

OFFICE OF THE

*Appanoose County Auditor*  
**KELLY HOWARD**

COURTHOUSE  
201 N. 12th St., Rm 11  
CENTERVILLE, IOWA 52544

Phone (641) 856-6191  
Fax (641) 856-8023  
[khoward@appanoosecounty.net](mailto:khoward@appanoosecounty.net)

**Meeting Agenda**  
**May 18, 2020**

The Appanoose County Board of Supervisors will meet Monday, May 18, 2020 at 9:00 A.M. in the Boardroom of the Courthouse. Items on the agenda include:

1. Pledge
2. Declaration of items to be added to the agenda
3. Approve minutes of the May 4, 2020 meeting
4. Approve reports: 5/15 payroll
5. Approve bills
6. Approve Recommendation on Appanoose County Fair
7. Approve Liquor Licenses: Honey Creek (4), Pale Moon & Valley View
8. Approve Cigarette Permits: Elliott's, Brownie's 3 B's, Rathbun Marina & Dogg's RV
9. Approve Business Property Tax Credit Applications
10. Approve Conservation Department Part-Time Hiring: Donald Stevens
11. County Engineer Report
12. 9:15 Public Hearing for Road Vacation: Jackson Street and Cleaveland Street in Wilson's 1<sup>st</sup> Subdivision, block 1 and 2 NE ¼ of the SW ¼ Section 3 T68N R19W
13. 9:20 Public Hearing for Road Vacation: Alley running East and West 120' south of 524<sup>th</sup> St, in Wilson's Subdivision block 1 and 2 NE ¼ of the SW ¼ Section 3 T68N R19W
14. Public Comments
15. 9:30 Northland Securities
16. Adjourn

The Boardroom will be limited to 10 in attendance. The public can call in at (978) 990-5000. Access Code 777593.

May 4, 2020

Appanoose County Board of Supervisors met in regular session May 4, 2020 at 9:00 A.M. in the Boardroom of the Courthouse. Present: Mark Waits, Chairman, Neal Smith and Linda Demry, Boardmembers. Absent: none.

Meeting started with the Pledge.

Smith motioned to approve the agenda. Seconded by Demry. All voted aye.

Demry motioned to approve the minutes from the April 20 & 22, 2020 meetings. Seconded by Smith. All voted aye.

Smith motioned to approve 5/1 payroll and DHS Quarterly Report. Seconded by Demry. All voted aye.

Access Sys	Typing-Print.-Bind.Serv.	131.38
Iowegian	Typing-Print.-Bind.Serv.	316.01
Alliant	Engineering Services	858.09
App Co Assessor	Engineering Supplies	1150.00
App Comm Care	Homemaker-Home Health Aid	4204.80
Aramark	Engineering Services	188.56
Bailey Off	Off. Supplies & Forms	170.02
Banleaco	Off. Supplies & Forms	482.50
Bob Barker	Jail Equip. & Furniture	261.84
Bratz Oil	Mileage & Transp. Expense	139.61
Calhoun Burns	Engineering Services	2914.10
Cantera Aggregates	Engineering Services	32484.80
Cantril Truck & Trailer	Motor Vehicle	6885.00
Card Services	Engineering Services	241.94
Carrot-Top Industries	Off. Supplies & Forms	164.22
CDW Government	Off. Supplies & Forms	89.00
Cville Iron	Engineering Services	998.84
Cville Wtrwks	Engineering Services	322.27
Central IA Det	Juvenile Detention & Shel	1524.00
Centurylink	E911 Telephone Expense	250.22
City Cville	Salary-Regular Employees	4999.82
City of Plano	Maintenance Contract	215.29
City of Unionville	Maintenance Contract	185.23
Eastern IA Tire	Engineering Services	217.56
Election Source	Election Supplies	5400.00
Farmers Mutual Tel	E911 Telephone Expense	618.00
Fogle TV	Engineering Services	104.68
Garman Farms	Engineering Services	2637.51
Hussman Services	Medical Supplies	1407.00
ICEA	Off. Supplies & Forms	100.00
Inland Truck Parts	Engineering Services	141.05
Kimball	Engineering Services	81.14
Kinetic Edge	Educational & Train.Serv.	100.00
Lange FH	Funeral Services	2690.00
Lockridge	Off. Supplies & Forms	205.49
Mail Serv	Vehicle Renewal Notices	427.18
K McSweeney	Medical & Health Services	250.00
MHC Kenworth	Engineering Services	342.03
MMIT	Off. Supplies & Forms	86.08
Monroe Sheriff	Legal Serv. Dep-Subp-Tran	32.50
Natel	Telephone & Telegr.Serv.	469.44
O'Halloran Int'l	Engineering Services	178.04
Official Pest Control	Off. Equip Repair & Maint	60.00

Owens-King	Off. Supplies & Forms	10.50
Petty C-Sheriff	Postage & Mailing	5.90
Poweshiek Aud	Mileage & Transp. Expense	645.00
Prof Computer	Off. Equip Repair & Maint	140.00
Quick Shop	Transportation	145.00
Quill	Off. Supplies & Forms	118.38
Rainbo Oil	Engineering Services	2053.20
RRWA	Engineering Services	25.75
SEAT	Educational & Train.Serv.	150.00
Seymour Tire	Engineering Services	49.95
Simmons Bldg Materials	Election Supplies	31.36
SNAP-ON TOOLS BRANDON WARNER	Engineering Services	305.95
Solutions	Off. Equip Repair & Maint	388.80
D Sturms	Mileage & Transp. Expense	507.65
Superior Cable & Data	Jail Equip. & Furniture	264.89
Thomas Funeral Home	Funeral Services	900.00
ULRICH FORD	Engineering Services	1569.57
US Bank	Engineering Services	2793.06
US Cellular	Off. Supplies & Forms	825.28
USPS	Postage & Mailing	3045.00
Walker Welding	Engineering Services	23.75
Walmart	Engineering Supplies	453.84
J Willier	Legal & Ct-Related Serv.	54.00
Windstream	Off. Supplies & Forms	615.04
Grand Total		89847.11

The Auditor added \$2,500 in postage after the board looked at the bills. Demry motioned to approve bills. Seconded by Smith. All voted aye.

Kris Laurson provided recommendations to opening the Courthouse during the Department Head Meeting. Demry motioned to remain closed and open by appointment only. Seconded by Smith. All voted aye.

Susan Scieszinski provided an update on Snap Fitness membership. Demry motioned to approve proceeding with membership and Susan be the county designee. Seconded by Smith. All voted aye.

Demry motioned to approve the Weed Commissioner Contract with ADLM with mileage paid at \$0.575. Seconded by Smith. All voted aye.

Waits read a letter to the cities in Appanoose County regarding the upcoming LOSST election. Smith motioned to approve sending the letter to the cities. Seconded by Demry. All voted aye. Smith motioned to set the public hearing to vacate a section of Appanoose County Road for May 18, 2020 at 9:15 A.M. Seconded by Demry. All voted aye.

#### NOTICE OF HEARING

The Appanoose County Board of Supervisors, acting under the authority of Iowa Code Chapter 306, propose to vacate a section of Appanoose County Road described as follows:

Jackson Street and Cleaveland Street in Wilson's 1<sup>st</sup> Subdivision block 1 and 2 Northeast Quarter of the Southwest Quarter Section 3 T68N R19W, more particularly described as follows:

Beginning at the Southeast Corner of Lot 8 Block 2, thence proceeding West to the Southwest Corner of Lot 12 Block 1, thence North to the Northwest Corner of Lot 1 Block 1. All lying in the Wilson's 1<sup>st</sup> Subdivision Block 1 and 2.

A HEARING WILL BE HELD BY THE APPANOOSE COUNTY Board of Supervisors, Appanoose County Courthouse, 201 N 12<sup>th</sup>, Centerville IA 52544 at 9:15 AM on Monday, May 18, 2020 in accordance with Iowa Code Chapter 306. Any person owning land abutting the road proposed to be vacated and closed shall have the right to file, in writing, a claim for damages at the time on or before the date and time of the hearing.

Smith motioned to set the public hearing to vacate a section of Appanoose County Road for May 18, 2020 at 9:20 A.M. Seconded by Demry. All voted aye.

**NOTICE OF HEARING**

The Appanoose County Board of Supervisors, acting under the authority of Iowa Code Chapter 306, propose to vacate a section of Appanoose County Road described as follows:

Ally running East and West 120 feet south of 524<sup>th</sup> Street, in Wilson's 1<sup>st</sup> Subdivision block 1 and 2 Northeast Quarter of the Southwest Quarter Section 3 T68N R19W, more particularly described as follows:

Beginning at the Southeast Corner of Lot 7 Block 2, thence proceeding West to the Southwest Corner of Lot 1 Block 2, and beginning at the Southeast Corner of Lot 6 Block 1, thence proceeding West to the Southwest Corner of Lot 1 Block 1. All lying in the Wilson's 1<sup>st</sup> Subdivision blocks 1 and 2.

A HEARING WILL BE HELD BY THE APPANOOSE COUNTY Board of Supervisors, Appanoose County Courthouse, 201 N 12<sup>th</sup>, Centerville IA 52544 at 9:20 AM on Monday, May 18, 2020 in accordance with Iowa Code Chapter 306. Any person owning land abutting the road proposed to be vacated and closed shall have the right to file, in writing, a claim for damages at the time on or before the date and time of the hearing.

County Engineer, Brad Skinner, provided an update. They have been working on reshaping Thirty Road and 495<sup>th</sup> St. The bridge on 508<sup>th</sup> St will be done this week. A box culvert on J46 has been repaired. Upcoming projects include crack filling starting June 1<sup>st</sup>, box culvert on 160<sup>th</sup> by Honey Creek July 1<sup>st</sup>, and J3T patching mid-July. Skinner will bring up options on bridge closures later in the day. The DOT will submit a proposal for ROW work on Hwy 202. Finally, due to the amount of time it takes to get equipment repaired they will be getting quotes using FY21 Funds.

Public comments: Bill Cortesio presented a POW MIA flag. He also asked if the board considered relocating the VA office due to the Homestead being locked down. He also asked about the bridge on 365<sup>th</sup> Avenue and washouts around it.

At 9:25 A.M. Demry motioned to recess until 10:00 A.M. Seconded by Smith. All voted aye.

Waits reconvened the meeting at 10:00 A.M.

John Hansen presented the board with updated current housing costs, a new jail plan, and cost for the new facility.

Smith motioned to adjourn. Seconded by Demry. All voted aye.

The Board adjourned to meet at the call of the Auditor at 10:30 A.M.

Appanoose County Board of Supervisors

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Attest:

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Kelly Howard, Appanoose County Auditor3

Applicant

License Application ( LE0002730 )

Ownership

Name of Applicant: DNC Parks & Resorts at Honey

Name of Business (DBA): Honey Creek Resort State Park

Address of Premises: 12633 Resort Drive

City Moravia

County: Appanoose

Zip: 52571

Business (641) 724-1401

Mailing 250 Delaware Ave

City Buffalo

State NY

Zip: 14202

#### Contact Person

Name Beth Salansky

Phone: (716) 858-5162

Email

bsalansk@delawarenorth.com

Classification Class E Liquor License (LE)

Term: 12 months

Effective Date: 06/01/2020

Expiration Date:

Privileges:

Class E Liquor License (LE)

#### Status of Business

Business Type: Privately Held Corporation

Corporate ID Number: XXXXXXXXXX      Federal Employer ID XXXXXXXXXX

#### Ownership

##### Delaware North Companies

~~Parks & Resorts Inc~~ First Name: Delaware North Companies Last Name: & Resorts, Inc.

City: Buffalo      State: New York      Zip: 14202

Position: stockholder

% of Ownership: 100.00%      U.S. Citizen: Yes

##### James Houser

First Name: James      Last Name: Houser

City: Orchard Park      State: New York      Zip: 14127

Position: Director

% of Ownership: 0.00%      U.S. Citizen: Yes

##### Janice Trybus

First Name: Janice      Last Name: Trybus

City: Boston      State: Massachusetts      Zip: 02116

Position: Secretary

% of Ownership: 0.00%      U.S. Citizen: Yes

**Christopher Feeney**

First Name: Christopher Last Name: Feeney  
City: Clarence State: New York Zip: 14031  
Position: Director  
% of Ownership: 0.00% U.S. Citizen: Yes

**Scott Socha**

First Name: Scott Last Name: Socha  
City: South Wales State: New York Zip: 14139  
Position: President & Director  
% of Ownership: 0.00% U.S. Citizen: Yes

**Scott Kukelka**

First Name: Scott Last Name: Kukelka  
City: Hamburg State: New York Zip: 14075  
Position: Treasurer  
% of Ownership: 0.00% U.S. Citizen: Yes

**Jeffrey Taips**

First Name: Jeffrey Last Name: Taips  
City: Orchard Park State: New York Zip: 14127  
Position: Vice President - Finance  
% of Ownership: 0.00% U.S. Citizen: Yes

**Derek Zwickey**

First Name: Derek Last Name: Zwickey  
City: Bozeman State: Montana Zip: 59718  
Position: Chief Operating Officer  
% of Ownership: 0.00% U.S. Citizen: Yes

**Insurance Company Information**

Insurance Company:	<u>Liberty Mutual Insurance Company</u>		
Policy Effective Date:	<u>06/01/2019</u>	Policy Expiration	<u>01/01/1900</u>
Bond Effective	<u>2</u>	Dram Cancel Date:	
Outdoor Service Effective		Outdoor Service Expiration	
Temp Transfer Effective		Temp Transfer Expiration Date:	

Applicant License Application ( LE0002730 )

Name of Applicant: DNC Parks & Resorts at Honey

Name of Business (DBA): Honey Creek Resort State Park

Address of Premises: 12633 Resort Drive

City Moravia County: Appanoose Zip: 52571

Business (641) 724-1401

Mailing 250 Delaware Ave

City Buffalo State NY Zip: 14202

Contact Person

Name Beth Salansky

Phone: (716) 858-5162 Email bsalansk@delawarenorth.com

Classification Class E Liquor License (LE)

Term: 12 months

Effective Date: 06/01/2020

Expiration Date: 05/31/2021

Privileges:

Class B Wine Permit

Class C Beer Permit (Carryout Beer)

Class E Liquor License (LE)

Sunday Sales

Status of Business

Business Type: Privately Held Corporation

Corporate ID Number: XXXXXXXXXX Federal Employer ID XXXXXXXXXX

Ownership

Delaware North Companies

~~Parks & Resorts Inc~~ First Name: Delaware North Companies Last Name: & Resorts, Inc.

City: Buffalo State: New York Zip: 14202

Position: stockholder

% of Ownership: 100.00% U.S. Citizen: Yes

James Houser

First Name: James Last Name: Houser

City: Orchard Park State: New York Zip: 14127

Position: Director

% of Ownership: 0.00% U.S. Citizen: Yes

Janice Trybus

First Name: Janice Last Name: Trybus

City: Boston State: Massachusetts Zip: 02116

Position: Secretary

% of Ownership: 0.00%

U.S. Citizen: Yes

**Christopher Feeney**

First Name: Christopher

Last Name: Feeney

City: Clarence

State: New York

Zip: 14031

Position: Director

% of Ownership: 0.00%

U.S. Citizen: Yes

**Scott Socha**

First Name: Scott

Last Name: Socha

City: South Wales

State: New York

Zip: 14139

Position: President & Director

% of Ownership: 0.00%

U.S. Citizen: Yes

**Aaron Short**

First Name: Aaron

Last Name: Short

City: Buffalo

State: New York

Zip: 14222

Position: VICE PRESIDENT -  
FINANCE AND TREASURY

% of Ownership: 0.00%

U.S. Citizen: Yes

**Insurance Company Information**

Insurance Company: Liberty Mutual Insurance Company

Policy Effective Date: 06/01/2020 Policy Expiration 01/01/1900

Bond Effective 2 Dram Cancel Date:

Outdoor Service Effective   Outdoor Service Expiration  

Temp Transfer Effective   Temp Transfer Expiration Date:

Applicant

License Application ( LC0042569 )

Ownership

Name of Applicant: DNC Parks & Resorts at Honey

Name of Business (DBA): Honey Creek Resort State Park

Address of Premises: 12633 Resort Drive

City Moravia

County: Appanoose

Zip: 52571

Business (641) 724-1401

Mailing 250 Delaware Ave

City Buffalo

State NY

Zip: 14202

#### Contact Person

Name Beth Salansky

Phone: (716) 858-5162

Email

bsalansk@delawarenorth.com

Classification Class C Liquor License (LC) (Commercial)

Term: 12 months

Effective Date: 06/01/2022

Expiration Date:

Privileges:

Class C Liquor License (LC) (Commercial)

#### Status of Business

Business Type: Privately Held Corporation

Corporate ID Number: XXXXXXXXXX Federal Employer ID XXXXXXXXXX

#### Ownership

James Houser

First Name: James

Last Name: Houser

City: Orchard Park

State: New York

Zip: 14127

Position: Director

% of Ownership: 0.00%

U.S. Citizen: Yes

Janice Trybus

First Name: Janice

Last Name: Trybus

City: Boston

State: Massachusetts

Zip: 02116

Position: Secretary

% of Ownership: 0.00%

U.S. Citizen: Yes

Christopher Feeney

First Name: Christopher

Last Name: Feeney

City: Clarence

State: New York

Zip: 14031

Position: Director

% of Ownership: 0.00%

U.S. Citizen: Yes

**Delaware North Companies****Parks & Resorts Inc**First Name: Delaware North Companies Last Name: & Resorts, IncCity: Parks BuffaloState: New YorkZip: 14202Position: stockholder% of Ownership: 100.00%

U.S. Citizen: Yes

**Scott Socha**First Name: ScottLast Name: SochaCity: South WalesState: New YorkZip: 14139Position: President & Director% of Ownership: 0.00%

U.S. Citizen: Yes

**Jeffrey Taips**First Name: JeffreyLast Name: TaipsCity: Orchard ParkState: New YorkZip: 14127Position: Vice President - Finance% of Ownership: 0.00%

U.S. Citizen: Yes

**Scott Kukelka**First Name: ScottLast Name: KukelkaCity: HamburgState: New YorkZip: 14075Position: Treasurer% of Ownership: 0.00%

U.S. Citizen: Yes

**Derek Zwickey**First Name: DerekLast Name: ZwickeyCity: BozemanState: MontanaZip: 59718Position: Chief Operating Officer% of Ownership: 0.00%

U.S. Citizen: Yes

**Insurance Company Information**Insurance Company: National Union Fire Insurance Company of Pittsburg, PAPolicy Effective Date: 06/01/2020Policy Expiration 06/01/2021

Bond Effective

Dram Cancel Date:

Outdoor Service Effective

Outdoor Service Expiration

Temp Transfer Effective

Temp Transfer Expiration Date:

Applicant

License Application ( LC0042569 )

*Renewal*

Name of Applicant: DNC Parks & Resorts at Honey

Name of Business (DBA): Honey Creek Resort State Park

Address of Premises: 12633 Resort Drive

City Moravia

County: Appanoose

Zip: 52571

Business (641) 724-1401

Mailing 250 Delaware Ave

City Buffalo

State NY

Zip: 14202

#### Contact Person

Name Beth Salansky

Phone: (716) 858-5162

Email

bsalansk@delawarenorth.com

Classification Class C Liquor License (LC) (Commercial)

Term: 12 months

Effective Date: 06/01/2020

Expiration Date: 05/31/2021

#### Privileges:

Class C Liquor License (LC) (Commercial)

Living Quarters

Outdoor Service

Sunday Sales

#### Status of Business

Business Type: Privately Held Corporation

Corporate ID Number: XXXXXXXXXX      Federal Employer ID XXXXXXXXXX

#### Ownership

##### James Houser

First Name: James

Last Name: Houser

City: Orchard Park

State: New York

Zip: 14127

Position: Director

% of Ownership: 0.00%

U.S. Citizen: Yes

##### Janice Trybus

First Name: Janice

Last Name: Trybus

City: Boston

State: Massachusetts

Zip: 02116

Position: Secretary

% of Ownership: 0.00%

U.S. Citizen: Yes

##### Christopher Feeney

First Name: Christopher

Last Name: Feeney

City: Clarence State: New York Zip: 14031

Position: Director

% of Ownership: 0.00% U.S. Citizen: Yes

**Delaware North Companies**

~~Parks & Resorts Inc~~ First Name: Delaware North Companies Last Name: & Resorts, Inc

City: Buffalo State: New York Zip: 14202

Position: stockholder

% of Ownership: 100.00% U.S. Citizen: Yes

**Scott Socha**

First Name: Scott Last Name: Socha

City: South Wales State: New York Zip: 14139

Position: President & Director

% of Ownership: 0.00% U.S. Citizen: Yes

**Aaron Short**

First Name: Aaron Last Name: Short

City: Buffalo State: New York Zip: 14222

Position: VICE PRESIDENT -  
FINANCE AND TREASURY

% of Ownership: 0.00% U.S. Citizen: Yes

**Insurance Company Information**

Insurance Company: National Union Fire Insurance Company of Pittsburg, PA

Policy Effective Date: 06/01/2020 Policy Expiration 06/01/2021

Bond Effective

Dram Cancel Date:

Outdoor Service Effective

Outdoor Service Expiration

Temp Transfer Effective

Temp Transfer Expiration Date:

**DNC PARKS & RESORTS AT HONEY CREEK, INC.**

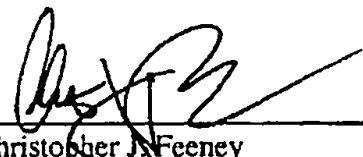
**CONSENT OF DIRECTORS**

The undersigned, being all of the duly elected, qualified and acting directors of DNC PARKS & RESORTS AT HONEY CREEK, INC., a Delaware corporation (the "Corporation"), DO HEREBY CONSENT TO, approve and adopt the following resolutions:

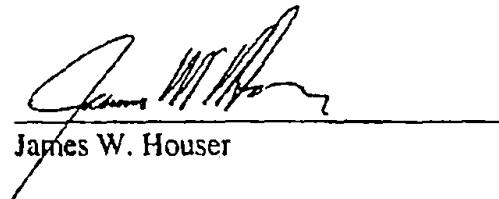
**RESOLVED**, that Derek Zwickey, is hereby elected Chief Operating Officer of the Corporation, effective as of July 9, 2018, conditioned upon and subject to the approval of all regulatory agencies which may be required, to serve during the ensuing year or until a successor is elected and shall have qualified;

**RESOLVED**, that the Board of Directors (the "Board") hereby ratify and affirm each and every action undertaken by Derek Zwickey as Chief Operating Officer of the Corporation, from July 9, 2018 to August 17, 2018, on behalf of and for the sole benefit of the Corporation.

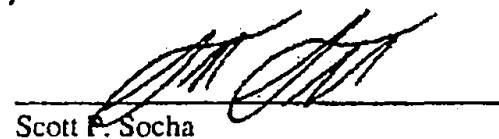
Dated: August 17, 2018



Christopher J. Feeney



James W. Houser



Scott P. Socha

August 7, 2019

The Board of Directors  
DNC Parks & Resorts at Honey Creek, Inc.  
250 Delaware Avenue  
Buffalo, NY 14202

Gentlemen:

I, Aaron J. Short, hereby resign as Vice President-Finance and Treasurer of DNC Parks & Resorts at Honey Creek, Inc., effective as of August 7, 2019.

Very truly yours,



Aaron J. Short

**DNC PARKS & RESORTS AT HONEY CREEK, INC.**

**CONSENT OF DIRECTORS**

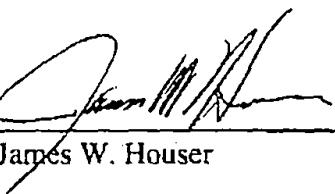
The undersigned, being all of the duly elected, qualified and acting directors of DNC PARKS & RESORTS AT HONEY CREEK, INC., a Delaware corporation (the "Corporation"), DO HEREBY CONSENT TO, approve and adopt the following resolutions with the same force and effect as if taken at a duly called and held meeting of the directors on such a date:

**RESOLVED**, that Jeffrey M. Taips, is hereby elected Vice President-Finance of the Corporation, effective immediately and Scott E. Kukelka is hereby elected Treasurer of the Corporation, effective immediately, conditioned upon and subject to the approval of all regulatory agencies which may be required, to serve during the ensuing year or until their successors are elected and shall have qualified; and it is further

**RESOLVED**, that that any actions taken by such officers prior to the date of the foregoing resolutions adopted hereby are hereby ratified, confirmed and approved as the acts and deeds of the Corporation.

Dated: February 14, 2020

  
\_\_\_\_\_  
Christopher J. Feeney

  
\_\_\_\_\_  
James W. Houser

  
\_\_\_\_\_  
Scott P. Socha

**Applicant****License Application ( LC0042572 )**

**Name of Applicant:** Hartland Enterprises LLC

**Name of Business (DBA):** Pale Moon

**Address of Premises:** 19071 Sunshine Rd.

**City** Centerville

**County:** Appanoose

**Zip:** 52544

**Business** (641) 895-2127

**Mailing** 19561 205th Ave.

**City** Centerville

**State** IA

**Zip:** 52544

**Contact Person**

**Name** Josh Hart

**Phone:** (641) 895-2127

**Email**

joshhart9481@gmail.com

**Classification** Class C Liquor License (LC) (Commercial)

**Term:** 12 months

**Effective Date:** 06/01/2020

**Expiration Date:** 05/31/2021

**Privileges:**

Class C Liquor License (LC) (Commercial)

Outdoor Service

Sunday Sales

**Status of Business**

**Business Type:** Limited Liability Company

**Corporate ID Number:** XXXXXXXXXX      **Federal Employer ID** XXXXXXXXXX

**Ownership**

**Josh Hart**

**First Name:** Josh

**Last Name:** Hart

**City:** Centerville

**State:** Iowa

**Zip:** 52544

**Position:** Owner

**% of Ownership:** 100.00%

**U.S. Citizen:** Yes

**Insurance Company Information**

**Insurance Company:** Specialty Risk of America

**Policy Effective Date:** 06/01/2020

**Policy Expiration** 06/01/2021

**Bond Effective**

**Dram Cancel Date:**

**Outdoor Service Effective**

**Outdoor Service Expiration**

**Temp Transfer Effective Date**

**Temp Transfer Expiration Date:**

**Applicant****License Application ( LC0044297 )**

**Name of Applicant:** Valley View Event Center LLC

**Name of Business (DBA):** Valley View Event Center LLC

**Address of Premises:** 22322 278th Avenue

**City** Moulton

**County:** Appanoose

**Zip:** 52572

**Business** (641) 895-5600

**Mailing** 22322 278th Avenue

**City** Moulton

**State** IA

**Zip:** 52572

**Contact Person**

**Name** Jerilyn Inman

**Phone:** (641) 895-5600

**Email**

jerilyninan@gmail.com

**Classification** Class C Liquor License (LC) (Commercial)

**Term:** 12 months

**Effective Date:** 06/01/2020

**Expiration Date:** 05/31/2021

**Privileges:**

Class C Liquor License (LC) (Commercial)

Outdoor Service

Sunday Sales

**Status of Business**

**BusinessType:** Limited Liability Company

**Corporate ID Number:** XXXXXXXXXX      **Federal Employer ID** XXXXXXXXXX

**Ownership**

**Jerilyn Inman**

**First Name:**

Jerilyn

**Last Name:**

Inman

**City:**

Moulton

**State:**

Iowa

**Zip:** 52572

**Position:**

Owner

**% of Ownership:** 50.00%

**U.S. Citizen:** Yes

**Greg Inman**

**First Name:**

Greg

**Last Name:**

Inman

**City:**

Moulton

**State:**

Iowa

**Zip:** 52572

**Position:**

Owner

**% of Ownership:** 50.00%

**U.S. Citizen:** Yes

**Insurance Company Information**

Insurance Company: Specially Risk of America

Policy Effective Date: 06/01/2020

Policy Expiration 05/31/2021

Bond Effective

Dram Cancel Date:

Outdoor Service Effective

Outdoor Service Expiration

Temp Transfer Effective

Temp Transfer Expiration Date:

Instructions on the reverse side

For period (MM/DD/YYYY) 7/1/2020 through June 30, 2021

I/we apply for a retail permit to sell cigarettes, tobacco, alternative nicotine, or vapor products:

**Business Information:**

Trade Name/DBA ELLIOTT'S GENERAL STORE INC.

Physical Location Address 23828 Hwy 71B City MONONA ZIP 52571

Mailing Address same City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Business Phone Number 641-724-3711

**Legal Ownership Information:**

Type of Ownership: Sole Proprietor  Partnership  Corporation  LLC  LLP

Name of sole proprietor, partnership, corporation, LLC, or LLP ELLIOTT'S GENERAL STORE INC.

Mailing Address 23828 Hwy 71B City MONONA State IA ZIP 52571

Phone Number 641-724-3711 Fax Number 641-724-3711 Email dektot+30@ AOL.com

**Retail Information:**

Types of Sales: Over-the-counter  Vending machine

Do you make delivery sales of alternative nicotine or vapor products? (See Instructions) Yes  No

Types of Products Sold: (Check all that apply)

Cigarettes  Tobacco  Alternative Nicotine Products  Vapor Products

**Type of Establishment: (Select the option that best describes the establishment)**

Alternative nicotine/vapor store  Bar  Convenience store/gas station  Drug store

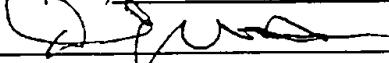
Grocery store  Hotel/motel  Liquor store  Restaurant  Tobacco store

Has vending machine that assembles cigarettes  Other

If application is approved and permit granted, I/we do hereby bind ourselves to a faithful observance of the laws governing the sale of cigarettes, tobacco, alternative nicotine, and vapor products.

**Signature of Owner(s), Partner(s), or Corporate Official(s)**

Name (please print) DAV. J. ELLIOTT Name (please print) \_\_\_\_\_

Signature  Signature \_\_\_\_\_

Date 5/10/2020 Date \_\_\_\_\_

Send this completed application and the applicable fee to your local jurisdiction. If you have any questions contact your city clerk (within city limits) or your county auditor (outside city limits).

**FOR CITY CLERK/COUNTY AUDITOR ONLY - MUST BE COMPLETE**

- Fill in the amount paid for the permit: \_\_\_\_\_
- Fill in the date the permit was approved by the council or board: \_\_\_\_\_
- Fill in the permit number issued by the city/county: \_\_\_\_\_
- Fill in the name of the city or county issuing the permit: \_\_\_\_\_
- New  Renewal

Send completed/approved application to Iowa Alcoholic Beverages Division within 30 days of issuance. Make sure the information on the application is complete and accurate. A copy of the permit does not need to be sent; only the application is required. It is preferred that applications are sent via email, as this allows for a receipt confirmation to be sent to the local authority.

- Email: [iapledge@iowaabd.com](mailto:iapledge@iowaabd.com)
- Fax: 515-281-7375

**Instructions on the reverse side**

For period (MM/DD/YYYY) 7/1/2020 through June 30, 2021

I/we apply for a retail permit to sell cigarettes, tobacco, alternative nicotine, or vapor products:

**Business Information:**

Trade Name/DBA Browns 3 B's

Physical Location Address 11377 Hwy S-70 City Neosho ZIP 52569

Mailing Address 12917 137th Ave City Plano State IA ZIP 52581

Business Phone Number 641-724-9820

**Legal Ownership Information:**

Type of Ownership: Sole Proprietor  Partnership  Corporation  LLC  LLP

Name of sole proprietor, partnership, corporation, LLC, or LLP Browns LLC

Mailing Address 12917 137th Ave City Plano State IA ZIP 52581

Phone Number 641-895-1325 Fax Number 515-895-1325 Email OCORIFY@HOTMAIL.COM

**Retail Information:**

Types of Sales: Over-the-counter  Vending machine

Do you make delivery sales of alternative nicotine or vapor products? (See Instructions) Yes  No

Types of Products Sold: (Check all that apply)

Cigarettes  Tobacco  Alternative Nicotine Products  Vapor Products

**Type of Establishment: (Select the option that best describes the establishment)**

Alternative nicotine/vapor store  Bar  Convenience store/gas station  Drug store

Grocery store  Hotel/motel  Liquor store  Restaurant  Tobacco store

Has vending machine that assembles cigarettes  Other

If application is approved and permit granted, I/we do hereby bind ourselves to a faithful observance of the laws governing the sale of cigarettes, tobacco, alternative nicotine, and vapor products.

**Signature of Owner(s), Partner(s), or Corporate Official(s)**

Name (please print) Key R Brown

Name (please print) Key R Brown

Signature Key R Brown

Signature Key R Brown

Date 5/7/20

Date 5/7/20

Send this completed application and the applicable fee to your local jurisdiction. If you have any questions contact your city clerk (within city limits) or your county auditor (outside city limits).

**FOR CITY CLERK/COUNTY AUDITOR ONLY – MUST BE COMPLETE**

- Fill in the amount paid for the permit: \_\_\_\_\_
- Fill in the date the permit was approved by the council or board: \_\_\_\_\_
- Fill in the permit number issued by the city/county: \_\_\_\_\_
- Fill in the name of the city or county issuing the permit: \_\_\_\_\_
- New  Renewal

Send completed/approved application to Iowa Alcoholic Beverages Division within 30 days of issuance. Make sure the information on the application is complete and accurate. A copy of the permit does not need to be sent; only the application is required. It is preferred that applications are sent via email, as this allows for a receipt confirmation to be sent to the local authority.

- Email: [iapledge@iowaabd.com](mailto:iapledge@iowaabd.com)
- Fax: 515-281-7375

*\$500*

**Instructions on the reverse side**

For period (MM/DD/YYYY) 7/1/2020 through June 30, 2021

I/we apply for a retail permit to sell cigarettes, tobacco, alternative nicotine, or vapor products:

**Business Information:**

Trade Name/DBA Your Boat Works LLC dba Rathbun Marina

Physical Location Address 21646 Marina PL City Moravia ZIP 52571

Mailing Address 21646 Marina PL City Moravia State IA ZIP 52571

Business Phone Number 641-724-3212

**Legal Ownership Information:**

Type of Ownership: Sole Proprietor  Partnership  Corporation  LLC  LLP

Name of sole proprietor, partnership, corporation, LLC, or LLP Your Boat Works

Mailing Address above City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Phone Number \_\_\_\_\_ Fax Number \_\_\_\_\_ Email \_\_\_\_\_

**Retail Information:**

Types of Sales: Over-the-counter  Vending machine

Do you make delivery sales of alternative nicotine or vapor products? (See Instructions) Yes  No

Types of Products Sold: (Check all that apply)

Cigarettes  Tobacco  Alternative Nicotine Products  Vapor Products

**Type of Establishment: (Select the option that best describes the establishment)**

Alternative nicotine/vapor store  Bar  Convenience store/gas station  Drug store   
Grocery store  Hotel/motel  Liquor store  Restaurant  Tobacco store

Has vending machine that assembles cigarettes  Other

If application is approved and permit granted, I/we do hereby bind ourselves to a faithful observance of the laws governing the sale of cigarettes, tobacco, alternative nicotine, and vapor products.

**Signature of Owner(s), Partner(s), or Corporate Official(s)**

Name (please print) Sheila Clemens

Name (please print) Douglas Clemens

Signature Sheila Clemens

Signature Douglas Clemens

Date 5-8-20

Date 5-8-20

Send this completed application and the applicable fee to your local jurisdiction. If you have any questions contact your city clerk (within city limits) or your county auditor (outside city limits).

**FOR CITY CLERK/COUNTY AUDITOR ONLY – MUST BE COMPLETE**

- Fill in the amount paid for the permit: \_\_\_\_\_
- Fill in the date the permit was approved by the council or board: \_\_\_\_\_
- Fill in the permit number issued by the city/county: \_\_\_\_\_
- Fill in the name of the city or county issuing the permit: \_\_\_\_\_
- New  Renewal

Send completed/approved application to Iowa Alcoholic Beverages Division within 30 days of issuance. Make sure the information on the application is complete and accurate. A copy of the permit does not need to be sent; only the application is required. It is preferred that applications are sent via email, as this allows for a receipt confirmation to be sent to the local authority.

- Email: [iapledge@iowaabd.com](mailto:iapledge@iowaabd.com)
- Fax: 515-281-7375

Instructions on the reverse side

For period (MM/DD/YYYY) 7/1/2020 through June 30 2021

I/we apply for a retail permit to sell cigarettes, tobacco, alternative nicotine, or vapor products:

**Business Information:**

Trade Name/DBA Dogg's RV Park

Physical Location Address 16999 Hwy 518 City Moravia ZIP 52571

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Business Phone Number 641-724-3762

**Legal Ownership Information:**

Type of Ownership: Sole Proprietor  Partnership  Corporation  LLC  LLP

Name of sole proprietor, partnership, corporation, LLC, or LLP Elliott Bracken

Mailing Address 16999 Hwy 518 City Moravia State IA ZIP 52571

Phone Number 641-895-2497 Fax Number \_\_\_\_\_ Email info@doggsrcpark.com

**Retail Information:**

Types of Sales: Over-the-counter  Vending machine

Do you make delivery sales of alternative nicotine or vapor products? (See Instructions) Yes  No

Types of Products Sold: (Check all that apply)

Cigarettes  Tobacco  Alternative Nicotine Products  Vapor Products

**Type of Establishment: (Select the option that best describes the establishment)**

Alternative nicotine/vapor store  Bar  Convenience store/gas station  Drug store   
Grocery store  Hotel/motel  Liquor store  Restaurant  Tobacco store

Has vending machine that assembles cigarettes  Other

If application is approved and permit granted, I/we do hereby bind ourselves to a faithful observance of the laws governing the sale of cigarettes, tobacco, alternative nicotine, and vapor products.

**Signature of Owner(s), Partner(s), or Corporate Official(s)**

Name (please print) Elliott Bracken Name (please print) \_\_\_\_\_

Signature Elliott Bracken Signature \_\_\_\_\_

Date OWNER Date \_\_\_\_\_

Send this completed application and the applicable fee to your local jurisdiction. If you have any questions contact your city clerk (within city limits) or your county auditor (outside city limits).

**FOR CITY CLERK/COUNTY AUDITOR ONLY – MUST BE COMPLETE**

- Fill in the amount paid for the permit: \_\_\_\_\_
- Fill in the date the permit was approved by the council or board: \_\_\_\_\_
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- Fill in the name of the city or county issuing the permit: \_\_\_\_\_
- New  Renewal

Send completed/approved application to Iowa Alcoholic Beverages Division within 30 days of issuance. Make sure the information on the application is complete and accurate. A copy of the permit does not need to be sent; only the application is required. It is preferred that applications are sent via email, as this allows for a receipt confirmation to be sent to the local authority.

- Email: [iapledge@iowaabd.com](mailto:iapledge@iowaabd.com)
- Fax: 515-281-7375



25100 - 520<sup>th</sup> Street  
Centerville, IA 52544  
(641)856-8528

## Appanoose County Conservation Board

Appanoose County Board of Supervisors:

The Appanoose County Conservation Board has hired to the position of Seasonal Part Time Mower Technician, Donald Stevens.

This is a part time/seasonal position. Mr. Stevens will be working 29 hours a week and will be paid at \$10.00/ hour.

He will begin his employment on May 11, 2020.

Thank You,

A handwritten signature in black ink, appearing to read "PBV".

Philip Visser  
Director ACCB

*Our mission statement: "To create a balance between man and his environment by educating, providing, and protecting the natural resources of Appanoose County"*

Prepared by Nate Shilling – Assistant to the Engineer –Centerville, IA 52544 – (641-856-6193)  
Return to Brad Skinner – Appanoose County Engineer –Centerville, IA 52544 – (641-856-6193)

## RESOLUTION

WHEREAS, a request has been made by the County Engineer to vacate a county road which is described as follows:

Jackson Street and Cleaveland Street in Wilson's 1<sup>st</sup> Subdivision block 1 and 2 Northeast Quarter of the Southwest Quarter Section 3 T68N R19W, more particularly described as follows:

Beginning at the Southeast Corner of Lot 8 Block 2, thence proceeding West to the Southwest Corner of Lot 12 Block 1, thence North to the Northwest Corner of Lot 1 Block 1. All lying in the Wilson's 1<sup>st</sup> Subdivision Block 1 and 2.

WHEREAS, on the *5<sup>th</sup> day of May, 2020* notice of said hearing was sent by certified mail to the affected property owners, all utility companies whose facilities are on the road right-of-way and the Iowa Department of Transportation, and

WHEREAS, on the *12<sup>th</sup> day of May, 2020* a Notice of Public Hearing for the proposed road vacation was published in the Daily Iowegian, newspapers of general circulation in the County where said road is located, and

WHEREAS, a hearing was held by the Appanoose County Board of Supervisors on the *18<sup>th</sup> day of May, 2020*; and

WHEREAS, the Appanoose County Board of Supervisors have determined that provisions of Chapter 306 of the Iowa Code have been met; and

WHEREAS, it has been determined to in the best interest of the County and the affected property owners that the County not purchase the vacated road, but instead transfer said road to the adjoining property owners by resolution, and

WHEREAS, the adjoining property owners are  
John Glenn

NOW, THEREFORE, BE IT RESOLVED by the Appanoose County Board of Supervisors the above described road is hereby vacated and ownership of same is transferred to the adjoining property owners

PASSED AND APPROVED this 18th day of May, 2020

Signed: Appanoose County Board of Supervisors

\_\_\_\_\_  
Mark Waits, Chairman

\_\_\_\_\_  
Neal Smith, Member

\_\_\_\_\_  
Linda Demry, Member

ATTEST, \_\_\_\_\_  
Kelly Howard, County Auditor

Prepared by Nate Shilling – Assistant to the Engineer –Centerville, IA 52544 – (641-856-6193)  
Return to Brad Skinner – Appanoose County Engineer –Centerville, IA 52544 – (641-856-6193)

## RESOLUTION

WHEREAS, a request has been made by the County Engineer to vacate a county road which is described as follows:

Alley running East and West 120 feet south of 524<sup>th</sup> Street, in Wilson's 1<sup>st</sup> Subdivision block 1 and 2 Northeast Quarter of the Southwest Quarter Section 3 T68N R19W, more particularly described as follows:

Beginning at the Southeast Corner of Lot 7 Block 2, thence proceeding West to the Southwest Corner of Lot 1 Block 2, and beginning at the Southeast Corner of Lot 6 Block 1, thence proceeding West to the Southwest Corner of Lot 1 Block 1. All lying in the Wilson's 1<sup>st</sup> Subdivision blocks 1 and 2.

WHEREAS, on the 3<sup>rd</sup> day of May, 2020 notice of said hearing was sent by certified mail to the affected property owners, all utility companies whose facilities are on the road right-of-way and the Iowa Department of Transportation; and

WHEREAS, on the 12<sup>th</sup> day of May, 2020 a Notice of Public Hearing for the proposed road vacation was published in the AD-Express and Daily Iowan, newspapers of general circulation in the County where said road is located; and

WHEREAS, a hearing was held by the Appanoose County Board of Supervisors on the 18<sup>th</sup> day of May, 2020, and

WHEREAS, the Appanoose County Board of Supervisors have determined that provisions of Chapter 306 of the Iowa Code have been met; and

WHEREAS, it has been determined to in the best interest of the County and the affected property owners that the County not purchase the vacated road, but instead transfer said road to the adjoining property owners by resolution; and

WHEREAS, the adjoining property owners are:  
John Glenn

NOW, THEREFORE BE IT RESOLVED by the Appanoose County Board of Supervisors the above described road is hereby vacated and ownership of same is transferred to the adjoining property owners.

PASSED AND APPROVED this 18<sup>th</sup> day of May, 2020

Signed: Appanoose County Board of Supervisors

\_\_\_\_\_  
Mark Waits, Chairman

\_\_\_\_\_  
Neal Smith, Member

\_\_\_\_\_  
Linda Demry, Member

ATTEST:  
\_\_\_\_\_  
Kelly Howard, County Auditor