



CITY OF MILWAUKEE
OFFICE OF THE CITY CLERK

Friday, May 17, 2024

COMMITTEE MEETING NOTICE

AD 07

KELTON, Candace A, Agent
Lux6 On North Hall & Lounge LLC
3710 W BURLEIGH St
Milwaukee, WI 53210

You are requested to attend a hearing which is to be held in Room 301-B, Third Floor, City Hall or you may attend virtually using the link below.

Wednesday, May 29, 2024 at 01:55 PM

The access code is https://meet.goto.com/790544861. If you wish to call in: +1 (872) 240-3412 and use Access Code: 790-544-861 Please see the enclosed best practices document for further instructions.

Regarding: Your Public Entertainment Premises, Extended Hours Establishments and Food Dealer License Applications Requesting Disc Jockey, Karaoke, Poetry Readings and Patron Dancing as agent for "Lux6 On North Hall & Lounge LLC" for "Lux6 Off The Ave Restaurant" at 3710 W BURLEIGH St.

There is a possibility that your application may be denied for one or more of the following reasons: The recommendation of the committee regarding the application shall be based on evidence presented at the hearing. Per MCO 85-2.7-4, probative evidence concerning whether or not a new license should be granted may be presented on the following subjects: whether or not the applicant meets the municipal requirements, the appropriateness of the location and premises where the licensed premises is to be located and whether use of the premises for the purposes or activities permitted by the license would tend to facilitate a public or private nuisance or create undesirable neighborhood problems such as disorderly patrons, unreasonably loud noise, litter, and excessive traffic and parking congestion. Probative evidence relating to these matters may be taken from the plan of operation submitted with the license application, if any, but shall not include the content of any music. Evidence regarding the fitness of the location of the premises to be maintained as the principal place of business, including but not limited to whether there is an overconcentration of businesses of the type for which the license is sought; whether the proposal is consistent with any pertinent neighborhood business or development plans, or the location's proximity to areas where children are typically present. The applicant's record in operating similarly licensed premises; and whether or not the applicant has been charged with or convicted of any felony, misdemeanor, municipal offense or other offense, the circumstances of which substantially relate to the activity to be permitted by the license being applied for or any other factor which reasonably relates to the public health, safety or welfare may also be considered. See attached police report or correspondence.

Notice for applicants with warrants or unpaid fines: Proof of warrant satisfaction or payment of fines must be submitted at the hearing on the above date and time. Failure to comply with this requirement may result in a delay of the granting/denial of your application.

Failure to appear at this meeting may result in the denial of your license. Individual applicants must appear only in person or by an attorney. Corporate or Limited Liability applicants must appear only by the agent designated on the application or by an attorney. Partnership applicants must appear by a partner listed on the application or by an attorney. If you wish to do so and at your own expense, you may be accompanied by an attorney of your choosing to represent you at this hearing. You will be given an opportunity to speak on behalf of the application and to respond and challenge any charges or reasons given for the denial. No petitions can be accepted by the committee, unless the people who signed the petition are present at the committee hearing and willing to testify. You may present witnesses under oath and you may also confront and cross-examine opposing witnesses under oath. If you have difficulty with the English language, you should bring an interpreter with you, at your expense, so that you can answer questions and participate in your hearing.

You may examine the application file at this office during regular business hours prior to the hearing date. Inquiries regarding this matter may be directed to the person whose signature appears below.

Limited parking for persons attending meetings during normal business hours is available at reduced rates (5 hour limit) at the Milwaukee Center on the southwest corner of Kilbourn Avenue and Water Street. You must present a copy of the meeting notice to the parking cashier.

PLEASE NOTE: Upon reasonable notice, efforts will be made to accommodate the needs of disabled individuals through sign language interpreters or other auxiliary aids. For additional information or to request this service, contact the Council Services Division ADA Coordinator at (414) 286-2998, Fax - (414) 286-3456, TDD - (414) 286-2025.

JIM OWCZARSKI, CITY CLERK

Handwritten signature of Jim Cooney

BY: _____

Jim Cooney
License Division Manager

If you have questions regarding this notice, please contact the License Division at (414) 286-2238.

200 E. Wells Street, Room 105, City Hall, Milwaukee, WI 53202. www.milwaukee.gov/license
Phone: (414) 286-2238 Fax: (414) 286-3057 Email Address: License@milwaukee.gov



CITY OF MILWAUKEE
OFFICE OF THE CITY CLERK

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COMMITTEE MEETING NOTICE

AD 07

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Lux6 On North Hall & Lounge LLC
6572 N 91ST ST
Milwaukee, WI 53224

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JIM OWCZARSKI, CITY CLERK

BY: _____

Jim Cooney
License Division Manager

If you have questions regarding this notice, please contact the License Division at (414) 286-2238.

200 E. Wells Street, Room 105, City Hall, Milwaukee, WI 53202. www.milwaukee.gov/license
Phone: (414) 286-2238 Fax: (414) 286-3057 Email Address: License@milwaukee.gov

MILWAUKEE POLICE DEPARTMENT LICENSING

CRIMINAL RECORD/ORDINANCE VIOLATION/INCIDENTS SYNOPSIS

DATE: 02/23/24
LICENSE TYPE: 24H
NEW:
RENEWAL:

No. 362021
Application Date:

License Location: 3710 W Burleigh
Business Name: Lux 6 On North

Licensee/Applicant: Kelton, Candace
(Last Name, First Name, MI)
Date of Birth: 10/05/82

Home Address: 6572 N 91st St
City: Milwaukee State: WI Zip Code: 53224
Home Phone:

This report is written by Police Officer Penny Monreal, assigned to the License Investigation Unit, Days.

The Milwaukee Police Department's investigation regarding this application revealed the following:

1. On 12/11/14, the applicant was cited at 1900 N 1st., for Disorderly Conduct.

Charge: Disorderly Conduct
Finding: Guilty
Sentence: Fine
Date: 06/21/22
Case: 15000724



Friday, May 17, 2024



Notice of Public Hearing

Blank Notice

KELTON, Candace A, Agent
Lux6 Off The Ave Restaurant at 3710 W BURLEIGH St
Public Entertainment Premises, Extended Hours Establishments and Food Dealer License
Applications Requesting Disc Jockey, Karaoke, Poetry Readings and Patrons Dancing

Wednesday, May 29, 2024 at 1:55 PM

To whom it may concern:

The above application has been made by the above named applicant(s). This requires approval from the Licenses Committee and the Common Council of the City of Milwaukee. The hearing before the Licenses Committee will take place on 5/29/2024 at 1:55 PM in Room 301-B, Third Floor, City Hall. This is a public hearing. Those wishing to view the proceeding are able to do so via the City Channel – Channel 25 on Spectrum Cable – or on the Internet at <http://city.milwaukee.gov/citychannel>. Those wishing to provide oral testimony via internet are asked to contact the staff assistant, Yadira Melendez at (414) 286-2775 or stasst5@milwaukee.gov for necessary information. Please make such requests no later than one business day prior to the start of the meeting. You are not required to attend the hearing, but please see the information below if you would like to provide testimony. Once the Licenses Committee makes its recommendation, this recommendation is forwarded to the full Common Council for approval at its next regularly scheduled hearing.

Important details for those wishing to provide information for the Licenses Committee to consider when making its recommendation:

1. The license application is scheduled to be heard at the above time. Due to other hearings running longer than scheduled, you may have to wait some time to provide your testimony.
2. You must appear in person and testify as to matters that you have personally experienced or seen. (You cannot provide testimony for your neighbor, parent or anyone else; this is considered hearsay and cannot be considered by the committee.)
3. No letters or petitions can be accepted by the committee (unless the person who wrote the letter or the persons who signed the petition are present at the committee hearing and willing to testify).
4. Persons opposed to the license application are given the opportunity to testify first; supporters may testify after the opponents have finished.
5. When you are called to testify, you will be sworn in and asked to give your name, and address. (If your first and/or last names are uncommon please spell them.)
6. You may then provide testimony.
 - a. Include only information relating to the above license application.
 - b. Include only information you have personally witnessed or seen.
 - c. Provide concise and relevant information detailing how this business has affected or may affect the peaceful enjoyment of your neighborhood.
 - d. If by the time you have the opportunity to testify, the information you wish to share has already been provided to the committee, you may state that you agree with the previous testimony. Redundant or repetitive testimony will not assist the committee in making its recommendation.
7. After giving your testimony, the members of the Licenses Committee and the licensee may ask questions regarding the testimony you have given or other factors relating to the license application.
8. Business Competition is not a valid basis for denial or non-renewal of a license.
Please Note: If you have submitted an objection to the above application your objection cannot be considered by the committee unless you personally testify at the hearing.

OCCUPANT	MAIL ADDRESS	CITY STATE ZIP
CURRENT OCCUPANT	3057 N 37TH ST	MILWAUKEE, WI 53210-1804
CURRENT OCCUPANT	3058 N 38TH ST	MILWAUKEE, WI 53210-1827
CURRENT OCCUPANT	3062 N 37TH ST	MILWAUKEE, WI 53210-1803
CURRENT OCCUPANT	3062 N 38TH ST	MILWAUKEE, WI 53210-1827
CURRENT OCCUPANT	3063 N 37TH ST	MILWAUKEE, WI 53210-1804
CURRENT OCCUPANT	3066 N 38TH ST	MILWAUKEE, WI 53210-1827
CURRENT OCCUPANT	3067 N 37TH ST	MILWAUKEE, WI 53210-1804
CURRENT OCCUPANT	3068 N 37TH ST	MILWAUKEE, WI 53210-1803
CURRENT OCCUPANT	3072 N 38TH ST	MILWAUKEE, WI 53210-1827
CURRENT OCCUPANT	3073 N 37TH ST	MILWAUKEE, WI 53210-1804
CURRENT OCCUPANT	3073 N 38TH ST	MILWAUKEE, WI 53210-1828
CURRENT OCCUPANT	3074 N 37TH ST	MILWAUKEE, WI 53210-1803
CURRENT OCCUPANT	3078 N 37TH ST	MILWAUKEE, WI 53210-1803
CURRENT OCCUPANT	3079 N 37TH ST	MILWAUKEE, WI 53210-1804
CURRENT OCCUPANT	3079 N 38TH ST	MILWAUKEE, WI 53210-1828
CURRENT OCCUPANT	3080 N 37TH ST	MILWAUKEE, WI 53210-1803
CURRENT OCCUPANT	3080 N 38TH ST	MILWAUKEE, WI 53210-1827
CURRENT OCCUPANT	3106 N 37TH ST	MILWAUKEE, WI 53216-3722
CURRENT OCCUPANT	3109 N 38TH ST# 1	MILWAUKEE, WI 53216-3660
CURRENT OCCUPANT	3109 N 38TH ST# 10	MILWAUKEE, WI 53216-3668
CURRENT OCCUPANT	3109 N 38TH ST# 11	MILWAUKEE, WI 53216-3668
CURRENT OCCUPANT	3109 N 38TH ST# 12	MILWAUKEE, WI 53216-3668
CURRENT OCCUPANT	3109 N 38TH ST# 2	MILWAUKEE, WI 53216-3660
CURRENT OCCUPANT	3109 N 38TH ST# 3	MILWAUKEE, WI 53216-3660
CURRENT OCCUPANT	3109 N 38TH ST# 4	MILWAUKEE, WI 53216-3660
CURRENT OCCUPANT	3109 N 38TH ST# 5	MILWAUKEE, WI 53216-3660
CURRENT OCCUPANT	3109 N 38TH ST# 6	MILWAUKEE, WI 53216-3660
CURRENT OCCUPANT	3109 N 38TH ST# 7	MILWAUKEE, WI 53216-3668
CURRENT OCCUPANT	3109 N 38TH ST# 8	MILWAUKEE, WI 53216-3668
CURRENT OCCUPANT	3109 N 38TH ST# 9	MILWAUKEE, WI 53216-3668
CURRENT OCCUPANT	3112 N 38TH ST# 1	MILWAUKEE, WI 53216-3604
CURRENT OCCUPANT	3112 N 38TH ST# 2	MILWAUKEE, WI 53216-3604
CURRENT OCCUPANT	3112 N 38TH ST# 3	MILWAUKEE, WI 53216-3604
CURRENT OCCUPANT	3112 N 38TH ST# 4	MILWAUKEE, WI 53216-3604
CURRENT OCCUPANT	3118 N 38TH ST	MILWAUKEE, WI 53216-3604
CURRENT OCCUPANT	3119 N 38TH ST	MILWAUKEE, WI 53216-3603
CURRENT OCCUPANT	3120 N 38TH ST	MILWAUKEE, WI 53216-3604
CURRENT OCCUPANT	3120A N 37TH ST	MILWAUKEE, WI 53216-3722
CURRENT OCCUPANT	3121 N 37TH ST	MILWAUKEE, WI 53216-3721
CURRENT OCCUPANT	3123 N 37TH ST	MILWAUKEE, WI 53216-3721
CURRENT OCCUPANT	3123A N 37TH ST	MILWAUKEE, WI 53216-3721
CURRENT OCCUPANT	3124 N 38TH ST	MILWAUKEE, WI 53216-3604
CURRENT OCCUPANT	3125 N 38TH ST	MILWAUKEE, WI 53216-3603
CURRENT OCCUPANT	3126 N 37TH ST	MILWAUKEE, WI 53216-3722
CURRENT OCCUPANT	3126A N 37TH ST	MILWAUKEE, WI 53216-3722
CURRENT OCCUPANT	3129 N 38TH ST	MILWAUKEE, WI 53216-3603

CURRENT OCCUPANT	3130 N 37TH ST	MILWAUKEE, WI 53216-3722
CURRENT OCCUPANT	3131 N 37TH ST	MILWAUKEE, WI 53216-3721
CURRENT OCCUPANT	3131 N 38TH ST	MILWAUKEE, WI 53216-3603
CURRENT OCCUPANT	3132 N 38TH ST	MILWAUKEE, WI 53216-3604
CURRENT OCCUPANT	3133 N 38TH ST	MILWAUKEE, WI 53216-3603
CURRENT OCCUPANT	3134 N 38TH ST	MILWAUKEE, WI 53216-3604
CURRENT OCCUPANT	3137 N 37TH ST	MILWAUKEE, WI 53216-3721
CURRENT OCCUPANT	3137A N 37TH ST	MILWAUKEE, WI 53216-3721
CURRENT OCCUPANT	3138 N 38TH ST	MILWAUKEE, WI 53216-3604
CURRENT OCCUPANT	3138A N 38TH ST	MILWAUKEE, WI 53216-3604
CURRENT OCCUPANT	3141 N 37TH ST	MILWAUKEE, WI 53216-3721
CURRENT OCCUPANT	3141A N 37TH ST	MILWAUKEE, WI 53216-3721
CURRENT OCCUPANT	3144 N 38TH ST	MILWAUKEE, WI 53216-3604
CURRENT OCCUPANT	3147 N 37TH ST	MILWAUKEE, WI 53216-3721
CURRENT OCCUPANT	3148 N 38TH ST	MILWAUKEE, WI 53216-3604
CURRENT OCCUPANT	3150 N 38TH ST	MILWAUKEE, WI 53216-3604
CURRENT OCCUPANT	3622 W BURLEIGH ST	MILWAUKEE, WI 53210-1931
CURRENT OCCUPANT	3626 W BURLEIGH ST	MILWAUKEE, WI 53210-1931
CURRENT OCCUPANT	3710A W BURLEIGH ST	MILWAUKEE, WI 53210-1837
CURRENT OCCUPANT	3710B W BURLEIGH ST	MILWAUKEE, WI 53210-1837
CURRENT OCCUPANT	3714 W BURLEIGH ST	MILWAUKEE, WI 53210-1837
CURRENT OCCUPANT	3714A W BURLEIGH ST	MILWAUKEE, WI 53210-1837
CURRENT OCCUPANT	3718 W BURLEIGH ST	MILWAUKEE, WI 53210-1837
CURRENT OCCUPANT	3718A W BURLEIGH ST	MILWAUKEE, WI 53210-1837

Blank Notice

Total Records: 70

Radius 250 feet and Center of the Circle: 3710 W Burleigh St



APPLICATION AMENDMENT

Office of the City Clerk License Division
200 E. Wells Street, Room 105, Milwaukee, WI 53202 (414) 286-2238

Date: 2/27/24

To the License Division of the City of Milwaukee:

I, Candace Kelton, wish to amend my answer(s) on the application for a

(full legal name)

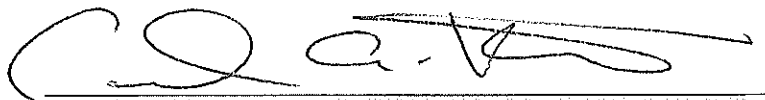
Tobacco license at 3710 W. Burleigh Milwaukee
WI 53210

(type of license)

(premises address, if applicable)

by adding or amending the following information (complete only those sections being amended):

1. Answer to Question(s) # _____ should be: _____
2. Agent should be (full legal name): _____ Also complete 3, 4, 5 & 6
3. Date of birth should be: _____
4. Home address should be (include city/state/zip): _____
5. Phone number should be (include area code): _____
6. Driver's License Number/State ID Number should be: _____
7. Corporation/LLC name should be (full legal name): _____
8. Business name should be: _____
9. Premises address should be (include city/state/zip): _____
10. Business phone number should be (include area code): _____
11. Mailing address should be (include city/state/zip): _____
12. Email address should be: _____
13. Recycling/Salvaging/Towing: Location where vehicle will be parked should be (include city/state/zip): _____
14. Class B Tavern: Age Distinction should be: _____
15. Other: Amending cigarette sales from 50%
down to 40% (per DNS)
(Check with the License Division before submitting "Other" amendments using this form.)


Signature of Licensee (Individual, Partner, or Agent of Corp/LLC)

Office Use Only: Application #: 362015 Date: 2-27-24 Initials: RC To LC: _____
LC Email: MPD NS HD Initials: _____



BUSINESS LICENSE PLAN OF OPERATION

ccl-busplan 5/12/2020

Office of the City Clerk License Division
200 E. Wells St. Room 105, Milwaukee, WI 53202
(414) 286-2238 www.milwaukee.gov/license e-mail address: license@milwaukee.gov

1. Type of Business

Applying for: Extended Hours (12AM to 5AM) - If a food establishment, check all that apply: Delivery Drive Thru Dining Room
 Self Service Laundry Massage Establishment Filling Station
 Other (supplemental application for specific license also required)

Provide a detailed description of the type of business you plan on operating:

Restaurant / Cafe

Do you have any experience operating this type of business? No Yes If yes, explain: Worked in Restaurants

2. Business Operations

- a. Proposed Opening Date: April 1st
- b. Is this premise under construction? No Yes If yes, list estimated completion date: _____
- c. Is this a franchise? No Yes
- d. Is this premises currently licensed? No Yes If yes, list type of license: _____
- e. Is the current licensee operating? No Yes If no, list date closed: _____
- f. Do you have future plans for other businesses, licenses or permits at this location? No Yes
If yes, explain: _____
- g. Have you previously held an Extended Hours License in Milwaukee? No Yes
If yes, list address(es): _____
- h. Are other businesses operating in the same building? No Yes If yes, describe: _____

3. Litter & Noise

- a. How are grounds kept clean? Sweep Pressure Wash Pick Up Litter Other: _____
- b. How often will grounds be cleaned? Daily Weekly As Needed Monthly Other: _____
- c. Grounds cleaned by: Licensee Building Owner Employees Hired Maintenance Other: _____
- d. How are noise issues prevented and/or addressed? Security Manager approaches customer(s) Call Police
 Signs Posted Other: _____
- e. Will a sound amplification system be used? No Yes If yes, describe: Speakers System installed

4. Smoking & Sanitation

- a. Are there designated outdoor smoking areas? No Yes If yes, describe: _____
- b. Number of Garbage Cans: Inside: 4 Locations: will order waste management
Outside: 1 Locations: dumpster will be in the alley
- c. Is a crowd control barrier used? No Yes If yes, describe: Gate or fence
- d. How many restrooms are on the premises? 2
- e. Name of solid waste contractor: Advanced Disposal Waste Management Other: _____
will sign a contract

5. Security

- a. Are there onsite parking spaces? No Yes If yes, how many? _____ and describe the parking security plan: _____
- b. Is there a loading zone? No Yes If yes, describe the loading area security plan: _____
- c. Will you have security personnel on premise? No Yes If yes, how many? 8 and answer the following:
 What are their responsibilities? Crowd control, noise control & Safety
 Is security equipment used? No Yes If yes, describe metal wand
 List their licensing, certification, or training credentials will at a later date
- d. Will there be security cameras? No Yes If yes, how many? 3 and list locations: Front door Entrance exterior, (2) inside
- e. Will searches/identification checks be done upon entry? No Yes If yes, describe _____

6. Percentage of Sales (must total 100%)

Alcohol <u>0</u> %	Food <u>50</u> %	Secondhand Merchandise <u>0</u> %	Precious Metals & Gems <u>0</u> %
Entertainment _____ %	Cigarettes <u>50</u> %	Personal Services (such as tattoo, body piercing, salon, tailor, tanning, etc.) <u>0</u> %	Other _____ %
Pawnbroker Activity <u>0</u> %	Salvaged Materials <u>0</u> % (such as scrap metal)	Describe: _____	

7. Businesses/Licenses on the Premises (check all that apply):

Type 1

- Full Service Restaurant Cafe/Coffee Shop Deli or Fast Food Restaurant Private/Fraternal/Veterans Club
- Night Club Tavern Cocktail Lounge Teen Club
- Banquet Hall Sports Facility Bowling Alley
- Hotel/Motel: Number of Floors: 4 CC Number of Rooms: 30 CC
 Rooming House: Number of Floors: _____ Number of Rooms: _____

Type 2

- Liquor Store Corner Store Supermarket Convenience Store
- Gas Station Amusement/Phonograph Distributor Recycling, Salvage or Towing
- Used Car Dealer Personal Service Establishment (such as tattoo business, hair salon, tailor, etc.) Recording Studio

What other licenses/permits will you hold at this location? (check all that apply)

- Occupancy Permit Cigarette & Tobacco Gas Station Extended Hours Class "B" Tavern Weights & Measures
- Secondhand Dealer Precious Metal & Gem Other: _____

8. Legal Capacity (only if a Type 1 premises in #7 above)

Capacity 55 (Call the Milwaukee Development Center at 414-286-8211 if you have questions.)

9. Premises Description

a. Identify all area(s) of the premises that will be used in operating this business (include areas used only for storage):

1st Floor 2nd Floor Basement Storage Patio Beer Garden Sidewalk Café Deck Rooftop

Other: Describe: _____

b. Describe Location: Major Thoroughfare Secondary Street Other: _____

c. Nearest Major Cross Street: 37th Street and 38th Street

d. Describe Building: Free Standing Building Strip Mall Other: _____

e. Describe Premises Structure: Single Story Multi-Story - # of Stories 2 Other: _____

f. Describe Surrounding Area: Commercial Residential Industrial Other: _____

g. Building Owner Name: Black PagesUS Phone Number: 414-487-6656

Building Owner Address: 3710 W. Burlington St Milwaukee WI 53212

10. Hours of Operation & Customers

Will customers be entering the premises? No Yes

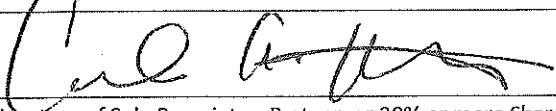
Day of the Week	Proposed Hours of Operation:		Estimated Number of Customers expected each day	Potential Age Range of Customers	Class B Tavern Applicant Only: Age Restriction (If none, write 'None')
	Open Time (include a.m. or p.m.)	Close Time (include a.m. or p.m.)			
Sunday	7am-1 ³⁰ am	1 ³⁰ am	40	All ages	
Monday	7am-1 ³⁰ am	1 ³⁰ am	40	All ages	
Tuesday	7am-1 ³⁰ am	1 ³⁰ am	40	All ages	
Wednesday	7am-1 ³⁰ am	1 ³⁰ am	40	All ages	
Thursday	7am-1 ³⁰ am	1 ³⁰ am	40	All ages	
Friday	7am-1 ³⁰ am	1 ³⁰ am	40	All ages	
Saturday	7am-1 ³⁰ am	1 ³⁰ am	40	All ages	

An Extended Hours Establishment License is required for any convenience store, filling station, personal service establishment (such as tattoo, body piercing, salon, tailor, tanning, etc.), recording studio or restaurant which is open between the hours of 12:00 a.m. and 5:00 a.m.

Alcohol Establishments Class A: 8:00 am to 9:00 pm Sunday thru Saturday
Permitted Hours of Operation: Class B: 6:00 am to 2:00 am Sunday thru Thursday, 6:00 am to 2:30 am Friday & Saturday

Entertainment Outdoor Closing Hours: 10:00pm Sunday-Thursday; 12:00am Friday & Saturday; unless a different time, either earlier or later, is established by the Common Council in its approval of the licensee's plan of operation.

11. Signature(s)



Signature of Sole Proprietor, Partner, or 20% or more Shareholder
(If there are no 20% or more shareholders,
Corporate Officer-print name/title and sign)



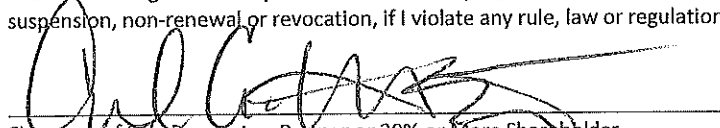
Signature of additional partner or 20% or more shareholder

See Application Information for a complete list of all required application forms.



PUBLIC ENTERTAINMENT PREMISES LICENSE SUPPLEMENTAL APPLICATION

Office of the City Clerk License Division
200 E. Wells St. Room 105, Milwaukee, WI 53202
(414) 286-2238 www.milwaukee.gov/license e-mail address: license@milwaukee.gov

PREMISES ADDRESS: <u>3710 W Burleigh Ave</u>			
TYPES OF ENTERTAINMENT (CHECK ALL THAT APPLY)			
<input type="checkbox"/> Instrumental Musicians	<input type="checkbox"/> Battle of the Bands	<input type="checkbox"/> Dancing by Performers	<input type="checkbox"/> Amusement Machines How many? _____
<input type="checkbox"/> Bands	<input type="checkbox"/> Comedy Acts	<input type="checkbox"/> Adult Entertainment/ Strippers/Erotic Dance	<input type="checkbox"/> Concerts Approx. # per year? _____
<input type="checkbox"/> Bowling Alley How many? _____	<input checked="" type="checkbox"/> Disc Jockey	<input type="checkbox"/> Wrestling	<input type="checkbox"/> Theatrical Performances Approx. # per year? _____
<input type="checkbox"/> Pool Tables How many? _____	<input type="checkbox"/> Magic Shows	<input type="checkbox"/> Patron Contests	<input type="checkbox"/> Jukebox
<input type="checkbox"/> Motion Pictures (movies by admission) - How many? _____	<input checked="" type="checkbox"/> Poetry Readings	<input checked="" type="checkbox"/> Patrons Dancing	<input checked="" type="checkbox"/> Karaoke
<input type="checkbox"/> Other: _____			
<i>Entertainment Outdoor Closing Hours: 10:00pm Sunday-Thursday; 12:00am Friday & Saturday; unless a different time, either earlier or later, is established by the Common Council in its approval of the licensee's plan of operation.</i>			
PROMOTERS/SOUND AMPLIFICATION			
Will promoters ever be used for any of the entertainment? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If Yes, Describe:			
At any time will sound amplification be used? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If Yes, Describe: <u>SPEAKERS plug in / Bluetooth</u>			
LEGAL CAPACITY OF PREMISES			
_____ (Call the Development Center at 414-286-8211 with questions.) Legal capacity determines the fee for your Public Entertainment Premises License. If you would like to request the license be approved with a lower capacity than that listed above, indicate the lower capacity here: _____. If approved, this lower capacity will print on your license and override the capacity listed on your Occupancy Permit.			
ACKNOWLEDGEMENT/SIGNATURE			
I understand that after the license has been issued, a change to the plan of operation will require a written request to change and approval from the Common Council. I agree to inform the City Clerk within 10 days of any substantial changes in the information supplied in this application. I understand that I shall not wilfully refuse to provide the services offered under this license, or add charges or require deposits not required of the general public because of race, color, sex, religion, national origin or ancestry, age, handicap, lawful source of income, marital status, sexual orientation, gender identity or expression, familial status or the fact that a person is now or has been a member of the military service, whether dressed in uniform or not; and shall not seek such information as a condition of employment, or penalize any employee or discriminate in the selection of personnel for training or promotion on the basis of such information.			
I have knowledge of the City Ordinances currently regulating public entertainment, and understand that the license may be subject to suspension, non-renewal or revocation, if I violate any rule, law or regulation of the city of Milwaukee and State of Wisconsin.			
 _____ Signature of Sole Proprietor, Partner or 20% or More Shareholder (If no 20% or more Shareholder, Corporate Officer - print name/title and sign)			

Office Use Only:

Initials: _____ Filed: _____ App: _____

Only PEP? No Yes If Yes, Queue to MPD and Email Mgrs/Team Lead (must be heard w/in 60 days)



ALCOHOL BEVERAGE & PUBLIC ENTERTAINMENT PREMISES SUPPLEMENTAL APPLICATION

Office of the City Clerk License Division
200 E. Wells St. Room 105, Milwaukee, WI 53202
(414) 286-2238 e-mail address: license@milwaukee.gov www.milwaukee.gov/license

Legal Entity Name: Lux 6 on the Ave

Premise Address: 3710 W. Berkeley

Proximity of Premises to Church, School, Daycare Center or Hospital

Is the building within 300 feet of any church, school, daycare center or hospital? No Yes

"Service Bar Only" Designation

If applying for Class B or C license, are you applying for "Service Bar Only"? No Yes
Service Bar Only means customers cannot sit at the bar. Alcohol is served to employees who serve patrons seated at tables. No stools, chairs or other articles of furniture shall be placed at the service bar for patrons to sit upon.

Business Information

a) Are you taking out this application for anyone that may not be eligible for a license? No Yes
If yes, list their name and address: _____

b) Will the agent, a partner or the individual licensee be conducting the day-to-day operations of the business? No Yes
If no, list the name and address of the person(s) who will: _____

Class B Applicants: If the agent, a partner or the individual licensee will not be conducting the day-to-day operations of the business, the person(s) listed above must obtain a Class B Managers license.

c) Does anyone else have money invested or any other interest in this business? No Yes
If yes, explain: _____

d) Have you made an agreement with anyone to repay any loan or any other payments based upon income from the business?
 No Yes If yes, list name and address: _____

Property Information (New & Transfer Applicants Only)

a) Do you own or lease the building? Own Lease

b) Who owns the fixtures (for example, coolers, etc.)? Black Pegasus (Landlord)

c) Are you purchasing the stock and/or fixtures? No Yes If yes, amount paid \$ _____

d) Total amount paid for business \$ _____

e) Total amount paid for goodwill of the business \$ _____

Goodwill comprises the reputation and customer relationships of an existing business. If the price you pay for the business exceeds the fair market value of all of the rest of the assets of the business, the excess may be considered goodwill.

f) Have you made arrangements with the seller for payment of personal property taxes? No Yes

Lease Information (New & Transfer Applicants who are leasing the premises only)

a) Date lease begins Feb 24 Ends Feb 25

b) Monthly rental \$ 1800

c) Do you have an option to renew the lease? No Yes

d) Does your lease allow for assignment to another party without the consent of the owner? No Yes

e) For what length of time have you been guaranteed occupancy (number of years)? 1 year

Lease Information (Continued)

- f) In addition to paying the monthly rental, will you have to pay anything additional to the owner of the building to guarantee performance of the lease? No Yes If yes, explain _____
- g) Does the present owner or occupant object to the granting of your license? No Yes
If yes, explain _____

Change of Agent Applicants Only

Have there been any changes to the floor plan since the last application was submitted? No Yes
If no, a new floor plan is not required. If yes, submit a new floor plan and explain the change(s):

Signature



Signature of Sole Proprietor, Partner or 20% or More Shareholder
(If no 20% or more Shareholder, Corporate Officer - print name/title and sign)

Note: All information contained in this application is subject to approval by the Common Council.
Deviating from approved plan of operation will subject licensee to citations, and/or suspension or non-renewal of the license.
Contact the License Division for information on how to request changes.

New and transfer of premises applicants must submit the following:

- Detailed floor plan
- If a restaurant, copy of the menu



FOOD DEALER LICENSE PLAN OF OPERATION

ccl-foodplan 2/28/19

OFFICE OF THE CITY CLERK, LICENSE DIVISION
CITY HALL, 200 E. WELLS ST, ROOM 105, MILWAUKEE, WI 53202
(414) 286-2238 • license@milwaukee.gov • www.milwaukee.gov/license

Legal Entity Name: Lux 6 on North Ave Hall and Lounge

Premises Address: 3710 W. Berkeley

SECTION 1 TYPE OF BUSINESS

What will be the majority of your food sales? (check one)

Restaurant Items (meals):
MEALS include, but are not limited to, chicken, ribs, sandwiches, roasted corn, baked potatoes, hot dogs, brats, tacos, nachos w/ cheese and meat, French fries, cooked or deep fried vegetables/fruit, cooked cheese curds, corn dogs, egg rolls, salads.

Retail Items (snacks and beverages):
RETAIL items include, but are not limited to, ice cream/soft serve, lemonade, snow cones, coffee, espresso, cappuccino, tea, fruit juice, smoothies, candy, dispensed soda, fruit cups, bakery, cookies, kettle corn, cotton candy, funnel cakes, fritters, tortilla chips w/ cheese.

Will it be a convenience store? Yes No

A convenience store contains less than 5,000 square feet of retail space and has, as its primary business, the sale of basic food items and in addition, sells household products or is a filling station that sells basic food items and household products.

- Bed & Breakfast
- Micro Market

All Applicants: Submit a menu or a list of food items that will be sold.

Will any wholesale business be done? No Yes If yes, what percentage of food sales will be wholesale?

Less than 25%

25% or More AND:

Restaurant items (meals) will be sold – Complete this application and also contact DATCP.

NO restaurant items (meals) will be sold - Do NOT complete this application. Contact DATCP only.

SECTION 2 FOOD PROCESSING

Will any food processing be done? No Yes

Processing is defined as assembling, grinding, cutting, mixing, baking, coating, stuffing, packing, bottling, grilling, canning, extracting, fermenting, distilling, pickling, freezing, drying, smoking, or packaging.

SECTION 3 FOOD REQUIRING TEMPERATURE CONTROL

Will any food that requires temperature control be sold? No Yes
(includes dairy products such as milk, cheese, and ice cream, fish, shellfish, meat, poultry)

If yes, list the types of food items: Milk, cheese, Ice Cream, Meat, fish, poultry

SECTION 4 DETAILS OF OPERATION

Will you have seating on site for dining? No Yes

Will you be doing any catering? No Yes

Will you be doing any delivery? No Yes

Will you have outdoor activities? No Yes - Check all that apply: Bar Cooking/Grilling Dining

Will you have a drive thru window? No Yes - Are hours different from inside? No Yes
 If Yes, provide drive thru hours: _____

Will scales or barcode scanners be used? No Yes - You must also apply for a Weights & Measures License.

SECTION 5 ADDITIONAL SITES

Where will food be prepared and/or sold?
 At a single site At multiple sites: How many? _____ (for example, a hotel with several dining rooms or bars)
 If multiple sites, attach a Food Dealer Additional Site Addendum (ccl-foodadd) for each additional site.

SECTION 6 CONSTRUCTION OR CHANGES

Are you planning any construction, remodeling or equipment changes?
 No If No, SKIP to Section 7
 Yes If Yes, check all that apply: New construction of a building Renovation or remodeling
 Construction changes to existing building Equipment changes only

Provide a brief description of the changes: _____
 Start date: _____
 Name, Address & Phone Number of Architect: _____

 Name, Address & Phone Number of Contractor: _____

SECTION 7 ALCOHOL BEVERAGES

Are you applying for an alcohol beverage license?
 No If No, SKIP to Section 8
 Yes If YES, if your food license is approved prior to the alcohol license, when do you want the food license issued?
 Immediately At the same time as the alcohol license

SECTION 8 ACKNOWLEDGEMENTS & SIGNATURE

You must initial each item confirming your understanding:

SL CK I understand the Health Department must conduct an inspection and advise the License Division of their approval before the license may be issued.

SL CK I understand I must obtain an occupancy permit from the Department of Neighborhood Services and an inspection may be required. Neighborhood Services must advise the License Division of their approval before the license may be issued.

SL CK I understand the district alderperson will review and either support or object to my application. If he/she objects, I may appeal and be scheduled to appear before the Licenses Committee. The Licenses Committee will then make a recommendation to the Common Council. The Common Council must grant the license before it may be issued.

SL CK I understand proof of payment for all license fees must be on file in the License Division before the license may be issued and the license must be issued and posted in my establishment prior to opening for business.

SL CK I will not operate my food business until the license has been issued and posted in the establishment.

Signature of Sole Proprietor, Partner, or 20% Shareholder: Shere Allen

Signature of Additional Partner: [Signature]

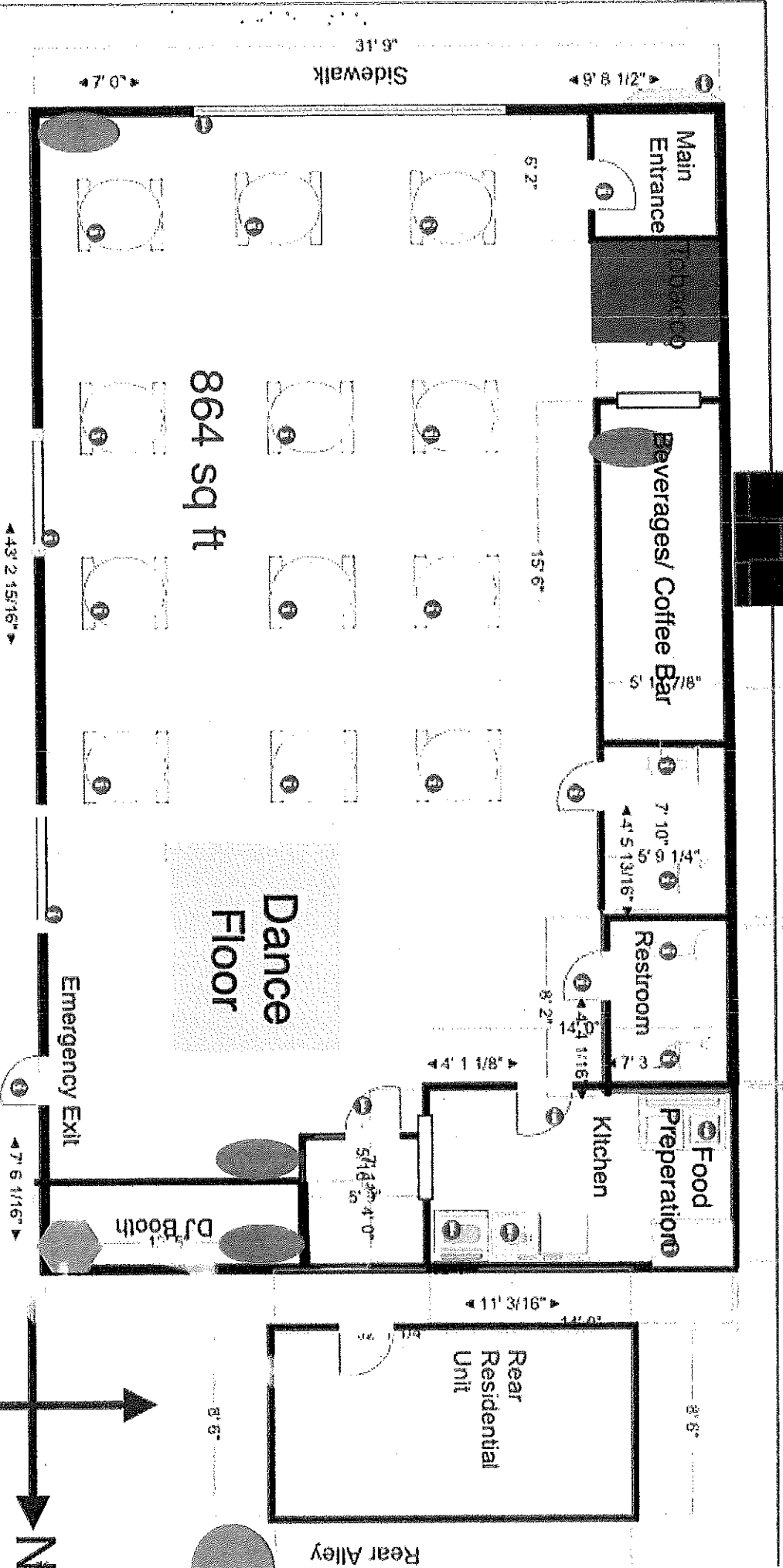
N 38th Street

West Side Of Building

10' 10 5/8"

7' 6"

7' 11"



Sidewalk

47' 0"

21' 9 5/8"

5' 2"

15' 6"

7' 10" 5/8"
4' 5 13/16"

8' 2"

4' 1 1/8"

5' 11 1/2" 4' 0"

11' 3 1/16"

8' 6"

8' 5"

53' 1"

East Side Of Building

43' 2 15/16"

Emergency Exit

7' 6 1/16"

3710 W Burleigh

N 37th Street

Lux6 Hall and Lounge

