



# Municipal License Application



License Period Ending ~~June 30,~~ December 31, 2023

Office Use Only	License #	Issue Date
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<b>CHECK ONE:</b>	<input type="checkbox"/> Abattoir \$75 Fee	<input type="checkbox"/> Arcade \$50 Fee	<input type="checkbox"/> Tree Cutting \$25 Fee
	<input checked="" type="checkbox"/> Mobile Dessert Establishment \$50 Fee		<input type="checkbox"/> Mobile Food Establishment \$50 Fee
	<input type="checkbox"/> Taxi (License period: Jan-Dec) \$100 Fee + \$2/driver (Attach supplemental form)		

## Filling out your application

A municipal license is a privilege, not a right. Any false answers or omissions may result in the denial of your application.

- This application must be filled out accurately and completely.
- If you are unsure about how to respond to any questions on this form, check with the City Clerk for clarification.
- Your application will not be processed until you pay the application fee(s).
- You can obtain information regarding arrest and conviction records from the Wisconsin Circuit Court Access website at: [www.wcca.wicourts.gov/index.xsl](http://www.wcca.wicourts.gov/index.xsl) (Note: CCAP may not provide a comprehensive list of ALL arrests and convictions).

## Attachment(s)

- Applicants applying for a Tree Cutting License must attach a copy of your certificate of insurance with a minimum \$1,000,000 liability insurance.
- Applicants applying for a Taxi License must attach a copy of your certificate of insurance with a minimum \$1,000,000 liability insurance.

## Review of your application

- The Richland Center Police Department will perform a background check to verify the information you have provided.
- The city may require that additional information, appropriate to the specific type of license requested, be submitted with this application or as a supplement to this application prior to consideration of license issuance.
- If you are asked to appear before a committee but choose not to do so, your application may be denied.

First Name	Schoepp	MI	K.	Last Name	Nancy				
Residence (Street Address)	480 S. Cairns Ave	City	Richland Center	State	WI	Zip	53581		
Phone	608-647-2752	Email Address	nschoepp@speed.com	Country		Date of Birth	8-17-1949	Sex	F
Driver's License Number	5100-6314-9797-01	Place of employment and phone #	Retired						
Other Identifying Data [maiden name, aliases, etc.]									
Pippin, Amos									
Business Name For License									
Gardner's Icecream, LLC									

Do you have any felony or misdemeanor charges presently pending against you? (List below)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
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List Any **PENDING** Citations, Tickets or Criminal Charges

Year	Court Location	Charge

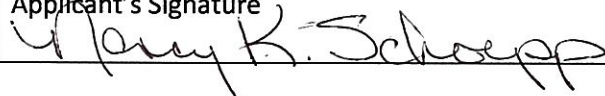
Have you ever been convicted of any felony or misdemeanor? (List below)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
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List Any Citations, Tickets, Municipal/Ordinance Violations and Criminal **CONVICTIONS** (Excluding parking tickets)

Year	Court Location	Charge

*The undersigned, by signing this application, hereby authorize and consent to such inquiry and/or investigation as the City of Richland Center deems necessary to determine whether this applicant and/or the application meets all requirements of the ordinances of the City for the issuance of said license.*

*I further certify I understand that any material falsification in the application may be basis for denial of the application or the revocation of any license issued by the city pursuant to this application.*

Applicant's Signature 	Date 4-10-23
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**OFFICE USE ONLY:**

Subscribed and sworn to before me this 10<sup>th</sup> day of April, 2023

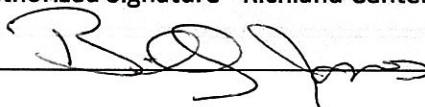
  
City Clerk/Treasurer or Deputy

\$ 50 fee paid on 4/10/23

**To be filled out by the Richland Center Police Department**

☒ Individual has no criminal arrest record with either the Wisconsin State Crime Bureau or the RCPD.

☐ See attached for criminal arrest records.

Authorized Signature - Richland Center Police Department 	Date 4-14-2023
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DEPARTMENT OF AGRICULTURE,  
TRADE AND CONSUMER PROTECTION

License, Permit or Registration

The person, firm, or corporation shown below has complied with the Wisconsin statutes and is authorized to engage in the activity indicated.

ACTIVITY	EXPIRATION DATE	I.D. NUMBER
Mobile Retail Food - Not Serving Meals, Pre-packaged - W&M No	30-Jun-2023	MMAH-AKEPE6
Processing	NOT TRANSFERABLE	BUSINESS / ESTABLISHMENT ADDRESS
LICENSEE MAILING ADDRESS		GRANDMA'S ICECREAM LLC
GRANDMA'S ICECREAM LLC		20372 SCHOEPP LN
20372 SCHOEPP LN		RICHLAND CENTER WI 53581
RICHLAND CENTER WI 53581		

**WITHDRAWAL SCHEDULE**

May 18, 2022

NANCY SCHOEPP  
 DBA GRANDMA'S ICE CREAM  
 20372 SCHOEPP LN  
 RICHLAND CENTER WI 53581

Agent:  
 WALLACE-COOPER & ELLIOTT INS AGENCY  
 1071-AX  
 (608) 647-6311

Policy Number: ZN0739-9  
 Policy Type: Commercial Auto  
 Policy Term: 05-17-22 to 05-17-23  
 Bank Account Ending In: 82

**THIS IS NOT A BILL**

Withdrawals will be made from your account as shown below. We will notify you prior to any changes in payment amounts should your policy premium change.

**Future Withdrawals**

Withdrawal	Withdrawal Date	Amount
1	05-18-22	\$ 26.73
2	06-17-22	\$ 26.73
3	07-17-22	\$ 26.73
4	08-17-22	\$ 26.73
5	09-17-22	\$ 26.73
6	10-17-22	\$ 26.73
7	11-17-22	\$ 26.73
8	12-17-22	\$ 26.73
9	01-17-23	\$ 26.73
10	02-17-23	\$ 26.73
11	03-17-23	\$ 26.70

**Remaining Schedule Total . . . . . \$ 294.00**

Withdrawal dates shown are approximate. If the date is on a weekend or holiday, the withdrawal will occur the next business day.

Amount includes a \$2 service charge per installment.

You are responsible for keeping your account information up to date. Failure to update your account information may result in a payment returned by the financial institution.

Payments returned unpaid by your financial institution will result in a \$25 fee. If a payment is dishonored, Acuity reserves the right to seek civil damages.

If you have questions concerning this schedule, please contact our Billing Team at 800.242.7666.

**GRANDMA'S**

**ICE CREAM** LLC

*"I scream for ice cream"*

