Liquor/Beer License Application

City of Madison Clerk
210 MLK Jr Blvd, Room 105
Madison, WI 53703

licensing@cityofmadison.com
608-266-4601

_____
(Agenda Item Number)

_____
(Legistar file number)

LICLIB-2025-00571
(License number)

4, Verveer | 406
(Alder District #) | (Police Sector)
Office Use Only

Class A: ☐ Beer, ☐ Liquor, ☐ Cider
Class B: ☒ Beer, ☒ Liquor,
☐ Class C Wine

Section 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.
   Madison Children's Museum, Inc.
2. Trade Name (doing business as) Madison Children's Museum
3. Address to be licensed 100 N. Hamilton St, Madison, WI 53703
4. Mailing address 100 N Hamilton St, Madison, WI 53703
5. Anticipated opening date Sept 1, 2025
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)
   _____

Section B—Premises

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.
   Alcohol is served in all indoor areas that are open to the public - 1st Fl, 2nd Fl, Rooftop Clubhouse (5th Fl). Alcohol is also served in our fenced in outdoor space on street level/Wonderground and on our developed rooftop. On occasion our ground level parking lot/loading dock and administrative areas on our ground flour and 4th flour are used for service.

9. *Applicants for on-premises consumption only.* Estimated capacity (patrons and employees):

Indoor: 750 Outdoor: 250

10. Describe existing parking and how parking lot is to be monitored.

The museum maintains NO customer parking. 3 on-site parking stalls are used by vendors in our loading dock area. Customers use metered street parking & parking ramps

11. Was this premises licensed for the sale of liquor or beer during the past license year?

☐ No ☒ Yes, license issued to Chef Dave Madison (name of licensee)

Section C—Corporate Information

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

12. Name of liquor license agent Susan Ramspacher

13. City, state in which agent resides Madison, WI

14. How long has the agent continuously resided in the State of Wisconsin? 32 years

15. Has the liquor license agent completed the responsible beverage server training course?

☐ No, but will complete prior to ALRC meeting ☒ Yes, date completed 4/17/25

16. State and date of registration of corporation, nonprofit organization, or LLC.

WI, ~~September 1980~~ October 23, 1980

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
Chair	Matthew Cornwell	Madison, WI
Vice Chair	Kristin Shutts	Madison, WI
Treasurer	Joel Martin	Madison, WI
Secretary	Sydney VanBerg	Madison, WI

(see extra page)

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.

Tom Linfield

19. Is applicant a subsidiary of any other corporation or LLC?

☒ No ☐ 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 ☐ Yes (explain) _____

madison children's museum

Corporate Officers 2025

Chair, Matthew Cornwell, 4606 Prairie Fire Ct, Deforest, WI 53532
Vice Chair, Kristin Shutts, 225 Princeton Ave, Madison, WI 53726
Treasurer, Joel Martin, 466 Orchard Dr, Madison, WI 53711
Secretary, Sydney VanBerg, 1 Vista Rd, Madison, WI 53726
Officer at large, Sarah Condella, 3444 Lake Mendota Dr, Madison, WI 53705
Officer at large, Michelle Chang-DerBedrosian, 2398 Blue Heron Blvd, Sun Priaire, WI 53590

Section D—Business Plan

21. What type of establishment is contemplated?

☐ Tavern ☐ Nightclub ☐ Restaurant ☐ Liquor Store ☐ Grocery Store

☐ Convenience Store without gas pumps ☐ Convenience Store with gas pumps

☒ Other Children's Museum holding public events and private rental events such as weddings (primarily adults with attended children occassionally present)

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 operation: please enter opening and closing times in the table below. Available for event rentals during these hours. Host 2-3 events per week maximum

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
4:30 - 11:00 pm	4:30 - 11 pm	4:30 - 11 pm	4:30 - 11 pm	8:30 - 11 pm	4:30 - 11 pm	4:30 - 11 pm
(Class B only) Enter below any hours when food service will not be available, if applicable						
-	-	-	-	-	-	-

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. food, entertainment, gift shop, play, education

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:

40 % Alcohol 60 % Food _____ % Other

If applicable, describe "Other": _____

Do you have written records to document the percentages shown? ☐ No ☐ Yes
You may be required to submit documentation verifying the percentages indicated.

26. Do you plan to have live entertainment? ☐ No ☒ Yes—what kind? Bands, DJs, Solo performers such as stilt walkers, magicians, etc.

If planned entertainment includes live music (except solo acoustic), a DJ, or a designated dance floor, please also complete an Entertainment License.

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. ☐ No ☒ Yes

28. I understand that I am required to host an information session at least one week before the ALRC meeting. ☐ No ☒ Yes

29. I agree to contact the Alderperson for this location to discuss my application and to invite the Alderperson to my information session. ☐ No ☒ Yes

30. I agree to contact the Police Department District Captain for this location prior to the ALRC meeting. ☐ No ☒ 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. ☐ No ☒ 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] ☐ No ☒ 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] ☐ No ☒ Yes

36. 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

37. This application is for the license period ending June 30, 2026.

38. State Seller's Permit 456-1025369012-03

39. Federal Employer Identification Number 43-1956290

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

Contact person Susan Ramspacher

Business phone 608-354-0540 Business e-mail address sramspacher@madisonchildrensmuseum.org

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 _____ E-mail _____

NOTICE: 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:

☐ 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)

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.

(Officer of Corporation/Member of LLC/Partner/Sole Proprietor) (Date) 6/16/25

Clerk's Office checklist for complete applications

☑ WI Seller's Permit Certificate (matching articles of Incorporation)	☑ Background investigation form(s)	☑ Floor Plans
☑ FEIN	☐ Form for surrender of previous license	☐ Lease N/A
☑ Written description of premises	☑ *Articles of Incorporation	☑ Business Plan
	☑ *Appointment of Agent	☑ **Sample Menu
	* Corporation/LLC only	** Class B only

Upon Application Submission, the Clerk's Office issued to the application:

☑ Orange sign ☑ 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 _____

Date of ALRC meeting _____ Date license granted by Common Council _____

Date provisional issued _____ Date license issued _____