

City of Madison Supplemental Class B License Application

<input type="checkbox"/> Seller's Permit Number <i>Applied for</i> <input type="checkbox"/> Federal Employer Identification # <i>will provide</i> <input checked="" type="checkbox"/> Notarized Original Application Form <input checked="" type="checkbox"/> Notarized Supplemental Form <input type="checkbox"/> Orange Sign (Clerk's Office provides at time of application)	<input checked="" type="checkbox"/> Written Description of Premise <input checked="" type="checkbox"/> Background Investigation Form(s) <input type="checkbox"/> Notarized Transfer of Ownership <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 checked="" type="checkbox"/> Sample Menu <input checked="" type="checkbox"/> Business Plan
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1. Name of Applicant/Partner/Corporation/LLC The New Old Town Pub
2. Address of Licensed Premise 724 S Gammon Rd 53719
3. Telephone Number: Applied for 608 575-1093 4. Anticipated opening date: 01/05/11
5. Mailing address if not opening immediately 6313 Westin Dr Madison 53719
6. Have you contacted the Alderperson, Police Department District Captain, Alcohol Policy Coordinator, and the neighborhood association representative for the area in which you intend to locate? Yes No
7. Are there any special conditions desired by the neighborhood? Yes No
 Explain Provide clean safe neighborhood bar
Monitor Premises w/ security cameras / Control Clientel
8. Business Description, including hours of operation: Tavern 11:00 am - 2 a.m.

9. Do you plan to have live entertainment? No Yes—What kind? _____

10. Detailed written description of building, including overall dimensions, seating arrangements, capacity, bar size and all areas where alcohol beverages are to be sold and stored. **The licensed premise described below shall not be expanded or changed without the approval of the Common Council.**

89 ~~seating~~ capacity / overall dimensions 69'7" x 33'11"
7 booths, 5 tables, bar 25'6" x 8'10 3/4" seating 18
2 bathrooms each 11'10" x 9', Kitchen ^{20x9} walkin cooler

11. Are any living quarters directly or indirectly accessible and under control of the applicant? Yes No
 Please note that alcohol may be sold and stored only on the licensed premise, not in living quarters.

12. Describe existing parking and how parking lot is to be monitored We are placing new security cameras in all areas / parking is allowed throughout entire Highland gates shopping center

13. Describe your management experience, staffing levels, duties and employee training.
Both Pat & Ron ^{man mgr} ^{day mgr} have been managers supervisors in their own businesses & have had bartending experience
Lori Zenz bookkeeper / bartender

14. Identify the registered agent for your Corporation or LLC. This is your corporation's agent for service of process, notice or demand required or permitted by law to be served on the corporation. all employees will take responsible beverage server training + work with exper. staff

Lori Zenz 6313 Westin Dr Madison 53719

Name

Address

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

Woodmans employees for lunch. Neighborhood for night + weekend. We hope to attract young + old / Neighborhood bar

16. What age range would you hope to attract to your establishment? 24-70

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

Advertise on back of Woodmans receipts + flyers will be advertising lunch specials + pool + dart leagues

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

19. Owner of building where establishment is located: Simon Investments Inc / DSI Real Estate
Address of Owner: 2800 Royal Ave Ste 101 Phone Number 608-226-3063
53713

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? Yes No

21. List the Directors of your Corporation/LLC

<u>Lori Zenz</u>	<u>6313 Westin Dr</u>	<u>53719</u>
Name	Address	
<u>Ron Zenz</u>	<u>6313 Westin Dr</u>	<u>53719</u>
Name	Address	
<u>Pat Burke</u>	<u>6437 Toribrooke Ln</u>	<u>53719</u>
Name	Address	

22. List the Stockholders of your Corporation/LLC

<u>NA</u>		
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 _____

24. What type of food will you be serving, if any? Burgers, Chicken, Fries, Pizza

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? 11:00am - 7:00 p.m

27. What hours, if any, will food service not be available? 8 p.m. - 2:00 a.m. except pizza chips
28. Indicate any other product/service offered Alcohol
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? 0
 During what hours do you anticipate they will be on duty? —
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? 18
 How many bartenders do you anticipate you would have working at one time on a busy night? 2
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
 If yes, what will be the seating capacity for that area? —
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
38. What percentage of your overall payroll do you anticipate will be devoted to food operation salaries?
60%
39. If your business plan includes an advertising budget, what percentage of your advertising budget do you anticipate will be related to food? NA 80%
 What percentage of your advertising budget do you anticipate will be drink related? NA 20%
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 NOT SURE

42. What is your estimated capacity? 89

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	40 %
Gross Receipts from Food and Non-Alcoholic Beverages	50 %
Gross Receipts from Other	10 %
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. *New Establishment*

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 28th day of Sept, 2010
Wendy E. Barta
(Clerk/Notary Public)
My commission expires 5/6/2012

Sou A. Rowe
(Officer of Corporation/Member of L.C./Partner/Individual)
Sou A. Rowe

STARTERS

Soup of the day (Homemade daily)	Cup	1.50
	Bowl	2.00
Harry's	Cup	1.75
Famous Chili	Bowl	2.50
	Add Cheese and Onions .....	.35

ON THE SIDE....

French Fries	Reg. 1.25
Onion Rings	2.25
Cheddar Cheese Balls (8 oz.)	3.00
Chips .....	.60
Chicken Wings	3.50
Peanuts In The Shell .....	.75
Beer Nuts .....	.50
Cole Slaw .....	.50

Burgers and sandwiches available in a basket including
fries and coleslaw add \$1.35

Hamburger (1/3 lb.)	2.95
Cheddar Burger	3.25
Swiss Burger	3.25
Bucky Burger	3.75
(Bacon with choice of Swiss or Cheddar Cheese)	

SANDWICHES

Pork Chop (Plain or BBQ with Lettuce & Tomato)	3.75
Reuben	4.25
Steak Sandwich	4.00
Patty Melt	3.75
(1/3 lb. Burger with Cheddar, Swiss Cheese and Raw Onion, served on grilled Light Rye Bread)	
Ham and Cheese (Served Hot or Cold)	3.50
Corned Beef Sandwich	3.75
(with Cheese, served Hot or Cold)	
Breaded Chicken (4 oz. Filet with Lettuce & Tomato)	4.25
Teriyaki Chicken Sandwich	4.50
(Grilled Unbreaded Chicken Breast Marinated with Teriyaki Sauce served with Lettuce Tomato and Mayo or BBQ Sauce)	
Turkey Sandwich	3.50
(Thin sliced Turkey Breast on Bread or a Bun with Lettuce, Tomato and Mayo, served Hot or Cold)	
Roast Beef	3.50
(Sliced Roast Beef with Cheese, Lettuce and Tomato, served Hot or Cold)	
Cod Filet (with Lettuce & Tomato)	3.50
Brat	3.00
(Jumbo Smoked Brat with Raw or Fried Onions)	
Hot Dog	2.50
Wisconsin Cheese (Grilled or Cold)	2.50
BLT	2.50

Extras:

Lettuce and Tomato .....	.25
Cheese .....	.35
Mushrooms .....	.50
Sauerkraut .....	.35
Bacon .....	.50

