

15. Utilizing your market research, who would you project your target market to be?

NA

16. What age range would you hope to attract to your establishment? 30-50

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

NA

18. Are you operating under a lease or franchise agreement? Yes (attach a copy) No

19. Owner of building where establishment is located: _____

Address of Owner: _____ Phone Number _____

20. 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

21. List the Directors of your Corporation/LLC

Hawk Schendel 4613 Maher Ave.
Name Address

Chris Thomas
Name Address

Name Address

22. List the Stockholders of your Corporation/LLC

Name Address % of Ownership

Name Address % of Ownership

Name Address % of Ownership

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

Other Please Explain _____

24. What type of food will you be serving, if any? NA

Breakfast Lunch Dinner

25. Please submit a sample menu with your application, if possible. What might eventually be included on your operational menu when you open? Appetizers Salads Soups Sandwiches Entrees

Desserts Pizza Full Dinners

26. During what hours of your operation do you plan to serve food? NA

27. What hours, if any, will food service not be available? NA
28. Indicate any other product/service offered. NA
29. Will your establishment have a kitchen manager? Yes No
30. Will you have a kitchen support staff? Yes No
31. How many wait staff do you anticipate will be employed at your establishment? None
During what hours do you anticipate they will be on duty? NA
32. Do you plan to have hosts or hostesses seating customers? Yes No
33. Do your plans call for a full-service bar? Yes No
If yes, how many bar stools do you anticipate having at your bar? 14
How many bartenders do you anticipate you would have working at one time on a busy night? 2-3
34. Will there be a kitchen facility separate from the bar? Yes No
35. Will there be a separate and specific area for eating only? Yes No
If yes, what will be the seating capacity for that area? _____
36. What type of cooking equipment will you have? Stove Oven Fryers Grill Microwave
37. Will you have a walk-in cooler and/or freezer dedicated solely to the storage of food products? Yes No
38. What percentage of your overall payroll do you anticipate will be devoted to food operation salaries?
NA
39. If your business plan includes an advertising budget, what percentage of your advertising budget do you anticipate will be related to food? NA
What percentage of your advertising budget do you anticipate will be drink related? NA
40. Are you currently, or do you plan to become, a member of the Madison—Dane County Tavern League or the Tavern League of Wisconsin? Yes No
41. Are you currently, or do you plan to become, a member of the Wisconsin Restaurant Association or the National Restaurant Association? Yes No

42. What is your estimated capacity? 100

43. 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.


Gross Receipts from Alcoholic Beverages	90 %
Gross Receipts from Food and Non-Alcoholic Beverages	10 %
Gross Receipts from Other	%
Total Gross Receipts	100%

44. 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

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 signer. Signer agrees 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. 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 27 day of July, 2009



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



(Clerk/Notary Public)

My commission expires 5-6-2012

Appointment of New Liquor/Beer Agent

To be completed by Corporate Officer or Member of LLC

I, Hawk Schenkel, officer/member for The Garage W

(Corporation/LLC), doing business as The Garage, authorize and appoint
Hawk Schenkel (Name) as the liquor/beer agent for the premise

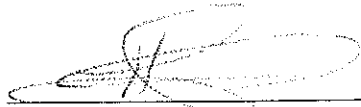
located at 1970 Atwood Ave

Subscribed and sworn to before me this

27 Day of July, 2009

Dennis J. Schmid
Notary Public, Dane County, Wisconsin

My Commission Expires 7/24/11



Signature of Officer/Member

To be completed by appointed Liquor/Beer Agent

I, Hawk Schenkel, appointed liquor/beer agent for
The Garage W (name of Corporation or LLC), being first duly sworn

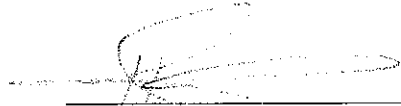
say I have vested in me, by properly authorized and executed written delegation, full authority and control of the premise described in the license of such corporation or limited liability company, and I am involved in the actual conduct of the business as an employee, or have a direct financial interest in the business of the licensee, therein relating to the intoxicating liquor/fermented malt beverage. The interest I have in the business is 50 %.

Subscribed and sworn to before me this

27 Day of July, 2009

Dennis J. Schmid
Notary Public, Dane County, Wisconsin

My Commission Expires 7/24/11



Signature of Agent

The appointed Liquor/Beer Agent must complete the other side of this form.