



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

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, 2014.
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.

Ground Zero Coffee LLC

4. Trade Name (doing business as) Cargo Coffee
5. Address to be licensed 750 East Washington Ave., Madison, WI 53703
6. Mailing address 1309 S. Park St., Madison, WI 53715
7. Anticipated opening date 1/13/2014

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.

We are part of the Constellation project on East Washington Ave. It is new commercial space.

2400 S.F. at 1st level. 100 Capacity with
20 outdoor Cafe Seating. Beer and wine will be
stored in cooler and storage in kitchen.

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- 11. Attach a floor plan, no larger than 8 ½ by 14, showing the space described above.
- 12. Applicants for on-premises consumption: list estimated capacity 100
- 13. Describe existing parking and how parking lot is to be monitored.
There is an attached parking garage that is monitored by Madison Property Management.
- 14. Was this premises licensed for the sale of liquor or beer during the past license year?
 No Yes, license issued to _____ (name of licensee)
- 15. Attach copy of lease.

Section C—Corporate Information

This section applies to corporations, nonprofit organizations, and Limited Liability Companies only. Sole proprietorships and partnerships, skip to Section D.

- 16. Name of liquor license agent Lindsey Lee/owner of Ground Zero Coffee LLC
- 17. City, state in which agent resides Madison, WI
- 18. How long has the agent continuously resided in the State of Wisconsin? 16 years
- 19. Appointment of agent form and background check form are attached.
- 20. Has the liquor license agent completed the responsible beverage server training course?
 No, but will complete prior to ALRC meeting Yes, date completed _____
- 21. State and date of registration of corporation, nonprofit organization, or LLC.
WI/1997

- 22. 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
Owner	Lindsey Lee	Madison, WI
Owner	Beth Rosen	Madison, WI

- 23. 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.
Lindsey Lee

24. Is applicant a subsidiary of any other corporation or LLC?
 No Yes (explain) _____
25. 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) _____

Section D—Business Plan

26. What type of establishment is contemplated?
 Tavern Nightclub Restaurant Liquor Store Grocery Store
 Convenience Store without gas pumps Convenience Store with gas pumps
 Other Coffee shop _____

27. Business description I own Ground Zero Coffee and Cargo Coffee. We are and will continue to be a seller of coffee and light food establishment. Beer and wine at this location will be a small addition to our menu. _____

28. Hours of operation 6 a.m. to 10 p.m. _____

29. Describe your management experience I have owned and operated Ground Zero Coffee and Cargo Coffee for sixteen years. _____

30. List names of managers below, along with city and state of residence.
Lynn Lee/Madison, WI _____

31. Describe staffing levels and staff duties at the proposed establishment _____
We will have three to four staff members working through out the day and evening. They will work together to serve and operate the coffee shop.

32. Describe your employee training Based on past experience, we give our recently hired employees two weeks of training. _____

33. Utilizing your market research, describe your target market.

We make a point to attract all people as customers of Cargo Coffee. We attract people in the building trades, high tech and those who are retired among others.

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

We do little advertising besides ads in the neighborhoods newsletters and underwriting WORT radio.

35. Are you operating under a lease or franchise agreement? No Yes

36. 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?
 No Yes

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.

37. Do you plan to have live entertainment? No Yes—what kind? _____

Coffee house style singer/songwriters and soft jazz on occasion.

38. What age range do you hope to attract to your establishment? All ages

39. What type of food will you be serving, if any? We have a light food menu.

Breakfast Brunch Lunch Dinner

40. Submit a sample menu if applicable. What will be included on your operational menu?

Appetizers Salads Soups Sandwiches Entrees Desserts
 Pizza Full Dinners

41. During what hours of operation do you plan to serve food? all hours

42. What hours, if any, will food service not be available? _____

43. Indicate any other product/service offered. _____

44. Will your establishment have a kitchen manager? No Yes

45. Will you have a kitchen support staff? No Yes

46. How many wait staff do you anticipate will be employed at your establishment? 12

During what hours do you anticipate they will be on duty? all

47. Do you plan to have hosts or hostesses seating customers? No Yes

48. Do your plans call for a full-service bar? No Yes
 If yes, how many barstools do you anticipate having at your bar? _____
 How many bartenders do you anticipate having work at one time on a busy night? _____
49. Will there be a kitchen facility separate from the bar? No Yes
50. Will there be a separate and specific area for eating only?
 No Yes, capacity of that area _____
51. What type of cooking equipment will you have?
 Stove Oven Fryers Grill Microwave
52. Will you have a walk-in cooler and/or freezer dedicated solely to the storage of food products?
 No Yes
53. What percentage of payroll do you anticipate devoting to food operation salaries? 100
54. If your business plan includes an advertising budget:
 What percentage of your advertising budget do you anticipate will be related to food? _____
 What percentage of your advertising budget do you anticipate will be drink related? _____
55. Are you currently, or do you plan to become, a member of the Madison—Dane County Tavern League or the Tavern League of Wisconsin? No Yes
56. Are you currently, or do you plan to become, a member of the Wisconsin Restaurant Association or the National Restaurant Association? No Yes
57. All restaurants and taverns serving alcohol must substantiate their gross receipts for food and alcohol beverage sales broken down by percentage. New establishments estimate percentages:
<5 % Alcohol 25 % Food 70 % Other
58. Do you have written records to document the percentages shown? No Yes
 You may be required to submit documentation verifying the percentages you've indicated.

Section F—Required Contacts and Filings

59. I understand that liquor/beer license renewal applications are due April 15 of every year, regardless of when license was initially granted. No Yes
60. I understand that I am required to host an information session at least one week before the ALRC meeting. No Yes
61. I agree to contact the Alderperson for this location to discuss my application and to invite the Alderperson to my information session. No Yes
62. I agree to contact the Police Department District Captain for this location prior to the ALRC meeting. No Yes
63. I agree to contact the Alcohol Policy Coordinator prior to the ALRC meeting. No Yes
64. I agree to contact the neighborhood association representative prior to the ALRC meeting.
 No Yes

65. I understand we must file a Special Occupational Tax return (TTB form 5630.5) before beginning business. [phone 1-800-937-8864] No Yes
66. I understand a Wisconsin Seller's Permit must be applied for and issued in the same name as that shown in section 2, above. [phone 608-266-2776] No Yes
67. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor?
 No Yes

Section G—Information for Clerk's Office

68. State Seller's Permit 4 5 6 0 0 0 0 5 5 0 3 2 9 0 2

69. Federal Employer Identification Number 39-1919352

70. Who may we contact between 8 a.m. and 4:30 p.m. regarding this license?

Contact person Lindsey Lee

E-mail address cargocoffee@yahoo.com

Phone 220-7910 Preferred language English

71. Corporate attorney, if applicable: Name _____

Phone _____ E-mail _____

Read carefully before signing in front of a notary: 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.

Subscribed and Sworn to before me:

this 21st day of November, 2013

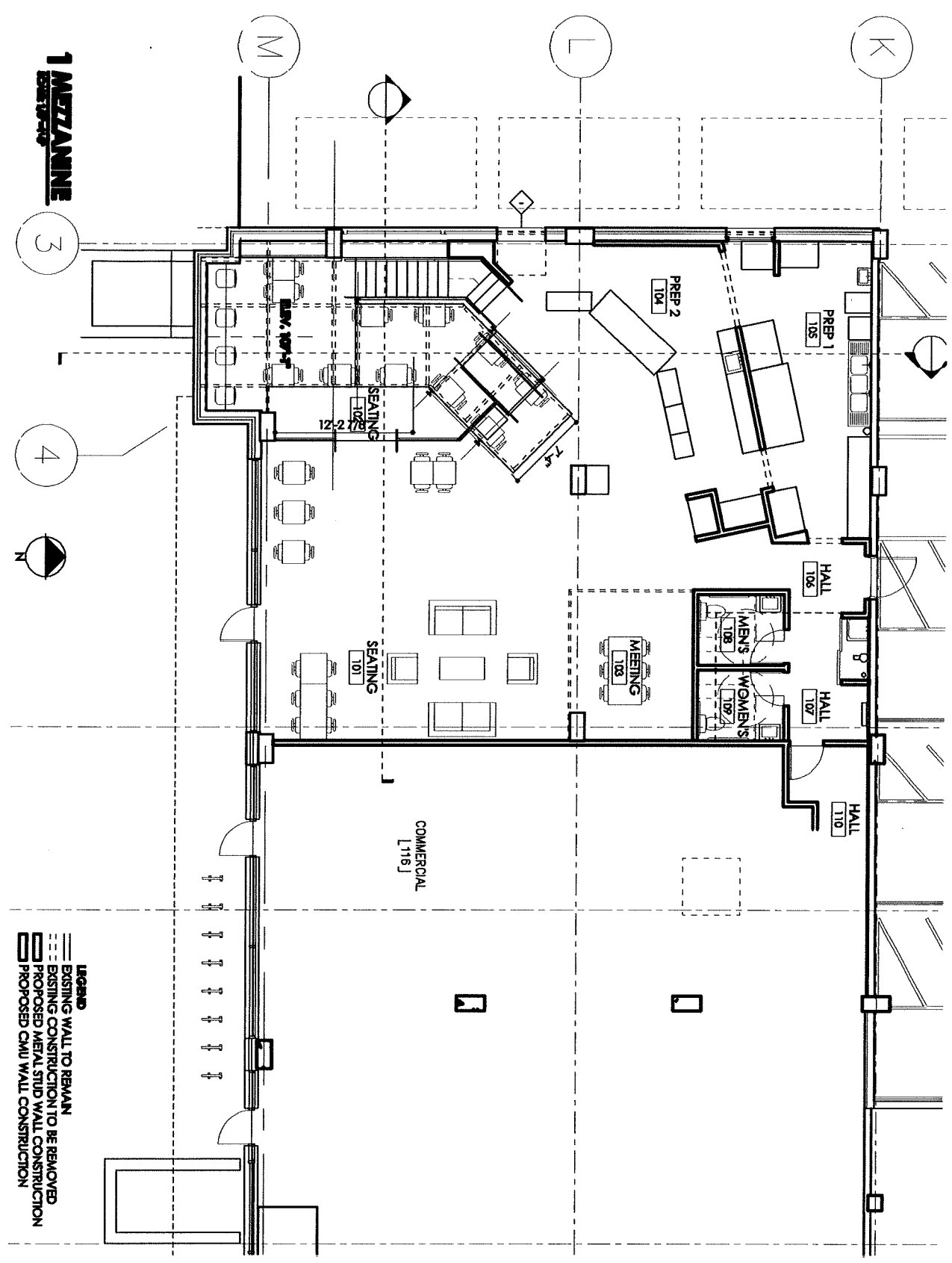
[Signature]
 (Clerk/Notary Public)

[Signature]
 (Officer of Corporation/Member of LLC/Partner/Sole Proprietor)

My commission expires 3-13-16

Clerk's Office checklist for complete applications		
<input type="checkbox"/> Orange sign <input checked="" type="checkbox"/> WI Seller's Permit Certificate (matching articles of incorporation) <input checked="" type="checkbox"/> FEIN <input type="checkbox"/> Notarized application <input type="checkbox"/> Written description of premises	<input checked="" type="checkbox"/> Background investigation form(s) <input type="checkbox"/> Form for surrender of previous license <i>n/a</i> <input checked="" type="checkbox"/> *Articles of Incorporation <input 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
Date complete application filed with Clerk's Office _____		
Date of ALRC meeting _____ Date license granted by Common Council _____		
Date provisional issued _____ Date license issued _____ License number _____		

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1 MEZZANINE
LEVEL 100-109

3

4



LEGEND
 --- EXISTING WALL TO REMAIN
 --- EXISTING CONSTRUCTION TO BE REMOVED
 --- PROPOSED METAL STUD WALL CONSTRUCTION
 --- PROPOSED CMU WALL CONSTRUCTION

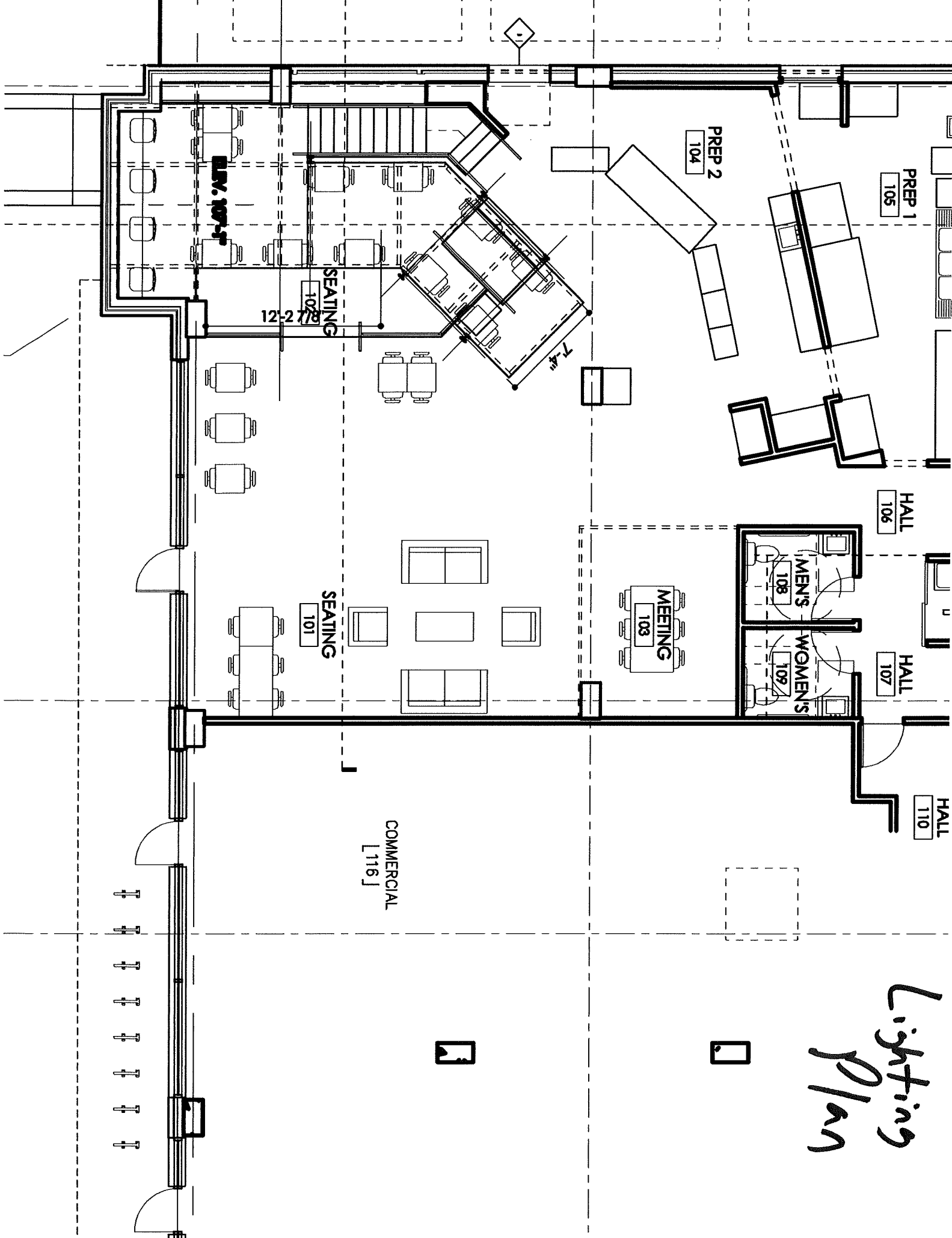
3.3
 THE DRAWING IS THE PROPERTY OF BARNETT ARCHITECTURE AND IS NOT TO BE REPRODUCED OR TRANSMITTED IN ANY FORM OR BY ANY MEANS, ELECTRONIC OR MECHANICAL, WITHOUT THE WRITTEN PERMISSION OF BARNETT ARCHITECTURE.
 DATE: 5-12-2015

FOR REVIEW AND PERMIT
 DRAWING TITLE DATES
 5-12-2015



NEW LOCATION FOR:
CARGO COFFEE
OR
THE CONSTELLATION
 EAST WASHINGTON
 MADISON, WI 53715

Barnett Architecture
 116 NORTH BRIDGE STREET
 SUITE 1
 MADISON, WISCONSIN 53705
 608.253.4538
 barnett@barnett.com



Lighting Plan



sandwiches



Sample Menu

O Full Pallet

Ham, turkey, swiss & cheddar in a garlic herb wrap packed with sliced cucumber, tomatoes, and greens. Topped with mayo & mustard.

O Truckstop Tuna

Tuna salad, two cheeses, green pepper, and red onion fill a tasty tomato wrap.

O Chix Wrap

A tomato wrap with chicken salad and swiss, packed in with sliced cucumber, tomatoes & greens.

O Green Wrap

A vegetarian wrap loaded with cucumber, green pepper, red onion, greens, swiss & cheddar cheeses, and our own homemade hummus on a spinach wrap. Topped with oil & vinegar.

- build-your-own -

circle your choices!

bread

spinach wrap / garlic herb wrap / tomato wrap
sourdough bread / croissant (+50c)

ingredients

smoked turkey / honey baked ham
tuna salad / chicken salad

swiss / cheddar

mixed greens / cucumber / green pepper
red onion / tomato / jalapeno pepper

honey mustard / mayo / oil & vinegar / hummus

Bag of Chips 40c Extra

Soup _____ 8oz / 12oz / 16oz

To Go / Here

Your Name _____

Cargo Coffee
1309 S. Park St.
268-0597

Ground Zero Coffee
744 Williamson St.
294-8668

THANK YOU!