



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

Friday, April 28, 2023

COMMITTEE MEETING NOTICE

AD 03

DRIES, Donald R, Agent
DRIES ENTERPRISES, LLC
2856 N OAKLAND Av
Milwaukee, WI 53211

You are requested to attend a hearing which is to be held in the Council Chambers, Third Floor, City Hall:

Tuesday, May 09, 2023 at 08:45 AM

Regarding: Your Class B Tavern, Public Entertainment Premises, Food Dealer and Weights & Measures License Applications Requesting Jukebox, Bands, Karaoke, Disc Jockey, 5 Amusement Machines and 1 Pool Table as agent for "DRIES ENTERPRISES, LLC" for "DRIES RISTORANTE/DONNIE'S PUB" at 2856 N OAKLAND 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 in City Hall is available at reduced rates (5 hour limit) at the Milwaukee Center on the southwest corner of East Kilbourn and North Water Street. Parking tickets must be validated in the first floor information booth in City Hall.

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
Phone: (414) 286-2238 Fax: (414) 286-3057 Email Address: License@milwaukee.gov



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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

Date: 3/23/23
Officer: PLUMLEY

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

Name of Premise: Dries Ristorante / Donnies Pub
Address: 2865 N Oakland Av
Phone:

Owner: Donnie R Dries
Owner address: 2640 N Farwell Av
City State Zip: Milwaukee WI 53211
Owner Phone: 262-353-2478
Owner email:

Licensee/Agent: Donnie R Dries
Home Address: 2640 N Farwell Av
City State Zip: Milwaukee WI 53211
Phone: 262-353-2478
Email: donnie2244@gmail.com

Preferred contact: Phone

Location currently open: YES NO

Projected open date: 5/1/2023

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

Hours of Operation: Sun: 9A-2A 24 hours Y N
Mon: 9A-2A
Tue: 9A-2A
Wed: 9A-2A
Thu: 9A-2A
Fri: 9A-230A
Sat: 9A-230A

Premise Type: Tavern/Bar
 Restaurant
 Other:

Licenses currently held:

Alcohol: Yes No Class: #:
 Tobacco: Yes No #:
 Food: Yes No #:
 Extended Hours: Yes No #:
 Secondhand Dealer: Yes No Type: #:
 Other: Yes No Type: #:
 Other: Yes No Type: #:

Exterior Survey:

1. Is the area around the location clean? 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
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
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
15. Are there exterior security cameras Yes No How Many:
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:
21. Are there exterior cameras Yes No How many:
22. Are there interior cameras Yes No How many:
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 488
- 26. What is the minimum number of employees That will be on premise 10
- 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
- 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: 2
- 34. How ill they be deployed: Interior 1 Exterior 1
- 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:

This business is still under construction. The agent will be adding multiple surveillance cameras on the interior and exterior of the business. I informed the agent he should consider more lighting in the rear of the building to help illuminate the alley. The agent will be adding new signs for the business on the front of the building which will provide more lighting on N. Oakland Av. The agent will be hiring security and will be considering having armed security after the business opens. Security will be conducting wanding and ID checking. I did inform the agent about the ID scanner that is being used by a lot of the larger establishments in the downtown area, he was very receptive to the idea and will research the best option.

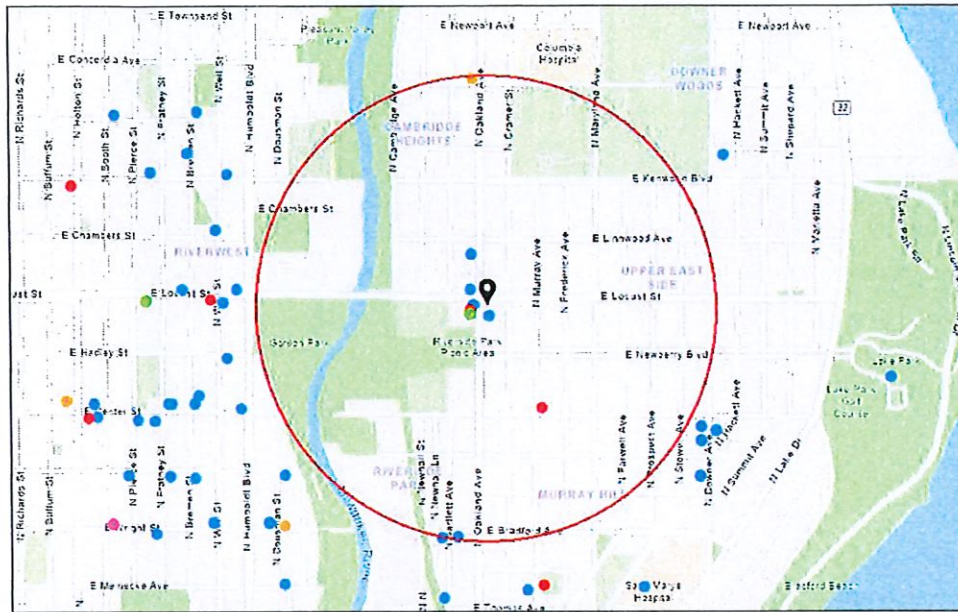


Concentration Map for 2856 N Oakland Ave

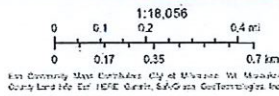
Area of Interest (AOI) Information

Area : 21,862,585.55 ft²

Jan 25 2023 9:31:46 Central Standard Time



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



Summary

Name	Count	Area(ft ²)	Length(mi)
Alcohol Licenses	12		

Alcohol Licenses

#	Legal Entity	Trade Name	Licensee	Address	License Type Name	Total Capacity	Expiration Date	Count
1	AXELS, INC	AXELS	ERIC A RASMUSSEN, Agt	2859 N OAKLAND AV	Class B Tavern License	100	2/7/2023, 6:00 PM	1
2	Mary Jane Restaurants LLC	Cheba Hut	Heather R Huhn, Agt	2907 N OAKLAND AV	Class B Tavern License	121	6/19/2023, 7:00 PM	1
3	LISA'S FINE FOODS, INC	Lisa's Fine Foods	GARY J BONGIORNO, Agt	2961 N OAKLAND AV	Class B Tavern License		6/29/2023, 7:00 PM	1
4	Dairyland Retail Group LLC	7-Eleven #35853C	Elizabeth J Evans, Agt	3301 N Oakland AV	Class A Fermented Malt Beverage Retailer's License		6/14/2023, 7:00 PM	1
5	GILBERT LIQUOR CO, INC	GILBERT LIQUOR	ALLAN R RASMUSSEN, Agt	2853-57 N OAKLAND AV	Class A Malt & Class A Liquor License		6/29/2023, 7:00 PM	1
6	ARO Management LLC	The Miramar Theatre	Aaron Ohlsson, Agt	2844-46 N Oakland AV	Class B Tavern License		6/29/2023, 7:00 PM	1
7	Thai A Kitchen	Thai A Kitchen	Toua Vang, SP	2851 N Oakland AV	Class B Fermented Malt Beverage Retailer's License	49	7/26/2023, 7:00 PM	1
8	Thai A Kitchen	Thai A Kitchen	Toua Vang, SP	2851 N Oakland AV	Class C Wine Retailer's License	49	7/26/2023, 7:00 PM	1
9	H & H ASSAD, LLC	PARKSIDE LIQUOR & GROCERY	HANA O UPRIGHT, Agt	2700 N MURRAY AV	Class A Malt & Class A Liquor License		8/16/2023, 7:00 PM	1
10	The Original MKE, LLC	The Original	Eric E Rzepka, Agt	2498 N Bartlett AV	Class B Tavern License	99	9/3/2023, 7:00 PM	1
11	Immy's African Cuisine LLC	Immy's African Cuisine	Immaculate N Kaggwa, Agt	2847 N Oakland AV	Class B Fermented Malt Beverage Retailer's License		11/30/2023, 6:00 PM	1
12	Immy's African Cuisine LLC	Immy's African Cuisine	Immaculate N Kaggwa, Agt	2847 N Oakland AV	Class C Wine Retailer's License		11/30/2023, 6:00 PM	1

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



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:

RESTAURANT & BAR

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

2. Business Operations

- a. Proposed Opening Date: *3/1/23*
- 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: *FRONT OF BAR*
- b. **Number of Garbage Cans:** Inside: *16* Locations: *Through out Restaurant AND BAR*
Outside: *1* Locations: *ROAD SIDE*
- 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? _____ 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? 15-20 and list locations: 15-20
VARIOUS LOCATION (EXTERIOR)
- e. Will searches/identification checks be done upon entry? No Yes If yes, describe FOR WEAPONS / OR ID

6. Percentage of Sales (must total 100%)

Alcohol <u>40</u> %	Food <u>55</u> %	Secondhand Merchandise _____ %	Precious Metals & Gems _____ %
Entertainment <u>5</u> %	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: _____ Rooming House: Number of Floors: _____
 Number of Rooms: _____ 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):

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: LOCUST & OAKLAND

d. Describe Building: Free Standing Building Strip Mall Other: _____

e. Describe Premises Structure: Single Story Multi-Story - # of Stories 2 Other: _____

f. Describe Surrounding Area: Commercial Residential Industrial Other: _____

g. Building Owner Name: CHAISTOS KARAMELOS Phone Number: 414 364-5252

Building Owner Address: 2867 N OAKLAND AVE MILWAUKEE WI 53211

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	6:00 AM	2:00 AM	100	18-55	NONE
Monday	6:00 AM	2:00 AM	100	18-55	NONE
Tuesday	6:00 AM	2:00 AM	100	18-55	NONE
Wednesday	6:00 AM	2:00 AM	100	18-55	NONE
Thursday	6:00 AM	2:00 AM	150	18-55	NONE
Friday	6:00 AM	2:30 AM	200	18-55	NONE
Saturday	6:00 AM	2:30 AM	200	18-55	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 Class A: 8:00 am to 9:00 pm Sunday thru Saturday

Permitted Hours of Operation: 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: 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)

Chaistos Karamelos

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

Legal Entity Name: DMES Enter Prises LLC

Premise Address: 2836 N OAKLAND AVE

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.)? OLYMPIA-KALTS LLC
 - c) Are you purchasing the stock and/or fixtures? No Yes If yes, amount paid \$ _____
 - d) Total amount paid for business \$ _____
 - e) Total amount paid for goodwill of the business \$ _____
- 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 1-1-23 Ends 1-1-26
- b) Monthly rental \$ 5500
- 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)? 8 years

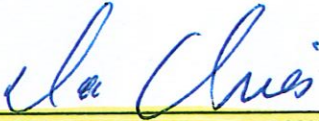
Lease Information (Continued)

- 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 extra charges
- 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



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



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:

2856 N OAKLAND AVE MILWAUKEE WI 53211

TYPES OF ENTERTAINMENT (CHECK ALL THAT APPLY)

- | | | | |
|---|---|---|---|
| <input type="checkbox"/> Instrumental Musicians | <input type="checkbox"/> Battle of the Bands | <input type="checkbox"/> Dancing by Performers | <input checked="" type="checkbox"/> Amusement Machines
How many? <u>5</u> |
| <input checked="" type="checkbox"/> Bands | <input type="checkbox"/> Comedy Acts | <input type="checkbox"/> Adult Entertainment/
Strippers/Erotic Dance | <input type="checkbox"/> Concerts
Approx. # per year? _____ |
| <input type="checkbox"/> Bowling Alley
How many? _____ | <input checked="" type="checkbox"/> Disc Jockey | <input type="checkbox"/> Wrestling | <input type="checkbox"/> Theatrical Performances
Approx. # per year? _____ |
| <input checked="" type="checkbox"/> Pool Tables
How many? <u>1</u> | <input type="checkbox"/> Magic Shows | <input type="checkbox"/> Patron Contests | <input checked="" type="checkbox"/> Jukebox |
| <input type="checkbox"/> Motion Pictures (movies by
admission) - How many? _____ | <input type="checkbox"/> Poetry Readings | <input type="checkbox"/> Patrons Dancing | <input checked="" type="checkbox"/> Karaoke |
| <input type="checkbox"/> Other: _____ | | | |

Entertainment Outdoor Closing Hours: 10:00pm Sunday-Thursdays; 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 AMPLIFICATION

Will promoters ever be used for any of the entertainment? No Yes If Yes, Describe:

At any time will sound amplification be used? No Yes If Yes, Describe:

LEGAL CAPACITY OF PREMISES

____ (Call the Development Center at 414-286-8211 with questions.) Legal capacity determines the fee for your Public Entertainment Premises License. If you would like to request the license be approved with a lower capacity than that listed above, indicate the lower capacity here: _____. If approved, this lower capacity will print on your license and override the capacity listed on your Occupancy Permit.

ACKNOWLEDGEMENT/SIGNATURE

I understand that after the license has been issued, a change to the plan of operation will require a written request to change and approval from the Common Council. I agree to inform the City Clerk within 10 days of any substantial changes in the information supplied in this application. I understand that I shall not willfully refuse to provide the services offered under this license, or add charges or require deposits not required of the general public because of race, color, sex, religion, national origin or ancestry, age, handicap, lawful source of income, marital status, sexual orientation, gender identity or expression, familial status or the fact that a person is now or has been a member of the military service, whether dressed in uniform or not; and shall not seek such information as a condition of employment, or penalize any employee or discriminate in the selection of personnel for training or promotion on the basis of such information.

I have knowledge of the City Ordinances currently regulating public entertainment, and understand that the license may be subject to suspension, non-renewal or revocation, if I violate any rule, law or regulation of the city of Milwaukee and State of Wisconsin.

[Handwritten Signature]

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

Office Use Only:
Initials: _____ Filed: _____ App: _____
Only PEP? No Yes If Yes, Queue to MPD and Email Mgrs/Team Lead (must be heard w/in 60 days)



FOOD DEALER LICENSE PLAN OF OPERATION

OFFICE OF THE CITY CLERK, LICENSE DIVISION
CITY HALL, 200 E. WELLS ST, ROOM 105, MILWAUKEE, WI 53202
(414) 286-2238 • license@milwaukee.gov • www.milwaukee.gov/license

Legal Entity Name: DAIES ENTERPRISES LLC
Premises Address: 2856 N OAKLAND AVE MILWAUKEE, WI 53221

SECTION 1 TYPE OF BUSINESS

What will be the majority of your food sales? (check one)

Restaurant Items (meals):
MEALS include, but are not limited to, chicken, ribs, sandwiches, roasted corn, baked potatoes, hot dogs, brats, tacos, nachos w/ cheese and meat, French fries, cooked or deep fried vegetables/fruit, cooked cheese curds, corn dogs, egg rolls, salads.

Retail Items (snacks and beverages):
RETAIL items include, but are not limited to, ice cream/soft serve, lemonade, snow cones, coffee, espresso, cappuccino, tea, fruit juice, smoothies, candy, dispensed soda, fruit cups, bakery, cookies, kettle corn, cotton candy, funnel cakes, fritters, tortilla chips w/ cheese.

Will it be a convenience store? Yes No

A convenience store contains less than 5,000 square feet of retail space and has, as its primary business, the sale of basic food items and in addition, sells household products or is a filling station that sells basic food items and household products.

- Bed & Breakfast
- Micro Market

All Applicants: Submit a menu or a list of food items that will be sold.

Will any wholesale business be done? No Yes If yes, what percentage of food sales will be wholesale?

Less than 25%

25% or More AND:

Restaurant items (meals) will be sold – Complete this application and also contact DATCP.

NO restaurant items (meals) will be sold - Do NOT complete this application. Contact DATCP only.

SECTION 2 FOOD PROCESSING

Will any food processing be done? No Yes

Processing is defined as assembling, grinding, cutting, mixing, baking, coating, stuffing, packing, bottling, grilling, canning, extracting, fermenting, distilling, pickling, freezing, drying, smoking, or packaging.

SECTION 3 FOOD REQUIRING TEMPERATURE CONTROL

Will any food that requires temperature control be sold? No Yes

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

If yes, list the types of food items: DESSERTS - SALAD



WEIGHTS & MEASURES PLAN OF OPERATION

ccl-wmplan 1/9/18

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

Legal Entity Name: DNIS Enterprises LLC

Premise Address: 2856 NORTH OAKLAND

Type of Business

Provide a brief description of the establishment/business:
BAR & RESTAURANT

Other licenses may be required depending on the type of business you are operating.

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: _____

Signature

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

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



WEIGHTS & MEASURES LICENSE SUPPLEMENTAL APPLICATION

OFFICE OF THE CITY CLERK, LICENSE DIVISION
CITY HALL, 200 E. WELLS ST, ROOM 105, MILWAUKEE, WI 53202
(414) 286-2238 • license@milwaukee.gov • www.milwaukee.gov/license

Office Use Only:	
App#	_____
Filed	_____
Initials	_____
Paid	_____
Lic #	_____

Legal Entity Name: DAVES Enterprises, LLC
 Premise Address: 2856 N OAKLAND AVE MILWAUKEE, WI 53211

Device Type(s)

- Check all device types for which you need a license.
 - For each device type checked, indicate how many you have in the Number of Devices column (b).
 - Calculate the Total Fee Per Device Type by multiplying the Fee Per Device Type (a) by the Number of Devices (b).
 - Add all Total Fee Per Device Type amounts together and that will be your Total Fee Due.
- * **Exception:** The Scanner fee is not per device. Check the box for the appropriate range. If you have 1-3 scanners, the total due is \$130. If you have 4 or more scanners, the total due is \$250. Check the Number of Devices (b).

Device Type	License Period	Fee Per Device Type (a)	Number of Devices (b)	Total Fee Per Device Type (a x b)
Liquid Measuring Devices				
<input type="checkbox"/> Retail Petroleum Meters	12 months	\$60		
<input type="checkbox"/> 0 to 30 gallons per minute	24 months	\$60		
<input type="checkbox"/> 31 to 200 gallons per minute	24 months	\$250		
<input type="checkbox"/> Over 200 gallons per minute	24 months	\$250		
Scales				
<input checked="" type="checkbox"/> Measuring any weight amount	24 months	\$55		
Scanners				
		Fee for scanners is by range	Check how many scanners you have	
<input type="checkbox"/> Up to 3 scanners	24 months	\$130 total*	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3	
<input type="checkbox"/> Four or more scanners	24 months	\$250 total*	<input type="checkbox"/> 4 <input type="checkbox"/> Other _____	
Other Devices				
<input type="checkbox"/> Length Measuring Device	24 months	\$60		
<input type="checkbox"/> Timing Device	24 months	\$30		

Total Fee Due \$550

Signature

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

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

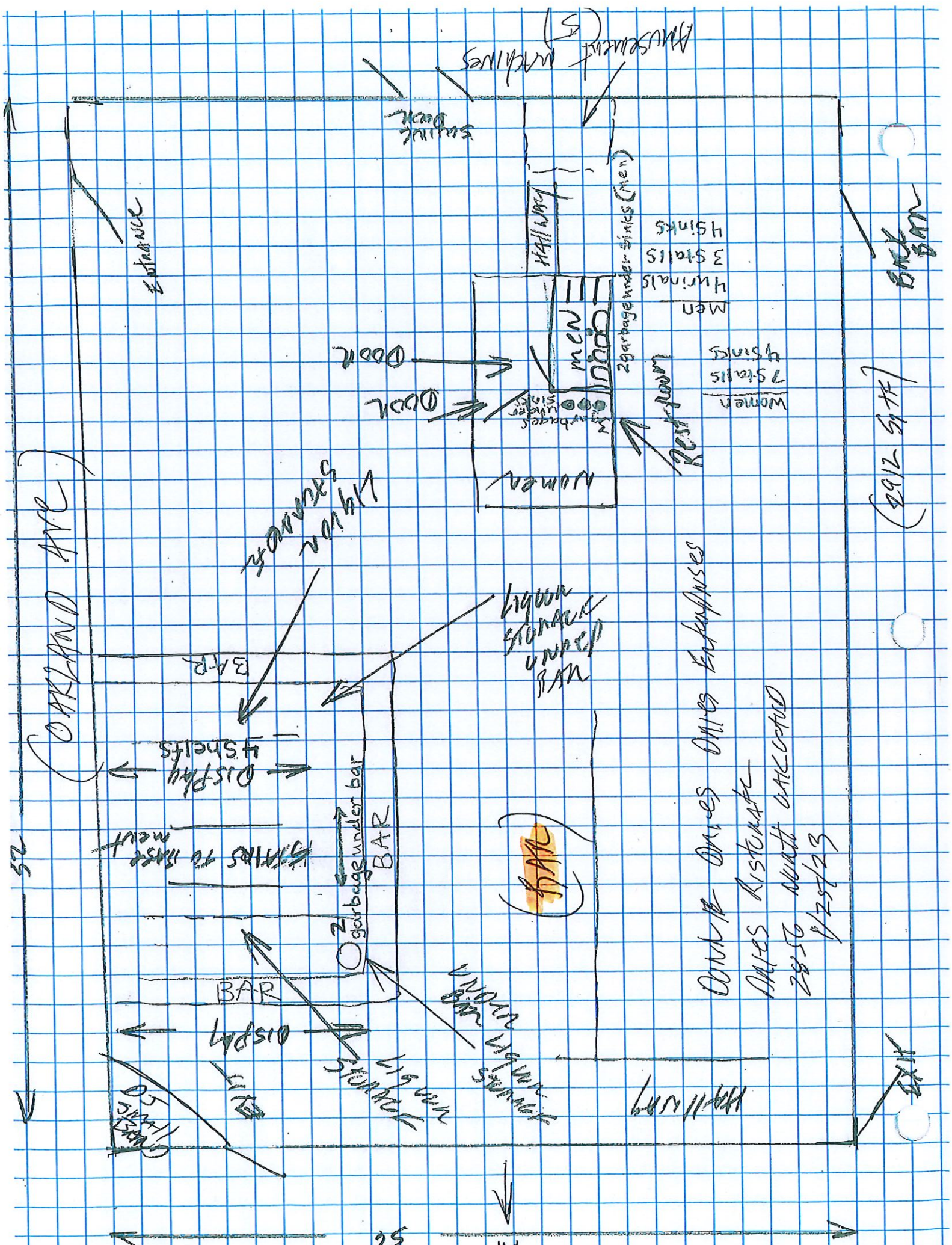
I understand that these device licenses are not transferable (with the exception of scanners). If the device is replaced or needs to be resealed, I must apply for and receive a new license so that an inspection of the device can be performed prior to its use.

I acknowledge that as a condition of being issued this license, I must allow the Health Department into the establishment to test the device to validate its specifications/tolerances. If my devices are found out of compliance, I may be charged inspection fees.

I have read, understand, and will adhere to all the above acknowledgments.

[Signature]
 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



52

25

OAKLAND AVE

Entrance

STools to make

Display
4 stools

BAR

BAR

display

Liquor storage
2000

garbage under bar
BAR

DOOR
DOOR

Liquor storage
Liquor storage

(HALL)

Liquor storage
under
BAR

Women
Men

HALLWAY

garbage under sinks (MEN)

Men
4 Stalls
3 Stalls
4 Sinks

Women
7 Stalls
4 Sinks

Rest room

Don't know where entrance

DAVIDS RESTAURANT

28556 North OAKLAND
1/25/23

(9912 SITE)

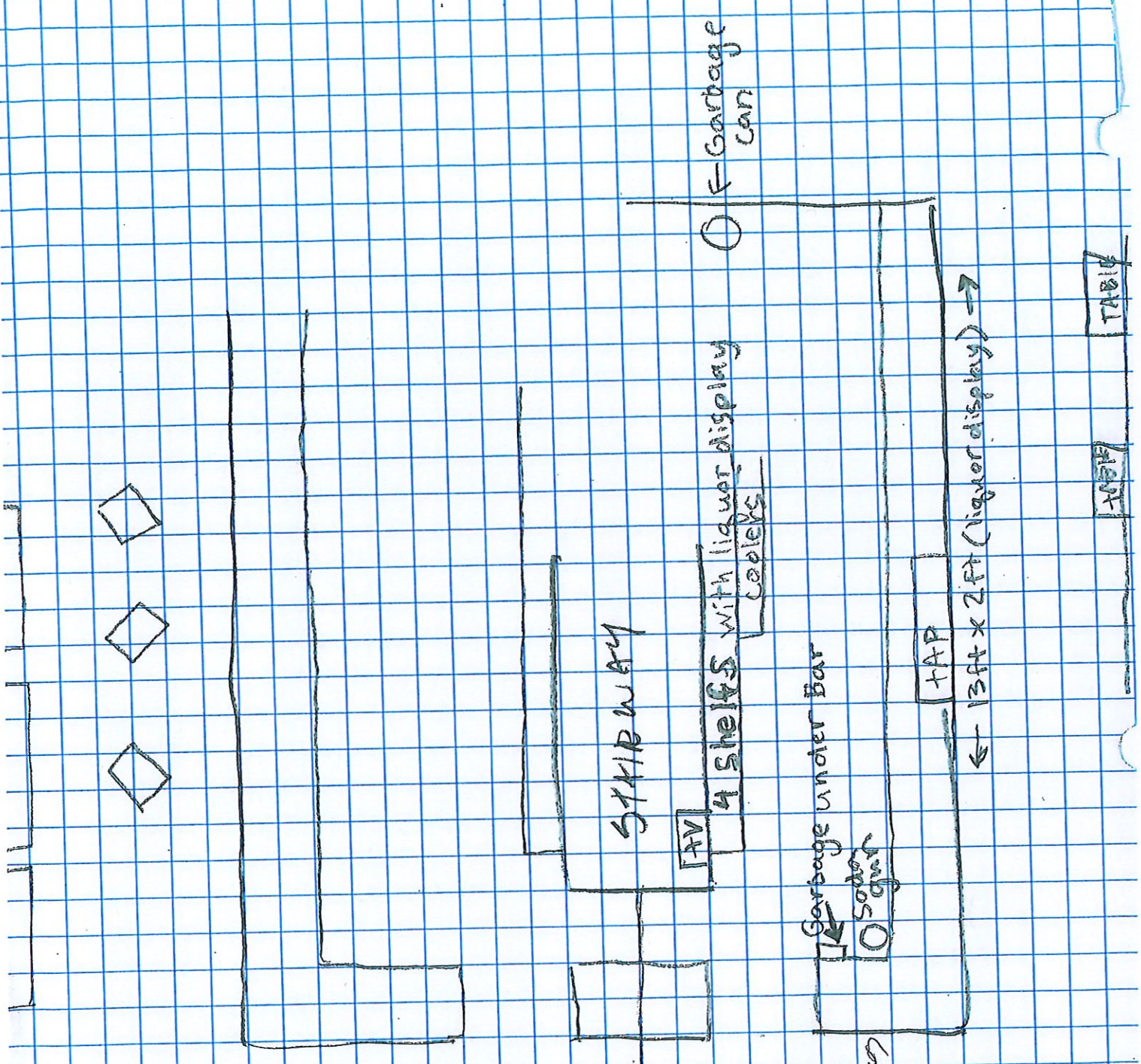
BACK
BAR

EXIT

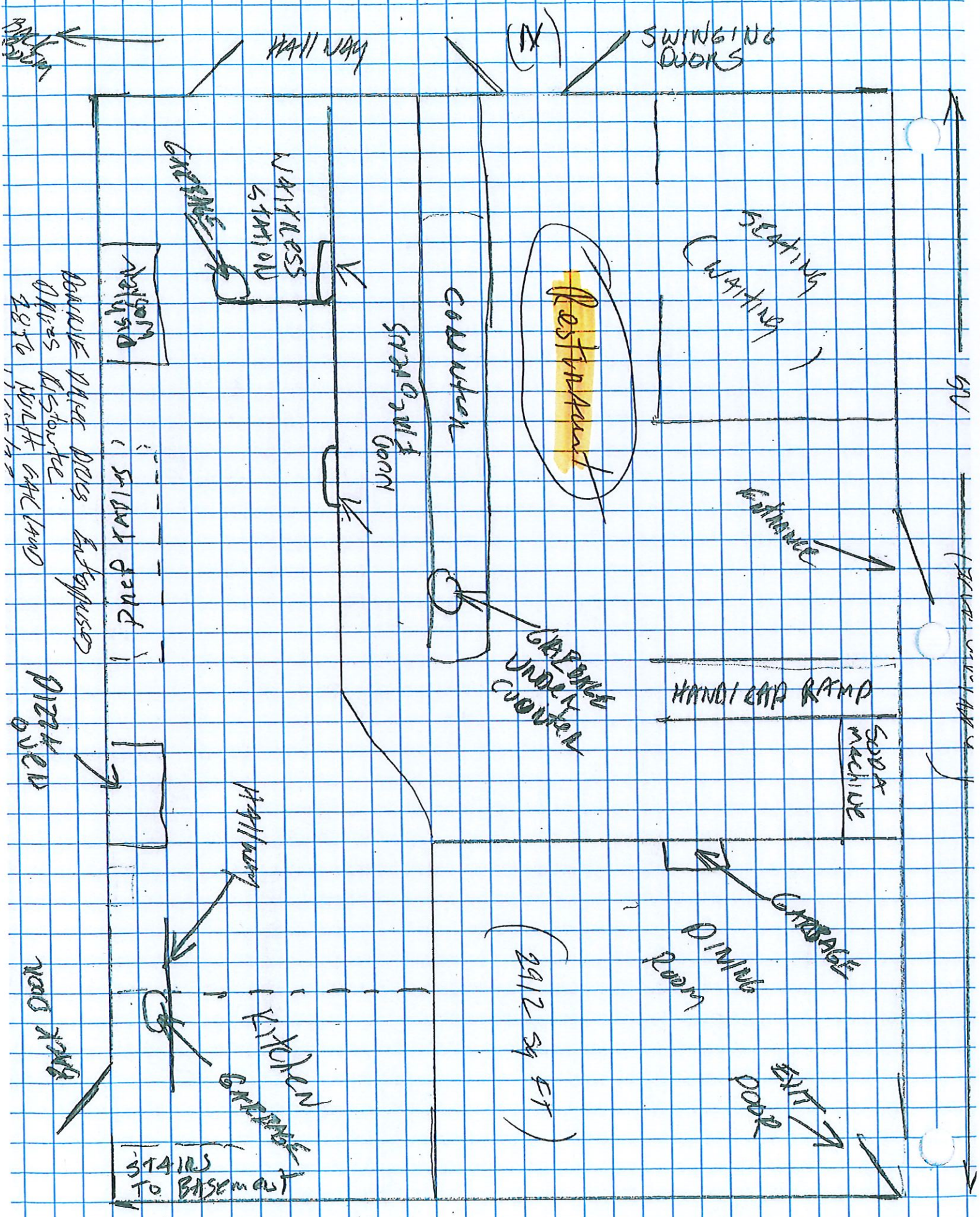
N

EXPANDED VERSION OF BNR

7000 Sq Ft
 @ 760.00



OWNER: ONES - ESTABLISHMENT
 ONES RESTAURANT / BEVERAGE PUB
 7856 NORTH SAKLAWAY
 1/23/25



ALLEY

EXIT

Dumpster

125

EXIT

Liquor Storage

Display

CRISPER

Liquor Storage

TABLE

DOWNR DRIVES DRIVES ENTERPRISES LLC

DRIVES LI STORAGE

2856 NORTH OAKLAND

1/25/23

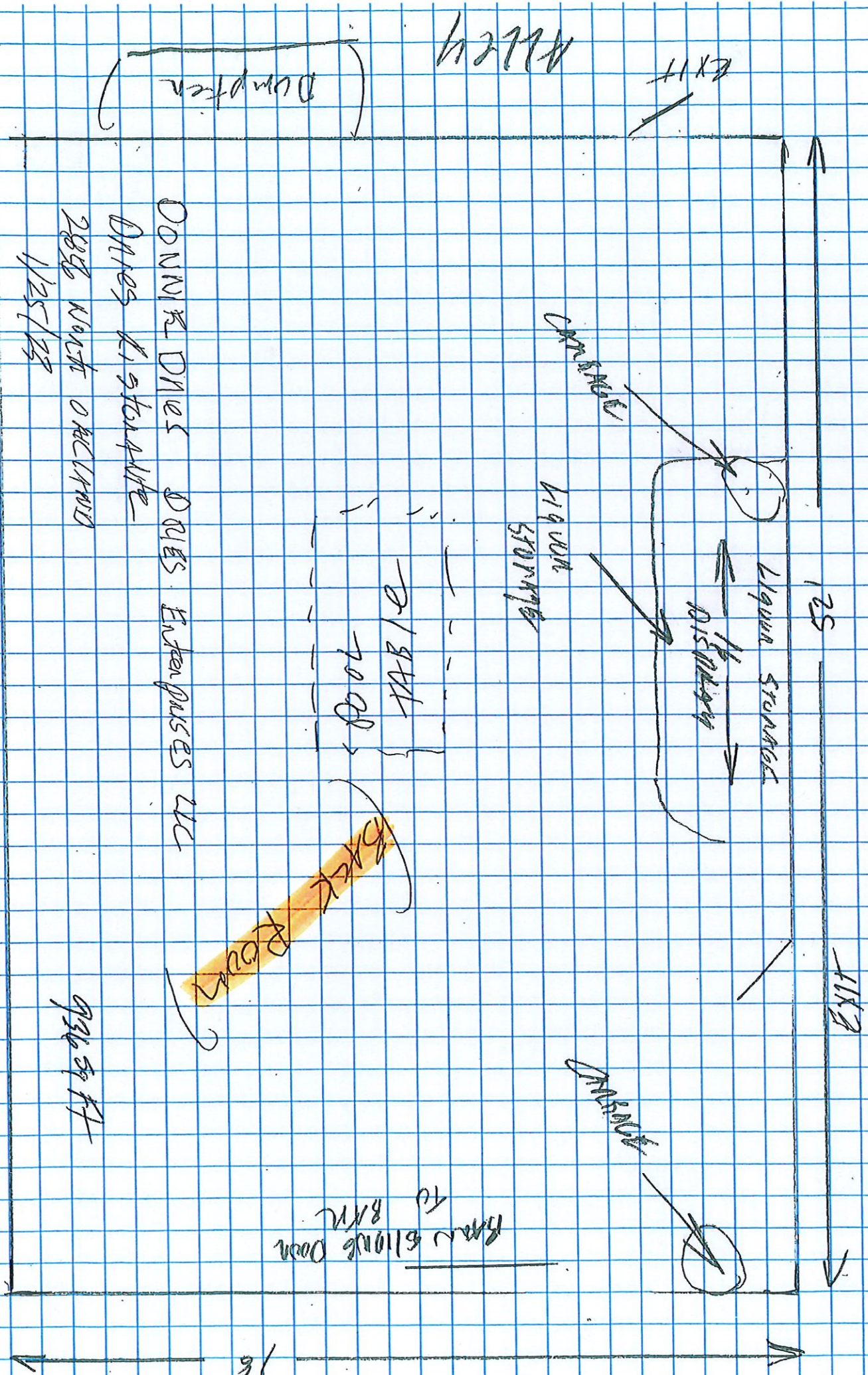
BACK ROOM

936 sq ft

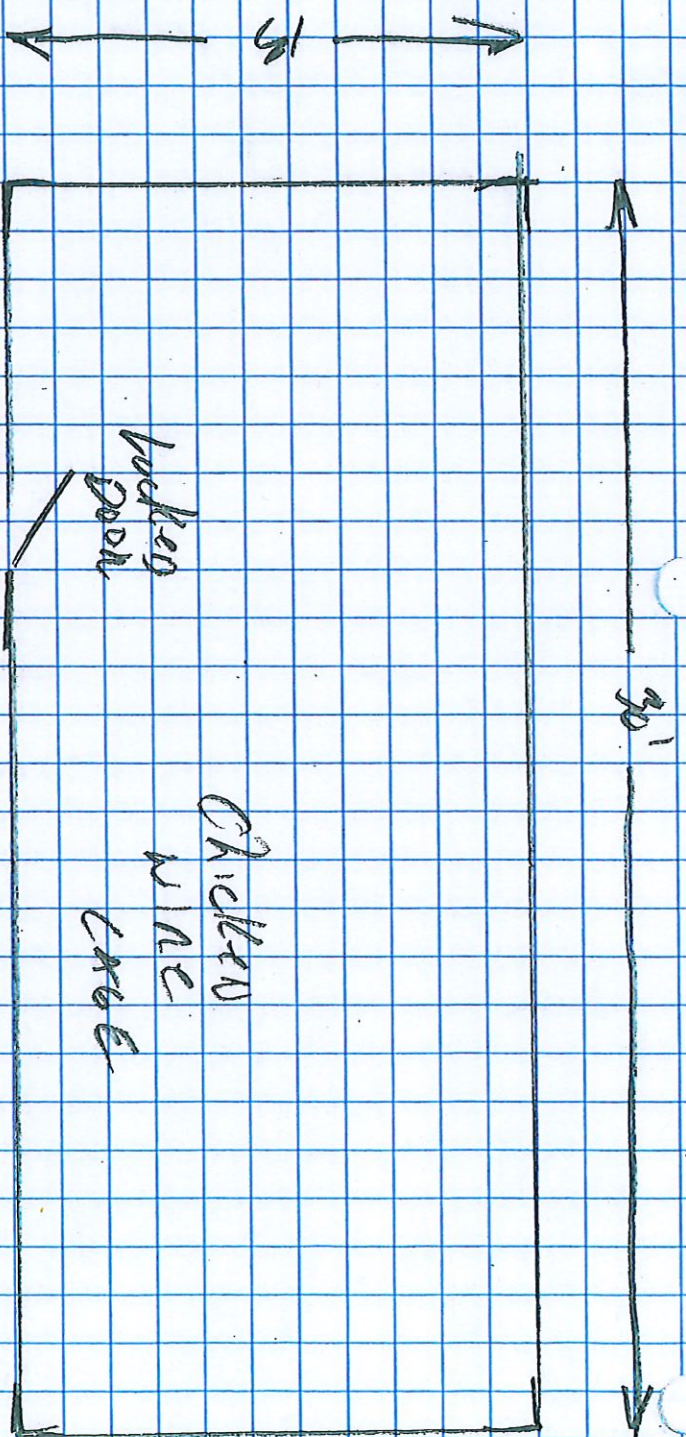
DRINKS

FRONT SLIDING DOOR TO B/RM

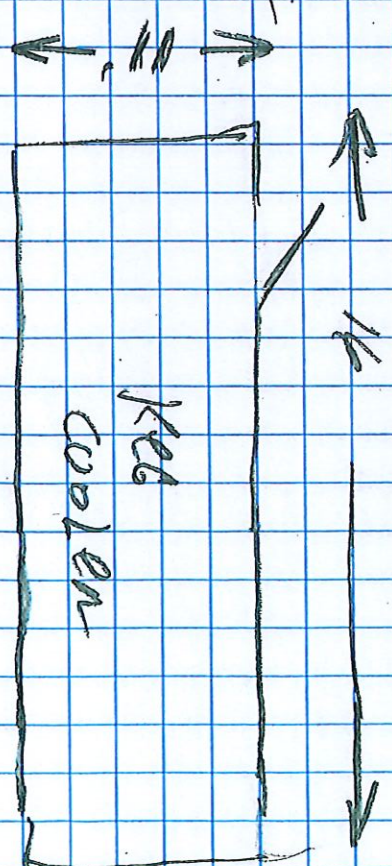
16



BASEMENT STORAGE



STAIRWAY
TO BASEMENT



DYNOLIK DRIVES DRIVES ENTERPRISES LLC
DRIVES KISTBAUER
DRIVES NORTH OAKLAND
1/25/23

Entree's

Lasagna

Spaghetti (with MB or Sausage)

Chicken Parmesan

Eggplant Parmesan

Pasta Primavera

Meat loaf & Mashed potatoes

Homemade Stew

Desserts

Cannolis

Zeppoles

Tiramisu

Fried ice cream (Vanilla, chocolate)

⊖ Appetizers

chicken fingers

Nachos (4)

Potato skins

Chicken wings (4)

Mozzarella sticks

Jalapeño poppers

Fried mushrooms

⊖ Garlic Bread w/without cheese

Parmesan fries

SOUPS

chicken Noodle

Minestrone

Italian wedding

⊖

Salads

Caprese

Anti-Pasta

Chef Salad

tuna Salad

Caesar Salad

grilled chicken

turkey

Gorgonzola

PIZZA

12" 14" 18"

Ingredients

Meatball, Sausage, Ham, Bacon,
Salami, Capicola, Chicken, pepperoni,
Anchovies

Roasted Red Peppers, Jalapenos, onion,
green pepper, mushrooms, banana peppers,
ardecchoke hearts, Spinach, broccolli,
fresh tomato's, pineapple, black olives,

Feta, Mozzarella, Cheddar, Parmesan

Strombolis
Calzones

Sub's

Hot

Meatball

Sausage

chicken Parmesan

Steak and cheese

veggie

Cold

tuna

turkey

Italian

Ham and cheese

Salami and cheese

Roast Beef

Veggie

B.L.T.