

**Notice:** Pursuant to ss. 292.13 and 292.55, Wis. Stats., this application must be completed to request a written determination from the Department of Natural Resources (DNR) for the off-site liability exemption or for the liability clarification regarding property affected by an off-site discharge. The Department will not consider, or act upon your application unless all sections are completed on this form and the required fee of \$700, required under ch. NR 749, Wis. Adm. Code is included. Personal information collected will be used for administrative purposes and may be provided to requester's to the extent required by Wisconsin's Open Records law [ss. 19.31 - 19.39, Wis. Stats.]

**Definitions:**

"Off-Site Exemption" refers to a statutory limit on liability available to a person with respect to the existence of a hazardous substance in the groundwater or soil, including sediments, on Property possessed or controlled by the person, as provided in s. 292.13, Wis. Stats. The off-site exemption is available only to persons who possess or control the affected property, who meet the requirements and criteria in the statutes. DNR provides a written determination regarding liability upon submittal of this application and the required fee.

"General Liability Clarification" refers to a written determination by the Department, as provided in s. 292.55, Wis. Stats., that clarifies the environmental liability of a person, business or another party for a specific situation. General liability clarifications can be provided in situations when the party requesting the clarification does not meet one of the requirements for the off-site exemption at the time of the application submittal, for example, does not yet own the off-site property. This application form should be used to request a written liability clarification **for property affected by an off-site discharge.**

"Property" refers to the subject property that has been impacted by hazardous substances that migrated there from a different property containing the original contamination source. The subject property is often referred to as an "off-site" or "off-source" property.

"Possession or control" refers to holding title to the property or exercising possession or control over the property by some other means, such as a lease.

[NOTE: a person with an easement doesn't have possession or control over the property; the property owner just allows the person to use part of the property for a limited purpose].

**Instructions:**

- Use this application to request a written determination from the Department for the off-site liability exemption or for the liability clarification regarding **property affected by an off-site discharge.** See DNR's Fact Sheet: "When Contamination Crosses a Property Line - Rights and Responsibilities of Property Owners Off-Site Limited Liability Exemption" (RR-589) for general information on eligibility requirements, liability clarification letters related to the off-site liability exemption, and property owner responsibilities. Information and these publications are available by contacting a [DNR office](#) or on the Internet at: <http://dnr.wi.gov/topic/Brownfields>.
- Complete the application and include the information that adequately shows that the required criteria are met. See Section 7 on page 4.
- Include a \$700 fee payment with this application, in accordance with ch. NR 749, Wis. Adm. Code.
- Send the completed application, fee, and supporting materials to the DNR regional office where the Property is located, as listed on page 6. Contact the person listed with any questions.
- Department staff will make every attempt to provide timely written determinations. However, the time required for the determination varies depending on the complexity of the site, and the clarity and completeness of the application and supporting documentation. **Do not use this application form to request liability clarifications for properties without off-site contamination.** Contact one of the DNR regional offices or see the DNR website on the Internet for more information.

**1. Applicant information for person requesting the determination.**

<b>Applicant Last Name</b>		First	MI	
Bucholz		Lindsay		
<b>Address</b>		City	State	ZIP Code
10191 Flagstone Drive		Cedarburg	WI	53012
Phone Number (include area code)	Fax Number (include area code)	E-Mail Address		
(414) 881-5503		katselhaus@wi.rr.com		
<b>Contact for questions (if different than applicant) Last Name</b>		First	MI	
Moraine Environmental, Inc		Tom Sweet		
<b>Address</b>		City	State	ZIP Code
766 Tower Drive		Fredonia	WI	53021
Phone Number (include area code)	Fax Number (include area code)	E-Mail Address		
(262) 692-3345		moraine@execpc.com		

# Off-Site Liability Exemption and Liability Clarification Application

Form 4400-201 (R 05/19)

Page 2 of 6

## 2. Applicant eligibility for off-site exemption or off-site liability clarification.

Request one determination based on whether the requirements for the off-site exemption are currently met. See page 5 and sign the appropriate certification.

**Off-Site Discharge Exemption – I "possess or control" the Property and I believe I meet the criteria for an off-site exemption. I request an off-site exemption letter.**

I have completed Section 8a on page 5.

As the applicant, I am:

Current owner

Other\* Explain your relationship to the Property or the nature of your possession or control of the Property:

\*Additional documentation may be requested by the DNR to verify the applicant's possession or control of the Property. For example, if a lessee requests a determination, DNR would need a copy of the lease by which to assess whether the lessee possesses or controls the Property.

**Off-site Liability Clarification – I lack one or more of the requirements for the off-site exemption as shown below. I request a liability clarification letter that explains which conditions must be met in order to qualify for the off-site liability exemption.**

I have completed Section 8b on page 5.

Requirements for the off-site exemption that are missing:

1. Currently I do not possess or control the Property and

I plan to buy the Property on 11/01/2022 (Date) or

I plan to lease the Property on (Date) .

2. Currently no contamination has been detected on the Property but there is credible evidence that contamination has migrated onto the Property.

3. Multiple contiguous properties are believed to be affected by contamination from a known source.

4. Other: Explain the circumstances here or in an attachment.

## 3. Information on additional parties.

Check the appropriate box to have a copy of the determination letter sent to one or more of these parties:

<input checked="" type="checkbox"/>	<b>Environmental Consultant</b> Moraine Environmental, Inc.	First Tom Sweet		MI
	Address 766 Tower Drive	City Fredonia	State WI	ZIP Code 53021
	Phone Number (include area code) (262) 692-3345	Fax Number (include area code)	E-Mail Address moraine@execpc.com	
<input checked="" type="checkbox"/>	<b>Attorney / Other Last Name</b> Port Washington State Bank	First John Schumacher		MI
	Address 206 Franklin Street	City Port Washington	State WI	ZIP Code 53074
	Phone Number (include area code)	Fax Number (include area code)	E-Mail Address	

# Off-Site Liability Exemption and Liability Clarification Application

Form 4400-201 (R 05/19)

Page 3 of 6

## 4. Information on Property affected by off-site discharge.

<b>Property / Facility Name</b>					County Ozaukee		
Address 1229-1231 12th Avenue			City Grafton		State WI	ZIP Code 53024	
Public Land Survey Coordinates			Latitude 43    19    08.2100		Longitude -87    57    07.1400		
Section 24	Range 21	Township 24 N	Datum (check only one): <input type="radio"/> NAD27 <input type="radio"/> NAD83 <input type="radio"/> 1990 Adjustment			Method	Accuracy

(Attach a list of locations if this request is for multiple properties.)

I request that DNR provide a copy of the Liability Clarification Letter to the current owner.

<b>Current Owner (if different than applicant) Last Name</b>			First		MI	
Address			City		State	ZIP Code
Phone Number (include area code)		Fax Number (include area code)		E-Mail Address		

## 5. Information about contamination on the impacted Property.

A. Have hazardous substances been detected on the Property or Properties?

- No. If not, explain why contamination is suspected on the Property or Properties in an attachment or here:  
The property is located on an adjacent property east of a known CVOC source at Quality Cleaners, BRRTS #02-46-560212, at 1226-1228 11th Avenue, Grafton, WI. No environmental testing from the source property has been conducted on the property at 1229-1231 12th Avenue, for which this off-site liability clarification is requested.
- Yes. Check all that apply:     Groundwater     Soil     Sediment     Other, describe: \_\_\_\_\_

B. Has the presence of contamination been reported to any State or local governmental agency?

- No.
- If yes, check all that apply:     DNR     Division of Emergency Government     Commerce     Department of Agriculture, Trade and Consumer Protection (DATCP)     Other, describe: \_\_\_\_\_
- Date Reported \_\_\_\_\_

C. Is the source of the contamination known? Check only one.

- No.
- Yes. If yes, what is the source of the contamination?

Provide the name and address of the owner of the contamination source or source property, if known.

Owner Name				
Address		City	State	ZIP Code

- Suspected. If suspected to be migrating from a nearby source, what is the source and its address?  
Quality Cleaners, BRRTS #02-46-560212, at 1226-1228 12th Avenue, Grafton, WI

Provide the name of the owner of the suspected contamination source or source property, if known.

Owner Name				
Responsible Party - Barbara & Gerald Kuehl				
Address 5350 Cascade Drive		City West Bend	State WI	ZIP Code 53095

**6. Specific liability clarification questions relating to off-site contamination.**

- I have no additional liability clarification questions.
- I request a DNR response to the questions provided to clarify my liability for the cleanup of off-site contamination to be included in the written determination (questions should be provided here or in an attachment) :

As a prospective purchaser of the property at 1229-1231 12th Avenue, Grafton, WI, an east adjacent property to known CVOC source area of Quality Cleaners at 1226-1228 11th Avenue, Grafton, WI, I request liability clarification for myself as well as my lending institution, Port Washington State Bank, with respect to possible contamination and associated liability to the property which I plan to acquire.

Per 7A to 7C, below: 7A) Based on our review of the Quality Cleaners file, vapor contamination due to the Quality Cleaners release has been found at properties to the north and south of, and presumed to be present on the 1129-1131 12th Ave property; 7B) Quality Cleaners data indicates shallow groundwater flow direction is to the East, toward the 1129-1131 12th Ave property; 7C) Based on discussions with Kathy Bucholz, realtor for this property transaction, the property was used as a residential land use through the 1980's, and in the 1990's to present has been commercial (lower) and apartment (upper).

**7. Property information needed for the determination of off-site exemption or off-site liability clarification.**

DNR requires adequate information in order to make the determination requested in this application. Incomplete or inadequate information will delay the completion of the determination. DNR has the authority to request additional information, if needed. Include the following information with the application, if appropriate:

1. Map(s) showing Property location(s) and any suspected or known off-site contaminant source properties.
2. For any environmental data submitted, include:
  - a) Property map(s) showing sampling locations for all data submitted;
  - b) Interpretation of data signed by a qualified environmental professional, including data tables and figures that include data;
  - c) Soil boring logs;
  - d) Groundwater monitoring well construction, development and sampling logs;
  - e) Laboratory-provided data reports;
  - f) Survey information for groundwater elevations;
  - g) Chain of custody forms for all samples; and
  - h) Description of sample collection methods.

The submitted materials should document that the statutory criteria are satisfied regarding the contamination and its source as listed in A through C below.

- A. Document that there is hazardous substance contamination present in soil, groundwater and/or sediment on the Property or Properties. Examples of information include: Analytical results and interpretations for samples collected from soil, groundwater, and/or sediment on the Property, or at or near the Property line, that conclusively document the presence of a hazardous substance in one or more of these media on the Property. This information could be documented in a Phase II Environmental Assessment report, or could refer to existing reports in DNR files related to the source property.
- B. Document that the hazardous substance contamination, which is present in soil, groundwater, and/or sediment on the Property or Properties, is migrating onto the Property or Properties from an off-site source. Examples of information include:
  1. Information identifying known or suspected discharges of the hazardous substance on neighboring property(ies), e.g., a Phase I Environmental Assessment report, information in existing reports in DNR files related to the source property.
  2. Soil, groundwater and/or sediment sample data and interpretations adequate to conclude that the hazardous substance is migrating onto the Property or Properties, such as:
    - Samples from monitoring wells located on the upgradient side of the Property or Properties (include information to establish upgradient direction), which show increasing contaminant concentrations toward the upgradient Property or Properties;
    - Off-site investigation results that provide information about groundwater flow direction and contaminant movement that convincingly document hazardous substances from a known or suspected off-site source have impacted the Property or Properties; or
    - A description of the event(s) that caused the deposit or accumulation of contaminated sediment on the affected Property or Properties and a map showing the location of the water body and elevations of the affected Property or Properties and water surface at normal flow and flood stage conditions.
- C. Document that the discharge of a hazardous substance is not from a source on the Property or Properties. Examples of information include:
  1. Information related to historical activities, such as descriptions of chemicals used and handled, areas where chemicals were used and handled, and areas of potential discharges on the Property or Properties, e.g., a Phase I Environmental Assessment report.
  2. Where the types of hazardous substances used, handled, or discharged on the Property or Properties are the same as the hazardous substances migrating onto the Property or Properties, provide environmental information, e.g., expanded Phase II environmental assessment data, including type and volume of hazardous substances handled, generated or stored on the applicant's Property during the period of ownership and/or length of lease, and analytical results and interpretation for soil and groundwater samples collected from potential discharge areas to demonstrate that the contamination migrating onto the Property is separate and distinct from the contamination that may be on the Property.

**Off-Site Liability Exemption and Liability Clarification Application**

Form 4400-201 (R 05/19)

Page 5 of 6

**8. Sign one of the certifications below based on whether the requirements of the off-site exemption are currently met.**

**8a. Certification if the applicant currently meets all the requirements for the off-site liability exemption.**

**Applicant Certification for a Determination for the Off-Site Discharge Exemption, as provided in s. 292.13, Wis. Stats.**

I certify that I possess or control the Property and have read and am familiar with the information on this application. The information on and included with this application is true, accurate and complete to the best of my knowledge.

I understand that I retain the responsibility for any hazardous substance discharges that I caused or cause, and for any discharges whose source I possess or control on the Property or on other properties.

I believe that I meet the criteria in s. 292.13, Wis. Stats., with respect to the fact that I never controlled or possessed either the source property itself, or the hazardous substances that have migrated onto the Property from the source property, nor did I cause the hazardous substance discharge for which I am seeking this written exemption.

I understand that if I fail to satisfy the statutory requirements in s. 292.13, Wis. Stats., such as failing to provide access to the Property, the DNR has the authority to revoke the off-site exemption for the Property.

Applicant Last Name	First	MI
Signature	Date Signed	

**8b. Certification if applicant has not currently met all the conditions for the off-site exemption.**

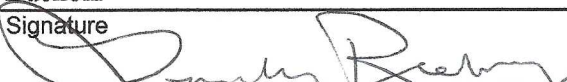
**Applicant Certification for a Determination for Liability Clarification, as provided in s. 292.55, Wis. Stats.**

I certify that I have read and am familiar with the information on this application and that the information on and included with this application is true, accurate and complete to the best of my knowledge.

I understand that I retain the responsibility for any hazardous substance discharges that I caused or cause, and for any discharges whose source I possess or control on the Property or Properties or on other properties.

It is my understanding that I have not met all the conditions for the off-site exemption at the time of this application, but I request a liability clarification determination that includes the conditions under which I or others would become eligible for the off-site discharge exemption for the Property or Properties, if I were to meet all the criteria under s. 292.13, Wis. Stats. I believe that I meet the criteria regarding the source of the contamination and the source property in s. 292.13, Wis. Stats., with respect to the fact that I never controlled or possessed either the source property itself, or the hazardous substances that have migrated onto the Property or Properties from the source property, nor did I cause the hazardous substance discharge for which I am seeking this written exemption.

I understand that if I meet the criteria in s. 292.13, Wis. Stats., and obtain the off-site liability exemption, but subsequently fail to satisfy the statutory requirements in s. 292.13, Wis. Stats., such as failing to provide access to the Property, the DNR has the authority to revoke the off-site exemption for the Property.

Applicant Last Name	First	MI
Bucholz	Lindsay	M
Signature	Date Signed	
	10/3/22	

## Feeney, John M - DNR

---

**From:** katselhaus@wi.rr.com  
**Sent:** Wednesday, October 26, 2022 11:00 PM  
**To:** Feeney, John M - DNR  
**Subject:** 1229/1231 12th Ave., Grafton  
**Attachments:** Untitled\_10262022\_051521.pdf

CAUTION: This email originated from outside the organization.  
Do not click links or open attachments unless you recognize the sender and know the content is safe.

Hi John,

This is all I could find at the Village of Grafton for this building, it goes back as far as 1963....it appears that there was a beauty salon there for many years and a flower shop for some years and it has been Slow Pokes for the last 16-17 years. I hope this helps. I also spoke to a gentleman that is in his late 60's who grew up in Grafton and he remembers it as being a residence at some point during his child/teen years.

Please let me know how the meeting goes on Friday. I appreciate all your help with this.

Regards,  
Kathy Bucholz  
RE/MAX United  
katselhaus@wi.rr.com  
262-375-0400  
414-881-5503

-----Original Message-----

From: KATHY BUCHOLZ <fax2623764141@gmail.com>  
Sent: Wednesday, October 26, 2022 5:16 PM  
To: katselhaus@wi.rr.com  
Subject: Document from RE/MAX United Cedarburg Office

Please open the attached document.

RE/MAX United - Cedarburg Office  
Fax 262-376-4141  
PH: 262-375-0400

# VILLAGE OF GRAFTON

Phone: 375-5305

CON SIGN

## BUILDING PERMIT APPLICATION

Separate Electrical, Plumbing, & H.V.A.C. Permits Required.

CHECK NOV03/2004#001A0039 14:08R

25.00 NUMBER 265H NUMBER 1300H 25.00 JANICE

No. 04- 365

Premises No. 1229 12th Avenue

Owner Gideon Properties LLC Address 11305 No. Mulberry Dr., Mequon

Lot 5 6 Block 10 Subdivision Gifford's Addition

Occupancy Commercial District CBD

Size Front lettering over door - 9" Two wall signs on north, south sides No. of Rooms 14" x 96"  
Front lettering over 2 windows, 6" Sq. Ft.

Ht. from Grade \_\_\_\_\_ Stories & basement \_\_\_\_\_

Roof Material \_\_\_\_\_ Foundation \_\_\_\_\_ Basement \_\_\_\_\_ thick.

General Contractor Primecast Advertising Permit for: Lettering & Wall signage for  
1008 Arrowhead Road Ph. 377-5242 Paula's Petals

Architect Grafton, WI 53024 Estimated Cost Complete \$ ~~XXXXX~~ 800 for lettering  
\_\_\_\_\_ Ph. \_\_\_\_\_ 500 for wall sig  
\_\_\_\_\_ \_\_\_\_\_ Fee \$25.00 Date 11/2/04

Building Inspector Tom Johnson  
Tom Johnson

THIS PERMIT ISSUED by the Building Inspector's Office of the Village of Grafton, to construct, erect, alter or install as above described. The work must be done in accordance with the description herein set forth and more fully described in the specifications and plans herewith filed and in strict compliance with the Building Ordinances of the Village of Grafton and the State Building Code. All lawful orders of the Building Inspector, made or issued by virtue of the provisions of said ordinances must be obeyed.

Owner or Agent Paula Behrens from Paula's Petals

Address \_\_\_\_\_



*Flower Shop*

*Paula's Petal*

*Paula's Petals*

*OPEN*

*College of Grapes*  
LOCAL  
IMPROVEMENT  
DISCOUNT

*OPEN*





# OCCUPANCY PERMIT

VILLAGE OF GRAFTON INSPECTION DEPARTMENT

11-05-97 12:47PM  
COM OCCUPANCY  
3100 BLD 30.00  
SUB TTL 30.00  
# 2807  
TOTAL 30.00  
CHECK 30.00  
PURCHASE 1  
JANICE B OR2885

PREMISES: 1229 12TH AVENUE

OCCUPANCY: COMMERCIAL - BEAUTY SHOP OWNER: WILLIAM & ROMA WOLF

BUSINESS NAME: ATTITUDES HAIR & NAIL DESIGN  
THIS BUILDING MAY BE LAWFULLY OCCUPIED IN COMPLIANCE WITH THE ABOVE.

SIGNED Tom Johnson  
TOM JOHNSON

DATE November 5, 1997

It is unlawful to occupy or use the subject premise, except as indicated as stated above. Changes in the tenant, use or owner of this premise may require additional approvals.

Page 1 of 1

VILLAGE OF GRAFTON  
INSPECTION DEPARTMENT  
PHONE: 375-5305

Date 11-5-97  
Time 8:30 AM  
Permit No. \_\_\_\_\_  
Time & Date Requested 11:30 AM TO

OWNER: Attitudes Hair & Nail Design

CONTRACTOR: \_\_\_\_\_  
ADDRESS: 1229 12th Avenue

INSPECTION FOR:  
Rough  Final Design  
Plumbing  Under Floor Plbg.  
Electric \_\_\_\_\_ Ext. Plumbing  
Service  Construction \_\_\_\_\_ Insulation \_\_\_\_\_  
Violation \_\_\_\_\_ Basement Floor \_\_\_\_\_

The following items were found to be noncompliant or in violation:

- PLACE HINGE FRAME on  
- floor  
- NUD ORYACAL TIGHT T  
WALL  
OCCUPANCY GRANTED

Instructions: \_\_\_\_\_ No noncompliance noted  
Call for re-inspection \_\_\_\_\_ \$25.00 Fee  
YOU MAY NOT PROCEED \_\_\_\_\_ CALL INSPECTION DEPARTMENT  
 You may proceed \_\_\_\_\_ Violations will be checked at next scheduled inspection

PERMIT REQUIRED FOR \_\_\_\_\_ CONSTRUCTION  
You have 30 days to comply per the Grafton Building Code.

Signature: Tom Johnson Date 11-5-97

Go back, Bill Wolf is

Page upstairs

Date 10-30-97

Time 3:30 PM

Permit No. 97E223

Time & Date Requested

Ready Now

VILLAGE OF GRAFTON  
INSPECTION DEPARTMENT  
PHONE: 375-5305

OWNER: This Old Beauty Shop  
CONTRACTOR: Koss Electric  
ADDRESS: 1229 12<sup>th</sup> Avenue

INSPECTION FOR:  Rough  Final  
 Footing  Plumbing  Under Floor Plbg.  
 Foundation  Electric  Ext. Plumbing  
 Service  Construction  Insulation  
 Violation  Basement Floor

The following items were found to be noncompliant or in violation:

OUTSIDE LIGHT IS NOT  
RATED FOR DAMP LOCATION

DID NOT FUNCTION  
MAKE IT WORK

Instructions:  No noncompliance noted

Call for re-inspection \$25.00 Fee

YOU MAY NOT PROCEED  CALL INSPECTION DEPARTMENT

You may proceed  Violations will be checked at next scheduled inspection

PERMIT REQUIRED FOR  CONSTRUCTION

You have 30 days to comply per the Grafton Building Code.

Signed: [Signature] Date 10/31/97

Kim ~~Wolf~~ 268-1166

Page      of     

Date 10-17-97

Time 11:20 AM

Permit No.     

Time & Date Requested

4:30 Today

VILLAGE OF GRAFTON  
INSPECTION DEPARTMENT  
PHONE: 375-5305

OWNER: This Old Beauty Shop  
CONTRACTOR: Janis Sherman / Kim Skodeen  
ADDRESS: 1229 12<sup>th</sup> Ave

INSPECTION FOR:  Rough  Final Occupancy  
 Footing  Plumbing  Under Floor Plbg.  
 Foundation  Electric  Ext. Plumbing  
 Service  Construction  Insulation  
 Violation  Basement Floor

The following items were found to be noncompliant or in violation:

CABLE OUT OF FUSE BOX MOUNTED  
A) SIDEWAYS NO GROUND + NO CONNE  
OR

B) CLOSE OPEN K'O'S

C) ALL FUSES OVER LOADED 30  
AMPS IN ALL BUT 1-9 AMP

D) FRONT (FAST) EXTERIOR LIGHTING

ALL NO GOOD NEVER CODE  
Instructions:  No noncompliance noted COMPLIANT

Call for re-inspection \$25.00 Fee

YOU MAY NOT PROCEED  CALL INSPECTION DEPARTMENT

You may proceed  Violations will be checked at next scheduled inspection

Tom + ELLOR'S CALL  
 PERMIT REQUIRED FOR ELECTRICAL CONSTRUCTION !!!

You have 30 days to comply per the Grafton Building Code.

Signed: [Signature] Date 10/17/97

Kim 268-1166  
Page \_\_\_\_\_ of \_\_\_\_\_

**VILLAGE OF GRAFTON  
INSPECTION DEPARTMENT  
PHONE: 375-5305**

Kim  
Date 10/20/97  
Time 9:25  
Permit No. \_\_\_\_\_  
Time & Date Requested  
9:30 10/20/97

OWNER: This Old Beauty Shop  
CONTRACTOR: \_\_\_\_\_  
ADDRESS: 1229 17TH

INSPECTION FOR:  
 Rough  Final  
 Footing  Plumbing  Under Floor Plbg.  
 Foundation  Electric  Ext. Plumbing  
 Service  Construction  Insulation  
 Violation  Basement Floor

The following items were found to be noncompliant or in violation:

Boiler Room NOT FIRE RATED  
EXIT REAR DOOR NEEDS ACCEPTABLE HARDWARE  
REINSP BY ELECTRICAL INSP

Instructions: \_\_\_\_\_ No noncompliance noted.

Call for re-inspection \_\_\_\_\_ \$25.00 Fee  
 YOU MAY NOT PROCEED \_\_\_\_\_ CALL INSPECTION DEPARTMENT  
 You may proceed \_\_\_\_\_ Violations will be checked at next scheduled inspection

PERMIT REQUIRED FOR \_\_\_\_\_ CONSTRUCTION

You have 30 days to comply per the Grafton Building Code.

Signed: [Signature] Date 10/20/97

No occupancy yet - Boiler Rm. Problem

268-1166 (PHONE CALL)

FOR	Tom	DATE	11/3	TIME	2:30 PM
M	Kim Shoden	TELEPHONED			
OF	Beauty Shop	RETURNED YOUR CALL			
PHONE	376-9380	PLEASE CALL			
AREA CODE		WILL CALL AGAIN			
NUMBER		CAME TO SEE YOU			
EXTENSION		WANTS TO SEE YOU			
MESSAGE	Pls call today about temporary occupancy before boiler room is done.				
FAX #					
SEAL					
James					



INSPECTION BLANK

# GRAFTON FIRE DEPARTMENT

1431 THIRTEENTH AVENUE · GRAFTON, WISCONSIN 53024

10-20-87

DATE

TIME [ ] A.M. [ ] P.M.

*W.M. Wolf*  
OWNER'S NAME

*Beauty Shop*  
OCCUPANCY INSPECTED  
*1779 - 17th Ave.*  
LOCATION (STREET ADDRESS)  
*GRAFTON*

MAILING ADDRESS

WISCONSIN  
CODE IND.

DESCRIPTION AND EXPLANATION

CONDITIO

Occupancy

Remove hasp from rear storm door  
install passage lock on rear storm door  
plane door to open better.

occupancy granted subject to  
above & electrical & building inspector

COMPLIANCE DATE

INSPECTION REPORT RECEIVED

Section 101.14 of the Wisconsin Statutes constitutes every Fire Chief a deputy of the Wisconsin Department of Industry, Labor and Human Relations, and requires him or his appointed inspectors to make inspections for the purpose of ascertaining and causing to be corrected any conditions liable to cause fire, or any violation of any law or ordinance relating to fire hazard or prevention of fires.

WHITE: Fire Department YELLOW: Occupant



# GRAFTON FIRE DEPARTMENT

1431 THIRTEENTH AVENUE · GRAFTON, WISCONSIN 53024

10-20-97

DATE

TIME ( ) A.M. ( ) P.M.

Beauty shop

OCCUPANCY INSPECTED

1779 - 17th Ave.

LOCATION (STREET ADDRESS)

GRAFTON

Wm. Wolf  
OWNER'S NAME

MAILING ADDRESS

WISCONSIN  
CODE IND.

DESCRIPTION AND EXPLANATION

CONDITIO

occupancy

Remove hasp from rear storm door  
INSTALL passage lock on rear storm door  
plane door to open better.

occupancy granted subject to  
above & electrical & building inspector

All the above violations have been corrected  
ON REINSPECTION OF 11-10-97

COMPLIANCE DATE

INSPECTION REPORT RECEIVED

Robert Jensen  
DEPARTMENT INSPECTOR

Section 101.14 of the Wisconsin Statutes constitutes every Fire Chief a deputy of the Wisconsin Department of Industry, Labor and Human Relations, and requires him or his appointed inspectors to make inspections for the purpose of ascertaining and causing to be corrected conditions liable to cause fire, or any violation of any law or ordinance relating to fire hazard or prevention of fires.

WHITE: Fire Department    YELLOW: Occupant

APPLICATION FOR PERMIT

#689

75.0

TO BUILDING INSPECTOR:

VILLAGE OF GRAFTON, WISCONSIN

Feb 24, 1964

The undersigned hereby applies for a permit to build, construct, remodel and occupy, or to install according to the following statements:

- 1. Owner Wm Wolf Address 1229 12th Ave
- 2. Location of Structure: Address same  
 Lot No. 516 Block No. 10 Subdivision Stefford addition
- 3. Other description of property: \_\_\_\_\_
- 4. Size of Lot \_\_\_\_\_ Width of Street \_\_\_\_\_  
 Corner or inner lot inner
- 5. Permit for Siding application
- 6. Use district or location R-2
- 7. Class of construction asbestos
- 8. Cost est 1,500
- 9. Name of Architect \_\_\_\_\_
- 10. Name of Contractor owner
- 11. Size of Building: Sq. Ft. \_\_\_\_\_ Cu. Ft. \_\_\_\_\_ No. of rooms \_\_\_\_\_  
 Stories high two
- 12. Building to be used for: Beauty Shop & Jewelling
- 13. Accessory Buildings: Size, use and cost \_\_\_\_\_
- 14. Remarks: \_\_\_\_\_

It is hereby agreed between the undersigned, as owner, his agent or servant, and the Village of Grafton for and in consideration of the premises and of the permit to construct, erect, alter or install, and the occupancy of the building as above described, to be issued and granted by the Village Building Inspector, that the work thereon will be done in accordance with the description as herein set forth in this statement, and as more fully described in the specifications and plans herewith filed; and it is further agreed to construct, erect, alter or install and occupy in strict compliance with the ordinances of the Village of Grafton and to obey any and all lawful orders of the Village Building Inspector of the Village of Grafton made or issued pursuant to the said laws of the Zoning Ordinance of the Village of Grafton.

Signature: Wm Wolf Address: \_\_\_\_\_

TO BUILDING INSPECTOR:

VILLAGE OF GRAFTON, WISCONSIN

Sept 8, 1963

The undersigned hereby applies for a permit to build, construct, remodel and occupy, or to install according to the following statement:

- 1. Owner Grafton Beauty Shop Address 1229 - 12<sup>th</sup> Ave
- 2. Location of Structure: Address Same  
 Lot No. 6 Block No. 3 Subdivision Lyford
- 3. Other description of property: \_\_\_\_\_
- 4. Size of Lot \_\_\_\_\_ Width of Street \_\_\_\_\_  
 Corner or inner lot \_\_\_\_\_
- 5. Permit for Commercial alteration
- 6. Use district or location C-2
- 7. Class of construction new siding & change windows
- 8. Cost est \$300
- 9. Name of Architect \_\_\_\_\_
- 10. Name of Contractor owner
- 11. Size of Building: Sq. Ft. \_\_\_\_\_ Cu. Ft. \_\_\_\_\_ NO. of rooms \_\_\_\_\_  
 Stories high 2
- 12. Building to be used for: Beauty Shop.
- 13. Accessory Buildings: Size, use and cost \_\_\_\_\_
- 14. Remarks: \_\_\_\_\_

It is hereby agreed between the undersigned, as owner, his agent or servant, and the Village of Grafton for and in consideration of the premises and of the permit to construct, erect, alter or install, and the occupancy of the building as above described, to be issued and granted by the Village Building Inspector, that the work thereon will be done in accordance with the description as herein set forth in this statement, and as more fully described in the specifications and plans herewith filed; and it is further agreed to construct, erect, alter or install and occupy in strict compliance with the ordinances of the Village of Grafton and to obey any and all lawful orders of the Village Building Inspector of the Village of Grafton made or issued pursuant to the provisions of the Zoning Ordinance of the Village of Grafton.

Name John B Hoff Address 1229 12<sup>th</sup> Ave