

#### AGENDA ITEM EXECUTIVE SUMMARY

**Agenda Item Number: 5** 

Title:

Recommendation to approve a Proposal for a C-1 Liquor License Application and 1 am Late Night Permit for SCMC Enterprises dba Rudy's Bar, Located at 214 W. Main St., St. Charles.

**Presenter:** Police Chief James Keegan

**Meeting:** Liquor Control Commission **Date:** June 19, 2023

Proposed Cost: \$ Budgeted Amount: \$ Not Budgeted:

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

SCMC Enterprises dba Rudy's, located at 214 W. Main St., is requesting approval of a C-1 liquor license application and a 1 am late night permit for their business.

This applicant operates two current restaurants and bars in St. Charles, The Beach Hut and the R-Bar. There have been no issues with either location or concerns with this application being approved for a license for this new establishment.

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

Liquor License Application, COI, Floor Plan, Site Plan, Articles of Incorporation, BASSET Training, Business Plan

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

Recommendation to approve a Proposal for a C-1 Liquor License Application and 1 am Late Night Permit for SCMC Enterprises dba Rudy's Bar, Located at 214 W. Main St., St. Charles.

## Police Department



# Memo

Date: 6/14/2023

To: Mayor Lora Vitek - Liquor Commissioner

From: Erik Mahan, Deputy Chief of Police

Re: Background Investigation, Class C Liquor License, Rudy's 210 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 a new establishment. This Investigation was done based on the application by SCMC Enterprises, Inc. (dba Rudy's) for a City of St. Charles Class C Liquor License. This applicant proposes this business to be located at 210 W. Main Street. The applicant currently holds similar licenses for two other businesses (R House and The Beach Hut). No issues of note were discovered in the background investigation and the Police Department recommends approval.

FM



## Police Department

# Memo



Date: 06/09/23

To: Chief Keegan #300 (via chain of command)

From: Sgt. Vicicondi #368 DL#340

Re: Liquor License- Tavem (C) Background, SCMC Enterprises, Inc (dba Rudy's)

The purpose of this memo is to outline steps taken during the background investigation for a liquor license application. This investigation was done based on the application submitted for a Tavern Class C liquor license for the business, SCMC Enterprises, Inc (dba Rudy's) - which is located at 210 West Main Street.

#### **Applicants:**

Rudowicz, Brian P.

Allen, Justin A.



#### **Application:**

The application was received on 05/01/23. The application is complete to include: a lease (unsigned), a Certificate of Liability Insurance (\$2,000,000 in aggregate / \$1,000,000 for each occurrence), a business plan (floor plan), a menu, and hours of operation. Brian and Justin are owners of SCMC Enterprises, Inc. Rudy's will serve alcohol and no food; but free pretzels will be given out.

BASSET certificates were included for Brian as well as several employees. Justin later emailed me his certificate (graduation date of 06/07/23).

A check of the Illinois Liquor Control Commission website showed an active license status for both of Brian and Justin's other liquor businesses (R House and The Beach Hut).



A Business Report check of SCMC Enterprises Inc. in TLO did not reveal anything that would prohibit the acquisition of a liquor license.

A check in the IL Secretary of State website showed SCMC Enterprises Inc. as being listed as active.

#### Personal Interview:

In Summary:

On 06/06/23, I met with and interviewed Brian and Justin at their other business, St. Charles Motor Cars (4220 E. Main St.). This was due to the site of 210 W. Main St. (Rudy's) currently being under renovation. I learned that the renovations include building a wooden bar, putting in a second bathroom, and completing cosmetic upgrades. Brian and Justin each signed a waiver for this investigation. I was provided with photocopies of Brian and Justin's driver's licenses.

Justin has lived at his current address for approximately 6 years. Prior to that he lived at (where he lived for 12 years). Justin is a U.S. Citizen.

Brian has lived at his current address for approximately 12-13 years. Brian is a U.S. Citizen.

Brian and Justin currently have three businesses in St. Charles (R-House, The Beach Hut, and St. Charles Motor Cars). They do not have any liquor inventory at this time for Rudy's. Brian and Justin are current liquor license holders for R-House and The Beach Hut and they advised they have no past liquor violations. They plan to sell liquor and open Rudy's on 09/01/23. They hope renovations will be done by the end of August and they plan on having 2 or 3 employees.

Tyler Rudowicz (with the consistence of Tyler's Basset certificates. One certificate expired on 05/27/2022, and one certificate was completed on 04/27/2022. The latter does not have an expiration date.

A check of Tyler's BASSET card was conducted and it showed that it will expire on 04/27/2025.

#### Records Checks: Brian Rudowicz

Brian Rudowicz provided an address of

A check in New World records, which includes the Geneva Police Department, revealed no negative contacts.

A check for Brian in TLO had no results for real-time incarcerations and arrests. I searched Criminal and Traffic Offenses and it had one result for a traffic offense (2006). TLO also disclosed that Brian had one result for a bankruptcy with a Filing Date of 10/14/2014.

A check in Clear revealed no negative contacts.

A check with the Kane County Portal website disclosed of one traffic case (2006), one CH-Real Estate Mortgage Foreclosure case (2011), and one L-Contract Money Damage case (2013).

Brian's fingerprints were submitted to the Illinois State Police Bureau of Identification and the FBI. Their results indicated no record of any arrest.

A check of Brian's BASSET card was conducted and it indicated that it will expire on 04/20/25.

-See the attached documents for further information.

#### **Records Checks: Justin Allen**

Justin Allen provided an address of

A check in New World records, which includes the Geneva Police Department and the Batavia Police Department, revealed no negative contacts. A check in Aegis Link records, which includes the Kane County Sheriff's Office, had no records for Justin.

A check in Clear revealed no records for Justin.

A check for Justin in TLO had no results for real-time incarcerations and arrests. I searched Criminal and Traffic Offenses in TLO and it has the following results: there were four traffic offenses, with the latest being in 2012. There was one Criminal Misdemeanor result for: Minor Poss. Liquor in Public (1992CM002194). The listed Date is 04/27/1992 and the arresting agency is the St. Charles Police Dept.

A check with the Kane County Portal's website disclosed of several traffic cases (last one in 2012), an ordinance violation case (1998/Parking Violation), and one Criminal Misdemeanor case (1992-CM-002194 - File Date: 04/27/1992 - SCPD).

Justin's fingerprints were submitted to both the FBI and the Illinois State Police Illinois Bureau of Identification. Their reply indicated no records of any arrest.

A check of Justin's BASSET card was conducted and it had two results. One result expires on 05/02/24 and one result expires on 02/08/26 (Note: each result has a different license number).

-See the attached documents for further information.

#### **Pending Items:**

On 06/09/23, I called and spoke with Brian in regards to the unsigned lease. Brian indicated that the lease was signed on Wednesday (06/07/23).

On 06/09/23, through email communication, I advised Brian to send me and the city a copy of the signed lease. I also emailed Brian and advised him that Tyler would have to be fingerprinted, prior to Rudy's opening, due to him being a manager.

This concludes this background investigation.

Respectfully submitted,

My VM 368

Sgt. Vicicondi 368

### Police Department

# Memo



Date: 06/14/23

To: Chief Keegan #300 (via chain of command)

From: Sgt. Vicicondi #368

Re: Liquor License- Tavern (C) Background, SCMC Enterprises, Inc (dba Rudy's) -

Supplemental Memo

The purpose of this supplemental memo is to outline steps taken during the background investigation for a liquor license application. This investigation was done based on the application submitted for a Tavern Class C liquor license for the business, SCMC Enterprises, Inc (dba Rudy's) - which is located at 210 West Main Street.

#### **Applicants:**

Rudowicz, Brian P.

Allen, Justin A.



#### Signed Lease and Manager Fingerprints:

On 06/13/23, I received a copy of the signed lease via email from Justin Allen (see attached). On 06/13/23, I met with Manager Tyler J. Rudowicz, and fingerprinted him at the SCPD (for the purpose of a liquor applicant). The ISP Bureau of Identification and FBI results indicated there was no record of any arrest for Tyler.

This concludes this supplemental memo.

Respectfully submitted,

in Vn 369

Sgt. Vicicondi 368

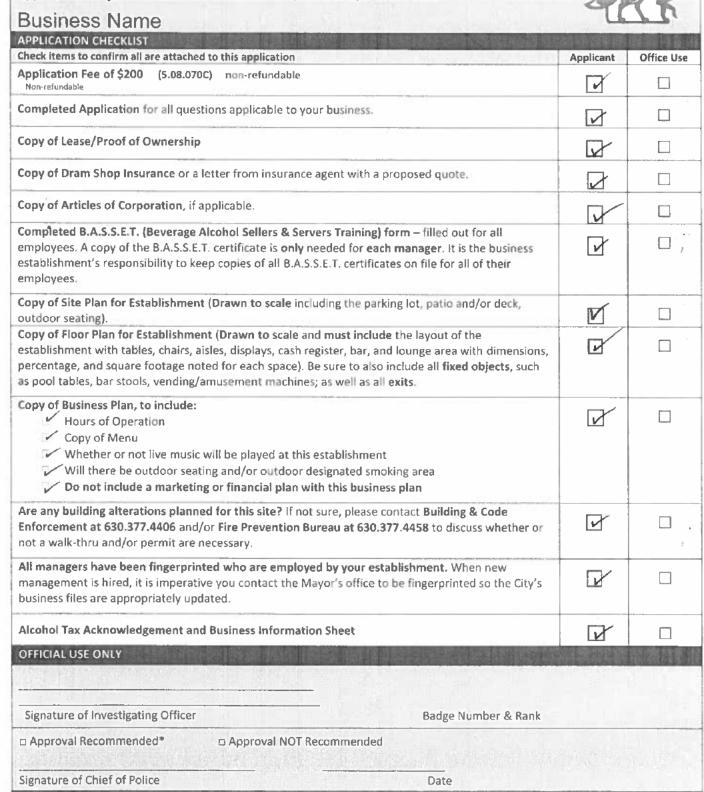
Service, Courage, Professionalism, Dedication



# City of St. Charles, Illinois Liquor Control Commission CITY RETAIL LIQUOR DEALER LICENSE APPLICATION

Incomplete applications will not be accepted.

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



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

LICENSE INFORMATION:
□A Package \$3200-3600 □A1 □A2 □A4 □A5 □A6
B Restaurant \$2400-3600 B1 B2 B3 Late Night Permit 1:00am \$800 (B/C only)
☑C Tavern \$2400-3600 □C1 □C2 □C1 □ Late Night Permit 2:00am \$2300 (B/C only)
□D Hotel/Banquet/Arcada/Q-Center/Entertainment/Club - \$varies D-Type
$\Box G$ Brewery/Restaurant or Site License - \$varies $\Box G1 \Box G2$
□H Catering License - \$varies □H1 □H2
*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): SCO(P
2. Business Name: SCMC Enterprises Inc.
3. Business Address: 214 42 Main Street St. Charles IL 60174
4. Type of Business 5. Length of Time in this 6: Value of merchandise that normally will be in inventory when in
(5.08.070-3): Business (5.08.070-4): operation (5.08.070-5): \$ 5000.000
lavern 12-2018
7. Business Phone: 8. Business E-mail: 9. Business Website: 10: Illinois Tax ID Number: 83-2031006
11. Applicant/Contact Person Name: 12 Title:
13 rian Ruddwicz President
, and
15 Ob #.
18. If Corporation, Corporation Name:
19. Corporation Address (city, state, zip code):
214 W. Main Street St. Charles, IL 60174
ADDITIONAL OWNERS, INVESTORS (greater than 5% interest), and MANAGER INFORMATION
Full Name, include middle initial: Brian P. Rudowicz Title: President
Birthdate: Birthplace:
Home Address, and all addresses for the last 10 years: Email Address:

Full Name, include middle initial:  Birthdate: 8irthplace:	Justin A. Allen Driver's License#	THE STATE OF THE S		
Hama Addense and all addensess for	r the last 10 years:	Email Address:		
Full Name, include middle initial:		Title:		
Birthdate: Birthplace:	Driver's License#	Home Phone:		
Home Address, and all addresses fo	or the last 10 years:	Email Address:		
BUSINESS ESTABLISHMENT LOC		· 自称和1378年中的858年中的1587年1587年1687年16	<b>FIR</b>	
1. Exact Street Address for liquor line 210 W. Main Skee		3. Outside Dining s.f. 4. Total Building s.f.: 1200-1500 S.	t	
5. Total # Seats:	6. Live Entertainment			
7. Brief Business Plan description b				

#### 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:
  - a. 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);
  - 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.
- 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.
- 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.

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

CORF	PORATION / PREMISES QUESTIONS	組織。在最後的成功的
	If applicant is an individual or partnership, is each and every person a United States citi	zen (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:	
-		
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: JWM 2010, LLC	Phone Number:
	Address of Building Owner: P.O. Box 469	E-mail Address:
	Geneva, IL 60134	
	Mailing Address of Building Owner (if different):	
	marking Francisco III	
	Name of Building Owner: (1) ATTITY FARM HOTCHING, CO	Phone Number:
	Name of Building Owner: Martin Farm Holding, UC Address of Building Owner: P.O. Box 469	E-mail Address:
	Address of Building Owner: Geneva, IL 60134  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):	
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	
	If yes, please list the business name(s) and address(es): THE BEACH HUT	
_	ZHOOSE	
5.	Does applicant have any outstanding debt with the City of St. Charles, including, but no and permit fees, for any current or previous establishment owned, operated or management of the control of the c	
	☐ Yes □ No	, ,,
	If yes, please note the City of St. Charles requires all debt to be paid in full before con	aidanation of a nous or non-cond
	liquor license is issued. (5.08.050)	sideration of a new or renewed
	Are any improvements planned for the building and/or site that will require a building	nermit? IV yes I No
6.		
	If yes, has a building permit been applied for? Yes VNo Date of perm	nit application In Process
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)?	
	If yes, what was the disposition of the application? Explain as necessary:	

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?   Yes No							
9.	List previous liquor licenses issued by any State Government or any subdivision thereof (5.08.070-9). Use additional paper							
	Government Unit: RHOUSE Location, City/State: ST Charles, T.L.							
	Government Unit: K House Location, City/State: St. Chouses, IL							
	Date: Special Explanations:							
	Government Unit: Beach Hut Location, City/State: St. Charles, IL							
	Date: Special Explanations:							
	Have any liquor licenses possessed ever been revoked (5.08.070-9)?							
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 ☑ No							
	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: 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):							
	Date qualified under Illinois Business Corporation Act to transact business in Illinois (Foreign Corporation):							
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)?  Ves   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?   Yes   Yes							
	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?    Yes    No							
l								
	Have you ever been convicted of a gambling offense?  Yes  No (If a partnership or corporation, include all partners and the local manager(s).)							

E L	partners, officers, directors, and/or p k of owners by interest listed on page ment (5.08.070-A12).	and the second s	
Has this been done?	☑ Yes ☐ No		
If yes, date(s):	5-1-23		
15. Has the applicant atta	ached proof of Dram Shop Insurance t	o this application or already furnish	ed it to the City of St.
Charles (5.08.060)?	√Yes □ No I	f already furnished, date of delivery	:
	n 100 feet of any real property of any oneir wives/husbands, or children; and/		
B.A.S.S.E.T. TRAINING		IMPERIOR SERVICE	
	ed to have B.A.S.S.E.T training on this d to make alcoholic liquor sales. Inclu- page, if needed.		
Name (First, Middle, Last):	Sher Brown		Birthdate:
Home Street Address, Incl C	ity, State, Zip		
Date of Course: 3-22-2023	Place Course was lake 360 traing, con	Certificate Granted (Y/N	3-22-2026
Name (First, Middle, Last):	Brian Rudowic	2	Birthdoto
Home Street Address, Incl C	ity, State, Zip:		
Date of Course:	Place Course was Taken Safety	Codncy	Expiration: 4-20-2025
Name (First, Middle, Last):	Jessice Horn	, , , , ,	Birthdate:
Home Street Address, Incl C	ity, State Zin:		
Date of Course: 2-13-2023	Place Course was Taken: 360training.com	Certificate Granted (V)N	Expiration:
Name (First, Middle, Last):	Jacqueline Gorr		Birthdate:
Home Street Address, Incl C	ity, State, Zip:		
8-23-2023	Place Course was Taken: Comm	Certificate Granted? (20)	Expiration: 8-23-2025
NEW MANAGEMENT REQU			
The street of th	comes on board, the City must be no nent's responsibility to keep copies o		
COMMENTS/ADDITIONAL I		The state of the s	SALE PROPERTY OF THE PARTY OF T

Business Name: SCMG Enterprises Inc.
SIGNATURES
Applicant's Signature
Subscribed and sworn before me this day of May
(Seal)  Kristen Ann Rudowicz Notary Public State of Illinois My Commission Expires \$/28/2026
ADDENDUM TO RETAIL LIQUOR LICENSE APPLICATION  To be completed by the City of St. Charles Police Department
Date: 06/06/23 Name of Applicant: Brian Rudowicz + Justin Allen
Name of Business: Rudy'S
Address of Business: 210 W. Main st., st. Charles, 14
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:  Date on which applicant will begin selling retail alcoholic liquors at this location:
09/01/23
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?
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?
If yes, answer a, b and c:
<ul><li>a. State the kind of such business:</li><li>b. Give date on which applicant began the kind of business named at this location:</li></ul>
c. Has the kind of business designated been established at this location for such purpose prior to February 1, 1934, and carried on continuously since such time by either the applicant or any other person?
☐ Yes ☐ No
4. If premises for which an alcoholic liquor license is herein applied for are within 100 feet of a church, have such premises
been licensed for the sale of alcoholic liquor at retail prior to the establishment of such church?   Yes  No
If yes, have the premises been continuously operated and licensed for the sale of alcoholic liquor at retail since the original
alcoholic liquor license was issued therefore? 🔲 Yes 🔲 No

5.	Is the place for which the alcoholic liquor license is sought a dwelling house, flat, or apartment used for residential purposes?
	□ Yes ØNo
_	
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 🗀 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: XYes No
12.	From your observation and investigation, has applicant—to the best of your knowledge—truthfully answered all questions?
	Æ Yes □ No
	If no, state exceptions:
	Have all persons named in this application been fingerprinted? 🗷 Yes 🗆 No
13.	Fingerprinted by: 5CPD Date: 05/22/23
14.	Other necessary data:
	N/A
	U)

# RUDY'S BAR 210 WEST MAIN STREET SAINT CHARLES, IL. 60174

# **GENERAL NOTES:**

- All work shall comply with the Applicable Local, State, County and Federal Codes, Ordinances, Laws, Regulations and Protective Covenants governing the site of work.

## **BUILDING CODES**

BUILDING CODE	2021 INTERNATIONAL BUILDING CODE (IBC)
MECHANICAL CODE	2021 INTERNATIONAL MECHANICAL CODE
ELECTRICAL CODE	2020 NATIONAL ELECTRICAL CODE (NEC)
FIRE CODE	2021 INTERNATIONAL FIRE CODE
FUEL GAS	2021 INTERNATIONAL FUEL GAS CODE
ENERGY CODE	2021 ILLINOIS ENERGY CONSERVATION CODE
PLUMBING CODE	2014 ILLINOIS STATE PLUMBING CODE
ACCESSIBILITY CODE	1997 ILLINOIS ACCESSIBILITY CODE
LOCAL AMENDMENTS	w/ LOCAL AMENDMENTS

#### Scope of Document

These architectural plans and specifications indicate the general scope of the project in terms of architectural, design concept, building dimensions, type of structural, mechanical and utility systems, and an outline of major architectural elements of construction as such, these plans do not necessarily indicate or describe all work required for ... In fact agree to hold the architect harmless for any the full performance or completion of the work, However it Is the Intent of these drawings to provide for complete building and building systems. Omission of items reasonably regulred to achieve completion shall not relieve at no additional cost to the owner. In addition to being in strict accordance with these plans and specifications it is also intended that the work be of sound and quality construction, performed by experienced and qualified tradesman in a timely manner. Contractor, subcontractors and suppliers shall be solely responsible for the inclusion of adequate amounts to cover the installation of all items indicated, described or implied. The architect is not responsible for protecting the owner against defects or

#### Special Safety Note

All contractors, subcontractors and their representatives working on this project shall at all times prior to and during the course of their activity be responsible for the safety of their employees as well as others and in the care of the property each as represent their employees shall ascertain litems, if any may be resolved prior to execution of that the conditions under which they will be required to accomplish their work are safe and meet all regulations of the occupational safety and hazard act or other governing regulations, the beginning of work by a contractor or subcontractor shall indicate satisfaction concerning safety and full responsibility for accidents and or damage if unsatisfied. The contractor or subcontractor shall indicate the actions and or device necessary to render the job site safe. If the work of other parties, is upon inspection, found all any time to be unsafe, the contractor or subcontractor shall immediately stop all work and notify the general contractor, architect and owner. The beginning of work shall Indicate acknowledgment and acceptance of these

#### Special Supervision Notice

The architect is not supervising the construction of this building. Therefore, the use of these drawings by the owner or his contractor, builder, subcontractors, or tradesman shall constitute a hold harmless agreement between the drawing user and the architect. The user shall responsibility in regard to the construction means, methods, techniques, sequences or procedures and for any safety programs or precautions in connection with the work, Further, the architect shall be held harmless for any the contractor from the responsibility to provide these items — responsibility in regard to any costs or problems adding from the negligence of the contractor, subcontractor, builder, tradesman or workman or for there failure to comply with and adhere to these plans and specifications he shall fully coordinate his work with all other trades and make all necessary field adjustments to accommodate the work at no additional cast it the owner.

#### Limit of Liability

All work is to be performed in strict accordance with local codes and ordinances. Contractors shall inform the architect, in writing of these items which may conflict with local code requirements or accepted practice so that these construction agreements. The architect shall not be responsible the acts or omissions of the owner. The contract or subcontracts performing any of the work described in and or related to these plans and specifications, deviation in any form, fashion or manne without the prior written approval of the architect shall relieve the architect from any and all liability or responsibility arising out of conditions or circumstances both related and unrelated to such deviations. On site verification of all dimensions and conditions as well as exact fit proper completion of the work shall be the

#### PROOF HOSE BIBB - SECTION KEY PAVE HENT GUIARRY TILE RADILS, RICER OR ROD ETURN AIR BOOK PRAIN REGREATION, RECESSED REPRESSED (金融書) CONCRETE BLOCK ROUGH-IN REINFORGED LINGTION BOX RAILING 5.746 MALLBOARD 20.SM VIIII. CENTERLINE SATED VENEER LUMBER PLYNOOD STEP TO COME TO THE STEP TO COME TO CO E C TURKE(RE) BATT INSULATION IL AMEQUE INS. HOULDING HETER HERY OPENING ONT(ED)(ING) INTERIOR PARTITION WAL INTERIOR LOAD BEARING WALL 5CALE BALLOON FRAME WAL DROPPED CEILING OR SOFFIT NITHOUT PATER CLOSET WALK IN CLOSE! MALK-OUT MATER PROOF WATER SOFTENEY WAINS-OT MELDED WIRE FABRIC WELDED WIRE MESH

SYMBOL LEGEND

SHEET INDEX COVER SHEET NOTES AND DETAILS

NEW FLOOR PLAN EXISTING FLOOR PLAN 31.2 EGRESS FLOOR PLAN

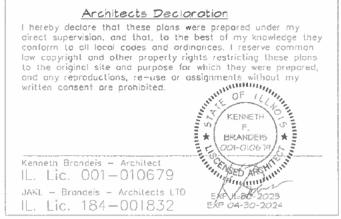
ROOM FINISH LAYOUT

RESTROOM ACCESSIBILITY PLAN

ABBREVIATIONS

8.1.2 NEW & EXISTING FIRST FLOOR ELEC. PLAN

8.13 NEW & EXISTING FIRST FLOOR REFLECTED CEILING PLAN



L BRANDEIS ARCHITECTS LTD
1800 HAWTHORNE LANE SUITE Q
WEST CHICAGO, IL. 60185
ph. 630-562-2570
Contact: Mike Anzalone ph. 847-417-8558
fax: 847-469-3330 W. TAN E BLUEPRINTS d 210 WEST A SAINT CHAR K SHE COVER checked by:

sheet:

#### ADA NOTES:

I ANY PATH OF TRAVEL SHALL BE CONSIDERED A RAMP IF IT'S SLOPE IS GREATER THAN I'-O' RISE IN 20"-O' OF HORIZONTAL RUN (ADAILE 21)

2. ALL ACCESSIBLE ENTRANCES SHALL BE IDENTIFIED HITH AT LEAST ONE STANDARD SIGN AND WITH ADDITIONAL DIRECTIONAL SIGNS, AS REQUIRED, VISIBLE FROM APPROACHING PEDESTRIAN VANCE, (ADDIA) ZITUTILE 24 SEC

B. EVERY REQUIRED ENTRANCE OR PASSAGE DOORWAY SHALL BE OF A SIZE AS TO PERMIT THE INSTALLATION OF A DOOR NOT LESS THAN 3'-O' IN NOTH AND NOT LESS THAN 6'-D' IN HEIGHT. DOORS SHALL BE CAPABLE OF CHENIN AT LEAST 40 DEGREES AND SHALL BE 50 MOUTHED THAT THE CLEAR HEIGHT OF THE DOORNAY IS NOT LESS THAN 32', (ADA 418 5/TITLE 24 SEC. 3304 (F)).

OF THE DOORIAY IS NOT LEES THAN 37", ADA 4/35/TITLE 24 SEC, 3904 (F)),

4 HAND ACTIVATED DOOR OPENING HARDWARE SHALL BE CENTERED BETWEEN
30" TO 44" ASOVE THE FLOOR LATCHING AND LOCKING DOORS THAT ARE
HAND ACTIVATED AND HIGH ARE IN THE PATH OF TRAYEL, SHALL BE
OPENABLE IN THA 5 INDEE EFFORT BY LEVER TYPE HARDWARE, BY PAINC
BARS PUSH-PALL ACTIVATING BARS, OR OTHER HARDWARE, BY PAINC
BARS PUSH-PALL ACTIVATING BARS, OR OTHER HARDWARE DESIGNED TO
PROVIDE PASSAGE INTROOR REQUIRING THE ABILITY TO GRASP THE DIFFENING
HARDWARE, LOCKED BAIT DOORS SHALL OPERATE AS ABOVE IN EGRESS
ON ACCESSEDE DOORS SHALL HAVE A SHAPE THAT IS EASY TO GRASP WITH
ONE HAND AND DOES NOT BEQUIRE HONT GRASPING, TRENT PINCHING, OR
THIS HAND AND DOES NOT BEQUIRE LEVER OPERATIED MECHANISM,
POSH-TYPE HECHANISM, AND IN SHAPE HAVELES ARE ACCEPTABLE DESIGNS,
194TH SIDNING DOORS AND LESSAFE LEVER OPERATIED MECHANISM.
AND IN SHAPE HAVELES ACCEPTABLE DESIGNS,
194TH SIDNING DOORS ARE FILLY OPEN OPERATIED MECHANISM.

5. THE WOTH OF THE LEVEL AND CLEAR AREA ON THE SIDE TO MISCH THE DOOR SHALL EXTEND 24" PAST THE STRIKE EDGE OF THE DOOP FOR EXTERIOR DOORS AND IS" PAST THE STRIKE EDGE FOR INTERIOR DOORS. (ADA 4135/TITLE 24 SEC 3507 (DID (41).

THE FLOOR OR LANDING SHALL NOT BE 1/2" LOWER THAN THE THRESHOLD OF THE DOORMAY, CHANGE IN LEVEL DETWEEN 1/4" TO 1/2" SHALL BE BEVELED WITH A SLOPE NO GREATER THAN 1:2. (ADA 4 13.6/TITLE 24 3301 (1))).

7. MAXIMM EFFORT TO OPERATE DOORS SHALL NOT EXCEED 6 1/2 LBS FOR EXTERIOR DOOR AND 5 LBS. FOR INTERIOR DOORS. SICH PAIL OR PUSH EFFORT SHEW APPLIED AT RIGHT MAKES TO HASED DOORS AND AT THE CENTER PLANE OF SICIONS OF FOLDING DOORS, COMPENSATING DEVICES OR AUTOMATIC DOOR OPERATORS MAY BE UILLIZED TO MEET THE ABOVE STANDARDS HERE FIRE DOORS ARE REQUIRED, THE MAXIMAL FEFORT TO OPERATE THE DOORS MAY BE INCREASED NOT TO EXCEED IS 1 BS (ADA 4.13.10717LE 24 SEC. 3304(12))

B. WALKS AND SIDENALKS SHALL HAVE A CONTINUOUS SLIP REDISTAN SURFACE, NOT INTERRUPTED BY STEPS OR BY ABRUPT CHANGES IN LEVEL EXCEEDING 1/2" AND SHALL PHINTAIN A SHIPM OF 44" IN JUDIN, (APA 4.3.8/TITLE 24 SEX. 5301 (F)J)).

\*I DOORS IN ANY POSITION SHALL NOT REDUCE THE MINIMUM DIHENSION OF THE RATHP LANDING TO LESS THAN 42" AND SHALL NOT REDUCE THE RECURRED MIDTH BY HORE THAN 9 1/2" HIEN PULLY OPEN, FADA 4,5 AFTITLE 24 SEC, 51/07 (DJJ).

IO. THE MOTH OF THE LANDING SHALL EXTEND 24" PAST THE STRIKE BOSE OF ANY DOOR OR GATE FOR EXTERIOR RAYES AND IS "PAST THE STRIKE BOSE FOR INTERIOR RAYES, ADA 4.64(MINITE 24.566.5901 (DUB).

IL IN BUILDING AND FACILITIES, FLOORS OF A GIVEN STORY SHALL BE A COMMON LEVEL THROUGHOUT, OR SHALL BE CONSIGNED BY FLOESTRIAN RAMES, PASSENSER BLEVATORS, OR SPECIAL ACCESS LIFTS (ADA 4 STITLE RAMES). 24 SEG. 5325J

12. ON DOORMAYS LEADING TO HENS SANITARY FACILITIES, AN EQUILATERAL TRUNKSLE (AT THICK WITH EDGES 12" LONG AND A VERTEX POINTING UPWARD SHALL BE PROVIDED AND ON DOORMAY LEADING TO MOMENTS SANITARY FACILITIES A CECLE (AT THICK AND 12" IN DIAPETER SHALL BE PROVIDED, THESE GEOMETRIC SYMPOLS SHALL BE MOUNTED ON THE LATCH SIDE OF THE DOOR AND THEIR COLOR AND CONTRAST SHALL BE DISTRICTLY DIFFERENT FROM THE COLOR AND CONTRAST SHALL BE DISTRICTLY DIFFERENT SHALL BE RAISED 1/32", UPPERCASE, SANS SERIE OR SIMPLE SERIE TYPE AND SHALL BE RAISED 1/32", UPPERCASE, SANS SERIE OR SIMPLE SERIE TYPE AND SHALL BE ALCOMPANIED BY GRADE 2 BRAILLE. (ADA 430/14TLE 24 SEC, 522 (B))

19 TOILET FLUSH CONTROLS SHALL BE OPERABLE WITH ONE HAID AND SHALL NOT REQUIRE TIGHT GRASPING, PINCHING, OR TWISTING OF THE IRRIST. CONTROLS FOR THE FLUSH VALVES SHALL BE MOUNTED ON THE MIDE SIDE OF THE TOILET AREAS, NO MORE THAN 44" ABOVE THE FLOOK. THE FORCE REQUIRED TO ACTIVATE CONTROLS SHALL BE NO GREATER THAN 5 LBS (ADA 416-5/TITLE 74 SEC. 15057

14. WHERE URINALS ARE PROVIDED, AT LEAST ONE WITH A RIM PROJECTING A MINIMUM OF 14" FROM THE MALL AND AT A MAXIMUM OF 17" ABOVE THE FLOOR SHALL BE PROVIDED. JADA 4JB/TITLE 24 SEG. 503).

SHALL BE PROVIDED, (ADA 4)8/ITILE 24 SEC.ISO3).

15 LAVATORY FIXIDRES THE REQUIREMENT OF THIS SUBSECTION SHALL APPLY TO LAVATORIES THE REQUIREMENT OF THIS SUBSECTION SHALL APPLY TO LAVATORY FIXIDRES, VANITIES, AND BUILT-IN LAVATORIES. A. A. CLEAR FLOOR SPACE OF 30" X 40" COPELTINS WITH SECTION 57%C) SHALL BE PROVIDED IN FROM TO FA LAVATORY TO ALLOW A FORMAD APPROACH, SICAL CLEAR FLOOR SPACE SHALL ADJOIN OR OVER, AP AN ACCESSIBLE ROUTE AND SHALL BEEND NITO NASE AND TOC SPACE UNDERNISATIN THE LAVATORY, B. MERROSS SHALL BE MOUNTED WITH THE DOTTOM EDGE NO MIGHER THAN 40" PROM THE FLOOR TOME, SANITARY NARKINS MASTE RECEPTACLES, MERRE TOWEL, SANITARY NARKINS MASTE RECEPTACLES, AND THE SHAD SPOSAL FIXTURES ARE PROVIDED, AT LEAST ONE OF EACH TYPE SHALL BE LOCATED WITH ALL OPERABLE PARTS, INCLUDING CON SLOTS, WITHIN 40" FROM THE FINISHED PLOOR, TOLET TISSUE DISPENSERS, TOLLET TISSUE DISPENSERS, SHALL BE LOCATED ON THE WALL INTOXICAL AND LET THE PROVIDED.

16, HEIGHT AND GLEARANCES, LAYATORIES SHALL BE MOUNTED WITH THE RIM OR COUNTER SUPFACE NO HIGHER THAN 34" (DOBNO!) ABOVE THE FINISHED PLOOR PROVIDE A CLEARANCE OF AT LEAST 29" (TISSING TROM THE FLOOR TO THE BOTTOH OF THE APPOIN, KNEE AND TOE CLEARANCE SHALL COMPLY WITH FIGURE 4 B THIS SHEET.

17. CLEAR FLOOR SPACE A CLEAR FLOOR SPACE OF BO' X 461 (160MM X TICLEM TUDON SPACE A CLEMA FUDON SPACE OF SOLAM FUDON A SZOMMU COMPLYING MITH ADA 49 A SHALL BE PROVIDED IN FRONT OF A AVAITORY TO ALLOW FORMARD APPROACH SUCH CLEAR FLOOR SPACE SHALL APJON OR OVERLAP AN ACCESSIBLE ROUTE AND SHALL EXTRAD A MAXIMUM OF 19" (4659MH) INDERNEATH THE LAVATORY

IB. EXPOSED PIPES AND SURFACES, NOT WATER AND DRAIN PIPES UNDER LAVATORIES SHALL BE INSULATED OR OTHERNISE COVERED, THERE SHALL BE NO SHARP OR ABRASIVE SURFACES UNDER LAVATORIES (ADA 4.24).

IR FAUCETS. FAUCETS SHALL COMPLY WITH ADA 4 21.4 LEVER-OPERATED, FUSHITYPE, AND ELECTRONICALLY CONTROLLED MECHANISMS ARE EXAMPLES OF AGCEPTABLE DEPARKS SELF-CLOSING VALVES ARE ALLONED IT THE FAUCET REMAINS OFEN FOR AT LEAST TO SECONDS.

20, GRAB BARS, TUB AND SHOWER SEATS, FASTEMERS AND MOUNTING DEVICES SHALL BE DESIGNED FOR 250 LBS. FER LINEAR FOOT LOAD, (ADA 24 SEC. 5U(A)(C)

21, GRAB BARS SHALL BE LOCATED ON EACH SIDE, OR ONE SIDE AND THE BACK OF THE PHYSICALLY DISABLED TOILET STALL OR COMPARTMENT AND SHALL BE TITLE 24 SEC. SHIADHAI.

32 THE DIAMETER OR WIDTH OF THE GRIPPING SUPFACE OF THE BRAS BAR SHALL BE I 1/4" TO I 1/2" OR THE SHAPE SHALL PROVIDE AN EGRIVALENT GRIPPING SUPFACE, (ADA 4.26.27THE 24" SEG. SUJANIO).

23. ALCOVES, MATER FOUNTAINS SMALL BE LOCATED COMPLETELY WITHIN ALCOVES OR OTHERWISE POSTI (ONED SO AS NOT TO ENCROPED HIM OF PERSISTEN WAYS THE ALCOVE IN WHICH THE MATER FOUNTAIN IS LOCATED SMALL BY BOTH LESS THAN 37. IN BOTH AND TO IN DEPTITIONE SWEACH OF THE PATH OF TRAVEL AT THE MATER FOUNTAIN SHALL BE TEXTURED SO THAT IT IS CLEARLY. DENTIFIED BY A BUND PERSON USING A CAME THE MATER FOUNTAIN TO THE MATER FOUNTAIN SHALL BY TEXTURED AREA SMALL EXTEND FROM THE HALL SUPPORTING THE MATER FOUNTAIN AND SHALL EXTEND FOUR EACH SIDE OF THE MATER FOUNTAIN AND SHALL EXTEND FOUR EACH SIDE OF THE MATER FOUNTAIN THE WING WALLS SHALL BY PROVIDED ON EACH SIDE OF THE MATER FOUNTAIN, THE WING WALLS SHALL BY THE MATER FOUNTAIN OF THE SUPPORTING WALL AT LEAST AS FAR AS THE MATER FOUNTAIN TO RIMING WALLS SHALL BY THE MATER FOUNTAIN TO PITCH BY THE PATH OF TRAVEL, ALSO THERE SHALL BE A MINIMAM OF 32" CLEAR RETINED THE WING WALLS SIZE AND APPROACH—THE MINIMAN CLEAR GROUND FLOOR SPACE REQUIRED TO ACCOMMODORIE A SINGLE, STATIONARY METELICIARS AND OCCUPANT IS 30" X 48". THE MINIMA CLEAR FLOOR OR GROUND SPACE FOR MEELCHAIRS HAT BE POSITIONED FORWARD OR PARALLEL APPROACH TO AN OBJECT, CLEAR FLOOR OR GROUND SPACE FOR MEELCHAIRS HAT BE POSITIONED FORWARD OR PARALLEL APPROACH TO AN OBJECT, CLEAR FLOOR OR GROUND SPACE FOR MEELCHAIRS HAT BE POSITIONED FOR THE CLEAR FLOOR SPACE REQUIRED INDEAR SPACES ONE FILL INOSPITIONED SPACE FOR THE CLEAR FLOOR SPACE FOR THE FLOOR SPACE FOR A MHEELCHAIR SHALL AD JOIN ANOTHER SHELL AND AND ACTIVE FOR THE CHAIR SHALL AD JOIN ANOTHER SHELL AND AND ASPACE FOR A MHEELCHAIR SHALL BE POST OF THE CLEAR FLOOR SPACE FOR A MHEELCHAIR SHALL BE POST OF THE CLEAR FLOOR SPACE FOR A MHEELCHAIR SHALL BE POST OF THE CLEAR FLOOR SPACE FOR THE FLOOR SPACE FOR A MHEELCHAIR SHALL AD JOIN ANOTHER SHELLCHAIR CLEAR FLOOR SPACE FOR A MHEELCHAIR SHALL AD JOIN ANOTHER SHELLCHAIR CLEAR FLOOR SPACE FOR A MHEELCHAIR SHALL AD JOIN ANOTHER SHELLCHAIR CLEAR FLOOR SPACE FOR A MHEELCHAIR SHALL BE SPACE IN THE COST SPACE FLOOR. PROVIDED, (ADA 4.5/TITLE 24 SEC. SILI(G)).

24. LAVATORIES SHALL BE POINTED WITH A MINIMUM DISTANCE OF 18 TO THE CENTERLINE OF THE FIXTURE, (ADA 4,16/11)LE 24 SEC SILU.

25, MATER CLOSET COMPARTMENTS SMALL BE EQUIPPED WITH A DOOR THAT HAS AN AUTOMATIC CLOSING DEVICE, AND SHALL HAVE A CLEAR UNOBSTRUCTED OPENING WIDTH OF 32" HARN LOCATED AT THE BLO AND 34" HARN LOCATED AT THE SIDE WITH THE DOOR POSITIONED AT AN ANGLE OF 90 DEGREES FROM ITS CLOSED POSITION EXCEPT FOR DOOR OPENING, NICITIOS AND DOOR SHINGS, A CLEAR UNOBSTRUCTED ACCESS NOT LESS THAN 44" SHALL BE PROVIDED TO MATER CLOSET COMPARTMENTS DESIGNED FOR DIE FOR THE HARD CAPTED JEFORE COMPARTMENTS DESIGNED FOR USE FOR THE HANDIGATED / PEOPLE WITH DISABILITIES AND THE SPACE IMMEDIATELY IN FRONT OF A WATE CLOSET COMPARTMENT SHALL BE NOT LESS THAT 48" AS NEASURED AT RIGHT ANGLES TO COMPARTMENT DOOR IN ITS CLOSED POSITION

JT. THE CENTER OF THE GRIP OF THE OPERATING HANDLE OF BUILDINGS OF THE ROOM OR AREA TO CONTROL LIGHTING AND RECEIPTACLE OUTLIERS, APPLIANCES, OR COCLING, HEATING, AND VENTILATING EQUIPMENT, SHALL NOT BE LESS THAN 31-00 OF THORS THAN 3-00 ABOVE THE RECORD OR WORKING PLATFORM AND JUSTICE 14 SEC. 385-85.

20 THE CENTER OF FIRE ALARY INITIATING DEVICES (BOXES) SHALL BE LOCATED 48" ABOVE THE LEVEL OF THE R. COR. WORKING PLATFORM, GROUND SUPPACES, OR S'DEBUALK. (ADA 4713/11): E 14 SEC. THE INTERNATIONAL SYMBOL OF ACCESSIBILITY SHALL BE THE STANDARD USED TO DENTIFY FACULIES THAT ARE ACCESSIBLE TO AND USABLE BY PHYSICALLY DISABLED PERSONS AS SET FORTH IN THESE BUILDING STANDARDS AND ADA THE STITPOL SPECIFIED ABOVE SHALL CONSIST OF A WHITE FRUIRE ON A BLUE BACKGROUND. THE BLUE SHALL BE CALL. TO COLOR NUMBER 18098 IN SOME IN FEDERAL THE BLUE SHALL BE EQUAL TO COLOR NUMBER 15090 IN FEDERAL STANDARD 598A. (ADA430/TITLE 24 SEG. 512).

30 AT KITCHEN SINGS FAUCET CONTROLS, AND OPERATING MECHANISMS 6HALL BE OPERABLE WITH ONE HAND AND SHALL NOT REDUIRE TIGHT GRASPING, PRICENS, OR THISTING OF THE WRIST. THE FORCE REGUIRED TO ACTIVATE CONTROLS SHALL BE NO GREATER THAN 5 LBC LEVEN-OPERABLE PASH-TITPE, AND ELECTRONICALLY CONTROLLED FECHANISMS AND EXACTIVATE DESIGNAS, SELF-CLOSING VALVES ARE EXAMPLES OF ACCEPTABLE DESIGNS, SELF-CLOSING VALVES ARE ALTOURD IF THE PAUCET RETRANS OPEN FOR AT LEAST 10 SECONDS. SINGS SHALL BE MOUNTED ON COUNTRY SUFFICIE ON HIGHER WAS AND SHALL BE TOWNED ON COUNTRY SUFFICIE OF RECLEARANCE OF 2T HIGH HIM) X 30 WIDE (TIM) X 35 DEPER LITTLY UNDERWEATH STACEDOLS SHALL BE NO DEEPER THEN 6 V2" NOWES (ADDA 424/11/15 74 BCC. 1593).

3) WALKS, SIDEWALKS, AND PEDESTRIAN WAYS SHALL SE FREE OF GRATING WINDNEYER POSSIBLE. FOR GRATING LOCATED IN THE SUFFACE OF ANY OF THESE AREAS, GROD OFFENNAS IN GRATING SHALL BE LETTED TO IZ'IN THE DIRECTION OF TRAFFIC FLOW (ADA 45.47/TILE 7-5 SEC.337/FO)X.

37, ABRUPT CHANGES IN LEVEL ALONG ANT OF ACCESSIBLE ROUTE SHALL NOT EXCEED IZ! WHEN CHANGES IN LEVEL DO OCCUR, THEY SHALL BE BEVELED WITH A SLOPE NO GREATER THAN NJ EXCEPT THAT LEVEL CHANGES NOT EXCEEDING I/4" MAT BE VERTICAL, CADA 452/TITLE 24 BEC 3325(DX)

33. WEN CHANGES IN LEVEL GREATER THAN 1/21 ARE NECESSARY, THEY SHALL COTFLY WITH THE RECURRITERISTS FOR CURB RAIPS.

(ADASD/ITLE 24 SEC 3379/DJ 18 MULKS SHALL BE PROVIDED WITH A LEVEL AREA NOT LESS THAN 66" Y 66" AT A DOOR OR GATE THAT SURVEYS TOURARDS THE WALK, AND NOT LESS THAN 48" WIDE Y 48" DEEP AT A DOOR OR GATE THAT SURVEYS AWAIT FROM THE WALK, SUCH WALKS SHALL EXTEND 24" TO THE SIDE OF A DOOR OR GATE THAT SURVEYS THE SIDE OF THE SIRVEYS EDGE OF A DOOR OR GATE THAT SURVEYS TOURARDS THE WALK, ADAILST 18 SE TO BE OF A DOOR OR GATE THAT SURVEYS TOURARDS THE WALK, ADAILST 18 SE AND A AREA WAR AND AUTHOR 18 SET AND AS A SEA OF A TAX AREA SHALL SURVEYS AREA AND A TOURARDS THE WALK, ADAILST 18 AND AS A SEA OF A TAX. WALKS WITH CONTINUOUS GRADIENTS SHALL HAVE LEVEL AREAS AT LEAST 5 -O: N LEWISTH AT INTERVALS OF AT LEAST 2001-0" IN LENGTH (ADA 4.34).

36, PEDESTRIAN RAPPS OTHER THAN THOSE SERVING PRIMARY ENTRANCES TO BUILDINGS SHALL HAVE A CLEAR BIDTH NOT LESS THAN 36', TADA 433, ST. PEDESTRIAN RAPPS SERVING PRIMARY ENTRANCES TO BUILDINGS SHALL BE A INSTANT 45' CLEAR BUDTH BUT NOT LESS THAN THE BUT PRECUI RECO FOR EXTS. (TILE 74 SEC.)

38, PEDESTRIAN RAMPS SERVING PROTART ENTRANCES TO BUILDINGS HAVING AN OCCUPANT LOAD OF BOD OR HORE SHALL HAVE A FINITURE CLEAR BUTH OF 60', I'TILE 21' SEC 330" BUTH.

35 THE MAXIMIT SLOPE OF A RAITP THAT SERVES ANT EXTILLAY.
PROVIDES HANDICAP ACCESS, OR 15 IN THE PATH OF TRAVEL, SHALL
BET LO 1958 THE METHOD ACCESS, OR 15 IN THE PATH OF TRAVEL, SHALL
BET LO 1958 THE METHOD ACCESS AND LEAD A 452/TILLE 2 ACCESS AND THE TOP AND
BOTTOM OF EACH RAITH, (ADA 452/TILLE 2 ACCESS AND AT INTERVALS AND
EXCEEDING 30° OF YERTICAL RISE AND AT EACH CHANGE OF
DIRECTION LANDINGS AND NOT CONSIDERED IN DETERMING THE
MAINTUM HORIZONIAL DISTANCE OF EACH RAITH, (ADA 452/TITLE 24
ASC 330/TUTILL

47, TOP LANDING SHALL BE NOT 1988 THAN 60' BLDE AND SHALL HAVE A LENGTH OF NOT LESS THAN 60". TADA 48.4/TITLE 74 SEC 330 TO UIL

43, INTERHEDIATE LANDINGS AT A CHANGE OF DIRECTION IN EXCESS OF SO DEGREES AND BOTTOM LANDRIGG SHALL HAVE A DIMENSION OF THE DIRECTION OF RAMP REN OF NOT LEGG THAN 12", (TITLE 24 SEC. 330T(D.16).

44 OTHER INTERMEDIATE LANDINGS SHALL HAVE A DIMENSION IN THE DIRECTION OF THE RAMP RIA OF NOT LESS THAN 60' (ADA 48 4/TITLE 24 SEC. 330 TO MAL

45 THE CROSS-BLOTE ON A RATE OR A SLOPE ACROSS A RATE LANDING IN ANY DIRECTION SHALL NOT EXCELL 150 (ADA 43.7).

46 HANDRAILS ARE RECURED ON RAMPS THAT PROVIDE HANDICAP ACCESS F THE SLOPE EXCEEDS ING. RISE IN 17-01 OF HORIZONTAL RIN TADA 4821.

41, HANDRAILS SHALL BE PLACED ON EACH SIDE OF EACH RAPP AND SHALL SE CONTINUOUS THE RULL LENGTH OF THE RAPP SHALL SE SCI IC 34' ABOVE THE RAPP EAGRACE SHALL SHADON A MINITH OF THE BEYOND THE TOP AND SOTTOT OF THE RAPP, AND THE ENDS SHALL SE RETURNED, AND ASSISTED.

AB, IF ETERCIENCY WARNING SYSTEMS ARE REQUIRED THEY SHALL ACTIVATE A PIEANS OF WARNING THE HEARING IMPAINSDIP, FLASHING VISUAL WARNING SHALL HAVE A FREQUENCY OF NOT MORE THAN 60 FLASHES FER MINUTE (171), E 24 BEC 103XC).

49. ELEVATORS SHALL BE AUTOMATIC SELF-LEVELING, 1/2" TOLERANCE MAXIMPI UNDER RATED LOADING TO ZERO LOADING CONDITIONS, TADA 4302/TITLE 24 SEC BIGNII).

50 AUTOMATIC, POUER OPERATED HORIZONTAL BLIDING CAR AND HOSTIVAY DOORS SHALL BE PROVIDED. FILITLE 24 SEC. 5/03).

51. DOOR WOTH SHALL BE 36" CLEAR MINITURE (ADA 4)0/11/LE 24 SEC.

B2, CAR SIZEI 66° X 54° MINIFUPI EXCLUDING RETURN PANELS, HINIFUM DISTANCE BETWEEN BIALL AND RETURN PANEL SHALL BE SIT (ADA ALIGITITLE 24 SEC. SIGNI 411 UARNING: OTHER CODES, NCLUDING BUT NOT LIMITED TO FIRE CODES, BUILDING CODE, ELEVATOR CODE AND REGILATIONS ADOPTED BY THE STATE FIRE MARSHALL MAY CONTAIN MORE RESTRICTIVE PROVISIONS REGIAPOING ELEVATOR CAS 5/ZE CHECK BITH THE APPROPRIATE EMPORECING OFFICIALS FOR DETAILS

B) FLOOR BUTTONS SHALL BE WITHIN 4-6" OF THE FLOOR EXCEPT FOR THE PHOTO ELECTRIC TUBE BY-PASS SUTCH EYERGENCY CONTROLS CHALL BE GROUPED IN ONE LOCATION IN OR ADJACENT TO THE BOTTOM OTHE PHARE, AND NO LOURE THAN 2-11" FROM THE FLOOR FOR THILTIPLE CONTROLS, ONE SET THIST COTTPLY WITH THE HEIGHT FROM SETENGENCY THE FRHAND SHALL BE POSTIONED AT 41-0" MANTHIM ABOVE HE FLOOR WITH A 2"-5" MINTHM CORD. (ADIA 41607/THE 24 SEC 555/44) 416 D/TITLE 24 SEC. 5163(4A1).

BA, CAR CONTROL BUTTONS BHALL BE 3/4" MINTUTH AND RAISED US THINKING INJUST CONTROL BUTTONS SHALL BE ILLUMINATED, MAYE SCHARE SHOULDERS, AND BE ACTIVATED BY A MECHANICAL MOTION HAIL SO DETECTABLE. ALL BUTTONS SHALL BO DESCHARED BY A 5/8" MINTUTH ARABO 6 THEOLOGY AND THE LEFT OF THE CONTROL BUTTON WITH A SHALLES STYPOL BELOW THE RAISED STYPOL BUTTONS RAISED CHARACTERS SHALLE BUTTONS. RAISED CHARACTERS SHALL BUTTONS RAISED STYPOLS BUTTONS RAISED STYPOLS SHALL BUTTONS RAISED STYPOLS RAISED STYPOLS RAISED STYPOLS SHALL BUTTONS RAISED STYPOLS RAISE

55. A HANDRAIL IS RECUPTED ON ONE WALL OF THE GAR PREFERABLY THE MEAR THE BAR SHALL BE 1/3" THINNUM CLEAR PROMITHE WALL AND 33" ("A) ABOVET HE FLOOR, CITILE 24 SEC. BIDSIS) NOTE: INTI THE OPPICE OF THE STATE ARCHITECT ISSUES SPLCTICATIONS FOR ELEVATOR HANDRAILS THIS BUILDING DEPARTMENT WILL ACCEPT ANDRAILS OF A SIZE WHICH CONFORMS TO THAT SPECIFIC FOR RESTROOMS OR STAIRS OR RAMPS ONLY.

56 A VISUAL AND ALDIBLE SIGNAL SHALL BE PROVIDED AT EACH HOISTBUAY INDICATING THE CAR ANSIERING THE CALL AND THE DIRECTION OF TRAYEL. VISUAL SIGNALS SHALL BE 7 107 X 7 107 INSTITUTE ALONG SHALL SHALL SHALL BE 7 107 X 7 107 INSTITUTE BOOM DIRECTION ON SHALL HAVE VERBAL ANNINCIATIONS THAT SAY UP OR DOWN THE CENTER LINE OF THESE SHALL SE 77 FROM THE COBBY FLOOR LADA 4JQ4/TITLE 24 6EC. 5IQX TUX

51. ELEVATOR LANDING JAMBS SHALL HAVE THE NIMBER OF THE FLOOR FOR WHICH THE JAMB IS LOCATED DESIGNATED BY A 2' MINIST, ARABIC NIMBERAL AND A RASED BRAILLE STYBOL AT A HEIGHT OF "IN" ABOVE THE RICORY AND BOTH SIDES OF HE DOOR RASED BRAILLE STYBOL SHALL BE DIRECTLY TO THE LEFT OF THE ARABIC STYBOL WALL BE ON A CONTRASTING BACKGROUND, (ADA A 105 MITCLE 24 SEC SYSTEM.)

56. HANDRA'LS PROJECTING FROM A WALL SHALL HAYE A SPACE OF NOT LESS THAN I V2" BETWEEN THE WALL AND HANDRAIL, (ADA 4262/ITILE 24 SEG 33006(E))

55. THE GRIP PORTION OF THE HANDRAIL SHALL BE NOT LESS THAN I MAY NOR YORK THAN I MY 'NO KROSS BECTIONAL DIMENSION OR THE SHAPE SHALL PROVIDE AN EQUIVAL BUT GRIPPING SURFACE AND ALL SURFACE SHALL BE SMOOTH WITH NO SHARP CORNERS. (ADA 4262) 68. PROVIDE A SECTION OF SHELF AND TON IN EACH COAT CLOSE! TO SHE NOT HE ARE COAT CLOSE! TO SHE NOT HE ARE COAT CLOSE!

#### ELECTRICAL NOTES:

I ALL ELECTRICAL IS PER ATTACHED DRAWING. 2. LIGHTING COM CHECK TO FOLLOW.

#### HVAC NOTES:

I. ALL HVAC UNITS AND DUCT MORK TO REMAIN AS IS NO CHANSE.

#### PLUMBING NOTES:

I. A VACUUM RELIEF VALVE LOCATED IN THE COLD MATER SUPPLY TO THE ELEVATED MATER HEATER TASK WITH NO VALVAS OR OTHER OBSTRUCTIONS LOCATED BETWEEN THE VALVE AND THE TANK.

2. THE DISCHARGE PHING PRON THE TEMPERTURE AND PRESSURE RELIEF VALVE IN THE MATER HEATER SHALL DISCHARGE INDIRECTLY AND INDEPENDENTLY TO A PLOOR DRAIN OR OTHER APPROVED TRAMPED AND VENED RECEPTOR IN THE SANTARY MASTE SYSTEM, A SAFE PAN IS NOT AN APPROVED RECEPTOR.

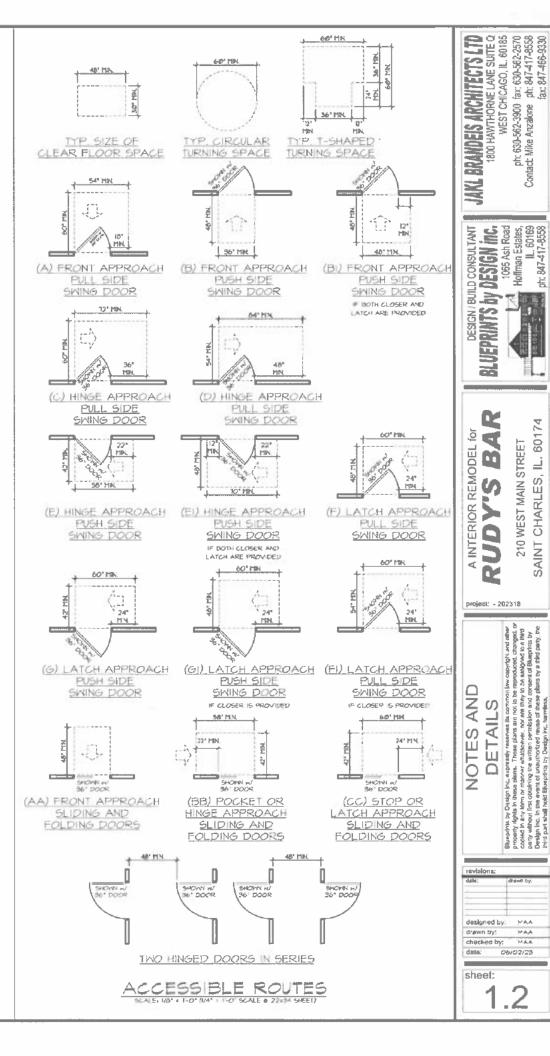
3. ALL LAVATORIES SHALL BE PROVIDED WITH AUTOMATIC WATER SAFTY MINING DEVICES THE MINING VALVES SHALL BE THERMOSTATIC, PRESSURE BALANCED OR COMBINATION CONTROLLED AND SHALL BE SET FOR A MAXIMM TEMPERTURE NOT TO EXCEED ONE HUNDURD TEN DEGRÉES (IIO F.) AT THE TIME OF INSTALLATION EACH SHALL BE LISTED AND LABELED COMPLIANT WITH BITHER ASSE-1016 OR -1017.

#### DOOR NOTES:

I. ALL HARDWARE TO BE ADA COMPLIENT. 2. ALL DOORS TO BE METAL DOORS WITH METAL JAMBS

3 ALL BATHROOM DOORS AND EXTERIOR OILY TO HAVE CLOSERS.

4 DOOR HARDHARE SHALL BE CAPABLE OF OPERATION WITH THE USE OF ONE HAND AND SHALL NOT REQUIRE THAT PINCHING, TIGHT GRASPING OR THISTON OF THE PRISTS TO OPERATE THANBURN PEADBOLTS ARE PROMISTED LEVER OR PADDLE DEADBOLT RELEASES ARE ACCEPTABLE, DOOR THRESHOLD SHALL NOT EXCEED T'IN HEIGHT, THRESHOLD SHALL NOT EXCEED TO TIN HEIGHT, THRESHOLD SHALL NOT ALL BEVEL DOOR CLOSERS SHALL, TREET OPENING FORCE AND SHEEP PERFOR REQUIREMENTS



: 630-562-3900 Mike Anzalone

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1065 Ast Hoffman E II. ph: 847-41

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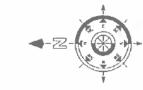
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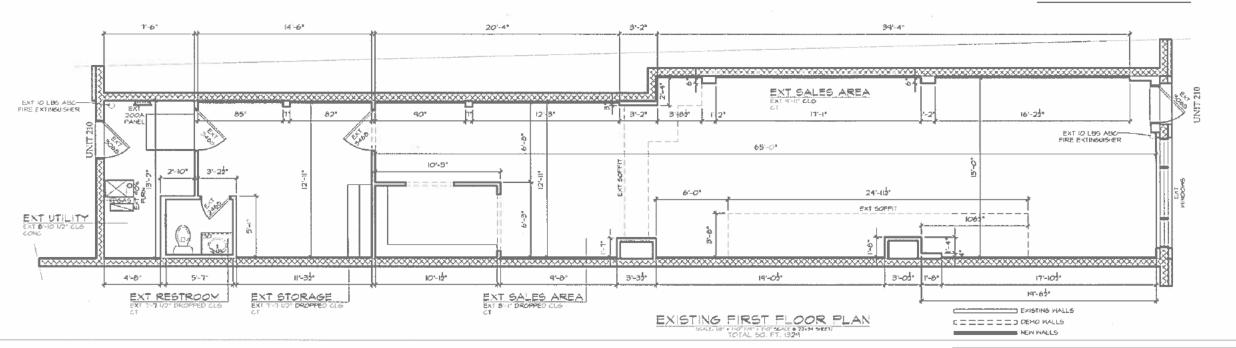
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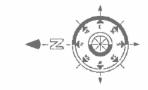
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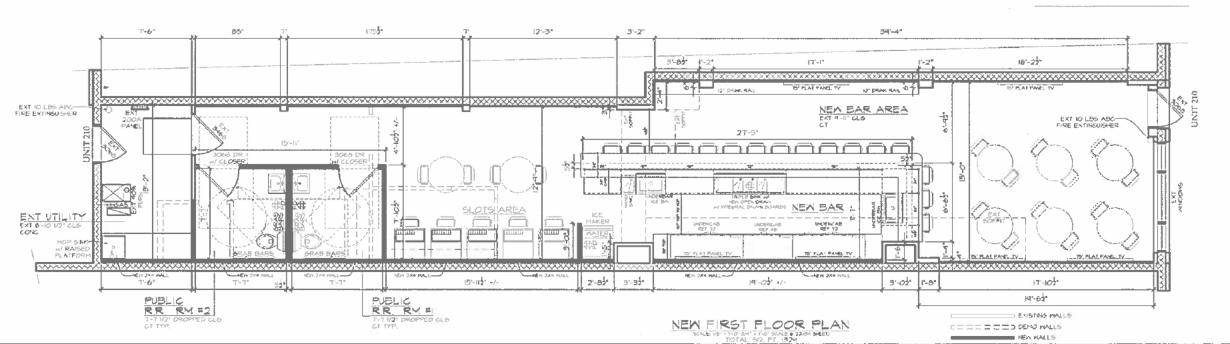






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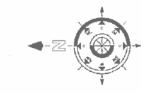
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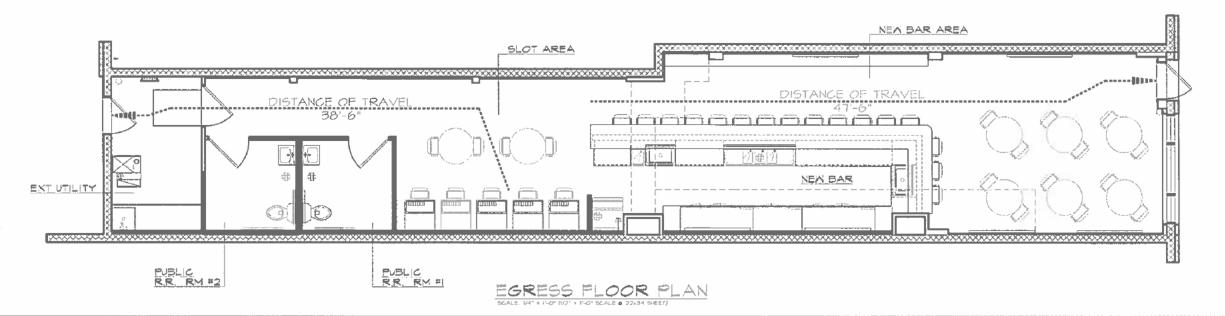
NEW & EXISTING IRST FLOOR PLAN

FIRST

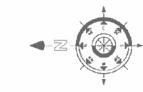
designed by: MAA drawn by: MAA checked by: MAA date: ' 06/02/23

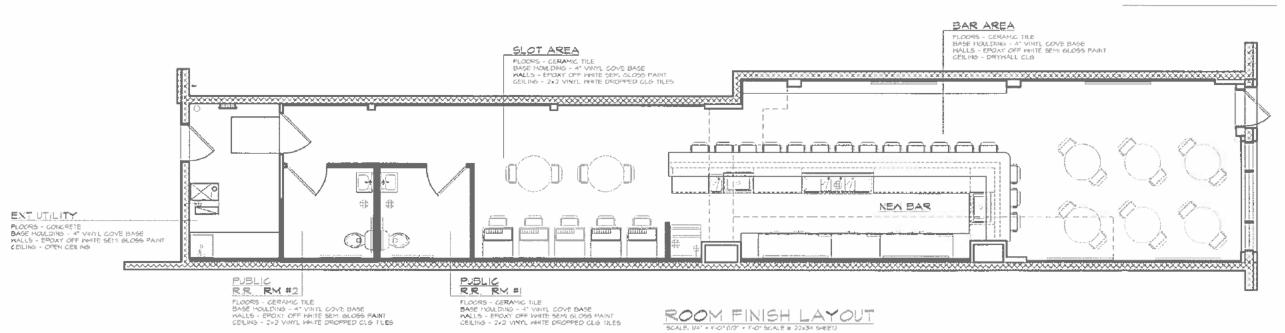
sheet: 3.1.1





CONTRACTOR TO CONFIRM DIMENSIONS OF BUILDING PRIER TO ORDERING MATERIALS





JAKL BRANDEIS ARCHITECTS LTD
1800 HAWTHORNE LANE SUITE O
WEST CHICAGO, IL. 60185
ph. 630-562-3900 fax: 630-562-2570
Contact: Mike Anzalone ph. 847-417-8588
fax: 847-468-9330

BLUEPRINTS by DESIGN inc.
1065 Ash Road

A INTERIOR REMODEL for RUDY'S BAR 210 WEST MAIN STREET SAINT CHARLES, IL. 60174

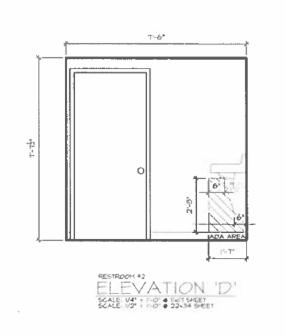
project: - 202318

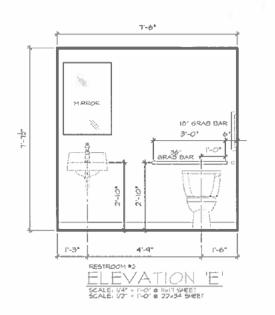
EGRESS FLOOR PLAN ROOM FINISH LAYOUT

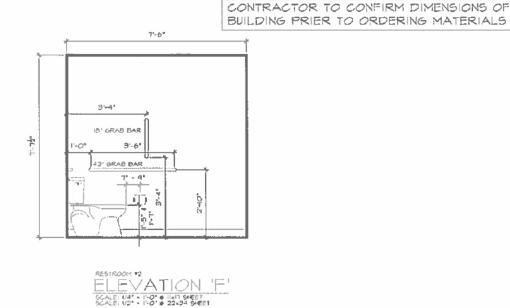
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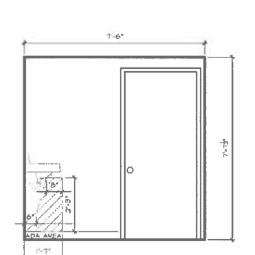
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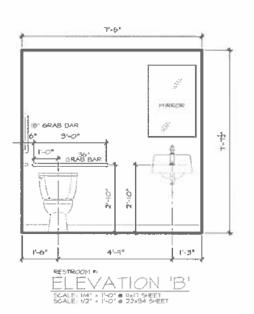


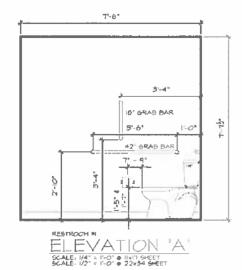


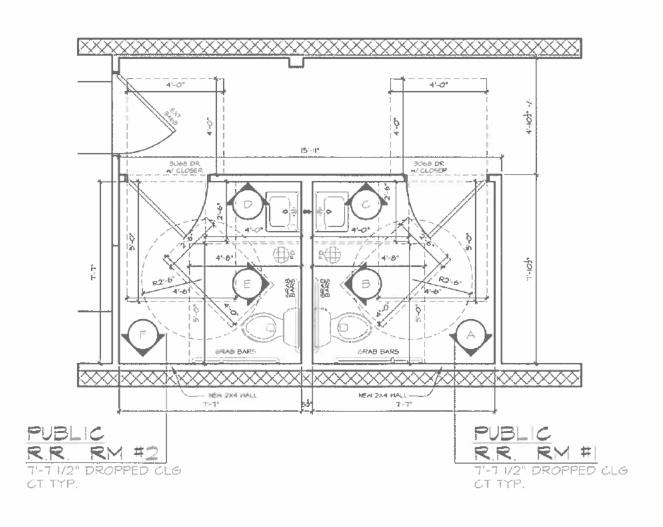












RESTROOM FLOOR PLAN

JAKL BRANDEIS ARCHITECTS LTD 1800 HAWTHORNE LANE SUITE O WEST CHICAGO. 1L, 60185 ph. 630-562-2300 fax: 630-562-2570 Contact. Mike Anzalone ph. 847-417-8558 fax: 847-468-9330

BLUEPRINTS by DESIGN inc.
1065 Ash Road

A INTERIOR REMODEL for RUDY'S BAR 210 WEST MAIN STREET SAINT CHARLES, IL. 60174

project: + 202318

INTERIOR ELEVATIONS

06/02/23

sheet: 5.1

EXISTING 2ND FLOOR JOIST -EXISTING 2x10 FLOOR JOIST --HTL RANGE ATTACHED AT 10P AND BOTTOM OF STUD HALL ENT SUSP ACOUSTICAL CEILING DROFFED CEILING AS SHOHEN PER PLAN 5/8" GTP, BD EA SIDE -ON 3 5/8" STL STUDS ID" 64, NATCH EXISTING VINTL BASE BOARD -BASE TO MATCH ---EXISTING COND : EXISTING CONC. TYPICAL NEW INTERIOR TYPICAL EXISTING MASONRY STUD WALL SECTION EXTERIOR WALL SECTION

sheet:

7.1

designed by: MAA drawn by: MAA checked by: MAA date: 06/02/23

JAKL BRANDEIS ARCHITECTS LTD 1800 HAWTHORNE LANE SUITE O WEST CHICAGO, IL. 60185 ph; 630-562-3900 fax; 630-562-2570 Contact: Mike Anzalone ph; 847-417-8568 fax; 847-466-9330

BLUEPRINTS by DESIGN inc.
1065 Ash Road

A INTERIOR REMODEL for RUDY'S BAR

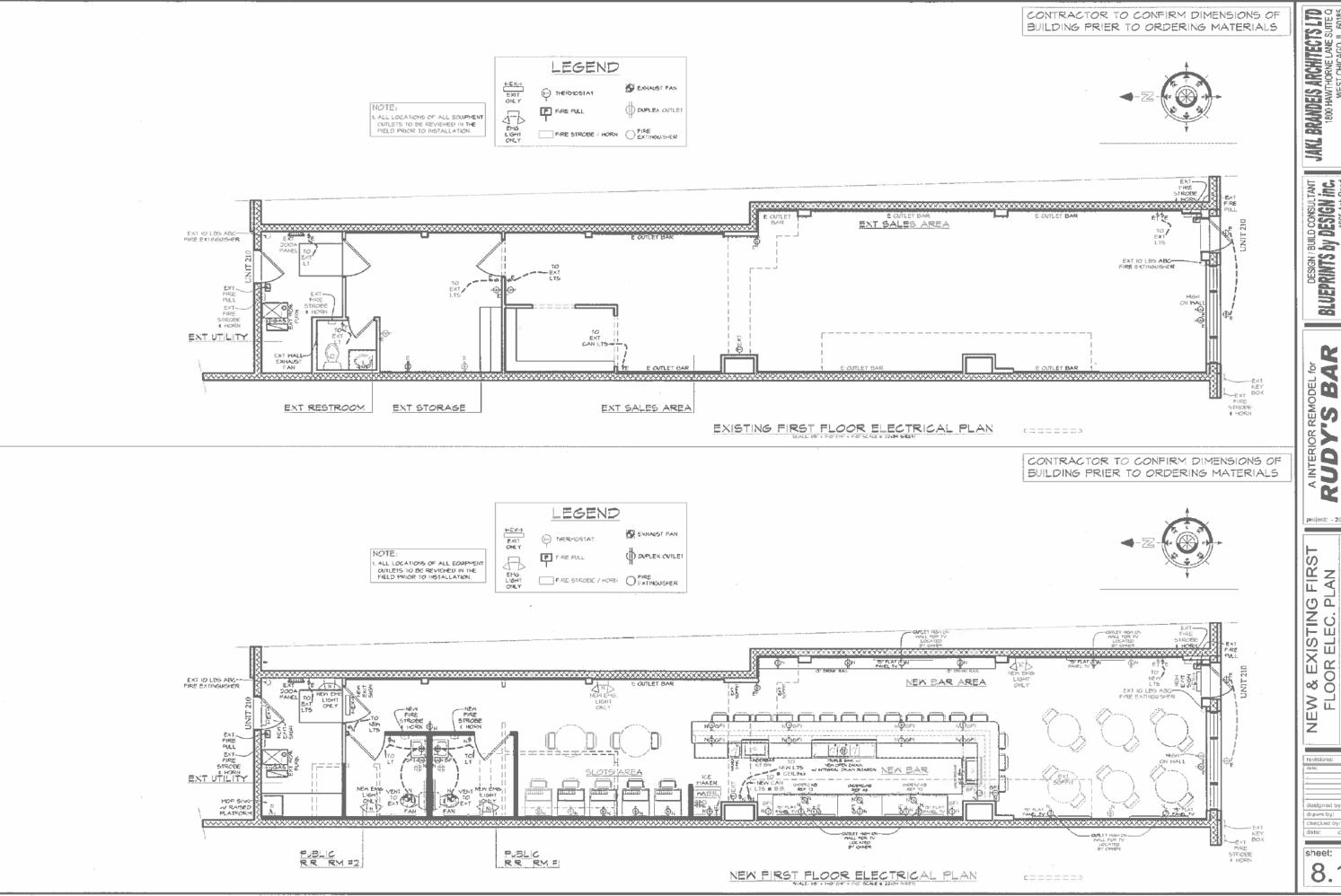
project: - 202318

EXISTING BUILDING

SECTION

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Design for, in the sent and other addition or entires general to these plans in the property of the property or the plans and post distingtions by designification reuses of these plans is the sent plans.

210 WEST MAIN STREET SAINT CHARLES, IL. 60174



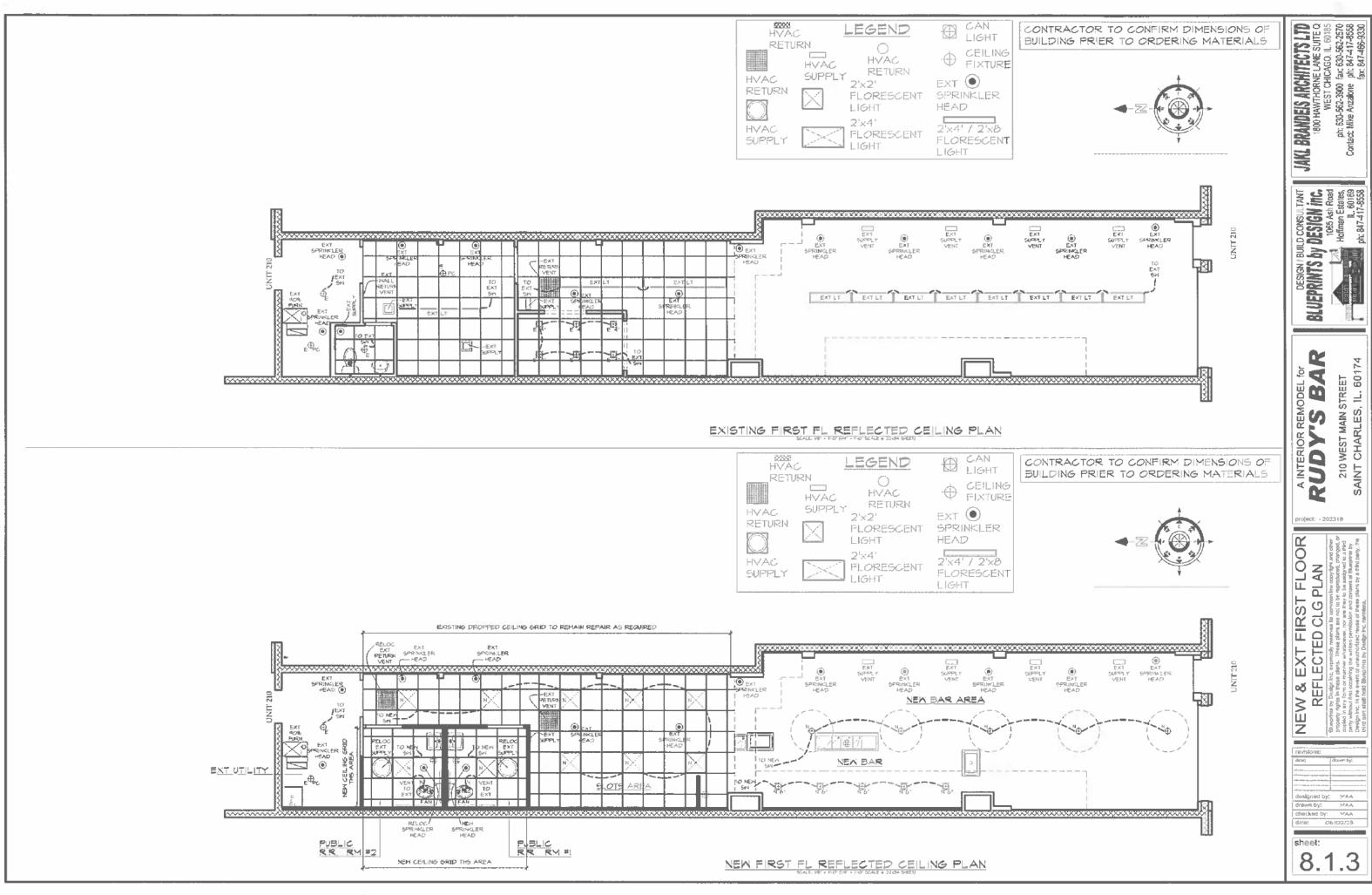
JAKL BRANDES ARCHITECTS LTD
1800 HAWTHORNE LANE SUITE Q
WEST CHICAGO, 11. 60185
ph; 630-562-3900 fax; 630-562-2570
Contact: Mike Arzalone ph; 847-417-8558
fax; 847-466-9330

BLUEPRINTS by DESIGN inc.
1065 Ash Road
1065

BAR 210 WEST MAIN STREET SAINT CHARLES, IL. 60174

designed by: MAA

8.1.2





#### CERTIFICATE OF LIABILITY INSURANCE

5/1/2023

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.

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 rights to the certificate holder in lieu of such endorsement(s). CONTACT NAME: PHONE (A/C, No, Ext): 630-232-1640 E-MAIL Valley Companies, Inc. FAX (A/C, No): 630a232-1687 1823 Centre Point Circle Suite 101 ADDRESS: info@valley78.com Naperville IL 60563 INSURER(S) AFFORDING COVERAGE NAIC # License# 3000101732 INSURER A: Society Insurance 15261 INSURED SCMCENT-01 INSURER R : SCMC Enterprises Inc. 210 W Main St INSURER C: St Charles IL 60174 INSURER 0: INSURER E : INSURER F : **COVERAGES CERTIFICATE NUMBER: 895359404 REVISION NUMBER:** 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 ADDL SUBR INSR POLICY EFF (MM/DD/YYYY) POLICY EXP TYPE OF INSURANCE PÓLICY NUMBER (MM/DD/YYYY) Х COMMERCIAL GENERAL LIABILITY BP18034534 11/9/2022 11/9/2023 **EACH OCCURRENCE** \$1,000,000 DAMAGE TO RENTED CLAIMS-MADE X OCCUR \$ 100,000 PREMISES (Ea occurrence) MED EXP (Any one person) \$1,000 PERSONAL & ADV INJURY \$ 1,000,000 GEN'L AGGREGATE LIMIT APPLIES PER: GENERAL AGGREGATE \$2,000,000 Х POLICY LOC PRODUCTS - COMP/OP AGG \$2,000,000 OTHER **AUTOMOBILE LIABILITY** COMBINED SINGLE LIMIT \$ (Ea accident) ANY AUTO BODILY INJURY (Per person) \$ OWNED SCHEDULED AUTOS ONLY HIRED BODILY INJURY (Per accident) s AUTOS NON-OWNED PROPERTY DAMAGE AUTOS ONLY \$ AUTOS ONLY (Per accident) \$ UMBRELLA LIAB OCCUR **EACH OCCURRENCE** \$ **EXCESS LIAB** CLAIMS-MADE AGGREGATE S DED RETENTION \$ \$ WORKERS COMPENSATION STATUTE AND EMPLOYERS' LIABILITY ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? E.L. EACH ACCIDENT Ś N/A (Mandatory in NH) E.L. DISEASE - EA EMPLOYEE If yes, describe under DESCRIPTION OF OPERATIONS below E.L. DISEASE - POLICY LIMIT . LIQUOR LIABILITY BP18034534 \$1,000,000 11/9/2022 11/9/2023 AGGREGATE DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

**CERTIFICATE HOLDER** 

CANCELLATION

State of Illinois Liquor Control Commission 50 W Washington Suite 209 Chicago IL 60602 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

Dak Holly



#### CERTIFICATE OF LIABILITY INSURANCE

5/1/2023

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 rights to the certificate holder in light of the policy.

			ate does not	confer rights	to th	e cer	tificate holder in lieu of s	uch er	ndorsement(s	i).	require an endorsemen	t. A St	atement on
PRODUCER Valley Companies, Inc.						CONTACT NAME:							
1823 Centre Point Circle					PHONE (A/C, No, Ext): 630-232-1640 FAX (A/C, No): 630-232-1687					2-1687			
Suite 101 Naperville IL 60563							E-MAIL ADDRESS: info@valley78.com						
l Na	per	ville IL	. 60563								RDING COVERAGE		NAIC #
_							License#: 3000101732	INSUR	ERA: Society	Insurance		i	15261
INSU			rnrises Inc				SCMCENT-01						
SCMC Enterprises Inc. 210 W Main St								INSURER C:					
St Charles IL 60174								INSURER D:					
								INSURER E:					
<u> </u>	_			<del></del>				INSUR	ERF:				
		RAGES		CEF	TIFI	CAT	E NUMBER: 917913599				REVISION NUMBER:		
CI EX	ERT	ATED. IFICATE	E MAY BE IS	ANDING ANY RI SUED OR MAY	PERT POLI	REME FAIN, CIES.	RANCE LISTED BELOW HAY NT, TERM OR CONDITION THE INSURANCE AFFORDI LIMITS SHOWN MAY HAVE	OF AN	THE POLICIE	OR OTHER	DOCUMENT WITH RESPE	CT TO 1	WILLION THIS
INSR LTR			TYPE OF INSUR		ADDI	SUBR			PÓLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	/S	
Α	Х	COMM	ERCIAL GENERA	AL LIABILITY			BP18034534		11/9/2022	11/9/2023	EACH OCCURRENCE	\$1,000	.000
		c	LAIMS-MADE	X OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,0	
											MED EXP (Any one person)	\$ 1,000	
		]				1					PERSONAL & ADV INJURY	\$ 1,000	,000
		N'L AGGE	REGATE LIMIT A	PPLIES PER:							GENERAL AGGREGATE	\$ 2,000	.000
	. <u>X</u>	POLICY	Y PRO- JECT	roc							PRODUCTS - COMP/OP AGG	\$ 2,000	,000
		OTHER			<u> </u>	<u> </u>						\$	
	AUI	1	LE LIABILITY								COMBINED SINGLE LIMIT (Ea accident)	\$	
		ANY AL		SCHEDULED	ŀ						BOOILY INJURY (Per person)	\$	
		AUTOS	ONLY	AUTOS NON-OWNED							BODILY INJURY (Per accident)	\$	
		AUTOS	ONLY	AUTOS ONLY							PROPERTY DAMAGE (Per accident)	\$	
		LINADIDE	F11 A 1 1 A D									\$	<u></u>
		EXCES	ELLA LIAB	OCCUR							EACH OCCURRENCE	\$	
				CLAIMS-MADE							AGGREGATE	\$	
-	WOF	DED	RETENTION	N \$	_						PER OTH-	\$	·
	AND	EMPLO1	YERS' LIABILITY	Y/N					[ ]		PER OTH-		
	OFFI	IČER/MEI	TOR/PARTNER/E	PRECUTIVE PROPERTY.	N/A	;					E.L. EACH ACCIDENT	\$	
ļ	If yes	ndatory ir s, describ	e under								E.L. DISEASE - EA EMPLOYEE	\$	
A		JOR LIAE	N OF OPERATIO	NS below			BP18034534		11/0/2000	441010000	E.L. DISEASE - POLICY LIMIT	\$	2.000
``			512111				DF 10034334		11/9/2022	11/9/2023	AGGREGATE	\$1,000	3,000
Ì													
DESC	RIPT	ION OF C	OPERATIONS / LO	OCATIONS / VEHICL	FS (4	CORD	101 Additional Remarks Schadul	n many h	a attended if more				
	DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)												
CER	TtF	ICATE	HOLDER					CANC	ELLATION				
								UANU	LLLATION				
		C. 2	ity of St. Ch E Main St	arles				ACC	EXPIRATION ORDANCE WIT	DATE THE	ESCRIBED POLICIES BE CA REOF, NOTICE WILL B Y PROVISIONS.	NCELLI E DEL	ED BEFORE IVERED IN
St Charles IL 60174  AUTHORIZED REPRESENTATIVE  LINE 160174													



## State of Illinois Domestic/Foreign Corporation Annual Report

Year	Corporation File No
2022	71996573

FILED November 1, 2022

Jesse White, Secretary of State

2611					Jesse Wille, Secretary of			
Çorpo	rate Name	SCMC ENTERPR	ISES, INC.					
Regist	tered Ager	t JOHN P. COONE	Y					
Regist	ered Offic	e 1311 BUTTERFIL	ELD RD STE 308					
			RS GROVE, IL 60515-5625	DU PAGE				
Princip	oal address	s of Corporation	214 WMAIN ST					
	ST CHARLES, IL 60174							
. State o	or Country	untry of Incorporation ILLINOIS 3b. Date Incorporated/Qualified 09-26-2018						
The na	mes and a	ddresses of ALL	officers & directors MUS	ST be listed here!				
Officer								
Title		PRESIDENT						
Name (	& Address		Z 4220 EAST MAIN IL, 60174					
Title		SECRETARY						
Name 8	& Address		Z 4220 EAST MAIN IL, 60174					
Title		DIRECTOR						
	Address	BRIAN RUDOWIC 4220 E MAIN ST ST CHARLES, IL						
Minorit		Female [	Both issued as of <u>6-30-2022</u>					
Class		Series	Par Value	Number Authorized	Number (ssued			
COMMO	N		0.000000	1000	100.000			
		id-in-capital as of		is \$ <u>10000</u>				
		coto to pay its ai	muai nanchise (ax pase)	d upon 100% of its total paid	l-in capital.			
Under th	ne penalty	of perjury and as	s an authorized					
officer, I	declare th	iat this annual re	port, pursuant to	Fe	ee Summary			
provisio	ns of the E	Business Corpora	T	nise Tax: \$0.00				
examine and helia	a by me ar	nd is, to the best rrect and comple	of my knowledge		ng Fee: \$75.00			
		Heccand comple	ne.		Penalty: \$0.00			
BRIAN RUD Authorized O	OWICZ fficer				Interest: \$0.00			
PRESIDENT	No	vember 1, 2022		Tot	al Fee: \$75.00			



1.

## State of Illinois Domestic/Foreign Corporation Annual Report

Year

Corporation File No

2022

71996573

FILED November 1, 2022

Jesse White, Secretary of State

Corporate Name	SCMC ENTERPRISES, INC.
Registered Agen	t JOHN P. COONEY
Registered Office	1311 BUTTERFIELD RD STE 308
City, IL, Zip Code	e, County DOWNERS GROVE, IL 60515-5625 DU PAGE
Officers	
Title Name & Address	DIRECTOR JUSTIN ALLEN 4220 E MAIN ST ST CHARLES, IL 60174
Title	
Name & Address	
Title	
Name & Address	
Title	
Name & Address	
Title	
Name & Address	
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Name & Address	
Title	
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Name & Address	
Title	
Name & Address	
Title Name & Address	

#### **FORM BCA 2.10** ARTICLES OF INCORPORATION

\$150

**Business Corporation Act** 

Filing Fee:

Franchise Tax: \$ 25

To	Total: \$175	
File	File #:	
Ар	Approved By:JXR_	
	FILED	
	SEP 26 2018	
	Jesse White Secretary of State	
1.	Corporate Name: SCMC ENTERPRISES, INC.	
_		
2.	2. Initial Registered Agent: JOHN P. COONEY	
	First Name Middle Initial	Last Name
	Initial Registered Office: 1311 BUTTERFIELD RD STE 308	_
	Number Street Suite No.	
	DOWNERS GROVE II 60515-5625	DURACE

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

ZIP Code

Consideration to be Received Therefor

COMMON

1000

City

100

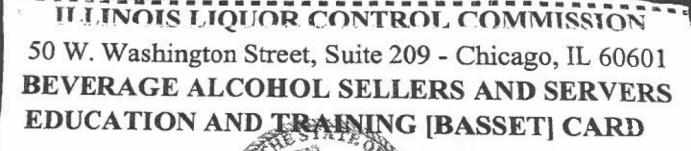
\$ 10000

County

#### **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 SEPTEMBER 26	2018	1311 BUTTER	RFIELD RD STE 30	8
Month & Day	Year		Street	
JOHN P. COONEY	DOWNERS	GROVE	IL	60515
Name		City/Town	State	7IP Code



Date of Certification: 8/23/2022 Expires: 8/23/2025

Trainer's IL Liquor License Number: 5A-0110606

JACQUELINE GORR

\*\*Card is not transferrable\*\*

Trainee Name: Jessica Horn

Certificate #: 000027716417

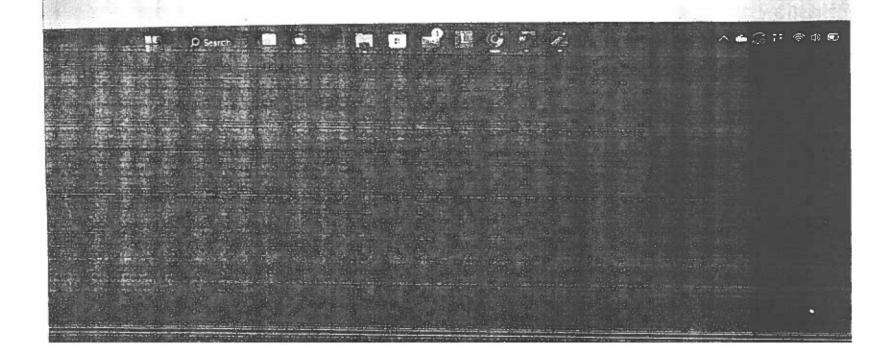
Date of Completion: 02/13/2023

School Name: 360training.com dba Learn2Serve

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

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

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





# Illinois BASSET SELLER / SERVER CERTIFICATION

Trainee Name: Shea Brown

Certificate #: 000028290881

Date of Completion: 03/22/2023

**School Name:** 

360training.com dba Learn2Serve

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

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

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



## Corporate Headquarters

5000 Plaza on the Lake, Suite 305 Austin, TX 78746

Phone: 877.881.2235

# Illinois BASSET SELLER / SERVER CERTIFICATION

Trainee Name: Shea Brown

Certificate #: 000028290881

Date of Completion: 03/22/2023

School Name:

360training.com dba Learn2Serve

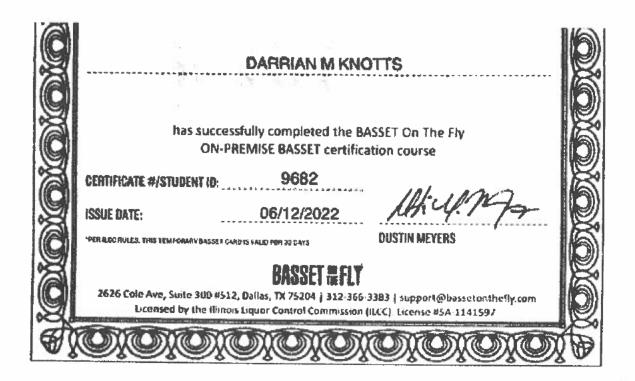
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Corporate Headquarters 1300 Pieza en the Lake, 34 cm 305 Astan, TH 787 (6 Phone 877-881 23 25



# BASSET ## FLY

2626 Cole Ave. Suite 300 #512. Dallas, TX 75204 312-366-3383 support@bassetonthefly.com www.bassetonthefly.com

Per ILCC rules, this temporary BASSET card is valid for 30 days only. Your official 3-year BASSET card will be mailed by the Illinois Liquor Control Commission (ILCC).

Within 10 days of issuance, this certification should appear in the Illinois Liquor Control Commission's online database at www.ifcc.illinois.gov. If not, please contact us.

# **Hours of Operation**

Monday CLOSED

Tuesday CLOSED

Wednesday 2:00 PM - 1:00 AM

Thursday 2:00 PM - 1:00 AM

Friday 2:00 PM - 1:00 AM

Saturday 2:00 PM - 1:00 AM

Sunday 11:00 AM – 6:00 PM

## **RUDY'S**

There will be no food served at Rudy's.

We will give out free pretzels.

#### RUDY'S ROAD HOUSE

#### Signature Drinks

Rudy's Mule - Vodka, Ginger beer and lime

Sun-Soaked Cherry - Vodka, Sprite, lime and grenadine

Summertime Peach – Peach & orange vodka, peach schnapps, Sprite, and lime juice

Whisky Sour – Whisky, sour mix, and simple syrup

Wildwood - Vodka, raspberry liqueur, Sprite and sour

Rudy's Lemonade - Jack Daniels, Southern Comfort, Sprite and sour

Passionfruit - Rum, Sprite, pineapple juice and passion fruit liqueur

#### **Premium Selections**

#### SCOTCH

Johnnie Walker Blue Label

Johnnie Walker Green Label

Glenlivet

#### <u>WHISKEY</u>

Jack Daniel's Single Barrel

Jack Daniel's Single Barrel Rye

Jack Daniel's Sinatra Select

#### **TEQUILA**

Don Julio 1942

1000 Milenio

#### **ASSORTED SHOTS**

ASSORTED DOMESTIC AND PREMIUM BEERS

ASSORTED OLD FASHION COCKTAILS

ASSORTED BOURBONS