



Streatery Extension of Premises

Fee: Waived

(Agenda Item Number)

(Legistar file number)

(License number)

(Alder District #) (Police Sector)

Office Use Only

Class A: Beer, Liquor, Cider

Class B: Beer, Liquor,

Class C Wine

City of Madison Clerk

210 MLK Jr Blvd, Room 103

Madison, WI 53703

licensing@cityofmadison.com

608-266-4601

Streatery extension of premises is available for existing licensed premises only. Extensions will not be granted for vertical drinking or beer garden additions. Application must be submitted to the Clerk's office. Staff will review the application and if it is complete and approved by Zoning and/or the street vending coordinator, provisionally approve and forward to the Alcohol License Review Committee for final approval recommendation. Any licensed establishment applying to extend their premises onto City property must provide a certificate of insurance for liquor liability including a separate additional insured endorsement naming the City of Madison with this application.

Are you requesting this temporary extension of licensed premises, in compliance with Emergency Order Resolution Legistar #60695 (Madison Streatery Program), adopted by the Common Council on June 16, 2020?: Yes No

Required detailed floor plans of extension area **included**: Yes

Required approval of expanded eating area obtained from Street Vending Coordinator or Zoning Administrator **included**: Yes, date approved: _____

Street Occupancy Permit obtained from Traffic Engineering: Yes No N/A

Does lease/deed cover area request for temporary extension?: Yes No

If no, **must attach** letter from landlord or property owner authorizing use of the property.

Licensed Premises Information

This application modifies existing alcohol license number: _____

Business dba Name: _____

Licensed Address: _____

Liquor/Beer Agent Name: _____

_____% Alcohol, ____% Food, ____% Other Alder, District #: _____ Police Sector: _____

Corporate Information

Business Legal Name (as on WI State Sellers Permit): _____

Business Mailing Address: _____

Business Contact Name, Position: _____

Business Phone: _____ Business Email: _____

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Extension Details

Current Capacity (indoor): _____

Current Capacity (outdoor): _____

Proposed Capacity (outdoor): _____

Description of Proposed Changes: _____

Signature

Authorized Signature of Agent or Establishment Owner

Date

Clerk's Office checklist for complete applications

- Floor Plans
- Copy of approval from Street Vending/Zoning
- Copy of Street Occupancy Permit included *if applicable*
- Letter from landlord/property owner authorizing temporary extension of lease area *if applicable*
- Certificate of Insurance for liquor liability with City of Madison named *if extending on city property*

Upon Application Submission, the Clerk's Office issued to the application:

- Orange sign Orange business card
- "License Renewals & Changes" brochure with next steps issued