



CITY OF WAUWATOSA
LEGISLATION, LICENSING & COMMUNICATIONS COMMITTEE
AGENDA • NOVEMBER 13, 2012

Regular Meeting

Committee Room #2

7:30 PM

7725 West North Avenue, Wauwatosa, WI 53213

PLEASE NOTE: The items on this agenda may be revised before the time of the Common Council meeting, some items may be removed and others added prior to the completion of the final Common Council agenda. The final agenda will be available in the City Clerk's office and on the city website at www.wauwatosa.net. It is anticipated that each item listed on the agenda may be discussed, referred or acted upon unless it is noted in the specific agenda item that no action is contemplated.

LLC ITEMS

1. Operator license application by Ambrouisa Cole, 1530 W. Washington Street, for the period ending June 30, 2013
2. Application by Tosa Foods, LLC, for a liquor license transfer for Shepherd's Sports Bar, 6715 W. North Avenue, for the period ending June 30, 2013, Martin Beaudoin, agent

Any person who has a qualifying disability as defined by the Americans with Disabilities Act who requires the meeting or materials at the meeting to be in an accessible location or format, must contact the City Clerk at voice telephone 479-8917 or TTY 471-8484 (City Hall, 7725 W. North Avenue, Wauwatosa, Wisconsin 53213) for accommodations. Requests for accommodations for meetings should be made at least three (3) business days prior to the meeting. Every effort will be made to arrange accommodations for all meetings; so please give the City Clerk as much advance notice as possible.

ORIGINAL ALCOHOL BEVERAGE RETAIL LICENSE APPLICATION

Submit to municipal clerk.

For the license period beginning 12-19 2012 ;
ending 12-19 2013

TO THE GOVERNING BODY of the: Town of Village of WAUKWATOSA City of

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

Applicant's Wisconsin Seller's Permit Number:	
Federal Employer Identification Number (FEIN): <u>46-1296786</u>	
LICENSE REQUESTED	
TYPE	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$
<input type="checkbox"/> Class C wine	\$
<input type="checkbox"/> Class A liquor	\$
<input checked="" type="checkbox"/> Class B liquor	\$
<input type="checkbox"/> Reserve Class B liquor	\$
Publication fee	\$ <u>12.00</u>
TOTAL FEE	\$

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): TOSH FOODS LLC

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>MARTIN BEAUDOIN</u>	<u>3278 N. KNOLL TER</u>	<u>53222</u>
Vice President/Member	<u>CLAUDIA BEAUDOIN</u>	<u>3278 N. KNOLL TER</u>	<u>53222</u>
Secretary/Member	<u>RACHEL BEAUDOIN</u>	<u>4333 S. TAYLOR MIL</u>	<u>53207</u>
Treasurer/Member			
Agent	<u>MARTIN BEAUDOIN</u>	<u>3278 N. KNOLL TER</u>	<u>53222</u>
Directors/Managers			

3. Trade Name SHEPHERD'S SPORTS BAR Business Phone Number 414 406-3558
4. Address of Premises 6715 W. NORTH Post Office & Zip Code 53213

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 9/12 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? Yes No
(NOTE: All applicants explain fully on reverse side of this form every YES answer in sections 5, 6, 7 and 8 above.)

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, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) TAVERN/BAR

10. Legal description (omit if street address is given above):
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? SHEPHERD'S SPORTS BAR
12. Does the applicant understand they must file a Special Occupational Tax return (TTB form 5830.5) before beginning business? [phone 1-800-937-8864] Yes No
13. Does the applicant 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] Yes No
14. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? 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 1 day of November, 2012
J. Pielograsch
(Notary Public)
My commission expires 2-15-15

[Signature]
(Officer of Corporation/Member/Manager of Limited Liability Company/Partner/Individual)
[Signature]
(Officer of Corporation/Member/Manager of Limited Liability Company/Partner)
[Signature]
(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
Date license granted	Date license issued	License number issued	

Attachment: Shepherd's liquor license transfer application (1109 : Shepherd's Liquor License Transfer Application)