



# 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, 2017.
- 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.  
ZOR SHINERS ANONIMS OF NA
- Trade Name (doing business as) ZOR SHINERS
- Address to be licensed 575 ZOR SHINE PL, MADISON 53719
- Mailing address 575 ZOR SHINE PL., MADISON, WI 53719
- Anticipated opening date JULY 6, 2016
- Is the applicant an employee or agent of, or acting of behalf of anyone except the applicant named in question 2?  
 No  Yes (explain) \_\_\_\_\_
- 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.  
HANKWITZ HALL BAR & STORAGE AREA, OASIS ROOM AND  
WALK-IN COOLER ON LOWER LEVEL. APPROX 5000 SQ.FT.

A-8  
P-125

11.  Attach a floor plan, no larger than 8 1/2 by 14, showing the space described above.

12. Applicants for on-premises consumption: list estimated capacity 250

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

parking for approx 125 cars adjacent to Bldg - Bar Manager  
to monitor parking area.

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

No  Yes, license issued to BLUE PLATE CATERING (name of licensee)

15.  Attach copy of lease. No 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 KENT ENGLAND

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

18. How long has the agent continuously resided in the State of Wisconsin? 68 yrs

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 2001

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

JANUARY 1934

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
PRESIDENT	ROBERT GIESLER	CASHTON, WI
VICE PRES.	CHARLES MILLER	MILLADONE, WI
SECRETARY	JAMES STIRLSSEL	MADISON, WI
TREASURER	DALE OLSON	WHITewater, 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.

JAMES L. STIRLSSEL

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 Non profit organization
27. Business description Non-profit organization with a  
banquet hall and meeting rooms
28. Hours of operation Regular office 9-4 M-F, other hours per event-
29. Describe your management experience Zona has operated BEVERAGE  
AND FOOD SERVICE (THRU LICENSES) SINCE 1987-
30. List names of managers below, along with city and state of residence.  
WILLIAM C. JONES WADSWORTH, WI  
KENT ENGLAND EVANSVILLE, WI
31. Describe staffing levels and staff duties at the proposed establishment NO DIRECT  
HIRES ALL STAFF PROVIDED BY CASPER FOR FOOD SERVICE.  
MAX 2 TRAINED + LICENSED BARTENDERS.
32. Describe your employee training WE REQUIRE OUR BARTENDERS  
to be properly TRAINED + LICENSED.

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

Members of ZOL STARTUPERS + FRIENDS

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

We do not advertise.

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? DJ's and

occasional live music.

38. What age range do you hope to attract to your establishment? ALL AGES

39. What type of food will you be serving, if any? Wedding Reception, Birthday Parties  
 Breakfast  Brunch  Lunch  Dinner ANNIVERSARIES, ETC.

40. Submit a sample menu if applicable. What will be included on your operational menu?

Appetizers  Salads  Soups  Sandwiches  Entrees  Desserts  
 Pizza  Full Dinners ALL FOOD CATERED.

41. During what hours of operation do you plan to serve food? HOURS PER EVENT

42. What hours, if any, will food service not be available? N/A

43. Indicate any other product/service offered. NONE

44. Will your establishment have a kitchen manager?  No  Yes PER CATERER

45. Will you have a kitchen support staff?  No  Yes PER CATERER

46. How many wait staff do you anticipate will be employed at your establishment? NONE - CATERER

During what hours do you anticipate they will be on duty? N/A

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? 24  
 How many bartenders do you anticipate having work at one time on a busy night? 2
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? ALL food CATERED  
 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? ALL CATERER
54. If your business plan includes an advertising budget: NONE  
 What percentage of your advertising budget do you anticipate will be related to food? DO NOT ADVERTISE  
 What percentage of your advertising budget do you anticipate will be drink related? 0
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
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:  
38 % Alcohol 62 % 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 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

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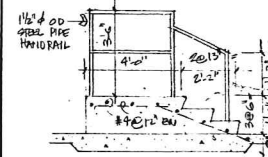
**Section Notes**

**ALTERNATIVE NO. 1**  
 Provide all Work to complete construction of Toilet Rooms 016 and 017 as indicated on Drawings, Schedules, and Specified. Include in Base Bid the following work: CMU partitions common with Room 019; gypsum wallboard partition common with Rooms 012 and 015 - finished on 012 and 015 side only; erection of studs to receive future doors 016A and 017A; plumbing rough-in complete, ready to receive fixtures.

**ALTERNATIVE NO. 2**  
 Provide all Work including plumbing, HVAC, electrical work; and back bar flooring to complete construction of bar in area 103 as indicated by Drawing, Schedules, and Specified. Final plumbing and electrical connections by Separate Contractor.

**ALTERNATIVE NO. 3**  
 Provide all Work to complete construction of Rooms 100, 101, 102, 103, 104, and 121 (essentially all interior work west of partition on Column Line P) as indicated on Drawings, Schedules, and Specified. Include in Base Bid doors, windows, and electrical work in exterior perimeter walls and complete construction of exterior perimeter walls.

**ALTERNATIVE NO. 4**  
 Provide cylinder casing for future 3500 lb. hydraulic elevator.



8 STAIR SECTION RM 011  
 SCALE: 3/8" = 1'-0"

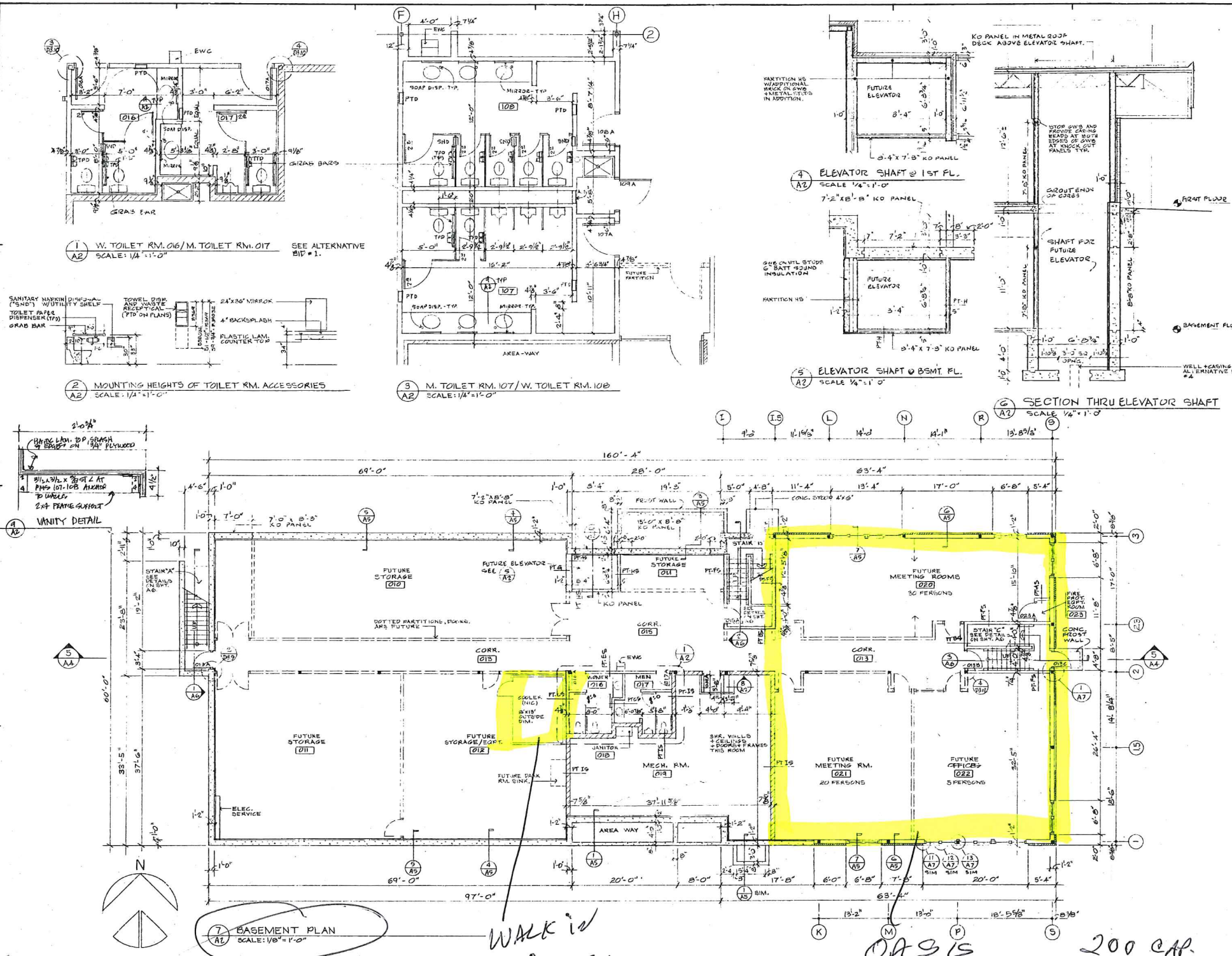
FIG 2 B 1255  
 8-23-85 ISSUED FOR BIDDING

Date	Issuance / Revisions	Symbol

**ZOR SHIRINE TEMPLE**

Drawing Title  
**BASEMENT FLOOR PLAN  
 TOILET PLANS & DETAILS**

Project No. 16-B519  
 Drawing No. **A2**  
 Drawn By: **A2**

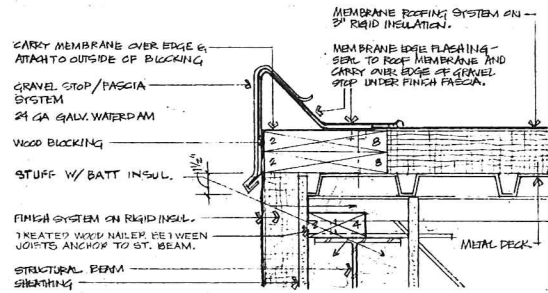


*LOWER LEVEL*

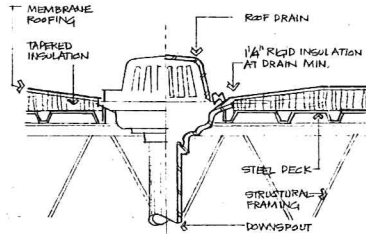
7 BASEMENT PLAN  
 SCALE: 1/8" = 1'-0"

*WALK in COOLER*

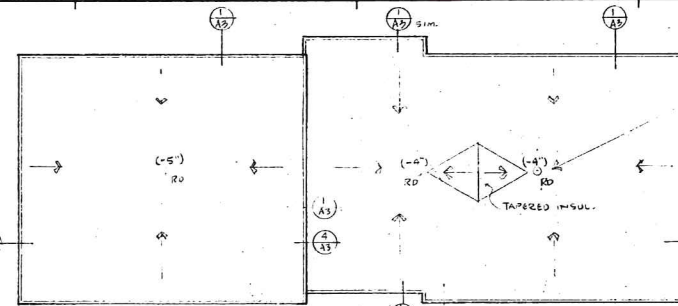
*OASIS 200 CAP. MEETING ROOM*



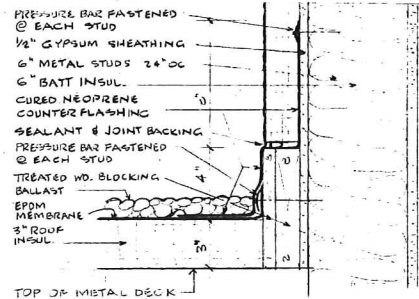
1 ROOF EDGE DETAIL  
SCALE: 3/4" = 1'-0"



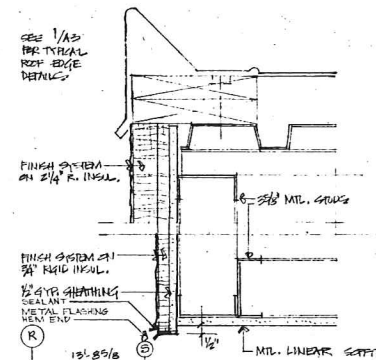
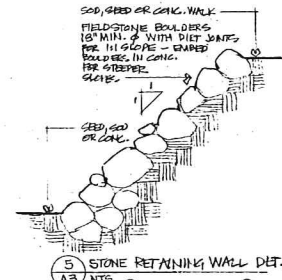
2 ROOF DRAIN DETAIL  
SCALE: 1/2" = 1'-0"



NOTE 1:  
(-4") OR (-5") DENOTES ELEVATION OF TOP OF METAL ROOF DECK RELATIVE TO TOP OF ROOF DECK @ ROOF EDGE



4 FLASHING DETAIL  
SCALE: 3/4" = 1'-0"

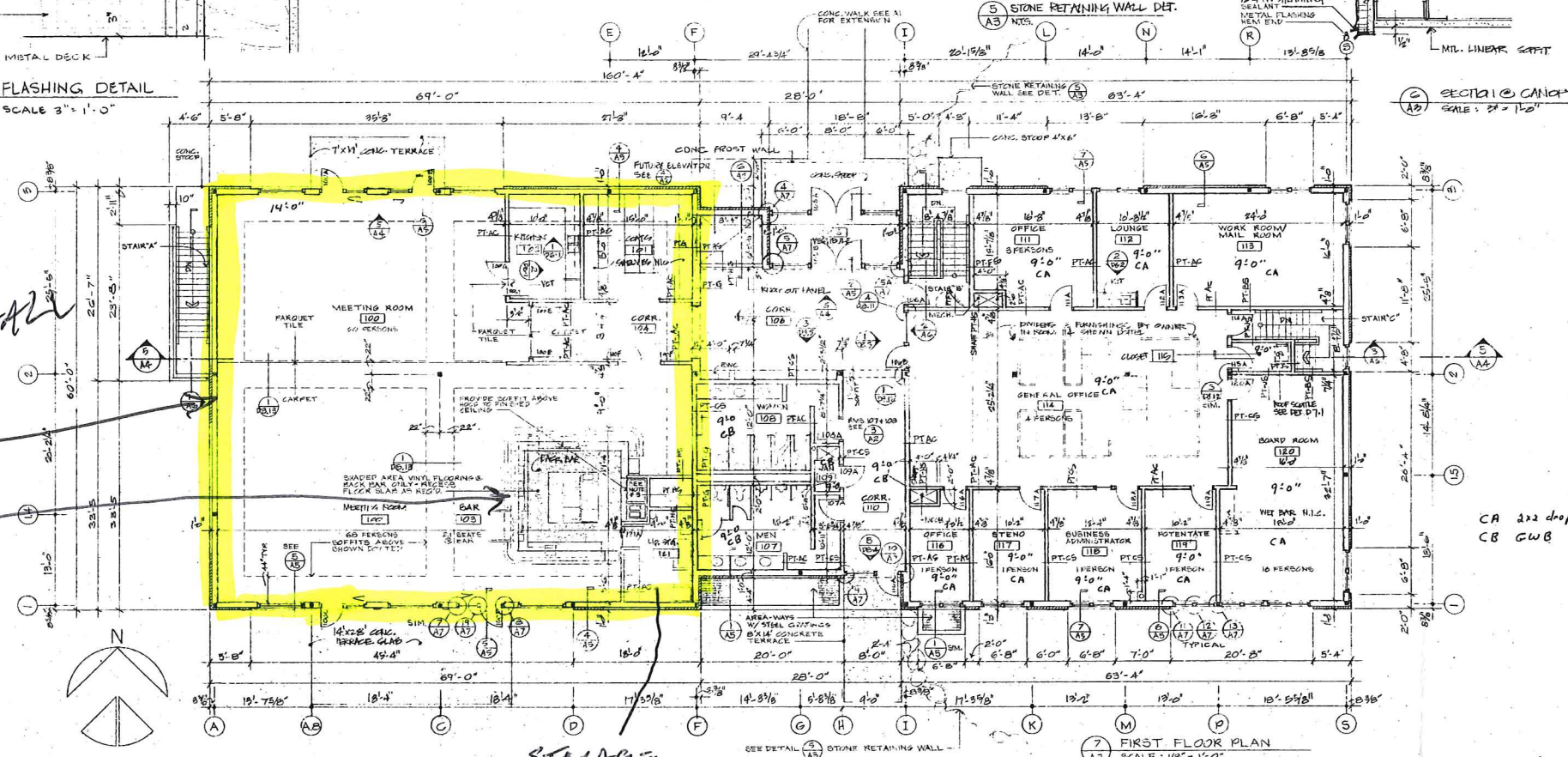


3 SECTION @ CANOPY  
SCALE: 3/4" = 1'-0"

MAIN FLOOR

HANKWITZ HALL

BAR



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- Seal & Notes
- PARTITIONS IN ROOMS 101 AND 102 AND AT DOORS TO BE REMOVED IN THE FUTURE - SEE DETAIL (5)
  - COORDINATE WITH CLEAR AREA DIMENSIONS FOR MECH. ENDS WITH MECH. DRAWINGS.
  - REMOVE BRICK PART AT SIDE WALLS AT RECESSED GRILL AREA.
  - BUILDING CAPACITY APPROXIMATELY 250 PERSONS.

AUG 28 1988		
8 23 85	ISSUED FOR BUILDING	
Date	Issuance / Revisions	Symbol

**ZOR SHIRINE TEMPLE**

Drawing Title  
FIRST FLOOR PLAN  
ROOF PLAN AND DETAILS

Project No. 16-8519  
Drawing No. A3  
Drawn By