

**AGENDA ITEM EXECUTIVE SUMMARY**

Agenda Item number: 6e

Title:

Recommendation to approve a proposal for a new class B1 liquor license including a 2:00 am late night permit for Flagship on the Fox, located at 100 S. Riverside Avenue, St. Charles

Presenter:

Police Chief James Keegan

Meeting: Government Operations Committee

Date: January 22, 2019

Proposed Cost: \$

Budgeted Amount: \$

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

This is a new liquor license request for the former Chord on Blues location, which is located on the 100 block of South Riverside Avenue. Flagship on the Fox will occupy the northern half of this business, and another business, yet to be confirmed, will be located in the southern half of the business.

*Pursuant to this item being presented at the Government Operations Committee meeting for approval; it will be brought before the Liquor Control Commission at a meeting scheduled at 4:30 p.m., the same day, January 22, 2019, to process and move it forward to this Committee. This item will then continue on to the City Council meeting scheduled on February 4, 2019, for final approval.*

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

Summary, Floor Plan, Liquor License

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

Recommendation to approve a proposal for a new class B1 liquor license including a 2:00 am late night permit for Flagship on the Fox, located at 100 S. Riverside Avenue, St. Charles

## Police Department



# Memo

Date: 1/15/2019

To: The Honorable Ray Rogina, Mayor-Liquor Commissioner

From: James Keegan, Chief of Police *J. Keegan*

Re: Background Investigation-Flagship on the Fox (Class B/2 a.m. Late Night Permit)

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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, Flagship on the Fox (C & A Management Group, LLC) has submitted an application for a new high end sports bar to be located at 100 S. Riverside Avenue. The majority owner, Steve Mayer, is originally from St. Charles and owns and operates a similar concept in Chicago. For the last 15-years, he has either owned and/or operated Chicago bars to include: Good Bar, The Stretch, Flagship and Ironside.

The site itself has been closed for many years and formerly occupied Danny's Corner Pocket and Cord on Blues. The current ownership group, Frontier Development, LLC, has opted to divide the building into at least two units and is also working on a perspective tenant to lease the southern portion of the building. An expansive remodel is planned for both the exterior façade and interior buildouts.

The site location/floor plans and the corresponding application materials were reviewed by my staff. We also reviewed their business plan and associated material that accompanied their application material. We found nothing of a derogatory nature that would preclude either the site location or the applicant(s) from moving forward with liquors sales and on-site consumption, subject to City Council approval.

Thank you in advance for your consideration in this matter.



# Memo

Date: 1/14/2019  
To: Chief James Keegan  
From: Detective David Ketelsen DK #328  
Re: Liquor License Application/ C & A Management Group LLC

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The purpose of this memo is to document the background investigation of C & A Management Group LLC and its owner/manager, Stephen A Mayer pursuant to the application for a new Class B liquor license. This would be for a business that's name would be Flagship On The Fox, which will be located at 100 S Riverside Ave, in St Charles.

## Applicant

Mayer, Stephen A  
DOB: 10/05/79  
3250 N Leavitt #1B  
Chicago, IL 60618  
312-622-2762

- Mayer currently lives at the above address, and has resided there for the past 6 years.
- On 01/10/19 I met with Stephen Mayer at 100 S Riverside Ave. The inside of the building was still under construction. In speaking with Mayer I essentially learned the following information.
- Mayer currently partially owns and helps run another sports bar establishment in Chicago named the Flagship Tavern. He is also a minority owner in another tavern in Chicago called Ironside Bar & Grill. He said that he does not have anything to do with the day to day operations of that establishment, and is in the process of selling his shares in it. This should be done by 01/12/19. I was unable to find any liquor law violations that had been documented for either of the above listed establishments. Mayer stated that he owns the majority shares in Flagship On The Fox. He will now be involved in the day to day operations of this establishment and plans on moving into The View apartment complex in St Charles soon. None of the other minority owners will be involved with any of the operations at this establishment.



- Mayer has been B.A.S.S.E.T certified since 12/14/18. He received his certification through servesafe.com. See attached copy.
- Mayer advised the menu at Flagship On The Fox will consist of traditional comfort food cuisine. See attached preliminary menu. They plan on selling beer, wine, and liquor.
- Mayer advised that he wants this to be a high class sports bar looking to attract people over 25 and families to come and enjoy sporting events on dozens of televisions. See attached business plan for details and drawings.
- He advised that the preliminary hours of business at this point would be from Monday-Sunday, 11am to 2am.
- Mayer said that he is looking to open the business in St Charles by late March of 2019.
- No other employees have been hired at this time.
- Mayer was previously fingerprinted on January 4<sup>th</sup> 2018 for this application. The results of this showed a previous arrest for a Class A Misdemeanor in September of 2001. I found this charge to be out of Normal, Illinois. I had the Normal Police Department forward me the report made on this incident. Essentially Mayer was a young student at Illinois State University where he also held a job at a local convenient store while attending school. Mayer was caught stealing a case of beer from this store without paying for it. He made restitution, served 50 hours of community service, and after 24 months on supervision the charge was dropped. I spoke with Mayer about this incident. He seemed to be regretful it ever happened and advised that his actions at that time were that of an immature college student. He said that the last 19 years have helped him mature and become a well-respected business man and hoped this incident would not be held against him.
- In checking Mayer through the New World database I found no contacts.
- I checked Mayer in TLOxp, which is a law enforcement data base. It showed him as having no open liens, judgements, or bankruptcies.
- In checking Mayer through the New World database I found no contacts.
- Mayer was provided a packet that contained the complete liquor ordinance section for the City of St Charles. He also signed the release form allowing me to complete this background.
- This concludes my background investigation. See attached application.

DK #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: 12-28-2018 ☒ New Application ☐ Renewal Application

APPLICATION CHECKLIST

Check items to confirm all are attached to this application	Applicant	Office Use Only
Application Fee	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Completed Application for all questions applicable to your business.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Copy of Lease/Proof of Ownership	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Copy of Dram Shop Insurance or a letter from insurance agent with a proposed quote.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Copy of Articles of Corporation, if applicable.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Completed B.A.S.S.E.T. (Beverage Alcohol Sellers & Servers Training) form – filled out for all employees. A copy of the B.A.S.S.E.T. certificate is <b>only</b> 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). <u>city parking lot</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Copy of Floor Plan for Establishment (Drawn to scale and <b>must</b> 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 <b>fixed objects</b> , such as pool tables, bar stools, vending/amusement machines; as well as all <b>exits</b> .	<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 checked="" 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. <u>yes, permits applied</u>	<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. <u>not yet</u>	<input 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.**

07.05.2016

**APPLICANT INFORMATION**A. Type of Business: ☐ Individual ☐ Partnership ☒ Corporation ☐ Other (explain):

B. Business Name:

C+A Management Group LLC dba Flagship on the Fox

C. Business Address:

100 South Riverside Drive

D. IL Tax ID Number:

E. Business Phone:

312-622-2762

F. Business E-mail:

Business Website:

Flagshiponthefox.com

H. Contact Person:

Stephen Mayer

I. Title:

owner

J. Phone No.:

312-622-2762

K. If Corporation, Corporation Name:

C+A Management Group LLC

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

3250 N Leavitt #1B, Chicago IL 60618

**BUSINESS ESTABLISHMENT LOCATION INFORMATION**A. Type of Establishment: ☐ Package ☐ Restaurant ☐ Tavern ☐ Hotel/Banquet/Arcade/Q-Center ☐ Other

B. Address applying for liquor license (exact street address):

1005 Riverside Dr.

C. Number of Parking Spaces:

D. Outside Dining s.f. [17.20.020-R]:

1581

E. Holding Bar s.f. [5.08.010-F]:

F. Total Building s.f.:

6432

G. Total Number of Seats:

168

H. Number of Bar Seats:

19

I. Sale Counter s.f.:

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

K. Kitchen s.f.:

712

L. Cooler s.f.:

M. Dry Storage s.f.:

N. Seating Area s.f.:

862

O. Retail/public Area s.f.:

P. Service Bar s.f. [5.08.010-O]:

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

Upscale neighborhood sports bar serving full menu. Open 11am - 2am 7 days/week. Live music for happy hours, outdoor seating and designated smoking area.

**MANAGER INFORMATION**

Full Name, include middle initial: Stephen A. Mayer Title: Owner

Full Name, include middle initial:

Title:

Birthdate:

Birthplace:

Driver's License#:

Home Phone:

Home Address:

Full Name, include middle initial:

Title:

Birthdate:

Birthplace:

Driver's License#:

Home Phone:

Home Address:



**PROPOSED FLOOR PLAN/LAYOUT OF PROPERTY****Mandatory: attach to this application a floorplan or layout of the proposed facility to include the following:****CLASS B LICENSES**

1. Every application for a Class B license, whether an initial application or a renewal application, shall have attached thereto a site drawing of the proposed licensed premises, drawn to scale showing the following (**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. If applicant is an individual or partnership, is each and every person a United States citizen (5.08.070-2)? ☐ Yes ☐ No  
Is any individual a naturalized citizen? ☐ Yes ☐ No

If yes, print name(s), date(s), and place(s) of naturalization:

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

LLC

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

13

4. Amount of merchandise that normally will be in inventory when in operation (5.08.070-5): \$ 50,000

5. Location/address and description of business to be operated under this applied for license (5.08.070-6):

100 South Riverside Drive  
upscale sports bar serving full menu, open  
11am - 2am 7 days / week.

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

7. If the premises are leased, list the names and addresses of all direct owners or owners of beneficial interests in any trusts, if premises are held in trust (5.08.070-6B):

Name of Building Owner: Riverside LLC

Address of Building Owner: 4n316 Rt. 31

Mailing Address of Building Owner (if different): St. Charles, IL 60174

Phone Number: 630-461-7075 E-mail Address: conrad@frontierdevelopmentgroup.com

Name of Building Owner:

Address of Building Owner:

Mailing Address of Building Owner (if different):

Phone Number:

E-mail Address:

Name of Building Owner:

Address of Building Owner:

Mailing Address of Building Owner (if different):

Phone Number:

E-mail Address:

8. Does the applicant currently operate, or operated in the past, any other establishment within the City of St. Charles that requires a liquor license? ☐ Yes ☒ No

If yes, please list the business name(s) and address(es):

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><b>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.</b></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><b>If yes, has a building permit been applied for?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><b>If yes, date building permit was applied for with Building &amp; Code Enforcement:</b></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><b>If yes, what was the disposition of the application? Explain as necessary:</b></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><b>List previous liquor licenses issued by any State Government or any subdivision thereof (5.08.070-9). Use additional paper if necessary.</b></p> <p><b>Government Unit:</b> City of Chicago</p> <p><b>Date:</b> 11/16/17 <b>Location, City/State:</b> Chicago, IL</p> <p><b>Special Explanations:</b> <del>Retail Food establishment Tavern</del></p> <p><b>Government Unit:</b> <del>City of Chicago</del> State of Illinois</p> <p><b>Date:</b> 10/30/17 <b>Location, City/State:</b> Chicago, IL</p> <p><b>Special Explanations:</b> State liquor license</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><b>If yes, list all reasons on a separate, signed letter accompanying this application.</b></p> <p>Has any director, officer, shareholder, or any of your managers, ever been denied liquor license from any jurisdiction? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><b>If yes, proceed to Question 15. If more space is needed, please attach a separate sheet of paper with the information.</b></p>



15.	<p><b>Complete ONLY if yes was answered to the questions above (14):</b></p> <p>Name: _____ Name of Business: _____</p> <p>Position with the Business: _____</p> <p>Date(s) of Denial: _____</p> <p>Reason(s) for Denial of License: _____</p>
16.	<p>Date of Incorporation (Illinois Corporations) (5.08.070-10): <u>10/23/18</u></p> <p>Date qualified under Illinois Business Corporation Act to transact business in Illinois (Foreign Corporation): _____</p>
17.	<p>Has the applicant and all designated managers read and do they all understand and agree not to violate any liquor laws of the United States, the State of Illinois, and any of the ordinances of the City of St. Charles in conducting business(5.08.070-11)?</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Have you, or in the case of a corporation, the local manager, or in the case of a partnership any of the partners, ever been convicted of any violation of any law pertaining to alcoholic liquor? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Have you, or in the case of a corporation the local manager, or in the case of a partnership any of the partners, ever been convicted of a felony? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Have you ever been convicted of a gambling offense? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If a partnership or corporation, include all partners and the local manager(s).)</p> <p>Will you and all your employees refuse to serve or sell alcoholic liquor to an intoxicated person or to a minor?</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
18.	<p><b>Mandatory:</b> 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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, date(s): _____</p>
19.	<p><b>Mandatory:</b> Has the applicant attached proof of Dram Shop Insurance to this application or already furnished it to the City of St. Charles (5.08.060)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If already furnished, date of delivery: <u>11/30/18</u></p> <p><b>NOTE:</b> Insurance must be issued from May 1, 20XX – April 30, 20XX in accordance with City code 5.08.060. Request a prorated rate from your insurance company if you are applying for a new license during this timeframe.</p>

20.

**Mandatory:** Is the premises within 100 feet of any real property of any church; school; hospital; home for the aged or indigent persons; home for veterans, their wives/husbands, or children; and/or any military or naval station **(5.08.230)**?

☐ Yes ☒ No

**COMMENTS/ADDITIONAL INFORMATION**

**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) Stephen (Last) Mayer (Middle) A. Manager

Date of Course: 12/14/18 Place Course was Taken: ServeSafe.com

Certificate Granted: 5A-0088394 Expiration: 12/14/21

**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:

**Name:**

(First) (Last) (Middle) Manager

Home Street Address:

City, State, Zip:

Date of Course:

Place Course was Taken:

Birthdate:

Certificate Granted:

Expiration:

**NEW MANAGEMENT REQUIREMENTS**

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

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

**APPLICATION FOR LATE NIGHT PERMIT**

SUPPLEMENTAL TO LIQUOR LICENSE FOR CLASS B/C

To: St. Charles Liquor Control Commission

Date:

12/28/18

I now possess or have applied for a liquor license Class

B - Late Night 2Am

Applicant's Name:

Stephen H. Mayer

Name of Business:

Flagship on the Fox

Business Address:

100 S. Riverside Drive

Business Phone:

312-622-2762

SUPPLEMENTAL PERMIT APPLIED FOR

**Payment of Late Night Permit fee is required at the time the permit is issued.**☐ 1:00 a.m. Late Night Permit – fee of \$800.00☒ 2:00 a.m. Late Night Permit – fee of \$2,300.00**NOTE:** Other permits that may be available upon request include:

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

**SIGNATURES**

Applicant's Signature

☐ Liquor Commissioner hereby directs City Clerk to issue permit indicated above.\_\_\_\_\_  
Liquor Commissioner's Signature\_\_\_\_\_  
Date



**ADDENDUM TO RETAIL LIQUOR LICENSE APPLICATION****To be completed by the City of St. Charles Police Department**

Date:

Name of Applicant:

Name of Business:

Address of Business:

Ward Number:

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

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

1.	Date on which applicant will begin selling retail alcoholic liquors at this location:
2.	Is the location within 100 feet of any church; school; hospital; home for the aged or indigent persons; home for veterans, their wives/husbands or children; or any military or naval station? <input type="checkbox"/> Yes <input type="checkbox"/> No
3.	<p>If the answer to question 2 is yes, answer the following: Is applicant's place of business a hotel offering restaurant service, a regularly organized club, a restaurant, a food shop, or other place where the sale of alcoholic liquors is not the principal business? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, answer a, b and c:</p> <ul style="list-style-type: none"><li>a. State the kind of such business:</li><li>b. Give date on which applicant began the kind of business named at this location:</li><li>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?</li></ul> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
4.	<p>If premises for which an alcoholic liquor license is herein applied for are within 100 feet of a church, have such premises been licensed for the sale of alcoholic liquor at retail prior to the establishment of such church? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, have the premises been continuously operated and licensed for the sale of alcoholic liquor at retail since the original alcoholic liquor license was issued therefore? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>
5.	Is the place for which the alcoholic liquor license is sought a dwelling house, flat, or apartment used for residential purposes? <input type="checkbox"/> Yes <input type="checkbox"/> No
6.	Is there any access leading from premises to any other portion of the same building or structure used for dwelling or lodging purposes and which is permitted to be used or kept accessible for use by the public? (Connection between premises and such other portion of building or structure as is used only by the applicant, his/her family and personal guests not prohibited.) <input type="checkbox"/> Yes <input type="checkbox"/> No
7.	If applicant conducts or will conduct in the same place any other class of business in addition to that of City Retailer of Alcoholic Liquor, state the kind and nature of such business: <input type="checkbox"/> Yes <input type="checkbox"/> No



8.	Are all rooms where liquor will be sold for consumption on the premises continuously lighted during business hours by natural light or artificial white light so that all parts of the interior shall be clearly visible? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
9.	Are premises located in any building belonging to or under the control of the State of Illinois or any other political subdivision thereof, such as county, city, etc.? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
10.	Are the premises for which license is herein applied for a store or place of business where the majority of customers are minors of school age or where the principal business transacted consists of school books, school supplies, food or drinks for such minors? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
11.	It is required by the City of St. Charles that all employees undergo BASSET training. Provide a copy of the certificate of training completion for each manager. All certificates for managers have been submitted: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
12.	From your observation and investigation, has applicant—to the best of your knowledge—truthfully answered all questions? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If no, state exceptions:
13.	Have all persons named in this application been fingerprinted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Fingerprinted by: <u>SCPD</u> Date: <u>1/04/19</u>
14.	Other necessary data:

# SIGNATURES

# ENDORSEMENTS AND APPROVALS

# INVESTIGATING OFFICER

D. Kellison

Investigating Officer Signature

328 / Detective

Badge Number & Rank

# ENDORSEMENT OF THE CHIEF OF POLICE

Recommend Issuing Liquor License:

☐

Yes

☐

No

Signature Of Chief of Police

Date



FLA105C

OP ID: NK

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

01/02/2019

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).

<b>PRODUCER</b> Serpe Insurance Agency 2538 N. Lincoln Avenue Chicago, IL 60614 Serpe Insurance Agency	<b>CONTACT NAME:</b>	
	<b>PHONE (A/C, No, Ext):</b>	<b>FAX (A/C, No):</b>
<b>INSURED</b> C & A Management Group LLC Flagship On The Fox 100 S Riverside Street St. Charles, IL 60174	<b>E-MAIL ADDRESS:</b>	
	<b>INSURER(S) AFFORDING COVERAGE</b>	
	<b>INSURER A : Badger Mutual Insurance</b>	
	<b>NAIC # 13420</b>	
	<b>INSURER B :</b>	
	<b>INSURER C :</b>	
<b>INSURER D :</b>		
<b>INSURER E :</b>		
<b>INSURER F :</b>		

## COVERAGES

## CERTIFICATE NUMBER:

## REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			455228	12/01/2018	12/01/2019	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 1,000,000
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			455228	12/01/2018	12/01/2019	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$			455228	12/01/2018	12/01/2019	EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$
A	<input checked="" type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y / N If yes, describe under DESCRIPTION OF OPERATIONS below		N / A	455228	12/01/2018	12/01/2019	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000
A	<input checked="" type="checkbox"/> LIQUOR LIABILITY			455228	12/01/2018	12/01/2019	1,000,000 CSL

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

Additional Insured: City of St. Charles

## CERTIFICATE HOLDER

## CANCELLATION

<b>CITSCHA</b>  City of St. Charles 2 East Main Street St Charles, IL 60174	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 

# BASSET Card



December 19, 2018



Letter ID: L0351060432

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
STEPHEN MAYER  
3250 N LEAVITT  
CHICAGO IL 60618

License No.: 5A-0088394  
Expiration Date: 12/14/2021  
License Type: Basset Card

**Your "Student ID number" is: 16522167**

**Your "Trainer's ID number" is: 5A-0088394**

**Your BASSET Card is located BELOW**

**DO NOT throw away this letter as you will need your  
"Student ID number" directly above to re-print your card.**

**IMPORTANT:**

To re-print your card, visit the Illinois Liquor Control Commission website at [ILCC.illinois.gov](http://ILCC.illinois.gov)  
(click on the RESOURCES tab to access the "BASSET Card Lookup" page).

<p><b>ILLINOIS LIQUOR CONTROL COMMISSION</b> 100 W. Randolph Street, Suite 7-801 - Chicago, IL 60601 <b>BEVERAGE ALCOHOL SELLERS AND SERVERS EDUCATION AND TRAINING [BASSET] CARD</b> <b>Date of Certification: 12/14/2018 Expires: 12/14/2021</b> Trainer's IL Liquor License Number: 5A-0088394</p> <p><b>**Card is not transferrable**</b></p>
---



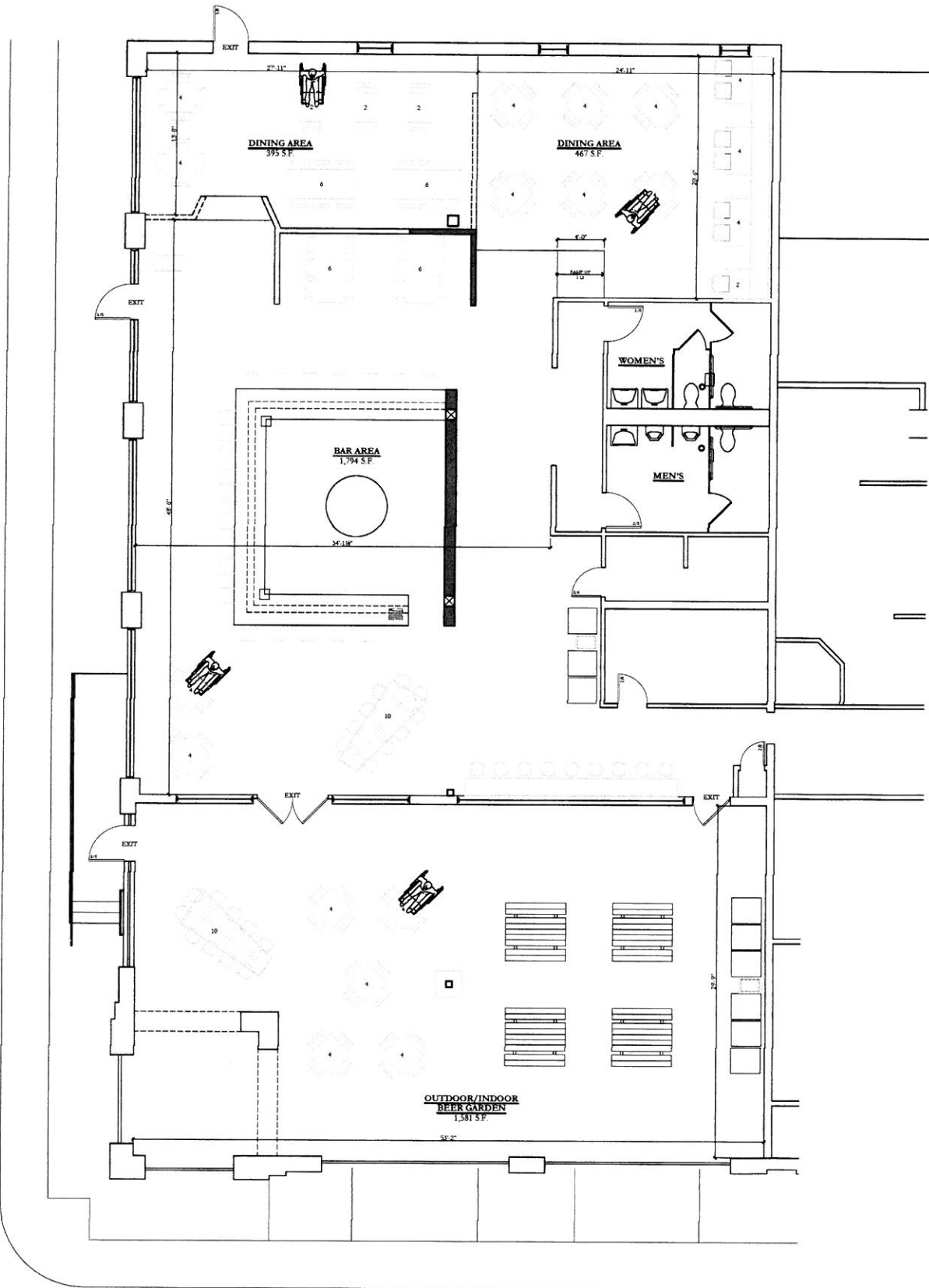
**CERTIFIED FOODSERVICE MANAGER**



**HEALTHY  
CHICAGO**  
CHICAGO DEPARTMENT OF PUBLIC HEALTH

**Steve Mayer**

Cert. No.: **MX1-15165** Exam. Date: **4/9/2016** Expiration: **4/9/2021**



**SEATING PLAN:**  
SCALE: 1/8" = 1'-0"

**TOTAL ESTIMATED SEATING**

168 SEATS  
ADA REQUIRED: 8.4 AT 5%  
ADA PROVIDED: 14

PAGE:

**1**  
of: 1

Date  
12.28.18

Project  
44.18

Revision  
1

Drawing #  
ASK-1.0

**FLAGSHIP ON THE FOX**

100 S. RIVERSIDE DRIVE  
ST. CHARLES, ILLINOIS



**MAXHEIM**  
4009 THORNAPPLE RD.  
ST. CHARLES, ILLINOIS 60174  
630.351.8315  
MaxheimAndAssociates.com



From: Suzanne Hensley shensley@vmware.com

Date: Dec 28, 2018 at 1:43:00 PM

To: Steve Mayer stephenamayer@gmail.com

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Flagship on the Fox Liquor Application Business Plan

Hours of Operation: Monday - Sunday, 11am-2am

Copy of Menu attached

Live music will be played

Outdoor seating and designated smoking areas available

# FLAGSHIP ON THE FOX

Business Plan

October 2018

Prepared by

Stephen Mayer

### **COMPANY DESCRIPTION**

"Flagship on the Fox" will be a high end sports bar located in St Charles. Our focus will be on sporting events, food, nightlife, and the community. Our target demographic will be 25 years old-?, and and creating an environment in nightlife that St Charles does not currently have.

### **Operator Bio**

Steve Mayer has been in the Chicago bar scene for the last 15 years, owning and operating 4 separate bars (Goodbar, The Stretch, Flagship, and Ironside). His vast experience and knowledge in the industry as helped these bars reached their highest level of sales, while keeping low than industry standard overhead. Steve is a sports fanatic and believes that St Charles is missing a true sports bar, his mission is to bring that to the area. Originally from St Charles, Steve will be extremely excited to call it home once again.

### **Ownership and Investment Opportunity**

"Flagship on the Fox" is a privately owned LLC in the state of Illinois. The company is seeking outside to raise \$450,000 for remodel, start up capital, and operating expenses. Investments are broken down into shares for \$25,000, with each share representing 2% ownership in the company.

### Projected 3 Year Revenue

**Flagship on the Fox**  
**Forecasted Profit & Loss Statement**  
**For the Years Ended 2019, 2020 and 2021**

	12/31/2019		12/31/2020		12/31/2021	
	Amount	%	Amount	%	Amount	%
Revenues:						
Sales	\$ 1,690,000	100.0%	\$ 1,774,500	100.0%	\$ 1,863,225	100.0%
Cost of Goods Sold:	-		-		-	
Purchases	\$ 608,400	36.0%	\$ 638,820	36.0%	\$ 670,761	36.0%
Gross Margin:	\$ 1,081,600	64.0%	\$ 1,135,680	64.0%	\$ 1,192,464	64.0%
Operating Expenses:	-		-		-	
Salaries & Wages	\$ 169,000	10.0%	\$ 177,450	10.0%	\$ 186,323	10.0%
Rent	\$ 187,020	11.1%	\$ 190,760	10.8%	\$ 194,575	10.4%
Advertising	\$ 42,250	2.5%	\$ 44,363	2.5%	\$ 46,581	2.5%
Insurance	\$ 25,350	1.5%	\$ 26,618	1.5%	\$ 27,948	1.5%
Outside Services	\$ 202,800	12.0%	\$ 212,940	12.0%	\$ 223,587	12.0%
Bar Supplies	\$ 42,250	2.5%	\$ 44,363	2.5%	\$ 46,581	2.5%
Utilities	\$ 59,150	3.5%	\$ 62,108	3.5%	\$ 65,213	3.5%
Merchant Account Fees	\$ 33,800	2.0%	\$ 35,490	2.0%	\$ 37,265	2.0%
General Operating Expenses	\$ 25,350	1.5%	\$ 26,618	1.5%	\$ 27,948	1.5%
Total Operating Expenses:	\$ 786,970	46.6%	\$ 820,708	46.3%	\$ 856,020	45.9%
Net Operating Profit:	\$ 294,630	17.4%	\$ 314,973	17.7%	\$ 336,444	18.1%

**\*\* Notes \*\***

Each year assumes an increase in sales and associated COGS of 5% from the prior year.

**Projected Budget**

1st/Last Month Rent Security	\$46,755	
Construction/Remode		
I	\$175,000	
Liquor and Food Inventory	\$25,000	
Audio/Visual/Security/Cameras	\$70,000	
Marketing	\$5,000	
Attorney Fees	\$5,000	
Permit/Additional Licenses	\$5,000	
Website	\$5,000	
Stools	\$10,000	
Kitchen Equipment	\$35,000	
Menu Design	\$5,000	
Architect	\$10,000	
POS	\$10,000	
Staff Payroll	\$15,000	
Bar Supplies	\$10,000	
Cushion	\$25,000	
Misc	\$20,000	
Opening Operating Budget	\$40,000	
<hr/>		
	Minus	\$87,000 TI
<b>Total \$ To Raise</b>		<b>\$439,755</b>



### **Goals**

- Increase Profitability, bringing significant return to investors/owners
- Increase brand awareness through cost effective marketing strategies and providing an unparalleled customer experience
- Provide a safe working environment for all staff

### **Objectives**

1. Create a night life/dining experience unique to the St Charles.  
Flagship on the Fox will bring its own feel to area, offering more tvs for sports, separate audio sections to play multiple game audios/music, an amazing patio (usable year round), great food, and amazing customer service.
2. Be a leader in the community and operate in a manner that reflects our values as owners. We will be working with the developmentally disabled community for employment opportunities, hosting charity happy hours, and giving back to St. Charles
3. Increase profits. Constantly looking to reduce operating costs, labor costs, food waste, and improve efficiency.

### **Keys to Success**

- Our menu will become a staple in the Tri-Cities area. Approachable, delicious, and comforting
- Our service will be outstanding
- Constantly attacking new areas for revenue ie..... brunch, corporate events, private parties, happy hour, trivia night, lunch specials, food delivery.
- Staff will be properly trained, knowledgeable of the menu, and go out of their way to ensure customers feel that Flagship is their "Cheers"
- Ownership involvement and help

### **Additional Sources of Revenue**

Not factored into 3 year financial projections

- Gambling machines
- Online Delivery
- Busniess generated from the crowds at The Arcada





## APPETIZERS

### BAJA FISH TACOS \$9

Three corn tortillas filled with beer battered spicy tilapia, baja slaw, avocado lime crema, pico de gallo, green onions and cilantro.

### WAFFLE CHICKEN TENDERS \$9

Panko crusted chicken tenders, savory cheddar cheese and quinoa waffles, served with sriracha infused maple syrup.

### SPICY POPCORN SHRIMP \$12

Half pound of bite-sized shrimp, lightly breaded, deep fried and served with buffalo style hot sauce and Dijon ranch dressing.

### CALAMARI \$11

Grilled: marinated in olive oil and garlic then topped with balsamic vinaigrette and cherry peppers. Fried: seasoned and fried in panko bread crumbs. Both served with marinara and ranch dipping sauces.

### NACHOS \$10

Fresh tortilla chips topped with spicy green chili with pork, Chihuahua cheese, sour cream, homemade guacamole, cilantro and green onions. Substitute chicken for \$2 or steak for \$3.

### WINGS \$10

Eight meaty seasoned chicken wings, tossed in your choice of Maker's Mark-Chipotle BBQ or spicy buffalo sauce. Served with celery and ranch.

### QUESADILLAS \$8

Grilled flour tortillas stuffed with melted Chihuahua cheese, topped with guacamole, sour cream and pico de gallo. Add tequila-lime chicken or spicy green chili with pork for \$2. Add steak for \$3.

### SLIDERS \$11 (CHOOSE 3)

- Kobe burger, bourbon bacon jam, white cheddar, lettuce, tomato (cooked medium rare to medium)
- Pulled pork, Maker's Mark-chipotle BBQ, spicy coleslaw
- Pepper crusted hanger steak, Brie cheese, sautéed mushrooms, brandy-peppercorn sauce.

### MAC N' CHEESE \$8

Cavatappi pasta baked in a creamy four cheese sauce. Add truffle oil or bacon for \$2. Add grilled buffalo chicken for \$3.

### POUTINE \$9

Seasoned fresh cut fries topped with spicy green chili with pork and cheese curds.

### ROASTED RED PEPPER HUMMUS \$9

Smooth housemade red pepper hummus served with toasted naan bread and fresh cut veggies.

## SOUPS

CUP \$4 | BOWL \$6

Ask about our soup of the day.

### CREAM OF POBLANO

Creamy roasted poblano pepper with garlic, topped with cilantro and crispy tortilla strips. Chef's Specialty!

### FRENCH ONION

Caramelized onions in a beef broth with garlic croutons and melted Swiss cheese.

### TOMATO FENNEL

Homemade cream of tomato with a hint of fennel and sour cream.

### SPICY GREEN CHILI WITH PORK

Roasted green chiles, tomatillos, onions, tomato, garlic, braised pork, spices and herbs.

## SALADS & WRAPS

All wraps are served with your choice of a side.

### BBQ CHICKEN SALAD OR WRAP \$11

Grilled chicken breast basted in our Maker's Mark-chipotle BBQ sauce, on garden fresh greens, tomato, cucumber, avocado, Applewood smoked bacon, smoked Gouda cheese, crispy onion strings, Dijon ranch dressing.

### BUFFALO CHICKEN SALAD OR WRAP \$11

Grilled chicken breast basted in our homemade buffalo sauce, garden fresh mixed greens, Applewood smoked bacon, carrot, celery, tomato, bleu cheese crumbles, Dijon ranch dressing and crispy tortilla strips.

### ULTIMATE CHOPPED SALAD OR WRAP \$11

Romaine and Iceberg lettuce, avocado, tomatoes, cucumbers, Applewood smoked bacon, diced grilled chicken, bleu cheese crumbles, Acini Pasta, Kalamata olives, and homemade creamy Italian dressing.

### TOMATO EGGPLANT SALAD \$10

Fried eggplant, beefsteak tomatoes, arugula, and fresh mozzarella stacked and drizzled with sweet balsamic glaze.

Dressings: Dijon ranch, creamy Italian, bleu cheese, red wine vinaigrette



Flagship policy requires all tables to order on one tab. Please visit [Flagshipchicago.com](http://Flagshipchicago.com) for table reservations, sports team sponsorships, and private parties

[f/FlagshipTavernGrill](#)

[t/FlagshipChicago](#)

Please inform your server of any allergies or dietary restrictions that you may have. The Illinois Department of Public Health advises that eating raw or undercooked meat, poultry, eggs, or seafood poses a health risk to everyone, but especially to the elderly, young children under age 4, pregnant women, and other highly susceptible individuals with compromised immune systems





## SANDWICHES

All sandwiches are served with your choice of a side.

### GRILLED THREE CHEESE \$10

Rustic sourdough bread with layers of melted Swiss, American, and white Cheddar cheese, served with a cup of tomato fennel soup.

### THREE LITTLE PIGS \$12

Pulled pork, black forest ham, Applewood smoked bacon, caramelized onions, Carolina BBQ sauce and roasted garlic spread on a brioche bun.

### PEPPER CRUSTED HANGER STEAK \$12

Cracked pepper crusted grilled hanger steak, melted Brie cheese, sautéed mushrooms, brandy peppercorn sauce, served on a French baguette.

### FLAGSHIP CLUB \$11

Classic club, triple stacked with grilled chicken breast, Black Forest ham, gribenes, lettuce, tomato, Swiss and sharp Cheddar cheese, tarragon mayo, served on toasted egg bread.

### GRILLED BBQ SALMON \$12

Grilled salmon fillet, basted with Asian BBQ sauce, spicy slaw, crispy onions, served on a brioche bun.

### GRILLED CHICKEN \$11

Herb marinated grilled chicken breast, Applewood smoked bacon, avocado, lettuce, tomato, white Cheddar cheese, citrus mayo, served on a potato bun. Try it with the chicken tossed in BBQ or buffalo style hot sauce.

### MILANESE CHICKEN \$11

Panko breaded chicken breast with prosciutto, mozzarella, arugula, pepper Jam, roasted garlic tomato spread on a brioche bun.

### CUBANO \$12

Slow roasted pork, black forest ham, Swiss cheese, spicy mustard aioli, pickles, and scrambled egg pressed in a crusty roll.

## SIDES

FRESH CUT FRIES \$4

SWEET POTATO FRIES \$4

TATER TOTS \$4

WAFFLE FRIES \$4

SIDE SALAD \$4

SPICY COLESLAW \$4

TRUFFLE FRIES \$5

MAC N' CHEESE \$4

CHARRED BRUSSEL SPROUTS \$5

## BURGERS

Our 8 oz. burgers are a special blend of beef ground fresh daily.

All burgers are served with a kosher dill pickle and your choice of a side. Cut the Carbs: any burger can be served open faced or on a bed of spring greens.

### FLAGSHIP \$13

Applewood smoked bacon white Cheddar cheese, avocado, crispy onion strings, lettuce, tomato, mayo, on toasted old fashioned bun.

### SOUTHWEST TURKEY BURGER \$12

Adobo turkey patty with Chihuahua cheese, pineapple pico de galo, avocado, lettuce, crispy tortilla strips, jalapeno aioli, served on jalapeno ciabatta bread.

### GORGONZOLA PEAR \$12

Merlot poached pears, Gorgonzola cheese, caramelized onions, Applewood smoked bacon and walnut aioli, served on a brioche bun.

### MAC N' CHEESE \$12

Creamy four cheese Mac N' Cheese, Cheddar cheese, Applewood smoked bacon, lettuce, tomato, on a toasted old fashioned bun.

### VEGGIE \$11

Homemade veggie burger with chickpeas, lentils, brown rice, mushrooms, black beans, carrots, beets, topped with lettuce, tomato, avocado and chipotle mayo on a whole grain bun.

### MERKT'S CHEDDAR BURGER \$12

Merkt's cheddar cheese spread, balsamic charred red onions, Applewood smoked bacon, lettuce and tomato, on toasted old fashioned bun.

### BYO BURGER \$11

Lettuce, tomato, red onion on toasted old fashioned bun. Add your choice of cheese: Swiss, sharp Cheddar, white Cheddar, smoked Gouda, American, Gorgonzola, Parmesan, Brie, Feta, Merkt's Cheddar cheese.

Add \$1 for fried egg, crispy onion strings, caramelized onions, or sauteed mushrooms. Add \$2 for Applewood smoked bacon or avocado.

## DESSERT

### ROCKY ROAD BROWNIE \$7

Double layered dense chocolate brownie with toasted marshmallows, covered in a chocolate ganache and topped with vanilla ice cream.

### FUNNEL FRIES \$6

Warm funnel cake sticks dusted with powdered sugar and served with dips. Choose Two: chocolate mousse, salted caramel, banana cinnamon puree or berry marmalade.

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