



CITY OF MILWAUKEE
OFFICE OF THE CITY CLERK

Tuesday, April 27, 2021

COMMITTEE MEETING NOTICE

AD 05

BANSAL, Bharat, Agent
New Sentry, LLC
11373 W Peregrine WA

Greenfield, WI 53228

You are requested to attend a virtual hearing to be held on:

Tuesday, May 04, 2021 at 08:45 AM

Regarding: Your Class A Malt & Class A Liquor License Application as agent for "New Sentry, LLC" for "Sentry Foods" at 9210 W Lisbon Av.

This meeting will be held via GoToMeeting. Please see the enclosed best practices document for further instructions. The access code is <https://global.gotomeeting.com/join/974577157>. If you wish to call in, please call +1 (312) 757-3121 and use Access Code: 974-577-157.

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 attend this meeting may result in the denial of your license. Individual applicants and partnership applicants must attend or attend by an attorney. The agent or attorney for corporate or limited liability applicants must attend. 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 attend the virtual hearing and are 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 request an interpreter attend the meeting with you, at your expense, so that you can answer questions and participate in your hearing.

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

If you have questions regarding this meeting, please contact the staff assistant, Molly Kuether-Steele at (414) 286-2775 or molly.kuether-steele@milwaukee.gov.

Date: 4/15/2021

Officer: Bowie Buchner

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

Name of Business: Sentry Foods

Address: 9210 W Lisbon Av

Phone: 414-461-5305

Owner: Bharat Bansal

Owner address: 11373 W Peregrine Way

City State Zip: Greenfield, WI 53228

Owner Phone: 414-630-4946

Owner email: bharatbansal1033@gmail.com

Manager: Click here to enter text.

Home Address: Click here to enter text.

City State Zip: Click here to enter text.

Phone: Click here to enter text.

Email: Click here to enter text.

Preferred contact: Bharat Bansal

Location currently open: YES NO

Projected open date: [Click here to enter text.](#)

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

Hours of Operation: Sun: 6:00A.M. – 9:00P.M. 24 hours Y N

Mon: 6:00A.M. – 9:00P.M.

Tue: 6:00A.M. – 9:00P.M.

Wed: 6:00A.M. – 9:00P.M.

Thu: 6:00A.M. – 9:00P.M.

Fri: 6:00A.M. – 9:00P.M.

Sat: 6:00A.M. – 9:00P.M.

Premise Type: Liquor Store
Convenience Store
Other:

Licenses currently held:

Alcohol: Yes No Class: A #: AIQML 321858

Tobacco: Yes No #: [Click here to enter text.](#)

Food: Yes No #: [Click here to enter text.](#)

Extended Hours: Yes No #: [Click here to enter text.](#)

Secondhand Dealer: Yes No Type:[Click here to enter text.](#) #: [Click here to enter text.](#)

Other: Yes No Type:[Click here to enter text.](#) #: [Click here to enter text.](#)

Other: Yes No Type: [Click here to enter text.](#) #: [Click here to enter text.](#)

Who is your alcohol distributor? Stated he had numerous vendors, but mainly general beverage and beachwood

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 Click here to enter text.
 - f. Residential
 - g. Other businesses
 - h. Other: Click here to enter text.
3. Can you see from the outside of the location into the interior Yes No
4. Can you see the employees inside of the location from the outside Yes No
5. Are exterior windows free of signage Yes No
6. Is there a parking lot Yes No
7. Is the parking lot clean? Yes No
8. Is the parking lot well lit? Yes No
9. Are there areas where a person could conceal themselves Yes No
10. Is there exterior lighting? Yes No. Does it appears to be adequate Yes No
11. Exterior Payphone? Yes No, inoperable
12. Are there No Loitering Signs posted? Yes No
13. Are the address numbers prominently displayed and easy to see Yes No

Camera Survey:

14. Does this location have security cameras? Yes No

15. Are they in working order? Yes No

16. What format are the cameras?

a. Color Yes No

b. Digital Yes No

c. VCR Yes No

d. Recorded Yes No

17. How long is footage stored for later viewing: 30 days

18. Are there exterior cameras Yes No How many: 16

19. re there interior cameras Yes No How many: 51

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

Interior Survey:

21. 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

22. Is the interior of the location neat and clean? Yes No

23. Does an interior camera face the entrance/exit? Yes No

24. Is there a lockable area that separates employees from customers? Yes No

25. Does the store sell single chore boy? Yes No

26. Does the store sell blunt wraps? Yes No

27. Does the store sell scales? Yes No

28. Does the store sell items that may be used as crack pipes? Yes No

a. Describe item : Click here to enter text.

29. Does the store have an overabundance of sandwich baggies: Yes No

30. Does the owner understand that these items are often used for drug use? Yes No

31. Do the products in the store appear to be new and rotated often? 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

Complete this section if alcohol establishment is a convenience store:

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

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

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

9. Are the camera views obstructed by fixtures or displays? Yes No

10. Is the recorded footage stored for at least 30 days? Yes No

11. Do all store employees know how to record footage from the camera system to media capable of being transferred to police custody? Yes No

12. Are customer entrances/exits made of glass or other transparent material?

Yes No

a. Exception: A store that does not have such doors on August 17, 1994 shall not be required to install such doors until the holder of the store's food dealer license changes.

13. Has the owner and their employees attended the Robbery Prevention Training within 120 days of ownership or employment? Yes No

a. Contact Community Outreach and Education at 935-7836 for schedule.

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

a-1. The store is located in an enclosed shopping structure, enclosed commercial building or hospital. A convenience food store is not in an enclosed structure or building if a customer can enter it directly from the outside.

Does store conform to a-1 Yes No

a-2 The store physically separates employees from customers with a solid partition that bars a person from entering the employee area from the customer area, has a secure lock on the employee side of any door between the employee area and the customer, and conducts all transaction through a service window or similar arrangement.

Does store conform to a-2 Yes No

a. At the commissioner's discretion, a convenience store may be exempted from any or all of the regulations specified in sub 2.

Does this location hold an exemption from the commissioner regarding any of the requirements of Sub 2? Yes No

ADDITIONAL COMMENTS/RECOMMENDATIONS:

Regarding question 20, owner stated that both himself and his GM will be able to retrieve video footage

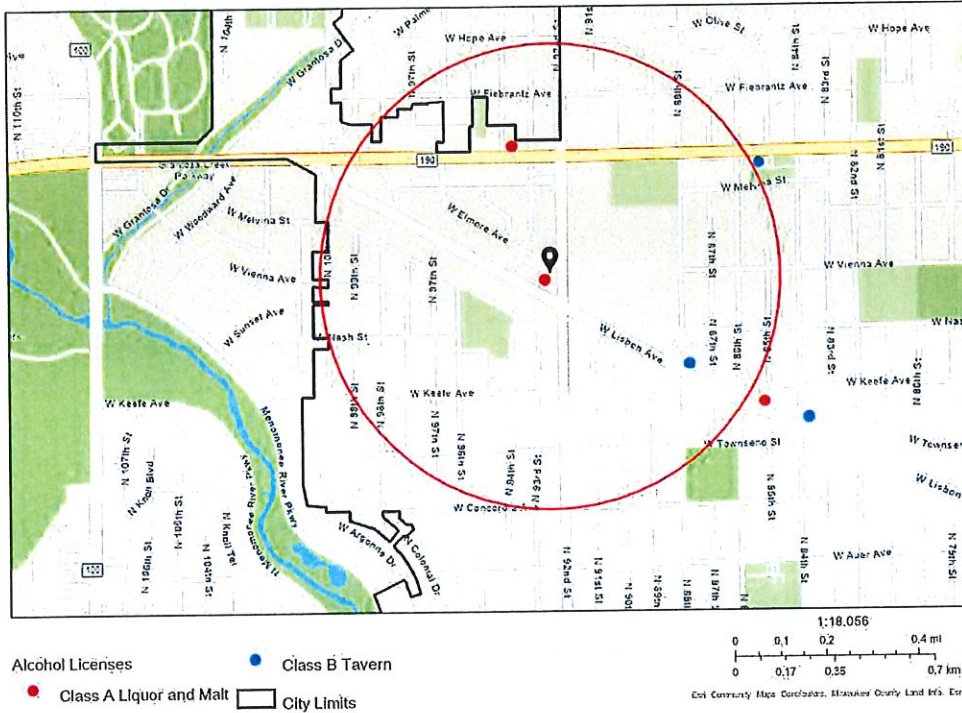


City Concentration Map 9210 W Lisbon Ave

Area of Interest (AOI) Information

Area : 21,862,585.76 ft²

Mar 12 2021 15:15:01 Central Standard Time



9210 W Lisbon Ave

Summary

Name	Count	Area(ft ²)	Length(mi)
Alcohol Licenses	4		

Alcohol Licenses

#	Legal Entity	Trade Name	Licensee	Address	License Type Name	Total Capacity	Expiration Date	Count
1	Champion Chicken 87 LLC	Champion Chicken	AHMAD KADADHA, Agt	8718 W Lisbon AV	Class B Tavern License		7/21/2021, 7:00 PM	1
2	LISBON FOODS, INC	SENTRY FOODS	DOUGLAS A SCHWANZ, Agt	9210 W LISBON AV	Class A Malt & Class A Liquor License		3/18/2021, 7:00 PM	1
3	LISBON FOODS, INC	SENTRY FOODS	DOUGLAS A SCHWANZ, Agt	9210 W LISBON AV	Class A Malt & Class A Liquor License		3/18/2022, 7:00 PM	1
4	SPDK, INC	SUNRISE LIQUOR AND GIFTS	Kamlesh M Patel, Agt	9330 W CAPITOL DR	Class A Malt & Class A Liquor License		9/25/2021, 7:00 PM	1

Establishments within a 0.5 miles radius centered on area of interest.



Tuesday, April 27, 2021

Licenses Committee Notice of Hearing

RICHARD ALLEN
LISBON FOOD INC
W3202 ARCHER Ct
PINE RIVER, WI 54965

The Licenses Committee will consider the following license application:

Class A Malt & Class A Liquor License Application
BANSAL, Bharat, Agent
Sentry Foods at 9210 W Lisbon Av

Date: 5/4/2021

Time: 08:45 AM

Location: The hearing before the Licenses Committee will take place virtually on Tuesday, May 4, 2021. This is a public hearing. Those wishing to view the proceeding are able to do so via the City Channel – Channel 25 on Spectrum Cable – or on the Internet at <http://city.milwaukee.gov/citychannel>. Those wishing to provide oral testimony will be asked to do so by phone or internet and are asked to contact the staff assistant, Molly Kuether-Steele at (414) 286-2775 or molly.kuether-steele@milwaukee.gov for necessary information. Please make such requests no later than one business day prior to the start of the meeting. You are not required to attend the hearing, but please see the information below if you would like to provide testimony

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.





BUSINESS LICENSE PLAN OF OPERATION

ccl-busplan 5/12/2020

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

1. Type of Business

- Applying for: Extended Hours (12AM to 5AM) - If a food establishment, check all that apply: Delivery Drive Thru Dining Room
 Self Service Laundry Massage Establishment Filling Station
 Other (supplemental application for specific license also required)

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

Grocery Store

Do you have any experience operating this type of business? No Yes If yes, explain: managed gas station, convenience store and liquor store for 10+ years

2. Business Operations

- a. Proposed Opening Date: 3/15/2021
- b. Is this premise under construction? No Yes If yes, list estimated completion date: _____
- c. Is this a franchise? No Yes
- d. Is this premises currently licensed? No Yes If yes, list type of license: Food, Beer/Liquor, Cig/tobacco
- e. Is the current licensee operating? No Yes If no, list date closed: _____
- f. Do you have future plans for other businesses, licenses or permits at this location? No Yes
If yes, explain: _____
- g. Have you previously held an Extended Hours License in Milwaukee? No Yes
If yes, list address(es): _____
- h. Are other businesses operating in the same building? No Yes If yes, describe: _____

3. Litter & Noise

- a. How are grounds kept clean? Sweep Pressure Wash Pick Up Litter Other: _____
- b. How often will grounds be cleaned? Daily Weekly As Needed Monthly Other: _____
- c. Grounds cleaned by: Licensee Building Owner Employees Hired Maintenance Other: _____
- d. How are noise issues prevented and/or addressed? Security Manager approaches customer(s) Call Police
 Signs Posted Other: _____
- e. Will a sound amplification system be used? No Yes If yes, describe: _____

4. Smoking & Sanitation

- a. Are there designated outdoor smoking areas? No Yes If yes, describe: _____
- b. Number of Garbage Cans: Inside: 10 Locations: entrance door, cashiers, breakroom, Wash room
Outside: 5 Locations: entrance/exit door
- c. Is a crowd control barrier used? No Yes If yes, describe: _____
- d. How many restrooms are on the premises? 2
- e. Name of solid waste contractor: Advanced Disposal Waste Management Other: _____

5. Security

a. Are there onsite parking spaces? No Yes If yes, how many? 50 and describe the parking security

plan: Security Cameras

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

Security Cameras

c. Will you have security personnel on premise? No Yes If yes, how many? _____ and answer the following:

What are their responsibilities? _____

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

List their licensing, certification, or training credentials _____

d. Will there be security cameras? No Yes If yes, how many? 40 and list locations: _____

30 inside - through out the facility : 10 outside at each corner -

e. Will searches/identification checks be done upon entry? No Yes If yes, describe _____

6. Percentage of Sales (must total 100%)

Alcohol <u>10</u> %	Food <u>70</u> %	Secondhand Merchandise _____ %	Precious Metals & Gems _____ %
Entertainment _____ %	Cigarettes <u>5</u> %	_____ %	_____ %
Pawnbroker Activity _____ %	Salvaged Materials _____ % (such as scrap metal)	Personal Services (such as tattoo, body piercing, salon, tailor, tanning, etc.) _____ %	Other <u>15</u> % Describe: <u>household items</u>

7. Businesses/Licenses on the Premises (check all that apply):

Type 1

- Full Service Restaurant Cafe/Coffee Shop Deli or Fast Food Restaurant Private/Fraternal/Veterans Club
 Night Club Tavern Cocktail Lounge Teen Club
 Banquet Hall Sports Facility Bowling Alley
 Hotel/Motel : Number of Floors: _____ Rooming House: Number of Floors: _____
 Number of Rooms: _____ Number of Rooms: _____

Type 2

- Liquor Store Corner Store Supermarket Convenience Store
 Gas Station Amusement/Phonograph Distributor Recycling, Salvage or Towing
 Used Car Dealer Personal Service Establishment
 (such as tattoo business, hair salon, tailor, etc.) Recording Studio

What other licenses/permits will you hold at this location? (check all that apply)

- Occupancy Permit Cigarette & Tobacco Gas Station Extended Hours Class "B" Tavern Weights & Measures
 Secondhand Dealer Precious Metal & Gem Other: _____

8. Legal Capacity (only if a Type 1 premises in #7 above)

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

9. Premises Description

- a. Identify all area(s) of the premises that will be used in operating this business (include areas used only for storage):
 1st Floor 2nd Floor Basement Storage Patio Beer Garden Sidewalk Café Deck Rooftop
 Other: Describe: _____
- b. Describe Location: Major Thoroughfare Secondary Street Other: _____
- c. Nearest Major Cross Street: Lisbon - 92nd Street
- d. Describe Building: Free Standing Building Strip Mall Other: _____
- e. Describe Premises Structure: Single Story Multi-Story - # of Stories _____ Other: _____
- f. Describe Surrounding Area: Commercial Residential Industrial Other: _____
- g. Building Owner Name: Richard Allen Phone Number: 263-453-6958
 Building Owner Address: 9210 W. Lisbon Ave Milwaukee, WI

10. Hours of Operation & Customers

Will customers be entering the premises? No Yes

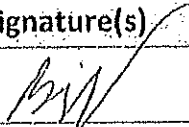
Day of the Week	Proposed Hours of Operation:		Estimated Number of Customers expected each day	Potential Age Range of Customers	Class B Tavern Applicant Only: Age Restriction (If none, write 'None')
	Open Time (include a.m. or p.m.)	Close Time (include a.m. or p.m.)			
Sunday	6 am	9 pm	1000	+18	
Monday	6 am	9 pm	1000	+18	
Tuesday	6 am	9 pm	1000	+18	
Wednesday	6 am	9 pm	1000	+18	
Thursday	6 am	9 pm	1000	+18	
Friday	6 am	9 pm	1000	+18	
Saturday	6 am	9 pm	1000	+18	

An Extended Hours Establishment License is required for any convenience store, filling station, personal service establishment (such as tattoo, body piercing, salon, tailor, tanning, etc.), recording studio or restaurant which is open between the hours of 12:00 a.m. and 5:00 a.m.

Alcohol Establishments Class A: 8:00 am to 9:00 pm Sunday thru Saturday
 Permitted Hours of Operation: Class B: 6:00 am to 2:00 am Sunday thru Thursday, 6:00 am to 2:30 am Friday & Saturday

Entertainment Outdoor Closing Hours: 10:00pm Sunday-Thursday; 12:00am Friday & Saturday; unless a different time, either earlier or later, is established by the Common Council in its approval of the licensee's plan of operation.

11. Signature(s)


 Signature of Sole Proprietor, Partner, or 20% or more Shareholder
 (If there are no 20% or more shareholders, Corporate Officer-print name/title and sign)

 Signature of additional partner or 20% or more shareholder

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



**ALCOHOL BEVERAGE & PUBLIC ENTERTAINMENT PREMISES
SUPPLEMENTAL APPLICATION**

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>New Sentry LHC</u>	
Premise Address: <u>9210 W. Lisbon Ave Milwaukee WI 53222</u>	
Proximity of Premises to Church, School, Daycare Center or Hospital	
Is the building within 300 feet of any church, school, daycare center or hospital? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
"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 employees who serve 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 their 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: _____	
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>Applicant - New Sentry LHC</u>
c) Are you purchasing the stock and/or fixtures?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If yes, amount paid \$ <u>500,000</u>
d) Total amount paid for business	\$ <u>1,100,000</u>
e) Total amount paid for goodwill of the business	\$ <u>600,000</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
Lease Information (New & Transfer Applicants who are leasing the premises only)	
a) Date lease begins	<u>3/15/2021</u> Ends <u>3/15/2031</u>
b) Monthly rental	\$ <u>10,800</u>
c) Do you have an option to renew the lease?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
d) Does your lease allow for assignment to another party without the consent of the owner?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
e) For what length of time have you been guaranteed occupancy (number of years)?	<u>10</u>

Lease Information (Continued)

- 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):

Signature



Signature of Sole Proprietor, Partner or 20% or More Shareholder
(If no 20% or more Shareholder, Corporate Officer - print name/title and sign)

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 premises applicants must submit the following:

- Detailed floor plan
- If a restaurant, copy of the menu



FOOD DEALER LICENSE PLAN OF OPERATION

ccl-foodplan 2/28/19

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: **New Sentry LLC**

Premises Address: **9210 W Lisbon Ave Milwaukee, WI 53222**

SECTION 1 TYPE OF BUSINESS

What will be the majority of your food sales? (check one)

Restaurant Items (meals):

MEALS include, but are not limited to, chicken, ribs, sandwiches, roasted corn, baked potatoes, hot dogs, brats, tacos, nachos w/ cheese and meat, French fries, cooked or deep fried vegetables/fruit, cooked cheese curds, corn dogs, egg rolls, salads.

Retail Items (snacks and beverages):

RETAIL items include, but are not limited to, ice cream/soft serve, lemonade, snow cones, coffee, espresso, cappuccino, tea, fruit juice, smoothies, candy, dispensed soda, fruit cups, bakery, cookies, kettle corn, cotton candy, funnel cakes, fritters, tortilla chips w/ cheese.

Will it be a convenience store? Yes No

A convenience store contains less than 5,000 square feet of retail space and has, as its primary business, the sale of basic food items and in addition, sells household products or is a filling station that sells basic food items and household products.

Bed & Breakfast

Micro Market

All Applicants: Submit a menu or a list of food items that will be sold.

Will any wholesale business be done? No Yes If yes, what percentage of food sales will be wholesale?

Less than 25%

25% or More AND:

Restaurant items (meals) will be sold – Complete this application and also contact DATCP.

NO restaurant items (meals) will be sold - Do NOT complete this application. Contact DATCP only.

SECTION 2 FOOD PROCESSING

Will any food processing be done? No Yes

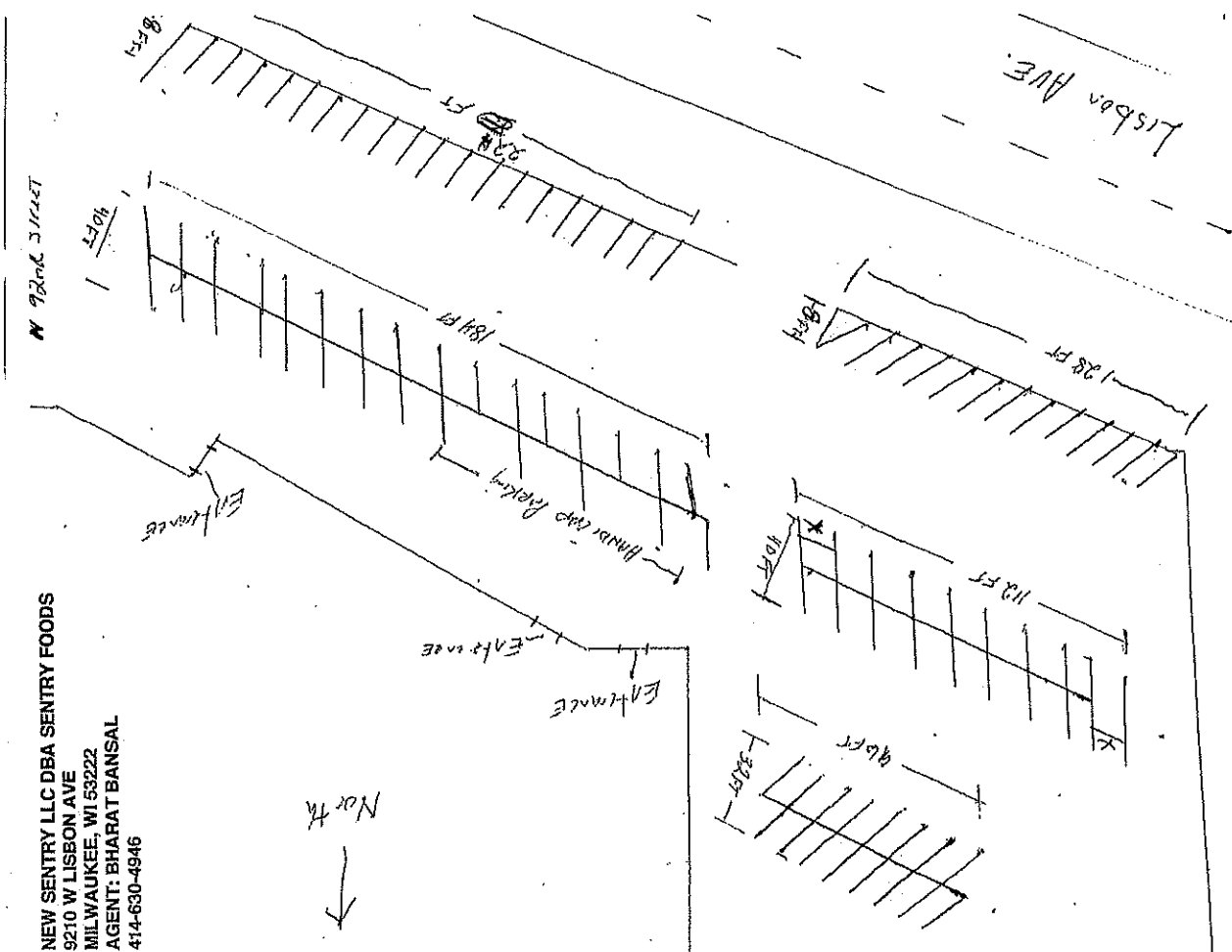
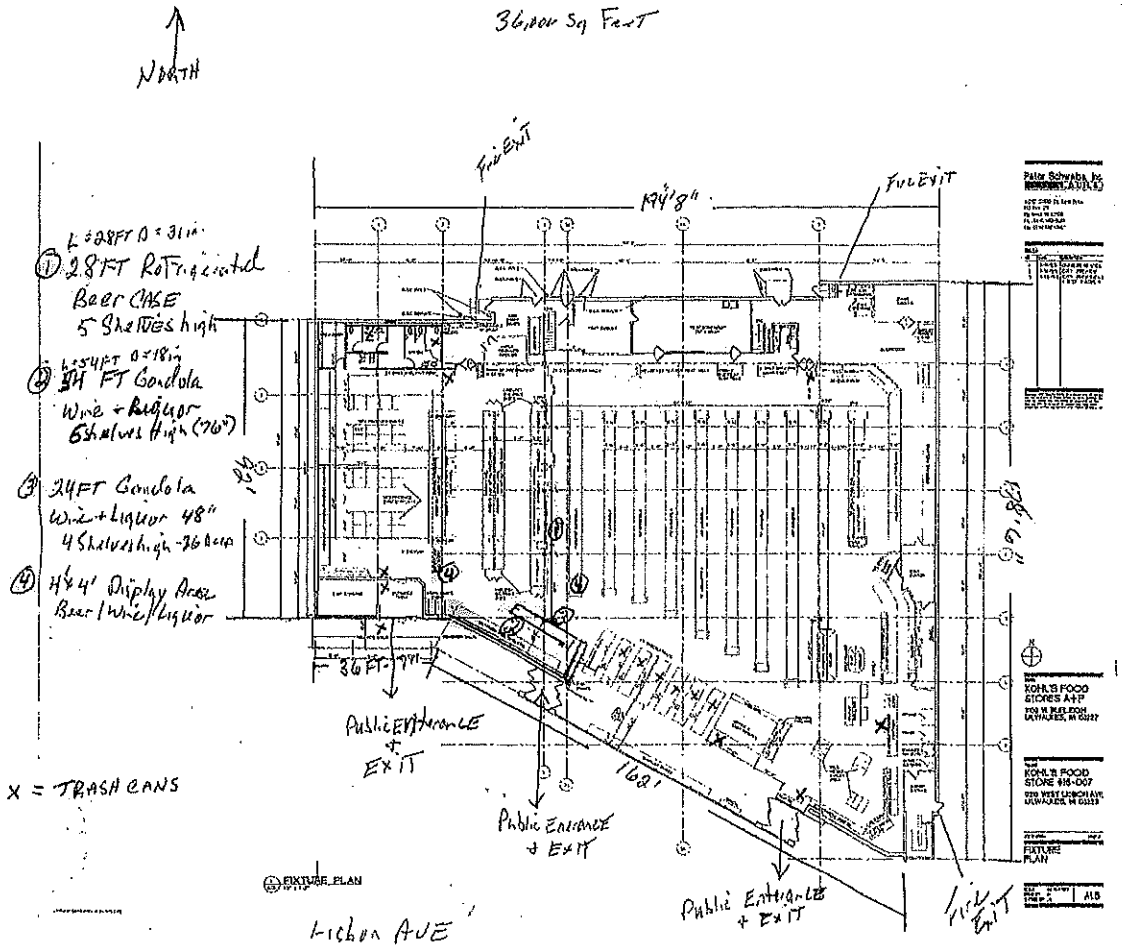
Processing is defined as assembling, grinding, cutting, mixing, baking, coating, stuffing, packing, bottling, grilling, canning, extracting, fermenting, distilling, pickling, freezing, drying, smoking, or packaging.

SECTION 3 FOOD REQUIRING TEMPERATURE CONTROL

Will any food that requires temperature control be sold? No Yes
(Includes dairy products such as milk, cheese, and ice cream, fish, shellfish, meat, poultry)

If yes, list the types of food items: **MILK, MEAT, CHEESE**

NEW SENTRY LLC DBA SENTRY FOODS
 9210 W LISBON AVE
 MILWAUKEE, WI 53222
 AGENT: BHARAT BANSAL 414-630-4946



NEW SENTRY LLC DBA SENTRY FOODS
 9210 W LISBON AVE
 MILWAUKEE, WI 53222
 AGENT: BHARAT BANSAL
 414-630-4946

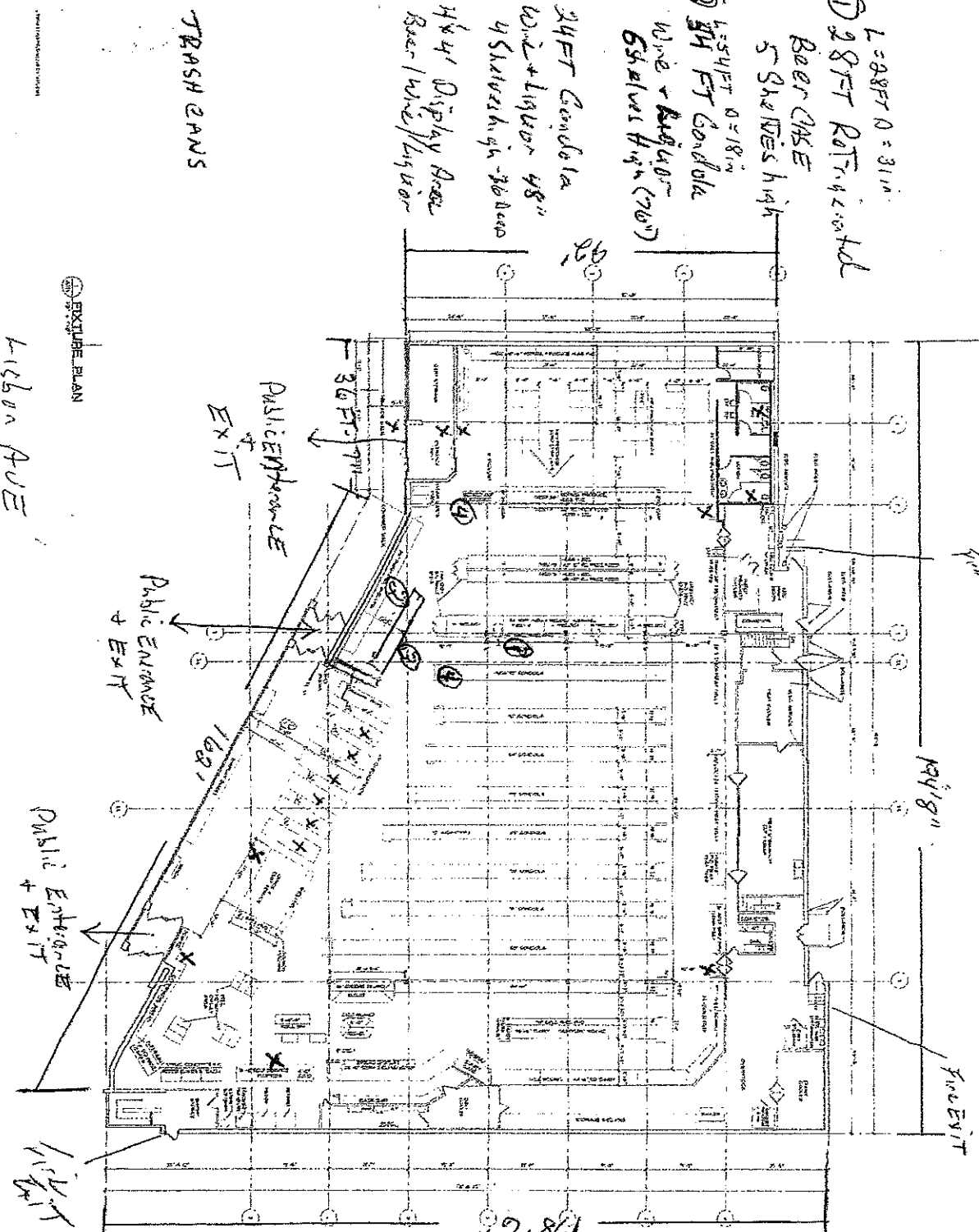
NEW SENTRY LLC DBA SENTRY FOODS
9210 W LISBON AVE
MILWAUKEE, WI 53222
AGENT: BHARAT BANSAL 414-630-4946

NORTH

3600 Sq Feet

X = TRASH CANS

- ① 28 FT Rotational Beer Case 5 Shelves high
- ② 34 FT Gondola Wine + Beverage Shelving (70")
- ③ 24 FT Gondola Wine + liquor 48" 4 Shelves high - 20 deep
- ④ 4x4 Display Area Beer/Wine/Liquor



FIXTURE PLAN

Lisbon Ave

Notes:

- 1. ALL DIMENSIONS ARE IN FEET AND INCHES.
- 2. ALL DIMENSIONS ARE TO THE CENTERLINE UNLESS OTHERWISE NOTED.
- 3. ALL DIMENSIONS ARE TO THE CENTERLINE UNLESS OTHERWISE NOTED.
- 4. ALL DIMENSIONS ARE TO THE CENTERLINE UNLESS OTHERWISE NOTED.
- 5. ALL DIMENSIONS ARE TO THE CENTERLINE UNLESS OTHERWISE NOTED.

Legend:

- = WALL
- = WINDOW
- = DOOR
- = PUBLIC ENTRANCE
- = PUBLIC EXIT
- = TRASH CAN
- = BEER CASE
- = GONDOLA
- = SHELVING
- = DISPLAY AREA

Scale: 1/8" = 1'-0"

Author: Peter Schwanda, Inc.

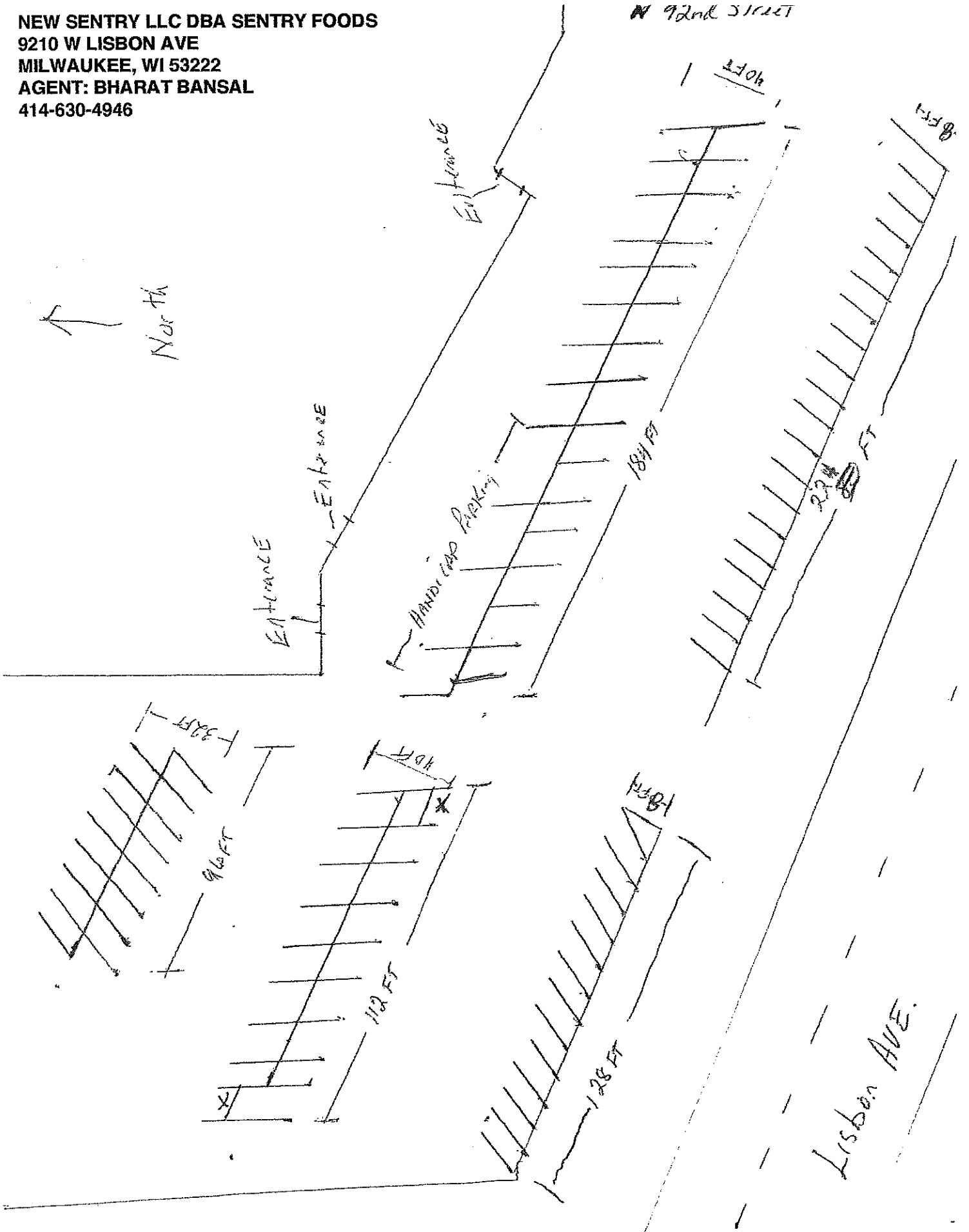
Date: 10/15/2017

Project: NEW SENTRY LLC DBA SENTRY FOODS 9210 W LISBON AVE MILWAUKEE, WI 53222

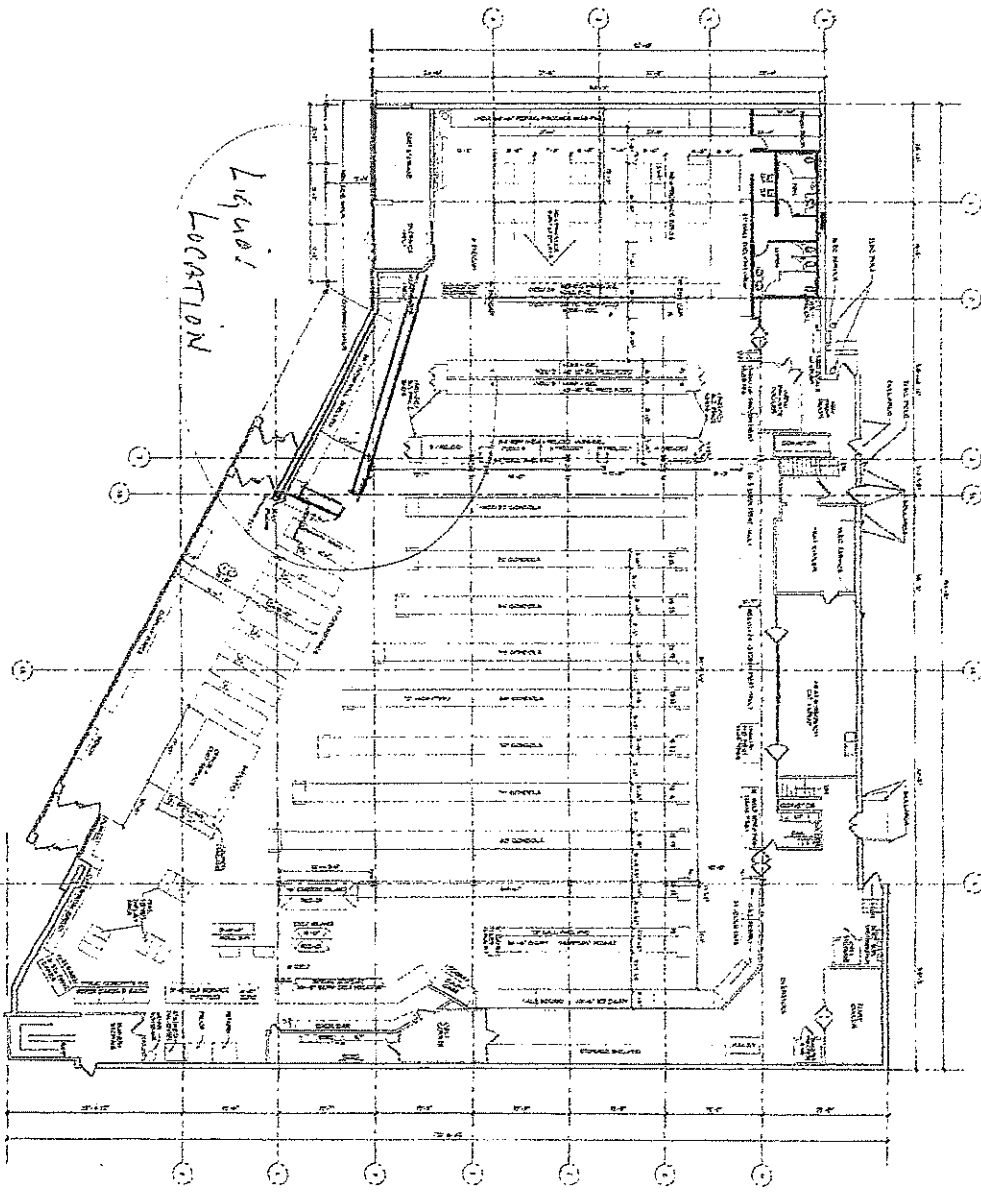
NEW SENTRY LLC DBA SENTRY FOODS
9210 W LISBON AVE
MILWAUKEE, WI 53222
AGENT: BHARAT BANSAL
414-630-4946

N 92nd Street

North
↑



EXISTING PLAN



Peter Schwab, Inc.
 ARCHITECTS
 4001 SOUTH BROADWAY
 SUITE 100
 DENVER, CO 80202

DATE: 11/15/07
 1. EXISTING PLAN
 2. EXISTING PLAN
 3. EXISTING PLAN

KOHL'S FOOD STORES AHP
 1000 W. BROADWAY
 ALHAMBRA, CA 91802

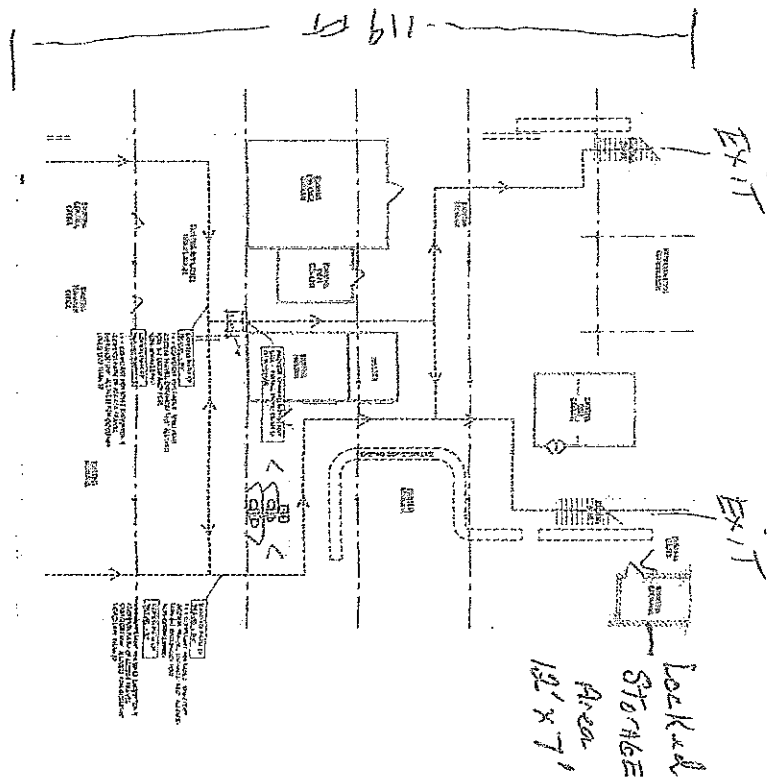
KOHL'S FOOD STORES AHP
 600 WEST LAMAR AVE
 ALHAMBRA, CA 91802

EXISTING PLAN

DATE: 11/15/07
 1. EXISTING PLAN
 2. EXISTING PLAN
 3. EXISTING PLAN

NEW SENTRY LLC DBA SENTRY FOODS
9210 W LISBON AVE
MILWAUKEE, WI 53222
AGENT: BHARAT BANSAL
414-630-4946

North ↗



TOTAL Area = 14,234 Sq. Ft.

860 FT

119 FT

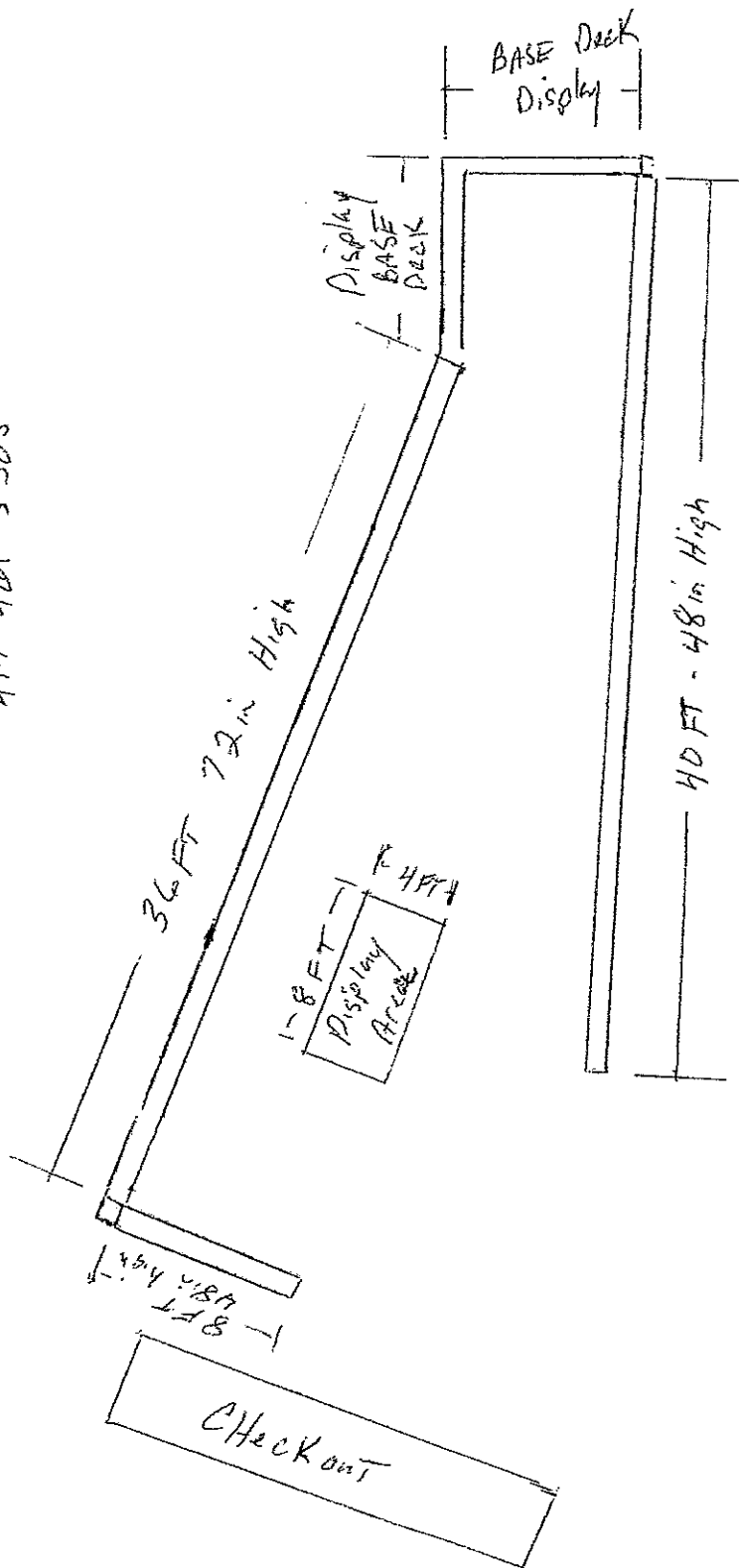
Asst

2



APPROVE: [Signature] THE AREA IS THE PROPERTY OF [Name] STATE [State] AND IS SUBJECT TO THE JURISDICTION OF THE [State] AND FEDERAL GOVERNMENT.

Sentry #2839
9210 W LISBON AVE
MILWAUKEE, WI 53222
414-461-5305



SENTRY FOODS
9210 W LISBON AVE
MILWAUKEE, WI 53222
414-630-4946
AGENT/OWNER: BHARAT BANSAL



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

Tuesday, April 27, 2021

COMMITTEE MEETING NOTICE

AD 06

HAMDAN, Ashraf R, Agent
UNITED TOWING LLC
427 E Center St

Milwaukee, WI 53212

You are requested to attend a virtual hearing to be held on:

Tuesday, May 04, 2021 at 08:45 AM

Regarding: Your Recycling, Salvaging or Towing Vehicle License Application Requesting Collecting/Delivering Salvaged Motor Vehicle Parts and Non-Consensual Towing by Contract as agent for "UNITED TOWING LLC" for "United Towing" at 427 E Center St.

This meeting will be held via GoToMeeting. Please see the enclosed best practice document for further instructions. The access code is <https://global.gotomeeting.com/join/974577157>. If you wish to call in, please call +1 (312) 757-3121 and use Access Code: 974-577-157.

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 attend this meeting may result in the denial of your license. Individual applicants and partnership applicants must attend or attend by an attorney. The agent or attorney for corporate or limited liability applicants must attend. 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 attend the virtual hearing and are 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 request an interpreter attend the meeting with you, at your expense, so that you can answer questions and participate in your hearing.

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

If you have questions regarding this meeting, please contact the staff assistant, Molly Kuether-Steele at (414) 286-2775 or molly.kuether-steele@milwaukee.gov.

MILWAUKEE POLICE DEPARTMENT LICENSING

CRIMINAL RECORD/ORDINANCE VIOLATION/INCIDENTS SYNOPSIS

DATE: 02/05/21
LICENSE TYPE: Class D Operator
NEW:
RENEWAL:

No. 320486
Application Date:

License Location:
Business Name:

Licensee/Applicant: HAMDAN, Ashraf R.
(Last Name, First Name, MI)
Date of Birth: 01/30/80

Home Address: 427 E. Center St.
City: Milwaukee State: WI Zip Code: 53212
Home Phone:

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

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

1. On 02/14/13 the applicant was charged with Possession of THC in Waukesha County Circuit Court.

Charge: Possession of THC
Finding: Guilty
Sentence: Fine
Date: 03/25/13
Case: 2013CM000265



BUSINESS LICENSE PLAN OF OPERATION

ccl-busplan 5/12/2020

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

1. Type of Business

Applying for: Extended Hours (12AM to 5AM) - If a food establishment, check all that apply: Delivery Drive Thru Dining Room
 Self Service Laundry Massage Establishment Filling Station
 Other (supplemental application for specific license also required)

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

Do you have any experience operating this type of business? No Yes If yes, explain: 5 years

2. Business Operations

- a. Proposed Opening Date: 01-30-21
- b. Is this premise under construction? No Yes If yes, list estimated completion date: _____
- c. Is this a franchise? No Yes
- d. Is this premises currently licensed? No Yes If yes, list type of license: _____
- e. Is the current licensee operating? No Yes If no, list date closed: _____
- f. Do you have future plans for other businesses, licenses or permits at this location? No Yes
If yes, explain: _____
- g. Have you previously held an Extended Hours License in Milwaukee? No Yes
If yes, list address(es): _____
- h. Are other businesses operating in the same building? No Yes If yes, describe: StarComm cell phone Retail

3. Litter & Noise

- a. How are grounds kept clean? Sweep Pressure Wash Pick Up Litter Other: _____
- b. How often will grounds be cleaned? Daily Weekly As Needed Monthly Other: _____
- c. Grounds cleaned by: Licensee Building Owner Employees Hired Maintenance Other: _____
- d. How are noise issues prevented and/or addressed? Security Manager approaches customer(s) Call Police
 Signs Posted Other: _____
- e. Will a sound amplification system be used? No Yes If yes, describe: _____

4. Smoking & Sanitation

- a. Are there designated outdoor smoking areas? No Yes If yes, describe: signs on building
- b. Number of Garbage Cans: Inside: 4 Locations: rear hallway
Outside: 4 Locations: rear alley
- c. Is a crowd control barrier used? No Yes If yes, describe: _____
- d. How many restrooms are on the premises? 3
- e. Name of solid waste contractor: Advanced Disposal Waste Management Other: _____

5. Security

- a. Are there onsite parking spaces? No Yes If yes, how many? 5 and describe the parking security plan: parking is in fenced lot
- b. Is there a loading zone? No Yes If yes, describe the loading area security plan: _____
- c. Will you have security personnel on premise? No Yes If yes, how many? _____ and answer the following:
 What are their responsibilities? _____
 Is security equipment used? No Yes If yes, describe _____
 List their licensing, certification, or training credentials _____
- d. Will there be security cameras? No Yes If yes, how many? 8 and list locations: 4 cameras all four corners,
- e. Will searches/identification checks be done upon entry? No Yes If yes, describe _____

6. Percentage of Sales (must total 100%)

Alcohol _____%	Food _____%	Secondhand Merchandise _____%	Precious Metals & Gems _____%
Entertainment _____%	Cigarettes _____%	Personal Services (such as tattoo, body piercing, salon, tailor, tanning, etc.) _____%	Other _____%
Pawnbroker Activity _____%	Salvaged Materials <u>100</u> % (such as scrap metal)		Describe: _____

7. Businesses/Licenses on the Premises (check all that apply):

Type 1

- Full Service Restaurant Cafe/Coffee Shop Deli or Fast Food Restaurant Private/Fraternal/Veterans Club
- Night Club Tavern Cocktail Lounge Teen Club
- Banquet Hall Sports Facility Bowling Alley
- Hotel/Motel : Number of Floors: _____ Rooming House: Number of Floors: _____
 Number of Rooms: _____ Number of Rooms: _____

Type 2

- Liquor Store Corner Store Supermarket Convenience Store
- Gas Station Amusement/Phonograph Distributor Recycling, Salvage or Towing
- Used Car Dealer Personal Service Establishment
 (such as tattoo business, hair salon, tailor, etc.) Recording Studio

What other licenses/permits will you hold at this location? (check all that apply)

- Occupancy Permit Cigarette & Tobacco Gas Station Extended Hours Class "B" Tavern Weights & Measures
- Secondhand Dealer Precious Metal & Gem Other: _____

8. Legal Capacity (only if a Type 1 premises in #7 above)

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

9. Premises Description

- a. Identify all area(s) of the premises that will be used in operating this business (include areas used only for storage):
 1st Floor 2nd Floor Basement Storage Patio Beer Garden Sidewalk Café Deck Rooftop
 Other: Describe: _____
- b. Describe Location: Major Thoroughfare Secondary Street Other: Center St.
- c. Nearest Major Cross Street: Holton St.
- d. Describe Building: Free Standing Building Strip Mall Other: _____
- e. Describe Premises Structure: Single Story Multi-Story - # of Stories 2 Other: _____
- f. Describe Surrounding Area: Commercial Residential Industrial Other: _____
- g. Building Owner Name: Rushdi Hamdan & Wilson Fares Phone Number: 414-265-7338
 Building Owner Address: 2675 N Holton St Milwaukee, Wi 53212

10. Hours of Operation & Customers

Will customers be entering the premises? No Yes

Day of the Week	Proposed Hours of Operation:		Estimated Number of Customers expected each day	Potential Age Range of Customers	Class B Tavern Applicant Only: Age Restriction (If none, write 'None')
	Open Time (include a.m. or p.m.)	Close Time (include a.m. or p.m.)			
Sunday	12a.m.	12p.m.	0	0	
Monday	12a.m.	12p.m.	0	0	
Tuesday	12a.m.	12p.m.	0	0	
Wednesday	12a.m.	12p.m.	0	0	
Thursday	12a.m.	12p.m.	0	0	
Friday	12a.m.	12p.m.	0	0	
Saturday	12a.m.	12p.m.	0	0	

An Extended Hours Establishment License is required for any convenience store, filling station, personal service establishment (such as tattoo, body piercing, salon, tailor, tanning, etc.), recording studio or restaurant which is open between the hours of 12:00 a.m. and 5:00 a.m.

Alcohol Establishments Class A: 8:00 am to 9:00 pm Sunday thru Saturday
 Permitted Hours of Operation: Class B: 6:00 am to 2:00 am Sunday thru Thursday, 6:00 am to 2:30 am Friday & Saturday

Entertainment Outdoor Closing Hours: 10:00pm Sunday-Thursday; 12:00am Friday & Saturday; unless a different time, either earlier or later, is established by the Common Council in its approval of the licensee's plan of operation.

11. Signature(s)

 Signature of Sole Proprietor, Partner, or 20% or more Shareholder
 (If there are no 20% or more shareholders,
 Corporate Officer-print name/title and sign)

 Signature of additional partner or 20% or more shareholder

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



RECYCLING, SALVAGING OR TOWING VEHICLE LICENSE SUPPLEMENTAL APPLICATION

ccl-rstveh 2/23/18

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

Legal Entity Name: UNITED TOWING LLC.
Business Address: 437 E CENTER ST. MILWAUKEE, WI 53212

Do you currently hold any licenses in the City of Milwaukee? [X] No [] Yes If yes, list:

Has any person on the application ever had a license relating to the activities licensed in Milwaukee Code of Ordinances Chapter 93 denied, not renewed, suspended, or revoked? [X] No [] Yes

If yes, provide the circumstances and jurisdiction in which the event occurred (including a record of any actions from the State Department of Transportation and Financial Institutions relating to suspensions, revocations, forfeitures and warnings imposed by these departments relating to the operation of any automotive sales business by the applicant):

Do you understand that you must follow all recordkeeping, reporting and operating regulations in MCO 93-45.1-3? [] No [X] Yes
Do you understand that all records and reports must be available to the police department upon request? [] No [X] Yes

Vehicle Operations Check all that apply

- Collecting/Delivering Junk and Valuable Metal
Transporting Waste Tires
Collecting/Delivering Salvaged Motor Vehicle Parts (including secondhand tires/batteries)
Non-Consensual Towing - Repossession Only
Non-Consensual Towing - By Contract with the City of Milwaukee to the City tow lot

Vehicle Information If you have more than one vehicle, complete the Vehicle Information, Page 2

Vehicle Make: HINO Model: 258 Year: 2007 Plate #: GD65244
VIN #: SPVD8JF172850253 US DOT # or WI DOT operating authority: Assigned Permit #:

Address where this vehicle will be parked when not in use: 437 E CENTER ST. MILWAUKEE, WI 53212

Describe the facility where the vehicle will be parked (cannot park on city streets):
[] Garage [] Driveway [] Carport [X] Other: PARKING LOT FENCED

What are your plans to ensure that the vehicle and all materials will be stored in a secure lot or facility?

- [X] Alarm System [] Security Personnel [X] Fenced Facility
[X] Other: CAMERA

Required Signature(s)

[Signature]
Sole Proprietor, Partner, or 20% or more Shareholder
(If there are no 20% or more shareholders, Corporate Officer-print name/title and sign)

Additional partner or 20% or more shareholder

SUBMIT THIS FORM ALONG WITH THE BUSINESS LICENSE APPLICATION & PLAN OF OPERATION

Office Use Only:

Initials Filed App # Permit #
DNS LC CC Paid MPD
Issued License #