

Streatery Extension of Premises

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[License number | Clicense number | Cli

(Agenda Item Number)	
(Legistar file number)	- 572
(License number)	
(Alder District #) (Police Sector) Office Use Only	

Class A: ☐ Beer, ☐ Liquor, ☐ Cider

Class B: ☐ Beer, ☐ Liquor,

☐ Class C Wine

City of Madison Clerk 210 MLK Jr Blvd, Room 103 Madison, WI 53703 licensing@cityofmadison.com 608-266-4601

Streatery extension of premises is available for existing licensed premises only. Extensions will not be granted for vertical drinking or beer garden additions. Application must be submitted to the Clerk's office. Staff will review the application and if it is complete and approved by Zoning and/or the street vending coordinator, provisionally approve and forward to the Alcohol License Review Committee for final approval recommendation. Any licensed establishment applying to extend their premises onto City property must provide a certificate of insurance for liquor liability including a separate additional insured endorsement naming the City of Madison with this application.

insured endorsement namino the City of Madison with this addition.
Are you requesting this temporary extension of licensed premises, in compliance with Emergency Order Resolution Legistar #60695 (Madison Streatery Program), adopted by the Common Council on June 16, 2020?: Yes No
Required detailed floor plans of extension area included : X Yes
Required approval of expanded eating area obtained from Street Vending Coordinator or Zoning Administrator included: X Yes, date approved: 7-14-20
Street Occupancy Permit obtained from Traffic Engineering: χ Yes \Box No \Box N/A
Does lease/deed cover area request for temporary extension?: X Yes
Licensed Premises Information
This application modifies existing alcohol license number: \(\begin{align*} \begin{align*} \begi
Business dba Name: SCONNIEBAR
Licensed Address: 1431 REGENT ST
Liquor/Beer Agent Name: Ketty Tokkis ANU - THOMAS VAN WIE
% Alcohol,% Food,% Other Alder, District #: 13 Police Sector;
Corporate Information
Business Legal Name (as on WI State Sellers Permit):
Business Mailing Address: 1421 REGENT ST
Business Contact Name, Position: KELLY TORDAN, PARTNER
Business Phone: (608) 251-6375 Business Email: Toloransistation Givan. -Continue on Back-

Extension Details		
Current Capacity (indoor): 160	Current Capacity (outdoor Proposed Capacity (outdoor	
Description of Proposed Changes:C	SEE ATTACHED .	PEAN
그는 일이 발표했다. 그는 그 사용으로 그리고 있다. 발표를 보고 있다.		
Authorized Signature of Agent or Establishment Ow		<u>20</u>
 ☐ Floor Plans ☐ Copy of approval from Street Vending, ☐ Copy of Street Occupancy Permit inclu ☐ Letter from landlord/property owner at Certificate of Insurance for liquor liabil 	/Zoning ded <i>if applicable</i> uthorizing temporary extension of lea	ase area if applicable
Upon Application Submission, the Cle	k's Office issued to the application	on:
Orange sign	rd	
"License Renewals & Changes" brochur	e with next steps issued	