

## TOWN OF LIBERTY GROVE PUBLIC MEETING

### Town Board Meeting

**Date:** February 21, 2024

**Time:** 6:00pm

**Place:** Town Hall, 11161 Old Stage Road

### **Agenda:**

1. Call to order
2. Declaration of quorum followed by the Pledge of Allegiance
3. Approve Agenda
4. Approve minutes from 2/9/24
5. Public input
6. Payment of bills
7. Treasurer's Report
8. Combo Class B Lic App for R&M Operations, dba Shoreline Restaurant at 12747 WI-42
9. Plan Commission recommendation regarding Rezoning of Parcel ID 018-01-02312831B1
10. Use of Town Hall and Fire Station for community group meetings
11. Ellison Bay Service Club/ Old Ellison Bay Day road closure and parade route
12. Parks & Property recommendations regarding Mariner Park
  - (a) Environmental study
  - (b) Refurbish dock/pier area
13. Parks & Property recommendations regarding Ayres & Associates Phase I plan for Mariner Park
  - (a) Size & location of shelter
  - (b) Walking loop & boardwalk
  - (c) Parking
  - (d) Boat cleaning station
14. Correspondence
15. Future meeting(s)
16. Adjourn

*\*All agenda items will include discussion and possible action.\**

*\*Report items will not be discussed or voted on.*

*\*Deviation from listed order may occur.\**

*\*Audience members must ask for permission, during "Public input," to speak on agenda items.\**

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Pamela Donart-Welcome, Clerk/Treasurer

*Members of the Town Board or any other Town Committee, who are not members of the body whose meeting agenda is published in this notice, are entitled, as any other citizen of the Town of Liberty Grove, to attend this meeting in an unofficial capacity. It is possible the attendance of one or more non-members may create a quorum of the membership of another body. Such a quorum is unintended, and the non-members are not meeting for the purpose of exercising the powers or duties attendant upon their membership on any Town Committee or Board.*

2/13/2024 12:18 PM

In Progress Checks - Full Report - ALL  
ALL Checks by Voucher  
ASSOCIATED BANK (1120)

Page: 1  
ACCT

Dated From: 2/13/2024

From Account:

Thru: 2/13/2024

Thru Account:

| Voucher Nbr                     | Check Date | Payee                                 | Amount       |
|---------------------------------|------------|---------------------------------------|--------------|
| 805                             | 2/13/2024  | LIBERTY GROVE UTILTY DISTRICT #1      |              |
| 2023 FEB SETTLEMENT PAY IN 2024 |            |                                       |              |
| 100-00-24602-000-000            |            | DUE TO OTHER GOVERNMENTS              | 9,609.75     |
| 2023 FEB SETTLEMENT PAY IN 2024 |            |                                       |              |
| Total                           |            |                                       | 9,609.75     |
| 806                             | 2/13/2024  | GIBRALTAR AREA SCHOOLS                |              |
| 2023 FEB SETTLEMENT PAY IN 2024 |            |                                       |              |
| 100-00-24600-000-000            |            | DUE TO SCHOOL DISTRICTS               | 2,077,782.11 |
| 2023 FEB SETTLEMENT PAY IN 2024 |            |                                       |              |
| Total                           |            |                                       | 2,077,782.11 |
| 807                             | 2/13/2024  | NORTHEAST WISCONSIN TECHNICAL COLLEGE |              |
| 2023 FEB SETTLEMENT PAY IN 2024 |            |                                       |              |
| 100-00-24601-000-000            |            | DUE TO NWTC                           | 456,101.37   |
| 2023 FEB SETTLEMENT PAY IN 2024 |            |                                       |              |
| Total                           |            |                                       | 456,101.37   |
| 808                             | 2/13/2024  | DOOR COUNTY TREASURER                 |              |
| 2023 FEB SETTLEMENT PAY IN 2024 |            |                                       |              |
| 100-00-24300-000-000            |            | DUE TO COUNTY (RE) TAXES              | 1,983,778.42 |
| 2023 FEB SETTLEMENT PAY IN 2024 |            |                                       |              |
| Total                           |            |                                       | 1,983,778.42 |
| Grand Total                     |            |                                       | 4,527,271.65 |

Form  
AT-106

## Original Alcohol Beverage License Application

FOR CLERKS ONLY

Municipality

License Period

### License(s) Requested

- ☐ Class "A" Beer ..... \$ \_\_\_\_\_ ☐ "Class A" Liquor ..... \$ \_\_\_\_\_
- ☒ Class "B" Beer ..... \$ 100.00 ☒ "Class B" Liquor ..... \$ 200.00
- ☐ "Class C" Wine ..... \$ \_\_\_\_\_ ☐ "Class A" Liquor (Cider Only) \$ \_\_\_\_\_
- ☐ Reserve "Class B" Liquor \$ \_\_\_\_\_ ☐ "Class B" (Wine Only) Winery \$ \_\_\_\_\_

|                   |                  |
|-------------------|------------------|
| License Fees      | \$ 300.00        |
| Publication Fee   | \$ 55.00         |
| Background Check  | \$               |
| <b>Total Fees</b> | <b>\$ 355.00</b> |

### Part A: Premises/Business Information

1. Legal Business Name (registered entity name or individual's name if sole proprietorship)

R & M Operations LLC

2. Trade Name or DBA

Shoreline Restaurant

3. Premises Address

12747 WI-42, Ellison Bay, WI 54210

4. County

Door

5. Municipality

Liberty Grove

6. Aldermanic District

7. Mailing Address (if different from premises address)

8. FEIN

99-0551309

9. Wisconsin Seller's Permit Number

456-1031560931-2

10. Premises Phone

920-288-9642

11. Premises Email

bob081490@gmail.com

12. Entity Type (check one)

- ☐ Sole Proprietor ☐ Partnership ☒ Limited Liability Company ☐ Corporation ☐ Nonprofit Organization

13. Premises Description - Describe the building or buildings where alcohol beverages are to be sold and stored. Describe all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. Alcohol beverages may be sold and stored ONLY on the premises described in this application. Attach additional sheets if necessary.

Bar & restaurant located all on one floor. Liquor storage in locked stock room upstairs above restaurant. Beer storage in walk in cooler in kitchen. Mostly dining tables with a small bar. There will be a small waiting area out front for those waiting for a table as well.

### Part B: Questions

1. Have the partners, agent, or sole proprietor satisfied the responsible beverage server training requirement for this license period? Submit a copy of Responsible Beverage Server Training Course Certificate ..... ☒ Yes ☐ No
2. Does the applicant business or its partners, officers, directors, managing members, or agent hold a direct or indirect interest in any alcohol beverage wholesaler or producer (e.g., brewer, brewpub, winery, distillery)? ..... ☐ Yes ☒ No  
If yes, please explain using the space below. Attach additional sheets if necessary.

**Part C: For Corporate/LLC Applicants Only**

|                                                                                                                                                                                                                                                                                                                                                                                             |  |                                              |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------|--|
| 1. State of Registration<br><b>WI</b>                                                                                                                                                                                                                                                                                                                                                       |  | 2. Date of Registration<br><b>12-30-2023</b> |  |
| 3. Is the applicant business owned by another corporation or LLC? If yes, please provide the name and FEIN of the parent company below, include parent company members in Part D, and attach Form AT-103 for all of the parent company's principal members, managers, officers, or directors ..... <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                      |  |                                              |  |
| Name of Parent Company<br><b>R &amp; M Operations LLC</b>                                                                                                                                                                                                                                                                                                                                   |  | FEIN of Parent Company<br><b>99-0551309</b>  |  |
| 4. Does the parent company or any of its officers, directors, managing members, or agent hold any direct or indirect interest in any other alcohol beverage wholesaler or producer (e.g., brewer, brewpub, winery, distillery)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>If yes, please explain using the space below. Attach additional sheets if necessary. |  |                                              |  |
| 5. Agent's Last Name<br><b>Robert Novitski</b>                                                                                                                                                                                                                                                                                                                                              |  | Agent's First Name<br><b>Robert</b>          |  |
|                                                                                                                                                                                                                                                                                                                                                                                             |  | Phone<br><b>920-288-9642</b>                 |  |

**Part D: Individual Information**

A Supplemental Questionnaire, Form AT-103, must be completed and attached to this application for each person involved in the applicant business and any parent company as indicated in Part C. Persons in the applicant business include: sole proprietor, all officers, directors, and agent of a corporation or nonprofit organization, all partners of a partnership, and all managing members and agent of a limited liability company.

List the full name, title, and phone number for each person below. Attach additional sheets if necessary.

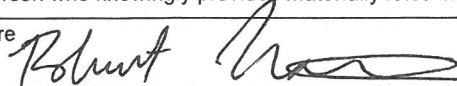
| Last Name | First Name | Title | Phone |
|-----------|------------|-------|-------|
|           |            |       |       |
|           |            |       |       |
|           |            |       |       |
|           |            |       |       |

**Part E: Attestation**

Who must sign this application?

- sole proprietor      • one general partner of a partnership      • one corporate officer      • one managing 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.

|                                                                                                  |                                      |                              |  |
|--------------------------------------------------------------------------------------------------|--------------------------------------|------------------------------|--|
| Signature<br> |                                      | Date<br><b>01-16-2024</b>    |  |
| Name (Last, First, M.I.)<br><b>Novitski, Robert, E</b>                                           |                                      |                              |  |
| Title<br><b>Owner</b>                                                                            | Email<br><b>bob 081490@gmail.com</b> | Phone<br><b>920-288-9642</b> |  |

**Part F: For Clerk Use Only**

|                                       |                                 |                                                 |
|---------------------------------------|---------------------------------|-------------------------------------------------|
| Date application was filed with clerk | Date reported to governing body | Date provisional license issued (if applicable) |
| Date license granted                  | License number                  | Date license issued                             |
| Signature of Clerk/Deputy Clerk       |                                 |                                                 |

# Original Alcohol Beverage Retail License Application

Submit to municipal clerk.

For the license period beginning 02 / 01 20 24 ;  
ending 06 / 30 20 24 ;

TO THE GOVERNING BODY of the: ☒ Town of } Liberty Grove  
☐ Village of }  
☐ City of }

County of Door Aldermanic Dist. No. 21 (if required by ordinance)

1. The named ☐ Individual ☐ Partnership ☒ Limited Liability Company  
☐ Corporation / Nonprofit Organization

hereby makes application for the alcohol beverage license(s) checked above.

2. Name (individual/partners give last name, first, middle; corporations/limited liability companies give registered name): R + M Operations LLC

An "Auxiliary Questionnaire," Form AT-103, must be completed and attached to this application by each individual applicant, by each member of a partnership, and by each officer, director and agent of a corporation or nonprofit organization, and by each member/manager and agent of a limited liability company. List the name, title, and place of residence of each person.

| Title                 | Name (Last, First, M.I.) | Home Address | Post Office & Zip Code |
|-----------------------|--------------------------|--------------|------------------------|
| President/Member      |                          |              |                        |
| Vice President/Member |                          |              |                        |
| Secretary/Member      |                          |              |                        |
| Treasurer/Member      |                          |              |                        |
| Agent                 | <u>Robert Novitski</u>   |              |                        |
| Directors/Managers    |                          |              |                        |

3. Trade Name Shoreline Restaurant Business Phone Number 920-288-9642  
4. Address of Premises 1277 WI-42, Ellison Bay WI, 54210 Post Office & Zip Code 54210, Ellison Bay

5. Is individual, partners or agent of corporation/limited liability company subject to completion of the responsible beverage server training course for this license period? ☒ Yes ☐ No  
6. Is the applicant an employee or agent of, or acting on behalf of anyone except the named applicant? ☐ Yes ☒ No  
7. Does any other alcohol beverage retail licensee or wholesale permittee have any interest in or control of this business? ☐ Yes ☒ No  
8. (a) **Corporate/limited liability company applicants only:** Insert state \_\_\_\_\_ and date \_\_\_\_\_ of registration.  
(b) Is applicant corporation/limited liability company a subsidiary of any other corporation or limited liability company? ☐ Yes ☒ No  
(c) Does the corporation, or any officer, director, stockholder or agent or limited liability company, or any member/manager or agent hold any interest in any other alcohol beverage license or permit in Wisconsin? ☐ Yes ☒ No  
(NOTE: All applicants explain fully on reverse side of this form every YES answer in sections 5, 6, 7 and 8 above.)

9. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) liquor storage upstairs, dining room, small bar, waiting area  
10. Legal description (omit if street address is given above): \_\_\_\_\_  
11. (a) Was this premises licensed for the sale of liquor or beer during the past license year? ☒ Yes ☐ No  
(b) If yes, under what name was license issued? Shoreline Restaurant, LLC  
12. Does the applicant understand they must register as a Retail Beverage Alcohol Dealer with the federal government, Alcohol and Tobacco Tax and Trade Bureau (TTB) by filing (TTB form 5630.5d) before beginning business? [phone 1-877-882-3277]. ☒ Yes ☐ No  
13. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776]. ☒ Yes ☐ No  
14. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? ☒ Yes ☐ No

**READ CAREFULLY BEFORE SIGNING:** Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000. Signer agrees to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants, or one member of a partnership applicant must sign; one corporate officer, one member/manager of Limited Liability Companies must sign.) Any lack of access to any portion of a licensed premises during inspection will be deemed a refusal to permit inspection. Such refusal is a misdemeanor and grounds for revocation of this license.

Robert Novitski  
(Officer of Corporation / Member / Manager of Limited Liability Company / Partner / Individual)

## TO BE COMPLETED BY CLERK

|                                              |                                  |                                 |                                   |
|----------------------------------------------|----------------------------------|---------------------------------|-----------------------------------|
| Date received and filed with municipal clerk | Date reported to council / board | Date provisional license issued | Signature of Clerk / Deputy Clerk |
| Date license granted                         | Date license issued              | License number issued           |                                   |



**County of Door**  
**LAND USE SERVICES DEPARTMENT: ZONING**  
County Government Center  
421 Nebraska Street  
Sturgeon Bay, WI 54235

**Kristin Rankin, Zoning Administrator**

Direct line: (920) 746-2266

Main office line: (920) 746-2323

FAX: (920) 746-2387

E-mail: [krankin@co.door.wi.us](mailto:krankin@co.door.wi.us)

Website: <https://www.co.door.wi.gov/164/Land-Use-Services>

January 16, 2024

Town of Liberty Grove  
C/o Pamela Welcome, Clerk  
Via Email

Re: Proposed rezoning of Parcel ID 018-01-02312831B1, 10695 and 10673 CTH ZZ

Greetings:

We are sending you this letter to notify the town that there will be a hearing regarding a request to rezone a parcel in Liberty Grove at an upcoming Door County Resource Planning Committee meeting. The scheduling process for the hearing will begin on February 13, 2024 unless we hear from the town before that date. The hearing will be held no sooner than three weeks after the scheduling process has begun. As a reminder, comments may be submitted to the Land Use Services Department up to 12 p.m. the day before the public hearing, and/or the town may offer verbal testimony at the hearing.

Enclosed is a "Town Recommendation Worksheet" which we ask you to complete and send back to the Door County Land Use Services Department.

Skyler Witalison, on behalf of Hockers Excavating Inc, petitions to rezone a 32.05-acre parcel from Heartland-10 (HL-10) to Light Industrial (LI). The parcel contains a nonmetallic mine and trade or contractors establishment which are conforming uses in the HL-10 zoning district; they are also allowed uses in the LI zoning district. The property is located at 10695 and 10673 CTH ZZ.

**The applicant has the responsibility to contact the Town of Liberty Grove (Pamela Welcome, Clerk: 920-854-2934) to determine if/when the town may be discussing this matter at a future meeting.**

Sincerely,

*Kristin Rankin*  
Zoning Administrator

Enc.: Town recommendation worksheet, draft staff report & application

C.C.: Skyler Witalison, via e-mail (with enclosure)  
Patrick J. Hockers, Registered Agent via email (with enclosure)  
Neighboring property owners within 300' via mail (to receive letter only)

**DRAFT**  
**Town of Liberty Grove**  
**Minutes of the Plan Commission meeting on February 14, 2024**

**Agenda:**

1. Call to order
2. Declaration of Quorum
3. Approve Agenda
4. Approve minutes from 1/31/24
5. Public input
6. Proposed rezoning of Parcel ID 018-01-02312831B1
7. Text language for HL-10 application
8. Correspondence
9. Future meeting date(s)
10. Adjourn

Chairman Goss called the meeting to order at 7:00pm . Commissioners Ann Miller, Cheryl Culver, Cathy Ward, Paul Bokelman, Bill Surbaugh, and Dan Watts were present with Administrator Kalms, Clerk/Treasurer Pamela Donart-Welcome, and 5 members of the public.

**Ward moved, Surbaugh seconded** to approve the agenda as amended to postpone item #7 to the next Plan Commission meeting. **Carried 7 - 0**

**Miller moved, Surbaugh seconded** to approve the 1/31/24 minutes as presented. **Carried 7 - 0**

**Public input:** none

After discussion, **Goss made a motion** to recommend the Town Board support for rezoning of parcel 018-01-02312831B1 from its current Heartland to Light Industrial at the next Board meeting scheduled 2/21/24. **Ward seconded.** Surbaugh, Bokelman, Ward, Goss, Watts, Culver, and Miller voted aye. There were no nays. **Carried 7 - 0**

**Correspondence:** Administrator Kalms shared a meeting notice for Mar 7<sup>th</sup>, including the new DC floodplain ordinance, a letter from the LG Historical Society with their 2024 schedule, notices regarding a zoning violation on Beach Rd, and a letter to a resident on Hwy 42 who has an extra structure on the property that needs to be removed by Mar 1<sup>st</sup>, a notice of the DC unit of the Town Association meeting on Feb 22 at 6pm at the Gardner Town Hall, including culvert inventory.

**Future Meeting(s):** The next meeting was scheduled for 2/28/24 at 7:00pm.

**Watts moved, Miller seconded** to adjourn at 7:15pm. **Carried 7 - 0**

Respectfully submitted,  
Pamela Donart-Welcome, Clerk/Treasurer

Town of Liberty Grove  
Ordinance 6-17  
Use of Town Facilities for Meetings by Organizations

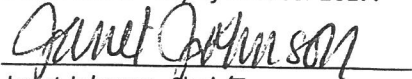
All previous Use of Town Facilities ordinances and amendments for the Town of Liberty Grove, hereafter referred to as Town, are hereby rescinded, to be replaced by this ordinance.

1. The Town will allow the use of the Town Hall on Old Stage Rd. for non-profit community organizations to conduct their meetings at no charge. Rental fees are not waived on other Town owned buildings. Special events do not qualify as meetings.
2. Meetings held free of charge at the Hall must be open to the public and not limited to members only. Meetings closed to the public will incur the normal rental fee.
3. All meetings must be authorized at least one week before scheduling to verify availability.
4. Organizations should be of a service nature to the Town, membership open to the public, and be 501C registered US Internal Revenue Service and the State of Wisconsin. Veteran's organizations may also use the hall location with the same scheduling requirements.
5. Each organization will be responsible for cleanup after their meeting and supply all misc. needs for the meeting. Ex: coffee cups, coffee, filters, sugar, cream, plates, napkins, utensils, trash bags. Trash must be hauled away.
6. No organization is allowed to use the electronic equipment at the Town Hall without permission.
7. A deposit of \$150.00 will be kept with the Town. In the event these rules are not followed the deposit will be forfeited.

Adopted at a regular meeting of the Liberty Grove Town Board on October 4, 2017. Motion to adopt: Lowry  
Second: Covotsos. Motion passed 4-0.

*I, Janet Johnson, Clerk/Treasurer of the Town of Liberty Grove, Door County Wisconsin hereby certify that the above is a true and correct copy of an ordinance which was adopted at a properly noticed meeting of the Liberty Grove Town Board on the 4<sup>th</sup> day of October, 2017.*

*Dated this 5<sup>th</sup> day of October 2017.*

  
Janet Johnson, Clerk/Treasurer

The Ellison Bay Service Club Board has decided to go ahead with the procedures to have the parade on Saturday, June 22, 2024, starting at 11:00, requesting road closure from 10:30-12:00. We have agreed to work with the Door County Hwy Dept for services that provide setting up and removing barricades and signage for the road closure and detour route. At this time, I am waiting to hear back from Pastor Jim for the use of the Shepherd of the Bay Church parking lot for parade staging and starting point, permission will be determined today at their board meeting. The end point of the parade will be Fitzgerald Park on School Road. I am attaching the permit application, an old permit application that was approved for a past date, and the road closure route from the Hwy Dept that will need to be attached to the permit application. I am requesting your assistance in filling out and submitting the DOT application. I will follow up as soon as I hear back from Pastor Jim and then would like to have the permit submitted as soon as possible. The sooner we receive approval from the DOT the sooner we can start to advertise and get the word out.

Thank you,  
Maureen Mercier

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**3 attachments**



**Detour Permit(1).doc**

42K



**Ellison Bay - Old Ellison Bay Day.doc**

17K



**20240207152811611.pdf**

974K

NEW APP

**APPLICATION BY MUNICIPALITY FOR PERMISSION  
TO DETOUR STATE TRUNK HIGHWAY TRAFFIC**

Wisconsin Department of Transportation

DT1479 7/2011 (Replaces ET604) s.84.07(4) Wis. Stats.

**TO: REGIONAL TRAFFIC SECTION**

|                                                                                                    |                                      |                                                              |          |
|----------------------------------------------------------------------------------------------------|--------------------------------------|--------------------------------------------------------------|----------|
| Municipality                                                                                       |                                      | County                                                       |          |
| (Area Code) Telephone Number                                                                       |                                      | Email Address                                                |          |
| Name of Street(s) to be Closed<br><input type="checkbox"/> STH<br><br><input type="checkbox"/> USH |                                      | Streets Closed Between (Street Name)<br><br>FROM:<br><br>TO: |          |
| Proposed Temporary Route                                                                           |                                      |                                                              |          |
| <input type="checkbox"/> MAP ATTACHED                                                              | Date and Duration of Detour<br>Date: |                                                              | Time: to |
| Reason                                                                                             |                                      |                                                              |          |
| Name and Address to Whom Permit will be Returned                                                   |                                      |                                                              |          |

The above municipality requests permission to close the marked route as described, during which time the municipality will provide temporary route as designated.

The municipality agrees to accept the following terms and conditions:

1. The municipality shall provide a detour having structural, geometric and traffic control characteristics, which are acceptable to the Region. A detour map which provides street names shall be submitted.
2. The municipality shall furnish, erect and remove signs and markers at the sole expense of the municipality, unless provided for in (3), or unless directed by officers for short routes and short timeframe (less than 3 days).
3. A Detour and Traffic Control Plan shall be submitted to the Region for approval. An example is Standard Detail Drawing 15C2-4C.
4. The municipality shall agree to minimize, as much as practicable, the duration of closure, including providing for assembly and dispersal of parades in areas removed from the state highway route.
5. The municipality shall accept full responsibility for any damage to local roads and streets resulting from closure and detour.
6. The requester shall arrange for adequate traffic control from either WisDOT, traffic control contractor, or the appropriate county, and provide documentation of enforcement coordination.
7. The requester shall notify all media, emergency services and schools, five (5) days prior to the detour.
8. Additional conditions: . Attachments: ☐ Yes ☐ No

\_\_\_\_\_  
(Authorized Official Signature)

\_\_\_\_\_  
(Title)

\_\_\_\_\_  
(Date)

Permission is granted to temporarily close the designated segment of state trunk highway and to provide a detour, subject to the stated conditions.

Previous APP

**APPLICATION BY MUNICIPALITY FOR PERMISSION  
TO DETOUR STATE TRUNK HIGHWAY TRAFFIC**

Wisconsin Department of Transportation

DT1479 6/2007 (Replaces ET604) s.84.07(4) Wis. Stats.

TO: NE REGION TRAFFIC SECTION – Attn. PF O'Connor

|                                                                                                              |                                                   |                                                                                  |
|--------------------------------------------------------------------------------------------------------------|---------------------------------------------------|----------------------------------------------------------------------------------|
| Municipality<br>Town of Liberty Grove                                                                        |                                                   | County<br>Door                                                                   |
| Area Code – Telephone Number<br>920-421-0533                                                                 |                                                   | E-Mail Address<br>aapleridge@mansonwireless.com                                  |
| Name of Street(s) to be Closed<br>X STH 42<br>USH                                                            |                                                   | Streets Closed Between (Street Name)<br>FROM: Highview Road<br>TO: Lakeview Road |
| PROPOSED TEMPORARY ROUTE<br>Highview Rd. – Lakeview Rd.                                                      |                                                   |                                                                                  |
| MAP ATTACHED                                                                                                 | Date and Duration of Detour<br>Date: 23 June 2011 | Time: 10:30 a.m. to 12:00 p.m.                                                   |
| Reason<br>Old Ellison Bay Day                                                                                |                                                   |                                                                                  |
| Name and Address to Whom Permit will be Returned<br>Lee Telfer -<br>P.O. Box 3<br>Ellison Bay, WI 54210-0003 |                                                   |                                                                                  |

The above municipality requests permission to close the marked route as described, during which time the municipality will provide temporary route as designated.

The municipality agrees to accept the following terms and conditions:

1. The municipality shall provide a detour having structural, geometric and traffic control characteristics, which are acceptable to the Region. A detour map, which provides street names, shall be submitted.
2. The municipality shall furnish, erect and remove signs and markers at the sole expense of the municipality, unless provided for in (3), or unless directed by officers for short routes and short timeframe (less than 3 days). All detour routes should be signed in accordance with Chapter 6 of the Manual.
3. A Detour and Traffic Control Plan shall be submitted to the Region for approval. An example is Standard Detail Drawing 15C2-4C.
4. The municipality shall agree to minimize, as much as practicable, the duration of closure, including providing for assembly and dispersal of parades in areas removed from the state highway route.
5. The municipality shall accept full responsibility for any damage to local roads and streets resulting from closure and detour.
6. The requester shall arrange for adequate traffic control from either WisDOT or the appropriate county, and provide documentation of enforcement coordination.
7. The requester shall notify all media, emergency services and schools, five (5) days prior to the detour.
8. The use of florescent pink traffic incident management signs (described in MUTCD chapter 6-I) is only to be used for emergency road closures, natural disasters, or other unplanned events. Do not use these signs as part of planned lane or road closures
9. Additional conditions: . Attachments: Yes No

\_\_\_\_\_  
(Authorized Official Signature)

\_\_\_\_\_  
(Title)

\_\_\_\_\_  
(Date)

Permission is granted to temporarily close the designated segment of state trunk highway and to provide a detour, subject to the stated conditions.

\_\_\_\_\_  
(Permit Number)

\_\_\_\_\_  
(Approved By)

\_\_\_\_\_  
(Date)



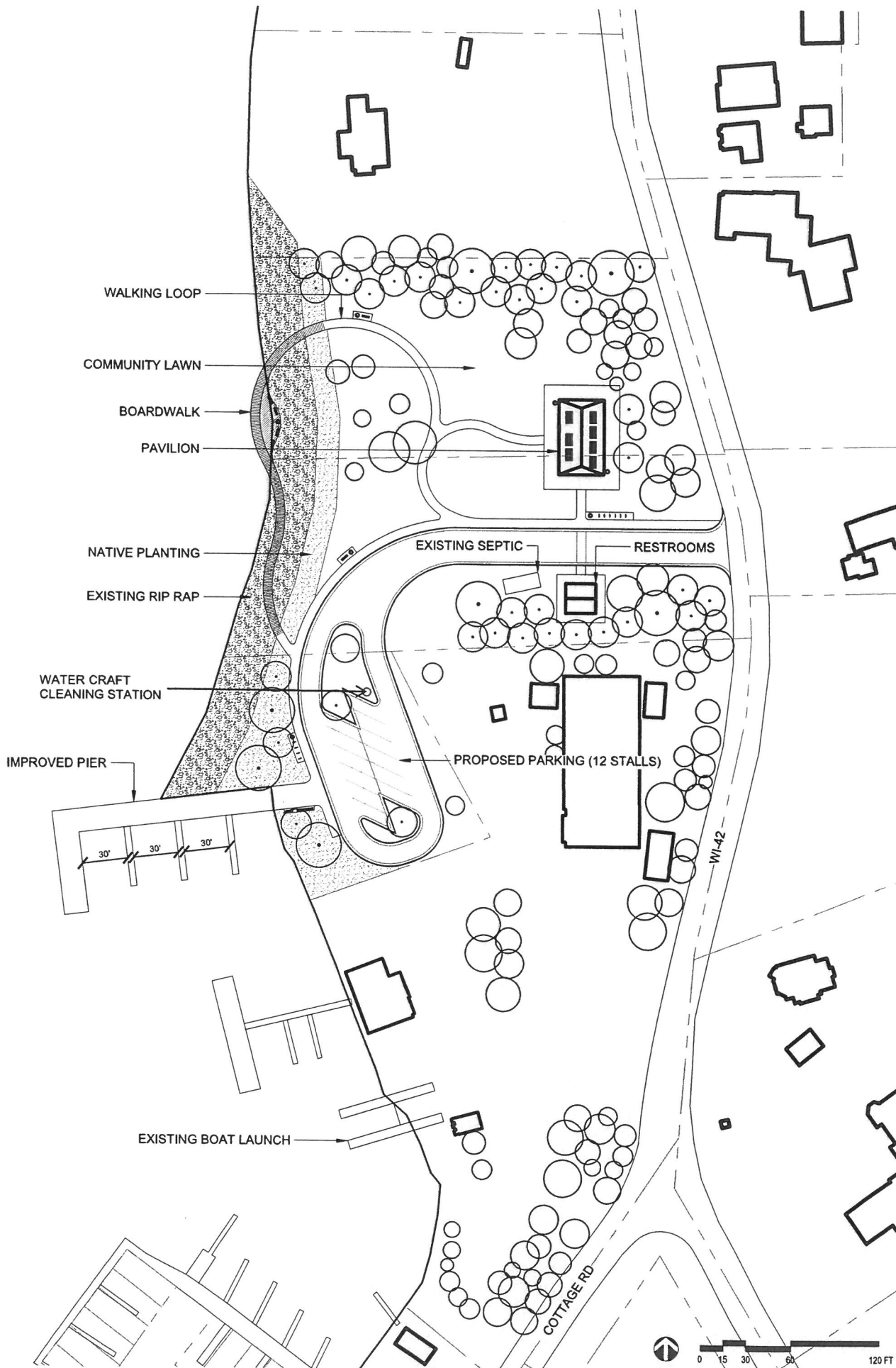
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**Town of Liberty Grove**  
**Minutes of the Parks & Property Committee meeting on February 13, 2024**

**Agenda:**

1. Call to order
2. Declaration of Quorum
3. Approve Agenda
4. Approve minutes from 10/10/23
5. Public input
6. Status of current projects:
  - a. Disc Golf Course on Town Property
  - b. Wind Phone at Isle View Park
  - c. Boat Washing Station
7. Review, discussion and possible action regarding Ayers design submitted for Mariner Park
8. Discussion of Future Projects
9. Correspondence
10. Future meeting date(s)
11. Adjourn

Chairman Cathy Ward called the meeting to order at 9:01am. Committee members Sylvann Welcome and Mike Repp were present. Members Hope Bogenshutz and Donna Scattergood were excused absent. Clerk/Treasurer Pamela Donart-Welcome, and one member of the public were also in attendance.

**Welcome moved, Repp seconded** to approve the agenda as posted. **Carried 3 - 0**

**Ward moved, Welcome seconded** to approve the 10/10/23 minutes as presented. **Carried 3 - 0**

**Public input:** Paul Schwengel from 824 Top O The Thumb Lane was present to provide input on Agenda item #7.

The person who is supposed to mark the disc golf course hasn't yet contacted the Town crew. We hope to start installation of the Wind Phone at Isle View Park by end the of February. Ward noted the CD3 company can provide a waterless boat cleaning system to prevent run-off into any nearby water systems. When reviewing the Ayres design for Mariner Park, committee members discussed the proposed size & location of the pavilion, paths, restrooms, parking, boat cleaning station, and made the following recommendations to the Town Board at their next meeting:

**Ward made a motion** to recommend to the Town Board to prioritize and begin an environmental study with possible remediation on the town property that is now Mariner Park.

**Welcome seconded. Carried 3 - 0**

**Ward made a motion** to recommend to the Town Board to proceed with the Phase I Mariner Park plan presented by Ayers & Associates, with the following changes:

- Reduce the size and move the location of the shelter to the NE, set on a diagonal and allow 6 parking places in the vicinity.
- Eliminate walking loop and boardwalk.

- Cut proposed parking by the water to 6 stalls.
- Eliminate boat cleaning station.

**Repp seconded. Carried 3 - 0**

**Ward made a motion** to recommend to the Town Board to proceed with plans to refurbish the dock area of Mariner Park for public use. **Welcome seconded. Carried 3 – 0**

**Ward moved, Welcome seconded** to table item# 8 to a future meeting. **Carried 3 - 0**

**Correspondence:** none

**Future Meeting(s):** The next meeting date/time was scheduled for March 12, 2024 at 9:00am.

**Repp moved, Ward seconded** to adjourn at 11:14am. **Carried 3 - 0**

Respectfully submitted,  
Pamela Donart-Welcome, Clerk/Treasurer