[/] NEW

1 RENEWAL

CITY OF LA CROSSE APPLICATION FOR PAWNBROKER, SECONDHAND DEALER OR MALL/FLEA MARKET

Fee: \$ 125.00 Invoice No. 108959

(Ch. 10. Article XVII)

For the license period beginning	na <u>Jecer</u> June	nber 30		20 <u>19</u> 20 <u>30</u>	
To the Honorable Mayor, Com	ımon Council,	City Clerk	and Chief of Po	lice of the City of La	a Crosse:
The undersigned herel					
	Secondhand Article		condhand velry, Precious I	fetals & Gems	Mall/ Flea Market
BUSINESS NAME (Real/Legal Name of Applicant)	Ram.	lle	Ryan D	aniel Mi-	Hby
BUSINESS ADDRESS	1705				WI 54601
BUSINESS TELEPHONE	60	878	8 6930	· ·	
TRADE NAME	Some	here	InTi		
*Any individual, partner, member manager/person in charge shall be	() P M	ほひし へいのいれつと		and and a second	orporate applicant and
WISCONSIN SELLER PERMIT (Must be issued in name of business)	ROMI	LC			
PREMISE ADDRESS (Where business is being conducted)	1705	16th	St. So	LaCrosse	W154601
PROPERTY/BUILDING OWNER (name, address, telephone)	Ryan Da 2718 C	ak ()	nitby :	608-790 5	01.17
	Cacros	50 /29	I KULAI		<i>Οφ</i> . Ι
TERMS OF LEASE, if applicable	NIA	se u	154601		
TERMS OF LEASE, if applicable *A separate license shall be obtain	NIA	se u	154601		
	NIA	se u	154601		
*A separate license shall be obtain ADDRESS OF ANY	N/A ed for each indiv	se u	154601		
*A separate license shall be obtain ADDRESS OF ANY OFF-SITE STORAGE FACILITY PROPERTY/BUILDING OWNER	N/A ed for each indiv	se u	154601		
*A separate license shall be obtained ADDRESS OF ANY OFF-SITE STORAGE FACILITY PROPERTY/BUILDING OWNER (name, address, telephone)	NIA ed for each india	se u	154601		
*A separate license shall be obtained ADDRESS OF ANY OFF-SITE STORAGE FACILITY PROPERTY/BUILDING OWNER (name, address, telephone) TERMS OF LEASE, if applicable	NIA ed for each india	se u	154601		
*A separate license shall be obtained ADDRESS OF ANY OFF-SITE STORAGE FACILITY PROPERTY/BUILDING OWNER (name, address, telephone) TERMS OF LEASE, if applicable If licensed in another Wisconsin Mu	NIA ed for each india	se u	154601		

ATTACH BOND in the amount of \$2,500 con observance of the ordinances of the City and such state law dealers. The bond must be in full force and effect at all times during the control of the city and such state law dealers.	ing the term of the license.
D/A ATTACH photocopy of any LEASE for properly/but for any off-site storage facility. Lease must extend for more than	SIX (O) Interior
Wisconsin. A secondhand dealer that is exempt from obtaining City of La Crosse for a period not to exceed the license period place of business is within the City of La Crosse, a license is required.	d of the issuing municipality. *If the principal uired.
ATTACH photocopy of WISCONSIN SELLER PI	EKMII. Penni nusi ba cursii und tens
issued in the same legal/real name of Applicant or Business.	1 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
्राच्या के किया है। इस अपने के किया है जिल्हा में इस के अपने	true and correct. I am aware that withholding
I hereby attest that the information contained in this application is information or making false statements on this application will be bat that I will comply with the provisions of law pertaining to this license (C and agree to inform the clerk within ten (10) days of any change in the	h. 10, Article XVII of the La Crosse Municipal Code) information supplied in this application.
SIGNATURE OF PARTY NOTE	DATE 11/11/19
	and the second s
	AIFUABITY
APPROVAL OF MUNICIPAL	
Upon investigation of statements made on application and mun hereby:	icipal and state criminal records, license is
	and the second of the second o
[/] APPROVED [] DENIED	and the second second
L V H	11-21-19
Signature of Police Department Representative	Date Park The Park Th
The issuance of a Pawnbroker, Secondhand Dealer or Mall/Flea license may be revoked or suspended when deemed to be in the misrepresentation or false statements contained in the applications suspended or revoked due to the conduct of any licensee, their licensee has violated a State Statute or City Ordinance.	ed transport of the control of the c
	CITY OF LA CROSSE, WI
•	
TO DE COMPLETED BY CLERK	
TO BE COMPLETED BY CLERK Date filed with municipal clerk Date reported to Council Date license granted	License number issued: Pawnbroker: #
11-19-2019	Secondhand Article Dealer: # Secondhand Jewelry, Precious Metals & Gems: #

PERSONAL DATA SHEET (PLEASE PRINT ALL INFORMATION)

Each individual, partner, member of a limited liability company or officer, director or agent of any corporate applicant and manager/person in charge must complete all the information and must indicate if they have been convicted of any of the following within the last ten (10) years: a felony, a misdemeanor, a statutory violation punishable by forfeiture or a county or municipal ordinance violation. If none, write "none".

Manager/Perso	Stacy Ann Mitby
	(FIRST, FULL MIDDLE NAME, LAST)
Home Address:	2726 E. Burr Oak St. La Crosse W1 54601
Date of Birth:	Home Phone: <u>608-317-9029</u> Daytime Phone: <u>608-317-9029</u>
Violations:	
1 100	
	n. n. M. th.
	KIRST, FULL MIDDLE NAME, LAST)
Home Address:	(STREET ADDRESS, CITY, STATE & ZIP)
Date of Birth:	Home Phone: 6087905067 Daytime Phone: 6087905067
Violations:	
A (OLGERALID)	
•	
Title:	
	(FIRST, FULL MIDDLE NAME, LAST)
Home Address:	(STREET ADDRESS, CITY, STATE & ZIP)
Date of Birth:	Home Phone: Daytime Phone:
Violations:	
Title:	
	(FIRST, FULL MIDDLE NAME, LAST)
Home Address:	(STREET ADDRESS, CITY, STATE & ZIP)
Date of Birth:	Home Phone: Daytime Phone:
Violations:	
-	
Title:	
Liana Adda	(FIRST, FULL MIDDLE NAME, LAST)
Home Address:	(STREET ADDRESS, CITY, STATE & ZIP)
Date of Birth:	Home Phone: Daytime Phone:
Violations:	
3/2017	



Bond Number 2424597

License and Permit Bond

Not valid for Contract, Performance, Maintenance, Subdivision, Supply or Utility Guarantee Bond. (Valid in the states of Illinois, Indiana, Iowa, Kansas, Kentucky, Michigan, Minnesota, Missouri, Ohio and Wisconsin only)

Principal: (Full name and address) RDM LLC	Obligee: (Principal's customer) City of La Crosse
1705 16th St S	400 La Crosse St
La Crosse, WI 54601-6434	<u>La Crosse, WI 54601-3374</u> Expiration Date: <u>11/08/2020</u>
Effective Date: 11/08/2019	Expiration Date. 11/06/2020
PENAL AMOUNT OF BOND:	
Two Thousand Five Hundred Dollars and Zero Cents	Dollars (\$ 2,500.00),
lawful money of the United States, to be paid to the said obligee ourselves and our legal representative, jointly and severally. The condition of this obligation is such, that whereas, the princip Secondhand Dealer's	
Secondification Dealer 3	
NOW, THEREFORE, if said Principal shall faithfully perform all all amendments) pertaining to the license or permit, then this ounless renewed by continuation certificate.	the duties and comply with the laws and ordinances, (including bligation shall be null and void; otherwise to remain in full force
This bond may be terminated at any time by the Surety upon se the expiration of thirty-five (35) days from the mailing of notice of later, this bond shall ipso facto terminate and the Surety shall be of the Principal.	r as soon thereafter as permitted by applicable law, whichever is
Principal shall save and keep harmless the Obligee from all los liable on account of the issuance of said license and permit. The	ses or damage which it may sustain or for which it may become e maximum liability shall not exceed the bond penalty.
Signed with our hands and sealed with our seals this, the	8th day of November, 20 19
RDM LLC WEST (Principal)	BEND MUTUAL INSURANCE COMPANY CORPORATE SEAL SEAL SEAL SEAL SOLUTION CORPORATE CORPORATE SOLUTION CORPORATE CORPORATE SOLUTION CORPORATE CORPORAT

MICHIGAN ONLY: This policy is exempt from the filing requirements of Section 2236 of the Insurance Code of 1956, 1956 PA 218 and MCL 500.2236.

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THE SILVER LINING®

DOMA NO.	Bond No.	2424597
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POWER OF ATTORNEY

Know all men by these Presents, That West Bend Mutual Insurance Company, a corporation having its principal office in the City of West Bend, Wisconsin does make, constitute and appoint:

Kevin A. Steiner

lawful Attorney(s)-in-fact, to make, execute, seal and deliver for and on its behalf as surety and as its act and deed any and all bonds, undertakings and contracts of suretyship, provided that no bond or undertaking or contract of suretyship executed under this authority shall exceed in amount the sum of:

Two Thousand Five Hundred Dollars and Zero Cents 2,500.00

This Power of Attorney is granted and is signed and sealed by facsimile under and by the authority of the following Resolution adopted by the Board of Directors of West Bend Mutual Insurance Company at a meeting duly called and held on the 21st day of December, 1999.

Appointment of Attorney-In-Fact. The president or any vice president, or any other officer of West Bend Mutual Insurance Company may appoint by written certificate Attorneys-In-Fact to act on behalf of the company in the execution of and attesting of bonds and undertakings and other written obligatory instruments of like nature. The signature of any officer authorized hereby and the corporate seal may be affixed by facsimile to any such power of attorney or to any certificate relating therefore and any such power of attorney or certificate bearing such facsimile signatures or facsimile seal shall be valid and binding upon the company, and any such power so executed and certified by facsimile signatures and facsimile seal shall be valid and binding upon the company in the future with respect to any bond or undertaking or other writing obligatory in nature to which it is attached. Any such appointment may be revoked, for cause, or without cause, by any said officer at any time.

In witness whereof, the West Bend Mutual Insurance Company has caused these presents to be signed by its president undersigned and its corporate seal to be hereto duly attested by its secretary this 22nd day of September, 2017.

Attect

Christopher C. Zuygart

Christopher C. Zwygart

Secretary

State of Wisconsin County of Washington Kevin A. Steiner

Chief Executive Officer/President

On the 22nd day of September, 2017, before me personally came Kevin A. Steiner, to me known being by duly sworn, did depose and say that he resides in the County of Washington, State of Wisconsin; that he is the President of West Bend Mutual Insurance Company, the corporation described in and which executed the above instrument; that he knows the seal of the said corporation; that the seal affixed to said instrument is such corporate seal; that is was so affixed by order of the board of directors of said corporation and that he signed his name thereto by like order.

uli A/Benedum

Senior Corporate Attorney

Notary Public, Washington Co., WI

My Commission is Permanent

The undersigned, duly elected to the office stated below, now the incumbent in West Bend Mutual Insurance Company, a Wisconsin corporation authorized to make this certificate, Do Hereby Certify that the foregoing attached Power of Attorney remains in full force effect and has not been revoked and that the Resolution of the Board of Directors, set forth in the Power of Attorney is now in force.

Signed and sealed at West Bend, Wisconsin this __8th_ day of

of ____

lovember

2019

Heather Dunn

Vice President - Chief Financial Officer

<u>Notice:</u> Any questions concerning this Power of Attorney may be directed to the Bond Manager at NSI, a division of West Bend Mutual Insurance Company.

1900 S. 18th Ave. West Bend, WI 53095 | ph (262) 334-6430 | 1-800-236-5004 | fax (262) 338-5058 | www.thesilverlining.com



WISCONSIN DEPARTMENT OF REVENUE PO BOX 6902 MADISON, WI 53708-8902

Contact Information:

2135 RIMROCK RD PO BOX 8902
MADISON, WI 53708-8902
ph; 608-266-2776 fax: 608-264-6884
email: DCRBusiness Taxiflavisconsin.gov
website: revenue wil.gov

Letter ID

L1334795152

RYAN D MITBY RDM LLC 1705 16TH ST S LA CROSSE WI 54601-6434

Wisconsin Department of Revenue Seller's Permit

Legal/real name:

RDM LLC

Business anne:

BUYING AND SELLING SINCE DAY ONE - SOMEWHERE IN

TIME

1705 16TH ST S

LA CROSSE WI 54601-6434

- 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

456-1030305499-02