

CITY OF MILWAUKEE OFFICE OF THE CITY CLERK

Tuesday, September 12, 2023

COMMITTEE MEETING NOTICE

AD 12

SMITH, Johnathan L, Agent AMMON CORP. 500 W MAPLE St Milwaukee, WI 53204

You are requested to attend a hearing which is to be held in the Council Chambers, Third Floor, City Hall:

Tuesday, September 19, 2023 at 08:45 AM

Regarding:

Your Rooming House License Application as agent for "AMMON CORP." for "AMMON CORP." at 500 W MAPLE 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

BY:

Jim Cooney

License Division Manager

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



CITY OF MILWAUKEE OFFICE OF THE CITY CLERK

Tuesday, September 12, 2023

COMMITTEE MEETING NOTICE

AD 12

SMITH, Johnathan L, Agent AMMON CORP. 5351 N 34TH ST Milwaukee, WI 53209

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Tuesday, September 19, 2023 at 08:45 AM

Regarding:

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MAPLE St.

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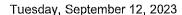
JIM OWCZARSKI, CITY CLERK

BY:

Jim Cooney

License Division Manager

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







Notice of Public Hearing

Blank Notice

SMITH, Johnathan L, Agent AMMON CORP. at 500 W MAPLE St Rooming House License Application

Tuesday, September 19, 2023 at 8:45 AM

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 9/19/2023 at 8:45 AM 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 phone or 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 | 1701 S 5TH ST | MILWAUKEE, WI 53204-3501 |
| CURRENT OCCUPANT | 1724 S 6TH ST | MILWAUKEE, WI 53204-3502 |
| CURRENT OCCUPANT | 1724A S 6TH ST | MILWAUKEE, WI 53204-3502 |
| CURRENT OCCUPANT | 1724B S 6TH ST | MILWAUKEE, WI 53204-3502 |
| CURRENT OCCUPANT | 1724C S 6TH ST | MILWAUKEE, WI 53204-3502 |
| CURRENT OCCUPANT | 1730 S 6TH ST | MILWAUKEE, WI 53204-3502 |
| CURRENT OCCUPANT | 1730B S 6TH ST | MILWAUKEE, WI 53204-3502 |
| CURRENT OCCUPANT | 1731 S 5TH ST | MILWAUKEE, WI 53204-3501 |
| CURRENT OCCUPANT | 1734 S 6TH ST | MILWAUKEE, WI 53204-3502 |
| CURRENT OCCUPANT | 1821 S 5TH ST | MILWAUKEE, WI 53204-3901 |
| CURRENT OCCUPANT | 1821A S 5TH ST | MILWAUKEE, WI 53204-3901 |
| CURRENT OCCUPANT | 1825 S 5TH ST | MILWAUKEE, WI 53204-3901 |
| CURRENT OCCUPANT | 501 W MAPLE ST | MILWAUKEE, WI 53204-3506 |
| CURRENT OCCUPANT | 501 W MAPLE ST# A | MILWAUKEE, WI 53204-3506 |
| CURRENT OCCUPANT | 505 W HISTORIC MITCHELL ST# A | MILWAUKEE, WI 53204-3510 |
| CURRENT OCCUPANT | 505 W HISTORIC MITCHELL ST# B | MILWAUKEE, WI 53204-3510 |
| CURRENT OCCUPANT | 505 W MAPLE ST | MILWAUKEE, WI 53204-3506 |
| CURRENT OCCUPANT | 505A W MAPLE ST | MILWAUKEE, WI 53204-3506 |
| CURRENT OCCUPANT | 505B W MAPLE ST | MILWAUKEE, WI 53204-3506 |
| CURRENT OCCUPANT | 505C W MAPLE ST | MILWAUKEE, WI 53204-3506 |
| CURRENT OCCUPANT | 508 W MAPLE ST | MILWAUKEE, WI 53204-3505 |
| CURRENT OCCUPANT | 508 W MAPLE ST# A | MILWAUKEE, WI 53204-3505 |
| CURRENT OCCUPANT | 508 W MAPLE ST# B | MILWAUKEE, WI 53204-3505 |
| CURRENT OCCUPANT | 508 W MAPLE ST# C | MILWAUKEE, WI 53204-3505 |
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| CURRENT OCCUPANT | 531 W MAPLE ST | MILWAUKEE, WI 53204-3506 |
| CURRENT OCCUPANT | 533 W MAPLE ST | MILWAUKEE, WI 53204-3506 |
| | | |

CURRENT OCCUPANT CURRENT OCCUPANT CURRENT OCCUPANT

CURRENT OCCUPANT

537A W HISTORIC MITCHELL ST 537B W HISTORIC MITCHELL ST 538 W MAPLE ST

539 W MAPLE ST 539A W MAPLE ST

Blank Notice

Total Records: 51

Radius 250.0 feet and Center of the Circle: 500 W Maple St

MILWAUKEE, WI 53204-3510 MILWAUKEE, WI 53204-3510 MILWAUKEE, WI 53204-3506 MILWAUKEE, WI 53204-3506 MILWAUKEE, WI 53204-3506



BUSINESS LICENSE PLAN OF OPERATION

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. T | ype of Business | | | |
|---------|--|--|--|--|
| Applyir | ng 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 | e a detailed description of the type of business you plan on operating: | | | |
| K | coming House | | | |
| Do you | have any experience operating this type of business? No Ves If yes, explain: | | | |
| 2. B | usiness Operations | | | |
| a. | Proposed Opening Date: 1, 2033 | | | |
| b. | b. Is this premise under construction? W No Yes If yes, list estimated completion date: | | | |
| c. | c. Is this a franchise? No Yes | | | |
| d. | d. Is this premises currently licensed? No 🗌 Yes If yes, list type of license: | | | |
| e. | | | | |
| f. | Do you have future plans for other businesses, licenses or permits at this location? No YYes | | | |
| | If yes, explain: Office Area in lower building | | | |
| g. | Have you previously held an Extended Hours License in Milwaukee? 💋 No 🔲 Yes | | | |
| | If yes, list address(es): | | | |
| h. | h. Are other businesses operating in the same building? \(\) No \(\) Yes If yes, describe: \(\) Street building? | | | |
| 3. Li | tter & Noise | | | |
| a. | How are grounds kept clean? Sweep Pressure Wash Pick Up Litter Other: | | | |
| b. | o. How often will grounds be cleaned? Daily Weekly As Needed Monthly Other: | | | |
| C. | Grounds cleaned by: Licensee Building Owner Employees Hired Maintenance Other: | | | |
| d. | d. How are noise issues prevented and/or addressed? Security Manager approaches customer(s) Call Police | | | |
| | Signs Posted Other: Hallway Rooming House | | | |
| e, | Will a sound amplification system be used? No Yes If yes, describe: | | | |
| 4. Sı | moking & Sanitation | | | |
| a. | Are there designated outdoor smoking areas? No Yes If yes, describe: | | | |
| b. | Number of Garbage Cans: Inside: 1 Locations: Stone and 7100R | | | |
| | Outside: Locations: Lear Bully | | | |
| c. | Is a crowd control barrier used? Z No Yes If yes, describe: | | | |
| d. | How many restrooms are on the premises? 2 | | | |
| e. | Name of solid waste contractor: Advanced Disposal Wwaste Management Other: | | | |
| | , | | | |

| 5. Security | | | | | | |
|---|--|-----------------------------|-----------------------------|---|--|--|
| | and describe the backing security | | | | | |
| | Is there a loading zone? No Yes If yes, describe the loading area security plan: | | | | | |
| b. Is there a loading zone? | ✓ No ☐ Yes IT yes, o | describe the i | oading area security pla | .n: | | |
| } | | | | | nd answer the following: | |
| | sponsibilities? | | | | : | |
| is security equipm | ient used? [] No [] | Yes If yes, de | escribe <u> </u> | · rmi | The same of the sa | |
| d. Will there be security car Log Levi de | List their licensing, certification, or training credentials and list locations: Public hallway and list locations: Public hallway and list locations: | | | | | |
| e. Will searches/identificat | | THE SECURE OF STREET STREET | No 🗌 Yes If yes, descri | be | | |
| 6. Percentage of Sales | (must total 100 | %) | | | | |
| Alcohol% | Food | % | Secondhand Merchandis | e | Precious Metals & Gems | |
| Entertainment% | Cigarettes | % | % | | % | |
| Pawnbroker Activity% | Salvaged Materials (such as scrap metal) | hody piercing calon tail | | or, | Other 100 % Describe: 11 Hz | |
| 7. Businesses/License | s on the Premise | s (check a | all that apply): | | | |
| Type 1 Full Service Restaurant | Cafe/Coffee Shop | □ Doll or E | ast Food Restaurant | m _{h-h-h} | in this state | |
| ☐ Night Club ☐ Tavern | | Cocktail | | Private/Fraternal/Veterans Club Teen Club | | |
| Banquet Hall | Sports Facility | Bowling | _ | I recirci | lub | |
| Hotel/Motel: Number of Flo | • | | g House: Number of Floo | ors: | | |
| Number of Ro | ooms: | | Number of Roo | _ | | |
| Type 2 Liquor Store Convenience Store Supermarket Convenience Store | | | | | ience Store | |
| Gas Station | Gas Station Amusement/Phonogr | | raph Distributor | | Recycling, Salvage or Towing | |
| Used Car Dealer | Used Car Dealer Personal Service Establishment Recording Studio (such as tattoo business, hair salon, tailor, etc.) | | ng 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) | | | | | | |
| (i | _ | | 1-286-8211 if you have ques | stions.) | | |

| 9. Pr | emises D | escription | | | | | |
|---|--|---|--|----------------------------|---------------------------------------|--|---|
| a. Identify all area(s) of the premises that will be used in operating this business (include areas used only for storage): □1 st Floor □2 nd Floor □3asement Storage □Patio □Beer Garden □Sidewalk Café □Deck □Rooftop | | | | | | | |
| [| b. Describe Location: Major Thoroughfare Secondary Street Other: South 5th Street. | | | | | | |
| b. [| Describe Locat | ion: Major Thoroughfare | Secondary Street O | ther: So | outh E | th Stee | · t |
| | | Cross Street: Mitchel | | | | | |
| d. E | Describe Buildi | ing: 🗹 Free Standing Buildir | ng Strip Mall Other: | | | | |
| e. [| Describe Prem | îses Structure: 🔲 Single Sto | ory Multi-Story - # of Sto | ries | Cther | • | |
| f. [| Describe Surro | ounding Area: 🔲 Commercia | al 🕅 Residential 🔲 Industr | rial 🔲 Ot | :her: | | |
| g. E | Building Owne | r Name: Amma | Corp. | Phone Nu | ımber: <u>86</u> | 6-200- | 2820 |
| E | 3uilding Owne | r Name: <u>Ammor</u> r Address: <u>500 CO.</u> | maple Ste. | <u>m'</u> | hu, wa | 53a04 | |
| | | Operation & Custor | | | | | |
| Will cust | tomers be ent | ering the premises? No | Yes | | | The All Control And All Contro | |
| | | Proposed Hour | s of Operation: | Estima | ted Number | Potential | Class B Tavern |
| Day of | the Week | | | of Cı | ustomers | Age Range | Applicant Only: |
| | a da Gualdia Musulia (Neso) | Open Time (include a.m. or p.m.) | Close Time (include a.m. or p.m.) | expected each day | | of Customers | Age Restriction (If none, write 'None') |
| Sı | ınday | Octo | · · · · · · · · · · · · · · · · · · · | | | ************************************** | |
| | | 12 Am _ | 11:59 | <u> </u> | | 18-00g | |
| M | onday | | | | 1 | | |
| Tu | esday | $\left \frac{\partial}{\partial x} \right ^{\theta}$ | | | | | |
| Wed | dnesday | | | | | | |
| Thi | ursday | (| | | | | |
| F | riday | | / | | | | |
| Sat | Saturday | | | | | | |
| An Exter | nded Hours Es , salon, tailor, | tablishment License is requir tanning, etc.), recording stud | ed for any convenience store | a, filling st en betwee | ation, personal | l service establish 12:00 a.m. and 5 | ment (such as tattoo, body :00 a.m. |
| Alcohol | Establishment ed Hours of Op | s Class A: 8:00 | am to 9:00 pm Sunday thru S am to 2:00 am Sunday thru T | Saturday | · · · · · · · · · · · · · · · · · · · | | |
| Entertai | nment Outdoo | or Closing Hours: 10:00 | Opm Sunday-Thursday; 12:00 tablished by the Common Co | am Friday | y & Saturday; u | nless a different t | ime, either earlier or later. |
| 11. Si | ignature(| | | | | | |
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| $-\sqrt{4}$ | mott | h L | | | | | |
| Signatur (If ti | e of Sole Prop here are no 20 | orietor, Partner, or 20% or mo 0% or more shareholders, | ore Shareholder | Signature | of additional p | artner or 20% or | more shareholder |
| | | -print name/title and sign) | | | | | |

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



DWELLING FACILITIES LICENSE 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: Ammon CORP. |
|---|
| Premises Address: 500 W. MAPIL STE. MILW. WIT 53204 |
| Plan of Operation |
| Is the applicant (sole proprietor, partners, or agent of Corp/LLC) a resident of Milwaukee County? No. a local representative (natural person) residing in Milwaukee County must be appointed. Provide the person's name and street address. P.O. Boxes are not acceptable. |
| Name of Person: Phone number: |
| Street Address: (include city and zip code) |
| Please describe your plans to train employees to recognize and report guest or resident behaviors that are indicative of human trafficking at the premises: all limitages will be required to water themon lond's enviring with the mon lond's enviring the trafficking of the water to water the water the water to water the water |
| Signature |
| I shall not willfully refuse to provide those services offered under this license or add charges or require deposits not required of the general public because of a person's place of residence 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) |

NORTH

500 W Maple ST. Milwaukee WI 53204

Rooming house Maple st COMPLETE 2. Floor trash can - t = 14 inside 2 outside Total square is about 1357sq ft "9*L* .6~ Main Hall -59'4'-Maple street HTUOS

South 5th street

EAST