



City of Madison Liquor/Beer License Application

On-Premises Consumption: Class B Beer Class B Liquor Class C Wine
 Off-Premises Consumption: Class A Beer Class A Liquor Class A Cider

Section A – Applicant

1. If needed, a qualified interpreter can be provided at no charge to you. Would you like an interpreter? P 504
A 12
- 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.

2. This application is for the license period ending June 30, 20 17.
3. 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.
WILLIAMSON STREET GROCERY CO-OP
4. Trade Name (doing business as) WILLY STREET CO-OP
5. Address to be licensed 2817 N. SHERMAN AVE, MADISON, WI 53704
6. Mailing address 1457 E. WASHINGTON AVE, MADISON, WI 53703
7. Anticipated opening date AUGUST 1, 2016
8. Is the applicant an employee or agent of, or acting of behalf of anyone except the applicant named in question 2?
 No Yes (explain) _____
9. Does another alcohol beverage licensee or wholesale permittee have interest in this business?
 No Yes (explain) _____

Section B—Premises

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

1) RETAIL STORE FRONT LOCATED IN SHOPPING CENTER AT NORTH POINT & SHERMAN AVE 2) 19,000 SQUARE FOOT GROCERY STORE; LIQUOR DEPT APPROX 1,500 SQ. FT AT RIGHT FRONT OF RETAIL 3) STORAGE - LOCKED/CAGED AREA IN BACK STOCK AREA.

11. Attach a floor plan, no larger than 8 1/2 by 14, showing the space described above.

12. Applicants for on-premises consumption: list estimated capacity 1

13. Describe existing parking and how parking lot is to be monitored.

200 DEDICATED PARKING STALL ADJACENT TO RETAIL STORE FRONT; MONITORING - PHYSICAL INSPECTIONS, CAMERA SURVEILLANCE

14. Was this premises licensed for the sale of liquor or beer during the past license year?

No Yes, license issued to PIERCE'S SUPERMARKET INC (name of licensee)

15. Attach copy of lease.

Section C—Corporate Information

This section applies to corporations, nonprofit organizations, and Limited Liability Companies only. Sole proprietorships and partnerships, skip to Section D.

16. Name of liquor license agent JENNIFER SKOWRONEK

17. City, state in which agent resides MADISON, WI SUN PRAIRIE, WI

18. How long has the agent continuously resided in the State of Wisconsin? 37 YRS

19. Appointment of agent form and background check form are attached.

20. Has the liquor license agent completed the responsible beverage server training course?

No, but will complete prior to ALRC meeting Yes, date completed 6/11/16

21. State and date of registration of corporation, nonprofit organization, or LLC.

22. In the table below list the directors of your corporation or the members of your LLC.

Attach background check forms for each director/member.

	Title	Name	City and State of Residence
1	PRESIDENT	HOLLY FEHRING	MADISON, WI
2	VICE-PRES	DANIEL RAMOS HAAZ	MADISON, WI
3	BOARD MEMBER	COURTNEY BERNER	MADISON, WI
4	BOARD MEMBER	HOLLY BENDER	MADISON, WI
5	BOARD MEMBER	MICHAEL ENGEL	MADISON, WI
6	BOARD MEMBER	DAVID PAULY	MADISON, WI
7	BOARD MEMBER	KATHLEEN KENNITZ	MADISON, WI

BOARD MEMBER MIGUEL ZAMORA MADISON, WI
BOARD MEMBER MICHAEL JOHNSON MADISON, WI

23. Registered agent for your corporation or LLC. This is your agent for service of process, notice or demand required or permitted by law to be served on the corporation. This is not necessarily the same as your liquor agent.

ANYA FIRSZT, GENERAL MANAGER

24. Is applicant a subsidiary of any other corporation or LLC?
 No Yes (explain) _____
25. Does the corporation, any officer, any director, any stockholder, liquor agent, LLC, any member, or any manager hold any interest in any other alcohol beverage license or permit in Wisconsin?
 No Yes (explain) WILLY STREET CO-OP - MIDDLETON, WI

Section D—Business Plan

26. What type of establishment is contemplated?
 Tavern Nightclub Restaurant Liquor Store Grocery Store
 Convenience Store without gas pumps Convenience Store with gas pumps
 Other _____
27. Business description FULL-LINE RETAIL GROCERY OPERATION
SPECIALIZING IN LOCALLY PRODUCED & SOURCED PRO-
DUCT, ORGANIC, BULK, & ALTERNATIVE DIET OFFERINGS
28. Hours of operation MON - SUN 7:30 AM - 9:30 PM
29. Describe your management experience 25 YRS MANAGEMENT AT W&G;
OVERSIGHT OF 2 RETAILS, COMMISSARY, CENTRAL OFFICE;
SELLING \$15 million ANNUALLY IN PRODUCT
30. List names of managers below, along with city and state of residence.
JENNIFER SKOWRONEK, SUN PRAIRIE, WI STACY IRUK, MADISON, WI
ZELDA JEWELL, MADISON, WI BRANDY SCHROEDER, MADISON, WI
31. Describe staffing levels and staff duties at the proposed establishment APPROX 50 TOTAL
STAFF; 15-20 pm SHIFT; DUTIES INCLUDE STOCKING, ORDERING,
CASHIERING, RECEIVING, & CUSTOMER SERVICE
32. Describe your employee training OPERATIONAL OVERVIEW FOR ALL STAFF;
SAFETY PROCEDURES, RETAIL THEFT, ETC.

33. Utilizing your market research, describe your target market.

RETAIN former PIERCE'S CLIENTEL, ATTRACT NEW CUSTOMERS of all income levels; provide WSC owners-buss with ADDITIONAL SITE/RETAIL OPTIONS

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

NEWSLETTER DISTRIBUTED to MEMBERSHIP; LOCAL SPONSORSHIPS, LOCAL PUBLICATIONS, SOCIAL MEDIA, RADIO

35. Are you operating under a lease or franchise agreement? No Yes

36. 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?

No Yes

Section E—Consumption on Premises

This section applies to Class B and Class C applicants only. Class A license applicants (consumption off premises) may skip to Section F.

37. Do you plan to have live entertainment? No Yes—what kind? _____

38. What age range do you hope to attract to your establishment? _____

39. What type of food will you be serving, if any? _____
 Breakfast Brunch Lunch Dinner

40. Submit a sample menu if applicable. What will be included on your operational menu?
 Appetizers Salads Soups Sandwiches Entrees Desserts
 Pizza Full Dinners

41. During what hours of operation do you plan to serve food? _____

42. What hours, if any, will food service not be available? _____

43. Indicate any other product/service offered. _____

44. Will your establishment have a kitchen manager? No Yes

45. Will you have a kitchen support staff? No Yes

46. How many wait staff do you anticipate will be employed at your establishment? _____

During what hours do you anticipate they will be on duty? _____

47. Do you plan to have hosts or hostesses seating customers? No Yes

48. Do your plans call for a full-service bar? No Yes
 If yes, how many barstools do you anticipate having at your bar? _____
 How many bartenders do you anticipate having work at one time on a busy night? _____
49. Will there be a kitchen facility separate from the bar? No Yes
50. Will there be a separate and specific area for eating only?
 No Yes, capacity of that area _____
51. What type of cooking equipment will you have?
 Stove Oven Fryers Grill Microwave
52. Will you have a walk-in cooler and/or freezer dedicated solely to the storage of food products?
 No Yes
53. What percentage of payroll do you anticipate devoting to food operation salaries? _____
54. If your business plan includes an advertising budget:
 What percentage of your advertising budget do you anticipate will be related to food? _____
 What percentage of your advertising budget do you anticipate will be drink related? _____
55. Are you currently, or do you plan to become, a member of the Madison—Dane County Tavern League or the Tavern League of Wisconsin? No Yes
56. Are you currently, or do you plan to become, a member of the Wisconsin Restaurant Association or the National Restaurant Association? No Yes
57. All restaurants and taverns serving alcohol must substantiate their gross receipts for food and alcohol beverage sales broken down by percentage. New establishments estimate percentages:
 _____ % Alcohol _____ % Food _____ % Other
58. Do you have written records to document the percentages shown? No Yes
 You may be required to submit documentation verifying the percentages you've indicated.

Section F—Required Contacts and Filings

59. I understand that liquor/beer license renewal applications are due April 15 of every year, regardless of when license was initially granted. No Yes
60. I understand that I am required to host an information session at least one week before the ALRC meeting. No Yes
61. I agree to contact the Alderperson for this location to discuss my application and to invite the Alderperson to my information session. No Yes
62. I agree to contact the Police Department District Captain for this location prior to the ALRC meeting. No Yes
63. I agree to contact the Alcohol Policy Coordinator prior to the ALRC meeting. No Yes
64. I agree to contact the neighborhood association representative prior to the ALRC meeting.
 No Yes



PLAN EXAMINATION LETTER

PROJECT #: **BLDNCC-2016-06505**

Building Inspection Division
215 Martin Luther King, Jr. Blvd.
Madison, Wisconsin 53703
608 266-4551 Fax 608 266-6522

Date: June 13, 2016

MATT ARO
ARO EBERLE ARCHITECTS
116 KING ST #202
MADISON WI 53716

RE: Occupancy: Mercantile Group M
Tenant: Willy Street Co-op
Owner: Sherman Plaza Inc.
Supervising Professional: Matthew Aro
Square Feet: 5,140

Project Location 2817 N. SHERMAN AVENUE

These plans have been reviewed for compliance with the important code requirements in Chapters SPS 361 through 366 of the Wisconsin Administrative Code.

The **INTERIOR BUILDING ALTERATION** plans are **CONDITIONALLY APPROVED**.

The plans have been reviewed for compliance with the code requirements set forth in Chapters SPS 361-366 of the rules of the Department of Safety and Professional Services. Construction may proceed subject to local regulations, but all items that are required to be changed by this letter must be corrected before commencing that part of the work. This plan has not been reviewed for compliance with Chapters SPS 382-386, the plumbing rules of the Department of Safety and Professional Services. You are hereby advised that the owner as defined in Chapter 101.01(2)(e) of Wisconsin State Statutes is responsible for all code requirements not specifically cited herein. The building will be inspected during and after construction.

SPS 361.33 Evidence of Approval. The architect, professional engineer, designer, builder or owner shall keep, at the building, one set of plans bearing the stamp of approval.

THIS BUILDING HAS BEEN CLASSIFIED AS TYPE **IIIB** CONSTRUCTION. Sprinklered
This is a level 2 alteration.

Inspector(s): **Asaph Lehman** Phone: (608)266-4553

Reviewed By: **Alan Harper, Plan Examiner** Phone: (608)266-4558
aharper@cityofmadison.com

Supervisor: **Harry Sulzer**

No.	Description	Date

FLOOR PLAN GENERAL NOTES:

1. SITE DATUM OF XXX.8' FLOOR EL. 106' ON ARCHITECTURAL & STRUCTURAL DWGS
2. REFER TO SHEET A001 FOR NEW PARTITION TYPES
3. VERIFY ALL DIMENSIONS AND CONDITIONS AT JOB SITE. PORTIONS OF EXISTING CONSTRUCTION MAY HAVE BEEN REMOVED BY OWNER/OWNER.
4. DIMENSIONS ON FLOOR PLAN ARE BASED ON FACE OF FINISH WALL TO FACE OF FINISHED WALL (MINORAL)
5. WHERE EXISTING FINISHES HAVE BEEN DESTROYED BY DEMOLITION OR NEW CONSTRUCTION, PATCH TO MATCH EXISTING FINISHES AT EDGE OF PATCH.
6. DIMENSIONS ON FLOOR PLAN ARE FOR THE FINISH HEIGHT OF NEWLY RELOCATED TOILET FROM ACCESSIBLE.
7. SEE SHEET A001 FOR THE COORDINATION OF DEMOLITION SCOPE.
8. REFER TO MECHANICAL, ELECTRICAL, AND PLUMBING DRAWINGS FOR ADDITIONAL ITEMS AND NOTES. COORDINATE WITH MECHANICAL, ELECTRICAL, AND PLUMBING CONTRACTORS FOR THE LOCATION OF THE PROJECT.
9. TEMPOURARY SCHEDULING IS THE RESPONSIBILITY OF THE ELECTRICAL CONTRACTOR FOR THE DURATION OF THE PROJECT.
10. REFER TO MECHANICAL, ELECTRICAL, AND PLUMBING DRAWINGS FOR ADDITIONAL ITEMS AND NOTES. COORDINATE WITH MECHANICAL, ELECTRICAL, AND PLUMBING CONTRACTORS FOR THE LOCATION OF THE PROJECT.
11. ANY DEMOLITION OR REMOVAL OF EXISTING EQUIPMENT MUST BE COORDINATED IN ADVANCE WITH THE CONTRACTOR.
12. CONTRACTOR SHALL VERIFY ALL EXISTING CONDITIONS AND CONDITIONS OF WORK BEFORE ANY DEMOLITION OR REMOVAL OF EXISTING EQUIPMENT.

FLOOR PLAN KEYED NOTES:

1. PARTIAL HEIGHT WALLS WITH BUILT-IN WORK COUNTER/DESK AND STORAGE
2. FULL HEIGHT SLIDING DOORS WITH SLASH DOOR HANDWAHE
3. FULL HEIGHT WALL UP TO 10' DECK
4. WOOD FINISH SCREEN
5. NEW CUSTOM MILLWORK DISPLAY
6. NEW WALL MOUNT STANDING HEIGHT WORKTOP
7. CFC LACINATION (NO. BASES OF DESIGN, MANUFACTURED BY SITE.)
8. ADD NEW VERTICAL GRASS SASH, SEE ELEVATION 1 A001 FOR DETAILS
9. NEW METAL SERVICE COUNTER AT WALL HEIGHT OF SF A F.P.
10. ALUMN FACE OF NEW WALL WITH EXISTING WALL
11. REMOVE EXISTING DOOR, SAND AND REFINISH WITH CLEAR COAT.
12. REINSTALL PER PLAN
13. NEW EXIST DOOR - COORDINATE WITH OWNER

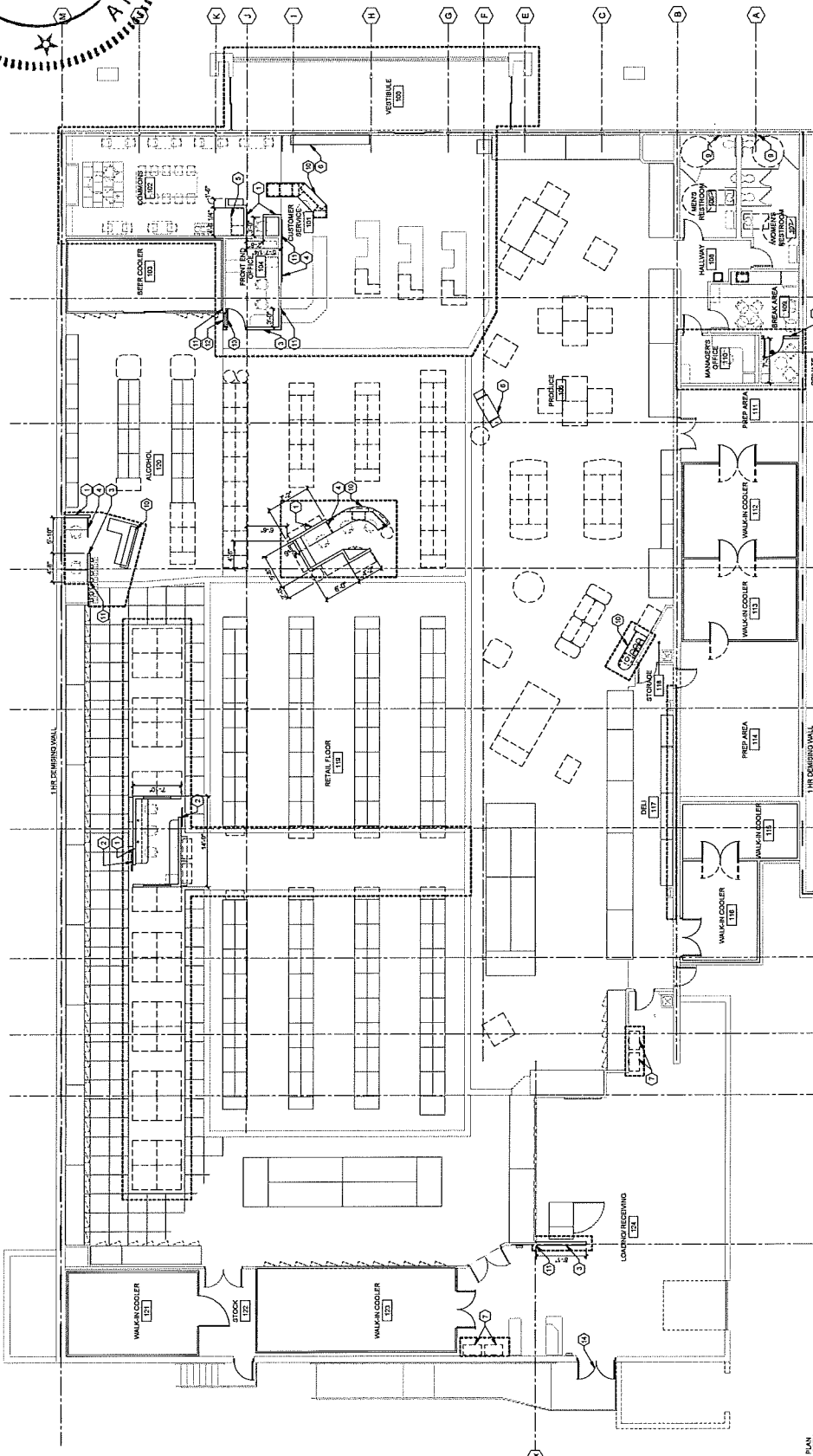
PLAN SYMBOL LEGEND

1 HR RATED WALL
 2 HR RATED WALL
 3 HOUR RATED WALL
 4 HOUR RATED WALL
 BUILDING SECTION SYMBOL
 SECTION DETAIL SYMBOL
 EXTERIOR ELEVATION CALLOUT
 INTERIOR ELEVATION CALLOUT
 PARTITION CALLOUT, SEE A001

NEW DOOR WITH DOOR IDENTIFICATION
 EXISTING ITEM TO REMAIN
 NEW ITEM TO BE INSTALLED
 KEY NOTE REFERENCE #11
 OUTLINE OF WORK AREA

ABBREVIATIONS

A.S. - AMERICAN WITH DISABILITIES ACT
 A.C. - AUTO OPERATOR
 C.F.C. - CONTRACTOR FURNISHED CONTRACTOR INSTALLED
 C.F. - CONTRACTOR FURNISHED CONTRACTOR INSTALLED
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1" = 8'-0"

FIRST FLOOR PLAN



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