



CITY OF ANN ARBOR REDEVELOPMENT LIQUOR LICENSE PRE-APPLICATION QUESTIONNAIRE

Instructions to Applicants: If you are applying for a City of Ann Arbor Development District License, within the Downtown Development Authority Area (see map), this form must be completed prior to filling out the City of Ann Arbor New Liquor License Application Form. The new application form will not be accepted without a completed pre-application questionnaire. **Please include copies of two pieces of personal identification.**

Please indicate, by checking YES or NO, if your establishment meets the following criteria.

1. Is the business to be licensed within the geographic boundaries of the City of Ann Arbor Downtown Development Authority District? ☒ **Yes** ☐ **No** (Please indicate proposed location on the attached map.)

Complete name and address of business to be licensed 200 S. ASHLEY LLC
Personal Property ID (for existing businesses) NONE 200 S. ASHLEY A 2 48104

2. Applicants for development district licenses, must demonstrate to City of Ann Arbor and the Michigan Liquor Control Commission (MLCC), at the time of investigation, that the amount expended for the rehabilitation or restoration of the building that houses the licensed premises shall be not less than \$75,000 over a period of the preceding five years or a commitment for a capital investment of at least that amount in the building that houses the licensed premises, which must be expended before the issuance of the license. At the time of application, can your business demonstrate this requirement?
☒ **Yes** ☐ **No** (Please attach supporting financial information for verification.)
3. Will the licensed business engage in dining, entertainment or recreation, that is open to the general public, with a seating capacity of not less than 25 persons? ☒ **Yes** ☐ **No** (Please attach current or proposed floor plan that supports seating capacity.)
4. Will the licensed business generate 50% or more of its revenue from food and non-alcoholic drink sales? ☒ **Yes** ☐ **No**
5. What type of on-premise sales are you interested in applying for? Check all that apply. (Checking the boxes does not guarantee award of any or all categories.)
☒ **Beer** ☒ **Wine** ☒ **Spirits (hard liquor)**
6. Please describe (on an attached sheet) how your business will do the following, if issued a license:
 - i. Prevent deterioration in the DDA district and promote economic growth by:
 - a. creating new employment opportunities
 - b. adding new tax value through the purchase of new equipment and/or building improvements
 - ii. Represents a desired land use as determined by the City's area master plan and zoning requirements.
 - iii. Contribute to the mix of dining/drinking, entertainment and recreational existing establishments (describe unique characteristics)

[Signature] 5/10/25
Signature of Applicant **Date**

Robert Vojt
Printed Name

If any of the above questions have been answered NO, the applicant is not eligible to apply for a Development District License as designated under Michigan State Law (Public Act 501 of 2006). Applicants that cannot meet the minimum criteria will not be considered by the City of Ann Arbor. Do NOT fill out an application.

If all of the above questions have been answered YES, the applicant is eligible to apply for a Development District License. The next step in the application process is to fill out the City of Ann Arbor application form. Attach this completed form to the application and submit with \$150 application fee to the Ann Arbor City Clerk, 301 E. Huron St, Ann Arbor, MI 48104. Fax Number – 734-994-8296. Phone No. – 734-794-6140. A \$600 license fee is due upon approval.

To inquire about other licensing opportunities, including transfers of existing Class C licenses, please contact the Michigan Liquor Control Commission directly. All transferred licenses begin at the State level. MLCC On-Premises



CITY OF ANN ARBOR
APPLICATION FOR NEW LICENSES

Date: 5/1/25

Instructions: This application must be completed and returned with a \$150 application fee for each license before it can be considered. All answers must be typed or printed. Sign the completed form in ink and return to the City Clerk, 301 E. Huron St., Ann Arbor, Michigan 48104. MAKE ALL CHECKS OR MONEY ORDERS PAYABLE TO THE CITY OF ANN ARBOR, MICHIGAN.

1. Applicant identification-all applicants	
Name of individual, partnership, corporation or limited liability company who will hold the license: <u>200 S. Ashley LLC</u>	Contact Person Name: <u>Gerald Spears</u>
Business Street Address: <u>200 S. Ashley</u>	Street Address: [REDACTED]
City/State/Zip Code: <u>Ann Arbor, MI 48104</u>	City/State/Zip Code: <u>Ann Arbor, MI 48103</u>
Township: <u>—</u>	Business Phone No. <u>(734) 260-6775</u> Home Phone No. <u>()</u>

2. Nature of Application – (Check all that apply)
<input checked="" type="checkbox"/> Retail Applicants <input type="checkbox"/> Manufacturer or Wholesale Applicants

3. Retail Applicants – (Please identify all permits being applied for with this license application)	
3a. Check Type of License	3b. Check Type of Permits
<input checked="" type="checkbox"/> SDM <input checked="" type="checkbox"/> Class C <input type="checkbox"/> A-Hotel <input type="checkbox"/> B-Hotel <input type="checkbox"/> Tavern <input type="checkbox"/> Club <input type="checkbox"/> SDD <input type="checkbox"/> Redevelopment <input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> Sunday Sales <input type="checkbox"/> Add Bar <input type="checkbox"/> Entertainment Sales <input checked="" type="checkbox"/> Outdoor Sales <input type="checkbox"/> Before / After Hours For: _____ _____

4. New Manufacturer or Wholesale Applicants		
<input type="checkbox"/> Wine Maker <input type="checkbox"/> Small Wine Maker <input type="checkbox"/> Wine Maker Tasting Room <input type="checkbox"/> Micro Brewer <input type="checkbox"/> Small Distiller	<input type="checkbox"/> Manufacturer of Spirits <input type="checkbox"/> Industrial Manufacturer <input type="checkbox"/> Warehouse <input type="checkbox"/> Brewpub	<input type="checkbox"/> Outstate Seller of Mixed Spirit Drinks <input type="checkbox"/> Outstate Seller of Wine <input type="checkbox"/> Outstate Seller of Beer <input type="checkbox"/> Other: _____

5. Proposed Licensed Address: <u>200 S. Ashley Ann Arbor MI 48104</u>

6. Briefly describe the business, for example – Drug Store, Restaurant, Party Store, Wholesaler, Wine Maker, etc. <u>Restaurant</u>

7. This proposed licensed business will be owned by: (check one)

☐ Me as the individual owner ☐ The named corporation ☒ The named liability company

The following partners (indicate limited partners with an "L" before their name)

Partnership Information: (attach additional sheet if necessary)

Name of Partners	Home Address	Telephone Number
Robert Vogt		
Gerald Spears		
Adam Sloan		
B+B Real Property LLC		

* All partners may be required to complete and submit additional information as part of the application review process, by completing this application applicant agrees to comply with any such requests.

8. Personal Information – Individual Applicants and Partnership Members Only

Date of Birth 2/13/84 (required to confirm applicant is over 21 years of age)

If you are not a US Citizen – Are you a registered alien? ☐ Yes ☐ No Or, do you have a Visa? ☐ Yes ☐ No

Full name of spouse: n/a

Have you ever legally changed your name? ☐ Yes ☒ No If Yes, from _____ to _____

Have you been known by other names? ☐ Yes ☒ No List Names: _____

Have you ever been convicted of a criminal offense, including alcohol related infractions (exclude traffic citations)?

☐ Yes ☒ No If Yes, please list charge, date of conviction, location and disposition below.

(Use additional sheet if necessary.)

CHARGE	DATE	PLACE	DESCRIPTION
_____	_____	_____	_____
_____	_____	_____	_____

List your former occupations for the past 3 years:

DATE (to/from)	OCCUPATION	EMPLOYER NAME AND ADDRESS
<u>5/2005</u>	<u>CEO</u>	<u>IOSIX 1161 Oak Valley Dr A2</u>
_____	_____	_____
_____	_____	_____

I or my spouse previously held or now hold interest in the following licenses for sale of alcoholic beverages as sole licensee, partner or corporation:

NAME OF LICENSE	TYPE OF LICENSE	LOCATION	DATE
<u>Blue Front LLC</u>	<u>SOM</u>	<u>701 Richard A2</u>	<u>2020</u>
_____	_____	_____	_____

Do you or your spouse hold any law enforcement powers including powers of arrest? ☐ Yes ☒ No

9. Limited Partnership Applicants Only – is the limited partnership authorized to do business under the laws of Michigan?

☒ Yes

☐ No

Date authorized: 12/26/24

10. Corporate & Limited Liability Company Applicants Only -

Attach copy filed or proposed Articles of Incorporation, last annual report/statement filed & attach copy of stock options.

Corporate/LLC Name:

200 S. Ashley LLC

Incorporation/Organization date:

12/26/24

Incorporated/Organized in what State?

MI

Michigan Authorization date:

12/26/24

Name, Address, Phone Number of Resident Agent:

Gerald Spears
Ar

(Check one of each)
Corporation

☒ Profit or

☐ Nonprofit

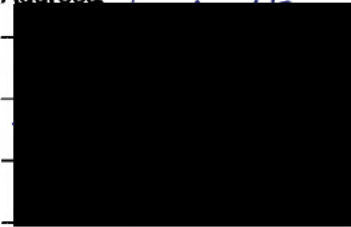

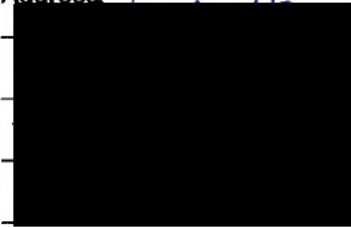

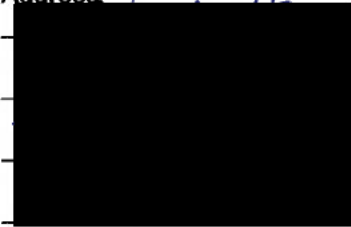

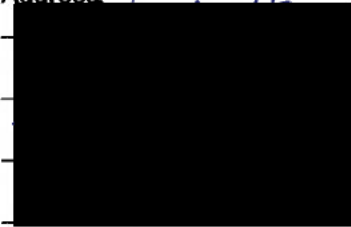

☐ Public or

☒ Private Corporation

Date last annual report/statement filed with Michigan Corporation and Securities:

Corporate Officers	Name	Address	Phone Number
President	_____	_____	_____
Vice-President	_____	_____	_____
Secretary	_____	_____	_____
Treasurer	_____	_____	_____

11. Corporations and Limited Liability Companies – List all persons, companies and other entities that hold or will hold stock interest or membership in applicant entity.

Name	Address	Phone Number	%Interest
1. <u>Robert Vogt</u>			<u>50</u>
2. <u>Gerald Spears</u>			<u>20</u>
3. <u>Akara Sloan</u>			<u>15</u>
4. <u>Bob Real Property LLC</u>			<u>15</u>
5. _____	_____	_____	_____

12. Denial of Application/Revocation of License

(A) Have you, prior to this application, made application(s) for a similar or other license on premises other than described in this application?

☐ Yes ☒ No

If yes, please list date, place and disposition of such application(s).

(B) Have you, prior to this application, been disqualified to receive approval for a license under the laws of the State of Michigan?

☐ Yes ☒ No

If yes, please explain.

(C) Have you ever held a liquor license which has been revoked or not renewed?

☐ Yes ☒ No

If yes, please state reason.

13. Financial Details – All applicants

(A) Source of funds used to establish business, or which will be used to purchase this business, list name, address and amount of all money lenders.

Name	Address	Amount
Robert V. Jr		\$ 150,000
Adam Sloan		\$ 50,000
		\$

(B) Attorney or representative

Name	Address	Phone Number
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14. Premises (Answer either A, B, or C.) Applicant shall attach a building and grounds layout diagram (8-1/2 x 11) showing the entire structure, premises, and grounds, and in particular the specific areas where the license is to be utilized. Plans shall demonstrate adequate off-street parking, lighting, refuse disposal facilities, and where appropriate, adequate plans for screening and notice control.

(A) New Construction

Do you need to build a facility at the residence that will hold the license? ☐ Yes ☐ No

If yes, do you have building permits? ☐ Yes ☐ No

If no, when do you plan to get them?

If yes, when do you expect construction will begin?

If yes, when do you expect construction to be completed?

If yes, what is the estimated cost of construction of the facility? \$

When is your anticipated occupancy date/open for business date?

Would you build the facility at this location if you do not get a license? ☐ Yes ☐ No

(B) Existing Facility-No Renovation

Is the facility currently occupied? ☐ Yes ☒ No

If yes, do you intend to be licensed under the existing business at this location? ☐ Yes ☐ No

If yes, do you intend to be licensed under the same management? ☐ Yes ☐ No

How long has the existing business be at the location? 1950

Are you currently associated with the business operation on site? ☐ Yes ☒ No

If yes, in what capacity are you associated?

If no, will you be purchasing the premises? no

(C) Existing Facility-Renovation

Do you plan to renovate an existing facility? ☒ Yes ☐ No
If yes, what is the estimated cost of the renovation? \$ 600,000
If yes, when do you expect construction will begin? May 2025
If yes, when do you expect the construction to be completed? July 2025
When is your anticipated occupancy date/open for business date? July 2025
Is the facility currently occupied? ☐ Yes ☒ No
If yes, are you currently associated with the business operation on site? ☐ Yes ☐ No
If yes, in what capacity are you associated? _____
Will it be necessary to temporarily close the facility for renovation? ☒ Yes ☐ No
If yes, how long will the facility be closed? 3 months
Are you going to renovate the facility if you do not get a license? ☐ Yes ☒ No

15. Employment – (All applicants must complete either A or B section)**(A) Existing Business**

How large is the current staff? (i.e. 1 full-time bartender)

Number	Full	or	Part-time	Position
_____	<input type="checkbox"/>		<input type="checkbox"/>	_____
_____	<input type="checkbox"/>		<input type="checkbox"/>	_____
_____	<input type="checkbox"/>		<input type="checkbox"/>	_____
_____	<input type="checkbox"/>		<input type="checkbox"/>	_____
_____	<input type="checkbox"/>		<input type="checkbox"/>	_____
_____	<input type="checkbox"/>		<input type="checkbox"/>	_____

Will you be retaining current staffing levels, expanding current staffing levels, or decreasing current staffing levels if you receive the license? Explain. _____

(B) New Business

How large of a staff do you plan to have? (i.e. 1 full-time bartender)

Number	Full	or	Part-time	Position
<u>10</u>	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<u>Manager/Staff</u>
<u>5</u>	<input type="checkbox"/>		<input checked="" type="checkbox"/>	<u>Staff</u>
_____	<input type="checkbox"/>		<input type="checkbox"/>	_____
_____	<input type="checkbox"/>		<input type="checkbox"/>	_____
_____	<input type="checkbox"/>		<input type="checkbox"/>	_____

16. Operating Statement – Attach a general operation statement outlining the proposed manner in which the business for which the license being proposed will be operated, including a schedule of the hours of operation, food services, crowd control, and use of facilities.

17. Personal Statement – (App applicants must complete this requirement)

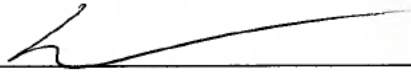
Please describe how this business will enhance the City of Ann Arbor community. What special considerations should we take into account in evaluating your application? PLEASE LIMIT YOUR ANSWER TO 200 WORDS OR LESS. Please attach a separate sheet of paper if necessary.

I have read all of the above answers and they are true. I agree to provide all requested information and to fully cooperate with all City Service Areas requesting any and all additional information provided in this application or any attachment thereto. Any changes that occur after the date of this application, applicant will notify the City Clerk, in writing, within 14-days of such change. I understand that the falsification of the information on this form or any false statements made during investigations may constitute grounds for denial of a license.

I warrant that I am not disqualified to receive a liquor license under the ordinances of the City of Ann Arbor or the laws of the State of Michigan. If granted a liquor license I will not violate any federal or state laws or any ordinance of the City of Ann Arbor in the conduct of business.

Attested to:

5/10/2025
Date of Application



Signature of Applicant
(if applicant is a corporation, include title
of signor)

Name of person completing this
form if not the applicant

Operating Statement for Aperitivo – Ann Arbor, MI

Aperitivo will operate as a responsible, community-forward establishment offering happy hour specials, light fare, and a welcoming atmosphere for both locals and visitors. Our mission is to enhance downtown Ann Arbor's hospitality scene while maintaining high standards of service, cleanliness, and safety.

Hours of Operation:

Aperitivo will operate seven days a week, with hours designed to serve both the daytime lunch crowd and the evening happy hour and dinner scene:

- Monday–Friday: 11:00 AM – 10:00 PM
- Saturday: 11:00 AM – 12:00 AM
- Sunday: 12:00 PM – 9:00 PM

Seating & Capacity:

The venue will feature both indoor and outdoor seating, thoughtfully designed to create an inviting environment while complementing the aesthetics of the downtown area. Outdoor areas will be well-lit, clean, and responsibly managed in alignment with city ordinances.

Food Service:

Aperitivo will include a dedicated food truck on-site, offering a rotating menu of fresh, seasonal fare that complements our beverage offerings. This provides flexibility, enhances the guest experience, and adds culinary diversity to the area.

Management & Staffing:

The establishment will be led by an experienced team focused on hospitality, safety, and community connection. All staff will be trained in responsible alcohol service (TIPS or equivalent) and committed to maintaining a high-quality guest experience.

Community & Compliance:

Aperitivo is committed to full compliance with all state and local regulations, including liquor licensing, health and safety codes, and zoning requirements. Security measures and clear operational protocols will ensure the business operates as a positive presence in the neighborhood.

By combining thoughtful design, high-quality service, and a fresh culinary approach, Aperitivo will bring renewed energy to a previously underutilized space—helping to activate the street, support surrounding businesses, and contribute to a cleaner, safer, and more vibrant downtown Ann Arbor.

Personal Statement for Apertitivo – Ann Arbor Happy Hour Spot

Apertitivo is envisioned as a vibrant happy hour destination in the heart of Ann Arbor, designed to breathe new life into a currently underutilized building. Securing a liquor license for this establishment is not just a business opportunity—it is an investment in the revitalization and safety of the surrounding area.

By transforming this space into a clean, modern, and welcoming venue with both indoor and outdoor seating, Apertitivo will contribute to a brighter, safer, and more active streetscape. This upgrade will encourage more foot traffic, support neighboring businesses, and enhance the overall downtown experience for residents and visitors alike.

Apertitivo will align with the character of the local business community while adding a fresh, inviting energy to the neighborhood. Our goal is to create a place where people can gather, relax, and enjoy the city—while also contributing to the safety, cleanliness, and vibrancy of downtown Ann Arbor.

1. ALL EXIST CLAIMS TO BE VER

* APP ROXIMAREY
 BO SENT.
 BUILDING
 CONSTRUCTION
 CO. T.S. 1025



SYNECDOCHE

[illegible]

METROLOGICAL ENGINEERS
WHO INTERESTED ENGINEERS
1430 HICKORY RD
BIRMINGHAM, AL 35202
P 800-441-5555
E 278703@AOL.COM

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PRODUCED BY
APERITIVO

8020 S. ASHLEY ST., ANN ARBOR, MI 48106

References

**FURNITURE
PLAN**

A102



Build Out Costs

Description	Cost
Design/Permits	\$35,000
Liquor License/Legal	\$30,000
Building Reno.	\$250,000
Equipment	\$100,000
Furniture	\$75,000
Canopy	\$50,000
Working/Capital	\$50,000
Miscellaneous	\$10,000

Total: \$600,000

PAYMENT DATE
05/16/2025

COLLECTION STATION
Clerk-Front Counter Printer

RECEIVED FROM
200 S Ashley

DESCRIPTION
Redevelopment Liquor License Application

City of Ann Arbor
301 E. Huron
PO Box 8647
Ann Arbor, MI 48107
(734) 794-6320

BATCH NO.
2025-00004801

RECEIPT NO.
2025-00031694

CASHIER
Rachel Rickinger

PAYMENT CODE	RECEIPT DESCRIPTION	TRANSACTION AMOUNT
CLERK18	LIQUOR-Application Fee-New	\$150.00
Payments:	Type	Detail
	Check	13-39/420
		Amount
		\$150.00
Total Amount:		\$150.00
Customer Copy		

Customer Copy