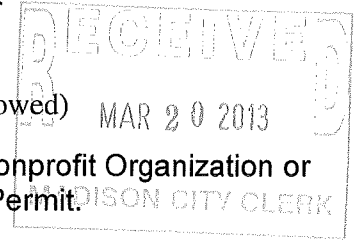




City of Madison Liquor/Beer License Application

On-Premises Consumption: Class B Beer Class B Liquor Class C Wine

Off-Premises Consumption: Class A Beer Class A Liquor



Section A – Applicant

- This application is for the license period ending June 30, 2013 (2014 if allowed)
- 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.
ROAD RANGER, L.L.C.
- Trade Name (doing business as) ROAD RANGER #129
- Address to be licensed 4102 COMMERCIAL AVENUE, MADISON, WI 53714
- Mailing address P O BOX 4745, ROCKFORD, IL 61110-4745
- Anticipated opening date MARCH 20, 2013
- State Seller's Permit 4 5 6 - 0 0 0 0 3 8 5 7 7 0 - 0 2
- Federal Employer Identification Number 36-4005006
- Is the applicant an employee or agent of, or acting of behalf of anyone except the applicant named in question 2?
 No Yes (explain) NOT APPLICABLE
- Does another alcohol beverage licensee or wholesale permittee have interest in this business?
 No Yes (explain) NOT APPLICABLE

Section 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 records. Alcohol beverages may be sold and stored only on the premises as approved by Common Council and described on license.
Convenience store with retail motor fuel sales on 38' x 80' lot with approximately 2000 sq ft sales floor
No seating - no bar. Alcoholic beverages are sold from wall-installed coolers and free-standing displays.
Coolers also act as storage.
- Attach a floor plan, no larger than 8 ½ by 14, showing the space described below.
- Applicants for on-premises consumption: list estimated capacity NOT APPLICABLE

#29585

14. Describe existing parking and how parking lot is to be monitored.

Asphalt lot with 20 regular and 1 handicapped parking space. Standard convenience store parking lot.
no longterm or overnight parking allowed. Monitored by Store staff.

15. Was this premises licensed for the sale of liquor or beer during the past license year?

No Yes, license issued to Road Ranger, L.L.C. (01/2012-09/2012) (name of licensee)
Khullar Group 12, Inc. (09/2012-03/2013)

16. 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.

17. Name of liquor license agent ADRIANNA A. BOYD

18. City and state in which agent resides MADISON, WI

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. State and date of registration of corporation, nonprofit organization, or LLC.

ILLINOIS 01/23/1995

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
Manager/Member	Daniel J. Arnold	McKinney, TX
Member	Ranger Enterprises, Inc.	Rockford, IL (owned 100% by Daniel J. Arnold)
Member	Sunil Puri	Rockford, IL
VP & Treasurer	David J. Saporta	Huntley, IL
Secretary	Steven E. Brooks	Belvidere, IL

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.

Jeffrey J. Liotta, Esq., 555 E Wells St, Suite 1900, Milwaukee, WI 53202-3819

24. Is applicant a subsidiary of any other corporation or LLC?

No Yes (explain) NOT APPLICABLE

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 EXHIBITS A-1 and A-2

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 Convenience store with retail motor fuel sales on 38' x 80' lot with approximately 2000 sq ft sales floor, No seating - no bar.
28. Hours of operation MON - SAT 6:00am-10:00pm SUN 7:00am-9:00pm
29. Describe your management experience Company has been in c-store business since 1995. Managers receive training either by working up through ranks of daily operations or through Manager In Training program. All training includes review of policies and alcohol sales policy. Are supervised by District Sup.
30. List names of managers below, along with city and state of residence.
ADRIANNA BOYD (Employee) MADISON, WI
MARY R SIMON (Store Manager) SUN PRAIRIE, WI
31. Describe staffing levels and staff duties at the proposed establishment At least one employee per shift. Duties include general cashier, stocking, and cleaning duties typical of a convenience store.
32. Describe your employee training Employees receive on-site training which includes policy review and review of alcohol sales policy. Employees go through Responsible Beverage Server Training if required for location's liquor license.
33. Utilizing your market research, describe your target market.
Local area fuel and general merchandise consumers.

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

In-store product promotions and word-of-mouth advertising.

Fuel and general merchandise

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 NOT APPLICABLE

Section E—Consumption on Premises THIS SECTION NOT APPLICABLE

~~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? _____~~

~~39. What type of food will you be serving, if any? _____
 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? _____~~

~~42. What hours, if any, will food service not be available? _____~~

~~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? _____~~

~~During what hours do you anticipate they will be on duty? _____~~

~~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?
 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? _____
54. If your business plan includes an advertising budget:
 What percentage of your advertising budget do you anticipate will be related to food? _____
 What percentage of your advertising budget do you anticipate will be drink related? _____
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:
 _____ % Alcohol _____ % Food _____ % 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.

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 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 Yes
65. I understand we must file a Special Occupational Tax return (TTB form 5630.5) before beginning business. [phone 1-800-937-8864] No Yes
66. 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
67. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor?
 No Yes

Section G—Contact Information for Clerk’s Office

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

Contact person Anita Harris

E-mail address aharris@RoadRangerUSA.com

Phone 815-387-1700 ext 301

Preferred language for correspondence English

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.

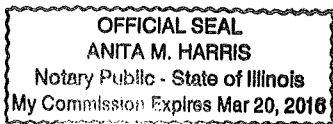
Subscribed and Sworn to before me:

this 15TH day of MARCH, 2013

Anita M Harris
(Clerk/Notary Public)

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

My commission expires 03-20-2016



Clerk’s Office checklist for complete applications		
<input type="checkbox"/> Orange sign <input checked="" type="checkbox"/> WI Seller’s Permit Certificate (matching articles of incorporation) <input checked="" type="checkbox"/> FEIN <input checked="" type="checkbox"/> Notarized application <input type="checkbox"/> Written description of premises	<input type="checkbox"/> Background investigation form(s) <input type="checkbox"/> Form for surrender of previous license <input checked="" type="checkbox"/> *Articles of Incorporation <input checked="" type="checkbox"/> *Notarized Appointment of Agent * Corporation/LLC only	<input checked="" type="checkbox"/> Floor Plans <input checked="" type="checkbox"/> Lease <input type="checkbox"/> Sample Menu
Date complete application filed with Clerk’s Office <u>3-22-13</u> Date of ALRC meeting <u>4-24-13</u> Date license granted by Common Council <u>5-7-13</u> Date provisional issued _____ Date license issued _____ License number <u>LICLLIA-2013-00184</u>		

