



AGENDA ITEM EXECUTIVE SUMMARY

Agenda Item number: 5

Title:

Recommendation to approve a Proposal for a C1 Liquor License Application for R-House Located 214 W Main St, St. Charles.

Presenter:

Police Chief James Keegan

Meeting: Liquor Control Commission

Date: October 15, 2018

Proposed Cost: \$

Budgeted Amount: \$

Not Budgeted:

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

This is a new liquor license request for the former Voodoo Room location, which is located on the 200 block of East Main Street. The R-House owners also own and operate St. Charles Motorcars in St. Charles.

Attachments *(please list):*

Memo, Application, Floor Plan, BASSET, Insurance

Recommendation/Suggested Action *(briefly explain):*

Recommendation to approve a Proposal for a C1 Liquor License Application for R-House Located at 214 W Main Street, St. Charles.



Memo

Date: 10/11/2018
To: The Honorable Ray Rogina, Mayor-Liquor Commissioner
From: James Keegan, Chief of Police
Re: Background Investigation- "R House" (214 W. Main Street)

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.

This location formerly housed both Dawn's Voodoo Room/Dawn's Boatyard and Acquaviva Winery.

As is customary procedure, a detective was assigned this investigation and reviewed both the site location/floor plans and the corresponding application material. In addition, a review process took place by our Fire Department, Finance Department and Community/Economic Development. Each department reviewed the information submitted subject to their purview/area of responsibility and no issues were noted.

We too as a police department found nothing of a derogatory nature that would preclude either the site location or the applicants from moving forward with both liquors sales and on-site consumption, subject to City Council approval.

This is a Class B request and although very limited food will be offered or sold (similar to the The House Pub and The Global Brew House), food will be encouraged to be ordered from local businesses outside of their selection of small plates, chips and snacks. The applicants do own and operate St. Charles Motorsports and have some experience in the food/bar business.

Please see the detailed drawing and floor plan for further information as well articles of incorporation paperwork, the lease agreement and Dram Shop information. A business plan was submitted and they are seeking a Late Night Permit (1am).

Thank you in advance for your consideration in this matter.

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: _____ New Application Renewal Application

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 type="checkbox"/>
Copy of Lease/Proof of Ownership	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Copy of Dram Shop Insurance or a letter from insurance agent with a proposed quote.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Copy of Articles of Corporation, if applicable.	<input checked="" 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 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 type="checkbox"/>
Copy of Business Plan, to include: <input type="checkbox"/> Hours of Operation <input type="checkbox"/> Copy of Menu <input type="checkbox"/> Whether or not live music will be played at this establishment <input type="checkbox"/> Will there be outdoor seating and/or outdoor designated smoking area <input type="checkbox"/> Do not include a marketing or financial plan with this business plan	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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"/>
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 checked="" 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): S Corp

B. Business Name: SCMC ENTERPRISES DBA "R"-HOUSE

C. Business Address: 214 WEST MAIN STREET ST CHARLES

D. [Redacted]

E. Business Phone: 1-224-227-0073 F. Business E-mail: Bruy45@GMAIL.com G. Business Website: New Business

H. Contact Person: JUSTIN ALLEN / BRIAN RUDOWICZ I. Title: OWNER'S J. Phone No.:

K. If Corporation, Corporation Name: SCMC ENTERPRISES, INC

L. Corporation Address (city, state, zip code): 1734 EAGLEBROOK DRIVE GENEVA IL 60134

BUSINESS ESTABLISHMENT LOCATION INFORMATION

A. Type of Establishment: Package Restaurant Tavern Hotel/Banquet/Arcada/Q-Center Other

B. Address applying for liquor license (exact street address): 214 W. MAIN STREET C. Number of Parking Spaces: 0 D. Outside Dining s.f. [17.20.020-R]: 972 E. Holding Bar s.f. [5.08.010-F]: 900

F. Total Building s.f.: 900 G. Total Number of Seats: 26 H. Number of Bar Seats: 16 I. Sale Counter s.f.: J. Live Entertainment Area s.f. [5.08.010-H]: 0

K. Kitchen s.f.: 0 L. Cooler s.f.: 9 M. Dry Storage s.f.: 6 N. Seating Area s.f.: 700 O. Retail/public Area s.f.: 700 P. Service Bar s.f. [5.08.010-O]: 0

Q. Brief Business Plan description based on type of establishment listed above:

MANAGER INFORMATION

Full Name, include middle initial: BRIAN P. RUDOWICZ Title: OWNER/OPP
 Birthdate: [Redacted]

Full Name, include middle initial: JUSTIN A ALLEN Title: OWNER/OPP
 Birthdate: [Redacted]

Full Name, include middle initial: _____ Title: _____
 Birthdate: _____ Birthplace: _____ Driver's License#: _____ Home Phone: _____
 Home Address: _____

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>): 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>): 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

1. If applicant is an individual or partnership, is each and every person a United States citizen (5.08.070-2)? Yes No
Is any individual a naturalized citizen? Yes No
If yes, print name(s), date(s), and place(s) of naturalization:

2. List the type of business of the applicant (5.08.070-3):
BAR/TAVEN

3. Number of years of experience for the above listed type of business (5.08.070-4):
11 YEARS

4. Amount of merchandise that normally will be in inventory when in operation (5.08.070-5): \$
\$10,000

5. Location/address and description of business to be operated under this applied for license (5.08.070-6):
*214 WEST MAIN STREET
SAINT CHARLES IL. 60174*

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

7. 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: *ANGELA DE TONI*
Address of Building Owner: [REDACTED]
Mailing Address of Building Owner (if different):
SAME
Phone Number: [REDACTED] E-mail Address: *MIMARCOJewelers@GMAIL.COM*
Name of Building Owner:
Address of Building Owner:
Mailing Address of Building Owner (if different):
Phone Number: E-mail Address:
Name of Building Owner:
Address of Building Owner:
Mailing Address of Building Owner (if different):
Phone Number: E-mail Address:

8. 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):

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):</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 checked="" type="checkbox"/> Yes <input 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 checked="" type="checkbox"/> Yes <input 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

Hours of operation will be.
Tuesday - Thursday 4:00 pm to 12:00 am
Friday - 4:00 pm to 1:00 am
Saturday - 3:00 pm to 1:00 am
Closed Sunday & Monday

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: BRIAN (First) RUDOWICZ (Last) PAUL (Middle) Manager
Home Street Address: [REDACTED]
City, State, Zip: GENEVA IL 60134
Date of Course: 9/25/18 Place Course was Taken: (Y)
WWW.BASSETIL.COM
Birthdate: [REDACTED] Certificate Granted: (Y) 9/25/18 Expiration: 9/25/2021

Name: JUSTIN (First) ALLEN (Last) A (Middle) Manager
Home Street Address: [REDACTED]
City, State, Zip: GENEVA IL 60134
Date of Course: 9/24/18 Place Course was Taken: (Y)
Birthdate: [REDACTED] Certificate Granted: (Y) 9/24/18 Expiration: 9/24/2021

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.

APPLICATION FOR LATE NIGHT PERMIT

SUPPLEMENTAL TO LIQUOR LICENSE FOR CLASS B/C

To: St. Charles Liquor Control Commission Date:

I now possess or have applied for a liquor license Class

Applicant's Name: BRIAN RUDOWICZ, JUSTIN ALLEN

Name of Business: R - HOUSE

Business Address: 214 W. MAIN ST. ST CHARLES LA 60174

Business Phone: 1-224-227-0073

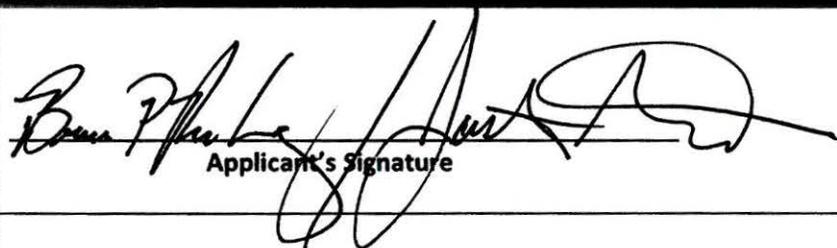
SUPPLEMENTAL PERMIT APPLIED FOR

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


Applicant's Signature

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:	Name of Applicant:
-------	--------------------

Name of Business:

Address of Business:	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:
----	---

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? <input type="checkbox"/> Yes <input type="checkbox"/> No
----	---

3.	<p>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? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, answer a, b and c:</p> <p>a. State the kind of such business:</p> <p>b. Give date on which applicant began the kind of business named at this location:</p> <p>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?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
----	---

4.	<p>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? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>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</p>
----	---

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 type="checkbox"/> No
----	---

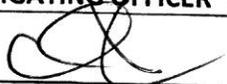
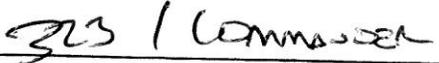
6.	Is there any access leading from premises to any other portion of the same building or structure used for dwelling or lodging purposes and which is permitted to be used or kept accessible for use by the public? (Connection between premises and such other portion of building or structure as is used only by the applicant, his/her family and personal guests not prohibited.) <input type="checkbox"/> Yes <input 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 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: <u>SCPD</u> Date: <u>10-01-18</u>
14.	Other necessary data:

**SIGNATURES
ENDORSEMENTS AND APPROVALS**

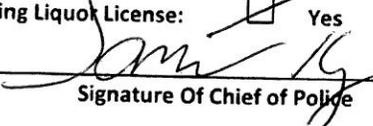
INVESTIGATING OFFICER

Investigating Officer Signature _____ Badge Number & Rank _____

ENDORSEMENT OF THE CHIEF OF POLICE

Recommend Issuing Liquor License: Yes No




Signature Of Chief of Police _____ Date _____

"R"
HOUSE

DOMESTIC BOTTLED BEERS - \$5.00

BUDWEISER	BUD LIGHT
MILLER LITE	COORS LIGHT
LEINENKUGEL	MILLER GENUINE DRAFT
BECK'S (NON-ALCOHOLIC)	BLUE MOON

IMPORTED BOTTLED BEERS - \$6.00

CORONA EXTRA	CORONA LIGHT
--------------	--------------

GOURMET COCKTAILS - \$10.00

MARGARITA	MOJITO
COSMOPOLITAN	BLOODY MARY
MARTINI	MAI TAI
PINA COLADA	DAIQUIRI

WINE - \$8.00 PER GLASS

MERLOT	CABERNET SAUVIGNON
PINOT NOIR	CHARDONNAY

FOOD CAN BE ORDERED FROM LOCAL RESTAURANTS
SMALL PLATES, CHIPS AND SNACK MIXES WILL BE SERVED

FORM **BCA 2.10**
ARTICLES OF INCORPORATION
 Business Corporation Act

Filing Fee: \$150
 Franchise Tax: \$ 25
Total: \$175

File #: 71996573

Approved By: JXR

FILED
SEP 26 2018
Jesse White
Secretary of State

1. Corporate Name: SCMC ENTERPRISES, INC.

2. Initial Registered Agent: JOHN P. COONEY

	First Name	Middle Initial	Last Name
Initial Registered Office:	<u>1311 BUTTERFIELD RD STE 308</u>		
	Number	Street	Suite No.
	<u>DOWNERS GROVE</u>	<u>IL</u>	<u>60515-5625</u>
	City	ZIP Code	County
			<u>DU PAGE</u>

3. Purposes for which the Corporation is Organized:
 The transaction of any or all lawful businesses for which corporations may be incorporated under the Illinois Business Corporation Act.

4. Authorized Shares, Issued Shares and Consideration Received:

Class	Number of Shares Authorized	Number of Shares Proposed to be Issued	Consideration to be Received Therefor
COMMON	1000	100	\$ 10000

NAME & ADDRESS OF INCORPORATOR

5. The undersigned incorporator hereby declares, under penalties of perjury, that the statements made in the foregoing Articles of Incorporation are true.

Dated	<u>SEPTEMBER 26</u>	,	<u>2018</u>		<u>1311 BUTTERFIELD RD STE 308</u>
	Month & Day		Year		Street
<u>JOHN P. COONEY</u>			<u>DOWNERS GROVE</u>	<u>IL</u>	<u>60515</u>
Name			City/Town	State	ZIP Code

Executive Summary

R House will be a modern gathering place located in the downtown area of St. Charles, IL. By providing exemplary service with a vast selection of beers, wine and gourmet drinks in a relaxed comfortable setting, *R House* will be the premier bar that attracts 'the locals' and many others from surrounding suburbs.

The success of the bar stems from its owners, Brian Rudowicz and Justin Allen, who are no strangers to operating a business in St. Charles. St. Charles Motorcars has been open since March 2014. Brian and Justin are committed to making this operation just as successful. Justin has over eleven years' experience in the bar business. Brian and Justin will hand select all employees. They will all have the same values as the owners - keeping the customer happy assures repeat business.

R House will concentrate on an advertising and marketing campaign, reliance on signage and primarily by word of mouth. *R House* is leasing 1,800 square feet retail space on Main Street in the heart of downtown St. Charles.

Mission Statement

R House will provide an upscale comfortable place for locals to come and gather for relaxation, striving to be the bar of choice in St. Charles, IL. *R House* will provide a relaxed atmosphere encouraging patrons to unwind -- specifically targeting professionals between the ages of 30 and 65 years old. *R House* is based on the guiding principles that life is to be enjoyed and this is reflected in its vast selection of beverages.

Guiding Principles

R House's philosophy is simple: enjoy life and treat others as you'd want to be treated. These sound principles apply to all life's situations, both personal and professional, and are applied to management, employees, customers and suppliers.

Integrity – In the spirit of all great bartenders, treat each customer with utmost respect and professionalism. *R House* bartenders and staff will be trained to act professionally in all situations.

Keys to Success

R House's key to success will be based on:

- Outstanding customer services – our goal is be a comfortable, upscale bar that everyone wants to hang out at.
- Customer Satisfaction – provide a quiet and relaxed environment, where friends can meet and unwind and relax.
- Provide a vast offering of specialty beers, wine and gourmet drinks.

Company Description

R House will be a locally owned neighborhood bar owned and operated by Brian Rudowicz and Justin Allen. *R House* is a S-Corporation.

R House will occupy a 1,00 square foot facility located on Main Street in the heart of downtown St. Charles, IL. The property address is 214 W. Main Street.

R House will provide an upscale, modern environment. The furnishings are comprised of a cooper steal bar with industrial seating and a well lite atmosphere. There will be several large televisions to provide sports entertainment. There will be unique built ins to display bottles and glasses.

Ownership

R House is an S-Corporation, owned by Brian Rudowicz and Justin Allen.

Mr. Rudowicz has 20+ combined experience years in management and operations. A successful business owner, he currently owns St. Charles Motorcars in St. Charles, IL.

Mr. Allen has 11+ years experience in the bar industry and is also an owner of St. Charles Motorcars.

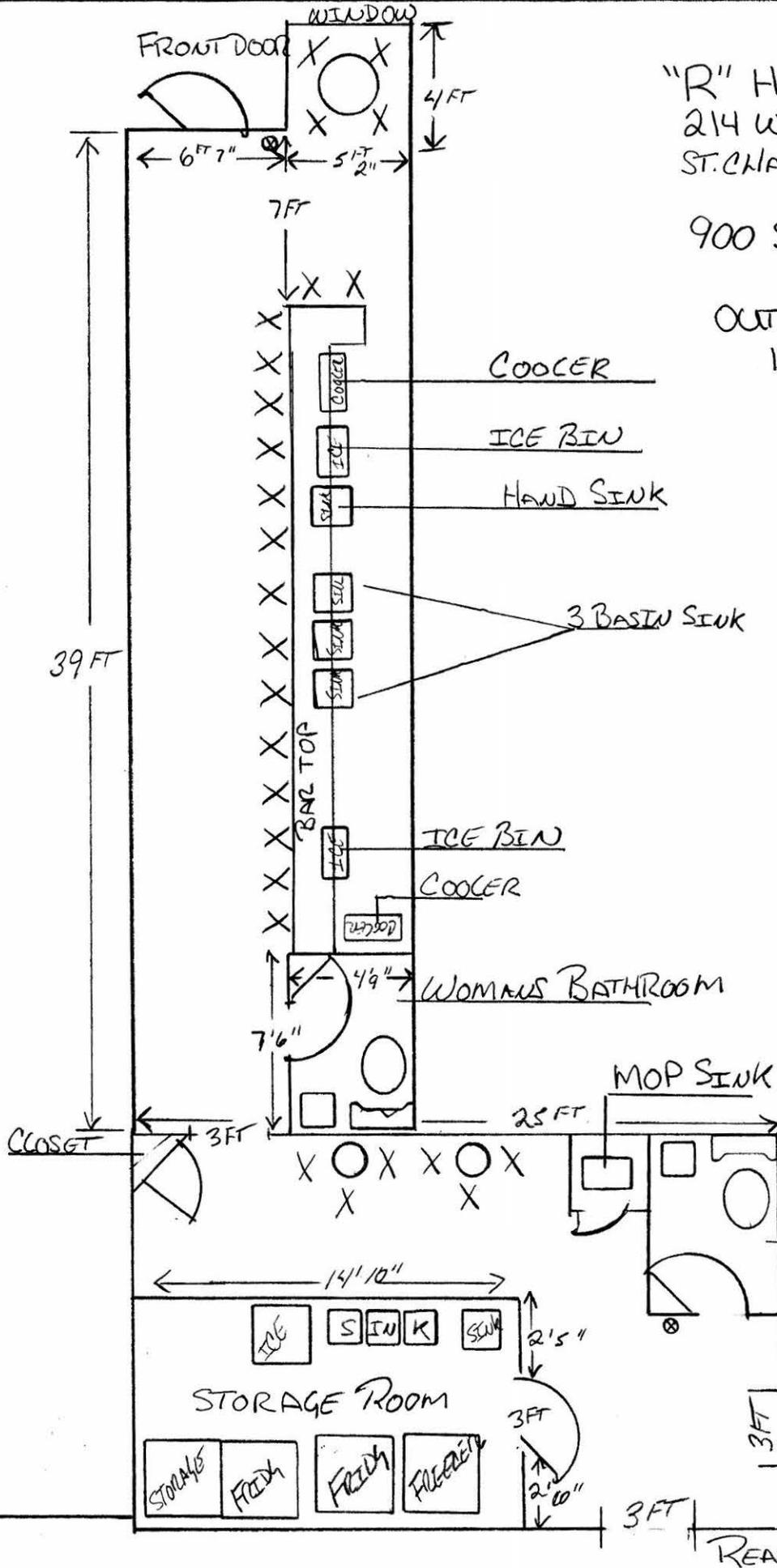
MAIN STREET

SIDE WALK

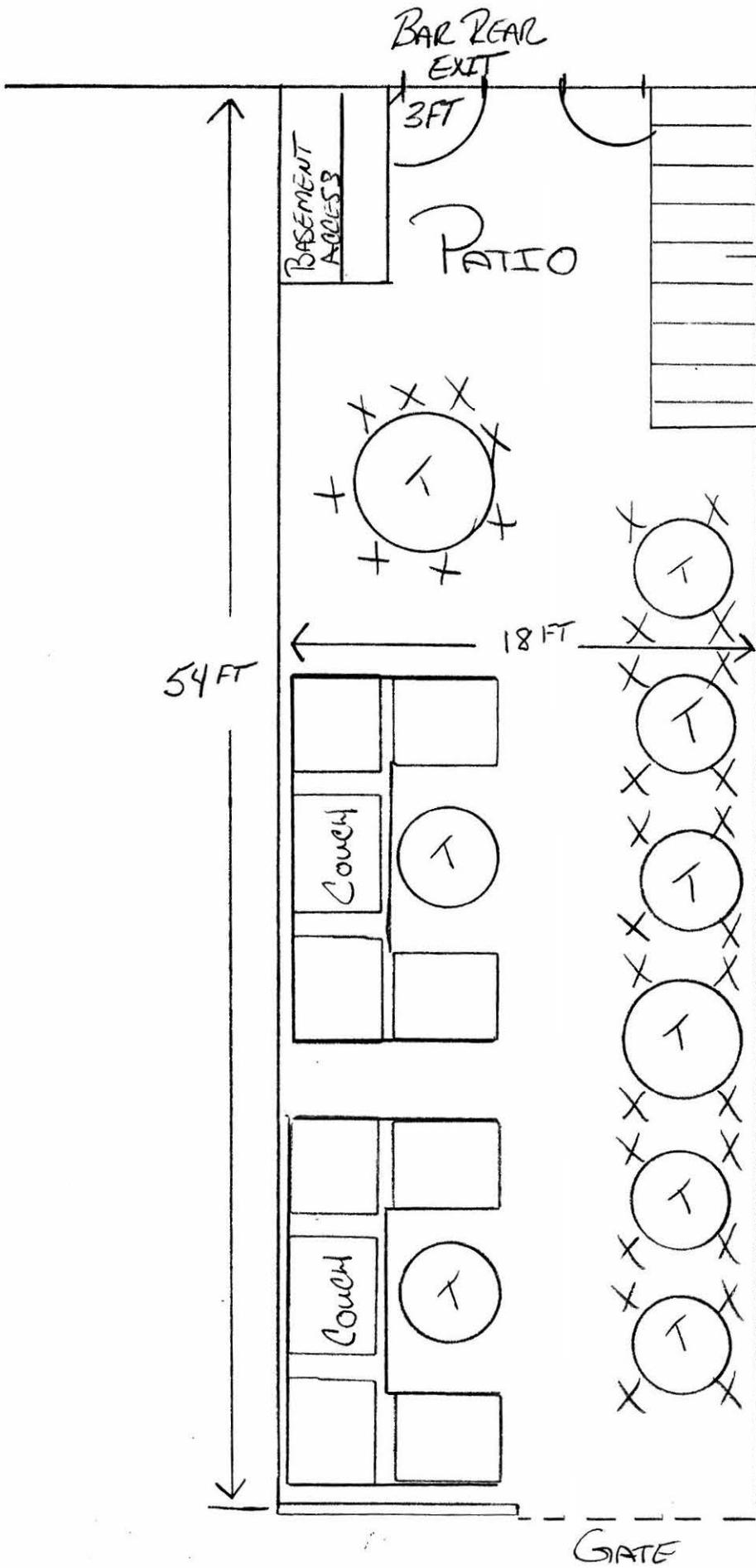
"R" HOUSE
214 W. MAIN ST.
ST. CHARLES, IL

900 SQ FT

OUTDOOR PATIO
18' X 54'



- = TABLE
- X = BAR STOOL
- ⊗ = FIRE EXTINGUISHER



"R" HOUSE
 214 W MAIN ST
 ST. CHARLES, IL

972 SQ FT
 OUTDOOR PATIO

⊙ = TABLE
 X = CHAIR

Commercial Lease Agreement

This Lease Agreement is made on this 25th day of September 2018 by and between Angela DeToni (hereinafter "Landlord")

AND

R House owned & operated by Justin Allen & Brian Rudowicz
(herein after "Tenant")

In consideration for the shared promises and agreements contained herein, and for other good and valuable consideration, the parties hereby agree as follows:

1. The landlord leases to the Tenant, and the Tenant rents from the Landlord the following Premises:
214 W. Main St.
St. Charles, IL 60174
2. The tenure of the Lease shall be for 1 year, with 3-3 Year options, with a 3% increase on rent for each term.
3. Lease to commence on October 1st, 2018.
4. Rent to commence on October 1st, 2018.
5. The Tenant shall pay to Landlord \$1,650.00 for rent and \$30.00 for gas on the Fifteenth day of each month.

6. Heating, Cooling, & Hot Water Tanks repair and replacement will be Landlord's responsibility.
7. Grease trap cleaning is Tenant's responsibility.
8. Landlord agrees to permit Tenant to place signage and décor on rear roof area. Tenant agrees to not seat people on roof.
9. Landlord shall permit Tenant to run speakers out to the patio and under the front awning.
10. Landlord agrees to permit Tenant to lock rear patio gate.
11. Back Patio is for the exclusive use of the Tenant.
12. Cleaning of the back patio including walls, floor, and stairs is the Tenant's responsibility
13. Landlord shall permit Tenant to create murals on both patio walls with neighboring building owner's consent.
14. Landlord shall permit Tenant to change front awning and install banner on front of building.
15. Landlord shall permit dogs on the patio.

16. Tenant will be permitted to make changes in the interior of premises with Landlord approval.

17. Lease and all options are assignable with Landlord's consent. Landlord shall not unreasonably withhold consent.

Angela DeToni

Angela DeToni – Owner of 214 W. Main St. St. Charles, IL 60174

9.25.18

Date

Brian Rudowicz *Justin Allen*

R House – Owned and Operated by Justin Allen & Brian Rudowicz

9-25/18

Date

Certificate of Completion

AWARDED TO



BRIAN RUDOWICZ

has successfully completed the course

BASSET Illinois

Date: September 25, 2018



www.bassetillinois.com

Certificate of Completion

AWARDED TO



JUSTIN ALLEN

has successfully completed the course

BASSET Illinois

Date: September 24, 2018

BASSET
Illinois 

www.bassetillinois.com