



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

Thursday, January 14, 2016

COMMITTEE MEETING NOTICE

AD 02

GRIFFIN, Angela D, Agent
White Elephant Catering Co.
PO Box 240378

Milwaukee, WI 53224

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

Tuesday, January 26, 2016 at 09:45 AM

Regarding:

Your Food Dealer -Restaurant Renewal Application with Change of Agent and Shareholder as agent for "White Elephant Catering Co." for "White Elephant Catering Company" at 6005 W Villard 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 85-4-4, unless otherwise specified in the code, probative evidence concerning non-renewal, suspension or revocation may include evidence of the following: failure of the applicant to meet municipal qualifications, pending charges against or the conviction of any felony, misdemeanor, municipal offense or other offense, the circumstances of which substantially relate to the circumstances of the particular licensed or permitted activity, by the applicant or by any employee or other agent of the applicant. If the activities of the applicant involve a licensed premises, whether the premises tends to facilitate a public or private nuisance or has been the source of congregations of persons which have resulted in any of the following: disturbance of the peace; illegal drug activity; public drunkenness; drinking in public; harassment of passers-by; gambling; prostitution; sale of stolen goods; public urination; theft; assaults; battery; acts of vandalism including graffiti, excessive littering, loitering, illegal parking, loud noise at times when the licensed premise is open for business; traffic violations; curfew violations; lewd conduct; display of materials harmful to minors, pursuant to s. 106-9.6; or any other factor which reasonably relates to the public health, safety and welfare, or failure to comply with the approved plan of operation. 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.

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JIM OWCZARSKI, CITY CLERK

BY:

Jason Schunk
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

MILWAUKEE POLICE DEPARTMENT LICENSING

CRIMINAL RECORD/ORDINANCE VIOLATION/INCIDENTS SYNOPSIS

DATE: 11/30/2015

LICENSE TYPE: FOOD DEALER-RESTAURANT

NEW:

RENEWAL:

No. 222087

Application Date: 11/25/2015

License Location: 6005 W Villard Av

Business Name: White Elephant Catering Co.

Licensee/Applicant: GRIFFIN, Angela D
(Last Name, First Name, MI)

Date of Birth: 03/02/1978

Home Address:

City: Milwaukee

State: WI **Zip Code:** 53212

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 01/23/2009 the applicant was cited in the City of Milwaukee at 945 N. 12th St for

Charge: PP Vehicle-Driver's license Required
Finding: Guilty
Sentence: Fined \$361.00
Date: 03/17/2009
Case: 0902655

2. On 03/29/2014 the applicant was cited in the City of Milwaukee at 3526 W. Villard Av for 2 counts of Responsibility of Parents (curfew)

Charge: Responsibility of Parents (curfew)
Responsibility of Parents (curfew)
Finding: Guilty (Both charges)
Sentence: Fined \$185.00 each charge
Date: 05/19/2014
Case: 14028399
14028400



Thursday, January 14, 2016



Notice of Public Hearing

GRIFFIN, Angela D, Agent
White Elephant Catering Company at 6005 W Villard Av
Food Dealer -Restaurant Renewal Application with Change of Agent and Shareholder

Tuesday, January 26, 2016 at 9:45 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 1/26/2016 at 9:45 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.

RESIDENT	MAIL ADDRESS	CITY AND ZIP CODE
CURRENT RESIDENT	5131 N 60TH ST	MILWAUKEE, WI 53218-4104
CURRENT RESIDENT	5132 N 60TH ST	MILWAUKEE, WI 53218-4103
CURRENT RESIDENT	5138 N 60TH ST	MILWAUKEE, WI 53218-4103
CURRENT RESIDENT	5145 N 60TH ST	MILWAUKEE, WI 53218-4104
CURRENT RESIDENT	5146 N 60TH ST	MILWAUKEE, WI 53218-4103
CURRENT RESIDENT	5147 N 58TH ST	MILWAUKEE, WI 53218-4251
CURRENT RESIDENT	5150 N 61ST ST	MILWAUKEE, WI 53218-4111
CURRENT RESIDENT	5151 N 58TH ST	MILWAUKEE, WI 53218-4251
CURRENT RESIDENT	5153 N 60TH ST	MILWAUKEE, WI 53218-4104
CURRENT RESIDENT	5156 N 60TH ST	MILWAUKEE, WI 53218-4103
CURRENT RESIDENT	5156 N 61ST ST	MILWAUKEE, WI 53218-4111
CURRENT RESIDENT	5157 N 58TH ST	MILWAUKEE, WI 53218-4251
CURRENT RESIDENT	5158 N 61ST ST	MILWAUKEE, WI 53218-4111
CURRENT RESIDENT	5161 N 60TH ST	MILWAUKEE, WI 53218-4104
CURRENT RESIDENT	5162 N 60TH ST	MILWAUKEE, WI 53218-4103
CURRENT RESIDENT	5163 N 58TH ST	MILWAUKEE, WI 53218-4251
CURRENT RESIDENT	5163 N 61ST ST	MILWAUKEE, WI 53218-4112
CURRENT RESIDENT	5164 N 61ST ST	MILWAUKEE, WI 53218-4111
CURRENT RESIDENT	5167 N 61ST ST	MILWAUKEE, WI 53218-4112
CURRENT RESIDENT	5168 N 61ST ST	MILWAUKEE, WI 53218-4111
CURRENT RESIDENT	5169 N 61ST ST	MILWAUKEE, WI 53218-4112
CURRENT RESIDENT	5173 N 61ST ST	MILWAUKEE, WI 53218-4112
CURRENT RESIDENT	5174 N 61ST ST	MILWAUKEE, WI 53218-4111
CURRENT RESIDENT	5175 N 61ST ST	MILWAUKEE, WI 53218-4112
CURRENT RESIDENT	5182 N 61ST ST	MILWAUKEE, WI 53218-4111
CURRENT RESIDENT	5183 N 61ST ST	MILWAUKEE, WI 53218-4112
CURRENT RESIDENT	5211 N 61ST ST	MILWAUKEE, WI 53218-3102
CURRENT RESIDENT	5216 N 60TH ST	MILWAUKEE, WI 53218-3257
CURRENT RESIDENT	5221 N 60TH ST	MILWAUKEE, WI 53218-3258
CURRENT RESIDENT	5221A N 60TH ST	MILWAUKEE, WI 53218-3258
CURRENT RESIDENT	5222 N 60TH ST	MILWAUKEE, WI 53218-3257
CURRENT RESIDENT	5222 N 61ST ST 1	MILWAUKEE, WI 53218-3103
CURRENT RESIDENT	5222 N 61ST ST 2	MILWAUKEE, WI 53218-3103
CURRENT RESIDENT	5222 N 61ST ST 3	MILWAUKEE, WI 53218-3103
CURRENT RESIDENT	5222 N 61ST ST 4	MILWAUKEE, WI 53218-3103
CURRENT RESIDENT	5222 N 61ST ST 5	MILWAUKEE, WI 53218-3103
CURRENT RESIDENT	5222 N 61ST ST 6	MILWAUKEE, WI 53218-3103
CURRENT RESIDENT	5224 N 60TH ST	MILWAUKEE, WI 53218-3257
CURRENT RESIDENT	6100 W VILLARD AVE	MILWAUKEE, WI 53218-4142
CURRENT RESIDENT	6101 W VILLARD AVE	MILWAUKEE, WI 53218-4143
CURRENT RESIDENT	6109 W VILLARD AVE	MILWAUKEE, WI 53218-4143

Total Records: 42

Radius: 250.0 feet and Center of Circle: 6005 W Villard AV



FOOD DEALER LICENSE SUPPLEMENTAL RENEWAL APPLICATION

Office of the City Clerk License Division
 200 E. Wells St. Room 105, Milwaukee, WI 53202
 (414) 286-2238 license@milwaukee.gov www.milwaukee.gov/license

THIGPEN, Willie, Agent
 White Elephant Catering Co.
 PO BOX 241400
 Milwaukee WI 53224

RENEWAL FEE = \$800

FREST 6046

Current License Expiration Date: 11/24/2015
 Application Due Date 9/11/2015
 \$75 Late Fee Begins 9/25/2015
 \$125 Late Fee Begins 11/14/2015

SECTION 1 – BUSINESS OPERATIONS

Are there any changes to the current hours of operation? NO YES If yes, describe changes:

Your current hours of operation are listed on your current license.

Please note: If you will be open earlier or later than the hours listed on your current license for even one event or holiday (for example, St. Patrick's Day, Brewers Opening Day, etc.) during the license period, this must be reported and printed on your license.

Do you purchase, sell or exchange any secondhand articles of personal property (including used cell phones)?

NO YES If yes, you must also apply for a Secondhand Dealer License.

SECTION 2 – PLAN OF OPERATION (LITTER/NOISE ISSUES)

Are there any changes to your Litter/Noise plan? NO YES If yes, answer all questions below:

What are your plans to keep the grounds clean? (check all that apply)

Sweep Pressure Wash Pick Up Litter Hired Maintenance Building Owner's Responsibility Garbage Cans Outside
 Other _____

How often will the grounds be cleaned?

Daily Weekly As Needed Monthly Other _____

Who is responsible to keep the grounds clean? (check all that apply)

Licensee Building Owner Employees Hired Maintenance Other _____

How are noise issues prevented/addressed? (check all that apply)

Security Manager approaches customer(s) Call police Signs posted Other No Public Noise

SECTION 3 - SIGNATURE

By signing below, I certify that all the information on this application is correct and acknowledge that any change in the information on the application shall be reported to the City Clerk's License Division within 10 days of the change. I shall promptly notify the City Clerk's License Division in writing if my establishment ceases operation. If a restaurant, I shall not willfully refuse to provide those services offered under this license to add charges or required 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 the person is now or has been a member of military service, whether dressed in uniform or not.

The current license includes the following business operations: **DHS - COMPLEX, Restaurant**

Except for any changes of hours of operation listed in Section 1, I confirm that no changes are being made to the business operations for the 2015-2016 license period.

SIGNATURE OF INDIVIDUAL, PARTNER, AGENT OR 20% OR MORE SHAREHOLDER

Willie Thigpen



CITY OF MILWAUKEE
OFFICE OF THE CITY CLERK

Tuesday, January 19, 2016

COMMITTEE MEETING NOTICE

AD 06

ANDERSON, Kevin J, Agent
1703 W Hopkins LLC
1703-05 W HOPKINS St

Milwaukee, WI 53206

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

Tuesday, January 26, 2016 at 09:45 AM

Regarding: Your Class B Tavern, Sidewalk Dining, Food Dealer's, and Public Entertainment Premises License Applications Requesting Comedy Acts, Bands, Instrumental Musicians, Disc Jockey, Karaoke, Poetry Readings, Patrons Dancing, and 4 Amusement Machines as agent for "1703 W Hopkins LLC" for "Milwaukee Tied House" at 1703-05 W HOPKINS St.

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 OW CZARSKI, CITY CLERK

BY: 

Jason Schunk

License Division Manager

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Tuesday, January 19, 2016

COMMITTEE MEETING NOTICE

AD 06

ANDERSON, Kevin J, Agent
1703 W Hopkins LLC
4861 N Green Bay Ave

Milwaukee, WI 53209

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

Tuesday, January 26, 2016 at 09:45 AM

Regarding: Your Class B Tavern, Sidewalk Dining, Food Dealer's, and Public Entertainment Premises License Applications Requesting Comedy Acts, Bands, Instrumental Musicians, Disc Jockey, Karaoke, Poetry Readings, Patrons Dancing, and 4 Amusement Machines as agent for "1703 W Hopkins LLC" for "Milwaukee Tied House" at 1703-05 W HOPKINS St.

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BY:

Jason Schunk

License Division Manager

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

Date: 11/12/15
Officer: P. BROWN

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

Name of Premise: Milwaukee Tied House
Address: 1703 W. Hopkins
Phone: 414-233-3789

Owner: Kevin Anderson
Owner address: 4861 N. Green Bay Ave.
City State Zip: Milwaukee, WI 53209
Owner Phone: 414-810-3587
Owner email: kevinanderson620@gmail.com

Licensee/Agent: Same
Home Address:
City State Zip:
Phone:
Email:

Preferred contact: Cell Phone 414-233-3789

Location currently open: YES NO

Projected open date: 04/2016

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

Hours of Operation: Sun: 6A-2A 24 hours Y N
Mon: 6A-2A
Tue: 6A-2A
Wed: 6A-2A
Thu: 6A-2A
Fri: 6a-2:30A
Sat: 6a-2:30A

Premise Type: Tavern/Bar
 Restaurant
 Other:

Licenses currently held:

Alcohol: Yes No Class: B #: 202753
Tobacco: Yes No #:
Food: Yes No #:
Occupancy: Yes No #:
Other: Yes No Type: PEP #: 2502
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: Vacant lot, cemetery
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 bus stop? Yes No
7. Is there a bus shelter? Yes No N/A
8. Street parking Yes No
9. Is there a parking lot Yes No
10. Is the parking lot clean? Yes No N/A
11. Is the parking lot well lit? Yes No N/A
12. Valet Parking Yes No
 - a. Will this lot have a guard? Yes No N/A
 - b. Will this lot have cameras? Yes No N/A
13. Are there areas where a person could conceal themselves Yes No
14. Is there exterior lighting? Yes No. Does it appears to be adequate Yes No
15. Exterior Payphone? Yes No
16. Are there No Loitering Signs posted? Yes No
17. Are there exterior security cameras Yes No How Many: 4
18. Are the address numbers prominently displayed and easy to see Yes No

Exterior Comments: Building is undergoing complete renovation. Answers are based on architectural plans. Address will be visible upon completion of project. Agent concerned about loitering on City owned vacant lot next to business.

Camera Survey:

19. Does this location have security cameras? Yes No
20. Are they in working order? Yes No
21. What format are the cameras?
 - a. Color Yes No

- b. Digital Yes No
- c. VCR Yes No
- d. Recorded Yes No

- 22. How long is footage stored for later viewing: 30days
- 23. Are there exterior cameras Yes No How many: 4
- 24. Are there interior cameras Yes No How many: 5
- 25. Do all employees know how to retrieve recorded digital images/footage? Yes No
- 26. Cameras located in parking lot Yes No N/A How many

Camera Survey Comments:

Interior Survey:

- 27. What is the planned/posted capacity 58 Bar/Grill 90 Hall
- 28. What is the minimum number of employees that will be on premise 3
- 29. 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
- 30. Is the interior of the location neat and clean? Yes No
- 31. Does an interior camera face the entrance/exit? Yes No
- 32. Are emergency and non-emergency numbers posted near the phone? Yes No
- 33. 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

Interior Comments: Building is under complete renovation. Answers are based on finalized architectural plans provided by agent.

Security

- 34. How many security personnel are going to be employed: 1 N/A
- 35. How will they be deployed: Interior 1 Exterior N/A
- 36. What days will they be deployed Mon Tue Wed Thu Fri Sat Sun ALL
- 37. Will the security be managed by business or contracted
- 38. Will they be armed Yes No N/A
- 39. What type of security measures will be used: N/A
 - Wanding/metal detector
 - ID Scanner
 - Dress Code
 - Cover Charge
 - Age restriction
 - Other Monitor for trouble
- 40. When at capacity, how will the overflow crowd be managed? Shut down
- 41. Will a guard monitor the overflow crowd at all times? Yes No

Security Comments: Security will only be hired for the upstairs hall, based on type of event

ADDITIONAL COMMENTS/RECOMMENDATIONS:

Agent seems very concerned about improving the neighborhood and the type of crowd he will be drawing. States hall rental will only be for sit down events, no dj or dancing events. Copy of final architectural plans enclosed.



ADDEFO A. ALATRISTE
 ARCHITECT, INC.
 100 WEST 17TH STREET, SUITE 100
 NEW YORK, NY 10011
 TEL: (212) 255-1234
 FAX: (212) 255-1235
 WWW.AAALATRISTE.COM

SPRINKLER AND GLASS PARTITION REQUIREMENTS

SPRINKLER PARTITIONS SHALL BE CONSTRUCTED IN ACCORDANCE WITH THE FOLLOWING REQUIREMENTS:

- 1. SHALL BE CONSTRUCTED OF 1 1/2" MINIMUM THICKNESS Gypsum Board (Type X) OR 5/8" MINIMUM THICKNESS Gypsum Board (Type X) WITH 1/2" MINIMUM THICKNESS Gypsum Board (Type X) ON EACH SIDE OF THE PARTITION.
- 2. SHALL BE CONSTRUCTED OF 1 1/2" MINIMUM THICKNESS Gypsum Board (Type X) OR 5/8" MINIMUM THICKNESS Gypsum Board (Type X) WITH 1/2" MINIMUM THICKNESS Gypsum Board (Type X) ON EACH SIDE OF THE PARTITION.
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STATEMENT OF COMPLIANCE

I, the undersigned, hereby certify that the above information is true and correct to the best of my knowledge and belief, and that I am a duly licensed professional engineer in the State of New York.

DATE: 03/15/13
 SIGNATURE: [Signature]
 TITLE: [Title]

PARTITION LEGEND

1	1 Hour Gypsum Board Partition
2	2 Hour Gypsum Board Partition
3	4 Hour Clay Masonry Wall
4	4 Hour Stone Foundation Wall
5	Existing New Gypsum Board Partition
6	Existing New Gypsum Board Partition

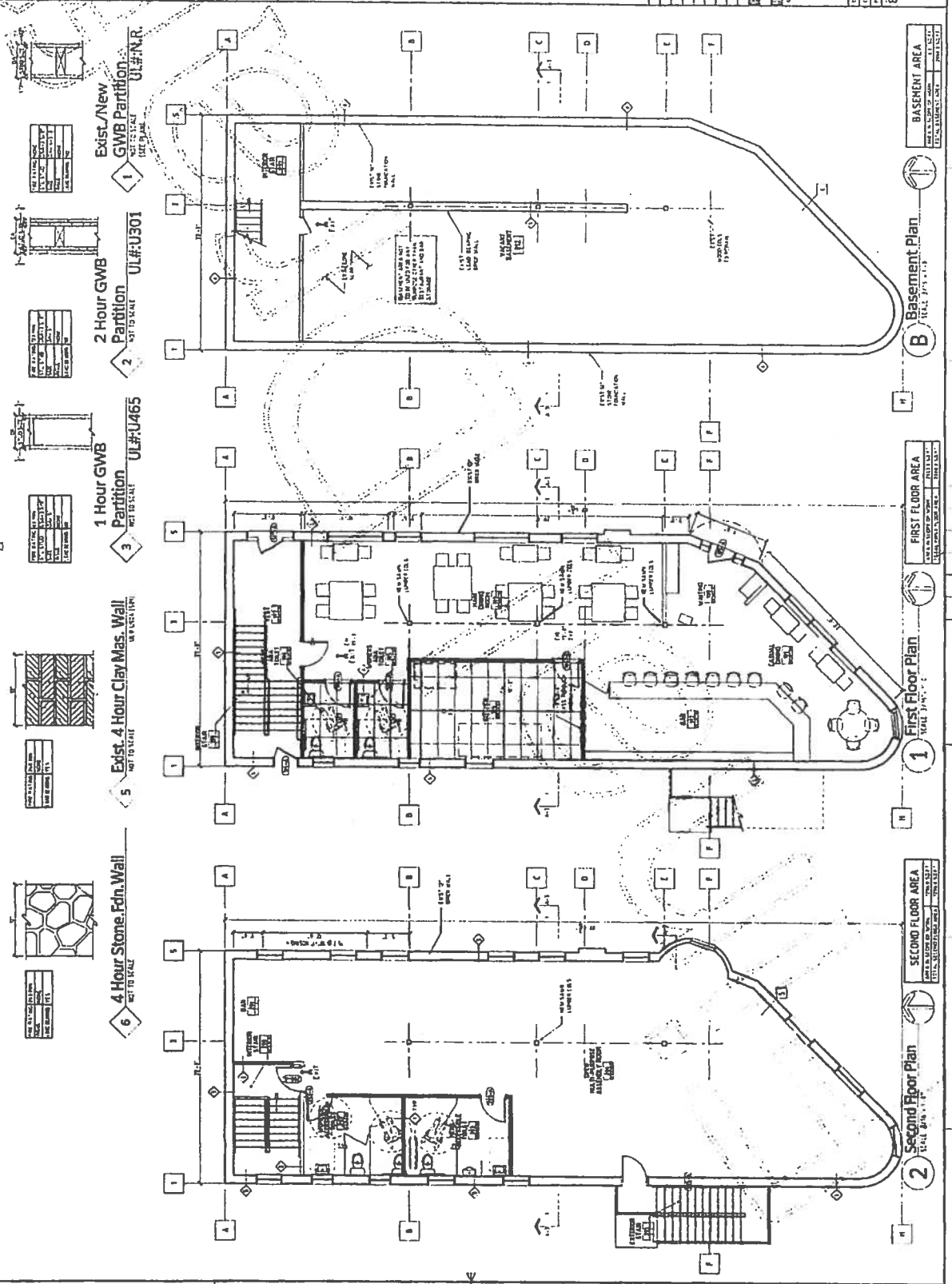
EXISTING BASEMENT and Proposed First and Second Floor Plans and Partition Types

NO.	DESCRIPTION	REMARKS
1	1 Hour Gypsum Board Partition	
2	2 Hour Gypsum Board Partition	
3	4 Hour Clay Masonry Wall	
4	4 Hour Stone Foundation Wall	
5	Existing New Gypsum Board Partition	
6	Existing New Gypsum Board Partition	

BASEMENT AREA
 100 WEST 17TH STREET, SUITE 100
 NEW YORK, NY 10011

First Floor Plan
 100 WEST 17TH STREET, SUITE 100
 NEW YORK, NY 10011

Second Floor Plan
 100 WEST 17TH STREET, SUITE 100
 NEW YORK, NY 10011



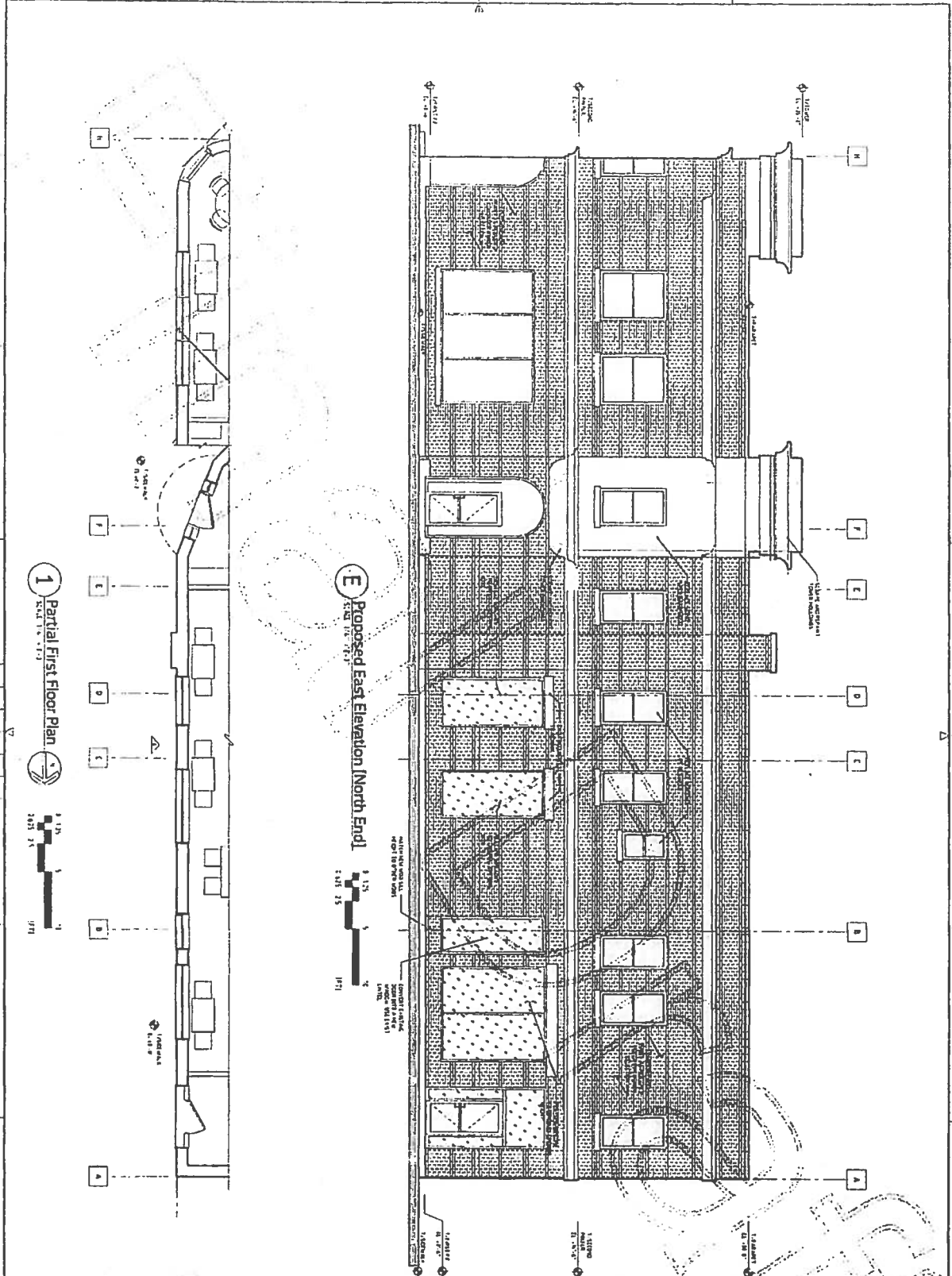
6 4 Hour Stone Fdn. Wall
 100 WEST 17TH STREET, SUITE 100
 NEW YORK, NY 10011

5 Exst. 4 Hour Clay Mas. Wall
 100 WEST 17TH STREET, SUITE 100
 NEW YORK, NY 10011

3 1 Hour GWB Partition
 100 WEST 17TH STREET, SUITE 100
 NEW YORK, NY 10011

2 2 Hour GWB Partition
 100 WEST 17TH STREET, SUITE 100
 NEW YORK, NY 10011

1 Exst./New GWB Partition
 100 WEST 17TH STREET, SUITE 100
 NEW YORK, NY 10011



E Proposed East Elevation (North End)
Scale: 1/8" = 1'-0"

1 Partial First Floor Plan
Scale: 1/8" = 1'-0"



ATI
ADRIANO A. ALATRISTE
ARCHITECT
1025 10th St
Milwaukee, WI 53233
Tel: 414.224.1111
Fax: 414.224.1112

STATEMENT OF COMPLIANCE
I hereby certify that the proposed work described by the above information is in accordance with the provisions of the applicable codes and regulations of the City of Milwaukee, Wisconsin, and that the work is being performed in accordance with the approved plans and specifications.

DATE:	11/11/2018
PROJECT:	1101-1123 W HOBBS AVE
ADDRESS:	1101-1123 W HOBBS AVE
CITY:	MILWAUKEE, WI 53233
STATE:	WI
COUNTY:	MILWAUKEE
CD:	CD 1101-1123 W HOBBS AVE
CD AREA:	0.0000
CD PERCENT:	0.0000
CD TOTAL:	0.0000
CD TYPE:	CD 1101-1123 W HOBBS AVE
CD STATUS:	CD 1101-1123 W HOBBS AVE
CD DATE:	11/11/2018
CD EXPIRES:	11/11/2018
CD NOTES:	CD 1101-1123 W HOBBS AVE

EXISTING 100 STORY BRICK COMMERCIAL BUILDING RESTAURANT AND BAR
1101-1123 W HOBBS AVE
MILWAUKEE, WI 53233

East Elevation (North End)
A General Notes
A2.0

Project No: 1801513
Sheet No: A2.0

ATI
 ADORFIO A. ALATRISTE
 ARCHITECT
 1000 W. 10th St.
 Suite 100
 Phoenix, AZ 85001
 Phone: (602) 254-1111
 Fax: (602) 254-1112
 Email: aadorfio@atiarchitect.com

STATEMENT OF COMPLIANCE
 I hereby certify that the information contained herein is true and correct to the best of my knowledge and belief. I am a duly licensed Architect in the State of Arizona. I am the author of the drawings and specifications herein and I am not aware of any other person who has prepared or caused to be prepared any drawings or specifications which have been included in this set of drawings and specifications.

DATE: 11/11/2016
 SIGNATURE: [Signature]
 TITLE: ARCHITECT

1311 83rd AVE
 PHOENIX, AZ 85028
 PROJECT NO: A107455, 06/12/2016

CEILING WALL SECTION
 AND DOOR AND ROOM FINISH SCHEDULES AND NOTES

A.3

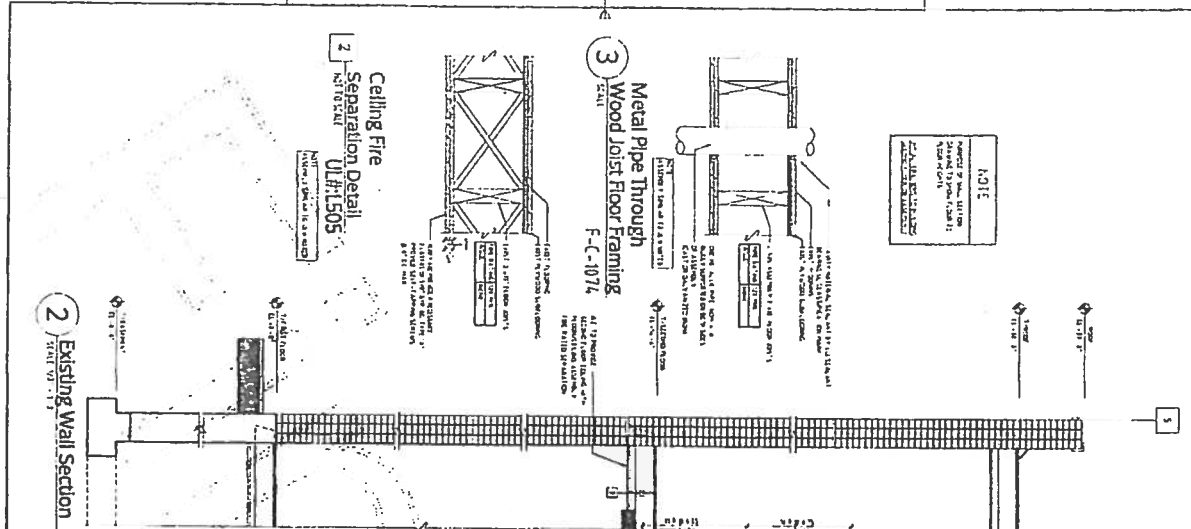
DOOR SCHEDULE

1. ALL DOORS TO BE 1 3/4" MIN. THICK UNLESS OTHERWISE NOTED.
 2. ALL DOORS TO BE 28" MIN. CLEAR WIDTH UNLESS OTHERWISE NOTED.
 3. ALL DOORS TO BE 80" MIN. CLEAR HEIGHT UNLESS OTHERWISE NOTED.
 4. ALL DOORS TO BE 1 1/2" MIN. RISE AT THRESHOLD UNLESS OTHERWISE NOTED.
 5. ALL DOORS TO BE 1 1/2" MIN. RISE AT THRESHOLD UNLESS OTHERWISE NOTED.
 6. ALL DOORS TO BE 1 1/2" MIN. RISE AT THRESHOLD UNLESS OTHERWISE NOTED.
 7. ALL DOORS TO BE 1 1/2" MIN. RISE AT THRESHOLD UNLESS OTHERWISE NOTED.
 8. ALL DOORS TO BE 1 1/2" MIN. RISE AT THRESHOLD UNLESS OTHERWISE NOTED.
 9. ALL DOORS TO BE 1 1/2" MIN. RISE AT THRESHOLD UNLESS OTHERWISE NOTED.
 10. ALL DOORS TO BE 1 1/2" MIN. RISE AT THRESHOLD UNLESS OTHERWISE NOTED.

NO.	DESCRIPTION	QTY	UNIT	DATE
1	1 1/2" x 6" x 2 1/4" ALUMINUM SLIP DOOR WITH GLASS	1	EA	11/11/16
2	1 1/2" x 6" x 2 1/4" ALUMINUM SLIP DOOR WITH GLASS	1	EA	11/11/16
3	1 1/2" x 6" x 2 1/4" ALUMINUM SLIP DOOR WITH GLASS	1	EA	11/11/16
4	1 1/2" x 6" x 2 1/4" ALUMINUM SLIP DOOR WITH GLASS	1	EA	11/11/16
5	1 1/2" x 6" x 2 1/4" ALUMINUM SLIP DOOR WITH GLASS	1	EA	11/11/16
6	1 1/2" x 6" x 2 1/4" ALUMINUM SLIP DOOR WITH GLASS	1	EA	11/11/16
7	1 1/2" x 6" x 2 1/4" ALUMINUM SLIP DOOR WITH GLASS	1	EA	11/11/16
8	1 1/2" x 6" x 2 1/4" ALUMINUM SLIP DOOR WITH GLASS	1	EA	11/11/16
9	1 1/2" x 6" x 2 1/4" ALUMINUM SLIP DOOR WITH GLASS	1	EA	11/11/16
10	1 1/2" x 6" x 2 1/4" ALUMINUM SLIP DOOR WITH GLASS	1	EA	11/11/16

ROOM FINISH SCHEDULE

NO.	DESCRIPTION	QTY	UNIT	DATE
1	1 1/2" x 6" x 2 1/4" ALUMINUM SLIP DOOR WITH GLASS	1	EA	11/11/16
2	1 1/2" x 6" x 2 1/4" ALUMINUM SLIP DOOR WITH GLASS	1	EA	11/11/16
3	1 1/2" x 6" x 2 1/4" ALUMINUM SLIP DOOR WITH GLASS	1	EA	11/11/16
4	1 1/2" x 6" x 2 1/4" ALUMINUM SLIP DOOR WITH GLASS	1	EA	11/11/16
5	1 1/2" x 6" x 2 1/4" ALUMINUM SLIP DOOR WITH GLASS	1	EA	11/11/16
6	1 1/2" x 6" x 2 1/4" ALUMINUM SLIP DOOR WITH GLASS	1	EA	11/11/16
7	1 1/2" x 6" x 2 1/4" ALUMINUM SLIP DOOR WITH GLASS	1	EA	11/11/16
8	1 1/2" x 6" x 2 1/4" ALUMINUM SLIP DOOR WITH GLASS	1	EA	11/11/16
9	1 1/2" x 6" x 2 1/4" ALUMINUM SLIP DOOR WITH GLASS	1	EA	11/11/16
10	1 1/2" x 6" x 2 1/4" ALUMINUM SLIP DOOR WITH GLASS	1	EA	11/11/16



AAI
ADOLFO A. ALATRISTE
 ARCHITECT
 1711-1713 W. HOPKINS AVE.
 MILWAUKEE, WI 53211

STRUCTURAL FRAMING SCHEDULE

NO.	DESCRIPTION	QUANTITY	UNIT
1	2x12 JOIST	100	LF
2	2x10 JOIST	150	LF
3	2x8 JOIST	200	LF
4	2x6 JOIST	250	LF
5	2x4 JOIST	300	LF
6	2x12 GIRDER	50	LF
7	2x10 GIRDER	75	LF
8	2x8 GIRDER	100	LF
9	2x6 GIRDER	125	LF
10	2x4 GIRDER	150	LF
11	2x12 COLUMN	10	EA
12	2x10 COLUMN	15	EA
13	2x8 COLUMN	20	EA
14	2x6 COLUMN	25	EA
15	2x4 COLUMN	30	EA
16	2x12 BRACE	100	LF
17	2x10 BRACE	150	LF
18	2x8 BRACE	200	LF
19	2x6 BRACE	250	LF
20	2x4 BRACE	300	LF

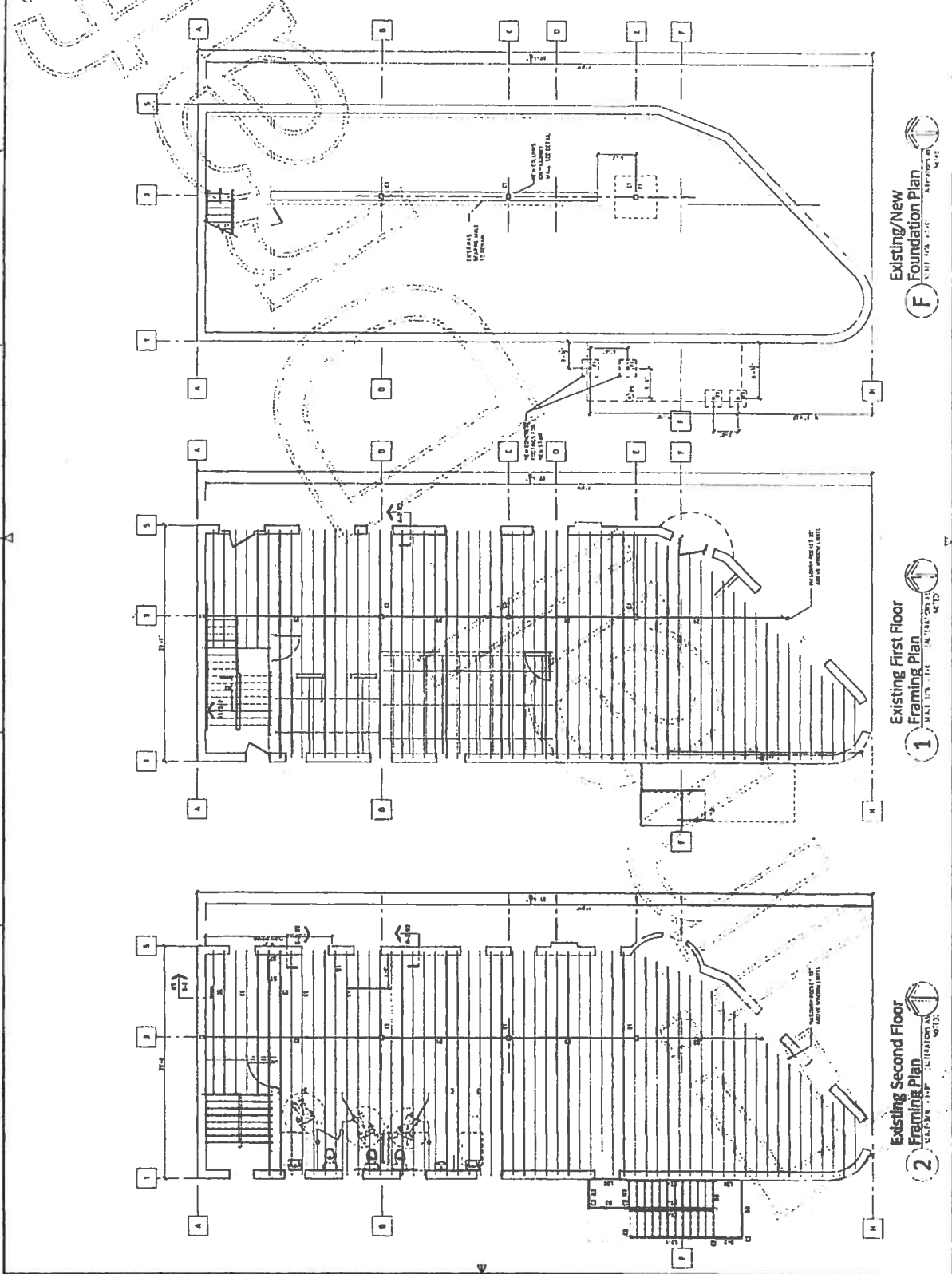
STATEMENT OF COMPLIANCE

I, the undersigned, being duly licensed and qualified in the State of Wisconsin, do hereby certify that the above described work was done in accordance with the Wisconsin Building Code, as amended, and the applicable provisions of the Wisconsin Building Code, as amended, and the applicable provisions of the Wisconsin Building Code, as amended.

DATE: 01/17/2016
 NAME: ADOLFO A. ALATRISTE

EVALUATION

NO.	DESCRIPTION	DATE	BY
1	FOUNDATION		
2	FLOORING		
3	CEILING		
4	WALLS		
5	ROOFING		
6	MECHANICAL		
7	ELECTRICAL		
8	PLUMBING		
9	HEATING		
10	Cooling		
11	Other		



Existing/New Foundation Plan
 F
 1/17/2016
 ADOLFO A. ALATRISTE
 ARCHITECT

Existing First Floor Framing Plan
 1
 1/17/2016
 ADOLFO A. ALATRISTE
 ARCHITECT

Existing Second Floor Framing Plan
 2
 1/17/2016
 ADOLFO A. ALATRISTE
 ARCHITECT

Foundation, First and Second Floor Framing Plans and Framing Schedule
 No. 201513
S.1

STATEMENT OF COMPLIANCE

I HEREBY CERTIFY THAT THE DRAWINGS AND SPECIFICATIONS FOR THE ABOVE PROJECT HAVE BEEN PREPARED BY ME OR UNDER MY CLOSE PERSONAL SUPERVISION AND THAT I AM A LICENSED ARCHITECT IN THE STATE OF WISCONSIN. I AM NOT PROVIDING ANY PROFESSIONAL ENGINEERING OR ARCHITECTURAL SERVICES TO ANY OTHER PROJECTS AT THE SAME TIME AS THIS PROJECT.

DATE: 03/20/16
PROJECT: 101745-1

NO.	DATE	DESCRIPTION
1	03/20/16	ISSUED FOR PERMITS
2	03/20/16	ISSUED FOR PERMITS
3	03/20/16	ISSUED FOR PERMITS
4	03/20/16	ISSUED FOR PERMITS
5	03/20/16	ISSUED FOR PERMITS
6	03/20/16	ISSUED FOR PERMITS
7	03/20/16	ISSUED FOR PERMITS
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13	03/20/16	ISSUED FOR PERMITS
14	03/20/16	ISSUED FOR PERMITS
15	03/20/16	ISSUED FOR PERMITS
16	03/20/16	ISSUED FOR PERMITS
17	03/20/16	ISSUED FOR PERMITS
18	03/20/16	ISSUED FOR PERMITS
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20	03/20/16	ISSUED FOR PERMITS
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23	03/20/16	ISSUED FOR PERMITS
24	03/20/16	ISSUED FOR PERMITS
25	03/20/16	ISSUED FOR PERMITS

1 Column Base

 1. Column Base

2 Elevated Column Base

 2. Elevated Column Base

3 Rest on Column Cap

 3. Rest on Column Cap

4 No Bolts into Narrow Face

 4. No Bolts into Narrow Face

5 Bolts into Wide Face

 5. Bolts into Wide Face

6 Resting on Wall

 6. Resting on Wall

7 Bearing for Wall or Window Header

 7. Bearing for Wall or Window Header

8 Beam to Beam Connection

 8. Beam to Beam Connection

9 Bearing at Concrete Wall

 9. Bearing at Concrete Wall

10 Bearing at Column

 10. Bearing at Column

11 Beam to Column Lateral Brace

 11. Beam to Column Lateral Brace

12 2x4 Wall Framing Full Depth Header

 12. 2x4 Wall Framing Full Depth Header

13 Low Header

 13. Low Header

14 High Header

 14. High Header

15 Plank Orientation Header

 15. Plank Orientation Header

16 Holes Zones in Joists

 16. Holes Zones in Joists

17 Holes Zones in Joists

 17. Holes Zones in Joists

18 Low Header

 18. Low Header

19 High Header

 19. High Header

20 No Taper Cuts

 20. No Taper Cuts

21 Wood Plate Connection

 21. Wood Plate Connection

22 Column Connection

 22. Column Connection

23 No Spig Cut Overlames

 23. No Spig Cut Overlames

24 Notches in Headers or Beams

 24. Notches in Headers or Beams

25 Top of Bottom Plate Connection

 25. Top of Bottom Plate Connection

26 Top of Bottom Plate Connection

 26. Top of Bottom Plate Connection

27 Top of Bottom Plate Connection

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49 Top of Bottom Plate Connection

 49. Top of Bottom Plate Connection

50 Top of Bottom Plate Connection

 50. Top of Bottom Plate Connection



SCOPE OF PLUMBING WORK:
 PROVIDE AND INSTALL PLUMBING SYSTEMS AND FIXTURES FOR THE PROJECT AS SHOWN ON THESE PLANS AND SPECIFICATIONS. THE CONTRACTOR SHALL BE RESPONSIBLE FOR OBTAINING ALL NECESSARY PERMITS AND INSURANCE. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL EXISTING UTILITIES AND STRUCTURES. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL EXISTING UTILITIES AND STRUCTURES.

PLUMBING NOTES:

1. ALL PLUMBING SHALL BE INSTALLED IN ACCORDANCE WITH THE LATEST EDITIONS OF THE PLUMBING CODES AND STANDARDS.
2. THE CONTRACTOR SHALL BE RESPONSIBLE FOR OBTAINING ALL NECESSARY PERMITS AND INSURANCE.
3. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL EXISTING UTILITIES AND STRUCTURES.
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20. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL EXISTING UTILITIES AND STRUCTURES.

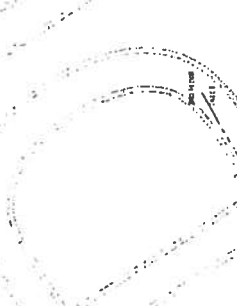
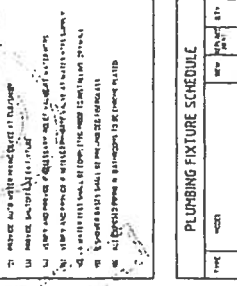
STATEMENT OF COMPLIANCE:
 I, the undersigned, being duly licensed and qualified, hereby certify that the above described work was done in accordance with the provisions of the applicable codes and standards, and that the same is in compliance with the requirements of the applicable laws and regulations.

PLUMBING FIXTURE SCHEDULE

NO.	DESCRIPTION	QTY.
1	TOILET	1
2	SINK	1
3	SHOWER	1
4	BATH TUB	1
5	VANITY	1
6	WATER HEATER	1
7	WATER SPLITTER	1
8	WATER FILTER	1
9	WATER SODIUM BICARBONATE	1
10	WATER SODIUM BICARBONATE	1
11	WATER SODIUM BICARBONATE	1
12	WATER SODIUM BICARBONATE	1
13	WATER SODIUM BICARBONATE	1
14	WATER SODIUM BICARBONATE	1
15	WATER SODIUM BICARBONATE	1
16	WATER SODIUM BICARBONATE	1
17	WATER SODIUM BICARBONATE	1
18	WATER SODIUM BICARBONATE	1
19	WATER SODIUM BICARBONATE	1
20	WATER SODIUM BICARBONATE	1

TOILET FIXTURES MOUNTING HEIGHTS

- 1. TOILET: 56" (1425mm)
- 2. SINK: 34" (863mm)
- 3. SHOWER: 72" (1829mm)
- 4. BATH TUB: 48" (1219mm)
- 5. VANITY: 34" (863mm)
- 6. WATER HEATER: 48" (1219mm)
- 7. WATER SPLITTER: 48" (1219mm)
- 8. WATER FILTER: 48" (1219mm)
- 9. WATER SODIUM BICARBONATE: 48" (1219mm)
- 10. WATER SODIUM BICARBONATE: 48" (1219mm)
- 11. WATER SODIUM BICARBONATE: 48" (1219mm)
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- 18. WATER SODIUM BICARBONATE: 48" (1219mm)
- 19. WATER SODIUM BICARBONATE: 48" (1219mm)
- 20. WATER SODIUM BICARBONATE: 48" (1219mm)



LEGEND

- WASTE
- VENTS
- WATER SUPPLY

Water Supply Isometric Diagram (1)

Waste and Vents Isometric Diagram (2)

Water Supply Isometric Diagram (1)

Waste and Vents Isometric Diagram (2)

Water Supply Isometric Diagram (1)

Waste and Vents Isometric Diagram (2)

Water Supply Isometric Diagram (1)

Waste and Vents Isometric Diagram (2)

ADOLFO A. ALATRISTE
ARCHITECT
 1111 N. MILWAUKEE AVENUE
 MILWAUKEE, WISCONSIN 53233
 TEL: 414.224.1111
 FAX: 414.224.1112

ELECTRICAL SYMBOLS LEGEND

- 1. 120V SINGLE PHASE
- 2. 240V SINGLE PHASE
- 3. 3 PHASE 4 WIRE
- 4. 3 PHASE 3 WIRE
- 5. 3 PHASE 3 WIRE W/ GROUND
- 6. 3 PHASE 4 WIRE W/ GROUND
- 7. 3 PHASE 3 WIRE W/ GROUND
- 8. 3 PHASE 4 WIRE W/ GROUND
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- 100. 3 PHASE 4 WIRE W/ GROUND

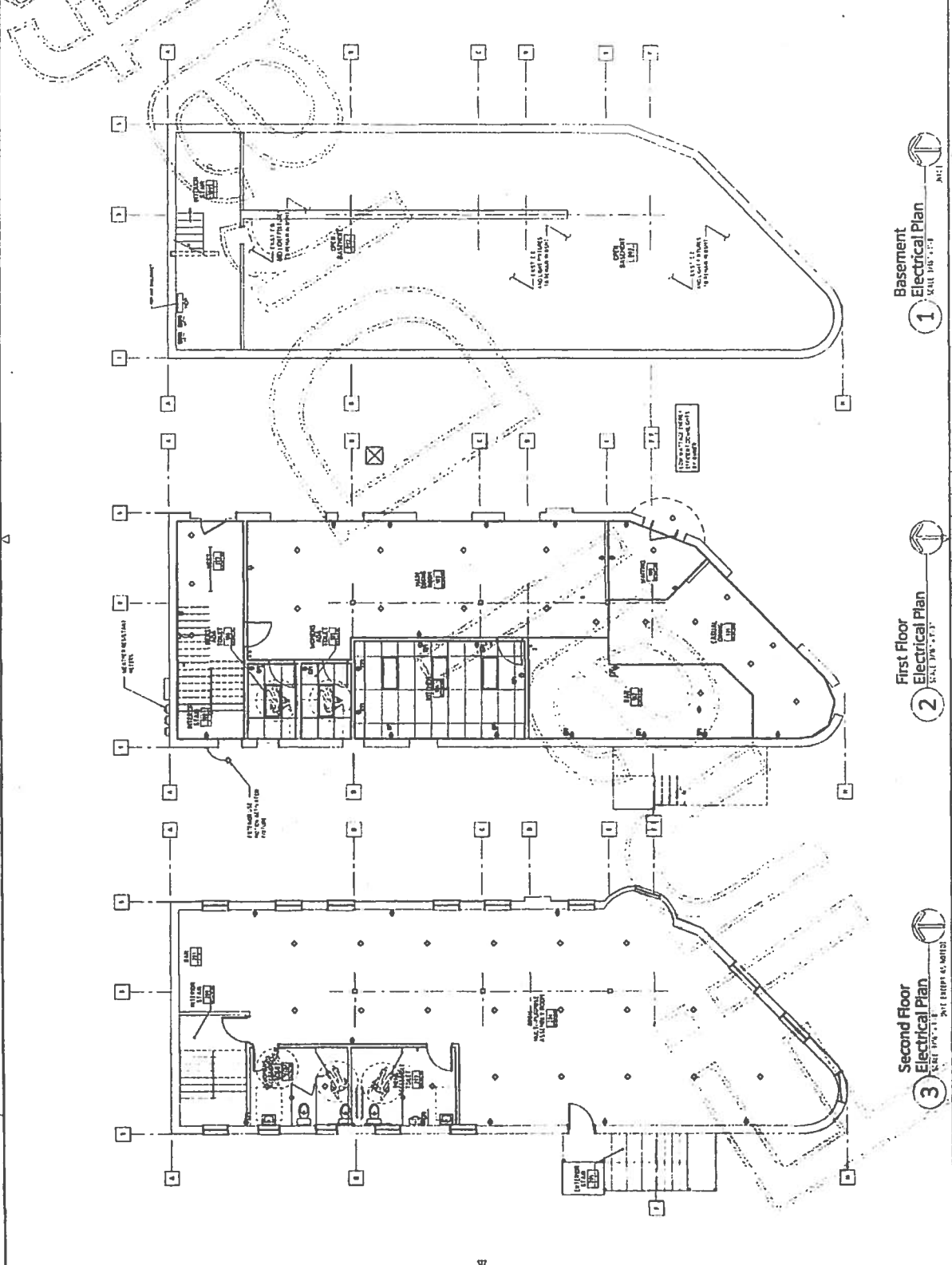
STATEMENT OF COMPLIANCE

I HEREBY CERTIFY THAT THE DRAWINGS, SPECIFICATIONS AND CONTRACT DOCUMENTS FOR THE PROJECT DESCRIBED HEREIN COMPLY WITH THE REQUIREMENTS OF THE NATIONAL ELECTRICAL CODE (NEC) AND THE NATIONAL FIRE ALARM CODE (NFPA) AS APPLICABLE TO THE PROJECT. I AM A LICENSED ELECTRICAL ENGINEER AND AM NOT PROVIDING ANY SERVICES OTHER THAN THOSE DESCRIBED IN THE CONTRACT DOCUMENTS.

DATE: 01/17/2016
 WORK NUMBER: A107455
 DRAWING NUMBER: 001/7016

NO.	REVISION	DATE
1	ISSUED FOR PERMITS	01/17/2016
2	ISSUED FOR PERMITS	01/17/2016
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Basement Electrical Plan
 SCALE: 1/8" = 1'-0"

1

First Floor Electrical Plan
 SCALE: 1/8" = 1'-0"

2

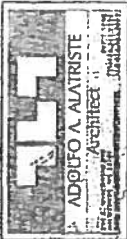
Second Floor Electrical Plan
 SCALE: 1/8" = 1'-0"

3

Basement, First and Second Floor Electrical Plans

E.1

201513

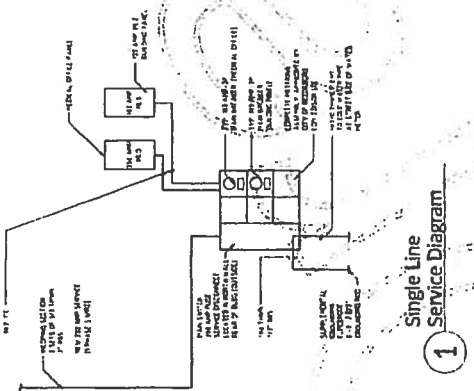


ADOLFO A. ALATRISTE
AVENIERE, INC.
ELECTRICAL ENGINEERING
1000 W. 10TH AVENUE, SUITE 100
DENVER, CO 80202
TEL: 303.733.1111
FAX: 303.733.1112

STATEMENT OF COMPLIANCE
I HEREBY CERTIFY THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF. I AM A LICENSED ELECTRICAL ENGINEER IN THE STATE OF COLORADO AND AM NOT PROVIDING ANY SERVICES TO THIS PROJECT AS A CONSULTANT OR CONTRACTOR.
DATE: 01/15/13
SIGNATURE: [Signature]

PROJECT: INTERIOR ALTERATIONS FOR A RESTAURANT AND BAR
ADDRESS: 1714-1715 W. HOPKINS AVE
CITY: DENVER, CO 80202
DATE: 01/15/13

NO.	DESCRIPTION	DATE	BY
01	PRELIMINARY	01/15/13	AA
02	REVISED	01/15/13	AA
03	REVISED	01/15/13	AA
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06	REVISED	01/15/13	AA
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100	REVISED	01/15/13	AA



1 Single Line Service Diagram

PANEL CIRCUIT SCHEDULE

PANEL	NO.	DESCRIPTION	AMPS	VOLTS	PHASES	WIRING	TERMINALS	NOTES
1	1	120V 15A	15	120	1	1	1	
1	2	120V 15A	15	120	1	1	1	
1	3	120V 15A	15	120	1	1	1	
1	4	120V 15A	15	120	1	1	1	
1	5	120V 15A	15	120	1	1	1	
1	6	120V 15A	15	120	1	1	1	
1	7	120V 15A	15	120	1	1	1	
1	8	120V 15A	15	120	1	1	1	
1	9	120V 15A	15	120	1	1	1	
1	10	120V 15A	15	120	1	1	1	
1	11	120V 15A	15	120	1	1	1	
1	12	120V 15A	15	120	1	1	1	
1	13	120V 15A	15	120	1	1	1	
1	14	120V 15A	15	120	1	1	1	
1	15	120V 15A	15	120	1	1	1	
1	16	120V 15A	15	120	1	1	1	
1	17	120V 15A	15	120	1	1	1	
1	18	120V 15A	15	120	1	1	1	
1	19	120V 15A	15	120	1	1	1	
1	20	120V 15A	15	120	1	1	1	
1	21	120V 15A	15	120	1	1	1	
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1	26	120V 15A	15	120	1	1	1	
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1	86	120V 15A	15	120	1	1	1	
1	87	120V 15A	15	120	1	1	1	
1	88	120V 15A	15	120	1	1	1	
1	89	120V 15A	15	120	1	1	1	
1	90	120V 15A	15	120	1	1	1	
1	91	120V 15A	15	120	1	1	1	

MILWAUKEE POLICE DEPARTMENT LICENSING

CRIMINAL RECORD/ORDINANCE VIOLATION/INCIDENTS SYNOPSIS

DATE: 05/09/2014

LICENSE TYPE: Class B Tavern

NEW:

RENEWAL:

No. 185932

Application Date: 05/05/2014

License Location: 1703 W. Hopkins St.

Business Name: The Avenue Bar and Grill

Licensee/Applicant: Williams, Rodney K.
(Last Name, First Name, MI)

Date of Birth: 01/23/1972

Home Address: 3964 N. 39th Street

City: Milwaukee

State: WI **Zip Code:** 53216

Home Phone: (414) 837-6275

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 02/20/2012 Sgt. Chad Raden of the Milwaukee police department's License Investigation Unit informed officers at Milwaukee police District #5 that the Food License previously issued to The Avenue Bar & Grill (1703 West Hopkins Street) had been suspended effective 02/20/2012. During a licensed premise check of the business on 02/20/2012 at 9:15pm, Milwaukee police discovered that food was being served. The bartender on duty, Jerome D. Hardrick, and the applicant were both informed that food could not be served at the business until the issue related to the suspended Food License was resolved. Both parties indicated they understood.

=====

RE: WILLIAMS, Rodney K

2. On Saturday, January 19, 2013 approximately 11:05pm, Milwaukee Police Department conducted a tavern check at 1703 W Hopkins Av, The Avenue Bar & Grill. Upon attempting to enter the tavern the entrance door was locked. Once inside the tavern, a young female was observed sitting at a table that appeared to be under legal drinking age that was later identified as a 16 year old. She stated she was not asked for ID by any of the staff and was only there for a few minutes prior to our arrival and was not drinking. The agent (WILLIAMS) was spoken to regarding this and stated he did not see her enter that is why ID was not checked must have just walked in. The officer says they have a buzzer behind the bar to allow patrons in establishment so they can attempt to verify who enters. The agent was cited for:

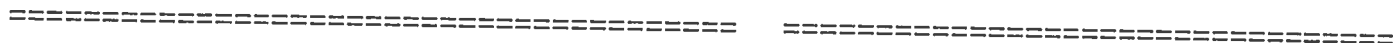
Charge1: License Premises – Open Entry Required
Charge2: Allow Underage on Premises

Finding1: Guilty – Milwaukee Municipal Court
Finding2: Dismissed without Prejudice

Sentence: \$368.00 Penalty

Date1-2: 03/22/2013

Case#1: 13017087
Case#2: 13017088



Previous premise

Alcohol Concentration for 1703-05 W Hopkins St

City of Milwaukee, Wisconsin



- Legend -

- City limits
- Parcels
- Freeways
- Exit ramps
- Entry ramps
- Ramps
- Major streets
- Streets
- Waterways
- 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

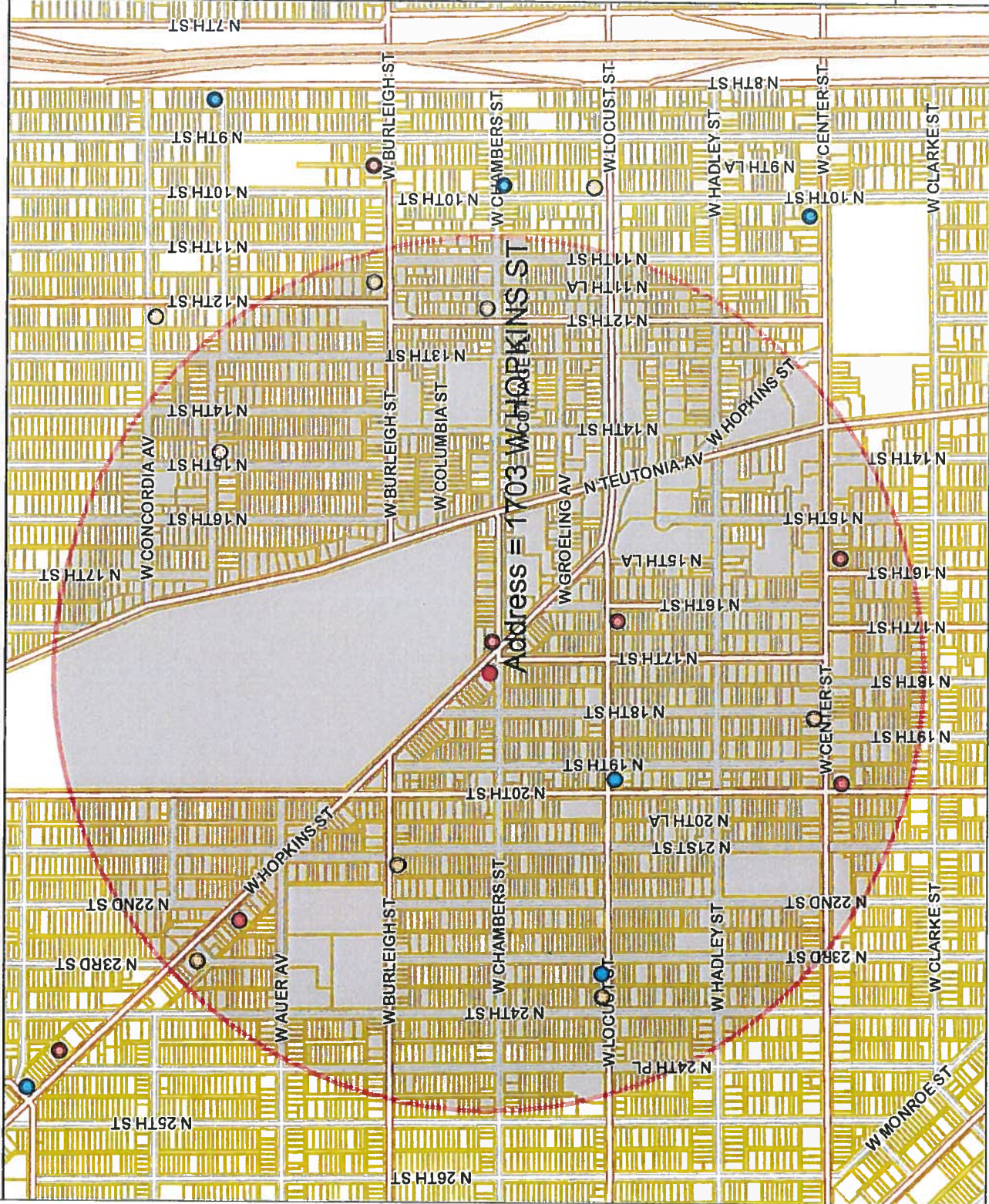


- Notes -

Alcohol establishments within a .5 mile radius centered on 1703-05 W Hopkins St on September 16, 2015



Department of Administration - ITMD



Map Scale: 1: 10,302

Licensed Alcohol Beverage Establishments Within a .5 Mile Radius of Radius Centered on 1703-05 W Hopkins St on September 16, 2015									
License Summary									
Legal entity	Trade name	Licensee	Address	License type name	Total capacity	Room capacity	Expiration date	Grand Total	Total
ADAMS FOOD LLC	BURLEIGH FOOD MART	MUSTAFA T MUSTAFA, Agt	1120 W BURLEIGH ST	Class A Fermented Malt Beverage Retailer's License			12/10/2015		7
FAMILY SUPER SAVER, INC	FAMILY SUPERSAVER	ELHAM ABUL RAHIM, Agt	2301 W HOPKINS ST	Class A Fermented Malt Beverage Retailer's License			7/30/2016		5
J & Y CORP	SAVEMORE FOOD MARKET	MONER N JABER, Agt	2900 N 24TH ST	Class A Fermented Malt Beverage Retailer's License			6/24/2016		3
North Side Meat Mart LLC	North Side Meat Mart	Faiz N Mavrki, Agt	3004 N 12th ST	Class A Fermented Malt Beverage Retailer's License			4/29/2016		
PJS SUPERMARKET, LLC	PJS SUPERMARKET	INDERJIT KAUR, Agt	3079 N 21ST ST	Class A Fermented Malt Beverage Retailer's License			1/17/2016		
Sams Food Market	Sams Food Market	Alaa T Hamed, SP	1802 W Center ST	Class A Fermented Malt Beverage Retailer's License			6/2/2016		
SHANAA GROCERY, INC	MIR F FOODS	BASSEL S HAMZA, Agt	3246 N 15TH ST	Class A Fermented Malt Beverage Retailer's License			12/16/2015		
ALETA'S LIQUOR	ALETA'S LIQUOR	ALETA M PARKER, SP	1525 W CENTER ST	Class A Malt & Class A Liquor License			7/29/2016		
DWN, INC	MAGIC FOODS	AHMED K YAFAL, Agt	2879 N 16TH ST	Class A Malt & Class A Liquor License			4/11/2016		
HARMEET, LLC	MID CITY LIQUOR	Robert A Deiss, Agt	1935 W CENTER ST	Class A Malt & Class A Liquor License			6/15/2016		
HOPKINS LIQUOR & FOOD MART, LLC	HOPKINS LIQUOR & FOOD MART	HARBHAJAN SINGH, Agt	1646 W HOPKINS ST	Class A Malt & Class A Liquor License			5/13/2016		
KHASRIA 3, INC	BIG JIM LIQUOR	BHUPINDER SINGH, Agt	2161 W HOPKINS ST	Class A Malt & Class A Liquor License			1/19/2016		
Rose's Place	Rose's Place	PATRICIA A PICKENS, SP	2878 N 20th ST	Class B Tavern License	80		11/29/2015		
The Avenue Bar and Grill LLC	The Avenue Bar and Grill	Rodney K Williams, Agt	1703 W Hopkins ST	Class B Tavern License	49		2/24/2016		
Tina's Lounge	Tina's Lounge	TINA R ALLEN, SP	2901 N 23rd ST	Class B Tavern License	49		7/22/2016		



Tuesday, January 19, 2016

Licenses Committee Notice of Hearing

KEVIN ANDERSON
4861 N GREEN BAY Av

MILWAUKEE, WI 53209

Date: 1/26/2016
Time: 09:45 AM
Location: Room 301-B, Third Floor, City Hall

The Licenses Committee will consider the following license application:

Class B Tavern, Sidewalk Dining, Food Dealer's, and Public Entertainment
Premises License Applications Requesting Comedy Acts, Bands, Instrumental
Musicians, Disc Jockey, Karaoke, Poetry Readings, Patrons Dancing, and 4
Amusement Machines
ANDERSON, Kevin J, Agent
Milwaukee Tied House at 1703-05 W HOPKINS St

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.





Tuesday, January 19, 2016

Licenses Committee Notice of Hearing

1703 W Hopkins LLC
4861 N GREEN BAY Av

MILWAUKEE, WI 53209

Date: 1/26/2016
Time: 09:45 AM
Location: Room 301-B, Third Floor, City Hall

The Licenses Committee will consider the following license application:

Class B Tavern, Sidewalk Dining, Food Dealer's, and Public Entertainment
Premises License Applications Requesting Comedy Acts, Bands, Instrumental
Musicians, Disc Jockey, Karaoke, Poetry Readings, Patrons Dancing, and 4
Amusement Machines
ANDERSON, Kevin J, Agent
Milwaukee Tied House at 1703-05 W HOPKINS St

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.





Tuesday, January 19, 2016



Notice of Public Hearing

ANDERSON, Kevin J, Agent
Milwaukee Tied House at 1703-05 W HOPKINS St
Class B Tavern, Sidewalk Dining, Food Dealer's, and Public Entertainment Premises License
Applications Requesting Comedy Acts, Bands, Instrumental Musicians, Disc Jockey, Karaoke,
Poetry Readings, Patrons Dancing, and 4 Amusement Machines

Tuesday, January 26, 2016 at 9:45 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 1/26/2016 at 9:45 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.

RESIDENT	MAIL ADDRESS	CITY AND ZIP CODE
CURRENT RESIDENT	1629 W HOPKINS ST	MILWAUKEE, WI 53206-2168
CURRENT RESIDENT	1629A W HOPKINS ST	MILWAUKEE, WI 53206-2168
CURRENT RESIDENT	1656 W HOPKINS ST	MILWAUKEE, WI 53206-2230
CURRENT RESIDENT	1700 W HOPKINS ST	MILWAUKEE, WI 53206-0005
CURRENT RESIDENT	1717 W HOPKINS ST	MILWAUKEE, WI 53206-2206
CURRENT RESIDENT	1719 W HOPKINS ST	MILWAUKEE, WI 53206-2206
CURRENT RESIDENT	1726 W CHAMBERS ST	MILWAUKEE, WI 53206-2209
CURRENT RESIDENT	1727 W CHAMBERS ST	MILWAUKEE, WI 53206-2210
CURRENT RESIDENT	2954 N 18TH ST	MILWAUKEE, WI 53206-2138
CURRENT RESIDENT	2954A N 18TH ST	MILWAUKEE, WI 53206-2138
CURRENT RESIDENT	2955 N 17TH ST	MILWAUKEE, WI 53206-2162
CURRENT RESIDENT	2955A N 17TH ST	MILWAUKEE, WI 53206-2162
CURRENT RESIDENT	2960 N 18TH ST	MILWAUKEE, WI 53206-2138
CURRENT RESIDENT	2961 N 17TH ST	MILWAUKEE, WI 53206-2162
CURRENT RESIDENT	2961A N 17TH ST	MILWAUKEE, WI 53206-2162
CURRENT RESIDENT	2964 N 18TH ST	MILWAUKEE, WI 53206-2138
CURRENT RESIDENT	2965 N 17TH ST	MILWAUKEE, WI 53206-2162
CURRENT RESIDENT	2968 N 18TH ST	MILWAUKEE, WI 53206-2138
CURRENT RESIDENT	2969 N 17TH ST	MILWAUKEE, WI 53206-2162
CURRENT RESIDENT	2973 N 18TH ST	MILWAUKEE, WI 53206-2139
CURRENT RESIDENT	2974 N 18TH ST	MILWAUKEE, WI 53206-2138
CURRENT RESIDENT	2975 N 17TH ST	MILWAUKEE, WI 53206-2162
CURRENT RESIDENT	2975A N 17TH ST	MILWAUKEE, WI 53206-2162
CURRENT RESIDENT	2976 N 18TH ST	MILWAUKEE, WI 53206-2138
CURRENT RESIDENT	2977 N 18TH ST	MILWAUKEE, WI 53206-2139
CURRENT RESIDENT	2979 N 17TH ST	MILWAUKEE, WI 53206-2162
CURRENT RESIDENT	3001 N 18TH ST	MILWAUKEE, WI 53206-2202
CURRENT RESIDENT	3002 N 18TH ST	MILWAUKEE, WI 53206-2201
CURRENT RESIDENT	3005 N 18TH ST	MILWAUKEE, WI 53206-2202
CURRENT RESIDENT	3006 N 18TH ST	MILWAUKEE, WI 53206-2201
CURRENT RESIDENT	3006A N 18TH ST	MILWAUKEE, WI 53206-2201
CURRENT RESIDENT	3009 N 18TH ST	MILWAUKEE, WI 53206-2202
CURRENT RESIDENT	3013 N 18TH ST	MILWAUKEE, WI 53206-2202
CURRENT RESIDENT	3013A N 18TH ST	MILWAUKEE, WI 53206-2202
CURRENT RESIDENT	3019 N 18TH ST	MILWAUKEE, WI 53206-2202

Total Records: 36

Radius: 250.0 feet and Center of Circle: 1703 W Hopkins ST



BUSINESS LICENSE PLAN OF OPERATION

ccl-busplan 3/17/15

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 License Filling Station License Other (plan of operation for specific license also required)

Provide a detailed description of the type of business you plan on operating: Sit down restaurant with bar and a rentable Hall on second floor

Do you have any experience operating this type of business? No Yes

If yes, explain: Owned Three bars.

2. Business Operations

- a. Proposed Opening Date: 2016 Jan.
- b. Is this premise under construction? No Yes If yes, list estimated completion date: 2016 Jan
- c. Is this a franchise? No Yes
- d. Is this premises currently licensed? No Yes If yes, list type of license: class B
- e. Is the current licensee operating? 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: Food
- 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 Control

- 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: _____
Will a sound amplification system be used? No Yes If yes, describe: 2nd Floor Hall
- e. Are there designated outdoor smoking areas? No Yes If yes, describe: Outdoor Seating
- f. Number of Garbage Cans: Inside: 813 Locations: 1st Floor + 2nd Floor.
Outside: 2 Locations: Outdoor Seating
- g. Is a crowd control barrier used? No Yes If yes, describe: _____
- h. Describe sanitation facilities (restrooms): Urinals and Toilet in mens Room Toilet stalls in woman
- i. Name of solid waste contractor: Advanced Disposal Waste Management Other: TBD

4. Parking & Security

- a. Are there off-street parking places? No Yes If yes, how many? _____
 Describe security plan for parking lot: _____
- b. Is there a loading zone? No Yes If yes, describe security for loading zone _____
- 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? ext. and Int.
 Will searches or identification checks be conducted upon entry? No Yes If yes, describe _____

5. Percentage of Sales (must total 100%)

Alcohol <u>35</u> %	Food <u>55</u> %	Secondhand Merchandise _____ %	Precious Metals & Gems _____ %
Entertainment _____ %	Cigarettes _____ %		
Pawnbroker Activity _____ %	Salvaged Materials _____ % (such as scrap metal)	Other <u>10</u> % Describe: <u>Hall Rental</u>	

6. 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
 Bowling Alley Hotel Banquet Hall Sports Facility

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 Recording Studio

What other types of 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: _____

7. 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.)

8. Premises Description

d. Identify all area(s) of the premises that will be used in operation of 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: Chambers

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

h. Describe Premises Structure: Single Story Multi-Story - # of Stories 2 Other: _____

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

j. Property Owner's Name: Kevin Anderson Phone Number: 810-3587

Address: 4861 W Green bay ave.

9. Hours of Operation & Customers

Will customers be entering the premises? No Yes

Day of the Week	Proposed Hours of Operation:		Number of Customers expected each day	Potential Age Range of Customers	Class B Applicants: Age Restriction (If none, write 'None')
	Open (include a.m. or p.m.)	Close (include a.m. or p.m.)			
Sunday	6: Am	2: Am	80	15-100	None
Monday	6: Am	2: Am			
Tuesday	6: Am	2: Am			
Wednesday	6: Am	2 Am			
Thursday	6: Am	2 Am			
Friday	6: Am	2:30 Am			
Saturday	6: Am	2:30 Am			

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.

10. Required Signature(s)

Kevin Anderson
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: <u>1703 W Hopkins LLC</u>
Premise Address: <u>1703 -05 W Hopkins. Milwaukee. 53206</u>
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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
"Service Bar Only" Designation
If applying for Class B or C license, are you applying for "Service Bar Only"? <input checked="" type="checkbox"/> No <input type="checkbox"/> 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? <input checked="" type="checkbox"/> No <input type="checkbox"/> 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? <input type="checkbox"/> No <input checked="" type="checkbox"/> 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? <input checked="" type="checkbox"/> No <input type="checkbox"/> 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? <input checked="" type="checkbox"/> No <input type="checkbox"/> 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? <input checked="" type="checkbox"/> Own <input type="checkbox"/> Lease
b) Who owns the fixtures (for example, coolers, etc.)? <u>The business</u>
c) Are you purchasing the stock and/or fixtures? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If yes, amount paid \$ <u>1.00</u>
d) Total amount paid for business \$ <u>0</u>
e) Total amount paid for goodwill of the business \$ <u>0</u>
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? <input type="checkbox"/> No <input checked="" type="checkbox"/> 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 Sept 14 2015 ends Sept 14 2018
- b) Monthly rental \$ 2500.00
- 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)? 3 Yrs
- 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 Taxes, water sewer & Utilities
- 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 12th day of September, 2015

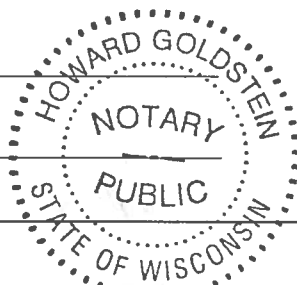
Howard Goldstein

(Clerk/Notary Public)

9/3/17

My Commission Expires

*Notary Seal must be affixed.



Kevin Allen

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

[Signature]

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 e-mail address: 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 checked="" type="checkbox"/> Comedy Acts
<input checked="" type="checkbox"/> Disc Jockey	<input type="checkbox"/> Magic Shows	<input checked="" type="checkbox"/> Poetry Readings	<input type="checkbox"/> Dancing by Performers
<input type="checkbox"/> Adult Entertainment/ Strippers/Erotic Dance	<input type="checkbox"/> Wrestling	<input type="checkbox"/> Patron Contests	<input checked="" type="checkbox"/> Patrons Dancing
<input type="checkbox"/> Jukebox	<input checked="" type="checkbox"/> Karaoke	<input type="checkbox"/> Bowling Alley	<input type="checkbox"/> Pool Tables
<input type="checkbox"/> Motion Pictures	<input checked="" type="checkbox"/> Amusement Machines --	How many? _____	How many? _____
How many? _____	How many? <u>4</u>	<input type="checkbox"/> Concerts	<input type="checkbox"/> Theatrical Performances
<input type="checkbox"/> Other: _____	Approx. # per year? _____	Approx. # per year? _____	Approx. # per year? _____

WILL PROMOTERS EVER BE USED FOR ANY OF THE ENTERTAINMENT?

No Yes, describe: _____

LEGAL CAPACITY OF PREMISES

_____ (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.

WILL SOUND AMPLIFICATION EVER BE USED?

No Yes, describe: Hall Rental

DECLARATIONS, ACKNOWLEDGEMENTS, & DISCLOSURES

Read And Initial Each Item Confirming Your Understanding:

1. KA 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.
2. KA I agree to inform the City Clerk within 10 days of any substantial changes in the information supplied in this application.
3. KA I understand that I shall not willfully refuse to provide the services offered under this license, or add charges or require deposits not required of the general public because of race, color, sex, religion, national origin or ancestry, age, handicap, lawful source of income, marital status, sexual orientation, gender identity or expression, familial status or the fact that a person is now or has been a member of the military service, whether dressed in uniform or not; and shall not seek such information as a condition of employment, or penalize any employee or discriminate in the selection of personnel for training or promotion on the basis of such information.
4. KA 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.

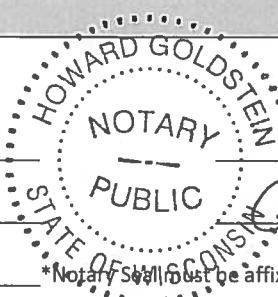
NOTARIZED SIGNATURES OF APPLICANTS

SUBSCRIBED AND SWORN TO BEFORE ME

This 12th day of September, 20 15

Howard Goldstein

(Clerk/Notary Public) My Commission Expires 9/3/17



[Signature]
Agent/Owner/Partner
[Signature]
Additional Owner/Partner

*Notary Seal must be affixed.

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 • www.milwaukee.gov/license

Legal Entity Name: 1703 W Hopkins LLC

Premises Address: 1703-05 W Hopkins

1. Application Type

Is this a new food business or are you taking over a food business which is currently operating?

- Taking over a currently operating, licensed food business
- New business (includes taking over a closed food business)

Will you be sharing kitchen space with another food establishment?

- Yes, I intend to rent space in my kitchen to other food businesses
- Yes, I am renting space from another food business which will also be using the kitchen*
- No, I will be the only food business using the space

*If renting space in a commercial kitchen with another operator, a completed and signed Shared Kitchen Agreement is required.
 The form is available at www.milwaukee.gov/license

Provide a brief description of the food establishment.

Attach a copy of your menu or general listing of the types of food products that will be sold. Indicate what information you will be including:

- Menu
- List of the types of products (for example: packaged foods, deli case, meat department)

What is the anticipated opening date or date of change of ownership:

2. Construction, Remodeling and Equipment

Are any construction, remodeling or equipment changes planned? Yes No *If no, skip to section 3.*

Scope of the planned project?

- New construction or conversion of an existing structure to be used as a food establishment
- Renovation/remodeling of a food establishment, which may or may not include equipment changes
- Renovation/remodeling limited to the installation/change/replacement of food equipment

Provide a brief summary of the proposed construction, remodeling and/or equipment change:

Note: Building permits may be required. Contact the City of Milwaukee Development Center.

Date alterations/changes planned to begin

Name, address and phone number of architect

Name, address and phone number of general contractor

3. Premises Description

Will food be prepared or sold at a single or multiple food preparation and/or sale sites (for example a hotel with multiple dining rooms or bars):

Single Multiple

If multiple sites will be used, how many distinct sites will be used?

List all sites and briefly describe the nature of the food activities at each site:

Are any outdoor operations planned? Yes No

If yes, what activities will be conducted outdoors (check all that apply):

Bar Cooking/Grilling Dining - Patio Dining - Sidewalk (DPW permit required) Storage

Other, specify

Seating provided on site for dining? Yes No

If yes, are there additional banquet facilities other than the main dining area? Yes No

Total square footage of the establishment (exclude space utilized for other purposes other than food)

Number of Full Time Employees

Number of Part Time Employees

4. Business Type

Establishment Type (select the one that best describes the proposed business)

- Bed and Breakfast**
- Community Food Program** – free meal site or food pantry. Any site where all food is provided free of cost to those in need, or to organizations serving persons in need.
- Distiller or Brewer** – facilities that are primarily engaged in the production of alcoholic beverages
- Food Distributor** – a business that transports food for sale to retail and wholesale establishments and does not perform any food items
If distributor, is food stored on site? Yes No
- Food Manufacturer** - commercial operation that produces, packages, labels, or stores food for human consumption, but primarily does not provide food directly to a consumer. Food is sold to distributors, retailers or restaurants. There may be a small store on site where only the manufacturers products are sold, but the majority of product is sold to other licensed food establishments.
If manufacturer, is there a retail store onsite? Yes No
- Food Store** – a food establishment in which the majority of food sales consist of beverages or multi-serving food products requiring further preparation prior to consumption, examples of food stores include bakeries, grocery stores, convenience stores, coffee shops, liquor stores. Food stores include businesses whose primary business is other than food (book store, pharmacy, etc.), but offer convenience food items.
If Food store, are you considered a convenience food store (see definition below)? Yes No
A convenience food store contains less than 5,000 sq. ft. of retail sales space AND has as its primary business the sale of basic food items and in addition sells household products. Basic food items may include, but are not limited to, milk and dairy products, bread products, prepared sandwiches, frozen entrees, refrigerated food and baby food. Household products may include, but are not limited to, cleaning products, paper products, baby products and pet food
- School** – educational institution including elementary, middle and high schools. Check type:
 - Satellite Kitchen is a school kitchen with limited food preparation including reheating or holding of cooked food, storage of cold ready-to-eat food items and portioning and serving of bulk requiring no on-site preparation for service
 - Production Kitchen is a school kitchen in which food preparation activities beyond reheating, portioning and hot and cold holding are performed
 - Restaurant is a school kitchen operated by an outside entity or contractor, any school meal program not directly operated by the schools
- Restaurant** – a food establishment in which the majority food sales consist of meals or other items ready for immediate consumption
- Shared Kitchen, Commissary or Base** – a commercial kitchen used for the production of food to be served or sold at another location; a base of operations for a food peddler caterer or seasonal market vendor
- Tavern** – a food establishment in which food sales are limited to beverages, primarily intoxicating beverages

4. Business Type (Continued)

Type of sales (check all that apply, even if it reflects a small percentage of the proposed business)

- Made directly to the general public or end consumer (includes internet sales)
- Made to other food establishments (wholesaler, distributors, retail or restaurants) who will resell your product(s)

What percentage of your planned food sales will be meals versus grocery items?

100 % from meals (ready-to-eat food)

% from grocery items (foods typically requiring preparation before serving, includes typical grocery items, beverages, bakery items and raw produce)

Will customers be able to purchase food through a drive through? Yes No

Will customers be able to purchase food from a self-service salad or food bar? Yes No

Will food be prepared on site and then transported for sale or consumption at another location? Yes No

If yes, check all the reasons why the food will be transported:

- Catering
- Delivery
- Base for Mobile Food Peddler
- Base for temporary or seasonal food stand

Other-Describe:

5. ISSUANCE OF LICENSE

Will any alcohol or intoxicating beverages be sold at the establishment? Yes No

If yes, what type of license do you have or will you be applying for?

- Class A fermented malt beverage license
- Class B fermented malt beverage licenses
- Class C wine license
- Class A liquor license
- Class B liquor license

If yes, if your food license is approved prior to the alcohol license, when would you like the food license issued?

- immediately so you can open your food business
- at the same time as the alcohol license

6. AFFIRMATION OF UNDERSTANDING – PERMIT NEEDED TO OPERATE

Read and initial each item confirming your understanding:

- KA I understand that an inspection and sign off by the Health Department is required before my permit may be issued.
- KA. I understand that the Health Department will review my application and will update the application based on what is observed during my onsite inspection. My representative onsite at the time of inspection must have the authority to approve corrections to my application.
- KA. I understand that an occupancy permit must be issued and an inspection may be required from the Department of Neighborhood Services before my permit may be issued.
- KA. I understand that the Department of Neighborhood Services must sign off on my application with the License Division before my permit may be issued.
- KA. I understand the local council member must approve or deny my request before my permit is eligible to be issued. If denied, I understand that I may appeal and be scheduled for a hearing before the License Committee of the Common Council.
- KA. I understand that the License Division must have proof of payment for the associated permit fees before my permit may be issued.
- KA. I understand that all of the above must be complete before my permit is eligible to be issued.
- KA. I understand that the license for which I am applying must be issued and posted in my business premises prior to opening for business.

I, Kevin Anderson, will not operate my food business, until the permit has been issued and posted in the establishment.
Name of Applicant

Signature of Applicant:

Kevin Anderson

Date:

7-8-15



Sidewalk Dining Facility Supplemental Application

ccl-side1 6/1/15

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

Premises Address: 1703-05 w Hopkins Aldermanic District # 6

Business Operations

Check one:
 Currently hold Food/Alcohol license(s) # _____
 Also applying for Food/Alcohol license(s) at this time

Sidewalk Dining Facility will operate from: Start Date March 2016 to End Date Oct.

Will any food prep be done outdoors? No Yes If yes, describe: _____
and also complete the "Request To Modify Food Establishment/Food Operational Plan" and submit with this application

What type of security will be provided? Same as Food or Alcohol Other: _____

Will any sidewalk dining facility improvements be physically attached to public structures? No Yes
If yes, describe: _____

Property Owner

Check one:
 Applicant owns the property
 Property Owner's Information/Signature:
Name: _____ Phone Number: _____
Address: _____
Property Owner's Signature (if other than the applicant) _____

Detailed Floor Plan

Please read all instructions before preparing the plan.

- You are required to submit a separate floor plan showing only the sidewalk café, including the information below, in addition to any floor plan required as part of an alcohol beverage or food dealer license application.
- If you do not submit a sidewalk dining facility permit at the same time as your food or alcohol license application and you wish to add them later you will be subject to the permanent extension fee and a new application process.
- The plan must be filed on 8 1/2 x 11 inch size paper. Handwritten plans are acceptable. Plans do not need to be architectural drawings and need not be to scale.

THE PLAN MUST INCLUDE ALL OF THE FOLLOWING:

- Dimensions of the sidewalk seating area (length and width)
- Total square feet of the sidewalk seating area (length X width)
- The curb line, property line and building face
- All items (tables, chairs, benches, planters, server stations, umbrellas, heating lamps, other furniture or fixtures.)
- Mark the North point (N ↑) on each page
- The current date
- Business name (Legal entity and trade name), premise address, premise phone number
- Agent's name (contact person) and phone number

Additional Forms Needed

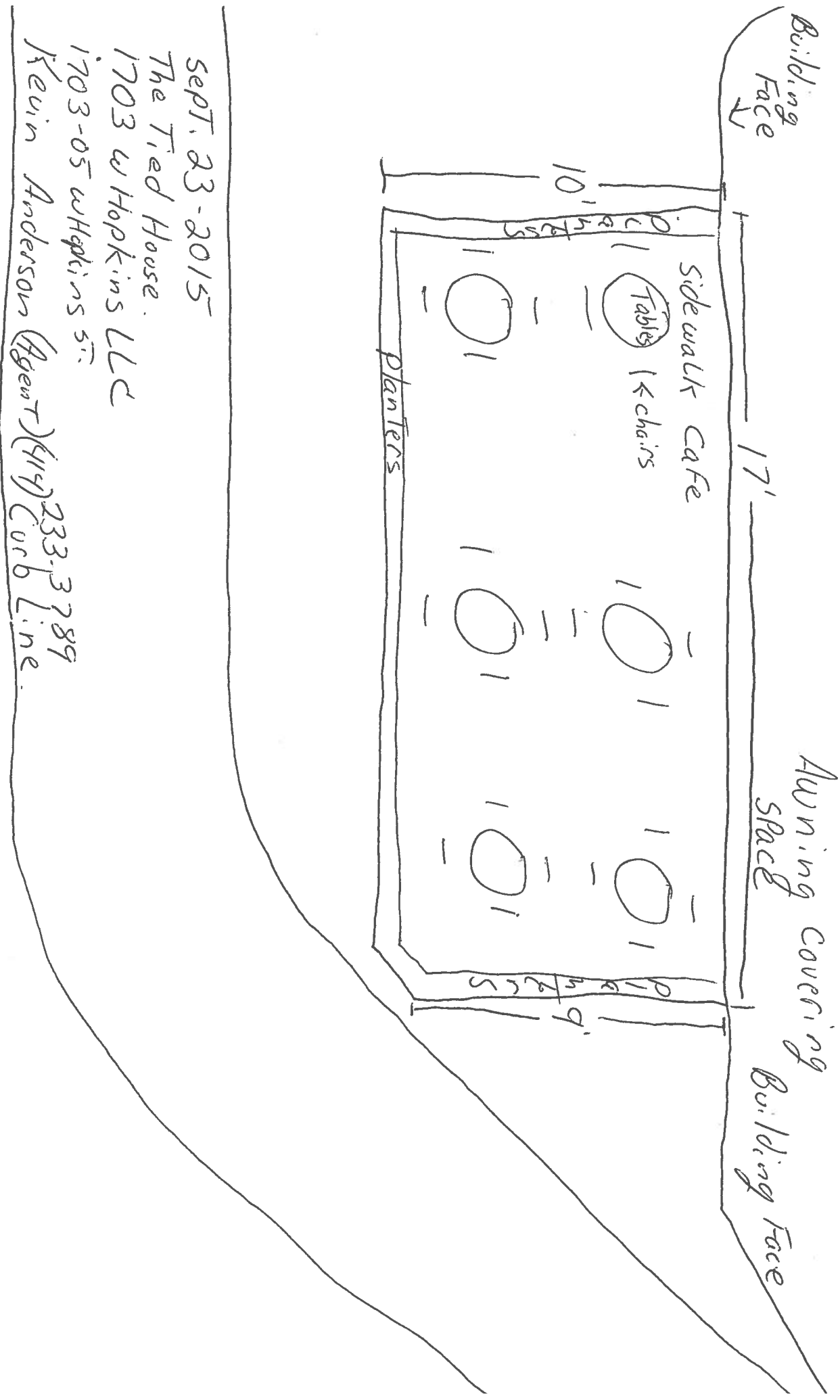
- Business License Application (ccl-busapp) - only one copy needed if submitting with other license applications
- Business Plan of Operation (ccl-busplan) - only one copy needed if submitting with other license applications
- Sidewalk Dining Facility Certificate of Insurance (ccl-side4)
- Request To Modify Food Establishment/Food Operational Plan (if food prep outdoors)

Office Use Only:

Initials JL Filed 9-23-15 App # 218072 Floor Plan Recd Insurance Recd
Food Prep Outdoors No Yes If yes, Modification Form Recd and Queue to HD



TOTAL Sq. FT. 170⁵⁰



SEPT. 23-2015

The Tied House.

1703 W Hopkins LLC

1703-05 W Hopkins St.

Kevin Anderson (Agent) (414) 233-3789
Curb Line.

Total Square Feet
 1872' Per Floor
 5616 Total



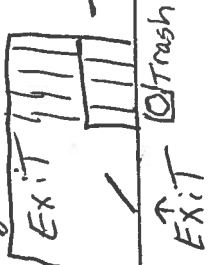
Kevin Anderson Agent For 1703 w Hopkins LLC
 Milwaukee Tied House
 Sept. 14, 2015

1703-05 w Hopkins.

Total Square Feet
1872 'Per Floor
5616 Total



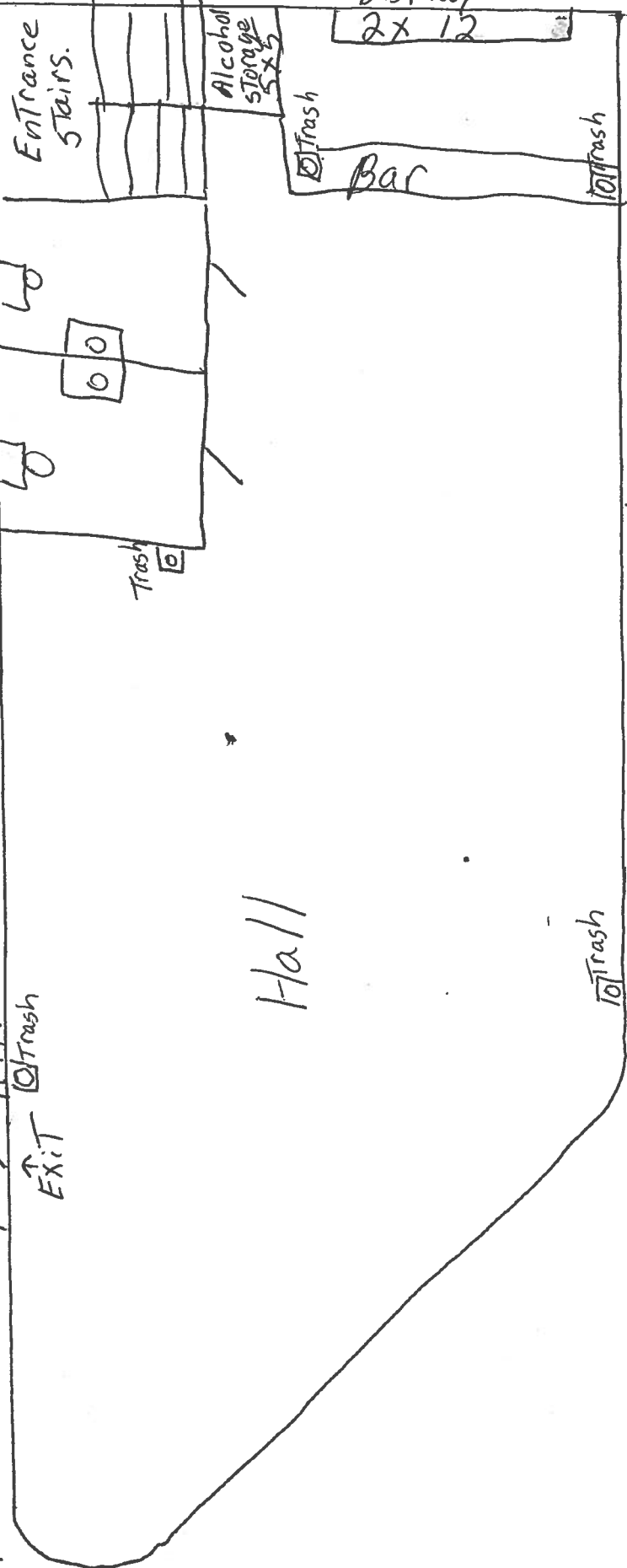
20'
2nd Floor
EXIT



12'

40'

EXIT
↑
Trash



2nd Floor

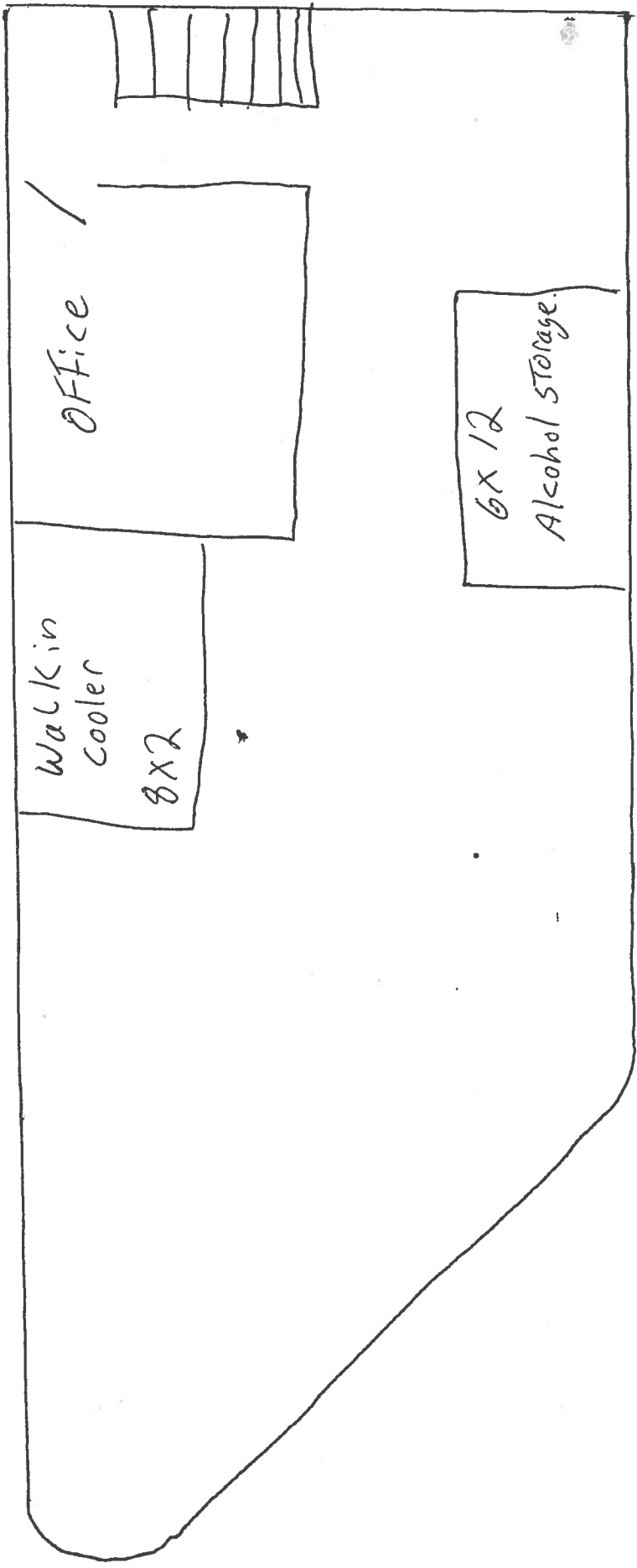
Kevin Anderson Agent For 1703-w Hopkins LLC

Milwaukee Tied House

Sept. 14, 2015

1703-05 w Hopkins.

Total Square Feet
1872' per Floor
5616 Total



Basement

Kevin Anderson Agent For 1703 w Hopkins LLC
Milwaukee Tied House
Sep. 14, 2015
1703-05 w Hopkins.



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

Wednesday, January 20, 2016

COMMITTEE MEETING NOTICE

AD 06

Agnes D Boone

240 N 34th St

Milwaukee, WI 53208

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

Tuesday, January 26, 2016 at 09:45 AM

Regarding: Your Class B Tavern and Public Entertainment Premises License Application Requesting Disc Jockey, Jukebox, 1 Amusement Machine, and 1 Pool Table for "Good Times" at 2978 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: _____

Jason Schunk
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

REDACTED RECORD

*****I REQUEST TO REMAIN ANONYMOUS*****

This letter is concerning an objection to the Milestones Spots Bar at 2978 North Mother Simpson Way. My objection stands to the fact that since this bar has opened there has been nothing but trouble. The patrons hang outside of the bar most nights, on the corner, sitting on top of cars in the street.

to the sounds of gunshots.

patrons before entering the facility, hide
guns on numerous occasions.

a loud boom

at the back of the bar and one guy with what
looked like an AK-47 gun, facing west on Chambers street and firing the gun, as others stood
and watched. 911 and the police came, but the guys were gone by the time they arrived.

They guy had stored his weapons underneath car

some guys come out of the bar. I noticed
one of the guys had a gun in his hand.

shots were fired.

Another night some people had exited the bar, just hanging out on the corner. During this time a
female and male begin to exchange words because she was not interested in him. The argument

became very heated. She proceeded to call someone on her telephone and tell them to come handle the guy she was into it with. She then gets into her as and as she drive away, the guy stood on the west side of Mother Simpson Way and fired about five shots into the vehicle as it drove off. Police came, but by the time of their arrival, the guy had pulled off.

Another night, it was bar closing time and the people had the streets blocked with cars, no one could get through. During this time, three girls were proceeding to jump on a guy for calling one of the girls out of their name. People got out of their cars to watch the fight. Therefore, those who wanted to move, could not move. A guy in a red Camry went to his car got a gun and fired three shots into the air. Others followed suit with their guns. The people begin to scatters, abruptly taking off in their cars. Police arrived and cleared the rest of the traffic and to perform their duties regarding gunfire.

Another night apparently there was an incident that went on inside the bar that carried outside. One guy standing on Mother Simpson Way facing north was firing a gun at a guy who standing at the intersection of Chambers and North 10th Street facing south. One Guy was apprehended by the police. The guys that was arrested friends returned to look for the gun,

They were there looking for the gun for some time, nothing was found. But this is ongoing things with people hiding their weapons on this property.

Another night the bar had closed and the people were gather outside, not going to their cars to depart from the area. Traffic was once again, at a standstill due to many blocking the streets, playing their loud music and sitting on the side of their cars. Some decided to fire off a gun and others begin to follow suit. A police detective car just so happened to be on the corner and there was a guy standing . that decided to fire his gun into the air (didn't see the detectives I guess). They quickly apprehended him and also retrieved the gun.

there is loud music almost every single night, especially on Mondays, Thursdays, Fridays and Saturday when they have a Disc Jockey. They keep the rear door open to the fenced in backyard.

Also the patrons gather in the backyard to make drug purchases and use drugs. The marijuana as it reeks the drugs being sold, cocaine being sniffed. even seen someone perform a sexual act, but stopped before someone would catch them. There are many underage people that gather at this establishment.

This establishment has brought unnecessary trouble to a neighborhood that is usually quiet at night. The neighborhood is filled with many children and all these activities propose a greater risk to children being hurt or an innocent bystander.

The business operators do not seem to care about this areas because usually when the trouble arises, they leave for fear of the police coming into the bar, or they stay in with the lights out until they think the coast is clear. I totally objet to ANY future business for this place. The drugs and guns are not a good thing when it comes to a community trying to revive itself from years of downfall.

******* I REQUEST TO REMAIN ANONYMOUS*******

Case : 101001360344 [Close Case](#)

Client Info:

Name:

Address:

Phone Number:

Email:

Confidential?: Y

Issue: City Clerk License Object/Support Web

Date Submitted: 11/07/2015

Status: open

Date Completed:

Address: 2978 N MOTHER SIMPSON WA

Due Date: 12/07/2015 [Edit](#)

Reason for request:

Object to License| The establishment has cause too much gunfire in this area. There is gunfire every weekend. There are drugs being sold and used on the property. There are underage patrons. Loud music, and loitering.

Case notes: [Add Note](#)

1. entered address: 2978 N MOTHER SIMPSON WA

Staff comments:

Agent Created Case

REDACTED RECORD

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

Case : 101001356917 [Close Case](#)

Client Info:

Name:

Address:

Phone Number:

Email:

Confidential?: Y

Issue: City Clerk License Object/Support Web

Status: open

Address: 2978 N MOTHER SIMPSON WA

REDACTED RECORD

Date Submitted: 11/03/2015

Date Completed:

Due Date: 12/03/2015 [Edit](#)

Reason for request:

Object to License| This Bar is a real danger in the neighborhood. Almost every Friday and Saturday night shootings are very common. After closing hours people are all over the street making loud noise and playing music

Case notes: [Add Note](#)

1. entered address: 2978 N MOTHER SIMPSON WA

Staff comments:

Agent Created Case

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

Case : 101001356778 [Close Case](#)

Client Info:

Name:

Address:

Phone Number:

Email:

Confidential?: Y

Issue: City Clerk License Object/Support Web

Status: open

Address: 2978 N MOTHER SIMPSON WA

REDACTED RECORD

Date Submitted: 11/03/2015

Date Completed:

Due Date: 12/03/2015 [Edit](#)

Reason for request:

Object to License| Bar is open all the time at all hours of the day. After hours customers will not leave and then fights break out. Far to many under age people are in and out of the bar.

Case notes: [Add Note](#)

1. entered address: 2978 N MOTHER SIMPSON WA

Staff comments:

Agent Created Case

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

I object to granting a
License.

2015 NOV - 4 P 3:40

REDACTED RECORD

Noise Nuisance
TRASH & Bottles on property
Gunshots fired weekly
Fighting in street at Closing
Loitering After Hours
POLICE called several incidents ^{FOR}

MILWAUKEE POLICE DEPARTMENT LICENSING

CRIMINAL RECORD/ORDINANCE VIOLATION/INCIDENTS SYNOPSIS

DATE: 11/03/2015

LICENSE TYPE: BTAVN

NEW:

RENEWAL:

No. 201452

Application Date: 11/03/2015

License Location: 2978 North Mother Simson Way

Business Name: Milestone Sports Bar

Licensee/Applicant: Williams, Laron
(Last Name, First Name, MI)

Date of Birth: 07/30/1963

Home Address: 3043 North 5th Street

City: Milwaukee

State: WI **Zip Code:** 53212

Home Phone: 414-544-1282

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 09/26/2015 at 2:20am Milwaukee police responded to a Shottspotter complaint in the area of North 10th Street and West Chambers Street. While investigating that complaint, officers discovered several patrons inside Milestone Sports Bar. The applicant was cited.

Charge	1:	Class B Premises Allow Patron After Hours
	2:	Licensed Premises-Immediate Police Entry Required
Finding	1:	Due for arraignment 11/12/2015 8:30am branch 2
	2:	Due for arraignment 11/12/2015 8:30am branch 2
Sentence	1:	
	2:	
Date	:	
Case	1:	15058533
	2:	15058534

This document was produced 11/03/2015 solely as previous
premise

Date: 12/07/15
Officer: L.Lammers

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

Name of Premise: Milestone Sports Bar
Address: 2978 N Mother Simpson Way
Phone:

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

Licensee/Agent: Agnes Boone
Home Address: 240 N 34th St
City State Zip: Milwaukee, WI 53208
Phone: 414-339-5948
Email:

Preferred contact: Mrs. Boone

Location currently open: YES NO

Projected open date: after license approval

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

Hours of Operation: Sun: 6 am - close 24 hours Y N
Mon:
Tue:
Wed:
Thu:
Fri:
Sat:

Premise Type: Tavern/Bar
 Restaurant
 Other:

Licenses currently held:

- Alcohol: Yes No Class: #:
Tobacco: Yes No #:
Food: Yes No #:
Occupancy: Yes No #:
Other: Yes No Type: #:
Other: Yes No Type: #:

Who is your alcohol distributor? unknown

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 bus stop? Yes No
7. Is there a bus shelter? Yes No N/A
8. Street parking Yes No
9. Is there a parking lot Yes No
10. Is the parking lot clean? Yes No N/A
11. Is the parking lot well lit? Yes No N/A
12. Valet Parking Yes No
 - a. Will this lot have a guard? Yes No N/A
 - b. Will this lot have cameras? Yes No N/A
13. Are there areas where a person could conceal themselves Yes No
14. Is there exterior lighting? Yes No. Does it appears to be adequate Yes No
15. Exterior Payphone? Yes No
16. Are there No Loitering Signs posted? Yes No
17. Are there exterior security cameras Yes No How Many: 3
18. Are the address numbers prominently displayed and easy to see Yes No

Exterior Comments:

Camera Survey:

19. Does this location have security cameras? Yes No
20. Are they in working order? Yes No
21. What format are the cameras?
 - a. Color Yes No

- b. Digital Yes No
- c. VCR Yes No
- d. Recorded Yes No

- 22. How long is footage stored for later viewing: unknown
- 23. Are there exterior cameras Yes No How many: 3
- 24. Are there interior cameras Yes No How many: 1
- 25. Do all employees know how to retrieve recorded digital images/footage? Yes No
- 26. Cameras located in parking lot Yes No N/A How many

Camera Survey Comments:

Interior Survey:

- 27. What is the planned/posted capacity 80
- 28. What is the minimum number of employees that will be on premise 4
- 29. 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
- 30. Is the interior of the location neat and clean? Yes No
- 31. Does an interior camera face the entrance/exit? Yes No
- 32. Are emergency and non-emergency numbers posted near the phone? Yes No
- 33. 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

Interior Comments:

Security

- 34. How many security personnel are going to be employed: 1 N/A
- 35. How will they be deployed: Interior yes Exterior N/A
- 36. What days will they be deployed Mon Tue Wed Thu Fri Sat Sun ALL
- 37. Will the security be managed by business or contracted
- 38. Will they be armed Yes No N/A
- 39. What type of security measures will be used: N/A
 - Wanding/metal detector
 - ID Scanner
 - Dress Code
 - Cover Charge
 - Age restriction
 - Other
- 40. When at capacity, how will the overflow crowd be managed? security
- 41. Will a guard monitor the overflow crowd at all times? Yes No

Security Comments:

ADDITIONAL COMMENTS/RECOMMENDATIONS:

DRAFT DRAFT DRAFT

This supplemental report is written by P.O. Laurel Lammers, assigned to District Five as the Community Liaison Officer.

On Monday, December 07, 2015 at 4 pm, I met with Agnes Boone regarding her liquor license application for the tavern located at 2978 N Mother Simpson Way. This survey was conducted at that location. P.O. Walker did accompany me for this survey.

location is already open, but under a different licensee we did inform Mrs. Boone that she cannot open or operate under the other person's license Mrs Boone stated that her lease for the commercial space will begin once she is approved for her license

Mrs. Boone stated that she is the licensee, and that her daughter and son will be helping to operate the business. She further stated that her son will primarily be security for the business, and will work mostly on the weekends. She did state that he will not be armed for now.

Mrs Boone does not have a distributor, so PO Walker did explain to her that she must purchase her alcohol through a licensed distributor and he also advised that she keep all of her invoices Mrs. Boone does not currently know about the camera system that is in place. We did advise her that all employees should know how to retrieve footage and that ideally the footage should be stored for at least 30 days.

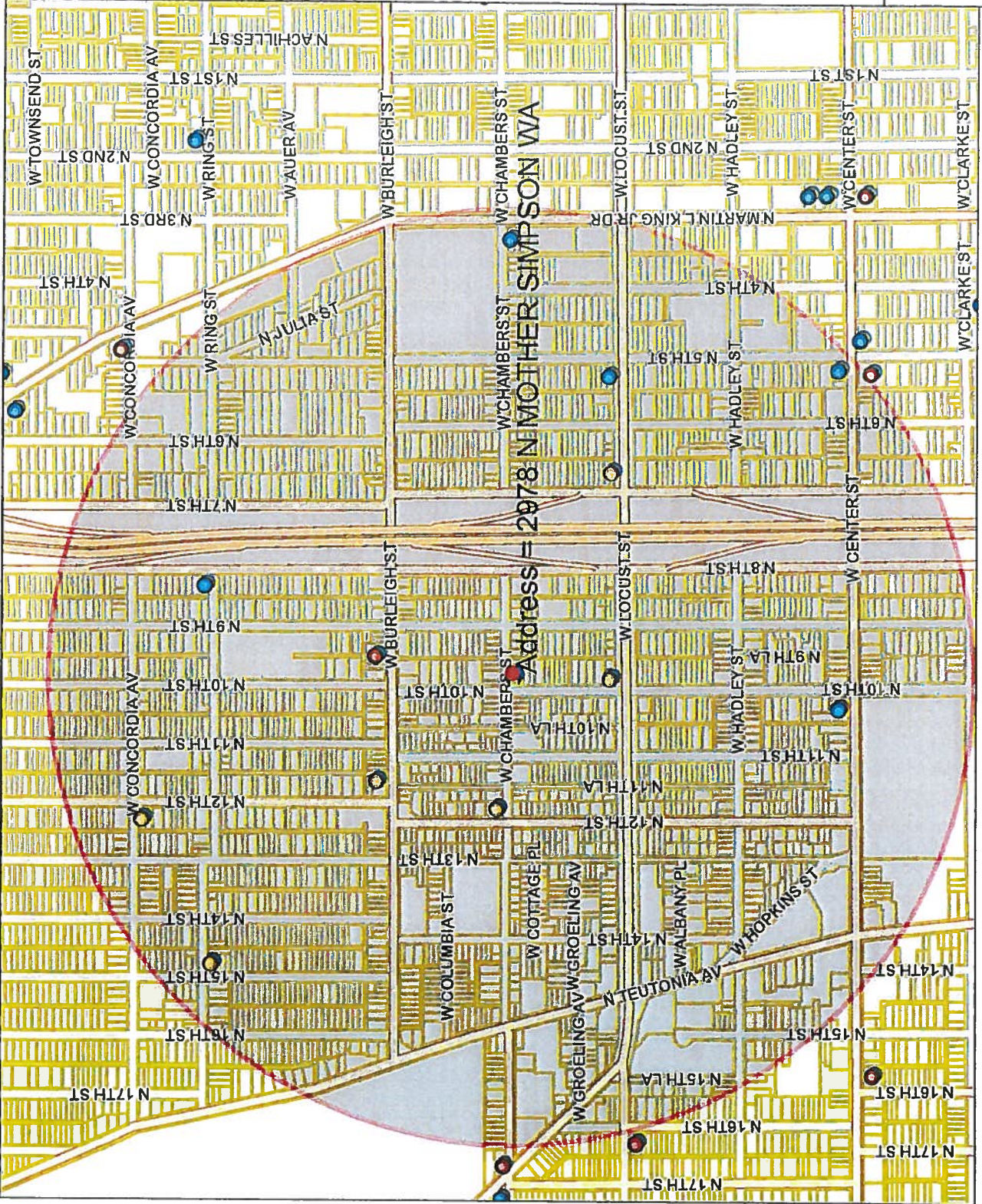
P.O. Walker did highlight the importance of staying within capacity and how important it is to be involved with the actual operations of the bar.

There is currently a pool table inside of the tavern. Mrs. Boone stated that she will not run leagues right now. We did advise her that she may want to get a public entertainment license if she wanted to have live music or DJ's.

We also referred Mrs. Boone to connect with other succesful bar owners, such as Best Friendz Klubhouse and Skybox Sports Lounge.

Alcohol License Concentration for 2978 N Mother Simpson Way

City of Milwaukee, Wisconsin



- Legend -

- City limits
- Parcels
- Freeways
- Exit ramps
- Entry ramps
- Ramps
- Major streets
- Streets
- Waterways
- 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 Establishments Within a .5 Mile Radius Centered on 2978 N Mother Simpson Way on 10/30/2015



Department of Administration - ITMD



Map Scale: 1 : 9,594

© City of Milwaukee, Wisconsin
Map Milwaukee: Property Information
Disclaimer
10/30/2015



Wednesday, January 20, 2016

Licenses Committee Notice of Hearing

Boston & Boston Milestone LL
C/O Shirley Ragland
3522 W LINDEN PI
Milwaukee, WI 53208

Date: 1/26/2016
Time: 09:45 AM
Location: Room 301-B, Third Floor, City Hall

The Licenses Committee will consider the following license application:

Class B Tavern and Public Entertainment Premises License Applications
Requesting Disc Jockey, Jukebox, 1 Amusement Machine, and 1 Pool Table
Agnes D Boone
Good Times at 2978 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, January 20, 2016



Notice of Public Hearing

BOONE, Agnes D

Good Times at 2978 N Mother Simpson WA

Class B Tavern and Public Entertainment Premises License Applications Requesting Disc Jockey, Jukebox, 1 Amusement Machine, and 1 Pool Table

Tuesday, January 26, 2016 at 9:45 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 1/26/2016 at 9:45 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.

RESIDENT	MAIL ADDRESS	CITY AND ZIP CODE
CURRENT RESIDENT	1001 W CHAMBERS ST	MILWAUKEE, WI 53206-2706
CURRENT RESIDENT	1007 W CHAMBERS ST	MILWAUKEE, WI 53206-2706
CURRENT RESIDENT	1008 W CHAMBERS ST	MILWAUKEE, WI 53206-2705
CURRENT RESIDENT	2940 N MOTHER SIMPSON WAY	MILWAUKEE, WI 53206-3249
CURRENT RESIDENT	2940A N MOTHER SIMPSON WAY	MILWAUKEE, WI 53206-3249
CURRENT RESIDENT	2943 N 9TH ST	MILWAUKEE, WI 53206-3217
CURRENT RESIDENT	2945 N MOTHER SIMPSON WAY	MILWAUKEE, WI 53206-3263
CURRENT RESIDENT	2946 N MOTHER SIMPSON WAY	MILWAUKEE, WI 53206-3249
CURRENT RESIDENT	2948 N MOTHER SIMPSON WAY	MILWAUKEE, WI 53206-3249
CURRENT RESIDENT	2949 N MOTHER SIMPSON WAY	MILWAUKEE, WI 53206-3263
CURRENT RESIDENT	2949A N MOTHER SIMPSON WAY	MILWAUKEE, WI 53206-3263
CURRENT RESIDENT	2957 N 9TH ST	MILWAUKEE, WI 53206-3217
CURRENT RESIDENT	2958 N MOTHER SIMPSON WAY	MILWAUKEE, WI 53206-3249
CURRENT RESIDENT	2959 N 9TH ST	MILWAUKEE, WI 53206-3217
CURRENT RESIDENT	2959 N MOTHER SIMPSON WAY	MILWAUKEE, WI 53206-3263
CURRENT RESIDENT	2964 N MOTHER SIMPSON WAY	MILWAUKEE, WI 53206-3249
CURRENT RESIDENT	2965 N 9TH ST	MILWAUKEE, WI 53206-3217
CURRENT RESIDENT	2965 N MOTHER SIMPSON WAY	MILWAUKEE, WI 53206-3263
CURRENT RESIDENT	2965A N MOTHER SIMPSON WAY	MILWAUKEE, WI 53206-3263
CURRENT RESIDENT	2968 N MOTHER SIMPSON WAY	MILWAUKEE, WI 53206-3249
CURRENT RESIDENT	2972 N MOTHER SIMPSON WAY	MILWAUKEE, WI 53206-3249
CURRENT RESIDENT	2972A N MOTHER SIMPSON WAY	MILWAUKEE, WI 53206-3249
CURRENT RESIDENT	3014 N 10TH LN	MILWAUKEE, WI 53206-2703
CURRENT RESIDENT	3015 N 9TH ST	MILWAUKEE, WI 53206-3219
CURRENT RESIDENT	3019 N 9TH ST	MILWAUKEE, WI 53206-3219
CURRENT RESIDENT	3021 N 9TH ST	MILWAUKEE, WI 53206-3219
CURRENT RESIDENT	3022 N 10TH LN	MILWAUKEE, WI 53206-2703
CURRENT RESIDENT	3024 N 10TH ST	MILWAUKEE, WI 53206-3228
CURRENT RESIDENT	3024A N 10TH ST	MILWAUKEE, WI 53206-3228
CURRENT RESIDENT	3024B N 10TH ST	MILWAUKEE, WI 53206-3228
CURRENT RESIDENT	3024C N 10TH ST	MILWAUKEE, WI 53206-3228
CURRENT RESIDENT	3025 N 9TH ST	MILWAUKEE, WI 53206-3219
CURRENT RESIDENT	3027 N 10TH ST	MILWAUKEE, WI 53206-3229
CURRENT RESIDENT	906 W CHAMBERS ST	MILWAUKEE, WI 53206-3232
CURRENT RESIDENT	908 W CHAMBERS ST	MILWAUKEE, WI 53206-3232
CURRENT RESIDENT	909 W CHAMBERS ST	MILWAUKEE, WI 53206-3233
CURRENT RESIDENT	910 W CHAMBERS ST	MILWAUKEE, WI 53206-3232
CURRENT RESIDENT	911 W CHAMBERS ST	MILWAUKEE, WI 53206-3233
CURRENT RESIDENT	912 W CHAMBERS ST	MILWAUKEE, WI 53206-3232
CURRENT RESIDENT	914 W CHAMBERS ST	MILWAUKEE, WI 53206-3232
CURRENT RESIDENT	916 W CHAMBERS ST	MILWAUKEE, WI 53206-3232
CURRENT RESIDENT	922 W CHAMBERS ST	MILWAUKEE, WI 53206-3232
CURRENT RESIDENT	923 W CHAMBERS ST	MILWAUKEE, WI 53206-3233
CURRENT RESIDENT	925 W CHAMBERS ST	MILWAUKEE, WI 53206-3233
CURRENT RESIDENT	926 W CHAMBERS ST	MILWAUKEE, WI 53206-3232
CURRENT RESIDENT	927 W CHAMBERS ST	MILWAUKEE, WI 53206-3233
CURRENT RESIDENT	932 W CHAMBERS ST	MILWAUKEE, WI 53206-3232
CURRENT RESIDENT	932A W CHAMBERS ST	MILWAUKEE, WI 53206-3232
CURRENT RESIDENT	934 W CHAMBERS ST	MILWAUKEE, WI 53206-3232

Total Records: 50

Radius: 250.0 feet and Center of Circle: 2978 N Mother Simpson WA



APPLICATION AMENDMENT

OFFICE OF THE CITY CLERK LICENSE DIVISION
200 E. WELLS ST. ROOM 105, MILWAUKEE, WI 53202
(414) 286-2238 EMAIL: LICENSE@MILWAUKEE.GOV

Date: 1-5-2016

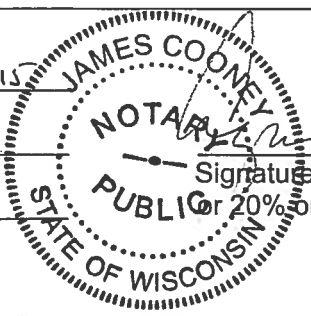
To the License Division of the City of Milwaukee:

I, Agnes D. Boone, wish to amend my answer(s) on the application for a Class B license at 2978 N. Mother Simpson Way

by adding or amending the following information (complete only those sections being amended):

- 1. Answer to Question(s) #... should be:
2. Agent should be (full legal name): Also complete 3, 4, 5 & 6
3. Date of birth should be:
4. Home address should be (include city/state/zip):
5. Home phone number should be (include area code):
6. Driver's License Number/State ID Number should be:
7. Corporation/LLC name should be (full legal name):
8. Business name should be: Good Times
9. Business address should be (include city/state/zip):
10. Business phone number should be (include area code):
11. Premises description should be:
12. Location where vehicle will be parked should be (include city/state/zip):
13. Age Distinction should be (for Class B Taverns only):
14. Other:

Subscribed and sworn to before me this 5th day of January 20 15
Notary Public - State of Wisconsin
My Commission expires 3-6-16
Notary Seal must be affixed



Signature of Sole Proprietor, Partner, Agent or 20% or more Shareholder
Agnes D. Boone

Office Use Only:
Application #: 220741 Date Received/Entered: 1/5/16 Initials: JAC
Date LC Advised LIU: NS: Health: Initials:



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:

A tavern that sells liquor & has a jukebox.

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

2. Business Operations

- a. Proposed Opening Date: As soon as license is approved, hopefully Dec 1st - 2015.
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: Liquor
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: backyard/patio
g. Number of Garbage Cans: Inside: 6 Locations: 1 in womens room, 1 in mens room, 3 behind bar, 1 in hall
Outside: 6 Locations: 1 at front entrance & 2 at E/w side of building
3-in backyard.
h. Is a crowd control barrier used? No Yes If yes, describe: Security guards
i. Describe sanitation facilities (restrooms): Women's room with toilet & sink & garbage cans.
Name of solid waste contractor: Advanced Disposal Waste Management Other: _____

Mens room has urinal toilet sink & garbage cans

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? 2

What are their responsibilities? Search customers for weapons upon entrance & Id verification

Is security equipment used? No Yes If yes, describe Security cameras & monitor

List their licensing, certification, or training credentials _____

Will there be security cameras? No Yes If yes, where? inside & outside perimeter

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

6. Percentage of Sales (must total 100%)

Alcohol <u>100</u> %	Food <u>0</u> %	Secondhand Merchandise <u>0</u> %	Precious Metals & Gems <u>0</u> %
Entertainment <u>0</u> %	Cigarettes <u>0</u> %	Personal Services (such as tattoo, body piercing, salon, tailor, tanning, etc.) <u>0</u> %	Other <u>0</u> % Describe: _____
Pawnbroker Activity <u>0</u> %	Salvaged Materials <u>0</u> % (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
 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 80 (Call the Milwaukee Development Center at 414-286-8211 if you have questions.)

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: Chambers

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

h. Describe Premises Structure: Single Story Multi-Story - # of Stories 2 Other: _____

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

j. Building Owner Name: Shirley Ragland Phone Number: 414-595-1110

Business Owner Address: 3522 W. Linden Place Milw, WI .53208

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	6 am	2 am	1-99	21 and up	None under 21
Monday	6 am	2 am	↓	↓	↓
Tuesday	6 am	2 am			
Wednesday	6 am	2 am			
Thursday	6 am	2 am			
Friday	6 am	2 ³⁰ am			
Saturday	6 am	2 ³⁰ am			

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)

Shirley Ragland
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: <u>Milestone Sports Bar</u>
Premise Address: <u>2978 N. Mother Simpson Way</u>
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? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
"Service Bar Only" Designation
If applying for Class B or C license, are you applying for "Service Bar Only"? <input checked="" type="checkbox"/> No <input type="checkbox"/> 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? <input checked="" type="checkbox"/> No <input type="checkbox"/> 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? <input type="checkbox"/> No <input checked="" type="checkbox"/> 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? <input checked="" type="checkbox"/> No <input type="checkbox"/> 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? <input checked="" type="checkbox"/> No <input type="checkbox"/> 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? <input type="checkbox"/> Own <input checked="" type="checkbox"/> Lease
b) Who owns the fixtures (for example, coolers, etc.)? <u>Landlord</u>
c) Are you purchasing the stock and/or fixtures? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, amount paid \$ _____
d) Total amount paid for business \$ <u>0</u>
e) Total amount paid for goodwill of the business \$ <u>0</u>
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? <input checked="" type="checkbox"/> No <input type="checkbox"/> 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 12/1/15 Ends 12/1/16
- b) Monthly rental \$ 1500.00
- 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)? 1 year
- 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 30th day of OCTOBER, 20 15

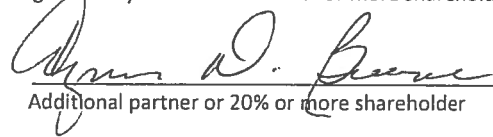


(Clerk/Notary Public)

My Commission Expires MARCH 22, 2019

*Notary Seal must be affixed.

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

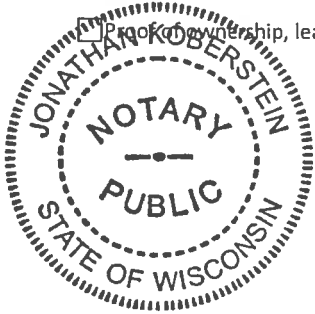


Additional partner or 20% or more shareholder

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 e-mail address: license@milwaukee.gov

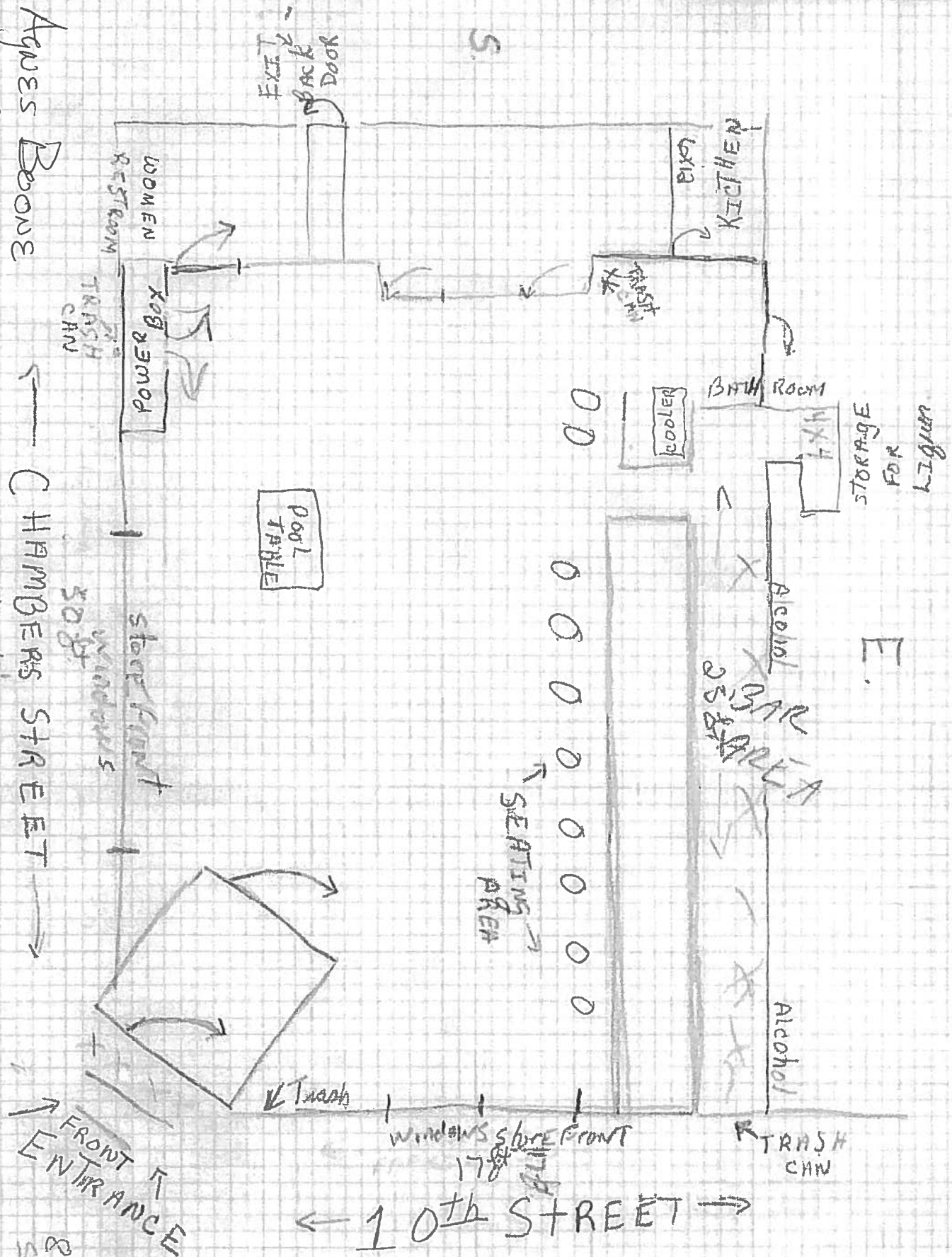
TYPES OF ENTERTAINMENT (CHECK ALL THAT APPLY)			
<input type="checkbox"/> Instrumental Musicians <input type="checkbox"/> Disc Jockey <input type="checkbox"/> Adult Entertainment/ Strippers/Erotic Dance <input checked="" type="checkbox"/> Jukebox <input type="checkbox"/> Motion Pictures How many? _____ <input checked="" type="checkbox"/> Other: _____	<input type="checkbox"/> Bands <input type="checkbox"/> Magic Shows <input type="checkbox"/> Wrestling <input type="checkbox"/> Karaoke <input checked="" type="checkbox"/> Amusement Machines – How many? <u>1</u>	<input type="checkbox"/> Battle of the Bands <input type="checkbox"/> Poetry Readings <input type="checkbox"/> Patron Contests <input type="checkbox"/> Bowling Alley How many? _____ <input type="checkbox"/> Concerts Approx. # per year? _____	<input type="checkbox"/> Comedy Acts <input type="checkbox"/> Dancing by Performers <input type="checkbox"/> Patrons Dancing <input checked="" type="checkbox"/> Pool Tables How many? <u>1</u> <input type="checkbox"/> Theatrical Performances Approx. # per year? _____
WILL PROMOTERS EVER BE USED FOR ANY OF THE ENTERTAINMENT?			
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, describe: _____			
LEGAL CAPACITY OF PREMISES			
<u>30</u> (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.			
WILL SOUND AMPLIFICATION EVER BE USED?			
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, describe: _____			
DECLARATIONS, ACKNOWLEDGEMENTS, & DISCLOSURES			
Read <u>And Initial</u> Each Item Confirming Your Understanding:			
1	<u>AB</u>	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.	
2	<u>AB</u>	I agree to inform the City Clerk within 30 days of any substantial changes in the information supplied in this application.	
3	<u>AB</u>	I understand that I shall not willfully refuse to provide the services offered under this license, or add charges or require deposits not required of the general public because of race, color, sex, religion, national origin or ancestry, age, handicap, lawful source of income, marital status, sexual orientation, gender identity or expression, familial status or the fact that a person is now or has been a member of the military service, whether dressed in uniform or not, and shall not seek such information as a condition of employment, or penalize any employee or discriminate in the selection of personnel for training or promotion on the basis of such information.	
4	<u>AB</u>	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.	
NOTARIZED SIGNATURES OF APPLICANTS			
SUBSCRIBED AND SWORN TO BEFORE ME			
This <u>30th</u> day of <u>OCTOBER</u> , 20 <u>15</u>			
 _____ (Clerk/Notary Public) My Commission Expires <u>MARCH 22, 2019</u>		 _____ Agent/Owner/Partner	
		Additional Owner/Partner _____	
*Notary Seal must be affixed.			

Office Use Only: Initials: _____ Filed: _____ App: _____
 Check if only PEP (must be heard w/in 60 days) Granted _____ License # _____

Agnes Beone
Sole Proprietor

MILESTONE SPORTS BAR

2978 N. 10th Street
10/30/2015



MILESTONE SPORTS BAR

850 SAFT =



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

Wednesday, January 20, 2016

COMMITTEE MEETING NOTICE

Ms. Shirley E Ragland

3522 W LINDEN PI

Milwaukee, WI 53208

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

Tuesday, January 26, 2016 at 09:45 AM

Regarding: Your Class B Manager's License Application.

There is a possibility that your application may be denied for one or more of the following reasons: See attached police report. Please bring your letter from the State of Wisconsin Department of Corrections.

**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: _____

**Jason Schunk
License Division Manager**

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

MILWAUKEE POLICE DEPARTMENT LICENSING

CRIMINAL RECORD/ORDINANCE VIOLATION/INCIDENTS SYNOPSIS

DATE: 01/07/16

LICENSE TYPE: BMANAGER

NEW:

RENEWAL:

No. 223950

Application Date:

License Location:

Business Name:

Licensee/Applicant: Ragland, Shirley E
(Last Name, First Name, MI)

Date of Birth: 05/07/75

Home Address: 3522 W Linden Place

City: Milwaukee

State: WI **Zip Code:** 53208

Home Phone:

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

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

1. On 12/04/12, applicant was convicted of OWI in Milwaukee County. Her license was revoked for 3 years + 6 months.
2. On 11/24/14, applicant was charged with Possess w/Intent-Cocaine and Possession of THC in Outagamie County.

Charge:	Possess w/Intent-Cocaine Possession of THC
Finding:	Dismissed but Read-In Guilty
Sentence:	Fined
Date:	04/01/15
Case:	14CF000994

3. On 04/21/15, applicant was charged with Possession of Electric Weapon and Prostitution-Non-marital Sexual Intercourse in Winnebago County.

Charge: Possession of Electric Weapon
Prostitution-Non-marital Sexual Intercourse
Finding: Guilty
Dismissed-but Read-In
Sentence: 1 year Probation, Sent Withheld
Date: 10/26/15
Case: 15CF00017

Applicant is currently on probation for incident # 3. P/P emailed.



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

Thursday, January 14, 2016

COMMITTEE MEETING NOTICE

AD 06


DHILLON, Baljinder S, Agent
Fateh Petroleum Inc
3476 N Holton St

Milwaukee, WI 53212

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

Tuesday, January 26, 2016 at 09:45 AM

Regarding: Your Extended Hours Establishments Renewal Application as agent for "Fateh Petroleum Inc" for "Fateh Petroleum" at 3476 N HOLTON St.

There is a possibility that your application may be denied for  or more of the following reasons: Neighborhood Objections to operating the business during the hours of 12:00 AM and 5:00 AM without the required licenses and/or conduct which is detrimental to the health, safety, and welfare of the neighborhood. See attached police report and/or written correspondence regarding this application. Please be advised the public will be able to provide information to the committee in person. The committee will receive and consider evidence regarding the above mentioned criteria.

**Notice for applicants with
warrants or unpaid fines:**

Proof of warrant satisfaction or payment of fines must be submitted at the hearing on the above date and time. Failure to comply with this requirement may result in a delay of the granting/denial of your application.

Failure to appear at this meeting may result in the denial of your license. Individual applicants must appear only in person or by an attorney. Corporate or Limited Liability applicants must appear only by the agent designated on the application or by an attorney. Partnership applicants must appear by a partner listed on the application or by an attorney. If you wish to do so and at your own expense, you may be accompanied by an attorney of your choosing to represent you at this hearing.

You will be given an opportunity to speak on behalf of the application and to respond and challenge any charges or reasons given for the denial. No petitions can be accepted by the committee, unless the people who signed the petition are present at the committee hearing and willing to testify. You may present witnesses under oath and you may also confront and cross-examine opposing witnesses under oath. If you have difficulty with the English language, you should bring an interpreter with you, at your expense, so that you can answer questions and participate in your hearing.

You may examine the application file at this office during regular business hours prior to the hearing date. Inquiries regarding this matter may be directed to the person whose signature appears below.

Limited parking for persons attending meetings 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 OW CZARSKI, CITY CLERK

BY:

Jason Schunk
License Division Manager

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

MILWAUKEE POLICE DEPARTMENT LICENSING

CRIMINAL RECORD/ORDINANCE VIOLATION/INCIDENTS SYNOPSIS

DATE: 12/16/2015

LICENSE TYPE: EXTENDED HOURS

NEW:

RENEWAL:

No. 223135

Application Date: 12/15/2015

License Location: 3476 North Holton Street

Business Name: Fateh Petroleum

Licensee/Applicant: Dhillon, Baljinder S.
(Last Name, First Name, MI)

Date of Birth: 04/15/1977

Home Address: 3159 West Bridge Street

City: Greenfield

State: WI **Zip Code:** 53221

Home Phone: 414-442-9445

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 11/25/2015 a 17 year old, working in conjunction with Milwaukee police, was able to purchase two grape Swisher Sweets cigars from the cashier at 3476 North Holton Street (Hometown Quick Mart). The applicant was given information on enrolling in the Municipal Citation Diversion Program.

MILWAUKEE POLICE DEPARTMENT
REPORT OF INCIDENTS INVOLVING LICENSED PERSONS OR PREMISES

TO: Derrick HARRIS

Business Name: Hometown Quick Mart
Address of Licensed Premises: 3476 N. Holton St.
Business Phone: 414-303-5719

District: 5

Type of License: Cigarette and Tobacco

[X] Violation / [] Incident #

Date of Incident: 11/25/15

Licensee or Manager on premises at time of violation / incident? [X] Yes [] No

Licensee cooperative? [X] Yes [] No (if no, explain in narrative section)

Licensee Notified by Officer: P.O. Dean DRAJKOWSKI

Date: 11/25/15

Time: 1752

Licensee or Agent's Name: DHILLON, Baljinder S.
Home Address: 3159 W. Bridge St.

Date of Birth: 04-15-77
Home Phone:

Co-Licensee Name:
Home Address:
Class S License Number:

Date of Birth:
Home Phone:

Bartender Name:
Home Address:
Class D License Number:

Date of Birth:
Home Phone:

Licensed Person / Public Pass. Vehicle, etc.:
Home Address:
Class D License Number:

Date of Birth:
Home Phone:

VIOLATION/INCIDENT - DESCRIBE FACTS AND CIRCUMSTANCES IN NARRATIVE SECTION

Name of Person Cited:
Citation Number:

Violation & Ord. / Statue No.:

Date of Birth:
Court Date:

Name of Person Cited:
Citation Number:

Violation & Ord. / Statue No.:

Date of Birth:
Court Date:

Name of Person Cited:
Citation Number:

Violation & Ord. / Statue No.:

Date of Birth:
Court Date:

Name of Person Cited:
Citation Number:

Violation & Ord. / Statue No.:

Date of Birth:
Court Date:

Name of Person Cited:
Citation Number:

Violation & Ord. / Statue No.:

Date of Birth:
Court Date:

Investigating Officer: P.O. Dean DRAJKOWSKI

District / Bureau: 27

Date: 11/30/15

[Signature]
Commanding Officer

12-05-15
Date

DISPOSITION - FOR LICENSING ONLY

Table with 5 columns: Citation No., Case Number, Disposition, Judge, Date. Includes text: LICENSE INVESTIGATION UNIT, Received 12-05-15, Referred.

By [Signature]

PA-33E Narrative

This report was written by P.O. Dean DRAJKOWSKI assigned to the License Unit day shift.

On Wednesday, November 25, 2015, while assigned to Squad 2741, I was assigned to the Wisconsin WINS Youth Tobacco Initiative, which checks area vendors for age compliance tobacco purchases. I was working with Dejah BROWN, B/F, 07-30-98, who is 17 years old and not of legal age to purchase tobacco. A photo of BROWN was taken at the beginning of the assignment for identification.

At about 5:52 pm, BROWN entered Hometown Quick Mart located at 3476 N. Holton St. and purchased a pack of two grape Swisher Sweets cigars for \$0.99 cents. BROWN provided a description of the cashier that sold her the tobacco. I entered the store and identified the cashier as Sukhpal SINGH, A/M, 06-10-88. SINGH admitted to selling tobacco to BROWN and apologized. SINGH did not check her id.

The licensee for Hometown Quick Mart was Baljinder S. DHILLON, A/M, 04-15-77. DHILLON was provided the notice to enroll in the Municipal Citation Diversion Program called "MARTS".

RESIDENT	MAIL ADDRESS	CITY AND ZIP CODE
CURRENT RESIDENT	3431 N BOOTH ST	MILWAUKEE, WI 53212-1601
CURRENT RESIDENT	3435 N BOOTH ST	MILWAUKEE, WI 53212-1601
CURRENT RESIDENT	3435 N HOLTON ST	MILWAUKEE, WI 53212-1653
CURRENT RESIDENT	3435A N BOOTH ST	MILWAUKEE, WI 53212-1601
CURRENT RESIDENT	3435A N HOLTON ST	MILWAUKEE, WI 53212-1653
CURRENT RESIDENT	3437 N HOLTON ST	MILWAUKEE, WI 53212-1653
CURRENT RESIDENT	3437A N HOLTON ST	MILWAUKEE, WI 53212-1653
CURRENT RESIDENT	3439 N BOOTH ST	MILWAUKEE, WI 53212-1601
CURRENT RESIDENT	3439A N BOOTH ST	MILWAUKEE, WI 53212-1601
CURRENT RESIDENT	3440 N BOOTH ST	MILWAUKEE, WI 53212-1602
CURRENT RESIDENT	3441 N HOLTON ST	MILWAUKEE, WI 53212-1653
CURRENT RESIDENT	3442 N BOOTH ST	MILWAUKEE, WI 53212-1602
CURRENT RESIDENT	3445 N BOOTH ST	MILWAUKEE, WI 53212-1601
CURRENT RESIDENT	3445A N BOOTH ST	MILWAUKEE, WI 53212-1601
CURRENT RESIDENT	3446 N BOOTH ST	MILWAUKEE, WI 53212-1602
CURRENT RESIDENT	3446A N BOOTH ST	MILWAUKEE, WI 53212-1602
CURRENT RESIDENT	3448 N BOOTH ST	MILWAUKEE, WI 53212-1602
CURRENT RESIDENT	3449 N BOOTH ST	MILWAUKEE, WI 53212-1601
CURRENT RESIDENT	3449 N HOLTON ST	MILWAUKEE, WI 53212-1653
CURRENT RESIDENT	3449A N HOLTON ST	MILWAUKEE, WI 53212-1653
CURRENT RESIDENT	3450 N BOOTH ST	MILWAUKEE, WI 53212-1602
CURRENT RESIDENT	3451 N BOOTH ST	MILWAUKEE, WI 53212-1601
CURRENT RESIDENT	3453 N BOOTH ST	MILWAUKEE, WI 53212-1601
CURRENT RESIDENT	3453A N BOOTH ST	MILWAUKEE, WI 53212-1601
CURRENT RESIDENT	3456 N BOOTH ST	MILWAUKEE, WI 53212-1602
CURRENT RESIDENT	3456 N HOLTON ST	MILWAUKEE, WI 53212-1654
CURRENT RESIDENT	3456A N BOOTH ST	MILWAUKEE, WI 53212-1602
CURRENT RESIDENT	3456A N HOLTON ST	MILWAUKEE, WI 53212-1654
CURRENT RESIDENT	3460 N BOOTH ST	MILWAUKEE, WI 53212-1602
CURRENT RESIDENT	3460 N HOLTON ST	MILWAUKEE, WI 53212-1654
CURRENT RESIDENT	3460A N HOLTON ST	MILWAUKEE, WI 53212-1654
CURRENT RESIDENT	3463 N BOOTH ST	MILWAUKEE, WI 53212-1601
CURRENT RESIDENT	3463A N BOOTH ST	MILWAUKEE, WI 53212-1601
CURRENT RESIDENT	3463B N BOOTH ST	MILWAUKEE, WI 53212-1601
CURRENT RESIDENT	3463C N BOOTH ST	MILWAUKEE, WI 53212-1601
CURRENT RESIDENT	409 E KEEFE AVE	MILWAUKEE, WI 53212-1609
CURRENT RESIDENT	409A E KEEFE AVE	MILWAUKEE, WI 53212-1609
CURRENT RESIDENT	417 E KEEFE AVE	MILWAUKEE, WI 53212-1609
CURRENT RESIDENT	421 E KEEFE AVE	MILWAUKEE, WI 53212-1609
CURRENT RESIDENT	425 E KEEFE AVE	MILWAUKEE, WI 53212-1609
CURRENT RESIDENT	425 E KEEFE AVE A	MILWAUKEE, WI 53212-1609
CURRENT RESIDENT	601 E KEEFE AVE	MILWAUKEE, WI 53212-1612
CURRENT RESIDENT	605 E KEEFE AVE	MILWAUKEE, WI 53212-1612
CURRENT RESIDENT	609 E KEEFE AVE	MILWAUKEE, WI 53212-1612

Total Records: 45

Radius: 250.0 feet and Center of Circle: 3476 N Holton ST



Thursday, January 14, 2016



Notice of Public Hearing

DHILLON, Baljinder S, Agent
Fateh Petroleum at 3476 N HOLTON St
Extended Hours Establishments Renewal Application

Tuesday, January 26, 2016 at 9:45 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 1/26/2016 at 9:45 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.



**EXTENDED HOURS ESTABLISHMENT
RENEWAL LICENSE SUPPLEMENTAL
APPLICATION & PLAN OF OPERATION**

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

Current License # 24HRS 197615 Fateh Petroleum Inc 3476 N HOLTON ST

PRO-RATED RENEWAL FEE = \$ 206.25 to Align with Food Dealer License on 1/31/2017

SECTION I LICENSES, OCCUPANCY & PARKING

What type of business is operated at this location? (check all that apply) Convenience Store Filling Station
 Personal Service Establishment Recording Studio Restaurant, Sit-Down Restaurant, Fast-Food/Carry Out

What other types of licenses or permits do you, or will you, hold at this location? (check all that apply)
 Occupancy Permit Gas Station Cigarette Food Class "B" Tavern Other: _____

RESTAURANTS ONLY: - N/A -
Legal Occupancy Limit/Capacity ▶ _____

RESTAURANTS & PERSONAL SERVICE ESTABLISHMENTS ONLY: - N/A -
Number of Off-Street Parking Places ▶ _____

SECTION II HOURS OF OPERATION

Are there any changes to the current hours of operation (as listed on your current license) or number of customers expected each day?
 NO If NO, skip this section and go to Section III
 YES If YES, provide all proposed operating hours below. If closed on a certain day of the week, write "closed."
 Check here if proposed change of hours of operation is to be applied to a Food License

DAY OF THE WEEK	Opening Time (include AM/PM)	Closing Time (include AM/PM)	Number of customers expected each day
Sunday			
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			

SECTION III PLANS FOR SECURITY, LITTER & NOISE

How is security provided at the premise?
 Security Cameras Alarm System Other: _____

Who is responsible for keeping the grounds clean of litter and debris?
 Licensee Building Owner Employees Hired Maintenance Other: _____

How are the grounds kept clean of litter and debris?
 Sweep Pressure Wash Pick Up Litter Garbage Cans Outside Other: _____

How often are the grounds cleaned of litter and debris? Daily Weekly Other: _____

How are noise issues prevented or addressed?
 Security Call police Signs posted Manager approaches customer(s) Other: _____

I agree to have all licenses I hold at this location aligned to expire on the same day. X BSW
Signature of Licensee