

AUG 1 6 202	License	(Legistar file number)		
MADISON CITY	Application	<u>LICUS-2021 - 00519</u> (License number)		
Class A: ☐ Beer, ☐ Liquor, ☐ Cide	City of Madison Clerk 210 MLK Jr Blvd, Room 103 Madison, WI 53703	(Alder District #) (Police Sector) Office Use Only		
Class B: ☐ Beer, ☑ Liquor, ☐ Class C Wine	licensing@cityofmadison.com 608-266-4601	O No IX Yes, Vicenson		
Organization or Limited L Permit.	e Proprietor, Partnership, Carried Company exactly as it app	ears on your State Seller's		
 Trade Name (doing business Address to be licensed	as) Dark Horse Ar 56 E Washington fro Jonona Drive Monon	Hadison WI 5370		
5. Anticipated opening date	nië ur, auswelen an fashio testarie delane	16. State and date of regental		
6. Is the applicant an employed named in question 1?☐ No ☐ Yes (explain)	e or agent of, or acting of behalf of Salvatore's Tomato Pies 2, Salvatore's Tomato Pies 2, Black Sheep Six LLC	Le Attach backöreund		
	ge licensee or wholesale permited (explain) Salvatore's Tom			
Section P.—Promises	cerporabon or LLC. (mishs your a	18 Registered agent for your		

(Agenda Item Number)

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.

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9.	Applicants for on-premises consumptio	n only	. Estima	ted capacity (patrons and employees):		
	Indoor: 100 Outd	oor: _	Exto_	30	_		
	Street parking, rawy park	_		1	ay garage is meritined		
ĺ	Street parking, ramp part he video, and palvelled by pran	late_	SCOW	ity.			
	. Was this premises licensed for the sale						
	☐ No ☐ Yes, license issued to	star -	Bar		(name of licensee)		
This	ection C—Corporate Information is section applies to corporations, nonproly. Sole proprietorships and partnerships,			•	d Liability Companies		
12.	. Name of liquor license agent Patrick	r D	e Pula	The second secon	· _ \		
	. City, state in which agent resides M_{\odot}						
14.	. How long has the agent continuously re	esided	in the S	tate of Wiscor	nsin? 25		
15.	. Has the liquor license agent completed	the re	sponsibl	e beverage se	erver training course?		
	No, but will complete prior to ALRC	meeti	ng 🔼	Yes, date con	npleted 7//7/2/		
	State and date of registration of corpor	ation,	nonprof	it organization			
17.	 In the table below list the directors of y □ Attach background check forms for 	In the table below list the directors of your corporation or the members of your LLC.					
	Title Name	(· · · · · · · · · · · · · · · · · · ·	State of Resid	dence		
	member Patrick DePe	lc_	Monon	a, WI	· '.		
		2	4				
18.	Registered agent for your corporation of notice or demand required or permitted necessarily the same as your liquor agent in the particle DePula	d by la					
19.	. Is applicant a subsidiary of any other c	orpora	tion or L	LC?			
	☐ No ☐ Yes (explain)						
20.	member, or any manager hold any inte	rest in	any oth	er alcohol bev	verage license or permit		
	in Wisconsin? No Yes (explain) member 5	BI O	T' cervot	onato Pies	2 111		
	menter	DIACK	- over	Jip ce C			

Section D—Business Plan 21. What type of establishment is contemplated? ☐ Tavern ☐ Nightclub ☐ Restaurant ☐ Liquor Store ☐ Grocery Store							
ŠE	Convenience Store without gas pumps						
	$lacktriangledown$ Other $oldsymbol{\mathcal{B}}$	AR, ARTO	SAILERY,	MUSICE PE	WEN MANC	e art be	nve
22.	2. 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						
23.	Hours of ope	ration: pleas	e enter openi	ing and closing	times in the	table below.	
	Sunday	Monday		Wednesday			Saturday
	4pm Zam	Closecl	4pm-32m	4pm - 2am	4pm-Zan	4pm - Zam	4pm-2am
	(Class B on	ly) Enter belo	ow any hours	when food ser	vice will not b	oe available,	if applicable
	-	-	-	- -	-	-	-
This (cor 24. 25.	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. Food (Sal's from pizza Shaks etc.) Act, Music 25. 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:						
26.	26. Do you plan to have live entertainment? No Yes—what kind? No Yes—what kind? No No Yes—what kind? No No No No No No No N						
Section F—Required Contacts and Filings 27. I understand that liquor/beer license renewal applications are due April 15 of every year, regardless of when license was initially granted. □ No □ Yes							
28.	I understand that I am required to host an information session at least one week before the ALRC meeting. No Yes						
29.	I agree to co	ntact the Ald	erperson for t	this location to		pplication an	d to invite

30.	I agree to contact the Police Department District Captain for this location prior to the ALRC meeting. ☐ No 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 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 90 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] \square No \searrow 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] \square No \bowtie Yes
36.	Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? No Yes
Sec	ction G—Information for Clerk's Office
37.	This application is for the license period ending June 30, 20 22.
38.	State Seller's Permit 4 5 6 - 1 0 3 0 7 7 3 9 1 7 - 0 2
39.	Federal Employer Identification Number 87-1717586
40.	Who may we contact between 8 a.m. and 4:30 p.m. regarding this license?
	Contact person Patrick DePula
	Business phone 608 345 8083 Business e-mail address Patricke Sals to mosto pi
	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 $\underline{\mathcal{P}(\mathcal{N})}$
	Phone E-mail

Monday) to get on the agenda for the proc must be accompanied by the following item	y noon of the third Monday (fourth, if the Clerk's offi eeding months Alcohol License Review Committee. <i>I</i> ms:	ce is closed on the third A completed application
Copy of Lease, Business Plan, and If required items are missing, the applicati Office until all requirements are submitted. Read carefully before signing: Under p been truthfully completed to the best of the to law, and that the rights and responsibilities of access to any portion of licensed particles.	enalty provided by law, the applicant states that the e knowledge of the signer. Signer agrees to operate ties conferred by the license(s), if granted, will not b remises during inspection will be deemed a refusal to	ccepted by the Clerk's above information has the business according the assigned to another.
Such refusal is a misdemeanor and ground Penalty for materially false application info on this application may be required to forfe (Officer of Corporation/Member of LLC/Partner/	rmation: Any person who knowingly provides materieit not more than \$1,000.	ially false information
Clerk's Office checklist for complete	annlications	
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
☐ Orange sign ☐ Orange busines	Clerk's Office issued to the application: ss card e in the City of Madison" brochure with contact	information
Date complete application filed with Clerk Date of ALRC meeting		