

39-1779155

City of Madison Supplemental Class B License Application

<input checked="" type="checkbox"/> Seller's Permit Certificate (Entity must match the Articles of Incorporation)	<input checked="" type="checkbox"/> Written Description of Premise	<input type="checkbox"/> Floor Plans
<input checked="" type="checkbox"/> Federal Employer Identification #	<input checked="" type="checkbox"/> Background Investigation Form(s)	<input checked="" type="checkbox"/> Lease
<input type="checkbox"/> Notarized Original Application Form	<input type="checkbox"/> Notarized Transfer of Ownership	<input checked="" type="checkbox"/> Sample Menu
<input checked="" type="checkbox"/> Notarized Supplemental Form	<input checked="" type="checkbox"/> *Articles of Incorporation	<input checked="" type="checkbox"/> Business Plan
<input checked="" type="checkbox"/> Orange Sign (Clerk's Office provides at time of application)	<input checked="" type="checkbox"/> *Notarized Appointment of Agent	
	* Corporation/LLC only	

1. Name of Applicant/Partner/Corporation/LLC Alterra Coffee Roaster Inc
 2. Address of Licensed Premise Tenny Plaza 110 East Main St Madison
 3. Telephone Number: _____ 4. Anticipated opening date: March 15 2013
 5. Mailing address if not opening immediately 2999 N Humboldt Blvd Milwaukee WI 53211

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: cafe with coffee focus, bakery
soups sandwiches Open daily 6am - 9pm

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.**

Southwest corner of Tenny Plaza. 10 story office building. 3,000 sq ft space on street level. Seating capacity 75 inside with 30-40 seats outside seasonally. All food and beverage is counter service. Bartenders will pour beer and wine from their stations. Kegs in walk in and wine in locker.

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. Tenny Plaza has an adjoining parking structure

13. Describe your management experience, staffing levels, duties and employee training.
Extensive management experience with detailed S.O.P. manuals
Management structure includes Director of Stores, Operations Manager, training dept. Staff of 15-20

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.

Paul Miller 2999 N Humboldt Blvd Milwaukee, WI 53212
 Name Address

15. Utilizing your market research, who would you project your target market to be?
Tenants of building, Employees of U.S. Bank, Government employees, Neighborhood Residents

16. What age range would you hope to attract to your establishment? 30-60 yrs old

17. Describe how you plan to advertise/promote your business. What products will you be advertising?
No traditional advertising. Possibly some underwriting on local Public Radio announcing our opening.

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

19. Owner of building where establishment is located: Urban Land Interests
Address of Owner: 1 Doty St Madison WI Phone Number 608-257-0165

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

<u>Paul Miller</u>	<u>2700 E Shorewood Blvd Shorewood WI 53211</u>	<u>53211</u>
Name	Address	
<u>C. Ward Fowler</u>	<u>4477 W. Farwell Ave Shorewood, WI 53211</u>	<u>53211</u>
Name	Address	
<u>Lincoln Fowler</u>	<u>2961 N Maricetta Blvd M. Wauke WI 53211</u>	<u>53211</u>
Name	Address	

22. List the Stockholders of your Corporation/LLC

<u>Same as above</u>	<u>33.33</u>
Name	% of Ownership
<u>Same as above</u>	<u>33.33</u>
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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? simple and healthy - see menu
 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? 6am - 9pm 7 days a week

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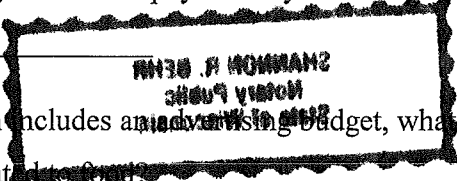
Breakfast Lunch Dinner

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? 6am - 9pm 7 days a week

27. What hours, if any, will food service not be available? _____
28. Indicate any other product/service offered. coffee and related retail
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? all counter service
 During what hours do you anticipate they will be on duty? _____
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? _____
 How many bartenders do you anticipate you would have working at one time on a busy night? beer and wine will be served from the barista station
34. Will there be a kitchen facility separate from the bar? Yes No
there is a dedicated food area - pantry
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? _____
36. What type of cooking equipment will you have? Stove Oven Fryers Grill Microwave
turbo cooker -> combo oven / 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?
30-40%
39. If your business plan includes an advertising budget, what percentage of your advertising budget do you anticipate will be related to food? very small
 What percentage of your advertising budget do you anticipate will be drink related? very small budget related in advertising
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? 75 seats IN / 40 OUTDOOR = 115 TOT.

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	5 %
Gross Receipts from Food and Non-Alcoholic Beverages	85 %
Gross Receipts from Other	10 %
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.

Proforma included

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.

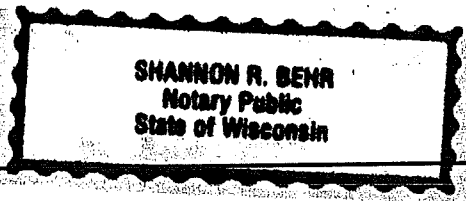
Subscribed and Sworn to before me:

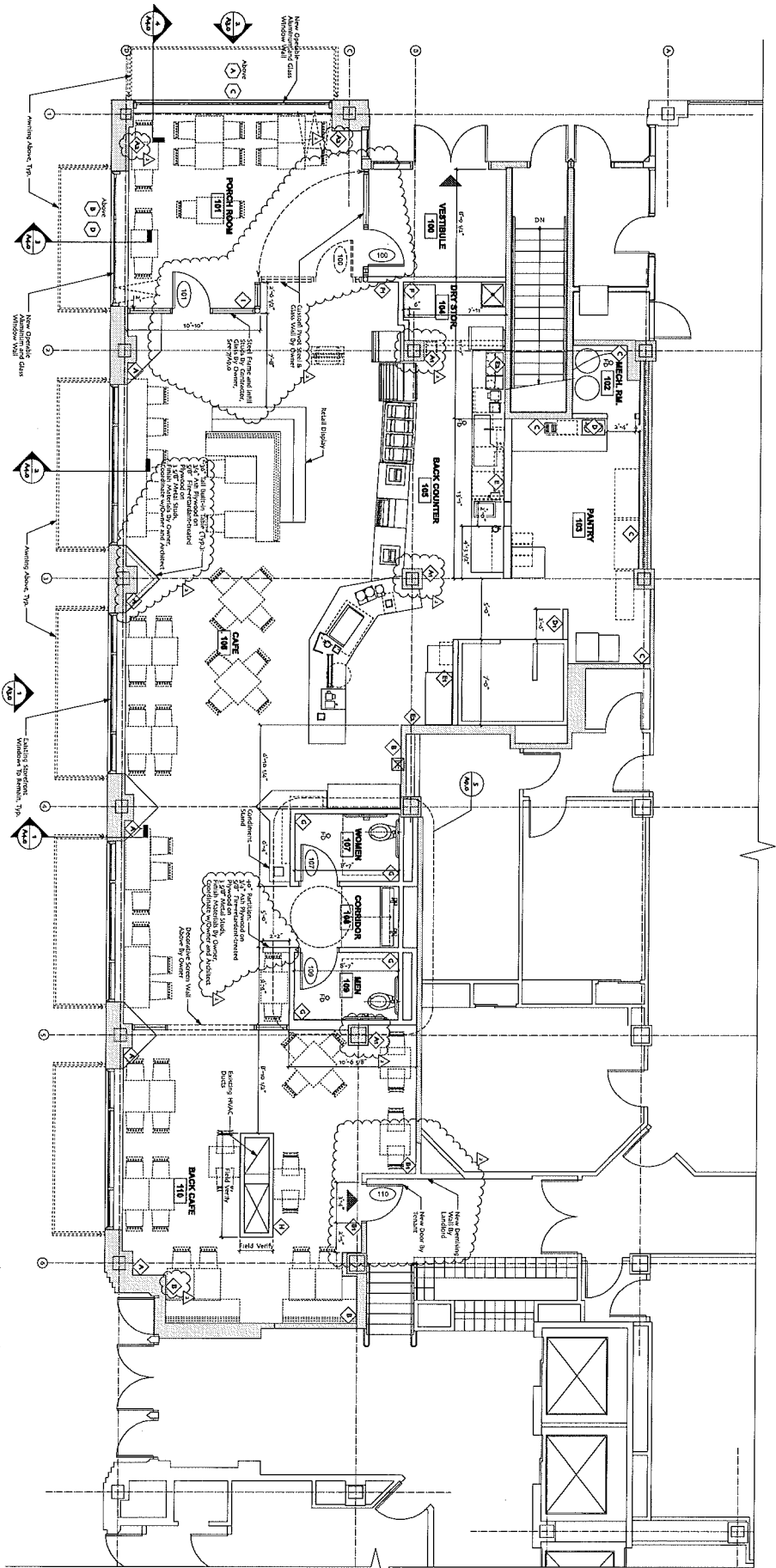
this 18 day of January, 2013

Shannon R. Behr
(Clerk/Notary Public)

My commission expires 11/22/15

Paul Malle
(Office of Corporation/Member of LLC/Partner/Individual)



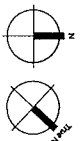


General Notes For Floor Plans

Existing Walls

ALL INFORMATION CONCERNING EXISTING CONDITIONS FOR THE FIELD VISITOR PRIOR TO ENTRY, ACCEPTED AND OWNER FOR POSSIBLE FROM THOSE SHOWN HERE.

1 Ground Level Plan
Scale: 1/4" = 1'-0"



A1.1



THE KUDALA WASKATKO ARCHITECTS

1611 18th Street
Madison, WI 53712-2317
Tel: 608.277.2954
Fax: 608.277.2954

PROJECT

Altera - Tenney Cafe

22 South Pinney Street
Madison, WI 53703

OWNER

Altera Coffee Roasters

2909 N. Kamek Road
Madison, WI 53712

CONSULTANT

STRUCTURAL ENGINEERING, INC.

3200 West Capitol Drive
Madison, WI 53703
Tel: 608.277.2954

DATE: August 27, 2012

PROJECT NUMBER: 197012

Ground Level Plan

DATE: 197012

