

Liquor/Beer License **Application**

(Agenda Item Number) (Legistar file number) LICLIA - 2023-6025 (License number)

(Alder District #)

(Police Sector)

Office Use Only

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

Class A: $ atural$ Beer, \Box Liquor, \Box Cider
Class B: ☐ Beer, ☐ Liquor,
\square Class C Wine

Clas	S B: ☐ Beer, ☐ Liquor, ☐ Class C Wine Iicensing@cityofmadison.com 608-266-4601
Sec 1.	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.
2.	Trade Name (doing business as) 7-Eleven #35851 J
3.	Address to be licensed 2216 University Are Madison W1 53726 Mailing address P.O. BOX 139044 Dallas TX 75313
4.	Mailing address P.O. BOX 139044 Dallas TX 75313
5.	Anticipated opening date
6.	Is the applicant an employee or agent of, or acting of behalf of anyone except the applicant named in question 1? No \square Yes (explain)
7.	Does another alcohol beverage licensee or wholesale permitee have interest in this business? \square No \square Yes (explain)
Sec 8.	tion 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.
	Convenience Store-alcoholic beverages (beer) will be stored
	in the back of Store and will be sold at cash registers
	Near front of Store. Records will be Kept in manager's
	Office. No outside Seating

9.	Applicants for on-premises consumption only. Estimated capacity (patrons and employees):					
	Indoor: N/A Outdoor: N/A					
10.	Describe existing parking and how parking lot is to be monitored.					
	14 spaws					
11.	Was this premises licensed for the sale of liquor or beer during the past license year?					
	□ No ☐ Yes, license issued to Darryland Retail Group LLC (name of licensee)					
This	Section C—Corporate Information This section applies to corporations, nonprofit organizations, and Limited Liability Companies only. Sole proprietorships and partnerships, skip to Section D.					
12.	Name of liquor license agent Brandon Kahl					
	City, state in which agent resides <u>Madison</u> , W I					
14.	How long has the agent continuously resided in the State of Wisconsin? 29 years					
15.	Has the liquor license agent completed the responsible beverage server training course?					
	\square No, but will complete prior to ALRC meeting \square Yes, date completed $\underline{2-9-2023}$					
16.	State and date of registration of corporation, nonprofit organization, or LLC. $11-21-1961$					
17.	In the table below list the directors of your corporation or the members of your LLC.					
	Title Name City and State of Residence					
	Title Name City and State of Residence President Joseph De Pinto Datta Westlake, TX Vice-Pres. / Breasury David Seltzer Southlake, TX					
	Ville-Pres / Breasury David Selfzer South Lake, 17					
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. Brandon Kah I					
4.0						
19.	Is applicant a subsidiary of any other corporation or LLC? No Yes (explain)					
20.	member, or any manager hold any interest in any other alcohol beverage license or permit in Wisconsin?					
	□ No ☐ Yes (explain) 7-Eleven-Milwauker 7-Eleven-Kenoska					
	7- Eleven - Kenosha					

-	Section D—Business Plan 21. What type of establishment is contemplated? ☐ Tavern ☐ Nightclub ☐ Restaurant ☐ Liquor Store ☐ Grocery Store ☐ Convenience Store without gas pumps ☐ Convenience Store with gas pumps						
							mps
	Other						
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? \square No \square Yes						
23.	. Hours of operation: please enter opening and closing times in the table below.						
	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
	-	24 hours	/	-	-	-	-
	(Class B on	ly) Enter beld	ow any hours	when food ser	vice will not b	oe available, 	if applicable
	-	- /	7 days	a week	_	-	
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. 24. Indicate any other product/service offered.							
23.	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: % Alcohol % Food % Other If applicable, describe "Other":						
	Do you have You may be	written recor	rds to docum ubmit docum	nent the percent nentation verifyi	ing the percer	ntages indica	☐ Yes ted.
26.	Do you plan	to have live e	entertainmer	nt? 🗌 No 🔲	Yes—what k	ind?	
(music (except Entertainment L), a DJ, or a d	designated
	Section F—Required Contacts and Filings 7. I understand that liquor/beer license renewal applications are due April 15 of every year, regardless of when license was initially granted. □ No □ Yes						
28.		I that I am re ng. □ No 🏚		st an informatio	on session at l	least one we	ek before the
29.		ontact the Ald son to my inf		this location to	discuss my a	application ar	nd to invite

30.	I agree to contact the Police Department District Captain for this location prior to the ALRC meeting. \square No $\stackrel{\square}{\square}$ Yes					
31.	I agree to contact the Deputy Clerk prior to the ALRC meeting. \square No $\stackrel{\smile}{\boxtimes}$ 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 \bowtie Yes					
36.	Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? \square No \square Yes					
Sec	tion G—Information for Clerk's Office					
37.	This application is for the license period ending June 30, $20 \frac{\text{20}}{\text{20}}$.					
38.	State Seller's Permit 4 5 6 - 00 00 1 4 0 8 4 1 - 0 H					
	Federal Employer Identification Number 75-1085131					
40.	Who may we contact between 8 a.m. and 4:30 p.m. regarding this license?					
	Contact person <u>Sue Swanson</u>					
	Contact person Sue Swanson Business phone (630)519-3915 Business e-mail address St. Stons of ting & Concast. ne					
	Preferred language English					
	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.					
41.	Corporate attorney, if applicable: Name					
	Phone E-mail					

NOTICE: Completed application are due by noon of the third Monday (fourth, if the Clerk's office is closed on the third Monday) to get on the agenda for the proceeding months Alcohol License Review Committee. A completed application must be accompanied by the following items:					
Copy of State Seller's Permit (Not Business Tax Registration Certificate), Appointment of Agent (if Corp/LLC), Member background investigation forms, Articles of Incorporation (if Corp/LLC), Floor Plans, Copy of Lease, Business Plan, and Sample Menu (if applying for Class B license)					
If required items are missing, the applica Office until all requirements are submitted	ation will not be considered complete and will not be a ed. No exceptions are made.	ccepted by the Clerk's			
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 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.					
Penalty for materially false application information: Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000. (Difficer of Corporation/Member of LLC/Partner/Sole Proprietor) (Date)					
Clerk's Office checklist for complet					
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			
Upon Application Submission, the Clerk's Office issued to the application: ☐ Orange sign ☐ Orange business card ☐ "Applying for a Liquor/Beer License in the City of Madison" brochure with contact information					
Date complete application filed with Cle	Prk's Office				