	36662 LICLIB-204-07267
Mad	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
Sec	ction 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 mage 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, 20_15
3.	List the name of your □ Sole Proprietor, □ Partnership, □ Corporation/Nonprofit Organization or
κ:	Limited Liability Company exactly as it appears on your State Seller's Permit.
Q	CAtrium on King LLC
4.	Trade Name (doing business as)
5.	Address to be licensed 111 King St.
6.	Mailing address 122 King St., Sute 27, Madison, Wi, 53703
7.	Anticipated opening date April 6015
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 permitee have interest in this business?
	□ No X Yes (explain) Benjamin Attschul, Fresident Agent
Sac	etion B—Premises
10.	Describe in words the building or buildings where alcohol beverages are to be sold and stored.
10.	Include all rooms including living quarters, if used, and any outdoor seating used for the sales,
<b>6</b> 2	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.
Α,	Alcohol Benerages will be served in the atrium
Ÿ	Space, the meeting room under stainvell and
?	The siclewalk cafe area. Alcohol will be
	storee in the atrium space, basement, and
	room under stairwell.

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
13.	Describe existing parking and how parking lot is to be monitored.  Parking ramp located at Webster and Many and
14.	Dorty and Pickney. Ample bike parking. Located on Was this premises licensed for the sale of liquor or beer during the past license year? bus line.
•	No ☐ Yes, license issued to (name of licensee)
15.	Attach copy of lease.
This Sole	section C—Corporate Information section applies to corporations, nonprofit organizations, and Limited Liability Companies only. proprietorships and partnerships, skip to Section D.
16.	Name of liquor license agent <u>Fenjamin</u> Attachil
17.	City, state in which agent resides Madroou, Wi
18.	How long has the agent continuously resided in the State of Wisconsin?
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 $3/25/2013$
21.	State and date of registration of corporation, nonprofit organization, or LLC.
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  Co-Owner Benjamin Altschil Madison, Wi  Co-Owner Benjamin Fritz 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.

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) Semanin Altschill is sole proprietor of the cition D—Business Plan
	□ No Yes (explain) Demanin Altschul is sole Proprietor of
	ction D—Business Plan What type of establishment is contemplated? □ Tavern □ Nightclub ☑ Restaurant □ Liquor Store □ Grocery Store
	☐ Convenience Store without gas pumps ☐ Convenience Store with gas pumps
	□ Other
27.	Business description Café serving coffee and bakery
	in the morning gournet saubliches, soups and
	salads offered Kluring Lunch; wine, beer, spirits
	and additional small plates through the evening
28.	Hours of operation Regular hours: Monday - Saturday 7am - 1020
	Describe your management experience Events: Molloy-Sunday Tam-barting
Bery	amin Altschill-owner operator of the Tip Top lavern.
Ben	jamin Fritz. TV/Film Web production management.
(	List names of managers below, along with city and state of residence.
	Benjamin Altschul Madison, W.
	Benjamin Fritz Madison, W.
31.	Describe staffing levels and staff duties at the proposed establishment 2 barten lers
	at a majority of times, Ouring busy hours 3-5 servers,
	bouncers to check 10's and maintain capacity, cleaner
32.	Describe your employee training Employees will be trained in safe
	serving practices, 18 verification, customer service,
	crowl management

33.	Utilizing your market research, describe your target market.
	Market includes Dusiness Professionals, graduate students, Farmers market attendes, local workforce,
34.	Describe how you plan to advertise and promote your business. What products will you be
	advertising?
	Word of month and Deantification
	07 1151Qe
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
This	ction E—Consumption on Premises section applies to Class B and Class C applicants only. Class A license applicants (consumption premises) may skip to Section F.
37.	Do you plan to have live entertainment?   No Yes—what kind?   Live bane's
	and small theatrical performance.
38.	What age range do you hope to attract to your establishment?
39.	What type of food will you be serving, if any? <u>Scones, Sandwickes, Soups, Cheese</u> Breakfast  Brunch  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?
42.	What hours, if any, will food service <u>not</u> be available?
43.	Indicate any other product/service offered
44.	Will your establishment have a kitchen manager? ☐ No ☐ Yes
<b>4</b> 5.	Will you have a kitchen support staff? ☑ No ☐ Yes
46.	How many wait staff do you anticipate will be employed at your establishment?
	During what hours do you anticipate they will be on duty? 6:30-11 Janly
47.	Do you plan to have hosts or hostesses seating customers? No D Yes Private events

48.	Do your plans call for a full-service bar?   No X 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? ☐ 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 # Toaster oven and soup well.
	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?
	If your business plan includes an advertising budget:
	What percentage of your advertising budget do you anticipate will be related to food? a
	What percentage of your advertising budget do you anticipate will be drink related? <a href="https://www.nc.nc/colored-related">/ / A</a>
55.	
56.	Are you currently, or do you plan to become, a member of the Wisconsin Restaurant Association or the National Restaurant Association?
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:
	30 % Alcohol 55 % Food
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.
<b>Sec</b> 59.	tion F—Required Contacts and Filings 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 X Yes
63.	I agree to contact the Alcohol Policy Coordinator prior to the ALRC meeting.   No Yes
	I agree to contact the neighborhood association representative prior to the ALRC meeting.  ☐ No ☐ Yes

The Atrium Sample Mean
Breakfast Lary Janes Bakery Fresh Frut + Yogurt Grandla
Lunch
Darly Sandwides Market Salal. Seasonal Soup
Druwer
· Cheese + Meat Spread · MekHteranean Plate
· Market Salad · Seasonal Soup
· Chocolate Platter

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