

**BUSINESS NAME:** COASTERS

**BUSINESS ADDRESS:** 1301 N. MAIN ST

**QUESTIONNAIRE**

1. Capacity

How many customers do you anticipate on your busiest days?

25-50  50-100  100-200  200-400  More than 400

2. Hours of Operation

Please indicate the intended hours of operation by day. If your establishment will be open past midnight, the indicated closing time will be understood to be the day following the indicated time your establishment will open for business. Sun.-Thurs. 2pm - 2am / Fri + Sat 2pm - 2:30 AM

3. Ratio of Food to Alcohol (exclusive of any cover charge)

75% or more food  Snacks only  Other  50% food/50% alcohol  No food

If other, please describe:

4. Type of Alcohol

Beer  
 Beer and wine  Hard liquor as well as beer and wine

5. Drink Specials

Will drink specials be offered?  yes  no If yes, what kind of drink specials?  
\$ 1.00 off happy hour M-F from 2pm - 6pm

6. Type of Entertainment (Check all that apply)

Cocktail lounge only  Dance club  Banquets and private parties  
 Live music  DJ introduced music  Under age 21 events

7. Outdoor Facilities (Check all that apply)

For smokers  Patios in front  Patios in Rear  Patios on side(s)  Roof patio

8. Security

What type of security and age verification will be provided? Please describe:  
BOUNCER AT THE DOOR, SECURITY CAMERAS

How will you maintain security both inside and immediately outside the establishment? Please describe:  
outside Lighting with CAMERAS, INSIDE BOUNCER AT DOOR  
SECURITY CAMERAS WITH INTERNET ACCESS

9. Parking access/security

Please describe your parking arrangements.  
PARKING LOT with some street parking

\* NOTE: You may attach additional pages if necessary.

# CITY OF RACINE

## Supplemental Application Form for new Alcohol Establishments

Date 6-4-11

Name of Corporation/LLC/Individual COASTERS INC.

Address of Licensed Premise 1301 N. MAIN ST RACINE W. 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 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 checked="" 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. 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"/>

5. 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 checked="" 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>11</u> To <u>11</u> (attach additional sheets)	

# CITY OF RACINE

## Supplemental Application Form for new Alcohol Establishments

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

7. Is this a franchise?  Yes  No

8. Is this premise currently licensed?  Yes  No If yes list type of license B Liquor

9. Is the current licensee operating?  Yes  No If no, list date closed \_\_\_\_\_

### 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 checked="" type="checkbox"/> Building owner responsibility	<input checked="" type="checkbox"/> Garbage Cans Outside
<input type="checkbox"/> Other (List)	<input type="checkbox"/>

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

Licensee, Building owner / hired maintenance

How Often? (Daily, Weekly, Other) DAILY

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

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

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

<input type="checkbox"/> None	<input checked="" 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"/> CAMERAS

## 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 based on a percentage of 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

# CITY OF RACINE

## Supplemental Application Form for new Alcohol Establishments

**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 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 and
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) and
5. Provide dimensions of all alcohol storage areas (length x width)
6. Label all alcohol display areas (behind the bar, shelves, etc.) and
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)
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) and
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.) and
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.

# CITY OF RACINE

## Supplemental Application Form for new Alcohol Establishments

### IF YOU LEASE THE BUILDING, ANSWER THE FOLLOWING QUESTIONS:

Have you signed the lease? Yes No

Date lease begins: \_\_\_\_\_ Expires \_\_\_\_\_

Monthly Rental: \$ \_\_\_\_\_

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

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

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

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

Does the present owner or occupant object to the granting of your license? Yes No

Explain if Yes \_\_\_\_\_

\*\*\*\*\*

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.
- **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.

# CITY OF RACINE

## Supplemental Application Form for new Alcohol Establishments

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

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

**SECTION B: AMUSEMENT/CABARET LICENSE APPLICANTS ONLY. (check all that apply)**

<input type="checkbox"/> Battle of the Bands	<input type="checkbox"/> Comedy Acts
<input type="checkbox"/> Disc Jockey	<input checked="" type="checkbox"/> Live Musicians <i>Special events</i>
<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:

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. CB (INITIAL)

# CITY OF RACINE

## Supplemental Application Form for new Alcohol Establishments

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

SUBSCRIBED AND SWORN TO BEFORE ME ON 6-10, 2011

Signature

Charles Beth

Printed Name

CHARLES BETH

Address

5927 potomac pl.

## **BUSINESS PLAN FOR COASTERS**

**Hours of Operation:** The hours of operation will be opening daily from 2 pm till 2 am weekdays and 2:30 am on weekends.

**Planned Sample Menu:** Although a kitchen is in the works, it is our intention to open the kitchen as soon as financially possible. A sample menu is attached.

**Alcohol based on a percentage of sales:** 75% of our total sales will come from alcohol sales. The other 25% would come from sale of pre package food and video games.

**Security:** Safety is a number one priority. The use of bouncers will remain in effect. One feature that we will add is security cameras with internet access with 24 hours a day surveillance and video recording of property inside and out. Our target age will be 30 and older and we will also regulate the music to help maintain a controlled crowd.

**Parking:** Currently the property has a 20 space lighted parking lot. We will be adding security cameras and additional lighting for added safety.

**Staffing:** The plan at this time is to employ the current 4 licensed bartenders, bouncers, and clean up crew. We also plan to hire kitchen help when needed.

**Plan to deal with non smoking laws:** Property has an outside patio for smoking customers

**Special events/plans:** we plan to continue participating in the thoughts for food, trollaween, pub crawl, and Fill the Cupboards on Hubbard food drive.

**Good neighbor practices:** we plan on maintaining our property and surrounding areas. We also will do a grounds check on a daily basis. We also will not allow glass outside the premises.

**Budget:** the budget plan is to continually upgrade and upkeep of the property to insure a friendly and safe environment.



**Cubano Sand-** Roasted pork ,ham and Swiss cheese pressed in a pinni press.

**Italian beef-** tender beef served on garlic cheese bread

**Pizza Burger-**topped with motz cheese and pressed in a panni press

**Chicken sand-**served on a toasted bun with bacon,cheese,bbq sauce,lettuce and tom.

**Chicken cordon Blue-** fried or grilled topped with ham and Swiss cheese

**Grilled chicken sand-** served on a toasted bun with let and tom.

**Bbq pork sand-** home made roasted pork served with cheddar cheese pressed in a panni press.

**The coaster ride-** ½ pound patty served on a toasted bun. your choice of cheese. Bbq sauce, fried or raw onions,bacon,let and tom.

**1/3 pound burger-** served on a toasted bun with let and tom.

**Wings-** reg or bbq

**Nachos-** served on homemade chips with your choice of chicken or beef topped with: tom,jalapenos ,black olives and sourcream.

**Cheese choices:** American, swiss, pepper jack or cheddar

**Extras:**

Raw or fried onions

Mushrooms

Jalapenos

Bacon

**sides:**

onion rings

motz sticks

fried mushrooms

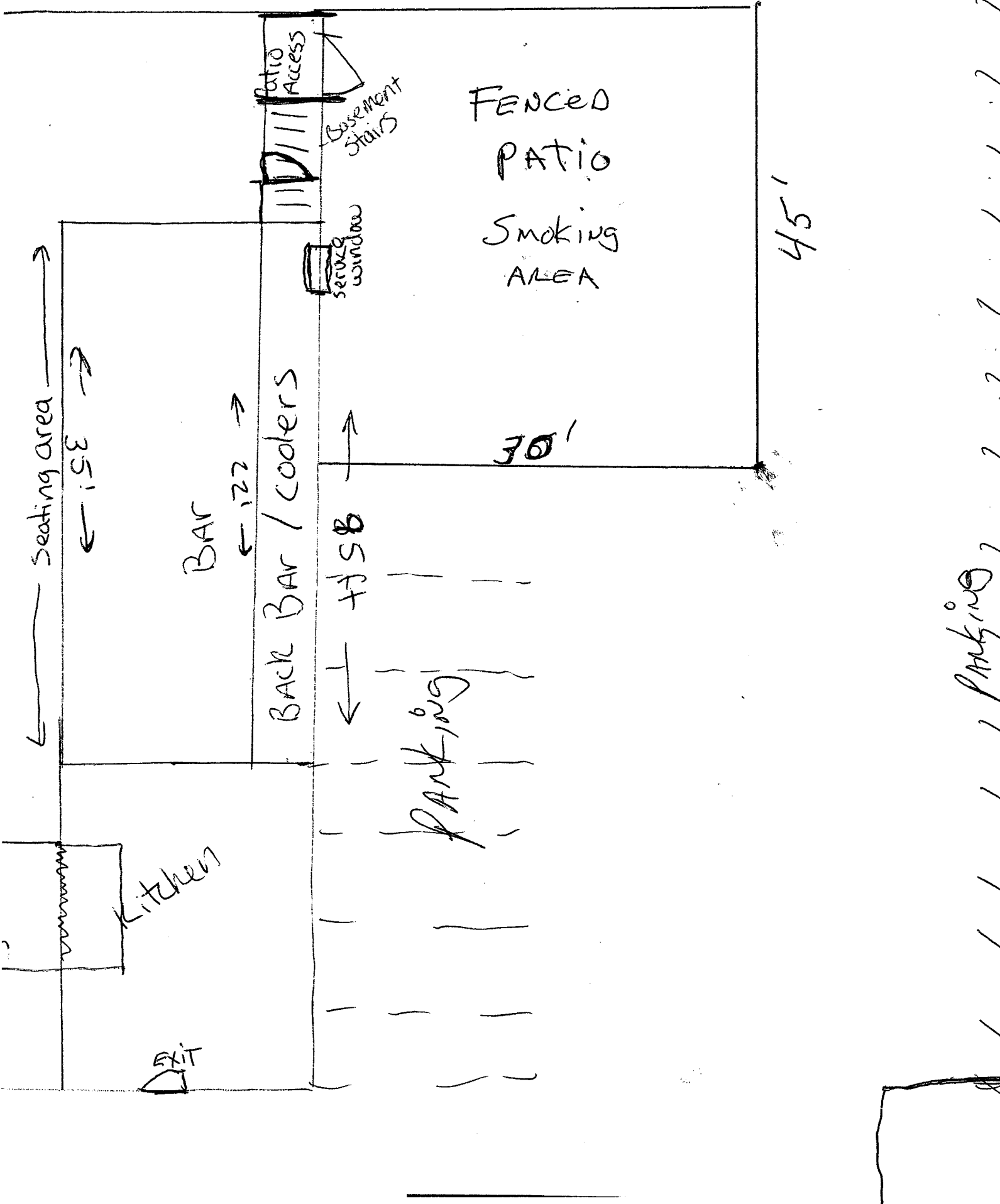
fried cauliflower

French fries

30'

2375 sq. ft

Driveway



Parking

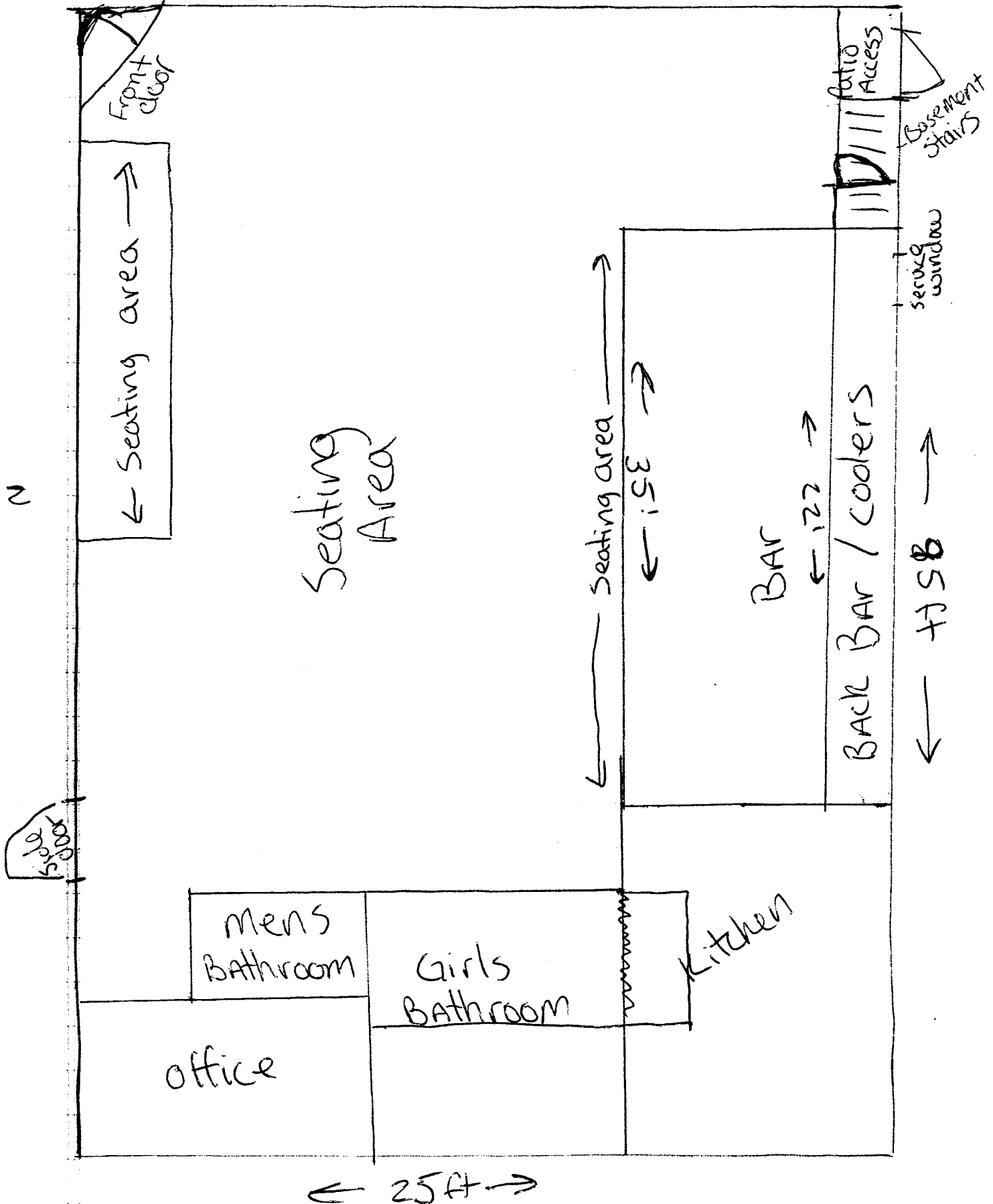
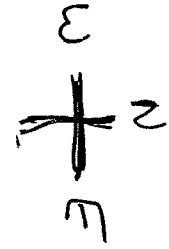
501 N Main St.  
asters Inc. - Chuck Beth  
asters Bar

6-6-11

Main St.

2375 sq. ft

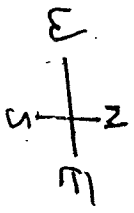
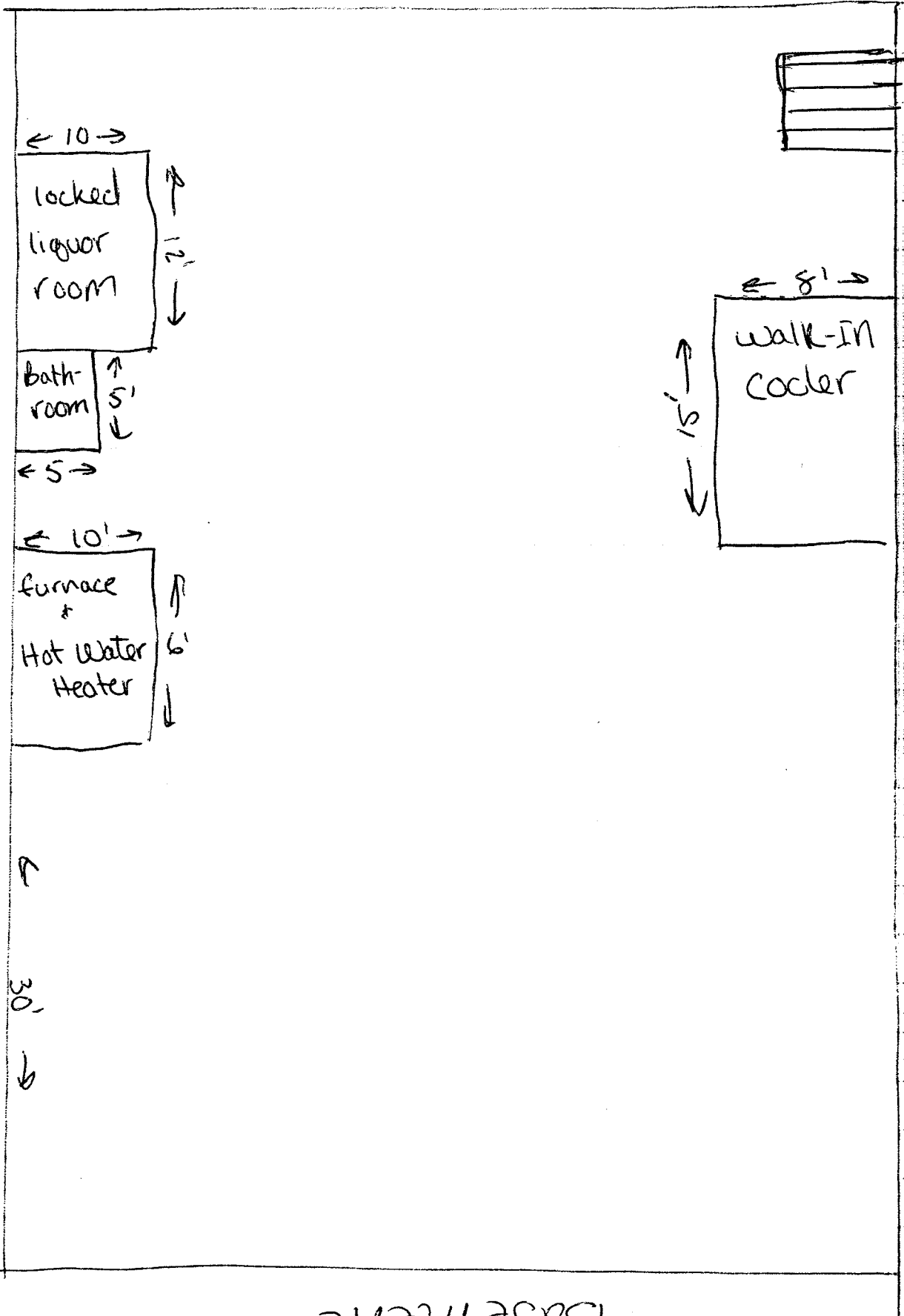
# first floor



1301 N. Main St 6-6-11 MAWI St.  
Coasters Inc. Chuck Beth  
Coasters Bar

1875 sq Ft

← 25' →



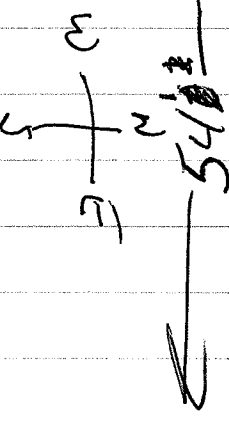
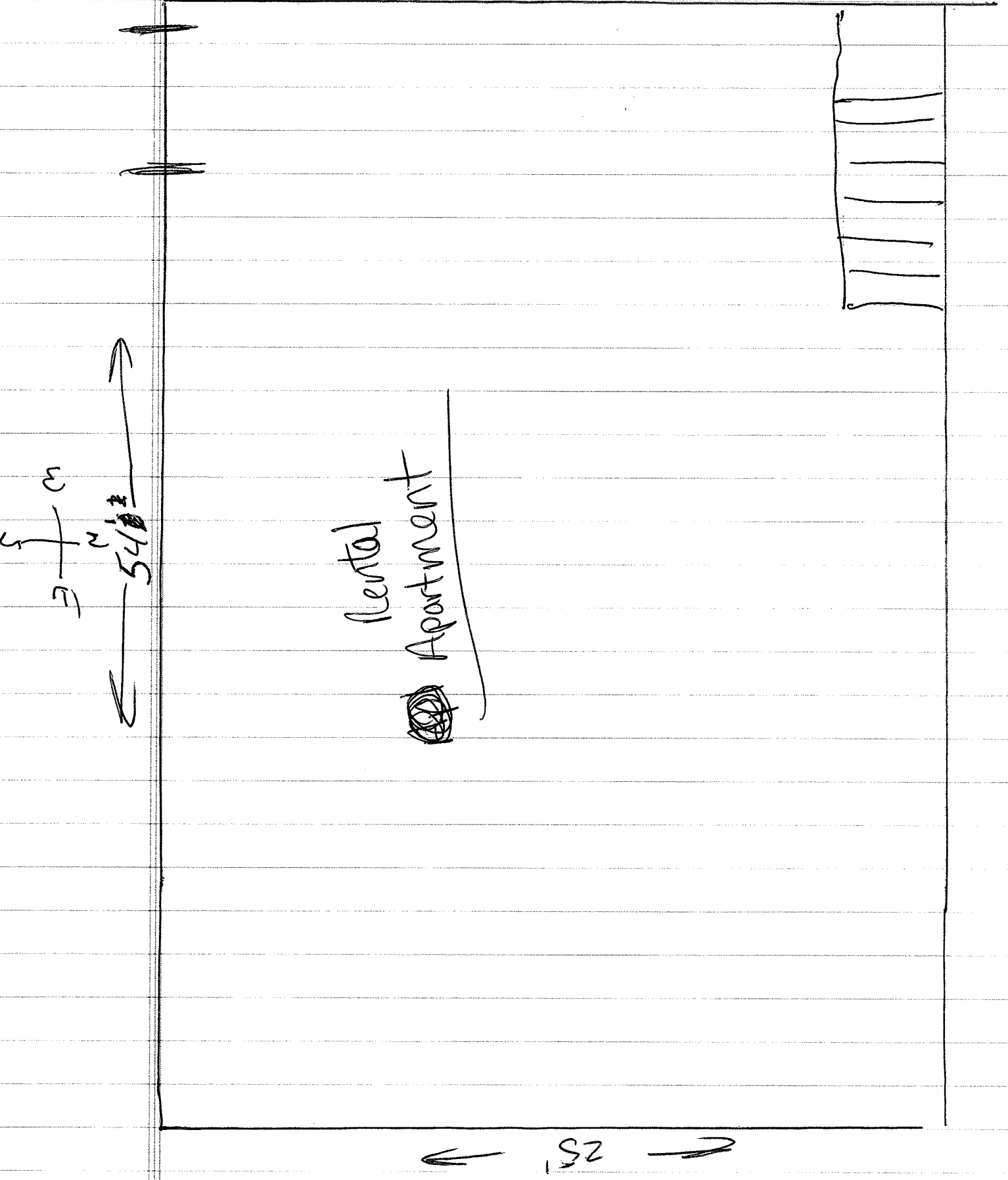
Basement

1301 N. Main St.  
Coasters Inc. Chuck Beth  
Coasters Bar

6-6-11

MAIN ST  
2nd floor

1350 sq Ft.



Rental  
Apartment

