LICLIB-2016-00230
P-126 A-19

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

Section 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 16.

3. 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.
   RISING SONS DELI, LLC

4. Trade Name (doing business as) RISING SONS

5. Address to be licensed 745 North High Point Road

6. Mailing address 2 Brule Circle Madison, WI 53717

7. Anticipated opening date ~~February~~ March 1st, 2016

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 ☐ Yes (explain) _____

Section B—Premises

10. 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 records. Alcohol beverages may be sold and stored only on the premises as approved by Common Council and described on license.
    - Alcohol will be served in the dining area which will seat approximately 30-40 people.
    - Alcohol will be stored behind the counter ~~cooler~~ away from dining area. 1410 sq. ft

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 30-40

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

parking Lot

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

☐ No ☒ Yes, license issued to _____ (name of licensee)

15. ☐ Attach copy of lease.

Section C—Corporate Information

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

16. Name of liquor license agent Sinarack Macvilay

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

18. How long has the agent continuously resided in the State of Wisconsin? 20 years

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 _____

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

WI April 2006

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
~~Sinara~~ Owner	Sinarack Macvilay	Madison, WI 53717

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.

Sinarack Macvilay

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) Beer & Wine License at 617 State Street Madison, WI 53703

Section D—Business Plan

26. 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 Lao and Thai Restaurant. Will be serving Lao and Thai Cuisine

28. Hours of operation 11am to 9pm daily

29. Describe your management experience I have manage the restaurant for 10 years

30. List names of managers below, along with city and state of residence.

Khen Macvilay — 2 Bude Cir Madison, WI 53717

31. Describe staffing levels and staff duties at the proposed establishment

Khen Macvilay

32. Describe your employee training

Khen Macvilay

33. Utilizing your market research, describe your target market.

flyer

34. Describe how you plan to advertise and promote your business. What products will you be advertising?

flyer

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

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.

37. Do you plan to have live entertainment? ☑ No ☐ Yes—what kind? _____

38. What age range do you hope to attract to your establishment? all ages - family.

39. What type of food will you be serving, if any? Lao Thai Cuisine
☐ Breakfast ☐ Brunch ☑ Lunch ☑ 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? 11am to 9pm daily

42. What hours, if any, will food service not be available? —

43. Indicate any other product/service offered. _____

44. Will your establishment have a kitchen manager? ☐ No ☑ Yes

45. Will you have a kitchen support staff? ☐ No ☑ Yes

46. How many wait staff do you anticipate will be employed at your establishment? 2 to 4
During what hours do you anticipate they will be on duty? 11am to 9pm

47. Do you plan to have hosts or hostesses seating customers? ☐ No ☑ Yes

48. Do your plans call for a full-service bar? ☑ No ☐ 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? ☐ No ☑ Yes

50. Will there be a separate and specific area for eating only?

☐ No ☑ Yes, capacity of that area 30 - 40

51. What type of cooking equipment will you have?
☑ Stove ☑ Oven ☑ Fryers ☐ Grill ☑ Microwave

52. 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? 20%

54. If your business plan includes an advertising budget:

What percentage of your advertising budget do you anticipate will be related to food? 90%

What percentage of your advertising budget do you anticipate will be drink related? 10%

55. Are you currently, or do you plan to become, a member of the Madison—Dane County Tavern League or the Tavern League of Wisconsin? ☑ No ☐ Yes

56. Are you currently, or do you plan to become, a member of the Wisconsin Restaurant Association or the National Restaurant Association? ☑ No ☐ Yes

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:

<10 % Alcohol >90 % Food _____ % Other

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.

Section F—Required Contacts and Filings

59. I understand that liquor/beer license renewal applications are due April 15 of every year, regardless of when license was initially granted. ☐ No ☑ Yes

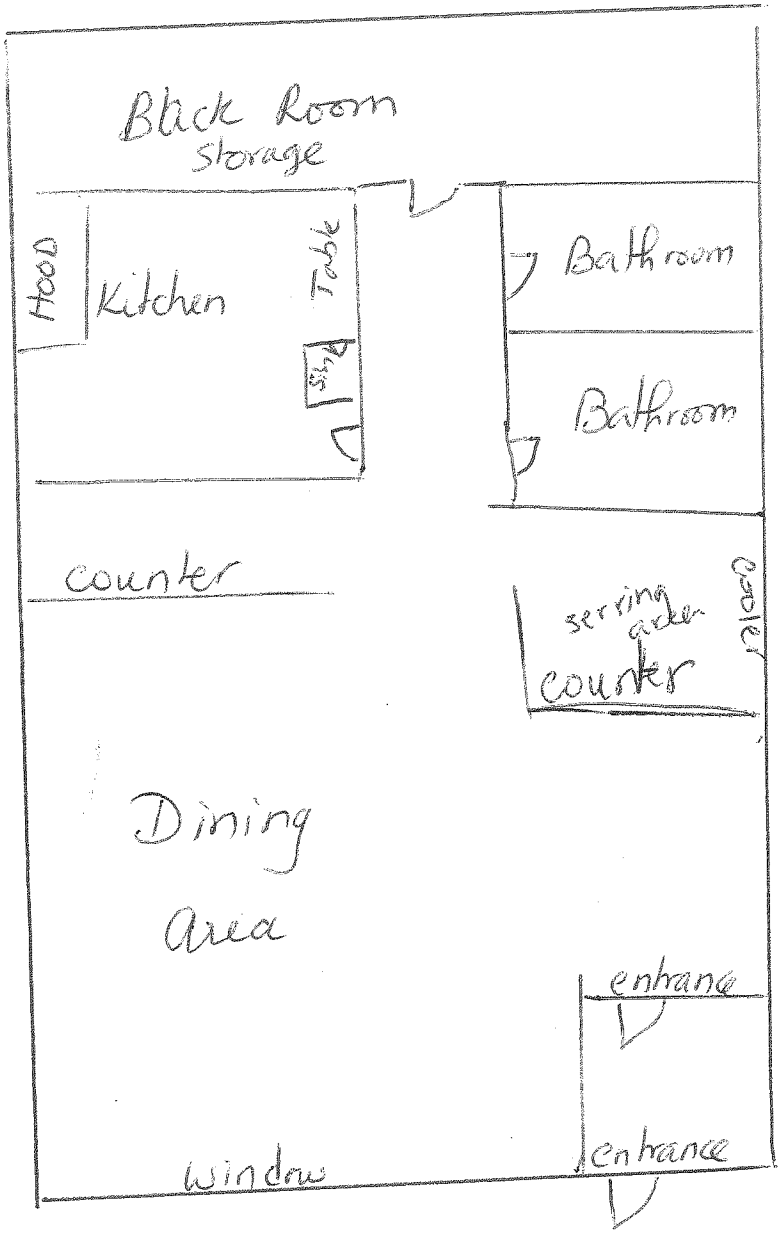
60. I understand that I am required to host an information session at least one week before the ALRC meeting. ☐ No ☑ Yes

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 ☑ Yes

63. I agree to contact the Alcohol Policy Coordinator prior to the ALRC meeting. ☐ No ☑ Yes

64. I agree to contact the neighborhood association representative prior to the ALRC meeting.
☐ No ☑ Yes


Black Room
storage
Hood
Kitchen
Table
Bathroom
Bathroom
counter
serving counter
cooler
Dining
Area
entrance
entrance
window