



City of La Crosse, Wisconsin

City Hall
400 La Crosse Street
La Crosse, WI 54601

Meeting Agenda - Final

Board of Public Works

Monday, June 24, 2024

10:00 AM

Council Chambers
City Hall, First Floor

The Board of Public Works meeting is open for in-person attendance and will also be conducted through video conferencing. The meeting can be viewed by visiting the Legislative Information Center (<https://cityoflacrosse.legistar.com/Calendar.aspx>) and clicking on the video link to the far right in the meeting list.)

Call to Order

Roll Call

Approval of Minutes

Minutes from June 17, 2024.

Agenda Items:

- [24-0852](#) Bids for Landscaping for Station #2 at 1400 La Crosse St.
- [24-0868](#) Bidder's Proof of Responsibility.
- [24-0874](#) Request of Riverfest to use Oktoberfest Lot for helicopter rides July 3 through July 6, 2024.
- [24-0884](#) Request of Tom and Maxine Jacobs to place a fence in an easement on their property at 3828 33rd Street S.
- [24-0885](#) Request of Chao Lee Xiong to sell produce in the City Hall parking lot every Saturday from June - September 2024.
- [24-0886](#) Request of Pao Nao Moua to sell produce in the City Hall parking lot every Saturday from June - October 2024.
- [24-0893](#) Construction Contract Change Order

Adjournment

Notice is further given that members of other governmental bodies may be present at the above scheduled meeting to gather information about a subject over which they have decision-making responsibility.

NOTICE TO PERSONS WITH A DISABILITY

Requests from persons with a disability who need assistance to participate in this meeting should call the City Clerk's office at (608) 789-7510 or send an email to ADAcityclerk@cityoflacrosse.org, with as much advance notice as possible.

Board members: Mitch Reynolds, Tamra Dickinson, Rebecca Schwarz, Andrea Trane, Matthew Gallager.



City of La Crosse, Wisconsin

City Hall
400 La Crosse Street
La Crosse, WI 54601

Text File

File Number: 24-0852

Agenda Date: 6/24/2024

Version: 1

Status: Agenda Ready

In Control: Board of Public Works

File Type: General Item



Proposal #16432

W8123 Old CTH NA
Holmen, WI 54636

Landscaping

Date 5/31/2024

Customer Bill Treanor | La Crosse Fire Department | 400 La Crosse Street, ATTN: Bill Treanor | La Crosse, WI 54601

Property Fire Station #2 | 1400 La Crosse Street | La Crosse, WI 54601

Site Prep/Demo

Site Prep/Demo \$2,846.80

Landscape Beds-Metal Edging/Weed Barrier and Rock

Softscapes Installation \$18,570.24

Installation of Softscapes

Plants and Installation \$13,593.73

Installation of Plants

Kill Weeds/Grading/Sod Work

Grading \$10,342.81

Grading

WORK ORDER SUMMARY

SERVICES	SALES TAX	TOTAL PRICE
Site Prep/Demo	\$0.00	\$2,846.80
Softscapes Installation	\$0.00	\$18,570.24
Plants and Installation	\$0.00	\$13,593.73
Grading	\$0.00	\$10,342.81
	Sale	\$45,353.58
	Sales Tax	\$0.00
	Project Total	\$45,353.58

WE CREATE AND MAINTAIN BEAUTIFUL LANDSCAPES

River City Lawnscape, Inc. • W8123 Old CTH NA • Holmen, WI 54636

Phone: 608-526-9780 | Email: office@rivercitylawnscape.com | Website: www.rivercitylawnscape.com



Proposal #16721

W8123 Old CTH NA
Holmen, WI 54636

Irrigation

Date 5/31/2024

Customer Bill Treanor | La Crosse Fire Department | 400 La Crosse Street, ATTN: Bill Treanor | La Crosse, WI 54601

Property Fire Station #2 | 1400 La Crosse Street | La Crosse, WI 54601

Plumbing hook-up is not included in the estimate. Plumbing services are subcontracted and payment is due per plumber's specifications.

Estimate includes a "Smart" irrigation controller that is operated by Hydrowise software. Property owner is responsible for providing WIFI connection and resolving any firewall/security barriers. Optional "smart" irrigation sensor upgrade includes flow sensor & rain sensor for additional water saving technology.

Estimate includes approximately 6 zones and 2 drip zones. Final quantities of irrigation heads or zones may vary depending upon field conditions.

The estimate does not include any labor, materials, or equipment that may be required should unseen problems arise. A change order may result. Current labor rates will apply.

Irrigation Install

Irrigation Installation	\$9,513.00
Installation of Irrigation System	
Drip Irrigation Installation	\$1,495.00
Installation of Dripline Irrigation System	

Boring

Boring Under Parking Lot	\$3,580.03
Installation of Irrigation System	

WORK ORDER SUMMARY

SERVICES	SALES TAX	TOTAL PRICE
Irrigation Installation	\$0.00	\$9,513.00
Drip Irrigation Installation	\$0.00	\$1,495.00
Boring Under Parking Lot	\$0.00	\$3,580.03
	Sale	\$14,588.03
	Sales Tax	\$0.00
	Project Total	\$14,588.03

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Phone: 608-526-9780 | Email: office@rivercitylawnscape.com | Website: www.rivercitylawnscape.com

Winona Nursery



1280 Frontenac Dr
Winona, MN 55987
Contact: McLean Benson
Office Ph: 507-452-6237 McLean: 608-865-0403

BID SUBMITTED TO: CITY OF LACROSSE ATTENTION: BILL TREANOR
PROJECT NAME: FIRE STATION NO. 2
PROJECT LOCATION: LACROSSE, WI DATE: 5/15/24; rev 6/4/24

SPEC. SECTION	DESCRIPTION	AMOUNT
-----	LANDSCAPING	\$47,169.00
	**this revised price is based on City of LaCrosse allowing us to complete project sometime between 8/15-9/15/24	
-----	UNDERGROUND SPRINKLER SYSTEM	\$18,865.00

IF APPLICABLE, TAX INCLUDED
 BOND INCLUDED
 WAGE RATES FIGURED

SPECIFIC QUALIFICATIONS OR EXCLUSIONS:

- Does not go beyond project limits.
- Includes Fall 2024 removal of all existing weed/ turf.
- New beds to be installed per 5/14/24 redesign discussion with Winona Nursery.
- New sod to be installed in all areas not indicated as landscape beds.
- Decorative rock figured for all landscape beds.
- Plants to be held back from driveway/ turn areas.
- All topsoil necessary is figured.
- Does not include any biofilter work. That portion of project completed in 2023.
- Does not include backflow preventer or point of connection to exterior of building for backflow preventer. We connect to backflow once on exterior of building.**
- Does not include 110-volt electrical hook-up for irrigation controller.**

****Bid good for 45 days. Please call if you have any questions!****



City of La Crosse, Wisconsin

City Hall
400 La Crosse Street
La Crosse, WI 54601

Text File

File Number: 24-0868

Agenda Date: 6/24/2024

Version: 1

Status: Agenda Ready

In Control: Board of Public Works

File Type: General Item

BIDDERS PROOF OF RESPONSIBILITY FOR BPW MEETING

6/24/2024

<u>CONTRACTOR</u>	<u>ADDRESS</u>	2024-2025 BID	<u>WORK PERFORMED</u>
		PRE-QUALIFICATION	
Poellinger Electric, Inc.	5416 33rd St S., La Crosse, WI 54601	\$9,071,994.00	Electrical Construction, Parking Lots, Street Lighting, Airport Lighting, and Traffic Signals



City of La Crosse, Wisconsin

City Hall
400 La Crosse Street
La Crosse, WI 54601

Text File

File Number: 24-0874

Agenda Date: 6/24/2024

Version: 1

Status: Agenda Ready

In Control: Board of Public Works

File Type: General Item

Agenda Number:



CERTIFICATE OF AIRCRAFT INSURANCE

07/01/2024

DATE (MM/DD/YYYY)

06/30/2023

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

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

PRODUCER Lockton Companies 3280 Peachtree Road NE, Suite #250 Atlanta GA 30305 (404) 460-3600	CONTACT NAME: _____		
	PHONE (A/C, No. Ext): _____	FAX (A/C, No): _____	
E-MAIL ADDRESS: _____			
PRODUCER CUSTOMER ID #: _____			
INSURER(S) AFFORDING COVERAGE			
INSURED 28 Lake Superior Helicopters, LLC dba Lake Superior Helicopters, Heli Co., and Heli Co. New Orleans; Ascent Aviation 4525 Airport Approach Rd. Duluth MN 55811	INSURER A: National Union Fire Ins Co Pitts. PA	50	19445
	INSURER B: Harco National Insurance Company	50	26433
	INSURER C:		
	INSURER D:		
	INSURER E:		
	INSURER F:		

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

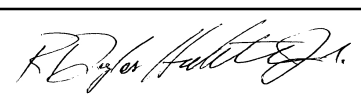
POLICY INFORMATION		CERTIFICATE NUMBER: 429		REVISION NUMBER:	
POLICY TYPE			LINE OF BUSINESS SUBCODE		
<input type="checkbox"/> INDUSTRIAL AID	<input type="checkbox"/> PLEASURE & BUS	<input checked="" type="checkbox"/> COMMERCIAL	<input type="checkbox"/> AIRPLANE	<input checked="" type="checkbox"/> HELICOPTER	<input type="checkbox"/> MIXED FLEET
<input type="checkbox"/> NON-OWNED	<input type="checkbox"/>	<input checked="" type="checkbox"/> LIABILITY ONLY	<input type="checkbox"/>	<input type="checkbox"/> HULL & LIABILITY	<input type="checkbox"/> HULL ONLY
				<input type="checkbox"/> EXCESS	<input checked="" type="checkbox"/> QUOTA SHARE

AIRCRAFT INFORMATION		ACORD 333, Aircraft Schedule attached			
YEAR	MAKE	MODEL	SERIAL NUMBER	REGISTRATION NUMBER	
TERRITORY:					

AIRCRAFT COVERAGES		INSURER LETTER	POLICY NUMBER	EFFECTIVE DATE	EXPIRATION DATE	ADDITIONAL INSURED? (Y / N)	SUBROGATION WAIVED? (Y / N)
		A	AV042670835-03 & AV100200-03	07/01/2023	07/01/2024	N	N
COVERAGE	OPTIONS		LIMIT	APPLIES TO	LIMIT	APPLIES TO	
AIRCRAFT HULL	<input checked="" type="checkbox"/>	Not In Motion	5%	\$See Below	Insured value	\$XXXXXXXX	
	<input checked="" type="checkbox"/>	In Motion	5%	\$See Below			
AIRCRAFT LIABILITY				\$See Below	EA OCC	\$XXXXXXXX	EA PER
				\$See Below	EA PASS	\$XXXXXXXX	AGGR
MEDICAL PAYMENTS	<input checked="" type="checkbox"/>	INCLUDING CREW		\$5,000	EA PER		
		EXCLUDING CREW					
COVERAGE	OPTIONS		LIMIT	APPLIES TO	LIMIT	APPLIES TO	
CODE	DESCRIPTION						
				\$XXXXXXXX		\$XXXXXXXX	
				\$XXXXXXXX		\$XXXXXXXX	
				\$XXXXXXXX		\$XXXXXXXX	
				\$XXXXXXXX		\$XXXXXXXX	
				\$XXXXXXXX		\$XXXXXXXX	

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

City of Lacrosse shall be included as additional insured hereunder solely with respect to the operations of the named insured.

CERTIFICATE HOLDER	CANCELLATION
429 City of Lacrosse 400 LA Crosse Street Hayward WI 54843	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE 

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Schedule of Insured Aircraft – Lake Superior Helicopters

Item	Make & Model	Year	FAA Reg #	Insured Value	Pax	Crew	Liability Limit
1	Robinson R44	2004	N7530C	\$355,000	3	1	\$2,000,000 single limit with passenger liability limited internally to \$200,000
2	Robinson R44	2006	N4911X	\$355,000	3	1	\$2,000,000 single limit with passenger liability limited internally to \$200,000
3	Robinson R44	2002	N3231J	\$440,000	3	1	\$1,000,000 single limit with passenger liability limited internally to \$100,000
4	Robinson R44	2013	N839RM	\$275,000	3	1	\$2,000,000 single limit with passenger liability limited internally to \$200,000

Deductible Schedule

- 5% of Insured Value - In Motion/Not In Motion

Additional Remarks

- It is understood and agreed the Certificate Holder(s) shall be included as Additional Insured(s) hereunder solely with respect to the operations of the Named Insured. It is specifically agreed the inclusion of more than one Insured hereunder shall not operate to increase the Limits of Liability and is limited to those coverages provided by these policies.
- This insurance is primary and without right of contribution from any other insurance as may be carried by the Certificate Holder.
- Insurers waive their rights of subrogation against the Additional Insured(s)s but only to the same extent that the Named Insured has waived its rights of recovery against and/or indemnified the Additional Insureds in the Contract.
- In the event of cancellation or adverse material change of the policies by Insurers, Insurers agree that such cancellation or change shall not be effective as to the Additional Insureds until thirty (30) days (ten (10) days in the event of cancellation due to non-payment of premium) after issuance of notice by the Insurers to the Certificate Holders.

Craig, Sondra

From: Pederson, Joseph
Sent: Wednesday, June 19, 2024 9:15 AM
To: Craig, Sondra
Subject: FW: Riverfest Insurance Certificate
Attachments: Lake Superior - City of Lacrosse.pdf; Lake Superior - La Crosse County Agricultural Society, Inc..pdf

Good morning Sondra! I was sent the Riverfest Helicopter Rides insurance information that renews on July 1 automatically. I see there is no BPW on the calendar for the next couple weeks, is that true?

Thanks!



Joe Pederson

Police Parking Utility Coordinator

La Crosse Police Department

400 La Crosse Street, La Crosse, WI 54601

Phone: 608-789-4908

Cell: 608-317-3886

www.cityoflacrosse.org/police

Confidential and Protected:

The information contained in this email message may be confidential and protected from disclosure. This email is intended solely for the recipient to whom it is addressed. Any review, transmission, dissemination, distribution, copying, or other use is strictly prohibited. If you have received this email in error, please respond to the sender at pedersonj@cityoflacrosse.org and delete the material from any computer and/or server.

From: byersonsps@aol.com <byersonsps@aol.com>
Sent: Wednesday, June 19, 2024 9:07 AM
To: Pederson, Joseph <pedersonj@cityoflacrosse.org>
Cc: Mike Schieber <mschieber@gmail.com>
Subject: Fw: Riverfest Insurance Certificate

***** CAUTION:** This email originated from an external sender. **DO NOT** click links or open attachments unless you recognize the sender and know the content is safe. *******

Joseph,

Per our conversation, here is the Insurance Certificate for the Helicopter rides for Riverfest .

R/
Marion

----- Forwarded Message -----

From: Candace Turk <cturk@heli-co.com>
To: byersonsps <byersonsps@aol.com>
Cc: Katelyn Marunich <kmarunich@heli-co.com>
Sent: Tuesday, June 18, 2024 at 02:19:43 PM CDT
Subject: Riverfest Insurance Certificate

Marion –

Our insurance policy is currently in renewal with our broker and the same insurance will be renewed on July 1st, 2024.

As soon as we have the new COI I will send it over to you.

If the city would like direct information from our broker about insurance renewal dates I am more than happy to put them in contact with our insurance broker.

I have reached out to our broker to see how quickly we can get the COI done once it is renewed.

Candace Turk | Chief Financial Officer

Duluth: 218-461-2857|New Orleans: 504-291-8999





City of La Crosse, Wisconsin

City Hall
400 La Crosse Street
La Crosse, WI 54601

Text File

File Number: 24-0884

Agenda Date: 6/24/2024

Version: 1

Status: Agenda Ready

In Control: Board of Public Works

File Type: General Item

June 19, 2024

To whom it may concern,

In January of 2024 we purchased a home at 3828 33rd Street South. We had previously lived in the Town of Greenfield in La Crosse County. When we purchased this home, we had adopted five children (all victims of childhood trauma, including neglect, physical, mental and sexual abuse). At the time of the purchase we had only a 13 year old girl living with us.

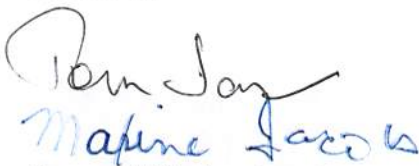
She came into our home when she was four years old. She was a trauma victim. It took several years for her to get to a point where she was comfortable being in a room alone. She still is extremely anxious when alone or in large crowds.

When we moved in, she was extremely anxious and was very worried about people moving through our yard.

We have been in contact with Phillips Outdoor Services about putting a fence around our back yard. We want a gate onto the walking trail adjacent to Pammel Creek (that we can secure from inside the yard).

We have had the property surveyed, and see the right of way in question. We are asking for a variance to build a fence that meets the fence at two points and will run perpendicular to that fence. We understand that we would be responsible for removal of the fence in the event of need to address issues within the right of way, as well as reconstruction costs. Additionally in an emergency we will assist in any way to ensure access if needed, and will be responsible for costs incurred because of the fence.

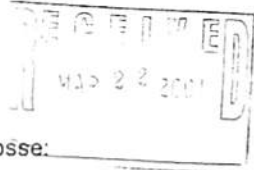
Sincerely,

Handwritten signatures of Tom and Maxine Jacobs in blue ink. The signature for Tom is above the signature for Maxine.

Tom and Maxine Jacobs

File # 2001-03-043

REPORT OF COMMITTEE



To the Honorable Mayor and Common Council of the City of La Crosse:

Your Highways, Properties & Utilities Committee and Finance & Personnel Committee having under consideration the annexed resolution authorizing transfer of excess land adjacent to 33rd Street recreational trail, and said matter having been referred to the Board of Public Works, and the same having made and filed their reports thereon, recommends adoption of same as amended.

Respectfully submitted,

Donald F. Gilles, Chmn.	Phillip J. Addis, Chmn
John J. Satory, Jr.	Steve F. Taylor
Joe Ledvina	David R. Morrison
Charles Clemence	Bernard F. Maney
Douglas L. Farmer	Gerald V. Every
Bill Harnden	Robert Larkin

RESOLUTION ADOPTED
MAR 06 2001
BY COUNCIL

IR 21 2001
MP
PC
RT
RJA ✓

AMENDED RESOLUTION

BE IT RESOLVED by the Common Council of the City of La Crosse that it hereby offers to transfer to all adjoining property owners for the sum of one dollars (\$1.00) per parcel any excess land along the 33rd Street Recreational Trail that will be constructed this summer.

BE IT FURTHER RESOLVED that the City shall maintain an eight (8) foot easement to the East of the fence for maintenance of the Pammel Creek Flood Control project or other City purposes.

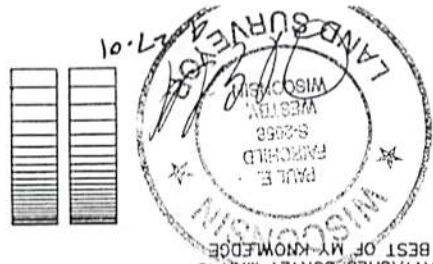
BE IT FURTHER RESOLVED that the transfer documents provide that the adjacent property owners shall maintain said eight foot easement area with respect to the mowing of the grass and shall not place any structures on said eight foot easement without prior consent from the Board of Public Works.

BE IT FURTHER RESOLVED that if the adjacent property owners do not wish to purchase the access land at one (\$1.00) then in order to protect the property interest of the City, the new recreational trail fence for the 33rd Street Recreational Trail shall be placed on the property line at those points.

BE IT FURTHER RESOLVED that there is hereby appropriated up to the sum of Eight Thousand Five Hundred dollars (\$8,500.00) from the contingency fund in order to provide for any additional title or survey work.

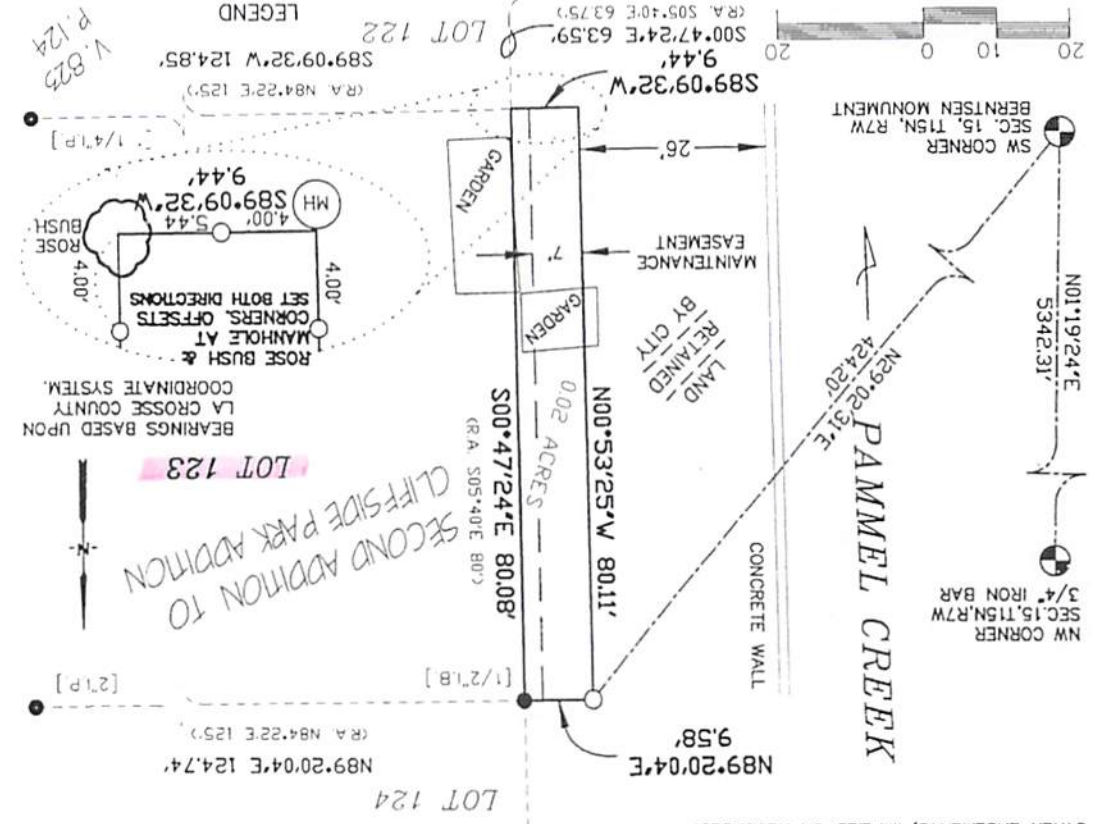
Typed: 3-2-01
Approved: _____

PARAGON ASSOCIATES
 SURVEYING ENGINEERING
 LANDSCAPE ARCHITECTURE
 744 MOORE ST.
 LA CROSSE, W 54603
 (608) 781-3110 FAX (608) 781-3197
 (20)

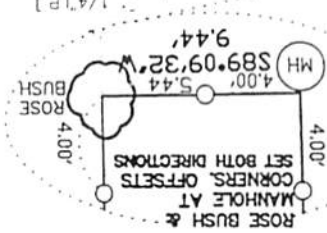


I, PAUL E. FAIRCHILD, REGISTERED LAND SURVEYOR #2058, HEREBY CERTIFY THAT I HAVE SURVEYED AND MAPPED THE ABOVE PARCEL AT THE DIRECTION OF THE CITY OF LA CROSSE, AND THAT THE ATTACHED SURVEY-MAP IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

- SET 3/4"x24" IRON BAR (1.50 LBS./LIN.FT.)
 - FOUND CORNER
- () RECORDED AS BEARING & DISTANCE



BEARINGS BASED UPON
 LA CROSSE COUNTY
 COORDINATE SYSTEM.



SECOND ADDITION TO
 CLIFFSIDE PARK ADDITION

PART OF THE SOUTHWEST QUARTER OF THE SOUTHWEST QUARTER (NW/SW) OF SECTION 15, TOWNSHIP 15 NORTH, RANGE 7 WEST, CITY OF LA CROSSE, LA CROSSE COUNTY, WISCONSIN, DESCRIBED AS FOLLOWS:
 COMMENCING AT THE SOUTHWEST CORNER OF SAID SECTION 15, THENCE N29°02'31"E 424.20 FEET TO THE EXTENSION OF THE NORTH LINE OF LOT 123, SECOND ADDITION TO CLIFFSIDE PARK ADDITION AND THE POINT OF BEGINNING; THENCE ALONG SAID EXTENSION N89°20'04"E 9.58 FEET TO THE NORTHWEST CORNER OF SAID LOT 123; THENCE ALONG THE WEST LINE OF SAID LOT 123, S00°47'24"E 80.08 FEET TO THE SOUTHWEST CORNER OF SAID LOT 123; THENCE ALONG THE SOUTH EXTENSION OF SAID LOT 123, S89°09'32"W 9.44 FEET; THENCE N00°53'25"W 80.11 FEET TO THE POINT OF BEGINNING. SAID PARCEL CONTAINS 0.02 ACRES AND IS SUBJECT TO A 7' WIDE EASEMENT FOR THE PURPOSE OF MAINTENANCE AND RECONSTRUCTION OF PAMMEL CREEK AND ALL OTHER EASEMENTS, IMPLIED OR RECORDED.

PLAT OF SURVEY



OFFICE OF
CITY ENGINEER
 CITY HALL
 400 LA CROSSE ST
 LA CROSSE WI 54601-3396
 (608) 789-7505

June 15, 2001

Residential Property Owners Near Proposed Bicycle/Pedestrian Facility Along Pammel Creek
SUBJECT: Land Transaction and Pertinent Information

Dear Homeowner:

Please find the following enclosed:

1. Copy of Council Resolution Adopted March 8, 2001
2. Copy of Council Resolution Adopted May 10, 2001
3. Original Quit Claim Deed Specific to Your Property
4. A Copy of a Plat of Survey Specific to Your Property
5. Return Envelope Postage Paid

In accordance with the Council resolutions adopted, please sign the bottom of this letter and return it to the City of La Crosse if you are willing to accept the portion of land adjacent to your residence. The City will record the quit claim deed and transfer the property. Also, in accordance with the Council resolutions, the fence will be placed on the property line. If a property owner elects not to accept the City land, then the fence will not be placed 25' from the Pammel Creek wall but will be placed on the existing property line you currently occupy. The City will retain a 7' easement for maintenance and reconstruction of Pammel Creek flood improvements on the east side of the fence in which the property owner will be responsible to maintain this area.

City staff will be available to answer any questions at a meeting to be held on Wednesday, June 27, 2001 at 6:00 p.m. at State Road School. If you can not make it to this meeting and want to talk to someone regarding this letter, please call Randy Turtenwald, City Engineer, or Ron Oleson at 789-7505 or Patrick Houlihan, City Attorney, at 789-7511.

Sincerely,

Randy Turtenwald, P.E.
 City Engineer

- cc: Council Member Joe Ledvina
 Council Member Sam Solverson
 Mayor John Medinger
 City Attorney, Patrick Houlihan
 Director of Public Works, Patrick Caffrey

I HOWARD & JANICE ENGEN accept the City's property as shown
 (Please print your full name)

on plat of survey Howard Engen Janice Engen
 (Signature) 6-28-01

Quit Claim Deed

1293814

LACROSSE COUNTY, WI
REGISTER OF DEEDS
DEBORAH J. FLOCK

RECORDED ON 11-21-2001
AT 1:54 PM

REC. FEE: 13.00
TRANSFER FEE: 77.25(2)

PAGES: 2

VOL. 1536 PAGE 777

#110

RETURN TO City Clerk, City Hall
400 La Crosse Street
La Crosse WI 54601

Tax Key No. 17-50309-16
17-50309-15
17-50309-17

City of La Crosse, a Wisconsin Municipal Corporation

quit-claims to Howard Engen and Janice Engen,
husband and wife, as survivorship marital property.

the following described real estate in La Crosse County,
State of Wisconsin:

See Attached Legal Description

The Grantor (City) shall maintain a seven (7) foot easement to the East of the fence for maintenance of the Pammel Creek Flood Control project or other City purposes.

This Deed is given on condition that the Grantee(s) shall maintain said seven (7) foot easement area with respect to mowing of the grass and shall not place any structures on said seven (7) foot easement without prior consent from the Board of Public Works of the City of La Crosse, Wisconsin.

No real estate transfer return is required with respect to this conveyance pursuant to s. 77.25(2), Wis. Stats.

This is not homestead property.
(is) (is not)

Dated this 15th day of June, 2001

(SEAL)

John D. Medinger, Mayor

(SEAL)

Teri Lehrke, City Clerk

AUTHENTICATION

Signatures authenticated this June 15th day of June, 2001

ACKNOWLEDGMENT

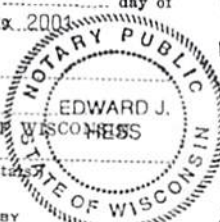
STATE OF WISCONSIN

LA CROSSE County, as

Personally came before me, this 15th day of June, 2001, the above named

John D. Medinger and Teri Lehrke

TITLE: MEMBER STATE BAR OF WISCONSIN
(If not, authorized by § 706.06, Wis. Stats.)



THIS INSTRUMENT WAS DRAFTED BY

Patrick J. Houlihan, City Attorney

to me known to be the persons who executed the foregoing instrument and acknowledge the same.

Edward J. Hess
Notary Public La Crosse County, Wis.
My Commission is permanent. (If not, state expiration date: May 1, 2005.)

(Signatures may be authenticated or acknowledged. Both are not necessary.)
The use of witnesses is optional.

*Names of persons signing in any capacity should be typed or printed below their signatures.



La Crosse Fire Department - Community Risk Management

400 La Crosse St, La Crosse, WI 54601 • (608) 789-7530 • <http://www.cityoflacrosse.org> • inspection@cityoflacrosse.org

FENCE PERMIT

Do I need a building permit?

Yes.

Data Requirements:

- Completed and signed Application for Building Permit.
- One (1) set of “to scale” plans: plans may be submitted electronically if you wish. A set includes a top or “plan view” looking down on your project showing placement of the fence with measurements to property lines and a side or “cutaway” view showing your proposed method of construction, size and placement of posts, height of the fence and type of fence.
- A copy of the manufacturer’s specifications (if required).
- Additional information may be required if fence is within three feet of a lot line, see answer below for more information.

How much does a permit cost?

Building Permit Fees can be found on the City website at this link: <https://www.cityoflacrosse.org/fire/fees/buildings>.

How long does it take to get my permit?

Permits are reviewed on a first come, first serve basis. Inspectors are allowed 10 business days to complete. They may take longer depending on circumstances. For an additional cost you can EXPEDITE your application, moving it to the forefront.

How close to my lot line can I build my fence?

Per City of La Crosse Municipal Code of Ordinances *115-398(c). Height and setback of fences regulated.*

- (1) Residential fences are permitted up to the property lines in Residential Districts but shall not, in any case, exceed a height of six feet without a conditional use permit, shall not exceed 48 inches in height from grade in the front, side, or rear yard setback abutting a public sidewalk, shall not encroach into any vision corner and shall not be closer than three feet to any public right-of-way along a public alley. The height of any fence shall be measured as an average and shall not include the posts or pillars to which a fence is attached.
- (4) In the case of a proposed fence installation within three feet of a lot line where no record of a fence existed, a survey prepared by a registered land surveyor or professional engineer is required to obtain a building permit. No survey is required if a recordable affidavit signed by all affected property owners establishes an agreed upon lot line. No permit shall be issued for a fence three feet or closer to a lot line until the adjacent property owners have been notified in writing by the Department of Community Risk Management and 15 days have passed. If a recordable affidavit is provided, the 15 day period can be waived.

Do I need concrete footings under my fence?

Per code, you do not. The fence must be installed to the manufacturer’s specifications.

When must I call for building inspections?

Inspections are required:

- If a footing is required and the holes are ready for viewing before posts are installed
- When the project is complete

Frequently encountered issues:

Following is a list of frequent problems or errors we encounter:

- No pier depth inspection

The property owner is responsible for correct placement of structures upon a parcel of land to comply with the building and zoning law. The back edge of the City sidewalk is usually located on a property line.

Be sure to call Digger’s Hotline prior to digging. The number is 1-800-242-8511.



La Crosse Fire Department - Community Risk Management

400 La Crosse St, La Crosse, WI 54601 • (608) 789-7530 • http://www.cityoflacrosse.org • inspection@cityoflacrosse.org

APPLICATION FOR BUILDING PERMIT

Application Number _____ Date _____ Parcel Number: _____

OWNER INFORMATION					
Name:					
Address of Above: Street		City		State	Zip Code
Phone:	Cell:	Fax:	Email:		
CONTRACTOR INFORMATION					
Name:					
Address of Above: Street		City		State	Zip Code
Phone:	Cell:	Fax:	Email:		
PROJECT INFORMATION					
Project Address:					
Construction Cost: \$		Description of Work: <small>If Demolition include intended use of land after demolition</small>			
Project Type: <input type="checkbox"/> Building <input type="checkbox"/> Addition <input type="checkbox"/> Sign <input type="checkbox"/> Alteration/Remodel <input type="checkbox"/> Demolition					
Architect/Engineer Name:		Architect/Engineer Phone:		Level of Alteration (per IEBC):	
PROPERTY INFORMATION					
Zoning:	Nbr. Dwling Units:	Flood Plain: <input type="checkbox"/> Yes <input type="checkbox"/> No	Fire Limits: <input type="checkbox"/> Yes <input type="checkbox"/> No	Archaeological District: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Building Construction Type:			Occupancy Type:		
FEE INFORMATION					
Copies: \$	Plan Review: \$	Permit: \$	Record Mtce: \$	Other: \$	Total: \$

IT IS HEREBY AGREED between the applicant, as owner, owner's agent or servant, and the City of La Crosse that for and in consideration for the premises and of the permit to construct, erect, alter, move, raze, or install and the occupancy of a building or property as above described, to be issued and granted by the La Crosse Fire Department - Community Risk Management, that the work thereon will be done in accordance with the descriptions set forth in this statement, and as more fully described in the specifications and plans herewith filed; and it is further agreed to construct, erect, alter, move, raze or install and occupy in strict compliance with the ordinances of the City of La Crosse, and to obey any and all lawful orders of the La Crosse Fire Department - Community Risk Management and State of Wisconsin laws relating to the construction, alteration, repairs, removal and safety buildings and other structures and permanent building equipment.

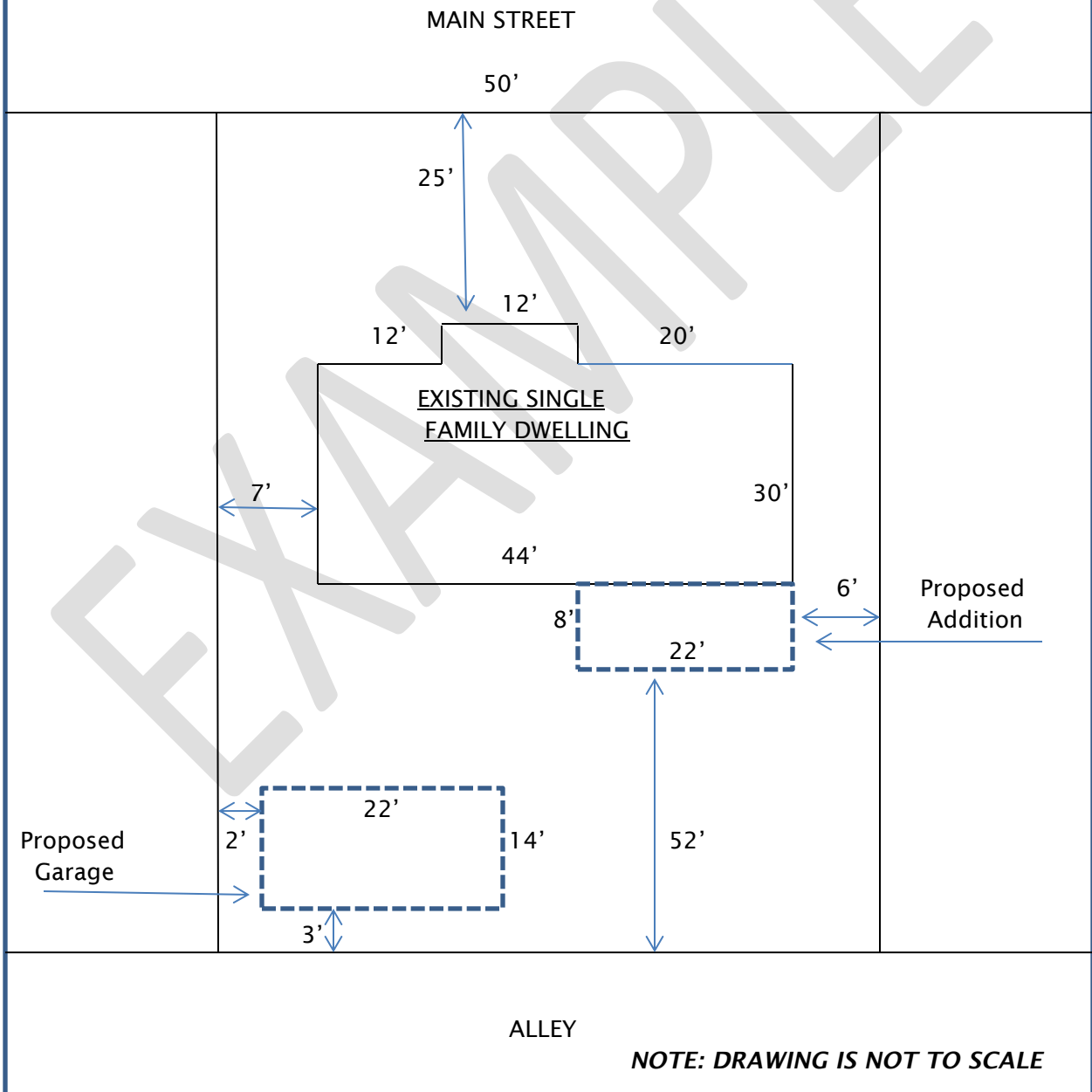
Agent/Contractor: (Print) (Sign) (Date) (WI Cred/Qual)

Owner: (Print) (Sign) (Date)

OFFICE USE ONLY		
Application Approved:	Inspector:	Date:

EXAMPLE PLOT PLAN
COMMUNITY RISK MANAGEMENT
CITY OF LA CROSSE
www.cityoflacrosse.org

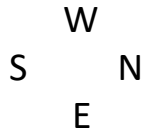
This sample plot plan has been designed to assist you in preparing a similar plot plan of your own premises, when necessary to obtain a building permit, or when required by the Board of Zoning and Appeals, Board of Housing Appeals, or Board of Building Appeals. Plot plans for larger buildings shall go into more detail.



Base Bid: 6' High Vinyl Semi-Privacy Fence / Prestige / White / Flat Caps

Base Bid 2: 4' High Vinyl Semi-Privacy Fence / Prestige / White / Flat Caps

Total Linear
152'



Customer OR Phillips Responsibilities:
Property Lines Determined by: **Customer**
Removal of Existing: **NA**
Disposal of Existing: **NA**
Building Permit: **Customer**

Notes:

- Salesperson: Chad & Dylan
- Haul dirt – confirm w/ homeowner
- All Vinyl gates & gate posts receive aluminum reinforcements.
- All posts to be set with concrete 3' deep

Gate Hardware:

- SS Black Hinge and Latch, Gate Handles and Stop

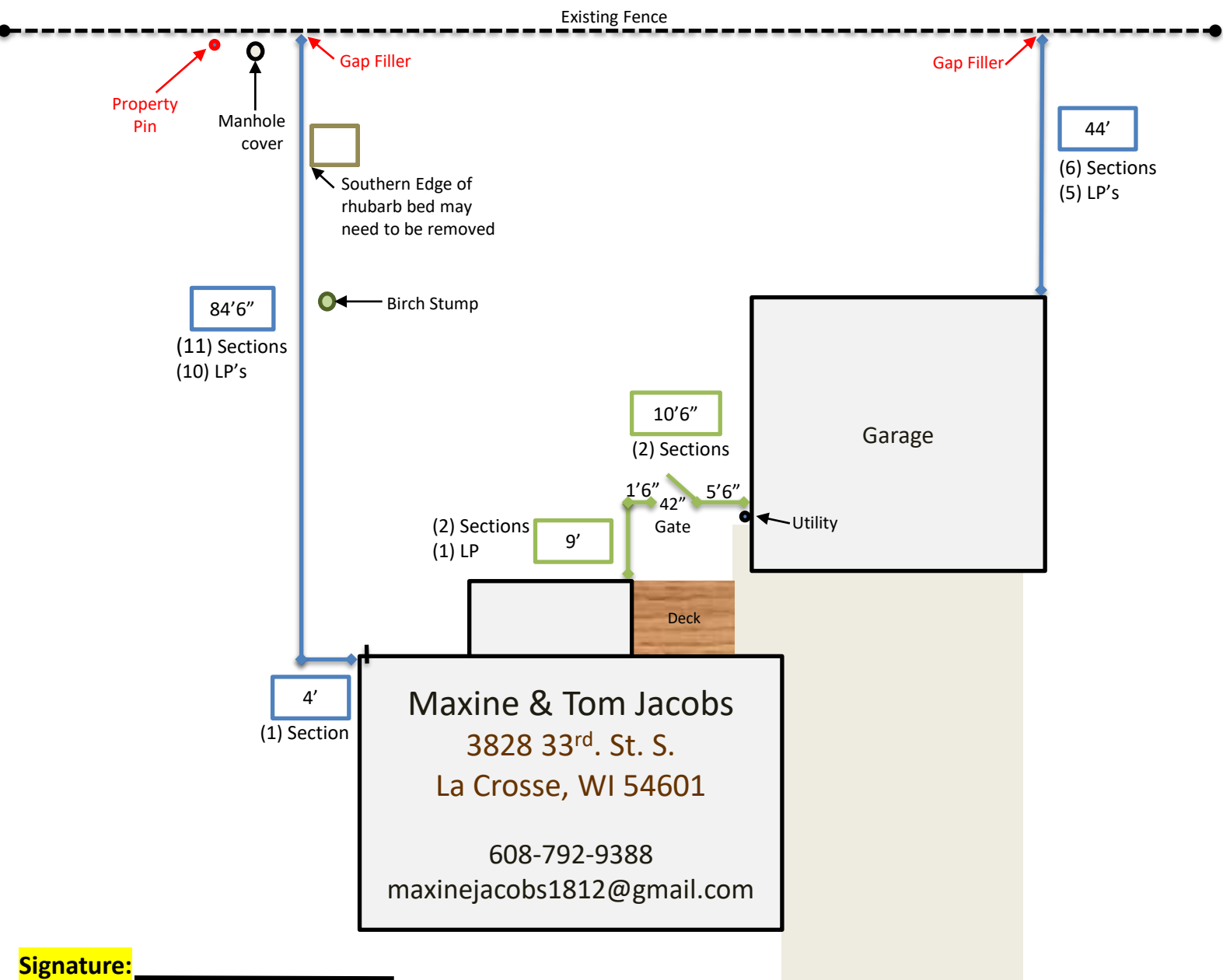
Quantities:

- (18) Sections
- (15) LP's
- (4) EP's
- (1) CP's
- (20) Flat Caps

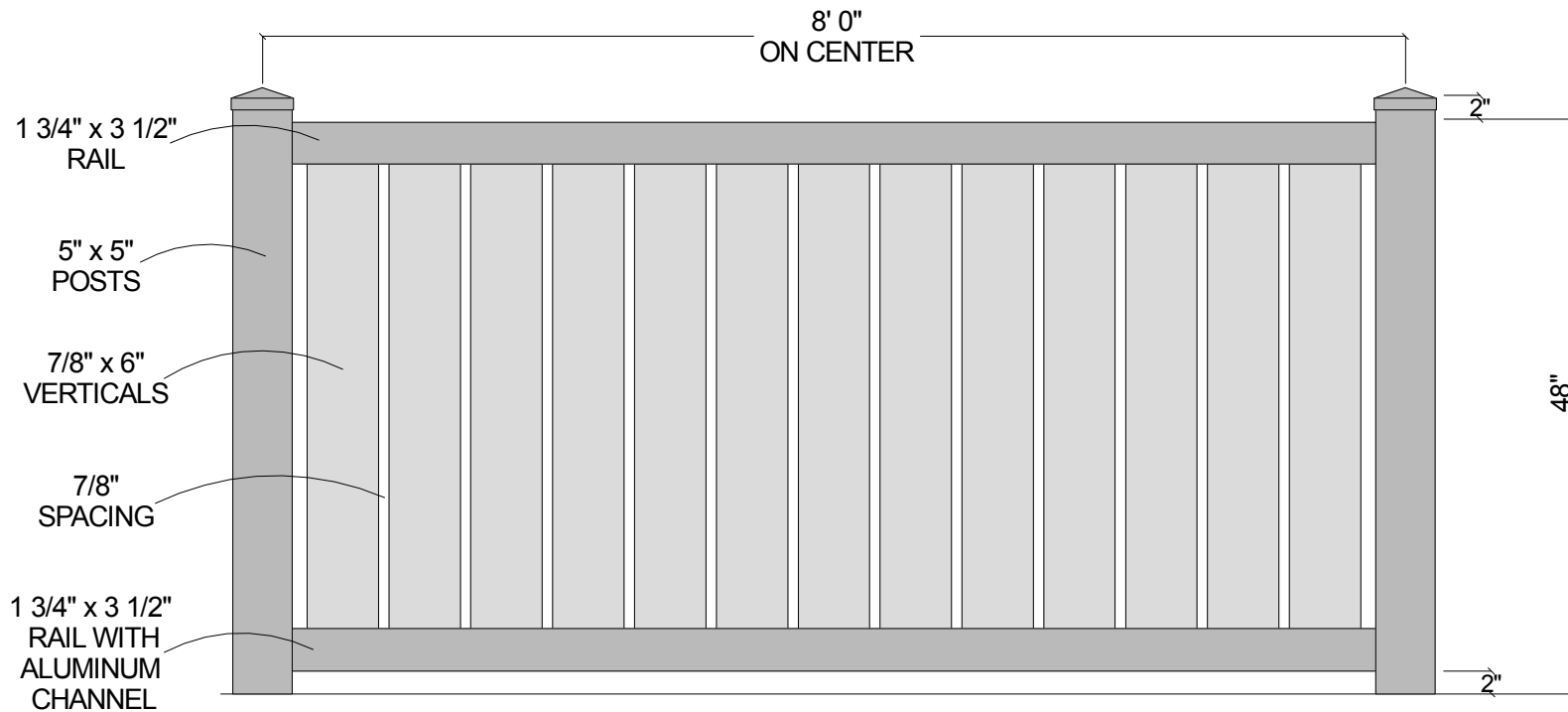
Quantities:

- (4) Sections
- (1) LP's
- (4) EP's
- (1) CP's
- (6) Flat Caps
- (1) 42" wide Single Swing Gate

NOT TO SCALE: Drawing is property of Phillips Outdoor Services, Inc and is to be used exclusively by them. Use other than by Phillips Outdoor Services Inc is prohibited by law.



Signature: _____



Signature _____

Post Size	
48" Tall	5" x 5" x 7' 0"

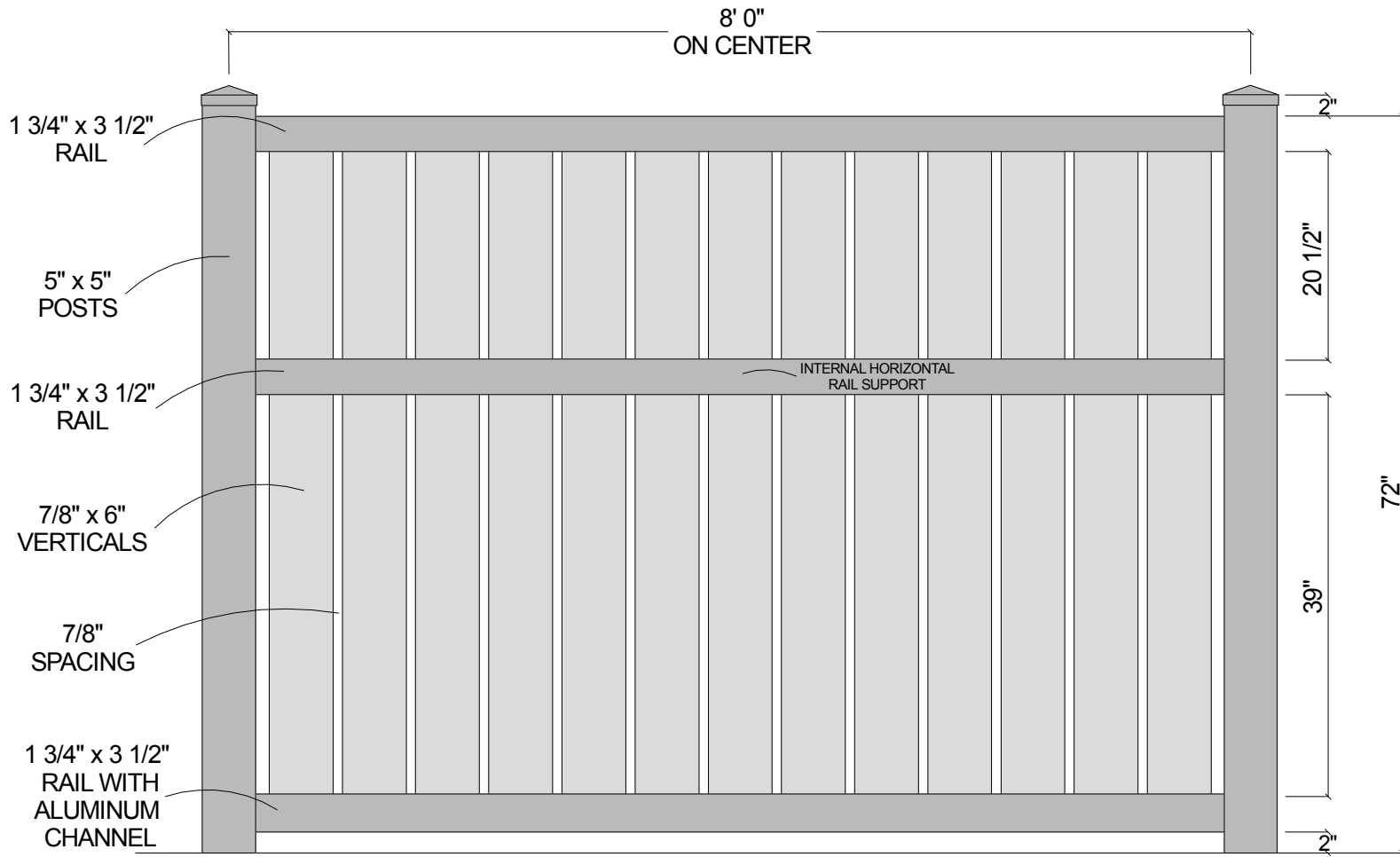


PolyVinyl Fence System

Scale: 1/16" : 1"	Approved By: G.D.T.	Drawn By: J.D.S.
Date: 3/29/04		Revised: 3/29/04

Prestige

As Shown: 48" Prestige	Drawing Number: Prestige-48-Scale
---------------------------	--------------------------------------



Signature _____

Post Size	
72" Tall	5" x 5" x 9' 0"



PolyVinyl Fence System

Scale: 1/16" : 1"	Approved By: G.D.T.	Drawn By: J.D.S.
Date: 3/29/04		Revised: 3/29/04

Prestige

As Shown: 72" Prestige	Drawing Number: Prestige-72-Scale
---------------------------	--------------------------------------

June 18 2024

To whom it may concern,

I'm Eveyn Swartz-Jacobs and my family put in a request for a fence around our home and a gate with a lock to the walking trail. I asked my parents before we moved into this house if we were able to put in a fence because I felt unsafe without one. I have anxiety and PTSD with intruders so it would be better for my mental health to have a fence surrounding our new home.

Evelyn Swartz-Jacobs



City of La Crosse, Wisconsin

City Hall
400 La Crosse Street
La Crosse, WI 54601

Text File

File Number: 24-0885

Agenda Date: 6/24/2024

Version: 1

Status: Agenda Ready

In Control: Board of Public Works

File Type: Request



City of La Crosse, Wisconsin

APPLICATION FOR FARMERS MARKET OR TRADE SHOW

(Ch. 10, Article XVI)



Check One:

Farmers Market Trade Show

For period January 1, 2024 to December 31, 2024

Check this box if this is a renewal or you have previously held this license.

Date Received: 6/10/24 Fee: \$ 110 Invoice No. _____ \$110 cash

Applications must be received in the City Clerk's Office at least fifteen (15) days in advance of license being issued. The non-refundable license fee and required documentation must accompany this application at the time of filing.

BUSINESS INFORMATION – Person, Firm, Association or Corporation/LLC

Legal/Real Name of Business:	Trade Name:	Years in Business:
-------------------------------------	--------------------	---------------------------

Address:	Street	City	State	Zip Code
-----------------	--------	------	-------	----------

Telephone Number:	Website:
--------------------------	-----------------

APPLICANT INFORMATION – Manager/Person in Charge

Name: First	Full Middle	Last
<u>Chao</u>	<u>Lee</u>	<u>Xiong</u>

Address:	Street	City	State	Zip Code
	<u>844 4th Ave N</u>	<u>Onalaska</u>	<u>WI</u>	<u>54650</u>

Telephone Number:	Email:
<u>(608) 769-7419</u>	<u>Yvangel1@yahoo.com</u>

The attached Personal Data Sheet must be completed for each officer/member of business and manager/person in charge

NATURE OF BUSINESS

Location of sales:
City Hall parking lot.

Dates of sales, if on a regular schedule:
Saturday's, 7am-2pm, June-September

Brief description of the goods offered or services:
a variety of fresh picked produce and flower bouquets

The above hereby makes application for a Farmers Market or Trade Show License within the City of La Crosse pursuant to Chapter 10, Article XVI of the Code of Ordinances of the City of La Crosse.

I understand that as license holder, I must collect the following information from each individual seller operating under this license:

- Name, permanent address, and telephone number and temporary address of applicant, if any.
- Name, address, and telephone number of the person, firm, association, or corporation that said person represents or is employed by, or whose merchandise, services, or donations are being taken for.
- Place where the applicant can be contacted for at least six (6) months after leaving the City of La Crosse.
- Nature of business to be conducted and a brief description of the goods offered or services, if any.
- Proposed method of delivery of goods, if applicable.
- A Wisconsin seller's permit as required by Wis. Stats. sec. 77.52.

Under penalty provided by law, applicant certifies the above information is true, correct, and complete, and that falsification may result in denial of such license. Further, applicant understands that refunds are not allowed for any portion of the application fee paid even if denied for past and/or pending offenses and/or for any outstanding debts owed to the City. Applicant agrees that there shall be full compliance with all local, state, and federal laws in the conduct of the activities for which permit may be granted.

Chao LEE, XIONG
Signature of Applicant

6-03-2024
Date

The issuance of a Farmers Market and Trade Show License is conditional at all times. A permit may be revoked,

PHOTOCOPIES OF THE FOLLOWING MUST ACCOMPANY THE APPLICATION AT THE TIME OF FILING:

- Certificate of Insurance along with a photocopy of the endorsement naming City of La Crosse as additional insured (a statement alone on the Certificate is not sufficient).
- Written authorization of the property owner(s) where business will be conducted, if applicable.

OFFICE USE ONLY		
Date Received in the City Clerk's Office:	Issue Date:	License #:



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
06/04/2024

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

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

PRODUCER Veracity Insurance Solutions, LLC. 260 South 2500 West, Suite 303 Pleasant Grove UT 84062		CONTACT NAME: FLIP Program Support PHONE (A/C, No, Ext): (844)-520-6992 FAX (A/C, No): E-MAIL ADDRESS: info@flipprogram.com
INSURED Chao Xiong 844 4th Ave N. Onalaska WI 54650		INSURER(S) AFFORDING COVERAGE INSURER A: Great American Alliance Insurance Co. NAIC # 26832 INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:

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

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

INSR LTR	TYPE OF INSURANCE	ADOL SUBR (NBR, WVD)	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR	<input checked="" type="checkbox"/>	PLF046122-F252428	06/03/2024	06/03/2025	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/PROP AGG \$ 2,000,000 ANIMAL BAILEE \$
	GEN'L AGGREGATE LIMIT APPLIES PER					
	<input checked="" type="checkbox"/> POLICY	PROJ <input type="checkbox"/> DIRECT				LOC <input type="checkbox"/>
	AUTOMOBILE LIABILITY ANY AUTO ALL OWNED AUTOS HIRED AUTOS	SCHEDULED AUTOS NON-OWNED AUTOS				
	UMBRELLA LIAB OCCUR EXCESS LIAB CLAIMS-MADE DED RETENTION \$	<input type="checkbox"/>				EACH OCCURRENCE \$ AGGREGATE \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICEMEMBER EXCLUDED? (Mandatory in MN) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/M <input type="checkbox"/>	N/A <input type="checkbox"/>			WC STATU- OTH- TORY LIMITS ER E L EACH ACCIDENT \$ E L DISEASE - EA EMPLOYEE \$ E L DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
Certificate holder had been added as additional insured regarding the above mentioned policy per attached
Additional Insured - Designated Person or Organization (CG 20 26 Ed. 04 13)

CERTIFICATE HOLDER City of La Crosse 400 La Crosse St La Crosse, WI 54601	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE
---	--

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ACORD 25 (2014/01)
INS025 (201401)

The ACORD name and logo are registered marks of ACORD

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – DESIGNATED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

Schedule

Name of Additional Insured Person(s) or Organization(s):

City of La Crosse

Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

A. SECTION II - WHO IS AN INSURED is amended to include as an Additional Insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury," "property damage" or "personal and advertising injury" caused, in whole or in part, by your acts or omissions or the acts or omissions of those acting on your behalf:

- 1. in the performance of your ongoing operations; or
- 2. in connection with your premises owned by or rented to you.

However:

- 1. the insurance afforded to such additional insured only applies to the extent permitted by law; and
- 2. if coverage provided to the Additional Insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

B. With respect to the insurance afforded to these Additional Insureds, the following is added to SECTION III – LIMITS OF INSURANCE:

If coverage provided to the Additional Insured is required by a contract or agreement, the most we will pay on behalf of the Additional Insured is the amount of insurance:

- 1. required by the contract or agreement; or
- 2. available under the applicable Limits of Insurance shown in the Declarations;

whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.

**COMMERCIAL GENERAL LIABILITY COVERAGE PART - OCCURRENCE FORM
CERTIFICATE PAGE**

IT IS AGREED THAT THIS CERTIFICATE IS ISSUED TO THE CERTIFICATE HOLDER LISTED BELOW TO CERTIFY COVERAGE UNDER THE COMMERCIAL GENERAL LIABILITY INSURANCE MASTER POLICY LISTED BELOW.

INSURANCE COMPANY: GREAT AMERICAN ALLIANCE INSURANCE COMPANY NAMED INSURED: HOSPITALITY & ENTERTAINMENT TRADE ALLIANCE CERTIFICATE HOLDER: Chao Lee Xiong ADDRESS: 844 4th Ave N, Onalaska, Wisconsin 54650 POLICY PERIOD: 06/03/2024 to 06/03/2025 12:01 A.M. Standard Time at the Address of The Certificate Holder	POLICY NUMBER: PLF046122 CERTIFICATE NUMBER: F252428
--	---

LIMITS OF INSURANCE

General Aggregate Limit (Other than Products-Completed Operations)	\$	2,000,000	
Products-Completed Operations Aggregate Limit	\$	2,000,000	
Personal and Advertising Injury Limit	\$	1,000,000	
General Each Occurrence Limit	\$	1,000,000	
Damage to Premises Rented to You Limit	\$	300,000	Any One Premises
Medical Expense Limit	\$	5,000	Any One Person
Professional Coverage Extension	\$	Not Purchased	Each Claim
	\$	Not Purchased	Aggregate
Professional Coverage Deductible	\$	Not Purchased	Each Claim
Liability Deductible			None

FORM OF BUSINESS: Sole Proprietor/Individual

PREMIUM:	\$169.00
BHTA FEE:	\$152.95
TOTAL POLICY COST: (The cost is 100% earned/non refundable)	\$321.95

CODE NUMBER: 11168 **PREMIUM BASIS:** Gross Sales **EXPOSURE:** Up to \$50,000

BUSINESS DESCRIPTION: Vendor, Distributor, or Manufacturer of food products; Farmers Market Vendor

THIS INSURANCE IS SUBJECT TO ALL THE TERMS AND CONDITIONS, INCLUDING APPLICABLE ENDORSEMENTS, OF THE COMMERCIAL GENERAL LIABILITY INSURANCE MASTER POLICY. A COPY OF THE COMMERCIAL GENERAL LIABILITY INSURANCE MASTER POLICY ACCOMPANIES THIS CERTIFICATE. ADDITIONAL COPIES WILL BE PROVIDED TO THE CERTIFICATE HOLDER. PLEASE READ THE POLICY AND ALL ENDORSEMENTS.

NO ADMISSION OF LIABILITY MAY BE MADE EITHER VERBALLY OR IN WRITING

FULL DETAIL OF ANY INCIDENT SHOULD BE SENT IMMEDIATELY BY EMAIL TO [CLAIMS@VDSINS.COM](mailto:claims@vdsins.com) OR BY LETTER TO VERACITY INSURANCE SOLUTIONS, LLC 260 SOUTH 2500 WEST SUITE 303, PLEASANT GROVE, UT 84062.

FORMS AND ENDORSEMENTS applicable to all Coverage Parts and made part of this Policy at time of issue are listed on the attached Forms and Endorsements Schedule IL 88 01 (11/85).

ADMINISTRATED BY:



Veracity Insurance Solutions, LLC
 260 South 2500 West Suite 303
 Pleasant Grove Utah 84062
 888-568-0548

ADMINISTRATOR'S SIGNATURE: 

2



FLIP Insurance Card

NAMED INSURED
Chao Lee Xiong

EFFECTIVE DATES
06/03/2024 to 06/03/2025

CERT. NUMBER
F252428

GENERAL LIABILITY LIMIT
\$1,000,000/\$2,000,000
INSURED BY
Great American Alliance Ins

This card is for information purposes only. Refer to policy for exact coverages, limitations, and exclusions.

This card is for information purposes only. Refer to policy for exact coverages, limitations, and exclusions.
FLIP Insurance
260 South 2500 West, Suite 303
Pleasant Grove, UT 84062
888-568-0548
info@flipprogram.com
www.flipprogram.com
Claim reporting:
claims@vegacityins.com



FLIP Insurance Card



City of La Crosse, Wisconsin

City Hall
400 La Crosse Street
La Crosse, WI 54601

Text File

File Number: 24-0886

Agenda Date: 6/24/2024

Version: 1

Status: Agenda Ready

In Control: Board of Public Works

File Type: Request



City of La Crosse, Wisconsin

APPLICATION FOR MOBILE SELLER, FARMERS MARKET OR TRADE SHOW (Ch. 10, Article XVI)

Check One:

Mobile Seller (Direct Seller/Door-to-Door or Transient Merchant/Fixed Location)

90-Day Temporary Permit Dates: _____

Annual For period January 1, _____ to December 31, _____
(Note: door-to-door not eligible for annual permit)

Farmers Market

Trade Show

Check this box if this is a renewal or you have previously held this license.

Fee: \$ \$110 cash +\$10/ID Badge for Door-to-Door Sellers Invoice No. _____



Applications must be received in the City Clerk's Office at least fifteen (15) days in advance of license being issued. The non-refundable license fee and required documentation must accompany this application at the time of filing. *A separate license is required for each transient merchant location.*

DWD Certificate of Registration: [] Required [] Provided on _____ [] Stamped on _____

BUSINESS INFORMATION – Person, Firm, Association or Corporation/LLC that Applicant Represents, is Employed By, or Whose Food is Being Sold.

Legal/Real Name of Business: _____ Trade Name: _____ Years in Business: _____

Address of Above: Street _____ City _____ State _____ Zip Code _____

Telephone Number: _____ Website: _____

APPLICANT INFORMATION – Person in Charge

Name: First Paul Full Middle Nao Last Mova

Permanent Address: Street 1127 6th St S City LaCrosse State WI Zip Code 54601

Temporary/Local Address: Street _____ City _____ State _____ Zip Code _____

Telephone Number: 608 395 1083 Email: Paul1986Mova@gmail.com

The attached Personal Data Sheet must be completed for each officer/member of business, person in charge, individuals going door-to-door.

NATURE OF BUSINESS

Description of Vehicle used by Applicant in the Conduct of Business:

(License #) PC3119 (Year) 2002 (Make) GMC (Model) Savana

Nature of business to be conducted and a brief description of the goods offered or services:

Farm produce selling vegetables

Proposed method of delivery of goods, if applicable.

NA

DATES, TIMES, LOCATION(S) WHERE BUSINESS WILL BE CONDUCTED		
<i>Note: If on private property, written authorization from property owner is required.</i>		
DATES	TIMES	LOCATIONS
6-21/10-30-24	6am-1pm	City Hall

MUNICIPALITIES WHERE APPLICANT HAS CONDUCTED SIMILAR BUSINESS

Date _____	Where _____
Date _____	Where _____
Date _____	Where _____
Date _____	Where _____
Date _____	Where _____

The above hereby makes application for a Mobile Seller, Farmers Market or Trade Show License within the City of La Crosse pursuant to Chapter 10, Article XVI of the Code of Ordinances of the City of La Crosse.

Under penalty provided by law, applicant certifies the above information is true, correct, and complete, and that falsification may result in denial of such license. Further, applicant understands that refunds are not allowed for any portion of the application fee paid even if denied for past and/or pending offenses and/or for any outstanding debts owed to the City. Applicant agrees that there shall be full compliance with all local, state and federal laws in the conduct of the activities for which permit may be granted.

 _____
 Signature of Applicant

 Date

The issuance of a Mobile Seller, Farmers Market and Trade Show License is conditional at all times. A permit may be revoked, suspended, or not renewed for violation of any provision of this chapter, or a violation of a statute, ordinance, or regulation substantially related to the permitted activity or when necessary to protect the public health, safety, or welfare; or to prevent a nuisance from developing or continuing.

PHOTOCOPIES OF THE FOLLOWING MUST ACCOMPANY THE APPLICATION AT THE TIME OF FILING:

- NA** Photocopy of drivers license for any individual going door-to-door. (photo will be used for ID badge)
- NA** WI Seller's Permit Number NA
(Must be in the same legal/real name as applicant or business and a photocopy must be provided to the City Clerk's Office.)
- NA** Vehicle Certificate of Registration/Licensing, if applicable.
- NA** A local certificate of examination/approval from the sealer of weights & measures, if applicable.
- Certificate of Insurance along with a photocopy of the endorsement naming City of La Crosse as additional insured (a statement alone on the Certificate is not sufficient).
- Written authorization of the property owner(s) where business will be conducted, if applicable.
- Written authorization if selling within 100 feet of a permanent retail merchant during its operating hours. See 10-758(b)(12) La Crosse Municipal Code.

OFFICE USE ONLY		
Date Received in the City Clerk's Office:	Issue Date:	License #:



Certificate of Vehicle Registration

Plate Number PC3119	Registration LTK LTK	Chassis TRUK	Gross Weight 6000	Period A	Product Number 92604181919	Registration Number L241340085958
Vehicle Identification Number 1GTHG39R321231053			Year 2002	Make GMC	Color GRAY	Fleet No.
				Expiration Date 05/31/2025	Amount Received \$ 100.00	

C OF R MUST BE IN VEHICLE AT ALL TIMES

YEAR

THIS IS NOT A BILL

This Registration Certificate is not a Title. Not Valid for Transfer of Ownership.

Contact the Division of Motor Vehicles at:
wisconsindmv.gov
608-264-7447

0018153

MOUA NAO PAO

1123 6TH ST S

LA CROSSE, WI 54601



Tired of misplacing or losing your renewal notices?

Sign up to receive your driver's license/identification card and vehicle license plate renewal notices by email and text.

eNotify (electronic notification) allows you to receive an email and text message in place of your paper renewal notices.

eNotify

For more information, go to:
wisconsindmv.gov/enotify

Do I need insurance?

Yes. In Wisconsin, you're required to have liability coverage for the vehicle you drive and carry proof of it when you are driving. If you don't, you can be fined up to \$500. If you are in an accident without the proper coverage, you may still be responsible for damages and lose your license.

Visit wisconsindmv.gov for more details.





City of La Crosse, Wisconsin

City Hall
400 La Crosse Street
La Crosse, WI 54601

Text File

File Number: 24-0893

Agenda Date: 6/24/2024

Version: 1

Status: Agenda Ready

In Control: Board of Public Works

File Type: General Item

CONTRACT CHANGE ORDER

No. 1

Date 6/20/2024

EDF #22-028

Contract No. MISC-2023-007 for the following public work: State St Water Main Break between Gerke Excavating Inc. and the City of La Crosse, dated 12/21/2022, is hereby changed in the following particulars, to-wit:

The following specific work is hereby eliminated from such contract:

N/A

The following specific work is hereby added to such contract:

Railroad Inspection – Wilson and Co	LS	\$19,096.00
Bore Depth Change	LS	\$5,834.40
Extra 20” Fittings	LS	\$6,265.72
Televise Pipe	LS	\$550.00
Railroad Flagging	LS	\$27,804.91

By virtue of such changes in the contract, the following revisions shall be made:

Contract -----	\$456,572.68
Contingency -----	\$0.00
Net Previous Change Orders-----	\$0.00
Decrease by eliminations (this C.O.)-----	\$0.00
Increase by additions (this C.O.)-----	\$59,551.03
Net Deductions or Additions (Strike out one)-----	\$
Revised Contract Total -----	\$516,123.71

Gerke Excavating
NAME OF CONTRACTOR

Kyle Whaley
CONTRACTOR SIGNATURE

BOARD OF PUBLIC WORKS

I HEREBY CERTIFY that there are sufficient funds in the treasury to meet the liability assumed by the foregoing addenda to contract, or that provision has been made to pay the liability that will accrue thereunder. (WS 62.15-12; 62.09-10-f)

DocuSigned by:
David Tauscher
EE923CC8B4BC443... **Budget Analyst**

DocuSigned by:
Chadwick Hawkins
A93F306A40954A6... **Controller**

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