

**MEETING:                   REGULAR MEETING OF THE VILLAGE BOARD**  
**DATE & TIME:           Monday, August 3, 2026 at 7:00 PM**  
**LOCATION:                 Germantown Village Hall Board Room**  
**N112 W17001 Mequon Road**

Any member of the body and/or citizen may attend the meeting virtually through the WebEx platform, Meeting #:2551 455 8667 Password: ywM4qU5krp2 which can be accessed by phone at 408-418-9388 or by clicking the link below: <https://villageofgermantown.my.webex.com/villageofgermantown.my/j.php?MTID=m49bcd70fc98c6f1696315d2744b3586a>

Citizens not wishing to attend the meeting personally or virtually may submit any public comments by sending an email to [comments@germantownwi.gov](mailto:comments@germantownwi.gov) by 4 p.m. on the day of the meeting so that it can be provided to the members of the body for their consideration.

Previously recorded Village Board Meeting Videos can be viewed at [https://www.youtube.com/channel/UCOYp0EgELzTCa9X\\_iCohyhQ](https://www.youtube.com/channel/UCOYp0EgELzTCa9X_iCohyhQ)

## **AGENDA**

- I. **CALL TO ORDER:** *This meeting has been given public notice in accordance with Section 19.83 and 19.84, Wis. Stats, in such form that will apprise the general public and news media of subject matter that is intended for consideration and action.*
- II. **ROLL CALL:**
- III. **PLEDGE OF ALLEGIANCE / MOMENT OF SILENCE:**
- IV. **PRESIDENT’S REPORT:**
- V. **ANNOUNCEMENTS OF FORTHCOMING EVENTS OF PUBLIC INTEREST / COMMITTEE AND DEPARTMENT REPORTS:**
- VI. **CITIZEN INPUT:** *(Please be advised per 19.84(2) that information and comment will be received from the public. It is the policy of this municipality that public input be limited to a four (4) minute period per person with a time extension granted at the discretion of the Chairperson. Be advised that there may be limited discussion of the information received but no action will be taken under public comments.) Comments that may be injurious to village personnel or other individuals will not be allowed.*
- VII. **CONSENT AGENDA:**
  - A. Meeting Minutes: July 20, 2026 (ACTION)
- VIII. **UNFINISHED BUSINESS:**
- IX. **PUBLIC HEARINGS:**
- X. **NEW BUSINESS:**
  - A. One-Time Temporary Outdoor Entertainment Permit for Ellsworth Corporation, W129N10825 Washington Dr, on 08/15/2026 (ACTION)
  - B. 2026-2027 Retail Alcohol Beverage License Application for County 1 Inc (ACTION)
  - C. Producer Full-Service Retail Sales Application: Raised Grain Brewing Company, LLC for Dielectric Manufacturing 60th Anniversary event on September 18, 2026, at W206N12865 Gateway Ct (ACTION)
  - D. Emily Abel/Barrel & Bottle, LLC, Agent for HJ Development, Property Owner. Conditional Use Permit application for a 10,540 sqft liquor store that includes a

tasting bar and non-distilling operation from property located at N96W18768 County Line Road (former Pier 1 Imports). (ACTION)

- E. Jessica Poppert/Poppert Preschool North, Agent for Lindsay Mongoven and West Pointe Capital, LLC, Property Owner. Conditional Use Permit application for a change of ownership for an existing daycare center/preschool located at W164N11310 Squire Drive. (ACTION)
- F. Rescheduling of September Board Meeting (ACTION)
- G. Acquisition of N96 W18058 County Line Road (Tax Parcel No. 333-999) for the purpose of relocation of Wastewater Utility Lift Station 6. The Village Board may convene into closed session pursuant to Wis. Stat. § 19.85(1)(e) for the purpose of deliberating or negotiating the purchasing of public properties, the investing of public funds, or conducting other specified public business, whenever competitive or bargaining reasons require a closed session and then may reconvene into open session to take such action as it deems appropriate. (ACTION)

**XI. ADJOURNMENT:**

UPON REASONABLE NOTICE, efforts will be made to accommodate the needs of disabled individuals through appropriate aids and services. For additional information or to request this service, please contact the Village Clerk at (262)250-4745 at least 2 days prior to the meeting.

Notice is hereby given that a possible quorum of other boards, committees, and/or commissions may attend this meeting to gather information about an item over which they have decision-making responsibility. This may constitute a meeting of these bodies per State ex rel. Badke v Greendale Village Board, even though these bodies will not take formal action at this meeting.

|                       |                                                                       |
|-----------------------|-----------------------------------------------------------------------|
| <b>MEETING:</b>       | <b>REGULAR MEETING OF THE VILLAGE BOARD</b>                           |
| <b>DATE AND TIME:</b> | <b>Monday, July 20, 2026 7:00 PM</b>                                  |
| <b>LOCATION:</b>      | <b>Germantown Village Hall Board Room<br/>N112 W17001 Mequon Road</b> |

### MINUTES

- I. **CALL TO ORDER:** *This meeting has been given public notice in accordance with Section 19.83 and 19.84, Wis. Stats, in such form that will apprise the general public and news media of subject matter that is intended for consideration and action.*

Village President Bob Soderberg called the Village Board meeting to order at 7:00 PM.

II. **ROLL CALL:**

**Present:** Trustee Robert Warren, Trustee Meg Cutts, Trustee Patrick Kaiser, Trustee Jan Miller, Trustee Scott Hefle, Trustee Jolene Pieper, Trustee Jim Stout, Trustee Terri Kaminski, Village President Bob Soderberg

**Also Present:** Village Administrator Matt Trebatoski, Village Clerk Donna Ott, Village Attorney Brian Sajdak, Public Works Director Tim Zimmerman, Police Chief Pat Merten, Fire Chief John Delain, Battalion Chief Ryker Holms

III. **PLEDGE OF ALLEGIANCE / MOMENT OF SILENCE:**

IV. **PRESIDENT'S REPORT:**

Village President Soderberg spoke regarding his attendance at the grant award presentation at the Germantown Fire Station, ongoing construction on the Fond du Lac Ave and Division Rd roundabout and the Flower Source property, and the upcoming Taste of Germantown event. He also welcomed new Finance Director Lisa Davis.

V. **ANNOUNCEMENTS OF FORTHCOMING EVENTS OF PUBLIC INTEREST / COMMITTEE AND DEPARTMENT REPORTS:**

Trustee Kaminski announced the upcoming Public Works & Highways Committee meeting on Wednesday, August 5, 2026, at 5:30 PM.

Trustee Cutts announced the upcoming Public Safety Committee meeting on Monday, August 3, at 6:00 PM, and the upcoming General Government & Finance Committee meeting on Monday, August 17, 2026, at 5:30 PM.

Trustee Hefle announced the upcoming Economic Development Commission meeting on Tuesday, August 18, 2026, at 6:00 PM.

Clerk Ott announced the upcoming Library Board meeting on Wednesday, July 22, 2026, at 5:30 PM.

- VI. CITIZEN INPUT:** *(Please be advised per 19.84(2) that information and comment will be received from the public. It is the policy of this municipality that public input be limited to a four (4) minute period per person with a time extension granted at the discretion of the Chairperson. Be advised that there may be limited discussion of the information received but no action will be taken under public comments.) Comments that may be injurious to village personnel or other individuals will not be allowed.*

Lynne Schauer Bednarz (W156N10121 Pawnee Ct) spoke regarding New Business Item H (Countywide EMS System Resolution).

Jerry Siegle (N96W20912 County Line Rd) spoke regarding New Business Item H (Countywide EMS System Resolution).

Written comments were not read aloud, but are included with these minutes.

**VII. CONSENT AGENDA:**

**Motion:** Approve Items A-F as presented

**Motioned By:** Terri Kaminski

**Seconded By:** Scott Hefle

**Yes:** Robert Warren, Meg Cutts, Patrick Kaiser, Jan Miller, Scott Hefle, Jim Stout, Terri Kaminski, Bob Soderberg

**No:** Jolene Pieper

**Abstain:** None

**Motion Carried by Roll Call Vote (Yes 8, No 1, Abstained 0)**

- A. July 8, 2026 Meeting Minutes (ACTION)
- B. One-Time Temporary Outdoor Entertainment Permit for Lynn Sterns, W124N12127 Wasauke Rd, on 08/22/2026 (ACTION)
- C. Temporary Class "B" Beer/"Class B" Wine Application for Germantown Historical Society's Oktoberfest, September 26-27, 2026 (ACTION)
- D. Police Department Budget Amendment for Insurance Proceeds, Grant Revenues, Donations, and Sale of Handgun Revenues (ACTION)
- E. Reduction to the letter of credit in the amount of \$164,375.25 to Home Path Financial, developer of Heritage Park North (ACTION)

- F. Amendment #1 to Agreement with MSA for the Maple Road bridge repair in an amount which includes a 10% contingency of \$31,130.00 (ACTION)

**VIII. UNFINISHED BUSINESS:**

**IX. PUBLIC HEARINGS:**

**X. NEW BUSINESS:**

- A. Public Grant Program Application by Germantown Historical Society Inc for 2026 Christ Church Restoration and Addition Project (ACTION)

**Motion:** Approve as presented

**Motioned By:** Terri Kaminski

**Seconded By:** Meg Cutts

**Yes:** Jolene Pieper

**No:** Robert Warren, Meg Cutts, Patrick Kaiser, Jan Miller, Scott Hefle, Jim Stout, Terri Kaminski, Bob Soderberg

**Abstain:** None

**Motion Failed by Roll Call Vote (Yes 0, No 9, Abstained 0)**

- B. Request to Update Master Signers on the Village's US Bank account (ACTION)

**Motion:** Approve as presented

**Motioned By:** Terri Kaminski

**Seconded By:** Scott Hefle

**Yes:** Robert Warren, Meg Cutts, Patrick Kaiser, Jan Miller, Scott Hefle, Jolene Pieper, Jim Stout, Terri Kaminski, Bob Soderberg

**No:** None

**Abstain:** None

**Motion Carried by Voice Vote (Yes 9, No 0, Abstained 0)**

- C. Resolution Adopting the 2025 Compliance Maintenance Annual Report (CMAR) (WDNR) (ACTION)

**Motion:** Approve as presented

**Motioned By:** Terri Kaminski

**Seconded By:** Robert Warren

**Yes:** Robert Warren, Meg Cutts, Patrick Kaiser, Jan Miller, Scott Hefle, Jolene Pieper, Jim Stout, Terri Kaminski, Bob Soderberg

**No:** None

**Abstain:** None

**Motion Carried by Voice Vote (Yes 9, No 0, Abstained 0)**

- D. Gettysburg Drive "School Crossing" roadway painting and speed reduction signage (ACTION)

**Motion:** Approve as presented

**Motioned By:** Robert Warren

**Seconded By:** Meg Cutts

**Yes:** Robert Warren, Meg Cutts, Patrick Kaiser, Jan Miller, Scott Hefle, Jolene Pieper, Jim Stout, Terri Kaminski, Bob Soderberg

**No:** None

**Abstain:** None

**Motion Carried by Voice Vote (Yes 9, No 0, Abstained 0)**

- E. Change order to Agreement with Vinton Construction for the High Point Pass Project in the amount of \$34,909.96 (ACTION)

**Motion:** Approve as presented and direct staff to look into how this happened and who authorized the part number

**Motioned By:** Jolene Pieper

**Seconded By:** Patrick Kaiser

**Yes:** Robert Warren, Meg Cutts, Patrick Kaiser, Jan Miller, Jolene Pieper, Jim Stout, Terri Kaminski, Bob Soderberg

**No:** Scott Hefle

**Abstain:** None

**Motion Carried by Roll Call Vote (Yes 8, No 1, Abstained 0)**

- F. Adoption of 2026 Wage and Equipment Rates (ACTION)

**Motion:** Approve as presented

**Motioned By:** Terri Kaminski

**Seconded By:** Robert Warren

**Yes:** Robert Warren, Meg Cutts, Patrick Kaiser, Scott Hefle, Jim Stout, Terri Kaminski, Bob Soderberg

**No:** Jan Miller, Jolene Pieper

**Abstain:** None

**Motion Carried by Voice Vote (Yes 7, No 2, Abstained 0)**

- G. Approval of Funding for Construction Manager at Risk for New Police Department to Moore Construction Services (ACTION)

**Motion:** Approve the selection of Moore Construction Services to serve as Construction Manager at Risk as presented

**Motioned By:** Terri Kaminski

**Seconded By:** Robert Warren

**Yes:** Robert Warren, Meg Cutts, Patrick Kaiser, Jan Miller, Scott Hefle, Jolene Pieper, Jim Stout, Terri Kaminski, Bob Soderberg

**No:** None

**Abstain:** None

**Motion Carried by Roll Call Vote (Yes 9, No 0, Abstained 0)**

- H. Countywide EMS System Resolution (ACTION)

Battalion Chief Ryker Holms and Washington County Public Safety Officer Dave Seager presented this item.

**Motion:** Table action on Resolution 14-2026

**Motioned By:** Jolene Pieper

**Seconded By:** Terri Kaminski

**Yes:** Robert Warren, Meg Cutts, Patrick Kaiser, Jan Miller, Scott Hefle, Jolene Pieper, Jim Stout, Terri Kaminski, Bob Soderberg

**No:** None

**Abstain:** None

**Motion Carried by Voice Vote (Yes 9, No 0, Abstained 0)**

**XI. ADJOURNMENT:**

Village President Soderberg adjourned the Village Board meeting at 8:28 PM.

**From:** [Melanie Smythe](#)  
**To:** [Comments](#)  
**Cc:** [rep.knobl@legis.wisconsin.gov](#); [Stephanie.Erdman@washcowisco.gov](#); [robert.hartwig@washcowisco.gov](#); [carroll.merry@washcowisco.gov](#); [jeffrey.schleif@washcowisco.gov](#); [county.exec@washcowisco.gov](#); [dave.seager@washcowisco.gov](#)  
**Subject:** Germantown Village Board meeting and the EMS going to county agenda item - A BIG MISTAKE TO TAKE A VOTE ON THIS IN ITS CURRENT FORM  
**Date:** Sunday, July 19, 2026 5:22:04 PM

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CAUTION: This email originated from outside the organization.  
Do not click links or open attachments unless you recognize the sender and know the content is safe.

Dear Village Board,

I am against this item being voted upon tomorrow night. I am unable to attend the meeting and am sending this message instead.

I haven't met anyone yet, except possibly the village president, and the fire department, who is for this in its current form. I don't know if this is the correct direction because it has not been thoroughly explained by the county to us, nor has there been a series of explainer meetings as was done for our public safety referendum matter. I understand the fire department's needs and empathize and I am suggesting that the president should look into how the public safety referendum was handled before moving forward with this item. I did not agree with everything that Dean Wolter did, but he did make time for real public examination of important issues to do with taxation.

Without following that process we are not given the opportunity as residents to review information, discuss it with our neighbors and review the financial implications. Also, I could not find anywhere where the information addressed the fact that in Germantown because we passed a referendum taxing ourselves for our own public safety needs we would in effect be double-taxed. The referendum taxation needs adjustment down to rectify this matter. If not, it is theft.

Further, we are a sovereign municipality. The county appears to have created a rug-pull situation. In 2024 or sometime prior they gave the FD grants for operations. Now this is being removed and we need money for operations as the referendum dollars aren't enough. They also off-loaded roads that were maintained by the county to municipalities, thus shifting the costs to us which means we have to handle in our roads programs. The shared services programs being touted appear to be a take over of municipal governments and decision-making, and will require regrowing county government to cover the costs. Recall the recent IT discussion here. The county is not ready for this, just as it was not ready for the dispatch being shifted from the village.

The county is a legal boundary that is made up of villages, cities, unincorporated areas where people choose to live, work and play. It feels as if the county wants to take control rather than "focus on the people" as the document below says. A county should be partnering not taking over.

If, as Josh Schoemann says "every dollar is our dollar" does he mean his or ours?

The county needs to do more work and spend money on explaining this to all municipalities in the county. Right now they are acting as bullies, making demands and not properly explaining the pros and cons. If they want this they should pay to explain it as was done in our public safety referendum process.

I find it particularly offensive that "if the village chooses not to participate, our residents would still be taxed through the countywide levy if the county decides to move forward with the plan" and that our taxes would be redistributed to other municipalities. Talk about tone-deafness. The smaller communities are in worse shape than Germantown most likely and may have less options than we do.

agenda packet here:

[https://secure-web.cisco.com/1E03qr8HbqtnddKi5ZvNSrXssrn7mPjFehSTeB6xD7zeXy3NVa9iaphWNxRkwJ8pRaVl7ggB-AzC9hrupjSAMYo1N2TZINS-FPvj8Ro-x07QeIvQcdSoQPD\\_1tbMZzDK63bDBC6uhASXSOI\\_Aq7rtD8\\_8tSuOPUAbae7-elzjgbdKq7leak4D-Fvbjtgak7xihJmFkeWodSCQz2xPB3faXGCQEZX\\_SHqvJANenEP6OrSE6BxjhBFb5gTWN7BU7YYjQ0A49K57duXXlb-U4lp2w2di\\_3olfdt9t-O9-veCl4Yi3WjCYyFVSKBPWFgesPyd/https%3A%2F%2Fgermantownwi.portal.civicclerk.com%2Fevent%2F3053%2Ffiles%2Fagenda%2F6880](https://secure-web.cisco.com/1E03qr8HbqtnddKi5ZvNSrXssrn7mPjFehSTeB6xD7zeXy3NVa9iaphWNxRkwJ8pRaVl7ggB-AzC9hrupjSAMYo1N2TZINS-FPvj8Ro-x07QeIvQcdSoQPD_1tbMZzDK63bDBC6uhASXSOI_Aq7rtD8_8tSuOPUAbae7-elzjgbdKq7leak4D-Fvbjtgak7xihJmFkeWodSCQz2xPB3faXGCQEZX_SHqvJANenEP6OrSE6BxjhBFb5gTWN7BU7YYjQ0A49K57duXXlb-U4lp2w2di_3olfdt9t-O9-veCl4Yi3WjCYyFVSKBPWFgesPyd/https%3A%2F%2Fgermantownwi.portal.civicclerk.com%2Fevent%2F3053%2Ffiles%2Fagenda%2F6880)

This is indeed hardly a perfect program as the administrator says, and it needs to go back to the drawing board for a better design. This feels like a power grab to me.

Did any of us get to vote on these goals? One of the conceits of government is that "staff" expects citizens to do reaching out, which is not always possible as complicated as life is these days. County program here. When was the last time the county actually did a road show on these things and come to us. After all, we are the customers. Good communication matters.

[https://secure-web.cisco.com/1zGp3JLUtdZ6g1fdKUEMPg8vPBISpEvqjM19fw7qNhw5TUtmG-9Un-yGoYpaylyuY6RiNrgXwnDEwllly5UitUzmX0AUBTrV3iauY7\\_GHvErhbHfPCRKLZUZOPI5wiehVbayd3fmc\\_0xvUwdo\\_ljSdKdnyEO0jam391RriI-FFXFBCKB-kUx1gY7kLJBh2mUuaFSDc7abS7rYXjTmn03PSmdU8eZg3HDRXAm\\_YC-9daAx3gzuZqDa0IVXdrnuhMoKRdcU2jKjKdV199yLygfgdC469R7jkr03yed8go3eX1lyvfeT\\_LW6X-1IBPTZEK/https%3A%2F%2Fcdnsnm5-](https://secure-web.cisco.com/1zGp3JLUtdZ6g1fdKUEMPg8vPBISpEvqjM19fw7qNhw5TUtmG-9Un-yGoYpaylyuY6RiNrgXwnDEwllly5UitUzmX0AUBTrV3iauY7_GHvErhbHfPCRKLZUZOPI5wiehVbayd3fmc_0xvUwdo_ljSdKdnyEO0jam391RriI-FFXFBCKB-kUx1gY7kLJBh2mUuaFSDc7abS7rYXjTmn03PSmdU8eZg3HDRXAm_YC-9daAx3gzuZqDa0IVXdrnuhMoKRdcU2jKjKdV199yLygfgdC469R7jkr03yed8go3eX1lyvfeT_LW6X-1IBPTZEK/https%3A%2F%2Fcdnsnm5-)

The county may have got an incorrect impression that we are on board with this. Please vote no tomorrow. There are too many lose ends, it's a horrible deal and the county has not done their work if they are truly trying to be good neighbors, which is what David Saeger has said at past meetings. The county has spent all its time talking to a small contingent of people but not the actual people paying for these things. That is not partnering, nor is it being focused on people. Perhaps because a county is not the same as a village the staff thinks of us a taxable entities only?

Since the rules around local control and net new construction are part of this problem we should be working with the county and the state government to make it so that there is less of an imbalance. And less focus on forcing development as the engine for taxation. In a survey of our neighboring states, no one uses this method and several other models are working better for those states and their residents. It's time to send a resolution to the state urging them to rethink net new construction and levies.

I could go on. But I will close by saying that if this goes forward in its current state there will be consequences at the ballot box, besides some furious people and a ton of those phone calls and emails. Just saying.

Melanie Smythe

262-247-6301

DRAFT

**From:** [noreply@civicplus.com](mailto:noreply@civicplus.com)  
**To:** [Comments](#)  
**Subject:** Online Form Submittal: Meeting Comment Form for Committees and Village Board  
**Date:** Monday, July 20, 2026 9:08:03 AM

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## Meeting Comment Form for Committees and Village Board

|                                                            |                                                                                                                                                                                                  |
|------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| First Name                                                 | Nick                                                                                                                                                                                             |
| Last Name                                                  | Tobias                                                                                                                                                                                           |
| Address1                                                   | N98W15684 School Rd.                                                                                                                                                                             |
| City                                                       | Germantown                                                                                                                                                                                       |
| State                                                      | WI                                                                                                                                                                                               |
| Zip                                                        | 53022                                                                                                                                                                                            |
| Email Address                                              | ntobi00@gmail.com                                                                                                                                                                                |
| (Section Break)                                            |                                                                                                                                                                                                  |
| Which Committee/Commission/Board do you have comments for? | Village Board                                                                                                                                                                                    |
| What is the date of the meeting?                           | 7/20/2026                                                                                                                                                                                        |
| For which item do you wish to provide comments?            | Countywide EMS System Resolution (ACTION)                                                                                                                                                        |
| What is your opinion of the item?                          | I am NEITHER in favor or oppose the item.                                                                                                                                                        |
| Would you like to speak at the meeting?                    | No, I do not wish to speak at the meeting. I only want to submit my comments through this form.                                                                                                  |
| Comments                                                   | There seem to be to many assumptions with this program being an actual savings. Plan seems back handed that if we join or not we still get taxed but do not get any of the benefit if we do not. |

**From:** [Wadina, Cole](#)  
**To:** [Comments](#)  
**Cc:** [Stephanie.Erdman@washcowisco.gov](mailto:Stephanie.Erdman@washcowisco.gov); [robert.hartwig@washcowisco.gov](mailto:robert.hartwig@washcowisco.gov); [carroll.merry@washcowisco.gov](mailto:carroll.merry@washcowisco.gov); [jeffrey.schleif@washcowisco.gov](mailto:jeffrey.schleif@washcowisco.gov); [county.exec@washcowisco.gov](mailto:county.exec@washcowisco.gov); [dave.seager@washcowisco.gov](mailto:dave.seager@washcowisco.gov)  
**Subject:** Germantown Village Board meeting and the EMS going to county agenda item  
**Date:** Monday, July 20, 2026 11:02:54 AM  
**Attachments:** [image001.png](#)

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Do not click links or open attachments unless you recognize the sender and know the content is safe.**

Attention Germantown Village Board,

It has recently come to my attention that Washington County has asked the local municipalities to vote on a new tax toward funding of emergency services.

I'm opposed to any tax increases in this regard.

If the County has previously budgeted to forward funds to Germantown for said services an additional tax should not be necessary.

If the County was using ARPA funds in this regard then that is poor financial management on the counties part.

Ongoing appropriations never should have been initiated using one time monies.

Furthermore, Germantown has recently begun its own additional tax collection for emergency services.

At minimum this issue should be tabled until all parties have further studied the ramifications of additional taxation.

State legislators should also be part of the conversation as the State forwards dollars to the county and municipalities for many services.

All elected entities should come together to properly plan how taxes are collected & distributed for most efficient use.

Thanks and Regards,

Dan Knodl



**Cole Wadina**

*Legislative Assistant*

608-237-9124

**Office of State Representative Dan Knodl**

## **BUSINESS OF THE VILLAGE BOARD**

MEETING DATE: August 3, 2026

PLACEMENT: Action Item

ITEM TITLE: One-Time Temporary Outdoor Entertainment Permit for Ellsworth Corporation, W129N10825 Washington Dr, on 08/15/2026  
(ACTION)

SUBMITTED BY: Kasie Miller, Chief Deputy Clerk

### SUMMARY EXPLANATION:

Applicant Pamela Rubio of Ellsworth Corporation, W129N10825 Washington Dr, has submitted an application for a One-Time Temporary Outdoor Entertainment Permit for an Employees and Family picnic held at their property on August 15, 2026, from 11:00AM until 2:00PM. Nine smaller 10ftx10ft tents will be used to shelter the DJ to play amplified music, and for food and activities(face painter) along with a 100ftx40ft tent for guests. Five-hundred foot notices were mailed to adjacent property owners on 07/15/2026.

Police, Fire, and Community Development Departments have provided approval of this application with recommended contingencies.

### ATTACHMENT:

1. Ellsworth Corp Temp 1 Day 08.15.26\_Redacted

### STAFF RECOMMENDATION:

Approval of the One-Time Outdoor Entertainment Permit Application for Ellsworth Corporation for 08/15/2026 contingent upon compliance with all provisions of the Zoning Code (Ch. 17) and Building Code (Ch. 14) and receipt of any zoning/building permits and completed inspections with the Village where applicable.

### ACTION BY COMMITTEE:



## OUTDOOR ENTERTAINMENT PERMIT APPLICATION

- Additional permits or approvals may be required by other Departments (sign permits, temporary use permits, building permits, electrical permits, liquor license, etc.). You are responsible for obtaining those permits prior to approval of this application. Contact Community Development at 250-4735 for further information.
- Approved annual permits are valid July 1 – June 30, or upon issuance. Temporary permits are valid during the dates identified on the Permit. If there are any changes to a previously approved permit application, an amended approval will be needed.
- IF YOUR APPLICATION SHOULD BE DENIED BY THE VILLAGE BOARD, THE FEES ARE NON-REFUNDABLE.**

|                                     |                                                                                               |       |
|-------------------------------------|-----------------------------------------------------------------------------------------------|-------|
| <input type="checkbox"/>            | Annual Permit                                                                                 | \$200 |
| <input checked="" type="checkbox"/> | Temporary Permit:<br>1 <sup>st</sup> and 2 <sup>nd</sup> Permits<br>within <u>Permit Year</u> | \$0   |
| <input type="checkbox"/>            | Temporary Permit –<br>3 <sup>rd</sup> Permit and<br>subsequent                                | \$75  |
| <b>Total:</b>                       |                                                                                               |       |

|                                       |                            |                     |
|---------------------------------------|----------------------------|---------------------|
| Applicant Name<br><b>Pamela Rubio</b> | Phone Number<br>[REDACTED] | Email<br>[REDACTED] |
|---------------------------------------|----------------------------|---------------------|

|                                                                         |
|-------------------------------------------------------------------------|
| Applicant Business Name (if applicable)<br><b>Ellsworth Corporation</b> |
|-------------------------------------------------------------------------|

|                                                                          |                           |                    |                     |
|--------------------------------------------------------------------------|---------------------------|--------------------|---------------------|
| Applicant Business Street Address<br><b>W129 N10825 Washington Drive</b> | City<br><b>Germantown</b> | State<br><b>WI</b> | Zip<br><b>53022</b> |
|--------------------------------------------------------------------------|---------------------------|--------------------|---------------------|

Describe the area where the outdoor entertainment permit will be utilized, including the property address and a description of the area on the Property to be utilized. You MUST include a detailed, scale drawing of the area with dimensions, locations of speakers, televisions, performance location, and the like. *Employees + families*

**family picnic on the grounds of the Ellsworth headquarters, DJ with audio equipment family friendly music**

Describe the hours of outdoor entertainment. For Temporary Permits, List Dates and Hours of Event. For Annual Permits, List Proposed Days and Hours of outdoor entertainment (e.g., Between June 1 and September 30, Fridays 4pm to 8pm, Saturdays Noon to 9 pm). You MUST include a detailed plan of operation setting forth the dates, hours, location, type and scope of the operation for all outdoor entertainment.

**11am to 2pm on Saturday, August 15, 2026**

*GTNV-251988*

I hereby certify that the answers on this application are complete, true and correct to the best of my knowledge and belief and make application for an Outdoor Entertainment Permit in the Village of Germantown, Wisconsin, subject to the provisions and limitations of Wisconsin Statutes and Germantown Municipal Code, and hereby agree to comply with

*Pamela Rubio* 7/10/2026  
Applicant Date

|                                                                                                                                     |  |
|-------------------------------------------------------------------------------------------------------------------------------------|--|
| For Office Use Only: Date: _____ Initials: _____ Amount Paid: _____ Receipt # _____                                                 |  |
| Community Development Review: _____ Plan Commission Date (if applicable): _____                                                     |  |
| Police Chief Date Notified _____ Approve _____ or Deny _____ (Attach basis for denial). Police Chief or Designee: _____ Date: _____ |  |
| Fire Chief Date Notified _____ Approve _____ or Deny _____ (Attach basis for denial). Fire Chief or Designee: _____ Date: _____     |  |
| 500 foot Notice Mailing date _____ Public Safety Meeting Date <u>8/3</u> Approved/Denied (Circle One)                               |  |
| Village Board Meeting Date <u>8/3</u> Approved/Denied (Circle One) Permit Number: _____ Village Clerk Approval: _____               |  |

## **OUTDOOR ENTERTAINMENT PERMIT**

### **POLICY & PROCEDURE**

1. An Outdoor Entertainment Permit is required when the following types of entertainment are provided, wholly or in any part, including fixtures, attendees, and sound systems, outside of a fully enclosed permanent structure:
  - a. Amplified or non-amplified music, including live singers, musicians, bands, or orchestras, recorded music, karaoke, juke boxes, live DJ's, background music, radios, and the like.
  - b. Audio-visual broadcasts, including the presentation of live televised events such as a sporting event, television shows, movies and the like.
2. There are two types of outdoor entertainment permits:
  - a. Annual Permit: Allows the permittee to provide outdoor entertainment outside an enclosed structure during specified hours. The permit period is July 1 through June 30, with each year requiring a new permit.
  - b. Temporary Permit: Allows the permittee to provide activities outside an enclosed structure during a specified period or periods for special, limited occurrences.
3. Permit applications must be accompanied by a site plan and a scaled drawing or map showing the location of all speakers, televisions, performance locations, and the like.
4. Permit applications must be accompanied by a detailed plan of operation setting forth the dates, hours, location, type and scope of the operation for all outdoor entertainment activities. A complete plan of operation should include, as applicable: a description of the type of entertainment to be offered, a security plan (including the number of security personnel, how they will be utilized, how they are identified, etc.), a plan to handle control and clearance of the parking lot during hours of operation and at closing time, a plan for unruly patrons, intoxicated patrons, and physical disturbances, a plan of how alcohol sales and consumption will be addressed, a plan for litter and noise complaints, and contact information for an individual to address complaints at times entertainment is ongoing.
5. NO ALCOHOL BEVERAGES shall be served or consumed without appropriate licenses or permits.
6. All applications shall be referred to the Police Chief and Fire Chief for review and recommendation.
7. All property owners within 500 feet of the property to be subject to an Outdoor Entertainment Permit shall be notified of the pendency of application and the date(s), time(s) and location, when the request will be considered by the Public Safety Committee. This shall be done by first class mail, at least 15 days prior to the scheduled meeting.
8. The Public Safety Committee shall review the request, consider the recommendations of the Police and Fire Chiefs, and make a recommendation to the Village Board regarding issuance. The Village Board may impose conditions and restrictions on the permit found to be necessary to minimize the impact of the outdoor entertainment upon surrounding properties including limiting the dates and times of activities and requiring technologically reasonable steps to minimize noise and other impacts.



5:10x10  
Tents from caterer  
and face painter.  
1:10x10

Equipment rentals  
setting up tents

In total 10 tents

seating is 100'x40'

The DJ will be set up where the larger yellow block is denoted with the speakers as the smaller blocks. It will be in a 10x10 tent with an 8 foot table, small set up. Playing family friendly music

## **BUSINESS OF THE VILLAGE BOARD**

MEETING DATE: August 3, 2026

PLACEMENT: Action Item

ITEM TITLE: 2026-2027 Retail Alcohol Beverage License Application for County 1 Inc (ACTION)

SUBMITTED BY: Kasie Miller, Chief Deputy Clerk

### SUMMARY EXPLANATION:

Applicant Rajvir S Bains (County 1 Inc) has submitted the attached Alcohol Beverage License application and requests to be granted a Combination "Class A" Fermented Malt Beverage and Intoxicating Liquor License for the 2026-2027 licensing period as they are in the process of purchasing the Colgate BP at N96W21962 County Line Rd.

For the current 2026-2027 Licensing Period, a Combination "Class A" Fermented Malt Beverage and Intoxicating Liquor License was granted to Colgate BP Inc on June 15, 2026.

A background check was conducted by the Police Department for County 1 Inc and approved the application on 7/27/2026.

The Village of Germantown does not have a set quota amount of "Class A" licenses it can issue.

### ATTACHMENT:

1. County 1 Inc - Colgate BP - Class A Combination and CTV\_Redacted

### STAFF RECOMMENDATION:

Approval of the Application for a Combination "Class A" Fermented Malt Beverage and Intoxicating Liquor License for County 1 Inc, contingent upon the surrender of the current license held by Colgate BP Inc at N96W21962 County Line Road.

### ACTION BY COMMITTEE:

Form  
AB-200

# Alcohol Beverage License Application

| For Municipal Use Only |  |
|------------------------|--|
| Municipality           |  |
| License Period         |  |

## Application Type (check one)

☐ Initial (New) ☐ Renewal

License(s) Requested: (up to two boxes may be checked)

☒ Class "A" Beer ..... \$ 100 ☐ Class "B" Beer ..... \$ \_\_\_\_\_  
☒ "Class A" Liquor ..... \$ 500 ☐ Regular "Class B" Liquor ..... \$ \_\_\_\_\_  
☐ "Class A" Liquor (cider only) ..... \$ \_\_\_\_\_ ☐ Reserve "Class B" Liquor ..... \$ \_\_\_\_\_  
☐ "Class C" Liquor (wine only) ..... \$ \_\_\_\_\_ ☐ Above-Quota "Class B"  
Liquor ..... \$ \_\_\_\_\_

## Fees

|                      |                                    |
|----------------------|------------------------------------|
| License Fee(s)       | \$ <u>600</u>                      |
| Background Check Fee | \$ <u>14</u>                       |
| Publication Fee      | \$ <u>40</u>                       |
| Total Fees           | \$ <u>754.00</u> + 100.00 = 854.00 |

## Part A: Premises/Business Information

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |                                                                                                                                                              |              |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|
| 1. Legal Business Name (individual name if sole proprietorship)<br><u>COUNTY 1 INC</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |                                                                                                                                                              |              |
| 2. Business Trade Name or DBA<br><u>COLGATE BP</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |                                                                                                                                                              |              |
| 3. FEIN<br><u>42-2565216</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  | 4. Wisconsin Seller's Permit Number<br><u>456-1032638881-02</u>                                                                                              |              |
| 5. Entity Type (check one)<br><input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Partnership <input type="checkbox"/> Limited Liability Company <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Nonprofit Organization                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |                                                                                                                                                              |              |
| 6. If the applicant business is an LLC, are the controlling members other LLCs or corporations? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>If yes, the members, managers, officers and directors of those business entities must be listed in Part C and provide a Form AB-100.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |                                                                                                                                                              |              |
| 7. State of Organization<br><u>WI</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  | 8. Date of Organization<br><u>MAY 2026</u>                                                                                                                   |              |
| 9. Wisconsin DFI Registration Number<br><u>C-139229</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |                                                                                                                                                              |              |
| 10. Premises Address<br><u>N96 W21962 COUNTY LINE RD.</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |                                                                                                                                                              |              |
| 11. City<br><u>COLGATE</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  | 12. State                                                                                                                                                    | 13. Zip Code |
| 14. County<br><u>WASHINGTON</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  | 15. Governing Municipality: <input type="checkbox"/> City <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village<br>of: <u>GERMANTOWN</u> |              |
| 16. Aldermanic District                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |                                                                                                                                                              |              |
| 17. Premises Phone<br><u>262-255-9447</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  | 18. Premises Email<br><u>[REDACTED]</u>                                                                                                                      |              |
| 19. Website                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |                                                                                                                                                              |              |
| 20. Premises Description<br><b>Initial (New Applicants Only):</b> Describe the building or buildings where alcohol beverages are produced, sold, stored, or consumed, and related records are kept. Describe all rooms within the building, including living quarters. Authorized alcohol beverage activities and storage of records may occur only on the premises described in this application. Attach a map or diagram and additional sheets if necessary.<br><b>Renewal Applicants Only:</b> I am renewing a license and by checking the box following this statement, I affirm that I have reviewed the last issued license certificate and the premises description remains the same. <input type="checkbox"/> LIQUOR WILL BE SOLD ON THE SHELF AND COUNTER. ALL THE LIQUOR WILL BE STORED IN BACK OFFICE WITH ALL THE INVOICES & PAPERWORK.<br><u>BEER WILL BE SOLD ONSHELF &amp; COOLER.</u> |  |                                                                                                                                                              |              |
| 21. Mailing Address (if different from premises address)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                                                                                                                              |              |
| 22. City                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  | 23. State                                                                                                                                                    | 24. Zip Code |

## Part B: Questions

1. Has the business (sole proprietorship, partnership, limited liability company, or corporation) been convicted of violating federal or state laws or local ordinances? Exclude traffic offenses unless related to alcohol beverages. ☐ Yes ☒ No  
If yes, list the details of violation below. Attach additional sheets if necessary.

|                        |                                                                                  |            |
|------------------------|----------------------------------------------------------------------------------|------------|
| Law/Ordinance Violated | Location                                                                         | Trial Date |
| Penalty Imposed        | Was sentence completed? <input type="checkbox"/> Yes <input type="checkbox"/> No |            |
| Law/Ordinance Violated | Location                                                                         | Trial Date |
| Penalty Imposed        | Was sentence completed? <input type="checkbox"/> Yes <input type="checkbox"/> No |            |

2. Are charges for any offenses pending against the business? Exclude traffic offenses unless related to alcohol beverages. ☐ Yes ☒ No  
If yes, describe the nature and status of pending charges using the space below. Attach additional sheets as needed.

3. Is the applicant business or any of its officers, directors, members, agent, employees, owners, or other related individuals or entities a restricted investor with any interest in an alcohol beverage producer or wholesaler? ☐ Yes ☒ No  
If yes, provide the name of the restricted investor and describe the nature of the interest.

4. Have the partners, agent, or sole proprietor satisfied the responsible beverage server training requirement for this license period? Submit proof of completion. ☒ Yes ☐ No

5. Is the applicant business indebted to any wholesaler beyond 15 days for beer or 30 days for liquor/wine? ☐ Yes ☒ No

6. Does the applicant business owe past due municipal property taxes, assessments, or other fees? ☐ Yes ☒ No

### Part C: Individual Information

Check each box to attest that you have provided the appropriate supplementary information to complete your application. See the instructions for Part C of this application, beginning on page 2, to complete this section.

☒ I have accurately listed and provided contact and personal information for all required persons involved in the applicant business and any business identified in Part A, Question 6 using Form AB-200AA.

☒ I have provided an accurate Form AB-100 for each person listed in Form AB-200AA.

☒ (For corporations, limited liability companies, and nonprofit organizations only) I have provided an accurate Form AB-101 to appoint an agent on behalf of my business.

☒ I understand that my application is not complete until this supplementary paperwork is received by the municipal clerk where I am applying for an alcohol beverage license.

### Part D: Attestation

One of the following must sign and attest to this application:

- sole proprietor
- one general partner of a partnership
- one corporate officer
- one member of an LLC

**READ CAREFULLY BEFORE SIGNING:** Under penalty of law, I have answered each of the above questions completely and truthfully. I agree that I am acting solely on behalf of the applicant business and not on behalf of any other individual or entity seeking the license. Further, I agree that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another individual or entity. I agree to operate this business according to the law, including but not limited to, purchasing alcohol beverages from state authorized wholesalers. I understand that lack of access to any portion of a licensed premises during inspection will be deemed a refusal to allow inspection. Such refusal is a misdemeanor and grounds for revocation of this license. I understand that any license issued contrary to Wis. Stat. Chapter 125 shall be void under penalty of state law. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

|                                                                                                  |                     |                             |                     |                  |
|--------------------------------------------------------------------------------------------------|---------------------|-----------------------------|---------------------|------------------|
| Last Name<br><b>BAINS</b>                                                                        |                     | First Name<br><b>RASVIR</b> |                     | M.I.<br><b>S</b> |
| Title<br><b>MEMBER</b>                                                                           | Email<br>[REDACTED] |                             | Phone<br>[REDACTED] |                  |
| Signature<br> |                     | Date<br><b>07/16/26</b>     |                     |                  |

### Part E: For Clerk Use Only

|                                       |                |                                                 |                     |
|---------------------------------------|----------------|-------------------------------------------------|---------------------|
| Date Application Was Filed With Clerk | License Number | Date License Granted                            | Date License Issued |
| Signature of Clerk/Deputy Clerk       |                | Date Provisional License Issued (if applicable) |                     |





WISCONSIN DEPARTMENT OF REVENUE  
PO BOX 8902  
MADISON, WI 53708-8902

**Contact Information:**

2135 RIMROCK RD PO BOX 8902  
MADISON, WI 53708-8902  
ph: 608-266-2776 fax: 608-224-5761  
email: DORBusinessTax@wisconsin.gov  
website: revenue.wi.gov

000052

Letter ID L1007910832

COUNTY 1 INC  
N96W21962 COUNTY LINE RD  
COLGATE WI 53017-9576

## Wisconsin Department of Revenue Seller's Permit

**Legal/real name:** COUNTY 1 INC

**Business name:**  
N96W21962 COUNTY LINE RD  
COLGATE WI 53017-9576

- This certificate confirms you are registered with the Wisconsin Department of Revenue and authorized in the business of selling tangible personal property and taxable services.
- You may not transfer this permit.
- This permit must be displayed at the place of business and is not valid at any other location.
- If your business is not operated from a fixed location, you must carry or display this permit at all events.

| Tax Type        | Account Type    | Account Number    |
|-----------------|-----------------|-------------------|
| Sales & Use Tax | Seller's Permit | 456-1032638881-02 |

Alcohol Beverage  
Appointment of AgentDate  
07/01/26

## Agent Type (check one)

☒ Original (no fee)☐ Successor (\$10 fee for municipal licensees only)

## Part A: Business Information

1. Legal Business Name (individual name if sole proprietor)

COUNTY 1 INC.

2. Business Trade Name or DBA

COLGATE BP

3. Entity Type (check one)

☐ Limited Liability Company☒ Corporation☐ Nonprofit Organization

4. Alcohol Beverage Business Authorization (check one)

☒ Municipal Retail License☐ State Permit

5. If successor agent, provide State Permit or Municipal Retail License Number

6. Describe the reason for appointing a successor agent, if successor is checked above.

## Part B: Agent Information

1. Last Name

BAINS

2. First Name

RAJVIR

3. M.I.

S

4. Email

5. Phone

6. Home Address

7. City

8. State

9. Zip Code

10. Date of Birth

11. Driver's License/State ID Number

12. Driver's License/State ID State of Issuance /

## Part C: Agent Questions

1. Have you satisfied the responsible beverage server training requirement?  
Submit proof of completion.☒ Yes ☐ No2. Have you completed Form AB-100, Alcohol Beverage Individual Questionnaire (licensee) or  
Form AB-300, Alcohol Beverage Personal Questionnaire (permittee)?☒ Yes ☐ No3. Have you been a Wisconsin resident for at least 90 continuous days?  
See instructions for exceptions.☒ Yes ☐ No

Continued →

| Part D: Business Attestation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |            |          |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|----------|--|
| <p>READ CAREFULLY BEFORE SIGNING: I, the Undersigned, authorize the above-named individual to act for the above-named corporation, nonprofit organization, or limited liability company with full authority and control of the premises and of all alcohol beverage activities on such premises. I certify that I am authorized by the above-named entity to authorize this individual to act on behalf of the entity. If I am appointing a successor agent, I rescind all previous agent appointments for this premises. Further, I understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.</p> |            |          |  |
| Last Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | First Name | M.I.     |  |
| BAINS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | RAJYIR     | S        |  |
| Title                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Email      | Phone    |  |
| MEMBER                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |            |          |  |
| Signature                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |            | Date     |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |            | 07/01/26 |  |

| Part E: Agent Attestation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |            |          |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|----------|--|
| <p>READ CAREFULLY BEFORE SIGNING: I, the Agent, hereby accept this appointment as agent for the above-named corporation, nonprofit organization, or limited liability company and assume full responsibility for the conduct of all alcohol beverage activities on the premises for the above-named business. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.</p> |            |          |  |
| Last Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | First Name | M.I.     |  |
| BAINS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | RAJYIR     | S        |  |
| Signature                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |            | Date     |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |            | 07/01/26 |  |



Alcohol Beverage  
Individual Questionnaire

Date

All individuals involved in the alcohol beverage business must complete this form, including:

- sole proprietor
- all officers, directors, and agent of a corporation or nonprofit organization
- all partners of a partnership
- members and agent of a limited liability company

Your alcohol beverage application is not complete until all required Individual Questionnaires are submitted.

**Part A: Business Information**

1. Legal Business Name (individual name if sole proprietor)

COUNTY 1 INC.

2. Business Trade Name or DBA

COLGATE BP

3. Entity Type (check one)

☐ Sole Proprietor☐ Partnership☐ Limited Liability Company☒ Corporation☐ Nonprofit Organization**Part B: Individual Information**

1. Last Name

MANN

2. First Name

GURMAIL

3. M.I.

S

4. Relationship to Business (Title)

OWNER

5. Email

6. Phone

7. Home Address

8. City

9. State

NJ

10. Zip Code

07008

11. Date of Birth

12. Driver's License/State ID Number

13. Driver's License/State ID State of Issuance

**Part C: Address History**1. Do you currently live in Wisconsin? ☐ Yes ☒ No

If yes, provide the month and year when you permanently moved to Wisconsin

(MM/YYYY)

2. List in chronological order all of your addresses within the last 5 years. Attach additional sheets if necessary.

| Previous Address   | City | State | Zip Code |
|--------------------|------|-------|----------|
|                    |      | NJ    | 07008    |
| Previous Address 2 | City | State | Zip Code |
| Previous Address 3 | City | State | Zip Code |
| Previous Address 4 | City | State | Zip Code |
| Previous Address 5 | City | State | Zip Code |

3. List all states and counties you have lived in as an adult. Attach additional sheets if necessary.

| State | County    | State | County | State | County | State | County |
|-------|-----------|-------|--------|-------|--------|-------|--------|
| NJ    | MIDDLESEX |       |        |       |        |       |        |
| State | County    | State | County | State | County | State | County |

Continued →

**Part D: Criminal History**

1. Have you ever been convicted of any offenses (excluding traffic offenses unless related to alcohol beverages) for violation of any federal, Wisconsin, or another state's laws or of any county or municipal ordinances? . . . . . ☐ Yes ☒ No

If yes to question 1, please list details of each conviction below. Attach additional sheets as needed.

|                        |          |                                                                                            |
|------------------------|----------|--------------------------------------------------------------------------------------------|
| Law/Ordinance Violated | Location | Conviction Date                                                                            |
| Penalty Imposed        |          | Was sentence completed? . . . . . <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Law/Ordinance Violated | Location | Conviction Date                                                                            |
| Penalty Imposed        |          | Was sentence completed? . . . . . <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Law/Ordinance Violated | Location | Conviction Date                                                                            |
| Penalty Imposed        |          | Was sentence completed? . . . . . <input type="checkbox"/> Yes <input type="checkbox"/> No |

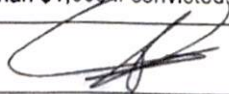
2. Are charges for any offenses currently pending against you (excluding traffic offenses unless related to alcohol beverages) for violation of any federal, Wisconsin, or another state's laws or any county or municipal ordinances? . . . . . ☐ Yes ☒ No

If yes to question 2, describe nature and status of pending charges using the space below. Attach additional sheets as needed.

**Part E: Attestation**

**READ CAREFULLY BEFORE SIGNING:** Under penalty of law, I have answered each of the above questions completely and truthfully. I certify that I am not prohibited from participating in this business due to any involvement in another tier of the alcohol beverage industry as a restricted investor. I understand that any license issued contrary to Wis. Stat. Chapter 125 shall be void under penalty of state law. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Signature



Date

07/17/26

# Alcohol Beverage Individual Questionnaire

Date  
07/01/2018

All individuals involved in the alcohol beverage business must complete this form, including:

- sole proprietor
- all officers, directors, and agent of a corporation or nonprofit organization
- all partners of a partnership
- members and agent of a limited liability company

Your alcohol beverage application is not complete until all required Individual Questionnaires are submitted.

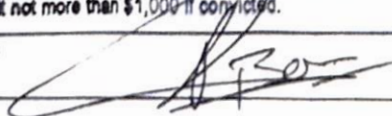
|                                                             |                                                 |
|-------------------------------------------------------------|-------------------------------------------------|
| <b>Part A: Business Information</b>                         |                                                 |
| 1. Legal Business Name (Individual name if sole proprietor) |                                                 |
| COUNTY 1 INC.                                               |                                                 |
| 2. Business Trade Name or DBA                               |                                                 |
| COLGATE BP                                                  |                                                 |
| 3. Entity Type (check one)                                  |                                                 |
| <input type="checkbox"/> Sole Proprietor                    | <input type="checkbox"/> Partnership            |
| <input type="checkbox"/> Limited Liability Company          | <input checked="" type="checkbox"/> Corporation |
| <input type="checkbox"/> Nonprofit Organization             |                                                 |

|                                       |  |                                                 |  |
|---------------------------------------|--|-------------------------------------------------|--|
| <b>Part B: Individual Information</b> |  |                                                 |  |
| 1. Last Name                          |  | 2. First Name                                   |  |
| BAINS                                 |  | KASYR                                           |  |
| 3. M.I.                               |  | S                                               |  |
| 4. Relationship to Business (Title)   |  | 5. Email                                        |  |
| MEMBER                                |  |                                                 |  |
| 6. Phone                              |  |                                                 |  |
| 7. Home Address                       |  |                                                 |  |
|                                       |  |                                                 |  |
| 8. City                               |  | 9. State                                        |  |
|                                       |  | WI                                              |  |
| 10. Zip Code                          |  | 11. Date of Birth                               |  |
|                                       |  |                                                 |  |
| 12. Driver's License/State ID Number  |  | 13. Driver's License/State ID State of issuance |  |
|                                       |  | WI                                              |  |

|                                                                                                                      |           |       |                                                                     |
|----------------------------------------------------------------------------------------------------------------------|-----------|-------|---------------------------------------------------------------------|
| <b>Part C: Address History</b>                                                                                       |           |       |                                                                     |
| 1. Do you currently live in Wisconsin?                                                                               |           |       | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| If yes, provide the month and year when you permanently moved to Wisconsin                                           |           |       | (MM/YYYY)<br>09/09/2018                                             |
| 2. List in chronological order all of your addresses within the last 5 years. Attach additional sheets if necessary. |           |       |                                                                     |
| Previous Address 1                                                                                                   | City      | State | Zip Code                                                            |
|                                                                                                                      |           | WI    |                                                                     |
| Previous Address 2                                                                                                   | City      | State | Zip Code                                                            |
|                                                                                                                      |           | WI    |                                                                     |
| Previous Address 3                                                                                                   | City      | State | Zip Code                                                            |
|                                                                                                                      |           |       |                                                                     |
| Previous Address 4                                                                                                   | City      | State | Zip Code                                                            |
|                                                                                                                      |           |       |                                                                     |
| Previous Address 5                                                                                                   | City      | State | Zip Code                                                            |
|                                                                                                                      |           |       |                                                                     |
| 3. List all states and counties you have lived in as an adult. Attach additional sheets if necessary.                |           |       |                                                                     |
| State                                                                                                                | County    | State | County                                                              |
| NY                                                                                                                   | SUFFOLK   |       |                                                                     |
| WI                                                                                                                   | MILWAUKEE |       |                                                                     |

Continued →

| Part D: Criminal History                                                                                                                                                                                                                                                                                          |          |                                                                                  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|----------------------------------------------------------------------------------|
| <b>1. Have you ever been convicted of any offenses (excluding traffic offenses unless related to alcohol beverages) for violation of any federal, Wisconsin, or another state's laws or of any county or municipal ordinances?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No            |          |                                                                                  |
| If yes to question 1, please list details of each conviction below. Attach additional sheets as needed.                                                                                                                                                                                                           |          |                                                                                  |
| Law/Ordinance Violated                                                                                                                                                                                                                                                                                            | Location | Conviction Date                                                                  |
| Penalty Imposed                                                                                                                                                                                                                                                                                                   |          | Was sentence completed? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Law/Ordinance Violated                                                                                                                                                                                                                                                                                            | Location | Conviction Date                                                                  |
| Penalty Imposed                                                                                                                                                                                                                                                                                                   |          | Was sentence completed? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Law/Ordinance Violated                                                                                                                                                                                                                                                                                            | Location | Conviction Date                                                                  |
| Penalty Imposed                                                                                                                                                                                                                                                                                                   |          | Was sentence completed? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <b>2. Are charges for any offenses currently pending against you (excluding traffic offenses unless related to alcohol beverages) for violation of any federal, Wisconsin, or another state's laws or any county or municipal ordinances?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |          |                                                                                  |
| If yes to question 2, describe nature and status of pending charges using the space below. Attach additional sheets as needed.                                                                                                                                                                                    |          |                                                                                  |

| Part E: Attestation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|
| <b>READ CAREFULLY BEFORE SIGNING:</b> Under penalty of law, I have answered each of the above questions completely and truthfully. I certify that I am not prohibited from participating in this business due to any involvement in another tier of the alcohol beverage industry as a restricted investor. I understand that any license issued contrary to Wis. Stat. Chapter 125 shall be void under penalty of state law. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted. |                  |
| Signature                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Date<br>07/01/26 |

## BUSINESS OF THE VILLAGE BOARD

MEETING DATE: August 3, 2026

PLACEMENT: Action Item

ITEM TITLE: Producer Full-Service Retail Sales Application: Raised Grain Brewing Company, LLC for Dielectric Manufacturing 60th Anniversary event on September 18, 2026, at W206N12865 Gateway Ct (ACTION)

SUBMITTED BY: Kasie Miller, Chief Deputy Clerk

### SUMMARY EXPLANATION:

Effective May 1, 2024, *2023 Wisconsin Act 73* authorizes eligible producers (manufacturers, rectifiers, wineries, and breweries) to make full-service retail sales at their production premises and up to three off-site retail outlets.

Raised Grain Brewing Company, LLC submitted to the Clerk's Office *AB-105 Producer Full-Service Retail Sales Application* and is requesting approval of *Unlimited Transfer Full-Service Retail Outlet* to sell beer at the Dielectric Manufacturing Company's 60th Anniversary event on September 18, 2026, from 11:30AM-5:00PM on their property at W206N12865 Gateway Ct.

The Village must fill out *Part G* of the application and return to the Applicant prior to the Applicant's submittal to the Wisconsin Department of Revenue's Division of Alcohol Beverages (DAB) for review/approval. For *Part G, Question 1*: we as the municipality are allowed to limit the scope of what the business sells (ex. if they sell beer, wine, and liquor, but we only want them to sell beer, we can limit their offerings.) For *Part G, Question 2*: we as the municipality can limit other activities, such as operating hours. The State DAB conducts the background checks on the applicant and verifies the business is allowed to hold the requested type of license prior to issuance.

Additionally, the State DAB has provided additional information/faq's to assist municipalities as this form is still relatively new:

### **What is the difference between a fixed and unlimited transfer full-service retail outlet?**

Fixed full-service retail outlets may be transferred from one location to another once per year. Unlimited transfer full-service retail outlets may be transferred an unlimited number of times in a year. Only one of a producer's full-service retail outlets may be transferred without limitation on frequency.

**Can a municipality limit authorized sales at a full-service retail outlet?** Yes, a municipality can limit authorized sales at a full-service retail outlet. Municipalities may limit the scope of alcohol beverages offered for sale by the permittee. Municipal approval of a full-service retail outlet must be based on the same standards and criteria, established by ordinance, for the evaluation and approval of retail licenses. A municipality may not impose any requirement or restriction in connection with the approval that the municipality does not impose on retail licensees. Some examples of

limitations may be: parking, zoning, or noise ordinance restrictions; not allowing sales of alcohol beverages for off-premises consumption.

**Does a producer need licensed operators (bartenders)?** Yes. There must be one or more licensed operators in charge of the premises. An operator's license is often called a "bartender's license." Not all bartenders must hold operator's licenses, but there must be at least one licensed operator in charge of the premises. If the premises is large, with several serving areas, bar areas, etc., licensed operators must oversee each distinct area to supervise and direct unlicensed persons who may be selling/serving alcohol beverages.

**ATTACHMENT:**

1. Raised Grain Brewing Company LLC; Dielectric Mfg Germantown  
Event\_Redacted

**STAFF RECOMMENDATION:**

**ACTION BY COMMITTEE:**

Save

Print

Clear

Form

AB-105

# **Producer Full-Service Retail Sales Application**

Date

## **Part A: Producer Information**

1. Business Legal Name (individual name if sole proprietor)

Raised Grain Brewing Company, LLC

2. Business Name or DBA

Raised Grain Brewing Co.

3. Agent Name

Nick Reistad

4. FEIN

47-2723203

5. Wisconsin Seller's Permit Number

456-1028834387-05

6. Wisconsin Producer Permit Number

309-1028834387-09

7. Producer Type



Brewery



Winery



Liquor Manufacturer/Rectifier

8. Contact Person's First Name

Nick

9. Last Name

Reistad

10. M.I.

G

11. Contact Person's Phone

12. Contact Person's Email

## **Part B: Production Quantity**

**Note:** Check appropriate quantity for permit held (see instructions). If you hold more than one producer permit, check the total aggregate quantity produced for each type of permit. Enter the highest quantity produced in any of the last three calendar years.

### **Brewery**

☐ Less than 250 barrels☐ 250 - 2,499 barrels☒ 2,500 - 7,499 barrels☐ 7,500 or more barrels

### **Manufacturer/Rectifier**

☐ Less than 1,500 liters☐ 1,500 - 4,999 liters☐ 5,000 - 34,999 liters☐ 35,000 or more liters

### **Winery**

☐ Less than 1,000 gallons☐ 1,000 - 4,999 gallons☐ 5,000 - 24,999 gallons☐ 25,000 or more gallons

Calendar year: 2023

Calendar year:

Calendar year:

Quantity: 5,057.01

Quantity:

Quantity:

**Complete only ONE of Part C, D or E.**

## **Part C: Request for Full-Service Retail Sales at the Production Premises**

1. Start Date

2. Production Premises Address

3. City

4. State

5. Zip Code

6. County

7. Governing Municipality ☐ City ☐ Town ☐ Village  
of: \_\_\_\_\_

## **Part D: Request for Fixed Full-Service Retail Outlet**

1. Are you transferring one fixed full-service retail outlet to a new location? ..... ☐ Yes ☐ No  
If yes, complete boxes 2 through 9.

2. Current Outlet Name

3. Current Outlet Premises Address

4. City

5. State

6. Zip Code

7. County

8. Governing Municipality ☐ City ☐ Town ☐ Village  
of: \_\_\_\_\_

9. Premises Phone Number

Continued →

**Part D: Request for Fixed Full-Service Retail Outlet (Cont.)****New Fixed Retail Outlet Information (complete boxes 10 through 23)**

|                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                      |              |                           |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|--------------|---------------------------|
| 10. Start Date                                                                                                                                                                                                                                                                                                                                                                                                                                | 11. New Outlet Name                                                                                                                  |              |                           |
| 12. New Outlet Premises Address                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                      |              |                           |
| 13. City                                                                                                                                                                                                                                                                                                                                                                                                                                      | 14. State                                                                                                                            | 15. Zip Code |                           |
| 16. County                                                                                                                                                                                                                                                                                                                                                                                                                                    | 17. Governing Municipality <input type="checkbox"/> City <input type="checkbox"/> Town <input type="checkbox"/> Village<br>of: _____ |              | 18. Premises Phone Number |
| 19. Premises Description - Describe the building or buildings and any outside areas where alcohol beverages are produced, sold, stored, or consumed, and related records are kept. Describe all rooms within the building, including living quarters. Authorized alcohol beverage activities and storage of records may occur only on the premises described in this application. Attach a map or diagram and additional sheets if necessary. |                                                                                                                                      |              |                           |
| 20. Will you operate a restaurant on the premises? . . . . . <input type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                                                                                                                                                                                                                         |                                                                                                                                      |              |                           |
| 21. What alcohol beverages will be offered for sale? (check all that apply) . . . . . <input type="checkbox"/> Beer <input type="checkbox"/> Wine <input type="checkbox"/> Intoxicating Liquor (other than wine)                                                                                                                                                                                                                              |                                                                                                                                      |              |                           |
| 22. What alcohol beverages does the permittee produce? (check all that apply) <input type="checkbox"/> Beer <input type="checkbox"/> Wine <input type="checkbox"/> Intoxicating Liquor (other than wine)                                                                                                                                                                                                                                      |                                                                                                                                      |              |                           |
| 23. How will customers be served? (check all that apply) . . . <input type="checkbox"/> Samples <input type="checkbox"/> On-premises consumption <input type="checkbox"/> Off-premises consumption                                                                                                                                                                                                                                            |                                                                                                                                      |              |                           |

**Part E: Request for Unlimited Transfer Full-Service Retail Outlet**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                            |                                              |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|
| 1. Name of Event (if applicable)<br><b>Dielectric Manufacturing 60th Anniversary</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                            |                                              |
| 2. Dates of Operation (attach a schedule, if necessary)<br><b>Friday, September 18, 2026</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                            | 3. Hours of Operation<br><b>11:30-5:00pm</b> |
| 4. Premises Address<br><b>W206N12865 Gateway Ct</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                            |                                              |
| 5. City<br><b>Richfield</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 6. State<br><b>WI</b>                                                                                                                                      | 7. Zip Code<br><b>53076</b>                  |
| 8. County<br><b>Washington</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 9. Governing Municipality <input type="checkbox"/> City <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village<br>of: <b>Germantown</b> |                                              |
| 10. Organizer of Event (if not the named applicant)<br><b>Kelsey Lofberg</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 11. Email and/or Phone Number for Organizer of Event<br>[REDACTED]                                                                                         |                                              |
| 12. Organizer Website<br><b><a href="https://dielectricmfg.com/">https://dielectricmfg.com/</a></b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 13. Event Website                                                                                                                                          |                                              |
| 14. Premises Description - Describe the building or buildings and any outside areas where alcohol beverages are produced, sold, stored, or consumed, and related records are kept. Describe all rooms within the building, including living quarters. Authorized alcohol beverage activities and storage of records may occur only on the premises described in this application. Attach a map or diagram and additional sheets if necessary.<br><br><b>Beer will be dispensed from a mobile beer trailer that will be parked adjacent to the main Dielectric building, located north of Holy Hill Rd and east of Gateway Ct. The beer trailer location is noted in the attached image, noted by a red box. Exact location may depend on current weather conditions.</b> |                                                                                                                                                            |                                              |
| 15. On-Site Contact (Last Name, First Name)<br><b>Reistad, Nick</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 16. On-Site Contact Phone<br>[REDACTED]                                                                                                                    | 17. On-Site Contact Email<br>[REDACTED]      |
| 18. Will you operate a restaurant on the premises? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                            |                                              |
| 19. What alcohol beverages will be offered for sale? (check all that apply) . . . . . <input checked="" type="checkbox"/> Beer <input type="checkbox"/> Wine <input type="checkbox"/> Intoxicating Liquor (other than wine)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                            |                                              |
| 20. What alcohol beverages does the permittee produce? (check all that apply) <input checked="" type="checkbox"/> Beer <input type="checkbox"/> Wine <input type="checkbox"/> Intoxicating Liquor (other than wine)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                            |                                              |
| 21. How will customers be served? (check all that apply) . . . <input type="checkbox"/> Samples <input checked="" type="checkbox"/> On-premises consumption <input type="checkbox"/> Off-premises consumption                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                            |                                              |

**Part F: Attestation**

Who must sign this application?

- sole proprietor
- general partner of a partnership
- corporate officer
- member of an LLC

**READ CAREFULLY BEFORE SIGNING:**

I understand and agree to the following:

- I will not operate this location outside of the dates and times approved by the municipality and Division of Alcohol Beverages.
- I will operate this location according to municipal ordinance and restrictions imposed as a condition of receiving this authorization.
- I will purchase alcohol beverages I do not produce from an authorized source, such as a Wisconsin-permitted wholesaler.
- I will operate this location according to Wisconsin law and administrative regulation including but not limited to: underage restrictions, closing hours, licensed operators, and record keeping requirements.

Further, under penalty of law, I have answered each of the above questions completely and truthfully. I agree that I am acting solely on behalf of the applicant business and not on behalf of any other individual or entity seeking the authorization. Further, I agree that the rights and responsibilities conferred by the authorization, if granted, will not be assigned to another individual or entity. I understand that lack of access to any portion of a premises during inspection will be deemed a refusal to allow inspection. Such refusal is a misdemeanor and grounds for revocation of this authorization. I understand that any authorization issued contrary to Wis. Stats. Chapter 125 shall be void under penalty of Wisconsin law. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Signature



Date

07/10/2026

Last Name

Reistad

First Name

Nick

M.I.

G

Title

Email

Phone

**Part G: For Municipal Use Only (Complete if Requesting Authorization in Part D or E)**1. Will the municipality limit the scope of alcohol beverages offered for sale? ..... ☐ Yes ☐ No2. Will the municipality impose any requirements or restrictions for the full-service retail outlet? ..... ☐ Yes ☐ No

3. Describe municipal restrictions indicated in questions 1 or 2 above.

4. Last Name of Municipal Official

5. First Name

6. M.I.

7. Signature of Municipal Official

8. Date

9. Date Application was Filed with Clerk

10. Date Full-Service Retail Outlet Approved by Governing Body



# **Form AB-105 Instructions**

## *Producer Full-Service Retail Sales Application*

### **Who may apply for full-service retail sales?**

Producer permittees may apply for full-service retail sales on or off the production premises. Producer permittees include brewers, rectifiers, manufacturers, and wineries.

### **Who qualifies for full-service retail sales?**

- A brewery that manufactures a minimum of 250 barrels of fermented malt beverages.
- A manufacturer/rectifier that produces a minimum of 1,500 liters of intoxicating liquor.
- A winery that produces a minimum of 1,000 gallons of wine.

### **What are full-service retail sales?**

Permittees that are granted full-service retail sales privileges may:

- Sell fermented malt beverages and intoxicating liquor at retail for on- or off-premises consumption at their production premises and at one or more off-site full-service retail outlets.
- Provide taste samples of fermented malt beverages and intoxicating liquor.

### **What are full-service retail outlets?**

Full-service retail outlets are authorized locations for full-service retail sales at places other than the permittee's production premises.

### **What is the difference between a fixed and unlimited transfer full-service retail outlet?**

Fixed full-service retail outlets may be transferred from one location to another once per year. Unlimited transfer full-service retail outlets may be transferred an unlimited number of times in a year. Only one of a producer's full-service retail outlets may be transferred without limitation on frequency.

### **How many full-service retail outlets may I have?**

The number of full-service retail outlets a producer qualifies for is determined by alcohol beverage production volume. Producers may have a maximum of three full-service outlets, regardless of the number or type of producer permits they hold.

### **Who approves full-service retail sales?**

Full-service retail sales on the production premises need only be approved by the Division of Alcohol Beverages. Municipalities do not issue licenses for full-service retail sales outlets; however, municipalities must approve of the outlets. The applicant must forward the municipal approval to the Division of Alcohol Beverages for final granting of the authority for sales to commence on the premises.

### **Can a municipality limit authorized sales at a full-service retail outlet?**

Yes, a municipality can limit authorized sales at a full-service retail outlet. Municipalities may limit the scope of alcohol beverages offered for sale by the permittee. Municipal approval of a full-service retail outlet must be based on the same standards and criteria, established by ordinance, for the evaluation and approval of retail licenses. A municipality may not impose any requirement or restriction in connection with the approval that the municipality does not impose on retail licensees.

### **How do I fill out Form AB-105 and begin the application process?**

Authorizations requested on Form AB-105 must be applied for only one premises in one municipality at a time. To request multiple authorizations, submit a separate Form AB-105 for each location/premises.

Parts A, B, and F: Applicants must complete Parts A, B, and F.

Parts C, D, and E: Complete only one Part. Form AB-105 must be used to request only one authorization at a time.

**Example:** A producer applicant requesting full-service retail sales authorization on the production premises should complete Parts A, B, C, and F.

**Example:** A producer applicant requesting a fixed full-service retail outlet should complete Parts A, B, D, and F.

**Example:** A producer applicant requesting an unlimited transfer full-service retail outlet should complete Parts A, B, E, and F. Producer applicants requesting authorization in Part E must complete one Form AB-105 for each premises. Applicants may use the same Form AB-105 to request authorization for multiple dates and times occurring on the same premises.

Municipal approval is required for authorizations requested in Parts D and E. If a producer is applying for authorization in either of these sections, the completed application must first be submitted to the governing municipality.

After the municipality has granted approval by completing Part G, the applicant should submit AB-105 to the Division of Alcohol Beverages for final approval. If the applicant is only requesting authorization in Part C, the application does not require municipal approval and may be submitted directly to the Division of Alcohol Beverages.

## **Specific Instructions:**

### *Part A: Producer Information*

- Box 1: Enter the legal business name.
- Box 2: Enter the trade name or “doing business as” name, if different than the name in box 1.
- Box 3: Enter the name of the approved agent appointed for your producer permit.
- Box 4: Enter Federal Employer Identification Number (FEIN).
- Box 5: Enter Wisconsin seller’s permit number.
- Box 6: Enter the 15-digit Wisconsin Tax Account Number of the permit that these authorizations should be associated with.
- Box 7: Check the corresponding producer permit type.
- Box 8-10: Enter contact person’s name.
- Box 11: Enter contact person’s phone number.
- Box 12: Enter contact person’s email address.

### *Part B: Production Quantity*

- Check the highest cumulative total of alcohol beverages produced in any one of the three preceding calendar years for each specific permit type held.
  - Do not include alcohol beverages produced under a contract production agreement.
- Enter the calendar year in which the highest cumulative total of alcohol beverages produced was met.
- Enter the exact quantity of alcohol beverages produced.
- If an applicant holds more than one type of permit or multiple permits of the same type, the aggregate number of full-service retail outlets that may be established is the maximum number authorized under their permit type, but not exceeding three full-service retail outlets.
  - Under these circumstances, each authorized full-service retail outlet shall serve as the full-service retail outlet associated with each applicable permit, regardless of whether permittee would otherwise be entitled to fewer full-service retail outlets when calculated under their other permit(s).

### *Part C: Request for Full-Service Retail Sales at the Production Premises*

- Authorization under this portion does not require municipal approval. If the applicant is not seeking other retail authorizations on this form, it can be submitted directly to the Division of Alcohol Beverages.
- Box 1: Enter the date that you would like to begin full-service retail sales.
- Box 2-5: List the premises address for the permit identified in Part A, boxes 5 and 6.
- Box 6: Name the county where the production premises is located.
- Box 7: Name the governing municipality where the production premises is located.

### *Part D: Request for Fixed Full-Service Retail Outlet*

- Authorization under this section must be approved by the municipality in which the retail outlet is located prior to submitting to the Division of Alcohol Beverages for final approval.
- Box 1: Check yes if you are applying to transfer a fixed full-service outlet from one location to another. Fixed Full-Service Retail Outlets may be transferred from place-to-place once per year with approval of the municipality that governs the new location.
- Boxes 2-9: Complete these boxes if you checked yes in box 1 to describe the current premises you are applying to transfer.

- Box 10: Enter the date that you would like to open the full-service retail outlet for business.
- Boxes 11-18: Complete these boxes to describe the location of your new premises.
- Box 19: Describe the premises in detail. Include outdoor spaces if the municipality allows it. Attach a floor plan if possible.

**Example:** The premises is located at 1234 Main St., Realtown, WI 12345 and includes only the first-floor bar room, dining room, kitchen, north storage room, and south office of the 5,000-square-foot building.

- Box 20: Producers may operate a restaurant on the premises of a full-service retail outlet with municipal and division approval.
- Box 21: Check all types of alcohol beverages that will be offered for sale at the full-service retail outlet, including beverages made by the producer or producer group.
- Box 22: Check all the alcohol beverages that are made by the producer under all their permits.
- Box 23: Check all types of service that apply to this full-service retail outlet.
  - Samples mean 3 oz. of beer, 3 oz. of wine, or 0.5 oz. of liquor provided free of charge to an individual.
  - On-premises consumption means alcohol beverages served by the glass to be consumed by the customer at the premises identified in Box 18.
  - Off-premises consumption means alcohol beverages sold in original, unopened containers for customers to consume away from the premises identified in Box 18.

*Part E: Request for Unlimited Transfer Full-Service Retail Outlet*

- Authorizations under Part E must be for dates of operation where the unlimited transfer location will be located at the same premises in the same municipality. You must use a new Form AB-105 to request authorization for each separate premises, regardless of whether the separate premises are in the same municipality.
- Box 1: If you are requesting authorization to initiate or move your unlimited transfer outlet to a specific event like a farmer's market, festival, or other community event, name it here.
- Box 2: List the requested dates of operation. Attach a schedule or calendar of events, if necessary.
- Box 3: List the requested hours of operation. If no hours are listed, the approving municipality and the Division will assume you are seeking authorization to operate during all hours allowed under Chapter 125, Wis. Stats.
- Box 4-9: Identify the premises address.
- Box 10-13: If you are requesting authorization to move your unlimited transfer outlet to a specific event, provide contact information for the event organizer, if not the named applicant.
- Box 14: Describe the premises in detail. Include outdoor spaces if the municipality allows it. Attach a floor plan if possible.

**Example:** The premises is located at 1234 Main St., Realtown, WI, 12345, and includes only the first-floor bar room, dining room, kitchen, north storage room, and south office of the 5,000 square foot building.

**Example:** The premises is the 1,000-square-foot tent within the southwest corner of the parking lot located at XYZ Church at 3456 Main St., Realtown, WI, 12345. All sales and storage of alcohol beverages and records will occur within the 1,000-square-foot tent in the southwest corner of the parking lot.

**Example:** The premises is located at PDQ Park (7890 Main St., Realtown, WI, 12345). A 5,000-square-foot tent will be constructed in the northeast corner of the park bordering the tree line and northern fence. All alcohol beverage sales and consumption will occur at this tent. Premises includes the adjacent north park office and the space between the tent and the office. Alcohol beverages and records will be securely stored in the north park office for the duration of the event.

- Box 15-17: Provide the name and contact information for a person who will be in control of the premises for the duration of the requested time.
- Box 18: Producers may operate a restaurant on the premises of a full-service retail outlet with municipal and Division of Alcohol Beverages approval.
- Box 19: Check all types of alcohol beverages that will be offered for sale at the full-service retail outlet, including beverages made by the producer under all their permits.
- Box 20: Check all the alcohol beverages that are made by the producer under all their permits.
- Box 21: Check all the types of service that apply to this full-service retail outlet.
  - Samples mean 3 oz. of beer, 3 oz. of wine, or 0.5 oz. of liquor provided free of charge to an individual.
  - On-premises consumption means alcohol beverages served by the glass to be consumed by the customer at the premises identified in Box 14.
  - Off-premises consumption means alcohol beverages sold in original, unopened containers for customers to consume

away from the premises identified in Box 14.

#### *Part F: Attestation*

- Read the attestation carefully, then sign and date.

#### *Part G: For Municipal Use Only*

- Box 1: Check yes or no to indicate if the municipality will limit the scope of alcohol beverages offered for sale at this full-service retail outlet.
- Box 2: Check yes or no to indicate if the municipality will impose other requirements or restrictions on the full-service retail outlet.
- Box 3: Describe any limitations the municipality has placed on the full-service retail outlet as indicated in questions 1 or 2. Some limitations may be: parking, zoning, or noise ordinance restrictions; not allowing sales of alcohol beverages for off-premises consumption.
- Box 4-10: The municipal official completing this part should fill in the information requested.

### **Completion and Submission of Form AB-105**

- The producer applicant should complete Parts A, B, and F completely, and either Part C, D, or E, depending on the type of authorization requested.
- If requesting only a Part C authorization, the application can be submitted directly to the Division of Alcohol Beverages. No municipal approval is required for Part C authorizations.
- If requesting a Part D or E authorization, provide the application to the municipality where the proposed full-service retail outlet will be located.
  - The municipality should complete Part G and return it to the producer applicant.
  - The producer applicant should provide the completed AB-105 to the Division of Alcohol Beverages for final approval.
- Sales of alcohol beverages at full-service retail outlets may not commence until the Division of Alcohol Beverages has provided final approval by way of issuing a printed authorization to the applicant to be posted at the retail premises identified in this application.

After Form AB-105 is completed by the producer and approved by the municipality in Part G, submit the form to the Division of Alcohol Beverages for final approval in one of two ways:

- Email: [DORAlcoholPermits@wisconsin.gov](mailto:DORAlcoholPermits@wisconsin.gov)
- Mail the form to the following address:

Wisconsin Department of Revenue  
Division of Alcohol Beverages  
P.O. Box 8934  
Madison, WI 53708-8934

### **Assistance**

This form is designed by the Department of Revenue. If you require assistance with this form, consider reaching out to the Division of Alcohol Beverages for assistance with submission of this application and associated forms.

If you have questions about alcohol beverage laws and regulations, you may contact the Division of Alcohol Beverages using the contact information below.

**Website:** [DOR Alcohol Beverage \(wi.gov\)](http://DORAlcoholBeverage.wi.gov)

**Write:** [DORAlcohol@wisconsin.gov](mailto:DORAlcohol@wisconsin.gov)

**Call:** (608) 264-4573

## **BUSINESS OF THE VILLAGE BOARD**

MEETING DATE: August 3, 2026

PLACEMENT: Action Item

ITEM TITLE: Emily Abel/Barrel & Bottle, LLC, Agent for HJ Development, Property Owner. Conditional Use Permit application for a 10,540 sqft liquor store that includes a tasting bar and non-distilling operation from property located at N96W18768 County Line Road (former Pier 1 Imports). (ACTION)

SUBMITTED BY: Jordan Yanke, Associate Planner

### SUMMARY EXPLANATION:

Emily Abel/Barrel & Bottle, LLC, Agent for HJ Development, Property Owner. Conditional Use Permit application for a 10,540 sqft liquor store that includes a tasting bar and non-distilling operation from property located at N96W18768 County Line Road (former Pier 1 Imports).

### ATTACHMENT:

1. STAFF REPORT\_BARREL & BOTTLE\_CUP
2. CUP# XX-2026 ORDINANCE\_BARREL & BOTTLE\_08.03.26
3. APPLICATION
4. PROJECT NARRATIVE
5. SITE PLAN
6. FLOOR PLAN
7. PUBLIC HEARING NOTICE

### STAFF RECOMMENDATION:

**APPROVE** a Conditional Use Permit application for a 10,540 sqft liquor store that includes a tasting bar and non-distilling operation from property located at N96W18768 County Line Road, subject to (9) conditions as listed in the draft CUP ordinance.

### ACTION BY COMMITTEE:

Plan Commission recommended to **APPROVE** a Conditional Use Permit application for a 10,540 sqft liquor store that includes a tasting bar and non-distilling operation from property located at N96W18768 County Line Road, subject to (9) conditions as listed in the draft CUP ordinance.

# CONDITIONAL USE PERMIT (CUP)

08/03/26 Village Board Meeting

## Emily Abel / Barrel & Bottle / HJ Development

**Village Staff Report & Recommendation**

**Germantown, Wisconsin**

### SUMMARY

Emily Abel/Barrel & Bottle, LLC, Agent for HJ Development, Property Owner. Conditional Use Permit application for a 10,540 sqft liquor store that includes a tasting bar and non-distilling operation from property located at N96W18768 County Line Road (former Pier 1 Imports).

**Property Location:** N96W18768 County Line Road

**Applicant/**

**Owner:**

Emily Abel  
Barrel & Bottle, LLC  
2226 Sherman Parc Ct  
Jackson, WI 53037

HJ Development  
2655 Chesire LN N  
Plymouth, MN 55447

**Zoning:** Planned Development District (PDD-45)

| Adjacent Land Uses |                                     | Zoning   |
|--------------------|-------------------------------------|----------|
| North              | Commercial/Residential              | B-2/Rs-4 |
| South              | Commercial/Residential (Men. Falls) | N/A      |
| East               | Commercial                          | B-1      |
| West               | Commercial                          | B-1      |



**Background/Proposal**

Emily Abel/Barrel & Bottle, LLC, Agent for HJ Development, Property Owner. Conditional Use Permit application for a 10,540 sqft liquor store that includes a tasting bar and non-distilling operation from property located at N96W18768 County Line Road (former Pier 1 Imports).

As shown in the application materials, Barrel & Bottle is a retail-focused liquor store that will include an accessory tasting bar for on-site consumption and a non-distilling production component. The facility will occupy a total of 10,540 sqft of existing building space within the Germantown Plaza shopping center. The location for Barrel & Bottle is the same tenant space where Pier 1 Imports was located previously before closing its store 2020. Note the following list of details associated with the proposal based on the description and floor plan submitted by the applicant:

- Hours of Operation
  - Monday – Sunday (9:00AM – 9:00PM)
- Number of Employees
  - 8-10 Employees
- Floor space designated to retail operations, including spirits and wine shelving, cold walk-in beer storage, seasonal displays, merchandise, and customer service areas.
- Tasting bar (16-18 feet) for on-site consumption along the rear wall of facility for product sampling and educational/customer engagement efforts.
- Limited production space, office, and storage area for non-public operations. No distillation or fermentation activities on site.
- Full restrooms.
- No outdoor activity, live entertainment, or amplified music proposed.
- Shared parking throughout existing shopping center lot (~250 spaces).

The application shows no exterior site/building alterations will be made. While building signage is allowed for the new user, there is no signage proposed at this time. Existing driveway access to the site will remain as is, with a primary driveway serving the site to/from County Line Road. Vehicles can also access the site to/from the east and west on private drives serving the parking lot. A shared parking lot on site serves the shopping center and contains approximately 250 parking spaces.

**Staff Comments****Community Development: Planning and Zoning**

Although Barrel & Bottle's proposed "tasting bar" is not specifically listed as a use in any of the Village's zoning districts, the proposed use can be allowed at the subject location with a conditional use permit. Allowed land use at the site is governed by a Planned Development District (PDD-45) ordinance that was approved for the Germantown Plaza shopping center in 2019 to accommodate a building expansion. Under the ordinance, it stipulates that the list of uses allowed in the PDD shall follow those listed under the B-1: Neighborhood Business District in the zoning code, which permits "taverns" as a conditional use. Arguably, the proposed tasting bar will not function as a traditional tavern but given the lack of specificity for a tasting bar in the zoning code, staff determined it to be closest (or most similar) to a tavern and thus can be allowed with a conditional use permit. Note that the liquor store component is permitted by right per the B-1 classification.

Staff understands that the facility will operate under Wisconsin's Class D Distillery Permit (Wis. Stat. § 125.52), which allows for the inclusion of a tasting bar for samples and on-site consumption. The applicant also advises Barrel & Bottle qualifies for a Full-Service Retail (FSR) Privilege under Wis. Stat. § 125.52, subject to the Wisconsin Department of Revenue approval (DOR), which allows the service and sale of distilled spirits without requiring a municipal retail license from the Village. Nonetheless, staff has added a condition to ensure proper State and local liquor licensing is obtained, which includes any necessary bartender licenses.

*Community Development: Inspection Services*

State agency (DSPS) approved plans and a \$20,000 occupancy bond are required by Inspection Services. The Village of Germantown is an authorized delegated agent of DSPS to provide all commercial plan review and inspection services through SAFEBuilt of Wisconsin and the Village of Germantown.

**VILLAGE STAFF RECOMMENDATION**

**APPROVE** a Conditional Use Permit for a 10,540 sqft liquor store that includes a tasting bar ("tavern") and non-distilling operation from property located at N96W18768 County Line Road, subject to the following conditions:

1. The uses and activities allowed on the property shall be limited to those uses and activities specified in the Conditional Use Permit (CUP) application and supporting documents received May 12, 2016. Days and hours of operation shall be limited to those specified in the CUP supporting documents submitted to the Village.
2. The owner/operator is responsible for reporting any significant changes in the type, intensity, amount, or location of the land uses and activities, days and hours of operation, size or location or other operational characteristics of said uses and activities authorized under this CUP to the Village Zoning Administrator.
3. If the use, activities and/or operation subject of this permit falls out of conformity with the conditions herein, or, where there is a change in the nature, character, intensity or extent of the activities or uses which causes problems or harmful effects that were not anticipated at the time of approval of this CUP, the Conditional Use Permit (CUP) may be modified or terminated by the Village Board by the amendment to or addition of conditions after public hearing thereon.
4. All temporary and permanent exterior signs require a permit and shall comply with all current sign regulations. Off-premises advertising and directional signage is regulated by the Village and requires a permit if/when allowed.
5. All future site improvements, including all building, parking area, landscaping, storm water management facilities, signage, exterior lighting, and any other improvements made to or on the property that are necessary for the land uses and activities authorized under this CUP shall be submitted for review and approval by the Village through the Zoning Permit or Site Plan application process as determined by the Village Zoning Administrator. If required, Site Plan review and approval will include Plan Commission review and approval.
6. State agency (DSPS) approved plans and a \$20,000 occupancy bond are required by Inspection Services. The Village of Germantown is an authorized

delegated agent of DSPS and may be used as an alternative to provide all commercial plan review and inspection services through SAFEBuilt of WI and the Village of Germantown.

7. The owner/operator shall be responsible for obtaining any/all liquor license(s) required under State statutes and/or Village ordinances, and, complying with same for the facility. The owner/operator is responsible for contacting the Village Clerk's Office to initiate any license applications separate from the Conditional Use Permit approval process, as deemed necessary/required.
8. Pursuant to Section 17.47 of the Zoning Code, if the Village observes and/or receives complaints regarding negative impacts associated with and/or created by business-related activities conducted on the property, including but not limited to noise, dust or other airborne materials, the Property Owner/Operator shall work with the Village to identify the source of such impact(s), evaluate alternative mitigation measures, and implement a mutually-agreeable solution to mitigating the impact(s).
9. This Conditional Use Permit (CUP) shall be non-transferable. In the event there is a change in the owner/operator of the facility for which this CUP was issued, this CUP shall become null and void. If a new owner/operator wants to operate a liquor store with a tasting bar ("tavern"), a new CUP would have to be obtained pursuant to Sections 17.28 and 17.42 of the Zoning Code to operate said business from this property.

**CUP # \_\_-2026**

Document No.

**CONDITIONAL USE PERMIT**

Document Title

**VILLAGE OF GERMANTOWN, WASHINGTON COUNTY, WISCONSIN  
CONDITIONAL USE ZONING PERMIT**

Whereas:

**Emily Abel, Agent for Barrel & Bottle, LLC, Applicant and  
HJ Development (Germantown 2024, LLC), Property Owner**

agree to comply with applicable Codes and Ordinances of the Village of Germantown, Wisconsin, and further agrees that all work done pursuant to the permission granted herewith will conform with the applications and drawings filed with and approvals granted by officials of the Village for the purpose of obtaining this permit.

Now, therefore, this permit is issued to allow for the operation of a retail liquor store, tasting room ("tavern"), and non-distilling operation from the property located at N96W18786 County Line Road pursuant to Section 17.28(3)(m) of the Village Zoning Code.

Name &amp; Return Address:

**Village of Germantown  
P.O. Box 337  
Germantown, WI 53022**

Parcel Identification No:

**GTNV\_324-968****On the following described property located in the Village of Germantown,  
Washington County, Wisconsin:**

PARCEL 1: LOT 1 OF CERTIFIED SURVEY MAP NO. 5589, RECORDED ON MARCH 5, 2003, IN VOLUME 40 OF CERTIFIED SURVEY MAPS, ON PAGES 159-162, AS DOCUMENT NO. 978214, BEING A PART OF THE SOUTHEAST 1/4 OF THE SOUTHEAST 1/4 OF SECTION 32, TOWN 9 NORTH, RANGE 20 EAST, AND THE SOUTHWEST 1/4 OF THE SOUTHWEST 1/4 OF SECTION 33, TOWN 9 NORTH, RANGE 20 EAST, IN THE VILLAGE OF GERMANTOWN, WASHINGTON COUNTY, WISCONSIN.

PARCEL 2: TOGETHER WITH EASEMENT FOR INGRESS, EGRESS AND PARKING PURPOSES FOR THE BENEFIT OF THE PROPERTY OVER THE PHASE II PROPERTY AS CONTAINED IN SECTION 2.1 OF THE OPERATION AND EASEMENT AGREEMENT MADE BETWEEN ALDI INC., (WISCONSIN) AND CONTINENTAL 111 FUND, LLC, DATED FEBRUARY 27, 2003 AND RECORDED ON MARCH 5, 2003, AS DOCUMENT NO. 978212, AND ALSO RECORDED MARCH 18, 2003, AS DOCUMENT NO. 980275, AS AMENDED BY FIRST AMENDMENT TO OPERATION AND EASEMENT AGREEMENT RECORDED AS DOCUMENT NO. 1108815.

PARCEL 3: TOGETHER WITH EASEMENT FOR GRANTING INGRESS AND EGRESS FOR MOTOR VEHICLES (INCLUDING TRUCKS) AND PEDESTRIANS FOR THE BENEFIT OF THE PROPERTY SET FORTH IN DECLARATION OF ACCESS EASEMENT SET FORTH IN AN INSTRUMENT DATED MARCH 1, 2004 AND RECORDED NOVEMBER 10, 2005, AS DOCUMENT NO. 1108816, WHICH BENEFITS THE PROPERTY TO BE SHARED WITH THE OCCUPANTS OF THE BURDENED PROPERTY.

Tax Key No: 324-968

Address: N96W18786 County Line Road

**Pursuant to the following condition(s):**

1. The uses and activities allowed on the property shall be limited to those uses and activities specified in the Conditional Use Permit (CUP) application and supporting documents received May 12, 2026. Days and hours of operation shall be limited to those specified in the CUP supporting documents and in Exhibit A attached.
2. The owner/operator is responsible for reporting any significant changes in the type, intensity, amount, or location of the land uses and activities, days and hours of operation, size or location or other operational characteristics of said uses and activities authorized under this CUP to the Village Zoning Administrator.
3. If the use, activities and/or operation subject of this permit falls out of conformity with the conditions herein, or, where there is a change in the nature, character, intensity or extent of the activities or uses which causes problems or harmful effects that were not anticipated at the time of approval of this CUP, the Conditional Use Permit (CUP) may be modified or terminated by the Village Board by the amendment to or addition of conditions after public hearing thereon.
4. All temporary and permanent exterior signs require a permit and shall comply with all current sign regulations. Off-premises advertising and directional signage is regulated by the Village and requires a permit if/when allowed.
5. All future site improvements, including all building, parking area, landscaping, storm water management facilities, signage, exterior lighting, and any other improvements made to or on the property that are necessary for the land uses and activities authorized under this CUP shall be submitted for review and approval by the Village through the Zoning Permit or Site Plan application process as determined by the Village Zoning Administrator. If required, Site Plan review and approval will include Plan Commission review and approval.
6. State agency (DSPA) approved plans and a \$20,000 occupancy bond are required by Inspection Services. The Village of Germantown is an authorized delegated agent of DSPA and may be used as an alternative to provide all commercial plan review and inspection services through SAFEBuilt of WI and the Village of Germantown.
7. The owner/operator shall be responsible for obtaining any/all liquor license(s) required under State statutes and/or Village ordinances, and, complying with same for the facility. The owner/operator is responsible for contacting the Village Clerk's Office to initiate any license applications separate from the Conditional Use Permit approval process, as deemed necessary/required.
8. Pursuant to Section 17.47 of the Zoning Code, if the Village observes and/or receives complaints regarding negative impacts associated with and/or created by business-related activities conducted on the property, including but not limited to noise, dust or other airborne materials, the Property Owner/Operator shall work with the Village to identify the source of such impact(s), evaluate alternative mitigation measures, and implement a mutually-agreeable solution to mitigating the impact(s).
9. This Conditional Use Permit (CUP) shall be non-transferable. In the event there is a change in the owner/operator of the facility for which this CUP was issued, this CUP shall become null and void. If a new owner/operator wants to operate a liquor store with a tasting bar ("tavern"), a new CUP would have to be obtained pursuant to Sections 17.28 and 17.42 of the Zoning Code to operate said business from this property.

Granted by the Village Board of the Village of Germantown, Washington County, Wisconsin  
on the \_\_\_\_\_ day of \_\_\_\_\_, 2026.

\_\_\_\_\_  
Robert A. Soderberg, Village President

ATTEST:

\_\_\_\_\_  
Donna Ott, Village Clerk

STATE OF WISCONSIN ) SS  
WASHINGTON COUNTY)  
Personally came before me this \_\_\_\_\_ day of \_\_\_\_\_, 2026, the above-  
named Robert A. Soderberg, Village President, and Donna Ott, Village Clerk, to me known to  
be the persons who executed the foregoing instrument and acknowledged the same.

\_\_\_\_\_  
{type or print name of Notary on this line}

\_\_\_\_\_  
{signature of Notary on this line}

Notary Public, State of Wisconsin  
My Commission Expires: \_\_\_\_\_

**ACCEPTANCE OF TERMS AND CONDITIONS BY APPLICANT**

I hereby accept the terms and conditions set forth in this Permit and realize that non-adherence to the terms and conditions as stated hereon may result in the revocation of this Permit by the Village of Germantown.

Dated this \_\_\_\_ day of \_\_\_\_\_, 2026

\_\_\_\_\_  
Emily Abel, Agent for Barrel & Bottle, LLC, Applicant

STATE OF WISCONSIN) SS  
\_\_\_\_\_) COUNTY)

Personally came before me this \_\_\_\_ day of \_\_\_\_\_, 2026, being the above named \_\_\_\_\_, to me known to be the person who executed the foregoing instrument and acknowledged the same.

\_\_\_\_\_  
{type or print name of Notary on this line}

\_\_\_\_\_  
{signature of Notary on this line}

Notary Public, State of Wisconsin  
My Commission Expires: \_\_\_\_\_

**ACCEPTANCE OF TERMS AND CONDITIONS BY PROPERTY OWNER**

I hereby accept the terms and conditions set forth in this Permit and realize that non-adherence to the terms and conditions as stated hereon may result in the revocation of this Permit by the Village of Germantown.

Dated this \_\_\_\_ day of \_\_\_\_\_, 2026

\_\_\_\_\_  
Jason Gauthier, HJ Development (Germantown 2024, LLC), Property Owner

STATE OF WISCONSIN) SS  
\_\_\_\_\_) COUNTY)

Personally came before me this \_\_\_\_ day of \_\_\_\_\_, 2026, being the above named \_\_\_\_\_, to me known to be the person who executed the foregoing instrument and acknowledged the same.

\_\_\_\_\_  
{type or print name of Notary on this line}

\_\_\_\_\_  
{signature of Notary on this line}

Notary Public, State of Wisconsin  
My Commission Expires: \_\_\_\_\_

This instrument was drafted by:

Jordan Yanke  
Associate Planner  
Village of Germantown, Wisconsin

## EXHIBIT A

### Uses/Activities – Conditional Use Permit in B-1: Neighborhood Business District/PDD-45

- Hours of Operation
  - Monday – Sunday (9:00AM – 9:00PM)
- Number of Employees
  - 8-10 Employees
- Floor space designated to retail operations, including spirits and wine shelving, cold walk-in beer storage, seasonal displays, merchandise, and customer service areas.
- Tasting bar (16-18 feet) for on-site consumption along the rear wall of facility for product sampling and educational/customer engagement efforts.
- Limited production space, office, and storage area for non-public operations. No distillation or fermentation activities on site.
- Full restrooms.
- No outdoor activity, live entertainment, or amplified music proposed.
- Shared parking throughout existing shopping center lot (~250 spaces).



**Village of**  
★★★  
**Germantown**  
Willkommen

Community Development Department  
Jeffrey Retzlaff, Community Development Director  
N112W17001 Mequon Road, PO Box 337  
Germantown, WI 53022

Fee must accompany application.

X \$1680. CUP Review Fee  
Paid On: 5/12/26 Check/CC CC

## CONDITIONAL USE PERMIT APPLICATION

Pursuant to Section 17.42 of the Municipal Code

Please read and complete this application carefully. All applications must be signed and dated.

1

APPLICANT/AGENT:

Emily Abel  
Barrel & Bottle LLC  
2226 Sherman Park Ct  
Jackson WI 53037  
Phone [REDACTED]  
Email [REDACTED]

PROPERTY OWNER:

HS Development  
2655 Cheshire Ln N  
Plymouth MN 55447  
Phone [REDACTED]  
Email [REDACTED]

PLEASE NOTE: Applicant contact information has been redacted for security purposes.

2

TO WHOM SHOULD THE PERMIT BE ISSUED?

Barrel & Bottle LLC

3

PROPERTY ADDRESS

TAX KEY NUMBER

N96 W8768 County line RD Germantown 53022 GTNV 324-968

4

DESCRIPTION OF EXISTING OPERATION

Briefly describe the use as it exists today, including use, size, number of employees, hours of operation, etc. If this permit involves new construction, describe the current status of the property, e.g. "vacant." Use additional pages if necessary.

Attached

Multi-Tenant Commercial Retail Shopping Center



5

## DESCRIPTION OF PROPOSED OPERATION

Write the name of the proposed conditional use exactly as it appears in the Municipal Code.

Liquor Stores

Describe the proposed use, including size, number of employees, hours of operation and extent of any new construction/alterations.

Retail liquor store with accessory tasting Area and limited back of the house production  
with a non-distilling Pot Still operation 8-10 Employees, 9-9 daily  
Interior TI only

6

## METES AND BOUNDS LEGAL DESCRIPTION OF PROPERTY - REQUIRED

Please submit a separate WORD Document with this information.

7

## SUPPORTING DOCUMENTATION:

- ☐ Site Plan and elevations for new construction (can be conceptual)
- ☐ Photos of existing use and/or proposed use operating elsewhere
- ☐ \_\_\_\_\_
- ☐ \_\_\_\_\_

8

## READ AND INITIAL THE FOLLOWING:

EAA I understand that the Village is under no obligation to issue a Conditional Use Permit and will do so only if the applicant successfully demonstrates that the proposed use is harmonious with the neighborhood and the long-range goals of the Village.

EAA I will notify the Village if any aspects of the conditional use changes. I understand that failure to do so may result in the revocation of the CUP.

EAA I understand that a Conditional Use Permit is valid only if the conditions and restrictions of the permit are met. I understand that failure to comply with any aspect of the permit may result in revocation.

9

## SIGNATURES - ALL APPLICATIONS MUST BE SIGNED BY OWNER

Emily Abel

05/12/2026

Applicant

Date

Kierstein Schilling

05/12/2020

Owner

Date

## **Barrel & Bottle Liquor Co.**

**N96 W18768 County Line Rd, Germantown, WI 53022**

Barrel & Bottle Liquor Co. is a retail-focused liquor store concept combining traditional off-premise alcohol sales with a limited accessory tasting and educational component.

The primary use of the approximately 10,540 sq. ft. facility is retail sales of packaged alcoholic beverages, including spirits, wine, beer, and THC beverages, with a focus on craft, local, and specialty products. The business is designed as a full-service retail environment intended to provide a curated customer experience while remaining compatible with surrounding commercial uses within the Germantown Plaza.

The majority of the facility is dedicated to retail operations, including spirits and wine shelving, cold beer storage, seasonal displays, customer service areas, and related merchandise. The retail floor includes approximately eight 20-foot double-sided gondola shelving units, a walk-in cigar humidor, and a 12-door walk-in beer cooler located along the left wall adjacent to the customer service and online pickup area.

A limited tasting area is located along the rear interior wall of the facility and is intended solely for product sampling, education, and customer engagement. The tasting area is accessory to the primary retail use and is not intended to function as a traditional tavern, bar, or entertainment venue. Seating within the tasting area is limited in scale and designed to support controlled tasting experiences and educational events.

Adjacent to the tasting area is a fill-your-own bottle station allowing controlled customer participation in bottle filling under staff supervision. A viewing window located next to the tasting area provides visibility into the back-of-house production and barrel storage area without allowing public access.

A limited production, office, and storage area is located in the rear, non-public portion of the facility and occupies no more than 10% of the total floor area. Operations within this space are limited to low-impact activities associated with a non-distilling producer model, including blending, proofing, infusing, bottling, and labeling sourced spirits under a private label program. No distillation, fermentation, or other high-impact manufacturing activities will occur on site.

The business intends to operate in compliance with Wisconsin Statute § 125.52 governing craft distillery permits and non-distilling producer activities. All tasting and service activities will be conducted in accordance with applicable state and local regulations and responsible alcohol service practices.

The operation is designed as a controlled, indoor, retail-oriented environment with no outdoor activity, no live entertainment, no amplified music, and no late-night operations.

Existing shared parking within the Germantown Plaza is adequate to support the proposed use.

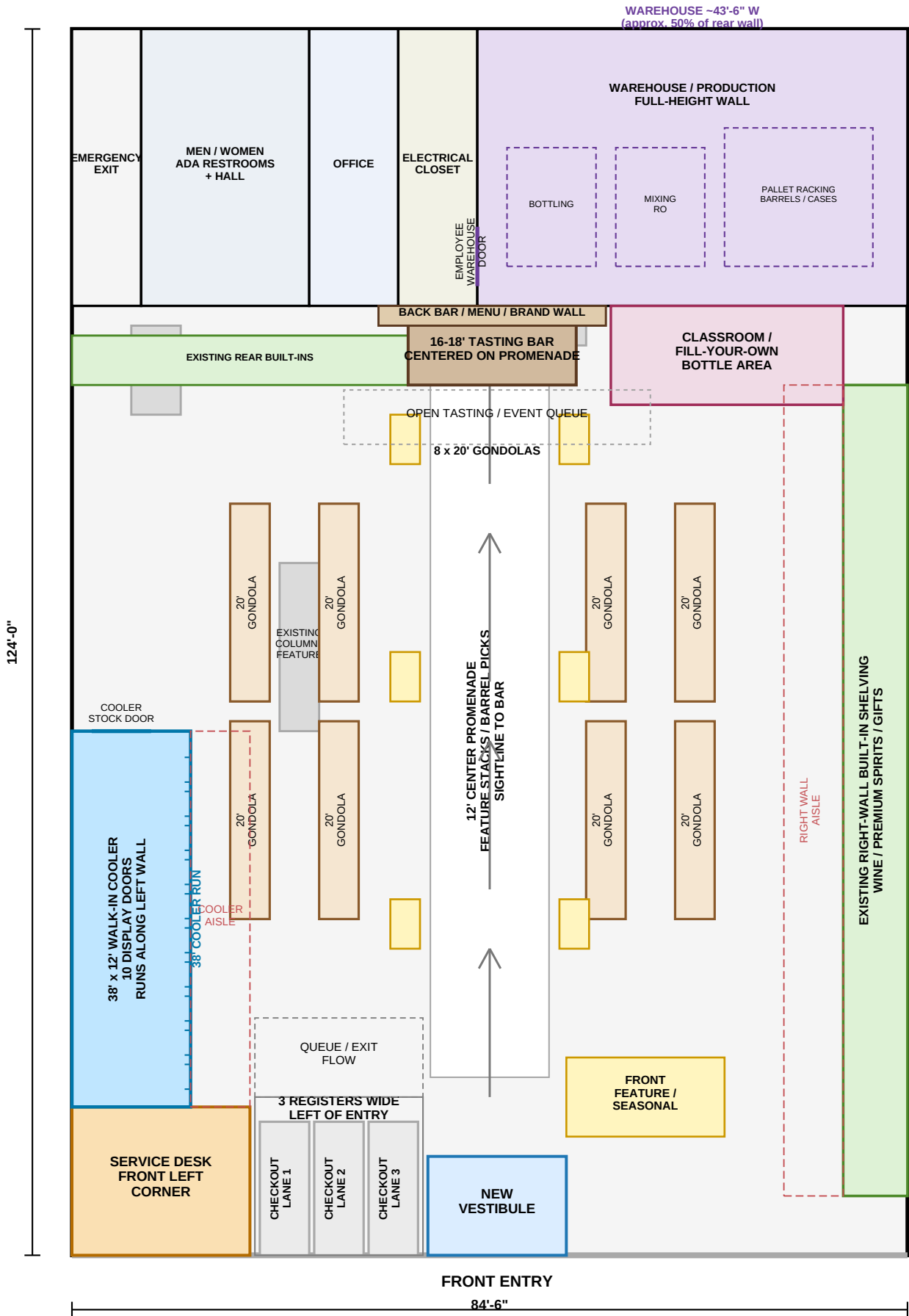
Barrel & Bottle Liquor Co. is intended to complement the Germantown Plaza by activating existing retail space with a unique, community-oriented concept focused on retail, education, and customer experience while remaining compatible with surrounding commercial development.

**NORTH SIDE OF MAPLE AND COUNTY LINE ROAD  
GERMANTOWN, WI 53022**

Page 53 of 88

Barrel & Bottle Liquor Co. - Scaled CUP Fixture Plan v4

Old Pier 1 / Retail C tenant only. Front entrance at bottom. Conceptual plan for CUP presentation - final dimensions and code compliance by architect/contractor.



Spec Basis / Assumptions

- Tenant shell: 84'-6" W x 124'-0" D from prior plan interpretation; field verify.
- Cooler: Manufacturer drawing: 38'-0" x 12'-0" footprint; placed on left wall after service desk.
- Shelving: Eight 20' gondola sections shown as four rows; actual fixture height/depth by supplier.
- Back wall: Left-to-right: emergency exit, ADA restrooms/hall, office, electrical closet, warehouse/production.
- Warehouse: Shown as full-height, approx. 50% of rear wall with production, receiving, pallet storage.
- Customer flow: Vestibule directs entry to center promenade; exit passes checkout lanes for loss prevention.
- Code note: ADA, egress, fire/sprinkler, electrical, plumbing, and alcohol/security requirements to be verified.

Legend

- Cooler
- Service / checkout
- Gondola shelving
- Existing built-ins
- Bar
- Classroom / FYOB
- Warehouse

Scale bar

20 ft (approx.)

# Barrel & Bottle - Fixture / Room Schedule v4

Use with the attached scaled concept plan. Dimensions are planning-level and should be field verified before construction documents.

| Area                   | Location                     | Planning size                                            | Notes                                                                                         |
|------------------------|------------------------------|----------------------------------------------------------|-----------------------------------------------------------------------------------------------|
| Tenant shell           | Old Pier 1 / Retail C        | 84'-6" W x 124'-0" D                                     | Deep/narrow layout; front entry at bottom of plan.                                            |
| Service desk           | Front left corner            | Approx. 18' x 15' shown                                  | Customer service, special orders, pickup, lottery/returns if applicable.                      |
| Walk-in cooler         | Left wall after service desk | 38' x 12'                                                | Manufacturer cooler drawing; 10 display door face shown to sales aisle.                       |
| Checkout               | Left of front door/vestibule | 3 lanes shown                                            | Three lanes shown wide across the front, left of vestibule; maintain queue and ADA clearance. |
| Vestibule              | Front center                 | Approx. 14' x 10' shown                                  | Flow control and weather buffer.                                                              |
| Gondolas               | Center retail field          | 8 x 20' sections; 4 rows                                 | Assumes 4' double-sided gondola depth; final fixture dimensions by supplier.                  |
| Center promenade       | Front to bar                 | Approx. 12' clear                                        | Feature stacks, barrel picks, seasonal displays, event flow.                                  |
| Existing built-ins     | Right wall                   | Retain existing                                          | Wine, premium spirits, gifts, accessories.                                                    |
| Bar                    | Rear retail area             | 16-18' planned                                           | Centered on main sightline; in front of back/service wall.                                    |
| Classroom / FYOB       | Right rear retail area       | Approx. 23.5' x 10' shown                                | Bottle-your-own, tastings, classes, private events.                                           |
| Back wall sequence     | Left to right                | Emergency exit, restrooms, office, electrical, warehouse | Based on latest site notes and interior photos.                                               |
| Warehouse / production | Rear/right half              | Approx. 43.5' W x 28' D shown                            | Full-height wall; production, receiving, pallet racking, storage, packaging.                  |

**Planning disclaimer:** This is a CUP/merchandising concept exhibit, not stamped construction drawings. Verify all dimensions, egress, ADA, structural, MEP, fire, refrigeration, and licensing requirements.

## NOTICE OF PUBLIC HEARING VILLAGE OF GERMANTOWN

NOTICE is hereby given that a Public Hearing will be held before the Village of Germantown Plan Commission at the Germantown Village Hall located at N112W17001 Mequon Road, Germantown, Wisconsin and virtually through the WebEx platform on the following date and at the time noted below (or soon thereafter):

DATE: Monday, July 13<sup>th</sup>, 2026  
TIME: 6:30 pm or later

The purpose of said hearing is to hear all parties, their attorneys or agents, for or against the following application for a CONDITIONAL USE PERMIT for a retail liquor store, tasting room ("tavern"), and non-distilling operation from the property described below pursuant to Section 17.28(3)(m) of the Village Zoning Code.

Applicant: Emily Abel/Barrel & Bottle LLC, Agent for HJ Development, Property Owner  
Property Address: N96W18768 County Line Road (former Pier 1 Imports); Tax Key (GTNV\_324968)

### Property Description:

PARCEL 1: LOT 1 OF CERTIFIED SURVEY MAP NO. 5589, RECORDED ON MARCH 5, 2003, IN VOLUME 40 OF CERTIFIED SURVEY MAPS, ON PAGES 159-162, AS DOCUMENT NO. 978214, BEING A PART OF THE SOUTHEAST 1/4 OF THE SOUTHEAST 1/4 OF SECTION 32, TOWN 9 NORTH, RANGE 20 EAST, AND THE SOUTHWEST 1/4 OF THE SOUTHWEST 1/4 OF SECTION 33, TOWN 9 NORTH, RANGE 20 EAST, IN THE VILLAGE OF GERMANTOWN, WASHINGTON COUNTY, WISCONSIN.

PARCEL 2: TOGETHER WITH EASEMENT FOR INGRESS, EGRESS AND PARKING PURPOSES FOR THE BENEFIT OF THE PROPERTY OVER THE PHASE II PROPERTY AS CONTAINED IN SECTION 2.1 OF THE OPERATION AND EASEMENT AGREEMENT MADE BETWEEN ALDI INC., (WISCONSIN) AND CONTINENTAL 111FUND, LLC, DATED FEBRUARY 27, 2003 AND RECORDED ON MARCH 5, 2003, AS DOCUMENT NO. 978212, AND ALSO RECORDED MARCH 18, 2003, AS DOCUMENT NO. 980275, AS AMENDED BY FIRST AMENDMENT TO OPERATION AND EASEMENT AGREEMENT RECORDED AS DOCUMENT NO. 1108815.

PARCEL 3: TOGETHER WITH EASEMENT FOR GRANTING INGRESS AND EGRESS FOR MOTOR VEHICLES (INCLUDING TRUCKS) AND PEDESTRIANS FOR THE BENEFIT OF THE PROPERTY SET FORTH IN DECLARATION OF ACCESS EASEMENT SET FORTH IN AN INSTRUMENT DATED MARCH 1, 2004 AND RECORDED NOVEMBER 10, 2005, AS DOCUMENT NO. 1108816, WHICH BENEFITS THE PROPERTY TO BE SHARED WITH THE OCCUPANTS OF THE BURDENED PROPERTY.

A copy of the application and a map showing the property described above are on file at the Community Development Department-Planning & Zoning Services office in the Germantown Village Hall and can be viewed on the Village's website by following this link:

Website: <https://www.germantownwi.gov/589/Proposed-Development-Projects>

Citizens wishing to submit any public comments should do so by sending them by email to: [comments@germantownwi.gov](mailto:comments@germantownwi.gov) no later than 4:00pm on the meeting date listed above.

Donna Ott, Village Clerk  
Dated this 17<sup>th</sup> day of June 2026

To Be Published On: June 24<sup>th</sup> and July 1<sup>st</sup>, 2026

## **BUSINESS OF THE VILLAGE BOARD**

MEETING DATE: August 3, 2026

PLACEMENT: Action Item

ITEM TITLE: Jessica Poppert/Poppert Preschool North, Agent for Lindsay Mongoven and West Pointe Capital, LLC, Property Owner. Conditional Use Permit application for a change of ownership for an existing daycare center/preschool located at W164N11310 Squire Drive. (ACTION)

SUBMITTED BY: Jordan Yanke, Associate Planner

### SUMMARY EXPLANATION:

Jessica Poppert/Poppert Preschool North, Agent for Lindsay Mongoven and West Pointe Capital, LLC, Property Owner. Conditional Use Permit application for a change of ownership for an existing daycare center/preschool located at W164N11310 Squire Drive.

### ATTACHMENT:

1. STAFF REPORT\_POPPERT PRESCHOOL\_CUP
2. CUP# XX-2026 ORDINANCE\_POPPERT PRESCHOOL NORTH\_08.03.26
3. APPLICATION
4. SITE PLAN
5. FLOOR PLAN
6. CUP #11-95
7. PUBLIC HEARING NOTICE

### STAFF RECOMMENDATION:

**APPROVE** a Conditional Use Permit application for a change of ownership for an existing daycare center/preschool located at W164N11310 Squire Drive, subject to (9) conditions as listed in the draft CUP ordinance.

### ACTION BY COMMITTEE:

Plan Commission recommended to **APPROVE** a Conditional Use Permit application for a change of ownership for an existing daycare center/preschool located at W164N11310 Squire Drive, subject to (9) conditions as listed in the draft CUP ordinance.

# CONDITIONAL USE PERMIT (CUP)

08/03/26 Village Board Meeting

## Jessica Poppert / Poppert Preschool North / West Pointe Capital

*Village Staff Report & Recommendation*

*Germantown, Wisconsin*

### SUMMARY

Jessica Poppert/Poppert Preschool North, Agent for Lindsay Mongoven and West Pointe Capital, LLC, Property Owner. Conditional Use Permit application for a change of ownership for an existing daycare center/preschool located at W164N11310 Squire Drive.

**Property Location:** W164N11310 Squire Drive

**Applicant/**

**Owner:**

Poppert Preschool North  
W164N11310 Squire Drive  
Germantown, WI 53022

West Pointe Capital, LLC  
N44W7230 West Pointe St  
Cedarburg, WI 53012

**Zoning:** B-1: Neighborhood Business District

| Adjacent Land Uses |                                        | Zoning |
|--------------------|----------------------------------------|--------|
| North              | Business/Residential (Assisted Living) | B-1    |
| South              | Business (Shopping Center)             | PDD-35 |
| East               | Residential (Condominium Complex)      | PDD-12 |
| West               | Institutional (Church)                 | I      |



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**Background/Proposal**

Jessica Poppert/Poppert Preschool North, Agent for Lindsay Mongoven and West Pointe Capital, LLC, Property Owner. Conditional Use Permit application for a change of ownership for an existing daycare center/preschool located at W164N11310 Squire Drive.

In 1995, the Village granted a Conditional Use Permit (CUP 11-95) to Jackie Katz for the operation of a daycare center at the location. The facility (Willow Creek) had been in operation since but ceased its operations recently. The applicant, Jessica Poppert of Poppert Preschool North, is purchasing the facility and will continue operating a daycare center/preschool at the location. Under the original CUP (attached), a stipulation was included specifying that the CUP is “non-transferable” to a new owner.

Given this stipulation, the applicant has applied for a new Conditional Use Permit to operate a daycare center/preschool from the property under Poppert ownership. At the same time, the applicant’s request includes an increase to the total number of children allowed on site as compared to the original CUP issued to Katz. The original CUP limited the total number of children on site to 148, but through a recent Building Inspection Report submitted to the State Department of Children and Families for the new owner, the Village’s Building Inspector confirms that the facility can serve a total of 170 children. Aside from this increase in children, the application materials illustrate that all other aspects of the existing operation would remain the same.

**Conditional Use Permit (CUP)**

This project proposes a Conditional Use Permit. The details of what is requested under the application are listed below:

- Conditional Use Permit in B-1: Neighborhood Business District
  - Operation of a “child care, daycare, or preschool center” at subject location by new owner.
  - Total number of children allowed on site is 170 maximum.
  - Other aspects of operation:
    - Hours of Operation: Monday to Saturday 6:30AM – 6:00PM.
    - 30 employees.
    - *Note: No exterior/interior alterations to the building or site are proposed as part of this application submittal. New signage will require a permit prior to installation.*

**Staff Comments**Community Development: Planning and Zoning

The zoning for the site is B-1: Neighborhood Business District, which allows the operation of a “child care, daycare, or preschool center” with a Conditional Use Permit. Given that a daycare facility has been operating at the subject location under an approved CUP since 1995, and the only difference in operational characteristics under the new owner’s CUP application is an increase in the total number of children allowed on site (148 to 170) as approved by the Village’s Building Inspector, staff does not have concerns with the proposal.

**VILLAGE STAFF RECOMMENDATION**

**APPROVE** a Conditional Use Permit for the operation of a child care, daycare, or preschool center at W164N11310 Squire Drive, subject to the following conditions:

1. The uses and activities allowed on the property shall be limited to those uses and activities specified in the Conditional Use Permit (CUP) application documents received June 16, 2026.
2. The total number of children allowed on site shall not exceed 170. Hours of operation shall be Monday to Saturday 6:30AM – 6:00PM.
3. The owner/operator and daycare facility shall remain in continuous compliance with all applicable State and Federal regulations and licensing, allowing that they may be more restrictive than local Village regulations.
4. The owner/operator is responsible for reporting any significant changes in the type, intensity, amount, or location of the land uses and activities, days and hours of operation, size or location or other operational characteristics of said uses and activities authorized under this CUP to the Village Zoning Administrator.
5. If the use, activities and/or operation subject of this permit falls out of conformity with the conditions herein, or, where there is a change in the nature, character, intensity or extent of the activities or uses which causes problems or harmful effects that were not anticipated at the time of approval of this CUP, the Conditional Use Permit (CUP) may be modified or terminated by the Village Board by the amendment to or addition of conditions after public hearing thereon.
6. All temporary and permanent exterior signs require a permit and shall comply with all current sign regulations. Off-premises advertising and directional signage is regulated by the Village and requires a permit if/when allowed.
7. All future site improvements, including all building, parking area, landscaping, storm water management facilities, signage, exterior lighting, and any other improvements made to or on the property that are necessary for the land uses and activities authorized under this CUP shall be submitted for review and approval by the Village through the Zoning Permit or Site Plan application process as determined by the Village Zoning Administrator. If required, Site Plan review and approval will include Plan Commission review and approval.
8. Pursuant to Section 17.47 of the Zoning Code, if the Village observes and/or receives complaints regarding negative impacts associated with and/or created by business-related activities conducted on the property, including but not limited to noise, dust or other airborne materials, the Property Owner/Operator shall work with the Village to identify the source of such impact(s), evaluate alternative mitigation measures, and implement a mutually-agreeable solution to mitigating the impact(s).
9. This Conditional Use Permit (CUP) shall be non-transferable. In the event there is a change in the owner/operator of the daycare/preschool center for which

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this CUP was issued, this CUP shall become null and void. If a new owner/operator wants to operate a daycare/preschool center, a new CUP would have to be obtained pursuant to Sections 17.28 and 17.42 of the Zoning Code to operate said business from this property.

**CUP # \_\_-2026**

Document No.

**CONDITIONAL USE PERMIT**

Document Title

**VILLAGE OF GERMANTOWN, WASHINGTON COUNTY, WISCONSIN  
CONDITIONAL USE ZONING PERMIT**

Whereas:

**Jessica Poppert, Agent for Poppert Preschool North,  
Applicant and West Pointe Capital, LLC, Property Owner**

agree to comply with applicable Codes and Ordinances of the Village of Germantown, Wisconsin, and further agrees that all work done pursuant to the permission granted herewith will conform with the applications and drawings filed with and approvals granted by officials of the Village for the purpose of obtaining this permit.

This Conditional Use Permit replaces CUP #11-95 (recorded as Document #699408 on 09/08/1995). Now, therefore, this permit is issued for a change of ownership for an existing "child care, day care, or preschool center" from the property located at W164N11310 Squire Drive pursuant to Section 17.28(3)(p) of the Village Zoning Code.

Name &amp; Return Address:

**Village of Germantown  
P.O. Box 337  
Germantown, WI 53022**

Parcel Identification No:

**GTNV\_224-985**

**On the following described property located in the Village of Germantown,  
Washington County, Wisconsin:**

PARCEL 1, CERTIFIED SURVEY MAP NO. 4658, BEING A DIVISION OF THE SOUTHWEST $\frac{1}{4}$  OF THE SOUTHEAST $\frac{1}{4}$  OF SECTION 22, TOWN 9 NORTH, RANGE 20 EAST. IN THE VILLAGE OF GERMANTOWN, WASHINGTON COUNTY, WISCONSIN. SAID CERTIFIED SURVEY MAP BEING RECORDED IN THE OFFICE OF THE REGISTER OF DEEDS FOR WASHINGTON COUNTY ON APRIL 4, 1996 IN VOLUME 31 OF CERTIFIED SURVEY MAPS, PAGES 217-220 INCLUSIVE, AS DOCUMENT NO. 714165.

INCLUDING THERETO A PERPETUAL EASEMENT FOR INGRESS AND EGRESS OVER AND ACROSS LANDS PRESENTLY RESERVED FOR PUBLIC STREET PURPOSES, SAID EASEMENT AREA NOW BEING MORE PARTICULARLY BOUNDED AND DESCRIBED AS FOLLOWS: COMMENCING AT THE SOUTHWEST CORNER OF PARCEL 1 OF CERTIFIED SURVEY MAP NO. 4658; THENCE SOUTH 88° 33' 02" WEST. 80.00 FEET TO A POINT; THENCE NORTH 01° 58' 28" NORTH, 275.01 FEET TO A POINT; THENCE NORTH 88° 33' 02" EAST 295.01 FEET TO A POINT THENCE SOUTH 01° 58' 28" EAST 60.00 FEET TO A POINT SAID POINT BEING THE NORTHEAST CORNER OF SAID PARCEL 1; THENCE SOUTH 88° 33' 02" WEST AND ALONG THE NORTH LINE OF SAID PARCEL 1, 215.01 FEET TO A POINT; THENCE SOUTH 01° 58' 28" EAST AND ALONG THE WEST LINE OF SAID PARCEL 1, 215.01 FEET TO THE SOUTHWEST CORNER OF SAID PARCEL 1 AND THE PLACE OF BEGINNING OF THIS EASEMENT DESCRIPTION.

Tax Key No: 224-985

Address: W164N11310 Squire Drive

Conditional Use Permit (CUP)

Jessica Poppert, Agent for Poppert Preschool North, Applicant

West Pointe Capital, LLC, Property Owner

Page 2 of 6

**Pursuant to the following condition(s):**

1. The uses and activities allowed on the property shall be limited to those uses and activities specified in the Conditional Use Permit (CUP) application documents received June 16, 2026, and in Exhibit A attached.
2. The total number of children allowed on site shall not exceed 170. Hours of operation shall be Monday to Saturday 6:30AM – 6:00PM.
3. The owner/operator and daycare facility shall remain in continuous compliance with all applicable State and Federal regulations and licensing, allowing that they may be more restrictive than local Village regulations.
4. The owner/operator is responsible for reporting any significant changes in the type, intensity, amount, or location of the land uses and activities, days and hours of operation, size or location or other operational characteristics of said uses and activities authorized under this CUP to the Village Zoning Administrator.
5. If the use, activities and/or operation subject of this permit falls out of conformity with the conditions herein, or, where there is a change in the nature, character, intensity or extent of the activities or uses which causes problems or harmful effects that were not anticipated at the time of approval of this CUP, the Conditional Use Permit (CUP) may be modified or terminated by the Village Board by the amendment to or addition of conditions after public hearing thereon.
6. All temporary and permanent exterior signs require a permit and shall comply with all current sign regulations. Off-premises advertising and directional signage is regulated by the Village and requires a permit if/when allowed.
7. All future site improvements, including all building, parking area, landscaping, storm water management facilities, signage, exterior lighting, and any other improvements made to or on the property that are necessary for the land uses and activities authorized under this CUP shall be submitted for review and approval by the Village through the Zoning Permit or Site Plan application process as determined by the Village Zoning Administrator. If required, Site Plan review and approval will include Plan Commission review and approval.
8. Pursuant to Section 17.47 of the Zoning Code, if the Village observes and/or receives complaints regarding negative impacts associated with and/or created by business-related activities conducted on the property, including but not limited to noise, dust or other airborne materials, the Property Owner/Operator shall work with the Village to identify the source of such impact(s), evaluate alternative mitigation measures, and implement a mutually-agreeable solution to mitigating the impact(s).
9. This Conditional Use Permit (CUP) shall be non-transferable. In the event there is a change in the owner/operator of the daycare/preschool center for which this CUP was issued, this CUP shall become null and void. If a new owner/operator wants to operate a daycare/preschool center, a new CUP would have to be obtained pursuant to Sections 17.28 and 17.42 of the Zoning Code to operate said business from this property.

Granted by the Village Board of the Village of Germantown, Washington County, Wisconsin  
on the \_\_\_\_\_ day of \_\_\_\_\_, 2026.

\_\_\_\_\_  
Robert A. Soderberg, Village President

ATTEST:

\_\_\_\_\_  
Donna Ott, Village Clerk

STATE OF WISCONSIN ) SS  
WASHINGTON COUNTY)  
Personally came before me this \_\_\_\_\_ day of \_\_\_\_\_, 2026, the above-  
named Robert A. Soderberg, Village President, and Donna Ott, Village Clerk, to me known to  
be the persons who executed the foregoing instrument and acknowledged the same.

\_\_\_\_\_  
{type or print name of Notary on this line}

\_\_\_\_\_  
{signature of Notary on this line}

Notary Public, State of Wisconsin  
My Commission Expires: \_\_\_\_\_

**ACCEPTANCE OF TERMS AND CONDITIONS BY APPLICANT**

I hereby accept the terms and conditions set forth in this Permit and realize that non-adherence to the terms and conditions as stated hereon may result in the revocation of this Permit by the Village of Germantown.

Dated this \_\_\_\_ day of \_\_\_\_\_, 2026

\_\_\_\_\_  
Jessica Poppert, Poppert Preschool North, Applicant

STATE OF WISCONSIN) SS  
\_\_\_\_\_) COUNTY)

Personally came before me this \_\_\_\_ day of \_\_\_\_\_, 2026, being the above named \_\_\_\_\_, to me known to be the person who executed the foregoing instrument and acknowledged the same.

\_\_\_\_\_  
{type or print name of Notary on this line}

\_\_\_\_\_  
{signature of Notary on this line}

Notary Public, State of Wisconsin  
My Commission Expires: \_\_\_\_\_

**ACCEPTANCE OF TERMS AND CONDITIONS BY PROPERTY OWNER**

I hereby accept the terms and conditions set forth in this Permit and realize that non-adherence to the terms and conditions as stated hereon may result in the revocation of this Permit by the Village of Germantown.

Dated this \_\_\_\_ day of \_\_\_\_\_, 2026

\_\_\_\_\_  
Daniel Mongoven, West Pointe Capital, LLC, Property Owner

STATE OF WISCONSIN) SS  
\_\_\_\_\_) COUNTY)

Personally came before me this \_\_\_\_ day of \_\_\_\_\_, 2026, being the above named \_\_\_\_\_, to me known to be the person who executed the foregoing instrument and acknowledged the same.

\_\_\_\_\_  
{type or print name of Notary on this line}

\_\_\_\_\_  
{signature of Notary on this line}

Notary Public, State of Wisconsin  
My Commission Expires: \_\_\_\_\_

This instrument was drafted by:

Jordan Yanke  
Associate Planner  
Village of Germantown, Wisconsin

## EXHIBIT A

### Uses/Activities – Conditional Use Permit in B-1: Neighborhood Business District

- Operation of a “child care, daycare, or preschool center” at subject location by new owner.
- Total number of children allowed on site is 170 maximum.
- Other aspects of operation:
  - Hours of Operation: Monday to Saturday 6:30AM – 6:00PM.
  - 30 employees.

DRAFT



Village of  
Germantown  
...Willkommen

Community Development Department  
Jeffrey Retzlaff, Community Development Director  
N112W17001 Mequon Road, PO Box 337  
Germantown, WI 53022

Fee must accompany application.

☒ \$1680 CUP Review Fee

Paid On: 06.16.26 Check/CC 1019

## CONDITIONAL USE PERMIT APPLICATION

Pursuant to Section 17.42 of the Municipal Code

Please read and complete this application carefully. All applications must be signed and dated.

1

APPLICANT/AGENT:

Jessica Poppert  
Poppert Preschool  
North

PROPERTY OWNER:

Lindsay Mangrum

Phone

[REDACTED]

Phone

[REDACTED]

Email

PLEASE NOTE: Applicant contact information has been redacted for security purposes.

[REDACTED]

2

TO WHOM SHOULD THE PERMIT BE ISSUED?

Poppert Preschool North

3

PROPERTY ADDRESS

TAX KEY NUMBER

W1164 N11310 Squire Dr

4

DESCRIPTION OF EXISTING OPERATION

Briefly describe the use as it exists today, including use, size, number of employees, hours of operation, etc. If this permit involves new construction, describe the current status of the property, e.g. "vacant." Use additional pages if necessary.

Preschool  
30 employees

open 645 AM - 545 PM

5

**DESCRIPTION OF PROPOSED OPERATION**

Write the name of the proposed conditional use exactly as it appears in the Municipal Code.

Describe the proposed use, including size, number of employees, hours of operation and extent of any new construction/alterations.

Preschool use  
30 employees  
open to 4:30 AM - 5:45 PM

6

**METES AND BOUNDS LEGAL DESCRIPTION OF PROPERTY - REQUIRED**

Please submit a separate WORD Document with this information.

7

**SUPPORTING DOCUMENTATION:**

Site Plan and elevations for new construction (can be conceptual)

Photos of existing use and/or proposed use operating elsewhere

8

**READ AND INITIAL THE FOLLOWING:**

☒ I understand that the Village is under no obligation to issue a Conditional Use Permit and will do so only if the applicant successfully demonstrates that the proposed use is harmonious with the neighborhood and the long-range goals of the Village.

☒ I will notify the Village if any aspects of the conditional use changes. I understand that failure to do so may result in the revocation of the CUP.

☒ I understand that a Conditional Use Permit is valid only if the conditions and restrictions of the permit are met. I understand that failure to comply with any aspect of the permit may result in revocation.

9

**SIGNATURES - ALL APPLICATIONS MUST BE SIGNED BY OWNER**

  
Applicant  
6/15/20  
Date

  
Owner  
Date

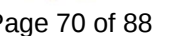
Lasik &amp; associates

Michael J. Losik & Assoc., Inc.  
1717 Petruscelli Drive  
Suite 301  
Waukegan, WI 53196-5939  
(414) 544-4221

This drawing is an instrument of service  
and shall remain the property of the  
Engineer and shall not be reproduced  
copied or used in any way without the  
permission of the Engineer.

WILLOW CREEK DAY CARE CENTER  
VILLAGE OF GERMANTOWN, WISCONSIN

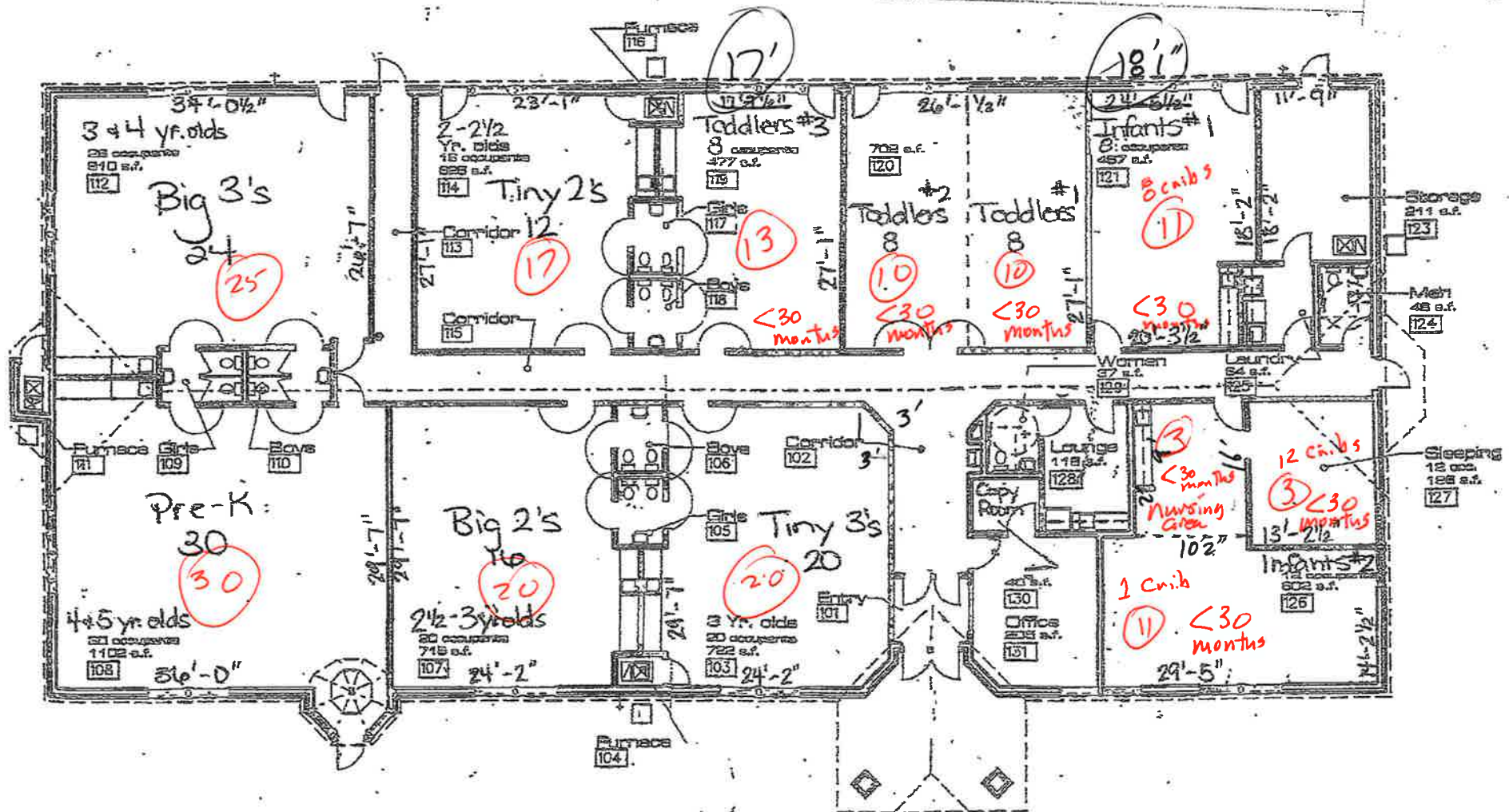
JULY 31, 1995



1st Choice  
2nd Choice

Jessica owner 262-788-5144

Cribs 26x39"



699408

ORIGINAL

PERMIT NO: 11-95

VILLAGE OF GERMANTOWN  
CONDITIONAL USE ZONING PERMIT

COPY

Whereas, Jackie Katz agrees to comply with applicable Codes and Ordinances of the Village of Germantown, Wisconsin, and further agrees that all work done pursuant to the permission granted herewith will conform with the applications and drawings filed with officials of the Village for the purpose of obtaining this permit.

Now, therefore, this permit is issued to:

Jackie Katz

to allow for: operation of a day care facility

on the following described real estate in the Village of Germantown, Washington County, Wisconsin:

Tax Key No.: GTNV 224-993  
W164 N11310 Squire Drive

All that part of the Southwest One Quarter (SW 1/4) of the Southeast One Quarter (SE 1/4) of Section Twenty Two (22), Township Nine (9) North, Range Twenty (20) East, Village of Germantown, Washington County, WI, bounded and described as follows:

Commencing at the south 1/4 corner of said Section 22; thence N01°58'28" W and along the west line of the said SE 1/4 Section, 625.03 feet to a point; thence N88°33'02" E, 80.00 feet to the place of beginning of this description:

Continuing thence N88°33'02" E, 215.01 feet to a point; thence N01°58'28" W, 205.01 feet to a point; thence S88°33'02" W, 215.01 feet to a point; thence S01°58'28" E, 205.01 feet to the place of beginning of this description. Containing 1.0119 acres +/- recorded in the Washington County Registry in Volume 1040 on page 145, as Document No. 548219.

RECORDED

SEP 8 9 00 AM '95

REGISTER OF DEEDS  
OF WASHINGTON COUNTY WI

Dorothy A. Horvath

pursuant to the following conditions:

- 1) Access to the site will be limited along Squire Drive. A common access point or street should be built at the north end of this site and sidewalks along the east side of Squire Drive and the south side of Sylvan Circle, for joint use with the lands to the north and east.
- 2) Architecture and site planning should coordinate with the existing Germantown Marketplace development.
- 3) Hours of operation shall be from 6:30 a.m. to 6:00 p.m., Monday through Saturday.
- 4) Number of children on-site shall be limited to a maximum of 148.
- 5) No occupancy shall be granted until all of the public improvements are in place.
- 6) All State and Federal regulations for the operation of a day care center will be followed, allowing that they may be more restrictive than the Village regulations.

The provisions of this permit shall be binding upon the owner unless and until amended by the Village of Germantown. This permit is non-transferrable.

Granted by action of the Village Board of the Village of Germantown this 21st day of August, 1995.

  
Charles J. Hargan  
Village President

ATTEST:

  
Jane A. Wilms, CMC/AAE  
Village Clerk

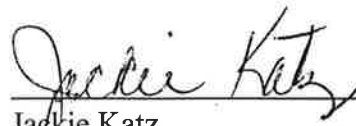
STATE OF WISCONSIN )  
 )SS  
WASHINGTON COUNTY)

Personally came before me this 6th day of September, 1995, the above named Charles J. Hargan, Village President, and Jane A. Wilms, Village Clerk, to me known to be the persons who executed the foregoing instrument and acknowledged the same.

  
Notary Public, State of Wisconsin  
My Commission Expires: March 15, 1998

ACCEPTANCE OF TERMS AND CONDITIONS BY PERMITTEE

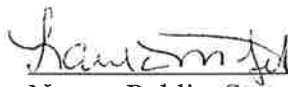
I, JACKIE KATZ, permittee, do hereby accept the terms and conditions set forth in this Permit, and realize that non-adherence to the terms and conditions as stated hereon may result in the revocation of this Permit by the Village of Germantown.

  
\_\_\_\_\_  
Jackie Katz

STATE OF WISCONSIN                    )  
                                                  )SS  
WASHINGTON COUNTY)

Personally came before me this 5 day of Sept., 1995, the above named Jackie Katz, to me known to be the person who executed the foregoing instrument and acknowledged the same.



  
\_\_\_\_\_  
Notary Public, State of Wisconsin  
My Commission Expires: 4/30/97

This instrument was drafted by:  
Henry J. Elling  
Village Planner

Return to:  
Village of Germantown  
Village Clerk  
P. O. Box 337  
Germantown, WI 53022

## NOTICE OF PUBLIC HEARING VILLAGE OF GERMANTOWN

NOTICE is hereby given that a Public Hearing will be held before the Village of Germantown Plan Commission at the Germantown Village Hall located at N112W17001 Mequon Road, Germantown, Wisconsin and virtually through the WebEx platform on the following date and at the time noted below (or soon thereafter):

DATE: Monday, July 13<sup>th</sup>, 2026  
TIME: 6:30 pm or later

The purpose of said hearing is to hear all parties, their attorneys or agents, for or against the following application for a CONDITIONAL USE PERMIT for a change of ownership for an existing "child care, day care, or preschool center" from the property described below pursuant to Section 17.28(3)(p) of the Village Zoning Code.

Applicant: Jessica Poppert/Poppert Preschool North, Agent for Lindsay Mongoven and West Pointe Capital, LLC, Property Owner  
Property Address: W164N11310 Squire Drive; Tax Key No. (GTNV\_224985)

### Property Description:

PARCEL 1, CERTIFIED SURVEY MAP NO. 4658, BEING A DIVISION OF THE SOUTHWEST¼ OF THE SOUTHEAST¼ OF SECTION 22, TOWN 9 NORTH, RANGE 20 EAST. IN THE VILLAGE OF GERMANTOWN, WASHINGTON COUNTY, WISCONSIN. SAID CERTIFIED SURVEY MAP BEING RECORDED IN THE OFFICE OF THE REGISTER OF DEEDS FOR WASHINGTON COUNTY ON APRIL 4, 1996 IN VOLUME 31 OF CERTIFIED SURVEY MAPS, PAGES 217-220 INCLUSIVE, AS DOCUMENT NO. 714165.

INCLUDING THERETO A PERPETUAL EASEMENT FOR INGRESS AND EGRESS OVER AND ACROSS LANDS PRESENTLY RESERVED FOR PUBLIC STREET PURPOSES, SAID EASEMENT AREA NOW BEING MORE PARTICULARLY BOUNDED AND DESCRIBED AS FOLLOWS: COMMENCING AT THE SOUTHWEST CORNER OF PARCEL 1 OF CERTIFIED SURVEY MAP NO. 4658; THENCE SOUTH 88° 33' 02" WEST. 80.00 FEET TO A POINT; THENCE NORTH 01° 58' 28" NORTH, 275.01 FEET TO A POINT; THENCE NORTH 88° 33' 02" EAST 295.01 FEET TO A POINT THENCE SOUTH 01° 58' 28" EAST 60.00 FEET TO A POINT SAID POINT BEING THE NORTHEAST CORNER OF SAID PARCEL 1; THENCE SOUTH 88° 33' 02" WEST AND ALONG THE NORTH LINE OF SAID PARCEL 1, 215.01 FEET TO A POINT; THENCE SOUTH 01° 58' 28" EAST AND ALONG THE WEST LINE OF SAID PARCEL 1, 215.01 FEET TO THE SOUTHWEST CORNER OF SAID PARCEL 1 AND THE PLACE OF BEGINNING OF THIS EASEMENT DESCRIPTION.

A copy of the application and a map showing the property described above are on file at the Community Development Department-Planning & Zoning Services office in the Germantown Village Hall and can be viewed on the Village's website by following this link:

Website: <https://www.germantownwi.gov/589/Proposed-Development-Projects>

Citizens wishing to submit any public comments should do so by sending them by email to: [comments@germantownwi.gov](mailto:comments@germantownwi.gov) no later than 4:00pm on the meeting date listed above.

Donna Ott, Village Clerk  
Dated this 17<sup>th</sup> day of June 2026

To Be Published On: June 24<sup>th</sup> and July 1<sup>st</sup>, 2026

## **BUSINESS OF THE VILLAGE BOARD**

MEETING DATE: August 3, 2026

PLACEMENT: Action Item

ITEM TITLE: Rescheduling of September Board Meeting (ACTION)

SUBMITTED BY: Donna Ott, Village Clerk

SUMMARY EXPLANATION:

Due to the Labor Day holiday, the regularly scheduled Board Meeting will be rescheduled to Tuesday, September 8, 2026 at 7:00 PM.

ATTACHMENT:

STAFF RECOMMENDATION:

ACTION BY COMMITTEE:

## **BUSINESS OF THE VILLAGE BOARD**

MEETING DATE: August 3, 2026

PLACEMENT: Action Item

ITEM TITLE: Acquisition of N96 W18058 County Line Road (Tax Parcel No. 333-999) for the purpose of relocation of Wastewater Utility Lift Station 6. The Village Board may convene into closed session pursuant to Wis. Stat. § 19.85(1)(e) for the purpose of deliberating or negotiating the purchasing of public properties, the investing of public funds, or conducting other specified public business, whenever competitive or bargaining reasons require a closed session and then may reconvene into open session to take such action as it deems appropriate. (ACTION)

SUBMITTED BY: Matthew Mortwedt, Public Works Director

### SUMMARY EXPLANATION:

In February, the Board authorized a potential offer to purchase for the acquisition of land to relocate Lift Station 6, which has been part of the wastewater utility budget for several years. For 2026, it budget was re-approved for up to \$1,200,000. The purpose of this closed session is to update the Board on the status of those efforts and to seek guidance on any negotiation strategy the Board desires to implement.

The Wastewater Utility is interested in securing the parcel on the west bank of the Menomonee River on County Line Road. Lift 6 currently resides on the east bank of the Menomonee River, in the right-of-way adjacent to County Line Road and south of the Buffalo Wild Wings Restaurant. The reason for interest in this land is 4-pronged:

1. The capacity of the lift station is confined in the current location. The need to grow in the future, based on development, is not possible. Development in that sewershed is likely in the coming years.
2. The lift station has not had a major rehab in 20+ years and, absent rebuilding it on the other side of the river, that rehab project will need to become part of the 5-10 year plan. In addition to anticipated mechanical and control upgrades, the well in Lift 6 is a steel structure that has a defined period of life that will also need to be addressed. That will make the rehab of Lift 6 essentially a replacement.
3. Development around Lift 6 has caused it to sit at a low point where it is at risk of flooding. This was acutely witnessed in August 2025 when emergency measures narrowly saved Lift 6 from being a total loss to flooding. The proposed location across the river sits higher and is not as prone to flooding.
4. The relocation of Lift 6 could allow for the elimination of Lift 3 which could allow for operational savings, but more importantly, one less point of failure in the system.

Pursuant to Wis. Stat. § 19.85(1)(e), a closed session can be utilized for the purpose of deliberating or negotiating the purchasing of public properties, the investing of public funds, or conducting other specified public business, whenever competitive or bargaining reasons require a closed session. This would include allowing the Village Board to discuss possible terms related to any attempt to acquire property.

ATTACHMENT:

1. 3729\_001

STAFF RECOMMENDATION:

ACTION BY COMMITTEE:

## Lift 6 History

Lift 6 was constructed in 1977 as part of the Riversbend Development. It consisted of a buried steel control chamber, housing control and pumps without cathodic protection. Design life 25-30 years. It also had a slab on grade generator building, and a 10' diameter wet well accessed through a 2'x2' square drop shaft. Access was directly off of County Line

June 1996 - Flooding required the construction of the existing berm do to damage to the standby generator.

1998 – County Line Road reconstructed into its current configuration access now through Rivers Bend Golf Club.

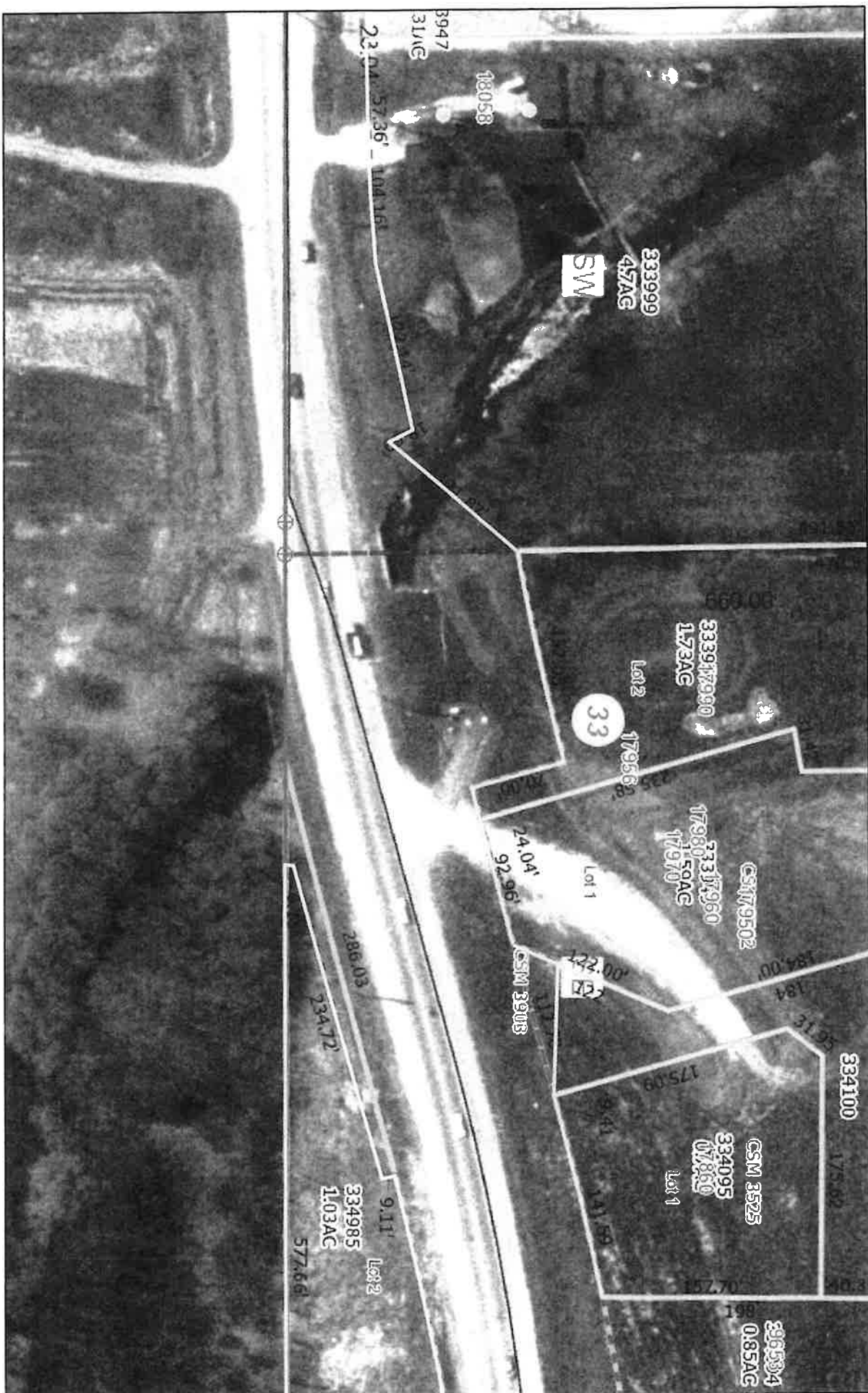
2007 – Station was upgraded to its current configuration consisting of Control building and generator (salvaged from old Lift7), pumps upgraded to 40 H.P. Impressed current cathodic protection add to buried steel structure to extend its life 15-20 years. Wet well configuration changed to full 10' diameter eliminating the 2'x2' drop shaft for better confined space entry and maintenance.

2014 – Buffalo Wild Wings/Starbucks development proposed. Requested Lift 6 get moved due to significant grade changes being proposed. Request shot down by plan commission and Village Board. Lift 6 has become the low point since this development occurred. Access is now through a shared driveway with the Starbucks drive through.

In its current configuration, lift 6 is at build-out for capacity. Constructing a new wet well on the current site for a capacity upgrade would be near impossible due to the buried steel structure which extends under the sidewalk on County Line Road and the need to maintain flow during construction. The footprint is too small.

As evidenced by the events of August 10-16, 2025, Lift 6 is the low point and will continue to be at risk of failure due to flooding. The buried steel structure has well exceeded its design life and needs replacement. The parcel across the river for consideration was not flooded out in August, would provide a cost-effective location for relocation of the lift, and give the Village flexibility for design for the future flows in this basin.

1978



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Address Point

Road Centerline STH, CTH

— County Highway

Current Parcel

Parcel Taxkey &amp; Acreage

## Leader Lines

Right-of-Way  
Certified Survey Number 1-1-1

Lot Number

PLSS Monument

Municipality

Right-of-Way

PLSS Boundary

Certified Survey Map Aerial 1983

Lot

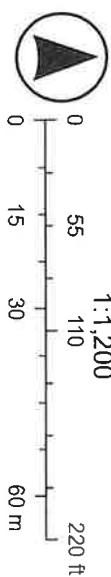
PLSS Quarter

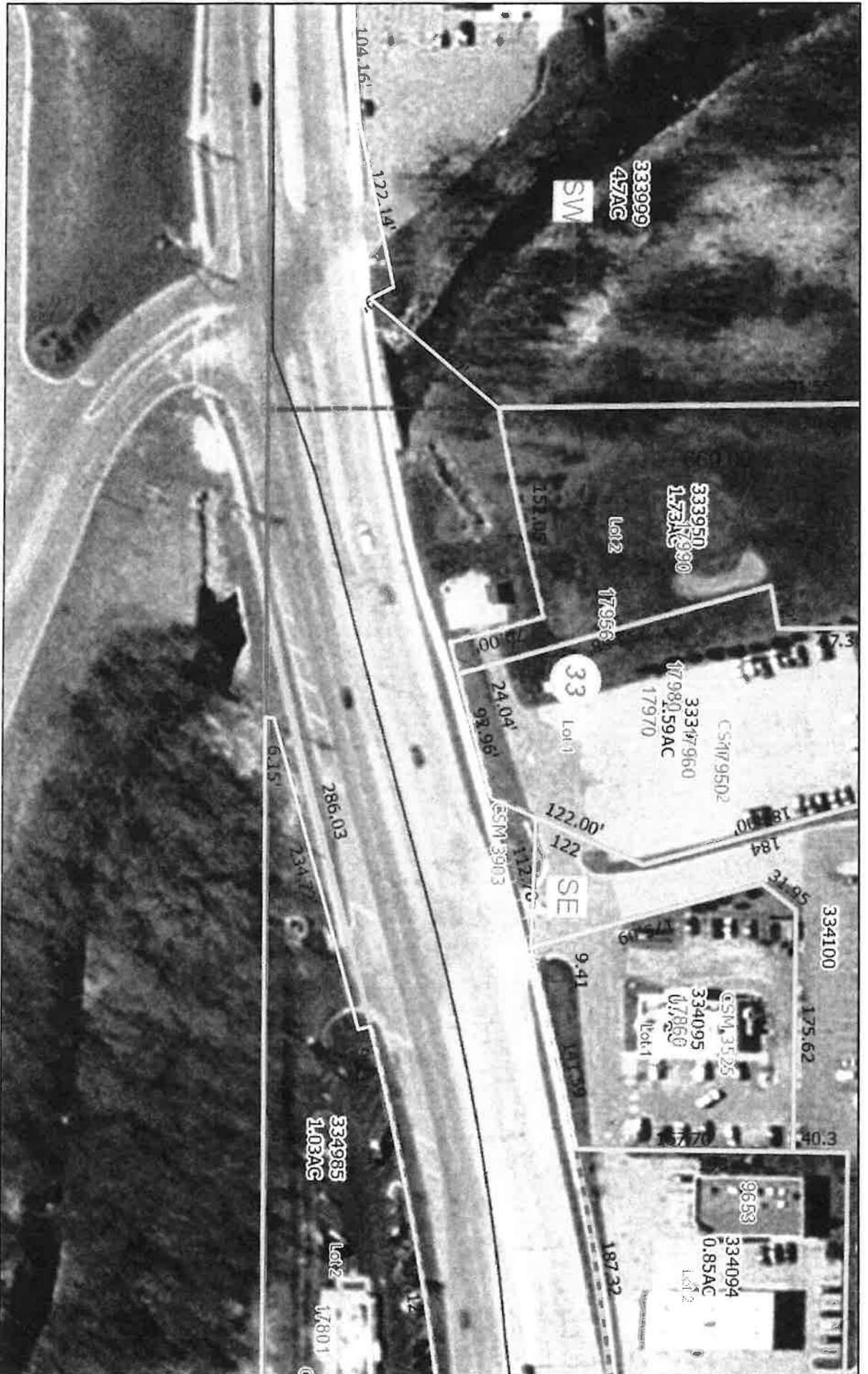
PLSS Boundary

955  
99611

7

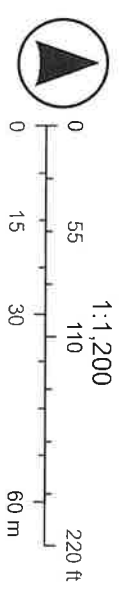
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Address Point  
Road Centerline STH, CTH  
County Highway  
Current Parcel  
Parcel Taxkey & Acreage  
Leader Lines  
Certified Survey Number  
Lot Number  
PLSS Monument  
Municipality  
Right-of-Way  
Certified Survey Map Ortho2000  
PLSS Boundary  
Lot  
PLSS Quarter  
PLSS Section



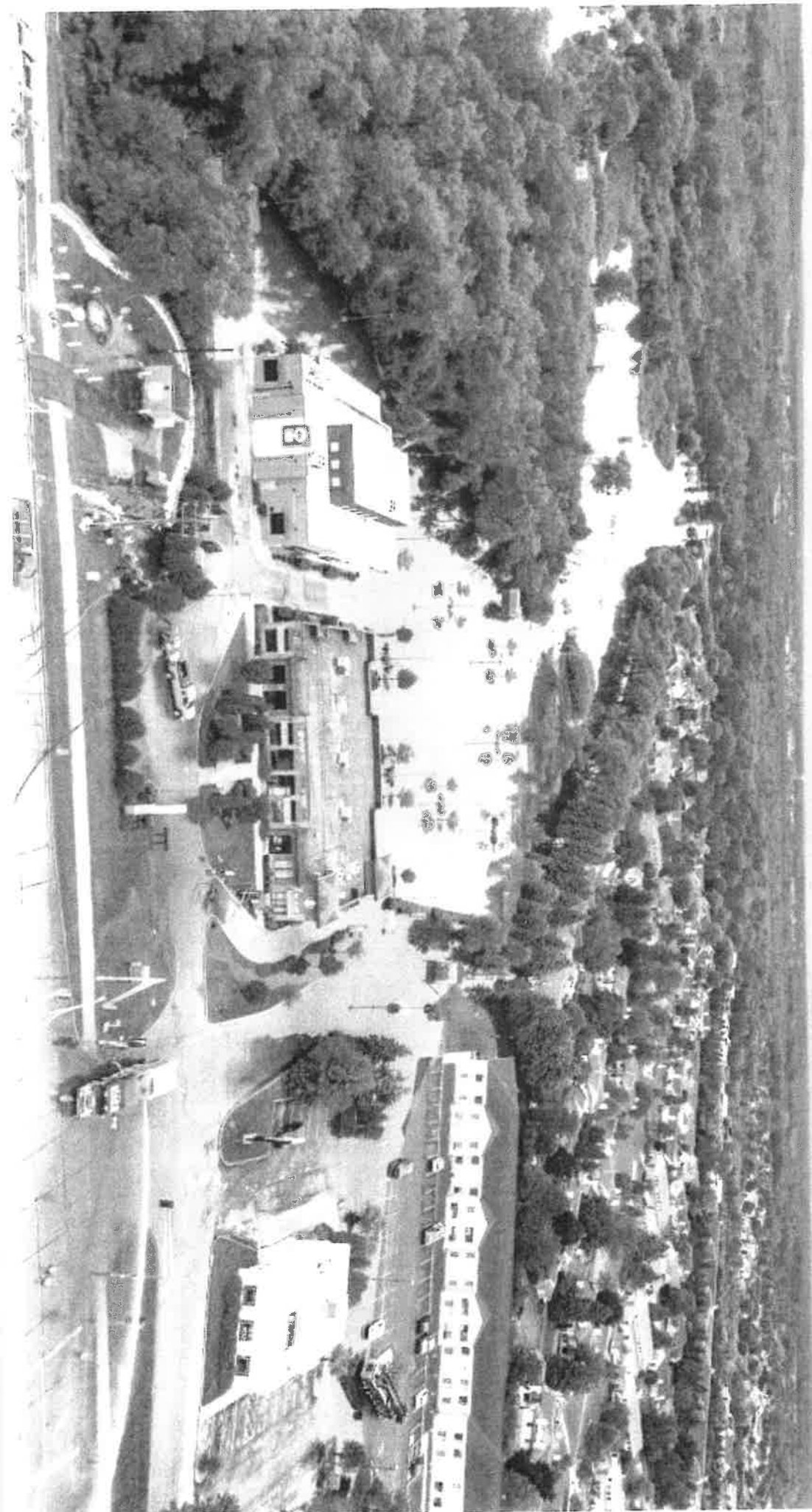
2015

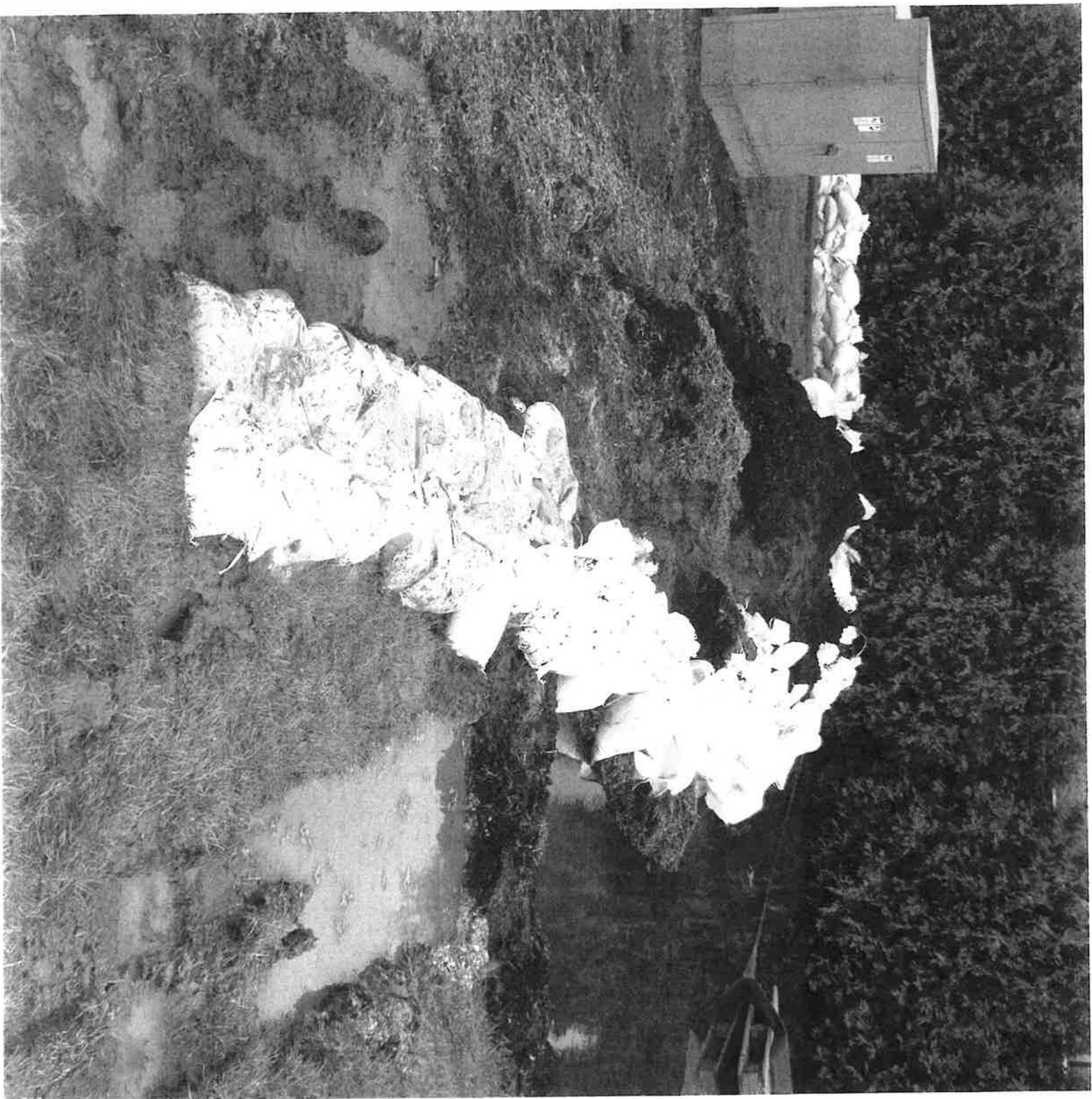


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Address Point  
Parcel Taxkey & Acreage  
Road Centerline STH, CTH  
County Highway  
Current Parcel  
PLSS Monument Plat  
Municipality  
Certified Survey Map Ortho2015  
Lot  
PLSS Quarter  
PLSS Section













## Village of Germantown GIS parcel flooding

**Village of Germantown**  
N112 W17001 Mequon Road  
Germantown, WI 53022  
262-250-4700



### DISCLAIMER:

This map is not a survey of the actual boundary of any property this map depicts.

The Village of Germantown Does not guarantee the accuracy of the material contained here in and is not responsible for any misuse or misrepresentation of this information or its derivatives.



SCALE: 1" = 87'

Print Date: 2/4/2026



4.7 Acres

## Village of Germantown GIS

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## Village Of Germantown

N112 W17001 Mequon Road  
Germantown, WI 53022  
262-250-4700



SCALE: 1 = 151'

Print Date: 2/4/2026