

ORIGINAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk.

For the license period beginning _____ 20 _____ ;
ending _____ 20 _____

TO THE GOVERNING BODY of the: Town of }
 Village of } MADISON
 City of }

County of DANE Aldermanic Dist No _____ (if required by ordinance)

1 The named INDIVIDUAL PARTNERSHIP LIMITED LIABILITY COMPANY
 CORPORATION/NONPROFIT ORGANIZATION

hereby makes application for the alcohol beverage license(s) checked above

2 Name (individual/partners give last name, first, middle; corporations/limited liability companies give registered name): MADISON HOTEL ASSOCIATES, L.P.

An "Auxiliary Questionnaire," Form AT-103, must be completed and attached to this application by each individual applicant, by each member of a partnership, and by each officer, director and agent of a corporation or nonprofit organization, and by each member/manager and agent of a limited liability company List the name, title and place of residence of each person.

	Title	Name	Home Address	Post Office & Zip Code
	PRESIDENT	B. ANTHONY ISAAC	8500 SHANNON WAY, WICHITA, KS 67206	
SR	SR VICE PRESIDENT	ROY R. BAKER	1725 N. CYPRESS, WICHITA, KS 67206	
	SECRETARY	JOHN R. MORSE	1159 JUNONIA WAY, SANIBEL, FL 33957	
	TREASURER	ROY R. BAKER		
Agent	Agent	BLAZE A. BRIGMAN	1462 AVONDALE DR. GREEN BAY WI 54313	
Directors/Managers	MANAGER	BLAZE A. BRIGMAN	1462 AVONDALE DR. GREEN BAY, WI 54313	

3 Trade Name HYATT PLACE Business Phone Number 608-257-2700
4 Address of Premises 333 W. WASHINGTON AVENUE Post Office & Zip Code MADISON WI 53703

- 5 Is individual, partners or agent of corporation/limited liability company subject to completion of the responsible beverage server training course for this license period? Yes No
- 6 Is the applicant an employe or agent of, or acting on behalf of anyone except the named applicant? Yes No
- 7 Does any other alcohol beverage retail licensee or wholesale permittee have any interest in or control of this business? Yes No
- 8 (a) Corporate/limited liability company applicants only: Insert state _____ and date _____ of registration
(b) Is applicant corporation/limited liability company a subsidiary of any other corporation or limited liability company? Yes No
(c) Does the corporation or any officer, director, stockholder or agent or limited liability company, or any member/manager or agent hold any interest in any other alcohol beverage license or permit in Wisconsin? Yes No

(NOTE All applicants explain fully on reverse side of this form every YES answer in sections 5, 6, 7 and 8 above)

9 Premises description: Describe building or buildings where alcohol beverages are to be sold and stored The applicant must include all rooms including living quarters, if used, for the sales, service, and/or storage of alcohol beverages and records (Alcohol beverages may be sold and stored only on the premises described) SEE ATTACHED

10 Legal description (omit if street address is given above): N/A

11 (a) Was this premises licensed for the sale of liquor or beer during the past license year? Yes No
(b) If yes, under what name was license issued? _____

12 Does the applicant understand they must file a Special Occupational Tax return (TTB form 5630 5) before beginning business? [phone 1-800-937-8864] Yes No

13 Does the applicant 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] Yes No

14 Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? Yes No

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signers. Signers agree to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another (Individual applicants and each member of a partnership applicant must sign; corporate officer(s) members/managers of Limited Liability Companies must sign.) Any lack of access to any portion of a 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 27th day of OCTOBER 2009

Jamie A. Reber
(Clerk/Notary Public)
LAURIE A REBER
NOTARY PUBLIC
STATE OF KANSAS
My commission expires 10/10/13 My Admt. Exp. 10/10/13

Roy R Baker
Roy R Baker
Senior Vice President
Finance & Treasurer
(Officer of Corporation/Member/Manager of Limited Liability Company/Partner/Individual)

(Officer of Corporation/Member/Manager of Limited Liability Company/Partner)

(Additional Partner(s)/Member/Manager of Limited Liability Company if Any)

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>10-30-09</u>	Date reported to council/board <u>12-16-09</u>	Date provisional license issued	Signature of Clerk / Deputy Clerk
Date license granted	Date license issued	License number issued	

Addendum to Original Alcohol Beverage License Application

Applicant: Madison Hotel Associates, L.P.

#9 – Premises Description:

11 floor structure at 333 W. Washington. Beer and wine will be served in an 820 square feet café in the lobby on the first floor, in the 840 square feet Great Room off of the lobby, and/or in the contained meeting space (1989 square feet) on the second floor of the facility. Beer and wine will be stored in an 80 square feet lockable storage room on the first floor behind the public space

Addendum to City of Madison Supplemental Class B License Application

Applicant: Madison Hotel Associates, L.P.

#10 – Description of Building:

11 floor structure at 333 W. Washington. Beer and wine will be served in an 820 square foot café in the lobby on the first floor, in the 840 square foot Great Room off of the lobby, and/or in the contained meeting space (1989 square feet) on the second floor of the facility. Beer and wine will be stored in an 80 square foot lockable storage room on the first floor behind the public space

The overall exterior dimensions of the building at 165.5 feet x 65.5 feet. The interior dimensions and seating areas are broken up into conversation spaces for a total of approximately 2,100 square feet. Banquet seating (18), tables (32), couch/soft seating (10) and deli stools (6) each. There is no bar in the facility, only a deli counter that is a stand-behind storage unit for food and beverage products.

#12 – Description of Parking:

The existing parking garage will be connected to the hotel space by way of corridor. This parking structure is a “pay for” parking unit consisting of six levels. The hotel will be using 151 spaces from three separate levels of the parking structure. The parking space is monitored using a camera system over the egress and ingress areas. The hotel will provide walk-through security between the hours of 11:00 p.m. and 7:00 a.m. daily.

#13 – Management Experience; Staffing:

The partnership group of Madison Hotel Associates, L.P. has been together since the early 1980’s, developing and managing the Residence Inn Hotels (now Residence Inn by Marriott), Summerfield Suites Hotels (now Hyatt Summerfield Suites), Hotel Sierra, and Avia Hotels.

General Manager Blaze Brigman has been in the hospitality industry professionally since 1984 after graduating from UW Stout with a Bachelor’s degree in Hotel & Tourism. He has been involved in numerous restaurant and resort operations.

Staffing levels will line up with guest needs and the occupancy level of the Hyatt Place hotel. Gallery hosts (employees who greet and help our guests with all of their needs) will be scheduled on three separate shifts during the day. The training program, along with the Hyatt Corporate training, will begin with an orientation and will be two weeks in length.

15 Utilizing your market research, who would you project your target market to be?

CORPORATE TRAVELER SUN-THUR, LEISURE GUESTS FRI-SAT

16. What age range would you hope to attract to your establishment? AVERAGE GUEST IS 25-50

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

ADVERTISE THROUGH MANY INTERNET DISTRIBUTION CHANNELS, ADVERTISING THE HYATT PLACE HOTEL BRAND AND THE AMENITIES THE HOTEL OFFERS

18. Are you operating under a lease or franchise agreement? Yes (attach a copy) No

19. Owner of building where establishment is located: MADISON HOTEL ASSOCIATES, L.P.

Address of Owner: 8100 E. 22nd St North, Bldg. 500 Phone Number 316-681-5100
WICHITA KS 67226

20. 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? N/A Yes No

21. List the Directors of your Corporation/LLC MADISON HOTEL CORPORATION, GENERAL PARTNER OF APPLICANT

ROLF E. RUMFUS 8100 E. 22nd St North, Bldg. 500, WICHITA, KS 67226
Name Address

ROY R. BAKER 8100 E. 22nd St North, Bldg. 500, WICHITA, KS 67226
Name Address

Name Address

22. List the Stockholders of your Corporation/LLC MADISON HOTEL CORPORATION, GENERAL PARTNER OF APPLICANT

ROLF E. RUMFUS 8100 E. 22nd St North, Bldg. 500, WICHITA, KS 67226 100%
Name Address % of Ownership

Name Address % of Ownership

Name Address % of Ownership

23. What type of establishment are you? (Check all that apply) Tavern Nightclub Restaurant

Other Please Explain HOTEL

24 What type of food will you be serving, if any? _____

Breakfast Lunch Dinner

25. Please submit a sample menu with your application, if possible. What might eventually be included on your

operational menu when you open? Appetizers Salads Soups Sandwiches Entrees

Desserts Pizza Full Dinners

26. During what hours of your operation do you plan to serve food? 24 HOURS

27. What hours, if any, will food service not be available? N/A
28. Indicate any other product/service offered. Hotel
29. Will your establishment have a kitchen manager? Yes No
30. Will you have a kitchen support staff? Yes No
31. How many wait staff do you anticipate will be employed at your establishment? 2-4 GALLERY HOSTS
During what hours do you anticipate they will be on duty? 7AM-11AM, 3PM-11PM
32. Do you plan to have hosts or hostesses seating customers? Yes No
33. Do your plans call for a full-service bar? Yes No
If yes, how many bar stools do you anticipate having at your bar? _____
How many bartenders do you anticipate you would have working at one time on a busy night? _____
34. Will there be a kitchen facility separate from the bar? Yes No
35. Will there be a separate and specific area for eating only? Yes No GREAT ROOM AREA FOR GUESTS TO WORK, EAT, RELAX
If yes, what will be the seating capacity for that area? 50
36. What type of cooking equipment will you have? Stove Oven Fryers Grill Microwave
37. Will you have a walk-in cooler and/or freezer dedicated solely to the storage of food products? Yes No
COUNTER TOP REFRIGERATORS, REACH IN FREEZERS, MECHANICALLY COOLED DISPLAY UNITS
38. What percentage of your overall payroll do you anticipate will be devoted to food operation salaries?
3.9%
39. 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? 0%
40. Are you currently, or do you plan to become, a member of the Madison—Dane County Tavern League or the Tavern League of Wisconsin? Yes No
41. Are you currently, or do you plan to become, a member of the Wisconsin Restaurant Association or the National Restaurant Association? Yes No
-

42. What is your estimated capacity? 120-1st FLOOR; 130-2nd FLOOR MEETING SPACE
HOTEL- 420 TOTAL

43 Pursuant to Chapter 23 of the Madison General Ordinances, all restaurants and taverns serving alcohol beverages shall substantiate their gross receipts for food and alcohol beverage sales broken down by percentage. For new establishments, the percentage will be an estimate.

Gross Receipts from Alcoholic Beverages	1.8 %
Gross Receipts from Food and Non-Alcoholic Beverages	2.9 %
Gross Receipts from Other	95.3 %
Total Gross Receipts	100%

44. Do you have written records to document the percentages shown? Yes No
You may be required to submit documentation verifying the percentages you've indicated.

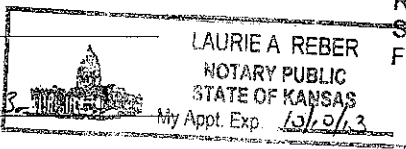
Read carefully before signing: Under penalty provided by law, the applicant states that the above information has been truthfully completed to the best of the knowledge of the signer. Signer agrees to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted will not be assigned to another. Any lack of access to any portion of a licensed premise 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 27th day of OCTOBER, 2009

Roy R. Baker
(Officer of Corporation/Member of LLC/Partner/Individual)

Laurie A. Reber
(Clerk/Notary Public)



Roy R. Baker
Senior Vice President
Finance & Treasurer

My commission expires 10/31/13

Appointment of New Liquor/Beer Agent

To be completed by Corporate Officer or Member of LLC

I, ROY R. BAKER, officer/member for MADISON HOTEL ASSOCIATES, L.P.
(Corporation/LLC), doing business as HYATT PLACE, authorize and appoint
BLAZE A. BRIGMAN (Name) as the liquor/beer agent for the premise
located at 333 W. WASHINGTON AVENUE, MADISON, WI

Subscribed and sworn to before me this

27th Day of OCTOBER, 2009

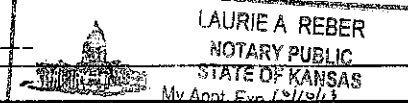
Laurie A. Reber
Notary Public, ~~Dane County, Wisconsin~~ KANSAS

My Commission Expires 10/10/13

Roy R. Baker

Signature of Officer/Member

Roy R. Baker
Senior Vice President
Finance & Treasurer



To be completed by appointed Liquor/Beer Agent

I, BLAZE BRIGMAN, appointed liquor/beer agent for
MADISON HOTEL ASSOCIATES, L.P. (name of Corporation or LLC), being first duly sworn
say I have vested in me, by properly authorized and executed written delegation, full authority
and control of the premise described in the license of such corporation or limited liability
company, and I am involved in the actual conduct of the business as an employee, or have a
direct financial interest in the business of the licensee, therein relating to the intoxicating
liquor/fermented malt beverage. The interest I have in the business is 0.5 %.

Subscribed and sworn to before me this

22 Day of October, 2009

Mary Jo Hottel
Notary Public, Dane County, Wisconsin

My Commission Expires 4/27/10

Blaze Brigman
Signature of Agent

The appointed Liquor/Beer Agent must complete the other side of this form.

ARCHITECT
 KREMBIEL
 1110 N. WASHINGTON
 MADISON, WI 53703
 TEL: 608.261.1100
 FAX: 608.261.1101
 WWW.KREMBIEL.COM

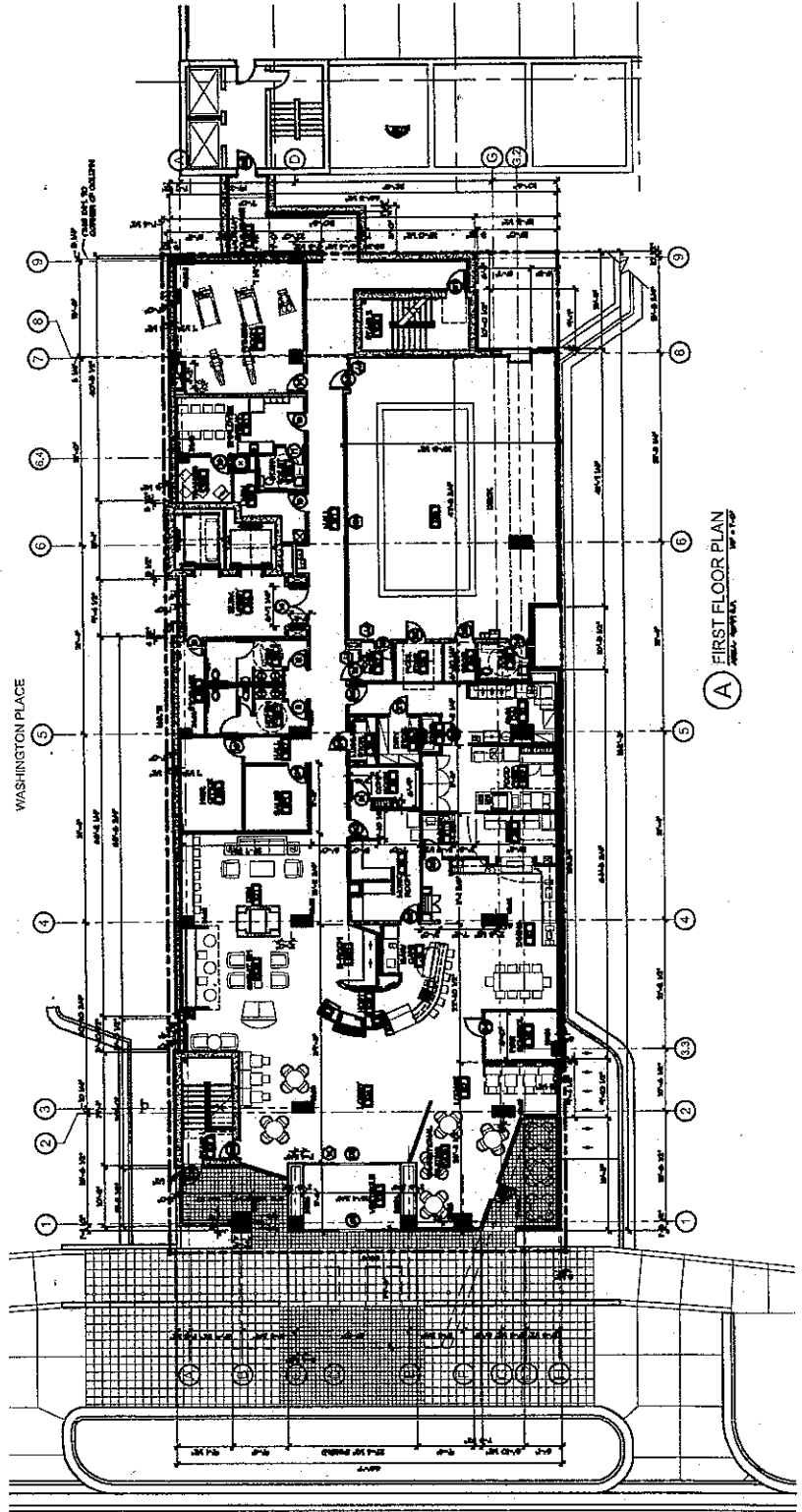


333 W. WASHINGTON
 MADISON, WI 53703
 TEL: 608.261.1100
 FAX: 608.261.1101
 WWW.KREMBIEL.COM

HYATT PLACE
 333 W. Washington Avenue
 MADISON WISCONSIN

PROJECT NO.
 SHEET NO.
 PROJECT NAME

SHEET NO.
A1.1
 DATE



WEST WASHINGTON AVE

ARCHITECT
 1000 N. WISCONSIN
 SUITE 200
 MADISON, WISCONSIN 53703
 TEL: 608.261.1234
 FAX: 608.261.1235
 WWW: WWW.KREHBIEL.COM



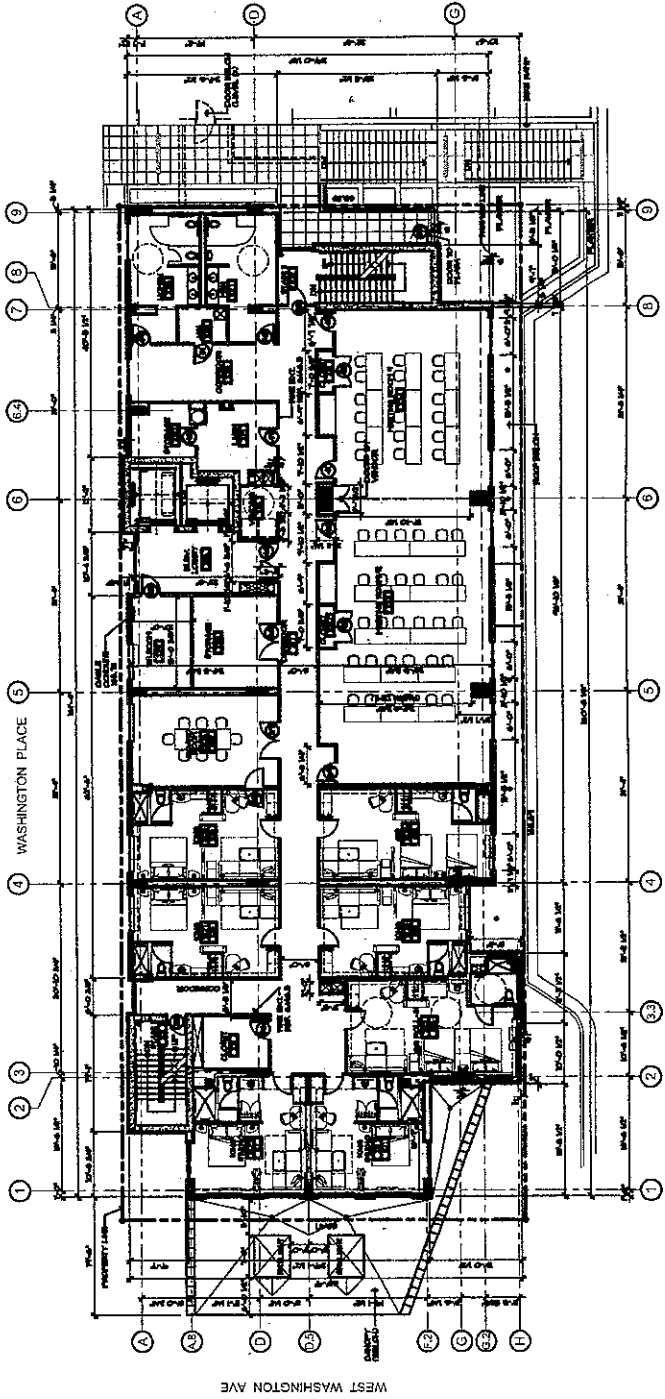
DATE

HYATT PLACE
 333 W. Washington Avenue
 MADISON, WISCONSIN

PROJECT NO.
 SHEET TITLE
SECOND FLOOR PLAN

SHEET NO.
A1.2

DATE



A SECOND FLOOR PLAN
 HYATT PLACE

WEST WASHINGTON AVE

1111 WEST WASHINGTON
 SUITE 1000
 MADISON, WISCONSIN 53703
 TEL: 608.261.1111
 FAX: 608.261.1112
 WWW.HOK.COM

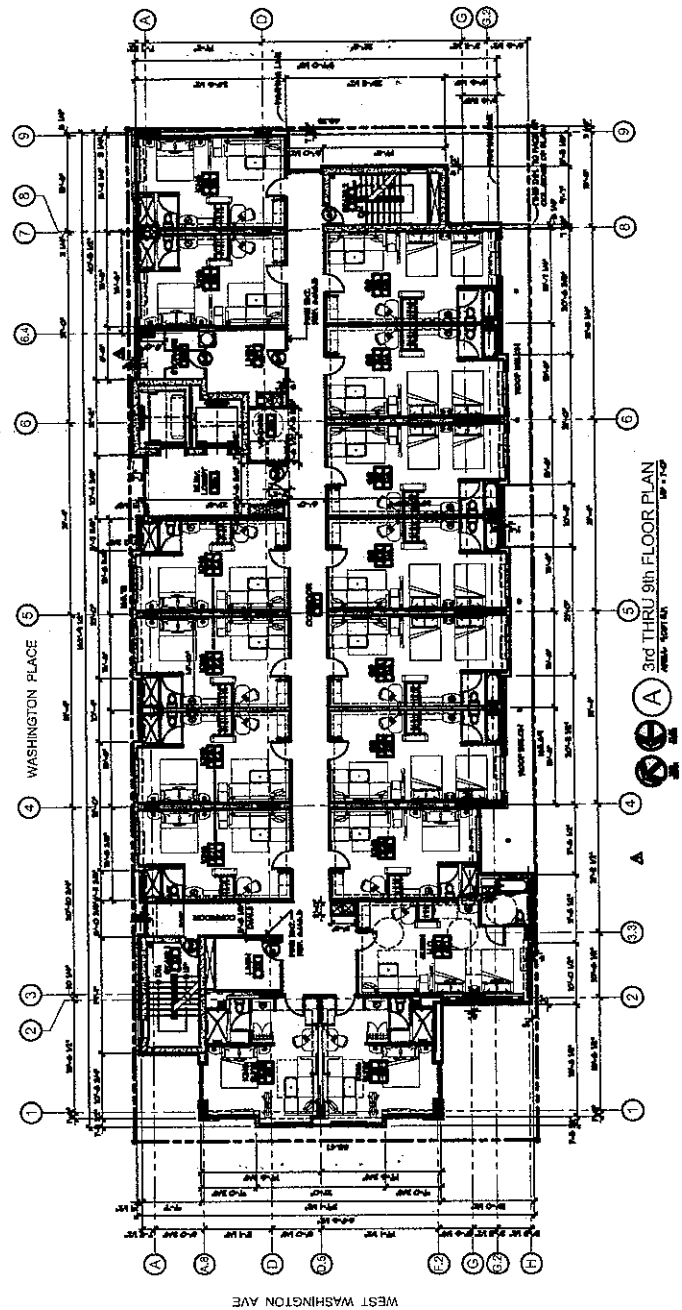


HOK ARCHITECTURE
 1300 S. KANAWHA
 SUITE 1000
 WEST PALM BEACH, FL 33411
 TEL: 561.833.1111
 FAX: 561.833.1112
 WWW.HOK.COM

HYATT PLACE
 333 W. Washington Avenue
 MADISON WISCONSIN

PROJECT NO.
 SHEET TITLE
 DATE

SHEET NO.
A1.3



3rd THRU 9th FLOOR PLAN
 10/10/10

WEST WASHINGTON AVE

DATE: 11/11/11
 DRAWN BY: J. B. BROWN
 CHECKED BY: J. B. BROWN
 PROJECT: HYATT PLACE

PROJECT: HYATT PLACE
 333 W. WASHINGTON AVENUE
 MADISON, WISCONSIN 53703
 ARCHITECT: KREHBIEL
 1111 EAST WASHINGTON AVENUE
 MADISON, WISCONSIN 53703
 TEL: 608.261.1111
 FAX: 608.261.1112



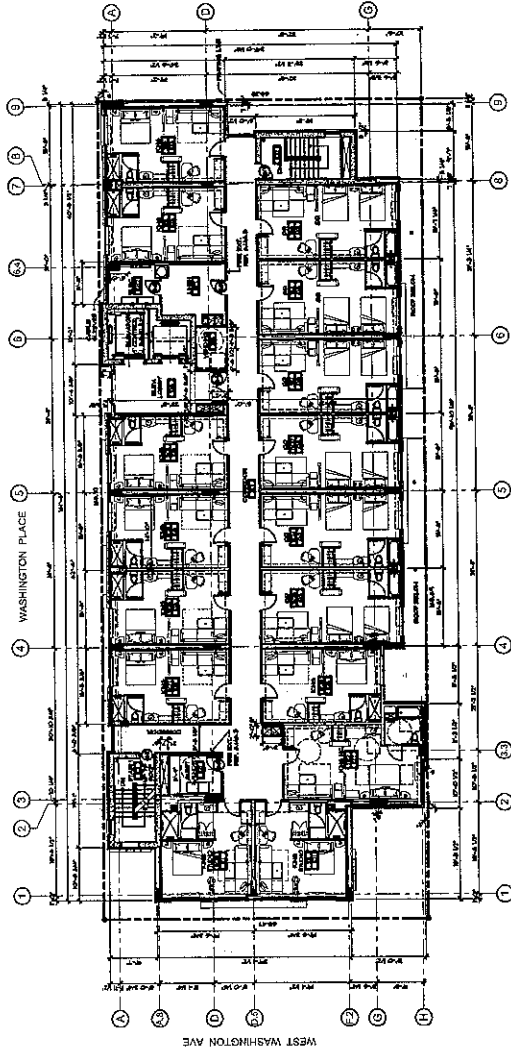
KREHBIEL ARCHITECTS
 1111 EAST WASHINGTON AVENUE
 MADISON, WISCONSIN 53703
 TEL: 608.261.1111
 FAX: 608.261.1112

HYATT PLACE
 333 W. Washington Avenue
 MADISON WISCONSIN

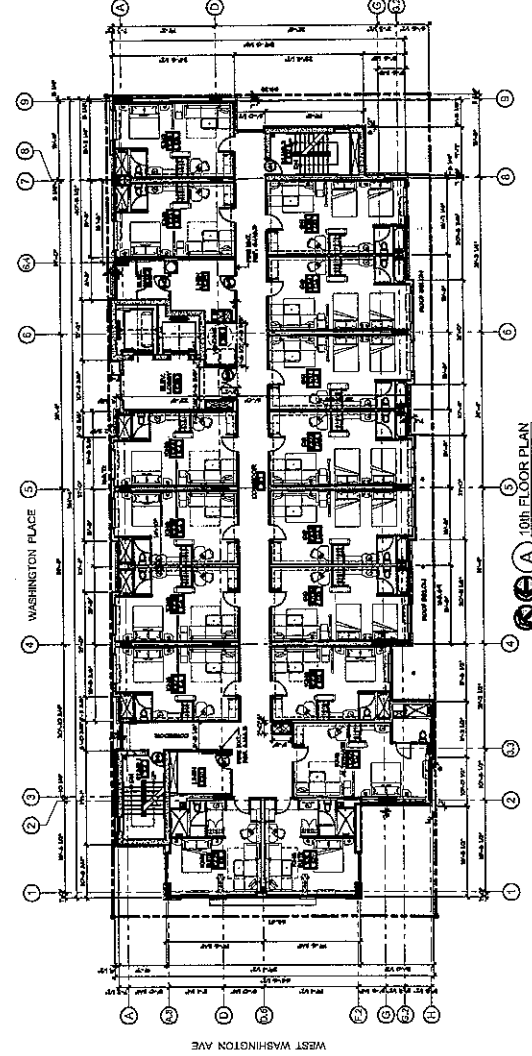


DATE: 11/11/11
 DRAWN BY: J. B. BROWN
 CHECKED BY: J. B. BROWN
 PROJECT: HYATT PLACE

SHEET NO. A1.4
 DRAWING TITLE:



11th FLOOR PLAN



10th FLOOR PLAN