



CITY OF MILWAUKEE  
OFFICE OF THE CITY CLERK

Wednesday, October 25, 2023

COMMITTEE MEETING NOTICE

AD 05

MORRIS, Debra M, Agent  
Jamaican Season Island, LLC  
9207 W Capitol DR  
Milwaukee, WI 53222

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, November 07, 2023 at 01:50 PM**

The access code is <https://meet.goto.com/552541757>. If you wish to call in: **+1 (872) 240-3311** and use Access Code: **552-541-757**  
Please see the enclosed best practices document for further instructions.

**Regarding:** Your Class B Tavern License Application as agent for "Jamaican Season Island, LLC" for "Picasso" at 9207 W Capitol DR.



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.**

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



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Wednesday, October 25, 2023

COMMITTEE MEETING NOTICE

AD 05

MORRIS, Debra M, Agent  
Jamaican Season Island, LLC  
3851 N 61<sup>ST</sup> ST  
Milwaukee, WI 53216

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**Tuesday, November 07, 2023 at 01:50 PM**

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Please see the enclosed best practices document for further instructions.

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Jim Cooney  
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Phone: (414) 286-2238 Fax: (414) 286-3057 Email Address: [License@milwaukee.gov](mailto:License@milwaukee.gov)

AC

**Cox, Andrew**

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**From:** Peterson, Todd  
**Sent:** Wednesday, October 18, 2023 2:09 PM  
**To:** Cooney, Jim  
**Subject:** 9207 W Capitol Dr

Good evening, Mr. Cooney, please record the opposition to this potential license.

Thank you

Todd G Peterson  
Legislative Assistant  
Alderman Westmoreland - District 5  
200 East Wells Street, Room 205  
Milwaukee, WI 53202  
Office: 414-286-3870

**REDACTED RECORD**

[Report an Issue \(milwaukee.gov\)](https://milwaukee.gov)

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**From:**  
**Sent:** Tuesday, September 26, 2023 5:08 PM  
**To:** Westmoreland, Lamont <[Lamont.Westmoreland@milwaukee.gov](mailto:Lamont.Westmoreland@milwaukee.gov)>  
**Subject:** Hookah & Liquor License

Hi Mr. Westmoreland....I live at : . I'm totally against the Hookah & Liquor License. When I move in the area 18 yrs. Ago we had George Webbs & then another Bar across the street & there was nothing but problems.. my Daughter got attacked one night. It's just not safe for a Residential Area. It's also several 50 plus people in the area.

Thanks in Advance...  
Sent from my iPhone

AC

**Cox, Andrew**

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**From:** Peterson, Todd  
**Sent:** Wednesday, October 18, 2023 2:08 PM  
**To:** Cooney, Jim  
**Subject:** 9207 W Capitol Dr

Hi Jim, please record this person in opposition to Picasso

May be willing to testify at the hearing.

Thanks

Todd G Peterson  
Legislative Assistant  
Alderman Westmoreland - District 5  
200 East Wells Street, Room 205  
Milwaukee, WI 53202  
Office: 414-286-3870

[Report an Issue \(milwaukee.gov\)](https://www.milwaukee.gov)

**REDACTED RECORD**

AC

**Cox, Andrew**

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**From:** Peterson, Todd  
**Sent:** Wednesday, October 18, 2023 2:08 PM  
**To:** Cooney, Jim  
**Subject:** 9207 W Capitol Dr

Hi **Jim**, this person is opposed to the Hookah Bar

there is no email

Thanks

Todd G Peterson  
Legislative Assistant  
Alderman Westmoreland - District 5  
200 East Wells Street, Room 205  
Milwaukee, WI 53202  
Office: 414-286-3870

[Report an Issue \(milwaukee.gov\)](https://milwaukee.gov)

**REDACTED RECORD**

AC

**Cox, Andrew**

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**From:** Peterson, Todd  
**Sent:** Wednesday, October 18, 2023 2:07 PM  
**To:** Cooney, Jim  
**Subject:** 9207 W Capitol Dr

Hi Jim, this landlord is in opposition to this application. Please mail license letter for 11/7 hearing

Thanks

Todd G Peterson  
Legislative Assistant  
Alderman Westmoreland - District 5  
200 East Wells Street, Room 205  
Milwaukee, WI.53202  
Office: 414-286-3870

**REDACTED RECORD**

[Report an Issue \(milwaukee.gov\)](https://www.milwaukee.gov)

**FW: 9207 W Capitol Dr**

Cooney, Jim <Jim.Cooney@milwaukee.gov>

Mon 9/25/2023 11:07 AM

To: Collins, Rolanda <Rolanda.Collins@milwaukee.gov>

Cc: Milano, Marissa <ldcoord@milwaukee.gov>

Please add

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**From:** Peterson, Todd <Todd.Peterson@milwaukee.gov>

**Sent:** Monday, September 25, 2023 10:41 AM

**To:** Cooney, Jim <Jim.Cooney@milwaukee.gov>

**Subject:** 9207 W Capitol Dr

Hi Jim, this caller is opposed to Picasso.

Thanks

Todd G. Peterson

Legislative Assistant

Lamont Westmoreland, 5<sup>th</sup> District Alderman

414-286-3870 phone

[aide5@milwaukee.gov](mailto:aide5@milwaukee.gov)

**REDACTED RECORD**

**FW: 9207 W Capitol Dr**

Cooney, Jim <Jim.Cooney@milwaukee.gov>

Wed 9/6/2023 5:27 PM

To: Collins, Rolanda <Rolanda.Collins@milwaukee.gov>

Cc: Martin, Faviola <Faviola.Martin@milwaukee.gov>; Milano, Marissa <ldcoord@milwaukee.gov>

Please add.

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**From:** Peterson, Todd <Todd.Peterson@milwaukee.gov>

**Sent:** Wednesday, September 6, 2023 12:04 PM

**To:** Cooney, Jim <Jim.Cooney@milwaukee.gov>

**Subject:** 9207 W Capitol Dr

Hi Jim  
new application.

would like to testify in opposition to this

He is concerned about litter, tall weeds and the nature of the business

Thanks

Todd G. Peterson  
Legislative Assistant  
Lamont Westmoreland, 5<sup>th</sup> District Alderman  
414-286-3870 phone  
[aide5@milwaukee.gov](mailto:aide5@milwaukee.gov)

**REDACTED RECORD**



Date: September 5, 2023  
Officer: Alicia Walker

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

Name of Premise: Picasso  
Address: 9207 W. Capitol Dr.  
Phone:

Owner: Debra M. Morris  
Owner address: 3851 N 61<sup>st</sup> St  
City State Zip: Milwaukee, WI 53216  
Owner Phone: 414-269-7937  
Owner email: [Debramorris3851@gmail.com](mailto:Debramorris3851@gmail.com)

Licensee/Agent: Debra M. Morris  
Home Address: 3851 N 61<sup>st</sup> St  
City State Zip: Milwaukee, Wisconsin 53216  
Phone: 414-269-7937  
Email: [Debramorris3851@gmail.com](mailto:Debramorris3851@gmail.com)

Preferred contact: Debra M Morris

Location currently open:  YES  NO

Projected open date: Already Opened

Day's open: S M T W Th F SA ALL

Hours of Operation: Sun: CLOSED 24 hours Y N  
Mon: 3:30PM TO 8:30PM  
Tue: 3:30PM TO 8:30PM  
Wed: 3:30PM TO 8:30PM  
Thu: 3:30PM TO 8:30PM  
Fri: 3:30PM TO 9:00PM  
Sat: 3:30PM TO 8:30PM

Premise Type: Tavern/Bar  
Restaurant  
Other:

Licenses currently held:

Alcohol:  Yes  No Class: BTAVN #: 355634  
 Tobacco:  Yes  No #:  
 Food:  Yes  No #: FREST 19430  
 Extended Hours:  Yes  No #:  
 Secondhand Dealer:  Yes  No Type: #:  
 Other:  Yes  No Type: CWINE #: 652  
 Other:  Yes  No Type: BBEER #: 199040

**Exterior Survey:**

1. Is the area around the location clean?  Yes  No
2. What surrounds the location? (Check all the apply)
  - a.  Park
  - b.  School
  - c.  Youth Center
  - d.  Church
  - e.  Tavern(s) If so, how many
  - f.  Residential
  - g.  Other businesses
  - h.  Other:
3. Can you see from the outside of the location into the interior  Yes  No  
 \*RECOMMENDED THAT THE BLINDS BE OPEN DURING BUSINESS HOURS
4. Can you see the employees inside of the location from the outside  Yes  No
5. Are exterior windows free of signage  Yes  No
6. Is there a parking lot  Yes  No
7. Is the parking lot clean?  Yes  No
8. Off-Street parking  Yes  No
9. Is the parking lot well lit?  Yes  No
10. Valet Parking  Yes  No
  - a. Will this lot have a guard?  Yes  No
  - b. Will this lot have cameras?  Yes  No
11. Are there areas where a person could conceal themselves  Yes  No BEHIND BIG DADDY RESTAURANT
12. Is there exterior lighting?  Yes  No. Does it appears to be adequate  Yes  No
13. Exterior Payphone?  Yes  No
14. Are there No Loitering Signs posted?  Yes  No ONE SIGN ONLY IN THE REAR OF THE BUILDING
15. Are there exterior security cameras  Yes  No How Many: RECOMMENDED THAT SHE GET CAMERAS LOCATED IN THE REAR AND FRONT OF EXTERIOR BUILDING.
16. Are the address numbers prominently displayed and easy to see  Yes  No

**Camera Survey:**

17. Does this location have security cameras?  Yes  No
18. Are they in working order?  Yes  No
19. What format are the cameras?

- a. Color  Yes  No
- b. Digital  Yes  No
- c. Recorded  Yes  No

20. How long is footage stored for later viewing: SHE DON'T KNOW
21. Are there exterior cameras  Yes  No How many:
22. Are there interior cameras  Yes  No How many: 7
23. Do all employees know how to retrieve recorded digital images/footage?  Yes  No
24. Cameras located in parking lot  Yes  No How many

**Interior Survey:**

25. What is the planned capacity 55
26. What is the minimum number of employees That will be on premise 1
27. Is the storeowner willing to be a standing complainant regarding loitering?  Yes  No
- a. If yes have them fill out the standing complaint form and give them two of the commercial signs  Yes  No
28. Is the interior of the location neat and clean?  Yes  No
29. Does an interior camera face the entrance/exit?  Yes  No
30. Is there a lockable area that separates employees from customers?  Yes  NO SHE HAS AREA THAT SEPERATES EMPLOYEES FROM CUSTOMERS, BUT IT IS NOT A LOCKED AREA.
31. Are emergency and non-emergency numbers posted near the phone?  Yes  No
32. 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

**Security**

33. How many security personnel are going to be employed: 0
34. How will they be deployed: Interior 0 Exterior 0
35. What days will they be deployed  Mon  Tue  Wed  Thu  Fri  Sat  Sun
36. Will the security be managed by business  or contracted
37. Will they be armed  Yes  No
38. What type of security measures to be used:
- Wanding/metal detector
  - ID Scanner
  - Dress Code
  - Cover Charge
  - Age restriction
  - Other

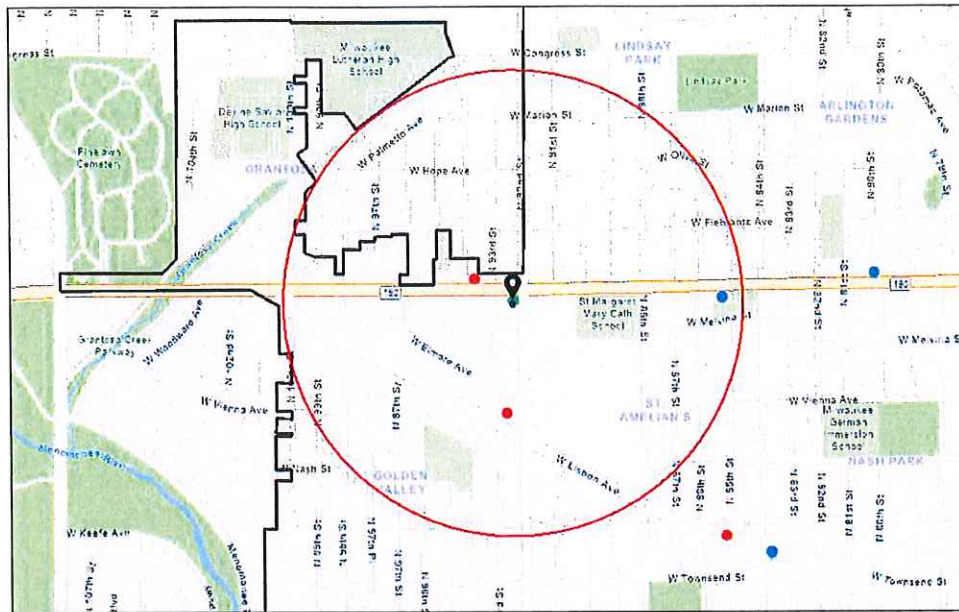
**ADDITIONAL COMMENTS/RECOMMENDATIONS:**

Debra stated that she wants to be very caution and don't want to have a lot of people. She is starting off slow and it's only her and 1 other person. Later down the line she will get security for protect but not now.

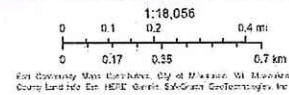
**Area of Interest (AOI) Information**

Area : 21,862,585.72 ft<sup>2</sup>

Aug 15 2023 15:06:11 Central Daylight Time



- Alcohol Licenses (active)
- Class A Liquor and Malt
  - Class B Tavern
  - Class C Wine Retailer
  - Class B Fermented Malt Beverage
  - City Limits



## Summary

Name	Count	Area(ft <sup>2</sup> )	Length(mi)
Alcohol Licenses	5		

## Alcohol Licenses

#	Legal Entity	Trade Name	Licensee	Address	License Type Name	Total Capacity	Expiration Date	Count
1	JID LLC	Mykonos Restaurant	Ted Eliades, Agt	8501 W CAPITOL DR	Class B Tavern License		9/16/2023, 7:00 PM	1
2	SPDK, INC	SUNRISE LIQUOR AND GIFTS	Kamlesh M Patel, Agt	9330 W CAPITOL DR	Class A Malt & Class A Liquor License		9/25/2023, 7:00 PM	1
3	New Sentry, LLC	Sentry Foods	Bharat Bansal, Agt	9210 W Lisbon AV	Class A Malt & Class A Liquor License		5/2/2024, 7:00 PM	1
4	Jamaican Season Island, LLC	Picasso	Debra M Morris, Agt	9207 W Capitol DR	Class C Wine Retailer's License		6/18/2024, 7:00 PM	1
5	Jamaican Season Island, LLC	Picasso	Debra M Morris, Agt	9207 W Capitol DR	Class B Fermented Malt Beverage Retailer's License		6/18/2024, 7:00 PM	1

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



Wednesday, October 25, 2023



# Notice of Public Hearing

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MORRIS, Debra M, Agent  
Picasso at 9207 W Capitol DR  
Class B Tavern License Application

**Tuesday, November 07, 2023 at 1:50 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 11/7/2023 at 1:50 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 phone or internet are asked to contact the staff assistant, Yadira Melendez at (414) 286-2775 or [stasst5@milwaukee.gov](mailto: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.

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## **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	3927 N 93RD ST	MILWAUKEE, WI 53222-2510
CURRENT OCCUPANT	3930 N 93RD ST	MILWAUKEE, WI 53222-2510
CURRENT OCCUPANT	3931 N 92ND ST	MILWAUKEE, WI 53222-2505
CURRENT OCCUPANT	3931A N 92ND ST	MILWAUKEE, WI 53222-2505
CURRENT OCCUPANT	3946 N 93RD ST# 1	MILWAUKEE, WI 53222-2554
CURRENT OCCUPANT	3946 N 93RD ST# 2	MILWAUKEE, WI 53222-2554
CURRENT OCCUPANT	3946 N 93RD ST# 3	MILWAUKEE, WI 53222-2554
CURRENT OCCUPANT	3946 N 93RD ST# 4	MILWAUKEE, WI 53222-2554
CURRENT OCCUPANT	3950 N 93RD ST# 1	MILWAUKEE, WI 53222-2554
CURRENT OCCUPANT	3950 N 93RD ST# 2	MILWAUKEE, WI 53222-2554
CURRENT OCCUPANT	3950 N 93RD ST# 3	MILWAUKEE, WI 53222-2554
CURRENT OCCUPANT	3950 N 93RD ST# 4	MILWAUKEE, WI 53222-2554
CURRENT OCCUPANT	3951 N 92ND ST	MILWAUKEE, WI 53222-2555
CURRENT OCCUPANT	3951 N 92ND ST# A	MILWAUKEE, WI 53222-2555
CURRENT OCCUPANT	3953 N 92ND ST	MILWAUKEE, WI 53222-2555
CURRENT OCCUPANT	3953 N 92ND ST# A	MILWAUKEE, WI 53222-2555
CURRENT OCCUPANT	3954 N 93RD ST# 1	MILWAUKEE, WI 53222-2554
CURRENT OCCUPANT	3954 N 93RD ST# 2	MILWAUKEE, WI 53222-2554
CURRENT OCCUPANT	3954 N 93RD ST# 3	MILWAUKEE, WI 53222-2554
CURRENT OCCUPANT	3954 N 93RD ST# 4	MILWAUKEE, WI 53222-2554
CURRENT OCCUPANT	3957 N 92ND ST	MILWAUKEE, WI 53222-2555
CURRENT OCCUPANT	3957 N 92ND ST# A	MILWAUKEE, WI 53222-2555
CURRENT OCCUPANT	3959 N 92ND ST	MILWAUKEE, WI 53222-2555
CURRENT OCCUPANT	3959 N 92ND ST# A	MILWAUKEE, WI 53222-2555
CURRENT OCCUPANT	9200 W MELVINA ST	MILWAUKEE, WI 53222-2535
CURRENT OCCUPANT	9200A W MELVINA ST	MILWAUKEE, WI 53222-2535
CURRENT OCCUPANT	9202 W MELVINA ST	MILWAUKEE, WI 53222-2535
CURRENT OCCUPANT	9202A W MELVINA ST	MILWAUKEE, WI 53222-2535
CURRENT OCCUPANT	9300 W MELVINA ST	MILWAUKEE, WI 53222-2537
CURRENT OCCUPANT	9307 W CAPITOL DR	MILWAUKEE, WI 53222-1534
CURRENT OCCUPANT	9307 W CAPITOL DR# 2	MILWAUKEE, WI 53222-1534
CURRENT OCCUPANT	9310 W MELVINA ST	MILWAUKEE, WI 53222-2537
CURRENT OCCUPANT	9311 W CAPITOL DR# 1	MILWAUKEE, WI 53222-1573
CURRENT OCCUPANT	9311 W CAPITOL DR# 2	MILWAUKEE, WI 53222-1573
CURRENT OCCUPANT	9311 W CAPITOL DR# 3	MILWAUKEE, WI 53222-1573
CURRENT OCCUPANT	9311 W CAPITOL DR# 4	MILWAUKEE, WI 53222-1573

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Total Records: 36

Radius 250.0 feet and Center of the Circle: 9207 W Capitol Dr





# 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:

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

## 2. Business Operations

- a. Proposed Opening Date: Already Open
- 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: Class B. & C & food
- 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: I just need to upgrade to a class B. Liquor
- 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: Back of Building
- b. Number of Garbage Cans: Inside: 5 Locations: Kitchen, Dining Area & Bathroom  
Outside: 1 Locations: Back of Building
- c. Is a crowd control barrier used?  No  Yes If yes, describe: \_\_\_\_\_
- d. How many restrooms are on the premises? 2
- e. Name of solid waste contractor:  Advanced Disposal  Waste Management  Other: \_\_\_\_\_

## 5. Security

- a. Are there onsite parking spaces?  No  Yes If yes, how many? 1 and describe the parking security plan: we will be putting a camera in the parking area
- b. Is there a loading zone?  No  Yes If yes, describe the loading area security plan: in back of building of the Restaurant
- 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: Camera  
 List their licensing, certification, or training credentials \_\_\_\_\_
- d. Will there be security cameras?  No  Yes If yes, how many? 6 and list locations: front, Ding Kitchen, Bar area = food area & office area
- e. Will searches/identification checks be done upon entry?  No  Yes If yes, describe \_\_\_\_\_

## 6. Percentage of Sales (must total 100%)

Alcohol <u>50%</u>	Food <u>50%</u>	Secondhand Merchandise _____%	Precious Metals & Gems _____%
Entertainment _____%	Cigarettes _____%	_____%	_____%
Pawnbroker Activity _____%	Salvaged Materials _____% (such as scrap metal)	Personal Services (such as tattoo, body piercing, salon, tailor, tanning, etc.) _____%	Other _____% Describe: _____

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

### Type 1

- Full Service Restaurant  Cafe/Coffee Shop  Deli or Fast Food Restaurant  Private/Fraternal/Veterans Club
- Night Club  Tavern  Cocktail Lounge  Teen Club
- Banquet Hall  Sports Facility  Bowling Alley
- Hotel/Motel: Number of Floors: \_\_\_\_\_ Number of Rooms: \_\_\_\_\_  
 Rooming House: Number of Floors: \_\_\_\_\_ Number of Rooms: \_\_\_\_\_

### Type 2

- Liquor Store  Corner Store  Supermarket  Convenience Store
- Gas Station  Amusement/Phonograph Distributor  Recycling, Salvage or Towing
- Used Car Dealer  Personal Service Establishment  
(such as tattoo business, hair salon, tailor, etc.)  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):  
 1<sup>st</sup> Floor  2<sup>nd</sup> 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: 92 street
- 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: Dapao-Capital LLC Sharma Phone Number: \_\_\_\_\_  
 Building Owner Address: PO Box 867 Brookfield WI 53008

## 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	8:00 am	12:00 am	25-30	25-40	no restriction
Monday	8:00 am	12:00 am	25-30		
Tuesday	8-00	12:00 pm	25-30		
Wednesday	8-00	12:00 am	25-30		
Thursday	8-00	12:00 am	25-30		
Friday	8-00	12:00 am	25-30		
Saturday	8-00	12:00 am	25-30		

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: 8:00 am to 9:00 pm Sunday thru Saturday  
 Class B: 6:00 am to 2:00 am Sunday thru Thursday, 6:00 am to 2:30 am Friday & Saturday

Entertainment Outdoor Closing Hours: On Menu 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.

## 11. Signature(s)

On Menu  
 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.



# 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](http://www.milwaukee.gov/license)

Legal Entity Name: Jamaica Season Island LLC

Premise Address: 9207 West Capital DR

### Proximity of Premises to Church, School, Daycare Center or Hospital

Is the building within 300 feet of any church, school, daycare center or hospital?  No  Yes

### "Service Bar Only" Designation

If applying for Class B or C license, are you applying for "Service Bar Only"?  No  Yes  
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

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?  No  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?  Own  Lease

b) Who owns the fixtures (for example, coolers, etc.)? I do

c) Are you purchasing the stock and/or fixtures?  No  Yes If yes, amount paid \$ Varies

d) Total amount paid for business \$ 50,000

e) Total amount paid for goodwill of the business \$ 30,000

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 4-1-2019 Ends still operating

b) Monthly rental \$ 3,300

c) Do you have an option to renew the lease?  No  Yes

d) Does your lease allow for assignment to another party without the consent of the owner?  No  Yes

e) For what length of time have you been guaranteed occupancy (number of years)? 4 yrs

**Lease Information (Continued)**

- f) In addition to paying the monthly rental, will you have to pay anything additional to the owner of the building to guarantee performance of the lease?  No  Yes If yes, explain \_\_\_\_\_
- g) Does the present owner or occupant object to the granting of your license?  No  Yes  
If yes, explain \_\_\_\_\_

**Change of Agent Applicants Only**

Have there been any changes to the floor plan since the last application was submitted?  No  Yes  
If no, a new floor plan is not required. If yes, submit a new floor plan and explain the change(s):  
\_\_\_\_\_

**Signature**

*D. Morris*

*D. Morris*

Signature of Sole Proprietor, Partner or 20% or More Shareholder  
(If no 20% or more Shareholder, Corporate Officer - print name/title and sign)

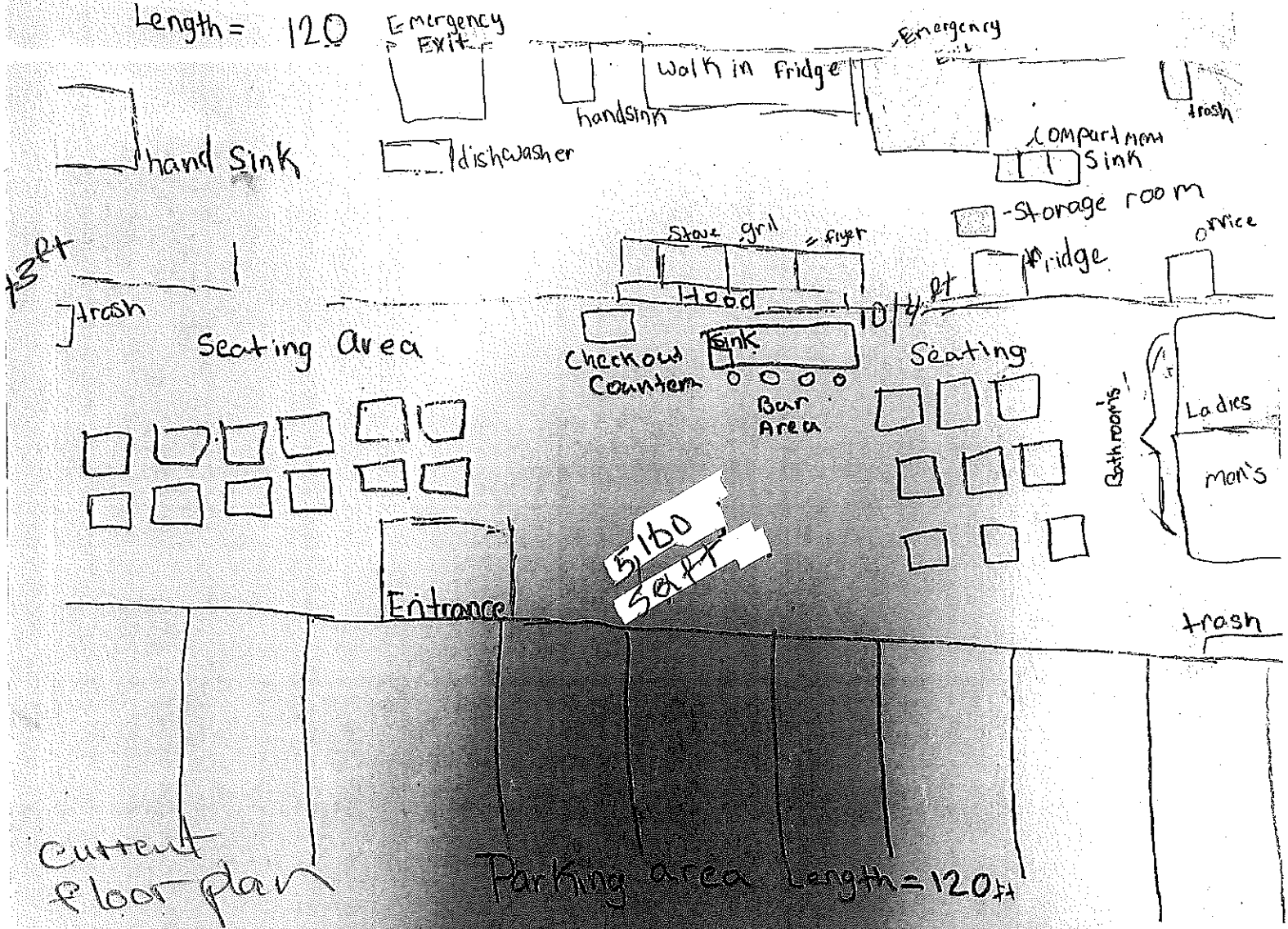
Note: All information contained in this application is subject to approval by the Common Council.  
Deviating from approved plan of operation will subject licensee to citations, and/or suspension or non-renewal of the license.  
Contact the License Division for information on how to request changes.

**New and transfer of premises applicants must submit the following:**

- Detailed floor plan  
 If a restaurant, copy of the menu

# Current Floor Plan

Length = 120



Current Floor plan

Parking area length = 120ft

Picasso

Jamaican Season Island LLC

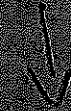
Debra Morris - Agent

9207 West Capital DR

Milwaukee WI 53222

West Capital DR.

north



Current Floor Plan

width = 51