

Liquor/Beer License **Application**

City of Madison Clerk 210 MLK Jr Blvd, Room 105

egistar file number) -ICLIIA - 2025 icense number) - Vidaver 5 Ider District #)	
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icense number) , Vidaver 5	- 00471
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	306
idei District #) (FUI	ice Sector)
Office Use C	nlv
1,115	(0)311

Clas	SS A: Beer, Milduor, Cider Madison, WI 53703				
Clas	Ss B: Beer, Liquor, Class C Wine Iicensing@cityofmadison.com 608-266-4601 MAY 14				
Sec	ction A – Applicant MADISON CI				
1.	List the name of your \square Sole Proprietor, \square Partnership, \bowtie Corporation/Nonprofit				
	Organization or \square Limited Liability Company exactly as it appears on your State Seller's Permit.				
	7-Eleven Inc				
2.	Trade Name (doing business as) 7-Eleven Inc. #35853J				
3.	Address to be licensed2216 UNIVERSITY AVE. Madison WI, 53726				
4.	Mailing address Attn: Licensing Dept. PO Box 139044 Dallas TX 75313				
5.	Anticipated opening date Already open and want to add Class A				
6.	Is the applicant an employee or agent of, or acting of behalf of anyone except the applicant an employee or agent of, or acting of behalf of anyone except the applicant and in question 1?				
	M No □ Yes (explain)				
7.	Does another alcohol beverage licensee or wholesale permitee have interest in this business? \square No \square Yes (explain)				
Sec	ction 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.

Alcoholic beverages are sold at the cash register and stored on the main sales floor, coolers utility/Storage closet.

9.	Applicants for on-premises consumption only. Estimated capacity (patrons and employees)			
	Indoor: N/A	Outdoo	r:	
10.	Describe existing p	arking and how parkin	g lot is to be monitored.	
11.	·		f liquor or beer during the pas	
	□ No ☑ Yes, li	cense issued to 7- Elev	/en # 35851J	(name of licensee)
This			organizations, and Limited Licking to Section D.	ability Companies
12.	Name of liquor lice	nse agent Christophe	r Martinez Perez	
		n agent resides Madisor		
14.	How long has the a	agent continuously resi	ded in the State of Wisconsin	5 years
	5. Has the liquor license agent completed the responsible beverage server training course?			
	☐ No, but will complete prior to ALRC meeting ☐ Yes, date completed			
16.	. State and date of registration of corporation, nonprofit organization, or LLC. DE, 07/18/1997			
17.		list the directors of you und check forms for ea	ur corporation or the member ach director/member.	s of your LLC.
	Title	Name	City and State of Residence	<u>ce</u>
	President Vice President	David L. Seltzer Rory L. King	Southlake Tx 76092	
	vice President	Trony E. rang	Heath, TX 75032	
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. CORPORATE CREATIONS NETWORK INC. 301 S. BEDFORD ST. STE 1 MADISON . WI 53703			poration. This is not
19.	Is applicant a subs	idiary of any other corp	poration or LLC?	
- - •	<i>,</i> '	xplain)		
20.			ector, any stockholder, liquor st in any other alcohol bevera	
	「No ⊠ Yes (e	xplain) Certain Speed throughout W	dway and 7-Eleven Stores the sconsin.	at hold liquor licenses

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						
	☐ 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? D No D Yes						
23.	Hours of ope	ration: please	e enter openi	ng and closing	times in the t	table below.	
	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
	24 hrs	24 hrs	24 firs	24 hrs	24 hrs-	24 hr s	24 hr s
	(Class B on	ly) Enter belo	ow any hours	when food ser	vice will not b	e available,	if applicable
		-	-		-		-
This (con 24.	ection E—Consumption on Premises his section applies to Class B and Class C applicants only. Class A license applicants consumption off premises) may skip to Section F. 4. Indicate any other product/service offered. 5. 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":						
26.	Do you have written records to document the percentages shown? No Yes You may be required to submit documentation verifying the percentages indicated. Do you plan to have live entertainment? No Yes—what kind?						
	If planned entertainment includes live music (except solo acoustic), a DJ, or a designated dance floor, please also complete an Entertainment License.				designated		
Section F—Required Contacts and Filings 27. 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 understand that I am required to host an information session at least one week before the ALRC meeting. \square No \square Yes						
29.	I agree to contact the Alderperson for this location to discuss my application and to invite						

	Phone E-mail				
41.	Corporate attorney, if applicable: Name				
-	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.				
	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)				
	Preferred language English				
	Business phone 972-828-1888 Business e-mail address shameka.wiley2@7-11.com				
	Contact person Shameka Wiley				
40.	Who may we contact between 8 a.m. and 4:30 p.m. regarding this license?				
39.	Federal Employer Identification Number 75-1085131				
38.	State Seller's Permit <u>4</u> <u>5</u> <u>6</u> <u>- 0000140841-04</u>				
37.	This application is for the license period ending June 30, 20_26				
Sec	tion G—Information for Clerk's Office				
36.	Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? \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 \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				
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				
	I agree to contact the neighborhood association representative prior to the ALRC meeting. $\hfill\square$ No \hfill Yes				
31.	I agree to contact the Deputy Clerk prior to the ALRC meeting. \square No \square Yes				
30.	I agree to contact the Police Department District Captain for this location prior to the ALRC meeting. ☐ No ☑ Yes				

	eding months Alcohol License Review Committee. A s:			
☐ Member background investigation forms	ess Tax Registration Certificate), Appointment of , Appoi			
If required items are missing, the applicatio Office until all requirements are submitted.	n will not be considered complete and will not be acc No exceptions are made.	cepted by the Clerk's		
been truthfully completed to the best of the to law, and that the rights and responsibiliti	nalty provided by law, the applicant states that the knowledge of the signer. Signer agrees to operate the seconferred by the license(s), if granted, will not be amises during inspection will be deemed a refusal to for revocation of this license.	the business according assigned to another.		
Penalty for materially false application inform on this application may be required to forfei	mation: Any person who knowingly provides materia it not more than \$1,000.	nlly false information		
(Officer of Corporation/Member of LLC/Partner/S	04/12/2025 ole Proprietor) (Date)			
(Officer of Corporation) Member of EEC/Farther/3	ole Proprietory (Date)			
Clerk's Office checklist for complete a	pplications			
 ✓ 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 ☐ Orange sign ☐ Orange business	Clerk's Office issued to the application:			
"Applying for a Liquor/Beer License	in the City of Madison" brochure with contact	information		
Date complete application filed with Clerk's	office 5 /14/25			
Date of ALRC meeting Date license granted by Common Council				
Date provisional issued Da	te license issued			