

Liquor/Beer Agent

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

	Class	A:	☐ Beer,	Liquor,		Cide
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Class B: X Beer, X Liquor,

▼ Class C Wine

licensing@cityofmadison.com 608-266-4601 (Agenda Item Number) -if change
(Legistar file number) -if change
LICLIB-2014 - 00908
(License number)

(Alder District # and Name)

Office Use Only

0	This application is for Liquor/Beer Agents for new alcohol licenses and for a change of
	Liquor/Beer Agent to an existing alcohol license.

o If you are a **new** agent for a **new** license, there is no charge.

o If this is a change of agent, there is a \$10.00 charge.

- Please include a background check form and copy of your picture ID with this application.
- Please include documentation that you have taken Beverage Server Training or have held an Operator's License within the last two years.

To be completed by Corporate Officer or Member of LLC

to be completed	by corporate officer of Member of L	
I, Joseph J Kadow	, officer/member forBonefishe Grill, LLC	_ (Corp/LLC),
doing business as Bonefish Grill #1202	, authorize and appoint Robert Gambino Name	
as the liquor/beer agent for the pre	mise located at7345 Mineral Point Road, Madison, WI 53717	·
Penalty for materially false applicati information on this application may	ion information: Any person who knowingly provides ma be required to forfeit not more than \$1,000.	terially false
Signature of corporate Sticer/member	Exec. VP Date	
To be comple	ted by appointed Liquor/Beer Agent	
I, Robert Gambino	appointed liquor/beer agent for Bonefish Grill, LLC	_ (Corp/LLC),
being first duly sworn, affirm that I	have full authority and control of the premise described	
in this license, and I am involved in	the actual conduct of the business as an employee, or h	ave a direct
financial interest in the business of	the licensee. The percent of the business I own is0	%.
$\overline{\mathbb{X}}$ I have included a copy of my pho	oto ID and Beverage Server Training certificate/Operator	's license.
	ion information: Any person who knowingly provides ma be required to forfeit not more than \$1,000.	terially false
Signature of corporate Agent Rob	ert Gambino, Date	
REV 09/2018	Form submittee Office U	STORY OF PROPERTY OF STREET
	DECE	

JUN 0 7 2019

MADISON CITY CLERK