



City of Madison Liquor/Beer License Application

On-Premises Consumption: Class B Beer Class B Liquor Class C Wine
Off-Premises Consumption: Class A Beer Class A Liquor

Section A – Applicant

1. 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.

2. This application is for the license period ending June 30, 20 15.
3. 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.

Mijal Percevez LLC

4. Trade Name (doing business as) Tiki Shack

5. Address to be licensed 136 STATE ST

6. Mailing address 126 Statest MADISON 53703

7. Anticipated opening date Nov. 18th, 2014

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 permittee have interest in this business?
 No Yes (explain) _____

Section B—Premises

10. 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.

Bar, kitchen, basement, stock Room, patio
Dining Area Frontside, Dining Area located in Back. Seating At bar

11. Attach a floor plan, no larger than 8 1/2 by 14, showing the space described above.

12. Applicants for on-premises consumption: list estimated capacity 99

13. Describe existing parking and how parking lot is to be monitored.

Parking Ramp

14. Was this premises licensed for the sale of liquor or beer during the past license year?

No Yes, license issued to Joe Vale (name of licensee)

15. Attach copy of lease.

Section C—Corporate Information

This section applies to corporations, nonprofit organizations, and Limited Liability Companies only. Sole proprietorships and partnerships, skip to Section D.

16. Name of liquor license agent Caleb Percevez

17. City, state in which agent resides Madison, Wisconsin

18. How long has the agent continuously resided in the State of Wisconsin? Seven 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 11/19/13

21. State and date of registration of corporation, nonprofit organization, or LLC.

Wisconsin. 8/21/2014

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 Residence
Agent	Daniel Misal	Madison, Wisconsin
organizer	Caleb Percevez	Madison, Wisconsin

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.

Daniel Misal

33. Utilizing your market research, describe your target market.

our target market would be families as well as college age students

34. Describe how you plan to advertise and promote your business. What products will you be advertising?

We plan to use social media, internet, and radio to help promote our restaurant. We will promote our new lunch specials and our new menu to help reach a new and broader customer base

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

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.

37. Do you plan to have live entertainment? 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? _____
 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? All hours

42. What hours, if any, will food service not be available? None

43. Indicate any other product/service offered. N/A

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? 10-15

During what hours do you anticipate they will be on duty? All

47. Do you plan to have hosts or hostesses seating customers? No Yes

24. Is applicant a subsidiary of any other corporation or LLC?

No Yes (explain) _____

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 Yes (explain) _____

Section D—Business Plan

26. 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 Restaurant and Bar

28. Hours of operation Mon-Fri 12:00 PM - 2:00 AM Sat-Sun 11:00 AM - 2:00 AM

29. Describe your management experience I was in charge of staffing the restaurant. Both
hosting interviews and hiring. Clear communication with staff and the training of new
employees to the standards of the owner and the city.

30. List names of managers below, along with city and state of residence.

Danny Misal Madison WI _____

Caleb Percevoz Madison WI _____

31. Describe staffing levels and staff duties at the proposed establishment hosts greeting and
seating, Bouncers checking IDs and bussing tables, servers and bartenders taking orders
and fulfilling customer needs, cooks making delicious food, Managers checking on tables/supervising

32. Describe your employee training New employees will be required to attend a bar and
restaurant safety meeting hosted by the city, they will shadow a manager until
full understanding of the restaurant is achieved

48. Do your plans call for a full-service bar? No Yes
 If yes, how many barstools do you anticipate having at your bar? 10
 How many bartenders do you anticipate having work at one time on a busy night? 2
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 89
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? 25-30%
54. If your business plan includes an advertising budget:
 What percentage of your advertising budget do you anticipate will be related to food? 80%
 What percentage of your advertising budget do you anticipate will be drink related? 20%
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:
33 % Alcohol 65 % Food 2 % Other
58. Do you have written records to document the percentages shown? No Yes
 You may be required to submit documentation verifying the percentages you've indicated.

Section 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. 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 6 2 2 2 6 9 - 0 2

69. Federal Employer Identification Number 47-1697842

70. Who may we contact between 8 a.m. and 4:30 p.m. regarding this license?

Contact person Caleb Perveez

E-mail address madtowntiki@gmail.com

Phone 830 660 3560 Preferred language English

71. Corporate attorney, if applicable: Name _____

Phone _____ E-mail _____

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 26 day of September, 2014

[Signature]
 (Clerk/Notary Public)

[Signature]
 (Officer of Corporation/Member of LLC/Partner/Sole Proprietor)

My commission expires 10-31-2016

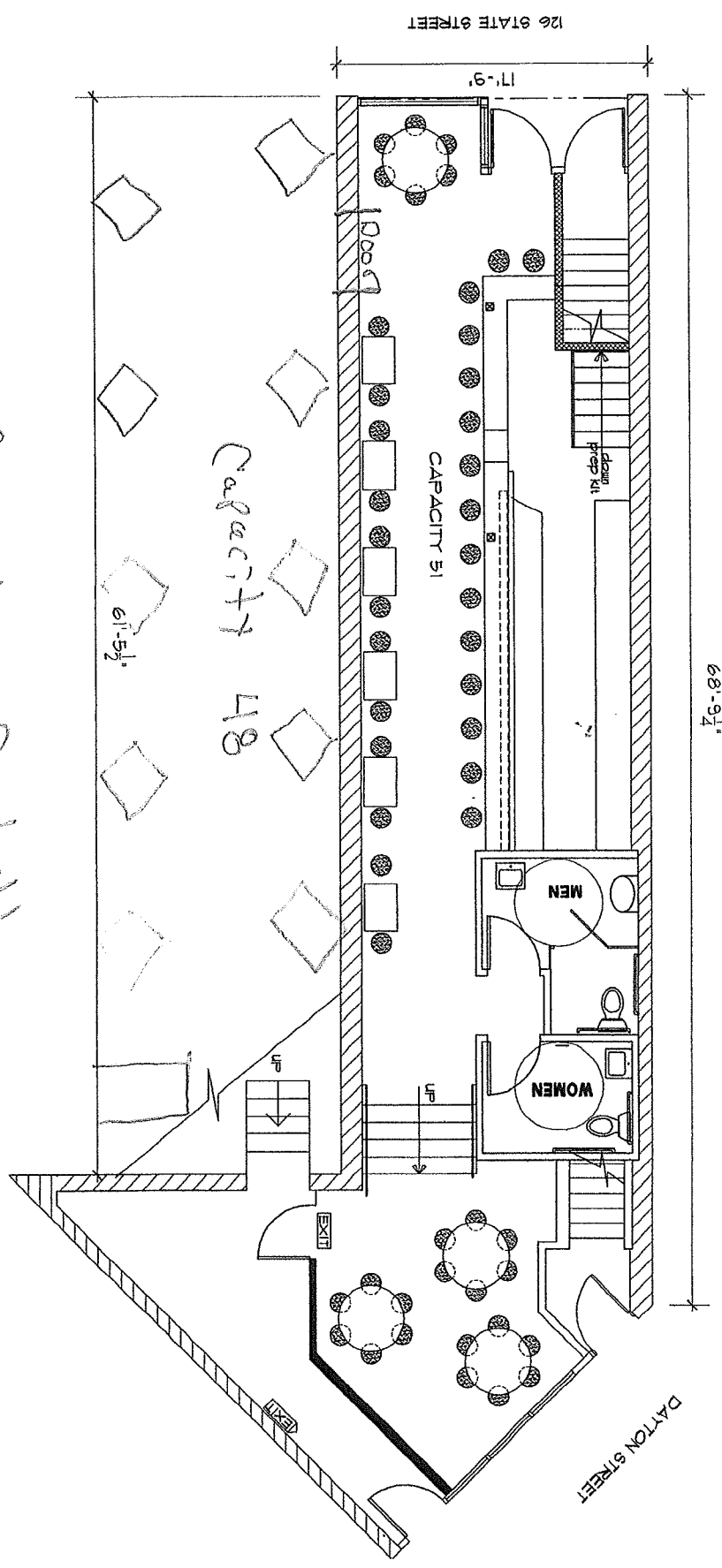
Police Sector: 406
 Council: 4 - Verveer

Clerk's Office checklist for complete applications		
<input type="checkbox"/> Orange sign <input checked="" type="checkbox"/> WI Seller's Permit Certificate (matching articles of incorporation) <input checked="" type="checkbox"/> FEIN <input checked="" type="checkbox"/> Notarized application <input checked="" type="checkbox"/> Written description of premises	<input checked="" type="checkbox"/> Background investigation form(s) <input type="checkbox"/> Form for surrender of previous license <input checked="" type="checkbox"/> *Articles of Incorporation <input checked="" type="checkbox"/> *Notarized Appointment of Agent * Corporation/LLC only	<input checked="" type="checkbox"/> Floor Plans <input checked="" type="checkbox"/> Lease <input type="checkbox"/> Sample Menu <input checked="" type="checkbox"/> Business Plan
Date complete application filed with Clerk's Office <u>9-26-14</u> Date of ALRC meeting <u>10-15-14</u> Date license granted by Common Council <u>11-18-14</u> Date provisional issued _____ Date license issued _____ License number <u>L1CLIB-2014-</u>		

Designed by
Jim Vincent
ARCHITECTS
222 NORTH HAVEN DRIVE
MADISON, WI 53706
608.263.8888

FIRST FLOOR

3/8" = 1'-0"



Total Capacity of both
Dining Rooms and Bar = 99

Business Plan

Executive Summary

This business plan was created as a guide to aid in the transition during which Mijal Percevecz LLC will acquire and become the owner/operator of The Tiki Shack restaurant located at 126 State St., Madison, WI. Rather than forming a new entity altogether, arrangements have been made so as to allow Mijal Percevecz LLC to operate the previously stated restaurant under the current name and location, pending all licensing approval. Success will be based on expanding the services of the restaurant to meet the needs of a much larger and more diverse clientele than previous years. We plan to build upon the already established popularity and good community standing to propel The Tiki Shack into a pillar of exceptional quality and service on the 100 block of State Street.

Mission

The Tiki Shack will establish itself as the premier tropical dining restaurant in Madison, while maintaining a casual atmosphere for persons of all ages. Moving forward, our decisions will be based on the following principles in order to measure the appropriateness of actions.

- Provide an exceptional work environment and treat employees with dignity and respect.
- Embrace diversity as an essential component in the way we do business.
- Apply the highest standards of excellence to food preparation and service to our customers.
- Build long lasting relationships with the guests.
- Contribute positively to the surrounding community and environment.
- Recognize profitability is essential to our overall success.

Objectives

- Set up an LLC to limit any liability (investors and personal).
- Reach a positive net profit by end of first quarter.
- Become a leading image in the community.

Keys to Success

- Location, Location, Location.
- Finding, hiring, and training qualified and motivated employees.
- Controlling efficiency in marketing to stimulate sales
- Providing extraordinary food with unparalleled taste for the correct price!

Management Summary

Caleb Percevecz and Daniel Mijal will run all business operations for The Tiki Shack Restaurant. Other key personnel are the day-to-day managers and kitchen staff. We do not expect any shortage of qualified and available staff and management from local labor pools. Personnel will include a host/hostess, cooks, and servers working at all times.

Starters

Supreme Nachos

Choose chicken or chili, with cheese, jalapenos, tomatoes, salsa, and sour cream 8

Cheese Quesadilla

Flour tortillas with three types of cheese, guacamole, salsa, and sour cream 6

Caribbean Spiced Shrimp w/ Mango Salsa

Four jumbo shrimp seasoned and grilled to order. Served with sweet and spicy mango salsa 8

Chips w/ Tropical Salsa

Tortilla chips served with spicy jerk, mango, and pineapple salsa 4

Soups & Salads

Soup of the Day

Ask server for details 3/cup 6/bowl

Clam Chowder

Filled with tender chopped clams, potatoes, onions, celery and a blend of spices simmered in a classic, creamy chowder 3/cup 6/bowl

House Salad

Romaine, iceberg, red cabbage, carrots, cucumbers, and cherry tomatoes 4

Tropical Tiki Salad

Fresh greens and sliced pineapple topped with bacon bits, almonds, and toasted coconut. Served with sweet pineapple vinaigrette. 7

Taco Salad

Tortilla chips, lettuce, and tomato topped with shredded cheese and lean ground beef. Served with guacamole and sour cream. Add chicken 2.00 8

Main Courses

All served with your choice of side

Wisconsin Beer Brat

Served with ketchup, mustard, and relish 4.5

Chicago Style Hot Dog

All-beef, with onions, relish, and mustard on a poppy seed bun 4.5

Tiki Dog

All-beef, with our very own pineapple relish 4.5

Grilled Cheese

*Simple and delicious with two slices of American or cheddar cheese on thick
Texas toast 4.5*

Tiki Taco Trifecta

*Choose from Caribbean jerk pork, ground beef, or shredded chicken. Topped
with lettuce, cheese, and sour cream 9*

Grilled Chicken Wrap

*Grilled chicken breast, sweet mango salsa, avocado, cheddar, lettuce,
tomato, and ranch dressing, served in a flour tortilla 8*

Caribbean Pulled Pork

*Jamaican jerk seasoned pulled pork, with island slaw on sweet Hawaiian
bread 8*

Crab Boil

*1 LB of perfectly boiled snow crab legs, served with warm melted butter, and
your choice of two sides 18*

Sides

Rice, Island slaw, Baked Beans, Mixed Veggies, or chips 2

*Consumer advisory: Consumption of undercooked meat, poultry, eggs, or seafood may increase
the of foodborne illness. Alert your server if you have any special dietary requirements*