



City of Madison Liquor/Beer License Renewal

→ Clerk's Office Liaison: Maggie, mmcclain@cityofmadison.com

Deadline: In Clerk's Office by 4 p.m. Monday, April 15 or postmarked by April 15

On-Premises Consumption:	<input type="checkbox"/> Class B Beer	<input type="checkbox"/> Class B Liquor	<input type="checkbox"/> Class C Wine
Off-Premises Consumption:	<input checked="" type="checkbox"/> Class A Beer	<input type="checkbox"/> Class A Liquor	<input type="checkbox"/> Class A Cider

- Name of Sole Proprietor, Partnership, Corporation or LLC
Capitol Petroleum LLC
- Trade Name (doing business as) CP Mart North
- Licensed Address 1101 N Sherman Ave Madison WI 53704
- State Seller's Permit 4 5 6 - 1 0 2 0 0 5 9 7 5 0 - 0 3
- Federal Employer Identification Number (FEIN) 46-0486963
- Do you understand that you must purchase alcohol beverages only from Wisconsin wholesalers, breweries, and brewpubs? Yes No
- Do you understand that alcohol invoices must be kept at the licensed premises for two years from the date of invoice and made available for inspection by law enforcement? Yes No
- Since filing of last application, has the named licensee or any other person affiliated with this license (partner, member, officer, director, manager or liquor/beer agent) been **convicted** of any **offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, Wisconsin laws, any laws of other states, or ordinances of any county or municipality?
 Yes (If yes, complete convictions supplement) No
- Are any **charges** for any **offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license (partner, member, officer, director, manager or liquor/beer agent)?
 Yes (If yes, complete pending charges supplement) No
- Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee?
 Yes No Taxes are not filed yet, but will include this profit/loss when filed
- Areas where alcohol beverages are sold/permitted, including outdoor seating, if applicable.
in store at counter
- Areas where alcoholic beverages are stored display area & coolers
- Class B establishments:** estimated percentage of gross sales for liquor/beer vs. food business
_____ % Alcohol _____ % Food _____ % Other NR

14. **Class B establishments** Please list your lowest approved capacities for each category that apply:

Indoor: _____ Outdoor: _____ Other (Type and #): na
(Such as Badger Football, upper level, etc.)

15. **Entertainment:**

- (a) Do you offer or allow live music performances (excluding solo acoustic)? na Yes No
- (b) Do you have a designated dance floor area? Yes No
- (c) Do you offer or allow the use of a disc jockey? Yes No

If you answered yes to any of the above questions, please complete an Entertainment License application.

16. **Establishments that currently hold and 21+ or 18+ Entertainment Licenses:**

Please also complete the Entertainment License Renewal Form and submit with this form. na

17. **Corporation/LLC:** Name of Liquor/Beer Agent Gohar Shahzad

18. **Corporation/LLC:** City and state in which Agent resides Verona WI

19. **Corporation/LLC:** Is this Liquor/Beer Agent listed on your current license?

- Yes No (If no, file Change of Agent application)

20. **Corporation/LLC:** List names of all officers/members, along with city and state of residence.

Gohar Shahzad, Verona WI

21. List names of managers, along with their city and state of residence.

Gohar Shahzad, Verona WI

22. Robin Baldah 608-442-0000
Who to contact 8 a.m. - 4:30 p.m. regarding problems with application Phone Number

capital.petroleum@gmail.com
E-mail Address

23. Does the name on your Wisconsin Seller's Permit exactly match the name on your liquor/beer license?

- Yes No

24. Are you indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? Yes No

25. Preferred language for correspondence from the City Clerk's Office english

X Gohar Shahzad 04-01-19
Signature of Officer/Member/Partner/Sole Proprietor Date



Clerk's Office: Date Filed/Postmarked _____ Filed Timely Filed Late (\$250 Late Filing Fee)