



Class A:  $\square$  Beer,  $\square$  Liquor,  $\square$  Cider

## Liquor/Beer License **Application**

City of Madison Clerk 210 MLK Jr Blvd, Room 103
Madison, WI 53703

(Agenda Item Num	nber)
(Legistar file numb	per)
	-2021-004
(License number)	409
(Alder District #) Office	(Police Sector) Use Only

Clas	Ss B: ☐ Beer, ☐ Liquor, ☐ Class C Wine Iicensing@cityofmadison.com 608-266-4601
<b>Sec</b> 1.	List the name of your  Sole Proprietor,  Partnership,  Corporation/Nonprofit Organization or  Limited Liability Company exactly as it appears on your State Seller's Permit.
2.	Trade Name (doing business as) After shock Classic Arcade
3.	Address to be licensed 1444 East Washington Ave, Suite 102
4.	Mailing address 1444 East Washington Ave, Suite # 102
5.	Anticipated opening date   \
6.	Is the applicant an employee or agent of, or acting of behalf of anyone except the applicant named in question 1?  No □ Yes (explain)
7.	Does another alcohol beverage licensee or wholesale permitee have interest in this business? $\square$ No $\square$ Yes (explain)
<b>Sec</b> 8.	Describe in words the building or buildings where alcohol beverages are to be sold and stored. Include all rooms including living quarters, if used, and any outdoor seating used for the sales, service, and/or storage of alcohol beverages and receipts. Alcohol beverages may be sold and stored only on the premises as approved by Common Council and described on license.  The property at 1444 East Washington is divided into 3 suites: #101 is a  Common Area where the bathrooms are located, #102 which is currently Maria's Bar (future home of Aftershock Classic Arcade) and Suite #103 is Parched Eagle.
	Aftershock will be serving alcohol out of suite #102. Extra beer, liquor and bar supplies will be kept in the basement below the suite. The basement will consist of a walk in cooler and racks.

Currently customers at the Parched Eagle are not allowed to carry beer into Suite #102 and our customers are not allowed to carry into the Parched Eagle.

9.	Applicants for on-premises consumption only. Estimated capacity (patrons and employees):				
	Indoor: Outdoor:				
10.	Describe existing parking and how parking lot is to be monitored.				
	There is a large parking lot behind the building, which is monitered by the landlords.				
11.	Was this premises licensed for the sale of liquor or beer during the past license year?				
	□ No □Yes, license issued to <u>Maric's Bar</u> (name of licensee)				
This	tion C—Corporate Information section applies to corporations, nonprofit organizations, and Limited Liability Companies . Sole proprietorships and partnerships, skip to Section D.				
12.	Name of liquor license agent Brad Van Kauwenbergh				
	City, state in which agent resides <u>Deer field</u> , <u>WI</u>				
	How long has the agent continuously resided in the State of Wisconsin? 45 years				
	i. Has the liquor license agent completed the responsible beverage server training course?				
	☐ No, but will complete prior to ALRC meeting ☐ Yes, date completed ☐ ☐ 18 ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐				
16.	State and date of registration of corporation, nonprofit organization, or LLC.				
17.	In the table below list the directors of your corporation or the members of your LLC.  Attach background check forms for each director/member.  Title Name City and State of Residence  President Brad Van Kauwenbych Deerfield, WI Vice Aresident Chris Welch Metanland, WI Officer Gabe Dommershausen Madison WI Officer Ross Hubbard Madison WI				
18.	Registered agent for your corporation or LLC. This is your agent for service of process, notice or demand required or permitted by law to be served on the corporation. This is not necessarily the same as your liquor agent.				
19.	Is applicant a subsidiary of any other corporation or LLC?				
	No				
20.	member, or any manager hold any interest in any other alcohol beverage license or permit in Wisconsin?				
	□ No RYes (explain) Chris Welch - Trixie's Liquor				

Section D—Business Plan  21. What type of establishment is contemplated?  ☐ Tavern ☐ Nightclub ☐ Restaurant ☐ Liquor Store ☐ Grocery Store							
	$\square$ Convenience Store without gas pumps $\square$ Convenience Store with gas pumps				ımps		
	☐ Other						
22.	Private organizations (clubs): Do your membership policies contain any requirement of "invidious" (likely to give offense) discrimination in regard to race, creed, color, or national origin?						
23.	Hours of ope	ration: please	e enter openi	ng and closing	times in the	table below.	
	Sunday	Monday	-	Wednesday			Saturday
	Man - Idam	Mar 12am	Van- 12am	11 am - 12 am	Man lan	Man Zan	Man Dan
	- (Class B OII	-	ow any nours -	when food ser	-	e avaliable,	
This (cor 24.	A. Indicate any other product/service offered. Recr. wine and Liquor  5. All restaurants and taverns serving alcohol must substantiate their gross receipts for food and alcohol beverage sales broken down by percentage. (Note: Non-alcoholic drinks are classified as "Food.") New establishments estimate percentages:  75 % Alcohol % Food 65 % Other  If applicable, describe "Other": Video 65 % Other  Do you have written records to document the percentages shown? No 97 Yes You may be required to submit documentation verifying the percentages indicated.						
26.	Do you plan	to have live e	entertainmen	t? 🖾 No 🛚	Yes—what k	ind?	Managara da Ma
				music (except : ntertainment Li		, a DJ, or a d	designated
	Section F—Required Contacts and Filings 27. I understand that liquor/beer license renewal applications are due April 15 of every year, regardless of when license was initially granted.   No Yes						
28.	I understand ALRC meeting			t an informatio	n session at I	east one wee	ek before the
29.	_		•	this location to	· ·	pplication an	d to invite

30.	I agree to contact the Police Department District Captain for this location prior to the ALRC meeting. $\square$ No $\square$ Yes					
31.	I agree to contact the Deputy Clerk prior to the ALRC meeting. $\square$ No $\trianglerighteq$ Yes					
32.	I agree to contact the neighborhood association representative prior to the ALRC meeting. $\hfill\square$ No $\hfill$ Yes					
33.	I intend to operate under the alcohol license within 180 days of the Common Council granting this license. The license shall be considered surrendered if not issued within 90 days of being granted. $\square$ No $\square$ Yes					
34.	I understand we must file a Special Occupational Tax return (TTB form 5630.5) before beginning business. [phone 1-800-937-8864] $\square$ No $\square$ Yes					
35.	I understand a Wisconsin Seller's Permit must be applied for and issued in the same name as that shown in question 1, above. [phone $608-266-2776$ ] $\square$ No $\square$ Yes					
36.	Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? No $\square$ Yes					
Sec	tion G—Information for Clerk's Office					
37.	This application is for the license period ending June 30, 20					
38.	State Seller's Permit 4 5 6 - 1 0 3 0 7 8 7 7 1 8 - 0 2					
39.	Federal Employer Identification Number 85-4278398					
40.	Who may we contact between 8 a.m. and 4:30 p.m. regarding this license?  Contact person					
	Business phone 608 - 442 - 5347 Business e-mail address CEwelch 250					
	Preferred language English hotmad.com					
	If needed, a qualified interpreter can be provided at no charge to you. Would you like an interpreter?  ☐ Yes (language:)  No (If you answer no and you do require an interpreter, the ALRC will refer your application to a subsequent meeting and this may delay your application process)  Si usted requiere o necesita un/a intérprete, nosotros podemos proveer un/a intérprete sin costo alguno. ¿Le gustaría tener un/a intérprete?  ☐ Sí, lenguaje:					
	☐ No. Si usted escoge "no" en la solicitud/aplicación, y usted sí requiere un/a intérprete, el comité remitirá su solicitud para una nueva junta y esto puede atrasar el proceso de su solicitud.					
41.	Corporate attorney, if applicable: Name					
	Dhono E mail					

<b>NOTICE:</b> Completed application are due by Monday) to get on the agenda for the procemust be accompanied by the following iter	y noon of the third Monday (fourth, if the Clerk's offi eeding months Alcohol License Review Committee. A ns:	ce is closed on the third A completed application
Conv. of State Saller's Permit (Not Busin	ness Tax Registration Certificate), Appointment o	of Agent (if Corn/LLC)
Mambar hardsquared investigation form	s, Articles of Incorporation (if Corp/LLC), Flo	or Planc
-	Sample Menu (if applying for Class B license)	ioi rialis,
Copy of Lease, Business Plan, and I	Sample Menu (Ir applying for Class B license)	
If required items are missing, the application of the control of t	on will not be considered complete and will not be ac No exceptions are made.	ccepted by the Clerk's
been truthfully completed to the best of the to law, and that the rights and responsibilit	enalty provided by law, the applicant states that the e knowledge of the signer. Signer agrees to operate ties conferred by the license(s), if granted, will not b remises during inspection will be deemed a refusal to s for revocation of this license.	the business according e assigned to another.
Penalty for materially false application information on this application may be required to forfer (Officer of Corporation/Member of LLC/Partner/State (Control of Corporation)	1/20/3	
Clerk's Office checklist for complete	applications	
<ul> <li>□ WI Seller's Permit Certificate (matching articles of incorporation)</li> <li>□ FEIN</li> <li>□ Written description of premises</li> </ul>	<ul> <li>□ Background investigation form(s)</li> <li>□ Form for surrender of previous license</li> <li>□ *Articles of Incorporation</li> <li>□ *Appointment of Agent</li> <li>* Corporation/LLC only</li> </ul>	☐ Floor Plans ☐ Lease ☐ Business Plan ☐ **Sample Menu  ** Class B only
☐ Orange sign ☐ Orange busines	Clerk's Office issued to the application: as card e in the City of Madison" brochure with contact	information
Date complete application filed with Clerk	's Office	
Date of ALRC meeting D	ate license granted by Common Council	

Date license issued

Date provisional issued