

**RETAIL LICENSE TRANSFER – PREMISES TO PREMISES**

Wisconsin Department of Revenue

FEE \$ \_\_\_\_\_

**APPLICATION FOR TRANSFER OF LICENSES FOR SALE OF FERMENTED MALT BEVERAGES AND/OR INTOXICATING LIQUOR FROM ONE PREMISES TO ANOTHER**

\_\_\_\_\_, Wisconsin  
\_\_\_\_\_, 20\_\_\_\_\_

To the governing body of the  City  Village  Town of MADISON  
County of DANE Wisconsin.

The undersigned hereby applies for a transfer of Class B license from 529 State Street  
\_\_\_\_\_ to 558 State Street  
\_\_\_\_\_ (present location) (proposed location)  
on or about August 15th 2013 (date)

1. APPLICANT: (print name and address plainly)

- (a) Full name of applicant MATTHEW VINTURES GROUP DBA ROAST PUBLIC HOUSE
- (b) Address 529 STATE STREET MADISON WI 53703

2. LOCATION AND DESCRIPTION OF PREMISES TO WHICH APPLICATION FOR TRANSFER IS MADE: Describe building or buildings where alcohol beverages are to be sold, served and stored.

- (a) Street number 558 State Street Madison WI 53703
- (b) Trade name of establishment Roast Public House
- (c) Physical description of building, buildings and/or land area comprising licensed premises.  
Old 52 PIZZA BAR location on State Street

(d) Legal description (omit if street address is given above.) \_\_\_\_\_

(e) Is any other business conducted on same premises?  Yes  No If so, what? \_\_\_\_\_

(f) Was this location licensed for beer or liquor during the past year?  Yes  No Just beer

(g) Give name and address of previous licensee. 52 PIZZA BAR  
558 State Street  
Madison WI 53703

(h) Will the previous licensee surrender its license?  Yes  No

ALCOHOL - 62.570 PD-403  
FOOD - 37.590 AD-2 (Zellerbach)  
CAPACITY - 150  
AGENT: HENRY ANSCHUTZ


ALL APPLICANTS FOR TRANSFER OF CLASS B LICENSES MUST ANSWER THE FOLLOWING:

3. If granted, state any interest, directly or indirectly, that any brewer, bottler, wholesaler, manufacturer, or rectifier will hold in the premises for which you are applying

nothing

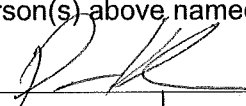

4. If you do not own the fixtures, state the manner, terms and conditions under which said fixtures are held


We own everything that may be of interest

  
(Signature)

State of Wisconsin }  
County of } ss.

(I) (We), Douglas Hanna and Austen Kroll  
being first duly sworn on oath says that (he/she is) (they are) the person(s) above named and that the answers to the questions in each instance are complete and true.

Subscribed and sworn to before me this  
24 day of June, 2013  
 EPIC CHRISTIANSON

Notary Public, DANE County, Wis.  
My Commission Expires 6/29/2014

CLASS OF BUSINESS

Name	<u>Rest Pizzeria House</u>
Original Location	<u>529 State Street</u>
Ward	
Proposed Location	<u>558 State Street</u>
Ward	
License No.	
Treasurer's Receipt No.	
Filed	
Submitted to Council or Board	
Approved	_____ Date _____
Denied	_____ Date _____

## City of Madison Supplemental Class B License Application

<input type="checkbox"/> Seller's Permit Certificate (Entity must match the Articles of Incorporation) <input type="checkbox"/> Federal Employer Identification # <input checked="" type="checkbox"/> Notarized Original Application Form <input checked="" type="checkbox"/> Notarized Supplemental Form <input checked="" type="checkbox"/> Orange Sign (Clerk's Office provides at time of application)	<input type="checkbox"/> Written Description of Premise <input type="checkbox"/> Background Investigation Form(s) <input type="checkbox"/> Notarized Transfer of Ownership <input type="checkbox"/> *Articles of Incorporation <input 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
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1. Name of Applicant/Partner/Corporation/LLC MATTREHDEN VENTURES GROUP LLC

2. Address of Licensed Premise 538 State Street

3. Telephone Number: 608-819-6457 4. Anticipated opening date: August 31<sup>st</sup>

5. Mailing address if not opening immediately 529 State Street

6. Have you contacted the Alderperson, Police Department District Captain, Alcohol Policy Coordinator, and the neighborhood association representative for the area in which you intend to locate?  Yes  No

7. Are there any special conditions desired by the neighborhood?  Yes  No

Explain. \_\_\_\_\_

8. Business Description, including hours of operation: RESTAURANT specializing in sandwiches  
11am - close

9. Do you plan to have live entertainment?  No  Yes—What kind? Acoustical music infrequently

10. Detailed written description of building, including overall dimensions, seating arrangements, capacity, bar size and all areas where alcohol beverages are to be sold and stored. **The licensed premise described below shall not be expanded or changed without the approval of the Common Council.**

Please see last page of document

\_\_\_\_\_

\_\_\_\_\_

11. Are any living quarters directly or indirectly accessible and under control of the applicant?  Yes  No  
 Please note that alcohol may be sold and stored only on the licensed premise, not in living quarters.

12. Describe existing parking and how parking lot is to be monitored. No parking

\_\_\_\_\_

13. Describe your management experience, staffing levels, duties and employee training.

Current owners/managers of existing restaurant. We will be keeping our current employees (26) so there will be little training needed.

14. Identify the **registered agent** for your Corporation or LLC. This is your corporation's agent for service of process, notice or demand required or permitted by law to be served on the corporation.

Henry Aschauer 117 W. Dayton Apt 1  
 Name Address

LIC1B-2012-00523

15. Utilizing your market research, who would you project your target market to be?

Students, young professionals, professionals, professors

16. What age range would you hope to attract to your establishment? 18-70

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

Already established

18. Are you operating under a lease or franchise agreement?  Yes (attach a copy)  No

19. Owner of building where establishment is located: Georg Paraskevoulakas

Address of Owner: Middleton, 53582 Phone Number 608 233 1967

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  No

21. List the Directors of your Corporation/LLC

<u>Douglas Hamaker</u>	_____	_____
Name	Address	
<u>Henry Aschauer</u>	_____	_____
Name	Address	
<u>Donald Hamaker</u>	_____	<u>Portland, OR</u>
Name	Address	

22. List the Stockholders of your Corporation/LLC

<u>Doug Hamaker</u>	_____	<u>33</u>
Name	Address	% of Ownership
<u>Henry Aschauer</u>	_____	<u>33</u>
Name	Address	% of Ownership
<u>Donald Hamaker</u>	_____	<u>33</u>
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? \_\_\_\_\_

Breakfast  Lunch  Dinner

25. 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? 11 - close

27. What hours, if any, will food service not 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? 10  
During what hours do you anticipate they will be on duty? 11am - 10pm
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? 16  
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?  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?  
60-70%
39. If your business plan includes an advertising budget, what percentage of your advertising budget do you anticipate will be related to food? 100% advertising towards food  
What percentage of your advertising budget do you anticipate will be drink related? 0
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
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42. What is your estimated capacity? 100

43. Pursuant to Chapter 38.02 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	62.5 %
Gross Receipts from Food and Non-Alcoholic Beverages	37.5 %
Gross Receipts from Other	%
<b>Total Gross Receipts</b>	<b>100%</b>

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.

**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 24 day of June, 2013



(Clerk/Notary Public)

My commission expires 6-29-2014

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

## LEASE AGREEMENT

This Lease Agreement ("Lease") dated this \_\_\_\_ day of May, 2013 is entered into between 552 State Street, LLC (hereinafter referred to as "Landlord") and Matterhorn Ventures Group, LLC, a Wisconsin limited liability company (hereinafter referred to as "Tenant").

In consideration of the promises contained in this Lease, the parties agree as follows:

### SECTION ONE DEMISE, DESCRIPTION, AND USE OF PREMISES

A. **Demise and Description.** Landlord leases to Tenant and Tenant leases from Landlord, under the terms provided in this Lease, the space identified below in the building located at 558 State Street, Madison, Wisconsin (the "Building"):

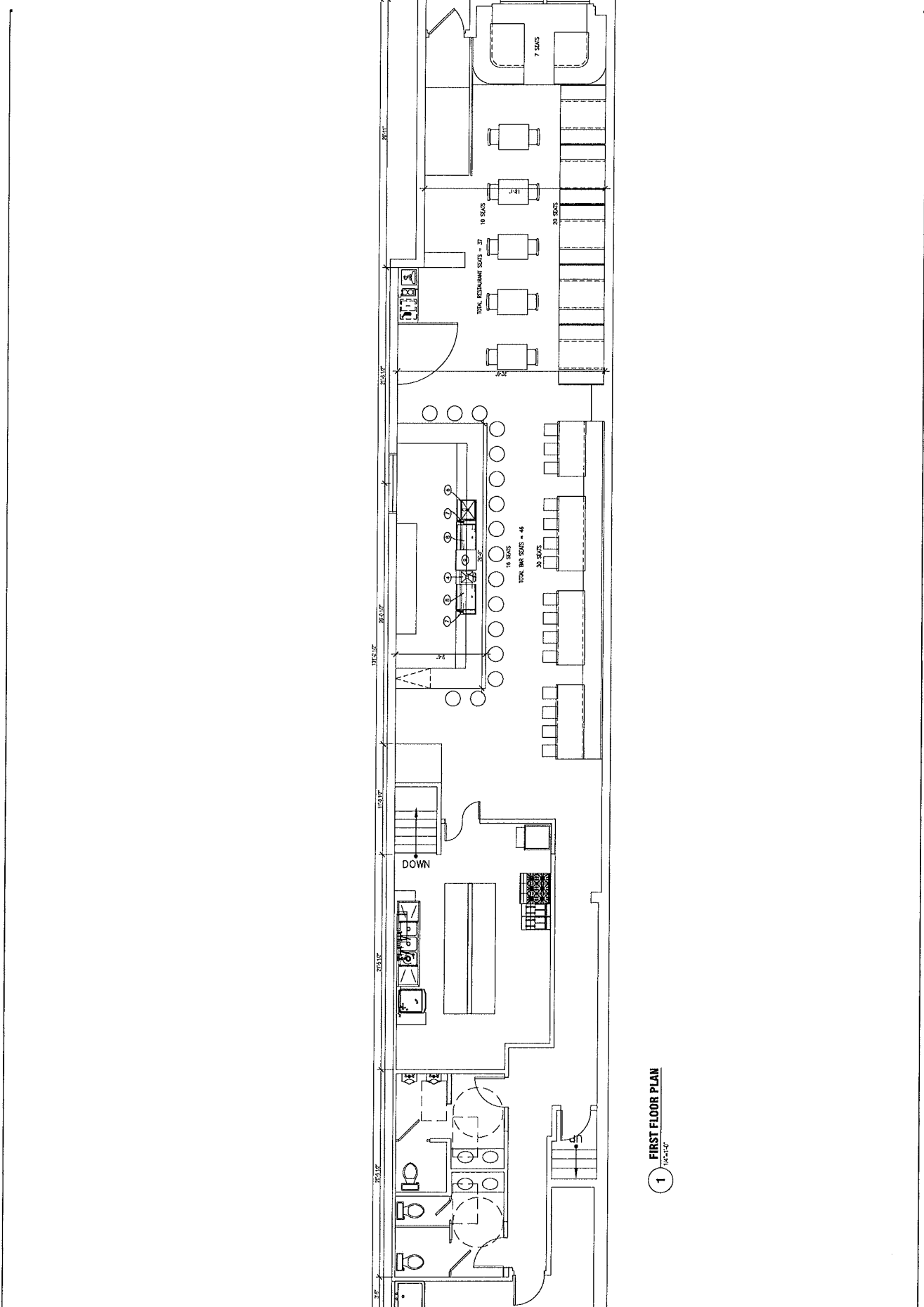
The "Premises" includes (a) the street level of the Building consisting of approximately 2,600 square feet as shown on the floor plan attached hereto as Exhibit A and incorporated herein by this reference (the "First Floor Space"); and (b) the basement of the Building consisting of approximately 1,800 square feet and depicted on the floor plan attached hereto as Exhibit B and incorporated herein by this reference (the "Basement Space").

Tenant warrants and represents that it has inspected the Premises, and that it is relying solely on its own inspection concerning the condition of the Premises. Tenant hereby accepts the Premises **AS IS**, and acknowledges that the Premises does not include any allowance for alterations, improvements or additions or any obligation for Landlord to perform any alterations, improvements or additions to the Premises.

B. **Use of Premises and Common Areas.** Tenant shall operate its business in and on the Premises during the Term (as defined below) as a restaurant, and shall not use the Premises for any other purposes without Landlord's advance written consent. Tenant and its agents, employees and invitees have the nonexclusive right with others designated by Landlord, and on such terms as specified by Landlord, to the use of the common areas in the Building. Tenant acknowledges that there is currently no allowed parking on the common area or servicing the Premises. Landlord may change and perform construction and other improvements on the common areas, change the Building, add dividers or other structures, and make other changes, construction, and improvements that do not materially interfere with access to and visibility of the Premises.

FIRST FLOOR PLAN  
OPTION 01

THE ROAST  
TENANT ALTERATION  
658 STATE STREET  
MADISON, WI



1 FIRST FLOOR PLAN  
1/16/14