

## Department of Police



RONALD J. TISCHER, CHIEF

September 9, 2013

Michael A. Kluz 101 West Ave N. Apt 304 La Crosse, WI 54601

Dear Mr	. Kluz:				
Your application for Beverage Operator's License is being recommended for denial for the following reason(s):					
(		Probation/Parole status.			
(	_)	Current charges pending.			
(		Outstanding warrants.			
(_	<u>X</u> )	Past conviction record (see attached record summary).			
(	_	Incomplete Application: omitted past arrests, list "all" arrest section.			
(	_)	Other:			

You may discuss this recommendation with the Chief of Police or designee by setting up an appointment through the Chief's office at 789-7201.

You may also appeal this denial by requesting a hearing before the Judiciary and Administration Committee of the Common Council no later than 5:00 P.M., fifteen (15) days before the second Thursday of the month. This can be done by contacting the City Attorney at 789-7511.

Sincerely,

Andrew (Drew) J. Gavrilos

Sergeant

Records/Licensing Division

789-7230

cc.

Chief of Police, City Attorney, City Clerk

#### September 9, 2013

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### BEVERAGE OPERATOR'S LICENSE DENIAL: Michael A. Kluz

<u>DATE</u>	ARREST/CITATION TYPE	DISPOSITION
07/26/2008	Underage alcohol	Guilty
09/27/2008	Underage alcohol	Guilty
04/04/2009	Absolute sobriety	Guilty
	Underage alcohol	Guilty
08/22/2009	Underage alcohol	Guilty
01/12/2012	Operating while intoxicated	Guilty
	Prohibited alcohol concentration	Guilty
	Failure to obey traffic signal	Guilty

#### **OBSERVATIONS:**

The applicant has an extensive history of alcohol violation since 2008.

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### Application for Beverage Operator's License - La Crosse, WI

Receipt Number:

109270

Renewal:

New: X

To The Common Council of the City of La Crosse:

The undersigned respectfully ap	plies for a Beverage Opera	tor's License for:				
X 2 Year - \$30.00	X 60-Day - \$15.00		14-Day - \$15.00			
Year ending June 30, 2015	Period ending:		Period from:			
			to:			
Last Name	KLUZ					
First Name and MI	MICHAEL A					
Full Middle Name	ANTHONY					
Age	24		DUFLICE	TE RECEIF		
Date of Birth			-CITY CLERW/LIG 01390732 001 11			
Place of Birth	NEW BERLIN	ត្./	05/17 17:27fm i	A10 45.00		
Phone	(262) 844-6130					
Current Address	101 WEST AVE N APT 304					
City, State, ZIp	LA CROSSE WI 54601					
Add'l Mail Name						
Mailing Address	101 WEST AVE N APT 304					
Malling City, State, Zip	LA CROSSE WI 54601					
Previous Address						
Previous City, State, Zip						
Place of Employment	THE HELM					
Identification						
I certify the above information is license. Further, I understand ti denied for past and/or pending o	nat refunds are not allowed	for any portion of th	e application fe	n denial of such e paid even if		
Date of Application: 9/5/2013	Signature of Applicant:					
FOR OFFICE USE ONLY				· · · · · · · · · · · · · · · · · · ·		
Initial of CCO Emp: KG	Granted:	2-Year Lice	nse Number :			
Training: TRAINED 8/9/2013						
•						
l, the undersigned Chief of Police of the City his/her qualifications as a beverage opera	r of La Crosso, do hereby certify that ter in the City of La Crosse and hereb	I have examined the withing a pure of the summer of the su	n applicant as to			
Date: Signati	re of Chiof:			_		
8	Deviced on	sihlis	M.			

# WISCONSIN SELLER / SERVER CERTIFICATION

Trainee Name: Michael A Kluz

Date of Completion: 08/09/2013 14:18 CST

School Name: Learn2Serve

Certification #: WI 2126364

certify that the above named person successfully completed an approved Learn2Serve Seller/Server course.

COMPLIES WITH WISCONSIN STATUTES 125.04, 125.17, 134.66