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City of Madison Liquor/Beer License Application

Ma	On-Premises Consumption: Class B Beer Class B Liquor Class C Wine Off-Premises Consumption: Class A Beer Class A Liquor Class A Cider
Se	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 17.
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. □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □
4.	Trade Name (doing business as) Ohio Tavern
5.	Address to be licensed 224 Mag Ohio AVC Madison WI 53704
6.	Mailing address 224 OHIO AVR Madism WI 53794
7.	Anticipated opening date 7/6/16
3.	Is the applicant an employee or agent of, or acting of behalf of anyone except the applicant named in question 2? ☑ No □ Yes (explain)
Э.	Does another alcohol beverage licensee or wholesale permitee have interest in this business?
	☑ No ☐ Yes (explain)
Sec 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. Bar is located in the real of the first floor it
	15 a Shale room. Beer will be stored in coolers ustrains
	a valkin cooler in the basement, Liquar will be stopelized
	Upstars and stored in a locked area downstairs.
6	The front of the building is a unassociated retail space the 2nd floor holds 3 residential apartments
	IM LAND TION NOIDS & recidential a partheals

	11.	Attach a floor plan,	no larger than 8 ½ by 1	4, showing the space descri	bed above.
	12.	Applicants for on-prer	nises consumption: list	estimated capacity90	3
	13.	Rear Parki	of will be peri	varie Parking underly observed by	enployees.
1	14.	Was this premises lic	ensed for the sale of liqu	ior or beer during the past li	cense year?
		□ No 🗗 Yes, licer	se issued to		(name of licensee)
	15.	☑ Attach copy of lea	se.		
	This	ction C—Corporates section applies to core proprietorships and p	inizations, and Limited Liabi ion D.	ility Companies only.	
	16.	Name of liquor licens	e agent <u>Soshur</u>	Swentzel	
	17.	City, state in which a	gent resides <u>Mad/S</u>	n wt	
	18.			in the State of Wisconsin?	7 years
	19.			nd check form are attached.	1
	20.	Has the liquor license	e agent completed the re	sponsible beverage server	training course?
		☐ No, but will compl	ete prior to ALRC meeti	ng 🛮 Yes, date complete	d
	21.		istration of corporation, $2/29//\zeta$	nonprofit organization, or LL	-C. '
	22.	In the table below list	the directors of your co	rporation or the members of	f your LLC.
			Name	City and State of Residence	ce
	7		Sock Williams	Madison WI	
		\	Knisti Genna	\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	
		Omer	Josh Swentzel		
			- 100°		
	23.	Registered agent for	your corporation or LLC	. This is your agent for ser	vice of process, notice or
		demand required or same as your liquor.	permitted by law to be s	erved on the corporation. T	his is not necessarily the
		Same as your ilquoi	11/1/40 <		
		VIV V	· · · · · · · · · · · · · · · · · · ·		

	24.	Is applicant a subsidiary of any other corporation or LLC?
		Ď No ☐ Yes (explain)
s	25.	or any manager hold any interest in any other alcohol beverage license or permit in Wisconsin?
		□ No 1 Yes (explain) KNIST: Genna & Sack Williams are the
		what type of establishment is contemplated? Dennas Lounge, Under Store Gennas Lounge,
		☐ Convenience Store without gas pumps ☐ Convenience Store with gas pumps
		□ Other
	27.	Business description Taneral Serving Beer Whe Eliquer
		Taces and tamala
		·
	28.	Hours of operation initially / Man to 2: Man Sun-Thurs 11:30 an to 2:30 an
	29.	Hours of operation in trally // Man to 2: Man Sun-Thurs 11:30 an to 2:30 an Describe your management experience Bar Manger at Tarado
		Bar Margo at Sagra Avettr Manager at Starbiquer.
		COLNING Manager for To top Tavery & Grangas
	30.	List names of managers below, along with city and state of residence.
		Kristi Gennos Madison UI
	es ^e	
		Sack Villians "
	31.	Describe staffing levels and staff duties at the proposed establishment
		E Josh will act as Managenut. all employees are Non Managene
	32.	Describe your employee training All Bourendus must be likensed, week lan
		Mainly consisting of Product Education, Safety Mrawies,
		CNSTOMER Service & RUSPORSibility
		/

33.	Utilizing your market research, describe your target market.
	We aim to be a Nekliber and tanen, attracting bocal currences
	and craft Ber/ Ergist enthusiastic Also agrant local Taguerra lunch
34.	3499
MOLL OF	
	releases, craf + beer week / Distill America / great toste
	word of nouth will be essential
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 off p	etion E—Consumption on Premises section applies to Class B and Class C applicants only. Class A license applicants (consumption remises) may skip to Section F.
37.	Do you plan to have live entertainment? No Yes—what kind? Karaolee and
	occusional Loukey Plano or acoustic music
38.	What age range do you hope to attract to your establishment? all legal ages will be exaloged
39.	What type of food will you be serving, if any? <u>Tacas</u> E <u>+ anales</u> □ Breakfast □ Brunch □ Lunch □ Dinner
	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. Standard Bar Snacks
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? Qaly Bustal
	During what hours do you anticipate they will be on duty?
47.	Do you plan to have hosts or hostesses seating customers? ∠☐ No ☐ Yes

48.	Do your plans call for a full-service bar? □ No ወ Yes If yes, how many barstools do you anticipate having at your bar? <u>\logbedref{\sigma}</u> How many bartenders do you anticipate having work at one time on a busy night? <u>2</u>
49.	Will there be a kitchen facility separate from the bar? ☐ No 戶 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 Mi
	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? 25%
54.	If your business plan includes an advertising budget:
	What percentage of your advertising budget do you anticipate will be related to food?
	What percentage of your advertising budget do you anticipate will be drink related? Zero
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:
	<u>\$0</u> % Alcohol <u>20</u> % 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.
Sec	tion 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 Д 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

