

CITY OF MILWAUKEE OFFICE OF THE CITY CLERK

Tuesday, September 16, 2025

COMMITTEE MEETING NOTICE

AD 10

MAYS, Kenneth L, Agent FIVE CORNER FISH MARKET, LLC 6016 W LISBON AV MILWAUKEE, WI 53210

You are requested to attend a hearing which is to be held in Room 301-B, Third Floor, City Hall or you may attend virtually using the link below.

Tuesday, September 30, 2025 at 11:00 AM

The access code is https://meet.goto.com/693319149. Please see the enclosed best practices document for further instructions.

Regarding:

Your Class B Tavern License Application as agent for "FIVE CORNER FISH MARKET, LLC" for "FIVE CORNER FISH MARKET" at 6016 W LISBON Av.

There is a possibility that your application may be denied for one or more of the following reasons: The recommendation of the committee regarding the application shall be based on evidence presented at the hearing. Per MCO 85-2.7-4, probative evidence concerning whether or not a new license should be granted may be presented on the following subjects: whether or not the applicant meets the municipal requirements, the appropriateness of the location and premises where the licensed premises is to be located and whether use of the premises for the purposes or activities permitted by the license would tend to facilitate a public or private nuisance or create undesirable neighborhood problems such as disorderly patrons, unreasonably loud noise, litter, and excessive traffic and parking congestion. Probative evidence relating to these matters may be taken from the plan of operation submitted with the license application, if any, but shall not include the content of any music. Evidence regarding the fitness of the location of the premises to be maintained as the principal place of business, including but not limited to whether there is an overconcentration of businesses of the type for which the license is sought; whether the proposal is consistent with any pertinent neighborhood business or development plans, or the location's proximity to areas where children are typically present. The applicant's record in operating similarly licensed premises; and whether or not the applicant has been charged with or convicted of any felony, misdemeanor, municipal offense or other offense, the circumstances of which substantially relate to the activity to be permitted by the license being applied for or any other factor which reasonably relates to the public health, safety or welfare may also be considered. See attached police report or correspondence.

Notice for applicants with warrants or unpaid fines:

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

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

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

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

Limited parking for persons attending meetings during normal business hours is available at reduced rates (5 hour limit) at the Milwaukee Center on the southwest corner of Kilbourn Avenue and Water Street. You must present a copy of the meeting notice to the parking cashier.

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:

Jim Cooney

License Division Manager

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



CITY OF MILWAUKEE OFFICE OF THE CITY CLERK

Tuesday, September 16, 2025

COMMITTEE MEETING NOTICE

AD 10

MAYS, Kenneth L, Agent FIVE CORNER FISH MARKET, LLC 4174 N 62ND ST MILWAUKEE, WI 53216

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Regarding:

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JIM OWCZARSKI, CITY CLERK

BY:

Jim Cooney

License Division Manager

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

Date:

Case:

09/13/22

2022FO000793

MILWAUKEE POLICE DEPARTMENT LICENSING

CRIMINAL RECORD/ORDINANCE VIOLATION/INCIDENTS SYNOPSIS

			No. 361146 Application Date:
	e Location: 6016 W Lisbon ss Name: Five Corners Fish Market		
	ee/Applicant: Mays, Kenneth L (Last Name, First Name, MI) Birth: 02/14/83		
	Address: 4174 N 62 nd St ilwaukee Phone:	State: WI	Zip Code: 53216
This rep Days.	ort is written by Police Officer Penny	Monreal, ass	igned to the License Investigation Unit,
The Milv	vaukee Police Department's investiga	ation regardin	g this application revealed the following:
1.	On 09/23/21, the applicant was cited Milwaukee Municipal Court.	d and convict	ed of Intoxicant in Vehicle-Operator in
2.	On 08/02/22, the applicant was char County Circuit Court.	rged with Ope	erate Boat at Excess Speed in Milwaukee
Charge: Finding: Sentence	Operate Boat in Excess Speed Guilty : Fine		

PREVIOUS PREMISE

MILWAUKEE POLICE DEPARTMENT LICENSING

CRIMINAL RECORD/ORDINANCE VIOLATION/INCIDENTS SYNOPSIS

DATE: 02/05/24 LICENSE TYPE: FOO NEW: RENEWAL:	OD DEALER	No. 36114 Applicatio	•
License Location: 6 Business Name: Re			
Licensee/Applicant: Date of Birth: 03/10	(Last Name, First Name, MI)		
Home Address: 300 City: Milwaukee Home Phone:		: WI Zip Code:	53210
This report is written I Days.	by Police Officer Penny Monre	al, assigned to the I	icense Investigation Unit,
The Milwaukee Police	e Department's investigation re	garding this applica	tion revealed the following:
Investigation rev	5:41p.m., Milwaukee Police we vealed a customer entered and by the arm. Both the employee	l was causing a dist	urbance and the employee
	10:58a.m., Milwaukee Police v vealed the rear door was pried ntaining cash.		

Date: March 9, 2024 Officer: Alicia Walker & Dominique Thompson

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

Name of Premise: Fi Address: 6016 W Lis Phone: 414-210-4970	sbon Av		Market			
Owner: Ahmed Prop Owner address: 8101 City State Zip: Palos Owner Phone: Owner email:	l W 123	rd St	4			
Licensee/Agent: Ken Home Address: 4174 City State Zip: Milwa Phone: 414-699-9991 Email:	l N 62 nd aukee, V	St	16			:
Preferred contact: Ke	enneth N	Лays				
Location currently or	en:		YES		NO	
Projected open date:						
Day's open:	мПТ	□w□]Th []	F 🗌 SA	A 🛛 AL	L
Hours of Operation:	Sun: Mon: Tue: Wed: Thu: Fri: Sat:	10:30, 10:30, 10:30, 10:30,	AM TO AM TO AM TO AM TO AM TO AM TO AM TO	11:59F 11:59F 11:59F 11:59F 11:59F	PM PM PM PM PM	□24 hours □ Y ⊠ N
Premise Type:		ern/Bai taurant er:				

Licens	es currently held:		•
	Alcohol:		3TAVN 361146
	Tobacco:	☐Yes☐No #:	
	Food:	Yes ☐ No #: FREST 3	61147
	Extended Hours:	☐ Yes ☐ No #:	
	Secondhand Dealer:	☐ Yes ☐ No Type:	#:
	Other:	Yes No Type:	#:
	Other:	Yes No Type:	#:
Exteri	or Survey:		
*		location clean? Yes N	lo
		ocation? (Check all the apply	
	a. Park		
	b. School		
	c. Youth Cent	ter	
	d. Church		
	_	f so, how many	
	f. Residential		
	g. Other busin		
	h. Other:		
3.		outside of the location into	the interior XYes No
			from the outside Yes No
	*	free of signage Yes \(\square\)	
	Is there a parking lot [•
	Is the parking lot clear		
	Off-Street parking		
	Is the parking lot well		
	Valet Parking Yes		
10.	-		•
		ive a guard? ☐ Yes ☒ No ive cameras? ☒ Yes ☐ No	
11			1
		a person could conceal ther	
	_	ig? ⊠ Yes ⊟No. Does it ☐Yes ⊠No	appears to be adequate ⊠Yes ∐No
	Exterior Payphone?		Τ.,
		g Signs posted? Tyes N	
		irity cameras ⊠Yes ☐No	
16.	Are the address numb	ers prominently displayed a	nd easy to see ⊠Yes □No
C	a		
	a Survey:	9 Nx	□¬ът
		e security cameras? Yes	∐N0
	Are they in working or		
19.	What format are the ca		
		⊠Yes □No	
	_	MYes ∐No	
		⊠Yes □No	
		tored for later viewing: 30 d	
	Are there exterior cam		•
22.	Are there interior came	eras 🛮 🖾 Yes 🗀 No How i	nany: 8

23. Do all employees know how to retrieve recorded digital images/footage? ☐ Yes ☒ No 24. Cameras located in parking lot ☒ Yes ☐ No How many 8
Interior Survey:
25. What is the planned capacity
26. What is the minimum number of employees That will be on premise 5
27. Is the storeowner willing to be a standing complainant regarding loitering? Yes No
a. If yes have them fill out the standing complaint form and give them two of the
commercial signs \(\sigma \) Yes \(\sigma \) No
28. Is the interior of the location neat and clean?
30. Is there a lockable area that separates employees from customers? Yes \(\sigma\) No
31. Are emergency and non-emergency numbers posted near the phone? Yes \(\subseteq \) No
32. Does the owner know how to contact their police district directly? Yes No
a. Did you provide a district contact guide to the owner? Yes No
Security
33. How many security personnel are going to be employed:
34. How ill they be deployed: Interior Exterior
35. What days will they be deployed \[\] Mon \[\] Tue \[\] Wed \[\] Thu \[\] Fri \[\] Sat \[\] Sun
36. Will the security be managed by business or contracted
37. Will they be armed ☐ Yes ☐ No
38. What type of security measures to be used:
Wanding/metal detector
ID Scanner
Dress Code
Cover Charge
☐ Age restriction
Other

ADDITIONAL COMMENTS/RECOMMENDATIONS:

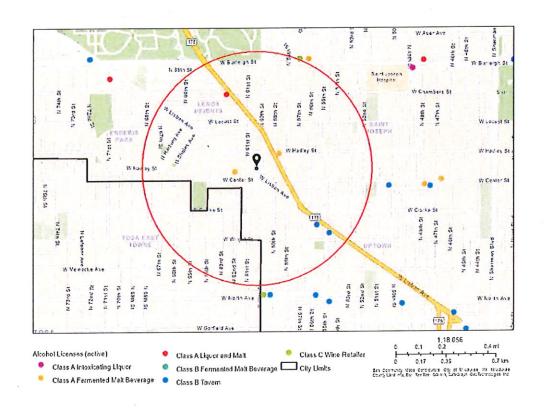
Mr. Mays stated that he will get some no loitering signs, he do have no trespassing signs. Mr. Mays will be the only person who will have access to the cameras. He will not have security personnel.



Area of Interest (AOI) Information

Area: 21,862,585.72 ft2

Feb 1 2024 12:09:44 Central Standard Time



Summary

Name	Count	Area(ft²)	Length(mi)
Alcohol Licenses	5		

Alcohol Licenses

#	Legal Entity	Trade Name	Licensee	Address	License Type Name	Total Capacity	Expiration Date	Count
1	Wally's Pub	Wally's Pub	Dennis J Jahnke, SP	5525 W Lisbon AV	Class B Tavern License	75	6/29/2024, 7:00 PM	1
2	Bani Foods Inc	Express Pantry	Sarbjit Kaur, Agt	2719 N Blaine PL	Class A Fermented Malt Beverage Retailer's License		7/10/2024, 7:00 PM	1
3	RKS LIQUOR 2 INC.	STEVE'S LIQUOR	Sukhwinder Singh, Agt	6213 W APPLETON AV	Class A Malt & Class A Liquor License		6/19/2024, 7:00 PM	1
4	Muzahem LLC	Hanna Food	Fady Muzahem, Agt	2778 N 59TH ST	Class A Fermented Malt Beverage Retailer's License		10/14/2024, 7:00 PM	1
5	Battlebox Cafe & Lounge LLC	Battlebox Cafe & Lounge	Bryant L Adams, Agt	5419 W Lisbon AV	Class B Tavern License		11/4/2024, 6:00 PM	1

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





Notice of Public Hearing

Blank Notice

MAYS, Kenneth L, Agent Five Corner Fish Market at 6016 W LISBON Av Class B Tavern License Application

Tuesday, September 30, 2025 at 11:00 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 9/30/2025 at 11:00 AM in Room 301-B, Third Floor, City Hall. 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 via internet are asked to contact the staff assistant, Yadira Melendez at (414) 286-2775 or stasst5@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. Once the Licenses Committee makes its recommendation, this recommendation is forwarded to the full Common Council for approval at its next regularly scheduled hearing.

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.)
- No letters or petitions can be accepted by the committee (unless the person who wrote the letter or the persons who signed the petition are present at the committee hearing and willing to testify).
- 4. Persons opposed to the license application are given the opportunity to testify first; supporters may testify after the opponents have finished.
- 5. When you are called to testify, you will be sworn in and asked to give your name, and address. (If your first and/or last names are uncommon please spell them.)

- 6. You may then provide testimony.
- a. Include only information relating to the above license application.
- b. Include only information you have personally witnessed or seen.
- c. Provide concise and relevant information detailing how this business has affected or may affect the peaceful enjoyment of your neighborhood.
- d. If by the time you have the opportunity to testify, the information you wish to share has already been provided to the committee, you may state that you agree with the previous testimony. Redundant or repetitive testimony will not assist the committee in making its recommendation.
- 7. After giving your testimony, the members of the Licenses Committee and the licensee may ask questions regarding the testimony you have given or other factors relating to the license application.
- 8. Business Competition is not a valid basis for denial or non-renewal of a license.

Please Note: If you have submitted an objection to the above application your objection cannot be considered by the committee unless you personally testify at the hearing.

OCCUPANT	MAIL ADDRESS	CITY STATE ZIP
CURRENT OCCUPANT	2721 N 59TH ST	MILWAUKEE, WI 53210-1502
CURRENT OCCUPANT	2721A N 59TH ST	MILWAUKEE, WI 53210-1502
CURRENT OCCUPANT	2724 N 60TH ST	MILWAUKEE, WI 53210-2101
CURRENT OCCUPANT	2724A N 60TH ST	MILWAUKEE, WI 53210-2101
CURRENT OCCUPANT	2725 N 59TH ST	MILWAUKEE, WI 53210-1502
CURRENT OCCUPANT	2725A N 59TH ST	MILWAUKEE, WI 53210-1502
CURRENT OCCUPANT	2730 N 60TH ST	MILWAUKEE, WI 53210-2101
CURRENT OCCUPANT	2731 N 59TH ST	MILWAUKEE, WI 53210-1502
CURRENT OCCUPANT	2736 N 60TH ST	MILWAUKEE, WI 53210-2101
CURRENT OCCUPANT	2736A N 60TH ST	MILWAUKEE, WI 53210-2101
CURRENT OCCUPANT	2740 N 60TH ST	MILWAUKEE, WI 53210-2101
CURRENT OCCUPANT	2740 N 61ST ST# 1	MILWAUKEE, WI 53210-2110
CURRENT OCCUPANT	2740 N 61ST ST# 2	MILWAUKEE, WI 53210-2110
CURRENT OCCUPANT	2740 N 61ST ST# 3	MILWAUKEE, WI 53210-2110
CURRENT OCCUPANT	2740 N 61ST ST# 4	MILWAUKEE, WI 53210-2110
CURRENT OCCUPANT	2742 N 60TH ST	MILWAUKEE, WI 53210-2101
CURRENT OCCUPANT	2743A N 59TH ST	MILWAUKEE, WI 53210-1502
CURRENT OCCUPANT	2747 N 60TH ST	MILWAUKEE, WI 53210-2102
CURRENT OCCUPANT	2748 N 60TH ST	MILWAUKEE, WI 53210-2101
CURRENT OCCUPANT	2748A N 60TH ST	MILWAUKEE, WI 53210-2101
CURRENT OCCUPANT	2749 N 59TH ST	MILWAUKEE, WI 53210-1502
CURRENT OCCUPANT	2750 N 61ST ST	MILWAUKEE, WI 53210-2108
CURRENT OCCUPANT	2752 N 60TH ST	MILWAUKEE, WI 53210-2101
CURRENT OCCUPANT	2753 N 60TH ST	MILWAUKEE, WI 53210-2102
CURRENT OCCUPANT	2755 N 59TH ST	MILWAUKEE, WI 53210-1502
CURRENT OCCUPANT	2758 N 60TH ST	MILWAUKEE, WI 53210-2101
CURRENT OCCUPANT	2759 N 60TH ST	MILWAUKEE, WI 53210-2102
CURRENT OCCUPANT	2760 N 60TH ST	MILWAUKEE, WI 53210-2101
CURRENT OCCUPANT	2760 N 61ST ST	MILWAUKEE, WI 53210-2108
CURRENT OCCUPANT	2764 N 60TH ST	MILWAUKEE, WI 53210-2101
CURRENT OCCUPANT	2766 N 61ST ST	MILWAUKEE, WI 53210-2108
CURRENT OCCUPANT	2766A N 61ST ST	MILWAUKEE, WI 53210-2108
CURRENT OCCUPANT	2767 N 60TH ST	MILWAUKEE, WI 53210-2102
CURRENT OCCUPANT	2770 N 61ST ST	MILWAUKEE, WI 53210-2108
CURRENT OCCUPANT	2773 N 60TH ST	MILWAUKEE, WI 53210-2102
CURRENT OCCUPANT	6100 W LISBON AVE# 1	MILWAUKEE, WI 53210-2123
CURRENT OCCUPANT	6100 W LISBON AVE# 2	MILWAUKEE, WI 53210-2123
CURRENT OCCUPANT	6100 W LISBON AVE# 3	MILWAUKEE, WI 53210-2123
CURRENT OCCUPANT	6100 W LISBON AVE# 4	MILWAUKEE, WI 53210-2123
Blank Notice		

Total Records: 39

Radius 250.0 feet and Center of the Circle: 6016 W Lisbon Av



BUSINESS LICENSE PLAN OF OPERATION

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: <u>license@milwaukee.gov</u>

1. T	ype of Business
Applyi	ng 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)
Provid	e a detailed description of the type of business you plan on operating:
	Restaurant
Do you	have any experience operating this type of business? \ No Yes If yes, explain: manager + operation Sungar
2. B	usiness Operations
a.	Proposed Opening Date: 02/01/2024
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: Restauzant Is the current licensee operating? No Yes If no, list date closed:
e.	Is the current licensee operating? \[\sum \text{No Yes If no, list date closed: } \]
f.	Do you have future plans for other businesses, licenses or permits at this location? Ves
	If yes, explain:
g.	Have you previously held an Extended Hours License in Milwaukee? 📈 No 🔲 Yes
	If yes, list address(es):
	Are other businesses operating in the same building? No Yes If yes, describe:
	ter & Noise
	How are grounds kept clean? Sweep Pressure Wash Pick Up Litter Other:
	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:
е.	Will a sound amplification system be used? No Yes If yes, describe:
4. Sn	noking & Sanitation
a	Are there designated outdoor smoking areas? No 🗌 Yes If yes, describe:
b.	Number of Garbage Cans: Inside: 5 Locations: Front, 2 prep area 2 cook + Bog Wol
	Number of Garbage Cans: Inside: 5 Locations: Front, 2 prep area 2 cook. + Bog Wol
c.	Is a crowd control barrier used? No Yes If yes, describe:
	How many restrooms are on the premises?
	Name of solid waste contractor: Advanced Disposal Waste Management Other: Eagle Disposal

= 6		Q 14 15 13 14 1 15 1.			
5. Security					
a. Are there onsite parking	•		· ·	and describ	e the parking security
plan: 4 comera	s t Peaking	Lot /10	;45		
b. Is there a loading zone?	☑ No ☐ Yes If yes,	describe the	loading area security p	lan:	
c. Will you have security po	ersonnel on premise?	✓No ☐Ye	s If yes, how many?	a	nd answer the following:
What are their re	sponsibilities?				
Is security equipm	nent used? 🖊 No 🔲	Yes If yes, de	escribe		
List their licensing	, certification, or traini	ng credentials	<u> </u>		
d. Will there be security ca	meras? No Yes	s If yes, how	many? // and lis	t locations:	2 back doors
					z, office, Parking
e. Will searches/identificat			f		
6. Percentage of Sales	The second secon	the second terms of the second			
Alcohol 20 %		<u>′О_</u> %	Secondhand Merchand	ise	Precious Metals & Gems
Entertainment%	Cigarettes	%	%		%
Pawnbroker Activity%	Salvaged Materials (such as scrap metal)	%	Personal Services (such body piercing, salon, ta tanning, etc.)	ilor,	Other% Describe:
7. Businesses/License	s on the Premise	s (check a	all that apply):		
Type 1 Full Service Restaurant	Cafe/Coffee Shop	Deli or F	ast Food Restaurant	☐ Private	r/Fraternal/Veterans Club
☐ Night Club	☐ Tavern	Cocktail	Lounge	Teen C	lub
☐ Banquet Hall	Sports Facility	Bowling	Alley		
☐ Hotel/Motel: Number of Flo	oors:	Rooming	House: Number of Flo	ors:	_
Number of Ro	ooms:		Number of Ro	oms:	
Type 2	-				
Liquor Store	Corner Store	Superma			ience Store
Gas Station	Amusement/Phonog	graph Distribut	or	Recyclin	ng, Salvage or Towing
Used Car Dealer	Personal Service Es		ı, tailor, etc.)	Recordi	ng Studio
What other licenses/permits will	you hold at this location?	(check all that	apply)		
Occupancy Permit	Cigarette & Tobacco 🔲 Ga	as Station 🔲 E	xtended Hours Class '	'B" Tavern	Weights & Measures
Secondhand Dealer					
8. Legal Capacity (only			7 above)		
o. regai capacity form	y it a Type I prei	HIJCJ III W	2 48000		
Capacity (Call the	Milwaukee Developmen	t Center at 414	-286-8211 if you have qu	estions.)	

9. Premises D	Description				
a. Identify all are	ea(s) of the premises that will a second state of the premises that will be a second state of the second se	ll be used in operating this bu rage □Patio □Beer Garde	usiness (include areas use en Sidewalk Café	ed only for storag Deck □Rooftop	e):
□Other: Desc					
b. Describe Locat	tion: Major Thoroughfare	e Secondary Street O	ther:		
	r Cross Street:	•			
	_	ing 🗌 Strip Mall 🔲 Other:			
		ory Multi-Story - # of Sto			
f. Describe Surro	unding Area: Commercia	al Residential 🔲 Industr	rial 🗌 Other:		
g. Building Owne	r Name: Almed Yes	perties LC 12320 St Pale	Phone Number: 70	8-274-	3343
Building Owne	r Address: <u>8/0/ W.</u>	12320 'Fall	OS PARK J.	L 6406	.4
10. Hours of C	Operation & Custor	mers			
Will customers be ent-	ering the premises? No	Yes			
Day of the Week	T	s of Operation:	Estimated Number of Customers	Potential Age Range of Customers	Class B Tavern Applicant Only: Age Restriction (If none, write 'None')
Day Of the Week	Open Time (include a.m) or p.m.)	Close Time (include a.m. or p.m.)	expected each day		
Sunday	1030 pm	1159 pm	20	17-75	none
Monday	1038 den	1159 Dm	20	17-75	_ none
Tuesday	1030 sm	1159 pm 1159 pm	25	17-77	none
Wednesday	1030 am	1159 pm	25	17-75	none
Thursday	1030 an	1159 pm	40	ノフーフフ	none
Friday	1030 Ain	1159 Dm	60	ノア・フフ	. none
Saturday	1030 Am	1159 DM	50	17-77	none
An Extended Hours Est piercing, salon, tailor, t	ablishment License is require tanning, etc.), recording stud	ed for any converlience store, lio or restaurant which is ope	, filling station, personal n between the hours of	service establish	ment (such as tattoo, body
Alcohol Establishments Permitted Hours of Ope		am to 9:00 pm Sunday thru Sa am to 2:00 am Sunday thru Tl) am Friday & Sati	urday
Entertainment Outdoo		pm Sunday-Thursday; 12:00a ablished by the Common Cou			•
11. Signature(s	s)				
K_	MS				
(If there are no 20%	rietor, Partner, or 20% or mor % or more shareholders, print name/title and sign)	re Shareholder Si	ignature of additional pa	irtner or 20% or n	nore shareholder



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: Five Compan Fish Market LLC
Legal Entity Name: Five Connent Fish Market LLC. Premise Address: 6016 W. Lisbon
Proximity of Premises to Church, School, Daycare Center or Hospital
Is the building within 300 feet of any church, school, daycare center or hospital?
"Service Bar Only" Designation
If applying for Class B or C license, are you applying for "Service Bar Only"?
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? No Yes
If yes, list their name and address:
If no, list the name and address of the person(s) who will:
Class B Applicants: If the agent, a partner or the individual licensee will not be conducting the day-to-day operations of the business,
the person(s) listed above must obtain a Class B Managers license.
c) Does anyone else have money invested or any other interest in this business? No Yes If yes, explain:
d) Have you made an agreement with anyone to repay any loan or any other payments based upon income from the business?
No Yes If yes, list name and address:
Property Information (New & Transfer Applicants Only)
a) Do you own or lease the building?
b) Who owns the fixtures (for example, coolers, etc.)?
c) Are you purchasing the stock and/or fixtures? Yes If yes, amount paid \$
d) Total amount paid for business \$
e) Total amount paid for goodwill of the business \$
Goodwill comprises the reputation and customer relationships of an existing business. If the price you pay for the business exceeds the fair market value of all of the rest of the assets of the business, the excess may be considered goodwill.
f) Have you made arrangements with the seller for payment of personal property taxes? No Yes
Lease Information (New & Transfer Applicants who are leasing the premises only)
a) Date lease begins 2/1/24 Ends May 2026 b) Monthly rental \$ 4,000 m
b) Monthly rental \$ 4,000 m
b) Monthly rental \$ 4,000 = Color Do you have an option to renew the lease? \[\text{No Yes} \] c) Do you have an option to renew the lease? \[\text{No Yes} \]
d) Does your lease allow for assignment to another party without the consent of the owner; Party No Li Yes
e) For what length of time have you been guaranteed occupancy (number of years)?

Lease Information (Continued)	
f) g)	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
Change of Agent Applicants Only	
	ve there been any changes to the floor plan since the last application was submitted? No Yes o, a new floor plan is not required. If yes, submit a new floor plan and explain the change(s):
Signature	
	ture of Sole Proprietor, Partner or 20% or More Shareholder 20% or more Shareholder, Corporate Officer - print name/title and sign)

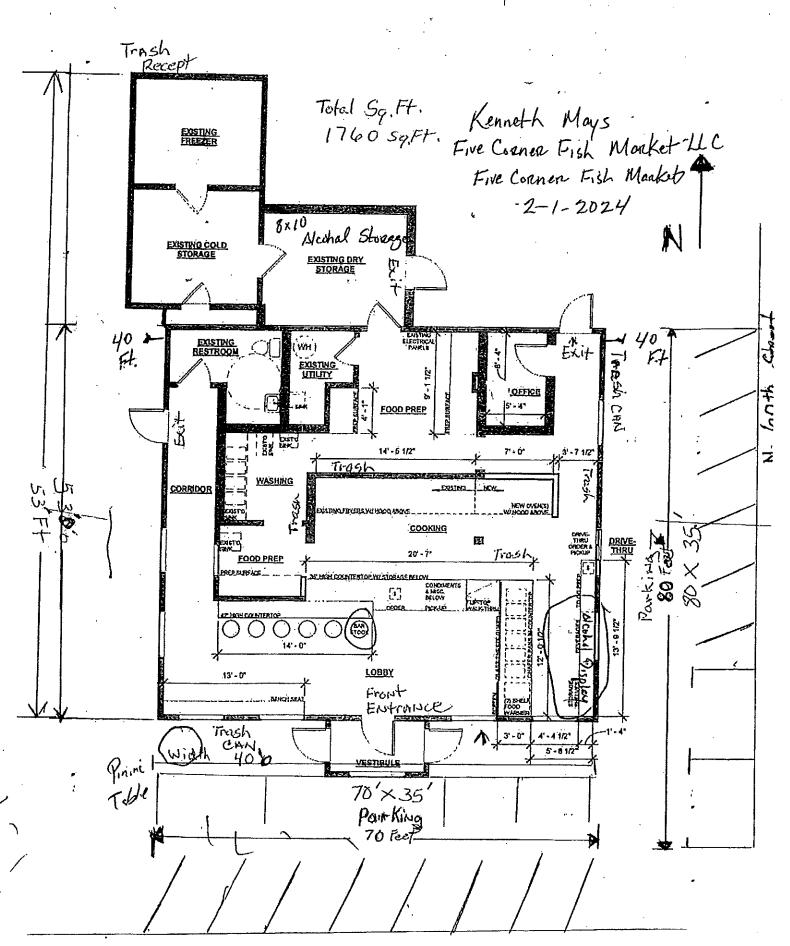
Note: All information contained in this application is subject to approval by the Common Council.

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



Lishny Avenur.