

CITY OF MILWAUKEE OFFICE OF THE CITY CLERK

Wednesday, March 26, 2025

COMMITTEE MEETING NOTICE

AD 08

LUNA VALADEZ, Edgardo, Agent CHAVOS RUCOS 4020 LLC 2255 S 34TH St Milwaukee, WI 53215

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, April 08, 2025 at 02:45 PM

The access code is https://meet.goto.com/902734029. Please see the enclosed best practices document for further instructions.

Regarding:

Your Class B Tavern and Public Entertainment Premises Licenses Application Requesting Jukebox, Karaoke and Patrons Dancing as agent for "CHAVOS RUCOS 4020 Lights" r "Chavos Rucos" at 3209 W Lincoln Av

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.



Crime Prevention Through Environmental Design

Date: 02, Officer:			
Business:	:		
Name: (Location: Phone⊠i	OZOO VV. EINOOM 7 NO.		
Agent:			ŧ
Name:	Valadez, Edgardo L.		
Address: Phone:	2255 S. 34th Street 414-573-1563	City: Milwaukee Email: Edgardoluna7@yah	State: WI ZIP: 53215 oo.com
	f Business: ☑ Yes ☐ No (Ad	dd Info if not agent)	- Magain
Preferre	d Contact(s): ☑Agent ☑C	Owner 🗆 Other	
The busin		Restaurant □ Convenience □ Ot g structure, commercial building o reet) □Yes	
	is under construction or relocated in the items are not functional at time.	•	e by agent explaining
Exterior	Survey:		
Are the a	address numbers prominentl	ly displayed and easy to see? \square Y	es □No
Is the are	ea around the location clean	,	'es □No
	. The area	is a business district □ or/and ☑ r	mix use (residential)?
Other bu	usinesses attached to the sar	ne building □Y	'es ☑No
Are wind	dows free of signage?	⊠Y	′es □No
Can the	interior clearly be seen from	outside? ☑Y	′es □No
Is there	exterior lighting?		'es □No.
Is lightin	g adequate?	⊠Y	'es □No
Are ther	e "No Loitering" Signs poste	d? □Y	′es ☑No

Parking:		
Adequate City Street parking		☑ Yes □No
Will valet service be used any time during busine	ss hours?	□Yes ☑No
Is there a parking lot? (If no, skip other items in parking	ng section)	□Yes ☑No
Is lot clean?		□Yes □ No
Is the lot well illuminated?		□Yes □No
Is there a security guard or perimeter control?		□Yes □No
Are there Cameras?		□Yes □ No
Other resources or businesses within the area?		
□Park ☑School □Youth Center or Day care □	lCommunity Out	reach ☑Church ☐Medical
☑Residential	,	
Convenience Store/ Supermarket:	\square Yes \square No $\frac{1}{\square}$	
Restaurant:	\square Yes \square No $\underline{2}$	
Gas station(s):	☑ Yes □No ᢓ	<u></u>
Tabaco/ Vape Store:	□Yes ☑No _	**************************************
Liquor store(s):	□Yes ☑No _	
Tavern(s):	\square Yes \square No $\underline{3}$	
Other(s): Dealership / Salon / Tax service	⊠Yes	
Security: (If no security check and skip to next)		
Will there be security		Armed? ☑Yes ☐No
Employed by:	\square business	☑ contracted company
Security will monitor:	☑Interior	☑Exterior
Security Hours (Add to narrative along with number ar	nd how they will be d	leployed)
Cameras:		•
Plans to have a camera system but not installed		☑Yes
(If yes, answer next question and skip additional co		
Are cameras required by city ordinance at this k (If no, and there is no system skip to next section)	ousiness?	□Yes ☑No
Are there working cameras at the business		□Yes □No
How many working?	Inte	rior Exterior
Is there a camera facing and entrance / exit?		□Yes □No
Is a camera facing the register?		□Yes □No '
Is the data saved on: $\ \Box$	local hard drive	□Cloud / off site service
How long is footage saved?		
Is on site camera hard drive in a secured area?		□Yes □No □N/A
Who has access to security footage? ☐Owner	□Manager □ Er	nployee(s) ☐ Security/Service

Planned capacity:			vn	
nterior:				
s the interior clean and ne	eat?			⊠Yes □No
Can employees see out of				⊘ Yes□ N o
What is the minimum num	ber of employe	es during ho	ours c	of operation? 2
s there an area employee				□Yes ☑No
Are emergency and non-e			near 1	the phone? □Yes ☑NO
Does the store sell?				next section)
Single chore boy:		□Yes □N	1 0	
Blunt wraps:		□Yes □N	No	
Scale/Grinders:		□Yes □N	No	
items that may be used as	crack nines			
•	crack pipes.			_
Overabundance of sandwi				-
Overapulicative of saliant	icii pabbicsi			
Does the owner/agent un	derstand that th	nese items ai	re of	ten used for drug use?
Does the owner/agent un	derstand that th	nese items aı	re of	ten used for drug use?
		nese items aı □ Yes □I	re oft No	
Does the owner/agent un Do the products in the sto		nese items aı □ Yes □I new and ro	re off No otateo	
		nese items aı □ Yes □I	re off No otateo	
Do the products in the sto	ore appear to be	nese items ar ☐ Yes ☐I e new and ro ☐Yes ☐N	re off No otateo	
Do the products in the sto	ore appear to be	nese items ar ☐ Yes ☐I e new and ro ☐Yes ☐N	re off No stated No	
Do the products in the sto Current License(s): (Held a Alcohol #:	ore appear to be	nese items and Yes III e new and ro III Yes III or Business)	re off No otated No 3No	d often?
Do the products in the sto Current License(s): (Held a Alcohol #: Extended Hours #:	ore appear to be	nese items and Yes I I e new and ro I Yes I N or Business) I Yes I	re off No otated No 3No 3No	d often?
Do the products in the sto Current License(s): (Held a Alcohol #: Extended Hours #: Filling #:	ore appear to be t location by agent	nese items and Yes Inew and round Inex Inew and round Inex Inex Inex Inex Inex Inex Inex Inex	re off No otated No 3No 3No 3No	d often?
Do the products in the sto Current License(s): (Held a Alcohol #: Extended Hours #:	ore appear to be	rese items and Yes Inew and round Inex Inew and round Inex Inex Inex Inex Inex Inex Inex Inex	re off No otated No 3No 3No 3No	d often? Class: □A □B □B-Manager □ D-O
Current License(s): (Held a Alcohol #:	t location by agent	nese items and Yes	re off No Itated No Mo Mo Mo Mo	d often? Class: □A □B □B-Manager □ D-O
Do the products in the sto Current License(s): (Held a Alcohol #: Extended Hours #: Filling #: Food #:	t location by agent	rese items and rese items and rese items and rese in the second research research in the second research	re off No otated No 3No 3No 3No 3No 3No	d often? Class: □A □B □B-Manager □ D-O
Current License(s): (Held a Alcohol #:	t location by agent	rese items and rese items and rese items and rese in the second research research in the second research	re off No tated No Mo Mo Mo No No	d often? Class: □A □B □B-Manager □ D-O Type: □Restaurant □PED □Retail
Current License(s): (Held a Alcohol #:	t location by agent	rese items and Yes Inew and row Inew and row Inew Inew Inew Inex Inex Inex Inex Inex Inex Inex Inex	re off No otated No 3No 3No 3No 3No 3No 3No 3No 3No	d often? Class: □A □B □B-Manager □ D-O Type: □Restaurant □PED □Retail Type: □ Pawn □ Vehicle Type:

Complete this section if ale Recommendations)	cohol establishment is a convenience store: 🔀 N/A (Skip to	
(Exemption) Is the store loca	ted in an enclosed shopping structure, enclosed commercial building of store is not in an enclosed structure or building if a customer cannot	or enter
All convenience for	d stores not exempted under sub. 3 shall:	
*Have cash register located and customer are both visil	in a manner so that at the time of a sales transaction, the empole from the sidewalk? \Box Yes \Box No	loyee
*Post a sign which states the accessible to employees?	at the cash register contains \$50 or less and that the safe is no \Box Yes \Box No	t ·
Maintain any of the	e following at the property?	
*A safe that was in use at t	he convenience food store on August 17, 1994?	
	□Yes □No	
	se safe that weighs at least 500 pounds or which is attached to approved by the police department?	or set
	□Yes □No	
* Has the owner and their days of ownership or empl	employees attended the Robbery Prevention Training within 12 oyment? \Box Yes \Box No	20
	equirements of this section do not apply to a convenience food the following descriptions: \Box Yes \Box No	store
(CPTED- A strategy that aims to reduc	e crime by changing the physical design of buildings and public spaces).	
Comments/ Recomme	ndations:	
interior east side of the buliding, but no of the agent plans on adding couches and	dinning tables. In husiness, with the harddrive secured in a hasement storage room, b	ut not functionina.
This is the agents first business of this ty contact information near it as a resourse	be. The agent was advised when they get a business phone to post p for employees. They were also advised a safe box would be a good i	olice nvestment.

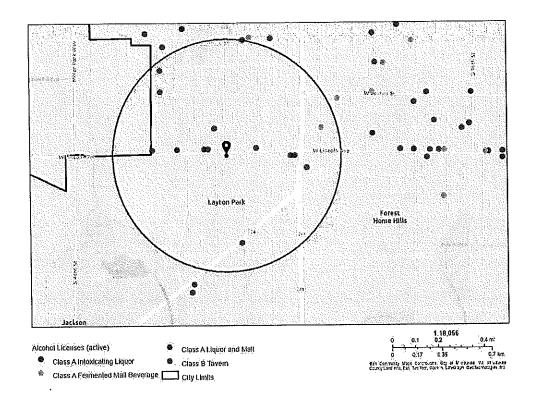


Concentration Map 3209 W Lincoln AV

Area of Interest (AOI) Information

Area: 21,862,585.68 ft2

Dec 5 2024 16:09:36 Central Standard Time



3209 W Lincoln AV

Summary

Alcohol Licenses	13		
Name	Count	Area(ft²)	Length(mi)

Alcohol Licenses

#	Legal Entity	Trade Name	Licensee	Address	License Type Name	Total Capacity	Expiration Date	Count
1	Villana's Place, LLC	Villana's Place	Juan Manuel Macias Gallardo, Agt	3000 W LINCOLN AV	Class B Tavern License	160	2/7/2025, 6:00 PM	1
2	Lincoln Market Inc	Lincoln Market Inc	MANDEEP DHAWAN, Agt	3530-34 W Lincoln AV	Class A Malt & Class A Liquor License	7,500,000	3/16/2025, 7:00 PM	1
3	REHLEH LLC	The Pressroom MKE	Robert E Holmes, Agt	3105 W Forest Home AV	Class B Tavern License		3/23/2025, 7:00 PM	1
4	OBEROI REAL ESTATE LLC	Quick Pick Food Mart	Meetu Oberoi, Agt	3332 W LINCOLN AV	Class A Malt & Class A Liquor License		7/4/2025, 7:00 PM	1
5	TORY OF MILWAUKEE, INC	MC KIERNANS	GENE M MC KIERNAN, Agt	2066 S 37TH ST	Class B Tavern License	99	7/5/2025, 7:00 PM	1
6	Restaurante El Rinconcito De Rafa LLC	Carnitas De Rafa Restaurante	Rafael Ruiz Rojo, Agt	2344 S 27th ST	Class B Tavern License		7/26/2025, 7:00 PM	1
7	Tu Casa LLC	Tu Casa Mexican Restaurant & Bar	Susana L Barba-Martin, Agt	3710 W LINCOLN AV	Class B Tavern License		7/26/2025, 7:00 PM	1
8	LA PICA #3, LLC	LA PICA CARR 3 BAR & HALL	WILLIAM RIVERA, Agt	3427-31 W LINCOLN AV	Class B Tavern License	162	7/28/2025, 7:00 PM	1
9	CHILLY WILLYS SALOON	CHILLY WILLYS SALOON	DAVID W OLSON, SP	3301 W GRANT ST	Class B Tavern License	25	7/29/2025, 7:00 PM	1
10	CJ's Pub LLC	CJ's Pub	CORINA L WAGE, Agt	3643 W Rogers ST	Class B Tavern License	49	8/30/2025, 7:00 PM	1
11	Agave Azul	Agave Azul	FRANCISCO RIOS, JR, SP	3316 W Lincoln AV	Class B Tavern License	94	9/23/2025, 7:00 PM	1
12	LINCOLN BEER & LIQUOR INC.	LINCOLN BEER & LIQUOR	Gurjit K Singh, Agt	2717 W Lincoln AV	Class A Malt & Class A Liquor License		10/31/2025, 7:00 PM	1
13	FRESH FOOD MART 1 LLC	FRESH FOOD MART 1	Nirvail Singh, Agt	2539 W GRANT ST	Class A Fermented Malt Beverage Retailer's License	·	10/13/2025, 7:00 PM	1

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







Notice of Public Hearing

Blank Notice

LUNA VALADEZ, Edgardo, Agent
Chavos Rucos at 3209 W Lincoln Av
Class B Tavern and Public Entertainment Premises Licenses Application Requesting Jukebox,
Karaoke and Patrons Dancing

Tuesday, April 08, 2025 at 2:45 PM

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 4/8/2025 at 2:45 PM 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	2252 S 33RD ST	MILWAUKEE, WI 53215-2414
CURRENT OCCUPANT	2255 S 32ND ST	MILWAUKEE, WI 53215-2439
CURRENT OCCUPANT	2256 S 33RD ST	MILWAUKEE, WI 53215-2414
CURRENT OCCUPANT	2257 S 32ND ST	MILWAUKEE, WI 53215-2439
CURRENT OCCUPANT	2257A S 32ND ST	MILWAUKEE, WI 53215-2439
CURRENT OCCUPANT	2307 S 33RD ST	MILWAUKEE, WI 53215-2803
CURRENT OCCUPANT	2307 S 33RD ST# A	MILWAUKEE, WI 53215-2803
CURRENT OCCUPANT	2318 S 32ND ST	MILWAUKEE, WI 53215-2802
CURRENT OCCUPANT	2319 S 32ND ST	MILWAUKEE, WI 53215-2801
CURRENT OCCUPANT	2319 S 33RD ST	MILWAUKEE, WI 53215-2803
CURRENT OCCUPANT	2322 S 32ND ST	MILWAUKEE, WI 53215-2802
CURRENT OCCUPANT	2322 S 33RD ST	MILWAUKEE, WI 53215-2804
CURRENT OCCUPANT	2322A S 33RD ST	MILWAUKEE, WI 53215-2804
CURRENT OCCUPANT	2323 S 32ND ST	MILWAUKEE, WI 53215-2801
CURRENT OCCUPANT	2323A S 32ND ST	MILWAUKEE, WI 53215-2801
CURRENT OCCUPANT	2324 S 33RD ST	MILWAUKEE, WI 53215-2804
CURRENT OCCUPANT	2325 S 33RD ST	MILWAUKEE, WI 53215-2803
CURRENT OCCUPANT	2326 S 33RD ST	MILWAUKEE, WI 53215-2804
CURRENT OCCUPANT	2327 S 32ND ST	MILWAUKEE, WI 53215-2801
CURRENT OCCUPANT	2328 S 32ND ST	MILWAUKEE, WI 53215-2802
CURRENT OCCUPANT	2328A S 32ND ST	MILWAUKEE, WI 53215-2802
CURRENT OCCUPANT	2330 S 32ND ST	MILWAUKEE, WI 53215-2802
CURRENT OCCUPANT	2330A S 32ND ST	MILWAUKEE, WI 53215-2802
CURRENT OCCUPANT	2331 S 32ND ST	MILWAUKEE, WI 53215-2801
CURRENT OCCUPANT	2331A S 32ND ST	MILWAUKEE, WI 53215-2801
CURRENT OCCUPANT	2332 S 33RD ST	MILWAUKEE, WI 53215-2804
CURRENT OCCUPANT	2332A S 33RD ST	MILWAUKEE, WI 53215-2804
CURRENT OCCUPANT	2335 S 32ND ST	MILWAUKEE, WI 53215-2801
CURRENT OCCUPANT	2336 S 32ND ST	MILWAUKEE, WI 53215-2802
CURRENT OCCUPANT	2337 S 32ND ST	MILWAUKEE, WI 53215-2801
CURRENT OCCUPANT	2338 S 32ND ST	MILWAUKEE, WI 53215-2802
CURRENT OCCUPANT	2338 S 33RD ST	MILWAUKEE, WI 53215-2804
CURRENT OCCUPANT	2341 S 32ND ST	MILWAUKEE, WI 53215-2801
CURRENT OCCUPANT	2341A S 32ND ST	MILWAUKEE, WI 53215-2801
CURRENT OCCUPANT	2342 S 32ND ST	MILWAUKEE, WI 53215-2802
CURRENT OCCUPANT	2342 S 33RD ST	MILWAUKEE, WI 53215-2804
CURRENT OCCUPANT	2345 S 32ND ST	MILWAUKEE, WI 53215-2801
CURRENT OCCUPANT	2345A S 32ND ST	MILWAUKEE, WI 53215-2801
CURRENT OCCUPANT	2348 S 33RD ST	MILWAUKEE, WI 53215-2804
CURRENT OCCUPANT	2349 S 32ND ST	MILWAUKEE, WI 53215-2801
CURRENT OCCUPANT		MILWAUKEE, WI 53215-2419
CURRENT OCCUPANT		MILWAUKEE, WI 53215-2419
CURRENT OCCUPANT		MILWAUKEE, WI 53215-2419
CURRENT OCCUPANT		MILWAUKEE, WI 53215-2419
CURRENT OCCUPANT		MILWAUKEE, WI 53215-2419
CURRENT OCCUPANT	3131 W LINCOLN AVE	MILWAUKEE, WI 53215-2419

CURRENT OCCUPANT CURRENT OCCUPANT CURRENT OCCUPANT **CURRENT OCCUPANT** CURRENT OCCUPANT CURRENT OCCUPANT **CURRENT OCCUPANT CURRENT OCCUPANT CURRENT OCCUPANT CURRENT OCCUPANT CURRENT OCCUPANT CURRENT OCCUPANT CURRENT OCCUPANT** CURRENT OCCUPANT **CURRENT OCCUPANT CURRENT OCCUPANT CURRENT OCCUPANT CURRENT OCCUPANT CURRENT OCCUPANT** 3301A W LINCOLN AVE **CURRENT OCCUPANT**

3135 W LINCOLN AVE 3205 W LINCOLN AVE 3209 W LINCOLN AVE 3213 W LINCOLN AVE 3213A W LINCOLN AVE 3227 W LINCOLN AVE# 201 3227 W LINCOLN AVE# 202 3227 W LINCOLN AVE# 203 3227 W LINCOLN AVE# 204 3227 W LINCOLN AVE# 205 3227 W LINCOLN AVE# 206 3227 W LINCOLN AVE# 207 3227 W LINCOLN AVE# 208 3227 W LINCOLN AVE# 209 3227 W LINCOLN AVE# 210 3227 W LINCOLN AVE# 301 3227 W LINCOLN AVE# 302 3227 W LINCOLN AVE# 303 3227 W LINCOLN AVE# 304 3227 W LINCOLN AVE# 305 3227 W LINCOLN AVE# 306 3227 W LINCOLN AVE# 307 3227 W LINCOLN AVE# 308 3227 W LINCOLN AVE# 309 3227 W LINCOLN AVE# 310 3232 W LINCOLN AVE# A 3232 W LINCOLN AVE# B

MILWAUKEE, WI 53215-2419 MILWAUKEE, WI 53215-2421 MILWAUKEE, WI 53215-2422 MILWAUKEE, WI 53215-2422 MILWAUKEE, WI 53215-2350

Blank Notice Total Records: 74

Radius: 250 feet and Center of the Circle: 3209 W Lincoln Av

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. Type of Business	
Applying for: Extended Hours (12AM to 5Af	d) - If a food establishment, check all that apply: ☐Delivery ☐Drive Thru ☐Dining Room
Self Service Laundry Ma	ssage Establishment Filling Station
Other (supplemental applicati	on for specific license also required)
Provide a detailed description of the type of busi	ness you plan on operating:
DAR	
	of business? Ino I yes If yes, explain: Previosly Bouthonder other Ball
2. Business Operations	
a. Proposed Opening Date:	2002
b. Is this premise under construction? 🕍 N	o 🗌 Yes If yes, list estimated completion date:
c. Is this a franchise? 🕍 No 🗌 Yes	
i	lo 🗌 Yes If yes, list type of license:
	No Yes If no, list date closed:
f. Do you have future plans for other busin	esses, licenses or permits at this location? 📈 No 🗌 Yes
If yes, explain:	\
g. Have you previously held an Extended H	ours License in Milwaukee? No Yes
If yes, list address(es):	1
h. Are other businesses operating in the sa	me building? No 🗌 Yes If yes, describe:
3. Litter & Noise	
a. How are grounds kept clean?	weep 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. How are noise issues prevented and	/or addressed? Security Manager approaches customer(s) Call Police
Signs Posted Other:	
e. Will a sound amplification system b	e used? No X Yes If yes, describe: 5000 KCV5
4. Smoking & Sanitation	
a. Are there designated outdoor smol	ing areas? No Yes If yes, describe:
b. Number of Garbage Cans: Insid	le: A Locations: Nehmal the now on the Side main acry
Out	side: A Locations: On the Side of the building
c. Is a crowd control barrier used?	No 🗌 Yes
d. How many restrooms are on the pr	` \ \
e. Name of solid waste contractor:	Advanced Disposal Waste Management Other:

a. Are there onsite parking spaces? No Yes If yes, how many? and describe the parking security plan: b. Is there a loading zone? No Yes If yes, describe the loading area security plan: and answer the following: what are their responsibilities? (Internet Charle, Surf OF pulso), Stoff and natural possible equipment used bescribe for the boundary one if yes, how many? and list locations: ON bescribe
b. Is there a loading zone? No Yes If yes, describe the loading area security plan: c. Will you have licensed security on premise? No Yes If yes, how many? and answer the following: What are their responsibilities? (Intimo Percent) Shaff and fighty Describe equipment used Hand Charac, Security Characters List their License Number (s) d. Will there be security cameras? NoX yes If yes, how many? and list locations: ON OUTSIDE OF The ON A
b. Is there a loading zone? No Yes If yes, describe the loading area security plan: c. Will you have licensed security on premise? No Yes If yes, how many? and answer the following: What are their responsibilities? (INTINO) HE SURY OF PUICO, SUFF AND HOPFTY Describe equipment used List their License Number (s) d. Will there be security cameras? No X Yes If yes, how many? 4 and list locations: 2 on the OUTSIDE OF THE WILDING UND A INTIDE OF THE WILDING e. Will searches/identification checks be done upon entry? No X Yes If yes, describe D CYNECK 6. Percentage of Sales (must total 100%)
c. Will you have licensed security on premise? No Yes If yes, how many? and answer the following: What are their responsibilities? (INJING) TO SUFF ON JUST ON J
c. Will you have licensed security on premise? No Yes If yes, how many? and answer the following: What are their responsibilities? (INJING) TO SUCK OF TOTAL HOPEY Describe equipment used Hopey Charle, Security Charle List their License Number (s) d. Will there be security cameras? No X Yes If yes, how many? and list locations: 2 on the OUSING OF the building and 3 in lac of the following. e. Will searches/identification checks be done upon entry? No X Yes If yes, describe D CNECK 5. Percentage of Sales (must total 100%)
What are their responsibilities? (INMIN) The Such Of Tolkin, Suff and fight of Describe equipment used List their License Number (s). d. Will there be security cameras? \(\text{No.} \text{ No.} \text{ Yes If yes, how many? } \) 4 and list locations: \(2 on the OUSION OF the Outland and A in the Outland of the
d. Will there be security cameras? \(\sum \text{No X Yes f yes, how many?} \) \(\frac{4}{4} \) and list locations: \(\frac{2}{2} \) on \(\frac{1}{16} \) \(\frac{1}{16} \) ON \(\frac{1}{16
d. Will there be security cameras? \(\text{No X Yes If yes, how many?} \) \(\text{4 and list locations: } \(\text{2 on he} \) \(UVSIGE OF The XVI ding and \text{3 in he file falling and
d. Will there be security cameras? \(\text{No } \text{No } \text{No many?} \) A and list locations: \(\text{2 on he} \) OUSIDE OF THE WINDING AND A INTICE OF THE WINDING e. Will searches/identification checks be done upon entry? \(\text{No } \text{No } \text{No } \text{No } \text{Nes If yes, describe} \) \(\text{D CNeck} \) 6. Percentage of Sales (must total 100%)
e. Will searches/identification checks be done upon entry? No 12 Yes If yes, describe 10 Check 6. Percentage of Sales (must total 100%)
e. Will searches/identification checks be done upon entry? No X Yes If yes, describe 10 Check 6. Percentage of Sales (must total 100%)
e. Will searches/identification checks be done upon entry? No 12 Yes If yes, describe 10 CNECK 6. Percentage of Sales (must total 100%)
5. Percentage of Sales (must total 100%)
1 L Sood %
Alcohol Secondhand Merchandise Precious Metals & Gems
Cigarettes, Electronic %
ntertainment
Pawnbroker Activity% Salvaged Materials Personal Services (such as tattoo, body piercing, salon, tailor, Describe:
(such as scrap metal) tanning, etc.) % Describe:
7. Businesses/Licenses on the Premises (check all that apply):
Type 1
Full Service Restaurant
Night Club ☐ Tavern ☐ Cocktail Lounge ☐ Teen Club
Banquet Hall Sports Facility Bowling Alley
Hotel/Motel: Number of Floors: Rooming House: Number of Floors:
Number of Rooms: Number of Rooms:
Type 2 Liquor Store Corner Store Supermarket Convenience Store
Pocycling Salvage or Towing
Gas Station Annual Annual Control of the Control of
Used Car Dealer Personal Service Establishment Recording Studio (such as tattoo business, hair salon, tailor, etc.)
What other licenses/permits will you hold at this location? (check all that apply)
☑Occupancy Permit ☐ Cigarette, Tobacco, ☐Gas Station ☐Extended Hours ☑Class "B" Tavern ☐ Weights & Measures
Secondhand Dealer Precious Metal & Gem Other:
8. Legal Capacity (only if a Type 1 premises in #7 above)
16
Capacity (Call the Milwaukee Development Center at 414-286-8211 if you have questions.)

). Premises De	escription				,
X11 st Floor □2	nd Floor Basement Stora	be used in operating this businge □Patio □Beer Garden	ness (include areas used □ □Sidewalk Café □De	only for storage) eck	
□Other: Descri	be:				
b. Describe Location	on: Al Major Thoroughfare	Secondary Street Oth			
	Cross Street: 35 th 5		-		
		ng Strip Mall Other: ry Multi-Story - # of Stor			
		. 🗖 🗖	. t □ out		
		G Residential I modell	alOther:Phone Number: 444-	(e17- 348	14
	Address: 0140 W	ines home Are Hi	hunelyo W 53	श्रीऽ	
The second second second second	Type water, the general Control				
10. Hours of O	peration & Custo	mers			
Will customers be ent	ering the premises? 🔲 No	Yes			
	Proposed Hou	rs of Operation:	Estimated Number	Potential Age Range	Class B Tavern Applicant Only:
Day of the Week			of Customers	Age Kange of	Applicant Only. Age Restriction
	Open Time (include a.m. or p.m.)	Close Time (include a.m. or p.m.)	expected each day	Customers	(If none, write 'None')
Sunday	8:00 am	.2:am	60	30 f	
Monday	8:00gm	2:00am	20	30 t	
Tuesday	8:00am	2:00am	20	30 t	
Wednesday	8:00am	2:00m	25	30+	
Thursday	8:00am	2:00am	30	20 t	
Friday	8:00am	2 Wam	40	30 t	
Saturday	8:00 am	2.000m	50	30+	
An Extended Hours E	stablishment License is requ	ired for any convenlence stoudio or restaurant which is op	re, filling station, person	al service estáblis f 12:00 a.m. and l	hment (such as tattoo, body 5:00 a.m.
Alcohol Establishmer		iO am to 9:00 pm Sunday thru			
Permitted Hours of C	Operation: Class B: 6:0	0 am to 2:00 am Sunday thru	Thursday, 6:00 am to 2:		
Entertainment Outde	oor Closing Hours: 10	:00pm Sunday-Thursday; 12:0 established by the Common C	00am Friday & Saturday; ouncil in its approval of t	unless a different the licensee's plar	time, either earlier or later, of operation.
11. Signature	e(s)				
		ch	Signature of additional	partner or 20% o	r more shareholder
(If there are no	oprietor, Partner, or 20% or 20% or more shareholders,		olgnature of additional	partities of 2078 o	a more andreatories
Corporate Office	er-print name/title and sign)				

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

AL. A. 11000 110
Legal Entity Name: (MONO) KN(05 40)0 LL(
Premise Address: 3709 W In Coln Are Milwovher W 53010
Proximity of Premises to Church, School, Daycare Center or Hospital
Is the building within 300 feet of any church, school, daycare center or hospital?
"Service Bar Only" Designation
If applying for Class B or C license, are you applying for "Service Bar Only"?
Service Bar Only means customers cannot sit at the bar. Alcohol is served to employees who serve patrons seated at tables. No stools, chairs or other articles of furniture shall be placed at the service bar for patrons to sit upon.
Business Information
<u></u>
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? \(\sigma\) No \(\forall\) Yes
If no, list the name and address of the person(s) who will:
Class B Applicants: If the agent, a partner or the individual licensee will not be conducting the day-to-day operations of the business, the person(s) listed above must obtain a Class B Managers license.
c) Does anyone else have money invested or any other interest in this business? No Yes
If yes, explain:
d) Have you made an agreement with anyone to repay any loan or any other payments based upon income from the business?
No Yes If yes, list name and address:
Property 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? Yes If yes, amount paid \$
d) Total amount paid for business \$ NA
e) Total amount paid for goodwill of the business \$ NIA
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
Lease Information (New & Transfer Applicants who are leasing the premises only)
a) Date lease begins 0101 2024 Ends 01 01 2026
b) Monthly rental \$ 2,000
c) Do you have an option to renew the lease? \(\sum \text{No.} \sqrt{Yes} \)
d) Does your lease allow for assignment to another party without the consent of the owner? A No Yes e) For what length of time have you been guaranteed occupancy (number of years)?
e) For what length of time have you been guaranteed occupancy (number of years):
·

ition to paying the monthly rental, will you have to pay anything additional to the owner of the building to guarantee performance lease? No Yes If yes, explain
lease? No Yes If yes, explain_ the present owner or occupant object to the granting of your license? No Yes explain_ of Agent Applicants Only the been any changes to the floor plan since the last application was submitted? No Yes
of Agent Applicants Only been any changes to the floor plan since the last application was submitted? No \(\sigma\) No \(\sigma\) Yes
of Agent Applicants Only been any changes to the floor plan since the last application was submitted? No Yes
been any changes to the floor plan since the last application was submitted? No Yes
e been any changes to the floor plan since the last application was submitted? No Yes v floor plan is not required. If yes, submit a new floor plan and explain the change(s):
v floor plan is not required. If yes, submit a new floor plan and explain the change(s):
<u>'e</u>
Sole Proprietor, Partner or 20% or More Shareholder
r more Shareholder, Corporate Officer - print name/title and sign)
·
All information contained in this application is subject to approval by the Common Council. ting from approved plan of operation will subject licensee to citations, and/or suspension or non-renewal of the license. ct the License Division for information on how to request changes.

Detailed floor plan

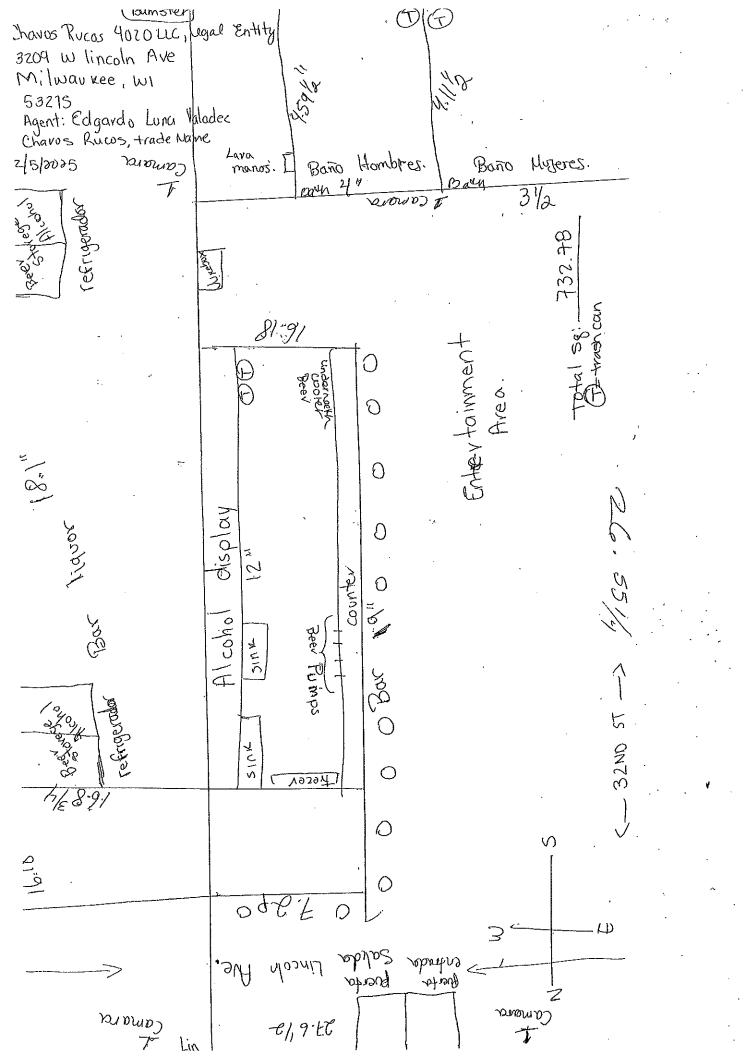
☐If a restaurant, copy of the menu



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

PREMISES ADDRESS: 3009	W lindin Ave	Milworke W 53		
TYPES 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:		•		
Entertainment Outdoor Closing Hours: 10:00pm Sunday-Thursday; 12:00am Friday & Saturday; unless a different time, either earlier or later, is established by the Common Council in its approval of the licensee's plan of operation.				
PROMOTERS/SOUND AMPLIFI	CATION			
Will promoters ever be used for any o	of the entertainment? No	Yes If Yes, Describe:		
At any time will sound amplification b	ne used? No Yes If Yes, I	Describe:		
LEGAL CAPACITY OF PREMISES	3			
Premises License. If you would like to	request the license be approved	uestions.) Legal capacity determines th I with a lower capacity than that listed your license and override the capacity li	above, indicate the lower capacity	
ACKNOWLEDGEMENT/SIGNAT	Curt 4 Part Bey H. C			
the Common Council. I agree to infoll understand that I shall not willfully the general public because of race, concentation, gender identity or exprediressed in uniform or not; and shall reselection of personnel for training or	rm the City Clerk within 10 days of refuse to provide the services off olor, sex, religion, national origin ssion, familial status or the fact the not seek such information as a con- promotion on the basis of such i		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	
I have knowledge of the City Ordinar suspension, non-renewal or revocati	nces currently regulating public e on, if I violate any rule, law or reg	ntertainment, and understand that the gulation of the city of Milwaukee and St	license may be subject to tate of Wisconsin.	
A.V.			•	
Signature of Sole Proprietor, Partner (If no 20% or more Shareholder, Cor	or 20% or More Shareholder porate Officer - print name/title :	and sign)		
+				
Office Use Orly: Initials: Filed: 12 Only PEP? No Yes If Yes	App:	DEP 3 74353 mail Mgrs/Team Lead (must be hea	rd w/in 60 days)	



Basement Storage

Deer and solage	tt 9.42	10tal sg 732.70
XX B	Bee Connetiong Area	26.55 Pt
Camera Room and Sterage		legal Entity Chaves Ruces 4020 LLC Trade Name: Chaves Ruces Address: 3209 LU lincoln Ave Agent: Edgay do Luna Valadez Nate: 12/05/2024