



CITY OF VERONA
111 Lincoln Street
Verona, WI 53593
(608) 845-6495
veronawi.gov

**PUBLIC SAFETY & WELFARE COMMITTEE
AGENDA**

DATE: MONDAY, JUNE 8, 2026 **TIME:** 6:15 PM

LOCATION: COUNCIL CHAMBERS
111 LINCOLN ST
VERONA, WI 53593

1. Call to Order
2. Roll Call
3. Public Comment
4. Approval of the minutes from the May 11, 2026 Public Safety and Welfare Committee meeting
5. Discussion and Possible Action Re: Special Event Permit application from Sidney Peach, Verona Area School District, for the Verona Area Kids Triathlon on August 30, 2026
6. Discussion and Possible Action Re: Amendments to Administrative Policy No. 61 - Warming and Cooling Center
7. Discussion and Possible Action Re: Application for a Class "A" Fermented Malt Beverage and "Class A" Intoxicating Liquor License from Wisco Green, LLC d/b/a Wisco Green, located at 602 W. Verona Ave., John Schoville, Agent
8. Discussion and Possible Action Re: Approval of alcohol license renewals for the 2026-2027 license period
9. Discussion and Possible Action Re: Approval of cigarette, tobacco, and electronic vaping device renewal applications for the 2026-2027 license period
10. Discussion and Possible Action Re: Approval of a sidewalk café permit renewal for Toot & Kate's Winebar located at 109 S. Main St.
11. Adjournment

Phil Hoechst, Chairperson

POSTED: June 5, 2026

Verona City Hall
Verona Public Library
Miller's Market
All agendas are posted on the City's website at: veronawi.gov

Notice is hereby given that a quorum of the members of the City Council or other standing committees of the City Council may be present at the meeting of the Public Safety and Welfare Committee to gather information about a subject over which they have decision-making responsibility. The City Council and any other standing committees will not take formal action at this meeting.

IF YOU NEED AN INTERPRETER, MATERIALS IN ALTERNATIVE FORMATS OR OTHER ACCOMODATION TO ACCESS THE MEETING, PLEASE CONTACT THE CITY CLERK AT 608-845-6495 AT LEAST 48 HOURS PRECEDING THE MEETING. EVERY REASONABLE EFFORT WILL BE MADE TO ACCOMMODATE YOUR REQUEST.

CITY OF VERONA
PUBLIC SAFETY & WELFARE COMMITTEE
MINUTES

May 11, 2026
Council Chambers

1. Call to Order: Phil Hoechst called the meeting to order at 6:30 p.m.
2. Roll Call: Phil Hoechst and Lachlann Swanson were present. Alejandro Hernandez joined Zoom at 6:31 p.m.
3. Public Comment: None
4. Approval of the minutes from the April 27, 2026 Public Safety and Welfare Committee meeting

Motion by Hoechst, seconded by Swanson to approve the minutes from the April 27, 2026 Public Safety and Welfare Committee meeting. Motion carried 3-0.

5. Discussion and Possible Action Re: Special Event Permit application from J. Garrett Wilson, Race Day Events, LLC, for the Wisconsin Triterium Triathlon on Saturday, June 27, 2026

Motion by Swanson, seconded by Hoechst to approve a Special Event Permit application from J. Garrett Wilson, Race Day Events, LLC, for the Wisconsin Triterium Triathlon on Saturday, June 27, 2026 contingent upon final route approval by the Public Works Department due to planned construction along the route. Motion carried 3-0.

6. Discussion and Possible Action Re: Application for a Class "B" Fermented Malt Beverage and Reserve "Class B" Intoxicating Liquor License from Ian's Pizza Verona, LLC, d/b/a Ian's Pizza Verona located at 303 W. Verona Ave., Jeffrey Eich, Agent

Motion by Swanson, seconded by Hoechst to recommend that the Common Council approve an Application for a Class "B" Fermented Malt Beverage and Reserve "Class B" Intoxicating Liquor License from Ian's Pizza Verona, LLC, d/b/a Ian's Pizza Verona located at 303 W. Verona Ave., Jeffrey Eich, Agent contingent upon final inspections. Motion carried 3-0.

7. Adjournment: Motion by Swanson, seconded by Hoechst to adjourn at 6:36 p.m. Motion carried 3-0.

Respectfully submitted,

Holly Licht, City Clerk

5. **Discussion and Possible Action Re: Special Event Permit application from Sidney Peach, Verona Area School District, for the Verona Area Kids Triathlon on August 30, 2026**

This is the 2nd year of this event. There are no changes to the route. Portions of Wildcat Way and West End Circle will be closed during the race by barricades and VASD vehicles. Primary parking will be on campus. Overflow parking will be in the Westridge neighborhood. VPD will have 2 officers assigned to the event to assist with traffic flow and direct traffic during the biking portion.

Motion: Approve a Special Event Permit application from Sidney Peach, Verona Area School District, for the Verona Area Kids Triathlon on August 30, 2026 contingent upon receipt of certificate of insurance.

6. **Discussion and Possible Action Re: Amendments to Administrative Policy No. 61 - Warming and Cooling Center**

The proposed revision makes the following substantive changes to the 2019 policy:

- The Verona Community Center (130 N. Franklin St.) is added as a warming and cooling center site, joining the Public Library and Senior Center. This expands the City's capacity to serve residents during extreme weather events.
- The Library is noted as unavailable in winter when school is cancelled, and the Senior Center entry includes a note to confirm availability with the Senior Center Director. The clarifications reflect operational realities not addressed in the original policy.
- Triggers are expanded to include excessive cold (in addition to excessive heat) warnings.
- There are various areas of language cleanup throughout the policy, and Staff recommend approval.

Motion: Recommend that the Common Council approve Amendments to Administrative Policy No. 61 - Warming and Cooling Center

7. **Discussion and Possible Action Re: Application for a Class "A" Fermented Malt Beverage and "Class A" Intoxicating Liquor License from Wisco Green, LLC d/b/a Wisco Green, located at 602 W. Verona Ave., John Schoville, Agent**

Wisco Green is applying for a Class A liquor license to sell alcohol at their existing smoke shop located on Verona Avenue. Staff recommend approval of the license contingent upon final inspections.

Motion: Recommend that the Common Council approve an Application for a Class "A" Fermented Malt Beverage and "Class A" Intoxicating Liquor License from Wisco Green, LLC d/b/a Wisco Green, located at 602 W. Verona Ave., John Schoville, Agent contingent upon final inspections.

8. Discussion and Possible Action Re: Approval of alcohol license renewals for the 2026-2027 license period

Thirty-eight (seven more than last year) applications for 2026-2027 retail alcohol license renewals were received by the City Clerk. Premises inspections by the Building Inspector and Fire Department are in progress. Staff recommend approval of the liquor license renewal applications.

Motion: Recommend that the Common Council approve alcohol license renewals for the 2026-2027 license period.

9. Discussion and Possible Action Re: Approval of cigarette, tobacco, and electronic vaping device renewal applications for the 2026-2027 license period

Eight applications for 2026-2027 cigarette and tobacco products retail licenses were received by the City Clerk. Of note, Festival Foods is not renewing their license. The list of applicants is included in the packet.

Motion: Recommend that Common Council approve cigarette, tobacco, and electronic vaping device renewal applications for the 2026-2027 license period.

10. Discussion and Possible Action Re: Approval of a sidewalk café permit renewal for Toot & Kate's Winebar located at 109 S. Main St.

This is the third year Toot & Kate's is applying for the annual permit. There were no issues with the sidewalk café during the 2025-2026 license period. Staff recommend approval.

Motion: Recommend that the Common Council approve a sidewalk café permit renewal for Toot & Kate's Winebar located at 109 S. Main St.

EVENT CONTACTS

PLEASE LIST NAMES, LOCATIONS AND CELL PHONE NUMBERS OF ON-SITE EVENT CONTACT PERSONS

NAME as shown on ID	DOB	LOCATION AT EVENT (Ex: Race Start, Supply Tent etc.)	TIME ON-SITE (Ex: 10 a.m. to 2 p.m.)	CELL PHONE
Sidney Brewer Peach	[REDACTED]	Throughout the course	5am-7pm	[REDACTED]
Jeanene Marie Ennis	[REDACTED]	Throughout the course	5am-7pm	[REDACTED]
Debra Bossingham	[REDACTED]	Aquatic center	5am-7pm	[REDACTED]

APPLICATION PROCEDURES

1. Application and all required materials shall be submitted to the City Clerk a minimum of **45 days prior to the event.** (*Section 7-7-1(h) of the City of Verona Code of Ordinances*)
2. Upon verification of the application the City Clerk shall submit the application to the Police Chief for further review.
3. The applicant will be contacted by the Police Department Staff to review event route and the need for on- site police officers or City staff at the event.
4. The applicant is subject to a background check.
5. All police traffic control/city staff time incurred shall be billed to the applicant upon the completion of the event.
6. The applicant may be required to attend a Public Safety and Welfare Committee meeting and/or a Common Council meeting at which the event application will be reviewed for approval.
7. Once the application is approved by the appropriate official(s) the permit will be issued.

APPLICANT SIGNATURE

PLEASE READ CAREFULLY BEFORE SIGNING

I understand the application and event requirements and agree to adhere to all applicable federal, state, and municipal laws in addition to the requirements on the application. I agree to pay any invoices received from the City of Verona for staff time at the event within 30 days of the invoice date. I understand that failure to adhere to any application requirements or any federal, state or municipal laws involving the event will result in the denial of the application or immediate termination of the event. The violation of federal, state or municipal laws will be subject to applicable fines and penalties.

Sidney Peach

2/17/26

Applicant Signature

Date

***Once application is approved, the permit will be issued to applicant via email.
A copy of the permit must be available at event for conformation.***

Items being sold/given

- Participants will receive wellness related items such as toothbrushes, ChapStick, healthy snacks, string bags and t-shirts
- Concessions will be sold throughout the day on the Verona Area High School Campus
- We will be having a raffle/silent auction that will take place on the Verona Area High School Campus

Traffic can take a right here

Keeping this lane open for AZURA

Block

Block

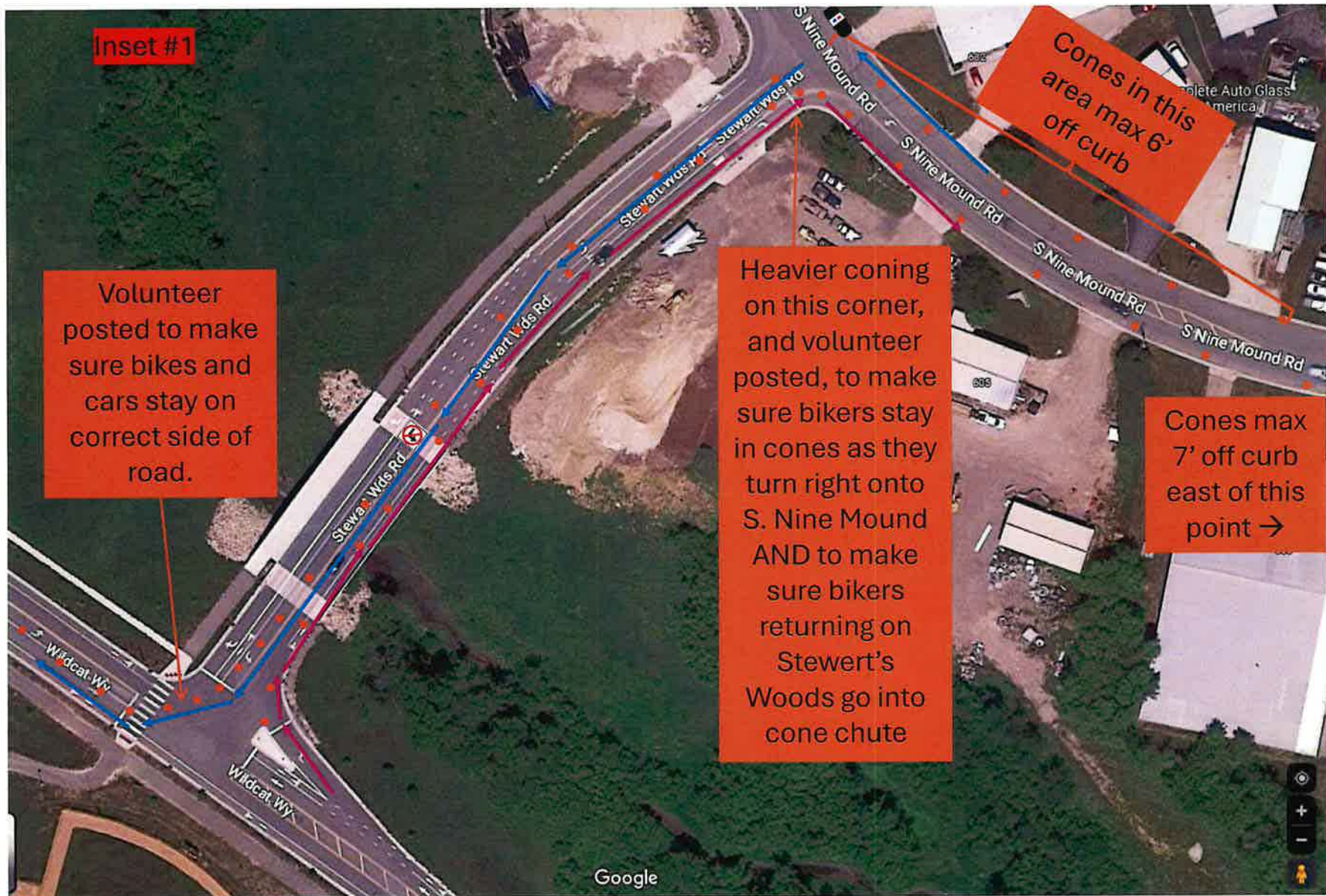


S Nine Mound Rd

Commerce Pkwy

Legion St.





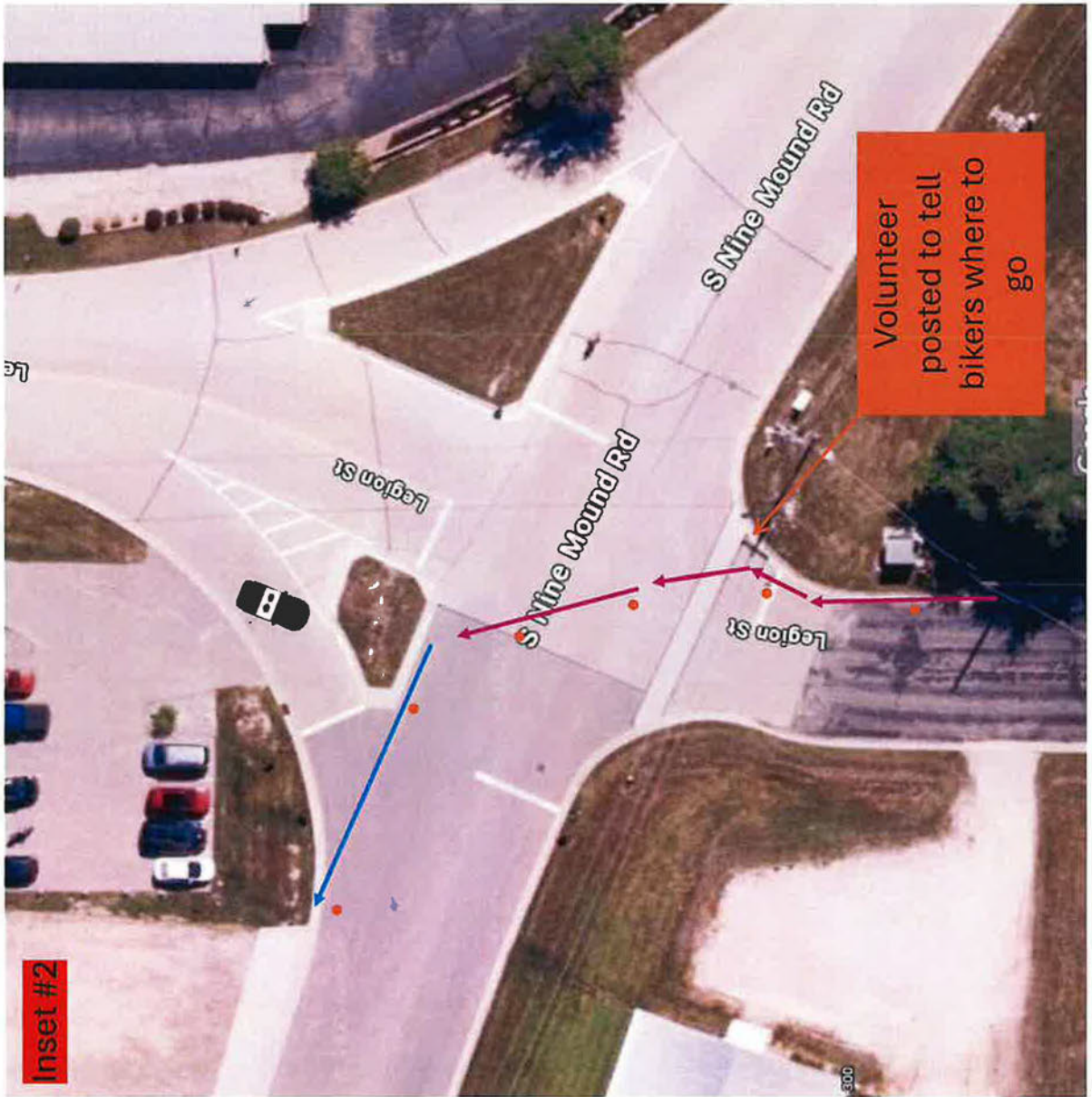
Inset #1

Volunteer posted to make sure bikes and cars stay on correct side of road.

Heavier coning on this corner, and volunteer posted, to make sure bikers stay in cones as they turn right onto S. Nine Mound AND to make sure bikers returning on Stewart's Woods go into cone chute

Cones in this area max 6' off curb

Cones max 7' off curb east of this point →





CITY OF VERONA

111 Lincoln Street
Verona, WI 53590-1520

Jamie J. Aulik, City Administrator

Phone: (608) 848-9942 Email: jaulik@veronawi.gov

MEMORANDUM

To: Mayor Diaz and Alderpersons, City of Verona
From: Jamie J. Aulik, City Administrator
Date: June 1, 2026
Re: Proposed Revisions to Administrative Policy No. 61 – Warming and Cooling Centers

This memo summarizes the proposed revisions to Administrative Policy No. 61, Warming and Cooling Center.

Key Changes:

The proposed revision makes the following substantive changes to the 2019 policy:

- **Community Center Added as Designated Location:** The Verona Community Center (130 N. Franklin St.) is added as a warming and cooling center site, joining the Public Library and Senior Center. This expands the City’s capacity to serve residents during extreme weather events.
- **Availability Caveats Added for Existing Locations:** The Library is noted as unavailable in winter when school is cancelled, and the Senior Center entry includes a note to confirm availability with the Senior Center Director. The clarifications reflect operational realities not addressed in the original policy.
- **Language Clarifications:** The Purpose section is streamlined and updated from aspirational to affirmative language. Triggers are expanded to include excessive cold (in addition to excessive heat) warnings. The scope limitations section is condensed while retaining the core intent.

Given its size, comparatively lower utilization than the Senior Center and Public Library, and greater operational flexibility, the Community Center is well-positioned to serve community needs during extreme weather events. Designating the Community Center as an official warming and cooling center would provide residents with access to a large, accessible facility when needed. Staff recommend approval.

**CITY OF VERONA ADMINISTRATIVE POLICY
WARMING AND COOLING CENTER
ADMINISTRATIVE POLICY NO. 61**

Title: Warming and Cooling Center Policy	
Policy Source: -Public Safety Committee	Creation Date: -12/16/2019
Application: City Facilities	Revision Date: N/A <u>6/1/2026</u>

1. Purpose

The City ~~believes that providing~~ provides public warming and cooling ~~center~~centers during extreme temperature ~~conditions will~~events to help protect citizens that would otherwise be exposed to ~~these~~ extreme conditions. The ~~City's goal is to provide~~ centers offer safe and comfortable space ~~within which~~where citizens may maintain a safe core body ~~core~~ temperature in the event the National Weather Service issues a wind chill warning, a heat advisory, or excessive cold or heat warning.

~~The intent of this document is to provide guidance for the activation of the City warming and cooling center.~~ A warming and cooling center is a temporary facility that is made available during extreme temperature conditions when normal coping mechanisms in the home are ineffective or unavailable.
The intent of this document is to provide guidance for the activation of City warming and cooling centers.

2. Policy

The following locations are designated as ~~the City~~ warming and cooling centers:

- Verona Community Center – 130 N. Franklin St.
- Verona Public Library – 500 Silent Street (in winter, if school is cancelled this facility is unavailable)
- Verona Senior Center – 108 Paoli Street (in winter, check with the Senior Center Director for availability)

In the event of forecasted extreme weather, the City Administrator, in conjunction with the Emergency Preparedness Director, will determine whether to publicly announce the designation of ~~the~~ warming or cooling center ~~-(s)~~.

In general, the designated City buildings will continue to operate within normal hours and policies during a warming or cooling center designation. Modifications

to the hours of operation may occur in cases of extreme cold, power outages, and/or staffing shortages, subject to approval by the Emergency Preparedness Director, in ~~conjunction~~coordination with the City Administrator. Any changes to the hours of operation will be publicly announced by the City through media and social media outlets.

Based on space and public demands, ~~selected~~select City buildings may designate a room or location in the building as the warming or cooling area. Designation of a specific warming or cooling area location within the building, and hours of operation during a warming and cooling center designation, shall be subject to approval by the City Administrator.

The warming and cooling center is ~~not an overnight shelter, homeless shelter or pet shelter. A designation as a warming or cooling center is~~ intended to continue for a limited number of days, and in which limited services will be provided ~~during that designation. The center. It is not an overnight shelter, homeless shelter, or daycare for children, elderly, or others who cannot care for themselves.~~ It is assumed that individuals who use the center will return to their homes when the center is closed.

During emergency situations, ~~other~~additional City facilities or buildings may be designated as warming ~~or~~and cooling centers, subject to approval by the City Administrator.

**CITY OF VERONA ADMINISTRATIVE POLICY
WARMING AND COOLING CENTER
ADMINISTRATIVE POLICY NO. 61**

Title: Warming and Cooling Center Policy	
Policy Source: Public Safety Committee	Creation Date: 12/16/2019
Application: City Facilities	Revision Date: 6/1/2026

1. Purpose

The City provides public warming and cooling centers during extreme temperature events to help protect citizens that would otherwise be exposed to extreme conditions. The centers offer safe and comfortable space where citizens may maintain a safe core body temperature in the event the National Weather Service issues a wind chill warning, a heat advisory, or excessive cold or heat warning. A warming and cooling center is a temporary facility that is made available during extreme temperature conditions when normal coping mechanisms in the home are ineffective or unavailable.

The intent of this document is to provide guidance for the activation of City warming and cooling centers.

2. Policy

The following locations are designated as warming and cooling centers:

- Verona Community Center – 130 N. Franklin St.
- Verona Public Library – 500 Silent Street (in winter, if school is cancelled this facility is unavailable)
- Verona Senior Center – 108 Paoli Street (in winter, check with the Senior Center Director for availability)

In the event of forecasted extreme weather, the City Administrator, in conjunction with the Emergency Preparedness Director, will determine whether to publicly announce the designation of warming or cooling center(s).

In general, the designated City buildings will continue to operate within normal hours and policies during a warming or cooling center designation. Modifications to the hours of operation may occur in cases of extreme cold, power outages, and/or staffing shortages, subject to approval by the Emergency Preparedness Director, in coordination with the City Administrator. Any changes to the hours of operation will be publicly announced by the City through media and social media outlets.

Based on space and public demands, select City buildings may designate a room or location in the building as the warming or cooling area. Designation of a specific warming or cooling area location within the building, and hours of operation during a warming and cooling center designation, shall be subject to approval by the City Administrator.

The warming and cooling center is intended to continue for a limited number of days in which limited services will be provided. It is not an overnight shelter, homeless shelter, or daycare. It is assumed that individuals who use the center will return to their homes when the center is closed.

During emergency situations, additional City facilities or buildings may be designated as warming and cooling centers, subject to approval by the City Administrator.

Form
AB-200

Alcohol Beverage License Application

For Municipal Use Only	
Municipality	COV
License Period	2026

Application Type (check one)

Initial (New) Renewal

License(s) Requested: (up to two boxes may be checked)	Fees
<input checked="" type="checkbox"/> Class "A" Beer \$ <u>300</u> <input type="checkbox"/> Class "B" Beer \$ _____	License Fee(s) \$ <u>800</u>
<input checked="" type="checkbox"/> "Class A" Liquor \$ <u>500</u> <input type="checkbox"/> Regular "Class B" Liquor \$ _____	Background Check Fee \$ <u>7</u>
<input type="checkbox"/> "Class A" Liquor (cider only) \$ _____ <input type="checkbox"/> Reserve "Class B" Liquor \$ _____	Publication Fee \$ <u>15</u>
<input type="checkbox"/> "Class C" Liquor (wine only) \$ _____ <input type="checkbox"/> Above-Quota "Class B" Liquor \$ _____	Total Fees \$ <u>822</u>

Part A: Premises/Business Information

1. Legal Business Name (individual name if sole proprietorship)
Wisco Green LLC

2. Business Trade Name or DBA

3. FEIN
83-2648676

4. Wisconsin Seller's Permit Number
456-1030138514-02

5. Entity Type (check one)
 Sole Proprietor Partnership Limited Liability Company Corporation Nonprofit Organization

6. If the applicant business is an LLC, are the controlling members other LLCs or corporations? Yes No
 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 8. Date of Organization 9. Wisconsin DFI Registration Number
 WI 11/27/2018 W071272

10. Premises Address
602 West Verona Avenue

11. City 12. State 13. Zip Code
 Verona WI 53593

14. County 15. Governing Municipality: City Town Village 16. Aldermanic District
 Dane of: Verona 1

17. Premises Phone 18. Premises Email 19. Website
 (608) 630-6959 wiscogreenllc@gmail.com

20. Premises Description
Initial (New Applicants Only): 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.
Renewal Applicants Only: 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.
 Strip mall type building housing multiple businesses. Wisco Green LLC rents the store space at the east end of the building. All products are kept in the front of the store in the retail space and in the locked stock room located directly behind the retail area. The other areas are an office/breakroom across the hall from the stock room, two storage areas in back and a non-public restroom.

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 Schoville	First Name John	M.I. P
Title Owner	Email [REDACTED]	Phone [REDACTED]
Signature 	Date 5/13/26	

Part E: For Clerk Use Only

Date Application Was Filed With Clerk 5/12/26	License Number	Date License Granted	Date License Issued
Signature of Clerk/Deputy Clerk		Date Provisional License Issued (if applicable)	

Alcohol Beverage Appointment of Agent

Date

Agent Type (check one)	
<input checked="" type="checkbox"/> Original (no fee)	<input type="checkbox"/> Successor (\$10 fee for municipal licensees only)

Part A: Business Information	
1. Legal Business Name (individual name if sole proprietor) Wisco Green LLC	
2. Business Trade Name or DBA	
3. Entity Type (check one) <input checked="" type="checkbox"/> Limited Liability Company <input type="checkbox"/> Corporation <input type="checkbox"/> Nonprofit Organization	
4. Alcohol Beverage Business Authorization (check one) <input checked="" type="checkbox"/> Municipal Retail License <input type="checkbox"/> 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 Schoville	2. First Name John	3. M.I. P	
4. Email [REDACTED]		5. Phone [REDACTED]	
6. Home Address [REDACTED]			
7. City Cross Plains	8. State WI	9. Zip Code 53528	10. Date of Birth [REDACTED]
11. Driver's License/State ID Number [REDACTED]		12. Driver's License/State ID State of Issuance WI	

Part C: Agent Questions	
1. Have you satisfied the responsible beverage server training requirement? Submit proof of completion.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2. Have you completed Form AB-100, <i>Alcohol Beverage Individual Questionnaire</i> (licensee) or Form AB-300, <i>Alcohol Beverage Personal Questionnaire</i> (permittee)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3. Have you been a Wisconsin resident for at least 90 continuous days?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
See instructions for exceptions.	

Continued →

Part D: Business Attestation

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.

Last Name Schoville		First Name John		M.I. P
Title Owner	Email [REDACTED]		Phone [REDACTED]	
Signature <i>John Schoville</i>			Date 5/12/26	

Part E: Agent Attestation

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.

Last Name Schoville		First Name John		M.I. P
Signature <i>John Schoville</i>			Date 5/12/26	



Certificate Of Completion

Responsible Vendor Training Program

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

Name : John Schoville

Steven A. Dean, CEO
www.sellerserverclasses.com

This online responsible alcohol vendor training & assessment program is provided by Seller Server Classes.

Having successfully completed the program, the student will be provided with this course completion certificate for their own records.

Name : John Schoville

Course Name : Seller Server Course

Date Completed : 4/30/2026

Expiration Date : 4/30/2028

Certificate Number : 215910

Provider : EduClasses.org



Alcohol Beverage Individual Questionnaire

Date

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

- sole proprietor
- all partners of a partnership
- all officers, directors, and agent of a corporation or nonprofit organization
- 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)				
Wisco Green LLC				
2. Business Trade Name or DBA				
3. Entity Type (check one)				
<input type="checkbox"/> Sole Proprietor	<input type="checkbox"/> Partnership	<input checked="" type="checkbox"/> Limited Liability Company	<input type="checkbox"/> Corporation	<input type="checkbox"/> Nonprofit Organization

Part B: Individual Information				
1. Last Name		2. First Name		3. M.I.
Schoville		John		P
4. Relationship to Business (Title)		5. Email		6. Phone
Owner				
7. Home Address				
8. City		9. State	10. Zip Code	11. Date of Birth
Cross Plains		WI	53528	
12. Driver's License/State ID Number			13. Driver's License/State ID State of Issuance	
			WI	

Part C: Address History					
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) 10/1963	
2. List in chronological order all of your addresses within the last 5 years . Attach additional sheets if necessary.					
		State	Zip Code		
		WI	53575		
		State	Zip Code		
		WI	53925		
		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
WI	Dane				
State	County	State	County	State	County
WI	Columbia				

Continued →

Part D: Criminal History

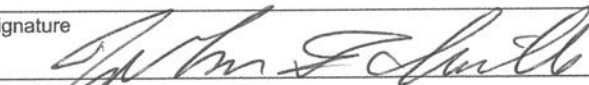
1. Have you ever been convicted of any offenses (excluding traffic offenses unless related to alcohol beverages) for violation of any federal, Wisconsin, or another state's laws or of any county or municipal ordinances? Yes No
 If yes to question 1, please list details of each conviction below. Attach 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 5/12/26

NOTICE IS HEREBY GIVEN that applications for alcohol beverage licenses for the period from July 1, 2026 through June 30, 2027 have been filed with the City Clerk, CITY OF VERONA, by the following named individuals or corporations and for the following premises:

“CLASS A” RETAIL LIQUOR AND MALT BEVERAGES LICENSE

Casey’s Marketing Company, d/b/a Casey’s General Store #3586, Melissa Frank, Agent, for Casey’s General Store #3586, 103 Prairie Oaks Drive
Costco Wholesale Corporation, d/b/a Costco Wholesale #1491, Silvia Comunale, Agent, for Costco Wholesale #1491, 1000 Batker Court
Kwik Trip, Inc., d/b/a Kwik Trip #456, Jim Thomson, Agent, for Kwik Trip #456, 2145 County Road PB
Kwik Trip, Inc., d/b/a Kwik Trip #837, Nicole Harrison, Agent, for Kwik Trip #837, 400 E. Verona Avenue
Kwik Trip, Inc., d/b/a Kwik Trip #1075, Jacob Kammer, Agent, for Kwik Trip #1075, 233 Wildcat Way
Miller and Sons, Inc., d/b/a Miller and Sons Supermarket, Carlton Miller, Agent, for Miller and Sons Supermarket, 210 S. Main Street
Verona Mart, Inc., d/b/a Verona Mobil, Ijaz Afridi, Agent, for Verona Mobil,
101 E. Verona Avenue
Walgreen Company d/b/a Walgreens #01159, Tim Y. Kjol, Agent, for Walgreens #01159, 104 N. Main Street
WI Foodliner, Inc, d/b/a Festival Foods, Eric Malterer, Agent, for Festival Foods, 660 Hometown Circle
Wisco Green LLC, John Schoville, Agent for Wisco Green LLC, 602 W Verona Ave

CLASS “B” RETAIL FERMENTED MALT BEVERAGES LICENSE

131 Horizon Drive, LLC d/b/a Sleep Inn & Suites, Sunny Patel, Agent, for Sleep Inn & Suites, 131 Horizon Drive
608 Ventures, LLC d/b/a 608 Beach Volleyball, Nicholas Faber, Agent, for 608 Beach Volleyball, 1155 Ambition St., Suite 700
Alice Good, LLC, Ralph Stern, Agent, for Alice Good, LLC, 300 S Main St #101
Art House 360, Brad Kose, Agent, for Art House 306, 401 W. Verona Ave.
Grand Haveli Restaurant Inc., Manpreet Kaur, Agent, for Grand Haveli Restaurant Inc., 1039 N. Edge Trl.
Knit and Sip The Sows Ear Verona LLC, d/b/a Knit and Sip The Sows Ear LLC, Jenifer Davis, Agent, for Knit and Sip The Sows Ear, 125 S. Main Street
Taqueria Los Atlantes, LLC, Jonathan Falcon, Agent, 300 S Main St #103

“CLASS B” COMBINATION FERMENTED MALT BEVERAGE & RESERVE INTOXICATING LIQUOR LICENSE

Arandas Zuniga, LLC, d/b/a La Penca, Jesus Ramirez Zuniga, Agent, for La Penca,

611 Hometown Cir Suite 104
Aztec Taqueria, LLC, d/b/a Aztec Taqueria, Salvador Tecpoyotl Daniel, Agent, for
Aztec Taqueria, 160 Keenan Ct Suite 5
Ian's Pizza Verona, LLC d/b/a Ian's Pizza, Jeffrey Eich, Agent for Ian's Pizza, 303
W Verona Ave.
Ice Inc, Michael Obrien, Agent, for Ice Inc, 451 E Verona Ave
LBO, Inc., d/b/a 5th Quarter Sports Bar, Leann Butts, Agent, for 5th Quarter Sports
Bar, 161 Horizon Drive Ste. 110
Liberty Business Park Hospitality, LLC, d/b/a Bar & Restaurant at the Hyatt
Place Hotel, Nicole Conway, Agent, for Bar & Restaurant at the Hyatt
Place, 846 Liberty Drive
MIRK, LLC, d/b/a Drafthouse Bar & Restaurant, Tonya Patten, Agent, for
Drafthouse Bar & Restaurant, 1010 Enterprise Drive
Reel Cue, LLC, d/b/a North and South Seafood & Smokehouse, Kenneth Krahn,
Agent, for North and South Seafood & Smokehouse, 958 Liberty Drive
Ste. 101
Senguio, LLC, d/b/a El Charro Mexican Grill, Nelida Abarca Martinez, Agent, for
El Charro Mexican Grill, 958 Liberty Dr Suite 106
Sugar River Pizza Company – Verona, LLC, d/b/a Sugar River Pizza Company,
Sarah Thomas, Agent, for Sugar River Pizza Company, 957 Liberty Drive
Tapatios, LLC d/b/a Tapatios Verona, Marleny Quintana, Agent for Tapatios
Verona,
100 Cross Country Road
The Bogey Factory, LLC, Tyler Kersten, Agent, from The Bogey Factory,
503 W Verona Ave #400
Toot & Kate's LLC, d/b/a Toot & Kate's Wine Bar, Megan Clark, Agent, for Toot &
Kate's Wine Bar, 109 S. Main Street
Yeeshan Asian Eatery, LLC d/b/a Yeeshan Asian Eatery, Xin Li,
Agent, for Yeeshan Asian Eatery, 507 W Verona Ave., Suite
100

“CLASS B” COMBINATION FERMENTED MALT BEVERAGES & INTOXICATING LIQUOR
LICENSE

American Legion Mason-Lindsay Post 385, Chad Churchill, Agent, for
American Legion Mason-Lindsay Post 385, 207 Legion Street
Avanti Italian Restaurant, LLC, d/b/a Avanti Italian Restaurant, Vito Cerniglia,
Agent, for Avanti Italian Restaurant, 119 S. Main Street
Grace Coffee Co., Nicole Bloomer, Agent, for Grace Coffee Co., 150 West End Cir.
Honey Barrel, LLC, Matthew Heilman, Agent, for Honey Barrel, LLC., 160 Keenan
Ct Suite 1
McCarthy Properties, LLC, d/b/a Paddy Macs, Pat McCarthy, Agent, for Paddy
Macs, 608A W. Verona Avenue
Sugar River Pizza Company Co. – Verona, LLC, d/b/a Stone Porch Alehouse,
Sarah Thomas, Agent, for Stone Porch Alehouse, 950 Kimball Lane
Tavern and Bar, LLC, d/b/a Cahoots, Kurt Jurewicz, Agent, for Cahoots, 102
Railroad Street

“CLASS C” WINE LICENSE

Alice Good, LLC, Ralph Stern, Agent, for Alice Good, LLC, 300 S Main St #101

Art House 360, Brad Kose, Agent, for Art House 306, 401 W. Verona Ave.

Grand Haveli Restaurant Inc., Manpreet Kaur, Agent, for Grand Haveli Restaurant
Inc.,

1039 N. Edge Trl.

Knit and Sip The Sows Ear Verona LLC, d/b/a Knit and Sip The Sows

Ear LLC, Jenifer Davis, Agent, for Knit and Sip The Sows Ear,

125 S. Main Street

The above applications will be considered by the City of Verona Public Safety and Welfare Committee on June 8, 2026 at 6:15 p.m., and the City of Verona Common Council on June 8, 2026 at 7:00 p.m. at City Hall, 111 Lincoln Street, Verona, WI 53593.

ANYONE HAVING AN OBJECTION to the granting of such licenses shall file that objection in writing with the City Clerk, City of Verona, 111 Lincoln Street before June 5, 2026 during regular office hours.

Published: May 28, 2026

Holly Licht, City Clerk

CITY OF VERONA
**APPLICANTS FOR CIGARETTE, TOBACCO,
AND ELECTRONIC VAPING LICENSE**
Council Approval Date: June 8, 2026

Applicant's Name & Address

1. Casey's Marketing Company, d/b/a Casey's General Store #3586
103 Prairie Oaks Dr
2. Kwik Trip #456
2145 County Rd PB
3. Kwik Trip #837
400 E Verona Ave
4. Kwik Trip #1075
233 Wildcat Way
5. Miller & Sons, Inc.
210 S Main St
6. Verona Mart, Inc., d/b/a Verona Mobil
101 E Verona Ave
7. Walgreen Co.
104 N Main St
8. Wisco Green, LLC
602 W Verona Ave

CITY OF VERONA
APPLICATION FOR SIDEWALK CAFÉ PERMIT

****Applications must be submitted at least 30 days prior to issuance of permit to allow for staff review and Common Council consideration. ****

Application Checklist

- Permit Fee - \$100
- Certificate of Insurance
- Site plan drawing including dimensions and furnishings (page 3)

Application Type

- New
- Renewal (applications for renewal must be submitted annually by May 1st)

Business/Trade Name: Toot & Kate's Winebar

Applicant/Contact Name (if different): Megan Clark

Business Address: 109 S. Main St.

Phone Number: [REDACTED] **Email:** [REDACTED]

Amended Premises Description:

Seating on stoop and additional 4 cafe tables and 8 seats on city terrace from July 1st - Nov 15th and then March 15th - June 30th 2027.

I have been provided a copy of the City of Verona Sidewalk Café ordinance and hereby agree to abide by all requirements pertaining to the use of sidewalk dining and alcohol service.

Megan Clark
Printed Name

Mr. Che 4-23-26
Signature Date

INDEMNIFICATION AND HOLD HARMLESS AGREEMENT:

The Applicant hereby expressly agrees to indemnify, defend and hold harmless the City of Verona and its officers, officials, agents, and employees against all claims, costs and liability of every kind and nature (including reasonable fees for attorneys, consultants, and experts) for any and all damages because of injury, including death at any time resulting therefrom, sustained by any person or persons, or on account of damages to property, including loss of use thereof, arising from, in connection with, caused by or resulting from use of the sidewalk café, including, but not limited to, any damage caused by snow removal by the City of Verona.

Toot & Kate's Winebar
Business Name

109 S. Main St.
Address of Business

Megan Clark
Printed Name of Responsible Party

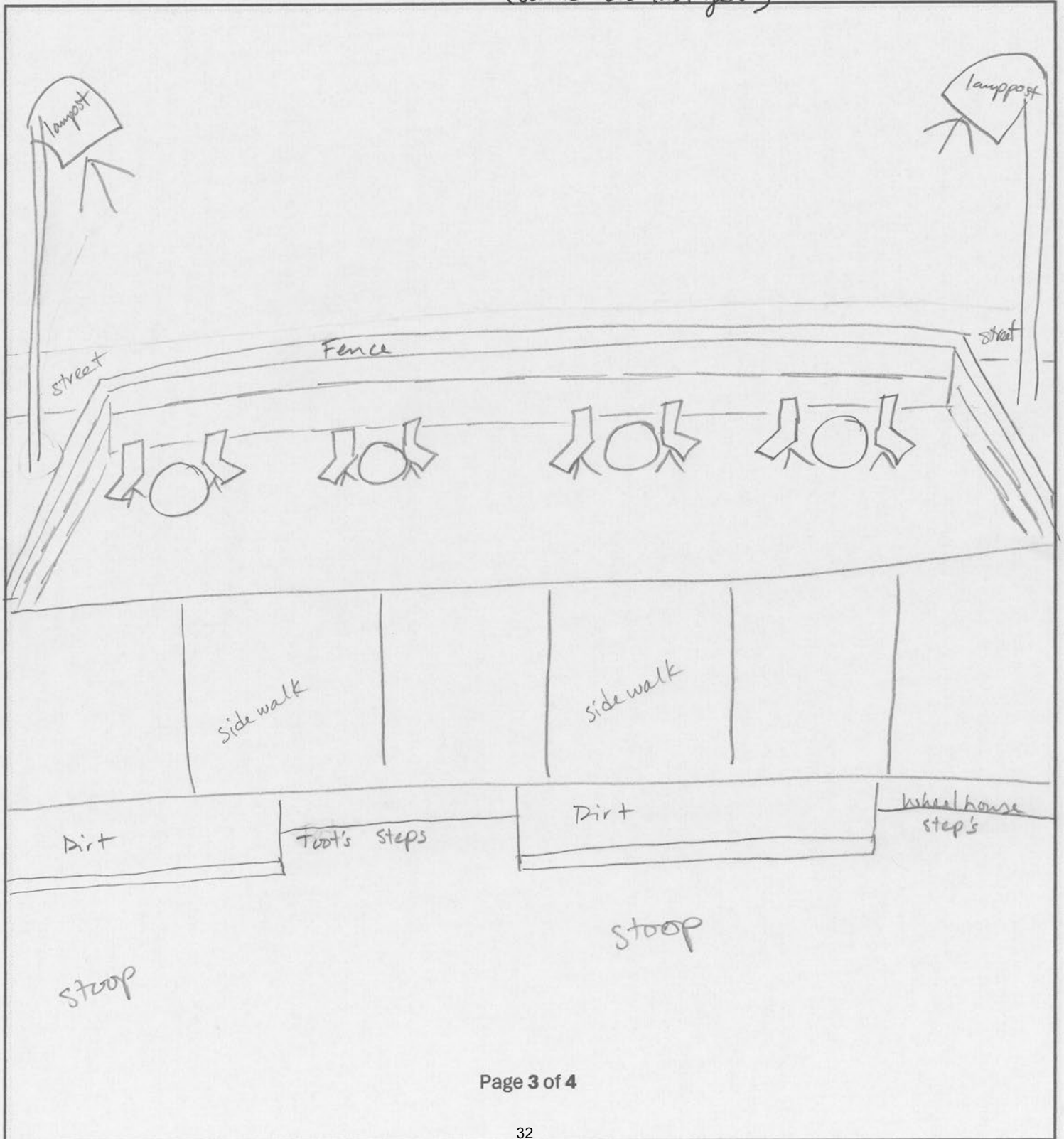
Mh-Clark 4-23-20
Signature of Responsible Party Date

Hellykat 4-23-20
Signature of City Representative Date

City Clerk
Title

Site Plan Drawing (include dimensions, location of tables, chairs, fire hydrants, utility poles, etc. if applicable). Attach additional sheets to include pictures of proposed barrier and other furnishings. For avoidance of doubt, the Applicant shall comply with the requirements of Section 7-14-4 of the City of Verona Sidewalk Café Ordinance.

(same as last year)



OFFICIAL USE ONLY

CITY CLERK

Date Application Received 4/28/26

Date Submitted to Police 4/29/26

Date Copy Sent to Public Works and Fire Department _____

Application Complete? (Application, COI, Site Plan Drawing, Fees Paid, Pictures of Barrier and Furnishings)

- Yes
- No

Notes:

Signature of Clerk of Deputy Clerk *Kangler* Date 4/29/26

POLICE DEPARTMENT

Date Received by Police 5/4/2026

Notes:

- Recommend Approval
- Recommend Denial

Datt 5/4/2026
Signature of Police Chief or Designee Date

PUBLIC SAFETY COMMITTEE:

Date of Meeting: 4/8/26 APPROVE DENY

COMMON COUNCIL:

Date of Meeting: 6/8/26 APPROVE DENY



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

04/22/2026

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Provident Insurance Group 5665 S 108th Street Hales Corners WI 53130		CONTACT NAME: Main Office PHONE (A/C, No, Ext): 414-810-3520 E-MAIL ADDRESS: FAX (A/C, No): 4148103515	
INSURED Toot & Kate's, LLC 290 CANTERBURY PASS Verona WI 53593		INSURER(S) AFFORDING COVERAGE INSURER A: Society Insurance INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:	
		NAIC # 15261	

COVERAGES**CERTIFICATE NUMBER:****REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	Y	Y	BP24005712	03/05/2026	03/05/2027	EACH OCCURRENCE \$ 100000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ 5000 PERSONAL & ADV INJURY \$ 1000000 GENERAL AGGREGATE \$ 2000000 PRODUCTS - COMP/OP AGG \$ \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> Y/N (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		N/A	WC24005716	03/05/2026	03/05/2027	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 100000 E.L. DISEASE - EA EMPLOYEE \$ 100000 E.L. DISEASE - POLICY LIMIT \$ 500000
A	Liquor Liability			BP24005712	03/05/2026	03/05/2027	Each 1000000 Aggregate 1000000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Business Address: 109 S Main St, Verona, WI 53593

Policy Endorsed by BP0407, extending liability to the sidewalk cafe.

CERTIFICATE HOLDER**CANCELLATION**CITY OF VERONA
111 LINCOLN ST

Verona

WI 53593

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Tyler A Katchever

Fax:

Email:

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ACORD 25 (2016/03)

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