

# CITY OF RACINE 06-11



## Supplemental Application Form for ALL NEW Alcohol Establishments

Date 2-6-12

Name of Corporation/LLC/Individual Marys Diamond Corporation

Address of Licensed Premise 1221 Douglas Ave Racine WI 53402

**PART 1**

1. Have you contacted the alderman and neighborhood business association for the area in which you intend to locate?  YES  NO
2. Are there any special conditions desired by the neighborhood?  YES  NO
3. What type of business do you or will you conduct at this location? (check all that apply)  
(Other licenses/permits may be required to operate your business.)

<input checked="" type="checkbox"/> Full Service Restaurant	<input type="checkbox"/> Grocery Store
<input type="checkbox"/> Bed and Breakfast	<input type="checkbox"/> Convenience Market without Gas
<input type="checkbox"/> Convenience Market with Gas	<input type="checkbox"/> Billiard Center (Billiard Hall License Required)
<input type="checkbox"/> Bowling Center (Bowling alley license req.)	<input type="checkbox"/> Catering (Sales only allowed on the premises issued an alcohol beverage license)
<input type="checkbox"/> Comedy Club	<input type="checkbox"/> Indoor Golf Facility
<input type="checkbox"/> Hotel	<input type="checkbox"/> Gift Shop Museum Center for the Visual and Performing Arts
<input type="checkbox"/> Video Game Center 6 or more games (Amusement Center license req.)	<input type="checkbox"/> Veterans Club
<input type="checkbox"/> Night Club (Dance Hall License Required)	<input type="checkbox"/> Tavern
<input type="checkbox"/> Brew Pub	<input type="checkbox"/> Volleyball Court (Permanent expansion of premises required)
<input type="checkbox"/> Fraternal Club	<input type="checkbox"/> Wine Tasting Room
<input type="checkbox"/> Theater Performances	<input type="checkbox"/> Liquor Store
<input type="checkbox"/> Private Sports Club	<input type="checkbox"/> OTHER (Please List)
<input type="checkbox"/> Department Store/Drug Store	<input type="checkbox"/>
<input type="checkbox"/> Cafe/Coffee Shop	<input type="checkbox"/>

4. Hours of Operation Monday / ~~Wed~~ / Thursday 8am to 10pm Friday and Sunday 7am to 11pm  
 Indicate the intended hours of operation by day. If your establishment will be open past midnight, the indicated losing time will be understood to be the day following the indicated time your establishment will be open for business. Example: Friday-Sunday 4 pm-1am)

5. How many customers do you anticipate on your busiest days:  
25-50  50-100  100-200  200-400  More than 400

6. Ratio of Food to Alcohol (Exclusive of any cover charge)  
 75% or more food  Snacks Only  Other  50/50  No Food

7. Drink Specials  
 Will Drink Specials be offered?  Y  N

What Kind Margaritas

# CITY OF RACINE 06-11

## Supplemental Application Form for ALL NEW Alcohol Establishments

8. What type of license(s) do you hold at this premise? (check all that apply)

<input type="checkbox"/> Cigarette	<input checked="" type="checkbox"/> Food (Apply at the Health Dept)
<input type="checkbox"/> Gas Station (Apply at Clerk's Office)	<input type="checkbox"/>
<input type="checkbox"/> Other (LIST)	<input type="checkbox"/>

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

<input type="checkbox"/> None	<input type="checkbox"/> Prepackaged Foods
<input type="checkbox"/> Snacks/Appetizers	<input type="checkbox"/> Catered Events
<input checked="" type="checkbox"/> Full Meals -Hours of Food Service. From <u>7 am</u> To <u>11 pm</u> (attach additional sheets)	

10. Is this premise under construction?  Yes  No If yes, estimated completion date?

11. Is this a franchise?  Yes  No

12. Is this premise currently licensed?  Yes  No If yes list type of license \_\_\_\_\_

13. Is the current licensee operating?  Yes  No If no, list date closed 1 year ago or more

**LITTER/GARBAGE:** What are your plans to keep the grounds clean? (check all that apply)

<input checked="" type="checkbox"/> Sweep	<input checked="" type="checkbox"/> Pressure Wash
<input checked="" type="checkbox"/> Pick up litter	<input checked="" type="checkbox"/> Hired Maintenance
<input type="checkbox"/> Building owner responsibility	<input checked="" type="checkbox"/> Garbage Cans Outside
<input checked="" type="checkbox"/> Other (List)	<input type="checkbox"/>

**Who is responsible to keep the grounds clean?** (Licensee/Building Owner/Hired Maintenance/Other)

Licensee person

**How Often?** (Daily, Weekly, Other) Daily

**NOISE:** How are noise issues addressed? (check all that apply)

<input type="checkbox"/> Security	<input type="checkbox"/> Manager approaches customer(s)
<input checked="" type="checkbox"/> Call Police	<input checked="" type="checkbox"/> Signs Posted
<input checked="" type="checkbox"/> Other (List)	<input type="checkbox"/>

**SECURITY:** What is your security plan? (check all that apply)

<input type="checkbox"/> None	<input type="checkbox"/> Bouncers
<input type="checkbox"/> Hired Security Officers	<input type="checkbox"/> Off Duty Police Officers
<input type="checkbox"/> Other (List)	<input checked="" type="checkbox"/> Digital Video Camera System

## Supplemental Application Form for ALL NEW Alcohol Establishments

### PART 2: DETAILED BUSINESS SITE PLAN

**A: ATTACH BUSINESS PLAN** which outlines the type of business you plan to operate if granted a license. This should be typed and include the following:

- Hours of operation
- Alcohol sales based on a percentage of total sales
- Sample Menu (if applicable)
- Security
- Parking
- Staffing
- Plan to deal with non-smoking laws
- Any special events/plans
- Good neighbor practices (i.e. litter control)
- Detailed Budget including estimated costs/profits

**B: ATTACH DETAILED FLOOR PLAN**-You will need to submit a detailed floor plan.

#### **READ ALL INSTRUCTIONS BEFORE PREPARING THE FLOOR PLAN.**

- Any application submitted without the detailed floor plan (including all required items as listed below) will not be accepted.
- Even if the premise had previously been licensed and a floor plan submitted, a new floor plan must be submitted with this application.
- The floor plan must be filed on 8 1/2" by 11" size 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.
- Hand drawn floor plans in ink are acceptable. Plans do not need to be architectural drawings or need to be to scale.

#### THE FLOOR PLAN MUST INCLUDE ALL OF THE FOLLOWING ITEMS:

1. Dimensions of the Premises.
2. Total Square Feet of the Premise (length x width=square feet).
3. Label all entrances and exits.
4. Label all alcohol storage areas (coolers, etc).
5. Provide dimensions of all alcohol storage areas (length x width)
6. Label all alcohol display areas (behind the bar, shelves, etc.)
7. Provide dimensions of all alcohol display areas (length x width)
8. Class B & C Applicants Only: Label all seating areas, bars, and food preparation areas (kitchen)

Supplemental Application Form for ALL NEW Alcohol Establishments

- 9. Class B & C Applicants Only: Label all outdoor areas used for the sale of service of alcohol beverages (for example, patios, beer gardens, sidewalk cafes)
10. Class B & C Applicants Only: Provide dimensions of all outdoor areas used for the sale or service of alcohol beverages (length x width)
11. Label all parking areas on the premises (do not include street parking) (This is required if the parking is shared, for example, a strip mall.)
12. Provide dimensions of all parking areas available on the premises (length x width). The parking areas(s) should be marked on the floor plan for the first floor showing the relation to the building.
13. Mark the North Point (N) on each page.
14. Write the date on each page.
15. Write the Legal Entity Name (and Agent's Name if a corporation or LLC) on each page
16. Write the Trade (Business) Name on each page.
17. Write the Premise address on each page.

IF YOU LEASE THE BUILDING, ANSWER THE FOLLOWING QUESTIONS:

Have you signed the lease? [X] Yes [ ] No

Date lease begins: 11-29-2011 Expires 11-29-2011

Monthly Rental: \$ 1,500

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

Does your lease allow for the assignment to another party without consent of the owner? [ ] Yes [X] No

For what length of time have you been guaranteed occupancy? (number of years) 6 years

In addition to paying monthly rental, will you have to pay anything additional to the owner of the building to guarantee performance of the lease? [ ] Yes [X] No Explain if Yes

Does the present owner or occupant object to the granting of your license? [ ] Yes [X] No Explain if Yes

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The City of Racine requires that you describe the type and general nature of entertainment that you will have under the following licenses:

- Amusement - COMPLETE SECTIONS A & B
Allows entertainment or exhibitions consisting of music, dancing, singing and floorshows performances. Includes Dance, Instrumental Music and Record Spin.
• Dance License - COMPLETE SECTION A ONLY
Allows dancing on the premises by patrons only. Dancing by performers is not allowed. This license also allows the playing of pre-recorded music machines (Record Spin) and instrumental Music by musicians. Singing is permitted if done by the persons actually engaged in the playing of the musical instruments.

# CITY OF RACINE 06-11

## Supplemental Application Form for ALL NEW Alcohol Establishments

- **Instrumental Music** - COMPLETE SECTION A ONLY  
Permits the playing of instrumental music only, with singing on the part of and only by persons actually engaged in the playing of such musical instruments. No dancing allowed.
- **Record Spin** - COMPLETE SECTION A ONLY  
Permits DJ's, karaoke and CD players. No dancing allowed.

**SECTION A: CHECK ALL THE TYPES OF MUSIC THAT APPLY:** ("Variety" is not an acceptable answer.)

<input type="checkbox"/> Blues	<input type="checkbox"/> Latin Pop	<input type="checkbox"/> Hard Rock
<input type="checkbox"/> Reggae	<input type="checkbox"/> Classic Rock	<input type="checkbox"/> Country
<input type="checkbox"/> Easy Listening	<input type="checkbox"/> Contemporary R&B	<input type="checkbox"/> Dance - Pop
<input type="checkbox"/> Irish	<input type="checkbox"/> Tropical	<input type="checkbox"/> Other(list)
<input type="checkbox"/> Mexican Top 40	<input type="checkbox"/> New Age	<input type="checkbox"/>
<input type="checkbox"/> Modern Rock	<input type="checkbox"/> Rap	<input type="checkbox"/>
<input type="checkbox"/> Heavy Metal	<input type="checkbox"/> Jazz	<input type="checkbox"/>
<input type="checkbox"/> Hip- Hop	<input type="checkbox"/> Classic R&B	<input type="checkbox"/>
<input type="checkbox"/> Dance - R&B	<input type="checkbox"/> Techno	<input type="checkbox"/>
<input type="checkbox"/> Polka	<input type="checkbox"/> Folk	<input type="checkbox"/>

N/A

**SECTION B: OTHER (check all that apply) \_\_\_\_\_ NOT APPLICABLE**

<input type="checkbox"/> Battle of the Bands	<input type="checkbox"/> Comedy Acts
<input type="checkbox"/> Disc Jockey	<input type="checkbox"/> Live Musicians
<input type="checkbox"/> Magic Shows	<input type="checkbox"/> Poetry Readings
<input type="checkbox"/> Rapping/Rap Contests	<input type="checkbox"/> Solo Singers/Groups
<input type="checkbox"/> Dancing by Performers-Describe	<input type="checkbox"/> Wrestling-Describe
<input type="checkbox"/> Fashion Shows-Describe	<input type="checkbox"/> Patron Contests-Describe
<input type="checkbox"/> Exotic Dancer/Stripper/Adult Entertainment-Describe	<input type="checkbox"/> Other - Describe

Attach additional pages if necessary

If the type of entertainment is not listed above, please describe the type of entertainment you will have:

# CITY OF RACINE 06-11

## Supplemental Application Form for ALL NEW Alcohol Establishments

IF AFTER THE LICENSE HAS BEEN GRANTED OR ISSUED, YOU WISH TO DEVIATE FROM THE TYPE(S) OF ENTERTAINMENT LISTED. YOU MUST SUBMIT A "REQUEST TO CHANGE THE PLAN OF OPERATION". NO CHANGES IN ENTERTAINMENT SHALL TAKE PLACE UNTIL THE REQUEST HAS BEEN APPROVED BY THE PUBLIC SAFETY LICENSING AND/OR CITY OF RACINE COMMON COUNCIL. M.P. (INITIAL)

I (we), the undersigned have a knowledge of the City Ordinances and State Laws currently regulating these licenses and being duly sworn under oath, depose and say that I am (we are) the person(s) and that all statements made in the foregoing application are true and correct.

SUBSCRIBED AND SWORN TO BEFORE ME ON 2/24, 20112

Signature Manny Perez

Printed Name Manny Perez Address 736 Heron Dr. Waterford WI 53185

BUSINESS PLAN  
FOR  
CINCO DE MAYO  
MEXICAN RESTAURANT  
1221 DOUGLAS AVE RACINE WI 53402

- Company Information:

Cinco de Mayo is a neighborhood restaurant wich serves non-alcoholic beverages, Mexican and American Food.  
Cinco de Mayo is located on the North side of Racine at 1221 Douglas ave  
Racine Wi 53402.

Marilu Perez Lives at 736 Heron Dr Waterford Wi 53185.

- Licenses, Knowledge and Education of Owner Relating of the Restaurant.

Marilu Perez Successfully completed the Responsible Beverage  
Seller/Server course on January 30, 2012.  
The code is: NM7LTPLENX

- Operation and Marketing plan for "Cinco de Mayo"

Cinco de Mayo will sell liquor, wine, beer, soda and other non-alcoholic  
beverages, as well as Mexican and American Food to its customers.

Hours of Operation:

Cinco de Mayo will be Open for business  
Monday-Thursday 8:00am-10:00pm.  
Friday-Saturday 7:00am-11:00pm.  
Sunday 7:00am-9:00pm.

- Advertising

Cinco de Mayo is a neighborhood restaurant and most customers will frequent the Restaurant through word of mouth from friends and family members. The clientele is expected to be American, African American and Hispanic.

Marilyn Perez will advertise the grand Opening in the Journal Times and Spanish Language newspaper.

- Entertainment

TV and Cable: there is 1 TV monitor that will be available so that customers can watch different entertainment like Soccer, Basketball, Football, that the customers may wish to see while at the Cinco de Mayo.

- Customer Parking for the Cinco de Mayo: there is ample public parking on the street.

-Business Competition:

= El jacalito Mexican Restaurant  
1318 Douglas Ave Racine Wi 53402.  
- Aguascalientes Mexican Restaurant  
1661 Douglas Ave Racine Wi 53404.

- Equipment and Supplies for the Operation of the Cinco de Mayo Mexican Restaurant.

- \* TV Monitor.  
One 32 inch
- \* One cash Register
- \* One Blender for mixed drinks
- \* Eight tables with four chairs
- \* Five coolers 3ft by 30" Upright wall coolers
- \* Two freezers 3ft by 30" upright wall freezer
  - \* One grilled
  - \* One chargrilled
- \* One convection oven
  - \* One stove
- \* One dishwasher
- \* One microwave

\* Maintenance Equipment and Supplies:

I, the business owner, have a shovel for snow removal, brooms, vacuum, mops, buckets and other related equipment and supplies to meet the maintenance and janitorial needs inside the premises and to maintain the outside of the premises during the entire year.

- Beer and Liquor Supplies

Upon approval, Marilu Perez will purchase beer and liquor supplies from approved and licensed suppliers within the city. I, Marilu Perez will purchase normal supplies used in the operation of the Restaurant including liquor, malt beverages, soda and Mexican and American food, water and other normal supplies used in operating the Restaurant.

- Pre Paid Insurance by Marilu Perez for Cinco de Mayo Mexican Restaurant.

Marilu Perez has contacted Tim Steffens at Wilson Mutual insurance to obtain liability insurance for the Cinco de Mayo Mexican Restaurant.

Marilu Perez was told that the insurance would cost about \$279.00 annually. Marilu Perez, if requested, will provide written evidence to the City Clerk for the City of Racine, Wisconsin, That the liability is in effect now.

- Sign

There is a sign 4ft by 6ft with the words of the Cinco de Mayo Mexican Restaurant printed on it.

- Floor Plan

The floor plan for the Cinco de Mayo Mexican Restaurant is attached. The floor plan shows that there will be only one entrance that customers will be able to use to enter the premises. The exits are emergency exits only.

There is a locked (alcohol) storage room for liquor and other supplies shown in the plan.

Although there is access to the basement is not used in connection with the operation of the Cinco de Mayo Mexican Restaurant.

- Business Bank Account

The business bank account for the Cinco de Mayo is at Community State Bank. Marilu Perez Deposit \$1,000.00 into the business bank account.

- Building

The building at 1221 Douglas Ave Racine Wi 53402 is owned by Fernando Barajas. The building is rented by Marilu Perez for the sum of \$1,500.00 per month.

= Federal I.D. Number

Marilu Perez Has issued a Federal Identification Number 39-796-7147.

= Wisconsin Business Tax Registration Number.

Marilu Perez applied for and was issued a business Tax Account number by the Wisconsin Department of Revenue. Confirmation of the issuance of said tax number to Marilu Perez. Cinco de Mayo is attached hereto.

- Building Inspection

The premises Located at 1221 Douglas Ave Racine Wi 53402 has been inspected by the City of Racine building department and has passed the inspection.

- City Health Inspection

The premises have also been inspected by the department of health for the city of Racine for approval of the sale food.

Marilu Perez will be on the premises during business hours.

Concluding Statement By Owner

Cinco de Mayo is a sole proprietorship owned by Marilu Perez. It is a small neighborhood restaurant.

Marilu Perez owns her home at 736 Heron Dr Waterford Wi 53185.

Marilu Perez owns one rental property wick is located in Racine Wisconsin.

Marilu Perez Owns substantial property and has no criminal record. Marilu

Perez is a proper person to be granted a license to operate the

Cinco de Mayo Mexican Restaurant by the City of Racine Wisconsin.

Dated this 23rd day of February, 2012.

Respectfully Submitted.



736 Heron Dr

waterford Wi 53185.

(262)514-3828



Begining Balance Sheet  
For  
Cinco de Mayo  
Mexican Restaurant

Bank account:075907002 166510  
Community State Bank

Total Checking.....	\$1,000.00
Equipment.....	\$0
Total Equipment.....	\$0
Total Assets.....	\$1,000.00
Liabilities & Equity.....	\$1,000.00
Liabilities.....	\$0
Current Liabilities.....	\$0
Other Current liabilities.....	\$0
Total Other Current Liabilities.....	\$0
Total Current Liabilities.....	\$0
Term Liabilities.....	\$0
Total Long Term Liabilities.....	\$0
Total Liabilities.....	\$0
Equity.....	\$1,000.00
Opening Balance Equity.....	\$0
Total liabilities and Equity...	\$1,000.00