

## 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 Public Safety and Licensing Committee Meeting
- Attend a Good Neighbor 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

Business Name: CEC Entertainment, LLC

Business Address: 5612 Durand Ave., Racine, WI 53406

DBA Name: Chuck E. Cheese's

District: 14 Your Business Alder: Jason Meekma Alder Phone: (262) 488-4694

Public Safety and Licensing Date: \_\_\_\_\_ at 5:30PM in Room 307 (your appearance is mandatory)

Good Neighbor Meeting: \_\_\_\_\_ at \_\_\_\_\_ in Room 303 (you appearance is mandatory)

Printed Name: Maribel Alamillo Signature: Maribel Alamillo

## BUSINESS PLAN QUESTIONNAIRE

Business Owner/ Ownership Entity CEC Entertainment, LLC

Trade Name Chuck E. Cheese's

Business Address 5612 Durand Ave., Racine, WI 53406

Website www.chuckecheese.com

Business Email Address malamillo@cecentertainment.com

Agent Name Paula Zastrow

Agent Home Address 4016 Victory Ave., Racine, WI 53405

Agent Emergency Contact Number \_\_\_\_\_

Agent Email Address s726@chuckecheese.com

Who intends to be mainly in charge of daily operations? Paula Zastrow

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. \_\_\_\_\_ Initials.

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

\$3,000 Alcoholic beverages

\$325,000 Food

\$365,000 (amusement/merch) Other (please specify)

How many people do you intend to employ full time? 5

How many people do you intend to employ part time? 6

What is the square footage of the premise to be licensed? approx. 10,600 sq ft

What is your best estimation of the value of the business? \$1,000,000

Please describe the current parking situation.

Parking is in the front of the restaurant in a well lit lot.

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

We do not have a bar and monitor capacity by way of our kid check guest check-in process.

Describe the business that you are buying/opening.

Pizza restaurant / family entertainment center

How will your establishment affect the quality of life for the citizens of Racine?

Chuck E. Cheese is a family entertainment center which has been around for many years. We offer a safe place for families with children ages 2-12 to have birthday parties, play and make memories.

Does the location that you are applying for already have an alcohol license? yes - CEC Entertainment, Inc.

If yes, what type of alcohol license? Class B Beer

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 immediate plans for remodeling

What type of experience do you have that would prepare you for this type of business?

We have been operating Chuck E. Cheese's since 1985.

What will your hours of operation be?

- Monday 11am-9pm
- Tuesday 11am-9pm
- Wednesday 11am-9pm
- Thursday 11am-9pm
- Friday 11am-10pm
- Saturday 10am-10pm
- Sunday 11am-8pm

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)

Yes - please see attached menu ✓

How many customers do you expect on your busiest days? approx. 250

How do you intend to handle litter and garbage?

Trash is disposed of in commercial dumpsters during daylight hours. Location has a daily, weekly and monthly maintenance plan which includes cleaning the parking lot and exterior premise.

How will noise at the premise be addressed?

No exterior speakers or exterior noise making devices will be used. Business will be open during normal business hours.

What is your security plan?

-Chuck E. Cheese's uses the kid check process to monitor and track the number of guests

-Third party security company, ADT, to monitor the fire alarm and burglar alarm

-Posted capacity requirements

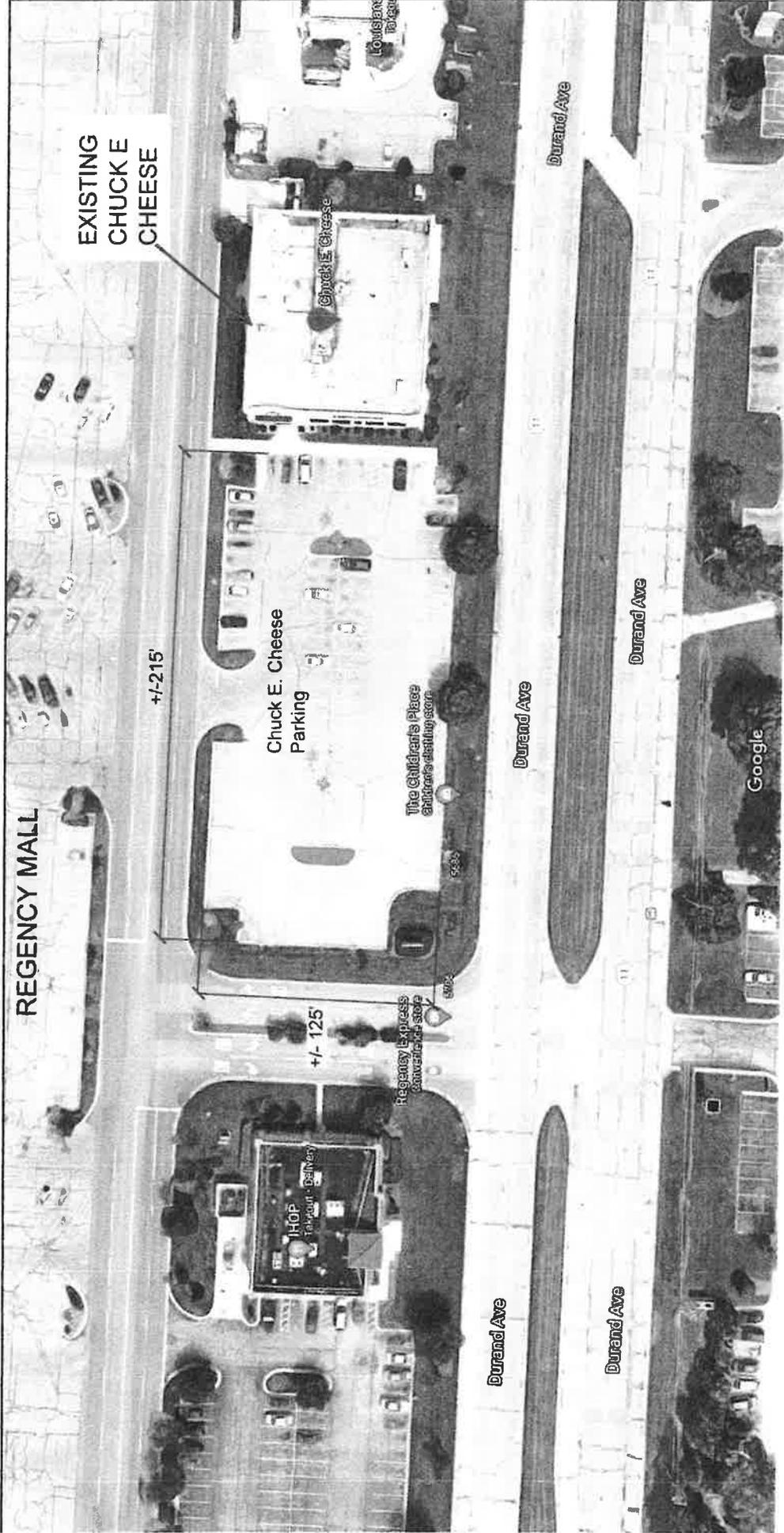
What type of video surveillance do you intend to have on the premise (please list equipment)?

Digital Watchdog with 16 cameras on the first DVR and 14 additional cameras on the second DVR

please see attached for camera locations. ✓

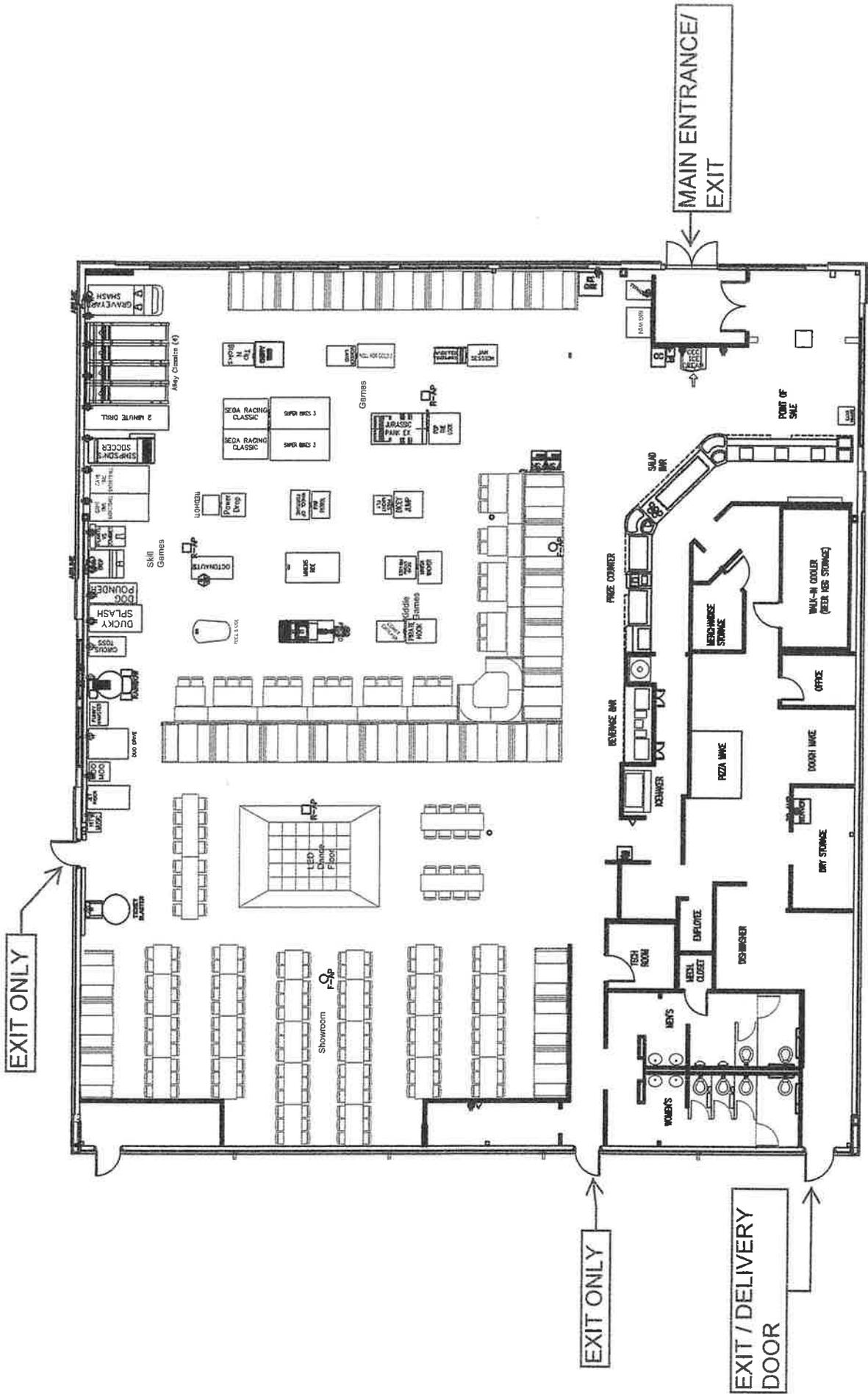
Will music be played at your location? Yes  No

If yes, how will music be played? Jukebox Live DJ Radio Other Prerecorded videos which will be played on a television screen



Imagery ©2021 Google, Imagery ©2021 Maxar Technologies, U.S. Geological Survey, Map data ©2021 50 ft

**CHUCK E CHEESE #726 Racine WI.**  
5612 Durand Ave, Racine, WI. 53406



POST-SQUARE FOOTAGE

MODE AREA	686	SQ. FT.	32%
SKILLS AREA	1,441	SQ. FT.	68%
TOTAL GAMES AREA	2,127	SQ. FT.	22%
TOTAL AREA	9,734	SQ. FT.	

EXISTING FLOOR PLAN

# Auxiliary Questionnaire Alcohol Beverage License Application

Submit to municipal clerk.

Individual's Full Name (please print) (last name)		(first name)		(middle name)	
Zastrow		Paula		Kay	
Home Address (street/route)		Post Office		City	
4016 Victory Ave				Racine	
				State	
				WI	
				Zip Code	
				53405	
Home Phone Number		Age		Date of Birth	
262-707-0804		[REDACTED]		[REDACTED]	
				Place of Birth	
				Milwaukee, 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.
- Agent** of **CEC Entertainment, LLC**

(Officer / Director / Member / Manager / Agent)

(Name of Corporation, Limited Liability Company or Nonprofit Organization)

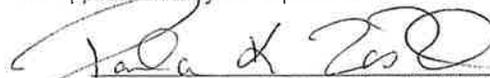
which is making application for an alcohol beverage license.

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

- How long have you continuously resided in Wisconsin prior to this date? 36 Years
- 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.)
- 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.
- 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. Please see attached list of Wisconsin locations  
(Name, Location and Type of License/Permit)
- 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)
- Named individual must list in chronological order last two employers.

Employer's Name	Employer's Address	Employed From	To
CEC Entertainment, LLC	1707 Market Place Blvd., Suite 200, Irving, TX 75063	10/5/1993	Present
Employer's Name	Employer's Address	Employed From	To

**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.

  
(Signature of Named Individual)

# Auxiliary Questionnaire Alcohol Beverage License Application

Submit to municipal clerk.

Individual's Full Name (please print) (last name)		(first name)		(middle name)	
McKillips		David		Scott	
Home Address (street/route)		Post Office	City	State	Zip Code
1201 Earlston Court			Southlake	TX	76092
Home Phone Number			Age	Date of Birth	Place of Birth
(972) 258-8507			██	██/██/██	Amsterdam, NY

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.
- CEO, President & Director** of **CEC Entertainment, LLC**  
(Officer / Director / Member / Manager / Agent) (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:

- How long have you continuously resided in Wisconsin prior to this date? Never
- 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.)  
March 2019 - Class B Misdemeanor Driving while intoxicated
- 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.
- 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. Please see attached list of Wisconsin locations  
(Name, Location and Type of License/Permit)
- 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)
- Named individual must list in chronological order last two employers.

Employer's Name <b>CEC Entertainment, LLC</b>	Employer's Address 1707 Market Place Blvd., Suite 200, Irving, TX 75063	Employed From <b>01/2020</b>	To <b>Present</b>
Employer's Name <b>Six Flags Theme Park</b>	Employer's Address 924 Ave., East Grand Prairie, TX 75050	Employed From	To <b>01/2020</b>

**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.

  
(Signature of Named Individual)

# Auxiliary Questionnaire Alcohol Beverage License Application

*Submit to municipal clerk.*

Individual's Full Name (please print) (last name)		(first name)		(middle name)	
Huggins		Blake		Edward	
Home Address (street/route)		Post Office		City	
3330 Wintergreen Terrace				Grapevine	
Home Phone Number		Age		Date of Birth	
(972) 258-8507		[REDACTED]		[REDACTED]	
				Place of Birth	
				Tyler, TX	

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.
- Treasurer** of **CEC Entertainment, LLC**

(Officer / Director / Member / Manager / Agent)

(Name of Corporation, Limited Liability Company or Nonprofit Organization)

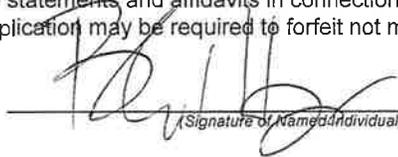
which is making application for an alcohol beverage license.

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

- How long have you continuously resided in Wisconsin prior to this date? Never
- 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.)
- 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.
- 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. Please see attached list of Wisconsin locations  
(Name, Location and Type of License/Permit)
- 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)
- Named individual must list in chronological order last two employers.

Employer's Name <b>CEC Entertainment, LLC</b>	Employer's Address 1707 Market Place Blvd., Suite 200, Irving, TX 75063	Employed From <b>11/2010</b>	To <b>Present</b>
Employer's Name <b>Centex Corporation/Plute Homes</b>	Employer's Address <b>Dallas, TX</b>	Employed From <b>03/2005</b>	To <b>11/2010</b>

**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.

  
 \_\_\_\_\_  
(Signature of Named Individual)

# Auxiliary Questionnaire Alcohol Beverage License Application

*Submit to municipal clerk.*

Individual's Full Name <i>(please print)</i> <span style="float: right;"><i>(last name)</i></span>		<i>(first name)</i>		<i>(middle name)</i>	
Rodriguez, Jr.		Rodolfo			
Home Address <i>(street/route)</i>	Post Office	City	State	Zip Code	
4647 Hallmark Dr.		Dallas	TX	75229	
Home Phone Number	Age	Date of Birth	Place of Birth		
(972) 258-8507	[REDACTED]	[REDACTED]	Sinton, TX		

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.
- Secretary** of **CEC Entertainment, LLC**

*(Officer / Director / Member / Manager / Agent)* *(Name of Corporation, Limited Liability Company or Nonprofit Organization)*

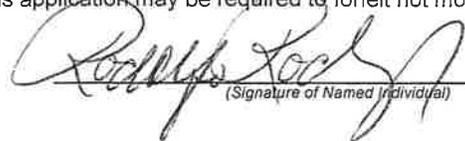
which is making application for an alcohol beverage license.

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? Never
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. Please see attached list of Wisconsin locations  
*(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
CEC Entertainment, LLC	1707 Market Place Blvd., Suite 200, Irving, TX 75063	11/2014	Present
JC Penney	6501 Legacy Dr., Plano, TX 75024	10/2012	11/2014

**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.

  
*(Signature of Named Individual)*

# Auxiliary Questionnaire Alcohol Beverage License Application

Submit to municipal clerk.

Individual's Full Name (please print) (last name)		(first name)		(middle name)	
Howell		James		Andrew	
Home Address (street/route)		Post Office	City	State	Zip Code
6106 Mustang Trail			Colleyville	TX	76034
Home Phone Number			Age	Date of Birth	Place of Birth
(972) 258-8507			[REDACTED]	[REDACTED]	San Diego, CA

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

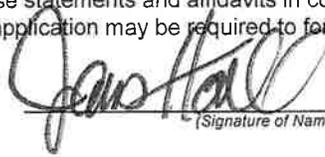
- Applying for an alcohol beverage license as an **individual**.
- A member of a **partnership** which is making application for an alcohol beverage license.
- EVP & Chief Financial Officer** of **CEC Entertainment, LLC**  
(Officer / Director / Member / Manager / Agent) (Name of Corporation, Limited 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:

- How long have you continuously resided in Wisconsin prior to this date? Never
- 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.)
- 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.
- 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. Please see attached list of Wisconsin locations  
(Name, Location and Type of License/Permit)
- 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)
- Named individual must list in chronological order last two employers.

Employer's Name <b>CEC Entertainment, LLC</b>	Employer's Address 1707 Market Place Blvd., Suite 200, Irving, TX 75063	Employed From <b>09/17/2018</b>	To <b>Present</b>
Employer's Name <b>Billabong International</b>	Employer's Address Irvine, CA	Employed From <b>06/2017</b>	To <b>07/2018</b>

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(Signature of Named Individual)

# Auxiliary Questionnaire Alcohol Beverage License Application

*Submit to municipal clerk.*

Individual's Full Name (please print) (last name)		(first name)		(middle name)	
Deck		David		Aaron	
Home Address (street/route)		Post Office		City	
3720 Cameroon Ln.				McKinney	
Home Phone Number		Age		Date of Birth	
(972) 258-8507		[REDACTED]		[REDACTED] 1970	
				Place of Birth	
				Rockledge, FL	

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

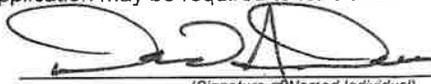
- Applying for an alcohol beverage license as an **individual**.
- A member of a **partnership** which is making application for an alcohol beverage license.
- Assistant Secretary** of **CEC Entertainment, LLC**  
(Officer / Director / Member / Manager / Agent) (Name of Corporation, Limited Liability 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? Never
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. Please see attached list of Wisconsin locations  
(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
CEC Entertainment, LLC	1707 Market Place Blvd., Suite 200, Irving, TX 75063	07/1999	Present
Employer's Name	Employer's Address	Employed From	To

**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.

  
 \_\_\_\_\_  
(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 of RACINE County of RACINE  
 City

The undersigned duly authorized officer/member/manager of CEC ENTERTAINMENT, 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 CHUCK E. CHEESE'S  
(Trade Name)

located at 5612 DURAND AVE., RACINE, WI 53406

appoints PAULA ZASTROW  
(Name of Appointed Agent)  
4016 VICTORY AVE. RACINE, WI 53405  
(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?

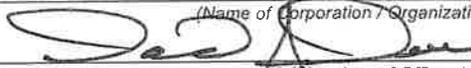
Yes  No If so, indicate the corporate name(s)/limited liability company(ies) and municipality(ies).

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? 36 YEARS

Place of residence last year 4016 Victory Ave. Racine, WI 53405

For: CEC ENTERTAINMENT, LLC  
(Name of Corporation / Organization / Limited Liability Company)

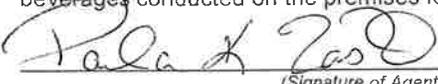
By:   
(Signature of Officer / Member / Manager)

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, PAULA ZASTROW, 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.

 3/31/2021  
(Signature of Agent) (Date)  
4016 VICTORY AVE. RACINE, WI 53405 Agent's age             
(Home Address of Agent) Date of birth           

## 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 \_\_\_\_\_ by \_\_\_\_\_ Title \_\_\_\_\_  
(Date) (Signature of Proper Local Official) (Town Chair, Village President, Police Chief)

## SPRING-TASTIC SWEETS



Celebrate the magic of spring with our rainbow inspired desserts! Our Rainbow Dippin' Dots, Unicorn Churros, Rainbow Lollipops, and Unicorn Cotton Candy are sure to make your spring the sweetest ever! Available at participating locations.

## Pizza Made To Order Built For Flavor



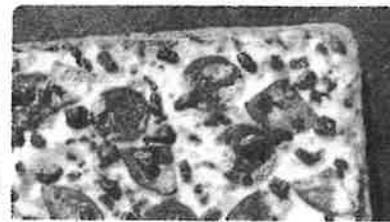
### Build Your Own

Create the pizza that's perfect for you and your family. Choose your size, crust, and toppings.



### Supreme

What more could you want in a pizza? This delicious pizza comes stacked with pepperoni, sausage, beef, black olives, mushrooms, red onions and green peppers. It's a super combo piled on our delicious cheese pizza with red sauce.



### Five Meat

Absolute meat satisfaction! Our five meat combo is a classic pizza loaded with five different types of delicious meats, making it the king of meat pizzas, Pepperoni, sausage, bacon, ham, and beef work together in perfect pizza harmony.



### Veggie

Whether you're a vegetarian or just a vegetable-lover, this pizza is for you. A medley of vegetables including black olives, mushrooms, red onions, green peppers, and tomatoes sits on top of a classic cheese pizza with red sauce.



### Gluten-Free

No kidding, we didn't sacrifice any flavor to make this personal pizza gluten-free!

This is a classic cheese pizza with a delicious Smart Flour™ crust. Note: pizza is prepared in a shared kitchen and cannot be guaranteed completely free of gluten.

## Wings

Our wings are sauced with flavor! Choose from bone-in traditional buffalo wings or oven-baked all-white-meat nuggets. Choose one our delicious sauces like hot buffalo, smoky BBQ, sweet chili or plain. Every order of wings is served with side of celery and ranch or blue cheese dressing.



SMALL : Serves Approx. 2  
MEDIUM: Serves Approx. 4  
LARGE: Serves Approx. 6

## Appetizers And Platters For Sharing



### Cheesy Bread

Our irresistible cheesy bread is packed with garlic spread and freshly shredded, freshly melted mozzarella and cheddar cheese. It's served with pizza sauce and lite ranch dressing for dipping.



### French Fries

Classics are classics for a reason. Our French fries are crispy, golden brown and served with ketchup.



### App Sampler

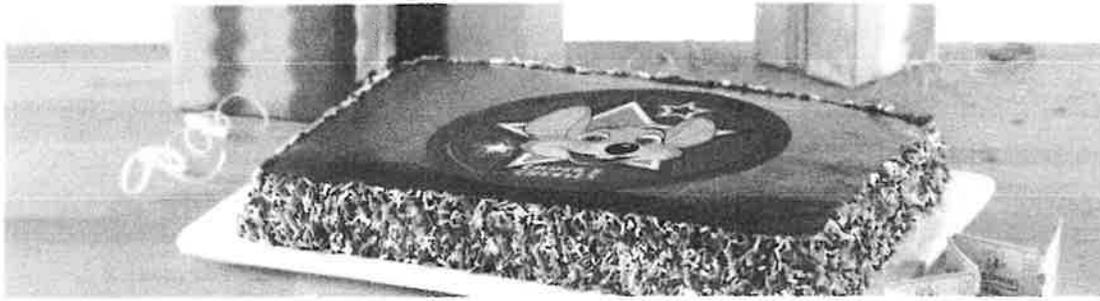
A little bit of this and a little bit of that! Our app sampler offers a taste of three party favorites: Cheesy Bread, French Fries and your choice of traditional bone-in or boneless wings. Serves 2-4.

## Salads



"Our garden salads is a great appetizer!" Get started with fresh cut lettuce, tomatoes, cucumber and the usual, topped with your choice of dressing. Hang your appetite so you don't eat a garden's worth!

## Desserts For Everyday Treats And Birthday



### Cakes

Whether you are celebrating a birthday or a special accomplishment, we serve cakes anytime, any day. Now, we offer Edible Images to customize your cake with your favorite character! Currently, we offer Chuck E., Barbie™, Paw Patrol™, Batman™, Hello Kitty®, and PJ Masks™.

Sizes: 8" Round (serves up to 12) and ¼ Sheet (serves up to 20)

Flavors: Chocolate or Vanilla



### Giant Warm Cookie

Our cookie is giant, so we cut it like a pizza to serve it! There's enough warm chocolate chip cookie for everyone in the family to enjoy a slice.



### Unicorn Churros

Our churros just became magical! They are baked to perfection, and dusted with cotton candy, sour apple, and blue raspberry sugar.



### Dippin' Dots®

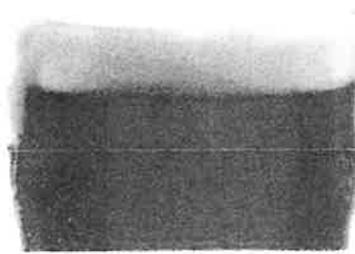
Pick from a variety of delicious flavors

## Drinks And Adult Beverages



### Soft Drinks

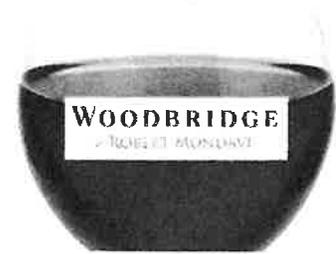
Thirsty? We have plenty of tasty drinks to fuel your party. There's Pepsi® soft drinks, Gatorade and juices.



### Beer

Choose from our selection of premium beers.

\*Only available at select locations



### Wine

Choose from our selection of wines.

\*Only available at select locations

# Original Alcohol Beverage Retail License Application

(Submit to municipal clerk.)

For the license period beginning: 07/01/2021 ending: 06/30/2022  
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the:  Town of } RACINE  
 Village of }  
 City of }

County of RACINE Aldermanic Dist. No. N/A  
 (if required by ordinance)

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

C# 6438 B# 1949  
 C# 6439 Bill # 5303 "B"  
 5304 "C"

Applicant's Wisconsin Seller's Permit Number 456103052258304	
FEIN Number 85-4343185	
TYPE OF LICENSE REQUESTED	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$ 100
<input checked="" type="checkbox"/> Class C wine	\$ 100
<input type="checkbox"/> Class A liquor	\$
<input type="checkbox"/> Class A liquor (cider only)	\$ N/A
<input type="checkbox"/> Class B liquor	\$
<input type="checkbox"/> Reserve Class B liquor	\$
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$ 40
<b>TOTAL FEE</b>	<b>\$ 240</b>

Name (individual / partners give last name, first, middle; corporations / limited liability companies give registered name)  
CEC ENTERTAINMENT, 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)
PLEASE SEE ATTACHED	✓		
Vice President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Secretary / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Agent Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

1. Trade Name CHUCK E. CHEESE'S Business Phone Number (972) 258-5481  
 2. Address of Premises 5612 DURAND AVE Post Office & Zip Code RACINE, 53406

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.)

FREESTANDING 1-STORY 10,600 SQ FT MASONRY BUILDING. ALCOHOL TO BE STORED  
IN THE COLD FREEZER IN THE KITCHEN. SERVICE IS AT THE COUNTER

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? CEC ENTERTAINMENT, INC.

**CEC ENTERTAINMENT, LLC  
OFFICERS**

<b>NAME TITLE</b>	<b>BUSINESS ADDRESS</b>	<b>BUSINESS PHONE #</b>
David McKillips Chief Executive Officer & Director	1707 Market Place Blvd., Suite 200 Irving, TX 75063	(972) 258-8507
Rodolfo Rodriguez, Jr. Secretary	1707 Market Place Blvd., Suite 200 Irving, TX 75063	(972) 258-8507
David A. Deck Assistant Secretary	1707 Market Place Blvd., Suite 200 Irving, TX 75063	(972) 258-8507
Blake Huggins Treasurer	1707 Market Place Blvd., Suite 200 Irving, TX 75063	(972) 258-8507
James Howell EVP & Chief Financial Officer	1707 Market Place Blvd., Suite 200 Irving, TX 75063	(972) 258-8507

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? .....  Yes  No  
**If yes, explain.**
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 DELAWARE and date 12/15/20 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.) <b>DECK, DAVID A.</b>	Title/Member <b>ASSISTANT SECRETARY</b>	Date <b>04/21/2021</b>
Signature 	Phone Number <b>(972) 258-5481</b>	Email Address <b>malamillo@CECENTERTAINMENT.COM</b>

**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	

450<sup>00</sup>

License Expires December 31, 20\_\_

Fee: ~~\$300.00~~ application  
\$40<sup>00</sup> ~~\$20.00~~ per Device  
\$15.00 Record Check per person

Bill # 5305

**APPLICATION FOR AMUSEMENT CENTER LICENSE**

FEIN#: 85-4343185

Wisconsin Seller Permit #: 456-1030522583-04

NAME OF PERSON IN CHARGE: Paula Zastrow

TRADE NAME: Chuck E. Cheese PHONE: (972) 258-5481

ADDRESS OF BUSINESS: 5612 Durand Ave., Racine, WI 53406

I CERTIFY that I am a resident of the State of Wisconsin continuously since N/A and of  
The City of Racine continuously since N/A.

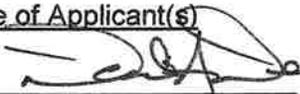
**INDIVIDUAL OR PARTNERSHIP**

Person's Name	Address & Home Phone Number	Date of Birth

**CORPORATION (NAME)** CEC Entertainment, LLC

Title	Name	Address	Date of Birth
President	Please see attached list	✓	
Vice-President			
Secretary			
Treasurer			

NUMBER/TYPE OF DEVICES: Jukeboxes \_\_\_ Mechanical Devices 46 Video Games \_\_\_

Signature of Applicant(s)  Print Name David A. Deck, Assistant Secretary Date of Birth 

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**CHUCK E. CHEESE'S #726**  
**5612 Durand Ave.**  
**Racine, WI 53405**

**GAMES LIST**

<b>GAME NAME</b>	<b>SERIAL #</b>	<b>TYPE</b>
ALLEY CLASSIC P1	9155868	AMUSEMENT
ALLEY CLASSIC P4	9155871	AMUSEMENT
BIG WIN	9140382	AMUSEMENT
CEC COLOR PHOTO RIDE	9177916	AMUSEMENT
CHOPPY WOOD 1-2	9177917	AMUSEMENT
CIRCUS TOSS	9179527	AMUSEMENT
COMET CATCHER	9140390	AMUSEMENT
CRAZY TYPHOON	9155874	AMUSEMENT
DEADSTORM PIRATES	9164538	AMUSEMENT
Dicey Jump	9179525	AMUSEMENT
DOG POUNDER	9140385	AMUSEMENT
DUCKY SPLASH P1-2	9155875	AMUSEMENT
DUO DRIVE P1-2	9165599	AMUSEMENT
FUNNY HAMSTER	9165591	AMUSEMENT
GRAVEYARD SMASH 1-2	9177920	AMUSEMENT
Gum Drop	9179526	AMUSEMENT
HIT MUSIC	9165600	AMUSEMENT
Ice Cube	9177921	AMUSEMENT
JAM SESSION	9135408	AMUSEMENT
JET RIDER	9128725	AMUSEMENT
JURASSIC PARK EXCLUSIVE	9165601	AMUSEMENT
MINIONS ROCKET CAR RIDE	9179528	AMUSEMENT
MINIONS WHACK	9177922	AMUSEMENT
MOO MOO	9156037	AMUSEMENT
NBA GAME TIME #1	9177918	AMUSEMENT
NBA GAME TIME #2	9177919	AMUSEMENT
Octonauts	9177923	AMUSEMENT
PAW PATROL	9177924	AMUSEMENT
PIGS MIGHT FLY	9136665	AMUSEMENT
PIRATES HOOK P1-2	9155878	AMUSEMENT
PLANTS VS ZOMBIES	9164542	AMUSEMENT
POP THE LOCK	9177925	AMUSEMENT
POWER DROP	9155879	AMUSEMENT
RED HOT SINGLE	9140396	AMUSEMENT
ROCK N RIDE HELMET	9155880	AMUSEMENT
ROLL FOR GOLD 2	9155896	AMUSEMENT

**CHUCK E. CHEESE'S #726**  
**5612 Durand Ave.**  
**Racine, WI 53405**

**GAMES LIST**

<b>GAME NAME</b>	<b>SERIAL #</b>	<b>TYPE</b>
SEGA RACING CLASSIC 1	9137309	AMUSEMENT
SEGA RACING CLASSIC 2	9137310	AMUSEMENT
SIMPSONS CARNIVAL	9165592	AMUSEMENT
SIMPSONS SOCCER	9155881	AMUSEMENT
Super Bikes 3 # 1	9179531	AMUSEMENT
Super Bikes 3 # 2	9179530	AMUSEMENT
TIP N BLOCKS	9165593	AMUSEMENT
TWO MINUTE DRILL	9128721	AMUSEMENT
WHEEL OF FORTUNE VIDEO	9164535	AMUSEMENT
WONDER LAND	9155867	AMUSEMENT
<b>TOTAL GAMES: 46</b>		

<b>Digital Watchdog</b>	<b>DVR 1</b>
Channel 1	Kid check 1
Channel 2	Kid check 2
Channel 3	Right register
Channel 4	Middle register
Channel 5	Left register
Channel 6	Merch counter
Channel 7	Salad bar
Channel 8	Beverage bar
Channel 9	Back door kitchen
Channel 10	Kitchen make table/oven
Channel 11	Office
Channel 12	Rest room entrance
Channel 13	Showroom 1
Channel 14	Showroom 2
Channel 15	Game room 1
Channel 16	Game room 2

<b>Digital Watchdog</b>	<b>DVR 2</b>
Channel 1	Game room 3
Channel 2	Game room 4
Channel 3	Kiddie room
Channel 4	Toddler zone
Channel 5	Game room 5
Channel 6	Merch room
Channel 7	Tech room
Channel 8	Front parking 1
Channel 9	Front parking 2
Channel 10	Side parking 1
Channel 11	Rear parking 1
Channel 12	Rear parking 2
Channel 13	Play pass console
Channel 14	Kiosks/merch area seating