



**City Council Agenda
 December 21, 2021
 5:30 P.M. - City Hall**

WELCOME AND CALL TO ORDER

PLEDGE OF ALLEGIANCE

PUBLIC COMMENT PERIOD

Items not already on the agenda may be brought before the Governing Body. Persons must sign in to be eligible. (Three-minute maximum time limit). After three minutes, items will then be voted on to see whether to place the item on the next agenda.

CONSENT AGENDA:

- Minutes from the Previous meeting: Pages 2 – 3
- Appropriations:
- Lake Cabin Transfer: N/A
- Application for Retail Liquor by the Package and Club Liquor License Pages 4 – 9
 - Hays House, Twin Lakes Liquor, 1881 Liquors
- Application for License to Sell Cereal Male Beverages in original containers not for consumption on licensed premises Pages 10 - 13
 - Saddlerock Café
- Application for License to Sell Cereal Male Beverages for consumption on premises Pages 14 - 17
 - SaddleRock Café

Motion:	Seconded:	Action:	Abstention:	Este. Cost:	Appd.	Cost:
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OLD BUSINESS:

- N/A

NEW BUSINESS:

- Superior System, LLC. Rates & Disbursement – John Scarce Pages 18 - 20

Motion:	Seconded:	Action:	Abstention:	Este. Cost:	Appd.	Cost:
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- Story Media – Riverwalk Amphitheater Web Page - Deidra Knight and Lindsay Hickman

Motion:	Seconded:	Action:	Abstention:	Este. Cost:	Appd.	Cost:
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- Lake Committee Recommendation: H-S1 Pages 21 - 29

Motion:	Seconded:	Action:	Abstention:	Este. Cost:	Appd.	Cost:
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- Utilities Committee Recommendation: Hourly Rate Page 30

Motion:	Seconded:	Action:	Abstention:	Este. Cost:	Appd.	Cost:
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- Utilities Committee Recommendation: Current Employee Hourly Rate Adjustment Page 31

Motion:	Seconded:	Action:	Abstention:	Este. Cost:	Appd.	Cost:
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- Utilities Department Recommendation: Appointment of Nathan Ross Page 32

Motion:	Seconded:	Action:	Abstention:	Este. Cost:	Appd.	Cost:
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- Executive Session – City Lake

Motion:	Seconded:	Action:	Abstention:	Este. Cost:	Appd.	Cost:
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Governing Body Comments:

Adjournment:

City Council Meeting Minutes
December 7, 2021

WELCOME AND CALL TO ORDER

Mayor Debi Schwerdtfeger called the regular City Council Meeting to order. Council members present were Jason Booker, Keith Wessel, Mark Berner, Sharon Haun, Larry Siegrist, City Administrator Nick Jones, and City Attorney Bill Halvorsen were also present. Others attending were Luann Fuller, Marcus Hernandez.

CONSENT AGENDA

Councilperson Sharon Haun made a motion to approve the Consent Agenda as presented in the packet. Councilperson Jason Booker seconded the motion. Motion Carried 6 – 0. The consent agenda consisted of:

- Dec. 7, 2021, Minutes
- Dec. 7, 2021, to Current Appropriations.
- Cabin Transfer: N/A
- License to Retail Liquor by the Package and Club Liquor License
 - Flint Hills Saloon and Eatery

OLD BUSINESS

N/A

NEW BUSINESS

- **City Lake Committee Recommendation – End Cap Extension Request B-7**
City Administrator Nick Jones presented the recommendation from the City Lake Committee to approve an end cap extension request of 60 feet on one side of the lot and 90 feet on the opposite side for the construction of a 30'x31' carport for lot B-7, Gary and Rebecca Catlin. City Administrator Jones noted that the extension will not restrict or interfere with the neighboring cabins or access to the area. The neighboring leaseholds are aware of this request and have indicated such in writing. After discussion Councilperson Larry Siegrist made a motion to approve the request for an end cap extension for B-7. The motion was seconded by Councilperson Keith Wessel. Motion Carried 6 – 0
- **GAPP Waiver**
City Attorney Bill Halverson presented the GAAP Waiver resolution to the City Council. City Attorney Halverson noted that the Generally Accepted Accounting Principles (GAAP) waiver is approved annually by the City Council and is a resolution stating that the City has determined that its financial statements will be prepared in accordance with requirements of K.S.A. 75-1120a and do not pretian to cash basis and budgeting laws. After discussion Councilperson Mark Berner made a motion to approve the GAAP Waiver. The motion was seconded by Councilperson Jason Booker. Motion Carried 6 – 0
- **Executive Session – City Lake**
Councilperson Mark Brooks made a motion to go into executive session concerning the City Lake, which include the City Council, Mayor, City Attorney, and City Administrator for 30 minutes. The motion was seconded by Councilperson Jason Booker. Motion Carried 6 - 0. On returning to the Council meeting no action was taken.

GOVERNING BODY COMMENTS

- **Councilperson Jason Booker** – N/A
- **Councilperson Mark Berner** – asked if the Streets and Park Department looked at the issues by Jason Ziegler's house.
- **Councilperson Keith Wessel** – N/A
- **Councilperson Mark Brooks** – Asked about Semi's parking on Main Street and blighted structures in town. Administrator Jones informed the Council that the Blighted Structures committee is scheduled to meet on Friday at 3pm.
- **Councilperson Larry Siegrist** – N/A
- **Councilperson Sharon Haun** – N/A
- **City Attorney Bill Halvorsen** – N/A
- **City Administrator Nick Jones** – City Administrator Nick Jones presented to the City Council a proposal from BG Consultants to survey existing storm water features. The cost to conduct the survey would not exceed \$10,000 The proposed areas are Mission Street from Huffaker to Main Street, Rockhill From Main to Chick Street, E. Main and Oak around the Café, Downtown Area as needed, and Becker Park. After Discussion

Councilperson Mark Brooks made a motion to approve the proposal from BG Consultants not to exceed \$10,000 out of infrastructure. The motion was seconded by Councilperson Keith Wessel. Motion Carried 6 – 0

- **Mayor Debi Schwerdtfeger** – Asked about planning and zoning working on annexation of property's surrounding the city.

Councilperson Keith Wessel made a motion to adjourn. Councilperson Jason Booker seconded the motion. Motion carried 6 – 0

Debi Schwerdtfeger Mayor

ATTEST:

Nick Jones City Administrator

APPLICATION FOR RETAIL LIQUOR BY THE PACKAGE
AND CLUB LIQUOR LICENSE

Council Grove, Kansas Nov 30, 2021

TO THE GOVERNING BODY OF THE CITY OF COUNCIL GROVE, MORRIS COUNTY, KANSAS

Council Members:

I hereby apply for a license to sell liquor by the package, in conformity with the laws of the State of Kansas, and the rules and regulations prescribed and hereafter to be prescribed by you relating to the sale or distribution of alcoholic beverages, and for the purpose of securing such license; I made the following statements under oath.

1. Name of Proposed licensee: Out of Grass Cattle DBA Hays house / Frank GREG

Age of proposed licensee: 2 year

Street and address of licensee (residence): 112 W Main Street Council Grove, KS

Phone Number of Proposed licensee: 620-767-5911

How long have you been a resident of the State of Kansas? Yes - life

How long have you been a resident of Morris County? Not

How long have you been a resident of Council Grove? Not

2. Name of business for which license is desired: Hays house

Address of business for which license is desired: 112 W Main Street Council Grove, KS

Telephone number of business for which license is desired: 620-767-5911

Give Legal Description: on file

Describe Building: Hays house

3. Name and address of owner or owners of the premises upon which the place of business is located:

112 W Main ~~St~~ Street Hays house

4. Are you a citizen of the United States? yes By birth or naturalization? Birth

If naturalized, give place and date of naturalization: _____

5. Have you ever been convicted of a felony? NO

If so, when and where? _____

6. Have you ever been convicted of a crime involving moral turpitude? NO

If so, when and where? _____

7. Have you ever been convicted or adjudged guilty of drunkenness? NO

If so, when and where? _____

8. Have you ever been convicted or found guilty of Driving Under the Influence? NO

If so, when and where? _____

9. Have you ever been convicted of a violation of any state or federal intoxication law? NO

If so, when and where? _____

10. Is your place of business to be conducted by a manager or agent? NO Owner is on site

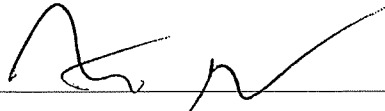
If so, by whom? _____

11. What is your Kansas State Liquor License No.? 11045

What is the expiration date of your State Liquor License? _____

12. Please enclose the City Liquor License Fee of ^{± 300.00?} ~~\$250.00~~ with your application _____

I, Frank Graco, the above named applicant hereby agree to comply with all of the laws of the State of Kansas, and all rules and regulations prescribed by you, and hereafter to be prescribed by you, relating to the sale or distribution of alcoholic beverages, and do hereby agree to purchase all alcoholic beverages from a wholesaler licensed and bonded under the laws of the State of Kansas, and do further consent to the immediate revocation of my alcohol beverage retail license, by proper officials, for the violation of such laws, rules or regulations.



Signature of Applicant

City Clerk

APPLICATION APPROVED ON THIS _____ day of _____, 20____
by the Mayor and Governing Body of the City of Council Grove, Morris County, Kansas.

CITY LICENSE NUMBER _____

APPLICATION FOR RETAIL LIQUOR BY THE PACKAGE
AND CLUB LIQUOR LICENSE

P6

Council Grove, Kansas _____, 20 _____

TO THE GOVERNING BODY OF THE CITY OF COUNCIL GROVE, MORRIS COUNTY, KANSAS

Council Members:

I hereby apply for a license to sell liquor by the package, in conformity with the laws of the State of Kansas, and the rules and regulations prescribed and hereafter to be prescribed by you relating to the sale or distribution of alcoholic beverages, and for the purpose of securing such license; I made the following statements under oath.

1. Name of Proposed licensee: David L. & Joan Kathleen Fox
Age of proposed licensee: 61 + 63
Street and address of licensee (residence): 18 N. 8th St. P.O. Box 75 Council Grove, KS
Phone Number of Proposed licensee: 620-767-5025
How long have you been a resident of the State of Kansas? DAVID 36yrs JOAN 63yrs.
How long have you been a resident of Morris County? DAVID 36yrs JOAN 61yrs
How long have you been a resident of Council Grove? DAVID 36yrs JOAN 61yrs

2. Name of business for which license is desired: TWIN LAKES LIQUOR
Address of business for which license is desired: 503 N. UNION COUNCIL GROVE, KS
Telephone number of business for which license is desired: 620-767-5099
Give Legal Description: Lot 2 and part of Lot 1 Huffakers Addition
Describe Building: 36ft x 36ft wood frame construction

3. Name and address of owner or owners of the premises upon which the place of business is located:

SAME AS LICENSEE

4. Are you a citizen of the United States? yes By birth or naturalization? birth

If naturalized, give place and date of naturalization: _____

5. Have you ever been convicted of a felony? NO

If so, when and where? _____

6. Have you ever been convicted of a crime involving moral turpitude? NO

If so, when and where? _____

7. Have you ever been convicted or adjudged guilty of drunkenness? NO

If so, when and where? _____

8. Have you ever been convicted or found guilty of Driving Under the Influence? NO

If so, when and where? _____

9. Have you ever been convicted of a violation of any state or federal intoxication law? NO

If so, when and where? _____

10. Is your place of business to be conducted by a manager or agent? NO

If so, by whom? _____

11. What is your Kansas State Liquor License No.? 01054000201

What is the expiration date of your State Liquor License? 11-25-2022

12. Please enclose the City Liquor License Fee of \$250.00 with your application _____

I, David L. Fox, the above named applicant hereby agree to comply with all of the laws of the State of Kansas, and all rules and regulations prescribed by you, and hereafter to be prescribed by you, relating to the sale or distribution of alcoholic beverages, and do hereby agree to purchase all alcoholic beverages from a wholesaler licensed and bonded under the laws of the State of Kansas, and do further consent to the immediate revocation of my alcohol beverage retail license, by proper officials, for the violation of such laws, rules or regulations.

David L. Fox

Signature of Applicant

City Clerk

APPLICATION APPROVED ON THIS _____ day of _____, 20_____

by the Mayor and Governing Body of the City of Council Grove, Morris County, Kansas.

CITY LICENSE NUMBER _____

APPLICATION FOR RETAIL LIQUOR BY THE PACKAGE
AND CLUB LIQUOR LICENSE

Council Grove, Kansas 12.14, 20 21

TO THE GOVERNING BODY OF THE CITY OF COUNCIL GROVE, MORRIS COUNTY, KANSAS

Council Members:

I hereby apply for a license to sell liquor by the package, in conformity with the laws of the State of Kansas, and the rules and regulations prescribed and hereafter to be prescribed by you relating to the sale or distribution of alcoholic beverages, and for the purpose of securing such license; I made the following statements under oath.

1. Name of Proposed licensee: Linda Kathleen Morris

Age of proposed licensee: 55

Street and address of licensee (residence): 190 Watersedge Loop, Council Grove KS 66846

Phone Number of Proposed licensee: (913) 638-1868

How long have you been a resident of the State of Kansas? 5 yrs

How long have you been a resident of Morris County? 5 yrs

How long have you been a resident of Council Grove? 5 yrs

2. Name of business for which license is desired: 1881 Liquors

Address of business for which license is desired: 400 East Main Street

Telephone number of business for which license is desired: (620) 767-5912

Give Legal Description: Retail Liquor Store

Describe Building: 2 Story Stone Building

3. Name and address of owner or owners of the premises upon which the place of business is located:

Linda K. Morris (Kathy)

4. Are you a citizen of the United States? Yes By birth or naturalization? Birth

If naturalized, give place and date of naturalization: _____

5. Have you ever been convicted of a felony? No

If so, when and where? _____

6. Have you ever been convicted of a crime involving moral turpitude? No

If so, when and where? _____

7. Have you ever been convicted or adjudged guilty of drunkenness? No

If so, when and where? _____

8. Have you ever been convicted or found guilty of Driving Under the Influence? NO
If so, when and where? _____

9. Have you ever been convicted of a violation of any state or federal intoxication law? NO
If so, when and where? _____

10. Is your place of business to be conducted by a manager or agent? Self
If so, by whom? _____

11. What is your Kansas State Liquor License No.? 11655
What is the expiration date of your State Liquor License? December 20, 2022

12. Please enclose the City Liquor License Fee of \$250.00 with your application Check # 10826

I, Linda K. Morris, the above named applicant hereby agree to comply with all of the laws of the State of Kansas, and all rules and regulations prescribed by you, and hereafter to be prescribed by you, relating to the sale or distribution of alcoholic beverages, and do hereby agree to purchase all alcoholic beverages from a wholesaler licensed and bonded under the laws of the State of Kansas, and do further consent to the immediate revocation of my alcohol beverage retail license, by proper officials, for the violation of such laws, rules or regulations.

Linda K. Morris
Signature of Applicant

City Clerk

APPLICATION APPROVED ON THIS _____ day of _____, 20____
by the Mayor and Governing Body of the City of Council Grove, Morris County, Kansas.

CITY LICENSE NUMBER _____

CORPORATE APPLICATION FOR LICENSE TO SELL CEREAL MALT BEVERAGES

P10

(This form has been prepared by the Attorney General's Office)

City or County of COUNCIL GROVE

SECTION 1 - LICENSE TYPE

Check One: New License Renew License Special Event Permit

Check One:
 License to sell cereal malt beverages for consumption on the premises.
 License to sell cereal malt beverages in original and unopened containers and not for consumption on the licensed premises.

SECTION 2 - APPLICANT INFORMATION

Kansas Sales Tax Registration Number (required): 81-0933416

I have registered as an Alcohol Dealer with the TTB. Yes (required for new application)

Name of Corporation <u>SADDLE ROCK INC</u>	Principal Place of Business <u>15 S 6th</u>		
Corporation Street Address <u>1564 S 700 Rd</u>	Corporation City <u>Council Grove</u>	State <u>KS</u>	Zip Code <u>66846</u>
Date of Incorporation <u>12-28-2015</u>	Articles of Incorporation are on file with the Secretary of State.		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Resident Agent Name <u>SADDLEROCK INC.</u>	Phone No. <u>785 466 1327</u>		
Residence Street Address <u>1564 S 700 Rd</u>	City <u>Council Grove</u>	State <u>KS</u>	Zip Code <u>66846</u>

SECTION 3 - LICENSED PREMISE

Licensed Premise (Business Location or Location of Special Event)	Mailing Address (If different from business address)
DBA Name <u>SADDLEROCK</u>	Name
Business Location Address <u>15 S 6th</u>	Address
City <u>Council Grove</u> State <u>KS</u> Zip <u>66846</u>	City State Zip
Business Phone No. <u>620-767-9000</u>	<input type="checkbox"/> Applicant owns the proposed business location. <input checked="" type="checkbox"/> Applicant does not own the proposed business location.
Business Location Owner Name(s) <u>BLUE BUILDING LLC.</u>	

SECTION 4 - OFFICERS, DIRECTORS, STOCKHOLDERS OWNING 25% OR MORE OF STOCK

List each person and their spouse, if applicable. Attach additional pages if necessary.

Name <u>MARSHA SEYMOUR</u>	Position <u>President</u>	Date of Birth <u>12-29-51</u>
Residence Street Address <u>1564 S 700 Rd</u>	City <u>Council Grove</u> State <u>KS</u>	Zip Code <u>66846</u>
Spouse Name <u>SEE Below</u>	Position	Date of Birth
Residence Street Address	City State Zip Code	
Name <u>Michael Seymour</u>	Position <u>Sec</u>	Date of Birth <u>9-2-51</u>
Residence Street Address <u>1564 S 700 Rd</u>	City <u>Council Grove</u> State <u>KS</u>	Zip Code <u>66846</u>
Spouse Name	Position	Age
Residence Street Address	City State Zip Code	
Name	Position	Date of Birth
Residence Street Address	City State Zip Code	
Spouse Name	Position	Age
Residence Street Address	City State Zip Code	

SECTION 4 - OFFICERS, DIRECTORS, STOCKHOLDERS OWNING 25% OR MORE OF STOCK (CONTINUED)

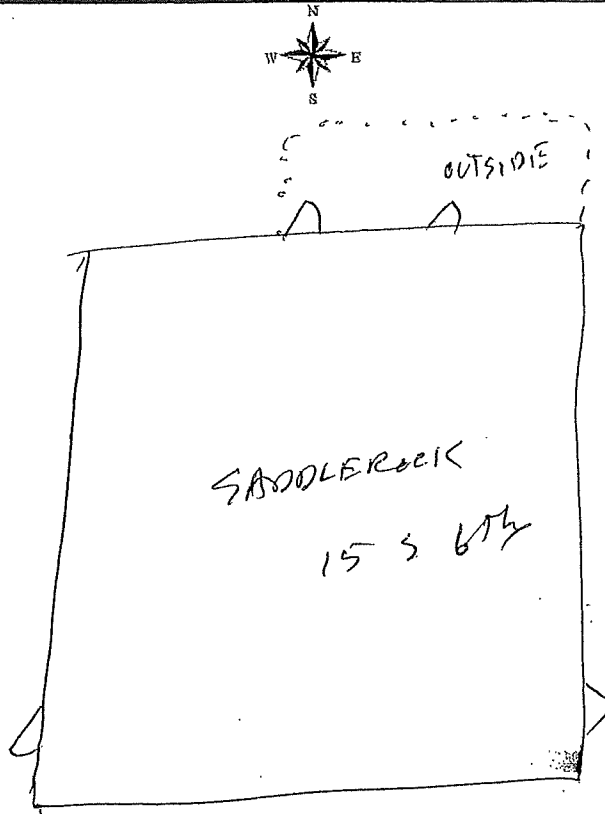
Name	Position		Date of Birth
Residence Street Address	City	State	Zip Code
Spouse Name	Position		Date of Birth
Residence Street Address	City	State	Zip Code
Name	Position		Date of Birth
Residence Street Address	City	State	Zip Code
Spouse Name	Position		Date of Birth
Residence Street Address	City	State	Zip Code
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Spouse Name	Position		Date of Birth
Residence Street Address	City	State	Zip Code
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Residence Street Address	City	State	Zip Code
Spouse Name	Position		Date of Birth
Residence Street Address	City	State	Zip Code
Name	Position		Date of Birth
Residence Street Address	City	State	Zip Code
Spouse Name	Position		Date of Birth
Residence Street Address	City	State	Zip Code

SECTION 5 – MANAGER OR AGENT INFORMATION		
My place of business or special event will be conducted by a manager or agent.		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If yes, provide the following:		
Manager/Agent Name	Phone No.	Date of Birth
Residence Street Address	City	Zip Code
Manager or Agent Spousal Information*		
Spouse Name	Phone No.	Date of Birth
Residence Street Address	City	Zip Code
SECTION 6 – QUALIFICATIONS FOR LICENSURE		
Within 2 years immediately preceding the date of this application, have any of the individuals identified in Sections 4 & 5 have been convicted of, released from incarceration for or released from probation or parole for any of the following crimes*: (1) Any felony; (2) a crime involving moral turpitude; (3) drunkenness; (4) driving a motor vehicle while under the influence of alcohol (DUI); or (5) violation of any state or federal intoxicating liquor law.		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Have any of the individuals identified in Sections 4 and 5 been managers, officers, directors or stockholders owning more than 25% of the stock of a corporation which: (1) had a cereal malt beverage license revoked; or (2) was convicted of violating the Club and Drinking Establishment Act or the CMB laws of Kansas.		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
All of the individuals identified in Sections 4 & 5 are at least 21 years of age*.		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
SECTION 7 – DURATION OF SPECIAL EVENT		
Start Date	Time	<input type="checkbox"/> AM <input type="checkbox"/> PM
End Date	Time	<input type="checkbox"/> AM <input type="checkbox"/> PM

Proceed to Section 8 on the next page.

SECTION 8 - LICENSED PREMISE

In the space below, draw the area you wish to sell or deliver CMB. Include entrances, exits and storage areas. Do not include areas you do not wish to license. If you wish to attach a drawing, check the box: 8 1/2" by 11" drawing attached.



I declare under penalty of perjury under the laws of the State of Kansas that the foregoing is true and correct and that I am authorized by the corporation to complete this application. (K.S.A. 53-601)

SIGNATURE Mario Lopez DATE 12.13.2021

FOR CITY/COUNTY OFFICE USE ONLY:

- License Fee Received Amount \$ _____ Date _____
(\$25 - \$50 for Off-Premise license or \$25-200 On-Premise license)
- \$25 CMB Stamp Fee Received Date _____
- Background Investigation Completed Date _____ Qualified Disqualified
- Verified applicant has registered with the TTB as an Alcohol Dealer
- New License Approved Valid From Date _____ to _____ By: _____
- License Renewed Valid From Date _____ to _____ By: _____
- Special Event Permit Approved Valid From Date _____ to _____ By: _____

A PHOTOCOPY OF THE COMPLETED FORM, TOGETHER WITH THE STAMP FEE REQUIRED BY K.S.A. 41-2702(e), MUST BE SUBMITTED WITH YOUR MONTHLY REPORT (ABC-307) TO THE ALCOHOLIC BEVERAGE CONTROL, 109 SW 9TH ST, 5TH FLOOR, PO BOX 3506, TOPEKA, KS 66601.

* Applicant's spouse is not required to meet citizenship, residency or age requirements. If renewal application, applicant's spouse is not required to meet the no criminal history requirement. K.S.A. 41-2703(b)(9)



CORPORATE APPLICATION FOR LICENSE TO SELL CEREAL MALT BEVERAGES P14

(This form has been prepared by the Attorney General's Office)

City or County of Council Grove

SECTION 1 - LICENSE TYPE			
Check One: <input type="checkbox"/> New License <input checked="" type="checkbox"/> Renew License <input type="checkbox"/> Special Event Permit			
Check One: <input checked="" type="checkbox"/> License to sell cereal malt beverages for consumption on the premises. <input type="checkbox"/> License to sell cereal malt beverages in original and unopened containers and not for consumption on the licensed premises.			
SECTION 2 - APPLICANT INFORMATION			
Kansas Sales Tax Registration Number (required): <u>81-0933416</u>			
I have registered as an Alcohol Dealer with the TTB. <input type="checkbox"/> Yes (required for new application)			
Name of Corporation <u>SADDLEROCK INC.</u>		Principal Place of Business <u>15 S 6th</u>	
Corporation Street Address <u>1564 S 700 Rd</u>		Corporation City <u>Council Grove</u>	State <u>KS</u> Zip Code <u>66846</u>
Date of Incorporation <u>12-28-2015</u>		Articles of Incorporation are on file with the Secretary of State. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Resident Agent Name <u>SADDLEROCK INC</u>		Phone No. <u>785 466 1327</u>	
Residence Street Address <u>1564 S 700 Rd</u>		City <u>Council Grove</u>	State <u>KS</u> Zip Code <u>66846</u>
SECTION 3 - LICENSED PREMISE			
Licensed Premise (Business Location or Location of Special Event)		Mailing Address (If different from business address)	
DBA Name <u>SADDLEROCK</u>		Name	
Business Location Address <u>15 S 6th</u>		Address	
City <u>Council Grove</u>	State <u>KS</u>	City	State Zip
Business Phone No. <u>620 767 9000</u>		<input type="checkbox"/> Applicant owns the proposed business location. <input checked="" type="checkbox"/> Applicant does not own the proposed business location.	
Business Location Owner Name(s) <u>BLUE BUILDING LLC</u>			
SECTION 4 - OFFICERS, DIRECTORS, STOCKHOLDERS OWNING 25% OR MORE OF STOCK			
List each person and their spouse*, if applicable. Attach additional pages if necessary.			
Name <u>MARSHA SEYMOUR</u>		Position <u>President</u>	Date of Birth <u>12-29-51</u>
Residence Street Address <u>1564 S 700 Rd</u>		City <u>Council Grove</u>	State <u>KS</u> Zip Code <u>66846</u>
Spouse Name <u>SEE BELOW</u>		Position	Date of Birth
Residence Street Address		City	State Zip Code
Name <u>Michael Seymour</u>		Position <u>Sec.</u>	Date of Birth <u>9-2-51</u>
Residence Street Address <u>1564 S 700 Rd</u>		City <u>Council Grove</u>	State <u>KS</u> Zip Code <u>66846</u>
Spouse Name		Position	Age
Residence Street Address		City	State Zip Code
Name		Position	Date of Birth
Residence Street Address		City	State Zip Code
Spouse Name		Position	Age
Residence Street Address		City	State Zip Code

SECTION 4 - OFFICERS, DIRECTORS, STOCKHOLDERS OWNING 25% OR MORE OF STOCK (CONTINUED)

Name	Position	Date of Birth
Residence Street Address	City State	Zip Code
Spouse Name	Position	Date of Birth
Residence Street Address	City State	Zip Code
Name	Position	Date of Birth
Residence Street Address	City State	Zip Code
Spouse Name	Position	Date of Birth
Residence Street Address	City State	Zip Code
Name	Position	Date of Birth
Residence Street Address	City State	Zip Code
Spouse Name	Position	Date of Birth
Residence Street Address	City State	Zip Code
Name	Position	Date of Birth
Residence Street Address	City State	Zip Code
Spouse Name	Position	Date of Birth
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Residence Street Address	City State	Zip Code
Spouse Name	Position	Date of Birth
Residence Street Address	City State	Zip Code
Name	Position	Date of Birth
Residence Street Address	City State	Zip Code
Spouse Name	Position	Date of Birth
Residence Street Address	City State	Zip Code
Name	Position	Date of Birth
Residence Street Address	City State	Zip Code
Spouse Name	Position	Date of Birth
Residence Street Address	City State	Zip Code

SECTION 5 – MANAGER OR AGENT INFORMATION

My place of business or special event will be conducted by a manager or agent. Yes No

If yes, provide the following:

Manager/Agent Name	Phone No.	Date of Birth
Residence Street Address	City	Zip Code

Manager or Agent Spousal Information*

Spouse Name	Phone No.	Date of Birth
Residence Street Address	City	Zip Code

SECTION 6 – QUALIFICATIONS FOR LICENSURE

Within 2 years immediately preceding the date of this application, have any of the individuals identified in Sections 4 & 5 have been convicted of, released from incarceration for or released from probation or parole for any of the following crimes*:
 (1) Any felony; (2) a crime involving moral turpitude; (3) drunkenness; (4) driving a motor vehicle while under the influence of alcohol (DUI); or (5) violation of any state or federal intoxicating liquor law.

Yes No

Have any of the individuals identified in Sections 4 and 5 been managers, officers, directors or stockholders owning more than 25% of the stock of a corporation which:
 (1) had a cereal malt beverage license revoked; or (2) was convicted of violating the Club and Drinking Establishment Act or the CMB laws of Kansas.

Yes No

All of the individuals identified in Sections 4 & 5 are at least 21 years of age*.

Yes No

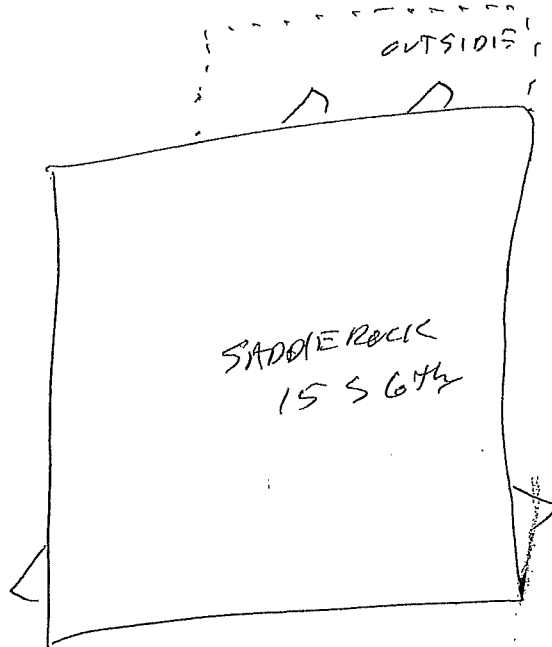
SECTION 7 – DURATION OF SPECIAL EVENT

Start Date	Time	<input type="checkbox"/> AM <input type="checkbox"/> PM
End Date	Time	<input type="checkbox"/> AM <input type="checkbox"/> PM

Proceed to Section 8 on the next page.

SECTION 8 - LICENSED PREMISE

In the space below, draw the area you wish to sell or deliver CMB. Include entrances, exits and storage areas. Do not include areas you do not wish to license. If you wish to attach a drawing, check the box: 8 1/2" by 11" drawing attached.



I declare under penalty of perjury under the laws of the State of Kansas that the foregoing is true and correct and that I am authorized by the corporation to complete this application. (K.S.A. 53-601)

SIGNATURE Maushaleprow DATE 12-13-2021

FOR CITY/COUNTY OFFICE USE ONLY:

License Fee Received Amount \$ _____ Date _____
 (\$25 - \$50 for Off-Premise license or \$25-200 On-Premise license)

\$25 CMB Stamp Fee Received Date _____

Background Investigation Completed Date _____ Qualified Disqualified

Verified applicant has registered with the TTB as an Alcohol Dealer

New License Approved Valid From Date _____ to _____ By: _____

License Renewed Valid From Date _____ to _____ By: _____

Special Event Permit Approved Valid From Date _____ to _____ By: _____

A PHOTOCOPY OF THE COMPLETED FORM, TOGETHER WITH THE STAMP FEE REQUIRED BY K.S.A. 41-2702(e), MUST BE SUBMITTED WITH YOUR MONTHLY REPORT (ABC-307) TO THE ALCOHOLIC BEVERAGE CONTROL, 109 SW 9TH ST, 5TH FLOOR, PO BOX 3506, TOPEKA, KS 66601.

* Applicant's spouse is not required to meet citizenship, residency or age requirements. If renewal application, applicant's spouse is not required to meet the no criminal history requirement. K.S.A. 41-2703(b)(9)



To:

The Mayor & Members of the Council Grove City Council,

I, John Scarce doing business on behalf of Superior Systems, LLC. am requesting an increase in refuse collection rates corresponding with the following rate increase outline. The decision to request this rate increase was not made lightly but has become a matter of necessity due to the rapid increase in inflation across almost every sector of our economy.

Requested Increase of rate:

- \$ 0.3461¢ (Amount of rate increase weekly.)
- \$ 1.50 (Amount of rate increase monthly.)
- \$ 18.00 (Amount of rate increase annually.)

I appreciate the opportunity to come before the council and look forward to answering any questions you may have.

Sincerely,

John Scarce.



President, Superior Systems, LLC.

2021:

Inside the city limits of Council Grove:

- 834 [^] (Average inside city limits billed residential customer count.)
- \$ 14.26 (Inside city limits billed rate per month.)
- \$ 13.51 (Portion of billed rate paid to Superior Systems, LLC for refuse removal.)
- \$ 0.50 (Portion of billed rate retained by the city for computer use in billing.)
- \$ 0.25 (Portion of billed rate retained by the city for foliage removal.)

- \$ 11,892.84 (Average total of revenue from monthly inside city limits billing.)
- \$ 11,267.34 (Portion of the average total monthly revenue amount paid to Superior Systems, LLC for refuse removal.)
- \$ 417.00 (Portion of the average total monthly revenue amount retained by the city for computer use in billing.)
- \$ 208.50 (Portion of the average total monthly revenue amount retained by the city for foliage removal.)

Outside the city limits of Council Grove, but provided with contracted refuse removal:

- 72 [^] (Average outside of city limits billed residential customer count.)
- \$ 14.00 (Outside of city limits billed rate per month.)
- \$ 13.50 (Portion of billed rate paid to Superior Systems, LLC for refuse removal.)
- \$ 0.50 (Portion of billed rate retained by the city for computer use in billing.)

- \$ 1,008.00 (Average total of revenue from monthly outside of city limits billing.)
- \$ 972.00 (Portion of the average total monthly revenue amount paid to Superior Systems, LLC for refuse removal.)
- \$ 36.00 (Portion of the average total monthly revenue amount retained by the city for computer use in billing.)

Billed & dispensed totals for both inside & outside city limits customers:

- \$ 12,900.84 (Average total of revenue from monthly inside & outside of city limits billing.)
- \$ 12,239.34 (Portion of the average total monthly revenue amount paid to Superior Systems, LLC for refuse removal.)
- \$ 453.00 (Portion of the average total monthly revenue amount retained by the city for computer use in billing.)
- \$ 208.50 (Portion of the average total monthly revenue amount retained by the city for foliage removal.)

[^] Customer count average was obtained by adding the total number of billed customers listed on payment check stubs received by Superior Systems, LLC over the past 11 months and dividing those totals by 11. Further, these averages have been rounded to the next closest whole number.

2022: (If Rate Increase is Approved.)

Inside the city limits of Council Grove:

- 834 [^] (Average inside city limits billed residential customer count.)
- \$ 15.76 (Inside city limits billed rate per month.)
- \$ 15.01 (Portion of billed rate paid to Superior Systems, LLC for refuse removal.)
- \$ 0.50 (Portion of billed rate retained by the city for computer use in billing.)
- \$ 0.25 (Portion of billed rate retained by the city for foliage removal.)

- \$ 13,143.84 (Average total of revenue from monthly inside city limits billing.)
- \$ 12,518.34 (Portion of the average total monthly revenue amount paid to Superior Systems, LLC for refuse removal.)
- \$ 417.00 (Portion of the average total monthly revenue amount retained by the city for computer use in billing.)
- \$ 208.50 (Portion of the average total monthly revenue amount retained by the city for foliage removal.)

Outside the city limits of Council Grove, but provided with contracted refuse removal:

- 72 [^] (Average outside of city limits billed residential customer count.)
- \$ 15.50 (Outside of city limits billed rate per month.)
- \$ 15.00 (Portion of billed rate paid to Superior Systems, LLC for refuse removal.)
- \$ 0.50 (Portion of billed rate retained by the city for computer use in billing.)

- \$ 1,116.00 (Average total of revenue from monthly outside of city limits billing.)
- \$ 1,080.00 (Portion of the average total monthly revenue amount paid to Superior Systems, LLC for refuse removal.)
- \$ 36.00 (Portion of the average total monthly revenue amount retained by the city for computer use in billing.)

Billed & dispensed totals for both inside & outside city limits customers:

- \$ 14,259.84 (Average total of revenue from monthly inside & outside of city limits billing.)
- \$ 13,598.34 (Portion of the average total monthly revenue amount paid to Superior Systems, LLC for refuse removal.)
- \$ 453.00 (Portion of the average total monthly revenue amount retained by the city for computer use in billing.)
- \$ 208.50 (Portion of the average total monthly revenue amount retained by the city for foliage removal.)

[^] Customer count average was obtained by adding the total number of billed customers listed on payment check stubs received by Superior Systems, LLC over the past 11 months and dividing those totals by 11. Further, these averages have been rounded to the next closest whole number.



CITY LAKE COMMITTEE

CITY COUNCIL MEETING RECOMMENDATION, DECEMBER 21, 2021

1. Recommend the City Council approve a variance request of 6' to the 100' high water setback for the construction of a covered deck.

Scott and Beth McGinn, H-S1

Extension will not restrict or interfere with the neighboring cabins or access to the area. The neighboring leaseholds are aware of this request and have indicated such in writing.

LAKE COMMITTEE: KEITH WESSEL
LARRY SIEGRIST

CITY INSPECTOR: JAMES MASTERS

December 3, 2021

City of Council Grove
205 N. Union Street
Council Grove, KS 66846

Re: Variance Request

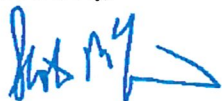
To: Council Grove City Council / Council Grove Lake Association

We are located at HS1 (112 Waterside Circle) at the Council Grove City Lake in Council Grove, KS. We are planning to replace our deck and would like to request a variance to build 6' closer to the lake than the existing deck currently resides. This variance request is only for about 1/3 of the deck (middle section) as the rest of the new deck will be in the same approximate footprint as the existing deck (~100 feet from the City Lake). Please see the included drawings for more detail.

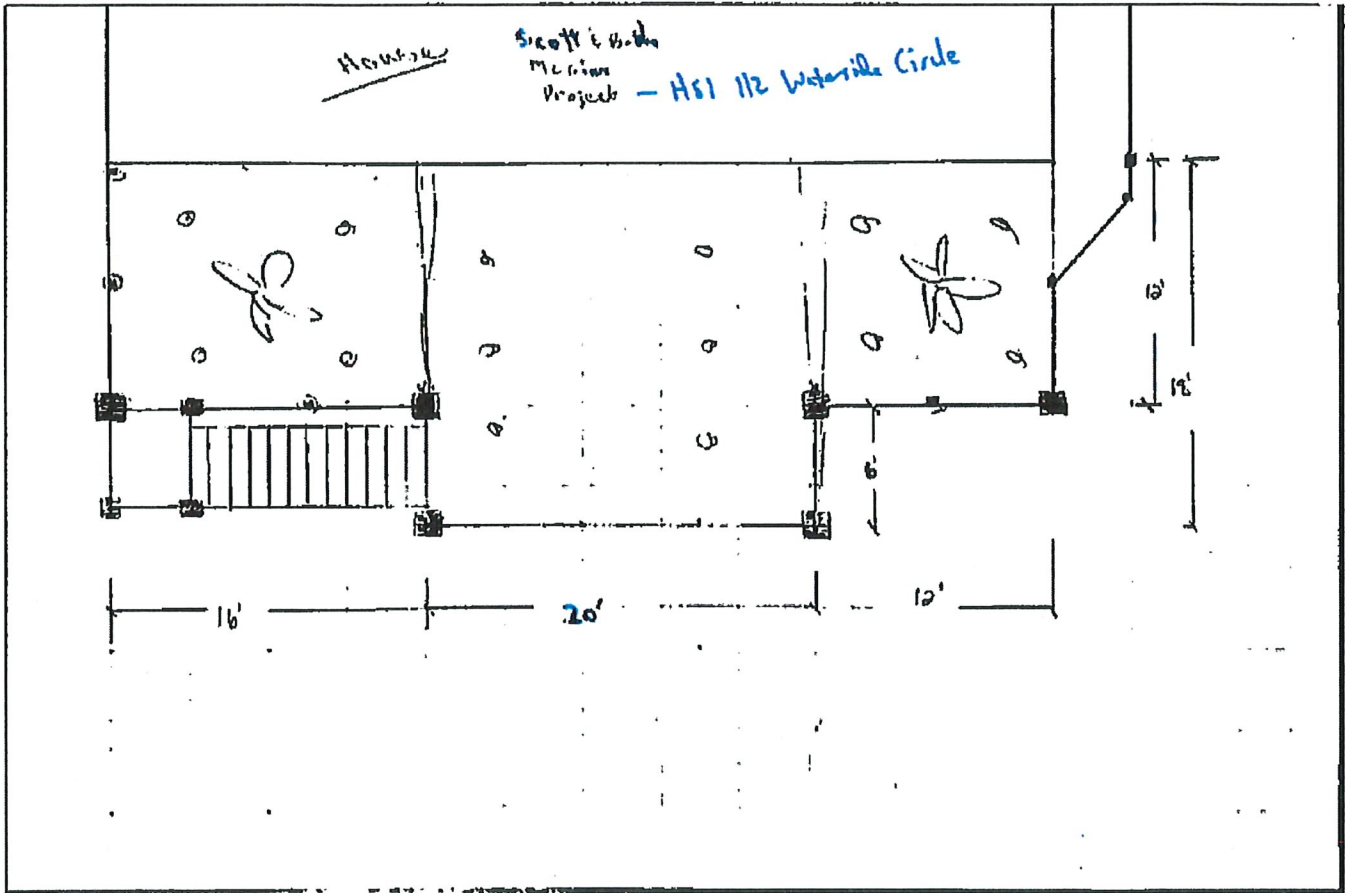
Our neighbors are aware of this requested change and have submitted letters providing their approval.

Thanks for your consideration and help. Please let me know if you need anything further.

Sincerely,



Scott and Beth McGinn
112 Waterside Circle
Council Grove, KS 66846
Cell # 316-841-6803



Lake View Hsi ¹¹² Waterside Circle



December 3, 2021

City of Council Grove
205 N. Union Street
Council Grove, KS 66846

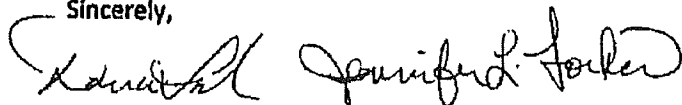
To: Council Grove City Council / Council Grove Lake Association

We are the neighbor to the south of Scott and Beth McGinn at H51 (112 Waterside Circle). We are located at 108 Waterside Circle.

We've had a chance to review and understand the deck replacement project by our neighbors at H51. Please accept this letter as our approval for the requested changes that they would like to make to their deck at their cabin at 108 Waterside Circle.

Thanks and let me know if you need anything further.

Sincerely,

A handwritten signature in cursive script, appearing to read "Dan and Jennifer Forker". The signature is written in dark ink and is positioned to the right of the word "Sincerely,".

Dan and Jennifer Forker
110 Waterside Circle
Council Grove, KS 66846
Cell phone # 620-474-1036

December 3, 2021

City of Council Grove
205 N. Union Street
Council Grove, KS 66846


To: Council Grove City Council / Council Grove Lake Association

We are the neighbor to the north of Scott and Beth McGinn at HS1 (112 Waterside Circle). We are located at 116 Waterside Circle.

We've had a chance to review and understand the deck replacement project by our neighbors at HS1 and we are fine with the work that they would like to complete. Please accept this letter as our approval for the requested changes that they would like to make to their deck at their cabin at HS1 (112 Waterside Circle).

Thanks and please let me know if you need anything further.

Sincerely,



Justin and Jacie Gunter
116 Waterside Circle
Council Grove, KS 66846
Cell # 913-908-3796

Building Permit Application

City of Council Grove, Kansas

To be completed by Applicant...

Job Address
 112 Waterside Circle
Owner
 Scott and Beth McGinn; Elizabeth S. McGinn Trust

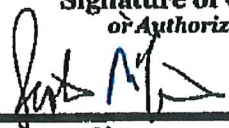
Job Address: 112 Waterside Circle			
Owner: Scott & Beth McGinn		Phone: 316-841-6803	
Mailing Address: 1010 Douglas Drive	City: Sedgewick	State: KS	Zip: 67135
Contractor:	License No.:	Phone:	
Mailing Address:	City:	State:	Zip:
Use of Building:	Area (ft ²):		
Class of Work (circle):	New	<u>Addition</u>	<u>Alteration</u>
	Repair	Move	Remove
Describe Work:			
Valuation of work: \$ 42,500			

NOTICE

Separate permits are required for electrical, plumbing, mechanical and building. This permit becomes null and void if work or construction authorized is not commenced within 180 days, or if construction or work is suspended or abandoned for a period of 180 days at any time after work is commenced. I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

Permit not validated until Permit Fee is paid.

~~12/11/2021~~

Signature of Contractor or Authorized Agent	Date
	12/4/2021
Signature of Owner (if owner builder)	Date

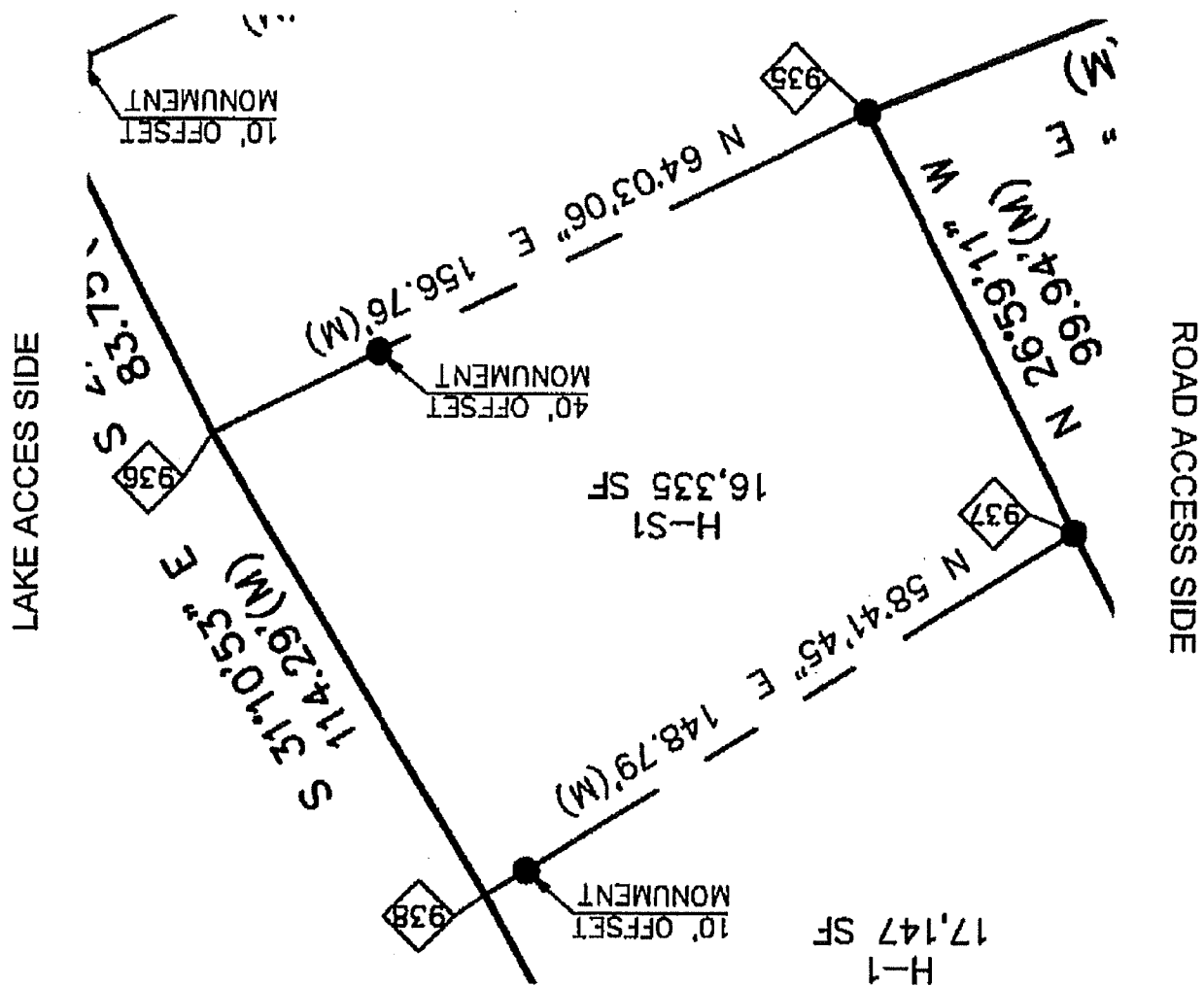
OFFICE USE ONLY

Special Conditions:

Permit No.: _____ Approval Date: _____

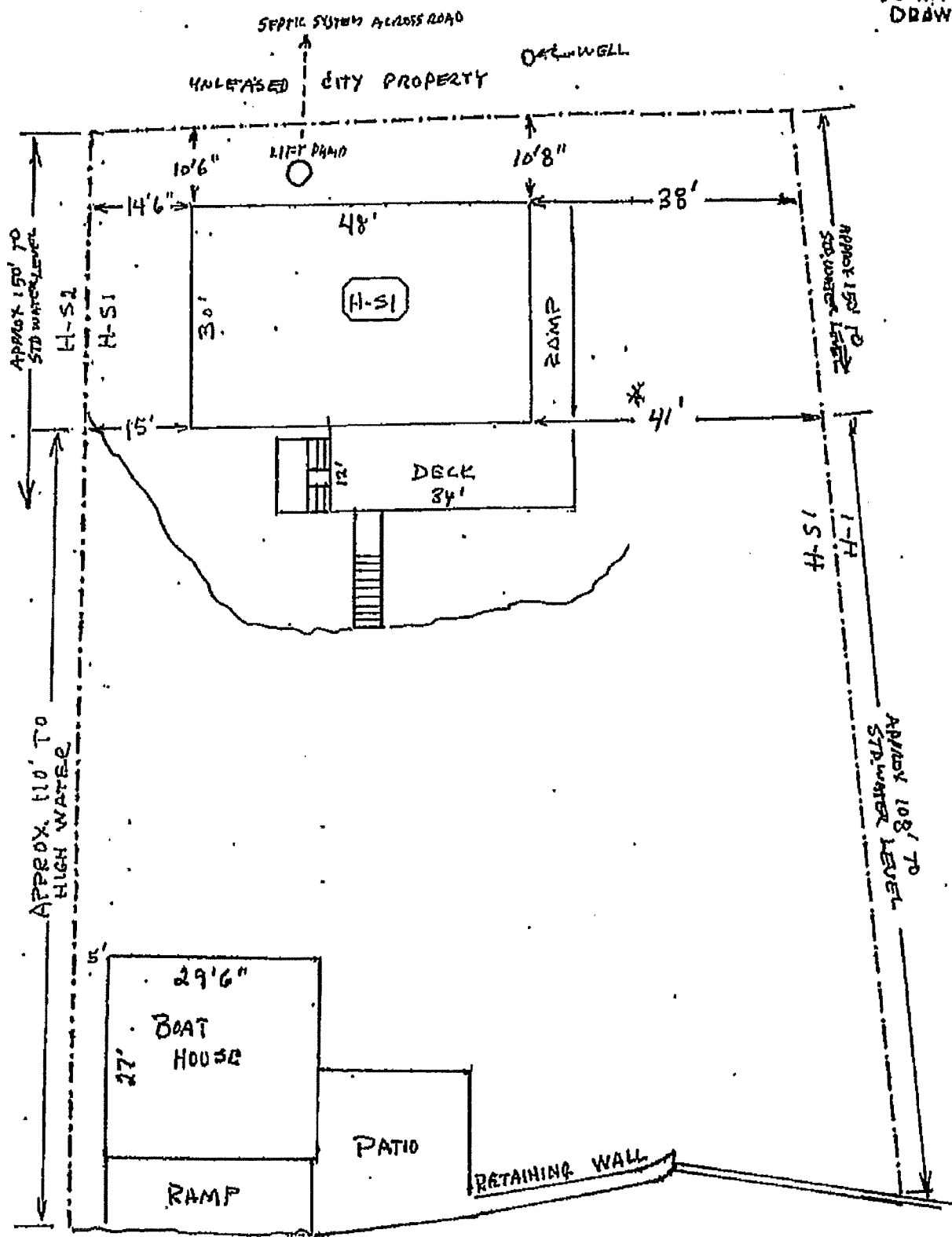
Approved By: _____

OFFICE USE ONLY			
Use Zone:		Code Edition:	
Construction Type:		Occupancy Group:	
Max. Occ. Load		Division:	
No. of Stories:		No. of Dwelling Units:	
No. of Off-Street Parking Spaces		Fire Sprinklers Required:	Yes No
SPECIAL APPROVALS:	REQUIRED: (YES/NO)	RECEIVED: (date)	
Zoning Board:			
Health Department:			
Fire Department:			
KS Historical Society:			
KDOT:			
US Army Corps of Engineers:			
City Council:			
Other: (specify)			
PERMIT FEE: \$			



H-S?

1 IN. = 20 FT.
DO NOT SCALE
DRAWING



* APPROXIMATE BECAUSE OF TREE



CITY OF COUNCIL GROVE · 205 UNION STREET · PO BOX 313
COUNCIL GROVE, KS 66846 · 620-767-5417 · COUNCILGROVE.COM

Utilities Committee Recommendation

The Utilities Committee recommends changing the starting pay from \$14.00 an hour to \$15.00 an hour effective January 1, 2022, in order to compete with other employers in the area.



CITY OF COUNCIL GROVE · 205 UNION STREET · PO BOX 313

COUNCIL GROVE, KS 66846 · 620-767-5417 · COUNCILGROVE.COM

Utilities Committee Recommendation

The Utilities Committee recommends pay increases for the following employees to create separation with the new starting wage for the Utilities Department effective January 1, 2022.

- Jesse Pavek:
 - Current hourly wage: \$14.50
 - New hourly wage: \$15.50
- David Siemers
 - Current hourly wage: \$15.78
 - New hourly wage: \$16.78
- Michael Stover
 - Current hourly wage: \$14.00
 - New hourly wage: \$15.00



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Utilities Committee Recommendation

The Utilities Committee recommends to appointment of Nathan Ross to Utilities Department Apprentice at an hourly pay of \$15.00. The appointment is contingent on passing a physical and drug and alcohol screening.