# ORIGINAL ALCOHOL BEVERAGE RETAIL LICENSE APPLICATION

*Submit to municipal clerk.*

For the license period beginning July 1 20 18 ;
ending June 30 20 18

TO THE GOVERNING BODY of the: ☐ Town of ☐ Village of ☒ City of } Stoughton, WI

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

| Applicant's WI Seller's Permit No.: | FEIN Number: |
|---|---|
| WI-73245 | 824157623 |

| LICENSE REQUESTED ▶ | |
|---|---|
| TYPE | FEE |
| ☐ Class A beer | $ |
| ☒ Class B beer | $ 100 |
| ☐ Class C wine | $ |
| ☐ Class A liquor | $ |
| ☐ Class A liquor (cider only) | $ N/A |
| ☒ Class B liquor | $ 500 |
| ☐ Reserve Class B liquor | $ |
| ☐ Class B (wine only) winery | $ |
| Publication fee | $ 20 |
| TOTAL FEE | $ 620.00 |

1. The named ☐ INDIVIDUAL ☐ PARTNERSHIP ☒ LIMITED LIABILITY COMPANY ☐ CORPORATION/NONPROFIT ORGANIZATION
hereby makes application for the alcohol beverage license(s) checked above.
2. Name (individual/partners give last name, first, middle; corporations/limited liability companies give registered name): ▶ Lon's tailgater LLC

An **"Auxiliary Questionnaire," Form AT-103, must be completed and attached to this application by each individual applicant, by each member of a partnership, and by each officer, director and agent of a corporation or nonprofit organization, and by each member/manager and agent of a limited liability company.** List the name, title, and place of residence of each person.

| | Title | Name | Home Address | Post Office & Zip Code |
|---|---|---|---|---|
| President/Member | Member | Lonny P Pastorius | | |
| Vice President/Member | | | | |
| Secretary/Member | | | | |
| Treasurer/Member | | | | |
| Agent ▶ | Lonny Pastorius | | | |
| Directors/Managers | | | | |

3. Trade Name ▶ Lon's Tailgaters Business Phone Number TBD
4. Address of Premises ▶ 151 E. Main st. Post Office & Zip Code ▶ Stoughton, WI 53589
5. Is individual, partners or agent of corporation/limited liability company subject to completion of the responsible beverage server training course for this license period? ☒ Yes ☐ No
6. Is the applicant an employe or agent of, or acting on behalf of anyone except the named applicant? ☐ Yes ☒ No
7. Does any other alcohol beverage retail licensee or wholesale permittee have any interest in or control of this business? ☐ Yes ☒ No
8. (a) **Corporate/limited liability company applicants only:** Insert state WI and date 1-25-18 of registration.
(b) Is applicant corporation/limited liability company a subsidiary of any other corporation or limited liability company? ☐ Yes ☒ No
(c) Does the corporation, or any officer, director, stockholder or agent or limited liability company, or any member/manager or agent hold any interest in any other alcohol beverage license or permit in Wisconsin? ☐ Yes ☒ No
*(NOTE: All applicants explain fully on reverse side of this form every YES answer in sections 5, 6, 7 and 8 above.)*
9. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) See Attached MLS # 1810999
10. Legal description (omit if street address is given above): See Attached Parcel # 281/0511-081-2132-7
11. (a) Was this premises licensed for the sale of liquor or beer during the past license year? ☒ Yes ☐ No
(b) If yes, under what name was license issued? Sonny's Bar & Grill (Tim & Kari Manhart)
12. Does the applicant understand they must file a Special Occupational Tax return (TTB form 5630.5) before beginning business? [phone 1-800-937-8864] ☒ Yes ☐ No
13. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776] ☒ Yes ☐ No
14. 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 signers. Signers agree to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants and each member of a partnership applicant must sign; corporation officer(s), members/managers of Limited Liability Companies must sign.) Any lack of access to any portion of a licensed premises during inspection will be deemed a refusal to permit inspection. Such refusal is a misdemeanor and grounds for revocation of this license.

**SUBSCRIBED AND SWORN TO BEFORE ME**
this 25th day of January 20 _____ *(Officer of Corporation/Member/Manager of Limited Liability Company/Partner/Individual)*

Holly Licht *(Clerk/Notary Public)* *(Officer of Corporation/Member/Manager of Limited Liability Company/Partner)*

My commission expires 3/2/2019 *(Additional Partner(s)/Member/Manager of Limited Liability Company if Any)*

NOTARY PUBLIC HOLLY LICHT STATE OF WISCONSIN

**TO BE COMPLETED BY CLERK**

| Date received and filed with municipal clerk 1/25/18 | Date reported to council/board | Date provisional license issued | Signature of Clerk / Deputy Clerk |
|---|---|---|---|
| Date license granted | Date license issued | License number issued | |

Sonny's
151 E. Main Street
Stoughton, WI 53589
(608) 873-4422

January 24, 2018

City Of Stoughton
City Hall
381 E. Main St.
Stoughton, WI 53589

Attn: City Clerk Holly Licht

Subject: Letter Of Intent To Surrender Liquor License On 03/16/18

To Whom It May Concern:

We submit this Letter Of Intent to notify the City Of Stoughton and the City Clerk of Tim and Karie Manhart's intent to surrender the Liquor License that belongs to Sonny's on March 16, 2018 contingent on a successful closing/sale of the property at 151 E. Main Street in Stoughton, Wisconsin.

Please contact either Tim or Karie if you need additional information regarding this intent to surrender the liquor license.

Tim Manhart (608) 873-4422 Sonny's or (608) 333-3740 Cell
Karie Manhart (608) 206-5207 Cell or (608) 267-9577 Work

Sincerely,

Timothy H Manhart
Karie Manhart

Tim & Karie Manhart
Business Owners of Sonny's

757 7518

**MLS #: 1810999** **Active** **Business/Comm** **Price: $199,900**

**151 E Main St** **#** **City** **Stoughton** D44

**County:** Dane **Mailing City:** Stoughton

**Trade Name:** Sonny's Bar & Grill WI 53589

| | | | | |
|---|---|---|---|---|
| **RE For Sale:** | Yes | **Units in Bldg:** | 3 | |
| **Bus for Sale:** | Yes | **Ann Rent/SqFt:** | $ 15600.00 | |
| **Lease Only:** | No | **Bldg Gross SqFt:** | 4,416 | *Seller* |
| **# of Stories:** | 2 | **Net Leasable SqFt:** | 2,090 | |
| **Approx Bldg Dim:** | 22x95 | **Ceiling Hgt Min:** | 10 | **Max:** 10 |
| **Year Built:** | 1889 Assessor | **# Loading Docks:** | 0 | |
| **Street Frontage:** | 22 | **Parking Fees/Mo:** | $ 0 | |
| | | **Onsite Parking:** | Yes | |

Hwy 51/Main Street.

| Unit: | Lease Type: | Lse Exp Date: | Renew Op: | Annual Base Rent: | Annual Rent/SqFt: | Other Fees/SqFt: | Gross SqFt: |
|---|---|---|---|---|---|---|---|
| 1 | FrontUpper | Mon to Mon | Yes | $ 7800 | $ 0.00 | $ 0 | 2,090 |
| 2 | RearUpper | Mon to Mon | | $ 7800 | $ | $ | |
| 3 | | | | $ | $ | $ | |

**Gross Op Inc:** $ 0
**Ann Op Exp:** $ 0
**Net Op Inc:** $ 0 **Year:** 0
**Net Taxes:** $ 5,294 / 2016

**Zoning:** Comm
**Est. Acres:** 0.0620
**Lot Size:**
**Parcel #:** 0511-081-2132-7

**Included:**
**Excluded:**

| | | | |
|---|---|---|---|
| **Type** | Tavern, Apartment building | **Building Parking** | 1-5 spaces, Onsite |
| **Location** | Business district | **Seating Capacity** | Over 100 persons |
| **Present Use** | Tavern, Apartment building | **Licenses** | Food, Liquor, Wine |
| **Building Framing** | Wood frame | **Sale Includes** | Business name, Some equipment, All furniture |
| **Exterior** | Masonry | **Documents on File** | Fixtures & equipment |
| **Roofing** | All flat | **Lease Type** | Month to month |
| **Heating/Cooling** | Forced air, Central air, Window AC | **Tenant Pays** | No expenses |
| **Fuel** | Natural gas | **Exchange** | N/A |
| **Water/Waste** | Municipal water, Municipal sewer | **Occupancy** | Owner, Tenant(s) |
| **Features** | Alley, Public rest rooms, Residential unit(s), Signage available, Inside storage | | |

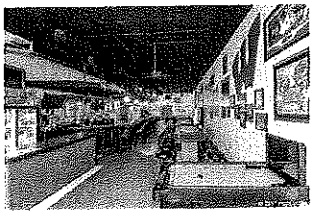
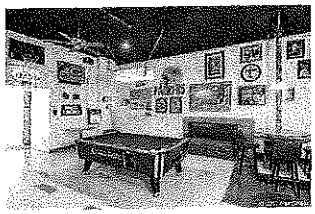
Location! Centrally located in the beautiful heart of historical downtown Stoughton. Well established sports bar w/ lengthy bar, several high-top tables, and generous seating. Surrounded by an array of thriving businesses. Enjoys a reputation for awesome burgers! Even has a bowling alley in the basement from decades ago - a bit of history and nostalgia. Two apartments upstairs brings in excellent income. SF/dim approx.

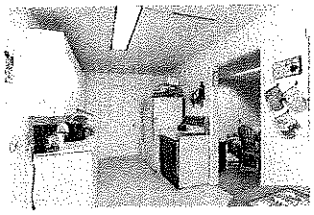
**Sold Price:** **Concessions:** **Closing Date:**

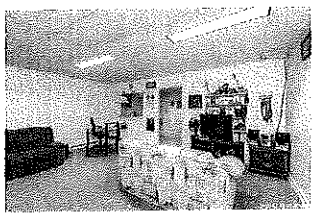
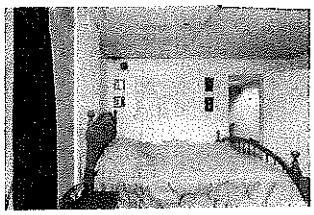
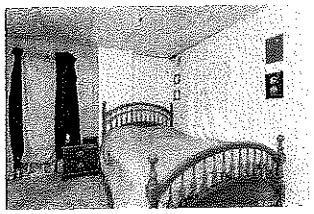
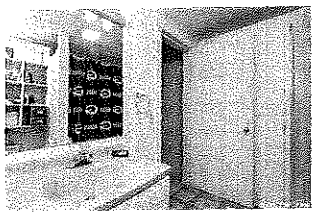
*This information provided courtesy of:* *Stark Company, REALTORS*

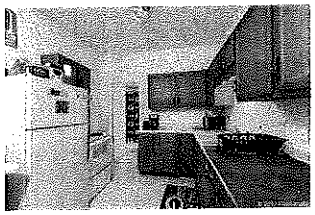
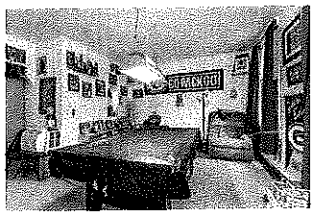
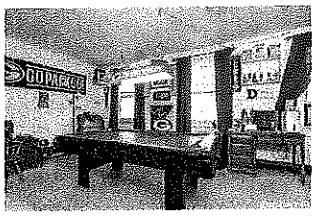
*01/10/2018 01:27 PM*

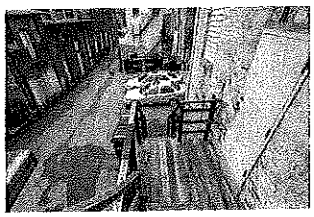
**David Brown**
**First Weber Inc**
**Cell: 608-201-1962**
**brownd@firstweber.com**





Accuracy of information is not guaranteed and should be verified by buyer if material. Equal Housing Opportunity listing. Copyright 2017 SCWMLS

## Parcel Maps

DCiMap | Google Map | Bing Map

## Tax Summary (2017)

More +

E-Statement | E-Bill | E-Receipt

| Assessed Land Value | Assessed Improvement Value | Total Assessed Value |
|---|---|---|
| $18,000.00 | $180,400.00 | $198,400.00 |
| **Taxes:** | | $4,401.30 |
| **Lottery Credit(-):** | | $0.00 |
| **First Dollar Credit(-):** | | $77.81 |
| **Specials(+):** | | $1,026.86 |
| **Amount:** | | $5,350.35 |

## District Information

| Type | State Code | Description |
|---|---|---|
| REGULAR SCHOOL | 5621 | STOUGHTON SCHOOL DIST |
| TECHNICAL COLLEGE | 0400 | MADISON TECH COLLEGE |
| TIF/TID | 5804 | TIF 04 |

**Recorded Documents**

| Doc. Type | Date Recorded | Doc. Number | Volume | Page |
|---|---|---|---|---|
| WD | 02/10/1997 | 2827695 | | |

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By Parcel Number: 0511-081-2132-7

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Dane County
Land Information Office
GIS SERVICES

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City-County Bldg. Room 116
Madison, WI 53703

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# WISCONSIN
# SELLER / SERVER CERTIFICATION

**Trainee Name:** Lonny Pastorius

**Date of Completion:** 01/24/2018

**School Name: 360training.com, Inc.**

**Certification #:** WI-73245

**I,** _____

**Certify that the above named person successfully completed an approved Learn2Serve Seller/Server course.**

**COMPLIES WITH WISCONSIN STATUTES 125.04, 125.17,134.66**

learn2 serve

Corporate Headquarters
6801 N Capital of Texas Hwy, Suite 150
Austin, TX 78731
P: 877.881.2235