

Date: Tues. Oct. 18, 2016
Time: 6:35 pm
Place: Westside Fire Station

LICENSE COMMITTEE

A. ROLL CALL

B. CORRECTION OF MINUTES

C. BUSINESS

1. "CLASS B" FERMENTED MALT BEVERAGE AND INTOXICATING LIQUOR
LICENSE APPLICATION FOR MONROE ARTS CENTER, INC. UNDER WIS. STATS
QUOTA EXCEPTION FOR PERFORMING ARTS CENTERS

Review and possibly recommend to Council for approval

The intoxicating liquor is being applied for as an exception to the city's quota as outlined in Wis. Stats. 125.51 (4) (v)3 for a theater for the performing arts operated by a nonprofit organization authorizing the retail sale of intoxicating liquor only for consumption on the premises where sold and only in connection with ticketed performances

Individual Requesting Item	City Clerk/DOGG
Expected Length of Discussion	5 min.

Documents:

[*Monroe Arts Center application.pdf*](#)

D. BUSINESS BY MEMBERS

E. ADJOURNMENT

This Committee may take any action it considers appropriate related to any item on this agenda.

Request from persons with disabilities who need assistance to participate in this meeting, including need for an interpreter, materials in alternate formats, or other accommodations, should be made to the Office of the City Clerk at (608) 329-2564 with as much advance notice as possible so that proper arrangements can be made.

Members: Chairperson Richard Thoman, Michael Boyce, Chris Beer, Alt. Tom Miller

708 202 see attached

ORIGINAL ALCOHOL BEVERAGE RETAIL LICENSE APPLICATION

Applicant's WI Seller's Permit No. 156-000 049 FEIN Number: 39-1209502

LICENSE REQUESTED	
TYPE	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$ 75.00
<input type="checkbox"/> Class C wine	\$
<input type="checkbox"/> Class A liquor	\$
<input type="checkbox"/> Class A liquor (cider only)	\$ N/A
<input checked="" type="checkbox"/> Class B liquor	\$ 375.00
<input type="checkbox"/> Reserve Class B liquor	\$
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$ 32.66
TOTAL FEE	\$ 482.66

Submit to municipal clerk.

For the license period beginning October 19 20 2016 ;
ending June 30 20 17

TO THE GOVERNING BODY of the: Town of } Monroe
 Village of }
 City of }

County of Green Aldermanic Dist. No. _____ (if required by ordinance)

1. The named INDIVIDUAL PARTNERSHIP LIMITED LIABILITY COMPANY
 CORPORATION/NONPROFIT ORGANIZATION

hereby makes application for the alcohol beverage license(s) checked above.

2. Name (individual/partners give last name, first, middle; corporations/limited liability companies give registered name): Monroe Arts Center, Inc.

An "Auxiliary Questionnaire," Form AT-103, must be completed and attached to this application by each individual applicant, by each member of a partnership, and by each officer, director and agent of a corporation or nonprofit organization, and by each member/manager and agent of a limited liability company. List the name, title, and place of residence of each person.

Title	Name	Home Address	Post Office & Zip Code
President/Member	<u>Kevin Callahan</u>	<u>W9440 Burkhalter Road</u>	<u>Monroe, WI 53566</u>
Vice President/Member	<u>John Bauhann</u>	<u>2602 22nd St.</u>	<u>Monroe, WI 53566</u>
Secretary/Member	<u>Chris Kauteson</u>	<u>1511 25th Ave.</u>	<u>Monroe, WI 53566</u>
Treasurer/Member	<u>Marc Farmer</u>	<u>W8917 Buckhorn Rd</u>	<u>Browns Town, WI 53522</u>
Agent	<u>Richard J. Daniels</u>	<u>4220 Beverly Rd</u>	<u>Madison, WI 53711</u> <u>COFF</u>
Directors/Managers	<u>See attached list</u>	<u>Lori Grinnell</u>	<u>2015 16th St, Monroe, WI 53566</u> <u>AKR</u>

3. Trade Name MAC Business Phone Number 608-325-5700
4. Address of Premises 1315 N 1/2 St. Post Office & Zip Code Monroe, WI 53566

5. Is individual, partners or agent of corporation/limited liability company subject to completion of the responsible beverage server training course for this license period? Yes No
6. Is the applicant an employe or agent of, or acting on behalf of anyone except the named applicant? Yes No
7. Does any other alcohol beverage retail licensee or wholesale permittee have any interest in or control of this business? Yes No
8. (a) Corporate/limited liability company applicants only: Insert state WI and date 9/24/17 of registration.
(b) Is applicant corporation/limited liability company a subsidiary of any other corporation or limited liability company? Yes No
(c) Does the corporation, or any officer, director, stockholder or agent or limited liability company, or any member/manager or agent hold any interest in any other alcohol beverage license or permit in Wisconsin? John Bauhann is President Yes No

(NOTE: All applicants explain fully on reverse side of this form every YES answer in sections 5, 6, 7 and 8 above.) John Bauhann is President of Colony Brands, holds Class B Retail Lic. entire inside of building located at 1315 N 1/2 Street Monroe WI

9. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) See Supplemental Application and Attachment

10. Legal description (omit if street address is given above): 1315 1/2 St Monroe, WI
11. (a) Was this premises licensed for the sale of liquor or beer during the past license year? Yes No
(b) If yes, under what name was license issued?
12. Does the applicant understand they must file a Special Occupational Tax return (TTB form 5630.5) before beginning business? [phone 1-800-937-8864] Yes No
13. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776]. Yes No
14. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes No

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signers. Signers agree to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants and each member of a partnership applicant must sign; corporate officer(s), members/managers of Limited Liability Companies must sign.) Any lack of access to any portion of a 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 29th day of September, 20 16
[Signature]
(Clerk/Notary Public)

Kevin G. Callahan
(Officer of Corporation/Member/Manager of Limited Liability Company/Partner/Individual)
Chris D. Kauteson
(Officer of Corporation/Member/Manager of Limited Liability Company/Partner)

My commission expires is permit
(Additional Partner(s)/Member/Manager of Limited Liability Company if Any)

TO BE COMPLETED BY CLERK			
Date received and filed with municipal clerk	Date reported to council/board	Date provisional license issued	Signature of Clerk / Deputy Clerk
<u>9-29-16</u>	<u>10-18-16</u>		
Date license granted	Date license issued	License number issued	

Carol J. Stam

MONROE ARTS CENTER
2015 – 2016 Board of Directors

Don Amphlett
1123 11th Street
Monroe, WI 53566
329-5925 (h)
amphlett@charter.net

Sue Barrett
2248 15th Street
Monroe, WI 53566
328-4420 (h)
pbarrett@tds.net

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2602 22nd Street
Monroe, WI 53566
325-4102 (h)
Baumann_John@secompany.com

Hans Bernet, Past President
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325-4914 (h)
bernet@imsdm.com

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325-3851
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Buch50@uwalumni.com

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325-3487
gary.burch@oracle.com

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david@davidbusker.com

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325-3613
Callahan@imsdm.com

Patricia Carter
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Monroe, WI 53566
325-5453 (h)
pattcarter@gmail.net

Richard Daniels, *Ex Officio*
Monroe Arts Center
P.O. Box 472
Monroe, WI 53566
325-5700 (w)
608-278-8410 (h)
rjdaniels@monroeartscenter.com

Robert Duxstad, Past President
1112 17th Avenue
Monroe, WI 53566
325-4924 (w)
duxstad@dvblaw.com

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Monroe, WI 53566
325-8028 (h)
wendyweilererb@charter.net

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Browntown, WI 53522
966-3250 (h)
Marc.farmer@mdfcpa.com

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Monroe, WI 53566
325-4879 (h)
clmtknut@tds.net

Christine Wellington, Past President
W7090 Cty Hwy Y
Monroe, WI 53566
325-6225 (h)
cwellington@blackhawk.edu

Ryan Ziltner
1619 21st Avenue
Monroe, WI 53566
608-426-1684
rziltner@yahoo.com

CERTIFICATE OF EXEMPT STATUS

(Religious, Charitable, Scientific or Educational Organization)

Wisconsin Department of Revenue
Income, Sales, Inheritance & Excise Tax Division

Sales to the below named organization are exempt from taxation under the Wisconsin Sales and Use Tax Law pursuant to Section 77.54(9a) of the Wisconsin Statutes.

EXEMPTION CERTIFICATE NUMBER
ES 14275
DATE
August 20, 1975

This certificate is valid until revoked by the Wisconsin Department of Revenue.

┌
Monroe Arts & Activities Center,
Inc.
P. O. Box 472
Monroe, WI 53566
└

IMPORTANT:

Sales to your organization are taxable unless you furnish your supplier with the certificate number shown above.

Sales by your organization may be subject to tax.



CITY OF MONROE

1110 18th Avenue, Monroe, WI 53566
Phone (608) 329-2530 FAX (608) 329-2561

Monroe Alcohol Beverages License Application Supplement

Name of Applicant/Partner/Corporation/LLC: Monroe Arts Center, Inc.

Address of licensed premise: 1315 11th Street, PO Box 742

Telephone number: (608) 325-5700 Anticipated opening date: 10/1/16

Mailing address: P.O. Box 472
Monroe, WI 53566

What type of establishment is contemplated?

Liquor store_____ Grocery store_____ Convenience store – gas
pumps_____

Restaurant_____ Bar_____ Sports Bar_____ Other (explain): X
Arts Center

Describe the type of business you plan to operate if granted a license (attach additional sheets as necessary):

The Monroe Arts Center presents both performing and visual arts programming. We would sell
alcohol, beer and wine primarily prior to and during intermissions of ticketed performances.
MAC will also hold events where fermented malt beverages would be provided.

If applying for a Class B or C license, what type of food service will you have at this location? (check all that apply)

None_____ Prepackaged Foods_____ Snacks_ X_
Appetizers_ X_
Catered Events_ X_
Full Meals_____

Hours of food service - from 10AM to 2AM
(Attach additional sheets as necessary)

What percentage of your total sales will be from the sales of alcohol beverages? 5 %
Identify the registered agent for your Corporation or LLC. This is your Corporation's agent for service of process, notice or demand required or permitted by law to be served on the Corporation:

Name: Richard Daniels Phone number: (608) 325-5700

Address: 1315 11th Street, Monroe, WI 53566

Who will be conducting the day-to-day operations of the business?

Name: Richard Daniels Phone number: (608) 325-5700

Address: 1315 11th Street, Monroe, WI 53566

Does anyone else have money invested or any other interest in this business?

Yes No

If yes, explain: _____

Have you made an agreement with anyone to repay any loan or any other payments based upon income from the business?

Yes No

If yes, list their name and address: _____

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?

Yes No

Identify the owner of the building where the establishment is located:

Name: Monroe Arts Center, Inc.

Address: 1315 11th Street, Monroe, WI 53566

Phone Number: 308-325-5700

If you lease the building, answer the following questions: N.A.

Date lease begins: _____ Expires: _____

Monthly rental: \$ _____

Do you have an option to renew the lease? Yes No

Does your lease allow for the assignment to another party without the consent of the owner?

Yes No

For what length of time have you been guaranteed occupancy? (Number of years)

In addition to paying monthly rental, will you have to pay anything additional to the owner of the building to guarantee the performance of the lease?

Yes No

If yes, explain: _____

Does the present owner or occupant object to the granting of your license?

Yes No

If yes, explain: _____

Is there at least 300 feet between the building and any church, school, library or hospital?

Yes No

Is this premises under construction?

Yes No

If yes, provide estimated completion date: _____

Is this a franchise? Yes No

Is this premises currently licensed? Yes No

If yes, list type of license: _____

Is the current licensee operating? N.A. Yes No

If no, provide the date closed: _____

Legal capacity/occupancy of premises (for Class B and C applicants): 400
(Applicant should check with Fire Inspector if legal capacity is unknown)

Seating capacity of premises (for Class B and C applicants): 290

Are there any living quarters directly or indirectly accessible and under control of the applicant? (Please note that alcohol may be sold and stored only on the licensed premise, not in living quarters.)

Yes No

Number of parking stalls on the premises: Six
(Do not include street parking. If none on the premises, write "0")

Describe parking and how the parking lot is to be monitored: Parking is located near Wesley Hall, and there is one handicapped location near new addition.

Who is responsible to keep the grounds clean?

Licensee _____ Building owner X Hired maintenance X

Employees X Other: _____

What are your plans to keep the grounds clean of litter/garbage (check all that apply):

Sweep X Pressure wash _____ Pick up litter X Hired maintenance X

Building owner's responsibility _____ Garbage cans outside Yes

Other: _____

How often?

Daily _____ Weekly X Other: _____

How will noise issues be addressed? (Check all that apply)

Security _____ Manager approaches customer(s) X Call police X

Signs posted _____ Other: _____

Do you have any future plans for other businesses, licenses or permits at this location?

Yes No

If yes, explain: _____

How many employees will you have? Part-time 3 Full-time 3

Describe your management experience, staffing levels, duties and employee training:

Executive Director has managed private foundation for seven years, an academic organization with dozens of employees for five years, private elementary school for four years and the MAC for eleven years. Associate Director, Lori Grinnell has been employed for over 15 years. Administrative assistant has been employed over 5 years.

Are you offering any type of entertainment?

Yes No

If yes, explain: MAC provides a variety of vocal and instrumental performances, as well as plays and comedy performances.

Do you plan to allow dancing?

Yes No

per Rich Daniels not at this time!

At wedding performances and dance recitals

Do you plan to sell cigarettes?

Yes No

Utilizing your market research, who would you project your target market to be? _____

Household income with an income of \$35,000 and interest in arts and culture.

Describe how you plan to advertise/promote your business. What products will you be

advertising? MAC advertises performances on the radio, newspapers, direct mail and the internet.

Please explain anything else you feel we need to know about your business, including:

Uniqueness: _____

Décor: _____

Type of food offered and price range: _____

Other: Audiences for the performing arts are accustomed to having a glass of beer or wine at performances. This is typically part of concessions for such organizations. At certain events fermented malt beverages may be provided. MAC also may rent premises for weddings where MAC may sell fermented malt beverages.

HOURS OF OPERATION FOR ALCOHOL BEVERAGE SALES/SERVICE ONLY					
Day of the week	Current Hours of Operation (Does not apply to new applicants)		Proposed Hours of Operation (If same as current hours, write "same")		Number of customers expected each day
	Open	Close	Open	Close	
Sunday	Normally closed		10am- 2am		
Monday	Normally closed		10am- 2am		
Tuesday	10am - 5 pm*		10am- 2am		
Wednesday	10am - 5 pm*		10am- 2am		
Thursday	10am - 5 pm*		10am- 2am		
Friday	10am - 5 pm*		10am- 2am		
Saturday	10am - 5 pm*		10am- 2am		

* MAC may be open later for performances and special events. Proposed hours would include extended periods of time for special events and weddings. MAC will mostly be open during current hours. Provide a detailed written description of the building, including overall dimensions, seating arrangements, capacity, bar size and all areas where alcohol beverages are to be sold or stored. **The licensed premise described below shall not be expanded or changed without the approval of the Common Council.**

There will not be a separate bar area. Temporary sales of alcohol would take place in lobby or second floor common areas. Alcohol could be consumed in all areas of building depending on the event with exception of basement. Alcohol will be stored in curator office, basement, kitchen area.

DETAILED FLOOR PLAN:

A detailed floor plan must be submitted with this application. Any application submitted without the detailed floor plan (including all required items as listed below) will be returned. Even if the premises has been previously licensed and a floor plan submitted, a new floor plan must be submitted with this application. The floor plan must be filed on 8½

X 11 inch sized paper. A separate sheet of paper must be filed for each floor where alcohol will be stored, displayed, sold, given away and/or consumed. Even if the basement is being used for alcohol storage only, a floor plan is still required for the basement. Handwritten plans are acceptable. Plans do not need to be architectural drawings and need not be to scale.

The floor plan must include all of the following items:

- Dimensions of the premises
- Total square feet of the premises (length x width = square feet)
- Label all entrances and exits
- Label all alcohol storage areas (coolers, etc)
- Provide dimensions of all alcohol storage areas (length x width)
- Label all alcohol display areas (behind the bar, shelves, etc.)
- Provide dimensions of all alcohol display areas (length x width)
- Class B & C Applicants Only: Label all seating areas, bars, and food preparation areas
(kitchen)
- Class B & C Applicants Only: Label all outdoor areas used for the sale or service of
alcohol beverages (for example, patios, beer gardens, sidewalk cafes)
- Class B & C Applicants Only: Provide dimensions of all outdoor areas used for
the sale or
service of alcohol beverages (length x width)
- Label all parking areas on the premises (do not include street parking). This is
required
even if the parking is shared, for example, in a strip mall.
- Provide dimensions of all parking areas available on the premises (length x
width). The

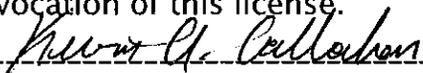
parking area(s) should be marked on the floor plan for the first floor showing the

relation to the building.

- Mark the North direction (N ↑) on each page
- Write the date on each page
- Write the legal entity name (and agent's name if a corporation or LLC) on each page
- Write the trade (business) name on each page
- Write the premises address on each page

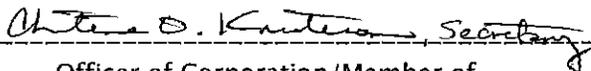
For outdoor serving areas, a Beer Garden Application must also be completed.

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 this business according to law and that the rights and responsibilities conferred by the license(s), if granted will not be assigned to another. Any lack of access to any portion of a licensed premise during inspection will be deemed a refusal to permit inspection. Such refusal is a misdemeanor and grounds for revocation of this license.



 Officer of Corporation/Member of
 Kevin Callahan, President

LLC/Partner/Individual



 Officer of Corporation/Member of
 Chris Knudson, Secretary

LLC/Partner/Individual

Subscribed and Sworn to before me

this 21st day of September, 2016



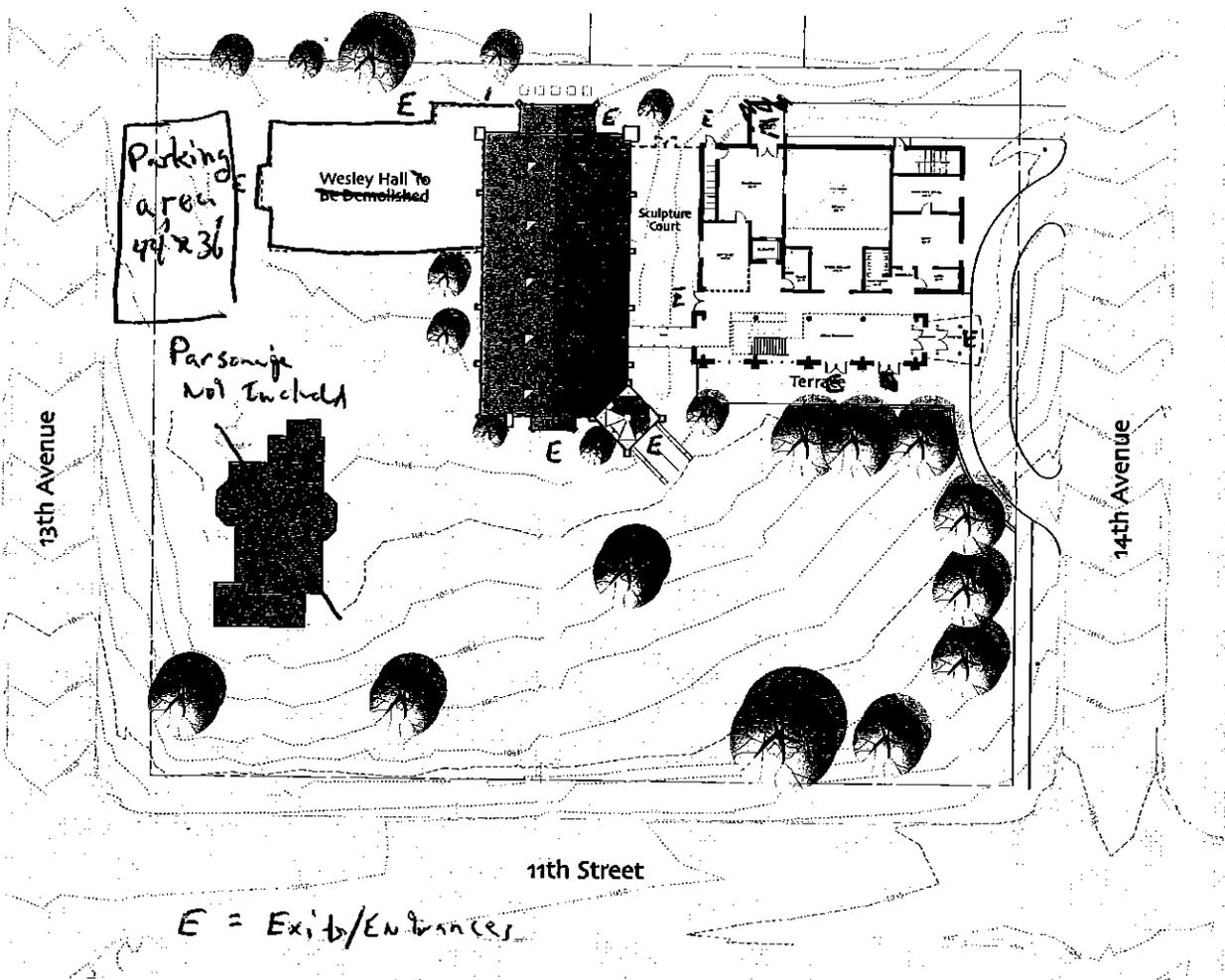
Clerk/Notary Public

My commission expires is permanent

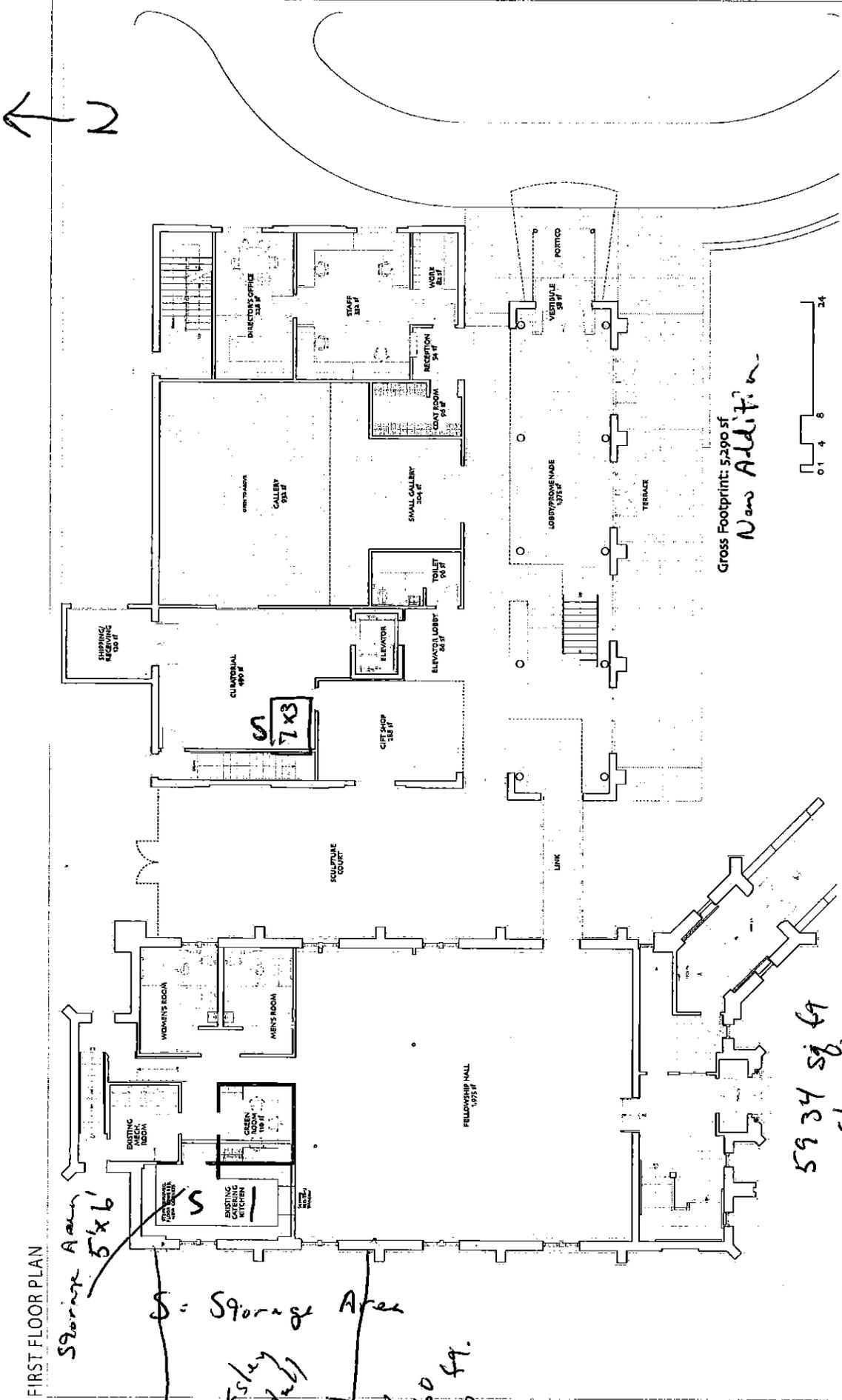
Submit this completed form and all related materials to:

City Clerk, 1110 18th Avenue, Monroe, WI 53566

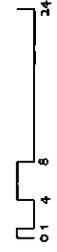
4/23/09



9/29/11
Monroe Arts Center, Inc.
1315 11th Street, Monroe, LA 70501



Gross Footprint: 5,290 sf
New Addition



FIRST FLOOR PLAN

Storage Area
5x6

S = Storage Area

Wesley Hall

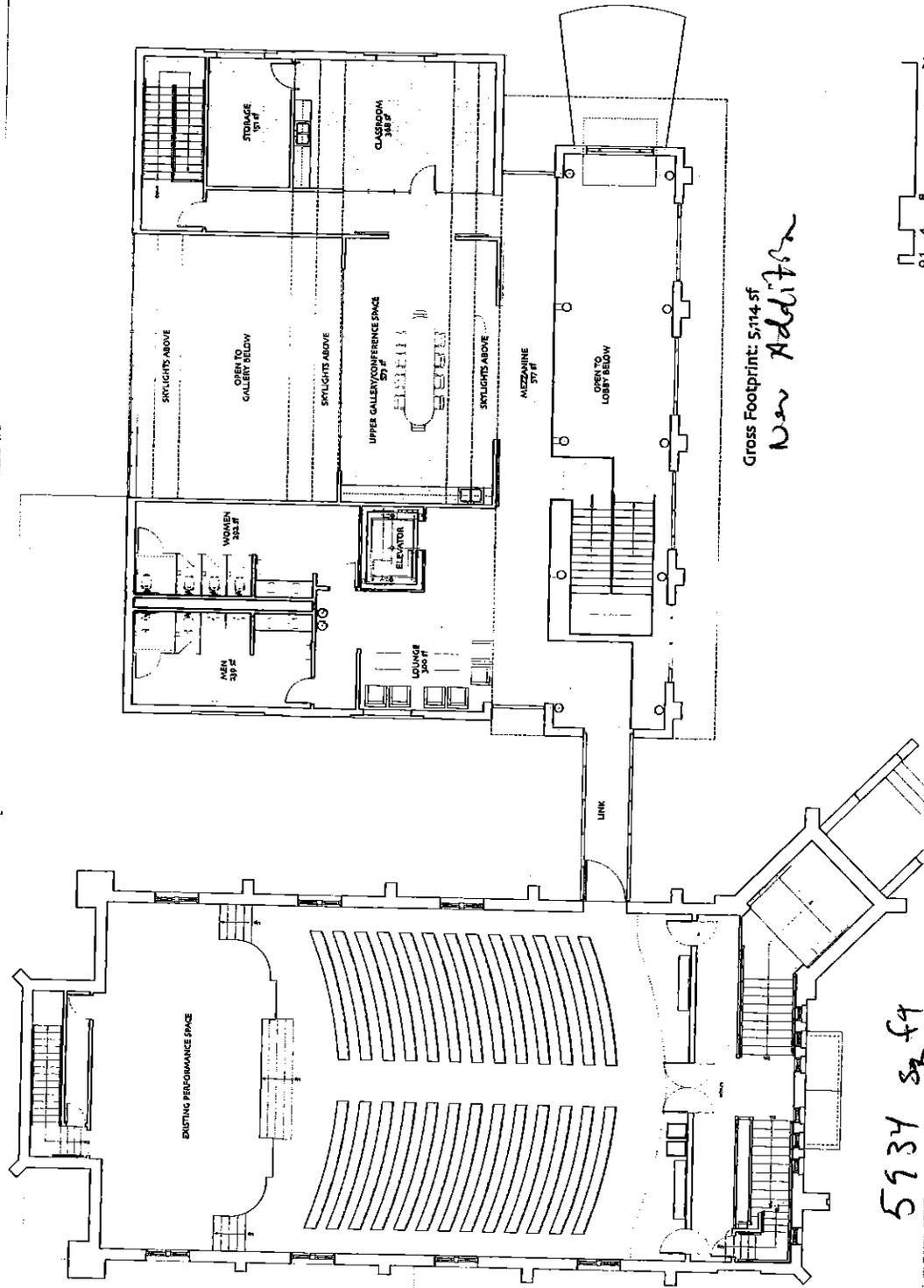
2160 sq ft

5934 sq ft

Church

9/29/16
Monroe Arts Center, Inc.
1315 11th St. Monroe, LA 70501
S = Storage Area

SECOND FLOOR PLAN



5934 sq ft

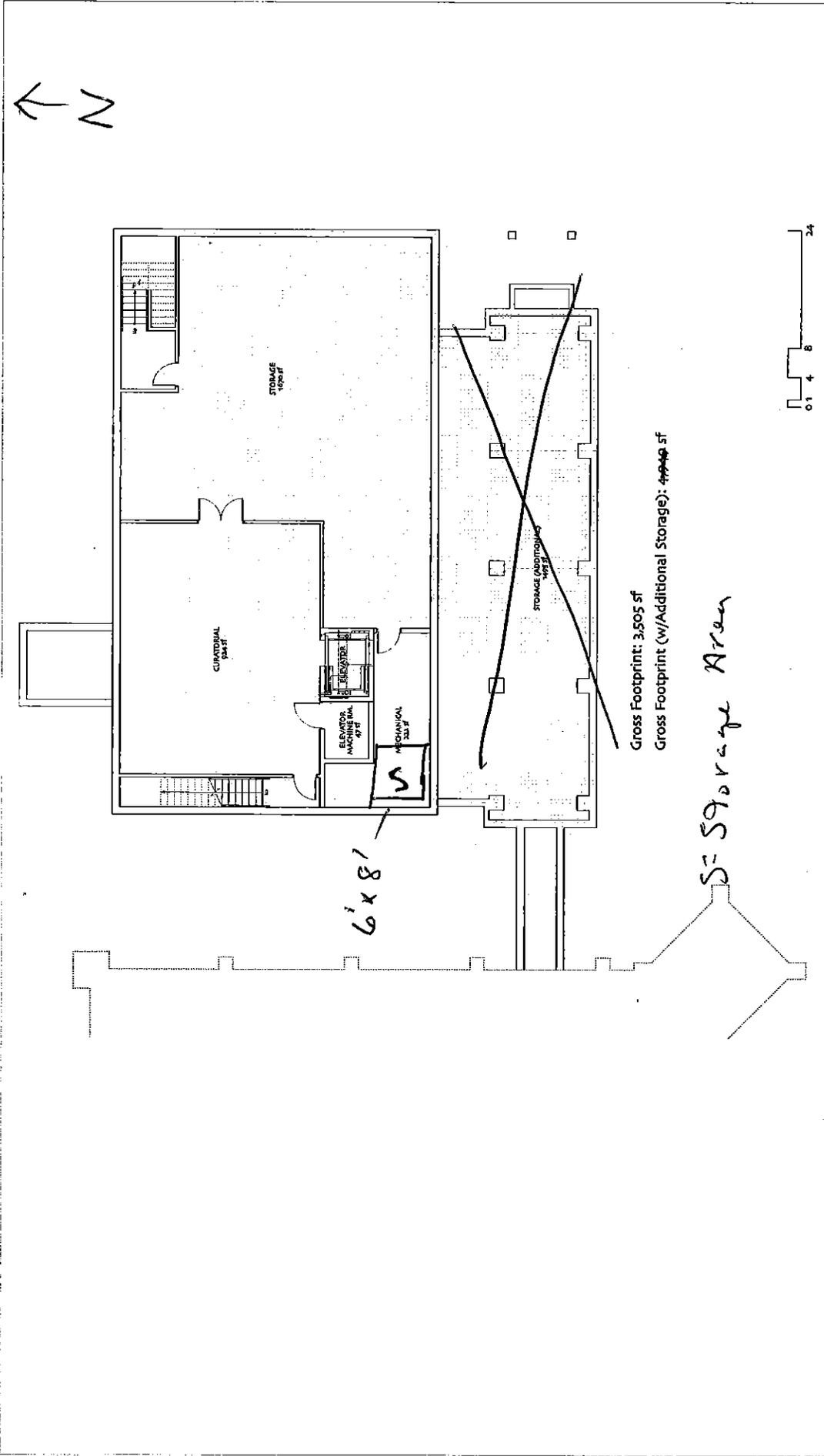
Gross Footprint: 5,714 sq ft
New Addition

THE KUBALA WASHATKO ARCHITECTS, INC. auditorium

MONROE ARTS CENTER SCHEMATIC DESIGN SUBMITTAL 6

9/29/16
Monroe Arts Center, Inc
1315 17th St. Monroe, LA 70506

BASEMENT PLAN



9/29/12
Monroe Arts Center, Inc.
1315 17th St. Monroe, WI 53566

WISCONSIN

SELLER / SERVER CERTIFICATION

Trainee Name: Lori Grinnell

Date of Completion: 09/27/2016

School Name: 360training.com, Inc.

Certification # WI-47845



I, _____
certify that the above named person
successfully completed an approved
Learn2Serve Seller/Server course.

COMPLIES WITH WISCONSIN STATUTES 125.04, 125.17, 134.66



WISCONSIN DEPARTMENT OF REVENUE
PO BOX 8902
MADISON, WI 53708-8902

Contact Information:

2135 RIMROCK RD PO BOX 8902
MADISON, WI 53708-8902
ph: 608-266-2776 fax: 608-264-6884
email: DORBusinessTax@wisconsin.gov
website: revenue.wi.gov

Letter ID L1650413792

MONROE ART CENTER INC
PO BOX 472
MONROE WI 53566-0472

Wisconsin Department of Revenue Seller's Permit

Legal/real name: MONROE ART CENTER INC
Business name: 1315 11TH ST
MONROE WI 53566-1744

- This certificate confirms you are registered with the Wisconsin Department of Revenue and authorized in the business of selling tangible personal property and taxable services.
- You may not transfer this permit.
- This permit must be displayed at the place of business and is not valid at any other location.
- If your business is not operated from a fixed location, you must carry or display this permit at all events.

Tax Type	Account Type	Account Number
Sales & Use Tax	Seller's Permit	456-0000497087-02