



# VILLAGE OF TWIN LAKES

105 East Main Street P O Box 1024 Twin Lakes, Wisconsin 53181

Phone (262) 877-2858 Fax (262) 877-4019

## VILLAGE BOARD COMMITTEE OF THE WHOLE MEETING

**Monday, February 6, 2023 – 6:30 p.m.**

**Village Hall, 105 E. Main Street, Twin Lakes, WI**

### AGENDA

1. CALL TO ORDER
2. PLEDGE OF ALLEGIANCE
3. ROLL CALL: TRUSTEES ANDRES, BOWER, FITZGERALD, KAROW, KASKIN, PERL, PRESIDENT SKINNER
4. PUBLIC COMMENTS AND QUESTIONS

ELECTION ANNOUNCEMENT: The Primary Election will be held on Tuesday, February 21<sup>st</sup> in the Community Room. This is the first election that we will use the Badger Books. The Badger Books replace the paper poll books. There will be a Public Test of the election equipment including the Badger Books on Wednesday, February 15<sup>th</sup> at 10am in the Community Room.

5. PRESIDENT AND TRUSTEE REPORTS
  - A. TRUSTEE SHARON BOWER - ADMINISTRATION, FINANCE, JUDICIARY, LICENSING
    1. Other?
  - B. TRUSTEE KEVIN FITZGERALD - STREETS & ROADS, EQUIPMENT, STREET LIGHTS, WEEDS, LAKE PLANNING AND PROTECTION
    1. Discussion regarding Recycle Center Attendant pay.
    2. Discussion regarding Resolution R2023-2-1 Declaring Certain Personal Property of the Village as Surplus.
    3. Other?
  - C. TRUSTEE BILL KASKIN - CEMETERY, SANITATION, RECYCLING, SENIORS
    1. Other?
  - D. TRUSTEE AARON KAROW - BUILDING AND ZONING, PLAN COMMISSION, AND PUBLIC BUILDINGS
    1. Discussion regarding action taken at the January 18, 2022 Plan Commission meeting:
      - a. Recommended denial to the Village Board of the request for two principle structures on one lot for 301 West Park Drive.
    2. Other?

- E. TRUSTEE KEN PERL - POLICE, FIRE, LAKE CONTROL, PARKS AND BEACHES
  - 1. Discussion regarding an Intergovernmental Mutual Aid Agreement regarding the transportation of detainees by Wisconsin Law Enforcement Agencies.
  - 2. Other?
  
- F. TRUSTEE BARB ANDRES - SEWER, HEALTH AND ENVIRONMENT, YOUTH, LIBRARY
  - 1. Discussion and Update on the Clean Water Fund Loan for the WWTF upgrade.
  - 2. Other?
  
- G. VILLAGE PRESIDENT HOWARD SKINNER
  - 1. Discussion regarding an Event Permit from H2O Adaptive Sports for a basic skills clinic at Lance Park.
  - 2. Other?

6. ADJOURN

\*\*\*MATTERS MAY BE TAKEN IN ORDER OTHER THAN LISTED\*\*\*

*Requests from persons with disabilities, who need assistance to participate in this meeting or hearing, should be made to the Clerk Treasurer's office in advance so the appropriate accommodations can be made.*

**VILLAGE OF TWIN LAKES****RESOLUTION NO. R2023-2-1****A RESOLUTION DECLARING CERTAIN PERSONAL PROPERTY OF  
THE VILLAGE OF TWIN LAKES AS SURPLUS AND AUTHORIZING  
ITS AUCTION OR DISPOSAL**

WHEREAS, the Village of Twin Lakes has reviewed its various items of personal property and has found certain items to be surplus, unused, obsolete, or otherwise not necessary for governmental functions, and

WHEREAS, the Village Board wishes to declare these items as surplus and direct that the items be sold at public auction or other public sales or otherwise disposed.

NOW THEREFORE BE IT RESOLVED, by the Village Board of Trustees for the Village of Twin Lakes as follows:

SECTION ONE: The following items are hereby declared surplus and their disposal at public sale or auction or by other means as directed.

- 2001 International 4900 Truck (VIN# 1HTSDAAX2H507494)

SECTION TWO: This resolution of the Village Board of Trustees of the Village of Twin Lakes shall take effect immediately upon its proper execution, posting and publishing in accordance with State law.

Dated this 20<sup>th</sup> day of February, 2023.

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Sabrina Waswo  
Village Clerk

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Howard K Skinner  
Village President

Members Voting:

\_\_\_\_\_ Aye  
\_\_\_\_\_ Nay  
\_\_\_\_\_ Absent  
\_\_\_\_\_ Abstained

S.D.I.



## Department of Building and Zoning Plan Commission / Design Review Application and Checklist

Section 17.12.020 of the Village Code lists all projects that must go before the Plan Commission and undergo a Design Review. Please read this section to determine if your project must go through this process. You may also be required to complete this application if the Building Inspector, upon review of your project, has determined that a Design Review is necessary.

Please Print Clearly:

### Legal Property Owner:

Name: Faye Gartenberg  
Mailing Address: 1112 N. Dearborn St. #5  
Chicago, IL 60610

### Applicant/Petitioner:

Name: Michael Gartenberg  
Mailing Address: 1112 N. Dearborn St. #5  
Chicago, IL 60610

Telephone #: 847-751-6800

Fax Number:

E-Mail Address: [Mike@Gartenbergs.com](mailto:Mike@Gartenbergs.com)

### Property Information:

Property Address: 301 West Park Drive  
Twin Lakes, WI 53181

Parcel Number: 86-4-119-282-3140

General Project Location: Across the street from 301 West Park Drive currently on the same parcel

Proposed Project Use: In order to build a new living structure to be used as further living space due to the inability of building an addition as a road bisects the property.

Current Use: Currently is empty space, with only a parking pad.

Existing Zoning: Currently zoned residential

## Next Steps:

Before submitting materials to the Plan Commission/Design Review Board, please follow the steps below:

1.) You may schedule a meeting with the Building Inspector to review your proposed project plans: 262.877.3700 Tuesdays and Thursdays, 12:30pm-2:00pm.

2.) Submit required plans and monies 30 days prior to the next scheduled Plan Commission/Design Review meeting. Plan Commission/Design Review meets the fourth Wednesday of each month at 6:30PM at the Village Hall, 108 E. Main Street, unless rescheduling is needed due to availability. All required paperwork must be submitted before the project will be placed on the agenda.

Next Plan Commission Date: 6-22-22

3.) Submit 19 copies of the plans. Anything larger than letter-sized paper will need to be folded for mailing purposes.

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## Plan Commission / Design Review Checklist

The design review plan must include the following information. For more detailed specifications for the different aspects of your project, it is important that you review 17.42.010 of the Village Code available at [www.villageoftwinlakes.net/documents/village-code/](http://www.villageoftwinlakes.net/documents/village-code/)

- ☐ Drawing of the site plan and/or survey. Must be drawn to a recognized engineering scale, with graphic scale and north arrow
- ☐ Name, address, e-mail, and telephone number of the developer, engineer, or architect
- ☐ Environmental features of the property
- ☐ Artist renderings of structures, signs, elevations of all 4 sides, and photos
- ☐ Floor plans
- ☐ Examples of possible building materials
- ☐ Location of utilities, gas meter, electric transformer, HVAC equipment, dumpsters, etc.
- ☐ Landscaping
- ☐ Fire protection
- ☐ Storage and screening of garbage and refuse
- ☐ Snow removal areas and procedures
- ☐ Sign rendering including the following:
  - Height
  - Location
  - Light wattage
  - Illumination
- ☐ Proposed techniques for on-site stormwater retention / detention
- ☐ Parking lot layout
- ☐ The type, size, and location of existing and proposed buildings and their uses
- ☐ Written and signed statement by the legal owner authorizing the agent to act on their behalf
- ☐ Any other information helpful in reviewing the Design Review Plan

Are you requesting zoning changes? \*\* Yes X No       

If yes, fill in the fields immediately below:

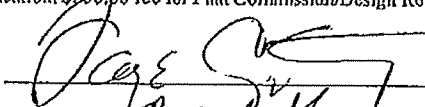
Current Zoning: Residential

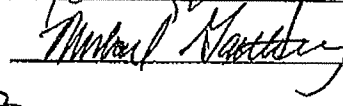
Proposed Zoning: Residential / split Lot

\*\* Zoning change requests are \$325

Village staff may determine that an escrow account is to be set up with the Village Treasurer to cover attorney/engineer and/or Village Planner fees. Applicant/petitioner is hereby duly advised that the engineer and/or attorney or any professional assistance as deemed necessary by the Village of Twin Lakes may be employed for this project, issue, or matter. Escrow money required from the applicant will be put into an account for use in the payment of any professional fees and any balance will be returned within 45 days after the matter is completed.

To accompany this application: \$250.00 fee for Plan Commission/Design Review appearance, additional fees and escrow money as noted below, and all completed paperwork.

Owner's Signature: 

Applicant/Petitioner's Signature: 

Date: 5/28/22

## Required Fees

Plan Commission/Design Review Appearance Fee (Village Code 3.06.010 (D), 1 & 2):

\$ 250

Zoning Change Request Fee: \$325 if applicable (Municipal Code 17.44.050 (C)):

\$ 325

Escrow, as required by Village Administrator and Building Inspector:

\$       

Total Amount Due:

\$ 575

Developer's Agreement Required?

Yes        No X



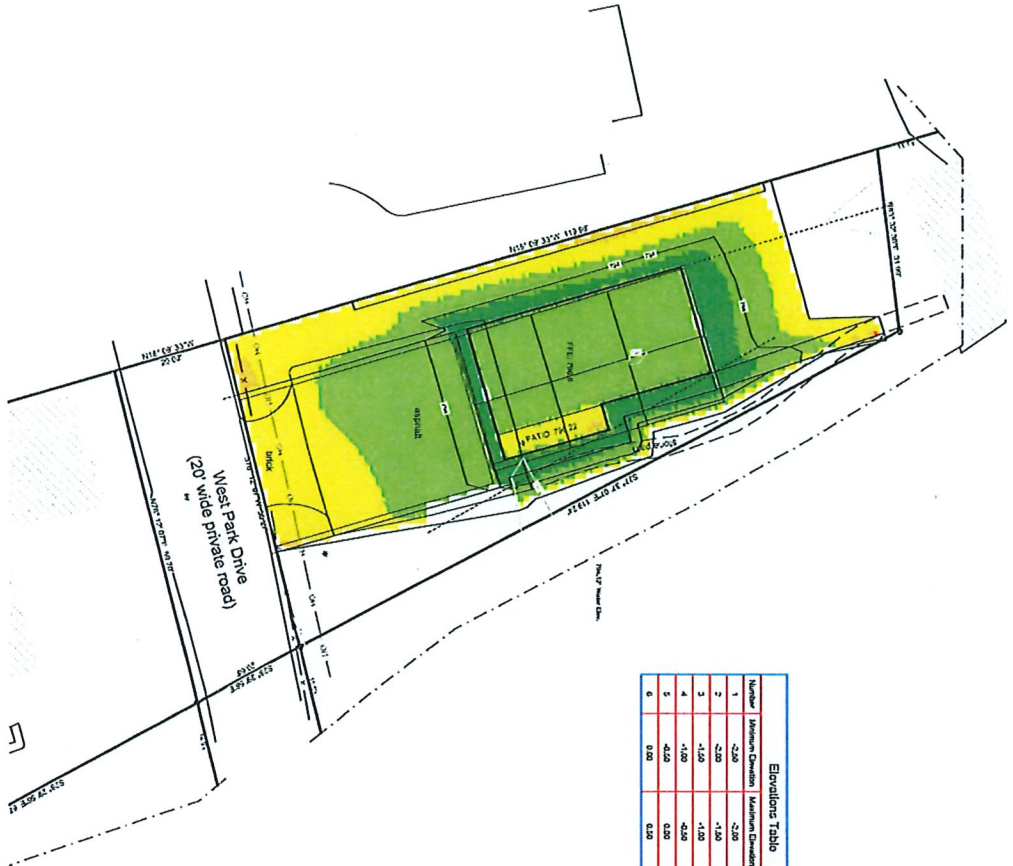
| Volume Summary   |      |            |             |                   |               |
|------------------|------|------------|-------------|-------------------|---------------|
| Name             | Type | Cut Factor | Fill Factor | 2d Area (Sq. Ft.) | Net (Cu. Yd.) |
| EX SUB VS PR SUB | fill | 1.000      | 1.000       | 3756.00           | 55.11         |
| Totals           |      |            |             | 3756.00           | 55.11         |

| Totals            |               |                |               |
|-------------------|---------------|----------------|---------------|
| 2d Area (Sq. Ft.) | Cut (Cu. Yd.) | Fill (Cu. Yd.) | Net (Cu. Yd.) |
| 3756.00           | 55.11         | 3.65           | 51.48<Cut>    |

\* Value adjusted by cut or fill factor other than 1.0

ASSUMPTIONS  
EXISTING TOPSOIL 8"  
PROPOSED TOPSOIL 18"  
PROPOSED SIDEWALK 12"  
PROPOSED POROUS PAVEMENT 22.5"  
PROPOSED BUILDING FLOOR SECTION 36"  
PROPOSED 9-10" HOLD DOWN ON BUILDING  
\* numbers do not account for topsoil import or haul off

| Elevations Table |                   |                   |         |            |            |
|------------------|-------------------|-------------------|---------|------------|------------|
| Number           | Minimum Elevation | Maximum Elevation | Area    | Color      | Color      |
| 1                | -2.00             | -2.00             | 6.31    | Red        | Red        |
| 2                | -2.00             | -1.50             | 6.15    | Yellow     | Yellow     |
| 3                | -1.50             | -1.00             | 19.30   | Green      | Green      |
| 4                | -1.00             | -0.50             | 71.60   | Blue       | Blue       |
| 5                | -0.50             | 0.00              | 1772.18 | Light Blue | Light Blue |
| 6                | 0.00              | 0.50              | 108.47  | Dark Blue  | Dark Blue  |



SIGMA GROUP  
1200 West Grand Street  
Twin Lakes, WI 53181  
Tel: 414-233-0718

Twin Lakes Residential Development  
301 W Park Dr  
Twin Lakes, WI 53181

SUBSURFACE EARTHWORK EXHIBIT

DATE: \_\_\_\_\_

NO. REVISION: \_\_\_\_\_

DATE: \_\_\_\_\_

PROJECT NO: 2201

DESIGN DATE: 11/18/22

DESIGNED BY: JAC

CHECKED BY: JAC

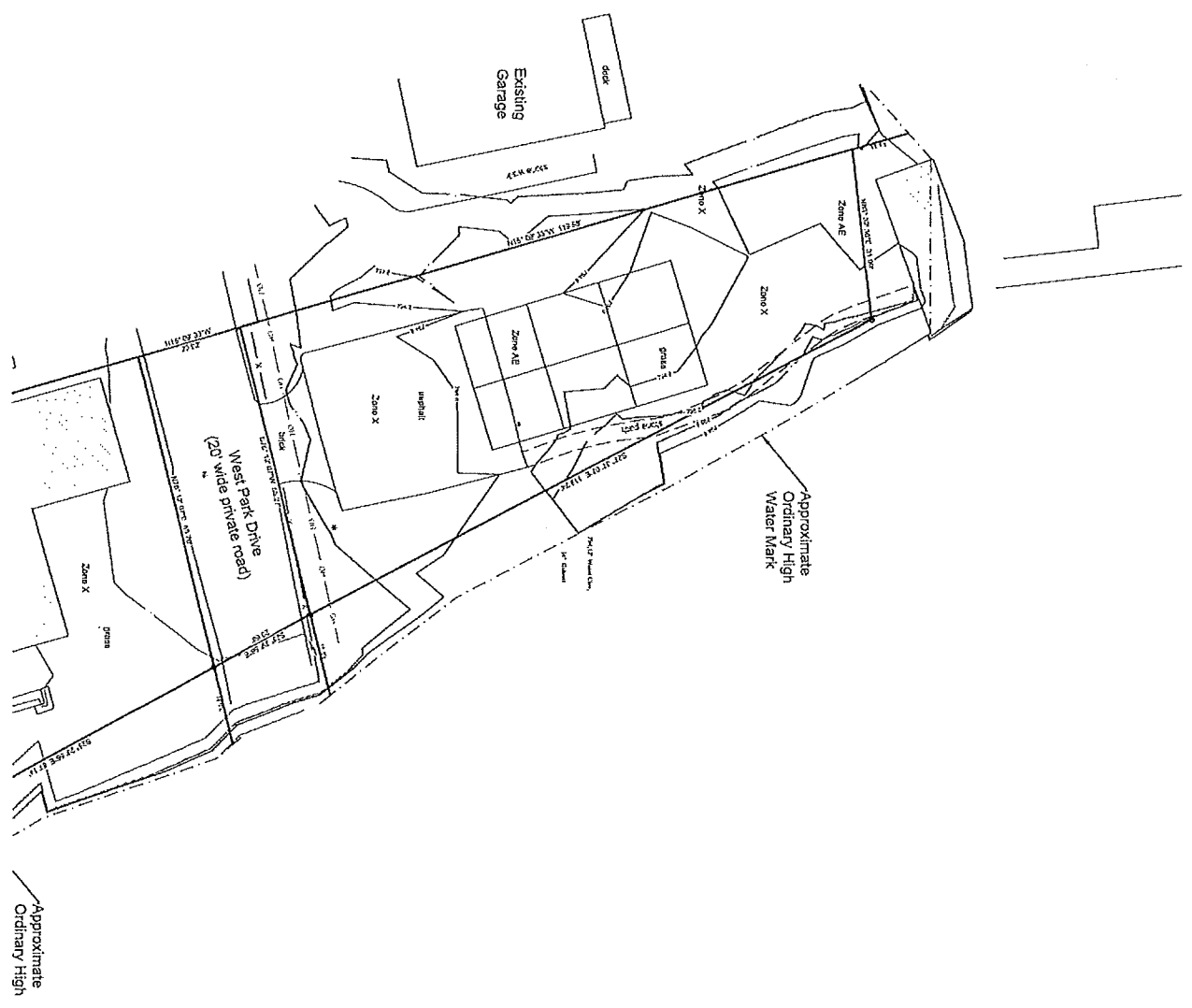
APPROVED BY: JAC

SHEET NO: EX

**ALL SIGMA GROUP**  
1000 W. PARK DR  
TWIN LAKES, WI 53181  
PHONE: 414-244-2420  
FAX: 414-244-2420

**THE SIGMA GROUP**  
1000 W. PARK DR  
TWIN LAKES, WI 53181  
PHONE: 414-244-2420  
FAX: 414-244-2420

**THE SIGMA GROUP**  
1000 W. PARK DR  
TWIN LAKES, WI 53181  
PHONE: 414-244-2420  
FAX: 414-244-2420



- LEGEND**
- PROPERTY LINE
  - EXISTING GARAGE
  - APPROXIMATE ORDINARY HIGH WATER MARK
  - WEST PARK DRIVE (20' WIDE PRIVATE ROAD)
  - ZONE X
  - ZONE AE
  - EXISTING GARAGE
  - APPROXIMATE ORDINARY HIGH WATER MARK
  - WEST PARK DRIVE (20' WIDE PRIVATE ROAD)
  - ZONE X
  - ZONE AE
- GENERAL NOTES:**
1. THE UNDEVELOPED AREA IS TO BE USED FOR THE DEVELOPMENT OF THE PROJECT.
  2. THE UNDEVELOPED AREA IS TO BE USED FOR THE DEVELOPMENT OF THE PROJECT.
  3. THE UNDEVELOPED AREA IS TO BE USED FOR THE DEVELOPMENT OF THE PROJECT.
  4. THE UNDEVELOPED AREA IS TO BE USED FOR THE DEVELOPMENT OF THE PROJECT.
  5. THE UNDEVELOPED AREA IS TO BE USED FOR THE DEVELOPMENT OF THE PROJECT.
  6. THE UNDEVELOPED AREA IS TO BE USED FOR THE DEVELOPMENT OF THE PROJECT.

**SIGMA GROUP**  
1000 W. PARK DR  
TWIN LAKES, WI 53181  
PHONE: 414-244-2420  
FAX: 414-244-2420

**TWIN LAKES RESIDENTIAL DEVELOPMENT**  
301 W PARK DR  
TWIN LAKES, WI 53181

**SITE SURVEY**

**PRELIMINARY  
NOT FOR  
CONSTRUCTION**

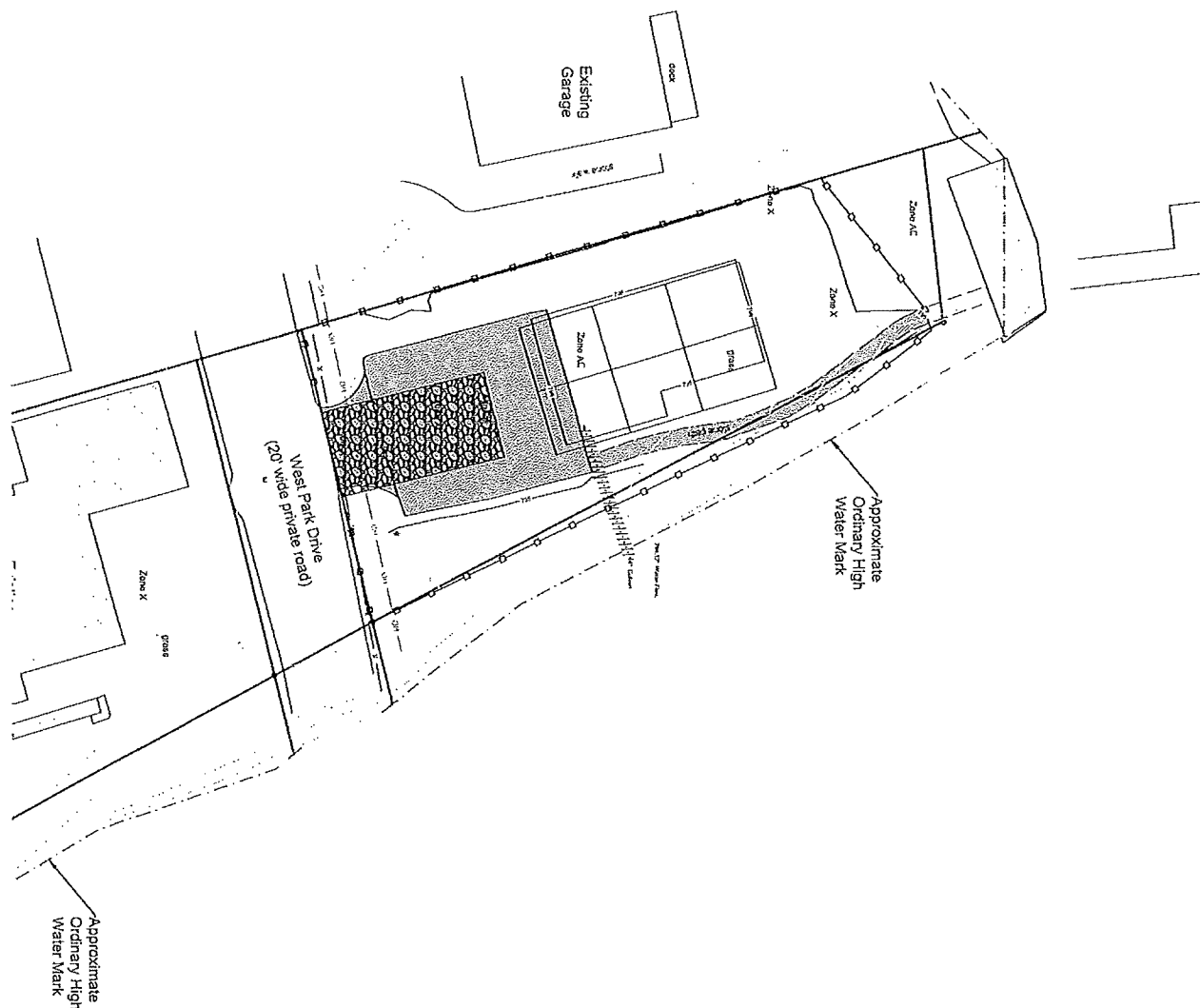
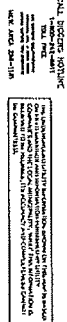
**GRAPHIC SCALE**

0 10 20 30 40 50 60 70 80 90 100









**DATE**  
PROJECT NO.  
DESIGN DATE  
FLAT DATE  
DRAWN BY  
CHECKED BY  
APPROVED BY  
DIRECTOR

**C001**





- [illegible]

- LEGEND:**
- |   |                       |
|---|-----------------------|
|  | PROPOSED UTILITY POLE |
|  | PROPOSED TRACTION PAD |
|  | EXISTING CONDUIT      |
|  | PROPOSED CONDUIT      |
|  | UTILITY REMOVAL       |
|  | CLEAR REMOVAL         |
|  | STRUCTURE REMOVAL     |
|  | PAVED AREA REMOVAL    |

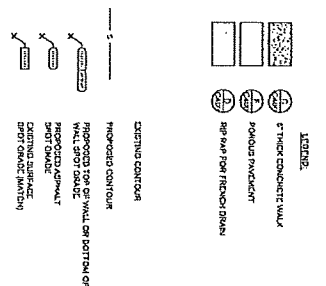
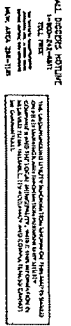
PRELIMINARY  
NOT FOR  
CONSTRUCTION

301 W PARK DR  
TWIN LAKES, WI 53181

## EROSION CONTROL PLAN

**THESIGMA**  
CROU  
Sigma Research Group, Inc.  
www.thesigmagroup.com  
1300 West Canal Street  
Millville, VT 55323  
Phone: 414-643-4380  
Fax: 414-643-4310

C0002



**THE SIGMA GROUP**  
 Design Services, Asset Services  
 www.thesignagroup.com  
 1300 West Canal Street  
 Milwaukee, WI 53233  
 Phone: 414-463-4200  
 Fax: 414-463-2710

TWIN LAKES RESIDENTIAL DEVELOPMENT  
301 W PARK DR  
TWIN LAKES, WI 53181

## GRADING PLAN

PRELIMINARY  
NOT FOR  
CONSTRUCTION

|             |            |
|-------------|------------|
| SCALE       | 1"=10'     |
| PROJECT NO. | 21031      |
| DESIGN DATE | —          |
| PLOT DATE   | 12/16/2002 |
| DRAWN BY    | —          |
| CHECKED BY  | —          |
| APPROVED BY | —          |
| CMT NO.     |            |

**C200**





# VILLAGE OF TWIN LAKES


## POLICE DEPARTMENT

920 Lance Drive • P.O. Box 549 • Twin Lakes, Wisconsin 53181  
Phone (262) 877-9056 • Fax (262) 877-2699



January 23, 2023

To: Administrator Laura Roesslein

From: Chief Adam Grosz 

Re: Intergovernmental Agreement

Laura,

I am requesting that the Village of Twin Lakes enter into the attached Intergovernmental Agreement. This agreement allows law enforcement to transport persons who are in police custody and in need of emergency mental health evaluation to Lake Behavioral Hospital located in Waukegan, Illinois.

Currently, Kenosha County Law enforcement agencies, including Twin Lakes PD, can only utilize mental health treatment facilities located in Wisconsin for in-custody mental health evaluations. There are only a small number of treatment facilities in Wisconsin that accept patients for mental health evaluation. Generally, officers must transport patients to the Winnebago Mental Health Facility near Oshkosh, WI whenever these services are necessary. This is approximately a five to six hour round trip drive, which takes critical resources out of our Village. Transporting people who are in mental health crisis 2.5 hours is cost prohibitive, inconvenient, and dangerous for both the person in crisis and our officers. This is not only a problem for our agency, as this has been a controversial issue for a number of years in our state.

Kenosha County Health and Human Services has worked tirelessly to resolve this issue as it is not only burdensome to law enforcement, but on all public health services and families who's loved one are being transported hours away for mental health assistance.

The attached Intergovernmental Agreement is a tremendous step in the right direction as it allows law enforcement to transport persons in need of mental health evaluation across state lines to Illinois where there are more resources available. This will saves many miles of transport, saves money, and keeps patients closer to their homes. The Wisconsin Department of Justice, the State of Illinois, and most of the agencies under the agreement have already vetted and approved this agreement. The last step in this process is for the individual law enforcement agencies in Kenosha County to approve this agreement through resolution in each jurisdiction.

I would ask that this agreement be placed on the February 5<sup>th</sup> COW, and again for approval at the February 20<sup>th</sup> RBM. I will not be available on Feb. 5<sup>th</sup> as I am away at training that day. However, I will attend the Feb 20<sup>th</sup> meeting and can answer any questions in regards to this agreement prior to or on that date.

Thank you

**INTERGOVERNMENTAL MUTUAL AID AGREEMENT  
REGARDING THE TRANSPORTATION OF DETAINEES BY WISCONSIN LAW  
ENFORCEMENT AGENCIES FROM WISCONSIN TO THE LAKE BEHAVIORAL  
HOSPITAL IN ILLINOIS**

The Intergovernmental Cooperation aspects of this Agreement are made by and between:

- the City of Waukegan, an Illinois home rule municipal corporation;
- the County of Lake, an Illinois county;
- the Village of Winthrop Harbor, an Illinois municipal corporation;
- the City of Zion, an Illinois municipal corporation;
- the Village of Gurnee, an Illinois municipal corporation;
- Kenosha County, a Wisconsin county;
- the City of Kenosha, a Wisconsin municipality;
- the University of Wisconsin-Parkside,
- the Village of Twin Lakes, a Wisconsin municipality; and
- the Village of Pleasant Prairie, a Wisconsin municipality,

the Mutual Aid aspects of this Agreement are made by and between:

- the City of Waukegan Police Department,
- the Lake County Sheriff's Department,
- the Winthrop Harbor Police Department,
- the Zion Police Department, and
- the Gurnee Police Department,
- the Kenosha Sheriff's Department
- the City of Kenosha Police Department
- the Village of Pleasant Prairie
- the Village of Twin Lakes
- the Village of Twin Lakes Police Department, and
- the University of Wisconsin Parkside Police Department;

(individually, a ***"Party"***, and collectively, the ***"Parties"***) pursuant to Wisconsin Statute § 175.46, and Wisconsin Statutes § §66.0301, 66.0303, and § 51.75 (11); and the Illinois Intergovernmental Cooperation Act, 5 ILCS 220/1 *et seq.* (***"Illinois Intergovernmental Cooperation Act"***).

**WHEREAS**, pursuant to Wis. Stat. § 175.46 (2)(b), a Wisconsin law enforcement agency may enter into a mutual aid agreement with a law enforcement agency from a physically adjacent state authorizing Wisconsin law enforcement officers of the Wisconsin law enforcement agency to act with some or all of the arrest and other police authority of a law enforcement officer of the law enforcement agency of the physically adjacent state while within that agency's territorial jurisdiction and within a border county. See also, Constitution of the State of Illinois (Ill. Const. Art. VII, § 10), the Illinois Intergovernmental Cooperation Act, Interstate Mutual Emergency Aid

Act (5 ILCS 235), the Local Governmental and Governmental Employees Tort Immunity Act (745 ILCS 10/7- 101 et seq.) and the Illinois Municipal Code (65 ILCS 5/11-1-2.1); and

**WHEREAS**, Kenosha County, Wisconsin ("***Kenosha County***") is recognized as a "border county" of a "physically adjacent state" as defined by Wisconsin Statute § 175.46(1)(a) and (d) and the Kenosha Sheriff's Department, the City of Kenosha Police Department, the University of Wisconsin-Parkside Police Department, the Village of Twin Lakes Police Department and the Village of Pleasant Prairie Police Department are "law enforcement agencies" as defined by Wisconsin Statute § 175.46 and Illinois Statute § 50 ILCS 705/2 (collectively with Kenosha County, the "***Wisconsin Law Enforcement Agencies***"); and

**WHEREAS**, the City of Waukegan Police Department, Lake County Sheriff's Department, Winthrop Harbor Police Department, the Zion Police Department, and the Gurnee Police Department, are "law enforcement agencies of a physically adjacent state" as defined by Wisconsin Statute § 175.46 and the Illinois Law Enforcement Training Act, 50 ILCS 705/2 (collectively, the "***Illinois Law Enforcement Agencies***") (collectively, the Wisconsin Law Enforcement Agencies and the Illinois Law Enforcement Agencies are the "***Law Enforcement Agencies***"); and

**WHEREAS**, the Law Enforcement Agencies are "public agencies" as defined by the Illinois Local Government Cooperation Act; and

**WHEREAS**, Kenosha County has entered into a contractual relationship with Lake Behavioral Hospital, located in Waukegan, Illinois, to provide mental health care and treatment to its residents pursuant to Chapter 51 of the Wisconsin Statutes; and

**WHEREAS**, in the absence of this Agreement, the ability of the Wisconsin Law Enforcement Agencies to transport and provide involuntary mental health care and treatment to its residents at Lake Behavioral Hospital is limited and hampered by jurisdictional limitations inherent in the separate sovereignty of the State of Wisconsin and the State of Illinois; and

**WHEREAS**, the intent of this Agreement is to set forth the terms and conditions of a mutual aid agreement between the Law Enforcement Agencies to support and assist each other and their respective roles regarding the transport of persons for involuntary mental health commitments from Kenosha County to Lake Behavioral Hospital in Illinois for treatment;

**NOW, THEREFORE**, as authorized in Wisconsin Statute § 175.46, Illinois Statute 5 ILCS 235/10 and the Illinois Intergovernmental Cooperation Act, the Law Enforcement Agencies, agree to provide mutual aid and assistance subject to, and in accordance with, the understandings, commitments, terms and conditions for said aid and assistance as specified in this Agreement as follows:

1. **RECITALS.** The above recitals are incorporated into and made a part of this Agreement as if fully stated in the Agreement.

2. **PURPOSE.** The purpose of this Agreement is to establish the jurisdictional authority and operational guidelines for the Law Enforcement Agencies sufficient to permit the Wisconsin Law Enforcement Agencies to transport individuals from Wisconsin to Lake Behavioral Hospital in Illinois for mental health services.

3. **POWERS AND AUTHORITY GRANTED.**

A. The Illinois Law Enforcement Agencies will act in cooperation with the Wisconsin Law Enforcement Agencies regarding the transportation, detention and transition to treatment of individuals by the Wisconsin Law Enforcement Agencies from Wisconsin to Illinois for patient services regarding involuntary commitments under Wisconsin Chapter 51.

B. The Illinois Law Enforcement Agencies authorize the law enforcement officers of the Wisconsin Law Enforcement Agencies to act with all of the arrest or other police authority of the law enforcement officers with the Illinois Law Enforcement Agencies for the purpose of and during the actual transport of, individuals from Wisconsin to and from Lake Behavioral Hospital for mental health treatment pursuant to Chapter 51 of the Wisconsin Statutes.

C. It is understood and agreed that the Wisconsin Law Enforcement Agencies that take an individual into custody in Wisconsin for purposes of an involuntary commitment under Chapter 51 detention will be responsible for that individual from the time of detainment until custody is transferred to Lake Behavioral Hospital in Waukegan, Illinois. See Wis. Stat. § 51.15 (3). Further, if the individual is in a hospital's emergency department, the Wisconsin Law Enforcement Officer may not transport until a hospital employee or medical staff member treating the individual determines that the transfer is medically appropriate. See Wis. Stat. § 51.15(2)(c). Medical clearance will occur prior to the transport to a psychiatric unit in all cases.

4. **NOTIFICATION.** Wisconsin Law Enforcement Agencies will notify Lake Behavioral Hospital upon commencement of transporting individuals from Wisconsin to and from Lake Behavioral Hospital.

5. **LIMITATIONS.** This Agreement is for the purpose of transport and mental health treatment only and any illegal act occurring outside the jurisdiction of the Wisconsin Law Enforcement Agencies is wholly separate from this Agreement. Jurisdiction and applicable law for any such illegal act will lie with the appropriate authority dependent on those facts.

6. **EMPLOYMENT.** All officers acting under this Agreement will remain and be considered to be employees of their respective Law Enforcement Agencies. A Wisconsin law enforcement officer employed by a Wisconsin Law Enforcement Agencies who is acting within the territory of the Illinois Law Enforcement Agencies pursuant to this Agreement, is considered while so acting to be in the ordinary course of his or her employment with his or her employing Wisconsin law enforcement agency. See Wis. Stat. § 175.46 (2).

7. **POLICIES.** Each Law Enforcement Agency shall follow their own policies and protocols with regard to transportation, detention, and transition of individuals to treatment.



8. **BENEFITS.** Any law enforcement officer from the Wisconsin Law Enforcement Agencies, acting under this Agreement for the purposes of transporting individuals for involuntary commitments under Wisconsin Chapter 51 to Lake Behavioral Hospital, shall continue to be covered by their employing agency for purposes of Worker's Compensation, unemployment insurance, benefits under Chapter 40 of the Wisconsin Statutes and civil liability, including but not limited to the defense and indemnification of employees established by the statutes, law and policies and procedures of the officer's employing agency. See Wis. Stat. § 175.46 (5)(a).

9. **IMMUNITIES.** To the extent permitted by Wisconsin and Illinois law, any Wisconsin law enforcement officer, acting under this Agreement, for the purposes of transport for involuntary commitments under Wisconsin Chapter 51 to Lake Behavioral Hospital, is immune from liability or protected by limits on liability and damages to the same extent as any police officer of the other agency and as provided for by the statutes and laws of Wisconsin and Illinois. See Wis. Stat. §175.46(5)(b), and all other applicable Wisconsin statutory immunities and limitations.

10. **INSURANCE.** Each Party shall procure and maintain, at its sole and exclusive expense, insurance coverage, including comprehensive liability, personal injury, property damage and worker's compensation covering its own employees. Proof of insurance shall be promptly provided upon request of any Party.

11. **LIABILITY.** Each Party shall be responsible for the consequences of its own acts, errors, or omissions and those of its employees, officers, officials, agents, boards, committees, commissions, agencies, and representatives and shall be responsible for any losses, claims, and liabilities which are attributable to such acts, errors, or omissions including providing its own defense. In situations involving joint liability, each Party shall be responsible for the consequences of its own acts, errors, or omissions and those of its employees, officers, officials, agents, boards, commissions, committees, agencies, and representatives. It is not the intent of the Parties to waive any statutory protections available to any Party or impose liability beyond that imposed by state statutes or common law. Nothing contained within this paragraph or agreement is intended to be a waiver or estoppel of the municipality or its insurer to rely upon the limitations, defenses, and immunities contained within Wisconsin law, including but not limited to those contained with Wisconsin Statutes 893.80, 895.52, and 345.05, and referenced in Wisconsin Statutes Section 175.46(5)(b) or the Illinois Tort Immunity Act, 745 ILCS 10/2-101. To the extent that indemnification is available and enforceable, the municipality or its insurer shall not be liable in indemnity or contribution for an amount greater than the limits of liability for municipal claims established by Wisconsin law.

12. **TERM AND TERMINATION.** This Agreement shall become effective when executed by all of the Parties and will remain in force and effect for a one-year term, which term shall automatically renew for additional one-year renewal terms. Any of the Law Enforcement Agencies can terminate its participation in this Agreement by providing the other participating Law Enforcement Agencies with thirty (30) day written notice of the party's intent to withdraw from the Agreement. The notice shall state the effective date of the withdrawal and shall be mailed to the participating Law Enforcement Agencies at least 30 days prior to the date of withdrawal.

Written notice of withdrawal must be signed by an authorized representative of the respective agency and should be forwarded to the Chief of Police or Sheriffs of all participating Law Enforcement Agencies. Upon receipt of such notice, the remaining Law Enforcement Agencies shall amend this Agreement to remove the Law Enforcement Agency that withdrew from participation.

13. **MODIFICATIONS.** Any alterations, variations, modifications, or waivers of any provision of this Agreement shall be valid only when they have been reduced to writing and signed by authorized representatives of each of the Parties.

14. **SEVERABILITY.** If any provision, covenant, agreement or portion of this Agreement or its application to any person, entity or property is held invalid, such invalidity shall not affect the application or validity of any other provisions, covenants or portions of this Agreement and to that end all provisions, covenants or portions of this Agreement are declared to be severable.

15. **COUNTERPARTS.** This Agreement may be executed in several counterparts, each of which shall be an original and all of which shall constitute but one and the same agreement.

16. **REVIEW OF AGREEMENT.** Pursuant to Wis. Stat. §§ 175.46 and 66.0303(3)(a), this Agreement shall be submitted to the Wisconsin Department of Justice for review and comment at least 30 days prior to the implementation of this Agreement.

This Agreement is approved and executed by:

Signed by: \_\_\_\_\_

Dated: \_\_\_\_\_

Printed: \_\_\_\_\_  
*City of Waukegan*

Signed by: \_\_\_\_\_

Dated: \_\_\_\_\_

Printed: \_\_\_\_\_  
*Waukegan Police Department*

Signed by: \_\_\_\_\_

Dated: \_\_\_\_\_

Printed: \_\_\_\_\_  
*Lake County*

Signed by: \_\_\_\_\_

Dated: \_\_\_\_\_

Printed: \_\_\_\_\_  
*Lake County Sheriff's Department*

Signed by: \_\_\_\_\_

Dated: \_\_\_\_\_

Printed: \_\_\_\_\_  
*Village of Winthrop Harbor*

Signed by: \_\_\_\_\_

Dated: \_\_\_\_\_

Printed: \_\_\_\_\_  
*Winthrop Harbor Police Department*

Signed by: \_\_\_\_\_

Dated: \_\_\_\_\_

Printed: \_\_\_\_\_  
*City of Zion*

Signed by: \_\_\_\_\_

Dated: \_\_\_\_\_

Printed: \_\_\_\_\_  
*Zion Police Department*

Signed by: \_\_\_\_\_

Dated: \_\_\_\_\_

Printed: \_\_\_\_\_  
*Village of Gurnee*

Signed by: \_\_\_\_\_

Dated: \_\_\_\_\_

Printed: \_\_\_\_\_  
*Gurnee Police Department*

Signed by: \_\_\_\_\_

Dated: \_\_\_\_\_

Printed: \_\_\_\_\_  
*City of Kenosha*

Signed by: \_\_\_\_\_

Dated: \_\_\_\_\_

Printed: \_\_\_\_\_  
*City of Kenosha Police Department*

Signed by: \_\_\_\_\_

Dated: \_\_\_\_\_

Printed: \_\_\_\_\_  
*Kenosha County*

Signed by: \_\_\_\_\_

Dated: \_\_\_\_\_

Printed: \_\_\_\_\_  
*Kenosha Sheriff's Department*

Signed by: \_\_\_\_\_

Dated: \_\_\_\_\_

Printed: \_\_\_\_\_  
*Village of Pleasant Prairie*

Signed by: \_\_\_\_\_

Dated: \_\_\_\_\_

Printed: \_\_\_\_\_  
*Village of Pleasant Prairie Police Department*

Signed by: \_\_\_\_\_

Dated: \_\_\_\_\_

Printed: \_\_\_\_\_  
*Village of Twin Lakes*

Signed by: \_\_\_\_\_

Dated: \_\_\_\_\_

Printed: \_\_\_\_\_  
*Village of Twin Lakes Police Department*

Signed by: \_\_\_\_\_

Dated: \_\_\_\_\_

Printed: \_\_\_\_\_

*University of Wisconsin Parkside*

Signed by: \_\_\_\_\_

Dated: \_\_\_\_\_

Printed: \_\_\_\_\_

*University of Wisconsin Parkside Police Department*

5.) F.) 1.

State of Wisconsin  
 Department of Natural Resources  
 Bureau of Community Financial Assistance  
 101 S. Webster St., Box 7921  
 Madison, WI 53707-7921  
 (608) 266-7555 Fax No. (608) 267-0496  
 dnr.wi.gov  
 DNRCFELDisbursements@Wisconsin.gov

**SUMMARY**  
**Requests for Disbursement for**  
**Financial Assistance Programs**  
 Based on Form 8700-215 (R 12/19)

☒ Clean Water Fund Program ☐ Safe Drinking Water Loan Program

|   |                                    |                   |                           |
|---|------------------------------------|-------------------|---------------------------|
| 1. Municipality<br><b>Village of Twin Lakes</b> | 2. Project Number<br><b>4675-5</b> | 3. Request Number | 4. Date of Latest Request |
|---|------------------------------------|-------------------|---------------------------|

| Disbursement worksheet must be completed and invoices must be attached for all costs. | Claimed to Date        | Budget                 | Remaining           |
|---|------------------------|------------------------|---------------------|
| 8. Force Account  | \$0.00                 | \$0.00                 | \$0.00              |
| 9. Interim Financing  | \$0.00                 | \$0.00                 | \$0.00              |
| 10. Preliminary Design/Engineering  | \$0.00                 | \$0.00                 | \$0.00              |
| 11. Land or Easement Acquisition  | \$0.00                 | \$0.00                 | \$0.00              |
| 12. Engineering/Construction Management   | \$489,697.10           | \$816,000.00           | \$326,302.90        |
| 13. Construction/Equipment  | \$9,727,317.07         | \$9,635,850.00         | -\$91,467.07        |
| 14. Miscellaneous Costs   | \$0.00                 | \$0.00                 | \$0.00              |
| 15. EIF Closing Costs   | \$0.00                 | \$23,000.00            | \$23,000.00         |
| Contingency   | \$0.00                 | \$481,793.00           | \$481,793.00        |
| <b>16. Total Requested</b>  | <b>\$10,217,014.17</b> | <b>\$10,956,643.00</b> | <b>\$739,628.83</b> |

☐ Clean Water Fund Program

☐ Safe Drinking Water Loan Program

| 1. Municipality  |                    |                   |               |                   |                                |                              |                                     |                        |             |               |             |
|--|--------------------|-------------------|---------------|-------------------|--------------------------------|------------------------------|-------------------------------------|------------------------|-------------|---------------|-------------|
| Village of Twin Lakes  |                    |                   |               |                   |                                |                              |                                     |                        |             |               |             |
| 2. Project Number  |                    | 3. Request Number |               |                   |                                |                              |                                     |                        |             |               |             |
| 4675-5   |                    |                   |               |                   |                                |                              |                                     |                        |             |               |             |
| 7. Budget Categories (Requesting EIF funds for incurred eligible costs.) |                    |                   |               |                   |                                |                              |                                     |                        |             |               |             |
| 4. Date of Invoice   | 5. Payee           | 6. Amount         | Force Account | Interim Financing | Preliminary Design/Engineering | Land or Easement Acquisition | Engineering/Construction Management | Construction/Equipment | Misc. Costs | Closing Costs | Contingency |
|  | Loan Request #1    | \$113,533.95      | \$0.00        | \$0.00            | \$0.00                         | \$0.00                       | \$0.00                              | \$113,533.95           | \$0.00      | \$0.00        | \$0.00      |
|  | Loan Request #2    | \$414,760.86      | \$0.00        | \$0.00            | \$0.00                         | \$0.00                       | \$0.00                              | \$414,760.86           | \$0.00      | \$0.00        | \$0.00      |
|  | Loan Request #3    | \$0.00            | \$0.00        | \$0.00            | \$0.00                         | \$0.00                       | \$0.00                              | \$0.00                 | \$0.00      | \$0.00        | \$0.00      |
|  | Loan Request #4    | \$750,154.03      | \$0.00        | \$0.00            | \$0.00                         | \$0.00                       | \$94,108.75                         | \$656,045.28           | \$0.00      | \$0.00        | \$0.00      |
|  | Loan Request #5    | \$642,141.09      | \$0.00        | \$0.00            | \$0.00                         | \$0.00                       | \$31,824.15                         | \$610,316.94           | \$0.00      | \$0.00        | \$0.00      |
|  | Loan Request #5(2) | \$591,155.53      | \$0.00        | \$0.00            | \$0.00                         | \$0.00                       | \$22,598.70                         | \$568,556.83           | \$0.00      | \$0.00        | \$0.00      |
|  | Loan Request #6    | \$358,739.35      | \$0.00        | \$0.00            | \$0.00                         | \$0.00                       | \$20,967.70                         | \$337,771.65           | \$0.00      | \$0.00        | \$0.00      |
|  | Loan Request #7    | \$405,064.17      | \$0.00        | \$0.00            | \$0.00                         | \$0.00                       | \$25,079.50                         | \$379,984.67           | \$0.00      | \$0.00        | \$0.00      |
|  | Loan Request #8    | \$731,967.86      | \$0.00        | \$0.00            | \$0.00                         | \$0.00                       | \$30,673.95                         | \$701,293.91           | \$0.00      | \$0.00        | \$0.00      |
|  | Loan Request #9    | \$844,208.12      | \$0.00        | \$0.00            | \$0.00                         | \$0.00                       | \$26,777.75                         | \$817,430.37           | \$0.00      | \$0.00        | \$0.00      |
|  | Loan Request #10   | \$758,907.11      | \$0.00        | \$0.00            | \$0.00                         | \$0.00                       | \$25,449.00                         | \$733,458.11           | \$0.00      | \$0.00        | \$0.00      |
|  | Loan Request #11   | \$683,042.91      | \$0.00        | \$0.00            | \$0.00                         | \$0.00                       | \$15,589.00                         | \$667,453.91           | \$0.00      | \$0.00        | \$0.00      |
|  | Loan Request #12   | \$826,010.29      | \$0.00        | \$0.00            | \$0.00                         | \$0.00                       | \$19,879.65                         | \$806,130.64           | \$0.00      | \$0.00        | \$0.00      |
|  | Loan Request #13   | \$580,333.54      | \$0.00        | \$0.00            | \$0.00                         | \$0.00                       | \$29,329.75                         | \$551,003.79           | \$0.00      | \$0.00        | \$0.00      |
|  | Loan Request #14   | \$897,663.56      | \$0.00        | \$0.00            | \$0.00                         | \$0.00                       | \$24,358.95                         | \$873,304.61           | \$0.00      | \$0.00        | \$0.00      |
|  | Loan Request #15   | \$575,545.66      | \$0.00        | \$0.00            | \$0.00                         | \$0.00                       | \$38,366.10                         | \$537,180.56           | \$0.00      | \$0.00        | \$0.00      |
|  | Loan Request #16   | \$721,180.34      | \$0.00        | \$0.00            | \$0.00                         | \$0.00                       | \$26,609.60                         | \$694,570.74           | \$0.00      | \$0.00        | \$0.00      |
|  | Loan Request #17   | \$322,604.80      | \$0.00        | \$0.00            | \$0.00                         | \$0.00                       | \$58,084.55                         | \$264,520.25           | \$0.00      | \$0.00        | \$0.00      |
|  |                    | \$0.00            |               |                   |                                |                              |                                     |                        |             |               |             |
|  |                    | \$0.00            |               |                   |                                |                              |                                     |                        |             |               |             |
|  |                    | \$0.00            |               |                   |                                |                              |                                     |                        |             |               |             |
|  | Totals             | \$10,217,014.17   | \$0.00        | \$0.00            | \$0.00                         | \$0.00                       | \$489,697.10                        | \$9,727,317.07         | \$0.00      | \$0.00        | \$0.00      |



5.6.1.



## VILLAGE OF TWIN LAKES EVENT PERMIT APPLICATION

Please fill in all sections completely. Incomplete applications  
will be rejected. Applications must be submitted  
AT LEAST 4 WEEKS prior to the proposed event date for approval.

### Section I- APPLICANT INFORMATION

Name of Applicant Susan Richey

Name of Event Organizer/Producer H2O Adaptive Sports, inc.

Production Company/Organization \_\_\_\_\_ FEIN # 84-3008480

Street Address 1850 watercolor place

Grayslake

City \_\_\_\_\_ State IL Zip code 60030

E-mail Address h2oadaptivesports@gmail.com

Daytime Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

☐ For-Profit or ☒ Non-Profit Organization 501(c) \_\_\_\_\_ EIN # (Tax Exempt Number) \_\_\_\_\_

\*All non-profits must present a copy of their current Tax ID - EIN#

### Section II- EVENT INFORMATION- Check the proper category

All applications are required to submit a detailed Site Plan/Map. Site Plan/Maps must include location, any street closures, barricades, parade routes, stages, alcohol sale location, tents, etc.

Title of Event H2O adaptive sports water ski basic skills clinic

Date(s) of Event Monday 6-12-23;6-19/23;7-10-23;Thursday 7-27-23; Monday 8-7-2023

Location(s) of Event Lance park showsite

Start Time for Event 8:00 am a.m./p.m. End Time for Event 4:00 pm a.m./p.m.

Event Chair/Contact Person Susan Richey Phone \_\_\_\_\_

Day of Event Contact Name Susan Richey Phone \_\_\_\_\_

Is the event open to the public? ☐ Yes ☒ No

Will you charge an admission fee? ☐ Yes ☒ No

Estimated Attendance Number 20-40 per day/event

Description of Event  
We will provide specialized water ski instruction for people with disabilities with our adaptive water ski equipment.

\_\_\_\_\_  
\_\_\_\_\_

**PERMIT REQUESTED**

☐ **Parade Permit - No Charge**

☐ **Block Parties:** Small event limited to one street with 4 barricades in a neighborhood. Public Works will provide barricades the business day prior to your event and pick them up on the first business day following the event. It is your responsibility to set up and take down the barricades before and after your event. Main streets that are thoroughfares may not be approved due to safety issues. Residential block parties are not to last more than 6 hours between 9:00 am and 10:00 pm. Sale of alcohol is PROHIBITED at a private block party in a residential area. All consumption must be within the designated area and within the barricades. Public drinking citations will be issued outside of designated area. As a courtesy, please discuss plans with your neighbors prior to the event.

☐ **Park Reservation:** All users of the parks must check in at the Police Department in person or by phone (262-877-9056) on the day of the scheduled event prior to and after use of the facility to insure refund of security deposit. A key is available at the Police Department for entry to the Scout House and for use of electric at Millennium Park. The key must be returned to the Police Department immediately after the event. Prior to leaving, the electric and/or doors need to be locked and all garbage disposed of in outside cans or totes.

**Select Park:**    ☒ **Lance Park and Amphitheater**    ☒ **Scout House**    ☐ **Central Park**  
                         ☐ **West Side Park**    ☐ **Millennium Park Pavilion**

Describe Restroom facilities available to all participants \_\_\_\_\_

Will you be setting up a tent?    ☐ Yes    ☒ No    \*A Fire Inspection is required per NFPA Code 25.2\*  
*If yes, list the location, size, Rental Company, and proof of completion of locates.*

Will there be any animals?    ☐ Yes    ☒ No  
*If yes, what type and how many* \_\_\_\_\_

Will there be live performances, loud speakers or a DJ?    ☐ Yes    ☒ No  
*If yes, what type and hours* \_\_\_\_\_

Description of plan for handling refuse collection and after-event clean-up  
We will take care of any clean up.

Description of plan for providing event security (if applicable)  
\_\_\_\_\_  
\_\_\_\_\_

Will there be fireworks or pyrotechnics at your event?    ☐ Yes    ☒ No  
*If yes, please attach a fireworks display permit or application.*

Will your event include the sale of beer and/or wine?    ☐ Yes    ☒ No  
*If yes, please attach a completed Temporary Alcohol License & Temporary Operator License Application or provide Proof of Operator's License. Sale of Alcohol is prohibited for residential block parties.*

Will you or any other vendors be selling food or merchandise?    ☐ Yes    ☒ No  
*If yes, please attach list of proposed vendors, including business name and type of food/merchandise sold.*

Do you intend to use the available picnic tables and benches in the location?    ☒ Yes    ☐ No

### Section III- STREET USE

☒ Check if this section does not apply

#### Description of portion(s) of road(s) to be used

Road closures must include rental of barricades; must be coordinated with the Village of Twin Lakes Department of Public Works

Will any parking stalls be used or blocked during the event?

☐ Yes ☐ No

Dates of Use \_\_\_\_\_

Total Number of Parking Stalls Requested and Location \_\_\_\_\_

Description of Signage to be used during event \_\_\_\_\_

#### Anticipated Services

Please indicate below any additional services you are requesting for your event. Estimated Fees or Deposits for these services may be required prior to issuance of permit(s)

☐ Electricity; Explain \_\_\_\_\_

☐ Traffic Control; Explain \_\_\_\_\_

☐ Police Services; Explain \_\_\_\_\_

☐ Fire/EMS Services; Explain \_\_\_\_\_

☐ Other; Explain \_\_\_\_\_

#### Scout House, Lance, Central, West Side Park

##### Reservation Fee

|                        |            | # of Parks | # of Days | Applicable Fee |
|------------------------|------------|------------|-----------|----------------|
| Security Deposit       | \$100.00 x | _____      | =         | _____          |
| Non-Profit or Resident | \$75.00 x  | _____      | x _____ = | _____          |
| Non-Resident           | \$150.00 x | _____      | x _____ = | _____          |

##### Millennium Park Reservation Fee

|                        |          | # of Days |       |
|------------------------|----------|-----------|-------|
| Security Deposit       | \$100.00 |           |       |
| Non-Profit or Resident | \$50.00  | x _____ = | _____ |
| Non-Resident           | \$100.00 | x _____ = | _____ |

##### Block Party/Street Closure

|                  |          |  |
|------------------|----------|--|
| Security Deposit | \$100.00 |  |
|------------------|----------|--|

TOTAL \_\_\_\_\_

**Note:** The Village of Twin Lakes, the Police Department and/or Fire Department have the right to cancel an event due to inclement weather or any safety risk.

All parks and public spaces must be left the way they were originally found. A check is required to be placed on file with the Clerk's Office should the park or public space incur any damage or has not been cleaned up. Any charges will be communicated to the applicant prior to processing.

### LIABILITY INSURANCE REQUIREMENT

The applicant or special event sponsoring shall supply the Village with a certificate of insurance demonstrating the required level of insurance coverage in addition to providing the Village with a copy of the insurance policy endorsement language demonstrating that the Village, its officers, agents, employees and contractors are named and endorsed as an additional insured party. Certificate must show Comprehensive General Liability Insurance with coverage for contractual liability with limits no less than \$1,000,000 each occurrence for comprehensive general liability insurance and, \$2,000,000 aggregate limits for bodily injury and property damage, unless otherwise specified by the Village. The Village Board may require a higher limit depending upon the details of the special event, which may include:

- (1) A special event that includes alcohol, or,
- (2) A special event that is anticipated to have attendance greater than 100 people per day, or,
- (3) A multi-day special event.

Proof of this insurance is required to be turned into the Village no less than ten (10) days prior to the start of the special event. If any modifications occur to the insurance terms, the applicant must also notify the Village immediately. Any change to coverage requires Village approval. Also, if coverage is canceled or no longer meets the Village's requirements, the special event permit will be rescinded. The applicant shall also agree to hold the Village, its officers, employees, agents, and contractors harmless against all claims, liability, loss, damage, or expense (including but not limited to actual attorney's fees) incurred by the Village for any damage or injury to a person or property caused by or resulting directly or indirectly from the activities for which the special event permit is granted.

Upon approval, the permit issued by the VILLAGE OF TWIN LAKES authorizes the applicant to conduct the event described in the application and the applicant hereby agrees to comply with all applicable laws, rules and regulations, including any restrictions or conditions imposed by the Village, affecting the holding of an event. The applicant acknowledges and understands that the VILLAGE OF TWIN LAKES reserves the right to cancel any permit for non-compliance by the applicant with the restrictions or conditions imposed by the Village in approving the application or for violating any laws, rules or regulations.

Acknowledged and Agreed YES X NO \_\_\_\_\_

Applicant Signature Susan Richey Date 1/5/2023

### VILLAGE OF TWIN LAKES STAFF USE ONLY

Date Filed with Clerk 1/11/2023 Amount Paid & Receipt # \_\_\_\_\_

Checklist ☐ Map of Event or Site Plans ☐ Insurance

☐ Temporary Class "B"/"Class B" Retailer's License Application, if necessary

Police Chief Signature [Signature] Date 1-16-23

☐ Approved ☐ Denied Notes \_\_\_\_\_

DPW Signature [Signature] Date 1-11-23

☒ Approved ☐ Denied Notes \_\_\_\_\_

Fire Chief Signature [Signature] Date 1-11-23

☒ Approved ☐ Denied Notes \_\_\_\_\_

COW Meeting Date \_\_\_\_\_ Board Meeting Date \_\_\_\_\_ Permit Number \_\_\_\_\_