

## Liquor/Beer License **Application**

| (Agenda Item Num            | ber)                      |
|-----------------------------|---------------------------|
| (Legistar file numbe        | er)                       |
| CICLIA-à                    | 2023-00108                |
| (License number)            |                           |
| 17                          | 520                       |
| (Alder District #) Office I | (Police Sector)  Jse Only |

|  | City of Madison Clerk       |
|--|-----------------------------|
| _/ _/ _                                    | 210 MLK Jr Blvd, Room 103   |
| Class A: ☑ Beer, ☑ Liquor, ☐ Cider         | Madison, WI 53703           |
| Class B: $\square$ Beer, $\square$ Liquor, | licensing@citvofmadison.com |

|   | ☐ Class C Wine 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.  Ameer Investment Inc |  |  |  |
| 2.  | Trade Name (doing business as) I Mart WIØ104   |  |  |  |
| 3.  | Address to be licensed 5551 East park Blvd, Madison WI 53718   |  |  |  |
| 4.  | Mailing address 15416 5 70th Ct, Orland Park IL 60462  |  |  |  |
| 5.  | Anticipated opening date <u>as soon as approved</u>  |  |  |  |
| 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? ☑ No ☐ Yes (explain)  |  |  |  |
| Sec   | tion B—Premises  |  |  |  |
| 8. Describe in words the building or buildings where alcohol beverages are to be sold and<br>stored. Include all rooms including living quarters, if used, and any outdoor seating used fo<br>the sales, service, and/or storage of alcohol beverages and receipts. Alcohol beverages may<br>be sold and stored only on the premises as approved by Common Council and described on<br>license. |  |  |  |  |
|   | Single story retail convenience store  |  |  |  |
|   |  |  |  |  |

| 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.   |
|      | Parking in front of building. Monitored by video  |
|      | cameras.  |
| 11.  | Was this premises licensed for the sale of liquor or beer during the past license year?   |
|      | □ No □ Yes, license issued to <u>IYS Ventures UC</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 William Clark  |
|      | City, state in which agent resides Deforest, WI   |
|      | 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 <u>02·01-2023</u>   |
| 16.  | State and date of registration of corporation, nonprofit organization, or LLC.  Wisconsin 12-07-2022  |
| 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 Munadel Rizek Palos Hills, IL   |
| 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.  Tracey Bowman, 1040 Bergslien St, Baldwin WI 5400Z. |
| 19.  | Is applicant a subsidiary of any other corporation or LLC?  |
|      | ☑ No ☐ Yes (explain)  |
| 20.  | Does the corporation, any officer, any director, any stockholder, liquor agent, LLC, any member, or any manager hold any interest in any other alcohol beverage license or permit in Wisconsin?   |
|      | □ No □ Yes (explain) In process of license applications - see attached list.  |
|      | attached 115t.  |

| AMEER INVESTMENT INC - WISCONSIN LOCATIONS LIQUOR LICENSE APPLICATIONS IN PROGRESS |                            |               |    |       |
|--|----------------------------|---------------|----|-------|
| LIQUOR LICENS  | SE APPLICATIONS IN PROGRE  | 55            |    |       |
| STORE#   | ADDRESS                    | CITY          |    | ZIP   |
| Imart WI0003   | 237 Keller Ave S           | Amery         | WI | 54001 |
| Imart WI0005   | 1040 Bergslien St.         | Baldwin       | WI | 54002 |
| Imart WI0010   | 311 Belknap St             | Superior      | WI | 54880 |
| Imart WI0054   | 1 Hewett St                | Neillsville   | WI | 54456 |
| Imart WI0057   | 706 N 4th St               | Tomahawk      | WI | 54487 |
| Imart WI0063   | 406 Belknap st             | Superior      | WI | 54880 |
| Imart WI0075   | 314 E Badger St            | Waupaca       | WI | 54981 |
| Imart WI104  | 5551 Eastpark Blvd         | Madison       | WI | 53718 |
| Imart WI102  | 4701 Burma Rd.             | McFarland     | WI | 53558 |
| Imart WI100  | 4800 Larson Beach Rd.      | McFarland     | WI | 53558 |
| Imart WI106  | 109 N. Main St.            | Deerfield     | WI | 53531 |
| Imart WI116  | 206 W Madison St.          | Lake Mills    | WI | 53551 |
| Imart WI108  | 303 S. Main St.            | Fort Atkinson | WI | 53538 |
| Imart WI114  | 819 N. Main St. (Tyranena) | Lake Mills    | WI | 53551 |
| Imart WI112  | 300 W. Madison St.         | Waterloo      | WI | 53594 |
| Imart WI110  | 880 Linmar Ln.             | Johnson Creek | WI | 53038 |

All convenience store locations. Off sale only.

| Section D—Business Plan  21. What type of establishment is contemplated?  ☐ Tavern ☐ Nightclub ☐ Restaurant ☐ Liquor Store ☐ Grocery Store |  |                |               |                                       |                  |                |               |
|--|--|----------------|---------------|---------------------------------------|------------------|----------------|---------------|
|  | ☐ Convenience Store without gas pumps ☐ 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?   No  Yes   |                |               |                                       |                  |                |               |
| 23.  | Hours of ope   | ration: pleas  | e enter openi | ing and closing                       | times in the     | table below.   |               |
|  | Sunday   | Monday         | Tuesday       | Wednesday                             | Thursday         | Friday         | Saturday      |
|  |  |                |               | 5A - 9P                               |                  |                |               |
|  | (Class B on  | ly) Enter beld | ow any hours  | when food ser                         | vice will not b  | e available,   | if applicable |
|  | -  | -              | _             |                                       | -                | -              | ***           |
| This<br>(con<br>24.  | is section E—Consumption on Premises his section applies to Class B and Class C applicants only. Class A license applicants honsumption off premises) may skip to Section F.  I. Indicate any other product/service offered.  J. 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:  % Alcohol % Food % Other  If applicable, describe "Other": % Other |                |               |                                       |                  |                |               |
| 26   | Do you have written records to document the percentages shown?  No Yes You may be required to submit documentation verifying the percentages indicated.  No Yes—what kind?   |                |               | ted.                                  |                  |                |               |
| 26.  | Do you plan  | to nave live e | entertainmen  | tr LI NO LI                           | res—what k       | <u></u>        |               |
|  |  |                |               | music (except :<br>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.  | 3. I understand that I am required to host an information session at least one week before the ALRC meeting. $\square$ No $\ \boxdot$ Yes  |                |               |                                       |                  |                |               |
| 29.  |  |                |               | this location to<br>sion. 🗖 No 🏻      | discuss my a Yes | pplication an  | nd to invite  |

| 30. | I agree to contact the Police Department District Captain for this location prior to the ALRC meeting.   No Yes   |
|-----|---|
| 31. | I agree to contact the Deputy Clerk prior to the ALRC meeting. $\square$ No $\square$ Yes   |
| 32. | I agree to contact the neighborhood association representative prior to the ALRC meeting. $\hfill\square$<br>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 180 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? $\square$ No $\square$ Yes   |
| Sec | tion G—Information for Clerk's Office   |
| 37. | This application is for the license period ending June 30, 20_23  |
| 38. | State Seller's Permit 4 5 6 - 1 0 3 1 1 8 3 4 4 4 - 0 4   |
|     | Federal Employer Identification Number 92 - 1275778   |
|     | Who may we contact between 8 a.m. and 4:30 p.m. regarding this license?   |
|     | Contact person Heather Barclay  |
|     | Business phone 708-966-0514 Business e-mail address ameer investince  |
|     | 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, e comité remitirá su solicitud para una nueva junta y esto puede atrasar el proceso de su solicitud. |
| 41. | Corporate attorney, if applicable: Name   |
|     | Phone E-mail  |

| <b>NOTICE:</b> Completed application are due by Monday) to get on the agenda for the proce <b>must</b> be accompanied by the following item   | noon of the third Monday (fourth, if the Clerk's officeding months Alcohol License Review Committee. Ans:   | ice is closed on the third<br>A completed application                  |  |  |
|---|---|--|--|--|
| Copy of State Seller's Permit (Not Business Tax Registration Certificate), Appointment of Agent (if Corp/LLC),  Member background investigation forms, Articles of Incorporation (if Corp/LLC), Floor Plans,  Copy of Lease, Business Plan, and Sample Menu (if applying for Class B license) |   |  |  |  |
| If required items are missing, the application office until all requirements are submitted.   | on will not be considered complete and will not be a No exceptions are made.  | ccepted by the Clerk's   |  |  |
| been truthfully completed to the best of the<br>to law, and that the rights and responsibility  | enalty provided by law, the applicant states that the<br>e knowledge of the signer. Signer agrees to operate<br>ies conferred by the license(s), if granted, will not be<br>emises during inspection will be deemed a refusal to<br>s for revocation of this license. | the business according<br>be assigned to another.                      |  |  |
| Penalty for materially false application information: Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.  |   |  |  |  |
| (Officer of Corporation/Member of LLC/Partner/S   | Sole Proprietor) (Date)   |  |  |  |
| Clerk's Office checklist for complete a   | pplications   |  |  |  |
| 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  | ☐ Floor Plans ☐ Lease ☐ Business Plan ☐ **Sample Menu  ** Class B only |  |  |
| Upon Application Submission, the Clerk's Office issued to the application:  |   |  |  |  |
| ☐ Orange sign ☐ Orange business card  |   |  |  |  |
| ☐ "Applying for a Liquor/Beer License in the City of Madison" brochure with contact information   |   |  |  |  |
| Date complete application filed with Clerk's Office   |   |  |  |  |
| Date of ALRC meeting Date license granted by Common Council   |   |  |  |  |
| Date license issued   |   |  |  |  |