

CITY OF MILWAUKEE OFFICE OF THE CITY CLERK

Tuesday, January 14, 2025

COMMITTEE MEETING NOTICE

AD 15

SINGH, Kamal Preet, Agent Naarya Groceries Three Inc. 4079 N LAKE DR SHOREWOOD, WI 53211

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, January 28, 2025 at 09:10 AM

The access code is https://meet.goto.com/958389445. Please see the enclosed best practices document for further instructions.

Regarding:

Your Class A Fermented Malt, Food Dealer and Weights & Measures Licenses Application as agent for "Naarya Groceries Three Inc." for "Naarya Groceries Three Inc." to 2631 W VLIET St.

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: November 25th, 2024 Officer: HUDSON

City of Milwaukee Police Department 90-5-1.5 Crime Prevention Survey Convenience Store/Liquor Store Inspection

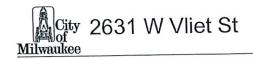
Name of Premise:	Naaria Groceries 3					
Address:	2631 W Vliet Street					
	Milwaukee, Wisconsin 53208	,				
Phone:	414-460-5663					
Owner:	Kamal P. Singh					
Owner address:	2631 W Vliet Street					
City State Zip:	Milwaukee, Wisconsin					
	414-460-5663					
Owner email:	Wisconsinliquor@gmail.com					
Manager:	Kamal Singh					
Home Address:	2631 W. Vliet Street					
City State Zip:	Milwaukee, Wisconsin					
Phone:	414-460-5663					
Email:	.Wisconsinliquor@gmail.com					
Preferred contact:						
Location currently op	en: XES	NO				
Projected open date:						
Day's open: SI	M	⊠ALL				
Hours of Operation:	Sun: 8 AM – 9 PM	□24 hours □Y □N				
	Mon: 8 AM – 9 PM					
	Tue: 8 AM – 9 PM					
,	Wed: 8 AM – 9 PM					
•	Thu: 8 AM – 9 PM					
•	Fri: 8 AM – 9 PM					
	Sat: 8 AM – 9 PM					
Premise Type:	Liquor Store					
	Convenience Store					
	Other:					

Licei	ises currently neid:		
	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:	#:
	Other.	T tos Mito 1) be.	"
Tyto	erior Survey:		
		location clean? XYes	\neg_{N_0}
]	. Is the area around the	antion? (Charle all the a	
4		ocation? (Check all the a	phia)
	a. 🏻 Park		
	b. School		
	c. Youth Cen	ter	
	d. Church		
		If so, how many	
	f. Residentia	1	
	g. \(\sum Other busi	nesses	
	h. Other:		
	3. Can you see from the	e outside of the location i	into the interior □Yes ⊠No_
	4. Can you see the emp	lovees inside of the local	tion from the outside ☐Yes ☒No
	5 Are exterior window	s free of signage Yes	⊠No
	6. Is there a parking lot		
	7. Is the parking lot cle		
	8. Is the parking lot we	11 1;+2 \(\tag{V}_{\text{sg}} \) \(\tag{N}_{\text{O}} \)	
	o. Is the parking for we		themselves Yes No
	9. Are there areas when	e a person could concean	it amount to be adequate Myea DNo.
		ung: Myes Myo. Do	es it appears to be adequate Yes No
	11. Exterior Payphone?	☐Yes ☐No	
	12. Are there No Loiteri	ng Signs posted? ⊠Yes	∐N0
	13. Are there exterior se	curity cameras ⊠Yes [No How Many:
	14. Are the address num	bers prominently display	ved and easy to see ⊠Yes □No
Car	nera Survey:		
	15. Does this location ha	ave security cameras? 🛚	Yes No
	16. Are they in working	order? ⊠Yes □No	
	17. What format are the		
	a. Color	Yes No	
	b. Digital	Yes No	
	c. VCR	Yes No	
	d. Recorded	Yes No	
		stored for later viewing	7 days
-	19. Are there exterior ca		
	20. Are there interior ca		
	21. Do all employees kr	now how to retrieve reco	rded digital images/footage?

Interior Survey:
22. 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
23. Is the interior of the location neat and clean? Yes \sum No
24. Does an interior camera face the entrance/exit?
25. Is there a lockable area that separates employees from customers? ⊠Yes ☐No
26. Does the store sell single chore boy? ☐ Yes ☒No
27. Does the store sell blunt wraps? Yes \sum No
28. Does the store sell scales? ☐ Yes ☒No
29. Does the store sell items that may be used as crack pipes? ☐Yes ☒No
a. Describe item
30. Does the store have an over abundance of sandwich baggies: ☐Yes ☒No
31. Does the owner understand that these items are often used for drug use? ⊠Yes ☐No
32. Do the products in the store appear to be new and rotated often? ☐Yes ☐No
33. Are emergency and non-emergency numbers posted near the phone? Yes No
34. 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
Complete this section if alcohol establishment is a convenience store:
(** Read full ordinance for all details "68-4.3 Convenience Food Stores")
All convenience food stores not exempted under sub. 3 shall:
1. Is the cash register located in a manner so that at the time of a sales transaction, the employee
and customer are both visible from the sidewalk? Yes No **
Are the glass entrance and exit doors clear of any signs or advertisements with the exception of sign which states that the cash register contains \$50 or less and that the safe is no accessible to
employees? Yes No 3. Does the store maintain one of the following on the licensed premise:
a. A safe that was in use at the convenience food store on August 17, 1994? Yes No
b. A drop-safe or time release safe that weighs at least 500 pounds or which is attached to compare the convenience root store on range of the convenience root store root store on range of the convenience root store
set into the floor in a manner approved by the police department? Yes No
4. Is lighting provided for the store's parking area during all hours of darkness when employees or
customers are on the premises at a minimum average of 2-foot candles per square foot, unless the
store is not open for business after sunset and before sunrise? Yes No N/A
5. Are at least two high-resolution surveillance security cameras installed? XYes No
6. Are the security cameras in working order? ∑Yes ☐No
7. Does one camera show an overall view of the counter and register area? ☐Yes ☐No
8. Does one camera show a clear, identifiable, full frame image of the face of each person entering
and leaving the store? Yes No
9. Are the camera views obstructed by fixtures or displays? ∐Yes ☒No
10. Is the recorded footage stored for at least 30 days? ∐Yes ⊠No
11. Do all store employees know how to record footage from the camera system to media capable of
being transferred to police custody? Yes No

 12. Are customer entrances/exits made of glass or other transparent material? Yes	be changes.
<u>Sub 3. Exemptions</u> . The requirements of this section do not apply to a convenience food store conforms to either of the following descriptions:	that
a-1. The store is located in an enclosed shopping structure, enclosed commercial build hospital. A convenience food store is not in an enclosed structure or building if a can enter it directly from the outside. Does store conform to a-1 ∑Yes ☐ No	ing or customer
a-2 The store physically separates employees from customers with a solid partition the person from entering the employee area from the customer area, has a secure lock employee side of any door between the employee area and the customer, and contransaction through a service window or similar arrangement. Does store conform to a-2 Yes No	on the
 a. At the commissioner's discretion, a convenience store may be exempted from of the regulations specified in sub 2. Does this location hold an exemption from the commissioner regarding any requirements of Sub 2? No 	

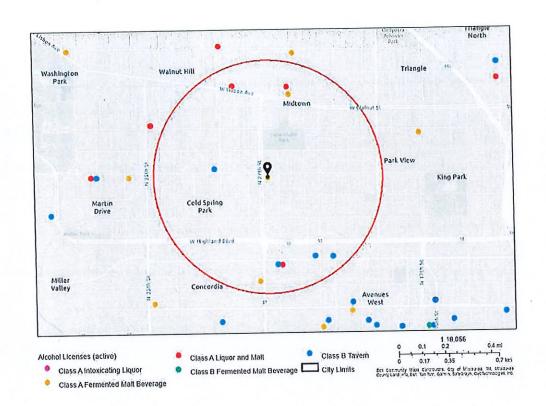
ADDITIONAL COMMENTS/RECOMMENDATIONS:



Area of Interest (AOI) Information

Area: 21,862,585.6 ft2

Sep 25 2024 11:34:01 Central Daylight Time



Summary

Name	Count	Area(ft²)	Length(mi)
Alcohol Licenses	11	,	

Alcohol Licenses

#	Legal Entity	Trade Name	Licensee	Address	License Type Name	Total Capacity	Expiration Date	Count
1	2900 WEST LISBON LLC	Elebert Elder		2900 W LISBON AV	Class A Malt & Class A Liquor License		10/16/2024, 7:00 PM	1
2	NEA, LLC	TIME FOOD MART	ENAD K ASSAD, Agt	1835 S 25TH ST	Class A Malt & Class A Liquor License		12/17/2024, 6:00 PM	1
3	GROCERY KING, INC	BRIGHT FOOD MARKET	Ala I Issa, Agt	2500 W LISBON AV	Class A Fermented Malt Beverage Retailer's License		1/23/2025, 6:00 PM	1
4	LP KILBOURN MARKET LLC	KILBOURN SUPERMARK ET	Parvinder Singh, Agt	901 N 27th ST	Class A Fermented Malt Beverage Retailer's License	•	3/7/2025, 6:00 PM	1 /
5	Talk of the Town	Talk of the Town	Dyan A Ward, SP	2302 W State ST	Class B Tavern License	80	3/1/2025, 6:00 PM	1 ,
6	Five O'Clock Steakhouse Inc	Five O'Clock Steakhouse	Jason C Blank, Agt	2416 W State ST	Class B Tavern License		3/27/2025, 7:00 PM	1
7	RK Liquor Inc	State Beer Liquor	DAVINDER SINGH, Agt	2537 W State ST	Class A Malt & Class A Liquor License		7/20/2025, 7:00 PM	1
8	WI AFRICAN AMERICAN WOMEN, LTD	WAAW	JOSEPHINE D HILL, Agt	3020 W VLIET ST	Class B Tavern License		9/19/2025, 7:00 PM	1
9	DLR, INC	RICKEY'S ON STATE	DONALD L RAFFAELLI, Agt	2601 W STATE ST	Class B Tavern License	100	9/23/2025, 7:00 PM	1
10	Family Supermarket LLC	Family Supermarket	Manjinder Kaur, Agt	2631 W VLIET ST	Class A Fermented Malt Beverage Retailer's License		9/21/2025, 7:00 PM	1
11	2900 WEST LISBON LLC	Lisbon Liquor and Food Mart	Charanjit Kaur Agt	2900 W LISBON AV	Class A Malt & Class A Liquor License		10/16/2025, 7:00 PM	1

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





Notice of Public Hearing

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SINGH, Kamal Preet, Agent
Naarya Groceries Three Inc. at 2631 W VLIET St
Class A Fermented Malt, Food Dealer and Weights & Measures Licenses Application

Tuesday, January 28, 2025 at 9:10 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 1/28/2025 at 9:10 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	1410 N 27TH ST	MILWAUKEE, WI 53208-2409
CURRENT OCCUPANT	1413 N 26TH ST	MILWAUKEE, WI 53205-1822
CURRENT OCCUPANT	1414 N 27TH ST	MILWAUKEE, WI 53208-2409
CURRENT OCCUPANT	1415 N 26TH ST	MILWAUKEE, WI 53205-1822
CURRENT OCCUPANT	1418A N 27TH ST	MILWAUKEE, WI 53208-2409
CURRENT OCCUPANT	1419 N 26TH ST	MILWAUKEE, WI 53205-1822
CURRENT OCCUPANT	1427 N 26TH ST	MILWAUKEE, WI 53205-1822
CURRENT OCCUPANT	2637 W VLIET ST	MILWAUKEE, WI 53205-1837
CURRENT OCCUPANT	2712 W MC KINLEY BLVD	MILWAUKEE, WI 53208-2925
CURRENT OCCUPANT	2713 W VLIET ST	MILWAUKEE, WI 53208-2428
CURRENT OCCUPANT	2714 W MC KINLEY BLVD	MILWAUKEE, WI 53208-2925
CURRENT OCCUPANT	2715 W VLIET ST	MILWAUKEE, WI 53208-2428

Blank Notice

Total Records: 12

Radius 250 feet and Center of the Circle: 2631 W Vliet St

ccl-busplan 5/12/2020



BUSINESS LICENSE PLAN OF OPERATION

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

1. Type of Business
Applying for:
Self Service Laundry Massage Establishment Filling Station
Other (supplemental application for specific license also required)
Provide a detailed description of the type of business you plan on operating:
KETAIL Expocery Store
Do you have any experience operating this type of business? \(\simega \text{No Pes} \) If yes, explain: \(Own and of rate another fete
2. Business Operations
a. Proposed Opening Date: Jan - 1-2025
b. Is this premise under construction? TNo 🗌 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: Alchol, Foop, Tobaco
e. Is the current licensee operating? 🗌 No 🖳 Yes If no, list date closed:
Do you have future plans for other businesses, licenses or permits at this location?
If yes, explain:
Have you previously held an Extended Hours License in Milwaukee? You 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 Deressure Wash Pick Up Litter Other:
b. How often will grounds be cleaned?
c. Grounds cleaned by: Cicensee Building Owner Employees Hired Maintenance Other:
d. How are noise issues prevented and/or addressed? Security 🖫 Manager approaches customer(s) 🖫 eall Police
്യൂട്യൂns PostedOther:
e. Will a sound amplification system be used? No Yes If yes, describe:
4. Smoking & Sanitation
a. Are there designated outdoor smoking areas? Yo Yes If yes, describe:
b. Number of Garbage Cans: Inside: 3 Locations: Cushier Roum, Front Couter, Back of stul
Outside: 1 Locations: Front of the Store
c. Is a crowd control barrier used? 'Yo Yes If yes, describe:
d. How many restrooms are on the premises?
e. Name of solid waste contractor: Advanced Disposal Waste Management Other:

5. Security					
a. Are there onsite parking sp	paces? No Yes	If yes, how r	nany? an	d describe	the parking security
plan: Fenced	in porking	en pu	ya only		
b. Is there a loading zone?	No ∀ Yes If yes, de	escribe the lo	pading area security plai	n: <u>Fev</u> (ced in back yord.
c. Will you have licensed sec			If yes,how many?		
Describe equipmen					
	ımber (s)				·
				locations:	4 outside 12 inside
e. Will searches/identification	on checks be done upon	entry? 🛂 1	lo 🗌 Yes If yes, descri	ibe	
6. Percentage of Sales	(must total 100%	6)			
Alcohol 26 %	Food 70 Cigarettes, Electronic Vape Devices,		Secondhand Merchandis	se	Precious Metals & Gems
Entertainment%	Vape Devices, Tobacco Products	10 %			
Pawnbroker Activity%	Salvaged Materials (such as scrap metal)	body piercing, salon, tailor,		Other% Describe:	
7. Businesses/Licenses	on the Premise:	s (check a	all that apply):		
Type 1		□ 5 .2r	ant Food Doctorrout	[] Delivote	e/Fraternal/Veterans Club
Full Service Restaurant	Cafe/Coffee Shop	_	ast Food Restaurant	Teen Club	
☐ Night Club		Cocktail		[_] reen C	aun
Banquet Hall	Sports Facility	Bowling			
☐ Hotel/Motel : Number of Flo Number of Ro	ors:	∐ Roomin	g House: Number of Flo Number of Ro		
Type 2 Liquor Store	Grner Store Supermarket Convenience Store		nience Store		
Gas Station	Amusement/Phonog	graph Distribu	tor	Recycli	ing, Salvage or Towing
Used Car Dealer	Personal Service Es (such as tattoo busi		n, tailor, etc.)	Record	ling Studio
What other licenses/permits will	you hold at this location?	(check all that	apply)		
Ccupancy Permit	engarette, Tobacco, G Electronic Vape Products	as Station 🔲	Extended Hours 🔽 Class "	'B" Tavern	Weights & Measures
		Other:			
8. Legal Capacity (only	y if a Type 1 prei	mises in t	‡7 above)		
			4-286-8211 if you have qu	estions.)	

.

9. Premises De	escription				
a. Identify all area	(s) of the premises that will b				:
	nd Floor ■ Sasement Stora	ge □Patio □Beer Gardei	n ∐Sidewalk Café ∐Di	eck ∐Rooftop	
□Other: Descri					
	on: Major Thoroughfare				
	Cross Street: 27th 81				
	ng: Free Standing Buildin ses Structure: Single Stor				
	inding Area: 🔽 Single Stol			***************************************	
	Name: NAVDIP			1 916 275	7
Building Owner	Address: 4421	N maryland	Are , milwale	or, WI	, 5321)
Epigne in	peration & Custor				
Will customers be ente	ering the premises? No	V Yes ·			
	Proposed Hours of Operation		Estimated Number	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.)	of Customers expected each day	of Customers	Age Restriction (If none, write 'None')
Sunday	8.AM	9. Pm	150	1 10 100	
Monday	8 · Am	9.1m	150	1 10/100	
Tuesday	8 · AM	9. lm	150	1010	
Wednesday	8 · mas	9.84	150	1 to 100	
Thursday	8 · Am	9-Pm	150	1 to 100	
Friday	8 - Am	9-lm	150	1 to 100	
Saturday	g. AM	9. Pm	150	1 & pm	
An Extended Hours Es	tablishment License is requi tanning, etc.), recording stu	red for any convenience stor dio or restaurant which is op	e, filling station, persona en between the hours of	l service establish 12:00 a.m. and 5	ment (such as tattoo, body :00 a.m.
Alcohol Establishment 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	Opm Sunday-Thursday; 12:0 tablished by the Common C	0am Friday & Saturday; ι ouncil in its approval of th	inless a different ne licensee's plan	time, either earlier or later, of operation.
11. Signature	(s)	0			
	Kand W				
	orietyr, Partnel, or 20% or m 0% or more shareholders, r-print name/title and sign)	ore Shareholder	Signature of additional p	oartner or 20% or	more shareholder



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:	Naarya	Governes	thee	my
Premises Address:	2631	Governes w Viiet	81,	, m/ waler, wi, 5320)
SECTION 1	TYPE OF BUSINESS			
What will be the n	najority of your food sal	es? (check one)		
	e, but are not limited to eese and meat, French			orn, baked potatoes, hot dogs, brats, tacos, 'fruit, cooked cheese curds, corn dogs,
RETAIL items tea, fruit juic				le, snow cones, coffee, espresso, cappuccino, es, kettle corn, cotton candy, funnel cakes,
A conver of basic		ess than 5,000 square		pace and has, as its primary business, the sa a filling station that sells basic food items ar
Bed & Breakf		food items that will be	sold.	
				(6.4.)
Will any wholesal		▼ No Yes If yes	s, what percenta	age of food sales will be wholesale?
	lore AND: Restaurant items (meal			ion and also contact DATCP. his application. Contact DATCP only.
			Very a very least	Section Contact Date:
SECTION 2	FOOD PROCESSING			
Will any food pro		No √ Yes		
į	ned as assembling, grin nting, distilling, pickling			stuffing, packing, bottling, grilling, canning, ng. c
SECTION 3	FOOD REQUIRING	TEMPERATURE CON	TROL	
1	t requires temperature oducts such as milk, ch			at, poultry)
If yes, list the typ	es of food items: <u>M\\</u>	K, CHEESE, P	NEAT, Pou	Ity, Fish, Ice cream

ccl-foodplan 2/28/19

SECTION 4 DETAILS OF OPERATION AND ARREST OF THE PROPERTY OF T
Will you have seating on site for dining? ✓ No ☐ Yes
Will you be doing any catering?
Will you be doing any delivery?
Will you have outdoor activities?
Will you have a drive thru window? Yes - Are hours different from inside? No Yes
If Yes, provide drive thru hours:
Will scales or barcode scanners be used?
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 & Phone Number of Contractor:
Hume, Address & Fisher Hambor of Contraction
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:
1 understand the Health Department must conduct an inspection and advise the License Division of their approval
before the license may be issued.
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.
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WEIGHTS & MEASURES LICENSE SUPPLEMENTAL APPLICATION

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

Office I	Jse Only:
Office	ose omy:
App#	
Filed	
Initials	
Paid	
Lic#	

Legal Entity Name:	NAARYA	GROBERIES	Three	2NC	
Premise Address:	2631	w Vliet st	mil.	WI, 53205	
Device Type(s)			, ,	- · · · · · · · · · · · · · · · · · · ·	
		you need a license.			
 For each de 	evice type checked, i	ndicate how many you have	in the Number	of Devices column (b).	

- Calculate the Total Fee Per Device Type by multiplying the Fee Per Device Type (a) by the Number of Devices (b).
- Add all Total Fee Per Device Type amounts together and that will be your Total Fee Due.
 - * Exception: The Scanner fee is not per device. Check the box for the appropriate range.

 If you have 1-3 scanners, the total due is \$130. If you have 4 or more scanners, the total due is \$250.

 Check the Number of Devices (b).

	Device Type	License Period	Fee Per Device Type (a)	Number of Devices (b)	Total Fee Per Device Type (a x b)
Liqui	d Measuring Devices				
	Retail Petroleum Meters	12 months	\$60		
	0 to 30 gallons per minute	24 months	\$60		
	31 to 200 gallons per minute	24 months	\$250		
	Over 200 gallons per minute	24 months	\$250		
Scale	<u>s</u>				
-	Measuring any weight amount	24 months	\$55	ļ.	<u> </u>
Scan	ners		Fee for scanners is by range	Check how many scanners you have	
	Up to 3 scanners	24 months	\$130 total*	□1 □2 □3	
	Four or more scanners	24 months	\$250 total*	☐4 ☐Other	
Othe	r Devices				
	Length Measuring Device	24 months	\$60		
	Timing Device	24 months	\$30		
w				Total Fee Due	55

Signature

I hereby agree that I will comply with the applicable sections of the Wisconsin State Statutes, Administrative Code and the Milwaukee Code of Ordinances regarding the operation of weighing and measuring devices.

I understand that all devices must be operated within the specifications, tolerances and other technical requirements set forth in the National Institute of Standards and Technology Handbook 44. I understand that the license for which I am applying must be posted on the premises or in my vehicle prior to opening for business or operating the device.

I understand that these device licenses are not transferable (with the exception of scanners). If the device is replaced or needs to be resealed, I must apply for and receive a new license so that an inspection of the device can be performed prior to its use. I acknowledge that as a condition of being issued this license, I must allow the Health Department into the establishment to test the device to validate its specifications/tolerances. If my devices are found out of compliance, I may be charged inspection fees. I have read, understand, and will adhere to all the above acknowledgments.

Signature of Sole Proprietor, Partner, or 20% or more Shareholder

Signature of additional partner or 20% or more shareholder

(If there are no 20% or more shareholders, Corporate Officer-print name/title and sign)

This form must be submitted with the Business License Application, Weights & Measures Plan of Operation, and appropriate fee. Forms can be obtained online at www.milwaukee.gov/licenses.

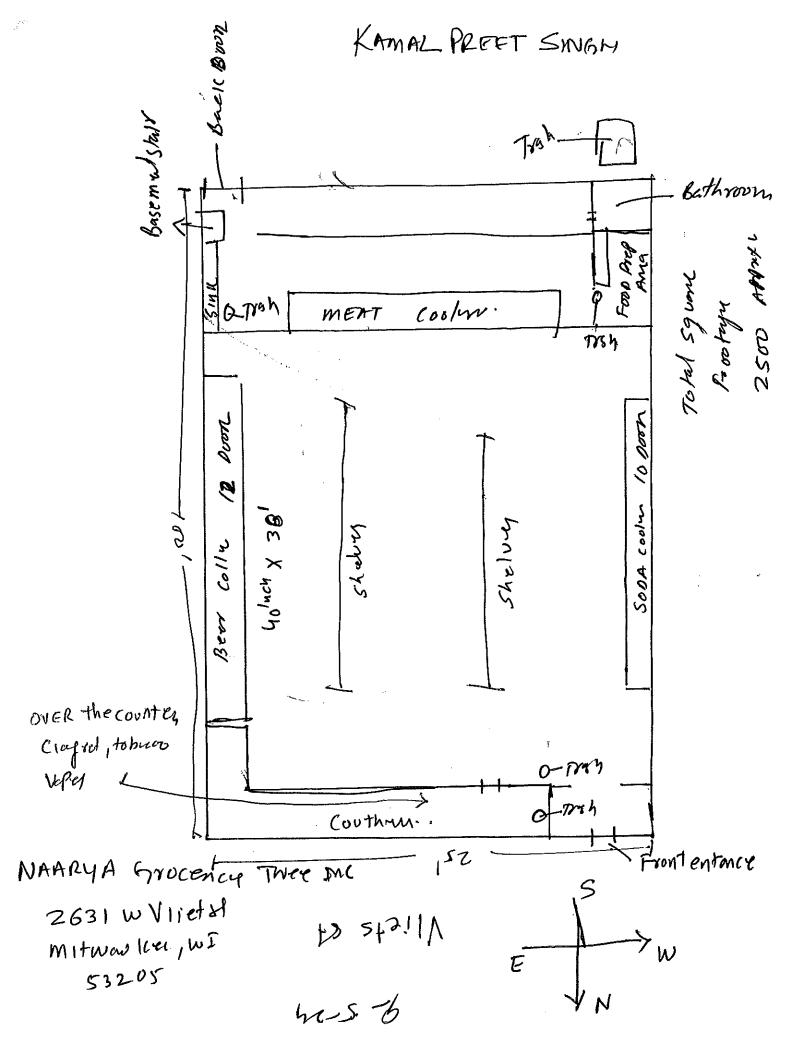
ccl-wmplan 1/9/18

MILWAUKEE

WEIGHTS & MEASURES 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 license@milwaukee.gov

Legal Entity Name:	NAAR	YA 6	Waceri Vliet	<u>55</u>	/WEC	75xC	
Premise Address:	2631	W	Vliet	91	_, mil ,	WI,	53205
Type of Busine	ess						
Provide a brief desci	iption of the est	ablishment/bu /}k Ki	siness: tchen a	ul.	Fresh m	eat	
Other licenses may l	oe required depe	nding on the ty	pe of business yo	u are ope	rating.		
Litter & Noise	1, 1.				: -		
b. How often wi	ll grounds be cle	eaned? □bai nsee □Buildin	ly 🗌 Weekly 🔲	As Neede loyees	ed Monthly Maintena	Other: nce	1—tcall Police
⊿ sigr	s Posted Oth						
Signature	/M			,	<u> </u>	terania kieri	17. 29. 29
	orietor, Partner, or 0% or more sharel print name/title	nolders,	nareholder	Signati	ire of additional pa	rtner or 20% or	more shareholder
This form must Application, and o							License Supplemer



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NAARYA GrocERIFS Krtcher menu

2631 W VIred 87 Milwarler, WJ 53205