

# ORIGINAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk.

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

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

County of Dane Aldermanic Dist No. 17 (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): ► Chipotle Mexican Grill of Colorado, 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

Applicant's Wisconsin Seller's Permit Number:	
Federal Employer Identification Number (FEIN): <u>84-1485992</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	\$
<b>TOTAL FEE</b>	\$

Title	Name	Home Address	Post Office & Zip Code
President/Member <u>Member</u>	Chipotle Mexican Grill, Inc.		
Vice President/Member <u>Manager</u>	M Steven Ells	100 S. Marion Parkway, Denver, CO 80209	
Secretary/Member <u>Manager</u>	Montgomery F. Moran	7705 Fairview Road, Boulder, CO 80303	
Treasurer/Member			
Agent ►	<u>J. Sahul Flores, Jr.</u>	3731 S. 56th Street, Greenfield, WI 53220	
Directors/Managers	Please see attached list of Officers of Chipotle Mexican Grill, Inc.		
3 Trade Name ► <u>Chipotle Mexican Grill</u>	Business Phone Number	applied for	
4 Address of Premises ► <u>4628 East Washington Avenue</u>	Post Office & Zip Code	► <u>Madison, WI 53704</u>	
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?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
6 Is the applicant an employee or agent of, or acting on behalf of anyone except the named applicant?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
7 Does any other alcohol beverage retail licensee or wholesale permittee have any interest in or control of this business?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
8 (a) <b>Corporate/limited liability company applicants only:</b> Insert state <u>Colorado</u> and date <u>01/05/99</u> of registration	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
(b) Is applicant corporation/limited liability company a subsidiary of any other corporation or limited liability company?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> 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?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> 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) <u>2216 sq. ft. restaur.; 250-1000 sq. ft. patio; served behind counter</u>			
10 Legal description (omit if street address is given above):			
(a) Was this premises licensed for the sale of liquor or beer during the past license year?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
(b) If yes, under what name was license issued? <u>Chipotle Mexican Grill, Inc.</u>			
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]	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> 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]	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
14 Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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 16th day of November, 2007  
D. O'Brien RENESE O'BRIEN  
CLERK/NOTARY PUBLIC  
STATE OF COLORADO  
STATION EXPIRED 07/11/2009  
My commission expires 7-11-2011 - 2010

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

*May*  
(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 <u>79837</u>	

*Ald - Clausius*

*Pcl - 518*

*08680*

**CHIPOTLE MEXICAN GRILL OF COLORADO, LLC**

100% SOLE MEMBER:  
CHIPOTLE MEXICAN GRILL, INC.

LLC MANAGERS:  
M. STEVEN ELLS AND MONTGOMERY F. MORAN

OFFICERS OF CHIPOTLE MEXICAN GRILL, INC.:

CEO/CHAIRMAN OF THE BOARD OF DIRECTORS – M. STEVEN ELLS

PRESIDENT/SECRETARY/COO/DIRECTOR – MONTGOMERY F. MORAN

8(c)

1. License #67394  
License Type: Liquor & Beer, Class B  
Property: 8422 Old Sauk Road, Madison, WI 53562
2. License #62566  
License Type: Liquor & Beer, Class B  
Property: 658 State Street, Madison, WI 53703
3. License #8440  
License Type: Liquor & Beer, Class B  
Property: 3232 South 27th Street, Milwaukee, WI 53215
4. License #B-0007944  
License Type: Liquor & Beer, Class B  
Property: 600 East Ogden Avenue, Milwaukee, WI 53202
5. License Type: Liquor & Beer, Class B  
Property: 5792 South 108th Street, Hales Corners, WI 55130
6. License Type: Liquor & Beer, Class B  
Property: 5720 Washington Avenue, Mt. Pleasant, WI 53406
7. License Type: Beer, Class B  
Property: 15375 Bluemound Road, Brookfield, WI 53005
8. License Type: Beer, Class B  
Property: 3705 N. 124th Street, Suite 200, Brookfield, WI 53005
9. License Type: Beer, Class B  
Property: 1021 Pearson Drive, Hudson, WI 54016
10. License Type: Beer & Liquor, Class B  
Property: 4628 E. Washington Avenue, Madison, WI 53704

## City of Madison Supplemental Class B License Application

<input type="checkbox"/> Seller's Permit Number <input type="checkbox"/> Federal Employer Identification Number <input type="checkbox"/> Notarized Original Application Form <input type="checkbox"/> Notarized Supplemental Form	<input type="checkbox"/> Description of Licensed Premise <input type="checkbox"/> *Notarized Appointment of Agent <input type="checkbox"/> Background Investigation Form(s) <input type="checkbox"/> Notarized Transfer of Ownership <input type="checkbox"/> *Articles of Incorporation	<input type="checkbox"/> Floor Plans <input type="checkbox"/> Lease <input type="checkbox"/> Sample Menu <input type="checkbox"/> Business Plan * Corporation/LLC only
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1. Name of Applicant/Partner/Corporation/LLC Chipotle Mexican Grill of Colorado, LLC
2. Address of Licensed Premise 4628 East Washington Avenue
3. Telephone Number: applied for 4. Anticipated opening date: 12/2007
5. Mailing address if not opening immediately 1543 Wazee Street, Ste. 200, Denver, CO 80202
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: 11 a.m. - 10 p.m. daily, except holidays  
\_\_\_\_\_
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.**  
1 story, multi-tenant building, 2216 sq. ft. space for dine-in or take-out  
"fast-casual" restaurant; occupancy load is 67; additional patio seating;  
liquor served from order counter (no bar); liquor stored in walk-in cooler & cabinets behind counter not in public traffic areas.
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. shared tenant parking;  
approximately 60 spaces plus 4 handicap spaces
13. Describe your management experience, staffing levels, duties and employee training.  
Applicant has been in business for 14 years in multiple jurisdictions throughout the US with liquor licenses. Chipotle is a very conscientious business that provides employees with in-house training and encourages to participate in certifications outside of the company.
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.  
National Registered Agents, Inc., 901 S. Whitney Way, Madison WI 53711  
Name \_\_\_\_\_ Address \_\_\_\_\_

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

All ages and income levels; people who enjoy fresh food

16. What age range would you hope to attract to your establishment? all

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

Site signage and local ads; products include burritos, tacos and salads

18. Are you operating under a lease or franchise agreement? Yes (attach a copy)

19. Owner of building where establishment is located: Discovery Springs, LLC

Address of Owner: 2275 Deming Way, Ste. 200, Middleton, WI Phone Number 833-2929

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

see attached

Name Address

Name Address

Name Address

22. List the Stockholders of your Corporation/LLC

Traded publicly since 2006.

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? Burritos, chips & salsa, tacos, salads and beverages

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? all

27 What hours, if any, will food service not be available? n/a

28. Indicate any other product/service offered. n/a

29. Will your establishment have a kitchen manager? Yes  No  store manager

30. Will you have a kitchen support staff? Yes  No  counter cooks, no servers

31. How many wait staff do you anticipate will be employed at your establishment? 0  
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? \_\_\_\_\_

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? 67

36. What type of cooking equipment will you have? Stove  Oven  Frys  Grill  Micro  wave

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?  
0%

39. 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%

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? 67

43 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

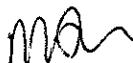
<b>Gross Receipts from Alcoholic Beverages</b>	2 %
<b>Gross Receipts from Food and Non-Alcoholic Beverages</b>	98 %
<b>Gross Receipts from Other</b>	0 %
<b>Total Gross Receipts</b>	<b>100%</b>

44. Do you have written records to document the percentages shown? Yes  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 15<sup>th</sup> day of November, 2007

  
(Officer of Corporation/Member of LLC/Partner/Individual)  
M. Steven Ells, Manager

Denise O'Brien  
(Clerk/Notary Public)

My commission expires DENISE O'BRIEN  
NOTARY PUBLIC  
STATE OF COLORADO  
My Commission Expires 07/12/2009