

## Liquor/Beer License

**Application** 

City of Madison Clerk 210 MLK Jr Blvd, Room 103

(Agenda Item	Number)
(Legistar file	number)
LICLIB -	-2023-00742
	harl
(License num	ber)
(License num	Der )

	ss A: ☐ Beer, ☐ Liquor, ☐ Cider Madison, WI 53703	Office ose offiy			
Clas	ss B: Beer, \( \text{Liquor}, \) \( \text{Iicensing@cityofmadison.com} \) \( \text{Class C Wine} \) \( 608-266-4601 \)				
Sec	ction A – Applicant				
1.	List the name of your $\square$ Sole Proprietor, $\square$ Partnership, $\blacksquare$ Co Organization or $\square$ Limited Liability Company exactly as it appeared.  North Central Management, Inc.	•			
2.	Trade Name (doing business as) Moxy by Marriott Madison Downtown				
3.	Address to be licensed 823 E. Washington Avenue, Madison, WI 53703				
4.	Mailing address PO Box 620994, Middleton, WI 53562				
5.	Anticipated opening date 3/1/2024				
6.	anyone except the applicant				
	■ No □ Yes (explain)				
7.	Does another alcohol beverage licensee or wholesale permitee business? ■ No □ Yes (explain)	have interest in this			
<b>Sec</b> 8.	ction B—Premises  Describe in words the building or buildings where alcohol bever stored. Include all rooms including living quarters, if used, and the sales, service, and/or storage of alcohol beverages and receive sold and stored only on the premises as approved by Commiscense.	any outdoor seating used for eipts. Alcohol beverages may			
	See attached.				

## Liquor / Beer License Application Moxy by Marriott Madison Downtown

## Section B – Premises

8. The premise is an 8 floor, 151 room Moxy by Marriott hotel currently under construction. The hotel is scheduled to open in March of 2024. The first floor of the hotel will feature the lobby, signature Bar Moxy, and lobby pantry selling prepackaged food and beverages. Alcohol will be sold and served from the Bar Moxy on the 1<sup>st</sup> and 2<sup>nd</sup> floors, in the pantry, small outdoor seating patio, walk up window and also in the meeting room on the 8<sup>th</sup> floor. Liquor will be stored in the bar area on the 1<sup>st</sup> floor and in a locked closet/cage that only the Manager has access to. Receipts will be stored in the General Manager's office on the 2<sup>nd</sup> floor. Food will be served from the lobby bar and 8<sup>th</sup> floor meeting space when leased.

Not included in the premises is the 8<sup>th</sup> floor restaurant space that will be leased and operated by a 3<sup>rd</sup> party. This space will be licensed separately.

9.	Applicants for on-premises consumption only. Estimated capacity (patrons and employees Indoor: 836 Outdoor: N/A			s and employees):	
10.	Describe existing parking and how parking lot is to be monitored.  Parking will be available at the Livingston Street Garage in accordance with an executed				
Parking Agreement with the City of Madison. Copy of Parking Agt available u				able upon request	
11.	1. Was this premises licensed for the sale of liquor or beer during the past license year?				
	■ No □ Yes, lie	cense issued to		(name of licensee)	
This			ganizations, and Limited Liabil to Section D.	lity Companies	
12.	2. Name of liquor license agent Sheri Straka				
13.	B. City, state in which agent resides Stoughton, WI				
14.	. How long has the agent continuously resided in the State of Wisconsin? 41 years				
15.	Has the liquor licen	se agent completed the	responsible beverage server tr	raining course?	
	☐ No, but will com	nplete prior to ALRC mee	ting 🗏 Yes, date completed	4/11/2022	
16.	. State and date of registration of corporation, nonprofit organization, or LLC. Wisconsin, 8/26/1981				
17.	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		
	Director	David A. Lenz	Madison, WI		
	Director	Kris Lenz	Madison, WI		
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.  North Central Group, Inc.				
19.	Is applicant a subsidiary of any other corporation or LLC?  No Service Yes (explain) North Central Group, Inc. is the sole owner of North Central Management, Inc.				
20.	. 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.				

## 20. The Officers and Directors of North Central Management, Inc. have the following liquor licenses in the state of Wisconsin:

Licensee: North Central Management, Inc.

d/b/a: Brookfield Conference Center Type of License: Class B Liquor License issued by: State of Wisconsin

Licensee: North Central Management, Inc.

d/b/a: Brookfield Conference Center

Type of License: Class B Beer

License issued by: City of Brookfield, WI

Licensee: North Central Management, Inc.

d/b/a: Hilton Garden Inn Brookfield Type of license: Class B Liquor

License issued by: City of Brookfield, WI

Licensee: North Central Management, Inc.

d/b/a: Home2 Suites Madison

Type of license: Class B Combination License issued by: City of Madison, WI

Licensee: North Central Management, Inc.

d/b/a: DoubleTree Madison East

Type of license: Class B Combination & Entertainment License

License issued by: City of Madison, WI

Licensee: North Central Management, Inc.

d/b/a: Tru by Hilton

Type of license: Class B Beer, Class C Wine License issued by: City of Madison, WI

Licensee: North Central Management, Inc.

d/b/a: AC Hotel

Type of license: Class A Beer, Class A Liquor

License issued by: City of Madison, WI

Section D—Business Plan  21. What type of establishment is contemplated?  ☐ Tavern ☐ Nightclub ☐ Restaurant ☐ Liquor Store ☐ Grocery Store							
	☐ Convenie	ence Store wit	thout gas pui	mps 🏻 Conv	venience Store	e with gas pu	ımps
	Other Hotel						
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? $\square$ No $\square$ Yes $^{\text{N/A}}$						
23.	Hours of operation: please enter opening and closing times in the table below. Hotel is open 24/7. Hours of the lobby bar are listed below:						
	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
	9:00AM - 2:00 AM	9:00 AM - 2:00 AM	9:00AM -2:00AM	9:00 AM - 2:00 AM	9:00 AM - 2:00 AM	9:00 AM = 2:00AM	9:00 AM - 2:00 AM
	(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  is 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. Prepackaged food & sundries sold at lobby pantry  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: *  3  % Alcohol						
	Do you have written records to document the percentages shown? $\blacksquare$ No $\square$ Yes You may be required to submit documentation verifying the percentages indicated.						
26.	Do you plan	to have live e	ntertainmen	t? 🛘 No 🗏	Yes—what k	ind? We may h	nave live music
	performed by a DJ or acoustic performer in the lobby/bar area on the 1st & 2nd floor.						
	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							
	. I understand that I am required to host an information session at least one week before the ALRC meeting. $\square$ No $\blacksquare$ Yes						
	_		•	this location to	•	pplication an	d to invite

30.	I agree to contact the Police Department District Captain for this location prior to the ALRC meeting. $\square$ No $\blacksquare$ Yes
31.	I agree to contact the Deputy Clerk prior to the ALRC meeting. $\square$ No $\blacksquare$ Yes
32.	I agree to contact the neighborhood association representative prior to the ALRC meeting. $\hfill\square$ No $\hfill$ 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 $\blacksquare$ 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 $\blacksquare$ 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 $\ \blacksquare$ Yes
36.	Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? $\square$ No $\square$ Yes
Sec	ction G—Information for Clerk's Office
37.	This application is for the license period ending June 30, $20\underline{24}$ .
	State Seller's Permit <u>4 5 6 - 0 0 0 0 0 5 8 2 4 3 - 0 3</u>
39.	Federal Employer Identification Number 46-3793484
	Who may we contact between 8 a.m. and 4:30 p.m. regarding this license?  Contact person Christine Hoebel
	Business phone 608-662-3628 Business e-mail address choebel@ncghospitality.com
	Preferred language English
	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.
41.	Corporate attorney, if applicable: Name
	Phone E-mail

<b>NOTICE:</b> Completed application are due by noon of the third Monday (fourth, if the Clerk's office is closed on the third Monday) to get on the agenda for the proceeding months Alcohol License Review Committee. A completed application <b>must</b> be accompanied by the following items:					
Copy of State Seller's Permit (Not Busine	ess Tax Registration Certificate), 🗏 Appointment of	Agent (if Corp/LLC),			
	, Articles of Incorporation (if Corp/LLC),				
	☐ Copy of Lease, ☐ Business Plan, and ☐ Sample Menu (if applying for Class B license)				
If required items are missing, the application will not be considered complete and will not be accepted by the Clerk's Office until all requirements are submitted. No exceptions are made.					
<b>Read carefully before signing:</b> 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.					
Penalty for materially false application information: Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.					
(Officer of Corporation Member of LLC/Partner/Sole Proprietor)  (Date)					
(Officer of Corporation Member of LLC/Partner/Sole Proprietor)  (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 Clerk's Office issued to the application:					
☐ Orange sign ☐ Orange business card					
☐ "Applying for a Liquor/Beer License in the City of Madison" brochure with contact information					
Date complete application filed with Clerk's Office					
Date of ALRC meeting Date license granted by Common Council					
Date provisional issued Date license issued					