

CITY OF MILWAUKEE OFFICE OF THE CITY CLERK

Thursday, September 17, 2020

COMMITTEE MEETING NOTICE

AD 01

CHARNJIT KAUR

1935 W SILVER SPRING DR

Milwaukee, WI 53209

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

Tuesday, September 29, 2020 at 02:40 PM

Regarding:

Your Class A Malt & Class A Liquor, Food Deand Weights & Measures License Applications for "Stark Foods and Liquor IV" at 1935 W SILVER SPR

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/945944877. If you wish to call in, please call https://global.gotomeeting.com/join/945944877. If you wish to call in, please call https://global.gotomeeting.com/join/945944877. If you wish to call in, please call https://global.gotomeeting.com/join/945944877. If you wish to call in, please call https://global.gotomeeting.com/join/945944877.

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



CITY OF MILWAUKEE OFFICE OF THE CITY CLERK

Thursday, September 17, 2020

COMMITTEE MEETING NOTICE

AD 01

CHARNJIT KAUR

W127 N6370 Sumac Ct

Menomonee Falls WI 53051

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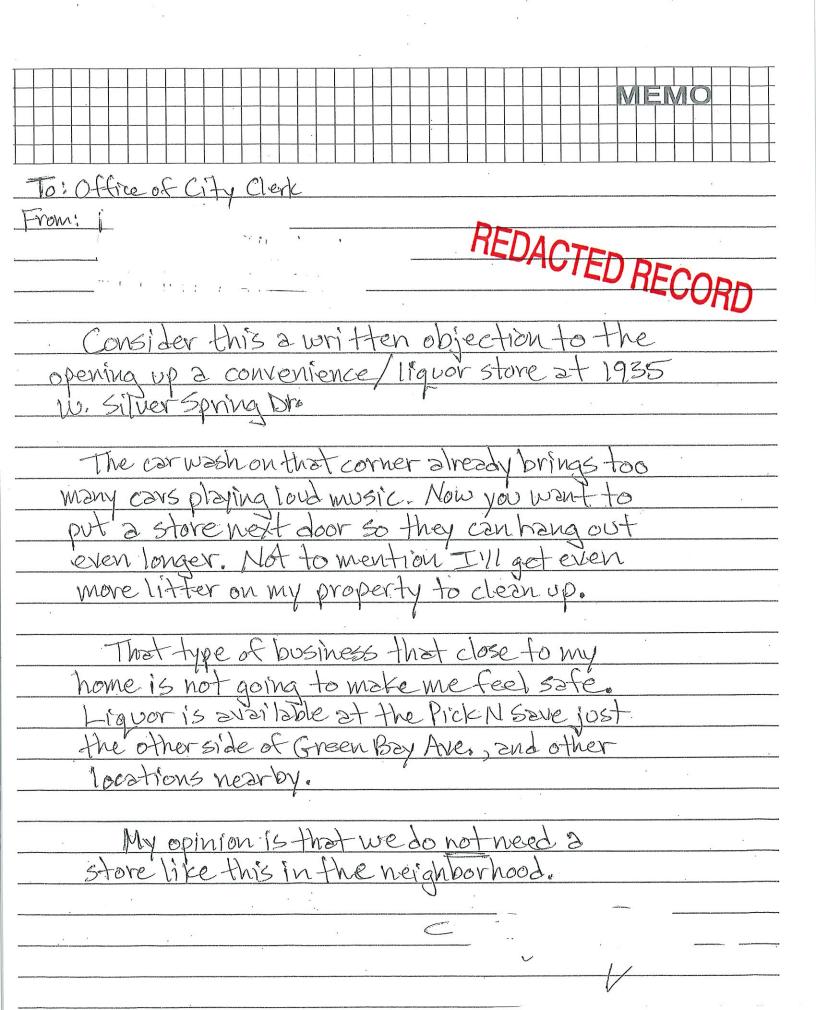
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Jessica Celella License Division Manager

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Date:07/15/20 Officer: T. Geniesse

City of Milwaukee Police Department 90-5-1.5 Crime Prevention Survey Convenience Store/Liquor Store Inspection

Name of Premise: Address: Phone:	Stark Foods and Liquor 1935 W Silver Spring Dr N/A	
Owner: Owner address: City State Zip: Owner Phone: Owner email:	Charnjit Kaur W127N6370 Sumac Ct Menomonee Falls, WI. 53051 414-795-4056 charn1301@yahoo.com	
Manager: Home Address: City State Zip: Phone: Email:	Charnjit Kaur W127N6370 Sumac Ct Menomonee Falls, WI. 53051 414-795-4056 charn1301@yahoo.com	
Preferred contact: Ch	narnjit Kaur	
Location currently of	pen: YES 🖂	NO
Projected open date:	December 1, 2020	
Day's open: S	M 🔲 T 🗌 W 🔲 Th 🗍 F 🔲 SA	⊠ALL
Hours of Operation:	Sun: 8A-9P Mon: 8A-9P Tue: 8A-9P Wed: 8A-9P Thu: 8A-9P Fri: 8A-9P Sat: 8A-9P	□24 hours □Y ☑N
Premise Type:	☐Liquor Store☐Convenience Store☐Other:	

Licenses currently neid:		
Alcohol:	∑Yes	#:
Tobacco:	∑Yes	
Food:	⊠Yes □No #:	
Extended Hours:	☐Yes ⊠No #:	
Secondhand Dealer:	Yes No Type:	#:
Other:	☐Yes ⊠No Type:	#:
Other:	Yes No Type:	#;
	al other liquor stores in t	
Exterior Survey:	at office fiquox stores in a	C
1. Is the area around the	location clean? XVes	$\neg N_0$
	ocation? (Check all the a	
a. Park	Journal Check all the a	KK-17
b. School		
	ton	
c. Youth Cen	IEI.	
d. Church	f C	
	If so, how many	
f. Residentia		
g. Other busin	aesses	
h. Other:		Na Car Car
3. Can you see from the	outside of the location is	nto the interior Yes No
4. Can you see the empl	loyees inside of the locat	ion from the outside \(\sqrt{Yes} \) \(\sqrt{No} \)
	s free of signage XYes	lNo
6. Is there a parking lot		
7. Is the parking lot clea	ın? ⊠Yes ∐No	
8. Is the parking lot wel	l lit? ⊠Yes ⊡No	
Are there areas where	e a person could conceal	themselves Yes No
10. Is there exterior light	ing? ⊠Yes □No. Do	es it appears to be adequate ⊠Yes □No
11. Exterior Payphone?	☐Yes ⊠No	
12. Are there No Loiterin	ng Signs posted? Yes	No
13. Are there exterior sec	curity cameras Yes	No How Many:
14. Are the address num	bers prominently display	ed and easy to see ⊠Yes ⊡No
		<u> </u>
Camera Survey:		
15. Does this location ha	ve security cameras?	Yes 🕅 No
16. Are they in working		
17. What format are the		
a. Color	Yes No	
b. Digital	Yes No	
c. VCR	Yes No	
d. Recorded	Yes No	
18. How long is footage		
		on many
19. Are there exterior ca		•
20. Are there interior car		low many:
21. Do all employees kn	ow now to retrieve recor-	ded digital images/footage? Yes No

There will be interior and exterior cameras installed. The unit will be under construction. Stated the cameras will be colored and digital. She will have 30 day storage. She stated she will have approximately 36 cameras

nterior Survey:
22. 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
23. Is the interior of the location neat and clean?
24. Does an interior camera face the entrance/exit? ☐Yes ☒No
25. Is there a lockable area that separates employees from customers? ☐ Yes ☒No
26. Does the store sell single chore boy?
27. Does the store sell blunt wraps? ☐ Yes ☑No
28. Does the store sell scales?
29. Does the store sell items that may be used as crack pipes? Yes No
a. Describe item
30. Does the store have an over abundance of sandwich baggies: Yes No
31. Does the owner understand that these items are often used for drug use? <u></u> Yes ∐No
32. Do the products in the store appear to be new and rotated often? Yes No
33. Are emergency and non-emergency numbers posted near the phone? Yes No
34. Does the owner know how to contact their police district directly? ∑Yes ☐No
a. Did you provide a district contact guide to the owner? XYes \(\subseteq\)No
Complete this section if alcohol establishment is a convenience store:
(** Read full ordinance for all details "68-4.3 Convenience Food Stores")
All convenience food stores not exempted under sub. 3 shall:
1. Is the cash register located in a manner so that at the time of a sales transaction, the employee
and customer are both visible from the sidewalk? Yes No **
2. Are the glass entrance and exit doors clear of any signs or advertisements with the exception of a
sign which states that the cash register contains \$50 or less and that the safe is no accessible to
employees? Yes No
3. Does the store maintain one of the following on the licensed premise:
a. A safe that was in use at the convenience food store on August 17, 1994? Yes No
b. A drop-safe or time release safe that weighs at least 500 pounds or which is attached to o
set into the floor in a manner approved by the police department? Yes No
4. Is lighting provided for the store's parking area during all hours of darkness when employees or
customers are on the premises at a minimum average of 2-foot candles per square foot, unless th
store is not open for business after sunset and before sunrise? Yes No N/A
5. Are at least two high-resolution surveillance security cameras installed? Yes No
6. Are the security cameras in working order? Yes No
7. Does one camera show an overall view of the counter and register area? Yes No
8. Does one camera show a clear, identifiable, full frame image of the face of each person entering
and leaving the store? Yes No
9. Are the camera views obstructed by fixtures or displays? Yes No
10. Is the recorded footage stored for at least 30 days? Yes No

	all store employees know how to record footage from the camera system to media capable of ng transferred to police custody? Yes No
	e customer entrances/exits made of glass or other transparent material? Yes No a. Exception: A store that does not have such doors on August 17, 1994 shall not be required to install such doors until the holder of the store's food dealer license changes.
	s the owner and their employees attended the Robbery Prevention Training with in 120 days ownership or employment? Yes No a. Contact Community Outreach and Education at 935-7836 for schedule.
	otions. The requirements of this section do not apply to a convenience food store that ither of the following descriptions:
a-1.	The store is located in an enclosed shopping structure, enclosed commercial building or hospital. A convenience food store is not in an enclosed structure or building if a customer can enter it directly from the outside. Does store conform to a-1 Yes No
a-2	The store physically separates employees from customers with a solid partition that bars a person from entering the employee area from the customer area, has a secure lock on the employee side of any door between the employee area and the customer, and conducts all transaction through a service window or similar arrangement. Does store conform to a-2 Yes No
	a. At the commissioner's discretion, a convenience store may be exempted from any or all of the regulations specified in sub 2. Does this location hold an exemption from the commissioner regarding any of the requirements of Sub 2? Yes No

ADDITIONAL COMMENTS/RECOMMENDATIONS:

This location will be under major construction. There is nothing in place as of yet. Everything checked off on this location, is what the plan is.

Recommendations, once the construction is completed to have a final walk through prior to opening.

Place No Loitering signs on the exterior of the business and to keep an open line of communications with Milwaukee Police Department.

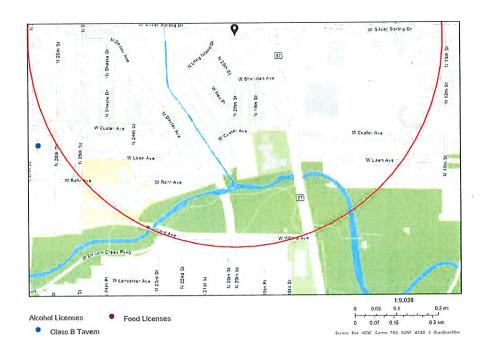


Concentration Map

1935 W Silver Spring Dr

Area: 21,862,585.72 ft2

Jul 6 2020 10:51:15 Central Daylight Time



Summary

Name	Count	Area(ft²)	Length(mi)		
Food Licenses	0				
Alcohol Licenses	0				

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

Thursday, September 17, 2020



Licenses Committee Notice of Hearing

SILVER BAY HOLDINGS LLC 2439 Kuser Rd Hamilton, NJ 08690

The Licenses Committee will consider the following license application:

Class A Malt & Class A Liquor, Food Dealer, and Weights & Measures License Applications CHARNJIT KAUR Stark Foods and Liquor IV at 1935 W SILVER SPRING DR

Date:

9/29/2020 02:40 PM

Time: Location:

The hearing before the Licenses Committee will take place virtually on Tuesday, September 29, 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, September 17, 2020



Licenses Committee Notice of Hearing

Charnjit Kaur W127 N6370 Sumac Ct Menomonee Falls, WI 53051

The Licenses Committee will consider the following license application:

Class A Malt & Class A Liquor, Food Dealer, and Weights & Measures License Applications
CHARNJIT KAUR
Stark Foods and Liquor IV at 1935 W SILVER SPRING DR

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Thursday, September 17, 2020



Notice of Public Hearing

blank notice

KAUR, Charnjit

Stark Foods and Liquor IV at 1935 W SILVER SPRING DR Class A Malt & Class A Liquor, Food Dealer, and Weights & Measures License Applications

Tuesday, September 29, 2020 at 2:40 PM

To whom it may concern:

The above application has been made by the above named applicant(s). This requires approval from the Licenses Committee and the Common Council of the City of Milwaukee. The hearing before the Licenses Committee will take place virtually on 9/29/2020 at 2:40 PM. 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	5550 N LONG ISLAND DR	MILWAUKEE, WI 53209
CURRENT OCCUPANT	1942 W BIRCH CT	MILWAUKEE, WI 53209
CURRENT OCCUPANT	5557 N LONG ISLAND DR	MILWAUKEE, WI 53209
CURRENT OCCUPANT	5565 N LONG ISLAND DR	MILWAUKEE, WI 53209
CURRENT OCCUPANT	2127 W SILVER SPRING DR	MILWAUKEE, WI 53209
CURRENT OCCUPANT	2130 W NEIL PL	MILWAUKEE, WI 53209
CURRENT OCCUPANT	5539 N LONG ISLAND DR	MILWAUKEE, WI 53209
CURRENT OCCUPANT	2125 W SILVER SPRING DR	MILWAUKEE, WI 53209
CURRENT OCCUPANT	5585 N LONG ISLAND DR	MILWAUKEE, WI 53209
CURRENT OCCUPANT	1943 W BIRCH CT	MILWAUKEE, WI 53209
CURRENT OCCUPANT	1921 W BIRCH CT	MILWAUKEE, WI 53209
CURRENT OCCUPANT	5587 N LONG ISLAND DR	MILWAUKEE, WI 53209
CURRENT OCCUPANT	5532 N LONG ISLAND DR	MILWAUKEE, WI 53209
CURRENT OCCUPANT	1910 W BIRCH CT	MILWAUKEE, WI 53209
CURRENT OCCUPANT	2119 W SILVER SPRING DR	MILWAUKEE, WI 53209
CURRENT OCCUPANT	5545 N 20TH ST	MILWAUKEE, WI 53209
CURRENT OCCUPANT	1911 W BIRCH CT	MILWAUKEE, WI 53209
CURRENT OCCUPANT	1907 W BIRCH CT	MILWAUKEE, WI 53209
CURRENT OCCUPANT	1935 W BIRCH CT	MILWAUKEE, WI 53209
CURRENT OCCUPANT	1922 W BIRCH CT	MILWAUKEE, WI 53209
CURRENT OCCUPANT	5571 N LONG ISLAND DR	MILWAUKEE, WI 53209
CURRENT OCCUPANT	5593 N LONG ISLAND DR	MILWAUKEE, WI 53209
CURRENT OCCUPANT	5595 N LONG ISLAND DR	MILWAUKEE, WI 53209
CURRENT OCCUPANT	2124 W NEIL PL	MILWAUKEE, WI 53209
CURRENT OCCUPANT	5539 N 20TH ST	MILWAUKEE, WI 53209
CURRENT OCCUPANT	1936 W BIRCH CT	MILWAUKEE, WI 53209
CURRENT OCCUPANT	2208 W NEIL PL	MILWAUKEE, WI 53209
CURRENT OCCUPANT	5570 N LONG ISLAND DR	MILWAUKEE, WI 53209
CURRENT OCCUPANT	5579 N LONG ISLAND DR	MILWAUKEE, WI 53209
CURRENT OCCUPANT	1906 W BIRCH CT	MILWAUKEE, WI 53209
CURRENT OCCUPANT	1951 W BIRCH CT	MILWAUKEE, WI 53209
CURRENT OCCUPANT	5531 N 20TH ST	MILWAUKEE, WI 53209
CURRENT OCCUPANT	2136 W NEIL PL	MILWAUKEE, WI 53209
CURRENT OCCUPANT	1900 W BIRCH CT	MILWAUKEE, WI 53209
CURRENT OCCUPANT	5517 N 20TH ST	MILWAUKEE, WI 53209
CURRENT OCCUPANT	5540 N 20TH ST	MILWAUKEE, WI 53209
CURRENT OCCUPANT	1930 W BIRCH CT	MILWAUKEE, WI 53209
CURRENT OCCUPANT	1916 W BIRCH CT	MILWAUKEE, WI 53209
CURRENT OCCUPANT	2121 W SILVER SPRING DR	MILWAUKEE, WI 53209
CURRENT OCCUPANT	1901 W BIRCH CT	MILWAUKEE, WI 53209
CURRENT OCCUPANT	5525 N 20TH ST	MILWAUKEE, WI 53209
blank	notice	1
Total Records: 11		

Total Records: 41

Radius: 250.0 feet and Center of Circle: 1935 W Silver Spring Dr

ccl-busplan 5/12/2020

MILWAUKEE

BUSINESS LICENSE PLAN OF OPERATION

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: <u>license@milwaukee.gov</u>

1, T	ype of Business
Applyir	ng 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	e a detailed description of the type of business you plan on operating:
1000	Stole with a class A Liavor Licens-e
Do you	have any experience operating this type of business? No Yes If yes, explain: Of the Jan State of the state of
2. B	usiness Operations 4616 W. Hampton, 1301 W. Afterwood
a,	$\sim 10^{-1}$ m/s $\sim 10^{-1}$ m/s $\sim 20^{-1}$
ь.	Is this premise under construction? No Yes If yes, list estimated completion date: No VIII I CENS FIRM OF Little Port Will take
c.	is this a franchise? 12 NO 13 Tes Place.
d.	Is this premises currently licensed? Tho Tyes If yes, list type of license:
e.	Is the current licensee operating? Vo Yes If no, list date closed:
f.	Do you have future plans for other businesses, licenses or permits at this location? Vo 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 [2] res if yes, describe. [7] ? tter & Noise
	How are grounds kept clean? Sweep Pressure Wash Pick Up Litter Other:
a.	How often will grounds be cleaned?
b.	Grounds cleaned by: Licensee Building Owner DEmployees Hired Maintenance Other:
c.	Grounds cleaned by: Licensee Maulaing Owner Memployees Linited Maintenance Lotter.
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? [2] No [2] Yes If yes, describe:
4. S	moking & Sanitation
a.	Are there designated outdoor smoking areas? No Yes If yes, describe:
þ,	Number of Garbage Cans: Inside: 3 Locations: At Register / At Each Restroom
	Outside: Locations: At door
c.	Is a crowd control barrier used? No Yes If yes, describe:
d.	How many restrooms are on the premises?
e.	Name of solid waste contractor: Advanced Disposal Waste Management Other:

lage of the second									
13.1.7950377	ecurity						2 27	With the state	AL AND THE RESERVE OF
a,				nesses line l			many? 27		
١.				/					-
b.	is there a	loading	g zone?	৺No ∐ Yes Ⅱ	yes, c	describe the i	loading area security pl	an:	
C.	Will you b	nave se	curity ne	rsonnel on premi	 se2 [ZNO TVA	is If yes how many?	aı	nd answer the following:
				oonsibilities?			· ·		ra anomor are following.
						Yes If ves. de	escribe Video (ameras	,
				certification, or t					
d.					_		many? 15 and list	t locations:	Around Store
	And	at	the	door/ The	Pa	sking L	of will be con	vered	
e.	Will searc	hes/ide	entificatio	on checks be don	e upoi	n entry? 📝 🛭	No 🗌 Yes If yes, descr	ribe	•
6. P	ercenta			(must total					
Alcoho	ol	60	%	Food	<u>a</u> 5	%	Secondhand Merchandi	se	Precious Metals & Gems
Entert	alnment	pro-spirite services	%	Cigarettes	_ 5	<u>,</u> %	%		%
Pawnł	oroker Activi	ltv	%	Salvaged Materia	als	%	Personal Services (such body piercing, salon, tal		Other%
1 0 44117	MONE! ACUIV			(such as scrap metal)		tanning, etc.)%		Describe:	
7, B	usiness	es/Li	censes	on the Prer	nise	s (check a	all that apply):		
Type :	1 ull Service R	estaura	nt	Cafe/Coffee S	hop	Deli or F	ast Food Restaurant	Private	/Fraternal/Veterans Club
□N	ight Club			☐ Tavern		Cocktail	Lounge	Teen C	ub
□В	anquet Hall			Sports Facility		Bowling	Alley		
□н	otel/Motel	: Num	ber of Flo	ors:		Rooming	g House: Number of Flo	ors:	 -
		Num	ber of Roo	oms:			Number of Ro	oms:	
Type 7	2 iquor Store		•	Corner Store		Superma	urkat	[Conven	ience Store
	as Station			☐ Amusement/₽	honog				ng, Salvage or Towing
							<i>5</i> 1		·
U	sed Car Dea	ler		Personal Serv (such as tatto			ı, tailor, etc.)	∐ Recordi	ng Studio
What	t other licen	ses/peri	mits will y	ou hold at this loca	tion? (check all that	apply)		
							xtended Hours Class "	B" Tavern	Weights & Measures
	Second	dhand D	ealer 🔲	Precious Metal & G	em [Other: Ya	ckased food		
8. L	egal Ca	pacit	y (only	if a Type 1	pren	nises in #	7 above)		
Capaci	ty		(Call the	Milwaukee Develo	pment	Center at 414	1-286-8211 if you have qu	estions.)	

9. Premises D	escription								
	a(s) of the premises that will 12 nd Floor Basement Store				;):				
☐Other: Descr	ribe:		J. City	er calina	Dr.				
b. Describe Locat	Describe Location: Major Thoroughfare Secondary Street Other: W. Silverspring Dr. Nearest Major Cross Street: 6 reth Bay Av.								
	ing: Free Standing Buildir								
	ises Structure: Single Sto unding Area: Commercia	,							
f. Describe Surro g. Building Owner	nunding Area: Chainifercia	Kauf	Phone Number:						
g. Building Owner	r Name: <u>Charnsit</u> r Address: <u>W127 N6</u> :	370 Sumac C+	, Manomonea/	Falls, Wi	53051				
Gyrk of Nation 1711 Nagy-¢ol (1944)ø	peration & Gustor	Yade 网络 数色的过去式和表示电话(Ya							
Will customers be ente	ering the premises? 🗌 No	Yes							
	Proposed Hour	s of Operation:	Estimated Number	Potential Age Range	Class B Tavern Applicant Only:				
Day of the Week	Open Time (include a.m. or p.m.)	Close Time (include a.m. or p.m.)	of Customers expected each day	of Customers	Age Restriction (If none, write 'None')				
Sunday	9:00 a.m.	9:00 PM	52	2/ 10 /00					
Monday	9:00 a.m	9:00 M	38	21 10 /00					
Tuesday	9:00 a.m	9:00 PM	46	21 to 100					
Wednesday	9:00 a.m	9:00 PM	65	21 to 100					
Thursday	9.00 a.m	9:00 PM	85	21 40 /00					
Friday	9:00 a.M	9:00 Pm	125	21 to 100					
Saturday	9:00 a.m.	9:00 Pm	150	21 10 100					
An Extended Hours Esplercing, salon, tallor,	tablishment License is requir tanning, etc.), recording stud	ed for any convenience stor lio or restaurant which is op	e, filling station, persona en between the hours of	l service establish 12:00 a.m. and 5	ment (such as tattoo, body :00 a.m.				
Alcohol Establishment Permitted Hours of Op	cs Class A: 8:00	am to 9:00 pm Sunday thru am to 2:00 am Sunday thru	Saturday		e e e e e e e e e e e e e e e e e e e				
Entertainment Outdoo	or Closing Hours: 10:00	Opm Sunday-Thursday; 12:00	Dam Friday & Saturday; u	inless a different i	time, either earlier or later,				
11. Signature(1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ablished by the Common Co	unicii iri its approvai or tr	ie ilcensee s pian	of operation.				
Chanken	<u></u>			-					
(If there are no 20	orietor, Partner, or 20% or mo 0% or more shareholders, -print name/title and sign)	ore Shareholder	Signature of additional p	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 <u>www.milwaukee.gov/license</u>

		1 /1 /	- i I-	/ 1 A	1 '- '	ALT THE STREET
Legal I	Entity Name: Charyit Kaur	d/b/a s	tark	foods And	LIQUOF	<u>IV</u>
Premi	se Address: 1935 W. Silv	rerspring	Unit 6			nakovski kanen sanariva enik inakas vaks
Proxi	mity of Premises to Church, Scho	ol, Daycare C	enter or	Hospital		
Is the	building within 300 feet of any church, school, dayca	are center or hospital	? IN	o 🗌 Yes		
"Serv	ice Bar Only" Designation	自然的可以下的 (1)				
If appi	lying for Class B or Clicense, are you applying for "Se		□N			
Servic	e Bar Only means customers cannot sit at the bar. A	Alcohol is served to er	nployees wh	o serve patrons sea	ated at tables.	
No sto	ools, chairs or other articles of furniture shall be plac	ed at the service bar	for patrons t	o sit upon.		rest of the control of the control of the con-
Busin	ess Information		(1)			
,	are you taking out this application for anyone that m f yes, list their name and address:	ay not be eligible for	a license?	ŪNo □Ye	es	_
b) V	Vill the agent, a partner or the individual licensee be	conducting the day-t	to-day opera	tions of the busine	ss? 🔲 No	V Yes
	f no, list the name and address of the person(s) who					
	lass B Applicants: If the agent, a partner or the inc		not be cond	ucting the day-to-o	lay operation:	s of the business,
	he person(s) listed above must obtain a Class B Man Does anyone else have money invested or any other		.c.2 [J]	o 🗌 Yes		
		iliterest ili tins pusifie	:551	U LI les		
	f yes, explain: lave you made an agreement with anyone to repay :	any loan or any other	navments b	ased upon income	from the busi	ness?
	No Yes If yes, list name and address:	2117 10 201 21 21 17 2 2 11 11		•		
Consultation of	Control Will Control William St. Co. Co. Co. Co. Co. Co. Co. Co. Co. Co		AND STATE OF STATE O	omski og gren og (gysterning Eggis	(estar taux 11 etc.)	· 医克勒斯氏病 1000000000000000000000000000000000000
Prope	enty Information (New & Transfe	r Applicants C	nly)			
a) D	οο you own or lease the building?	W Own □Lease	(once f	out chasear	L	
b) V	Who owns the fixtures (for example, coolers, etc.)?	Charnsit	Kaur	applican	<u>¥</u> .	
c) A	Are you purchasing the stock and/or fixtures?	□No □Yes If ye	ıs, amount p	aid \$	-	
d) T	otal amount paid for business	\$ NA				
	otal amount paid for goodwill of the business	\$ <u>N(A</u>			•	
G f	Goodwill comprises the reputation and customer rel air market value of all of the rest of the assets of the	ationships of an exist business, the excess	ing business may be con	. If the price you p sidered goodwill.	ay for the bus	iness exceeds the
f) H	Have you made arrangements with the seller for pay	ment of personal pro	perty taxes?	☐ No ☐ Yes		
Lease	Information (New & Transfer Ap	, a. ,	are lea	sing the pre	mises on	
a) [Date lease begins Building Kurchasts Nu	1ease				
b) 1	Monthly rental \$					
	Do you have an option to renew the lease? \square No \square				•	
	Does your lease allow for assignment to another par					
e) F	For what length of time have you been guaranteed o	ccupancy (number of	t years)?			
	•					

Lease.	Information (Continued)
of	addition to paying the monthly rental, will you have to pay anything additional to the owner of the building to guarantee performance the lease? No \(\) Yes If yes, explain \(\) \(\) \(\)
	pes the present owner or occupancy object to the granting of your license? No Yes yes, explain
Chang	e of Agent Applicants Only
	nere been any changes to the floor plan since the last application was submitted? No Yes
ir no, a	new floor plan is not required. If yes, submit a new floor plan and explain the change(s):
Signat	ure
One	y Kaus
Signature (If no 20%	of Sole Proprietor, Partner or 20% or More Shareholder 5 or more Shareholder, Corporate Officer - print name/title and sign)
Dev	e: All information contained in this application is subject to approval by the Common Council. Place of the license of the license of containing the containing from approved plan of operation will subject license to citations, and/or suspension or non-renewal of the license. It is the license Division for information on how to request changes.
	ew and transfer of premises applicants must submit the following: Detailed floor plan f a restaurant, copy of the menu



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:	harnoit	KAUN d	/b/a	TACK FUO	ls And	LIQUE IV
Premises Address: (6	135 W. S	\verspring	Df., Unit	6 Milwa	wkee, W	Lique IV I 53209
SECTION 1 TYP	PE OF BUSINESS					1954年3月 - 第四百日 1954年3月 - 第四百日 1957年3月 - 第四百日日
What will be the majori	ty of your food sales	? (check one)			•	
	neals): t are not limited to, c and meat, French frie	*	*	· ·		
tea, fruit juice, smo fritters, tortilla chip	de, but are not limite pothies, candy, dispe ps w/ cheese.	nsed soda, fruit cup				
A convenience	venience store? store contains less items and in additio ducts.	than 5,000 square				
Bed & Breakfast Micro Market						
All Applicants: Submit a	ı menu or a list of foc	od Items that will be	sold.			
Will any wholesale busir	ness be done?	No Σ Yes If γe:	s, what percentag	e of food sales	will be who	olesale?
Less than 25%	·					
25% or More Af	ND: Irant items (meals) w	ill be sold – Comple	te this application	n and also conta	act DATCP.	
☐ NO res	staurant items (meals	s) will be sold - Do I	NOT complete thi	s application. C	ontact DAT	CP only.
SECTION 2 FOC	OD PROCESSING		The state of the s	(1) 分别。 (4) (3) (4) (5) (5) (4) (4) (4) (5) (6) (6)		
Will any food processing	g be done?	o Yes			·	
Processing is defined as extracting, fermenting, o					oottling, gri	lling, canning,
SECTION 3 FOC	DD REQUIRING TEN	MPERATURE CON	TROL			
Will any food that require (includes dairy products of feet of the types of types of types of the types of t	s such as milk, cheese		n, shellfish, meat,	poultry)	ch me	at

ccl-foodplan 2/28/19

SECTION 4 DETAILS OF OPERATION
Will you have seating on site for dining?
Will you be doing any catering? Yes
Will you be doing any delivery? Yes
Will you have outdoor activities? Yes - Check all that apply: Bar Cooking/Grilling Dining
Will you have a drive thru window? Yes - Are hours different from inside? No Yes
If Yes, provide drive thru hours:
Will scales or barcode scanners be used? No Yes - You must also apply for a Weights & Measures License.
SECTION 5 ADDITIONAL SITES Where will food be prepared and/or sold?
At a single site At multiple sites: How many?(for example, a hotel with several dining rooms or bars)
If multiple sites, attach a Food Dealer Additional Site Addendum (ccl-foodadd) for each additional site.
SECTION 6 CONSTRUCTION OR CHANGES
Are you planning any construction, remodeling or equipment changes?
No If No, SKIP to Section 8
Yes If Yes, check all that apply: New construction of a building Renovation or remodeling
Construction changes to existing building
convert coace into a store
and alber Describeration cashier Station
Palaco A Matheen 262-786-6776
Name, Address & Phone Number of Architect: 1777 CV17 - 1000 Wat 2000 1000 New Berlin
100 / sin the since will consecut the
Name, Address & Phone Number of Contractor: TBD / Changit (AD) WIII GERTON YEC
SECTION 7 ALCOHOL BEVERAGES Are you applying for an alcohol beverage license?
□ No If No, SKIP to Section 8
Yes If YES, if your food license is approved prior to the alcohol license, when do you want the food license issued?
Immediately At the same time as the alcohol license
SECTION 8 ACKNOWLEDGEMENTS & SIGNATURE
You must initial each item confirming your understanding:
I understand the Health Department must conduct an Inspection and advise the License Division of their approval
before the license may be issued. 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. 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. I understand proof of payment for all license fees must be on file in the License Division before the license may be
lissued and the license must be issued and posted in my establishment prior to opening for business.
I will not operate my food business until the license has been issued and posted in the establishment.
Signature of Sole Proprietor, Partner, or 20% Shareholder:
Signature of Additional Partner:

MILWAUKEE

WEIGHTS & MEASURES PLAN OF OPERATION

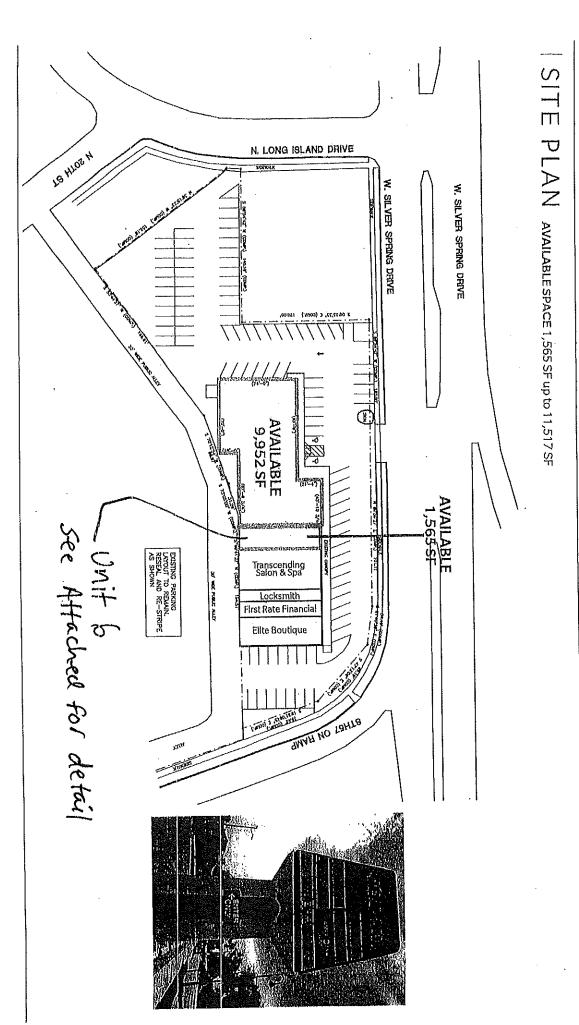
Office of the City Clerk License Division 200 E. Wells St. Room 105, Milwaukee, WI 53202 (414) 286-2238 www.milwaukee.gov/license license@milwaukee.gov

Legal Entity Name: Charn sit Kows d/b/a Stark foods And LiQuer D
Premise Address: 1935 W. Silver spring Rd., Milwarker, WI 53209 Unft 6
Type of Business
Provide a brief description of the establishment/business: Liavor, Food, And Snacks to be Sold in a Retail Store
Other licenses may be required depending on the type of business you are operating.
TO ALCOHOLD BY MIN THE CALL MALE THE STATE OF THE STATE O
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)
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 .

FOR SALE OR LEASE

SILVER BAY PLAZA 1935 W SILVER SPRING DRIVE, MILWAUKEE, WI 53209

FOUNDERS





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