



CITY OF MILWAUKEE  
OFFICE OF THE CITY CLERK

Wednesday, December 20, 2023

COMMITTEE MEETING NOTICE

AD 02

ARSHAD, Ikram, Agent  
A & I Cell Phone and Accessories, LLC  
4137 N 56th St  
Milwaukee, WI 53216

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, January 05, 2024 at 02:40 PM**

The access code is <https://meet.goto.com/852030949>. If you wish to call in: [+1 \(571\) 317-3112](tel:+15713173112) and use Access Code: **852-030-949**  
Please see the enclosed best practices document for further instructions.

**Regarding:** Your Secondhand Dealer's License Application as agent for "A & I Cell Phone and Accessories, LLC" for "I World Phone Repair" at 4137 N 56th St.



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)



CITY OF MILWAUKEE  
OFFICE OF THE CITY CLERK

Wednesday, December 20, 2023

COMMITTEE MEETING NOTICE

AD 02

ARSHAD, Ikram, Agent  
A & I Cell Phone and Accessories, LLC  
1409 W GRANADA ST #14  
Milwaukee, WI 53221

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



Wednesday, December 20, 2023



# Notice of Public Hearing

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ARSHAD, Ikram, Agent  
I World Phone Repair at 4137 N 56th St  
Secondhand Dealer's License Application

**Friday, January 05, 2024 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 on 1/5/2024 at 2:40 PM 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 phone or 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	4025 N 60TH ST# 1	MILWAUKEE, WI 53216-1246
CURRENT OCCUPANT	4025 N 60TH ST# 10	MILWAUKEE, WI 53216-1264
CURRENT OCCUPANT	4025 N 60TH ST# 11	MILWAUKEE, WI 53216-1264
CURRENT OCCUPANT	4025 N 60TH ST# 12	MILWAUKEE, WI 53216-1264
CURRENT OCCUPANT	4025 N 60TH ST# 13	MILWAUKEE, WI 53216-1264
CURRENT OCCUPANT	4025 N 60TH ST# 14	MILWAUKEE, WI 53216-1264
CURRENT OCCUPANT	4025 N 60TH ST# 15	MILWAUKEE, WI 53216-1264
CURRENT OCCUPANT	4025 N 60TH ST# 16	MILWAUKEE, WI 53216-1264
CURRENT OCCUPANT	4025 N 60TH ST# 2	MILWAUKEE, WI 53216-1246
CURRENT OCCUPANT	4025 N 60TH ST# 3	MILWAUKEE, WI 53216-1246
CURRENT OCCUPANT	4025 N 60TH ST# 4	MILWAUKEE, WI 53216-1246
CURRENT OCCUPANT	4025 N 60TH ST# 5	MILWAUKEE, WI 53216-1246
CURRENT OCCUPANT	4025 N 60TH ST# 6	MILWAUKEE, WI 53216-1246
CURRENT OCCUPANT	4025 N 60TH ST# 7	MILWAUKEE, WI 53216-1246
CURRENT OCCUPANT	4025 N 60TH ST# 8	MILWAUKEE, WI 53216-1264
CURRENT OCCUPANT	4025 N 60TH ST# 9	MILWAUKEE, WI 53216-1264
CURRENT OCCUPANT	4037 N 60TH ST# 1	MILWAUKEE, WI 53216-1249
CURRENT OCCUPANT	4037 N 60TH ST# 2	MILWAUKEE, WI 53216-1249
CURRENT OCCUPANT	4037 N 60TH ST# 4	MILWAUKEE, WI 53216-1249
CURRENT OCCUPANT	4043 N 60TH ST# 1	MILWAUKEE, WI 53216-1205
CURRENT OCCUPANT	4043 N 60TH ST# 2	MILWAUKEE, WI 53216-1205
CURRENT OCCUPANT	4043 N 60TH ST# 3	MILWAUKEE, WI 53216-1205
CURRENT OCCUPANT	4043 N 60TH ST# 4	MILWAUKEE, WI 53216-1205
CURRENT OCCUPANT	4051 N 60TH ST	MILWAUKEE, WI 53216-1205
CURRENT OCCUPANT	4053 N 60TH ST	MILWAUKEE, WI 53216-1205
CURRENT OCCUPANT	4057 N 60TH ST	MILWAUKEE, WI 53216-1205
CURRENT OCCUPANT	4059 N 60TH ST	MILWAUKEE, WI 53216-1205
CURRENT OCCUPANT	4063 N 60TH ST	MILWAUKEE, WI 53216-1205
CURRENT OCCUPANT	4065 N 60TH ST	MILWAUKEE, WI 53216-1205
CURRENT OCCUPANT	4071 N 60TH ST	MILWAUKEE, WI 53216-1205
CURRENT OCCUPANT	4071A N 60TH ST	MILWAUKEE, WI 53216-1205
CURRENT OCCUPANT	4077 N 60TH ST# 1	MILWAUKEE, WI 53216-1205
CURRENT OCCUPANT	4077 N 60TH ST# 2	MILWAUKEE, WI 53216-1205
CURRENT OCCUPANT	4077 N 60TH ST# 3	MILWAUKEE, WI 53216-1205
CURRENT OCCUPANT	4077 N 60TH ST# 4	MILWAUKEE, WI 53216-1205
CURRENT OCCUPANT	5721 W CAPITOL DR# 1	MILWAUKEE, WI 53216-2245
CURRENT OCCUPANT	5721 W CAPITOL DR# 2	MILWAUKEE, WI 53216-2245
CURRENT OCCUPANT	5721 W CAPITOL DR# 3	MILWAUKEE, WI 53216-2245
CURRENT OCCUPANT	5721 W CAPITOL DR# 4	MILWAUKEE, WI 53216-2245
CURRENT OCCUPANT	5729 W CAPITOL DR# 1	MILWAUKEE, WI 53216-2245
CURRENT OCCUPANT	5729 W CAPITOL DR# 2	MILWAUKEE, WI 53216-2245
CURRENT OCCUPANT	5729 W CAPITOL DR# 3	MILWAUKEE, WI 53216-2245
CURRENT OCCUPANT	5729 W CAPITOL DR# 4	MILWAUKEE, WI 53216-2245

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Total Records: 43

Radius 250.0 feet and Center of the Circle: 4137 N 56th St



# 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: cell phone and accessories llc

Do you have any experience operating this type of business?  No  Yes If yes, explain: I worked before in a cell phone store

## 2. Business Operations

- a. Proposed Opening Date: 8/31/2023
- 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: occupancy, Tobacco
- 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: \_\_\_\_\_
- b. Number of Garbage Cans: Inside: 3 Locations: front  
Outside: 3 Locations: Back
- c. Is a crowd control barrier used?  No  Yes If yes, describe: \_\_\_\_\_
- d. How many restrooms are on the premises? 1
- e. Name of solid waste contractor:  Advanced Disposal  Waste Management  Other: \_\_\_\_\_

### 5. Security

- a. Are there onsite parking spaces?  No  Yes If yes, how many? 11 and describe the parking security plan: private security system
- b. Is there a loading zone?  No  Yes If yes, describe the loading area security plan: \_\_\_\_\_
- c. Will you have security personnel on premise?  No  Yes If yes, how many? \_\_\_\_\_ and answer the following:  
 What are their responsibilities? \_\_\_\_\_  
 Is security equipment used?  No  Yes If yes, describe \_\_\_\_\_  
 List their licensing, certification, or training credentials \_\_\_\_\_
- d. Will there be security cameras?  No  Yes If yes, how many? \_\_\_\_\_ and list locations: \_\_\_\_\_
- e. Will searches/identification checks be done upon entry?  No  Yes If yes, describe \_\_\_\_\_

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

Alcohol _____%	Food _____%	Secondhand Merchandise _____%	Precious Metals & Gems _____%
Entertainment _____%	Cigarettes <u>25</u> %		
Pawnbroker Activity _____%	Salvaged Materials _____% (such as scrap metal)	Personal Services (such as tattoo, body piercing, salon, tailor, tanning, etc.) _____%	Other <u>75</u> % Describe: <u>cell phone</u>

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

#### Type 1

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

#### Type 2

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

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

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

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

Capacity 60 (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: \_\_\_\_\_
- c. Nearest Major Cross Street: W Fond du Lac 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: RD Sharma Phone Number: 878 614 5245  
 Building Owner Address: 361 17<sup>th</sup> ST NW unit 262 Atlanta Georgia 30363

### 10. Hours of Operation & Customers

Will customers be entering the premises?  No  Yes

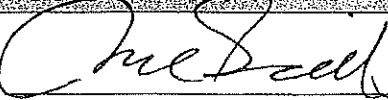
Day of the Week	Proposed Hours of Operation:		Estimated Number of Customers expected each day	Potential Age Range of Customers	Class B Tavern Applicant Only Age Restriction (If none, write 'None')
	Open Time (include a.m. or p.m.)	Close Time (include a.m. or p.m.)			
Sunday	09:00 am	05:30 pm	100	All	N/A
Monday	08:00 am	08:00 pm	150	All	N/A
Tuesday	08:00 am	08:00 pm	150	All	N/A
Wednesday	08:00 am	08:00 pm	150	All	N/A
Thursday	08:00 am	08:00 pm	150	All	N/A
Friday	08:00 am	08:00 pm	150	All	N/A
Saturday	09:00 am	05:30 pm	100	All	N/A

An Extended Hours Establishment License is required for any convenience store, filling station, personal service establishment (such as tattoo, body piercing, salon, 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 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

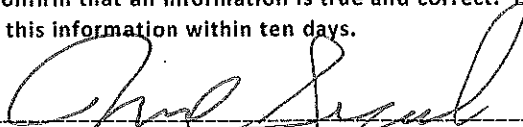
See Application Information for a complete list of all required application forms.



**SECONDHAND DEALER LICENSE  
SUPPLEMENTAL PLAN OF OPERATION**

ccl-shdplan 10/17/19

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

<b>Legal Entity Name:</b> <u>AB I cell phone and Accessories llc</u>	
<b>Premises Address:</b> <u>4137 N 56<sup>th</sup> ST, Milwaukee WI 53216</u>	
What type of business will you operate? (Select all that apply)	
<input checked="" type="checkbox"/> Secondhand Dealer <input type="checkbox"/> Secondhand Dealer-Bicycles Only <input type="checkbox"/> Secondhand Dealer Mall <input type="checkbox"/> Pawnbroker <input type="checkbox"/> Precious Metal & Gem Dealer	
<b>Residency</b>	
Has the agent, sole proprietor, or both partners lived in Wisconsin for at least 90 days prior to filing this application?	
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   If no, you are not eligible to apply for this license at this time per MCO 92-27-3.	
<b>Merchandise &amp; Sales</b>	
List all items you will be selling: <u>cell phone, accessories for the phone</u> <u>Tobacco, snacks and Beverages.</u>	
What percent of your anticipated annual sales will involve precious metals and gems? <u>0</u> %	
What percent of your anticipated annual sales will involve gold? <u>0</u> %	
Will you use a barcode scanner or scale for items to be sold by weight (price per pound, ounce, gram, etc.)?	
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes   If yes, a Weights & Measures License is also required.	
List any additional locations where you may temporarily conduct business: <u>None</u>	
How will transactions occur, if applicable? <input type="checkbox"/> Door-to-door <input type="checkbox"/> Conventions <input checked="" type="checkbox"/> Other: <u>NIA</u>	
<b>Security</b>	
What are your plans to provide security for business records? Records must be kept at the premises address.	
<input checked="" type="checkbox"/> Kept in safe <input type="checkbox"/> Kept in locked cabinet <input type="checkbox"/> Digital records <input type="checkbox"/> Other: _____	
What are your plans to ensure that business is not conducted with minors?	
<input checked="" type="checkbox"/> Check ID <input type="checkbox"/> Other: _____	
<b>Signature</b>	
I confirm that all information is true and correct. I understand I am required by law to inform the City Clerk of changes to this information within ten days.	
 _____ Print Name and Title of Individual, Partner, Member, Officer, or Agent of Corporation/LLC	_____ Sign

SUBMIT THIS FORM ALONG WITH THE  
BUSINESS LICENSE APPLICATION & BUSINESS LICENSE PLAN OF OPERATION



N  
↕

1171, N 56th St  
Parking

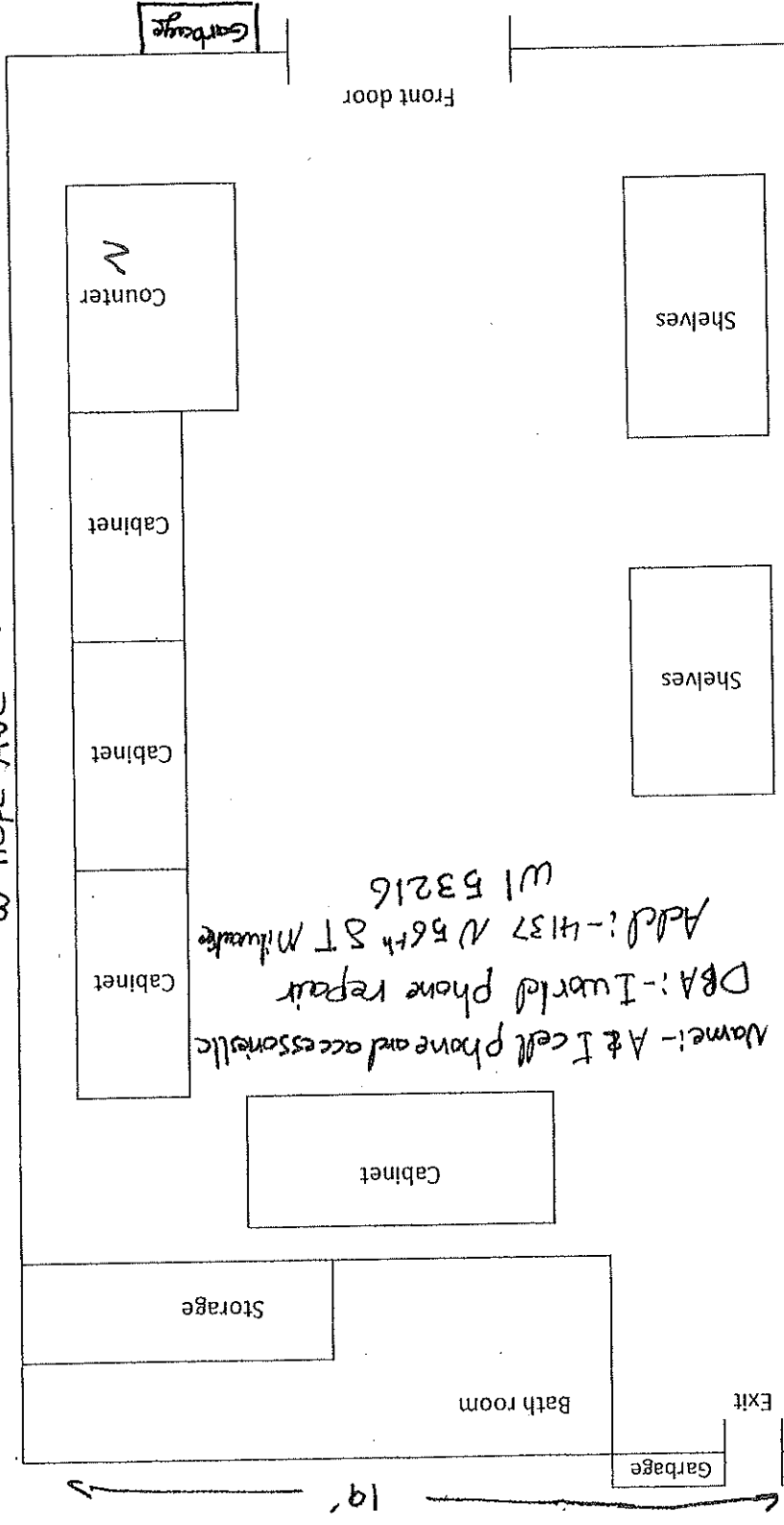
19'

S  
↕

Date: 8/21/2023

W Hope Ave 64'6"

W Capitol Dr 64'6"



Name:- A & I cell phone and accessories  
 DBA:- I world phone repair  
 Add:- 4137 N 56th St Milwaukee  
 WI 53216

Ikram Arshad  
 1409 Granade  
 ST  
 #14  
 Milwaukee  
 WI 53221

N 60th St