

LIC 4B-2014-00847
35352



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

Section A – Applicant

1. 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.

2. This application is for the license period ending June 30, 2015 _____.
3. 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.

Robinia LLC

4. Trade Name (doing business as) Robinia Courtyard
5. Address to be licensed 829 East Washington Avenue, Madison, WI 53703
6. Mailing address 829 East Washington Avenue, Madison, WI 53703
7. Anticipated opening date October 15, 2014
8. Is the applicant an employee or agent of, or acting of behalf of anyone except the applicant named in question 2?
 No Yes (explain) _____
9. Does another alcohol beverage licensee or wholesale permittee have interest in this business?
 No Yes (explain) _____

Section B—Premises

10. 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.

The indoor space will be comprised of three areas, each with separate look and feel. All spaces will serve alcohol at separate bars as well as areas dedicated to table service. There will be outdoor seating in a private, enclosed courtyard where

alcohol will be served.

A-6 (Rummel)
P-408

11. Attach a floor plan, no larger than 8 ½ by 14, showing the space described above.
12. Applicants for on-premises consumption: list estimated capacity 370
13. Describe existing parking and how parking lot is to be monitored.

There is no existing and no planned parking onsite for this establishment. There will be bike stalls for no less than 5% of capacity.

14. Was this premises licensed for the sale of liquor or beer during the past license year?
 No Yes, license issued to _____ (name of licensee)
15. Attach copy of lease. (Lease forthcoming)

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 Brian Haltinner
17. City, state in which agent resides Madison, WI
18. How long has the agent continuously resided in the State of Wisconsin? 50 years
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 1996
21. State and date of registration of corporation, nonprofit organization, or LLC.
Wisconsin 02/03/2014

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
Member	Jonathan T. Reske	Madison, WI
Member	Sarah Kinser	Madison, WI
Member	Brian Haltinner	Madison, WI
Member	Kyle Johnson	Madison, WI
Member	Gwen Johnson	Madison, WI
Member	Lucas Balamuth	Madison, 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.

FOURCAP LLC

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) Brian Haltinner - Maduro (Madison, WI)

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 _____

27. Business description Robinia LLC will be comprised of three spaces: a full service-restaurant area, a wine and tapas area, and a coffee shop area serving breakfast and dinner.

28. Hours of operation 6:30am - Bar Time

29. Describe your management experience Brian Haltinner has been owner and manager of Maduro in Madison, WI since 1997 co-owner of Osteria Papavero from 2006-2013, co-owner and general manager of Cocoliquot from 2005-2008 and co-owner and general manager of The Opera House from 1994-2000. All located in Madison, WI.

30. List names of managers below, along with city and state of residence.
Brian Haltinner - Madison, WI Sarah Kinser - Madison, WI
Lucas Balamuth - Madison, WI Laura Jones - Madison, WI
Kyle Johnson - Madison, WI Gwen Johnson - Madison, WI

31. Describe staffing levels and staff duties at the proposed establishment A manager will always be on duty.
Servers, bartenders will all be responsible for service in their respective zones. Service will include appropriate monitoring of alcohol consumption
Support staff and management will be available to identify and mitigate issues before they develop.

32. Describe your employee training Aside from orientation going over a codified training manual, employees will shadow head employees in their respective divisions. All front-of-house employees will be trainees in responsible beverage service techniques

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

The target market will be people of all ages and incomes based on both time of day and activities in Tenney-Lapham/Marquette neighborhoods.

Aside from neighborhood residents, Robinia Courtyard plans to draw heavily from users of Breese-Stevens, Central Park, concert-goers at one of two neighboring venues.

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

The business will be primarily promoted through online social media, ownership's extensive neighborhood and service industry connections, support for local events in the area as well as limited existing print opportunities.

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 N/A

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? Music that will compliment a crowd of people dining or sharing a bottle of wine: jazz, folk, singer-songwriter. Chill DJs. This space will not serve as a formal music venue/dance club.

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? _____
 Breakfast Brunch Lunch Dinner

40. Submit a sample menu if applicable. What will be included on your operational menu?
 Appetizers Salads Soups Sandwiches Entrees Desserts
 Pizza Full Dinners

41. During what hours of operation do you plan to serve food? 6:30am - 1:00am

42. What hours, if any, will food service not be available? 1:00am - Bar time

43. Indicate any other product/service offered. _____

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

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

46. How many wait staff do you anticipate will be employed at your establishment? 15
During what hours do you anticipate they will be on duty? 10am - Bar time

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? 30
 How many bartenders do you anticipate having work at one time on a busy night? 7
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 320
51. What type of cooking equipment will you have?
 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? 15%
54. If your business plan includes an advertising budget:
 What percentage of your advertising budget do you anticipate will be related to food? 75%
 What percentage of your advertising budget do you anticipate will be drink related? 25%
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:
40% % Alcohol 60% % Food _____ % Other (Estimate)
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

- 65. I understand we must file a Special Occupational Tax return (TTB form 5630.5) before beginning business. [phone 1-800-937-8864] No Yes
- 66. I 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 Yes
- 67. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor?
 No Yes

Section G—Information for Clerk's Office

68. State Seller's Permit 4 5 6 - 1 0 2 8 3 0 0 6 2 1 - 0 2

69. Federal Employer Identification Number 61-1729784

70. Who may we contact between 8 a.m. and 4:30 p.m. regarding this license?

Contact person Jonathan T. Reske

E-mail address jon.reske@FourcapRE.com

Phone 608-698-8174 Preferred language English

71. Corporate attorney, if applicable: Name _____

Phone _____ E-mail _____

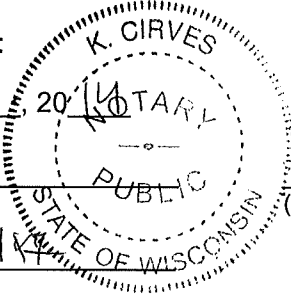
Read carefully before signing in front of a notary: Under penalty provided by law, the applicant states that the above information has been truthfully completed to the best of the knowledge of the signer. Signer agrees to operate the business according to law, and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. Lack of access to any portion of 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:

this 12 day of Aug, 2014

K. Cirves

(Clerk/Notary Public)



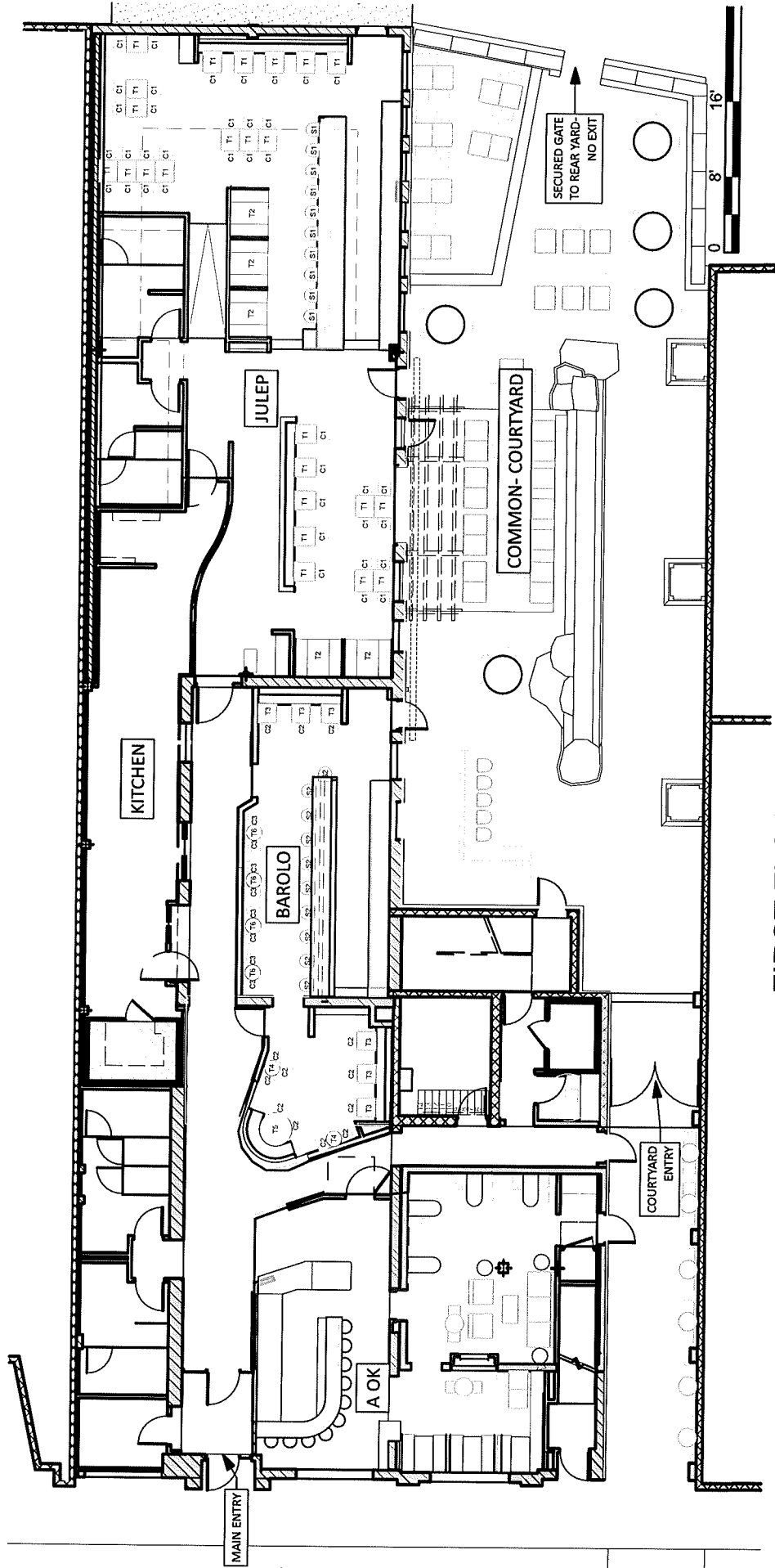
Jonathan T. Reske

(Officer of Corporation/Member of LLC/Partner/Sole Proprietor)

My commission expires 8/29/14

Clerk's Office checklist for complete applications		
<input type="checkbox"/> Orange sign <input checked="" type="checkbox"/> WI Seller's Permit Certificate (matching articles of incorporation) <input checked="" type="checkbox"/> FEIN <input checked="" type="checkbox"/> Notarized application <input type="checkbox"/> Written description of premises	<input checked="" type="checkbox"/> Background investigation form(s) <i>n/a</i> <input type="checkbox"/> Form for surrender of previous license <input checked="" type="checkbox"/> *Articles of Incorporation <input checked="" 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 type="checkbox"/> Business Plan
Date complete application filed with Clerk's Office _____		
Date of ALRC meeting _____ Date license granted by Common Council _____		
Date provisional issued _____ Date license issued _____ License number _____		

829 E. Washington-Restaurant Remodel
 First Floor Plan



1 FIRST FLOOR PLAN
 SCALE: 1/16" = 1'-0"

EAST WASHINGTON AVE.