Menasha

June 11, 2009

To: Common Council

From: Debbie Galeazzi, Clerk Deb

Subject: Mario Nunez, 14 Tayco Street

A Class "B" and Class C application to deal in fermented malt beverages and wine for the 2009-2010 licensing year has been filed by Mario Nunez for the premises at 14 Tayco Street.

The Police Dept. has done a background check on Mr. Nunez and has no reason to deny a license based on their findings. The Fire Dept., Health Dept., and Building Inspectors have inspected the property and find the property is in compliances with City codes.

Mr. Nunez told me he will have all utilities and taxes current as of June 15. I will report to the Council on Monday if all financial obligations to the City have been paid.

140 Main Street • Menasha, Wisconsin 54952-3151 • Phone (920) 967-3603 • Fax (920) 967-5273
www.cityofmenasha-wi.gov

ORIGINAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk.

For the license period beginning July 1 2009 ;
ending June 30 2010

TO THE GOVERNING BODY of the: ☐ Town of ☐ Village of ☑ City of } Menasha

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

Applicant's Wisconsin Seller's Permit Number:	
Federal Employer Identification Number (FEIN):	
LICENSE REQUESTED ▶	
TYPE	**FEE**
☐ Class A beer	$
☑ Class B beer	$ 100.00
☐ Wholesale beer	$
☑ Class C wine	$ 100.00 ~~75.00~~
☐ Class A liquor	$
☐ Class B liquor	$
☐ Reserve Class B liquor	$
Publication fee	$ 50.00
TOTAL FEE	$

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): ▶ Mario Nunez

   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	Owner	Mario Nuñez	14 Tayco St.	54952
Vice President/Member				
Secretary/Member				
Treasurer/Member				
Agent ▶				
Directors/Managers				

3. Trade Name ▶ Mi Casa Mexican Grill Business Phone Number (920) 720-3600
4. Address of Premises ▶ 14 Tayco St Post Office & Zip Code ▶ Menasha 54952
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 _____ and date _____ 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.) First Floor
10. Legal description (omit if street address is given above): 14 Tayco St. Menasha
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? El Jaripeo Mexican Restaurant
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. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☑ 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 13th day of May, 2009

Deborah A. Galeazzi
(Clerk/Notary Public)

My commission expires 8/5/2012

Mario A Nunez
(Officer of Corporation/Member/Manager of Limited Liability Company /Partner/Individual)

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

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

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk 5/13/09	Date reported to council/board	Date provisional license issued	Signature of Clerk / Deputy Clerk
Date license granted	Date license issued	License number issued	

AUXILIARY QUESTIONNAIRE
ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk.

INDIVIDUAL'S FULL NAME (Please Print) (Last Name)	(First Name)	(Middle Name)	SOCIAL SECURITY NUMBER
Nunez	Mario	A	[redacted]
HOME ADDRESS (Street/Route)	POST OFFICE	STATE	ZIP CODE
14 Tayco St. B		WI	54952
HOME PHONE NUMBER	AGE	DATE OF BIRTH	PLACE OF BIRTH
(920) 720-3600	[redacted]	[redacted]	Mexico

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.

☐ _____ of _____
(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? 18 years.
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 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 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.) _____
(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 license, brewery permit or wholesale liquor 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	Employed To
Valley Packaging	Loemer Rd. Appleton	May-26-06	Present

The undersigned, being first duly sworn on oath, deposes and says 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.

Subscribed and sworn to before me

this 13TH day of May, 2009

Deborah A. Galeazzi
(CLERK/NOTARY PUBLIC)

My commission expires 8/5/2012

Mario A. Nunez
(SIGNATURE OF NAMED INDIVIDUAL)

AT-103 (R. 01-01)

Printed on Recycled Paper
Wisconsin Department of Revenue

Menasha

City of Menasha • Department of Community Development

To: Debbie Galeazzi
From: Building Inspection Department
Date: 6-8-09

RE: Liquor License Inspection

Address: 14 TAYCO

The premise at the above address has been inspected for compliance with State and Local Building Codes and found to be:

✓ **COMPLIANT**

____ **NON – COMPLIANT**
Recommend delaying license approval until all Violations are corrected.

Respectfully submitted

Dan Coffey

City of Menasha Building Inspector

City of Menasha Building Inspector

140 Main Street • Menasha, Wisconsin 54952-3190 • (920) 967-5103 • Fax (920) 967-5272

Menasha

Date: June 10, 2009

To: City of Menasha Common Council

From: Todd Drew, R.S. – Sanitarian
City of Menasha Health Department

Re: Liquor License Applications – N.P. Mart and Mi Casa Mexican Grill

An inspection was conducted at the N.P. Mart and Mi Casa Mexican Grill which submitted a liquor license application for the July 1, 2009 - June 30, 2010 license year.

The health inspection conducted in these establishments included standard sanitation, equipment condition, food safety, plumbing, employee hygiene, toilet and hand washing facilities, insect and rodent control and general condition using Wisconsin Administrative Code and the Wisconsin Food Code (Food Establishment Code) as a basis for inspection procedures.

The inspections conducted in these establishments did not cite any health violations which would necessitate a recommendation to hold either of the liquor license applications. Non-critical violations were cited at the N.P. Mart which will be addressed with the Owner and a re-inspection will be conducted to ensure compliance within 7 days.

If you should have any questions regarding this information, please do not hesitate to contact me.

316 Racine Street • Menasha, Wisconsin 54952-2337 • Phone (920) 967-3520 • Fax (920) 967-5247
www.cityofmenasha-wi.gov

Memorandum

TO: Debbie Galeazzi, City of Menasha Clerk

FROM: Assistant Chief/Fire Marshal Al Auxier

DATE: June 10, 2009

RE: Liquor License for El Jaripeo #2 Restaurant, 14 Tayco Street &
Liquor License for the Marathon Station, 209 Racine Street

Neenah-Menasha Fire Rescue, NMFR, did Liquor License inspections of both the 14 Tayco Street and 209 Racine Street properties and did find fire violations but none that would prevent the approval of the Liquor License for both locations. Therefore, NMFR would recommend approval of the Liquor License for these properties.

Call or email me with any questions or concerns.

Al Auxier
Assistant Chief/Fire Marshal
Neenah-Menasha Fire Rescue
aauxier@nmfire.org
(920)886-6203, office
(920)209-9509, cell

El jaripeo 2 Mexican restaurant

May 28 ,2009

Ms Deborah a galeazzi
City of Menasha
140 main street
Menasha, wi 54952

Re license for beer and wine coolers

Please accept this as notice that el jaripeo 2llp does wish to surrender its license to sell beer and wine coolers products at the location known as el jaripeo 2 with an address of 14 tayco st surrender of this license will be effective on or before june 30,2009

Oscar Sandoval and Antonio Sandoval
Owner
Oa partnership