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RETAIL LICENSE TRANSFER - PREMISES TO PREMISES  
Wisconsin Department of Revenue

FEE \$ 30

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

Madison, Wisconsin  
May 11, 20 07

To the governing body of the (City) (Village) (Town) of Madison  
County of Dane Wisconsin.

The undersigned hereby applies for a transfer of Class A license from  
4921 Commercial Ave (present location) to 4915 Commercial Ave (proposed location)  
on or about 6/25/07 (date)

1. APPLICANT: (print name and address plainly)
  - (a) Full name of applicant Arcides Portillo Cabrera
  - (b) Address 9 Birchwood Cir, Madison, WI 53704
  
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 4915 Commercial Ave
  - (b) Trade name of establishment La Zacatecana LLC
  - (c) Physical description of building, buildings and/or land area comprising licensed premises.  
2504 square feet of commercial space in the Prentice Park Commons located on Commercial Ave.
  - (d) Legal description (omit if street address is given above.) \_\_\_\_\_
  - (e) Is any other business conducted on same premises?  Yes  No If so, what?  
Food and Drink, Grocery and Deli, Taqueria
  - (f) Was this location licensed for beer or liquor during the past year?  Yes  No
  - (g) Give name and address of previous licensee. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
  - (h) Will the previous licensee surrender its license?  Yes  No

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

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

*[Handwritten Signature]*  
(Signature)

State of Wisconsin

County of

} ss.

(I) (We), Arcides Portillo Cabrera and \_\_\_\_\_  
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.

*[Handwritten Signature]*

Subscribed and sworn to before me this

11th day of May, 20 07

Alex Fernandez

Notary Public, Dane County, Wis.

My Commission Expires 10/24/10



CLASS OF BUSINESS

Class A Beer

Name Arcides Portillo Cabrera

Original Location 4921 Commercial Ave  
Ward 8

Proposed Location 4915 Commercial Ave  
Ward 8

License No. # 77836

Treasurer's Receipt No. paid 6/4/07

Filed 6/4/07

Submitted to Council or Board

Approved \_\_\_\_\_ Date \_\_\_\_\_

Denied \_\_\_\_\_ Date \_\_\_\_\_

# City of Madison Liquor/Beer Original Supplemental Form

## Office Use Only

- |  |  |
|--|--|
| <input type="checkbox"/> Seller's Permit Number<br><input type="checkbox"/> Federal Employer Identification Number<br><input type="checkbox"/> Notarized Original Application Form (AT-106)<br><input type="checkbox"/> Notarized Supplemental Form<br><input type="checkbox"/> Description of Licensed Premise<br><input type="checkbox"/> Notarized Auxiliary Questionnaire(s) (AT-103)<br><input type="checkbox"/> Background Investigation Form(s)<br><input type="checkbox"/> Floor Plans | <input type="checkbox"/> Lease<br><input type="checkbox"/> Notarized Transfer of Ownership Letter<br><input type="checkbox"/> *Schedule of Appointment of Agent (AT-104)<br><input type="checkbox"/> *Notarized Agent Appointment/Acceptance Form<br><input type="checkbox"/> *Articles of Incorporation/ Organization<br><input type="checkbox"/> Sample Menu, if possible<br><input type="checkbox"/> Business Plan, if one exists<br>* Forms required of Corporation/LLC only |
|--|--|

- ✓ All applicants must provide an adequate premise plan that includes exterior and interior dimensions, position of stairs and all entrances and exits, normal and customary use of each room, placement of major appliances, furniture and large gaming tables, placement and dimensions of all bar(s), and graphic representation of the normal position of booths, bar stools, tables and chairs. **Premise plans must be no larger than 8 ½ x 14.**
- ✓ New structures must submit to Building Inspection two sets of plans, signed and sealed by a registered architect or engineer.
- ✓ **Applicant/partners/Liquor Agent must be enrolled in or have completed the Beverage Server Training course before appearing before the Alcohol License Review Committee.**

**Prior to your hearing before the Alcohol License Review Committee (ALRC), you must contact the Alderperson of the District in which you intend to do business, the representative of the appropriate neighborhood association (if any), the Madison Police Department, and the Alcohol Policy Coordinator.**

- Alderperson LAUYEN CHAYE can be reached at 608 266 4071 at the Common Council Office (266-4071), or via e-mail at [council@cityofmadison.com](mailto:council@cityofmadison.com).
- The name of the neighborhood association representative can be obtained by calling the Planning and Development Department at 266-4635 or online at [www.ci.madison.wi.us/neighborhoods/contacts.htm](http://www.ci.madison.wi.us/neighborhoods/contacts.htm).
- Police Department Central District Captain Mary Schauf (Sector 400) can be reached at 266-4316.
- Police Department East District Captain Jill Klubertanz (Sector 600) can be reached at 267-2100.
- Police Department North District Captain Richard Bach (Sector 500) can be reached at 245-3652.
- Police Department West District Captain Jay Lengfeld (Sectors 100-200) can be reached at 288-6152.
- Police Department South District Captain James Wheeler (Sector 300) can be reached at 267-8687.
- Alcohol Policy Coordinator Joel Plant can be reached at 264-9295.

1. 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

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

Explain \_\_\_\_\_

3. Name of Applicant/Partner/Corporation (LLC) La Zacatecana

4. Telephone Number: 608-240-0778, 608-347-6150

5. Address of Licensed Premise 4921 Commercial Ave

6. Anticipated opening date: 06/25/07

7. Mailing address if not opening immediately 9 Birchwood Cir, Madison, WI 53704

8. What type of establishment is contemplated?  Tavern  Nightclub  Restaurant  
 Liquor Store  Grocery Store  Convenience Store – Gas Pumps  Yes  No  
 Other Please explain \_\_\_\_\_

9. Business Description including hours of operation and if entertainment is part of your venue, what type:  
Grocery store/convenience store with deli and taco stand.  
7am - 10pm

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.**  
alcohol stored in cooler on right side upon entrance of store (3 door cooler) sold at cash register

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. Parking lot is part of  
Prentice Park commons and is monitored by Sara Investments Real Estate, LLC

13. Describe your management experience, staffing levels, duties and employee training.  
5 months managing La Zacatecana, 4 years as owner of Portillo Plaster, Inc.  
5 employees who will undergo supervised hands-on training for 1 month. Duties include working the cash register, inventory, serve tacos, and work the deli.

14. Identify the **registered agent** for your Corporation or LLC. This is not necessarily the same person as your liquor/beer agent. This is your corporation's agent for service of process, notice or demand required or permitted by law to be served on the corporation. Arcides Portillo Cabrera

Name  
9 Birchwood Cir Madison WI 53704  
Address City State Zip

15. Excluding pre-packaged snacks, how late will food be served? 9 pm

16. What type of food will you be serving, if any? Tacos, El Salvadorian cuisine

17. Indicate any other product/service offered: Groceries, Deli meats, Wire transfers

18. Describe your target market. Hispanic community

19. What is your estimated capacity? 40

20. Are you operating under a lease or franchise agreement?  Yes  No (If yes, attach a copy.)

21. Owner of building where establishment is located: Sara Investment Real Estate LLC  
Address of Owner: 1612 N. High Point Rd Ste 201 Phone Number 608-831-2212  
ext. 15

22. Individual or Partnership: Have individual/partners completed the Beverage Server Training Course?  Yes  No If Yes, indicate names: ARCIDES TONILLO CABRERA

**License cannot be issued until proof of Beverage Server Training completion is shown.**

23. Corporation/LLC: Will liquor/beer agent be a Wisconsin resident at the time of granting?  Yes  No

24. Corporation/LLC: Agent must disclose interest held in business: 100 %

25. Corporation/LLC: Has agent completed the Beverage Server Training Course?  Yes  No

**License cannot be issued until proof of Beverage Server Training completion is shown.**

26. Corporation/LLC: List Directors, Stockholders, and Managers below.

Director(s) Name	Home Address

Stockholder's Name	Address	Extent of Ownership%

Manager's Name	Address	Business Phone	Home Phone

27. 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

28. Pursuant to Chapter 23 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.**

Calendar/fiscal year:  January 1 – December 31  July 1 – June 30

Percent Gross Receipts from Alcohol Beverages	%
Percent Gross Receipts from Food	%
Percent Gross Receipts from Other	%
<b>Total Gross Receipts</b>	<b>100 %</b>

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.**

29. What type of establishment are you? (Check all that apply)  Tavern  Restaurant  Nightclub

Other Please explain: Grocery/Convenience Store

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

31. Will your establishment be a member of the Wisconsin Restaurant Association?  Yes  No

32. How many wait staff will be employed at the establishment? 1

33. What hours, if any, will food service not be available? 7-8am, 9-10pm

34. Describe how you plan to advertise/promote your business What products will you be advertising?  
Radio commercials - advertising the grocery store in general

**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 signers. Signers agree 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. (Individual applicants and each member of a partnership must sign; corporate officer(s), members/managers of Limited Liability Companies must sign.) 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:

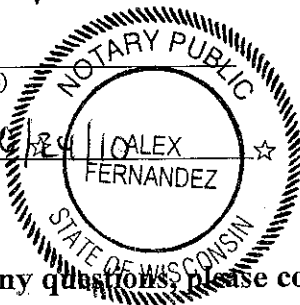
this 11th day of May, 2007

[Signature]  
(Officer of Corporation/Member/Manager of LLC/Partner/Individual)

[Signature]  
(Clerk/Notary Public)

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

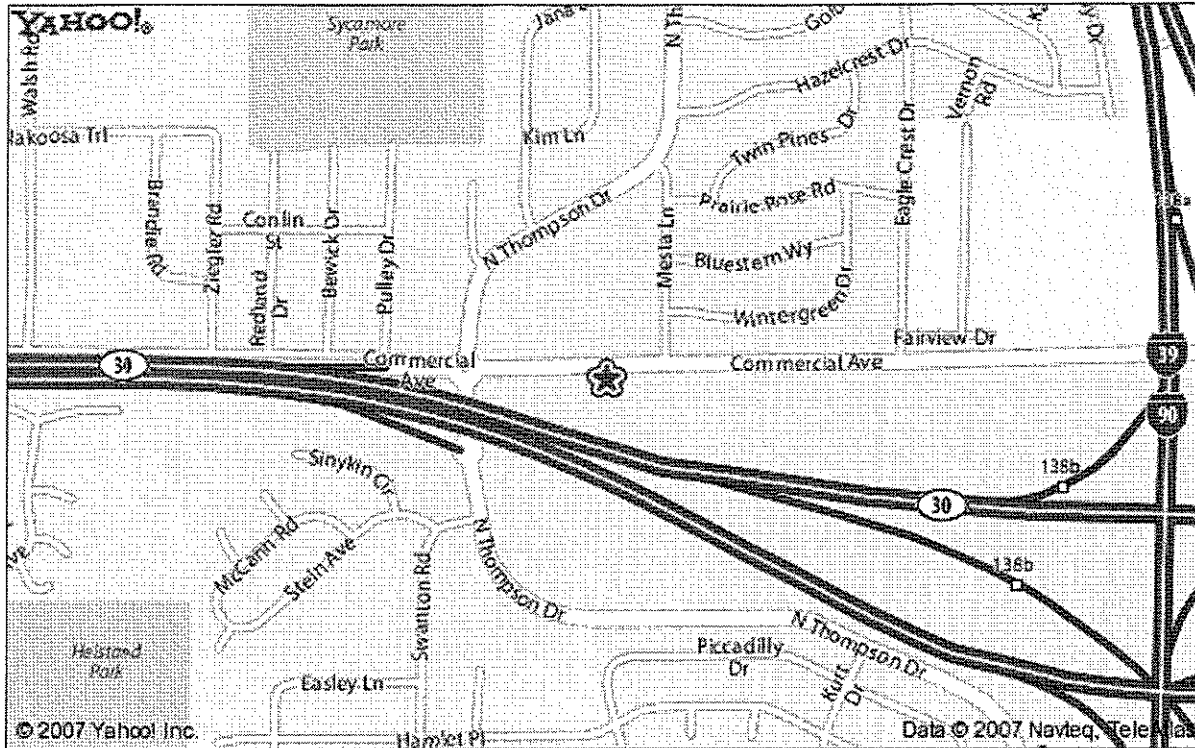
My commission expires 6/24/10  
102410



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

**If you have any questions, please contact the City Clerk's Office at (608) 266-4601.**

Yahoo! Maps - 4915 COMMERCIAL AVE,  
Madison, WI 53704, US



When using any driving directions or map, it's a good idea to do a reality check and make sure the road still exists, watch out for construction, and follow all traffic safety precautions. This is only to be used as an aid in planning.

