



CITY OF MILWAUKEE
OFFICE OF THE CITY CLERK

Thursday, October 29, 2020

COMMITTEE MEETING NOTICE

AD 14

GRAVES, Christopher M, Agent
Bad Moon Saloon LLC
2725 S FULTON St

Milwaukee, WI 53207

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

Tuesday, November 10, 2020 at 11:15 AM

Regarding: Your Class B Tavern and Public Entertainment Premises License Applications Requesting Jukebox and 1 Pinball Machine as agent for "Bad Moon Saloon LLC" for "Bad Moon Saloon" at 4035 S CLEMENT Av.

This meeting will be held via GoToMeeting. Please see the enclosed best practices document for further instructions. The access code is <https://global.gotomeeting.com/join/560140757>. If you wish to call in, please call **+1 (571) 317-3122** and use Access Code: 560-140-757.

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

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

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

JIM OWCZARSKI, CITY CLERK

BY:

Jessica Celella
License Division Manager

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

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

Becker, Keren

From: Byrd, Yashica
Sent: Wednesday, October 7, 2020 1:50 PM
To: Becker, Keren
Cc: Celella, Jessica
Subject: FW: Bad Moon Saloon

Follow Up Flag: Follow up
Flag Status: Flagged

REDACTED RECORD

Keren,

Can you add?

Thanks,



Yashica Byrd
License Division Assistant Manager
200 E Wells St Room 105, Milwaukee, WI 53202
(414)286-2238



From: Williams, Terri
Sent: Wednesday, October 7, 2020 11:49 AM
To: Celella, Jessica; Dimitrijevic, Marina; Byrd, Yashica
Cc: Kristin Graves
Subject: Re: Bad Moon Saloon

Thanks! Our notices about a new applicant just hit mailboxes of neighbors. I received a call yesterday from the next door neighbor who wished to register his objection to the application.

concerns due to the prior bar having bright signs, lights, alleged unlicensed improvements and noise. He felt the bar disregarded neighbors' quality of life. Being newer to this office, I don't have more to go on than his statements. His are the only complaints our office has received on the location so far.

When I advised him earlier this summer that the owner may be selling, he conveyed some relief and expressed that he would be amenable to change in operator. I believe his concerns will be alleviated by some outreach from the applicants, so I'm including them on this correspondence so they can contact him to discuss their vision and his concerns as they move forward.

It is my understanding per the Alderwoman that the applicants will advertise and host a neighborhood meeting with residents nearby prior to our hearing notices being sent out that request testimony. We plan to attend this to support neighbor/operator communication.

Sincerely,

Terri Williams

Legislative Assistant
Milwaukee Common Council
Alderwoman Marina Dimitrijevic | 14th District
200 East Wells Street
Milwaukee, WI 53202
414.286.2873 | fax 414.286.3456
Terri.Williams@milwaukee.gov

From: Celella, Jessica <Jessica.Celella@milwaukee.gov>
Sent: Wednesday, October 7, 2020 11:17:45 AM
To: Dimitrijevic, Marina <Marina@milwaukee.gov>; Byrd, Yashica <Yashica.Byrd@milwaukee.gov>
Cc: Williams, Terri <Terri.Williams@milwaukee.gov>; Kristin Graves <kristin.ms.graves@gmail.com>
Subject: Re: Bad Moon Saloon

This application was processed 9/30 and a member of our team let them know of each step that needs to be completed before the application can be certified for scheduling. It likely will not be ready for this cycle.

Jessica Celella
Deputy City Clerk
200 E Wells St Room 105, Milwaukee, WI 53202
(414) 286-2362



From: Dimitrijevic, Marina <Marina@milwaukee.gov>
Sent: Wednesday, October 7, 2020 11:15 AM
To: Byrd, Yashica <Yashica.Byrd@milwaukee.gov>; Celella, Jessica <Jessica.Celella@milwaukee.gov>
Cc: Williams, Terri <Terri.Williams@milwaukee.gov>; Kristin Graves <kristin.ms.graves@gmail.com>
Subject: Fwd: Bad Moon Saloon

Please connect with them regarding scheduling.

Please consider using our Click for Action
online system to report city service requests:
https://itmdapps.milwaukee.gov/XY_ESR/ReportProblem.jsp



Marina Dimitrijevic
Alderwoman | 14th District
p: [\(414\) 286-3769](tel:4142863769)
e: marina@milwaukee.gov
[200 E Wells Street, Room 205](https://www.milwaukee.gov/district14)
[Milwaukee, WI 53202](https://www.milwaukee.gov/district14)
[milwaukee.gov/district14](https://www.milwaukee.gov/district14)

Begin forwarded message:

From: "Dimitrijevic, Marina" <Marina@milwaukee.gov>
Date: September 22, 2020 at 10:29:30 AM CDT
To: Chris Graves <chris@fasteddyco.com>
Cc: Kristin Graves <kristin.ms.graves@gmail.com>, "Williams, Terri" <Terri.Williams@milwaukee.gov>
Subject: Re: Bad Moon Saloon

Thank you-

We will set up a time for next week for a virtual or phone call.



Marina Dimitrijevic

Alderwoman | 14th District
p: [\(414\) 286-3769](tel:4142863769)
e: marina@milwaukee.gov
200 E Wells Street, Room 205
Milwaukee, WI 53202
[milwaukee.gov/district14](https://www.milwaukee.gov/district14)

From: Chris Graves <chris@fasteddyco.com>
Sent: Friday, September 11, 2020 1:40 PM
To: Dimitrijevic, Marina <Marina@milwaukee.gov>
Cc: Kristin Graves <kristin.ms.graves@gmail.com>
Subject: Bad Moon Saloon

Hi Marina,

My name is Chris Graves, and also copied is my wife Kristin. We're very excited to speak with you about opening a new bar in Milwaukee.

The property is at 4035 S. Clement Ave., and is currently called "Mark's Sports Pub". We are purchasing the property from Mark, and we are renaming the bar "Bad Moon Saloon".

With the hope of communicating to you a "feel" for what this bar is intended to be like, and what the business is all about, Kristin put together the attached business overview document. Please take a look when you get a chance.

We're currently in the process of finalizing our application paperwork for the various licenses, and we hope to submit these by early next week. Following the submission, we have our fingers crossed that we will be able to grab a spot at an upcoming License Committee meeting. We know the chances are slim of making the 9/29 meeting, but we hope at worst-case we can make it into the 10/20 meeting.

Thanks very much for your time! We look forward to working with you and to making this bar a reality. Please don't hesitate to call if you have any questions. My cell is 801-580-5315.

Chris Graves

Owner

Fast Eddy Co

Cell: 801.580.5315

Email: chris@fasteddyco.com



Date: 10/13/2020
Officer: PO Fabian Garcia

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

Name of Premise: Bad Moon Saloon
Address: 4035 S. Clement Avenue
Phone: 801-580-5315

Owner: Mark A. SCHWEBKE (Current)
Owner address: 4665 S. 110th Street
City State Zip: Greenfield, WI 53228
Owner Phone: 414-803-7138
Owner email:

Licensee/Agent: Christopher Graves
Home Address: 2725 S. Fulton Street
City State Zip: Milwaukee, WI 53207
Phone: 801-580-5315
Email: fasteddyco@gmail.com

Preferred contact: cell-801-580-5315

Location currently open: YES NO

Projected open date:

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

Hours of Operation: Sun: 10:00a-12a 24 hours Y N
Mon: 1:00p-12:30a
Tue: 1:00p-12:30a
Wed: 1:00p-12:30a
Thu: 1:00p-12:30a
Fri: 1:00p-2:00am
Sat: 1:00p-2:00a

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 **Unable to view**
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: **3**
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: **Will upgrade, planning 6 month storage**
21. Are there exterior cameras Yes No How many: **3 and 2 inside garage**
22. Are there interior cameras Yes No How many: **8**

23. Do all employees know how to retrieve recorded digital images/footage? Yes No
 24. Cameras located in parking lot Yes No How many 1

Interior Survey:

25. What is the planned capacity 99 interior/240 whole premise
 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
 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: 1
 34. How will they be deployed: Interior 1 Exterior
 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 report was written by Police Officer Fabian Garcia assigned to District Six-Early Power, Squad 6264, Community Liaison Officer/Community Prosecution Unit.

On Tuesday, October 13, 2020, at 5 pm, I went to the location of 4035 S. Clement Avenue, to meet Christopher Graves regarding a Crime Prevention Survey. Also present was Mr. Mark A. Schwebke (w/m, 07/08/54), current owner of the property. Schwebke stated he will be selling his property to Christopher Graves.

Mr. Graves stated he has been in contact with the Alderwoman in regard to the bar and has introduced himself to surrounding neighbors of the bar as well. There are currently approximately 16 cameras installed and are in working condition. Mr. Graves plans on upgrading the cameras system to motion cameras and to have a storage capacity of six months. There are cameras within the bar which face different angles to include the entrance and exits. There is a monitor screen near the bar, which employees can view the cameras as they are working. The interior/exterior of the bar appeared to be clean and well kept.

Located in the basement are two lockable rooms to include the office space. There are also two additional cameras located within the basement. Just to the west of the property is the open patio which is secured by a locked gate. The parking lot is located on the north side of the property and had two exterior lights, which are located on the north side of the building. I was unable to see if this lighting was adequate for the parking lot at this time. There is one camera mounted on the garage, which faces east towards the parking lot.

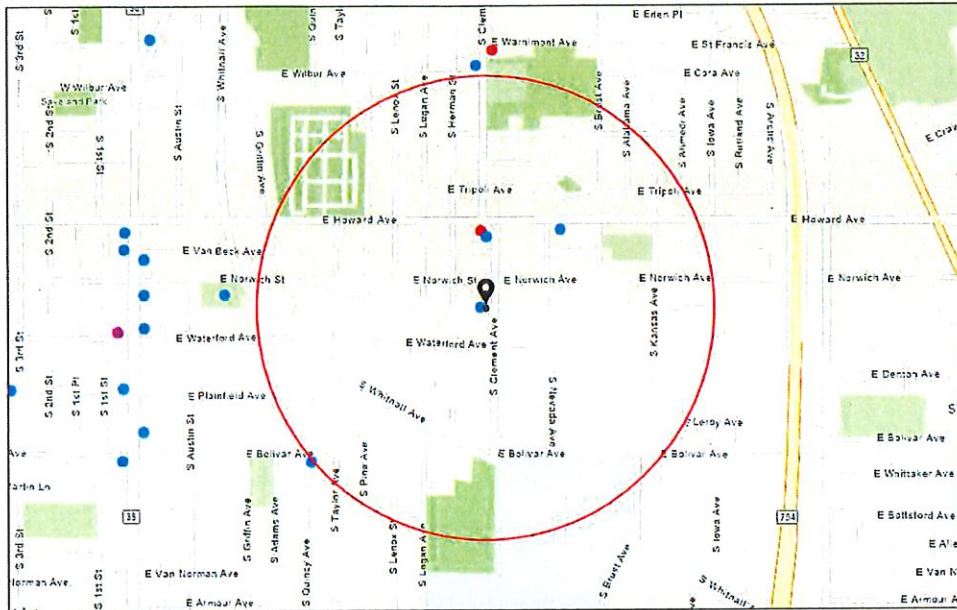
Graves stated he is planning on having 1 security guard in place on busy days such as Fridays and Sundays near the front door. Graves stated he will be posting the non-emergency number near the bar for his employees.

City of Milwaukee Concentration Map

4035 S Clement Av

Area : 21,862,585.72 ft²

Oct 19 2020 15:19:37 Central Daylight Time



- Alcohol Licenses
- Class A Intoxicating Liquor
 - Class A Liquor and Malt
 - Class B Tavern

1:18,056
0 0.1 0.2 0.4 mi
0 0.17 0.35 0.7 km
Source: Esri, HERE, DeLorme, Mapbox, NOAA, USGS, © OpenStreetMap

Summary

Name	Count	Area(ft ²)	Length(mi)
Food Licenses	3		
Alcohol Licenses	4		

Food Licenses

#	Legal entity	Trade name	Licensee	Address	License type name	Total capacity	Expiration date	Count
1	Botanas II LLC	Botanas II	MARTHA Navejar, Agt	1421 E Howard AV	Public Entertainment Premises License		2/8/2021, 6:00 PM	1
2	TIEDKE, INC	SCOTTY'S BAR & PIZZA	GARY A TIEDKE, Agt	3921 S CLEMENT AV	Public Entertainment Premises License		11/26/2020, 6:00 PM	1
3	DRINKMASTERS, INC	MARK'S SPORTS PUB	MARK A SCHWEBKE, Agt	4035 S CLEMENT AV	Public Entertainment Premises License		6/29/2021, 7:00 PM	1

Alcohol Licenses

#	Legal Entity	Trade Name	Licensee	Address	License Type Name	Total Capacity	Expiration Date	Count
1	TIEDKE, INC	SCOTTY'S BAR & PIZZA	GARY A TIEDKE, Agt	3921 S CLEMENT AV	Class B Tavern License	99	11/26/2020, 6:00 PM	1
2	KAINTH, INC	KAINTH BEER & LIQUOR	GURNEK SINGH, Agt	1141 E HOWARD AV	Class A Malt & Class A Liquor License		2/25/2021, 6:00 PM	1
3	Botanas II LLC	Botanas II	MARTHA Navejar, Agt	1421 E Howard AV	Class B Tavern License	360	2/8/2021, 6:00 PM	1
4	DRINKMASTERS, INC	MARK'S SPORTS PUB	MARK A SCHWEBKE, Agt	4035 S CLEMENT AV	Class B Tavern License	156	6/29/2021, 7:00 PM	1

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



Thursday, October 29, 2020

Licenses Committee Notice of Hearing

DRINKMASTERS INC
4665 S 110th St
Greenfield, WI 53228

The Licenses Committee will consider the following license application:

Class B Tavern and Public Entertainment Premises License Applications
Requesting Jukebox and 1 Pinball Machine
GRAVES, Christopher M, Agent
Bad Moon Saloon at 4035 S CLEMENT Av

Date: 11/10/2020

Time: 11:15 AM

Location: The hearing before the Licenses Committee will take place virtually on Tuesday, November 10, 2020. This is a public hearing. Those wishing to view the proceeding are able to do so via the City Channel – Channel 25 on Spectrum Cable – or on the Internet at <http://city.milwaukee.gov/citychannel>. Those wishing to provide oral testimony will be asked to do so by phone or internet and are asked to contact the staff assistant, Molly Kuether-Steele at (414) 286-2775 or molly.kuether-steele@milwaukee.gov for necessary information. Please make such requests no later than one business day prior to the start of the meeting. You are not required to attend the hearing, but please see the information below if you would like to provide testimony.

Please note this application may be recommended for denial based on fitness of the location due to concentration of alcohol beverage outlets in the area. If the application is denied for this reason, no other application for an alcohol beverage license for this location shall be recommended for approval by the Licenses Committee within three years of the date of denial unless the applicant has demonstrated a change of circumstances since the prior denial.



Thursday, October 29, 2020

Licenses Committee Notice of Hearing

Chris Graves
2725 S Fulton St
Milwaukee, WI 53207

The Licenses Committee will consider the following license application:

Class B Tavern and Public Entertainment Premises License Applications
Requesting Jukebox and 1 Pinball Machine
GRAVES, Christopher M, Agent
Bad Moon Saloon at 4035 S CLEMENT Av

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Please note this application may be recommended for denial based on fitness of the location due to concentration of alcohol beverage outlets in the area. If the application is denied for this reason, no other application for an alcohol beverage license for this location shall be recommended for approval by the Licenses Committee within three years of the date of denial unless the applicant has demonstrated a change of circumstances since the prior denial.



Thursday, October 29, 2020



Notice of Public Hearing

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notice

GRAVES, Christopher M, Agent
Bad Moon Saloon at 4035 S CLEMENT Av
Class B Tavern and Public Entertainment Premises License Applications Requesting Jukebox and
1 Pinball Machine

Tuesday, November 10, 2020 at 11:15 AM

To whom it may concern:

The above application has been made by the above named applicant(s). This requires approval from the Licenses Committee and the Common Council of the City of Milwaukee. The hearing before the Licenses Committee will take place virtually on 11/10/2020 at 11:15 AM. This is a public hearing. Those wishing to view the proceeding are able to do so via the City Channel – Channel 25 on Spectrum Cable – or on the Internet at <http://city.milwaukee.gov/citychannel>. Those wishing to provide oral testimony will be asked to do so by phone or internet and are asked to contact the staff assistant, Molly Kuether-Steele at (414) 286-2775 or molly.kuether-steele@milwaukee.gov for necessary information. Please make such requests no later than one business day prior to the start of the meeting. You are not required to attend the hearing, but please see the information below if you would like to provide testimony. Once the Licenses Committee makes its recommendation, this recommendation is forwarded to the full Common Council for approval at its next regularly scheduled hearing.

Important details for those wishing to provide information for the Licenses Committee to consider when making its recommendation:

1. The license application is scheduled to be heard at the above time. Due to other hearings running longer than scheduled, you may have to wait some time to provide your testimony.
2. You must testify as to matters that you have personally experienced or seen. (You cannot provide testimony for your neighbor, parent or anyone else; this is considered hearsay and cannot be considered by the committee.)
3. No letters or petitions can be accepted by the committee (unless the person who wrote the letter or the persons who signed the petition are willing to testify).
4. Persons opposed to the license application are given the opportunity to testify first; supporters may testify after the opponents have finished.
5. When you are called to testify, you will be sworn in and asked to give your name, and address. (If your first and/or last names are uncommon please spell them.)
6. You may then provide testimony.
 - a. Include only information relating to the above license application.
 - b. Include only information you have personally witnessed or seen.
 - c. Provide concise and relevant information detailing how this business has affected or may affect the peaceful enjoyment of your neighborhood.
 - d. If by the time you have the opportunity to testify, the information you wish to share has already been provided to the committee, you may state that you agree with the previous testimony. Redundant or repetitive testimony will not assist the committee in making its recommendation.
7. After giving your testimony, the members of the Licenses Committee and the licensee may ask questions regarding the testimony you have given or other factors relating to the license application.
8. Business Competition is not a valid basis for denial or non-renewal of a license.

Please Note: If you have submitted an objection to the above application your objection cannot be considered by the committee unless you personally testify at the hearing.

OCCUPANT	MAIL ADDRESS	CITY, STATE ZIP
CURRENT OCCUPANT	4017 S CLEMENT AVE 102	MILWAUKEE, WI 53207
CURRENT OCCUPANT	4017 S CLEMENT AVE 205	MILWAUKEE, WI 53207
CURRENT OCCUPANT	1109 E NORWICH ST	MILWAUKEE, WI 53207
CURRENT OCCUPANT	1002 E WATERFORD AVE	MILWAUKEE, WI 53207
CURRENT OCCUPANT	1006 E WATERFORD AVE	MILWAUKEE, WI 53207
CURRENT OCCUPANT	1018 E WATERFORD AVE	MILWAUKEE, WI 53207
CURRENT OCCUPANT	1024 E WATERFORD AVE	MILWAUKEE, WI 53207
CURRENT OCCUPANT	4026 S HERMAN ST	MILWAUKEE, WI 53207
CURRENT OCCUPANT	4017 S CLEMENT AVE 104	MILWAUKEE, WI 53207
CURRENT OCCUPANT	1105 E NORWICH ST	MILWAUKEE, WI 53207
CURRENT OCCUPANT	1016 E WATERFORD AVE	MILWAUKEE, WI 53207
CURRENT OCCUPANT	1050 E WATERFORD AVE	MILWAUKEE, WI 53207
CURRENT OCCUPANT	4034 S HERMAN ST	MILWAUKEE, WI 53207
CURRENT OCCUPANT	4035 S CLEMENT AVE	MILWAUKEE, WI 53207
CURRENT OCCUPANT	4017 S CLEMENT AVE 103	MILWAUKEE, WI 53207
CURRENT OCCUPANT	4017 S CLEMENT AVE 203	MILWAUKEE, WI 53207
CURRENT OCCUPANT	1004 E WATERFORD AVE	MILWAUKEE, WI 53207
CURRENT OCCUPANT	1014 E WATERFORD AVE	MILWAUKEE, WI 53207
CURRENT OCCUPANT	1100 E WATERFORD AVE	MILWAUKEE, WI 53207
CURRENT OCCUPANT	4037 S HERMAN ST	MILWAUKEE, WI 53207
CURRENT OCCUPANT	4017 S CLEMENT AVE 105	MILWAUKEE, WI 53207
CURRENT OCCUPANT	4017 S CLEMENT AVE 201	MILWAUKEE, WI 53207
CURRENT OCCUPANT	4017 S CLEMENT AVE 101	MILWAUKEE, WI 53207
CURRENT OCCUPANT	4015 S HERMAN ST	MILWAUKEE, WI 53207
CURRENT OCCUPANT	4008 S HERMAN ST	MILWAUKEE, WI 53207
CURRENT OCCUPANT	1109A E NORWICH ST	MILWAUKEE, WI 53207
CURRENT OCCUPANT	1125 E NORWICH ST	MILWAUKEE, WI 53207
CURRENT OCCUPANT	1133 E NORWICH ST	MILWAUKEE, WI 53207
CURRENT OCCUPANT	1000 E WATERFORD AVE	MILWAUKEE, WI 53207
CURRENT OCCUPANT	1008 E WATERFORD AVE	MILWAUKEE, WI 53207
CURRENT OCCUPANT	1012 E WATERFORD AVE	MILWAUKEE, WI 53207
CURRENT OCCUPANT	1020 E WATERFORD AVE	MILWAUKEE, WI 53207
CURRENT OCCUPANT	1022 E WATERFORD AVE	MILWAUKEE, WI 53207
CURRENT OCCUPANT	4017 S CLEMENT AVE 202	MILWAUKEE, WI 53207
CURRENT OCCUPANT	4069 S CLEMENT AVE	MILWAUKEE, WI 53207
CURRENT OCCUPANT	1026 E WATERFORD AVE	MILWAUKEE, WI 53207
CURRENT OCCUPANT	4017 S CLEMENT AVE 204	MILWAUKEE, WI 53207
CURRENT OCCUPANT	4001 S CLEMENT AVE	MILWAUKEE, WI 53207
CURRENT OCCUPANT	4020 S HERMAN ST	MILWAUKEE, WI 53207
CURRENT OCCUPANT	4021 S HERMAN ST	MILWAUKEE, WI 53207
CURRENT OCCUPANT	4023 S CLEMENT AVE	MILWAUKEE, WI 53207
CURRENT OCCUPANT	1010 E WATERFORD AVE	MILWAUKEE, WI 53207
CURRENT OCCUPANT	1104 E WATERFORD AVE	MILWAUKEE, WI 53207
blank	notice	

Total Records: 43

Radius: 250.0 feet and Center of Circle: 4035 S Clement Ave



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:

Bad Moon Saloon - a neighborhood bar

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

2. Business Operations

- a. Proposed Opening Date: 1/1/2021
- b. Is this premise under construction? No Yes If yes, list estimated completion date: _____
- c. Is this a franchise? No Yes
- d. Is this premises currently licensed? No Yes If yes, list type of license: Class B Tavern, valid occupancy permit
- 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: Outdoor patio
- b. Number of Garbage Cans: Inside: 6 Locations: 2 bathroom, 2 front, 2 middle
Outside: 8 Locations: 3 on patio, 5 scattered out back
- c. Is a crowd control barrier used? No Yes If yes, describe: Steel fence around back patio
- d. How many restrooms are on the premises? 2
- e. Name of solid waste contractor: Advanced Disposal Waste Management Other: _____

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: E. HOWARD AVE.
- 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: CHRIS GRAVES Phone Number: 801-580-5315
 Building Owner Address: 2725 S FULTON ST. MILWAUKEE, WI 53207 (Home)

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	10:00 AM	12:00 AM	100	25-55	21 + older
Monday	3:00 PM	12:30 AM	85	30-60	21 + older
Tuesday	3:00 PM	12:30 AM	100	30-60	21 + older
Wednesday	3:00 PM	12:30 AM	100	30-60	21 + older
Thursday	3:00 PM	12:30 AM	100	30-60	21 + older
Friday	12:00 PM	2:00 AM	140	21-50	21 + older
Saturday	12:00 PM	2:00 AM	180	21-60	21 + older

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: 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)

Chris Graves
 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



**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: <u>Bad Moon Saloon LLC</u>	
Premise Address: <u>4035 S. Clement Ave. Milwaukee WI 53207</u>	
Proximity of Premises to Church, School, Daycare Center or Hospital	
Is the building within 300 feet of any church, school, daycare center or hospital? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
"Service Bar Only" Designation	
If applying for Class B or C license, are you applying for "Service Bar Only"? <input checked="" type="checkbox"/> No <input type="checkbox"/> 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? <input checked="" type="checkbox"/> No <input type="checkbox"/> 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? <input type="checkbox"/> No <input checked="" type="checkbox"/> 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? <input checked="" type="checkbox"/> No <input type="checkbox"/> 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? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If yes, list name and address: <u>Mark Schwabke, 4665 S. 110th St. Greenfield, WI 53228</u>	
Property Information (New & Transfer Applicants Only)	
a) Do you own or lease the building? <input checked="" type="checkbox"/> Own <input type="checkbox"/> Lease	
b) Who owns the fixtures (for example, coolers, etc.)? <u>Bad Moon Saloon, LLC</u>	
c) Are you purchasing the stock and/or fixtures? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes if yes, amount paid \$ <u>Included in purchase of</u>	
d) Total amount paid for business <u>\$ 325,000.00</u> entire property at <u>\$ 325,000.00</u>	
e) Total amount paid for goodwill of the business <u>\$ N/A</u>	
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? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	
Lease Information (New & Transfer Applicants who are leasing the premises only)	
a) Date lease begins _____ Ends _____	
b) Monthly rental \$ _____	
c) Do you have an option to renew the lease? <input type="checkbox"/> No <input type="checkbox"/> Yes	
d) Does your lease allow for assignment to another party without the consent of the owner? <input type="checkbox"/> No <input type="checkbox"/> Yes	
e) For what length of time have you been guaranteed occupancy (number of years)? _____	

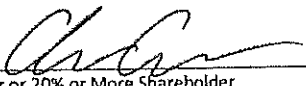
Lease Information (Continued)

- 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 _____
- g) Does the present owner or occupancy 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

Chris Graves 
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: <u>4035 S. Clement Ave, Milwaukee, WI 53207</u>			
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 type="checkbox"/> Amusement Machines How many? _____
<input 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 type="checkbox"/> Disc Jockey	<input type="checkbox"/> Wrestling	<input type="checkbox"/> Theatrical Performances Approx. # per year? _____
<input type="checkbox"/> Pool Tables How many? _____	<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 type="checkbox"/> Karaoke
<input checked="" type="checkbox"/> Other: <u>1 pinball machine, inside</u>			
Entertainment Outdoor Closing Hours: <u>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.</u>			
PROMOTERS/SOUND AMPLIFICATION			
Will promoters ever be used for any of the entertainment? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If Yes, Describe: _____			
At any time will sound amplification be used? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If Yes, Describe: <u>Only for T.V.'s and Juke Box inside the building</u>			
LEGAL CAPACITY OF PREMISES			
<u>99</u> (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.			
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)

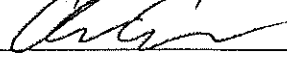


FOOD DEALER LICENSE PLAN OF OPERATION

ccl-foodplan 2/28/19

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:	Bad Moon Saloon LLC
Premises Address:	4035 S. Clement Ave. Milwaukee, WI 53207
SECTION 1 TYPE OF BUSINESS	
<p>What will be the majority of your food sales? (check one)</p> <p><input checked="" type="checkbox"/> 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.</p> <p><input type="checkbox"/> 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.</p> <p>Will it be a convenience store? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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.</p> <p><input type="checkbox"/> Bed & Breakfast <input type="checkbox"/> Micro Market</p> <p>All Applicants: Submit a menu or a list of food items that will be sold.</p>	
<p>Will any wholesale business be done? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, what percentage of food sales will be wholesale?</p> <p><input type="checkbox"/> Less than 25%</p> <p><input type="checkbox"/> 25% or More AND: <input type="checkbox"/> Restaurant items (meals) will be sold -- Complete this application and also contact DATCP. <input type="checkbox"/> NO restaurant items (meals) will be sold - Do NOT complete this application. Contact DATCP only.</p>	
SECTION 2 FOOD PROCESSING	
<p>Will any food processing be done? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>Processing is defined as assembling, grinding, cutting, mixing, baking, coating, stuffing, packing, bottling, grilling, canning, extracting, fermenting, distilling, pickling, freezing, drying, smoking, or packaging.</p>	
SECTION 3 FOOD REQUIRING TEMPERATURE CONTROL	
<p>Will any food that requires temperature control be sold? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (includes dairy products such as milk, cheese, and ice cream, fish, shellfish, meat, poultry)</p> <p>If yes, list the types of food items: <u>Frozen Pizza (pre-packaged)</u></p>	

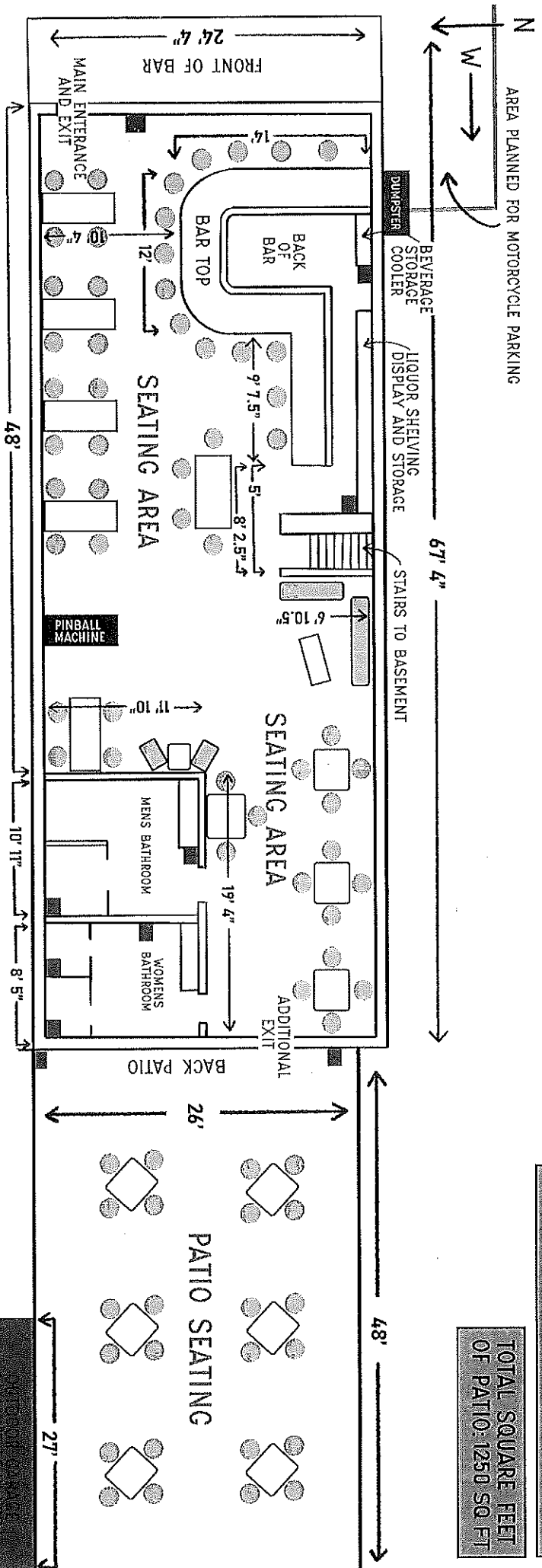
SECTION 4 DETAILS OF OPERATION	
Will you have seating on site for dining?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Will you be doing any catering?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Will you be doing any delivery?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Will you have outdoor activities?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes - Check all that apply: <input checked="" type="checkbox"/> Bar <input type="checkbox"/> Cooking/Grilling <input type="checkbox"/> Dining
Will you have a drive thru window?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes - Are hours different from inside? <input type="checkbox"/> No <input type="checkbox"/> Yes If Yes, provide drive thru hours: _____
Will scales or barcode scanners be used?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes - You must also apply for a Weights & Measures License.
SECTION 5 ADDITIONAL SITES	
Where will food be prepared and/or sold?	
<input checked="" type="checkbox"/> At a single site <input type="checkbox"/> At multiple sites: How many? _____ (for example, a hotel with several dining rooms or bars)	
If multiple sites, attach a Food Dealer Additional Site Addendum (ccl-foodadd) for each additional site.	
SECTION 6 CONSTRUCTION OR CHANGES	
Are you planning any construction, remodeling or equipment changes?	
<input checked="" type="checkbox"/> No If No, SKIP to Section 8	
<input type="checkbox"/> Yes If Yes, check all that apply: <input type="checkbox"/> New construction of a building <input type="checkbox"/> Renovation or remodeling	
<input type="checkbox"/> Construction changes to existing building <input type="checkbox"/> Equipment changes only	
Provide a brief description of the changes: _____	
Start date: _____	
Name, Address & Phone Number of Architect: _____	
Name, Address & Phone Number of Contractor: _____	
SECTION 7 ALCOHOL BEVERAGES	
Are you applying for an alcohol beverage license?	
<input type="checkbox"/> No If No, SKIP to Section 8	
<input checked="" type="checkbox"/> Yes If YES, if your food license is approved prior to the alcohol license, when do you want the food license issued?	
<input type="checkbox"/> Immediately <input checked="" type="checkbox"/> At the same time as the alcohol license	
SECTION 8 ACKNOWLEDGEMENTS & SIGNATURE	
You must initial each item confirming your understanding:	
<u>CG</u>	I understand the Health Department must conduct an inspection and advise the License Division of their approval before the license may be issued.
<u>CG</u>	I understand I must obtain an occupancy permit from the Department of Neighborhood Services and an inspection may be required. Neighborhood Services must advise the License Division of their approval before the license may be issued.
<u>CG</u>	I understand the district alderperson will review and either support or object to my application. If he/she objects, I may appeal and be scheduled to appear before the Licenses Committee. The Licenses Committee will then make a recommendation to the Common Council. The Common Council must grant the license before it may be issued.
<u>CG</u>	I understand proof of payment for all license fees must be on file in the License Division before the license may be issued and the license must be issued and posted in my establishment prior to opening for business.
<u>CG</u>	I will not operate my food business until the license has been issued and posted in the establishment.
Signature of Sole Proprietor, Partner, or 20% Shareholder: <u>Chris Graves</u> 	
Signature of Additional Partner: _____	

LOT LINE

TOTAL SQUARE FEET OF FIRST FLOOR INTERIOR: 1635 SQ. FT.

TOTAL SQUARE FEET OF PATIO: 1250 SQ. FT.

AREA PLANNED FOR MOTORCYCLE PARKING



KEY

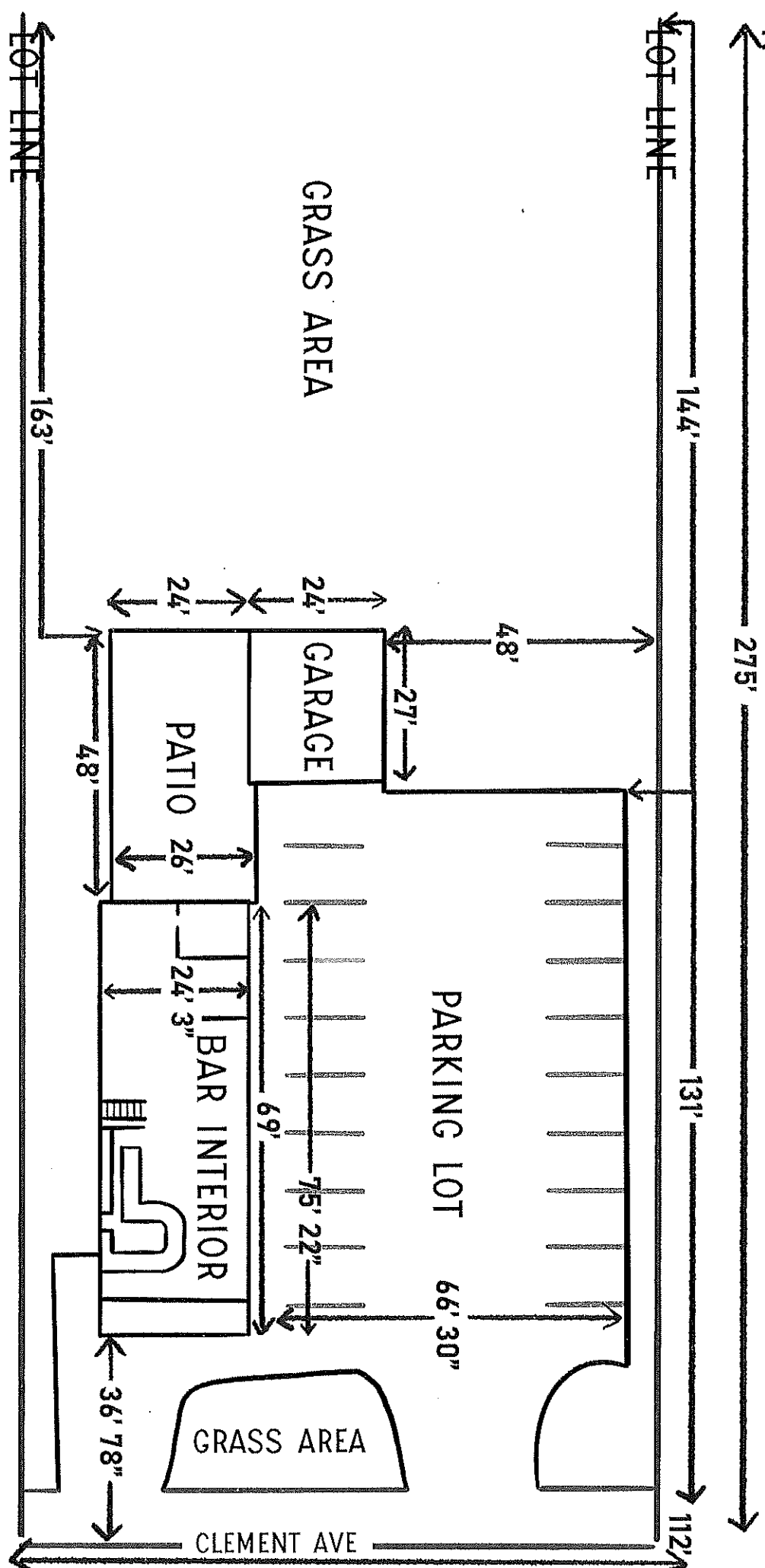
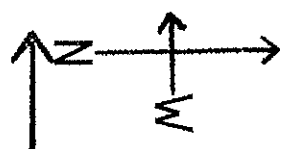
- TABLE
- SOFA
- BAR STOOL
- TRASH CANS

BAD MOON PROPERTIES LLC
INTERIOR FLOOR PLAN FOR BAD MOON SALOON
 4035 S CLEMENT AVE, MILWAUKEE, WI 53207
 SEPTEMBER 8, 2020

CLEMENT AVE

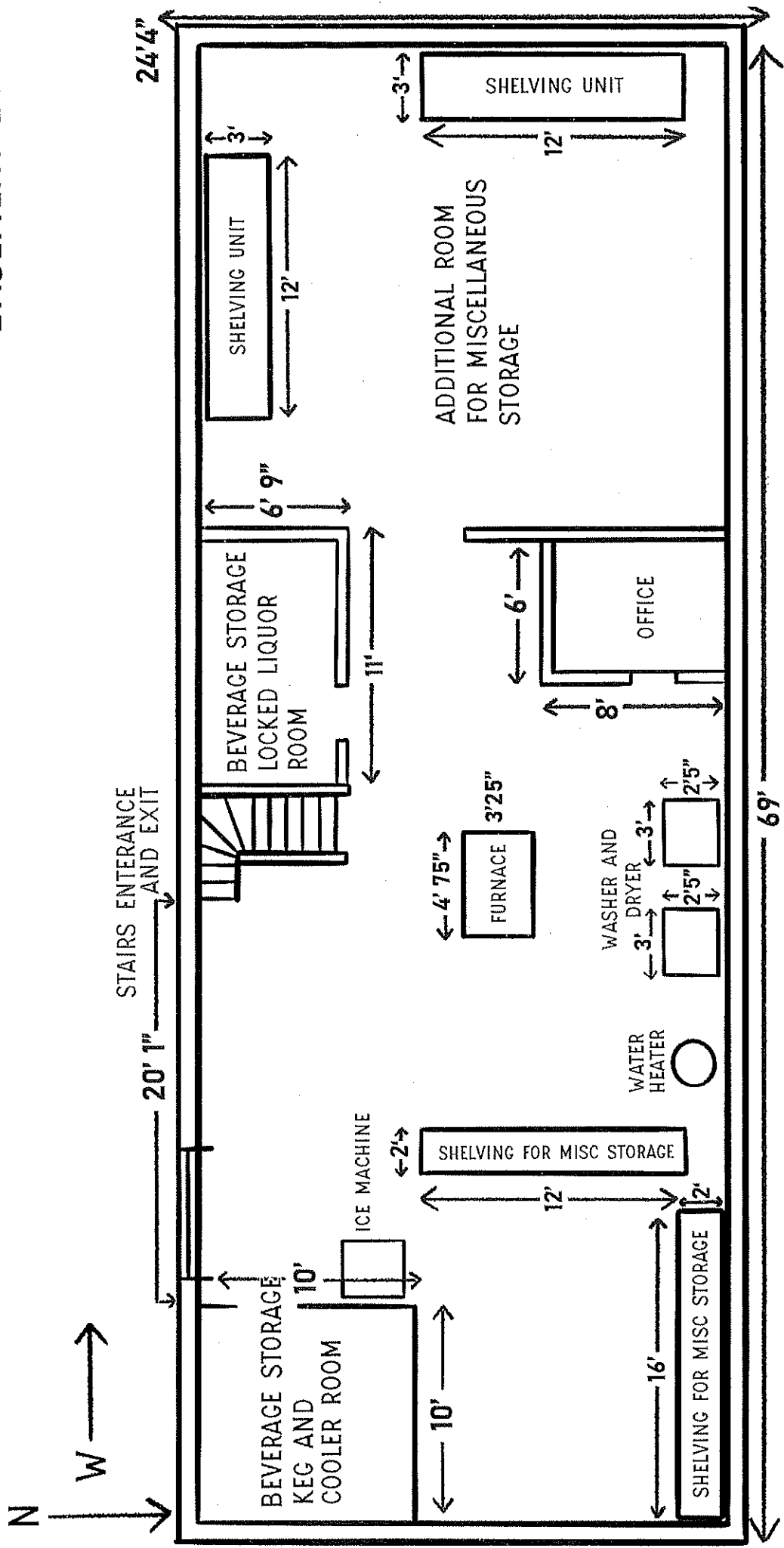
PARKING LOT

TOTAL SQUARE FEET OF PREMISES: 30,800



BAD MOON PROPERTIES LLC
EXTERIOR PROPERTY MAP FOR BAD MOON SALOON
4035 S CLEMENT AVE, MILWAUKEE, WI 53207
SEPTEMBER 8, 2020

BASEMENT LEVEL



BAD MOON PROPERTIES LLC
INTERIOR FLOOR PLAN FOR BAD MOON SALOON
4035 S CLEMENT AVE, MILWAUKEE, WI 53207
SEPTEMBER 8, 2020