| A 28 | AGENDA ITEM EXECUTIVE SUMMARY | | Agen | da Item number: 5b | |
|---|-------------------------------|---------------------------|---|--------------------|--|
| ST. CHARLES | Title: | Lice | Recommendation to approve a Proposal for a D8 Liquor License Application for Pinot's Palette Located at 3823 E Main St., St. Charles. | | |
| | Presenter: | Police Chief James Keegan | | | |
| Meeting: Government Operations Committee Date: September 16, 2019 | | | | | |
| Proposed Cost: \$Budgeted Amount: \$Not Budgeted: | | | Not Budgeted: | | |

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

Pinot's Palette is a painting studio specializing in the instruction of painting. Scheduled, instructor-led workshops will be facilitated in this space. The applicant would like to offer wine or beer for sale to customers to enhance their experience.

The applicant is a new business owner.

Pursuant to this item being presented at the Government Operations Committee meeting on September 16, 2019 to seek approval; it will be brought before the Liquor Control Commission at a meeting scheduled for 4:30 p.m., the same day, to process and move it forward to this Committee. This item will then continue on to the City Council meeting scheduled on October 7, 2019 for final approval.

Attachments (please list):

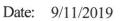
Summary, Floor Plan, Liquor License, Insurance Quote

Recommendation/Suggested Action (*briefly explain*):

Recommendation to approve a proposal for a D8 Liquor License application for Pinot's Palette located at 3823 E Main St., St. Charles.

Police Department

Memo



To: The Honorable Ray Rogina, Mayor-Liquor Commissioner

From: James Keegan, Chief of Police

Re: Background Investigation-Liquor Establishment/D-8 (Pinot's Palette)

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 is a new business venture looking to capitalize on the arts and entertainment industry by offering painting classes with beer and wine sales. A detective was assigned this investigation and reviewed both the site location/floor plans and the corresponding application material. We found nothing of a derogatory nature that would preclude either the site location or the applicant from moving forward with on-site consumption.

Thank you in advance for your consideration in this matter.



Police Department

Memo



| Date: | 09/03/19 |
|-------|---|
| To: | Chief Keegan |
| From: | Chief Keegan Commander Pierce |
| Re: | Liquor License Background, Fox River Studio Inc. (DBA Pinot's Palette). |

The purpose of this memo is to outline steps taken during the background investigation for a liquor license application. This investigation was done based on the application submitted for Class D-8 for the business, Pinot's Palette. This business is to be located at 3823 E. Main Street.

Applicant:

Kumler, Amy J.

Elgin, IL 60120

Application:

The application was received on or around 08/21/19. The application appears to be complete, including a signed lease, Certificate of Insurance, a floor plan, and business plan.

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

Records Checks:

Kumler was fingerprinted. Responses from both the FBI and Illinois Bureau of Identification show nothing that would cause the license to be denied.

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

Kumler advised that in the past 10 years she has lived in Wood Dale or at the listed Elgin address. Checking with both police departments no contacts were found.

A check of the Illinois Liquor Control Commission showed no current active license for Fox River Studio Inc. or for Kumler and no record of license revocation.

Service, Courage, Professionalism, Dedication



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

A check of the Illinois Secretary of State showed Fox River Studio Inc. to be in good standing.

INTERVIEW WITH APPLICANT:

On 08/22/19 at approximately 9:30am, I met with Amy Kumler at the police department front desk. Amy explained the premise of their business as artist led painting activities where clients are walked through a painting project by a local artist. Kumler said Pinot's Palette is a franchise business she has bought into. Kumler said this is her first location and she does not hold nor has she held a liquor license before. As part of the painting experience Pinot's Palette will offer beer and wine to the clients. Kumler advised that each public paint session can accommodate up to approximately 48 people. Kumler said the site will have a private room for corporate parties or prearranged group parties. This room will be able to hold up to 36 guests. Kumler indicated she has no liquor inventory at this time, but plan on having approximately \$4,000.00 worth of inventory when the business opens. Kumler is a U.S. citizen. Kumler has no staff hired at this time, but plans to employ approximately 15 people. The businesses hours will be Monday through Thursday 6pm to 10pm and Friday through Sunday 9am to 10pm.

SITE VISIT:

Kumler is in the final stages of selecting a general contractor for build out purposes. No construction has started on the space. Therefore no site visit was conducted.

This concludes this background investigation. Recommend approval.

CP

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

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



| Date Application Received: X New Application Cancer Class: Business Name: Fox River Studio, Frc DBA Pinol'S Palette | | | | |
|---|---------------|-----------------|--|--|
| Business Name: Fox River Studio, Inc DBA Pi | nol's Palette | 2 | | |
| APPLICATION CHECKLIST | | | | |
| Check items to confirm all are attached to this application | Applicant | Office Use Only | | |
| Application Fee | ₹ | | | |
| Completed Application for all questions applicable to your business. | Ø | | | |
| Copy of Lease/Proof of Ownership | Ø | | | |
| Copy of Dram Shop Insurance or a letter from insurance agent with a proposed quote. | Ŕ | | | |
| Copy of Articles of Corporation, if applicable. | X | | | |
| 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. | ∑⊒, | | | |
| Copy of Site Plan for Establishment (Drawn to scale including the parking lot, patio and/or deck, outdoor seating). Last two pages of lease | M | | | |
| 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 . | Жа | | | |
| Copy of Business Plan, to include: Hours of Operation Copy of Menu Whether or not live music will be played at this establishment Will there be outdoor seating and/or outdoor designated smoking area Do not include a marketing or financial plan with this business plan | Ð | | | |
| 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. | Έ ρ ο | | | |
| 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. | Ъ р | | | |
| OFFICIAL USE ONLY | 1 | | | |
| Approved* Denied Date Approved/Denied: Customer Number: | | | | |
| Signature of Mayor, Liquor Control Commissioner Date Is | sued | | | |

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

| APPLICAN | NT INFORM | ATION | | | | | |
|---|---|-----------------------------|---------------------------------------|--|--|--|--|
| | | 🗌 Individual 🗌 Pa | artnership 🕅 Corpo | ration 🛛 Other (explain) | Ľ | | |
| B. Business Name: Fox River Studio, Inc. DBA Pinot's Palette | | | | | | | |
| C. Business | C. Business Address: 3823 E Main St St. Charles, 12 60174 | | | | | | |
| D. IL Tax ID | E. Business Phone: F. Business E-mail: G. Business Website: | | | | | | |
| H. Contact | H. Contact Person: Amy Kumler I. Title: J. Phone No.: | | | | | | |
| stcha | des@ pi | notsipalette. | com Presiden | 1+0 | 13-612-5576 | | |
| I K. II COLDOL | auon, Corpo | ration Name: Ner Studi | | | $5-\varphi_1 q = 35 + \varphi_1$ | | |
| | | | | | | | |
| E | | | | | | | |
| A. License C | lass: 🗆 A p | ackage 🗆 🖪 Restau | | Hotel/Banquet/Arcada/Q- | Center/Entertainment/Club | | |
| | Othe | er: | I | | | | |
| street addre | ss): | iquor license (exact | C. Number of Parking Spaces: | D. Outside Dining s.f. [17.20.020-R]: | E. Holding Bar s.f. [5.08.010-F]: | | |
| 3823 E F. Total Build | MainSt ling s.f.: | G. Total Number | 125 H. Number of Bar | NA | NA | | |
| 217(| P | of Seats | Seats: | I. Sale Counter s.f.: | J. Live Entertainment Area s.f. [5.08.010-H]: | | |
| s.f.:NA | L. Cooler s.f.: 1ス | M. Dry Storage s.f.: 289 | N. Seating Area s.f.: 1,040 \$ 567 | O. Retail/public Area s.f.: | P. Service Bar s.f. [5.08.010-0]: | | |
| Q. Brief Business Plan description based on type of establishment listed above: A painting Studio specializing in the instruction of parinting, Commonly referred to as a "paint of sip". | | | | | | | |
| MANAGER I | | | | | | | |
| Full Name, in | clude middle | e initial: Amy | 5 Kumler | Title: President | t + Franchise Owner | | |
| Birthdate Home Address | Birthp | lace: Chicego | Driver's License#: | 546-010-9711Home | Phone: | | |
| nome Addres | s: | | | | | | |
| Full Name, inc | :lu | | | Title: | | | |
| Birthdate: | Birthpl | ace: | Driver's License#: | | Phone: | | |
| Home Address | 5: | | | | | | |
| Full Name, inc | lude middle | initial: | | Title | | | |
| Birthdate: Home Address | Driver's License#: Home Phone: | | | | | | |
| | | | | | | | |

| PR | OPOSED FLOOR PLAN/LAYOUT OF PROPERTY |
|----------|---|
| Ma | andatory: attach to this application a floorplan or layout of the proposed facility to include the following: |
| CL/ | ASS & 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. 4. | A copy of the approved site drawing shall be attached to the approved license and is made a part of said license. |
| | It shall be unlawful for any Class B licensee to operate and/or maintain the licensed premises in any manner inconsistent with the approved site drawing. |
| 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.** |
| | 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. |
| | A copy of the approved site drawing shall be attached to the approved license and is made a part of said license. |
| | It shall be unlawful for any 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. |
| | COOL AND NOTIBERS FOR THIS LICENSE. |

| CC | DRPORATION / PREMISES QUESTIONS | | | |
|----|---|--|--|--|
| | If applicant is an individual or partnership, is each and every person a United States citizen (5.08.070-2)? X Yes INO | | | |
| 1. | 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): A painting Studio | | | |
| 3. | A painting Studio | | | |
| | Number of years of experience for the above listed type of business (5.08.070-4): O New Business | | | |
| 4. | Amount of merchandise that normally will be in inventory when in operation (5.08.070-5): $4,000 - initial$ | | | |
| 5. | Location/address and description of business to be operated under this applied for license (5.08.070-6): Pinot's Palette, 3823 E Main St, St Charles, IL 60174 A painting Studio Docused on painting instruction Chasses, Accompanied by beer, wike or softdrinks. | | | |
| 6. | Is the premises owned or leased (5.08.070-6A)? Owned States | | | |
| 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: PN Investments, Inc. c/o the 1919 SIX, LLC | | | |
| | Address of Building Owner: 1300 ROSE ROGA, Lake Zurich 1600+7 | | | |
| | Mailing Address of Building Owner (if different): Same (Property Sold 7/29/19) | | | |
| | Phone Number: E-mail Address: | | | |
| | Name of Building Owner: Mertens, LLC do Murray Comenercial | | | |
| | Address of Building Owner: 473 Dunham Rd, Suite 200 | | | |
| | Address of Building Owner: 473 Dunham Rd, Suite 200 Mailing Address of Building Owner (if different): | | | |
| | Phone Number: 630-513-0173 E-mail Address: anne murray commercial, Com | | | |
| | Name of Building Owner: | | | |
| | Address of Building Owner: | | | |
| 1 | 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 X No If yes, please list the business name(s) and address(es): | | | |
| | | | | |

| 9. | Does applicant have any outstanding data structure |
|-------------------------------|--|
| | Does applicant have any outstanding debt with the City of St. Charles, including, but not limited to, utility bills, alcohol tax, and permit fees, for any surrent even in |
| | the second of any current or previous establishment owned, operated or managed by the applicant? |
| | If yes, please note the City of St. Charles requires all debt to be paid in full before consideration of a new or renewed liquor license is issued. |
| | Are any improvements planned for the building and/or site that will require a building permit? Yes INO |
| 10. | If yes, has a building permit been applied for? Yes X No Arete Design Studio (architect) Appl |
| | If yes, has a building permit been applied for? Yes X No Arete Design Studio (architect) Appl Will be applying for permits in Fri Has applicant applied for a similar or other license on the premises other than the one for which the license in |
| 11. | 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)? \Box Yes Xi No |
| | (5.08.070-7)? Yes X No |
| | If yes, what was the disposition of the application? Explain as necessary: |
| | |
| 2. | Has applicant (and all percens listed and a second |
| | Has applicant (and all persons listed on page 1 of this application) ever been convicted of a felony under any Federal or State |
| | law, or convicted of a misdemeanor opposed to decency or morality (5.08.070-8)? Yes X No |
| | Is applicant (and all persons listed on page 1 of this application) disqualified from receiving a liquor license by reason of any matter contained in Illinois State laws of any |
| | matter contained in Illinois State law and/or City of St. Charles Municipal Ordinances? |
| | |
| 1 | List previous liquor licenses issued by any State Government or any subdivision thereof (5.08.070-9). Use additional paper |
| | sovernment Unit: |
| C | Date: Location, City/State: |
| s | Decial Fundaments |
| | pecial Explanations: |
| | pecial explanations: |
| G | |
| | overnment Unit: |
| | |
| D | overnment Unit: |
| Da Sp | overnment Unit: ate: Location, City/State: becial Explanations: |
| D: Sp Ha | overnment Unit: ate: Location, City/State: pecial Explanations: over any liquor licenses possessed ever been revoked (5.08.070-9)? Yes: Yo |
| Da Sp Ha If y | overnment Unit: ate: Location, City/State: Decial Explanations: ave any liquor licenses possessed ever been revoked (5.08.070-9)? Ves, list all reasons on a separate signed later |
| D: Sp Ha If y Ha: | overnment Unit: ate: Location, City/State: becial Explanations: over any liquor licenses possessed ever been revoked (5.08.070-9)? Yes YVNo |

| 15 | Complete ONLY if yes was answered to the questions above (14): ρ/A |
|-----|---|
| | Name: |
| | Name of Business: |
| | Position with the Business: |
| | Date(s) of Denial: |
| | |
| | Reason(s) for Denial of License: |
| | |
| | |
| | |
| 16. | Date of Incorporation (Illinois Corporations) (5.08.070-10): February 13, 2019 Date qualified under Illinois Business Corporation Action in the second secon |
| | Date qualified us doubt in a single station of the privary 13, 2019 |
| | . In the second se |
| 17. | February 13, 2019 |
| 17. | 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)? |
| | Yes INO |
| | Have you, or in the case of a corporation, the local manager, or in the case of a partnership any of the partners, ever been |
| | convicted of any violation of any law pertaining to alcoholic liquor? |
| | |
| | Have you, or in the case of a corporation the local manager, or in the case of a partnership any of the partners, ever been convicted of a felony? |
| | i i |
| | Have you ever been convicted of a gambling offense? and the local manager(s).) |
| | and the local manager(s).) |
| | Will you and all your employees refuse to serve or sell alcoholic liquor to an intoxicated person or to a minor? |
| | Yes INo |
| 18. | 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 are listed on page 1. |
| | |
| | |
| 1 | Has this been done? A Yes \Box No If yes, date(s): $\mathcal{F}/\mathcal{A}Q/1Q$ |
| | If yes, date(s): $7/39/19$ |
| | |
| .9. | Mandatan |
| | 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)? Styres INO If already furnished, date of delivery: |
| | |
| | NOTE: Insurance must be issued from May 1, 20XX – April 30, 20XX in accordance with City code 5.08.060. Request a provide the from your insurance company if you are applying former to the second sec |
| | prorated rate from your insurance company if you are applying for a new license during this timeframe. |

| 20. | Mandator indigent pe | y: Is the premises within 100 fe ersons; home for veterans, thei | eet of any real property of any church; school; hospital; home for the aged or ir wives/husbands, or children; and/or any military or naval station (5.08.230)? |
|---------|-------------------------|---|--|
| | □ Yes | ANO | military or naval station (5.08.230)? |
| COMM | | DITIONAL INFORMATION | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| APPLIC | CATION FO | R LATE NIGHT PERMIT | |
| SUPPL | EMENTAL | TO LIQUOR LICENSE FOR CLA | ASS B/C |
| 10: St. | Charles Li | quor Control Commission | Date: |
| l now p | possess or | have applied for a liquor lice | ense Class |
| Applica | ant's Name | : | |
| Namo | of Business | | |
| vanie (| or business | .: | |
| Busines | ss Address: | | |
| Busines | ss Phone: | | |
| | | | |
| | | PERMIT APPLIED FOR Night Permit fee is required | at the time the permit is issued. |
| | | | |
| | :00 a.m. La | te Night Permit – fee of \$800 | 00.00 |
| | | | |
| □ 2: | :00 a.m. La | te Night Permit – fee of \$2,3 | 300.00 |
| | | | |
| | Other perm | its that may be available upo | oon request include: |
| • | Outdoor | Dining Permit (Contact Com | 3-day event @ \$100.00 per day) nmunity & Economic Development @ 630.377.4443) |
| GNAT | 4 | | 200101112 Development @ 050.577.4443) |
| IGNAT | URES . | | olia |
| - | M | fonde | 8/19/9 |
| | Applicar | nt Signature | Date |

| Please list employees clerks who are permi applicable. Add anot | s required to have B.A.S.S.E.T training on this tted to make alcoholic liquor sales. Include context the page, if needed. | page – include all managers, a opies of certificates for mana | assistant managers, bartenders, and gers only and mark Manager if |
|---|---|--|---|
| Name: Amy (First) | | Johanna (Middle) | Manager |
| Home Street Address | : - | | _ |
| City, State, Zip: El | gin, 12 60120 | | |
| Date of Course: 7/2 | A2/19 Place Course was Ta | aken: Online | |
| Birthdate | Certificate Granted: 7/22/ | 2019 Expirat | tion: 7/22/2022 |
| Name: (First) | (Last) | (Middle) | Manager |
| Home Street Address: | | | |
| City, State, Zip: | | | |
| Date of Course: | Place Course was Ta | ken: | |
| Birthdate: | Certificate Granted: | Expirati | on: |
| Name: (First) | (Last) | (Middle) | Manager |
| lome Street Address: | | | |
| City, State, Zip: | | | |
| ate of Course: | Place Course was Tak | ken: | |
| irthdate: | Certificate Granted: | Expiratio | on: |
| l ame: (First) | (Last) | | |
| ome Street Address: | (Last) | (Middle) | Manager |
| ity, State, Zip: | | | |
| ate of Course: | Place Course was Take | | |
| rthdate: | Certificate Granted: | | |
| EW MANAGEMENT RI | | Expiratio | n: |
| SAME AVIANNA USE AVIA ENVIRONTER | EQUIREMENTS | ed and that person must be fi | |

| Business Name: | |
|---|--|
| SIGNATURES | |
| Autoule Applicant's Signature | Notary & Datessssssssssssssssss |
| | "OFFICIAL SEAL" |
| | Seal: Notary Public, State of Illinois My Commission Expires 08/29/22 |
| Liquor Commissioner hereby directs City Clerk to is | sue permit indicated above. |
| Liquor Commissioner's Signature | Date |

| | DENDUM TO RETAIL LIQUOR LICENSE APPLICATION |
|-----|--|
| То | be completed by the City of St. Charles Police Department |
| | te: Name of Applicant: |
| Na | me of Business: |
| Ad | dress of Business: Ward Number: |
| То | Liquor Control Commissioner, City of St. Charles, Illinois |
| eff | suant to the provision of the City of St. Charles Municipal Code, Chapter 5.08, Alcoholic Beverages, the following guide shall be in ect 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? |
| 3. | If the answer to question 2 is yes, answer the following: Is applicant's place of business a hotel offering restaurant service, a regularly organized club, a restaurant, a food shop, or other place where the sale of alcoholic liquors is not the principal business? Yes No |
| | If yes, answer a, b and c: a. State the kind of such business: b. Give date on which applicant began the kind of business named at this location: c. Has the kind of business designated been established at this location for such purpose prior to February 1, 1934, and carried on continuously since such time by either the applicant or any other person? Yes No |
| 4. | If premises for which an alcoholic liquor license is herein applied for are within 100 feet of a church, have such premises been |
| | licensed for the sale of alcoholic liquor at retail prior to the establishment of such church? 🗌 Yes 🗌 No |
| | If yes, have the premises been continuously operated and licensed for the sale of alcoholic liquor at retail since the original |
| | alcoholic liquor license was issued therefore? 🛛 Yes 🖓 No |
| 5. | Is the place for which the alcoholic liquor license is sought a dwelling house, flat, or apartment used for residential purposes? |
| 6. | Is there any access leading from premises to any other portion of the same building or structure used for dwelling or lodging purposes and which is permitted to be used or kept accessible for use by the public? (Connection between premises and such other portion of building or structure as is used only by the applicant, his/her family and personal guests not prohibited.) Yes No |
| 7. | If applicant conducts or will conduct in the same place any other class of business in addition to that of City Retailer of Alcoholic Liquor, state the kind and nature of such business: Yes No |

| 8. | Are all rooms where liquor will be sold for consumption on the premises continuously lighted during business hours by natural | | | |
|------------------------------------|---|--|--|--|
| | light or artificial white light so that all parts of the interior shall be clearly visible? 🛛 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: Yes No | | | |
| 12. | From your observation and investigation, has applicant-to the best of your knowledge-truthfully answered all questions? | | | |
| | □ Yes □ No | | | |
| | If no, state exceptions: | | | |
| | | | | |
| | Have all persons named in this application been fingerprinted? 🗌 Yes 🗌 No | | | |
| 13. | Fingerprinted by: Date: | | | |
| 14. | Other necessary data: | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| SIG | NATURES | | | |
| ENDORSEMENTS AND APPROVALS | | | | |
| INV | ESTIGATING OFFICER | | | |
| | | | | |
| | Investigating Officer Signature Badge Number & Rank | | | |
| ENDORSEMENT OF THE CHIEF OF POLICE | | | | |
| Reco | Recommend Issuing Liquor License: 🗌 Yes 🗌 No | | | |
| | Signature Of Chief of Police Date | | | |

Page **11** of **12**

| 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: Yes No | | |
| | | | |
| 12. | From your observation and investigation, has applicant-to the best of your knowledge-truthfully answered all questions? | | |
| | Yes INO | | |
| | If no, state exceptions: | | |
| | | | |
| | | | |
| | Have all persons named in this application been fingerprinted? Yes No | | |
| 13. | Fingerprinted by: SCPD Date: Aug 2019 | | |
| | | | |
| 14. | Other necessary data: | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| SIGN | NATURES | | |
| and the second second | ORSEMENTS AND AFPROVALS | | |
| INVE | ESTIGATING OFFICER | | |
| | 323 JERT CHIEF | | |
| | Investigating Officer Signature Badge Number & Rank | | |
| END | ENDORSEMENT OF THE CHIEF OF POLICE | | |
| Recor | Recommend Issuing Liquor License: Ves No 9-11-18 | | |
| | Signature Of Chief of Police Date | | |
| | Date | | |

Page 11 of 12

FW: Liquor Liability Quote

From: Pinot's Palette - St. Charles (stcharles@pinotspalette.com)

To: jdkumler@yahoo.com

Date: Monday, August 19, 2019, 10:08 AM CDT

Love to Paint, Drink and Have Fun? JOIN THE CLUB!

Cheers,

Amy Kumler

Franchise Owner



3823 E. Main Street St. Charles, IL 60174 P: 773.612.5576

StCharles@PinotsPalette.com

From: Abby Greeno <Abby_Greeno@ajg.com> Sent: Friday, August 16, 2019 10:59 AM To: Pinot's Palette - St. Charles <stcharles@pinotspalette.com> Subject: Liquor Liability Quote

Amy,

I have attached the Liquor Liability quote that has been worked up based on a 1 year term. Page 2 has all the coverage combinations, but Pinots Pallet will require you to carry the \$1mil/\$2mil option for \$1660 (total is \$2,019 will all taxes and fees). Per our discussion this morning, the carrier is not able to write a short-term policy the first year to renew 5/1/2020. However, they would be willing to write a longer term policy to renew 5/1/2021 instead. Please check with the city of St. Charles and advise if this would be acceptable. If not, I can see if there is another carrier that would be willing to write the short-term first year policy.

Please let me know if you have any questions!

Sincerely,

Abby Greeno | Inside Sales Executive

Small Business



Direct: 515.309.6210 | Fax: 515.457.8964

Abby_Greeno@ajg.com | www.ajg.com

Communications concerning this matter, including this email and any attachments, may have been provided for purposes of insurance/risk management consulting. Opinions and advice provided by Gallagher are not intended to be, and should not be construed as, legal advice.

A licensed Gallagher representative must provide the appropriate insurance carrier with written instructions in order to bind insurance coverage. Therefore, client instructions via email are not sufficient to bind coverage unless and until you have received explicit written confirmation from an authorized Gallagher representative.

58255358_Fox Studio Westchester Quote.pdf 7.4MB



A Chubb Company

AMWINS ACCESS INSURANCE SERVICES LLC

Dear Cedric Brinson:

Please advise your client that Westchester Specialty Insurance Services, Inc. is offering this non-admitted quote as a representative of its affiliated surplus lines insurance company, Illinois Union Insurance Company.

Westchester Specialty Insurance Services, Inc. is not acting on behalf of your client and does not seek placements in other surplus lines markets.

Any applicable state taxes, fees and surcharges for surplus lines policies, as well as the performing of due diligence, filing of affidavits and other state broker reporting, are your responsibility as the surplus lines broker.

Sincerely,

David F. Roberts Westchester Specialty Insurance Services, Inc. 3 Country View Road Malvern, PA 19355 Surplus Lines License #24194



Westchester's Claims Service proves exceptional. Advisen Industry Claims Satisfaction Survey ranks Chubb as most preferred insurer for Property, Management, and Professional Liability Claims Handling, Only carrier to be ranked number one in more than one category.



| Quote Number: | LL172446Q2019 | Date: | 08-15-2019 |
|---------------|---|-------|------------|
| Account: | Fox River Studio Pinot's Palette | | |
| To: | AMWINS ACCESS INSURANCE SERVICES LLC (Z03327) | | |
| Attn: | Cedric Brinson | | |
| From: | , | | |

Liquor Liability

| | LIMIT of LIABILITY OPTIONS | PREMIUM |
|-------------------------|----------------------------|---------------------|
| \$1,000,000/ | /\$2,000,000 | \$1,660 |
| \$1,000,000/\$1,000,000 | | \$1,611 |
| \$500,000/\$1,000,000 | | \$1,439 |
| \$500,000/\$500,000 | | \$1,397 |
| \$300,000/\$600,000 | | \$1,208 |
| \$300,000/\$300,000 | | \$1,173 |
| \$100,000/\$ | | \$806 |
| | | I |
| Term | 12 months | Additional Fees: \$ |

Please advise your client that Westchester Insurance Services Inc. is offering this quote as a representative of its affiliated surplus lines insurance company, Illinois Union Insurance Company. Westchester Insurance Services Inc. is not acting on behalf of your client and does not seek placements in other surplus lines markets. Any applicable states surcharges for surplus lines policies are the responsibility of the surplus lines broker.

FOR POLICIES EFFECTIVE JULY 21, 2011 AND SUBSEQUENT, WE REQUIRE THE PRODUCER TO PROVIDE THE "HOME STATE" AS DEFINED IN THE NONADMITTED AND REINSURANCE REFORM ACT OF 2010 (NRRA) IF IT IS DIFFERENT THAN THE STATE IN THE INSUREDS PRINCIPAL ADDRESS LISTED ON THIS QUOTE UPON THE **BINDING OF THIS PLACEMENT.**

Coverage Forms

| Form Number | Edition | Title |
|-------------|---------|---|
| ILP001 | 0104 | OFAC |
| ALL42490b | 0716 | U.S. FOREIGN ACCOUNT TAX COMPLIANCE ACT ("FATCA") |
| CG0033 | 1207 | LIQUOR LIABILITY COVERAGE FORM |
| IL0017 | 1198 | COMMON POLICY CONDITIONS |
| LD5S23j | 0314 | SIGNATURES |
| ALL20887 | 1006 | CHUBB PRODUCER COMPENSATION PRACTICES & POLICIES |
| ALL21101 | 1106 | TRADE OR ECONOMIC SANCTIONS ENDORSEMENT |
| WSG084 | 0511 | ILLINOIS UNION INSURANCE COMPANY NOTICE |
| ALL39844 | 0213 | ACE GROUP COMPANIES US PRIVACY NOTICE |
| CG2170 | 0115 | CAP ON LOSSES FROM CERTIFIED ACTS OF TERRORISM |
| IL0021 | 0908 | NUCLEAR ENERGY LIABILITY EXCLUSION ENDORSEMENT |
| LD43271 | 0614 | EXPANDED DEFINITION OF BODILY INJURY |
| LD43397 | 0614 | EXPANDED DEFINITION OF EMPLOYEE ENDORSEMENT |
| LD43399 | 0614 | SEPARATION OF INSUREDS AMENDATORY ENDORSEMENT |
| LD43402 | 0614 | LIMITATION OF COVERAGE TO INSURED PREMISES ENDORSEMENT |
| LD43403 | 0215 | PUNITIVE DAMAGES EXCLUSION |
| LD43421 | 0614 | AMENDMENT OF PREMIUM AUDIT CONDITIONS ENDORSEMENT |
| LD43425 | 0614 | DEFINTION OF "RECEIPTS" |
| LD43426 | 0614 | AMENDMENT OF WHO IS AN INSURED ENDORSEMENT - NEWLY ACQUIRED |
| | | OR NEWLY FORMED ORGANIZATIONS EXCLUDED |
| LD43428 | 0614 | FIREARMS EXCLUSION |
| LD43430 | 0614 | ADDITIONAL INSURED ENDORSEMENT - LIQUOR LICENSE HOLDER |
| LD43432 | 0614 | MINIMUM EARNED PREMIUM ENDORSEMENT |
| LD43786 | 0814 | WARRANTY ENDORSEMENT – EXCLUSION OF COVERAGE FOR BREACH OF |
| | | |

| | | INCIDENTS |
|---------|------|---|
| TRIA11C | 0115 | DISCLOSURE PURSUANT TO TERRORISM RISK INSURANCE ACT |
| XS2X35d | 0116 | SERVICE OF SUIT ENDORSEMENT – ILLINOIS |
| SL24684 | 0812 | ILLINOIS SURPLUS LINES NOTIFICATION |
| SL37994 | 0812 | ILLINOIS DOMESTIC SURPLUS LINES INSURER NOTICE |

Location of all Premise(s)

1. 3823 E Main St, St Charles, IL 60174-2424

| | Classification | Class Code | Exposure | Rate | Premium |
|---|---|------------|------------------------|--------|---------|
| 1 | Bars or Restaurants with Alcohol Sales | LIQ01 | \$68,000 (Receipts) | 2.4405 | \$1,660 |
| 1 | Additional Insured - Liquor License Holder (LD-43430) | LIQ34 | 1 | 0 | \$0 |

ENLINEDATED MADDANITIES ONE OD FEMED PRIOD CLAIMS OR

Prior to Bind Requirements

Terms are subject to receipt and favorable review of the following information. Please note that we will not be able to issue coverage until we satisfy all of the below prior to binding:

You have selected 'Unknown' in response to some underwriting questions. These questions must be completed prior to issuance.

| Are patrons under the legal drinking age permitted on the premises after 11 PM (except banguets)? | Yes | No |
|--|-----|----|
| Does the applicant offer beer pong, drinking games, "all you can drink" specials or offers of unlimited alcoholic beverages? | Yes | No |
| Is beer sold for less than \$2.00 and/or wine or liquor for less than \$3.00? | Yes | No |
| Are drink specials featured after 10 PM? | Yes | No |
| Is any BYOB (other than banquets), bottle service or setups featured? | Yes | No |
| Does applicant have a valid liquor license? | Yes | No |
| Does risk feature adult entertainment, such as exotic dancing? | Yes | No |

Warranted Policy Conditions

Terms are subject to the following warranted conditions based on the risk specific information provided on the application.

Please note that coverage terms may be altered if any of the following conditions are not satisfied.

- The insured has had no more than one liquor liability claim or incident likely to give rise to a liquor liability claim within five years
 prior to the date the application for this insurance is signed (excluding a liquor liability claim closed without payment because
 insured found not legally liable).
- The insured has had no more than two fines or citations for violation of law or ordinance related to the sale or service of alcohol at a scheduled location within five years prior to the date the application for this insurance is signed.
- Neither the insured nor any principal with a controlling interest in the insured has filed for bankruptcy (either liquidation or reorganization) within 12 months prior to the date the application for this insurance is signed.
- A Commercial General Liability Insurance Policy is maintained with limits of insurance equal to or greater than the Liquor Liability limits of this policy.
- A valid, active liquor license, if required by ordinance or law, is maintained prior to the insured selling, serving or distributing alcohol.
- Enforced written policies and procedures are maintained that prohibit the consumption of alcohol by any person during
 employment or service at the scheduled location. This includes "employees", "temporary workers", "leased workers", entertainers
 or performers of any kind, club members (if providing a service), or any other person providing any service at the scheduled
 location.
- Enforced written policies and procedures are maintained providing that only the insured and its authorized employees or members
 are permitted to serve alcohol. In the alternative, the insured warrants that persons serving alcohol who are not the insured's
 authorized employees or members are insured under separate policy of liquor liability insurance with limits equal to or greater than
 the limits of this policy.

| Producer Bill | Thirty days from inception the net payment will be due to the Insurer from the Agency |
|---------------|---|
| Producer Dill | |

We are pleased to offer the attached indication; which will remain valid for 60 days. Please note this quote represents annual premiums.

If between the date of this Indication and the Effective Date of the policy there is a significant adverse change in the condition of this Applicant, or an occurrence of an event, or other circumstances which could substantially change the underwriting evaluation of the Applicant, then, at the Insurer's option, this quotation may be withdrawn by written notice thereof to Applicant. The Insurer also reserves the right to modify the final terms and conditions upon review of the completed application and any other information requested by the underwriter herein. If such material change in the risk is discovered after binding, the insurance coverage will be void ab initio ("from the beginning").

Thank you for considering Westchester Binding - Micro as your market of choice. We look forward to working with you.

Sincerely,

EXHIBIT "A"

LEGAL DESCRIPTION OF SHOPPING GENTER

Parcel 1: Lot 1 in Plat of Resubdivision, East Gate Commons First Resubdivision, Recorded in the offices of the Recorder of Deeds, Kane County on December 31, 2003 as Document No. 2003K222677, in Kane County, Illinois.

Parcel 2: Non-Exclusive Easement for ingress, egress and parking and utilities for the benefit of Parcel 1 as described and created by Operation and Easement Agreement Recorded November 6, 2001 as Document K2001K116517 as Amended.

Permanent Index Number: 09-25-426-026

Commonly known as: 3821-3843 East Main Street, St. Charles, Illinois 60174

TH AK

EXHIBIT "B"

SITE PLAN

Fox River Studio, Inc - #3823

•

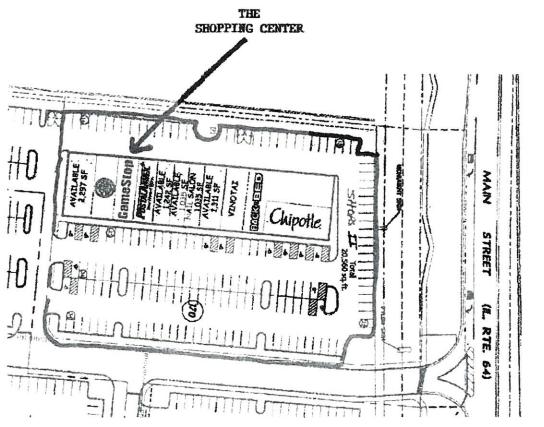
EASTGATE COMMONS - ST CHARLES

DELINEATE

TARGET SHOPS

OUTLOTS

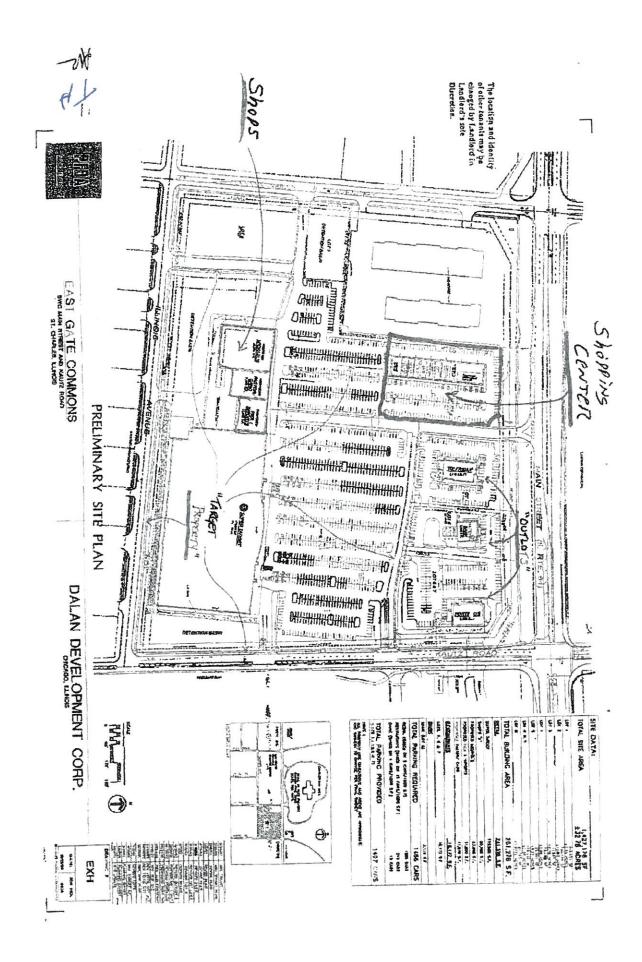
TA Ale



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/A AK







Illinois BASSET Training

This card certifies that:

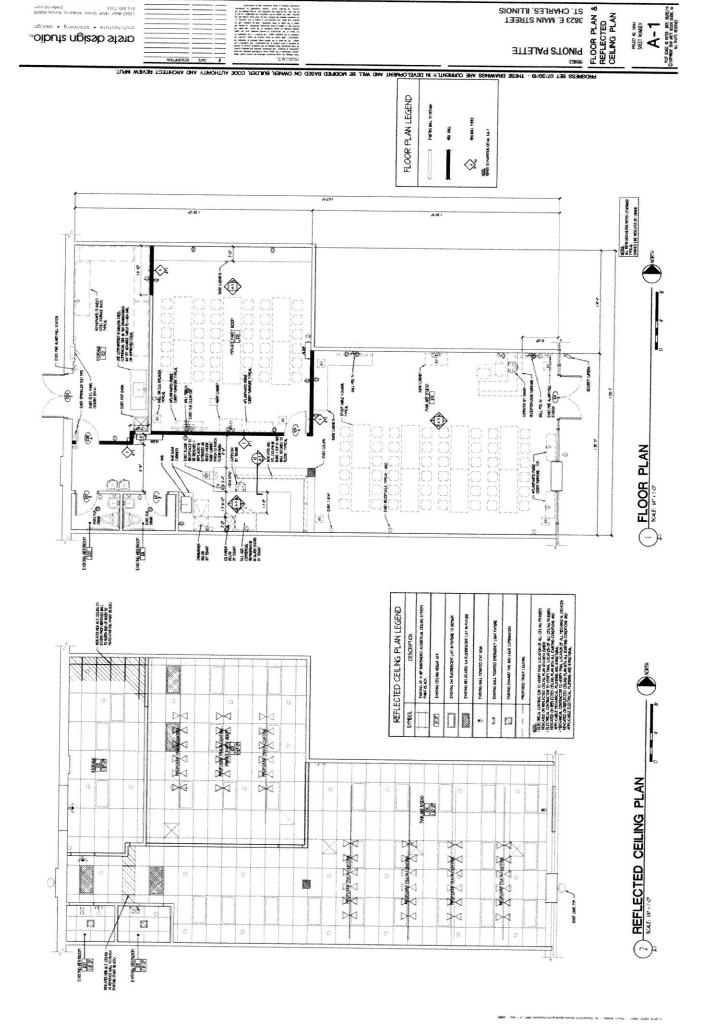
AMY KUMLER

has completed the On-Premise BASSET Alcohol Certification

Clattener

Exp. Date.

8/21/2019



BUSINESS PLAN

٠.

A.

Fox River Studio, Inc. d/b/a Pinot's Palette St. Charles

Amy Kumler, Owner

Created on August 1, 2019

1. EXECUTIVE SUMMARY

1.1 Product

A painting studio specializing in the instruction of painting, commonly referred to as a "paint & sip" studio. Beverages will be available for sale, including wine and beer. Food may be brought in for onsite consumption; no food will be sold.

The normal studio hours of operations will be 10:00 AM until 10:00 PM Wednesday through Sunday, closed Mondays and Tuesdays. Classes will be offered Wednesday, Thursday and Friday in the evening hours and Saturday and Sunday throughout the day and evening hours. The studio will be open for private parties and events during normal studio hours. Open studio time will be made available on Wednesday, Thursday and Friday as needed.

1.2 Customers

The primary target is women, ages 25-45, with a household income greater than \$100,000. Secondary targets are younger dating couples, ages 21-35, who are looking for a different type of date-night experience and children, ages 6-15, for family painting events and/or private birthday parties. Tirciary targets are corporations for team building events.

1.3 What Drives Us

My main goal is to build a successful paint & sip studio. Success is defined by the following:

- Revenue sales that generate a healthy profit margin.
- Each guest should feel like they had a positive experience, every time.
- Environment should be fun and energetic, supportive and collaborative.
- Support and give back to the community through fund raising and donations.

2. COMPANY DESCRIPTION

2.1 Mission Statement

My mission statement is to provide a top notch experience for each and every guest, regardless of their skill level, so that they want to return and share the experience with their family and friends.

2.2 Principal Members

Amy Kumler serves as the President of Fox River Studio, Inc. and Franchise Owner/Operator for the DBA Pinot's Palette St. Charles. Jeff Kumler is a trustee on the board of directors for Fox River Studio, Inc. No other staff have been hired to date.

2.3 Legal Structure

Fox River Studio, Inc. is the corporation that is Doing Business As Pinot's Palette in St. Charles, IL.

3. MARKET RESEARCH

3.1 Industry

The paint and wine franchise industry is a niche of the entertainment franchise category. It offers consumers a fun night out that combines drinking with guided painting – or in some cases, other arts and crafts.

3.2 Customers

The Pinot's Palette customer is primarily women, ages 25-55, who have some disposable income to spend on entertainment.

3.3 Competitors

The paint and sip business model competes with other "girls' night out" establishments, including wine bars and live entertainment venues, as well as date night options such as dinner and a movie. Other competitors include pottery studios and companies that offer instructional, create-your-own-product concepts, like gourmet meal preparation.

3.4 Competitive Advantage

Often the price point for a "night out" is higher than the price of a painting class. The brick & mortar studio (versus mobile studios) provides a consistent experience each and every time. This is true for the guests who frequent the same studio or those that like to try different Pinot's Palette studios. The fun atmosphere, the tables & z-stools, and the lighting will create a premium experience each and every time.

3.5 Regulations

The most important regulations are those surrounding the sale of alcoholic beverages for onpremise consumption. A local and state liquor license is required, which requires BASSET training and certification for all employees who sell and serve alcohol and Dram Shop insurance.

4. PRODUCT/SERVICE LINE

4.1 Product or Service

The primary service is guided painting with acrylic paints on canvas. Alternative options for canvas are wood pallets, wine glasses, wine bottles, tea trays, and glass jars. Chunky throw blanket classes are also available. All of these products are available as 2 or 3 hour class sessions with a guided instructor. The option also exists to paint "open studio" style, which means there is no instructor, but the guest is provided step-by-step instructions to complete a variety of painting options.

A bar serving soft drinks, beer and wine will be available for an additional charge. The bar does not have a seating area, neither inside nor outside of the studio. All alcoholic beverages must be consumed on-premise, during normal business hours, while the class or event is in progress. No food will be sold, however, guests may bring food in with them. The studio will not be responsible for catering or ordering food for guests.

The artist instructors will manage a sound system with streaming music as background noise while classes or events are in session. No live music will be played.

4.2 Pricing Structure

The price for a standard 2 hour class on 10X20 canvas is \$35, includes all necessary supplies. A more complicated painting that requires a 3 hour class on 10X20 canvas is \$45. Upgrades to a wood pallet are available for an additional \$15. A 2 hour class on 8X8 or 10X10 canvas is \$25. A two hour class for a wine glass or a wine bottle are \$15 (each). And a 3 hour chunky blanket class is \$70. Painting It Forward funding raising events are \$65, with a portion of the charge going to the charity.

4.3 Product/Service Life Cycle

All listed products have completed development and are available for sale now. The franchise headquarters continuously works on new product innovation to roll out to the franchises. Franchise owner/operators may also submit ideas for headquarter's consideration.

The franchise headquarters manages a library of over 9,000 original paintings that are used by all franchise locations. The librarian is responsible for keeping a master of all paintings, reviewing and refreshing the paintings that are available, and maintaining all intellectual property of each painting. Artists may submit an original work to be added to the library. If a new painting is accepted and made available, all franchise locations must pay a commission fee to the originating artist.

4.4 Intellectual Property Rights

The franchise headquarters owns the intellectual property rights.

4.5 Research & Development

The franchise headquarters owns the research and development process.

5. MARKETING & SALES

5.1 Growth Strategy

The key to growth for a Pinot's Palette franchise is community involvement and networking. Word of mouth is the best form of marketing. I will use a variety of marketing tools, especially for the grand opening. Social media is extremely effective with my target customer and will be a large part of my ongoing marketing efforts. The key to growth is repeat business and corporate team building events to drive awareness.

5.2 Communication

Social media will be a large portion of the communication plan. Newsletters via email will drive repeat sales.

5.3 Prospects

The primary sales function will be driven via Pinot's Palette online reservations and payment system using credit cards. Parties and events will require a more hands-on approach, but will still be driven through credit cards. Onpremise sales of wood pallet upgrades, Pinot's Palette merchandise and all bar sales will be handled by the studio manager as cash or credit card transactions.