



VILLAGE OF TWIN LAKES

105 East Main Street P O Box 1024 Twin Lakes, Wisconsin 53181
Phone (262) 877-2858 Fax (262) 333-3286

VILLAGE BOARD MEETING

Monday, January 20, 2025 – 6:30 p.m.

Village Hall, 105 E. Main Street, Twin Lakes, WI

AGENDA

1. CALL TO ORDER
2. PLEDGE OF ALLEGIANCE
3. ROLL CALL VILLAGE BOARD: TRUSTEES ANDRES, BOWER, FITZGERALD, KAROW, KASKIN, PERL, PRESIDENT SKINNER
4. APPROVAL OF VOUCHERS FOR PAYMENT: Corporate Checking (including General Fund, Sanitation, Capital Projects-E/M, Sewer Utility, Lake Rehab, Sewer Hook-Up, Sewer Replacement, and Tax Account): 36610-36688, 539-568, 1568-1615 Expenses – \$3,228,229.50
5. APPROVAL OF MINUTES: November 18, 2024 Regular Board Meeting, November 21, 2024 Special Board Meeting, December 16, 2024 Regular Board Meeting, December 30 Special Board Meeting
6. PUBLIC COMMENTS AND QUESTIONS: The Village Board will receive comments on agenda items only.
7. PRESIDENT AND TRUSTEE REPORTS
 - A. TRUSTEE SHARON BOWER - ADMINISTRATION, FINANCE, JUDICIARY, LICENSING
 1. Consideration of a motion to approve a Collective Bargaining Agreement with Teamsters 200 (Public Works and Sewer).
 2. Consideration of a motion to approve a Temporary Alcohol Class “B” Beer License to the Twin Lakes Chamber for the “SOUP”ER Bowl Sweethearts event on February 8, 2025 from 12:00 pm to 3:00 pm at 989 Legion Drive.
 - B. TRUSTEE KEVIN FITZGERALD - STREETS & ROADS, EQUIPMENT, STREET LIGHTS, WEEDS, LAKE PLANNING AND PROTECTION
 - C. TRUSTEE BILL KASKIN - CEMETERY, SANITATION, RECYCLING, SENIORS
 - D. TRUSTEE AARON KAROW - BUILDING AND ZONING, PLAN COMMISSION, AND PUBLIC BUILDINGS
 1. December 2024 Building Permits: 25; Valuation: \$1,224,228.20, Fees Collected: \$21,924.50.
 - E. TRUSTEE KEN PERL - POLICE, FIRE, LAKE CONTROL, PARKS AND BEACHES
 1. December 2024 Code Enforcement: Active Cases: 8, Closed Cases: 3

2. Discussion and possible action regarding a proposal from the Aquanuts for improvements at Lance Park and signs at Lance Park.

F. TRUSTEE BARB ANDRES - SEWER, HEALTH AND ENVIRONMENT, YOUTH, LIBRARY

G. VILLAGE PRESIDENT HOWARD SKINNER

1. Discussion of recent vacancy on the Village Board and possible appointment to fill such vacancy.

8. ADJOURN

MATTERS MAY BE TAKEN IN ORDER OTHER THAN LISTED

Requests from persons with disabilities, who need assistance to participate in this meeting or hearing, should be made to the Clerk Treasurer's office in advance so the appropriate accommodations can be made.

LABOR AGREEMENT

BETWEEN

THE VILLAGE OF TWIN LAKES
DEPARTMENT OF PUBLIC WORKS
(MAINTENANCE AND SEWER DEPARTMENT EMPLOYEES)

AND

GENERAL TEAMSTERS LOCAL UNION NO. 200



EFFECTIVE JANUARY 1, 2025 THROUGH DECEMBER 31, 2025

ARTICLE 1. AGREEMENT

This Agreement is made and entered into by and between the Village of Twin Lakes, hereinafter referred to as the Village, and General Teamsters Local Union No. 200, hereinafter referred as the Union, for and on behalf of themselves and the employees under the jurisdiction of the bargaining unit hereinafter described; such Agreement will commence on January 1, 2025, and shall be in effect through December 31, 2025.

ARTICLE 2. RECOGNITION

For the purpose of clarifying the parties subject to this Collective Bargaining Agreement, the Village of Twin Lakes recognizes the Union as the sole and exclusive bargaining representative for all regular full-time and regular part-time Department of Public Works employees of the Village of Twin Lakes; but excluding supervisory, managerial, and confidential employees.

ARTICLE 3. WAGE ADJUSTMENT

Effective January 1, 2025, the employees' current base wages shall continue in full force and effect.

A base wage increase of 3.3% will be effective on January 1, 2025, and continue through December 31, 2025.

ARTICLE 4. DURATION

Term of Agreement: This Agreement shall be in full force and effect from January 1, 2025, to and including December 31, 2025.

VILLAGE OF TWIN LAKES

GENERAL TEAMSTERS LOCAL
UNION NO. 200

By: _____
Village President

By: _____
David P. Miller / Business Representative

Date: _____

Date: _____

By: _____
Village Clerk

Date: _____

7.)A.)2

Form
AB-220

Temporary Alcohol Beverage License

Municipality
TWIN LAKES

License(s) Requested	Fees	
	<input type="checkbox"/> Temporary "Class B" Wine <input checked="" type="checkbox"/> Temporary Class "B" Beer	License Fees
	Background Check	\$
	Total Fees	\$ 10.00

Part A: Organization Information

1. Organization Name
TWIN LAKES AREA CHAMBER AND BUSINESS ASSOCIATION

2. Organization Permanent Address
349 E MAIN ST

3. City
TWIN LAKES

4. State
WI

5. Zip Code
53181

6. Mailing Address (if different from permanent address)
P O BOX 64

7. FEIN
36-1165966

8. Date of Organization/Incorporation
06/28/1991

9. State of Organization/Incorporation
WISCONSIN

10. Phone
262.877.2220

11. Email
wab@twinlakeschamber.com

12. Organization type (check one)

Bona Fide Club
 Church
 Fair Association/Agricultural Society
 Veteran's Organization
 Lodge/Society
 Chamber of Commerce or similar Civic or Trade Organization under ch. 181, Wis. Stats.

13. Is this organization required to hold a Wisconsin Seller's permit? Yes No

14. Wisconsin Seller's Permit Number (if applicable)

Part B: Individual Information

List the name, title, and phone number for all officers, directors, and agent of the organization. Include an Individual Questionnaire (Form AB-100) for each person listed below. Attach additional sheets if necessary.

Corporations must also include Alcohol Beverage Appointment of Agent (Form AB-101).

Last Name	First Name	Title	Phone
JANAS	JOY	CHAIRWOMAN	
TRONGEAM	WAYNE	PRESIDENT	
OLSZAK	EMILY	VICE PRESIDENT	
STREY	WILLIAM	TREASURER	
HILLOCK	DARREN	SECRETARY	

Continued →

Part C: Event Information			
1. Name of Event (if applicable) "SOUP"ER BOWL SWEETHEARTS			
2. Dates of Operation 02-08-2025		3. Hours of Operation 12 - 3 pm	
4. Premises Address 989 LEGION DRIVE			
5. City TWIN LAKES		6. State WI	7. Zip Code 53181
8. County KENOSHA	9. Governing Municipality <input type="checkbox"/> City <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village of: TWIN LAKES		10. Aldermanic District
11. Organizer of Event (if not the named applicant)		12. Email and/or Phone Number for Organizer of Event	
13. Organizer Website		14. Event Website	
15. Premises Description - Describe the building or buildings and any outside areas where alcohol beverages and records are sold, stored, or consumed, and related records are kept. Describe all rooms within the building, including living quarters. Authorized alcohol beverage activities and storage of records may occur only on the premises described in this application. Attach a map or diagram and additional sheets if necessary. We will be selling beer and malt beverages in the American Legion Hall. There is an office, a kitchen, two bathrooms, a bar, and a large common area, along with a storage room and a basement. Records will be kept at the event and at the Chamber office, 309 E Main St, in Twin Lakes. The Chamber building has an office, a conference room, a bathroom, a kitchenette, and a basement.			

Part D: Attestation			
Who must sign this application? • one officer or director of the nonprofit organization			
READ CAREFULLY BEFORE SIGNING: Under penalty of law, I have answered each of the above questions completely and truthfully. I agree that I am acting solely on behalf of the applicant organization and not on behalf of any other individual or entity seeking the license. Further, I agree that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another individual or entity. I agree to operate according to the law, including but not limited to, purchasing alcohol beverages from Wisconsin-permitted wholesalers. I understand that lack of access to any portion of a licensed premises during inspection will be deemed a refusal to allow inspection. Such refusal is a misdemeanor and grounds for revocation of this license. I understand that any license issued contrary to Wis. Stat. Chapter 125 shall be void under penalty of state law. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.			
Last Name TRONGEAL		First Name WAYNE	M.I.
Title CHAMBER BOARD PRESIDENT	Email		Phone 262.206.8695
Signature Wayne Trongeal		Date 12-16-24	

Part E: For Clerk Use Only	
Date Application Was Filed With Clerk 12/17/2024	License Number
Date License Granted	Date License Issued
Signature of Clerk/Deputy Clerk	

Paid \$10.00 cash 12/17/24 #4664