



40617

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 Class A Cider

Section A – Applicant

1. 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.

2. This application is for the license period ending June 30, 2016.
3. 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.

PDO FOOD STORES, INC.

4. Trade Name (doing business as) PDQ STORE #130

5. Address to be licensed 4741 LIEN ROAD, MADISON, WI 53704

6. Mailing address P.O. BOX 620997, MIDDLETON, WI 53562

7. Anticipated opening date _____

8. Is the applicant an employee or agent of, or acting of behalf of anyone except the applicant named in question 2?
 No Yes (explain) _____

9. Does another alcohol beverage licensee or wholesale permittee have interest in this business?
 No Yes (explain) _____

Section B—Premises

10. 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.

COOLERS & SALES FLOOR

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2. This application is for the license period ending June 30, 2016.
3. 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.

PDO FOOD STORES, INC.

4. Trade Name (doing business as) PDQ STORE #127

5. Address to be licensed 3153 MAPLE GROVE DRIVE, MADISON, WI 53719

6. Mailing address P.O. BOX 620997, MIDDLETON, WI 53562

7. Anticipated opening date _____

8. Is the applicant an employee or agent of, or acting of behalf of anyone except the applicant named in question 2?
 No Yes (explain) _____

9. Does another alcohol beverage licensee or wholesale permittee have interest in this business?
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Section A – Applicant

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3. 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.

PDO FOOD STORES, INC.

4. Trade Name (doing business as) PDO STORE #125

5. Address to be licensed 1625 N. STOUGHTON ROAD, MADISON, WI 53704

6. Mailing address P.O. BOX 620997, MIDDLETON, WI 53562

7. Anticipated opening date _____

8. Is the applicant an employee or agent of, or acting of behalf of anyone except the applicant named in question 2?

- No Yes (explain) _____

9. Does another alcohol beverage licensee or wholesale permittee have interest in this business?

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Section B—Premises

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3. 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.

PDO FOOD STORES, INC.

4. Trade Name (doing business as) PDQ STORE #120
5. Address to be licensed 7502 MINERAL POINT ROAD, MADISON WI 53717
6. Mailing address P.O. BOX 620997, MIDDLETON, WI 53562
7. Anticipated opening date _____

8. Is the applicant an employee or agent of, or acting of behalf of anyone except the applicant named in question 2?
- No Yes (explain) _____
9. Does another alcohol beverage licensee or wholesale permittee have interest in this business?
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3. 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.

PDO FOOD STORES, INC.

4. Trade Name (doing business as) PDQ STORE #115

5. Address to be licensed 4402 E. BUCKEYE ROAD, MADISON, WI 53716

6. Mailing address P.O. BOX 620997, MIDDLETON, WI 53562

7. Anticipated opening date _____

8. Is the applicant an employee or agent of, or acting of behalf of anyone except the applicant named in question 2?
 No Yes (explain) _____

9. Does another alcohol beverage licensee or wholesale permittee have interest in this business?
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Section B—Premises

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- 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.

 PDO FOOD STORES, INC.
- Trade Name (doing business as) _____
 PDQ STORE #109
- Address to be licensed _____
 1434 NORTHPORT DRIVE, MADISON, WI 53704
- Mailing address _____
 P.O. BOX 620997, MIDDLETON, WI 53562
- Anticipated opening date _____
- Is the applicant an employee or agent of, or acting of behalf of anyone except the applicant named in question 2?
 No Yes (explain) _____
- Does another alcohol beverage licensee or wholesale permittee have interest in this business?
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PDO FOOD STORES, INC.

4. Trade Name (doing business as) PDQ STORE #129

5. Address to be licensed 2601 FISH HATCHERY ROAD, MADISON, WI 53713

6. Mailing address P.O. BOX 620997, MIDDLETON, WI 53562

7. Anticipated opening date _____

8. Is the applicant an employee or agent of, or acting of behalf of anyone except the applicant named in question 2?
 No Yes (explain) _____

9. Does another alcohol beverage licensee or wholesale permittee have interest in this business?
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PDO FOOD STORES, INC.
- Trade Name (doing business as) PDQ STORE #117
- Address to be licensed 2538 FISH HATCHERY ROAD, MADISON, WI 53713
- Mailing address P.O. BOX 620997, MIDDLETON, WI 53562
- Anticipated opening date _____
- Is the applicant an employee or agent of, or acting of behalf of anyone except the applicant named in question 2?
 No Yes (explain) _____
- Does another alcohol beverage licensee or wholesale permittee have interest in this business?
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PDO FOOD STORES, INC.

4. Trade Name (doing business as) PDQ STORE #122

5. Address to be licensed 2402 W. BROADWAY, MADISON, WI 53713

6. Mailing address P.O. BOX 620997, MIDDLETON, WI 53562

7. Anticipated opening date _____

8. Is the applicant an employee or agent of, or acting of behalf of anyone except the applicant named in question 2?
 No Yes (explain) _____

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