



CITY OF MILWAUKEE
OFFICE OF THE CITY CLERK

Thursday, January 14, 2021

COMMITTEE MEETING NOTICE

AD 06

BELTON, Sam E, Agent
Sam's Place Jazz LLC
550 W Juneau Av #621

Milwaukee, WI 53203

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

Tuesday, January 26, 2021 at 09:50 AM

Regarding: Your Class B Tavern, Public Entertainment Premises, and Sidewalk Dining License Applications Requesting Instrumental Musicians, Bands, and Patrons Dar [redacted] as agent for "Sam's Place Jazz LLC" for "Sam's Place Jazz Cafe" at 3338 N Martin L King Jr DR.

This meeting will be held via GoToMeeting. Please see the enclosed best practices document for further instructions. The access code is <https://global.gotomeeting.com/join/778000629>. If you wish to call in, please call +1 (669) 224-3412 and use Access Code: 778-000-629.

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

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

Failure to attend this meeting may result in the denial of your license. Individual applicants and partnership applicants must attend or attend by an attorney. The agent or attorney for corporate or limited liability applicants must attend. If you wish to do so and at your own expense, you may be accompanied by an attorney of your choosing to represent you at this hearing.

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

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

JIM OWCZARSKI, CITY CLERK

BY:

Jessica Celella

License Division Manager

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

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: 12/09/2020
Officer: DRISCOLL

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

Name of Premise: Sam's Place Jazz Café
Address: 3338 N. Martin Luther King Jr. Dr
Phone: 414-837-5127

Owner: Sam Belton
Owner address: 550 W. Juneau Av. #621
City State Zip: Milwaukee WI. 53203
Owner Phone: 414-469-1770
Owner email: sbe1435182@gmail.com

Licensee/Agent: Sam Belton
Home Address:
City State Zip:
Phone:
Email:

Preferred contact: Telephone (text if possible)

Location currently open: YES NO

Projected open date: 01/18/2021

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

Hours of Operation: Sun: 6:00 A.M – 4:00 P.M. 24 hours Y N
Mon: 6:00 A.M – 9:00 P.M.
Tue: 6:00 A.M – 9:00 P.M.
Wed: 6:00 A.M – 9:00 P.M.
Thu: 6:00 A.M – 9:00 P.M.
Fri: 6:00 A.M. – 11:55 P.M.
Sat: 6:00 A.M. – 11:55 P.M.

Premise Type: Tavern/Bar
Restaurant
Other: Live music venue

Licenses currently held: None held. Awaiting Food, Occupancy, and Class B

Alcohol: Yes No Class: #:
 Tobacco: Yes No #:
 Food: Yes No #:
 Extended Hours: Yes No #:
 Secondhand Dealer: Yes No Type: #:
 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 parking lot Yes No
7. Is the parking lot clean? Yes No
8. Off-Street parking Yes No
9. Is the parking lot well lit? Yes No
10. Valet Parking Yes No
 - a. Will this lot have a guard? Yes No
 - b. Will this lot have cameras? Yes No
11. Are there areas where a person could conceal themselves Yes No
12. Is there exterior lighting? Yes No. Does it appears to be adequate Yes No
13. Exterior Payphone? Yes No
14. Are there No Loitering Signs posted? Yes No
15. Are there exterior security cameras Yes No How Many: 6
16. Are the address numbers prominently displayed and easy to see Yes No

Camera Survey:

17. Does this location have security cameras? Yes No
18. Are they in working order? Yes No
19. What format are the cameras?
 - a. Color Yes No
 - b. Digital Yes No
 - c. Recorded Yes No
20. How long is footage stored for later viewing: 30 days
21. Are there exterior cameras Yes No How many: 6
22. Are there interior cameras Yes No How many: 11
23. Do all employees know how to retrieve recorded digital images/footage? Yes No

24. Cameras located in parking lot Yes No How many 3

Interior Survey:

- 25. What is the planned capacity 88
- 26. What is the minimum number of employees That will be on premise 5
- 27. Is the storeowner willing to be a standing complainant regarding loitering? Yes No
 - a. If yes have them fill out the standing complaint form and give them two of the commercial signs Yes No
- 28. Is the interior of the location neat and clean? Yes No
- 29. Does an interior camera face the entrance/exit? Yes No
- 30. Is there a lockable area that separates employees from customers? Yes No
- 31. Are emergency and non-emergency numbers posted near the phone? Yes No
- 32. Does the owner know how to contact their police district directly? Yes No
 - a. Did you provide a district contact guide to the owner? Yes No

Security

- 33. How many security personnel are going to be employed: Unknown
- 34. How ill they be deployed: Interior Exterior
- 35. What days will they be deployed Mon Tue Wed Thu Fri Sat Sun
- 36. Will the security be managed by business or contracted
- 37. Will they be armed Yes No
- 38. What type of security measures to be used:
 - Wanding/metal detector
 - ID Scanner
 - Dress Code
 - Cover Charge
 - Age restriction
 - Other

ADDITIONAL COMMENTS/RECOMMENDATIONS:

The building is completely remodeled and owned by Bader Philanthropies which is across the street. Bader has 3 interior and 3 exterior cameras that cover the building that is stored at the main Bader building. Belton was in the process of installing his own 8 camera system which will be stored inside his business. This will create a dual recording system in the event footage will have to be retrieved.

The business also has a walk up window on MLK that will be used for curbside pick-up. I suggested reinforcing that window due to it being a potential entry point when the business is closed.

The business does have a monitored security system.

The building is designated as "historic" so improvements and upgrades to the structure have to be authorized by the City.

Belton is in the process of researching security for the business on weekends.

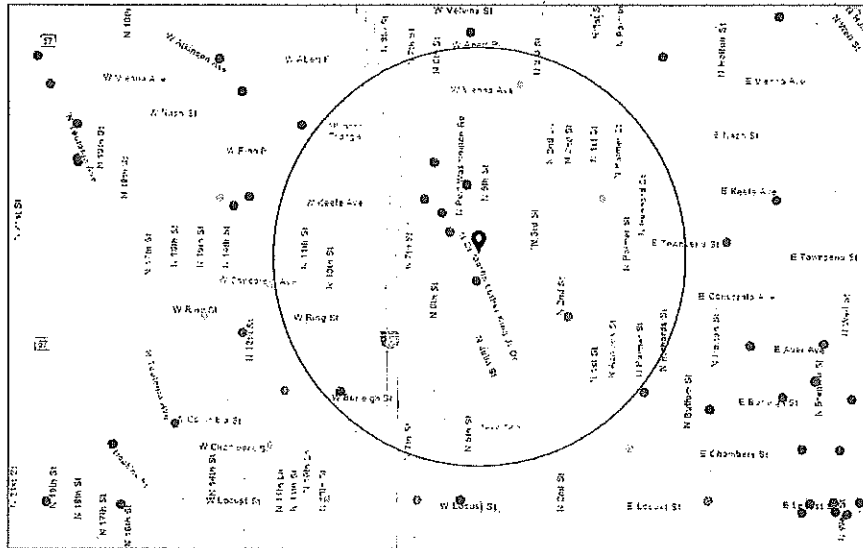


Concentration Map

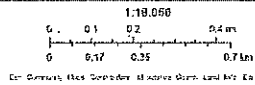
Area of Interest (AOI) Information

Area : 21,862,585.47 ft²

Nov 4 2020 12:06:29 Central Standard Time



- Alcohol Licenses
- Class A Femented Malt Beverage
 - Class A Liquor and Malt
 - Class B Tavern



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Summary

Name	Count	Area(ft ²)	Length(mi)
Alcohol Licenses	11		

Alcohol Licenses

#	Legal Entity	Trade Name	Licensee	Address	License Type Name	Total Capacity	Expiration Date	Count
1	King Hall, LLC	King Hall	DAREN JACKSON, Agt	3413 N Martin L King Jr DR	Class B Tavern License	200	1/29/2021, 6:00 PM	1
2	GREEN RING II	GREEN RING II	ISAAC T RAGSDALE, SP	3305 N MARTIN L KING JR DR	Class A Malt & Class A Liquor License		3/2/2021, 6:00 PM	1
3	Oldies But Goodies Inc	Oldies But Goodies Lounge	VICKIE M BROOKS, Agt	3501 N 6th ST	Class B Tavern License	80	7/26/2021, 7:00 PM	1
4	Sims Grocery Inc	Davis and Son Food & Liquor	HARBANS KAUR, Agt	3562 N Martin L King Jr DR	Class A Malt & Class A Liquor License		11/3/2020, 6:00 PM	1
5	Action Food & Liquor LLC	Action Food & Liquor	Mohammad Owais, Agt	3455 N Martin L King Jr DR	Class A Malt & Class A Liquor License		10/15/2021, 7:00 PM	1
6	V & T LIQUORS, INC	V & T WINE & LIQUOR	VICKIE M BROOKS, Agt	916 W BURLEIGH ST	Class A Malt & Class A Liquor License		9/21/2021, 7:00 PM	1
7	Yuvraj Food Mart, Inc	All For Us	Baljinder S Dhillon, Agt	103 E Keefe AV	Class A Fermented Malt Beverage Retailer's License		10/30/2021, 7:00 PM	1
8	GLASS SLIPPER	GLASS SLIPPER	JIMMY D JORDAN, SP	3250 N 2ND ST	Class B Tavern License	80	12/19/2020, 6:00 PM	1
9	SUNPRI CORP	CORNER LIQUOR	INDERJIT S DHINDSA, Agt	3500 N PORT WASHINGTON AV	Class A Malt & Class A Liquor License		12/10/2020, 6:00 PM	1
10	Bhullar Corp	Corner Liquor	Rajbir S Bhullar, Agt	3500 N PORT WASHINGTON AV	Class A Malt & Class A Liquor License		10/11/2021, 7:00 PM	1
11	WATKINS GROCERY	WATKINS GROCERY	FLORA B WATKINS, SP	3806 N VEL R PHILLIPS AV	Class A Fermented Malt Beverage Retailer's License		7/13/2021, 7:00 PM	1

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



Thursday, January 14, 2021

Licenses Committee Notice of Hearing

MLK LLC
3300 N Martin Luther King Jr DR
Milwaukee, WI 53212

The Licenses Committee will consider the following license application:

Class B Tavern, Public Entertainment Premises, and Sidewalk Dining License
Applications Requesting Instrumental Musicians, Bands, and Patrons Dancing
BELTON, Sam E, Agent
Sam's Place Jazz Cafe at 3338 N Martin L King Jr DR

Date: 1/26/2021

Time: 09:50 AM

Location: The hearing before the Licenses Committee will take place virtually on Tuesday, January 26, 2021. This is a public hearing. Those wishing to view the proceeding are able to do so via the City Channel – Channel 25 on Spectrum Cable – or on the Internet at <http://city.milwaukee.gov/citychannel>. Those wishing to provide oral testimony will be asked to do so by phone or internet and are asked to contact the staff assistant, Molly Kuether-Steele at (414) 286-2775 or molly.kuether-steele@milwaukee.gov for necessary information. Please make such requests no later than one business day prior to the start of the meeting. You are not required to attend the hearing, but please see the information below if you would like to provide testimony

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





BUSINESS LICENSE PLAN OF OPERATION

cc: license 5/12/2020

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

1. Type of Business

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

Provide a detailed description of the type of business you plan on operating: Food and Beverage/Coffee Roasting/Entertainment

Do you have any experiences operating this type of business? No Yes If yes, explain: Previously operated cafe.

2. Business Operations

- a. Proposed Opening Date: November 8, 2020
- b. Is this premise under construction? No Yes If yes, list estimated completion date: October 2020
- c. Is this a branch? No Yes
- d. Is this premise currently licensed? No Yes If yes, list type of license: _____
- e. Is the current license operating? No Yes If no, list date closed: _____
- f. Do you have future plans for other businesses, licenses or permits at this location? No Yes
If yes, explain: _____
- g. Have you previously held an Extended Hours license in Milwaukee? No Yes
If yes, list addresses: _____
- h. Are other businesses operating in the same building? No Yes If yes, describe: Upper floor - Health Clinic

3. Litter & Noise

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

4. Smoking & Sanitation

- a. Are there designated outdoor smoking areas? No Yes If yes, describe: _____
- b. Number of Garbage Cans: Inside: 7 locations: restrooms, kitchen, dining area, doorway, offices serving
Outside: 2 locations: back of building near parking area
- c. Is a crowd control barrier used? No Yes If yes, describe: _____
- d. How many restrooms are on the premises? 3
- e. Name of solid waste contractor: Advanced Disposal Waste Management Other: _____

5. Security

- a. Are there onsite parking spaces? No Yes If yes, how many? 11 and describe the parking security plan: security checks periodically
- b. Is there a loading zone? No Yes If yes, describe the loading area security plan: delivery must contact manager
- c. Will you have security personnel on premises? No Yes If yes, how many? 1 and answer the following.
 What are their responsibilities? monitor perimeter and patrons
 Is security equipment used? No Yes If yes, describe cameras
 List their licensing, certification, or training credentials, if any: _____
- d. Will there be security cameras? No Yes If yes, how many? 5 and list locations: entrances, north, south
- e. Will searches/identification checks be done upon entry? No Yes If yes, describe _____

6. Percentage of Sales (must total 100%)

Alcohol <u>5</u> %	Food <u>90</u> %	Secondhand Merchandise _____ %	Precious Metals & Gems _____ %
Entertainment <u>5</u> %	Cigarettes _____ %	_____ %	_____ %
Pawnbroker Activity _____ %	Salvaged Materials _____ % (such as scrap metal)	Personal Services (such as tattoo, body piercing, salon, tailor, laundry, etc.) _____ %	Other _____ % Describe: _____

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

- Type 1
- Full Service Restaurant Cafe/Coffee Shop Deli or Fast Food Restaurant Private/Fraternal/Veterans Club
- Night Club Tavern Cocktail Lounge Teen Club
- Banquet Hall Sports Facility Bowling Alley
- Hotel/Motel: Number of floors: _____ Blooming Flowers: Number of floors: _____
 Number of Rooms: _____ Number of Rooms: _____

- Type 2
- Liquor Store Corner Store Supermarket Convenience Store
- Gas Station Amusement/Photograph Distributor Recycling, Salvage or Towing
- Used Car Dealer Personal Service Establishment
(such as tattoo business, hair salon, tailor, etc.) Recording Studio

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

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

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

Capacity N/A (Call the Milwaukee Development Center at 414-286-8213 if you have questions.)

9. Premises Description

- a. Identify all areas of the premises that will be used in operating this business (include areas used only for storage):
 1st Floor 2nd Floor Basement Storage Patio Beer Garden Sidewalk Cafe Deck Rooftop
 Other: Describe: N/A
- b. Describe Location: Major Thoroughfare Secondary Street Other:
- c. Nearest Major Cross Street: Martin Luther King Jr Drive / Port Washington
- d. Describe Building: Free Standing Building Strip Mall Other:
- e. Describe Premises Structure: Single Story Multi-Story - # of Stories: 2 Other:
- f. Describe Surrounding Area: Commercial Residential Industrial Other:
- g. Building Owner Name: MLK, LLC Phone Number: 414-736-4548
 Building Owner Address: 3300 N. M.L.K. Jr Drive, Milwaukee, WI 53212

10. Hours of Operation & Customers

Will customers be entering the premises? No Yes

Day of the Week	Proposed Hours of Operation:		Estimated Number of Customers expected each day	Potential Age Range of Customers	Class B Tavern Applicant Only: Age Restriction (if none, write 'None')
	Open Time (Include a.m. or p.m.)	Close Time (Include a.m. or p.m.)			
Sunday	6am	6pm	80	18-60	None
Monday	6am	9pm	60	18-60	None
Tuesday	6am	9pm	60	18-60	None
Wednesday	6am	9pm	60	18-60	None
Thursday	6am	9pm	60	18-60	None
Friday	6am	12am	90	18-60	None
Saturday	6am	12am	90	18-60	None

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

Alcohol Establishments Class A: 8:00 am to 9:00 pm Sunday thru Saturday
 Class B: 6:00 am to 2:00 am Sunday thru Thursday, 6:00 am to 2:00 am Friday & Saturday
 Permitted Hours of Operation:
 Entertainment Outdoor Closing Hours: 10:00pm Sunday-Thursday; 12:00am Friday & Saturday; unless a different time, either earlier or later, is established by the Common Council in its approval of the licensee's plan of operation.

11. Signature(s)

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

 Signature of additional partner or 20% or more shareholder

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



**ALCOHOL BEVERAGE & PUBLIC ENTERTAINMENT PREMISES
SUPPLEMENTAL APPLICATION**
Office of the City Clerk License Division
205 E. Wells St. Room 305, Milwaukee, WI 53202
(414) 286-2238 e-mail address: license@milwaukee.gov www.milwaukee.gov/license

Legal Entity Name: Sam's Place Jazz LLC	
Premise Address: 3338 N. Martin Luther King Jr. Drive Milwaukee, WI. 53212	
Proximity of Premises to Church, School, Daycare Center or Hospital	
Is the building within 300 feet of any church, school, daycare center or hospital? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
"Service Bar Only" Designation	
If applying for Class B or C license, are you applying for "Service Bar Only"? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Service Bar Only means customers cannot sit at the bar. Alcohol is served to employees who serve patrons seated at tables. No stools, chairs or other articles of furniture shall be placed at the service bar for patrons to sit upon.	
Business Information	
a) Are you taking out this application for anyone that may not be eligible for a license? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
If yes, list their name and address: _____	
b) Will the agent, a partner or the individual licensee be conducting the day to day operations of the business? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	
If no, list the name and address of the person(s) who will: _____	
Class B Applicants: If the agent, a partner or the individual licensee will not be conducting the day-to-day operations of the business, the person(s) listed above must obtain a Class B Manager's License.	
c) Does anyone else have money invested or any other interest in this business? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
If yes, explain: _____	
d) Have you made an agreement with anyone to repay any loan or any other payments based upon income from the business? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If yes, list name and address: <u>Bader Philanthropic, 3300 N. MILWAUKEE DR, MILWAUKEE WI 53212</u>	
Property Information (New & Transfer Applicants Only)	
a) Do you own or lease the building?	<input type="checkbox"/> Own <input checked="" type="checkbox"/> Lease
b) Who owns the fixtures (for example, coolers, etc.)?	<u>MLK, LLC</u>
c) Are you purchasing the stock and/or fixtures?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, amount paid \$ _____
d) Total amount paid for business	<u>\$ 0 N/A</u>
e) Total amount paid for goodwill of the business	<u>\$ 0 N/A</u>
Goodwill comprises the reputation and customer relationships of an existing business. If the price you pay for the business exceeds the fair market value of all of the rest of the assets of the business, the excess may be considered goodwill.	
f) Have you made arrangements with the seller for payment of personal property taxes? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Lease Information (New & Transfer Applicants who are leasing the premises only)	
a) Date lease begins	<u>10/01/2020</u> thru <u>9/30/2022</u>
b) Monthly rental	<u>\$ 1,595</u>
c) Do you have an option to renew the lease? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	
d) Does your lease allow for assignment to another party without the consent of the owner? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
e) For what length of time have you been guaranteed occupancy (number of years)? <u>2 years</u>	

Lease Information (Continued)
<p>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? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, explain _____</p> <p>g) Does the present owner or occupancy object to the granting of your license? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, explain _____</p>
Change of Agent Applicants Only
<p>Have there been any changes to the floor plan since the last application was submitted? <input type="checkbox"/> No <input type="checkbox"/> Yes If no, a new floor plan is not required. If yes, submit a new floor plan and explain the change(s): _____</p>
Signature
<p><i>Samuel Belton</i></p> <p>Signature of Sole Proprietor, Partner or 20% or More Shareholder (If no 20% or more Shareholder, Corporate Officer - print name/title and sign)</p>

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

New and transfer of premises applicants must submit the following:

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



**PUBLIC ENTERTAINMENT PREMISES LICENSE
SUPPLEMENTAL APPLICATION**

Office of the City Clerk License Division
200 E. Wells St. Room 109, Milwaukee, WI 53202
(414) 266-2238 www.milwaukee.gov/licensing e-mail address: licensing@milwaukee.gov

PREMISES ADDRESS: 3338 N. Martin Luther King Jr. Dr. Milwaukee, WI, 53212

TYPES OF ENTERTAINMENT (CHECK ALL THAT APPLY)

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

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

PROMOTERS/SOUND AMPLIFICATION

Will promoters ever be used for any of the entertainment? No Yes If Yes, Describe: _____

At any time will sound amplification be used? No Yes If Yes, Describe: Small house PA System

LEGAL CAPACITY OF PREMISES

N/A (Call the Development Center at 414-266-8211 with questions.) Legal capacity determines the fee for your Public Entertainment Premises License. If you would like to request the license be approved with a lower capacity than that listed above, indicate the lower capacity here: N/A. If approved, this lower capacity will print on your license and override the capacity listed on your Occupancy Permit.

ACKNOWLEDGEMENT/SIGNATURE

I understand that after the license has been issued, a change to the plan of operation will require a written request to change and approval from the Common Council. I agree to inform the City Clerk within 10 days of any substantial changes in the information supplied in this application. I understand that I shall not willfully refuse to provide the services offered under this license, or add charges or require deposits not required of the general public because of race, color, sex, religion, national origin or ancestry, age, handicap, level of 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.

I have knowledge of the City Ordinances currently regulating public entertainment, and understand that the license may be subject to suspension, non-renewal or revocation, if I violate any rule, law or regulation of the city of Milwaukee and State of Wisconsin.

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

Office Use Only:

Initials: _____ Filed: _____ App: _____
Only PEP? No Yes If Yes, Queue to MPD and Email Mgrs/Team Lead (must be heard w/in 60 days)



Sidewalk Dining Facility Supplemental Application

ccf-sides1 2/21/18

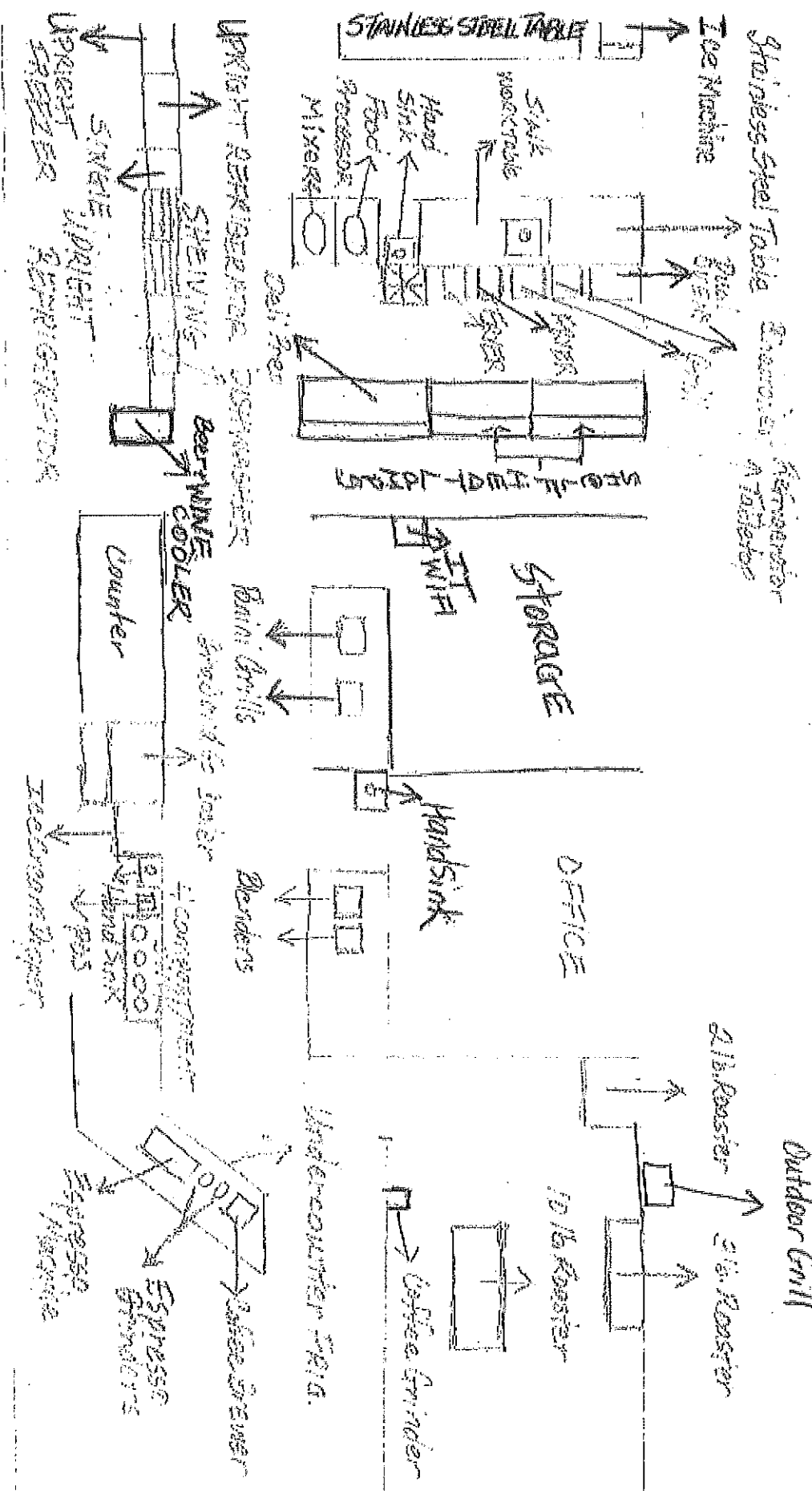
Office of the City Clerk License Division
200 E. Wells St. Room 105, Milwaukee, WI 53202
(414) 286-2288 www.milwaukee.gov/license e-mail address: license@milwaukee.gov

Business Name: <u>Sam's Place Jazz</u>	Aldermanic District # <u>6</u>
Premises Address: <u>3338 N. Martin Luther King Jr. Drive Milwaukee WI 53212</u>	
Business Operations	
Check one: <input checked="" type="checkbox"/> I/we are also applying for Food/Alcohol license(s) at this time. <input type="checkbox"/> I/we currently hold Food/Alcohol license(s) AND	
<input checked="" type="checkbox"/> confirm that the Business Plan of Operation on file which was previously submitted with the Food and/or Alcohol application has not changed, except for the addition of this sidewalk dining facility.	
<input checked="" type="checkbox"/> have included a new Business Plan of Operation reflecting requested changes.	
Sidewalk Dining Facility will operate from: Start Date: <u>Nov. 8, 2020</u> to End Date: <u>Nov. 8, 2021</u>	
Will any food preparation be done outdoors? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If yes, describe: <u>Occasional BBQ (Smoker)</u>	
Will any sidewalk dining facility improvements be physically attached to public structures? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, describe: _____	
Property Owner	
Check one: <input type="checkbox"/> Applicant owns the property <input checked="" type="checkbox"/> Property owner's information/signature provided below (REQUIRED):	
Name: <u>Lia Miller Co. LLC</u> Phone # <u>414 234-6464</u>	
Address: <u>3300 N. W. Mills Dr</u>	
Property Owner's Signature: <u>[Signature]</u>	
Signature(s)	
<u>[Signature]</u>	
Signature of Sole Proprietor, Partner, or 20% or more Shareholder (if there are no 20% or more shareholders, Corporate Officer-print name/title and sign)	Signature of additional partner or 20% or more shareholder

Office Use Only:

Initials _____ Filed _____ App # _____
Processing LS: Queue to: HD DNS CC Email To: DPW Primary LS
Also: holds is applying for: Food Alcohol Perm Ext

Tabletop Freezer



Sam Ed Beton,
SAM'S PLACE JAZZ LLC
SAM'S PLACE JAZZ CAFE