

A meeting of the City of Evansville Public Safety will be held at the location, on the date, and at the time stated below. Notice is further given that members of the Finance and Labor, Municipal Services, Plan Commission and Economic Development Committee may be in attendance. Requests for persons with disabilities who need assistance to participate in this meeting should be made by calling City Hall at (608)-882-2266 with as much notice as possible.

**Public Safety Committee**  
Regular Meeting  
Wednesday, March 4, 2026, 6:00 p.m.  
City Hall, 31 S. Madison Street, Evansville, WI  
**AGENDA**

1. Call to Order.
2. Roll Call.
3. Motion to approve the Agenda.
4. Motion to approve February 4, 2026, Public Safety regular meeting Minutes.
5. Citizen appearances other than agenda items listed.
6. Old Business.
  - 1) Update - Pete's Bar
7. New Business.
  - A. **Discussion with possible motion to approve the Operator's License Application(s)** for: *(non-recommended by Evansville Police Department)*.
    - 1) Brittney Nicole Lewis
    - 2) Cole James Olson
  - B. **Motion to approve the Operator's License Application(s)** for: *(recommended by Evansville Police Department)*.
    - 1) Diana K. Hagler
    - 2) Bryant Steven Kleifgen
    - 3) Catherine Sophia Schuppner
    - 4) Tina C Zipse
    - 5) Charlene Lynn Chesmore
    - 6) Brian Olson
    - 7) Daniel Paul Rubin
    - 8) Julie Marie Vondra
    - 9) Clark Thomas Fox
    - 10) Shawn Marie Dunphy
  - C. **Discussion with possible motion to approve the Long-Term Street Use License Application(s) for:**
    - 1) Evansville FFA Alumni – Ronald Buttchen, P.O. Box 674, Evansville, WI 53536, 4<sup>th</sup> of July Parade Route from 7 a.m. to Noon.
8. Evansville Police Department Report.
9. Evansville Emergency Medical Services Report.
10. Meeting Reminder: Wednesday, April 1, 2026, at 6:00 p.m.  
2026 Meeting Dates: May 6<sup>th</sup>, June 3<sup>rd</sup>, July 1<sup>st</sup>, August 5<sup>th</sup>, September 2<sup>nd</sup>, October 7<sup>th</sup>, November 4<sup>th</sup>, & December 2<sup>nd</sup> at 6:00 p.m.
11. Adjourn.

*Erika Stuart, Chairperson*

*Please turn off all cell phones while the meeting is in session. Thank you.*



**Public Safety Committee**  
 Regular Meeting  
 Wednesday, February 4, 2026, 6:00 p.m.  
 City Hall, 31 S. Madison Street, Evansville, WI  
**MINUTES**

1. **Call to Order.** Stuart called the meeting to order at 6:00 p.m.
2. **Roll Call.**

<u>Members</u>	<u>Present/Absent</u>	<u>Others Present</u>
Alderson Erika Stuart, Chair	P	Chris Jones, Chief
Alderson Chuck Boyce	P	Carolyn Kleisch, EMS Chief
Alderson Joe Geoffrion	A	Lt. Ian Reilly
		Jolene Klitzman, Deputy Clerk
		Jason Sergeant, Administrator
		Chris Turenwald, Kwik Trip
		Trisha Forman, Citizen
		Travis Ardisson, 4 <sup>th</sup> of July Committee
		Ron Butten, 4 <sup>th</sup> of July Parade Committee

3. **Motion to approve the Agenda.** by Stuart, Seconded by Boyce, Motion Carried 2-0
4. **Motion to approve January 7, 2026, Public Safety regular meeting Minutes.** by Stuart, Seconded by Boyce, Motion Carried 2-0
5. **Citizen appearances other than agenda items listed.** N/A
6. **Old Business.** N/A
7. **New Business.**
  - A. **Discussion with possible motion to approve the Operator's License Application(s)** for: *(non-recommended by Evansville Police Department).*
    - 1) Trisha K. Forman

Trisha came to the meeting and discussed with the committee why she omitted information from her application. The committee made a motion to approve the operator's license for Trisha. by Stuart, Seconded by Boyce, Motion Carried 2-0
  - B. **Motion to approve the Operator's License Application(s)** for: *(recommended by Evansville Police Department).*
    - 1) Grady Micheal Maves
    - 2) Katie Nicole Meinke
    - 3) Tomas Jesus Hurley by Stuart, Seconded by Boyce, Motion Carried 2-0
    - 4) Brittany Karen Hook
    - 5) Lynnea Dawn Callison-Lucas
    - 6) Dylan James Dillman

- 7) Jaime Lynn Donnelly
- 8) Brandy Marie Huberd
- 9) Keith Russell Miller
- 10) Kyle Walker Perkins
- 11) Heather Lynn Ott
- 12) Suzanne M. Soetaert
- 13) Amber M. Pacetti

**C. Motion to recommend to the Common Council Approval of the Alcohol Beverage License Applications for a Class “A” Beer/ “Class A” Liquor License for:** *(background check recommendations provided by Chief Jones, unless otherwise noted)*

- 1) **Kwik Trip, Inc., Christopher Turenwald, Agent, 727 N. Jackson Ave., Jefferson, WI 53549 d/b/a Kwik Trip, Inc. 1750, 680 E. Main Street, Evansville, WI 53536**

Chris from Kwik Trip was in attendance and explained the selling of alcohol procedures that Kwik Trip have in place for carding and the consequences for employees who do sell to underage. Everyone is excited for the store to open. by Stuart, Seconded by Boyce, Motion Carried 2-0

**D. Discussion with Greg Ardisson and committee on the 4<sup>th</sup> of July celebration.**

Travis Ardisson came to the meeting in Greg place to talk to the committee about the 4<sup>th</sup> of July celebration and what they are planning to do over the 3-day celebration. The celebration will start Friday, July 3<sup>rd</sup> at 4 p.m. and go through Sunday July 5<sup>th</sup> at 5 p.m. Travis talked about fundraising, security, fireworks, cars show, ball games and permits that will need to be filled out. Creekside is allowing them to use their 501 (c) for the event. This is the 250<sup>th</sup> year of the 4<sup>th</sup> of July celebration in Evansville and this new committee wants to see the celebration continue for years to come. Chief Jones asked to be invited to any committee meeting to work on staffing for the police department. There was a great discussion on ways to fundraise for the fireworks.

8. **Evansville Police Department Report.** Chief Jones attended the WIDAJ 40-hour New Chief/Sheriff training in Milwaukee. Lt. Reilly & Officer Schmidt will be attending the National Rx Summit in April. Officers Delgado and Hanson will be receiving a lifesaving award. Lt. Reilly met with District Attorney Sanders & other Rock County LE agencies about changes to the domestic violence arrest procedures. Wisconsin Public Power, Inc. (WPPI) gave the EPD a grant for \$3,400 to help cover salary cost for the 4<sup>th</sup> of July celebration.
9. **Evansville Emergency Medical Services Report.** Chief Kleisch is working on the BID process to finish interior of garage remodel. Refresher on new Protocol Updates and run reviews were done with Dr. Barney. 641 had some front-end issues and was taken to Freeman Alignment for repairs. Hired a new EMT-Basic Mikhaila Heinzer & she is working on her onboarding with Mercy.
10. **Meeting Reminder:** Wednesday, March 4, 2026, at 6:00 p.m.  
2026 Meeting Dates: April 1<sup>st</sup>, May 6<sup>th</sup>, June 3<sup>rd</sup>, July 1<sup>st</sup>, August 5<sup>th</sup>, September 2<sup>nd</sup>, October 7<sup>th</sup>, November 4<sup>th</sup>, & December 2<sup>nd</sup> at 6:00 p.m.
11. **Adjourn.** Stuart adjourned the meeting at 6:57 p.m.

Jolene Klitzman, Deputy Clerk



7A-1  
*City of Evansville*

www.evansvillewi.gov  
31 S Madison St  
PO Box 529  
Evansville, WI 53536  
(608) 882-2266

March 2, 2026

Brittney Lewis

Evansville WI 53536

Dear Brittney:

This letter is notification of the Police Department's non-recommendation for issuance of your Operator/Bartender License possibly due to misstatements and/or omissions on your application.

Final action will be taken by the Public Safety Committee at their next meeting on Wednesday, March 4, 2026, at 6:00 p.m. This meeting is open to the public and I would encourage you to attend so that you can respond to questions regarding violations on your application before they make a final decision to grant or deny your license.

If you have any questions, please feel free to contact me at 608-882-2266.

Sincerely,

Jolene Klitzman  
Deputy Clerk

cc: Leah Hurtley, City Clerk  
Erika Stuart, Public Safety Chairperson  
Chris Jones, Police Chief



# APPLICATION FOR OPERATOR'S LICENSE

CITY OF EVANSVILLE CITY CLERK'S OFFICE

31 S. Madison St, PO Box 529, Evansville, WI 53536

New Operator's License: \$35.00     Renewal Operator's License: \$35.00     Provisional License: \$15.00

NOTE: APPLICATION FEE WILL NOT BE REFUNDED IF DENIED OR WITHDRAWN.

A Police check will be completed. Please read carefully and answer honestly. Falsification and/or misrepresentation may be grounds for denial of license/permit. Applicant cannot reapply for a 6 month period from date of denial. If you have any doubt as to whether to include the facts of a specific incident it is recommended that you disclose the information. If you are unsure about how to respond to any questions on this form, check with the City Clerk for clarification. You can obtain information regarding your arrest and conviction record from the police department and/or the court with which you interacted, or the Wisconsin Circuit Court Access website at: <https://www.wicourts.gov/caserecord.htm> (CCAP may not provide comprehensive list of all arrests/convictions).

1. LEGAL NAME: Brittney nicole Lewis  
First Middle Last

DATE OF BIRTH: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: Evansville STATE: WI ZIP: 53536 GENDER: Male  Female

Driver's License No.: \_\_\_\_\_ Issuing State: WI

HOW LONG HAVE YOU LIVED AT ABOVE ADDRESS? 7 years Former Name(s): \_\_\_\_\_

Prior Street Address if Above Address is Less Than 5 Years	State	Zip	From	To

### ARREST AND CONVICTION RECORD (Anywhere within the United States of America)

2. Have you ever been charged and/or convicted of a felony? Yes  No

3. Have you ever been charged and/or convicted of a misdemeanor? Yes  No

4. Within the past ten (10) years, have you been arrested for, received a summons to appear in court for, or forfeited a bond for any of the following:

Question	Yes	No
a) Any underage alcohol violation?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b) Operating a motor vehicle while intoxicated?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
c) Selling or furnishing alcoholic beverages to underage person?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
d) Permitting underage person on licensed premises?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
e) Allowing persons on licensed premises after closing?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
f) Any alcohol related violation other than a, b, c, d, and e?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
g) Sale of legal or illegal drugs to include prescription medications or possession of any illegal drugs to include prescription medications not prescribed to you?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
h) Fighting, disorderly conduct, assault, or battery?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
i) Resisting arrest, interfering with a police officer or obstructing an officer?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
j) Any crime or ordinance violation not listed above other than traffic or parking tickets?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

5. For each YES response above, you must identify all violations below. Attach additional sheets if necessary or continue on the back of this application.

TYPE OF ARREST, SUMMONS, VIOLATION OR CHARGE	MONTH/YEAR	CITY	STATE

Within the last two (2) years, did you have and/or complete one of the following:

Successfully completed a Responsible Alcohol Servers Course     An alcohol agent for a retail alcohol license

Held an Operator's License issued in Wisconsin     The sole proprietor of retail alcohol license

6. CERTIFICATION: I do hereby swear, under penalty of perjury, that I am the person who made and signed the foregoing application for an operator's license, and that all statements herein are complete, true and correct. I further understand a full background investigation may be conducted by the Evansville Police Department prior to consideration of this application. Additionally, I understand that this application may be denied if it contains any falsification and that I will not be able to reapply for a 6 month period. I do further agree to comply with all laws, resolutions, ordinances, and regulations, federal, state or local affecting the sale of fermented malt beverages and intoxicating liquors.

Signature: Brittney Lewis Email: \_\_\_\_\_

Printed Name: Brittney Lewis Date: 2-17-20

### FOR MUNICIPALITY USE ONLY BELOW THIS LINE

Police Department Recommendation and Comments: 2019 - DV/OC  
2020 - DV/OC, Battery, Felony Stimulation  
Poss Drug/Para

Public Safety Committee: Approved: \_\_\_\_\_ Denied: \_\_\_\_\_ Date: \_\_\_\_\_

Clerk's Office Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Recommend: \_\_\_\_\_ Non-Recommended:

Police Chief's Signature: [Signature] Date: 13/02/2020

Receipt # \_\_\_\_\_



## City of Evansville

www.evansvillewi.gov  
31 S Madison St  
PO Box 529  
Evansville, WI 53536  
(608) 882-2266

March 2, 2026

Cole Olson

Brooklyn WI 53521

Dear Cole:

This letter is notification of the Police Department's non-recommendation for issuance of your Operator/Bartender License possibly due to misstatements and/or omissions on your application.

Final action will be taken by the Public Safety Committee at their next meeting on Wednesday, March 4, 2026, at 6:00 p.m. This meeting is open to the public and I would encourage you to attend so that you can respond to questions regarding violations on your application before they make a final decision to grant or deny your license.

If you have any questions, please feel free to contact me at 608-882-2266.

Sincerely,

A handwritten signature in cursive script that reads "Jolene Klitzman".

Jolene Klitzman  
Deputy Clerk

cc: Leah Hurtley, City Clerk  
Erika Stuart, Public Safety Chairperson  
Chris Jones, Police Chief



(c) A written premise description along with a site plan describing the outdoor area sought to be added as an addendum to the licensed premises; said site plan, drawing or map also complying with and indicating all buildings and structures on the property, lot lines, setbacks, measurements, zoning uses or surrounding property, appropriate fencing, entrances and exits, safety and lighting, and any other requirements deemed necessary by the City Clerk, Chief of Police, or zoning officer. Premises for which a Temporary Class “B” beer or Temporary “Class B” wine license has been applied for on City property shall receive approval of the Common Council.

(d) The applicant shall have a certificate of insurance and shall name the City as an insured party as its interest may appear. The City Clerk shall be furnished with a copy of the certificate of insurance before the license is approved. Such coverage shall be primary and non-contributing with any insurance carried by the City.

(Code 1986, § 12.04(14), Ord2 2022-03, Ord. 2023-06)

#### **Sec. 6-44. Operator's license.**

(a) **Regular.** Application for an operator's license under § 125.17, Wis. Stats., shall state the name, residence, age, birthdate, and sex of the applicant, together with such other pertinent information as the City Clerk requires, and shall be issued by the Clerk for a period of no longer than two years to the renewal date of June 30, upon approval as detailed below.

(1) Submitted applications shall be referred by the City Clerk to the Police Department for review and recommendation. The Police Chief shall review each submitted application, perform a background check and recommend issuance or denial of the license.

(2) The Public Safety Committee will review the application and any recommendations from the Police Chief. The Public Safety Committee shall decide by majority of those voting whether to grant or deny a license to the applicant. The Public Safety Committee may attach any conditions and/or limitations to a granted operator license as they deem necessary.

(3) Upon the Public Safety Committee’s approval the City Clerk shall issue a regular operator license to an applicant.

(4) If an application is denied the applicant must wait at least six (6) months before they can apply for another operator license.

(b) **Provisional license.**

(1) Application for a provisional operator's license under Wis. Stats. § 125.17(5) shall be made to the City Clerk and shall state the name, residence, age, birthdate and sex of the applicant, together with such other pertinent information as the City Clerk requires. The provisional license shall be issued by the City Clerk following a background check and an approval recommendation by the Chief of Police.

- (2) A provisional license shall be issued only to a person who has applied for an operator's license under this section. The provisional license shall expire sixty (60) days after its issuance or when the operator's license is issued, whichever is sooner.
- (3) The City Clerk or the Public Safety Committee may revoke the provisional license if it discovers that the holder of the provisional license made a false statement on the application for a provisional license or a regular operator's license.
- (4) The provisions of Wis. Stats. § 125.17(5) are hereby adopted in their entirety, and any conflict between this section and that statute as it may exist from time to time shall be resolved in favor of the statutory provision.

**(c) Violations.** The City has generally found convictions for the following offenses are substantially related to the duties and responsibilities associated with an operator's license. For purposes of these guidelines, any pending prosecution shall be treated as a conviction.

(1) **OWI** (all collectively referred to herein as "OWI"): Operating Under the Influence of an Intoxicant or Other Drugs, under Wis. Stat. § 346.63, local ordinances in conformity therewith, or other similar laws from other states, (commonly referred to as OWI, OWPBAC, PBAC, DWI, or DUI); or driving any vehicle while under the influence of alcohol or drugs; or injuring any person or damaging any property while driving under the influence of alcohol or other drugs.

a) The City has generally found OWI convictions within one (1) year of application for a License are grounds for denial of a License.

b) The City has also generally found two or more OWI convictions within five (5) years of application for a license can be grounds for denial of a License.

(2) **Underage Drinking:** Any underage drinking conviction which is the same as or similar to Wis. Stat. § 125.07(3) or (4) is substantially related to the duties and responsibilities associated with alcohol beverage licenses.

a) Any such underage drinking conviction within one (1) year of application for a license is typically grounds for denial.

b) Two or more such underage drinking convictions within five (5) year of application for a license are typically grounds for denial.

(3) **Service to Underage Persons.** Any service to underage persons conviction which is the same as or similar to Wis. Stat. § 125.07(1)(a) is substantially related to the duties and responsibilities associated with alcohol beverage licenses.

a) Two (2) or more service to underage persons within one (1) year of application for a License is typically grounds for denial.

(4) Drug Offense. The City has generally found that the following convictions are substantially related to the duties and responsibilities associated with alcohol beverage licenses: manufacturing, distributing or delivering a controlled substance or controlled substance analog under Wis. Stat. § 961.41(1); possessing with intent to manufacture, distribute or deliver, a controlled substance or controlled substance analog under Wis. Stat. § 961.41(1m); possessing, with intent to manufacture, distribute or deliver, or manufacturing, distributing or delivering a controlled substance or controlled substance analog under a federal law or law of another state that is substantially similar to Wis. Stat. § 961.41(1) or (1m); possessing any of the materials listed in Wis. Stat. § 961.65 with intent to manufacture methamphetamine under that section or under federal law or a law of another state that is substantially similar to Wis. Stat. § 961.65; or possessing controlled substances as regulated by Chapter 961, Wis. Stats.

a) The City has generally found such convictions within one (1) year of application for a License are grounds for denial.

b) The City has generally found two or more such convictions within five (5) years of application for License can be grounds for denial of a License.

(5) Overall Conviction Record, Felons, or Other Offenses. No operator's license shall be issued under this guideline to any person who has:

a) Been convicted of a felony that substantially relates to the circumstances of the licensed activity unless the person has been duly pardoned;

b) Been deemed a habitual law offender;

c) Convictions not specifically listed above shall also be grounds for denial of a License, as reasonably determined in the sound discretion of the City; or

d) Any intentionally or accidentally omitted any violation it will be considered a false application, resulting in the delay and or possible denial of the application.

(Code 1986, § 12.04(15); Ord. No. 1999-10, § 1, 7-13-1999; Ord. No. 2000-21, § 2, 1-9-2001, Ord. 2021-03, Ord. 2023-06)

**Secs. 6-45--6-60. Reserved.**

## DIVISION 2. PERMIT FOR CONSUMPTION IN PUBLIC PARKS<sup>2</sup>

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<sup>2</sup> Cross references: Parks and recreation, Ch. 86.





# APPLICATION FOR OPERATOR'S LICENSE

7B-1

CITY OF EVANSVILLE CITY CLERK'S OFFICE

31 S. Madison St, PO Box 529, Evansville, WI 53536

New Operator's License: \$35.00     Renewal Operator's License: \$35.00     Provisional License: \$15.00

NOTE: APPLICATION FEE WILL NOT BE REFUNDED IF DENIED OR WITHDRAWN.

A Police check will be completed. Please read carefully and answer honestly. Falsification and/or misrepresentation may be grounds for denial of license/permit. Applicant cannot reapply for a 6 month period from date of denial. If you have any doubt as to whether to include the facts of a specific incident it is recommended that you disclose the information. If you are unsure about how to respond to any questions on this form, check with the City Clerk for clarification. You can obtain information regarding your arrest and conviction record from the police department and/or the court with which you interacted, or the Wisconsin Circuit Court Access website at: <https://www.wicourts.gov/caserearch.htm> (CCAP may not provide comprehensive list of all arrests/convictions).

1. LEGAL NAME: Diana Hagler  
First Middle Last

DATE OF BIRTH: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_

CITY: Evansville STATE: WI ZIP: 53536 GENDER: Male  Female

Driver's License No.: \_\_\_\_\_ Issuing State: Wisconsin

HOW LONG HAVE YOU LIVED AT ABOVE ADDRESS? 8 years Former Name(s): Diana Lund

Prior Street Address if Above Address is Less Than 5 Years	State	Zip	From	To

### ARREST AND CONVICTION RECORD (Anywhere within the United States of America).

2. Have you ever been charged and/or convicted of a felony? Yes  No

3. Have you ever been charged and/or convicted of a misdemeanor? Yes  No

4. Within the past ten (10) years, have you been arrested for, received a summons to appear in court for, or forfeited a bond for any of the following:

Question	Yes	No
a) Any underage alcohol violation?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b) Operating a motor vehicle while intoxicated?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
c) Selling or furnishing alcoholic beverages to underage person?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
d) Permitting underage person on licensed premises?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
e) Allowing persons on licensed premises after closing?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
f) Any alcohol related violation other than a, b, c, d, and e?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
g) Sale of legal or illegal drugs to include prescription medications or possession of any illegal drugs to include prescription medications not prescribed to you?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
h) Fighting, disorderly conduct, assault, or battery?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
i) Resisting arrest, interfering with a police officer or obstructing an officer?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
j) Any crime or ordinance violation not listed above other than traffic or parking tickets?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

5. For each YES response above, you must identify all violations below. Attach additional sheets if necessary or continue on the back of this application.

TYPE OF ARREST, SUMMONS, VIOLATION OR CHARGE	MONTH/YEAR	CITY	STATE

Within the last two (2) years, did you have and/or complete one of the following:

<input checked="" type="checkbox"/> Successfully completed a Responsible Alcohol Servers Course	<input type="checkbox"/> An alcohol agent for a retail alcohol license
<input type="checkbox"/> Held an Operator's License issued in Wisconsin	<input type="checkbox"/> The sole proprietor of retail alcohol license

6. CERTIFICATION: I do hereby swear, under penalty of perjury, that I am the person who made and signed the foregoing application for an operator's license, and that all statements herein are complete, true and correct. I further understand a full background investigation may be conducted by the Evansville Police Department prior to consideration of this application. Additionally, I understand that this application may be denied if it contains any falsification-and that I will not be able to reapply for a 6 month period. I do further agree to comply with all laws, resolutions, ordinances, and regulations, federal, state or local affecting the sale of fermented malt beverages and intoxicating liquors.

Signature: Diana Hagler Email: \_\_\_\_\_  
 Printed Name: Diana Hagler Date: 2/11/26

### FOR MUNICIPALITY USE ONLY BELOW THIS LINE

Police Department Recommendation and Comments: \_\_\_\_\_

Paid To: City of Evansville Public Safety Committee: \_\_\_\_\_ Approved: \_\_\_\_\_ Denied: \_\_\_\_\_ Date: \_\_\_\_\_

Clerk's Office Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Recommend: X Non-Recommended: \_\_\_\_\_

Receipt # 15.00 Receipt: 1.000160432 35.00  
 DIANA HAGLER  
 Feb 11, 2026 12:37 PM

Police Chief's Signature: \_\_\_\_\_ Date: 02/14/2026





# APPLICATION FOR OPERATOR'S LICENSE

7B-2

CITY OF EVANSVILLE CITY CLERK'S OFFICE

31 S. Madison St, PO Box 529, Evansville, WI 53536

New Operator's License: \$35.00     Renewal Operator's License: \$35.00     Provisional License: \$15.00

NOTE: APPLICATION FEE WILL NOT BE REFUNDED IF DENIED OR WITHDRAWN.

A Police check will be completed. Please read carefully and answer honestly. Falsification and/or misrepresentation may be grounds for denial of license/permit. Applicant cannot reapply for a 6 month period from date of denial. If you have any doubt as to whether to include the facts of a specific incident it is recommended that you disclose the information. If you are unsure about how to respond to any questions on this form, check with the City Clerk for clarification. You can obtain information regarding your arrest and conviction record from the police department and/or the court with which you interacted, or the Wisconsin Circuit Court Access website at: <https://www.wicourts.gov/caserearch.htm> (CCAP may not provide comprehensive list of all arrests/convictions).

1. LEGAL NAME: Bryant Steven Kreigen  
First Middle Last

DATE OF BIRTH: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_

CITY: Evansville STATE: WI ZIP: 53536 GENDER: Male  Female

Driver's License No.: \_\_\_\_\_ Issuing State: Wisconsin

HOW LONG HAVE YOU LIVED AT ABOVE ADDRESS? 4 Years Former Name(s): \_\_\_\_\_

Prior Street Address if Above Address is Less Than 5 Years State 7/1 From To	City	State	Zip	From	To
<u>Sumner St</u>	<u>Sumner</u>	<u>SC</u>	<u>29185</u>		

### ARREST AND CONVICTION RECORD (Anywhere within the United States of America).

2. Have you ever been charged and/or convicted of a felony? Yes  No

3. Have you ever been charged and/or convicted of a misdemeanor? Yes  No

4. Within the past ten (10) years, have you been arrested for, received a summons to appear in court for, or forfeited a bond for any of the following:

Question	Yes	No
a) Any underage alcohol violation?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b) Operating a motor vehicle while intoxicated?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
c) Selling or furnishing alcoholic beverages to underage person?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
d) Permitting underage person on licensed premises?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
e) Allowing persons on licensed premises after closing?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
f) Any alcohol related violation other than a, b, c, d, and e?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
g) Sale of legal or illegal drugs to include prescription medications or possession of any illegal drugs to include prescription medications not prescribed to you?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
h) Fighting, disorderly conduct, assault, or battery?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
i) Resisting arrest, interfering with a police officer or obstructing an officer?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
j) Any crime or ordinance violation not listed above other than traffic or parking tickets?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

5. For each YES response above, you must identify all violations below. Attach additional sheets if necessary or continue on the back of this application.

TYPE OF ARREST, SUMMONS, VIOLATION OR CHARGE	MONTH/YEAR	CITY	STATE

Within the last two (2) years, did you have and/or complete one of the following:

Successfully completed a Responsible Alcohol Servers Course     An alcohol agent for a retail alcohol license

Held an Operator's License issued in Wisconsin     The sole proprietor of retail alcohol license

6. CERTIFICATION: I do hereby swear, under penalty of perjury, that I am the person who made and signed the foregoing application for an operator's license, and that all statements herein are complete, true and correct. I further understand a full background investigation may be conducted by the Evansville Police Department prior to consideration of this application. Additionally, I understand that this application may be denied if it contains any falsification and that I will not be able to reapply for a 6 month period. I do further agree to comply with all laws, resolutions, ordinances, and regulations, federal, state or local affecting the sale of fermented malt beverages and intoxicating liquors.

Signature: Bryant Kreigen    Email: \_\_\_\_\_

Printed Name: Bryant & Kreigen    Date: 2-20-20

### FOR MUNICIPALITY USE ONLY BELOW THIS LINE

Police Department Recommendation and Comments: \_\_\_\_\_

Public Safety Committee: Approved: \_\_\_\_\_ Denied: \_\_\_\_\_ Date: \_\_\_\_\_

Clerk's Office Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Recommendation: [Signature]    Non-Recommended: \_\_\_\_\_    Receipt #: \_\_\_\_\_

Police Chief's Signature: \_\_\_\_\_    Date: 03/02/2020





# APPLICATION FOR OPERATOR'S LICENSE

7B-3

CITY OF EVANSVILLE CITY CLERK'S OFFICE

31 S. Madison St, PO Box 529, Evansville, WI 53536

New Operator's License: \$35.00     Renewal Operator's License: \$35.00     Provisional License: \$15.00

NOTE: APPLICATION FEE WILL NOT BE REFUNDED IF DENIED OR WITHDRAWN.

A Police check will be completed. Please read carefully and answer honestly. Falsification and/or misrepresentation may be grounds for denial of license/permit. Applicant cannot reapply for a 6 month period from date of denial. If you have any doubt as to whether to include the facts of a specific incident it is recommended that you disclose the information. If you are unsure about how to respond to any questions on this form, check with the City Clerk for clarification. You can obtain information regarding your arrest and conviction record from the police department and/or the court with which you interacted, or the Wisconsin Circuit Court Access website at: <https://www.wicourts.gov/caserech.htm> (CCAP may not provide comprehensive list of all arrests/convictions).

1. LEGAL NAME: Catherine Sophia Schappner DATE OF BIRTH: \_\_\_\_\_  
First Last

ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_

CITY: Albany STATE: Wisconsin ZIP: 53502 GENDER: Male  Female

Driver's License No.: \_\_\_\_\_ Issuing State: Wisconsin

HOW LONG HAVE YOU LIVED AT ABOVE ADDRESS? 19 Former Name(s): None

Prior Street Address if Above Address is Less Than 5 Years	State	Zip	From	To

### ARREST AND CONVICTION RECORD

(Anywhere within the United States of America)

2. Have you ever been charged and/or convicted of a felony? Yes  No

3. Have you ever been charged and/or convicted of a misdemeanor? Yes  No

4. Within the past ten (10) years, have you been arrested for, received a summons to appear in court for, or forfeited a bond for any of the following:

Question	Yes	No
a) Any underage alcohol violation?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b) Operating a motor vehicle while intoxicated?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
c) Selling or furnishing alcoholic beverages to underage person?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
d) Permitting underage person on licensed premises?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
e) Allowing persons on licensed premises after closing?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
f) Any alcohol related violation other than a, b, c, d, and e?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
g) Sale of legal or illegal drugs to include prescription medications or possession of any illegal drugs to include prescription medications not prescribed to you?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
h) Fighting, disorderly conduct, assault, or battery?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
i) Resisting arrest, interfering with a police officer or obstructing an officer?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
j) Any crime or ordinance violation not listed above other than traffic or parking tickets?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

5. For each YES response above, you must identify all violations below. Attach additional sheets if necessary or continue on the back of this application.

TYPE OF ARREST, SUMMONS, VIOLATION OR CHARGE	MONTH/YEAR	CITY	STATE

Within the last two (2) years, did you have and/or complete one of the following:

<input checked="" type="checkbox"/> Successfully completed a Responsible Alcohol Servers Course	<input type="checkbox"/> An alcohol agent for a retail alcohol license
<input type="checkbox"/> Held an Operator's License issued in Wisconsin	<input type="checkbox"/> The sole proprietor of retail alcohol license

6. CERTIFICATION: I do hereby swear, under penalty of perjury, that I am the person who made and signed the foregoing application for an operator's license, and that all statements herein are complete, true and correct. I further understand a full background investigation may be conducted by the Evansville Police Department prior to consideration of this application. Additionally, I understand that this application may be denied if it contains any falsification and that I will not be able to reapply for a 6 month period. I do further agree to comply with all laws, resolutions, ordinances, and regulations, federal, state or local affecting the sale of fermented malt beverages and intoxicating liquors.

Signature: Catherine S Schappner Email: \_\_\_\_\_  
 Printed Name: Catherine S Schappner Date: 2-20-2026

### FOR MUNICIPALITY USE ONLY BELOW THIS LINE

Police Department Recommendation and Comments:	Public Safety Committee: Approved: _____ Denied: _____ Date: _____
Recommend: <input checked="" type="checkbox"/>	Clerk's Office Signature: _____ Date: _____
Non-Recommended: <input type="checkbox"/>	Receipt #
Police Chief's Signature: <u>[Signature]</u>	Date: <u>03/02/2024</u>





# APPLICATION FOR OPERATOR'S LICENSE

7B-4

CITY OF EVANSVILLE CITY CLERK'S OFFICE

31 S. Madison St, PO Box 529, Evansville, WI 53536

New Operator's License: \$35.00     Renewal Operator's License: \$35.00     Provisional License: \$15.00

NOTE: APPLICATION FEE WILL NOT BE REFUNDED IF DENIED OR WITHDRAWN.

A Police check will be completed. Please read carefully and answer honestly. Falsification and/or misrepresentation may be grounds for denial of license/permit. Applicant cannot reapply for a 6 month period from date of denial. If you have any doubt as to whether to include the facts of a specific incident it is recommended that you disclose the information. If you are unsure about how to respond to any questions on this form, check with the City Clerk for clarification. You can obtain information regarding your arrest and conviction record from the police department and/or the court with which you interacted, or the Wisconsin Circuit Court Access website at: <https://www.wicourts.gov/caserearch.htm> (CCAP may not provide comprehensive list of all arrests/convictions).

1. LEGAL NAME: Tina C Zipse      DATE OF BIRTH: \_\_\_\_\_  
First Last

ADDRESS: \_\_\_\_\_      PHONE: \_\_\_\_\_

CITY: Evansville      STATE: WI      ZIP: 53536      GENDER: Male  Female

Driver's License No.: \_\_\_\_\_      Issuing State: WI

HOW LONG HAVE YOU LIVED AT ABOVE ADDRESS? 8 years      Former Name(s): \_\_\_\_\_

Prior Street Address if Above Address is Less Than 5 Years	State	Zip	From	To

### ARREST AND CONVICTION RECORD (Anywhere within the United States of America)

2. Have you ever been charged and/or convicted of a felony?      Yes  No

3. Have you ever been charged and/or convicted of a misdemeanor?      Yes  No

4. Within the past ten (10) years, have you been arrested for, received a summons to appear in court for, or forfeited a bond for any of the following:

Question	Yes	No
a) Any underage alcohol violation?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b) Operating a motor vehicle while intoxicated?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
c) Selling or furnishing alcoholic beverages to underage person?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
d) Permitting underage person on licensed premises?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
e) Allowing persons on licensed premises after closing?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
f) Any alcohol related violation other than a, b, c, d, and e?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
g) Sale of legal or illegal drugs to include prescription medications or possession of any illegal drugs to include prescription medications not prescribed to you?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
h) Fighting, disorderly conduct, assault, or battery?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
i) Resisting arrest, interfering with a police officer or obstructing an officer?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
j) Any crime or ordinance violation not listed above other than traffic or parking tickets?	<input checked="" type="checkbox"/>	<input type="checkbox"/>

5. For each YES response above, you must identify all violations below. Attach additional sheets if necessary or continue on the back of this application.

TYPE OF ARREST, SUMMONS, VIOLATION OR CHARGE	MONTH/YEAR	CITY	STATE
<u>Bad Check</u>	<u>5-8-24</u>	<u>Evansville</u>	<u>WI</u>

Within the last two (2) years, did you have and/or complete one of the following:

Successfully completed a Responsible Alcohol Servers Course       Attach certificate of completion for Responsible Alcohol Servers Course

Held an Operator's License issued in Wisconsin       An alcohol agent for a retail alcohol license

The sole proprietor of retail alcohol license

6. CERTIFICATION: I do hereby swear, under penalty of perjury, that I am the person who made and signed the foregoing application for an operator's license, and that all statements herein are complete, true and correct. I further understand a full background investigation may be conducted by the Evansville Police Department prior to consideration of this application. Additionally, I understand that this application may be denied if it contains any falsification-and that I will not be able to reapply for a 6 month period. I do further agree to comply with all laws, resolutions, ordinances, and regulations, federal, state or local affecting the sale of fermented malt beverages and intoxicating liquors.

Signature: Tina C Zipse      Email: \_\_\_\_\_

Printed Name: Tina C Zipse      Date: 2-18-26

### FOR MUNICIPALITY USE ONLY BELOW THIS LINE

Police Department Recommendation and Comments: \_\_\_\_\_

Public Safety Committee: Approved: \_\_\_\_\_ Denied: \_\_\_\_\_ Date: \_\_\_\_\_

Clerk's Office Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Recommend:  Non-Recommended: \_\_\_\_\_

Police Chief's Signature: [Signature]      Receipt #: \_\_\_\_\_

Date: 03/02/2026





# APPLICATION FOR OPERATOR'S LICENSE

7B-5

CITY OF EVANSVILLE CITY CLERK'S OFFICE

31 S. Madison St, PO Box 529, Evansville, WI 53536

New Operator's License: \$35.00     Renewal Operator's License: \$35.00     Provisional License: \$15.00

NOTE: APPLICATION FEE WILL NOT BE REFUNDED IF DENIED OR WITHDRAWN.

A Police check will be completed. Please read carefully and answer honestly. Falsification and/or misrepresentation may be grounds for denial of license/permit. Applicant cannot reapply for a 6 month period from date of denial. If you have any doubt as to whether to include the facts of a specific incident it is recommended that you disclose the information. If you are unsure about how to respond to any questions on this form, check with the City Clerk for clarification. You can obtain information regarding your arrest and conviction record from the police department and/or the court with which you interacted, or the Wisconsin Circuit Court Access website at: <https://www.wicourts.gov/casesearch.htm> (CCAP may not provide comprehensive list of all arrests/convictions).

1. LEGAL NAME: Charlene Lynn Chosmose      DATE OF BIRTH: \_\_\_\_\_  
First Middle Last

ADDRESS: \_\_\_\_\_      PHONE: \_\_\_\_\_

CITY: Evansville      STATE: Wis      ZIP: 53536      GENDER: Male  Female

Driver's License No.: \_\_\_\_\_      Issuing State: Wisconsin

HOW LONG HAVE YOU LIVED AT ABOVE ADDRESS? 9 years      Former Name(s): Charlene Burger

Prior Street Address if Above Address is Less Than 5 Years	State	Zip	From	To

### ARREST AND CONVICTION RECORD (Anywhere within the United States of America)

2. Have you ever been charged and/or convicted of a felony?      Yes  No

3. Have you ever been charged and/or convicted of a misdemeanor?      Yes  No

4. Within the past ten (10) years, have you been arrested for, received a summons to appear in court for, or forfeited a bond for any of the following:

Question	Yes	No
a) Any underage alcohol violation?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b) Operating a motor vehicle while intoxicated?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
c) Selling or furnishing alcoholic beverages to underage person?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
d) Permitting underage person on licensed premises?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
e) Allowing persons on licensed premises after closing?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
f) Any alcohol related violation other than a, b, c, d, and e?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
g) Sale of legal or illegal drugs to include prescription medications or possession of any illegal drugs to include prescription medications not prescribed to you?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
h) Fighting, disorderly conduct, assault, or battery?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
i) Resisting arrest, interfering with a police officer or obstructing an officer?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
j) Any crime or ordinance violation not listed above other than traffic or parking tickets?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

5. For each YES response above, you must identify all violations below. Attach additional sheets if necessary or continue on the back of this application:

TYPE OF ARREST, SUMMONS, VIOLATION OR CHARGE	MONTH/YEAR	CITY	STATE

Within the last two (2) years, did you have and/or complete one of the following:

<input checked="" type="checkbox"/> Successfully completed a Responsible Alcohol Servers Course	<input type="checkbox"/> An alcohol agent for a retail alcohol license
<input type="checkbox"/> Held an Operator's License issued in Wisconsin	<input type="checkbox"/> The sole proprietor of retail alcohol license

Attach certificate of completion for Responsible Alcohol Servers Course

6. CERTIFICATION: I do hereby swear, under penalty of perjury, that I am the person who made and signed the foregoing application for an operator's license, and that all statements herein are complete, true and correct. I further understand a full background investigation may be conducted by the Evansville Police Department prior to consideration of this application. Additionally, I understand that this application may be denied if it contains any falsification and that I will not be able to reapply for a 6 month period. I do further agree to comply with all laws, resolutions, ordinances, and regulations, federal, state or local affecting the sale of fermented malt beverages and intoxicating liquors.

Signature: Charlene L. Chosmose      Email: \_\_\_\_\_  
Printed Name: Charlene L. Chosmose      Date: Jan 10 2026

FOR MUNICIPALITY USE ONLY, BELOW THIS LINE

Police Department Recommendation and Comments:	Public Safety Committee: Approved: _____ Denied: _____ Date: _____
Recommend: <input checked="" type="checkbox"/> Non-Recommended: <input type="checkbox"/>	Clerk's Office Signature: _____ Date: _____
<u>[Signature]</u> Police Chief's Signature	Receipt # _____
<u>03/02/2026</u> Date	





# APPLICATION FOR OPERATOR'S LICENSE

7B-6

CITY OF EVANSVILLE CITY CLERK'S OFFICE

31 S. Madison St, PO Box 529, Evansville, WI 53536

New Operator's License: \$35.00

Renewal Operator's License: \$35.00

Provisional License: \$15.00

NOTE: APPLICATION FEE WILL NOT BE REFUNDED IF DENIED OR WITHDRAWN.

A Police check will be completed. Please read carefully and answer honestly. Falsification and/or misrepresentation may be grounds for denial of license/permit. Applicant cannot reapply for a 6 month period from date of denial. If you have any doubt as to whether to include the facts of a specific incident it is recommended that you disclose the information. If you are unsure about how to respond to any questions on this form, check with the City Clerk for clarification. You can obtain information regarding your arrest and conviction record from the police department and/or the court with which you interacted, or the Wisconsin Circuit Court Access website at: <https://www.wicourts.gov/caserearch.htm> (CCAP may not provide comprehensive list of all arrests/convictions).

1. LEGAL NAME: Brian Olson  
 First Last

DATE OF BIRTH: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_

CITY: Evansville STATE: WI ZIP: 53536 GENDER: Male  Female

Driver's License No.: \_\_\_\_\_ Issuing State: \_\_\_\_\_

HOW LONG HAVE YOU LIVED AT ABOVE ADDRESS? Former Name(s): \_\_\_\_\_

Prior Street Address if Above Address is Less Than 5 Years	State	Zip	From	To
<u>W 1st North</u>	<u>WI</u>	<u>53512</u>	<u>3/2019</u>	<u>3/2024</u>

### ARREST AND CONVICTION RECORD (Anywhere within the United States of America)

2. Have you ever been charged and/or convicted of a felony? Yes  No

3. Have you ever been charged and/or convicted of a misdemeanor? Yes  No

4. Within the past ten (10) years, have you been arrested for, received a summons to appear in court for, or forfeited a bond for any of the following:

Question	Yes	No
a) Any underage alcohol violation?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b) Operating a motor vehicle while intoxicated?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
c) Selling or furnishing alcoholic beverages to underage person?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
d) Permitting underage person on licensed premises?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
e) Allowing persons on licensed premises after closing?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
f) Any alcohol related violation other than a, b, c, d, and e?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
g) Sale of legal or illegal drugs to include prescription medications or possession of any illegal drugs to include prescription medications not prescribed to you?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
h) Fighting, disorderly conduct, assault, or battery?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
i) Resisting arrest, interfering with a police officer or obstructing an officer?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
j) Any crime or ordinance violation not listed above other than traffic or parking tickets?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

5. For each YES response above, you must identify all violations below. Attach additional sheets if necessary or continue on the back of this application.

TYPE OF ARREST, SUMMONS, VIOLATION OR CHARGE	MONTH/YEAR	CITY	STATE

Within the last two (2) years, did you have and/or complete one of the following:

Successfully completed a Responsible Alcohol Servers Course

Held an Operator's License issued in Wisconsin

Attach certificate of completion for Responsible Alcohol Servers Course

An alcohol agent for a retail alcohol license

The sole proprietor of retail alcohol license

6. CERTIFICATION: I do hereby swear, under penalty of perjury, that I am the person who made and signed the foregoing application for an operator's license, and that all statements herein are complete, true and correct. I further understand a full background investigation may be conducted by the Evansville Police Department prior to consideration of this application. Additionally, I understand that this application may be denied if it contains any falsification and that I will not be able to reapply for a 6 month period. I do further agree to comply with all laws, resolutions, ordinances, and regulations, federal, state or local affecting the sale of fermented malt beverages and intoxicating liquors.

Signature: Brian Olson Email: \_\_\_\_\_

Printed Name: Brian Olson Date: 1/29/2020

### FOR MUNICIPALITY USE ONLY BELOW THIS LINE

Police Department Recommendation and Comments: \_\_\_\_\_

Public Safety Committee: Approved: \_\_\_\_\_ Denied: \_\_\_\_\_ Date: \_\_\_\_\_

Clerk's Office Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Recommend:  Non-Recommended:

Police Chief's Signature: [Signature] Date: 03/02/2024

Receipt # \_\_\_\_\_





# APPLICATION FOR OPERATOR'S LICENSE

7B-7

CITY OF EVANSVILLE CITY CLERK'S OFFICE

31 S. Madison St, PO Box 529, Evansville, WI 53536

New Operator's License: \$35.00     Renewal Operator's License: \$35.00     Provisional License: \$15.00

NOTE: APPLICATION FEE WILL NOT BE REFUNDED IF DENIED OR WITHDRAWN.

A Police check will be completed. Please read carefully and answer honestly. Falsification and/or misrepresentation may be grounds for denial of license/permit. Applicant cannot reapply for a 6 month period from date of denial. If you have any doubt as to whether to include the facts of a specific incident it is recommended that you disclose the information. If you are unsure about how to respond to any questions on this form, check with the City Clerk for clarification. You can obtain information regarding your arrest and conviction record from the police department and/or the court with which you interacted, or the Wisconsin Circuit Court Access website at: <https://www.wicourts.gov/caserearch.htm> (CCAP may not provide comprehensive list of all arrests/convictions).

1. LEGAL NAME: Daniel Paul Rubin  
First Middle Last

DATE OF BIRTH: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_

CITY: Evansville STATE: WI ZIP: 53536 GENDER: Male  Female

Driver's License No.: \_\_\_\_\_ Issuing State: Wisconsin

HOW LONG HAVE YOU LIVED AT ABOVE ADDRESS? 5 yrs. Former Name(s): None

Prior Street Address if Above Address is Less Than 5 Years	State	Zip	From	To

### ARREST AND CONVICTION RECORD (Anywhere within the United States of America)

2. Have you ever been charged and/or convicted of a felony? Yes  No

3. Have you ever been charged and/or convicted of a misdemeanor? Yes  No

4. Within the past ten (10) years, have you been arrested for, received a summons to appear in court for, or forfeited a bond for any of the following:

Question	Yes	No
a) Any underage alcohol violation?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b) Operating a motor vehicle while intoxicated?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
c) Selling or furnishing alcoholic beverages to underage person?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
d) Permitting underage person on licensed premises?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
e) Allowing persons on licensed premises after closing?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
f) Any alcohol related violation other than a, b, c, d, and e?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
g) Sale of legal or illegal drugs to include prescription medications or possession of any illegal drugs to include prescription medications not prescribed to you?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
h) Fighting, disorderly conduct, assault, or battery?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
i) Resisting arrest, interfering with a police officer or obstructing an officer?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
j) Any crime or ordinance violation not listed above other than traffic or parking tickets?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

5. For each YES response above, you must identify all violations below. Attach additional sheets if necessary or continue on the back of this application.

TYPE OF ARREST, SUMMONS, VIOLATION OR CHARGE	MONTH/YEAR	CITY	STATE

Within the last two (2) years, did you have and/or complete one of the following:

Successfully completed a Responsible Alcohol Servers Course     An alcohol agent for a retail alcohol license

Held an Operator's License Issued in Wisconsin     The sole proprietor of retail alcohol license

6. CERTIFICATION: I do hereby swear, under penalty of perjury, that I am the person who made and signed the foregoing application for an operator's license, and that all statements herein are complete, true and correct. I further understand a full background investigation may be conducted by the Evansville Police Department prior to consideration of this application. Additionally, I understand that this application may be denied if it contains any falsification and that I will not be able to reapply for a 6 month period. I do further agree to comply with all laws, resolutions, ordinances, and regulations, federal, state or local affecting the sale of fermented malt beverages and intoxicating liquors.

Signature: Daniel Rubin    Email: \_\_\_\_\_

Printed Name: Daniel Rubin    Date: 2/4/2026

### FOR MUNICIPALITY USE ONLY BELOW THIS LINE

Police Department Recommendation and Comments: \_\_\_\_\_

Public Safety Committee: Approved: \_\_\_\_\_ Denied: \_\_\_\_\_ Date: \_\_\_\_\_

Clerk's Office Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Recommend:    Non-Recommended: \_\_\_\_\_

Receipt # \_\_\_\_\_

Police Chief's Signature:    Date: 03/02/2024





# APPLICATION FOR OPERATOR'S LICENSE

7B-8

CITY OF EVANSVILLE CITY CLERK'S OFFICE

31 S. Madison St, PO Box 529, Evansville, WI 53536

New Operator's License: \$35.00     Renewal Operator's License: \$35.00     Provisional License: \$15.00

NOTE: APPLICATION FEE WILL NOT BE REFUNDED IF DENIED OR WITHDRAWN.

A Police check will be completed. Please read carefully and answer honestly. Falsification and/or misrepresentation may be grounds for denial of license/permit. Applicant cannot reapply for a 6 month period from date of denial. If you have any doubt as to whether to include the facts of a specific incident it is recommended that you disclose the information. If you are unsure about how to respond to any questions on this form, check with the City Clerk for clarification. You can obtain information regarding your arrest and conviction record from the police department and/or the court with which you interacted, or the Wisconsin Circuit Court Access website at: <https://www.wicourts.gov/caserech.htm> (CCAP may not provide comprehensive list of all arrests/convictions).

1. LEGAL NAME: Julie Marie Vondra      DATE OF BIRTH: \_\_\_\_\_  
First Middle Last

ADDRESS: \_\_\_\_\_      PHONE: \_\_\_\_\_

CITY: Brodhead      STATE: WI      ZIP: 53520      GENDER: Male  Female

Driver's License No.: \_\_\_\_\_      Issuing State: WI

HOW LONG HAVE YOU LIVED AT ABOVE ADDRESS? 13      Former Name(s): \_\_\_\_\_

Prior Street Address if Above Address is Less Than 5 Years	State	Zip	From	To

### ARREST AND CONVICTION RECORD (Anywhere within the United States of America).

2. Have you ever been charged and/or convicted of a felony?      Yes       No

3. Have you ever been charged and/or convicted of a misdemeanor?      Yes       No

4. Within the past ten (10) years, have you been arrested for, received a summons to appear in court for, or forfeited a bond for any of the following:

Question	Yes	No
a) Any underage alcohol violation?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b) Operating a motor vehicle while intoxicated?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
c) Selling or furnishing alcoholic beverages to underage person?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
d) Permitting underage person on licensed premises?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
e) Allowing persons on licensed premises after closing?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
f) Any alcohol related violation other than a, b, c, d, and e?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
g) Sale of legal or illegal drugs to include prescription medications or possession of any illegal drugs to include prescription medications not prescribed to you?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
h) Fighting, disorderly conduct, assault, or battery?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
i) Resisting arrest, interfering with a police officer or obstructing an officer?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
j) Any crime or ordinance violation not listed above other than traffic or parking tickets?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

5. For each YES response above, you must identify all violations below. Attach additional sheets if necessary or continue on the back of this application.

TYPE OF ARREST, SUMMONS, VIOLATION OR CHARGE	MONTH/YEAR	CITY	STATE
<u>Drug Charge - Pardoned</u>	<u>2003</u>	<u>Milwaukee</u>	<u>WI</u>

Within the last two (2) years, did you have and/or complete one of the following:

Successfully completed a Responsible Alcohol Servers Course       An alcohol agent for a retail alcohol license

Held an Operator's License Issued in Wisconsin       The sole proprietor of retail alcohol license

Attach certificate of completion for Responsible Alcohol Servers Course

6. CERTIFICATION: I do hereby swear, under penalty of perjury, that I am the person who made and signed the foregoing application for an operator's license, and that all statements herein are complete, true and correct. I further understand a full background investigation may be conducted by the Evansville Police Department prior to consideration of this application. Additionally, I understand that this application may be denied if it contains any falsification and that I will not be able to reapply for a 6 month period. I do further agree to comply with all laws, resolutions, ordinances, and regulations, federal, state or local affecting the sale of fermented malt beverages and intoxicating liquors.

Signature: Julie Vondra      Email: \_\_\_\_\_  
Printed Name: Julie Vondra      Date: 2.21.20

FOR MUNICIPALITY USE ONLY BELOW THIS LINE

Police Department Recommendation and Comments: \_\_\_\_\_      Public Safety Committee: Approved: \_\_\_\_\_ Denied: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_      Clerk's Office Signature      \_\_\_\_\_      Date

Recommend:       Non-Recommended: \_\_\_\_\_      Receipt # \_\_\_\_\_

[Signature]      03/02/2020      \_\_\_\_\_  
Police Chief's Signature      Date

STATE OF WISCONSIN  
RECEIVED AND FILED  
MAR 25 2024  
OFFICE OF THE  
SECRETARY OF STATE



**OFFICE OF THE GOVERNOR**

**TO ALL WHOM THESE PRESENTS COME:**

**WHEREAS**, Julie M. Vondra (date of birth \_\_\_\_\_) was convicted on May 20, 2004, of one count of Conspiracy to Manufacture/Deliver Heroin (>50g), in violation of Section 961.41(1)(D)4 of the Wisconsin Statutes, Milwaukee County case number 2004CF1345 and, on September 17, 2004, was sentenced to four years of probation;

**WHEREAS**, this nonviolent offense occurred twenty years ago, and Ms. Vondra has shown personal growth and positive adjustment;

**WHEREAS**, Ms. Vondra has maintained employment and pursued certifications;

**WHEREAS**, the District Attorney's Office supports a pardon; and

**WHEREAS**, I find Julie M. Vondra deserving of extraordinary relief.

**NOW, THEREFORE, I, TONY EVERS**, Governor of the State of Wisconsin, by the authority vested in me by Article V, Section 6 of the Wisconsin Constitution, do FULLY AND UNCONDITIONALLY PARDON Julie M. Vondra of the offense described above and restore to her all the rights and privileges which may have been forfeited by her as a result of said offense.



**IN TESTIMONY WHEREOF**, I have hereunto set my hand and caused the Great seal of the State of Wisconsin to be affixed. Done at the Capitol in the City of Madison this twenty-fifth day of March in the year of two thousand twenty-four.

TONY EVERS  
Governor

By the Governor:

  
SARAH GODLEWSKI  
Secretary of State



# APPLICATION FOR OPERATOR'S LICENSE

7B-9

CITY OF EVANSVILLE CITY CLERK'S OFFICE

31 S. Madison St, PO Box 529, Evansville, WI 53536

New Operator's License: \$35.00     Renewal Operator's License: \$35.00     Provisional License: \$15.00

NOTE: APPLICATION FEE WILL NOT BE REFUNDED IF DENIED OR WITHDRAWN.

A Police check will be completed. Please read carefully and answer honestly. Falsification and/or misrepresentation may be grounds for denial of license/permit. Applicant cannot reapply for a 6 month period from date of denial. If you have any doubt as to whether to include the facts of a specific incident it is recommended that you disclose the information. If you are unsure about how to respond to any questions on this form, check with the City Clerk for clarification. You can obtain information regarding your arrest and conviction record from the police department and/or the court with which you interacted, or the Wisconsin Circuit Court Access website at: <https://www.wicourts.gov/caserearch.htm> (CCAP may not provide comprehensive list of all arrests/convictions).

1. LEGAL NAME: Clark Thomas Fox  
First Middle Last

DATE OF BIRTH: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_

CITY: Evansville STATE: WI ZIP: 53536 GENDER: Male  Female

Driver's License No.: \_\_\_\_\_ Issuing State: WI

HOW LONG HAVE YOU LIVED AT ABOVE ADDRESS? 4yr 11mo Former Name(s): \_\_\_\_\_

Prior Street Address if Above Address is Less Than 5 Years	State	Zip	From	To
<u>Edgerton</u>	<u>WI</u>	<u>53534</u>	<u>09/17</u>	<u>03/21</u>

### ARREST AND CONVICTION RECORD

(Anywhere within the United States of America)

2. Have you ever been charged and/or convicted of a felony? Yes  No

3. Have you ever been charged and/or convicted of a misdemeanor? Yes  No

4. Within the past ten (10) years, have you been arrested for, received a summons to appear in court for, or forfeited a bond for any of the following:

a) Any underage alcohol violation?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
b) Operating a motor vehicle while intoxicated?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
c) Selling or furnishing alcoholic beverages to underage person?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
d) Permitting underage person on licensed premises?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
e) Allowing persons on licensed premises after closing?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
f) Any alcohol related violation other than a, b, c, d, and e?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
g) Sale of legal or illegal drugs to include prescription medications or possession of any illegal drugs to include prescription medications not prescribed to you?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
h) Fighting, disorderly conduct, assault, or battery?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
i) Resisting arrest, interfering with a police officer or obstructing an officer?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
j) Any crime or ordinance violation not listed above other than traffic or parking tickets?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>

5. For each YES response above, you must identify all violations below. Attach additional sheets if necessary or continue on the back of this application.

TYPE OF ARREST, SUMMONS, VIOLATION OR CHARGE	MONTH/YEAR	CITY	STATE
<u>OWI</u>	<u>07/2024</u>	<u>Evansville</u>	<u>WI</u>

Within the last two (2) years, did you have and/or complete one of the following:

- Successfully completed a Responsible Alcohol Servers Course
- Held an Operator's License issued in Wisconsin

Attach certificate of completion for Responsible Alcohol Servers Course

- An alcohol agent for a retail alcohol license
- The sole proprietor of retail alcohol license

6. CERTIFICATION: I do hereby swear, under penalty of perjury, that I am the person who made and signed the foregoing application for an operator's license, and that all statements herein are complete, true and correct. I further understand a full background investigation may be conducted by the Evansville Police Department prior to consideration of this application. Additionally, I understand that this application may be denied if it contains any falsification and that I will not be able to reapply for a 6 month period. I do further agree to comply with all laws, resolutions, ordinances, and regulations, federal, state or local affecting the sale of fermented malt beverages and intoxicating liquors.

Signature: Clark Fox  
Printed Name: Clark Fox

Email: \_\_\_\_\_  
Date: 02/23/2026

### FOR MUNICIPALITY USE ONLY BELOW THIS LINE

Police Department Recommendation and Comments: Disclosed OWI but did not check paper box Believed to be oversight.

Public Safety Committee: City of Evansville  
 Approved: \_\_\_\_\_ Denied: \_\_\_\_\_ Date: \_\_\_\_\_

Recommend: [Signature] Non-Recommended: \_\_\_\_\_

Clerk's Office Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Receipt # 1-000160483 350.00  
 KWIK TRIP  
 Feb 24, 2026 2:10 PM

[Signature] 03/02/2026  
 Police Chief's Signature Date





# APPLICATION FOR OPERATOR'S LICENSE

7B-10

CITY OF EVANSVILLE CITY CLERK'S OFFICE

31 S. Madison St, PO Box 529, Evansville, WI 53536

New Operator's License: \$35.00

Renewal Operator's License: \$35.00

Provisional License: \$15.00

**NOTE: APPLICATION FEE WILL NOT BE REFUNDED IF DENIED OR WITHDRAWN.**

A Police check will be completed. Please read carefully and answer honestly. Falsification and/or misrepresentation may be grounds for denial of license/permit. Applicant cannot reapply for a 6 month period from date of denial. If you have any doubt as to whether to include the facts of a specific incident it is recommended that you disclose the information. If you are unsure about how to respond to any questions on this form, check with the City Clerk for clarification. You can obtain information regarding your arrest and conviction record from the police department and/or the court with which you interacted, or the Wisconsin Circuit Court Access website at: <https://www.wicourts.gov/casesearch.htm> (CCAP may not provide comprehensive list of all arrests/convictions).

1. LEGAL NAME: Shawn Marre Dunphy DATE OF BIRTH: \_\_\_\_\_  
 First Middle Last

ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_

CITY: Evansville STATE: WI ZIP: 53536 GENDER: Male  Female

Driver's License No.: \_\_\_\_\_ Issuing State: Wisconsin

HOW LONG HAVE YOU LIVED AT ABOVE ADDRESS? 1 year Former Name(s): \_\_\_\_\_

Prior Street Address if Above Address is Less Than 5 Years	State	Zip	From	To
_____	<u>WI</u>	<u>53536</u>	<u>7/23</u>	<u>10/24</u>

### ARREST AND CONVICTION RECORD (Anywhere within the United States of America).

2. Have you ever been charged and/or convicted of a felony? Yes  No

3. Have you ever been charged and/or convicted of a misdemeanor? Yes  No

4. Within the past ten (10) years, have you been arrested for, received a summons to appear in court for, or forfeited a bond for any of the following:

Question	Yes	No
a) Any underage alcohol violation?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b) Operating a motor vehicle while intoxicated?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
c) Selling or furnishing alcoholic beverages to underage person?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
d) Permitting underage person on licensed premises?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
e) Allowing persons on licensed premises after closing?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
f) Any alcohol related violation other than a, b, c, d, and e?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
g) Sale of legal or illegal drugs to include prescription medications or possession of any illegal drugs to include prescription medications not prescribed to you?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
h) Fighting, disorderly conduct, assault, or battery?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
i) Resisting arrest, interfering with a police officer or obstructing an officer?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
j) Any crime or ordinance violation not listed above other than traffic or parking tickets?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

5. For each YES response above, you must identify all violations below. Attach additional sheets if necessary or continue on the back of this application.

TYPE OF ARREST, SUMMONS, VIOLATION OR CHARGE	MONTH/YEAR	CITY	STATE

Within the last two (2) years, did you have and/or complete one of the following:

<input type="checkbox"/> Successfully completed a Responsible Alcohol Servers Course	<input type="checkbox"/> An alcohol agent for a retail alcohol license
<input checked="" type="checkbox"/> Held an Operator's License issued in Wisconsin	<input type="checkbox"/> The sole proprietor of retail alcohol license

6. CERTIFICATION: I do hereby swear, under penalty of perjury, that I am the person who made and signed the foregoing application for an operator's license, and that all statements herein are complete, true and correct. I further understand a full background investigation may be conducted by the Evansville Police Department prior to consideration of this application. Additionally, I understand that this application may be denied if it contains any falsification and that I will not be able to reapply for a 6 month period. I do further agree to comply with all laws, resolutions, ordinances, and regulations, federal, state or local affecting the sale of fermented malt beverages and intoxicating liquors.

Signature: Shawn Dunphy Email: \_\_\_\_\_  
 Printed Name: Shawn Dunphy Date: 2/12/26

### FOR MUNICIPALITY USE ONLY BELOW THIS LINE

Police Department Recommendation and Comments: \_\_\_\_\_ Public Safety Committee: \_\_\_\_\_  
 Approved: \_\_\_\_\_ Denied: \_\_\_\_\_ City of Evansville Date: \_\_\_\_\_

Clerk's Office Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Recommend: [Signature] Non-Recommended: \_\_\_\_\_  
 Police Chief's Signature: \_\_\_\_\_ Date: 03/02/2026

Receipt # \_\_\_\_\_ Receipt: 1.000160497 35.00  
 SHAWN DUNPHY  
 Feb 27, 2026 11:54 AM





# APPLICATION FOR Street Closure License

7C

(Section 106 Municipal Code)  
CITY OF EVANSVILLE CLERK'S OFFICE  
31 S. Madison St, PO Box 529, Evansville, WI 53534  
(608) 882-2266 - Fax (608) 882-7282

**APPLICATION FEE WILL NOT BE REFUNDED IF DENIED OR WITHDRAWN**

\$25.00 Short Term (4 hours or less) Street Closure  ~~\$25.00~~ Long Term (More than 4 hours) Street Closure  
(Plus Applicable Notification Fees or Petition with 2/3 applicable signatures)

*This permit shall license the closing, obstruction, encroachment, occupation or physical encumbrance of any street, highway, alley, and sidewalk, except federal or state highways for a period that would require the full or partial closure.*

Name of Applicant/Organization: EVANSVILLE FFA ALUMNI Phone: 608-295-4125

Applicant/Organization Address: 32 CEMETERY ST. EVANSVILLE WI 53536

Responsible Person: RONALD T BUTCHER  
First Middle Last

Home Address: 32 CEMETERY ST

City EVANSVILLE State: WI Zip: 53536

Phone No: 608-295-4125 Email Address: ronbutcher@yahoo.com

Date(s) of Event(s): JULY 4 2026 PARADE Anticipated Attendance Number: 100 GUESTS

Hours of Operation: 7am - 12:00pm

Other Permits Applied For:

Mobile Vendor

Temporary Class B License (beer or wine)

Other:

Location of Event Description: *Application must include a copy of map, showing areas that are intended to be blocked off.*

EVANSVILLE FOURTH OF JULY'S PARADE

**Applications must be submitted 35 days in advance**

**Hold Harmless-** The applicant agrees to indemnify, defend and hold the city and its employees and agents harmless against all claims, liability, loss, damage or expense asserted against or incurred by the city on account of any injury or death of any person or damage to any property caused by or resulting from the activities for which the license is granted. As evidence of the applicant's ability to perform the conditions of the license, the public safety committee may require the applicant to furnish a certificate of comprehensive general liability insurance with the city and its employees and agents as an additional insured. The insurance shall include coverage for a contractual liability with minimum limits in an amount as required by the public safety committee. The certificate of insurance shall provide 30 days written notice to the city upon cancellation, non-renewal or material change in policy.

**Cancellation-** The city, through its police department or other agents, may terminate, without prior notice, any use authorized by a street use license if the health, safety or welfare of the public appears to be endangered by activities generated by or associated with the use or if there are activities that violate any condition specified by the public safety committee when authorizing the issuance of the street use license.

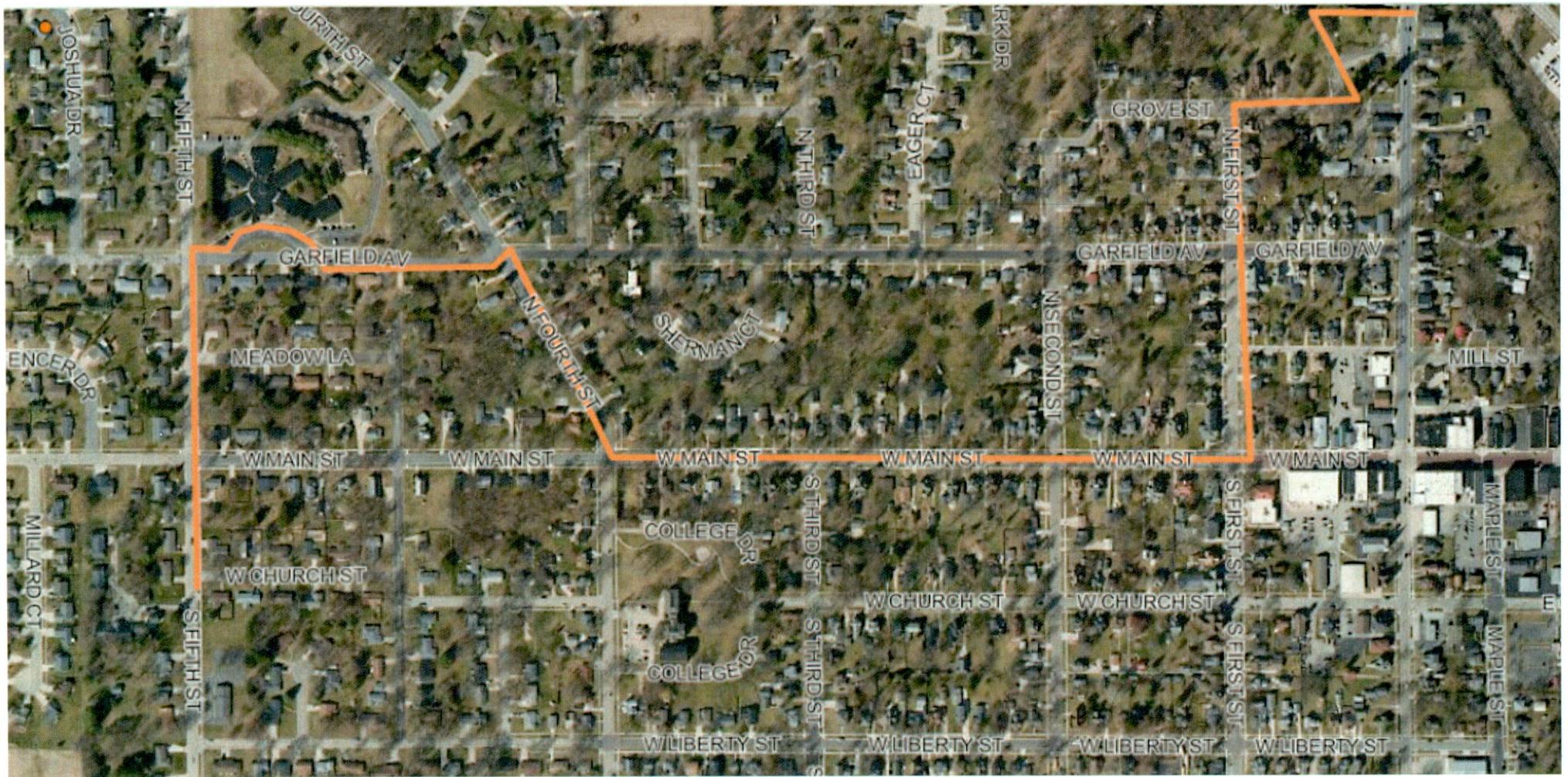
**Conclusion:** Following the conclusion of the closure, any traffic control materials provided by the Municipal Services Department, shall be placed in the Right of Way, so as not to obstruct pedestrian or vehicle traffic, by the responsible party.

Ronald T. Butcher

FEB 2 2026

Signature of Applicant

Date





## Jolene Klitzman

---

**From:** Dale Roberts  
**Sent:** Tuesday, February 3, 2026 6:04 AM  
**To:** Jolene Klitzman; Christopher Jones; Ian Reilly  
**Cc:** Leah Hurtley  
**Subject:** Re: Evansville FFA Alumni

Looks good to me.

*Dale Roberts*  
City of Evansville  
Public Works Foreman  
608-516-2680

---

**From:** Jolene Klitzman <j.klitzman@evansvillewi.gov>  
**Sent:** Monday, February 2, 2026 4:10 PM  
**To:** Christopher Jones <c.jones@evansvillewi.gov>; Dale Roberts <d.roberts@evansvillewi.gov>; Ian Reilly <i.reilly@evansvillewi.gov>  
**Cc:** Leah Hurtley <l.hurtley@evansvillewi.gov>  
**Subject:** Evansville FFA Alumni

Please see the attached street closure for the Evansville FFA Alumni 4<sup>th</sup> of July parade route.

Let me know if you have any questions or concerns with this route.

### *Jolene Klitzman*

Deputy Clerk, City of Evansville  
31 S. Madison St./PO Box 529  
Evansville, WI 53536  
Phone: 608-882-2266 Option 2

**Upcoming Elections:**

\*April 7, 2026 – Spring Elections

\*August 11, 2026 – Partisan Primary

\*November 3, 2026 – General Election

[www.myvote.wi.gov](http://www.myvote.wi.gov) – Register to Vote, Request an absentee ballot, and more.

*Alert to City of Evansville Elected Officials and Members of City Committees, Boards, Commissions: In order to comply with the Open Meetings Act requirements, please limit any reply to only the sender of this electronic communication.*

## Jolene Klitzman

---

**From:** Christopher Jones  
**Sent:** Tuesday, February 3, 2026 9:27 AM  
**To:** Jolene Klitzman; Dale Roberts; Ian Reilly  
**Cc:** Leah Hurtley  
**Subject:** RE: Evansville FFA Alumni

Looks good.

Professionally,

**Christopher Jones**  
Chief of Police  
10 W. Church St Evansville WI 53536

[www.evansvillewi.gov](http://www.evansvillewi.gov)  608-882-2292 

[c.jones@evansvillewi.gov](mailto:c.jones@evansvillewi.gov) 



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---

**From:** Jolene Klitzman <j.klitzman@evansvillewi.gov>  
**Sent:** Monday, February 2, 2026 4:10 PM  
**To:** Christopher Jones <c.jones@evansvillewi.gov>; Dale Roberts <d.roberts@evansvillewi.gov>; Ian Reilly <i.reilly@evansvillewi.gov>  
**Cc:** Leah Hurtley <l.hurtley@evansvillewi.gov>  
**Subject:** Evansville FFA Alumni

Please see the attached street closure for the Evansville FFA Alumni 4<sup>th</sup> of July parade route.

Let me know if you have any questions or concerns with this route.

### *Jolene Klitzman*

Deputy Clerk, City of Evansville  
31 S. Madison St./PO Box 529  
Evansville, WI 53536  
Phone: 608-882-2266 Option 2

#### **Upcoming Elections:**

\*April 7, 2026 – Spring Elections

\*August 11, 2026 – Partisan Primary

\*November 3, 2026 – General Election

[www.myvote.wi.gov](http://www.myvote.wi.gov) – Register to Vote, Request an absentee ballot, and more.

*Alert to City of Evansville Elected Officials and Members of City Committees, Boards, Commissions: In order to comply with the Open Meetings Act requirements, please limit any reply to only the sender of this electronic communication.*



March 4<sup>th</sup>, 2026

Evansville Police Department

Public Safety Report

- **Training:**
  - Chief Jones, Lt. Reilly and Sgt. Tway attended the Wisconsin Chiefs of Police Association and Wisconsin Police Leadership Foundation conference in WI Dells.
  - Officers Nankee and Schmidt attended a 2-day Taser Instructor Recertification in Manitowoc.
  - Officer Derrickson has been moved on to solo patrol upon completing her field training and Officer Ritter has been moved on to phase 2 of his training.
  
- **Community Outreach:**
  - Staff attended a meeting with Blue Scope Builders to plan a gratitude lunch for first responders and their families at the EV Fire Station on March 14.
  - Chief Jones, Lt. Reilly and Jill met with BASE to discuss the 2026 EV Night Out. A date of August 13, 2026 has been set.
  
- **Police Commission/Staffing:**
  - The Police Commission did not meet in February. Interviews continue to be conducted for the remaining open full-time position.
  
- **Accreditation:**
  - Chief Jones, Lt Reilly and Quinn are working on the finishing touches for accreditation.
  
- **Calls for service:** – February 2025: **901**      February 2026: **1060**
  
- **Notable calls:**
  - Officer Delgado was dispatched to assist EMS for a report of a 2-year-old patient that was unconscious. The parents were conducting CPR at the time of the call, but the child's lips were turning blue. Ofc. Delgado arrived on scene and discovered the child had a light pulse and had faint breathing that sounded like it was obstructed by fluid. With the child likely choking, Ofc. Delgado delivered 4-6 back blows to the child and he immediately began to cry and regained consciousness. Ofc. Delgado monitored the child until EMS arrived and took over care.
  - Officer Delgado conducted a traffic stop on a vehicle for expired registration. After making contact with the driver, Ofc. Delgado discovered the driver had a fully extraditable felony warrant out of Winnebago County, IL for Driving Under the Influence of Drugs/Aggravated DUI. Ofc. Delgado arrested the driver for the warrant and transported her to the Rock County Jail.
  - Officer Delgado and Officer Hanson were requested to conduct a welfare check on an elderly subject after receiving a report a female who recently attacked him with a hammer was back at his residence. Contact was made with the elderly male who confirmed the female was at his residence earlier and spent the night the



March 4<sup>th</sup>, 2026

Evansville Police Department

Public Safety Report

night before. The female had bond conditions not to have contact with the male. Officers contacted the female who was placed under arrest for felony bail jumping. The female was evaluated by Rock County Crisis after she made suicidal statements, but was later released to the Rock County Jail and placed on suicide watch.

- Detective Sergeant Johnson received a referral from CPS for a 5-year-old victim whose 11-year-old stepbrother was sexually assaulting her. Sgt. Johnson and CPS met with the victim and her mother and an interview was set up with the YWCA CARE House. Sgt. Johnson and CPS will be conducting interviews with the suspect and determine charges after interviews are complete.
- Detective Sergeant Johnson received a fraud report from Bank CMG for 6 counterfeit \$100 bills that were found in their overnight drop box from Dollar General. This is the second time within 2 months Dollar General has turned in counterfeit money. Sgt. Johnson met with Dollar General staff and discovered the suspect who turned in the counterfeit bills, but his identity is unknown at this time. Upon completion of Sgt. Johnson's initial investigation, this case will be turned over to the US Secret Service.
- Officer Schmidt and Nankee were dispatched to a disturbance for a female who was thrown to the floor, had her hair pulled, and choked for approximately 5 seconds by her boyfriend. Ofc. Nankee later obtained photographs of the victim's neck that had red lateral marks consistent with hand and finger markings. Her boyfriend was arrested and transported to the Rock County Jail for Domestic Strangulation and Domestic Battery.
- Officer Hanson was dispatched to a report of shots fired in the area of Walker Street and Almeron Street. Initial reports indicated there was a disturbance in the area and that approximately three gunshots were heard. Based on the information received, multiple area law enforcement agencies were dispatched to assist. Officer Hanson, along with deputies from the Rock County Sheriff's Office, began checking the area. During the search, a vehicle was observed leaving the area. A traffic stop was conducted, and one subject was detained for questioning and later released. Numerous interviews and area canvasses were conducted; however, no victims or physical evidence of gunfire were located at this time. The incident remains under investigation, and there are no known threats to the community at this time.

➤ **Admin update:**

- Squad 5 is back in service after it's unfortunate incident with a deer in January.
- Chief Jones was notified by Ford that the new hybrid squad started production. It should be delivered sometime in March.
- Squad 3 is at GenCom getting a new squad camera installed. Chief Jones and Lt. Reilly have been working with Motorola to finish setting up the new squad cameras.

City of Evansville EMS  
 11 W. Church St.  
 Evansville, WI 53536  
 (608) 882-2269  
 Chief Carolyn Kleisch  
 Public Safety Meeting  
 March 4<sup>th</sup>, 2026

**1. Calls for Service:**

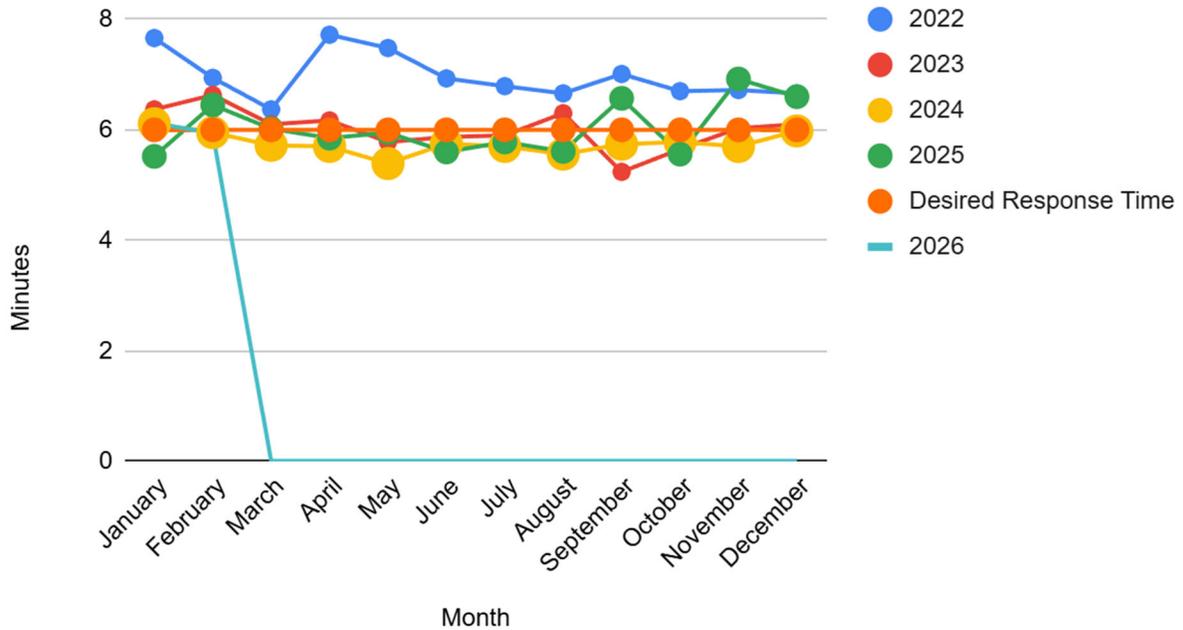
- a. 50 Calls during the month of Feb 2026 (641-2/642-48)
- b. 51 Calls during the month of Feb 2025 (641-3/642-48)
- c. To date call volume 2026- 114
- d. To date call volume 2025- 108

**Updates:**

- 1- Refresher with Dr. Barney with Sepsis education and run reviews, followed by our monthly meeting
- 2- 641 had some front-end issues, work has been completed by Freeman Alignment
- 3- EMT-Basic, Mikhaila Heinzer has completed all her on-boarding stuff and has started orientation and is doing well
- 4- Daniel Lynes was the interview from last month, has had his background check complete, onboarding has started.
- 5- Met with a MATC student, he will be doing a few ride-along for EMT school. He will graduate in May and is looking forward to joining the service afterwards. He has plans to continue in the EMS field.
- 6- Carolyn was given a scholarship to attend the Active Threat Integrated Response Conference. It was very eye-opening on what the Public Safety services need to do to prepare for an event. I have reached out to the leadership of the FD and Police to start conversations about training.
- 7- EMS/FD/EVPD worked together in effort assisting a resident who had fallen down a steep embankment and into the Creek on a very cold morning. Luckily, she was heard calling for help from a neighbor who assisted her mostly out of the water and called 911 for help.
- 8- All the CPR instructors took an Instructor Development class with Mercy regarding the new updates put out by the AHA in Oct. of 2025. This is something the AHA does every 5 years.

Avg Unit Notified to Enroute in Minutes: 5.94
<b>Avg Unit Enroute to Arrived at Scene in Minutes: 3.51</b>
Avg Unit Arrived on Scene to Left Scene in Minutes: 24.74
Avg Unit Left Scene to Arrived at Destination in Minutes: 26.95
Avg Unit Arrived at Destination to Unit Back In Service in Minutes: 44.22
95.30

## Average Response Times per Month



Falls	7	14.00%
Chronic Illness/Medical Condition	5	10.00%
Chest Pain (Non-Traumatic)	5	10.00%
Sick Person	5	10.00%
Breathing Problem	4	8.00%
Carbon Monoxide/Hazmat/Inhalation/CBRN	3	6.00%
Convulsions/Seizure	3	6.00%
Motor Vehicle Crash	3	6.00%
Standby	2	4.00%
Invalid Assist/Lifting Assist	2	4.00%
Altered Mental Status	1	2.00%
Cardiac Arrest/Death	1	2.00%
Diabetic Problem	1	2.00%
Motor Vehicle vs. Train	1	2.00%
Traffic/Transportation Incident/MVA	1	2.00%
Unconscious/Fainting/Near-Fainting	1	2.00%
Stroke/CVA	1	2.00%
Fire	1	2.00%
Fire Standby	1	2.00%
Assault - Sexual	1	2.00%
Burns/Explosion	1	2.00%
<b>Total:</b>	<b>50</b>	<b>100.00%</b>