

Bj11 #4015

# Auxiliary Questionnaire Alcohol Beverage License Application

Submit to municipal clerk

Individual's Full Name (please print) (last name)		(first name)		(middle name)	
Shortess		Kimberly		Anne	
Home Address (street/route)		Post Office	City	State	Zip Code
4228 Canterbury La		Mt. Pleasant		WI	53403
Home Phone Number		Age	Date of Birth	Place of Birth	
262-939-4585				Racine, WI	

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.

☒ Agent of Racine Yacht Club  
(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? 59 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. (Name, Location and Type of License/Permit)
- Do you hold and/or are you an officer, director, stockholder, agent or employee 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)
- Named individual must list in chronological order last two employers.

Employer's Name	Employer's Address	Employed From	To
Jensen Metal Products	7800 Northwestern Ave	1976	1987
Racine Yacht Club	One Barker St.	1991	Present

**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.

Kimberly Shortess  
(Signature of Named Individual)

## Schedule for Successor of Agent

If there is a change in agent, each club, corporation, or limited liability company who holds a retail permit to sell fermented malt beverages and/or intoxicating liquor must appoint a successor agent pursuant to sec. 125.04(6), Wis. Stats. There is a \$10 change in agent processing fee due with this form. The following questions must be answered by the Agent. The appointment must be signed by an officer of the corporation/organization or one member of limited liability company. (Only one signature is required). The appointment must be approved by the licensing authority.

Racine Wisconsin 7/14 20 20  
(Municipality) (Date)

1. Name of agent

Kimberly A. Shortess

Yes No

2. ☒ ☐ Are you of legal drinking age?
3. ☒ ☐ Have you been a resident of Wisconsin for at least 90 continuous days prior to the date of appointment as agent?
4. ☐ ☒ Have you ever been convicted of a federal law violation?
5. ☐ ☒ Have you ever been convicted of a state law violation?
6. ☐ ☒ Have you ever been convicted of a local ordinance violation?
7. ☒ ☐ Have you completed the required responsible beverage server program per sec. 125.04(5)(a)5, Wis. Stats.?

UNDER PENALTY OF LAW, I declare that all of the above information is true and correct to the best of my knowledge and belief.

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

Kimberly A. Shortess  
(Signature of Agent)

4228 Canterbury Lane  
(Address)

### SUCCESSOR AGENT

The undersigned appoints Kimberly A. Shortess as agent  
in accordance with sec. 125.04(6), Wis. Stats.

Name of Permittee

Amy Cermak

Date

7/14

20 20

By

Amy Cermak  
(Signature of Officer / Member)

I hereby accept appointment as agent for

Racine Yacht Club

and assume

full responsibility of the conduct of the business relative to fermented malt beverages and intoxicating liquors.

Date

7/14

20 20

Kimberly A. Shortess  
(Signature of Agent)

THE AGENT APPOINTED ABOVE MUST BE APPROVED BY THE LICENSING AUTHORITY TO BE EFFECTIVE.  
(See sec. 125.04(6), Wis. Stats.)

\_\_\_\_\_  
(Municipality) WI \_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Signature of Official)

\_\_\_\_\_  
(Title)

## Checklist for obtaining a Liquor/Beer/Soda/Amusement License

- \_\_\_\_\_ **Building Department** – City Hall 730 Washington Ave. Room 304 (262) 636-9464  
The Building Department MUST sign off on the Zoning Approval form before we can process your application(s). (This form is for new applications not holding an existing license for the type of business you are applying for).
- ✓ **City Clerk's Office** – City Hall 730 Washington Ave. Room 103 (262) 636-9171  
Turn in completed applications here. If you have any questions regarding applications, contact us.
- \_\_\_\_\_ **Contact Alderman in the district where the business is located.** This is to inform the Alderman that there will be a new owner and/or a new type of business in his/her district.)
- Alderman Name & Telephone :** Edwin Santiago, JR (District 4) 262-822-8302
- ✓ **Responsible Beverage Service Course** must be completed if applicant has not held some type of alcohol beverage license in the State of Wisconsin in the past two years.
- ✓ **Download the Wisconsin Alcohol Beverage and Tobacco Laws.** This has information regarding alcohol laws and hours of operation <http://www.revenue.wi.gov/pubs/pb302.pdf>

**It is the applicants responsibility to call the departments listed below to setup appointments to have your premise inspected. By signing you acknowledge that the City Clerk's office has notified you of this:**

Print name Kimberly Shortess Signature Kimberly Shortess Date 7/14/20

Business Name Racine Yacht Club Business Address One Barker St.  
Your license(s) will NOT be released until the City Clerk's Office has received an "OKAY" from each of these departments.

\_\_\_\_\_ **Environmental Health Department** – City Hall 730 Washington Ave. Room 1 (262) 636-9203  
(Inspection and Sanitation and/or Restaurant License/Permit)

\_\_\_\_\_ **Building Department** – City Hall 730 Washington Ave. Room 307 (262) 636-9161  
(Inspection and Occupancy Permit)

\_\_\_\_\_ **Fire Department** – Fire 810 Eighth St. (262) 635-7915 (Inspection)

Applications must be filed and paid for by noon on the Friday before a Council meeting in order to be presented to the Council. The Council meets the first and third Tuesday of every month, except the 3<sup>rd</sup> Monday of April and 1<sup>st</sup> Monday of August. Applications are then referred to the Public Safety and License Committee for its next meeting, and it is mandatory that you appear at that meeting.

**Office of the City Clerk**

Tara Coolidge  
City Clerk

Amber Pfeiffer  
Assistant Clerk



**City of Racine, Wisconsin**

City Hall  
730 Washington Avenue, #103  
Racine, Wisconsin 53403  
(262) 636-9171  
Fax: (262) 636-9298  
Email: [clerks@cityofracine.org](mailto:clerks@cityofracine.org)

TO: KIMBERLY SHORTESS

DATE: 7/28/20

FROM: CITY CLERK'S OFFICE

This is to confirm that your application for a CHANGE OF AGENT located at RACINE YACHT CLUB: 1 BARKER ST, RACINE, WI 53402 will be presented to the Public Safety and Licensing Committee on August 12th, 2020 at 5:30P.M., virtually. **Your participation is mandatory. Please contact the City Clerk's Office (262-636-9171) at least 48 hours prior to your scheduled meeting with a phone number to be contacted at during the meeting on August 12th, 2020.**

If for any reason you decide to withdraw your application, it must be done in writing and filed with the City Clerk's Office **prior to issuance of your license.** Any refunds for a denied or withdrawn license application will be refunded, minus publication, records check and a \$40.00 processing fee.

If the license is granted, it is understood that the applicant will not be issued a license until all necessary departmental approvals are received by the City Clerk's Office.

Please note there is a possibility the committee may vote to recommend denial / denial of renewal / suspension / revocation of your license application at this hearing, pursuant to the procedures under Wis. Stat. § 125.12 and subject to common council approval. You may be represented by an attorney at your own expense for any of these proceedings. Failure to appear may also result in denial of your application.

Tara Coolidge  
City Clerk/Treasurer