

CITY OF MILWAUKEE OFFICE OF THE CITY CLERK

Wednesday, June 26, 2024

COMMITTEE MEETING NOTICE

AD 09

PATEL, Apexa V, Agent SHIV RESTAURANT LLC 6625 S 46TH St Franklin, WI 53132

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, July 09, 2024 at 10:00 AM

The access code is https://meet.goto.com/616682381. Please see the enclosed best practices document for further instructions.

Regarding:

Your Class B Tavern, Public Entertainment Premises and Food Dealer License Applications Requesting Instrumental Musicians, Jukebox, Bands, Karaoke, Comedy Acts, Magic Shows and 2 Pool Tables as agent for "SHIV RESTAURANT LLC" for "IVR BAR" at 10950 W GOOD 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: 05/29/2024 Officer: T. Geniesse

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

Name of Premise: IVI Address: 10950 W. G Phone: N/A		Rd			
Owner: Apexa V. Pate Owner address: 6625 City State Zip: Frankl Owner Phone: 414-33 Owner email: apexav	S 46 th St in, WI 531 1-1872	132		403	
Licensee/Agent: Aper Home Address: 6625 City State Zip: Frankl Phone: 414-331-1872 Email: apexavpatel@	S. 46 th St in, WI 531				
Preferred contact: Ap	exa 414-3	31-1872	or Gary S	Singh 41	4-400-1744
Location currently op	en:] YE	s 🛛	NO	
Projected open date:	As soon as	possible			
Day's open: S I	м 🗆 т 🔲	W 🗌 Th	⊒F □S.	A 🛛 AI	L
Hours of Operation:	Mon: 11 Tue: 11 Wed: 11 Thu: 11 Fri: 11	la-111p la-11p la-11p la-11p la-11p la-11p			□24 hours □ Y ☒ N
Premise Type:	⊠Tavern ⊠Restau □Other:	ırant			
Licenses currently he	ld: Holds l	licenses in	ı City of	Waukes	ha and City of Greenfield

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? XVes	
2. What surrounds the k		
a. Park	reaction: (Check an the a	bbr)
b. School		
N	ton	
c. ⊠Youth Cen d. □Church	ret	
	£ 1	
	f so, how many	•
f. Residential		
g. Other busin	iesses	
h. Other:		nto the interior Myor Mis
3. Can you see from the	outside of the location i	nto the interior Yes No
		ion from the outside ⊠Yes □No
5. Are exterior window	s free of signage 🔀 Yes	L_11/0
Is there a parking lot ⊠Yes		
6. Is the parking lot clea	and the second s	
7. Off-Street parking		
8. Is the parking lot wel		
9. Valet Parking ☐ Yes	IXINo to□xx □	N.T. 11
	ave a guard? Yes	
	ave cameras? ⊠Yes ☐	
10. Are there areas where	e a person could conceal	themselves Yes No
		es it appears to be adequate ⊠Yes □No
12. Exterior Payphone?	☐Yes No	M-v 1 111
13. Are there No Loiterin		
		No How Many: 5- will put more if needed
		ed and easy to see Yes No will put
them up onto the bui	lding	
Camera Survey:		
16. Does this location ha		Yes ∐No
17. Are they in working		
18. What format are the		
a. Color	∑Yes □No	
b. Digital	⊠Yes □No	
c. Recorded	⊠Yes □No	
19. How long is footage		
20. Are there exterior ca	meras 🛮 Yes 🗌 No F	Iow many: 5
21. Are there interior car	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	

22. Do all employees know how to retrieve recorded digital images/footage? ☐ Yes ☒ 23. Cameras located in parking lot ☒ Yes ☐ No How many	No
Interior Survey: 24. What is the planned capacity 299 25. What is the minimum number of employees That will be on premise 15-22 26. Is the storeowner willing to be a standing complainant regarding loitering? ☑Yes ☐ a. If yes have them fill out the standing complaint form and give them two of commercial signs ☐Yes ☑No 27. Is the interior of the location neat and clean? ☑Yes ☐No 28. Does an interior camera face the entrance/exit? ☑Yes ☐No 29. Is there a lockable area that separates employees from customers? ☑Yes ☐No 30. Are emergency and non-emergency numbers posted near the phone? ☐Yes ☑No 31. 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	□No the
Security	
32. How many security personnel are going to be employed: Pending 33. How ill they be deployed: Interior	

ADDITIONAL COMMENTS/RECOMMENDATIONS:

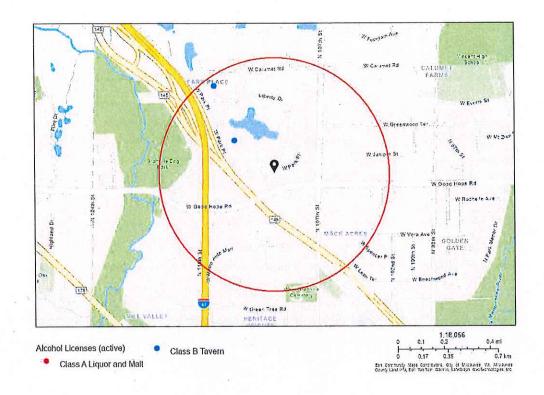


City Concentration Map for 10950 West Good Hope Rd.

Area of Interest (AOI) Information

Area: 21,862,585.6 ft2

May 10 2024 10:12:17 Central Daylight Time



Summary

Name	Count	Area(ft²)	Length(mi)
Alcohol Licenses	2	9 9	

Alcohol Licenses

#	Legal Entity	Trade Name	Licensee	Address	License Type Name	Total Capacity	Expiration Date	Count
1	Wahhab Seva Enterprises Inc	Sababa Cafe	EDWARD E WAHHAB, Agt	11270 W PARK PL	Class B Tavern License		11/22/2024, 6:00 PM	1 .
2	PARK PLACE HOSPITALITY, LLC	HILTON GARDEN INN	Thomas A Setlik, Agt	11600 W PARK PL	Class B Tavern License	136	1/27/2025, 6:00 PM	1

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







Notice of Public Hearing

Blank Notice

PATEL, Apexa V, Agent IVR BAR at 10950 W GOOD HOPE Rd

Class B Tavern, Public Entertainment Premises and Food Dealer License Applications Requesting Instrumental Musicians, Jukebox, Bands, Karaoke, Comedy Acts, Magic Shows and 2 Pool Tables

Tuesday, July 09, 2024 at 10:00 AM

To whom it may concern:

The above application has been made by the above named applicant(s). This requires approval from the Licenses Committee and the Common Council of the City of Milwaukee. The hearing before the Licenses Committee will take place on 7/9/2024 at 10:00 AM in Room 301-B, Third Floor, City Hall. This is a public hearing. Those wishing to view the proceeding are able to do so via the City Channel – Channel 25 on Spectrum Cable – or on the Internet at http://city.milwaukee.gov/citychannel. Those wishing to provide oral testimony via internet are asked to contact the staff assistant, Yadira Melendez at (414) 286-2775 or stasst5@milwaukee.gov for necessary information. Please make such requests no later than one business day prior to the start of the meeting. You are not required to attend the hearing, but please see the information below if you would like to provide testimony. Once the Licenses Committee makes its recommendation, this recommendation is forwarded to the full Common Council for approval at its next regularly scheduled hearing.

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

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

CURRENT OCCUPANT

MAIL ADDRESS 10743 W GOOD HOPE RD 10745 W GOOD HOPE RD 10825 W GOOD HOPE RD CITY STATE ZIP MILWAUKEE, WI 53224-3603 MILWAUKEE, WI 53224-3603 MILWAUKEE, WI 53224-3605

Blank Notice

Total Records: 3

Radius 2500 fet and Center of the Circle: 10950 W Good Hope Rd

ccl-busplan 5/12/2020

MILWAUKEE

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. Ty	pe of Business
Applyin	ig 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)
Provide	e a detailed description of the type of business you plan on operating:
	DINE IN RESTAURANT AND BAR
Do you	have any experience operating this type of business? \(\sum \overline{\Omega}\) No \(\overline{\Omega}\) Yes If yes, explain: \(\overline{\Omega}\) OW \(\overline{\Omega}\) Other Restauct
2. B	usiness Operations
a.	Proposed Opening Date: July-1 2024
b.	Is this premise under construction? No Yes If yes, list estimated completion date:
c.	Is this a franchise? 💯 No 🗌 Yes
d.	Is this premises currently licensed? Ves 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): 805, 5 Layton Blvd, NIIwwee, WI 53215
h.	Are other businesses operating in the same building? No Taylor Yes If yes, describe:
3. Li	tter & Noise
a.	How are grounds kept clean? Sweep Pressure Wash Dick Up Litter Other:
b.	How often will grounds be cleaned? Thaily Weekly As Needed Monthly Other:
c.	Grounds cleaned by: Licensee Building Owner Employees Hired Maintenance Other:
d.	How are noise issues prevented and/or addressed? Security Manager approaches customer(s) Call Police
	Signs Posted Other:
e.	Will a sound amplification system be used? No Yes If yes, describe:
4. S	moking & Sanitation
a.	Are there designated outdoor smoking areas? No Ves If yes, describe: Porto.
b.	Number of Garbage Cans: Inside: 4 Locations: DINNIY Area BOW BOW Area
ļ Ē	Outside: 4 Locations: Partio, Outdown Putio, Outdown
c.	Is a crowd control barrier used? 💟 No 🗌 Yes — If yes, describe:
d.	How many restrooms are on the premises? 2 to feet.
e.	Name of solid waste contractor: Advanced Disposal Waste Management Other:

5. Security					
a. Are there onsite parking s	spaces? No Ves	If yes, how r	many? <u>110</u> an	d describe	the parking security
plan: Carriera,	Security C	greva			0
b. Is there a loading zone?	No Yes If yes, do	escribe the lo	oading area security plar	1: Can	rever Sourcely
(green	n				
c. Will you have licensed se	curity on premise? 🧏	No Yes	If yes,how many?	an	nd answer the following:
	ponsibilities?				
Describe equipmen	nt used		1		•
List their License N	lumber (s)			·	inside, outside
grand buil	ding posling	<u>}</u>			•
e. Will searches/identificati			io 🗌 Yes If yes, descri	be	
6. Percentage of Sales					
Alcohol <u>30</u> %	Food	<u>5</u> %	Secondhand Merchandis	e	Precious Metals & Gems
Entertainment 10 %	Vape Devices, Tobacco Products	_5_%	%		%
Li i i di la cara di l	Salvaged Materials		Personal Services (such a	s tattoo,	Other%
Pawnbroker Activity%	(such as scrap metal)		body piercing, salon, taile tanning, etc.)		Describe:
7. Businesses/License	s on the Premise	s (check a			
Type 1					IF toward blot arms Chale
Full Service Restaurant	Cafe/Coffee Shop		ast Food Restaurant		e/Fraternal/Veterans Club
Night Club	Tavern	Cocktail	_	Teen C	dui.
Banquet Hall	Sports Facility	☐ Bowling			
Hotel/Motel: Number of F		Roomin	g House: Number of Flor		
	ooms:		Number of Roo	oms:	
Type 2 Liquor Store	Corner Store	Superm	arket	Conve	nience Store
Gas Station	Amusement/Phono			Recycl	ing, Salvage or Towing
Used Car Dealer	Personal Service Es		on, tallor, etc.)	Record	ling Studio
What other licenses/permits wil	l you hold at this location?	(check all that	t apply)		
☑Occupancy Permit ☑	Cigarette, Tobacco, G	as Station 🔲	Extended Hours Class "	'B" Tavern	Weights & Measures
Secondhand Dealer	Precious Metal & Gem [Other:	•		
8. Legal Capacity (on	ly if a Tyne 1 nre	mises in	#7 above)		
				<u> </u>	
Capacity 299 (Call t	he Milwaukee Developmer	nt Center at 41	.4-286-8211 if you have qu	estions.)	

,

9. Premises De	escription				
a. Identify all area	(s) of the premises that will b	ne used in operating this busi ge ' Ø Patio □ Beer Garder	iness (include areas used n □Sidewalk Café □Do	only for storage) eck □Rooftop	
□Other: Descri	be:				
b. Describe Location	on: Major Thoroughfare	Secondary Street Otl	her:		·
c. Nearest Major (Cross Street: W Glood	hope Rd.			
d. Describe Buildir	ng: 🔀 Free Standing Buildin	g 🗌 Strip Mall 📗 Otner:			
e. Describe Premis	ses Structure: 🔀 Single Stor	y 🔲 Multi-Story - # of Stor	ies Other:		
f. Describe Surrou	ınding Area: 🔲 Commercia	Residential Industri	lal 🗌 Other:		3-43
g. Building Owner	Name: APEXA	DATEL	Phone Number: 410	<u>- 331-12</u>	512
Building Owner	Address: <u>6625</u> , S	s 46th St, R	MUNICIN, WIL	<u>- 5313</u>	<u> </u>
10. Hours of O	peration & Custor	mers			
Will customers be ente	ering the premises? No	W Yes			
Day of the Week	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')
Sunday	11 AM	II PM	100 Above	3060	
Monday	II AM	11 PM	100 ubre	30-60	
Tuesday	II AM	N PM	100 House	30-60	
Wednesday	II AM	II pm	100 houre	30-60	
Thursday	II AM	II PM	100 Above		
Friday	11 AM	11 pm	100 Alove	30-60	
Saturday	11 BM	II pm	100 Moove	30-60 Alman	
An Extended Hours Es	stablishment License is requi tanning, etc.), recording stu	red for any convenience stor dio or restaurant which is op	e, filling station, persona	l service establish	ment (such as tattoo, body 5:00 a.m.
Alcohol Establishmen Permitted Hours of O	ts Class A: 8:00	am to 9:00 pm Sunday thru am to 2:00 am Sunday thru	Saturday		
Entertainment Outdo	or Closing Hours: 10:0 Is es	Opm Sunday-Thursday; 12:0 tablished by the Common Co	Oam Friday & Saturday; u ouncil in its approval of ti	inless a different ne licensee's plan	time, either earlier or later, of operation.
11. Signature	(s)				
A	e-ecPol-		NAB		
(If there are no 2	prietor, Partner, or 20% or m 0% or more shareholders, r-print name/title and sign)	nore Shareholder	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 200 E. Wells St. Room 105, Milwaukee, WI 53202

(414) 286-2238 e-mail address: license@milwaukee.gov www.milwaukee.gov/license

	ntity Name: SHIV RESTAURANT LLC
Premise	e Address: 10950 W GOODHOPE Rd, MI Walcer, WI 53224
and the second second second second	nity of Premises to Church, School, Daycare Center or Hospital
Is the b	uilding within 300 feet of any church, school, daycare center or hospital? Yes
"Servi	ce Bar Only" Designation
	ring for Class B or C license, are you applying for "Service Bar Only"? ON Yes
Service No sto	Bar Only means customers cannot sit at the bar. Alcohol is served to employees who serve patrons seated at tables. ols, chairs or other articles of furniture shall be placed at the service bar for patrons to sit upon.
Busin	ess Information
1	re you taking out this application for anyone that may not be eligible for a license? Mo Yes
	/ill the agent, a partner or the individual licensee be conducting the day-to-day operations of the business? \sum No \sum Yes
ıf lf	no, list the name and address of the person(s) who will:
	lass B Applicants: If the agent, a partner or the individual licensee will not be conducting the day-to-day operations of the business,
	ne person(s) listed above must obtain a Class B Managers license. The person(s) listed above money invested or any other interest in this business?
1	yes, explain:
d) H	lave you made an agreement with anyone to repay any loan or any other payments based upon income from the business?
1	No Yes If yes, list name and address:
Prope	erty Information (New & Transfer Applicants Only)
a) D	Do you own or lease the building?
b) V	Who owns the fixtures (for example, coolers, etc.)? SHIV RESTAVEANT LLC
c) A	Are you purchasing the stock and/or fixtures? \text{INO} \text{LYes If yes, amount paid \$\frac{90000.00}{}}
d) T	otal amount paid for business \$ 810000,00
e) 7	Total amount paid for goodwill of the business \$
f	Goodwill comprises the reputation and customer relationships of an existing business. If the price you pay for the business exceeds the air market value of all of the rest of the assets of the business, the excess may be considered goodwill.
f) H	Have you made arrangements with the seller for payment of personal property taxes? No Yes
Lease	e Information (New & Transfer Applicants who are leasing the premises only)
a) l	Date lease begins Ends
,	Monthly rental \$ Do you have an option to renew the lease?
1 '	Does your lease allow for assignment to another party without the consent of the owner? \(\simega\) No \(\simega\) Yes
	For what length of time have you been guaranteed occupancy (number of years)?

Lea	se 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?
g)	Does the present owner or occupant object to the granting of your license? No es
Cha	inge of Agent Applicants Only
	ve there been any changes to the floor plan since the last application was submitted? No Yes no, a new floor plan is not required. If yes, submit a new floor plan and explain the change(s):
Sig	nature
	Analysis of Sole Proprietor, Partner or 20% or More Shareholder or 20% or more Shareholder, Corporate Officer - print name/title and sign)

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

Deviating from approved plan of operation will subject licensee to citations, and/or suspension or non-renewal of the license. Contact the License Division for information on how to request changes.

New and transfer of premises applicants must submit the following:

Detailed floor plan

☑If a restaurant, copy of the menu



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

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	Disc Jockey	Wrestling	Theatrical Performances Approx. # per year?
Pool Tables ow many? 2	Magic Shows	Patron Contests	Jukebox
Motion Pictures (movies by dmission) - How many?	Poetry Readings	Patrons Dancing	Karaoke
Other:			
ntertainment Outdoor Closing Hours:	10:00pm Sunday-Thursday; 12:00a Is established by the Common Cour	m Friday & Saturday; unless a different tim ncil in its approval of the licensee's plan of a	ne, either earlier or later, operation.
ROMOTERS/SOUND AMPLIF	CATION		
Vill promoters ever be used for any o	of the entertainment? 🧣 No 🗌	Yes If Yes, Describe:	
	r		,
At any time will sound amplification b	<u> </u>	escribe: Speukev inskd	e Rostant.
	ne used? No Yes If Yes, Do		e Rostant.
EGAL CAPACITY OF PREMISES (Call the Development Premises License, If you would like to	t Center at 414-286-8211 with que		he fee for your Public Entertainmen above, indicate the lower capacity
(Call the Development Premises License. If you would like to here: If approved,	TURE Yes If Yes, Do Yes If Yes, Do Yes If Yes, Do Yes If Yes, Do Yes Yes If Yes, Do Yes Yes If Yes, Do Yes	escribe: Specification in Std. destions.) Legal capacity determines the service of the service	he fee for your Public Entertainmen above, indicate the lower capacity isted on your Occupancy Permit.
(Call the Development	TURE s been issued, a change to the plarm the City Clerk within 10 days of refuse to provide the services offe plor, sex, religion, national origin coston, familial status or the fact the plarm the City Clerk within 10 days of refuse to provide the services offe plor, sex, religion, national origin coston, familial status or the fact the pot seek such information as a compromotion on the basis of such in	rescribe: Specific MSIC restions.) Legal capacity determines the with a lower capacity than that listed our license and override the capacity lim of operation will require a written refer any substantial changes in the informated under this license, or add charges or ancestry, age, handicap, lawful sour at a person is now or has been a mem dition of employment, or penalize any formation.	he fee for your Public Entertainmen above, indicate the lower capacity isted on your Occupancy Permit. equest to change and approval from nation supplied in this application. or require deposits not required of ce of income, marital status, sexual ber of the military service, whether y employee or discriminate in the
(Call the Development	TURE s been issued, a change to the plarm the City Clerk within 10 days of refuse to provide the services offeolor, sex, religion, national origin coston, familial status or the fact the plarm the City Clerk within 10 days of refuse to provide the services offeolor, sex, religion, national origin coston, familial status or the fact the plarm the City Clerk within 10 days of refuse to provide the services offeolor, sex, religion, national origin coston, familial status or the fact the promotion on the basis of such in promotion on the basis of such in the ces currently regulating public entires.	rescribe: Specific MSIC institute in sections.) Legal capacity determines the with a lower capacity than that listed our license and override the capacity limits of operation will require a written refer any substantial changes in the information and the information of employment, or penalize and dition of employment, or penalize and dition of employment, or penalize and instantial changes in the information of employment, or penalize and dition of employment, or penalize and instantial changes in the information of employment, or penalize and dition of employment, or penalize and instantial changes in the information of employment, or penalize and instantial changes in the information of employment, or penalize and instantial changes in the information of employment, or penalize and instantial changes in the information of employment, or penalize and instantial changes in the information of t	he fee for your Public Entertainmen above, indicate the lower capacity isted on your Occupancy Permit. equest to change and approval from nation supplied in this application. or require deposits not required of ce of income, marital status, sexual ber of the military service, whether y employee or discriminate in the
(Call the Development	re used? No Yes If Yes, Do To Center at 414-286-8211 with que request the license be approved this lower capacity will print on your TURE Is been issued, a change to the pla muthe City Clerk within 10 days of refuse to provide the services offer plor, sex, religion, national origin of ssion, familial status or the fact the not seek such information as a compromotion on the basis of such in Increase currently regulating public ent on, if I violate any rule, law or regulation or 20% or More Shareholder porate Officer - print name/title ar	restribe: Specific Inside the capacity determines the with a lower capacity than that listed our license and override the capacity in of operation will require a written received under this license, or add charges are ancestry, age, handicap, lawful sour at a person is now or has been a mem dition of employment, or penalize and formation. The capacity is a capacity determines the capacity is a capacity in the capacity is a capacity in the capacity in the capacity is a capacity in the capacity in the capacity is a capacity in the capacity in the capacity in the capacity is a capacity in the capacity	he fee for your Public Entertainmen above, indicate the lower capacity isted on your Occupancy Permit. equest to change and approval fron nation supplied in this application. or require deposits not required of ce of income, marital status, sexual ber of the military service, whether y employee or discriminate in the



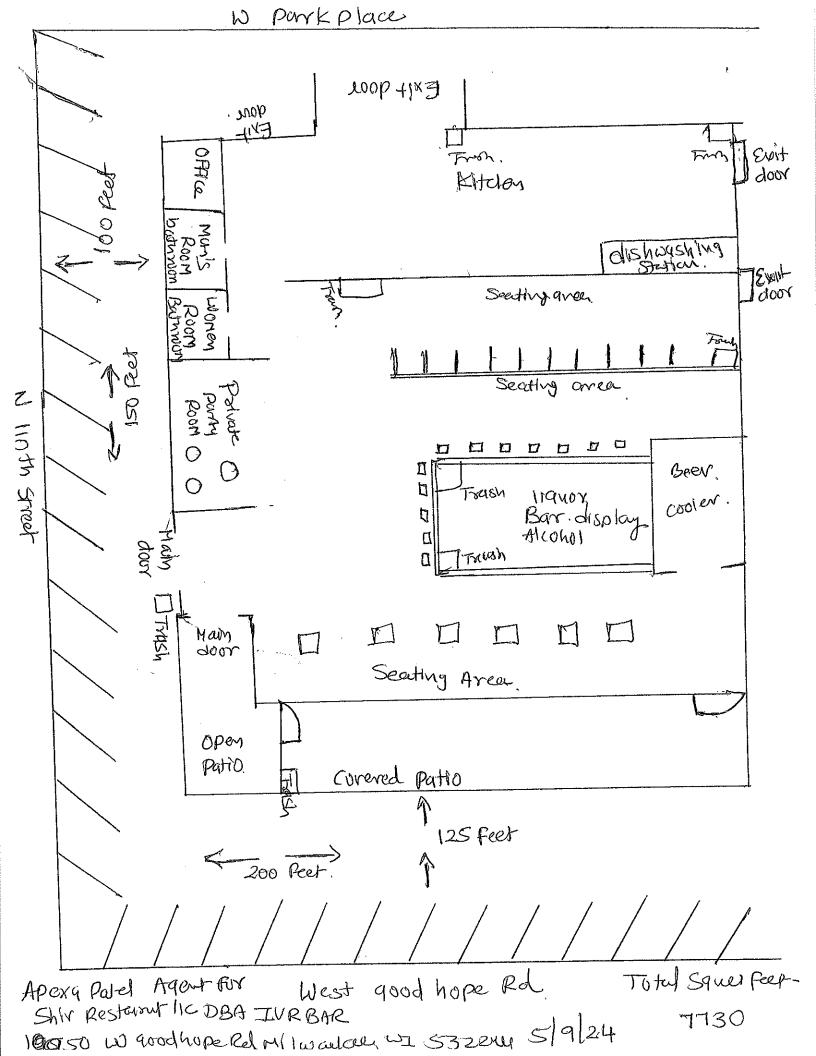
FOOD DEALER LICENSE PLAN OF OPERATION

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: SHIV RESTAURANT LLC
Premises Address: 10950 W 0900D HOPE RD, MTLWAUKEE, WIS322
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 🔲 Yes If yes, what percentage of food sales will be wholesale?
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? No Yes
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? We No Yes (includes dairy products such as milk, cheese, and ice cream, fish, shellfish, meat, poultry)
If yes, list the types of food items:

ccl-foodplan 2/28/19

SECTION 4	DETAILS OF OPERATI	ÒŅ	
Will you have se	ating on site for dining?	☐ No	¥Yes
Will you be doin	g any catering?	□No	☑ Yes
Will you be doin	g any delivery?	☐ No	Yes
Will you have ou	itdoor activities?	☐ No	Yes - Check all that apply: Bar Cooking/Grilling Dining
Will you have a	drive thru window?	X No	Yes - Are hours different from inside? No Yes
		•	If Yes, provide drive thru hours:
Will scales or ba	rcode scanners be used?	No No	Yes - You must also apply for a Weights & Measures License.
SECTION 5	ADDITIONAL SITES		her man and the second
Where will food	be prepared and/or sold?		
At a single si			nany?(for example, a hotel with several dining rooms or bars)
If multiple sites,	attach a Food Dealer Addi	tional Site	Addendum (ccl-foodadd) for each additional site.
SECTION 6	CONSTRUCTION OR	CHANGE	S
Are you plannin	g any construction, remode	eling ór ed	quipment changes?
₩ No If	No, SKIP to Section 7		f
Yes If	Yes, check all that apply:	☐ New	construction of a building Renovation or remodeling
	•	Cons	struction changes to existing building Equipment changes only
Provide a brief	description of the changes:		
Start date:			
	& Phone Number of Archit	ect:	
name, nadress	STRONG HUMBER OF FICHIL		
None Addres-	2. Dhong Number of Carty	actor:	
rame, Address	& Phone Number of Contr	aului	·
SECTION 7	ALCOHOL BEVERAG	ES	
	ng for an alcohol beverage		
l '	No, SKIP to Section 8		
	,	approved	prior to the alcohol license, when do you want the food license issued?
-	Immediately At the		
CECTION O	ACKNOWLEDGEME		·
SECTION 8			
You must initia	l each item confirming you	r understa	anding:
			st conduct an inspection and advise the License Division of their approval
bef	ore the license may be issu	ed.	permit from the Department of Neighborhood Services and an inspection
mar mar	qerstang i must obtain an q y be required. Neighborho	occupancy od Service	s must advise the License Division of their approval before the license may
he i	issued.	*	
AD lur	nderstand the district alder; y appeal and be scheduled	oerson wil to appear	I review and either support or object to my application. If he/she objects, I before the Licenses Committee. The Licenses Committee will then make a
rec	ommendation to the Comn	ion Counc	cil. The Common Council must grant the license before it may be issued.
issı	iderstand proof of paymen ied and the license must be	t for all lic sissued ar	ense fees must be on file in the License Division before the license may be and posted in my establishment prior to opening for business.
			the license has been issued and posted in the establishment.
Signature of Se	ole Proprietor, Partner, or 2	20% Share	holder: Apenufat.
	1	MAG	
Signature of A	dditional Partner:	W 13 1/2	•



cheese curds cheese cubs served with mint sauce \$ 13 paneer hariyali homemade cottage cheese stir fried make with coriander sauce with bell paper chicken malai tikka chicken thigh garlic ginger lemon paste and cook in tandoori \$20 IVR special soup vegetable soup, chicken soup, lentil soup \$7 pasta vegetable pasta, chicken pasta ,spinach pasta falafel ground chickpeas, fresh herbs and spices, with naan \$12 calamari hand breaded served with herbs and spices sauce \$13 Hummus pureed chickpeas with tahini served naan \$ 11 fried cheese sticks fried cheese with home made sauce \$ 13 cheese rolls mixed cheese and parsley wrapped with crisp roll \$ 12 salad lettuce tomato, carrot, cucumber, with home dressing \$ 8 chicken basil rolls seasoned pulled chicken breast basil and cheese \$13 veg rolls mix veg warped in roll \$12 samosa 2 patties chop potatoes green peas and herbs spices \$ 6 fish pakora fish marinated with garlic and spices and deep fried \$17 cauliflower Manchurian make with garlic chill sauce lit green paper and onions and spice \$14 Aloo tikki chat potato patties served with chickpeas onion cilantro and mint sauce \$13 chole bhature chickpeas chat make onion and sweet sauce and yogurt and served with puffed bread \$15 veg Manchurian boils fried veg dumplings mix with bell paper and cabbage cook in home made sauce \$14

lemon paper, garne, creamy chantro sauce, chili sauce, vo dip

\$12

Veg fritters

mix vegs make with chickpeas and spices \$ 11

Hakka veg noodles

soft noodles with mix vegetables and IVR special sauce \$ 13

Whole tandoori chicken

make with yogurt garlic ginger and tandoori mix spice \$ 29

Chicken hariyali

chicken magnet with mint cliantro green chill sauce with special spice

Mains

Curry Dish

served with rice & bread choose your protein chicken , lamb , goat , shrimp, fish \$ 24

Butter tikka masala dish

served with rice & bread choose your protein

chicken, lamb, goat, shrimp, fish \$ 24

Coconut masala dish

served with rice & bread choose your protein chicken , lamb , goat , shrimp , fish , homemade cottage cheese or vegetable \$ 24

Shahi korma dish

served with rice & bread choose your protein vegetable, chicken, goat, lamb, fish, shrimp paneer \$24

vegetarian dish

served with rice & bread chana masala , palak paneer , dal makhani , aloo gobhi chana saag \$24

Naan burrito

choose protein chicken tikka, paneer tikka, make homemade chill cliantro sauce with green paper

and onion \$ 14

```
Taco
             choice of chicken, lamb, goat, paneer served with cheese and green
chilli sauce $15
         quesadilla
              cottage cheese with mix veg and sour cream
               chicken or steak $16
          Enchiladas
                  choose your protein
                   chicken, lamb, goat, vegetable, with home made cheese
                      and spice $ 17
          Pizza
               lamb sausage pizza with onion tomato $25
          Com pizza
                   fresh red paper and cilantro sauce and fresh basil $24
           Paneer tikka pizza
                     made with home style paneer onion green bell paper and
                      black olives $24
           chicken tikka pizza
                      made with special sauce and tikka gravy and chicken
      Add
         jalapeno
         mushroom
         extra
          2$ each
                  Naan bread
                            ginger naan $5
                            garlic naan $ 5
                             naan $5
                              chilli naan $6
                                ivr naan $5
                                 cheese naan $ 7
                                  aloo paratha $ 5
                                   cauliflower paratha $ 5
                                    plan paratha $ 5
                                      kashmiri naan $ 5
                              Desserts
                                Baklava with ice cream $ 10
                                Sponge ball
                                      dipped in pistachio milk $8
                                 love bite
                                      make with creamy coco and stuff with
                                        home made ice cream and cherry $ 12
```

Tiramisu lava cake \$ 11



Drinks

\$6 Bacardi \$13 Flor de Caña Beer \$11 Old Monk Taj Mahal \$10 Whiskey King Fisher \$6 Flying Horse \$10 Jack Daniel's \$6 Maharaja \$7 \$6 Jameson Corona \$5 Crown Royal \$7 Miller Lite \$5 Gin **Bombay** \$6 White Wine \$8 Hendrick's \$7 Moscato \$8 Monkey 47 \$6 Riesling Chardonnay \$7 Scotch Sparkling Wine \$6 Macallan 12 \$13 Lagavulin \$12 **Red Wine** \$11 Gold Label Cabernet \$6 Black Label \$11 \$6 Merlot \$6 Shiraz Tequila Red Blend \$7 \$8 Patron Don Julio \$8 \$22 Clase Azul \$7 Teremana¹

Rum

Vodka

0	Grey Goose	\$8
0	SKYY Vodka [°]	\$6
0	Crystal Head	\$7

Bourbon

0	New Riff	\$12
0	Wolcott	\$13
0	Chestnut Farms	\$15

Cognac

	.0	•
0	Hennessy	\$8
0	Rémy Martin	\$8
9	ABK6	\$8

Cocktails

Old Fashion

Moscow Mule

0	Negroni	\$12
()	Mojito	\$11
6	Iced Chocolate Latte	\$12
(Bourbon Indian Spice	\$14
	(Cardamon & Cinnamon)	
0	Piña Colada	\$13
0	Lime Margarita	\$13
(c)	Strawberry Margarita	\$13
0	Mango Margarita	\$13

\$10

\$12