

CITY OF MILWAUKEE OFFICE OF THE CITY CLERK

Tuesday, October 08, 2024

COMMITTEE MEETING NOTICE

AD 09

WESLEY-CARTER, Antonio S, Agent Pure Lounge & Restaurant LLC 2728 N 9TH St Milwaukee, WI 53206

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

Tuesday, October 22, 2024 at 09:30 AM

The access code is https://meet.goto.com/366619901. Please see the enclosed best practices document for further instructions.

Regarding:

Your Class B Tavern, Public Entertainment Premises and Food Dealer Licenses Application Requesting Instrumental Musicians, Disc Jockey and Bands as agent for "Purplunge & Restaurant LLC" for "Purplunge & Restaurant" at 8531 W BROWN DEER Rd.

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

Notice for applicants with warrants or unpaid fines:

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

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

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

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

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

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

JIM OWCZARSKI, CITY CLERK

BY: _

Jim Cooney

License Division Manager

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

Date: 06/26/2024 Officer: T. Geniesse

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

| Name of Premise: Pur Address: 8531 W. Bro Phone: | | |
|---|--|-----------------|
| Owner: Wesley-Carter Owner address: 2728 City State Zip: Milwa Owner Phone: 414-78 Owner email: tonioad | aukee, WI 53206 8-8979 |)2 Exp 1/24/28 |
| Licensee/Agent: Wesl Home Address: 2728 City State Zip: : Milv Phone: 414-788-8979 Email: tonioaob@iclo | N 9 th St vaukee, WI 53206 | |
| Preferred contact: We | esley-Carter, Antonio | |
| Location currently op | en: YES NO | |
| Projected open date: | 08/31/24 | |
| Day's open: S | M □T □W □Th □F □SA ⊠ALL | |
| Hours of Operation: | Sun: 12p-1:30a Mon: 12p-1:30a Tue: 12p-1:30a Wed: 12p-1:30a Thu: 12p-1:30a Fri: 12p-2:30a Sat: 12p-2:30a | ∃24 hourš:□Y ⊠N |
| Premise Type: | ⊠Tavern/Bar ⊠Restaurant □Other: | |
| Licenses currently he | ld: None | |

| Alcohol: Yes No Class: #: | |
|--|---|
| Tobacco: ☐ Yes ⊠No #: | • |
| Food: Yes No #: | |
| Extended Hours: | |
| Secondhand Dealer: Yes No Type: #: | |
| Other: Yes No Type: #: | |
| Other: | |
| 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 1 Mr. B's club | |
| 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 | |
| Are exterior windows free of signage | |
| 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 Weekends only | |
| a. Will this lot have a guard? ⊠Yes □No | |
| b. Will this lot have cameras? ⊠Yes □No w | |
| 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 Will post | |
| 15. Are there exterior security cameras ☐ Yes ☒ No How Many: will add 6_ | |
| 16. Are the address numbers prominently displayed and easy to see ☐ Yes ☒ No will put of | n |
| the building | |
| | |
| 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: recommended 30 days | |
| | |
| 21. Are there exterior cameras Yes No How many: Will add 6 | |

| | 23. Do all employees know how to retrieve recorded digital images/footage? Yes No |
|-----|--|
| | 24. Cameras located in parking lot Yes No How many exterior cameras- 6 will catch parking lot traffic |
| | catch parking for traffic |
| Int | erior Survey: |
| | 25. What is the planned capacity believes 230 but has not been inspected yet |
| | 26. What is the minimum number of employees That will be on premise 4 |
| | 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 will add |
| | 30. Is there a lockable area that separates employees from customers? $\boxtimes \underline{\text{Yes}} \square \underline{\text{No}}$ |
| | 31. Are emergency and non-emergency numbers posted near the phone? Yes No will |
| | post |
| | 32. Does the owner know how to contact their police district directly? XYes \(\subseteq No |
| | a. Did you provide a district contact guide to the owner? ⊠Yes □No |
| | |
| Se | <u>curity</u> |
| | |
| | 33. How many security personnel are going to be employed: 2 |
| | 34. How ill they be deployed: Interior 1 Exterior 1 |
| | 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 1 of them will be |
| | 38. What type of security measures to be used: |
| | Wanding/metal detector |
| | ☑ ID Scanner |
| | Dress Code |
| | Cover Charge |
| | Age restriction After 9p-21 and up |
| | Other |
| | |

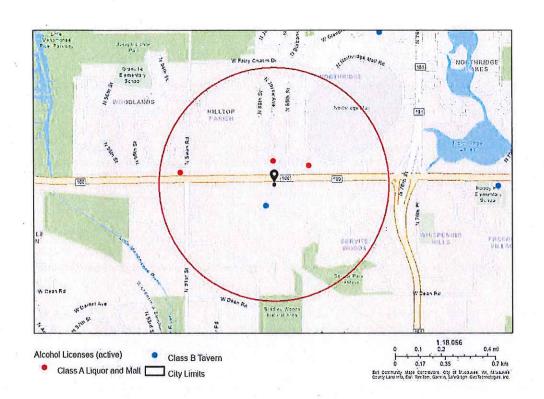
ADDITIONAL COMMENTS/RECOMMENDATIONS:

Will also be appling for pep

Area of Interest (AOI) Information

Area: 21,862,585.72 ft2

May 20 2024 15:02:31 Central Daylight Time



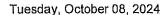
Summary

| Name | Count | Area(ft²) | Length(mi) |
|------------------|-------|-----------|------------|
| Alcohol Licenses | 4 | | |

Alcohol Licenses

| # | Legal Entity | Trade Name | Licensee | Address | License Type Name | Total Capacity | Expiration Date | Count |
|---|-------------------------------|------------------------|-------------------------|----------------------------|---|-------------------|-----------------------|-------|
| 1 | Family Foods Corporation | Family Foods | VIPAN DUTTA, Agt | 8328 W Brown Deer RD | Class A Malt & Class A Liquor License | 2 8 | 7/8/2024, 7:00 PM | 1 |
| 2 | Holt Logistics Corporation | Mr. B's Restaurant | JENNIFER GARCIA, Agt | 8617 W BROWN DEER RD | Class B Tavern License | | 7/29/2024, 7:00 PM | 1 |
| 3 | Daxa LLC | Brown Deer Beverage | CHIRAG J PATEL, Agt | 8564 W Brown Deer RD | Class A Malt & Class A Liquor License | | 9/20/2024, 7:00 PM | 1 |
| 4 | FAMILY MART, LLC | LIQUOR DEPOT | VIPAN DUTTA, Agt | 9108 W BROWN DEER RD | Class A Malt & Class A Liquor License | 2 | 2/4/2025, 6:00 PM | 1 |

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







Notice of Public Hearing

Blank Notice

WESLEY-CARTER, Antonio S, Agent
Pure Lounge & Restaurant at 8531 W BROWN DEER Rd
Class B Tavern, Public Entertainment Premises and Food Dealer Licenses Application Requesting
Instrumental Musicians, Disc Jockey and Bands

Tuesday, October 22, 2024 at 9:30 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 10/22/2024 at 9:30 AM in Room 301-B, Third Floor, City Hall. This is a public hearing. Those wishing to view the proceeding are able to do so via the City Channel – Channel 25 on Spectrum Cable – or on the Internet at http://city.milwaukee.gov/citychannel. Those wishing to provide oral testimony via internet are asked to contact the staff assistant, Yadira Melendez at (414) 286-2775 or stasst5@milwaukee.gov for necessary information. Please make such requests no later than one business day prior to the start of the meeting. You are not required to attend the hearing, but please see the information below if you would like to provide testimony. Once the Licenses Committee makes its recommendation, this recommendation is forwarded to the full Common Council for approval at its next regularly scheduled hearing.

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

- 1. The license application is scheduled to be heard at the above time. Due to other hearings running longer than scheduled, you may have to wait some time to provide your testimony.
- 2. You must appear in person and testify as to matters that you have personally experienced or seen. (You cannot provide testimony for your neighbor, parent or anyone else; this is considered hearsay and cannot be considered by the committee.)
- 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.

| OCCUPANT | MAIL ADDRESS | CITY STATE ZIP |
|-------------------------|-------------------------|--------------------------|
| CURRENT OCCUPANT | 8545 W GREENBROOK DR# 1 | MILWAUKEE, WI 53224-2140 |
| CURRENT OCCUPANT | 8545 W GREENBROOK DR# 2 | MILWAUKEE, WI 53224-2140 |
| CURRENT OCCUPANT | 8545 W GREENBROOK DR# 3 | MILWAUKEE, WI 53224-2140 |
| CURRENT OCCUPANT | 8545 W GREENBROOK DR# 4 | MILWAUKEE, WI 53224-2140 |
| CURRENT OCCUPANT | 8601 W GREENBROOK DR | MILWAUKEE, WI 53224-2126 |
| CURRENT OCCUPANT | 8603 W GREENBROOK DR | MILWAUKEE, WI 53224-2126 |
| CURRENT OCCUPANT | 8610 W GREENBROOK DR | MILWAUKEE, WI 53224-2127 |
| CURRENT OCCUPANT | 8611 W GREENBROOK DR | MILWAUKEE, WI 53224-2126 |
| CURRENT OCCUPANT | 8613 W GREENBROOK DR | MILWAUKEE, WI 53224-2126 |
| CURRENT OCCUPANT | 8621 W GREENBROOK DR | MILWAUKEE, WI 53224-2126 |
| CURRENT OCCUPANT | 8623 W GREENBROOK DR | MILWAUKEE, WI 53224-2126 |
| CURRENT OCCUPANT | 8624 W GREENBROOK DR | MILWAUKEE, WI 53224-2127 |
| CURRENT OCCUPANT | 8631 W GREENBROOK DR | MILWAUKEE, WI 53224-2126 |
| CURRENT OCCUPANT | 8633 W GREENBROOK DR | MILWAUKEE, WI 53224-2126 |
| CURRENT OCCUPANT | 8641 W GREENBROOK DR | MILWAUKEE, WI 53224-2126 |
| CURRENT OCCUPANT | 8643 W GREENBROOK DR | MILWAUKEE, WI 53224-2126 |
| CURRENT OCCUPANT | 8651 W GREENBROOK DR | MILWAUKEE, WI 53224-2126 |
| CURRENT OCCUPANT | 8656 W GREENBROOK DR | MILWAUKEE, WI 53224-2127 |
| CURRENT OCCUPANT | 8661 W GREENBROOK DR | MILWAUKEE, WI 53224-2126 |
| CURRENT OCCUPANT | 8671 W GREENBROOK DR | MILWAUKEE, WI 53224-2126 |
| CURRENT OCCUPANT | 8701 W GREENBROOK DR | MILWAUKEE; WI 53224-2128 |
| CURRENT OCCUPANT | 8710 W GREENBROOK DR | MILWAUKEE, WI 53224-2129 |
| CURRENT OCCUPANT | 8711 W GREENBROOK DR | MILWAUKEE, WI 53224-2128 |
| CURRENT OCCUPANT | 8915 N 85TH ST# 1 | MILWAUKEE, WI 53224-2143 |
| CURRENT OCCUPANT | 8915 N 85TH ST# 2 | MILWAUKEE, WI 53224-2143 |
| CURRENT OCCUPANT | 8915 N 85TH ST# 3 | MILWAUKEE, WI 53224-2143 |
| CURRENT OCCUPANT | 8915 N 85TH ST# 4 | MILWAUKEE, WI 53224-2143 |
| CURRENT OCCUPANT | 8920 N 87TH CT | MILWAUKEE, WI 53224-2107 |
| CURRENT OCCUPANT | 8929 N 85TH ST# 1 | MILWAUKEE, WI 53224-2142 |
| CURRENT OCCUPANT | 8929 N 85TH ST# 2 | MILWAUKEE, WI 53224-2142 |
| CURRENT OCCUPANT | 8929 N 85TH ST# 3 | MILWAUKEE, WI 53224-2142 |
| CURRENT OCCUPANT | 8929 N 85TH ST# 4 | MILWAUKEE, WI 53224-2142 |
| CURRENT OCCUPANT | 8935 N 85TH ST# 1 | MILWAUKEE, WI 53224-2141 |
| CURRENT OCCUPANT | 8935 N 85TH ST# 2 | MILWAUKEE, WI 53224-2141 |
| CURRENT OCCUPANT | 8935 N 85TH ST# 3 | MILWAUKEE, WI 53224-2141 |
| CURRENT OCCUPANT | 8935 N 85TH ST# 4 | MILWAUKEE, WI 53224-2141 |
| Blank Notice | | |
| | | |

Total Records: 36

Radius 250 feet and Center of the Circle: 8530 W Brown Deer Rd



BUSINESS LICENSE PLAN OF OPERATION

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

| 1. | Type of Business |
|---------|--|
| Apply | ring for: Extended Hours (12AM to 5AM) - If a food establishment, check all that apply: Delivery Drive Thru Dining Room |
| | Self Service Laundry Massage Establishment Filling Station |
| | Other (supplemental application for specific license also required) |
| Provi | de a detailed description of the type of business you plan on operating: Restaurant |
| Do y | ou have any experience operating this type of business? I No Yes If yes, explain: Bay 5 years Maneguey |
| | Business Operations |
| а. | Proposed Opening Date: July 12024 |
| b. | Is this premise under construction? No Yes If yes, list estimated completion date: |
| c. | Is this a franchise? No Yes |
| d. | Is this premises currently licensed? No Yes If yes, list type of license: |
| e. | Is the current licensee operating? No Yes If no, list date closed: |
| f. | Do you have future plans for other businesses, licenses or permits at this location? No Yes |
| | If yes, explain: |
| g. | Have you previously held an Extended Hours License in Milwaukee? No Yes |
| | If yes, list address(es): |
| h. | Are other businesses operating in the same building? No Yes If yes, describe: |
| 3. | Litter & Noise |
| a. | How are grounds kept clean? Sweep Pressure Wash Pick Up Litter Other: |
| b. | How often will grounds be cleaned? Daily Weekly As Needed Monthly Other: |
| c. | Grounds cleaned by: Licensee Building Owner Employees Hired Maintenance Other: |
| d. | to the state of th |
| | Signs Posted Other: |
| e. | Will a sound amplification system be used? No Yes If yes, describe: LIVE MUSIC |
| 4. | Smoking & Sanitation |
| a | Are there designated outdoor smoking areas? No Yes If yes, describe: Paho Area & North East Area |
| b | |
| | Outside: 4 Locations: I Entrance / 1 Side of Building / 2 on patro |
| С | . Is a crowd control barrier used? No Yes If yes, describe: |
| d | . How many restrooms are on the premises? 2 |
| e | Name of solid waste contractor: Advanced Disposal Waste Management Other: |

| 5. Security | | | | | | |
|---|---|--------------------------------|-----------------|---|---|--|
| a. Are there onsite parking spaces? No Yes If yes, how many? 100 and describe the parking security plan: Camuras (00+9de) Surrounding Bulding Parking | | | | | | |
| | b. Is there a loading zone? No Yes If yes, describe the loading area security plan. Back Side Ocor By | | | | | |
| b. | Is there a loading zone? | No Yes If yes, de | escribe the lo | oading area security pla | in. Bac | K side voor By |
| | | | , | : Carmera | | <u> </u> |
| c. | Will you have licensed sec | urity on premise? | No Yes | If yes, how many? _ | ar | nd answer the following: |
| | | onsibilities? WAIK | • • | | William To | |
| | Describe equipmen | tused ID Scar | flash l | ight | | |
| | List their License Nu | imber (s) In hous | e | : 8) | A.P. A.P. A.P. A.P. A.P. A.P. A.P. A.P. | |
| d. | Will there be security cam | neras? No X Yes | If yes, how r | many? <u>/8</u> and list | locations: | 2 Kitchen 2BAr |
| | 5 Dinny Alrea | 3 Hallway | 2tatio | 1 Entrance | 300+51 | |
| | Will searches/identification | | | lo 🎵 Yes If yes, descr | ibe WM | a Tarka san arawa kana kana mana kana san arawa kana kana kana kana kana kana kana k |
| 6. P | ercentage of Sales | <u></u> | 6) | | | T |
| Alcoh | ol <u>46</u> % | Food 50 Cigarettes, Electronic | % | Secondhand Merchandis | se | Precious Metals & Gems |
| Enter | tainment % | Vape Devices, Tobacco Products | <i>10</i> % | % | | % |
| | | Salvaged Materials | | Personal Services (such | as tattoo, | Other % |
| Pawn | broker Activity% | (such as scrap metal) | | body piercing, salon, tail tanning, etc.) | | Describe: |
| 7. B | usinesses/Licenses | on the Premises | s (check a | all that apply): | | |
| Туре | | | | | | |
| / | Full Service Restaurant | Cafe/Coffee Shop | | ast Food Restaurant | | e/Fraternal/Veterans Club |
| | Night Club | Tavern | Cocktail | _ | ☐ Teen C | llub |
| ים | Banquet Hall | Sports Facility | Bowling | Alley | | |
| | Hotel/Motel: Number of Flo | | Rooming | g House: Number of Flo | | |
| Toma | | oms: | | Number of Ro | oms: | |
| Type | Z Liquor Store | Corner Store | Superma | arket | Conver | nience Store |
| | Gas Station | Amusement/Phonog | raph Distribut | cor | Recycli | ng, Salvage or Towing |
| | Used Car Dealer | Personal Service Est | | n, tailor, etc.) | Record | ling Studio |
| Wh | at other licenses/permits will y | you hold at this location? (| (check all that | apply) | | |
| | Occupancy Permit | Cigarette, Tobacco, Ga | s Station 🔲 | Extended Hours Class " | 'B" Tavern [| Weights & Measures |
| | Secondhand Dealer | | | - | | |
| 8. | Legal Capacity (only | y if a Type 1 prer | nises in # | 7 above) | | |
| Capa | city(Call the | e Milwaukee Development | t Center at 414 | 4-286-8211 if you have qu | estions.) | |

•

| 9. Premises De | escription | | | : | |
|--|--|--|---|--|--|
| a. identify all area ☑1st Floor □2 | (s) of the premises that will be a second of the premises that will be a second of the premise | ne used in operating this bus ge ☑Patio ☐Beer Garde | iness (include areas used n □Sidewalk Café □D | i only for storage eck □Rooftop |): |
| ☐Other: Descri | | | | | , |
| b. Describe Location | on: Major Thoroughfare | ☐ Secondary Street ☐ Ot | her: | | |
| c. Nearest Major (| Cross Street: Br | roundur Road | | | |
| | ng: 🏿 Free Standing Buildin | | h-100 April 100 | | |
| e. Describe Premi | ses Structure: Single Stor | y Multi-Story - # of Sto | ries Other: | | |
| | | Desidential Dindustr | ial Othor: | | • |
| g. Building Owner | Name: Muster la | y LLC | Phone Number:4/ | 4975 20 | 145 |
| Building Owner | Name: Muster lu Address: TIMOT | hy Stotts" | | | |
| | peration & Custor | | | | |
| Will customers be ente | ering the premises? 🔲 No | Yes | | | |
| | Proposed Hour | s of Operation: | Estimated Number of Customers | Potential Age Range | Class B Tavern Applicant Only: |
| Day of the Week | Open Time (include a.m. or p.m.) | Close Time (include a.m. or p.m.) | expected each day | of Customers | Age Restriction (If none, write 'None') AGC USFILLION |
| Sunday | 100 N 12pm | 2 am | 100 | All Ages | Family Restaurant |
| Monday | noon upm | 2am | 100 | Allages | 21 up - 9pm |
| Tuesday | noon nom | 2am | 100 | All DGLS | 210p-9pm |
| Wednesday | noon nom | 2am | 100 | All Ages | 21 up - 9 pm |
| Thursday | noon prom | 2am | 100 | All ages | 21 09-9901 |
| Friday | poon ozen | 2am | 125 | AllAges | 21 up 9/m |
| Saturday | noon 1290 | 2am | 150 | AllAges | 21 UP 9 PM |
| An Extended Hours Es piercing, salon, tailor, | tablishment License is requir tanning, etc.), recording stud | ed for any convenience stor dio or restaurant which is op | re, filling station, persona nen between the hours o | l service establis f 12:00 a.m. and | hment (such as tattoo, body 5:00 a.m. |
| Alcohol Establishmen Permitted Hours of O | | am to 9:00 pm Sunday thru am to 2:00 am Sunday thru | Saturday Thursday, 6:00 am to 2: | 30 am Friday & Sa | aturday |
| Entertainment Outdo | or Closing Hours: 10:0 Is es | 0pm Sunday-Thursday; 12:0 tablished by the Common C | Oam Friday & Saturday; o Ouncil in its approval of t | unless a different he licensee's plar | time, either earlier or later, n of operation. |
| 11. Signature | (s) | | | | |
| anton | io westing co | rfor | | | |
| (If there are no 2 | orietor, Partner, or 20% or m 0% or more shareholders, r-print name/title and sign) | ore Shareholder | Signature of additional | partner or 20% o | r more shareholder |

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



ALCOHOL BEVERAGE & PUBLIC ENTERTAINMENT PREMISES SUPPLEMENTAL APPLICATION

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

| Legal | Entity Name: Pure Lounge + Restaurant LLC |
|--------------|--|
| Prem | nise Address: 8531 West Brown Deer Road Milwaules |
| Prox | kimity of Premises to Church, School, Daycare Center or Hospital |
| Is th | e building within 300 feet of any church, school, daycare center or hospital? Yes |
| "Ser | vice Bar Only" Designation |
| | oplying for Class B or C license, are you applying for "Service Bar Only"? No Yes |
| Serv No s | vice Bar Only means customers cannot sit at the bar. Alcohol is served to employees who serve patrons seated at tables. stools, chairs or other articles of furniture shall be placed at the service bar for patrons to sit upon. |
| Busi | iness Information |
| a) | Are you taking out this application for anyone that may not be eligible for a license? No Yes If yes, list their name and address: |
| b) | Will the agent, a partner or the individual licensee be conducting the day-to-day operations of the business? \(\sum \text{No} \sum \text{Yes} \) |
| | 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, |
| c) | the person(s) listed above must obtain a Class B Managers license. Does anyone else have money invested or any other interest in this business? No Yes |
| C) | If yes, explain: |
| d) | Have you made an agreement with anyone to repay any loan or any other payments based upon income from the business? |
| | No Yes If yes, list name and address: |
| Pro | perty Information (New & Transfer Applicants Only) |
| a) | Do you own or lease the building? |
| b) | Who owns the fixtures (for example, coolers, etc.)? |
| c) | Are you purchasing the stock and/or fixtures? No Sees, amount paid \$ |
| d) | Total amount paid for business \$ \$ |
| e) | Total amount paid for goodwill of the business $\frac{0}{0}$ |
| | 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 |
| Lea | se Information (New & Transfer Applicants who are leasing the premises only) |
| a) | Date lease begins May 12029 Ends May 12027. |
| b) | Monthly rental \$ 45 00 . 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)? |
| | |

| · · · · · · · · · · · · · · · · · · · |
|---|
| Lease Information (Continued) |
| f) In addition to paying the monthly rental, will you have to pay anything additional to the owner of the building to guarantee performance of the lease? No Yes If yes, explain |
| Change of Agent Applicants Only |
| Have there been any changes to the floor plan since the last application was submitted? No Yes If no, a new floor plan is not required. If yes, submit a new floor plan and explain the change(s): |
| Signature |
| Signature of Sole Proprietor, Partner or 20% or More Shareholder (If no 20% or more Shareholder, Corporate Officer - print name/title and sign) |
| Note: All information contained in this application is subject to approval by the Common Council. |
| Deviating from approved plan of operation will subject licensee to citations, and/or suspension or non-renewal of the license. Contact the License Division for information on how to request changes. New and transfer of premises applicants must submit the following: |
| Detailed floor plan |

 \square 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 105, Milwaukee, WI 53202
(414) 286-2238 www.milwaukee.gov/license e-mail address: license@milwaukee.gov/license

| PREMISES ADDRESS: 85 | 31 W. Brown | Dur Road Mill | NAVICU, NJ 5322 |
|--|--|--|---|
| YPES OF ENTERTAINMENT (CH | HECK ALL THAT APPLY) | | |
| Instrumental Musicians | Battle of the Bands | Dancing by Performers | Amusement Machines How many? |
| Bands | Comedy Acts | Adult Entertainment/ Strippers/Erotic Dance | Concerts Approx. # per year? |
| Bowling Alley How many? | Disc Jockey | Wrestling | Theatrical Performances Approx. # per year? |
| Pool Tables How many? | ☐ Magic Shows | Patron Contests | Jukebox |
| Motion Pictures (movies by admission) - How many? | Poetry Readings | Patrons Dancing | Karaoke |
| Other: | | | |
| intertainment Outdoor Closing Hours: | 10:00pm Sunday-Thursday; 12:00a Is established by the Common Cour | m Friday & Saturday; unless a different tim cil in its approval of the licensee's plan of c | ne, either earlier or later, operation. |
| PROMOTERS/SOUND AMPLIFIC | CATION | | |
| Vill promoters ever be used for any o | | | |
| At any time will sound amplification b | e used? No Yes If Yes, De | escribe: Live mosi c | |
| EGAL CAPACITY OF PREMISES | | | |
| Promises license If you would like to | request the license be approved this lower capacity will print on yo | estions.) Legal capacity determines th with a lower capacity than that listed our license and override the capacity li | above, indicate the lower capacity |
| ACKNOWLEDGEMENT/SIGNAT | and the second of the property of the second | | |
| the Common Council. I agree to infor I understand that I shall not willfully re the general public because of race, co orientation, gender identity or expres | m the City Clerk within 10 days of efuse to provide the services offer lor, sex, religion, national origin o sion, familial status or the fact the ot seek such information as a con | n of operation will require a written re any substantial changes in the inform red under this license, or add charges r ancestry, age, handicap, lawful sour at a person is now or has been a mem dition of employment, or penalize any formation. | nation supplied in this application. or require deposits not required of ce of income, marital status, sexual ber of the military service, whether |
| I have knowledge of the City Ordinand suspension, non-renewal or revocation and a suspension was a suspension with the city Ordinand suspension was a suspension with the city Ordinand suspension will be supplied to the city of the cit | on, if I violate any rule, law or regu | ertainment, and understand that the lation of the city of Milwaukee and St | license may be subject to ate of Wisconsin. |
| Signature of Sole Proprietor, Partner (If no 20% or more Shareholder, Corp | or 20% or More Shareholder | d sign) | |
| Office Use Only: | App : | | |

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



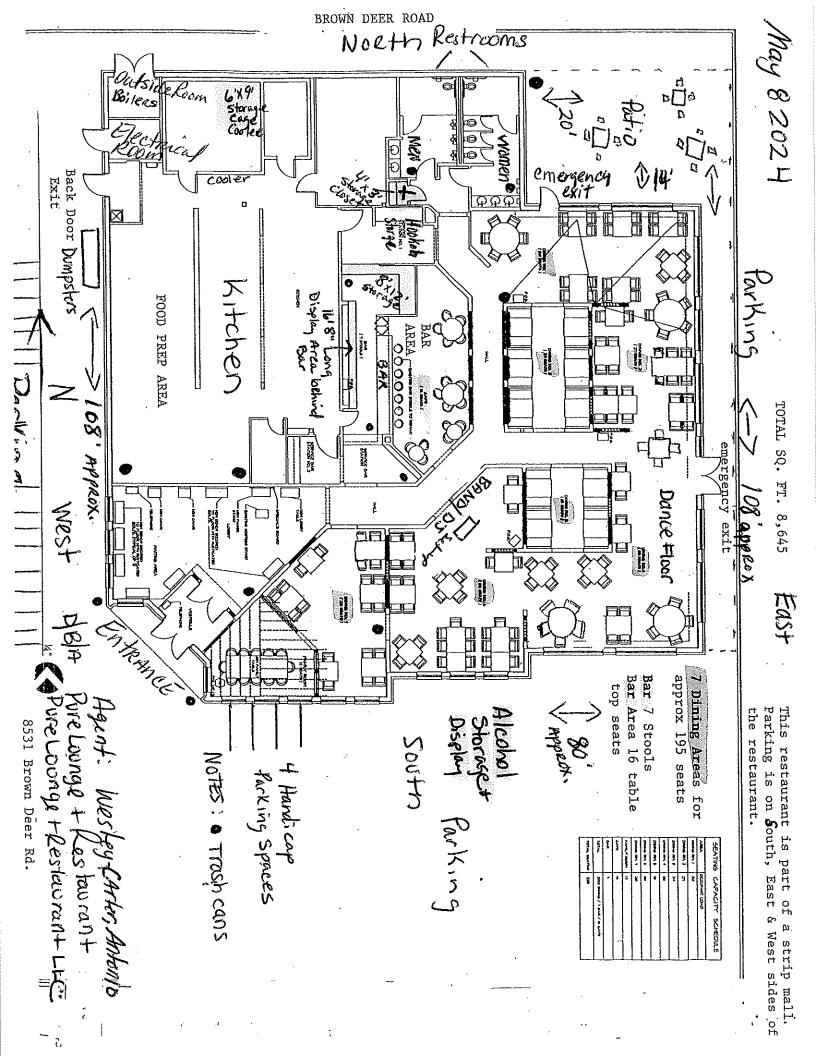
FOOD DEALER LICENSE PLAN OF OPERATION

OFFICE OF THE CITY CLERK, LICENSE DIVISION
CITY HALL, 200 E. WELLS ST, ROOM 105, MILWAUKEE, WI 53202
(414) 286-2238 • license@milwaukee.gov • www.milwaukee.gov/license

| Legal Entity Name: Pure Lounge + Kestaurant LL C |
|---|
| Legal Entity Name: Pure Lounge + Kestaurant LL C Premises Address: B531 W. Brown Deer Rd Milwau Cue, NI 532 |
| SECTION 1 TYPE OF BUSINESS |
| What will be the majority of your food sales? (check one) |
| Restaurant Items (meals): MEALS include, but are not limited to, chicken, ribs, sandwiches, roasted corn, baked potatoes, hot dogs, brats, tacos, nachos w/ cheese and meat, French fries, cooked or deep fried vegetables/fruit, cooked cheese curds, corn dogs, egg rolls, salads. |
| Retail Items (snacks and beverages): RETAIL items include, but are not limited to, ice cream/soft serve, lemonade, snow cones, coffee, espresso, cappuccino, tea, fruit juice, smoothies, candy, dispensed soda, fruit cups, bakery, cookies, kettle corn, cotton candy, funnel cakes, fritters, tortilla chips w/ cheese. |
| Will it be a convenience store? Yes No A convenience store contains less than 5,000 square feet of retail space and has, as its primary business, the sale of basic food items and in addition, sells household products or is a filling station that sells basic food items and household products. |
| ☐ Bed & Breakfast ☐ Micro Market |
| All Applicants: Submit a menu or a list of food items that will be sold. |
| Will any wholesale business be done? No |
| Less than 25% |
| 25% or More AND: Restaurant items (meals) will be sold — Complete this application and also contact DATCP. |
| NO restaurant items (meals) will be sold - Do NOT complete this application. Contact DATCP only. |
| SECTION 2 FOOD PROCESSING |
| Will any food processing be done? |
| Processing is defined as assembling, grinding, cutting, mixing, baking, coating, stuffing, packing, bottling, grilling, canning, extracting, fermenting, distilling, pickling, freezing, drying, smoking, or packaging. |
| SECTION 3 FOOD REQUIRING TEMPERATURE CONTROL |
| Will any food that requires temperature control be sold? \(\text{No Yes} \) (includes dairy products such as milk, cheese, and ice cream, fish, shellfish, meat, poultry) If yes, list the types of food items: \(\text{Math. Qsh.} \), \(\text{Chuse, milk.} \) |
| |

ccl-foodplan 2/28/19

| SECTION 4 DETAILS OF OPERATION |
|---|
| Will you have seating on site for dining? No Yes |
| Will you be doing any catering? |
| Will you be doing any delivery? ☐No ☐Yes |
| Will you have outdoor activities? No - Yes - Check all that apply: Bar Cooking/Grilling Dining |
| Will you have a drive thru window? No Yes - Are hours different from inside? No Yes |
| If Yes, provide drive thru hours: |
| Will scales or barcode scanners be used? No Yes - You must also apply for a Weights & Measures License. |
| SECTION 5 ADDITIONAL SITES |
| Where will food be prepared and/or sold? |
| At a single site At multiple sites: How many?(for example, a hotel with several dining rooms or bars) |
| If multiple sites, attach a Food Dealer Additional Site Addendum (ccl-foodadd) for each additional site. |
| SECTION 6 CONSTRUCTION OR CHANGES |
| Are you planning any construction, remodeling or equipment changes? |
| No If No, SKIP to Section 7 |
| Yes If Yes, check all that apply: New construction of a building Renovation or remodeling |
| Construction changes to existing building Equipment changes only |
| Provide a brief description of the changes: |
| Start date: |
| Name, Address & Phone Number of Architect: |
| Name, Address & Filone Number of Architect. |
| All and O Dhama Alumban of Combractors |
| Name, Address & Phone Number of Contractor: |
| SECTION 7 ALCOHOL BEVERAGES |
| Are you applying for an alcohol beverage license? |
| No If No, SKIP to Section 8 |
| Yes If YES, if your food license is approved prior to the alcohol license, when do you want the food license issued? |
| Immediately At the same time as the alcohol license |
| |
| SECTION 8 ACKNOWLEDGEMENTS & SIGNATURE |
| You must initial each item confirming your understanding: |
| I understand the Health Department must conduct an inspection and advise the License Division of their approval |
| before the license may be issued. |
| I understand I must obtain an occupancy permit from the Department of Neighborhood Services and an inspection may be required. Neighborhood Services must advise the License Division of their approval before the license may |
| be issued. |
| I understand the district alderperson will review and either support or object to my application. If he/she objects, I may appeal and be scheduled to appear before the Licenses Committee. The Licenses Committee will then make a |
| recommendation to the Common Council. The Common Council must grant the license before it may be issued. |
| l understand proof of payment for all license fees must be on tile in the license bivision before the license may be |
| issued and the license must be issued and posted in my establishment prior to opening for business. I will not operate my food business until the license has been issued and posted in the establishment. |
| Anland Weeker CARL |
| Signature of Sole Proprietor, Partner, or 20% Shareholder: |
| |



Pure Lounge & Resturant Menu

8531 W Brown Deer RD Milwaukee, WI

Applicant: Wesley- Carter, Antonio

Pure Appetizers

Spinach Dip & Chips \$8

Queso Dip & Chips \$8

Mozzarella sticks \$7

Onion Rings \$8

Bacon Wrapped Cherry Peppers \$8

Salad

Classic Caesar Salad \$15

Crisp Hearts of Romaine Tossed in Robust Caesar Dressing Topped with Herbed Croutons & Parmesan Cheese

Add Grilled Chicken \$7 | Add Grilled Shrimp \$10

Pure Pasta

Philly Cheesteak Pasta \$20

Tender slices of beef, sweet bell peppers, sliced mushrooms and onions

Jerk Chicken Pasta \$20

Broccoli, onion, red and green peppers in creamy alfredo sauce

Pure Specialities

Grilled 6oz sirloin steak \$28

Pure house seasoning served with garlic mashed potatoes and sautéed vegetables

Grilled Lamb Chop Entree \$35

Australian double cut lamb chops. Maldon salt flakes, Italian herbs, grilled and oven baked
Served with baked potatoes & asparagus wrapped with bacon bits.
Bacon choice- turkey or pork
Sauce - gravy or Balsamic Brown Sugar

Smothered Chicken \$28

Two Grilled chicken breasts stuffed Mac N Cheese and Sweet Pototoes

Pure Sides

French Fries \$5

Mac N Cheese \$6

Dirty rice \$6

Fried deviled eggs \$12

Fried Okra \$7

Loaded Baked Potato \$10

Stuffed with cheddar and jack cheeses, bacon and chives. Sour cream and butter on the side
Add Grilled Chicken \$7 | Add Grilled Shrimp \$10

Pure Lounge & Resturant Menu

8531 W Brown Deer RD Milwaukee, WI

Applicant: Wesley- Carter, Antonio

Pure Drink Menu

Juice \$4

Soda \$4

Beer \$6

Bud Light Coors Light Corona Premier Blue Moon Heineken

Red Wine

DARK HORSE PINOT NOIR, CALIFORNIA 7 (GLASS) | 23 (BTL)

CHATEAU SOVERAIN MERLOT, NAPA VALLEY 8 (GLASS) | 27 (BTL)

White Wine

MOSCATO Electra 7 (GLASS) | 23 (BTL)

RIESLING

Shades of Blue 7 (GLASS) | 23 (BTL)

SAUVIGNON BLANC Fishtail 8 (GLASS) | 23 (BTL)

PINOT GRIGIO Aqua di Venus 8 (GLASS) | 23 (BTL)

Champagne

MOËT & CHANDON

Glass | 28 / Bottle | 130

Hand- Crafted Cocktails

FunPunch

Rum, Orange & Pinneapple Juice, Fresh Lime Juice, Gernadine, Fresh Orange & Lime slices

Reign Blueberry Mojito

Tito's Handmade Vodka. Lemonade Juice, Sprite, Fresh mint leaves & Blueberries

The Mule

Vodka, Ginger Beer & Fresh Lime Juice

HerStixx

Hennessy, Casamigos Reposado, Lemonade & Pineapple Juice & Red Bull \$18

BLUEBERRY LEMON DROP

Tito's Handmade vodka, fresh blueberries, lush candied lemon, balanced with fragrant ripe blueberry 250 cal | 18

THE MANHATTAN

Angel's Envy rye, Carpano Antica vermouth, rich black cherry, highlighted with vanilla & lush caramel 200 cal | 20

OLD FASHIONED

Basil Hayden's bourbon, aromas of orange peel, layered with sweet toasted vanilla 160 cal | 18