

Liquor/Beer License Application

(Agenda Item Number)

(Legistar file number)

LICLIB - 2621 - 00419
(License number)

(Alder District #) (Police Sector)

Office Use Only

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

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

| Cla | ss B: ☐ Beer, ☐ Liquor, <u>licensing@cityofmadison.com</u> Class C Wine 608-266-4601 |
|---------------|--|
| Se (1. | List the name of your ロ Sole Proprietor, ロ Partnership, 図 Corporation/Nonprofit Organization or ロ Limited Liability Company exactly as it appears on your State Seller's Permit. FRENCH House INC |
| 2. | Trade Name (doing business as) The French House |
| 3. | Address to be licensed 633 N. Frances St., Madison, WI 53703 |
| 4. | Mailing address 633 N. Frances St., Madison, WI 53703 |
| 5. | Anticipated opening date <u>September 8, 2021</u> |
| 6. | Is the applicant an employee or agent of, or acting of behalf of anyone except the applicant named in question 1? \square No \square Yes (explain) |
| 7. | Does another alcohol beverage licensee or wholesale permitee have interest in this business? \square No \square Yes (explain) |
| Se (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. Wine will be served in the dining room of the French House (ground floor) It will be stored in the walk-in cooler in the pantry which is locked when the Chef is not there. The first and second floors are a Student residence, and wine will not be accessible or served in this part of the building. |

| Indoor: | |
|---|---|
| There is a small parking lot behind the building, but most patrons park in the hearby public ramps or on the street (or come on foot). 11. Was this premises licensed for the sale of liquor or beer during the past license year? No | |
| nearby public ramps or on the Street (or come on foot). 11. Was this premises licensed for the sale of liquor or beer during the past license year? ▼ No □ Yes, license issued to (name of license) | |
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| No | nsee) |
| | nsee) |
| Section C—Cornerate Information | |
| Section C—Corporate Information This section applies to corporations, nonprofit organizations, and Limited Liability Companies only. Sole proprietorships and partnerships, skip to Section D. | s |
| 12. Name of liquor license agent Anne Theobald | |
| 13. City, state in which agent resides | |
| 14. How long has the agent continuously resided in the State of Wisconsin? | |
| 15. Has the liquor license agent completed the responsible beverage server training course? | ? |
| No, but will complete prior to ALRC meeting Yes, date completed | |
| | |
| 16. State and date of registration of corporation, nonprofit organization, or LLC. | |
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| | Section D—Business Plan 21. What type of establishment is contemplated? ☐ Tavern ☐ Nightclub ☐ Restaurant ☐ Liquor Store ☐ Grocery Store | | | | | | |
|---|--|---------------------------------|-------------------------------|--|----------------------------------|-----------------------------|--|
| | ☐ Convenie | nce Store wit | hout gas pur | mps 🏻 Conv | enience Store | e with gas pu | mps |
| | Other | | | | | | |
| 22. | Private orgar "invidious" (I origin? 💢 N | ikely to give | os): Do your offense) disc | membership po rimination in re | olicies contair gard to race, | any require creed, color | ment of , or national |
| 23. | Hours of ope | ration: please | e enter openi | ng and closing | times in the | table below. | |
| | Sunday | Monday | | Wednesday | | 1 | Saturday |
| | - | - | | 6pm - 8pm | | | |
| | (Class B on | ly) Enter belo | w any hours | when food ser | vice will not b | pe available, | if applicable |
| | - | - | - | - | - | | - |
| Section E—Consumption on Premises This section applies to Class B and Class C applicants only. Class A license applicants (consumption off premises) may skip to Section F. 24. Indicate any other product/service offered. | | | | | | | |
| 25. | 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: | | | | | | |
| | Do you have You may be | written recor required to su | ds to docum ubmit docum | ent the percent entation verifyi | ng the percer | ntages indica | ted. |
| 26. | Do you plan | to have live e | entertainmen | t? 🕅 No 🗆 | Yes—what k | ind? | 47-14-14-14-14-14-14-14-14-14-14-14-14-14- |
| | • | | | music (except s ntertainment Li | - |), a DJ, or a d | designated |
| | | that liquor/b | eer license r | ilings enewal applicat √granted. □ N | | April 15 of e | very year, |
| 28. | I understand ALRC meeting | | | st an informatio | n session at l | east one wee | ek before the |
| 29. | | | | this location to | | application ar | 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 $\nearrow\!$ | | | | | |
| 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 \bowtie 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? \square No \square Yes | | | | | |
| Sec | ction G—Information for Clerk's Office | | | | | |
| 37. | This application is for the license period ending June 30, 2022 . | | | | | |
| 38. | State Seller's Permit 4 5 6 - 0 0 0 0 3 7 5 5 6 6 - 0 2 | | | | | |
| 39. | Federal Employer Identification Number 39-0807300 | | | | | |
| 40. | Who may we contact between 8 a.m. and 4:30 p.m. regarding this license? | | | | | |
| | Contact person Anne Theobald | | | | | |
| | Business phone 608 335 5640 Business e-mail address director wherenchhous | | | | | |
| | Preferred language English | | | | | |
| | 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 | | | | | |
| · - • | Dhone E mail | | | | | |

| NOTICE: Completed application are due the Monday) to get on the agenda for the promust be accompanied by the following item. | by noon of the third Monday (fourth, if the Clerk's officeeding months Alcohol License Review Committee. A ems: | ice is closed on the third A completed application |
|--|--|---|
| Member background investigation for | siness Tax Registration Certificate), Appointment of Appointment o | of Agent (if Corp/LLC), oor Plans, |
| If required items are missing, the applicat Office until all requirements are submitted | tion will not be considered complete and will not be a d. No exceptions are made. | ccepted by the Clerk's |
| been truthfully completed to the best of the law, and that the rights and responsibilities. | penalty provided by law, the applicant states that the he knowledge of the signer. Signer agrees to operate lities conferred by the license(s), if granted, will not b oremises during inspection will be deemed a refusal to ds for revocation of this license. | the business according ne assigned to another. |
| on this application may be required to form Multiplication, Frem (Officer of Corporation/Member of LLC/Partner | th House Director 7/19/21 (Date) | ially false information |
| Clerk's Office checklist for complete | e applications | |
| □ WI Seller's Permit Certificate (matching articles of incorporation) □ FEIN □ Written description of premises | ☐ Background investigation form(s) ☐ Form for surrender of previous license ☐ *Articles of Incorporation ☐ *Appointment of Agent * Corporation/LLC only | Floor Plans Lease Business Plan **Sample Menu ** Class B only |
| ☐ Orange sign ☐ Orange busine | e Clerk's Office issued to the application: ess card se in the City of Madison" brochure with contact | : information |
| Date complete application filed with Class | | |
| Date complete application filed with Cler | k's Office | |