| | 41277 LICUB-2016-00001 | |
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| Mad Mad | 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 | |
| Sec 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 mage 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, 20 1/2. | |
| 3. List the name of your □ Sole Proprietor, □ Partnership, □ Corporation/Nonprofit □ Limited Liability Company exactly as it appears on your State Seller's Permit. | | |
| | Field Table LIC | |
| 4. | Trade Name (doing business as) Field Table LLC | |
| 5. | Address to be licensed 10 W. Mifflin Suite 110 | |
| 6. | Mailing address 333 W. Miftlin St. #8090 (-or- 10 W. Miftlin) | |
| 7. | Anticipated opening date April 1st, 2016 Madism, WI 53703 | |
| 8. | Is the applicant an employee or agent of, or acting of behalf of anyone except the applicant named in question 2? ☑ No ☐ Yes (explain) | |
| 9. | Does another alcohol beverage licensee or wholesale permitee have interest in this business? | |
| | No 🗆 Yes (explain) | |
| Sec 10. | 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. | |
| | At the bark in the coolers & at outdoor seating when available (afth successful side walk permits) and | |
| | in the diving areas. | |

| 11. | Attach a floor plan, no larger than 8 $\frac{1}{2}$ by 14, showing the space described above. | | | |
|------|--|--|--|--|
| 12. | Applicants for on-premises consumption: list estimated capacity 108 inside, on tride dependent on successful | | | |
| 13. | Describe existing parking and how parking lot is to be monitored. permit Side walk application. | | | |
| | The property is on the square, There is no | | | |
| | parking lot. | | | |
| 14. | Was this premises licensed for the sale of liquor or beer during the past license year? | | | |
| | □ No A Yes, license issued to <u>Sunprint</u> Cafe Sunbun Prij (name of licensee) | | | |
| 15. | Attach copy of lease. | | | |
| This | ction C—Corporate Information section applies to corporations, nonprofit organizations, and Limited Liability Companies only. e proprietorships and partnerships, skip to Section D. | | | |
| | Name of liquor license agent Patricia Davis | | | |
| 17. | City, state in which agent resides Madism, WI | | | |
| 18. | How long has the agent continuously resided in the State of Wisconsin?23 + years | | | |
| 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 ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ | | | |
| 21. | | | | |
| | Wisconsin - May 21st 2014 | | | |
| 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 | | | |
| | Owner/Operator Patricia Davis Madism, WI | | | |
| | | | | |
| | | | | |
| 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. | | | |
| | Patricia Davis | | | |

| 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) |
| | ction D—Business Plan What type of establishment is contemplated? □ Tavern □ Nightclub 幫 Restaurant □ Liquor Store 幫 Grocery Store |
| | ☐ Convenience Store without gas pumps ☐ Convenience Store with gas pumps |
| | □ Other |
| 27. | Business description Restaurant and market with all-day |
| | emporium featuring produce, grat and go meals, local |
| | products, third wave coffee bar, bakery and cheese |
| | Counter, contemporary artisinal American plates, scasmal fresh |
| 28. | Hours of operation 6:30 a.m 1:00 a.m. M-Sat. & 8-4 Sunday |
| | Describe your management experience 18 years in farture 1000 companies, |
| | food & biotech companies (as a manager) and an |
| | MBA in Entrepreneurship & International Business, NW-Madison. |
| 30. | List names of managers below, along with city and state of residence. |
| | Mimnel Mc Donald Madism, WI |
| | Shannan Berry Madison, WI |
| | Describe staffing levels and staff duties at the proposed establishment Approxi mately |
| | 18 employees including market/ ouffee/bar manager, |
| | executive chef, maitre'd all ensuring fresh quality food and U beverage. |
| 32. | Describe your employee training Employees will participate |
| | in training including food Safety, sanitation & handling, |
| | alcohol beverage laws policies & best practices for both |
| | Serving and retailing, |

| 33. | 3. Utilizing your market research, describe your target market. | | | |
|------------|---|--|--|--|
| | Health Conscious consumers ages 25-75 seeking fresh, | | | |
| | reliable source of everyday products & services | | | |
| 34. | Describe how you plan to advertise and promote your business. What products will you be advertising? | | | |
| | Promotion will occur via traditional media as well as focused Social | | | |
| | media targeted at a wide audience of health-consions | | | |
| | Shoppers & diners, (i.e. Overture events, health events, artisinal | | | |
| 35. | . Are you operating under a lease or franchise agreement? ★ No □ Yes ——food classe | | | |
| 36. n/a | 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 | | | |
| This | 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? 25-75 year olds | | | |
| 39. | What type of food will you be serving, if any? <u>all hours - daily</u> Breakfast D Brunch D Lunch D Dinner | | | |
| 40. | Submit a sample menu if applicable. What will be included on your operational menu? | | | |
| 41. | During what hours of operation do you plan to serve food? <u>0:30</u> a.m 12:30 at night | | | |
| 42. | During what hours of operation do you plan to serve food? <u>Co:30 a.m 12:30 at night</u> Potentially not during: What hours, if any, will food service not be available? <u>12:30 - 100 a.m. during pre-close</u> | | | |
| 43. | . Indicate any other product/service offered. <u>fresh produce & groceries, classes</u> . Will your establishment have a kitchen manager? □ No 🏚 Yes | | | |
| 44. | Will your establishment have a kitchen manager? □ No ☒ Yes & warkshops | | | |
| 45. | Will you have a kitchen support staff? □ No 🂢 Yes | | | |
| 46. | How many wait staff do you anticipate will be employed at your establishment? | | | |
| | During what hours do you anticipate they will be on duty?// a.m + p-m- / a.m. | | | |
| 47. | Do you plan to have hosts or hostesses seating customers? ☐ No ☐ Yes | | | |

| 48. | Do your plans call for a full-service bar? □ No ሺ Yes If yes, how many barstools do you anticipate having at your bar? <u>/ &</u> How many bartenders do you anticipate having work at one time on a busy night? <u> →</u> | |
|-------------|---|--|
| 4 9. | 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? Stove Stove Stove Stoven | |
| 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? 86% | |
| 54. | If your business plan includes an advertising budget: | |
| | What percentage of your advertising budget do you anticipate will be related to food? <u>950</u> | |
| | What percentage of your advertising budget do you anticipate will be drink related? 600 | |
| 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? | |
| 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: | |
| | 20 % Alcohol 80 % Food TBD % Other (Soups, cooking tools) | |
| 58. | · | |
| Sec | tion 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 및 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 Alcohol Policy Coordinator prior to the ALRC meeting. ☐ No Yes | |
| 64. | I agree to contact the neighborhood association representative prior to the ALRC meeting. □ No 以 Yes | |

| _ | Bread |
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| - | æ |
| - | Board |

 $_{
m dm}$ cheese board seasonal boule

scallop crudo, sunflower oil

mussels, broth, tomato, parsley

lettuce wraps, beef, coconut, green onion, bird's eye chili

steak tartare, shallot, egg yolk grilled lamb kebob, sumac, carrots

flank steak, grilled lemon, blue cheese

burger, sesame bun

mp simple salad

фm

caesar salad

mp daily soup

crudité of the day

Starters & Salads

roasted mushrooms, sautéed spinach, lentils, charred radicchio, black walnut

dm

potatoes

grain salad

poached salmon, soba noodle, broth

dm

smoked trout, pasta, pesto, walnut

pork, chestnuts, star anise, pickled green onion

 $_{
m dm}$

house-cut rib eye, potatoes

from our market the finest ingredients & neighboring farms we source

instagram: @xxxx find us on facebook twitter: @xxxx

10 West Mifflin

608.xxx.xxxx

www.xxx.com

XXX 2016

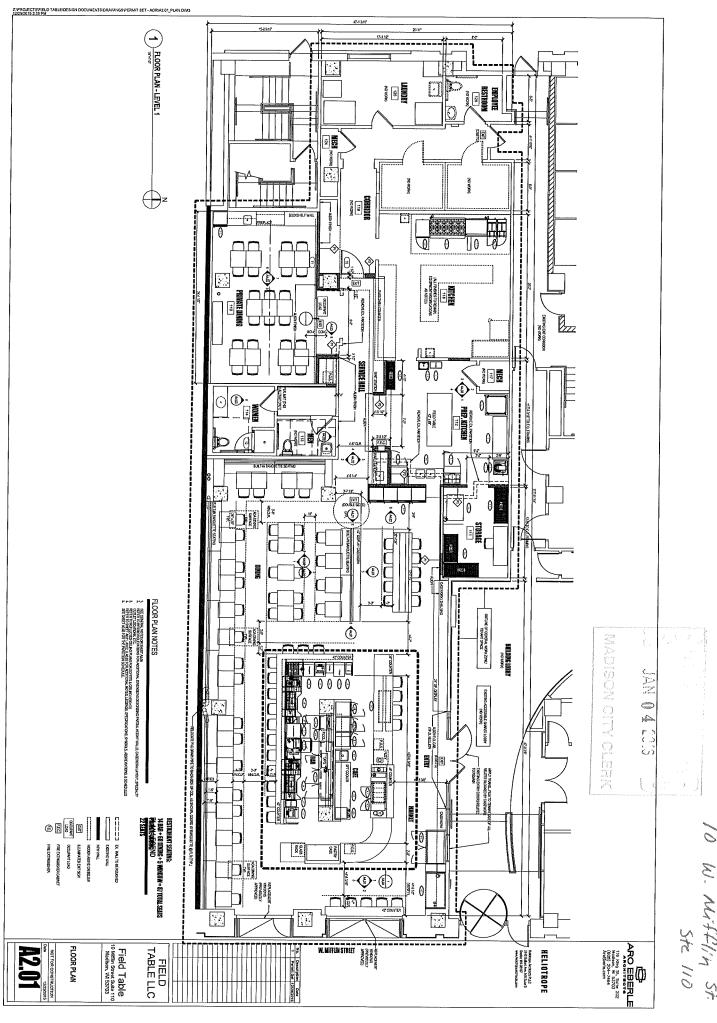
xxxx - MAOysters on the ½ - mp

seasonal mignonette

Tuesdays for x oysters Please join us on Monday nights

for Bottle and

a Bird.



10 w. Mifflin 57.