



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 14.
- 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.

GRADUATE MADISON LESSEE LLC

- 4. Trade Name (doing business as) VARSITY CLUB / CHANCELLOR CLUB
- 5. Address to be licensed 601 LANGDON ST., MADISON, WI 53703
- 6. Mailing address 601 LANGDON ST., MADISON, WI 53703

- 7. Anticipated opening date ESTABLISHMENT IS CURRENTLY OPEN; CHANGE OF OWNERSHIP

- 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.

ALCOHOLIC BEVERAGES TO BE SERVED IN THE GROUND FLOOR LOUNGE OR GUEST ROOMS OF THE CAMPUS INN HOTEL. ALL STORED IN THE LOUNGE AND IN A SECURED STORAGE AREA ON THE 7TH FLOOR OF THE HOTEL. HOTEL CONSISTS OF 74 GUEST ROOMS AND 7 FLOORS.

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 58 IN GROUND FLOOR LOUNGE
13. Describe existing parking and how parking lot is to be monitored.
35 PARKING SPACES BELOW GROUND LEVEL, 10 SPACES ON GROUND LEVEL,
4 SECURITY CAMERAS MONITOR BELOW GROUND PARKING AS WELL AS EMPLOYEE
14. Was this premises licensed for the sale of liquor or beer during the past license year? WALK-THRU'S
 No Yes, license issued to DAHLMANN MADISON LLC (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 WILLIAM WELLMAN
17. City, state in which agent resides MOUNT HOPE, WI
18. How long has the agent continuously resided in the State of Wisconsin? 10 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 DECEMBER 2008
21. State and date of registration of corporation, nonprofit organization, or LLC.
DELAWARE - DECEMBER 6, 2013

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
SOLE MEMBER	RUBY ATLANTIC AJP PROGRAMTRS LLC	
SPECIAL MANAGER	GRADUATE BEVERAGE LICENSEE LLC	
SOLE MBR. & MGR. OF GRADUATE BEVERAGE LICENSEE, LLC	BENJAMIN WEPRIN	CHICAGO, IL

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.

WISCONSIN - CSC - LAWYERS INCORPORATING SERVICE COMPANY
8040 EXCELSIOR DRIVE, SUITE 400
MADISON, WI 53717

24. Is applicant a subsidiary of any other corporation or LLC?
 No Yes (explain) RUBY ATLANTIC AJCP PROGRAM TRS LLC
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 HOTEL LOUNGE
27. Business description THE CHANCELLOR'S CLUB LOUNGE IS PRIMARILY FOR HOTEL GUESTS. TOP SHELF LIQUOR, LOCAL BEERS, AND A SMALL SELECTION OF WINES BY THE GLASS ARE SOLD, ALONG WITH PANINI SANDWICHES. THE ENVIRONMENT IS UPSCALE, BUT RELAXING AND MIRRORS THE ENVIRONMENT OF THE HOTEL ITSELF.
28. Hours of operation 5pm - 10pm SUN. - THURS.; 5pm - 11pm FRI. - SAT.; SAT. AND SUN. MORNING SERVICE ON SPECIAL WEEKENDS
29. Describe your management experience LIQUOR AGENT AND HOTEL GM HAS 28 YEARS HOTEL MANAGEMENT EXPERIENCE, INCLUDING 5 AS DIRECTOR OF FOOD & BEVERAGE; 13 IN FRONT OFFICE OPERATIONS, AND 10 YEARS AS GM. DAHLMANN PROPERTIES, WHITE LOGGING AND DISNEY RESORTS
30. List names of managers below, along with city and state of residence.
TED DEVIT - FOOD & BEVERAGE MANAGER BARTENDERS REPORT TO F&B MANAGER; MADISON, WI F&B MANAGER REPORTS TO HOTEL GM
31. Describe staffing levels and staff duties at the proposed establishment LOUNGE IS STAFFED BY ONE OR TWO BARTENDERS/SERVERS DEPENDING ON LEVEL OF BUSINESS. THEY ARE RESPONSIBLE FOR OPENING, FOOD AND BEVERAGE SERVICE AND CLOSING.
32. Describe your employee training 3-WEEK PROGRAM STRUCTURED TO COVER ALL SERVING PROCESSES & PROCEDURES, HOTEL KNOWLEDGE, FOOD & BEVERAGE KNOWLEDGE, SERVICE STANDARDS AND CASH HANDLING PROCEDURES, ALONG WITH HEALTH AND SANITARY PROCEDURES. A CHECKLIST IS USED TO BE CERTAIN THE TRAINEE HAS RECEIVED ALL REQUIRED TRAINING PRIOR TO WORKING ON THEIR OWN WITHOUT DIRECT MANAGER OR TRAINER SUPERVISION. ALL BARTENDERS MUST BE LICENSED (AT HOTEL'S COST) PRIOR TO SERVING ALCOHOL.

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

GUESTS VISITING MADISON WHO HAVE A DESIRE OR NEED TO BE DOWNTOWN
OR NEAR THE UW CAMPUS AND WHO DESIRE AN INDEPENDENT, UPSCALE HOTEL.

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

CURRENT ADVERTISING VIA PRINT IN LOCAL AND UW-RELATED PUBLICATIONS,
ALONG WITH SOME RADIO (WISC. PUBLIC RADIO), INTERNET ADVERTISING
AND DIRECT SALES EFFORTS.

35. Are you operating under a lease or franchise agreement? No Yes LEASE

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? SOLO ACOUSTIC
PERFORMANCES/OCCASIONAL SMALL ENSEMBLE - LICENSE APPLICATION
SEE ENTERTAINMENT

38. What age range do you hope to attract to your establishment? OVER 21

39. What type of food will you be serving, if any? PANINI SANDWICHES
 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 OPERATING HOURS

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

43. Indicate any other product/service offered. COMPLIMENTARY BAR SNACKS

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? 4

During what hours do you anticipate they will be on duty? 4pm - 11pm SUN. - THURS.; 4pm - 12am
FRI.; SAT.

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

48. Do your plans call for a full-service bar? No Yes
 If yes, how many barstools do you anticipate having at your bar? 8
 How many bartenders do you anticipate having work at one time on a busy night? 1-2
49. Will there be a kitchen facility separate from the bar? No Yes
PREP KITCHEN LOCATED DIRECTLY BEHIND BAR
50. Will there be a separate and specific area for eating only?
 No Yes, capacity of that area _____
51. What type of cooking equipment will you have?
 Stove Oven Fryers Grill Microwave
PANINI PRESS
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? 8.6%
54. If your business plan includes an advertising budget:
 What percentage of your advertising budget do you anticipate will be related to food? 0%
 What percentage of your advertising budget do you anticipate will be drink related? 0%
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:
CHANCELLOR'S CLUB ONLY:
95.4 % Alcohol 4.6 % Food _____ % Other
58. Do you have written records to document the percentages shown? No Yes
ENTIRE HOTEL: 1.6% Alcohol 0.1% Food 98.3% other
 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 456-1028177754-02

69. Federal Employer Identification Number 61-1729059

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

Contact person WILLIAM WELLMAN

E-mail address GM@THECAMPUSINN.COM

Phone 608 257 4391 Preferred language ENGLISH

71. Corporate attorney, if applicable: Name _____

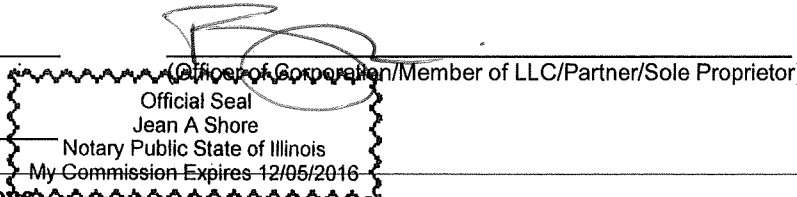
Phone _____ E-mail _____

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 17th day of March, 2017

Jean A Shore
 (Clerk/Notary Public)

My commission expires 12.5.2016



Clerk's Office checklist for complete applications		
<input checked="" 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 checked="" type="checkbox"/> Sample Menu <input type="checkbox"/> Business Plan
Date complete application filed with Clerk's Office _____		
Date of ALRC meeting _____ Date license granted by Common Council _____		
Date provisional issued _____ Date license issued _____ License number <u>LI 13-2014-00186</u>		

WRITTEN DESCRIPTION OF THE PREMISES

The hotel and restaurant facility having an address of 601 Langdon Street, Madison, Wisconsin 53703, and commonly known as the Campus Inn or Dahlmann Campus Inn on that certain parcel of real property more particularly described as:

Lot Seven (7), and the East 25 feet of Lot Six (6), Block Seven (7), Original Plat of the City of Madison, Dane County, Wisconsin,

Parcel No. 60-0709-143-0201-6,

together with all appurtenant easements and any other rights and interests appurtenant thereto, including but not limited to any rights, entitlements, or municipal subsidies related or attributable to the subdivision, zoning, development or redevelopment thereof to the extent same are assignable

GENERAL PLAN NOTES:

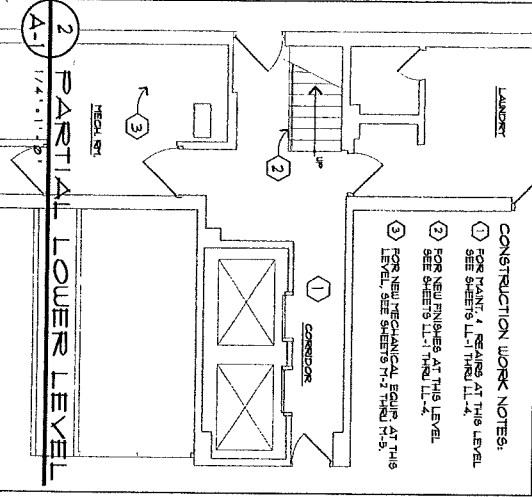
1. SEE SHEETS 1-1 THROUGH 1-4 FOR KITCHEN, BATH, AND RESTROOM ALTERATIONS.
2. DISPOSITION AS TO FLOOR OR PARTIAL FLOOR OR CEILING TO BE REMOVED OR ADDED.
3. SEE SHEETS 1-1 THROUGH 1-4 FOR MECHANICAL ALTERATIONS AND EQUIPMENT DISPOSITION.
4. SEE SHEETS 1-1 THROUGH 1-4 FOR MECHANICAL ALTERATIONS AND EQUIPMENT DISPOSITION.
5. SEE SHEETS 1-1 THROUGH 1-4 FOR MECHANICAL ALTERATIONS AND EQUIPMENT DISPOSITION.
6. ALL WORK SHALL BE ACCORDING TO THE FULL SET OF CONTRACT DOCUMENTS.

CONSTRUCTION WORK NOTES:

1. NEW PARTIAL FLOOR SHALL BE CONCRETE ON EXISTING FLOOR WITH NEW REINFORCING BARS AND 4" MIN. THICKNESS OF CONCRETE. ALL WORK SHALL BE ACCORDING TO THE FULL SET OF CONTRACT DOCUMENTS.
2. NEW PARTIAL FLOOR SHALL BE CONCRETE ON EXISTING FLOOR WITH NEW REINFORCING BARS AND 4" MIN. THICKNESS OF CONCRETE. ALL WORK SHALL BE ACCORDING TO THE FULL SET OF CONTRACT DOCUMENTS.
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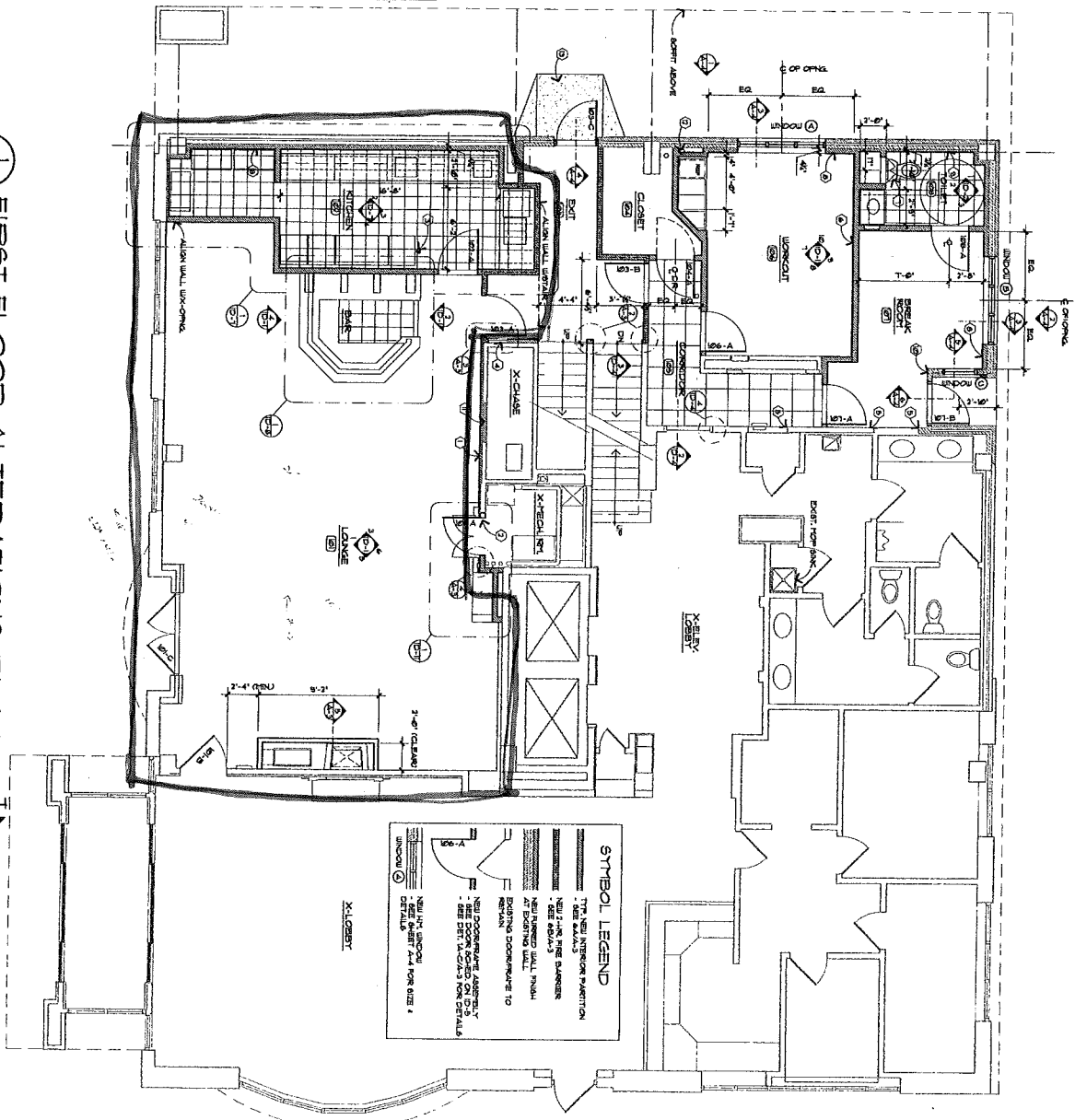
CONSTRUCTION WORK NOTES:

1. FOR PAINT, A, SEE SHEETS 1-1 THROUGH 1-4.
2. FOR NEW FINISHES AT THIS LEVEL, SEE SHEETS 1-1 THROUGH 1-4.
3. FOR NEW MECHANICAL EQUIPMENT AT THIS LEVEL, SEE SHEETS 1-1 THROUGH 1-4.



2 PARTIAL LOWER LEVEL
A-1 1/4" = 1'-0"

1 FIRST FLOOR ALTERATIONS PLAN
A-1 1/4" = 1'-0"



SYMBOL LEGEND

- 1. NEW INTERIOR PARTITION - SEE S.A. 1.5
- 2. NEW FIRE BARRIERS - SEE S.A. 1.5
- 3. NEW INTERIOR WALL PARTITION AT EXISTING WALL RETAIN
- 4. EXISTING DISPOSITION TO RETAIN
- 5. NEW DISPOSITION PARTITION - SEE S.A. 1.5
- 6. NEW DOOR W/ 2'-0" x 2'-0" OPENING
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The Chancellor's Club

Fresh-Grilled Panini Sandwiches

ALL OF OUR PANINI SANDWICHES ARE GRILLED TO PERFECTION ON OUR FRESH CIABATTA BREAD, ACCOMPANIED BY A GENEROUS PORTION OF OUR PASTA SALAD.

Italian Smoked Panini

SMOKED GOUDA AND FONTINA CHEESES LAYERED WITH PROSCIUTTO HAM, RED ONIONS AND SUN-DRIED TOMATOES. \$9.95

The Midwestern

SLICED ROAST BEEF WITH SHARP WISCONSIN CHEDDAR, SWEET ONIONS, PEPPERONCINI PEPPERS, WATERCRESS AND DIJON MUSTARD. \$9.95

Garden Fresh Vegetarian

GRILLED EGGPLANT LAYERED WITH PROVOLONE CHEESE AND ROASTED RED AND YELLOW PEPPERS. \$7.95

Tuscan Chicken

GRILLED CHICKEN BREAST ON WHOLE-GRAIN BREAD, TOPPED WITH SPINACH, SUN-DRIED TOMATOES, AND DIJON MUSTARD. A HEALTHY ALTERNATIVE! \$9.95

Chicken Florentine

GRILLED CHICKEN BREAST TOPPED WITH OUR GARLIC AIOLI AND LAYERS OF FRESH SPINACH AND PROVOLONE CHEESE. \$9.95

Mozzarella Chicken

GRILLED CHICKEN BREAST TOPPED WITH MOZZARELLA CHEESE AND SUN-DRIED TOMATOES. \$9.95

Smoked Salmon, Red Onion and Provolone

OAK AND JUNIPER-SMOKED SCOTTISH SALMON*, SERVED WITH PROVOLONE CHEESE, CAPERS, AND DILL-DIJON MUSTARD. \$9.95

SINCE ALL OF OUR SANDWICHES ARE GRILLED TO ORDER,
WE WILL BE HAPPY TO PREPARE YOUR SANDWICH ANY WAY YOU'D LIKE IT.

*Consuming raw or undercooked meats, poultry, seafood, shellfish, or eggs may increase your risk of food borne illness.