

ORIGINAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk.

For the license period beginning _____ 20____ ;
ending 04/30 20 13

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

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

Applicant's Wisconsin Seller's Permit Number:	<u>456-1027926236</u>	02
Federal Employer Identification Number (FEIN):	<u>46-1438852</u>	
LICENSE REQUESTED ▶		
TYPE	FEE	
<input type="checkbox"/> Class A beer	\$	
<input checked="" type="checkbox"/> Class B beer	\$	
<input type="checkbox"/> Wholesale beer	\$	
<input type="checkbox"/> Class C wine	\$	
<input type="checkbox"/> Class A liquor	\$	
<input checked="" type="checkbox"/> Class B liquor	\$	
<input type="checkbox"/> Reserve Class B liquor	\$	
Publication fee	\$	
TOTAL FEE	\$	

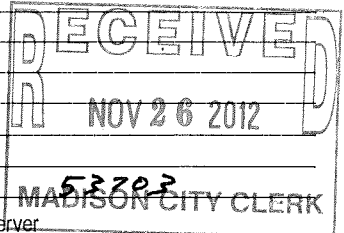
1. The named INDIVIDUAL PARTNERSHIP LIMITED LIABILITY COMPANY
 CORPORATION/NONPROFIT ORGANIZATION

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): ▶ Blair Street Brew + BBQ 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/Operator Nicholas M. Sierant</u>	<u>133 N. Butler St. #2</u>	<u>53703</u>
Vice President/Member	_____	_____	_____
Secretary/Member	_____	_____	_____
Treasurer/Member	_____	_____	_____
Agent ▶	_____	_____	_____
Directors/Managers	_____	_____	_____



3. Trade Name ▶ Blair Street Brew + BBQ Business Phone Number _____
4. Address of Premises ▶ 605 E. Washington Ave Post Office & Zip Code ▶ 53703

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 11/24 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.) dining rooms; one w/ small bar; back beer cooler, lock & liquor storage
10. Legal description (omit if street address is given above): _____
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

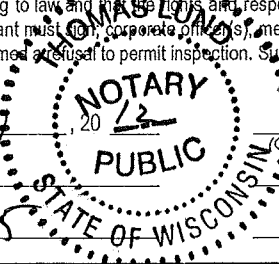
READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signers. Signers agree to operate this business according to laws and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants and each member of a partnership applicant must sign; corporate officers, 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 26th day of November, 2013
Thomas Lund
(Clerk/Notary Public)
My commission expires 05/25/2015

(Officer of Corporation/Member/Manager of Limited Liability Company/Partner/Individual)

(Officer of Corporation/Member/Manager of Limited Liability Company/Partner)

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



TO BE COMPLETED BY CLERK			
Date received and filed with municipal clerk	Date reported to council/board	Date provisional license issued	Signature of Clerk / Deputy Clerk
Date license granted	Date license issued	License number issued	

LICLB-2012-00987

City of Madison Supplemental Class B License Application

<input type="checkbox"/> Seller's Permit Certificate (Entity must match the Articles of Incorporation) <input type="checkbox"/> Federal Employer Identification # <input type="checkbox"/> Notarized Original Application Form <input type="checkbox"/> Notarized Supplemental Form <input type="checkbox"/> Orange Sign (Clerk's Office provides at time of application)	<input type="checkbox"/> Written Description of Premise <input type="checkbox"/> Background Investigation Form(s) <input type="checkbox"/> Notarized Transfer of Ownership <input type="checkbox"/> *Articles of Incorporation <input type="checkbox"/> *Notarized Appointment of Agent * Corporation/LLC only	<input type="checkbox"/> Floor Plans <input type="checkbox"/> Lease <input type="checkbox"/> Sample Menu <input type="checkbox"/> Business Plan
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1. Name of Applicant/Partner/Corporation/LLC Blair Street Brew + BBQ LLC
2. Address of Licensed Premise 605 E. Washington Ave.; 53703
3. Telephone Number: 970-531-6502 4. Anticipated opening date: Jan 1, 2013
5. Mailing address if not opening immediately _____
6. 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
7. Are there any special conditions desired by the neighborhood? Yes No
 Explain. _____
8. Business Description, including hours of operation: BBQ, microbrewery, delivery, 10am - 10pm
9. Do you plan to have live entertainment? No Yes—What kind? _____
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.**
dual dining rooms (20'x40') w/ picnic table + booth seating, capacity of 90, small bar that seats 10, back storage cooler has beer, locked office has liquor.
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. there is an adjacent lot which has 25 parking slots shared by 2 businesses + 2 residential buildings
13. Describe your management experience, staffing levels, duties and employee training.
I have over 12 yrs GM experience and have opened 6 restaurants for private owners w/ full training
14. Identify the **registered agent** for your Corporation or LLC. This is your corporation's agent for service of process, notice or demand required or permitted by law to be served on the corporation.
Nicholas Sierczant; 123 N. Butler St. #2; Madison, 53703
 Name _____ Address _____

15. Utilizing your market research, who would you project your target market to be?

lunch = surrounding businesses (MGE) dinner = nearby residential occupants

16. What age range would you hope to attract to your establishment? 20-50 yo

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

t-shirts, direct mailings, delivery vehicles = BBQ, delivery, micro brewery

18. Are you operating under a lease or franchise agreement? Yes (attach a copy) No

19. Owner of building where establishment is located: Cliff Fisher

Address of Owner: PO Box 1601, Madison 53701 Phone Number 608-213-2828

20. 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

21. List the Directors of your Corporation/LLC

Nicholas M. Sierzant, 123 N. Butler St. #2, 53703
Name Address

Name Address

Name Address

22. List the Stockholders of your Corporation/LLC

Nicholas M. Sierzant, 123 N. Butler St. #2, 53703 100
Name Address % of Ownership

Name Address % of Ownership

Name Address % of Ownership

23. What type of establishment are you? (Check all that apply) Tavern Nightclub Restaurant

Other Please Explain. _____

24. What type of food will you be serving, if any? BBQ

Breakfast Lunch Dinner

25. Please submit a sample menu with your application, if possible. What might eventually be included on your operational menu when you open?

Appetizers Salads Soups Sandwiches Entrees
 Desserts Pizza Full Dinners

26. During what hours of your operation do you plan to serve food? 10am - 10pm

27. What hours, if any, will food service not be available? N/A
28. Indicate any other product/service offered. future microbrewery
29. Will your establishment have a kitchen manager? Yes No
30. Will you have a kitchen support staff? Yes No
31. How many wait staff do you anticipate will be employed at your establishment? 3-4
During what hours do you anticipate they will be on duty? 11-1; 5-7
32. Do you plan to have hosts or hostesses seating customers? Yes No
33. Do your plans call for a full-service bar? Yes No
If yes, how many bar stools do you anticipate having at your bar? 10
How many bartenders do you anticipate you would have working at one time on a busy night? 2
34. Will there be a kitchen facility separate from the bar? Yes No
35. Will there be a separate and specific area for eating only? Yes No
If yes, what will be the seating capacity for that area? 50
36. What type of cooking equipment will you have? Stove Oven Fryers Grill Microwave
37. Will you have a walk-in cooler and/or freezer dedicated solely to the storage of food products? Yes No
38. What percentage of your overall payroll do you anticipate will be devoted to food operation salaries?
85%
39. If your business plan includes an advertising budget, what percentage of your advertising budget do you anticipate will be related to food? 90
What percentage of your advertising budget do you anticipate will be drink related? 10
40. Are you currently, or do you plan to become, a member of the Madison—Dane County Tavern League or the Tavern League of Wisconsin? Yes No
41. Are you currently, or do you plan to become, a member of the Wisconsin Restaurant Association or the National Restaurant Association? Yes No

42. What is your estimated capacity? 90

43. Pursuant to Chapter 38.02 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.

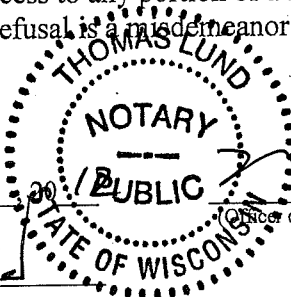
Gross Receipts from Alcoholic Beverages	15 30 % <i>avg</i>
Gross Receipts from Food and Non-Alcoholic Beverages	80 %
Gross Receipts from Other	5 %
Total Gross Receipts	100%

44. 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.

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 signer. Signer agrees 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. 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 26th day of Nov.



Thomas Lund
(Clerk/Notary Public)

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

My commission expires 05/25/2015

Appointment of New Liquor/Beer Agent

To be completed by Corporate Officer or Member of LLC

I, Nicholas Sierzant, officer/member for Blair Street Brew + BBQ
(Corporation/LLC) doing business as Blair Street Brew + BBQ, authorize and appoint
Nicholas Sierzant (Name) as the liquor/beer agent for the premise
located at 605 E. Washington Ave.

Subscribed and sworn to before me this
_____ Day of _____, 20_____


Signature of Officer/Member

Notary Public, Dane County, Wisconsin
My Commission Expires _____

To be completed by appointed Liquor/Beer Agent

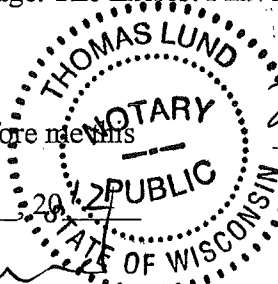
I, Nicholas Sierzant, appointed liquor/beer agent for
Blair Street Brew + BBQ (name of Corporation or LLC), being first duly sworn
say I have vested in me, by properly authorized and executed written delegation, full authority
and control of the premise described in the license of such corporation or limited liability
company, and I am involved in the actual conduct of the business as an employee, or have a
direct financial interest in the business of the licensee, therein relating to the intoxicating
liquor/fermented malt beverage. The interest I have in the business is 100 %.

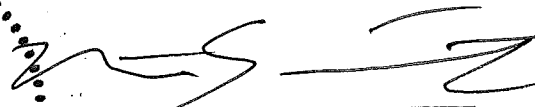
Subscribed and sworn to before me this

26th Day of Nov., 2014

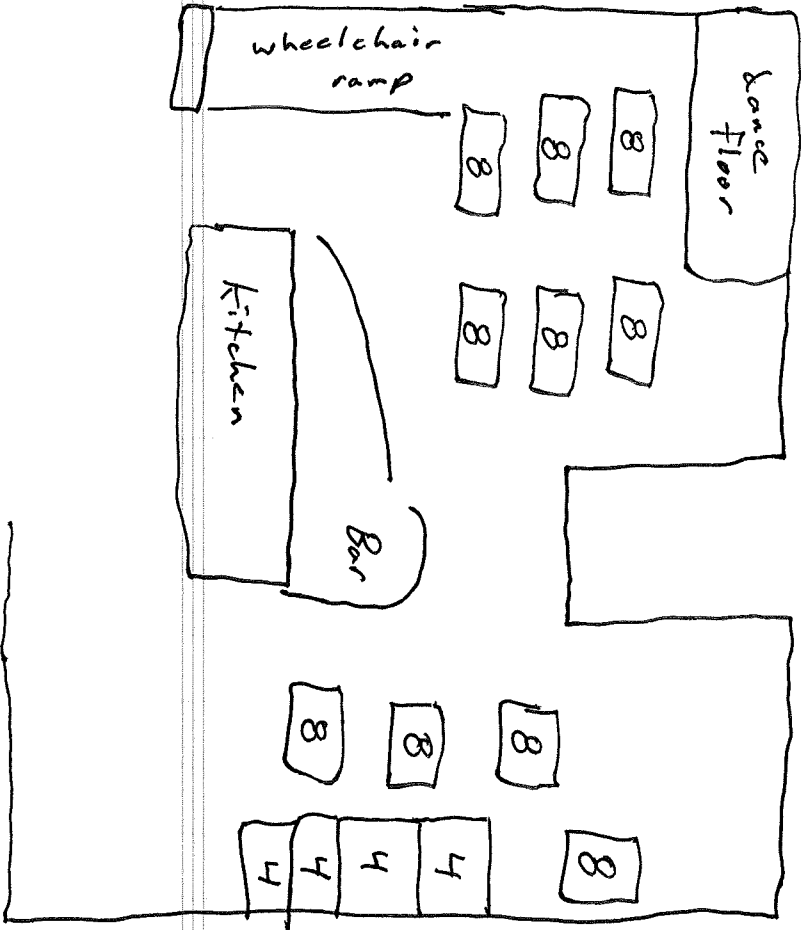
Thomas Lund
Notary Public, Dane County, Wisconsin

My Commission Expires 05/25/2015




Signature of Agent

The appointed Liquor/Beer Agent must complete the other side of this form.



Blair Street Brew & BBQ

Appetizers

Deep fried pickles, smoked sausage plate, homemade onion rings, cheese curds (Cheddar and Pepperjack), hot wings?, quesadilla?

Sides

Secret recipe baked beans, corn on the cob, coleslaw, american fries, garlic mashed potatoes, corn bread, succotash, steamed broc/veg, potato salad

Entrees

Ribs half and full rack: slow cooked spare ribs with a dry rub and homemade BBQ sauce with sides of baked beans, coleslaw and corn bread

Beef brisket sandwich: open faced Texas toast, slow cooked beef brisket, homemade BBQ sauce, melted cheddar and crispy onion strings

BBQ pulled pork sandwich: slow cooked pulled pork with homemade BBQ sauce, sliced pickles on a ciabatta roll with sweet and tangy mayo spread

Big T's Chicken Salad Sandwich: the most amazing chicken salad ever!!!

Stuffed Pork Loin

Bacon Ranch Chicken Salad

Kids

Hot Ham and Cheese: thinly sliced slow cooked ham

Mac and Cheese wedges: formed mac and cheese and deep fried

Fried PB&J

Desserts

Fried Ice Cream: cinnamon and sugar encrusted WI vanilla ice cream with a honey drizzle and whipped cream finish

Apple Pie

Blair Street Brew & BBQ

EXECUTIVE SUMMARY

I will be opening a BBQ restaurant with a microbrewery and small bar at 605 East Washinton Avenue. We will be looking to build a substantial lunch, dinner and delivery business. I am opening this restaurant because I feel that over the years, I have perfected great BBQ recipes including my signature dry rub, bbq sauce, coleslaw and baked beans.

BUSINESS INFO

The Blair Street Brew & BBQ will be located on the corner of East Washington Ave and Blair St. We will serve "Mad City-style BBQ" meaning that everything is made from scratch with great service and delicious micro brews. The ribs and brisket will be slow cooked at low temp. It will have a rustic décor with wood floors and picnic tables surrounded by a sports theme motif (we will support our local sports teams but also have old black and white photos of classic sports moments ie: The Icebowl, Miracle on Ice, Y.A. Tittle's kneel of defeat). The micro brewery will be in the front of the window where travelers on Washington Avenue can see it.

MARKET ANALYSIS

Directly behind the restaurant is Madison Gas and Electric, which will be out main clientele during lunch and happy hour. Our closest main competitors are Brickhouse BBQ and The Great Dane being the closest micro-brewery. We will ensure a quick delivery service with numerous vehicles disguised as pigs. We will run different marketing promotions including free Bucky Bites for happy hour and Madison's first ever Barstool Open (a pub crawl where nine bars in town each construct their own miniature golf hole). I already have catering opportunities lined up at neighboring bars. We will focus any advertising in the surrounding neighborhood east of the capital building. We will also look into a traveling shop that we can send down for Badger games. This would also allow us some flexibility for a fail safe: if our business doesn't work out for lunch, we can shut the restaurant down during the day and I can run the trailer up to the square.

BUSINESS OPERATIONS

We will open from 10 or 11 am till at least 10 pm or later depending on how busy we are. In the sprind, we will have a patio that runs out to the sidewalk. We will employ two delivery drivers, a counter supervisor and a waitress during lunch and probably the same during dinner with the addition of another driver, waitress, cook and extra dishwasher if needed. The cooking oversight and micro-brewery development will be run by me with two trusted assistants that will run the restaurant while I'm gone. Estimated food costs and labor costs: