45182

LICLIB-2016-01299 C-17

MADISON CITY CLERK



City of Madison Liquor/Beer License Application

Mad	On-Premises Consumption: Class B Beer Class B Liquor Class C Wine Class A Cider Class A Liquor Class A Cider			
Sec 1.	If needed, a qualified interpreter can be provided at no charge to you. Would you like an 2016 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)			
	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.			
2.	This application is for the license period ending June 30, 20_17			
3.	List the name of your \square Sole Proprietor, \square Partnership, \square Corporation/Nonprofit Organization or \square Limited Liability Company exactly as it appears on your State Seller's Permit.			
	Central Florida Restaurants, Inc.			
4.	Trade Name (doing business as)T.G.I. Friday's			
5.	Address to be licensed 2502 E. Springs Road, Madison, WI 53704			
6.	Mailing address 3550 Mowry Avenue, Suite 301, Fremont, CA 94538			
7.	Anticipated opening dateExisting Restaurant			
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)			
	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. 4,479 square feet of booth & table seating, bar stool seating, and outdoor patio seating; 15 1/2-foot bar; total capacity of 240 persons; beer cooler and liquor room for storage			

11.	☐ Attach a floor pla	an, no larger than 8 ½ by	14, showing the space	described above.		
12.	Applicants for on-p	remises consumption: lis	t estimated capacity	240 persons		
13.	Describe existing parking and how parking lot is to be monitored. Open parking lot will be monitored by management staff.					
	Ор	en parking for will be monite	ored by management start			
14.	Was this premises licensed for the sale of liquor or beer during the past license year?					
	□ No ဩ Yes, lic	cense issued to <u>Quantum</u>	Leap Restaurants, Inc.	(name of licensee)		
15.	☑ Attach copy of I	ease.				
This				l Liability Companies only.		
16.	Name of liquor license agentJohn L. Hartnell, Jr.					
17.	City, state in which	agent resides Wiscon	sin	_		
18.	How long has the agent continuously resided in the State of Wisconsin?51 years					
19.	☑ Appointment of agent form and background check form are attached.					
20.	Has the liquor license agent completed the responsible beverage server training course?					
	☐ No, but will complete prior to ALRC meeting ☐ Yes, date completed					
21.	State and date of registration of corporation, nonprofit organization, or LLC.					
	California, 2/6/15					
22.	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 Res	idence		
	Pres./Sec./Treas.	Anil Shivcharan Yadav	Sunol, CA			
	Director	Akaash Anil Yadav	Sunol, CA			
	Director	Leo Ramon Thomas	Corona, CA			
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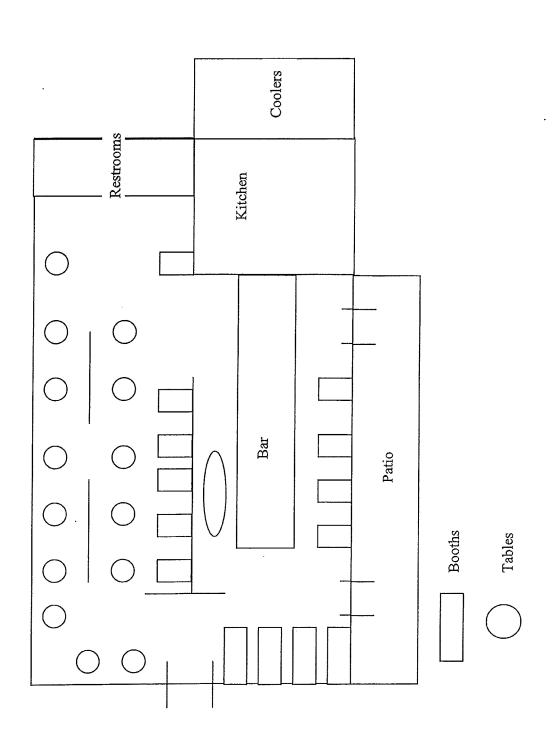
23. Registered agent for your corporation or LLC. This is your agent for service of process, notice or demand required or permitted by law to be served on the corporation. This is not necessarily the same as your liquor agent.

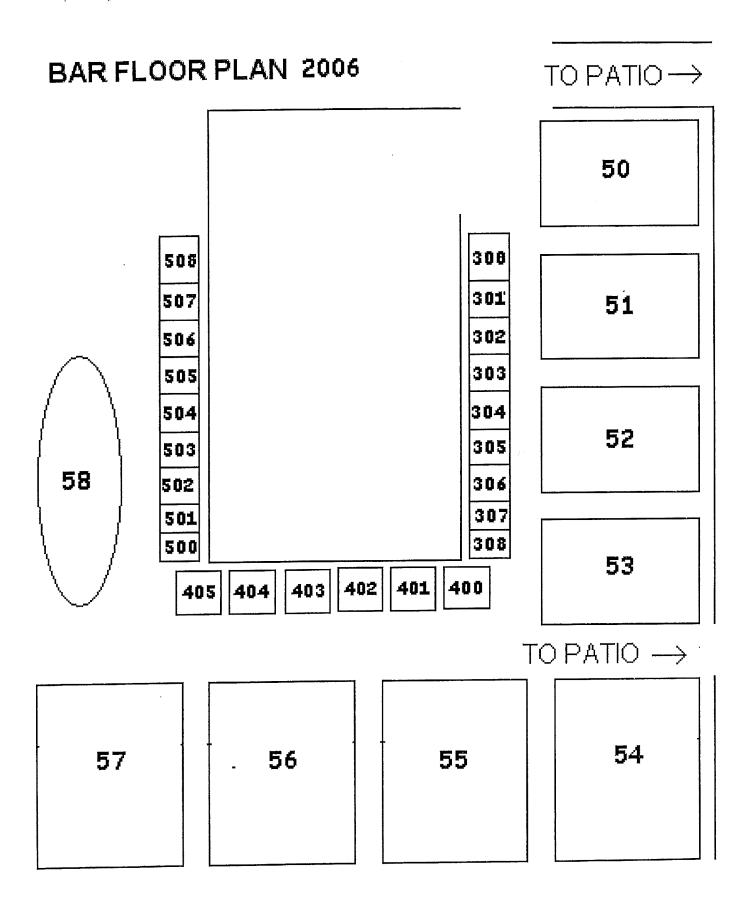
c/o Paracorp Incorporated, 901 S Whitney Way, Madison, WI 53711

24.	. Is applicant a subsidiary of any other corporation or LLC? ☑ No ☑ Yes (explain)			
25.				
	□ No ☑ Yes (explain) See attached licenses applied for or held by Central Florida Restaurants, Inc.			
	ction 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			
	Full service bar and restaurant, American cuisine			
28.	B. Hours of operation11 AM - 2 AM			
29.	Describe your management experience			
	TGI Friday's for 25+ years, one (1) manager has been with TGI Friday's for 6 years and one (1)			
	manager was recently promoted from an hourly position.			
30.	List names of managers below, along with city and state of residence.			
	Theresa Olson, Cottage Grove, WI Daniel Ploessl, Wanakee, WI			
	Mark Wicker, Madison, WI Matthew Kaufman, Madison, WI			
31.	Describe staffing levels and staff duties at the proposed establishment			
	Current staff is 78. Staff duties include greeting guests, serving guests, food/beverage services			
	collecting payment, clearing dishes, bartending, preparing/cooking food, washing dishes, cleaning restaurant			
32.	Describe your employee training			
	Employee training requires employees learn all job duties, alcohol service rules, and Friday's service style.			
	Training takes place online and in person. Training includes online testing and on-the-job validation.			

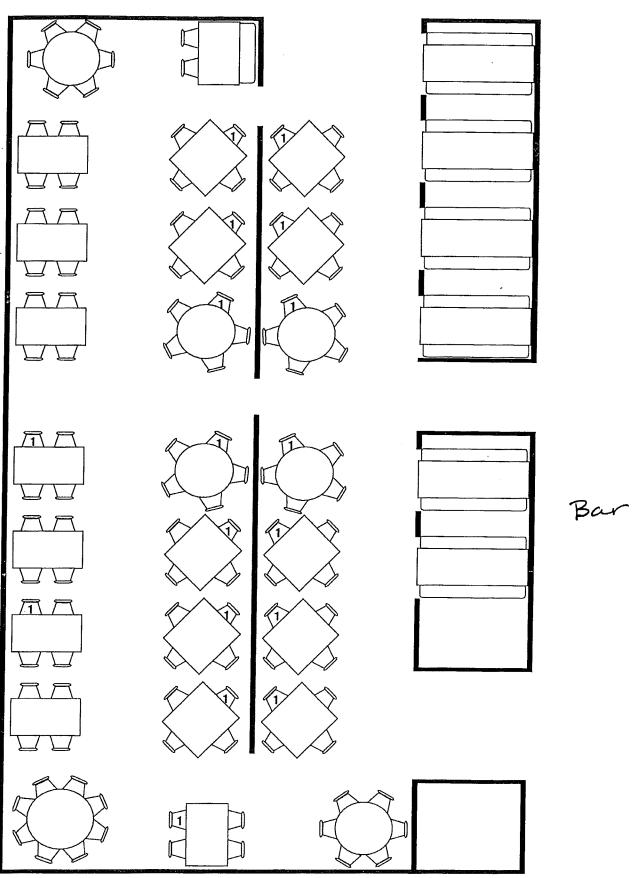
33.	Utilizing your market research, describe your target market.				
	18-40 year olds; families				
34.	Describe how you plan to advertise and promote your business. What products will you be advertising?				
	Advertising/promotion is done via social media, TV & direct mailings. We advertise food				
	specials, events and happy hours.				
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 ☐ 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? 図 No □ Yes—what kind?				
38.	What age range do you hope to attract to your establishment? All ages				
39.	What type of food will you be serving, if any? <u>American Food</u> ☐ 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?11 AM - 12 AM				
42.	What hours, if any, will food service <u>not</u> be available?12 AM to close				
43.	Indicate any other product/service offered. <u>NA</u>				
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?30				
	During what hours do you anticipate they will be on duty?10 AM - 2:30 AM				
47.	Do you plan to have hosts or hostesses seating customers? ☐ No ☒ Yes				

40	Do your plans call for a full-service bar? ☐ No ☒ Yes			
40.	If yes, how many barstools do you anticipate having at your bar?25 How many bartenders do you anticipate having work at one time on a busy night?3			
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 area132			
51.	What type of cooking equipment will you have? ☑ Stove ☑ Oven ☑ Fryers ☑ Grill ☑ Microwave			
52.	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?			
54.	If your business plan includes an advertising budget:			
	What percentage of your advertising budget do you anticipate will be related to food?			
	What percentage of your advertising budget do you anticipate will be drink related?			
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? ☑ No ☐ Yes			
56.	Are you currently, or do you plan to become, a member of the Wisconsin Restaurant Association or the National Restaurant Association? □ No ☒ 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:			
	% Alcohol % Food % Other			
58.	Do you have written records to document the percentages shown? □ No 図 Yes You may be required to submit documentation verifying the percentages you've indicated.			
Sac	tion F—Required Contacts and Filings			
59.	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. \square No \boxtimes 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			





Restrooms



Front Entrance