

## CITY OF MILWAUKEE OFFICE OF THE CITY CLERK

Monday, November 18, 2024

#### COMMITTEE MEETING NOTICE

**AD 15** 

CHABBOUH, Imed, Agent Sky Auto Sales and Repairs LLC 1900 W NORTH Av Milwaukee, WI 53205

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, December 03, 2024 at 09:00 AM

The access code is https://meet.goto.com/148237405. Please see the enclosed best practices document for further instructions.

Regarding:

Your Secondhand Motor Vehicle Dealer's License Application as agent for "Sky Auto Sales and Repairs LLC" for "Sky Auto Sales and Repairs" at 1900 W NORT (A).

There is a possibility that your application may be denied for one or more of the following reasons: Neighborhood Objections to the granting of such a license due to the creation of undesirable neighborhood problems, such as: parking and traffic problems which cause the normal flow of traffic on roadways and alleys to be impeded, loitering, littering, noise, loud music, and conduct which will have an adverse impact on the public health, safety and welfare of the community. Additionally, the over concentration of secondhand motor vehicle dealers in the neighborhood such that the concentration will have an adverse impact on the public health, safety and welfare of the neighborhood, you do not meet the statutory and municipal requirements; the appropriateness of the location to be licensed and whether the location will create undesirable neighborhood problems, whether or not you have been charged with or convicted of any felony, misdemeanor, municipal offense or other offense, the circumstances of which substantially relate to the licensed activity; and any other factors which reasonably relate to the public health, safety and welfare. See attached police report and/or written correspondence regarding this application. Please be advised the public will be able to provide information to the committee in person or in writing. The committee will receive and consider evidence regarding the above mentioned criteria.

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

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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.

# MILWAUKEE POLICE DEPARTMENT LICENSING

## CRIMINAL RECORD/ORDINANCE VIOLATION/INCIDENTS SYNOPSIS

| DATE: 07/14/23 LICENSE TYPE: UCAR NEW:  RENEWAL:  |           | No. 354379<br>Application Date: |
|---|-----------|---------------------------------|
| License Location: 1900 w North Av<br>Business Name: Sky Auto Sales                      |           |                                 |
| Licensee/Applicant: Chabbouh, Imed (Last Name, First Name, MI)  Date of Birth: 03/27/71 |           |                                 |
| Home Address: 3211 W Parnell Av<br>City: Milwaukee<br>Home Phone:                       | State: WI | <b>Zip Code:</b> 53221          |

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 03/11/15, the applicant was charged with OWI in Shorewood Village Municipal Court. On 11/04/15, he was convicted and his license was revoked for 6 months.
- 2. On 09/02/16, the applicant was charged with Injury by Negligent Use Weapon-Party to a Crime (Felony) in Milwaukee County Circuit Court.

Charge:

Injury by Negligent Use of Weapon

Finding:

Guilty

Sentence:

3 Year's Prison

Date:

03/10/17

Case:

2016CF003901



Monday, November 18, 2024



## Notice of Public Hearing

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CHABBOUH, Imed, Agent Sky Auto Sales and Repairs at 1900 W NORTH Av Secondhand Motor Vehicle Dealer's License Application

## Tuesday, December 03, 2024 at 9:00 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 12/3/2024 at 9:00 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 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 | 1937 W MONROE ST  | MILWAUKEE, WI 53205-1150 |
| CURRENT OCCUPANT | 1939 W MONROE ST  | MILWAUKEE, WI 53205-1150 |
| CURRENT OCCUPANT | 2320 N 20TH ST    | MILWAUKEE, WI 53206-1549 |
| CURRENT OCCUPANT | 2322 N 20TH ST    | MILWAUKEE, WI 53206-1549 |
| CURRENT OCCUPANT | 2323 N 19TH ST    | MILWAUKEE, WI 53206-2051 |
| CURRENT OCCUPANT | 2324 N 20TH ST    | MILWAUKEE, WI 53206-1549 |
| CURRENT OCCUPANT | 2325 N 19TH ST    | MILWAUKEE, WI 53206-2051 |
| CURRENT OCCUPANT | 2325 N 20TH ST    | MILWAUKEE, WI 53206-1550 |
| CURRENT OCCUPANT | 2325A N 20TH ST   | MILWAUKEE, WI 53206-1550 |
| CURRENT OCCUPANT | 2326 N 19TH ST    | MILWAUKEE, WI 53206-2050 |
| CURRENT OCCUPANT | 2327 N 19TH ST    | MILWAUKEE, WI 53206-2051 |
| CURRENT OCCUPANT | 2327A N 19TH ST   | MILWAUKEE, WI 53206-2051 |
| CURRENT OCCUPANT | 2329 N 20TH ST    | MILWAUKEE, WI 53206-1550 |
| CURRENT OCCUPANT | 2330 N 19TH ST    | MILWAUKEE, WI 53206-2050 |
| CURRENT OCCUPANT | 2336 N 19TH ST    | MILWAUKEE, WI 53206-2050 |
| CURRENT OCCUPANT | 2337 N 19TH ST    | MILWAUKEE, WI 53206-2051 |
| CURRENT OCCUPANT | 2337 N 19TH ST# A | MILWAUKEE, WI 53206-2051 |
| CURRENT OCCUPANT | 2338 N 19TH ST    | MILWAUKEE, WI 53206-2050 |
| CURRENT OCCUPANT | 2338 N 20TH ST    | MILWAUKEE, WI 53206-1549 |
| CURRENT OCCUPANT | 2338A N 20TH ST   | MILWAUKEE, WI 53206-1549 |
| CURRENT OCCUPANT | 2344 N 19TH ST    | MILWAUKEE, WI 53206-2050 |
| CURRENT OCCUPANT | 2344A N 19TH ST   | MILWAUKEE, WI 53206-2050 |
| CURRENT OCCUPANT | 2347 N 19TH ST    | MILWAUKEE, WI 53206-2051 |
| CURRENT OCCUPANT | 2347A N 19TH ST   | MILWAUKEE, WI 53206-2051 |
| CURRENT OCCUPANT | 2349 N 20TH ST    | MILWAUKEE, WI 53206-1550 |
| CURRENT OCCUPANT | 2349A N 20TH ST   | MILWAUKEE, WI 53206-1550 |
| CURRENT OCCUPANT | 2350 N 19TH ST    | MILWAUKEE, WI 53206-2050 |
| CURRENT OCCUPANT | 2351 N 19TH ST    | MILWAUKEE, WI 53206-2051 |
| CURRENT OCCUPANT | 2351A N 19TH ST   | MILWAUKEE, WI 53206-2051 |
| CURRENT OCCUPANT | 2352 N 19TH ST    | MILWAUKEE, WI 53206-2050 |
| CURRENT OCCUPANT | 2354 N 20TH ST    | MILWAUKEE, WI 53206-1549 |
| CURRENT OCCUPANT | 2355 N 19TH ST    | MILWAUKEE, WI 53206-2051 |
| CURRENT OCCUPANT | 2356 N 19TH ST    | MILWAUKEE, WI 53206-2050 |
| CURRENT OCCUPANT | 2356 N 20TH ST    | MILWAUKEE, WI 53206-1549 |
| Blank Notice     |                   |                          |

Blank Notice
Total Records: 34

Radius 250 feet and Center of the Circle: 1900 W North Av

ccl-busplan 5/12/2020

# MILWAUKEE

### **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.mllwaukee.gov/license e-mail address: <u>license@milwaukee.gov</u>

| 1, 7        | Type of Business   |
|-------------|--|
| Apply       | ring 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   |
|             | Cther (supplemental application for specific license also required)  |
| Provid      | de a detailed description of the type of business you plan on operating:   |
|             | Car Dealer, oil change shop  |
| Do yo       | Car Dealer, oil Change Shop ou have any experience operating this type of business? \( \bar{\text{No}} \) No \( \bar{\text{No}} \) Yes If yes, explain: I was a car dealer in the past |
| 2. i        | Business Operations  |
| a.          | Proposed Opening Date:   |
| b.          | Is this premise under construction? 🚮 No 🔲 Yes If yes, list estimated completion date:   |
| C.          | Is this a franchise? Mo Yes  |
| d.          | Is this premises currently licensed? No Pres If yes, list type of license: OCCUPANCY   |
| e.          | Is the current licensee operating? No Me 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:  |
| <b>3, L</b> | itter & Noise  |
| a.          | How are grounds kept clean? Sweep Pressure Wash Pick Up Litter Other:  |
| b.          | How often will grounds be cleaned? A 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:  |
| 4. 5        | moking & Sanitation  |
| a.          | Are there designated outdoor smoking areas? Mr No Yes If yes, describe:  |
| b.          | Number of Garbage Cans: Inside: 1 Locations: Front   |
|             | Outside: L Locations: In the Back  |
| c.          | Is a crowd control barrier used? 📓 No 🗌 Yes 🔝 If yes, describe:  |
| d.          | How many restrooms are on the premises? 1  |
| e.          | Name of solid waste contractor: Advanced Disposal Waste Management Other: Cagle Dis Po5al  |
|             |  |

| 5. Security                       | page and the second                         |   |   |               |  |
|-----------------------------------|---|---|---|---------------|--|
| a. Are there onsite parking plan: |   |   | **  |               | 1  |
|                                   |   |   |   |               |  |
| b. Is there a loading zoner       | ivo [_] res il yes,                         | describe the                                  | loading area security p   | ian:          |  |
| c. Will you have security pe      | ersonnel on premise?                        | No Ye   | s If yes, how many?   | a             | nd answer the following:                   |
| What are their re                 | sponsibilities?                             |   |   |               |  |
|                                   |   |   |   | •             |  |
| List their licensing              | , certification, or training                | ng credentials                                |   | <del></del>   |  |
| d. Will there be security ca      | meras? 🔲 No 👼 Yes                           | If yes, how                                   | many? <u>lo</u> and lis   | st locations: |  |
| outside,                          | brking , of                                 | fice/   | backcloor   | 7777          |  |
| e. Will searches/identificat      | ion checks be done upo                      | n entry? 🚮                                    |   |               |  |
| 6. Percentage of Sales            | (must total 100                             | <u>%)                                    </u> |   |               |  |
| Alcohol%                          | Food  | %   | Secondhand Merchand   | lise          | Precious Metals & Gems                     |
| Entertainment%                    | Cigarettes                                  | %   | %   |               | %  |
| Pawnbroker Activity%              | Salvaged Materials<br>(such as scrap metal) | %   | Personal Services (such<br>body piercing, salon, ta<br>tanning, etc.) | ilor,         | Other 100 % Describe: Auto Uchicles requir |
| 7. Businesses/License             | s on the Premise                            | s (check a                                    | all that apply);  |               |  |
| Type 1                            | Catalcattae Shan                            | Fil Balk - v F                                |   | Пъзи          |  |
| Full Service Restaurant           | Cafe/Coffee Shop                            | *****   | ast Food Restaurant   |               | /Fraternal/Veterans Club                   |
| ☐ Night Club                      | ∐ Tavern                                    | Cocktail                                      | Ť   | Teen C        | lub  |
| Banquet Hall                      | Sports Facility                             | Bowling                                       | •   |               |  |
| Hotel/Motel: Number of Flo        | oors:                                       | Rooming                                       | House: Number of Flo  |               |  |
| Type 2                            | JOHIS.                                      |   | Number of Ro  | oms:          |  |
| Liquor Store                      | Corner Store                                | Superma                                       | rket  | Conven        | ience Store                                |
| Gas Station                       | Amusement/Phonog                            | graph Distribut                               | or  | Recyclin      | ng, Salvage or Towing                      |
| <b>W</b> Used Car Dealer          | Personal Service Es (such as tattoo busi    |   | , tailor, etc.)   | Recordi       | ng Studio                                  |
| What other licenses/permits will  | you hold at this location?                  | (check all that                               | apply)  |               |  |
| Occupancy Permit                  | Cigarette & Tobacco 🔲 Ga                    | as Station E                                  | xtended Hours Class '   | 'B" Tavern    | ] Weights & Measures                       |
| Secondhand Dealer                 | Precious Metal & Gem                        | Other:  |   |               |  |
| 8. Legal Capacity (onl            | y if a Type 1 prer                          | nises in #                                    | 7 above)  |               |  |
| Capacity 50 (Call the             | Milwaukee Development                       | Center at 414                                 | -286-8211 if you have qu  | estions.)     |  |

| 9. Premises [  | Description  |  |  |                        |  |
|--|--|--|--|------------------------|--|
| a. Identify all are  | 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: Desc   |  | age LiPatio Libeer Garde                                   | en Lisidewalk Care L   | преск Пкоодор          |  |
|  | tion: Major Thoroughfare   | Secondary Street O   | ther:  |                        |  |
| c. Nearest Major   | Cross Street: W No   | orth Ave   |  |                        |  |
|  | ing: 🔲 Free Standing Buildi  |  |  |                        |  |
|  | oises Structure: 🎏 Single Sto  |  |  |                        |  |
|  | ounding Area: Commercia  |  |  |                        | 3/7  |
|  | er Name: <u>MoFlani</u><br>er Address: <u>2348</u> R   |  |  |                        |  |
| CHANGE AND COLUMN AS AS AS AS  | Programme and the second se  |  | ·  | CESIAL OUT             | 23158                                      |
| 3522473-1/5357007016-1-1-01-01-01-01-01-01-01-01-01-01-01-01   | peration & Custo   |  |  |                        |  |
| Will customers be ent  | ering the premises? No   |  | - described to the first of the |                        |  |
|  | Proposed Hour  | s of Operation:  | Estimated Number   | Potential<br>Age Range | Člass B Tavern<br>Applicant Only:          |
| Day of the Week  | Open Time<br>(include a.m. or p.m.)  | Close Time<br>(include a.m. or p.m.)                       | of Customers<br>expected each day  | of<br>Customers        | Age Restriction<br>(If none, write 'None') |
| Sunday.  | closed   | closed   | 0  | 16-70                  | NIA  |
| Monday   | 8:00 Am  | 5:00 pm  | 100  | 16-70                  | N/A  |
| Tuesday  | 8:00 Am  | 5100 pm  | 100  | 16-70                  | NIA  |
| Wednesday  | 8:00Am   | 5100pm   | 100  | 16-70                  | NIA  |
| Thursday   | 8:00 Am  | 5:00 pm  | 100  | 16-70                  | NIA  |
| Friday   | 8:00 Am  | 5100Pm   | 100  | 16-70                  | NIA  |
| Saturday   | 9:00 Am  | 3:00 pm  | 50   | 16-70                  | NIA  |
| 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 Establishment<br>Permitted Hours of Or   | s Class A: 8:00  | am to 9:00 pm Sunday thru S<br>am to 2:00 am Sunday thru J | aturday  |                        |  |
| 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 nore shareholder (If there are no 20% or more shareholders, Corporate Officer-print name/title and sign)  |  |  |  |                        |  |

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



# SECONDHAND MOTOR VEHICLE DEALER LICENSE SUPPLEMENTAL PLAN OF OPERATION

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

| Legal Entity Name: Sky Auto Sales and Repairs LC   |
|--|
| Premises Address: 1900 W North Ave Milwaukee W153205   |
| SECTION 1 LICENSE TYPE   |
| What type of license are you applying for? (check one) Retail Wholesale  |
| SECTION 2  |
| Will you also be dealing in secondhand vehicle parts?  |
| If wholesale, is the premises address a residential (home) address? Yes  |
| If yes, you must obtain a Home Occupational Statement from the Department of Neighborhood Services (414) 286-3874.   |
| No vehicles can be parked and no customers are allowed at the premises.  |
| The following questions in Section 2 do not apply to wholesale from a residential address. Go to Section 3.  |
| Number of parking spaces available to customers/employees  |
| Number of parking spaces that will be used for display/storage of Secondhand Motor Vehicles  |
| Do you understand that all vehicles associated with the business must be stored on the licensed premise?   |
| What are your plans to ensure this requirement is met (check all that apply)?  |
| Supervisor Monitoring    Fenced Lot  |
| Do you understand all maintenance/repair work to these vehicles must be confined to the licensed premise?  |
| What are your plans to ensure this requirement is met (check all that apply)?  |
| Supervisor Monitoring 📳 Designated Repair Area 🔲 Other:  |
| Do you understand all keys to used motor vehicles offered for sale must be kept in a secure lockbox inside the dealership  |
| building at all times when the dealership is not open for business?  |
| What are your plans to ensure this requirement is met (check all that apply)?  |
| Supervisor Monitoring Other:   |
| SECTION 3 DISCLOSURE   |
|  |
| Has any person on the application ever had a license relating to the activities licensed in Milwaukee Code of Ordinances Chapter   |
| 92 denied, not renewed, suspended, or revoked? R No Yes If yes, provide the circumstances and jurisdiction in which the event occurred (including a record of any actions from the State |
| Department of Transportation and Financial Institutions relating to suspensions, revocations, forfeitures and warnings imposed   |
| by these departments relating to the operation of any automotive sales business by the applicant):   |
|  |
| SECTION 4 SIGNATURES   |
|  |
| Sole Proprieton Paymer, or 20% or more Shareholder  Additional partner of 20% or more shareholder  |
| (If there are no 20% or more shareholders,   |
| Corporate Officer-print name/title and sign)   |