

**AGENDA ITEM EXECUTIVE SUMMARY**

Agenda Item number: 6

Title:

Recommendation to approve a Proposal for a B1 Liquor License Application for Wahlburgers Located at 855 S Randall Rd, Building B, St. Charles.

Presenter:

Police Chief James Keegan

Meeting: Liquor Control Commission

Date: September 16, 2019

Proposed Cost: \$

Budgeted Amount: \$

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

This is a new liquor license request at a new building location: 855 S. Randall Road, Building B.

This applicant has more than 10 years of experience operating this type of business.

Attachments *(please list):*

Summary, Floor Plan, Liquor License

Recommendation/Suggested Action *(briefly explain):*

Recommendation to approve a proposal for a B1 Liquor License application for Wahlburgers located at 855 S Randall Rd, Building B, St. Charles.



Memo

Date: 9/11/2019
To: The Honorable Ray Rogina, Mayor-Liquor Commissioner
From: James Keegan, Chief of Police
Re: Background Investigation-825 S. Randall Road (Class B) dba Wahlburgers (Fox Valley Burgers LLC)

The purpose of this memorandum is to document and forward to your attention the results of the background investigation conducted by members of the St. Charles Police Department concerning the above mentioned establishment.

As you're aware, this location is currently under construction and is a national chain that features a full-service eatery and bar. They anticipate opening in March of 2020.

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

- This site is not yet built out but building plans and seating plans appear to adequate and sufficient (see attachment). The Liquor license would be contingent upon an occupancy permit being issued from the Fire Department and final inspection by the Building Department.
- Although a local manager has been selected, limited hiring has taken place. Therefore, fingerprints and additional vetting have to take place. Once those selections are made, a liquor license is contingent upon successful completion of the entire background; including Basset certifications.

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

Memo

Date: 9/11/2019
To: Deputy Chief Pierce #323
From: Detective David Ketelsen #328 DK #328
Re: Wahlburgers / Class B Liquor License Background Investigation

The purpose of this memo is to document the background investigation for Kevin E Dunn and Susan M Reynolds pursuant to the application for a Class B Liquor License from Fox Valley Burgers, LLC / DBA Wahlburgers.

Applicant:

Dunn, Kevin E



Melbourne, FL 32940



- On 09/09/2019 I was assigned to conduct this background. After reading the application and speaking to Kevin Dunn I essentially learned the following information.
- Dunn will have the title of Executive Manager. Dunn lives in Florida and will not be here for the day to day operations, but will be at the store several times a month. He advised that Operations Manager, Susan Reynolds, will be the hands on manager at the store. She currently lives in Massachusetts but apparently is moving to the St Charles area in the coming month.
- Dunn said that they were hoping to have the restaurant construction completed and be open by the first week of March in 2020.
- No alcohol has been purchased yet for this establishment.
- Wahlburgers will be serving beer, wine, and spirits.

Service, Courage, Professionalism, Dedication



- Dunn is BASSET certified and completed his training through American Safety Council on 08/31/19. (See attached copy of BASSET certificate.)
- I asked Dunn to provide me with the menu options that will be offered at Wahlburgers. He emailed the menu and this has been attached to this background.
- Dunn advised that the hours of operations would be: Sunday thru Thursday: 11:00 am - 10:00 pm and Friday and Saturday: 11:00 am - 12:00 am.
- Dunn previously had his fingerprints taken at the SCPD on 08/14/19 for this application and sent to the Illinois State Police Bureau of Identification. A search of the fingerprints on him showed he has no prior arrests.
- A search of New World and Kane County records showed no police contacts.
- A check of his residences where he has lived in the past 10 years showed no negative police contacts with the Wheaton, IL Police Department or the Melbourne, FL Police Department.
- A check of the Illinois Liquor Control Commission website showed no current license for the Wahlburgers in St Charles and no record of revocation for Dunn.
- A check of TLOxp (a database used by law enforcement) showed no liens or bankruptcies for Dunn, and nothing else of concern.
- In reviewing the application for this license it appears to be all complete, to include the floor plan, detailed business plan, copy of the lease, and the pending insurance plan documents. (See attached documents) I did notice that on the application it had the business address as being 855 S Randall Rd, Building B. I wanted to confirm this since I knew the address of 855 S Randall Rd to belong to the Meijer in St Charles. I then contacted a representative from St Charles Retail Management, LLC who will be leasing the building to Wahlburgers. They advised the address to the building to be leased to Wahlburgers will be 825 S Randall Rd. I contacted Dunn to advise him of this and asked if it was okay for me to put the address I received from the leasing company on the application. He said that I could and thanked me for doing this since he would now have to make sure to change the address on several other unrelated paperwork items for the restaurant.

Applicant:

Reynolds, Susan M



Buzzards Bay, MA 02532



- On 09/10/19 I spoke with Susan Reynolds who will be the Operation Manager when Wahlburgers opens up. She will be the hands on manager at the store and plans on moving to Naperville in October of 2019, where she has previously lived. She currently lives Buzzards Bay, MA.
- Reynolds essentially advised me the same information as was provided by Dunn about the opening of the Wahlburgers in St Charles, and added no additional employees have been hired so far.
- Reynolds previously had her fingerprints taken at the SCPD on 08/14/19 for this application and sent to the Illinois State Police Bureau of Identification. A search of the fingerprints on her showed she had no prior arrests.
- I asked Reynolds if she had ever been arrested and she advised that she had been arrested for DUI in 2008 in Illinois. She said she satisfied the court requirements for this arrest and that was the only time she was arrested. She could not remember the agency that arrested her for this DUI, but said she was driving on the Eisenhower Expressway at the time. I ran a CQH (Criminal History) on Reynolds but this came up showing no arrests. I then got a drivers abstract after running her through LEADS. This abstract did confirm that she was arrested for a DUI on 09/29/08, but does not show by what department. She was able to then obtain a judicial driving permit on 10/29/08.
- Reynolds is BASSET certified and completed her training through American Safety Council on 08/31/19. (See attached copy of BASSET certificate.)
- A check of the Illinois Liquor Control Commission website showed no current license for the Wahlburgers in St Charles and no record of revocation for Reynolds.
- A check of her residences where she has lived in the past 10 years showed no negative police contacts with the Naperville, IL Police Department or the Bourne, MA Police Department.

- A check of TLOxp (a database used by law enforcement) showed no liens for Reynolds and 1 bankruptcy for her in 2011. Nothing else of concern was found.

This concludes this background investigation.

Detective David Ketelsen #328 DK #328

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: Sept 5, 2019 **New Application** **Renewal Application**

APPLICATION CHECKLIST

Check items to confirm all are attached to this application	Applicant	Office Use Only
Application Fee \$700-	<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 type="checkbox"/>	<input type="checkbox"/>
Completed B.A.S.S.E.T. (Beverage Alcohol Sellers & Servers Training) form – filled out for all employees. A copy of the B.A.S.S.E.T. certificate is only needed for each manager. It is the business establishment's responsibility to keep copies of all B.A.S.S.E.T. certificates on file for all of their employees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Copy of Site Plan for Establishment (Drawn to scale including the parking lot, patio and/or deck, outdoor seating).	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Copy of Floor Plan for Establishment (Drawn to scale and must include the layout of the establishment with tables, chairs, aisles, displays, cash register, bar, and lounge area with dimensions, percentage, and square footage noted for each space). Be sure to also include all fixed objects , such as pool tables, bar stools, vending/amusement machines; as well as all exits .	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Copy of Business Plan, to include: <input type="checkbox"/> Hours of Operation <input type="checkbox"/> Copy of Menu <input type="checkbox"/> Whether or not live music will be played at this establishment <input type="checkbox"/> Will there be outdoor seating and/or outdoor designated smoking area <input type="checkbox"/> Do not include a marketing or financial plan with this business plan	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Are any building alterations planned for this site? If not sure, please contact Building & Code Enforcement at 630.377.4406 and/or Fire Prevention Bureau at 630.377.4458 to discuss whether or not a walk-thru and/or permit are necessary for this business. New construction	<input checked="" 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"/>

OFFICIAL USE ONLY

Approved* Denied Date Approved/Denied: _____ Customer Number: _____

Signature of Mayor, Liquor Control Commissioner _____

Date Issued _____

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

APPLICANT INFORMATION

A. Type of Business: Individual Partnership Corporation Other (explain):

B. Business Name: **FOX VALLEY BURGERS, LLC DBA: WAHL BURGERS ST. CHARLES**

C. Business Address: **855 S. RANDALL RD. BUILDING B**

D. IL Tax ID Number: [REDACTED] E. Business Phone: [REDACTED] F. Business E-mail: [REDACTED] G. Business Website: **WAHLBURGERS.COM**

H. Contact Person: **PETER LASALLE** I. Title: **ACCOUNTANT** J. Phone No.: [REDACTED]

K. If Corporation, Corporation Name: **SAME AS ABOVE**

L. Corporation Address (city, state, zip code): **SAME AS ABOVE**

BUSINESS ESTABLISHMENT LOCATION INFORMATION

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

B. Address applying for liquor license (exact street address): **855 S. RANDALL RD., BLDG. B, ST. CHARLES, IL 60174** C. Number of Parking Spaces: **161** D. Outside Dining s.f. [17.20.020-R]: **2,100 S.F.** E. Holding Bar s.f. [5.08.010-F]: **24 SF**

F. Total Building s.f.: **4,998 SF** G. Total Number of Seats: **154** H. Number of Bar Seats: **15** I. Sale Counter s.f.: **NA** J. Live Entertainment Area s.f. [5.08.010-H]: **NA**

K. Kitchen s.f.: **930** L. Cooler s.f.: **126** M. Dry Storage s.f.: **21** N. Seating Area s.f.: **2,116** O. Retail/public Area s.f.: **9 SF FOR MERCHANDISE RACK** P. Service Bar s.f. [5.08.010-O]: **225**

Q. Brief Business Plan description based on type of establishment listed above: **SEE ATTACHED WAHLBURGER CONCEPT PRESENTATION**

MANAGER INFORMATION

Full Name, include middle initial: **KEVIN DUNN** Title: **EXECU. MGR.**
 Birthdate: [REDACTED] Birthplace: [REDACTED] Driver's License#: [REDACTED] Home Phone: [REDACTED]
 Home Address: [REDACTED]

Full Name, include middle initial: [REDACTED] Title: **OPERATIONS MANAGER**
 Birthdate: [REDACTED] Birthplace: [REDACTED] Driver's License#: [REDACTED] Home Phone: [REDACTED]
 Home Address: [REDACTED] **MOVING TO FOX VALLEY AREA**

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

PROPOSED FLOOR PLAN/LAYOUT OF PROPERTY

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

CLASS B LICENSES

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

CLASS C LICENSES

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

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

CORPORATION / PREMISES QUESTIONS

1.	<p>If applicant is an individual or partnership, is each and every person a United States citizen (5.08.070-2)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Is any individual a naturalized citizen? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, print name(s), date(s), and place(s) of naturalization:</p>
2.	<p>List the type of business of the applicant (5.08.070-3):</p> <p style="text-align: center;">RESTAURANT</p>
3.	<p>Number of years of experience for the above listed type of business (5.08.070-4):</p> <p style="text-align: center;">10+ YEARS</p>
4.	<p>Amount of merchandise that normally will be in inventory when in operation (5.08.070-5): \$ 10K</p>
5.	<p>Location/address and description of business to be operated under this applied for license (5.08.070-6):</p> <p style="text-align: center;">855 S. RANDALL RD. BUILDING B (NEW CONSTRUCTION UNDERWAY) ST. CHARLES, IL 60174</p>
6.	<p>Is the premises owned or leased (5.08.070-6A)? <input type="checkbox"/> Owned <input checked="" type="checkbox"/> Leased</p>
7.	<p>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):</p> <p>Name of Building Owner: ST. CHARLES MANAGEMENT LLC</p> <p>Address of Building Owner: 30200 TELEGRAPH RD BINGHAM FARMS, MI 48025</p> <p>Mailing Address of Building Owner (if different):</p> <p>Phone Number: 248-289-7133 E-mail Address:</p> <p>Name of Building Owner:</p> <p>Address of Building Owner:</p> <p>Mailing Address of Building Owner (if different):</p> <p>Phone Number: E-mail Address:</p> <p>Name of Building Owner:</p> <p>Address of Building Owner:</p> <p>Mailing Address of Building Owner (if different):</p> <p>Phone Number: E-mail Address:</p>
8.	<p>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="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, please list the business name(s) and address(es):</p>

9.	<p>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="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>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.</p>
10.	<p>Are any improvements planned for the building and/or site that will require a building permit? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, has a building permit been applied for? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, date building permit was applied for with Building & Code Enforcement: <i>June 2019</i></p>
11.	<p>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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, what was the disposition of the application? Explain as necessary:</p>
12.	<p>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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>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 law and/or City of St. Charles Municipal Ordinances? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
13.	<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><i>N/A</i></p> <p>Government Unit:</p> <p>Date: _____ Location, City/State: _____</p> <p>Special Explanations:</p> <p>Government Unit:</p> <p>Date: _____ Location, City/State: _____</p> <p>Special Explanations:</p>
14.	<p>Have any liquor licenses possessed ever been revoked (5.08.070-9)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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?</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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>

15.	<p>Complete ONLY if yes was answered to the questions above (14):</p> <p>Name: <i>N/A</i> Name of Business:</p> <p>Position with the Business:</p> <p>Date(s) of Denial:</p> <p>Reason(s) for Denial of License:</p>
16.	<p>Date of Incorporation (Illinois Corporations) (5.08.070-10): <i>11/16/18 EIN CONFIRMED - IL APPLIED FOR 9/2019 DBA registration</i> Date qualified under Illinois Business Corporation Act to transact business in Illinois (Foreign Corporation): <i>DBA APPLIED FOR 9/2019</i></p>
17.	<p>Has the applicant and all designated managers read and do they all understand and agree not to violate any liquor laws of the United States, the State of Illinois, and any of the ordinances of the City of St. Charles in conducting business(5.08.070-11)?</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Have you, or in the case of a corporation, the local manager, or in the case of a partnership any of the partners, ever been convicted of any violation of any law pertaining to alcoholic liquor? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Have you, or in the case of a corporation the local manager, or in the case of a partnership any of the partners, ever been convicted of a felony? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Have you ever been convicted of a gambling offense? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If a partnership or corporation, include all partners and the local manager(s).)</p> <p>Will you and all your employees refuse to serve or sell alcoholic liquor to an intoxicated person or to a minor?</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
18.	<p>Mandatory: All individual owners, partners, officers, directors, and/or persons holding directly or beneficially more than five (5) percent in interest of the stock of owners by interest listed on page 1 of this application must be fingerprinted by the City of St. Charles Police Department (5.08.070-A12).</p> <p>Has this been done? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, date(s): <i>8/14/2019 - KEVIN DUNK SUE REYNOLDS</i></p>
* 19.	<p>Mandatory: Has the applicant attached proof of Dram Shop Insurance to this application or already furnished it to the City of St. Charles (5.08.060)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>Application/Quote</i></p> <p>If already furnished, date of delivery:</p> <p>NOTE: Insurance must be issued from May 1, 20XX – April 30, 20XX in accordance with City code 5.08.060. Request a prorated rate from your insurance company if you are applying for a new license during this timeframe.</p>

20.	Mandatory: Is the premises within 100 feet of any real property of any church; school; hospital; home for the aged or indigent persons; home for veterans, their wives/husbands, or children; and/or any military or naval station (5.08.230) ? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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COMMENTS/ADDITIONAL INFORMATION

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

Please list employees required to have B.A.S.S.E.T training on this page – include all managers, assistant managers, bartenders, and clerks who are permitted to make alcoholic liquor sales. **Include copies of certificates for managers only and mark Manager if applicable. Add another page, if needed.**

Name: (First) KEVIN (Last) DUNN (Middle) Manager

Home Street Address: [REDACTED]

City, State, Zip: [REDACTED]

Date of Course: 9/3 Place Course was Taken:

Birthdate: [REDACTED] Certificate Granted: 8/31/2019 Expiration:

Name: (First) SUSAN (Last) REYNOLDS (Middle) Manager

Home Street Address: [REDACTED]

City, State, Zip: [REDACTED]

Date of Course: 8/22/19 Place Course was Taken:

Birthdate: [REDACTED] Certificate Granted: 8/22/2019 Expiration:

Name: (First) (Last) (Middle) Manager

Home Street Address:

City, State, Zip:

Date of Course: Place Course was Taken:

Birthdate: Certificate Granted: Expiration:

Name: (First) (Last) (Middle) Manager

Home Street Address:

City, State, Zip:

Date of Course: Place Course was Taken:

Birthdate: Certificate Granted: Expiration:

NEW MANAGEMENT REQUIREMENTS

Whenever a new manager comes on board, the City must be notified and that person must be fingerprinted.

It is the business establishment's responsibility to keep copies of all B.A.S.S.E.T. certificates on file for their employees.

Certificate of Completion



KEVIN DUNN

Has diligently and with merit completed the
On-Premise BASSET Alcohol Certification on 8/31/2019

from the American Safety Council.

A handwritten signature in blue ink, appearing to read "Jeff Pairan".

Jeff Pairan

Certificate of Completion



SUSAN REYNOLDS

Has diligently and with merit completed the
On-Premise BASSET Alcohol Certification on 8/22/2019
from the American Safety Council.

A handwritten signature in blue ink, appearing to read "Jeff Pairan".

Jeff Pairan

APPLICATION FOR LATE NIGHT PERMIT

SUPPLEMENTAL TO LIQUOR LICENSE FOR CLASS B/C

To: **St. Charles Liquor Control Commission** Date:

I now possess or have applied for a liquor license Class

Applicant's Name:

Name of Business: N/A

Business Address:

Business Phone:

SUPPLEMENTAL PERMIT APPLIED FOR

Payment of Late Night Permit fee is required at the time the permit is issued.

- 1:00 a.m. Late Night Permit – fee of \$800.00
 - 2:00 a.m. Late Night Permit – fee of \$2,300.00
- N/A

NOTE: Other permits that may be available upon request include:

- Class E – Special Event License (1 to 3-day event @ \$100.00 per day)
- Outdoor Dining Permit (Contact Community & Economic Development @ 630.377.4443)

SIGNATURES



Applicant's Signature

Liquor Commissioner hereby directs City Clerk to issue permit indicated above.

Liquor Commissioner's Signature

Date

ADDENDUM TO RETAIL LIQUOR LICENSE APPLICATION

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

Date:

9/11/19

Name of Applicant:

Fox Valley Burgers, LLC DBA: Wahlburgers.

Name of Business:

Wahlburgers

Address of Business:

825 S. Randall Rd

Ward Number:

To Liquor Control Commissioner, City of St. Charles, Illinois

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

1. Date on which applicant will begin selling retail alcoholic liquors at this location:

Tentative - March 2020

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 N/A

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 N/A

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 N/A

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 N/A

5. Is the place for which the alcoholic liquor license is sought a dwelling house, flat, or apartment used for residential purposes? Yes No

6. Is there any access leading from premises to any other portion of the same building or structure used for dwelling or lodging purposes and which is permitted to be used or kept accessible for use by the public? (Connection between premises and such other portion of building or structure as is used only by the applicant, his/her family and personal guests not prohibited.) Yes No

7. If applicant conducts or will conduct in the same place any other class of business in addition to that of City Retailer of Alcoholic Liquor, state the kind and nature of such business: 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 *Advised this will be the case.*
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:
13. Have all persons named in this application been fingerprinted? Yes No
Fingerprinted by: *IEP Wojcik* Date: *8/14/19*
14. Other necessary data:

SIGNATURES

ENDORSEMENTS AND APPROVALS

INVESTIGATING OFFICER

D. Johnson Investigating Officer Signature *328 / Detective* Badge Number & Rank

ENDORSEMENT OF THE CHIEF OF POLICE

Recommend Issuing Liquor License: Yes No
Janis T... Signature Of Chief of Police *9-11-19* Date

KEYNOTES

- 1 SMART GLASS DIVIDING WALL SYSTEM
- 2 ACCESSIBLE BAR SURFACE 34" A.F.F. MAX COUNTER SURFACE
- 3 MERCHANDISE RACK - SEE DETAIL 216-02
- 4 ACCENT WALL (4) LCD MONITORS 9:16 RATIO (BY OTHERS) RECESSED INTO WALL SEE INTERIOR ELEVATIONS
- 5 SECURE LOCKERS TO WALL. PROVIDE BLOCKING @ MOUNTING LOCATIONS
- 6 ELECTRICAL PANEL TO BE RECESSED IN WALL
- 7 WATER HEATER SHELF FOR PARTITION & PLATFORM CONSTRUCTION SEE DETAILS X, X & X ON SHEET M-01
- 8 EXTERIOR OIL RECYCLING SYSTEM BY MAHONEY
- 9 MANUAL ANSUL PULL STATION FOR HOOD SHALL BE LOCATED 4' 3" A.F.F. & AT LEAST 10'-0" AWAY FROM THE HAZARD IN THE DIRECTION OF THE EXIT TRAVEL. COORD EXACT LOCATION WITH LOCAL FIRE DEPARTMENT. PROVIDE STAINLESS STEEL COVER GUARD FOR THE ANSUL PULL STATION
- 10 ALL STOREFRONT SYSTEM @ VESTIBULE - KAMMEER T6048 V5 4504T1 HUMAN RECEPTORS & 1" CLR. L.V.G.E. INSULATED GLASS MATCH EXISTING STOREFRONT COLOR. ALL OTHER EXISTING FINISHES TO BE KAMMEER PERMANOCC BLACK FINISH NO. 25 GLAZING MULLION SPACING & SIGHTLINES TO MATCH EXISTING STOREFRONT SYSTEM. V.I.F. REFER TO INTERIOR ELEVATIONS FOR LOCATIONS OF TEMPERED GLASS
- 11 CONDIMENT/TRASH COUNTER - SEE DETAIL 816-01
- 12 HOIST STAND - SEE DETAIL 316-02 FOR SECTION DETAIL
- 13 HALF WALL - SEE 916-01 FOR TYPICAL DETAIL
- 14 MANAGER'S EQUIPMENT RACK. REFER TO ELEVATION DETAIL #16-01 & ELEC. DWGS FOR MORE INFORMATION
- 15 SOLID RED OAK BAR TOP W/ 3" EASED EDGE
- 16 3/4" QUARTZITE COUNTER TOP W/ 3" EASED EDGE
- 17 PROVIDE 3M FASARA INTERIOR DESIGN FILM 5122A MAX (SAN MARIKO) TO INSIDE FACE OF STOREFRONT GLAZING. INSTALL FILM PER MFR INSTALLATION INSTRUCTIONS & BEFORE CONSTRUCTION OF PARTITIONS
- 18 APPLY SHEATHING TO INSIDE OF EXISTING STOREFRONT FRAME. SHEATHING SHALL BE PAINTED WHITE FINISH EXTERIOR. FRAME OUT AS NEEDED IN FRONT OF WINDOW OR NEW WALL SHEATHING AND INSULATE CAVITY BETWEEN SHEATHING AND FRAMING WITH SPRAY FOAM INSULATION.

PLAN GENERAL NOTES

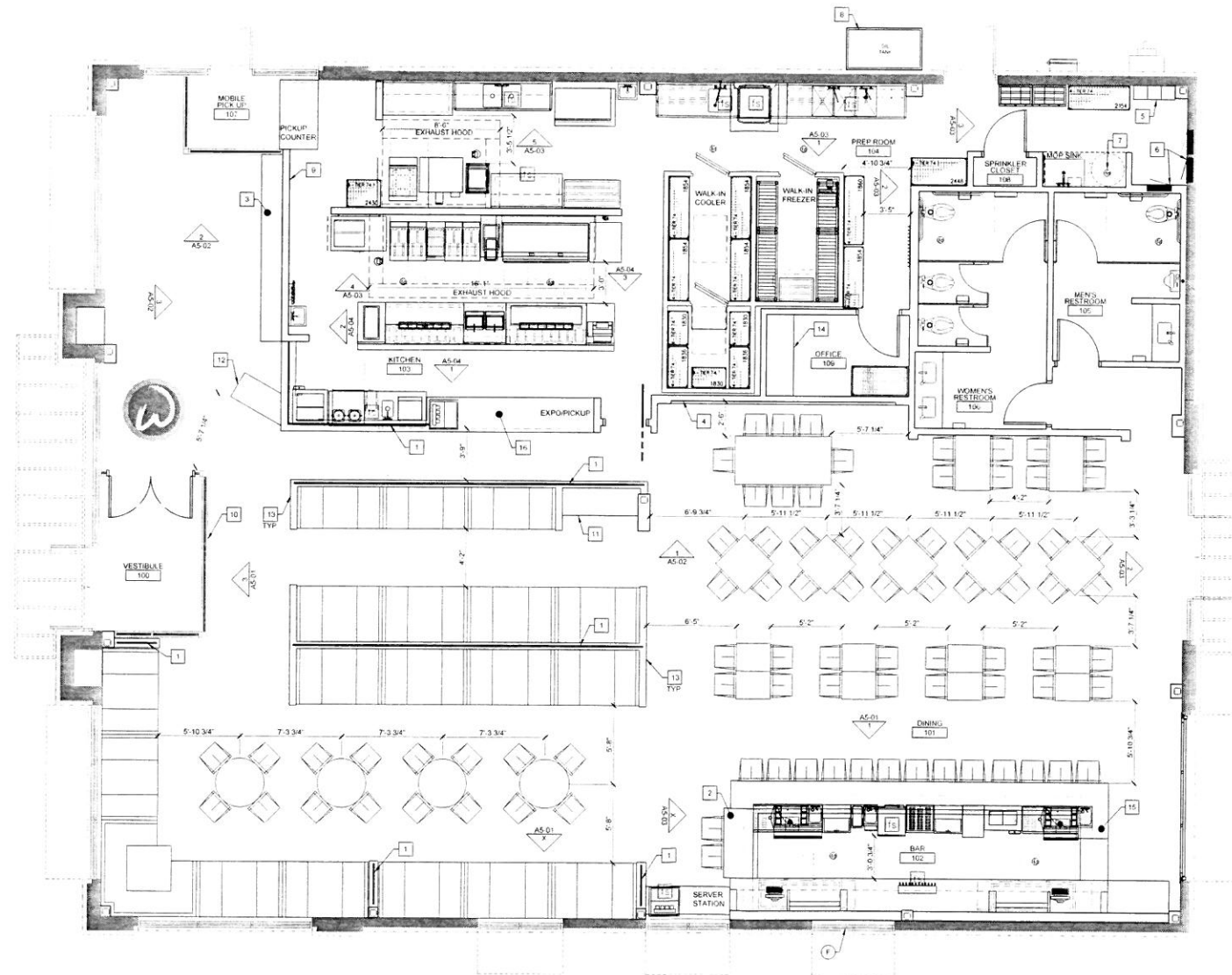
- 1. EGRESS DOORS SHALL BE READILY OPENABLE FROM THE EGRESS SIDE WITHOUT THE USE OF A KEY OR SPECIAL KNOWLEDGE OR EFFORTS
- 2. ALL FIRE RATED DOORS TO BE SELF-CLOSING
- 3. ALL INTERIOR FINISHES TO BE CLASS A WITH FLAME SPREAD RATING OF 0-25
- 4. NOT USED
- 5. DO NOT FASTEN STUDS OR GYPSUM BD. TO TOP RUNNER OF NON BEARING GYP BD. PARTITIONS. CUT STUDS AND GYP BD. 1/2" MAX. SHORT TO ALLOW FOR VERTICAL SLAB DEFLECTION
- 6. ALL DIMENSIONS TO BE FINISHED SURFACE UNO
- 7. GC TO COORDINATE ALL CEILING HEIGHTS WITH BUILDING SYSTEMS OWNER TO APPROVE ALL CEILING HOISTS BEFORE INSTALLATION
- 8. THE ARCHITECT WILL NEITHER HAVE CONTROL, OVER OR CHARGE OF, NOR BE RESPONSIBLE FOR, THE CONSTRUCTION MEANS, METHODS, TECHNIQUES, SEQUENCES OR PROCEDURES, OR FOR THE SAFETY PRECAUTIONS AND PROBLEMS IN CONNECTION WITH THE WORK, SINCE THESE ARE SOLELY THE CONTRACTOR'S RIGHTS AND RESPONSIBILITIES
- 9. CONTRACTOR IS REQUIRED TO HANG OWNER'S SIGN PACKAGE
- 10. TEMPERED GLASS: ALL GLAZED DOORS, ANY GLAZED PANEL ADJACENT TO ANY DOOR & ANY GLAZED PANEL WHICH MEETS ALL OF THE FOLLOWING CONDITIONS SHALL ALL BE TEMPERED:
 - 1. EXPOSED AREA OF AN INDIVIDUAL PANEL GREATER THAN 9 SF
 - 2. EXPOSED BOTTOM EDGE LESS THAN 18" A.F.F.
 - 3. EXPOSED TOP EDGE GREATER THAN 36" A.F.F.
 - 4. ONE OR MORE VERTICAL SURFACE(S) WITHIN 30" HORIZONTALLY OF THE PLANE OF THE GLAZING

BLOCKING NOTES

REFER TO A2-11 FOR BLOCKING NOTES

NOTE

SEE KITCHEN EQUIPMENT DRAWINGS FOR KITCHEN AND BAR EQUIPMENT



WAHLBURGERS

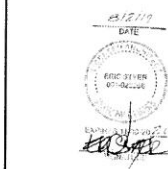
Client
 THESE DRAWINGS AND SPECIFICATIONS ARE THE CONFIDENTIAL AND PROPRIETARY PROPERTY OF DXU AND SHALL NOT BE COPIED OR REPRODUCED WITHOUT WRITTEN AUTHORIZATION.

Project
**WAHLBURGERS
 SWC RANDALL RD & RT38
 ST. CHARLES, IL**

Architect of Record
**DXU
 ARCHITECTS**
 412 S. West Street - 2nd Floor - Chicago - IL - 60607
 P. 312 955 8334 • d x u a r c h . c o m

Consultant

FOR PERMIT	08-02-2019
No.	Issue
	Date



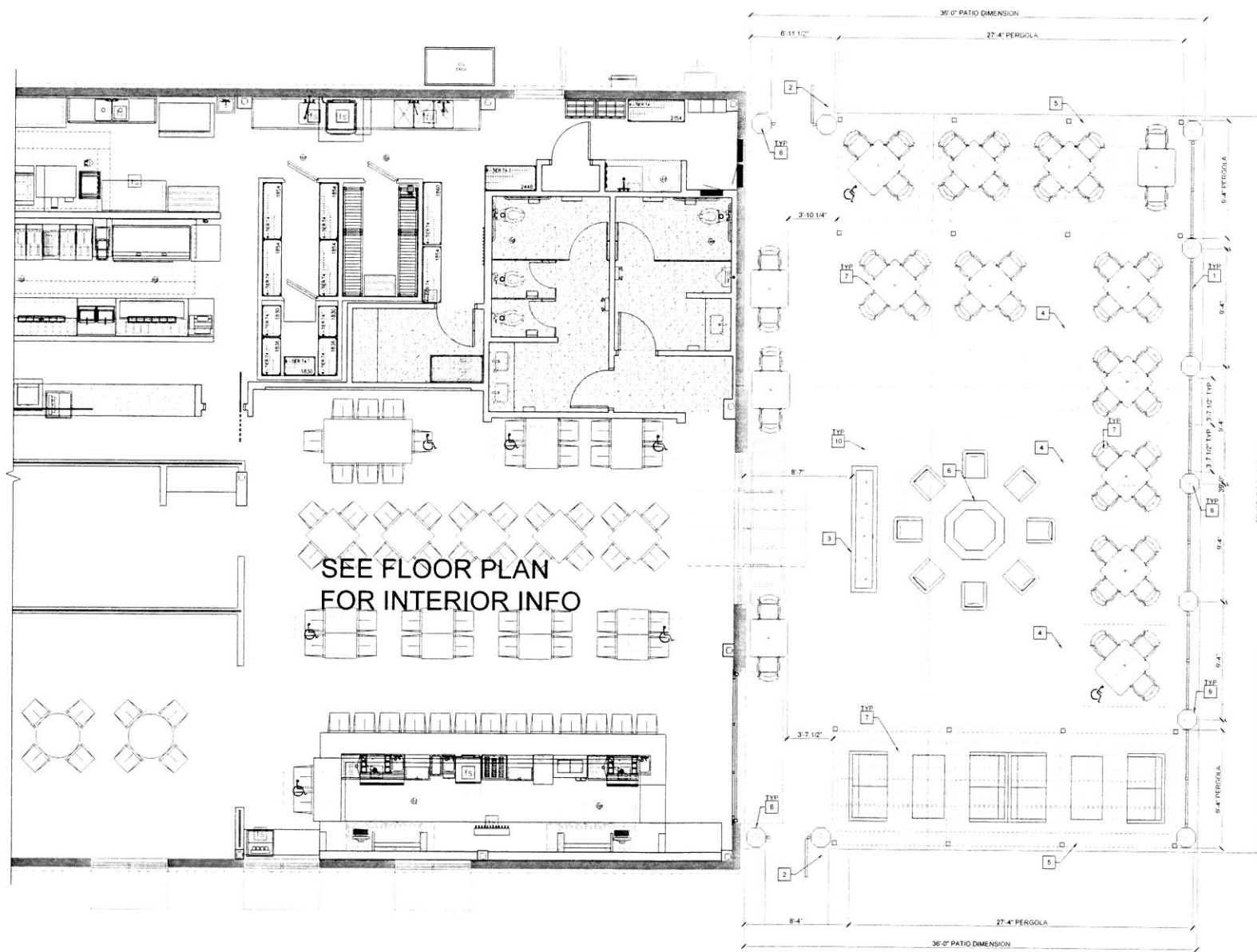
Seal FOR PERMIT

Project NO: 19-097
 Drawn By: Approved By:

Title:
**FLOOR
 PLAN**

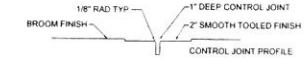
Sheet
A2-12





KEYNOTES

- 1 METAL RAILING - BLACK POWDER COAT FINISH - SIMILAR TO JAMERSTAR MONTAGE PLUS MAJESTIC 2 3/4\"/>



LOOSE SEATING: 48 (2 ADA)
LOUNGE/FIRE PIT SEATING: 16

Municipal Approval Stamp:



WAHLBURGERS

Client:
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**WAHLBURGERS
SWC RANDALL RD & RT38
ST. CHARLES, IL**

Project:
DXU
ARCHITECTS
412 S. Wells Street • 2nd Floor • Chicago • IL • 60607
P 312.955.8334 • dxuarch.com
Architect of Record

Consultant:

FOR PERMIT: 08-02-2011

No.	Issue	Date



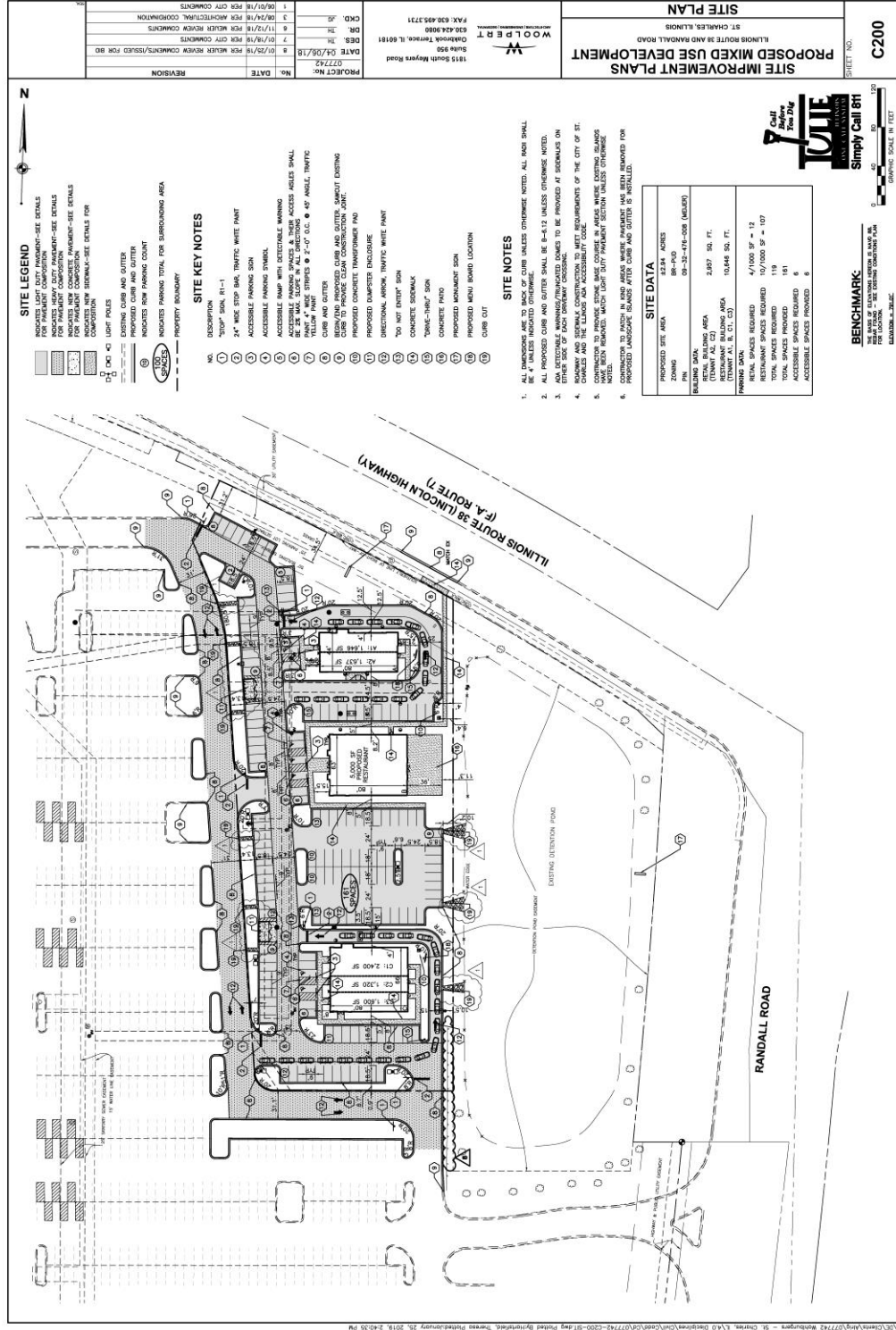
Seal
FOR PERMIT

Project NO: 19-092
Approved By: [Signature]
Title: **PATIO PLAN**

Sheet
A2-16



Exhibit A
Site Plan



PROPOSED MIXED USE DEVELOPMENT		SITE PLAN	
ST CHARLES, ILLINOIS ILLINOIS ROUTE 38 AND RANDALL ROAD		1815 South Meyers Road BANKERS BUILDING CHICKPEA TRUCK, IL 60185 FAX: 630.952.2731	
PROJECT NO. 071726		DATE 04/09/19	
REVISION		DRAWN BY: [Signature]	
1	02/07/19 PER CITY COMMENTS	DRG.	JK
2	07/24/19 PER ARCHITECTURAL COORDINATION	CMD.	JG
3	07/24/19 PER ARCHITECTURAL COORDINATION	DRG.	JK
4	11/17/19 PER WATER REVIEW COMMENTS	DRG.	JK
5	01/07/19 PER CITY COMMENTS	DRG.	JK
6	01/07/19 PER WATER REVIEW COMMENTS/ISSUES FOR BO	DRG.	JK



wahlburgers
CONCEPT PRESENTATION



**OUR MISSION:
WELCOME
GUESTS LIKE
THEY'RE FAMILY
& GIVE
THEM AN
EXCEPTIONAL,
STAR-WORTHY
DINING
EXPERIENCE!**



OUR STORY

When Chef Paul set out to create a family restaurant, things got interesting quickly. See, Paul's a Wahlberg, and the Wahlbergs are no ordinary family. One brother, Donnie, didn't just join the school band as a kid. He created the most famous boy band in the world. His other brother, Mark, didn't just take drama. He became one of the most famous actors in the world. And Paul, well, he loved food. And family. But he wasn't satisfied just cooking for them. He wanted to cook for everyone else's too. He was hungry for something more.

So he created Wahlburgers.

This isn't another cookie-cutter chain posing as a family restaurant. This is the real deal. With menu items like the sloppiest Sloppy Joe's, the tastiest tater tots, and frothiest frappes, based on the same recipes Paul and his 8 siblings devoured as kids—taken to another Wahlberg-ian level.

Come chow down on Mark's favorite burger topped with all things Thanksgiving. Dip a handful of fries into Wahl Sauce that's so delicious you keep asking for more. Hit the bar for a Wahlcoction or top off your night with a colossal frappe that screams at you to take an instagram photo.

So don't just go out. Come to Wahlburgers and GO WAHL OUT.



EXPANSION PLANS

Deliver best-in-class operating/financial results

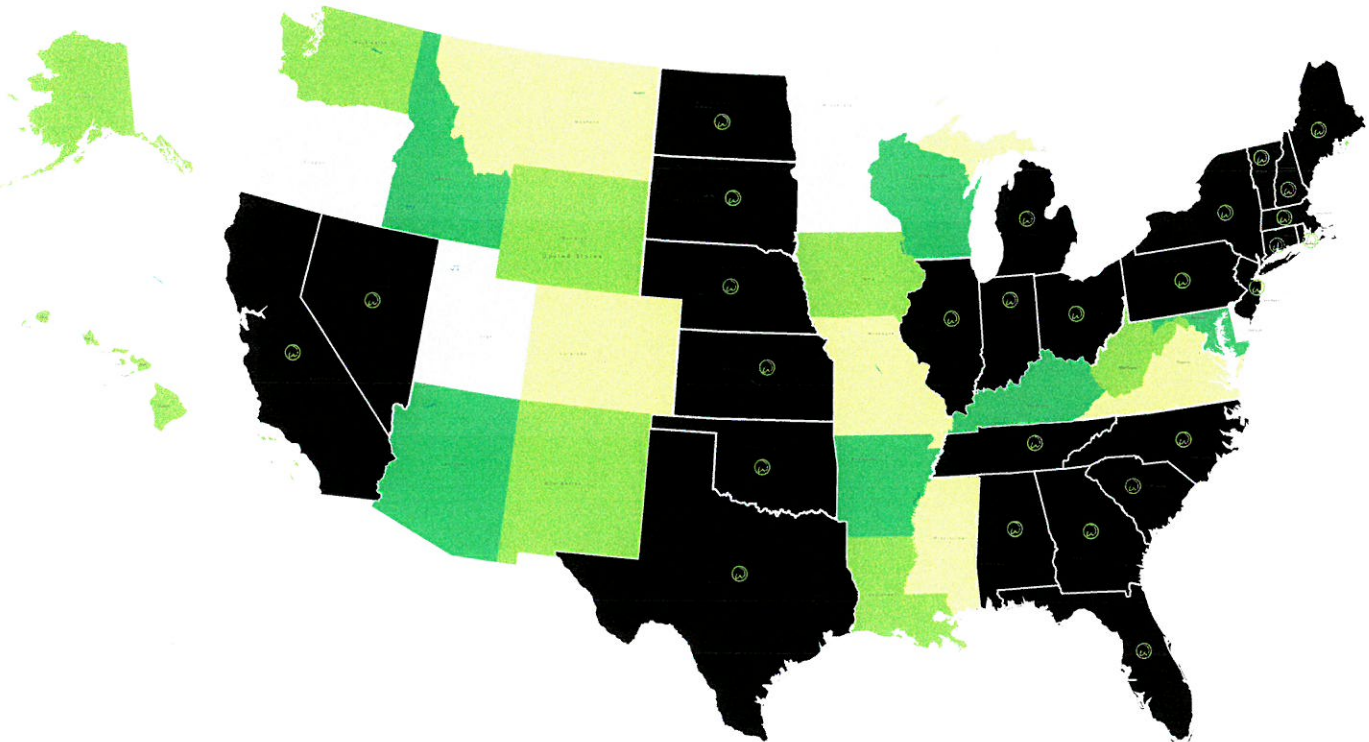
Develop other markets through franchise agreements with highly experienced multi-unit operators

Leverage reality show/story lines to promote brand -ensure that quality of execution delights customers and protects the Wahlberg name

RESTAURANTS & MARKETS UNDERWAY

32 restaurants open across the United States and Canada

Development agreements signed or in process for nearly 200 restaurants in the U.S. and other agreements throughout the world.





WAHLBURGERS REALITY SHOW

Wahlburgers just wrapped
its 10th & final season.

A consistent top 10 A&E &
two time Emmy-nominated
reality Show.



SOCIAL / GENERAL MEDIA BUZZ

Wahlburgers A&E Facebook has over **840K fans**

Wahlburgers Facebook has over **543K fans**

Wahlburgers Instagram has over **289K fans**

Wahlburgers Twitter has over **147K followers** across all sites

BROTHERS' SOCIAL MEDIA SUPPORT:



PAUL: 88K+ *Instagram followers*

MARK: 17+ *million Facebook followers*

13.3 *million Instagram followers*

3.9 *million Twitter followers*

DONNIE: 910K+ *Facebook followers*

1.2 *million Instagram followers*

1.5 *million Twitter followers*

Numerous feature & cover stories in national & international press



ACCOLADES & MEDIA

- Restaurant & Business Magazine: “The Future 50” 2018 & 2019
- National Restaurant Association: “ Most buzzed about brands”
- *Fast Casual* Top 75 Movers & Shakers (2016-2017 #1 rise in rankings)
- Zagat: highest rated burger concept in metro Boston
- *Boston Magazine*: Best New Restaurant
- South Shore: Best Milkshake
- **Steve Carell: chose Wahlburgers as his “Last Meal on Earth” in *Bon Appétit***
- Best burger awards in multiple markets



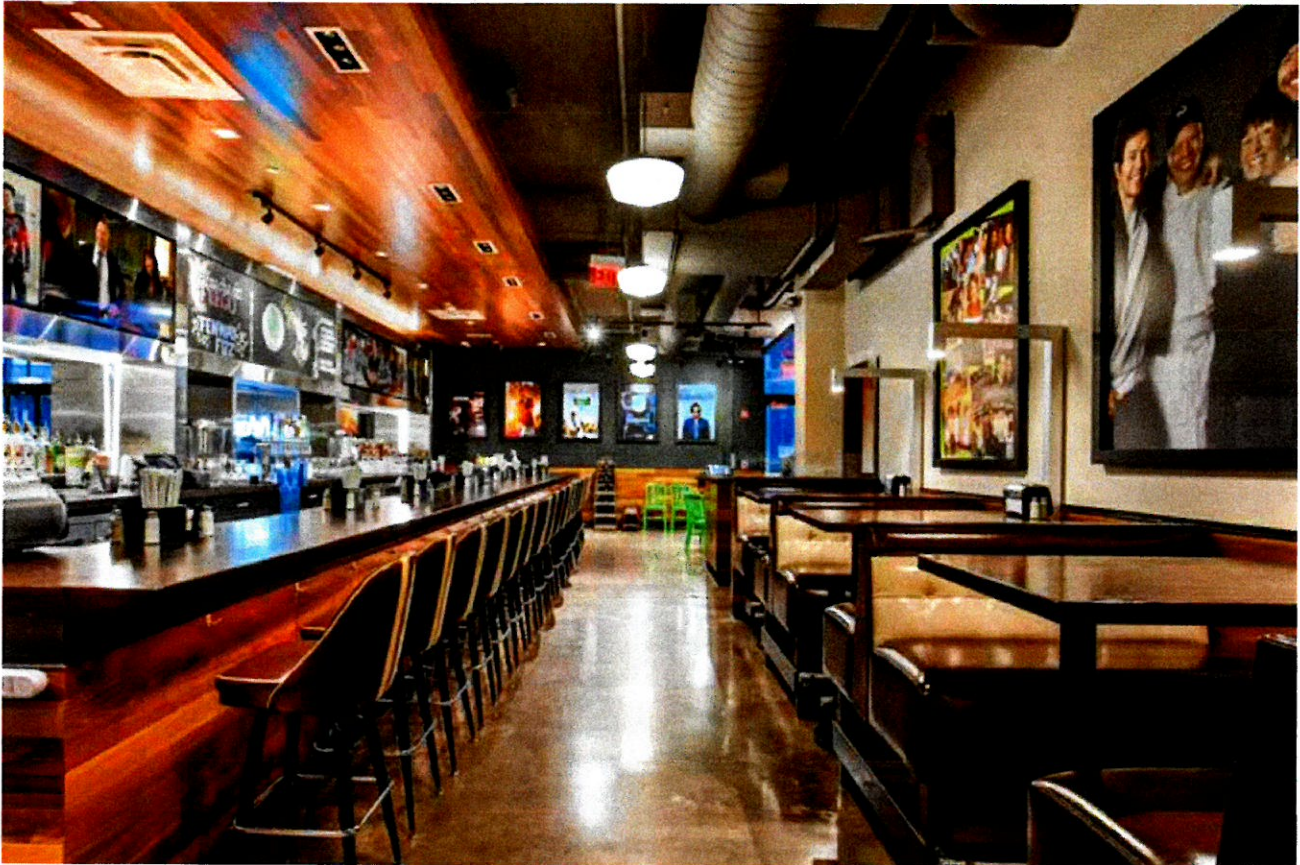
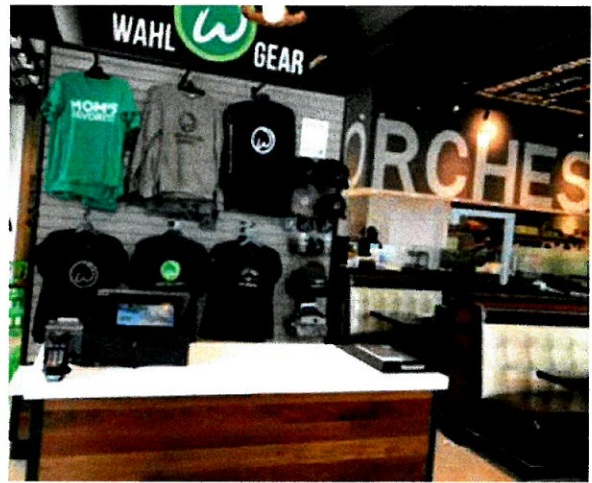
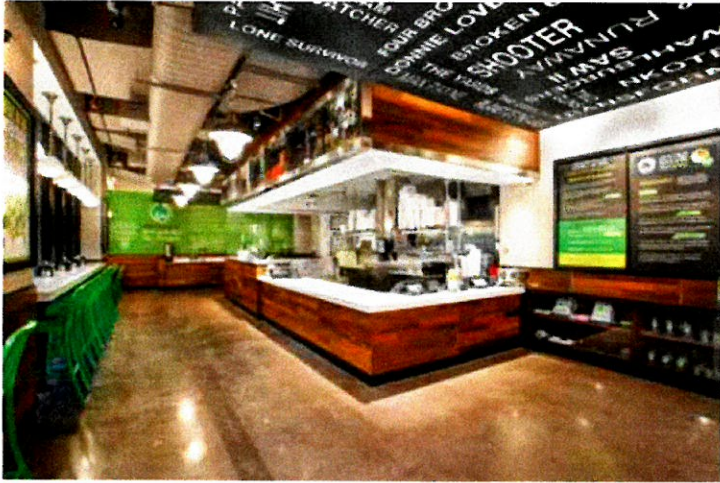


FULL SERVICE BAR & DINING





CONTEMPORARY-UNIQUE WAHLBURGERS ELEMENTS



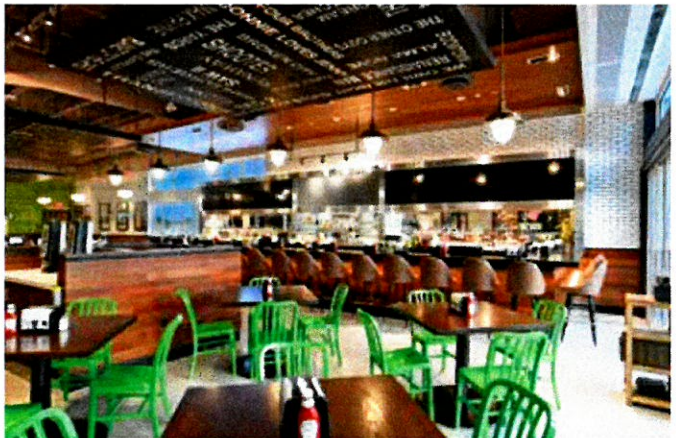


OUR MENU!



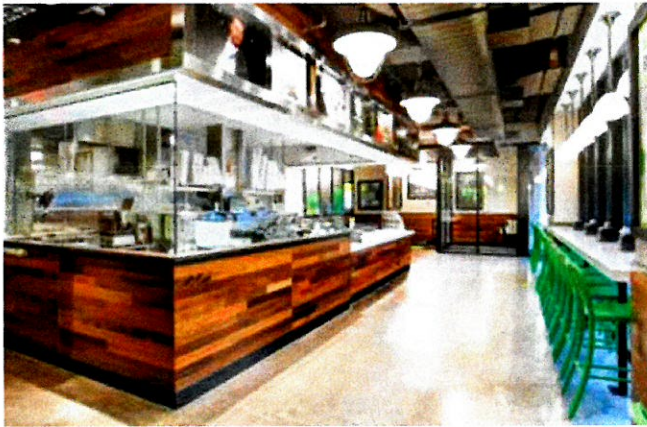


SUBURBAN LYNNFIELD MASSACHUSETTS





URBAN BOSTON MASSACHUSETTS - FENWAY AREA





PATIO AREA





OUR HISTORY

2010: Alma Nove marks the start with Mediterranean fine-dining, leveraging Paul's culinary skill

2011: Wahlburgers Hingham Massachusetts opens

2012: Concept evolves: expanded menu, social media

2013-2014: Expansion plans move forward/show launches

2015+: Franchising across the globe; ongoing concept adjustments to build quality

2018: Launched line of retail beef products. Currently available in 3,000+ grocery stores nationwide

OPERATING PRINCIPALS

PAUL WAHLBERG, FOUNDER

- 30 years as a chef
- Extensive experience in upper-tier restaurants: Charles Hotel, Four Seasons, and Bridgeman's
- Recognized as one of America's best chefs

TOP 3 OFFICERS

- 70 years combined restaurant experience



"All Your Insurance Needs... Under One Roof"

**Twinbrook Insurance
Brokerage, Inc.
Locations**

400A Franklin Street
Braintree, MA 02184

181 South Franklin Street
Holbrook, MA 02343

129 Airport Road, Suite 3
Hyannis, MA 02601

167 Summer Street
Kingston, MA 02364

100 Court Street
Plymouth, MA 02360

751 N.E. 10th Street
Pompano Beach Airpark
Pompano Beach, FL 33060

Phone: (781) 843-7000
Fax: (781) 848-6100

Kevin Dunn
1491 Cape Sable Drive
Melbourne, FL 32940-1485

Dear Kevin

Re: Wahlburgers St Charles IL

Attached please find a comprehensive insurance proposal. This proposal includes General Liability, Liquor Liability, Workers Compensation, as well as coverage for your property and business interruption. Upon your written request we can bind coverage within 24 hours

Yours truly;

Richard Mazzarella
Twinbrook Insurance Brokerage, Inc.
Office: (781) 843-7000
Fax: (781) 848-6100



Your Workers' Compensation Insurance Quote

Proposal created date:
August 5, 2019 12:14 PM

Quote good through:
November 2, 2019 12:00 AM

Your reference number:
08 WEC AD7M0W - 001

Policy term:
August 5, 2019 - August 5, 2020

Information about your business:
Fox Valley Burgers LLC
1491 CAPE SABLE DR
MELBOURNE, FL 32940-1485

Information about your agent:
TWINBROOK INSURANCE BROKERAGE
INC
400a Franklin Street
Braintree, MA 02184

Proposal created by:
Courtney Wolinsky
cwolinsky@twinbrook.com
(781) 843-7000

YOUR ESTIMATED ANNUAL PREMIUM IS: \$2,211.00

SEE INSIDE:

Your Proposal Coverage and Policy Limits	Page 2	How We'll Calculate Your Final Premium	Page 5
Your Class Code and Rating Details	Page 4	How to Pay Your Premium	Page 6

IMPORTANT MESSAGE:

- Please review the coverages and limits displayed to ensure that they are appropriate for the needs of your business.
- To accept the terms of the quote proposal, be sure to sign where indicated.

WHAT YOU NEED WHEN YOU NEED IT

The Hartford was the first insurer with a dedicated small business team more than 30 years ago. Today, we're still the best choice for small business, providing our customers with industry-leading products and online service tools like 24/7 account access, online bill pay and more.



¹ Customer reviews were collected and tabulated by The Hartford, and reviews are not representative of all customers.

² World's Most Ethical Companies, Ethisphere Institute (2008-2012, 2014-2018).

This document is only a proposal. It can't be used as proof of coverage, unless bound by an authorized agent.

The Hartford® is The Hartford Financial Services Group, Inc. and its subsidiaries, including Hartford Fire Insurance Company. Its headquarters is in Hartford, CT. Customer claims reviews were collected and tabulated by The Hartford and reviews are not representative of all customers. © 2018 The Hartford



Your Proposal Coverage and Policy Limits

Part 1: Workers' Compensation Insurance

This section of your policy pays to treat, rehabilitate and replace income of workers who are injured on the job. Statutory coverage as provided by the following states:

- Illinois

Notes for owners/officers:

- IL-Excluded

Part 2: Employer's Liability Insurance

This section of your policy pays to indemnify and defend you from lawsuits by injured workers.

	LIMITS OF INSURANCE	
Bodily Injury By Accident	\$ 500,000	Each Accident
Bodily Injury By Disease	\$ 500,000	Policy Limit
Bodily Injury By Disease	\$ 500,000	Each Employee

NOTES ON YOUR POLICY

The basic broad form included in your proposal above offers these free enhancements:

- Voluntary compensation covered
- Employer's liability stop gap in monopolistic states
- Pay for reasonable expenses, including loss of earnings

HOW WE ESTIMATED YOUR PREMIUM

Your premium depends on several factors, aside from your coverage choices above. Two key factors are your class code and your rate. A class code is a standardized way to describe your employees' jobs. We do this because each type of job has inherently different risks.

The class code determines the rate, which is the amount you pay for every \$100 of your payroll. We multiply that rate by your premium basis. That's your best guess at the total amount you'll pay those employees during the policy year.

At the end of the year, we'll review your premium basis together to make sure it was correct. This is called a "premium audit." (See "How we calculate your final premium" for more information about this.)

Your premium calculations also include payroll-based factors. These include, but are not limited to, state surcharges, catastrophe, minimum premium, experience modification, and terrorism.

You'll find a breakdown of these and other charges beginning on the following pages.



Your Proposal Coverage and Policy Limits

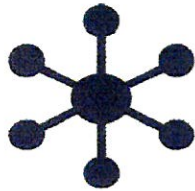
CONTINUED

ACKNOWLEDGED AND ACCEPTED BY:

Signature of the Insured

Date

Reference Number: 08 WEC AD7M0W - 001



Your Class Code and Rating Details

We calculate your premium based on every employee, location and state. Below you'll find calculations for your employees located in Illinois

Location: 1

Your employees are located at: Randel Rd
Charles, IL 60119

CLASS CODE	DESCRIPTION	RATE	BLENDED RATE	PREMIUM BASIS (RATE PER \$100 OF EXPOSURE)	CLASS PREMIUM
9082	RESTAURANT NOC	1.87	2.05	100,000	\$ 1,870.00

DESCRIPTION OF CHARGE	PREMIUM ADJUSTMENT	AMOUNT
Total Class Premium		\$ 1,870.00
Employer Liability increased limits	0.011000	\$ 21.00
Employer Liability Increase Limits balance to Minimum Premium	0	\$ 79.00
Total Estimated Annual Standard Premium		\$ 1,970.00
IL Industrial Commission Operations Fund Surcharge	1.010000	\$ 22.00
Catastrophe (other than certified acts of terrorism) \$100,000.00	0.020000	\$ 20.00
Expense constant	0	\$ 160.00
Terrorism Risk Insurance Program Reauthorization Act Disclosure Endorsement \$100,000.00	0.039000	\$ 39.00
STATE ESTIMATED ANNUAL PREMIUM		\$ 2,211.00

As required by law, workers' compensation policies are subject to an annual premium audit.

Merit and Experience Mods are tentative and subject to final calculation.

To learn more about how your premium is calculated on the payroll billing method please visit:

<https://www.thehartford.com/blended>

Like many insurance companies, The Hartford is legally made up of several property and casualty affiliate companies. Depending on the state, the "writing company" may be different. Coverage in this state is provided by: Hartford Accident and Indemnity Company, a member company of The Hartford.



**YOUR BUSINESS INSURANCE SOLUTION
SPECTRUM® PROPOSAL**

Prepared for:
Fox Valley Burgers LLC
1491 Cape Sable Dr
Melbourne, FL 32940

Reference Number: 08SBA4987BL - 005
Proposal Date: 08/05/2019, 2:23 PM

Proposal Created by:
Courtney Wolinsky
781-843-7000
cwolinsky@twinbrook.com

Total Estimated Annual Premium for Spectrum: \$ 22,344.00

POLICY LEVEL	Page
Property Coverage	2
Liability Coverage	3
Umbrella Liability Coverage	4
LOCATION BUILDING LEVEL	
Location Building Coverage	4
Stretch Endorsement Summary	5

Important Messages:

This document is a proposal of insurance for the applicant indicated above. It is not to be used as proof of coverage, unless bound by an authorized agent.

WHY THE HARTFORD
200 years experience | 1 million customers | Named One of the World's Most Ethical Companies
The Hartford is the market leader for small business with more than 200 years of experience, trusted by over 1 million customers and [rated 4.8 out of 5 by Small Businesses.](#)

Spectrum Proposal
with
Twin City Fire Insurance Company
A member company of The Hartford
8/5/2019 - 8/5/2020

Policy Level

Property Coverage

Limits of Insurance

Special Property Coverage Form automatically includes the following coverages at no additional charge:

Accounts Receivable Coverage Off Premises	\$	25,000
Accounts Receivable Coverage On Premises	\$	25,000
Appurtenant Structures - business personal property within appurtenant structure	\$	5,000
Arson Reward	\$	10,000
Business Income - Civil Authority - 30 Days - A waiting period applies	\$	Included
Business Income to Dependant Properties	\$	5,000
Business Personal Property Seasonal Automatic Increase: 25%	\$	Included
Data and Software	\$	10,000
Definition of Premises: 1000 feet	\$	Included
Extended Business Income - 30 consecutive days	\$	Included
Fire Department Service Charge	\$	25,000
Fire Extinguisher Recharge	\$	Included
Forgery Coverage	\$	5,000
Leasehold Improvements	\$	25,000
Lease Assessment	\$	2,500
Lock and Key Replacement	\$	1,000
Money and Securities - Inside	\$	10,000
Money and Securities - Outside	\$	5,000
Newly Acquired or Constructed Property - Building - 180 Days Max	\$	500,000
Newly Acquired or Constructed Property - Business Income 180 Days Max	\$	50,000
Newly Acquired or Constructed Property - Business Personal Property - 180 Days Max	\$	250,000
Ordinance or Law Coverage:		
• Tenants Improvements & Betterments Increased Cost of Construction	\$	25,000
Outdoor Property - Aggregate	\$	10,000
Outdoor Property - For any one tree, shrub or plant	\$	1,000
Outdoor Signs - Attached to buildings - Per sign	\$	5,000
Personal Effects	\$	10,000
Property Off-Premises - Business Personal Property	\$	2,500
Tenant's Glass	\$	25,000
Valuable Papers Coverage Off Premises	\$	25,000
Valuable Papers Coverage On Premises	\$	25,000

Property Coverage**Limits of Insurance****Premium**

The following Property coverages are applicable at all locations:

Business Personal Property	Replacement Cost	
Property Deductible	\$ 1,000	
Business Income - Electronic Vandalism: A 12 hour waiting period applies.	\$ Included	\$ 75
Automatic Equipment Breakdown Coverage which includes:	\$ Included	\$ 1,251
• Mechanical Breakdown	\$ Included	\$ Included
• Artificially Generated Electric Current	\$ Included	\$ Included
• Explosion of Steam Equipment	\$ Included	\$ Included
• Loss or damage to Steam Equipment	\$ Included	\$ Included
• Loss or damage to Water Heating Equipment	\$ Included	\$ Included
• Contamination by Hazardous Substance	\$ 50,000	\$ Included
• Expediting Expenses	\$ 50,000	\$ Included
Equipment Breakdown Deductible	\$ 1,000	\$ Included
Business Income And Extra Expense Actual Loss Sustained - 12 mos.	\$ Included	\$ 3,730
Identity Recovery Coverage	\$ 15,000	\$ Included
Business Income Extension for Cloud Service Interruption - A waiting period applies	\$ 25,000	\$ 410
Fraudulent Transfer	\$ 30,000	\$ 63

Liability Coverage**Limits of Insurance****Premium**

Business Liability:		
Broad Form Named Insured includes subsidiaries in which greater than 50% of voting stock is owned by the Named Insured	\$ Included	\$ Included
CyberFlex	\$ Included	\$ Included
Defense Costs outside of the Limits of Insurance	\$ Included	\$ Included
Employees and Volunteers included as Insureds	\$ Included	\$ Included
Incidental Malpractice	\$ Included	\$ Included
Mental Anguish resulting from bodily injury, sickness or disease	\$ Included	\$ Included
Newly Acquired Organizations	\$ 180 days	\$ Included
Non-Owned watercraft under 51 feet	\$ Included	\$ Included
Per Location General Aggregate - owned or rented premises	\$ Included	\$ Included
Personal and Advertising Liability	\$ Included	\$ Included
Property Damage to borrowed equipment not being used to perform operations at the job site	\$ Included	\$ Included
Unintentional failure to disclose hazards	\$ Included	\$ Included
Additional Insured - Coverage is automatically extended to persons or organizations whose written contracts or permits with the insured require insurance to be provided	\$ Included	\$ Included
Each Occurrence	\$ 1,000,000	
General Aggregate	\$ 2,000,000	\$ 7,700
Products/Completed Operations Aggregate	\$ 2,000,000	\$ Included
Personal and Advertising Injury	\$ 1,000,000	\$ Included
Damage to Premises Rented to You	\$ 1,000,000	\$ Included
Medical Expenses	\$ 5,000	\$ Included
Hired and Non-owned Auto	\$ 1,000,000	\$ 227

Employment Practices Liability (Claims Made)			
Per Claim	\$	10,000	\$ Included
Aggregate	\$	10,000	\$ Included
EPLI Deductible	\$	0	
EPLI Retroactive Date: 8/5/2019			
Data Breach			
Responses Expenses Limit Includes the following:	\$	100,000	\$ 267
• Notification expenses			
• Public Relation Expenses			
• Legal and Forensic IT Review			
• Good Faith Advertising Expenses			
• Services for Impacted Individuals (credit monitoring, help line, etc)			
Data Breach Deductible	\$	2,500	
Business Income Extra Expense Sub-limit - A waiting period applies	\$	50,000	\$ 139
Extortion Threats Sub-limit	\$	50,000	\$ 29
1st Party Retroactive Date: 8/5/2019			
Data Breach - Defense & Liability Limit	\$	250,000	\$ 430
Data Breach Deductible	\$	5,000	
3rd Party Retroactive Date: 8/5/2019			
Defense costs apply within limits unless otherwise stated			
Liquor Liability			
Each Common Cause	\$	1,000,000	\$ 2,335
Aggregate	\$	2,000,000	\$ Included

Umbrella Liability Coverages

Limits of Insurance

Premium

Per Occurrence	\$	1,000,000	\$ 1,228
Aggregate	\$	1,000,000	\$ Included
Self-Insured Retention	\$	10,000	
Policy Base Premium			\$ 456
Terrorism	\$	Included	\$ 392

Location/Building Level

Location/Building Information

Location No./Building No.	:	001/001
Street Address	:	2n710 Randall Rd
City, State and Zip Code	:	Saint Charles, IL 60174-1505
Protection Class	:	0001
Class Code	:	58011
Description	:	Restaurant - Full Service (waiter/waitress)
Construction	:	Masonry Non-Combustible
Year Built	:	2019
Sprinklered	:	Yes
Area	:	4,000
Annual Sales/Receipts	:	\$3,500,000

Location/Building Coverage

Limits of Insurance

Premium

Business Personal Property	\$	2,750,000	\$ 2,907
Fungi Limited Coverage	\$	50,000	\$ Included

Fungi Limited Business Interruption

30 Days

\$ Included

Stretch Endorsements

Premium

Super Stretch for Business Services See Stretch Summary Attached \$ 705
The Limits of Insurance for the following Additional Coverages are in addition to any other limit of insurance provided under this policy.

Super Stretch for Business Services Summary

Blanket Coverage Limit of Insurance: \$350,000

Blanket Coverages

Accounts Receivable - On/Off Premises
Computers and Media
Debris Removal
Personal Property of Others
Temperature Change
Valuable Papers and Records - On/Off Premises

Coverage

Limits of Insurance

Brands and Labels	Up to Business Personal Property Limit
Claim Expenses	\$ 10,000
Computer Fraud	\$ 5,000
Contract Penalty	\$ 1,000
Employee Dishonesty (including ERISA)	\$ 25,000
Fine Arts	\$ 50,000
Forgery	\$ 25,000
Laptop Computers - Worldwide Coverage	\$ 10,000
Off-Premises Utility Services - Direct Damage	\$ 25,000
Ordinance or Law Coverage	
Undamaged Portion	Included in Building Limit
Demolition Cost	\$ 25,000
Increased Cost of Construction	\$ 25,000
Outdoor Signs	Full Value
Pairs or Sets	Up to Business Personal Property Limit
Property at Other Premises	\$ 50,000
Salespersons' Samples	\$ 25,000
Sewer and Drain Back Up	Included up to Covered Property Limits
Sump Overflow or Sump Pump Failure	\$ 50,000
Tenant Building and Business Personal Property Coverage - Required by Lease	\$ 20,000
Transit Property in the Care of Carriers for Hire	\$ 25,000
Unauthorized Business Card Use	\$ 5,000

The Limits of Insurance for the following Coverage Extensions are a replacement of the Limit of Insurance provided under the Property Coverage Form.

Coverage

Limits of Insurance

Newly Acquired or Constructed Property - 180 Days	
Building	\$ 1,000,000
Business Personal Property	\$ 500,000
Business Income and Extra Expense	\$ 500,000
Outdoor Property	\$ 25,000 aggregate / \$ 1,000 per item
Personal Effects	\$ 60,000
Property Off-Premises	\$ 50,000

The following changes apply only if Business Income and Extra Expense are covered under this policy. The Limits of Insurance for the following Business Income and Extra Expense Coverages are in addition to any other Limit of Insurance provided under this policy:

<i>Coverage</i>	<i>Limits of Insurance</i>
Business Income Extension for Off-Premises Utility Services	\$ 50,000
Business Income Extension for Web Sites	\$ 50,000 / 7 days
Business Income from Dependent Properties	\$ 50,000

The following Limit of Insurance for the following Business Income Coverage is a replacement of the Limit of Insurance provided under the Property Coverage Form.

<i>Coverage</i>	<i>Limits of Insurance</i>
Extended Business Income	120 Days

The following changes apply only if the Special Property Coverage Form applies to this policy. The Limits of Insurance for the following Additional Coverages are a replacement of the limit of insurance provided under the Special Property Coverage form:

<i>Coverage</i>	<i>Limits of Insurance</i>
Precious Metal Theft Payment Changes	\$ 25,000
Theft of Patterns, Dies, Molds and Forms	Up to Business Personal Property Limit

The following changes apply to Loss Payment Conditions:

<i>Coverage</i>	<i>Limits of Insurance</i>
Valuation Changes	
Commodity Stock	Included
"Finished Stock"	Included
Mercantile Stock - Sold	Included

Your Spectrum policy contains classes and coverages that may be subject to an annual audit. Your quoted premium may change based on the actual annual audit records provided to us.

DISCLOSURE PURSUANT TO TERRORISM RISK INSURANCE ACT

Terrorism Coverage and Premium

In accordance with the federal Terrorism Risk Insurance Act (as amended "TRIA"), we are required to make coverage available under your policy for "certified acts of terrorism." The actual coverage provided by your policy(ies) will be limited by the terms, conditions, exclusions, limits, and other provisions of your policy(ies), as well as any applicable rules of law.

The portion of your premium attributable to this terrorism coverage is shown in the premium section(s) of this quote proposal or binder.

Definition of Certified Act of Terrorism

A "certified act of terrorism" means an act that is certified by the Secretary of the Treasury, in accordance with the provisions of TRIA, to be an act of terrorism under TRIA. The criteria contained in TRIA for a "certified act of terrorism" include the following:

1. The act results in insured losses in excess of \$5 million in the aggregate, attributable to all types of insurance subject to TRIA; and
2. The act results in damage within the United States, or outside the United States in the case of certain air carriers or vessels or the premises of an United States mission; and
3. The act is a violent act or an act that is dangerous to human life, property or infrastructure and is committed by an individual or individuals acting as part of an effort to coerce the civilian population of the United States or to influence the policy or affect the conduct of the United States Government by coercion.

Disclosure of Federal Share of Terrorism Losses under TRIA

The United States Department of the Treasury will reimburse insurers for 85% of insured losses that exceed the applicable insurer deductible. Effective January 1, 2016, this percentage will be reduced to 84%, effective January 1, 2017 to 83%, effective January 1, 2018 to 82%, effective January 1, 2019 to 81%, and effective January 1, 2020 to 80%.

However, if aggregate industry insured losses under TRIA exceed \$100 Billion in a calendar year, the Treasury shall not make any payment for any portion of the amount of such losses that exceeds \$100 billion. The United States government has not charged any premium for their participation in covering terrorism losses.

Cap on Insurer Liability for Terrorism Losses

If aggregate industry insured losses attributable to "certified acts of terrorism" under TRIA exceed \$100 Billion in a calendar year, and we have met, or will meet, our insurer deductible under TRIA, we shall not be liable for the payment of any portion of the amount of such losses that exceed \$100 billion. In such case, your coverage for terrorism losses may be reduced on a pro-rata basis in accordance with procedures established by the Treasury, based on its estimates of aggregate industry losses and our estimate that we will exceed our insurer deductible. In accordance with the Treasury's procedures, amounts paid for losses may be subject to further adjustments based on differences between actual losses and estimates.

Note to Producer on TRIA: The premium for terrorism coverage and the TRIA disclosures above must be provided to the insured or prospect at the time of quoting. If you are not using this quote proposal, you can use Hartford's stand-alone TRIA disclosure form for quotes and binders, which is available on the EBC or from the company.