

**AGENDA ITEM EXECUTIVE SUMMARY**

Agenda Item number: 4

Title:

Recommendation to approve a proposal for a new class C1 liquor license including a 1:00 am late night permit for VVAAMA Inc., dba Global Brew Tap House located at 2100 Prairie St., St. Charles

Presenter:

Police Chief James Keegan

Meeting: Liquor Control Commission

Date: September 16, 2019

Proposed Cost: \$

Budgeted Amount: \$

Not Budgeted: **Executive Summary** *(if not budgeted please explain):*

This is a new liquor license request for the new owners of the existing Global Brew Tap House, located at 2100 Prairie St. in St. Charles.

Global Brew Tap House is currently closed during the transition and the new owners plan to open mid-October of 2019. They also plan on adding in a commercial kitchen in the near future for food to be available for sale to patrons.

The applicants own and operate the Schaumburg location for Global Brew and have been in the business for over 10 years.

Attachments *(please list):*

Summary, Floor Plan, Liquor License

Recommendation/Suggested Action *(briefly explain):*

Recommendation to approve a proposal for a new class C2 liquor license including a 1:00 am late night permit for VVAAMA Inc., dba Global Brew Tap House located at 2100 Prairie St., St. Charles



Memo

Date: 9/11/2019

To: The Honorable Ray Rogina, Mayor-Liquor Commissioner

From: James Keegan, Chief of Police *J. Keegan*

Re: Background Investigation-2100 Prairie Street (Class C) Global Brew Tap House

The purpose of this memorandum is to document and forward to your attention the results of the background investigation conducted by members of the St. Charles Police Department concerning the above mentioned establishment.

Global Brew Tap House recently closed and was acquired by the Schaumburg franchise ownership group. This group is seeking approval to operate status quo, with hopes of installing a commercial kitchen in 2020 and offering food. The applicants are currently applying for C license with bar snacks only and are requesting a 1:00 a.m. late night permit.

The application materials were reviewed by my staff. We determined that two of the owners were cited for underage sales dating back to 2015 in both Geneva and Schaumburg respectfully. Both police departments were contacted and we determined that aside from the underage sales, both businesses were well run with little or no police activity.

We recommend the applicants moving forward with an on-site consumption license, subject to City Council approval with the following contingencies:

- The liquor license would be contingent upon proof of a valid certificate of insurance and an updated floor plan, menu and business plan.
- Although the franchisee has initiated the application process, a local manager and staff has not been hired. Therefore, the entire liquor licensing process has yet to be completely vetted. Once those selections are made, a liquor license will be contingent upon successful completion of the entire background investigation process.

I am recommending a liquor license subject to the above mentioned contingencies. Thank you in advance for your consideration in this matter.



Memo

Date: 08/15/19
To: Chief Keegan
From: Commander Pierce
Re: Liquor License Background, VVAAMA (DBA Global Brew Tap House).

The purpose of this memo is to outline steps taken during the background investigation for a liquor license application. This investigation was done based on the application submitted for Class C-1 for the business, Global Brew Tap House. This business is to be located at 2100 Prairie Street.

Applicants:

Thakkak, Bhavik P.

Parekh, Bhavini K.

Patel, Jesal.



Application:

The application was received on or around 08/07/19. The application appears to be almost complete, including a copy of a potential lease, Certificate of Insurance, and a floor plan. The two items that are missing are the business plan and menu. Thakkak has been contacted several times for this and has not turned them in.

Thakkak, Parekh, and Patel all hold valid BASSET Certifications which are included in the application.

Records Checks:

All three applicants were fingerprinted. Responses from both the FBI and Illinois Bureau of Identification show nothing that would cause the license to be denied.

A check of St. Charles and Kane County records showed no contacts for all three.

Thakkak advised that in the past 14 years he has lived at the listed Elgin address. Checking with Elgin police department no contacts of concern were found.



Parekh advised that for over 10 years she has lived in Elgin and has lived at the above address for 2 years. Checking with Elgin police department no contacts were found.

Patel advised that in the past 11 years he has lived at the above Streamwood address. Checking with both police departments found no contacts of concern.

A check of the Illinois Liquor Control Commission showed no active license for Vvaama Inc.. It did show that all three were active under the liquor license for Global Brew Schaumburg. No record of license revocation for the Schaumburg location was indicated.

A check of TLO and I-Clear (law enforcement databases) showed the information concerning identity of all three to be accurate and no areas of concern were noted.

A check of the Illinois Secretary of State showed Vvaama Inc. to be in good standing.

INTERVIEW WITH APPLICANT:

On 09/16/19 at approximately 9:00am, I met with Thakkak at the police department front desk. Thakkak advised that he and his partners, Parekh and Patel have recently purchased the Global Brew Tap House on Prairie Street. The Global Brew St. Charles was previously opened in 2016, but has since closed. Thakkak said the three currently operate the Global Brew in Schaumburg, Illinois. Global Brew is a franchise with four locations in Illinois. Thakkak said Patel, Parekh, and he opened the Schaumburg location approximately six months ago.

Thakkak is a banker by trade and learned about Global Brew in 2016 when he processed the business loan for the original owner of the St. Charles Global Brew location. Thakkak said because of this he feels a connection to the St. Charles location which led him to purchase store. Thakkak said they have not signed a lease yet pending approval of the liquor license. The business hours are attached to the packet and they are seeking at 1:00am permit. Thakkak indicated they have no liquor inventory at this time, but plan on having approximately \$50,000.00 worth of inventory when they open. Thakkak said they plan to install a full kitchen sometime in 2020 and serve a full menu of food. Thakkak is a U.S. citizen.

Thakka currently holds a liquor license in Schaumburg as part of the Global Brew location. Thakkak did say shortly after the location opened they were cited for serving a minor by Schaumburg police department. Thakkak said the business was served with a fine only. Thakkak said since then they have retrained the employees and held continual training to prevent this from happening again. In speaking to Schaumburg police department I learned that what Thakkak had advised me was truthful and they had received a fine only.

At approximately 9:30am, I met with Jesal Patel at the police department front desk. Patel said that he owns and operates the business Hammar's liquor in Geneva Illinois holds a

liquor license in Geneva for this business. Patel said he also hold a liquor license in Schaumburg due to the Global Brew. When asked about violations against either of his licenses, Patel told me about the Schaumburg violation. Patel gave me the same account as Thakkak. Patel said during the 12 years he has run Hammar's in Geneva he has had two violations for serving underage minors. The first one violation came from the State in 2015. He received a \$500.00 fine. The second violation came from Geneva police department in 2017. This led to him losing one day of operation. In speaking to Geneva police about the violations, they confirmed what Patel told me and advised that even though he has been cited, he is a good business owner and they have no problems with his location. Patel is a U.S. citizen.

On 08/19/19, I spoke to Parekh. Parekh advised that she is part owner of the Global Brew in Schaumburg. Other than the Schaumburg liquor license Parekh does not hold another license anywhere else. Parekh said she has lived at the above address for the past two years and has lived in Elgin for over ten years. Parekh said she is currently in the United States on a green card status.

SITE VISIT:

On 09/10/19, I visited the location. I found the business lay out to be very similar to the floor plan provided with the application.

This concludes this background investigation. Recommend approval.

CP

City of St. Charles, Illinois Liquor Control Commissioner
 CITY RETAIL LIQUOR DEALER LICENSE APPLICATION
 APPLICATION FEE IS NON-REFUNDABLE



Incomplete applications will not be accepted.
Completed applications may be submitted to:
 Two East Main Street, St. Charles, IL 60174-1984

Date Application Received: 8-7-2019 New Application Renewal Application License Class: _____
 Business Name: Global Brew Tap House

APPLICATION CHECKLIST

| Check items to confirm all are attached to this application | Applicant | Office Use Only |
|--|-------------------------------------|--|
| Application Fee | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Completed Application for all questions applicable to your business. | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Copy of Lease/Proof of Ownership | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> draft |
| Copy of Dram Shop Insurance or a letter from insurance agent with a proposed quote. | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> quote |
| Copy of Articles of Corporation, if applicable. | <input type="checkbox"/> | <input type="checkbox"/> |
| Completed B.A.S.S.E.T. (Beverage Alcohol Sellers & Servers Training) form – filled out for all employees. A copy of the B.A.S.S.E.T. certificate is only needed for each manager. It is the business establishment's responsibility to keep copies of all B.A.S.S.E.T. certificates on file for all of their employees. | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Copy of Site Plan for Establishment (Drawn to scale including the parking lot, patio and/or deck, outdoor seating). | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Copy of Floor Plan for Establishment (Drawn to scale and must include the layout of the establishment with tables, chairs, aisles, displays, cash register, bar, and lounge area with dimensions, percentage, and square footage noted for each space). Be sure to also include all fixed objects , such as pool tables, bar stools, vending/amusement machines; as well as all exits . | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Copy of Business Plan, to include: <input type="checkbox"/> Hours of Operation <input type="checkbox"/> Copy of Menu <u>untold.com</u> <input type="checkbox"/> Whether or not live music will be played at this establishment <u>yes</u> <input type="checkbox"/> Will there be outdoor seating and/or outdoor designated smoking area <u>yes</u> <input type="checkbox"/> Do not include a marketing or financial plan with this business plan | <input checked="" type="checkbox"/> | <input type="checkbox"/> <u>no food</u> |
| Are any building alterations planned for this site? If not sure, please contact Building & Code Enforcement at 630.377.4406 and/or Fire Prevention Bureau at 630.377.4458 to discuss whether or not a walk-thru and/or permit are necessary for this business. | <input type="checkbox"/> | <input checked="" type="checkbox"/> <u>later/2020</u> |
| All managers have been fingerprinted who are employed by your establishment. When new management is hired, it is imperative you contact the Mayor's office to be fingerprinted so the City's business files are appropriately updated. | <input type="checkbox"/> | <input type="checkbox"/> |

OFFICIAL USE ONLY

Approved* Denied Date Approved/Denied: _____ Customer Number: _____

Signature of Mayor, Liquor Control Commissioner

Date Issued

***ISSUANCE OF THIS LICENSE IS CONTINGENT ON MEETING ALL REQUIRED BUILDING AND FIRE DEPARTMENT REQUIREMENTS.**

APPLICANT INFORMATION

A. Type of Business: Individual Partnership Corporation Other (explain):

B. Business Name: **VVAAMA Inc. DBA GLOBAL BREW TAP HOUSE**

C. Business Address: **2100 PRAIRIE STREET, St. Charles, IL 60174**

D. IL Tax ID Number: [Redacted] E. Business Phone: [Redacted] F. Business E-mail: [Redacted] G. Business Website: **Globalbrew.com**

H. Contact Person: **BHAVIK THAKKAR** I. Title: **PRESIDENT** J. Phone No.: [Redacted]
 Email: [Redacted]

K. If Corporation, Corporation Name: **VVAAMA Inc.**

L. Corporation Address (city, state, zip code): **59 VENETO COURT, STREAMWOOD, IL 60107**

BUSINESS ESTABLISHMENT LOCATION INFORMATION

A. License Class: A Package B Restaurant C Tavern D Hotel/Banquet/Arcada/Q-Center/Entertainment/Club
 Other:

B. Address applying for liquor license (exact street address): **2100 PRAIRIE ST St. Charles, IL 60174** C. Number of Parking Spaces: [Redacted] D. Outside Dining s.f. [17.20.020-R]: **1500** E. Holding Bar s.f. [5.08.010-F]: [Redacted]

F. Total Building s.f.: **4600** G. Total Number of Seats: **150** H. Number of Bar Seats: **20** I. Sale Counter s.f.: [Redacted] J. Live Entertainment Area s.f. [5.08.010-H]: **100 SF**

K. Kitchen s.f.: [Redacted] L. Cooler s.f.: **300** M. Dry Storage s.f.: [Redacted] N. Seating Area s.f.: **2250** O. Retail/public Area s.f.: [Redacted] P. Service Bar s.f. [5.08.010-O]: [Redacted]

Q. Brief Business Plan description based on type of establishment listed above:
Craft Beer Taphouse. Selection of 50 Craft Beer on tap (Cocktail on tap) Wine on tap with 200 bottles/canned Beers. Patrons are encouraged to bring food in. etc as there is no food or service this time and small selection of strong package outside.

MANAGER INFORMATION

Full Name, include middle initial: **BHAVIK P. THAKKAR** Title: **OWNER/MANAGER**

Birthdate: [Redacted] Birthplace: **INDIA** Driver's License#: [Redacted] Home Phone: [Redacted]

Home Address: [Redacted]

Full Name, include middle initial: **BHAVINI PATEL** Title: **SECRETARY**

Birthdate: [Redacted] Birthplace: **INDIA** Driver's License#: [Redacted] Home Phone: [Redacted]

Home Address: [Redacted]

Full Name, include middle initial: **JESAL PATEL** Title: **TREASURER**

Birthdate: [Redacted] Birthplace: [Redacted] Driver's License#: [Redacted] Home Phone: [Redacted]

Home Address: [Redacted]

60107

PROPOSED FLOOR PLAN/LAYOUT OF PROPERTY

Mandatory: attach to this application a floorplan or layout of the proposed facility to include the following:

CLASS B LICENSES

- | | |
|----|--|
| 1. | Every application for a Class B license, whether an initial application or a renewal application, shall have attached thereto a site drawing of the proposed licensed premises, drawn to scale showing the following (<i>check off once complete</i>): <ul style="list-style-type: none">a. The location of all rooms, segregated areas, including outdoor seating areas and the square footage thereof;b. The designated use of each room or segregated area (i.e. dining room, holding bar, service bar, kitchen, restrooms, outdoor seating areas, all rooms and segregated areas, including outdoor areas where alcoholic liquor may be served or consumed and all locations where live entertainment may be provided);c. The proposed seating capacity of rooms or segregated areas where the public is permitted to consume food and/or alcoholic beverages and/or live entertainment may be provided.** |
| 2. | The site drawing is subject to the approval of the Local Liquor Control Commissioner. The Local Liquor Commissioner may impose such restrictions as he deems appropriate on any license by noting the same on the approved site drawing or as provided on the face of the license. |
| 3. | A copy of the approved site drawing shall be attached to the approved license and is made a part of said license. |
| 4. | It shall be unlawful for any Class B licensee to operate and/or maintain the licensed premises in any manner inconsistent with the approved site drawing. |

CLASS C LICENSES

- | | |
|----|--|
| 1. | Every application for a Class C license, whether an initial application or a renewal application, shall have attached thereto a site drawing of the proposed licensed premises, drawn to scale, showing the following (<i>check off once complete</i>): <ul style="list-style-type: none">a. The location of all rooms, segregated areas, including outdoor seating areas and the square footage thereof;b. The designated use of each room or segregated area (e.g. dining room, holding bar, service bar, kitchen, restrooms, outdoor seating areas, all rooms and segregated areas, including outdoor areas, where alcoholic liquor may be served or consumed and all locations where live entertainment may be provided);c. The proposed seating capacity of rooms or segregated areas where the public is permitted to consume food and/or alcoholic beverages and/or live entertainment may be provided.** |
| 2. | The site drawing is subject to the approval of the Local Liquor Commissioner. The Local Liquor Commissioner may impose such restrictions as he deems appropriate on any licensee by noting the same on the approved site drawing or as provided on the face of the license. |
| 3. | A copy of the approved site drawing shall be attached to the approved license and is made a part of said license. |
| 4. | It shall be unlawful for any Class C licensee to operate and/or maintain the licensed premises in any manner inconsistent with the approved site drawing. |

****THE FIRE PREVENTION BUREAU WILL FURNISH ALL FINAL, PERMITTED OCCUPANCY NUMBERS FOR THIS LICENSE.**

CORPORATION / PREMISES QUESTIONS

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| 1. | <p>If applicant is an individual or partnership, is each and every person a United States citizen (5.08.070-2)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Is any individual a naturalized citizen? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, print name(s), date(s), and place(s) of naturalization: BHAVIK P. THAKKAR Jesal Patel</p> |
| 2. | <p>List the type of business of the applicant (5.08.070-3): BAR Craft Beer Taphouse</p> |
| 3. | <p>Number of years of experience for the above listed type of business (5.08.070-4): 10+ Schaumburg location</p> |
| 4. | <p>Amount of merchandise that normally will be in inventory when in operation (5.08.070-5): \$ 50,000</p> |
| 5. | <p>Location/address and description of business to be operated under this applied for license (5.08.070-6): 7100 Prairie St. Ste 60174 Craft beer taphouse</p> |
| 6. | <p>Is the premises owned or leased (5.08.070-6A)? <input type="checkbox"/> Owned <input checked="" type="checkbox"/> Leased</p> |
| 7. | <p>If the premises are leased, list the names and addresses of all direct owners or owners of beneficial interests in any trusts, if premises are held in trust (5.08.070-6B):</p> <p>Name of Building Owner: Angel Associates, LP / CIMa Dordiers LP</p> <p>Address of Building Owner: 30W180 Butterfield Rd Warrenville, IL 60555</p> <p>Mailing Address of Building Owner (if different):</p> <p>Phone Number: 630-653-1700 E-mail Address: dsoltis@cimadelclosures.org</p> <p>Name of Building Owner:</p> <p>Address of Building Owner:</p> <p>Mailing Address of Building Owner (if different):</p> <p>Phone Number: E-mail Address:</p> <p>Name of Building Owner:</p> <p>Address of Building Owner:</p> <p>Mailing Address of Building Owner (if different):</p> <p>Phone Number: E-mail Address:</p> |
| 8. | <p>Does the applicant currently operate, or operated in the past, any other establishment within the City of St. Charles that requires a liquor license? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, please list the business name(s) and address(es):</p> |

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| 9. | <p>Does applicant have any outstanding debt with the City of St. Charles, including, but not limited to, utility bills, alcohol tax, and permit fees, for any current or previous establishment owned, operated or managed by the applicant? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, please note the City of St. Charles requires all debt to be paid in full before consideration of a new or renewed liquor license is issued.</p> |
| 10. | <p>Are any improvements planned for the building and/or site that will require a building permit? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, has a building permit been applied for? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, date building permit was applied for with Building & Code Enforcement:</p> |
| 11. | <p>Has applicant applied for a similar or other license on the premises other than the one for which this license is sought (5.08.070-7)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, what was the disposition of the application? Explain as necessary:</p> |
| 12. | <p>Has applicant (and all persons listed on page 1 of this application) ever been convicted of a felony under any Federal or State law, or convicted of a misdemeanor opposed to decency or morality (5.08.070-8)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Is applicant (and all persons listed on page 1 of this application) disqualified from receiving a liquor license by reason of any matter contained in Illinois State law and/or City of St. Charles Municipal Ordinances? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> |
| 13. | <p>List previous liquor licenses issued by any State Government or any subdivision thereof (5.08.070-9). Use additional paper if necessary.</p> <p>Government Unit: <i>State of Illinois</i></p> <p>Date: _____ Location, City/State: _____</p> <p>Special Explanations: _____</p> <p>Government Unit:</p> <p>Date: _____ Location, City/State: _____</p> <p>Special Explanations: _____</p> |
| 14. | <p>Have any liquor licenses possessed ever been revoked (5.08.070-9)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, list all reasons on a separate, signed letter accompanying this application.</p> <p>Has any director, officer, shareholder, or any of your managers, ever been denied liquor license from any jurisdiction? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, proceed to Question 15. If more space is needed, please attach a separate sheet of paper with the information.</p> |

| | |
|-----|---|
| 15. | <p>Complete ONLY if yes was answered to the questions above (14):</p> <p>Name: _____ Name of Business: _____</p> <p>Position with the Business: _____</p> <p>Date(s) of Denial: _____</p> <p>Reason(s) for Denial of License: _____</p> |
| 16. | <p>Date of Incorporation (Illinois Corporations) (5.08.070-10): <u>24 July 2019</u></p> <p>Date qualified under Illinois Business Corporation Act to transact business in Illinois (Foreign Corporation): _____</p> |
| 17. | <p>Has the applicant and all designated managers read and do they all understand and agree not to violate any liquor laws of the United States, the State of Illinois, and any of the ordinances of the City of St. Charles in conducting business(5.08.070-11)?</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Have you, or in the case of a corporation, the local manager, or in the case of a partnership any of the partners, ever been convicted of any violation of any law pertaining to alcoholic liquor? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Have you, or in the case of a corporation the local manager, or in the case of a partnership any of the partners, ever been convicted of a felony? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Have you ever been convicted of a gambling offense? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If a partnership or corporation, include all partners and the local manager(s).)</p> <p>Will you and all your employees refuse to serve or sell alcoholic liquor to an intoxicated person or to a minor?</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> |
| 18. | <p>Mandatory: All individual owners, partners, officers, directors, and/or persons holding directly or beneficially more than five (5) percent in interest of the stock of owners by interest listed on page 1 of this application must be fingerprinted by the City of St. Charles Police Department (5.08.070-A12).</p> <p>Has this been done? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, date(s): _____</p> |
| 19. | <p>Mandatory: Has the applicant attached proof of Dram Shop Insurance to this application or already furnished it to the City of St. Charles (5.08.060)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If already furnished, date of delivery: _____</p> <p>NOTE: Insurance must be issued from May 1, 20XX – April 30, 20XX in accordance with City code 5.08.060. Request a prorated rate from your insurance company if you are applying for a new license during this timeframe.</p> |

20. **Mandatory:** Is the premises within 100 feet of any real property of any church; school; hospital; home for the aged or indigent persons; home for veterans, their wives/husbands, or children; and/or any military or naval station (5.08.230)?
 Yes No

COMMENTS/ADDITIONAL INFORMATION

APPLICATION FOR LATE NIGHT PERMIT

SUPPLEMENTAL TO LIQUOR LICENSE FOR CLASS B/C

To: **St. Charles Liquor Control Commission** Date: 8-7-2019

I now possess or have applied for a liquor license Class B/C

Applicant's Name: Bhavik P Thakkar

Name of Business: VAAMA, INC DBA GLOBAL BREW TAP HOUSE

Business Address: 200 Prairie St, St. Charles, IL 60174

Business Phone:

SUPPLEMENTAL PERMIT APPLIED FOR

Payment of Late Night Permit fee is required at the time the permit is issued.

- 1:00 a.m. Late Night Permit – fee of \$800.00
- 2:00 a.m. Late Night Permit – fee of \$2,300.00

NOTE: Other permits that may be available upon request include:
• Class E – Special Event License (1 to 3-day event @ \$100.00 per day)
• Outdoor Dining Permit (Contact Community & Economic Development @ 630.377.4443)

SIGNATURES

[Signature] 8/1/2019
Applicant Signature Date

B.A.S.S.E.T. TRAINING

Please list employees required to have B.A.S.S.E.T training on this page – include all managers, assistant managers, bartenders, and clerks who are permitted to make alcoholic liquor sales. **Include copies of certificates for managers only and mark Manager if applicable. Add another page, if needed.**

Name:
(First) BHAVIK (Last) THAKKAR (Middle) P Manager
Home Street Address: [REDACTED]
City, State, Zip: [REDACTED]
Date of Course: [REDACTED] Place Course was Taken:
3/21/2019 online
Birthdate: [REDACTED] Certificate Granted: Expiration: 2 years

Name:
(First) (Last) (Middle) Manager
Home Street Address:
City, State, Zip:
Date of Course: Place Course was Taken:
Birthdate: Certificate Granted: Expiration:

Name:
(First) (Last) (Middle) Manager
Home Street Address:
City, State, Zip:
Date of Course: Place Course was Taken:
Birthdate: Certificate Granted: Expiration:

Name:
(First) (Last) (Middle) Manager
Home Street Address:
City, State, Zip:
Date of Course: Place Course was Taken:
Birthdate: Certificate Granted: Expiration:

NEW MANAGEMENT REQUIREMENTS

Whenever a new manager comes on board, the City must be notified and that person must be fingerprinted.


It is the business establishment's responsibility to keep copies of all B.A.S.S.E.T. certificates on file for their employees.

Business Name:

VVAAMA, Inc | Global Brew Tap House ^{DBA}

SIGNATURES


Applicant's Signature


Notary & Date

Seal:



Liquor Commissioner hereby directs City Clerk to issue permit indicated above.

Liquor Commissioner's Signature

Date

ADDENDUM TO RETAIL LIQUOR LICENSE APPLICATION

To be completed by the City of St. Charles Police Department

Date: 09-11-19 Name of Applicant: Bhauk Thakkar, Bhavni Parekh - JEDSUTAL

Name of Business: Global Brew

Address of Business: 2100 Prairie St. Ward Number:

To Liquor Control Commissioner, City of St. Charles, Illinois

Pursuant to the provision of the City of St. Charles Municipal Code, Chapter 5.08, Alcoholic Beverages, the following guide shall be in effect for the investigation of an applicant for a Retail Dealer's Liquor License:

1. Date on which applicant will begin selling retail alcoholic liquors at this location: Week of Oct. 14th

2. Is the location within 100 feet of any church; school; hospital; home for the aged or indigent persons; home for veterans, their wives/husbands or children; or any military or naval station? Yes No

3. If the answer to question 2 is yes, answer the following: Is applicant's place of business a hotel offering restaurant service, a regularly organized club, a restaurant, a food shop, or other place where the sale of alcoholic liquors is not the principal business? Yes No
If yes, answer a, b and c:
a. State the kind of such business:
b. Give date on which applicant began the kind of business named at this location:
c. Has the kind of business designated been established at this location for such purpose prior to February 1, 1934, and carried on continuously since such time by either the applicant or any other person?
 Yes No

4. If premises for which an alcoholic liquor license is herein applied for are within 100 feet of a church, have such premises been licensed for the sale of alcoholic liquor at retail prior to the establishment of such church? Yes No
If yes, have the premises been continuously operated and licensed for the sale of alcoholic liquor at retail since the original alcoholic liquor license was issued therefore? Yes No

5. Is the place for which the alcoholic liquor license is sought a dwelling house, flat, or apartment used for residential purposes? Yes No

6. Is there any access leading from premises to any other portion of the same building or structure used for dwelling or lodging purposes and which is permitted to be used or kept accessible for use by the public? (Connection between premises and such other portion of building or structure as is used only by the applicant, his/her family and personal guests not prohibited.) Yes No

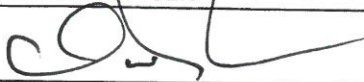
7. If applicant conducts or will conduct in the same place any other class of business in addition to that of City Retailer of Alcoholic Liquor, state the kind and nature of such business: Yes No

| | |
|-----|--|
| 8. | Are all rooms where liquor will be sold for consumption on the premises continuously lighted during business hours by natural light or artificial white light so that all parts of the interior shall be clearly visible? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| 9. | Are premises located in any building belonging to or under the control of the State of Illinois or any other political subdivision thereof, such as county, city, etc.? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| 10. | Are the premises for which license is herein applied for a store or place of business where the majority of customers are minors of school age or where the principal business transacted consists of school books, school supplies, food or drinks for such minors? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| 11. | It is required by the City of St. Charles that all employees undergo BASSET training. Provide a copy of the certificate of training completion for each manager. All certificates for managers have been submitted: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| 12. | From your observation and investigation, has applicant—to the best of your knowledge—truthfully answered all questions? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If no, state exceptions: |
| 13. | Have all persons named in this application been fingerprinted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Fingerprinted by: <u>SCPD</u> Date: <u>08-16-19</u> |
| 14. | Other necessary data: |

SIGNATURES

ENDORSEMENTS AND APPROVALS

INVESTIGATING OFFICER



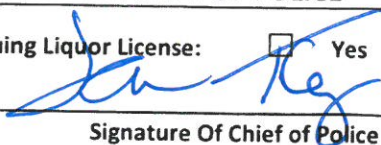
Investigating Officer Signature

DEPT. CHIEF 323

Badge Number & Rank

ENDORSEMENT OF THE CHIEF OF POLICE

Recommend Issuing Liquor License: Yes No



Signature Of Chief of Police

9-11-19

Date

VVAAMA, Inc. dba Global Brew Tap House

Commercial Insurance Proposal

DISCLOSURE PURSUANT TO TERRORISM RISK INSURANCE ACT

Disclosure of Premium: Coverage for certain losses caused by acts of terrorism is included in this proposal. In accordance with the Federal Terrorism Risk Insurance Act, we are required to provide you with a notice disclosing the portion of your premium, if any, attributable to coverage for terrorist acts certified under the Terrorism Risk Insurance Act. The portion of your premium attributable to coverage for terrorist acts certified under the Terrorism Risk Insurance Act is shown next to the description "Terrorism Premium Charge" on the Coverage Summary.

Disclosure Of Federal Participation in Payment Of Terrorism Losses: The United States Government, Department of the Treasury, will pay a share of the terrorism losses insured under the Federal program. The Federal share (shown below and is shown in the Schedule of the endorsement or in the Policy Declarations) of that portion of the amount that exceeds the applicable insurer retention. However, if aggregate insured losses attributable to terrorist acts certified under the Terrorism Risk Insurance Act exceed \$100 billion in a calendar year, the Treasury shall not make any payment for any portion of the amount of such losses that exceeds \$100 billion.

Insured losses would be partially reimbursed by the United States Government, if the aggregate industry insured exceed:

- \$100,000,000 with respect to such Insured losses occurring in calendar year 2015, the United States Government would pay 85% of our Insured Losses that exceed our Insured deductible
- \$120,000,000 with respect to such Insured Losses occurring in calendar year 2016, the United States Government would pay 84% of our Insured losses that exceed our Insured deductible
- \$140,000,000 with respect to such Insured losses occurring in calendar year 2017, the United States Government would pay 83% of our Insured Losses that exceed our Insured deductible
- \$160,000,000 with respect to such Insured Losses occurring in calendar year 2018, the United States Government would pay 82% of our Insured losses that exceed our Insured deductible
- \$180,000,000 with respect to such Insured losses occurring in calendar year 2019, the United States Government would pay 81% of our Insured Losses that exceed our Insured deductible
- \$200,000,000 with respect to such Insured losses occurring in calendar year 2020, the United States Government would pay 80% of our Insured losses that exceed our Insured deductible

Cap on Insurer Participation In Payment Of Terrorism Losses: If aggregate insured losses attributable to terrorist acts certified under the Terrorism Risk Insurance Act exceed \$100 billion in a calendar year and we have met our insurer deductible under the Terrorism Risk Insurance Act, we shall not be liable for the payment of any portion of the amount of such losses that exceeds \$100 billion, and in such case insured losses up to that amount are subject to pro rata allocation in accordance with procedures established by the Secretary of the Treasury.



Crum-Halsted Agency Inc
 Kenneth Pietsch
 (630) 443-7300
 snapier@crumhalsted.com

VVAAMA, Inc. dba Global Brew Tap House

Commercial Insurance Proposal

Workers Compensation

Total Workers Compensation Annual Premium **\$ 1,980.00**

| | |
|---|---------|
| Bodily Injury by Disease (each employee) | 500,000 |
| Bodily Injury by Disease (policy limit) | 500,000 |
| Bodily Injury by Accident (each accident) | 500,000 |

State: IL

| Classifications | Exposure Basis | Number of Employees | Rate | Premium |
|---|-----------------|---------------------|------|-------------|
| Location 1 | | | | |
| BAR, DISCOTHEQUE, LOUNGE, NIGHT CLUB OR TAVERN (9084) | Payroll 100,000 | 7 | 1.65 | \$ 1,650.00 |

| Credits and Modifications | Limit | Factor | Premium |
|--|-------|--------|-----------|
| Employers Liability Premium | | | \$ 100.00 |
| Experience Premium | | | \$ 0.00 |
| Schedule Credit Debit Premium | | | \$ 0.00 |
| Terrorism Premium | | | \$ 30.00 |
| Catastrophe (other than Certified Acts of Terrorism) | | | \$ 20.00 |
| Expense Constant | | | \$ 160.00 |
| Balance to Meet Minimum | | | \$ 0.00 |
| State Surcharge Premium | | | \$ 20.00 |
| Contractors Adjustment Credit Premium | | 0 | \$ 0.00 |
| Manual Premium | | | \$ 0.00 |
| Premium Discount Premium | | | \$ 0.00 |

IL Total Workers Compensation Annual Premium **\$ 1,980.00**

Total Workers Compensation Annual Premium **\$ 1,980.00**



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Commercial Insurance Proposal

The following shows coverages, limits, and/or deductibles that apply specifically to each location and/or building.

Property Location 1

Address: 2100 Priarie Street St. Charles, IL 60174

Date Business Started (this location): 7/14/2019

Property Territory: 709

Protection Class: 1

Deductible: 1,000

(Applies to all property coverages unless otherwise specified in the deductible column.)

| Coverage | Limit | Deductible | Exposure | Premium |
|--|-------|------------|----------|----------------|
| Money and Security | | | | INCL |
| Off-Premises | 2,500 | | | |
| On-Premises | 2,500 | | | |
| Total Estimated Location 1 Coverage Premium | | | | \$ 0.00 |

Location 1 - Building 1

Classification: Bar > 75% Alcohol - NOC - Limited Cooking - 09141
 Occupied by: Occupied By Insured
 Construction Type: Non-Combustible
 Building Valuation Basis: Unknown
 Business Personal Property Valuation Basis: Replacement Cost with 4% Increase for Inflation Protection
 Sprinkler: No
 Year Built: 1991
 Roof Year: 2003
 Number of Employees: 7

| Coverage | Limit | Deductible | Exposure | Premium |
|--|---------|------------|----------|--------------------|
| Accounts Receivable | 15,000 | | | INCL |
| Business Personal Property | 40,000 | | | \$ 199.00 |
| Damage To Premises Rented To You | 100,000 | | | INCL |
| Equipment Breakdown Protection - BPO | 0 | | | INCL |
| Equipment Breakdown Protection - BPP | 40,000 | | | \$ 11.00 |
| Outdoor Property | 15,000 | | | INCL |
| Product Spoilage | 40,000 | | | INCL |
| Valuable Papers and Records | 15,000 | | | INCL |
| Total Estimated Location 1 - Building 1 Premium | | | | \$ 210.00 |
| Total Estimated Location 1 Premium | | | | \$ 4,657.00 |
| IL Total Estimated Premium | | | | \$ 4,657.00 |

Total Businessowners Estimated Annual Premium \$ 4,947.00



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Commercial Insurance Proposal

LIABILITY COVERAGES

| | |
|--|-----------|
| Each Occurrence Limit: | 1,000,000 |
| General Aggregate Limit: | 2,000,000 |
| Medical Expense Limit: | 1,000 |
| Personal and Advertising Injury Limit: | 1,000,000 |
| Products/Completed Operations Aggregate Limit: | 2,000,000 |

| Coverage | Limit | Deductible | Exposure | Premium |
|--|-------|------------|----------|----------|
| Limited Form-Owners, Lessees or Contractors-Automatic Status-SAI43 | | | | \$ 60.00 |
| Primary and Noncontributory - BP1488 | | | | \$ 26.00 |

Total Estimated Liability Common Coverage Premium \$ 86.00



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Commercial Insurance Proposal

| Coverage | Limit |
|---|--------------|
| No Coinsurance Penalty | |
| Off-Premises Sign Coverage | 5,000 |
| Other Society Businessowners features: | |
| No 60 day limitation on payroll qualifying as continuing necessary operating expenses for Loss of Business Income | |
| No 80 percent clause applying to Replacement Cost Coverage | |
| No waiting period "deductible" applying to Loss of Business Income | |
| Personal Effects | 10,000 |
| Personal Property Off Premises | 25,000 |
| Pollution Cleanup and Removal | 50,000 |
| Special Events Liability | |
| Tools of Any One Employee | |
| Vegetated Roofs | |
| Water Backup and Sump Pump Overflow | 25,000 |
| Watercraft | 5,000 |



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Commercial Insurance Proposal

Account Summary

| Coverage | Quote ID | Quote Date | Quote Effective Date | Premium |
|--|----------|------------|----------------------|--------------------|
| Businessowners | 19028470 | 08/06/2019 | 08/08/2019 | \$ 4,947.00 |
| Workers Compensation | 19028472 | 08/06/2019 | 08/08/2019 | \$ 1,980.00 |
| Umbrella | 19028474 | 08/06/2019 | 08/08/2019 | \$ 852.00 |
| Total Estimated Annual Premium: | | | | \$ 7,779.00 |

Premiums and pay plan options displayed are estimates and may be subject to change upon policy issuance.

- Full Pay One installment of \$7,779.00
 - Semi-Annual Two equal installments of \$3,889.50
 - Quarterly Four equal installments of \$1,944.75
 - Monthly (recurring electronic payments) Twelve equal installments of \$648.25*
- *if non-recurring payments, then 2 months down of \$1,296.50 with 10 equal installments billed thereafter of \$648.25

If you elect the full pay option, the amount listed above is what you will pay. All other options (semi-annual, quarterly and monthly) are subject to fees to cover additional costs associated with installment billing. These charges will be included in your payment schedule and added to your policy balance at the time each bill is sent.

If you prefer to pay in installments but still want to save money, paying by recurring ACH from your checking or savings account will reduce your future installment fees to \$2. All other installment bills are subject to a \$7 fee.

To enroll in a recurring ACH plan, visit societyinsurance.com and click on *Make a Payment* when you receive your first bill.

Please note that these fees are not included in your overall total policy premium and that both installment amounts and intervals may be adjusted due to policy changes. If you would like to make changes to your payment plan, please contact our Premium Receivables Department.

Thank you for giving us the opportunity of providing you with a quotation for commercial insurance with Society Insurance. We would be happy to answer any questions you may have regarding this quotation, and we look forward to helping you with your insurance needs.

Kenneth Pietsch
 Crum-Halsted Agency Inc

This quotation contains only a general description of coverages and is not a statement of contract. All coverages are subject to the exclusions and conditions in the policy. Coverage is not bound and no coverage will be afforded by this quotation. Premium charges are based on information provided by the applicant and rates in force at the time of quotation on **8/6/2019**. This quotation is valid until **09/05/2019**.

Illinois BASSET

SELLER / SERVER CERTIFICATION


Trainee Name: Bhavik Thakkar

School Name:

Certificate #: 000015505475

360training.com dba Learn2Serve

Date of Completion: 03/21/2019

I, 
certify that the above named person
successfully completed an approved
Learn2Serve Seller/Server course.

This course provides necessary
knowledge and techniques for the
responsible serving of alcohol.

This is your temporary certificate of completion. You will receive your official card in the mail. Please forward all questions to support@360training.com.



Corporate Headquarters

6801 N Capital of Texas Hwy, Suite 150
Austin, TX 78731
P: 877.881.2235

Global Brew Tap House

\$\$Beer Bar

Address: 2100 Prairie St, St. Charles, IL 60174

Hours of operation:

Tuesday 3PM-1AM

Wednesday 3PM-1AM

Thursday 3PM-1AM

Friday 1PM-1AM

Saturday 11AM-~~12AM~~ 1AM BT

Sunday 11AM-~~1AM~~ 12AM BT

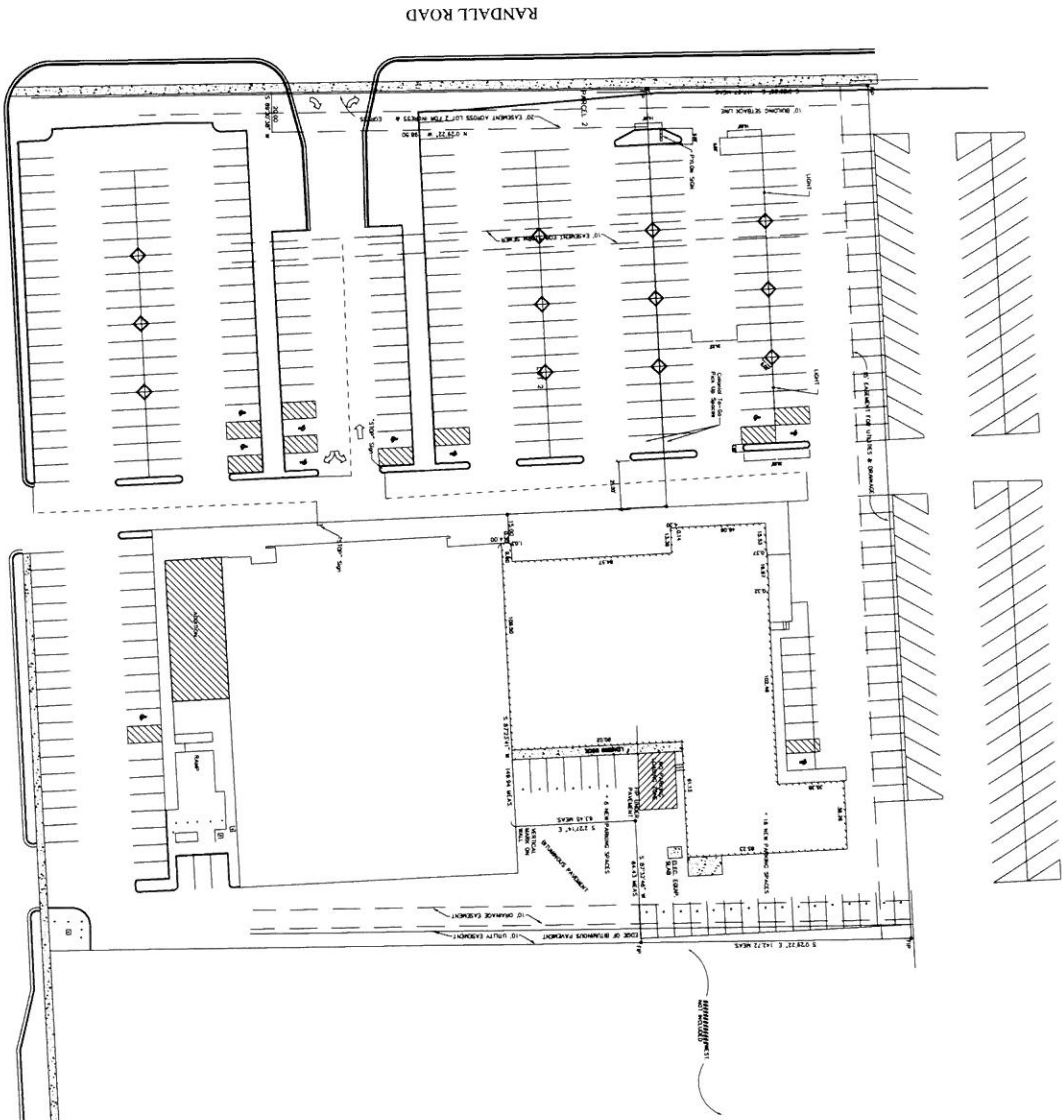
Monday 3PM-1AM

Menu: untappd.com

Phone: (630) 415-5595

SITE PLAN

SCALE: 1"=30'-0"



GLEASON
ARCHITECTS, P.C.

2071 Randall Road, Suite 100
St. Charles, Illinois 60154
Phone: 630.584.4444
Fax: 630.584.4445
www.gleasonarchitects.com

| DATE | DESCRIPTION |
|----------|-------------|
| 09/27/13 | PRELIMINARY |
| | REVISIONS |
| | REVISIONS |
| | REVISIONS |

DATE: _____
DRAWN BY: _____
CHECKED BY: _____
DATE: _____

PROJECT:
Randall Plaza Remodel
580 S Randall Road
St. Charles, IL

CLIENT:
Angel and Associates
381 East St. Charles Rd
Card Stream, IL

NSI: NSI
DATE: 08/08/13
PLAT SCALE: 1"=30'-0"
OWNER: APPROVAL

SHEET NUMBER
SITE PLAN

SHEET NUMBER
A0