

Class

Class A: N Beer, V Liquor. Cider

☐ Class C Wine

Liquor/Beer License Application

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

licensing@cityofmadison.com 608-266-4601

(Agenda Item Numl	per)
84125	
(Legistar file numbe	
LICLIA-2024-	00517
(License number)	
9	128
(Alder District #)	(Police Sector)

Sec	tion A – Applicant
1.	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.
	Ultimate Mart, LLC
2.	Trade Name (doing business as) <u>Metro Market #179</u>
3.	Address to be licensed 261 Junction Road, Madison, WI 53717
4.	Mailing address Kroger Business License, PO Box 305103, Nashville, TN 37203
5.	Anticipated opening date
6.	Is the applicant an employee or agent of, or acting of behalf of anyone except the applicant named in question 1?
	□ No ☑ Yes (explain)
	Ann Fedder - Vice president
7.	Does another alcohol beverage licensee or wholesale permitee have interest in this business? $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$

Section B—Premises

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 receipts. Alcohol beverages may be sold and stored only on the premises as approved by Common Council and described on license.

Liquor Sales Area 51,070 Sq. Fret Single Story retail Store
Seperate Storage area in back corner of Liquer dept.
With exterior parking Stalls designated for the
Merchan dise Pickup Service

9.	Applicants for on-premises	consumption only. E	stimated capacity (pa	trons and employees):
	Indoor:	Outdoor:		NIA
10.	. Describe existing parking ar	nd how parking lot i	s to be monitored.	
11.	. Was this premises licensed	for the sale of liquo	r or beer during the p	ast license year?
	☐ No ☐ Yes, license iss	ued to <u>Metro Mark</u>	et #179	(name of licensee)
This	ection C—Corporate Infor is section applies to corporation ly. Sole proprietorships and page	ns, nonprofit organ		Liability Companies
12.	. Name of liquor license agen	t Bryan Roth		
13.	. City, state in which agent re	esides <u>Crosspla</u>	ins, WI	
14.	. How long has the agent con	tinuously resided in	the State of Wiscons	in? <u>55</u>
15.	. Has the liquor license agent	completed the resp	onsible beverage ser	ver training course?
	☐ No, but will complete pr	ior to ALRC meeting	Yes, date comp	oleted
16.	. State and date of registration WT 121171201	•	· - ·	or LLC.
17.	. In the table below list the d Attach background chec	irectors of your cor	ooration or the memb	ers of your LLC.
	Title Name		ty and State of Reside	ence
	See Attached			
18.	Registered agent for your or notice or demand required or necessarily the same as you	or permitted by law		
19.	. Is applicant a subsidiary of			
	No D Yes (explain) _		· · · · · · · · · · · · · · · · · · ·	1947-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1
20.	Does the corporation, any of member, or any manager h in Wisconsin?			
	No 🗆 Yes (explain) _			

	tion D—Bus What type of □ Tavern	establishmeı		olated? urant 🗖 Liqu	uor Store	∄ Grocery S	tore
	☐ Convenie	nce Store wit	hout gas pur	mps 🛭 Conv	enience Store	e with gas pu	ımps
	☐ Other				****		
22.		ikely to give		membership perimination in re			
23.	Hours of ope	ration: please	e enter openi	ing and closing	times in the	table below.	
	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
	Class B on			GA 1118 when food ser			
	-	-	-		-	-	-
This	tion E—Cor section appli sumption off	es to Class B	and Class C	applicants only	r. Class A licei	nse applicant	ts:
24.	Indicate any	other produc	t/service offe	ered.	***************************************		
25.	and alcohol l classified as	peverage sale "Food.") New	es broken dov establishme	cohol must subs wn by percenta ents estimate po Food	ge. (Note: No ercentages:		
	If applicable,	, describe "Ot	ther":	THE TRANSPORT OF THE TR			
				ent the percen entation verify	_		
26.	Do you plan	to have live e	entertainmen	it? █ No 🛚	Yes—what k	kind?	
				music (except Entertainment L), a DJ, or a	designated
		l that liquor/b	eer license r	ilings enewal applica y granted. D		April 15 of e	very year,
28.		I that I am re ng. □ No 🌡	•	st an informatio	on session at	least one we	ek before the
29.	_		•	this location to	M '	application a	nd to invite

30.	I agree to contact the Police Department District Captain for this location prior to the ALRC meeting. ☐ No Yes
31.	I agree to contact the Deputy Clerk prior to the ALRC meeting. No Yes
32.	I agree to contact the neighborhood association representative prior to the ALRC meeting. $\hfill\square$ No \hfill Yes
33.	I intend to operate under the alcohol license within 180 days of the Common Council granting this license. The license shall be considered surrendered if not issued within 180 days of being granted. No Yes
34.	I understand we must file a Special Occupational Tax return (TTB form 5630.5) before beginning business. [phone 1-800-937-8864] □ No ☑ Yes
35.	I understand a Wisconsin Seller's Permit must be applied for and issued in the same name as that shown in question 1, above. [phone 608-266-2776] No Yes
36.	Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? No $\ \square$ Yes
Sec	ction G—Information for Clerk's Office
37.	This application is for the license period ending June 30, 20 <u>24</u> .
38.	State Seller's Permit 4 5 6 - 1 0 2 8 5 0 7 9 9 3 - 0 4
39.	Federal Employer Identification Number 472620246
40.	Who may we contact between 8 a.m. and 4:30 p.m. regarding this license?
	Contact person Shannon Petz
	Business phone 615-223-7759 Business e-mail address _business.license@kroger.com
	Preferred language English
	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.
41.	Corporate attorney, if applicable: Name
	Phone E-mail

	ms:	e is closed on the third completed application
☐ Member background investigation form	ness Tax Registration Certificate), \square Appointment ons, \square Articles of Incorporation (if Corp/LLC), \square Flood Sample Menu (if applying for Class B license)	
If required items are missing, the application of the control of t	on will not be considered complete and will not be ac . No exceptions are made.	cepted by the Clerk's
been truthfully completed to the best of the to law, and that the rights and responsibility	nenalty provided by law, the applicant states that the le knowledge of the signer. Signer agrees to operate a ties conferred by the license(s), if granted, will not be remises during inspection will be deemed a refusal to is for revocation of this license.	the business according eassigned to another.
Penalty for materially false application info on this application may be required to forfe	MOUS P 6/13/202	ally false information
(Officer of Corporation/Member of LLC/Partner/		
(Officer of Corporation/Member of LLC/Partner/ Clerk's Office checklist for complete		
Clerk's Office checklist for complete ☐ WI Seller's Permit Certificate (matching articles of incorporation) ☐ FEIN	applications □ Background investigation form(s) □ Form for surrender of previous license □ *Articles of Incorporation □ *Appointment of Agent	☐ Floor Plans ☐ Lease ☐ Business Plan ☐ **Sample Menu
Clerk's Office checklist for complete ☐ WI Seller's Permit Certificate (matching articles of incorporation)	applications ☐ Background investigation form(s) ☐ Form for surrender of previous license ☐ *Articles of Incorporation	□ Lease □ Business Plan