

APPLICATION FOR TRANSFER OF LICENSES FOR SALE OF FERMENTED MALT BEVERAGES  
AND/OR INTOXICATING LIQUOR FROM ONE PREMISES TO ANOTHER

Madison, Wisconsin  
\_\_\_\_\_, 20\_\_\_\_

To the governing body of the (City) (Village) (Town) of Madison  
County of Dane Wisconsin.

The undersigned hereby applies for a transfer of Class B license from 702 N. Midvale Blvd. (present location) to 538 N. Midvale (proposed location)  
on or about August 1, 2006 (date).

1. APPLICANT: (print name and address plainly)

- (a) Full name of applicant Happy Valley Corporation
- (b) Address 702 N. Midvale Road

2. LOCATION AND DESCRIPTION OF PREMISES TO WHICH APPLICATION FOR TRANSFER IS MADE:  
Describe building or buildings where alcohol beverages are to be sold, served and stored.

- (a) Street number 538 N. Midvale Rd
- (b) Trade name of establishment Flat Top Grill
- (c) Physical description of building, buildings and/or land area comprising licensed premises.  
Approx 3300 sq ft sit down restaurant with 95 seats in the Hillside Mall

(d) Legal description (omit if street address is given above.) N/A

(e) Is any other business conducted on same premises?  Yes  No If so, what?

(f) Was this location licensed for beer or liquor during the past year?  Yes  No

(g) Give name and address of previous licensee. \_\_\_\_\_

(h) Will the previous licensee surrender its license?  Yes  No

ALL APPLICANTS FOR TRANSFER OF CLASS B LICENSES MUST ANSWER THE FOLLOWING:

3. If granted, state any interest, directly or indirectly, that any brewer, bottler, wholesaler, manufacturer, or rectifier will hold in the premises for which you are applying

None

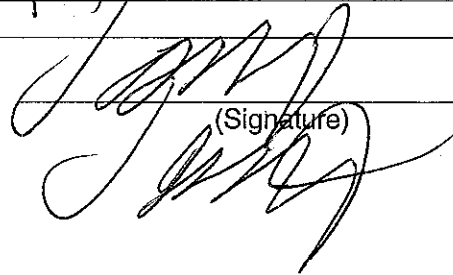
4. If you do not own the fixtures, state the manner, terms and conditions under which said fixtures are held

Fixtures are owned by the company.

State of Wisconsin

County of

} ss.

  
(Signature)

(I) (We), Keese Addington

being first duly sworn on oath says that (he/she is) (they are) the person(s) above named and that the answers to the questions in each instance are complete and true.

Subscribed and sworn to before me this

27th day of June, 2006

Maibeth Witzel-Behl

Notary Public, Dane County, Wis.

My Commission Expires 10-26-08

CLASS OF BUSINESS

Name Happy Valley Corp.

Original Location 702 N. Midvale

Ward 73

Proposed Location 538 N. Midvale

Ward 73

License No. 74936

Treasurer's Receipt No. \_\_\_\_\_

Filed \_\_\_\_\_

Submitted to Council or Board \_\_\_\_\_

Approved \_\_\_\_\_ Date \_\_\_\_\_

Denied \_\_\_\_\_ Date \_\_\_\_\_

Application Date: 6-27-06

Proof of WI Seller's Permit No. \_\_\_\_\_

Name of Corporation, Limited Liability Company, Individual Owner, Private Club or Partner(s)	Liquor/Beer Agent
Happy Valley Corporation	Edgar C. Barker Jr.
Mailing Address	Liquor/Beer Agent Address
726 W. Lake St.	3308 Nightingale Ln.
City/State/Zip Code	Liquor/Beer City/State/Zip Code
Oak Park IL 60301	Middleton 53562
Name of Registered Agent or General Partner	Local Contact Person   Phone Number
Tom McDermott	Edgar Barker 831-3880
Trade Name	Estimated Opening Date
Flat Top Grill	
Business Address	Signature of Owner/Operator
538 N. Midvale	

Private Club?  Yes  No

License Description	Type	Fee	Number
Class B Combination → Transfer of Location	108	30-	74936
<b>Pre-Inspection &amp; License Fees Non-Refundable</b>	<b>TOTAL</b>	<b>\$</b>	

IT IS MANDATORY THAT ALL APPLICABLE INFORMATION BE COMPLETED. INACCURATE INFORMATION MAY RESULT IN SUSPENSION OR REVOCATION OF LICENSE.

\* July 19 ALRC \*

**Notice of License Application**  
*for July 19 ALRC*

*Office Use Only*

<input checked="" type="checkbox"/> <b>New Application</b>	Date <u>6-28-06</u>
<input type="checkbox"/> <b>Transfer of Ownership Application</b>	
<input type="checkbox"/> <b>Transfer of Location Application</b>	

You are hereby notified that the following application(s) has been filed in the City Clerk's Office. Investigation and report back on approval or disapproval for the granting of license(s) is requested by your department as required by Ordinance.

- To:  **Assessor** Personal Property \$ \_\_\_\_\_
- City Attorney** (Pending Charges) \_\_\_\_\_  
Names of Previous License Holder \_\_\_\_\_
- Building Inspection** Date of Last Inspection \_\_\_\_\_
- Zoning Classification
- Specify distance from schools, churches, libraries and hospitals if under 300 feet \_\_\_\_\_
- Fire** Date of Last Inspection \_\_\_\_\_
- Health** Date of Last Inspection \_\_\_\_\_
- Police**
- Treasurer** (Hotel/Motel or Bed & Breakfast) (Information Only)
- Accounting** (Hotel/Motel or Bed & Breakfast)(Information Only)
- Aldersperson** Tim Gruber \_\_\_\_\_

Please return this notice with any comments you might have regarding the above application to the City Clerk's Office.

- Approved  Disapproved  No Recommendation

Comments:

\_\_\_\_\_  
Signature of Dept/Div Head or Auth. Rep.