

Liquor/Beer License Application

(Agenda Item Nur	mber)
(Legistar file num	ber)
LICLIB-20	122-00722
(License number)	
9	125
(Alder District #)	
Office	Use Only

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

Class B: Beer, Liquor,

Clas	ss B: Beer, Liquor, <u>licensing@cityofmadison.com</u> Class C Wine 608-266-4601						
Sec	ction A – Applicant 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. Southern Wisconsin Huts LLC						
2.	Trade Name (doing business as) Pizza Hut						
3.	Address to be licensed 7440 Mineral Point Rd Madison WI 53719						
4.	Mailing address 202 W BERRY ST STE 400 FT. WAYNE IN 46802						
5.	Anticipated opening date June 278, 2022						
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 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.						
	All of the premise located at 7440 Mineral Point Rd Madison WI 53719						
	Beer will be stored in a walk-in cooler in the kitchen						
	Beer will be sold from small cooler near the order counter						

9.		remises consumption or Outdoor:	dy. Estimated capacity (patrons and employees 0	,):	
10					
10.	Describe existing parking and how parking lot is to be monitored.				
	Parking all the way around the building.				
	Monitored by em	ployees			
11.	Was this premises I	icensed for the sale of li	quor or beer during the past license year?		
	□ No ■ Yes, lic	cense issued to Pizza H	ut of Southern Wisconsin Inc. (name of licensee	e)	
This	• •		ganizations, and Limited Liability Companies to Section D.		
12.	. Name of liquor license agent Clint Miller				
	. City, state in which agent resides Wisconsin				
14.	. How long has the agent continuously resided in the State of Wisconsin? 35 yrs				
15.					
	☐ No, but will com	eting Yes, date completed 6.17.22	_		
16.	. State and date of registration of corporation, nonprofit organization, or LLC.				
17.		ist the directors of your and check forms for each	corporation or the members of your LLC. n director/member.		
	Title	Name	City and State of Residence		
	President/CEO	Todd Hollman	Huntington IN		
	CFO	Matthew Fortney	Fort Wayne IN		
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. Corporation Service Company 8040 Excelsior Dr Ste 400 Madison WI 53717				
19.	Is applicant a subsid	diary of any other corno	ration or LLC2		
1).	Is applicant a subsidiary of any other corporation or LLC? ☐ No ☐ Yes (explain) Freeland Group Restaurants, Inc.				
20.					
	□ No ■ Yes (ex	(plain) Applying for Class B	licenses at Pizza Hut located in: Beloit, Dodgeville, Janesville	е,	
	Mauston, Madison, Monroe, Platteville, Portage, Richland Center, Stought				

Section D—Business Plan							
21.	. What type of establishment is contemplated? □ Tavern □ Nightclub ■ Restaurant □ Liquor Store □ Grocery Store					tore	
	☐ Convenie	ence Store wi	thout gas pur	mps 🛮 Conv	enience Stor	e with gas pu	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? \square No \square Yes $\boxed{\checkmark}$ N/A						
23.	Hours of operation: please enter opening and closing times in the table below.						
	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
	10:00 - 11:00	10:00 - 11:00	10:00 - 11:00	10:00 - 11:00	10:00 - 11:00	10:00 - 12:00	10:00 - 12:00
	(Class B on	ly) Enter belo	ow any hours	when food ser	vice will not b	pe available,	if applicable
	SAME AS ABOVE	-	-	-	-	-	-
This (cor	is section E—Consumption on Premises is section applies to Class B and Class C applicants only. Class A license applicants insumption off premises) may skip to Section F. Indicate any other product/service offered. Restaurant offering food and non-alcoholic beverages Indicate any other product/service offered. Restaurant offering food and non-alcoholic beverages Indicate any other product/service offered. Restaurant offering food and non-alcoholic beverages Indicate any other product/service offered. Restaurant offering food and non-alcoholic beverages Indicate any other product/service offered. Restaurant offering food and non-alcoholic beverages Indicate any other product/service offered. Restaurant offering food and non-alcoholic beverages Indicate any other product/service offered. Restaurant offering food and non-alcoholic beverages Indicate any other product/service offered. Restaurant offering food and non-alcoholic beverages Indicate any other product/service offered. Restaurant offering food and non-alcoholic beverages Indicate any other product/service offered. Restaurant offering food and non-alcoholic beverages Indicate any other product/service offered. Restaurant offering food and non-alcoholic beverages Indicate any other product/service offered. Restaurant offering food and non-alcoholic beverages Indicate any other product/service offered. Restaurant offering food and non-alcoholic beverages Indicate any other product/service offered. Restaurant offering food and non-alcoholic beverages Indicate any other product/service offered. Restaurant offering food and non-alcoholic beverages Indicate any other product/service offered. Restaurant offering food and non-alcoholic beverages Indicate any other product/service offered. Restaurant offering food and non-alcoholic beverages Indicate any other product/service offered. Restaurant offering food and non-alcoholic beverages Indicate any other product/service offered. Restaurant offering food and non-alcoholic beverages Indicate any						
26.	Do you have written records to document the percentages shown? ☐ No ☐ Yes You may be required to submit documentation verifying the percentages indicated. 6. Do you plan to have live entertainment? ☐ No ☐ Yes—what kind?						
	If planned entertainment includes live music (except solo acoustic), a DJ, or a designated dance floor, please also complete an Entertainment License. Section F—Required Contacts and Filings						
	I understand that liquor/beer license renewal applications are due April 15 of every year, regardless of when license was initially granted. \square No \blacksquare Yes						
28.	I understand that I am required to host an information session at least one week before the ALRC meeting. \square No \blacksquare Yes						
29.				this location to sion. No		pplication ar	id to invite

30.	I agree to contact the Police Department District Captain for this location prior to the ALRC meeting. \square No \blacksquare Yes					
31.	I agree to contact the Deputy Clerk prior to the ALRC meeting. No Yes					
32.	I agree to contact the neighborhood association representative prior to the ALRC meeting. \square No \blacksquare 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. ☐ No ☐ Yes					
34.	I understand we must file a Special Occupational Tax return (TTB form 5630.5) before beginning business. [phone 1-800-937-8864] □ No ■ 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] No Yes					
36.	Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? \blacksquare No \square Yes					
Sec	tion G—Information for Clerk's Office					
37.	This application is for the license period ending June 30, 20^{23} .					
	State Seller's Permit <u>4 5 6 - 1 0 3 1 0 7 3 0 3 4 - 0 4</u>					
39.	Federal Employer Identification Number 88-2201298					
	Who may we contact between 8 a.m. and 4:30 p.m. regarding this license? Contact person Annette Johnson					
	Business phone 612-220-8235 Business e-mail address annette@ajlicensing.com 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					
	Phone E-mail					

Monday) to get on the agenda for the procumust be accompanied by the following iter	eeding months Alcohol License Review Committee. A ms:	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 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 ies conferred by the license(s), if granted, will not b emises 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 inforon this application may be required to forfe	mation: Any person who knowingly provides materi it not more than \$1,000.	ially false information			
1/htt 195					
(Officer of Corporation/Member of LLC/Partner/S	Sole Proprietor) (Date)				
Clerk's Office checklist for complete a	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			
Upon Application Submission, the	Clerk's Office issued to the application:				
☐ Orange sign ☐ Orange business					
	e in the City of Madison" brochure with contact	information			
Date complete application filed with Clerk's					
Date of ALRC meeting Date		- 100			
	ata licanca issued	100 0			

NOTICE: Completed application are due by noon of the third Monday (fourth, if the Clerk's office is closed on the third