

PUBLIC NOTICE

AGENDA FOR REGULAR VILLAGE BOARD MEETING #2031

Wednesday, April 8, 2020 at 5:00 PM

Zoom Virtual Meeting – Login Info:

Join Zoom Meeting

<https://zoom.us/j/624762386>

Meeting ID: 624 762 386

DIAL IN NUMBER

1-312-626-6799

*****IF YOU ARE A MEMBER OF THE INTERESTED PUBLIC AND DO NOT HAVE THE MEANS TO PARTICIPATE IN THE MEETING VIRTUALLY, PLEASE MAKE ARRANGEMENTS TO ATTEND IN-PERSON BY CONTACTING THE VILLAGE ADMINISTRATOR/CLERK AT 262-783-2525 AT LEAST 24 HOURS IN ADVANCE OF THE MEETING.**

PLEASE TAKE NOTICE that a Regular Meeting of the Butler Village Board will be held on the 8th day of April, 2020 at 5:00 PM via a virtual meeting, at which time and place the following items of business will be considered and possibly acted upon:

- I. Pledge of Allegiance
- II. Roll Call
- III. Persons Desiring to be Heard
- IV. Consent Agenda:
Note: Prior to voting on the Consent Agenda, items may be removed at the request of any Trustee and be placed on the agenda under New Business.
 - 1) Change of Agent for Kwik Trip to Matthew Retzloff.
 - 2) Bartenders License:
 - a. Matthew Retzloff, Kwik Trip
- V. Communications
- VI. Committee Reports - None
- VII. Report of the Administrator
- VIII. New Business
 - A) Discussion and Possible Action on Resolution 20-06 a Resolution to Ratify the Emergency Proclamation Approved by the Village President Pertaining to the COVID-19 Pandemic and Declaration of Emergency.
 - B) Discussion and Possible Action on an Amendment to the Employee Handbook in regards to the 'Families First Coronavirus Response Act' Compliance.
- IX. Adjournment

Dated: April 3, 2020

VILLAGE OF BUTLER

Patricia Tiarks, President

Kayla Thorpe, Administrator/ Clerk

Notice: It is possible that members of, and possibly a quorum of, other governmental bodies of the Village may be in attendance at the above-stated meeting to gather information. No action will be taken by any governmental body at the above-stated meeting other than the governmental body specifically referred to in the above notice. Please note that, upon reasonable notice, good faith efforts will be made to accommodate the needs of disabled individuals through appropriate aids and services. For additional information or to request this service, contact the Village Administrator /Clerk at 262-783-2525 at least 24 hours in advance of the meeting.

Schedule for Appointment of Agent by Corporation / Nonprofit Organization or Limited Liability Company

Submit to municipal clerk.

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent. The following questions must be answered by the agent. The appointment must be signed by an officer of the corporation/organization or one member/manager of a limited liability company and the recommendation made by the proper local official.

To the governing body of: Town
 Village of Butler County of Waukesha
 City

The undersigned duly authorized officer/member/manager of KWIK TRIP, INC.
(Registered Name of Corporation / Organization or Limited Liability Company)

a corporation/organization or limited liability company making application for an alcohol beverage license for a premises known as Kwik Trip 586
(Trade Name)

located at 12501 W. Arden Pl., Butler, WI 53007

appoints Matthew S. Retzlaff
(Name of Appointed Agent)

W158N6702 Tamarack Trl., Menomonee Falls, WI 53051
(Home Address of Appointed Agent)

to act for the corporation/organization/limited liability company with full authority and control of the premises and of all business relative to alcohol beverages conducted therein. Is applicant agent presently acting in that capacity or requesting approval for any corporation/organization/limited liability company having or applying for a beer and/or liquor license for any other location in Wisconsin?

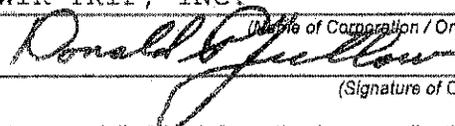
Yes No If so, indicate the corporate name(s)/limited liability company(ies) and municipality(ies).

Is applicant agent subject to completion of the responsible beverage server training course? Yes No

How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin? All my life

Place of residence last year W158N6702 Tamarack Trl., Menomonee Falls, WI 53051

For: KWIK TRIP, INC.
(Name of Corporation / Organization / Limited Liability Company)

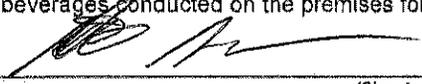
By: 
(Signature of Officer / Member / Manager)

Any person who knowingly provides materially false information in an application for a license may be required to forfeit not more than \$1,000.

ACCEPTANCE BY AGENT

I, Matthew S. Retzlaff, hereby accept this appointment as agent for the
(Print / Type Agent's Name)

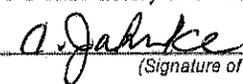
corporation/organization/limited liability company and assume full responsibility for the conduct of all business relative to alcohol beverages conducted on the premises for the corporation/organization/limited liability company.

 3/20/20 Agent's age 43
(Signature of Agent) (Date)

W158N6702 Tamarack Trl., Menomonee Falls, WI 53051 Date of birth 12/14/1976
(Home Address of Agent)

APPROVAL OF AGENT BY MUNICIPAL AUTHORITY (Clerk cannot sign on behalf of Municipal Official)

I hereby certify that I have checked municipal and state criminal records. To the best of my knowledge, with the available information, the character, record and reputation are satisfactory and I have no objection to the agent appointed.

Approved on 4-3-2020 by  Title Deputy Clerk
(Date) (Signature of Proper Local Official) (Town/Chair, Village President, Police Chief)

Auxiliary Questionnaire Alcohol Beverage License Application

Submit to municipal clerk.

WI Dr. Lic. #

Individual's Full Name (please print) (last name)		(first name)		(middle name)	
Retzlaff		Matthew		Scott	
Home Address (street/route)		Post Office	City	State	Zip Code
W158N6702 Tamarack Trl.		Menomonee Falls		WI	53051
Home Phone Number			Age	Date of Birth	Place of Birth
414-333-4961			43	12/14/1976	Milwaukee, WI

The above named individual provides the following information as a person who is (check one):

- Applying for an alcohol beverage license as an **individual**.
- A member of a **partnership** which is making application for an alcohol beverage license.
- Agent of **Kwik Trip, Inc.**

(Officer / Director / Member / Manager / Agent)

(Name of Corporation, Limited Liability Company or Nonprofit Organization)

which is making application for an alcohol beverage license.

The above named individual provides the following information to the licensing authority:

- How long have you continuously resided in Wisconsin prior to this date? All my life
- Have you ever been convicted of any offenses (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of any other states or ordinances of any county or municipality? Yes No
If yes, give law or ordinance violated, trial court, trial date and penalty imposed, and/or date, description and status of charges pending. (If more room is needed, continue on reverse side of this form.)
- Are charges for any offenses presently pending against you (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of other states or ordinances of any county or municipality? Yes No
If yes, describe status of charges pending.
- Do you hold, are you making application for or are you an officer, director or agent of a corporation/nonprofit organization or member/manager/agent of a limited liability company holding or applying for any other alcohol beverage license or permit? Yes No
If yes, identify. (Name, Location and Type of License/Permit)
- Do you hold and/or are you an officer, director, stockholder, agent or employee of any person or corporation or member/manager/agent of a limited liability company holding or applying for a wholesale beer permit, brewery/winery permit or wholesale liquor, manufacturer or rectifier permit in the State of Wisconsin? Yes No
If yes, identify. (Name of Wholesale Licensee or Permittee) (Address By City and County)

6. Named individual must list in chronological order last two employers.

Employer's Name	Location	Employed From	To
McDonald's	Germantown, WI	4/15	11/17
Tazions Inc.	Menomonie Falls, WI	10/08	4/14

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.



(Signature of Named Individual)

Matthew S. Retzlaff

RESOLUTION NO. 20-06

**RESOLUTION TO RATIFY THE EMERGENCY PROCLAMATION
APPROVED BY THE VILLAGE PRESIDENT PERTAINING TO THE COVID-
19 PANDEMIC AND DECLARATION OF EMERGENCY**

WHEREAS, an emergency, namely the COVID-19 Pandemic, has impacted or is anticipated to impact the Village of Butler; and

WHEREAS because of such emergency conditions, the Governing Body is unable to meet with promptness; and

WHEREAS, pursuant to sections 323.11 and 323.14(4)(b) of the Wisconsin Statutes, as the chief executive officer of the Village of Butler proclaimed a state of emergency in effect from March 17, 2020 until the Council could meet.

NOW, THEREFORE BE IT RESOLVED that the Governing Body of Village of butler does hereby ratify President Tiarks' Emergency Proclamation due to the COVID-19 Pandemic, and

BE IT FURTHER RESOLVED, that the Governing Body of the Village of Butler hereby declares a State of Emergency, which continues and extends the powers granted by the Village President's Proclamation dated March 17, 2020 to which date the Village Board no longer deems said State of Emergency necessary.

PASSED AND ADOPTED, this 8th day of April, 2020.

THE VILLAGE OF BUTLER

By:

Patricia Tiarks, President

ATTEST:

Kayla Thorpe, Administrator/Clerk

Proclamation of State of Emergency

WHEREAS, the World Health Organization designated the 2019 novel Coronavirus outbreak as a Public Health Emergency of International Concern; the United States Health and Human Services Secretary Alex M. Azar II declared a Public Health Emergency for the entire United States to aid the nation's healthcare community in responding to the 2019 novel Coronavirus "COVID-19." COVID-19 is a contagious, and at times fatal, respiratory disease; the worldwide outbreak of COVID-19 and the effects of its extreme risk of person-to-person transmission throughout the United States, significantly affect the lives and health of our people, as well as the economy, and is a disaster that impacts the health, security and safety of the public; and

WHEREAS, on or about March 13, 2020, the State of Wisconsin and the federal government declared a State of Emergency, due to the COVID-19 pandemic; and

WHEREAS, the COVID-19 Pandemic has impacted, or is expected to impact the Municipality, Wisconsin; and

WHEREAS, because of emergency conditions, the Governing Body is unable to meet with promptness; and

WHEREAS, pursuant to sections 323.11 and 323.14(4)(b) of the Wisconsin Statutes it is necessary and expedient for the health, safety, welfare and good order of the municipality to proclaim that emergency conditions exist; and

WHEREAS, the emergency has caused the municipality to extend, commit and exhaust its pertinent available resources; and

WHEREAS, the Municipality requests State assistance and advises the State of Wisconsin of our emergency conditions:

NOW, THEREFORE, pursuant to Sections 323.11 and 323.14(4)(b) of the Wisconsin Statutes, as Village President, the chief executive officer, of the Village of Butler Wisconsin, I hereby proclaim a State of Emergency, and hereby

- Authorize emergency purchases of goods and materials
- Authorize emergency purchases of services
- Authorize emergency costs to the labor force
- Orders all public facilities to close to public access until further notice, this includes Village Hall, Library, Public Works facility, Butler Community Building, Florence Libel Playground
- Suspends in-personal absentee voting until further notice except by appointment only.

This Proclamation shall take effect immediately and shall continue in effect until such earlier time as a quorum of the Governing Body convenes and rescinds the Proclamation.

Dated this 23th day of March, 2020



Patricia Tiarks
Village President

Families First Compliance Policy

Effective April 1, 2020 to December 31, 2020

Introduction

The federal government has passed the “Families First Coronavirus Response Act” to assist employees during the current public health emergency. As a covered employer, we provide the temporary benefits required by the Act as summarized in this policy. This policy will expire upon the conclusion of the Coronavirus public health emergency or on December 31, 2020, whichever is earlier. This policy may change in response to any new or revised guidance issued by the Secretary of Labor or at Village’s discretion.

Eligibility

All full-time and part-time employees, except sworn police officers, the village administrator, and public works/utility staff. Staff who have been employed fewer than 30 days are not eligible for the temporary expansion of FMLA (section B).

A. Emergency Paid Sick Leave Benefit

1. Full-time employees will receive up to two weeks (80 hours) of paid sick leave benefits to be used for Coronavirus-related absences. Part-time employees will receive a pro-rated paid sick leave benefit based on the number of hours you work on average over a two-week period. The full benefit for which you are eligible is available for immediate use.
2. You are not required to exhaust other forms of paid leave before using this new Coronavirus paid leave. The Coronavirus paid leave is in addition to any paid leave you already have.
3. This benefit is available to you if you cannot work (in person or remotely) for any of the following reasons:
 - a. You are subject to a federal, state, or local Coronavirus quarantine or isolation order;
 - b. You are advised by a health care provider to self-quarantine for Coronavirus concerns;
 - c. You are experiencing symptoms of Coronavirus and seeking a medical diagnosis;
 - d. You are caring for an individual who is under a Coronavirus quarantine or isolation order or has been advised by a health care provider to self-quarantine;
 - e. You are caring for a child whose school or child care provider has been closed or is unavailable because of Coronavirus;
 - f. You are experiencing any other substantially similar condition specified by the Secretary of Health and Human Services.
4. We may require you to provide a certification from a health care provider confirming the applicable circumstance of section 3 above.
5. We will pay you the following amounts:

- a. If you require leave for reasons 3(a), (b), or (c) above, we will pay you your regular rate of pay, up to \$511 per day and/or \$5,110 in the aggregate.
 - b. If you require leave for reasons under 3(d), (e), or (f) above, you will receive two-thirds of your regular rate of pay, up to \$200 per day and/or \$2,000 in the aggregate.
 - c. If you do not have a set schedule of hours, paid sick leave is based on the average number of hours you were scheduled per day over the six-month period prior to use of the leave.
6. Your ability to use paid sick leave for purposes specified in the law will end upon termination of the qualifying event.
 7. Paid leave provided under this law does not carry over year to year and unused leave is not paid out.

B. Temporary Expansion of Family & Medical Leave

Federal Family and Medical Leave is temporarily expanded to include a qualifying need related to the Coronavirus public health emergency, as declared by federal, state, or local authorities. The conditions of this expansion are outlined below.

1. You are eligible for the leave if you have worked at least 30 calendar days.
2. A “qualifying need” is limited to circumstances where you cannot work (in person or remotely) because of your need to care for a child under age 18 due to a Coronavirus-related public health emergency school or child care closing/unavailability.
3. Pay for the temporary FMLA leave will be as follows:
 - a. The first 10 days of the leave are unpaid. You may elect to use the Emergency Paid Sick Leave Benefit (section A above) or any accrued paid leave during this time if available.
 - b. After the first 10 days, we will pay you two-thirds of your regular rate of pay, up to \$200 per day and \$10,000 aggregate.
4. You will be entitled to reinstatement to the same or equivalent position once your leave ends.
5. Your total annual FMLA leave entitlement for any qualifying reason remains at 12 weeks per calendar year.

Conclusion

Please contact the Village Administrator if you have questions regarding this policy.