#### Village of Colfax Village Board Meeting Monday, July 9, 2018 @ 7 p.m. – Regular Board Meeting Village Hall

613 Main Street, Colfax, WI 54730

- 1. Call to Order
- 2. Roll Call
- 3. Public Comments
- 4. Communications from the Village President
- 5. Consent Agenda
  - a. Minutes
    - Regular Board Meeting Minutes –June 25, 2018
  - b. Training Request none
  - c. Facility Rental none
  - d. Licenses
    - i. Operator's License Taliah Eiseth Cenex July 9, 2018 to June 30, 2019
    - ii. Operator's License Dailyn Mortenson Express Mart July 9, 2018 to June 30, 2019
    - iii. Operator's License Cheyanne Hawkins The Blind Tiger July 9, 2018 to June 30, 2019
    - iv. Operator's License Tarris Turner- American Legion Post 131–July 9, 2018 to June 30, 2019
    - vi. Chicken License Sarah Teele July 9, 2018 to June 30, 2019
    - vii. Chicken License- JoAnn Mayfield July 9, 2018 to June 30, 2019
- 6. Consideration Items
  - a. Vietnam Veterans Memorial update
  - b. Request to purchase scrap meters from the Village of Colfax
  - c. Rescue Squad Medic 7 Maintenance discussion
  - d. Operator's License application update consideration
- 7. Review/Approval Bills June 25, 2018 to July 8, 2018
- 8. Committee/Department Reports (no action)
  - a. Building Permits- June 2018
  - b. Police Department June 2018 Report
  - c. Rescue Squad June 2018 Report
  - d. Village Administrator-Clerk-Treasurer Report
- 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 - June 25<sup>th</sup>, 2018

On June 25<sup>th</sup>, 2018, the Village Board meeting began at 7:00 p.m. at the Village Hall, 613 Main Street, Colfax, WI 54730. Members present: Village President Gary Stene, Trustees Halpin, Davis, Wolff, Jenson, K. Burcham and M. Burcham. Others Present: Erick Turner with the Dunn County Economic Development Group, Herbert and Beverly Sakalaucks representing the Colfax Railroad Museum, Rick Johnson, Public Works Director Bates, Administrator-Clerk-Treasurer Niggemann and LeAnn Ralph with the Messenger.

**Public Appearances** – Turner talked about a focus that the Dunn County Economic Development has right now, Talent coming and/or staying in Dunn County. Through surveys, it was discovered that poor broadband was a reason people were not interested in living in Dunn County. Typically a home with good broadband will sell at approximately 3 percent more than a house with poor broadband. A business is typically an 8 percent difference.

**Regular Board Meeting Minutes – June 11, 2018** – A motion was made by Trustee Halpin and seconded by Trustee Jenson to approve the minutes from the June 11<sup>th</sup>, 2018 Regular Board meeting. Voting For: Trustees K. Burcham, M. Burcham, Jenson, Wolff, Davis, Halpin, and Stene. Voting Against: none. Motion carried.

#### Licenses

July 1, 2018 to June 30, 2019 – Domesticated Chickens License – Heather Pyka - A motion was made by Trustee Halpin and seconded by Trustee Wolff to approve the chicken license for Heather Pyka for July1, 2018 to June 30, 2019. Voting For: Trustees Halpin, Davis, Wolff, Jenson, M. Burcham, K. Burcham and Stene. Voting Against: none. Motion carried.

#### July 1, 2018 to June 30, 2019 - Operator's Licenses

Lisa Smestuen, Evia Gehrman, Mary Roehl, Jasmine Hanson, Michael Buchner, Mark Johnson, Shanna Sundstrom, Seth Sikora, Alexandra Popple, Angela Swenby, Gary Stene, Cary Davis, Deborah Huebsch, Peggy Wallace, Jessica Checkalski and Sally Steinke.

A motion was made by Trustee Wolff and seconded by Trustee Halpin to approve the Operator's Licenses for July 1, 2018 to June 30, 2019 for all requests listed above. Voting For: Trustees K. Burcham, M. Burcham, Wolff and Halpin. Abstained: Trustees Jenson, Davis and Stene. Voting Against: none. Motion carried.

#### **Consideration Items**

Planning Commission Recommendation-Soo Park – Turner spoke in favor of the Railroad Museum getting the Soo Park land. He linked the Museum with tourism and feels that land contribution would be a great asset to the Colfax Railroad Museum. Sakalaucks gave a list of items that the Railroad Museum has been working on. Items that are expected to be completed this summer are: the mini track through Dunn County Foundation Grant funds, speeder shed and fencing, the blue rail car siding, the red caboose and the green car's interior lumber. 2018-2019 school year the Steam Engine will possibly be a high school project.

The Planning Commission's recommendation was to not accept the offer of \$3,500 for Outlot 1 and Outlot 2, Soo Park.

A motion was made by Trustee K. Burcham and seconded by Trustee Halpin to go with the recommendation of the Planning Commission to not accept the offer of \$3,500 for Outlot 1 and Outlot 2 until a business plan is developed with a timeline. Voting For: Trustees K. Burcham, M. Burcham, Jenson, Wolff, and Halpin. Voting Against: Trustees Davis and Stene. Motion carried.

**Street Opening Fees** – A motion was made by Trustee K. Burcham and seconded by Trustee Davis to bill back the actual cost to the homeowner for the street opening fees. Voting For: Trustees K. Burcham, M. Burcham, Jenson, Wolff and Davis. Voting Against: Trustees Halpin and Stene. Motion carried.

Dairy State Bank Resolutions 2018-03 to 2018-08 -Name Change — Dairy State Bank requires a new resolution to recognize the name change from Anne Scheiber to Anne Jenson. A motion was made by Trustee M. Burcham and seconded by Trustee Halpin to approve the name change for the Resolutions 2018-03 to 2018-08. Voting For: Trustees Halpin, Davis, Wolff, M. Burcham and K. Burcham. Abstained: Trustees Jenson and Stene. Voting Against: none. Motion carried.

Review/Approval – Bills –June 11, 2018 to June 24, 2018 – A motion was made by Trustee Halpin and seconded by Trustee M. Burcham to approve the bills for June 11, 2018 to June 24, 2018. Voting For: Trustees Halpin, Davis, Wolff, Jenson, M. Burcham, K. Burcham and Stene. Voting Against: none. Motion carried.

Adjourn – All business was discussed. Meeting adjourned at 8:13 p.m.

Gary Stene, Village President

Attest:

Lynn Niggemann

Administrator-Clerk-Treasurer

APPROVED

## July 1, 2018 - June 30, 2019

6-11-18

# Application for License to Serve Fermented Malt Beverages and Intoxicating Liquors Fee - \$10.00

To the _	Clerk	of the_	Village	of	Colfax	Wisconsin
Beverages a and all acts regulations,	and Intoxicating Liquo amendatory thereof	ors, subject to the ling and supplementary al, affecting the sale of	nitations imp  thereto, an	oosed by Sected hereby agreed	2019 , inclusive (unless sooner tion 125.32(2) and 125.68 (2) of e to comply with all laws, resorts if a license be granted to me,  Signature of Applican	f the Wisconsin Statutes olutions, ordinances and
	the following qu	. 0 -		etely:		
Name of App Address of A	14.00	75 510 <sup>th</sup>	\ <u>'</u>	- Men	omonie, WI 547	<u> </u>
	en convicted of any fe		any law of th	e State of Wis	consin or of the United States?	
Date of such	conviction					
Name of Cou	ırt <u> </u>					
Nature of off	ense					
Have you bee	en convicted or violati	ng any license law or	r ordinance re	egulating the sa	ale of beverages or intoxicating li	quors?
				97	ili R. For	
STA	ATE OF WISCONSIN,	ss,County.		·	Signature of Applicant	
person who m	Tali F	isch	for an operat	or's license; th	, being first duly sworn at all the statements made by the	on oath says that he is the applicant are true.
Subscr	ibell and sworn to be f	ore me this	Oth	day of	May, 2018	H. Dost
Subscriber	NOTAPL NOTAPL NOTAPL	overementalist.		_	Signature of Ap	pplicant
Notary Public,	Dunn	County	, Wis.			
Commission Ex	xpires: 10-23	-20 				

#### 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 Taliah Rose Eisth	RECEIVED
Business/Organization Name Synergy Cooperative	MAY 2 4 2018
Full Prior Names (nicknames, maiden names, etc. NIA	— Village of Colfax
Date of Birth , Place of Birth ) Phone	
Sex_ Race Height Weight	<del></del>
Social Security No Driver's License No	<del>-</del>
Have you ever been arrested for, or convicted of any laws, including traffic? No If yes, list offense, date and place occurring.	<u> </u>
List prior addresses for the past five years E5771 800th Ave Menomonic WI	<u>5</u> 4751
List three personal references, not related to you (no co-workers). Include name, address & pho 1) Hally Booth N8803 590th five Colfax WI 54730  2) Krist, Winness and university Ave #17 Colfax WI 54730  3) Amy Trepton 170 13:nd) of Reedsburg WI 53759  Have you ever been a member of the Military Service? No Discharge?  Education- include name of High School, location, grade completed and any training beyond high Menomonic High School 17th Grade  UW Platteville Bachelor of Science Degree.  I certify that I am familiar with the laws, ordinances and regulations, and hereby agree, if granter	_ _ _ _ gh school.
obey all provisions of such laws. I further certify that all information included in this application and complete to the best of my knowledge.	is true, accurate
Signature Tali R. Tom Date 5/10/18	
Official Use Only Polony This Line	The state of the s
Official Use Only-Below This Line	
Date Received 6/34/17 Date Approved 5/35/17 Date Denied	
Researcher CHIEF OF FOR in Approving Officer Signature Approving Officer Signature	Control of the Contro

# July 1, 2018 - June 30, 2019 Application for License to Serve Fermented Malt Beverages and Intoxicating Liquors Fee - \$10.00

						RECEIVED
						JUN 2 5 2018
To the Clerk		of the_	Village	of	Colfax	<u>VMägændi</u> Colfax
Beverages and Intoxicating	Liquors, subjec ereof and supp	ot to the lin elementary g the sale o	nitations impo thereto, and	sed by Sectio hereby agree t	n 125.32(2) and 125.68 ( to comply with all laws	
Answer the following	questions	fully an	id comple	tely:		
Name of Applicant $\mathcal{D}_{a}$	4 11	1 .	50N			
Address of Applicant	9364		Je Poa	d 40	colfax C	Vi 54730
Have you been convicted of	any felony or of	violating a	any law of the	State of Wiscon		es?
Date of such conviction	e 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
Date of such conviction						
Name of Court	sec-					
	iolating any lice	ense law or	ordinance reg	****	of beverages or intoxicati	ing liquors?
Name of Court  Nature of offense  Have you been convicted or v	iolating any lice	ense law or	ordinance reg	****	of beverages or intoxicati	
Name of Court  Nature of offense  Have you been convicted or v	0	ense law or	ordinance reg	****	-	
Name of Court  Nature of offense  Have you been convicted or v	osin,	SS.	ordinance reg	****	of beverages or intoxicati	
Name of Court  Nature of offense  Have you been convicted or v	SIN, County	ss.	Sov.	ulating the sale	of beverages or intoxication of beverages or intoxication of the second	cant
Name of Court  Nature of offense  Have you been convicted or v  STATE OF WISCON  Daily	NSIN, County he foregoing ar	ss.	Som for an operator	Unating the sale	Mackets or intoxication of beverages or intoxication of beverages or intoxication of the signature of Appliance of Applian	cant
Name of Court  Nature of offense  Have you been convicted or v  STATE OF WISCON  Dunw  Lacil 44  Decrease who made and signed to	NSIN, County he foregoing ar	ss.	Som for an operator	Unating the sale	Moustand Signature of Appli  being first duly swall the statements made b  Tune  2  Dewlyn Usuku	cant  orn on oath says that he is the y the applicant are true.

#### 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.

TO TE. IT they received		
Full Name-First, M	Middle, Last Dulyn Antrna Mortens	on
Business/Organizat	tion Name Express uart	
Full Prior Names (r	nicknames, maiden names, etc.	
Date of Birth	Place of Birth Phone	
Sex	Race Height Weight,	
Social Security No.	Driver's License No	
If yes, list offense,	n arrested for, or convicted of any laws, including traffic?	
List prior addresses	s for the past five years $N/k$	
1) ( ) Could be seen 1) ( ) Thomas Could be seen 1) ( ) Have you ever been Education include	n a member of the Military Service? <u>Ves</u> Discharge? <u>No</u> name of High School, location, grade completed and any training be school. 12 acade	beyond high school.
I certify that I am fa obey all provisions and complete to the	Familiar with the laws, ordinances and regulations, and hereby agrees of such laws. I further certify that all information included in this are best of my knowledge.  Date 06/25	, if granted a license, to pplication is true, accurate
Official Use Only-	Below This Line	
Date Received 💩	Date Approved 6/25/12 Date Denied	
Researcher Cu. El	FOR Tolone Approving Officer Signature	-der

# SELER SERVER CERTIFICATION **MISCONSIN**

Trainee Name: Dailyn Mortenson

Date of Completion: 06/24/2018

School Name: 360training.com, Inc.

Certification #: WI-82696

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 6801 N Capital of Texas Hwy, Suite 150 Austin, TX 78731 P: 877.881.2235

# July 1, 2018 - June 30, 2019 Application for License to Serve Fermented Malt Beverages and Intoxicating Liquors Fee - \$10.00

						RECEIVED
To the	Clerk	of the_	Village	of	Colfax	JUN 2 5 2018
and all acts a regulations, Fe	d Intoxicating Liquors mendatory thereof at	s, subject to the lind and supplementary affecting the sale of	nitations impo thereto, and	sed by Sec hereby agre	2019 , inclusive (unless sooner tion 125.32(2) and 125.68 (2) of the to comply with all laws, resorts if a license be granted to me,	olutions, ordinances and
Answer th	e following ques	stions fully ar	ıd complet	ely:	Signature of Apprecia	
Name of Appli		anne (		ins	·	
Address of App	plicant $(2 9 )$	s. Cana	157.	Cho	ppera Pall	2 M1 [4139
Have you been	convicted of any felo	ny or of violating	any law of the	State of Wis	sconsin or of the United States?	
Date of such co	onviction				-1,	
Name of Court						
Nature of offen	1Se	gy la Ye				**************************************
Have you been	convicted or violating	any license law or	ordinance regu	ulating the s	ale of beverages or intoxicating li	quors?
person who made	TE OF WISCONSIN,  MMAN  Me and signed the foregoed and sworn to before	$\sim$	MNS for an operator	's license; th	Signature of Applicant  being first duly sworn of the statements made by the   Twee 20	on oath says that he is the applicant are true.
Notary Public, _ commission Expi	La Rue Dunn res: 8-27	County	, Wis.	J. I.	Signature of Ap  Signature of Ap  NARY ZSNO  PUBL SIGNATURE  PUBL SIGNATURE  NOTATE OF WHATELER  NOTATE OF	plicant

#### 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 Cheyanne Mane Hauxins
Business/Organization Name The Bund Tiget
Full Prior Names (nicknames, maiden names, etc.
Date of Birth Place of Birth Phone
SexRace, HeightWeight
Sex Race, Height Weight  Social Security No Priver's License 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 8544 Dun X, Chippuno Falls. 54729 7245th Ave Ity Eau Claid 54703, (elaw. canal St CF. 4729
List three personal references, not related to you (no co-workers). Include name, address & phone number  1) Note Andrew - 45 to 7453 Devina Breden  2) 1855 (alle 1904 1406 Teff Hedler  3) Kali Krumenawer -
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.  Lingpewa Falls High School- diploma  Out C- as such as
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 and complete to the best of my knowledge.  Signature  Date  Date
Official Use Only-Below This Line
Date Received 6/25/18 Date Approved 6/25/18 Date Denied
Researcher With OF Holive Approving Officer Signature Walnut

# July 1, 20 2 - June 30, 20 28

## Application for License to Serve Fermented Malt Beverages

		and Intoxicat	Fee - \$10.00		
4	*				JUN 28 2018
To the	Clerk	of the Village	of	Colfax	VillagevoscGalfa
Beverages an and all acts a regulations, Fe	d Intoxicating Liquo imendatory thereof ederal, State, or Local	ense to serve, from July 1, 2017 ors, subject to the limitations impo and supplementary thereto, and l, affecting the sale of such bevera	osed by Section 12 hereby agree to co	5.32(2) and 125.68 (2) mply with all laws, re	of the Wisconsin Statutes solutions, ordinances and
I certifi	y that I am <u>73</u>	_ years of age.	Parsi	Signature of Applican	uner
Answer th	e following que	estions fully and complet	ely:		
Name of Applic	cant TARRI	s L. TARNER			
Address of App	olicant <u>510</u>	E. 4TH AVE, CO	DLFAX, W	54730	
		ony or of violating any law of the		r of the United States?	
No FE	ELONY - "	TRAFFIC VIOLE	ATIONS"		
Date of such cor	nviction 198				
Name of Court	COLFA	x - DUNN	COUNT	)	
Nature of offens	e Speed	ING - DWI			
Have you been c	convicted or violating	any license law or ordinance regu	lating the sale of bev	verages or intoxicating li	quors?
STATE	OF WISCONSIN,		Parris	Signature of Applicant	mer
Dar	<i>າ</i> //	ss. County.			
Tarri		•		haing first duly syom a	n oath says that he is the
person who made	and signed the foreg	oing application for an operator's	license; that all the	statements made by the	applicant are true.
Subscribed	and sworn to before	me this 2845	Mar	Applicant sign he	Yurver
day of JU	rne 20	18		Applicant sign ite	
Shu Notary Public,	le Ru Duni My com	ncounty, Wis. m. Lypi'res	THE HOLD AND THE	ARY PUBLICATION OF ARY	MISNO WILL
	8	27-18		White OF White	

#### 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. TARRIS LET TURNER Full Name-First, Middle, Last Business/Organization Name AMERICAN LEGION POST 131, COLFAX Full Prior Names (nicknames, maiden names, etc. TARRY TERRY Date of Birth Place of Birth Phone Race\_\_\_\_\_Height\_\_\_\_\_Weight\_\_\_\_ Social Security No. \_\_\_\_\_ Driver's License No. \_\_\_\_\_ Have you ever been arrested for, or convicted of any laws, including traffic? YES If yes, list offense, date and place occurring. Dwi 1987-1999 wisc - SPEEDING 2000 Wi List prior addresses for the past five years N/A List three personal references, not related to you. Include name, address & phone number 1) CHRIS LARSEN, E3538 STATE 170, COLFAX, WI 54730 2) TOM DUNBAR, 502 EVERGREEN, COLFAX, WI 54730 3) MARK NELSON, 6527 35TH ST, ELK MOUND, WI 54739 Have you ever been a member of the Military Service? <u>VES</u> Discharge? <u>Ret</u>. Education- include name of High School, location, grade completed and any training beyond high school. 11 YHS YANKTON SD - COLLEGE DELMAR CORPUS CHRISTI, TX UNIV OF NEBR AT OMAHH, NEBR (BOID NOT GRAD) 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 and complete to the best of my knowledge. Signature //arri 6/35/18 Official Use Only-Below This Line Date Approved 6/08/18 Date Denied Date Received Octor Approving Officer Signature Researcher CHEF of L

# Village of Colfax

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

# July 1, 2018 to June 30, 2019 License Application for Keeping Domesticated Chickens

RECEIVED
JUN 2 5 2018

· · · · · · · · · · · · · · · · · · ·	Domesticated Chickens	JUN 2.5 2018
\$10.00 (no	on-refundable application fee)  (please print)	Village of Colfax
1. Name of Applicant Sanh Teele		- Contax
2. Address 610 E. River St	Colfax WI	
3. Phone 920 371 5493	V	
4. Parcel Number - 17111-2-2911	16-210-0064	
5. Number of female chickens (maximum 10)	)	
6. Application (circle one)	New Renewa	al
In submitting this application, I hereby agree to condinances. I understand the information request license or processing of a renewal application. It is information when received by the Village of Colfab person or to allow any other entity to operate understatements are true and correct to the best of my lordinance under which this license is granted.	ted on this form will be used by the Villag understand the information supplied on th x. I have no intention or agreement to tra er the authority of the license. I hereby at	e of Colfax in the issuance of a his form will become public hnsfer the license to another ffirm that the foregoing
Signature of Applicant		June 2018
======================================	:=====================================	
Date Application Received	Date Board Approved / I	

# Village of Colfax

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

July 1, <u>2018</u> to June 3	0, <u>2019</u>
License Applicatio	n for
Keeping Domesticated	Chickens
\$10.00 (non-refundable applie	
(please print)	
1. Name of Applicant John Maytield	
2. Address 204 Viking Dr	
3. Phone 715-962-4272	
4. Parcel Number - 17111-2-291109-340-00	037
5. Number of female chickens (maximum 10)	
6. Application (circle one) New	( Renewal )
In submitting this application, I hereby agree to comply with the regulations Ordinances. I understand the information requested on this form will be us license or processing of a renewal application. I understand the information information when received by the Village of Colfax. I have no intention or a person or to allow any other entity to operate under the authority of the lice statements are true and correct to the best of my knowledge and that I agree Ordinance under which this license is granted.	sed by the Village of Colfax in the issuance of a n supplied on this form will become public agreement to transfer the license to another nse. I hereby affirm that the foregoing
Jaan Mayfield	_6-28-18
Signature of Applicant	Date
======================================	
7-5-18 Date Application Received	Date Board Reviewed Application Approved / Denied License Number

## Administrator-Clerk-Treasurer June 22, 2018 meeting

CIT – CIT has a few more components to complete and some training, and then we should be all set.

Water Reading Software – Tuesday, we will be testing our reading software and hopefully the upload into Workhorse goes smoothly. The July 1, 2018 bill will be the first billing cycle with the residential water meters installed.

**Work Comp Dividend** – The Village received a Work Comp Dividend of almost \$6,000. This is generated based on loss ratio for work comp claims. Great job Village of Colfax employees for working safely!!

**2017 Audit** – The auditors plan to have our audit complete by the end of June.

Operator's License Application Updated – I have wanted to update the operator's license for a long time for the following reasons:

- Duplication on the front side of the application and the back side of the application caused a lot of confusion.
- Reference checks were not checked because there is a background check complete by the Police Chief and the state statute does not give criteria to deny an application based on a reference's statement.
- There was a lot of time spent checking to see if the reference section was completed correctly and then following up to have the individuals make corrections. Then we still miss some . . .
- Individuals that have operator's licenses in other municipalities have commented that our form is much longer, confusing and it asks a lot more questions.

So, I have looked at the state statute and I have requested copies of operator application forms from other municipalities. The State of Wisconsin has standard forms for all other alcohol related licenses, but states that operator's applications should be created by the municipality. I have used parts of three different applications and created one for the Village of Colfax that includes all the information that the Police Chief requested is helpful for him to complete his back ground check. I did not find any operator's license application forms that requested references.

I feel that the form is brief, but gathers the necessary information. It is clear and easy to read. The form is attached for review.

**Vietnam Veterans Memorial update** - Mr. Yingst has gotten the steel for the sign as a donation from Steel Towne, value of \$275. He has talked with a monument company and has a rough estimate for the granite memorial of \$2,500 to 3,000.

# Village of Colfax

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

Application for	or License to Ser	ve Fermented	Malt Beverages	and Intoxicating Liquors
Provisional Li	censeNew	License	Renewal License	Fee: \$10.00 each application Receipt:
TO THE BOARD (	OF THE VILLAGE OF	COLFAX, WISC	ONSIN:	
Fermented Malt Be and 125.68(2) of the hereby agree to co	everages and Intoxica ne Wisconsin Statutes	ting Liquors, subje and all acts amer olutions, ordinanc	ect to the limitations in ndatory thereof and s es and regulations, F	clusive (unless sooner revoked), mposed by Section 125.32(2) upplementary thereto, and ederal, State or Local, affecting
Answer the following	ng questions fully and	completely: (PLE	ASE PRINT)	
NAME	ST NAME	MIDDLE NAME		LAST NAME
Telephone Numb	er	Email	Address	
Current Address	(Street)	(City)	(Zin Code)	(yrs. at address)
			(216 0000)	(yro. at address)
Previous Address	(Street)		(City)	(Zip Code)
	,		Age	
Place of Employn	nent			
A records check v substantially relat Colfax in determi	te to the license app ning whether a licen it if your application	r violations of an lied for.  Those c se will be grante	onvictions are cons d. You will be notifi I for denial to the Vi	during the past 10 years that sidered by the Village of ed by the Village of Colfax llage Board.    (Date)
STATE OF WISCO	NSIN/ DUNN COUN	ΓY		
				uha manan uuha maada and
The above named signed the foregoin	applicant, being first on a polication for an o	luly sworn on oatr perator's license:	that all the statemen	the person who made and ts made by applicant are true.
		X	Signature of Ap	onlicant
			Olyman of the	·E
Subscribed and sw	orn before me this	day of	, 20	
(Sign	ature of Notary Public)		(Commission Expires)	

Date Received: \_\_\_\_\_ Date to the Board: \_\_\_\_\_ Approved or Denied

#### POOLED CHECKING ACCOUNT

#### Accounting Checks

Posted From: 6/25/2018 From Account: Thru: 7/08/2018 Thru Account:

Check Nbr	Check Date	Payee	Amount
UHS	6/28/2018	UHS PREMIUM BILLING	1,029.26
74827	6/29/2018	24-7 TELCOM	24.95
74828	6/29/2018	AMERICAN RED CROSS	1,938.24
74829	6/29/2018	BOUND TREE MEDICAL, LLC	33.80
74830	6/29/2018	CENTURY LINK	102.50
74831	6/29/2018	DAIRY STATE BANK	40,384.19
74832	6/29/2018	DAIRY STATE BANK	62,978.82
74833	6/29/2018	DONALD KNUTSON	315.54
74834	6/29/2018	DSPS-DEPT. OF SAFETY & PROFESSIONAL SERV.	50.00
74835	6/29/2018	DUNN CO HIGHWAY DEPT	248.72
74836	6/29/2018	E.O. JOHNSON	210.00
74837	6/29/2018	FARRELL EQUIPMENT & SUPPLY CO.	596.81
74838	6/29/2018	FIRST SUPPLY LLC-EAU CLAIRE	407.19
74839	6/29/2018	GORDON FAUST	25.00
74840	6/29/2018	GRAINGER	138.81
74841	6/29/2018	HAWKINS, INC.	2,929.05
74842	6/29/2018	HUEBSCH	299.58
74843	6/29/2018	HYDROCORP	496.00
74844	6/29/2018	INDIANHEAD FEDERATED LIBRARY SYSTEM	984.34
74845	6/29/2018	JEFFERSON FIRE & SAFETY	169.00
74846	6/29/2018	JOHN DEERE FINANCIAL	1,481.65
74847	6/29/2018	JOLENE ALBRICHT	145.90
74848	6/29/2018	LBR ELECTRIC	466.00
74849	6/29/2018	MENARDS-EAU CLAIRE	153.93
74850	6/29/2018	PETTY CASH	6.20
74851	6/29/2018	POSTMASTER OF COLFAX	72.00
74852	6/29/2018	QUILL CORP.	184.93
74853	6/29/2018	ROGER'S REPAIR	13.50
74854	6/29/2018	SHEILA RIEMER	28.34
74855	6/29/2018	STATE INDUSTRIAL PRODUCTS	457.41
74856	6/29/2018	TOWN OF COLFAX	112.50
74857	6/29/2018	WAL MART COMMUNITY/GECRB	29.74
74858	6/29/2018	WELD RILEY	496.00

7/05/2018

3:50 PM

Reprint Check Register - Quick Report - ALL

Page:

ACCT

2

POOLED CHECKING ACCOUNT

Accounting Checks

Posted From:

6/25/2018

From Account:

Thru:

7/08/2018

Thru Account:

Check Nbr	Check Date	Payee		Amount
AFLAC	6/28/2018	AFLAC		421.02
EFTPS	6/28/2018	EFTPS-FEDERAL-SS-MEDICARE		5,612.72
WIDOR	6/28/2018	WI DEPARTMENT OF REVENUE		1,013.30
WIETF	7/03/2018	WI DEPT OF EMPLOYEE TRUST FUNDS		6,146.52
CHARTER	6/28/2018	CHARTER COMMUNICATIONS		550.64
WIDCOMP	6/28/2018	WISCONSIN DEFERRED COMPENSATION		255.00
XCELENERGY	7/02/2018	XCEL ENERGY		4,281.10
			Grand Total	135,290.20



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

## **Activity Report**

Vi	llage of Co	June			
	Date	Customer	Service	Pass/Fail	Project
	6/5/2018	Morrell	Permit Issued		Remodel
	6/7/2018	Swartz	Footing	Passed	
	6/19/2018	Kerg	Permit Issued		Addition
	6/25/2018	McCulloch	Permit Issued		Remodel

# Weber Inspections

2921 Ingalls Road, Menomonie, WI 54751 715-556-0066

# **Building Permit**

# Village of Colfax

Date	6/5/18				
Issued to:	Tony Morrell		-		
Address:	109 River St. , Colfax, Wis.	54730		n_10	
Project:	14' x 33' deck / 5' 6" x 8' sta	irs on back of ho	ouse. New enti	ry on front of the h	ouse.
Permits Is	ssued:	Inspe	ctions N	leeded:	
		X	Yes	No	

	Cost
Construction	\$75.00
HVAC	
Electrical	
Plumbing	
<b>Erosion Control</b>	
Total	\$ 75.00

Paid

Phase	Rough	Final
Footing	Х	
Foundation		
Basement Drain Tiles		
Construction		Х
Plumbing		
Heat/Vent/AC		
Electrical		
Insulation		
Occupancy		

# Weber Inspections

2921 Ingalls Road, Menomonie, WI 54751 715-556-0066

# **Building Permit**

# Village of Colfax

Date	6/25/18		
Issued to:	Jeff & Brittany McCulloc	h	
Address:	203 King Olaf Ct., Colfa	ıx, Wis. 54730	
Project:	***************************************	tairway, finish off basement.	
Permits	Build a 30' x 50' / a 15' lo	Inspections Ne	eded:
		X Yes	No

	Cost
Construction	\$100.00
HVAC	\$50.00
Electrical	\$16.00
Plumbing	\$25.00
<b>Erosion Control</b>	
Total	\$ 191.00

Paid

Phase	Rough	Final
Footing		
Foundation		
Basement Drain Tiles		
Construction	Х	Х
Plumbing	Х	Х
Heat/Vent/AC	х	х
Electrical	х	Х
Insulation		
Occupancy		

# Weber Inspections

2921 Ingalls Road, Menomonie, WI 54751 715-556-0066

# **Building Permit**

# Village of Colfax

Date	6/19	9/18						
Issued to:	_	Jerry Kerg						
Address:	_	211 Main St. , Colfax, Wis. 54730						
Project:		8' x 9' entry deck / stairs.						
Permits Is	ssue	ed: Inspections Needed:						
		X Yes No						

	(	Cost
Construction	\$	75.00
HVAC		
Electrical		
Plumbing		
<b>Erosion Control</b>		
Total	\$	75.00

Paid Ck # 1064

Phase	Rough	Final
Footing		
Foundation		
Basement Drain Tiles		
Construction		Х
Plumbing		
Heat/Vent/AC		
Electrical		
Insulation		
Occupancy		
	•	

														***	<del></del>
Wisconsin Division of Safety and Buildings		\$ LV1A	VILLAGE OF COLFAX UNIFORM BUILDING PERMIT APPLICATION						• •	ation N 018-					
Wisconsin Stats. 101.63,	, 101.73	UNI	FOR	W BUILD	шч	PERMI	I APPL	ACA I	uu		arcel 1		/	7-7-1-1-1-1-1	
PERMIT REQUI	ESTED	☐Con	str. [	]HVAC [	Ele	ectric 🔲	lumbing	д 🔲 Е	ros	ion Con	trol	Othe	r:		
Owner's Name	21 hv	1		Mailing Add	lress	Le la						Tel.	~ 49	77- 41	- - 
Contractor's Name:	on Blec [	HVAC [	Plbg	Lic/Cert#	/æ/ :	Mailing A	dress					Tel.	3 - //	77-40	200
			Ţ									FAX	(#		
Contractor's Name:	on Blec [	HVAC [	Plbg	Lic/Cert#		Mailing A	idress	··· · · · · · · · · · · · · · · · · ·		***		Tel.			, <del>, , , , , , , , , , , , , , , , , , ,</del>
												FAX	(#		
Contractor's Name: Co	on [Elec [	JIVAC [	Plbg	Lic/Cert#	-	Mailing Ad	ldress					Tel.		-·	
												FAX	C#		
Contractor's Name: Co	on Elec [	HVAC [	Plbg	Lic/Cert#		Mailing Ac	ldress	******				Tel.			
												FAX	<b>C#</b>		
PROJECT	Lot area		S	J. ft.			1/4	1/4	of S	ention		т	N, R	E	(or) W
Building Address				vision Name			1/4,		Lo	No.	,		ck No.		(01) W
Frince Field				4			т				1 ~				
Zoning District(s)		Zoning Po	ermit f	No.	S	etbacks:	Front	ft.	Re	ar fl	Le	ift	ft.	Right	ft
1, PROJECT	3, OCCUP			, ELECTRICAL		HVAC EQU		12. EN		Y SOUR	E	T			
	☐Single F ☐Two Far		1	intrance Panel imps:	, ~~	]Forced Air F ]Radiant Base		Fue Space		Nat Gas	LP	Oil	Elec	Solid	Sola
Addition DMove	Garage	5		Underground		Heat Pump Water Htg		**************************************			0	IJ	0	ū	
Other: Roof	Other:		}	Overhead					nit has 3 kilowatt or more in electric space				ace		
2. AREA INVOLVED	4. CONST	TYPE		. FOUNDATIO											
Unfin.	☐Site-Bui			Masonry	1	JOHO!	:	10, 111	123, 3, 3						
BsmtSq Ft	□Mfd: □			Treated Wood	10	0. SEWER						BT	U/HR T	otal Calc	nilated
Living		U.S. HUD	1 -	]Other:		Municipal		Envelo	pe an	d Infiltratio	n Loss				
AreaSq Ft	5. STORII	ES	8	. USE		Sanitary Permit No.: Heating Equipmen		ipment Ou	tput" o	n Energ	y Work:	sheet;			
	□1-Story		1 -	Seasonal		"Total Building He			ing Heating	g Load	on Wl	Scheck	report)		
GarageSq Ft	□2-Story			Permanent		11. WATER 14. EST. BUILDI									
DeckSq Ft.	☐Other: ☐Plus Bas	ement	1	]Other:		]Municipal Ut ]Private On-S		\$ 3	100	00					
I agree to comply with all appexpress or implied, on the sta I have read the cautionary sta authorized agent, permission APPLICANT'S SIGAPPROVAL COND	te or municip tement regard to enter the p	rality; and ceding contract remises for the E	rtify the or finar which t	at all the above in ncial responsibili	the cond nformat ity on th ght at al	litions of this pion is accurate reverse side il reasonable h	permit; unde be If I am an of the last p ours and for	rstand the owner a ly. I expit any prop	at the pplying ressly per pu	e issuance on g for an er grant the barpose to in	osion ouilding spect the GNE	control of inspection work  D 6	or constr tor, or the which i	ruction pone inspects being d	ermit, etor's done.
ALL KOVAL COM	CHULLL	permit e	or other	penalty.   Se	ee atta	ched for con	ditions of	approva	al.		-				
Recent	Roc	F													
11 Cherry	700	,													
													.,,		

Municipality Number of Dwelling Location FEES: PERMIT(S) ISSUED PERMIT ISSUED BY: ☐ Construction Plan Review Name George Entzminger Inspection □HVAC Wis. Permit Seal ☐ Electrical Date 6-6-18 Tel. 715-962-4402 ☐Plumbing
☐Erosion Control Other \$ 5,00 Cert No. Distribution: Copy 1 - Issuing Jurisdiction Copy 2 - Owner/Agent Copy 3 - Inspector

Wisconsin Division of Safety and Buildings

#### VILLAGE OF COLFAX UNIFORM BUILDING PERMIT APPLICATION

Application No.	126
2018-635	C.C.

		UNIFO	ORM BUILDI	NG PERMI	T APPI	LICAT	ION	20	) TO -	4	フ		
Wisconsin Stats. 101.63	, 101.73							Parcel 1	No.				
PERMIT REQUI	ESTED	□Constr	.   HVAC	Electric DI	Plumhin	о ПЕт	rosion C	ontrol	Othe	<u></u>		······	
Oumar'a Nama	<i>*</i>	·····	Mailing Addres	is ,		<u> </u>	OSION	Onnoi	Tel.				
Han Jo	ohnso	7040 500	Mailing Addres	Hinble S	7400	<del></del>			71	<u>5- 5</u>	2-2-	<u>325</u>	
Contractor's Name:	on LElec L	HVAC LIPIE	og Lic/Cert#	Mailing A	ddress				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	g Lic/Cert#	Mailing A	ddress				Tel.				
									FAX	#			
Contractor's Name: Co	g Lic/Cert#	Mailing A	ddress				Tel.						
										FAX#			
PROJECT LOCATION	Lot area		Sq. ft.		1/4,	1/4.	of Section	,	r	N, F	· 1	E (or) W	
Building Address		, Sul	odívision Name				Lot No.	,		ck No			
	10 5th				-								
Zoning District(s)	***************************************	Zoning Perm	it No.	Setbacks:	Front	ñ.	Rear	Le	ft		Right	^	
1. PROJECT	3. OCCUPA		6. ELECTRICAL	9. HVAC EQU	IPMENT		ERGY SOU	ft.   RCE	<del></del>	ft.		ft.	
□New □Repair □Alteration □Raze	Single Fa		Entrance Panel	☐Forced Air F		Fuel	Nat G	as LP	Oil	Elec	Solid	Solar	
☐Addition ☐Move	☐Two Fam ☐Garage	шу	Amps:	☐Radiant Base	ebd/ Panel	Space H Water H		<u> </u>	11	<u></u>	1 0		
☐Other:	Other:		□Overhead	□Boiler			lling unit ha		tt or mo		lectric st	pace	
2. AREA INVOLVED	4. CONST.	TWDE	7. FOUNDATION	Central Air C	Cond.	heating equipment							
Unfin.	Site-Built		☐Concrete ☐Masonry	☐Other:		13. HEA	T LOSS				<del></del>		
Bsmt Sq Ft			Treated Wood	10. SEWER	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	-			ויות	I/EIR T	otal Cal	loulated	
Living		J.S. HUD	, —			Envelop	e and Infiltra	ation Loss					
Area Sq Ft	5. STORIE	S	8. USE	Sanitary Perr		Heating Equipment Output" on Energy Worksheet; "Total Building Heating Load" on WIScheck report)							
Garage Sq Ft	☐1-Story ☐2-Story		☐Seasonal ☐Permanent	11 WATER					on WIS	Scheck			
	☐Other:		Other:	11. WATER  ☐Municipal Ut	ility		BUILDIN		·				
Deck Sq Ft.	☐Plus Base	l l		☐Private On-S		\$ 8	,000.	E					
I agree to comply with all appears or implied, on the sta I have read the cautionary sta	te or municipa tement regard	dity; and certify ing contractor fi	that all the above infor nancial responsibility o	rmation is accurate on the reverse side	e. If I am an of the last r	owner app	olying for an	erosion c	ontrol o	r const	ruction p	permit,	
authorized agent, permission		// 1	1 //								i		
APPLICANT'S SIG	NATURE	1407v	na Jan	1402			DATE S	IGNE	D <u>(24</u>	7/	_201	18	
APPROVAL COND	ITIONS	This permit permit or of	is issued pursuant to the her penalty.   See a	te following condi ttached for con-	tions. Failu ditions of	re to comp approval	ly may resul	t in susper	nsion or	revoca	tion of t	his	
The same		B. 2								· · · · ·			
+100H15	y W;	n 1100				·····							
	**************************************						7,2						
					·····	······································							
						Mu	micipality N	umber of	Dwellin	g Loca	tion		
							1 7	. 1 1	1			I	
FEES:			RMIT(S) ISSUED			PERMIT	ISSUED BY	<b>:</b>					
Plan Review \$ Inspection \$			Construction HVAC		1.	Nama (	Coorac	· Ent	ami'	~~~			
Wis. Permit Seal \$			Electrical		1		George					_	
Other \$	20		Plumbing Brosion Control			Date <u>(// -</u>	7-18	Tel.	172-	962	-44(	12	
·	200					Cert No.							
Distribution: Copy 1 - Issui	ng Jurisdiction	і ∏Сору 2—0	Owner/Agent Copy	3 - Inspector		-							

Wisconsin Division									A	pplica	tion N	0.		
of Safety and Buildings			VII.I	ACE	OF CO	TRAY								
		TINIE	ORM BUIL				TCAT	MOM		20	18-		<b>&gt;</b>	
Wisconsin Stats. 101.63.	101 73	OINIE	OIM DOLL		I HUNCH	II ALLI	JICA I	IIOIA	D.	arcel N	Jo			
									1.	ALCOI I	10.			
PERMIT REQUE	STED	☐Consti	:	ΠEle	ctric []	Plumbin	о ПБ	rosion	Con	trol	Othe			
Owner's Name			Mailing Ac	dress				***************************************			Tel.			
Rod Lor	PNZEV	7	Box	241	Co 140	ddréss	/ .	547	30		71	5-96	2-41	190
Contractor's Name:	on Elec [	HVAC □PI	bg Lic/Cert#		Mailing A	ddréss					Tel.			
											FAX	ζ#		
Contractor's Name: Co	n Elec [	HVAC PI	bg Lic/Cert#		Mailing A	ddress					Tel.			
					C						FAX	<del></del>	****	•
Contractor's Name: The	m Ellion E	TOTAL C TOU	bg Lic/Cert#		Mailing A	11								<del></del>
Contractor's Name. LDC	r's Name: Con Elec HVAC Plbg			1	ivialling A	adress					Tel.			
											FAX	#		
Contractor's Name: Co	n Elec E	HVAC PI	bg Lic/Cert#		Mailing A	ddress					Tel.			
				I							FAX	(#		
PROJECT	Lot area							<del>, , , , , , , , , , , , , , , , , , , </del>			l			
LOCATION			Sq. ft.		w-m	1/4,	1/4,	of Section	on	, Т	ľ	N, R	. E	(or) W
Building Address	7	Su	bdivision Name					Lot No	),		Blo	ck No.		
3// Park 1 Zoning District(s)	17108	Zoning Pern	ait No	16	etbacks:	Front		Rear		Lei	<u></u>	г	Diaha	
Zionnig izionion(s)		Zoning i on	III IVO.	3	twaces.	Front	ft.	Keai	ft.		ıı	ft.	Right	ft.
1. PROJECT	3. OCCUPA		6. ELECTRIC		HVAC EQ	<del></del>		ERGY S						
	☐Single Fa ☐Two Fam	•	Entrance Panel Amps:		Forced Air    Radiant Bas		Fue Space		at Gas	LP	Oil	Elec	Solid	Sola
☐Addition ☐Move	Garage	шу	Underground		Kaqiani Das  Heat Pump	cour ranci	Water		O	0	_ CJ	0	<u> </u>	D
□Other:	Other:		Overhead	☐Boiler ☐Dwelling unit										
5 id i 45 2. AREA INVOLVED	4. CONST.	TVDE	7. FOUNDATION					t capacity.						
Unfin,	Site-Built		Masonry		Outes.		13. HE	ALLOS		<del></del>				
BsmtSq Ft	☐Mfd: □\		☐Treated Wood	1 10	SEWER						вт	U/HR T	otal Calc	ulated
Living		J.S. HUD	☐Other:		Municipal		Envelo	pe and In	filtratio	ration Losses ("Maximum Allowable				ole
AreaSq Ft	5. STORIE	S	8. USE		☐Sanitary Permit No.:		Heating Equipment Output" on E							
Common S. Es	1-Story		Seasonal	-	VV ( CONTON		<del></del>	Building		.,	on WI	Scheck	report)	
GarageSq Ft	☐2-Story ☐Other:		☐Permanent ☐Other:		. WATER Municipal U	Itility		r. Buili						
DeckSq Ft.	☐Plus Base	ment			Private On-S		\$ 3	550	O, 8	<u>?</u>				
I agree to comply with all appexpress or implied, on the start have read the cautionary star authorized agent, permission	te or municips tement regard	dity; and certify ing contractor	y that all the above financial responsibl	informati ility on the	on is accurat e reverse side	te. If I am an e of the last p	owner aj	pplying for essly grad per purpos	or an ero nt the buse se to ins	osion co uilding pect the	ontrol o inspec e work	or constr tor, or the which i	ruction pe he inspect is being d	ermit, tor's lone.
APPLICANT'S SIG	NATURI	Locks	my X	rey	n			DAT	E SIC	SNEI	) (o	<u>- 13</u>	ZO/	8_
APPROVAL COND	ITIONS		t is issued pursuant ther penalty.						result in	susper	ision o	rrevoca	tion of th	ıis
Now SIL	PILCO	5h 6a	rase											
	/		tup-											

Municipality Number of Dwelling Location 1 7. 1 1 1 FEES: PERMIT(S) ISSUED PERMIT ISSUED BY: Plan Review ☐Construction Inspection Wis. Permit Seal Name George Entzminger HVAC □Electrical Date 6-13-15 Tel. 715-962-4402 ☐Plumbing
☐Erosion Control Other 10,00 Total Cert No. Distribution: Copy 1 - Issuing Jurisdiction Copy 2 - Owner/Agent Copy 3 - Inspector

Wisconsin Division of Safety and Buildings		IIN	IFAD			GE OF CO			TIO		Applica 2 (		No.		
Wisconsin Stats. 101.63	3, 101.73	ON	II OK	UVI I	OILDI.	NG PERM	II APP.	LICA	HU	<u> </u>	Parcel 1	No.			
PERMIT REQU	ESTED	□Co <sub>1</sub>	nstr. [	TH	VAC 🗆	Electric [	Plumbir	ıg ΠΕ	Eros	ion Cor	ntrol	Oth	er:		
Owner's Name Kevin	1/brio	16+		Mai	ling Addre	38 ~ /						Te	i.		
Contractor's Name:			Plbg	Lic/	Cert#	Mailing /	Address	and (	<u>C2 1</u>	Hey/	$\omega_{l}$	Tel	<u> </u>	308	<u>95/</u>
												FA			-
Contractor's Name:	on Elec [	HVAC [	Plbg	Lic/	Cert#	Mailing A	Address					Tel			
												FA	-		
Contractor's Name:	tractor's Name: Con Elec HVAC Plbg Lic/Cert#			Mailing A	ddress					Tel					
										FAX#					
Contractor's Name:	on Elec [	☐HVAC ☐Plbg Lic/Cert#			Mailing A	ddress	····		·		Tel				
												FA			
PROJECT LOCATION	Lot area		Sa Sa	. ft.			1/4	1/4	- F O			<u></u>			
Building Address	<i></i>		Subdiv		Name		, 174,	1/4,	,	No.	, '		N, l ock No		E (or) W
810 0/jver	Lenn					1			1.01	. 140.		DI	OCK INC	<b>'•</b>	
Zoning District(s)	I	Zoning P	ermit N	0.		Setbacks:	Front	ft.	Re	ar It	Le	ft	Δ.	Right	
1. PROJECT Repair	3. OCCUPA				TRICAL	9. HVAC EQ			ERG	Y SOURC			ft.		ft
New ☐Repair☐Alteration☐Raze	☐Single Fa ☐Two Fam		- 1	ntrance mps:	Panel	☐Forced Air ☐  Radiant Bas		Fue Space		Nat Gas	LP	Oil	Elec	Solid	
☐Addition ☐Move	☐Garage	,			ground	Heat Pump	cour ranci	Water		D D	0	0			+-
Other:	☐Other:			Overh		□Boiler		Dwelling unit					ore in e	lectric sp	pace
2. AREA INVOLVED	4. CONST.	TVDE		FOUR Concr	NOTATION	Central Air	Cond.	heating equipment capacity			city.	ity.			
Unfin.	Site-Built			Masor		Other: 13. HEAT LOSS				JOSS					
BsmtSq Ft	□Mfd: □V		- 1		d Wood	10. SEWER		-				75.00	***		
Living	ŧ	J.S. HUD		Other:		Municipal		Envelo	ne and	d Infiltratio	n I osse			Total Calc	
AreaSq Ft	5. STORIES	S	8.1	USE		☐Sanitary Per	mit No.:						es ("Maximum Allowable Energy Worksheet;		
	□1-Story			Seasor	ıal	1				ng Heating					
GarageSq Ft	□2-Story			Perma	nent	11. WATER				ILDING (					<del> </del>
DeckSq Ft.	□Other: □Plus Baser	ment		Other:		☐Municipal U ☐Private On-S		s 2	51	0,	20				
I agree to comply with all app express or implied, on the star I have read the cautionary star authorized agent, permission APPLICANT'S SIG	tement regardi to enter the pre	ng contract	or financ	an me	above intor	mation is accurat in the reverse side	e. If I am an	erstand the	at the oplyin essly er pur	issuance of g for an ere grant the b rpose to ins	osion co uilding spect the	inspec work	or const tor, or t which	ruction p he inspec is being (	permit,
APPROVAL COND	£	4		Sued p	ursuant to th	e following cond	itions, Failu	re to com		TE SIC					<u>()</u>
Wew Show	111UNS	permit	or other p	enalty	. LI See a	ttached for con	ditions of	approva	րւջ ու ւ <b>l.</b>	uy resuit in	auspen	191011 0	1 ICVOCE	mon or th	IIIS
FUCU JAC	,	V V2	inai	35	001 1	ExTIU									

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

Wisconsin Division of Safety and Buildings

## VILLAGE OF COLFAX UNIFORM BUILDING PERMIT APPLICATION

Application No	)
----------------	---

2018-8

		UNIF	ORM BUILDII	NG PERMI	T APPI	LICAT	rto	N		2.01.	0-8				
Wisconsin Stats. 101.63	Wisconsin Stats. 101.63, 101.73 Parcel No.														
PERMIT REQUI	ESTED	☐Constr	. 🗌 HVAC 🔲	Electric 🔲	Plumbin	g 🔲 Е	rosi	on Co	ontr	ol O	ther:				
Owner's Name / MG Contractor's Name:	1.15+		Mailing Address	S 464 6	16.41	3 / C	w 7	`₹		1.7	Tel. 7/5-505-1423				
Contractor's Name:	on Elec [	HVAC   PI	og Lic/Cert#	Mailing A	ddress	<u>e/3</u>	<del>7                                    </del>	<u>/</u>			Tel.				
		_									FAX#				
Contractor's Name:	on Files F	HVAC FIDE	og Lic/Cert#	Mailing A	ddasaa			··		Tel					
Conductor s Name.	on Lines L	TIANC FEE	Dg Lic/Celt#	Mailing A	aaress										
								F	AX#						
Contractor's Name: ☐Co	og Lic/Cert#	Mailing A	ddress					Γ	el.						
	-								F	AX#					
Contractor's Name:	g Lic/Cert#	Lic/Cert# Mailing Address					T	el.							
										F	AX#				
PROJECT	Lot area	· · · · · · · · · · · · · · · · · · ·					<del></del>					<del></del>			
LOCATION		1 ~	Sq. ft.		1/4,	1/4,	,			, T	N,		E (or) W		
Building Address	2	Su	bdivision Name				Lot	No.			Block N	0.			
Zoning District(s)		Zoning Perm	it No.	Setbacks:	Front		Rea			Left		Righ	ıt		
1. PROJECT	3. OCCUPA	ANICY	C EX HOMBYCAY	A		ft.			ft.		ft.	<u> </u>	ft.		
□New ☐Repair	☐Single Fa		6. ELECTRICAL Entrance Panel	9. HVAC EQU		Fue		Y SOUI Nat Ga		LP O	il Elec	o Sol	id Solar		
☐Alteration ☐Raze	☐Two Fam	iily	Amps:	Radiant Base	ebd/ Panel	Space	Htg	Ü		0 [	J U	()			
☐Addition ☐Move	☐Garage ☐Other:		☐Underground ☐Overhead	☐Heat Pump ☐Boiler		Water		mit has		U [	more in	[]			
Other: Loof			7. FOUNDATION	. FOUNDATION Central Air Cond.				ment ca			morem	elecule	space		
2. AREA INVOLVED	4. CONST.  ☐Site-Built	**	Concrete	□Other:		13. HE	AT L	oss			***************************************				
Unfin.  BsintSq Ft			☐Masonry ☐Treated Wood	10. SEWER		-					מנט/ו זירם	Total C	Calculated		
Living	1	J.S. HUD	Other:	☐ Municipal	<del>,</del>	Envelo	pe and	Infiltra	tion I		"Maximu				
Area Sq Ft	5. STORIES	S	8. USE	Sanitary Perr	nit No.:						ergy Woi				
Garage Sq Ft	☐1-Story ☐2-Story		☐Scasonal ☐Permanent	11. WATER							WISchee	k report	:)		
-	☐Other:		Other:	☐Municipal U	tility	14. ES				SI.					
Deck Sq Ft.	☐Plus Base			☐Private On-S		\$ /0	200	0, 25							
I agree to comply with all app express or implied, on the sta-	te or municipa	dity, and certify	that all the above infor	rmation is accurate	e Iflaman	owner at	mlyin	o for an	erosi	on contr	of or con-	etruction	n narmit		
I have read the cautionary sta	tement regard	ing contractor f	inancial responsibility o	on the reverse side	of the last r	lv Lexor	esslv s	grant the	• huil	ding inc	nector or	the inci	hentare		
authorized agent, permission		Andrew Control	· //	at all reasonable n	outs and for	any prop									
APPLICANT'S SIG	NATURE										<u>7-5-</u>				
APPROVAL COND	ITIONS		is issued pursuant to the her penalty.   See a					ay result	t in su	spensio	n or revo	cation o	fthis		
		portition	not politicy. 2 1 dec a	teached for con	unions of	approva	11.		*						
New Carra	10 11	eo F					******	*							
pre contra	3 - 10			The second secon	<del> </del>			····							
					~~~~		,								
With the state of		···.													
				<del></del>											
	**************************************														
						M	lunicip	ality N	umbei	r of Dwo	elling Loc	ation			
											-				
FEES: Plan Review \$			RMIT(S) ISSUED Construction			PERMIT	ISSU	ED BY	:						
Inspection \$			HVAC		-	Name	Geo	orqe	E	ntzm	iinge	r			
Wis. Permit Seal \$ Other \$			Electrical		1	Date Z							<u></u>		
7			Plumbing Erosion Control		***************************************	Date Z	J-/	<u>U</u>	ıel.	/	J-30.	<u> </u>			
	5,00				1	Cert No.						-			
Distribution: Copy 1 - Issui	ng Jurisdiction	Copy 2-	Owner/Agent Copy	3 - Inspector											

### **COLFAX POLICE DEPARTMENT**

PO BOX 417, 613 MAIN ST.

COLFAX, WI 54730

CALLS FOR SERVICE: 54

TRAFFIC STOPS: 16

<ul> <li>ASSIST OTHER AGENCY:</li> </ul>	Y: 4	AGENCY	155151 OTHER	•
------------------------------------------	------	--------	--------------	---

- o DISORDERLY
- o TRAFFIC STOP
- o ANIMAL IN ROAD
- o SUSPICIOUS VEHICLES
- DISORDERLY:
  - o DATING COUPLE ARGUING
  - UNRULY PATRON AT TAVERN
- AMBULANCE ASSIST: 2
- CIVIL:
  - ISSUES WITH A COURT ORDER
- BURGLARY:
  - TOOLS AND ITEMS STOLEN FROM GARAGE
- THEFT: 1
  - o GAS DRIVE OFF
- SUSPICION:
  - o SUSPICIOUS VEHICLE IN AREA
  - SUSPICIOUS PERSON NEAR RESIDENCE
- DAMAGE TO PROPERTY: 2
  - DAMAGE TO DOOR FRAME
  - o DAMAGE TO A BUILDING

 OPEN DOOR: 1 o AT THE SCHOOL PUBLIC SAFETY: o GAS SMELL o SPARKING TRANSFORMER DOWNED POWERLINE HUBER VIOLATION: 1 o JAIL INMATE NOT AT WORK DOMESTIC: o ADULT SON / MOTHER ARGUMENT ANIMAL COMPLAINT: 5 o DOG AT LARGE x 2 o INJURED CAT o PET RABBITS ON THE LOOSE UNFRIENDLY DOG TRAFFIC COMPLAINT: o ERRATIC DRIVER **JUVENILE:** o UNDERAGE SMOKING HARASSMENT: EX BOYFRIEND AND THREATS WELFARE CHECK: o CONCERN FOR ELDERLY FEMALE o DEPRESSED / SUICIDAL PERSON o POSSIBLE MISSING ADULT (UNFOUNDED) LOST / FOUND: 3 o FOUND BICYCLE LOST WALLET

o FOUND CELL PHONE

1

OVT (PARKING TICKET): 2
 ILLEGAL PARKING

911 MISDIAL:

#### **Colfax Rescue June Report**

#### **Municipalities Responded To:**

Total	28
Village of Wheeler	<u>5</u>
Township of Sand Creek	5
Township of Tainter	2
Township of Colfax	2
Village of Elk Mound	4
Village of Colfax	10

#### **Receiving Facilities:**

Total	28
Cancelled/Refused	10
HSHS St Joes	2
Mayo Clinic Health System Bloomer	2
Mayo Clinic Health System Menomonie	2
HSHS Sacred Heart	2
Mayo Clinic Health System Eau Claire	10

#### Financials:

June Charges	\$21,750.97
June Collection	\$21,550.56

#### **CRS Notes:**

➤ M8 had its second deer hit in three months; M8 had the Deer Guard placed on it when we bought it. First Deer Hit no damage, second deer hit \$6,336.60 damage half of which is replacing the Deer Guard which was bent and cracked. According to the body shop the damage would have been over \$10,000.00 without the deer guard affecting the mechanical side

- of the vehicle. So in Total our initial \$4,000.00 investment has saved over \$10,000. 00 in damages.
- > Don is back on the ambulance and in the office my chemo is complete. The end of July I will find out if it was successful.
- ➤ EMT relicensing is complete. We have lost some EMT's and a few will have to submit late renewals.
- > CRS was present at the fair rendering aid to fair goers who fell.

## Administrator-Clerk-Treasurer July 5th, 2018 meeting

CIT – Just working out a few items yet.

**Water Reading Software** – Time savings for the public works is approximately 80 hours and the administration time savings is approximately 10 to 12 hours.

**2017 Audit** – The audit is complete and available for Board members. July 23<sup>rd</sup> meeting, Jennifer Homeyer from Bauman Associates will be at the Board meeting to review documents.

**Network Outage** – Tuesday, July 3 was a challenging day since our Charter phones and internet services were not working Village wide. When you do not have these forms of communication, you realize very quickly how much you rely on them to accomplish our daily work.

**Dodge Ram police truck vs. Deer**— Damage amount approximately \$7,200. It takes approximately 2 weeks to get the police package parts. We have received the insurance payment less the \$500 deductible.

**Dodge Ambulance vs. Deer** – Damage amount approximately \$6,650. Parts have been ordered and hopefully here for repairs the week of July 9<sup>th</sup>. We have received the insurance payment less the \$500 deductible.

Library and the Colfax Municipal Building Restoration Group are planning to meet with the Board at the July 23<sup>rd</sup> Board meeting.