On State Highway?
☐ Yes No

REVOCABLE OCCUPANCY/ STREET PRIVILEGE PERMIT APPLICATION City of La Crosse Legal Department - Phone: (608)789-7511 http://www.cityoflacrosse.org

Permit Number:

APPLICANT														
Name: Vince Micha		Company Name:	The Kubala Washatko Architects Inc.											
Address: W61 N617 Mequon		arburq	State:	WI	Zip: <u>53012-2017</u>									
Phone #: <u>(262) 377-6039</u> Email: <u>vmicha@tkwa.com</u>	Cell #:	()		Fax #:	(262) 377-2954									
PROPERTY OWNER *If different from applicant Name: Donald weber Company Name: The Charmant Hotel LLC														
Address: 328 Front Street So	uth City: La C		State:	WI	Zip: 54601									
Phone #: (608) 782-5041	Cell #:	(612) 868-9997	0.0.0.	Fax #:	(608) 796-2605									
Email: mark@weber-holdings	s.com	A	III la de la compania del compania de la compania del compania de la compania del la compania de la compania dela compania del la compania de la compania de la compania dela compania del la compania de		(000) 100 2000									
ENCROACHMENT TYPE (Check one): ✓ AWNING/ON-PREMISE SIGN/OVERHEAD HEATER/CANOPY ✓ FIRE ESCAPE/ RESCUE PLATFORM/BALCONY ✓ VENDING MACHINE/NEWSBOX ✓ UNDERGROUND WIRES AND INFRASTRUCTURES ✓ AUTOMATIC IRRIGATION SYSTEM/SIDEWALK ENCROACHMENT ✓ OTHER: ✓ OTHER:														
DESCRIPTION OF ENCROACH		RFORMED:		Desired S	tart Date									
See апаспеа.		January 2015 Est. Completion Date: summer 2015												
CONTRACTOR/SIGN CO.:	D.D. Smith Construction,	Inc. PERSO	N IN CHAR	GF: Corev	Henschel									
Phone #: (920) 907-6452		(920) 904-1890	At III OHAII	Fax #:	(920) 924-2910									
For timely review, City Ordinance		The second of the second	act 45 days											
conditions is verified. All necessarinstalled/erected. I authorize the applicant listed above through the City of La Crosse. Property Owner Signature: A signed letter from the property own used in lieu of this signature ** Signature of Property Owner must be Tax Parcel ID #: 17-20008-20	e notarized **	COUNTY Personally above naily person(s) same Notary Pu My comm	OF LA CROSS y came before remed who executed to blic, La Cross ission expires:))SS. The this 5 day Weller The foregoing ins County, VISC. Permanent	of Walney, 2014, theto me known to be the trument and acknowledged the									
I certify that I have reviewed the	Municipal Code and unde	erstand all that is re	elated to this	permit reque	est. I further certify that I									
have the full authority to make complete and correct; the Work of rules, regulations, policies, and so covered by an approved permit who bataining any final documents and subject to the conditions that appears in Signature of Applicants	the foregoing application or Use performed shall considered conditions of the continuous of the continuous and follow all procedures are in the actual permit to	; the information in the late of the late of the control of the public. It is seen to the public of the signed after approper the control of	n the applica aws of the S The applica After appro ity Municipal proval is obta Date:	ation and the tate of Wisco nt agrees to oval, applican Code. Approined.	e required submittals are pricing and all ordinances, perform the work or use t shall be responsible for oval of this application is									
Please return this completed appli	cation along with required	l information and fe	es noted on	checklist to: (City of La Crosse, Legal									
Department, 400 La Crosse Stree 608)789-7511. You will then be g	k, 6th Floor, La Crosse Wi	54601. With ques	tions please	contact the L	egal Department at									
Approved By:	Required items to be pro- Scale drawing of encroach	vided by Applicant		Gray Shaded Areas to be Completed by City Staff										
	Legal Description Certificate of Insurance													
Approval Date:	Initial Application Fee \$			NON-REFUNDABLE ANNUAL PERMIT FEE										
	Annual Permit Fee \$			able to City Trea	asurer (See fee schedule)									
	All items due pri	or to approval	Check #		Date Received:									



Adam Voltz Allen Washatko Ariel Steuer Chris Murphy Chris Socha Erik Hancock Erin Lawrence Ethan Bartos Jacki Kinney Joe Miletta Joel Krueger Justin Racinowski Karen Hancock Kirk Lundgren Leta Flom Mark Lefebvre Matt Frydach Rich Hepner Tim Hansmann Tom Kubala Vicki Yurske Vince Micha Wayne Reckard

November 4, 2014

RE: Street Privilege Permit for:

The Charmant

101 State Street

La Crosse, WI 54601

To:

Rebecka Martin

City of La Crosse

Legal Department

400 La Crosse Street

La Crosse, WI 54601

Phone Direct: 608-789-7382

Rebecka.

As we discussed on the phone yesterday we are formally requesting the Street Privilege Permit for the following items that will be located on City Property for the use of The Charmant Hotel:

- 1. West Retractable Canvas awnings.
- 2. South Main Entry Canopy.
- 3. Removable chain railings located between planters on west side of building.
- 4. Juliet Balconies.
- 5. Alley door on east side of building.
- 6. Sidewalks and Loading Zone with cobblestone pavers.
- 7. Seasonally removable Planters Boxes on east side Front Street to separate pedestrians from cars.
- 8. Chain railing spanning between planters on west side building to define sidewalk dining area.
- 9. Sidewalk on east side of Front Street for Dining Tables and Chairs.
- 10. Two Bike Racks (City of La Crosse type) on sidewalk on north side of State Street.
- 11. Valet Parking attendant's stand below entry canopy.
- 12. Light Bollards located beneath south entry canopy on the sidewalk.
- 13. Outdoor Infrared Natural Gas Heaters with quick disconnects located beneath the south front entry canopy on the sidewalk. See attached Snow melt drawings for outdoor heater locations and snow melt systems with zones 1,2 and 3.

Attached find the following drawings to indicate locations of items mentioned above:

- · Land Survey with Legal Description.
- ${\color{red} \bullet \,} \, L1.0 \;\; Hardscape \; Plan-West \; indicates \; locations \; of \; items \; 1 \; through \; 12.$
- M2.1 First Floor Mechanical Piping Plan: indicates locations of item 13.

Also find attached the Owners Certificate of Insurance as requested.

Mark Hammond will drop off the original signed Street Privilege Permit Application for the Property Owner and Signature of Applicant (both Donald Weber). Mark will also include the check for Application Fee and Annual Permit Fee. Please place this on the next Public Works agenda for review. Inform Mark Hammond and Nick Weber of the date since they will attend this meting.

Thank You

Vincent B. Micha

Project Architect

incent B. Michon



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

11/3/2014

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

-	certificate holder in lieu of such endors	,	-,-		CONTA	CT					
Robertson Ryan - La Crosse					NAME: PHONE (609) 794-4954 FAX (609) 794-4774						
602	2 State Street				PHONE (A/C, No, Ext): (608) 784-4854 FAX (A/C, No): (608) 784-4774						
La	Crosse, WI 54601				ADDRESS:						
						INSURER(S) AFFORDING COVERAGE					
						INSURER A: The Cincinnati Insurance Company					
INSURED					INSURER B:						
Weber Holdings LLC 102 Jay Street						INSURER C:					
						INSURER D:					
La Crosse, WI 54601					INSUR						
			INSUR	ERF:							
CC	VERAGES CER	TIFIC	CATI	E NUMBER:	RI			REVISION NUMBER:	REVISION NUMBER:		
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								PERSONAL & ADV INJURY	\$	1,000,000	
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AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below								E.L. EACH ACCIDENT	\$		
		N/A						E.L. DISEASE - EA EMPLOYEE			
	DESCRIPTION OF OPERATIONS Below							E.L. DISEASE - POLICY LIMIT	\$		
	CRIPTION OF OPERATIONS / LOCATIONS / VEHICLI 101 State Street, La Crosse, WI 54601.										
anne ës	CONTRACTOR				Transaction in Construction						
CEF	RTIFICATE HOLDER				CANC	ELLATION					
City of La Crosse 400 La Crosse Street					SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.						
	La Crosse, WI 54601				AUTHORIZED REPRESENTATIVE						
			Boundaries and Arabical Company (Albabata) and Arabical Compan								
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