



CITY OF MILWAUKEE
OFFICE OF THE CITY CLERK

Thursday, November 20, 2014

COMMITTEE MEETING NOTICE

AD 05

SEEGERT, John M, Agent
TOTO'S, INC
4163 N 76TH St

MILWAUKEE, WI 53222

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

Monday, December 01, 2014 at 08:30 AM

Regarding: Your Class A Malt & Class A Liquor License Renewal Application as agent for "TOTO'S, INC" for "OTTO'S BEVERAGE CENTER" at 4163 N 76TH St.

There is a possibility that your application may be denied for one or more of the following reasons: failure of the applicant to meet the statutory and municipal license qualifications; pending charges against or the conviction of any felony, misdemeanor, municipal offense or other offense, the circumstances of which substantially relate to the circumstances of the particular licensed activity, on behalf of the licensee, his or her employes, or patrons (if the licensee is a corporation or licensed limited partnership, the conviction of the corporate agent, officers, directors, members or any shareholder holding 20% or more of the corporation's total or voting stock, or proxies for that amount of stock, of any of the offenses enumerated in s. 125.12(2)(ag), Wis. Stats., as amended); the appropriateness of tavern location and premises; neighborhood problems due to management or location; failure of the licensee to operate the premise in accordance with the floor plan and plan of operation submitted pursuant to s. 90-5-1-c. of the Milwaukee Code of Ordinances; and any factors which reasonably relate to the public health, safety and welfare. See attached police report and/or written correspondence regarding this application. Please be advised the public will be able to provide information to the committee in person. The committee will receive and consider evidence regarding the above mentioned criteria.

Notice for applicants with warrants or unpaid fines:

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

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

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

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

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JIM OWCZARSKI, CITY CLERK

BY:

Jason Schunk
License Division Manager

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

200 E. Wells Street, Room 105, City Hall, Milwaukee, WI 53202. www.milwaukee.gov/license
Phone: (414) 286-2238 Fax: (414) 286-3057 Email Address: License@milwaukee.gov

Most recent applications: [196703](#), [196750](#), [197809](#), [197785](#), [197809](#)
 Most recent licenses: [CIG 1023248](#), [ALQML 198759](#), [ALQML 198759](#)

Checklist Applicant Info Holds Plan Hours Committee Review Invoices Notes & History Attachments

Applicant:	SEEGERT, JOHN M.	Application:	ALQML 196703 (Class A Malt & Class A Liquor License)
	Agt	Status:	RENEWAL - Issuance Pending Requirements Met
Legal Entity Name:	TOTO'S, INC		Status Date: 1/01/0001 12:00 AM
Business Name:	OTTO'S BEVERAGE CENTER	Change Status:	--Select--
Address:	4163 N 76TH ST MILWAUKEE, WI 53222	Comments:	<input type="text"/>
			<input type="button" value="Save Status Changes"/>
Legal Entity Type:	Corporation	Secondary Statuses:	
Ald. District:	5	Received:	10/13/2014
Police District:	7	License:	
<input type="checkbox"/> New Location?	<input type="checkbox"/> New Applicant?	Modified:	PLANS NOTES
<input type="checkbox"/> New Operator?	<input type="checkbox"/> New Operation?	Currently Queued For:	
		Add To Queue:	-- Select -- <input type="button" value="Add"/>
		Specialties:	<input type="text"/>
Administrative Suspension			
Start:	End:		
<input type="button" value="Refresh"/>			

Notes				
Date	Note	Follow Up?	By	Actions
10/14/2014	Neighborhood Objection to littering, loitering, public drunkenness, loud noise and conduct detrimental to the health, safety and welfare of the neighborhood. jb	<input type="checkbox"/>	jbohl	

History				
Date	History Type	History	By	Actions
10/20/2014	WorkQueueWithdrawalAcknowledged	Acknowledged by AD\jcheat	jcheat	
10/17/2014	RequirementStatusChanged	Requirement Publication Fee status changed from Not Met to Met	jkober	
10/17/2014	RequirementStatusChanged	Requirement Class A Liquor & Malt Fee status changed from Not Met to Met	jkober	
10/14/2014	ApplicationStatusChanged	Application status changed from to .	CRADEN	
10/14/2014	MPDApproval	MPD Work Queue Approval at 10/14/2014 by Chad Raden	CRADEN	



Thursday, November 20, 2014



Notice of Public Hearing

SEEGERT, John M, Agent
OTTO'S BEVERAGE CENTER at 4163 N 76TH St
Class A Malt & Class A Liquor License Renewal Application

Monday, December 01, 2014 at 8:30 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 12/1/2014 at 8:30 AM, in Room 301-B, Third Floor, City Hall. If you wish, you may provide testimony at the hearing regarding the request; see below for further information. You are not required to attend the hearing. Once the Licenses Committee makes its recommendation, this recommendation is forwarded to the full Common Council for approval at its next regularly scheduled hearing. Please review the information below and if you have further questions regarding this process, please contact the License Division at (414) 286-2238.

Important details for those wishing to provide information for the Licenses Committee to consider when making its recommendation:

1. The license application is scheduled to be heard at the above time. Due to other hearings running longer than scheduled, you may have to wait some time to provide your testimony.
2. You must appear in person and testify as to matters that you have personally experienced or seen. (You cannot provide testimony for your neighbor, parent or anyone else; this is considered hearsay and cannot be considered by the committee.)
3. No letters or petitions can be accepted by the committee (unless the person who wrote the letter or the persons who signed the petition are present at the committee hearing and willing to testify).
4. Persons opposed to the license application are given the opportunity to testify first; supporters may testify after the opponents have finished.
5. When you are called to testify, you will be sworn in and asked to give your name, and address. (If your first and/or last names are uncommon please spell them.)
6. You may then provide testimony.
 - a. Include only information relating to the above license application.
 - b. Include only information you have personally witnessed or seen.
 - c. Provide concise and relevant information detailing how this business has affected or may affect the peaceful enjoyment of your neighborhood.
 - d. If by the time you have the opportunity to testify, the information you wish to share has already been provided to the committee, you may state that you agree with the previous testimony. Redundant or repetitive testimony will not assist the committee in making its recommendation.
7. After giving your testimony, the members of the Licenses Committee and the licensee may ask questions regarding the testimony you have given or other factors relating to the license application.
8. Business Competition is not a valid basis for denial or non-renewal of a license.
Please Note: If you have submitted an objection to the above application your objection cannot be considered by the committee unless you personally testify at the hearing.

RESIDENT	MAIL ADDRESS	CITY AND ZIP CODE
CURRENT RESIDENT	4114 N 77TH ST	MILWAUKEE, WI 53222-2006
CURRENT RESIDENT	4119 N 77TH ST	MILWAUKEE, WI 53222-2005
CURRENT RESIDENT	4120 N 77TH ST	MILWAUKEE, WI 53222-2006
CURRENT RESIDENT	4127 N 77TH ST	MILWAUKEE, WI 53222-2005
CURRENT RESIDENT	4135 N 77TH ST	MILWAUKEE, WI 53222-2005
CURRENT RESIDENT	4136 N 77TH ST	MILWAUKEE, WI 53222-2006
CURRENT RESIDENT	4141 N 77TH ST	MILWAUKEE, WI 53222-2005
CURRENT RESIDENT	4144 N 77TH ST	MILWAUKEE, WI 53222-2006
CURRENT RESIDENT	4149 N 77TH ST	MILWAUKEE, WI 53222-2005
CURRENT RESIDENT	4157 N 77TH ST	MILWAUKEE, WI 53222-2005
CURRENT RESIDENT	4158 N 77TH ST	MILWAUKEE, WI 53222-2006
CURRENT RESIDENT	4163 N 77TH ST	MILWAUKEE, WI 53222-2005
CURRENT RESIDENT	4168 N 77TH ST	MILWAUKEE, WI 53222-2006
CURRENT RESIDENT	4177 N 77TH ST	MILWAUKEE, WI 53222-2005
CURRENT RESIDENT	4178 N 77TH ST	MILWAUKEE, WI 53222-2006
CURRENT RESIDENT	4182 N 77TH ST	MILWAUKEE, WI 53222-2006
CURRENT RESIDENT	4185 N 77TH ST	MILWAUKEE, WI 53222-2005
CURRENT RESIDENT	4186 N 77TH ST	MILWAUKEE, WI 53222-2006
CURRENT RESIDENT	4190 N 77TH ST	MILWAUKEE, WI 53222-2006
CURRENT RESIDENT	4211 N 76TH ST	MILWAUKEE, WI 53222-2022

Total Records: 21

Radius: 250.0 feet and Center of Circle: 4163 N 76th ST



CITY OF MILWAUKEE
OFFICE OF THE CITY CLERK

Thursday, November 20, 2014

COMMITTEE MEETING NOTICE

AD 13

LEMCKE, Heather A, Agent
American Auto Tech and Bike LLC
3758 E Grange Av

Cudahy, WI 53110

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

Monday, December 01, 2014 at 08:30 AM

Regarding: Your Secondhand Motor Vehicle Dealer's License Application as agent for "American Auto Tech and Bike LLC" for "American Auto Tech and Bike" at 1101 W BODEN Ct #5.

There is a possibility that your application may be denied for one or more of the following reasons: Neighborhood Objections to the granting of such a license due to the creation of undesirable neighborhood problems, such as: parking and traffic problems which cause the normal flow of traffic on roadways and alleys to be impeded, loitering, littering, noise, loud music, and conduct which will have an adverse impact on the public health, safety and welfare of the community. Additionally, the over concentration of secondhand motor vehicle dealers in the neighborhood such that the concentration will have an adverse impact on the public health, safety and welfare of the neighborhood. you do not meet the statutory and municipal requirements; the appropriateness of the location to be licensed and whether the location will create undesirable neighborhood problems, whether or not you have been charged with or convicted of any felony, misdemeanor, municipal offense or other offense, the circumstances of which substantially relate to the licensed activity; and any other factors which reasonably relate to the public health, safety and welfare. See attached police report and/or written correspondence regarding this application. Please be advised the public will be able to provide information to the committee in person or in writing. The committee will receive and consider evidence regarding the above mentioned criteria.

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JIM OWCZARSKI, CITY CLERK

BY: _____

Jason Schunk
License Division Manager

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Thursday, November 20, 2014



Notice of Public Hearing

LEMCKE, Heather A, Agent
American Auto Tech and Bike at 1101 W BODEN Ct #5
Secondhand Motor Vehicle Dealer's License Application

Monday, December 01, 2014 at 8:30 AM

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RESIDENT	MAIL ADDRESS	CITY AND ZIP CODE
CURRENT RESIDENT	6115 S 13TH ST 1	MILWAUKEE, WI 53221-5158
CURRENT RESIDENT	6115 S 13TH ST 10	MILWAUKEE, WI 53221-5163
CURRENT RESIDENT	6115 S 13TH ST 11	MILWAUKEE, WI 53221-5163
CURRENT RESIDENT	6115 S 13TH ST 12	MILWAUKEE, WI 53221-5163
CURRENT RESIDENT	6115 S 13TH ST 2	MILWAUKEE, WI 53221-5158
CURRENT RESIDENT	6115 S 13TH ST 3	MILWAUKEE, WI 53221-5158
CURRENT RESIDENT	6115 S 13TH ST 4	MILWAUKEE, WI 53221-5158
CURRENT RESIDENT	6115 S 13TH ST 5	MILWAUKEE, WI 53221-5158
CURRENT RESIDENT	6115 S 13TH ST 6	MILWAUKEE, WI 53221-5158
CURRENT RESIDENT	6115 S 13TH ST 7	MILWAUKEE, WI 53221-5163
CURRENT RESIDENT	6115 S 13TH ST 8	MILWAUKEE, WI 53221-5163
CURRENT RESIDENT	6115 S 13TH ST 9	MILWAUKEE, WI 53221-5163
CURRENT RESIDENT	6129 S 13TH ST 1	MILWAUKEE, WI 53221-5159
CURRENT RESIDENT	6129 S 13TH ST 10	MILWAUKEE, WI 53221-5164
CURRENT RESIDENT	6129 S 13TH ST 11	MILWAUKEE, WI 53221-5164
CURRENT RESIDENT	6129 S 13TH ST 2	MILWAUKEE, WI 53221-5159
CURRENT RESIDENT	6129 S 13TH ST 3	MILWAUKEE, WI 53221-5159
CURRENT RESIDENT	6129 S 13TH ST 4	MILWAUKEE, WI 53221-5159
CURRENT RESIDENT	6129 S 13TH ST 5	MILWAUKEE, WI 53221-5159
CURRENT RESIDENT	6129 S 13TH ST 6	MILWAUKEE, WI 53221-5159
CURRENT RESIDENT	6129 S 13TH ST 7	MILWAUKEE, WI 53221-5164
CURRENT RESIDENT	6129 S 13TH ST 8	MILWAUKEE, WI 53221-5164
CURRENT RESIDENT	6129 S 13TH ST 9	MILWAUKEE, WI 53221-5164
CURRENT RESIDENT	6147 S 13TH ST 1	MILWAUKEE, WI 53221-5160
CURRENT RESIDENT	6147 S 13TH ST 10	MILWAUKEE, WI 53221-5160
CURRENT RESIDENT	6147 S 13TH ST 2	MILWAUKEE, WI 53221-5160
CURRENT RESIDENT	6147 S 13TH ST 3	MILWAUKEE, WI 53221-5160
CURRENT RESIDENT	6147 S 13TH ST 4	MILWAUKEE, WI 53221-5160
CURRENT RESIDENT	6147 S 13TH ST 5	MILWAUKEE, WI 53221-5160
CURRENT RESIDENT	6147 S 13TH ST 6	MILWAUKEE, WI 53221-5160
CURRENT RESIDENT	6147 S 13TH ST 7	MILWAUKEE, WI 53221-5160
CURRENT RESIDENT	6147 S 13TH ST 8	MILWAUKEE, WI 53221-5160
CURRENT RESIDENT	6147 S 13TH ST 9	MILWAUKEE, WI 53221-5160

Total Records: 34

Radius: 600.0 feet and Center of Circle: 1101 W Boden CT



**SECONDHAND MOTOR VEHICLE DEALER &
USED MOTOR VEHICLE DEALER-PARTS ONLY
SUPPLEMENTAL APPLICATION**

CCL-UCAR1 6/18/13

Legal Entity Name: American AutoTech

Premises Address: 1101 W. Boden Court #5 Milw WI 53221

Type of License applied for (check one):

- Secondhand Motor Vehicle Retail Dealer
- Secondhand Motor Vehicle Wholesale Dealer
- Used Motor Vehicle Retail Dealer – Parts Only
- Used Motor Vehicle Wholesale Dealer – Parts Only

Days of Operation: Check all that apply and provide hours (include a.m. and p.m.) No Sales On Sundays

- Monday 8-6 pm
- Tuesday 8-6 pm
- Wednesday 8-6 pm
- Thursday 8-6 pm
- Friday 8-6 pm
- Saturday 10-4 pm

Retail Dealers Only:

Total Number of Parking Spaces (including customer/employee parking) 8

Number of Parking Spaces that will be used for Display/Storage of Secondhand Motor Vehicles 8

List plans to ensure that all motor vehicles associated with the business will be stored, maintained, and repaired on the licensed premises and no code provisions relating to the littering of the public way will be violated (check all that apply):

Where will vehicles be stored, maintained and repaired? garage parking lot other: _____

What are your plans to keep the grounds clean? sweep pressure wash pick up litter hired maintenance
 building owner's responsibility garbage cans outside other: _____

Who is responsible to keep the grounds clean? licensee building owner employees hired maintenance
 other: _____

Do you buy, sell, exchange or deal in used or secondhand bicycles, bicycle parts, tires or batteries, either retail or wholesale?
 Yes No; If yes, describe:

SUBMIT THIS FORM ALONG WITH THE "BUSINESS LICENSE APPLICATION"



CITY OF MILWAUKEE
OFFICE OF THE CITY CLERK

Thursday, November 20, 2014

COMMITTEE MEETING NOTICE

AD 13

Oanh Vu

5629 S 29th St

Milwaukee, WI 53221

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

Monday, December 01, 2014 at 08:30 AM

Regarding: Your Class B Fermented Malt Beverage and Class C Wine Retailer's License Applications with Service Bar Only for "Pho Hai Tuyet I" at 204 W Layton Av.

There is a possibility that your application may be denied for one or more of the following reasons: you do not meet the statutory and municipal requirements; the fitness and appropriateness of the location to be licensed and whether the location will create undesirable neighborhood problems (such as disorderly congregations of people, excessive litter, unreasonable noise, and traffic and parking problems), whether or not there is an over-concentration of alcohol beverage establishments in the neighborhood; whether or not you have been charged with or convicted of any felony, misdemeanor, municipal offense or other offense, the circumstances of which substantially relate to the licensed activity; and any other factors which reasonably relate to the public health, safety and welfare. See attached police report and/or written correspondence regarding this application. Please be advised the public will be able to provide information to the committee in person or in writing. The committee will receive and consider evidence regarding the above mentioned criteria.

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JIM OWCZARSKI, CITY CLERK

BY:

Jason Schunk
License Division Manager

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

MILWAUKEE POLICE DEPARTMENT LICENSING

CRIMINAL RECORD/ORDINANCE VIOLATION/INCIDENTS SYNOPSIS

DATE: 09/10/2014
LICENSE TYPE: BMALT
NEW:
RENEWAL:

No. 193966
Application Date: 09/08/2014

License Location: 204 West Layton Ave.
Business Name: Pho Hai Tuyet I

Licensee/Applicant: Vu, Oanh
(Last Name, First Name, MI)
Date of Birth: 11/05/1964

Home Address: 5629 South 29th Street
City: Milwaukee State: WI Zip Code: 53221
Home Phone: (414) 687-9474

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

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

1. On 01/04/2010 the applicant was cited at 3519 West National Avenue in the city of Milwaukee for Building Code Violations.

Charge: Building Code Violations
Finding: Guilty
Sentence: \$780.00 fine
Date: 11/17/2011
Case: 10039944

Date: 11-06-2014
Officer: Klein

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

Name of Premise: Pho Hai Tuyet
Address: 204 W. Layton Ave
Phone: 414-763-1138

Owner: Danh VU
Owner address: 5629 S. 29th St
City State Zip: Milwaukee, Wi. 53221
Owner Phone: 414-687-9474
Owner email: ov922@yahoo.com

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

Preferred contact: Same

Location currently open: YES NO

Projected open date: open

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

Hours of Operation: Sun: 9:00am to Midnight
Mon: 9:00am to Midnight
Tue: 9:00am to Midnight
Wed: 9:00am to Midnight
Thu: 9:00am to Midnight
Fri: 9:00am to Midnight
Sat: 9:00am to Midnight
24 hours Y N

Premise Type: Tavern/Bar
 Restaurant
 Other:

Licenses currently held:

- Alcohol: Yes No Class: #:
Tobacco: Yes No #:
Food: Yes No #: 0005962
Occupancy: Yes No #: 1118822
Other: Yes No Type: #:
Other: Yes No Type: #:

Exterior Survey:

1. Is the area around the location clean? Yes No
2. What surrounds the location? (Check all the apply)
 - a. Park
 - b. School
 - c. Youth Center
 - d. Church
 - e. Tavern(s) If so, how many
 - f. Residential
 - g. Other businesses
 - h. Other:
3. Can you see from the outside of the location into the interior Yes No
4. Can you see the employees inside of the location from the outside Yes No
5. Are exterior windows free of signage Yes No
6. Is there a bus stop? Yes No
7. Is there a bus shelter? Yes No N/A
8. Street parking Yes No
9. Is there a parking lot Yes No
10. Is the parking lot clean? Yes No N/A
11. Is the parking lot well lit? Yes No N/A
12. Valet Parking Yes No
 - a. Will this lot have a guard? Yes No N/A
 - b. Will this lot have cameras? Yes No N/A
13. Are there areas where a person could conceal themselves Yes No
14. Is there exterior lighting? Yes No. Does it appears to be adequate Yes No
15. Exterior Payphone? Yes No
16. Are there No Loitering Signs posted? Yes No
17. Are there exterior security cameras Yes No How Many: 4
18. Are the address numbers prominently displayed and easy to see Yes No

Exterior Comments:

Camera Survey:

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

d. Recorded Yes No

22. How long is footage stored for later viewing: 1 week

23. Are there exterior cameras Yes No How many: 4

24. Are there interior cameras Yes No How many: 8

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

26. Cameras located in parking lot Yes No N/A How many: 2

Camera Survey Comments:

Interior Survey:

27. What is the planned/posted capacity 99

28. What is the minimum number of employees that will be on premise 3

29. Is the storeowner willing to be a standing complainant regarding loitering? Yes No

a. If yes have them fill out the standing complaint form and give them two of the commercial signs Yes No

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

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

32. Are emergency and non-emergency numbers posted near the phone? Yes No

33. Does the owner know how to contact their police district directly? Yes No

a. Did you provide a district contact guide to the owner? Yes No

Interior Comments:

Security

34. How many security personnel are going to be employed: N/A

35. How will they be deployed: Interior Exterior N/A

36. What days will they be deployed Mon Tue Wed Thu Fri Sat Sun ALL

37. Will the security be managed by business or contracted

38. Will they be armed Yes No N/A

39. What type of security measures will be used: N/A

Wanding/metal detector

ID Scanner

Dress Code

Cover Charge

Age restriction

Other

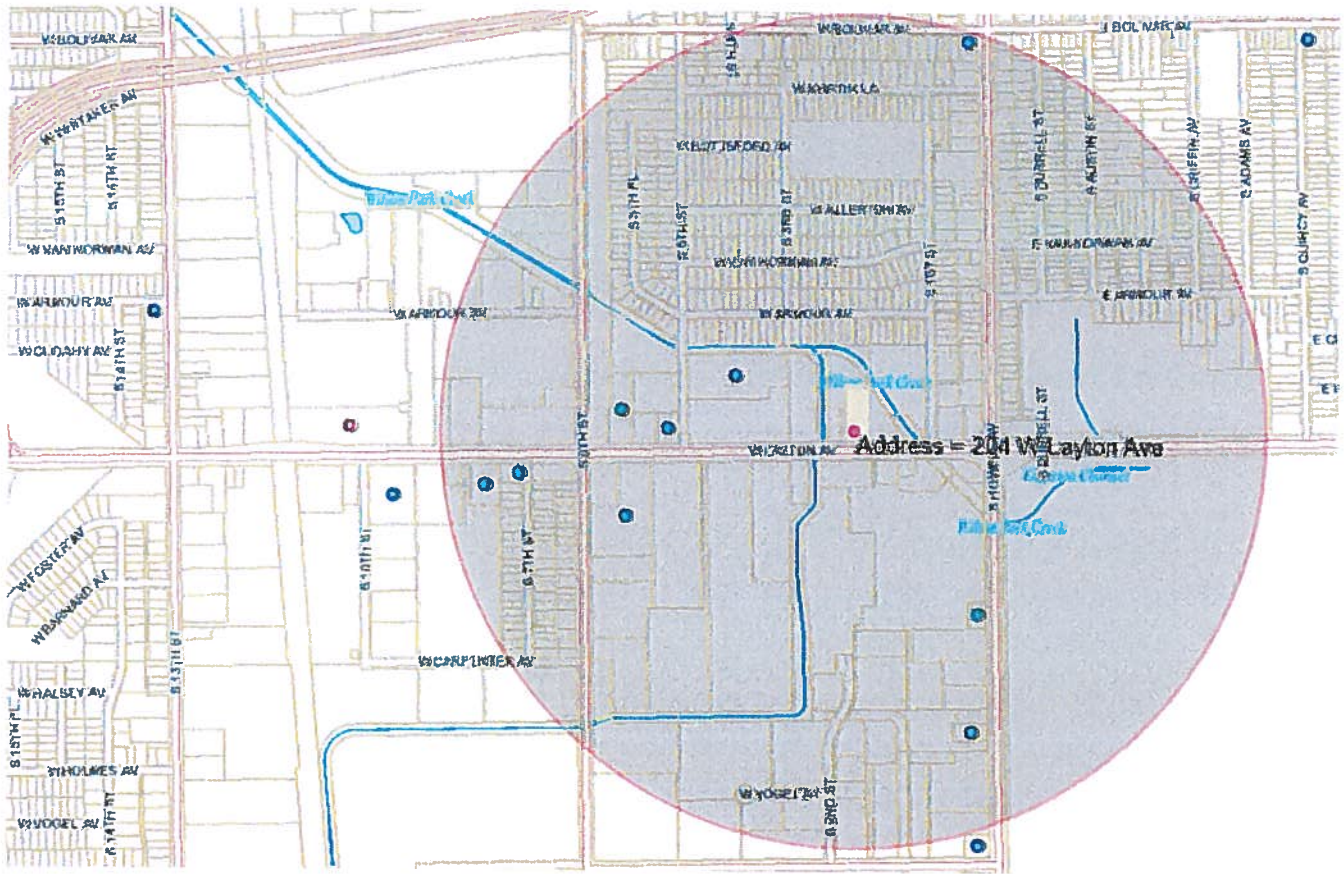
40. When at capacity, how will the overflow crowd be managed? Waiting area to be seated

41. Will a guard monitor the overflow crowd at all times? Yes No

Security Comments:

ADDITIONAL COMMENTS/RECOMMENDATIONS:

Open restaurant that would like to sell alcohol.



Licensed Alcohol beverage Establishments within a .5 Mile Radius Centered on 204 W Layton Ave 11/12/2014							Total
License Summary:							
Class B Fermented Malt Beverage Retailer's License							2
Class B Tavern License							8
Class C Wine Retailer's License							1
							Grand Total : 11
Legal entity	Trade name	Licensee	Address	License type name	Total capacity	Room capacity	Expiration date
AIRPORT PIZZA ROC, INC	Rocky Rococo Pizza & Pasta	EARL W RAMBO, Agt	4849 S HOWELL AV	Class B Fermented Malt Beverage Retailer's License	98		4/16/2015
Koi Japanese Cuisine, LLC	Koi Japanese Cuisine	Zhou W NI, Agt	552 W Layton AV E	Class B Fermented Malt Beverage Retailer's License			9/23/2015
703 CLUB, INC	703 CLUB	THERESA R SOLLAZO, Agt	703 W LAYTON AV	Class B Tavern License	61		6/30/2015
Crefil Waramaug Milwaukee Airport Lessee LLC	Holiday Inn & Suites Milwaukee Airport	Chad M Ahrens, Agt	545 W Layton AV	Class B Tavern License	61		10/14/2015
ELLTON CORPORATION	FINAL APPROACH	JEFFREY T ELLSWORTH, Agt	4959 S HOWELL AV	Class B Tavern License	120		12/21/2014
GMF Hotel, LLC	Courtyard By Marriott	DARYL R JOHNSON, Agt	4620 S 5th ST	Class B Tavern License	115		7/25/2015
KRAZO, INC	BEERBELLY'S	JANE DICHRISTOPHER STOLTZ, Agt	512 W LAYTON AV	Class B Tavern License	80		6/23/2015
LB LLC	On The Clock	ROBERT J KRAUSE, Agt	4301 S Howell AV	Class B Tavern License	80		9/3/2015
Milwaukee Grill LLC	Wild Bill's Sports Saloon	Branden G Warner, Agt	789 W Layton AV	Class B Tavern License	216		3/3/2015
NMG-MILWAUKEE OPERATING, LLC	Holiday Inn & Suites Milwaukee/Runway 12	Chad M Ahrens, Agt	545 W LAYTON AV	Class B Tavern License			2/27/2015
Koi Japanese Cuisine, LLC	Koi Japanese Cuisine	Zhou W NI, Agt	552 W Layton AV E	Class C Wine Retailer's License			9/23/2015



Thursday, November 20, 2014

Licenses Committee Notice of Hearing

PONDEROSA SYSTEMS, INC
C/O MAROHL CONSTRUCTION
10848 W Wisconsin Av

Wauwatosa, WI 53226

Date: 12/1/2014
Time: 08:30 AM
Location: Room 301-B, Third Floor, City Hall

The Licenses Committee will consider the following license application:

Class B Fermented Malt Beverage and Class C Wine Retailer's License Applications
with Service Bar Only
Oanh Vu
Pho Hai Tuyet I at 204 W Layton Av

Please note this application may be recommended for denial based on fitness of the location due to concentration of alcohol beverage outlets in the area. If the application is denied for this reason, no other application for an alcohol beverage license for this location shall be recommended for approval by the Licenses Committee within three years of the date of denial unless the applicant has demonstrated a change of circumstances since the prior denial.

If you have any questions, please call (414) 286-2238.





PLAN OF OPERATION

1. Premises Location

Free Standing Building Strip Mall Other _____

2. Describe Premises Structure

Single Story Multi-Story - # of Stories _____ Other _____

3. Describe Surrounding Area

Commercial Residential Industrial Other _____

4. Premises Location

a) Major Thoroughfare Secondary Street Other _____
 b) Nearest Cross Street Layton

5. Proximity of Premises to Church, School, or Hospital

Is there at least 300 feet between the building and any church, school or hospital? Yes No

6. Miscellaneous Business Questions

- a) Proposed Opening Date: 08-15-14
- b) Is this premise under construction? Yes No If yes, list estimated completion date: _____
- c) Is this a franchise? Yes No
- d) Is this premises currently licensed? Yes No If yes, list type of license: Food
- e) Is the current licensee operating? Yes No If no, list date closed: _____
- f) What other types of licenses/permits will you or do you hold at this location? (check all that apply)
 Occupancy Permit Cigarette & Tobacco Gas Station Extended Hours
 Other: _____
- g) Do you have future plans for other businesses, licenses or permits at this location? Yes No
 If yes, explain: _____

7. Food

Will food be served on the premises? No Yes If yes, a Food Dealer license is required.

Check all that apply: Prepackaged Food Snacks Appetizers Catered Events

Full Meals - Hours of Food Service: From 10 To MIDNIGHT

A menu must be submitted with this Plan of Operation for all restaurants.

8. Type of Business

Briefly describe the type of business you plan to operate if granted a license (attach additional sheets as necessary.)

Restaurant is sitdown and carry.

9. Litter and Noise

How are the grounds kept clean? Sweep Pressure Wash Pick Up Litter Other: _____

How often will grounds be cleaned? Daily Weekly Other: _____

Grounds Cleaned By: Licensee Building Owner Employees Hired Maintenance Other: _____

How are noise issues prevented and/or addressed? Security Manager approaches customer(s) Call Police
 Signs Posted Other: _____

10. Smoking and Sanitation

Are there designated outdoor smoking areas? No Yes
 If yes, describe the area(s) and provide location(s): _____

Number of Garbage Cans: Inside: 3 Locations: Kitchen
 Outside: 2 Locations: Parking

Is a Crowd Control Barrier used? No Yes If yes, describe: _____

Describe sanitation facilities (restrooms): clean very day

Provide name of solid waste contractor: WM

11. Security

Are there parking spaces on the premises? No Yes If yes, number of spaces: 40 and describe security provisions: _____

Are there designated loading areas? No Yes If yes, describe security provisions _____

Do you have security personnel on the premise? No Yes If yes, how many? _____

AND What are their responsibilities? _____

What security equipment do they use? _____

List their licensing, certification or training credentials: _____

Are there security cameras? No Yes If yes, list all locations: _____

Are searches and/or identification checks conducted upon entry? No Yes If yes, describe: _____

12. Percentage of Sales (must total 100%)

Alcohol <u>10</u> %	Food Sales <u>90</u> %	Entertainment _____ %	Other _____ %
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13. Businesses On The Premise (choose all that apply):

Type 1

Full Service Restaurant Cafe/Coffee Shop Deli or Fast Food Restaurant Private/Fraternal/Veterans Club

Night Club Tavern Cocktail Lounge Teen Club

Bowling Alley Hotel Banquet Hall Sports Facility

Type 2

Liquor Store Corner Store Supermarket Convenience Store

Gas Station Other _____

14. Legal Capacity of Premises (Only premises identified as Type I in Question #13)

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

15. Hours of Operation

Day of the Week	Proposed Hours of Operation:		Number of Customers expected each day	Potential Age Range of Customers	Class B Applicants: Age Restriction (If none, write 'None')
	Open	Close			
Sunday	10 AM	Midnight	10 - 50	↑	↑
Monday	9 AM	"	Same	1 - 10	↑
Tuesday	9 AM	"	N/A	↓	None
Wednesday	9 AM	"	N/A		
Thursday	9 AM	"	N/A		
Friday	9 AM	"	N/A		
Saturday	9 AM	"	N/A		

Entertainment Indoor Closing Hours - If alcohol beverage establishment, same as alcohol license hours.
 If non-alcohol establishment 1:00 am Sunday to Thursday; 1:30 am Friday and Saturday.

Entertainment Outdoor Closing Hours - 10:00 pm Sunday - Thursday; 12:00 am Friday and Saturday,
 unless otherwise approved by Common Council in licensee's plan of operation.

16. This Section to be Completed by Alcohol Applicants Only

a) Property Owners Name: MARON Construction Inc Phone Number: 414-687-9474
 Address: 10848 W Wisconsin Ave Wauwatosa WI 53226

b) Are you taking out this application for anyone that may not be eligible for a license? No Yes
 If yes, list name and address: _____

c) Will the agent, a partner or the individual licensee be conducting the day-to-day operations of the business? No Yes
 If no, list the name and address of the person(s) who will: _____

Class B Applicants: If the agent, a partner or the individual licensee will not be conducting the day-to-day operations of the business, the person(s) listed above must obtain a Class B Managers license.

d) Does anyone else have money invested or any other interest in this business? No Yes
 If yes, explain: _____

e) 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: _____

- f) Will any of the following types of businesses be conducted at this location? (check all that apply)
- Bed & Breakfast Billiard/Pool Hall Comedy Club Indoor Golf Facility
 - Video Game Center(6 or more games) Brew Pub Volleyball Court Theater Wine Tasting Room
 - Department Store Pharmacy Gift Shop Museum Center for the Visual & Performing Arts

g) If applying for Class B or C license, are you applying for "Service Bar Only"? No Yes
 Service Bar Only means customers cannot sit at the bar. Alcohol is served to patrons seated at tables. No stools, chairs or other articles of furniture shall be placed at the service bar for patrons to sit upon.

17. Proof of Ownership, Lease, or Offer to Purchase (new & transfer applicants only)

Submit proof of ownership, lease, or offer to purchase the building with this application.

- A lease or offer to purchase must:
- a) Be in the same legal entity name as that apply for the license
 - b) Reflect the same address as the premises address on this application
 - c) Reflect current dates and
 - d) Be signed by the lessor/seller and lease/buyer

18. Property Information (new & transfer applicants only)

- a) Do you own or lease the building? Own Lease
- b) Who owns the fixtures (for example, coolers, etc.)? QANH VU
- c) Are you purchasing the stock and/or fixtures? No Yes If yes, amount paid \$ _____
- d) Total amount paid for business \$ 5000.00
- e) Total amount paid for goodwill of the business \$ 100

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

19. Lease Information (new & transfer applicants who are leasing the premises only)

- a) Date lease begins 11-2013 Ends 11-2018
- b) Monthly rental \$ 5000.00
- c) Do you have an option to renew the lease? No Yes
- d) Does your lease allow for assignment to another party without the consent of the owner? No Yes
- e) For what length of time have you been guaranteed occupancy (number of years)? _____
- 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 _____

20. 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): _____

21. Notarized Signatures of Applicants

SUBSCRIBED AND SWORN TO BEFORE ME

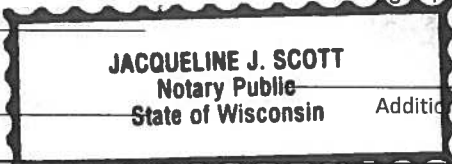
This 12 day of August, 20 14

Jacquel J Scott
(Clerk/Notary Public)

[Signature]
Agent/Owner/Partner

My Commission Expires 2/21/2016

*Notary Seal must be affixed.



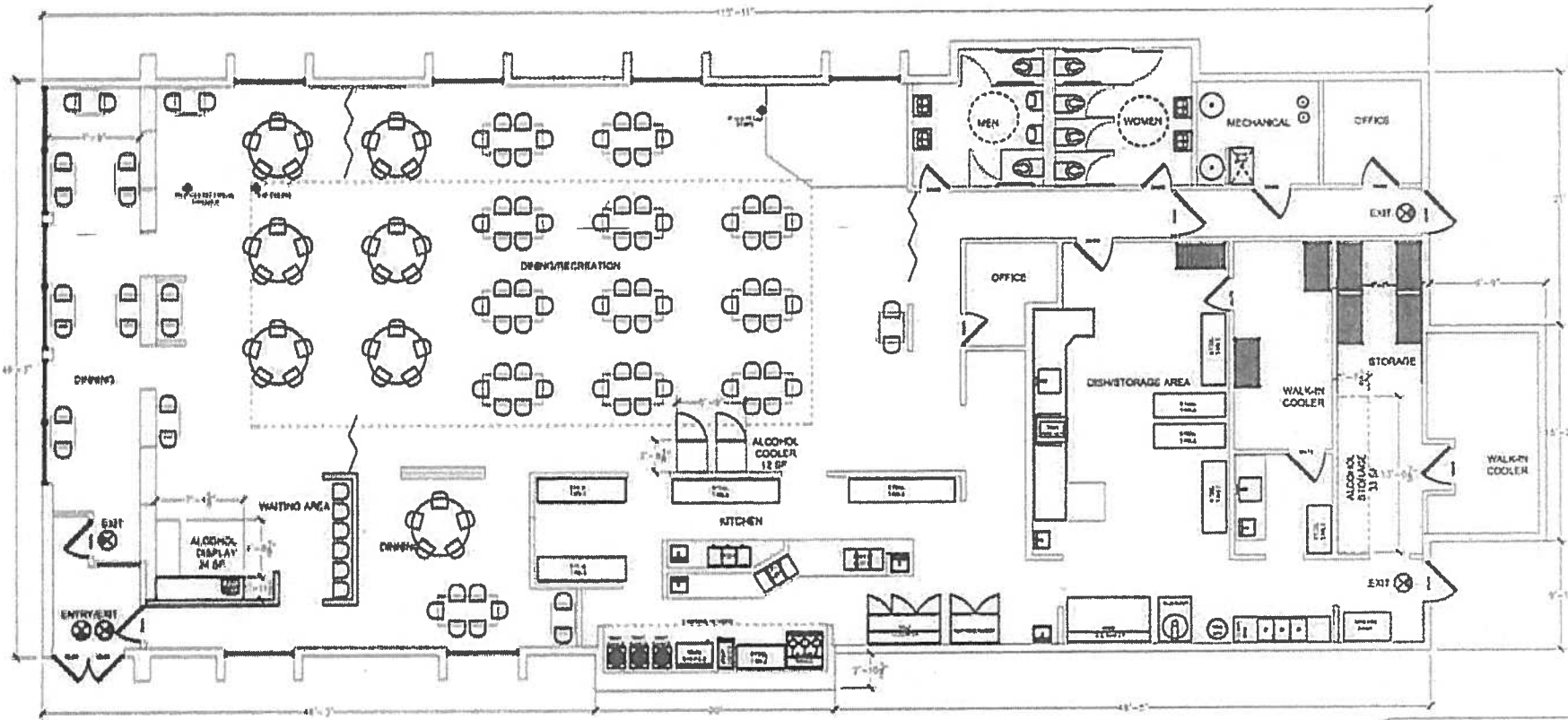
N/A
Additional Owner/Partner

Note: All information contained in this application is subject to approval by the Common Council. Deviating from approved plan of operation will subject licensee to citations, and/or suspension or non-renewal of the license. Contact the License Division for information on how to request changes.

New and transfer of premise applicants must submit the following:

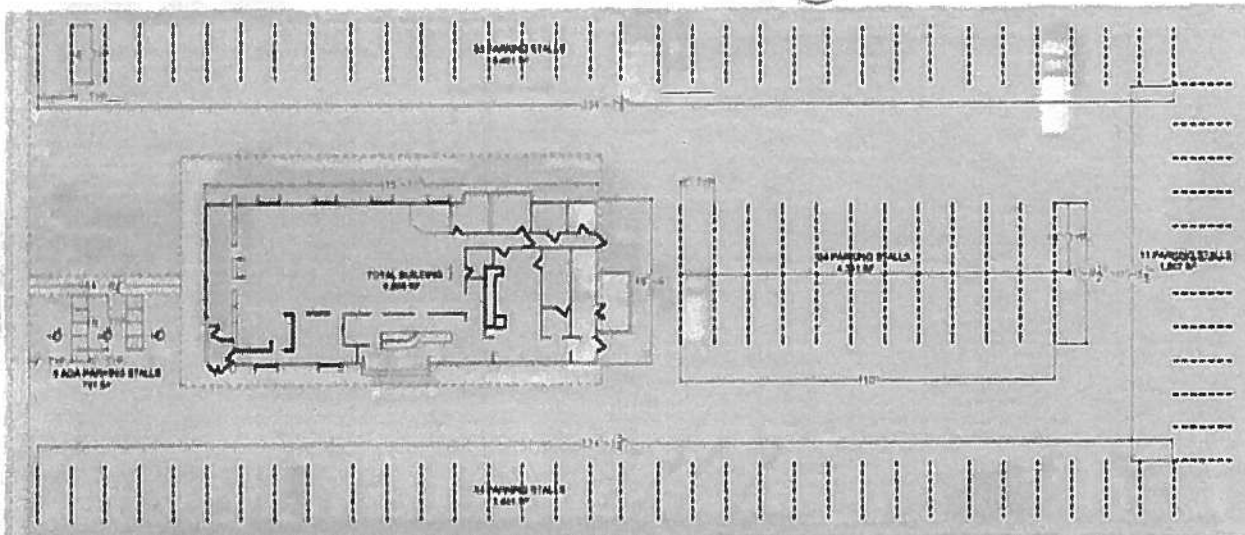
- Proof of ownership, lease or offer to purchase the building
- Detailed floor plan
- If a restaurant, copy of the menu

If you do not provide all required information, your application will be returned to you.



6000 Feet

2/A100 EXISTING FLOOR PLAN | Scale: NTS



1/A100 EXISTING SITE PLAN | Scale: NTS

DAVID JONSON

BUSINESS NAME: PHO HAI TUYET
 ENTITY NAME: PHO HAI TUYET
 ADDRESS: 204 W LAYTON AVE
 MILWAUKEE, WI 53221
 CONTACT: 414.678.8762



sosarc

DESIGNER: SOM A. SOUVONG
 CONTACT: 414.750.7591
 EMAIL: SOUVONG@GMAIL.COM
 DATE: 10.02.12

SHEET NO:

A100



CITY OF MILWAUKEE
OFFICE OF THE CITY CLERK

Friday, November 21, 2014

COMMITTEE MEETING NOTICE

AD 13



HEIN, Roger WILLIAM, Agent
The Bowery Group LLC
7021 S Ash St

Oak Creek, WI 53154

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

Monday, December 01, 2014 at 08:30 AM

Regarding: Your Class B Tavern, Food Dealer - Restaurant, and Public Entertainment Premises License Applications Requesting a Jukebox and 5 Amusement Machines as agent for "The Bowery Group LLC" for "The Red Zone-Milwaukee" at 6247 S Howell Av.

There is a possibility that your application may be denied  one or more of the following reasons: you do not meet the statutory and municipal requirements; the fitness and appropriateness  the location to be licensed and whether the location will create undesirable neighborhood problems (such as disorderly congregations of people, excessive litter, unreasonable noise, and traffic and parking problems), whether or not there is an over-concentration of alcohol beverage establishments in the neighborhood; whether or not you have been charged with or convicted of any felony, misdemeanor, municipal offense or other offense, the circumstances of which substantially relate to the licensed activity; and any other factors which reasonably relate to the public health, safety and welfare. See attached police report and/or written correspondence regarding this application. Please be advised the public will be able to provide information to the committee in person or in writing. The committee will receive and consider evidence regarding the above mentioned criteria.

Notice for applicants with warrants or unpaid fines:

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

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

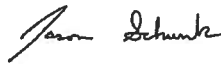
You will be given an opportunity to speak on behalf of the application and to respond and challenge any charges or reasons given for the denial. No petitions can be accepted by the committee, unless the people who signed the petition are present at the committee hearing and willing to testify. You may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

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

Limited parking for persons attending meetings in City Hall is available at reduced rates (5 hour limit) at the Milwaukee Center on the southwest corner of East Kilbourn and North Water Street. Parking tickets must be validated in the first floor information booth in City Hall.

PLEASE NOTE: Upon reasonable notice, efforts will be made to accommodate the needs of disabled individuals through sign language interpreters or other auxiliary aids. For additional information or to request this service, contact the Council Services Division ADA Coordinator at (414) 286-2998, Fax - (414) 286-3456, TDD - (414) 286-2025.

JIM OWCZARSKI, CITY CLERK

BY: 

Jason Schunk
License Division Manager

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

200 E. Wells Street, Room 105, City Hall, Milwaukee, WI 53202. www.milwaukee.gov/license
Phone: (414) 286-2238 Fax: (414) 286-3057 Email Address: License@milwaukee.gov

Date:10/16/2014
Officer: P.O. Klein

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

Name of Premise: Red Zone
Address: 6247 S. Howell Ave
Phone: 414-840-3260

Owner: Roger Hein
Owner address: 7021 S. Ash St.
City State Zip: Oak Creek
Owner Phone: 414-840-3260
Owner email:

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

Preferred contact: Same

Location currently open: YES NO

Projected open date: 01/01/15

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

Hours of Operation: Sun: 11:00am to 2:00am
Mon: 11:00am to 2:00am
Tue: 11:00am to 2:00am
Wed: 11:00am to 2:00am
Thu: 11:00am to 2:00am
Fri: 11:00am to 2:30am
Sat: 11:00am to 2:30am
24 hours Y N

Premise Type: Tavern/Bar
Restaurant
Other:

Licenses currently held:

Alcohol:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Class:	#: 3023 W. Ryan Rd
Tobacco:	<input type="checkbox"/> Yes <input type="checkbox"/> No		#:
Food:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		#: 3023 W. Ryan Rd
Occupancy:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		#: 3023 W. Ryan Rd
Other:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Type:	#:
Other:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Type:	#:

Exterior Survey:

1. Is the area around the location clean? Yes No
2. What surrounds the location? (Check all the apply)
 - a. Park
 - b. School
 - c. Youth Center
 - d. Church
 - e. Tavern(s) If so, how many3
 - f. Residential
 - g. Other businesses
 - h. Other:Airport
3. Can you see from the outside of the location into the interior Yes No
4. Can you see the employees inside of the location from the outside Yes No
5. Are exterior windows free of signage Yes No
6. Is there a bus stop? Yes No
7. Is there a bus shelter? Yes No N/A
8. Street parking Yes No
9. Is there a parking lot Yes No
10. Is the parking lot clean? Yes No N/A
11. Is the parking lot well lit? Yes No N/A
12. Valet Parking Yes No
 - a. Will this lot have a guard? Yes No N/A
 - b. Will this lot have cameras? Yes No N/A
13. Are there areas where a person could conceal themselves Yes No
14. Is there exterior lighting? Yes No. Does it appears to be adequate Yes No
15. Exterior Payphone? Yes No
16. Are there No Loitering Signs posted? Yes No
17. Are there exterior security cameras Yes No How Many:
18. Are the address numbers prominently displayed and easy to see Yes No

Exterior Comments: Advised to trim or remove bushes that are located next to the building on the front and south side as they are over grown and could conceal someone.

Camera Survey:

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

c. VCR Yes No

d. Recorded Yes No

22. How long is footage stored for later viewing:

23. Are there exterior cameras Yes No How many:

24. Are there interior cameras Yes No How many:

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

26. Cameras located in parking lot Yes No N/A How many

Camera Survey Comments: 16 cameras are to be installed prior to opening. Cameras will be facing each entry door along with covering the parking lot. Only the owner will be able to recover video.

Interior Survey:

27. What is the planned/posted capacity 150

28. What is the minimum number of employees that will be on premise 2

29. Is the storeowner willing to be a standing complainant regarding loitering? Yes No

a. If yes have them fill out the standing complaint form and give them two of the commercial signs Yes No

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

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

32. Are emergency and non-emergency numbers posted near the phone? Yes No

33. Does the owner know how to contact their police district directly? Yes No

a. Did you provide a district contact guide to the owner? Yes No

Interior Comments: Full remodel is in the process of being started/completed

Security

34. How many security personnel are going to be employed: N/A

35. How will they be deployed: Interior Exterior N/A

36. What days will they be deployed Mon Tue Wed Thu Fri Sat Sun ALL

37. Will the security be managed by business or contracted

38. Will they be armed Yes No N/A

39. What type of security measures will be used: N/A

Wanding/metal detector

ID Scanner

Dress Code

Cover Charge

Age restriction

Other

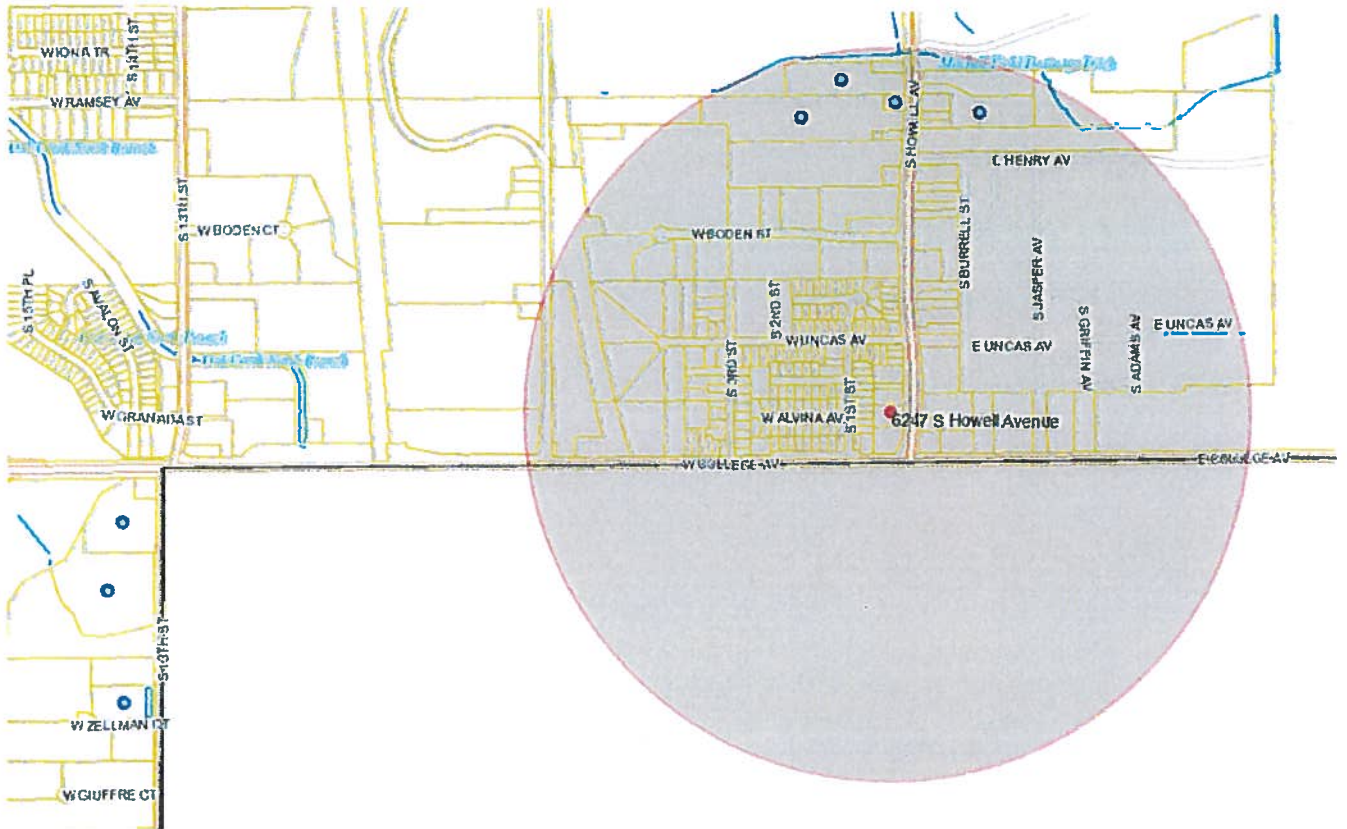
40. When at capacity, how will the overflow crowd be managed?

41. Will a guard monitor the overflow crowd at all times? Yes No

Security Comments:

ADDITIONAL COMMENTS/RECOMMENDATIONS:

Bar back will be responsible for checking I'ds



Licensed Alcohol Beverage Establishments within a .5 Mile Radius Centered on 6247 S. Howell Avenue										
	License Summary								Total	
	Class B Tavern License								4	
								Grand Total	4	
Expiration date	Legal entity	Trade name	Licensee	House number	Street direction	Street name	Street type	License type name	Total capacity	Room capacity
9/30/2014	AIRPORT LOUNGE, INC	AIRPORT LOUNGE	GEORGE C TSITSOS, Agt	5881	S	HOWELL	AV	Class B Tavern License	237	
7/6/2015	HOWELL AVE FOS LODGING ASSOC, LLC	HILTON GARDEN INN-MILW AIRPORT	David W Noel, Agt	5890	S	HOWELL	AV	Class B Tavern License	120	
6/30/2015	LANDMARK 1850 INN	LANDMARK 1850 INN	JOSEPH G HALSER, III, SP	5905	S	HOWELL	AV	Class B Tavern License	150	inside 99
3/25/2015	THE TERMINAL	THE TERMINAL	JOSEPH G HALSER, III, SP	5917	S	HOWELL	AV	Class B Tavern License	300	patio 51



Friday, November 21, 2014



Notice of Public Hearing

HEIN, Roger WILLIAM, Agent
The Red Zone-Milwaukee at 6247 S Howell Av
Class B Tavern, Food Dealer - Restaurant, and Public Entertainment Premises License
Applications Requesting a Jukebox and 5 Amusement Machines

Monday, December 01, 2014 at 8:30 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 12/1/2014 at 8:30 AM, in Room 301-B, Third Floor, City Hall. If you wish, you may provide testimony at the hearing regarding the request; see below for further information. You are not required to attend the hearing. Once the Licenses Committee makes its recommendation, this recommendation is forwarded to the full Common Council for approval at its next regularly scheduled hearing. Please review the information below and if you have further questions regarding this process, please contact the License Division at (414) 286-2238.

Important details for those wishing to provide information for the Licenses Committee to consider when making its recommendation:

1. The license application is scheduled to be heard at the above time. Due to other hearings running longer than scheduled, you may have to wait some time to provide your testimony.
2. You must appear in person and testify as to matters that you have personally experienced or seen. (You cannot provide testimony for your neighbor, parent or anyone else; this is considered hearsay and cannot be considered by the committee.)
3. No letters or petitions can be accepted by the committee (unless the person who wrote the letter or the persons who signed the petition are present at the committee hearing and willing to testify).
4. Persons opposed to the license application are given the opportunity to testify first; supporters may testify after the opponents have finished.
5. When you are called to testify, you will be sworn in and asked to give your name, and address. (If your first and/or last names are uncommon please spell them.)
6. You may then provide testimony.
 - a. Include only information relating to the above license application.
 - b. Include only information you have personally witnessed or seen.
 - c. Provide concise and relevant information detailing how this business has affected or may affect the peaceful enjoyment of your neighborhood.
 - d. If by the time you have the opportunity to testify, the information you wish to share has already been provided to the committee, you may state that you agree with the previous testimony. Redundant or repetitive testimony will not assist the committee in making its recommendation.
7. After giving your testimony, the members of the Licenses Committee and the licensee may ask questions regarding the testimony you have given or other factors relating to the license application.
8. Business Competition is not a valid basis for denial or non-renewal of a license.
Please Note: If you have submitted an objection to the above application your objection cannot be considered by the committee unless you personally testify at the hearing.

RESIDENT	MAIL ADDRESS	CITY AND ZIP CODE
CURRENT RESIDENT	121 W UNCAS AVE	MILWAUKEE, WI 53207-6243
CURRENT RESIDENT	122 E COLLEGE AVE	MILWAUKEE, WI 53207-6202
CURRENT RESIDENT	127 W UNCAS AVE	MILWAUKEE, WI 53207-6243
CURRENT RESIDENT	133 W UNCAS AVE	MILWAUKEE, WI 53207-6243
CURRENT RESIDENT	137 W UNCAS AVE	MILWAUKEE, WI 53207-6243
CURRENT RESIDENT	164 W COLLEGE AVE	MILWAUKEE, WI 53207-6261
CURRENT RESIDENT	165 W MANGOLD AVE	MILWAUKEE, WI 53207-6239
CURRENT RESIDENT	167 W ALVINA AVE	MILWAUKEE, WI 53207-6216
CURRENT RESIDENT	168 W COLLEGE AVE	MILWAUKEE, WI 53207-6261
CURRENT RESIDENT	170 W ALVINA AVE	MILWAUKEE, WI 53207-6217
CURRENT RESIDENT	171 W ALVINA AVE	MILWAUKEE, WI 53207-6216
CURRENT RESIDENT	171 W MANGOLD AVE	MILWAUKEE, WI 53207-6239
CURRENT RESIDENT	172 W COLLEGE AVE	MILWAUKEE, WI 53207-6261
CURRENT RESIDENT	174 W ALVINA AVE	MILWAUKEE, WI 53207-6217
CURRENT RESIDENT	175 W ALVINA AVE	MILWAUKEE, WI 53207-6216
CURRENT RESIDENT	175 W MANGOLD AVE	MILWAUKEE, WI 53207-6239
CURRENT RESIDENT	6168 S 1ST ST	MILWAUKEE, WI 53207-6253
CURRENT RESIDENT	6172 S 1ST ST	MILWAUKEE, WI 53207-6253
CURRENT RESIDENT	6173 S HOWELL AVE	MILWAUKEE, WI 53207-6262
CURRENT RESIDENT	6175 S 1ST ST	MILWAUKEE, WI 53207-6252
CURRENT RESIDENT	6178 S 1ST ST	MILWAUKEE, WI 53207-6253
CURRENT RESIDENT	6179 S HOWELL AVE	MILWAUKEE, WI 53207-6262
CURRENT RESIDENT	6188 S 1ST ST	MILWAUKEE, WI 53207-6253
CURRENT RESIDENT	6200 S 1ST ST	MILWAUKEE, WI 53207-6256
CURRENT RESIDENT	6204A S HOWELL AVE	MILWAUKEE, WI 53207-6238
CURRENT RESIDENT	6206 S 1ST ST	MILWAUKEE, WI 53207-6256
CURRENT RESIDENT	6214 S 1ST ST	MILWAUKEE, WI 53207-6256
CURRENT RESIDENT	6215 S HOWELL AVE	MILWAUKEE, WI 53207-6237
CURRENT RESIDENT	6215A S HOWELL AVE	MILWAUKEE, WI 53207-6237
CURRENT RESIDENT	6220 S 1ST ST	MILWAUKEE, WI 53207-6256
CURRENT RESIDENT	6230 S HOWELL AVE	MILWAUKEE, WI 53207-6238
CURRENT RESIDENT	6230A S HOWELL AVE	MILWAUKEE, WI 53207-6238
CURRENT RESIDENT	6234 S 1ST ST	MILWAUKEE, WI 53207-6256
CURRENT RESIDENT	6244 S 1ST ST	MILWAUKEE, WI 53207-6256
CURRENT RESIDENT	6250 S 1ST ST	MILWAUKEE, WI 53207-6256
CURRENT RESIDENT	6268 S 1ST ST	MILWAUKEE, WI 53207-6256

Total Records: 37

Radius: 350.0 feet and Center of Circle: 6247 S Howell AV



Friday, November 21, 2014

Licenses Committee Notice of Hearing

DOLORES ADAMCZYK
Revocable Living Trust
6247 S HOWELL Av

MILWAUKEE, WI 53207

Date: 12/1/2014
Time: 08:30 AM
Location: Room 301-B, Third Floor, City Hall

The Licenses Committee will consider the following license application:

Class B Tavern, Food Dealer - Restaurant, and Public Entertainment Premises
License Applications Requesting a Jukebox and 5 Amusement Machines
HEIN, Roger WILLIAM, Agent
The Red Zone-Milwaukee at 6247 S Howell Av

Please note this application may be recommended for denial based on fitness of the location due to concentration of alcohol beverage outlets in the area. If the application is denied for this reason, no other application for an alcohol beverage license for this location shall be recommended for approval by the Licenses Committee within three years of the date of denial unless the applicant has demonstrated a change of circumstances since the prior denial.

If you have any questions, please call (414) 286-2238.





Friday, November 21, 2014

Licenses Committee Notice of Hearing

The Bowery Group LLC
7021 S Ash St

Oak Creek, WI 53154

Date: 12/1/2014
Time: 08:30 AM
Location: Room 301-B, Third Floor, City Hall

The Licenses Committee will consider the following license application:

Class B Tavern, Food Dealer - Restaurant, and Public Entertainment Premises
License Applications Requesting a Jukebox and 5 Amusement Machines
HEIN, Roger WILLIAM, Agent
The Red Zone-Milwaukee at 6247 S Howell Av

Please note this application may be recommended for denial based on fitness of the location due to concentration of alcohol beverage outlets in the area. If the application is denied for this reason, no other application for an alcohol beverage license for this location shall be recommended for approval by the Licenses Committee within three years of the date of denial unless the applicant has demonstrated a change of circumstances since the prior denial.

If you have any questions, please call (414) 286-2238.





PLAN OF OPERATION

1. Premises Location

Free Standing Building Strip Mall Other _____

2. Describe Premises Structure

Single Story Multi-Story - # of Stories _____ Other _____

3. Describe Surrounding Area

Commercial Residential Industrial Other _____

4. Premises Location

a) Major Thoroughfare Secondary Street Other _____
 b) Nearest Cross Street Howell Avenue & College Avenue

5. Proximity of Premises to Church, School, or Hospital

Is there at least 300 feet between the building and any church, school or hospital? Yes No

6. Miscellaneous Business Questions

- a) Proposed Opening Date: 10-15-14
- b) Is this premise under construction? Yes No If yes, list estimated completion date: _____
- c) Is this a franchise? Yes No
- d) Is this premises currently licensed? Yes No If yes, list type of license: _____
- e) Is the current licensee operating? Yes No If no, list date closed: _____
- f) What other types of licenses/permits will you or do you hold at this location? (check all that apply)
 Occupancy Permit Cigarette & Tobacco Gas Station Extended Hours
 Other: _____
- g) Do you have future plans for other businesses, licenses or permits at this location? Yes No
 If yes, explain: Food Dealer

7. Food

Will food be served on the premises? No Yes If yes, a Food Dealer license is required.
 Check all that apply: Prepackaged Food Snacks Appetizers Catered Events
 Full Meals – Hours of Food Service: From _____ To _____
 A menu must be submitted with this Plan of Operation for all restaurants.

8. Type of Business

Briefly describe the type of business you plan to operate if granted a license (attach additional sheets as necessary.)
Import-Micro Beers Sports Bar

9. Litter and Noise

How are the grounds kept clean? Sweep Pressure Wash Pick Up Litter Other: _____

How often will grounds be cleaned? Daily Weekly Other: _____

Grounds Cleaned By: Licensee Building Owner Employees Hired Maintenance Other: _____

How are noise issues prevented and/or addressed? Security Manager approaches customer(s) Call Police
 Signs Posted Other: _____

10. Smoking and Sanitation

Are there designated outdoor smoking areas? No Yes

If yes, describe the area(s) and provide location(s): _____

Number of Garbage Cans: Inside: 4 Locations: 2 - behind bar & Each bathroom
 Outside: 2 Locations: rear of building

Is a Crowd Control Barrier used? No Yes If yes, describe: _____

Describe sanitation facilities (restrooms): 1 - Mens 1 - WOMENS

Provide name of solid waste contractor: Waste Management or Advance Disposal

11. Security

Are there parking spaces on the premises? No Yes If yes, number of spaces: _____ and describe security provisions: _____

Are there designated loading areas? No Yes If yes, describe security provisions _____

Do you have security personnel on the premise? No Yes If yes, how many? _____

AND What are their responsibilities? _____

What security equipment do they use? _____

List their licensing, certification or training credentials: _____

Are there security cameras? No Yes If yes, list all locations: _____

Are searches and/or identification checks conducted upon entry? No Yes If yes, describe: Bar-tenders check ID's for Proof of age.

12. Percentage of Sales (must total 100%)

Alcohol 95 % Food Sales 2 % Entertainment 3 % Other _____ %

13. Businesses On The Premise (choose all that apply):

Type 1

- | | | | |
|--|--|---|--|
| <input type="checkbox"/> Full Service Restaurant | <input type="checkbox"/> Cafe/Coffee Shop | <input type="checkbox"/> Deli or Fast Food Restaurant | <input type="checkbox"/> Private/Fraternal/Veterans Club |
| <input type="checkbox"/> Night Club | <input checked="" type="checkbox"/> Tavern | <input type="checkbox"/> Cocktail Lounge | <input type="checkbox"/> Teen Club |
| <input type="checkbox"/> Bowling Alley | <input type="checkbox"/> Hotel | <input type="checkbox"/> Banquet Hall | <input type="checkbox"/> Sports Facility |

Type 2

- | | | | |
|---------------------------------------|---------------------------------------|--------------------------------------|--|
| <input type="checkbox"/> Liquor Store | <input type="checkbox"/> Corner Store | <input type="checkbox"/> Supermarket | <input type="checkbox"/> Convenience Store |
| <input type="checkbox"/> Gas Station | <input type="checkbox"/> Other _____ | | |

14. Legal Capacity of Premises (Only premises identified as Type I in Question #13)

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

15. Hours of Operation

Day of the Week	Proposed Hours of Operation:		Number of Customers expected each day	Potential Age Range of Customers	Class B Applicants: Age Restriction (If none, write 'None')
	Open	Close			
Sunday	11am	2am	100	25-55	21 + over
Monday	3pm	2am	50		↓
Tuesday	3pm	2am	50		
Wednesday	3pm	2am	50		
Thursday	3pm	2am	50		
Friday	3pm	2:30am	80		
Saturday	11am	2:30pm	100		

Entertainment Indoor Closing Hours - If alcohol beverage establishment, same as alcohol license hours.
 If non-alcohol establishment 1:00 am Sunday to Thursday; 1:30 am Friday and Saturday.

Entertainment Outdoor Closing Hours - 10:00 pm Sunday – Thursday; 12:00 am Friday and Saturday,
 unless otherwise approved by Common Council in licensee’s plan of operation.

16. This Section to be Completed by Alcohol Applicants Only

a) Property Owners Name: The Bowery Group LLC Phone Number: 414 840-3260
 Address: 7021 S. Ash St. Oak Creek WI 53157

b) Are you taking out this application for anyone that may not be eligible for a license? No Yes
 If yes, list name and address: _____

c) Will the agent, a partner or the individual licensee be conducting the day-to-day operations of the business? No Yes
 If no, list the name and address of the person(s) who will: _____

Class B Applicants: If the agent, a partner or the individual licensee will not be conducting the day-to-day operations of the business, the person(s) listed above must obtain a Class B Managers license.

d) Does anyone else have money invested or any other interest in this business? No Yes
 If yes, explain: _____

e) 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: Tri City National Bank

f) Will any of the following types of businesses be conducted at this location? (check all that apply)

Bed & Breakfast Billiard/Pool Hall Comedy Club Indoor Golf Facility
 Video Game Center(6 or more games) Brew Pub Volleyball Court Theater Wine Tasting Room
 Department Store Pharmacy Gift Shop Museum Center for the Visual & Performing Arts

g) If applying for Class B or C license, are you applying for "Service Bar Only"? No Yes
 Service Bar Only means customers cannot sit at the bar. Alcohol is served to patrons seated at tables. No stools, chairs or other articles of furniture shall be placed at the service bar for patrons to sit upon.

17. Proof of Ownership, Lease, or Offer to Purchase (new & transfer applicants only)

Submit proof of ownership, lease, or offer to purchase the building with this application.

A lease or offer to purchase must:

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

18. Property Information (new & transfer applicants only)

- a) Do you own or lease the building? Own Lease
 - b) Who owns the fixtures (for example, coolers, etc.)? Bowery Group LLC
 - c) Are you purchasing the stock and/or fixtures? No Yes If yes, amount paid \$ _____
 - d) Total amount paid for business \$ 305,000.00
 - e) Total amount paid for goodwill of the business \$ 55,000.00
- 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

19. Lease Information (new & transfer applicants who are leasing the premises only)

- a) Date lease begins _____ Ends _____
- b) Monthly rental \$ _____
- c) Do you have an option to renew the lease? No Yes
- d) Does your lease allow for assignment to another party without the consent of the owner? No Yes
- e) For what length of time have you been guaranteed occupancy (number of years)? _____
- 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 _____

20. 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): _____

21. Notarized Signatures of Applicants

SUBSCRIBED AND SWORN TO BEFORE ME

This 2nd day of August, 20 14

James J. Paaf
(Clerk/Notary Public)

My Commission Expires 8/8/17
*Notary Seal must be affixed.

[Signature]
Agent/Owner/Partner

[Signature]
Additional Owner/Partner

Note: All information contained in this application is subject to approval by the Common Council. Deviating from approved plan of operation will subject licensee to citations, and/or suspension or non-renewal of the license. Contact the License Division for information on how to request changes.

New and transfer of premise applicants must submit the following:

- Proof of ownership, lease or offer to purchase the building
- Detailed floor plan
- If a restaurant, copy of the menu

If you do not provide all required information, your application will be returned to you.



PUBLIC ENTERTAINMENT PREMISES SUPPLEMENTARY APPLICATION

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

(1) TYPES OF ENTERTAINMENT (CHOOSE ALL THAT APPLY)

<input type="checkbox"/> Instrumental Musicians	<input type="checkbox"/> Bands	<input type="checkbox"/> Battle of the Bands	<input type="checkbox"/> Comedy Acts
<input type="checkbox"/> Disc Jockey	<input type="checkbox"/> Magic Shows	<input type="checkbox"/> Poetry Readings	<input type="checkbox"/> Dancing by Performers
<input type="checkbox"/> Adult Entertainment/ Strippers/Erotic Dance	<input type="checkbox"/> Wrestling	<input type="checkbox"/> Patron Contests	<input type="checkbox"/> Patrons Dancing
<input checked="" type="checkbox"/> Jukebox	<input type="checkbox"/> Karaoke	<input type="checkbox"/> Bowling Alley	<input type="checkbox"/> Pool Tables
<input type="checkbox"/> Motion Pictures How many? _____	<input checked="" type="checkbox"/> Amusement Machines – How many? <u>5</u>	<input type="checkbox"/> Concerts Approx. # per year? _____	<input type="checkbox"/> Theatrical Performances Approx. # per year? _____
<input type="checkbox"/> Other: _____			

(2) WILL PROMOTERS EVER BE USED FOR ANY OF THE ENTERTAINMENT?

No Yes, describe: _____

(3) LEGAL CAPACITY OF PREMISES

99 (Call the Milwaukee Development Center at 414-286-8211 if you have questions.) Your legal capacity will determine the license fee for your Public Entertainment Premise License. If you would like to request that the license be approved with a lower capacity than that listed above, indicate lower capacity _____. If approved, this lower capacity will print on your license and override the capacity listed on your Occupancy Permit.

(4) IDENTIFY IF SOUND AMPLIFICATION IS USED

No Yes, describe: _____

(5) DECLARATIONS, ACKNOWLEDGEMENTS, AND DISCLOSURES

- The undersigned understands that after the license has been issued, a change to the plan of operation will require a written request to change and approval from the Common Council.
- The undersigned agrees to inform the City Clerk within 10 days of any substantial changes in the information supplied in this application.
- The undersigned understands that applicants shall not willfully refuse to provide the services offered under this license, or add charges or require deposits not required of the general public because of race, color, sex, religion, national origin or ancestry, age, handicap, lawful source of income, marital status, sexual orientation, gender identity or expression, familial status or the fact that a person is now or has been a member of the military service, whether dressed in uniform or not; and shall not seek such information as a condition of employment, or penalize any employee or discriminate in the selection of personnel for training or promotion on the basis of such information.
- The undersigned has knowledge of the City Ordinances currently regulating the public entertainment, and understands that the license may be subject to suspension, non-renewal or revocation, if the applicant violates any rule, law or regulation of the city of Milwaukee and State of Wisconsin.

(6) NOTARIZED SIGNATURES OF APPLICANTS

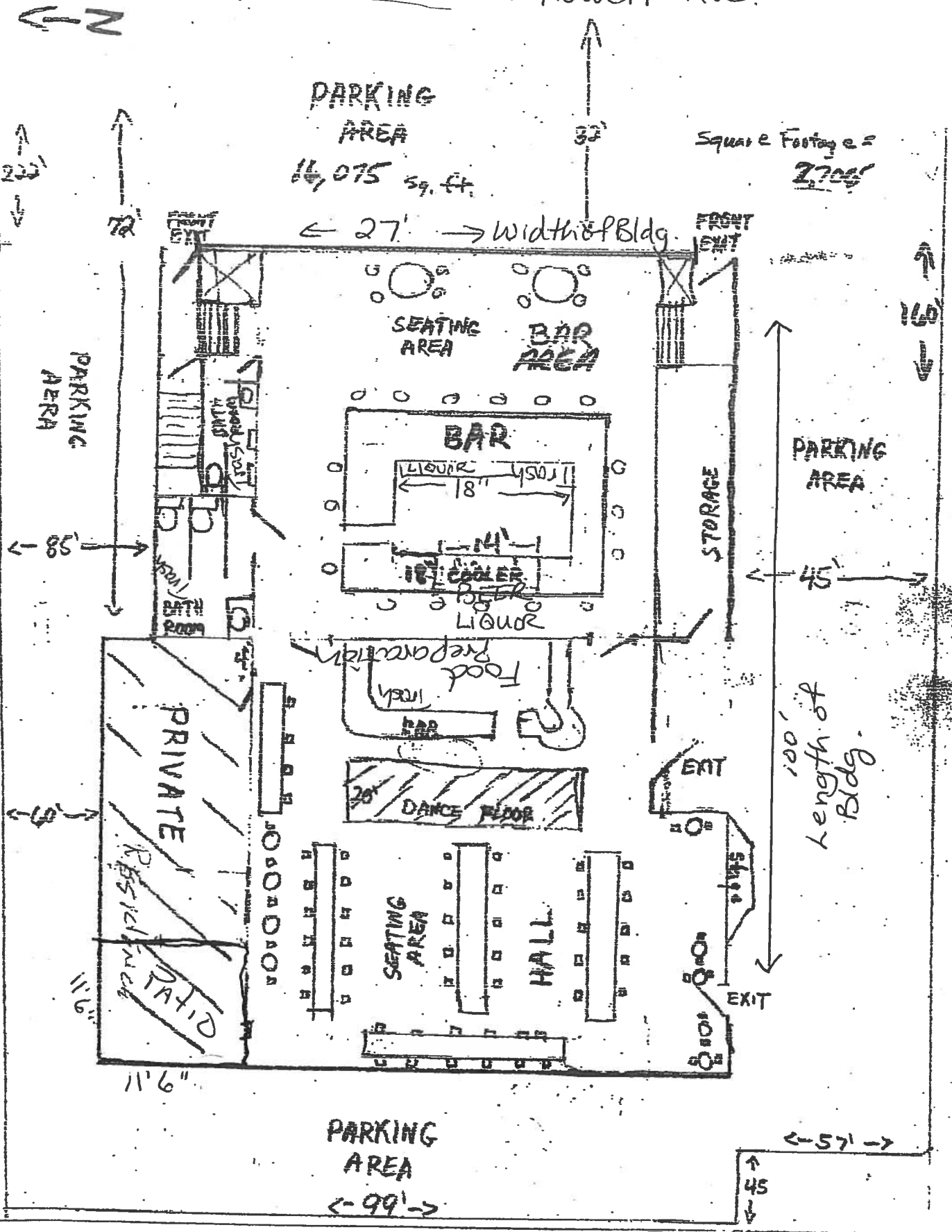
SUBSCRIBED AND SWORN TO BEFORE ME
This 2nd day of August, 20 14

Jaune J Paaf
(Clerk/Notary Public)

My Commission Expires 8/8/17
*Notary Seal must be affixed.

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

Howell Ave.



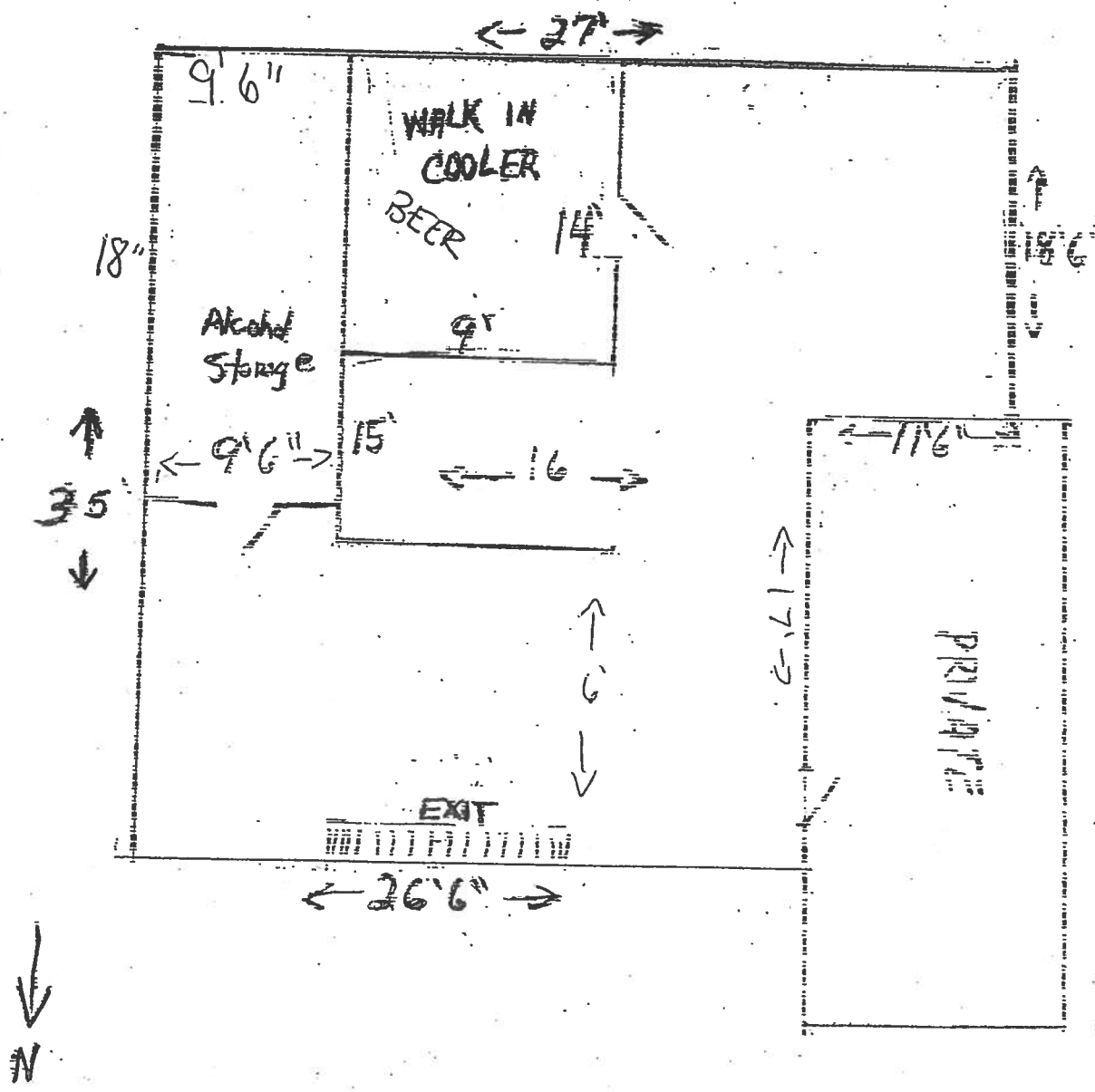
Roger Hein Agent for The Bowery Group LLC
 The Red Zone-Milwaukee
 6247 S. Howell Avenue
 August 11, 2014

BASEMENT

SQUARE FOOTAGE

1,126'

Roger Hein Agent for The Bowery Group LLC
The Red Zone-Milwaukee
6247 S. Howell Avenue
August 11, 2014





FOOD DEALER SUPPLEMENTAL APPLICATION / FOOD OPERATION PLAN

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

1. Application Type

Indicate the application type and complete the corresponding section.

New application (fee is \$300). For new applications, answer questions below and then continue on to section 2.

Is this a simple change of ownership (no change in food operation) or a new establishment?

- Taking over existing operating licensed food business
 New establishment (anything other than a simple change of ownership)

Provide a brief description of the food establishment

No kitchen facility on the premises.
 Bar & Hall only

What is the anticipated opening date or date of change of ownership: 10-15-14

Site Evaluation - Optional (fee is \$100) Site evaluations are optional, and done only upon request. The purpose of the site evaluation is to assess the suitability of a prospective site for use as a food establishment.

Modification or amendment to an existing food license or public health approved operational plan. For modifications/amendments to existing establishments, both the operator and establishment cannot be different than on existing license or the application is considered new. Answer the two questions below (including the follow up detail if applicable) and then continue on to section 2.

What facilities (equipment or building) change(s) are you planning (check all that apply):

- Construction or renovation (fee is \$200)
 Significant equipment change without construction or renovation (fee is \$50)
 Adding an additional site at the same premises where food will be prepared/processed or sold (fee is \$100 per additional site)
 No equipment or renovations are being planned

What changes are being proposed to the food operation or specialized approvals are being requested (Note: \$75 operational change fee is charged only once even if multiple items are checked):

- Substantial changes to the menu including the type or complexity of food processing (fee is \$75)

Briefly describe proposed changes

- Adding processing when no processing was previously performed, or adding additional types of processing (fee is \$75)

- Requests for modifications or variances to public health food code requirements or the review of a specialized process requiring health department approval prior to implementation (fee is \$75)

Indicate specialized processes/variances requested (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Acidified Rice | <input type="checkbox"/> Sale without Consumer Advisory |
| <input type="checkbox"/> Bare Hand Contact to Ready to Eat Foods | <input type="checkbox"/> Shellfish - Comingling |
| <input type="checkbox"/> Curing | <input type="checkbox"/> Shellfish - Display Tanks |
| <input type="checkbox"/> Dogs in Outside Dining Areas | <input type="checkbox"/> Smoking |
| <input type="checkbox"/> Non-continuous Cooking | <input type="checkbox"/> Sprouting |
| <input type="checkbox"/> Peddler Base | <input type="checkbox"/> Time as a Public Health Control |
| <input type="checkbox"/> Reduced Oxygen Packaging | <input type="checkbox"/> Wild Game |
| <input type="checkbox"/> Other, specify | |

- Amending existing license to reflect an increase in annual gross sales or change in food operation (fee is the difference in the cost between the food licenses plus \$25 for transfer fee)

- No significant changes are being proposed in how food is prepared/processed or substantial menu changes. No addition of specialized process or activities requiring approval is being requested (no fee)

2. Premises Description

Will food be prepared or sold at a single or multiple food preparation and/or sale sites: Single Multiple

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

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

Prepackaged Food will be heated + served and/or sold. Pizzas, etc.

Note: Multiple sites may require more than one license or an additional site license depending upon the food activity conducted at any one site.

Indicate where on the premises food will be sold, served, consumed and/or stored: 1st Floor 2nd Floor Rooftop Basement

Other Floor, specify _____

Other location, specify _____

Are any outdoor operations planned? Yes No Unknown

What activities will be conducted outdoors (check all that apply)

Bar

Cooking/grilling

Dining - Patio

Dining - Sidewalk (DPW permit required)

Storage

Other, specify _____

Seating provided on site for dining? Yes No

If yes, what is the seating capacity both inside and outside? 99

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

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

Annual Gross Food Sales: 500-00 Sales Based on: Previous Year Previous Establishment Best Estimate

Note: Inspector will request to review receipts periodically to validate if establishment has the appropriate license.

Number of Full Time Employees 1

Number of Part Time Employees 4-5

The following items must be included with a new application:

Site Plan/Floor Plan: Site plan must identify the building in relation to streets, sidewalks, parking & garbage area.

Shared Kitchen Agreement, if applicable: If not using your own establishment as your base, provide a written and signed commissary agreement. The agreement must include a list of all services provided by the commissary, such as restroom use, dry goods storage, use of refrigerator space (including the number of cubic feet of refrigeration space allocated to you), etc.

The following items must be submitted to inspector, prior to approval of inspection.

Floor Plan: The plan must show the location of all equipment (sinks, refrigeration, stoves, ware-washing, etc.), plumbing, electrical services, mechanical ventilation, storage areas and restrooms. Plans must be a minimum of 11 X 14 inches in size including the layout of the floor plan accurately drawn to a minimum scale of 1/4 inch = 1 foot. Plans may be submitted in an electronic format.

Equipment List: Provide the make and model number of all significant equipment (cooking, cooling, warewashing, etc.) All food equipment must be ANSI/NSF certified. No home-style equipment is allowed. Equipment specification sheets do not have to be provided at the time of submission, but must be provided upon Health Department request

Finish Materials List: Provide a list of all finish materials (floors, walls, ceilings, counter tops). Surfaces must be smooth, nonabsorbent and easily cleanable, and ceramic, porcelain or quarry tile must have set in base cove.

Lighting Plan: Provide a list of all light fixtures to be used in the food establishment. All light used in any food prep or storage areas must be shielded or covered and flush or integral to the ceiling. Lighting in food preparation area must meet minimum illumination standards defined in the WI Food Code.

Pest Management Plan: Describe the establishments integrated pest management plan. Describe strategies to prevent pest entry into the food establishment & harborage of pests Identify if a licensed pest control service has been contracted, provide the name of the company and frequency of service.

3. Construction, Renovations, Kitchen Equipment Changes or Remodeling

Any construction, remodeling or equipment changes planned? Yes No If no, skip to section 4.

Scope of the planned project?

- New construction or conversion of an existing structure to be used as a food establishment
- Renovation/remodeling impacting 300ft² or more than of food preparation or display area
- Renovation/remodeling impacting less than 300ft² of food preparation or display area
- Renovation/remodeling limited to the instillation/change/replacement of food equipment

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

Note: Building permits may be required, contact the Department of Neighborhood Services

Date alterations/changes planned to begin _____

Contact information for general contractor _____

Contact information for architect _____

4. BUSINESS TYPE

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

- Bed and Breakfast
- Commissary or Mobile Food Peddler Base – a commercial kitchen used for the production of food to be served or sold at another location; a base of operations for a mobile food peddler where the vehicle, cart or unit which is used at a minimum for the service or cleaning of the peddler vehicle, cart or container. A base of operations for a caterer or seasonal market vendor for the preparation of food.
- Community Food Program – free meal site or food pantry. Any site in which all food is provided free of cost to those in need or to organizations who serve person's in need.
- Distiller or Brewer – facilities that are primarily engaged in the production of alcoholic beverages
- Food Distributor – a business that transports food for sale to retail and wholesale establishments and does not perform any processing or repacking of food items
Is food stored on site Yes No
- Food Manufacturer - commercial operation that produces, packages, labels, or stores food for human consumption, but primarily does not provide food directly to a consumer, food is sold to distributors, retailers or restaurants, there may be a small store on site where only the manufacturers products are sold, but the majority of product is sold to other licensed food establishments
Is there a retail store onsite? Yes No
- Food Store – a food establishment either mobile or permanent in which the majority of food sales consist of beverages or multi-serving food products requiring further preparation prior to consumption, examples of food stores include bakeries, grocery stores, convenience stores, coffee shops, liquor stores. Food stores include business whose primary business is other than food, but offer convenience food items.
Are you considered a convenience food store? Yes No
A convenience food store contains less than 5,000 sq ft of retail sales space AND has as its primary business the sale of basic food items and in addition sells household products. Basic food items may include, but are not limited to, milk and dairy products, bread products, prepared sandwiches, frozen entrees, refrigerated food and baby food. Household products may include, but are not limited to, cleaning products, paper products, baby products and pet food
- School – educational institution including elementary, middle and high schools, technical schools, colleges and university, where food service is limited to students (no sales to faculty or general public)
- Restaurant – a food establishment either mobile or permanent in which the majority food sales consist of meals

5. FOOD OPERATION SCOPE

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

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

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

100 % from meals (ready-to-eat food sold to in single portions)

_____ % from grocery items (multi-serving food products, typically requiring preparation before serving, includes beverages, bakery items and raw produce)

Will 25% or more of your sales be to highly susceptible populations (defined as persons with medical conditions, elderly, or preschool age children)?

Yes No

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

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

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

If yes, check all the reason why the food will be transported

Catering

Delivery

Base for Mobile Food Peddler

Base for temporary or seasonal food stand

Other, specify _____

6. FOOD, FOOD PREPERATION, FOOD PROCESSING

For restaurants provide a copy of the proposed menu or a detailed menu of all the foods and drinks you will be serving.

For all other establishments provide a summary below of the brief types of food products being sold.

Frozen Pizzas, Prepackaged Taco meat,
Sloppy Joes, chili, sub sandwiches, chips, pretzels

Will any potentially hazardous food (food that requires temperature control) be offered for sale? Yes No

Examples of potentially hazardous foods are meats, dairy, poultry, eggs, cut tomatoes or leafy greens, cut melons, cooked rice, beans or potatoes, or garlic in oil.

Will food be prepared or processed on site (see list below for examples of food processing)? Yes No

If performing ANY processing, check the types of food processing that will be conducted:

If performing processing, will there be any processing of potentially hazardous food? Yes No

7. WEIGHTS AND MEASURES

Will any items be offered for sale by weight or by volume? Yes No

If yes, describe number and type of devices used:

A separate weights and measures license is required for each scale.

Will electronic scanning devices be used for pricing/check out? Yes No

If yes, how many devices will be used _____

A scanner license is required if using an electronic scanning device.

8. LITTER/GARBAGE/NOISE

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

- | | | |
|--|---|--|
| <input checked="" type="checkbox"/> Sweep | <input type="checkbox"/> Pressure Wash | <input checked="" type="checkbox"/> Pick Up Litter |
| <input type="checkbox"/> Hired Maintenance | <input checked="" type="checkbox"/> Building Owner's Responsibility | <input checked="" type="checkbox"/> Garbage Cans Outside |
| <input type="checkbox"/> Other | | |

Who is responsible to keep the grounds clean?

- | | | |
|--|--|---|
| <input checked="" type="checkbox"/> Licensee | <input checked="" type="checkbox"/> Building Owner | <input checked="" type="checkbox"/> Employees |
| <input type="checkbox"/> Hired Maintenance | <input type="checkbox"/> Other | |

How often will the grounds be cleaned?

- | | | |
|---|---------------------------------|--------------------------------|
| <input checked="" type="checkbox"/> Daily | <input type="checkbox"/> Weekly | <input type="checkbox"/> Other |
|---|---------------------------------|--------------------------------|

How are noise issues addressed (check all that apply):

- | | | |
|---------------------------------------|--|--------------------------------------|
| <input type="checkbox"/> Security | <input checked="" type="checkbox"/> Manager approaches customer(s) | <input type="checkbox"/> Call police |
| <input type="checkbox"/> Signs posted | <input type="checkbox"/> Other | |

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

NO YES IF YES, YOU MUST ALSO APPLY FOR A SECONDHAND DEALER LICENSE.

9. HOURS OF OPERATION

Day of the Week	Proposed Hours of Operation (include a.m. or p.m.) (if closed on any days, write "closed")		Number of Customers expected each day	Drive Thru Hours (if not applicable, write "n/a")	
	Open	Close		Open	Close
Sunday	11am	2am	100	n/a	
Monday	3pm	2am	50		
Tuesday	3pm	2am	50		
Wednesday	3pm	2am	50		
Thursday	3pm	2am	50		
Friday	3pm	2:30am	80		
Saturday	11am	2:30am	100		n/a

10. ISSUANCE OF LICENSE

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

If yes, what type of license do you have or will you be applying for (check all that apply)?

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








If yes, if your food license is approved prior to the alcohol license, would you like the food license issued (check one)

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

SUBMIT THIS FORM ALONG WITH THE "BUSINESS LICENSE APPLICATION"

Affirmation of Understanding – Permit Needed to Operate

ALL NEW APPLICANTS – PLEASE READ AND INITIAL EACH ITEM CONFIRMING YOUR UNDERSTANDING:

1.  I understand that an inspection and sign off by the Health Department is required before my permit may be issued.
2.  I understand that an occupancy permit must be issued and an inspection may be required from the Department of Neighborhood Services before my permit may be issued.
3.  I understand that the Department of Neighborhood Services must sign off on my application with the License Division before my permit may be issued.
4.  I understand the local council member must approve or deny my request before my permit is eligible to be issued. If denied, I understand that I may be scheduled for a hearing before the License Committee of the Common Council.
5.  I understand that I must pay and the License Division must have proof of payment for the associated permit fees before my permit may be issued.
6.  I understand that all of the above must be complete before my permit is eligible to be issued.
7.  I understand that the license/permit for which I am applying must be issued and posted in my business premises prior to opening for business.

I, Roger Hein, will not operate my food business, until the permit has been issued and posted in the establishment.

Signature of Applicant:



Date:

8/27/14