

AGENDA ITEM EXECUTIVE SUMMARY Agenda Item number: 4c Recommendation to approve a Proposal for a B1 Liquor License Application for MOD Pizza Located at 845 S. Randall Road, 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):

MOD Pizza is located in a new building that is currently under construction with an anticipated opening in January 2021. Beer and wine are a part of this national chain's menu.

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

Recommendation/Suggested Action (briefly explain):

Recommendation to approve a proposal for a B1 Liquor License application for MOD Pizza located at 845 S. Randall Road, St. Charles.

Police Department

Memo



Date: 11/2/2020

To: The Honorable Ray Rogina, Mayor-Liquor Commissioner

From: James Keegan, Chief of Police

Re: Background Investigation-845 S. Randall Road (Class B) dba Mod Pizza (MOD

Super-Fast Pizza LLC)

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're aware, this location is currently under construction and is a national chain that features fast-casual pizza and salads. Alcohol sales (beer & wine) account for about 5% of their total sales. Mod anticipates opening in January of 2021.

The site location/floor plans and the corresponding application materials were reviewed by my staff. We also reviewed the business plan and menu. We found nothing of a derogatory nature that would preclude either the site location or the applicant(s) from moving forward with an on-site consumption license, subject to City Council approval with the following contingencies:

- This site is not yet built out but building plans and seating plans appear to
 adequate and sufficient (see attachment). The Liquor license would be contingent
 upon an occupancy permit being issued from the Fire Department and final
 inspection by the Building Department.
- Although a local manager has been selected and has ties to our area (former manager at Pheasant Run), limited hiring has taken place so our background is limited at this point.

This is a 3,000 square foot restaurant with dedicated outdoor dinning space. The hours of operations are as follows:

M-T 10:30 am to 10:00 pm

F-S 10:30 am to 11:00 pm

S 10:30 am to 10:00 pm

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

LIQUOR APPLICANT BACKGROUND CHECK LIST



APPLICANT(S): Orien J. Darby		
BUSINESS: Mod Pizza / MOD Super Fast Pizza,	LLC.	
ADDRESS: 845 South Randall Road		
	REQUESTED	COMPLETED
APPLICATION		X
BUSINESS PLAN/FLOOR PLAN/MENU		X
LEASE (OR LETTER OF INTENT)	·	X
BASSET CERTIFICATE(S)		X
FINGERPRINTS (ALL MANAGERS)		X
DRAM SHOP (CERTIFICATE OF INSURANCE)		X
TLO		X
I-CLEAR		NA
CERTIFICATE OF NATURALIZATION (IF APPLICABLE)		NA
POLICE RECORDS CHECK		X
APPLICANT'S HOMETOWN RESIDENCY LETTER		NA
ILLINOIS LIQUOR COMMISSION		X
SITE VISIT		X
* COMMENTS: Original address on application was 839 S. I 845 S. Randall Rd.	Randall Rd. but the cor	rect address is
INVESTIGATOR ASSIGNED: Detective Losurdo Commander Majewski	60 00	
SUPERVISOR REVIEW: Commander Majewski	716311	

Police Department





To: Commander Eric Majewski

From: Detective John Losurdo

Re: Liquor License Background: MOD Pizza / MOD Super Fast Pizza, LLC. (License

Class: B)

Applicant



Application

This application was received on, or around, 03/05/2020. The application was missing a copy of the Dram Shop Certificate of Insurance and since no managers have been selected yet, no BASSET certificates were included. The investigative release form was not included so one was emailed to Darby to complete and send back on 03/18/2020. Additionally, Darby informed he would be the on-site Manager for the Saint Charles location. Due to this, I also requested a copy of Darby's BASSET certification in my email. Both documents, being the release form and BASSET certificate, were provided to me by Darby on 03/19/2020. On 03/30/2020 I received a copy of the Dram Shop Certificate of Insurance. The application appears to be complete including floor plans, business plan, and menu.

Records Checks

Darby fingerprinted on 10/28/2020. Responses from both the FBI and Illinois Bureau of Identification show no arrests and nothing that would cause the license to be denied.

A check of Kane, DuPage, and Cook County court records showed no contacts for Darby. A search of McHenry County court records revealed several petty offense traffic citations.

A check of the Illinois Liquor Control Commission showed current active licenses for MOD Pizza in 27 different Illinois locations. Darby informed me he is only associated with the liquor license for the one in Rockford on State Street. I contacted the Liquor Commission of Rockford and was informed that they have had zero issues with MOD Pizza.

Darby currently resides in Cary and has also lived in Lake in the Hills over the past 10 years. Records from Cary PD and Lake in the Hills PD showed no contacts that would preclude Darby from obtaining a liquor license from the city. Darby shows no record of ever being arrested in Illinois. I ran Darby through Aegis Link, Zeus, and New World which all yielded the same results of Darby being noted in the following cases, all of which are SCPD cases:

- 18-19283 1st Degree Murder (witness)
- 18-13649 Assault (complainant)
- 18-484 Unwanted Subject (complainant)

It should be noted that none of Darby's involvement in the above listed cases reflect poorly on Darby. Darby was simply the <u>Manager for Pheasant Run</u> at the time of these incidents which is where all of them occurred.

A check of TLO and I-Clear (law enforcement databases) showed the information concerning the identity of Darby to be accurate and no areas of concern were noted. I ran a criminal history inquiry on Darby which yielded no results.

A Check of the Illinois Secretary of State showed MOD Super Fast Pizza LLC to be in good standing.

Once I was informed MOD Pizza wished to continue their application, I rechecked the previously stated records and nothing new was discovered.

Interview with Applicant

On 03/23/2020 I spoke with Darby over the phone. Darby indicated that the business was originally scheduled to open on June 9th but that date has been moved back indefinitely due to the recent COVID-19 situation. No alcohol is on site yet and he was uncertain as to the construction progress of the project. Darby did inform that he is no longer associated with the Rockford MOD Pizza and is currently the General Manager of the Algonquin MOD Pizza. Darby informed that the MOD Pizza's he has been associated with have never had any liquor violations and they have never been late in payment/renewing their liquor licenses.

On 10/15/2020 I was informed that MOD Pizza wished to continue with their application. Darby stated he would come in the week of 10/19/2020 to be fingerprinted and we would set up a site visit at that time.

On 10/28/2020 Darby came to the Saint Charles Police Department to be fingerprinted. Darby stated he will set up to pay the \$50.00 fee with the City at a later

date. Darby stated that MOD Pizza plans on opening up on either 01/26/2020 or 01/27/2020. Darby explained that the business is still being renovated and that there was no liquor on-site.

Site Visit

On 10/29/2020 I visited the site for MOD Pizza. The interior of the building was still under construction but I found the business layout to be very similar to the floor plan provided with the application. No liquor was on-site. I noticed that the address on the building (845) differed from that on the city application (839). Darby informed that it must have been a mess-up on the application and stated that the correct address was to be 845 S. Randall Rd.

This concludes my background investigation of MOD Pizza (MOD Super Fast Pizza LLC.)

Respectfully,

Detective John Losurdo #364

received 3-5-20

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



ADDITION CHECKING			
APPLICATION CHECKLIST Check items to confirm all are attached to this application	Applicant	Office Use	
Application Fee of \$200 (5.08.070C) Non-refundable	V		
Completed Application for all questions applicable to your business.	V		
Copy of Lease/Proof of Ownership	V		
Copy of Dram Shop Insurance or a letter from insurance agent with a proposed quote.	Ø		Pendin
Copy of Articles of Corporation, if applicable.	Ø		
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.	Ø		
Copy of Site Plan for Establishment (Drawn to scale including the parking lot, patio and/or deck, outdoor seating).	V		
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.	V		
Copy of Business Plan, to include: Hours of Operation Copy of Menu Whether or not live music will be played at this establishment Will there be outdoor seating and/or outdoor designated smoking area Do not include a marketing or financial plan with this business plan	V		
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.	Ø		
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.	ಠ		
Alcohol Tax Acknowledgement and Business Information Sheet			Pendin
OFFICIAL USE ONLY 364 Signature of Investigating Officer Badge Num	Defact Va	(
Approval Recommended* Approval NOT Recommended	NO CIDE DEPARTMENT	DECUMPENALITY	
Signature of Investigating Officer Approval Recommended* Approval NOT Recommended 11-2-2-	mbér & Rank		š.

LICENSE INFORMATION:		Date Appli	cation Received:	
OA Package \$3200-3600)			
⊙B Restaurant \$2400-36				
OC Tavern \$2400-3600	500	☐ Late N	ight Permit 1:00am \$800 (B/C only)	
		☐ Late N	ight Permit 2:00am \$2300 (B/C only)	
Hotel/Banquet/Arca	da/Q-Center/Entertainment	t/Club - \$varies		
OG Brewery/Restaurant	or Site License - \$varies			
*Licenses are valid until Api	for A, B, C, D, G are reduced by ril 30 following issuance and a r	50% for annual renewals and licenses issurenewal application is required for the nex	ed after Nov 1.	
APPLICANT INFORMATION		required jo. the nex	(5.08.040)	
-				
Type of Business: O In. Business Name:	dividual O Partnership	Ocorporation Oother (explain	n):	
MOD PIZZA				
3. Business Address: 839 S. RANDALL ROAD, S	ST. CHARLES, IL 60174			
4. Type of Business (5.08.070-3):	5. Length of Time in this	6: Value of merchandise that norma	ally will be in inventory when in	
RESTAURANT	Business (5.08.070-4):	operation (5.08.070-5): \$		
7. Business Phone:	SEPT. 2014	ZERO		
PENDING	8. Business E-mail: LICENSING@MODPIZZA.COM	9. Business Website: WWW.MODPIZZA.COM	10: Illinois Tax ID Number:	
11. Applicant/Contact Person		12. Title:	4 100-2997	
14. Applicant Home Address.	and all addresses for the la	LICENSING MANAGER		
Current: 1305 by Lane, Apt 104, Napen 1717 Bellevue Ave, Apt 403, Seattle, W. 2621 Magnolia Ln W, Seattle, WA 98199 655 Crockett Street, Seattle, WA 98109	A 98122 Bibliotechnaya stree 1903 Ontario Tower		Lakeview Blvd E, Apt 6, Seattle, WA 98102	
	DL#: D # 3406-6189-965R	16. Date of Birth:	17. Birthplace:	
18. If Corporation, Corporation	n Name	12/24/1989	Palatka, Russia	
MOD SUPER FAST PIZZA, 19. Corporation Address (city				
PO BOX 6939,	BELLEVILE 1	ΜΛ 09009		
	BELLEVOL,	VVA 90006		
ADDITIONAL				
		6 interest), and MANAGER INFOR	MATION	
ull Name, include middle ini		Title: LLC N	MANAGER/CEO	
Birthdate: Birthplace	Driver	· U	ne Phone:	
ome Address, and all address	ses for the last 10 ve	Ema	il Address:	

Birthdate:	Birthplace: and all addresses for the last 1	Driver's License#: 0 years:		Home Pi	,			
Full Name, include middle initial: Orien J. Darby Title: RESTAURANT MANAGER								
Birthdate:	Birthplace:	Driver's License#:	<u> </u>	Home Ph	none:			
Home Address	and all addresses for the last 1	0 years:		Email Ad	ddress:			
Home Address,	and an addresses for the last 1	0 years.		oj.darby@modpizza.com				
				-,	, , , , , , , , , , , , , , , , , , , ,			
BUSINESS EST	ABLISHMENT LOCATION IN	FORMATION						
1. Exact Street	Address for liquor license:	2. # Parking Spaces:	3. Outside Dinin	ig s.f.	4. Total Building s.f.:			
839 S. R	ANDALL ROAD		[17.20.020-R]: 350 sf.		2,920 SQ. FT.			
5. Total # Seats 142		6. Live Entertainmen NOT APPLICABLE	t Area s.f. [5.08.010	·H]:				
7. Brief Busines	7. Brief Business Plan description based on type of establishment listed above (5.08.070-6):							
FAMILY ST	YLE RESTAURANT WI	TH INCIDENTAL	LIQUOR SAL	.ES				
1								

1.	Every application for Liquor license shall have attached thereto a site drawing of the proposed licensed premises, drawn to scale showing the following: 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 licensee to operate and/or maintain the licensed premises in any manner inconsistent with the approved site drawing.

C	ORPORATION / PREMISES QUESTIONS								
	If applicant is an individual or partnership, is each and every person a United States citizen (5.08.070-2)? • Yes								
1.	Is any individual a naturalized citizen? Oyes ONo								
	If yes, print name(s), date(s), and place(s) of naturalization:								
2.	Is the premises owned or leased (5.08.070-6A)? Owned • Leased								
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 (5.08.070-68):								
	Name of Building Owner: ST. CHARLES RETAIL MANAGEMENT, LLC Phone Number: N/A								
Aduless of Building Owner:									
	30200 TELEGRAPH RD. STE 205, BINGHAM FARMS, MI 48025 N/A								
	Mailing Address of Building Owner (if different):								
	SAME AS ABOVE								
	Name of Building Owner: N/A Phone Number:								
	Address of Building Owner: E-mail Address:								
	Mailing Address of Building Owner (if different):								
	Name of Building Owner: N/A Phone Number:								
	Address of Building Owner: E-mail Address:								
	Mailing Address of Building Owner (if different):								
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? OYes ONo								
	If yes, please list the business name(s) and address(es): N/A								
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? OYes ONo								
	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)								
	Are any improvements planned for the building and/or site that will require a building permit? O Yes O No								
	If yes, has a building permit been applied for? •Yes •No Date of permit application 01/13/2020								
	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: N/A								
-									

8.	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)?							
	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? OYes ONo							
9.	List previous liquor licenses issued by any State Government or any subdivision thereof (5.08.070-9). Use additional paper if necessary.							
	Government Unit: ATTACHED LIST OF IL LOCATIONS Location, City/State:							
	Date: Special Explanations:							
	Date. Special Explanations.							
	Government Unit: Location, City/State:							
	Date: Special Explanations:							
	Have any liquor licenses possessed ever been revoked (5.08.070-9)? OYes No							
	Trave any inquor incerses possessed ever been revoked (5.06.070-5):							
10.	If yes, list all reasons on a separate, signed letter accompanying this application. Has any director, officer, shareholder, or any of your managers, ever been denied liquor license from any jurisdiction?							
	©Yes							
	If yes, proceed to Question 15. If more space is needed, please attach a separate sheet of paper with the information.							
11.	Complete ONLY if yes was answered to the question above (10):							
	Name: NOT APPLICABLE Name of Business:							
	Position with the Business: Date(s) of Denial:							
	Reason(s) for Denial of License:							
12.	Date of Incorporation (Illinois Corporations) (5.08.070-10):							
	02/20/2008							
	Date qualified under Illinois Business Corporation Act to transact business in Illinois (Foreign Corporation): 09/03/2014							
13.	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)?							
	⊙ Yes ⊙ No							
	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?							
	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? OYes ONo							
	Have you ever been convicted of a gambling offense? OYes (If a partnership or corporation, include all partners and the local manager(s).)							

	OYes C	your employees refuse to serve or so No	ell alcoholic liquor to an intoxicated pe	erson or to a minor?
14.	All individual ow interest of the si		nd/or persons holding directly or bene page 2 of this application must be fing	ficially more than five (5) percent i erprinted by the City of St. Charles
	Has this been do	one? Oyes O No		
	If yes, date(s):	MANAGER TO BE DETERM	MINED	
15.	Has the applican	t attached proof of Dram Shop Insur	ance to this application or already furn	nished it to the City of St. Charles
	(5.08.060)?	Yes ONo If a	already furnished, date of delivery: N	A
16.	Is the premises we home for veterar Q Yes Q N	vithin 100 feet of any real property ons, their wives/husbands, or children	f any church; school; hospital; home for and/or any military or naval station (
Please clerks applic	able. Add another	quired to have B.A.S.S.E.T training or d to make alcoholic liquor sales. Incl page, if needed.	n this page – include all managers, assi ude copies of certificates for manager	stant managers, bartenders, and sonly and mark Manager if
Name	(First, Middle, Las	it):		Birthdate:
Home	Street Address, Inc	cl City, State, Zip:		
Date o	of Course:	Place Course was Taken:	Certificate Granted? Y/N	Expiration:
Name	(First, Middle, Last	t):		Birthdate:
Home	Street Address, Inc	l City, State, Zip:		
Date o	f Course:	Place Course was Taken:	Certificate Granted? Y/N	Expiration:
Name	(First, Middle, Last):		Birthdate:
Home S	Street Address, Incl	City, State, Zip:		
Date of	Course:	Place Course was Taken:	Certificate Granted? Y/N	Expiration:
Name (First, Middle, Last)	:		Birthdate:
Home S	treet Address, Incl	City, State, Zip:		
Date of	Course:	Place Course was Taken:	Certificate Granted? Y/N	Expiration:
NEW M	ANAGEMENT REQ	UIREMENTS		
vhenev	ver a new manager	comes on board, the City must be	notified and that person must be fing	erprinted.
. is the	establish	ment's responsibility to keep copies	of all B.A.S.S.E.T. certificates on file	for their employees.

COMMENTS / ADDIT	TIONAL INFORMATION					
COMMENTS/ADDI	HONALINION					
Business Name:						
	AST PIZZA, LLC D/B/A MOD PIZZA					
SIGNATURES						
h.						
	Applicant & Signature					
V 0	Telonians	20, 20				
Subscribed and	wein before me the day of 10 Druck	20_0				
ا الحدي	Applicant Signature Signature Applicant Signature	Houll				
(30)	Notary Public					
	MAY 26. 20 12					
ADDENDUM TO	RETAIL LIQUOR LICENSE APPLICATION					
	Name of Applicant:					
Date: 10/3 º/	2020 Oren J. Darby					
Name of Busines	MOD P.ZZa					
Address of Rusin	Address of Rusiness: Ward Number:					
245 5	Randall Rd. Suint Charles, FL 60175	5				
Pursuant to the pr	rovision of the City of St. Charles Municipal Code, Chapter 5.08, Alcoholic	Beverages, the following guide shall be in				
effect for the inve	stigation of an applicant for a Retail Dealer's Liquor License:					
1. Date on whi	ch applicant will begin selling retail alcoholic liquors at this location:					
1/27/						
2. Is the location	on within 100 feet of any church; school; hospital; home for the aged or	indigent persons; home for veterans, their				
wives/husba	ands or children; or any military or naval station?					
		and a hotal offering rectaurant service.				
3. If the answer	er to question 2 is yes, answer the following: Is applicant's place of busing	alcoholic liquors is not the principal				
regularly or	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 answ	If yes, answer a, b and c:					
a Sta	a State the kind of such business:					
b. Giv	b. Give date on which applicant began the kind of business named at this location:					
c. Ha	 Give date on which applicant began the kind of such purpose prior to February 1, 1934, 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					
	TES LINO					
		Control have such a misse have				
4. If premises	for which an alcoholic liquor license is herein applied for are within 100	teet 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? \(\subseteq \text{Yes} \) \(\subseteq \text{No} \)
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:
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? Yes \(\sigma\) 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.? Yes 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? Yes 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: Yes No
12.	From your observation and investigation, has applicant—to the best of your knowledge—truthfully answered all questions?
	X Yes □ No
	If no, state exceptions:
	Have all persons named in this application been fingerprinted? Yes 🗆 No
13.	Fingerprinted by: Detective would 304 Date: 10/38/7000
14.	Other necessary data:

1. The nature of the proposed establishment

MOD is a fast-casual restaurant concept that will occupy approximately 2,920 square feet of interior commercial space, along with approximately 500 square feet dedicated to an outdoor patio, all of which will be located in a shopping center. MOD expects to accommodate approximately 34 customers within the interior of the restaurant and an additional 32 customers in its outdoor patio. As with its other Illinois locations, MOD anticipates that its sales of beer and wine will not exceed 5% of its overall gross sales. The hours of operation for Mod Pizza are as follow; Monday through Thursday 10:30am-10:00pm, Friday and Saturday 10:30am-11:00pm and Sunday 10:30am-10:00pm.

- 2. Copy of the menu [ATTACHED]
- 3. No Entertainment to be provided at Mod Pizza located in St. Charles.
- 4. There will be outdoor seating. See attached the floor plan.

MOD PIZZA

The ORIGINAL SUPER FAST PIZZA

BUILD YOUR DWN.

GRECOMB LOOK of CORP. MS.

CHOOSE A MODICEASSIC

for the same arise

Listundard plants with

MEGA 50 Pm.

Choose Sold of Corp.

Choose Sold of Corp.

MEGA 50 Pm.

Choose Sold of Corp.

Choose Sol

- MADDY only \$6.17 Classic Cheese Pizza
- MAD DOG Mozzarella, Pepperoni, Mild Italian Sausage. Crumbled Meatballs, MOD Red Sauce
- TRISTAN

 Mozzarella, Asiago,
 Roasted Red Peppers,
 Mushrooms, Pesto
- SIENNA
 Mozzarella, Parmesan,
 Garlic, Fresh Rosemary,
 Red Onions, Mushrooms
- Mozzarella, Parmesan, Artichokes, Garlic, Dollops of MOD Red Sauce
- 6 JASPER
 Mozzarella, Mushrooms,
 Spicy Italian Sausage,
 MOD Red Sauce

DILLON JAMES

Mozzarella, Asiago, Fresh Chopped Basil, Garlic, Sliced Tomatoes, MOD Red Sauce

S ULYSSES

Mozzarella, Parmesan, Asiago, Gorgonzola, Fresh Chopped Basil, Garlic, Mushrooms

- CALEXICO it's hot!
 Mozzarella, Gorgonzola,
 Chicken, Jalapenos,
 Hot Buffalo Sauce,
 MOD Red Sauce
- CASPIAN

Mozzarella, Gorgonzola. Barbeque Chicken. Barbeque Sauce. Red Onions

MOD KNOTS

Garlic, Cinnamon. Chocolate. Strawberry

\$2.77

BUILD YOUR OWN

OR W

CHOOSE A MODICLASSIC

SALADS

MINI \$4.47

MOD \$7.17

MEGA \$9.17

STANDARD

Greens, Roasted Red Peppers, Asiago

DELUXE

Greens, Chicken, Salami, Green Bells, Garbanzos, Tomatoes, Olives, Basil, Parmesan

CAESAR

Romaine, Tomatoes, Asiago, Parmesan, Lemon Wedge

PIZZA SALAD

Enjoy your salad on a warm 11" Asiago crust

\$8.17



- OUR PROMISE -

OUR MENUIS SIMPLE
BUT YOUR OPTIONS ENDLESS...
FEEL FREE TO MODIFY

IF YOU ARE NOT COMPLETELY
HAPPY WITH YOUR PIZZA
LET US MAKE YOU A NEW
ONE ON THE HOUSE

WE ARE MOD

- PIZZA & SALAD TOPPINGS -

SAUCE

MOD Red Sauce MOD White Sauce Pesto BBQ Sauce Ranch Garlic Rub Hot Buffalo Sauce

MEAT

Italian Sausage (Mild or Spicy)
Pepperoni
Salami
Grilled Chicken
Crumbled Meatbails
Bacon

Canadian Bacon SPICES

Anchovies

Garlic Rosemary Chopped Basil

EXTRAS

Spinach
Mushrooms
Tomatoes
Black Olives
Jalapenos
Artichokes
Red Onion
Pineupple
Sun Dried Tomatoes
Green Beil Peppers
Roasted Red Peppers
Papperoncini Peppers
Kalamata Olives

CHEESE

Mozzarella Parmesan Feta Cheese Asiago Gorgonzola

- DRINKS -

SELF SERVE SODA, ICED TEAS, LEMONADES MILKSHAKES. DRAFT BEER OR WINE

Vary by store

Order on the at MODPIZZA COM Facility as on Facebook & Twitter

VISIT MODPIZZA COM TO FIND YOUR OLOSEST MOD

ATTACHMENT A List of Illinois locations

MOD_PIZZA LOCATIONS

License No: 1A-1139959

City: ALGONQUIN, IL

Expires: 09/30/2020

Retail Type: ON-PREMISES CONSUMPTION

License No: 1A-1127357

City: BLOOMINGDALE, IL

Expires: 07/31/2020

Retail Type: ON-PREMISES CONSUMPTION

License No: 1A-1141695

City: BOLINGBROOK, IL

Expires: 03/31/2020

Retail Type: ON-PREMISES CONSUMPTION

License No: 1A-1138096

City: BOLINGBROOK, IL

Expires: 04/30/2020

Retail Type: ON-PREMISES CONSUMPTION

License No: 1A-1142538

City: BUFFALO GROVE, IL

Expires: 06/30/2020

Retail Type: ON-PREMISES CONSUMPTION

License No: 1A-1142914

City: CARBONDALE, IL

Expires: 07/31/2020

Retail Type: ON-PREMISES CONSUMPTION

License No: 1A-1135199

City: CHICAGO, IL

Expires: 07/31/2020

Retail Type: ON-PREMISES CONSUMPTION

License No: 1A-1137043

City: CHICAGO, IL

Expires: 01/31/2021

Retail Type: ON-PREMISES CONSUMPTION

License No: 1A-1127064

City: DEERFIELD, IL

Expires: 06/30/2020

Retail Type: ON-PREMISES CONSUMPTION

License No: 1A-1138858

City: DOWNERS GROVE, IL

Expires: 06/30/2020

Retail Type: ON-PREMISES CONSUMPTION

License No: 1A-1140512

City: EDWARDSVILLE, IL

Expires: 10/31/2020

Retail Type: ON-PREMISES CONSUMPTION

License No: 1A-1139471

City: ELGIN, IL

Expires: 08/31/2020

Retail Type: ON-PREMISES CONSUMPTION

License No: 1A-1135499

Expires: 05/31/2020

City: EVERGREEN PARK, IL

Retail Type: ON-PREMISES CONSUMPTION

ATTACHMENT A List of Illinois locations

License No: 1A-1131040

City: GURNEE, IL

Expires: 07/31/2020

Retail Type: ON-PREMISES CONSUMPTION

License No: 1A-1128500

City: KILDEER, IL

Expires: 10/31/2020

Retail Type: ON-PREMISES CONSUMPTION

License No: 1A-1143746

City: LOCKPORT, IL

Expires: 08/31/2020

Retail Type: ON-PREMISES CONSUMPTION

License No: 1A-1137627 City: MACHESNEY PARK, IL Expires: 03/31/2020

Retail Type: ON-PREMISES CONSUMPTION

License No: 1A-1139356

City: MOUNT PROSPECT, IL

Expires: 08/31/2020

Retail Type: ON-PREMISES CONSUMPTION

License No: 1A-1126744 City: NAPERVILLE, IL

Expires: 05/31/2020

Retail Type: ON-PREMISES CONSUMPTION

License No: 1A-1129779

City: NAPERVILLE, IL

Expires: 03/31/2020

Retail Type: ON-PREMISES CONSUMPTION

License No: 1A-1140148

City: NEW LENOX, IL

Expires: 10/31/2020

Retail Type: ON-PREMISES CONSUMPTION

License No: 1A-1137667

City: ROCKFORD, IL

Expires: 03/31/2020

Retail Type: ON-PREMISES CONSUMPTION

License No: 1A-1136914

City: SCHAUMBURG, IL

Expires: 12/31/2020

Retail Type: ON-PREMISES CONSUMPTION

License No: 1A-1128995

City: VERNON HILLS, IL

Expires: 12/31/2020

Retail Type: ON-PREMISES CONSUMPTION

License No: 1A-1138148

City: WAUKEGAN, IL

Expires: 04/30/2020

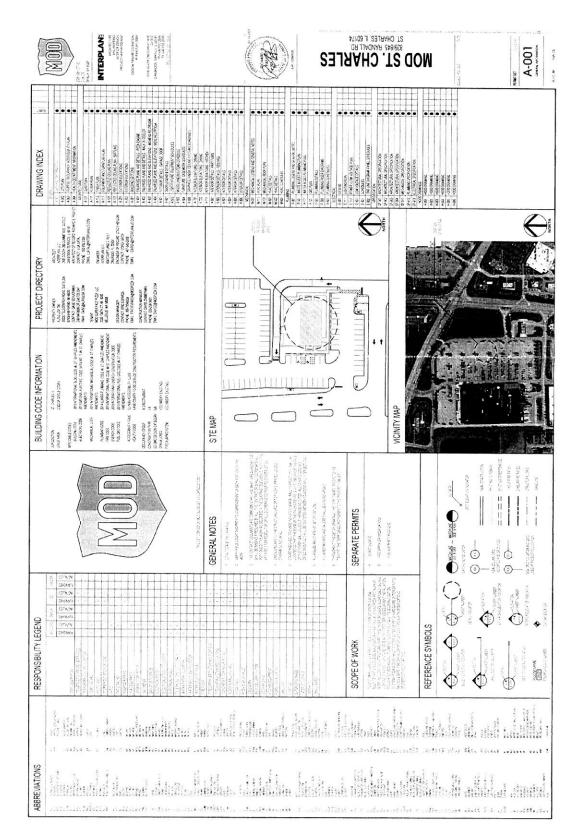
Retail Type: ON-PREMISES CONSUMPTION

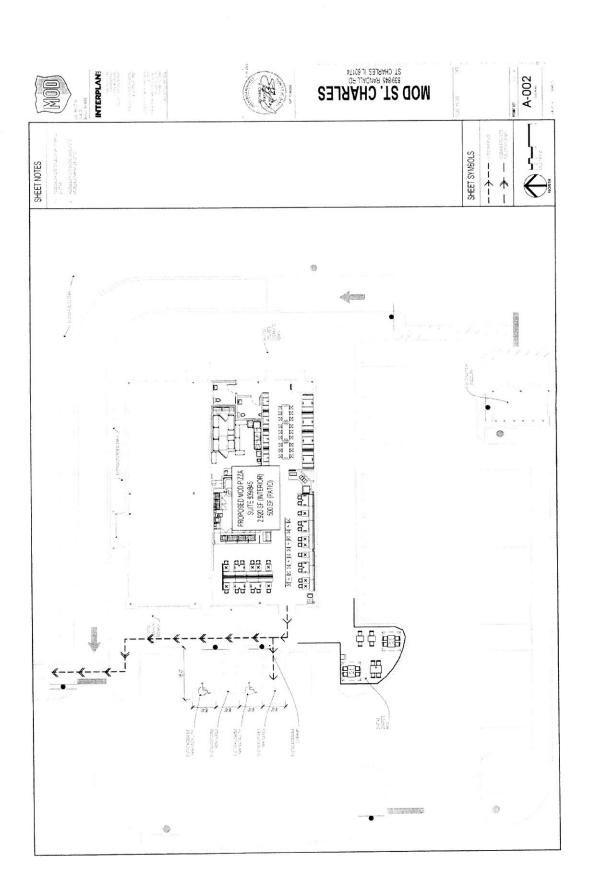
License No: 1A-1135017

City: WILLOWBROOK, IL

Expires: 04/30/2020

Retail Type: ON-PREMISES CONSUMPTION





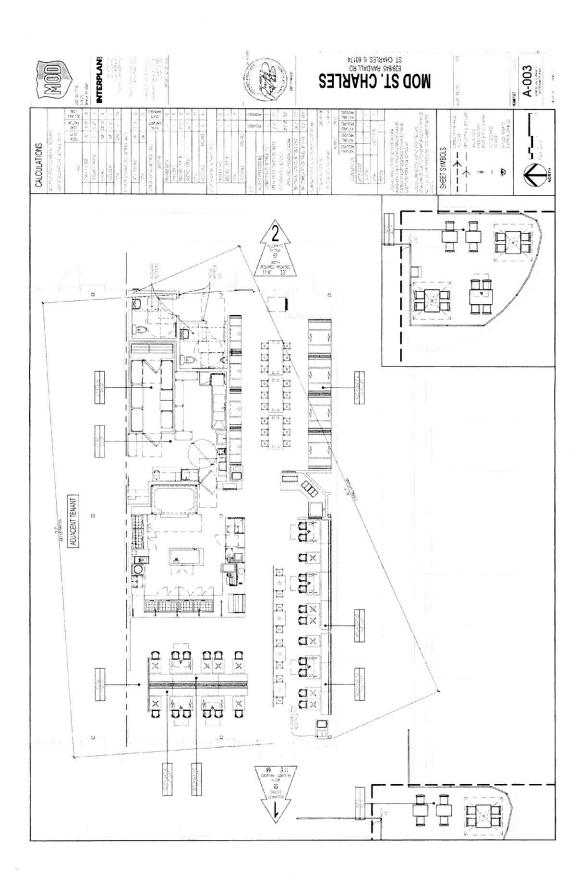
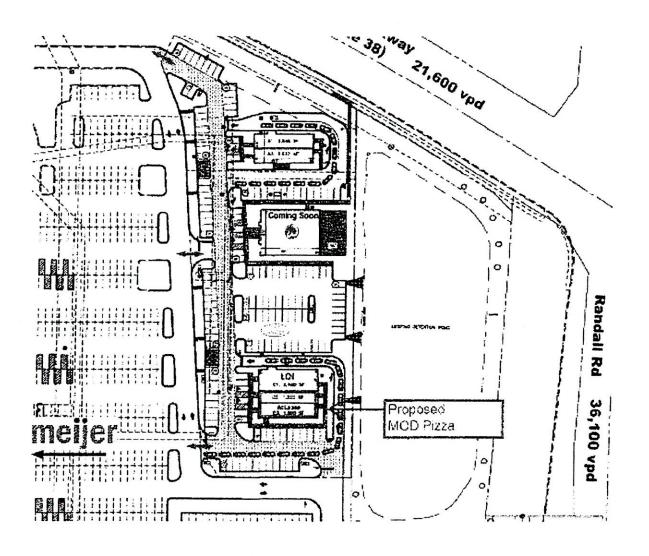


EXHIBIT A

<u>DEPICTION OF PROPERTY WITH LOCATION OF THE PREMISES</u>



BASSET Card



O.J. DARBY 3 SHEFFIELD CT.

CARY IL 60013

August 28, 2017

Letter ID: L0254034768

License No.:

5A-1124536

Expiration Date: License Type: 8/20/2020 Basset Card

Your "Student ID number" is: 9DFG8-HB1G0JK

Your "Trainer's ID number" is: 5A-1124536

Your BASSET Card is located BELOW

DO NOT throw away this letter as you will need your "Student ID number" directly above to re-print your card.

IMPORTANT:

To re-print your card, visit the Illinois Liquor Control Commission website at <u>ILCC.illinois.gov</u> (click on the RESOURCES tab to access the "BASSET Card Lookup" page).

ILLINOIS LIQUOR CONTROL COMMISSION 100 W. Randolph Street, Suite 7-801 - Chicago, IL 60601 BEVERAGE ALCOHOL SELLERS AND SERVERS EDUCATION AND TRAINING [BASSET] CARD

Date of Certification: 8/20/2017 Expires: 8/20/2020
Trainer's IL Liquor License Number: 5A-1124536
O.J. DARBY

Card is not transferrable

MODSUPER

Client#: 787951

ACORD.

COVERAGES

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 3/03/2020

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer any rights to the certificate holder in lieu of such endorsement(s).

PRODUCER	CONTACT NAME:				
USI Insurance Services NW	PHONE (A/C, No, Ext): 206 441-6300 FAX (A/C, No): 6	10-362-8530			
601 Union Street, Suite 1000	E-MAIL ADDRESS: MODSuperFastPizza@usi.com				
Seattle, WA 98101	INSURER(S) AFFORDING COVERAGE	NAIC#			
	INSURER A : Liberty Mutual Fire Insurance Company	23035			
INSURED	INSURER B : Great American Insurance Co.	16691			
MOD Super Fast Pizza LLC	INSURER C:				
Trade Name Mod Pizza	INSURER D:				
PO Box 6939	INSURER E :				
Bellevue, WA 98008	INSURER F:				
COVERAGES CERTIFICATE NUMBER: K1	REVISION NUMBER:				

COV	COVERAGES CERTIFICATE ROLLES TO THE POLICY PEPIOD									
INI	THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.									
INSR LTR		ADDL S	SUBR	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS			
A	Y COMMERCIAL GENERAL LIABILITY	X	X	TB7Z91465235049			EACH OCCURRENCE	\$1,000,000		
^		^	^	15,20110020010			DAMAGE TO RENTED PREMISES (Ea occurrence)	s1,000,000		
	CLAIMS-MADE A OCCUR						MED EXP (Any one person)	s10,000		
							PERSONAL & ADV INJURY	s1,000,000		
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	s 2,000,000		
1	PRO-						PRODUCTS - COMP/OP AGG	s2,000,000		
	POLICY X JECT X LOC							\$		
A	AUTOMOBILE LIABILITY	х	X	AS7Z91465235029	08/15/2019	08/15/2020	COMBINED SINGLE LIMIT (Ea accident)	\$1,000,000		
^	1	^	^	7.0.20110020025			BODILY INJURY (Per person)	\$		
	OWNED SCHEDULED						BODILY INJURY (Per accident)	\$		
	HIRED NON-OWNED						PROPERTY DAMAGE (Per accident)	\$		
1	AÜTÖS ONLY AUTOS ONLY							\$		
В	X UMBRELLA LIAB X OCCUR	Х	X	UMB9999754	08/15/2019	08/15/2020	EACH OCCURRENCE	\$25,000,000		
-	EXCESS LIAB CLAIMS-MADE			G.III.Zeccerio			AGGREGATE	s25,000,000		
	10.000							\$		
A	WORKERS COMPENSATION		Х	WC7Z91465235079	08/15/2019	08/15/2020	X PER STATUTE X OTH-			
^	AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE		()	Includes WA			E.L. EACH ACCIDENT	s1,000,000		
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N/A		Stop Gap			E.L. DISEASE - EA EMPLOYEE	s1,000,000		
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	s2,000,000		
A	Liquor Liability	X		TO2Z91465235059	08/15/2019	08/15/2020	\$1,000,000 Ea. Caus	se		
^	Elquoi Elability	1					\$2,000,000 Aggrega	ite		
				47						
-				D 404 Additional Remarks Schodule may	he attached if m	ore space is requ	ired)			

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Sche The following are additional insured and coverage is primary and non-contributory on the general liability, liquor liability, automobile, and umbrella liability policies per the attached endorsements/forms, as required by written contract. Waiver of subrogation applies on the general liability, automobile, and umbrella liability polices per the attached endorsements/forms, as required by written contract. Waiver of subrogation applies on the workers' compensation policy only when specifically (See Attached Descriptions)

CERTIFICATE HOLDER	CANCELLATION
City of St. Charles 2 E. MainStreet Saint Charles, IL 60174	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE
	Deops D. Homen II

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