



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

Thursday, August 21, 2025

**COMMITTEE MEETING NOTICE**

AD 03

GRIFFIN, Tyseria N, Agent  
GIRL POWER LLC  
1612 S 76TH ST #103  
West Allis, WI 53214

You are requested to attend a hearing which is to be held in Room 301-B, Third Floor, City Hall or you may attend virtually using the link below.

**Friday, September 05, 2025 at 09:45 AM**

The access code is <https://meet.goto.com/244535133>. Please see the enclosed best practices document for further instructions.

**Regarding:** Your Public Entertainment Premises License Application Requesting Disc Jockey, Karaoke, Patrons Dancing and Hookah Service as agent for "Girl Power LLC" for "THE SEAFOOD SHACK RESTAURANT" at 2336 N FARWELL Av.



There is a possibility that your application may be denied for one or more of the following reasons: The recommendation of the committee regarding the application shall be based on evidence presented at the hearing. Per MCO 85-2.7-4, probative evidence concerning whether or not a new license should be granted may be presented on the following subjects: whether or not the applicant meets the municipal requirements, the appropriateness of the location and premises where the licensed premises is to be located and whether use of the premises for the purposes or activities permitted by the license would tend to facilitate a public or private nuisance or create undesirable neighborhood problems such as disorderly patrons, unreasonably loud noise, litter, and excessive traffic and parking congestion. Probative evidence relating to these matters may be taken from the plan of operation submitted with the license application, if any, but shall not include the content of any music. Evidence regarding the fitness of the location of the premises to be maintained as the principal place of business, including but not limited to whether there is an overconcentration of businesses of the type for which the license is sought; whether the proposal is consistent with any pertinent neighborhood business or development plans, or the location's proximity to areas where children are typically present. The applicant's record in operating similarly licensed premises; and whether or not the applicant has been charged with or convicted of any felony, misdemeanor, municipal offense or other offense, the circumstances of which substantially relate to the activity to be permitted by the license being applied for or any other factor which reasonably relates to the public health, safety or welfare may also be considered. See attached police report or correspondence.

**Notice for applicants with  
warrants or unpaid fines:**

**Proof of warrant satisfaction or payment of fines must be submitted at the hearing on the above date and time. Failure to comply with this requirement may result in a delay of the granting/denial of your application.**

Failure to appear at this meeting may result in the denial of your license. Individual applicants must appear only in person or by an attorney. Corporate or Limited Liability applicants must appear only by the agent designated on the application or by an attorney. Partnership applicants must appear by a partner listed on the application or by an attorney. If you wish to do so and at your own expense, you may be accompanied by an attorney of your choosing to represent you at this hearing. You will be given an opportunity to speak on behalf of the application and to respond and challenge any charges or reasons given for the denial. No petitions can be accepted by the committee, unless the people who signed the petition are present at the committee hearing and willing to testify. You may present witnesses under oath and you may also confront and cross-examine opposing witnesses under oath. If you have difficulty with the English language, you should bring an interpreter with you, at your expense, so that you can answer questions and participate in your hearing.

You may examine the application file at this office during regular business hours prior to the hearing date. Inquiries regarding this matter may be directed to the person whose signature appears below.

Limited parking for persons attending meetings during normal business hours is available at reduced rates (5 hour limit) at the Milwaukee Center on the southwest corner of Kilbourn Avenue and Water Street. You must present a copy of the meeting notice to the parking cashier.

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

**JIM OWCZARSKI, CITY CLERK**

BY: \_\_\_\_\_

**Jim Cooney  
License Division Manager**

**If you have questions regarding this notice, please contact the License Division at (414) 286-2238.**

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



Thursday, August 21, 2025



# Notice of Public Hearing

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GRIFFIN, Tyseria N, Agent  
The Seafood Shack Restaurant at 2336 N Farwell Av  
Public Entertainment Premises License Application Requesting Disc Jockey, Karaoke, Patrons  
Dancing and Hookah Service

**Friday, September 05, 2025 at 9:45 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 on 9/5/2025 at 9:45 AM in Room 301-B, Third Floor, City Hall. This is a public hearing. Those wishing to view the proceeding are able to do so via the City Channel – Channel 25 on Spectrum Cable – or on the Internet at <http://city.milwaukee.gov/citychannel>. Those wishing to provide oral testimony via internet are asked to contact the staff assistant, Yadira Melendez at (414) 286-2775 or [stasst5@milwaukee.gov](mailto:stasst5@milwaukee.gov) for necessary information. Please make such requests no later than one business day prior to the start of the meeting. You are not required to attend the hearing, but please see the information below if you would like to provide testimony. Once the Licenses Committee makes its recommendation, this recommendation is forwarded to the full Common Council for approval at its next regularly scheduled hearing.

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

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

OCCUPANT	MAIL ADDRESS	CITY STATE ZIP
CURRENT OCCUPANT	2006 E THOMAS AVE# A	MILWAUKEE, WI 53211-4405
CURRENT OCCUPANT	2006 E THOMAS AVE# B	MILWAUKEE, WI 53211-4405
CURRENT OCCUPANT	2009 E IVANHOE PL# 201	MILWAUKEE, WI 53202-1118
CURRENT OCCUPANT	2009 E IVANHOE PL# 202	MILWAUKEE, WI 53202-1118
CURRENT OCCUPANT	2009 E IVANHOE PL# 203	MILWAUKEE, WI 53202-1118
CURRENT OCCUPANT	2009 E IVANHOE PL# 204	MILWAUKEE, WI 53202-1118
CURRENT OCCUPANT	2009 E IVANHOE PL# 205	MILWAUKEE, WI 53202-1118
CURRENT OCCUPANT	2009 E IVANHOE PL# 206	MILWAUKEE, WI 53202-1118
CURRENT OCCUPANT	2009 E IVANHOE PL# 207	MILWAUKEE, WI 53202-1118
CURRENT OCCUPANT	2009 E IVANHOE PL# 208	MILWAUKEE, WI 53202-1118
CURRENT OCCUPANT	2009 E IVANHOE PL# 209	MILWAUKEE, WI 53202-1118
CURRENT OCCUPANT	2009 E IVANHOE PL# 210	MILWAUKEE, WI 53202-1118
CURRENT OCCUPANT	2009 E IVANHOE PL# 211	MILWAUKEE, WI 53202-1118
CURRENT OCCUPANT	2009 E IVANHOE PL# 212	MILWAUKEE, WI 53202-1118
CURRENT OCCUPANT	2009 E IVANHOE PL# 214	MILWAUKEE, WI 53202-1118
CURRENT OCCUPANT	2009 E IVANHOE PL# 215	MILWAUKEE, WI 53202-1118
CURRENT OCCUPANT	2009 E IVANHOE PL# 301	MILWAUKEE, WI 53202-1118
CURRENT OCCUPANT	2009 E IVANHOE PL# 302	MILWAUKEE, WI 53202-1118
CURRENT OCCUPANT	2009 E IVANHOE PL# 303	MILWAUKEE, WI 53202-1118
CURRENT OCCUPANT	2009 E IVANHOE PL# 304	MILWAUKEE, WI 53202-1118
CURRENT OCCUPANT	2009 E IVANHOE PL# 305	MILWAUKEE, WI 53202-1118
CURRENT OCCUPANT	2009 E IVANHOE PL# 306	MILWAUKEE, WI 53202-1118
CURRENT OCCUPANT	2009 E IVANHOE PL# 307	MILWAUKEE, WI 53202-1118
CURRENT OCCUPANT	2009 E IVANHOE PL# 308	MILWAUKEE, WI 53202-1118
CURRENT OCCUPANT	2009 E IVANHOE PL# 309	MILWAUKEE, WI 53202-1118
CURRENT OCCUPANT	2009 E IVANHOE PL# 310	MILWAUKEE, WI 53202-1118
CURRENT OCCUPANT	2009 E IVANHOE PL# 311	MILWAUKEE, WI 53202-1118
CURRENT OCCUPANT	2009 E IVANHOE PL# 312	MILWAUKEE, WI 53202-1118
CURRENT OCCUPANT	2009 E IVANHOE PL# 314	MILWAUKEE, WI 53202-1118
CURRENT OCCUPANT	2009 E IVANHOE PL# 315	MILWAUKEE, WI 53202-1118
CURRENT OCCUPANT	2325 N MURRAY AVE	MILWAUKEE, WI 53211-4404
CURRENT OCCUPANT	2329 N MURRAY AVE	MILWAUKEE, WI 53211-4404
CURRENT OCCUPANT	2353 N FARWELL AVE# 301	MILWAUKEE, WI 53211-4470
CURRENT OCCUPANT	2353 N FARWELL AVE# 302	MILWAUKEE, WI 53211-4470
CURRENT OCCUPANT	2353 N FARWELL AVE# 303	MILWAUKEE, WI 53211-4470
CURRENT OCCUPANT	2353 N FARWELL AVE# 304	MILWAUKEE, WI 53211-4470
CURRENT OCCUPANT	2353 N FARWELL AVE# 305	MILWAUKEE, WI 53211-4470
CURRENT OCCUPANT	2353 N FARWELL AVE# 306	MILWAUKEE, WI 53211-4470
CURRENT OCCUPANT	2353 N FARWELL AVE# 307	MILWAUKEE, WI 53211-4470
CURRENT OCCUPANT	2353 N FARWELL AVE# 308	MILWAUKEE, WI 53211-4470
CURRENT OCCUPANT	2353 N FARWELL AVE# 309	MILWAUKEE, WI 53211-4470
CURRENT OCCUPANT	2353 N FARWELL AVE# 310	MILWAUKEE, WI 53211-4470
CURRENT OCCUPANT	2353 N FARWELL AVE# 311	MILWAUKEE, WI 53211-4470
CURRENT OCCUPANT	2353 N FARWELL AVE# 312	MILWAUKEE, WI 53211-4470
CURRENT OCCUPANT	2353 N FARWELL AVE# 313	MILWAUKEE, WI 53211-4470
CURRENT OCCUPANT	2353 N FARWELL AVE# 314	MILWAUKEE, WI 53211-4470

[illegible]

CURRENT OCCUPANT	2409 N FREDERICK AVE	MILWAUKEE, WI 53211-4418
CURRENT OCCUPANT	2413 N FREDERICK AVE	MILWAUKEE, WI 53211-4418
CURRENT OCCUPANT	2415 N FREDERICK AVE	MILWAUKEE, WI 53211-4418

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Total Records: 96

Radius 250 feet and Center of the Circle: 2336 N Farwell Av



## 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](mailto: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: A restaurant you can come to and order food for take out or sit and eat

Do you have any experience operating this type of business? ☐ No ☒ Yes If yes, explain: SEAFOOD SHACK restaurant

### 2. Business Operations and bar in south milw. I own that location

- a. Proposed Opening Date: Already open
- b. Is this premise under construction? ☒ No ☐ Yes If yes, list estimated completion date: \_\_\_\_\_
- c. Is this a franchise? ☒ No ☐ Yes
- d. Is this premises currently licensed? ☐ No ☒ Yes If yes, list type of license: RESTAURANT / food
- e. Is the current licensee operating? ☐ No ☒ Yes If no, list date closed: \_\_\_\_\_
- f. Do you have future plans for other businesses, licenses or permits at this location? ☐ No ☒ Yes  
If yes, explain: liquor license
- g. Have you previously held an Extended Hours License in Milwaukee? ☐ No ☒ Yes  
If yes, list address(es): 2334 N FARWELL
- 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: Management
- c. Grounds cleaned by: ☐ Licensee ☐ Building Owner ☐ Employees ☒ Hired Maintenance ☒ Other: Management
- 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: \_\_\_\_\_
- b. Number of Garbage Cans: Inside: 5 Locations: 2 women's, 1 men's - 2 Kitchen  
Outside: 1 Locations: BACK of building
- c. Is a crowd control barrier used? ☒ No ☐ Yes If yes, describe: \_\_\_\_\_
- d. How many restrooms are on the premises? 2
- e. Name of solid waste contractor: ☐ Advanced Disposal ☐ Waste Management ☒ Other: Eagle



## 5. Security

- a. Are there onsite parking spaces? ☐ No ☒ Yes If yes, how many? 30 and describe the parking security plan: Shared lot w/ other businesses, lighting
- b. Is there a loading zone? ☒ No ☐ Yes If yes, describe the loading area security plan: \_\_\_\_\_
- c. Will you have licensed security on premise? ☒ No ☐ Yes If yes, how many? \_\_\_\_\_ and answer the following:  
What are their responsibilities? \_\_\_\_\_  
Describe equipment used \_\_\_\_\_  
List their License Number (s) \_\_\_\_\_
- d. Will there be security cameras? ☐ No ☒ Yes If yes, how many? 2 and list locations: Front counter  
inside front door
- e. Will searches/identification checks be done upon entry? ☐ No ☒ Yes If yes, describe to check when  
purchasing alcohol

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

purchasing alcohol

Alcohol <u>30</u> %	Food <u>70</u> % Cigarettes, Electronic Vape Devices, Tobacco Products _____ %	Secondhand Merchandise _____ %	Precious Metals & Gems _____ %
Entertainment _____ %	Salvaged Materials _____ % (such as scrap metal)	Personal Services (such as tattoo, body piercing, salon, tailor, tanning, etc.) _____ %	Other _____ % Describe: _____
Pawnbroker Activity _____ %			

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

### Type 1

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

### Type 2

- ☐ Liquor Store ☐ Corner Store ☐ Supermarket ☐ Convenience Store
- ☐ Gas Station ☐ Amusement/Phonograph Distributor ☐ Recycling, Salvage or Towing
- ☐ Used Car Dealer ☐ Personal Service Establishment  
(such as tattoo business, hair salon, tailor, etc.) ☐ Recording Studio

What other licenses/permits will you hold at this location? (check all that apply)

- ☒ Occupancy Permit ☐ Cigarette, Tobacco, Electronic Vape Products ☐ Gas Station ☐ Extended Hours ☒ Class "B" Tavern ☐ Weights & Measures
- ☐ Secondhand Dealer ☐ Precious Metal & Gem ☐ Other: \_\_\_\_\_

## 8. Legal Capacity (only if a Type 1 premises in #7 above)

Capacity 25 (Call the Milwaukee Development Center at 414-286-8211 if you have questions.)

## 9. Premises Description

- a. Identify all area(s) of the premises that will be used in operating this business (include areas used only for storage):

☒ 1<sup>st</sup> Floor ☐ 2<sup>nd</sup> Floor ☐ Basement Storage ☐ Patio ☐ Beer Garden ☐ Sidewalk Café ☐ Deck ☐ Rooftop

( ) Other: Describe: \_\_\_\_\_

- b. Describe Location: ☐ Major Thoroughfare ☐ Secondary Street ☒ Other: Plaza

- c. Nearest Major Cross Street: Fairview & North 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: MDH223WI, LLC Phone Number: 414 921 8299

Building Owner Address: PO Box 1123 Brookfield WI 53008

## 10. Hours of Operation & Customers

Will customers be entering the premises? ☐ No ☒ Yes

Day of the Week	Proposed Hours of Operation..		Estimated Number of Customers expected each day	Potential Age Range of Customers	Class B Tavern Applicant Only: Age Restriction (If none, write 'None')
	Open Time (include a.m. or p.m.)	Close Time (include a.m. or p.m.)			
Sunday	11 am	12 am	30	NA	
Monday	11 am	12 am	30		
Tuesday	11 am	12 am	210		
Wednesday	11 am	12 am	45		
Thursday	11 am	12 am	55		
Friday	11 am	2:30 am	80		
Saturday	11 am	2:30 am	80		

An Extended Hours Establishment License is required for any convenience store, filling station, personal service establishment (such as tattoo, body piercing, salon, tailor, tanning, etc.), recording studio or restaurant which is open between the hours of 12:00 a.m. and 5:00 a.m.

Alcohol Establishments Class A: 8:00 am to 9:00 pm Sunday thru Saturday

Permitted Hours of Operation: Class B: 6:00 am to 2:00 am Sunday thru Thursday, 6:00 am to 2:30 am Friday & Saturday

Entertainment Outdoor Closing Hours: 10:00pm Sunday-Thursday; 12:00am Friday & Saturday; unless a different time, either earlier or later, is established by the Common Council in its approval of the licensee's plan of operation.

## 11. Signature(s)

[Signature] 7/1/25  
Signature of Sole Proprietor, Partner, or 20% or more Shareholder  
(If there are no 20% or more shareholders, Corporate Officer-print name/title and sign)

\_\_\_\_\_  
Signature of additional partner or 20% or more shareholder

See Application Information for a complete list of all required application forms.





# ALCOHOL BEVERAGE & PUBLIC ENTERTAINMENT PREMISES SUPPLEMENTAL APPLICATION

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

Legal Entity Name: <u>Girl Power LLC</u>	
Premise Address: <u>2330 N. Farwell</u>	
<b>Proximity of Premises to Church, School, Daycare Center or Hospital</b>	
Is the building within 300 feet of any church, school, daycare center or hospital? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
<b>"Service Bar Only" Designation</b>	
If applying for Class B or C license, are you applying for "Service Bar Only"? <input type="checkbox"/> No <input checked="" 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.	
<b>Business Information</b>	
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 checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, list name and address: _____	
<b>Property Information (New &amp; Transfer Applicants Only)</b>	
a) Do you own or lease the building? <input type="checkbox"/> Own <input checked="" type="checkbox"/> Lease	
b) Who owns the fixtures (for example, coolers, etc.)? _____	
c) Are you purchasing the stock and/or fixtures? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes if yes, amount paid \$ _____	
d) Total amount paid for business \$ <u>N/A</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 type="checkbox"/> Yes	
<b>Lease Information (New &amp; Transfer Applicants who are leasing the premises only)</b>	
a) Date lease begins <u>July 24</u> Ends <u>July 29</u>	
b) Monthly rental \$ <u>2900</u>	
c) Do you have an option to renew the lease? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	
d) Does your lease allow for assignment to another party without the consent of the owner? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
e) For what length of time have you been guaranteed occupancy (number of years)? <u>5</u>	

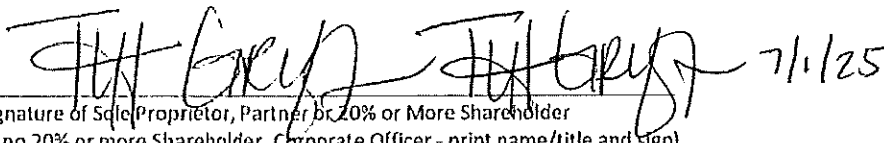
### Lease Information (Continued)

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

### Change of Agent Applicants Only

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

### Signature

 7/1/25  
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](http://www.milwaukee.gov/license) e-mail address: [license@milwaukee.gov](mailto:license@milwaukee.gov)

PREMISES ADDRESS: 2336 N. Farwell Ave

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

Entertainment Outdoor Closing Hours: 10:00pm Sunday-Thursdays; 12:00am Friday & Saturday; unless a different time, either earlier or later, is established by the Common Council in its approval of the licensee's plan of operation.

## PROMOTERS/SOUND AMPLIFICATION

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

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

## LEGAL CAPACITY OF PREMISES

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

## ACKNOWLEDGEMENT/SIGNATURE

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

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

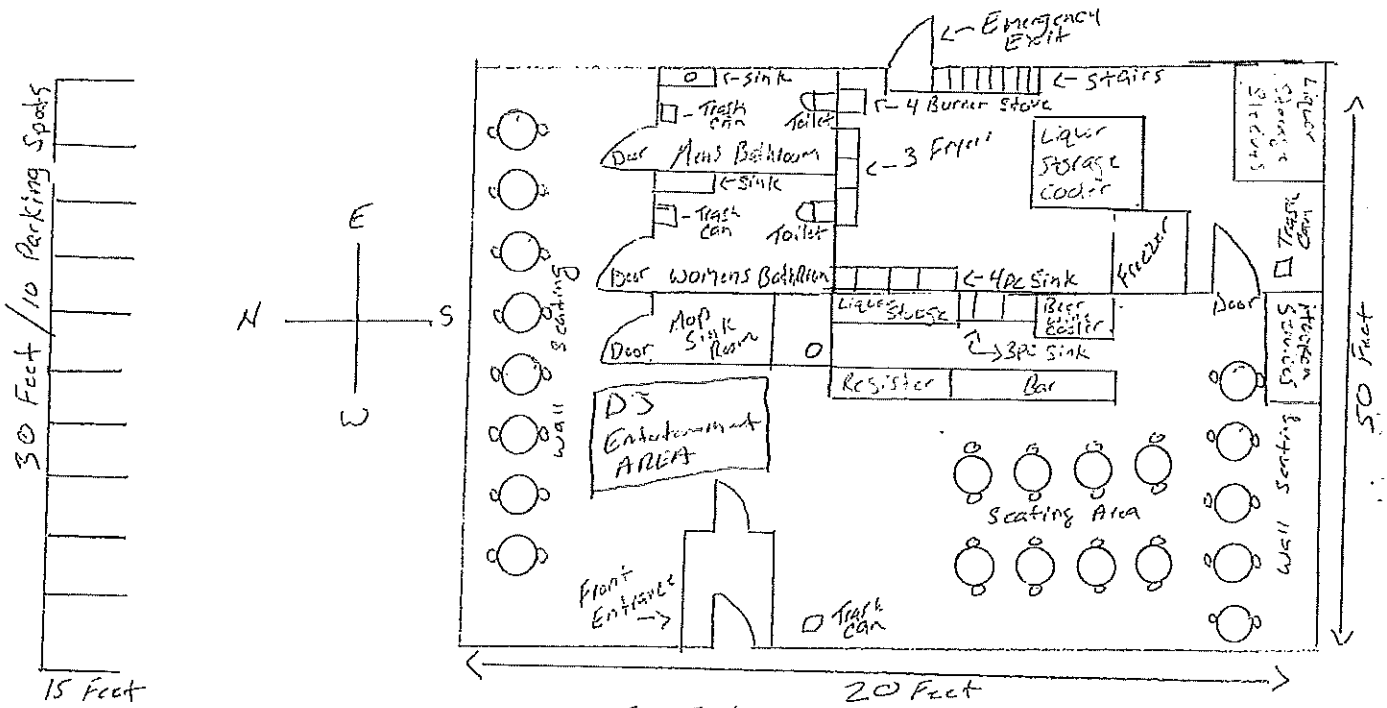
[Signature]  
Signature of Sole Proprietor, Partner or 20% or More Shareholder  
(If no 20% or more Shareholder, Corporate Officer - print name/title and sign)

## Office Use Only:

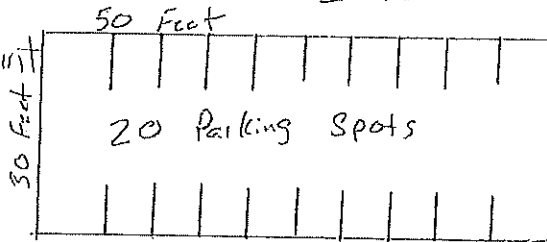
Initials: \_\_\_\_\_ Filed: \_\_\_\_\_ App: \_\_\_\_\_

Only PEP? ☐ No ☐ Yes If Yes, ☐ Queue to MPD and ☐ Email Mgrs/Team Lead (must be heard w/in 60 days)

up Dated floor plan with Entertainment



The Seafood Shack Restaurant  
Girl Power LLC  
Tyseria Griffin, Agent  
2334 N. Farwell Milwaukee  
Capacity 25  
sq.ft. 1300  
7/1/2025



N. Farwell