

APPLICATION FOR TRANSFER OF LICENSES FOR SALE OF FERMENTED MALT BEVERAGES
AND/OR INTOXICATING LIQUOR FROM ONE PREMISES TO ANOTHER

MADISON, Wisconsin
5-11, 2007

To the governing body of the (City) (~~Village~~) (Town) of MADISON, WI
County of DANE Wisconsin.

The undersigned hereby applies for a transfer of Class B license from 201 STATE ST
(present location) to 420 GAMMAN PLACE
(proposed location)
on or about JUNE 30 - 07
(date)

1. APPLICANT: (print name and address plainly)

- (a) Full name of applicant CHARLES M. MYERS
- (b) Address 801 DEMING WAY - MADISON, WI, 53719

2. LOCATION AND DESCRIPTION OF PREMISES TO WHICH APPLICATION FOR TRANSFER IS MADE:
Describe building or buildings where alcohol beverages are to be sold, served and stored.

- (a) Street number 420 GAMMAN PLACE
- (b) Trade name of establishment Culinary Concepts
- (c) Physical description of building, buildings and/or land area comprising licensed premises.
Peppercorn Grill - Culinary Concepts

(d) Legal description (omit if street address is given above.) _____

(e) Is any other business conducted on same premises? Yes No If so, what?
Peppercorn Grill Local Pub

(f) Was this location licensed for beer or liquor during the past year? Yes No

(g) Give name and address of previous licensee. WEST TOWN PING, LLC

(h) Will the previous licensee surrender its license? Yes No

City of Madison Liquor/Beer Original Supplemental Form

Office Use Only

- | | |
|--|---|
| <input type="checkbox"/> Seller's Permit Number | <input type="checkbox"/> Lease |
| <input type="checkbox"/> Federal Employer Identification Number | <input type="checkbox"/> Notarized Transfer of Ownership Letter |
| <input type="checkbox"/> Notarized Original Application Form (AT-106) | <input type="checkbox"/> *Schedule of Appointment of Agent (AT-104) |
| <input type="checkbox"/> Notarized Supplemental Form | <input type="checkbox"/> *Notarized Agent Appointment/Acceptance Form |
| <input type="checkbox"/> Description of Licensed Premise | <input type="checkbox"/> *Articles of Incorporation/ Organization |
| <input type="checkbox"/> Notarized Auxiliary Questionnaire(s) (AT-103) | <input type="checkbox"/> Sample Menu, if possible |
| <input type="checkbox"/> Background Investigation Form(s) | <input type="checkbox"/> Business Plan, if one exists |
| <input type="checkbox"/> Floor Plans | * Forms required of Corporation/LLC only |

- ✓ All applicants must provide an adequate premise plan that includes exterior and interior dimensions, position of stairs and all entrances and exits, normal and customary use of each room, placement of major appliances, furniture and large gaming tables, placement and dimensions of all bar(s), and graphic representation of the normal position of booths, bar stools, tables and chairs. **Premise plans must be no larger than 8 ½ x 14.**
- ✓ New structures must submit to Building Inspection two sets of plans, signed and sealed by a registered architect or engineer.
- ✓ **Applicant/partners/Liquor Agent must be enrolled in or have completed the Beverage Server Training course before appearing before the Alcohol License Review Committee.**

Prior to your hearing before the Alcohol License Review Committee (ALRC), you must contact the Alderperson of the District in which you intend to do business, the representative of the appropriate neighborhood association (if any), the Madison Police Department, and the Alcohol Policy Coordinator.

- Alderperson _____ can be reached at _____ at the Common Council Office (266-4071), or via e-mail at council@cityofmadison.com.
- The name of the neighborhood association representative can be obtained by calling the Planning and Development Department at 266-4635 or online at www.ci.madison.wi.us/neighborhoods/contacts.htm.
- Police Department Central District Captain Mary Schauf (Sector 400) can be reached at 266-4316.
- Police Department East District Captain Jill Klubertanz (Sector 600) can be reached at 267-2100.
- Police Department North District Captain Richard Bach (Sector 500) can be reached at 245-3652.
- Police Department West District Captain Jay Lengfeld (Sectors 100-200) can be reached at 288-6152.
- Police Department South District Captain James Wheeler (Sector 300) can be reached at 267-8687.
- Alcohol Policy Coordinator Joel Plant can be reached at 264-9295.

1. 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

2. Are there any special conditions desired by the neighborhood? Yes No

Explain. _____

3. Name of Applicant/Partner/Corporation/LLC Culinary Concepts

4. Telephone Number: 608 826 5554

5. Address of Licensed Premise 420 Gamma Place

6. Anticipated opening date: Immediately

7. Mailing address if not opening immediately 801 Deming Way - MADISON 53719

8. What type of establishment is contemplated? Tavern Nightclub Restaurant
 Liquor Store Grocery Store Convenience Store - Gas Pumps Yes No
 Other Please explain CATERING CO

9. Business Description including hours of operation and if entertainment is part of your venue, what type:
11Am - 11Pm

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.**

CATERING DIV. - CULINARY CONCEPTS

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 WE CARE TO
BUSINESS - RESIDENT

13. Describe your management experience, staffing levels, duties and employee training.
30+ years of Food & Beverage / CATERING EXP

14. Identify the **registered agent** for your Corporation or LLC. This is not necessarily the same person as your liquor/beer agent. This is your corporation's agent for service of process, notice or demand required or permitted by law to be served on the corporation. CHARLES M MYERS

801 DEMING WAY MADISON WI 53719
Address City State Zip

15. Excluding pre-packaged snacks, how late will food be served? 11PM

16. What type of food will you be serving, if any? ALL TYPES - PLATED / APP / STZ

17. Indicate any other product/service offered: ←

18. Describe your target market. BUSINESS - RESIDENT PARTY

19. What is your estimated capacity? _____

20. Are you operating under a lease or franchise agreement? Yes No (If yes, attach a copy.)

21. Owner of building where establishment is located: PARKTOWNE
Address of Owner: 460 Gamma Place Phone Number _____

22. Individual or Partnership: Have individual/partners completed the Beverage Server Training Course? Yes No If Yes, indicate names: LLC

License cannot be issued until proof of Beverage Server Training completion is shown.

23. Corporation/LLC: Will liquor/beer agent be a Wisconsin resident at the time of granting? Yes No

24. Corporation/LLC: Agent must disclose interest held in business: 100 %

25. Corporation/LLC: Has agent completed the Beverage Server Training Course? Yes No

License cannot be issued until proof of Beverage Server Training completion is shown.

26. Corporation/LLC: List Directors, Stockholders, and Managers below.

Director(s) Name	Home Address
<u>CHARLES M. MYERS</u>	<u>4606 SIGNATURE DR MISOLATA</u>

Stockholder's Name	Address	Extent of Ownership%
<u>CHARLES M. MYER</u>	<u>801 DEMING WAY</u>	<u>100</u>

Manager's Name	Address	Business Phone	Home Phone
<u>ARON ROZNEWSKI</u>	<u>420 GAMMA PLACE</u>	<u>826 5554</u>	<u>-</u>

27. 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

28. 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.**

Calendar/fiscal year: January 1 – December 31 July 1 – June 30

Percent Gross Receipts from Alcohol Beverages	30	%
Percent Gross Receipts from Food	70	%
Percent Gross Receipts from Other		%
Total Gross Receipts	100	%

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.

29. What type of establishment are you? (Check all that apply) Tavern Restaurant Nightclub

Other Please explain: CATERING

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

31. Will your establishment be a member of the Wisconsin Restaurant Association? Yes No

32. How many wait staff will be employed at the establishment? 30+

33. What hours, if any, will food service not be available? Midnite - 8 Am

34. Describe how you plan to advertise/promote your business. What products will you be advertising?
PHONE BOOK - WEBSITE - Newspaper

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 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 must sign; corporate officer(s), members/managers of Limited Liability Companies must sign) 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 11 day of May, 2007

Margaret M. Stueckel
(Clerk/Notary Public)

My commission expires 4/4/2011

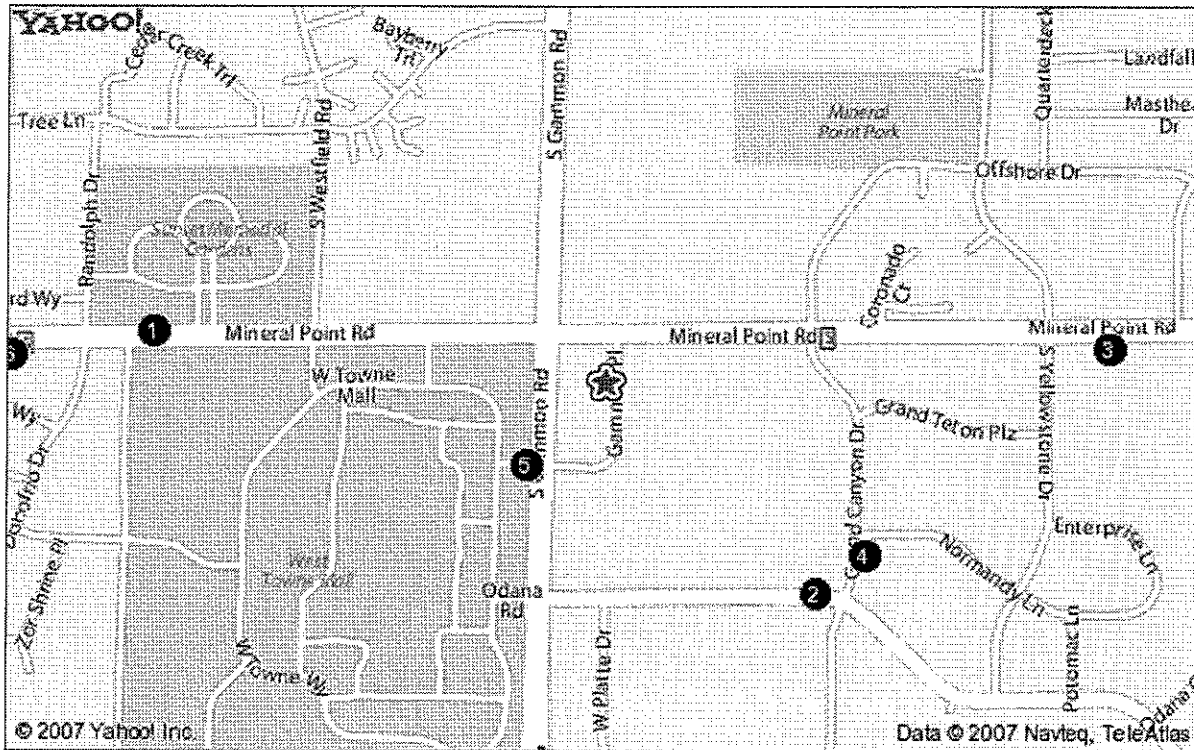
[Signature]
(Officer of Corporation/Member/Manager of LLC/Partner/Individual)

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If you have any questions, please contact the City Clerk's Office at (608) 266-4601.

Yahoo! Maps - 420 GAMMON PL, Madison, WI 53719, US



Your Points of Interest

- 1 Old Town **Pub** (608) 276-8589 ★★☆☆☆
724 S Gammon Rd Madison, WI 53719
- 2 Martin O'Grady Irish **Pub** (608) 833-4262 ★★★★★
7436 Mineral Point Rd Madison, WI 53717
- 3 Challenger's **Pub** (608) 827-6070
6722 Odana Rd Madison, WI 53719
- 4 Otto's **Bar** and Restaurant (608) 274-4044 ★★★★★
6405 Mineral Point Rd Madison, WI 53705
- 5 Coaches (608) 833-4485
439 Grand Canyon Dr Madison, WI 53719
- 6 Smokey Bones BBQ & Grill (608) 833-2736 ★★★★★
418 S Gammon Rd Madison, WI 53719
- 7 Madison Catering (608) 277-7767
6530 Schroeder Rd Madison, WI 53711
- 8 The Stool Store, Incorporated (608) 271-4088
6706 Watts Rd Madison, WI 53719
- 9 Pizzeria Uno's Chicago **Bar** & Grill (608) 833-7200 ★★★★★
7601 Mineral Point Rd Madison, WI 53717