



**CITY OF MILWAUKEE
OFFICE OF THE CITY CLERK**

Wednesday, July 05, 2017

COMMITTEE MEETING NOTICE

AD 06

ADHIKARI, Doris, Agent
Locust Super Market LLC
1100 W Wells St #911
Milwaukee, WI 53233

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

Tuesday, July 11, 2017 at 08:45 AM

Regarding: Your Class A Malt and Food Dealer License Applications as agent for "Locust  er Market LLC" for "Locust Super Market" at 2902 N Mother Simpson WA.

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
Phone: (414) 286-2238 Fax: (414) 286-3057 Email Address: License@milwaukee.gov

Date: 05/19/17
Officer: L. Lammers

City of Milwaukee Police Department
90-5-1.5 Crime Prevention Survey
Convenience Store/Liquor Store Inspection

Name of Premise: Locust Super Market
Address: 2902 N Mother Simpson Way
Phone: 414-372-4082

Owner: ZAID 9 LLC
Owner address: 5546 Serene Ct
City State Zip: Greendale, WI 53129
Owner Phone:
Owner email:

Manager: Doris S Adhikari
Home Address: 1100 W Wells St, #911
City State Zip: Milwaukee, WI 53233
Phone: 414-223-4419
Email:

Preferred contact: Store Phone

Location currently open: YES NO

Projected open date:

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

Hours of Operation: Sun: 9 am – 9 pm
Mon: 9 am – 9 pm
Tue: 9 am – 9 pm
Wed: 9 am – 9 pm
Thu: 9 am – 9 pm
Fri: 9 am – 9 pm
Sat: 9 am – 9 pm
24 hours Y N

Premise Type: Liquor Store
Convenience Store
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: #:

Who is your alcohol distributor? Beer Capitol

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. Is the parking lot well lit? Yes No
9. Are there areas where a person could conceal themselves Yes No
10. Is there exterior lighting? Yes No. Does it appears to be adequate Yes No
11. Exterior Payphone? Yes No
12. Are there No Loitering Signs posted? Yes No
13. Are there exterior security cameras Yes No How Many: 3
14. Are the address numbers prominently displayed and easy to see Yes No

Camera Survey:

15. Does this location have security cameras? Yes No
16. Are they in working order? Yes No
17. What format are the cameras?
 - a. Color Yes No
 - b. Digital Yes No
 - c. VCR Yes No
 - d. Recorded Yes No
18. How long is footage stored for later viewing: 30 days
19. Are there exterior cameras Yes No How many: 3
20. Are there interior cameras Yes No How many: 5

21. Do all employees know how to retrieve recorded digital images/footage? Yes No

Interior Survey:

22. 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
23. Is the interior of the location neat and clean? Yes No
24. Does an interior camera face the entrance/exit? Yes No
25. Is there a lockable area that separates employees from customers? Yes No
26. Does the store sell single chore boy? Yes No
27. Does the store sell blunt wraps? Yes No
28. Does the store sell scales? Yes No
29. Does the store sell items that may be used as crack pipes? Yes No
a. Describe item N/A
30. Does the store have an over abundance of sandwich baggies: Yes No
31. Does the owner understand that these items are often used for drug use? Yes No
32. Do the products in the store appear to be new and rotated often? Yes No
33. Are emergency and non-emergency numbers posted near the phone? Yes No
34. 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

Complete this section if alcohol establishment is a convenience store:

(** Read full ordinance for all details "68-55 Convenience Food Stores")

All convenience food stores not exempted under sub. 3 shall:

1. Is the cash register located in a manner so that at the time of a sales transaction, the employee and customer are both visible from the sidewalk? Yes No **
2. Are the glass entrance and exit doors clear of any signs or advertisements with the exception of a sign which states that the cash register contains \$50 or less and that the safe is not accessible to employees? Yes No
3. Does the store maintain one of the following on the licensed premise:
 - a. A safe that was in use at the convenience food store on August 17, 1994? Yes No
 - b. A drop-safe or time release safe that weighs at least 500 pounds or which is attached to or set into the floor in a manner approved by the police department? Yes No
4. Is lighting provided for the store's parking area during all hours of darkness when employees or customers are on the premises at a minimum average of 2-foot candles per square foot, unless the store is not open for business after sunset and before sunrise? Yes No N/A
5. Are at least two high-resolution surveillance security cameras installed? Yes No
6. Are the security cameras in working order? Yes No
7. Does one camera show an overall view of the counter and register area? Yes No
8. Does one camera show a clear, identifiable, full frame image of the face of each person entering and leaving the store? Yes No
9. Are the camera views obstructed by fixtures or displays? Yes No

10. Is the recorded footage stored for at least 30 days? Yes No
11. Do all store employees know how to record footage from the camera system to media capable of being transferred to police custody? Yes No
12. Are customer entrances/exits made of glass or other transparent material? Yes No
- a. Exception: A store that does not have such doors on August 17, 1994 shall not be required to install such doors until the holder of the store's food dealer license changes.
13. Has the owner and their employees attended the Robbery Prevention Training within 120 days of ownership or employment? Yes No
- a. Contact Community Outreach and Education at 935-7836 for schedule.

Sub 3. Exemptions. The requirements of this section do not apply to a convenience food store that conforms to either of the following descriptions:

- a-1. The store is located in an enclosed shopping structure, enclosed commercial building or hospital. A convenience food store is not in an enclosed structure or building if a customer can enter it directly from the outside.
Does store conform to a-1 Yes No
- a-2. The store physically separates employees from customers with a solid partition that bars a person from entering the employee area from the customer area, has a secure lock on the employee side of any door between the employee area and the customer, and conducts all transaction through a service window or similar arrangement.
Does store conform to a-2 Yes No
- a. At the commissioner's discretion, a convenience store may be exempted from any or all of the regulations specified in sub 2.
Does this location hold an exemption from the commissioner regarding any of the requirements of Sub 2? Yes No

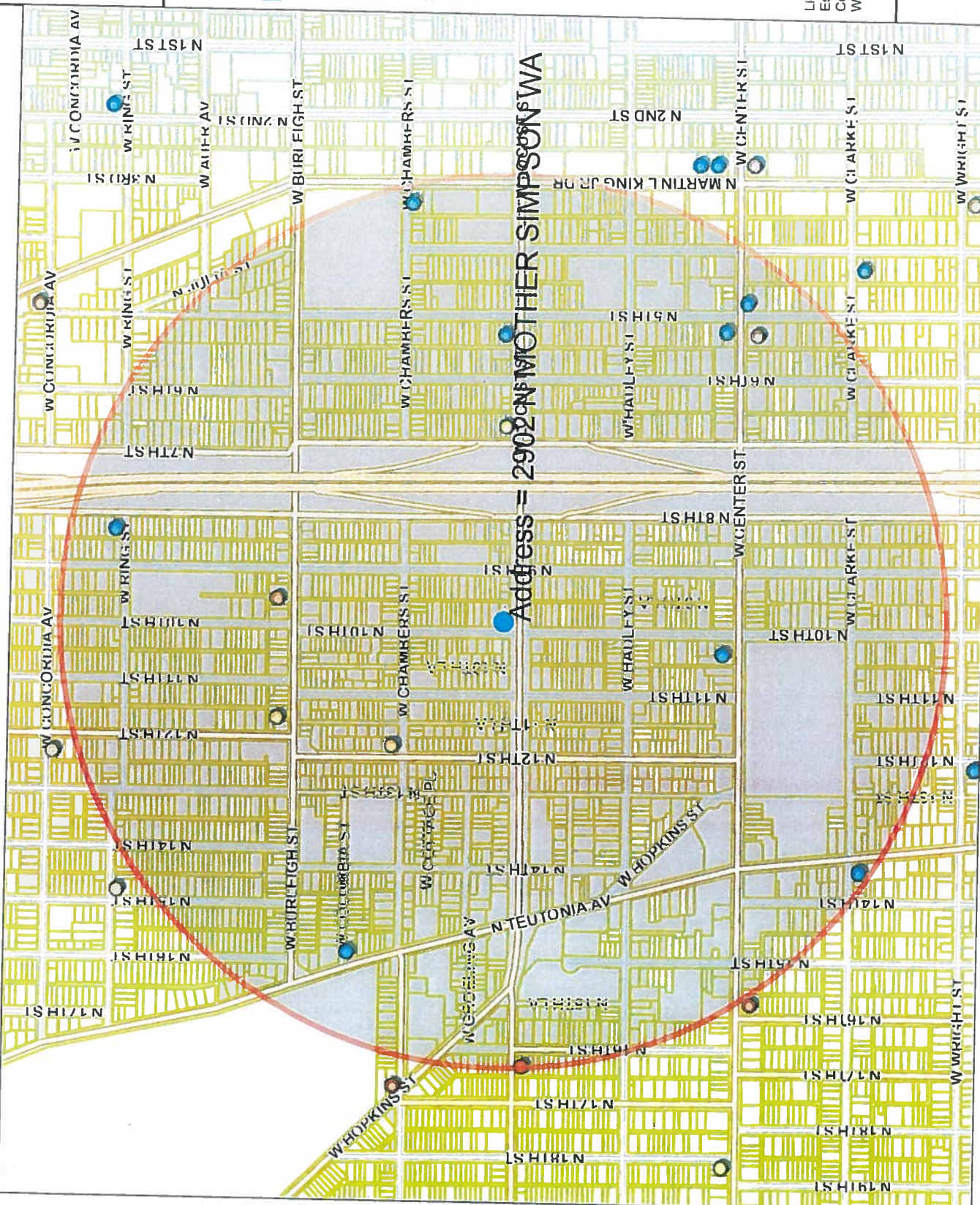
ADDITIONAL COMMENTS/RECOMMENDATIONS:

A CPTED survey was done for this location in March of 2015. Since then, there have been upgrades to the interior of the business to include a much improved security camera system, and a new enclosure for employees. There are now 3 exterior cameras and 5 interior cameras. The enclosure for employees does contain the register, and has a glass partition to separate employees from customers, as well as a door that can be locked to completely separate the area.

The entrance door has also been upgraded to a full glass door. It is fully covered with a sign right now, but they stated they will be removing that as soon as their ADT security system is installed next week.

Alcohol Concentration for 2902 N Mother Simpson Wa

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

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 2902 N Mother Simpson Wa, on May 1, 2017



Department of Administration - ITMD



Map Scale: 1:10,000

[Disclaimer](#)
5/1/2017

© City of Milwaukee, Wisconsin
Map Milwaukee: Property Information

Licensed Alcohol Beverage Establishments within a .5 Mile Radius Centered on 2902 N Mother Simpson Wa, on May 1, 2017

License Summary	Trade name	Licensee	License type name	Total capacity	Address	Expiration date
Class A Fermented Malt Beverage Retailer's License	BURLEIGH FOOD MART	MUSTAFA T MUSTAFA, Agt	Class A Fermented Malt Beverage Retailer's License		1120 W BURLEIGH ST	12/9/2017 18:00
Class A Malt & Class A Liquor License	7TH STREET FOODS	JATINDER SINGH, Agt	Class A Fermented Malt Beverage Retailer's License		2900 N 7TH ST	1/13/2018 18:00
Class B Tavern License	Locust Food Market	Haithem A Al Qasem, Agt	Class A Fermented Malt Beverage Retailer's License		2902 N Mother Simpson WA	6/6/2017 19:00
	North Side Meat Mart	Faiz N Mavrakis, Agt	Class A Fermented Malt Beverage Retailer's License		3004 N 12th ST	4/28/2018 19:00
	Cypress Lane LLC	Gurinder S Nagra, Agt	Class A Malt & Class A Liquor License		2667 N 5th ST	2/26/2018 18:00
	Magic Holdings, LLC	DANIEL S HARRIS, Agt	Class A Malt & Class A Liquor License		2879 N 16th ST	5/22/2017 19:00
	V & T LIQUORS, INC	VICKIE M BROOKS, Agt	Class A Malt & Class A Liquor License		916 W BURLEIGH ST	7/24/2017 19:00
	WILSON'S CLUB	CORINE S WILSON, SP	Class B Tavern License	90	1008 W CENTER ST	6/29/2017 19:00
	Rookies Sports Lounge	TIFFANY GIVENS, SP	Class B Tavern License	124	2579 N Teutonia AV	11/10/2017 18:00
	ED'S LOUNGE	Larissa L Sharkey, SP	Class B Tavern License	80	2678 N 5TH ST	2/28/2018 18:00
	REDHEAD, INC	DIANA L CONDON, Agt	Class B Tavern License	160	2901 N 5TH ST	7/23/2017 19:00
	G-MAN	LESLIE Y HODGES, SP	Class B Tavern License	100	2979 N MARTIN L KING JR DR	11/29/2017 18:00
	Midnighter's Bar	OCTAVIUS M SIMMONS, SP	Class B Tavern License		3038 N Teutonia AV	7/13/2017 19:00
	Brother's II	PAUL E SIMMONS, SP	Class B Tavern License	75	3251 N 8th ST	4/9/2018 19:00
	TWISTERS INN	MILEY HOWARD, SP	Class B Tavern License	100	508 W CENTER ST	5/12/2017 19:00
				Grand Total		
Total						



Wednesday, July 05, 2017



Notice of Public Hearing

ADHIKARI, Doris, Agent
Locust Super Market at 2902 N Mother Simpson WA
Class A Malt and Food Dealer License Applications

Tuesday, July 11, 2017 at 8:45 AM

To whom it may concern:

The above application has been made by the above named applicant(s). This requires approval from the Licenses Committee and the Common Council of the City of Milwaukee. The hearing before the Licenses Committee will take place on 7/11/2017 at 8:45 AM, in Common Council Chambers, 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	2916A N MOTHER SIMPSON WAY	MILWAUKEE, WI 53206-3249
CURRENT OCCUPANT	902 W LOCUST ST	MILWAUKEE, WI 53206-3242
CURRENT OCCUPANT	2859A N 10TH ST	MILWAUKEE, WI 53206-3225
CURRENT OCCUPANT	2867 N 9TH ST	MILWAUKEE, WI 53206-3215
CURRENT OCCUPANT	2918 N 10TH LN	MILWAUKEE, WI 53206-3264
CURRENT OCCUPANT	2915 N 9TH ST	MILWAUKEE, WI 53206-3217
CURRENT OCCUPANT	2926 N MOTHER SIMPSON WAY	MILWAUKEE, WI 53206-3249
CURRENT OCCUPANT	2934 N 10TH LN	MILWAUKEE, WI 53206-3264
CURRENT OCCUPANT	2916 N MOTHER SIMPSON WAY	MILWAUKEE, WI 53206-3249
CURRENT OCCUPANT	2940A N MOTHER SIMPSON WAY	MILWAUKEE, WI 53206-3249
CURRENT OCCUPANT	2940 N MOTHER SIMPSON WAY	MILWAUKEE, WI 53206-3249
CURRENT OCCUPANT	2859 N 10TH ST	MILWAUKEE, WI 53206-3225
CURRENT OCCUPANT	2852 N 10TH ST	MILWAUKEE, WI 53206-3224
CURRENT OCCUPANT	2937 N MOTHER SIMPSON WAY	MILWAUKEE, WI 53206-3263
CURRENT OCCUPANT	2911 N 9TH ST	MILWAUKEE, WI 53206-3217
CURRENT OCCUPANT	2918 N MOTHER SIMPSON WAY	MILWAUKEE, WI 53206-3249
CURRENT OCCUPANT	2904 N MOTHER SIMPSON WAY	MILWAUKEE, WI 53206-3249
CURRENT OCCUPANT	910 W LOCUST ST	MILWAUKEE, WI 53206-3242
CURRENT OCCUPANT	2925 N 9TH ST	MILWAUKEE, WI 53206-3217
CURRENT OCCUPANT	2939 N 9TH ST	MILWAUKEE, WI 53206-3217
CURRENT OCCUPANT	2912 N 10TH LN	MILWAUKEE, WI 53206-3264
CURRENT OCCUPANT	2911A N 9TH ST	MILWAUKEE, WI 53206-3217
CURRENT OCCUPANT	2921 N 9TH ST	MILWAUKEE, WI 53206-3217
CURRENT OCCUPANT	2931 N 9TH ST	MILWAUKEE, WI 53206-3217
CURRENT OCCUPANT	2941 N MOTHER SIMPSON WAY	MILWAUKEE, WI 53206-3263
CURRENT OCCUPANT	2921A N 9TH ST	MILWAUKEE, WI 53206-3217
CURRENT OCCUPANT	2865 N 9TH ST	MILWAUKEE, WI 53206-3215

Total Records: 28

Radius: 250.0 feet and Center of Circle: 2902 N Mother Simpson WA



Wednesday, July 05, 2017

Licenses Committee Notice of Hearing

Zaid 9
5546 Serene Ct
Greendale, WI 53129

Date: 7/11/2017
Time: 08:45 AM
Location: Common Council Chambers, Third Floor, City Hall

The Licenses Committee will consider the following license application:

Class A Malt and Food Dealer License Applications
ADHIKARI, Doris, Agent
Locust Super Market at 2902 N Mother Simpson WA

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, July 05, 2017

Licenses Committee Notice of Hearing

Asad Sharif
312 W Keefe Avenue
Milwaukee, WI 53206

Date: 7/11/2017
Time: 08:45 AM
Location: Common Council Chambers, Third Floor, City Hall

The Licenses Committee will consider the following license application:

Class A Malt and Food Dealer License Applications
ADHIKARI, Doris, Agent
Locust Super Market at 2902 N Mother Simpson WA

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.





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

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:

Grocery Store

Do you have any experience operating this type of business? No Yes If yes, explain: Management experience in running a retail store.

2. Business Operations

- a. Proposed Opening Date: JUNE 2017
- 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: _____

4. Smoking & Sanitation

- a. Are there designated outdoor smoking areas? No Yes If yes, describe: _____
- b. Number of Garbage Cans: Inside: 2 Locations: BY CASHIER + FRONT DOOR
Outside: 1 Locations: BY FRONT DOOR
- 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: Eagle

5. Security

- a. Are there onsite parking spaces? No Yes If yes, indicate how many? _____ 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? _____ and answer the following:
 What are their responsibilities? _____
 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? 5 inside, 3 outside
- e. Will searches/identification checks be done upon entry? No Yes If yes, describe _____

6. Percentage of Sales (must total 100%)

Alcohol <u>30</u> %	Food <u>40</u> %	Secondhand Merchandise _____ %	Precious Metals & Gems _____ %
Entertainment _____ %	Cigarettes <u>20</u> %		
Pawnbroker Activity _____ %	Salvaged Materials _____ % (such as scrap metal)	Personal Services (such as tattoo, body piercing, salon, tailor, tanning, etc.) _____ %	Other <u>10</u> % Describe: <u>General Merchandise</u>

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):
 1st Floor 2nd Floor Basement Storage Patio Beer Garden Sidewalk Café Deck Rooftop
 Other: Describe: _____
- b. Describe Location: Major Thoroughfare Secondary Street Other: _____
- c. Nearest Major Cross Street: Locust
- d. Describe Building: Free Standing Building Strip Mall Other: _____
- e. Describe Premises Structure: Single Story Multi-Story - # of Stories 2 Other: _____
- f. Describe Surrounding Area: Commercial Residential Industrial Other: _____
- g. Building Owner Name: Asad Sharif Phone Number: 414-305-7299
 Business Owner Address: 312 West Keefe Ave. Milwaukee, WI 53206

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	9am	9pm	75		
Monday	9am	9pm	100		
Tuesday	9am	9pm	100		
Wednesday	9am	9pm	100		
Thursday	9am	9pm	100		
Friday	9am	9pm	100		
Saturday	9am	9pm	100		

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 Permitted Hours of Operation: Class A: 8:00 am to 9:00 pm Sunday thru Saturday
 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)



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 www.milwaukee.gov/license

Legal Entity Name: Locust Super Market LLC

Premise Address: 2902 North Mother Simpson Way Milwaukee, WI 53206

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)

a) Do you own or lease the building? Own Lease

b) Who owns the fixtures (for example, coolers, etc.)? Building Owner

c) Are you purchasing the stock and/or fixtures? No Yes If yes, amount paid \$ To Be Determined

d) Total amount paid for business \$ 0

e) Total amount paid for goodwill of the business \$ 0

Goodwill comprises the reputation and customer relationships of an existing business. If the price you pay for the business exceeds the fair market value of all of the rest of the assets of the business, the excess may be considered goodwill.

f) Have you made arrangements with the seller for payment of personal property taxes? No Yes

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 May 1st 2017 Ends April 30th 2022
- b) Monthly rental \$ 1,500.00
- 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)? 5 years
- 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 _____
- 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): _____

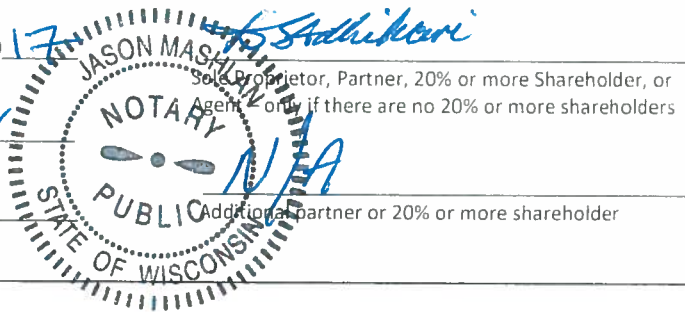
Notarized Signatures of Applicants

SUBSCRIBED AND SWORN TO BEFORE ME

This 26th day of April, 2017


(Clerk/Notary Public)

My Commission Expires 08/28/2017
*Notary Seal must be affixed.



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



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 • www.milwaukee.gov/license

Legal Entity Name: Locust Super MARKET LLC
Premises Address: 2902 North Mother Simpson Way Milwaukee, WI 53206
SECTION 1 TYPE OF BUSINESS
Type of application (check one): <input checked="" type="checkbox"/> taking over a currently operating business <input type="checkbox"/> 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 type="checkbox"/> Restaurant <input checked="" type="checkbox"/> Retail Establishment If retail, will it be a convenience store? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (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"/> Community Food Program <input type="checkbox"/> Bed & Breakfast <input type="checkbox"/> Base for Food Peddler <input type="checkbox"/> Base for Temporary/Seasonal Food Stand
In addition, will any wholesale business be done? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If yes, what percentage of the business will be wholesale? <input type="checkbox"/> Less than 25% <input type="checkbox"/> 25% or More (Contact DATCP)*
*Will retail items be sold? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If Yes, indicate percentage of food sales <u>75</u> %
Will restaurant items be sold? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If Yes, indicate percentage of food sales <u>25</u> %
* 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? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <i>Processing is defined as assembling, grinding, cutting, mixing, baking, coating, stuffing, packing, bottling, grilling, canning, extracting, fermenting, distilling, pickling, freezing, drying, smoking, or packaging.</i>
If Yes, check the types of food items: <input checked="" type="checkbox"/> SNACKS & BEVERAGES <i>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</i> <input checked="" type="checkbox"/> MEALS <i>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</i>
SECTION 3 HAZARDOUS FOODS
Will any hazardous food be sold? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <i>Hazardous foods require temperature control (includes dairy products such as milk, cheese, and ice cream, fish shellfish, meat, poultry)</i>
If yes, list the types of food items: <u>Frozen,Dairy,IceCream plus any or all permissible items.</u>

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:

- ASA I understand the Health Department must conduct an inspection and advise the License Division of their approval before the license may be issued.
- ASA 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.
- ASA 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.
- ASA I understand proof of payment for all license fees must be on file in the License Division before the license may be issued.
- ASA I understand the license must be issued and posted in my establishment prior to opening for business.
- ASA 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: ASA *ASA*

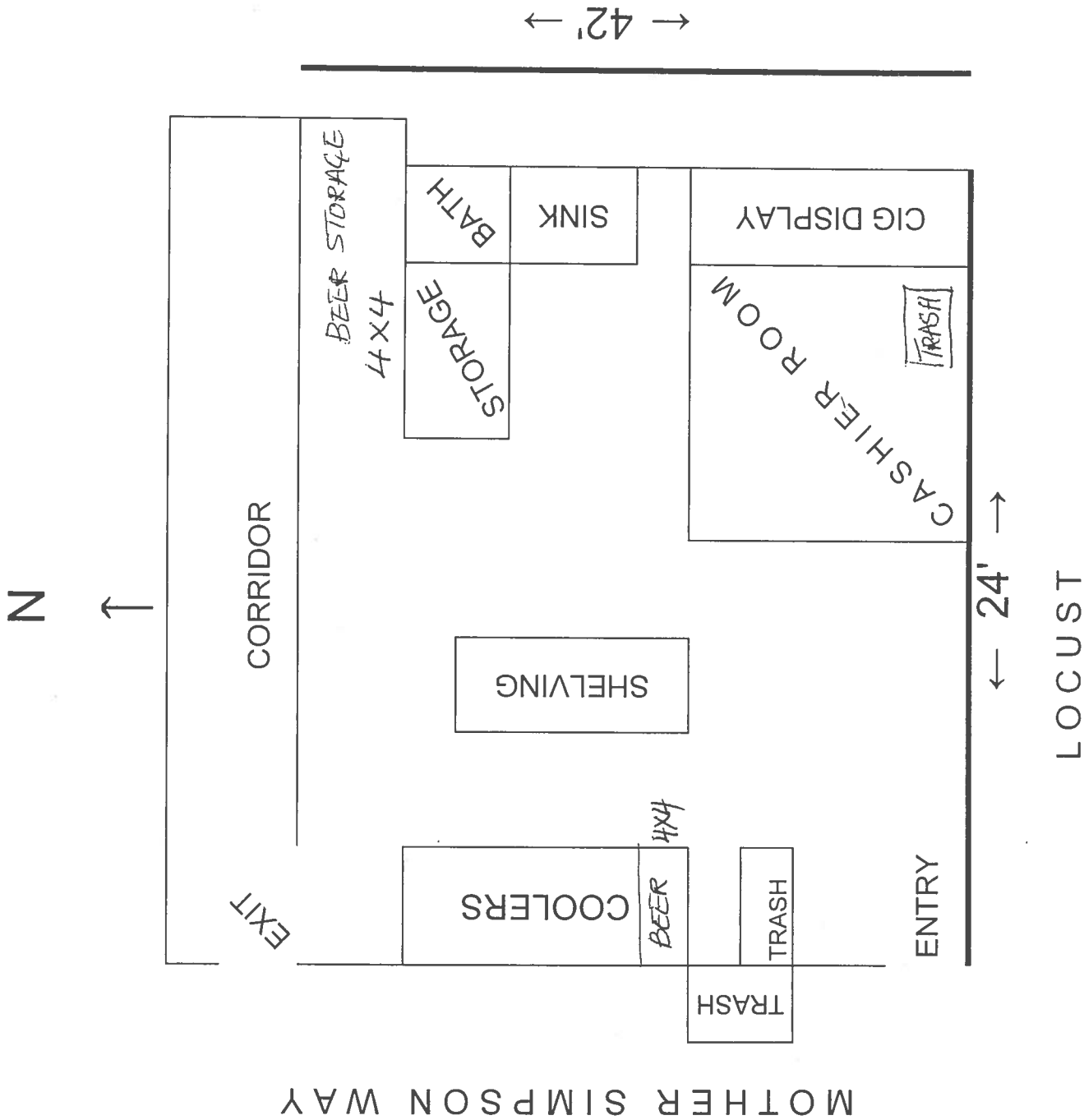
Signature of additional partner(s): _____

Locust Super Market LLC
DBA Locust Super Market
Agent: Doris Adhikari

2902 N. Mother Simpson Way

Milwaukee, WI 53206

4-26-17



TOTAL : 1008 sq. ft



CITY OF MILWAUKEE
OFFICE OF THE CITY CLERK

Wednesday, July 05, 2017

COMMITTEE MEETING NOTICE

AD 01

MULTANI, Swaran S, Agent
Green Bay Food & Liquor Inc
W141 N 4845 Golden Fields Ct
Menomonee Falls, WI 53051

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

Tuesday, July 11, 2017 at 08:45 AM

Regarding: Your Class A Malt & Class A Liquor and Food Dealer License Application  agent for "Green Bay Food & Liquor Inc" for "JJ Liquor" at 4173-4175 N Green Bay Av.

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

MILWAUKEE POLICE DEPARTMENT

LICENSING

CRIMINAL RECORD/ORDINANCE VIOLATION/INCIDENTS SYNOPSIS

DATE: 06/05/2017

LICENSE TYPE: ALQML

NEW:

RENEWAL:

No. 256871

Application Date: 06/05/2017

License Location: 4173-4175 N Green Bay Av

Business Name: Green Bay Food & Liquor

Licensee/Applicant: MULTANI, Swaran S
(Last Name, First Name, MI)

Date of Birth: 07/16/1956

Home Address: W141 N4845 Golden Fields Ct

City: Menomonee Falls

State: WI **Zip Code:** 53051

Home Phone:

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

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

1. On 12/12/2015 the applicant was cited in the City of Milwaukee at 4427 N. Green Bay Av for Sale of Cigarettes to Minor/Underage.

Charge: Sale of Cigarettes to Minor/Underage

Finding: Guilty

Sentence: Fined \$81.00

Date: 01/05/2017

Case: 16053095

MILWAUKEE POLICE DEPARTMENT
LICENSE INVESTIGATION UNIT

CRIMINAL RECORD/ORDINANCE VIOLATION/INCIDENTS
SYNOPSIS

DATE: 08/10/2016
LICENSE TYPE: ALQML
NEW:
RENEWAL: X

No. 235446
Application Date: 08/10/2016
Expiration Date:

License Location: 4173-75 N Green Bay Avenue
Business Name: JJ Food Mart & Liquor

Aldermanic District: 01

Licensee/Applicant: Singh, Balbir
(Last Name, First Name, MI)

Date of Birth: 10/22/52

Male:

Female:

Home Address: 9145 N Golden Dale Drive

City: Brown Deer

State: Wi

Zip Code: 53223

Home Phone: (414) 737-8106

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:

- On 06/21/06, applicant was convicted of OWI in Milwaukee County. His license was revoked for 6 months.

The following applies to corporate officer Harpreet Singh:

- On 03/14/11, Singh received a citation for Sale of Alcohol to Underage Person at 1935 W Center Street. Singh was found guilty and paid a fine of \$171.00.

- On 10/27/12, Milwaukee police were working the Wisconsin WINS Youth Tobacco Initiative and had an underage person enter 4173 N Green Bay Avenue in attempts to purchase tobacco products. The clerk, Balbir Singh, sold a Swisher Sweet cigar to the student. When police spoke with Singh, he stated he didn't remember seeing the student and denied that he sold a cigar to him. A citation was issued, however, no case was found in the Municipal Court website.
- On 07/13/13 at 12:15 pm, Milwaukee police were working the Wisconsin WINS Tobacco Initiative and had an underage male, who was 16 years of age, enter 4173 N Green Bay Avenue in attempts to purchase tobacco products. The student was able to purchase a grape cigar from the clerk who was later identified as Balbir Singh. Singh, who was not on scene when the officer arrived, found the clerk, Sandeep Kaur, selling liquor without a Class D Bartender's license. The licensee, nor any other employee, was on scene. Singh was cited for the two violations.

Page 2
Singh, Balbir

Charge	1:	Sale of Cigarette to Minor/Underage
	2:	Responsible Person on Premise Required
Finding	1:	Guilty
	2:	Guilty
Sentence	1:	\$85.00 fine
	2:	\$368.00 fine
Date	:	10/11/2013
Case	1:	13075021
	2:	13075022

=====
Item #2 previously reported. Disposition added 08/25/2014.
=====

PREVIOUS PREMISE

Date: 6/7/17
Officer: BROWN

City of Milwaukee Police Department
90-5-1.5 Crime Prevention Survey
Convenience Store/Liquor Store Inspection

Name of Premise: J & J Liquor
Address: 4173-75 N. Green Bay Ave.
Phone: 414-263-1911

Owner: Multani, Swarans
Owner address: W141 N4845 Goldenfield Ct.
City State Zip: Menomonee Falls, WI 53051
Owner Phone: 414-305-0326
Owner email: multanimarathon@gmail.com

Manager: Singh, Sukhwinder
Home Address: Same
City State Zip:
Phone: 414-916-8010
Email: sukhwinder1521@yahoo.com

Preferred contact: Agent

Location currently open: YES NO

Projected open date: 08/01/17

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

Hours of Operation: Sun: 9A-9P 24 hours Y N
Mon: 9A-9P
Tue: 9A-9P
Wed: 9A-9P
Thu: 9A-9P
Fri: 9A-9P
Sat: 9A-9P

Premise Type: Liquor Store
Convenience Store
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. Is the parking lot well lit? Yes No
9. Are there areas where a person could conceal themselves Yes No
10. Is there exterior lighting? Yes No. Does it appears to be adequate Yes No
11. Exterior Payphone? Yes No
12. Are there No Loitering Signs posted? Yes No
13. Are there exterior security cameras Yes No How Many: 2
14. Are the address numbers prominently displayed and easy to see Yes No

Camera Survey:

15. Does this location have security cameras? Yes No
16. Are they in working order? Yes No
17. What format are the cameras?
 - a. Color Yes No
 - b. Digital Yes No
 - c. VCR Yes No
 - d. Recorded Yes No
18. How long is footage stored for later viewing: 30 days
19. Are there exterior cameras Yes No How many: 2
20. Are there interior cameras Yes No How many: 6
21. Do all employees know how to retrieve recorded digital images/footage? Yes No

Interior Survey:

22. 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
23. Is the interior of the location neat and clean? Yes No
24. Does an interior camera face the entrance/exit? Yes No
25. Is there a lockable area that separates employees from customers? Yes No
26. Does the store sell single chore boy? Yes No
27. Does the store sell blunt wraps? Yes No
28. Does the store sell scales? Yes No
29. Does the store sell items that may be used as crack pipes? Yes No
a. Describe item
30. Does the store have an over abundance of sandwich baggies: Yes No
31. Does the owner understand that these items are often used for drug use? Yes No
32. Do the products in the store appear to be new and rotated often? Yes No
33. Are emergency and non-emergency numbers posted near the phone? Yes No
34. 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

Complete this section if alcohol establishment is a convenience store:

(** Read full ordinance for all details "68-4.3 Convenience Food Stores")

All convenience food stores not exempted under sub. 3 shall:

1. Is the cash register located in a manner so that at the time of a sales transaction, the employee and customer are both visible from the sidewalk? Yes No **
2. Are the glass entrance and exit doors clear of any signs or advertisements with the exception of a sign which states that the cash register contains \$50 or less and that the safe is no accessible to employees? Yes No
3. Does the store maintain one of the following on the licensed premise:
 - a. A safe that was in use at the convenience food store on August 17, 1994? Yes No
 - b. A drop-safe or time release safe that weighs at least 500 pounds or which is attached to or set into the floor in a manner approved by the police department? Yes No
4. Is lighting provided for the store's parking area during all hours of darkness when employees or customers are on the premises at a minimum average of 2-foot candles per square foot, unless the store is not open for business after sunset and before sunrise? Yes No N/A
5. Are at least two high-resolution surveillance security cameras installed? Yes No
6. Are the security cameras in working order? Yes No
7. Does one camera show an overall view of the counter and register area? Yes No
8. Does one camera show a clear, identifiable, full frame image of the face of each person entering and leaving the store? Yes No
9. Are the camera views obstructed by fixtures or displays? Yes No
10. Is the recorded footage stored for at least 30 days? Yes No
11. Do all store employees know how to record footage from the camera system to media capable of being transferred to police custody? Yes No

12. Are customer entrances/exits made of glass or other transparent material? Yes No
a. Exception: A store that does not have such doors on August 17, 1994 shall not be required to install such doors until the holder of the store's food dealer license changes.
13. Has the owner and their employees attended the Robbery Prevention Training within 120 days of ownership or employment? Yes No
a. Contact Community Outreach and Education at 935-7836 for schedule.

Sub 3. Exemptions. The requirements of this section do not apply to a convenience food store that conforms to either of the following descriptions:

- a-1. The store is located in an enclosed shopping structure, enclosed commercial building or hospital. A convenience food store is not in an enclosed structure or building if a customer can enter it directly from the outside.
Does store conform to a-1 Yes No
- a-2. The store physically separates employees from customers with a solid partition that bars a person from entering the employee area from the customer area, has a secure lock on the employee side of any door between the employee area and the customer, and conducts all transaction through a service window or similar arrangement.
Does store conform to a-2 Yes No
- a. At the commissioner's discretion, a convenience store may be exempted from any or all of the regulations specified in sub 2.
Does this location hold an exemption from the commissioner regarding any of the requirements of Sub 2? Yes No

ADDITIONAL COMMENTS/RECOMMENDATIONS:

Advised regarding no windows to see in to the business. Agent stated they are opening up an exterior wall and installing a clear glass window.

Advised the land next to the business should be cleaned and mowed. (grass over 12" and litter)

Currently the interior is dirty and unorganized, new agent stated they will provide more interior lights and it will be clean and organized.

Agent and manager will be attending Robbery Prevention in July.

Alcohol Concentration for 4173-4175 N Green Bay Av

City of Milwaukee, Wisconsin



Map Scale: 1: 10,000
833.3
0 416.67 833.3 Feet

City of Milwaukee, Wisconsin
Milwaukee: Property Information
[Disclaimer](#)
6/5/2017



- Legend -

- Milwaukee parcels
- Street names 10,000
- City limits
- Freeways 15,000
- Exit ramps
- Entry ramps
- Ramps
- Major streets 10,000
- Streets 10,000
- Street names 10,000
- 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 4173-4175 N Green Bay Av, June 5, 2017.



Department of Administration - ITMD

Classified Alcohol Beverage Establishments within a .5 Mile Radius Centered on 4173-4175 N Green Bay Av, June 5, 2017.

License Summary	Licensee	License type name	Total capacity	Address	Expiration date
Class B Tavern License	JESSICA P STEWART, SP	Class B Tavern License	25	1422 W ATKINSON AV	10/10/2017 19:00
Class A Malt & Class A Liquor License	BALBIR SINGH, Agt	Class A Malt & Class A Liquor License		4173-75 N GREEN BAY AV	10/22/2017 19:00
Total					
1					
1					
2					
Grand Total					



Wednesday, July 05, 2017

Licenses Committee Notice of Hearing

Swaran Multani
W141 N 4845 Golden Fields Ct.
Menomonee Falls, WI 53051

Date: 7/11/2017

Time: 08:45 AM

Location: Common Council Chambers, Third Floor, City Hall

The Licenses Committee will consider the following license application:

Class A Malt & Class A Liquor and Food Dealer License Applications
MULTANI, Swaran S, Agent
JJ Liquor at 4173-4175 N Green Bay Av

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, July 05, 2017

Licenses Committee Notice of Hearing

Gagandeep Kaur, Ranjit Kaur
4175 N Green Bay Rd
Milwaukee, WI 53209

Date: 7/11/2017

Time: 08:45 AM

Location: Common Council Chambers, Third Floor, City Hall

The Licenses Committee will consider the following license application:

Class A Malt & Class A Liquor and Food Dealer License Applications
MULTANI, Swaran S, Agent
JJ Liquor at 4173-4175 N Green Bay Av

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.





BUSINESS LICENSE PLAN OF OPERATION

ccl-busplan 9/15/15

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 Establishment Filling Station Waste Tire Transporter Waste Tire Generator
 Self Service Laundry Rooming House: Number of Units: _____ Hotel/Motel: Number of Units: _____
 Massage Establishment Other (supplemental application for specific license also required)

Provide a detailed description of the type of business you plan on operating:

LIQUOR STORE

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

2. Business Operations

- a. Proposed Opening Date: 08/01/2017
- 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: Food, Class A Liquor, CIG.
- 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 Hired Maintenance
 Building Owner Responsibility Garbage Cans Outside 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

- f. Are there designated outdoor smoking areas? No Yes If yes, describe: _____
- g. Number of Garbage Cans: Inside: 2 Locations: By CASH REGISTER / RESTROOM
Outside: 1 Locations: By FRONT DOOR
- h. Is a crowd control barrier used? No Yes If yes, describe: _____
- i. Describe sanitation facilities (restrooms): EMPLOYEES CLEAN / SANITIZE RESTROOM
Name of solid waste contractor: Advanced Disposal Waste Management Other: _____

5. Security

a. Are there onsite parking spaces? No Yes If yes, how many? _____

Describe parking security plan: _____

b. Is there a loading zone? No Yes If yes, describe loading area security plan _____

c. Will you have security personnel on premise? No Yes If yes, how many? _____

What are their responsibilities? _____

Is security equipment used? No Yes If yes, describe _____

List their licensing, certification, or training credentials _____

Will there be security cameras? No Yes If yes, where? MONITORS INSIDE @ STORE SURROUNDINGS

Will searches/identification verification be conducted upon entry? No Yes If yes, describe _____

6. Percentage of Sales (must total 100%)

Alcohol <u>70</u> %	Food <u>10</u> %	Secondhand Merchandise _____ %	Precious Metals & Gems _____ %
Entertainment _____ %	Cigarettes <u>20</u> %	Personal Services (such as tattoo, body piercing, salon, tailor, tanning, etc.) _____ %	Other _____ %
Pawnbroker Activity _____ %	Salvaged Materials _____ % (such as scrap metal)	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
 Hotel/Motel – Number of Rooms: _____ Rooming House – Number of Rooms: _____

Type 2

- Liquor Store Corner Store Supermarket Convenience Store
 Gas Station Amusement/Phonograph Distributor Auto Wrecker
 Used Car Dealer Used Auto Parts 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 #6 above)

Capacity _____ (Call the Milwaukee Development Center at 414-286-8211 if you have questions.)

— N/A —

9. Premises Description

d. Identify all area(s) of the premises that will be used in operating this business (include areas used only for storage):

1st Floor 2nd Floor Basement Storage Patio Beer Garden Sidewalk Café Deck Rooftop

Other: Describe: _____

e. Describe Location: Major Thoroughfare Secondary Street Other: _____

f. Nearest Major Cross Street: N GREEN BAY AVE @ 43RD ST

g. Describe Building: Free Standing Building Strip Mall Other: _____

h. Describe Premises Structure: Single Story Multi-Story - # of Stories _____ Other: _____

i. Describe Surrounding Area: Commercial Residential Industrial Other: _____

j. Building Owner Name: SWARAN S. MULLANI Phone Number: 414-305-0326

Business Owner Address: W141N4845 GOLDEN FIELDS CT. MENOMONIE FOUR SEOST

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 Applicants: Age Restriction (If none, write 'None')
	Open Time (include a.m. or p.m.)	Close Time (include a.m. or p.m.)			
Sunday	9:00 AM	9:00 PM	250	18 & over	
Monday	"	"	250	"	
Tuesday	"	"	250	"	
Wednesday	"	"	250	"	
Thursday	"	"	250	"	
Friday	"	"	250	"	
Saturday	"	"	250	"	

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)

X Swaran S. Mullan
Sole Proprietor, Partner, Agent, or 20% or more Shareholder

Signature of additional partner or 20% or more Shareholder

See Application Information for a 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 www.milwaukee.gov/license

Legal Entity Name: GREEN BAY FOOD & LIQUOR LLC

Premise Address: 4173-4175 N. GREEN BAY AVE MILWAUKEE WI 53219

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:

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

Property Information (new & transfer applicants only)

- a) Do you own or lease the building? own Lease
 - b) Who owns the fixtures (for example, coolers, etc.)? GREEN BAY FOOD & LIQUOR LLC
 - c) Are you purchasing the stock and/or fixtures? No Yes if yes, amount paid \$ _____
 - d) Total amount paid for business \$ 200,000
 - e) Total amount paid for goodwill of the business \$ 200,000
- 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 08/01/2017 Ends 07/31/2022
- b) Monthly rental \$ 4000.00
- 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)? 10 years
- 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 _____
- 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

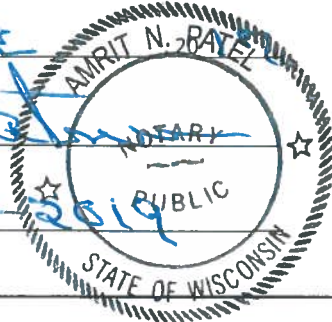
This 1 day of JUNE

Asit N. Patel

(Clerk/Notary Public)

My Commission Expires 12-06-2019

*Notary Seal must be affixed.



X Swarn S. Multani

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



FOOD DEALER LICENSE PLAN OF OPERATION

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

Legal Entity Name: GREEN BAY FOOD & LIQUOR INC

Premises Address: 4173 - 4175 N. GREEN BAY AVE

SECTION 1 TYPE OF BUSINESS

Type of application (check one): taking over a currently operating business starting a new business
Anticipated opening date? 08/01/17

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

- Restaurant
- Retail Establishment
 - If retail, will it be a convenience store? Yes No
(less than 5,000 sq ft of retail space, primary business is the sale of basic food items, and in addition sells household products)
- Community Food Program
- Bed & Breakfast
- Base for Food Peddler
- 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 20 %

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: MILK, CHEESE, FROZEN PIZZA, ICE CREAMS

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 *- N/A -*

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:

- SN I understand the Health Department must conduct an inspection and advise the License Division of their approval before the license may be issued.
- SN 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.
- SN 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.
- SN I understand proof of payment for all license fees must be on file in the License Division before the license may be issued.
- SN I understand the license must be issued and posted in my establishment prior to opening for business.
- SN 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: _____

Swaran G. Muttani

Signature of additional partner(s): _____

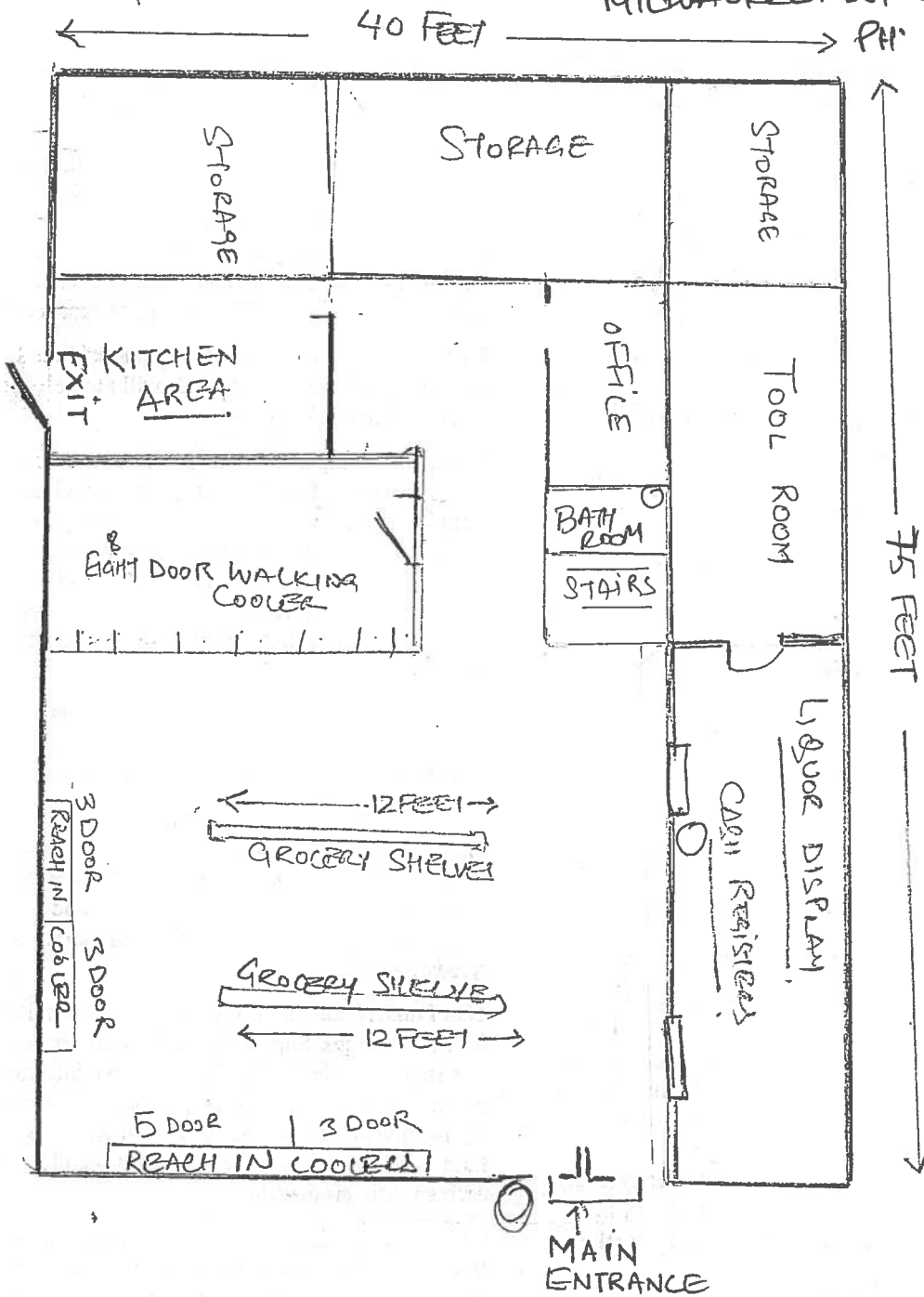
GREEN BAY FOOD & LIQUOR INC
D/B/A JJ LIQUOR

SWARAN S MULTANI, AGENT
4173-4175 N. GREEN BAY AV
MILWAUKEE, WI 53207

PH: 414-305-0320

06/02/2017

3,000 Sq



Green Bay food & liquor 14
D/B/A JJ liquor
Swaran Multani; Ager
4173-4175 N. Green Bay A
Milwaukee, WI 53209
PH: 414-305-032
6/05/17

Basement Storage

