



CITY OF MILWAUKEE  
OFFICE OF THE CITY CLERK

Wednesday, September 20, 2017

COMMITTEE MEETING NOTICE

AD 02

GOODSON, Earnestine, Agent  
Goodson Ventures LLC  
9012 W Silver Spring DR  
Milwaukee, WI 53225

You are requested to attend a hearing which is to be held in Room 301-B, Third Floor, City Hall on:

**Tuesday, October 03, 2017 at 09:15 AM**

**Regarding:** Your Class B Tavern, Food Dealer, and Public Entertainment Premises License Applications Requesting Instrumental Musicians, Disc Jockey, Bands, Karaoke, and Patrons Dancing as agent for "Goodson Ventures LLC" for "Courtside Bar & Grill" at 9012 W Silver Spring DR.

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 in City Hall is available at reduced rates (5 hour limit) at the Milwaukee Center on the southwest corner of East Kilbourn and North Water Street. Parking tickets must be validated in the first floor information booth in City Hall.

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: \_\_\_\_\_

Jessica Celella

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

Wednesday, September 20, 2017

COMMITTEE MEETING NOTICE

AD 02

GOODSON, Earnestine, Agent  
Goodson Ventures LLC  
1633 N Arlington Pl, #1307  
Milwaukee, WI 53202

You are requested to attend a hearing which is to be held in Room 301-B, Third Floor, City Hall on:

**Tuesday, October 03, 2017 at 09:15 AM**

**Regarding:** Your Class B Tavern, Food Dealer, and Public Entertainment Premises License Applications Requesting Instrumental Musicians, Disc Jockey, Bands, Karaoke, and Patrons Dancing as agent for "Goodson Ventures LLC" for "Courtside Bar & Grill" at 9012 W Silver Spring DR.

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JIM OWCZARSKI, CITY CLERK

BY: \_\_\_\_\_



Jessica Celella  
License Division Manager

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

**Koberstein, Jonathan**

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**From:** License  
**Sent:** Friday, September 1, 2017 12:12 PM  
**To:** Koberstein, Jonathan  
**Subject:** FW: Objection to Courtside Bar & Grill Relicensing



Jonathan Koberstein  
License Specialist III  
City Clerk's Office – License Division  
City Hall Rm 105  
200 E Wells St  
Milwaukee, WI 53202  
(414)286-2238 Office

**REDACTED RECORD**

**From:**  
**Sent:** Friday, September 1, 2017 11:54 AM  
**To:** License  
**Subject:** Objection to Courtside Bar & Grill Relicensing

**Office of the City Clerk-License Division  
City Hall Room 105  
200 East Wells Street  
Milwaukee, WI 53202**

**Licensing Committee:**

**This email is an objection from \_\_\_\_\_ to  
the relicensing of Courtside Bar and Grill located at 9012 W. Silver Spring  
Drive. \_\_\_\_\_ and since it's  
opening, there have been numerous issues \_\_\_\_\_ These incidences  
include speeding, reckless driving, loud noises (yelling, arguing, music)  
throughout the night, litter, gunfire, and the like. The bar does not have  
adequate parking for its patrons so they opt to park on mine and nearby  
residential blocks. On the early morning of April 8th, 2017, a stray bullet fly  
through my upstairs bedroom window, piercing the wall above my bed and  
subsequently lodging in adjacent closet of my daughter's bedroom. As  
expected, this incident has greatly disturbed us and we will not allow our  
children to stay up late on weekends (being in the living room with the  
tv/game system) because of fear that Courtside patrons will once again  
aimlessly disperse bullets down our block. The heavy promotion of local radio**

**stations and social media continues to bring a very large crowd to the area during its business hours. Myself and other residents of District 2 have consulted with Alderman Cavalier Johnson about the concerns surrounding Courtside but little has been done. I do not believe that this is the area for this particular establishment so we do not support its relicensing. There is not enough space nor police presence to appropriately manage the crowd. Thank you for your time and consideration of this email.**

**MILWAUKEE POLICE DEPARTMENT  
LICENSING**

**CRIMINAL RECORD/ORDINANCE VIOLATION/INCIDENTS  
SYNOPSIS**

**DATE:** 08/22/2017  
**LICENSE TYPE:** BTAVN  
**NEW:**   
**RENEWAL:**

**No. 260971**  
**Application Date:** 08/22/2017

**License Location:** 9012 West Silver Spring Drive  
**Business Name:** Goodson Ventures

**Licensee/Applicant:** Goodson, Earnestine  
(Last Name, First Name, MI)

**Date of Birth:** 10/14/1952

**Home Address:** 1633 N. Arlington PL #1307  
**City:** Milwaukee **State:** WI **Zip Code:** 53202  
**Home Phone:** 414-379-9483

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

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

1. On 10/01/2009 the Wisconsin Department of Transportation revoked the applicant's driver's license for 6 months for Operating While Intoxicated.

Date: 09/12/17  
Officer: Tracey Geniesse

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

Name of Premise: Courtside  
Address: 9012 W Silver Spring Dr  
Phone: None

Owner:  
Owner address:  
City State Zip:  
Owner Phone:  
Owner email:

Licensee/Agent: Earnestine NMI Goodson  
Home Address: 6824 W Appleton Ave #4  
City State Zip: Milwaukee, WI 53202  
Phone: 414-379-9483  
Email: None

Preferred contact: Earnestine Goodson

Location currently open:  YES  NO

Projected open date:

Day's open: S M T W Th F SA ALL

Hours of Operation: Sun: 9a-2a 24 hours Y N  
Mon: 9a-2a  
Tue: 9a-2a  
Wed: 9a-2a  
Thu: 9a-2a  
Fri: 9a-2:30a  
Sat: 9a-2:30a

Premise Type: Tavern/Bar  
Restaurant  
Other:

Licenses currently held:

Alcohol:  Yes  No Class: #:  
 Tobacco:  Yes  No #:  
 Food:  Yes  No #:  
 Extended Hours:  Yes  No #:  
 Secondhand Dealer:  Yes  No Type: #:  
 Other:  Yes  No Type: #:  
 Other:  Yes  No Type: #:

**Exterior Survey:**

1. Is the area around the location clean?  Yes  No
2. What surrounds the location? (Check all the apply)
  - a.  Park
  - b.  School
  - c.  Youth Center
  - d.  Church
  - e.  Tavern(s) If so, how many
  - f.  Residential
  - g.  Other businesses
  - h.  Other:
3. Can you see from the outside of the location into the interior  Yes  No
4. Can you see the employees inside of the location from the outside  Yes  No
5. Are exterior windows free of signage  Yes  No
6. Is there a parking lot  Yes  No
7. Is the parking lot clean?  Yes  No
8. Off-Street parking  Yes  No
9. Is the parking lot well lit?  Yes  No
10. Valet Parking  Yes  No
  - a. Will this lot have a guard?  Yes  No
  - b. Will this lot have cameras?  Yes  No
11. Are there areas where a person could conceal themselves  Yes  No
12. Is there exterior lighting?  Yes  No. Does it appears to be adequate  Yes  No
13. Exterior Payphone?  Yes  No
14. Are there No Loitering Signs posted?  Yes  No
15. Are there exterior security cameras  Yes  No How Many: 2
16. Are the address numbers prominently displayed and easy to see  Yes  No

**Camera Survey:**

17. Does this location have security cameras?  Yes  No
18. Are they in working order?  Yes  No
19. What format are the cameras?
  - a. Color  Yes  No
  - b. Digital  Yes  No
  - c. Recorded  Yes  No
20. How long is footage stored for later viewing: Wasn't sure
21. Are there exterior cameras  Yes  No How many: 2
22. Are there interior cameras  Yes  No How many: 2 working, but has 5
23. Do all employees know how to retrieve recorded digital images/footage?  Yes  No

24. Cameras located in parking lot Yes No How many 2 the same two attached to the exterior of the building

**Interior Survey:**

- 25. What is the planned capacity 99
- 26. What is the minimum number of employees That will be on premise 2
- 27. Is the storeowner willing to be a standing complainant regarding loitering? Yes No
  - a. If yes have them fill out the standing complaint form and give them two of the commercial signs Yes No
- 28. Is the interior of the location neat and clean? Yes No
- 29. Does an interior camera face the entrance/exit? Yes No
- 30. Is there a lockable area that separates employees from customers? Yes No
- 31. Are emergency and non-emergency numbers posted near the phone? Yes No
- 32. Does the owner know how to contact their police district directly? Yes No
  - a. Did you provide a district contact guide to the owner? Yes No

**Security**

- 33. How many security personnel are going to be employed: 3
- 34. How ill they be deployed: Interior 2 Exterior 1
- 35. What days will they be deployed MonTueWedThuFriSatSun
- 36. Will the security be managed by business or contracted
- 37. Will they be armed Yes No
- 38. What type of security measures to be used:
  - Wanding/metal detector, wanding
  - ID Scanner
  - Dress Code No White Tshirts
  - Cover Charge
  - Age restriction 25 and older
  - Other pat downs both male and female, bag and purse checks will be conducted

**ADDITIONAL COMMENTS/RECOMMENDATIONS:**

I made the following recommendations, A final walk through to view the camera system once the license is approved. Conduct pat downs consistently for everyone. Move one of the camera's to face the entrance directly.

There is not a landline phone, so I requested Them to have one.  
Notification to District Four, for a list of monthly events.

She had a previous class B tavern license for a bar called E&J's, somewhere on 10<sup>th</sup> and Chambers, but could not provide the address to me. She stated it closed/ switched owners about 2 years ago.



**MILWAUKEE POLICE DEPARTMENT**  
**LICENSE INVESTIGATION UNIT**

**CRIMINAL RECORD/ORDINANCE VIOLATION/INCIDENTS**  
**SYNOPSIS**

**DATE: 07/14/2015**  
**LICENSE TYPE: BTAVN**  
**NEW:**  
**RENEWAL: X**

**No. 214545**  
**Application Date: 07/14/2015**  
**Expiration Date:**

**License Location: 9012 W Silver Spring Dr**  
**Business Name: Steve-O's Bar & Grill**

**Aldermanic District:02**

**Licensee/Applicant: Conzoner, Steven C**  
(Last Name, First Name, MI)  
**Date of Birth: 04/13/1948**

**Home Address: 10001 W Appleton Ave # 210**  
**City: Milwaukee** **State: WI** **Zip Code: 53225**  
**Home Phone: (414) 462 – 3333**

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

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

1. On 03/05/99, a police aide under the direction of Milwaukee police officers entered Steve-O's tavern located at 9012 W Silver Spring DR and purchased a tap beer from bartender, Steven Conzoner who did not ask for identification.

Charge : Sale to Underage  
Finding : Not Issued  
Citation # : 5598636

2. On 02/16/2000, officers from the Vice Control Division entered Steve-o's tavern located at 9012 W Silver Spring DR and recovered on video gambling machine that contained \$1,191.00.

Charge : Permit Gambling Machine  
Finding : Guilty  
Sentence : Fined \$151.00  
Date : 07/18/2001  
Case # : 00035181

3. The following incident involves the Corporation Officer, Thomas A. Conzoner

Charge : Operating While Intoxicated  
Finding : Guilty  
Sentence : Fined \$687.50 & suspended 8 months  
Date : 05/01/2001  
Case # : 01038133

4. On 5-11-2004 at 2:36am Milwaukee police were sent to 9012 W Silver Spring Dr., Steve-O's tavern for an after hours drinking and drug dealing complaint. They found 4 patrons and Steven C Conzoner in the tavern. One of the patrons was arrested for possession of Valium.

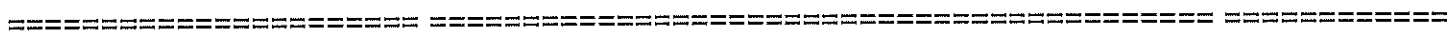
The licensee was charged with the following:

Charge : Patrons After Hours  
Finding : Guilty  
Sentence : \$250.00  
Date : 8-3-2004  
Case : 04064228

5. On 06/24/2005, at 12:29 AM, PO Murray and PO Albritton were dispatched to investigate a Fight at Steve-O's tavern located at 9012 W Silver Spring Dr. Investigation revealed that two Patrons became involved in an argument that led to pushing and shoving in the female's restroom. A third patron later identified as b/f BASS, Tamisha D. (08/19/1979), picked up a 3-4 " glass ashtray and threw it at the victim striking g on the fore head causing a laceration. Suspect left the scene prior to Officers arrival. Warrant request file for Battery against Tamisha Bass. No further information available.

6. On 08/31/2005, PO Kaminski, PO Simmert, PO Navrrette and Police Aide T. Mantsch, conducted an underage buy at Steve-O's located at 9012 W Silver Spring Dr. PA Mantsch ordered 3 cans of Miller Lite beer from the Bartender on duty, w/f Hemmen, Holly A. (12/25/1964). Bartender served Pa Mantsch W/o asking for proof of age. Bartender was cited for sale of Alcohol of Alcohol to underage person.

Charge : Sale to Underage person  
Finding : Guilty, Municipal Court  
Sentence : \$152.00 fine  
Date : 10/18/2005  
Case : 05096987



7. On 05/13/2006 at 2:05am, squads were dispatched to a shots fired complaint at Steve-O's, 9012 W Silver Spring Dr. Upon speaking to the bouncer he stated he heard several gunshots outside the business and walked outside to observe a b/f heavy build with a silver handgun. Officers spoke to a female patron who stated the b/f was shooting in her direction as she walked up to her car.

8. On 08/28/2006 at 11:00pm, a sergeant observed the front entrance of Steve-O's, 9012 W Silver Spring Dr., to be propped open. The licensee, Steve C CONZONER (04/13/1948) was contacted about this violation and stated he could only recall once about a month ago when police asked him to close the door. No citation issued.

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9. On 01/18/07 at 2:08 am, Milwaukee police were dispatched to 9012 W Silver Spring for an Armed Robbery complaint. Officers spoke to the caller who stated he was robbed outside of Steve O's tavern. The victim was uncooperative with police and refused to provide requested information by police. Officers spoke to the bartender, Timothy Anderson, who stated to police that around 2:00 am several patrons got into an argument inside the tavern at which time Anderson told them to take it outside. Anderson stated all the parties involved exited the tavern and that he observed them arguing in front of the tavern. Anderson stated several minutes later, one of the patrons re entered the tavern and asked to use the phone. Detectives arrived on scene and took over the investigation.

10. On 04/13/07 at 2:09 am, Milwaukee police were dispatched to 9012 W Silver Spring for a Battery/Cutting complaint. Investigation revealed several patrons argued inside the tavern with the fight continuing outside in the parking lot. A subject was found to have been stabbed. Police spoke to the manager, identified as Timothy Anderson, who stated there was a fight inside the tavern and all patrons were told to leave because it was closing time. Anderson stated approximately 2 minutes later someone was knocking on the door requesting an ambulance because someone was stabbed in the parking lot.

11. On 06/22/07 at 11:30 pm, Milwaukee police were flagged down by a citizen regarding a Fight at 9012 W Silver Spring, Steve O's Tavern. Police responded to the location and were told by a citizen that people were fighting in the bar. Officers spoke to the manager Timothy Anderson who stated there was a group of females and males fighting in the back of the bar. Anderson further stated he tried to break up the fight but couldn't because there were too many people fighting. When police arrived, they observed no individuals who were injured or wanting to file a complaint. The bar owner Steven Conzoner, arrived as police were leaving and he was advised of the incident that took place.

12. On 07/23/07 at 12:36 am, Milwaukee police were dispatched to 91<sup>st</sup> and Silver Spring for an Armed Robbery complaint. Police spoke the victim who stated he left Steve O's bar and was in the parking lot where he car was parked when he was approached from behind by an unknown male armed with a semi-automatic who demanded the victims personal belongings. The suspect then fled. Police spoke to Steven Conzoner who stated he was unaware of the robbery and that the victim did not summon security personnel.

13. On 10/06/07 at 2:19 am, Milwaukee police were dispatched to 9012 W Silver Spring for a Shots Fired complaint. As police arrived, they observed three females fighting in the middle of the street with a large crowd gathering outside of the tavern. Citations were issued to the women for Disorderly Conduct. Officers checked the area for signs of shots fired and located 12 .22 caliber casings on the ground in the parking lot of Steve O's. The casings were placed on inventory.

14. On 11/17/07 at 1:47 am, Milwaukee police were dispatched to 9012 W Silver Spring for a Battery complaint. Police spoke to the victim who stated a known actor struck her in the face several times causing pain while she was inside the Steve O's tavern. A citation was issued to the known suspect for Assault and Battery. Police spoke to an employee of the tavern who provided the licensee information being requested.

15. On 03/01/08 at 2:07 am, Milwaukee police were dispatched to 91<sup>st</sup> and Silver Spring for a Shots Fired/Subject With Gun complaint. Police spoke to the doorman at Steve O's tavern, identified as Terry Hermon, who stated there was an argument in the parking lot but that everyone had left prior to police arriving. Hermon stated no one had a gun and that there were no shots fired. Other witnesses stated that no shots were fired and no one was fighting.

- On 05/07/07 the applicant was charged with OWI in Milwaukee County. His license was revoked for 7 months.

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16. On Thursday, August 27, 2009 at 1:37AM, Milwaukee Police Department was sent to Steve-O's Bar And Grill at 9012 W Silver Spring Dr for a fight complaint. Police observed the victim lying on the ground on his back at the rear of the tavern with a large laceration to the back of his head. He stated he was beaten and robbed by a subject named "Demarco" and second unknown subject. "Demarco" and the victim were in the tavern earlier drinking.

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17. On the following dates and times, a License Premise Check was conducted by Milwaukee police and no violations were observed:

07/14/12	1:30 am
09/01/12	12:50 am
11/25/12	1:15 am

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18. On 08/29/2013 Milwaukee police conducted a tavern check at 9012 West Silver Spring Drive (Steve O's) based on a complaint received from the Department of Health Services regarding a violation of the Wisconsin Indoor Clean Air Act. Officers observed an ashtray on the bar in the business and reminded the applicant that smoking is prohibited in the building. No additional reports were filed.

19. On 08/31/2013 at 2:20am Milwaukee police conducted a tavern check at 9012 West Silver Spring Drive (Steve O's) regarding a violation of the Wisconsin Indoor Clean Air Act as well as the sale of carry out liquor. Officers discovered two people leaving the business, each carrying an unopened can of beer. The two told officers they had bought the beer at the bar, but that the bartender was unaware that they had left the business with the beer. The applicant was discovered inside the business smoking a cigarette and was told about the complaint. The applicant told officers he sells six packs of beer to patrons to carry out until midnight and was not aware that two patrons had left the business with beer after midnight. No additional reports were filed.

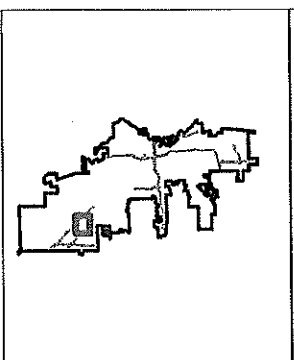
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20. On 04/29/2014 Milwaukee police responded to a property damage complaint at 9012 West Silver Spring Drive (Steve O's Bar). Investigation revealed a former employee damaged a television inside the business as well as several windows. Milwaukee police incident report #141190146 filed.
21. On 10/12/2014 Milwaukee police responded to a fight complaint at 9012 West Silver Spring Drive (Steve O's Bar). Investigation revealed a patron of the bar punched the bouncer in the face when the bouncer attempted to escort the patron out of the business. The patron was cited.
22. On 03/28/2015 Milwaukee police responded to a shooting at 9012 West Silver Spring Drive (Steve O's Bar). Investigation revealed that a patron of the bar attempted to rob another patron at gunpoint while in the men's room at the business. A struggle for the gun ensued and the victim was shot in the leg.
23. On 04/24/2015 Milwaukee police, along with agents from the Department of Revenue and Department of Neighborhood Services, conducted a tavern check at 9012 West Silver Spring Drive (Steve O's Bar). During this check, the agent from the Department of Revenue had the applicant dispose of 19 bottles of liquor due to health infractions with the bottles.

Previous premise

# Alcohol License Concentration for 9012 W Silver Spring Dr

City of Milwaukee, Wisconsin



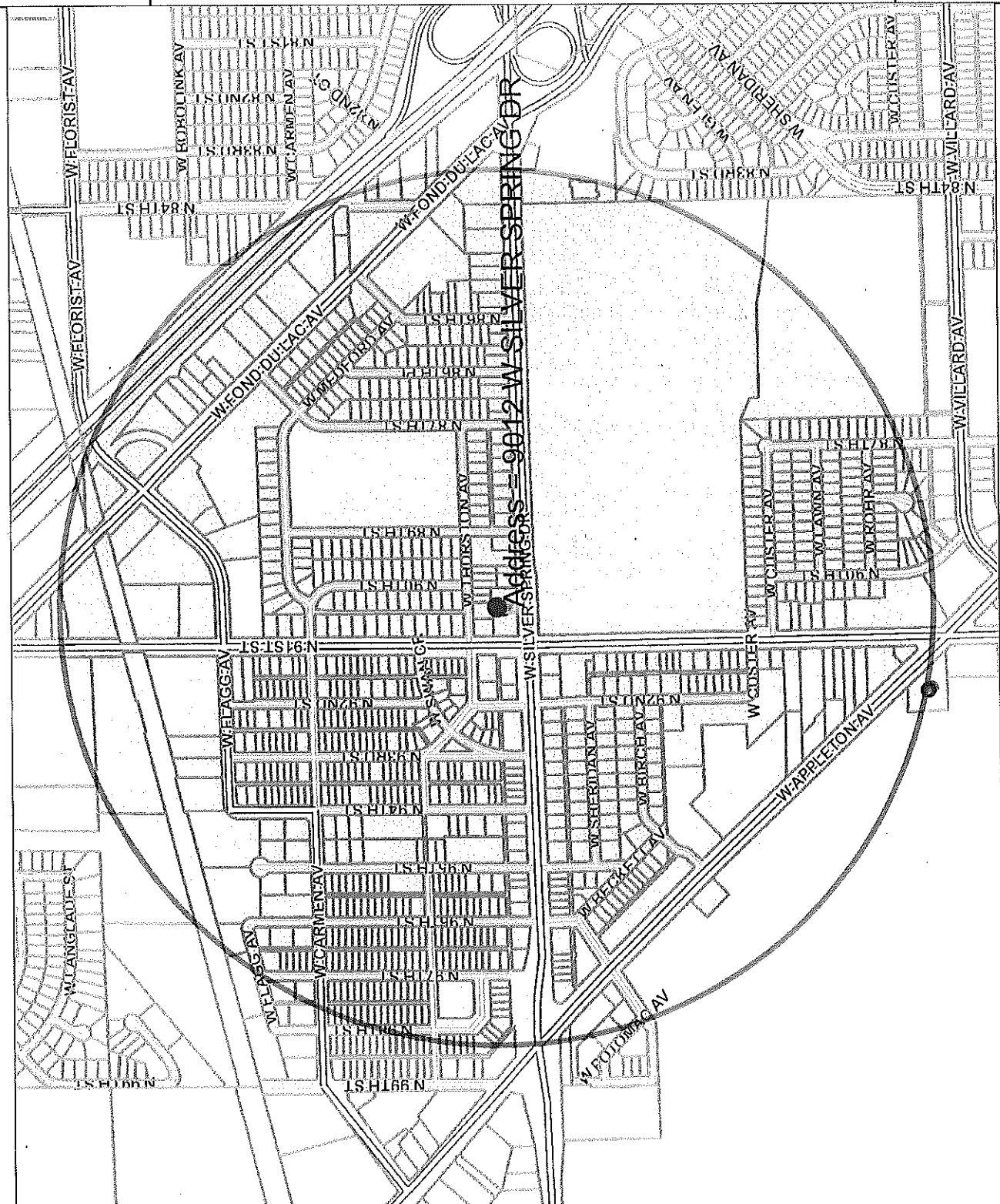
**- Legend -**

- Milwaukee parcels
- Street names 15,000
- City limits
- Freeways 15,000
- Exit ramps
- Entry ramps
- Ramps
- Major streets 15,000
- Streets 15,000
- Street names 15,000
- Alcohol licenses
  - Class A intoxicating liquor
  - Class A fermented malt beverage
  - Class A liquor and malt
  - Class B fermented malt beverage
  - Class B tavern
  - Class C wine retailer

**- Notes -**

- Licensed Alcohol Beverage Establishments Within a .5 Mile Radius Centered on 9012 W Silver Spring Dr

City of Milwaukee  
Department of Administration - ITMD



859.9 429.94 859.9Feet  
0  
Map Scale: 1: 10,319  
Disclaimer: 8/22/2017  
© City of Milwaukee, Wisconsin  
Map Milwaukee: Property Information



Wednesday, September 20, 2017



# Notice of Public Hearing

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GOODSON, Earnestine, Agent  
Courtside Bar & Grill at 9012 W Silver Spring DR  
Class B Tavern, Food Dealer, and Public Entertainment Premises License Applications  
Requesting Instrumental Musicians, Disc Jockey, Bands, Karaoke, and Patrons Dancing

**Tuesday, October 03, 2017 at 9:15 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 10/3/2017 at 9:15 AM, in Room 301-B, Third Floor, City Hall. If you wish, you may provide testimony at the hearing regarding the request; see below for further information. You are not required to attend the hearing. Once the Licenses Committee makes its recommendation, this recommendation is forwarded to the full Common Council for approval at its next regularly scheduled hearing. Please review the information below and if you have further questions regarding this process, please contact the License Division at (414) 286-2238.

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## 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 AND ZIP CODE
CURRENT OCCUPANT	8909 W THURSTON AVE	MILWAUKEE, WI 53225-2837
CURRENT OCCUPANT	8913 W THURSTON AVE	MILWAUKEE, WI 53225-2837
CURRENT OCCUPANT	8917 W THURSTON AVE A	MILWAUKEE, WI 53225-2873
CURRENT OCCUPANT	8917 W THURSTON AVE B	MILWAUKEE, WI 53225-2873
CURRENT OCCUPANT	8925 W THURSTON AVE	MILWAUKEE, WI 53225-2837
CURRENT OCCUPANT	9015 W THURSTON AVE 6	MILWAUKEE, WI 53225-2842
CURRENT OCCUPANT	5650 N 91ST ST 1	MILWAUKEE, WI 53225-2732
CURRENT OCCUPANT	5659 N 90TH ST	MILWAUKEE, WI 53225-2831
CURRENT OCCUPANT	8914 W SILVER SPRING DR	MILWAUKEE, WI 53225-2835
CURRENT OCCUPANT	8901 W THURSTON AVE	MILWAUKEE, WI 53225-2837
CURRENT OCCUPANT	5627 N 89TH ST	MILWAUKEE, WI 53225-2809
CURRENT OCCUPANT	5657 N 90TH ST	MILWAUKEE, WI 53225-2831
CURRENT OCCUPANT	8931 W THURSTON AVE	MILWAUKEE, WI 53225-2837
CURRENT OCCUPANT	5650 N 91ST ST 4	MILWAUKEE, WI 53225-2732
CURRENT OCCUPANT	5651 N 90TH ST	MILWAUKEE, WI 53225-2831
CURRENT OCCUPANT	8905 W THURSTON AVE	MILWAUKEE, WI 53225-2837
CURRENT OCCUPANT	5631 N 89TH ST	MILWAUKEE, WI 53225-2809
CURRENT OCCUPANT	9015 W THURSTON AVE 2	MILWAUKEE, WI 53225-2842
CURRENT OCCUPANT	9007 W THURSTON AVE	MILWAUKEE, WI 53225-2838
CURRENT OCCUPANT	9012 W SILVER SPRING DR	MILWAUKEE, WI 53225-2836
CURRENT OCCUPANT	8932 W SILVER SPRING DR	MILWAUKEE, WI 53225-2835
CURRENT OCCUPANT	5650 N 91ST ST 3	MILWAUKEE, WI 53225-2732
CURRENT OCCUPANT	8917 W THURSTON AVE C	MILWAUKEE, WI 53225-2837
CURRENT OCCUPANT	8918B W SILVER SPRING DR	MILWAUKEE, WI 53225-2835
CURRENT OCCUPANT	9015 W THURSTON AVE 5	MILWAUKEE, WI 53225-2842
CURRENT OCCUPANT	9015 W THURSTON AVE 1	MILWAUKEE, WI 53225-2842
CURRENT OCCUPANT	8936 W SILVER SPRING DR	MILWAUKEE, WI 53225-2835
CURRENT OCCUPANT	8918A W SILVER SPRING DR	MILWAUKEE, WI 53225-2835
CURRENT OCCUPANT	8911 W THURSTON AVE	MILWAUKEE, WI 53225-2837
CURRENT OCCUPANT	8937 W THURSTON AVE	MILWAUKEE, WI 53225-2837
CURRENT OCCUPANT	9015 W THURSTON AVE 3	MILWAUKEE, WI 53225-2842
CURRENT OCCUPANT	9015 W THURSTON AVE 4	MILWAUKEE, WI 53225-2842
CURRENT OCCUPANT	9001 W THURSTON AVE	MILWAUKEE, WI 53225-2838
CURRENT OCCUPANT	8932A W SILVER SPRING DR	MILWAUKEE, WI 53225-2835
CURRENT OCCUPANT	5650 N 91ST ST 2	MILWAUKEE, WI 53225-2732
CURRENT OCCUPANT	5649 N 90TH ST	MILWAUKEE, WI 53225-2831
CURRENT OCCUPANT	5648 N 90TH ST	MILWAUKEE, WI 53225-2832
CURRENT OCCUPANT	8918C W SILVER SPRING DR	MILWAUKEE, WI 53225-2835
CURRENT OCCUPANT	8931A W THURSTON AVE	MILWAUKEE, WI 53225-2837

**Total Records: 40**

**Radius: 250.0 feet and Center of Circle: 9012 W Silver Spring DR**





Wednesday, September 20, 2017

## Licenses Committee Notice of Hearing

Steveo of Milwaukee  
7322 W Meinecke Av  
Milwaukee, WI 53213

Date: 10/3/2017  
Time: 09:15 AM  
Location: Room 301-B, Third Floor, City Hall

The Licenses Committee will consider the following license application:

Class B Tavern, Food Dealer, and Public Entertainment Premises License  
Applications Requesting Instrumental Musicians, Disc Jockey, Bands, Karaoke, and  
Patrons Dancing  
GOODSON, Earnestine, Agent  
Courtside Bar & Grill at 9012 W Silver Spring DR

Please note this application may be recommended for denial based on fitness of the location due to concentration of alcohol beverage outlets in the area. If the application is denied for this reason, no other application for an alcohol beverage license for this location shall be recommended for approval by the Licenses Committee within three years of the date of denial unless the applicant has demonstrated a change of circumstances since the prior denial.

If you have any questions, please call (414) 286-2238.





Wednesday, September 20, 2017

# Licenses Committee Notice of Hearing

Steveo of Milwaukee  
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If you have any questions, please call (414) 286-2238.





# BUSINESS LICENSE PLAN OF OPERATION

ccl-busplan 9/26/16

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](mailto: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:

*Tavern and restaurant*

Do you have any experience operating this type of business?  No  Yes If yes, explain: *prior management of bar*

## 2. Business Operations

- a. Proposed Opening Date: 9/15/17
- 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 + sub*

## 4. Smoking & Sanitation

- a. Are there designated outdoor smoking areas?  No  Yes If yes, describe: *outside side of building*
- b. Number of Garbage Cans: Inside: 4 Locations: *Bar + Kitchen; bathrooms*  
Outside: 1 Locations: *Parking lot*
- 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: *Eagle Disposal*

## 5. Security

- a. Are there onsite parking spaces?  No  Yes If yes, indicate how many? 18 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? 2-3 and answer the following:  
 What are their responsibilities? crowd control, protection, warning  
 Is security equipment used?  No  Yes If yes, describe \_\_\_\_\_  
 List their licensing, certification, or training credentials \_\_\_\_\_
- d. Will there be security cameras?  No  Yes If yes, where? inside + outside
- e. Will searches/identification checks be done upon entry?  No  Yes If yes, describe \_\_\_\_\_

## 6. Percentage of Sales (must total 100%)

Alcohol <u>75</u> %	Food <u>25</u> %	Secondhand Merchandise _____ %	Precious Metals & Gems _____ %
Entertainment _____ %	Cigarettes _____ %	Personal Services (such as tattoo, body piercing, salon, tailor, tanning, etc.) _____ %	Other _____ % Describe: _____
Pawnbroker Activity _____ %	Salvaged Materials (such as scrap metal) _____ %		

## 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: 1  Rooming House: Number of Floors: \_\_\_\_\_  
 Number of Rooms: 3 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 99 (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):

1<sup>st</sup> Floor  2<sup>nd</sup> 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: 91<sup>st</sup> Street

d. Describe Building:  Free Standing Building  Strip Mall  Other: \_\_\_\_\_

e. Describe Premises Structure:  Single Story  Multi-Story - # of Stories \_\_\_\_\_  Other: \_\_\_\_\_

f. Describe Surrounding Area:  Commercial  Residential  Industrial  Other: \_\_\_\_\_

g. Building Owner Name: Estate of Steven Conzone Phone Number: \_\_\_\_\_

Business Owner Address: 902 W Silver Spring Drive, Milwaukee, WI 53225

## 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	10:00 am	2:00 am	50	21 +	21 +
Monday	10:00 am	2:00 am	50	21 +	21 +
Tuesday	10:00 am	2:00 am	50	21 +	21 +
Wednesday	10:00 am	2:00 am	50	21 +	21 +
Thursday	10:00 am	2:00 am	90	21 +	21 +
Friday	10:00 am	2:30 am	90	21 +	21 +
Saturday	10:00 am	2:30 am	90	21 +	21 +

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 Closing Hours: Indoors: Alcohol beverage establishments: Same as alcohol license hours  
Non-alcohol establishments: 1:00 am Sunday thru Thursday, 1:30 am Friday & Saturday  
Outdoors: All establishments: 10:00 pm Sunday thru Thursday, 12:00 am Friday & Saturday  
(unless otherwise approved by the Common Council in licensee's plan of operation)

## 11. Signature(s)

Ernestine Goodson  
Sole Proprietor, Partner, Agent, or 20% or more Shareholder

\_\_\_\_\_  
Signature of additional partner or 20% or more Shareholder

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



**ALCOHOL BEVERAGE & PUBLIC ENTERTAINMENT PREMISES  
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: [license@milwaukee.gov](mailto:license@milwaukee.gov) [www.milwaukee.gov/license](http://www.milwaukee.gov/license)

Legal Entity Name: Goodson Ventures LLC

Premise Address: 9012 W. Silver Spring Dr., Milwaukee, WI 53225

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

Is there at least 300 feet between the building and any church, school, daycare center or hospital?  Yes  No

**"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 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 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: \_\_\_\_\_

**Proof of Ownership, Lease, or Offer to Purchase (new & transfer applicants only)**

Submit proof of ownership, lease, or offer to purchase the building with this application.  
A lease or offer to purchase must:

- Be in the same legal entity name as that apply for the license
- Reflect the same address as the premises address on this application
- Reflect current dates and
- Be signed by the lessor/seller and lessee/buyer

**Property Information (new & transfer applicants only)**

- Do you own or lease the building?  Own  Lease
- Who owns the fixtures (for example, coolers, etc.)? Tenant
- Are you purchasing the stock and/or fixtures?  No  Yes If yes, amount paid \$ \_\_\_\_\_
- Total amount paid for business \$ \_\_\_\_\_
- 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

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

**Lease Information (new & transfer applicants who are leasing the premises only)**

- a) Date lease begins 08/01/17 Ends N/A
- b) Monthly rental \$ 1,360.00
- 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)? Month to Month
- 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 \$5,000 security deposit
- g) Does the present owner or occupancy 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): \_\_\_\_\_

**Notarized Signatures of Applicants**

SUBSCRIBED AND SWORN TO BEFORE ME

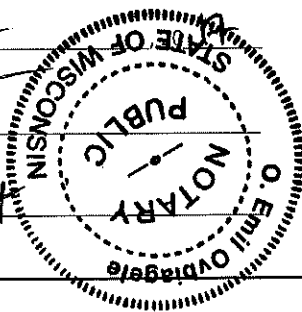
This 17th day of August

*[Handwritten Signature]*

(Clerk/Notary Public)

My Commission Expires permanently

\*Notary Seal must be affixed.



*Ernestine Goodron*

Sole Proprietor, Partner, 20% or more Shareholder, or Agent -- only if there are no 20% or more shareholders

\_\_\_\_\_  
Additional partner or 20% or more shareholder

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 premise applicants must submit the following:**

- Proof of ownership, lease or offer to purchase the building
- Detailed floor plan
- If a restaurant, copy of the menu



# 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](http://www.milwaukee.gov/license) e-mail address: [license@milwaukee.gov](mailto:license@milwaukee.gov)

### TYPES OF ENTERTAINMENT (CHECK ALL THAT APPLY)

<input checked="" type="checkbox"/> Instrumental Musicians	<input checked="" type="checkbox"/> Bands	<input type="checkbox"/> Battle of the Bands	<input type="checkbox"/> Comedy Acts
<input checked="" type="checkbox"/> Disc Jockey	<input type="checkbox"/> Magic Shows	<input type="checkbox"/> Poetry Readings	<input type="checkbox"/> Dancing by Performers
<input type="checkbox"/> Jukebox	<input type="checkbox"/> Wrestling	<input type="checkbox"/> Patron Contests	<input checked="" type="checkbox"/> Patrons Dancing
<input type="checkbox"/> Adult Entertainment/ Strippers/Erotic Dance	<input checked="" type="checkbox"/> Karaoke	<input type="checkbox"/> Bowling Alley	<input type="checkbox"/> Pool Tables
<input type="checkbox"/> Motion Pictures	<input type="checkbox"/> Amusement Machines –	How many? _____	How many? _____
How many? _____	How many? _____	<input type="checkbox"/> Concerts	<input type="checkbox"/> Theatrical Performances
<input type="checkbox"/> Other: _____		Approx. # per year? _____	Approx. # per year? _____

Entertainment Indoor Hours: Alcohol beverage establishment: same as alcohol license hours.  
Non-alcohol establishment: 10:30am to 1:00am Sun to Thurs; 1:30am Fri-Sat

Entertainment Outdoor Closing Hours: 10:00pm Sunday-Thursday; 12:00am Friday & Saturday; unless otherwise approved by Common Council.

### PROMOTERS/SOUND AMPLIFICATION

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:  
*speakers and subs*

### LEGAL CAPACITY OF PREMISES

99 (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.

### NOTARIZED SIGNATURES

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.

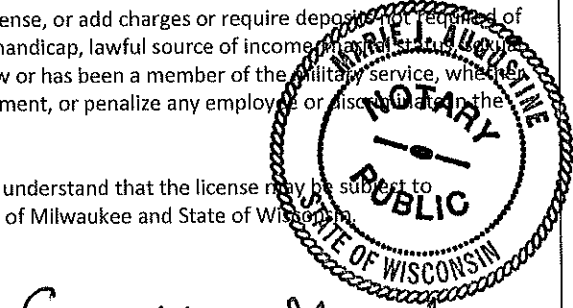
I understand that I shall not willfully refuse to provide the services offered under this license, or add charges or require deposits not required of the general public because of race, color, sex, religion, national origin or ancestry, age, handicap, lawful source of income, marital status, sexual orientation, 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 discriminator 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.

### SUBSCRIBED AND SWORN TO BEFORE ME

This 17<sup>TH</sup> day of AUGUST, 20 17

Marie J. Augustine  
(Clerk/Notary Public)  
My Commission Expires 5/21/2021  
\*Notary Seal must be affixed.



Ermentine Goodson  
Agent/20% or More Shareholder/Partner

Additional 20% or More Shareholder/Partner

Office Use Only: Initials: \_\_\_\_\_ Filed: \_\_\_\_\_ App: \_\_\_\_\_

Check if only PEP (must be heard w/in 60 days) Granted \_\_\_\_\_ License # \_\_\_\_\_





# 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](mailto:license@milwaukee.gov) • [www.milwaukee.gov/license](http://www.milwaukee.gov/license)

Legal Entity Name: Goodson Ventures, LLC

Premises Address: 9012 W. Silver Spring Drive, Milwaukee, WI 53225

## SECTION 1 TYPE OF BUSINESS

Type of application (check one):  taking over a currently operating business  starting a new business  
Anticipated opening date? \_\_\_\_\_

Check the type that best describes your business (check only one):  
See Food Dealer License Information sheet for definitions.

<input checked="" type="checkbox"/> Restaurant	<input type="checkbox"/> Community Food Program
<input type="checkbox"/> Retail Establishment	<input type="checkbox"/> Bed & Breakfast
If retail, will it be a convenience store? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Base for Food Peddler
(less than 5,000 sq ft of retail space, primary business is the sale of basic food items, and in addition sells household products)	<input type="checkbox"/> Base for Temporary/Seasonal Food Stand

In addition, will any wholesale business be done?  Yes  No

If yes, what percentage of the business will be wholesale?  Less than 25%  25% or More (Contact DATCP)\*

Will retail items be sold?  No  Yes If Yes, indicate percentage of food sales \_\_\_\_\_ %

Will restaurant items be sold?  No  Yes If Yes, indicate percentage of food sales 100 %

\* If you checked "25% or More" of the business will be wholesale and answered "No" to restaurant items being sold, do not continue completing this application. A City of Milwaukee License is not required. 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.*

If Yes, check the types of food items:

SNACKS & BEVERAGES  
*includes, but is not limited to, ice cream/soft serve, lemonade, snow cones, coffee, espresso, cappuccino, tea, fruit juice, smoothies, candy, dispensed soda, fruit cups, bakery, cookies, popcorn, kettle corn, cotton candy, funnel cakes, fritters, tortilla chips w/ cheese*

MEALS  
*includes, but is 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*

## SECTION 3 HAZARDOUS FOODS

Will any hazardous food be sold?  No  Yes  
*Hazardous foods require temperature control (includes dairy products such as milk, cheese, and ice cream, fish shellfish, meat, poultry)*

If yes, list the types of food items: dairy, meat, poultry

**SECTION 4 SHARED KITCHEN**

Will you be sharing kitchen space with another operator?

- No If No, SKIP to Section 5
- Yes If Yes, check one:
  - I will rent space from another operator ("Shared Kitchen Agreement" is required)
  - I will rent space to another operator (peddler/caterer)

**SECTION 5 DETAILS OF OPERATION**

Answer the following questions:

- 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
    - If Yes to outdoor activities, check all that apply:  Bar  Cooking/Grilling  Dining
  - Will you have a drive thru window?  No  Yes
    - If Yes to drive thru, are hours different from inside?  No  Yes
    - If Yes, provide drive thru hours: \_\_\_\_\_
  - Will any scales or barcode scanners be used?  No  Yes
- If Yes, a Weights & Measures application must be completed and a license obtained.

**SECTION 6 ADDITIONAL SITES**

Where will food be prepared and/or sold?

- At a single site
  - At multiple sites (for example, a hotel with several dining rooms or bars) How many? \_\_\_\_\_
- If multiple sites, attach a Food Dealer Additional Site Addendum (ccl-foodadd) for each additional site.

**SECTION 7 CONSTRUCTION OR CHANGES**

Are you planning any construction, remodeling or equipment changes?

- No If No, SKIP to Section 6
- Yes If Yes, check all that apply:
  - New construction of a building
  - Construction changes to an existing building
  - Renovation or remodeling
  - Equipment changes only (installation or replacement)

Provide a brief description of the changes: \_\_\_\_\_

Start date: \_\_\_\_\_

Name, Address & Phone Number of Architect: \_\_\_\_\_

Name, Address & Phone Number of Contractor: \_\_\_\_\_

**SECTION 8 ALCOHOL BEVERAGES**

Are you applying for an alcohol beverage license?

No If No, SKIP to Section 9

Yes If YES, if your food license is approved prior to the alcohol beverage license, when do you want the food license issued?  Immediately  At the same time as the alcohol license

**SECTION 9 ACKNOWLEDGEMENTS & SIGNATURE**

You must initial each item confirming your understanding:

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

EG 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.

EG I understand the district alderperson will review and either approve or deny my application. If denied, 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.

EG I understand proof of payment for all license fees must be on file in the License Division before the license may be issued.

EG I understand the license must be issued and posted in my establishment prior to opening for business.

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

Signature of sole proprietor, partner, agent or 20% shareholder: Ernestine Hoodson

Signature of additional partner(s): \_\_\_\_\_

**Milwaukee, WI 53225**

**APPETIZERS**

**Fries - \$3.00**

**Onion Rings - \$5.00**

**Mozzarella Sticks w/Marinara Sauce - \$6.00**

**CHICKEN**

**(EXTRA SAUCE \$1.00)**

**(Regular, Sweet BBQ, Teryaki, Buffalo, Parmesan Garlic, Dry Spicy)**

**Traditional Wings Basket w/fries**

**8 piece - \$8.00**

**Boneless Wings Basket w/fries**

**8 piece - \$8.00**

**FISH DINNERS**

**Catfish w/fries - \$10.00**

**Perch w/fries - \$12.00**

**BURGERS & SANDWICHES**

**1/3 lb. Burger w/fries - \$8.00**

**(Onions, Tomatoes, Lettuce, American, Swiss or Pepper Jack Cheese)  
Add Bacon for \$2.00**

**Grilled Chicken Sandwich w/fries - \$8.00**

**(Onions, Tomatoes, Lettuce, American, Swiss or Pepper Jack Cheese)**

**EGGROLLS**

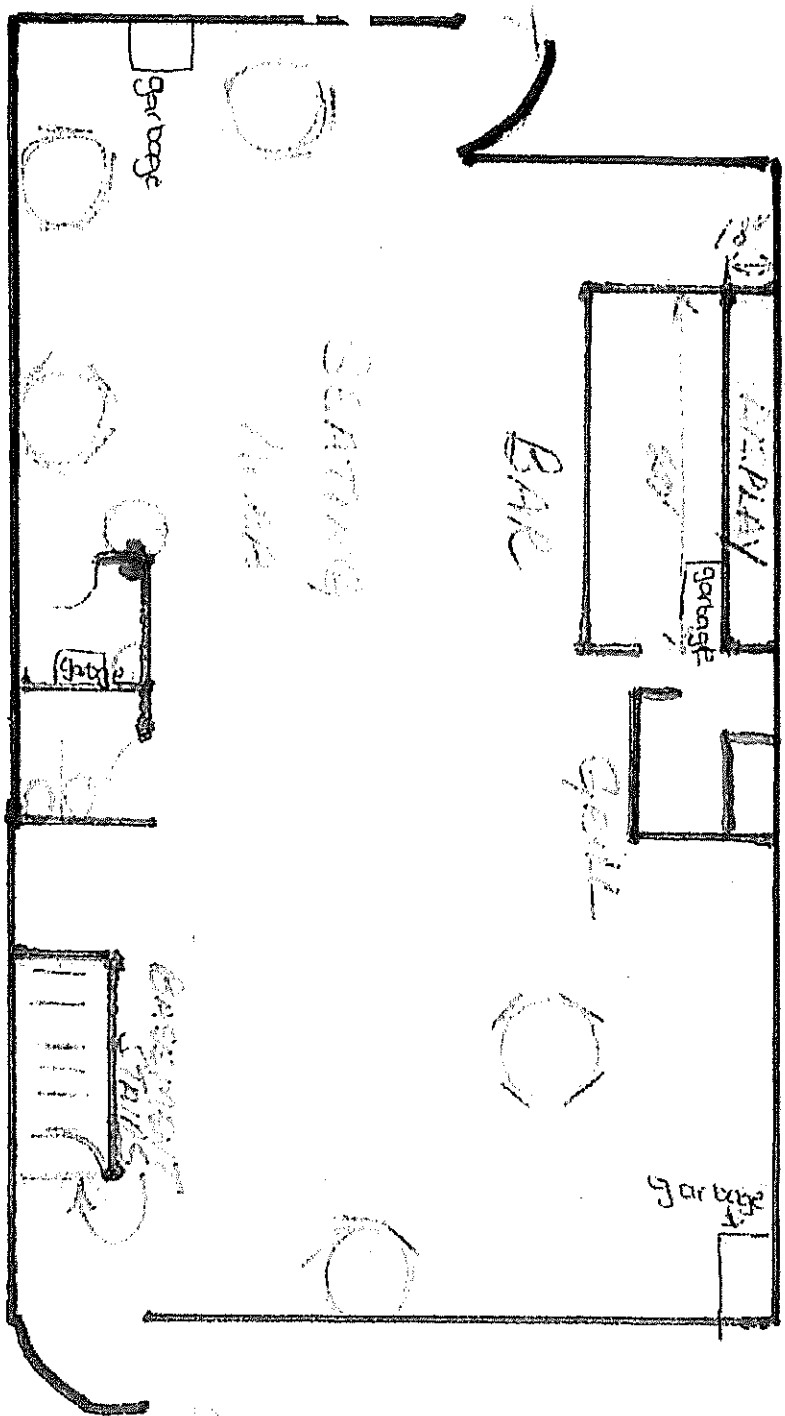
**Buffalo Chicken Eggrolls - \$8.00**

**Philly Cheesesteak Eggrolls - \$8.00**

**Corned Beef Eggrolls - \$8.00**

Silver Spring Drive

Ernestine Goodson, Goodson Ventures LLC  
4015 W. Silver Spring Dr  
Mesa, AZ 85206



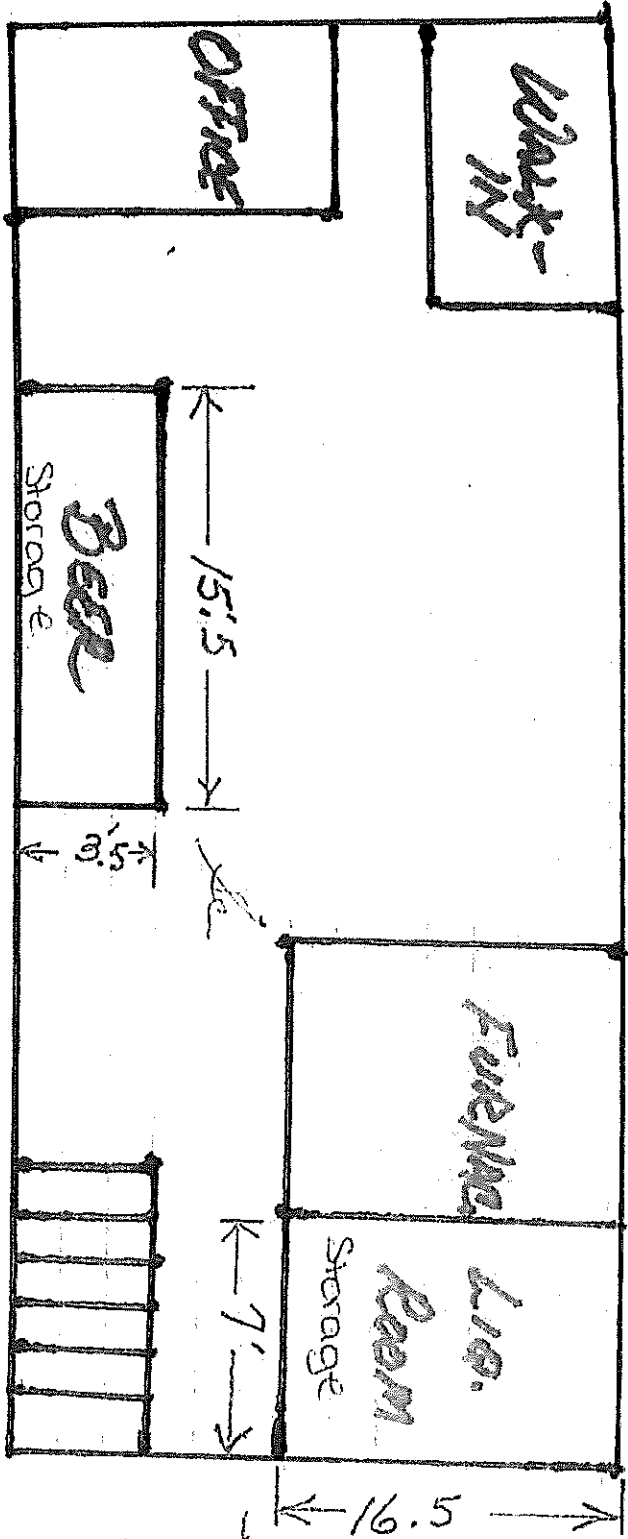
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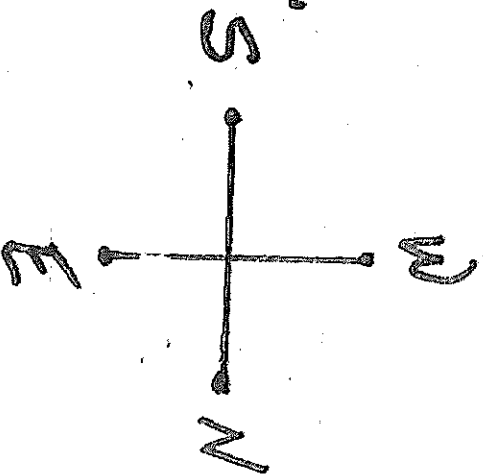
ALL RIGHTS RESERVED



Courtside Bar + Grill  
**BASEMENT**

**9012 W. SILVER SPRING DR.**

Ernestine Goodson, Goodson Ventures LLC  
 9012 W. SILVER SPRING DR  
 MILLER, WY. 53325





CITY OF MILWAUKEE  
OFFICE OF THE CITY CLERK

Wednesday, September 20, 2017

COMMITTEE MEETING NOTICE

AD 02

JOHNSON, Sunshine N, Agent  
Mitchell Oasis, LLC  
6203 W CAPITOL DR  
Milwaukee, WI 53216

You are requested to attend a hearing which is to be held in Room 301-B, Third Floor, City Hall on:

**Tuesday, October 03, 2017 at 09:15 AM**

**Regarding:** Your Food Dealer Retail - Convenience Application as agent for "Mitchell Oasis, LLC" for "Capitol Oasis" at 6203 W CAPITOL DR.



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 in City Hall is available at reduced rates (5 hour limit) at the Milwaukee Center on the southwest corner of East Kilbourn and North Water Street. Parking tickets must be validated in the first floor information booth in City Hall.

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:

\_\_\_\_\_  
Jessica Celella  
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](http://www.milwaukee.gov/license)  
Phone: (414) 286-2238 Fax: (414) 286-3057 Email Address: [License@milwaukee.gov](mailto:License@milwaukee.gov)



CITY OF MILWAUKEE  
OFFICE OF THE CITY CLERK

Wednesday, September 20, 2017

COMMITTEE MEETING NOTICE

AD 02

JOHNSON, Sunshine N, Agent  
Mitchell Oasis, LLC  
12632 E Euclid Ave  
New Berlin, WI 53151

You are requested to attend a hearing which is to be held in Room 301-B, Third Floor, City Hall on:

**Tuesday, October 03, 2017 at 09:15 AM**

**Regarding:** Your Food Dealer Retail - Convenience Application as agent for "Mitchell Oasis, LLC" for "Capitol Oasis" at 6203 W CAPITOL DR.

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.

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JIM OWCZARSKI, CITY CLERK

BY: \_\_\_\_\_

Jessica Celella  
License Division Manager

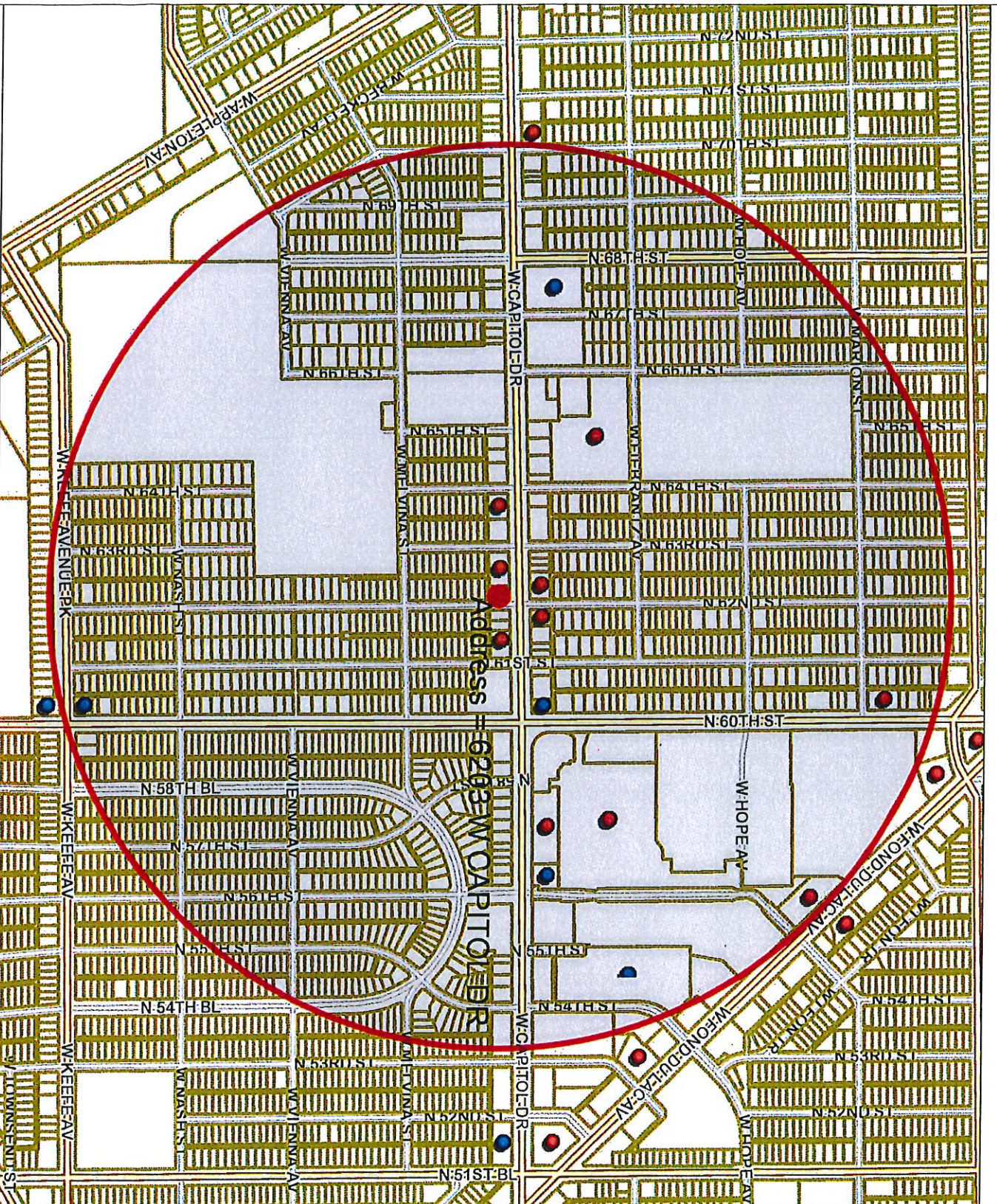
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200 E. Wells Street, Room 105, City Hall, Milwaukee, WI 53202. [www.milwaukee.gov/license](http://www.milwaukee.gov/license)  
Phone: (414) 286-2238 Fax: (414) 286-3057 Email Address: [License@milwaukee.gov](mailto:License@milwaukee.gov)



# Food License Concentration for 6203 W Capitol Dr

City of Milwaukee, Wisconsin



### - Legend -

- Milwaukee parcels
- Street names 10,000
- City limits
- Freeways 15,000
- Freeways
- Exit ramps
- Entry ramps
- Ramps
- Major streets 10,000
- Streets 10,000
- Street names 10,000
- Food licenses**
- Food dealer - retail
- Food dealer - restaurant
- Food distributor
- Meal service establishment/commu
- Food manufacturer

### - Notes -

Licensed food dealer establishments within a half mile radius centered on 6203 W Capitol Dr on September 6, 2017.



Licensed Food Dealer Establishments Within a Half Mile Radius Centered on 6203 W Capitol Dr on September 6, 2017

License Summary		Total		
Food Dealer - Restaurant		11		
Food Dealer Retail		7		
Legal entity	Trade name	Address	License type name	Expiration date
A'viands, LLC	Blessed Savior Catholic School-South	4063 N 64th ST	Food Dealer - Restaurant	6/29/2018
Capri Enterprises, LLC	Cousins Subs	4121 N 56th ST	Food Dealer - Restaurant	6/29/2018
GH MIDTOWN, INC	CULVER'S MIDTOWN	5501 W FOND DU LAC AV	Food Dealer - Restaurant	6/29/2018
DALE'S	DALE'S	6132 W CAPITOL DR	Food Dealer - Restaurant	6/29/2018
Brew City Pizza, Inc.	Domino's Pizza	6327 W Capitol DR	Food Dealer - Restaurant	6/29/2018
Club 4323, LLC	Genes Supper Club	4323 N 60th ST	Food Dealer - Restaurant	3/1/2018
6212 LLC	JJ Fish & Chicken	6212 W CAPITOL DR	Food Dealer - Restaurant	6/29/2018
NEW CHINA RESTAURANT	NEW CHINA RESTAURANT	6113 W CAPITOL DR	Food Dealer - Restaurant	6/29/2018
PH HOSPITALITY GROUP, LLC	PIZZA HUT	5704 W CAPITOL DR	Food Dealer - Restaurant	4/29/2018
ADA Subs Inc.	Subway	5800 W Capitol DR	Food Dealer - Restaurant	7/27/2018
BRIDGEMAN FOODS II, INC	WENDY'S RESTAURANT #5	6225 W CAPITOL DR	Food Dealer - Restaurant	4/29/2018
Aldi, Inc (Wisconsin)	Aldi #76	6700 W Capitol DR	Food Dealer Retail	6/29/2018
ISHA ENTERPRISES, INC	CAPTOL COURT CITGO	4001 N 60TH ST	Food Dealer Retail	4/29/2018
Dollar Tree Stores Inc	Dollar Tree #05946	5310 W Maxwell PL	Food Dealer Retail	3/13/2018
54th Street Foods LLC	Lena's Food Market	4061 N 54TH ST	Food Dealer Retail	2/28/2018
Mega Marts, LLC	Pick N Save #6365	5700 W Capitol DR	Food Dealer Retail	11/12/2017
FUEL LAND USA, INC	RUBY'S PETRO AMERICA	3501 N 60TH ST	Food Dealer Retail	12/26/2017
Starbucks Corporation	Starbucks Coffee Company #2715	5610 W Capitol DR	Food Dealer Retail	1/24/2018

Case : 101002016910 [Close Case](#)

Client Info:

Name:

Address:

Phone Numbe

Email:

Confidential?: N

Issue: City Clerk License Object/Support Web

Date Submitted: 08/22/2017

Status: open

Date Completed:

Address: 6203 W CAPITOL DR

Due Date: 09/21/2017 [Edit](#)

Reason for request:

Object to License| No need for a convenience store here with 2 regular groceries within a few blocks. Parking is limited for customers and deliveries. Robberies are common in this area. Litter will increase

Case notes: [Add Note](#)

1. entered address: 6203 W CAPITOL DR

Staff comments:

Agent Created Case

[Click here to view map and/or images](#)

**REDACTED RECORD**

**Cooney, James**

---

**From:**  
**Sent:** Monday, August 21, 2017 8:36 AM  
**To:** License  
**Subject:** Capitol Oasis

I would like to object to the license approval for a convenience store at 6203 W. Capitol Dr.

I believe it will have an adverse impact on the neighborhood by having traffic in a controlled business and residential area.

Currently we have a take out JJ Fish and Chicken next door and each morning we have to clean up the trash from the customers that are in the area due to the late hours they have.

I believe that it will make a bigger problem with daytime loitering and night time

**REDACTED RECORD**



Thursday, September 21, 2017



# Notice of Public Hearing

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JOHNSON, Sunshine N, Agent  
Capitol Oasis at 6203 W CAPITOL DR  
Food Dealer Retail - Convenience Application

**Tuesday, October 03, 2017 at 9:15 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 10/3/2017 at 9:15 AM, in Room 301-B, Third Floor, City Hall. If you wish, you may provide testimony at the hearing regarding the request; see below for further information. You are not required to attend the hearing. Once the Licenses Committee makes its recommendation, this recommendation is forwarded to the full Common Council for approval at its next regularly scheduled hearing. Please review the information below and if you have further questions regarding this process, please contact the License Division at (414) 286-2238.

---

## 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 AND ZIP CODE
CURRENT OCCUPANT	3947 N 62ND ST	MILWAUKEE, WI 53216-2110
CURRENT OCCUPANT	3957A N 62ND ST	MILWAUKEE, WI 53216-2110
CURRENT OCCUPANT	3958 N 62ND ST	MILWAUKEE, WI 53216-2111
CURRENT OCCUPANT	3934 N 63RD ST	MILWAUKEE, WI 53216-2113
CURRENT OCCUPANT	3950 N 63RD ST	MILWAUKEE, WI 53216-2113
CURRENT OCCUPANT	3957 N 62ND ST	MILWAUKEE, WI 53216-2110
CURRENT OCCUPANT	6209A W CAPITOL DR	MILWAUKEE, WI 53216-2121
CURRENT OCCUPANT	3935 N 62ND ST	MILWAUKEE, WI 53216-2110
CURRENT OCCUPANT	3941 N 62ND ST	MILWAUKEE, WI 53216-2110
CURRENT OCCUPANT	3952 N 62ND ST	MILWAUKEE, WI 53216-2111
CURRENT OCCUPANT	6133A W CAPITOL DR	MILWAUKEE, WI 53216-2119
CURRENT OCCUPANT	3929 N 62ND ST	MILWAUKEE, WI 53216-2110
CURRENT OCCUPANT	3934 N 62ND ST	MILWAUKEE, WI 53216-2111
CURRENT OCCUPANT	3951 N 61ST ST	MILWAUKEE, WI 53216-2104
CURRENT OCCUPANT	6130 W CAPITOL DR	MILWAUKEE, WI 53216-2120
CURRENT OCCUPANT	3946 N 62ND ST	MILWAUKEE, WI 53216-2111
CURRENT OCCUPANT	3954 N 63RD ST	MILWAUKEE, WI 53216-2113
CURRENT OCCUPANT	3946 N 63RD ST	MILWAUKEE, WI 53216-2113
CURRENT OCCUPANT	3953 N 62ND ST	MILWAUKEE, WI 53216-2110
CURRENT OCCUPANT	3956 N 62ND ST	MILWAUKEE, WI 53216-2111
CURRENT OCCUPANT	6133 W CAPITOL DR	MILWAUKEE, WI 53216-2119
CURRENT OCCUPANT	3930 N 62ND ST	MILWAUKEE, WI 53216-2111
CURRENT OCCUPANT	3940 N 63RD ST	MILWAUKEE, WI 53216-2113
CURRENT OCCUPANT	3940 N 62ND ST	MILWAUKEE, WI 53216-2111
CURRENT OCCUPANT	3945 N 61ST ST	MILWAUKEE, WI 53216-2104

**Total Records: 26**

**Radius: 250.0 feet and Center of Circle: 6203 W Capitol DR**



# FOOD DEALER LICENSE PLAN OF OPERATION

ccl-foodplan 8/1/16

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

Legal Entity Name: Mitchell Oasis, LLC

Premises Address: 6203 W. Capitol Dr Milwaukee, WI 53216-2121

## SECTION 1 TYPE OF BUSINESS

Type of application (check one):  taking over a currently operating business  starting a new business  
Anticipated opening date? 9.1.17

Check the type that best describes your business (check only one):  
See Food Dealer License Information sheet for definitions.

<input type="checkbox"/> Restaurant	<input type="checkbox"/> Community Food Program
<input checked="" type="checkbox"/> Retail Establishment	<input type="checkbox"/> Bed & Breakfast
If retail, will it be a convenience store? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Base for Food Peddler
(less than 5,000 sq ft of retail space, primary business is the sale of basic food items, and in addition sells household products)	<input type="checkbox"/> Base for Temporary/Seasonal Food Stand

In addition, will any wholesale business be done?  Yes  No

If yes, what percentage of the business will be wholesale?  Less than 25%  25% or More (Contact DATCP)\*

Will retail items be sold?  No  Yes If Yes, indicate percentage of food sales 70 %

Will restaurant items be sold?  No\*  Yes If Yes, indicate percentage of food sales \_\_\_\_\_ %

\* If you checked "25% or More" of the business will be wholesale and answered "No" to restaurant items being sold, do not continue completing this application. A City of Milwaukee License is not required. 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.*

If Yes, check the types of food items:

SNACKS & BEVERAGES  
*includes, but is not limited to, ice cream/soft serve, lemonade, snow cones, coffee, espresso, cappuccino, tea, fruit juice, smoothies, candy, dispensed soda, fruit cups, bakery, cookies, popcorn, kettle corn, cotton candy, funnel cakes, fritters, tortilla chips w/ cheese*

MEALS  
*includes, but is 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*

## SECTION 3 HAZARDOUS FOODS

Will any hazardous food be sold?  No  Yes  
*Hazardous foods require temperature control (includes dairy products such as milk, cheese, and ice cream, fish shellfish, meat, poultry)*

If yes, list the types of food items: \_\_\_\_\_

**SECTION 4 SHARED KITCHEN**

Will you be sharing kitchen space with another operator?

- No If No, SKIP to Section 5
- Yes If Yes, check one:
  - I will rent space from another operator ("Shared Kitchen Agreement" is required)
  - I will rent space to another operator (peddler/caterer)

**SECTION 5 DETAILS OF OPERATION**

Answer the following questions:

- 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
  - If Yes to outdoor activities, check all that apply:  Bar  Cooking/Grilling  Dining
- Will you have a drive thru window?  No  Yes
  - If Yes to drive thru, are hours different from inside?  No  Yes
  - If Yes, provide drive thru hours: \_\_\_\_\_
- Will any scales or barcode scanners be used?  No  Yes
  - If Yes, a Weights & Measures application must be completed and a license obtained.

**SECTION 6 ADDITIONAL SITES**

Where will food be prepared and/or sold?

- At a single site
- At multiple sites (for example, a hotel with several dining rooms or bars) How many? \_\_\_\_\_  
If multiple sites, attach a Food Dealer Additional Site Addendum (ccl-foodadd) for each additional site.

**SECTION 7 CONSTRUCTION OR CHANGES**

Are you planning any construction, remodeling or equipment changes?

- No If No, SKIP to Section 6
- Yes If Yes, check all that apply:
  - New construction of a building
  - Construction changes to an existing building
  - Renovation or remodeling
  - Equipment changes only (installation or replacement)

Provide a brief description of the changes: \_\_\_\_\_

Start date: \_\_\_\_\_

Name, Address & Phone Number of Architect: \_\_\_\_\_

Name, Address & Phone Number of Contractor: \_\_\_\_\_







# BUSINESS LICENSE PLAN OF OPERATION

ccl-busplan 5/24/16

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  Rooming House  Hotel/Motel  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:

Snacks and tobacco sales

Do you have any experience operating this type of business?  No  Yes If yes, explain: I have a location on 628 W. Mitchell

## 2. Business Operations

- a. Proposed Opening Date: 9.1.17
- 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: July 27, 2017
- 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: Boost Mobile Cellular Co.

## 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: \_\_\_\_\_

## 4. Smoking & Sanitation

- a. Are there designated outdoor smoking areas?  No  Yes If yes, describe: \_\_\_\_\_
- b. Number of Garbage Cans: Inside: 2 Locations: inside building Boost / Shop  
Outside: 2 Locations: Back of building
- 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: \_\_\_\_\_

## 5. Security

- a. Are there onsite parking spaces?  No  Yes If yes, indicate how many? 4 and describe the parking security plan: Parking is on the lot for customers only
- 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? 1 and answer the following:  
 What are their responsibilities? Watch over premises, customers, & employees  
 Is security equipment used?  No  Yes If yes, describe \_\_\_\_\_  
 List their licensing, certification, or training credentials \_\_\_\_\_
- d. Will there be security cameras?  No  Yes If yes, where? Front and back of building and inside
- e. Will searches/identification checks be done upon entry?  No  Yes If yes, describe \_\_\_\_\_

## 6. Percentage of Sales (must total 100%)

Alcohol _____%	Food <u>70</u> %	Secondhand Merchandise _____%	Precious Metals & Gems _____%
Entertainment _____%	Cigarettes <u>30</u> %	_____%	_____%
Pawnbroker Activity _____%	Salvaged Materials _____% (such as scrap metal)	Personal Services (such as tattoo, body piercing, salon, tailor, tanning, etc.) _____%	Other _____% 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: \_\_\_\_\_     Rooming House: Number of Floors: \_\_\_\_\_  
 Number of Rooms: \_\_\_\_\_    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 \_\_\_\_\_ (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):

1<sup>st</sup> Floor  2<sup>nd</sup> 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: Condish

d. Describe Building:  Free Standing Building  Strip Mall  Other: \_\_\_\_\_

e. Describe Premises Structure:  Single Story  Multi-Story - # of Stories \_\_\_\_\_  Other: \_\_\_\_\_

f. Describe Surrounding Area:  Commercial  Residential  Industrial  Other: \_\_\_\_\_

g. Building Owner Name: Omar Ahmad Phone Number: \_\_\_\_\_

Business Owner Address: 6203 W Capitol Dr. Milwaukee WI 53216

## 10. Hours of Operation & Customers

Will customers be entering the premises?  No  Yes

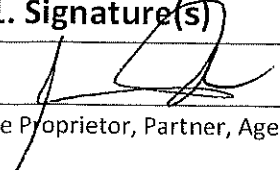
Day of the Week	Proposed Hours of Operation:		Estimated Number of Customers expected each day	Potential Age Range of Customers	Class B Tavern Applicant Only: Age Restriction (If none, write 'None')
	Open Time (include a.m. or p.m.)	Close Time (include a.m. or p.m.)			
Sunday	7am	11pm	20-45	18+	
Monday	7am	11pm	20-45	18+	
Tuesday	7am	11pm	20-45	18+	
Wednesday	7am	11pm	20-45	18+	
Thursday	7am	11pm	20-45	18+	
Friday	7am	11pm	20-45	18+	
Saturday	7am	11pm	20-45	18+	

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 a.m. and 5 a.m.

Entertainment Indoor Closing Hours : If alcohol beverage establishment, same as alcohol license hours.  
If non-alcohol establishment 1:00 am Sunday to Thursday; 1:30 am Friday and Saturday.

Entertainment Outdoor Closing Hours : 10:00 pm Sunday – Thursday; 12:00 am Friday and Saturday,  
unless otherwise approved by Common Council in licensee's plan of operation.

## 11. Signature(s)

  
Sole Proprietor, Partner, Agent, or 20% or more Shareholder

Signature of additional partner or 20% or more Shareholder

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

6203 W Capital Dr. - eastside of building  
North

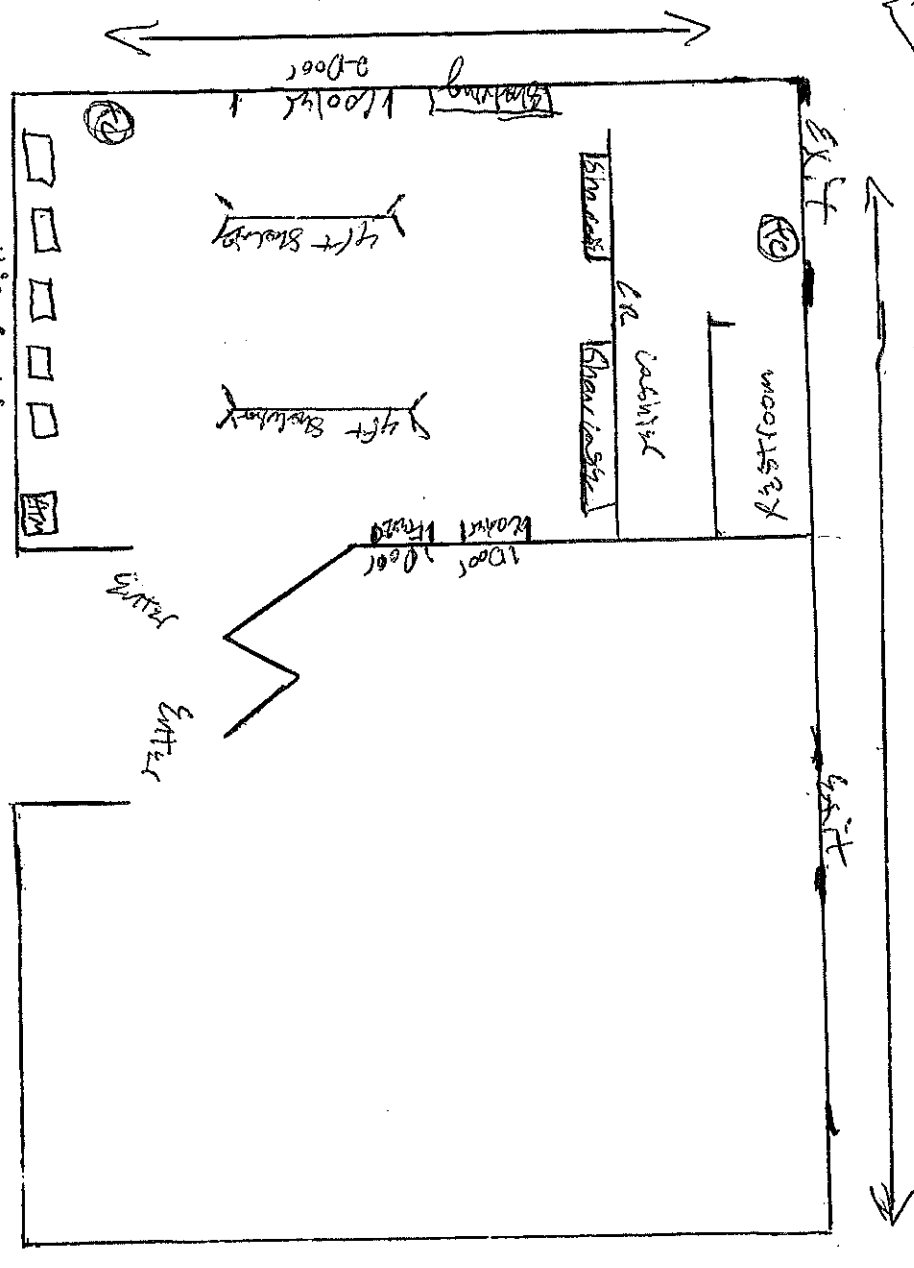
Milwaukee, WI 53216  
Mitchell Oasis, LLC  
Capital Oasis

Sunshine Johnson - Agent  
414-698-8071  
8.14.17

Capital Dr  
Entrance

15 ft  
Entrance

15 ft



30 ft  
EXIT  
PARKING  
602nd St.