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City of Madison Liquor/Beer License Application On-Premises Consumption: Class B Beer Class B Liquor Class C Wine

Mac	tison Off-Premises Consumption: ☐ Class A Beer ☐ Class A Liquor
Se (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 mage delay your application process)
2.	This application is for the license period ending June 30, 20_14
3.	List the name of your □ Sole Proprietor, □ Partnership, □ Corporation/Nonprofit Organization of Limited Liability Company exactly as it appears on your State Seller's Permit. Chinchilla JDK L.L.C.
4.	Trade Name (doing business as) Red Rock Salcon
5.	Address to be licensed 322 W. Johnson Street Madison, WI 53703
3.	Mailing address 1227 N. Water Street Milwaukee, WT 53202
7.	Anticipated opening date November 2013
8.	Is the applicant an employee or agent of, or acting of behalf of anyone except the applicant named in question 2? ☑ No ☐ Yes (explain)
9.	Does another alcohol beverage licensee or wholesale permitee have interest in this business?
	□ No Yes (explain) I hold a liquor license in Milwaukee, I
	ction B—Premises 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 records. Alcohol beverages may be sold and stored only on the premises as approved by Common Council and described on license.
	Located at 322 W. Johnson Street Madison, WI. The space is
	approximately 9,000 sqft where there will be two interior
	bars. One in the center of the restaurant and one on the
	north east side of the building. The patio is approximately
	500 sq ft.
11.	Attach a floor plan, no larger than 8 ½ by 14, showing the space described below.
12.	Applicants for on-premises consumption: list estimated capacity <u>395</u>

13.	Describe existing p	arking and how parking lo	ot is to be monitored.	
	approximately	y 20 parking s	pots monitored k	by staff
	* *		east side of the	
11			uor or beer during the past	9
17.	•	·		•
	□ No 🂢 Yes, lic	cense issued to <u>Joe</u>	Dendetti	(name of licensee)
15.	☐ Attach copy of le	ease.		
This Sole	proprietorships and	orporations, nonprofit orga I partnerships, skip to Sec		
16.	Name of liquor lices	nse agent <u>Jeffrey</u>	A. Kovacovich Jr	<u>.</u>
17.		agent resides Milwau		
18.	How long has the a	igent continuously resided	I in the State of Wisconsin?	33 years
19.			nd check form are attached	•
20.	Has the liquor licen	se agent completed the re	esponsible beverage server	training course?
	☐ No, but will com	plete prior to ALRC meeti	ng 🕱 Yes, date complete	ed
21.	State and date of re	egistration of corporation,	nonprofit organization, or L	LC.
	Wisconsin,	6/20/2013		
22.		•	rporation or the members o	f your LLC.
	☐ Attach backgrou	and check forms for each on Name	director/member. City and State of Residence	20
	President	Jeffrey Kovacovich	Milwaukee, WI	56
	Vice President	Andrew Deuster	Milwarkee, WI	
	Secretary	Joshua Janis	Milwaukee, WI	
23.	demand required or same as your liquor	r permitted by law to be se r agent.	. This is your agent for server erved on the corporation. T	•
	Mark F. K	ing		
24.	Is applicant a subsi	diary of any other corpora	tion or LLC?	
	No □ Yes (ex	rplain)		

25.	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 X Yes (explain) Red Rock Salbon, McGillycuddy's & The Library Club
Sec	etion D—Business Plan
	What type of establishment is contemplated? □ Tavern □ Nightclub ☒ Restaurant □ Liquor Store □ Grocery Store
	☐ Convenience Store without gas pumps ☐ Convenience Store with gas pumps
	□ Other
27.	Business description Red Rock Sabon is a country themed restaurant
	and bar with a mechanical bull, live music ; award wining BBQ.
	Copy of food menu attached
28.	Hours of operation 11:00am - Z:00pm Sunday-Thursday 11:00am - Z:30am Friday & Saturday
29.	Describe your management experience 18 total years of restaurant and bar
	experience, Il years of restaurant/bar management experience and
	6 years of owning bars and restaurants
30.	•
	Tate Winckler (GM) Milwaukee, WI
	Jon Gustavson (Executive Chef) Milwaukee WI
	1,11,000,000
31.	Describe staffing levels and staff duties at the proposed establishment <u>Seven days a week</u>
	we will be staffing servers, bartenders, appd will ambassadors,
	kitchen staff, host's and management
32.	
33.	Utilizing your market research, describe your target market.
	We would like to capture the capital square lunch business
	Strong dinner business and a 21-65 years of age for our live
	music events.

34.	Describe how you plan to advertise and promote your business. What products will you be advertising?
	Radio, print & social media. We will be focusing on our
	award wining BBQ, live music and special events
35.	Are you operating under a lease or franchise agreement? No Yes
36.	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 D Yes
This	ction E—Consumption on Premises s section applies to Class B and Class C applicants only. Class A license applicants (consumption premises) may skip to Section F.
37.	Do you plan to have live entertainment? No Yes—what kind? live bands,
	mechanical bull riding, karaoke and d.j.'s
38.	What age range do you hope to attract to your establishment? <u>all ages</u>
39.	What type of food will you be serving, if any? BBQ, burgers € wings □ Breakfast ☑ Brunch ☑ Lunch ☑ Dinner
40.	Submit a sample menu if applicable. What will be included on your operational menu? ☑ Appetizers ☐ Salads ☐ Soups ☒ Sandwiches ☒ Entrees ☒ Desserts ☐ Pizza ☐ Full Dinners
41.	During what hours of operation do you plan to serve food? II: Wam - II: Wam
42.	What hours, if any, will food service not be available? 11:00pm - close daily
43.	Indicate any other product/service offered. merchandise
44.	Will your establishment have a kitchen manager? □ No ☒ Yes
45.	Will you have a kitchen support staff? ☐ No 🗶 Yes
46.	How many wait staff do you anticipate will be employed at your establishment? 40
	During what hours do you anticipate they will be on duty? 10:00am - close daily
47.	Do you plan to have hosts or hostesses seating customers? D No 🗷 Yes
48.	Do your plans call for a full-service bar? D No X Yes If yes, how many barstools do you anticipate having at your bar? 30 How many bartenders do you anticipate having work at one time on a busy night?
49.	Will there be a kitchen facility separate from the bar? □ No 🕱 Yes

50.	Will there be a separate and specific area for eating only?
	No ☐ Yes, capacity of that area
51.	What type of cooking equipment will you have?
	Will you have a walk-in cooler and/or freezer dedicated solely to the storage of food products? □ No 🕱 Yes
53.	What percentage of payroll do you anticipate devoting to food operation salaries? 40%
54.	If your business plan includes an advertising budget:
	What percentage of your advertising budget do you anticipate will be related to food? 50%
	What percentage of your advertising budget do you anticipate will be drink related? 50 %
55.	Are you currently, or do you plan to become, a member of the Madison—Dane County Tavern League or the Tavern League of Wisconsin? D No 🔀 Yes
56.	Are you currently, or do you plan to become, a member of the Wisconsin Restaurant Association or the National Restaurant Association? D No X Yes
57.	All restaurants and taverns serving alcohol must substantiate their gross receipts for food and alcohol beverage sales broken down by percentage. New establishments estimate percentages
	<u>60</u> % Alcohol <u>30</u> % Food <u>10</u> % Other
58.	Do you have written records to document the percentages shown? D No D Yes You may be required to submit documentation verifying the percentages you've indicated.
Sec 59.	etion 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. □ No 🗷 Yes
60.	I understand that I am required to host an information session at least one week before the ALRC meeting. No Yes
61.	I agree to contact the Alderperson for this location to discuss my application and to invite the Alderperson to my information session. □ No ☎ Yes
62.	I agree to contact the Police Department District Captain for this location prior to the ALRC meeting. □ No 💆 Yes
63.	I agree to contact the Alcohol Policy Coordinator prior to the ALRC meeting. No Yes
64.	I agree to contact the neighborhood association representative prior to the ALRC meeting. ☐ No ☒ Yes
65.	I understand we must file a Special Occupational Tax return (TTB form 5630.5) before beginning business. [phone 1-800-937-8864] □ No ☒ Yes
66.	I understand a Wisconsin Seller's Permit must be applied for and issued in the same name as that shown in section 2, above. [phone 608-266-2776] □ No ☒ Yes
67.	Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ✗ No □ Yes

Section G—Information for Clerk's Office		
68. State Seller's Permit 4 5 6 - 1 0 2 8 1 2 1 9 7 7 - 0 2		
69. Federal Employer Identification Number 46-3009778		
70. Who may we contact between 8 a.m. and 4:30 p.m. regarding this license?		
Contact person Jeffrey A. Kovacovich Jr		
E-mail address jj@redrockmilwaukee.com		
Phone 414-305-5665		
Preferred language for correspondence <u>English</u>		
Read carefully before signing in front of a notary: Under penalty provided by law, the applicant states that the above information has been truthfully completed to the best of the knowledge of the signer. Signer agrees to operate the business according to law, and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. Lack of access to any portion of licensed premises during inspection will be deemed a refusal to permit inspection.		
Such refusal is a misdemeanor and grounds for revocation of this license.		
Subscribed and Sworn to before me:		
this day of July, 2013 (Clerk/Notary Public) (Officer of Corporation/Member of LLC/Partner/Sole Proprietor)		
My commission expires 10-30-2016		
LATISHA TUCKER		
Notary Public State of Wisconsin		
Notary Public State of Wisconsin Clerk's Office checklist for complete applications		
State of Wisconsin		
Clerk's Office checklist for complete applications Orange sign		
Clerk's Office checklist for complete applications Clerk's Office checklist for complete applications Background investigation form(s) Form for surrender of previous license (matching articles of incorporation) FEIN Notarized application Written description of premises State of Wisconsin Floor Plans Lease Sample Menu Notarized Appointment of Agent * Corporation/LLC only		

