



# City of West Allis

## Meeting Agenda

### Administrative Appeals Review Board

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Monday, June 26, 2023

4:00 PM

City Hall, Room 128  
7525 W. Greenfield Ave.

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#### REGULAR MEETING

#### A. CALL TO ORDER

*Mayor Devine called the meeting to order at 4:02 p.m.*

#### B. ROLL CALL

#### C. APPROVAL OF MINUTES

#### D. MATTERS FOR DISCUSSION/ACTION

1. [23-0388](#) Appeal of Dangerous Dog Order for Smush by Cindy Kostuch, issued on February 25, 2023, at 1947 S. 69th St.  
(AARB-1)
2. [23-0003](#) Appeal of Dangerous Dog Order for Boba by Michael Leifer, issued on July 4, 2022, at 2418 S. 92nd St.  
(AARB-2)
3. [23-0405](#) Appeal of Dangerous Dog Order for Emma, owned by John Serrahn, issued on October 4, 2022, at 9438 W. Lapham St.  
(AARB-3)

*For all three agenda items, the Board may deliberate in closed session pursuant to Wis. Stat. 19.85(1) (a), for the purpose of deliberating concerning a case which was the subject of any judicial or quasi-judicial hearing. This committee may reconvene in open session after completion of the closed session to consider the balance of the agenda.*

#### E. ADJOURNMENT



All meetings of the Administrative Appeals Review Board are public meetings. In order for the general public to make comments at the committee meetings, the individual(s) must be scheduled (as an appearance) with the chair of the committee or the appropriate staff contact; otherwise, the meeting of the committee is a working session for the committee itself, and discussion by those in attendance is limited to committee members, the mayor, other alderpersons, staff and others that may be a party to the matter being discussed.

#### **NOTICE OF POSSIBLE QUORUM**

It is possible that members of, and possibly a quorum of, members of other governmental bodies of the municipality may be in attendance at the above-stated meeting to gather information. No action will be taken by any governmental body at the above-stated meeting other than the governmental body specifically referred to above in this notice.

#### **NON-DISCRIMINATION STATEMENT**

The City of West Allis does not discriminate against individuals on the basis of race, color, religion, age, marital or veterans' status, sex, national origin, disability or any other legally protected status in the admission or access to, or treatment or employment in, its services, programs or activities.

#### **AMERICANS WITH DISABILITIES ACT NOTICE**

Upon reasonable notice the City will furnish appropriate auxiliary aids and services when necessary to afford individuals with disabilities an equal opportunity to participate in and to enjoy the benefits of a service, program or activity provided by the City.

#### **LIMITED ENGLISH PROFICIENCY STATEMENT**

It is the policy of the City of West Allis to provide language access services to populations of persons with Limited English Proficiency (LEP) who are eligible to be served or likely to be directly affected by our programs. Such services will be focused on providing meaningful access to our programs, services and/or benefits.

# ORDER DANGEROUS DOG

Date: 2/25/23

Owner's Name(s): Cindy J. Kostuch

Address: 1947 S. 69th St.

Address: West Allis, WI 53219

Name of Dog: Smugh

Description of Dog: Black lab, 8 years old

Pursuant to West Allis Revised Municipal Code Section 7.126, your dog, described above, is hereby declared to be a **dangerous dog**.

Within **30 days** of the date of this order, you must comply with the requirement of 7.126(6) (see back sheet). A West Allis police officer will conduct a follow-up investigation to ensure compliance with the requirements.

If you wish to contest this order or any of the requirements of 7.126(6), you must, within 30 days after receipt of the order, deliver to the City Clerk a written objection to the order stating specific reasons for contesting the order. The City Clerk is located at City Hall at 7525 West Greenfield Avenue, West Allis, Wisconsin.

If you have questions about this order, please contact the City Attorney's Office at (414) 302-8450.

Signature: Kossow WAPD  
Name of Officer / Department

**Service: (check one)**

Date/Time: 2/25/23

Name of person served: Cindy Kostuch

Location: 1947 S. 69th St.

# West Allis Health Department Rabies Quarantine Order



Public Health  
Prevent. Promote. Protect.  
West Allis Health Department

Animal Owner's Name: Cindy J. Kostuch

Animal Owner's Address: 1947 S. 69th St.

Animal Owner's Telephone Number: 414-335-6268

Name of Animal: Smush Type of Pet: ☒ Dog ☐ Cat ☐ Other (List) \_\_\_\_\_

Date Bite Occurred: 2/25/23 Was a person bitten? Y ☐ N ☐ Did the Bite Break the Skin? Y ☐ N ☐

Date of Animal's Rabies Vaccination: Unknown Dog/Cat License Tag Number: Unknown

Victim's Name: Levi D. Stauffer Victim's Address: 1931 S. 69th St.

Victim's Phone/Cell: 414-430-7298 Treated by: ☐ Medical Provider ☐ Self ☐ Parent ☐ NA

Per the Revised Municipal Code of the City of West Allis 7.12(5) the animal identified above and owned/harbored by you at the indicated address is hereby ordered confined, under the conditions defined below, for purposes of quarantine for possible rabies exposure.

- ☒ This animal has bitten or otherwise potentially exposed a person or other animal to rabies virus and is quarantined for a minimum of **10 days** from the date of the incident. Animal owner is responsible for all costs associated with quarantine/impoundment of the animal.
- ☐ Proof of valid rabies vaccination provided. In home quarantine ordered. See Quarantine conditions below.
  - ☐ Proof of valid rabies vaccination is **NOT** provided. Animal is ordered to be impounded at:
    - ☐ MADACC
    - ☐ Local Veterinarian Clinic: \_\_\_\_\_
- ☐ This animal has bitten or otherwise potentially exposed a person or other animal to rabies virus **AND** is exhibiting symptoms consistent with rabies. This animal is ordered to be euthanized for rabies testing. Animal owner is responsible for all costs associated with euthanization and testing.

## Quarantine conditions:

- ☐ The animal must be seen by a veterinarian within 24 hours for a health clearance. A copy of the veterinarian's report must be submitted to the West Allis Health Department.
- ☐ The animal must be confined at all times in an enclosed space that prevents contact with people, other pets, and wild animals. Animal may only be outside only for purposes of toileting and must be kept on a leash.
- ☐ At no time may the animal be removed from the premises without prior written permission of the West Allis Health Department. In an emergency, the animal may be taken to a vet. Immediately notify the Health Department.
- ☐ If at any time during the quarantine period the animal becomes ill, shows signs of abnormal behavior, or dies, the West Allis Health Department must be notified immediately. The Health Commissioner may authorize, at any time that the animal be euthanized for purposes of laboratory testing for rabies.
- ☐ Animals without a valid rabies vaccination must be vaccinated after the quarantine period, prior to being released to the owner. Also, if the animal does not have a valid Milwaukee County Animal License the owner must obtain the license and submit proof of license to the West Allis Health Department.
- ☐ The animal will be released from quarantine only upon completion of the prescribed requirements and by written authorization of the West Allis Health Department.

*I understand and agree to abide by the conditions under which the above named animal, for which I am the responsible owner or custodian, is to be quarantined. I understand that violation of the conditions of this quarantine order, whether by volition or negligence, is punishable under the Revised Municipal Code for the City West Allis.*

Explained and given copy

Animal owner name (print)	Animal owner signature	Date
<u>Kossow</u>	<u>Lin Kossow</u>	<u>2/25/23</u>
Serving official name (print)	Serving official signature	Date

White – Police Department Copy

Pink – Health Department Copy

Buff – Owner's Copy

**Submit completed report to the Health Department within 24 hours.**

7120 W National Ave, West Allis, WI 53214

Fax – 414-302-8628



**\*\*Needs Monday Hearing - Her only day off\*\***

05/17/23

ckostuch479@gmail.com

Cindy Kostuch  
1947 S 69<sup>th</sup> st  
West Allis, WI 53219  
414 335-6268

Dear City Hall,

I am respectfully requesting to Appeal a Dangerous Dog Order that was issued 02/25/23 at the above listed address.

This is in regards to my 8-year old lab named Smush. She has never had an issue with aggressive behavior. I had just been released from the hospital and my granddaughter had gone into the alley with our 8-year lab and her 2 puppies to get paperwork out of my car. At this time, a teenage neighbor was walking in the alley. Our 8-year old lab did nip and the teenager when he got to our property and for that I am extremely sorry. One of our neighbors has a camera and you can see the teenager run off and slip and fall on the ice. Under NO circumstances did our lab show any aggressive behavior towards him at that point. We have several other neighbors that are willing to put something in writing stating they have not ever seen her aggressive in the last 8 years and they have NO issues with her.

As ordered, she was quarantined for 10-days and taken to the vet twice with a perfect bill of health. She also comes to work with me often where she is with the public without any concerns (my employer is also willing to put that in writing). We (myself, our Vet and the Officers on scene) all agree she must have been trying to protect my granddaughter as well as her puppies. West Allis PD has been at my house on other occasions (unrelated to the dog) and have found her friendly and pet her.

Again, I am respectfully requesting an Appeal.

Thank you,

Cindy Kostuch





**City Clerk**  
[clerk@westalliswi.gov](mailto:clerk@westalliswi.gov)

May 31, 2023

Cindy Kostuch  
1947 S. 69th Street  
West Allis, WI 53219

**RE: Administrative Appeals Review Board Hearing Notice**

Dear Cindy Kostuch,

Your appeal is scheduled for a hearing before the Administrative Appeal Review Board on: **June 26, 2023 at 4:00PM in Room 128 at West Allis City Hall, 7525 W. Greenfield Avenue.**

Please park in the parking lot on the south side of the building. Room 128 is the first room on your right when you enter the building.

Please add a comment anywhere in your application confirming you will attend the hearing. If you fail to appear your appeal will be denied.

If you have questions, please email [clerk@westalliswi.gov](mailto:clerk@westalliswi.gov).

Record #:	AARB-1	DCAB #:	DCAB-23-4
Appeal Meeting Fee Paid:	Yes		
Amount Paid:	\$50.00		
Date Paid:	May 18, 2023		



Q2 - 029122

# ORDER DANGEROUS DOG

Date: 7/4/22

Owner's Name(s): Michael C Leifer

Address: 2418 S 92 St

Address: \_\_\_\_\_

Name of Dog: Boba

Description of Dog: German Shepherd

Pursuant to West Allis Revised Municipal Code Section 7.126, your dog, described above, is hereby declared to be a **dangerous dog**.

Within **30 days** of the date of this order, you must comply with the requirement of 7.126(6) (see back sheet). A West Allis police officer will conduct a follow-up investigation to ensure compliance with the requirements.

If you wish to contest this order or any of the requirements of 7.126(6), you must, within 30 days after receipt of the order, deliver to the City Clerk a written objection to the order stating specific reasons for contesting the order. The City Clerk is located at City Hall at 7525 West Greenfield Avenue, West Allis, Wisconsin.

If you have questions about this order, please contact the City Attorney's Office at (414) 302-8450.

Signature: Webster Polce  
Name of Officer / Department

**Service: (check one)**

Date/Time: 7/4/22 2:55 hrs

Name of person served: Michael Leifer

Location: 2418 S 92 St



Hi,

My name is Mike Leifer and I'm writing this letter to try and prove my dog Boba is not an aggressive dog. He has been living with me, my wife and 2 kids who are ages 5 years old and 18 months for Boba's whole life. Boba is only 1 year old, but he is the most loving and caring dog. He would never do anything to hurt my kids, or even do anything to company that we have come over. I've had multiple families come over with their kids that like to play rough with him and he still has never bitten or snipped at anyone. He will lick their face and welcome them. All he wants is to be petted and his belly rubbed most of the time. Hes a cop dog, cops use German Shepards all the time. I even have another dog who is a beagle pug and is 3 years old and Boba and Ollie play so well together always chasing each other. I'm asking for you to drop the aggressive dog title on my dog Boba. I will also do my part in making sure that he never leaves my yard without a leash. I don't believe that my dog bites hers on the collar either, because when she left the house, she made a comment saying if my dog has any bite marks that she will call the police. She was gone for almost 2 hrs. and then comes back saying her dog has those marks on the collar. How do we know she didn't make those herself with a knife or other object? The cop seen boba in my house when they were called and Boba didn't charge at the cops or anything. This lady has a Pitbull and every time my dogs are out when hers is out, her Pitbull comes charging at my fence, and will bark until I bring my dogs in. So, if you could please not deem Boba as a dangerous dog our family would greatly appreciate it.

Thank you,

Mike Leifer -



414-688-2064

BBFlash44@aol.com

CITY OF WEST ALLIS  
\*\*\* CUSTOMER RECEIPT \*\*\*  
: WALSJXG Type: OC Drawer  
: 7/22/22 01 Receipt no: 40  
Description Quantity Am  
APPEAL-AARB 1.00 \$5  
Ins number: 256  
Account number:  
000004290205  
KE LEIFER - DANGEROUS D  
Order detail  
A CASH PAYMENT  
Total tendered  
Total payment

\$5.00

WEST ALLIS ATTORNEY  
20 JUL 22 AM 11:41



**City Clerk**  
[clerk@westalliswi.gov](mailto:clerk@westalliswi.gov)

January 13, 2023

Michael C Leifer  
2418 S 92 St  
West Allis, WI 53227

**RE: Administrative Appeals Review Board Hearing Notice for:  
Dangerous Animal Appeal for Boba**

Dear Michael C Leifer,

Your Dangerous Animal appeal is scheduled for a hearing before the Administrative Appeal Review Board on: **January 23, 2023 at 4:00 PM in Room 128 at West Allis City Hall, 7525 W. Greenfield Avenue, West Allis.**

If you fail to appear your appeal will be denied and the dangerous dog order remains in place and you must comply with the requirements of West Allis Municipal Code Section 7.126(6).

Please park in the parking lot on the south side of the building. Room 128 is the first room on your right when you enter the building.

If you have questions, please email [clerk@westalliswi.gov](mailto:clerk@westalliswi.gov).



# ORDER DANGEROUS DOG

Date: 10/4/22Owner's Name(s): JOHN W SERRAHNAddress: 9438 W LAPHAM ST

Address: \_\_\_\_\_

Name of Dog: EMMADescription of Dog: 3 YEAR OLD GOLDEN RETRIEVER

Pursuant to West Allis Revised Municipal Code Section 7.126, your dog, described above, is hereby declared to be a **dangerous dog**.

Within **30 days** of the date of this order, you must comply with the requirement of 7.126(6) (see back sheet). A West Allis police officer will conduct a follow-up investigation to ensure compliance with the requirements.

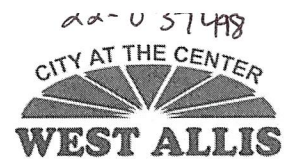
If you wish to contest this order or any of the requirements of 7.126(6), you must, within 30 days after receipt of the order, deliver to the City Clerk a written objection to the order stating specific reasons for contesting the order. The City Clerk is located at City Hall at 7525 West Greenfield Avenue, West Allis, Wisconsin.

If you have questions about this order, please contact the City Attorney's Office at (414) 302-8450.

Signature: [Signature] West Allis PD.  
Name of Officer / Department**Service: (check one)**Date/Time: 10/4/22 2:43 PMName of person served: JOHN SerrahnLocation: 9438 W LAPHAM ST



# West Allis Health Department Rabies Quarantine Order



Public Health  
Protect. Promote. Prevent.  
West Allis Health Department

Animal Owner's Name: JOHN W. SERRAHN

Animal Owner's Address: 9438 W LARAM ST

Animal Owner's Telephone Number: 414-690-8185

Name of Animal: Emma Type of Pet: ☒ Dog ☒ Cat ☐ Other (List) \_\_\_\_\_

Date Bite Occurred: 10/4/22 Was a person bitten? ☒ Y ☐ N Did the Bite Break the Skin? ☒ Y ☐ N

Date of Animal's Rabies Vaccination: 2022 JAN 8 151 Dog/Cat License Tag Number: \_\_\_\_\_

Victim's Name: Anna S Al-Aydi-Rivera Victim's Address: 1487 S 94 Pl

Victim's Phone/Cell: 414-791-1380 Treated by: ☒ Medical Provider ☐ Self ☐ Parent ☐ NA

Per the Revised Municipal Code of the City of West Allis 7.12(5) the animal identified above and owned/harbored by you at the indicated address is hereby ordered confined, under the conditions defined below, for purposes of quarantine for possible rabies exposure.

- ☐ This animal has bitten or otherwise potentially exposed a person or other animal to rabies virus and is quarantined for a minimum of **10 days** from the date of the incident. Animal owner is responsible for all costs associated with quarantine/impoundment of the animal.
  - ☒ Proof of valid rabies vaccination provided. In home quarantine ordered. See Quarantine conditions below.
  - ☐ Proof of valid rabies vaccination is **NOT** provided. Animal is ordered to be impounded at:
    - ☐ MADACC
    - ☐ Local Veterinarian Clinic: \_\_\_\_\_
- ☐ This animal has bitten or otherwise potentially exposed a person or other animal to rabies virus **AND** is exhibiting symptoms consistent with rabies. This animal is ordered to be euthanized for rabies testing. Animal owner is responsible for all costs associated with euthanization and testing.

## Quarantine conditions:

- ☐ The animal must be seen by a veterinarian within 24 hours for a health clearance. A copy of the veterinarian's report must be submitted to the West Allis Health Department.
- ☐ The animal must be confined at all times in an enclosed space that prevents contact with people, other pets, and wild animals. Animal may only be outside only for purposes of toileting and must be kept on a leash.
- ☐ At no time may the animal be removed from the premises without prior written permission of the West Allis Health Department. In an emergency, the animal may be taken to a vet. Immediately notify the Health Department.
- ☐ If at any time during the quarantine period the animal becomes ill, shows signs of abnormal behavior, or dies, the West Allis Health Department must be notified immediately. The Health Commissioner may authorize, at any time that the animal be euthanized for purposes of laboratory testing for rabies.
- ☐ Animals without a valid rabies vaccination must be vaccinated after the quarantine period, prior to being released to the owner. Also, if the animal does not have a valid Milwaukee County Animal License the owner must obtain the license and submit proof of license to the West Allis Health Department.
- ☐ The animal will be released from quarantine only upon completion of the prescribed requirements and by written authorization of the West Allis Health Department.

*I understand and agree to abide by the conditions under which the above named animal, for which I am the responsible owner or custodian, is to be quarantined. I understand that violation of the conditions of this quarantine order, whether by volition or negligence, is punishable under the Revised Municipal Code for the City West Allis.*

Suzanne Serrahn  
Animal owner name (print)

Suzanne Serrahn 10-4-22  
Animal owner signature Date

Lonnie Christanson  
Serving official name (print)

Lc/Lc 10/6/22  
Serving official signature Date

White – Police Department Copy

Pink – Health Department Copy

Yellow – Owner's Copy

**Submit completed report to the Health Department within 24 hours.**

7120 W National Ave, West Allis, WI 53214

Fax – 414-302-8628



## DCAB-22-1

Dangerous Animal Order Issued by PD (Internal - USE THIS ONE)

**Status:** Active

**Date Created:** Dec 7, 2022

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### Applicant

Jessica Johnson  
jjohnson@westalliswi.gov  
11301 W. Lincoln Av  
West Allis, WI 53227  
4143028054

### Primary Location

9438 W LAPHAM ST  
West Allis, WI 53214

### Owner:

John Serrahn & Suzanne Serrahn  
9438 W Lapham St West Allis, WI  
53214

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**How was the City informed about the animal bite and/or scratch?**

**Who notified the City?**

Police Department

---

## POLICE DEPARTMENT - Information on Order Issued

### Upload Incident Report



22-037498.pdf

Uploaded by Jessica Johnson on Dec 7,  
2022 at 12:17 pm

### Upload Quarantine Order



DD Order & Quarantine 22-  
037498.pdf

Uploaded by Jessica Johnson on Dec 7,  
2022 at 12:18 pm

### Case #

22-037498

**Date Issued**

10/04/2022

**Owner Name**

John W Serrahn

**Owner Address**

9438 W Lapham St

**Owner Zip**

53214

**Owner Phone Number**

4146908185

**Owner Email**

ssnoze51@gmail.com

**Owner's Date of Birth**

11/17/1951

**Owner's Driver's License / ID Number**

Suzanne's - S650-7806-1724-03; DOB  
1961-06-24

**Is the animal owner's mailing address different than the address above?**

No

**Type of Dangerous Animal Order Issued**

Dangerous Animal

**Upload Copy of Issued Order**

pdf

DD Order & Quarantine 22-  
037498.pdf

Uploaded by Jessica Johnson on Dec 7,  
2022 at 12:19 pm

**Did the bite or scratch break a person's skin?**

Yes

**If there wasn't a bite or scratch, describe the incident.**

--

**POLICE DEPARTMENT -  
ENTER THE ANIMAL'S  
INFORMATION****Animal Name**

Emma

**Is the animal a dog?**

Yes

**What breed is the dog?****Microchip Number**



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### Animal's Distinguishing Marks

--

### Upload Color Photograph of the Animal



Uploaded by ... on

### Upload Copy of Onsite PD Inspection Checklist



Uploaded by ... on

---

## POLICE DEPARTMENT - ENTER VICTIM INFORMATION

### Victim 's Name

Anna S Al Aydi

### Address

1487 S 94 Pl

### City

West Allis

### State

WI

### Zip

53214

### Phone Number

4147911380

### Email Address

--

### Victim DOB

05/15/1982

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## POLICE DEPARTMENT - 30 DAY COMPLIANCE CHECK

**Did the animal's owner comply with the Dangerous Animal Conditions within 30 days?**

--

### Date PD Inspected

--

## HEALTH DEPARTMENT

**Is the animal available for observation or testing?**

--

**During the 10 day period, there shall be three (3) veterinarian observations.**

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## CLERK'S OFFICE - AARB APPEAL

**Deadline to Apply for Appeal**

--

**Does the animal owner want to appeal the order?**

Yes

**Timely Filed**

Yes

**AARB Mtg Fee Paid?**

Yes

**Date Paid Fee**

10/19/2022

**Payment Method**

Credit Card

**Enter reasons for appealing the order:**

Emma has never bitten before. She is a loving caring dog, excellent around children, always leashed outside. Lives with two cats. The officers that came out said she did not bear her teeth and appeared friendly toward them.

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## AARB Appeal Hearing Information

**AARB Meeting Date**

01/23/2023

**AARB Time**

4:00 PM

**Meeting Room**

Room 128

**For the letter: Mtg Room Location in Building**

Room 128 is the first room on your right when you enter the building.

**Send the AARB Appeal Hearing Notice.**



**AARB ACTION OPTION 1 - Decision relating to a Dangerous Dog designation.**

**Choose this option when the AARB UPHOLDS the DDD**

--

**Select the conditions that apply by clicking the dropdown arrow and choosing the condition verbiage.**

**7.126(6)(10) - Registration**

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**7.121(1) - Dogs and Dog Licenses**

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**7.126(6)(c) - Leash and Muzzle**

--

**7.126(6)(d) - Confinement & Fencing**

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**7.126(6)(e) - Signs**

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**7.126(6)(f) - Spay and Neuter Requirements**

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**7.126(6)(g) - Microchip Requirements**

--

**7.126(6)(h) - Liability Insurance**

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**Additional Notes to add to the letter.**

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**AARB ACTION OPTION 2 - Decisions relating to a Prohibited Dangerous Dog designation.**

**Choose this option when the AARB UPHOLDS the PDD**

--

**Choose this option when the AARB AMENDS the designation from PDD to DD.**

--

If the PDD was amended to DD, scroll up and chose those conditions that apply.

AARB ACTION OPTION 3 - Decision relating to overturning the Prohibited or Dangerous Dog Designation.

Choose this option when the AARB OVERTURNS the PDD or DD Order

--

Once one of those three actions are selected, click here to send the decision letter.



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### Attachments

No attachments

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### History

Date	Activity
Dec 7, 2022 at 12:16 pm	Jessica Johnson started a draft of Record DCAB-22-1
Dec 7, 2022 at 12:21 pm	Jessica Johnson submitted Record DCAB-22-1
Dec 7, 2022 at 12:21 pm	changed the deadline to Dec 07, 2022 on approval step Notification to Health Dept. - Scratch Broke The Skin on Record DCAB-22-1
Dec 7, 2022 at 12:21 pm	approval step Notification to Health Dept. - Scratch Broke The Skinwas assigned to Melissa Feldmeyer on Record DCAB-22-1
Dec 7, 2022 at 12:21 pm	changed the deadline to Dec 07, 2022 on approval step Notification to Health Dept. - Scratch Broke The Skin on Record DCAB-22-1
Dec 7, 2022 at 3:59 pm	Gina Gresch changed Does the animal owner want to appeal the order? from "" to "Yes" on Record DCAB-22-1
Dec 7, 2022 at 3:59 pm	Gina Gresch changed Timely Filed from "" to "Yes" on Record DCAB-22-1

<b>Date</b>	<b>Activity</b>
Dec 7, 2022 at 3:59 pm	Gina Gresch changed AARB Mtg Fee Paid? from "" to "Yes" on Record DCAB-22-1
Dec 7, 2022 at 4:04 pm	Gina Gresch added Date Paid Fee to Record DCAB-22-1
Dec 7, 2022 at 4:05 pm	Gina Gresch added Payment Method to Record DCAB-22-1
Dec 7, 2022 at 4:07 pm	Gina Gresch added Enter reasons for appealing the order: to Record DCAB-22-1
Dec 7, 2022 at 4:08 pm	Gina Gresch changed Owner Email from "" to "ssnoze51@gmail.com" on Record DCAB-22-1
Dec 7, 2022 at 4:08 pm	Gina Gresch changed Owner's Driver's License / ID Number from "" to "Suzanne's - S650-7806-1724-03" on Record DCAB-22-1
Dec 7, 2022 at 4:08 pm	Gina Gresch changed Owner's Driver's License / ID Number from "Suzanne's - S650-7806-1724-03" to "Suzanne's - S650-7806-1724-03; DOB 1961-06-24" on Record DCAB-22-1
Dec 29, 2022 at 12:31 pm	Gina Gresch assigned approval step Schedule AARB Hearing if Filed Timely to Gina Gresch on Record DCAB-22-1
Dec 29, 2022 at 12:31 pm	Gina Gresch assigned approval step Follow Up on AARB Decision - Prohibited Dangerous Dog to Gina Gresch on Record DCAB-22-1
Dec 29, 2022 at 12:33 pm	Gina Gresch changed AARB Meeting Date from "" to "01/23/2023" on Record DCAB-22-1
Dec 29, 2022 at 12:33 pm	Gina Gresch changed Meeting Room from "" to "Room 128" on Record DCAB-22-1
Dec 29, 2022 at 12:33 pm	Gina Gresch changed AARB Time from "" to "4:00 PM" on Record DCAB-22-1
Dec 29, 2022 at 12:33 pm	Gina Gresch changed Send the AARB Appeal Hearing Notice. from "false" to "true" on Record DCAB-22-1
Dec 29, 2022 at 12:33 pm	Gina Gresch added For the letter: Mtg Room Location in Building to Record DCAB-22-1
Dec 29, 2022 at 12:33 pm	Gina Gresch altered approval step Schedule AARB Hearing if Filed Timely, changed status from Inactive to Complete on Record DCAB-22-1
Dec 29, 2022 at 12:34 pm	Gina Gresch removed document step Send AARB Hearing Notice from Record DCAB-22-1



**City Clerk**  
clerk@westalliswi.gov

January 13, 2023

John W Serrahn  
9438 W Lapham St  
West Allis, WI 53214

**RE: Administrative Appeals Review Board Hearing Notice for:  
Dangerous Animal Appeal for Emma**

Dear John W Serrahn,

Your Dangerous Animal appeal is scheduled for a hearing before the Administrative Appeal Review Board on: **January 23, 2023 at 4:00 PM in Room 128 at West Allis City Hall, 7525 W. Greenfield Avenue, West Allis.**

If you fail to appear your appeal will be denied and the dangerous dog order remains in place and you must comply with the requirements of West Allis Municipal Code Section 7.126(6).

Please park in the parking lot on the south side of the building. Room 128 is the first room on your right when you enter the building.

If you have questions, please email [clerk@westalliswi.gov](mailto:clerk@westalliswi.gov).

