

Liquor/Beer License **Application**

(Agenda Item Number) (Legistar file number) LICLIB-2028-19391 (License number)

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

C	7	128
Alder L	District #)	
	Office	Use Only

Class A: ☐ Beer, ☐ Liquor, ☐ Cider

licensing@cityofmadison.com

	Class C Wine 608-266-4601
Se (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. Wisconsin LLC
2.	Trade Name (doing business as) Gobi Mongolian Grill & Hot Pot
3.	Address to be licensed 610 Junction Road # 101 Madison, WI 5371
4.	Mailing address 610 Junction Rd #101 Madison WI 53717
5.	Anticipated opening date05/08/2025 .
6. 7.	Is the applicant an employee or agent of, or acting of behalf of anyone except the applicant named in question 1? ☑ No ☐ Yes (explain) Does another alcohol beverage licensee or wholesale permitee have interest in this
Sec	business? No Yes (explain) Etion B—Premises 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. Dining room serving only, all alcohol beverages are stored in any / clean individual closet.

9.	Applicants for on-premises consumption only. Estimated capacity (patrons and employees):			
	Indoor: Outdoor:			
10.	Describe existing parking and how parking lot is to be monitored.			
	Plenty of ponking spots managed by landlord, Lokre Manyement.			
	Loyout's showed in floorplan.			
11.	Was this premises licensed for the sale of liquor or beer during the past license year?			
,	No			
This	tion C—Corporate Information section applies to corporations, nonprofit organizations, and Limited Liability Companies. Sole proprietorships and partnerships, skip to Section D.			
12.	Name of liquor license agent <u>Jun Chen</u>			
	City, state in which agent resides \underline{Vexona} , WL			
	. How long has the agent continuously resided in the State of Wisconsin?			
	. Has the liquor license agent completed the responsible beverage server training course?			
	☐ No, but will complete prior to ALRC meeting ☐ Yes, date completed <u>v4/v6/2024</u>			
16.	State and date of registration of corporation, nonprofit organization, or LLC.			
	WL Gobi Wisconsin LLC. 09/03/2024			
17.	. 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			
	Title Name City and State of Residence Owner Side Hugng Verona, W1			
	Owner Dalin Li Modison, WI			
18.	. 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.			
19.	Is applicant a subsidiary of any other corporation or LLC?			
	☑ No ☐ Yes (explain)			
20.	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) Palin Li applied for alcohol lisense at 515 State Street.			

Section D—Business Plan 21. What type of establishment is contemplated? ☐ Tavern ☐ Nightclub ☒ Restaurant ☐ Liquor Store ☐ Grocery Store							
	☐ Convenie	nce Store wit	:hout gas pur	mps 🏻 Conv	enience Store	e with gas pu	mps
	☐ Other		THIRAUWAL.				
22.	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? $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$						
23.	3. Hours of operation: please enter opening and closing times in the table below.						
	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
	11am- 9pm	Hant gpm	110m - 9 pm	ilam - 9pm	11am-9pm	11am-9:30 pm	11am - 9=30pn
	(Class B on	ly) Enter belo	w any hours	when food ser	vice will not b	e available, i	if applicable
	-		-	-	-	-	-
This (coi 24.	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:						
26.				t? 🖾 No 🗀			
	•			ntertainment Li	•	, a DJ, OF a u	esignateu
		that liquor/b	eer license re	lings enewal applicat granted. □ N		April 15 of ev	ery year,
28.	I understand ALRC meeting		-	t an informatio	n session at le	east one wee	k before the
29.			•	this location to	, ,	oplication and	d to invite

30.	I agree to contact the Police Department District Captain for this location prior to the ALRC meeting. \square No \bowtie 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 $\ \boxtimes$ 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 <u>≥ 6</u> .
38.	State Seller's Permit 4 5 6 - + 0 3 + 9 4 8 0 4 3 - 0 4
	Federal Employer Identification Number 99 - 4755051
40.	Who may we contact between 8 a.m. and 4:30 p.m. regarding this license?
	Contact person Jun Chen
	Business phone 608 - 820 - 1118 Business e-mail address gobiwisconsin a gmail. com
	Preferred language
	If needed, a qualified interpreter can be provided at no charge to you. Would you like an interpreter? ☑ Yes (language:
	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.
41.	Corporate attorney, if applicable: Name
	Phone F-mail

	noon of the third Monday (fourth, if the Clerk's officeding months Alcohol License Review Committee. As:	
Member background investigation forms,	ess Tax Registration Certificate), 🖄 Appointment o Articles of Incorporation (if Corp/LLC), 🔯 Floo Sample Menu (if applying for Class B license)	
If required items are missing, the application Office until all requirements are submitted. N	n will not be considered complete and will not be acolo 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 knowledge of the signer. Signer agrees to operate 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.	the business according e assigned to another.
Penalty for materially false application inform on this application may be required to forfeit	nation: Any person who knowingly provides materia not more than \$1,000.	ally false information
(Officer of Corporation/Member of LLC/Partner/So	ole Proprietor) $ \frac{04/20/2025}{\text{(Date)}} $	<u> </u>
Clerk's Office checklist for complete ap	pplications	
WI Seller's Permit Certificate (matching articles of incorporation) FEIN	Background investigation form(s) Form for surrender of previous license *Articles of Incorporation *Appointment of Agent	☐ Floor Plans ☐ Lease ☐ Business Plan ☐ **Sample Menu
Written description of premises	* Corporation/LLC only	** Class B only
Orange sign Orange business "Applying for a Liquor/Beer License Date complete application filed with Clerk's Date of ALRC meeting	in the City of Madison" brochure with contact Office $\frac{1}{2}$	information
Du		