



## City Administration

**DATE:** August 16, 2022

**FROM:** Jason Tomanek, Assistant City Administrator

**ITEM:** Application for a new Class F-1 Restaurant Full Alcohol Liquor License for Tavern Bismarck, LLC. (dba) The Tavern Grill Restaurant & Bar at 1802 North 12<sup>th</sup> Street

**REQUEST:**

Introduction of and call for a public hearing on a request for a new Class F-1 Restaurant Full Alcohol Liquor License for Tavern Bismarck, LLC. (dba) The Tavern Grill Restaurant & Bar at 1802 North 12th Street.

Please place this item on the August 23, 2022, City Commission meeting agenda.

**BACKGROUND INFORMATION:**

Tavern Bismarck, LLC. (dba) The Tavern Grill Restaurant & Bar is applying for a Class F-1 Restaurant Full Alcohol Liquor License at 1802 North 12th Street.

Class F. To any restaurant applicant for a food and beverage license to sell at retail, subject to the following: Class F-1 Alcoholic beverages.

1. Gross sales of alcoholic beverages may not be greater than 45 percent of total gross sales of food and alcoholic beverages. All Class F license holders shall file with the application for license renewal a sworn statement executed by the licensee and a certified public accountant retained by the licensee certifying that gross food sales and liquor sales for the previous calendar year meet the requirements of this section. The board of city commissioners may, in its discretion, require the licensee to provide such additional proof of the licensee's compliance with this section as the commission deems necessary. All sales of alcoholic beverages by Class F licensees must be separately receipted to the customer by cash register receipt and clearly identified as sales of liquor, beer or wine on all receipts.
2. The restaurant serves, at a tabletop, food that is prepared in a kitchen with at least an indoor grill.
3. The license is for on-sale only, and off-sale is not permitted. A cessation of business at a licensed location for a period of ninety days or longer shall constitute cause to revoke such license pursuant to section 5-01-09.

4. Once a license has been established at a particular location, the license may not be transferred to another location.
5. The licensee may not sponsor or permit public dances or public dancing. Minors are allowed on the licensed premises only as permitted by NDCC Section 5-02-06.
6. Seating capacity. The minimum seating capacity required on the premises for a Class F-1 license, including seasonal seating, is: Class F-1 - 150

**RECOMMENDED CITY COMMISSION ACTION:**

Staff recommends approval of the introduction of and call for a public hearing on the request from Tavern Bismarck, LLC. (dba) The Tavern Grill Restaurant & Bar at 1802 North 12<sup>th</sup> Street, with the public hearing scheduled for Tuesday, September 13, 2022. Staff also recommends approval of the new Class F-1 Restaurant Full Alcohol Liquor License.

**STAFF CONTACT INFORMATION:**

Jason Tomanek | Assistant City Administrator | 701-355-1300 | [jtomanek@bismarcknd.gov](mailto:jtomanek@bismarcknd.gov)



# APPLICATION FOR RETAIL ALCOHOL BEVERAGE LICENSE

Phone: 701-355-1300 • Fax: 701-221-6470 • TDD 711  
221 N 5th St • Bismarck, ND 58501

Note: The \$200 application fee is due when the application is submitted.  
(Fee does not apply to renewal applications)

LAST REVISED: 6/20/2022

<b>License Type:</b>		<input type="checkbox"/> Individual	<input type="checkbox"/> Corporation	<input checked="" type="checkbox"/> Partnership
<input checked="" type="checkbox"/> New Application		<input type="checkbox"/> Renewal	<input type="checkbox"/> Transfer	<input type="checkbox"/> Relocation
A-Nationally Organized Fraternal Order or Club \$3,700.00	B-Airport Terminal Building \$650.00	C-Hotel or Motel Full Service \$3,800.00	C2-Hotel or Motel \$1,000.00	D-Sale at Retail of Alcoholic Beverages \$4,100.00
E-Sale at Retail of Beer Only \$800.00	F1-Restaurant - Alcoholic Beverages - 55/45 Split \$3,600.00	F2-Restaurant - Beer/Wine Only - 55/45 Split \$1,500.00	F3-Restaurant - Beer Only - 55/45 Split \$900.00	G-Concession Bismarck Municipal Country Club \$725.00
H-Commercial vessels on the Missouri River \$725.00	I1-Restaurant - Alcoholic Beverages - 70/30 Split \$3,450.00	I2-Restaurant - Beer and Wine Only - 70/30 Split \$1,450.00	I3-Restaurant - Beer Only - 70/30 Split \$800.00	J-Non-profit Organization Club or Establishment \$100.00
K-Beer and Wine at the Bismarck Event Center \$650.00	L-Beer & Wine at Parks & Recreation Locations \$350.00	M-Catered Retail Beer, Wine, & Liquor \$650.00	N-Domestic Winery \$800.00	O-Microbrewery \$800.00
P-Event Site \$650.00	Q-Restaurant On-Sale and Off-Sale Wine \$3,800.00	R-Commercial Airline \$75.00	S-Beer Arcade \$850.00	T-Senior Living Community \$350.00
U-Domestic Distillery \$800.00				

<b>Location Information:</b>				
Name of Partnership or Corporation: <i>Tavern Bismarck LLC</i>		Date of Incorporation: <i>1/27/2021</i>	State Business ID Number: <i>Applied for still waiting</i>	
Name of business for which license is requested (DBA): <i>The Tavern Grill Restaurant &amp; Bar</i>		If out of state corporation, is corporation registered in North Dakota? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		
Location Address: <i>1802 N 12th Street Bismarck</i>	City: <i>ND</i>	State: <i>ND</i>	Zip: <i>58501</i>	Phone Number: <i>602-238-2170</i>
Owner of Building or Premises: <i>KT Properties</i>				

<b>Correspondence Information (Where correspondence is to be sent):</b>			
Primary Contact: <i>Christine Fahey</i>	Phone Number: <i>602-238-2170</i>	Email Address: <i>Cfahey@hemisphererestaurants.com</i>	
Mailing Address: <i>983 E Hennepin Ave</i>	City: <i>Minneapolis</i>	State: <i>MN</i>	Zip: <i>55414</i>

List all officers, directors, and stockholders of corporation and percentage of ownership:

Manager's Name: <i>Timothy Cary</i>		Date of Birth: [REDACTED]	Percentage of Ownership: <i>18.75 %</i>
Driver's License Number: [REDACTED]	State Issued: <i>MN</i>	Gender: <i>Male</i>	Race: <i>White</i>
Home Address: [REDACTED]	City: <i>North Oaks</i>	State: <i>MN</i>	Zip: <i>55127</i>
Occupation:	Phone Number: [REDACTED]	Title: <i>President</i>	Email Address: [REDACTED]

Name: <i>Peter Ann</i>		Date of Birth: [REDACTED]	Percentage of Ownership: <i>12.5 %</i>
Driver's License Number: [REDACTED]	State Issued: <i>MN</i>	Gender: <i>Male</i>	Race: <i>White</i>
Home Address: [REDACTED]	City: <i>Orono</i>	State: <i>MN</i>	Zip: <i>55331</i>
Occupation:	Phone Number: [REDACTED]	Title: <i>CFO</i>	Email Address: [REDACTED]

Name: <i>Anoush Ansari</i>		Date of Birth: [REDACTED]	Percentage of Ownership: <i>13.75 %</i>
Driver's License Number: [REDACTED]	State Issued: <i>MN</i>	Gender: <i>Male</i>	Race: <i>White</i>
Home Address: [REDACTED]	City: <i>Minneapolis</i>	State: <i>MN</i>	Zip: <i>55414</i>
Occupation:	Phone Number: [REDACTED]	Title: <i>Vice President</i>	Email Address: [REDACTED]

Name: <i>Ali Alizadeh</i>		Date of Birth: [REDACTED]	Percentage of Ownership: <i>25 %</i>
Driver's License Number: [REDACTED]	State Issued: <i>MN</i>	Gender: <i>Male</i>	Race: <i>White</i>
Home Address: [REDACTED]	City: <i>North Oaks</i>	State: <i>MN</i>	Zip: <i>55127</i>
Occupation: <i>U</i>	Phone Number: [REDACTED]	Title: <i>Indirect owner</i>	Email Address: [REDACTED]

List all officers, directors, and stockholders of corporation and percentage of ownership:

Manager's Name: <i>Reza Alizadeh</i>		Date of Birth: [REDACTED]	Percentage of Ownership: <i>25%</i>
Driver's License Number: [REDACTED]	State Issued: <i>MN</i>	Gender: <i>Male</i>	Race: <i>White</i>
Home Address: [REDACTED]	City: <i>Eagan</i>	State: <i>MN</i>	Zip: <i>55121</i>
Occupation: [REDACTED]	Phone Number: [REDACTED]	Title: <i>Indirect Owner</i>	Email Address: [REDACTED]

Name:		Date of Birth:	Percentage of Ownership:
Driver's License Number:	State Issued:	Gender:	Race:
Home Address:	City:	State:	Zip:
Occupation:	Phone Number:	Title:	Email Address:

Name:		Date of Birth:	Percentage of Ownership:
Driver's License Number:	State Issued:	Gender:	Race:
Home Address:	City:	State:	Zip:
Occupation:	Phone Number:	Title:	Email Address:

Name:		Date of Birth:	Percentage of Ownership:
Driver's License Number:	State Issued:	Gender:	Race:
Home Address:	City:	State:	Zip:
Occupation:	Phone Number:	Title:	Email Address:

The undersigned states that the following information is true and correct.

1. Are manager and partner's legal residents of the United States and the State of North Dakota, and are all officers or directors legal residents of the United States? Yes  No  If not, please explain:

*NOT residents of North Dakota but of Minnesota*

2. Have any of the persons listed above been convicted of any crime within the past five years? Yes  No   
If yes, list all convictions and the dates, locations and sentence of disposition of each:

3. Does the building meet all state and local sanitation and safety requirements? Yes  No

4. Has applicant, or any of the persons listed above, within the past five years had any license to engage in sale of alcoholic beverages revoked or suspended? Yes  No  If yes, please give details:

5. If a new application, has applicant or any of the persons listed above, engaged in the sale or transportation of alcoholic beverages previously? Yes  No  If yes, please give details:

6. Has applicant, or any of the persons listed above, within the past five years, had an application for any federal or state or local license of any type rejected or denied? Yes  No  If yes, please give details:

7. Is there any agreement or understanding, or proposed agreement or understanding to obtain the license for another, or to operate the business for another, or as an agent for another? Yes  No  If yes, please give details:

8. Has the business been sold or leased, or is there any intention to sell or lease the business to another? Yes  No   
If yes, please give details:

9. Has the applicant, or any of the persons listed above, shown interest in whatsoever, directly or indirectly, any other license liquor establishment within or without the State of North Dakota? Yes  No  If yes, please give details:

*The Tavern Restaurant in Fargo ND*

*see attached other locations  
HRP Fargo LLC*

10. Will the applicant, or any of the persons listed above, be engaged in any other business other than the sale of liquor under the license applied for? Yes  No  If yes, please give details:

11. Have all property taxes and special assessments currently due been paid? Yes  No   
If not, please explain:

I agree that I will not transfer or sell this license, if granted, without the prior approval of the governing body and in accordance with applicable ordinances.

I also agree that should any of the information contained in this application change within the period of the license, if granted, that I will inform city officials immediately and furnish such details as may be requested by such officials concerning any such changes. I also agree that, should there be a change in ownership or management during the period of the license, prior approval of the Board of City Commissioners is required.

I further agree that any misrepresentation, false statement or omission in this application shall be grounds for rejection of said application or for revocation or suspension of any license granted.

MINNESOTA  
State of

*Tim Cary*  
Signature of Applicant

HENNEPIN  
County of

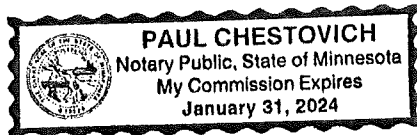
Tim Cary  
Print Name

License transfers require signatures from both parties.

The Class \_\_\_\_\_ license owned by me is transferred to Applicant upon successful application.

Signature of Current Owner of Liquor License

Signature of Applicant



Subscribed and sworn to before me this 23<sup>rd</sup>

day of August, 2022

*Paul Am...*  
Notary Public

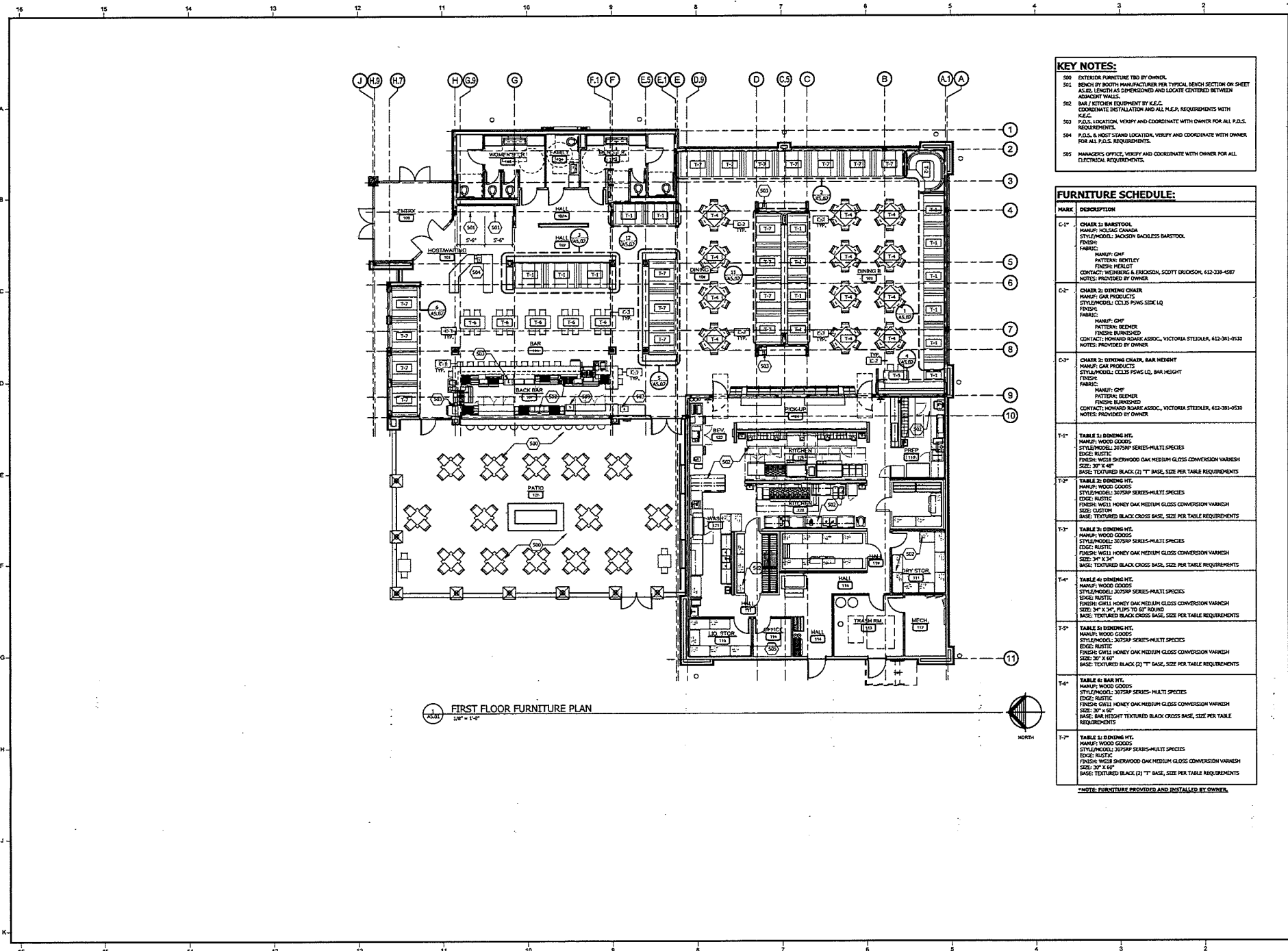
Note: Each application needs to be signed and notarized.

### Restaurant Requirements:

All applications for Class "F", Class "I" (restaurants), Class "M" (caterer), Class "P" (event site) and Class "Q" (Restaurant On-Sale and Off-Sale) licenses MUST be accompanied by a sworn statement executed by the licensee and a certified public accountant retained by the licensee certifying that gross food sales and liquor sales for the previous calendar year meet the requirements of Chapter 5-01-04 of the City Code of Ordinances.

### Liquor License Site Diagram Requirements:

- Site diagrams are to be submitted on a plain sheet of paper, 8½ x 11-inch size. There shall be one-inch margin left clear on all edges of the diagram.
- The licensed area shall be identified within the margins.
- The agency name shall be included on the diagram.
- The direction "North" shall be included on the diagram.
- The interior design of the licensed area shall be represented. This should include entrances, exits, interior doors, windows, tables, coolers, storage offices and room dividers.
- The diagram may be hand drawn, but it must be neat and reasonably accurate. Do not submit copies of construction blueprints.
- If the licensed site is part of a larger complex such as a restaurant, areas such as mixing, serving and storage must be identified.
- Do not use reference or hi-lite markers to identify areas as they do not reproduce when copied.



FIRST FLOOR FURNITURE PLAN  
1/4" = 1'-0"

**KEY NOTES:**

- EXTERIOR FURNITURE TBD BY OWNER.
- BENCH BY BOOTH MANUFACTURER FOR TYPICAL BENCH SECTION ON SHEET ALSO. LENGTH AS DIMENSIONED AND LOCATE CENTERED BETWEEN ADJACENT WALLS.
- BAR FIXTURES EQUIPMENT BY I.E.C. COORDINATE INSTALLATION AND ALL M.E.P. REQUIREMENTS WITH I.E.C.
- P.D.S. LOCATION, VERIFY AND COORDINATE WITH OWNER FOR ALL P.D.S. REQUIREMENTS.
- P.O.S. & HOST STAND LOCATION, VERIFY AND COORDINATE WITH OWNER FOR ALL P.D.S. REQUIREMENTS.
- MANAGER'S OFFICE, VERIFY AND COORDINATE WITH OWNER FOR ALL ELECTRICAL REQUIREMENTS.

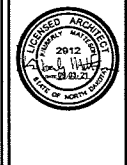
**FURNITURE SCHEDULE:**

MARK	DESCRIPTION
C-1*	<p>CHAIR 21 BARSTOOL MANUF: HOLLIG CANADA STYLE/MODEL: JACKSON BACKLESS BARSTOOL FINISH: FINISH PROVIDED BY OWNER</p> <p>MANUF: GMF PATTERN: BENTLEY FINISH: BURNISHED CONTACT: WEINBERG &amp; ERICKSON, SCOTT ERICKSON, 612-338-0277 NOTES: PROVIDED BY OWNER</p>
C-2*	<p>CHAIR 22 DINING CHAIR MANUF: GAK PRODUCTS STYLE/MODEL: OCLIS PWSV SIDE LQ FINISH: FINISH PROVIDED BY OWNER</p> <p>MANUF: GMF PATTERN: BENDER FINISH: BURNISHED CONTACT: HOWARD SEARKE ASSOC., VICTORIA STEELER, 612-381-0530 NOTES: PROVIDED BY OWNER</p>
C-3*	<p>CHAIR 23 DINING CHAIR, BAR HEIGHT MANUF: GAK PRODUCTS STYLE/MODEL: OCLIS PWSV LQ, BAR HEIGHT FINISH: FINISH PROVIDED BY OWNER</p> <p>MANUF: GMF PATTERN: BENDER FINISH: BURNISHED CONTACT: HOWARD SEARKE ASSOC., VICTORIA STEELER, 612-381-0530 NOTES: PROVIDED BY OWNER</p>
T-1*	<p>TABLE 21 DINING HT. MANUF: WOOD GOODS STYLE/MODEL: 3075P SERIES-MULTI SPECIES EDGE: RUSTIC FINISH: WGL3 SHERWOOD OAK MEDIUM GLOSS CONVERSION VARNISH SIZE: 36" X 48" BASE: TEXTURED BLACK (2) 1" BASE, SIZE PER TABLE REQUIREMENTS</p>
T-2*	<p>TABLE 22 DINING HT. MANUF: WOOD GOODS STYLE/MODEL: 3075P SERIES-MULTI SPECIES EDGE: RUSTIC FINISH: WGL3 HONEY OAK MEDIUM GLOSS CONVERSION VARNISH SIZE: 36" X 60" BASE: TEXTURED BLACK CROSS BASE, SIZE PER TABLE REQUIREMENTS</p>
T-3*	<p>TABLE 23 DINING HT. MANUF: WOOD GOODS STYLE/MODEL: 3075P SERIES-MULTI SPECIES EDGE: RUSTIC FINISH: WGL3 HONEY OAK MEDIUM GLOSS CONVERSION VARNISH SIZE: 36" X 36" BASE: TEXTURED BLACK CROSS BASE, SIZE PER TABLE REQUIREMENTS</p>
T-4*	<p>TABLE 41 DINING HT. MANUF: WOOD GOODS STYLE/MODEL: 3075P SERIES-MULTI SPECIES EDGE: RUSTIC FINISH: CWL1 HONEY OAK MEDIUM GLOSS CONVERSION VARNISH SIZE: 36" X 36", FLIPS TO 60" ROUND BASE: TEXTURED BLACK CROSS BASE, SIZE PER TABLE REQUIREMENTS</p>
T-5*	<p>TABLE 51 DINING HT. MANUF: WOOD GOODS STYLE/MODEL: 3075P SERIES-MULTI SPECIES EDGE: RUSTIC FINISH: CWL1 HONEY OAK MEDIUM GLOSS CONVERSION VARNISH SIZE: 30" X 60" BASE: TEXTURED BLACK (2) 1" BASE, SIZE PER TABLE REQUIREMENTS</p>
T-6*	<p>TABLE 61 BAR HT. MANUF: WOOD GOODS STYLE/MODEL: 3075P SERIES-MULTI SPECIES EDGE: RUSTIC FINISH: CWL1 HONEY OAK MEDIUM GLOSS CONVERSION VARNISH SIZE: 30" X 60" BASE: BAR HEIGHT TEXTURED BLACK CROSS BASE, SIZE PER TABLE REQUIREMENTS</p>
T-7*	<p>TABLE 71 DINING HT. MANUF: WOOD GOODS STYLE/MODEL: 3075P SERIES-MULTI SPECIES EDGE: RUSTIC FINISH: WGL3 SHERWOOD OAK MEDIUM GLOSS CONVERSION VARNISH SIZE: 30" X 60" BASE: TEXTURED BLACK (2) 1" BASE, SIZE PER TABLE REQUIREMENTS</p>

\*NOTE: FURNITURE PROVIDED AND INSTALLED BY OWNER.

DATE: 08/03/12  
PROJECT NO: 281-9600  
DRAWN BY: J.E.P.  
CHECKED BY: J.E.P.  
REVISIONS:

**THE TAVERN GRILL**  
1802 NORTH 12TH STREET  
BISMARCK, ND



**CHRISTIANSON**  
FEL (701) 281-9600  
FAX (701) 281-9601  
4609 33RD AVE S.  
SUITE 400  
FARGO, ND 58104

**IDG**  
IDG DESIGN RESOURCES GROUP  
FEL (701) 499-0212  
FAX (701) 281-9801

SHEET DESCRIPTION:  
FURNITURE PLAN

Sheet  
**A5.01**