

## Liquor/Beer License

## **Application**

City of Madison Clerk 210 MLK Jr Blvd, Room 103 Madison, WI 53703

	ımber)
(Legistar file nun	nber)
(License number	)

	s A: □ Beer, □ Liquor, □ Cider	Madison, WI 53703	Office Use Only
Clas	s B: 🗹 Beer, 🖟 Liquor, 🕆 Class C Wine	licensing@cityofmadison.com 608-266-4601	
Sec	tion A – Applicant		
1.		Proprietor, Partnership, Coability Company exactly as it app	
2.	Trade Name (doing business		BBQLLC
3.	Address to be licensed 60	SE. Washington f	the Madison WI
4.	Mailing address 605 E.	Washington Aug. M	actison. WI 53703
5.	Anticipated opening date	12020	
6.	Is the applicant an employee named in question 1?  No	or agent of, or acting of behalf o	f anyone except the applicant
7.		e licensee or wholesale permitee (explain)	e have interest in this
<b>Sec</b> 8.	stored. Include all rooms include the sales, service, and/or storbe sold and stored only on the	or buildings where alcohol beve uding living quarters, if used, and rage of alcohol beverages and re- e premises as approved by Comr	d any outdoor seating used for ceipts. Alcohol beverages may non Council and described on

9.	Applicants for on-premises consumption only. Estimated capacity (patrons and employees):			
	Indoor:OPPL Outdoor:			
10.	Describe existing parking and how parking lot is to be monitored.			
	No drinking at Parking (ot.or Restaurent.			
	Restaurent.			
11.	Was this premises licensed for the sale of liquor or beer during the past license year?			
	No			
This only	stion C—Corporate Information section applies to corporations, nonprofit organizations, and Limited Liability Companies . Sole proprietorships and partnerships, skip to Section D.			
12.	Name of liquor license agent Taeho kim  City, state in which agent resides Madison			
13.	City, state in which agent resides $\frac{\sqrt{\alpha \sqrt{150}}}{2}$			
14.	How long has the agent continuously resided in the State of Wisconsin?			
15.	Has the liquor license agent completed the responsible beverage server training course?			
	No, but will complete prior to ALRC meeting    Yes, date completed			
16.	State and date of registration of corporation, nonprofit organization, or LLC.			
17.	<ul> <li>In the table below list the directors of your corporation or the members of your LLC.</li> <li>□ Attach background check forms for each director/member.</li> </ul>			
	Title Name City and State of Residence			
	Taeho Kim Madisch WI			
18.	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.			
19.	Is applicant a subsidiary of any other corporation or LLC?			
	No			
20.	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 21. What type of establishment is contemplated?  ☐ Tavern ☐ Nightclub ☐ Restaurant ☐ Liquor Store ☐ Grocery Store							
	☐ Convenie	nce Store wit	thout gas pui	mps 🏻 Conv	venience Store	e with gas pu	ımps
	Other						
22.	. 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						
23.	. Hours of operation: please enter opening and closing times in the table below.						
	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
	11 - 9	Cluse	11 - 9	11 - 9		11-10	10-10
	(Class B on	ly) Enter beld	ow any hours	when food ser	vice will not b	oe available, 	<i>if applicable</i>
	-	-	-	_	-	-	_
This (con 24.	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.  4. Indicate any other product/service offered.  5. 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:  6. Alcohol  7. W Food  9. Other  If applicable, describe "Other":  1. Yes						
26.	You may be required to submit documentation verifying the percentages indicated.  Do you plan to have live entertainment?  No □ Yes—what kind?  □ \( \lambda \)						
	•	itertainment i	/ includes live	music (except ntertainment L	solo acoustic)		designated
<b>Sec</b> 27.	Section F—Required Contacts and Filings  7. 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.	8. I understand that I am required to host an information session at least one week before the ALRC meeting. $\square$ No $\square$ Yes						
29.	I agree to co the Alderpers			this location to sion. 🗖 No 🏻	discuss my a Yes	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 $\square$ 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 180 days of being granted. $\square$ No $\square$ Yes
34.	I understand we must file a Special Occupational Tax return (TTB form 5630.5) before beginning business. [phone 1-800-937-8864]    No
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 $\square$ Yes
36.	Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? $\square$ No $\square$ Yes
Sec	tion G—Information for Clerk's Office
37.	This application is for the license period ending June 30, 20
38.	State Seller's Permit 4 5 6 - 1 0 3 0 5 6 3 0 92 - 0 4
39.	Federal Employer Identification Number 85 - 3668597
40.	Who may we contact between 8 a.m. and 4:30 p.m. regarding this license?
	Contact person Tacho Kim  Business phone 24-400-0261 Business e-mail address fivestarkorean Brain
	Preferred language <u>English</u>
	If needed, a qualified interpreter can be provided at no charge to you. Would you like an interpreter?  \( \subseteq \text{ Yes (language:)} \) \( \subseteq  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
	Phone E-mail

<b>NOTICE:</b> Completed application are due by Monday) to get on the agenda for the process <b>must</b> be accompanied by the following item	noon of the third Monday (fourth, if the Clerk's office eding months Alcohol License Review Committee. A c s:	e is closed on the third completed application		
☐ Member background investigation forms	less Tax Registration Certificate), $\square$ Appointment of $\square$ Articles of Incorporation (if Corp/LLC), $\square$ Floo $\square$ Sample Menu (if applying for Class B license)			
If required items are missing, the application Office until all requirements are submitted. I	n will not be considered complete and will not be acc No exceptions are made.	epted by the Clerk's		
been truthfully completed to the best of the to law, and that the rights and responsibilities	nalty provided by law, the applicant states that the a knowledge of the signer. Signer agrees to operate the es conferred by the license(s), if granted, will not be mises during inspection will be deemed a refusal to for revocation of this license.	he business according assigned to another.		
Penalty for materially false application information: Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.  (Officer of Corporation/Member of LLC/Partner/Sole Proprietor)  (Date)				
Clerk's Office checklist for complete a	pplications			
<ul> <li>□ WI Seller's Permit Certificate         (matching articles of         incorporation)</li> <li>□ FEIN</li> <li>□ Written description of premises</li> </ul>	<ul> <li>□ Background investigation form(s)</li> <li>□ Form for surrender of previous license</li> <li>□ *Articles of Incorporation</li> <li>□ *Appointment of Agent</li> </ul>	☐ Floor Plans ☐ Lease ☐ Business Plan ☐ **Sample Menu		
Witten description of premises	* Corporation/LLC only	** Class B only		
Upon Application Submission, the C	Clerk's Office issued to the application:			
$\square$ Orange sign $\square$ Orange business	card			
☐ "Applying for a Liquor/Beer License in the City of Madison" brochure with contact information				
Date complete application filed with Clerk's	Office			
Date of ALRC meeting Da	te license granted by Common Council	<del></del>		
Date provisional issued Da	te license issued			