Mineral Point, Wisconsin

CITY OF MINERAL POINT

137 HIGH STREET, SUITE 1
MINERAL POINT, WI 53565
608-987-2361

AGENDA

CITY OF MINERAL POINT POLICING & LICENSING COMMITTEE MEETING
Monday, December 1, 2025, 6:00 PM
City Hall Community Room

1. Call to Order, Roll Call, and Confirmation of Compliance with the Open Meetings Law.
2. Approval of August 6, 2025 Minutes.
3. Consideration of application for 2025-2026 Class "B" Beer and "Class C" Wine licenses for Little Wolf Farm, LLC, 337 Dodge Street, Gary Schmit, Agent. **Action:** Recommend Council approval or denial of license application.
4. Adjourn.

Agenda Posted and Distributed: Wednesday, November 26, 2025

Reasonable accommodations for participation in this meeting by persons with disabilities, as defined by the Americans with Disabilities Act, will be made upon request and if feasible. Please contact the City Clerk's office (608-987-2361) at least 24 hours prior to the scheduled meeting so that necessary accommodations can be provided.

MINUTES

CITY OF MINERAL POINT POLICE & LICENSING COMMITTEE MEETING
Wednesday, August 6, 2025, 5:30 P.M.
City Hall Community Room

CALL TO ORDER/ROLL CALL
Meeting called to order by Chair Graber at 5:30 PM.

Brian Graber, Chair	Present
Keith Burrows	Excused
Steph McKeon	Present
Others Present: Administrator Matt Honer, Clerk-Treasurer Christy Skelding, Police Chief Bob Weier, Alan Schrank, Brian Blanchette	

APPROVAL OF MINUTES – JUNE 4, 2025 MEETING
Motion (McKeon/Graber) to approve the minutes. Motion carried, all voting aye (2-0).

CONSIDERATION OF APPLICATION FOR 2025-2026 "CLASS A" RETAILERS BEER & LIQUOR LICENSE FOR BITTERSWEET HOLDINGS, LLC, D/B/A STAPLE AND FANCY, 110 HIGH STREET, BRIAN BLANCHETTE, AGENT.

Motion (McKeon/Graber) to recommend Council approval of the application for 2025-2026 "Class A" Retailers Beer and Liquor licenses for Bittersweet Holdings, LLC, d/b/a Staple and Fancy, 110 High Street. Motion carried, all voting aye (2-0).

CONSIDERATION OF APPLICATION FOR 2025-2026 CIGARETTE/TOBACCO LICENSE FOR LIMESTONE, LLC, 52 HIGH STREET.

Motion (McKeon/Graber) to recommend Council approval of the application for a 2025-2026 Cigarette/Tobacco license for Limestone, LLC, 52 High Street. Motion carried, all voting aye (2-0).

DISCUSSION AND POSSIBLE ACTION ON THE 2026 POLICE BUDGET.

Police Chief Weier stated that the Police Department would like to maintain 24/7 coverage, and has worked with the Police Department budget on ways to keep the coverage, but save expenses. He stated that they would still have 24/7 coverage, but instead of having two officers on duty every weekend, they will go down to one officer on duty each weekend.

Weier stated that there is a cost savings to the city while maintaining 24/7 coverage and not cutting staff. There will be occasions where more than one officer will be needed. The Police Department has trialed one officer on duty instead of two officers on Friday nights throughout this year and stated that it has worked well for the Department so far.

Weier shared his estimated cost-savings with a reduction in weekend coverage.

Alder Graber asked where the overtime hours in the Police Department come from. Chief Weier stated that the majority of overtime hours are due to covering vacation time.

Administrator Honer asked Chief Weier about the proposal of the shift reduction. Chief Weier stated that he will continue to schedule the cover car on weekends, and if an officer would like to take time off, they just will not have a cover car. He will not schedule specific times where there is only one officer on duty. A cover car will always be scheduled; it just may not always be filled.

The committee doesn't see any red flags with the proposed budget and recommends the budget as proposed, with the reduction in coverage on weekends.

No action taken.

ADJOURNMENT

Motion (McKeon/Graber) to adjourn at 6:14 PM. Motion carried, all voting aye (2-0).

_____
Matthew Honer, City Administrator
Approved: December 1, 2025

Form **AB-200**

Alcohol Beverage License Application

For Municipal Use Only	
Municipality	
License Period	

License(s) Requested: (up to two boxes may be checked)

pro-rated 54.81

- ☐ Class "A" Beer . . . . . $ _____
- ☒ Class "B" Beer . . . . . $ 100
- ☐ "Class A" Liquor . . . . . $ _____
- ☐ "Class B" Liquor . . . . . $ _____
- ☐ "Class A" Liquor (cider only) $ _____
- ☐ Reserve "Class B" Liquor $ _____
- ☒ "Class C" Liquor (wine only) $ 100 - prorated 54.81

Fees	
License Fees	$ 200 = 109.62
Background Check Fee	$ ~~0~~
Publication Fee	$ 25
Total Fees	$ ~~225~~ 134.62

pro-rated

Part A: Premises/Business Information

1. Legal Business Name (individual name if sole proprietorship)
Little Wolf Farm LLC

2. Business Trade Name or DBA

3. FEIN
84-3293612

4. Wisconsin Seller's Permit Number
[redacted]

5. Entity Type *(check one)*
☐ Sole Proprietor ☐ Partnership ☒ Limited Liability Company ☐ Corporation ☐ Nonprofit Organization

6. State of Organization
WISCONSIN

7. Date of Organization
Oct 2019

8. Wisconsin DFI Registration Number

9. Premises Address
337 Dodge Street

10. City
Mineral Point

11. State
WI

12. Zip Code
53565

13. County
Iowa

14. Governing Municipality: ☒ City ☐ Town ☐ Village
of: Mineral Point

15. Aldermanic District

16. Premises Phone
608-987-0067

17. Premises Email
[redacted]

18. Website

19. Premises Description - Describe the building or buildings 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.

Retail 1400 sqft building (former A+W). All one level

20. Mailing Address (if different from premises address)

21. City

22. State

23. Zip Code

Part B: Questions

1. Has the business (sole proprietorship, partnership, limited liability company, or corporation) been convicted of violating federal or state laws or local ordinances? Exclude traffic offenses unless related to alcohol beverages. ☐ Yes ☒ No

If yes, list the details of violation below. Attach additional sheets if necessary.

Law/Ordinance Violated	Location	Trial Date

Penalty Imposed	Was sentence completed? . . . . . ☐ Yes ☐ No

Law/Ordinance Violated	Location	Trial Date

Penalty Imposed	Was sentence completed? . . . . . ☐ Yes ☐ No

2. Are charges for any offenses pending against the business? Exclude traffic offenses unless related to alcohol beverages. ☐ Yes ☒ No

If yes, describe the nature and status of pending charges using the space below. Attach additional sheets as needed.

3. Is the applicant business or any of its officers, directors, members, agent, employees, owners, or other related individuals or entities a restricted investor with any interest in an alcohol beverage producer or distributor? ☐ Yes ☒ No
If yes, provide the name of the restricted investor and describe the nature of the interest.

4. Is the applicant business owned by another business entity? ☐ Yes ☒ No
If yes, provide the name(s) and FEIN(s) of the business entity owners below. Attach additional sheets as needed.

4a. Name of Business Entity	4b. Business Entity FEIN

5. Have the partners, agent, or sole proprietor satisfied the responsible beverage server training requirement for this license period? Submit proof of completion. ☐ Yes ☒ No

6. Is the applicant business indebted to any wholesaler beyond 15 days for beer or 30 days for liquor/wine? ☐ Yes ☒ No

7. Does the applicant business owe past due municipal property taxes, assessments, or other fees? ☐ Yes ☒ No

Part C: Individual Information

List the name, title, and phone number for each person or entity holding the following positions in the applicant business or businesses listed in Part B, Question 4: sole proprietor, all officers, directors, and agent of a corporation or nonprofit organization, all partners of a partnership, and all members, managers, and agent of a limited liability company. Attach additional sheets if necessary.

Include Form AB-100 for each person listed below. Corporations and LLCs must appoint an agent by including Form AB-101.

Last Name	First Name	Title	Phone
ZIMMERMAN, (DORI A.)	DORI	President	[redacted]
TIBBETTS, (JAMES D.)	JAMES	Vice President	[redacted]

Part D: Attestation

One of the following must sign and attest to this application:

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

READ CAREFULLY BEFORE SIGNING: 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 license. Further, I agree that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another individual or entity. I agree to operate this business according to the law, including but not limited to, purchasing alcohol beverages from state authorized wholesalers. I understand that lack of access to any portion of a licensed premises during inspection will be deemed a refusal to allow inspection. Such refusal is a misdemeanor and grounds for revocation of this license. I understand that any license issued contrary to Wis. Stat. Chapter 125 shall be void under penalty of state 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.

Last Name	First Name	M.I.
TIBBETTS	JAMES	D

Title	Email	Phone
Vice President	[redacted]	[redacted]

Signature	Date
James D Tibbetts	November 7, 2025

Part E: For Clerk Use Only

Date Application Was Filed With Clerk	License Number	Date License Granted	Date License Issued
11-07-2025			

Signature of Clerk/Deputy Clerk	Date Provisional License Issued (if applicable)

Form
AB-101

Alcohol Beverage Appointment of Agent

Date: November 7, 2025

Agent Type *(check one)*

☑ Original (no fee) ☐ Successor ($10 fee for municipal licensees only)

Part A: Business Information

1. Legal Business Name (individual name if sole proprietor)
Little Wolf Farm LLC

2. Business Trade Name or DBA

3. Entity Type *(check one)*
☒ Limited Liability Company ☐ Corporation ☐ Nonprofit Organization

4. Alcohol Beverage Business Authorization *(check one)*
☐ Municipal Retail License ☐ State Permit

5. If successor agent, provide State Permit or Municipal Retail License Number

6. Describe the reason for appointing a successor agent, if successor is checked above.

Part B: Agent Information

1. Last Name	2. First Name	3. M.I.
Schmit	Gary	A

4. Email	5. Phone
[redacted]	[redacted]

6. Home Address: [redacted]

7. City	8. State	9. Zip Code	10. Age
Mineral Point	WI	53565	[redacted]

11. Drivers License/State ID Number	12. Drivers License/State ID State of Issuance
[redacted]	WISCONSIN

Part C: Agent Questions

1. Have you satisfied the responsible beverage server training requirement? Submit proof of completion. ☒ Yes ☐ No

2. Have you completed Form AB-100, *Alcohol Beverage Individual Questionnaire?* Submit a completed Form AB-100 with this form. ☒ Yes ☐ No

3. Have you been a Wisconsin resident for at least 90 continuous days? See instructions for exceptions. ☒ Yes ☐ No

Continued →

Part D: Business Attestation

READ CAREFULLY BEFORE SIGNING: I, the **Undersigned**, authorize the above-named individual to act for the above-named corporation, nonprofit organization, or limited liability company with full authority and control of the premises and of all alcohol beverage activities on such premises. I certify that I am authorized by the above-named entity to authorize this individual to act on behalf of the entity. If I am appointing a successor agent, I rescind all previous agent appointments for this premises. Further, I 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.

Last Name	First Name	M.I.
TIBBETTS	JAMES	D.

Title	Email	Phone
Vice President	[redacted]	[redacted]

Signature	Date
James D Tibbetts	November 7, 2025

Part E: Agent Attestation

READ CAREFULLY BEFORE SIGNING: I, the **Agent**, herby accept this appointment as agent for the above-named corporation, nonprofit organization, or limited liability company and assume full responsibility for the conduct of all alcohol beverage activities on the premises for the above-named business. 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.

Last Name	First Name	M.I.
Schmit	Gary	A

Signature	Date
	November 7, 2025

Form
AB-100

Alcohol Beverage Individual Questionnaire

Date November 7, 2025

All individuals involved in the alcohol beverage business must complete this form, including:

- sole proprietor
- all partners of a partnership
- all officers, directors, and agent of a corporation or nonprofit organization
- members and agent of a limited liability company

Your alcohol beverage application or renewal is not complete until all required Individual Questionnaires are submitted.

Part A: Business Information

1. Legal Business Name (individual name if sole proprietor): Little Wolf Farm LLC
2. Business Trade Name or DBA:
3. Entity Type *(check one)*: ☐ Sole Proprietor ☐ Partnership ☒ Limited Liability Company ☐ Corporation ☐ Nonprofit Organization

Part B: Individual Information

1. Last Name	2. First Name	3. M.I.
TIBBETTS	JAMES	D.

4. Relationship to Business (Title)	5. Email	6. Phone
VICE PRESIDENT	[redacted]	[redacted]

7. Home Address: [redacted]

8. City	9. State	10. Zip Code	11. Date of Birth
Mineral Point	WI	53565	[redacted]

12. Drivers License/State ID Number	13. Drivers License/State ID State of Issuance
[redacted]	Wisconsin

Part C: Address History

1. Do you currently reside in Wisconsin? ☒ Yes ☐ No

If yes to 1 above, how long have you continuously lived in Wisconsin prior to the date of application?

Years	Months
10	

2. List in chronological order all of your addresses within the last 5 years. Attach additional sheets if necessary.

	City	State	Zip Code
Previous Address 1			
Previous Address 2			
Previous Address 3			
Previous Address 4			
Previous Address 5			

3. List all states and counties you have lived in as an adult. Attach additional sheets if necessary.

State	County	State	County	State	County	State	County

Continued →

Part D: Criminal History

1. Have you ever been convicted of any offenses (excluding traffic offenses unless related to alcohol beverages) for violation of any federal, Wisconsin, or another state's laws or of any county or municipal ordinances? . . . . . ☐ Yes ☒ No

If yes to question 1, please list details of each conviction below. Attach additional sheets as needed.

Law/Ordinance Violated	Location	Conviction Date

Penalty Imposed	Was sentence completed? . . . . . ☐ Yes ☐ No

Law/Ordinance Violated	Location	Conviction Date

Penalty Imposed	Was sentence completed? . . . . . ☐ Yes ☐ No

Law/Ordinance Violated	Location	Conviction Date

Penalty Imposed	Was sentence completed? . . . . . ☐ Yes ☐ No

2. Are charges for any offenses currently pending against you (excluding traffic offenses unless related to alcohol beverages) for violation of any federal, Wisconsin, or another state's laws or any county or municipal ordinances? . . . . . ☐ Yes ☒ No

If yes to question 2, describe nature and status of pending charges using the space below. Attach additional sheets as needed.

Part E: Attestation

READ CAREFULLY BEFORE SIGNING: Under penalty of law, I have answered each of the above questions completely and truthfully. I certify that I am not prohibited from participating in this business due to any involvement in another tier of the alcohol beverage industry as a restricted investor. I understand that any license issued contrary to Wis. Stat. Chapter 125 shall be void under penalty of state 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
James A. Abbotto	December 7, 2025

Form
AB-100

Alcohol Beverage Individual Questionnaire

Date: November 7, 2025

All individuals involved in the alcohol beverage business must complete this form, including:

- sole proprietor
- all partners of a partnership
- all officers, directors, and agent of a corporation or nonprofit organization
- members and agent of a limited liability company

Your alcohol beverage application or renewal is not complete until all required Individual Questionnaires are submitted.

Part A: Business Information

1. Legal Business Name (individual name if sole proprietor): Little Wolf Farm LLC
2. Business Trade Name or DBA:
3. Entity Type *(check one)*: ☐ Sole Proprietor ☐ Partnership ☒ Limited Liability Company ☐ Corporation ☐ Nonprofit Organization

Part B: Individual Information

1. Last Name	2. First Name	3. M.I.
Zimmerman	Dori	A.

4. Relationship to Business (Title)	5. Email	6. Phone
President	[redacted]	[redacted]

7. Home Address: [redacted]

8. City	9. State	10. Zip Code	11. Date of Birth
Mineral Point	WI	53565	[redacted]

12. Drivers License/State ID Number	13. Drivers License/State ID State of Issuance
[redacted]	Wisconsin

Part C: Address History

1. Do you currently reside in Wisconsin? ☒ Yes ☐ No

If yes to 1 above, how long have you continuously lived in Wisconsin prior to the date of application?

Years	Months
10	

2. List in chronological order all of your addresses within the last 5 years. Attach additional sheets if necessary.

	City	State	Zip Code
Previous Address 1			
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Previous Address 3			
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Previous Address 5			

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State	County	State	County	State	County	State	County

Continued →

Part D: Criminal History

1. Have you ever been convicted of any offenses (excluding traffic offenses unless related to alcohol beverages) for violation of any federal, Wisconsin, or another state's laws or of any county or municipal ordinances?..... ☐ Yes ☒ No

If yes to question 1, please list details of each conviction below. Attach additional sheets as needed.

Law/Ordinance Violated	Location	Conviction Date
Penalty Imposed	Was sentence completed?..... ☐ Yes ☐ No	
Law/Ordinance Violated	Location	Conviction Date
Penalty Imposed	Was sentence completed?..... ☐ Yes ☐ No	
Law/Ordinance Violated	Location	Conviction Date
Penalty Imposed	Was sentence completed?..... ☐ Yes ☐ No	

2. Are charges for any offenses currently pending against you (excluding traffic offenses unless related to alcohol beverages) for violation of any federal, Wisconsin, or another state's laws or any county or municipal ordinances?..... ☐ Yes ☒ No

If yes to question 2, describe nature and status of pending charges using the space below. Attach additional sheets as needed.

Part E: Attestation

READ CAREFULLY BEFORE SIGNING: Under penalty of law, I have answered each of the above questions completely and truthfully. I certify that I am not prohibited from participating in this business due to any involvement in another tier of the alcohol beverage industry as a restricted investor. I understand that any license issued contrary to Wis. Stat. Chapter 125 shall be void under penalty of state 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
Dori A Zimmerman	November 7, 2025