	AGENDA ITEM EXECUTIVE SUMMARY		Agenda Item Number: 5b
	Title:	Recommendation to approve a Proposal for a B1 Liquor License Application for Chilis, Located at 3795 E. Main St., St. Charles.	
	Presenter:	Police Chief James Keegan	
Meeting: Government Operations Committee		Date: July 20, 2020	
Proposed Cost: \$		Budgeted Amount: \$	Not Budgeted: <input type="checkbox"/>
Executive Summary <i>(if not budgeted please explain):</i> <p>Chili's Bar & Grill, located at 3795 E. Main St., has new ownership that is requesting approval for a B1 liquor license. Please see the attached documents supporting this request. No alterations are planned to the establishment.</p> <p><i>Pursuant to this item being presented at the Government Operations Committee Meeting on July 20, 2020 to seek approval; it will be brought before the Liquor Control Commission at a meeting scheduled for 4:30 pm, the same day, to process and move it forward to this Committee. This item will then continue on to the City Council Meeting scheduled on August 3, 2020 for final approval.</i></p>			
Attachments <i>(please list):</i> Summary, Liquor License Application, Certificate of Insurance, BASSET Certification, Floor Plan, Menu			
Recommendation/Suggested Action <i>(briefly explain):</i> Recommendation to approve a proposal for a B1 Liquor License application for Chili's Bar & Grill, located at 3795 E. Main St., St. Charles.			

Police Department



Memo

Date: 7/9/2020

To: The Honorable Ray Rogina, Mayor-Liquor Commissioner

From: James Keegan, Chief of Police

Re: Background Investigation-Liquor Establishment

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 below mentioned establishment.

As is customary procedure, 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, subject to City Council approval. This B1 license is further strengthened by both Basset training and liquor liability insurance.

Thank you in advance for your consideration in this matter.

Chili's-Class B-1:

3795 E. Main Street

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



Incomplete applications will not be accepted.

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

APPLICATION CHECKLIST

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

no alterations planned

Laura Spang, manager, already printed & on file with ERJ Dining's license

OFFICIAL USE ONLY

<u>B. M. H. 341</u> Signature of Investigating Officer	<u>#341</u> Badge Number & Rank
<input checked="" type="checkbox"/> Approval Recommended* <u>[Signature]</u> (acting chief) Signature of Chief of Police	<input type="checkbox"/> Approval NOT Recommended <u>07/07/20</u> Date

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

Date Application Received: _____

LICENSE INFORMATION:

☐ A Package \$3200-3600

☒ B Restaurant \$2400-3600

☐ Late Night Permit 1:00am \$800 (B/C only)

☐ C Tavern \$2400-3600

☐ Late Night Permit 2:00am \$2300 (B/C only)

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

☐ G Brewery/Restaurant or Site License - \$varies

**Initial Liquor License fees for A, B, C, D, G are reduced by 50% for annual renewals and licenses issued after Nov 1.*

**Licenses are valid until April 30 following issuance and a renewal application is required for the next year (May 1-April 30) (5.08.040)*

APPLICANT INFORMATION

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

2. Business Name:

Chili's Grill & Bar

3. Business Address:

3795 E. Main St., St. Charles, IL 60174

4. Type of Business
(5.08.070-3):

restaurant

5. Length of Time in this
Business (5.08.070-4):

12+ years (existing restaurant)

6. Value of merchandise that normally will be in inventory when in
operation (5.08.070-5): \$

at least \$20,000

7. Business Phone:

630-584-8013

8. Business E-mail:

c01753@chilis.com

9. Business Website:

www.chilis.com

10. Illinois Tax ID Number:

4326-7971

11. Applicant/Contact Person Name:

Brinker Restaurant Corporation c/o Grace Yang

12. Title:

attorney/authorized agent

13. Email:

grace.yang@gray-robinson.com

14. Applicant Home Address, and all addresses for the last 10 years:

N/A

15. Ph #:

972-980-9917

DL#:

n/a

16. Date of Birth:

n/a

17. Birthplace:

n/a

18. If Corporation, Corporation Name:

Brinker Restaurant Corporation

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

3000 Olympus Blvd., Attn: Licensing, Dallas, TX 75019

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

Full Name, include middle initial: Brinker International, Inc.

Title: 100% owner

Birthdate:

n/a

Birthplace:

n/a

Driver's License#:

n/a

Home Phone:

n/a

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

Email Address:

n/a; corporate address is 3000 Olympus Blvd., Attn: Licensing, Dallas, TX 75019

Full Name, include middle initial: Laura Spang

Title: general manager

Birthdate:

Birthplace:

Driver's License#:

Home Phone:

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

Email Address:

763 E. Wilson St., Batavia, IL 60510

c01753@chilis.com

Full Name, include middle initial:

Title:

Birthdate:

Birthplace:

Driver's License#:

Home Phone:

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

Email Address:

BUSINESS ESTABLISHMENT LOCATION INFORMATION

1. Exact Street Address for liquor license:

3795 E. Main St., St. Charles, IL 60174

2. # Parking Spaces:

120

3. Outside Dining s.f.

[17.20.020-R]:

0

4. Total Building s.f.:

5693

5. Total # Seats:

217

6. Live Entertainment Area s.f. [5.08.010-H]:

0

7. Brief Business Plan description based on type of establishment listed above (5.08.070-6):

Full service restaurant and bar. No live music or outdoor seating. No designated smoking area outside. Hours of operation are: Mon-Thur: 11 am to 10 pm; Fri-Sat 11 am to 11 pm; Sun 11 am to 10 pm

PROPOSED FLOOR PLAN/LAYOUT OF PROPERTY

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

1. Every application for Liquor license shall have attached thereto a site drawing of the proposed licensed premises, drawn to scale showing the following:
 - a. The location of all rooms, segregated areas, including outdoor seating areas and the square footage thereof;
 - b. The designated use of each room or segregated area (i.e. dining room, holding bar, service bar, kitchen, restrooms, outdoor seating areas, all rooms and segregated areas, including outdoor areas where alcoholic liquor may be served or consumed and all locations where live entertainment may be provided);
 - c. The proposed seating capacity of rooms or segregated areas where the public is permitted to consume food and/or alcoholic beverages and/or live entertainment may be provided.
2. The site drawing is subject to the approval of the Local Liquor Control Commissioner. The Local Liquor Commissioner may impose such restrictions as he deems appropriate on any license by noting the same on the approved site drawing or as provided on the face of the license.
3. A copy of the approved site drawing shall be attached to the approved license and is made a part of said license.
4. It shall be unlawful for any licensee to operate and/or maintain the licensed premises in any manner inconsistent with the approved site drawing.

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

CORPORATION / PREMISES QUESTIONS

1.	If applicant is an individual or partnership, is each and every person a United States citizen (5.08.070-2)? <input type="radio"/> Yes <input type="radio"/> No	
	Is any individual a naturalized citizen? <input type="radio"/> Yes <input type="radio"/> No If yes, print name(s), date(s), and place(s) of naturalization:	
2.	Is the premises owned or leased (5.08.070-6A)? <input type="radio"/> Owned <input checked="" type="radio"/> 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 (5.08.070-6B): Name of Building Owner: DB Triple Dipper Restaurant LLC Phone Number: 972-980-9917 Address of Building Owner: E-mail Address: c/o Brinker Tax Dept Mailing Address of Building Owner (if different): 3000 Olympus Blvd., Dallas, TX 75019 Name of Building Owner: Phone Number: Address of Building Owner: E-mail Address: Mailing Address of Building Owner (if different): Name of Building Owner: Phone Number: Address of Building Owner: E-mail Address: Mailing Address of Building Owner (if different):	
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? <input type="radio"/> Yes <input checked="" type="radio"/> No If yes, please list the business name(s) and address(es):	
5.	Does applicant have any outstanding debt with the City of St. Charles, including, but not limited to, utility bills, alcohol tax, and permit fees, for any current or previous establishment owned, operated or managed by the applicant? <input type="radio"/> Yes <input checked="" type="radio"/> No <i>If yes, please note the City of St. Charles requires all debt to be paid in full before consideration of a new or renewed liquor license is issued. (5.08.050)</i>	
6.	Are any improvements planned for the building and/or site that will require a building permit? <input type="radio"/> Yes <input checked="" type="radio"/> No If yes, has a building permit been applied for? <input type="radio"/> Yes <input type="radio"/> No Date of permit application _____	
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)? <input checked="" type="radio"/> Yes <input type="radio"/> No If yes, what was the disposition of the application? Explain as necessary: Kane County food handling permit rec'd	

8.	<p>Has applicant (and all persons listed on page 2 of this application) ever been convicted of a felony under any Federal or State law, or convicted of a misdemeanor opposed to decency or morality (5.08.070-8)? <input type="radio"/> Yes <input checked="" type="radio"/> No</p> <p>Is applicant (and all persons listed on page 2 of this application) disqualified from receiving a liquor license by reason of any matter contained in Illinois State law and/or City of St. Charles Municipal Ordinances? <input type="radio"/> Yes <input checked="" type="radio"/> No</p>
9.	<p>List previous liquor licenses issued by any State Government or any subdivision thereof (5.08.070-9). Use additional paper if necessary.</p> <p>Government Unit: See attached list Location, City/State:</p> <p>Date: Special Explanations:</p> <p>Government Unit: Location, City/State:</p> <p>Date: Special Explanations:</p>
10.	<p>Have any liquor licenses possessed ever been revoked (5.08.070-9)? <input type="radio"/> Yes <input checked="" type="radio"/> No</p> <p>If yes, list all reasons on a separate, signed letter accompanying this application.</p> <p>Has any director, officer, shareholder, or any of your managers, ever been denied liquor license from any jurisdiction? <input type="radio"/> Yes <input checked="" type="radio"/> No</p> <p>If yes, proceed to Question 15. If more space is needed, please attach a separate sheet of paper with the information.</p>
11.	<p>Complete ONLY if yes was answered to the question above (10):</p> <p>Name: Name of Business:</p> <p>Position with the Business: Date(s) of Denial:</p> <p>Reason(s) for Denial of License:</p>
12.	<p>Date of Incorporation (Illinois Corporations) (5.08.070-10):</p> <p>Date qualified under Illinois Business Corporation Act to transact business in Illinois (Foreign Corporation): 7/24/18</p>
13.	<p>Has the applicant and all designated managers read and do they all understand and agree not to violate any laws of the United States, the State of Illinois, and any of the ordinances of the City of St. Charles in conducting business (5.08.070-11)? <input checked="" type="radio"/> Yes <input type="radio"/> No</p> <p>Have you, or in the case of a corporation, the local manager, or in the case of a partnership any of the partners, ever been convicted of any violation of any law pertaining to alcoholic liquor? <input type="radio"/> Yes <input checked="" type="radio"/> No</p> <p>Have you, or in the case of a corporation the local manager, or in the case of a partnership any of the partners, ever been convicted of a felony? <input type="radio"/> Yes <input checked="" type="radio"/> No</p> <p>Have you ever been convicted of a gambling offense? <input type="radio"/> Yes <input checked="" type="radio"/> No (If a partnership or corporation, include all partners and the local manager(s).)</p>

Will you and all your employees refuse to serve or sell alcoholic liquor to an intoxicated person or to a minor?
☒ Yes ☐ No

14. All individual owners, partners, officers, directors, and/or persons holding directly or beneficially more than five (5) percent in interest of the stock of owners by interest listed on page 2 of this application must be fingerprinted by the City of St. Charles Police Department (5.08.070-A12).

Has this been done? ☐ Yes ☒ No

If yes, date(s):

15. 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)? ☒ Yes ☐ No
If already furnished, date of delivery:

16. Is the premises within 100 feet of any real property of any church; school; hospital; home for the aged or indigent persons; home for veterans, their wives/husbands, or children; and/or any military or naval station (5.08.230)?
☒ Yes ☐ No

B.A.S.S.E.T. TRAINING

Please attach copies of proof of B.A.S.S.E.T. training on this page. Include all the paper, book, and video materials that are applicable. Add another page if necessary. Include copies of certificates for training only. Do not include any other materials.

Name (First, Middle, Last):

Home Street Address, Incl City

Date of Course: 8-9-17

Place Course was Taken:

NATIONAL RESTAURANT ASSOCIATION

Certificate Granted? Y/N YES

Expiration: 8-9-20

Name (First, Middle, Last):

Home Street Address, Incl City

Date of Course: 1-16-19

NATIONAL RESTAURANT ASSOCIATION

Certificate Granted? Y/N YES

Expiration: 1-16-22

Name (First, Middle, Last):

Home Street Address, Incl City

Date of Course:

5-19-20

AMERICAN SAFETY COUNCIL

Certificate Granted? Y/N YES

Expiration:

Name (First, Middle, Last):

Home Street Address, Incl City

Date of Course: 11-9-18

SELLER SCHWEL

Certificate Granted? Y/N YES

Expiration: 11-9-21

NEW MANAGEMENT REQUIREMENTS

Whenever a new manager comes on board, the City must be notified and that person must be fingerprinted.
It is the business establishment's responsibility to keep copies of all B.A.S.S.E.T. certificates on file for their employees.

Will you and all your employees refuse to serve or sell alcoholic liquor to an intoxicated person or to a minor?
☒ Yes ☐ No

14. All individual owners, partners, officers, directors, and/or persons holding directly or beneficially more than five (5) percent in interest of the stock of owners by interest listed on page 2 of this application must be fingerprinted by the City of St. Charles Police Department (5.08.070-A12).

Has this been done? ☐ Yes ☒ No

If yes, date(s):

15. 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)? ☒ Yes ☐ No
If already furnished, date of delivery:

16. Is the premises within 100 feet of any real property of any church; school; hospital; home for the aged or indigent persons; home for veterans, their wives/husbands, or children; and/or any military or naval station (5.08.230)?
☐ Yes ☒ No

B.A.S.S.E.T. TRAINING

Please list employees who are required to have B.A.S.S.E.T. training on this page. Include first and last name, position, and date of training. If the employee is a manager, assistant manager, bartender, and applicable and another person, include their name and position. If the employee is a manager, assistant manager, bartender, and applicable and another person, include their name and position.

Name (First, Middle, Last):

Home Street Address, Incl City

Date of Course: 6-28-17

Place Course was Taken: TIPS

Certificate Granted? Y/N YES

Expiration: 6-21-20

Name (First, Middle, Last):

Home Street Address, Incl City

Date of Course: 2-12-20

Place Course was Taken:

Certificate Granted? Y/N YES

Expiration: 2-12-22

Name (First, Middle, Last):

Home Street Address, Incl City

Date of Course:

10-12-17

Place Course was Taken:

AMERICAN SAFETY COUNCIL

Certificate Granted? Y/N YES

Expiration:

Name (First, Middle, Last):

Home Street Address, Incl City

Date of Course:

5-21-20

Place Course was Taken:

AMERICAN SAFETY COUNCIL

Certificate Granted? Y/N YES

Expiration:

5-21-23

NEW MANAGEMENT REQUIREMENTS

Whenever a new manager comes on board, the City must be notified and that person must be fingerprinted. It is the business establishment's responsibility to keep copies of all B.A.S.S.E.T. certificates on file for the employees.

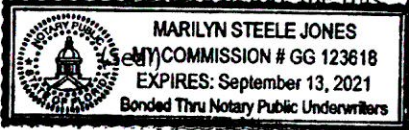
COMMENTS/ADDITIONAL INFORMATION

Business Name:

SIGNATURES

Sean Young, Authorized Agent
Applicant's Signature

Subscribed and sworn before me this 19th day of May, 2020



Marilyn Steele Jones
Notary Public

ADDENDUM TO RETAIL LIQUOR LICENSE APPLICATION

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

Date:

062620

Name of Applicant:

BRINKER RESTAURANT CORP.

Name of Business:

CHILI'S

Address of Business:

3795 E. MAIN ST.

Ward Number:

Pursuant to the provision of the City of St. Charles Municipal Code, Chapter 5.08, Alcoholic Beverages, the following guide shall be in effect for the investigation of an applicant for a Retail Dealer's Liquor License:

1. Date on which applicant will begin selling retail alcoholic liquors at this location:
A.S.A.P.
2. Is the location within 100 feet of any church; school; hospital; home for the aged or indigent persons; home for veterans, their wives/husbands or children; or any military or naval station? ☐ Yes ☒ No
3. If the answer to question 2 is yes, answer the following: Is applicant's place of business a hotel offering restaurant service, a regularly organized club, a restaurant, a food shop, or other place where the sale of alcoholic liquors is not the principal business? ☐ Yes ☒ No
 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

	<p>licensed for the sale of alcoholic liquor at retail prior to the establishment of such church? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, have the premises been continuously operated and licensed for the sale of alcoholic liquor at retail since the original alcoholic liquor license was issued therefore? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
5.	<p>Is the place for which the alcoholic liquor license is sought a dwelling house, flat, or apartment used for residential purposes?</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
6.	<p>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.)</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
7.	<p>If applicant conducts or will conduct in the same place any other class of business in addition to that of City Retailer of Alcoholic Liquor, state the kind and nature of such business: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
8.	<p>Are all rooms where liquor will be sold for consumption on the premises continuously lighted during business hours by natural light or artificial white light so that all parts of the interior shall be clearly visible? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
9.	<p>Are premises located in any building belonging to or under the control of the State of Illinois or any other political subdivision thereof, such as county, city, etc.? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
10.	<p>Are the premises for which license is herein applied for a store or place of business where the majority of customers are minors of school age or where the principal business transacted consists of school books, school supplies, food or drinks for such minors? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
11.	<p>It is required by the City of St. Charles that all employees undergo BASSET training. Provide a copy of the certificate of training completion for each manager. All certificates for managers have been submitted: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
12.	<p>From your observation and investigation, has applicant—to the best of your knowledge—truthfully answered all questions?</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If no, state exceptions:</p>
13.	<p>Have all persons named in this application been fingerprinted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Fingerprinted by: <u>B. McCowan #341</u> Date: <u>062520</u></p>
14.	<p>Other necessary data:</p>



CERTIFICATE OF LIABILITY INSURANCE

DATE(MM/DD/YYYY)
05/18/2020

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

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

PRODUCER Aon Risk Services Southwest, Inc. Dallas TX Office 5005 Lyndon B Johnson Freeway Suite 1500 Dallas TX 75244 USA		CONTACT NAME: PHONE (A/C. No. Ext): (866) 283-7122 FAX (A/C. No.): (800) 363-0105 E-MAIL ADDRESS:																									
INSURED Brinker Restaurant Corp 3000 Olympus Blvd. Dallas TX 75019 USA		INSURER(S) AFFORDING COVERAGE <table border="1"><tr><td>INSURER A:</td><td>Safety National Casualty Corp</td><td>NAIC #</td><td>15105</td></tr><tr><td>INSURER B:</td><td>The Continental Insurance Company</td><td>NAIC #</td><td>35289</td></tr><tr><td>INSURER C:</td><td></td><td></td><td></td></tr><tr><td>INSURER D:</td><td></td><td></td><td></td></tr><tr><td>INSURER E:</td><td></td><td></td><td></td></tr><tr><td>INSURER F:</td><td></td><td></td><td></td></tr></table>		INSURER A:	Safety National Casualty Corp	NAIC #	15105	INSURER B:	The Continental Insurance Company	NAIC #	35289	INSURER C:				INSURER D:				INSURER E:				INSURER F:			
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INSURER C:																											
INSURER D:																											
INSURER E:																											
INSURER F:																											

Holder Identifier :

COVERAGES**CERTIFICATE NUMBER:** 570081775783**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,

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	Limits shown as requested												
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <table border="0"><tr><td><input type="checkbox"/> CLAIMS-MADE</td><td><input checked="" type="checkbox"/> OCCUR</td></tr><tr><td colspan="2"><input checked="" type="checkbox"/> Liquor Liab Incl.</td></tr><tr><td colspan="2">GEN'L AGGREGATE LIMIT APPLIES PER:</td></tr><tr><td><input type="checkbox"/> POLICY</td><td><input type="checkbox"/> PRO-JECT</td><td><input checked="" type="checkbox"/> LOC</td></tr><tr><td colspan="2">OTHER:</td></tr></table>	<input type="checkbox"/> CLAIMS-MADE	<input checked="" type="checkbox"/> OCCUR	<input checked="" type="checkbox"/> Liquor Liab Incl.		GEN'L AGGREGATE LIMIT APPLIES PER:		<input type="checkbox"/> POLICY	<input type="checkbox"/> PRO-JECT	<input checked="" type="checkbox"/> LOC	OTHER:				GL4056984 SIR applies per policy terms & conditions	06/23/2019	06/23/2020	EACH OCCURRENCE	\$3,000,000
<input type="checkbox"/> CLAIMS-MADE	<input checked="" type="checkbox"/> OCCUR																		
<input checked="" type="checkbox"/> Liquor Liab Incl.																			
GEN'L AGGREGATE LIMIT APPLIES PER:																			
<input type="checkbox"/> POLICY	<input type="checkbox"/> PRO-JECT	<input checked="" type="checkbox"/> LOC																	
OTHER:																			
							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$300,000											
							MED EXP (Any one person)	Excluded											
							PERSONAL & ADV INJURY	\$3,000,000											
							GENERAL AGGREGATE	\$4,000,000											
							PRODUCTS - COM/OP AGG	\$4,000,000											
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <table border="0"><tr><td><input checked="" type="checkbox"/> ANY AUTO</td><td><input type="checkbox"/> SCHEDULED AUTOS</td></tr><tr><td><input type="checkbox"/> OWNED AUTOS ONLY</td><td><input type="checkbox"/> NON-OWNED AUTOS ONLY</td></tr><tr><td><input type="checkbox"/> HIRED AUTOS ONLY</td><td></td></tr></table>	<input checked="" type="checkbox"/> ANY AUTO	<input type="checkbox"/> SCHEDULED AUTOS	<input type="checkbox"/> OWNED AUTOS ONLY	<input type="checkbox"/> NON-OWNED AUTOS ONLY	<input type="checkbox"/> HIRED AUTOS ONLY				CAS4051032	06/23/2019	06/23/2020	COMBINED SINGLE LIMIT (Ea accident)	\$2,000,000					
<input checked="" type="checkbox"/> ANY AUTO	<input type="checkbox"/> SCHEDULED AUTOS																		
<input type="checkbox"/> OWNED AUTOS ONLY	<input type="checkbox"/> NON-OWNED AUTOS ONLY																		
<input type="checkbox"/> HIRED AUTOS ONLY																			
							BODILY INJURY (Per person)												
							BODILY INJURY (Per accident)												
							PROPERTY DAMAGE (Per accident)												
B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> EXCESS LIAB DED <input checked="" type="checkbox"/> RETENTION \$25,000			6012184840	06/23/2019	06/23/2020	EACH OCCURRENCE	\$1,000,000											
							AGGREGATE	\$1,000,000											
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR / PARTNER / EXECUTIVE OFFICER/MEMBER (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N	N/A	LDS4051037 Workers Comp (AOS) PS4051039 Workers Comp (WI)	06/23/2019	06/23/2020	<input checked="" type="checkbox"/> PER STATUTE	OTHER											
A					06/23/2019	06/23/2020	E.L. EACH ACCIDENT	\$1,000,000											
							E.L. DISEASE-EA EMPLOYEE	\$1,000,000											
							E.L. DISEASE-POLICY LIMIT	\$1,000,000											

Certificate No : 570081775783

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

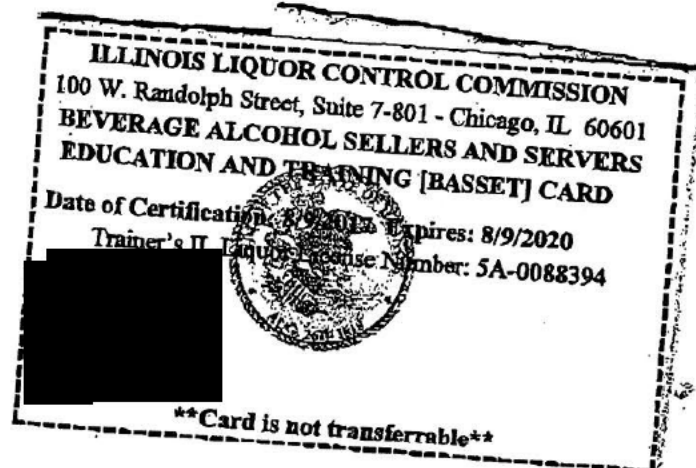
RE: Chilli's #1753, 3795 E. Main St., St. Charles, IL 60174.

CERTIFICATE HOLDER**CANCELLATION**City of St. Charles
2 E. Main St.
St. Charles IL 60174 USA

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

Aon Risk Services Southwest, Inc



Your "Student ID number" is: 536424

You have successfully completed the ServSafe® Training and Certificate Program. This is your official ServSafe Alcohol Certificate Card and provides confirmation that you have studied, and are knowledgeable about, how to serve alcohol responsibly.

[illegible]

233 South Wacker Drive
Suite 3600
Chicago, IL 60606-6383
1-800-SERVSAFE
312.715.1010 in the Chicago area
ServSafe.com

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Certificate of Completion

**American
Safety Council**

LEE LEMKE

Has diligently and with merit completed the
On-Premise BASSET Alcohol Certification on 6/19/2020
from the American Safety Council.


Jeff Palmer

Site Plan for
St. Charles Child's



Watermain

Sanitary Sewer

[illegible]

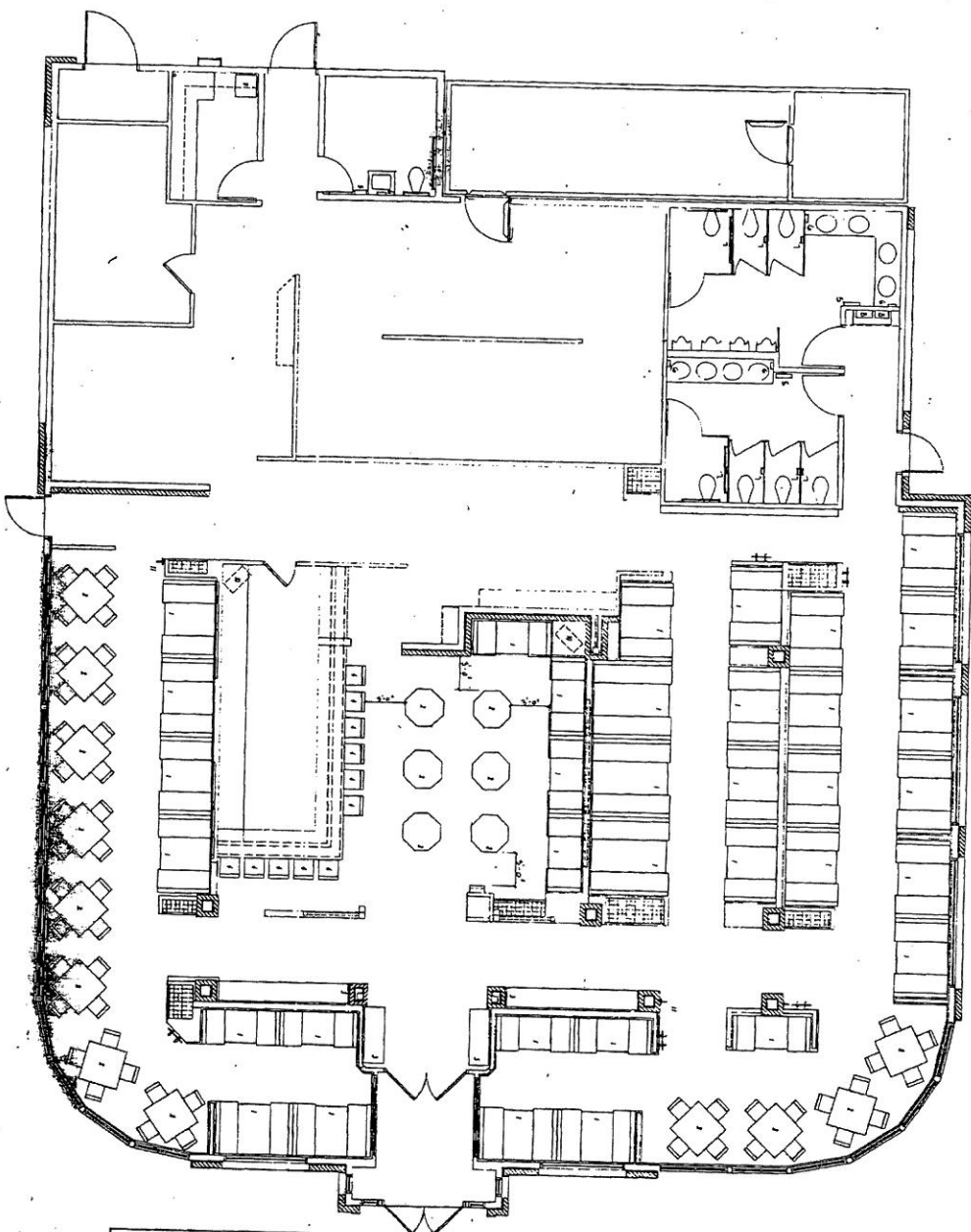
1. The first step is to identify the problem or question that needs to be answered. This involves understanding the context and the specific requirements of the task.

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NOTE: All on site utilities
own and maintain

15) 1428 ST CHARLES_201000417003

Floor plan for St. Charles, IL Child's



PLAN NORTH FOR
ROOM FROM SCORING
PLAN FOR THIS NORTH
PLAN NORTH FOR
ROOM FROM SCORING
PLAN FOR THIS NORTH

(17.01) FURNISHINGS PLAN
1/8"=1'-0"

SEATING CAPACITIES			
TYPE	PARTIES	SEAT	%
WAITING			
TWO TOPS	4	8	
FOUR TOPS	1	4	
BARS/STOOLS			
TOTAL	10	43	
ONLINE			
TWO TOPS	5	10	12%
FOUR TOPS	35	140	81%
TOTAL	40	150	0.2%
CAPACITY	50	217	

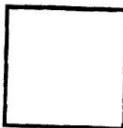
- FURNISHINGS SCHEDULE**
- 1 BOOTH
 - 2 BENCH
 - 3 BAR STOOL
 - 4 PAPER TOWEL DISPENSER
 - 5 SOAP DISPENSER
 - 6 SOAP DISPENSER
 - 7 PAY PHONE
 - 8 PAY PHONE
 - 9 TELEVISION WITH MOUNTING
 - 10 TELEVISION WITH MOUNTING
 - 11 COAT HOOK

ALL FURNISHINGS SHOWN THIS SHEET ARE NOT
IN AN ATTEMPT TO OBTAIN CONTRACTOR
FURNISHINGS ROOM OR EQUIPMENT.

A17
FOR JUD
3-9-91

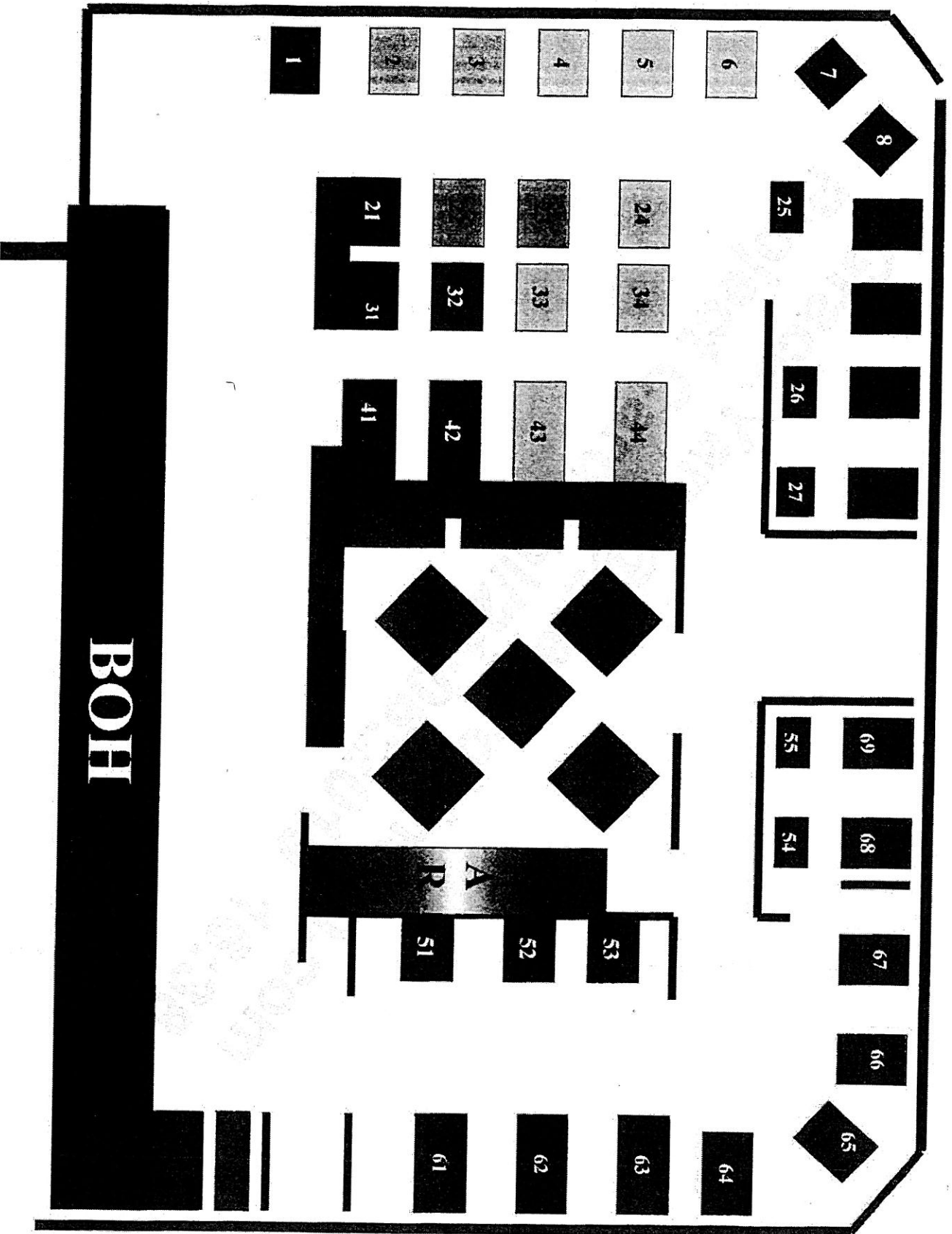


Aria Group Architects Inc.
1000 N. MICHIGAN ST. SUITE 1000
CHICAGO, IL 60610
TEL: 312.467.1000 FAX: 312.467.1001



REVISIONS
NO. DATE DESCRIPTION

NO.	DATE	DESCRIPTION
1	2/24/95	REVISION AS NOTED
2	1/15/95	LOGGED FOR REPLY



Brinker Restaurant Corporation submits its application for liquor license approval at an existing Chili's Grill & Bar, 3795 E. Main St., St. Charles, IL 60174.

The current operating hours are:

Mon – Thur: 11 am to 10 pm

Fri – Sat: 11 am to 11 pm

Sun: 11 am to 10 pm

Curbside pick-up and local deliveries would continue. A sample menu is attached.


There is no planned, regular live entertainment or outdoor seating at the Chili's. The restaurant is family-friendly; not restricted to 18 and over or 21 and over. There is no designated outdoor smoking area.

There are no building alterations planned right now at this restaurant.



'RITAS WORTH THEIR SALT

SIGNATURE

 **PRESIDENTE MARGARITA®**
ON TAP! Sauza® Conmemorativo® Tequila, Patrón Citrónge® & Presidente® Brandy. Classic, strawberry or mango. Hand-shaken 25 times on the way to your table.

PATRÓN® MARGARITA
Patrón® Silver Tequila & Patrón Citrónge®. Classic, strawberry or mango.

New **BLACK BARREL CHERRY MARGARITA**
Made with Hornitos® Black Barrel® Tequila, Monin® Black Cherry and fresh sour.




EL JIMADOR® FRESCA MARGARITA
El Jimador® Blanco Tequila, Cointreau® and fresh lime juice.

 **BLUEBERRY & PINEAPPLE MARGARITA**
Jose Cuervo Especial® Tequila, INFUSED 48 hours with blueberries & pineapple.

SPECIALTY

New **CUERVO® BLUE MARGARITA**
Jose Cuervo® Tradicional® Silver Tequila, DeKuyper® Blue Curacao and pineapple juice.

SPICY SAUZA® JALAPEÑO MARGARITA
Sauza® Signature Blue Silver Tequila, Patrón Citrónge® & fresh jalapeños.

 **EL NIÑO® MARGARITA**
Herradura® Reposado Tequila, Gran Gala® & Patrón Citrónge®. Just like a tropical storm, this ChiliHead favorite might blow you away.

TITO'S® VODKARITA
Tito's® Handmade Vodka, Cointreau® & fresh sour. Classic, strawberry or mango.

TROPICAL SUNRISE MARGARITA
Hornitos® Reposado Tequila and DeKuyper® Melon Schnapps.

ASK ABOUT OUR SELECTION OF SILVER, GOLD, REPOSADO AND AÑEJO TEQUILAS.



ADDITIONAL NUTRITION INFORMATION AVAILABLE UPON REQUEST. VISIT CHILIS.COM FOR NUTRITION & ALLERGEN INFORMATION.

HAND CRAFTED COCKTAILS



ICE-COLD BEER



ANGRY ORCHARD™
BLUE MOON®
BUD LIGHT®
BUDWEISER®
COORS LIGHT®
CORONA® EXTRA
CORONA® LIGHT



DOS EQUIS® LAGER
HEINEKEN®
MICHELOB® ULTRA
MILLER LITE®
MODELO ESPECIAL™
SAMUEL ADAMS® BOSTON LAGER
SIERRA NEVADA® IPA
SIERRA NEVADA® PALE ALE
STELLA ARTOIS®
O'DOUL'S® NON-ALCOHOLIC



New COCONUT STATE OF MIND
Blue Chair Bay® Coconut Spiced Rum, strawberry puree and pineapple juice.

DEEP EDDY TEXAS LEMONADE

Deep Eddy Lemon Vodka, Cointreau® & fresh sour.

PREMIUM LONG ISLAND ICED TEA

El Jimador® Blanco Tequila, BACARDI® Superior Rum, Bombay® Gin, SVEDKA® Vodka & Patrón Citrónge®.

TITO'S® PUNCH

Tito's® Handmade Vodka, Malibu® Coconut Rum, fresh sour & pineapple juice.

WINE

PICK YOUR POUR
6 OZ. ★ 9 OZ. BETTER VALUE!

SWEET

Beringer® | White Zinfandel
Canyon Road® | Moscato

WHITE

Francis Coppola Bianco | Pinot Grigio
Canyon Road® | Chardonnay
Toasted Head® | Chardonnay

RED

Francis Coppola | Rosso Red Blend
14 Hands | Merlot
Canyon Road® | Cabernet Sauvignon
J. Lohr Seven Oaks | Cabernet Sauvignon

REFRESH & REFILL

BLACKBERRY ICED TEA

MANGO ICED TEA

HALF TEA | HALF LEMONADE

Your choice of flavor:
Strawberry • Mango • Regular

FREE REFILLS WITH TEAS, FOUNTAIN DRINKS, LEMONADES & COFFEE.
Selections may vary by location.

New BLACK CHERRY LEMONADE

STRAWBERRY LEMONADE

CHILI'S PREMIUM BLEND COFFEE



COCA-COLA, DIET COKE, COCA-COLA ZERO, SPRITE, MINUTE MAID & DASANI ARE REGISTERED TRADEMARKS OF THE COCA-COLA COMPANY. DR PEPPER IS A REGISTERED TRADEMARK OF DR PEPPER/SEVEN UP, INC. USED UNDER LICENSE. SELECTIONS MAY VARY BY LOCATION. FREE REFILLS NOT AVAILABLE WITH DASANI OR IBC ROOT BEER.

FAVORITE

APPS TO SHARE



★ TRIPLE DIPPER™

WHY CHOOSE ONE, WHEN YOU CAN CHOOSE THREE?

CHOOSE ANY THREE. SERVED WITH DIPPING SAUCES. 11.99

CRISPY CHEDDAR BITES
FRIED PICKLES
BIG MOUTH® BITES

SOUTHWESTERN EGGROLLS
HONEY-CHIPOTLE CHICKEN CRISPERS®
ORIGINAL CHICKEN CRISPERS®

SPICED PANKO ONION RINGS
BONELESS WINGS

★ SOUTHWESTERN EGGROLLS

These aren't your ordinary eggrolls. Crispy flour tortillas, chicken, black beans, corn, jalapeño Jack cheese, red peppers, spinach. Served with avocado-ranch. 8.69

BOTTOMLESS TOSTADA CHIPS

Extra-thin corn tostada chips made fresh daily. Go ahead and ask for more now.

With fresh salsa 3.79
With fresh salsa & guacamole 5.39
Add house-made ranch +.79

★ SKILLET QUESO

Your chip's favorite dip for over 25 years. Original with beef. Served with chips & salsa. 6.39

WHITE SPINACH QUESO

With pico, guacamole, cilantro. Served with chips & salsa. 7.19

TABLESIDE GUACAMOLE

Tomatoes, red onions, lime, cilantro, roasted jalapeños. Served with chips & salsa. 8.29

CLASSIC NACHOS

3-cheese blend, black beans, jalapeños, Skillet Queso. Served with pico & sour cream. 8.59

With chicken or beef 9.99
Add guacamole +1.00

MARGHERITA FLATBREAD

Jack cheese, mozzarella, garlic aioli, cilantro, pico, cilantro-ranch pesto. 8.59

With chicken, avocado & bacon 9.99

TEXAS CHEESE FRIES

Shredded cheese, bacon, jalapeños, green onions. Served with house-made ranch.

Full order 8.49 • Half order 4.89

HONEY-CHIPOTLE CRISPERS® & WAFFLES

Topped with bacon, jalapeños, ancho-chile ranch. 6.29

CRISPY CHEDDAR BITES

White and yellow Wisconsin cheese curds topped with chile spices, cilantro. Served with ancho-chile ranch. 6.39

SPICED PANKO ONION RINGS

Onion rings, chile spices. Served with house-made ranch. 6.39

FRIED PICKLES

Served with house-made ranch. 5.39

LOADED BONELESS WINGS

Smothered in white queso, shredded cheese, bacon, green onions. Served with house-made ranch. 9.89

BONELESS OR BONE-IN WINGS

Hand-tossed in choice of sauce, celery, dipping sauce.

Boneless 9.69
Bone-in 9.89

HOT



FIERY PEPPER



HONEY-CHIPOTLE



BUFFALO



SMOKED WINGS
(Bone-in only)

MILD

NOTICE: BEFORE PLACING YOUR ORDER, PLEASE INFORM YOUR SERVER OR MANAGER IF A PERSON IN YOUR PARTY HAS A FOOD ALLERGY. BECAUSE ROUTINE FOOD PREPARATION TECHNIQUES, SUCH AS COMMON OIL FRYING, MAY ALLOW CONTACT AMONG VARIOUS FOOD ITEMS, WE CANNOT GUARANTEE ANY FOOD ITEMS TO BE COMPLETELY ALLERGEN-FREE.

SALADS

ADD AVOCADO SLICES +1.00

New SANTA FE CRISPERS® SALAD

Pico, avocado, cilantro, tortilla strips, house-made ranch & a drizzle of spicy Santa Fe sauce. 10.39

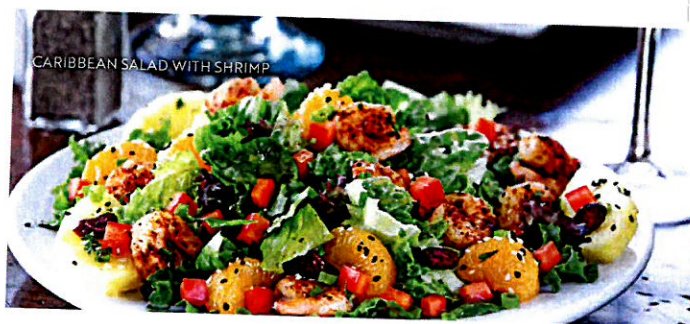
With spicy grilled chicken 10.39

BONELESS BUFFALO CHICKEN SALAD

Crispy chicken tossed in spicy Buffalo sauce, bacon, bleu cheese crumbles, pico, tortilla strips with house-made ranch. 9.99

QUESADILLA EXPLOSION SALAD

Grilled chicken, cheese, tomatoes, corn & black bean salsa, tortilla strips with citrus-balsamic. Served with cheese quesadillas. 10.89



CARIBBEAN SALAD

Pineapple, mandarin oranges, dried cranberries, red bell peppers, green onions, cilantro, sesame seeds with honey-lime dressing.

With grilled chicken 10.89 • With shrimp 11.49

FRESCO SIDE SALAD

Spring mix, queso fresco with honey-lime vinaigrette. 3.89

HOUSE SIDE SALAD

Tomatoes, red onions, cucumbers, shredded cheese, garlic croutons with your choice of dressing. 3.89

Fresco salad or house salad with any entree 3.19

SANDWICHES & Soups

ALL SANDWICHES SERVED WITH FRIES.

CALIFORNIA TURKEY CLUB

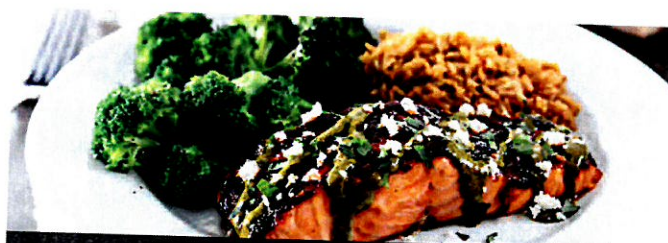
Bacon, avocado, tomato, red onion, provolone, lettuce, cilantro-pesto mayo on wheat Texas toast. 9.29

BUFFALO CHICKEN RANCH SANDWICH

Crispy chicken with spicy Buffalo sauce, tomato, lettuce, house-made ranch on a brioche bun. This cool chick can bring the heat. 9.49

BACON AVOCADO GRILLED CHICKEN SANDWICH

You definitely won't be hungry later. Grilled chicken, bacon, provolone, avocado, sauteed onions, lettuce, tomato, cilantro-pesto mayo on a toasted buttery roll. 10.19



ANCHO SALMON (590 cal)

Seared chile-rubbed Atlantic salmon, spicy citrus-chile sauce, cilantro, queso fresco. Served with Mexican rice & steamed broccoli. 14.99

MARGARITA GRILLED CHICKEN (600 cal)

Pico, tortilla strips, Mexican rice, black beans. It only tastes like a guilty pleasure. 11.69

GRILLED CHICKEN SALAD (430 cal)

Tomatoes, corn & black bean salsa, shredded cheese with honey-lime vinaigrette. 9.59

Cup 3.19

With entree 2.99

Bowl 4.49

With entree 3.59

CHICKEN ENCHILADA SOUP

Tortilla strips, shredded cheese.

LOADED BAKED POTATO SOUP

Bacon, shredded cheese, onions.

TERLINGUA CHILI

Slow-cooked with beef, poblanos, jalapeños, onions. Topped with shredded cheese.

Cup 3.69

Bowl 5.29

With entree 3.09

With entree 4.09

CHILI OR SOUP & SALAD

Bowl of chili or soup with a house salad or fresco salad.

Chili & Salad 7.69 • Soup & Salad 6.99

BOTTOMLESS CHIPS, SOUP & SALAD

House salad or fresco salad.

Lunch 7.19 • After 4 PM 9.19

Substitute with chili +.80

GUILTLESS GRILL®

ALL THE FLAVOR
FOR 600 CALORIES
OR LESS.



MANGO-CHILE CHICKEN (460 cal)

Chile spices, mango glaze & topped with chopped mango, cilantro, pico, avocado. Served with Mexican rice, steamed broccoli. 10.49

6 OZ. CLASSIC SIRLOIN* WITH GRILLED AVOCADO (420 cal)

Seasoned & topped with spicy citrus-chile sauce, grilled avocado slices, garlic roasted tomatoes, cilantro. Served with fresco salad. 12.29

*NOTICE: MAY BE COOKED TO ORDER. CONSUMING RAW OR UNDERCOOKED MEATS, POULTRY, SEAFOOD, SHELLFISH OR EGGS MAY INCREASE YOUR RISK OF FOODBORNE ILLNESS, ESPECIALLY IF YOU HAVE CERTAIN MEDICAL CONDITIONS. APPROXIMATE PRE-COOKED WEIGHTS. ACTUAL WEIGHT MAY VARY.

FAVORITE

BIGGER BIG MOUTH® BURGERS



HAND-CRAFTED FRESH TO ORDER.
SMASHED TO LOCK IN FLAVOR ON A
TOASTED BRIOCHE BUN. SERVED WITH
GARLIC DILL PICKLES & FRIES.

OLDTIMER®

The original. Pickles, lettuce, tomato, red onion, mustard. 8.29

⊗ OLDTIMER® WITH CHEESE*

You can't top perfection, unless you add cheese. 8.89

⊗ BACON BURGER*

Cheddar, bacon, pickles, lettuce, tomato, red onion, Signature sauce. 9.99

ULTIMATE BACON BURGER*

Double bacon, cheddar, pickles, lettuce, red onion, tomato, jalapeño aioli, spicy Buffalo sauce, honey-chipotle sauce. 11.39

SUNRISE BURGER*

Cage-free fried egg, provolone, bacon, lettuce, red onion, tomato, Signature sauce. 11.39

SOUTHERN SMOKEHOUSE BURGER*

Bacon, cheddar, pickles, panko onion rings, lettuce, tomato, Signature sauce. Served with a side of original BBQ sauce. 11.39

GUACAMOLE BURGER*

Guacamole, provolone, jalapeños, red & green bell peppers, sauteed onions, jalapeño aioli. 9.69

BIG MOUTH® BITES

4 mini burgers with bacon, American cheese, sauteed onions, house-made ranch. 9.79



OLDTIMER® WITH CHEESE

BEEF UP YOUR BURGER +1.00 each

CAGE-FREE FRIED EGG*

TERLINGUA CHILI

APPLEWOOD SMOKED BACON

AVOCADO SLICES

PATTY OPTIONS: 100% WHITE MEAT TURKEY OR VEGETARIAN BLACK BEAN

WE GRILL ALL OUR BURGERS MEDIUM-WELL. THAT MEANS NO PINK.
IF YOU PREFER A DIFFERENT DEGREE OF DONENESS, PLEASE ASK YOUR SERVER.

*NOTICE: MAY BE COOKED TO ORDER. CONSUMING RAW OR UNDERCOOKED MEATS, POULTRY, SEAFOOD, SHELLFISH OR EGGS MAY INCREASE YOUR RISK OF FOODBORNE ILLNESS, ESPECIALLY IF YOU HAVE CERTAIN MEDICAL CONDITIONS. APPROXIMATE PRE-COOKED WEIGHTS. ACTUAL WEIGHT MAY VARY.

⊗ FAVORITE

FULL-ON FAJITAS



WE MADE FAJITAS A HOT COMMODITY BACK IN '86,
AND NOW WE'VE ADDED MORE MEAT TO THE MIX.

SIZZLING TO THE TABLE WITH GARLIC BUTTER, CILANTRO, BELL PEPPERS & ONIONS. SERVED WITH MEXICAN RICE, BLACK BEANS, GUACAMOLE, SOUR CREAM, PICO, SALSA, SHREDDED CHEESE, FLOUR OR ALL-NATURAL CORN TORTILLAS.

CHOOSE YOUR STYLE OF FAJITAS:

GRILLED CHICKEN 14.39

GRILLED STEAK 16.39

SHRIMP 16.39

BLACK BEAN & VEGGIE 14.39
CANNOT BE COMBINED

or

COMBINE ANY TWO 16.39

 COMBINE ANY THREE 17.39

JACK UP YOUR FAJITAS WITH WHITE QUESO & PICO +1.00

FRESH MEX

CHICKEN ENCHILADAS

Three enchiladas topped with melted cheese, sour cream sauce, corn & black bean salsa, cilantro. Served with Mexican rice & black beans. 9.79

RANCHERO CHICKEN TACOS

Three tacos in flour tortillas with pico, avocado, Jack cheese, jalapeño aioli, cilantro, queso fresco. Served with Mexican rice & black beans. 9.79

CHIPOTLE CHICKEN FRESH MEX BOWL

Grilled chicken, pico, field greens, Mexican rice, corn & black bean salsa, avocado, shredded cheese, tortilla strips, cilantro, chipotle pesto, house-made ranch. 9.89


With shrimp 10.89

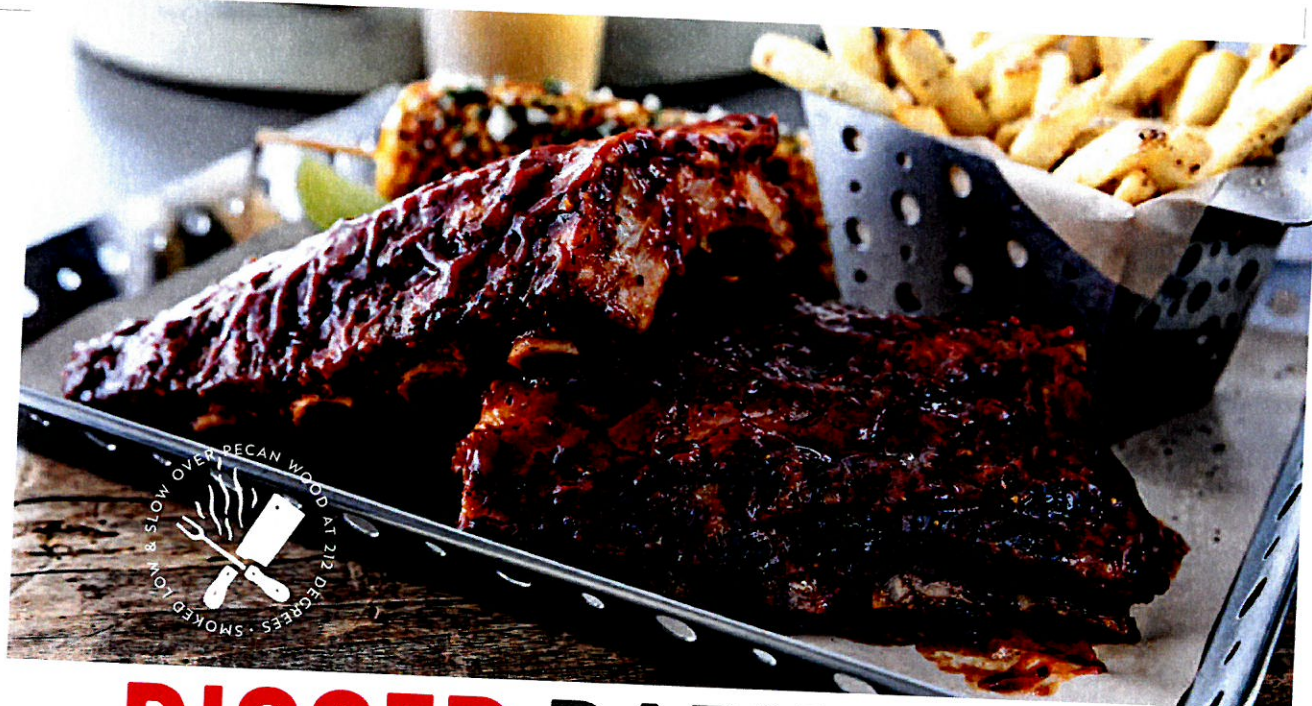


BACON RANCH QUESADILLAS

Chicken or steak, shredded cheese, chile spices, bacon, house-made ranch. Served with pico, sour cream, ancho-chile ranch. 10.29



 FAVORITE



BIGGER BABY BACK RIBS



CHOOSE YOUR RIBS:

- *New* **TEXAS-SIZE**
30% MORE MEAT!
- ORIGINAL STYLE

CHOOSE YOUR SAUCE:

- HOUSE BBQ
- ORIGINAL
- HONEY-CHIPOTLE
- DRY RUB

CHOOSE YOUR PLATE:

- **FULL ORDER OR MIX & MATCH**
With fries, roasted street corn. 18.49
- **HALF ORDER**
With fries. 11.29



SMOKEHOUSE Combos

WITH ROASTED STREET CORN,
FRIES, CHILE-GARLIC TOAST
& PICKLES.

CHOOSE ANY 2 14.99 *or* CHOOSE ANY 3 16.99

SMOKED BONE-IN
BBQ CHICKEN BREAST

JALAPEÑO-CHEDDAR
SMOKED SAUSAGE

CHICKEN CRISPERS®

HALF ORDER OF RIBS +2.00

Hand-Trimmed STEAKS

ADD SHRIMP
HALF ORDER 2.99
FULL ORDER 5.49

100% USDA RIBEYE & CHOICE SIRLOIN.
ALL GRAIN-FED & OPTIMALLY AGED.

CLASSIC SIRLOIN*

Seasoned & topped with garlic butter. Served with loaded mashed potatoes, steamed broccoli.
6 oz. 11.89 • 10 oz. 16.99

CLASSIC RIBEYE*

Marbled, thick-cut steak topped with garlic butter. Served with loaded mashed potatoes, steamed broccoli. 17.99

*NOTICE: MAY BE COOKED TO ORDER. CONSUMING RAW OR UNDERCOOKED MEATS, POULTRY, SEAFOOD, SHELLFISH OR EGGS MAY INCREASE YOUR RISK OF FOODBORNE ILLNESS, ESPECIALLY IF YOU HAVE CERTAIN MEDICAL CONDITIONS. APPROXIMATE PRE-COOKED WEIGHTS. ACTUAL WEIGHT MAY VARY.

Hand-Battered **CRISPERS®**

SERVED WITH CORN ON THE COB & FRIES.
 UPGRADE TO ROASTED STREET CORN +1.00

-  **HOT CRISPY FIERY PEPPER**
 Served with house-made ranch. 10.49
-  **CRISPY HONEY-CHIPOTLE**
 Served with house-made ranch. 10.49
-  **CRISPY BUFFALO BLEU**
 Served with bleu cheese. 10.99
-  **CRISPY**
 Served with choice of honey-mustard, BBQ sauce or house-made ranch. 10.49
-  **ORIGINAL** 
 These Crispers beat fish & chips at their own game. Served with honey-mustard. 10.49



HONEY-CHIPOTLE CRISPERS® & WAFFLES

Crispers on top of Belgian waffles. Topped with bacon, jalapeños, ancho-chile ranch. Served with fries & honey-chipotle sauce. 11.49

CAJUN PASTA

Penne in Alfredo sauce, topped with chile spices, Parmesan, tomatoes, green onions. Served with garlic toast. Voted "Most Popular" by its peers. With grilled chicken 12.49 • With shrimp 13.29



OUR GOOD SIDES

1.99 WHEN ORDERED A LA CARTE.

- | | |
|------------------------|--|
| MEXICAN RICE | ROASTED STREET CORN +1.00 |
| FRIES | ASPARAGUS & GARLIC ROASTED TOMATOES +1.00 (when available) |
| STEAMED BROCCOLI | SPICED PANKO ONION RINGS +1.00 |
| SWEET CORN ON THE COB | |
| LOADED MASHED POTATOES | |
| BLACK BEANS | |

HEY, SWEET STUFF



MOLTEN CHOCOLATE CAKE

Chocolate cake with a molten chocolate center, topped with vanilla ice cream in a chocolate shell. Big enough to share, too good to actually do it. 7.29

SKILLET CHOCOLATE CHIP COOKIE


Topped with vanilla ice cream, hot fudge. 6.49

SALTED CARAMEL MOLTEN CAKE

Salted caramel cake filled with a melted caramel center. Topped with vanilla ice cream, caramel sauce & salted caramel pieces. Limited availability 7.29

CHEESECAKE

Served over strawberry puree. 6.49

 **FAVORITE**