

20 13

FIRST/SECOND CLASS LIQUOR LICENSE AND TOBACCO APPLICATION  
LICENSE YEAR IS MAY 1<sup>ST</sup> THROUGH APRIL 30<sup>TH</sup> OF THE FOLLOWING YEAR

Made Inn Vermont @204, LLC

Print Full Name of Person, Partnership, Corporation, Club or LLC

Doing Business As - Trade Name

204 S. Willard Street

Street and street number of premises covered by this application

Burlington, VT 05401

Town or City & Zip Code

802-399-2788

Telephone Number

Mailing Address (if different from above)

Email address MIV@madeinnvermont.com

\* recommended for approval  
C 5/21/13 1c mty 20

all standard conditions

contingent upon Fire Marshal approval

Please circle appropriate categories

FIRST CLASS SECOND CLASS TOBACCO

Restaurant

Hotel

Cabaret

Club

Commercial Kitchen (a Liquor Control Commercial Caterer's License is needed with this license)

FEES:

FIRST CLASS LICENSE - \$100.00 to DLC and \$100.00 to Town/City

SECOND CLASS LICENSE- \$50.00 to DLC and \$50.00 to Town/City

TOBACCO ONLY LICENSE- \$10.00 to Town/City only  
(there is no fee for tobacco if applying for second class)

TO THE CONTROL COMMISSIONERS OF THE TOWN/CITY OF Burlington, VERMONT

Application is hereby made for a license to sell malt and vinous beverages under and in accordance with Title 7, Vermont Statutes Annotated, as amended, and certify that all statements, information and answers to questions herein contained are true; and in consideration of such license being granted do promise and agree to comply with all local and state laws; and to comply with all regulations made and promulgated by the Liquor Control Board. Upon hearing, the Liquor Control Board may, in its discretion, suspend or revoke such license whenever it may determine that the law or any regulations of the Liquor Control Board have been violated, or that any statement, information or answers herein contained are false.

MISREPRESENTATION OF A MATERIAL FACT ON ANY LICENSE APPLICATION SHALL BE GROUNDS FOR SUSPENSION OR REVOCATION OF THE LICENSE, AFTER NOTICE AND HEARING.

If this premise was previously licensed, please indicate name \_\_\_\_\_

I/we are applying as: (please circle one)

INDIVIDUAL

PARTNERSHIP

LIMITED LIABILITY COMPANY CORPORATION

Please fill in name and address of individual, partners, directors or members.

LEGAL NAME

STREET/CITY/STATE

Linda Wolf 204 S. Willard Street Burlington, VT 05401

Are all of the above citizens of the UNITED STATES?  Yes  No  
(Note: Resident Alien is not considered a U.S. Citizen)

If naturalized citizen, please complete the following:

Name

Court where naturalized (City/State/Zip)

Date

pd ch #162  
\$145.00  
4/22/12

**CORPORATE INFORMATION:**

If you have checked the box marked CORPORATION, please fill out this information for stockholders (attach sheet if necessary).

LEGAL NAME

STREET/CITY/STATE

Linda Wolf (managing member) 204 S. Willard St. Burlington, VT 05401

Date of incorporation 2/12/13

Is corporate charter now valid? yes

Corporate Federal Identification Number 46-2092501

Have you registered your corporation and/or trade name with the Town/City Clerk? yes and/or Secretary of State? yes (as required by VSA Title 11 § 1621, 1623 & 1625).

**ALL APPLICANTS**

HAVE ANY OF THE APPLICANTS EVER BEEN CONVICTED OR PLED GUILTY TO ANY CRIMINAL OR MOTOR VEHICLE OFFENSE IN ANY COURT OF LAW (INCLUDING TRAFFIC TICKETS) AT ANY TIME?

YES X NO

If yes, please complete the following information: (attached sheet if necessary)

Name	Court/Traffic Bureau	Offense	Date

Do any of the applicants hold any elective or appointive state, county, city, village/town office in Vermont? (See VSA, T. 7, Ch. 9, §223) YES  NO  If yes, please complete the following information:

Name	Office	Jurisdiction

Please give name, title and date attended of manager, director, partner or individual who has attended a Liquor Control Licensee Education Seminar, as required by Education Regulation No. 3:

NAME: LINDA WOLF  
TITLE: MANAGING MEMBER  
DATE: SCHEDULED FOR 4/17/13

(If you have not attended an Education Seminar prior to making application, please visit [www.liquorcontrol.vermont.gov](http://www.liquorcontrol.vermont.gov) and click on Seminar Schedule for a list of Seminars in your area)

**FOR ALL APPLICANTS: DESCRIPTION /LOCATION OF PREMISES (Section 4)**

Description of the premises to be licensed: bed and breakfast

Does applicant own the premises described? yes If not owned, does applicant lease the premises? \_\_\_\_\_

If leased, name and address of lessor who holds title to property: \_\_\_\_\_

Are you making this application for the benefit of any other party? No

**FIRST CLASS APPLICANTS ONLY:** No first class license may be issued without the following information.

HEALTH LICENSE #: Food \_\_\_\_\_ Lodging 15265 (if licensed as a Hotel)

VERMONT TAX DEPARTMENT: Meals & Rooms Certificate/Business Account # 440-462092501F-01

Business is devoted primarily to: (Circle one)

FOOD (restaurant) ENTERTAINMENT (cabaret)  HOTEL CLUB COMMERCIAL CATERING

If you are considering Outside Consumption service on decks, porches, cabanas, etc. you must complete an Outside Consumption Permit. This form can be found on our website at [www.liquorcontrol.vermont.gov](http://www.liquorcontrol.vermont.gov) and then click on licensing and then applications.

**CABARET APPLICANTS ONLY:**

Applicant hereby certifies that the sale of food shall be less in amount or volume than the sales of alcoholic beverages and the receipts from entertainment and dancing; if at any time this should not be the case, the applicant/licensee shall immediately notify the Department of Liquor Control of this fact.

Signature of Individual, Partner, authorized agent of Corporation or LLC member

ALL APPLICANTS MUST COMPLETE AND SIGN BELOW

The applicant(s) understands and agrees that the Liquor Control Board may obtain criminal history record information from State and Federal repositories prior to acting on this application.

I/We hereby certify, under pains and penalties of perjury, that I/We are in good standing with respect to or in full compliance with a plan approved by the Commissioner of Taxes to pay any and all taxes due the State of Vermont as of the date of this application. (VSA, Title 32, §3113).

In accordance with 21 VSA, §1378 (b) I/We certify, under pains and penalties of perjury, that I/We are in good standing with respect to or in full compliance with a plan to pay any and all contributions or payments in lieu of contributions due to the Department of Employment and Training.

If applicant is applying as an individual: I hereby certify that I/We are not under an obligation to pay child support or that I/We are in good standing with respect to child support or am in full compliance with a plan to pay any and all child support payable under a support order. (VSA, Title 15, §795).

Dated at Burlington in the County of Chittenden and State of Vermont, this 5th day of April, 20 13.

Corporations/Clubs: Signature of Authorized Agent Individuals/Partners: (All partners must sign)

*Carole Wong*

\_\_\_\_\_

Managing Member  
(Title)

\_\_\_\_\_

NOTICE: After local action, all new applications are investigated by the Enforcement and Licensing Division prior to approval/disapproval of the license by the Liquor Control Board. This process can take anywhere from two weeks to six weeks to complete once the application has reached Liquor Control.

TOWN/CITY APPROVAL/DISAPPROVAL

Upon being satisfied that the conditions precedent to the granting of this license as provided in Title 7 of the Vermont Statutes Annotated, as amended, have been fully met by the applicant, the commissioners will endorse their recommendation on the back of the applications and transmit both copies to the Liquor Control Board for suitable action thereon, before any license may be granted. For the information of the Liquor Control Board, all applications shall carry the signature of each individual commissioner registering either approval or disapproval. Lease or title must be recorded in town or city before issuance of license.

\_\_\_\_\_, Vermont, \_\_\_\_\_  
Town/City Date

APPROVED

DISAPPROVED

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Approved/Disapproved by Board of Control Commissioners of the City or Town (circle one) of \_\_\_\_\_

Total Membership \_\_\_\_\_ members present

Attest, \_\_\_\_\_  
City or Town Clerk

TOWN OR CITY CLERK SHALL MAIL ONE APPLICATION DIRECTLY TO THE DEPARTMENT OF LIQUOR CONTROL, 13 Green Mountain Drive, Montpelier, VT 05602. If application is disapproved, local control commissioners shall notify the applicant by letter.

No formal action taken by any agency or authority of any town board of selectmen or city board of aldermen on a first or second class application shall be considered binding except as taken or made at an open public meeting. VSA Title 1 §312.

SECTION 5111 AND 5121 OF THE INTERNAL REVENUE CODE OF 1954 REQUIRE EVERY RETAIL DEALER IN ALCOHOLIC BEVERAGES TO FILE A FORM ANNUALLY AND PAY A SPECIAL TAX IN CONNECTION WITH SUCH SALES ACTIVITY. FOR FURTHER INFORMATION, CONTACT:

THE BUREAU OF ALCOHOL, TOBACCO & FIREARMS (TTB)  
DEPARTMENT OF THE TREASURY  
550 MAIN STREET, CINCINNATI, OH 45202

(513) 684-2979



LIQUOR LICENSE

NEW APPLICANT QUESTIONNAIRE

D/B/A (Business Name) Made Inn Vermont @204, LLC

Contact person Linda Wolf Contact Phone 802-399-2788

1. Have you ever had a liquor license before? If yes, please explain.

No  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Please describe your experience serving or selling alcohol?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Are you familiar with the laws relating to the sale of alcohol in Vermont? Have you completed the training required by DLC? Have your employees? If not, what is your plan for training?

Yes. Training through DLC is scheduled.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Have you had an opportunity to meet with an inspector from the Department of Liquor Control?

Yes.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. How many employees will you have?

1-2 but I am generally always on site as host and am the main server.  
I do have one employee who has taken the bartending course as well.

6. What is/will the square footage of the public space and what is/will be your occupancy load??

Our max guest count is 8-10 if completely full. Average is 4-6.  
Public space square footage on the first floor where alcohol will be served  
is approximately 1100 sq ft.

7. What kind of precautions will you take to prevent underage sales?

As a Bed and Breakfast we have a slightly more intimate arrangement with guests and as such are aware of who is on site and being served. We will, of course, require ID from any guests we serve.

And as a note, we will not be selling alcohol as a separate fee, we plan on offering wine and beer along with snacks in the evenings to our guests only as part of their room package.

---

---

---

---

---

Please note that your application will not go before the License Subcommittee until this application has been satisfactorily completed and returned to the Clerk's Office

Madeynn VT 2024

Vermont Department of Liquor Control  
Certificate of First Class Seminar Attendance

Name (print):

KYNDRA MOORE

Signature:

*[Handwritten Signature]*  
4/25/12

Date:

Investigator's Signature:

*[Handwritten Signature]*

Certificate of First Class Seminar Attendance

Category (circle one):

Owner

Director

Partner

Manager

Employee

Corporation Name:

MADEYNN VERMONT

Business Name:

MADEYNN VERMONT

Street and Town:

304 S WELLS ST

Seminar held in:

94 PCBANS

Town/City

Education Regulation 3-B  
V.S.A. T.7 §239



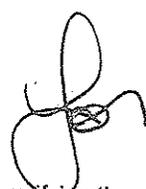
OFFICE OF THE CLERK AND TREASURER  
149 CHURCH STREET  
BURLINGTON, VT 05401

802-865-7131 TTY 802-865-7142

**Application Review**  
**First Class Liquor License - Hotel**

05/01/2013 - 04/30/2014

TO: Jeff Herwood, Clerk/Treasurer's Office  
FROM: Lori Olberg, Clerk/Treasurer's Office  
DATE: Monday, April 29, 2013  
COMPANY: Made Inn Vermont @204, LLC  
DBA NAME:  
FORMERLY:  
LOCATION: 204 South Willard Street  
PHONE: 399-2788

*Hi Jeff*  
*Please review -*  
*thanks* 

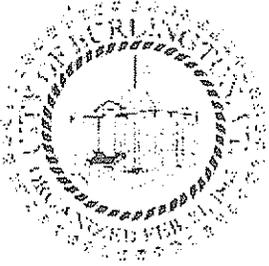
The above applicant has applied for a new/renewal license. Please complete the appropriate section below verifying the status of the applicant's taxes and return it to this office as soon as possible.

Property Taxes Overdue?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Initials _____
Property Taxes Delinquent?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Initials <u>LO</u>
Gross Receipts Tax Overdue?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Initials _____

Thank You,

\_\_\_\_\_  
Lori Olberg  
Clerk/Treasurer's Office  
City Hall

Date: Monday, April 29, 2013



OFFICE OF THE CLERK AND TREASURER  
149 CHURCH STREET  
BURLINGTON, VT 05401

802-865-7131 TTY 802-865-7142

Application Review  
First Class Liquor License - Hotel

05/01/2013 - 04/30/2014

RECEIVED  
APR 29 2013  
DEPARTMENT OF  
PLANNING & ZONING

TO: Ken Lerner, Planning & Zoning Office  
FROM: Lori Olberg, Clerk/Treasurer's Office  
DATE: Monday, April 29, 2013  
COMPANY: Made Inn Vermont @204, LLC  
DBA NAME:  
FORMERLY:  
LOCATION: 204 South Willard Street  
PHONE: 399-2788

Hi Ken  
Please review -  
Thanks - JH

Please attach any pertinent information which the City Council License Committee may require.

Please indicate:

Approved?

Yes

No

Initials

JH

Date

5/6/13

Notes:

They were given permit (conditional use) by DRB. No mention or disclosure of intent to obtain liquor license was included in application or testimony.

They should ask DRB if this is their intent - apply to amend Cond Use permit.

Thank You,

Lori Olberg  
Clerk/Treasurer's Office  
City Hall

Date: Monday, April 29, 2013

**Lori Olberg**

---

**From:** Ken Lerner  
**Sent:** Tuesday, May 07, 2013 7:01 PM  
**To:** 'Made Inn Vermont @ 204 wolf'  
**Cc:** Lori Olberg  
**Subject:** RE: Thank You, Please Accept this Letter for the Board

Hi Linda:

Good news the DRB has no objection to your proposal to provide beer & wine in the B&B as long as it is only to guests. I'm cc'ing Lori who will get the request to the License Committee as soon as she can.

Ken

**From:** Made Inn Vermont @ 204 wolf [<mailto:madeinnvermont@gmail.com>]  
**Sent:** Tuesday, May 07, 2013 11:13 AM  
**To:** Ken Lerner  
**Subject:** Re: Thank You, Please Accept this Letter for the Board

Thank you again. If they don't approve this possibility/amendment, then we will file tomorrow, for sure!

Linda Wolf

On Tue, May 7, 2013 at 11:04 AM, Ken Lerner <[KLerner@burlingtonvt.gov](mailto:KLerner@burlingtonvt.gov)> wrote:  
I will provide it to the Board. It is a public meeting and you are free to attend although it is not required as the Board will review and comment as to the procedure to follow - either acceptable proposal under your present permit or as per my conversation with Linda an amendment is needed, which must be filed by May 8th in order to be before the DRB on June 4.

-----Original Message-----

**From:** Jess [<mailto:madeinnvermont@gmail.com>]  
**Sent:** Tuesday, May 07, 2013 10:20 AM  
**To:** Ken Lerner  
**Subject:** Thank You, Please Accept this Letter for the Board

Greetings Ken,

Please accept this letter for the board; thank you for the opportunity to present this amendment letter so that we may move forward with our plan to obtain a license to serve beer/wine at our Inn. Let us know if we should schedule to attend the meeting tonight, or if there is anything else we need to do. Do we need to bring the attached document down to City Hall to be stamped, or can you handle it from here for us?

Thank you for your support, we appreciate the information regarding the Shell Station. If you have any other ideas or suggestions, please forward them to us; we appreciate your support!

Regards,

Jess

--  
**Linda Wolf,**  
**Owner/Designer**

*Have you seen our reviews on [Tripadvisor](#)?*  
*Rated "[One of the Top Five Hotels in Vermont](#)" by Richard Bangs, travel author for [The Huffington Post](#).*  
*Ranked #3, of the Top Ten North American Winter Travel Destinations by [Table & Travel Magazine](#) (p. 28)*  
*Read more about us in the [Montreal Gazette](#) and [Offmetro NY](#).*

**Made INN Vermont**  
204 S. Willard Street  
Burlington, VT 05401  
802-399-2788

