

Liquor/Beer License Application

(Legistar file number)
LICLIB-2019-00
(License number)

City of Madison Clerk 210 MLK Jr Blvd, Room 103 Madison, WI 53703

Class A: \square Beer, \square Liquor, \square Cider

Class B: ☑ Beer, ☐ Liquor,

Class C Wine

licensing@cityofmadison.com 608-266-4601

Section A - Applicant

	ction A Applicant			
1. List the name of your \square Sole Proprietor, \square Partnership, \square Corporation/Nonprofit				
	Organization or Limited Liability Company exactly as it appears on your State Seller's			
	Permit.			
	DANDYFIRE IN C. LADRICAN			
2	Trade Name (doing business as) DING·VING			
2.	Trade Name (doing business as)			
3.	Address to be licensed 116 KING STREET			
4.	Mailing address 314 S MIDVALE BWV. MAVISON, 53705			
5.	Anticipated opening date JULY 2019			
6.	Is the applicant an employee or agent of, or acting of behalf of anyone except the applicant			

6. Is the applicant an employee or agent of, or acting of behalf of anyone except the applican named in question 3?

No 🗆 Yes (explain)

7. Does another alcohol beverage licensee or wholesale permitee have interest in this business?

No Yes (explain)

DANTYFINE, INC. DBAWOOFS @ 114 KWGS1.

Section B—Premises

8. 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.

FREE STANDING, ADJACENT BUILDING @ 116 KINGSTREET,
STONE FRONT UPSTAIRS COOLERS AND FAR, BASISHERT
STONEGE MUSAS, COOLERS, OUTDOOR SIDENBUK CAFE
DURING OUTDOOR SEASON.

9.	Applicants for on-	oremises consumption or	nly. Estimated capacity (patrons	and employees):	
	Indoor: 99	Outdoor:	30		
10.	Describe existing p	parking and how parking	lot is to be monitored.		
	STREET PARKING				
		- 1 6145 154	C1 7.75		
11.	Was this premises	licensed for the sale of I	iquor or beer during the past lice	ense year?	
	No □ Yes, li	icense issued to	(r	name of licensee)	
This			rganizations, and Limited Liabilit o to Section D.	y Companies	
12.	Name of liquor lice	ense agent <u>DINO N</u>	MANIACI		
13.	. City, state in which agent resides				
14.	How long has the a	agent continuously reside	ed in the State of Wisconsin?	40+	
15.	5. Has the liquor license agent completed the responsible beverage server training course?				
× 17 5	\square No, but will complete prior to ALRC meeting \square Yes, date completed				
16.	16. State and date of registration of corporation, nonprofit organization, or LLC.				
	WISCONSIN	1	as fill	** : 2	
17.	7. 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	7	
	OWNER	DINOMANIACI	MA 91504 WI 58705	,	
	OWNER	JASON HOKE	MATISON, NI 53705	, , , , , , , , , , , , , , , , , , ,	
			August St.		
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.				
19.	Is applicant a subs	idiary of any other corpo	oration or LLC?		
			ANDAR ANDARANT B	Ta say	
20.	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 Pres (explain) ALSO PEA WOOF'S Q AGACRIT				
	ROLDING 114 KINGST				

	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					ımps	
	☐ Other	161 5 5 6					. 197
22.							
23.	Hours of ope	eration: pleas	e enter open	ing and closing	times in the	table below.	
	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
	12-9	5-2	5-2	5-2	5-2	4-2:30	2-230
	(Class B on	ly) Enter belo	ow any hours	when food ser	vice will not b	e available,	if applicable
	,	, , <u>'</u>	* <u> </u>	-	-	. '-Y L'	
Section E—Consumption on Premises This section applies to Class B and Class C applicants only. Class A license applicants (consumption off premises) may skip to Section F. 24. Indicate any other product/service offered.							
		(e de la colle		thi series	to for food
	25. 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: (35) 55 (35) 65 (35) 65 (36) 60 (37) 60 (37) 60 (37) 60 (37) 60 (38) 6						
	Do you have written records to document the percentages shown? No Yes You may be required to submit documentation verifying the percentages indicated.						
26.	Do you plan	to have live e	entertainmen	t? 🗖 No 🛚	Yes—what k	ind?	of Markin a
				. vi	·		
				music (except s ntertainment Li		, a DJ, or a c	lesignated
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. \Box No \Box Yes						
29.				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 \square Yes					
31.	I agree to contact the Deputy Clerk prior to the ALRC meeting. No 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 90 days of the Common Council granting this license. The license shall be considered surrendered if not issued within 90 days of being granted. No 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					
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					
36.	Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? No \Box Yes					
Sec	tion G—Information for Clerk's Office					
37.	This application is for the license period ending June 30, 20					
38.	State Seller's Permit 4 5 6 - 0 0 0 1 8 4 6 7 9 2 - 0 3					
39.	Federal Employer Identification Number 201327223 (EIN)					
40.	Who may we contact between 8 a.m. and 4:30 p.m. regarding this license?					
	Contact person DINO MANIACI					
2	Business phone 64645432 Business e-mail address MAN VIGAT PAOLICA					
	Preferred language Figust					
	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					

NOTICE: 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 must be accompanied by the following items:					
☐ Copy of State Seller's Permit (Not Business Tax Registration Certificate), ☐ Appointment of Agent (if Corp/LLC), ☐ Member background investigation forms, ☐ Articles of Incorporation (if Corp/LLC), ☐ Floor Plans, ☐ 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.					
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 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) 3/18/19 (Date)					
Clerk's Office checklist for complete a	pplications				
 □ WI Seller's Permit Certificate (matching articles of incorporation) □ FEIN □ Written description of premises 	☐ 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:					
\square Orange sign \square Orange business card					
☐ "Applying for a Liquor/Beer License	\square "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 Da	te license issued	NA TOPIC AND			