

# ORIGINAL ALCOHOL BEVERAGE RETAIL LICENSE APPLICATION

Submit to municipal clerk.

For the license period beginning March 13 20 15 :  
 ending June 30 20 15 :

TO THE GOVERNING BODY of the: Lacrosse  
 Town of }  
 Village of }  
 City of }

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

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): Court Above Main 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.

President/Member Debra Lynn Lash Title \_\_\_\_\_ Name \_\_\_\_\_ Home Address 3400 Floral Ln Post Office & Zip Code Lacrosse WI 5460  
 Vice President/Member \_\_\_\_\_  
 Secretary/Member \_\_\_\_\_  
 Treasurer/Member \_\_\_\_\_  
 Agent Andrea Kay Poukey  
 Directors/Managers \_\_\_\_\_

3. Trade Name Court Above Main Business Phone Number 784-6850  
 4. Address of Premises 420 Main Street Post Office & Zip Code Lacrosse WI 54601

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 10/14 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, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) 5,000 sq feet 3rd floor banquet hall  
 10. Legal description (omit if street address is given above): Storage: Kitchen 3rd Floor  
 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?  
 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 a Wisconsin Seller's Permit must be applied for and issued in the same name as that shown in Section 2, above? [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; corporate 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 6th day of February, 20 15  
Mark M Esen  
 (Clerk/Notary Public)

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

[Signature]  
 (Officer of Corporation/Member/Manager of Limited Liability Company/Partner)

My commission expires 6/23/17

(Additional Partner(s)/Member/Manager of Limited Liability Company if Any)

### TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>2/6/15</u>	Date reported to council/board	Date provisional license issued	Signatures of Clerk / Deputy Clerk
Date license granted	Date license issued	License number issued	

Applicant's Wisconsin Seller's Permit Number: <u>456-1028808087-02a</u>	
Federal Employer Identification Number (FEIN): <u>47-2688915</u>	
<b>LICENSE REQUESTED</b>	
TYPE	FEE
Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$ <u>33.36</u>
Class C wine	\$
Class A liquor	\$
<input checked="" type="checkbox"/> Class B liquor	\$ <u>166.68</u>
Reserve Class B liquor	\$
Publication fee	\$ <u>20.00</u>
<b>TOTAL FEE</b>	\$ <u>220.04</u>

## 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 the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

To the governing body of:  Town  Village  City of Lacrosse County of Lacrosse

The undersigned duly authorized officer(s)/members/managers of Court Above Main 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 Court Above Main  
(trade name)

located at 420 Main St

appoints Andrea Kay Poukey  
(name of appointed agent)

1217 Bennett St Lacrosse WI 54601  
(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? 24 years

Place of residence last year Lacrosse

For: Court Above Main LLC  
(name of corporation/organization/limited liability company)

By: [Signature]  
(signature of Officer/Member/Manager)

And: \_\_\_\_\_  
(signature of Officer/Member/Manager)

### ACCEPTANCE BY AGENT

I, Andrea Kay Poukey, 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.

Andrea Kay Poukey 2/6/15 Agent's age \_\_\_\_\_  
(signature of agent) (date)  
1217 Bennett St Date of birth \_\_\_\_\_  
(home address of agent)

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

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

Approved on 2/11/15 by [Signature] Title Police Chief  
(date) (signature of proper local official) (town chair, village president, police chief)

Original: X

Renewal:

Payment Amount: 320.04  
Invoice #:

APPLICATION FOR INDOOR CABARET LICENSE

Legal/Real Name: Court Above Main LLC

Address of above: 420 Main St

Trade name of business: Court Above Main

Address of premises to be licensed: 420 Main St

Business phone number: 784-6850

Detailed description of cabaret area to be licensed: 5,000 sq ft 3rd Floor  
banquet hall

Premises are owned by: DLL Properties LLC

Address of owner: 3400 Floral Ln, Lacrosse WI 54601

Name of Cabaret Manager (FIRST, MIDDLE & LAST): Andrea Kay Poukey

Home address of Cabaret Manager: 1217 Bennett St Lacrosse

Home phone number of Cabaret Manager: 78 397-8162

Daytime phone number of Cabaret Manager: 784-6850

Date of Birth of Cabaret Manager: \_\_\_\_\_

Was the above person listed as manager on last year's application? Yes \_\_\_ No X

Other business to be conducted upon the premises: ~~none~~ banquet hall

Nature of entertainment: bands, DJs, live music

License Period: March 13, 2015 to June 30, 2015

The above hereby makes application for a license to operate an Indoor Cabaret at the above address within the City of La Crosse pursuant to provisions of Chapter 10, Article IV of the Code of Ordinances for the City of La Crosse.

[Signature]  
(Signature of applicant & date)

OFFICE USE ONLY: \_\_\_\_\_ Munis Customer #:

For original applications: Are there lands zoned conservancy, residential or multiple dwelling within 100 feet of premises? Y/N If yes, attach a list of those lands. MAILED 2/10/15

Signature and date \_\_\_\_\_

Granted: \_\_\_\_\_ License #: \_\_\_\_\_



**TERI LEHRKE, WCPC, City Clerk**  
400 LA CROSSE STREET  
LA CROSSE, WISCONSIN 54601  
PHONE (608) 789-7510  
FAX (608) 789-7552  
[www.cityoflacrosse.org](http://www.cityoflacrosse.org)

**NOTICE OF APPLICATION FOR INDOOR CABARET LICENSE  
IN THE CITY OF LA CROSSE**

TO WHOM IT MAY CONCERN:

This is to notify you that the following business has applied for an **Indoor Cabaret** license under Sec. 10-140(c) of the Code of Ordinances of the City of La Crosse to provide live entertainment in a designated indoor area.

**Court Above Main LLC d/b/a Court Above Main  
at 420 Main St., La Crosse, WI 54601**

This application will be considered at the following meetings:

**Judiciary and Administration Committee – Tuesday, March 3<sup>rd</sup>, 2015 at 7:30 p.m.**  
**Common Council Meeting – Thursday, March 12<sup>th</sup>, 2015 at 7:30 p.m.**

All the above meetings are held in the Council Chambers in the City Hall at 400 La Crosse Street, La Crosse, WI.

You are further notified that any person affected may be heard, and may appear in person or by attorney, or may file a letter of objection in the office of the City Clerk.

This notice is given pursuant to the order of the Common Council of the City of La Crosse.

Dated this 10<sup>th</sup> day of February, 2015.

A handwritten signature in cursive script that reads "Teri Lehrke".

Teri Lehrke, WCPC, City Clerk  
City of La Crosse

A handwritten signature in cursive script that reads "Jay Christianson".

Jay Christianson  
License & Election Clerk III

Billing City/State/Zip  
 LA CROSSE WI 54601-4453  
 LA CROSSE WI 54601-3724  
 LA CROSSE WI 54601  
 LA CROSSE WI 54601  
 LA CROSSE WI 54603  
 ALTOONA WI 54720  
 LA CROSSE WI 54601  
 LA CROSSE WI 54601-2301  
 LA CROSSE WI 54601  
 LA CROSSE WI 54601  
 LA CROSSE WI 54601-4015  
 LA CROSSE WI 54601  
 LA CROSSE WI 54601-4022

Billing Address  
 116 5TH AVE S APT A  
 119 19TH ST N  
 121 4TH ST S  
 129 4TH ST S  
 1818 LA FOND AVE  
 2000 N HILLCREST PKY  
 3400 FLORAL LN  
 3638 RAIN TREE PL  
 401 MAIN ST  
 419 MAIN ST  
 422 MAIN ST  
 504 MAIN ST STE 200  
 511 MAIN ST

Owner Name  
 DOERFLINGERS SECOND CENTURY INC  
 2ND & MAIN LLC  
 DALE D BERG  
 PENNY L FASSLER  
 ROBERT & KAY RIEL LIVING TRUST  
 I & B OF LACROSSE LLC  
 DLL PROPERTIES LLC  
 ET AL, MARY JEAN KUSMITH REVOCABLE TRUST THOMAS M MOULD SUSAN ANN MCINTYRE I SCHILLING PROPERTIES LLP  
 NEW STATE BANK OF LA CROSSE  
 MEDDAUGH HOLDINGS LLC  
 CROSSFIRE INCORPORATED  
 MAIN STREET RENAISSANCE INC  
 JAMES T CHERF

Mailing - 2/10/15

*Court Above Main - 100' Buffer - Indoor Cabinet*

