



City of Madison Liquor/Beer License Application

On-Premises Consumption: Class B Beer Class B Class C Wine
Off-Premises Consumption: Class A Beer Class A Liquor Class A Cider

A-8
P-402

LICLIB-2017-01279 49886

Section A – Applicant

- 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.
- This application is for the license period ending June 30, 2018.
- 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.
Sweet Home Wisconsin, LLC
- Trade Name (doing business as) Sweet Home Wisconsin
- Address to be licensed 910 Regent St, Madison WI, 53715
- Mailing address 910 Regent St, Madison WI, 53715
- Anticipated opening date March 1st, 2018
- Is the applicant an employee or agent of, or acting of behalf of anyone except the applicant named in question 3?
 No Yes (explain) _____
- Does another alcohol beverage licensee or wholesale permittee have interest in this business?
 No Yes (explain) _____

Section B—Premises

- 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 beverages are to be sold inside the building on the main floor as well as in the outdoor area behind the building. There will be a bar area in both locations. Alcohol beverages will be stored behind the bars inside and outside. Storage space will be in the walk-in cooler and a locked office space; both located in an employee only area in the basement of the building.

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 80
13. Describe existing parking and how parking lot is to be monitored.

There is no parking lot on the premises.

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

No ✖ Yes, license issued to O.S.S. (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 Brett Best
17. City, state in which agent resides Verona, Wisconsin
18. How long has the agent continuously resided in the State of Wisconsin? 31 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 12.14.17.
21. State and date of registration of corporation, nonprofit organization, or LLC.

Wisconsin, 12/12/17

22. In the table below list the directors of your corporation or the members of your LLC. X Attach background check forms for each director/member.

| Title | Name | City and State of Residence |
|------------------|----------------|-----------------------------|
| Managing Partner | Lexy Frautschy | Fitchburg, WI |
| Managing Partner | Brett Best | Verona, WI |
| | | |
| | | |
| | | |
| | | |

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.

Lexy Frautschy

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) One of the partners is a partner in another restaurant that holds a license but is not the agent; Ian's Pizza Milwaukee LLC.

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 The concept is a Wisconsin sports and food themed restaurant with a strong Chicago twist. The restaurant will feature traditional American food from Wisconsin as well as selected Chicago-based specialties and favorites. The bar will also serve traditional Wisconsin alcohol beverages as well as selected Chicago-based specialties and favorites. The decor will be Wisconsin and Chicago themed and includes several TV's to view sporting events.
28. Hours of operation 10AM to 2AM Sunday - Thursday and 9AM to 2AM Friday - Saturday
29. Describe your management experience I have been involved in food service management for over 15 years in single and multi-unit capacities overseeing 50+ employees. I have also worked in a corporate setting managing projects and initiatives impacting 40+ corporate and franchise restaurants. I received a bachelor's degree in Organizational Behavior and Leadership from Edgewood College in Madison, WI.
30. List names of managers below, along with city and state of residence.
Brett Best, Verona WI Lexy Frautschy, Fitchburg WI
31. Describe staffing levels and staff duties at the proposed establishment A minimum of 3 working during non-peak times and 8 working during peak times. Duties will include a kitchen staff of 1-3 workers cooking/prepping in the kitchen, a serving staff of 1-3 workers in charge of serving the guests and providing face-to-face customer service, and 2 manager/bar workers making alcohol and non-alcohol beverages and oversight of the front and back of house operations.
32. Describe your employee training All staff will be required to complete the WI Alcoholic Beverage training. We also have internal Responsible Server training as part of our detailed Bottom Line Training system that teaches the proper execution of all position expectations.

33. Utilizing your market research, describe your target market. Includes business lunch, family dining, sports enthusiasts and college students. The business lunch crowd will mainly consist of foot traffic from nearby business as well as young adults and college students comprised from the nearby residential areas. The diner crowd will mainly consist of family and/or groups of young and middle aged adults and college students that enjoy a Wisconsin and Chicago sports-friendly environment. The outdoor seating area will attract a demographic that enjoys and outdoor restaurant environment.
34. Describe how you plan to advertise and promote your business. What products will you be advertising? The business will be advertised and promoted as a Wisconsin and Chicago Sports restaurant that serves great American food. Featured products will include Wisconsin food favorites such as cheese curds and a fish fry, and Chicago favorites such as a Chicago dog and deep dish pizza. The business will also advertise a great environment for sports enthusiasts to watch Wisconsin and Chicago sports.
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? 20-60
39. What type of food will you be serving, if any? _____
 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? open-close
42. What hours, if any, will food service not be available? N/a
43. Indicate any other product/service offered. Merchandise
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? 12
 During what hours do you anticipate they will be on duty? 11AM-1PM
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? 15
 How many bartenders do you anticipate having work at one time on a busy night? 2-3
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 _____
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? 50%
54. If your business plan includes an advertising budget:
 What percentage of your advertising budget do you anticipate will be related to food? 60% What
 percentage of your advertising budget do you anticipate will be drink related? 40%
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:
60 % Alcohol 40 % 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 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

66. I understand we must file a Special Occupational Tax return (TTB form 5630.5) before beginning business. [phone 1-800-937-8864] No Yes
67. I understand a Wisconsin Seller's Permit must be applied for and issued in the same name as that shown in section 2, above. [phone 608-266-2776] No Yes
68. 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

69. State Seller's Permit 4 5 6 - 1 0 3 0 1 2 8 0 4 7 - 0 2

70. Federal Employer Identification Number 82-3671519

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

Contact person Brett Best

E-mail address best.brett@gmail.com

Phone 608.347.5111

Preferred language English

72. Corporate attorney, if applicable: Name _____

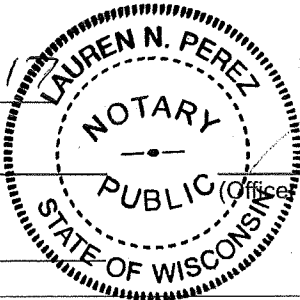
Phone _____ E-mail _____

Read carefully before signing in front of a notary: 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.

Subscribed and Sworn to before me:

this 15 day of December, 2012

Lauren N. Perez
 (Clerk/Notary Public)

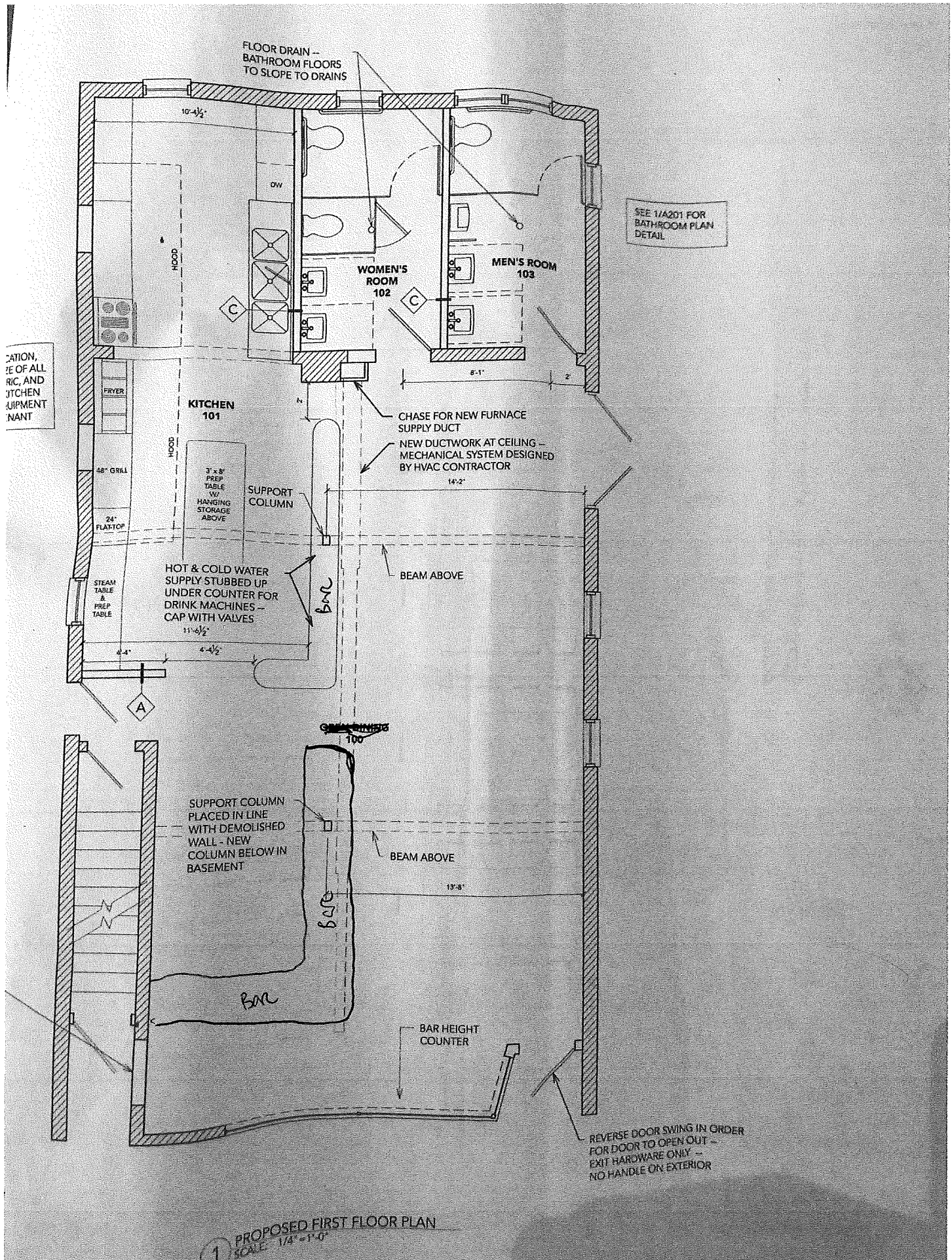


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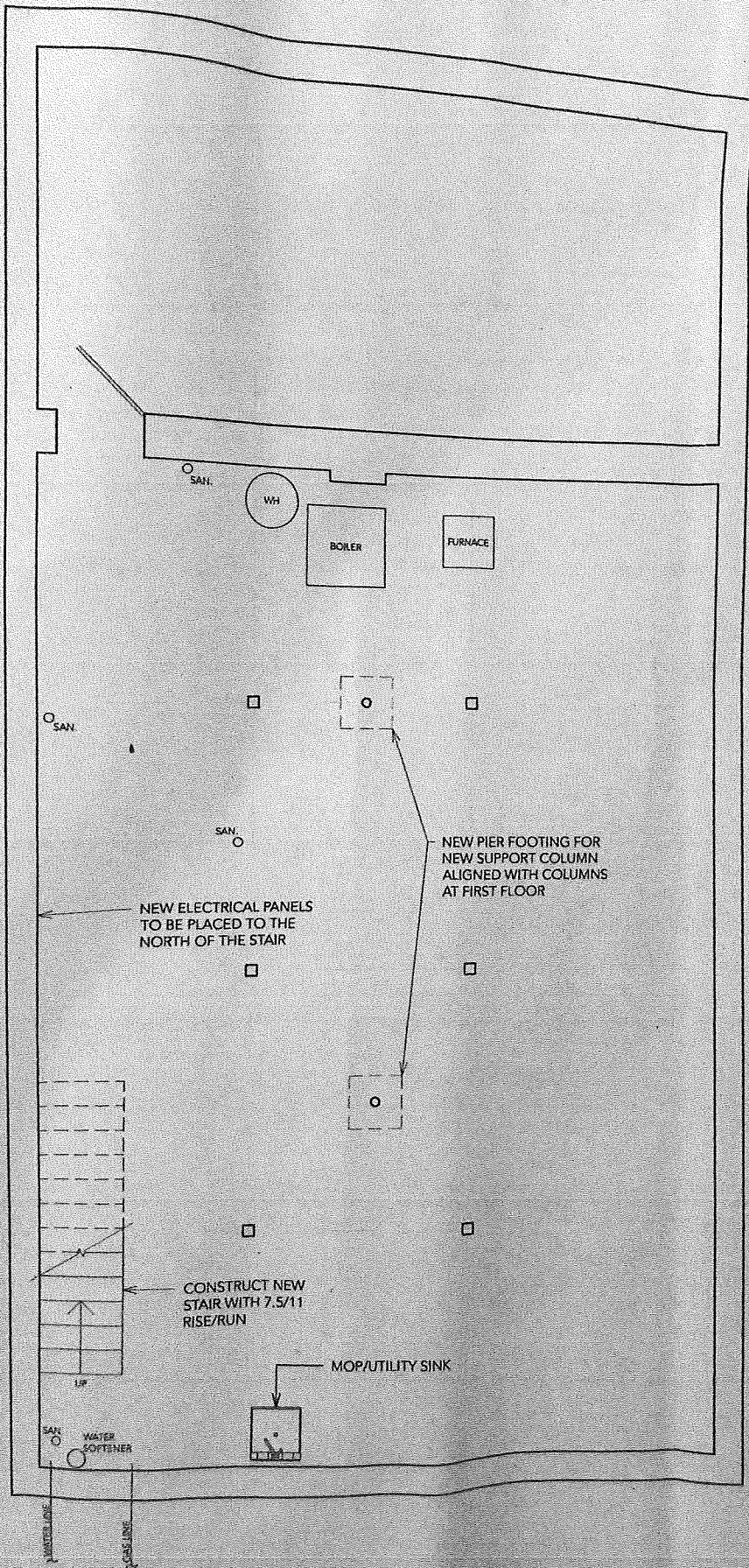
(_____) (Officer of Corporation/Member of LLC/Partner/Sole Proprietor)

My commission expires 7/17/20

| Clerk's Office checklist for complete applications | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Orange sign <input checked="" type="checkbox"/> WI Seller's Permit Certificate (matching articles of incorporation) <input checked="" type="checkbox"/> FEIN <input checked="" type="checkbox"/> Notarized application <input checked="" type="checkbox"/> Written description of premises | <input checked="" type="checkbox"/> Background investigation form(s) <input checked="" type="checkbox"/> Form for surrender of previous license <input checked="" type="checkbox"/> *Articles of Incorporation <input checked="" type="checkbox"/> Notarized Appointment of Agent * Corporation/LLC only | <input checked="" type="checkbox"/> Floor Plans <input checked="" type="checkbox"/> Lease <input checked="" type="checkbox"/> Sample Menu <input type="checkbox"/> Business Plan |
| Date complete application filed with Clerk's Office _____ | | |
| Date of ALRC meeting _____ Date license granted by Common Council _____ | | |
| Date provisional issued _____ Date license issued _____ License number _____ | | |



1 PROPOSED FIRST FLOOR PLAN
 SCALE 1/4" = 1'-0"



1. EXISTING FIRST FLOOR PLAN

Sweet Home Wisconsin Sample Menu

- Appetizers
 - Chicken Wings
 - Pretzel Sticks with Mustard Sauce
 - Cheese Curds
 - Jalapeno Poppers
 - Loaded French Fries
 - Fried Mushrooms
 - Cheese Bread
- Burgers
 - Cheese Burger
 - Assorted cheeses to choose from
 - Bacon Burger
 - BBQ (Southwestern) Burger
 - Veggie Burger
 - Patty Melt
- Chicken
 - Grilled Chicken
 - Chicken Bacon Ranch
- Other
 - Smoked Brat
 - Grilled Cheese
- Sides
 - French fries
 - Cheese curds
 - Onion Rings
- Salads
 - House
 - Greek
 - Caesar
 - Side
 - Build your own

Chicago Specific Food Menu.

- Sandwiches.
 - Chicago Dog
 - Italian Beef
- Deep Dish Pizza