



11333 N. Cedarburg Road
Mequon, WI 53092
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www.ci.mequon.wi.us

Office of the City Administrator

FINANCE-PERSONNEL COMMITTEE

Special Meeting

Wednesday, August 28, 2024

5:55 PM

North Conference Room

Agenda

- 1) Call to Order, Roll Call
- 2) License applications
Action requested: review and approve
 - a. License Approval for Taste of Mequon
- 3) Adjourn

Dated: August 28, 2024

/s/ Andrew Nerbun, Chair

Notice is hereby given that a quorum of other governmental bodies may be present at this meeting to present, discuss and/or gather information about a subject over which they have decision-making responsibility, although they will not take formal action thereto at this meeting.

Persons with disabilities requiring accommodations for attendance at this meeting should contact the City Clerk's Office at 262-236-2914, twenty-four (24) hours in advance of the meeting.

Any questions regarding this agenda may be directed to the City Administrator's Office at 262-236-2941, Monday through Friday, 8:00 AM – 4:30 PM



11333 N. Cedarburg Road
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Office of City Clerk

TO: Finance-Personnel Committee
FROM: Caroline Fochs, City Clerk
DATE: August 22, 2024
SUBJECT: License Approval for Taste of Mequon

Following are recommended approvals:

Class B Beer and Class C Wine License - New for Taste of Mequon only on September 7, 2024

Barree LLC
DBA Daily Taco
105 W. Main Street
Thiensville, WI 53092
Agent: Barkha Daily

Following are recommended denials:

None.

Attachments:
8.28.24 Daily Taco for Taste (PDF)

Form
AB-200Alcohol Beverage License
Application

For Municipal Use Only	
Municipality	Mequon
License Period	September 7, 2024 only

License(s) Requested: (up to two boxes may be checked)

- ☐ Class "A" Beer \$ _____ ☒ Class "B" Beer \$ 50
☐ "Class A" Liquor \$ _____ ☒ "Class B" Liquor \$ 85
☐ "Class A" Liquor (cider only) \$ _____ ☐ Reserve "Class B" Liquor \$ _____
☒ "Class C" Liquor (wine only) \$ X-85

Fees	
License Fees	\$ 135
Background Check Fee	\$
Publication Fee	\$ 20
Total Fees	\$ 155

Part A: Premises/Business Information

1. Legal Business Name (Individual name if sole proprietorship) <u>BAARRE LLC</u>			
2. Business Trade Name or DBA <u>DAILY TACO</u>			
3. FEIN <u>86-2802037</u>		4. Wisconsin Seller's Permit Number <u>456-1030722300-04</u>	
5. Entity Type (check one) ☐ Sole Proprietor ☒ Partnership ☐ Limited Liability Company ☐ Corporation ☐ Nonprofit Organization			
6. State of Organization <u>WISCONSIN</u>		7. Date of Organization <u>4/23/2018</u>	
8. Wisconsin DFI Registration Number			
9. Premises Address <u>105 S MAIN ST</u>			
10. City <u>THIRSVILLE</u>		11. State <u>WI</u>	12. Zip Code <u>53092</u>
13. County <u>OSHAUKREE</u>	14. Governing Municipality: ☐ City ☐ Town ☒ Village of: <u>THIRSVILLE</u>		15. Aldermanic District
16. Premises Phone <u>762-242-8230</u>	17. Premises Email <u>[REDACTED]</u>		18. Website <u>WWW.BAARRE.COM</u>
19. Premises Description - Describe the building or buildings where alcohol beverages are produced, sold, stored, or consumed, and related records are kept. Describe all rooms within the building, including living quarters. Authorized alcohol beverage activities and storage of records may occur only on the premises described in this application. Attach a map or diagram and additional sheets if necessary. Mequon Civic Campus: Cedarburg Road between the Weyenberg Library to the north and City Hall to the south and that portion of the Cedarburg Road right-of-way which is closed to vehicular traffic on the day of the event.			
20. Mailing Address (if different from premises address) <u>107 Bunker Ave</u>			
21. City <u>THIRSVILLE</u>		22. State <u>WI</u>	23. Zip Code <u>53092</u>

Part B: Questions

1. Has the business (sole proprietorship, partnership, limited liability company, or corporation) been convicted of violating federal or state laws or local ordinances? Exclude traffic offenses unless related to alcohol beverages. ☐ Yes ☒ No If yes, list the details of violation below. Attach additional sheets if necessary.		
Law/Ordinance Violated	Location	Trial Date
Penalty Imposed		Was sentence completed? ☐ Yes ☐ No
Law/Ordinance Violated	Location	Trial Date
Penalty Imposed		Was sentence completed? ☐ Yes ☐ No

Attachment: 8.28.24 Daily Taco for Taste (9620 : License for Taste of Mequon)

2. Are charges for any offenses pending against the business? Exclude traffic offenses unless related to alcohol or beverages. ☐ Yes ☒ No If yes, describe the nature and status of pending charges using the space below. Attach additional sheets as needed.			
3. Is the applicant business or any of its officers, directors, members, agent, employees, owners, or other related individuals or entities a restricted investor with any interest in an alcohol beverage producer or distributor? ☐ Yes ☒ No If yes, provide the name of the restricted investor and describe the nature of the interest.			
4. Is the applicant business owned by another business entity? ☐ Yes ☒ No If yes, provide the name(s) and FEIN(s) of the business entity owners below. Attach additional sheets as needed.			
4a. Name of Business Entity		4b. Business Entity FEIN	
5. Have the partners, agent, or sole proprietor satisfied the responsible beverage server training requirement for this license period? Submit proof of completion. ☐ Yes ☒ No			
6. Is the applicant business indebted to any wholesaler beyond 15 days for beer or 30 days for liquor/wine? ☐ Yes ☒ No			
7. Does the applicant business owe past due municipal property taxes, assessments, or other fees? ☐ Yes ☒ No			
Part C: Individual Information			
List the name, title, and phone number for each person or entity holding the following positions in the applicant business or businesses listed in Part B, Question 4: sole proprietor, all officers, directors, and agent of a corporation or nonprofit organization, all partners of a partnership, and all members, managers, and agent of a limited liability company. Attach additional sheets if necessary.			
Include Form AB-100 for each person listed below. Corporations and LLCs must appoint an agent by including Form AB-101.			
Last Name	First Name	Title	Phone
DAILY	BARKHA	OWNER	[REDACTED]
BURROSSER	MATTHEW	OWNER	[REDACTED]
Part D: Attestation			
One of the following must sign and attest to this application: • sole proprietor • one general partner of a partnership • one corporate officer • one member of an LLC			
READ CAREFULLY BEFORE SIGNING: Under penalty of law, I have answered each of the above questions completely and truthfully. I agree that I am acting solely on behalf of the applicant business and not on behalf of any other individual or entity seeking the license. Further, I agree that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another individual or entity. I agree to operate this business according to the law, including but not limited to, purchasing alcohol beverages from state authorized wholesalers. I understand that lack of access to any portion of a licensed premises during inspection will be deemed a refusal to allow inspection. Such refusal is a misdemeanor and grounds for revocation of this license. I understand that any license issued contrary to Wis. Stat. Chapter 125 shall be void under penalty of state law. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.			
Last Name	First Name	M.I.	
BURROSSER	MATTHEW	N	
Title	Email	Phone	
OWNER	[REDACTED]	[REDACTED]	
Signature	Date		
[Signature]	8.12.24		
Part E: For Clerk Use Only			
Date Application Was Filed With Clerk	License Number	Date License Granted	Date License Issued
Signature of Clerk/Deputy Clerk		Date Provisional License Issued (if applicable)	