

Streatery Extension of

Premises

Fee: Waived

Class A: Beer, Liquor, Cider
Class B: Beer, Liquor, Cider
Class C Wine
City of Madison Clerk
210 MLK Jr Blvd, Room 103
Madison, WI 53703
Ilicensing@cityofmadison.com
608-266-4601

(Agenda	Item	Number

(Legistar file number)

LICPCH-2020-00369

(License number)

207

(Police Sector) (Alder District #) (Police S 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 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 final approval recommendation. City of Madison with this application.	
Are you requesting this temporary extension of licensed premises, in compliance with Emergency of Are you requesting this temporary extension of licensed premises, in compliance with Emergency of Are you requested this temporary extension of licensed premises, in compliance with Emergency of Are you requested this temporary extension of licensed premises, in compliance with Emergency of Are you requested the Common Council on June 2, Resolution Legistar #60695 (Madison Streatery Program), adopted by the Common Council on June 2,	
20207: X Yes □ No	
y 4 d oar plans of extension area included: ⊀ Yes	
Required approval of expanded eating area obtained from Street Ventuing Coordinates	
Street Occupancy Permit obtained from Traffic Engineering: XYes \(\Bar\) No \(\Bar\) N/A	

Does lease/deed cover area request for temporary extension?: \square Yes \square 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: 9335Business dba Name: Farinchild Licensed Address: 261 Manuae 30 % Alcohol, 70 % Food, _ Alder, District #: Corporate Information Business Legal Name (as on WI State Sellers Permit): Business Mailing Address: 222 S. M. Aval Business Email: 5,6 @ Business Phone: 608-819-636 -Continue on Back-

Extension Details
Current Capacity (indoor): Current Capacity (outdoor):
Proposed Capacity (outdoor): 2. C
Description of Proposed Changes: We have applied for this dellevit
Sections areas: one through the streatery extention, which we would
have four tables for four residence in the selection, which we would
more four tables for four people. Another Inrough street afe
and that will be two tables for two in front of our business.
Signature
Authorized Signature of Agent or Establishment Owner , Date
Clerk's Office checklist for complete applications
☐ 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 ☐ Orange sign ☐ Orange husiness card
Changes" brochure with next steps issued
License Renewals & Changes" brochure with next steps issued

NEW 05/2020