

**AGENDA ITEM EXECUTIVE SUMMARY****Agenda Item Number: 4b****Title:**

Recommendation to approve a Proposal for a B1 Liquor License Application for Knead Urban Eatery, Located at 131 S. 1<sup>st</sup> St., St. Charles.

**Presenter:**

Police Chief James Keegan

**Meeting:** Government Operations Committee**Date:** November 16, 2020

Proposed Cost: \$

Budgeted Amount: \$

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

Knead Urban Eatery is located in the former Isacco's restaurant, located at 131 S. 1<sup>st</sup> Street. The owners of Knead also own and operate a similar business, Osteria Bigolaro, in Geneva.

Please see the attached documents supporting this request.

*Pursuant to this item being presented at the Government Operations Committee Meeting on November 16 2020 to seek approval; it will be brought before the Liquor Control Commission at a meeting scheduled for 4:30 pm, the same day, to process and move it forward to this Committee. This item will then continue on to the City Council Meeting scheduled on December 7, 2020 for final approval.*

**Attachments** *(please list):*

Summary, Floor Plan, Liquor License Application

**Recommendation/Suggested Action** *(briefly explain):*

Recommendation to approve a proposal for a B-1 liquor license application for Knead Urban Eatery, located at 131 S. 1<sup>st</sup> St., St. Charles.



# Memo

Date: 11/9/2020  
To: The Honorable Ray Rogina, Mayor-Liquor Commissioner  
From: James Keegan, Chief of Police  
Re: Background Investigation- Knead Urban Eatery/131 S. 1<sup>st</sup> Street (Class B)

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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.

As you are aware, this location housed the former Isacco's. The perspective new owner's own and operate Osteria Bigolaro in nearby Geneva and are seeking to operate a similar full-service Italian restaurant; with a focus on sandwiches and salads.

The site location/floor plans and the corresponding application materials were reviewed by my staff. We found nothing of a derogatory nature that would preclude either the site location or the applicants from moving forward with an on-site consumption license, subject to City Council approval.

This is a Class B request; hours of operation are 11:00 a.m. to 9:00 p.m./7-days per week.

Please see the application material, floor-plan and business-plan for further details.

Thank you in advance for your consideration in this matter.

# LIQUOR APPLICANT BACKGROUND CHECK LIST



APPLICANT(S): Anthony Gargano

BUSINESS: Knead: Urban Eatery

ADDRESS: 131 S. 1st St.

	REQUESTED	COMPLETED
APPLICATION	_____	X _____
BUSINESS PLAN/FLOOR PLAN/MENU	_____	X _____
LEASE (OR LETTER OF INTENT)	_____	X _____
BASSET CERTIFICATE(S)	_____	X _____
FINGERPRINTS ( <u>ALL</u> MANAGERS)	_____	X _____
DRAM SHOP (CERTIFICATE OF INSURANCE)	_____	X _____
TLO	_____	X _____
I-CLEAR	_____	X _____
CERTIFICATE OF NATURALIZATION (IF APPLICABLE)	_____	X _____
POLICE RECORDS CHECK	_____	X _____
APPLICANT'S HOMETOWN RESIDENCY LETTER	_____	X _____
ILLINOIS LIQUOR COMMISSION	_____	X _____
SITE VISIT	_____	X _____

\* COMMENTS: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

INVESTIGATOR ASSIGNED: Detective Losurdo

SUPERVISOR REVIEW: Commander Majewski



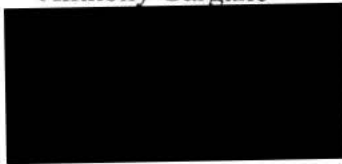
# Memo

To: Commander Eric Majewski  
From: Detective John Losurdo  
Re: Knead: Urban Eatery (Knead LLC) – License Class: B

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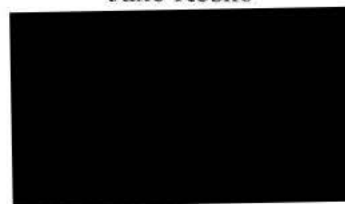
**Applicant**

Anthony Gargano



**General Manager**

Jake Rosko



**Application**

This application was received on, or around, 10/14/2020. The application appears to be complete including signed releases, Certificate of Insurance, and floor plans.

Jake Rosko holds a valid BASSET Certification which is included in the application.

**Records Checks**

Anthony Gargano was fingerprinted on 10/21/2020. Responses from both the FBI and Illinois Bureau of Identification show the following:

- 02/16/2004 Arrest for Criminal Damage to Property by Streamwood PD (04-1064)
- 06/09/2004 Arrest for Retail Theft by Schaumburg PD (04-22462)
- 03/08/2006 Arrest for Driving While License Suspended by Streamwood PD (06-3102)

Jake Rosko was fingerprinted on 10/21/2020. Responses from both the FBI and Illinois Bureau of Identification have not received as of the time of the memo.

I checked the following circuit clerk court records which yielded their respective results:

*Service, Courage, Professionalism, Dedication*



## **Gargano**

- Kane
  - 14TR17848 - Disobey Traffic Control Device (South Elgin)
  - 19TR46583 - Speeding 21-25 mph Over (Saint Charles )
- McHenry
  - 06TR44087 – Speeding 15-20 mph Over (Huntley)
- Grundy
  - 2005TR5503 – Operating Uninsured Motor Vehicle (Gundy Co.)
  - 2005TR5504 – Disregard Stop Sign (Grundy Co.)
- DuPage
  - 2003TR110731 - Improper Backing (Addison)
  - 2010TR179812 - Overweight Vehicle and Operating Uninsured Motor Vehicle (Bloomingdale)
- Cook – no records

## **Rosko**

- Kane
  - 12TR29520 – Speeding 15-20 mph over (Elburn)
- Cook – no records
- Portage (OH) – no records
- DuPage – no records

A check of the Illinois Liquor Control Commission showed a current active license for Anthony Gargano to Osteria Bigolaro (Pastative Vibes LLC) located at 317 W. State St. in Geneva. I contacted the Liquor Commission of Geneva and was informed Gargano has held a liquor license with them for about four years. Geneva has had no issues with Gargano holding a license with them and they have always paid on-time and have been up-to-date on their insurance.

Gargano currently resides in South Elgin. I checked local police department contacts for the following cities which yielded the following the results:

- South Elgin – 2014 traffic ticket for Disobeying Traffic Control Device
- Streamwood
  - 02/16/2004 Criminal Damage to Property (Arrestee)
    - Gargano damaged two Port-o-lets (mobile restrooms) that needed to be replaced. Cost was \$800 (04-1064)
  - 03/08/2006 Driving While License Suspended (Arrestee)(06-3102)
  - 09/03/2006 Unlawful Consumption of Alcohol by a Minor (Arrestee)
    - Gargano was at a party and was cited for the above offense.
- Huntley – no contacts
- Palatine – no contacts
- Saint Charles – 09/30/2019 Speeding Ticket
- Geneva – 02/25/2020 Victim of a Theft (20-2759)

- Schaumburg
  - 06/09/2004 Retail Theft (Arrestee)
    - Gargano stole a pair of shoes at a mall (04-22462).
- Chicago (checked through CLEAR) *the below listed discoveries through CLEAR appear to be the incidents involving Streamwood PD and Schaumburg PD, and not Chicago PD.*
  - 02/16/2004 – Criminal Damage to Property over \$300 but less than \$10K (Arrestee)
  - 06/09/2004 – Retail Theft under \$150 (Arrestee)
  - 03/08/2006 – Driving While License Suspended / No registration Light / Improper Display (Arrestee)

Rosko currently resides in Chicago. I checked local police department contacts for the following cities which yielded the following the results:

- Chicago – no contacts
- Sugar Grove
  - Warning issued for No Valid Registration
- Kent (OH) – no contacts
- Saint Charles – no contacts

A Check of the Illinois Secretary of State yielded no results for Gargano, Rosko, or Knead LLC/Knead Urban Eatery. Pastative Vibes LLC did show for Gargano and appeared to be in good standing.

### **Interview with Applicant**

On 10/21/2020 I spoke with Gargano. Gargano clarified that when he was arrested by Schaumburg PD in 2004 it was for stealing a pair of shoes at a mall. I read Schaumburg PD's report and it shows that Gargano's statements match the report. Gargano stated he was arrested by Streamwood PD in 2004 for damaging two Port-o-lets that needed to be replaced. Gargano explained that his previous "run-ins" with the police were when he was "young and stupid" and that he no longer has negative contacts with police. Gargano informed that he wants to open a business in Saint Charles because he is very excited about what the City is doing with the downtown area. Gargano explained that Saint Charles used to be known as a bar town and has been changing its image with the influx of different businesses and addition of living spaces in the downtown area. Gargano explained that he hopes to open the business in the last week of November or the first week of December and stated there currently is no alcohol on-site. Gargano added that the business is still being renovated. I scheduled to do a site visit on 10/26/2020.

**Site Visit**

On 10/26/2020 I visited the site for Knead Urban Eatery. The location was still under construction but I found the business layout to be very similar to the floor plan provided with the application. No Alcohol was on-site at this time. Gargano added that he hopes the business is open at the end of November 2020.

This concludes my background investigation of Knead Urban Eatery (Knead LLC).

Respectfully,



Detective John Losurdo #364

**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.  
**Applications may be submitted to:** 2 E. Main Street, St. Charles, IL 60174-1984

**APPLICATION CHECKLIST**

Check items to confirm all are attached to this application	Applicant	Office Use
<b>Application Fee of \$200 (5.08.070C)</b> Non-refundable	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Completed Application</b> for all questions applicable to your business.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Copy of Lease/Proof of Ownership</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Copy of Dram Shop Insurance</b> or a letter from insurance agent with a proposed quote	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Copy of Articles of Corporation</b> , if applicable.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Completed B.A.S.S.E.T. (Beverage Alcohol Sellers &amp; Servers Training) form</b> – filled out for all employees. A copy of the B.A.S.S.E.T. certificate is <b>only</b> needed for <b>each manager</b> . 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 type="checkbox"/>
<b>Copy of Site Plan for Establishment (Drawn to scale</b> including the parking lot, patio and/or deck, outdoor seating).	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Copy of Floor Plan for Establishment (Drawn to scale and must include</b> 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 <b>fixed objects</b> , such as pool tables, bar stools, vending/amusement machines; as well as all <b>exits</b> .	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Copy of Business Plan, to include:</b> <input checked="" type="checkbox"/> Hours of Operation <input checked="" type="checkbox"/> Copy of Menu <input type="checkbox"/> Whether or not live music will be played at this establishment <i>N</i> <input type="checkbox"/> Will there be outdoor seating and/or outdoor designated smoking area <i>N</i> <b>Do not include a marketing or financial plan with this business plan</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Are any building alterations planned for this site?</b> If not sure, please contact <b>Building &amp; Code Enforcement at 630.377.4406</b> and/or <b>Fire Prevention Bureau at 630.377.4458</b> to discuss whether or not a walk-thru and/or permit are necessary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>All managers have been fingerprinted who are employed by your establishment.</b> 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 checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Alcohol Tax Acknowledgement and Business Information Sheet</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

**OFFICIAL USE ONLY**

Signature of Investigating Officer: [Signature] Badge Number & Rank: 364 / Detective

Approval Recommended\*       Approval NOT Recommended  
 Signature of Chief of Police: [Signature] Date: 11-9-20

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



Date Application Received: 10-14-20

**LICENSE INFORMATION:**

A Package \$3200-3600

B Restaurant \$2400-3600  Late Night Permit 1:00am \$800 (B/C only)

C Tavern \$2400-3600  Late Night Permit 2:00am \$2300 (B/C only)

D Hotel/Banquet/Arcada/Q-Center/Entertainment/Club - \$varies

G Brewery/Restaurant or Site License - \$varies

\*Initial Liquor License fees for A, B, C, D, G are reduced by 50% for annual renewals and licenses issued after Nov 1.  
\*Licenses are valid until April 30 following issuance and a renewal application is required for the next year (May 1-April 30) (5.08.040)

**APPLICANT INFORMATION**

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

2. Business Name: KNEAD: URBAN BAKERY

3. Business Address: 131 S 7th St ST CHARLES, IL 60174

4. Type of Business (5.08.070-3): <u>RESTAURANT</u>	5. Length of Time in this Business (5.08.070-4): <u>1 MONTH</u>	6. Value of merchandise that normally will be in inventory when in operation (5.08.070-5): <u>\$ 5,000 - 7,000</u>	
7. Business Phone: <u>224-489-3521</u>	8. Business E-mail: <u>ANTHONY@OSTERIABIBOLARO.COM</u>	9. Business Website: <u>WWW.KNEADURBANBAKERY.COM</u>	10. Illinois Tax ID Number: <u>85-3268131</u>
11. Applicant/Contact Person Name: <u>ANTHONY GARGANO</u>		12. Title: <u>OWNER</u>	13. Email: <u>ANTHONY@OSTERIABIBOLARO.COM</u>
14. Applicant Home Address: [REDACTED]			
15. DL#: [REDACTED]		16. Date of Birth: [REDACTED]	17. Birthplace: <u>IL</u>

18. If Corporation, Corporation Name:

19. Corporation Address (city, state, zip code):

**ADDITIONAL OWNERS, INVESTORS (greater than 5% interest), and MANAGER INFORMATION**

Full Name, include middle initial: \_\_\_\_\_ Title: \_\_\_\_\_

Birthdate: \_\_\_\_\_ Birthplace: \_\_\_\_\_ Driver's License#: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Home Address, and all addresses for the last 10 years: \_\_\_\_\_ Email Address: \_\_\_\_\_

Full Name, include middle initial: \_\_\_\_\_ Title: \_\_\_\_\_  
 Birthdate: \_\_\_\_\_ Birthplace: \_\_\_\_\_ Driver's License#: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
 Home Address, and all addresses for the last 10 years: \_\_\_\_\_ Email Address: \_\_\_\_\_

Full Name, include middle initial: \_\_\_\_\_ Title: \_\_\_\_\_  
 Birthdate: \_\_\_\_\_ Birthplace: \_\_\_\_\_ Driver's License#: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
 Home Address, and all addresses for the last 10 years: \_\_\_\_\_ Email Address: \_\_\_\_\_

**BUSINESS ESTABLISHMENT LOCATION INFORMATION**

1. Exact Street Address for liquor license: 131 1ST ST. ST. CHARLES, IL 60174	2. # Parking Spaces: N/A	3. Outside Dining s.f. [17.20.020-R]: N/A	4. Total Building s.f.: 1,350
5. Total # Seats: 30	6. Live Entertainment Area s.f. [5.08.010-H]: N/A		

7. Brief Business Plan description based on type of establishment listed above (5.08.070-6):  
 A CASUAL EATERY THAT will serve Gourmet Sandwiches. We will offer local beer, wine and varied cocktails. We will also have a small market that we will sell Breads, pasta and condiments.

**PROPOSED FLOOR PLAN/LAYOUT OF PROPERTY**

**Attach to this application a floorplan or layout of the proposed facility to include the following:**

- Every application for Liquor license shall have attached thereto a site drawing of the proposed licensed premises, drawn to scale showing the following:
  - The location of all rooms, segregated areas, including outdoor seating areas and the square footage thereof;
  - 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);
  - 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.
- 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.
- A copy of the approved site drawing shall be attached to the approved license and is made a part of said license.
- It shall be unlawful for any 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**

1. If applicant is an individual or partnership, is each and every person a United States citizen (5.08.070-2)?  Yes  No

1. Is any individual a naturalized citizen?  Yes  No  
 If yes, print name(s), date(s), and place(s) of naturalization:

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2. Is the premises owned or leased (5.08.070-6A)?  Owned  Leased

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3. 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):

**Name of Building Owner:** FIRST STREET DEVELOPMENT Phone Number: 636-587-5555  
**Address of Building Owner:** 423 S. 2ND STREET ST. CHARLES, IL 60174 E-mail Address: DAVE@PCWINVEST.COM  
**Mailing Address of Building Owner (if different):**

**Name of Building Owner:** Phone Number:  
**Address of Building Owner:** E-mail Address:  
**Mailing Address of Building Owner (if different):**

**Name of Building Owner:** Phone Number:  
**Address of Building Owner:** E-mail Address:  
**Mailing Address of Building Owner (if different):**

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4. Does the applicant currently operate, or operated in the past, any other establishment within the City of St. Charles that requires a liquor license?  Yes  No  
 If yes, please list the business name(s) and address(es):

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5. 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?  Yes  No  
 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. (5.08.050)

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6. Are any improvements planned for the building and/or site that will require a building permit?  Yes  No  
 If yes, has a building permit been applied for?  Yes  No Date of permit application \_\_\_\_\_

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7. 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)?  Yes  No  
 If yes, what was the disposition of the application? Explain as necessary:

8.	<p>Has applicant (and all persons listed on page 2 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 2 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>
9.	<p><b>List previous liquor licenses issued by any State Government or any subdivision thereof (5.08.070-9). Use additional paper if necessary.</b></p> <p><b>Government Unit:</b> _____ <b>Location, City/State:</b> _____</p> <p><b>Date:</b> _____ <b>Special Explanations:</b> _____</p> <p><b>Government Unit:</b> _____ <b>Location, City/State:</b> _____</p> <p><b>Date:</b> _____ <b>Special Explanations:</b> _____</p>
10.	<p>Have any liquor licenses possessed ever been revoked (5.08.070-9)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><b>If yes</b>, 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?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><b>If yes</b>, proceed to Question 15. If more space is needed, please attach a separate sheet of paper with the information.</p>
11.	<p><b>Complete ONLY if yes was answered to the question above (10):</b></p> <p><b>Name:</b> _____ <b>Name of Business:</b> _____</p> <p><b>Position with the Business:</b> _____ <b>Date(s) of Denial:</b> _____</p> <p><b>Reason(s) for Denial of License:</b> _____</p>
12.	<p><b>Date of Incorporation (Illinois Corporations) (5.08.070-10):</b> 9/25/2020</p> <p><b>Date qualified under Illinois Business Corporation Act to transact business in Illinois (Foreign Corporation):</b> _____</p>
13.	<p>Has the applicant and all designated managers read and do they all understand and agree not to violate any 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
14.	<p>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 2 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>
15.	<p>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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If already furnished, date of delivery:</p>
16.	<p>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)?</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>

**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, Middle, Last):	[REDACTED]	Birthdate:	
Home Street Address, Incl City, State, Zip:	[REDACTED]		
Date of Course:	Place Course was Taken:	Certificate Granted? Y/N	Expiration:
10/7/2020	[REDACTED]	Y	10/7/2024

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

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

Name (First, Middle, Last):		Birthdate:	
Home Street Address, Incl City, State, Zip:			
Date of Course:	Place Course was Taken:	Certificate Granted? Y/N	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.**

**COMMENTS/ADDITIONAL INFORMATION**

**Business Name:** KNEAD: URBAN ESTERY

**SIGNATURES**

  
 Applicant's Signature  
 Subscribed and sworn before me this 14th day of October, 2020  
  
  
 Notary Public

**ADDENDUM TO RETAIL LIQUOR LICENSE APPLICATION**

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

Date: 11/9/2020 Name of Applicant: Anthony Gargano

Name of Business: Knead: Urban Estery

Address of Business: 131 S. 10th St. Ward Number: 4

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:  
End of November 2020
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  
 NA SL  
 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

NA 5C	licensed for the sale of alcoholic liquor at retail prior to the establishment of such church? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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? <input type="checkbox"/> Yes <input type="checkbox"/> No
5.	Is the place for which the alcoholic liquor license is sought a dwelling house, flat, or apartment used for residential purposes? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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: <i>Wesley B. Ziegler</i> Date: <i>10/21/20</i>
14.	Other necessary data:

## ILLINOIS LIQUOR LIABILITY QUOTE

**PLEASE READ CAREFULLY. THIS QUOTATION IS NOT A BINDER OF INSURANCE. IT DOES NOT NECESSARILY PROVIDE THE TERMS AND/OR COVERAGE REQUESTED IN YOUR PROPOSAL. THIS QUOTE IS VALID FOR 30 DAYS FROM: 13 October 2020**

**BUSCHBACH INSURANCE AGENCY INC  
5615 W 95TH ST  
OAK LAWN  
IL  
60455**

**1. Name and address of Assured (Licensee in respect of Location 1)**

KNEAD LLC  
URBAN EATERY  
Illinois

**2. Sale or gifts of alcohol made by the licensee/s above limited to the following location**

Illinois

**3. Period:** From 01 December 2020 to 01 December 2021 both days at 12:01 a.m. Central Standard Time

**4. Insurance to be effected with certain UNDERWRITERS AT LLOYD'S, LONDON: 100%**

**5. Classification of Risk**

RESTAURANT

**Amount of Gross Annual Receipts**

\$80,000

<b>Total Premium:</b>	<b>\$912.00</b>
<b>Policy Fee:</b>	<b>\$25.00</b>
<b>Agency Fee:</b>	<b>\$30.00</b>

**Total Payable: \$967.00**

**LIMIT OF LIABILITY**

Combined Single Limit **\$1,000,000**

**FORMS ATTACHED:**

**LH 12 (01/07)**

**AIF 2273**

**COVERAGE IS SUBJECT TO SIGNED AND DATED APPLICATION. PLEASE REFER ANY REQUEST TO BIND TO COVERHOLDER.**



# Certificate of Completion

**American  
Safety Council**

JAKE ROSKO

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Has diligently and with merit completed the  
On-Premise BASSET Alcohol Certification on 10/7/2020

from the American Safety Council.



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Jeff Pairan



## Illinois BASSET Training

This card certifies that:

**JAKE ROSKO**

has completed the  
On-Premise BASSET Alcohol Certification

A handwritten signature in black ink, appearing to read "Jake Rosko", written over a horizontal line. Below the signature, the text "Certified" is faintly visible.

Certified

**11/6/2020**

Exp. Date

PREP TABLE  
84 X 24

BREAD TOASTER

SANDWICH COOLER  
36 1/4 X 30 1/2

REACH IN COOLER  
52 X 34

HAND  
SINK

FIRE EXTINGUISHER

PREP TABLE  
60 X 24

**KITCHEN**

**245 SQ FT**

EXIT SIGN

ELECTRIC DOUBLE OVEN

PREP SINK

3 DEPARTMENT SINK  
90 X 24

EXIT SIGN

FIRE EXTINGUISHER

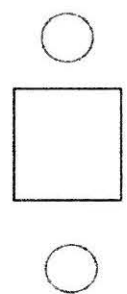
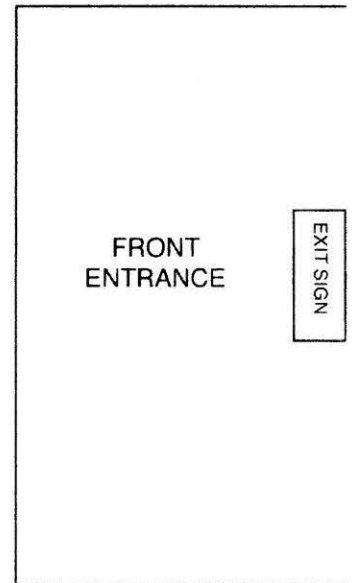
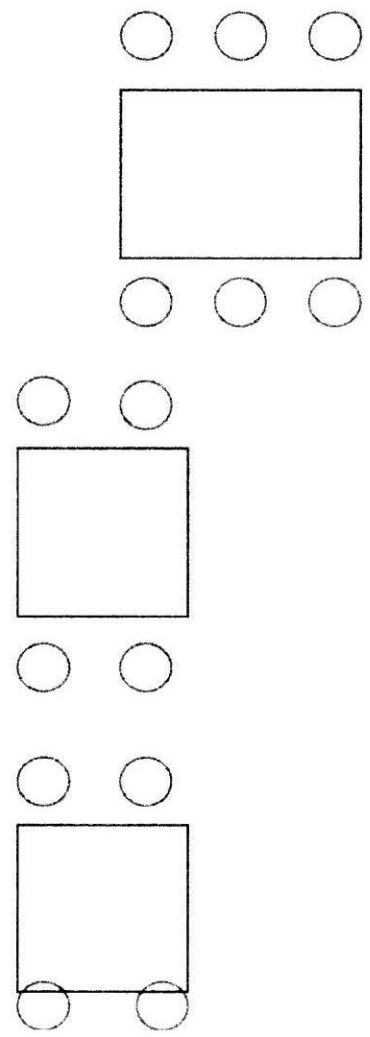
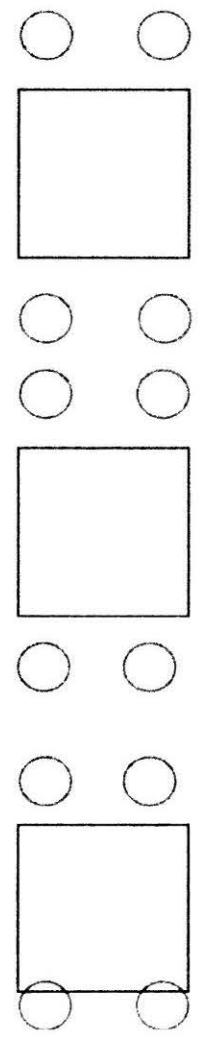
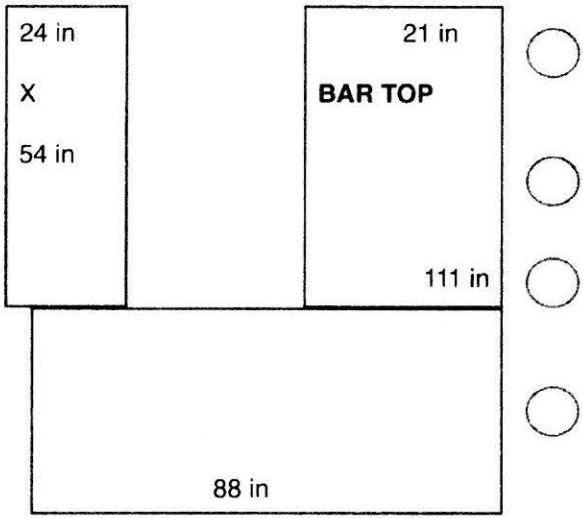
POS STATION/  
CASH  
REGISTER

DINNING ROOM

HAND  
SINK

BAR  
98 SQ FT

DINING  
607 SQ FT



# KNEAD : urban eatery

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gourmet sandwiches, bar & market

Our focus at KNEAD: urban eatery is giving our guests the best quality food around. We will have a casual walk up service to order your meal. We specialize in gourmet sandwiches built with daily fresh baked bread. The sandwiches that we will offer have influences from all over the world. Those sandwiches will include, but not be limited to: Korea, India, Italy and, of course, some staples from the United States. And what pairs perfectly with a sandwich? Beer. KNEAD: urban eatery will offer great local beers, a few wine options and cocktails. Located inside KNEAD we will offer a market for guests to enjoy some of our favorites to bring home. That will include our fresh baked bread, homemade pastas provided by our sister restaurant Osteria Bigolaro located at 317 W. State St. Geneva, IL, as well as a few other great options. We will operate for lunch and dinner 7 days a week. Our hours of operation will be 11am-9pm.

# KNEAD : urban eatery

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**gourmet sandwiches, bar & market**

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## TO SHARE

### **meatballs 8**

shishito peppers & sambal aioli

### **onion bread 10**

caramelized onion stuffed bread with  
smoked cheddar cheese sauce

## TARTINES

### **squash 12**

house made strachettella cheese, butternut  
squash, pumpkin seeds, brown butter  
vinaigrette & sage

### **avocado 12**

radish, soft boiled egg, pickled red onion

## SALADS

### **brussels caesar 11**

shaved brussels sprouts, mixed greens,  
homemade caesar dressing, bread  
crumbs, red onion

### **+chicken 3**

### **fall 11**

mixed greens, red onion, squash  
currants, pumpkin seeds & pine nut  
vinaigrette

## SANDWICHES

served with kettle chips

### **caprese 10**

tomato jam, stracciatella cheese  
pesto aioli & arugula

### **porchetta 12**

pork belly, fig jam, garlic aioli, pickled red onions  
arugula

### **calabrian hot chicken 12**

chicken thigh, calabrian pepper hot sauce, coleslaw &  
pickles

### **butter chicken 12**

chicken thighs, indian makhani sauce  
pickles & cilantro

### **korean bulgogi beef 12**

braised beef & kimchi style hot giardiniera

### **pastrami 12**

smoked and peppered beef brisket, mustard, swiss cheese  
pickles served on our fresh baked rye bread

## DRANKS

### **non-alcoholic beverages 3**

sprite  
coke  
diet coke  
san pellegrino regular /  
flavored  
coffee  
espresso  
latte

### **beer 6**

crystal lake brewing beach blonde  
crystal lake to much cologne- kolsche ale  
moretti la rossa - doppelbock  
moretti - golden lager  
two brothers domaine dupage - country  
ale  
two brothers pinball - pale ale  
penrose taproom ipa

### **cocktails 10**

spritz  
old fashion  
manhattan  
martini  
gin & tonic  
margarita