

MILWAUKEE POLICE DEPARTMENT LICENSE REPORT DATE OF FILING 09/06/2007

LICENSE TYPE BTAVN LICENSE NUMBER 13972 NEW RENEWAL OTHER X WARD 06
ADD'L INFO: TRANSFER PER 90-10 (PARTNER DECEASED)
AMUSE PHONO DANCE POOL
APPLICANT GREENLEE, MARY B PARTNER:
ADDRESS: 4547 N 21ST ST ADDRESS:
CITY: MILWAUKEE CITY:
STATE: WI ZIP: 53209 STATE: ZIP:
PHONE: (414)449-4969 DOB: 04/24/1930 PHONE: DOB:
MAIDEN/OTHER:
BUSINESS: TAP WHATEVER PARTNER2
ADDRESS: 3716 N DR M L KING, JR DR ADDRESS:
CITY: MILWAUKEE CITY:
STATE: WI ZIP: 53206 STATE: ZIP:
PHONE: (414)562-0900 PHONE: DOB:
SPOUSE: DOB:
DOES APPLICANT HAVE INTEREST IN ANY OTHER CLASS 'A'/'B'/'C' PREMISES? N Y (Explain)
LENGTH OF RESIDENCE AT ABOVE: IN STATE: PREVIOUS ADDRESS:
CORPORATION NAME:

STATE OF INCORPORATION: DATE OF INCORPORATION:

CORPORATE OFFICERS:

NAME: ADDRESS: ZIP: DOB:
ADDRESS: CITY: PHONE: OFFICE:
CITY: STATE: DOB:
PHONE: OFFICE: ZIP: DOB:

NAME: ADDRESS: ZIP: DOB:
ADDRESS: CITY: PHONE: OFFICE:
CITY: STATE: DOB:
PHONE: OFFICE: ZIP: DOB:

*** POLICE USE ONLY *** PREVIOUS PREMISES RECORD: N Y
HAS APPLICANT BEEN DENIED A LICENSE IN THE PAST YEAR: N Y

PROOF OF LEASE/OWNERSHIP/OFFER TO BUY: N Y N/A
DOES APPLICANT HOLD ANY OTHER CITY LICENSES: N Y TYPE AND NUMBER:

A-NUMBER: CHECKED WITH ID DIVISION: N Y
ADDITIONAL INFORMATION:

INVESTIGATING OFFICER: *PLA* REVIEWED BY *Ca*
DATE: DATE:

SEP 07 2007 SEP 11 2007

MILWAUKEE POLICE DEPARTMENT
LICENSE INVESTIGATION UNIT

CRIMINAL RECORD/ORDINANCE VIOLATION/INCIDENTS
SYNOPSIS

DATE: 09/07/07

LICENSE TYPE: BTAVN

NEW:

RENEWAL: X

No. 13972

Application Date: 09/06/07

Expiration Date:

License Location: 3716 N Dr MLK Jr Drive

Aldermanic District:06

Business Name: Tap Whatever

Licensee/Applicant: Greenlee, Mary B

(Last Name, First Name, MI)

Date of Birth: 12/18/37 & 04/24/25

Male:

Female: X

Home Address: 1930 W Fairmount Ave & 4547 N 21st Street

City: Milwaukee

State: Wi

Zip Code: 53209 & 53206

Home Phone: (414) 352-5828

This report is written by Police Officer Kristyn Kukowski, assigned to the License Investigation Unit, Days.

The Milwaukee Police Department's investigation regarding this application revealed the following:

The Milwaukee Police Department's investigation regarding this application revealed the following:

- 1) On Saturday, 12/10/94 at 11:55PM Officers conducted a tavern check at the Tap Whatever located at 3716 N. Dr. Martin Luther King Jr. Dr. Upon entering the tavern Officers found two underage persons sitting at the bar. Upon interviewing the bartender Mary Greenlee they found that they were having a birthday party and the underage persons were guests. The licensee was co-operative. No citations were issued, and the licensee was warned.
- 2) On 08/23/95 undercover Officers were observing patrons inside the Tap whatever located at 3716 N. Dr. Martin Luther King Jr. Dr. The patrons were playing a video poker machine. Patrons would accumulate credits, and then the licensee Mary B. Greenlee would pay the patrons cash for the points accumulated. A license check revealed over 1000 pull tabs from New Orleans and all related licenses for the pool table, phonograph, and amusement machine were not current.

As to Licensee / partner (Mary B. Greenlee)

Charge: Ct. 1 Amusement Machine License required
Ct. 2 Phonograph License required
Ct. 3 Pool table License required
Ct. 4 Display of License required

Continued on Page 2

Finding: Ct. 1 Dismissed without prejudice
Ct. 2 Dismissed without prejudice
Ct. 3 Dismissed without prejudice
Ct. 4 Guilty
Sentence: Ct. 4 Fined \$150.00
Date: All Cts. 11/13/95
Case # Ct. 1 95092380
Ct. 2 95092381
Ct. 3 95092382
Ct. 4 95092384

As to Licensee / partner (Jean Britton)

Charge: Ct. 1 Amusement Machine License required
Ct. 2 Phonograph License required
Ct. 3 Pool table License required
Ct. 4 Display of License required
Finding: Ct. 1 Dismissed without prejudice
Ct. 2 Dismissed without prejudice
Ct. 3 Dismissed without prejudice
Ct. 4 Guilty
Sentence: Ct. 4 Fined \$150.00
Date All Cts. 11/13/95
Case # Ct. 1 95092359
Ct. 2 95092356
Ct. 3 95092358
Ct. 4 95092360

Both parties were taken to the District Attorneys Office regarding Commercial Gambling. The charges were not issued on 09/04/95.

3) INCIDENT: On 10/20/99 at 12:06AM Officers were dispatched to Mt. Sinai Hospital to investigate a substantial battery complaint. Investigation revealed that at about 10:00PM on 10/19/99 the victim was at the Tap Whatever located at 3716 N. Dr. Martin Luther King Jr. Dr. with a motorcycle group know as the second page. While in the tavern he was confronted by the motorcycle group known as the Hell Lovers. A fight broke out, and he was struck numerous times by a subject with brass knuckles. The victim was treated for a laceration to the back of his head requiring five stitches, and he lost consciousness. He was admitted into the hospital at 11:23PM on 10/19/99. Criminal Complaint filed.

4) On 06/14/00 at 12:51AM Officers were dispatched to a shooting at the Tap Whatever located at 3716 N. Dr. Martin Luther King Jr. Dr. Investigation revealed two victims of an armed robbery were in the tavern. The two subjects observed what they believed to be the suspect in that robbery. Both men opened fire on that person striking him approximately 8 times causing his death. Records indicate that Mary Greenley reported the shooting to Police. The dispatching record reflects that Ms. Greenley reported "Someone just shot in the bar. Refused Medical attention, states that she doesn't know of anyone that is hurt. Criminal Complaint Filed.

Continued on Page 3

5) On 06/07/00 at 1:29AM Officers investigated a report of a shooting which occurred at the Tap Whatever located at 3716 N. Dr. Martin Luther King, Jr. Dr. The victim Terrance Wholf, who was 19 years old and being treated at St. Mary's Hospital, related that he and his cousin Torance Jackson, who was 21 years old got into an argument with two patrons in the bar. The argument turned into a fight, which progressed into an armed robbery, and substantial Battery. Investigation revealed that there was in fact no shooting. The underage person was issued a citation for presence of underage person.

As to Licensee (Mary Greenley)

Charge: Presence of Underage Person (Licensee Responsibility)
Finding: Not Issued
Date: 06/28/00
Citation # 5654314-1

NOTE: On 10/23/00 the items listed above was heard by the Utilities and Licenses committee for revocation proceedings, which were dismissed.

6) On 5-5-01, at 1:49AM, officers were dispatched to a shooting at 3716 N Martin Luther King, Jr Drive. On arrival they discovered there was a confirmed shooting which occurred immediately outside the tavern. While investigating the shooting, the officers discovered there was an underage person inside the bar when it occurred. Underage person and tavern owner issued citations for Underage Person.

Mary B Greenlee was issued:

Charge : Presence of Minor Prohibited
Finding : Guilty
Sentence : Fined \$346.00
Date : 6-21-01
Case : 01052558
Citation : 57083423

The underage person was issued:

Charge : Presence of Minor Prohibited
Finding : Guilty
Sentence : Fined \$346.00
Date : 6-21-01
Case : 01052538

7) On 10-27-02, at 2:08am, officers were dispatched to shots fired at 3722 N 7th Street. Upon arrival, the officer observed 15-20 people standing around a victim, Reginald T Morgan. Morgan was shot and lying on the sidewalk at the address 3720 N DR M L King, Jr Drive. Fire Department Med Unit arrived on the scene to provide medical attention. The scene was safeguarded, and upon my investigation there were altercations with several unknown actors inside the address of 3716 N Dr M L King, Jr Drive, Tap Whatever, and upon going outside numerous shots were fired that resulted in five victims being shot. REPORTS FILED Homicide

Continued on Page 4

8. On 2-13-2006 at 1:42am, Milwaukee police were sent to a shooting, victim laying in the street, at N 7th & Keefe St. The officers could not locate anyone at that location. They then checked the Tap Whatever at 3716 N Dr Martin Luther King, Jr. Dr. and found a male with a gunshot wound to his head, laying next to a vehicle. Investigation showed that an argument began in the tavern between the victim and another male. The suspect left the tavern, got a rifle and returned to the tavern. The victim left the tavern and ran to his car with the suspect following him. After they both left the tavern other patrons heard some shots fired. The licensee was on the premise when the suspect entered the tavern with the rifle in plain view and after gunshots were heard, and did not call the police.

9. On 12-20-06 at 6:45 pm, Milwaukee Police were dispatched to 3716 N MLK Jr Drive for a Battery complaint. Investigation revealed two patrons began to physically fight in the tavern. Police were called and the one of the parties that was fighting spoke to police with the other one leaving before officers arrived. She stated she had a confrontation with a male patron who "got in her face" and they began to physically fight. Officers spoke to the bartender, identified as Angela Britton, who was intoxicated. Britton's speech was slurred and she needed to steady herself by leaning on the bar. Britton had stated that a confrontation between two patrons took place inside the bar. When asked to clarify what confrontation meant, Britton got close to the officer and began talking loudly into his face. This officer could smell a strong odor of alcoholic beverage as she talked. The officer asked Britton to step back and Britton stated " I'm going to show you what confrontation is about." Britton was not able to provide any additional information regarding this incident.

=====
10. On 03/24/07 at 2:49 am, Milwaukee Police were dispatched to 3716 N MLK Drive for a shots fired complaint. Investigation revealed that shots were fired in front of the Tap Whatever bar and police were able to recover several casings. A witness told police he heard numerous shots fired by the Tap Whatever bar and observed a female holding her stomach asking for help. This witness further stated that two males in auto drove up to her and placed her in the car and drove off. He believe that there were four vehicles involved in the shots being fired. Police checked area hospitals for a shooting victim but none was found.

11. On 05/20/2007 at 1:45am, squads were dispatched to a shots fired complaint at 3716 N Martin Luther King Jr Drive. Upon arrival, spoke to the owner Mary B GREENLEE B/F (04/24/1930) of Tap Whatever Bar who stated she was cleaning up the bar after the patrons had left and heard 13 -20 gun shots being fired off in front of her bar. GREENLEE did not observe anyone and is not sure if they were customers or not. Squads recovered several casings that were placed on inventory.

12. On 06/13/07 at 10:31 am, Milwaukee Police were dispatched to St Mary's for a Battery complaint. Investigation revealed that the victim had been inside Tap Whatever drinking a beer with an unknown female when several males approached him and asked him for five dollars. The victim stated he didn't have five dollars and the suspects began striking the victim in the head stating to him that he did. The victim fled the tavern and was treated for pain and swelling to the head and face.

3716 N. Dr. ML King Jr. Dr.

RETAIL LICENSE TRANSFER - PERSON TO PERSON

Wisconsin Department of Revenue
Alcohol & Tobacco Enforcement

APPLICATION FOR TRANSFER OF LICENSE UNDER SECTION 125.04(12)(b), WIS STATS., FOR THE SALE OF FERMENTED MALT BEVERAGES OR INTOXICATING LIQUOR OR BOTH FROM ONE PERSON TO ANOTHER DURING THE LICENSE YEAR ONLY, UNDER THE FOLLOWING CIRCUMSTANCES:

1. Death of licensee
2. Formal bankruptcy (Chapter 7)
3. Assignment for the benefit of creditors
4. Foreclosure

To the (City Council) (Village Board) (Town Board) of Milwaukee

County of Milwaukee, Wisconsin. A request is being filed applying for the transfer of the Class

B license from JEAN BRITTON
(Name of Licensee)

- to the:
1. MARY GREENLEE
Personal representative or surviving spouse
 2. _____
Trustee in bankruptcy
 3. _____
Receiver - benefit of creditors
 4. _____
Receiver - court appointed - foreclosure

on or about 9-4-07
(date)

a. Address of premises: 3716 N. MARTIN LUTHER KING DR. MILW, WI 53206

b. Trade name of establishment TAP WHATEVER

The municipal clerk must amend the license or issue a new one to reflect the transfer. The municipality may require completion of Forms AT-106 and AT-103 by the transferee.

SALE OR ASSIGNMENT BY TRANSFEREE:

If the business is sold or assigned, the license may be transferred to the successor owner or assignee at no charge if the person is qualified to hold a license and is acceptable to the governing body. In this case, an original alcohol beverage license application must be completed. FORECLOSURES WOULD NOT COME UNDER THIS PROVISION.

Transfer per 90-10

BTAVN 13285

ORIGINAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk.

For the license period beginning 5/24 ending 20 08

TO THE GOVERNING BODY of the CITY OF MILWAUKEE, MILWAUKEE COUNTY Aldermanic District No. 6

1. The named [X] INDIVIDUAL [] PARTNERSHIP [] LIMITED LIABILITY COMPANY [] CORPORATION [] NONPROFIT ORGANIZATION

hereby makes application for the alcohol beverage license(s) checked above.

2. Name (individual /partners give last name, first, middle; corporations/ limited liability companies give registered name): MARY GREENLEE

An "Auxiliary Questionnaire," Form AT-103, must be completed and attached to this application by each individual applicant, by each member of a partnership, and by each officer, director and agent of a corporation or nonprofit organization, and by each member/manager and agent of a limited liability company. List the name, title, and place of residence for each person.

Table with columns: Title, Name, Home Address, Post Office & Zip Code. Rows for President/Member, Vice President/Member, Secretary/Member, Treasurer/Member, Agent, Directors/Managers.

3. Trade Name: TAP WHATEVER Business Phone Number: 414-562-0900
4. Address of Premises: 3716 N. MARTIN LUTHER KING Post Office & Zip Code: MILW, WI 53206

- 5. Is individual, partners or agents of corporation/ limited liability company subject to completion of the responsible beverage server training course for this license period? [] Yes [X] No
6. Is the applicant an employe or agent of, or acting on behalf of anyone except the named applicant? [] Yes [X] No
7. Does any other alcohol beverage retail licensee or wholesale permittee have any interest in or control of this business? [] Yes [X] No
8. (a) Corporate/limited liability company applicants only: insert state and date of registration.
(b) Is applicant corporation/limited liability company a subsidiary of any other corporation or limited liability company? [] Yes [] No
(c) Does the corporation, or any officer, director, stockholder or agent or limited liability company, or any member/manager or agent hold any interest in any other alcohol beverage license or permit in Wisconsin? [] Yes [] No

9. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for sales, service, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) 1st floor & basement storage

- 10. Legal description (omit if street address is given above):
11. (a) Was this premises licensed for the sale of liquor or beer during this past license year? [X] Yes [] No
(b) If yes, under what name was license issued?
12. Does the applicant understand a Special Occupational Tax must be paid to the Federal Bureau of Alcohol, Tobacco and Firearms before beginning business? [X] Yes [] No
13. Does the applicant understand a Wisconsin Seller's Permit must be applied for and issued in the same name as that shown in Section 2, above? [(608) 266-2776] [X] Yes [] No
14. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? [] Yes [X] No

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signers. Signers agree to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants and each member of a partnership applicant must sign; corporate officer(s), members/managers of Limited Liability Companies must sign.) Any lack of access to any portion of a licensed premises during inspection will be deemed a refusal to permit inspection. Such refusal is a misdemeanor and grounds for revocation of this license.

SUBSCRIBED AND SWORN TO BEFORE ME This 5 day of September 20 07

Cynthia Nelson (Clerk/Notary Public)

Mary Greenlee (Officer of Corporation/Member/Manager of Limited Liability Company/Partner/Individual)

My Commission Expires 10-01-09

(Officer of Corporation/Member/Manager of Limited Liability Company/Partner)

(Additional Partner(s)/Member/Manager of Limited Liability Company if Any)

TO BE COMPLETED BY CLERK: Table with columns: Date received and filed with municipal clerk (9/6/07), License number issued (13972), Date license granted.



Plan of Operation Supplement for Retail Alcohol Beverage License Application

OFFICE OF THE CITY CLERK LICENSE DIVISION
 200 E. WELLS ST. ROOM 105, MILWAUKEE, WI 53202
 (414) 286-2238 EMAIL: LICENSE@MILWAUKEE.GOV

Your application will be returned for failure to fill out this form completely and correctly, and submit the required documents. This may result in a late fee and a lapse in your license for renewal applicants.

Check Type of License Applied for: <input type="checkbox"/> Class A <input checked="" type="checkbox"/> Class B <input type="checkbox"/> Class C	
Check Box in this section that applies to your ownership structure:	
<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Limited Liability Company <input type="checkbox"/> Non Profit Organization	
Full Legal Name of Individual, Partner(s) or Agent: <p style="text-align: center; font-size: 1.2em;">MARY GREENLEE</p>	
Individual, Partner(s) or Agent: List other names by which you have been known on official records:	
Name of Corporation, Limited Liability Company or Non Profit Organization:	
State where Corporation, Limited Liability Company or Non Profit Organization was formed:	
Year Corporation or Limited Liability Company was formed:	
<i>*Please note: No license may be issued to a corporation or limited liability company that has not registered with the Wisconsin Department of Financial Institutions.</i>	
Address of Premises: <p style="font-size: 1.1em;">3716 N. MARTIN LUTHER KING DR</p>	Business Telephone Number: <p style="font-size: 1.1em;">414-562-0900</p>
Business Mailing Address - if different from address of premises (include City, State, Zip Code):	
Business Internet/E-mail Address:	Business Fax Number:
Property Owner's Name: <p style="font-size: 1.1em;">MARKSENA PEAY</p>	Property Owner's Phone Number: <p style="font-size: 1.1em;">414-228-1151</p>
Property Owner's Address (include City, State, Zip Code):	
Are you taking out this application for anyone that may not be eligible for a license? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
If yes, list name and address:	
Will you be conducting the day-to-day operations of the business? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
If no, list name and address of person who will: _____	
Class B Applicants: If you will not be conducting the day-to-day operations of the business, the person listed above must obtain a Class B Manager's license.	
Does anyone else have money invested or any other interest in this business? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
If yes, explain:	
Have you made an agreement with anyone to repay any loan or any other payments based upon income from the business? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
If so, list name and address:	

HOURS OF OPERATION FOR ALCOHOL BEVERAGE SALES/SERVICE ONLY

Examples:	Current Days and Hours of Operation:	Proposed Days and Hours of Operation: If same as current, write "same"	Number of Customers expected each day
Sunday Open: 8:00 AM Monday Close: 2:00 AM	2:00 PM - 2:00 AM	SAME	30
Monday: Closed	2:00 PM - 2:00 AM	SAME	45
Tues. Open: 9:00 AM Tues. Close: 9:00 PM	2:00 PM - 2:00 AM	SAME	50
Wed. Open: 6:00 AM Thurs. Close: 1:00 AM	2:00 PM - 2:00 AM	SAME	35
Thurs. Open: 6:00 AM Friday Close: 2:00 AM	2:00 PM - 2:00 AM	SAME	60 & 75
Friday Open: 9:00 AM Sat. Close: 2:30 AM	2:00 PM - 2:00 AM	SAME	50 & 70
Saturday Open: Noon Sunday Close: 2:30 AM	2:00 PM - 2:00 AM	SAME	45 & 50

Prohibited Hours of Operation:
 Class A: 9:00 PM to 8:00 AM
 Class B/C: Monday thru Friday 2:00 AM – 6:00 AM
 Class B/C: Saturday thru Sunday 2:30 AM – 6:00 AM

Legal Capacity/Occupancy of Premises:
 (does not include Class A)

80

Call (414) 286-8211 if you have questions.

Number of Parking Spaces on the Premises:
 (do not include street parking)

0

What are your plans to maintain an orderly appearance and operation of the premises with respect to:
 LITTER: ALWAYS KEEPING PREMISES CLEAN + NEAT

What are your plans to maintain an orderly appearance and operation of the premises with respect to:
 NOISE: MUSIC IS TURNED DOWN TO A RESPECTABLE LEVEL

Are any other types of businesses currently conducted at this location? (i.e. grocery store, restaurant, art gallery, gas station, convenience store) Yes No If yes, explain:

Do you have any future plans for other businesses at this location? Yes No
 If yes, explain:

Are any other types of licenses or permits currently issued at this location (i.e. cigarettes, food)?
 Yes No If yes, explain:

Do you have any future plans for other licenses or permits at this location? Yes No
 If yes, explain:

Is the building less than 300 feet from a church, school or hospital? Yes No

Detailed Floor Plan

- A detailed floor plan must be included with each alcohol beverage application.
- The floor plan must be filed on 8 ½ x 11 inch sized paper.
- A separate sheet of paper must be filed for each floor included in the premises description.
- A separate floor plan is required for the basement - even if it is used only for storage.

The floor plan must include all of the following items:

- Dimensions of the premise and total square feet (length x width = square feet)
- Label locations of all entrances and exits
- Label locations of all seating areas, bars, and food preparation areas (Class B and C applicants only)
- Label locations of all alcohol beverage storage areas (coolers, etc.) and provide dimensions of all alcohol beverage storage areas (length x width)
- Label locations of all alcohol beverage display areas (behind the bar, shelves, etc.) and provide dimensions of all alcohol beverage display areas (length x width)
- Label locations of all outdoor areas used for the sale or service of alcohol beverages and provide dimensions of all outdoor areas used for the sale or service of alcohol beverages (length x width)
- Label locations of all parking areas on the premises (do not include street parking) and provide dimensions of all parking areas available on the premises (length x width). The parking area(s) should be marked on the floor plan for the first floor showing the relation to the building.
- Mark the North point (N ↑) on each page
- Date each page of the floor plan
- Write the legal entity name (and agent's name if a corporation or LLC), trade name and address on each page (see sample)

PLEASE NOTE:

**** All applications submitted without the detailed floor plan (including all items required) will be returned, and may be subject to a late fee and a lapse in the operation of the business.**

**** A sample floor plan is available online at www.milwaukee.gov/license.
Handwritten plans are acceptable. Plans do not need to be architectural drawings.
Plans need not be to scale.**

Subscribed and sworn to before me

this 5 day of September, 2007

Cynthia Nelson

Notary Public, State of Wisconsin

My commission expires: 11-01-09

Mary Greenlee
Signature of Individual/Partner/Officer/Member

Signature of Partner/Officer/Member

Warning: Penalty provided for submitting false statements and affidavits with this application.
(Section 90-5(2), Milwaukee Code of Ordinances.)

Any applications filed without all of the required items and/or notarized signatures will be returned. This may result in a late fee and a lapse in your license for renewal applicants.

NEW/TRANSFER APPLICANTS ONLY

Do you own or lease the building? Check one: Own Lease

Who owns the fixtures (ie. Coolers, etc.)? MARKSENA PEAY

If you are purchasing the stock and/or fixtures, what did you pay for them? _____

Total Amount Paid for the Business: \$ _____

Amount Paid for the 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.

Have you made arrangements with the seller for payment of the personal property taxes?

Yes No

IF YOU LEASE THE BUILDING, ANSWER THE FOLLOWING QUESTIONS:

Is the lease verbal or written?

Date lease begins: JUNE 1 Expires: JUNE 30

Monthly rental: \$ 1200.00

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

Does your lease allow for the assignment to another party without the consent of the owner?

Yes No

For what length of time have you been guaranteed occupancy? (number of years) _____

In addition to paying monthly rental, will you have to pay anything additional to the owner of the building to guarantee performance of the lease? Yes No

If yes, explain: _____

Does the present owner or occupant object to the granting of your license? Yes No

If yes, explain: _____

Subscribed and sworn to before me

this 5 day of September, 2007

Cynthia Nelson

Notary Public, State of Wisconsin

My commission expires: 11-01-09

Notary Seal must be affixed

Mary Greenlee
Signature of Individual/Partner/Officer/Member

Signature of Partner/Officer/Member

Warning: Penalty provided for submitting false statements and affidavits with this application.
(Section 90-5(2), Milwaukee Code of Ordinances.)

Any applications filed without all of the requirements and/or signatures will be returned.

TRANSFER OF ALCOHOL BEVERAGE RELATED LICENSES APPLICATION



**Section 90-10 transfers and change of Agent - NO FEE REQUIRED*

Business Name: TAP WHATEVER

Transfer from (premises transfers only): JEAN BRITTON

Transfer to (premises transfers only): MARY GREENLEE

Check one of the following: Individual Partnership Corporation or Limited Liability Company

Full Name of Corporation or LLC:

Individual, Partner(s), or Agent of Corporation/LLC:

Full Name: MARY GREENLEE Phone Number: 414-449-4969

Home Address: 4547 N. 21ST MILWAUKEE, WI Zip Code: 53209 Date of Birth: 4-24-30

Check Licenses You Are Applying For:	Premises Transfers Only - List Your Fees:	Check Licenses You Are Applying For:	Premises Transfers Only - List Your Fees:
<input type="checkbox"/> Amusement/Cabaret \$100.00 * - \$		<input checked="" type="checkbox"/> Cigarette & Tobacco License \$100.00 * - \$	Method of Disbursement: <input checked="" type="checkbox"/> Over the Counter or <input type="checkbox"/> Vending Machine
<input checked="" type="checkbox"/> Dance License \$30.00 * - \$		<input checked="" type="checkbox"/> Pool Tables - How many <u>1</u> ?	(Pool Tables free on all transfers)
<input type="checkbox"/> Instrumental Music License \$25.00 * - \$		<input type="checkbox"/> Record Spin - No Dancing \$40.00 *	Includes DJ/Karaoke/CD Players - \$
<input type="checkbox"/> Billiard Hall (3 or more tables) \$30.00 * - \$		<input checked="" type="checkbox"/> Phonograph/Jukebox Premises \$16.00 * - \$	
<input type="checkbox"/> Bowling Alley(s) How Many <u> </u> ? x \$25.00 each * - \$		<input checked="" type="checkbox"/> Amusement Game Premises \$20.00 * - \$	(5 machines or less)
<input type="checkbox"/> Video Game Center License \$450.00 * - \$ (6 machines or more)			
Total of Column A: \$		Total of Column B: \$	

Please make check payable to City of Milwaukee

Total of Column A: \$ _____

Total of Column B: \$ _____

Total: \$ _____

The undersigned agrees to inform the City Clerk within ten days of any substantial changes in the information supplied in this application. The undersigned shall not willfully refuse to provide those services offered under this license, permit, or franchise, or refuse to employ, or discharge any person otherwise qualified because of race, color, creed, sex, national origin or ancestry; and 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 the license applied for herein, and being duly sworn under oath, depose and say that I am the person named above and that all statements made in the foregoing application are true and correct.

SUBSCRIBED AND SWORN TO BEFORE ME THIS 5 day of September 2007

Cynthia Nelson
Notary Public, State of Wisconsin

Mary Greenlee
Signature of Individual/Partner/Officer/Member

My Commission expires 11-01-09 (Notary Seal must be affixed)

OFFICE USE ONLY

INITIALS GW License# 13972 FILED 9/10/07 AD# 10 TAG# _____

ANY PRIMARY LICENSE, LIST TYPE AND NUMBER _____