

The state of the s	On-Premises Consumption: Class B Beer Class B Liquor Class C Wine
	dison Off-Premises Consumption: ☐ Class A Beer ☐ Class A Liquor ☐ Class A Cider
Se (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 mage 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, 2016.
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.
	TIP TOP CABARET LLC
4.	Trade Name (doing business as) TIP TOP CABARET
5.	Address to be licensed 610 NORTH STREET, MADISON, WI 53704
6.	Mailing address P.O. Box 43, MADISON WI 53701
7.	Anticipated opening date 01/01/2016
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 permitee have interest in this business?
	No □ Yes (explain)
Se 0	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. Alcohol will be sold in the main bar area fitted "Existing Bar-Lornce". Alcohol will be stored in the main bar area. The prophish room, walk-in cooler, by Storage, and busement.
	(a) 2:021 sa fb

11.	Attach a floor plan, no larger than 8 ½ by 14, showing the space described above.	
12.	Applicants for on-premises consumption: list estimated capacity99	
13. 14.	Describe existing parking and how parking lot is to be monitored. Existing parking Lot has 3 stalls (1 handicop) 2 Stand Parking lot will be supervised by front-down staff. Was this premises licensed for the sale of liquor or beer during the past license year?	<u>[avd]</u>
15.	□ No De Yes, license issued to Wieg Social Club (name of license copy of lease. N/A	ensee)
Sec This	tion C—Corporate Information section applies to corporations, nonprofit organizations, and Limited Liability Companies of proprietorships and partnerships, skip to Section D.	only.
16.	Name of liquor license agent BENJAMIN CACTSCHUL	
17.	City, state in which agent resides MADISON WI	
18.	How long has the agent continuously resided in the State of Wisconsin?	<u>\$</u>
19.	☐ Appointment of agent form and background check form are attached.	
20.	Has the liquor license agent completed the responsible beverage server training yourse?	
	\square No, but will complete prior to ALRC meeting \square Yes, date completed $3/35/3$	013
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	
	MEMBER BENJAMINI CALTSCHUL MADISON WI	
23.	Registered agent for your corporation or LLC. This is your agent for service of process, n demand required or permitted by law to be served on the corporation. This is not necessarian as your liquor agent. BEN TAMING CALTSCHULE	

X

	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) TIPTOPTAPINC DBA TIPTOP TAVERN
- Janes		tion D—Business Plan 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 Mighborhood endertainment venue featuring food, alcohol live performances, and a variety of artistic and cultural events.
	28.	Hours of operation 4pm - 2 Am Muwsday: 4am - 2:30am HI Sat.
	29.	Hours of operation $\frac{1}{2}$ $\frac{1}{2$
		General My & Owner/operator of Top Top Towern
	30.	List names of managers below, along with city and state of residence.
	,	Benjamin C. Altschul Madison WI Affred Rasho Madison W Patricia Cross, Staglison WI
	0.4	Describe staffing levels and staff duties at the proposed establishment Describe staffing levels and staff duties at the proposed establishment.
	31.	
		Golf Kitchen Staff: Back bar/Dish washer; Burtender, wait Staff, Floor manager, performance Yech, administrator.
	32.	and the description and a
		Fraining, one-on-one pot training

33.	Utilizing your market research, describe your target market.
5	Purrounding neighbor hoor, and the greater Madison
	av fistic community
34.	Describe how you plan to advertise and promote your business. What products will you be
	advertising? $(1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1$
	Word of mouth, Isthmus, WORT Madison little League etc. We will be advertising entertainment
	heague etc. We will be advertising entertainment
	food & drink
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
Sec	ction E—Consumption on Premises
This	section applies to Class B and Class C applicants only. Class A license applicants (consumption
•	remises) may skip to Section F.
37.	Do you plan to have live entertainment? No Yes—what kind? No Yes—what kind?
	rock bluegrass blues tolk (omedy bance Bras film
38.	What age range do you hope to attract to your establishment? 21 - 99
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 OTHER! Small Plates
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. \mathcal{N}/\mathcal{A}
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? all your hours
47.	Do you plan to have hosts or hostesses seating customers? No No Yes
	\

	48.	Do your plans call for a full-service bar? No X 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?
٠	54.	If your business plan includes an advertising budget: \mathcal{M}/\mathcal{A}
		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?
	56.	Are you currently, or do you plan to become, a member of the Wisconsin Restaurant Association or the National Restaurant Association?
	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:
	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.
		tion F—Required Contacts and Filings 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

Cabaret Sample Menn October 2015

- · Veagan Chili
- · Market Salac
- · Cheese + Meat Plate
- · Lumpia + Dumplings
- " Seasonal Paniai.
- · Mac + Cheese
- · Poasted Seasonal Vegetable w/ ToFu



PLOOR PLAN

1.4* = 1.4* EVSTRIG BUILDING----2021 5.F.