

CITY OF MILWAUKEE OFFICE OF THE CITY CLERK

Wednesday, October 25, 2023

COMMITTEE MEETING NOTICE

AD 09

VELARDE, Adam J, Agent Cave Enterprises Operations LLC 1624 W 18th St Chicago, IL 60608

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, November 07, 2023 at 01:15 PM

The access code is https://meet.goto.com/552541757. If you wish to call in: +1 (872) 240-3311 and use Access Code: 552-541-757

Please see the enclosed best practices document for further instructions.

Regarding:

Your Extended Hours Establishments License Application Requesting To Open 24HRS Everyday as agent for "Cave Enterprises Operations LLC" for "Burger King #3019" at 6544 N 76th St.

There is a possibility that your application may be denied for one or more of the following sons: 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.

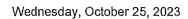
JIM OWCZARSKI, CITY CLERK

BY:

Jim Cooney

License Division Manager

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







Notice of Public Hearing

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VELARDE, Adam J, Agent
Burger King #3019 at 6544 N 76th St
Extended Hours Establishments License Application Requesting To Open 24HRS Everyday

Tuesday, November 07, 2023 at 1:15 PM

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 11/7/2023 at 1:15 PM 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 phone or 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.)
- 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).
- 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	6525 N 76TH ST	MILWAUKEE, WI 53223-6103
CURRENT OCCUPANT	6600 N 77TH ST# 1	MILWAUKEE, WI 53223-5634
CURRENT OCCUPANT	6600 N 77TH ST# 2	MILWAUKEE, WI 53223-5634
CURRENT OCCUPANT	6600 N 77TH ST# 3	MILWAUKEE, WI 53223-5634
CURRENT OCCUPANT	6600 N 77TH ST# 4	MILWAUKEE, WI 53223-5634
CURRENT OCCUPANT	6600 N 77TH ST# 5	MILWAUKEE, WI 53223-5634
CURRENT OCCUPANT	6600 N 77TH ST# 6	MILWAUKEE, WI 53223-5634
CURRENT OCCUPANT	6600 N 77TH ST# 7	MILWAUKEE, WI 53223-5634
CURRENT OCCUPANT	6600 N 77TH ST# 8	MILWAUKEE, WI 53223-5634
CURRENT OCCUPANT	7418 W ACACIA ST	MILWAUKEE, WI 53223-5616
CURRENT OCCUPANT	7426 W ACACIA ST	MILWAUKEE, WI 53223-5616
CURRENT OCCUPANT	7601 W CLOVERNOOK ST	MILWAUKEE, WI 53223-6111
CURRENT OCCUPANT	7615 W CLOVERNOOK ST	MILWAUKEE, WI 53223-6111
CURRENT OCCUPANT	7621 W CLOVERNOOK ST	MILWAUKEE, WI 53223-6111
CURRENT OCCUPANT	7628 W CLOVERNOOK ST	MILWAUKEE, WI 53223-6112
CURRENT OCCUPANT	7629 W CLOVERNOOK ST	MILWAUKEE, WI 53223-6111
CURRENT OCCUPANT	7636 W CLOVERNOOK ST	MILWAUKEE, WI 53223-6112
CURRENT OCCUPANT	7637 W CLOVERNOOK ST	MILWAUKEE, WI 53223-6111
CURRENT OCCUPANT	7643 W CLOVERNOOK ST	MILWAUKEE, WI 53223-6111
CURRENT OCCUPANT	7646 W CLOVERNOOK ST	MILWAUKEE, WI 53223-6112
CURRENT OCCUPANT	7649 W CLOVERNOOK ST	MILWAUKEE, WI 53223-6111
CURRENT OCCUPANT	7654 W CLOVERNOOK ST	MILWAUKEE, WI 53223-6112
Blank Notice		

Total Records: 22

Radius 500.0 feet and Center of the Circle: 6544 N 76th St

ccl-busplan 5/12/2020



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: license@milwaukee.gov

Provide Do you 2. BL a. b. c. d. e.	Self Service Laundry Massage 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) a detailed description of the type of business you plan on operating: No Restaurant have any experience operating this type of business? No Yes If yes, explain: Current Otherwise Otherwis					
Provide Do you 2. Bt a. b. c. d. e.	Self Service Laundry Massage Establishment Filling Station Other (supplemental application for specific license also required) a detailed description of the type of business you plan on operating: OTFORD RESTAURANT have any experience operating this type of business? No X Yes If yes, explain: Currently OPERATING usiness Operations Proposed Opening Date: 6-1-21 Is this premise under construction? No Yes If yes, list estimated completion date: Is this a franchise? No Yes Is this premises currently licensed? No Yes If yes, list type of license:					
Do you 2. Bt a. b. d. d. d. e.	a detailed description of the type of business you plan on operating: AST FOOD RESTAURANT have any experience operating this type of business? \[\] No \[\begin{align*} \text{Yes} & \text{If yes, explain: Currently Operation g} \] Usiness Operations Proposed Opening Date: \[\begin{align*} 6 - l - Z l \] Is this premise under construction? \[\begin{align*} \text{No } \Begin{align*} \text{Yes} & \text{If yes, list estimated completion date:} \] Is this premises currently licensed? \[\begin{align*} \text{No } \Begin{align*} \text{Yes} & \text{If yes, list type of license:} \] Foo \[\text{D} \end{align*}					
Do you 2. Bt a. b. d. d. d. e.	have any experience operating this type of business? \(\) No \(\) Yes \(\) If yes, explain: \(\) CUTENTLY \(\) OPERATING usiness Operations Proposed Opening Date: \(\begin{array}{cccccccccccccccccccccccccccccccccccc					
2. Bt a. b. c. d. e.	have any experience operating this type of business? \(\) No \(\) Yes If yes, explain: \(\) CUTENTY OPERATIONS Proposed Opening Date: \(\begin{align*} 6 - l - \ \ 2 l \\ \] Is this premise under construction? \(\) No \(\) Yes If yes, list estimated completion date: Is this a franchise? \(\) No \(\) Yes Is this premises currently licensed? \(\) No \(\) Yes If yes, list type of license: \(\) Foo \(\)					
2. Bt a. b. c. d. e.	Usiness Operations Proposed Opening Date: 6 - 1 - 21 Is this premise under construction? ☑ No ☐ Yes If yes, list estimated completion date: Is this a franchise? ☐ No ☑ Yes Is this premises currently licensed? ☐ No ☑ Yes If yes, list type of license:					
a. b. c. d. e.	Proposed Opening Date: 6-1-21 Is this premise under construction? No Yes If yes, list estimated completion date: Is this a franchise? No Yes Is this premises currently licensed? No Yes If yes, list type of license:					
b	Is this premise under construction? No Yes If yes, list estimated completion date: Is this a franchise? No Yes Is this premises currently licensed? No Yes If yes, list type of license:					
c. 1 d. 1 e. 1	Is this a franchise? No Yes Is this premises currently licensed? No Yes If yes, list type of license: Foo D					
c. 1 d. 1 e. 1	Is this a franchise? No Yes Is this premises currently licensed? No Yes If yes, list type of license: Foo D					
e. !	Is this premises currently licensed? No XYes If yes, list type of license: FOD Is the current licensee operating? No XYes If no, list date closed:					
e. ! f. !	Is the current licensee operating? 🔲 No 💆 Yes If no, list date closed:					
f. I						
	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):					
	Are other businesses operating in the same building? 🔀 No 🗌 Yes If yes, describe:					
3. Lit	tter & 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:					
	Grounds cleaned by: Licensee Building Owner Employees Hired Maintenance Other:					
d. I	How are noise issues prevented and/or addressed? Security Manager approaches customer(s) Call Police					
	Signs Posted Other:					
e. 1	Will a sound amplification system be used? ☑ No ☐ Yes If yes, describe:					
4. Sn	noking & Sanitation					
а.	Are there designated outdoor smoking areas? 🔀 No 🗌 Yes If yes, describe:					
b , 1	Number of Garbage Cans; Inside: 6 Locations: 3 IN DINING WEA 3 IN Kitchen					
	Outside: 2 Locations: 8 YRD CONTAINERS IN ENclosure					
c. i	is a crowd control barrier used? 🔀 No 🗌 Yes 🔝 If yes, describe:					
						
	Name of solid waste contractor: Advanced Disposal Waste Management Other:					
a. a. b. c. d.	Number of Garbage Cans: Inside: 6 Locations: 3 TN DINING ATEA 3 TN KITCHAN Outside: 4 Locations: 8 Y PD Contents TN ENCLOSURE Is a crowd control barrier used? No Yes If yes, describe: How many restrooms are on the premises? 2					

a. Are there onsite parking s	naces? No 17 Yes	If yes, how	many? 23 a	nd describe	the parking security			
plan: PACKING L	ot 15 well	Lit a	sith Securit	y Cam	eras			
plan: PATKING LOT 15 WEST LIT WITH SECURITY CAMERAS b. Is there a loading zone? No Yes If yes, describe the loading area security plan:								
c. Will you have security per	sonnel on premise? 🔯	No ∐Ye	s If yes, how many?_	ar	nd answer the following:			
What are their resp	onsibilities?							
ls security equipme	Is security equipment used? No XYes If yes, describe CAMERA SYSTEM							
List their licensing,	List their licensing, certification, or training credentials							
d. Will there be security com	eras? 🗌 No 🔀 Yes	If yes, how	many? <u>/ 6</u> and lis	t locations:				
Covers En	TIBE Premis	15			·			
e. Will searches/identification	on checks be done upon	entry? 🔯	No Yes If yes, desc	ribe				
5. Percentage of Sales	(must total 100%	á)			1			
Alcohol %	Food <u>100</u>	>_%	Secondhand Merchandise		Precious Metals & Gems			
Entertainment%	Cigarettes	%			%			
	wabroker Activity		Personal Services (such as tattoo, body piercing, salon, tailor, tanning, etc.)%		Other%			
Pawnbroker Activity%					Describe:			
7. Businesses/Licenses	on the Premises	(check	all that apply):		•			
Type 1	Cafe/Coffee Shop	Deli or	Fast Food Restaurant	Private	e/Fraternal/Veterans Club			
Night Club	☐ Tavern	Cocktail Lounge		Teen Club				
Banquet Hall	Sports Facility	Sports Facility Bowling Alley						
Hotel/Motel: Number of Flo	oors:	Roomir	ng House: Number of Flo	oors:	and the same of th			
	oms:		Number of Ro	ooms:				
Type 2	. Г. С	Cunar~	narkat	Conve	nience Store			
Liquor Store	Corner Store Supermarke				ing, Salvage or Towing			
Gas Station		itiel amarge of coastile						
Used Car Dealer	Personal Service Es (such as tattoo busii		on, tailor, etc.)	Record	ling Studio			
What other licenses/permits will								
Occupancy Permit 🔲	Cigarette & Tobacco 🔲 Ga	s Station	Extended Hours Class	"B" Tavern	Weights & Measures ■ Weights Weights ■ Weights Weights ■ Weights			
Secondhand Dealer	Precious Metal & Gem	Other:		 :				

9. Premises D	escription	a kalambada karan yang sepangangan penjada pagai bapa dagi kalambada di Palambada da Salambada da Salambada da								
a. Identify all area	a. Identify all area(s) of the premises that will be used in operating this business (include areas used only for storage): [李1 st Floor □2 nd Floor □Basement Storage □Patio □Beer Garden □Sidewalk Café □Deck □Rooftop									
	Describe:									
b. Describe Locati										
c. Nearest Major	ion: ☑ Major Thoroughfare □ Secondary Street □ Other:									
d. Describe Buildi	Building: Free Standing Building. Strip Mall Other:									
	scribe Premises Structure: Single Story Multi-Story - # of Stories Other:									
f. Describe Surro	unding Area: 📈 Commercia	l 🗌 Residential 🔲 Industr	ial 🗌 Other:							
g. Building Owner	Name: CAUE ENTER	PRISES OPEIAtions	Phone Number:77	3-294-	5344					
Building Owner	Name: CAUL ENTER Address: 1624	W. 18th ST.	Chicago, I	2. 606	208					
A	peration & Custor									
Will customers be ent	ering the premises? 🔲 No	√XYes								
Day of the Week	Proposed Hours of Operation:		Estimated Number of Customers	Potential Age Range	Class B Tavern Applicant Only:					
bay of the week	Open Time (include a.m. or p.m.)	Close Time (include a.m. or p.m.)	expected each day	of Customers	Age Restriction (If none, write 'None')					
Sunday	Z4 HR		400	A11						
Monday	24 HR		400	All						
Tuesday	24 HR		400	A11						
Wednesday	24 HR		400	All						
Thursday	24 HR		400	All						
Friday	24 HR	-	400	A(1						
Saturday	24 HR.		400	All						
An Extended Hours Es piercing, salon, tailor,	tablishment License is require tanning, etc.), recording stu	ed for any convenience stor dio or restaurant which is op	e, filling station, persona en between the hours of	service establis 12:00 a.m. and !	hment (such as tattoo, body 5:00 a.m.					
Alcohol Establishmen Permitted Hours of O	•	am to 9:00 pm Sunday thru am to 2:00 am Sunday thru		0 am Friday & Sa	nturday					
Entertainment Outdo		Opm Sunday-Thursday; 12:0 Lablished by the Common Co			time, either earlier or later, 1 of operation.					
11. Signature	(s)	all services								
	and the same of th									
	A STATE OF THE PARTY OF THE PAR	manufacture and the second								
(If there are no 2	orietor, Partner, gr 20% or m 0% or more shareholders,	ore Shareholder	Signature of additional	partner or 20% o	r more shareholder					
Corporate Officer	-print name/title and sign)									

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