

**AGENDA
CITY OF ST. CHARLES
GOVERNMENT OPERATIONS COMMITTEE
ALD. DAN STELLATO, CHAIR**

**MONDAY, APRIL 17, 2017
IMMEDIATELY FOLLOWING THE CITY COUNCIL MEETING
CITY COUNCIL CHAMBERS – 2 EAST MAIN STREET**

- 1. Call to Order**
- 2. Roll Call**
- 3. Omnibus Vote**
 - a. Budget Revisions – March 2017
- 4. Police Department**
 - a. Recommendation to approve a proposal for a new Class B liquor license for DRM Deli Inc. to be located at 610 E Main Street, St. Charles.
 - b. Recommendation to approve a proposal for a Class B liquor license application for new owners to take over Taste of Himalayas located at 110 N 3rd Street, St. Charles.
 - c. Recommendation to approve an outdoor patio permit for Vintage 53 located at 162 S 1st Street, Unit C.
- 5. Finance Department**
 - a. Recommendation to approve a Resolution of Official Intent Regarding Capital Expenditures to be Reimbursed from Proceeds of an Obligation to be Issued by the City of St. Charles, Kane and DuPage Counties, Illinois.
 - b. Recommendation to approve a Resolution Authorizing an Amendment to the Reserve Policy of the City of St Charles.
 - c. Recommendation to approve an Ordinance authorizing changes in the rate structure for the Electric Utility for the City of St. Charles effective for billings issued after June 1, 2017.
 - d. Recommendation to approve Ordinances authorizing changes in the rate structure for the Water Utility for the City of St. Charles effective for billings issued after June 1, 2017.
 - e. Recommendation to approve Ordinances authorizing changes in the rate structure for the Sewer Utility for the City of St. Charles effective for billings issued after June 1, 2017.
- 6. Executive Session**
 - Personnel –5 ILCS 120/2(c)(1)
 - Pending Litigation – 5 ILCS 120/2(c)(11)
 - Probable or Imminent Litigation – 5 ILCS 120/2(c)(11)

- Property Acquisition – 5 ILCS 120/2(c)(5)
- Collective Bargaining – 5 ILCS 120/2(c)(2)
- Review of Executive Session Minutes – 5 ILCS 120/2(c)(21)

7. Additional Items from Mayor, Council, Staff, or Citizens.

8. Adjournment

ADA Compliance

Any individual with a disability requesting a reasonable accommodation in order to participate in a public meeting should contact the ADA Coordinator, Jennifer McMahon, at least 48 hours in advance of the scheduled meeting. The ADA Coordinator can be reached in person at 2 East Main Street, St. Charles, IL, via telephone at (630) 377 4446 or 800 526 0844 (TDD), or via e-mail at jmcmahon@stcharlesil.gov. Every effort will be made to allow for meeting participation. Notices of this meeting were posted consistent with the requirements of 5 ILCS 120/1 et seq. (Open Meetings Act).

CITY OF ST. CHARLES
Budget Revision Listing

March 2017

JE TYPE	JE #	BUDGET #	COMPANY	FISCAL YEAR	PERIOD	DATE	ACCT-UNIT	ACCOUNT	AMOUNT	DESCRIPTION
Budget Addition	172	100	1000	2017	11	03/01/2017	100300	54482	10,000.00	Dmg to Cruiser-Ins Subrogated
Budget Addition	172	100	1000	2017	11	03/01/2017	100999	48100	(10,000.00)	Dmg to Cruiser-Ins Subrogated
172 Total									-	
Budget Transfer	173	100	1000	2017	11	03/03/2017	100210	52002	200.00	For books for HR
Budget Transfer	173	100	1000	2017	11	03/03/2017	100210	52000	(200.00)	For books for HR
Budget Transfer	173	100	1000	2017	11	03/03/2017	100400	51500	1,500.00	From Current to New Hire Testg
Budget Transfer	173	100	1000	2017	11	03/03/2017	100400	51501	(1,500.00)	From Current to New Hire Testg
Budget Transfer	173	100	1000	2017	11	03/03/2017	100400	54001	2,500.00	Fire Dept Cell Phone/Data
Budget Transfer	173	100	1000	2017	11	03/03/2017	100400	54160	(2,500.00)	Fire Dept Cell Phone/Data
Budget Transfer	173	100	1000	2017	11	03/03/2017	100402	51500	2,000.00	For EMA new hire testing
Budget Transfer	173	100	1000	2017	11	03/03/2017	100402	50101	(2,000.00)	For EMA new hire testing
Budget Transfer	173	100	1000	2017	11	03/03/2017	200521	54110	6,000.00	For Electric Legal Bills
Budget Transfer	173	100	1000	2017	11	03/03/2017	200521	54001	(6,000.00)	For Electric Legal Bills
Budget Transfer	173	100	1000	2017	11	03/03/2017	200521	54492	4,200.00	Transmission Line Maint
Budget Transfer	173	100	1000	2017	11	03/03/2017	200521	54491	(4,200.00)	Transmission Line Maint
Budget Transfer	173	100	1000	2017	11	03/03/2017	200521	54480	5,000.00	Central Garage Services
Budget Transfer	173	100	1000	2017	11	03/03/2017	200521	54491	(5,000.00)	Transmission Line Maint
Budget Transfer	173	100	1000	2017	11	03/03/2017	200521	54301	1,500.00	For hauling services
Budget Transfer	173	100	1000	2017	11	03/03/2017	200521	54491	(1,500.00)	For hauling services
Budget Transfer	173	100	1000	2017	11	03/03/2017	210540	54110	4,000.00	For Water related legal
Budget Transfer	173	100	1000	2017	11	03/03/2017	210540	54361	(4,000.00)	For Water related legal
Budget Transfer	173	100	1000	2017	11	03/03/2017	210541	54301	9,800.00	Refuse & Hauling for Water
Budget Transfer	173	100	1000	2017	11	03/03/2017	210541	54456	(9,800.00)	Refuse & Hauling for Water
Budget Transfer	173	100	1000	2017	11	03/03/2017	220551	54464	8,000.00	Lift Station Maint
Budget Transfer	173	100	1000	2017	11	03/03/2017	220551	54467	(8,000.00)	Lift Station Maint
Budget Transfer	173	100	1000	2017	11	03/03/2017	220552	54312	15,100.00	For add'l sewer lining
Budget Transfer	173	100	1000	2017	11	03/03/2017	220552	54465	(15,100.00)	For add'l sewer lining
Budget Transfer	173	100	1000	2017	11	03/03/2017	800223	55401	100.00	For inventory OH
Budget Transfer	173	100	1000	2017	11	03/03/2017	800223	55400	(100.00)	For inventory OH
Budget Transfer	173	100	1000	2017	11	03/03/2017	801512	52401	4,000.00	Vehicle Fluids-Fleet
Budget Transfer	173	100	1000	2017	11	03/03/2017	801512	52402	(4,000.00)	Vehicle Fluids-Fleet
Budget Transfer	173	100	1000	2017	11	03/03/2017	801512	54110	1,100.00	Fleet related legal
Budget Transfer	173	100	1000	2017	11	03/03/2017	801512	54467	(1,100.00)	Fleet related legal
173 Total									-	
Budget Transfer	174	100	1000	2017	11	03/03/2017	100402	51600	100.00	For uniform expense or EMA
Budget Transfer	174	100	1000	2017	11	03/03/2017	100402	51300	(100.00)	For uniform expense or EMA
Budget Transfer	174	100	1000	2017	11	03/03/2017	100500	52400	50.00	For gasoline for Engineering
Budget Transfer	174	100	1000	2017	11	03/03/2017	100500	52319	(50.00)	For gasoline for Engineering
Budget Transfer	174	100	1000	2017	11	03/03/2017	200521	54301	600.00	For hauling services
Budget Transfer	174	100	1000	2017	11	03/03/2017	200521	54303	(600.00)	For hauling services
Budget Transfer	174	100	1000	2017	11	03/03/2017	210541	50201	900.00	For Double Time for Water Ops

CITY OF ST. CHARLES

March 2017

Budget Revision Listing

JE TYPE	JE #	BUDGET #	COMPANY	FISCAL YEAR	PERIOD	DATE	ACCT-UNIT	ACCOUNT	AMOUNT	DESCRIPTION
Budget Transfer	174	100	1000	2017	11	03/03/2017	210541	50200	(900.00)	For Double Time for Water Ops
Budget Transfer	174	100	1000	2017	11	03/03/2017	210541	52700	900.00	For water line repair material
Budget Transfer	174	100	1000	2017	11	03/03/2017	210541	52314	(900.00)	For water line repair material
Budget Transfer	174	100	1000	2017	11	03/03/2017	210541	54013	300.00	For City Sewer charges
Budget Transfer	174	100	1000	2017	11	03/03/2017	210541	54010	(300.00)	For City Sewer charges
Budget Transfer	174	100	1000	2017	11	03/03/2017	210540	54360	900.00	For legal bills-Hoscheit
Budget Transfer	174	100	1000	2017	11	03/03/2017	210540	54189	(900.00)	For legal bills-Hoscheit
Budget Transfer	174	100	1000	2017	11	03/03/2017	210540	54530	200.00	For legal notices
Budget Transfer	174	100	1000	2017	11	03/03/2017	210540	54360	(200.00)	For legal notices
Budget Transfer	174	100	1000	2017	11	03/03/2017	220551	50201	600.00	For WWTP Double Time
Budget Transfer	174	100	1000	2017	11	03/03/2017	220551	50205	(600.00)	For WWTP Double Time
Budget Transfer	174	100	1000	2017	11	03/03/2017	220551	50200	900.00	For WWTP Over Time
Budget Transfer	174	100	1000	2017	11	03/03/2017	220551	50100	(900.00)	For WWTP Over Time
Budget Transfer	174	100	1000	2017	11	03/03/2017	800223	50201	800.00	For Inventory Double Time
Budget Transfer	174	100	1000	2017	11	03/03/2017	800223	50200	(800.00)	For Inventory Double Time
Budget Transfer	174	100	1000	2017	11	03/03/2017	801512	51105	500.00	For Fleet 401A
Budget Transfer	174	100	1000	2017	11	03/03/2017	801512	50200	(500.00)	For Fleet 401A
Budget Transfer	174	100	1000	2017	11	03/03/2017	801512	50101	900.00	For Fleet Part Time Wages
Budget Transfer	174	100	1000	2017	11	03/03/2017	801512	50200	(900.00)	For Fleet Part Time Wages
Budget Transfer	174	100	1000	2017	11	03/03/2017	801512	55150	23.00	For WC Medical Payments
Budget Transfer	174	100	1000	2017	11	03/03/2017	801512	54467	(23.00)	For WC Medical Payments
Budget Transfer	174	100	1000	2017	11	03/03/2017	804530	55400	150.00	For Inventory Carrying Charge
Budget Transfer	174	100	1000	2017	11	03/03/2017	804530	54466	(150.00)	For Inventory Carrying Charge
Budget Transfer	174	100	1000	2017	11	03/03/2017	100221	54531	400.00	For bid notices for purchasing
Budget Transfer	174	100	1000	2017	11	03/03/2017	100221	55401	(400.00)	For bid notices for purchasing
Budget Transfer	174	100	1000	2017	11	03/03/2017	100110	50200	1,020.00	For City Admin OT
Budget Transfer	174	100	1000	2017	11	03/03/2017	100120	54110	(1,020.00)	For City Admin OT
174 Total									-	
Budget Transfer	175	100	1000	2017	11	03/07/2017	200521	54110	3,500.00	Legal bills for Schmidt case
Budget Transfer	175	100	1000	2017	11	03/07/2017	200521	54456	(3,500.00)	Legal bills for Schmidt case
Budget Transfer	175	100	1000	2017	11	03/07/2017	200521	52805	4,000.00	For street repair materials
Budget Transfer	175	100	1000	2017	11	03/07/2017	200521	52310	(4,000.00)	For street repair materials
Budget Transfer	175	100	1000	2017	11	03/07/2017	100200	54254	1,600.00	For hosting services for IS
Budget Transfer	175	100	1000	2017	11	03/07/2017	100200	54253	(1,600.00)	For hosting services for IS
Budget Transfer	175	100	1000	2017	11	03/07/2017	100400	50104	2,500.00	For other wages for Fire
Budget Transfer	175	100	1000	2017	11	03/07/2017	100400	50101	(2,500.00)	For other wages for Fire
Budget Transfer	175	100	1000	2017	11	03/07/2017	100400	50203	4,000.00	ACE pay was underbudgeted
Budget Transfer	175	100	1000	2017	11	03/07/2017	100400	50100	(4,000.00)	ACE pay was underbudgeted
Budget Transfer	175	100	1000	2017	11	03/07/2017	100401	50203	14,000.00	ACE pay was underbudgeted
Budget Transfer	175	100	1000	2017	11	03/07/2017	100401	50100	(14,000.00)	ACE pay was underbudgeted
Budget Transfer	175	100	1000	2017	11	03/07/2017	100510	50201	8,000.00	DT underbudgeted for snow
Budget Transfer	175	100	1000	2017	11	03/07/2017	100510	50200	(8,000.00)	DT underbudgeted for snow

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March 2017

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JE TYPE	JE #	BUDGET #	COMPANY	FISCAL YEAR	PERIOD	DATE	ACCT-UNIT	ACCOUNT	AMOUNT	DESCRIPTION
Budget Transfer	175	100	1000	2017	11	03/07/2017	100510	52300	1,500.00	Janitorial supplies for PS
Budget Transfer	175	100	1000	2017	11	03/07/2017	100510	52313	(1,500.00)	Janitorial supplies for PS
Budget Transfer	175	100	1000	2017	11	03/07/2017	100650	54399	10,400.00	For Economic Incentive Agreeeme
Budget Transfer	175	100	1000	2017	11	03/07/2017	100650	54691	(10,400.00)	For Economic Incentive Agreeeme
Budget Transfer	175	100	1000	2017	11	03/07/2017	210540	51103	2,500.00	IMRF underbudgeted
Budget Transfer	175	100	1000	2017	11	03/07/2017	210540	50100	(2,500.00)	IMRF underbudgeted
175 Total									-	
Budget Transfer	176	100	1000	2017	11	03/08/2017	803500	54110	619.00	Legal for S. Murphy case
Budget Transfer	176	100	1000	2017	11	03/08/2017	803500	55150	(619.00)	Legal for S. Murphy case
Budget Transfer	176	100	1000	2017	11	03/08/2017	803500	55152	46,000.00	Reclass WC Medic to Settlement
Budget Transfer	176	100	1000	2017	11	03/08/2017	803500	55150	(46,000.00)	Reclass WC Medic to Settlement
Budget Transfer	176	100	1000	2017	11	03/08/2017	803500	55151	4,000.00	Reclass WC Medical to TTD
Budget Transfer	176	100	1000	2017	11	03/08/2017	803500	55150	(4,000.00)	Reclass WC Medical to TTD
Budget Transfer	176	100	1000	2017	11	03/08/2017	100300	54399	2,000.00	For CALEA Consulting Svcs
Budget Transfer	176	100	1000	2017	11	03/08/2017	100300	54467	(2,000.00)	For CALEA Consulting Svcs
176 Total									-	
Budget Transfer	177	100	1000	2017	11	03/09/2017	200521	54492	15,000.00	Unexpected transmission failur
Budget Transfer	177	100	1000	2017	11	03/09/2017	200521	54490	(15,000.00)	Unexpected transmission failur
Budget Transfer	177	100	1000	2017	11	03/09/2017	100300	54142	60.00	For Police background checks
Budget Transfer	177	100	1000	2017	11	03/09/2017	100300	54520	(60.00)	For Police background checks
Budget Transfer	177	100	1000	2017	11	03/09/2017	100400	54402	900.00	For copier maintenance
Budget Transfer	177	100	1000	2017	11	03/09/2017	100400	54160	(900.00)	For copier maintenance
Budget Transfer	177	100	1000	2017	11	03/09/2017	100401	52305	200.00	For safety supplies
Budget Transfer	177	100	1000	2017	11	03/09/2017	100401	52306	(200.00)	For safety supplies
Budget Transfer	177	100	1000	2017	11	03/09/2017	100510	52700	900.00	Water/Sewer line repair materi
Budget Transfer	177	100	1000	2017	11	03/09/2017	100510	52805	(900.00)	Water/Sewer line repair materi
Budget Transfer	177	100	1000	2017	11	03/09/2017	200521	51601	900.00	Safety uniforms
Budget Transfer	177	100	1000	2017	11	03/09/2017	200521	51600	(900.00)	Safety uniforms
Budget Transfer	177	100	1000	2017	11	03/09/2017	200521	52500	900.00	Electrical Supplies
Budget Transfer	177	100	1000	2017	11	03/09/2017	200521	52501	(900.00)	Electrical Supplies
Budget Transfer	177	100	1000	2017	11	03/09/2017	800223	51600	100.00	Uniforms
Budget Transfer	177	100	1000	2017	11	03/09/2017	800223	51601	(100.00)	Uniforms
Budget Transfer	177	100	1000	2017	11	03/09/2017	801512	51600	200.00	Uniforms
Budget Transfer	177	100	1000	2017	11	03/09/2017	801512	51601	(200.00)	Uniforms
177 Total									-	
Budget Addition	178	100	1000	2017	11	03/09/2017	100210	54110	2,000.00	For HR legal bills
Budget Addition	178	100	1000	2017	11	03/09/2017	100900	31199	(2,000.00)	For HR legal bills
Budget Addition	178	100	1000	2017	11	03/09/2017	100210	54120	6,000.00	For HR legal bills
Budget Addition	178	100	1000	2017	11	03/09/2017	100900	31199	(6,000.00)	For HR legal bills
178 Total									-	
Roll Forward Budget for Non PO	179	100	1000	2017	11	03/09/2017	100300	56004	3,575.00	R/F Pending-Evidence Bar Code
Roll Forward Budget for Non PO	179	100	1000	2017	11	03/09/2017	100300	59999	(3,575.00)	R/F Pending-Evidence Bar Code

CITY OF ST. CHARLES
Budget Revision Listing

March 2017

JE TYPE	JE #	BUDGET #	COMPANY	FISCAL YEAR	PERIOD	DATE	ACCT-UNIT	ACCOUNT	AMOUNT	DESCRIPTION
179 Total									-	
Budget Transfer	180	100	1000	2017	11	03/13/2017	802210	55100	(50,000.00)	To cover insurance admin fees
Budget Transfer	180	100	1000	2017	11	03/13/2017	802210	54170	50,000.00	To cover insurance admin fees
180 Total									-	
Budget Transfer	181	100	1000	2017	11	03/14/2017	100401	52300	250.00	For janitorial supplies
Budget Transfer	181	100	1000	2017	11	03/14/2017	100400	51501	(250.00)	For janitorial supplies
Budget Transfer	181	100	1000	2017	11	03/14/2017	100300	54353	700.00	For towing costs
Budget Transfer	181	100	1000	2017	11	03/14/2017	100300	54250	(700.00)	For towing costs
Budget Transfer	181	100	1000	2017	11	03/14/2017	100300	51500	100.00	For testing for xing guards
Budget Transfer	181	100	1000	2017	11	03/14/2017	100300	51501	(100.00)	For testing for xing guards
Budget Transfer	181	100	1000	2017	11	03/14/2017	100400	52001	400.00	For computer related supplies
Budget Transfer	181	100	1000	2017	11	03/14/2017	100400	52000	(400.00)	For computer related supplies
Budget Transfer	181	100	1000	2017	11	03/14/2017	200521	56002	254.00	For 3 reel trailer
Budget Transfer	181	100	1000	2017	11	03/14/2017	200521	56001	(254.00)	For 3 reel trailer
Budget Transfer	181	100	1000	2017	11	03/14/2017	220552	52305	500.00	For safety supplies
Budget Transfer	181	100	1000	2017	11	03/14/2017	220552	52314	(500.00)	For safety supplies
181 Total									-	
Budget Transfer	182	100	1000	2017	11	03/16/2017	100400	52001	450.00	Repair broken tough book
Budget Transfer	182	100	1000	2017	11	03/16/2017	100400	51501	(450.00)	Repair broken tough book
Budget Transfer	182	100	1000	2017	11	03/16/2017	100401	54371	500.00	Gauges need calibration
Budget Transfer	182	100	1000	2017	11	03/16/2017	100400	51501	(500.00)	Gauges need calibration
Budget Transfer	182	100	1000	2017	11	03/16/2017	100400	54450	1,000.00	Replacing tools
Budget Transfer	182	100	1000	2017	11	03/16/2017	100400	51501	(1,000.00)	Replacing tools
Budget Transfer	182	100	1000	2017	11	03/16/2017	100401	52310	5,000.00	Knox Boxes need replaced
Budget Transfer	182	100	1000	2017	11	03/16/2017	100400	51501	(5,000.00)	Knox Boxes need replaced
Budget Transfer	182	100	1000	2017	11	03/16/2017	100210	54251	1,800.00	Internet monitoring software
Budget Transfer	182	100	1000	2017	11	03/16/2017	100210	51301	(1,800.00)	Internet monitoring software
Budget Transfer	182	100	1000	2017	11	03/16/2017	100603	54110	2,000.00	Legal services-Feb-B&CE
Budget Transfer	182	100	1000	2017	11	03/16/2017	100603	54150	(2,000.00)	Legal services-Feb-B&CE
Budget Transfer	182	100	1000	2017	11	03/16/2017	100200	54001	900.00	For cell phone service
Budget Transfer	182	100	1000	2017	11	03/16/2017	100200	54253	(900.00)	For cell phone service
Budget Transfer	182	100	1000	2017	11	03/16/2017	100210	54000	300.00	For phone service
Budget Transfer	182	100	1000	2017	11	03/16/2017	100210	54402	(300.00)	For phone service
Budget Transfer	182	100	1000	2017	11	03/16/2017	100300	54000	900.00	For phone service
Budget Transfer	182	100	1000	2017	11	03/16/2017	100300	54480	(900.00)	For phone service
Budget Transfer	182	100	1000	2017	11	03/16/2017	100300	54402	900.00	For copier maintenance
Budget Transfer	182	100	1000	2017	11	03/16/2017	100300	54480	(900.00)	For copier maintenance
Budget Transfer	182	100	1000	2017	11	03/16/2017	100400	52314	200.00	For parts for equipment
Budget Transfer	182	100	1000	2017	11	03/16/2017	100400	52319	(200.00)	For parts for equipment
Budget Transfer	182	100	1000	2017	11	03/16/2017	100510	54000	900.00	For telephone service
Budget Transfer	182	100	1000	2017	11	03/16/2017	100510	54301	(900.00)	For telephone service
Budget Transfer	182	100	1000	2017	11	03/16/2017	100510	54001	900.00	For cell phone service

CITY OF ST. CHARLES

March 2017

Budget Revision Listing

JE TYPE	JE #	BUDGET #	COMPANY	FISCAL YEAR	PERIOD	DATE	ACCT-UNIT	ACCOUNT	AMOUNT	DESCRIPTION
Budget Transfer	182	100	1000	2017	11	03/16/2017	100510	54301	(900.00)	For cell phone service
Budget Transfer	182	100	1000	2017	11	03/16/2017	200522	54001	900.00	For cell phone service
Budget Transfer	182	100	1000	2017	11	03/16/2017	200522	54467	(900.00)	For cell phone service
Budget Transfer	182	100	1000	2017	11	03/16/2017	210540	54001	900.00	For cell phone service
Budget Transfer	182	100	1000	2017	11	03/16/2017	210540	54360	(900.00)	For cell phone service
Budget Transfer	182	100	1000	2017	11	03/16/2017	220551	54000	900.00	For telephone service
Budget Transfer	182	100	1000	2017	11	03/16/2017	220551	54371	(900.00)	For telephone service
Budget Transfer	182	100	1000	2017	11	03/16/2017	220552	54000	500.00	For telephone service
Budget Transfer	182	100	1000	2017	11	03/16/2017	220552	54301	(500.00)	For telephone service
182 Total									-	
Budget Transfer	183	100	1000	2017	11	03/21/2017	100110	52100	150.00	Refreshment supplies
Budget Transfer	183	100	1000	2017	11	03/21/2017	100110	52000	(150.00)	Refreshment supplies
Budget Transfer	183	100	1000	2017	11	03/21/2017	100400	50101	900.00	For Fire Other Wages
Budget Transfer	183	100	1000	2017	11	03/21/2017	100400	50101	(900.00)	For Fire Other Wages
Budget Transfer	183	100	1000	2017	11	03/21/2017	100400	50203	900.00	For Asst. Chief Extra Duty pay
Budget Transfer	183	100	1000	2017	11	03/21/2017	100400	50101	(900.00)	For Asst. Chief Extra Duty pay
Budget Transfer	183	100	1000	2017	11	03/21/2017	100401	52305	500.00	For Safety Supplies
Budget Transfer	183	100	1000	2017	11	03/21/2017	100401	52306	(500.00)	For Safety Supplies
Budget Transfer	183	100	1000	2017	11	03/21/2017	100500	50101	900.00	For PT Wages
Budget Transfer	183	100	1000	2017	11	03/21/2017	100500	50100	(900.00)	For PT Wages
Budget Transfer	183	100	1000	2017	11	03/21/2017	100500	52100	300.00	For refreshment supplies
Budget Transfer	183	100	1000	2017	11	03/21/2017	100500	52319	(300.00)	For refreshment supplies
Budget Transfer	183	100	1000	2017	11	03/21/2017	200520	54001	900.00	For cellular service
Budget Transfer	183	100	1000	2017	11	03/21/2017	200520	54171	(900.00)	For cellular service
Budget Transfer	183	100	1000	2017	11	03/21/2017	200522	51600	20.00	For Elec Meter uniforms
Budget Transfer	183	100	1000	2017	11	03/21/2017	200522	51601	(20.00)	For Elec Meter uniforms
Budget Transfer	183	100	1000	2017	11	03/21/2017	210540	50101	900.00	For Water Adm Part Time Wages
Budget Transfer	183	100	1000	2017	11	03/21/2017	210540	50100	(900.00)	For Water Adm Part Time Wages
Budget Transfer	183	100	1000	2017	11	03/21/2017	210540	52100	100.00	For refreshment supplies
Budget Transfer	183	100	1000	2017	11	03/21/2017	210540	54000	(100.00)	For refreshment supplies
Budget Transfer	183	100	1000	2017	11	03/21/2017	210541	50201	900.00	For DT Overtime
Budget Transfer	183	100	1000	2017	11	03/21/2017	210541	50200	(900.00)	For DT Overtime
Budget Transfer	183	100	1000	2017	11	03/21/2017	220550	50101	900.00	For PT Wages
Budget Transfer	183	100	1000	2017	11	03/21/2017	220550	50100	(900.00)	For PT Wages
Budget Transfer	183	100	1000	2017	11	03/21/2017	220550	52100	100.00	For refreshment supplies
Budget Transfer	183	100	1000	2017	11	03/21/2017	220550	54171	(100.00)	For refreshment supplies
Budget Transfer	183	100	1000	2017	11	03/21/2017	220551	52305	500.00	For safety supplies
Budget Transfer	183	100	1000	2017	11	03/21/2017	220551	52304	(500.00)	For safety supplies
Budget Transfer	183	100	1000	2017	11	03/21/2017	220552	50101	900.00	For PT Wages
Budget Transfer	183	100	1000	2017	11	03/21/2017	220552	50100	(900.00)	For PT Wages
Budget Transfer	183	100	1000	2017	11	03/21/2017	100600	56004	85.00	For 2nd monitor for Rita
Budget Transfer	183	100	1000	2017	11	03/21/2017	100600	52000	(85.00)	For 2nd monitor for Rita

CITY OF ST. CHARLES

March 2017

Budget Revision Listing

JE TYPE	JE #	BUDGET #	COMPANY	FISCAL YEAR	PERIOD	DATE	ACCT-UNIT	ACCOUNT	AMOUNT	DESCRIPTION
Budget Transfer	183	100	1000	2017	11	03/21/2017	200521	52002	60.00	For Books & Subscriptions
Budget Transfer	183	100	1000	2017	11	03/21/2017	200521	52201	(60.00)	For Books & Subscriptions
Budget Transfer	183	100	1000	2017	11	03/21/2017	800223	54450	800.00	For fuel pump repairs
Budget Transfer	183	100	1000	2017	11	03/21/2017	800223	54480	(800.00)	For Books & Subscriptions
183 Total									-	
Budget Transfer	184	100	1000	2017	11	03/23/2017	100401	54450	1,000.00	Correct previous JE-Wrong AU
Budget Transfer	184	100	1000	2017	11	03/23/2017	100400	54450	(1,000.00)	Correct previous JE-Wrong AU
Budget Transfer	184	100	1000	2017	11	03/23/2017	801512	51402	128.00	For meals for training
Budget Transfer	184	100	1000	2017	11	03/23/2017	801512	51300	(128.00)	For meals for training
Budget Transfer	184	100	1000	2017	11	03/23/2017	100130	54141	1,100.00	For Fire Testing
Budget Transfer	184	100	1000	2017	11	03/23/2017	100130	54140	(1,100.00)	For Fire Testing
Budget Transfer	184	100	1000	2017	11	03/23/2017	100220	52300	100.00	For janitorial/kitchen supplie
Budget Transfer	184	100	1000	2017	11	03/23/2017	100220	52100	(100.00)	For janitorial/kitchen supplie
Budget Transfer	184	100	1000	2017	11	03/23/2017	100400	50104	900.00	For other wages
Budget Transfer	184	100	1000	2017	11	03/23/2017	100400	50101	(900.00)	For other wages
184 Total									-	
Budget Transfer	185	100	1000	2017	11	03/27/2017	100401	54467	250.00	Annual maint/fitness equipment
Budget Transfer	185	100	1000	2017	11	03/27/2017	100400	54160	(250.00)	Annual maint/fitness equipment
Budget Transfer	185	100	1000	2017	11	03/27/2017	100402	51601	2,000.00	For EMA winter coats
Budget Transfer	185	100	1000	2017	11	03/27/2017	100400	54160	(2,000.00)	For EMA winter coats
Budget Transfer	185	100	1000	2017	11	03/27/2017	100111	54250	1,315.00	For Adobe license renewals
Budget Transfer	185	100	1000	2017	11	03/27/2017	100111	54520	(1,315.00)	For Adobe license renewals
Budget Transfer	185	100	1000	2017	11	03/27/2017	100111	54250	49.00	For Adobe license renewals
Budget Transfer	185	100	1000	2017	11	03/27/2017	100111	52205	(49.00)	For Adobe license renewals
Budget Transfer	185	100	1000	2017	11	03/27/2017	100200	54254	1,000.00	For unplanned website hosting
Budget Transfer	185	100	1000	2017	11	03/27/2017	100200	54250	(1,000.00)	For unplanned website hosting
Budget Transfer	185	100	1000	2017	11	03/27/2017	801512	54399	100.00	Surety bond payment-test lane
Budget Transfer	185	100	1000	2017	11	03/27/2017	801512	54467	(100.00)	Surety bond payment-test lane
Budget Transfer	185	100	1000	2017	11	03/27/2017	100300	54110	1,500.00	Reclass legal budget
Budget Transfer	185	100	1000	2017	11	03/27/2017	100300	54120	(1,500.00)	Reclass legal budget
Budget Transfer	185	100	1000	2017	11	03/27/2017	100600	51100	900.00	FICA underbudgeted
Budget Transfer	185	100	1000	2017	11	03/27/2017	100600	51103	(900.00)	FICA underbudgeted
Budget Transfer	185	100	1000	2017	11	03/27/2017	220552	51600	200.00	For uniforms
Budget Transfer	185	100	1000	2017	11	03/27/2017	220552	51601	(200.00)	For uniforms
Budget Transfer	185	100	1000	2017	11	03/27/2017	220552	52304	900.00	For chemicals and sprays
Budget Transfer	185	100	1000	2017	11	03/27/2017	220552	52314	(900.00)	For chemicals and sprays
Budget Transfer	185	100	1000	2017	11	03/27/2017	220552	52306	500.00	Safety Control Signs
Budget Transfer	185	100	1000	2017	11	03/27/2017	220552	52314	(500.00)	Safety Control Signs
Budget Transfer	185	100	1000	2017	11	03/27/2017	801512	51601	5.00	For safety related uniforms
Budget Transfer	185	100	1000	2017	11	03/27/2017	801512	51600	(5.00)	For safety related uniforms
Budget Transfer	185	100	1000	2017	11	03/27/2017	801512	52311	300.00	For hardware supplies
Budget Transfer	185	100	1000	2017	11	03/27/2017	801512	52402	(300.00)	For hardware supplies

March 2017

[illegible]

CITY OF ST. CHARLES
Budget Revision Listing

March 2017

JE TYPE	JE #	BUDGET #	COMPANY	FISCAL YEAR	PERIOD	DATE	ACCT-UNIT	ACCOUNT	AMOUNT	DESCRIPTION
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The revisions shown herewith have been approved by the City Council, except as noted below.

Chairman, Government Operations Committee

Date


Vice Chairman, Government Operations Committee

Date

Finance Director

Date

Exceptions:

 ST. CHARLES SINCE 1834	AGENDA ITEM EXECUTIVE SUMMARY		Agenda Item number: 4a
	Title:	Recommendation to Approve a Proposal for a New Class B Liquor License for DRM Deli Inc. to be located at 610 E Main Street, St. Charles	
	Presenter:	Chief Keegan, Police Department	
Meeting: Government Operations Committee		Date: April 17, 2017	
Proposed Cost: \$		Budgeted Amount: \$	Not Budgeted: <input type="checkbox"/>
Executive Summary <i>(if not budgeted please explain):</i>			
<p>This is a request for new class B liquor license for DRM Deli Inc. to be located at 610 E Main Street, St. Charles. Operating hours will be from 9:00 a.m. to 6:00 p.m. Monday through Friday; 10:00 a.m. to 4:00 p.m. Saturdays; and 10:00 a.m. to 3:00 p.m. on Sundays; there is no late permit being requested. They will provide fast casual food with hot food prepared, sandwiches, salads, and dessert and coffee as well as European style grocery items throughout the store. They will serve only beer and wine.</p>			
<p>All paper work is in order, background checks have been completed by the Police Department and city staff recommends approval for this application to move forward to the Government Operations Committee meeting.</p>			
<p>Pursuant to posting this item on the Government Operations Committee agenda, the Liquor Commission meeting is scheduled at 4:30 p.m., April 17 (same day) to process this request for a Class B liquor license and to move it forward before this committee, to seek approval so it can go before the May 1, 2017 City Council for final approval.</p>			
Attachments <i>(please list):</i>			
Liquor License Application			
Background Check			
Site Plan			
Menu			
Recommendation/Suggested Action <i>(briefly explain):</i>			
<p>Recommendation to approve a proposal for a new Class B liquor license for DRM Deli Inc. to be located at 610 E Main Street, St. Charles.</p>			

City of St. Charles, Illinois Liquor Control Commissioner

CITY RETAIL LIQUOR DEALER LICENSE APPLICATION

APPLICATION FEE IS NON-REFUNDABLE

Incomplete applications will not be accepted.

Completed applications may be submitted to:

Two East Main Street, St. Charles, IL 60174-1984

Dram Deli Inc

Date Application Received: _____



New Application



Renewal Application

APPLICATION CHECKLIST

Check items to confirm all are attached to this application	Applicant	Office Use Only
Application Fee	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Completed Application for all questions applicable to your business. ✓	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Copy of Lease/Proof of Ownership ✓	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Copy of Dram Shop Insurance or a letter from insurance agent with a proposed quote. ✓	<input type="checkbox"/>	<input type="checkbox"/>
Copy of Articles of Corporation, if applicable. ✓	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Completed B.A.S.S.E.T. (Beverage Alcohol Sellers & Servers Training) form – filled out for all employees. A copy of the B.A.S.S.E.T. certificate is <u>only</u> needed for each manager. It is the business establishment's responsibility to keep copies of all B.A.S.S.E.T. certificates on file for all of their employees. ✓	<input type="checkbox"/>	<input type="checkbox"/>
Copy of Site Plan for Establishment (Drawn to scale including the parking lot, patio, and/or deck, outdoor seating). ✓	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Copy of Floor Plan for Establishment (Drawn to scale and must include the layout of the establishment with tables, chairs, aisles, displays, cash register, bar, and lounge area with dimensions, percentage, and square footage noted for each space). Be sure to also include all <u>fixed</u> objects, such as pool tables, bar stools, vending/amusement machines; as well as all exits. ✓	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Copy of Business Plan, to include: <input checked="" type="checkbox"/> Hours of Operation <input checked="" type="checkbox"/> Copy of Menu <input checked="" type="checkbox"/> Whether or not live music will be played at this establishment <input checked="" type="checkbox"/> Will there be outdoor seating and/or outdoor designated smoking area <input checked="" type="checkbox"/> Do not include a marketing or financial plan with this business plan ✓	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Are any building alterations planned for this site? If not sure, please contact Building & Code Enforcement at 630.377.4406 and/or Fire Prevention Bureau at 630.377.4458 to discuss whether or not a walk-thru and/or permit are necessary for this business. X	<input type="checkbox"/>	<input type="checkbox"/>
All managers have been fingerprinted who are employed by your establishment. When new management is hired, it is imperative you contact the Mayor's office to be fingerprinted so the City's business files are appropriately updated. ✓	<input checked="" type="checkbox"/>	<input type="checkbox"/>

OFFICIAL USE ONLY

☐ Approved* ☐ Denied Date Approved/Denied: _____ Customer Number: _____

Signature of Mayor, Liquor Control Commissioner _____

Date Issued _____

*ISSUANCE OF THIS LICENSE IS CONTINGENT ON MEETING ALL REQUIRED BUILDING AND FIRE DEPARTMENT REQUIREMENTS.

07.05.2016

PROPOSED FLOOR PLAN/LAYOUT OF PROPERTY**Mandatory: attach to this application a floorplan or layout of the proposed facility to include the following:****CLASS B LICENSES**

- | | |
|----|--|
| 1. | Every application for a Class B license, whether an initial application or a renewal application, shall have attached thereto a site drawing of the proposed licensed premises, drawn to scale showing the following (check off once complete):

a. The location of all rooms, segregated areas, including outdoor seating areas and the square footage thereof;

b. The designated use of each room or segregated area (i.e. dining room, holding bar, service bar, kitchen, restrooms, outdoor seating areas, all rooms and segregated areas, including outdoor areas where alcoholic liquor may be served or consumed and all locations where live entertainment may be provided);

c. The proposed seating capacity of rooms or segregated areas where the public is permitted to consume food and/or alcoholic beverages and/or live entertainment may be provided.** |
| 2. | The site drawing is subject to the approval of the Local Liquor Control Commissioner. The Local Liquor Commissioner may impose such restrictions as he deems appropriate on any license by noting the same on the approved site drawing or as provided on the face of the license. |
| 3. | A copy of the approved site drawing shall be attached to the approved license and is made a part of said license. |
| 4. | It shall be unlawful for any Class B licensee to operate and/or maintain the licensed premises in any manner inconsistent with the approved site drawing. |

CLASS C LICENSES

- | | |
|----|--|
| 1. | Every application for a Class C license, whether an initial application or a renewal application, shall have attached thereto a site drawing of the proposed licensed premises, drawn to scale, showing the following (check off once complete):

a. The location of all rooms, segregated areas, including outdoor seating areas and the square footage thereof;

b. The designated use of each room or segregated area (e.g. dining room, holding bar, service bar, kitchen, restrooms, outdoor seating areas, all rooms and segregated areas, including outdoor areas, where alcoholic liquor may be served or consumed and all locations where live entertainment may be provided);

c. The proposed seating capacity of rooms or segregated areas where the public is permitted to consume food and/or alcoholic beverages and/or live entertainment may be provided.** |
| 2. | The site drawing is subject to the approval of the Local Liquor Commissioner. The Local Liquor Commissioner may impose such restrictions as he deems appropriate on any licensee by noting the same on the approved site drawing or as provided on the face of the license. |
| 3. | A copy of the approved site drawing shall be attached to the approved license and is made a part of said license. |
| 4. | It shall be unlawful for any Class C licensee to operate and/or maintain the licensed premises in any manner inconsistent with the approved site drawing. |

****THE FIRE PREVENTION BUREAU WILL FURNISH ALL FINAL, PERMITTED OCCUPANCY NUMBERS FOR THIS LICENSE.**

CORPORATION / PREMISES QUESTIONS

1.	<p>If applicant is an individual or partnership, is each and every person a United States citizen (5.08.070-2)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Is any individual a naturalized citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, print name(s), date(s), and place(s) of naturalization:</p>
2.	List the type of business of the applicant (5.08.070-3):
3.	Number of years of experience for the above listed type of business (5.08.070-4): 3 MONTHS
4.	Amount of merchandise that normally will be in inventory when in operation (5.08.070-5): \$
5.	<p>Location/address and description of business to be operated under this applied for license (5.08.070-6):</p> <p>610 E. MAIN ST ST CHARLES, IL 60174 TO SELL EUROPEAN GOODS AND PREPARED FOODS DAILY DURING 9AM-6PM.</p>
6.	Is the premises owned or leased (5.08.070-6A)? <input type="checkbox"/> Owned <input checked="" type="checkbox"/> Leased
7.	<p>If the premises are leased, list the names and addresses of all direct owners or owners of beneficial interests in any trusts, if premises are held in trust (5.08.070-6B):</p> <p>Name of Building Owner: MELIA LINARDO (KID FAMILY ASSOCIATES)</p> <p>Address of Building Owner: [REDACTED] GENEVA, IL 60134 (LP)</p> <p>Mailing Address of Building Owner (if different):</p> <p>Phone Number: [REDACTED] E-mail Address:</p> <p>Name of Building Owner:</p> <p>Address of Building Owner:</p> <p>Mailing Address of Building Owner (if different):</p> <p>Phone Number: E-mail Address:</p> <p>Name of Building Owner:</p> <p>Address of Building Owner:</p> <p>Mailing Address of Building Owner (if different):</p> <p>Phone Number: E-mail Address:</p>
8.	<p>Does the applicant currently operate, or operated in the past, any other establishment within the City of St. Charles that requires a liquor license? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, please list the business name(s) and address(es):</p>

9.	<p>Does applicant have any outstanding debt with the City of St. Charles, including, but not limited to, utility bills, alcohol tax, and permit fees, for any current or previous establishment owned, operated or managed by the applicant? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, please note the City of St. Charles requires all debt to be paid in full before consideration of a new or renewed liquor license is issued.</p>
10.	<p>Are any improvements planned for the building and/or site that will require a building permit? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, has a building permit been applied for? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, date building permit was applied for with Building & Code Enforcement:</p>
11.	<p>Has applicant applied for a similar or other license on the premises other than the one for which this license is sought (5.08.070-7)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, what was the disposition of the application? Explain as necessary:</p>
12.	<p>Has applicant (and all persons listed on page 1 of this application) ever been convicted of a felony under any Federal or State law, or convicted of a misdemeanor opposed to decency or morality (5.08.070-8)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Is applicant (and all persons listed on page 1 of this application) disqualified from receiving a liquor license by reason of any matter contained in Illinois State law and/or City of St. Charles Municipal Ordinances? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
13.	<p>List previous liquor licenses issued by any State Government or any subdivision thereof (5.08.070-9). Use additional paper if necessary.</p> <p>Government Unit:</p> <p>Date: Location, City/State:</p> <p>Special Explanations:</p> <p>Government Unit:</p> <p>Date: Location, City/State:</p> <p>Special Explanations:</p>
14.	<p>Have any liquor licenses possessed ever been revoked (5.08.070-9)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, list all reasons on a separate, signed letter accompanying this application.</p> <p>Has any director, officer, shareholder, or any of your managers, ever been denied liquor license from any jurisdiction?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, proceed to Question 15. If more space is needed, please attach a separate sheet of paper with the information.</p>

15.	<p>Complete ONLY if yes was answered to the questions above (14):</p> <p>Name: _____ Name of Business: _____</p> <p>Position with the Business: _____</p> <p>Date(s) of Denial: _____</p> <p>Reason(s) for Denial of License: _____</p>
16.	<p>Date of Incorporation (Illinois Corporations) (5.08.070-10): <u>9/1/2016</u></p> <p>Date qualified under Illinois Business Corporation Act to transact business in Illinois (Foreign Corporation): <u>9/1/2016</u></p>
17.	<p>Has the applicant and all designated managers read and do they all understand and agree not to violate any liquor laws of the United States, the State of Illinois, and any of the ordinances of the City of St. Charles in conducting business (5.08.070-11)?</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Have you, or in the case of a corporation, the local manager, or in the case of a partnership any of the partners, ever been convicted of any violation of any law pertaining to alcoholic liquor? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Have you, or in the case of a corporation the local manager, or in the case of a partnership any of the partners, ever been convicted of a felony? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Have you ever been convicted of a gambling offense? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If a partnership or corporation, include all partners and the local manager(s).)</p> <p>Will you and all your employees refuse to serve or sell alcoholic liquor to an intoxicated person or to a minor?</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
18.	<p>Mandatory: All individual owners, partners, officers, directors, and/or persons holding directly or beneficially more than five (5) percent in interest of the stock of owners by interest listed on page 1 of this application must be fingerprinted by the City of St. Charles Police Department (5.08.070-A12).</p> <p>Has this been done? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, date(s): _____</p>
19.	<p>Mandatory: Has the applicant attached proof of Dram Shop Insurance to this application or already furnished it to the City of St. Charles (5.08.060)? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If already furnished, date of delivery: _____</p> <p>NOTE: Insurance must be issued from May 1, 20XX – April 30, 20XX in accordance with City code 5.08.060. Request a prorated rate from your insurance company if you are applying for a new license during this timeframe.</p>

20. **Mandatory:** Is the premises within 100 feet of any real property of any church; school; hospital; home for the aged or indigent persons; home for veterans, their wives/husbands, or children; and/or any military or naval station [5.08.230)?

☐ Yes ☒ No

COMMENTS/ADDITIONAL INFORMATION

B.A.S.S.E.T. TRAINING

Please list employees required to have B.A.S.S.E.T. training on this page – include all managers, assistant managers, bartenders, and clerks who are permitted to make alcoholic liquor sales. Include copies of certificates for managers only and mark Manager if applicable. Add another page, if needed.

Name: (First) (Last) (Middle) Manager
Home Street Address:
City, State, Zip:
Date of Course: Place Course was Taken:
Birthdate: Certificate Granted: Expiration:

Name: (First) (Last) (Middle) Manager
Home Street Address:
City, State, Zip:
Date of Course: Place Course was Taken:
Birthdate: Certificate Granted: Expiration:

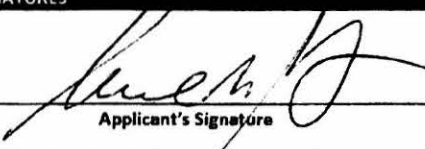
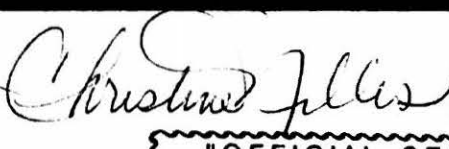

Name: (First) (Last) (Middle) Manager
Home Street Address:
City, State, Zip:
Date of Course: Place Course was Taken:
Birthdate: Certificate Granted: Expiration:

Name: (First) (Last) (Middle) Manager
Home Street Address:
City, State, Zip:
Date of Course: Place Course was Taken:
Birthdate: Certificate Granted: Expiration:

NEW MANAGEMENT REQUIREMENTS

Whenever a new manager comes on board, the City must be notified and that person must be fingerprinted.

It is the business establishment's responsibility to keep copies of all B.A.S.S.E.T. certificates on file for their employees.

APPLICATION FOR LATE NIGHT PERMIT	
SUPPLEMENTAL TO LIQUOR LICENSE FOR CLASS B/C	
To: St. Charles Liquor Control Commission	Date:
I now possess or have applied for a liquor license Class	
Applicant's Name:	
Name of Business:	
Business Address:	
Business Phone:	
SUPPLEMENTAL PERMIT APPLIED FOR	
Payment of Late Night Permit fee is required at the time the permit is issued.	
<input type="checkbox"/> 1:00 a.m. Late Night Permit – fee of \$800.00	
<input type="checkbox"/> 2:00 a.m. Late Night Permit – fee of \$2,300.00	
NOTE: Other permits that may be available upon request include: <ul style="list-style-type: none">• Class E – Special Event License (1 to 3-day event @ \$100.00 per day)• Outdoor Dining Permit (Contact Community & Economic Development @ 630.372.4443)	
SIGNATURES	
 Applicant's Signature	
 3/28/17	
<input type="checkbox"/> Liquor Commissioner hereby directs City Clerk to issue permit indicated above.	
	
Liquor Commissioner's Signature	Date

ADDENDUM TO RETAIL LIQUOR LICENSE APPLICATION

To be completed by the City of St. Charles Police Department

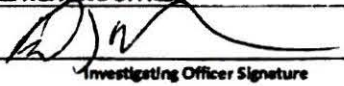
Date: 04/10/17	Name of Applicant: DANIEL R. MIGO
Name of Business: DRM DELI, INC.	
Address of Business: 610 E. MAIN ST	Ward Number: 4

To Liquor Control Commissioner, City of St. Charles, Illinois

Pursuant to the provision of the City of St. Charles Municipal Code, Chapter 5.08, Alcoholic Beverages, the following guide shall be in effect for the investigation of an applicant for a Retail Dealer's Liquor License:

1.	Date on which applicant will begin selling retail alcoholic liquors at this location: 8/1/17
2.	Is the location within 100 feet of any church; school; hospital; home for the aged or indigent persons; home for veterans, their wives/husbands or children; or any military or naval station? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
3.	<p>If the answer to question 2 is yes, answer the following: Is applicant's place of business a hotel offering restaurant service, a regularly organized club, a restaurant, a food shop, or other place where the sale of alcoholic liquors is not the principal business? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No N/A</p> <p>If yes, answer a, b and c:</p> <p>a. State the kind of such business:</p> <p>b. Give date on which applicant began the kind of business named at this location:</p> <p>c. Has the kind of business designated been established at this location for such purpose prior to February 1, 1934, and carried on continuously since such time by either the applicant or any other person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No N/A</p>
4.	<p>If premises for which an alcoholic liquor license is herein applied for are within 100 feet of a church, have such premises been licensed for the sale of alcoholic liquor at retail prior to the establishment of such church? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No N/A</p> <p>If yes, have the premises been continuously operated and licensed for the sale of alcoholic liquor at retail since the original alcoholic liquor license was issued therefore? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No N/A</p>
5.	Is the place for which the alcoholic liquor license is sought a dwelling house, flat, or apartment used for residential purposes? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
6.	Is there any access leading from premises to any other portion of the same building or structure used for dwelling or lodging purposes and which is permitted to be used or kept accessible for use by the public? (Connection between premises and such other portion of building or structure as is used only by the applicant, his/her family and personal guests not prohibited.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
7.	<p>If applicant conducts or will conduct in the same place any other class of business in addition to that of City Retailer of Alcoholic Liquor, state the kind and nature of such business: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Restaurant</p>

8.	Are all rooms where liquor will be sold for consumption on the premises continuously lighted during business hours by natural light or artificial white light so that all parts of the interior shall be clearly visible? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
9.	Are premises located in any building belonging to or under the control of the State of Illinois or any other political subdivision thereof, such as county, city, etc.? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
10.	Are the premises for which license is herein applied for a store or place of business where the majority of customers are minors of school age or where the principal business transacted consists of school books, school supplies, food or drinks for such minors? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
11.	It is required by the City of St. Charles that all employees undergo BASSET training. Provide a copy of the certificate of training completion for each manager. All certificates for managers have been submitted: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
12.	From your observation and investigation, has applicant to the best of your knowledge truthfully answered all questions? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If no, state exceptions:
	Have all persons named in this application been fingerprinted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
13.	Fingerprinted by: CSO BRETER #397 Date: 3/28/17
14.	Other necessary data:

SIGNATURES	
ENDORSEMENTS AND APPROVALS	
INVESTIGATING OFFICER	
	316 / CMPD
Investigating Officer Signature	Badge Number & Rank
ENDORSEMENT OF THE CHIEF OF POLICE	
Recommend Issuing Liquor License: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Signature Of Chief of Police	Date

ENDORSEMENT OF THE LIQUOR CONTROL COMMISSIONERRecommend Issuing: ☐ Yes ☐ No Date: _____

Comments

Liquor Commissioner**ENDORSEMENT OF THE FIRE CHIEF**Recommend Issuing: ☐ Yes ☐ No Date: _____

Comments:

Fire Chief**ENDORSEMENT OF THE BUILDING COMMISSIONER**Recommend Issuing: ☐ Yes ☐ No Date: _____

Comments:

Zoning Classification: _____
Building Commissioner**ENDORSEMENT OF THE FINANCE DIRECTOR**Recommend Issuing: ☐ Yes ☐ No Date: _____

Comments:

Finance Director**APPROVAL OF THE CITY COUNCIL**Approved for Issuing: ☐ Yes ☐ No Vote: Ayes _____ Nays __________
Attested to by City Clerk Date: _____

Police Department



Memo

Date: 4/12/2017

To: The Honorable Ray Rogina, Mayor-Liquor Commissioner

From: James Keegan, Chief of Police

Re: Background Investigation-DRM Deli

The purpose of this memorandum is to document and forward to your attention the results of the background investigation conducted by members of the St. Charles Police Department concerning the above mentioned establishment.

As is customary procedure, a detective was assigned this investigation and reviewed both the site location/floor plans and the corresponding application and applicant.

We found nothing of a derogatory nature that would preclude either the site location or the applicant from moving forward with both liquors sales and on-site consumption, subject to City Council approval.

Thank you in advance for your consideration in this matter.

Class B Request (beer & wine):

610 E. Main Street

1. WALLS PER WALL CONSTRUCTION TYPE AS SPECIFIED BELOW
 OPTION BEARING: ONE COAT BENHAYMO MOISTURE LATENT GULF
 DRY COAT 12311, COLOR WHITE OR APPROVED (EQAL)
 2. CEILING PER TRUSSES, CEILING WHITE OR APPROVED (EQAL)
 3. FLOOR PER TRUSSES, CEILING WHITE OR APPROVED (EQAL)
 4. MECHANICAL RETAINING WALLS PER MECHANICAL RETAINING WALLS
 FACTORY APPLIED STANDARD FINISH OR APPROVED (EQAL)

P-1 BENHAYMO MOISTURE LATENT GULF MOISTURE LATENT GULF (EQAL)
 COLOR WHITE LATENT OR APPROVED (EQAL)

P-2 BENHAYMO MOISTURE LATENT GULF MOISTURE LATENT GULF (EQAL)
 COLOR WHITE LATENT OR APPROVED (EQAL)

P-3 BENHAYMO MOISTURE LATENT GULF MOISTURE LATENT GULF (EQAL)
 COLOR WHITE LATENT OR APPROVED (EQAL)

P-4 CLEAN AND PREP EXISTING FLOOR IN PREPARATION FOR
 2 COATS DRY COAT FLOOR PAINT VERTI MAXIMIZER LIGHT
 COLOR

5. PAINT BASE
 6. WALL COAT BASE COLOR BLACK OR WHITE TO COMPLEMENT

DRM Cafe & Delicatessen Menu

610 E. Main Street in Saint Charles (630) 940-2882

www.drmeurocafe.com and www.drmdelistcharlesil.com

M-F 9-6 p.m.
SAT 10-4 p.m.
SUN 10-3 p.m.

DRM's chefs prepare fresh soups, salads, and hot lunch entree items daily

Cup of Soup \$1.99
Bowl of Soup \$2.99
32 Oz Carton of Soup \$4.99

8 Oz Side Salad \$2.99
16 Oz Side Salad \$4.99

Small buffet entrée \$9.00-Served between 11:00 am-2:00 pm

*Includes one protein, one starch, and one vegetable (hot or cold)

Large buffet entrée \$11.00-Served between 11:00am-2:00pm

*Includes two proteins, one starch, and one vegetable (hot or cold)

The Ali (Kid's Meal) \$5.50-Ask for availability

A fresh, preservative-free veal hot dog, served with a side of cucumber salad or chips, a warm piece of "puffy" bread, juice box, and a sweet treat

The Izzy (Kid's Meal) \$5.50-Served between 11:00am-2:00pm with the hot buffet

A piece of chicken schnitzel cut in pieces and served with a side of cucumber salad or chips, a warm piece of "puffy" bread, juice box, and a sweet treat

The Alex (Kid's Meal) \$5.50

A warm ham and cheese sandwich on white bread with a side of cucumber salad or chips, juice box, and a sweet treat

Add extra chips for \$1.00

Add fountain drink for \$1.75 (free refills)

Hot Beverages

***DRM proudly serves Lavazza Coffee**

Café Americano \$2.00 cup *includes a refill / espresso \$1.75 / cappuccino \$2.75/ latte \$2.75/ mocha \$3.00/ chai tea or pumpkin latte \$2.75

Add a Hot Tea \$1.50

Variety of tea bags, imported syrups, and imported honey for mixing unique blends

DRM CAFÉ Sandwiches \$8.50

(All sandwiches are offered with a cup of soup or side salad or chips)

Sandwich Service is Monday-Friday from 9:00-5:00pm, Saturday from 10:00-3:30pm

DRM Polish Sausage

warm smoked polish Kielbasa on a white roll, topped with sauerkraut, caramelized onions, and spicy mustard

Baked Ham off the Bone

baked ham off the bone, on a fresh baked white roll and layered with a mild white cheese, dressed with horseradish mayo, lettuce, tomato, red onion, and topped with a sliced hard-boiled egg

Turkey & Swiss

smoked turkey breast layered with Swiss cheese on a freshly baked white roll, dressed with mayo lettuce, tomato, pickle, and red onion

DRM Reuben (Smoked Ham or Corned Beef)

a warm serving of polish smoked ham or Corned Beef, layered with sauerkraut, Podlaski cheese on a Polish rye bread, horseradish mayo, Russian dressing, mustard and polish dill pickle

Roast Beef

warmed roast beef with melted Provolone cheese on a freshly baked white roll, with horseradish mayo, topped with lettuce, tomato, red onion. May add caramelized onions, pickled peppers and sautéed mushrooms.

Salami

Hungarian Salami layered with provolone cheese on a white roll, dressed with mayo, mustard, lettuce, tomato, pickled peppers.

Zapiekanka

sautéed mushroom and onion on a white roll, layered with melted cheese...add sautéed pepper and polish sausage

Pastrami

a generous portion of shaved pastrami, warmed and layered with melted Swiss cheese on Polish rye bread and dressed with mustard, lettuce, pickle, and sauerkraut

Schnitzel- Served only between 11:00am-2:00pm with the hot buffet

a warm cutlet of breaded chicken or pork tenderloin on a white roll and dressed with mayo, lettuce, tomato, mustard, pickled peppers and red onion...add caramelized onions, sautéed mushrooms, and melted cheese

Make your Own

build your own sandwich with your choice of meat, cheese, bread (Polish rye, white roll, lettuce wrap, or gluten free bread), and with your selection of condiments including mayo, mustard, lettuce, tomato, dill pickle, onion and pickled peppers

Mahan, Erik

Business Plan

Subject: FW: Liquor license

From: Daniel Migo [<mailto:drmigo@yahoo.com>]

Sent: Wednesday, April 12, 2017 10:52 AM

To: Mahan, Erik

Subject: RE: Liquor license

Sir,

Please accept the following business plan for DRM proposal for the liquor license:

We are an Eastern European Cafe and Delicatessen offering a variety of imported foods and beverages from Poland, Germany, Lithuania and various other countries of origin. We would like expand our product line and offer beer and wine options from the countries mentioned earlier as part of a traditional and cultural experience.

Thank you,

Dan Migo

Owner

[Sent from Yahoo Mail on Android](#)

**AGENDA ITEM EXECUTIVE SUMMARY**

Agenda Item number: 4b

Title:

Recommendation to Approve a Proposal for a Class B liquor License Application for New Owners to take over Taste of Himalayas located at 110 N 3rd Street, St. Charles

Presenter:

Chief Keegan, Police Department

Meeting: Government Operations Committee

Date: April 17, 2017

Proposed Cost: \$

Budgeted Amount: \$

Not Budgeted: ☐**Executive Summary** (*if not budgeted please explain*):

This is a request for a class B liquor license for Taste of Himalayas located at 110 N 3rd Street, St. Charles. This is a long standing St. Charles restaurant of which the current owner has decided to sell this business to new owners who are seeking this license. Everything about the current business operations will remain the same and no late permit is being requested.

All paper work is in order, background checks have been completed by the Police Department and city staff recommends approval for this application to move forward to the Government Operations Committee meeting.

Pursuant to posting this item on the Government Operations Committee agenda, the Liquor Commission meeting is scheduled at 4:30 p.m., April 17 (same day) to process this request for a Class B liquor license and to move it forward before this committee, to seek approval so it can go before the May 1, 2017 City Council for final approval.

Attachments (*please list*):

Liquor License Application
Background Check
Site Plan
Menu

Recommendation/Suggested Action (*briefly explain*):

Recommendation to approve a proposal for a Class B liquor license application for new owners to take over Taste of Himalayas located at 110 N 3rd Street, St. Charles.

City of St. Charles, Illinois Liquor Control Commissioner
CITY RETAIL LIQUOR DEALER LICENSE APPLICATION
APPLICATION FEE IS NON-REFUNDABLE



Incomplete applications will not be accepted.

Completed applications may be submitted to:

Two East Main Street, St. Charles, IL 60174-1984

Date Application Received: _____ ☒ New Application ☐ Renewal Application

APPLICATION CHECKLIST

Check items to confirm all are attached to this application	Applicant	Office Use Only
Application Fee	<input type="checkbox"/>	<input type="checkbox"/>
Completed Application for all questions applicable to your business.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Copy of Lease/Proof of Ownership	<input type="checkbox"/>	<input type="checkbox"/>
Copy of Dram Shop Insurance or a letter from insurance agent with a proposed quote.	<input type="checkbox"/>	<input type="checkbox"/>
Copy of Articles of Corporation, if applicable.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Completed B.A.S.S.E.T. (Beverage Alcohol Sellers & Servers Training) form – filled out for all employees. A copy of the B.A.S.S.E.T. certificate is only needed for each manager . It is the business establishment's responsibility to keep copies of all B.A.S.S.E.T. certificates on file for all of their employees.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> 1 of 2
Copy of Site Plan for Establishment (Drawn to scale including the parking lot, patio and/or deck, outdoor seating).	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Copy of Floor Plan for Establishment (Drawn to scale and must include the layout of the establishment with tables, chairs, aisles, displays, cash register, bar, and lounge area with dimensions, percentage, and square footage noted for each space). Be sure to also include all fixed objects , such as pool tables, bar stools, vending/amusement machines; as well as all exits .	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Copy of Business Plan, to include: <input checked="" type="checkbox"/> Hours of Operation <input checked="" type="checkbox"/> Copy of Menu <input checked="" type="checkbox"/> Whether or not live music will be played at this establishment <input checked="" type="checkbox"/> Will there be outdoor seating and/or outdoor designated smoking area <input checked="" type="checkbox"/> Do not include a marketing or financial plan with this business plan	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Are any building alterations planned for this site? If not sure, please contact Building & Code Enforcement at 630.377.4406 and/or Fire Prevention Bureau at 630.377.4458 to discuss whether or not a walk-thru and/or permit are necessary for this business.	<input type="checkbox"/>	<input type="checkbox"/>
All managers have been fingerprinted who are employed by your establishment. When new management is hired, it is imperative you contact the Mayor's office to be fingerprinted so the City's business files are appropriately updated.	<input type="checkbox"/>	<input checked="" type="checkbox"/>

OFFICIAL USE ONLY

☐ Approved* ☐ Denied Date Approved/Denied: _____ Customer Number: _____

Signature of Mayor, Liquor Control Commissioner _____

Date Issued _____

***ISSUANCE OF THIS LICENSE IS CONTINGENT ON MEETING ALL REQUIRED BUILDING AND FIRE DEPARTMENT REQUIREMENTS.**

07.05.2016

APPLICANT INFORMATION

A. Type of Business: <input type="checkbox"/> Individual <input type="checkbox"/> Partnership <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Other (explain):			
B. Business Name: TASTE OF HIMALAYAS (PARENT CORPORATION: TBX FOODS, LLC)			
C. Business Address: 110 N 3 RD ST SAINT CHARLES IL 60174			
D. IL Tax ID Number: 82-0723550	E. Business Phone: 331-333-0150	F. Business E-mail: jay.gulati@hotmail.com	G. Business Website: www.tasteofhimalayas.com
H. Contact Person: ABHISHEK GULATI		I. Title: PRESIDENT	J. Phone No.: [REDACTED]
K. If Corporation, Corporation Name: TBX FOODS, LLC			
L. Corporation Address (city, state, zip code): 1611 SOUTHRIDGE TRAIL ALGONQUIN IL 60102			

BUSINESS ESTABLISHMENT LOCATION INFORMATION

A. Type of Establishment: <input type="checkbox"/> Package <input checked="" type="checkbox"/> Restaurant <input type="checkbox"/> Tavern <input type="checkbox"/> Hotel/Banquet/Arcade/Q-Center <input type="checkbox"/> Other					
B. Address applying for liquor license (exact street address): 110 N 3 RD ST SAINT CHARLES IL 60174		C. Number of Parking Spaces: 5	D. Outside Dining s.f. [17.20.020-R]: ~ 750 sq ft	E. Holding Bar s.f. [5.08.010-F]: ~ 100 sq ft	
F. Total Building s.f.:	G. Total Number of Seats:	H. Number of Bar Seats:	I. Sale Counter s.f.:	J. Live Entertainment Area s.f. [5.08.010-H]:	
K. Kitchen s.f.:	L. Cooler s.f.:	M. Dry Storage s.f.:	N. Seating Area s.f.:	O. Retail/public Area s.f.:	P. Service Bar s.f. [5.08.010-O]:
Q. Brief Business Plan description based on type of establishment listed above: GRANDFATHERED FROM PREVIOUS APP					

MANAGER INFORMATION

Full Name, include middle initial: KRISHNA P CHITTURI		Title: MANAGER	
Birthdate: 12/20/60	Birthplace: VIJAYAWADA, INDIA	Driver's License#: [REDACTED]	Phone: [REDACTED]
Home Address: [REDACTED] BOLLINGBROOK IL			
Full Name, include middle initial:		Title:	
Birthdate:	Birthplace:	Driver's License#:	Home Phone:
Home Address:			
Full Name, include middle initial:		Title:	
Birthdate:	Birthplace:	Driver's License#:	Home Phone:
Home Address:			

PROPOSED FLOOR PLAN/LAYOUT OF PROPERTY**Mandatory: attach to this application a floorplan or layout of the proposed facility to include the following:****CLASS B LICENSES**

- | | |
|----|--|
| 1. | Every application for a Class B license, whether an initial application or a renewal application, shall have attached thereto a site drawing of the proposed licensed premises, drawn to scale showing the following (<i>check off once complete</i>): <ul style="list-style-type: none">a. The location of all rooms, segregated areas, including outdoor seating areas and the square footage thereof;b. The designated use of each room or segregated area (i.e. dining room, holding bar, service bar, kitchen, restrooms, outdoor seating areas, all rooms and segregated areas, including outdoor areas where alcoholic liquor may be served or consumed and all locations where live entertainment may be provided);c. The proposed seating capacity of rooms or segregated areas where the public is permitted to consume food and/or alcoholic beverages and/or live entertainment may be provided.** |
| 2. | The site drawing is subject to the approval of the Local Liquor Control Commissioner. The Local Liquor Commissioner may impose such restrictions as he deems appropriate on any license by noting the same on the approved site drawing or as provided on the face of the license. |
| 3. | A copy of the approved site drawing shall be attached to the approved license and is made a part of said license. |
| 4. | It shall be unlawful for any Class B licensee to operate and/or maintain the licensed premises in any manner inconsistent with the approved site drawing. |

CLASS C LICENSES

- | | |
|----|--|
| 1. | Every application for a Class C license, whether an initial application or a renewal application, shall have attached thereto a site drawing of the proposed licensed premises, drawn to scale, showing the following (<i>check off once complete</i>): <ul style="list-style-type: none">a. The location of all rooms, segregated areas, including outdoor seating areas and the square footage thereof;b. The designated use of each room or segregated area (e.g. dining room, holding bar, service bar, kitchen, restrooms, outdoor seating areas, all rooms and segregated areas, including outdoor areas, where alcoholic liquor may be served or consumed and all locations where live entertainment may be provided);c. The proposed seating capacity of rooms or segregated areas where the public is permitted to consume food and/or alcoholic beverages and/or live entertainment may be provided.** |
| 2. | The site drawing is subject to the approval of the Local Liquor Commissioner. The Local Liquor Commissioner may impose such restrictions as he deems appropriate on any licensee by noting the same on the approved site drawing or as provided on the face of the license. |
| 3. | A copy of the approved site drawing shall be attached to the approved license and is made a part of said license. |
| 4. | It shall be unlawful for any Class C licensee to operate and/or maintain the licensed premises in any manner inconsistent with the approved site drawing. |

****THE FIRE PREVENTION BUREAU WILL FURNISH ALL FINAL, PERMITTED OCCUPANCY NUMBERS FOR THIS LICENSE.**

CORPORATION / PREMISES QUESTIONS

1.	<p>If applicant is an individual or partnership, is each and every person a United States citizen (5.08.070-2)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Is any individual a naturalized citizen? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, print name(s), date(s), and place(s) of naturalization:</p>
2.	<p>List the type of business of the applicant (5.08.070-3): RESTAURANT & BAR</p>
3.	<p>Number of years of experience for the above listed type of business (5.08.070-4): 3 YEARS</p>
4.	<p>Amount of merchandise that normally will be in inventory when in operation (5.08.070-5): \$ 20,000</p>
5.	<p>Location/address and description of business to be operated under this applied for license (5.08.070-6):</p> <p>110 N 3RD ST SAINT CHARLES IL 60174 NEPALI/INDIAN RESTAURANT & BAR</p>
6.	<p>Is the premises owned or leased (5.08.070-6A)? <input type="checkbox"/> Owned <input checked="" type="checkbox"/> Leased</p>
7.	<p>If the premises are leased, list the names and addresses of all direct owners or owners of beneficial interests in any trusts, if premises are held in trust (5.08.070-6B):</p> <p>SAME AS PREVIOUS APPLICATION - GRANDFATHERED</p> <p>Name of Building Owner:</p> <p>Address of Building Owner:</p> <p>Mailing Address of Building Owner (if different):</p> <p>Phone Number: E-mail Address:</p> <p>Name of Building Owner:</p> <p>Address of Building Owner:</p> <p>Mailing Address of Building Owner (if different):</p> <p>Phone Number: E-mail Address:</p> <p>Name of Building Owner:</p> <p>Address of Building Owner:</p> <p>Mailing Address of Building Owner (if different):</p> <p>Phone Number: E-mail Address:</p>
8.	<p>Does the applicant currently operate, or operated in the past, any other establishment within the City of St. Charles that requires a liquor license? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, please list the business name(s) and address(es):</p>

15.	<p>Complete ONLY if yes was answered to the questions above (14):</p> <p>Name: _____ Name of Business: _____</p> <p>Position with the Business: _____</p> <p>Date(s) of Denial: _____</p> <p>Reason(s) for Denial of License: _____</p>
16.	<p>Date of Incorporation (Illinois Corporations) (5.08.070-10): MARCH 8th 2017</p> <p>Date qualified under Illinois Business Corporation Act to transact business in Illinois (Foreign Corporation): MARCH 8th 2017</p>
17.	<p>Has the applicant and all designated managers read and do they all understand and agree not to violate any liquor laws of the United States, the State of Illinois, and any of the ordinances of the City of St. Charles in conducting business(5.08.070-11)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Have you, or in the case of a corporation, the local manager, or in the case of a partnership any of the partners, ever been convicted of any violation of any law pertaining to alcoholic liquor? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Have you, or in the case of a corporation the local manager, or in the case of a partnership any of the partners, ever been convicted of a felony? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Have you ever been convicted of a gambling offense? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If a partnership or corporation, include all partners and the local manager(s).)</p> <p>Will you and all your employees refuse to serve or sell alcoholic liquor to an intoxicated person or to a minor? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
18.	<p>Mandatory: All individual owners, partners, officers, directors, and/or persons holding directly or beneficially more than five (5) percent in interest of the stock of owners by interest listed on page 1 of this application must be fingerprinted by the City of St. Charles Police Department (5.08.070-A12).</p> <p>Has this been done? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, date(s): 4/10/17</p>
19.	<p>Mandatory: Has the applicant attached proof of Dram Shop Insurance to this application or already furnished it to the City of St. Charles (5.08.060)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If already furnished, date of delivery: _____</p> <p>NOTE: Insurance must be issued from May 1, 20XX – April 30, 20XX in accordance with City code 5.08.060. Request a prorated rate from your insurance company if you are applying for a new license during this timeframe.</p>

20. **Mandatory:** Is the premises within 100 feet of any real property of any church; school; hospital; home for the aged or indigent persons; home for veterans, their wives/husbands, or children; and/or any military or naval station (5.08.230)?

☐ Yes ☒ No

COMMENTS/ADDITIONAL INFORMATION

B.A.S.S.E.T. TRAINING

Please list employees required to have B.A.S.S.E.T training on this page – include all managers, assistant managers, bartenders, and clerks who are permitted to make alcoholic liquor sales. Include copies of certificates for managers only and mark Manager if applicable. Add another page, if needed.

Name: KRISHNA CHITTURI PRASAD
(First) (Last) (Middle) Manager
Home Street Address: [REDACTED]
City, State, Zip: BOLINGBROOK IL 60490
Date of Course: 03/07/2017 Place Course was Taken: 360TRAINING.COM
Birthdate: [REDACTED] Certificate Granted: 03/07/2017 Expiration: 03/08/2018

Name: (First) (Last) (Middle) Manager
Home Street Address:
City, State, Zip:
Date of Course: Place Course was Taken:
Birthdate: Certificate Granted: Expiration:

Name: (First) (Last) (Middle) Manager
Home Street Address:
City, State, Zip:
Date of Course: Place Course was Taken:
Birthdate: Certificate Granted: Expiration:

Name: (First) (Last) (Middle) Manager
Home Street Address:
City, State, Zip:
Date of Course: Place Course was Taken:
Birthdate: Certificate Granted: Expiration:

NEW MANAGEMENT REQUIREMENTS

Whenever a new manager comes on board, the City must be notified and that person must be fingerprinted.

It is the business establishment's responsibility to keep copies of all B.A.S.S.E.T. certificates on file for their employees.

APPLICATION FOR LATE NIGHT PERMIT**SUPPLEMENTAL TO LIQUOR LICENSE FOR CLASS B/C****To: St. Charles Liquor Control Commission**

Date: 04/05/17

I now possess or have applied for a liquor license Class

Applicant's Name:

Name of Business:

Business Address:

Business Phone:

N/A

SUPPLEMENTAL PERMIT APPLIED FOR**Payment of Late Night Permit fee is required at the time the permit is issued.**☐ 1:00 a.m. Late Night Permit – fee of \$800.00☐ 2:00 a.m. Late Night Permit – fee of \$2,300.00**NOTE:** Other permits that may be available upon request include:

- Class E – Special Event License (1 to 3-day event @ \$100.00 per day)
- Outdoor Dining Permit (Contact Community & Economic Development @ 630.377.4443)

SIGNATURES_____
Applicant's Signature☐ Liquor Commissioner hereby directs City Clerk to issue permit indicated above._____
Liquor Commissioner's Signature_____
Date

ADDENDUM TO RETAIL LIQUOR LICENSE APPLICATION

To be completed by the City of St. Charles Police Department

Date: 04/05/2017

Name of Applicant: KRISHNA P CHITTURI

Name of Business: TBX FOODS, LLC DBA TASTE OF HIMALAYAS

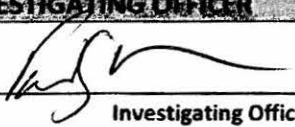
Address of Business: 110 N 3RD ST SAINT CHARLES IL 60174

Ward Number:

To Liquor Control Commissioner, City of St. Charles, Illinois

Pursuant to the provision of the City of St. Charles Municipal Code, Chapter 5.08, Alcoholic Beverages, the following guide shall be in effect for the investigation of an applicant for a Retail Dealer's Liquor License:

1.	Date on which applicant will begin selling retail alcoholic liquors at this location: JULY 1ST 2017
2.	Is the location within 100 feet of any church; school; hospital; home for the aged or indigent persons; home for veterans, their wives/husbands or children; or any military or naval station? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
3.	<p>If the answer to question 2 is yes, answer the following: Is applicant's place of business a hotel offering restaurant service, a regularly organized club, a restaurant, a food shop, or other place where the sale of alcoholic liquors is not the principal business? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p style="text-align: center;">N/A</p> <p>If yes, answer a, b and c:</p> <p>a. State the kind of such business:</p> <p>b. Give date on which applicant began the kind of business named at this location:</p> <p>c. Has the kind of business designated been established at this location for such purpose prior to February 1, 1934, and carried on continuously since such time by either the applicant or any other person?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p style="text-align: center;">N/A</p>
4.	<p>If premises for which an alcoholic liquor license is herein applied for are within 100 feet of a church, have such premises been licensed for the sale of alcoholic liquor at retail prior to the establishment of such church? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, have the premises been continuously operated and licensed for the sale of alcoholic liquor at retail since the original alcoholic liquor license was issued therefore? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p style="text-align: center;">N/A</p>
5.	Is the place for which the alcoholic liquor license is sought a dwelling house, flat, or apartment used for residential purposes? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
6.	Is there any access leading from premises to any other portion of the same building or structure used for dwelling or lodging purposes and which is permitted to be used or kept accessible for use by the public? (Connection between premises and such other portion of building or structure as is used only by the applicant, his/her family and personal guests not prohibited.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
7.	<p>If applicant conducts or will conduct in the same place any other class of business in addition to that of City Retailer of Alcoholic Liquor, state the kind and nature of such business: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p style="text-align: center;">RESTAURANT</p>

8.	Are all rooms where liquor will be sold for consumption on the premises continuously lighted during business hours by natural light or artificial white light so that all parts of the interior shall be clearly visible? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
9.	Are premises located in any building belonging to or under the control of the State of Illinois or any other political subdivision thereof, such as county, city, etc.? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
10.	Are the premises for which license is herein applied for a store or place of business where the majority of customers are minors of school age or where the principal business transacted consists of school books, school supplies, food or drinks for such minors? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
11.	It is required by the City of St. Charles that all employees undergo BASSET training. Provide a copy of the certificate of training completion for each manager. All certificates for managers have been submitted: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
12.	<p>From your observation and investigation, has applicant—to the best of your knowledge—truthfully answered all questions?</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If no, state exceptions:</p>
13.	<p>Have all persons named in this application been fingerprinted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Fingerprinted by: <u>CSO Brewer #397</u> Date: <u>041017</u></p>
14.	Other necessary data:
SIGNATURES	
ENDORSEMENTS AND APPROVALS	
INVESTIGATING OFFICER	
 Investigating Officer Signature	<u>346 / CMAR.</u> Badge Number & Rank
ENDORSEMENT OF THE CHIEF OF POLICE	
Recommend Issuing Liquor License: <input type="checkbox"/> Yes <input type="checkbox"/> No	
_____ Signature Of Chief of Police	_____ Date

ENDORSEMENT OF THE LIQUOR CONTROL COMMISSIONERRecommend Issuing: ☐ Yes ☐ No Date: _____

Comments

Liquor Commissioner**ENDORSEMENT OF THE FIRE CHIEF**Recommend Issuing: ☐ Yes ☐ No Date: _____

Comments:

Fire Chief**ENDORSEMENT OF THE BUILDING COMMISSIONER**Recommend Issuing: ☐ Yes ☐ No Date: _____

Comments:

Zoning Classification: _____
Building Commissioner**ENDORSEMENT OF THE FINANCE DIRECTOR**Recommend Issuing: ☐ Yes ☐ No Date: _____

Comments:

Finance Director**APPROVAL OF THE CITY COUNCIL**Approved for Issuing: ☐ Yes ☐ No Vote: Ayes _____ Nays _____

Date: _____

Attested to by City Clerk

Police Department



Memo

Date: 4/12/2017
To: The Honorable Ray Rogina, Mayor - Liquor Commissioner
From: James Keegan, Chief of Police
Re: Background Investigation – Taste of Himalayas

The purpose of this memorandum is to document and forward to your attention the results of the background investigation conducted by members of the St. Charles Police Department concerning the above mentioned establishment.

As you are aware, this site has operated as a longstanding St. Charles restaurant. Recently, the ownership group has decided to sell their business and the new owners are seeking a liquor license.

The site location/floor plans and the corresponding application materials were reviewed by my staff. We found nothing of a derogatory nature that would preclude either the site location or the applicants from moving forward with an on-site consumption license, subject to City Council approval.

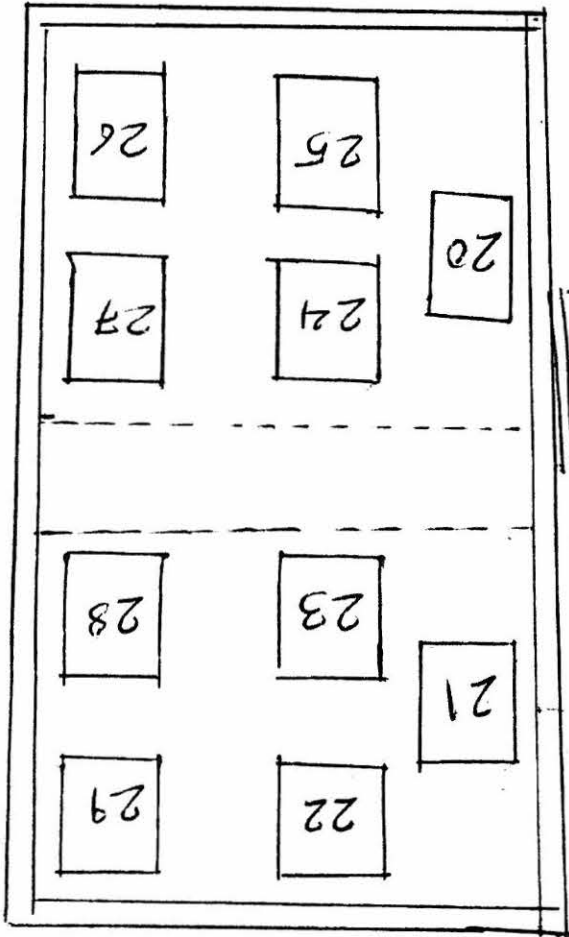
Thank you in advance for your consideration in this matter.

Class B Request

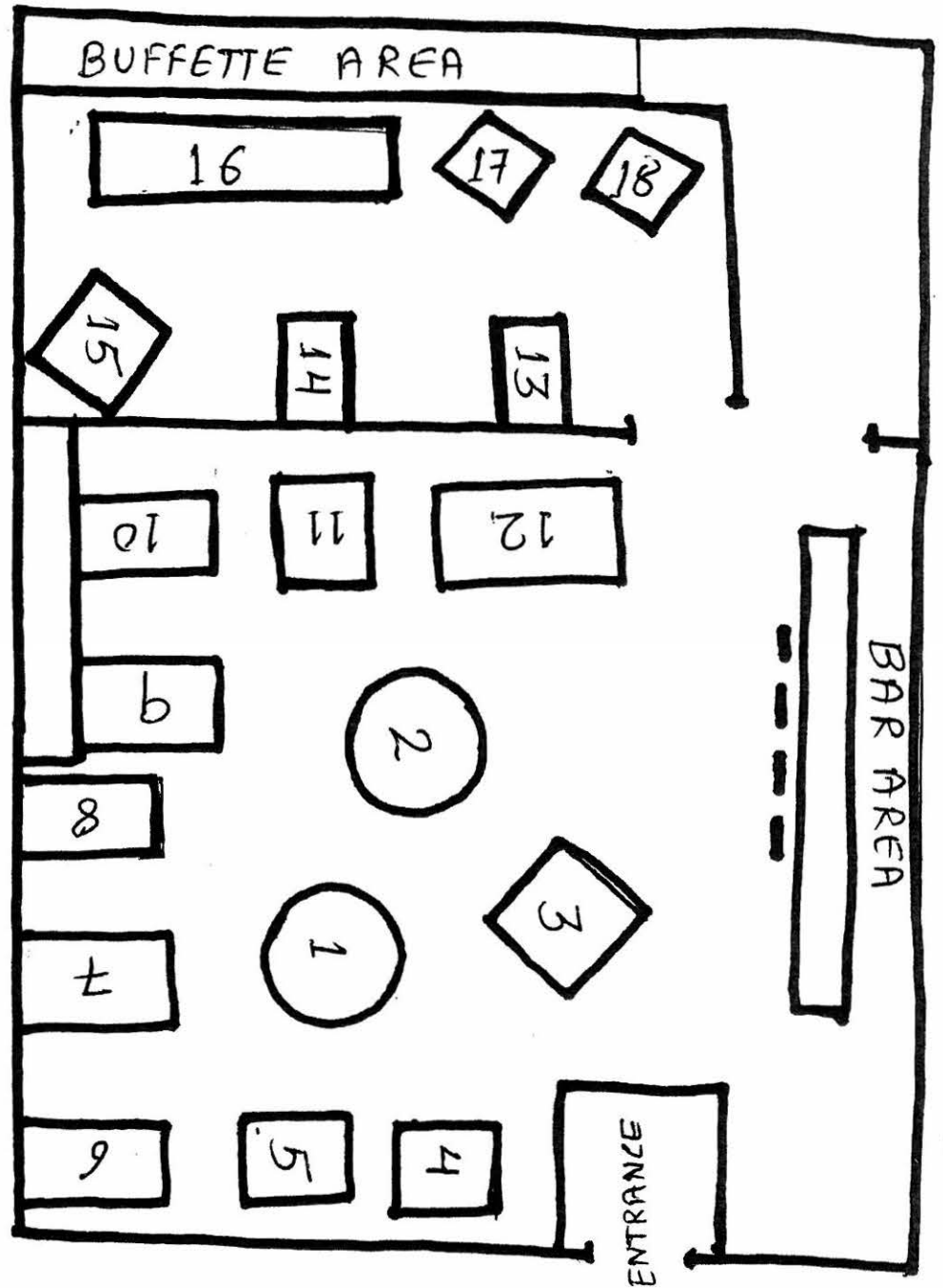
110 N. 3rd Street

Taste of Himalayas
Restaurant & Bar

110 North 3rd street,
St. Charles, IL 60174
Phone: 630-444-1575
www.tasteofhimalayas.com



PATIO-SEATING



TASTE OF HIMALAYAS

- * Keep a copy of this notice in your permanent records. **This notice is issued only one time and the IRS will not be able to generate a duplicate copy for you.** You may give a copy of this document to anyone asking for proof of your EIN.
- * Use this EIN and your name exactly as they appear at the top of this notice on all your federal tax forms.
- * Refer to this EIN on your tax-related correspondence and documents.

If you have questions about your EIN, you can call us at the phone number or write to us at the address shown at the top of this notice. If you write, please tear off the stub at the bottom of this notice and send it along with your letter. If you do not need to write us, do not complete and return the stub.

Your name control associated with this EIN is TBXF. You will need to provide this information, along with your EIN, if you file your returns electronically.

Thank you for your cooperation.

CP 575 B (Rev. 7-2007)

Return this part with any correspondence
so we may identify your account. Please
correct any errors in your name or address.

CP 575 B

999999999999

Your Telephone Number Best Time to Call
() -

DATE OF THIS NOTICE: 03-08-2017
EMPLOYER IDENTIFICATION NUMBER: 82-0723550
FORM: SS-4 NOBOD

INTERNAL REVENUE SERVICE
CINCINNATI OH 45999-0023

TBX FOODS LLC
 ABHISHEK GULATI MBR
 1611 SOUTHRIDGE TRL
 ALGONQUIN, IL 60102



HOME ABOUT US OUR MENU TESTIMONIALS GALLERY FEEDBACK CONTACT US

Our Menu

[Download PDF](#)

Vegetarian Appetizers

1. Vegetable Samosa (2 pieces).....\$3.99
Crispy pastry stuffed with green peas, potatoes, fresh coriander leaves with mild spice and herbs.
2. Paneer Pakora.....\$6.99
Homemade cottage cheese cubes marinated in our mild spice dipped in batter of chickpeas flour and deep fried.
3. Chilli Pakora.....\$5.99
Finger chilli peppers dipped in a chick peas flour with our own spices and herbs than deep fried.
4. Mixed vegetable Pakora.....\$5.99
Fresh assorted vegetables deeped with mild spices chick peas flour and deep fried
5. Chef's Special assorted Appetizer (for 2 People).....\$11.99
Assortments of fresh vegetable pakora, samosa, chilli pakora and paneer pakora .

Non - Vegetarian Appetizers

6. Keema Samosa(2 pieces).....\$5.99
Crispy pastry stuffed with minced lamb, peas, fresh coriander leaves with mild spice and herbs.
7. Chicken Pakora.....\$7.99
Mildly spice of boneless chicken pieces dipped in batter and deep fried.
8. Tandoori mixed Grill (For 2 people).....\$19.99
A mixed platter of our chosen tandoori presentations which includes chicken tikka, shish kabab, tandoori



Lunch (Buffet)

Tuesday-Friday
11:30 am - 2:30 pm

Saturday - Sunday
12:00 pm - 3:00 pm

Dinner ((A la Carte)

Tuesday-Saturday
5:00 pm - 10:00 pm

Sunday
5:00 pm - 9:00 pm

* Restaurant closed on Monday

chicken, malayi kabab and tandoori shrimp, served on hot sizzling platter.

9. Chicken Mo Mo (Nepali style Appetizer).....\$9.99
Minced chicken mixed with our own Nepalese spices stuffed in a thin flour wrap, steamed and served with Nepali chutney.
10. Chhoela from Himalayas (Nepali style Appetizer).....\$10.99
Boneless chicken marinated with our own Nepalese style and roasted in a clay oven, served with touch of fresh ginger, garlic, onion & cilantro.
11. Khashi ko Bhutuwa (Nepali style Appetizer).....\$11.99
Boneless goat meat cubes stir fried with Nepalese spices and herbs, Garnished with cilantro.
12. Chilli Chicken Dry (Nepali style Appetizer).....\$10.99
Fried Marinated Boneless Chicken stir fried with green peppers, onions and Nepalese spices and herbs. It's our own perfection

Accompaniments

13. Himalayas Garden Salad.....\$5.99
Fresh garden salad with cucumbers, carrots, tomatoes and lettuce garnished with cilantro and serve with our own dressing raita
14. Mixed Raita.....\$2.99
Chilled homemade yogurt blended with cucumber and garnished with roasted cumin seeds and fresh cilantro.

Tandoori Specialties

Tandoor is a barrel shaped Indian clay oven which is used for roasting lamb, chicken, sea foods and baking breads with fired charcoal or a gas at a temperature of 600 degrees (approximately). Tandoori foods are low in Cholesterol, which recommended for all. All tandoori items serve on hot sizzling platter.

15. Achari Chicken (Nepali style dish).....\$16.99
Tender bite size of boneless chicken cubes marinated with blended pickle and seasoning spice in a sour base and roasted in clay oven.
16. Tandoori Chicken (Full - Half).....\$17.99 / \$9.99
The tastiest way to clay oven whole or half chicken marinated in blended yogurt and seasoning spice and herbs to its perfection.
17. Chicken Tikka.....\$16.99
Tender bite size of boneless chicken cubes marinated in blended yogurt and mild spices roasted in clay oven.
18. Chicken Malayi Kabab.....\$16.99
Tender boneless chicken cubes marinated in a low fat sour cream and our mild spices, roasted to get perfect taste.
19. Reshmi Kabab.....\$16.99
Minced white chicken supreme marinated in a low fat sour cream, light Indian spices and cooked in clay oven to its perfection.
20. Shish Kabab.....\$18.99
Minced lamb with our own combination of herbs and spices, roasted in a clay oven.
21. Lamb Tikka.....\$19.99
Boneless cubes of tender lamb marinated in blended yogurt, garlic, and ginger with mild spices and roasted in a clay oven.
22. Tandoori Prawn.....\$24.99
Finest jumbo shrimp marinated with mild spices and cooked in a clay oven.
23. Tandoori Mixed (Chef's special for 2 people)..... \$26.99
An assortment of tandoori chicken, chicken tikka, reshmi kabab, shish kabab, lamb tikka Malayi Kabab and tandoori shrimp serve on hot sizzling platter.

Poultry Dishes (Includes Basmati Rice)

24. Chicken Curry.....\$12.99
Boneless chicken cooked with a delicately spiced curry sauce.
25. Chicken Makhani (Mild).....\$14.99
Tandoori boneless chicken cooked with creamy tomato sauce, butter and mild spices.

26. Chicken Tikka Masala (Mild).....\$14.99
Marinated boneless chicken roasted & cooked with delicious sauce, garnished with ginger & Cilantro
27. Chicken Palak (Mild).....\$14.99
Tender boneless chicken cooked with fresh spinach (Saag) in a rich blend of north Indian spices.
28. Chicken Korma (Mild).....\$14.99
Boneless pieces of chicken cooked in a rich and delicious almond flavored creamy sauce.
29. Chicken chilli Masala (Hot).....\$13.99
Boneless chicken pieces cooked with green chilli, onions and hot Indian spices.
30. Chicken Vindaloo (Hot).....\$13.99
Delicious combination of chicken and potatoes sautéed with cumin seeds, onion, cilantro and cooked with fiery south Indian delight.
31. Chicken Jalfrazie.....\$13.99
Marinated chicken sautéed with fresh green vegetables, garnished with ginger, cilantro, spices and herbs.
32. Kukhura ko Masu (Nepali style dish).....\$12.99
Bone in chicken cooked with typical Nepalese village style spices and herbs.

Lamb Dishes (Includes Basmati Rice)

33. Lamb Curry.....\$14.99
Tender lamb cubes cooked in a traditional flavorful curry sauce.
34. Keema Matter.....\$14.99
Minced lamb meat cooked with green peas, chopped onions, tomatoes, ginger and Indian spices, garnished with fresh cilantro.
35. Lamb Tikka Masala (Mild).....\$15.99
Tandoori roasted boneless lamb cubes cooked with our chef's special creamy sauce.
36. Lamb Pasanda (Mild).....\$15.99
Tender pieces of boneless lamb meat cooked with rich creamy sauce and garnished with saffron, nuts and herbs.
37. Lamb Palak (Mild).....\$15.99
Boneless pieces of lamb cooked with fresh spinach (Saag) and Indian sauce, garnished with ginger.
38. Lamb Vindaloo (Hot).....\$14.99
Delicious combination of boneless lamb and potatoes sautéed with onion, cumin seeds, cilantro and cooked with fiery South Indian delight.
39. Lamb Rogan Josh.....\$14.99
Tender lamb pieces cooked in traditional Indian spices and a saffron flavored gravy sauce.
40. Khasi ko Masu (Nepali style dish).....\$13.99
Bone in goat meat cooked with traditional Nepalese village style spices and herbs.

From The Fresh Water (Includes Basmati Rice)

41. Jhinge machha ko Tarkari (Nepali style dish).....\$19.99
Carefully seasoned shrimp with an exotic blend of Himalayas curry sauce.
42. Shrimp Chilli Masala (Hot).....\$19.99
Seasonal shrimp cooked with fresh green chilli and rich sauce, with touch of garlic and ginger.
43. Tandoori Prawn Masala (Mild).....\$22.99
Clay oven roasted jumbo shrimp cooked in a very special mild seasoned sauce.
44. Shrimp Madras (Hot).....\$19.99
Seasonal shrimp cooked in a medium spicy gravy sauce along with coconut flavor.

Fresh from the Garden (Includes Basmati Rice)

45. Matter Paneer (Mild).....\$13.99
Fresh Homemade cottage cheese cooked with green peas, tomatoes, ginger, garlic and creamy mild sauce
46. Palak Paneer (Mild).....\$13.99
Delicately flavored spinach cooked with fresh homemade cottage cheese, garnished with chopped ginger, an exotic delight.

47. Paneer Makhani (Mild).....\$13.99
Fresh homemade cottage cheese cooked with our chef's delightful tomatoes creamy sauce.
48. Dal Makhani (Mild).....\$11.99
Delicately assorted whole lentils beans cooked with creamy sauce and garnished with garlic and herbs.
49. Aloo Gobhi.....\$11.99
Fresh cauliflower and potatoes cooked with seasoned perfection, garnished with fresh cilantro along with ginger.
50. Chana Masala.....\$11.99
Delicious chickpeas cooked in an exotic blend of north Indian spices and herbs, garnish with cilantro.
51. Jeera Aloo.....\$11.99
Potatoes simmered with cumin seeds, onion, ginger, tomatoes and garlic, spiced with exotic mixed masala.
52. Bhindi Masala.....\$11.99
Fresh Okra sautéed with onions, tomatoes and north Indian spices and herbs
53. Baigan Bharta (Mild).....\$12.99
Tender, mashed eggplant blended with onions, tomatoes and green peas, cooked to richness of the spices
54. Himalayas Vegetable Korma (Mild).....\$12.99
Combination of fresh garden vegetable mix cooked with mild blended cashew nut sauce.
55. Palungo Ko Saag (Nepali style dish).....\$11.99
Fresh garden spinach cooked with chopped tomatoes, onions, garlic and ginger to get real Nepalese taste.
56. Jhane Ko Dal (Nepali style dish).....\$11.99
Yellow lentils cooked to perfection in a traditional wok with own Nepalese spices and herbs.
57. Himalayas Vegetable Kofta.....\$12.99
Fresh home made cottage cheese mixed with garden vegetable formed in ball and cooked with fresh blended tomatoes and gravy sauce.
58. Bhuteko Cauli (Nepali style dish).....\$11.99
Fresh garden cauliflower sautéed with very own Nepalese herbs and spices, garnished with cilantro and ginger.
59. Himalayas Mix Vegetables.....\$11.99
Baby potatoes cooked with fresh garden peas, cut beans, lima beans along with tender carrots.

Basmati Rice Specialties

60. Steam Basmati.....\$4.99
Fine quality long grained basmati rice especially imported from India.
61. Pulav Rice.....\$5.99
Saffron Rice with fresh garden peas and cumin seeds.
62. Vegetable Biryani (It's a meal by itself).....\$13.99
Basmati rice and fresh vegetables flavored with saffron and cooked with a special sauce.
63. Chicken Biryani (It's a meal by itself).....\$15.99
Aromatic basmati rice mixed with boneless chicken, cooked with delicately spiced including saffron, exotic sauce and herbs.
64. Lamb Biryani (It's a meal by itself).....\$17.99
Aromatic basmati rice mixed with boneless lamb, cooked with delicately spiced including saffron, exotic sauce and herbs.
65. Prawn Biryani (It's a meal by itself).....\$18.99
Basmati rice mixed with shrimp, cooked with mild Indian spices on low heat to rich real flavored and taste.
66. Chef's Special Biryani (It's a meal by itself).....\$19.99
Combination of chicken, lamb and shrimp cooked with our own chef's special spices and sauce.
67. Khasi ko Biryani (Nepali style dish).....\$15.99
Pure basmati rice with bone in goat meat, richly flavored with saffron and cooked in aromatic Nepalese Style spices.

68. Kukhura ko Biryani (Nepali style dish).....\$13.99
Pure basmati rice with bone in chicken, richly flavored with saffron and cooked in aromatic Nepalese style apices.
69. Chef's Special Veg-Thali (Nepalese style value meal for 1 person).....\$17.99
A complete combination of vegetarian platter with Vegetable Korma, Garden Spinach, Jhaneko dal, Mix Vegetables, serve with Rice, Roti, Raita and Kheer.
(This item is not available for Carry-out)
70. Chef's Special Non Veg-Thali (Nepalese style value meal for 2).....\$30.99
A complete combination of non vegetarian platter with Chicken tikka, Lamb tikka, Tandoori chicken, Khasi ko masu, Kukhura ko masu, Jhaneko dal serve with Rice, Roti, Raita, Salad and Kheer.
(This item is not available for Carry-out)

Freshly Tandoori Baked Breads

71. Tandoori Naan.....\$2.99
Popular Indian style soft flour bread baked on the wall lining of the clay oven.
72. Tandoori Roti.....\$2.99
Traditional Indian wheat bread baked in our clay oven.
73. Garlic Naan.....\$3.99
Naan made from refined flour with a subtle touch of garlic.
74. Tandoori Paratha.....\$3.99
Multi-layered wheat bread cooked in our clay oven and garnished with pure butter.
75. Garlic And Basil Naan.....\$3.99
Naan made from refined flour with a subtle touch of garlic and basil.
76. Onion Kulcha.....\$3.99
Soft flat bread stuffed with freshly chopped onion and cilantro, baked in our clay oven.
77. Aloo Paratha.....\$3.99
Whole wheat bread stuffed with mashed potatoes, green peas, cilantro and spices.
78. Poori (2 pieces).....\$3.99
Tender and puffy wheat bread deep fried in pure vegetable oil, it gets great taste with chana masala.
79. Bhatoora.....\$2.99
Soft leavened and fermented bread deep fried in pure vegetable oil, it gets great test with chana masala.
80. Bread Basket.....\$16.99
Assortments of Naan, Roti, Garlic naan, Paratha and Onion kulcha.

Sweets and Desserts

81. Kheer (Nepali style Dessert).....\$2.99
Aromatic basmati rice pudding, sprinkled with almond and pistachios.
82. Kulfi (Indian Ice Cream)\$2.99
Traditional home made Indian ice cream, your choice of Mango or Pistachios.
83. Gulab Jamun.....\$3.99
Golden fried milk pastry ball dumplings in sweet hot saffron syrup and serve hot.
84. Gajar Halwa.....\$2.99
Grated carrots cooked gently in milk and generously sprinkled with nuts and serve hot.

Kids Friendly Meal

85. Chicken tender fried pakora, Butter chicken, Rice, A Dessert and choice of juice or soda, Very mild food for all kids, Yummy they will love it.....\$7.99
(This item is not available for Carry-out)
86. Macaroni & Cheese meal, Which includes A dessert and choice of juice or soda. It's very healthy and favorite food for all Kids.....\$6.99
(This item is not available for Carry-out)

Chef's Creations

Kadai Specials

Your choice of meat or sea food cooked with onions, chopped tomatoes, bell peppers and chefs special sauce.

Chicken..... \$14.99

Lamb.....\$15.99

Shrimp.....\$19.99

Pudina Masala Specials

Your choice of meat or sea food cooked with mint, tomatoes and onions base gravy sauce

Chicken..... \$14.99

Lamb.....\$15.99

Shrimp.....\$19.99

Danshak Specials

Your choice of meat or sea food cooked with yellow lentils and masala sauce

Chicken..... \$14.99

Lamb.....\$15.99

Shrimp.....\$19.99

* Our goal is to provide all varieties of food with in this menu, but if you don't see anything you like to have it please feel free to ask with our manager and we will try to accommodate you.

* Gratuity of 18% will be charge on your total bill if the party is five or more.

* Don't forget our all you can eat lunch buffet six days a week. If you want to order Ala Carte during lunch hours please feel free to ask our server. We are here to accommodate all your needs as we can.

Thank you for your co-operation and support towards us.

Prices and Menu Items are subject to change without prior notice

We Do Catering For Any Occasion. Please inquire with the Manager for more details.

We Accept All major Credit Cards

**AGENDA ITEM EXECUTIVE SUMMARY**

Agenda Item number: 4c

Title:

Recommendation to Approve an Outdoor Patio Permit for Vintage 53 located at 162 S 1st Street, Unit C

Presenter:

Chief Keegan, Police Department

Meeting: Government Operations Committee

Date: April 17, 2017

Proposed Cost: \$

Budgeted Amount: \$

Not Budgeted:

☐**Executive Summary** (*if not budgeted please explain*):

Vintage 53 has recently opened their business on 1st Street and has been graciously accepted into the neighborhood with his fine wines and craft beers; along with a light menu of flatbreads, salads, cheese and charcuterie, and desserts. Mr. Grado is here tonight requesting permission to have an outdoor patio located on public property boundaries outside of his business.

A copy of the permit request to the City is attached.

Pursuant to posting this item on the Government Operations Committee agenda, the Liquor Commission meeting is scheduled at 4:30 p.m., April 17 (same day) to process this request for an outdoor patio and to move it forward before this committee, to seek approval so it can go before the May 1, 2017 City Council for final approval.

Attachments (*please list*):

Application

Recommendation/Suggested Action (*briefly explain*):Recommendation to approve an Outdoor Patio Permit for Vintage 53 located at 162 S 1st Street, Unit C.

CITY OF ST. CHARLES
Annual Application
Sidewalk Cafe, Food Cart & Sidewalk Sign in Public Places



DIVISION: Building & Code Enforcement

PHONE: (630) 377-4406

FAX: (630) 443-4638

Application Date: 4/14/17 **Parcel No.** _____ **Permit No.** _____

PLEASE PRINT ALL INFORMATION

Property Address: 162 S. 1st Street

Name of Business at this location: Vintage 53

I hereby apply for permission to place the following on public property: (check all that apply)

- | | |
|---|---|
| <input type="checkbox"/> Sign | <input checked="" type="checkbox"/> Enclosure fencing |
| <input checked="" type="checkbox"/> Tables & Chairs | <input type="checkbox"/> Food cart(s) |
| <input type="checkbox"/> Table Umbrellas | <input type="checkbox"/> Other: _____ |

Note: Applicants are responsible for any permits required by the Illinois Department of Transportation (IDOT) for locations within the state right of way (Routes 64, 25, & 31).

Check List for Submittal of Application:

- ☐ Annual Permit Application – Completely Filled Out.
- ☐ Two-2 Copies of site plan with dimensions showing:
 - Sidewalk/walkway/plaza width & length
 - Building wall & entrance
 - Light poles, benches & trash containers
 - Trees & tree grates
 - Bicycle racks & newspaper boxes
 - Proposed location of tables, chairs, food cart & sign
- ☐ Certificate of Worker's Compensation Insurance (as and if required by Illinois Statutes) – required when service is provided to customers in public places.
- ☐ Certificate of Comprehensive General Liability Insurance, with limits of at least \$2-million per occurrence and for any single injury, naming the City of St. Charles as co-insured or additional insured.
- ☐ Sidewalk Sign - \$30.00 annual fee
- ☐ Sidewalk Café/Food Cart CBD-1 Zoning District - \$50.00 annual fee
- ☐ Sidewalk Café – First Street TIF District - \$50.00 annual fee (1st Application)
- ☐ Sidewalk Café – First Street TIF District - \$25.00 annual fee (2nd Application)

Owner of the Property:

Name: First Street Development II, LLC

Address: 409 Illinois Ave

City/State/Zip Code: St. Charles, IL 60174

Telephone NO. 630-443-9393

Applicant:

Name: Mario Grado

Address: 450 S. 1st Street

City/State/Zip Code: St. Charles, IL 60174

Telephone NO. 630-536-4560

If approved, this permit allows for the use of the public sidewalk, walkway or plaza contiguous to the business at the above address for the uses indicated above, as shown on the approved site plan. **I understand and acknowledge** that this permit constitutes a revocable license for the use of public property. **I have read and agree to fully abide by** the requirements of this permit and of Section 12.04.102 and 12.04.104 of the St. Charles Municipal Code.

I further agree to indemnify and defend the City from and against any and all injuries, deaths, losses, damages, claims, suits, liabilities, judgments, costs and expenses, consequential or otherwise, including reasonable attorney's fees, which may in any way arise out of or be connected with the granting of this permit or which may in any way result therefrom, or from any act or failure to act by me, my agents or employees.

PRINT NAME: Mario Grado SIGNATURE: [Signature]

AUTHORIZED SIGNATURE OF PROPERTY OWNER: [Signature]
(if different from Applicant)

REPORT OF BUILDING OFFICIAL

Remarks: _____

Sidewalk Sign valid through December 31 _____ (year)

Sidewalk Café/Food Cart CBD-1 Zoning District valid April 1 through October 31 of _____ (year)

☐ Sidewalk Café – First Street TIF District (1st Application) April 15th through July 23rd of _____ (year) or
2nd application July 24th through October 31st _____ (year) (100 days or less)

Accepted: _____ Rejected: _____ Date: _____

Signed: _____

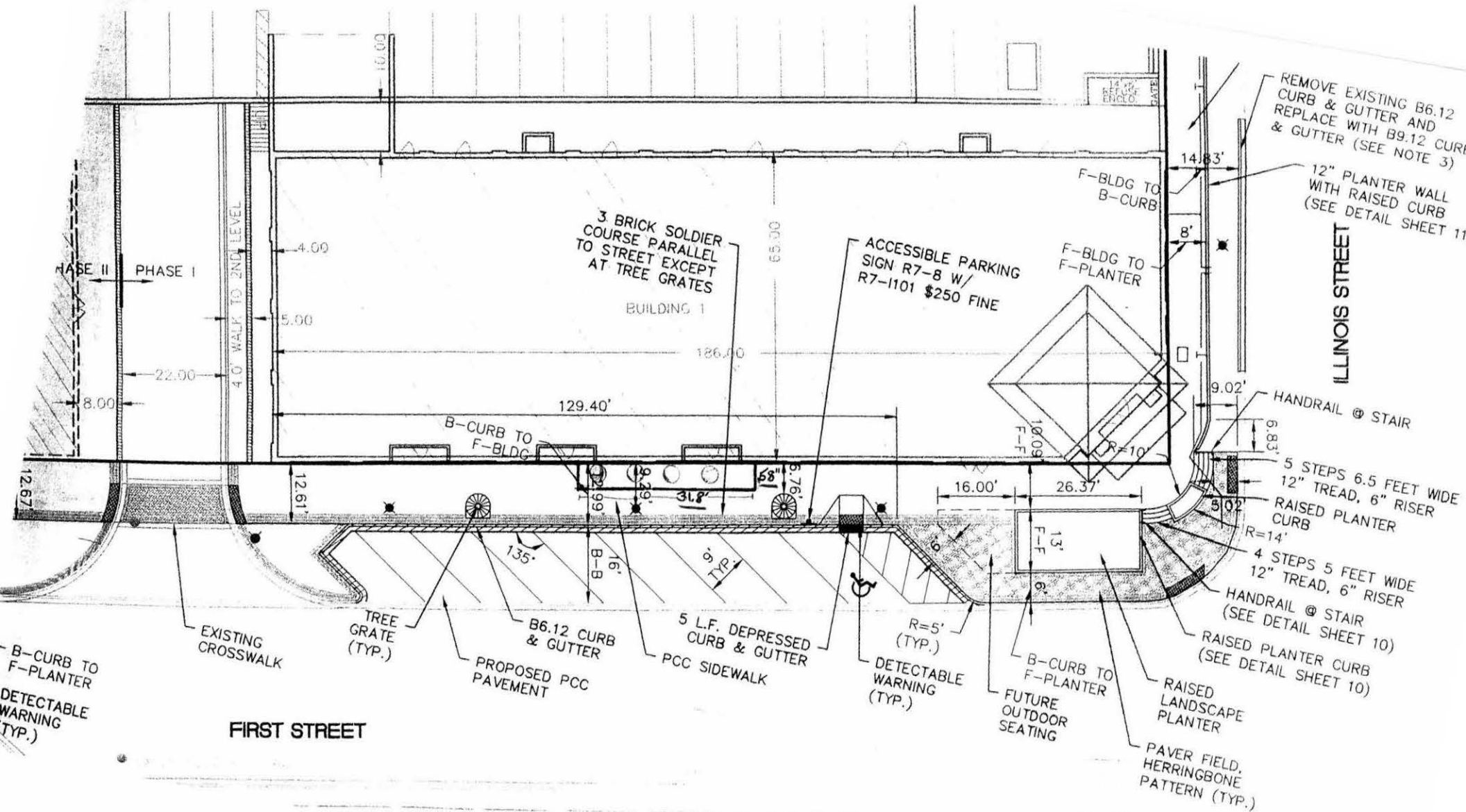
For Office Use

Received 4/14/2017

Fee Paid \$ _____

Receipt # _____

Check # _____





CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
12/19/2016

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an **ADDITIONAL INSURED**, the policy(ies) must be endorsed. If **SUBROGATION IS WAIVED**, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Wine Sergi Insurance 1000 E. Warrenville Road Suite 101 Naperville IL 60563	CONTACT NAME:	
	PHONE (A/C, No, Ext): 630-513-6600	FAX (A/C, No): 630-513-6399
INSURED VINTA01 Vintage53 162 S First St. St. Charles IL 60174	E-MAIL ADDRESS: nicolec@winesergi.com	
	INSURER(S) AFFORDING COVERAGE	
	INSURER A: Northfield Insurance Company	
	INSURER B: Princeton Excess & Surplus	
	INSURER C: Employers Preferred Insurance	
	INSURER D:	
INSURER E:		
INSURER F:		

COVERAGES**CERTIFICATE NUMBER:** 864582016**REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC			WS267415	12/1/2016	12/1/2017	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$100,000 MED EXP (Any one person) \$5,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMP/OP AGG \$2,000,000 \$
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS			WS267415	12/1/2016	12/1/2017	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
B	UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$			82A3FF000169000	12/1/2016	12/1/2017	EACH OCCURRENCE \$2,000,000 AGGREGATE \$ \$
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below Y/N <input type="checkbox"/> N/A			EIG2438290	12/1/2016	12/1/2017	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$1,000,000 E.L. DISEASE - EA EMPLOYEE \$1,000,000 E.L. DISEASE - POLICY LIMIT \$1,000,000
A	Liquor			WS267415	12/1/2016	12/1/2017	\$1,000,000 Ea Cause \$2,000,000 Agg

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

CERTIFICATE HOLDERCity of St. Charles
2 East Main Street
St. Charles IL 60174**CANCELLATION**

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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**AGENDA ITEM EXECUTIVE SUMMARY**

Agenda Item number: 5a

Title:

Recommendation to Approve a Resolution of Official Intent Regarding Capital Expenditures to be Reimbursed from Proceeds of an Obligation to be Issued by the City of St. Charles, Kane and DuPage Counties, Illinois

Presenter:

Chris Minick, Finance Director

Meeting: Government Operations Committee

Date: April 17, 2017

Proposed Cost: N/A

Budgeted Amount: N/A

Not Budgeted: ☐

We are seeking a motion to approve a Resolution of official intent to reimburse the City for costs related to a number of capital projects from bond proceeds. These capital projects, which were approved as part of the Fiscal Year 2017-2018 budget, include: 7th Avenue Creek Improvements (including acquisition of property), continued development of Electric Substation 9, transmission cable replacement, 37th Avenue, and 38th Avenue road reconstruction and Water and Wastewater SCADA enhancements.

This is a housekeeping matter to ensure compliance with IRS debt regulations and that any costs incurred after March 2, 2017 are eligible to be funded from the proceeds of the bond to be issued later this year.

Attachments *(please list):*

Resolution

Recommendation/Suggested Action *(briefly explain):*

Recommendation to approve a Resolution of Official Intent Regarding Capital Expenditures to be Reimbursed from Proceeds of an Obligation to be Issued by the City of St. Charles, Kane and DuPage Counties, Illinois.

City of St. Charles, Illinois
Resolution No. _____

**A Resolution Expressing Official Intent Regarding
Certain Capital Expenditures to be Reimbursed from
Proceeds of an Obligation to be Issued by the City of
St. Charles, Kane and DuPage Counties, Illinois.**

**Presented & Passed by the
City Council on _____ 2017**

WHEREAS, the City of St Charles, Illinois (the "*City*"), has developed a list of capital projects (the "*Projects*") described in Exhibit A hereto; and

WHEREAS, all or a portion of the expenditures relating to the Projects (the "*Expenditures*") (i) have been paid within the sixty (60) days prior to the passage of this Resolution or (ii) will be paid on or after the passage of this Resolution.

WHEREAS, the City reasonably expects to reimburse itself for the Expenditures with the proceeds of an obligation:

NOW, THEREFORE, It is Hereby Resolved by the City Council of the City of St Charles, Kane and DuPage Counties, Illinois, in the exercise of its home rule powers, as follows:

Section 1. The Corporate Authorities hereby find that all of the recitals contained in the preambles to this Resolution are full, true and correct and do incorporate them in this resolution by this reference.

Section 2. The City reasonably expects to reimburse the Expenditures with proceeds of an obligation.

Section 3. The maximum principal amount of the obligation expected to be issued for the Projects is \$6,000,000.

Section 4. All actions of the officers, agents and employees of the City that are in conformity with the purposes and intent of this Resolution, whether taken before or after the adoption hereof, are hereby ratified, confirmed and adopted.

Section 5. This Resolution is made pursuant to Treasury Regulations Section 1.150-2.

Section 6. If any section, paragraph or provision of this Resolution shall be held to be invalid or unenforceable for any reason, the invalidity or unenforceability of such section, paragraph or provision shall not affect any of the remaining provisions of this Resolution.

Section 7. All resolutions or parts thereof in conflict herewith be and the same are hereby repealed and this Resolution shall be in full force and effect forthwith upon its adoption.

Section 8. This Resolution shall be filed immediately in the office of the City Clerk.

PRESENTED to the City Council of the City of St. Charles, Illinois, this 1st day of May 2017.

PASSED by the City Council of the City of St. Charles, Illinois, this 1st day of May 2017.

APPROVED by the Mayor of the City of St. Charles, Illinois, this 1st day of May 2017.

Raymond P. Rogina, Mayor

ATTEST:

CITY CLERK

COUNCIL VOTE:

Ayes:

Nays:

Absent:

Abstain:

APPROVED AS TO FORM:

City Attorney

DATE: _____

EXHIBIT A

DESCRIPTION OF CAPITAL PROJECTS

Costs related to the construction of various street improvements, storm drainage improvements, electric system improvements, water line replacement, wastewater system improvements, municipal building(s) acquisition and/or improvements, riverwall improvements, and software acquisition, including all costs and expenses related to site acquisition and preparation, demolition, design, architecture, engineering and construction.

**AGENDA ITEM EXECUTIVE SUMMARY**

Agenda Item number: 5b

Title:

Recommendation to Approve a Resolution Authorizing an Amendment to the Reserve Policy of the City of St Charles

Presenter:

Chris Minick, Finance Director

Meeting: Government Operations Committee

Date: April 17, 2017

Proposed Cost: N/A

Budgeted Amount: N/A

Not Budgeted: ☐**Executive Summary** (if not budgeted please explain):

Recently, the City Council had requested that staff review the policy regarding appropriate levels of reserves for enterprise funds and recommend any changes deemed appropriate given the recent economic conditions and the significant amount of time that had passed since the last review of this policy. Staff also took the opportunity to review the General Fund reserve policy as part of this analysis.

Reserves are maintained to provide working capital in the short term in the event of unforeseen circumstances/situations that impact the operations of a fund or utility. Revenue shortfalls, emergency repairs, natural disasters, and other system failures are a few of the major factors that reserves are intended to address. The City's current reserve policy is as follows: ***"Maintain available fund balance (working capital) of at least 25% of operating expenditures for the General Corporate Fund and 25-50% for enterprise funds."*** The enterprise portion of this current policy has two weaknesses: 1) Having a range of reserves rather than a minimum threshold promotes confusion as to the level of reserves that should be maintained and 2) The current definition of available fund balance (working capital), does not take into account the City's legally restricted cash that is not available to fund operations. In addition, the General Fund portion of the policy does not take into account that the City funds many of its debt service and general governmental capital projects needs with "transfers out" of the General Fund to the appropriate fund to finance these activities. Staff believes including operating transfers is a more conservative approach to determining a minimum fund balance.

To address the identified shortcomings, staff is recommending the reserve policy be amended as follows: ***"Maintain available fund balance of at least 25% of operating expenditures and interfund transfers out for the General Corporate Fund and net working capital of at least 25% of operating expenses for the enterprise funds. Net working capital shall exclude any restricted current assets prohibited from being expended upon operations."*** The attached Resolution amends the policy to incorporate the staff recommendations.

The enterprise funds that are covered under this policy are the City's three (3) utility funds: Electric, Water and Wastewater. The revised policy eliminates the confusing fund balance range and instead provides a minimum fund balance requirement that is consistent with the General Fund. The 25% minimum is essentially in line with policies established at other municipalities, based on a recent survey of 13 other communities in the Chicago metropolitan area. In addition, the 25% minimum is consistent with the Government Finance Officers Association's (GFOA's) recommended baseline level of 90 days of operating expenses for enterprise funds, or 25% of a year.

Attachments (please list):

Resolution

Recommendation/Suggested Action (briefly explain):

Recommendation to approve a Resolution Authorizing an Amendment to the Reserve Policy of the City of St Charles.

City of St. Charles, Illinois
Resolution No. _____

**A Resolution Authorizing an Amendment to the Reserve Policy of the City of
St Charles**

**Presented and Passed by the
City Council on _____**

WHEREAS, the City of St Charles had previously established a policy for reserves for its major operating funds including the City's General Fund, and Electric, Water, and Sewer utilities; and

WHEREAS, the City Council requested that staff review the Reserve Policy and suggest any relevant changes to the policy to reflect current economic and financial conditions. Any revisions proposed must also be in accordance with best practices and prudent business practices for local governmental units; and

WHEREAS, Staff has reviewed the Reserve Policy, surveyed various area communities to analyze common practices, and reviewed the Government Finance Officer's Association's (GFOA's) recommended policies and practices for Reserve Policies, particularly related to enterprise funds and utilities; and

WHEREAS, the City wishes to amend its Reserve Policy in accordance with prudent business practices and in accordance with GFOA's best practices;

NOW THEREFORE BE IT RESOLVED by the City Council of the City of St. Charles, Kane and DuPage Counties, Illinois, that the City's Reserve Policy is hereby amended as follows:

“Maintain available fund balance ~~(working capital)~~ of at least 25% of operating expenditures and interfund transfers out for the General Corporate Fund and net working capital of at least 25-50% of operating expenses for the enterprise funds. Net working capital shall exclude any restricted current assets prohibited from being expended upon operations.” for enterprise funds.”.

Presented to the City Council of the City of St. Charles, Illinois this ____ day of _____, 2017.

Passed by the City Council of the City of St. Charles, Illinois this ____ day of _____, 2017.

Approved by the Mayor of the City of St. Charles, Illinois this ____ day of _____, 2017.

Mayor

ATTEST:

City Clerk

COUNCIL VOTE:

Ayes: _____

Nays: _____

Abstain: _____

Absent: _____

**AGENDA ITEM EXECUTIVE SUMMARY**

Agenda Item number: 5c

Title:

Recommendation to Approve an Ordinance Authorizing Changes in Rate Structure for the Electric Utility of the City St Charles Effective with Billings Issued After June 1, 2017

Presenter:

Chris Minick, Finance Director

Meeting: Government Operations Committee

Date: April 17, 2017

Proposed Cost: \$N/A

Budgeted Amount: \$

Not Budgeted: ☐**Executive Summary** *(if not budgeted please explain):*

In conjunction with the implementation of the FY 17-18 budget, Staff is seeking approval of the attached Ordinance to enact changes in the utility rate structure. This ordinance reflects the rates utilized in the preparation of the FY 17/18 budget presented to and approved by the City Council on April 3, 2017. The projections and amounts included in the budget presentation are predicated on the rate structure created by the Ordinance attached.

The changes to the rate structures proposed continue the City Council's commitment to assure the long term financial viability and sustainability of the utilities in conjunction with the rate study passed in May of 2011.

If approved as proposed, these rate changes would be effective with bills sent in June.

Attachments *(please list):*

Electric Rate Ordinance

Recommendation/Suggested Action *(briefly explain):*

Recommendation to approve an Ordinance authorizing changes in the rate structure for the Electric Utility for the City of St. Charles effective for billings issued after June 1, 2017.

City of St. Charles, Illinois
Ordinance No. 2017-M-_____

**An Ordinance Amending Title 13 “Public Utilities” Chapter 13.08
“Electricity” of the St. Charles Municipal Code**

NOW, THEREFORE BE IT ORDAINED BY THE CITY COUNCIL OF THE CITY OF
ST. CHARLES, KANE AND DUPAGE COUNTIES, ILLINOIS, AS FOLLOWS:

1. That Title 13 “Public Utilities”, Chapter 13.08 "Electricity," Section 13.08.230 "Rate 1 – Residential – Rates, Charges and Service Requirements." Subsection B, Paragraph 1 and 2, of the St. Charles Municipal Code be and is hereby amended by deleting the same and substituting the following:

13.08.230 Rate 1 - Residential - Rates, Charges and Service Requirements.

B. Charges for this rate shall be as follows:

- 1. Monthly Customer Charge. The net monthly customer charge shall be seventeen dollars and fifty cents (\$17.50) per meter.**
- 2. Energy Charge. The net energy charge shall be as follows:**

Summer Months

\$0.1173 per kilowatt-hour for monthly usage up to 1,200 kilowatt-hours

\$0.1326 per kilowatt-hour for monthly usage over 1,200 kilowatt-hours

Non-summer Months

\$0.1173 per kilowatt-hour for all kilowatt-hours

For purposes hereof, the “summer months” are defined as the electric usage that is billed to the user starting in the month of June and the next four succeeding months.

3. That Chapter 13.08 "Electricity," Section 13.08.240 "Rate 3 – Small General Service – Rates, Charges, and Service Requirements." Subsection B, Paragraph 1 and 2, of the St. Charles Municipal Code be and is hereby amended by deleting the same and substituting the following:

13.08.240 Rate 3 – Small General Service – Rates, Charges, and Service Requirements.

B. Charges for this rate shall be as follows:

- 1. Monthly Customer Charge. The net monthly customer charge shall be fifty-seven dollars and fifty cents (\$57.50) per meter.**

- 2. Energy Charge. Then net energy charge shall be as follows:**

\$0.0954 per kilowatt-hour for all kilowatt-hours

4. That Chapter 13.08 "Electricity," Section 13.08.260 "Rate 5 – General service – Rates, Charges, and Service Requirements," Subsection B, Paragraph 1, 3, and 4, of the St. Charles Municipal Code be and is hereby amended by deleting the same and substituting the following:

13.08.260 Rate 5 - General Service - Rates, Charges, and Service Requirements.

B. Charges for this rate shall be as follows:

- 1. Monthly Customer Charge. The net monthly customer charge shall be seventy dollars (\$70.00) per meter.**

- 3. Demand Charge. The net demand charge shall be as follows:**

\$19.85 per kilowatt

- 4. Energy Charge. The energy charge shall be as follows:
\$0.0612 per kilowatt-hour for all kilowatt-hours**

5. That Chapter 13.08 "Electricity," Section 13.08.265 "Rate 6 – Governmental Outdoor Lighting – Rates, Charges, and Service Requirements," Subsection B, Paragraph 1, and 3, of the St. Charles Municipal Code be and is hereby amended by deleting the same and substituting the following:

13.08.265 Rate 6 – Governmental Outdoor Sports Lighting - Rates, Charges, and Service Requirements.

B. Charges for this rate shall be as follows:

- 1. Monthly Customer Charge. The net monthly customer charge shall be ninety-five dollars (\$95.00) per meter.**

- 3. Energy Charge. The energy charge shall be as follows:
\$0.1785 per kilowatt-hour for all kilowatt-hours**

6. That Chapter 13.08 "Electricity," Section 13.08.275 "Rate 7 – Large General Service – Rates, " Subsection B, Paragraph 1, 3, and 4, of the St. Charles Municipal Code be and is hereby amended by deleting the same and substituting the following:

13.08.275 Rate 7 - Large General Service - Rates, Charges and Service Requirements.

B. Charges for this rate shall be as follows:

- 1. Monthly Customer Charge. The net monthly customer charge shall be two hundred seventy-five dollars (\$275.00) per meter.**
- 3. Demand Charge. The net demand charge shall be as follows:
\$19.85 per kilowatt**
- 4. Energy Charge. The net energy charge shall be as follows:
\$0.0612 per kilowatt-hour On-Peak
\$0.0512 per kilowatt-hour Off-Peak**

7. That Chapter 13.08 "Electricity," Section 13.08.290 "Rate 8 – Municipal Owned Street Lighting and Traffic Signals – Rates, " Subsection B, Paragraph 1 of the St. Charles Municipal Code be and is hereby amended by deleting the same and substituting the following:

13.08.290 Rate 8 – Municipal Owned Street Lighting and Traffic Signals

B. Charges for this rate shall be as follows:

- 1. Energy Charge.
\$0.0775 per kilowatt-hour for all kilowatt-hours**

8. That Chapter 13.08 "Electricity," Section 13.08.292 "Rate 9 – Primary Metered Large General Service – Rates, Charges and Service Requirements. Subsection B, Paragraph 1, 3, 4, and 5 of the St. Charles Municipal Code be and is hereby amended by deleting the same and substituting the following:

13.08.292 Rate 9 – Primary Metered Large General Service – Rates, Charges and Service Requirements

B. Charges for this rate shall be as follows:

- 1. Monthly Customer Charge. The net monthly customer charge shall be two hundred seventy-five dollars (\$275.00) per meter.**
- 3. Demand Charge. The net demand charge shall be as follows:
\$19.65 per kilowatt**
- 4. Energy Charge. The net energy charge shall be as follows:
\$0.0606 per kilowatt-hour On-Peak
\$0.0507 per kilowatt-hour Off-Peak**
- 5. The Definition of On-Peak and Off-Peak Periods:**

Energy On-Peak Periods, for purposes hereof, shall be the hours of 9:00am to 10:00pm on Monday through Friday, except on days on which the following holidays are generally observed: New Year's Day, Memorial Day, Independence Day, Labor Day, Thanksgiving Day and Christmas Day. Energy Off-Peak Periods shall be all other hours.

Demand Peak Periods, for purposes hereof, shall be the hours of 9:00am to 10:00pm on Monday through Friday, except the holidays designated above. Demand Off-Peak Periods shall be all other hours.

9. That this Ordinance shall be in full force and effect ten (10) days from and after its passage, approval and publication in pamphlet form as provided by law; provided, however, that the rates set forth herein shall be effective for the first billing subsequent to June 1, 2017.

10. That after the adoption and approval hereof this Ordinance shall (i) be printed or published in book or pamphlet form, published by the authority of the Council, or (ii) within thirty (30) days after the adoption and approval hereof, be published in a newspaper published in and with a general circulation within the City of St. Charles.

PRESENTED to the City Council of the City of St. Charles, Kane and DuPage Counties, Illinois, this 17th day of April, 2017.

PASSED by the City Council of the City of St. Charles, Kane and DuPage Counties, Illinois, this 17th day of April, 2017.

APPROVED by the Mayor of the City of St. Charles, Kane and DuPage Counties, Illinois, this 17th day of April, 2017.

Raymond P. Rogina, Mayor

ATTEST:

Nancy Garrison, City Clerk

COUNCIL VOTE:

Ayes: _____

Nays: _____

Absent: _____

APPROVED AS TO FORM:

City Attorney

DATE: _____

**AGENDA ITEM EXECUTIVE SUMMARY**

Agenda Item number: 5d

Title:

Recommendation to Approve an Ordinance Authorizing Changes in Rate Structure for the Water Utility of the City St Charles Effective with Billings Issued After June 1, 2017

Presenter:

Chris Minick, Finance Director

Meeting: Government Operations Committee

Date: April 17, 2017

Proposed Cost: \$N/A

Budgeted Amount: \$

Not Budgeted: ☐**Executive Summary** *(if not budgeted please explain):*

In conjunction with the implementation of the FY 17-18 budget, Staff is seeking approval of the attached Ordinance to enact changes in the utility rate structure. This ordinance reflects the rates utilized in the preparation of the FY 17/18 budget presented to and approved by the City Council on April 3, 2017. The projections and amounts included in the budget presentation are predicated on the rate structure created by the Ordinances attached.

The changes to the rate structures proposed continue the City Council's commitment to assure the long term financial viability and sustainability of the utilities in conjunction with the rate study passed in May of 2011.

If approved as proposed, these rate changes would be effective with bills sent in June.

Attachments *(please list):*

Water Rate Ordinance

Recommendation/Suggested Action *(briefly explain):*

Recommendation to approve Ordinances authorizing changes in the rate structure for the Water Utility for the City of St. Charles effective for billings issued after June 1, 2017.

City of St. Charles, Illinois
Ordinance No. 2017-M-_____

An Ordinance Authorizing Amendment of Title 13 “Public Utilities”, Chapter 13.16, “Water”, Section 13.16.190 “Net Charges for Property with Buildings Connected to System” of the St. Charles Municipal Code

BE IT ORDAINED BY THE CITY COUNCIL OF THE CITY OF ST. CHARLES,
KANE AND DUPAGE COUNTIES, ILLINOIS, as follows:

Section 1. That Title 13 “Public Utilities”, Chapter 13.16 “Water”, Section 13.16.190 “Net Charges for Property with Buildings Connected to System”, of the St. Charles Municipal Code, is hereby deleted in its entirety and in lieu thereof the following language shall be substituted:

“13.16.190 Net Charges for Property with Buildings Connected to System

All property upon which any building has been or may be hereafter erected having a connection with the water system shall pay the following charges:

A. Customer Charge. The following customer charge is for all general service water customers:

Customer Charge

<u>Meter Size</u>	<u>Per Month</u>
3/4” and under	\$ 8.30
1”	\$ 10.70
1-1/4”	\$ 13.00
1-1/2”	\$ 14.97
2”	\$ 20.21
3”	\$ 32.12
4”	\$ 49.01
7-1/2”	\$ 132.12

B. Water Charge. The following water rates apply to all customers:

Base Water Rate – Three dollars and forty-eight cents (\$3.48) per 1000 gallons.

***Excess Seasonal Water Rate – Five dollars and eighty nine cents (\$5.89) per 1000 gallons.**

***Excess Seasonal Water Rate applies to water use that is billed to the customer starting in the month of June and the next four succeeding months.**

The excess seasonal water rate applies to water used during the above period which is greater than 130 percent of the monthly average of water used during the winter quarter and which is greater than 6,500 gallons per month usage. All other water is billed at the base rate. New customers who have no history of water consumption during the winter quarter will be billed on the basis of actual consumption at the base rate until a winter average is determined.

Section 2. That this Ordinance shall be in full force and effect ten (10) days from and after its passage, approval and publication in pamphlet form as provided by law; provided, however, that the rates set forth herein shall be effective for the first billing period subsequent to June 1, 2017.

Section 3. That after the adoption and approval hereof this Ordinance shall (i) be printed or published in book or pamphlet form, published by the authority of the Council, or (ii) within thirty (30) days after the adoption and approval hereof, be published in a newspaper published in and with a general circulation within the City of St. Charles.

PRESENTED to the City Council of the City of St. Charles, Kane and DuPage Counties, Illinois, this 17th day of April, 2017.

PASSED by the City Council of the City of St. Charles, Kane and DuPage Counties, Illinois, this 17th day of April, 2017.

APPROVED by the Mayor of the City of St. Charles, Kane and DuPage Counties, Illinois, this 17th day of April, 2017.

Raymond P. Rogina, Mayor

ATTEST:

Nancy Garrison, City Clerk

COUNCIL VOTE:

Ayes: _____

Nays: _____

Absent: _____

**AGENDA ITEM EXECUTIVE SUMMARY**

Agenda Item number: 5e

Title:

Recommendation to Approve an Ordinance Authorizing Changes in Rate Structure for the Sewer Utility of the City St Charles Effective with Billings Issued After June 1, 2017

Presenter:

Chris Minick, Finance Director

Meeting: Government Operations Committee

Date: April 17, 2017

Proposed Cost: \$N/A

Budgeted Amount: \$

Not Budgeted: ☐**Executive Summary** *(if not budgeted please explain):*

In conjunction with the implementation of the FY 17-18 budget, Staff is seeking approval of the attached Ordinance to enact changes in the utility rate structure. This ordinance reflects the rates utilized in the preparation of the FY 17/18 budget presented to and approved by the City Council on April 3, 2017. The projections and amounts included in the budget presentation are predicated on the rate structure created by the Ordinances attached.

The changes to the rate structures proposed continue the City Council's commitment to assure the long term financial viability and sustainability of the utilities in conjunction with the rate study passed in May of 2011.

If approved as proposed, these rate changes would be effective with bills sent in June.

Attachments *(please list):*

Sewer Rate Ordinance

Recommendation/Suggested Action *(briefly explain):*

Recommendation to approve Ordinances authorizing changes in the rate structure for the Sewer Utility for the City of St. Charles effective for billings issued after June 1, 2017.

City of St. Charles, Illinois
Ordinance No. 2017-M-_____

**An Ordinance Authorizing Amendment of Title 13 “Public Utilities”,
Chapter 13.12, “Sewers”, Section 13.12.830 “Charges for Residential
Users”, Section 13.12.840 “User Charges for Metered Water
Consumption and Nonresidential Use” of the St. Charles Municipal
Code Of the St. Charles Municipal Code**

BE IT ORDAINED BY THE CITY COUNCIL OF THE CITY OF ST.
CHARLES, KANE AND DUPAGE COUNTIES, ILLINOIS, as follows:

Section 1. That Title 13 “Public Utilities”, Section 13.12.830 “Charges for Residential Users”, Subsection A, Section 13.12.840 “User Charges for Metered Water Consumption and Nonresidential Use”, Subsection A, is hereby deleted in its entirety and in lieu thereof the following language shall be substituted:

“13.12.830 Charges for Residential Users

A. The residential sewer user charge shall be as follows:

- 1. The following rate shall be charged for sewer service to all residential users of City sewers based upon metered water consumption: seventeen dollars and sixty-eight cents (\$17.68) demand charge per month plus five dollars and fifty-seven cents (\$5.57) per one thousand gallons of water used with a maximum sewer charge not to exceed 130% of a residential user’s winter quarter water usage average. The residential user’s “winter quarter” water usage shall be defined as the water that is billed to the user in the months of January, February, and March. When the 130% calculation produces a fractional result, the customer maximum will be raised to the next whole number.**
2. Residential users in a building with more than one dwelling unit and with each unit having a sewer connection but no city water meter shall be charged the existing residential sewer demand charge per month. Sewer usage charge shall be billed to the customer billed for the water service and shall be based on the water used at the existing residential sewer rate per one thousand gallons.
3. Residential users in a building with only one dwelling unit with sewer connection but no city water purchases shall be charged for eight thousand gallons of usage at the existing residential rate per one thousand gallons plus the existing demand charge per month.
4. For new or recently constructed residential buildings or other customers which have a water meter and incomplete history of water consumption during a winter quarter, the existing residential rate per

thousand gallons plus the existing demand charge per month shall be applied to their metered water consumption until the completion of a winter quarter.

5. **A fee is hereby imposed upon all residential users of City sewers for the purpose of funding various projects required to comply with mandatory standards promulgated by the United States and the Illinois Environmental Protection Agencies. This fee, termed "EPA Mandate Fee", will be set at a flat rate of ninety cents (\$0.90) per month."**

"13.12.840 User Charges for Metered Water Consumption and Nonresidential Use

A. The non-residential sewer user charge shall be as follows:

1. **The following rate shall be charged for sewer service to all non-residential users of City sewers based upon metered water consumption: seventeen dollars and sixty-eight cents (\$17.68) demand charge per month plus five dollars and fifty-seven cents (\$5.57) per one thousand gallons of water used.**
2. **The following rate shall be charged for sewer service to all non-residential users of City sewers where water consumption does not reflect the actual quantity of wastewater tributary to the wastewater treatment works: seventeen dollars and sixty-eight cents (\$17.68) demand charge per month plus five dollars and fifty-seven cents (\$5.57) per one thousand gallons of wastewater actually discharged into the sewer system.**
3. **Non-residential users in a building with more than one non-residential unit and with each unit having a sewer connection but no city water meter shall be charged the existing non-residential sewer demand charge per month. Sewer usage charge shall be billed to the customer billed for the water service and shall be based on the water used at the existing non-residential sewer rate per one thousand gallons.**
4. **Non-residential users in a building with no water purchases and a sewer connection without flow measurement equipment shall be charged the existing non-residential sewer demand charge per month, plus a user charge equivalent to six thousand gallons of usage at the existing non-residential sewer use rate per one thousand gallons. Non-residential users may be required to install flow measurement equipment pursuant to the conditions set forth in Section 13.12.940B.**
5. **A fee is hereby imposed upon all non-residential users of City sewers for the purpose of funding various projects required to comply with mandatory standards promulgated by the United**

States and the Illinois Environmental Protection Agencies. This fee, termed "EPA Mandate Fee", will be set at a flat rate of ninety cents (\$0.90) per month."

Section 3. That this Ordinance shall be in full force and effect ten (10) days from and after its passage, approval and publication in pamphlet form as provided by law; provided, however, that the rates set forth herein shall be effective for the first billing subsequent to June 1, 2017.

Section 4. That after the adoption and approval hereof this Ordinance shall (i) be printed or published in book or pamphlet form, published by the authority of the Council, or (ii) within thirty (30) days after the adoption and approval hereof, be published in a newspaper published in and with a general circulation within the City of St. Charles.

PRESENTED to the City Council of the City of St. Charles, Kane and DuPage Counties, Illinois, this 17th day of April, 2017.

PASSED by the City Council of the City of St. Charles, Kane and DuPage Counties, Illinois, this 17th day of April, 2017.

APPROVED by the Mayor of the City of St. Charles, Kane and DuPage Counties, Illinois, this 17th day of April, 2017.

Raymond P. Rogina, Mayor

ATTEST:

Nancy Garrison, City Clerk

COUNCIL VOTE:

Ayes: _____

Nays: _____

Absent: _____

APPROVED AS TO FORM:

City Attorney

DATE: _____