

Liquor/Beer License Application

City of Madison Clerk

(Agenda Item I	Number)
(Legistar file nu	ımber)
EICUB.	2021-00200
(License numbe	er)
4	403
(Alder District	
Offic	ce Use Only

	SS A: Beer, Liquor, Cider Madison, WI 53703 SS B: Beer, Liquor, Licensing@cityofmadison.com
	Class C Wine 608-266-4601
Sec 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. COPHAM STREET HOSP, HALITY IC
2.	Trade Name (doing business as)
3.	Address to be licensed 408 WEST GORHAM STREET
4.	Mailing address 408 WEST GORHAM STREET. MADISON, WI. 53703
5.	Anticipated opening date August 15th, 2021
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 X Yes (explain) Next Five 1/e / Jba The Double U
Sec	ction B—Premises
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.
	MAIN FLOOR BAR. BASEMENT COOLERS.
	SECOND FLOOR BAR
	Third FLOOR BAR AND Outdoor Patio(ROOFtop)
	MAIN Floor Patio - behind Building
	MAIN Floor Patio - behind Building

9.	Applicants for on-premises consumption only. Estimated capacity (patrons and employees):
_ 1	Indoor: Outdoor:
10.	Describe existing parking and how parking lot is to be monitored. NA
11.	Was this premises licensed for the sale of liquor or beer during the past license year? □ No 🌣 Yes, license issued to (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 T. Rudy
13.	City, state in which agent resides
14.	How long has the agent continuously resided in the State of Wisconsin? 62 years
15.	Has the liquor license agent completed the responsible beverage server training course?
	\square No, but will complete prior to ALRC meeting \nearrow Yes, date completed 2009
16.	State and date of registration of corporation, nonprofit organization, or LLC. NISUMSIA, 2009
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 ON NER William Tirudy Officer, 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 Yes (explain) Next Five IIC / Madown Ventures IIC
20.	

Sec : 21.	ection D—Business Plan 1: What type of establishment is contemplated? □ Tavern □ Nightclub ☒ Restaurant □ Liquor Store □ Grocery Store						
	☐ Convenie	nce Store wit	hout gas pun	nps 🛭 Conv	enience Store	with gas pu	mps
	☐ Other						
	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						
23.	Hours of ope	ration: pleas	e enter openi	ng and closing	times in the t	cable below.	
	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
	12:00 - 9:00	X	4.00 -close legal	4:00 - Close legal when food ser	Lt.00 - Close regal	4:00 - close legal	11:00-cluse
	(Class B on	ly) Enter belo	ow any hours T	when food ser	vice will not <u>t</u>	e available,	іт арріісавіе
	-	-	_	-	_	-	-
This (cor	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.						
	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						
	If applicable	, describe "O	ther":				
	You may be	required to s	submit docum	nent the percen nentation verify	ing the perce	ntages indica	
26.	. Do you plan to have live entertainment? No Yes—what kind? DJ'S					15	
	and small bands						
	If planned e dance floor,	ntertainment please also o	: includes live complete an E	e music (except Entertainment l	solo acoustic License.	e), a DJ, or a	designated
Se c 27.	regardless c	d that liquor/ of when licens	beer license i se was initiall	renewai applica y granted. 🗖	No DAI Yes		
28.	I understand ALRC meeti	d that I am rong. No	equired to ho X Yes	st an informati	on session at		
29.	I agree to c	ontact the Ale	derperson for	this location to	o discuss my	application a	nd to invite

2	I agree to contact the Police Department District Captain for this location prior to the ALRC meeting. No X Yes
31.	I agree to contact the Deputy Clerk prior to the ALRC meeting. No X Yes
32.	I agree to contact the neighborhood association representative prior to the ALRC meeting. \square No \square Yes
	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. No Yes
	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
	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	ction G—Information for Clerk's Office
37.	This application is for the license period ending June 30, $20\overline{22}$.
38.	State Seller's Permit 4 5 6 - 1 0 3 0 7 1 7 8 6 2 0 2
39.	Federal Employer Identification Number 86-3437948
40.	to the true on 9.5 m, and 4:30 n, m, regarding this license?
	Contact person WILLIAM T. RUPY
	Business phone 608.628.5226 Business e-mail address bill MALtown Vertues.com
	Preferred languageENGLISH
	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?
	□ No. Si usted escoge "no" en la solicitud/aplicación, y usted si requiere un/a interprete, el comité remitirá su solicitud para una nueva junta y esto puede atrasar el proceso de su solicitud
41	. Corporate attorney, if applicable: Name Att FlemiNG
1.4	Phone E-mail

NOTICE: Completed application are due by Monday) to get on the agenda for the procedemust be accompanied by the following item	noon of the third Monday (fourth, if the Clerk's offic eding months Alcohol License Review Committee. A s:	e is closed on the third completed application			
☐ Member background investigation forms	less Tax Registration Certificate), \square Appointment of \square Articles of Incorporation (if Corp/LLC), \square Flood Sample Menu (if applying for Class B license)	F Agent (if Corp/LLC), or Plans,			
If required items are missing, the application Office until all requirements are submitted.	n will not be considered complete and will not be acc No exceptions are made.	cepted by the Clerk's			
been truthfully completed to the best of the	nalty provided by law, the applicant states that the knowledge of the signer. Signer agrees to operate to es conferred by the license(s), if granted, will not be emises during inspection will be deemed a refusal to for revocation of this license.	the business according assigned to another.			
Penalty for materially false application inform on this application may be required to forfei (Officer of Corporation/Member of LLC/Partner/S		illy false information			
Clerk's Office checklist for complete a	pplications				
□ WI Seller's Permit Certificate (matching articles of incorporation)□ FEIN	 □ Background investigation form(s) □ Form for surrender of previous license □ *Articles of Incorporation □ *Appointment of Agent 	☐ Floor Plans☐ Lease☐ Business Plan☐ **Sample Menu			
☐ Written description of premises	* Corporation/LLC only	** 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	☐ "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 Da	ate license granted by Common Council				
Date provisional issued Da	te license issued				