



**CITY OF MILWAUKEE
OFFICE OF THE CITY CLERK**

Wednesday, June 09, 2021

COMMITTEE MEETING NOTICE

AD 15

QADAN, Mohammad, Agent
Amer Stop & Shop LLC
1955 N 32ND St

Milwaukee, WI 53208

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

Tuesday, June 22, 2021 at 11:30 AM

Regarding: Your Food Dealer License Application as agent for "Amer Stop & Shop LLC" for "Amer Stop & Shop" at 1955 N 32ND St.

This meeting will be held via GoToMeeting. Please see the enclosed best practices document for further instructions. The access code is <https://global.gotomeeting.com/join/765261>. If you wish to call in, please call +1 (571) 317-3112 and use Access Code: 743-465-261.

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.

Notice for applicants with warrants or unpaid fines:

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

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

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

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

JIM OWCZARSKI, CITY CLERK

BY: _____

Jim Cooney

License Division Manager

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

200 E. Wells Street, Room 105, City Hall, Milwaukee, WI 53202. www.milwaukee.gov/license
Phone: (414) 286-2238 Fax: (414) 286-3057 Email Address: License@milwaukee.gov



CITY OF MILWAUKEE
OFFICE OF THE CITY CLERK

Wednesday, June 09, 2021

COMMITTEE MEETING NOTICE

AD 15

QADAN, Mohammad, Agent
Amer Stop & Shop LLC
1330 W Holmes Ave

Milwaukee, WI 53221

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200 E. Wells Street, Room 105, City Hall, Milwaukee, WI 53202. www.milwaukee.gov/license
Phone: (414) 286-2238 Fax: (414) 286-3057 Email Address: License@milwaukee.gov



Wednesday, June 09, 2021



Notice of Public Hearing

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notice

QADAN, Mohammad, Agent
Amer Stop & Shop at 1955 N 32ND St
Food Dealer License Application

Tuesday, June 22, 2021 at 11:30 AM

To whom it may concern:

The above application has been made by the above named applicant(s). This requires approval from the Licenses Committee and the Common Council of the City of Milwaukee. The hearing before the Licenses Committee will take place virtually on 6/22/2021 at 11:30 AM. This is a public hearing. Those wishing to view the proceeding are able to do so via the City Channel – Channel 25 on Spectrum Cable – or on the Internet at <http://city.milwaukee.gov/citychannel>. Those wishing to provide oral testimony will be asked to do so by phone or internet and are asked to contact the staff assistant, Molly Kuether-Steele at (414) 286-2775 or molly.kuether-steele@milwaukee.gov for necessary information. Please make such requests no later than one business day prior to the start of the meeting. You are not required to attend the hearing, but please see the information below if you would like to provide testimony. 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 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 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	1914 N 33RD ST	MILWAUKEE, WI 53208-1908
CURRENT OCCUPANT	1915 N 32ND ST	MILWAUKEE, WI 53208-1903
CURRENT OCCUPANT	1920 N 33RD ST	MILWAUKEE, WI 53208-1908
CURRENT OCCUPANT	1921 N 32ND ST	MILWAUKEE, WI 53208-1903
CURRENT OCCUPANT	1925 N 32ND ST	MILWAUKEE, WI 53208-1903
CURRENT OCCUPANT	1927 N 32ND ST	MILWAUKEE, WI 53208-1903
CURRENT OCCUPANT	1928 N 33RD ST	MILWAUKEE, WI 53208-1908
CURRENT OCCUPANT	1932 N 33RD ST	MILWAUKEE, WI 53208-1908
CURRENT OCCUPANT	1933 N 33RD ST	MILWAUKEE, WI 53208-1909
CURRENT OCCUPANT	1936 N 33RD ST	MILWAUKEE, WI 53208-1908
CURRENT OCCUPANT	1937 N 32ND ST	MILWAUKEE, WI 53208-1903
CURRENT OCCUPANT	1937 N 33RD ST	MILWAUKEE, WI 53208-1909
CURRENT OCCUPANT	1939 N 33RD ST	MILWAUKEE, WI 53208-1909
CURRENT OCCUPANT	1945 N 32ND ST	MILWAUKEE, WI 53208-1903
CURRENT OCCUPANT	1947 N 32ND ST	MILWAUKEE, WI 53208-1903
CURRENT OCCUPANT	1950 N 33RD ST	MILWAUKEE, WI 53208-1908
CURRENT OCCUPANT	1951 N 33RD ST	MILWAUKEE, WI 53208-1909
CURRENT OCCUPANT	1955 N 32ND ST	MILWAUKEE, WI 53208-1903
CURRENT OCCUPANT	1955 N 32ND ST	MILWAUKEE, WI 53208-1903
CURRENT OCCUPANT	2001 N 33RD ST	MILWAUKEE, WI 53208-1966
CURRENT OCCUPANT	2006 N 32ND ST	MILWAUKEE, WI 53208-1963
CURRENT OCCUPANT	2008 N 32ND ST	MILWAUKEE, WI 53208-1963
CURRENT OCCUPANT	2011 N 33RD ST	MILWAUKEE, WI 53208-1966
CURRENT OCCUPANT	2013 N 32ND ST	MILWAUKEE, WI 53208-1964
CURRENT OCCUPANT	2017 N 32ND ST	MILWAUKEE, WI 53208-1964
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Total Records: 25

Radius: 250.0 feet and Center of Circle: 1955 N 32nd St



BUSINESS LICENSE PLAN OF OPERATION

ccl-busplan 5/12/2020

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

1. Type of Business

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

Provide a detailed description of the type of business you plan on operating: **GROCERY STORE**

Do you have any experience operating this type of business? No Yes If yes, explain: **WORKED FOR ONE**

2. Business Operations

- a. Proposed Opening Date: 01/20/2021
- b. Is this premise under construction? No Yes If yes, list estimated completion date: _____
- c. Is this a franchise? No Yes
- d. Is this premises currently licensed? No Yes If yes, list type of license: _____
- e. Is the current licensee operating? No Yes If no, list date closed: _____
- f. Do you have future plans for other businesses, licenses or permits at this location? No Yes
If yes, explain: _____
- g. Have you previously held an Extended Hours license in Milwaukee? No Yes
If yes, list address(es): _____
- h. Are other businesses operating in the same building? No Yes If yes, describe: _____

3. Litter & Noise

- a. How are grounds kept clean? Sweep Pressure Wash Pick Up Litter Other: _____
- b. How often will grounds be cleaned? Daily Weekly As Needed Monthly Other: _____
- c. Grounds cleaned by: Licensee Building Owner Employees Hired Maintenance Other: _____
- d. 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. Smoking & Sanitation

- a. Are there designated outdoor smoking areas? No Yes If yes, describe: _____
- b. Number of Garbage Cans: Inside: 3 Locations: RESTROOM, CASH REGISTER,
Outside: 1 Locations: BY THE DOOR
- c. Is a crowd control barrier used? No Yes If yes, describe: _____
- d. How many restrooms are on the premises? 1
- e. Name of solid waste contractor: Advanced Disposal, Waste Management Other: _____

5. Security

- a. Are there onsite parking spaces? No Yes If yes, how many? _____ and describe the parking security plan: _____
- b. Is there a loading zone? No Yes If yes, describe the loading area security plan: _____
- c. Will you have security personnel on premise? No Yes If yes, how many? _____ and answer the following:
 What are their responsibilities? _____
 Is security equipment used? No Yes If yes, describe _____
 List their licensing, certification, or training credentials _____
- d. Will there be security cameras? No Yes If yes, how many? 8 and list locations: 3 Outside and 5 Inside
- e. Will searches/identification checks be done upon entry? No Yes If yes, describe _____

6. Percentage of Sales (must total 100%)

Alcohol <u>0</u> %	Food <u>0</u> %	Secondhand Merchandise <u>0</u> %	Precious Metals & Gems <u>0</u> %
Entertainment <u>0</u> %	Cigarettes <u>10</u> %		
Pawnbroker Activity <u>0</u> %	Salvaged Materials <u>0</u> % (such as scrap metal)	Personal Services (such as tattoo, body piercing, salon, tailor, tanning, etc.) <u>0</u> %	Other <u>90</u> % Describe: <u>Gravelly</u>

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

Type 1

- | | | | |
|--|---|---|--|
| <input type="checkbox"/> Full Service Restaurant | <input type="checkbox"/> Cafe/Coffee Shop | <input type="checkbox"/> Deli or Fast Food Restaurant | <input type="checkbox"/> Private/Fraternal/Veterans Club |
| <input type="checkbox"/> Night Club | <input type="checkbox"/> Tavern | <input type="checkbox"/> Cocktail Lounge | <input type="checkbox"/> Teen Club |
| <input type="checkbox"/> Banquet Hall | <input type="checkbox"/> Sports Facility | <input type="checkbox"/> Bowling Alley | |
| <input type="checkbox"/> Hotel/Motel : Number of Floors: _____
Number of Rooms: _____ | <input type="checkbox"/> Rooming House: Number of Floors: _____
Number of Rooms: _____ | | |

Type 2

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> Liquor Store | <input type="checkbox"/> Corner Store | <input type="checkbox"/> Supermarket | <input checked="" type="checkbox"/> Convenience Store |
| <input type="checkbox"/> Gas Station | <input type="checkbox"/> Amusement/Phonograph Distributor | <input type="checkbox"/> Recycling, Salvage or Towing | |
| <input type="checkbox"/> Used Car Dealer | <input type="checkbox"/> Personal Service Establishment
(such as tattoo business, hair salon, tailor, etc.) | <input type="checkbox"/> Recording Studio | |

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

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

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

Capacity _____ (Call the Milwaukee Development Center at 414-286-8211 if you have questions.)

9. Premises Description

- a. Identify all area(s) of the premises that will be used in operating this business (include areas used only for storage):
 1st Floor 2nd Floor Basement Storage Patio Beer Garden Sidewalk Café Deck Rooftop
 Other: Describe: _____
- b. Describe Location: Major Thoroughfare Secondary Street Other: _____
- c. Nearest Major Cross Street: 32ND ST AND BROWN ST
- d. Describe Building: Free Standing Building Strip Mall Other: _____
- e. Describe Premises Structure: Single Story Multi-Story - # of Stories _____ Other: _____
- f. Describe Surrounding Area: Commercial Residential Industrial Other: _____
- g. Building Owner Name: DALJU S KUEIK Phone Number: 414-507-1892
 Building Owner Address: 3115 W FONDULUK AVE, MILWAUKEE, WI 53218

10. Hours of Operation & Customers

Will customers be entering the premises? No Yes

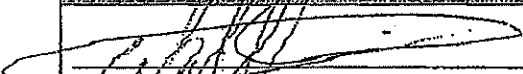
Day of the Week	Proposed Hours of Operation		Estimated Number of Customers expected each day	Potential Age Range of Customers	Class B Tavern Applicant Only Age Restriction (if none, write None)
	Open Time (include a.m. or p.m.)	Close Time (include a.m. or p.m.)			
Sunday	9:00AM	9:00PM	50-100	16-62	NONE
Monday	9:00AM	9:00PM	50-100	16-62	NONE
Tuesday	9:00AM	9:00PM	50-100	16-62	NONE
Wednesday	9:00AM	9:00PM	50-100	16-62	NONE
Thursday	9:00AM	9:00PM	50-100	16-62	NONE
Friday	9:00AM	9:00PM	50-100	16-62	NONE
Saturday	9:00AM	9:00PM	50-100	16-62	NONE

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

Alcohol Establishments Permitted Hours of Operation: Class A: 8:00am to 9:00pm Sunday thru Saturday; Class B: 6:00am to 2:00am Sunday thru Thursday; 6:00am to 2:30am Friday & Saturday

Entertainment Outdoor Closing Hours: 12:00am Sunday, Thursday, 12:00am Friday & Saturday unless a different time, earlier or later is established by the Common Council after approval of the license & plan of operation

11. Signature(s)


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

Signature of additional partner or 20% or more shareholder

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



FOOD DEALER LICENSE PLAN OF OPERATION

OFFICE OF THE CITY CLERK, LICENSE DIVISION
CITY HALL, 200 E. WELLS ST, ROOM 185, MILWAUKEE, WI 53202
(414) 286-2238 • license@milwaukee.gov • www.milwaukee.gov/license

Legal Entity Name: AMER STOP AND SHOP LLC

Premises Address: 1955 N 32 ND st, Milwaukee WI 53208

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 3,000 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? No Yes

(includes dairy products such as milk, cheese, and ice cream, fish, shellfish, meat, poultry)

If yes, list the types of food items: Milk, cheese, ice cream, meat etc.

SECTION 4 DETAILS OF OPERATION

Will you have seating on site for dining? No Yes

Will you be doing any catering? No Yes

Will you be doing any delivery? No Yes

Will you have outdoor activities? No Yes - Check all that apply: Bar Cooking/Grilling Dining

Will you have a drive thru window? No Yes - Are hours different from inside? No Yes
 If Yes, provide drive thru hours: _____

Will scales or barcode scanners be used? No Yes - You must also apply for a Weights & Measures License.

SECTION 5 ADDITIONAL SITES

Where will food be prepared and/or sold?
 At a single site At multiple sites: How many? _____ (for example, a hotel with several dining rooms or bars)
 If multiple sites, attach a Food Dealer Additional Site Addendum (ccl-foodadd) for each additional site.

SECTION 6 CONSTRUCTION OR CHANGES

Are you planning any construction, remodeling or equipment changes?
 No If No, SKIP to Section 8
 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: _____

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:

MQ I understand the Health Department must conduct an inspection and advise the License Division of their approval before the license may be issued.

MQ 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.

MA I understand the district alderperson will review and either support or object to my application. If he/she objects, I may appeal and be scheduled to appear before the Licenses Committee. The Licenses Committee will then make a recommendation to the Common Council. The Common Council must grant the license before it may be issued.

MQ I understand proof of payment for all license fees must be on file in the License Division before the license may be issued and the license must be issued and posted in my establishment prior to opening for business.

MQ I will not operate my food business until the license has been issued and posted in the establishment.

Signature of Sole Proprietor, Partner, or 20% Shareholder: _____

Signature of Additional Partner: _____

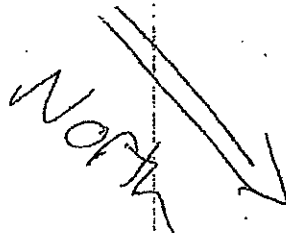
9/9/2020

Muhammad Qadun

1955 W 2nd St Milwaukee, WI 53228

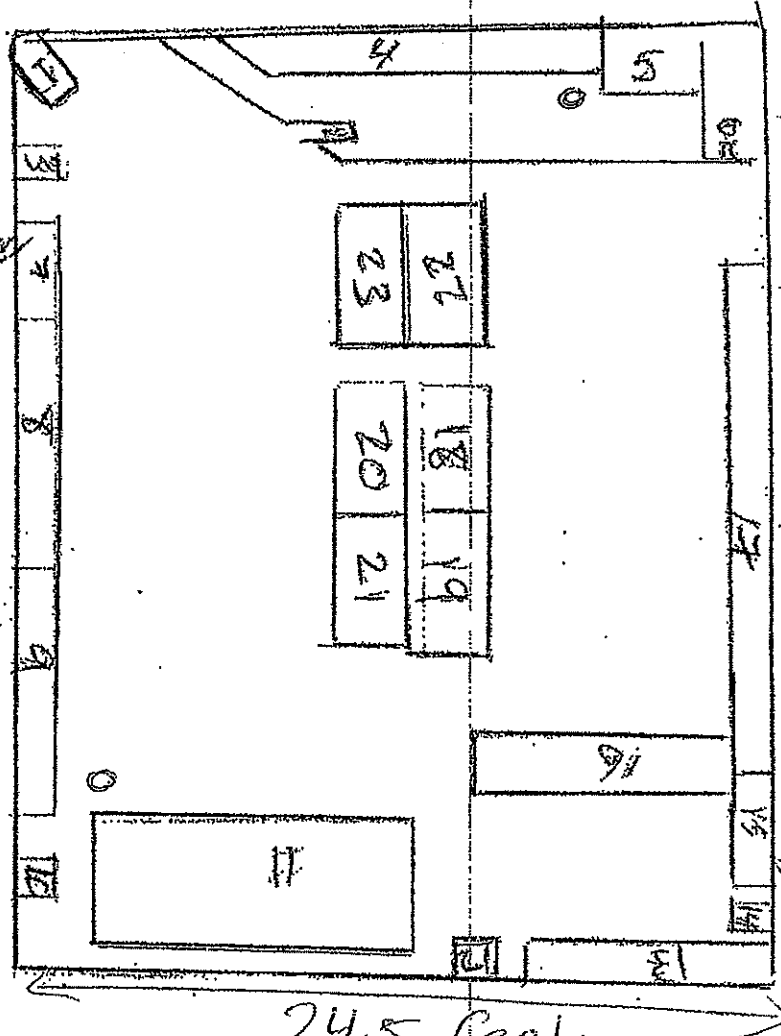
Ammer stop and shop

Ammer stop and shop



- 1. Front door
- 2. Cash door
- 3. ATM
- 4. Behind counter slab
- 5. office
- 6. Basement door

- 7. Ice cream freezer
- 8. shelf
- 9. shelf
- 10. Map sink
- 11. 3 door walking cooler
- 12. Emergency Exit
- 13. Wash sink
- 14. Hand wash sink
- 15. Prep table
- 16. Meat cooler
- 17. shelf
- 18. cooler
- 19. cooler
- 20. cooler
- 21. cooler
- 22. Camp Chef
- 23. shelf
- 24. TV



total sq foot = 1,739.50