

Streatery Extension of Premises

Fee: Waived (License no

Class A: Beer, Liquor, Cider

Class B: \square Beer, \square Liquor,

☐ Class C Wine

City of Madison Clerk 210 MLK Jr Blvd, Room 103 Madison, WI 53703 licensing@cityofmadison.com 608-266-4601

| (Agenda Item Number) |
|--|
| (Legistar file number) |
| LICPCH - 2020-00344 (License number) |
| (Alder District #) (Police Sector) Office Use Only |

Streatery extension of premises is available only to those restaurants whose sale of alcohol beverages are 50% or less of the establishment's gross receipts. Application must be submitted to the Clerk's office. Staff will review the application and if it is complete and approved by Zoning and/or the street vending coordinator, provisionally approve and forward to the Alcohol License Review Committee for final approval recommendation. Any licensed establishment applying to extend their premises onto City property must provide a certificate of insurance for liquor liability including a separate additional insured endorsement naming the City of Madison with this application.

| insured endorsement naming the City of Madison with this application. |
|---|
| Are you requesting this temporary extension of licensed premises, in compliance with Emergency Order Resolution Legistar #60695 (Madison Streatery Program), adopted by the Common Council on June 2, 2020?: ✓ Yes □ No |
| Required detailed floor plans of extension area included: Yes |
| Required approval of expanded eating area obtained from Street Vending Coordinator or Zoning Administrator included : Yes, date approved: |
| Street Occupancy Permit obtained from Traffic Engineering: Yes No N/A |
| Does lease/deed cover area request for temporary extension?: Yes \(\sum \) No If no, must attach letter from landlord or property owner authorizing use of the property. |
| Licensed Premises Information |
| This application modifies existing alcohol license number: <u>2013-00395</u> |
| Business dba Name: HAVMAL Box 9 6011 Licensed Address: HAVMAL Box 9 6011 Liquor/Beer Agent Name: BANDY (Zachos) % Alcohol, 50 % Food,% Other Alder, District #: Lummal Police Sector: |
| Corporate Information |
| Business Legal Name (as on WI State Sellers Permit): |
| Business Mailing Address: 701 HWW HL MidSM W 53704 |
| Business Contact Name, Position: Wille Nada, Owner |
| Business Phone: 1848/98/ Business Email: NUTUINATION @ SMAIL CAContinue on Back- |

| Extension Details |
|---|
| Current Capacity (indoor): Current Capacity (outdoor): |
| Proposed Capacity (outdoor): 50 |
| |
| Description of Proposed Changes: <u>See a Harbed</u> |
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| |
| Signature |
| 98/ari, 6/12/20 |
| Authorized Signature of Agent or Establishment Owner Date |
| Clerk's Office checklist for complete applications |
| Floor Plans |
| Copy of approval from Street Vending/Zoning |
| ☐ Copy of Street Occupancy Permit included <i>if applicable</i> |
| Letter from landlord/property owner authorizing temporary extension of lease area if applicable Certificate of Insurance for liquor liability with City of Madison named if extending on city property |
| Upon Application Submission, the Clerk's Office issued to the application: |
| ☐ Orange sign ☐ Orange business card |
| □ "License Renewals & Changes" brochure with next steps issued |

Sant Car Sells

June 12, 2010

This letter authorizes Harmony Bar & Grill to temporarily extend the lease area outdoors.

Sincerely,

Elizabeth Nardi

Owner/Member BBC Atwood Properties LLC

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OP ID: CM

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 05/28/2020

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 have ADDITIONAL INSURED provisions or 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).

| this certificate does not confict rights to the certificate notation in hea of each enteriority. | | | | | | |
|--|---------------------|--|---------|-------|--|--|
| PRODUCER | 608-783-5206 | CONTACT Christa Morris | | | | |
| Fleis Insurance Agency Inc. 1824 E. Main Street | | PHONE (A/C, No, Ext): 608-783-5206 | 33-5209 | | | |
| P O Box 537 | | E-MAIL ADDRESS: Cmorris@fleisinsurance.com | | | | |
| Onalaska, WI 54650 Gary F. Luecke | | INSURER(S) AFFORDING COVERAGE | | NAIC# | | |
| Gary F. Edecke | | INSURER A: Society Insurance | | 15261 | | |
| INSURED | | INSURER B: | | | | |
| BBC Harmony Bar LLC BBC Atwood Properties LLC | | INSURER C: | | | | |
| BBC Harmony Bar LLC BBC Atwood Properties LLC Harmony Bar & Grill 2201 Atwood Ave Madlson, WI 53704-5601 | | INSURER D: | | | | |
| , | | INSURER E: | | | | |
| | | INSURER F: | | | | |
| COVERAGES | CERTIFICATE NUMBER: | REVISION NU | MBER: | | | |

| COVERAGES | CERTIFICATE NOWBER. | TEVIOION NOMBER. |
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| INDICATED. NOTWIT | THSTANDING ANY REQUIREMENT, TERM OR CONDITION OF AN | Y CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS |
| OFFICIONTE MAY D | E ISSUED OF MAY DEPTAIN THE INSURANCE AFFORDED BY | THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS. |

CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED FXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

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| r | A | X | COMMERCIAL GENERAL LIABILITY | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | | | EACH OCCURRENCE | Ψ | 0,000 |
| ١ | | | CLAIMS-MADE X OCCUR | Х | | TRM 565789 | 08/19/2019 | 08/19/2020 | DAMAGE TO RENTED PREMISES (Ea occurrence) | \$ 100 | 0,000 |
| ١ | | Х | Business Owners | ^ | | | | | MED EXP (Any one person) | | 0,000 |
| ١ | | ^ | - Dudinedo Ownord | | | | | | 1 | 4 000 | 0,000 |
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| | | Х | POLICY PRO- JECT LOC | | | | | | PRODUCTS - COMP/OP AGG | \$ 2,000 | 0,000 |
| 1 | | | OTHER: | | | | | | | \$ | |
| H | Δ | ALLT | OMOBILE LIABILITY | | | | | | COMBINED SINGLE LIMIT (Ea accident) | s 1,000 | 0,000 |
| 1 | ^ | AUI | | | | TDM 606700 | 08/19/2019 | 00/40/2020 | | · · | |
| 1 | | | ANY AUTO OWNED SCHEDULED | | | TRM 565789 | 08/19/2019 | 06/19/2020 | BODILY INJURY (Per person) | \$ | |
| 1 | | | AUTOS ONLY AUTOS | | | | | | BODILY INJURY (Per accident) | \$ | |
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| | Α | WOR | KERS COMPENSATION EMPLOYERS' LIABILITY | | | | | | X PER OTH- STATUTE ER | | |
| ١ | | ANV | DECEDENCE DE LE | | | WC 565790 | 08/19/2019 | 08/19/2020 | E.L. EACH ACCIDENT | \$ 500 | 0,000 |
| ١ | | OFFI (Man | CER/MEMBER EXCLUDED? | N/A | | | | | E.L. DISEASE - EA EMPLOYEE | s 50 | 0,000 |
| ١ | | If ves | . describe under | | | | | | E.L. DISEASE - POLICY LIMIT | 50 | 0,000 |
| ŀ | | DES | CRIPTION OF OPERATIONS below | | - | | | | L.L. DIOLAGE OF OLIGIT LIMIT | Ψ | |
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DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

SPORTSBAR/2201-2205 & 2211 ATWOOD AVE Madison WI 53703 Added Additional insured and 30 day notice of cancellation

| CERTIFICATE HOLDER | | CANCELLATION |
|--|------|--|
| City of Madison | ҮМА2 | SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. |
| Room 406 Risk Manager 210 Martin Luther King Jr Blvd Madison, WI 53703 | 596 | AUTHORIZED REPRESENTATIVE |

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City of Madison Site Plan Verification

PROJECT: LNDSPR-2020-00054

Address: 2201 Atwood AVE

Current Revision #: 0

Submitted by:

Harmony Bar and Grill

Contact:

Brennan Nardi

(608) 438-9804

nardiharmony@gmail.com
Permitted Use Site Plan Review

Project Type:
Description:

Temporary Outdoor Seating in parking lot for Restaurant-tavern, valid until October 25, 2020

Status:

Approved

Revision History:

0

| Review | Status | Reviewer | Reviewed |
|----------------------------|----------|------------------|-------------|
| Fire Review | Approved | William Sullivan | Jun 10 2020 |
| Traffic Engineering Review | Approved | Timothy Stella | Jun 12 2020 |
| Zoning Review | Approved | Matthew Tucker | Jun 12 2020 |

TRAFFIC ENGINEERING

Supplement Accepted

Comment Date: 06/10/2020

Email a revised electronic copy of the site plan, .pdf preferred, to Tim Stella - tstella@cityofmadison.com

Supplement Accepted

Comment Date: 06/10/2020

The applicant shall place type 3 reflective barricades or reflective barrels across driveway apron.

ZONING

Note

Comment Date: 06/11/2020

Place a table on a paved (concrete or asphalt) area to comply with the requirement to provide accessible seating.





City of Madison Building Inspection Division

215 Martin Luther King Jr Blvd, Suite 017 PO Box 2984 Madison, WI 53701-2984
608.266.4551 http://www.cityofmadison.com/dpced/bi/

Temporary Outdoor Seating Application

BE SURE TO INCLUDE THE FOLLOWING WITH YOUR APPLICATION: OFFICE USE ONLY Permit Number: LND SPR -20 テロ、000 S Site Plan showing location of outdoor seating. If you do 6-4-20 Application Date not have site plan, please Zonina@citvofmadison.com to request a PDF copy. Issued Date 12-20 mwx Approved by Property owner's approval Zoning District **Location Address Business Name Contact Person** Telephone Which of the following best describes the Use? Brewpub Coffee shop or Tea House Restaurant (You do NOT have an alcohol license) Restaurant-nightclub (You have an entertainment license) Restaurant-tavern (You have an alcohol license) Do you have an existing outdoor seating Conditional Use approval? Do you have an existing liquor license? Your capacity limit set by Building Inspections: I understand the temporary outdoor eating area requirements as listed on the following page and understand once this application is approved, it is only valid until October 25, 2020. Any violations of the temporary accessory outdoor eating area approved by the Zoning Administrator shall be enforceable by the Zoning Administrator as ordinance violations under Chapter 28, Madison General Ordinances. Applicant signature: Owner's signature*:

^{*} Or attached separate letter of approval from owner

^{***} Please see following page for temporary outdoor seating requirements and Site Plan requirements ***

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Temporary Outdoor Seating Requirements

All temporary outdoor eating areas approved through this review are subject to the following requirements:

- 1. Hours of Operation
 - New Outdoor Eating Areas: between 7am Dusk, as approved by the Zoning Administrator
 - Expanded existing Outdoor Eating Areas: Hours shall be set as provided in existing Conditional Use approval.
- 2. No outdoor amplified sound in new or expanded outdoor seating areas.
- 3. Additional Exterior lighting required for any expanded existing seating areas operating after dusk shall comply with Code requirements.
- 4. The Zoning Administrator, Traffic Engineer, and City of Madison Fire Department shall approve any outdoor seating under this order.
- 5. The site must be operated in conformance with all City of Madison Fire requirements for building accessibility, and regulations from Public Health Madison & Dane County.
- 6. Tables, chairs, barricades, and fencing shall be safely secured on site when not in use.
- 7. If alcohol is served, signs shall be displayed for patrons stating that alcohol must stay within the seating area.
- 8. This temporary approval shall expire on October 25th, 2020.

More information and guidelines for the Streatery Restaurant Recovery Program can be found here.

Site Plan Review Requirements

The site plans shall be drawn to scale and shall accurately reflect the location and layout for the temporary facility. Temporary outdoor eating areas may be located in parking spaces or other paved areas on the zoning lot immediately adjacent to the tenant space, and must be designed to be accessible for persons with disabilities. The amount of parking replaced with seating will be approved on a case by case basis. Under no circumstance may the combined indoor and proposed outdoor seating exceed maximum capacity of persons, as established by the Building Inspection Division.

The site plan shall identify the tenant space and layout of the outdoor seating located on the site. Seating areas in parking lots shall be located behind traffic barriers, such as cones, type 3 barricades, portable fencing, etc., which shall be identified on the site plan. Seating areas for establishments with liquor licenses must secure the seating area with "light fencing". Seating areas may not impede any vision triangles or accessible routes. If tents will be used, show location and dimensions of tents on the site plan. Additionally, no parking for disabled persons may be repurposed for outdoor eating areas, unless those spaces are relocated elsewhere on the property, which will need to be shown on the site plan, to confirm the location and width meets code requirements.

No permanent structures may be erected under this temporary approval. Tents that are 10 feet by 10 feet in size or smaller may be erected in parking spaces to provide shade for the dining area. The City of Madison Fire Department requirements are listed under "Madison General Ordinance (MGO) 29.355 - Use of Tents for Merchandising and Display; Wisconsin Administrative Code Chapter COMM 62; and 14, International Fire Code Chapter 24." If you have any questions regarding the above requirements telephone the Fire Prevention Division at 266-4420. Link to requirements.

If you do not have a site plan of your lot, please email **Zoning@cityofmadison.com** to request a PDF copy.

The completed application, property owner approval letter, and site plan are to be emailed to Zoning@cityofmadison.com for agencies review. Any questions regarding this temporary outdoor seating application can be sent to Zoning@cityofmadison.com.

Server and Subject Server Requirements

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