



07/05/2022

**ALC-22-186**

Alcohol Beverage Retail License Application

**Status:** Active**Date Created:** Jun 15, 2022**Applicant**

Anthony Bugarino  
 tonyb@battagliafoods.com  
 104 S. Main Street  
 Thiensville, WI 53092  
 9203231364

**Location**

5832 W LINCOLN AVE  
 West Allis, WI 53219


**Business Information**

**Federal Employer Identification No. (FEIN).** If a "?" or "not shown" appears in the box, please delete it and enter your FEIN Number.  
 882732441

**Type of Organization**

LLC

**Upload Your WI Business Tax Registration Certificate Document**

 Wiscosin Businees Tax registration.pdf  
 Uploaded by Anthony Bugarino on Jun 15, 2022 at 6:55 pm

**WI Business Tax Registration Certificate # (a.k.a. Seller's Permit #)**

456-1031102812-04

**WI Business Tax Registration Certificate # Expiration Date.** If a "?" appears in the box, please delete it and enter the expiration date.

None

**Legal Name (corporation, limited liability company, or partnership)**

2 Plus 2 Success

**DBA/Trade/Business Name**

1 2 3 Buck Bar

**Business Address (License Location)**

5832 W Lincoln Ave

**Business City**

West Allis

**Business State**

Wisconsin

**Business Zip Code**

53219

**Business Phone Number**

414-8820100

**I am the only officer or member of the organization.**



**If you are the ONLY officer or member of the organization, you do not need to fill out the additional partner, member, or officer information. If your organization is a partnership or has more than one member/officer, you MUST fill out the additional partner, member, or officer information. Failure to do so will result in your application not being processed.**

**What is the total number of members, officers or partners in your legal entity? Include the agent in the number.**

1

**5a. Was this premises licensed for the sale of liquor or beer during the past license year?**

No

**6a. Is individual, partners or agent of corporation/limited liability company subject to completion of the responsible beverage server training course for this license period? If you are currently the agent, please choose "No"**

No

**7. Is the applicant an employee or agent of, or acting on behalf of anyone except the named applicant?**

No

**8a. Does any other alcohol beverage retail licensee or wholesale permittee have any interest in or control of this business?**

No


**9. State of Incorporation for Corp/LLC applicants: (if sole proprietor enter - not applicable)**

Wisconsin

**9a. Date of Incorporation:**

06/10/2022

**Upload Articles of Incorporation**

 ein 882731441.pdf

Uploaded by Anthony Burgarino on Jun 15, 2022 at 7:55 pm

**9b. Is applicant corporation/limited liability company a subsidiary of any other corporation or limited liability company? (If sole proprietor choose - Not applicable)**

Yes

**9b. If yes, describe.**

LLC

**9c. 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?**

No

**10. Does the applicant understand they must register as a Retail Beverage Alcohol Dealer with the federal government, Alcohol and Tobacco Tax and Trade Bureau (TTB) by filing (TTB form 5630.5d) before beginning business? [phone 1-877-882-3277]**

Yes

**11. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776]**

Yes

**12. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs?**

Yes

#### 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 signer. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000. Signer agrees 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, or one member of a partnership applicant must sign; one corporate officer, one member/manager 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.

#### Contact Person's Full Name

Anthony James Burgatino

#### Title/Member

Owner

#### Digital Signature

Anthony James Burgarino  
06/15/2022

#### Phone Number

414-882-0100

#### Email Address

tonyb@battagliafoods.com

#### Application Information

##### New or Renewal

New

**Due to filing your renewal application late, you will need a Provisional Liquor License since the next agenda your license can be on is August 2, 2022.**

**If you are applying for a liquor store that will sell beer, and wine and/or liquor, choose Class A Beer and Class A Liquor; choose Class B Tavern for sale of beer, wine and liquor at a bar or restaurant.**

#### License Type

Class B Tavern

#### Class B Applicants

**Is another business type of business conducted at the premises?**

No

No Class B license may be granted for any premises where any other business is conducted in connection with the premises. This restriction

•hotels • restaurants • combination grocery stores & taverns • combination sporting goods stores & taverns in towns, villages & 4th

does not apply if the Class B licensed premises is connected to premises where other business is conducted by a secondary doorway that serves as a safety exit and is not the primary entrance to the Class B premises. These restrictions do not apply to:

*class cities • combination novelty stores & taverns • bowling centers or recreation premises • a club, society or lodge that has been in existence for 6 months or more prior to the date of filing application for the Class "B" license • movie theaters • painting studio as defined in sec. 125.02(11m).*

**No, your application may not be approved.**

#### Applicant / License Agent Information

**Agent's Full Name**

Anthony James Burgarino

**Mailing Address**

104 S. Main Street

**Mailing City**

Thiensville

**Mailing State**

Wisconsin

**Mailing Zip Code**

53092

**County**

Ozaukee

**Phone Number**

414-882-0100

**E-Mail Address**

tonyb@battagliafoods.com

**Upload Driver's License**

**There are additional people who need background reviews. Scroll down to find this information.**

**AGENT'S AUXILIARY QUESTIONNAIRE**

**The above named individual provides the following information as a person who is (check one):**

**An officer/director/member/manager/agent of the corporation, limited liability company or non-profit organization?**



**List position in organization (officer, member, manager, agent)**

Manager

**List Name of Corporation, Limited Liability Company or Non-profit Organization**

2 Plus 2 Success

*Which is making application for an alcohol beverage license.*

*The above named individual provides the following information to the licensing authority:*

**ng have you continuously resided in Wisconsin prior to this date?**

**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 county or municipality?**

No

**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 county or municipality?**

No

**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?**

No

**Do you hold and/or are you an officer, director, stockholder, agent or employee of any person or corporation or member/manager/agent of a limited liability company holding or applying for a wholesale beer permit, brewery/winery permit or wholesale liquor, manufacturer or rectifier permit in the State of Wisconsin?**

No

**6. Employment Information.****Are you self-employed?**

No

**6a. Most Recent Employers**

<b>Most recent employer name</b> Accurate Basement Repair	<b>Most recent employer address</b> 3125 Allerton
<b>Most recently employed from:</b> 07/01/2021	<b>Most recently employed to:</b> 06/15/2022

**READ CAREFULLY BEFORE SIGNING:** Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees 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. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Anthony James Burgarino  
06/16/2022

**Police Department Review of Agent****DL**

Valid

**Check here if there are not any Local Violations****Clerk Administration Review of Agent****WORCS Notes**

NEW LL Applicant

**Okay to Issue?**

No

**Needs Admin/Clerk Review?**

Yes

**Clerk Review - Grant or Schedule LH Hearing**

Schedule LH Hearing

**Premises Description****Enter the Business Name in the search bar.****Please list where the alcohol will be stored, sold/consumed and where the receipts are kept.****Describe the building or buildings where alcohol beverages are to be sold and stored. You must include all rooms including living quarters, if used, for the sales, services, consumption, storage of alcohol beverages and records.****(Alcoholic beverages may be sold and stored only on the premises described.)****Premise Description**

Single story building with basement and a courtyard

**If Mailing Address Is Different****Business Mailing Address**

104 S Main St

**Business Mailing City**

Thiensville

**Business Mailing State**

Wisconsin

**Business Mailing Zip Code**

53092

**Schedule for Appointment of Agent by Corporation / Nonprofit Organization or Limited Liability Company****Enter the Business Name in the search bar.**

**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 an officer of the corporation/organization or one member/manager of a limited liability company and the recommendation made by the proper local official.**

**The undersigned duly authorized officer/member/manager of: (enter registered name of corporation/organization or limited liability company)**

2 Plus 2 Success

**a corporation/organization or limited liability company making application for an alcohol beverage license for a premises known as (enter business name)**

1 2 3 Buck Bar

**located at (enter address of business premises)**

5832 W Lincoln Ave

**appoints (enter name of appointed agent)**

Anthony Bugarino

**enter home address of appointed agent**

104 S Main St

*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?**

No

**Is applicant agent subject to completion of the responsible beverage server training course?**

No

**How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin?**

32 years

**Place of residence last year:**

Thiensville

**For: (enter name of corporation/organization/limited liability company)**

2 Plus 2 Success

**Digital Signature of Officer/Member/Manager)**

Anthony Bugarino

06/15/2022

Any person who knowingly provides materially false information in an application for a license may be required to forfeit not more than \$1,000.

hereby accept this appointment as agent for the 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.

**Acceptance by Agent****I (type in agent's name),**

Anthony Bugarino

**Digital Signature of Agent**

Anthony Bugarino

06/15/2022

**Current Date**

06/15/2022

**Plan of Operation****Are you also applying for a public entertainment premises license at this time?**

No

**For renewal applicants only, please review the types of entertainment which are currently on your Liquor License.****Are There Any Changes to your Current Entertainment Types?**

No

Please check all the days you will be in operation and the hours of operation for that day. If you will be closed on a certain day, type **"CLOSED"**.**Tuesday Open - Close Times**

8:00AM-12:00AM

**Thursday Open - Close Times**

8:00AM-12:00AM

**Saturday Open - Close Times**

8:00AM-2:30AM

**Sunday Open - Close Times**

8:00AM-12:00AM

**Monday Open - Close Times**

8:00AM-12:00AM

**Wednesday Open - Close Times**

8:00AM-12:00AM

**Friday Open - Close Times**

8:00AM-2:30AM

***If you do not currently have a designated capacity occupancy load) and posted sign, please contact the Fire Department to apply for one.*****What is the legal capacity (occupancy load) of the premises?**

50

**JENNY/GINA - RE-ENTER CAPACITY # HERE**

26-75

**Is the premises less than 300 feet from a school, hospital or church?**

No

**Are you also applying for a cigarette and/or nicotine products retailer license at this time?**

No

***You must answer yes to questions #2-8 in order to apply for this license.*****Types of Business that are planned or currently conducted on the premises (check all that apply)****Lounge/Tavern/Bar**

Percentage of sales related to the types of business listed above, if none enter " 0". Must equal 100%.

**Alcohol %**

0

**Food %**

0

**Entertainment %**

0

**Gas %**

0

**Cigarettes %**

0

**Other %**

0

**Total % of Sales**

0

**Security Plans****Describe the security provisions for parking and loading zones:**

Cameras

**Number of Security Personnel (list by day if number varies)**

0

**Security Personnel Responsibilities and Equipment Used**

0

**Location of Inside and Outside Security Cameras**

4

**Litter and Noise****Name of solid waste removal contractor.**

E &amp; K

**How will the exterior trash/littering be addressed?**

Professionally

**How will noise issues be addressed?**

Quietly/ Management

**Floor Plan - Must be submitted with the application.**

The detailed floor plan must include: 1) detailed description outlining the areas of the building where public entertainment will be provided (stages, rooms, etc. must be labelled.) 2) Square feet and dimensions of the premises to be licensed. 3) Location of all entrances and exits, seating areas, bars, waiting license, security search areas, stages, rooms, food preparation areas, etc.) 4) North Point 5) Date 6) Address and Name of Applicant

**Upload Floor Plan**

Untitled.jpg 5832.jpg

Uploaded by Anthony Bugarino on Jun 15, 2022 at 7:44 pm

**Acceptance & Signature**

1. I agree to inform the City Clerk within 10 days of any substantial changes in the information supplied in this application.



2. I understand that after the license is issued, a change to the plan of operation and/or floor plan, will require approval from the Common Council.



3. I agree to comply with the plan of operation and floor plan approved as part of this application.



4. I understand that if this license is not used for a period of 30 days or more, it is subject to revocation.



5. Each licensed premises shall always be conducted in an orderly manner, and no disorderly, riotous, or indecent conduct shall be allowed at any time on any licensed premises.



6. I understand that the issuance of the license thereby consents to the entry of police or other duly authorized representatives of the City at all reasonable hours for the purpose of inspection and search, and consents to the removal from said premises of all things and articles there had in violation of City ordinances or State laws.



7. I understand that I may not sell, dispense, or serve alcohol beverages by means of a drive-through facility. In this section, "drive-through facility" means any vehicle related commercial facility in which a service is provided, or goods, food or beverages are sold, served, or dispensed to an operator or passengers of a vehicle without the necessity of the operator or passengers disembarking from the vehicle.



8. I understand that the license holder, and/or the employees and agents of the license holder, shall cooperate with police investigations of disturbances, intoxicated persons, underage persons and other violations of City and state laws. "Cooperate," as used in this subsection, shall mean calling the police when a disturbance of the peace or other violation occurs on the licensed premises and providing complete and truthful responses to police inquiries. A license holder shall also appear before the License and Health Committee when requested.



9. I have knowledge of Wisconsin Statutes and City Ordinances currently regulating alcohol beverage licenses and understand that the license may be subject to suspension, non-renewal, or revocation, if I violate any rule, law, or regulation of the City of West Allis and/or State of Wisconsin.



10. I understand that the information submitted to the City by any applicant or licensee pertaining to an alcohol beverage license shall be true. Any person who submits in writing any untrue statement to the City in connection with any such license or application shall forfeit not more than five hundred dollars (\$500) together with the costs of prosecution, and in default shall be imprisoned in the Milwaukee County House of Correction for the maximum number of days set forth in Section 800.095(1)(b) of the Wisconsin Statutes. In addition, any license granted shall be subject to revocation and no alcohol beverage license of any kind whatsoever shall thereafter be granted to such person for a period of one year from the date of such revocation.



#### READ CAREFULLY BEFORE SIGNING:

To the best of my knowledge and belief, all statements and answers in this application are complete and true. I understand that if I provide false or fraudulent information on this application, the application will be denied.

#### Digital Signature (Individual, Partner, Member, Officer or Agent)

Anthony Burgarino

06/15/2022

**Failure to submit the required fee will result in your application not being processed. You will receive an email with the link to pay the fee after you submit this application.**

#### Check for Outstanding Personal Property Taxes

**Are there any outstanding Personal Property Taxes?**

No

**Ok to Proceed?**

Yes

#### Notes

New property owner; new account

**Complete these two fields once outstanding PP taxes have been paid.**

#### LH/CC Action

**Don't complete step until the time the notice should be sent.**

**License and Health Date**

07/12/2022

**License and Health Time**

7:00 pm

**Meeting Room**

Room 128

**Common Council Date**

07/12/2022

**List types of entertainment approved.**

Jukebox & Amusement Machines

#### Legal Notice Publication Information

**Publication Date**

06/24/2022

**Sent for Publishing On**

06/17/2022

**for the sale of**

Fermented Malt Beverages and Intoxicating Liquor

#### LATE RENEWALS NEEDING PROVISIONAL LICENSE

**This applies to renewals submitted AFTER June 13, 2022.**

**Issued On**

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**Expires 60 Day From Issuance**

**Clerk's Office Ready to Issue**
















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**Attachments**

No attachments

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## Timeline

Label	Status	Activated	Completed	Assignee
 Fee Payment	Paid	Jun 15, 2022 at 7:57 pm	Jun 15, 2022 at 8:02 pm	-
 Health Inspection	Complete	-	Jun 16, 2022 at 3:42 pm	-
 Clerk's Office Application Review For Completion and Accuracy	Complete	Jun 15, 2022 at 8:02 pm	Jun 16, 2022 at 3:52 pm	Gina Gresch
 Dispatch	Complete	Jun 16, 2022 at 3:52 pm	Jun 16, 2022 at 3:55 pm	Police Amber Alert (
 Regular Notice to Appear	Issued	Jun 16, 2022 at 4:25 pm	Jun 16, 2022 at 4:25 pm	Gina Gresch
 Police Background	Complete	Jun 16, 2022 at 3:52 pm	Jun 16, 2022 at 4:29 pm	Lisa Bergmann
 Clerk Review After Background Completed	Complete	-	Jun 16, 2022 at 4:48 pm	Gina Gresch
 Check for Outstanding Personal Property Taxes	Complete	Jun 16, 2022 at 3:52 pm	Jun 16, 2022 at 4:49 pm	Kris Palmer
 Regular Notice to Appear	Issued	Jun 16, 2022 at 4:56 pm	Jun 16, 2022 at 4:56 pm	Gina Gresch
 Initial Notification for Departments of Completed Application Received	Complete	Jun 16, 2022 at 4:49 pm	Jun 16, 2022 at 5:03 pm	-
 Admin/Clerk Review Records/Violations	Complete	Jun 16, 2022 at 5:03 pm	Jun 16, 2022 at 5:05 pm	Rebecca Grill
 Clerk Generate Legal Notice for Publication	Issued	Jun 16, 2022 at 5:05 pm	Jun 16, 2022 at 5:05 pm	-
 Zoning Review	Complete	Jun 16, 2022 at 5:05 pm	Jun 20, 2022 at 11:56 am	Planning & Zoning

Label		Status	Activated	Completed	Assignee
	Occupancy Permit/Code Enforcement Review	Active	Jun 16, 2022 at 5:05 pm	-	Mike Romens