	Liquor/Beer         License         License         Application    (Agenda Item Number) (Legistar file number) (L(CUB-2021-0013Y) (License number) (Licen
	City of Madison Clerk <sup>210</sup> MLK Jr Blvd, Room 103 Madison, WI 53703 <sup>(Alder District #)</sup> <sup>(Alder District #)</sup>
<b>Sec</b> 1.	tion A – Applicant List the name of your D Sole Proprietor, D Partnership, D Corporation/Nonprofit Organization or D Limited Liability Company exactly as it appears on your State Seller's Permit. Twip the Beet LLC
2.	Trade Name (doing business as) Mavigold Kitchen
3.	Address to be licensed 118 S. Pinckney St modison, WI, 53703
4.	Mailing address IIS S. Pinckney St. Madison, WI, 53703
5.	Anticipated opening date June, 1, 2021
6.	Is the applicant an employee or agent of, or acting of behalf of anyone except the applicant named in question 1? $\square$ No $\square$ Yes (explain) $\square WWV / OWATOV$

7. Does another alcohol beverage licensee or wholesale permitee have interest in this business? ☑ No □ Yes (explain)

# **Section B—Premises**

8. 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 receipts. Alcohol beverages may be sold and stored only on the premises as approved by Common Council and described on license.

Dountown Madison breakfast 3 Junch cafe Niceof alcohol will include inside dining room and outside patio. Storage will in back kitchen dry-storage space contained building that Marigod Kitchen resides in Receipts restourant. kept on the POS server within the Page 1 of 5

9.	Applicants for on-premises consumption only. Estimated capacity (patrons and employee					
	Indoor:	Ou	tdoor:	20		
10. Describe existing parking and how parking lot is to be monitored.						
	All Parkin	g is in	Neorby	Purking	vanps	61
	All Parking ON Street	parting				
11.	Was this premises l	•				
	🗆 No 🗹 Yes, lic	- cense issued to	John (	sadau		_ (name of licensee)
This only	tion C—Corporat section applies to co . Sole proprietorship	orporations, nonpose and partnership	s, skip to S	ection D.		bility Companies
12.	Name of liquor licer City, state in which	nse agent	H TCI	eine	ye, _,	-
13.	City, state in which	agent resides $\_$	Madison,	WI		
14.	How long has the a	gent continuously	resided in I	he State of	Wisconsin?	45
15.	Has the liquor licen	se agent complete	ed the respo	nsible bever	age server	training course?
	🗹 No, but will com	plete prior to ALR	C meeting	🛛 Yes, da	ate complet	ed
16.	State and date of registration of corporation, nonprofit organization, or LLC.					
17.	In the table below list the directors of your corporation or the members of your LLC. $\square$ Attach background check forms for each director/member.					
	Title	Name		and State c	of Residence	9
	Member	Kristy Hei	V V	adison, wi	7 <del>78</del> -	
	Menser	Clank Hein	e m	adison, wI		_
18.	Registered agent fo notice or demand re necessarily the sam FHan	equired or permitt	ed by law t			

- 19. Is applicant a subsidiary of any other corporation or LLC?
  - ☑ No □ Yes (explain) \_\_\_\_\_
- 20. 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) \_\_\_\_\_

# Section D—Business Plan

- 21. What type of establishment is contemplated?
  □ Tavern □ Nightclub □ Restaurant □ Liquor Store □ Grocery Store
  □ Convenience Store without gas pumps □ Convenience Store with gas pumps
  □ Other \_\_\_\_\_
- 22. 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
- 23. Hours of operation: please enter opening and closing times in the table below.

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
8 -00 am	8 -00 <sub>am</sub>	8 -00am	8 -00 <sub>6m</sub>	8-00am	8 -Wom	8 -00 <sub>am</sub>
(Class B only) Enter below any hours when food service will not be available, if applicable						
3-00 <sub>pm</sub>	3 -00pm	3-00 pm	3 -00 pm	3 -00 pm	3 -00pm	3 -UUpy

# 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.* 

- 24. Indicate any other product/service offered.
- 25. All restaurants and taverns serving alcohol must substantiate their gross receipts for food and alcohol beverage sales broken down by percentage. (Note: Non-alcoholic drinks are classified as "Food.") New establishments estimate percentages:

 $\underline{0}$  % Alcohol  $\underline{0}$  % Food  $\underline{0}$  % Other

If applicable, describe "Other": \_\_\_\_\_

Do you have written records to document the percentages shown?	⊠∕ N	o 🛛	Yes
You may be required to submit documentation verifying the percent	ages ir	ndicated	1.

26. Do you plan to have live entertainment? 🗹 No 🛛 Yes—what kind? \_\_\_\_\_

If planned entertainment includes live music (except solo acoustic), a DJ, or a designated dance floor, please also complete an Entertainment License.

# Section F—Required Contacts and Filings

- 27. I understand that liquor/beer license renewal applications are due April 15 of every year, regardless of when license was initially granted. 
  No 
  Yes
- 28. I understand that I am required to host an information session at least one week before the ALRC meeting. 
  No 
  Yes
- 29. I agree to contact the Alderperson for this location to discuss my application and to invite the Alderperson to my information session. 
  No 
  Yes

- 30. I agree to contact the Police Department District Captain for this location prior to the ALRC meeting. 
  No Yes
- 31. I agree to contact the Deputy Clerk prior to the ALRC meeting.  $\Box$  No  $\Box$  Yes
- 32. I agree to contact the neighborhood association representative prior to the ALRC meeting. □ No □ Yes
- 33. I intend to operate under the alcohol license within 180 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
- 34. I understand we must file a Special Occupational Tax return (TTB form 5630.5) before beginning business. [phone 1-800-937-8864] □ No ☑ Yes
- 35. I understand a Wisconsin Seller's Permit must be applied for and issued in the same name as that shown in question 1, above. [phone 608-266-2776] □ No □ Yes
- 36. 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

- 37. This application is for the license period ending June 30, 20\_\_\_\_\_
- 38. State Seller's Permit  $4 \underline{5} \underline{6} \underline{1} \underline{0} \underline{3} \underline{0} \underline{5} \underline{3} \underline{9} \underline{1} \underline{3} \underline{0} \underline{0} \underline{2}$
- 39. Federal Employer Identification Number  $\frac{86 1920753}{2}$
- 40. Who may we contact between 8 a.m. and 4:30 p.m. regarding this license?

Contact person Kristy Heine
Business phone 608-469-2685 Business e-mail address KHeine 4233@ gmail. (om
Preferred language English

If needed, a qualified interpreter can be provided at no charge to you. Would you like an interpreter?

□ Yes (language: \_\_\_\_\_)

 $\Box$  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.

41. Corporate attorney, if applicable: Name <u>Ethan</u> <u>Miller</u> Phone <u>608-291-7507</u> E-mail <u>Etmiller</u> <u>WrSalaw</u>. Lom **NOTICE:** Completed application are due by noon of the third Monday (fourth, if the Clerk's office is closed on the third Monday) to get on the agenda for the proceeding months Alcohol License Review Committee. A completed application **must** be accompanied by the following items:

Copy of State Seller's Permit (Not Business Tax Registration Certificate), Appointment of Agent (if Corp/LLC), Member background investigation forms, Articles of Incorporation (if Corp/LLC), Floor Plans,

 $\Box$  Copy of Lease,  $\Box$  Business Plan, and  $\Box$  Sample Menu (if applying for Class B license)

If required items are missing, the application will not be considered complete and will not be accepted by the Clerk's Office until all requirements are submitted. No exceptions are made.

**Read carefully before signing:** 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.

Penalty for materially false application information: Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

> Sem

4-14-21 (Date)

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

Clerk's Office checklist for complete	applications			
<ul> <li>WI Seller's Permit Certificate (matching articles of incorporation)</li> <li>FEIN</li> <li>Written description of premises</li> </ul>	<ul> <li>Background investigation form(s)</li> <li>Form for surrender of previous license</li> <li>*Articles of Incorporation</li> <li>*Appointment of Agent</li> <li>* Corporation/LLC only</li> </ul>	<ul> <li>Floor Plans</li> <li>Lease</li> <li>Business Plan</li> <li>**Sample Menu</li> <li>** Class B only</li> </ul>		
□ Orange sign □ Orange busines	e Clerk's Office issued to the application: as card be in the City of Madison" brochure with contact	: information		
Date complete application filed with Clerk	's Office			
Date of ALRC meeting Date license granted by Common Council				
Date provisional issued [	Date license issued			





Fresh 🛸

DAILY

# MARIGOLD

FLAT TOP FAVES pure Wisconsin maple syrup

Blueberry Pancakes orange almond butter full (5) 11 / short (2) 6

Buttermilk Pancakes whipped butter full (5) 10 / short (2) 5.5

Lemon Ricotta Buckwheat Pancakes whipped butter, blackberries full (5) 12 / short (2) 6

French Toast / 11 brioche, toasted almond, pastry cream, berry purée, fresh berries

### FARM FRESH EGGS

Two \*Eggs Any Style / 9.5 marigold potatoes or field mix; choice of toast / add sausage or bacon +2.5

Marigold Breakfast Sandwich / 9 fried \*egg, cheddar spiked boursin, bacon, tomato, green onion, ciabatta /add marigold potatoes or field mix +3

Chile Poached \*Eggs / 9.75 french rosemary toast, prosciutto, manchego

### OMELETTES / 13

marigold potatoes or field mix & choice of toast

Zucchini & Goat Cheese roasted red pepper, parmesan

Ham & Gruyere parsley, green onion

MORNING GLORIES substitute tofu for eggs +2

Marigold Breakfast Burrito / 12 chorizo, cilantro, scrambled egg, cheddar, sweet potato, toasted pepita, black bean, roasted red pepper, chipotle mayo, salsa verde; green cabbage slaw

Chilaquiles / 13 @ guajillo braised chicken, cilantro, pickled red onion, corn tortilla chips, roja and verde salsa, chihuahua, cotija; sunny side up \*egg

Avocado Toast / 9.5 smashed avocado, grilled seed and grain bread, toasted pepita, cilantro, pickled red onion, cotija, chile oil, lemon and orange zest / add single \*egg +2

Huevos Rancheros / 12 two sunny side up \*eggs, avocado, roja and verde salsa, corn tortilla, black bean, cilantro, radish; jalapeno / add chorizo +1.5

Duck Confit Hash / 13 new potato, caramelized onion, fresh herbs; field mix, two \*eggs

Roasted Sweet Potato, Kale & Pesto Hash / 12 carrot, celery, new potato, caramelized onion, basil-walnut pesto; field mix, two \*eggs

Tofu Scramble / 11 🐨 🕨 red pepper, scallion, black bean, corn tortilla strips, salsa roja; field mix

Chorizo & Sweet Corn Relish cilantro, roasted red pepper, cheddar

Bacon & Spinach roasted tomato, cream cheese, parmesan

SAMMIES served after 11 red cabbage slaw / field mix +2 / small soup +3

Guajillo Braised Chicken / 12 chipotle mayo, green cabbage slaw, chihuahua, ciabatta

Roasted Turkey, Bacon & Pesto / 14 tomato, romaine, cheddar, basil-walnut pesto, ciabatta

Tuna Giardiniera Melt / 14 tomato, pecorino, provolone, seed and grain bread; open faced, topped with petite arugula and pickled red onion

Mango Chutney Chicken Salad / 11.5 house made pickle, tomato, cheddar, romaine, seed and grain bread

Hot Ham & Swiss / 13 stone ground mustard, tomato, romaine, \*aioli, sourdough

Salumi / 12 spicy capicola, salami, ham, \*aioli, provolone cheese, frisée, pickled vegetable and olive relish, ciabatta

Thai Beet & Apple / 11 🕼 smashed garbanzo bean, carrot, red onion, red curry peanut dressing, arugula, ciabatta

CRISP GREENS@served after 11 add grilled chicken +4 / \*salmon +6

Grilled Chicken & Plumped Apricot / 14 red onion, orange, candied pecan, arugula, goat cheese, champagne vinaigrette / sub salmon +2

Ruby Red Grapefruit & Candied Citrus Salad / 14 avocado, queso fresco, toasted pepita, red onion, arugula, frisée, chipotle-orange vinaigrette

Roasted Poblano & Spinach / 12 frisée, cilantro, shaved carrot, pickled red onion, toasted pepita, cotija, roasted poblano buttermilk dressing

SIDES

Marigold Potatoes / 4 Avoc Single \*Egg / 2 Fruit Bacon / 4 Field Sausaae / 4

4 Avocado / 1.5 Fruit / 5 Field Mix Greens / 4 one slice 2 / two slices 3 rosemary, sourdough, or wheat gluten free +50¢ SOUP small 5 / large 6 with choice of toast

HOUSE MADE GROER K

118 South Pinckney Street Madison, Wisconsin 53703 / 608 661 5559 / marigoldkitchen.com ONLINE

\*Eggs served sunny-side-up, over easy, soft boiled or poached may be under cooked and will only be served upon the consumer's request. Consuming raw or under-cooked meat, poultry, seafood,shellfish or eggs may increase your risk of food borne illness.

TOAST