</u>									
□Other:	Other:		□Overhead	□Boiler		□Dw	elling unit h	as 3 ki					pace				
2. AREA INVOLVED	4. CONST.	TVPE	7. FOUNDATION Concrete	☐ ☐Central Air (☐Other:	Cond.		equipment of	capaci	ty.								
Unfin.	☐Site-Buil		□Masonry			10171											
Bsmt Sq Ft	□Mfd: □		☐Treated Wood									otal Cal					
Living	5. STORIE	U.S. HUD	Other:	→ :	Municipal Envelope and Infiltration							tion Losses ("Maximum Allowable Output" on Energy Worksheet;					
Area Sq Ft	1-Story	2)	Seasonal	Sanitary Per	IIIIL 340	1	g Equipment Building He	_				•					
GarageSq Ft	□2-Story		Permanent	11. WATER		14. ES	r. Buildin	VG CC	OST								
Deck Sq Ft.	☐Other: ☐Plus Base	ement	Other:	☐Municipal U☐Private On-S		\$ 2	2,000	0	25								
I agree to comply with all app	olicable codes	s, statutes, and o	rdinances and with the	conditions of this	permit; unde	erstand the	at the issuan	ce of t	he pen	nit create	s no	legal li	ability,				
express or implied, on the sta I have read the cautionary sta	te or municip tement regard	ality; and certify	that all the above info	rmation is accurat on the reverse side	e. If I am ar of the last r	owner ap	pplying for a essly grant t	m eros he bui	ion cor Idine i	itrol or c	onstr	uction p	permit,				
authorized agent, permission																	
APPLICANT'S SIG	NATURI	E / L	will	is			DATE	SIG	NED	8-	<u>/-</u> ,	201	16				
APPROVAL COND	ITIONS		is issued pursuant to the					ult in s	uspens	ion or re	voca	tion of 1	this				
ATTROVALCOND		permit or of	ther penalty. See a	attached for con	ditions of	approva	1].										
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							Iunicipality I	Numb	er of D	welling l	Locat	iion					
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FEES: Plan Review \$			PERMIT	I ISSUED E	BY;			-									
Inspection \$			Construction HVAC		Name George Entzminger												
Wis. Permit Seal \$			Electrical		1		-1-20/K						_ 12				
Other \$	1700		Plumbing Erosion Control			Date 0	, solv	_ rel.	·		<i>44</i>	·					
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Wisconsin Division							Applica	ition No.					
of Safety and Buildings				GE OF COI			20	16-8					
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Wisconsin Stats. 101,6	5, 101./3						Parcel N	10.					
PERMIT REQU	ESTED	☐Constr.	ПНVAC П	Electric TF	lumbin	g	Control	Other:					
Owner's Name M.	V Mr	200				Sity AUC	-	Tel	200				
Contractor's Name:	Con Elec F	HVAC TPIL	g Lic/Cert#	Mailing A		J'J /50(,	01-91	7/ <i>3</i> - 7	62-442				
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Contractor's Name:	on Flec F	HVAC Fillio	Lic/Cert#	Mailing Ad	Idrace			Tel.	**************************************				
Contractor 51 tane.			Bio/Cottir	Manning At	idi Ç33			FAX#	Management and Associated to the Control of the Con				
Contractor's Name:	on Flee F	HVAC Dolla	Lic/Cert#	Mailing Ac	Ideana	The second secon		Tel.					
		_	ŀ	Maining At	idress								
A Manag y has it dyes when	Lot area	maranti i situate	Tall region regions research in the first		74			FAX#					
PROJECT LOCATION	Lot area		Sq. ft.		1/4,	1/4, of Section	,1	ľ N, F	E (or) W				
Building Address	C. J. 1	Lue Sub	division Name	,		Lot No.		Block No					
7/6 Univer	51 X J /	Zoning Permi	t No	Setbacks:	Front	Rear	Lef	1	Right				
			Through the selection of the selection o		ft.	ft.	ft,	Rigin ft					
1. PROJECT ☐Repair	3. OCCUP.		6. ELECTRICAL Entrance Panel	9. HVAC EQU		12. ENERGY SC Fuel Nat	URCE Gas LP	Oil Elec	Solid Sola				
☐Alteration ☐Raze	☐Two Fan	· · · · · · · · · · · · · · · · · · ·	Amps:	Radiant Base		Space Htg [
☐Addition ☐Move	Garage	-	Underground	☐Heat Pump									
Other: Roof	Other:		Overhead 7. FOUNDATION	☐Boiler ☐Central Air C	'ond	Dwelling unit heating equipment	has 3 kilowatt or more in electric space						
2. AREA INVOLVED	4, CONST.	TYPE	Concrete	Other:	onu.	13. HEAT LOSS	capacity.						
Unfin.	☐Site-Buil	t	□Masonry										
BsmtSq Ft	☐Mfd: ☐	E .	Treated Wood	10. SEWER				Total Calculated					
Living AreaSq Ft	5. STORIE	U.S. HUD	Other:	☐Municipal ☐Sanitary Pern	de Mais	1 -	tration Losses ("Maximum Allowable at Output" on Energy Worksheet;						
Alea Sq Ft	1-Story	3	☐Seasonal	Dominen A Letin	III 140	"Total Building He							
GarageSq Ft	2-Story		Permanent	11. WATER		14. EST. BUILDI	NG COST						
DeckSq Ft.	☐Other: ☐Plus Base	ement	Other:	☐Municipal Ut ☐Private On-Si		s 7500	, 20						
I agree to comply with all ar	plicable codes	, statutes, and ord	linances and with the o	conditions of this p	ermit; unde	rstand that the issua	nce of the per	mit creates no	legal liability,				
express or implied, on the st I have read the cautionary st	ate or municipa	ality; and certify (hat all the above infor	mation is accurate	. If I am an	owner applying for	an erosion co	ontrol or const	ruction permit,				
authorized agent, permission	to enter the pr	emises for which	this permit is sought	at ali reasonable he	ours and for	any proper purpose	to inspect the	work which	is being done.				
APPLICANT'S SIG	SNATURI	Mal	N Mas	41		DATE	SIGNEI	8-3-	20/6				
APPROVAL CONI	PAULTIONS	This permit i	s issued pursuant to th	e following condit	ions. Failu	re to comply may re							
		permit or oth	er penalty. El Sée a	ttached for con-	litions of	approval.	·	parming and the same of the sa					
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FEES: Plan Review \$			onstruction			PERMIT ISSUED	BY:						
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Wis. Permit Seal \$			lectrical			Date 8-3-16	ral 7	715-962	-4402				
Other \$			lumbing		1,	Date OJ/E	_ 101,/		4402				

Distribution: Copy 1 - Issuing Jurisdiction Copy 2 - Owner/Agent Copy 3 - Inspector

Cert No.

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Owner's Na	me	/ /		ou. [Mailing Addre]Electric [r iuiiibii	ig Lic	brosion	Control	Te.	}		*********			
Contractor's	Name: TT	n □Elec □	TAVAC F	JDIb.	/ / & /* Lic/Cert#	ark Driv Mailing	a (0/4	ax,	wjg	7.73	2 2	15-7	24-6	0148			
Contractor s	rvanc.	OII L_ESIEC L	IIVAC L	_le tog	Lic/Cen#	Mailing /	Address				-						
Contractor's	Nomal En	Files F	TIVLO E	7011	£1.70			T-0-2-W-4			FA	.X#					
Contractor s	Name: LL	on Leiec L	HVAC	Pibg	Lic/Cert#	Mailing A	Address				Tel	[.					
	3.7 Page 1				***************************************						FA	X#					
Contractor's	Name: LL	on LElec L	HAYG [Plbg	Lic/Cert#	Mailing A	Address				Tel	4					
											FA	X#					
Contractor's	Name: C	on Elec [HVAC [Plbg	Lic/Cert#	Mailing A	ddress		***************************************		Tel						
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PROJECT	- 1	Lot area		Sq. ft. 1/4,1/4, of Section						······································							
LOCATIO Building Add	Iress				ision Name		1/4,	1/4,		······································	, T	N, R ock No.		E (or) W			
118 40	-KDFOR	Lest #23	37						Lot No.		BI						
Zoning Distri	ct(s)		Zoning Pe	ermit N),	Setbacks:	Front		Rear	1	eft		Right				
1. PROJECT		3. OCCUPA		6.	ELECTRICAL	9. HVAC EQ	UIPMENT	ft. 12. EN	ERGY SO	ft. URCE	-	ft.		ft			
⊠New ☐Alteration	□Repair □Raze	☐Single Fa	*		trance Panel	☐Forced Air ☐Radiant Bas		Fuel		·		Elec	Solid	Sola			
☐Addition	☐Move ☐Garage				Underground	Heat Pump	cou/ ranci	Space I Water I			<u> </u>		L)				
☐Other:		☐Other:			Overhead	□Boiler		Dwe	elling unit l	as 3 kilow	att or m	ore in el	ectric st) ()			
2. AREA INVO	DLVED	4. CONST.	TYPE		FOUNDATION Concrete	☐ ☐ Central Air ☐ Other:	Pentral Air Cond. heating equipment capacity.										
Unfin.	· · · · · · · · · · · · · · · · · · ·	☐Site-Built			Masonry	LJOING!		13.116	AI LOSS		The second secon						
Bsmt	Sq Ft	□Mfd: □V			Treated Wood	D10/1)							otal Cal	culated			
Living Area	Sa Et	5. STORIES	S. HUD		Other:	☐ Municipal				BTU/HR Total Calculate tration Losses ("Maximum Allowable							
Aica	oq 1·t	1-Story	<u>, , , , , , , , , , , , , , , , , , , </u>		JSE Seasonal	Sanitary Per	mit No.:	Heating	Equipment	at Output" on Energy Worksheet; eating Load" on WIScheck report)							
Garage	Sq Ft	☐2-Story			Permanent	11. WATER			BUILDI			ischeck i	epon)				
Deck	Sq Ft.	☐Other: ☐Plus Baser	nent		Other:	☐Municipal U ☐Private On-S			,000		n-1						
I agree to compl	v with all app	licable codes.	statutes and	d ordina	nces and with the	conditions of this	narmit: undo	rotond the	41		ermit er	eates no	legal liv	hilitu			
I have read the c	autionary stat	ement regardii	ng contracto	n financ	ial responsibility o	mation is accurat	e. If I am an	owner ap	plying for a	n erosion	control o	or constr	uction p	ermit,			
authorized agent	, permission t	to enter the pre	mises for y	hich this	s permit is sought	at all reasonable h	ours and for	ny, 1 expre any prope	essiy grant t er purpose t	he building o inspect tl	s inspec ae work	tor, or the	e inspec s being	ctor's done.			
APPLICAN				2-2-1	A 11 ('ung I			DATE								
APPROVA	L COND	ITIONS	This pen	mit is iss	ued pursuant to th	e following condi	tions. Failu	re to comp	ly may resu								
New		Port	permit or	other p	enalty. See a	ttached for con	ditions of a	approval	<u>. </u>								
Jueco	(20	POV	·				· · · · · · · · · · · · · · · · · · ·										
												· · · · · · · · · · · · · · · · · · ·	Rest	······································			
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								Mu	micipality I	Number of	Dwellir	ıg Locati	on				
D7750									1	7. 1 1	_1						
FEES: Plan Review	\$				ruction		1	PERMIT	ISSUED B	Y:							
nspection	\$						۱ ا	Name George Entzminger									
Wis. Permit Sea	ป \$ \$			Electi	1		- 1							-			
Other	3	D 65		□Plum □Erosi	on Control			Date / 1	12-16	Tel.	/15-	962-	440	2			

Distribution: Copy 1 - Issuing Jurisdiction Copy 2 - Owner/Agent Copy 3 - Inspector

Cert No.

Wisconsin Division of Safety and Buildings

VILLAGE OF COLEAN

Applie	a	tio	n Ì	Vo.	
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		A LIVITAGE	ORM BUILDIN	SE OF COL		TCAT	זאר ט וני		201	6- <i>[O</i>	,				
Wisconsin Stats. 101.63	101 73	OIVIE	OKW BUILDIN	NG PERIVII	1 APPL	JICAI	IOIA	Par	rcel No.						
Wisconsin State. 101.05	101.75] ' "	1001110.						
PERMIT REQUE	ESTED	☐Const	r. HVAC	Electric 🔲	Plumbin	о ПЕ	rosion	Cont	rol O	ther	***************************************				
Owner's Name	į		Mailing Addres	£ 10	10	/ /	10		, [r _{el}					
Epic Wen	<u>2e/</u>		803 €	est Kar	/Koal	, 101	7 4x/	\sim	"	715-9	62-4	1698			
Contractor's Name: Co	on Elec E	HVAC P	lbg Lic/Cert#	Mailing A	ddress					ſel.					
										AX#					
Contractor's Name:	n Elec [HVAC P	bg Lic/Cert#	Mailing A	ddress				7	Γel.					
									I	AX#					
Contractor's Name: Co	va FEleo F	TYVAC FIDI	bg Lic/Cert#	Mailing A	ddress					Tel.					
Contractor s rvanic,	, L15,000 L	J11771C	Die Cora	Ivianing 21	ddioss										
		mp at a state of the state of t								AX#					
Contractor's Name: ☐Co	on □Elec □	HVAC 🕪	bg Lic/Cert#	Mailing A	ddress				1	ľel.					
									Ī	AX#	March Company				
PROJECT	Lot area			0.0						***************************************		**************************************			
LOCATION			Sq. ft.		1/4,	1/4,	of Section	n	, Τ	N,	R	E (or) W			
Building Address	Per lane	Si	ubdivision Name				Lot No.			Block No	J.				
Zoning District(s)	Car / pour	Zoning Peri	nit No	Setbacks:	Front		Rear		Left		Right				
Zoming District(s)		Zoning i Gi	1111 140.	Setbacks.	Tion	ft.	, ,	ft.		ft.	Rigin	ft.			
1. PROJECT	3. OCCUP		6. ELECTRICAL	9. HVAC EQU		_	ERGY S								
□New Repair □Alteration □Raze	Single Fa		Entrance Panel Amps:	☐Forced Air I☐Radiant Base		Fuel Space I		t Gas		Dil Elec					
☐ Alteration ☐ Raze ☐ Addition ☐ Move	Garage	ши	Underground	Heat Pump	cour i allei	Water I		[]							
	Other:		□Overhead	□Boiler											
Other: Roof			7. FOUNDATION		watt or more in electric space										
2. AREA INVOLVED	4. CONST.		Concrete	□Other:		13. HE	AT LOSS	<u> </u>							
Unfin.	Site-Buil		Masonry	10 000000		heating equipment capacity. 13. HEAT LOSS DITHIR Total Colors									
Bsmt Sq Ft		WI UDC U.S. HUD	☐Treated Wood ☐Other:	10. SEWER		BTU/HR Total									
Living Area Sq Ft	5. STORIE		8. USE	-1 1	mit No.:	1				Losses ("Maximum Allowable at" on Energy Worksheet;					
111cu	□1-Story		Seasonal								-)			
GarageSq Ft	☐2-Story		Permanent	11. WATER		14. ES	r. BUILD	ING C	OST						
Deck Sq Ft.	☐Other: ☐Plus Base	amont	□Other:	☐Municipal U ☐Private On-S		8 /	500,	CO	; ,						
I agree to comply with all ap			ordinances and with the	1						it creates r	n legal l	iohility			
express or implied, on the sta	te or municipa	ality; and certi-	fy that all the above infor	rmation is accurate	e. If I am ar	owner ar	plying fo	r an ero:	sion cont	rol or cons	struction	permit,			
I have read the cautionary sta	tement regard	ling contractor	financial responsibility of	on the reverse side	of the last p	oly. I expr	essly gran	t the bu	ilding ins	spector, or	the inspe	ector's			
authorized agent, permission	to enter the pi	remises for wh	ich this permit is sought	at all reasonable r	iours and toi	r any prop	er purpos	e to insp	pect the v	vork which	is being	g done.			
APPLICANT'S SIG	NATURI					•	DATI	E SIG	NED_	7-16	2 K)	16			
APPROVAL CONE		This peng	is issued pursuant to the	e following cond				esult in	suspensio	on or revo	cation of	this			
ATTROVALICONE	1110115	permit or	other penalty. See a	ttached for con	ditions of	approva	1.								
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1100 P K	epay,														
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			*****						· · · · · · · · · · · · · · · · · · ·						
						M	lunicipalit	y Numt	ber of Dw	velling Loo	ation				
							1_	7.	1 1	1					
FEES:		P	ERMIT(S) ISSUED			PERMIT	ISSUED	BY:			 				
Plan Review \$	Construction				~		_								
Inspection \$]HVAC		1		_			minge							
Wis. Permit Seal \$ Other \$]Electrical]Plumbing			Date 9	16-16	, 2 Tel	լ 71	5-96	2-44	02			
]Erosion Control		1			-/k- Tel. 715-962-4402							
	3,00					Cert No.									
Distribution: Copy 1 - Issu				,		.,									

Wisconsin Division of Safety and Buildings

VIII.ACE OF COLEAN

Application No.	THE REAL PROPERTY.
2016- /	1

		TIMITE	ORM BUILDI	SE VE VVI		TOAT	ቦሄሌነ	NT	20	16-	//			
Wisconsin Stats. 101.63	. 101.73	OMEN	JANIYA AD CHALIDAL	AC LEMANT	IALLI		L LO		arcel ì					
(November States 1911)	,								in cor i	10.				
PERMIT REQUI	ESTED	Constr	. HVAC	Electric 🔲	Plumbin	ΩПЕ	rosi	on Con	trol	Othe	r:			
Owner's Name Jeffrey			Mailing Address	5 008	2. 2. 4.	- / //	n	1 - 1				>-32		
Contractor's Name:			og Lic/Cert#	FRE PIUDO	0×245	1014	2/	. 60/		_	-760	1-Jel	/ المد	
Contractor's Name:	on LEicc L	TIVAC LIPIC	og Lic/Ceri#	Mailing A	aaress					Tel.				
										FAX	#			
Contractor's Name: □Co	on Elec [HVAC PIL	g Lic/Cert#	Mailing A	ddress					Tel.				
										FAX	#			
Contractor's Name: Co	on Elec [HVAC [PIL	og Lic/Cert#	Mailing A	ddress			w		Tel.				
										FAX	·#			
Contractor's Name: Co	on Effec E	HVAC MPIK	og Lic/Cert#	Mailing A	ddrees	······································	- ,,,,,	- women and a second		Tel.				
Contractor s runte.	m Chico C	JIMA LIKE	Joseph Dio/Conti	Withing A	ddioss						·	V		
		· · · · · · · · · · · · · · · · · · ·		<u> </u>						FAX	# 			
PROJECT	Lot area		Sq. ft.		1/4,	1/4	of Se	ction	,	r	N, R	, F	(or) W	
Ruilding Address		^/ ,,	Lot		*		ck No.		(01) 11					
Building Address	5/100)		bdivision Name				Lot	110.		DIO	CK 140.			
Zoning District(s)		Zoning Perm	it No.	Setbacks:	Front		Rea		Le	ft		Right		
1. PROJECT	3. OCCUP.	ANCY	6. ELECTRICAL	9. HVAC EQU	HPMENT	ft.	ERC	ft. Y SOURC			ft.		ft.	
□New □Repair	Single Fa		Entrance Panel	Forced Air F		Fue		Nat Gas		Oil	Elec	Solid	Solar	
☐Alteration ☐Raze	☐Two Fam	ily	Amps:	Radiant Base	ebd/ Panel	Space I		[]	IJ	[1]	П	0	П	
	☐Garage ☐Other:		☐Underground ☐Overhead	☐Heat Pump ☐Boiler		Water I		unit has 3	kilowa	tt or mo	re in el	ectric sp	ace	
Roof + Remode)			7. FOUNDATION	Central Air	Cond.	heating	equip	ment capac						
2. AREA INVOLVED	4. CONST.		Concrete	Other:		13. HE	AT L	oss					·····	
Unfin. BsmtSq Ft	Site-Built		☐Masonry ☐Treated Wood	10, SEWER		-				וידים	יי מנאני	latal Clair		
Living		J.S. HUD	Other:	☐Municipal		Envelo	pe and	Infiltration	BTU/HR Total Calculated ion Losses ("Maximum Allowable					
Area Sq Ft	5. STORIE	S	8. USE	Sanitary Pen	nit No.:	1		pment Out		•				
	☐1-Story		☐Seasonal					ng Heating		on WI	Scheck	report)		
GarageSq Ft	☐2-Story ☐Other:		☐Permanent ☐Other:	11. WATER Municipal Ut	tility	14. ES	r. BU	ILDING C	COST					
DeckSq Ft.	☐Plus Base			☐Private On-S	ite Well	\$ 10	10	00.9	Œ.					
I agree to comply with all app express or implied, on the sta	olicable codes	, statutes, and or	rdinances and with the	conditions of this	permit; unde	rstand the	at the i	ssuance of	the ne	rmit cre	ates no	legal lia	bility,	
I have read the cautionary sta	tement regard	ing contractor fi	inancial responsibility of	on the reverse side	of the last p	ly. I expr	essly s	grant the bi	uilding	inspect	or, or tl	he inspec	etor's	
authorized agent, permission		emises for which	hhis permit is sought											
APPLICANT'S SIG	NATURI		y My Ger				DA	TE SIG	ENE) <u> Z</u>	-//-	-201	ko_	
APPROVAL COND	ITIONS	Thes permit	s issued pursuant to the	e following condi	tions. Failu	re to com	ply ma							
ATTROVIDECTIO		permit or of	ther penalty. See a	ttached for con	ditions of	approva) <u>.</u>							
9,				<i>(</i>)			*****							
New Moc	7 7	Kitch	in to thison	m Rema	1.6]									
			A					***************************************			······································	·*************************************		
	,					M	lunicip	ality Num	ber of	Dwellin	g Loca	tion		
								1 7	1 1	1				
FEES:		PE	RMIT(S) ISSUED			PERMIT	1221	1 7. IED RV:						
Plan Review \$					~~ WII									
Inspection \$			HVAC			Name	Ge	orge	Ent	zmiı	nger		_	
Wis. Permit Seal \$ Other \$			Electrical Plumbing		1	Date 9-	17-	20/10 Te	a. 5	715~	962	-440	2	
	100 OO		Brosion Control			•		2/6 Tel. 715-962-4402						
	0,8					Cert No.								
Distribution: Copy 1 - Issui	3 - Inspector													

Wisconsin Division of Safety and Buildings				T7111 T A		JD 4 ZZ		Verrentenses	A		tion N				
		UNII	OR	VILLAG M BUILDIN	SE OF COL IG PERMI		ICAT	IOI	N	20	16-	12	-		
Wisconsin Stats. 101.63	3, 101.73								P	arcel 1	∛o.				
PERMIT REQU	ESTED	Cons	tr. []HVAC □I	Electric P	lumbing	д ПЕ	rosi	on Con	trol	Othe	r:			
Owner's Name / NU	+50n			Mailing Address			-						-30.	27	
Contractor's Name:		HVAC 🔲	Plbg	Lic/Cert#	Mailing Ac						Tel.	, , , , ,			
											FAX	;#			
Contractor's Name:	on Elec [HVAC [Plbg	Lic/Cert#	Mailing Ac	ldress			~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		Tel.				
				, ,					- 114.78 4		FA	(#			
Contractor's Name:	on Elec [HVAC []	Plbg	Lic/Cert#	Mailing Ac	ldress				Tel.					
Contract Name To	F71 F	TIVAC E)]]	Lic/Cert#	Mailin a A	FAX#					.# 				
Contractor's Name:	on Listec L	HVAC [F	10g	Lic/Ceru	Mailing Ad	aress					Tel.	·4i		· · · · · · · · · · · · · · · · · · ·	
PROJECT	Lot area	Manufacture									FAA	.#		·	
LOCATION			Sq.		***************************************	1/4,	1/4,			, .		N, R	Е	(or) W	
Building Address 310 Celler 31	۷,	S	Subdiv	ision Name				Lot	No.		Blo	ck No.			
Zoning District(s)		Zoning Per	mit N	o.	Setbacks:	Front	ft.	Rea	ır ft	Le	ft		Right	Δ.	
1. PROJECT	3. OCCUP	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		ELECTRICAL	9. HVAC EQU		12. EN		Y SOURC	E		ft.	·	ft.	
☐New ☐Repair ☐Alteration ☐Raze	☐Single Fa			ntrance Panel mps:	☐Forced Air Fi		Fuel Space I		Nat Gas	LP	Oil	Blec	Solid	Solar	
☐Addition ☐Move	☐Garage	,		Underground	☐Heat Pump		Water	Htg	L)	[]	[]	[]		П	
Mother: Lean Concrete To	Other:			Overhead FOUNDATION	☐Boiler ☐Central Air C	ond			unit has 3 ment capa		tt or m	ore in el	ectric spa	ace	
2. AREA INVOLVED	4. CONST.	. TYPE		Concrete	☐Other:		13. HE								
Untin.	Site-Buil			Masonry	10 000000										
BsmtSq Ft Living	Mfd:	U.S. HUD		Treated Wood Other:	10. SEWER	· · · · · · · · · · · · · · · · · · ·	Envelo	pe and	l Infiltratio	n Loss			otal Calc Allowab		
Area Sq Ft	5. STORIE	ES		USE	☐Sanitary Pern	nit No.:	Heating	g Equi	ipment Out	ent Output" on Energy Worksheet;					
- 0.77:	□1-Story			Seasonal	44 277 (00000					Heating Load" on WIScheck report)					
Garage Sq Ft	☐2-Story ☐Other:		,	Permanent Other:	11. WATER ☐Municipal Ut	ility			ILDING (
Deck Sq Ft.	☐Plus Bas			***	☐Private On-Si				0, 8						
I agree to comply with all age express or implied, on the st	ate or municip	ality; and cert	ify that	t all the above infor	mation is accurate	. If I am an	owner ar	plyin	g for an er	osion c	ontrol o	or consti	uction p	ermit	
I have read the cautionary st authorized agent, permission	atement regard to enter the p	ding contracto remises for w	r financ hich thi	cial responsibility of is permit is sought:	on the reverse side at all reasonable h	of the last p ours and for	ly, I expr any prop	essiy er pu	grant the b rpose to ins	uilding pect th	inspec e work	tor, or ti which i	ne inspects being o	tor's ione.	
APPLICANT'S SIG	SNATUR	E Lw	i	Knots	~~ <i>_</i>	/		DA	TE SIG	SNE	0 10	~ <i>3</i> ~	160		
APPROVAL CONI	DITIONS			ssued pursuant to th					ay result ir	suspe	nsion o	r revoca	tion of th	nis	
		permit or	other	penalty. See a	ttached for con-	litions of	approva	ıı.							
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							M	funiçi	pality Nur	ber of	Dwelli	ng Loca	tion	-	
		······································	30375 ×	March Address			nun: ~	1 700		1 1	_1_		.,,	···	
FEES: Plan Review \$				OTT(S) ISSUED PERMIT ISSUED BY:											
Inspection \$		1 1	LOD	struction		1					Entzminger				
Wis. Permit Seal \$		i	□HV/				Name	Ge	orge	Ent	zmi	ngei			
Other \$				AC etrical					orge -/6 Te						
Other \$	10,00		□HV/ □Elec □Plun	AC etrical				10-3	?-/6_Te					- 2	

Distribution: Copy 1 - Issuing Jurisdiction Copy 2 - Owner/Agent Copy 3 - Inspector

Wisconsin Division of Safety and Buildings		TIN)	TEO.	VILLA RM BUILDI	GE OF CO		IICAT	TIANI	F		ation 1 016 -	No.	·	
Wisconsin Stats. 101.63	, 101.73				IAC LEWIAN	.I ATT	LICA.	IIOIY	F	arcel	No.	ms are		
PERMIT REQUI	ESTED	☐Co:	nstr.	□HVAC □	Electric 🔲	Plumbin	д ПЕ	Erosio	ı Cor	ntrol	Oth	er:		
Owner's Name	veel e	* /			58 1251 (1	16.	(, ,	10	(172)	~ 3	Tel	CAN		200
Contractor's Name:	on Dilec	HVAC	□Plbg	Lic/Cert#	Mailing A	ddress			775		Tel	. <u>.5-41</u>	9-0 ₀	<i></i>
											FA	X#		W.
Contractor's Name:	on Elec	□IVAC	□Plbg	Lic/Cert#	Mailing A	ddress					Tel.			
											FAX	X#		
Contractor's Name: ☐C	on Elec	□IVAC	Plbg	Lie/Cert#	Mailing A	ddress					Tel.			•
											FAX	X#		
Contractor's Name: C	on Elec	□HVAC [_Plbg	Lic/Cert#	Mailing A	ddress			***************************************		Tel.			
											FAX	X#		(12)
PROJECT LOCATION	Lot area		S	Sq. ft.	2 10 Common No.	1/4,	1/4,	of Secti	on		Т	N, R	E	E(or) W
Building Address 808 / +v5/25	<i>-1</i>		Subd	ivision Name				Lot No		-		ock No.		
Zoning District(s)	,	Zoning I	Permit	No.	Setbacks:	Front		Rear		Le	ft		Right	
1. PROJECT	3, OCCUI	PANCY	1	6. ELECTRICAL	9. HVAC EQU	DPMENT	ft. 12. EN	ERGY S	ft.			n.		ft.
New ☐Repair ☐Alteration ☐Raze	ew Repair Single Family				☐Forced Air I☐Radiant Base		Fue	l N	at Gas	LP	Oil	Elec	Solid	Solar
☐Addition ☐Move	□Garage		1	Amps: Underground	☐Heat Pump	☐Heat Pump Water Htg								
Roof	□Other:			Overhead 7. FOUNDATION	☐ ☐Boiler ☐ ☐ Central Air (ond.	□Dw heating	elling un equipme	it has 3	kilowa	tt or m	ore in el	ectric spa	ace
2. AREA INVOLVED	4. CONST		1	Concrete	Other:			AT LOS		City.				
Unfin. BsmtSq Ft	☐Site-Bui ☐Mfd: ☐			☐Masonry ☐Treated Wood	10. SEWER		-				DT	ilian T		
Living		U.S. HUD		Other:	Municipal		Envelo	pe and In	filtratio	n Losse	B1 es ("M:	aximum	otal Calc Allowab	ole
Area Sq Ft	5. STORII	ES		B. USE Seasonal	Sanitary Peri	nit No.:		g Equipm						
Garage Sq Ft	□2-Story			Permanent	11. WATER	·		Building F. BUIL			on WI	Scheck i	report)	
DeckSq Ft.	□Other; □Plus Bas	ement]Other:	☐Municipal Ut ☐Private On-S		s 4	500	22	*****				
I agree to comply with all app express or implied, on the stat I have read the cautionary stat authorized agent, permission	te or municir tement regard	anty; and co ding contrac	ertny th tor fina	at all the above infor neial responsibility c	mation is accurate on the reverse side	. If I am an of the last n	rstand the owner ap	at the issu oplying for	ance of	osíon co	ontrol c	or constr	uction pe	ermit,
APPLICANT'S SIG	NATUR		<u> </u>	Housen	//								-2011	
APPROVAL COND		This po permit	ermit is or othe	issued pursuant to the penalty. See a	e following condi ttached for con-	tions, Failu ditions of :	re to comp approva	ply may 1 I.	esult in	susper	ision oi	r revocat	ion of th	nis
Wew Room	<i></i>					t								
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							1 ***	cipan	., rann	oci Of I	- weiiii)	ig Local	I/III	

1 7. 1 1 1

Date 10-28-16 Tel. 715-962-4402

Name George Entzminger

PERMIT ISSUED BY:

Cert No.

Distribution: Copy 1 - Issuing Jurisdiction Copy 2 - Owner/Agent Copy 3 - Inspector

PERMIT(S) ISSUED

☐Construction

□HVAC

☐Electrical
☐Plumbing
☐Erosion Control

FEES:

Other

Plan Review

Inspection Wis, Permit Seal

1

POOLED CHECKING ACCOUNT

Accounting Checks

Posted From: 12/12/2016

Thru: 12/25/2016

From Account: Thru Account:

		., ==, ====	
Check Nbr	Check Date	Payee	Amount
73481	12/15/2016	AGSTAR FINANCIAL	205.43
73482	12/15/2016	ALPHA MEDICAL EQUIPMENT, INC.	106.52
73483	12/15/2016	BAUER BUILT TIRE	229.80
73484	12/15/2016	CEDAR COUNTRY CO-OP	564.00
73485	12/15/2016	CHARTER COMMUNICATIONS	190.20
73486	12/15/2016	COLFAX COMMUNITY FIRE DEPT	690.00
73487	12/15/2016	COLFAX MESSENGER	380.00
73488	12/15/2016	COMMERCIAL TESTING LAB	389.00
73489	12/15/2016	DIGGERS HOTLINE	25.60
73490	12/15/2016	DUNN CO HIGHWAY DEPT	99.45
73491	12/15/2016	DUNN COUNTY REGISTER OF DEEDS	51.50
73492	12/15/2016	DUNN COUNTY SOLID WASTE DIVISION	1,362.40
73493	12/15/2016	DUNN COUNTY TREASURER	485.12
73494	12/15/2016	DUNN ENERGY COOPERATIVE	89.00
73495	12/15/2016	DYNAMITETECH	20.00
73496	12/15/2016	EAU CLAIRE PRESS COMPANY	397.86
73497	12/15/2016	EXPRESS MART	497.34
73498	12/15/2016	GEORGE ENTZMINGER	100.00
73499	12/15/2016	HAWKINS, INC.	990.90
73500	12/15/2016	INDIANHEAD FEDERATED LIBRARY SYSTEM	427.04
73501	12/15/2016	KARL'S CHEVROLET	46.20
73502	12/15/2016	KYLES MARKET	11.98
73503	12/15/2016	MEDICA CLAIMS	70.32
73504	12/15/2016	MEDPRO MIDWEST GROUP	128.00
73505	12/15/2016	ORVILLE LARSON	30.00
73506	12/15/2016	POWERPLAN	603.86
73507	12/15/2016	STREICHER'S INC	264.00
73508	12/15/2016	TIM SWENSON	63.00
73509	12/15/2016	VIKING DISPOSAL	154.00
73510	12/15/2016	WATER CARE SERVICES	31.50
73511	12/15/2016	WI SCTF	63.62
73512	12/15/2016	WRWA	370.00
73513	12/15/2016	YOUNG ACTIVE VENTURES, LLC	400.00

12/22/2016

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ACCT

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POOLED CHECKING ACCOUNT

Thru:

Accounting Checks

Posted From: 1

12/12/2016

12/25/2016

From Account: Thru Account:

Check Nbr	Check Date	Payee		Amount
73514	12/15/2016	ZOLL MEDICAL CORP		291.10
73515	12/16/2016	ARAMARK UNIFORM SERVICE, INC		280.64
73516	12/16/2016	CBS SQUARED, INC		298.99
73517	12/16/2016	E.O. JOHNSON		68.00
73518	12/16/2016	GP DESIGNS		216.25
73519	12/16/2016	INDIANHEAD TRUCK EQUIPMENT/NAPA		452.96
73520	12/20/2016	KATHLEEN SCHARLAU		400.00
EFTPS	12/15/2016	EFTPS-FEDERAL-SS-MEDICARE		5,852.07
WIDOR	12/15/2016	WI DEPARTMENT OF REVENUE		165.76
WIDOR	12/15/2016	WI DEPARTMENT OF REVENUE		1,714.84
AMAZON	12/20/2016	AMAZON.COM		291.47
BREMER	12/12/2016	CARDMEMBER SERVICE		853.94
WIDCOMP	12/15/2016	WISCONSIN DEFERRED COMPENSATION		155.00
VERIWIRE	12/16/2016	VERIZON WIRELESS		304.24
WEENERGIES	12/12/2016	WE ENERGIES		14.70
			Grand Total	20,897.60