

GRANVILLE-HAVENWOODS ADVISORY COUNCIL BUSINESS QUESTIONNAIRE

Date

The Granville-Havenwoods Advisory Council reviews plans and proposals for redevelopment projects in the Granville-Havenwoods Development Area for consistency with the goals, needs, and desires of the Granville-Havenwoods community and its residents, businesses, property owners and other stakeholders. The Granville-Havenwoods Development Area is bounded by W. County Line Road, Good Hope Road, N. 43rd Street, and N. 107th Street. Additionally, the council would like to be informed of new businesses or developments coming into the Granville-Havenwoods Development Area or altering operations within the area. The council would like to review those businesses/developments and possibly offer recommendations or provide input on them. Any recommendations made by this council are advisory only to other required processes.

Please be prepared to present on your business or proposed business for roughly 5 minutes. If you are not confident in your command of English, please bring a translator with you. Applicants must meet with the local Council member prior to appearing at this meeting and may be moved to the next meeting date, if the meeting runs long.

Individual Name: Timothy Stotts
INCLUDE ALIASES AND PRIOR NAMES

Email: OGSonBrownDeer@gmail.com

1. What is the legal name and D/B/A name of your business?

OG's on Brown Deer LLC/OG's on Brown Deer

2. What is the address of your business or proposed business?

8531 W. Brown Deer Rd Milwaukee, WI 53224

3a. Are you a new or existing business?

New

3b. How many years have you been in business?

4 years currently in operation at my other restaurant & bar.

4. Describe the product(s) or service(s) you offer.

Include specific activities to be held at the proposed location. Include all licensing needed/applied for.

Full Service Restaurant with Dine in and Carry Out options.
Full Bar Service. Private Events and Catering
FOOD DEALER'S LICENSE & ALCOHOL BEVERAGE LICENSE

5. What problem does your business solve?

This neighborhood restaurant-bar will give locals a reliable place to enjoy meals without cooking, a lively bar for socializing after work, and flexible space for private events.

6a. How will you involve the community?

Source Locally by shopping with community businesses. Provide Direct employment for community members.
Community Events - Host trivia, open-mic, and pop-up markets that showcase local talent.

6b. How will you give back to the community?

Skill Sharing: Offer internships and on-site training in cooking, bar service, and customer care. Platform Boost: Spotlight neighborhood artists, musicians, and makers. Food Rescue: Donate surplus meals to shelters.

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7. What are the business hours of operation? 11am-12am
8. Who is your target audience? Neighborhood professionals & residents. Social groups & event hosts. Takeout & delivery customers.
9a. Why do you want your business to be located within the 9th district? We want to grow with it—creating good jobs, a welcoming gathering place, and a reliable source of fresh, locally sourced meals where there were few options before. We aim to help spark foot traffic, support nearby small vendors.
9b. How will your business improve the 9th district? By opening our doors, we’ ll add local jobs, attract foot traffic that boosts neighboring shops, and provide great meals and events—turning an under-served block into a connected community destination.
10. Who will maintain the exterior premise of your establishment? Groundskeeper
11. Are you leasing or buying the building where your business will be located? Leasing
12. Describe your security design. 25 Security Cameras - 9 Exteriors covering the parking lot, patio, and all entry doors 16 Interior covering Bar areas, entry doors, hallways, and dining halls
13. Does your proposal involve any City approvals? If so, what are those approval processes? Occupancy Permit - Approved Public Entertainment Premises, Class B Tavern and Food Licenses Pending
14. What is the project timeline or schedule for your development or business, including any City approvals that are required? We are prepared to open as soon as all approvals are granted.
15a. Do you have a written business plan? Yes.
15b. Does your plan include a marketing plan? Yes.
15c. Are you doing financing? If yes, with whom? No.
15d. What is your plan on hiring and how many full/part-time employees? 6-12 Full-Time and Part-Time employees to be hired.

Continued ➡

15e. Are you going to hire within the community and how do you plan to recruit/train these individuals?

Yes. Post jobs first in neighborhood forums, host walk-in hiring days, and partner with local workforce programs. Provide orientation, pair hires with trainer, cover safety and ServSafe certs, and outline clear promotion steps.

15f. What insurance coverage do you have?

Integrity Commercial Insurance for Restaurants

16. If needed, have you contacted the Department of Public Works?

Yes

17. Do you have a contractor for plumbing, HVAC, and architect? If yes, who are they?

Nelson's Plumbing
Burkhardt Heating and Cooling

18. Have you obtained your seller's permit?

Yes

19. Have you registered with the Department of Financial Institutions?

Yes

20. Do you have an accountant and a lawyer? If yes, who are they?

Yes. Matt Fisher

21. Do you currently have any unpaid financial judgments against you personally or any businesses you are involved with and/or in?

No

GRANVILLE-HAVENWOODS ADVISORY COUNCIL

INDIVIDUAL QUESTIONNAIRE

Date

All individuals involved in the business must complete this form, including:

- sole proprietor
- all officers, directors, and agent of a corporation or nonprofit organization
- all partners of a partnership
- members and agent of a limited liability company

Your application or renewal is not complete until all required Individual Questionnaires are submitted.

Part A: Business Information

1. Legal Business Name (individual name if sole proprietor) OG's on Brown Deer LLC				
2. Business Trade Name or DBA OG's on Brown Deer				
3. Entity Type (check one)				
<input type="checkbox"/> Sole Proprietor	<input type="checkbox"/> Partnership	<input checked="" type="checkbox"/> Limited Liability Company	<input type="checkbox"/> Corporation	<input type="checkbox"/> Nonprofit Organization

Part B: Individual Information

1. Last Name Stotts		2. First Name Timothy		3. M.I. R
4. Relationship to Business (Title) Owner		5. Email oqsonbrowndeer@gmail.com		6. Phone 414.975.2645
7. Home Address 6635 N 113th St				
8. City Milwaukee		9. State WI	10. Zip Code 53224	11. Date of Birth 04/08/1968
12. Driver License/State ID Number S332-8166-8128-08			13. Driver License/State ID State of Issuance WI	

Part C: Address History

1. Do you currently reside in Wisconsin? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
If yes to 1 above, how long have you continuously lived in Wisconsin prior to the date of application?			Years 56
2. List in chronological order all of your addresses within the last 5 years. Attach additional sheets if necessary.			
Previous Address 1 N/A		City	State
Previous Address 2		City	State
Previous Address 3		City	State
Previous Address 4		City	State
Previous Address 5		City	State
3. List all states and counties you have lived in as an adult. Attach additional sheets if necessary.			
State WI	County Miliwaukee	State	County
State	County	State	County

Continued ➡

Part D: Criminal History

1. Have you ever been convicted of any offenses (excluding traffic offenses) for violation of any federal, Wisconsin, or another state's laws or of any county or municipal ordinances? ☐ Yes ☐ No
If yes to question 1, please list details of each conviction below. Attach additional sheets as needed.

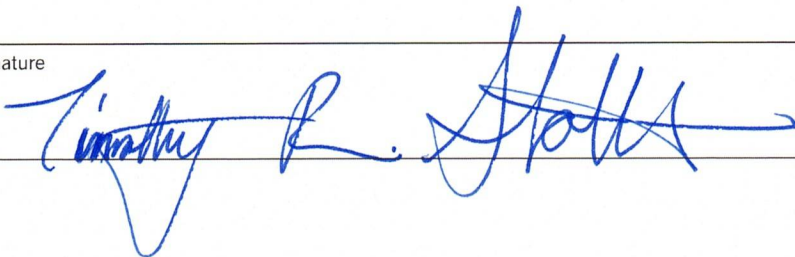
Law/Ordinance Violated Drug Charges	Location Milwaukee	Conviction Date 2/12/2002
Penalty Imposed 97 Months		Was sentence completed? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Law/Ordinance Violated	Location	Conviction Date
Penalty Imposed		Was sentence completed? <input type="checkbox"/> Yes <input type="checkbox"/> No
Law/Ordinance Violated	Location	Conviction Date
Penalty Imposed		Was sentence completed? <input type="checkbox"/> Yes <input type="checkbox"/> No

2. Are charges for any offenses currently pending against you (excluding traffic offenses) for violation of any federal, Wisconsin, or another state's laws or of any county or municipal ordinances? ☐ Yes ☒ No
If yes to question 2, describe nature and status of pending charges using the space below. Attach additional sheets as needed.

Part E: Attestation

READ CAREFULLY BEFORE SIGNING: Under penalty of law, I have answered each of the above questions completely and truthfully.

Signature



Date

5/30/2025