STA OF	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 Class A Cider
Sec 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 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.
2.	This application is for the license period ending June 30, 20
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.
	BELAIR CANTINA CAPITOL SQUARE, INC.
4.	Trade Name (doing business as) BELAIR CANTINA
5.	Address to be licensed MARTIN WITHOR KING JR. BLVD MADISON 537
6.	Mailing address AS ABOVE
7.	Anticipated opening dateAUSUST, 2017_
8.	Is the applicant an employee or agent of, or acting of behalf of anyone except the applicant named in question 3? No □ Yes (explain)
9.	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. FIRST FUOR BAR and RESTAVRANT, URVOR ROOM, BASEMENT BEER COOLER, BASEMENT BEER STARAGE ROOM, SIDEWALK CAFE

11.	\square 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
13.	Describe existing parking and how parking lot is to be monitored. STREET PARKING
14.	Was this premises licensed for the sale of liquor or beer during the past license year?
	□ No ▼ Yes, license issued to FRANCESCAS MADISON UC (name of licensee)
15.	Attach copy of lease.
This	etion C—Corporate Information section applies to corporations, nonprofit organizations, and Limited Liability Companies only. sproprietorships and partnerships, skip to Section D.
16.	Name of liquor license agent KRISTYN TITEL
17.	City, state in which agent resides MILWAV LEET WI
18.	How long has the agent continuously resided in the State of Wisconsin?
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 <u>\$\text{\text{\$\text{cl}}}\text{\text{attached}}</u>
21.	State and date of registration of corporation, nonprofit organization, or LLC. Uchse With Agent of
22.	In the table below list the directors of your corporation or the members of your LLC. Another Attach background check forms for each director/member. Title Name City and State of Residence PRESIDENT USUE MONTONULO MILWAULDE WILLIAM STATE OF RESIDENT SUIT DINSON MILWAULDE WILLIAM STATE WILLIAM
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.

24.	Is applicant a subsidiary of any other corporation or LLC?
	□ No Yes (explain) SEE ATACHMENT
25.	or any manager hold any interest in any other alcohol beverage license or permit in Wisconsin?
	□ No Yes (explain) SEE ATTACHMENT
	ction D—Business Plan 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 CALIFORNIA FOOD TRUCK INSPIRED -
	MEXICAN RESTAURANT. 60% +000 STILES, TIGH
	VOLUME, TACOS, BURRITOS, SALAOS-AY FRESH.
	MARGARITAS MADE WITH FRESH LICES. SPECIALS ON THESPA
28.	Hours of operation MONDAY - FRIDAY IJAM-2AM (FRIDAY 239AM)
29.	Describe your management experience
	WE HAVE THE BOKN IN RESTAURANTS FOR OVER
	20 years. This will BE OUR 6TH BOUR WORMON
30.	List names of managers below, along with city and state of residence.
	ANDREW MILLER, GHENOME
	JUSTIN HAMN, NAVESHA
	FUE FRONTOF
31.	Describe staffing levels and staff duties at the proposed establishment <u>FIVE TRONT OF</u>
	HOUSE MANAGER, HARE HICHAN MINOTORIES, FOOD
	TULLY STATED WITH SOLVERS BARTONDERS, NOS IS RUNNERS
32.	Describe your employee training
	AU STAFF GO THROUGH OUR ECTENSIVE TRAINING
	PROGRAM AND ARE UNABLE TO WORK UNTIL
	12MPILTIEN

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Leslie Montemurro, Scott Johnson, Kristyn Eitel

Ownership Attachment

1993

Fuel Café, Inc. dba Fuel Café, 818 E Center Street, Milwaukee Counter Service Café, Deli, Sandwich Shop Montemurro/Johnson

1995

Comet Café, Inc. dba Comet Café, 1947 N Farwell Avenue, Milwaukee Full Service Restaurant/Bar Montemurro/Johnson

1998

MJE, Inc. dba HiHat Lounge & Garage, 1701 N Arlington Place, Milwaukee Full Service Restaurant/Bar Montemurro/Johnson

2005

Balzac, Inc. dba Balzac Wine Bar, 1716 N Arlington Place, Milwaukee Full Service Restaurant/Bar Montemurro/Johnson

2010

BelAir Cantina, Inc. dba BelAir Cantina, 1935 N Water Street, Milwaukee Full Service Restaurant/Bar Montemurro/Johnson/Eitel 2013

BelAir Cantina Tosa, Inc. dba BelAir Cantina, 6817 W North Avenue, Wauwatosa Full Service Restaurant/Bar Montemurro/Johnson/Eitel

2013

Finks of Milwaukee, Inc. dba Finks, 1875 N Humboldt Avenue, Milwaukee Full Service Bar Montemurro/Johnson/Eitel

2014

BelAir Cantina Downer, Inc. dba BelAir Cantina, 2625 N Downer Avenue, Milwaukee Full Service Restaurant/Bar Montemurro/Johnson/Eitel

2015

Max Zimmer, LLC dba Panga Bar & Grill, 34422 Delafield Rd, Oconomowoc Full Service Restaurant/Bar Eitel

2016

BelAir Cantina Oak Creek, Inc. dba BelAir Cantina, 410 W Town Square Way, Oak Creek Full Service Restaurant/Bar Montemurro/Johnson/Eitel

2016

Fuel Café 5th Street, Inc. 630 S 5th Street, Milwaukee Full Service Restaurant/Bar Montemurro/Johnson/Eitel

33.	Utilizing your market research, describe your target market.
	BECAUSE OUR CONCEPT IS VERY APPROACHABLE
	OUR TYARGET MARKET IS A LARGE RANGE 18-60 years,
34.	Describe how you plan to advertise and promote your business. What products will you be advertising?
	SOCIAL MEDIA, SOME PRINT PROFESSIONITIS
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
	ction E—Consumption on Premises
	s section applies to Class B and Class C applicants only. Class A license applicants (consumption 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? 18-60 years
39.	What type of food will you be serving, if any? CAUFORN A FOOD TRUCK INSPIRED Breakfast D Brunch D Dinner MEXICAN
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?
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?
	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 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
	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
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?
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?
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 X 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: When the contraction of the contra
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.
	tion F—Required Contacts and Filings 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 घ 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 Deputy Clerk prior to the ALRC meeting. □ No 🏋 Yes
64.	I agree to contact the neighborhood association representative prior to the ALRC meeting. □ No Yes
65.	I intend to operate under the alcohol license within 90 days of the Common Council granting this license. The license shall be considered surrendered if not issued within 90 days of being granted. No Yes