

CITY OF MILWAUKEE OFFICE OF THE CITY CLERK

Thursday, June 15, 2023

COMMITTEE MEETING NOTICE

AD 05

JAISWAL, Punit, Agent THE MIRAGE, INC. 10950 W GOOD HOPE Rd Milwaukee, WI 53224

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.

Tuesday, June 27, 2023 at 09:10 AM

The access code is https://meet.goto.com/459516781. If you wish to call in: +1 (646) 749-3122 and use Access Code: 459-516-781.

Please see the enclosed best practices document for further instructions.

Regarding:

Your Class B Tavern, Public Entertainment Premises and Food Dealer License Applications Requesting Instrumental Musicians, Disc Jockey, Jukebox, Bands, Karaoke, 5 Amusement Machines and Patrons Dancing as agent for "THE MIRAGE, INC." for Mirage" at 10950 W GOOD HOPE Rd.

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

Jim Cooney

License Division Manager



CITY OF MILWAUKEE OFFICE OF THE CITY CLERK

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JIM OWCZARSKI, CITY CLERK

Υ:____

Jim Cooney

License Division Manager

Date: 06/02/23 Officer: T. Geniesse

City of Milwaukee Police Department 90-5-1.5 Crime Prevention Survey Tavern Inspection

Name of Premise: The Address: 10950 W. Go Phone: N/A	_	d		
Owner: Punit Jaiswal Owner address: 2110 City State Zip: Glenda Owner Phone: 414-40 Owner email: subway	W Woodbu ale, WI 5320 6-3827	ry Ln)9	146-09 I	Exp 12/23
Licensee/Agent: Punit Home Address: 2110 City State Zip: Glenda Phone: 414-406-3827 Email: subwayforyou	W. Woodbuale, WI 532	09		
Preferred contact: Pur	nit Jaiswal			
Location currently op	en:	YES	\boxtimes	NO
Projected open date: 1	1/23			
Day's open: S	м []т []у	/]F []SA	A 🛮 ALL
Hours of Operation:	Mon: 11a Tue: 11a Wed: 11a Thu: 11a Fri: 11a			□24 hours □Y ☑N
Premise Type:	☐Tavern/ ☐Restaur ☐Other:			
Licenses currently he	ld:			

Alcohol:	YesNo Class:	#:
Tobacco:	☐Yes ☐No #:	
Food:	Yes No #: frest 00	018463
Extended Hours:	Yes No #:	
Secondhand Dealer:	Yes No Type:	#:
Other:	Yes No Type:	#:
Other:	Yes No Type:	#:
Exterior Survey:		
	location clean? XYes	
	ocation? (Check all the ap	
a. Park	oution. (Ontook and and a	>P.Y.)
b. School		
	tar	
c. ⊠Youth Cent d. □Church	101	
Lauren	fac harry many	
	f so, how many	
f. Residential		
g. Other busir	lesses	
h. Other:	A 1.1 Cat o forest on to	-4-41-4-4-4-4-4-MX7
		nto the interior Yes No
		ion from the outside Yes _No
	s free of signage Yes [IN0
6. Is there a parking lot		
7. Is the parking lot clear	ın? ⊠Yes ∐No	
8. Off-Street parking]Yes XINo	
9. Is the parking lot wel		
10. Valet Parking Yes		
	ave a guard? 🔲 Yes 🔯	
	ave cameras? Yes	
Are there areas where	e a person could conceal	themselves Yes No
12. Is there exterior light		es it appears to be adequate ∑Yes ☐No
13. Exterior Payphone?	□Yes ⊠No	·
14. Are there No Loiterin	ıg Signs posted? ∐Yes	No Will be posting them
15. Are there exterior sec	curity cameras 🛛 Yes 🗌	No How Many: 8
16. Are the address numl	pers prominently display	ed and easy to see ∐Yes ⊠No
	•	
Camera Survey:		
17. Does this location ha	ve security cameras?	Yes No
18. Are they in working		
19. What format are the		
a. Color	☐Yes ☐No	
b. Digital	Yes No	4
c. Recorded	Yes No	
	L	Will be setting up with a 30 day system
21. Are there exterior car		
22. Are there interior car		
		ded digital images/footage? ☐Yes ☒No
LU, LU GLI CILIDAU Y COO ILLI		

	24. Cameras located in parking lot Yes No How many
In	25. What is the planned capacity 299 26. What is the minimum number of employees That will be on premise 5 27. Is the storeowner willing to be a standing complainant regarding loitering? A standing complainant regarding loitering? A standing complaint form and give them two of the commercial signs A standing complaint form and give them two of the commercial signs A standing complaint form and give them two of the commercial signs A standing complaint form and give them two of the commercial signs A standing complaint form and give them two of the commercial signs A standing complaint form and give them two of the commercial signs A standing complaint form and give them two of the commercial signs A standing complaint form and give them two of the commercial signs A standing complaint form and give them two of the commercial signs A standing complaint form and give them two of the commercial signs A standing complaint form and give them two of the commercial signs A standing complaint form and give them two of the commercial signs A standing complaint regarding loitering? A s
<u>Se</u>	<u>curity</u>
	33. How many security personnel are going to be employed: None 34. How ill they be deployed: Interior
	No security measures planned at this time

ADDITIONAL COMMENTS/RECOMMENDATIONS:

The Mirage will be a restaurant and serve alcohol. They will have a bar and DJ for private events.

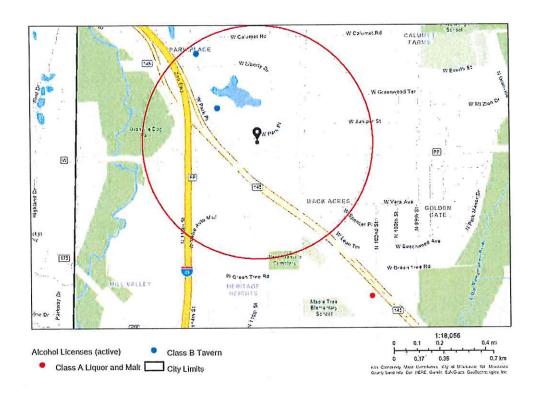


City Concentration Map 10950 W GOOD HOPE RD

Area of Interest (AOI) Information

Area: 21,862,585.6 ft2

May 22 2023 15:22:04 Central Daylight Time



10950 W GOOD HOPE RD

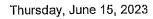
Summary

Name	Count	Area(ft²)	Length(mi)
Alcohol Licenses	2		

Alcohol Licenses

#	Legal Entity	Trade Name	Licensee	Address	License Type Name	Total Capacity	Expiration Date	Count
1	PARK PLACE HOSPITALITY, LLC	HILTON GARDEN INN	Judith C Kiefer, Agt	11600 W PARK PL	Class B Tavern License	136	9/23/2023, 7:00 PM	1
2	Wahhab Seva Enterprises Inc	Sababa Cafe	EDWARD E WAHHAB, Agt	11270 W PARK PL	Class B Tavern License	-	11/22/2023, 6:00 PM	1

Establishments within a 0.5 miles radius centered on area of interest.







Notice of Public Hearing

Blank Notice

JAISWAL, Punit, Agent The Mirage at 10950 W GOOD HOPE Rd

Class B Tavern, Public Entertainment Premises and Food Dealer License Applications Requesting Instrumental Musicians, Disc Jockey, Jukebox, Bands, Karaoke, 5 Amusement Machines and Patrons Dancing

Tuesday, June 27, 2023 at 9:10 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 6/27/2023 at 9:10 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	10620 W GOOD HOPE RD	MILWAUKEE, WI 53224-3840
CURRENT OCCUPANT	10621 W GOOD HOPE RD	MILWAUKEE, WI 53224-3841
CURRENT OCCUPANT	10705 W GOOD HOPE RD	MILWAUKEE, WI 53224-3603
CURRENT OCCUPANT	10727 W GOOD HOPE RD	MILWAUKEE, WI 53224-3603
CURRENT OCCUPANT	10743 W GOOD HOPE RD	MILWAUKEE, WI 53224-3603
CURRENT OCCUPANT	10745 W GOOD HOPE RD	MILWAUKEE, WI 53224-3603
CURRENT OCCUPANT	10825 W GOOD HOPE RD	MILWAUKEE, WI 53224-3605
CURRENT OCCUPANT	7057 N 107TH ST	MILWAUKEE, WI 53224-4301
CURRENT OCCUPANT	7077 N 107TH ST	MILWAUKEE, WI 53224-4301
CURRENT OCCUPANT	7101 N 107TH ST	MILWAUKEE, WI 53224-4303
CURRENT OCCUPANT	7120 N 107TH ST	MILWAUKEE, WI 53224-4304
CURRENT OCCUPANT	7123 N 107TH ST	MILWAUKEE, WI 53224-4303
CURRENT OCCUPANT	7140 N 107TH ST	MILWAUKEE, WI 53224-4304
CURRENT OCCUPANT	7230 N 107TH ST	MILWAUKEE, WI 53224-3810
CURRENT OCCUPANT	7260 N 107TH ST	MILWAUKEE, WI 53224-3810
CURRENT OCCUPANT	7371 N 107TH ST	MILWAUKEE, WI 53224-3811
CURRENT OCCUPANT	7425 N 107TH ST	MILWAUKEE, WI 53224-3705
plant. Matta-		

Blank Notice

Total Records: 17

Radius 1,000 feet and Center of the Circle: 10950 W Good Hope Rd

ccl-busplan 5/12/2020



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

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: Bar and Restaurant
	. Datana Nosidalah
Do you	ı have any experience operating this type of business? 🔲 No 🔳 Yes 💮 If yes, explain: Operating Restaurants from last 20 Years
a.	Proposed Opening Date: 07/15/2023
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: Class B
e.	Is the current licensee operating?
f.	Do you have future plans for other businesses, licenses or permits at this location?
	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:
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? 🔳 Nø 🗌 Yes If yes, describe:
L_{i}	
a.	Are there designated outdoor smoking areas? 🔲 No 🎹 Yes If yes, describe: Side of the building
b.	Number of Garbage Cans: Inside: 3 Locations: Bar Kitchen Backersom
	Outside: Locations: Front Enterance, Patio Area
c.	Is a crowd control barrier used? 🔳 No 🗌 Yes — If yes, describe:
d.	How many restrooms are on the premises? 2
e.	Name of solid waste contractor: Advanced Disposal Waste Management Other:
1	

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a.	Are there	onsite parking s	paces? 🗌 No 🔳 Yes	If yes, how i	many? <u>75</u> and	d describe	the parking security
		urity Cameras					
b.	Is there a (oading zone?	No Yes If yes, d	escribe the lo	pading area security plan	1:	
					15		d anguar the following:
c.					s If yes, how many?		o auzwer the following:
					escribe		
					sq isc		
d.							E,W,N,S of the building,
u.	Covering	parking lot, E	interence, Exit, Patio,	Inside Bar	and Restaurant, Inside	Kitchen	
e.					No Yes If yes, descril		
	el partiral del monda si La partiral del monda si				agentical as any contract on a state of property to the state of the s	e nigras es es estado es es estado	and the second s
Alcoh	ıol	60 %	Food <u>40</u>	%	Secondhand Merchandis	e	Precious Metals & Gems
Entor	tainment	0 %	Cigarettes 0	%	0%		0%
Litter	tannijene.		Salvaged Materials 0	%	Personal Services (such a		Other%
Pawr	ibroker Activ	rity%	(such as scrap metal)	/\	body piercing, salon, tails tanning, etc.) 0	or, %	Describe:
L	realising on 125° 257° Robinson	a roma desira di Arroman Grandelli I Carella		Grant of the State	the filter is referred to be found a property than an interpretation of the	ada se abatan ing malatanena se	and the second s
T_{ij}							
Type	1						
	1 Full Service F	Restaurant	Cafe/Coffee Shop		ast Food Restaurant	***	/Fraternal/Veterans Club
		Restaurant	Tavern	Cocktail	l Lounge	☐ Private	
	Full Service F			Cocktail	Lounge Alley	Teen C	lub
	Full Service F Night Club Banquet Hall	l : Number of Fl	Tavern Sports Facility oors:	Cocktail	l Lounge ; Alley ig House; Number of Flot	Teen C	lub
	Full Service F Night Club Banquet Hall Hotel/Motel	l : Number of Fl	Tavern Sports Facility	Cocktail	Lounge Alley	Teen C	lub
Type	Full Service F Night Club Banquet Hall Hotel/Motel	I : Number of Fl Number of R	Tavern Sports Facility oors:	Cocktail	Lounge Alley og House; Number of Floo Number of Roc	Teen C	lub
Type	Full Service F Night Club Banquet Hall Hotel/Motel	I : Number of Fl Number of R	Tavern Sports Facility oors:	Cocktail Bowling Roomin	l Lounge ; Alley ng House; Number of Floo Number of Roc arket	Teen Conver	lub
Type	Full Service F Night Club Banquet Hall Hotel/Motel 2 Liquor Store	l: Number of Fl Number of R	Tavern Sports Facility oors: coms: Carner Store	Cocktail Bowling Roomin Superm	I Lounge ; Alley og House; Number of Floo Number of Roc arket	Teen Cors: oms: Conver	lub
Type	Full Service F Night Club Banquet Hall Hotel/Motel 2 Liquor Store Gas Station Used Car De	I : Number of Fl Number of Ro	Tavern Sports Facility cors: Corner Store Amusement/Phono	Cocktail Bowling Roomin Superm graph Distribu stablishment iness, hair salc	I Lounge g Alley g House; Number of Floo Number of Roc arket tor on, tallor, etc.)	Teen Cors: oms: Conver	lub nience Store ng, Salvage or Towing
Type	Full Service F Night Club Banquet Hall Hotel/Motel 2 Liquor Store Gas Station Used Car De	Number of Fl Number of Re ealer	Tavern Sports Facility cors: Corner Store Amusement/Phono Personal Service E (such as tattoo bus	Cocktail Bowling Roomin Superm graph Distribu stablishment iness, hair salc	I Lounge g Alley g House; Number of Floo Number of Roc arket tor on, tallor, etc.)	Teen Conver	lub nience Store ng, Salvage or Towing ling Studio
Type	Full Service F Night Club Banquet Hall Hotel/Motel 2 Liquor Store Gas Station Used Car De nat other lice	Number of Fl Number of Re Paler Pancy Permits will	Tavern Sports Facility cors: Corner Store Amusement/Phono Personal Service E (such as tattoo bus	Cocktail Bowling Roomin Superm graph Distribu stablishment iness, hair salc	I Lounge g Alley g House; Number of Floo Number of Roc arket ttor on, tallor, etc.)	Teen Conver	lub nience Store ng, Salvage or Towing ling Studio
Type	Full Service F Night Club Banquet Hall Hotel/Motel 2 Liquor Store Gas Station Used Car De nat other lice	Number of Fl Number of Re Paler Pancy Permits will	Tavern Sports Facility cors: Corner Store Amusement/Phono Personal Service E (such as tattoo bus you hold at this location Cigarette & Tobacco	Cocktail Bowling Roomin Superm graph Distribu stablishment iness, hair salc	I Lounge g Alley g House; Number of Floo Number of Roc arket ttor on, tallor, etc.)	Teen Conver	lub nience Store ng, Salvage or Towing ling Studio

a. Identify all area(s) of the premises that will be used in operating this business (include areas used only for storage):	(SECOND SERVICE A SPORT A A
■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: Goodhope Road	
d. Describe Building: Free Standing Building Strip Mail Other:	
e. Describe Premises Structure: Single Story Multi-Story - # of Stories Other:	-
f. Describe Surrounding Area: Commercial Residential Industrial Other:	
g. Building Owner Name: Milvankee Investment 1 1 cc Phone Number: 414-803-2700	
Building Owner Address: 7213 M. Tentonie Ave., Milvakue, WZ. 53209	
	action contracts
Will customers be entering the premises? No Yes	
11am 2PM 100 21+	
11am 2 lm 100 215	
11 am 2 lm 400 21+	
11am 2Pm #50 21+	
11am 21m 150 21x	
Ap Exerted Hoursestablishment ligense is requised for any convenience stone, filling station, personal service establishment (such a applicable) salon, tallor, tanning, etc.); recording studio of reactivent which is open between the hours of 12 000 and 3100 and 31	s tattoo, body
Permitted Hours of Operation: Glassis: 6100 am to 2:00 am Sunday thru Thursday 6:00 am to 2:30 am Filday & Saturday (
Entertainment Butdoor Closing Haurs: 110:00pm Sunday-Thursday, 10:00am Enday, 8 Santiday, unless a different time, either is trackly to the licensee's plan of operation	antier oxilater.
图: [2] [1] [2] [3] [2] [3] [3] [3] [3] [4] [4] [4] [4] [4] [4] [4] [4] [4] [4	
Signature of Sole Proprietor, Partner, or 20% or more Shareholder Signature of additional partner or 20% or more shareholder	older
(If there are no 20% or more shareholders, Corporate Officer-print name/title and sign)	



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: THEMIRAGE INC.
Prem	ise Address: 10950 W Good Hope Rd, Milwaukee, WI-53224
is the	e building within 300 feet of any church, school, daycare center or hospital? 📝 No 🔲 Yes.
e de sal de l'angle (111 - 151)	
lf an	plying for Class B or C license, are you applying for "Service Bar Only"?
n ap Serv	ice Bar Only means customers cannot sit at the bar. Alcohol is served to employees who serve patrons seated at tables.
No s	tools, chairs or other articles of furniture shall be placed at the service bar for patrons to sit upon.
	Are you taking out this application for anyone that may not be eligible for a license?
a)	Are you taking out this application for anyone that may not be eligible for a license? V No Yes
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:
	The second secon
	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? Ves
-,	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
(a)	Do you own or lease the building?
b)	Who owns the fixtures (for example, coolers, etc.)?
(c)	Are you purchasing the stock and/or fixtures?
d)	Total amount paid for business \$\frac{0}{2}
e)	Total amount paid for goodwill of the business \$\frac{0}{}
	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
1	
	Date lease begins 07/20/2023 Ends 07/20/2043
a)	Date lease begins 07/20/2023 Ends 07/20/2043 Monthly rental \$ 10,000
b) c)	Do you have an option to renew the lease? No V 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)? 20
1	

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 B) Does the present owner or occupant object to the granting of your license? No Yes If yes, explain
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 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

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FOOD DEALER LICENSE PLAN OF OPERATION

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: The MIRAGE INC.
Premises Address: 10950 W Good Hope Rd, Milwaukee, WI- 53224
SECTION II. TYPE OF BUSINESS
What will be the majority of your food sales? (check one)
Restaurant Items (meals): MEALS include, but are not ilmited 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. POOR 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 LEOOD REQUIRING TEMPERATURE CONTROL 1
Will any food that requires temperature control be sold? No sold? No sold? No sold? No sold? No sold? No sold? No sold? No sold? No sold? No sold? No sold. If yes, list the types of food items: Milk, Cheese, Meat, Poultry

ccl-foodplan 2/28/19

SECTION'4 DETAILS OF OPERATION				
Will you have seating on site for dining? No Yes				
Will you be doing any catering?				
Will you be doing any delivery? Yes				
Will you have outdoor activities? X No Yes - Check all that apply: Bar Cooking/Grilling Dining				
Will you have a drive thru window?				
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 1				
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. IN 1997 TO THE SECTION OF CHANGES. IN 1997 TO THE SECTION OF 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 ALCOHOLBEVERAGES				
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				
SECTIONS ACKNOWLEDGENERTS & SIGNATURE				
You must initial each item confirming your understanding:				
I understand the Health Department must conduct an inspection and advise the License Division of their approval				
before the license may be issued.				
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. 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.				
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.				
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:				
Signature of Additional Partner:				

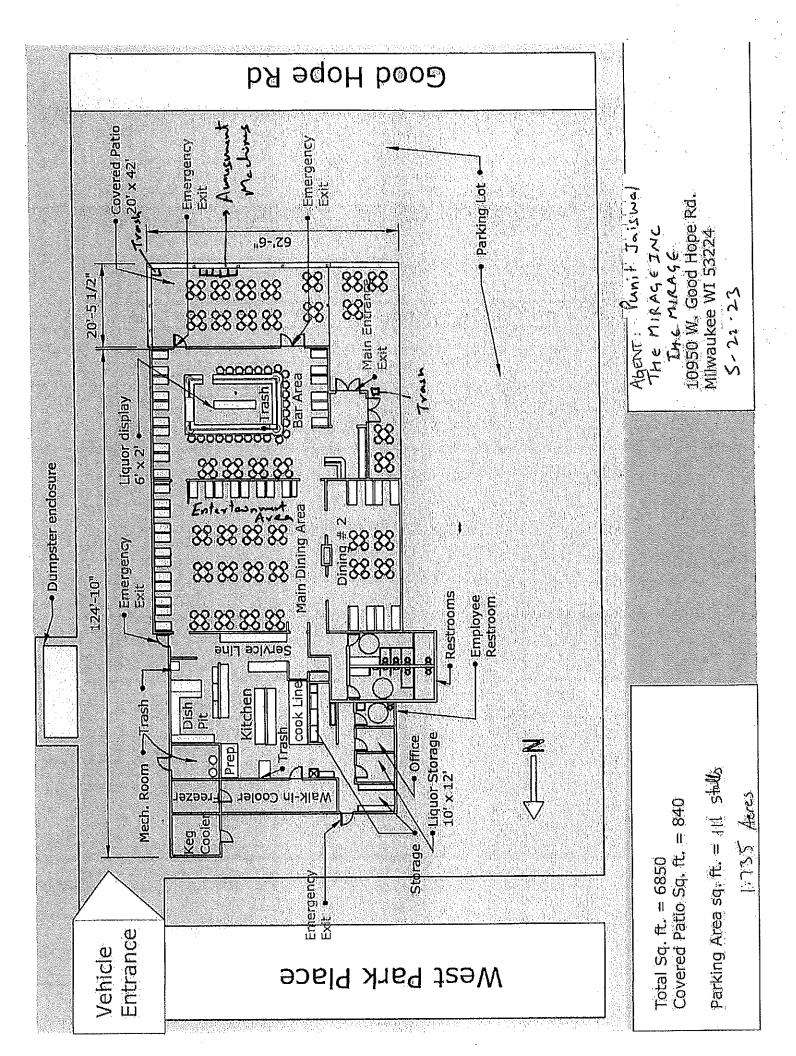


PUBLIC ENTERTAINMENT PREMISES LICENSE SUPPLEMENTAL APPLICATION

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: 10950 W Good Hope Rd, Milwaukee, WI-53224				
THE STATE OF THE PROPERTY OF THE PARTY OF TH				
✓ Instrumental Musicians	☐ Battle of the Bands	Dancing by Performers	Amusement Machines How many? 5	
✓ Bands	Comedy Acts	Adult Entertainment/ Strippers/Erotic Dance	Concerts Approx. # per year?	
Bowling Alley How many?	✓ Disc Jockey	Wresting	Theatrical Performances Approx. # per year?	
Pool Tables How many?	☐ Magic Shows	Patron Contests	☑ Jukebox	
Motion Pictures (movies by admission) - How many?	Poetry Readings	✓ Patrons Dancing	✓ Karaoke	
Other:				
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.				
PATON/OVERS/BOOKER/BOOK				
Will promoters ever be used for any of the entertainment? ☑ No ☐ Yes If Yes, Describe;				
At any time will sound amplification be used? 🗹 No 🗌 Yes If Yes, Describe:				
WHEN TO SAME TO THE SECOND SECTION OF THE PARTY OF THE PA				
(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.				
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. Lagree 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 willfully 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				
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)



MIRAGE

APPETIZERS

French Fries
Onion Rings
Mozzarella Sticks
Chicken Wings-Buffalo, BBQ, Sweet&Spicy

ENTREES

Bacon Burger Cheesesteak Burger Hamburdog Burger Veggie Burger Artichoke Pizza All Meat Mirage Pizza Chicken Tikka Pizza

DESSERT

Cookie Skilet with Vanilla Strawberry Shortcake