

Liquor/Beer License Application

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

| (Agenda Item Nu | mber) |
|--------------------|-----------------|
| (Legistar file num | iber) |
| 4c418.2 | 023-00411 |
| (License number) | |
| 4 | 406 |
| (Aldon District #) | (Police Sector) |
| (Alder District #) | (1 once beeter) |

| | Madison, WI 53703 |
|------------------|---|
| Clas | Ss B: Beer, Liquor, licensing@cityofmadison.com Class C Wine 608-266-4601 |
| Sar | ction A – Applicant |
| 1. | 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. |
| | JAMBURGER RANCH LLC |
| 2. | Trade Name (doing business as) Draper Brothers Chop House |
| 3. | Address to be licensed 101 N. Hamilton St. Medison WI 537.3 |
| 4. | Mailing address |
| 5. | Anticipated opening date Aug 1 2023 |
| 6. | Is the applicant an employee or agent of, or acting of behalf of anyone except the applicant named in question 1? \square No \square Yes (explain) |
| 7. | Does another alcohol beverage licensee or wholesale permitee have interest in this business? \square No \square Yes (explain) |
| Sec 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 receipts. Alcohol beverages may be sold and stored only on the premises as approved by Common Council and described on license. |
| | Full Bor and bor Sects Aprox. 45 Sects outdoor Seating |
| | Aprox 30 Seats, Upstairs main Linning room Aprox 50 seats |
| | Downstoirs lig, Beer, wine Storge |
| | |

| 9. | Applicants for on-premises consumption only. Estimated capacity (patrons and employees): | | | | |
|------|--|--|--|--|--|
| | Indoor: 99 Outdoor: 45 | | | | |
| 10. | Describe existing parking and how parking lot is to be monitored. | | | | |
| | \$\ City of Medisin Street Parteins, I area City remps | | | | |
| | MIFFlin St State Franklin St, | | | | |
| 11. | Was this premises licensed for the sale of liquor or beer during the past license year? | | | | |
| | □ No ☑ Yes, license issued to Same as this application (name of licensee) | | | | |
| This | ction C—Corporate Information s section applies to corporations, nonprofit organizations, and Limited Liability Companies s. Sole proprietorships and partnerships, skip to Section D. | | | | |
| 12. | Name of liquor license agent | | | | |
| 13. | City, state in which agent resides | | | | |
| 14. | How long has the agent continuously resided in the State of Wisconsin? | | | | |
| | . Has the liquor license agent completed the responsible beverage server training course? | | | | |
| | ☐ No, but will complete prior to ALRC meeting ☐ Yes, date completed | | | | |
| 16. | State and date of registration of corporation, nonprofit organization, or LLC. | | | | |
| | TECH I IN MI | | | | |
| 17. | 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 | | | | |
| | Title Name City and State of Residence | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| 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. $Sosnowski$ | | | | |
| 19. | Is applicant a subsidiary of any other corporation or LLC? | | | | |
| | No D Yes (explain) | | | | |
| 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 D Yes (explain) | | | | |

| | tion D—Bus What type of Tavern | establishme | | olated? urant 🏻 Liqu | uor Store 🛭 |] Grocery S | tore |
|---------------------|--|---|---|---|-----------------|-------------------------|---------------|
| | ☐ Convenie | nce Store wit | hout gas pur | mps 🏻 Conv | enience Store | e with gas pu | ımps |
| | ☐ Other | | | | | | |
| 22. | 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 | | | | | | |
| 23. | Hours of ope | ration: please | e enter openi | ng and closing | times in the t | table below. | |
| | Sunday | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday |
| | loam - 8 pm | 338n-10pm | 330 _ lopm | 330 10 PM | 330 - 11AM | 530 - 12 cm | 330 12 am |
| | (Class B on | ly) Enter belo | w any hours | when food ser | vice will not b | e available, | if applicable |
| | - | - | - | - | - | - | _ |
| This (con 24. | sumption off Indicate any | es to Class B premises) ma other produc | and Class C a ay skip to Sec t/service offe | applicants only.ction F. ered | 1 | | · 6° |
| 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 % Alcohol 6 % Food 5 % Other | | | | | | |
| | If applicable, | describe "Ot | her": | etail | 12123-11 | | 1 |
| | Do you have | written recor | ds to docum | ent the percent entation verifyi | ages shown? | □ No I ntages indica | ☐ Yes ted. |
| 26. | 5. Do you plan to have live entertainment? \square No \square Yes—what kind? $Acoustic Picas$ | | | | | | |
| | If planned entertainment includes live music (except solo acoustic), a DJ, or a designated dance floor, please also complete an Entertainment License. | | | | | | |
| Sec 27. | | that liquor/b | eer license re | l lings enewal applicat granted. 🗆 N | | April 15 of e | very year, |
| 28. | I understand ALRC meetin | | | t an informatio | n session at l | east one we | ek before the |
| 29. | | | | this location to sion. □ No l | | 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. No Yes |
| 32. | I agree to contact the neighborhood association representative prior to the ALRC meeting. \Box No $\ \square$ 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_{24} . |
| 38. | State Seller's Permit 4 5 6 - 1 0 3 1 1 3 7 9 6 6 - 6 4 |
| 39. | State Seller's Permit 4 5 6 -1 0 3 1 1 3 7 9 6 6 -9 4 Federal Employer Identification Number $83 - 3038920$ |
| 40. | Who may we contact between 8 a.m. and 4:30 p.m. regarding this license? |
| | Contact person Tonathen (Jack) SosNowski |
| | Business phone 698-5481 Business e-mail address SosNowski Jack Q Yahoo. |
| | 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, el comité remitirá su solicitud para una nueva junta y esto puede atrasar el proceso de su solicitud. |
| 41. | Corporate attorney, if applicable: Name |
| | Phone |

| | Monday) to get on the agenda for the proceeding months Alcohol License Review Committee. A completed application must be accompanied by the following items: | | | | | | |
|------|---|---|--------|--|--|--|--|
| Fest | ☐ 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) | | | | | | |
| 366 | 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. Lagrange 2.3 | | | | | | |
| | (Officer of Corporation/Member of LLC/Partner/So | ole Proprietor) (Date) | | _ | | | |
| | Clerk's Office checklist for complete a | pplications | | | | | |
| | □ WI Seller's Permit Certificate (matching articles of incorporation)□ FEIN | □ 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 | | | | | | |
| | | Clerk's Office issued to the application: | | | | | |
| | \square Orange sign \square Orange business | card | | | | | |
| | ☐ "Applying for a Liquor/Beer License | in the City of Madison" brochure with contact | inform | nation | | | |
| | Date complete application filed with Clerk's | Office | | | | | |
| | Date of ALRC meeting Da | te license granted by Common Council | | | | | |
| | Date provisional issued Date license issued | | | | | | |



Liquor/Beer License **Application**

(Agenda Item Number) LICUB - 2022 - 6092/ (License number)

(Alder District #)

| | City of Madison Cler |
|------------------------------------|---------------------------|
| | 210 MLK Jr Blvd, Room 103 |
| Class A: ☐ Beer, ☐ Liquor, ☐ Cider | Madison, WI 53703 |
| Class B. Reer Miguor | |

| | Ss A: Beer, Liquor, Cider Madison, WI 53703 Office Use Only |
|---------------|--|
| Clas | Ss B: Beer, Liquor, Class C Wine Class C Wine |
| Sec 1. | 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. |
| 2. | Trade Name (doing business as) Draft Brothes Chap Itmse |
| 3. | Address to be licensed 101 N. Hamison St |
| 4. | Mailing address |
| 5. | Anticipated opening dateFeb (2.13 |
| 6. | Is the applicant an employee or agent of, or acting of behalf of anyone except the applicant named in question 1? \square No \square Yes (explain) |
| 7. | Does another alcohol beverage licensee or wholesale permitee have interest in this business? \square No \square Yes (explain) |
| Sec 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 receipts. Alcohol beverages may be sold and stored only on the premises as approved by Common Council and described on license. |
| | First floor bor and Linning area, Ufstein dinning Room |
| | Storge facility in basement Silewalk Cafe |
| | |
| | |

| 9. | Applicants for on-premises consumption only. Estimated capacity (patrons and employees): |
|------------------|--|
| | Indoor: Outdoor: Z o |
| 10. | Describe existing parking and how parking lot is to be monitored. |
| | F. Parising on Street and New by City Public |
| | Perking East Miffin Hamilton St. |
| 11. | Was this premises licensed for the sale of liquor or beer during the past license year? |
| | ☑ No ☐ Yes, license issued to (name of licensee) |
| This only | tion C—Corporate Information section applies to corporations, nonprofit organizations, and Limited Liability Companies . Sole proprietorships and partnerships, skip to Section D. |
| 12. | Name of liquor license agent Soswowski |
| 13. | City, state in which agent resides wl |
| 14. | How long has the agent continuously resided in the State of Wisconsin? \(\frac{\frac{1}{3}}{3} \) |
| 15. | Has the liquor license agent completed the responsible beverage server training course? |
| | No, but will complete prior to ALRC meeting Yes, date completed |
| 16. | State and date of registration of corporation, nonprofit organization, or LLC. |
| | |
| 17. | |
| | Attach background check forms for each director/member. Title Name City and State of Residence |
| | Member Jonathan Soshowski Verna WI |
| | |
| | |
| ~1 8. | 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 applieant a subsidiary of any other corporation or LLC? |
| | No |
| 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 Yes (explain) |

| Section D—Business Plan 21. What type of establishment is contemplated? ☐ Tavern ☐ Nightclub ☐ Restaurant ☐ Liquor Store ☐ Grocery Store | | | | | | | |
|--|--|----------------|---------------|------------------------------------|-----------------|----------------|---------------|
| | ☐ Convenie | nce Store wi | thout gas pui | mps 🏻 Conv | enience Stor | e with gas pu | ımps |
| | ☐ Other | | | | | | |
| 22. | 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 | | | | | | |
| 23. | Hours of ope | ration: pleas | e enter openi | ing and closing | times in the | table below. | |
| | Sunday | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday |
| | | | | 11 -9 | | | |
| | (Class B on | ly) Enter belo | ow any hours | when food ser | vice will not l | be available, | if applicable |
| | - | - | | - | - | - | _ |
| 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. 24. Indicate any other product/service offered. — Line Line Line (1) 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: 3 | | | | | | |
| 26. | Do you have written records to document the percentages shown? No Yes You may be required to submit documentation verifying the percentages indicated. | | | | | | |
| 20. | 6. Do you plan to have live entertainment? IT No | | | | | | |
| | • | | | music (except s ntertainment Li | | , a DJ, or a d | designated |
| | 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. \[\begin{align*} \text{No} & \begin{align*} \text{Ves} \end{align*} | | | | | | |
| 28. | . I understand that I am required to host an information session at least one week before the ALRC meeting. \Box No \Box Yes | | | | | | |
| | | | | this location to sion. \Box | | 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. \square No \square Yes | | | | | |
| 32. | I agree to contact the neighborhood association representative prior to the ALRC meeting. \square No \square 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. 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? $\hfill\square$ No $\hfill\square$ Yes | | | | | |
| Sec | tion G—Information for Clerk's Office | | | | | |
| 37. | This application is for the license period ending June 30, 20 22. | | | | | |
| 38. | State Seller's Permit <u>4</u> <u>5</u> <u>6</u> - <u></u> <u></u> <u></u> <u></u> <u></u> <u></u> <u></u> <u></u> | | | | | |
| 39. | Federal Employer Identification Number 883038920 | | | | | |
| 40. | Who may we contact between 8 a.m. and 4:30 p.m. regarding this license? | | | | | |
| | Contact person Jonathan SasNowsker | | | | | |
| | Business phone 608-698-5481 Business e-mail address Sosnowski Jack @ Yalon | | | | | |
| | Preferred language English | | | | | |
| | If needed, a qualified interpreter can be provided at no charge to you. Would you like an interpreter? Yes (language:) Of (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 | | | | | |
| | Dhana E mail | | | | | |

| | MOTICE: 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: | | | | | | |
|--|---|---|-----------------------|--|--|--|--|
| | | ness Tax Registration Certificate), 🗹 Appointment of | | | | | |
| ne estado | | | | | | | |
| | Member background investigation forms | s, Articles of Incorporation (if Corp/LLC), Floo Sample Menu (if applying for Class B license) | r Plans, | | | | |
| | Copy of Lease, L Business Plan, and k | 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 on this application may be required to forfer | mation: Any person who knowingly provides materialit not more than \$1,000. | lly false information | | | | |
| | (Officer of Corporation/Member of LLC/Partner/Sole Proprietor) 9/19/77 (Date) | | | | | | |
| | Clerk's Office checklist for complete a | Innlications | | | | | |
| | ☐ WI Seller's Permit Certificate | ☐ Background investigation form(s) | ☐ Floor Plans | | | | |
| | (matching articles of | ☐ Form for surrender of previous license | ☐ Lease | | | | |
| | incorporation) | ☐ *Articles of Incorporation | ☐ Business Plan | | | | |
| | FEIN | ☐ *Appointment of Agent | ☐ **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 in the City of Madison" brochure with contact information | | | | | | |
| | Date complete application filed with Clerk's Office $\frac{9/19/22}{}$ | | | | | | |
| | Date complete application filed with Clerk's Office $\frac{9/19/22}{2}$ Date of ALRC meeting $\frac{11/23/22}{2}$ Date license granted by Common Council $\frac{12/6/22}{2}$ | | | | | | |
| | Date provisional issued Date license issued | | | | | | |