St. entity # 7504
feat. Cust. # ~~7276~~ 3590
V.S. Acct. # 2584

New Liquor License Packet

The first time you arrive at the Clerk's Office you will be given this packet. Included in this packet are:

- Application
- Business Plan Questionnaire
- Directions for Scheduling Inspections
- Good Neighbor Meeting Directions
- What's Next?

In order for your application to be accepted you **MUST** provide:

- Completed Application (including this packet)
- Conditional Surrender of License (if taking over a current license)
- Auxiliary Questionnaire Form (1 per each officer of the business and agent listed on the application)
- Schedule of Appointment of Agent
- Business Plan Questionnaire
- Proof of FEIN
- Proof of WI Sellers Permit

Before your license will be issued the following **MUST** be completed:

- Proof of Responsible Beverage Course
- Attend a Good Neighbor Meeting
- Attend a Public Safety and Licensing Committee Meeting
- Common Council Approval (it is not mandatory to attend this meeting)
- **All department sign offs must be complete**
    - It is your responsibility to call the people/departments listed below to setup appointments to have your premise inspected.
        - Environmental Health Department - located at City Hall in Room 1 (262) 636-9203
        - Building Department – located at City Hall in Room 304 (262)636-9464
        - Fire Department – located in the City Public Safety Building (262) 635-7915
        - Good Neighbor Meeting – Schedule by calling (262) 636-9115

Business Name: Buckets Pub 2nd Round LLC

Business Address: 2031 Lathrop Ave Racine, WI 53405

DBA Name: Buckets Pub 2nd Round

District: 14 Your Business Alder: Alicia Jarrett Alder Phone: 262-221-8283

Public Safety and Licensing Prospective* Date: TBD at 5:00PM X **(your appearance is mandatory)**

Printed Name: N/A Signature: N/A

*Your Public Safety and Licensing Date is tentative to when you complete your good neighbor meeting. If your good neighbor meeting date is later than your Public Safety and Licensing Date, you will receive a different Public Safety and Licensing Date.

BUSINESS PLAN QUESTIONNAIRE

Business Owner/ Ownership Entity Buckets Pub 2nd Round LLC

Trade Name Buckets Pub 2nd Round

Business Address 2031 Lathrop Ave Racine 53405

Website _____

Business Email Address bucketspub2ndround@gmail.com

Agent Name Marci Bruley

Agent Home Address 5834 Middle Rd. Racine 53402

Agent Emergency Contact Number 262-930-5785

Agent Email Address mbruley2012@gmail.com

Who intends to be mainly in charge of daily operations? Marci Bruley

Is your business currently open? (Yes) No

If no, please complete the following Statement of Intent:

I understand that the granting of this license would be conditional on my being able to operate within 6 months of common council approval. I intend to operate under the license within six months of common council approval. If I am not able to operate within 6 months, I may request a one-time extension of up to 3 months. If I am still not actively operating under the license within 9 months of common council approval, my license will be considered denied and I will have to re-apply for a new license. MB Initials.

What is you estimated gross monthly revenue for each of the following categories:

70,000 Alcoholic beverages

50,000 Food

_____ Other (please specify)

How many people do you intend to employ full time? 10

How many people do you intend to employ part time? 20

What is the square footage of the premise to be licensed? 5500 sq ft

What is your best estimation of the value of the business? _____

Please describe the current parking situation.

A large private parking lot with appx.

Please describe how you intend to handle crowds, during both regular business hours and at bar close.

Keeping a peaceful restaurant type atmosphere

And closing will be handled by having customers leave timely

Describe the business that you are buying/opening.
A well establish Pub/Grill that has had one owner for the last 40 years. Known for restaurant type atmosphere. Plus a sports bar with a respected image in the City of Racine.

How will your establishment affect the quality of life for the citizens of Racine?
It will be a relaxing fun business to come and eat and watch sporting events.

Does the location that you are applying for already have an alcohol license? yes

If yes, what type of alcohol license? Class B

Are you or the corporation buying the building or leasing it? (Buying) / Leasing

Will you be doing any remodeling; and if so, what are your plans?
No

What type of experience do you have that would prepare you for this type of business?
Joey and Anna LeGath have owned and operating bar and bar/restaurants in Racine for over 25+ years. Marci Bailey has been in the bar business with 30 years and has owned a bar for 4 years

What will your hours of operation be?

- Monday 6am - 2am
- Tuesday 6am - 2am
- Wednesday 6am - 2am
- Thursday 6am - 2am
- Friday 6am - 2:30am
- Saturday 6am - 2:30am
- Sunday 6am - 2am

Will you be offering food? If so, what type of menu will you have? Do you have a kitchen? (Please attach a copy of your menu if available)
We will be offering mostly hand held foods such as chicken wings, burgers, fries, appitizers,

fish frys, and potential Prime rib (Saturdays)

How many customers do you expect on your busiest days? ~

How do you intend to handle litter and garbage?

By picking our parking lot and surrounding areas daily we also will have weekly garbage removal.

How will noise at the premise be addressed?

By keeping the volume of jukebox and TVs at a respectable plan

What is your security plan?

We will have staff be vigilant at watching customers and keeping eyes open for any trouble, and calling police immediately if problems occur.

What type of video surveillance do you intend to have on the premise (please list equipment)?

Century Security - Alarm

ExacQ camera system - 46 Cameras

Will music be played at your location? (Yes) No

If yes, how will music be played? (Jukebox) Live DJ Radio Other

Bill # 7743 "Class B"

Original Alcohol Beverage Retail License Application

(Submit to municipal clerk)

For the license period beginning _____ ending _____ *(mm/dd/yyyy)*

To the Governing Body of the: ☐ Town of ☐ Village of ☒ City of } Racine

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

Check one: ☐ Individual ☐ Partnership ☒ Limited Liability Company ☐ Corporation/Nonprofit Organization

Applicant's Wisconsin Seller's Permit Number: 456-1031264865-04

FEIN Number: 92-2914765

TYPE OF LICENSE REQUESTED		FEE
☐ Class A beer	$	
☐ Class B beer	$	
☐ Class C wine	$	
☐ Class A liquor		
☐ Class A liquor (cider only)	$	N/A
☒ Class B liquor	$	
☐ Reserve Class B liquor	$	
☐ Class B (wine only) winery	$	
Publication fee	$	
TOTAL FEE	$	

Name (individual / partners give last name, first, middle; corporations / limited liability companies give registered name)

Buckets Pub 2nd Round 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 full name and place of residence of each person.

~~President~~ / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
~~Vice President~~ / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
~~Secretary~~ / Member Last Name: Bruley	(First): Marci	(Middle Name): Lee	Home Address (Street, City or Post Office, & Zip Code): 5834 Middle Rd Racine, WI 53402
~~Treasurer~~ / Member Last Name	(First)	(Middle Name)	Home Address
Agent Last Name: Bruley	(First): Marci	(Middle Name): Lee	Home Address (Street, City or Post Office, & Zip Code): 5834 Middle Rd. Racine, WI 53402
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

1. Trade Name: Buckets Pub 2nd Round — Business Phone Number: 262-633-8951
2. Address of Premises: 2031 Lathrop Ave — Post Office & Zip Code: Racine 53405
3. 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.)

   One story cement block approximately 5500 Square feet, additional storage 20' x 85' & parking lot South and East sides of building
4. Legal description (omit if street address is given above): _____
5. (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? Buckets Pub Charles & Connie Brandt

6. Is individual, partners or agent of corporation/limited liability company subject to completion of the responsible beverage server training course for this license period? **If yes, explain** . . . . . ☐ Yes ☒ No

7. Is the applicant an employe or agent of, or acting on behalf of anyone except the named applicant? **If yes, explain.** ☐ Yes ☒ No

8. Does any other alcohol beverage retail licensee or wholesale permittee have any interest in or control of this business? **If yes, explain** . . . . . ☐ Yes ☒ No

9. (a) **Corporate/limited liability company applicants only:** Insert state Wisconsin and date 5/20/23 of registration.

(b) Is applicant corporation/limited liability company a subsidiary of any other corporation or limited liability company? **If yes, explain** . . . . . ☐ 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? **If yes, explain.** ☐ Yes ☐ No

10. Does the applicant understand they must register as a Retail Beverage Alcohol Dealer with the federal government, Alcohol and Tobacco Tax and Trade Bureau (TTB) by filing (TTB form 5630.5d) before beginning business? [phone 1-877-882-3277] . . . . . ☒ Yes ☐ No

11. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776] . . . . . ☒ Yes ☐ No

12. 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 signer. Any person who knowingly provides materially false information on this application may be required to forfeit not more than $1,000. 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. (Individual applicants, or one member of a partnership applicant must sign; one corporate officer, one member/manager 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.

Contact Person's Name (Last, First, M.I.)	Title/Member	Date
Bruley, Marci L.	Agent	5/21/23
Signature: Marci Bruley	Phone Number: 262-930-5785	Email Address: mbruley2012@gmail.com

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	

AT-106 (R. 3-19)

Agent

Auxiliary Questionnaire
Alcohol Beverage License Application

Submit to municipal clerk.

Individual's Full Name (please print) (last name)	(first name)	(middle name)	
Bruley	Marci	Lee	
Home Address (street/route)	Post Office	City	State / Zip Code
5834 Middle Rd.	Racine	Racine	WI / 53402
Home Phone Number	Age		Place of Birth
262-930-5785			Racine, WI

The *above named individual* provides the following information as a person who is *(check one)*:

☐ Applying for an alcohol beverage license as an **individual**.

☐ A member of a **partnership** which is making application for an alcohol beverage license.

☒ Marci Bruley *(Officer / Director / Member / Manager / Agent)* of Buckets Pub 2nd Round LLC *(Name of Corporation, Limited Liability Company or Nonprofit Organization)*

which is making application for an alcohol beverage license.

The *above named individual* provides the following information to the licensing authority:

1. How long have you continuously resided in Wisconsin prior to this date?
2. Have you ever been convicted of any offenses (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of any other states or ordinances of any county or municipality? ☐ Yes ☒ No
   If yes, give law or ordinance violated, trial court, trial date and penalty imposed, and/or date, description and status of charges pending. *(If more room is needed, continue on reverse side of this form.)*
3. Are charges for any offenses presently pending against you (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of other states or ordinances of any county or municipality? ☐ Yes ☒ No
   If yes, describe status of charges pending.
4. Do you hold, are you making application for or are you an officer, director or agent of a corporation/nonprofit organization or member/manager/agent of a limited liability company holding or applying for any other alcohol beverage license or permit? ☐ Yes ☒ No
   If yes, identify.
   (Name, Location and Type of License/Permit)
5. Do you hold and/or are you an officer, director, stockholder, agent or employe of any person or corporation or member/manager/agent of a limited liability company holding or applying for a wholesale beer permit, brewery/winery permit or wholesale liquor, manufacturer or rectifier permit in the State of Wisconsin? ☐ Yes ☒ No
   If yes, identify.
   (Name of Wholesale Licensee or Permittee) *(Address By City and County)*
6. Named individual must list in chronological order last two employers.

Employer's Name	Employer's Address	Employed From	To
Marci Bruley	236 Main St Racine, WI 53403	4/19/19	Present
Employer's Name	Employer's Address	Employed From	To
Joey LeGath Joeys on Lathrop	2054 Lathrop Ave. Racine, WI 53405	5/2010	4/1/19

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than $1,000.

Marci Bruley
(Signature of Named Individual)

Schedule for Appointment of Agent by Corporation / Nonprofit Organization or Limited Liability Company

Submit to municipal clerk.

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent. The following questions must be answered by the agent. The appointment must be signed by an officer of the corporation/organization or one member/manager of a limited liability company and the recommendation made by the proper local official.

To the governing body of: ☐ Town ☐ Village ☒ City of Racine County of Racine

The undersigned duly authorized officer/member/manager of Buckets Pub 2nd Round LLC
(Registered Name of Corporation / Organization or Limited Liability Company)

a corporation/organization or limited liability company making application for an alcohol beverage license for a premises known as Buckets Pub 2nd Round
(Trade Name)

located at 2031 Lathrop Ave. Racine, WI 53405

appoints Marci Bruley
(Name of Appointed Agent)

5834 Middle Rd. Racine, WI 53402
(Home Address of Appointed Agent)

to act for the corporation/organization/limited liability company with full authority and control of the premises and of all business relative to alcohol beverages conducted therein. Is applicant agent presently acting in that capacity or requesting approval for any corporation/organization/limited liability company having or applying for a beer and/or liquor license for any other location in Wisconsin?

☒ Yes ☐ No If so, indicate the corporate name(s)/limited liability company(ies) and municipality(ies).
Buckets Pub 2nd Round LLC

Is applicant agent subject to completion of the responsible beverage server training course? ☐ Yes ☒ No

How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin? 48

Place of residence last year 5834 Middle Rd Racine, WI 53402

For: Buckets Pub 2nd Round
(Name of Corporation / Organization / Limited Liability Company)

By: Marci Bruley
(Signature of Officer / Member / Manager)

Any person who knowingly provides materially false information in an application for a license may be required to forfeit not more than $1,000.

ACCEPTANCE BY AGENT

I, Marci Bruley, hereby accept this appointment as agent for the
(Print/ Type Agent's Name)

corporation/organization/limited liability company and assume full responsibility for the conduct of all business relative to alcohol beverages conducted on the premises for the corporation/organization/limited liability company.

Marci Bruley 5/21/23
(Signature of Agent) *(Date)*

Agent's age _

Date of birth

(Home Address of Agent)

APPROVAL OF AGENT BY MUNICIPAL AUTHORITY
(Clerk cannot sign on behalf of Municipal Official)

I hereby certify that I have checked municipal and state criminal records. To the best of my knowledge, with the available information, the character, record and reputation are satisfactory and I have no objection to the agent appointed.

Approved on *(Date)* by _____ *(Signature of Proper Local Official)* Title _____ *(Town Chair, Village President, Police Chief)*

AMOUNT - $5.00 "CLASS B" - $10.00 Bill #7744

LICENSE Expires June 30, 20__
APPLICATION FOR NONINTOXICATING BEVERAGE LICENSE

I/WE HEREBY APPLY FOR A LICENSE TO SELL AND/OR SERVE IN THE CITY OF RACINE FROM DATE HEREOF UNTIL JUNE 30, 2019 (UNLESS SOONER REVOKED), BEVERAGES OF LESS THAN ONE-HALF (½) OF ONE (1) PER CENTUM OF ALCOHOL BY VOLUME SUBJECT TO THE LIMITATIONS IMPOSED BY SECTION 66.0433(1) OF THE WISCONSIN STATUTES, AND HEREBY AGREE TO COMPLY WITH ALL LAWS, RESOLUTIONS, ORDINANCES AND REGULATIONS AFFECTING THE SALE OF SUCH BEVERAGES.

PLEASE ANSWER THE FOLLOWING QUESTIONS FULLY AND COMPLETELY:

(Check One:) BUSINESS IS:

X **CORPORATION** ____ **PARTNERSHIP** ____ **INDIVIDUAL** ____ **OTHER**____
(Please specify)

PLEASE SUPPLY:

LEGAL NAME OF BUSINESS (/OWNER): Buckets Pub 2nd Rand LLC

TRADE NAME: Buckets Pub 2nd Rand

BUSINESS ADDRESS: 2031 Lathrop Ave Racine

BUSINESS TELEPHONE: 262-633-8951 **ZIP CODE** 53405

HOME ADDRESS: 5834 Middle Rd

CITY Racine **STATE** WI **ZIP CODE** 53402

HOME TELEPHONE: 262-930-5785

Marci Bulley

SIGNATURE OF APPLICANT **(Please print SIGNATURE)** **DATE OF BIRTH**

SIGNATURE OF PARTNER /(IF APPLIES) **(Please print SIGNATURE)** **DATE OF BIRTH**

Bill # 7745

FEE: $100.00
RECORD CHECK: $15

NEW X RENEWAL _____

APPLICATION FOR PUBLIC DANCE HALL LICENSE

LICENSE EXPIRES JUNE 30, 20__

The undersigned hereby applies for a license to conduct a Public Dance Hall at:

2031 Lathrop Ave in the City of Racine, Wisconsin, in accordance with the provisions of Chapter 22.09 of the Municipal Code of the City of Racine and has checked with the

Building Department on _____ to verify that this location is zoned properly for a Public Dance Hall.

1. Name of individual, firm, partnership or corporation: Buckets Pub 2nd Round LLC

2. Names, residences and ages of the applicant if an individual, firm or partnership or of the principal Officers if a corporation or association:

NAME	RESIDENCE	DATE OF BIRTH
Marci Briley	5834 Middle Rd Racine 53402	

3. The following person or persons are hereby designated as Manager of the said dance hall:

NAME	RESIDENCE	DATE OF BIRTH
Marci Briley	5834 Middle Rd Racine 53402	

4. The date and place of any conviction (if any) of an offense under Chapter 22.09 or under any similar law, ordinance or regulation of any person connected with this venture.

—

5. The name and address of the person owning the premises for which a license is sought:

J & A of Racine LLC

Marci Briley
Signature of Applicant or Agent

Marci Briley
Please Print or Type Name

FEE: $40.00 FOR EACH DEVICE

Expires June30, 20__

APPLICATION FOR LICENSE TO OPERATE
JUKE BOXES, MECHANICAL AMUSEMENT DEVICES, VIDEO GAMES AND POOL TABLES

I/WE, hereby apply for a license to operate Juke Box, Mechanical Amusement Device and/or Video Game as defined in Sections 22-166 through 22-181 of the Municipal Code of the City of Racine from the date hereof until JUNE 30, 2019 (unless sooner revoked), subject to limitations thereof and supplementary thereto, and agree to comply with all laws, resolutions and ordinances adopted by the Common Council of the City of Racine pertaining to the same.

I certify that I am a resident of the State of Wisconsin continuously since _____, and of the City of Racine continuously since __ _____.

IF INDIVIDUAL:

NAME OF APPLICANT _____

ADDRESS OF APPLICANT _____ **ZIP**_____

IF PARTNERSHIP:

NAME_____ **STATE OF PARTNERSHIP**_____

NAME AND COMPLETE ADDRESS OF ALL PARTNERS (use reverse side if more space is needed):

_____

_____

_____

IF CORPORATION, LLC, CLUB OR ASSOCIATION:

NAME Buckets Pub 2nd Round LLC **STATE OF INCORPORATION** WI

NAME AND COMPLETE ADDRESS OF ALL OFFICERS:

Joey & Anna LeGath

Marci Bruley 5834 Middle Rd Racine, WI 53402

Jason Winkler 5834 Middle Rd Racine, WI 53402

ALL APPLICANTS:

NAME OF PERSON IN CHARGE: Marci Bruley

TRADE NAME: Buckets Pub 2nd Round **PHONE:** 262-930-5785

ADDRESS OF BUSINESS: 2031 Lathrop Ave. Racine 53405

NATURE OF BUSINESS CONDUCTED ON PREMISES: TAVERN X **OTHER** restaurant

5 $200 Bill # 7746

GAMBLING MACHINES THAT PAY OUT MONEY ARE ILLEGAL AND MUST BE REMOVED FROM THE PREMISES. FAILURE TO DO SO CARRIES THE RISK OF PROSECUTION AND SUSPENSION/NON-RENEWAL/REVOCATION OF CITY-ISSUED LICENSES, DEPENDING ON THE TYPE OF LICENSE HELD.

MECHANICAL

No. of Devices	Description of type of device	Device location in the establishment
# 3	Type Dartboard LOCATION	front of building West end
#	Type LOCATION	
#	Type LOCATION	
#	Type LOCATION	
#	Type LOCATION	

VIDEO GAMES

# 1	Type Golden tee LOCATION	West front
#	Type LOCATION	
#	Type LOCATION	
#	Type LOCATION	
#	Type LOCATION	

POOL TABLES

#	Type LOCATION	
#	Type LOCATION	

JUKE BOX

# 1	Type Internet LOCATION	front of Building West corner
#	Type LOCATION	

Nathan Bailey

SIGNATURE OF APPLICANT

DATE OF BIRTH ___

$ 7812 $100

Application for Cigarette and Tobacco Products Retail License

Submit to municipal clerk.

MUNICIPAL USE ONLY

License Number

Period Covered

Date of Issuance

Applicant's Wisconsin 15-digit Sales Tax Account Number: 456-1031264865-04 ← This must be issued in the same Legal Name of the licensee below.

Legal Name (corporation, limited liability company, partnership or sole proprietorship): Buckets Pub 2nd Round LLC	Federal Employer Identification No. (FEIN): 92-2914765
Trade or Business Name (if different than Legal Name): 2031 Lathrop Ave. Buckets Pub 2nd Round	Telephone Number: (262) 633-8951
Business Address (License Location): 2031 Lathrop Ave.	Business Located In: ☒ City ☐ Village ☐ Town of: Racine
Municipality: Racine; State: WI; Zip Code: 53405	Business Telephone: ( )
	County: Racine
Mailing Address (if different than Business Address)	Municipality: Racine; State: WI; Zip Code: 53405

Organization (*check one*)

☐ Sole Proprietor
☐ Partnership
☐ Other (*describe*) _____
☒ Wisconsin Corporation – Enter date incorporated: 3/2023
☐ Out-of-State Corporation – Are you registered to do business in Wisconsin? ☐ Yes ☐ No

☒ Yes ☐ No 1. Does the applicant understand that they must purchase cigarettes and tobacco products only from distributors, jobbers, or subjobbers, who hold a permit with the Wisconsin Department of Revenue?

☒ Yes ☐ No 2. Does the applicant understand that they must obtain a Tobacco Products Distributor permit if purchasing untaxed tobacco products from an out-of-state company? (Tobacco Products Distributor permit is available from the Wisconsin Department of Revenue at 608-266-6701. See application form CTP-129, revenue.wi.gov/dorforms/ctp-129.pdf.)

☒ Yes ☐ No 3. Does the applicant understand that they cannot purchase/exchange cigarettes or tobacco products from another retailer, including transferring existing stock to a new owner?

☒ Yes ☐ No 4. Does the applicant understand that they must provide employees with tobacco sales training approved by the Wisconsin Department of Health Services? (https://witobaccocheck.org)

☒ Yes ☐ No 5. Does the applicant understand that they may not sell, give or otherwise provide cigarettes/tobacco products and nicotine products to minors (including electronic cigarettes containing nicotine)?

☒ Yes ☐ No 6. Does the applicant understand that they may not sell single cigarettes?

☒ Yes ☐ No 7. Does the applicant understand that cigarette and tobacco products invoices must be kept on the licensed premises for two years from the date of the invoice and be available for inspection by the Wisconsin Department of Revenue/law enforcement and that failure to comply can result in criminal penalties, including loss of cigarettes/tobacco products?

☒ Yes ☐ No 8. Does the applicant understand that only cigarettes and roll-your-own (RYO) tobacco products listed on the Wisconsin Department of Justice's website labeled "Directory of Certified Tobacco Manufacturers and Brands" at www.doj.state.wi.us/dls/tobacco-directory may be sold in Wisconsin?

Cigarettes / Tobacco will be sold ☒ over counter ☐ through vending machine ☐ both

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 applicant. Applicant agrees to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, cannot be assigned to another. 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. Any person who knowingly provides materially false information on this application may be required to forfeit not more than $1,000.

(Officer of Corporation / Member / Manager of Limited Liability Company / Partner / Individual)

Applicable Laws and Rules

This document provides statements or interpretations of the following laws and regulations in effect as of September 19, 2019: Sections 134.65, 134.66, 139.321, 139.79, 139.76, 995.10, and 995.12, Wis. Stats.

Buckets Pub 2nd Round

Kick-off

*Cheese Curds with tiger sauce

*Jumbo Pretzel – served with two dips

*Bases loaded fries- Fries topped with cheese, bacon, and sour cream, maybe for an additional charge add chili?

*Onion Straws – Served with homemade bang bang sauce

*Stadium Nachos – giant nachos like enough for a group (maybe offer half order)

*Breaded Mushrooms – good ones, portabella or hand-breaded

*

Spicy breaded pickles – served with a good sauce

*Avocado Fries – Panko crusted, lightly fried, served with chili aioli

*Fried banana pepper rings – lightly battered and served with ranch.

* chicken strips

*egg rolls – buffalo chicken, Italian beef?

Wing Section

Voted Racine's best! Need to say something to the fact as wings are still the same Buckets wings.

Sauces :

Signature

Honey Bourbon

Thai Chili

BBQ

Garlic Parmesan

Hurts Twice

Dry Rub???

Bone-in wings (fried or grilled) 10-piece or 20 piece

Boneless wings

PB&J wings Chicken wing tossed in a pecan/peanut butter sauce and served with a peach jam dipping sauce. Or I would try strawberry or grape

Buckets 2nd Round HOMEMADE PIZZAS

Prepared on our homemade THIN crust with our own pizza sauce

Have one that is our signature, with suggested toppings, and the rest is just created on their own.

2nd Round House favorite: Pepperoni, sausage, bacon, onion, giardiniera (I just picked things)

Build your own

Pepperoni	Mushroom	giardiniera
Sausage	onions	banana peppers
Bacon	black olives	green peppers
Canadian bacon	pineapple	

Soup Strike Zone

On the Green – salads

Buffalo Chicken Salad – chicken toasted in our signature sauce (grilled or plain), cheese (cheddar or Bleu cheese) carrots, or celery Ranch or bleu cheese dressing.

*This could be our signature salad, like our signature wings on top of a salad.

Bleu BLT Salad – same as Joeys West

Side salad

Hall of Fame – Burgers or Chicken?? Make available in both choices?

*Build your own

Cheese (type), bacon, onion (raw or fried), tomato, lettuce, pickles

Hall of fame Burger- Double burger, double cheese, bacon, onion rings, lettuce, tomato, and our secret sauce, not for the faint of heart.

Buffalo burger – burger topped with bleu cheese, buffalo sauce and coleslaw

Benchwarmer heat burger – (still working on the name) Burger topped with some type of spicy cheese, jalapenos, our hurts twice sauce, lettuce and tomato

Mushroom and swiss

Patty Melt – burger with your choice of cheese on rye bread with onion marmalade and topped with an onion ring.

Side choices:

Fries

Sweet potato fries

Salad

Small nachos

Onion straws

Cucumber salad

Main Events

Make these available in sandwiches or wraps

*Signature Chicken (fried or grilled) with signature buffalo sauce, cheese, lettuce and tomato, and onion

*Brat?? Keep this?? Or as a special when we do tailgate parties

*Hot Dog—do we make this fun? Adding more options?

*Steak Sandwich – onion, mushroom, (cheese if wanted.)

*French dip or Italian beef, served with au jus (we make great au jus) mozzarella cheese and giardiniera

*Home Run BLT-- loaded up!

Last Call -- 4th quarter - Dessert

Haven't thought a lot about this, but we need something. All our bars do good with desserts, we have wrapper desserts, Joey's pies.

I kind of was thinking something pretty easy.

Sugar donuts?

Specials

Monday Mexican Monday

Tacos – beef or chicken, cheese, sour cream, lettuce, tomato, onion and salsa

Nachos – loaded for a cheaper price

Chimichanga –

Burrito –

Tuesday—wing night

Wednesday – Chicken & Ribs

Thursday – Pizza and domestic bucket or pitcher specials

Friday – Fish Fry?? Work on this

Battered Cod

Baked Cod

Blacken cod?

Perch?

walleye?

Saturday – Coming Soon Prime rib dinners

Sunday – Breakfast, bloody and mimosa specials

Breakfast -- ??

*Biscuits and gravy

*Chicken Biscuit –

lightly fried chicken breast on a buttermilk biscuit with county gravy, cheese, and topped with an egg.

*Chupacabra

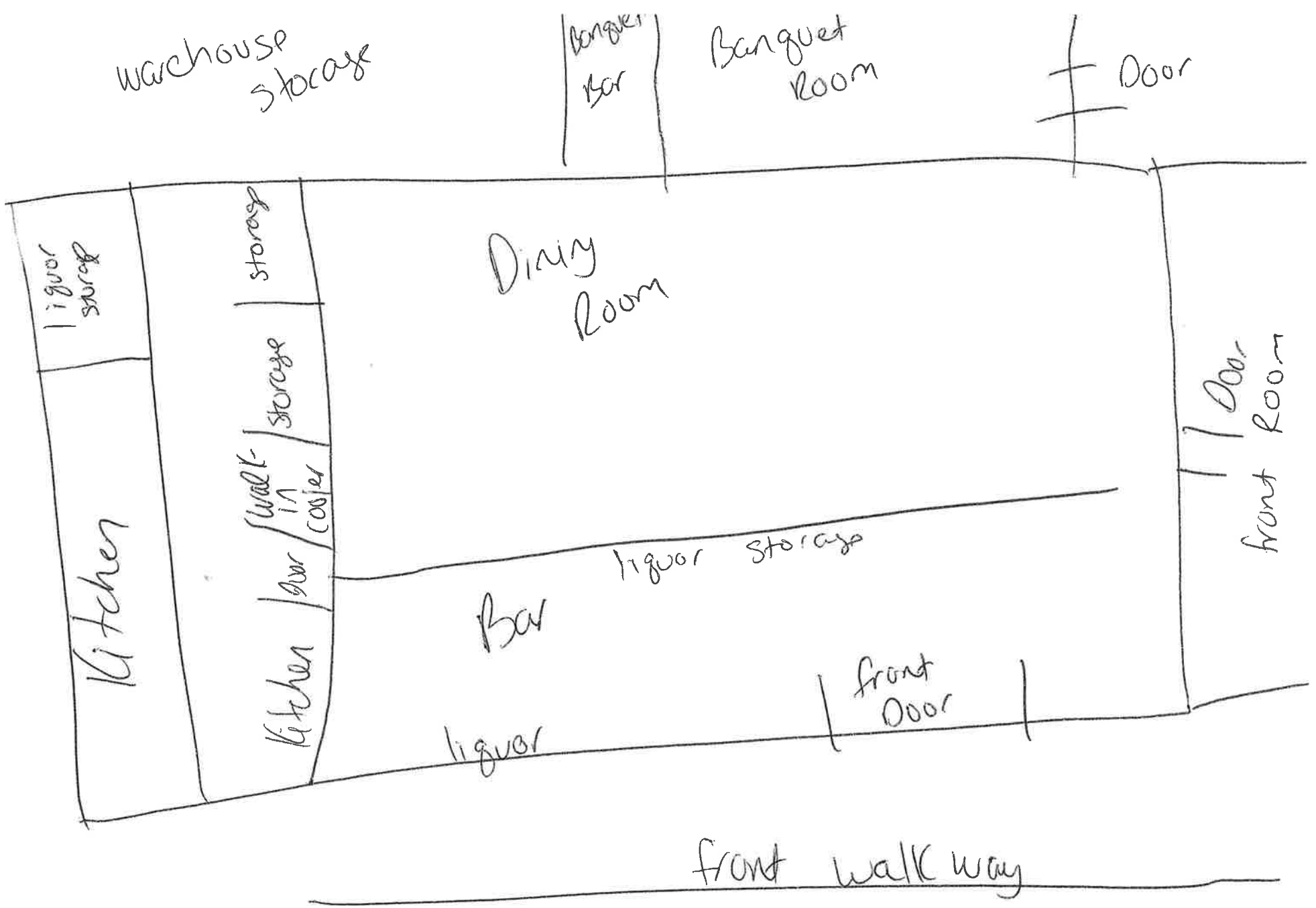
Sausage, egg, onion, cheddar cheese fresh Pico, chipotle sauce made chimichanga style.

*Breakfast Pizza

*Starting line-up

Eggs, sausage, bacon, potatoes, and toast

*pancake tacos


Warehouse storage
Banquet bar
Banquet Room
Door
liquor storage
storage
Dining Room
Door front Room
Kitchen
storage
walk-in cooler
liquor
Kitchen
Bar
liquor storage
front Door
liquor
front walk way