



# 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

- 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.

- This application is for the license period ending June 30, 2018.
- 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.

Bierock, LLC

4. Trade Name (doing business as) Bierock

5. Address to be licensed 2911 N. Sherman Ave., Madison, WI 53704

6. Mailing address 2442 Superior St., Madison, WI 53704

7. Anticipated opening date April 15, 2018

8. Is the applicant an employee or agent of, or acting of behalf of anyone except the applicant named in question 3?

- No  Yes (explain) \_\_\_\_\_

9. Does another alcohol beverage licensee or wholesale permittee have interest in this business?

- No  Yes (explain) \_\_\_\_\_

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

Alcohol sales and storage will be limited to the space at 2911 N. Sherman Ave. and its adjoining outdoor patio.

Approx 2173 Sq ft

added by Clerk at time of turn in 1-5-18 JH dk

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 capacity 99

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

The Northside TownCenter has an existing parking lot and is monitored by the landlord.

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

No  Yes, license issued to \_\_\_\_\_ (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 Brian Carriveau

17. City, state in which agent resides Madison, WI

18. How long has the agent continuously resided in the State of Wisconsin? 38 years

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 12/14/2016

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

10/12/2017

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
Co-owner	Brian Carriveau	Madison, WI
Co-owner	Amanda Carriveau	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.

Legal Zoom

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) \_\_\_\_\_

**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 Bierock is a craft beer bar, serving a limited menu revolving around the "bierock," a regional/ethnic food. The tavern will be located at 2911 N. Sherman Ave. in Madison, Wisconsin, part of the Northside TownCenter.  
 \_\_\_\_\_  
 \_\_\_\_\_
28. Hours of operation Closed Mon. Tue & Wed 2-10p. Thur 2p-12a. Fri 2p-close. Sat 10a-close. Sun 10a-10p.
29. Describe your management experience Amanda Carriveau had supervisory experience overseeing several employees for her current employer. Additionally, Bierock has contracted the help of Sustainable Kitchens to provide management consultation.  
 \_\_\_\_\_  
 \_\_\_\_\_
30. List names of managers below, along with city and state of residence.  
Amanda Carriveau (Madison, WI)  
 \_\_\_\_\_  
Brian Carriveau (Madison, WI)  
 \_\_\_\_\_
31. Describe staffing levels and staff duties at the proposed establishment Bierock will employ 5 FTE.  
Those numbers will include 1 kitchen manager, 1 prep cook and 1 porter in the back of house plus 2 servers in the front of house, not including the two managers listed above.  
 \_\_\_\_\_  
 \_\_\_\_\_
32. Describe your employee training Bierock has contracted Sustainable Kitchens to provide employee training.  
But employees will also follow guidelines and checklists on how to open, close and operate during service hours.  
 \_\_\_\_\_  
 \_\_\_\_\_

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

The target customer for Bierock falls in the 25-45 age range that is college educated. The college educated demographic, which goes hand in hand with disposable income, is a defining characteristic in a market like Madison, home to the University of Wisconsin.

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

While we haven't ruled out traditional advertising, the bulk of our advertising will go to social media like Facebook, Twitter and Instagram. We also plan to sponsor Madison's Craft Beer Week through the Isthmus and sponsor local sports club teams as well.

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? \_\_\_\_\_

We plan on having occasional live music, but nothing requiring a ticketed event.

38. What age range do you hope to attract to your establishment? 25-45

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? From open until 10:00 p.m.

42. What hours, if any, will food service not be available? Ending at 10:00 p.m.

43. Indicate any other product/service offered. None

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? 2

During what hours do you anticipate they will be on duty? Open to Close

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? 16  
 How many bartenders do you anticipate having work at one time on a busy night? 2 plus manager
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? 35%
54. If your business plan includes an advertising budget:  
 What percentage of your advertising budget do you anticipate will be related to food? 70%  
 What percentage of your advertising budget do you anticipate will be drink related? 30%
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  Unsure
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:  
49 % Alcohol 51 % 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 Deputy Clerk prior to the ALRC meeting.  No  Yes
64. I agree to contact the neighborhood association representative prior to the ALRC meeting.  
 No  Yes
65. I intend to operate under the alcohol license within 90 days of the Common Council granting this license. The license shall be considered surrendered if not issued within 90 days of being granted.  No  Yes

66. I understand we must file a Special Occupational Tax return (TTB form 5630.5) before beginning business. [phone 1-800-937-8864]  No  Yes
67. I understand a Wisconsin Seller's Permit must be applied for and issued in the same name as that shown in section 2, above. [phone 608-266-2776]  No  Yes
68. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor?  
 No  Yes

**Section G—Information for Clerk's Office**

69. State Seller's Permit 4 5 6 - 1 0 2 9 8 3 4 0 7 3 - 0 2

70. Federal Employer Identification Number 82-3110946

71. Who may we contact between 8 a.m. and 4:30 p.m. regarding this license?

Contact person Brian Carriveau

E-mail address brian@bierockmadison.com

Phone 608-334-3471 Preferred language English

72. Corporate attorney, if applicable: Name \_\_\_\_\_

Phone \_\_\_\_\_ E-mail \_\_\_\_\_

**Read carefully before signing in front of a notary:** Under penalty provided by law, the applicant states that the above information has been truthfully completed to the best of the knowledge of the signer. Signer agrees to operate the business according to law, and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. Lack of access to any portion of licensed premises 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 5<sup>th</sup> day of January, 20 18

Jennifer S. Haar  
 (Clerk/Notary Public)

**JENNIFER S. HAAR**  
**NOTARY PUBLIC**  
**STATE OF WISCONSIN**

Brian Carriveau  
 (Officer of Corporation/Member of LLC/Partner/Sole Proprietor)

My commission expires 2-2-2019

Clerk's Office checklist for complete applications		
<input type="checkbox"/> Orange sign <input checked="" type="checkbox"/> WI Seller's Permit Certificate (matching articles of incorporation) <input checked="" type="checkbox"/> FEIN <input checked="" type="checkbox"/> Notarized application <input checked="" type="checkbox"/> Written description of premises	<input checked="" type="checkbox"/> Background investigation form(s) <input type="checkbox"/> Form for surrender of previous license <input checked="" type="checkbox"/> *Articles of Incorporation <input checked="" type="checkbox"/> *Notarized Appointment of Agent * Corporation/LLC only	<input checked="" type="checkbox"/> Floor Plans <input checked="" type="checkbox"/> Lease <input checked="" type="checkbox"/> Sample Menu <input checked="" type="checkbox"/> Business Plan
Date complete application filed with Clerk's Office _____		
Date of ALRC meeting _____ Date license granted by Common Council _____		
Date provisional issued _____ Date license issued _____ License number _____		