

# ORIGINAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk

For the license period beginning July 20 07 ;  
ending June 30 20 08

TO THE GOVERNING BODY of the:  Town of }  
 Village of } Madison  
 City of }

County of Dane Aldermanic Dist No. \_\_\_\_\_ (if required by ordinance)

- 1 The named  INDIVIDUAL  PARTNERSHIP  LIMITED LIABILITY COMPANY  
 CORPORATION/NONPROFIT ORGANIZATION

hereby makes application for the alcohol beverage license(s) checked above

- 2 Name (individual/partners give last name, first, middle; corporations/limited liability companies give registered name): Van Nest Enterprises, LLC

An "Auxiliary Questionnaire," Form AT-103, must be completed and attached to this application by each individual applicant, by each member of a partnership, and by each officer, director and agent of a corporation or nonprofit organization, and by each member/manager and agent of a limited liability company. List the name, title and place of residence of each person

Title	Name	Home Address	Post Office & Zip Code
President/Member	<u>OWNER</u>	<u>Math L. Van Nest</u>	<u>1621 Palmetto St., Middleton, WI 53562</u>
Vice President/Member	<u>OWNER</u>	<u>Andrea L. Van Nest</u>	<u>1621 Palmetto St., Middleton, WI 53562</u>
Secretary/Member			
Treasurer/Member			
Agent		<u>Math L. Van Nest</u>	<u>1621 Palmetto St., Middleton, WI 53562</u>
Directors/Managers			

- 3 Trade Name Relish Deli Business Phone Number 608-255-8500  
4 Address of Premises 1723 Monroe St Post Office & Zip Code Madison, WI 53711

- 5 Is individual, partners or agent of corporation/limited liability company subject to completion of the responsible beverage server training course for this license period?  Yes  No  
6 Is the applicant an employe or agent of, or acting on behalf of anyone except the named applicant?  Yes  No  
7 Does any other alcohol beverage retail licensee or wholesale permittee have any interest in or control of this business?  Yes  No  
8 (a) Corporate/limited liability company applicants only: Insert state WI and date 3/30/07 of registration  
(b) Is applicant corporation/limited liability company a subsidiary of any other corporation or limited liability company?  Yes  No  
(c) Does the corporation, or any officer, director, stockholder or agent or limited liability company, or any member/manager or agent hold any interest in any other alcohol beverage license or permit in Wisconsin?  Yes  No

(NOTE: All applicants explain fully on reverse side of this form every YES answer in sections 5, 6, 7 and 8 above.)

- 9 Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described) Existing restaurant space, one level, plus outdoor deck (360 sq ft)

- 10 Legal description (omit if street address is given above): with storage in basement of same space at 1723 Monroe Street with 19' lawn

- 11 (a) Was this premises licensed for the sale of liquor or beer during the past license year?  Yes  No  
(b) If yes, under what name was license issued?  
12 Does the applicant understand they must file a Special Occupational Tax return (TTB form 5630 5) before beginning business? [phone 1-800-937-8864]  Yes  No  
13 Does the applicant 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]  Yes  No  
14 Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor?  Yes  No

**READ CAREFULLY BEFORE SIGNING:** Under penalty provided by law the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signers. Signers agree to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants and each member of a partnership applicant must sign; corporate officer(s) members/managers of Limited Liability Companies must sign.) Any lack of access to any portion of a 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 29 day of MAY, 20 07  
Nancy  
(Clerk/Notary Public)

Math L. Van Nest  
(Officer of Corporation/Member/Manager of Limited Liability Company /Partner/individual)  
Andrea L. Van Nest  
(Officer of Corporation/Member/Manager of Limited Liability Company /Partner)

My commission expires 06/11/2007

(Additional Partner(s)/Member/Manager of Limited Liability Company if Any)

TO BE COMPLETED BY CLERK			
Date received and filed with municipal clerk <u>5-29-07</u>	Date reported to council/board	Date provisional license issued	Signature of Clerk / Deputy Clerk
Date license granted	Date license issued	License number issued	

Registrar # 06650

# City of Madison Liquor/Beer Original Supplemental Form

## Office Use Only

- |  |  |
|--|--|
| <input checked="" type="checkbox"/> Seller's Permit Number<br><input checked="" type="checkbox"/> Federal Employer Identification Number<br><input checked="" type="checkbox"/> Notarized Original Application Form (AT-106)<br><input checked="" type="checkbox"/> Notarized Supplemental Form<br><input checked="" type="checkbox"/> Description of Licensed Premise<br><input checked="" type="checkbox"/> Notarized Auxiliary Questionnaire(s) (AT-103)<br><input checked="" type="checkbox"/> Background Investigation Form(s)<br><input checked="" type="checkbox"/> Floor Plans | <input checked="" type="checkbox"/> Lease<br><input checked="" type="checkbox"/> Notarized Transfer of Ownership Letter<br><input checked="" type="checkbox"/> *Schedule of Appointment of Agent (AT-104)<br><input checked="" type="checkbox"/> *Notarized Agent Appointment/Acceptance Form<br><input checked="" type="checkbox"/> *Articles of Incorporation/ Organization<br><input checked="" type="checkbox"/> Sample Menu, if possible<br><input type="checkbox"/> Business Plan, if one exists<br>* Forms required of Corporation/LLC only |
|--|--|

- ✓ All applicants must provide an adequate premise plan that includes exterior and interior dimensions, position of stairs and all entrances and exits, normal and customary use of each room, placement of major appliances, furniture and large gaming tables, placement and dimensions of all bar(s), and graphic representation of the normal position of booths, bar stools, tables and chairs. **Premise plans must be no larger than 8 ½ x 14.**
- ✓ New structures must submit to Building Inspection two sets of plans, signed and sealed by a registered architect or engineer.
- ✓ **Applicant/partners/Liquor Agent must be enrolled in or have completed the Beverage Server Training course before appearing before the Alcohol License Review Committee.**

**Prior to your hearing before the Alcohol License Review Committee (ALRC), you must contact the Alderperson of the District in which you intend to do business, the representative of the appropriate neighborhood association (if any), the Madison Police Department, and the Alcohol Policy Coordinator.**

- ✓ Alderperson Julia Kern can be reached at 260-2661 at the Common Council Office (266-4071), or via e-mail at council@cityofmadison.com.
- ✓ The name of the neighborhood association representative can be obtained by calling the Planning and Development Department at 266-4635 or online at www.ci.madison.wi.us/neighborhoods/contacts.htm.
- Police Department Central District Captain Mary Schauf (Sector 400) can be reached at 266-4316.
- Police Department East District Captain Jill Klubertanz (Sector 600) can be reached at 267-2100.
- Police Department North District Captain Richard Bach (Sector 500) can be reached at 245-3652.
- Police Department West District Captain Jay Lengfeld (Sectors 100-200) can be reached at 288-6152.
- ✓ Police Department South District Captain James Wheeler (Sector 300) can be reached at 267-8687.
- ✓ Alcohol Policy Coordinator Joel Plant can be reached at 264-9295.

1. Have you contacted the Alderperson, Police Department District Captain, Alcohol Policy Coordinator, and the neighborhood association representative for the area in which you intend to locate?  Yes  No
2. Are there any special conditions desired by the neighborhood?  Yes  No  
 Explain Not at this time, will attend future neighborhood meetings
3. Name of Applicant/Partner/Corporation/LLC VAN NEST ENTERPRISES LLC
4. Telephone Number: 608-255-8500
5. Address of Licensed Premise 1923 MONROE ST., MADISON, WI 53711
6. Anticipated opening date: 7-15-06 (w/Beer Wine) -> Existing Restaurant open now
7. Mailing address if not opening immediately \_\_\_\_\_

8. What type of establishment is contemplated?  Tavern  Nightclub  Restaurant  
 Liquor Store  Grocery Store  Convenience Store – Gas Pumps  Yes  No  
 Other Please explain \_\_\_\_\_

9. Business Description including hours of operation and if entertainment is part of your venue, what type:

Restaurant serving <sup>breakfast</sup> lunch and dinner including sandwiches, salads, pizzas, appetizers and dinner entrees, along with European influenced beer/wine selection. Hours of operation to be Sun-THurs 8am-11pm, Fri-Sat 8am to 12am. Live entertainment not planned.

10. Detailed written description of building, including overall dimensions, seating arrangements, capacity, bar size and all areas where alcohol beverages are to be sold and stored. **The licensed premise described below shall not be expanded or changed without the approval of the Common Council.**

One story building, 80' Deep, 19' Wide, Seating at tables, bar, and front window area with indoor capacity of 47 seats. All seats available for food service. Bar is 20' x 8' with seating for 13. All seating in same room of establishment. Requesting also seating up to 20 people capacity on outdoor deck on back of building. Alcohol to be sold only inside from bar but drinkable in all seating areas. All Alcohol stored behind bar on in basement storage area.

11. Are any living quarters directly or indirectly accessible and under control of the applicant?  Yes  No

Please note that alcohol may be sold and stored only on the licensed premise, not in living quarters.

12. Describe existing parking and how parking lot is to be monitored. Metered parking on Monroe Street, some parking in Monroe Street Commons Ramp, No lot to monitor

13. Describe your management experience, staffing levels, duties and employee training.

I have 15 years management experience, 5+ in Restaurant management, Will employ about 25 cooks/servers, I will manage daily business with kitchen manager, including training of staff and daily operations.

14. Identify the **registered agent** for your Corporation or LLC. This is not necessarily the same person as your liquor/beer agent. This is your corporation's agent for service of process, notice or demand required or permitted by law to be served on the corporation.

MATTHEW L. Von Nest

Name

1621 Parmenter St., Middleton, WI 53562

Address

City

State

Zip

15. Excluding pre-packaged snacks, how late will food be served? To 30 minutes before close

16. What type of food will you be serving, if any? Sandwiches, Salads, Pizzas, Appetizers & Dinner Entrees, ~~Chowder~~ All prepared from scratch on premises

17. Indicate any other product/service offered: None

18. Describe your target market. Patrons of Monroe Street businesses, Neighborhood residents, and a target of 30-60 yr olds, into good food, beer & wine.

19. What is your estimated capacity? Sitting capacity 45 inside + 20 outdoor deck

20. Are you operating under a lease or franchise agreement?  Yes  No (If yes, attach a copy.)

21. Owner of building where establishment is located: High Pointe Properties LLC  
Address of Owner: 43 South Water St, Ft. Atkinson, WI 53538 Phone Number 920-568-0550

22. Individual or Partnership: Have individual/partners completed the Beverage Server Training Course? Yes  No  If Yes, indicate names: \_\_\_\_\_

**License cannot be issued until proof of Beverage Server Training completion is shown.**

23. Corporation/LLC: Will liquor/beer agent be a Wisconsin resident at the time of granting?  Yes  No

24. Corporation/LLC: Agent must disclose interest held in business: 50%

25. Corporation/LLC: Has agent completed the Beverage Server Training Course?  Yes  No

**License cannot be issued until proof of Beverage Server Training completion is shown.**

26. Corporation/LLC: List Directors, Stockholders, and Managers below.

Director(s) Name	Home Address
<u>MATTHEW L Van Nest</u>	<u>1621 Parmenter St., Middleton, WI 53562</u>
<u>Andrew L. Van Nest</u>	<u>1621 Parmenter St., Middleton, WI 53562</u>

Stockholder's Name	Address	Extent of Ownership%

Manager's Name	Address	Business Phone	Home Phone

27. 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?  Yes  No

28. Pursuant to Chapter 23 of the Madison General Ordinances, all restaurants and taverns serving alcohol beverages shall substantiate their gross receipts for food and alcohol beverage sales broken down by percentage. **For new establishments, the percentage will be an estimate.**

Calendar/fiscal year:  January 1 – December 31  July 1 – June 30

Percent Gross Receipts from Alcohol Beverages	35 %
Percent Gross Receipts from Food	65 %
Percent Gross Receipts from Other	— %
<b>Total Gross Receipts</b>	<b>100 %</b>

Do you have written records to document the percentages shown?  Yes  No  
**You may be required to submit documentation verifying the percentages you've indicated.**

29. What type of establishment are you? (Check all that apply)  Tavern  Restaurant  Nightclub  
 Other Please explain: \_\_\_\_\_

30. Will your establishment have a kitchen manager?  Yes  No

31. Will your establishment be a member of the Wisconsin Restaurant Association?  Yes  No

32. How many wait staff will be employed at the establishment? 7-10

33. What hours, if any, will food service not be available? 30 minutes before close

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

Local Newspapers, Radio, Neighborhood Newsletters, Focus on Lunch & Dinner menus, European beer & wine selection and casual Atmosphere.

**Read carefully before signing:** Under penalty provided by law, the applicant states that the above information has been truthfully completed to the best of the knowledge of the signers. Signers agree to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted will not be assigned to another. (Individual applicants and each member of a partnership must sign; corporate officer(s), members/managers of Limited Liability Companies must sign.) Any lack of access to any portion of a licensed premise 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 29<sup>th</sup> day of May, 2007

[Signature]  
(Clerk/Notary Public)

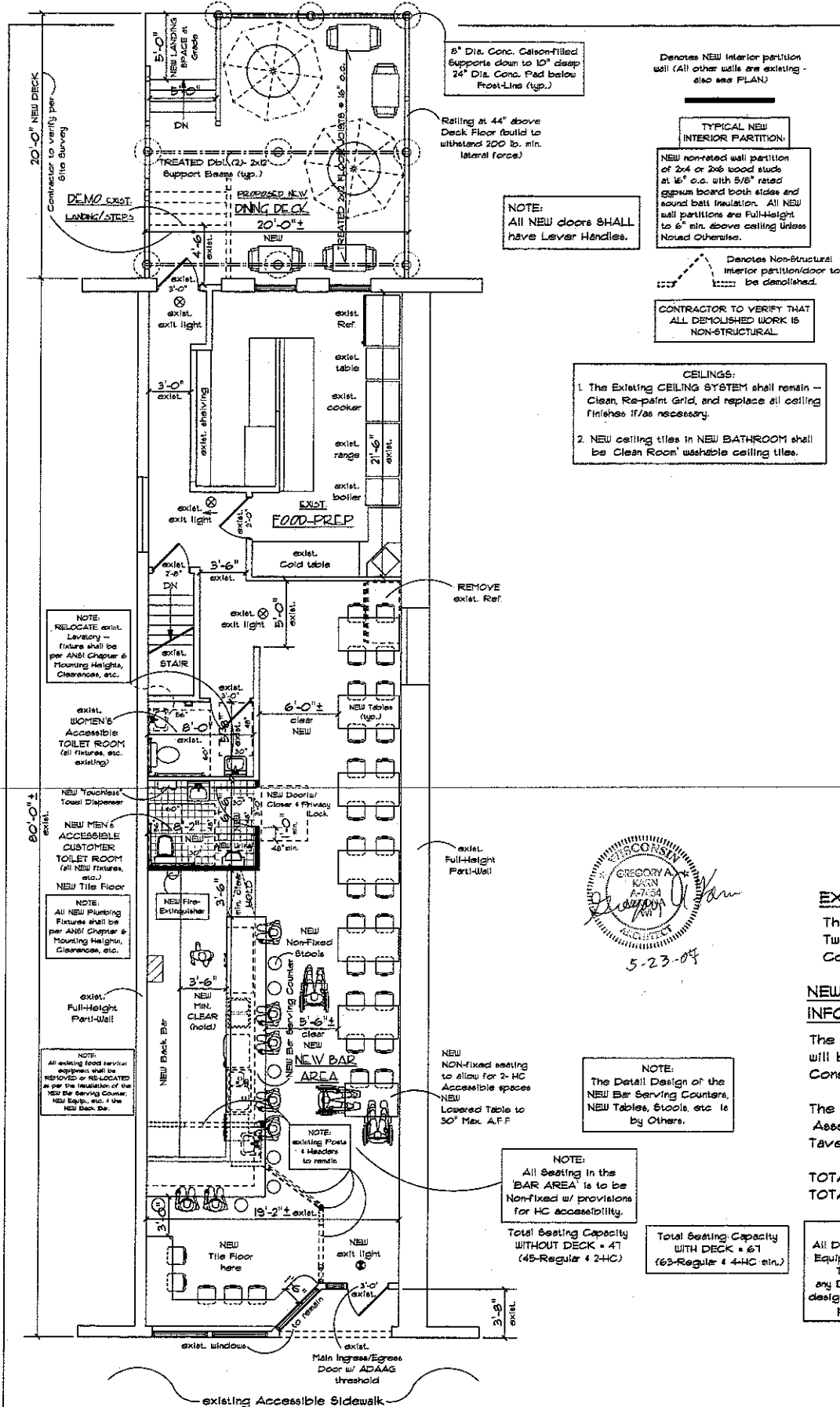
My commission expires 06/17/2007

[Signature]  
(Officer of Corporation/Member/Manager of LLC/Partner/Individual)

[Signature]  
(Officer of Corporation/Member/Manager of LLC/Partner/Individual)

\_\_\_\_\_  
(Officer of Corporation/Member/Manager of LLC/Partner/Individual)

**If you have any questions, please contact the City Clerk's Office at (608) 266-4601.**



- General Notes:**
- All NEW construction shall comply with all Governing and applicable national, state, and local Building, Plumbing, Electrical, and HVAC codes.
  - Adherence to Code Requirements of the New and Renovated construction shall be the strict responsibility of the Owner/Builder. The Architect shall not be held liable for any such unauthorized deviations or violations of any applicable Building, Plumbing, HVAC, or Electrical codes.
  - Provide wood blocking in walls as required for accessories, etc.
  - The builder shall be responsible for determining all structural conditions. Any alteration of the prescribed structural components as a result of NEW construction shall be the responsibility of the Builder.
  - Any conflicts encountered with the NEW construction shall be brought to the attention of the Architect for possible resolve.
  - NEW Smoke/Carbon Monoxide Detectors shall be installed per Plans as necessary.
  - All NEW doors shall be 3'-0" wide Min. and have Lever Handles Unless Noted Otherwise.
  - All dimension shown are Existing Unless Noted Otherwise.
  - The Builder shall verify the existence and adequacy of all components required by Code including but not limited to:
    - Compliant Exit Lights
    - Compliant Fire Extinguishers
  - All Equipment Sub-Contractors shall be responsible for obtaining their own respective Permits.

**IMPORTANT!!**  
 Absolutely no alterations to the Existing Primary Structural Components will be allowed as a result of the Proposed Interior Alterations. The Architect shall not be held liable for any such unauthorized alterations of any existing structural components as there are no known alterations necessary to any of the Existing Structural Components as a result of the Proposed Interior Alterations. The Architect acknowledges that, to the best of his knowledge and belief, no Existing Primary or Secondary Structural components will be compromised as a result of the Proposed Interior Alterations.

**EXISTING BUILDING INFORMATION:**

The existing building appears to be Two-Story Wood Frame & Masonry Construction, Unprotected, Non-sprinklered

**NEW 'INTERIOR ALTERATION' BUILDING INFORMATION:**

The NEW 'INTERIOR ALTERATION' Construction will be Single-Storey Wood Frame Type VB Construction, Unprotected, Non-sprinklered.

The altered space is Intended for Single Tenant Assembly A-2 Restaurant Occupancy primarily as a Tavern and for 'Dining-In' food items.

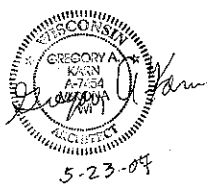
TOTAL Tenant Space Area = 1498 sq. ft.  
 TOTAL Area of Alteration = 1080 sq. ft.

**IMPORTANT!!**  
 All Detail Design of any NEW Food Prep./Beverage Service Equip., Layout, Servicing, etc. is the Responsibility of Others. The Architect therefore shall not be held liable for any Damages including any such Health issues relating to the design and use of such Equipment or Facilities as it relates to preparation and/or consumption of food, drink, etc.

**CEILING:**  
 1. The Existing CEILING SYSTEM shall remain - Clean, Re-paint Grid, and replace all ceiling finishes if/as necessary.  
 2. NEW ceiling tiles in NEW BATHROOM shall be Clean Room washable ceiling tiles.

**NOTE:**  
 All NEW doors SHALL have Lever Handles.

**CONTRACTOR TO VERIFY THAT ALL DEMOLISHED WORK IS NON-STRUCTURAL.**



**NOTE:**  
 The Detail Design of the NEW Bar Serving Counters, NEW Tables, Stools, etc. is by Others.

**NOTE:**  
 All Seating in the 'BAR AREA' is to be Non-fixed w/ provisions for HC accessibility.  
 Total Seating Capacity WITHOUT DECK = 41 (48-Regular & 4-HC)

Total Seating Capacity WITH DECK = 61 (63-Regular & 4-HC min.)

**NOTE:**  
 There is Regular Metered Street Parking immediately in front of this Retail Space.

**PROPOSED 'REMODELED' PLAN**  
 3/16" = 1'-0"

5-23-01 ADDED REAR DECK

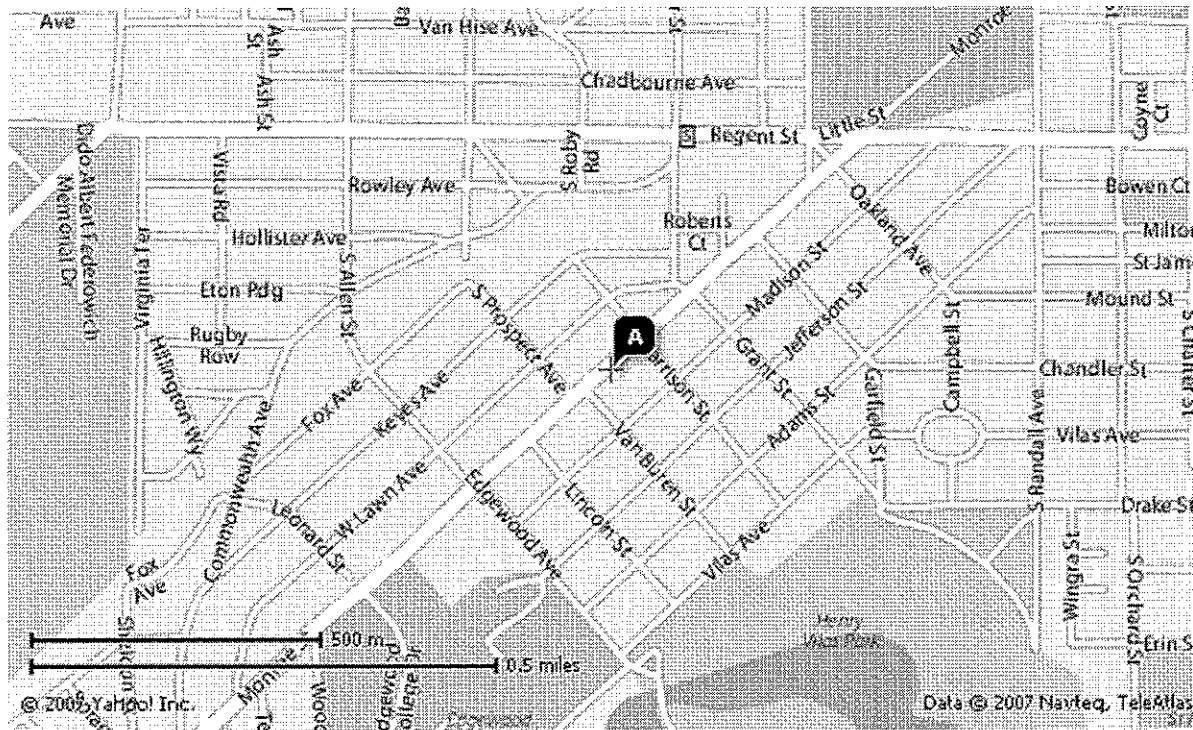
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All portions of this document, design, etc. are deemed unique and exclusive to a single building project. Any attempt to copy any portion of these documents with the intent of re-use on any other building project without the written consent of the Architect/Designer shall be construed as an infringement of copyright protection and will be pursued with legal action. The Architect/Designer shall not be responsible for any re-use of these documents. Plot Date: May 23, 2007

<b>ARCHAIDE</b> ARCHITECTS <b>(608) 335-8159</b> FAX: (608) 845-8159	8194 N. Riley Rd. Verona, WI 53593	<b>INTERIOR ALTERATIONS &amp; EXTERIOR DECK ADDITION PLAN</b> for the		
	E-MAIL: gkarnaia@tds.net	1923 MONROE ST.	The <del>Mason</del> <i>Refresh Deli</i>	



**A** Relish Deli & Market #54001 (608) 255-8500  
1923 monroe st madison, wi



### Your Points of Interest

When using any driving directions or map, it's a good idea to do a reality check and make sure the road still exists, watch out for construction, and follow all traffic safety precautions. This is only to be used as an aid in planning.