	RIGINAL ALCOHOL BEVER	AGE LICENSE A	PPLICATION	Applicant's Wisconsin Seller's Permit Number:	040003	346739
Fo	bmit to municipal clerk	•		Federal Employer Identificat Number (FEIN):	on 26-140	917
	r the license period beginningending		20;	LICENSE R	EQUESTED >	
	ending	June 30	20 09	TYPE		FEE
	. П	Town of		☐ Class A beer ☐ Class B beer	\$ \$	<u>·</u>
TC	THE GOVERNING BODY of the:		on ·	- Wholesale beer	\$	
		City of		Class C wine	\$	
_					\$	
Co	unty of Dane Ald	ermanic Dist. No. 4	(if required by ordina	nce) Class B liquor	\$	
1	The named INDIVIDUAL PAI	RTNERSHIP XLIMITE	ED LIABILITY COMPAN	/ 		
	CORPORATION/NONPRO		D LIADILIT I COM AR	Publication fe	 	
	hereby makes application for the alcohol beve		WP	TOTAL FEE	\$	20-
2.	Name (individual/partners give last name, first	t, middle; corporations/limited		registered name):		
	An "Auxiliary Questionnaire," Form AT-103 partnership, and by each officer, director a liability company. List the name, title, and p Title President/Member	R, must be completed and a nd agent of a corporation o lace of residence of each per San 6406 Anti-	r nonprofit organizationson etam Lane, b	n, and by each member/mana lome Address Mad 150 n W1 53	Post Office & Zi	p Code
	Treasurer/Member					
	Agent MONG YEAN LEE					
	Directors/Managers	· · · · · · · · · · · · · · · · · · ·				
3.	Trade Name Drick hous	e BBX LLC	Busine	ss Phone Number <u>608</u>	257-2	020
4	Address of Premises > 408 W Gov	ram st Madisou	(1)(53/105 Post 0		3703	
5 -	Is individual, partners or agent of corporation/l	imited liability company subje	ect to completion of the r	esponsible beverage server	_	محب
	training course for this license period?					No
3	Is the applicant an employe or agent of, or act	ing on behalf of anyone exce	pt the named applicant?	Marketti kan en 1960 e		⊠ No
7	Does any other alcohol beverage retail license					No 💢
8.	(a) Corporate/limited liability company app					→
	(b) Is applicant corporation/limited liability corporation, or any officer, direct				. L Yes	[X No
	agent hold any interest in any other alcoho	ol beverage license or permit	in Wisconsin?		🗌 Yes	X No
	(NOTE: All applicants explain fully on reverse	side of this form every YES a	inswer in sections 5, 6, 7	7 and 8 above.)		, -
9	Premises description: Describe building or building or building living quarters, if used, for may be sold and stored only on the premises of	the sales, service, and/or sto described) <u>708 0</u>	rage of alcohol beverage	ored. The applicant must includes and records. (Alcohol bevera	le ages	
0	Legal description (omit if street address is give					
	(a) Was this premises licensed for the sale of(b) If yes, under what name was license issue	liquor or beer during the past	r licence upar?		🔲 Yes	
	me of the second section of the	d?			103	∑ No
	Does the applicant understand they must file a	d? Special Occupational Tax re	eturn (TTB form 5630 5)	- · · · · · · ·		
2.	before beginning business? [phone 1-800-937	d? Special Occupational Tax re 7-8864]	eturn (TTB form 5630 5)		Yes	∑X No □ No
2.	before beginning business? [phone 1-800-937] Does the applicant understand a Wisconsin Se	d? Special Occupational Tax re -8864] Special Occupational Tax re	eturn (TTB form 5630 5)	me name as that shown in	¥Yes	. No
2.	before beginning business? [phone 1-800-937 Does the applicant understand a Wisconsin Se Section 2, above? [phone (608) 266-2776]	d? Special Occupational Tax re -8864] Eller's Permit must be applied	eturn (TTB form 5630 5) for and issued in the sa	me name as that shown in	∑ Yes ∑ Yes	□ No
2 3 4	before beginning business? [phone 1-800-937 Does the applicant understand a Wisconsin Se Section 2, above? [phone (608) 266-2776] Is the applicant indebted to any wholesaler bey	d? Special Occupational Tax re -8864] Eller's Permit must be applied yond 15 days for beer or 30 d	eturn (TTB form 5630 5) for and issued in the sa lays for liquor?	me name as that shown in	∑a Yes	□ No □ No ☑ No
12. 13 4. EAI f the ndiv ny p	before beginning business? [phone 1-800-937 Does the applicant understand a Wisconsin Se Section 2, above? [phone (608) 266-2776]	d? Special Occupational Tax re -8864] Filler's Permit must be applied yond 15 days for beer or 30 d ovided by law, the applicant state ording to law and that the rights pplicant must sign; corporate offi	lays for liquor? es that each of the above quand responsibilities conference (s), members/managers pection. Such refusal is a manager of Corporation (Officer of Corporation)	me name as that shown in estions has been truthfully answere red by the license(s), if granted, w of Limited Liability Companies mu	Yes Yes Yes do the best of the Ill not be assigned st sign) Any lack of cation of this licent	□ No □ No □ No □ No □ knowledge to another. of access to
12. 13. 14. EAI f the Indiv UB:	before beginning business? [phone 1-800-937 Does the applicant understand a Wisconsin Se Section 2, above? [phone (608) 266-2776] Is the applicant indebted to any wholesaler bey CAREFULLY BEFORE SIGNING: Under penalty prosigners. Signers agree to operate this business accurate dual applicants and each member of a partnership apprition of a licensed premises during inspection will be CCRIBED AND SWORN TO BEFORE ME day of Clerk/Notary Public mmission expires E COMPLETED BY CLERK	sd? Special Occupational Tax re-8864] Eller's Permit must be applied yound 15 days for beer or 30 dovided by law, the applicant state ording to law and that the rights pplicant must sign; corporate office deemed a refusal to permit ins	lays for liquor? es that each of the above quand responsibilities conference (s), members/managers pection. Such refusal is a manager of Corporation (Officer of Corporation)	me name as that shown in estions has been truthfully answere red by the license(s), if granted, with of Limited Liability Companies munisdemeanor and grounds for revolutions of the companies of Limited Liability or/Member/Manager of Limited Liability	Yes Yes Yes do the best of the Ill not be assigned st sign) Any lack of cation of this licent	□ No □ No □ No □ No □ knowledge to another. of access to
2 3 4. EAI the ndiv p p UB:	before beginning business? [phone 1-800-937 Does the applicant understand a Wisconsin Se Section 2, above? [phone (608) 266-2776] Is the applicant indebted to any wholesaler bey CAREFULLY BEFORE SIGNING: Under penalty pr signers. Signers agree to operate this business acc dual applicants and each member of a partnership a portion of a licensed premises during inspection will be CCRIBED AND SWORN TO BEFORE ME day of (Clerk/Nober Public)	sd? Special Occupational Tax ref-8864] Eller's Permit must be applied yond 15 days for beer or 30 dovided by law, the applicant state ording to law and that the rights pplicant must sign; corporate office deemed a refusal to permit ins	lays for liquor? es that each of the above quand responsibilities conference (s), members/managers pection. Such refusal is a manager of Corporation (Officer of Corporation)	me name as that shown in estions has been truthfully answere red by the license(s), if granted, with of Limited Liability Companies munisdemeanor and grounds for revolutions of the companies of Limited Liability or/Member/Manager of Limited Liability	Yes Yes Yes do the best of the Ill not be assigned st sign) Any lack of cation of this licent	□ No □ No □ No □ No □ No □ knowledge to another. of access to

City of Madison Su	pplemental Class B License A	pplication
Seller's Permit Number Federal Employer Identification Number Notarized Original Application Form Notarized Supplemental Form	 ☑ Description of Licensed Premise ☐ *Notarized Appointment of Agent ☐ Background Investigation Form(s) ☐ Netarized Transfer of Ownership ☐ *Articles of Incorporation 	☐ Floor Plans ☐ Lease ☐ Sample Menu ☐ Business Plan * Corporation/LLC only
1. Name of Applicant/Partner/Corporation	on/LLC Jong year Lea	<u> </u>
2. Address of Licensed Premise 408	""	
3. Telephone Number: 257-2020	4. Anticipated opening date:	July '09
	ately 402 W. Gorlian S	
6. Have you contacted the Alderperson, F the neighborhood association representation	Police Department District Captain, Alcoh tative for the area in which you intend to	
7. Are there any special conditions desire Explain.	,	
8 Business Description, including hours Divises 7 Days 4 P 2 A	of operation: RESTAURANT	, 11 ² -1°
9. Do you plan to have live entertainment	? 坏No □ Yes—What kind?	
	g, including overall dimensions, seating a ages are to be sold and stored. The licens ged without the approval of the Comm	ed premise described
3 STORY BRICK BUILDING	W BASEMENT (STORAGE)	1st FLOUR
61 56AP PLUS 8 B	ARSTOOLS / 2ND FLOUR 90	1 55AT3 +
SERVICE BAR (NO STOOLS)	/ 3 RD FLOWN 52 SEATS	
11. Are any living quarters directly or indi		applicant? □ Yes 🛣No
12. Describe existing parking and how par	king lot is to be monitored.	
	LOTY	
13. Describe your management experience	e, staffing levels, duties and employee trai	ning JOSEPH TACHOUSH
OWNER-OFFRATOR CHEZ BAN	Aus - MOLS, 1987-2002/ LE	STANBANT CONSULTANT
MADISON 2002-2006 / CONS	ans - MPLS, 1987-2002/ LE OLDANT + GM SAMBA 200	6- LUREENT
14 Identify the registered agent for your process, notice or demand required or	Corporation or LLC. This is your corporation or LLC. This is your corporation on the corporation that the corporation is a second or the corporation.	ation's agent for service of oration.
Jong yean Lee Name Addres	6406 Antietam Lane	_madison w153705

15	Utilizing your market research, who would you project your target market to be?
	OVERTURE CENTER KOIL CENTER STATE WORKERS, OWNERSITY
16	What age range would you hope to attract to your establishment? 22-80
17	Describe how you plan to advertise/promote your business. What products will you be advertising?
18	Are you operating under a lease or franchise agreement? Yes (attach a copy)
19	Owner of building where establishment is located: Jonb 25am LEE
Ad	Idress of Owner: 402 W. Gorman St Phone Number 257 2020
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? Yes
21	List the Directors of your Corporation/LLC
	Name Address
	Name Address
	Name Address
22.	List the Stockholders of your Corporation/LLC
	Name Address % of Ownership
	Name Address % of Ownership
	Name Address % of Ownership
23.	What type of establishment are you? (Check all that apply) Tavern Nightclub Restaurant
	Other Please Explain
24	What type of food will you be serving, if any? Months BBQ Breakfast Lunch Dinner
25	Places submit a sample many with your application, if possible. What might aventually be included an your
<i>23.</i>	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 Desserts Pizza Full Dinners
26	During what hours of your operation do you plan to serve food? During 20 7 0 4 4 - 2 A
۷٠.	During what hours of your operation do you plan to serve food? Divine 7 Rays 4P-2"
1	UNCH THE SASU 11A-4P

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 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? 8-12
	During what hours do you anticipate they will be on duty? During ALL Hours of OPERATION
32.	Do you plan to have hosts or hostesses seating customers? Yes No
33.	Do your plans call for a full-service bar? Yes No
	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? $2-3$
34.	Will there be a kitchen facility separate from the bar? Ves 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?
	APPX 6070
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? Yes No
41.	Are you currently, or do you plan to become, a member of the Wisconsin Restaurant Association or the
	National Restaurant Association? Yes No

- 42 What is your estimated capacity? _____180 200
- 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.

Total Gross Receipts	100%
Gross Receipts from Other	%
Gross Receipts from Food and Non-Alcoholic Beverages	75 %
Gross Receipts from Alcoholic Beverages	25 %

44. 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 A (ROFOLMA OF BUSINESS PROJECTION)

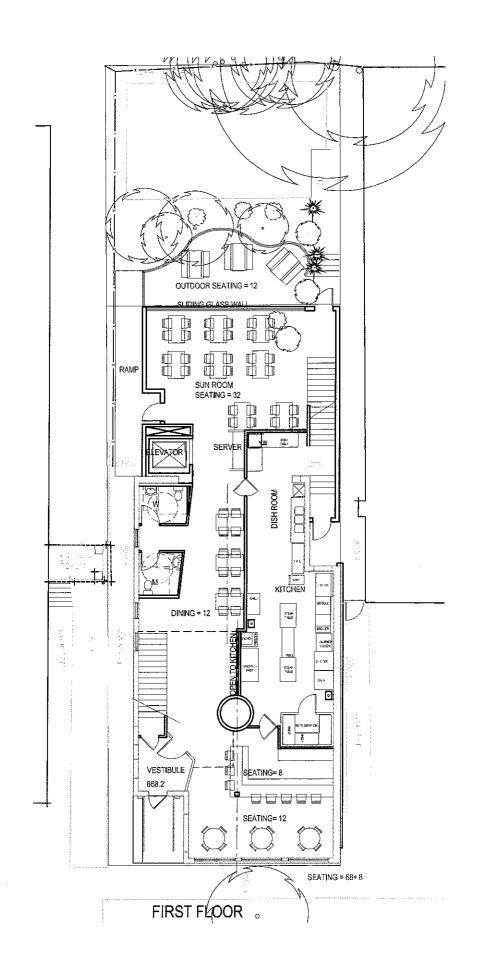
Read carefully before signing: Under penalty provided by law, the applicant states that the above information has been truthfully completed to the best of the knowledge of the signer. Signer agrees to operate this business according to law and that the rights and responsibilities conferred by the license(s), 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.

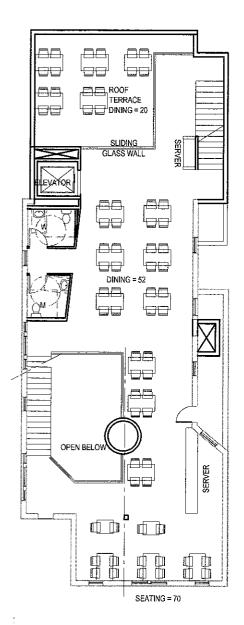
Subscribed and Sworn to before me:

this Day of Aug of 2008

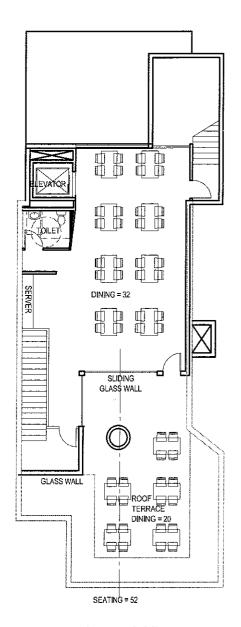
My commission expires 67 11 2

(Officer of Corporation/Member of LLC/Partner/Individual)

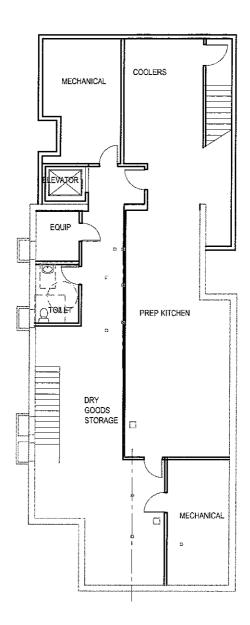




SECOND FLOOR



THIRD FLOOR



BASEMENT



Assumptions on Operating Projection

ales (from "Sales Projection" worksheet)	Weekiy Ave Annual	7
Food	19,356 1,006,512	71.2%
Liquor	120 6,240	0.4%
Beer	1,464 76,128	5.4%
Wine	6,240 324,480	23.0%
otal Sales	27,180 1,413,360	100.0%

Cost of Sales	Annual \$	% of Sales
Food Cost % 25.0% of food sales	251,628	
Liquor Cost % 23.0% of liquor sales	1,435	
Beer Cost % 27.5% of beer sales	· -	
Wine Cost % 31.0% of wine sales	100,589	
Total Cost of Sales	374,587	26.5%

Management Salaries (Annual)		% of Sales
General Manager	36,000	2.5%
Chef/Kitchen Manager	36,000	2.5%
Assistant Manager	0	0.0%
Assistant Manager	0	0.0%
Sous Chef		0.0%
Total Management Salaries	72,000	5.1%

Hourly Labor Cost (from "Hourly Labor" worksheet)	V	Veekly	y Ave		Annual		%
Restaurant Only			4,708	÷	244,816		
Special Events			38	: :	1,955	11.	****
Total Hourly Labor Cost	·	1	4,746		246,771		17.5%
Total Management Salaries					72,000		5.1%
Total Gross Payroll					318,771		22.6%

Employee Benefits		Annual \$	% of Sales
FICA Taxes - as a % of Gross Payrol	9.0%	25,449	
State Unemployment - as a % of Gross Payroll	1.0%	2,828	
Federal Unemployment - as a % of Gross Payroll	2.0%	5,655	
Other Payroll Taxes - as a % of Gross Payroll	2.0%	5,655	
Worker's Comp as a % of Gross Payroll	2.0%	5,655	
Group Medical Insurance - cost per covered employee per month	2,200	26,400	
Group Medical Insurance - # of employees covered	0		
Disability & Life Insurance - per month	0	0	
401k Plan - per month	0	0	
Employee Meals - per month	0	0	
Employee Education - per month	0	0	
Awards & Prizes - per month	0	0	
Employee Christmas & Other Parties - per month	<u> </u>	0	
Transportation & Housing - per month	0	0	
Total Employee Benefits		71,643	5.1%

Direct Operating Expenses	Monthly \$	% of Sales	Annual \$	% of Sales
Auto Expense	0		0	
Catering & Banquet Supplies	0		0	
Cleaning Supplies	300		3,600	
Contract Cleaning	1,000		5,000	I
Extermination	150		1,800	ļ
Flowers & Decorations	200	popular i i i i i i i i i i i i i i i i i i i	2,400	
Kitchen Utensils	500		6,000	
Laundry & Linen	800		9,600	
Licenses & Permits	0		2,000	
Menus & Wine Lists	100		1,200	
Miscellaneous	500		6,000	

FLAMING PIG

Weekly Sales Projection

Number of Seats 240

Number of Seats	240	Table Turns	Covers	Food	Average (Check Beer	Wine	Total	% of Week
the state of the s	Breakfast	0.0	Overs	0	Liquor 0	Deer 0	0	0	TICCK
lo va galysa valtalas	Lunch	0.0	0	0	0	0	0	ő	
Monday	Dinner	0.0	80	1,672	ŏ	128	560	2,360	
	Day Totals	1 1111111111111111111111111111111111111	-	1,672	0	128	560	2,360	9.5%
er er fillen fill fjoline Austrianie	Breakfast	0.0	0	0	0	0	0	0	
Tuesday	Lunch	0.0	0	0	0	0	0	0	
	Dinner	0.0	80 _	1,672	0	128	560	2,360	
e in replyši gradjiji pejgsi	Day Totals			1,672	0.0	128	560	2,360	9.5%
er julije kalaja kija datusij	Breakfast	0.0	0	0	. 0	0	0	0	
	Lunch	0.0	ŏ	ō	ŏ	ŏ	ŏ	ō	
Wednesday	Dinner	0.0	80	1,672	Ö	128	560	2,360	
	Day Totals		-	1,672	Autou (10 0 ,13	128	560	2,360	9.5%
	Bus stefa st	0.0			_	0	0		
	Breakfast	0.0	0	0	0	0	0	0	
Thursday	Lunch	0.0	0 120	0 500	0 0	0 192	0	3.540	
	Dinner Day Totals	0.0	120 _	2,508 2,508	0	192	840 840	3,540 3,540	14.3%
	Day Totals			2,500	U.S.	134	040	3,540	14.57
	Breakfast	0.0	0	0	0	0	0	0	
Friday	Lunch	0.0	0	0	0	0	0	0	
rnuay	Dinner	0.0	200	4,180	0	320	1,400	5,900	
Halifara din Nata.	Day Totals			4,180	0	320	1,400	5,900	23.8%
	Breakfast	0.0	0	0	0	0	0	0	
	Lunch	0.0	ő	ő	ő	ŏ	ŏ	ŏ	
Saturday	Dinner	0.0	200	4,180	ŏ	320	1,400	5,900	
	Day Totals			4,180	0,	320	1,400	5,900	23.8%
			•			_			
	Breakfast	0.0	0	0	0	0	0	0	
Sunday	Lunch	0.0	0	0	0	0	0	0	
•	Dinner Day Totals	0.0	80 _	1,672 1,672	0 0	128 128	560 560	2,360 2,360	9.5%
WEEK TOTALS	Day rotais		Totals in \$	17,556	0	1,344	5,880	24,780	5.07
(restaurant only)		•	·		-	•	•		
(restaurant only)	Ave t	of Banquets, Pa	ales Mix %	70.8%	0.0%	5.4%	23.7%	100.0%	•
Special Events	l Ave t	• •	# of Guests	30					
(banquets, parties,		Per Person		\$40.00					
catering)	}		Sales Mix %	75%	5%	5%	15%	100%	
	Spe	ecial Event Sales		1,800	120	120	360	2,400	
WEEK TOTALS - All Sales		1	otais in \$	19,356	120	1,464	6,240	27,180	

RECAP: Key Sales Numbers:	4944 (A. E.)	
Annual Sales		\$1,413,360
Average Monthly Sales	100	\$117,780
Annual Sales Per Square Food		\$283
Annual Sales Per Seat		\$5,889

FLAMING PIC

Capital Budget - Estimate of Contruction & Pre-Opening Costs

	PSF	Per Seat	TOTAL COST	Detail
Square Footage / Seating	9,000	240		
AND & BUILDING	77.78	2,917	700,000	
Building - Construction / Contractor Fees		1	4.3.	700,000
EASEHOLD IMPROVEMENTS	116.67	4,375	1,050,000	
Construction Contract	1.0,01	.,	[1,050,00
Landlord Contribution				
AR / KITCHEN EQUIPMENT	11.11	417	100,000	
AR / DINING ROOM FURNITURE	6.67	250	60,000	
Chairs				20,000
Tables				20,000
Counters				<u> </u>
Booths				10,000
Ovens				10,000
ROFESSIONAL SERVICES	2.72	102	24,500	
Architect & Engineering				20,000
Legal (lease & incorporation)				1,000
Project Consultant				0.50
Accounting & Tax	<u> </u>			2,50
Name, Logo & Graphic Design				1,00
RGANIZATIONAL & DEVELOPMENT	0.61	23	5,500	10.41
Deposits (utilities, sales tax, etc.)				•
Insurance Binder (property, casualty, liability	ty)			
Workers Comp. Binder				· · · · · · · · · · · · · · · · · · ·
Liquor License				50
Building Permits				(
Other Licenses & Permits				500
Utility Deposits (gas, electric, water)	**************************************			1 000
Change, Operating Banks & Petty Cash				1,000 2,500
Menus / Menu Boards				2,50
Lease Deposit Travel, Research, Concept Development		·		1,00
	4.55	4.50		
NTERIOR FINISHES & EQUIPMENT Kitchen Smallwares	4.33	163	39,000	5,000
Artwork & Specialty Décor				5,000
Security System	•			5,000
Music/Sound/Audio-Visual Systems				5,000
Cash Register / Point of Sale				15,000
Phone System				1,000
Office Equipment / Computer				1,000
Office Supplies				1,000
Interior Signs			.,,,,,	1,000
Other				(
XTERIOR FINISHES & EQUIPMENT	0.56	21	5,000	:
Landscaping and Patio Exterior Signs & Decorations				5,000
Resurfacing				3,000
Parking Bumpers				(
Parking Lot Striping				
Other			version in the state of the sta	- (
RE-OPENING EXPENSES	6,20	233	55,805	
Construction Period Utilities	0,20	- 233	55,605	· C
Construction Period Building Lease				
Construction Period Interest			· · · · · · · · · · · · · · · · · · ·	0
Constitution i crioù interest				

FLAMING PIG Capital Budget - Estimate of Contruction & Pre-Opening Costs

	PSF	Per Seat	TOTAL COST	Detail
Uniforms				
Opening Inventories -				
Food				10,00
Beer, Liquor & Wine				30,00
Paper			<u>, 4,48,4 (1,188).</u>	
Retail Merchandise				
Other Restaurant Supplies		<u> </u>		5,00
Marketing -				
Advertising	· · · :	<u> </u>		2,00
Public Relations				
Opening Parties	Harting Brown Land	<u>ali ing pakalah</u>		3,50
Personnel -				
General Manager				
Chef / Kitchen Manager				
Assistant Manager(s)				
Employee Training				5,00
Admin / Bookkeeping		<u> </u>	<u> </u>	
Employee Benefits			w. 54********	
Payroll Taxes		<u> </u>		30
ORKING CAPITAL & CONTINGENCY Working Capital	17.78	·	160,000	80,00
Contingency				80,00
TAL PROJECT COST	\$ 244	\$ 9,166	\$ 2,199,805	

Brick house

408 West Gorham Street, Madison, WI 608.257.PORK

APPETIZERS

Cornbreaded Chicken Tenders8.00	Bbq Ribs 8.00	SANTINE DESCRIPTION OF THE PROPERTY OF THE PRO	Smoking Hast Wings S.00	Onion Kings 3.00	Pearl's Habanero Cheese Curds 4.00	Cheese Curds	
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Sandwiches

Served with fries and slaw

Salads

Meats

Served with corn musicin and choice of three sides

Baby Back Nibs

Sides

Vegetarians: order four sides as an Entrée for 11.00

Gingered Slaw 3.00 Pearl's Baked Beans 4.00 Succotash 3.00 Garlic Mashed Potatoes 4.00 Cheesy Taters 4.00 Creamed Corn 3.00	. 4 4 4 4 4 6 6 6 6 6 6 6 6 6 6 6 6 6 6	Collard Greens Flamin' Beaus Curly Frais Corn on the Cob
Mac & Cheese	6	Black Eyed Peas

Everything Available for Take Out