

Liquor/Beer License Application

City of Madison Clerk 210 MLK Jr Blvd, Room 103

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per)
022-008/
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408
(Police Sector)

	210 MLK Jr Blvd, Room 103 SS A: □ Beer, □ Liquor, □ Cider Madison, WI 53703 SS B: ☒ Beer, ☒ Liquor, □ Li
Cias	☐ Class C Wine licensing@cityofmadison.com 608-266-4601
Sec 1.	tion A – Applicant 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.
	The Renfro Refreshment Company, LLC
2.	Trade Name (doing business as) High Noon Saloon
3.	Address to be licensed
4.	Mailing address2314 N Sherman Avenue, Madison, WI 53704
5.	Anticipated opening date N/A - Continuing Operations; upon anticipated issuance of this Class B Combo license
6.	Is the applicant an employee or agent of, or acting of behalf of anyone except the applicant named in question 1?
	☑ No ☐ Yes (explain)
7.	Does another alcohol beverage licensee or wholesale permitee have interest in this business? ☐ No ☒ Yes (explain)
	License currently held and will be surrendered by High Noon Saloon, LLC upon anticipated issuance of this Class B Combo license
Sec 8.	tion B—Premises 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 receipts. Alcohol beverages may be sold and stored only on the premises as approved by Common Council and described on license.
	Premises: First floor - 3600 sq ft with two bars; mezzanine - 750 sq ft with seating; 34 seats on the outdoor patio. Alcohol stored in walk-in
	cooler and storage rooms on both first floor and mezzanine. Venue has been in continuous operation since 2004.

9.	Applicant	s for on-pi	remises consumptio	on onl	y. Estimated capacity (patro	ns and employees):
	Indoor: _	400	Outo	door:	34	
10.	Describe	existing pa	arking and how par	king l	ot is to be monitored.	
	Small lot a	attached to the d	levelopment - to be monitored	l as it has	been for the past ~17 years of successful o	peration of the venue
11.	Was this	premises l	icensed for the sale	e of lic	quor or beer during the past	license year?
	□ No	☑ Yes, lic	cense issued to Hig	h Noon S	Saloon, LLC	(name of licensee)
This	section a	pplies to co	e Information orporations, nonpross and partnerships		ganizations, and Limited Liab to Section D.	ility Companies
12.	Name of	liquor licer	nse agent <u>Seth Meyr</u> i	ck		
13.	City, stat	e in which	agent residesMad	lison, WI		
14.	How long	has the a	gent continuously i	reside	d in the State of Wisconsin?	21 years
15.	Has the li	iquor licen	se agent completed	d the i	responsible beverage server	training course?
	□ No, b	ut will com	plete prior to ALRO	mee	ting 🏻 Yes, date complete	ed June '96- Operators License attache
16.	State and	d date of re	egistration of corpo	ration	, nonprofit organization, or l	LC.
	Wisconsin	- August 2021				
17.	In the tal	ble below l	ist the directors of	your	corporation or the members	of your LLC.
		h backgroι	ind check forms for	r each		
	Title		Name		City and State of Residence	!
	Member		Steven Renfro		Madison, WI	_
	Member		Catherine O'Brien		Madison, WI	
				-		
18.	notice or	demand re	or your corporation equired or permitte ne as your liquor ag	ed by l	C. This is your agent for serv law to be served on the corp	ice of process, oration. This is not
	Steve	Renfro				
19.	Is applica	ant a subsi	diary of any other	corpoi	ration or LLC?	
	⊠ No	☐ Yes (e:	xplain)			
20.	Does the member, in Wiscor	or any ma	on, any officer, any anager hold any int	direct erest	tor, any stockholder, liquor a in any other alcohol beverag	gent, LLC, any e license or permit
	□ No	Yes (e	xplain) <u>Steve Renfro is th</u> Noon Saloon, Maj	e current estic The	liquor/beer agent for the Class B Combo lice atre and The Sylvee upon the anticipated iss	enses held, but being surrendered at Hig uance of these Class B Combo licenses

	tion D—Bus What type of □ Tavern	establishme			uor Store 🛭	l Grocery S	tore
	☐ Convenie	nce Store wit	hout gas pur	mps 🛮 Conv	enience Store	with gas pu	ımps
	☑ Other	ar concessionaire					
22.	Private orgar "invidious" (I origin? 区 N	ikely to give	bs): Do your offense) disc	membership por rimination in re	olicies contain gard to race,	any require creed, color	ement of , or national
23.	Hours of ope	ration: please	e enter openi	ing and closing	times in the t	able below.	
	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
*Hours of operation are	4:00p	4:00p	4:00p	4:00p	4:00p	12 <u>:</u> 00p	12:00p
dependent upon venue's	1:30a	1:30a	1:30a	1:30a	1:30a	2:00a	2:00a
show/event schedule. All	(Class B on	ly) Enter belo	ow any hours	when food ser	vice will not b	e available,	if applicable
times are base on the latest possible close.	-	•	-	-	-	-	-
This (con 24.	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. 4. Indicate any other product/service offered. Bar operations only 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:						
Do you have written records to document the percentages shown? You may be required to submit documentation verifying the percentages in Do you plan to have live entertainment? No Yes—what kind? Musi					ntages indica		
Sec	dance floor, tion F—Req	ntertainment please also co puired Cont	omplete an E acts and F	music (except ntertainment L	icense. *Held by	High Noon Saloon,	LLC
	regardless of	f when licens	e was initially	enewal applicat granted. D	lo 🛛 Yes		
28.	I understand ALRC meetin		quired to hos Yes	st an informatio	n session at l	east one we	ek before the
29.	I agree to co			this location to	discuss my a X Yes	pplication ar	nd 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. \square No \square 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 \square 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? $\hfill \square$ No $\hfill \square$ Yes
Sec	tion G—Information for Clerk's Office
37.	This application is for the license period ending June 30, 20_23
38.	State Seller's Permit <u>4 5 6 - 1 0 3 0 8 5 5 4 4 5 - 0 4</u>
39.	Federal Employer Identification Number 87-2227738
40.	Who may we contact between 8 a.m. and 4:30 p.m. regarding this license?
	Contact person Steve Renfro
	Business phone 608-438-8104 Business e-mail address stevenrenfro8@gmail.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, e comité remitirá su solicitud para una nueva junta y esto puede atrasar el proceso de su solicitud.
41.	Corporate attorney, if applicable: Name
	Phone F-mail

must be accompanied by the following iter	eeding months Alcohol License Review Committee. A	ce is closed on the third A completed application
Member background investigation form	ness Tax Registration Certificate), 🛛 Appointment on State (1) Appointment of State (1) Appoint	of Agent (if Corp/LLC), oor Plans,
If required items are missing, the application office until all requirements are submitted.	on will not be considered complete and will not be ac No exceptions are made.	ccepted by the Clerk's
been truthfully completed to the best of the to law, and that the rights and responsibility	enalty provided by law, the applicant states that the e knowledge of the signer. Signer agrees to operate ies conferred by the license(s), if granted, will not b remises during inspection will be deemed a refusal to s for revocation of this license.	the business according he assigned to another.
Penalty for materially false application information on this application may be required to forfer formation of the composition	2/18/2	
(Office) of Corporation, Floride of Ecolulation,		
	applications	
Clerk's Office checklist for complete and WI Seller's Permit Certificate (matching articles of incorporation)	applications □ Background investigation form(s) □ Form for surrender of previous license □ *Articles of Incorporation □ *Appointment of Agent	☐ Floor Plans ☐ Lease ☐ Business Plan ☐ **Sample Menu
Clerk's Office checklist for complete : WI Seller's Permit Certificate (matching articles of	☐ Background investigation form(s)☐ Form for surrender of previous license☐ *Articles of Incorporation	☐ Lease ☐ Business Plan