



**Joint Parks and Recreation Department**  
W240 N3065 Pewaukee Road  
Pewaukee WI 53072  
Phone: 262-691-7275

**JOINT PARK AND RECREATION BOARD  
MEETING NOTICE AND AGENDA  
Wednesday, June 10, 2026  
6:00 PM**

Pewaukee City Hall Common Council Chambers  
W240N3065 Pewaukee Road, Pewaukee, WI

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1. Call to Order and Pledge of Allegiance
2. Public Comment - Please limit your comments to two minutes. If further time for discussion is needed, please contact your District Alderperson prior to the meeting.
3. Agenda
  - 3.1 Approval of the meeting minutes from May 13 2026.
  - 3.2 Update regarding Village ordinance change creating a Downtown Outdoor Refreshment Area (DORA) and the impact to Lakefront Park.
  - 3.3 Discussion and possible action regarding additional proposed alcohol sales dates for Brewfinity in conjunction with Village 150th celebration events.
  - 3.4 Discussion and possible action regarding on-site mobile food truck and/or cold treat vendor at Pewaukee Sports Complex.
  - 3.5 Discussion and possible action regarding temporary dog play area opportunities at Pewaukee parks.
  - 3.6 Discussion and possible action regarding Laimon Park financials for May 2026.
4. Adjournment

Respectfully Submitted  
Nick Phalin, CPRP  
June 5, 2026

**NOTICE**

It is possible that members of other governmental bodies of the municipality may be in attendance to gather information that may form a quorum. At the above stated meeting, no action will be taken by any governmental body other than the governmental body specifically referred to above in this notice.

Any person who has a qualifying disability under the Americans with Disabilities Act that requires the meeting or materials at the meeting to be in an accessible format must contact the Parks and Recreation Director at (262) 691-7275 by 2 p.m. the Monday prior to the meeting so that arrangements may be made to accommodate your request.

1. Call to Order and Pledge of Allegiance
2. Public Comment - Please limit your comments to two minutes. If further time for discussion is needed, please contact your District Alderperson prior to the meeting.
3. Agenda
  - 3.1 Approval of the meeting minutes from March 11, 2026 meeting.

Motion to approve minutes from March 11, 2026 meeting. David Linsmeier / Kristen Kreuser Approve Passed: 4-For, 0-Against, 0-Abstain.
  - 3.2 Discussion and possible action regarding Balmer Park baseball outfield fence donation by Pewaukee Youth Baseball.

Motion to approve the item as proposed for Pewaukee Youth Baseball to donate the purchase and installation of a home run fence at Balmer Park ball diamond. David Kelnhofer / David Linsmeier Approve Passed: 4-For, 0-Against, 0-Abstain.
  - 3.3 Discussion and possible action regarding mobile dog park purchase and implementation.

Motion to approve dog park as approved. David Linsmeier / No Second; Motion Failed.
  - 3.4 Discussion and possible action regarding adoption and utilization of a new Pewaukee Parks and Recreation logo.

Motion to approve the logo as presented and recommend to the Village Board. Kristen Kreuser / David Linsmeier Approve Passed: 4-For, 0-Against, 0-Abstain.
  - 3.5 Discussion and possible action regarding Laimon Park financials for March and April 2026.

Motion to approve Laimon Park financials for March and April 2026. David Linsmeier / David Kelnhofer Approve Passed: 4-For, 0-Against, 0-Abstain.
4. Adjournment

Motion to adjourn. Kristen Kreuser / David Linsmeier Approve Passed: 4-For, 0-Against, 0-Abstain.

Respectfully Submitted

Nick Phalin, CPRP

## City of Pewaukee - New Agenda Item

### Agenda Language:

Discussion and possible action regarding additional proposed alcohol sales dates for Brewfinity in conjunction with Village 150th celebration events.

### Sub Item Agenda Language:

### Background Provided By:

Nick Phalin

### Background:

Brewfinity has submitted a request to provide alcohol sales out of the Lakefront Park pavilion in conjunction with Village 150th anniversary celebrations on Saturday, July 4 and Saturday, August 15th for the Antique Boat Show. Brewfinity previously had their 2026 proposed schedule approved by the Parks and Recreation Board. These two dates are new requests in conjunction with the Pewaukee Lake Water Ski Club show on 7/4 and the Antique Boat Show on 8/15.

### Fiscal Impact:

### Recommended Motion:

To approve the dates as requested and recommend to the Village Board.

**Part A: Producer Information**

1. Business Legal Name (individual name if sole proprietor)		
2. Business Name or DBA	3. Agent Name	
4. FEIN	5. Wisconsin Seller's Permit Number	
6. Wisconsin Producer Permit Number	7. Producer Type <input type="checkbox"/> Brewery <input type="checkbox"/> Winery <input type="checkbox"/> Liquor Manufacturer/Rectifier	
8. Contact Person's First Name	9. Last Name	10. M.I.
11. Contact Person's Phone	12. Contact Person's Email	

**Part B: Production Quantity**

**Note:** Check appropriate quantity for permit held (see instructions). If you hold more than one producer permit, check the total aggregate quantity produced for each type of permit. Enter the highest quantity produced in any of the last three calendar years.

Brewery	Manufacturer/Rectifier	Winery
<input type="checkbox"/> Less than 250 barrels	<input type="checkbox"/> Less than 1,500 liters	<input type="checkbox"/> Less than 1,000 gallons
<input type="checkbox"/> 250 - 2,499 barrels	<input type="checkbox"/> 1,500 - 4,999 liters	<input type="checkbox"/> 1,000 - 4,999 gallons
<input type="checkbox"/> 2,500 - 7,499 barrels	<input type="checkbox"/> 5,000 - 34,999 liters	<input type="checkbox"/> 5,000 - 24,999 gallons
<input type="checkbox"/> 7,500 or more barrels	<input type="checkbox"/> 35,000 or more liters	<input type="checkbox"/> 25,000 or more gallons
Calendar year:	Calendar year:	Calendar year:
Quantity:	Quantity:	Quantity:

**Complete only ONE of Part C, D or E.**

**Part C: Request for Full-Service Retail Sales at the Production Premises**

1. Start Date	2. Production Premises Address		
3. City	4. State	5. Zip Code	
6. County	7. Governing Municipality <input type="checkbox"/> City <input type="checkbox"/> Town <input type="checkbox"/> Village of: _____		

**Part D: Request for Fixed Full-Service Retail Outlet**

1. Are you transferring one fixed full-service retail outlet to a new location? ..... <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, complete boxes 2 through 9.			
2. Current Outlet Name			
3. Current Outlet Premises Address			
4. City	5. State	6. Zip Code	
7. County	8. Governing Municipality <input type="checkbox"/> City <input type="checkbox"/> Town <input type="checkbox"/> Village of: _____		9. Premises Phone Number

*Continued* →

**Part D: Request for Fixed Full-Service Retail Outlet (Cont.)**

**New Fixed Retail Outlet Information (complete boxes 10 through 23)**

10. Start Date		11. New Outlet Name	
12. New Outlet Premises Address			
13. City		14. State	15. Zip Code
16. County	17. Governing Municipality <input type="checkbox"/> City <input type="checkbox"/> Town <input type="checkbox"/> Village		18. Premises Phone Number
of: _____			
19. Premises Description - Describe the building or buildings and any outside areas where alcohol beverages are produced, sold, stored, or consumed, and related records are kept. Describe all rooms within the building, including living quarters. Authorized alcohol beverage activities and storage of records may occur only on the premises described in this application. Attach a map or diagram and additional sheets if necessary.			
20. Will you operate a restaurant on the premises? . . . . . <input type="checkbox"/> Yes <input type="checkbox"/> No			
21. What alcohol beverages will be offered for sale? (check all that apply) . . . . . <input type="checkbox"/> Beer <input type="checkbox"/> Wine <input type="checkbox"/> Intoxicating Liquor (other than wine)			
22. What alcohol beverages does the permittee produce? (check all that apply) <input type="checkbox"/> Beer <input type="checkbox"/> Wine <input type="checkbox"/> Intoxicating Liquor (other than wine)			
23. How will customers be served? (check all that apply) . . . <input type="checkbox"/> Samples <input type="checkbox"/> On-premises consumption <input type="checkbox"/> Off-premises consumption			

**Part E: Request for Unlimited Transfer Full-Service Retail Outlet**

1. Name of Event (if applicable)		
2. Dates of Operation (attach a schedule, if necessary)		3. Hours of Operation
4. Premises Address		
5. City		6. State 7. Zip Code
8. County		9. Governing Municipality <input type="checkbox"/> City <input type="checkbox"/> Town <input type="checkbox"/> Village
of: _____		
10. Organizer of Event (if not the named applicant)		11. Email and/or Phone Number for Organizer of Event
12. Organizer Website		13. Event Website
14. Premises Description - Describe the building or buildings and any outside areas where alcohol beverages are produced, sold, stored, or consumed, and related records are kept. Describe all rooms within the building, including living quarters. Authorized alcohol beverage activities and storage of records may occur only on the premises described in this application. Attach a map or diagram and additional sheets if necessary.		
15. On-Site Contact (Last Name, First Name)		16. On-Site Contact Phone
17. On-Site Contact Email		
18. Will you operate a restaurant on the premises? . . . . . <input type="checkbox"/> Yes <input type="checkbox"/> No		
19. What alcohol beverages will be offered for sale? (check all that apply) . . . . . <input type="checkbox"/> Beer <input type="checkbox"/> Wine <input type="checkbox"/> Intoxicating Liquor (other than wine)		
20. What alcohol beverages does the permittee produce? (check all that apply) <input type="checkbox"/> Beer <input type="checkbox"/> Wine <input type="checkbox"/> Intoxicating Liquor (other than wine)		
21. How will customers be served? (check all that apply) . . . <input type="checkbox"/> Samples <input type="checkbox"/> On-premises consumption <input type="checkbox"/> Off-premises consumption		

**Part F: Attestation**

Who must sign this application?


- sole proprietor      • general partner of a partnership      • corporate officer      • member of an LLC

**READ CAREFULLY BEFORE SIGNING:**

I understand and agree to the following:

- I will not operate this location outside of the dates and times approved by the municipality and Division of Alcohol Beverages.
- I will operate this location according to municipal ordinance and restrictions imposed as a condition of receiving this authorization.
- I will purchase alcohol beverages I do not produce from an authorized source, such as a Wisconsin-permitted wholesaler.
- I will operate this location according to Wisconsin law and administrative regulation including but not limited to: underage restrictions, closing hours, licensed operators, and record keeping requirements.

Further, under penalty of law, I have answered each of the above questions completely and truthfully. I agree that I am acting solely on behalf of the applicant business and not on behalf of any other individual or entity seeking the authorization. Further, I agree that the rights and responsibilities conferred by the authorization, if granted, will not be assigned to another individual or entity. I understand that lack of access to any portion of a premises during inspection will be deemed a refusal to allow inspection. Such refusal is a misdemeanor and grounds for revocation of this authorization. I understand that any authorization issued contrary to Wis. Stats. Chapter 125 shall be void under penalty of Wisconsin law. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Signature 		Date	
Last Name		First Name	
		M.I.	
Title	Email	Phone	

**Part G: For Municipal Use Only (Complete if Requesting Authorization in Part D or E)**

1. Will the municipality limit the scope of alcohol beverages offered for sale? . . . . . <input type="checkbox"/> Yes <input type="checkbox"/> No		
2. Will the municipality impose any requirements or restrictions for the full-service retail outlet? . . . . . <input type="checkbox"/> Yes <input type="checkbox"/> No		
3. Describe municipal restrictions indicated in questions 1 or 2 above.		
4. Last Name of Municipal Official	5. First Name	6. M.I.
7. Signature of Municipal Official		8. Date
9. Date Application was Filed with Clerk		10. Date Full-Service Retail Outlet Approved by Governing Body

# Form AB-105 Instructions

## *Producer Full-Service Retail Sales Application*

### **Who may apply for full-service retail sales?**

Producer permittees may apply for full-service retail sales on or off the production premises. Producer permittees include brewers, rectifiers, manufacturers, and wineries.

### **Who qualifies for full-service retail sales?**

- A brewery that manufactures a minimum of 250 barrels of fermented malt beverages.
- A manufacturer/rectifier that produces a minimum of 1,500 liters of intoxicating liquor.
- A winery that produces a minimum of 1,000 gallons of wine.

### **What are full-service retail sales?**

Permittees that are granted full-service retail sales privileges may:

- Sell fermented malt beverages and intoxicating liquor at retail for on- or off-premises consumption at their production premises and at one or more off-site full-service retail outlets.
- Provide taste samples of fermented malt beverages and intoxicating liquor.

### **What are full-service retail outlets?**

Full-service retail outlets are authorized locations for full-service retail sales at places other than the permittee's production premises.

### **What is the difference between a fixed and unlimited transfer full-service retail outlet?**

Fixed full-service retail outlets may be transferred from one location to another once per year. Unlimited transfer full-service retail outlets may be transferred an unlimited number of times in a year. Only one of a producer's full-service retail outlets may be transferred without limitation on frequency.

### **How many full-service retail outlets may I have?**

The number of full-service retail outlets a producer qualifies for is determined by alcohol beverage production volume. Producers may have a maximum of three full-service outlets, regardless of the number or type of producer permits they hold.

### **Who approves full-service retail sales?**

Full-service retail sales on the production premises need only be approved by the Division of Alcohol Beverages. Municipalities do not issue licenses for full-service retail sales outlets; however, municipalities must approve of the outlets. The applicant must forward the municipal approval to the Division of Alcohol Beverages for final granting of the authority for sales to commence on the premises.

### **Can a municipality limit authorized sales at a full-service retail outlet?**

Yes, a municipality can limit authorized sales at a full-service retail outlet. Municipalities may limit the scope of alcohol beverages offered for sale by the permittee. Municipal approval of a full-service retail outlet must be based on the same standards and criteria, established by ordinance, for the evaluation and approval of retail licenses. A municipality may not impose any requirement or restriction in connection with the approval that the municipality does not impose on retail licensees.

### **How do I fill out Form AB-105 and begin the application process?**

Authorizations requested on Form AB-105 must be applied for only one premises in one municipality at a time. To request multiple authorizations, submit a separate Form AB-105 for each location/premises.

Parts A, B, and F: Applicants must complete Parts A, B, and F.

Parts C, D, and E: Complete only one Part. Form AB-105 must be used to request only one authorization at a time.

**Example:** A producer applicant requesting full-service retail sales authorization on the production premises should complete Parts A, B, C, and F.

**Example:** A producer applicant requesting a fixed full-service retail outlet should complete Parts A, B, D, and F.

**Example:** A producer applicant requesting an unlimited transfer full-service retail outlet should complete Parts A, B, E, and F. Producer applicants requesting authorization in Part E must complete one Form AB-105 for each premises. Applicants may use the same Form AB-105 to request authorization for multiple dates and times occurring on the same premises.

Municipal approval is required for authorizations requested in Parts D and E. If a producer is applying for authorization in either of these sections, the completed application must first be submitted to the governing municipality.

After the municipality has granted approval by completing Part G, the applicant should submit AB-105 to the Division of Alcohol Beverages for final approval. If the applicant is only requesting authorization in Part C, the application does not require municipal approval and may be submitted directly to the Division of Alcohol Beverages.

## **Specific Instructions:**

### *Part A: Producer Information*

- Box 1: Enter the legal business name.
- Box 2: Enter the trade name or “doing business as” name, if different than the name in box 1.
- Box 3: Enter the name of the approved agent appointed for your producer permit.
- Box 4: Enter Federal Employer Identification Number (FEIN).
- Box 5: Enter Wisconsin seller’s permit number.
- Box 6: Enter the 15-digit Wisconsin Tax Account Number of the permit that these authorizations should be associated with.
- Box 7: Check the corresponding producer permit type.
- Box 8-10: Enter contact person’s name.
- Box 11: Enter contact person’s phone number.
- Box 12: Enter contact person’s email address.

### *Part B: Production Quantity*

- Check the highest cumulative total of alcohol beverages produced in any one of the three preceding calendar years for each specific permit type held.
  - Do not include alcohol beverages produced under a contract production agreement.
- Enter the calendar year in which the highest cumulative total of alcohol beverages produced was met.
- Enter the exact quantity of alcohol beverages produced.
- If an applicant holds more than one type of permit or multiple permits of the same type, the aggregate number of full-service retail outlets that may be established is the maximum number authorized under their permit type, but not exceeding three full-service retail outlets.
  - Under these circumstances, each authorized full-service retail outlet shall serve as the full-service retail outlet associated with each applicable permit, regardless of whether permittee would otherwise be entitled to fewer full-service retail outlets when calculated under their other permit(s).

### *Part C: Request for Full-Service Retail Sales at the Production Premises*

- Authorization under this portion does not require municipal approval. If the applicant is not seeking other retail authorizations on this form, it can be submitted directly to the Division of Alcohol Beverages.
- Box 1: Enter the date that you would like to begin full-service retail sales.
- Box 2-5: List the premises address for the permit identified in Part A, boxes 5 and 6.
- Box 6: Name the county where the production premises is located.
- Box 7: Name the governing municipality where the production premises is located.

### *Part D: Request for Fixed Full-Service Retail Outlet*

- Authorization under this section must be approved by the municipality in which the retail outlet is located prior to submitting to the Division of Alcohol Beverages for final approval.
- Box 1: Check yes if you are applying to transfer a fixed full-service outlet from one location to another. Fixed Full-Service Retail Outlets may be transferred from place-to-place once per year with approval of the municipality that governs the new location.
- Boxes 2-9: Complete these boxes if you checked yes in box 1 to describe the current premises you are applying to transfer.

- Box 10: Enter the date that you would like to open the full-service retail outlet for business.
- Boxes 11-18: Complete these boxes to describe the location of your new premises.
- Box 19: Describe the premises in detail. Include outdoor spaces if the municipality allows it. Attach a floor plan if possible.

**Example:** The premises is located at 1234 Main St., Realtown, WI 12345 and includes only the first-floor bar room, dining room, kitchen, north storage room, and south office of the 5,000-square-foot building.

- Box 20: Producers may operate a restaurant on the premises of a full-service retail outlet with municipal and division approval.
- Box 21: Check all types of alcohol beverages that will be offered for sale at the full-service retail outlet, including beverages made by the producer or producer group.
- Box 22: Check all the alcohol beverages that are made by the producer under all their permits.
- Box 23: Check all types of service that apply to this full-service retail outlet.
  - Samples mean 3 oz. of beer, 3 oz. of wine, or 0.5 oz. of liquor provided free of charge to an individual.
  - On-premises consumption means alcohol beverages served by the glass to be consumed by the customer at the premises identified in Box 18.
  - Off-premises consumption means alcohol beverages sold in original, unopened containers for customers to consume away from the premises identified in Box 18.

*Part E: Request for Unlimited Transfer Full-Service Retail Outlet*

- Authorizations under Part E must be for dates of operation where the unlimited transfer location will be located at the same premises in the same municipality. You must use a new Form AB-105 to request authorization for each separate premises, regardless of whether the separate premises are in the same municipality.
- Box 1: If you are requesting authorization to initiate or move your unlimited transfer outlet to a specific event like a farmer's market, festival, or other community event, name it here.
- Box 2: List the requested dates of operation. Attach a schedule or calendar of events, if necessary.
- Box 3: List the requested hours of operation. If no hours are listed, the approving municipality and the Division will assume you are seeking authorization to operate during all hours allowed under Chapter 125, Wis. Stats.
- Box 4-9: Identify the premises address.
- Box 10-13: If you are requesting authorization to move your unlimited transfer outlet to a specific event, provide contact information for the event organizer, if not the named applicant.
- Box 14: Describe the premises in detail. Include outdoor spaces if the municipality allows it. Attach a floor plan if possible.

**Example:** The premises is located at 1234 Main St., Realtown, WI, 12345, and includes only the first-floor bar room, dining room, kitchen, north storage room, and south office of the 5,000 square foot building.

**Example:** The premises is the 1,000-square-foot tent within the southwest corner of the parking lot located at XYZ Church at 3456 Main St., Realtown, WI, 12345. All sales and storage of alcohol beverages and records will occur within the 1,000-square-foot tent in the southwest corner of the parking lot.

**Example:** The premises is located at PDQ Park (7890 Main St., Realtown, WI, 12345). A 5,000-square-foot tent will be constructed in the northeast corner of the park bordering the tree line and northern fence. All alcohol beverage sales and consumption will occur at this tent. Premises includes the adjacent north park office and the space between the tent and the office. Alcohol beverages and records will be securely stored in the north park office for the duration of the event.

- Box 15-17: Provide the name and contact information for a person who will be in control of the premises for the duration of the requested time.
- Box 18: Producers may operate a restaurant on the premises of a full-service retail outlet with municipal and Division of Alcohol Beverages approval.
- Box 19: Check all types of alcohol beverages that will be offered for sale at the full-service retail outlet, including beverages made by the producer under all their permits.
- Box 20: Check all the alcohol beverages that are made by the producer under all their permits.
- Box 21: Check all the types of service that apply to this full-service retail outlet.
  - Samples mean 3 oz. of beer, 3 oz. of wine, or 0.5 oz. of liquor provided free of charge to an individual.
  - On-premises consumption means alcohol beverages served by the glass to be consumed by the customer at the premises identified in Box 14.

- Off-premises consumption means alcohol beverages sold in original, unopened containers for customers to consume away from the premises identified in Box 14.

#### *Part F: Attestation*

- Read the attestation carefully, then sign and date.

#### *Part G: For Municipal Use Only*

- Box 1: Check yes or no to indicate if the municipality will limit the scope of alcohol beverages offered for sale at this full-service retail outlet.
- Box 2: Check yes or no to indicate if the municipality will impose other requirements or restrictions on the full-service retail outlet.
- Box 3: Describe any limitations the municipality has placed on the full-service retail outlet as indicated in questions 1 or 2. Some limitations may be: parking, zoning, or noise ordinance restrictions; not allowing sales of alcohol beverages for off-premises consumption.
- Box 4-10: The municipal official completing this part should fill in the information requested.

### **Completion and Submission of Form AB-105**

- The producer applicant should complete Parts A, B, and F completely, and either Part C, D, or E, depending on the type of authorization requested.
- If requesting only a Part C authorization, the application can be submitted directly to the Division of Alcohol Beverages. No municipal approval is required for Part C authorizations.
- If requesting a Part D or E authorization, provide the application to the municipality where the proposed full-service retail outlet will be located.
  - The municipality should complete Part G and return it to the producer applicant.
  - The producer applicant should provide the completed AB-105 to the Division of Alcohol Beverages for final approval.
- Sales of alcohol beverages at full-service retail outlets may not commence until the Division of Alcohol Beverages has provided final approval by way of issuing a printed authorization to the applicant to be posted at the retail premises identified in this application.

After Form AB-105 is completed by the producer and approved by the municipality in Part G, submit the form to the Division of Alcohol Beverages for final approval in one of two ways:

- Email: [DORAlcoholPermits@wisconsin.gov](mailto:DORAlcoholPermits@wisconsin.gov)

- Mail the form to the following address:

Wisconsin Department of Revenue  
Division of Alcohol Beverages  
P.O. Box 8934  
Madison, WI 53708-8934

### **Assistance**

This form is designed by the Department of Revenue. If you require assistance with this form, consider reaching out to the Division of Alcohol Beverages for assistance with submission of this application and associated forms.

If you have questions about alcohol beverage laws and regulations, you may contact the Division of Alcohol Beverages using the contact information below.

**Website:** [DOR Alcohol Beverage \(wi.gov\)](http://DORAlcoholBeverage.wi.gov)

**Write:** [DORAlcohol@wisconsin.gov](mailto:DORAlcohol@wisconsin.gov)

**Call:** (608) 266-2526

Part A: Producer Information		
1. Business Legal Name (individual name if sole proprietor)		
2. Business Name or DBA	3. Agent Name	
4. FEIN	5. Wisconsin Seller's Permit Number	
6. Wisconsin Producer Permit Number	7. Producer Type <input type="checkbox"/> Brewery <input type="checkbox"/> Winery <input type="checkbox"/> Liquor Manufacturer/Rectifier	
8. Contact Person's First Name	9. Last Name	10. M.I.
11. Contact Person's Phone	12. Contact Person's Email	

Part B: Production Quantity		
<p><b>Note:</b> Check appropriate quantity for permit held (see instructions). If you hold more than one producer permit, check the total aggregate quantity produced for each type of permit. Enter the highest quantity produced in any of the last three calendar years.</p>		
Brewery	Manufacturer/Rectifier	Winery
<input type="checkbox"/> Less than 250 barrels <input type="checkbox"/> 250 - 2,499 barrels <input type="checkbox"/> 2,500 - 7,499 barrels <input type="checkbox"/> 7,500 or more barrels	<input type="checkbox"/> Less than 1,500 liters <input type="checkbox"/> 1,500 - 4,999 liters <input type="checkbox"/> 5,000 - 34,999 liters <input type="checkbox"/> 35,000 or more liters	<input type="checkbox"/> Less than 1,000 gallons <input type="checkbox"/> 1,000 - 4,999 gallons <input type="checkbox"/> 5,000 - 24,999 gallons <input type="checkbox"/> 25,000 or more gallons
Calendar year:	Calendar year:	Calendar year:
Quantity:	Quantity:	Quantity:

**Complete only ONE of Part C, D or E.**

Part C: Request for Full-Service Retail Sales at the Production Premises		
1. Start Date	2. Production Premises Address	
3. City	4. State	5. Zip Code
6. County	7. Governing Municipality <input type="checkbox"/> City <input type="checkbox"/> Town <input type="checkbox"/> Village of: _____	

Part D: Request for Fixed Full-Service Retail Outlet		
1. Are you transferring one fixed full-service retail outlet to a new location? ..... <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, complete boxes 2 through 9.		
2. Current Outlet Name		
3. Current Outlet Premises Address		
4. City	5. State	6. Zip Code
7. County	8. Governing Municipality <input type="checkbox"/> City <input type="checkbox"/> Town <input type="checkbox"/> Village of: _____	
9. Premises Phone Number		

*Continued* →

**Part D: Request for Fixed Full-Service Retail Outlet (Cont.)****New Fixed Retail Outlet Information (complete boxes 10 through 23)**

10. Start Date		11. New Outlet Name	
12. New Outlet Premises Address			
13. City		14. State	15. Zip Code
16. County	17. Governing Municipality <input type="checkbox"/> City <input type="checkbox"/> Town <input type="checkbox"/> Village		18. Premises Phone Number
of: _____			
19. Premises Description - Describe the building or buildings and any outside areas where alcohol beverages are produced, sold, stored, or consumed, and related records are kept. Describe all rooms within the building, including living quarters. Authorized alcohol beverage activities and storage of records may occur only on the premises described in this application. Attach a map or diagram and additional sheets if necessary.			
20. Will you operate a restaurant on the premises? . . . . . <input type="checkbox"/> Yes <input type="checkbox"/> No			
21. What alcohol beverages will be offered for sale? (check all that apply) . . . . . <input type="checkbox"/> Beer <input type="checkbox"/> Wine <input type="checkbox"/> Intoxicating Liquor (other than wine)			
22. What alcohol beverages does the permittee produce? (check all that apply) <input type="checkbox"/> Beer <input type="checkbox"/> Wine <input type="checkbox"/> Intoxicating Liquor (other than wine)			
23. How will customers be served? (check all that apply) . . . <input type="checkbox"/> Samples <input type="checkbox"/> On-premises consumption <input type="checkbox"/> Off-premises consumption			

**Part E: Request for Unlimited Transfer Full-Service Retail Outlet**

1. Name of Event (if applicable)		
2. Dates of Operation (attach a schedule, if necessary)		3. Hours of Operation
4. Premises Address		
5. City		6. State 7. Zip Code
8. County		9. Governing Municipality <input type="checkbox"/> City <input type="checkbox"/> Town <input type="checkbox"/> Village
of: _____		
10. Organizer of Event (if not the named applicant)		11. Email and/or Phone Number for Organizer of Event
12. Organizer Website		13. Event Website
14. Premises Description - Describe the building or buildings and any outside areas where alcohol beverages are produced, sold, stored, or consumed, and related records are kept. Describe all rooms within the building, including living quarters. Authorized alcohol beverage activities and storage of records may occur only on the premises described in this application. Attach a map or diagram and additional sheets if necessary.		
15. On-Site Contact (Last Name, First Name)		16. On-Site Contact Phone 17. On-Site Contact Email
18. Will you operate a restaurant on the premises? . . . . . <input type="checkbox"/> Yes <input type="checkbox"/> No		
19. What alcohol beverages will be offered for sale? (check all that apply) . . . . . <input type="checkbox"/> Beer <input type="checkbox"/> Wine <input type="checkbox"/> Intoxicating Liquor (other than wine)		
20. What alcohol beverages does the permittee produce? (check all that apply) <input type="checkbox"/> Beer <input type="checkbox"/> Wine <input type="checkbox"/> Intoxicating Liquor (other than wine)		
21. How will customers be served? (check all that apply) . . . <input type="checkbox"/> Samples <input type="checkbox"/> On-premises consumption <input type="checkbox"/> Off-premises consumption		

**Part F: Attestation**

Who must sign this application?


- sole proprietor      • general partner of a partnership      • corporate officer      • member of an LLC

**READ CAREFULLY BEFORE SIGNING:**

I understand and agree to the following:

- I will not operate this location outside of the dates and times approved by the municipality and Division of Alcohol Beverages.
- I will operate this location according to municipal ordinance and restrictions imposed as a condition of receiving this authorization.
- I will purchase alcohol beverages I do not produce from an authorized source, such as a Wisconsin-permitted wholesaler.
- I will operate this location according to Wisconsin law and administrative regulation including but not limited to: underage restrictions, closing hours, licensed operators, and record keeping requirements.

Further, under penalty of law, I have answered each of the above questions completely and truthfully. I agree that I am acting solely on behalf of the applicant business and not on behalf of any other individual or entity seeking the authorization. Further, I agree that the rights and responsibilities conferred by the authorization, if granted, will not be assigned to another individual or entity. I understand that lack of access to any portion of a premises during inspection will be deemed a refusal to allow inspection. Such refusal is a misdemeanor and grounds for revocation of this authorization. I understand that any authorization issued contrary to Wis. Stats. Chapter 125 shall be void under penalty of Wisconsin law. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Signature 		Date		
Last Name		First Name		M.I.
Title	Email	Phone		

**Part G: For Municipal Use Only (Complete if Requesting Authorization in Part D or E)**

1. Will the municipality limit the scope of alcohol beverages offered for sale? . . . . . <input type="checkbox"/> Yes <input type="checkbox"/> No		
2. Will the municipality impose any requirements or restrictions for the full-service retail outlet? . . . . . <input type="checkbox"/> Yes <input type="checkbox"/> No		
3. Describe municipal restrictions indicated in questions 1 or 2 above.		
4. Last Name of Municipal Official	5. First Name	6. M.I.
7. Signature of Municipal Official		8. Date
9. Date Application was Filed with Clerk	10. Date Full-Service Retail Outlet Approved by Governing Body	

# Form AB-105 Instructions

## *Producer Full-Service Retail Sales Application*

### **Who may apply for full-service retail sales?**

Producer permittees may apply for full-service retail sales on or off the production premises. Producer permittees include brewers, rectifiers, manufacturers, and wineries.

### **Who qualifies for full-service retail sales?**

- A brewery that manufactures a minimum of 250 barrels of fermented malt beverages.
- A manufacturer/rectifier that produces a minimum of 1,500 liters of intoxicating liquor.
- A winery that produces a minimum of 1,000 gallons of wine.

### **What are full-service retail sales?**

Permittees that are granted full-service retail sales privileges may:

- Sell fermented malt beverages and intoxicating liquor at retail for on- or off-premises consumption at their production premises and at one or more off-site full-service retail outlets.
- Provide taste samples of fermented malt beverages and intoxicating liquor.

### **What are full-service retail outlets?**

Full-service retail outlets are authorized locations for full-service retail sales at places other than the permittee's production premises.

### **What is the difference between a fixed and unlimited transfer full-service retail outlet?**

Fixed full-service retail outlets may be transferred from one location to another once per year. Unlimited transfer full-service retail outlets may be transferred an unlimited number of times in a year. Only one of a producer's full-service retail outlets may be transferred without limitation on frequency.

### **How many full-service retail outlets may I have?**

The number of full-service retail outlets a producer qualifies for is determined by alcohol beverage production volume. Producers may have a maximum of three full-service outlets, regardless of the number or type of producer permits they hold.

### **Who approves full-service retail sales?**

Full-service retail sales on the production premises need only be approved by the Division of Alcohol Beverages. Municipalities do not issue licenses for full-service retail sales outlets; however, municipalities must approve of the outlets. The applicant must forward the municipal approval to the Division of Alcohol Beverages for final granting of the authority for sales to commence on the premises.

### **Can a municipality limit authorized sales at a full-service retail outlet?**

Yes, a municipality can limit authorized sales at a full-service retail outlet. Municipalities may limit the scope of alcohol beverages offered for sale by the permittee. Municipal approval of a full-service retail outlet must be based on the same standards and criteria, established by ordinance, for the evaluation and approval of retail licenses. A municipality may not impose any requirement or restriction in connection with the approval that the municipality does not impose on retail licensees.

### **How do I fill out Form AB-105 and begin the application process?**

Authorizations requested on Form AB-105 must be applied for only one premises in one municipality at a time. To request multiple authorizations, submit a separate Form AB-105 for each location/premises.

Parts A, B, and F: Applicants must complete Parts A, B, and F.

Parts C, D, and E: Complete only one Part. Form AB-105 must be used to request only one authorization at a time.

**Example:** A producer applicant requesting full-service retail sales authorization on the production premises should complete Parts A, B, C, and F.

**Example:** A producer applicant requesting a fixed full-service retail outlet should complete Parts A, B, D, and F.

**Example:** A producer applicant requesting an unlimited transfer full-service retail outlet should complete Parts A, B, E, and F. Producer applicants requesting authorization in Part E must complete one Form AB-105 for each premises. Applicants may use the same Form AB-105 to request authorization for multiple dates and times occurring on the same premises.

Municipal approval is required for authorizations requested in Parts D and E. If a producer is applying for authorization in either of these sections, the completed application must first be submitted to the governing municipality.

After the municipality has granted approval by completing Part G, the applicant should submit AB-105 to the Division of Alcohol Beverages for final approval. If the applicant is only requesting authorization in Part C, the application does not require municipal approval and may be submitted directly to the Division of Alcohol Beverages.

## **Specific Instructions:**

### *Part A: Producer Information*

- Box 1: Enter the legal business name.
- Box 2: Enter the trade name or “doing business as” name, if different than the name in box 1.
- Box 3: Enter the name of the approved agent appointed for your producer permit.
- Box 4: Enter Federal Employer Identification Number (FEIN).
- Box 5: Enter Wisconsin seller’s permit number.
- Box 6: Enter the 15-digit Wisconsin Tax Account Number of the permit that these authorizations should be associated with.
- Box 7: Check the corresponding producer permit type.
- Box 8-10: Enter contact person’s name.
- Box 11: Enter contact person’s phone number.
- Box 12: Enter contact person’s email address.

### *Part B: Production Quantity*

- Check the highest cumulative total of alcohol beverages produced in any one of the three preceding calendar years for each specific permit type held.
  - Do not include alcohol beverages produced under a contract production agreement.
- Enter the calendar year in which the highest cumulative total of alcohol beverages produced was met.
- Enter the exact quantity of alcohol beverages produced.
- If an applicant holds more than one type of permit or multiple permits of the same type, the aggregate number of full-service retail outlets that may be established is the maximum number authorized under their permit type, but not exceeding three full-service retail outlets.
  - Under these circumstances, each authorized full-service retail outlet shall serve as the full-service retail outlet associated with each applicable permit, regardless of whether permittee would otherwise be entitled to fewer full-service retail outlets when calculated under their other permit(s).

### *Part C: Request for Full-Service Retail Sales at the Production Premises*

- Authorization under this portion does not require municipal approval. If the applicant is not seeking other retail authorizations on this form, it can be submitted directly to the Division of Alcohol Beverages.
- Box 1: Enter the date that you would like to begin full-service retail sales.
- Box 2-5: List the premises address for the permit identified in Part A, boxes 5 and 6.
- Box 6: Name the county where the production premises is located.
- Box 7: Name the governing municipality where the production premises is located.

### *Part D: Request for Fixed Full-Service Retail Outlet*

- Authorization under this section must be approved by the municipality in which the retail outlet is located prior to submitting to the Division of Alcohol Beverages for final approval.
- Box 1: Check yes if you are applying to transfer a fixed full-service outlet from one location to another. Fixed Full-Service Retail Outlets may be transferred from place-to-place once per year with approval of the municipality that governs the new location.
- Boxes 2-9: Complete these boxes if you checked yes in box 1 to describe the current premises you are applying to transfer.

- Box 10: Enter the date that you would like to open the full-service retail outlet for business.
- Boxes 11-18: Complete these boxes to describe the location of your new premises.
- Box 19: Describe the premises in detail. Include outdoor spaces if the municipality allows it. Attach a floor plan if possible.

**Example:** The premises is located at 1234 Main St., Realtown, WI 12345 and includes only the first-floor bar room, dining room, kitchen, north storage room, and south office of the 5,000-square-foot building.

- Box 20: Producers may operate a restaurant on the premises of a full-service retail outlet with municipal and division approval.
- Box 21: Check all types of alcohol beverages that will be offered for sale at the full-service retail outlet, including beverages made by the producer or producer group.
- Box 22: Check all the alcohol beverages that are made by the producer under all their permits.
- Box 23: Check all types of service that apply to this full-service retail outlet.
  - Samples mean 3 oz. of beer, 3 oz. of wine, or 0.5 oz. of liquor provided free of charge to an individual.
  - On-premises consumption means alcohol beverages served by the glass to be consumed by the customer at the premises identified in Box 18.
  - Off-premises consumption means alcohol beverages sold in original, unopened containers for customers to consume away from the premises identified in Box 18.

*Part E: Request for Unlimited Transfer Full-Service Retail Outlet*

- Authorizations under Part E must be for dates of operation where the unlimited transfer location will be located at the same premises in the same municipality. You must use a new Form AB-105 to request authorization for each separate premises, regardless of whether the separate premises are in the same municipality.
- Box 1: If you are requesting authorization to initiate or move your unlimited transfer outlet to a specific event like a farmer's market, festival, or other community event, name it here.
- Box 2: List the requested dates of operation. Attach a schedule or calendar of events, if necessary.
- Box 3: List the requested hours of operation. If no hours are listed, the approving municipality and the Division will assume you are seeking authorization to operate during all hours allowed under Chapter 125, Wis. Stats.
- Box 4-9: Identify the premises address.
- Box 10-13: If you are requesting authorization to move your unlimited transfer outlet to a specific event, provide contact information for the event organizer, if not the named applicant.
- Box 14: Describe the premises in detail. Include outdoor spaces if the municipality allows it. Attach a floor plan if possible.

**Example:** The premises is located at 1234 Main St., Realtown, WI, 12345, and includes only the first-floor bar room, dining room, kitchen, north storage room, and south office of the 5,000 square foot building.

**Example:** The premises is the 1,000-square-foot tent within the southwest corner of the parking lot located at XYZ Church at 3456 Main St., Realtown, WI, 12345. All sales and storage of alcohol beverages and records will occur within the 1,000-square-foot tent in the southwest corner of the parking lot.

**Example:** The premises is located at PDQ Park (7890 Main St., Realtown, WI, 12345). A 5,000-square-foot tent will be constructed in the northeast corner of the park bordering the tree line and northern fence. All alcohol beverage sales and consumption will occur at this tent. Premises includes the adjacent north park office and the space between the tent and the office. Alcohol beverages and records will be securely stored in the north park office for the duration of the event.

- Box 15-17: Provide the name and contact information for a person who will be in control of the premises for the duration of the requested time.
- Box 18: Producers may operate a restaurant on the premises of a full-service retail outlet with municipal and Division of Alcohol Beverages approval.
- Box 19: Check all types of alcohol beverages that will be offered for sale at the full-service retail outlet, including beverages made by the producer under all their permits.
- Box 20: Check all the alcohol beverages that are made by the producer under all their permits.
- Box 21: Check all the types of service that apply to this full-service retail outlet.
  - Samples mean 3 oz. of beer, 3 oz. of wine, or 0.5 oz. of liquor provided free of charge to an individual.
  - On-premises consumption means alcohol beverages served by the glass to be consumed by the customer at the premises identified in Box 14.

- Off-premises consumption means alcohol beverages sold in original, unopened containers for customers to consume away from the premises identified in Box 14.

#### *Part F: Attestation*

- Read the attestation carefully, then sign and date.

#### *Part G: For Municipal Use Only*

- Box 1: Check yes or no to indicate if the municipality will limit the scope of alcohol beverages offered for sale at this full-service retail outlet.
- Box 2: Check yes or no to indicate if the municipality will impose other requirements or restrictions on the full-service retail outlet.
- Box 3: Describe any limitations the municipality has placed on the full-service retail outlet as indicated in questions 1 or 2. Some limitations may be: parking, zoning, or noise ordinance restrictions; not allowing sales of alcohol beverages for off-premises consumption.
- Box 4-10: The municipal official completing this part should fill in the information requested.

### **Completion and Submission of Form AB-105**

- The producer applicant should complete Parts A, B, and F completely, and either Part C, D, or E, depending on the type of authorization requested.
- If requesting only a Part C authorization, the application can be submitted directly to the Division of Alcohol Beverages. No municipal approval is required for Part C authorizations.
- If requesting a Part D or E authorization, provide the application to the municipality where the proposed full-service retail outlet will be located.
  - The municipality should complete Part G and return it to the producer applicant.
  - The producer applicant should provide the completed AB-105 to the Division of Alcohol Beverages for final approval.
- Sales of alcohol beverages at full-service retail outlets may not commence until the Division of Alcohol Beverages has provided final approval by way of issuing a printed authorization to the applicant to be posted at the retail premises identified in this application.

After Form AB-105 is completed by the producer and approved by the municipality in Part G, submit the form to the Division of Alcohol Beverages for final approval in one of two ways:

- Email: [DORAlcoholPermits@wisconsin.gov](mailto:DORAlcoholPermits@wisconsin.gov)
- Mail the form to the following address:

Wisconsin Department of Revenue  
Division of Alcohol Beverages  
P.O. Box 8934  
Madison, WI 53708-8934

### **Assistance**

This form is designed by the Department of Revenue. If you require assistance with this form, consider reaching out to the Division of Alcohol Beverages for assistance with submission of this application and associated forms.

If you have questions about alcohol beverage laws and regulations, you may contact the Division of Alcohol Beverages using the contact information below.

**Website:** [DOR Alcohol Beverage \(wi.gov\)](http://DORAlcoholBeverage.wi.gov)

**Write:** [DORAlcohol@wisconsin.gov](mailto:DORAlcohol@wisconsin.gov)

**Call:** (608) 266-2526

## City of Pewaukee - New Agenda Item

### Agenda Language:

Discussion and possible action regarding on-site mobile food truck and/or cold treat vendor at Pewaukee Sports Complex.

### Sub Item Agenda Language:

### Background Provided By:

Nick Phalin

### Background:

The Parks and Recreation office has been approached by multiple cold treat vendors requesting approval of their vending service to provide a cold treat option at Pewaukee Sports Complex specifically near the Play Pewaukee All-Inclusive Playground and Garrison's Splash Pad. Currently, there is an ordinance in both City and Village parks that does not allow mobile food vendors (food trucks) in parks, or on streets, without a permit or approval. During weekdays at the Sports Complex, there is likely a captive audience of playground and splash pad attendees that would frequent this type of vendor.

If the Board is interested in allowing this option, the Parks and Recreation office would suggest an RFP process with specifics laid out that would include days, availability, expectation and potential fee structure.

### Fiscal Impact:

Other food truck usage or attendance has been in conjunction with our special events and built-in audience. The department has received a contribution from time to time, but other times it has been part of a larger event that we are supplementing opportunities to eat, stay and enjoy our event. Staff would suggest a fee structure in place for any vendor to be on site to create a revenue stream and help offset any trash increase.

### Recommended Motion:

City of Pewaukee - New Agenda Item

Agenda Language:

Discussion and possible action regarding temporary dog play area opportunities at Pewaukee parks.

Sub Item Agenda Language:

Background Provided By:

Nick Phalin

Background:

The attached document reviews information for a temporary dog play area that could be relocated to multiple Pewaukee parks. It includes locations, products, costs and more.

Fiscal Impact:

The proposed funding source would be

Recommended Motion:

### **Temporary Dog Play Area Opportunity**

Synopsis: The Pewaukee Parks and Recreation Department, in partnership with the Friends of the Parks of Pewaukee, has been actively fundraising since 2021 with the goal of developing a community dog park. This effort aligns with the Department's Parks and Open Space Plan, which identifies community interest in dedicated off-leash dog space.

Since 2021, more than \$13,000 has been raised through the annual Lake Country Canine Carnival via sponsorships, donations, and event sales. In addition to serving as a successful fundraising mechanism, the event has become a highly regarded, dog-friendly community gathering that highlights the demand for canine-focused amenities in Pewaukee.

As funding has reached a meaningful level, a permanent and suitable location for a traditional dog park has not yet been identified or made available. In response, Recreation Manager Monica Kaskey has researched alternative approaches and identified several communities that have successfully implemented mobile or "pop-up" dog parks. These flexible models have proven effective in meeting resident needs while maximizing use of existing park space.

Based on this research, the Department is providing information for a temporary, relocatable dog play area concept that would rotate between select park locations. This approach would allow temporary fenced dog play areas to be installed and relocated periodically, giving turf and natural areas time to recover after approximately three months of use. The Department would aim to identify 2–4 suitable park sites, carefully coordinating locations and timing around existing park usage and programming.

The proposed operating season would run from May 1 through October 31, utilizing two park locations annually. Tentative scheduling would include one site from May 1 through July 31, and a second site from August 1 through October 31.

To support operations and maintenance, an admission structure is proposed, including a seasonal pass with a resident and non-resident fee. Fees would be assessed per household rather than per dog, consistent with comparable municipal programs, while also identifying this is a unique venture that provides an opportunity closer to many Pewaukee households. Participation requirements would include dog registration and proof of current rabies vaccination, with consideration given to requiring proof of municipal licensing as well. One-day passes may be paid electronically on-site with a signed agreement.

This phased, flexible approach allows the Department to respond directly to community interest identified in the Parks and Open Space Plan while continuing to evaluate long-term opportunities for a permanent dog park location.

### **Implementation**

- Park will be open from dawn to dusk daily from ~ May 1<sup>st</sup> – October 31<sup>st</sup>.
- Dog Park Permits will be purchased from the Pewaukee Parks & Recreation department on a yearly basis.
- At that time, owners will be assigned a 4-digit code number.
- Attendees must scan a QR code (or access a website) to check in when arriving at the dog park. (This is to let us know who is there if we need to get that information and also to keep track of the amount of use the location is receiving). This method is not perfect but is a good start to collecting important data without accruing any services or fees with entry software. We know this method will not produce 100% compliance.

### **Potential Additional Supplies to Purchase**

- Signage
- Picnic tables or bench seating

### **Potential Locations:**

Kiwanis Village Park (NW area, previous ball diamond)



Balmer Park



- Other potential options
  - Wagner Park
  - Nettesheim Park
  - Pewaukee Sports Complex

Product Options

- Easy Pet Fence (specs – 16 or 14-gauge galvanized steel black PVC coated welded wire 1” x 1” mesh) – quote/product attached for 1,200 linear feet, gates, two sets of anchor sleeves to allow for multiple sites
- Temporary fence panels
- Self-install chain link fence kit

Preferred Option – Easy Pet Fence; with further staff investigation on permanent locations down the road and/or donation/sponsored options

- Designed specifically for the venture we have researched with mobile relocation in mind, height, double entrance gate access
- Creates relatively easy initial install, as well as ground anchor sleeves for return use and install efficiency
- Comes with double gate for best practice dog park entry
- Cost effective
- Staff to continue reviewing future options if appropriate land options become available for a permanent location. Future cost savings potential to work with fence companies to determine possibility of permanent fence at locations with opportunities for naming rights/sponsorship of/etc.

#### Costs

- Easy Pet Fence –
  - 16-gauge - \$9,641
  - 14-gauge - \$10,174
- Secondary set of sleeves for in-ground - \$3,314
- Pet waste stations + bags - \$650 (2 units)
- Total - \$13,605 (16-gauge) or \$14,138 (14-gauge)
- Total with 15% contingency – up to \$16,259

#### Proposed Funding:

1. 1<sup>st</sup> funding source - Friends of the Parks (Lake Country Canine Carnival generated) - \$13,253 available
2. 2<sup>nd</sup> funding source - City Capital Dog Park Fund - \$19,086 available (Remainder of what is needed to complete)

#### Next Steps:

- Joint Parks & Recreation Board approval – concept and suggested funding; 6/10/26
- Common Council – concept and funding (city capital); 6/15/26
- Village Board – concept and potential funding; 6/16/26
- Friends of the Parks – formal funding allocation; after approvals

DRAFT

City of Pewaukee - New Agenda Item

Agenda Language:  
Discussion and possible action regarding Laimon Park financials for May 2026.

Sub Item Agenda Language:

Background Provided By:

Background:

Fiscal Impact:

Recommended Motion:

## MONTHLY REVENUES AND EXPENSES TO BUDGET

		REVENUE								
Account Number		2026 JAN	2026 FEB	2026 MAR	2026 APR	2026 MAY	2026 YTD Total	2026 Budget	YTD to Budget	YTD % to Budget
960-00-40421-001-000	CONTRIBUTED CAPITAL	-	-	-	-	-	-	-	-	0.00%
960-00-40439-000-000	USE OF FUND BALANCE	-	-	-	-	-	-	-	-	0.00%
960-00-40474-000-000	OTHER REVENUE/GRANTS	-	-	-	-	450.00	450.00	-	450.00	0.00%
960-00-40622-001-000	GASOLINE SALES	-	-	-	-	3,233.46	3,233.46	81,000.00	(77,766.54)	3.99%
960-00-40622-002-000	BOAT LAUNCH FEES	-	-	-	573.00	2,301.00	2,874.00	7,000.00	(4,126.00)	41.06%
960-00-40622-003-000	RENTAL REVENUES	83,737.50	-	-	(3,957.58)	4,410.00	84,189.92	80,000.00	4,189.92	105.24%
960-00-40622-004-000	RESIDENTIAL/COMM RENT PYMTS	7,379.22	-	3,689.61	3,800.29	3,800.29	18,669.41	45,271.00	(26,601.59)	41.24%
960-00-40635-000-000	DONATIONS	-	-	-	-	-	-	-	-	0.00%
960-00-40635-000-100	DONATION/DESIGNATED/LAIMONS	-	-	-	-	-	-	-	-	0.00%
960-00-40636-000-000	INTEREST INCOME	2,044.39	1,103.90	1,146.12	1,112.78	-	5,407.19	2,000.00	3,407.19	270.36%
<b>Total Revenues</b>		<b>\$ 93,161.11</b>	<b>\$ 1,103.90</b>	<b>\$ 4,835.73</b>	<b>\$ 1,528.49</b>	<b>\$ 14,194.75</b>	<b>\$ 114,823.98</b>	<b>\$ 215,271.00</b>	<b>\$ (100,447.02)</b>	<b>53%</b>

		EXPENSES								
Account Number		2026 JAN	2026 FEB	2026 MAR	2026 APR	2026 MAY	2026 YTD Total	2026 Budget	YTD to Budget	YTD % to Budget
960-00-50403-000-000	DEPRECIATION EXPENSE	-	-	-	-	-	-	-	-	0.00%
960-00-50427-000-000	PRINCIPAL/INTEREST ON DEBT	-	-	40,043.50	-	-	40,043.50	40,044.00	(0.50)	100.00%
960-00-51938-000-000	INSURANCE/PROP/LIABILITY/WC	3,090.35	-	350.00	-	-	3,440.35	5,200.00	(1,759.65)	66.16%
960-00-51940-000-000	LAKESIDE PARK LOAN PAYMENT EXP	-	-	-	-	-	-	-	-	0.00%
960-00-51950-000-000	LAND ACQUISITION EXPENSE	-	-	-	-	-	-	-	-	0.00%
960-00-51960-000-000	FISCAL AGENT FEE	163.94	14.95	18.98	-	12.81	210.68	1,200.00	(989.32)	17.56%
	<b>GENERAL GOVERNMENT EXPENSE</b>	<b>\$ 3,254.29</b>	<b>\$ 14.95</b>	<b>\$ 40,412.48</b>	<b>\$ -</b>	<b>\$ 12.81</b>	<b>\$ 43,694.53</b>	<b>46,444.00</b>	<b>(2,749.47)</b>	<b>94%</b>
960-00-55200-000-110	LAKESIDE PARK WAGES	-	-	-	1,376.17	-	1,376.17	5,500.00	(4,123.83)	25.02%
960-00-55200-000-130	LAKESIDE PARK FRINGE BENEFITS	-	-	-	-	-	-	-	-	0.00%
960-00-55200-000-140	LAKESIDE PARK UTILITIES EXP	-	-	241.58	(94.06)	-	147.52	1,050.00	(902.48)	14.05%
960-00-55200-000-150	GASOLINE EXPENSE	-	-	-	493.95	5,977.84	6,471.79	63,000.00	(56,528.21)	10.27%
960-00-55200-000-155	OPERATING SUPPLIES	2.22	-	0.74	0.74	2.22	5.92	5,500.00	(5,494.08)	0.11%
960-00-55200-000-156	GROUNDS & MAINTENANCE	-	-	-	471.50	2,015.71	2,487.21	16,500.00	(14,012.79)	15.07%
960-00-55200-000-160	EQUIPMENT MAINTENANCE	-	-	-	-	-	-	3,000.00	(3,000.00)	0.00%
960-00-55200-000-165	BUILDING MAINTENANCE	-	129.00	-	-	-	129.00	3,500.00	(3,371.00)	3.69%
960-00-55200-000-168	OTHER PROPERTY EXPENSE/TAXES	4,690.61	-	-	-	-	4,690.61	5,500.00	(809.39)	85.28%
	<b>CULTURE, MAINTENANCE &amp; TAXES</b>	<b>\$ 4,692.83</b>	<b>\$ 129.00</b>	<b>\$ 242.32</b>	<b>\$ 2,248.30</b>	<b>\$ 7,995.77</b>	<b>\$ 15,308.22</b>	<b>103,550.00</b>	<b>(88,241.78)</b>	<b>14.78%</b>
960-00-57605-000-000	CAPITAL OUTLAY - OTHER PARKS	-	-	-	-	-	-	-	-	0.00%
960-00-57610-000-000	LAKESIDE PARK CAPITAL OUTLAY	-	-	-	-	-	-	-	-	0.00%
200-00-55200-000-100	PARK IMPROVEMENTS - CAPITAL	-	-	-	-	-	-	-	-	0.00%
	<b>CAPITAL OUTLAY</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.00%</b>
<b>Total Expenses</b>		<b>\$ 7,947.12</b>	<b>\$ 143.95</b>	<b>\$ 40,654.80</b>	<b>\$ 2,248.30</b>	<b>\$ 8,008.58</b>	<b>\$ 59,002.75</b>	<b>\$ 149,994.00</b>	<b>\$ (90,991.25)</b>	<b>39%</b>

REVENUE											
Account Number		5/31/2021	5/31/2022	5/31/2023	5/31/2024	5/31/2025	5/31/2026	Prev Yr to		YTD % to	
								Current	2026 YTD Total		2026 Budget
960-00-40421-001-000	CONTRIBUTED CAPITAL	-	-	-	-	-	-	-	-	-	0.00%
960-00-40439-000-000	USE OF FUND BALANCE	-	-	-	-	-	-	-	-	-	0.00%
960-00-40474-000-000	OTHER REVENUE/GRANTS	-	52.17	-	-	-	450.00	450.00	450.00	-	0.00%
960-00-40622-001-000	GASOLINE SALES	3,390.03	5,730.42	6,070.86	6,740.99	5,722.47	3,233.46	(2,489.01)	3,233.46	81,000.00	3.99%
960-00-40622-002-000	BOAT LAUNCH FEES	695.25	1,594.00	1,960.00	3,798.42	1,678.00	2,301.00	623.00	2,874.00	7,000.00	41.06%
960-00-40622-003-000	RENTAL REVENUES	3,675.00	1,264.54	3,675.00	3,675.00	-	4,410.00	4,410.00	84,189.92	80,000.00	105.24%
960-00-40622-004-000	RESIDENTIAL/COMM RENT PYMTS	-	3,161.65	6,955.64	3,582.15	3,689.61	3,800.29	110.68	18,669.41	45,271.00	41.24%
960-00-40635-000-000	DONATIONS	-	-	-	-	-	-	-	-	-	0.00%
960-00-40635-000-100	DONATION/DESIGNATED/LAIMONS	-	-	-	-	-	-	-	-	-	0.00%
960-00-40636-000-000	INTEREST INCOME	1.57	20.09	168.07	199.70	179.40	-	(179.40)	5,407.19	2,000.00	270.36%
<b>Monthly Revenue Totals</b>		<b>\$ 7,761.85</b>	<b>\$ 11,822.87</b>	<b>\$ 18,829.57</b>	<b>\$ 17,996.26</b>	<b>\$ 11,269.48</b>	<b>\$ 14,194.75</b>	<b>\$ 2,925.27</b>	<b>\$ 114,823.98</b>	<b>\$ 215,271.00</b>	<b>53%</b>

EXPENSES											
Account Number		5/31/2021	5/31/2022	5/31/2023	5/31/2024	5/31/2025	5/31/2026	Prev Yr to		YTD % to	
								Current	2026 YTD Total		2026 Budget
960-00-50403-000-000	DEPRECIATION EXPENSE	-	-	-	-	-	-	-	-	40,044.00	0.00%
960-00-50427-000-000	PRINCIPAL/INTEREST ON DEBT	-	-	-	-	-	-	-	40,043.50	5,200.00	770.07%
960-00-51938-000-000	INSURANCE/PROP/LIABILITY/WC	-	-	-	4,425.95	-	-	-	3,440.35	-	0.00%
960-00-51940-000-000	LAKESIDE PARK LOAN PAYMENT EXP	-	-	-	-	-	-	-	-	-	0.00%
960-00-51950-000-000	LAND ACQUISITION EXPENSE	-	-	-	-	-	-	-	-	-	0.00%
960-00-51960-000-000	FISCAL AGENT FEE	-	-	-	(11.97)	12.30	12.81	0.51	210.68	1,200.00	0.00%
<b>GENERAL GOVERNMENT EXPENSE</b>		<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 4,413.98</b>	<b>\$ 12.30</b>	<b>\$ 12.81</b>	<b>\$ 0.51</b>	<b>\$ 43,694.53</b>	<b>\$ 46,444.00</b>	<b>94%</b>
960-00-55200-000-110	LAKESIDE PARK WAGES	-	-	-	1,734.87	-	-	-	1,376.17	5,500.00	25.02%
960-00-55200-000-130	LAKESIDE PARK FRINGE BENEFITS	-	-	-	-	-	-	-	-	-	0.00%
960-00-55200-000-140	LAKESIDE PARK UTILITIES EXP	-	-	259.87	315.28	207.11	-	(207.11)	147.52	1,050.00	14.05%
960-00-55200-000-150	GASOLINE EXPENSE	2,087.67	9,679.93	629.65	8,393.65	2,699.12	5,977.84	3,278.72	6,471.79	63,000.00	10.27%
960-00-55200-000-155	OPERATING SUPPLIES	274.09	1.06	1.20	100.66	2.76	2.22	(0.54)	5.92	5,500.00	0.11%
960-00-55200-000-156	GROUNDS & MAINTENANCE	296.69	-	-	11,650.00	-	2,015.71	2,015.71	2,487.21	16,500.00	15.07%
960-00-55200-000-160	EQUIPMENT MAINTENANCE	-	794.93	-	-	-	-	-	-	3,000.00	0.00%
960-00-55200-000-165	BUILDING MAINTENANCE	-	29.98	39.27	-	5,657.45	-	(5,657.45)	129.00	3,500.00	3.69%
960-00-55200-000-168	OTHER PROPERTY EXPENSE/TAXES	-	-	-	-	-	-	-	4,690.61	5,500.00	85.28%
<b>CULTURE, MAINTENANCE &amp; TAXES</b>		<b>\$ 2,658.45</b>	<b>\$ 10,505.90</b>	<b>\$ 929.99</b>	<b>\$ 22,194.46</b>	<b>\$ 8,566.44</b>	<b>\$ 7,995.77</b>	<b>\$ (570.67)</b>	<b>\$ 15,308.22</b>	<b>\$ 103,550.00</b>	<b>14.78%</b>
960-00-57605-000-000	CAPITAL OUTLAY - OTHER PARKS	-	-	-	-	33,150.50	-	(33,150.50)	-	-	0.00%
960-00-57610-000-000	LAKESIDE PARK CAPITAL OUTLAY	-	-	8,811.25	56,925.15	-	-	-	-	-	0.00%
<b>CAPITAL OUTLAY</b>		<b>\$ -</b>	<b>\$ -</b>	<b>\$ 8,811.25</b>	<b>\$ 56,925.15</b>	<b>\$ 33,150.50</b>	<b>\$ -</b>	<b>\$ (33,150.50)</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0%</b>
<b>Monthly Expense Totals</b>		<b>\$ 2,658.45</b>	<b>\$ 10,505.90</b>	<b>\$ 9,741.24</b>	<b>\$ 83,533.59</b>	<b>\$ 41,729.24</b>	<b>\$ 8,008.58</b>	<b>\$ (33,720.66)</b>	<b>\$ 59,002.75</b>	<b>\$ 149,994.00</b>	<b>39%</b>