



Streatery Extension of Premises

Fee: Waived

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

City of Madison Clerk
210 MLK Jr Blvd, Room 103
Madison, WI 53703
licensing@cityofmadison.com
608-266-4601

(Agenda Item Number)

(Legistar file number)

LICPCH-2020-00414

(License number)

4

406

(Alder District #)

(Police Sector)

Office Use Only

Streatery extension of premises is available only to those restaurants whose sale of alcohol beverages are 50% or less of the establishment's gross receipts. Application must be submitted to the Clerk's office. Staff will review the application and if it is complete and approved by Zoning and/or the street vending coordinator, provisionally approve and forward to the Alcohol License Review Committee for final approval recommendation. Any licensed establishment applying to extend their premises onto City property must provide a certificate of insurance for liquor liability including a separate additional insured endorsement naming the City of Madison with this application.

Are you requesting this temporary extension of licensed premises, in compliance with Emergency Order Resolution Legistar #60695 (Madison Streatery Program), adopted by the Common Council on June 2, 2020?: Yes No

Required detailed floor plans of extension area **included**: Yes

Required approval of expanded eating area obtained from Street Vending Coordinator or Zoning Administrator **included**: Yes, date approved: N/A

Street Occupancy Permit obtained from Traffic Engineering: Yes No N/A

Does lease/deed cover area request for temporary extension?: Yes No

If no, **must attach** letter from landlord or property owner authorizing use of the property.

Licensed Premises Information

This application modifies existing alcohol license number: 34891-19141 / Holder 798622

Business dba Name: Pauls Club

Licensed Address: 204 State Street MADISON WI 53703

Liquor/Beer Agent Name: James Boxrud Michael Verveek

100 % Alcohol, ___ % Food, ___ % Other Alder, District #: _____ Police Sector: _____

Corporate Information

Business Legal Name (as on WI State Sellers Permit): Pauls Club Inc

Business Mailing Address: 907 Sarasota Ln CL DE 60014

Business Contact Name, Position: Annmarie Traino-Frickerton owner/OP

Business Phone: 815 8611703 Business Email: _____

Current Capacity (indoor): 150
75 Covid

Current Capacity (outdoor): 24

Proposed Capacity (outdoor): 24

Description of Proposed Changes: using space which Leon used for
outside patio -
Leon no longer in business
with 6ft distancing need more room for tables

Signature

Chunmau Trai Fruelidern
Authorized Signature of Agent or Establishment Owner

6-19-2020
Date

Clerk's Office checklist for complete applications

- Floor Plans
- Copy of approval from Street Vending/Zoning
- Copy of Street Occupancy Permit included *if applicable*
- Letter from landlord/property owner authorizing temporary extension of lease area *if applicable*
- Certificate of Insurance for liquor liability with City of Madison named *if extending on city property*

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

- Orange sign Orange business card
- "License Renewals & Changes" brochure with next steps issued

June 18, 2020

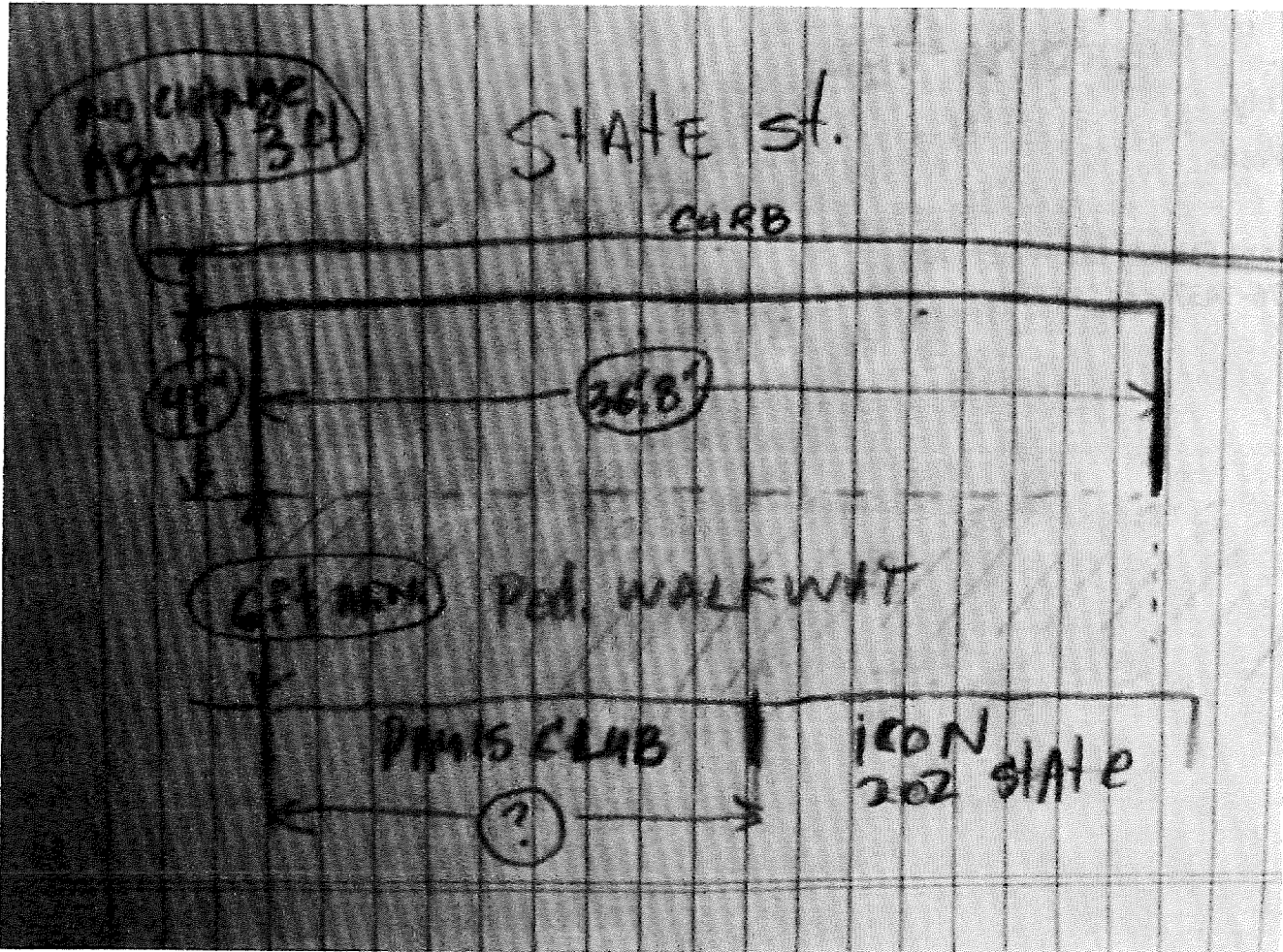
To Whom it May Concern,

I give permission for Paul's Club to expand their outdoor seating area to include the space designated for the prior Icon Restaurant outdoor seating location in front of 206 State Street. The space can be occupied by Paul's Club until October 1, 2020.

Sincerely,
Mary Paras

202 State Street, LLC - Member
608-576-1437

From: Timothy Belliveau
Sent: Thursday, June 18, 2020 12:18 PM
To: Ann Marie Frickelton
Subject: Patio drawing



total 23'2
 normal patio 19'3 wide
 Icon area 17'5 wide
 23'2 temp total



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
06/19/2020

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Hausmann-Johnson Insurance Inc 740 Regent St., PO Box 259408 Madison, WI 53725-9408 Hausmann-Johnson Insurance		608-257-3795		CONTACT NAME: Hausmann-Johnson Insurance PHONE (A/C, No, Ext): 608-257-3795 E-MAIL ADDRESS:		FAX (A/C, No): 608-257-4324	
INSURED Paul's Club, Inc 967 Sarasota Lane Crystal Lake, IL 60014				INSURER(S) AFFORDING COVERAGE INSURER A: Society Insurance		NAIC # 15261	
INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:							

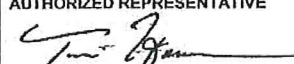
COVERAGES **CERTIFICATE NUMBER:** **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC OTHER:	X		BP19001830	02/11/2020	02/11/2021	EACH OCCURRENCE	\$ 1,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000
							MED EXP (Any one person)	\$ 5,000
							PERSONAL & ADV INJURY	\$ 1,000,000
							GENERAL AGGREGATE	\$ 2,000,000
							PRODUCTS - COM/OP AGG	\$ 2,000,000
								\$
A	<input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			BP19001830	02/11/2020	02/11/2021	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
							BODILY INJURY (Per person)	\$
							BODILY INJURY (Per accident)	\$
							PROPERTY DAMAGE (Per accident)	\$
								\$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$			UM19001832	02/11/2020	02/11/2021	EACH OCCURRENCE	\$ 1,000,000
							AGGREGATE	\$ 1,000,000
								\$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N If yes, describe under DESCRIPTION OF OPERATIONS below		N/A	WC19001831	02/11/2020	02/11/2021	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER	\$ 100,000
							E.L. EACH ACCIDENT	\$ 100,000
							E.L. DISEASE - EA EMPLOYEE	\$ 500,000
							E.L. DISEASE - POLICY LIMIT	\$
A	Liquor Liability			BP19001830	02/11/2020	02/11/2021	Limit	\$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

RE: Sidewalk Cafe
When required in written contract, the City of Madison is listed as additional insured with respect to commercial general liability.

CERTIFICATE HOLDER		CANCELLATION	
CITMADI City of Madison PO Box 2983 Madison, WI 53701		SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE 	



PAULCLT

OP ID: KM

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NOTICE

Streeters is a temporary program designed to help restaurants and taverns recover from the economic impact of COVID-19. Any establishment participating in this program must follow the requirements and prohibitions related to the program, including those related to hours of operation and noise amplification. Any complaints related to this program shall be submitted to the Street Vending Coordinator, Meghan Blake-Horst, mblake-horst@cityofmadison.com and Zoning Administrator, Matt Tucker, mtucker@cityofmadison.com. Any approvals for this establishment to have outdoor seating that did not preexist the COVID-19 pandemic shall expire on October 25, 2020. Any establishment with approvals that expire on October 25, 2020 wishing to maintain this outdoor seating must go through the regular city process for such approvals.

From: streetvending
Sent: Thursday, June 18, 2020 5:03 PM
To: annmarietf
Cc: Blake-Horst, Meghan; Verveer, Michael; licensing
Subject: Approved Expansion: Streatery Cafe, Pauls Club 6-18-20

Ann Marie and Paul's Club,

Your request to expand your sidewalk café for **Pauls Club, 204 State St., Madison, WI 53703** has been approved on **6/18/2020** by the Street Vending Office. You are able to begin setting up your café within the approved expansion area and serving food.

Before you can serve alcohol in the expanded area, you will need to submit a Temporary Premises Extension Permit application to the Clerk's Office. This email will serve as notification that your expansion is approved.

Once this application is submitted and approved, by the Clerk's Office, you will be able to begin service into the expanded patio area on a provisional approval and forward to the Alcohol License Review Committee for final approval recommendation. See Temporary Premises Extension permit application for insurance requirements and details.

Attached you will find a NOTICE sign. **This sign is required to be printed and displayed on the café, facing outward.** Having one on each end of the café would be preferred. I would encourage you to laminate or place in a protective plastic sheet to maintain the sign and limit the need to reprint.

Under no circumstances is this program meant to promote gathering or social spaces, and are only to allow food & beverage patrons to be seated in accordance with physical distancing requirements to increase capacity. This program and approvals can be changed or additional requirements can be placed at any time.

Public Health Madison-Dane County (PHMDC) Resources and Guidelines:

- COVID-19 Restaurant Toolkit: <https://publichealthmdc.com/coronavirus/forward-dane/requirements#toolkit>
- Sign-up for the Public Health Madison-Dane County newsletter. This is the best way to keep up to date on Public Health information you need to know to operate a safe and healthy restaurant: <https://bit.ly/2XWJJ2N>

We will be flexible as we work with you and your staff but we ask that you:

- Follow all Public Health orders
- Maintain a clear 6' pedestrian path at all times
- Keep chairs, tables and umbrellas within the enclosures at all times
- Place tables and chairs according to the current Public Health orders (6' distance for the seating area is measured from back of chair to back of chair).
- Be mindful of your neighbor café and that the same distancing applies between seating at adjacent cafes.
- Ensure customers are not moving tables together