

Class A: ☐ Beer, ☐ Liquor, ☐ Cider

☐ Class C Wine

Class B: 

Beer, 

Liquor,

## Liquor/Beer License Application

City of Madison Clerk 210 MLK Jr Blvd, Room 103 Madison, WI 53703

licensing@cityofmadison.com 608-266-4601

(Agenda Item Num	ber)
(Legistar file numbe	er)
LICLIB-2024-	00095
(License number)	
17	632
(Alder District #)	(Police Sector)
Office U	Jse Only

<b>Sec</b> 1.	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.  Triple Shift Entertainment, LLC
2.	Trade Name (doing business as)Bowl-A-Vard
3.	Address to be licensed 2121 E. Springs Dr., Madison, WI 53704
4.	Mailing address563 Bielenberg Dr., Suite 115, Woodbury, MN 55125
5.	Anticipated opening date4/1/2024
6.	Is the applicant an employee or agent of, or acting of behalf of anyone except the applicant named in question 1?
	☑ No ☐ Yes (explain)

## **Section B—Premises**

business?

⊠ No

7.

8. 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 receipts. Alcohol beverages may be sold and stored only on the premises as approved by Common Council and described on license.

Does another alcohol beverage licensee or wholesale permitee have interest in this

☐ Yes (explain)

Premise - Block masonry building with 40 bowling lanes, two bars inside, one patio bar outside near volleyball courts, a full-sized kitchen, 2 meeting rooms, 3 offices, a pro shop, parking lot with temporary tented area for events, and a small basement. Alcohol stored in base ment.

9.	Applicants to	Applicants for on-premises consumption only. Estimated capacity (patrons and employees):				
	Indoor:	940	Outdoor:	677		
10.	Describe exi	sting parkin	g and how parking	lot is to be monitored.		
	Parking	lot is monitored b	by employees and bounce	rs.		
11.	Was this pre	mises licens	sed for the sale of I	iquor or beer during the pas	st license year?	
	□ No ⊠	Yes, license	issued toD.B., Inc	). -	(name of licensee)	
This		lies to corpo		organizations, and Limited L ip to Section D.	iability Companies	
12.	Name of liq	uor license a	agentDonald A. Bu	ssan	MANAGEMENT AND ADMINISTRATION OF THE PROPERTY	
13.	City, state i	n which age	nt resides <u><sup>Sun Prai</sup></u>	rie, Wisconsin		
14.	How long ha	as the agent	continuously resid	led in the State of Wisconsir	1? <del>69 years</del>	
15.	Has the liqu	or license a	gent completed the	e responsible beverage serve	er training course?	
	e a compresa de la c	and the contract of the contract of the contract of	talana filo akan ang ang ang ang ang ang ang ang ang a	eeting 🏻 Yes, date comp	contract the contract.	
_		•	•	es and holds Operator's Lice		
16.	State and d	ate of regist 05/2018	ration of corporation	on, nonprofit organization, o	r LLC.	
17.				corporation or the member	s of your LLC.	
	Title	ackground cl Nan		h director/member.  City and State of Residence	20	
	President		pert James Spigner	Dallas, TX	<u>56</u>	
18.	notice or der necessarily t	nand require		.C. This is your agent for sen law to be served on the cor		
10	Is applicant	a cubcidiary	of any other corne	eration or LLC2		
19.		•	of any other corpo			
20					agent IIC any	
		any manage		ctor, any stockholder, liquor in any other alcohol bevera		
				r the LLC is currently applyi	ng for a "Class B"	
or lic	cense at a sir	nilar facility	in Sun Prairie, WI	(Prairie Lanes).		

## \* Other licenses held by Triple shift Entertainment, LLC

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Section D—Business Plan 21. What type of establishment is contemplated?							
	☐ Tavern ☐ Nightclub ☐ Restaurant ☐ Liquor Store ☐ Grocery Store						
	☐ Convenie	nce Store wit	thout gas pur	mps $\square$ Conv	enience Stor	e with gas pu	ımps
	☑ Other Boy	wling Alley/Sports	Bar with volleyball	and entertainment.	Changing ownersh	ip of existing busi	ness with no
22.	changes to offerings or layout of premises.  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						
23.	Hours of ope	ration: pleas	e enter openi	ing and closing	times in the	table below.	
	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
	9am _ 12am	9am _12am	9am _12am	9am _ 12am	9am _12am	9am _ 12am	9am _ 12am
				when food ser			
	9am 11am	9am 11am 11pm 12am	9am 11am 11pm - 12am	9am 11am 11pm 12am	9am 11am - 11pm 12am	9am 11am -	9am 11am   -
		Tipin izani	Tipili Izani	Tipili izani	Tipin izani		
This (cor 24.	ection E—Consumption on Premises his section applies to Class B and Class C applicants only. Class A license applicants consumption off premises) may skip to Section F.  H. Indicate any other product/service offered. Bowling, pro shop, arcade and gaming machines, laser tag, volleybal leagues, live music and entertainment  S. All restaurants and taverns serving alcohol must substantiate their gross receipts for food and alcohol beverage sales broken down by percentage. (Note: Non-alcoholic drinks are classified as "Food.") New establishments estimate percentages:  24 % Alcohol % Food % Other						
	If applicable, describe "Other":Bowling, arcade, miscellaneous sales						
	Do you have written records to document the percentages shown? $\Box$ No $oxdim \Box$ Yes You may be required to submit documentation verifying the percentages indicated.						
26.	6. Do you plan to have live entertainment?   No  Yes—what kind?						
	Live	e music with a des	ignated dance floo	or			
				music (except ntertainment L		), a DJ, or a (	designated
<b>Sec</b> 27.	ection F—Required Contacts and Filings 7. I understand that liquor/beer license renewal applications are due April 15 of every year, regardless of when license was initially granted.   No  Yes						
28.	. I understand that I am required to host an information session at least one week before the ALRC meeting. $\Box$ No $$ Yes						
29.	I agree to conthe Alderpers			this location to sion. 🔲 No 🛮	discuss my a	pplication an	ıd to invite

30.	I agree to contact the Police Department District Captain for this location prior to the ALRC meeting. $\square$ No $\square$ Yes
31.	I agree to contact the Deputy Clerk prior to the ALRC meeting. $\square$ No $\square$ Yes
32.	I agree to contact the neighborhood association representative prior to the ALRC meeting. $\hfill\square$ No $\hfill$ Yes
33.	I intend to operate under the alcohol license within 180 days of the Common Council granting this license. The license shall be considered surrendered if not issued within 180 days of being granted. $\square$ No $\square$ Yes
34.	I understand we must file a Special Occupational Tax return (TTB form 5630.5) before beginning business. [phone 1-800-937-8864] $\square$ No $\square$ Yes
35.	I understand a Wisconsin Seller's Permit must be applied for and issued in the same name as that shown in question 1, above. [phone 608-266-2776] $\ \square$ No $\ \square$ Yes
36.	Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? $\hfill\square$ No $\hfill\square$ Yes
Sec	tion G—Information for Clerk's Office
37.	This application is for the license period ending June 30, 20 24.
38.	State Seller's Permit <u>4 5 6 - 1 0 3 0 8 7 2 8 4 6 - 0 4</u>
39.	Federal Employer Identification Number 83-2223600
40.	Who may we contact between 8 a.m. and 4:30 p.m. regarding this license?
	Contact personAmy Anderson
	Business phone 651-578-3870 Business e-mail address amy anderson@tripleshift.com
	Preferred languageEnglish
	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 escara "pa" en la calicitud/aplicación y ustad sí requiere un/a intérprete al
	$\square$ 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.
11.	Corporate attorney, if applicable: Name
	Phone 612-604-2581 E-mail christians@mdh-law.com

<b>NOTICE:</b> Completed application are due by Monday) to get on the agenda for the proce <b>must</b> be accompanied by the following item	noon of the third Monday (fourth, if the Clerk's offic eding months Alcohol License Review Committee. A s:	e is closed on the third completed application			
<ul> <li>         \omega Copy of State Seller's Permit (Not Business Tax Registration Certificate),          \omega Appointment of Agent (if Corp/LLC),          \omega Member background Investigation forms,          \omega Articles of Incorporation (if Corp/LLC),          \omega Floor Plans,          \omega Acopy of Lease,          \omega Business Plan, and          \omega Sample Menu (if applying for Class B license)     </li> </ul>					
If required items are missing, the application Office until all requirements are submitted.	n will not be considered complete and will not be acc No exceptions are made.	cepted by the Clerk's			
been truthfully completed to the best of the to law, and that the rights and responsibilities	nalty provided by law, the applicant states that the a knowledge of the signer. Signer agrees to operate t es conferred by the license(s), if granted, will not be mises during inspection will be deemed a refusal to for revocation of this license.	he business according assigned to another.			
Penalty for materially false application information: Any person who knowingly provides materially false information on this application may be required to forfelt not more than \$1,000.					
Pet plyin-	Feb 16, 2024				
(Officer of Corporation/Member of LLC/Partner/Se	ole Proprietor) (Date)				
Clerk's Office checklist for complete a	pplications				
<ul> <li>□ WI Seller's Permit Certificate         (matching articles of         incorporation)</li> <li>□ FEIN</li> <li>□ Written description of premises</li> </ul>	<ul> <li>□ Background investigation form(s)</li> <li>□ Form for surrender of previous license</li> <li>□ *Articles of Incorporation</li> <li>□ *Appointment of Agent</li> <li>* Corporation/LLC only</li> </ul>	☐ Floor Plans ☐ Lease ☐ Business Plan ☐ **Sample Menu  ** Class B only			
A If a bis a Culturianian that	Nowk's Office issued to the application:				
•	Clerk's Office issued to the application:				
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	in the City of Madison" brochure with contact in				
Date complete application filed with Clerk's Office					
Date of ALRC meeting Date license granted by Common Council  Date license issued					
Date provisional issued Date	re urense issuen	*			