



# City of Madison Liquor/Beer License Application

On-Premises Consumption: ☒ Class B Beer ☒ Class B Liquor ☐ Class C Wine  
 Off-Premises Consumption: ☐ Class A Beer ☐ Class A Liquor ☐ Class A Cider

## Section A – Applicant

1. 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 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.
2. This application is for the license period ending June 30, 2018.
3. 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 Fine Wines & Spirits, LLC
4. Trade Name (doing business as) Total Wine Spirits Beer & More
5. Address to be licensed 400 West Towne Mall, Madison, WI 53719
6. Mailing address 6600 Rockledge Drive, Ste 150, Bethesda, MD 20817
7. Anticipated opening date 05/01/2018
8. Is the applicant an employee or agent of, or acting of behalf of anyone except the applicant named in question 3?  
☒ No ☐ Yes (explain) \_\_\_\_\_
9. Does another alcohol beverage licensee or wholesale permittee have interest in this business?  
☒ No ☐ Yes (explain) \_\_\_\_\_

## Section B—Premises

10. 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 records. Alcohol beverages may be sold and stored only on the premises as approved by Common Council and described on license.  
 Alcohol beverages will be stored and sold within the 23,146 sq.ft. one-story space located at 400 West Towne Mall, Madison, WI 53719 which includes a 1,433 sq.ft. warehouse for storage.

11. ☒ Attach a floor plan, no larger than 8 ½ by 14, showing the space described above.
12. Applicants for on-premises consumption: list estimated capacity The wine education classroom has a 48 person capacity.
13. Describe existing parking and how parking lot is to be monitored.
- There are approximately 1,064 parking spaces in lots in front of and along one side of the store that are shared by other retailers in the West Towne Mall. There will be a camera on the front of the store that will face the parking lot in front of the store. However, security of the parking lot is the responsibility of the landlord.
14. Was this premises licensed for the sale of liquor or beer during the past license year?
- ☒ No   ☐ Yes, license issued to \_\_\_\_\_ (name of licensee)
15. ☒ Attach copy of lease.

### Section C—Corporate Information

This section applies to corporations, nonprofit organizations, and Limited Liability Companies only. Sole proprietorships and partnerships, skip to Section D.

16. Name of liquor license agent Todd Giammo
17. City, state in which agent resides WI
18. How long has the agent continuously resided in the State of Wisconsin? 1 year, 8 months
19. ☒ Appointment of agent form and background check form are attached.
20. Has the liquor license agent completed the responsible beverage server training course?
- ☐ No, but will complete prior to ALRC meeting   ☒ Yes, date completed 7/18/2016
21. State and date of registration of corporation, nonprofit organization, or LLC.
- Wisconsin, 12/01/2015

22. 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 |
|--------------|------------------|-----------------------------|
| Member       | David John Trone | Potomac, MD                 |
| Member       | Robert Lee Trone | Potomac MD                  |
| See attached |                  |                             |
|              |                  |                             |
|              |                  |                             |
|              |                  |                             |
|              |                  |                             |

23. 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.

CT Corporation System, 301 S Bedford St, Ste 1, Madison, WI 53703

24. Is applicant a subsidiary of any other corporation or LLC?  
☒ No ☐ Yes (explain) \_\_\_\_\_
25. 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) See attached

### Section D—Business Plan

26. What type of establishment is contemplated?  
☐ Tavern ☐ Nightclub ☐ Restaurant ☒ Liquor Store ☐ Grocery Store  
☐ Convenience Store without gas pumps ☐ Convenience Store with gas pumps  
☐ Other \_\_\_\_\_
27. Business description Total Wine Spirits Beer & More is a alcohol beverage retailer that will sell malt beverages, wine and distilled spirits. To allow our customers to taste our product, the store will host special events and educational classes in its education center. It also provides sampling of wine, spirits and beer in its tasting bars. In addition, there will be a growler station for the sell and refill of growlers.
28. Hours of operation M-Sa 9 a.m. - 9 p.m. and Sunday 10 a.m. - 7 p.m.
29. Describe your management experience David Trone and Robert Trone have more than 30 years of management experience in the alcohol beverage retail industry. Todd Giammo has twelve years of management experience, including two years as a manager for Total Wine & More. See attached
30. List names of managers below, along with city and state of residence.
- |                            |                                 |
|----------------------------|---------------------------------|
| <u>Store Manager (TBD)</u> | <u>Assistant Managers (TBD)</u> |
| <u>Wine Manager (TBD)</u>  |                                 |
31. Describe staffing levels and staff duties at the proposed establishment There will be approximately 30 employees consisting of a store manager, wine manager, assistant managers, supervisors and front end team members.
32. Describe your employee training Within 90 days of hire, employees receive 32 hours of training in the areas of product, sales & service, loss prevention and minor enforcement.

33. Utilizing your market research, describe your target market.

Responsible adult consumers of alcoholic beverages

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

Newspaper advertisements will regularly promote sales price items, see attached.

35. Are you operating under a lease or franchise agreement? ☐ No ☒ Yes

36. 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 N/A

### Section E—Consumption on Premises

This section applies to Class B and Class C applicants only. Class A license applicants (consumption off premises) may skip to Section F.

37. Do you plan to have live entertainment? ☒ No ☐ Yes—what kind? \_\_\_\_\_

38. What age range do you hope to attract to your establishment? Consumers who are 21 years old and up

39. What type of food will you be serving, if any? N/A

☐ Breakfast ☐ Brunch ☐ Lunch ☐ Dinner

40. Submit a sample menu if applicable. What will be included on your operational menu?

☐ Appetizers ☐ Salads ☐ Soups ☐ Sandwiches ☐ Entrees ☐ Desserts  
☐ Pizza ☐ Full Dinners

41. During what hours of operation do you plan to serve food? N/A

42. What hours, if any, will food service not be available? N/A

43. Indicate any other product/service offered. \_\_\_\_\_

44. Will your establishment have a kitchen manager? ☒ No ☐ Yes

45. Will you have a kitchen support staff? ☒ No ☐ Yes

46. How many wait staff do you anticipate will be employed at your establishment? 0

During what hours do you anticipate they will be on duty? N/A

47. Do you plan to have hosts or hostesses seating customers? ☒ No ☐ Yes

48. Do your plans call for a full-service bar? ☒ No ☐ Yes  
 If yes, how many barstools do you anticipate having at your bar? \_\_\_\_\_  
 How many bartenders do you anticipate having work at one time on a busy night? \_\_\_\_\_
49. Will there be a kitchen facility separate from the bar? ☒ No ☐ Yes
50. Will there be a separate and specific area for eating only?  
☒ No ☐ Yes, capacity of that area \_\_\_\_\_
51. What type of cooking equipment will you have? N/A  
☐ Stove ☐ Oven ☐ Fryers ☐ Grill ☐ Microwave
52. Will you have a walk-in cooler and/or freezer dedicated solely to the storage of food products?  
☒ No ☐ Yes
53. What percentage of payroll do you anticipate devoting to food operation salaries? 0%
54. If your business plan includes an advertising budget:  
 What percentage of your advertising budget do you anticipate will be related to food? 0%  
 What percentage of your advertising budget do you anticipate will be drink related? 100%
55. Are you currently, or do you plan to become, a member of the Madison—Dane County Tavern League or the Tavern League of Wisconsin? ☐ No ☒ Yes
56. Are you currently, or do you plan to become, a member of the Wisconsin Restaurant Association or the National Restaurant Association? ☒ No ☐ Yes
57. All restaurants and taverns serving alcohol must substantiate their gross receipts for food and alcohol beverage sales broken down by percentage. New establishments estimate percentages:  
100 % Alcohol 0 % Food 0 % Other
58. Do you have written records to document the percentages shown? ☒ No ☐ Yes  
 You may be required to submit documentation verifying the percentages you've indicated.  
 (\*\*SEE ATTACHED)

## Section F—Required Contacts and Filings

59. I understand that liquor/beer license renewal applications are due April 15 of every year, regardless of when license was initially granted. ☐ No ☒ Yes
60. I understand that I am required to host an information session at least one week before the ALRC meeting. ☐ No ☒ Yes
61. I agree to contact the Alderperson for this location to discuss my application and to invite the Alderperson to my information session. ☐ No ☒ Yes
62. I agree to contact the Police Department District Captain for this location prior to the ALRC meeting. ☐ No ☒ Yes
63. I agree to contact the Deputy Clerk prior to the ALRC meeting. ☐ No ☒ Yes
64. I agree to contact the neighborhood association representative prior to the ALRC meeting.  
☐ No ☒ Yes
65. I intend to operate under the alcohol license within 90 days of the Common Council granting this license. The license shall be considered surrendered if not issued within 90 days of being granted. ☐ No ☒ Yes -Business will begin operation w/in 90 days, but will not open to the public until spring 2018.

66. I understand we must file a Special Occupational Tax return (TTB form 5630.5) before beginning business. [phone 1-800-937-8864] ☐ No ☒ Yes
67. I understand a Wisconsin Seller's Permit must be applied for and issued in the same name as that shown in section 2, above. [phone 608-266-2776] ☐ No ☒ Yes
68. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor?  
☒ No ☐ Yes

### Section G—Information for Clerk's Office

69. State Seller's Permit 4 5 6 - 1 0 2 9 2 7 0 5 1 5 - 0 2

70. Federal Employer Identification Number 81-0868518

71. Who may we contact between 8 a.m. and 4:30 p.m. regarding this license?

Contact person Mike Wittenwyler, Esq.

E-mail address mwittenw@gklaw.com

Phone 608-284-2616 Preferred language English

72. Corporate attorney, if applicable: Name Robert Shaffer, Esq.

Phone 301-547-0776 E-mail rshaffer@totalwine.com

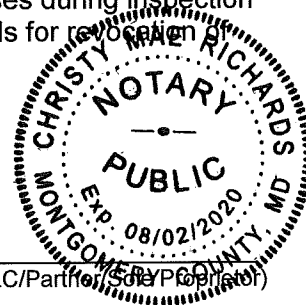
**Read carefully before signing in front of a notary:** Under penalty provided by law, the applicant states that the above information has been truthfully completed to the best of the knowledge of the signer. Signer agrees to operate the business according to law, and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. Lack of access to any portion of licensed premises 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 1<sup>TH</sup> day of SEPTEMBER, 2017

Chp  
(Clerk/Notary Public)

[Signature]  
(Officer of Corporation/Member of LLC/Partner/Sole Proprietor)



My commission expires 8/2/2020

| Clerk's Office checklist for complete applications                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                      |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Orange sign<br><input checked="" type="checkbox"/> WI Seller's Permit Certificate<br>(matching articles of incorporation)<br><input checked="" type="checkbox"/> FEIN<br><input checked="" type="checkbox"/> Notarized application<br><input checked="" type="checkbox"/> Written description of premises | <input checked="" type="checkbox"/> Background investigation form(s)<br><input type="checkbox"/> Form for surrender of previous license<br><input checked="" type="checkbox"/> *Articles of Incorporation<br><input checked="" type="checkbox"/> *Notarized Appointment of Agent<br>* Corporation/LLC only | <input checked="" type="checkbox"/> Floor Plans<br><input checked="" type="checkbox"/> Lease<br><input checked="" type="checkbox"/> Sample Menu<br><input checked="" type="checkbox"/> Business Plan |
| Date complete application filed with Clerk's Office _____<br>Date of ALRC meeting _____ Date license granted by Common Council _____<br>Date provisional issued _____ Date license issued _____ License number _____                                                                                                               |                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                      |