ORIGINAL ALCOHOL BEVERAGE LICENSE APPLICATION Applicant's Wisconsin Seller's Permit Number: 456 102 715 49 8003 Submit to municipal clerk. Federal Employer Identification
Number (FEIN): 27 - 50 0 0 0 5

LICENSE REQUESTED For the license period beginning ending FEE Class A beer \$ Town of Class B beer 600 TO THE GOVERNING BODY of the: Village of Wholesale beer Class C wine \$ 00 Class A liquor County of \$ Aldermanic Dist. No. (if required by ordinance) Class B liquor \$ Reserve Class B liquor The named ☐ INDIVIDUAL PARTNERSHIP LIMITED LIABILITY COMPANY CORPORATION/NONPROFIT ORGANIZATION Publication fee \$ TOTAL FEE hereby makes application for the alcohol beverage license(s) checked above. \$ 700 2. Name (individual/partners give last name, first, middle; corporations/limited liability companies give registered name): Public House Johnson LLC An "Auxiliary Questionnaire," Form AT-103, must be completed and attached to this application by each individual applicant, by each member of a partnership, and by each officer, director and agent of a corporation or nonprofit organization, and by each member/manager and agent of a limited liability company. List the name, title, and place of residence of each person. Post Office & Zip Code 1112 E. Grocham Madison, WI 53703 President/Member Vice President/Member \_\_MLM\76\f IIIZ EGISHAM MAdism, WI \$53763 Secretary/Member \_\_\_ 903 Wildrox Springs Dr. St. Charles . 52 Treasurer/Member \_\_\_\_ 903 Wildrese Springs Dr. St. Charles . IL member Agent > Directors/Managers Johnson Public House Business Phone Number 630 - 240 - 7581 3. Trade Name 908 E. Johnson St. Madison, WI Post Office & Zip Code 4. Address of Premises ▶\_ Is individual, partners or agent of corporation/limited liability company subject to completion of the responsible beverage server training course for this license period?..... (c) Does the corporation, or any officer, director, stockholder or agent or limited liability company, or any member/manager or (NOTE: All applicants explain fully on reverse side of this form every YES answer in sections 5, 6, 7 and 8 above.) 9. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) 10. Legal description (omit if street address is given above): No. (b) If yes, under what name was license issued? 12. Does the applicant understand they must file a Special Occupational Tax return (TTB form 5630.5) before beginning business? [phone 1-800-937-8864]..... 13. Does the applicant 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 14. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor?..... READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered 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 applicant must sign; corporate officer(s), members/managers of Limited Liability Companies must sign.) Any lack of access to any portion of a 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 O (I (Offi ARY PUBLIC My commission expires dditional Partner(s)/Member/Manager of Limited Liability Company if Any) OF WISCO TO BE COMPLETED BY CLERK Date received and filed with municipal clerk Date reported to council/board Signature of Clerk / Deputy Clerk Date license granted Date license issued AT-106 (R. 4-09) State of WI My of Done.

## City of Madison Supplemental Class B License Application

<ul> <li>□ Seller's Permit Number</li> <li>□ Federal Employer Identification #</li> <li>□ Notarized Original Application Form</li> <li>□ Notarized Supplemental Form</li> <li>□ Orange Sign (Clerk's Office provides at time of application)</li> </ul>	<ul> <li>□ Written Description of Premise</li> <li>□ Background Investigation Form(s)</li> <li>□ Notarized Transfer of Ownership</li> <li>□ *Articles of Incorporation</li> <li>□ *Notarized Appointment of Agent</li> <li>* Corporation/LLC only</li> </ul>	☐ Floor Plans ☐ Lease ☐ Sample Menu ☐ Business Plan
Name of Applicant/Partner/Corporation	on/IC Johnson Public House	e, UC
2. Address of Licensed Premise 9		,
	<u>− 干   8</u> 4. Anticipated opening date: _	,
5. Mailing address if not opening immedi	ately 1112 E. Govham St.	Madison, WI 537
6. Have you contacted the Alderperson, P the neighborhood association represent	olice Department District Captain, Alcohotative for the area in which you intend to leave	
7. Are there any special conditions desire	d by the neighborhood? □ Yes ≯No	
Explain.	/	
8. Business Description, including hours of beer & wihe, Free with	of operation: Case serving cof	Lfee, espress, food, and lo pri.
9. Do you plan to have live entertainment		
	g, including overall dimensions, seating arges are to be sold and stored. The license ged without the approval of the Commo	d premise described
The Case is 1100 square	feet with an equally size	d basement, seating
	a raised bar pails infront or	
There will be rooms for a stored along the back wall	(North will) and also in the bar.	Beer wine will be senent
11. Are any living quarters directly or indi	rectly accessible and under control of the and stored only on the licensed premise, not	applicant? □ Yes □\No
12. Describe existing parking and how par	king lot is to be monitored. No parki	ng lot street
parking only.	·	
13. Describe your management experience		
Given has experience in	managing a similar sized (ate.	The existing case
Gwen has experience in will be starfed by more starfed by more 14. Identify the registered agent for your	Corporation or LLC. This is your corporat	tion's agent for service of
process, notice or demand required or p	permitted by law to be served on the corpor	ration.
Name Address	3 Wildrose Springs Dr. 87.	(harles, 16 601-76)

Target west will be the students and filmines living in the Terrey-Lepture performanced.  16. What age range would you hope to attract to your establishment? 21 - (ed)  17. Describe how you plan to advertise/promote your business. What products will you be advertising?  What is march resplaced from the control of the co		Utilizing your market research, who would you project your target market to be?
16. What age range would you hope to attract to your establishment? 21—608  17. Describe how you plan to advertise/promote your business. What products will you be advertising?  Wind of Meath, Priphorhood As as cintian, here paper. Products: Cashee, quelly southed to the south of the south		Target maket will be the students and families living in the Tenney-
17. Describe how you plan to advertise/promote your business. What products will you be advertising?  Wird of Mouth Might Load Reaction have paper. Products: asface, queling land food, where is in the paper. Products: asface, queling land food, where is in the paper. Products: asface, queling land food, where it is located:  18. Are you operating under a lease or franchise agreement? Are (attach a copy) And the paper.  19. Owner of building where establishment is located:  19. Owner of building where establishment are you? (Check all that apply) Tavern Nightclub Arestaurant  10. Other Please Explain.  24. What type of food will you be serving, if any?		Laghani ne ighborhovel.
Wind of Marth Michael Resource Association, Musipages. Products: Castley grain lack food belt for in.  18. Are you operating under a lease or franchise agreement? Ares (attach a copy) Soloo  19. Owner of building where establishment is located: John Wight Address of Owner: Phone Number Phone Number  20. Private organizations (clubs): Do your membership policies contain any requirement of "Invidigus" (likely to give offense) discrimination in regard to race, creed, color, or national origin? Yes Ano  21. List the Directors of your Corporation/LLC  Charles Shalls  Manne Address  Myle Johnson (1)2 E Garham St. Madison wit 53703  Name Address  Petrecia Shalls 9.3 Wildrose Springs Dr. St. Charles, The 6074  Name Address  Petrecia Shalls 9.3 Wildrose Springs Dr. St. Charles, The 6074  Name Address  No of Ownership  Name Address  No of Ownership  Name Address  Name Address  Name Address  No of Ownership  Name Address  N	16.	What age range would you hope to attract to your establishment? $21 - 40$
18. Are you operating under a lease or franchise agreement? We (attach a copy)  19. Owner of building where establishment is located:	17.	Describe how you plan to advertise/promote your business. What products will you be advertising?
19. Owner of building where establishment is located:		
Address of Owner:		.'
Address of Owner:	19. (	Owner of building where establishment is located: John Wright
20. 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?		ress of Owner:Phone Number
Chen Shalls      12 E Gwhan St. Madison vWI 53703   Name   Address      12 E Gwhan St. Madison, wI 53703   Name   Address        12 E Gwhan St. Madison, wI 53703   Name   Address      12 E Gwhan St. Madison, wI 53703   Name   Address      13 Golff   Name   Address      14 Golff   Name   Address      15 Golff   Name   Address      16 Golff   Name   Address      16 Golff   Name   Address      16 Golff   Name   Address      17 Golff   Name   Address      18 Golff   Name   Name   Name   Name   Address      18 Golff   Name	t	o give offense) discrimination in regard to race, creed, color, or national origin?
Name Address  Name Address  Name Address  Name Address  Nof Ownership  Name  Nof Ownership  Nof Ownership  Name  Nof Ownership  Nof O	21.	List the Directors of your Corporation/LLC
Name Address  Name Address  Name Address  Name Address  Nof Ownership  Name  Nof Ownership  Nof Ownership  Name  Nof Ownership  Nof O	<u>1</u>	Jame Address
Name Address  Name Address  Name Address  Name Address  Nof Ownership  Name  Nof Ownership  Nof Ownership  Name  Nof Ownership  Nof O	_	Kyle Johnson 1112 E Govham St. Madison, WI 53703
Name Address  Name Address  Name Address  Name Address  Nof Ownership  Name  Nof Ownership  Nof Ownership  Name  Nof Ownership  Nof O	N	Address  Address  Address
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Name Address  Name Address  Name Address  Name Address  Nof Ownership  Name  Nof Ownership  Nof Ownership  Name  Nof Ownership  Nof O	K	Retrection shalls goz wildrose spritys Dr. St. Charles, IC 60/ 47
Name Address  Name Address  Name Address  Nof Ownership  23. What type of establishment are you? (Check all that apply)   Other Please Explain.  24. What type of food will you be serving, if any?	22.	List the Stockholders of your Corporation/LLC
Name Address  Name Address  Name Address  Nof Ownership  23. What type of establishment are you? (Check all that apply)   Other Please Explain.  24. What type of food will you be serving, if any?		
Name  Address  Manne  Address  Mof Ownership  23. What type of establishment are you? (Check all that apply)   Other Please Explain.  What type of food will you be serving, if any?	N	Fame Address % of Ownership
23. What type of establishment are you? (Check all that apply)   Other Please Explain.  4 What type of food will you be serving, if any?	N	fame Address % of Ownership
☐ Other Please Explain	N	fame Address % of Ownership
☐ Other Please Explain	77 T	What time of establishment are you? (Check all that apply)   Tayern   Nightclub   WRestaurant
24 What type of food will you be serving, if any?	23. V	viait type of establishment are you? (Check all that apply) - Tavell - Trightendo - Dicestation
24 What type of food will you be serving, if any?	Е	Other Please Explain.
Breakfast Dinner		
	P	\(\Delta\) Breakfast \(\Delta\) Lunch \(\Delta\) Dinner
5. Please submit a sample menu with your application, if possible. What might eventually be included on your		
operational menu when you open?   Appetizers Salads Soups Sandwiches Entrees	0	perational menu when you open?  Appetizers Asalads Asoups Sandwiches Antrees
Desserts   Pizza   Full Dinners	•	
6. During what hours of your operation do you plan to serve food? Wours	) )6 T	ouring what hours of your operation do you plan to serve food?

27. What hours, if any, will food service <u>not</u> be available?
28. Indicate any other product/service offered.
29. Will your establishment have a kitchen manager? Yes $\square$ No
30. Will you have a kitchen support staff? □ Yes No
31. How many wait staff do you anticipate will be employed at your establishment? 7 - 8
During what hours do you anticipate they will be on duty?
32. Do you plan to have hosts or hostesses seating customers?   Yes  No
33. Do your plans call for a full-service bar?   Yes
If yes, how many bar stools do you anticipate having at your bar?
How many bartenders do you anticipate you would have working at one time on a busy night?
34. Will there be a kitchen facility separate from the bar? ☐ Yes No
35. Will there be a separate and specific area for eating only? ☐ Yes No
If yes, what will be the seating capacity for that area?
36. What type of cooking equipment will you have? ☐ Stove ☐ Oven ☐ Fryers ☐ Grill ☐ Microwave
37. Will you have a walk-in cooler and/or freezer dedicated solely to the storage of food products?   Yes No
38. What percentage of your overall payroll do you anticipate will be devoted to food operation salaries?  507.
39. 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?
40. 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
11. Are you currently, or do you plan to become, a member of the Wisconsin Restaurant Association or the National Restaurant Association?   No

42.	What is your	estimated	capacity?	40.0
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43. 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.

Gross Receipts from Alcoholic Beverages	25 %	
Gross Receipts from Food and Non-Alcoholic Beverages	<b>75</b> %	
Gross Receipts from Other	· %	
Total Gross Receipts	100%	

44. Do you have written records to document the percentages shown?  $\square$  Yes You may be required to submit documentation verifying the percentages you've indicated.

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 signer. Signer agrees 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. 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:

3-18-2012 My commission expires\_

# Appointment of New Liquor/Beer Agent

To be completed by Corporate Officer or Member of LLC
I, Lyle Johnson, officer/member for Johnson Public House 4C
(Corporation/LLC), doing business as ON Mon Public Hosse, authorize and appoint
Name) as the liquor/beer agent for the premise
located at 908 East Johnson St.
Subscribed and sworn to before me this  Signature of Officer/Member  3 Day of Murch, 2016
1/1/2
Notary Public, Dane County, Wisconsin
My Commission Expires 3-18-2012
To be completed by appointed Liquor/Beer Agent
I, Ky & Johnson appointed liquor/beer agent for
I, Kyle Johnson, appointed liquor/beer agent for  Johnson Public House (name of Corporation or LLC), being first duly sworn
say I have vested in me, by properly authorized and executed written delegation, full authority
and control of the premise described in the license of such corporation or limited liability
company, and I am involved in the actual conduct of the business as an employee, or have a
direct financial interest in the business of the licensee, therein relating to the intoxicating
direct financial interest in the business of the licensee, therein relating to the intoxicating liquor/fermented malt beverage. The interest I have in the business is 25 %.
liquor/fermented malt beverage. The interest I have in the business is 25 %.
Subscribed and sworn to before me this  Signature of Agent

The appointed Liquor/Beer Agent must complete the other side of this form.

## Johnson Public House

Business Plan (short form)

#### Mission Statement

Johnson Public House is a young creative company dedicated to opening a successful produce market/meeting place to serve the Madison public, specifically the Tenney-Lapham Neighborhood. We define 'produce' loosely to encompass all farm-produced goods we will carry – from the coffee beans we serve, to the meat in our sandwiches, and the hops in our beer. 'Meeting place' denotes the community setting; a place to sit, study, communicate and enjoy all that Johnson Public House has to offer. Johnson Public House is an 1100 square foot café located at 908 E. Johnson Street on Madison's east side that will serve french pressed and pour-over Intelligentsia coffee (each cup brewed fresh to order), espresso drinks, tea, craft beers and fresh food items. The location is ideal due to the population of students and families in the direct vicinity, its proximity to the University of Wisconsin-Madison campus and the strong neighborhood community surrounding it. Johnson Public House will be a Tenney-Lapham Neighborhood café attracting both young and old, those looking for a place to study and those looking to enjoy a drink and good conversation. The café will be open from 7 AM to 10 PM daily.

#### **Products**

Johnson Public House is a neighborhood café offering french pressed and pour over Intelligentsia coffee, espresso, Intelligentsia tea, fresh home-made food items, wine, craft beer, and wireless internet. The café caters toward the neighborhood, the student population and the Madison public at large. In addition to the café offerings, Johnson Public House will sell bagged Intelligentsia coffees, packaged teas, french press pots, tea pots, homemade jams (Asher's Kitchen), granola (Asher's Kitchen) and craft beers.

At the forefront of Johnson Public House's mission will be to provide a quality product and a quality experience. Our coffee is all direct trade, which means that Intelligentsia works directly with the artisan farmers it gets its beans from, ensuring that the farmers get the best price for the highest quality beans (generally 25-50% over fair trade price). All coffee will be in house within 2 days after roasting and each cup will be made to order. You will never receive a sub par cup of coffee from Johnson Public House. All food items will be homemade, cooked to order and purchased locally, when in season. The Madison Farmer's Market will be a big source of fresh produce during the summer months. The setting will feel like antique bed and breakfast meets urban farm stand. Our proposed menu is as follows:

## Sample Menu

Chili

Spicy shredded beef chili topped with habanero/peach salsa

Custom PBJ sandwich

Choose smooth or crunchy peanut butter, jam (jalapeno/apple, mango/habanero, strawberry/blueberry, etc.), add in banana, apple, strawberries, bacon, nutella or etc., grilled or traditional Signature Sandwich

Cream cheese, jam and bacon on a pretzel roll

Chicken Salad Sandwich

A delicious mixture of grilled chicken breast, apples, grapes, almonds, apricots and mayo on a pretzel roll. Try this sandwich grilled with pepper jack cheese. Yum!

Portobello Sandwich

Grilled Portobello topped with roasted red pepper, basil, mozzerella and roasted garlic aioli Granola

Homemade cashew maple granola served with milk, yogurt and/or fresh fruit Scrambled Eggs

3 eggs scrambled, served with toast and pan fried potatoes. Add cheese (+\$1) Waffles

Cinnamon, spices and a hint of vanilla make these waffles yum! Topped with fresh berries Breakfast Sandwich

Homemade English muffin or croissant topped with your choice of cheese, egg (scrambled or over easy), and meat (deli meat, bacon) served with potatoes

**Custom Grilled Cheese** 

Wheat or /Italian bread, your choice of cheese and toppings(tomato, bacon, avocado, deli meat), add pesto for extra kick

BLT

Bacon, lettuce and tomato served on wheat toast with a pesto aioli

Ham Croissant

Sliced ham, cheddar cheese, lettuce and tomato served on a croissant with rosemary aioli TBLTA

Turkey, Bacon, Lettuce, Tomato, Avacado sandwich served with chipolte aioli

Roast Beef with grilled red onion

Roast Beef topped with grilled red onion, and sriracha aioli

Egg Salad Sandwich

Our egg salad served on wheat toast, try it grilled with cheddar cheese and bacon(+\$1)! Smoked Salmon

Smoked salmon served with a bagel, herb cream cheese, tomato and cucumber slices Hummus

Our own recipe served with toasted pita, cucumber, carrots and mixed greens

Our Sweet Salad

Mixed greens with candied bacon, bleu cheese and grapes tossed in a light vinaigrette. Add and egg or bacon to any sandwich (+\$1)

Sides

Potato salad, hummus, chips, pan fried potatoes, mixed greens, bacon, ham

#### Beverages

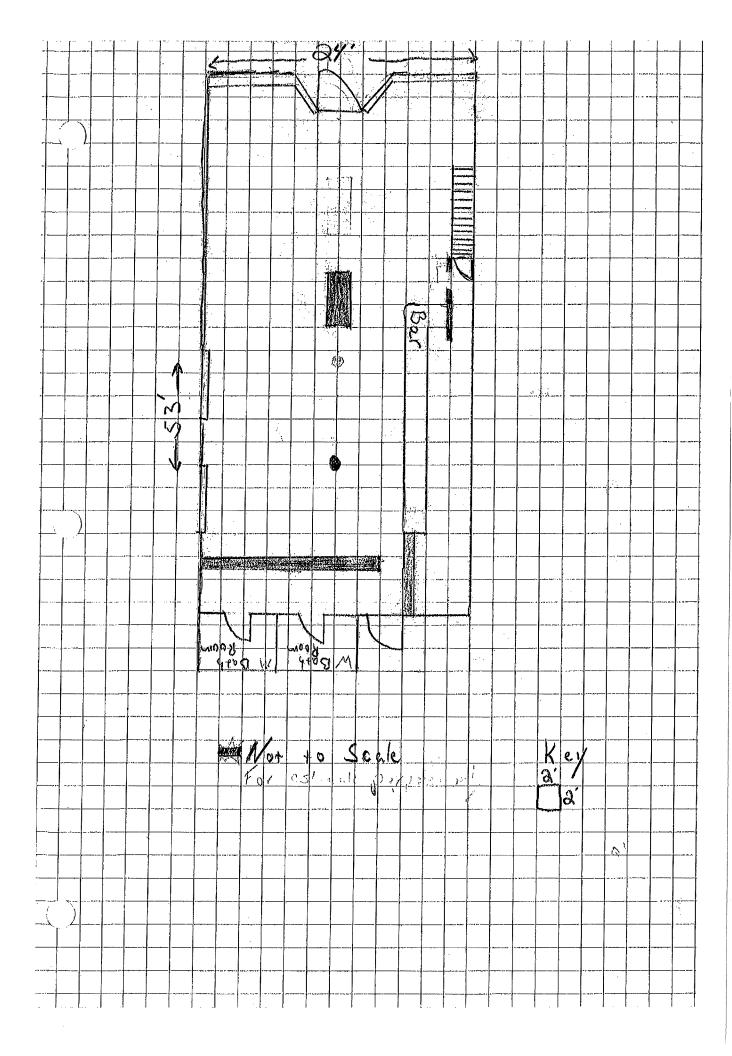
French pressed or pour-over Intelligentsia coffee, Intelligentsia tea, select craft beer (need Class "B" fermented malt beverage license) and wine (need "Class C" wine license), soda, juice, espresso drinks

## Service Philosophy

Through customer service and experience we want each patron to feel as if they are a guest in our home. We want to establish a strong sense of community and to create regulars, not just customers. Therefore, Johnson Public House will be staffed based on skill and personality. Staff behavior is critical to the café ambiance –rapport with the customer is just as important as the quality of our coffee. All customers will be treated with respect, courtesy and kindness. Service will be laid back, but thorough, timely and consistent. Staff will be responsive to any customer needs whether asked or expressed. Cleanliness is the responsibility of all staff members and will be addressed throughout the day.

It is our goal at Johnson Public House to put together a team of dedicated professionals with a passion for the community they live in and quality produce (coffee, tea, food and beer). Staff will be chosen based on this passion, determination and the experience/appropriate skill sets. The café will have two team members on staff at all times. The two will work together, but one will be assigned beverages and the other will be assigned food. While there is no designated cashier or order taker, the beverage maker will be the first respondent and the food maker second. In the ideal situation the beverage maker will greet the customer, take the order (writing down the food order on a ticket and pass it on to the cook staff) and start making the beverages (patron identification will be checked if ordering beer or wine). The food staff will hear the customer's order and begin making the food ASAP even before receiving the food ticket. When the beverage staff finishes the drink, he/she rings up the guest and collects money (if using credit card and the patron is eating in house, ask if he/she would like to keep the tab open). The patron can go sit down and we will call them when their food is ready (if busy) or one staff member can run the food to the guest (if time allows). During down time the food staff is responsible for all food prep ensuring that the station is prepared for the next shift, cleanliness of all food surfaces, appropriate

food storage etc. The beverage staff will maintain cleanliness in the beverage area and keep all necessary supplies stocked. Both staff members will be responsible for cleanliness on the floor (tables, condiments area, etc.) and will be the duty of whoever is available at the time cleanliness needs to be addressed. Each day will consist of two 8 hour shifts (6:30 AM - 2:30 PM and 2:30 PM - 10:30 PM).



## Christianson, Eric

From:

Gloede, Carl

Sent:

Wednesday, March 23, 2011 12:17 PM

To:

Christianson, Eric

Cc:

Schauf, Mary

Subject:

RE: New liquor applicant in your district. ALRC 4/27, Common Council 5/17

I met with the Agent for this license, Kyle Johnson, at the establishment on 3/2/2011. I reviewed the license application with the applicant and have no issues with the current plan. I would ask that the standard condition be added that the license meet the conditions of the definition of a restaurant as defined in Wis S.S. 254.61(5) and Madison city ordinance Chapter 38.

#### Carl Gloede

Captain of Police: Central District City of Madison Police Department 211 S. Carroll St. Madison, WI 53703

From: Christianson, Eric

Sent: Wednesday, March 23, 2011 11:28 AM

To: Maniaci, Bridget; Gloede, Carl; Masterson, Christopher; Roman, Kristen; Allen, Roger; Bitterman, Anthony; Cleary,

Beth; Mierow, Cindy; Schauf, Mary; Seifert, Kenneth; Tucker, Matthew; Voegeli, Doug; Ziemer, Courtney

Subject: New liquor applicant in your district. ALRC 4/27, Common Council 5/17

Ald. Maniaci,

A new applicant in your district:

## Legistar 21865

Johnson Public House • dba Johnson Public House

908 E Johnson St • Agent: Kyle Johnson • Estimated Capacity:

Class B Beer Class C Wine • 25% alcohol, 75% food

Aldermanic District 2 (Alder Maniaci) • Police Sector 407

Eric Christianson

Madison City Clerk's Office

Room 103,

City-County Building,

210 Martin Luther King Jr. Blvd. 53703

TEL: (608) 266-4601

TTY: (608) 266-6573

FAX: (608) 266-4666FAX: (608) 266-4666

Echristianson@cityofmadison.com

"We exist to assist"