



LEGISLATIVE/LICENSING COMMITTEE MEETING

**Monday, May 3, 2021 at 5:30 p.m.
Caledonia Village Hall – 5043 Chester Lane**

THIS WILL BE AN IN-PERSON MEETING – MAX NUMBER OF ATTENDEES 16

1. Call to Order
2. Approval of Minutes
3. Approval of New Class B Combination Liquor License/Javeen LLC/Trade Name Arbee's Liquor Mart/4606 Douglas Avenue/ Priyank Patel, Agent
4. Ordinance 2021-05 – An Ordinance To Amend Section 15-1-3(B) Of The Code Of Ordinances Of The Village Of Caledonia, Racine County, Wisconsin, Relating To Wisconsin Uniform Dwelling Code
5. Adjournment

Dated April 30, 2021

Joslyn Hoeffert
Village Clerk

Only committee members are expected to attend. However, attendance by all Board members (including non-members of the committee) is permitted. If additional (non-committee) Board members attend, three or more Board members may be in attendance. Section 19.82(2), Wisconsin Statutes, states as follows:

If one-half or more of the members of a governmental body are present, the meeting is rebuttably presumed to be for the purposes of exercising the responsibilities, authority, power or duties delegated to or vested in the body.

To the extent that three or more members of the Caledonia Village Board actually attend, this meeting may be rebuttably presumed to be a "meeting" within the meaning of Wisconsin's open meeting law. Nevertheless, only the committee's agenda will be discussed. Only committee members will vote. Board members who attend the committee meeting do so for the purpose of gathering information and possible discussion regarding the agenda. No votes or other action will be taken by the Village Board at this meeting.

LEGISLATIVE/LICENSING COMMITTEE MEETING
CALEDONIA VILLAGE HALL
5043 CHESTER LANE, RACINE, WI 53402
Tuesday, February 9, 2021

1. Call to Order

Trustee Wanggaard called the meeting to order at 4:30 p.m. In attendance were:

Committee Members: Trustee Wanggaard and Trustee Prott. Also present was Trustee Martin.

Absent: None.

Staff/Others Present: Planning Director Peter Wagner, Josyln Hoeffert, Dave Gobis, and CDA Chair William Streeter.

2. Approval of minutes

Trustee Prott motioned to approve the minutes as printed from November 9, 2020. Trustee Wanggaard seconded. Motion carried unanimously.

3. Dog Fancier's Application /Jennifer Schultz, 6200 5 Mile Rd, Racine

Schultz was present and submitted all the proper paperwork and has passed the required inspection.

Trustee Prott motioned to approve the Dog Fancier's application and forward to the Village Board for approval. Trustee Wanggaard seconded. Motion carried unanimously.

Trustee Wanggaard took the agenda out of order to address item 6 and then moved forward with the remaining agenda as posted.

6. Resolution Amending The Role Of The Community Development Authority Of The Village Of Caledonia, Wisconsin

Trustee Martin and Streeter attended a grant writing seminar from UW Extension, and it is their opinion that there is a need for a professional grant writer to pursue any grants on behalf of the CDA. Trustee Martin further explained that applying for grants is not a job for a volunteer committee and felt they could only suggest and review the proposed grants. Administering grants would need to be handled by a fiscal agent, such as the Finance Director. The CDA is an oversight group and would not feel comfortable writing their own grants.

The Resolution would need to be amended to reflect that the CDA's purview would be allocating the grant dollars. Streeter recommended the language to reflect overseeing the grant application process and allocation of any awarded grants.

Wanger explained that this resolution refocuses the CDA and removed some conflicting language that has caused some confusion amongst CDA members. A 2/3 vote will be needed to amend the by-laws of the CDA.

Trustee Prott motioned to approve the Resolution with the incorporated provisions in relation to grant writing and forward to the Village Board for consideration and approval. Trustee Wanggaard seconded. Motion carried unanimously.

There was discussion regarding the types of grants the CDA could pursue. The CDA could work with Staff for the direction on the types of grants that would fall under their purview. However, The Village would need to identify who could write these grants if staff doesn't have the resources to accommodate this task. The Village could approach local colleges or community agencies to see if we could partner up to work on any grants we may identify. The CDA could explore the Wisconsin Community Development Block Grant (CDBG) program for possible grants. Prott explained that he has had a lot of experience with grant writing and advised not to overthink the process. He offered to work with Wagner to keep an eye on any available grants that may be related to community development could be passed along to the CDA for consideration. There is also a list that Wagner may be able to be added to see these potential grants himself.

4. Ordinance 2021-01 – An Ordinance To Repeal Sec. 20-1339(B) Of The Racine County Code Of Ordinance As Adopted Under Section 16-1-1(A) Of The Code Of Ordinances Of The Village Of Caledonia, Racine County, Wisconsin, Removing The Requirement For A Conditional Use For Developments Based On The Criteria Of Set Distances From A Freeway, Road Interchange, State Or County Trunk Highways

There is a section of County code that the Village adopted that has created a barrier to development, and the Village would like to repeal this section. This section will eventually be eliminated in the revised zoning code update, but any upcoming developments are being negatively impacted now. If repealed, any development coming before the Village will still require Village review and approval based on a zoning district requirements and proposed use. This repeal would make it an easier procedure for developers during the review process and eliminate any unnecessary costs based on proximity to a specific road type. Wagner explained examples in which developments have been negatively impacted by this onerous requirement.

Trustee Prott motioned to approve Ordinance 2021-01 and forward to the Plan Commission for consideration and approval. Trustee Wanggaard seconded. Motion carried unanimously.

5. Ordinance 2021-XX – An Ordinance To Amend Sec. 7-1-4 Of The Code Of Ordinances For The Village Of Caledonia Pertaining To Late Fee For Dog Licenses

This is updating the Ordinance to be in accordance with State Statutes.

Trustee Prott motioned to approve Ordinance 2021-xx and forward to Village Board for consideration and approval. Trustee Wanggaard seconded. Motion carried unanimously.

7. Adjournment

There being no further business, Motion by Trustee Prott to adjourn the meeting at 5:35 p.m. Trustee Wanggaard seconded. Motion carried unanimously.

Respectfully submitted,

Joslyn Hoeffert
Deputy Village Clerk

Original Alcohol Beverage Retail License Application

(Submit to municipal clerk.)

For the license period beginning: 05/01/2021 ending: 06/30/21
(mm dd/yyyy) (mm dd/yyyy)

To the Governing Body of the: Town of } Caledonia
 Village of }
 City of }

County of Racine Aldermanic Dist. No. _____
 (if required by ordinance)

Check one: Individual Limited Liability Company
 Partnership Corporation/Nonprofit Organization

Applicant's Wisconsin Seller's Permit Number <u>456-1030654163-04</u>	
FEIN Number <u>86-2626810</u>	
TYPE OF LICENSE REQUESTED	FEE
<input checked="" type="checkbox"/> Class A beer	\$ <u>4.17</u>
<input type="checkbox"/> Class B beer	\$
<input type="checkbox"/> Class C wine	\$
<input checked="" type="checkbox"/> Class A liquor	\$ <u>41.67</u>
<input type="checkbox"/> Class A liquor (cider only)	\$ N/A
<input type="checkbox"/> Class B liquor	\$
<input type="checkbox"/> Reserve Class B liquor	\$
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$
TOTAL FEE	\$ <u>45.84</u>

Name (individual / partners give last name, first, middle; corporations / limited liability companies give registered name)
Patel, Vishnu

An "Auxiliary Questionnaire," Form AT-103, must be completed and attached to this application by each individual applicant, by each member of a partnership, and by each officer, director and agent of a corporation or nonprofit organization, and by each member/manager and agent of a limited liability company. List the full name and place of residence of each person.

President / Member Last Name <u>Patel</u>	(First) <u>R Vishnu</u>	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code) <u>1918 stl place Kenosha, WI 53140</u>
Vice President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Secretary / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Agent Last Name <u>Patel</u>	(First) <u>Prayank</u>	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code) <u>3550 Wood Rd. Racine, WI 53406</u>
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

1. Trade Name Arbee's Liquor Business Phone Number 262 639 0400
 2. Address of Premises 4606 Douglas Ave Post Office & Zip Code 53402

3. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.)
4606 Douglas Ave. Racine, WI 53402. Block & Brick Building
9,000 sq-ft Walk-in Coolers and shelves.

4. Legal description (omit if street address is given above): _____

5. (a) Was this premises licensed for the sale of liquor or beer during the past license year? Yes No
 (b) If yes, under what name was license issued? ARBEE'S LIQUOR

6. Is individual, partners or agent of corporation/limited liability company subject to completion of the responsible beverage server training course for this license period? **If yes, explain** Yes No

7. Is the applicant an employe or agent of, or acting on behalf of anyone except the named applicant? Yes No
If yes, explain.

8. Does any other alcohol beverage retail licensee or wholesale permittee have any interest in or control of this business? **If yes, explain** Yes No

9. (a) **Corporate/limited liability company applicants only:** Insert state WI and date 3-12-21 of registration.

(b) Is applicant corporation/limited liability company a subsidiary of any other corporation or limited liability company? **If yes, explain** Yes No

(c) Does the corporation, or any officer, director, stockholder or agent or limited liability company, or any member/manager or agent hold any interest in any other alcohol beverage license or permit in Wisconsin? **If yes, explain.** Yes No

Vishnu Patel is owner of Dander Liquor Mart in Racine, WI.

10. Does the applicant understand they must register as a Retail Beverage Alcohol Dealer with the federal government, Alcohol and Tobacco Tax and Trade Bureau (TTB) by filing (TTB form 5630.5d) before beginning business? [phone 1-877-882-3277] Yes No

11. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776] Yes No

12. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes No

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000. Signer agrees to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants, or one member of a partnership applicant must sign; one corporate officer, one member/manager of Limited Liability Companies must sign.) Any lack of access to any portion of a licensed premises during inspection will be deemed a refusal to permit inspection. Such refusal is a misdemeanor and grounds for revocation of this license.

Contact Person's Name (Last, First, M.I.) <u>Patel Vishnu</u>	Title/Member <u>OWNER</u>	Date <u>4-12-21</u>
Signature <u>[Signature]</u>	Phone Number <u>262 554 1333</u>	Email Address

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>4-12-2021</u>	Date reported to council / board	Date provisional license issued	Signature of Clerk / Deputy Clerk
Date license granted	Date license issued	License number issued	

Schedule for Appointment of Agent by Corporation / Nonprofit Organization or Limited Liability Company

Submit to municipal clerk.

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent. The following questions must be answered by the agent. The appointment must be signed by an officer of the corporation/organization or one member/manager of a limited liability company and the recommendation made by the proper local official.

To the governing body of: Town Village of Caledonia County of Racine, WI
 City

The undersigned duly authorized officer/member/manager of Jeewan, LLC
(Registered Name of Corporation / Organization or Limited Liability Company)

a corporation/organization or limited liability company making application for an alcohol beverage license for a premises known as Arbee Liquor
(Trade Name)

located at 4606 Douglas Ave.

appoints Priyank Patel
(Name of Appointed Agent)

3550 Wood Rd. Racine, WI 53406
(Home Address of Appointed Agent)

to act for the corporation/organization/limited liability company with full authority and control of the premises and of all business relative to alcohol beverages conducted therein. Is applicant agent presently acting in that capacity or requesting approval for any corporation/organization/limited liability company having or applying for a beer and/or liquor license for any other location in Wisconsin?

Yes No If so, indicate the corporate name(s)/limited liability company(ies) and municipality(ies).

Is applicant agent subject to completion of the responsible beverage server training course? Yes No

How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin? 5 years

Place of residence last year 3550 Wood Rd. Racine, WI 53406

For: Dandee Liquor Mart, Inc
(Name of Corporation / Organization / Limited Liability Company)

By: [Signature]
(Signature of Officer / Member / Manager)

Any person who knowingly provides materially false information in an application for a license may be required to forfeit not more than \$1,000.

ACCEPTANCE BY AGENT

I, Priyank Patel, hereby accept this appointment as agent for the
(Print / Type Agent's Name)

corporation/organization/limited liability company and assume full responsibility for the conduct of all business relative to alcohol beverages conducted on the premises for the corporation/organization/limited liability company.

[Signature] 4-12-21 Agent's age ~~120-98~~ 24y.
(Signature of Agent) (Date)

3550 Wood Rd. Racine, WI 53406 Date of birth 1-20-98
(Home Address of Agent)

**APPROVAL OF AGENT BY MUNICIPAL AUTHORITY
 (Clerk cannot sign on behalf of Municipal Official)**

I hereby certify that I have checked municipal and state criminal records. To the best of my knowledge, with the available information, the character, record and reputation are satisfactory and I have no objection to the agent appointed.

Approved on _____ by _____ Title _____
(Date) (Signature of Proper Local Official) (Town Chair, Village President, Police Chief)



STATE OF WISCONSIN
DEPARTMENT OF JUSTICE

Request Date: **4/13/2021**

Report Date: **4/13/2021**

This criminal background check was performed by searching the following data submitted to the Crime Information Bureau

Name: **PATEL, PRIYANK**

Date of Birth: **1/20/1998**

Alias Names:

NOTICE TO EMPLOYERS

It may be a violation of state law to discriminate against a job applicant because of an arrest or conviction record. Generally speaking, an employer may refuse to hire an applicant on the basis of a conviction record only if the circumstances of the offense for which the applicant was convicted substantially relate to the circumstances of the particular job. For more information, see [Statute 111.335](#) and the Department of Workforce Development's publication, Arrest and Conviction Records Under the Law.

Before you make a final decision adverse to an applicant based on the following arrest record, in addition to any other opportunity you offer the applicant to explain the following arrest record, please notify the applicant of:

1. His or her right to challenge the accuracy and completeness of any information contained in a arrest record, and
2. The process for submitting a challenge

The applicant should submit his or her challenge to CIB on Form DJ-LE-247. Form DJ-LE-247 is available free of charge on [The Department of Justice website](#) or by calling (608) 266-7314. A challenge may include a request for comparison of the fingerprints of the person submitting the challenge to the fingerprints on file that are associated with the Wisconsin arrest record below.

NO RECORD FOUND

An arrest record search based only on a name, date of birth, and other identifying data that is not unique to a particular person (like "sex" or "race") may result in:

1. Identification of criminal history records for multiple persons as potential matches for the identifying data submitted, or
2. Identification of an arrest history record belonging to a person whose identifying information is similar in some way to the identifying data that was submitted to be searched, but is not the same person whose identifying data was submitted for searching. The Crime Information Bureau (CIB) therefore cannot guarantee that the response below pertains to the person in whom you are interested without a fingerprint submission.

Based on the above identifying data provided for this search, no matching Wisconsin arrest records were found at this time. These search results do not preclude an individual from having an arrest record at a local law enforcement agency that was not reported to the Department of Justice or in another state, or juvenile records

Application for Cigarette and Tobacco Products Retail License

Submit to municipal clerk.

MUNICIPAL USE ONLY

Applicant's Wisconsin 15-digit Sales Tax Account Number

456-1030654163-04

← This must be issued in the same Legal Name of the licensee below.

License Number
Period Covered
Date of Issuance

Legal Name (corporation, limited liability company, partnership or sole proprietorship) Arbee's LLC			Federal Employer Identification No. (FEIN) 86-2626810		
Trade or Business Name (if different than Legal Name) Arbee's Liqueur Mart			Telephone Number (262) 554-1333		
Business Address (License Location) 4606 Douglas Ave			Business Located In <input type="checkbox"/> City <input checked="" type="checkbox"/> Village <input type="checkbox"/> Town		
City Racine	State WI	ZIP Code 53402	of: Caledonia		
Mailing Address (if different than Business Address)			Business Telephone (262) 6390400		
			County RACING		
			City RACING		
			State WI		
			ZIP Code 53403		

Organization (check one)

- Sole Proprietor Wisconsin Corporation – Enter date incorporated: _____
 Partnership Out-of-State Corporation – Are you registered to do business in Wisconsin? YES NO
 Other (describe) _____

- YES NO 1. Does the applicant understand that they must purchase cigarettes only from distributors or jobbers who hold a permit with the Wisconsin Department of Revenue?
 YES NO 2. Does the applicant understand that they must obtain a Tobacco Products Distributor permit if purchasing untaxed tobacco products from an out-of-state company? (Tobacco Products Distributor permit is available from the Wisconsin Department of Revenue at 608-261-6435. See application form CTP-129, revenue.wi.gov/forms/excise/ctp-129.pdf.)
 YES NO 3. Does the applicant understand that they cannot purchase/exchange cigarettes or tobacco products from another retailer, including transferring existing stock to a new owner?
 YES NO 4. Does the applicant understand that they must provide employees with tobacco sales training approved by the Wisconsin Department of Health Services? (SmokeCheck.org)
 YES NO 5. Does the applicant understand that they may not sell, give or otherwise provide cigarettes/tobacco products and nicotine products to minors (including electronic cigarettes containing nicotine)?
 YES NO 6. Does the applicant understand that they may not sell single cigarettes?
 YES NO 7. Does the applicant understand that cigarette and tobacco products invoices must be kept on the licensed premises for two years from the date of the invoice and be available for inspection by the Wisconsin Department of Revenue/law enforcement and that failure to comply can result in criminal penalties, including loss of cigarettes/tobacco products?
 YES NO 8. Does the applicant understand that only cigarettes and roll-your-own (RYO) tobacco products listed on the Wisconsin Department of Justice's website labeled "Directory of Certified Tobacco Manufacturers and Brands" at www.doj.state.wi.us/dls/tobacco-directory may be sold in Wisconsin?

Cigarettes / Tobacco will be sold over counter through vending machine both

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the applicant. Applicant agrees to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, cannot be assigned to another.

Any lack of access to any portion of a licensed premises during inspection will be deemed a refusal to permit inspection. Such refusal is a misdemeanor and grounds for revocation of this license.

VISHNU R. PATEL
(Officer of Corporation/Member/Manager of Limited Liability Company/Partner/Individual)

SUBSCRIBED AND SWORN TO BEFORE ME

this 12th day of April, 2021

(Clerk / Notary Public)

My commission expires 11/21/21

VILLAGE OF CALEDONIA
5043 CHESTER LANE
RACINE WI 53402

Amount \$ 15.00
Receipt No. 501488
Lic. No. _____

APPLICATION FOR SODA AND OR NON-INTOXICATING BEVERAGES

I/WE HEREBY APPLY FOR A LICENSE TO SELL AND/OR SERVICE IN THE VILLAGE OF CALEDONIA FOR THE PERIOD 05/21 THROUGH 05/21, (UNLESS SOONER REVOKED) SODA WATER BEVERAGES AND/OR NON-INTOXICATING BEVERAGES SUBJECT TO THE LIMITATIONS IMPOSED BY SECTION 66.0433(1) & (2) OF THE WISCONSIN STATUTES, AND HEREBY AGREE TO COMPLY WITH ALL LAWS, RESOLUTIONS, ORDINANCES AND REGULATIONS AFFECTING THE SALE OF SUCH BEVERAGES IF A LICENSE IS GRANTED TO ME.

***LICENSE IS ISSUED TO AND DETERMINED BY LOCATION TO THE BUSINESS ADDRESS IN CALEDONIA WHERE SODA WATER /NON-INTOXICATING BEVERAGES WILL BE SOLD AND/OR SERVICED.**

PLEASE ANSWER THE FOLLOWING QUESTIONS FULLY AND COMPLETELY:

(Check All That Apply)

LICENSE(S) APPLYING FOR:	<input checked="" type="checkbox"/> SODA WATER BEVERAGES \$5.00 FEE APPLIES	<input checked="" type="checkbox"/> NON-INTOXICATING BEVERAGES \$10.00 Fee applies - On-site \$ 5.00 Fee applies - Off-site			
BUSINESS IS: (please specify)	<input type="checkbox"/> CORPORATION	<input type="checkbox"/> PARTNERSHIP	<input type="checkbox"/> INDIVIDUAL	<input checked="" type="checkbox"/> LLC	<input type="checkbox"/> OTHER

*PLEASE PROVIDE LEGAL NAME OF BUSINESS: Sevan, LLC

TRADE NAME: Arbee's Liquor Mart

BUSINESS ADDRESS (complete address): 4600 Douglas Ave

HOME ADDRESS (complete address): 3700 Meacham Rd Racine, WI

BUSINESS PHONE: 262 5541333

HOME PHONE: 262 633 9037-262 41232


SIGNATURE OF APPLICANT

4-12-21
DATE

Vishnu Patel
PRINTED NAME

Auxiliary Questionnaire Alcohol Beverage License Application

Submit to municipal clerk.

Individual's Full Name (please print) (last name) <u>Patel</u>		(first name) <u>Rohit Vishnu</u>		(middle name)	
Home Address (street/route) <u>1918 8th place</u>		Post Office <u>Kenosha</u>	City <u>Kenosha</u>	State <u>WI</u>	Zip Code <u>53140</u>
Home Phone Number <u>262 554 1333</u>		Age <u>63</u>	Date of Birth <u>01/01/1957</u>	Place of Birth <u>India</u>	

The above named individual provides the following information as a person who is (check one):

- Applying for an alcohol beverage license as an **individual**.
- A member of a **partnership** which is making application for an alcohol beverage license.
- _____ of _____
(Officer / Director / Member / Manager / Agent) (Name of Corporation, Limited Liability Company or Nonprofit Organization)

which is making application for an alcohol beverage license.

The above named individual provides the following information to the licensing authority:

- How long have you continuously resided in Wisconsin prior to this date? 20 years
- Have you ever been convicted of any offenses (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of any other states or ordinances of any county or municipality? Yes No
 If yes, give law or ordinance violated, trial court, trial date and penalty imposed, and/or date, description and status of charges pending. (If more room is needed, continue on reverse side of this form.)
- Are charges for any offenses presently pending against you (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of other states or ordinances of any county or municipality? Yes No
 If yes, describe status of charges pending.
- Do you hold, are you making application for or are you an officer, director or agent of a corporation/nonprofit organization or member/manager/agent of a limited liability company holding or applying for any other alcohol beverage license or permit? Yes No
 If yes, identify. Dandell Liquor Mart, 3700 Meacham Rd, Class A Liquor.
(Name, Location and Type of License/Permit)
- Do you hold and/or are you an officer, director, stockholder, agent or employe of any person or corporation or member/manager/agent of a limited liability company holding or applying for a wholesale beer permit, brewery/winery permit or wholesale liquor, manufacturer or rectifier permit in the State of Wisconsin? Yes No
 If yes, identify.
(Name of Wholesale Licensee or Permittee) (Address By City and County)

6. Named individual must list in chronological order last two employers.

Employer's Name <u>Dandell Liquor Mart</u>	Employer's Address <u>3700 Meacham Rd</u>	Employed From <u>2002</u>	To <u>Current</u>
Employer's Name <u>Rohit Patel</u>	Employer's Address	Employed From	To

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Rohit Patel
(Signature of Named Individual)



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

Contact Information:

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

Letter ID L0005469776

JEEVAN, LLC
 4606 DOUGLAS AVE
 RACINE WI 53402-2713

Wisconsin Department of Revenue Seller's Permit

Legal/real name: JEEVAN, LLC
Business name: 4606 DOUGLAS AVE
 RACINE WI 53402-2713

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

Tax Type	Account Type	Account Number
Sales & Use Tax	Seller's Permit	456-1030664181-04



State of Wisconsin • DEPARTMENT OF REVENUE

Personal Wallet Copy

Seller's Permit: 456-1030664181-04

Legal/Real Name: JEEVAN, LLC

Signature _____

We are here to serve you

Wisconsin Department of Revenue
PO Box 8902
Madison, WI 53708-8902

Ph: 608-266-2776

Fax: 608-264-6884

Email: dorbusinessstax@revenue.wi.gov

Web: www.revenue.wi.gov

Main office: 2135 Rimrock Rd., Madison



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


Contact Information:

2135 RIMROCK RD PO BOX 8902
 MADISON, WI 53708-8902
 ph: 608-266-2776 fax: 608-327-0235
 email: DORBusinessTax@wisconsin.gov
 website: revenue.wi.gov



JEEVAN, LLC
 4606 DOUGLAS AVE
 RACINE WI 53402-2713

Letter ID L1079211600



Wisconsin Business Tax Registration Certificate

Expiration date: April 30, 2023

Legal/real name: JEEVAN, LLC

- This certificate confirms that you are registered with the Wisconsin Department of Revenue for the tax types shown below.
- This registration certificate is not a seller's permit, and should not be used as proof that you hold a seller's permit.
- You may not transfer this certificate to any other individual or business.

Tax Type	Account Type	Number
Sales & Use Tax	Sales & Use Tax	456-1030664181-04
Withholding Tax	Withholding Tax	036-1030664181-02

The following is a list of the business locations that you have registered with the Department of Revenue.

456-1030664181-04
JEEVAN, LLC
4606 DOUGLAS AVE
RACINE WI 53402-2713



Wisconsin Tax Account Lookup

Home > Wisconsin Tax Account Lookup

1. Lookup > 2. Results

Results

Legal Name

JEEVAN LLC

Account Type

Withholding

Account Number

036-1030664181-02

Filing Frequency

Quarterly

Cancel

< Previous

For your security, this application times out after 15 minutes. All unsaved information will be lost.

[Mobile Version](#) [Common Questions](#) [Forms](#) [Publications](#) [Training](#) [Contact Us](#)

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VILLAGE OF CALEDONIA
5043 CHESTER LANE
RACINE WI 53402

262-835-4451

Receipt No: 5.001488

Apr 12, 2021

PATEL, MADHU

Previous Balance:	.00
LICENSES & PERMITS - CLASS A BEER, CLASS A LIQUOR, NON-INTOX. (OFF PREMISES), PUB FEE AND INVESTIGATION FEE	85.84
LICENSES & PERMITS - SODA LICENSE - ARBEE'S LIQUOR	5.00
LICENSES & PERMITS - CIGARETTE LICENSE - ARBEE'S LIQUOR	100.00
<hr/>	
Total:	190.84
<hr/>	
CHECKS	190.84
Check No: 3114	
Payor: PATEL, MADHU	
Total Applied:	190.84
<hr/>	
Change Tendered:	.00
<hr/>	

04/12/2021 10:52 AM

Joslyn Hoeffert

From: Strey, Etta L - DSPS <etta.strey@wisconsin.gov>
Sent: Monday, March 22, 2021 11:32 AM
To: Karie Pope
Subject: Village of Caledonia, Racine County (52104) - UDC Delegation

Follow Up Flag: Follow up
Flag Status: Completed

Good Morning,

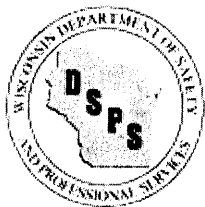
I believe we are all caught up on your delegation requests and that you are now delegated for commercial electric, fire suppression/alarm, and commercial building.

I also checked your UDC delegation and see that the ordinance we have on file is from the Town of Caledonia's delegation in 1990. I didn't see a current ordinance on your website that adopts SPS 320-325 and 327 – is this available or can it be added to your agenda for an upcoming ordinance revision?

Once that is available, I can renew your UDC delegation as the Village instead of the Town.

Please let me know if there are any questions.

Thank you,



Etta Strey
Department of Safety and Professional Services
Division of Industry Services
Etta.Strey@wisconsin.gov

Ordinance No. 2021-05

AN ORDINANCE TO AMEND SECTION 15-1-3(b) OF THE CODE OF ORDINANCES OF THE VILLAGE OF CALEDONIA, RACINE COUNTY, WISCONSIN, RELATING TO WISCONSIN UNIFORM DWELLING CODE

The Village Board of the Village of Caledonia, Racine County, Wisconsin, do ordain as follows:

1. That Section 15-1-3(b) of the Code of Ordinances for the Village of Caledonia be, and hereby is, amended to read as follows:

"(b) Wisconsin Uniform Dwelling Code.

1. Authority. These regulations are adopted under the authority granted by Sec.. 101.65, Wisconsin Statutes.
2. Purpose. The purpose of this section is to promote the general health, safety and welfare and to maintain required local uniformity with the administrative and technical requirements of the Wisconsin Uniform Dwelling Code.
3. Scope. The scope of this section includes the construction and inspection of one- and two-family dwellings built since June 1, 1980 and new camping units as defined in Wis. Admin. Code § 327.08(9). The Village previously adopted the Wisconsin Uniform Dwelling Code and this ordinance updates the local code to comport with the most recent version of uniform State Codes. To the extent any provision of this Section conflicts with another section of the Municipal Code, the most restrictive provision shall apply.
 - a. Notwithstanding Wis. Admin. Code § SPS 320.05 or any other exemptions of the Uniform Dwelling Code, the scope of this ordinance also includes the construction and inspection of alterations and additions to one- and two-family dwellings built before June 1, 1980. Because such projects are not under state jurisdiction, petitions for variance and final appeals under Wis. Admin. Code §§ SPS 320.19 and 320.21, respectively, shall be decided by the Zoning Board of Appeals. Petitions for variance shall be decided per Wis. Admin. Code § SPS 320.19(Intro) so that equivalency is maintained to the intent of the rule being petitioned.
 - b. Notwithstanding Wis. Admin. Code § SPS 320.05 or any other exemptions of the Uniform Dwelling Code, the scope of this ordinance also includes the construction and inspection of detached garages serving one and two family dwellings. The building structure and any heating, electrical or plumbing systems shall comply with the

requirements of the Uniform Dwelling Code, other than for smoke alarms, carbon monoxide alarms and frost protection of footings, which shall be determined by the code official. Petitions for variance and appeals shall be under the jurisdiction of the Zoning Board of Appeals.

4. Wisconsin Uniform Dwelling Code Adopted. The Wisconsin Uniform Dwelling Code, § SPS 320-325 and § SPS 327, and their successors, of the Wisconsin Administrative Code, and all amendments thereto, is adopted and incorporated by reference and shall apply to all buildings within the scope of this ordinance.
 5. Building Inspector. The Building Inspector, pursuant to Sec. 15-1-5, shall administer and enforce this ordinance and shall be certified by the Division of Industry Services, as specified by Wisconsin Statutes, Section 101.66(2), in the category of Uniform Dwelling Code Construction Inspector. Additionally, this or other assistant inspectors shall possess the certification categories of UDC HVAC, UDC Electrical, and UDC Plumbing.
 6. Building Permit Required. Building permits are required in accordance with the Wisconsin Uniform Dwelling Code and this Chapter. Application of the Code requirements are set forth in this Chapter and specifically under Sections 15-1-4 (d) and (e), 15-1-6 and 15-1-29 of this Chapter.
 7. Building Permit Fee. The building permit fees shall be determined by resolution of the Village Board from time-to-time and shall include the applicable fee per Wis. Admin. Code Ch. SPS 302 to be forwarded to the Wisconsin Department of Safety and Professional Services for a UDC permit seal that shall be assigned to any new dwelling. Permit fees for a Wisconsin camping unit as outlined within Wis. Admin. Code § SPS 327.09 and inspection fees as outlined within Wis. Admin. Code § 327.10(3) will also be included in this resolution.
 8. Enforcement; Penalties. The enforcement of this section and all other laws and ordinances relating to building shall be by means of the withholding of building permits, increased permit fees, imposition of forfeitures and injunctive action. Enforcement procedures and penalties shall be imposed pursuant to Sec. 15-1-29 of this Title.
 9. Log. The Building Inspector(s) shall keep a log of all inspections completed."
2. This ordinance shall take effect upon adoption and publication as required by law.

Adopted by the Village Board of the Village of Caledonia, Racine County, Wisconsin,
this ____ day of May, 2021.

VILLAGE OF CALEDONIA

By: _____
James R. Dobbs, President

Attest: _____
Joslyn Hoeffert, Clerk

770272.100 (Title 15) 4-29-21

Published: _____