



CITY OF MILWAUKEE
OFFICE OF THE CITY CLERK

Tuesday, June 13, 2017

COMMITTEE MEETING NOTICE

AD 13

JOHNSON, Mark A, Agent
Sasas Hospitality LLC
3027 S 99th St
West Allis, WI 53227

You are requested to attend a hearing which is to be held in Common Council Chambers, Third Floor, City Hall on:

Tuesday, June 20, 2017 at 08:45 AM

Regarding: Your Class B Tavern and Public Entertainment Premises License Applications Requesting Instrumental Musicians, Bands, Disc Jockey, Magic Shows, Jukebox, Patrons Dancing, Karaoke and 1 Pool Table as agent for "Sasas Hospitality LLC" for "Best Western Plus Milwaukee Airport" at 5105 Snowell 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 in City Hall is available at reduced rates (5 hour limit) at the Milwaukee Center on the southwest corner of East Kilbourn and North Water Street. Parking tickets must be validated in the first floor information booth in City Hall.

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



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

Tuesday, June 13, 2017

COMMITTEE MEETING NOTICE

AD 13

JOHNSON, Mark A, Agent
Sasas Hospitality LLC
4909 Oakton St
Skokie, IL 60077

You are requested to attend a hearing which is to be held in Common Council Chambers, Third Floor, City Hall on:

Tuesday, June 20, 2017 at 08:45 AM

Regarding: Your Class B Tavern and Public Entertainment Premises License Applications Requesting Instrumental Musicians, Bands, Disc Jockey, Magic Shows, Jukebox, Patrons Dancing, Karaoke, and 1 Pool Table as agent for "Sasas Hospitality LLC" for "Best Western Plus Milwaukee Airport" at 5105 S Howell Av.

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JIM OW CZARSKI, CITY CLERK

BY: _____

Jessica Ceella
License Division Manager

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

MILWAUKEE POLICE DEPARTMENT

LICENSING

CRIMINAL RECORD/ORDINANCE VIOLATION/INCIDENTS SYNOPSIS

DATE: 04/24/2017

LICENSE TYPE: Class B Tavern

NEW:

RENEWAL:

No. 253542

Application Date: 04/20/2017

License Location: 5105 S Howell Av

Business Name: Best Western Plus

Licensee/Applicant: JOHNSON, Mark A
(Last Name, First Name, MI)

Date of Birth: 09/24/1955

Home Address: 3027 S 99th St

City: West Allis

State: WI **Zip Code:** 53227

Home Phone:

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

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

1. On 10/30/2007 the applicant was cited for Prohibited Alcohol Concentration. He was convicted on 05/28/2008 and his license was revoked for 14 months.

Date:05-04-17
Officer: PO Josh Dummann

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

Name of Premise: The Aviator Sports Bar and Grill
Address: 5105 S. Howell Av.
Phone: 414-769-2100

Owner:
Owner address:
City State Zip:
Owner Phone:
Owner email:

Licensee/Agent: Johnson, Mark
Home Address: 3027 S. 99th St.
City State Zip: West Allis, WI 53227
Phone: 414-507-7092
Email: mjohnson@bwplusemke.com

Preferred contact: Mark Johnson

Location currently open: YES NO

Projected open date: N/A

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

Hours of Operation: Sun: 11:30AM - 2:00AM 24 hours Y N
Mon: 11:30AM - 2:00AM
Tue: 11:30AM - 2:00AM
Wed: 11:30AM - 2:00AM
Thu: 11:30AM - 2:00AM
Fri: 11:30AM - 2:00AM
Sat: 11:30AM - 2:00AM

Premise Type: Tavern/Bar
Restaurant
Other:

Licenses currently held:

Alcohol: Yes No Class: B #: 0203974 Exp 4-7-17
Tobacco: Yes No #:
Food: Yes No #: 009533 Exp 4-7-18
Occupancy: Yes No #:
Other: Yes No Type: #:
Other: Yes No Type: #:

Who is your alcohol distributor? Capitol Hustings

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 3
 - f. Residential
 - g. Other businesses
 - h. Other: General Mitchell International Airport
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 bus stop? Yes No
7. Is there a bus shelter? Yes No N/A
8. Street parking Yes No
9. Is there a parking lot Yes No
10. Is the parking lot clean? Yes No N/A
11. Is the parking lot well lit? Yes No N/A
12. Valet Parking Yes No
 - a. Will this lot have a guard? Yes No N/A
 - b. Will this lot have cameras? Yes No N/A
13. Are there areas where a person could conceal themselves Yes No
14. Is there exterior lighting? Yes No. Does it appears to be adequate Yes No
15. Exterior Payphone? Yes No
16. Are there No Loitering Signs posted? Yes No
17. Are there exterior security cameras Yes No How Many:
18. Are the address numbers prominently displayed and easy to see Yes No

Exterior Comments: Large parking lot around exterior.

Camera Survey:

19. Does this location have security cameras? Yes No
20. Are they in working order? Yes No
21. What format are the cameras?
 - a. Color Yes No

- b. Digital Yes No
- c. VCR Yes No
- d. Recorded Yes No

- 22. How long is footage stored for later viewing: 30 days.
- 23. Are there exterior cameras Yes No How many:
- 24. Are there interior cameras Yes No How many: 5
- 25. Do all employees know how to retrieve recorded digital images/footage? Yes No
- 26. Cameras located in parking lot Yes No N/A How many

Camera Survey Comments:

Interior Survey:

- 27. What is the planned/posted capacity 158
- 28. What is the minimum number of employees that will be on premise 2
- 29. 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
- 30. Is the interior of the location neat and clean? Yes No
- 31. Does an interior camera face the entrance/exit? Yes No
- 32. Are emergency and non-emergency numbers posted near the phone? Yes No
- 33. 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

Interior Comments:

Security

- 34. How many security personnel are going to be employed: N/A
- 35. How will they be deployed: Interior Exterior N/A
- 36. What days will they be deployed Mon Tue Wed Thu Fri Sat Sun ALL
- 37. Will the security be managed by business or contracted
- 38. Will they be armed Yes No N/A
- 39. What type of security measures will be used: N/A
 - Wanding/metal detector
 - ID Scanner
 - Dress Code
 - Cover Charge
 - Age restriction
 - Other
- 40. When at capacity, how will the overflow crowd be managed? Managed in lobby area at interior entrance to tavern.
- 41. Will a guard monitor the overflow crowd at all times? Yes No

Security Comments: No security in interior.

ADDITIONAL COMMENTS/RECOMMENDATIONS:

On Thursday, May 4, 2017 I conducted a CPTED at 5105 S. Howell Av., the Aviator Sports Bar and Grill which is located in the Best Western Hotel.

I met with the new General Manger, Mark Johnson (M/W, 09-24-55). Mr. Johnson stated he was previously the General Manager of the Best Western about one year ago and had recently resumed his status as the General Manager.

Mr. Johnson stated he would be the licensee for all licenses at the location. Mr. Johnson stated no changes have been made to the restaurant since the last CPTED survey was conducted in 2016.

MILWAUKEE POLICE DEPARTMENT LICENSING

CRIMINAL RECORD/ORDINANCE VIOLATION/INCIDENTS SYNOPSIS

DATE: 03/17/2017

LICENSE TYPE: Class B Tavern

NEW:

RENEWAL:

No. 250500

Application Date: 03/17/2017

License Location: 5105 S Howll Av

Business Name: Dev Properties LLC

Licensee/Applicant: PARIKH, Himanshu B
(Last Name, First Name, MI)

Date of Birth: 09/24/1962

Home Address: 4050 S 71st St

City: Milwaukee

State: WI **Zip Code:** 53220

Home Phone:

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

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

1. On 12/17/2016 officers were dispatched to Best Western Midway Motor Lodge, 5105 S Howell Av to investigate a subject with gun call. The investigation revealed there was a boxing event in the ballroom. After the event there was a fight in the hallway between multiple subjects. The officers located a subject who had blood on his shirt. He stated he was jumped by a group of people and a female had a gun. He refused to be a complainant and would not give the officers his name. The manager stated no employee saw a gun but heard someone say there was a gun. The officers did not observe any violations at the business.

PREVIOUS PREMISE

MILWAUKEE POLICE DEPARTMENT
LICENSE INVESTIGATION UNIT

CRIMINAL RECORD/ORDINANCE VIOLATION/INCIDENTS
SYNOPSIS

DATE: 10/09/2014
LICENSE TYPE: BTAVN
NEW:
RENEWAL: X

No. 196169
Application Date: 10/07/2014
Expiration Date:

License Location: 5105 S Howell Av
Business Name: Best Western Milwaukee Airport

Aldermanic District:

Licensee/Applicant: Dhir, Anita
(Last Name, First Name, MI)
Date of Birth: 11/12/54

Home Address: 1770 Putneys Ct
City: Brookfield
Home Phone: (262) 938 - 0765

State: WI Zip Code: 53045

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

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

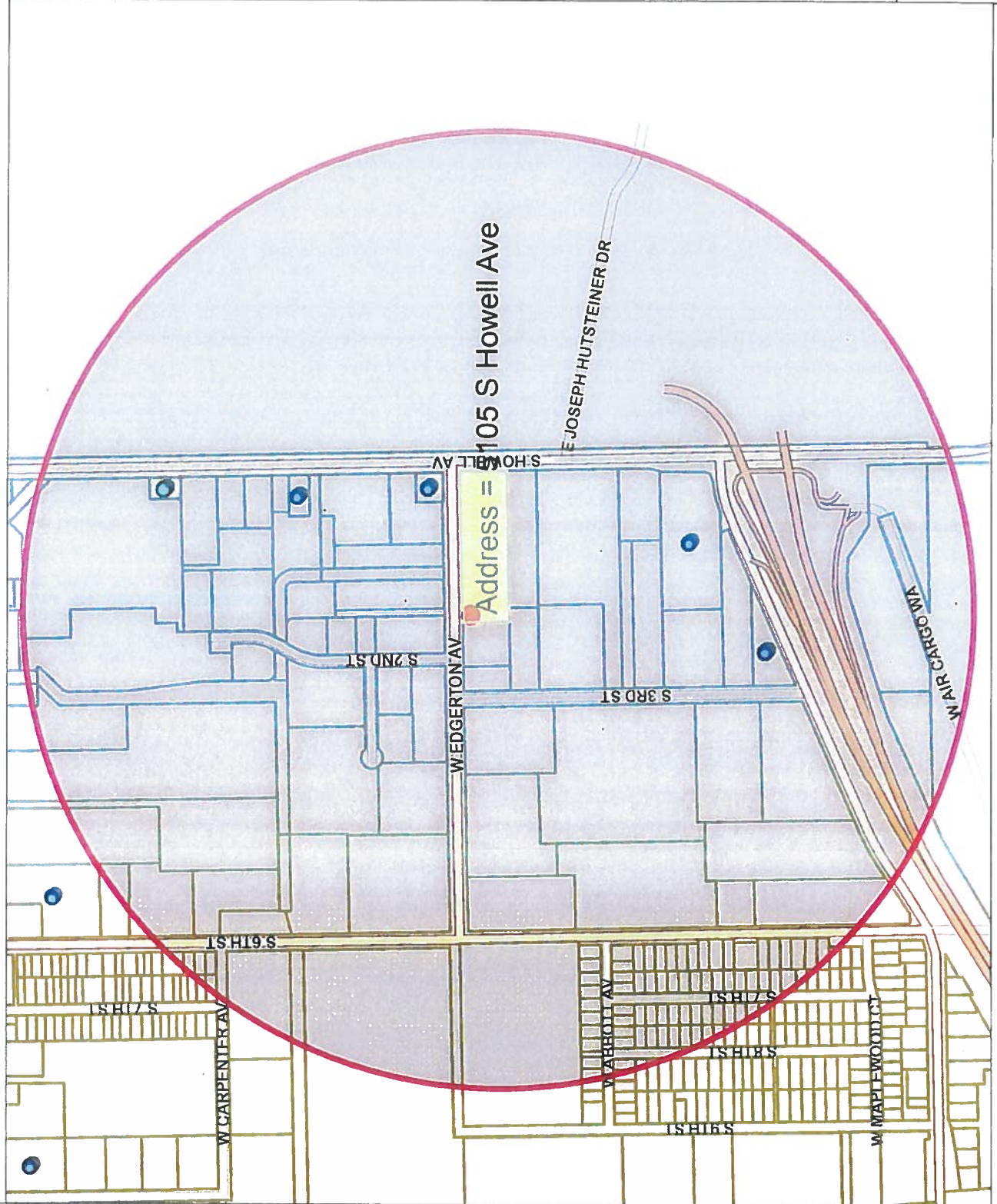
1. On 02/16/08 at 12:14 am, Milwaukee police were dispatched to 5150 S Howell Avenue for a Fight complaint. As officers arrived, they observed over 300 people running around and screaming in the parking lot with several vehicles blocking traffic. Investigation revealed the hall had been rented out for a Hip Hop party and as officers entered the hall to break up the fight, observed over 200 hundred people fighting. Officers called for an assist to help gain control and restore order. Over 15 squads were needed to help disperse the crowd. Police spoke to the manager of the hotel, Jean Kanczowski, who stated they were serving alcohol at the bar inside the hall when some patrons began to steal bottles of alcohol from behind the bar. Kanczowski stated they attempted to close the bar when patrons became upset over the bar shutting down. Patrons began to fight one another and police were called. A citation was issued to Kanczowski for Disorderly Premises and a sergeant who was on scene took 12 photos of the scene. Citation was not found in the municipal system.

2. On 10/27/08 at 7:30 pm, Milwaukee police were dispatched to 5105 S Howell Avenue for a Trouble With Subject. Investigation found a patron was refusing to pay for his dinner and drinks in which is consumed at the Lake City Restaurant. The patron was found to be intoxicated and he stated he had no money to pay his bill. He was arrested and issued two citations.

Previous premise

Alcohol License Concentration for 5105 S Howell Ave

City of Milwaukee, Wisconsin



- Legend -

- Milwaukee parcels
- Street names 10,000
- City limits
- Freeways 15,000
 - Freeways
 - Exit ramps
 - Entry ramps
 - Ramps
- Major streets 10,000
- Streets 10,000
- Street names 10,000
- Alcohol licenses**
 - Class A intoxicating liquor
 - Class A fermented malt beverage
 - Class A liquor and malt
 - Class B fermented malt beverage
 - Class B tavern
 - Class C wine retailer

- Notes -

Licensed Alcohol Beverage Establishments Within a .5 Mile Radius Centered on 5105 S Howell Ave on 04/20/17



Department of Administration - ITMD



Map Scale: 1: 9,450

Disclaimer: 4/20/2017

© City of Milwaukee, Wisconsin
Map Milwaukee: Property Information

| Licensed Alcohol Beverage Establishments Within a .5 Mile Radius Centered on 5105 S Howell Ave on 04/20/17 | | | | | | | Total |
|--|----------------------------------|----------------------------|--|----------------|---------------|------------------|-------|
| License Summary: | | | | | | | |
| Class B Fermented Malt Beverage Retailer's License | | | | | | | 1 |
| Class B Tavern License | | | | | | | 4 |
| Grant Total = 5 | | | | | | | |
| Legal entity | Trade name | Licensee | License type name | Total capacity | Room capacity | Expiration date | |
| AIRPORT PIZZA ROC, INC | Rocky Rococo Pizza & Pasta | EARL W RAMBO, Agt | Class B Fermented Malt Beverage Retailer's License | 98 | | 4/15/2018 19:00 | |
| ELLTON CORPORATION | FINAL APPROACH | JEFFREY T ELLSWORTH, Agt | Class B Tavern License | 120 | | 12/20/2017 18:00 | |
| JALAPENO LOCO, INC | JALAPENO LOCO | HUGO SAYNES, Agt | Class B Tavern License | 100 | | 12/15/2017 18:00 | |
| MANCHESTER LIQUOR, LLC | HYATT PLACE MILWAUKEE AIRPORT | ANTHONY SILENO, JR, Agt | Class B Tavern License | 300 | | 4/13/2018 19:00 | |
| SSS Milwaukee LLC | Clarion Inn Hotel/Cork N Cleaver | NICHOLAS J GRAFENAUER, Agt | Class B Tavern License | | | 1/16/2018 18:00 | |



Tuesday, June 13, 2017



Notice of Public Hearing

JOHNSON, Mark A, Agent
Best Western Plus Milwaukee Airport at 5105 S Howell Av
Class B Tavern and Public Entertainment Premises License Applications Requesting Instrumental Musicians, Bands, Disc Jockey, Magic Shows, Jukebox, Patrons Dancing, Karaoke, and 1 Pool Table

Tuesday, June 20, 2017 at 8:45 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 6/20/2017 at 8:45 AM, in Common Council Chambers, Third Floor, City Hall. If you wish, you may provide testimony at the hearing regarding the request; see below for further information. You are not required to attend the hearing. Once the Licenses Committee makes its recommendation, this recommendation is forwarded to the full Common Council for approval at its next regularly scheduled hearing. Please review the information below and if you have further questions regarding this process, please contact the License Division at (414) 286-2238.

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.

OCCUPAN MAIL ADD CITY AND ZIP CODE

Total Records: 1

Radius: 250.0 feet and Center of



Tuesday, June 13, 2017

Licenses Committee Notice of Hearing

Dev Properties
4050 S 71st St
Milwaukee, WI 53220

Date: 6/20/2017
Time: 08:45 AM
Location: Common Council Chambers, Third Floor, City Hall

The Licenses Committee will consider the following license application:

Class B Tavern and Public Entertainment Premises License Applications
Requesting Instrumental Musicians, Bands, Disc Jockey, Magic Shows, Jukebox,
Patrons Dancing, Karaoke, and 1 Pool Table
JOHNSON, Mark A, Agent
Best Western Plus Milwaukee Airport at 5105 S Howell Av

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.

If you have any questions, please call (414) 286-2238.





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: license@milwaukee.gov

ccl-busplan 9/26/16

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:
Hotel Lodging

Do you have any experience operating this type of business? No Yes If yes, explain: Our group operates the Clarion Inn Milwaukee Airport in addition to a number of hotels in Illinois

2. Business Operations

- a. Proposed Opening Date: April 19, 2017
- 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: Hotel Occupancy License #1171334
- 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: At Exit Doors
- b. Number of Garbage Cans: Inside: 10 Locations: Inside Several Locations
Outside: 7 Locations: At Exit Doors
- 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 Disposal

5. Security

- a. Are there onsite parking spaces? No Yes If yes, indicate how many? 298 and describe the parking security plan: Staff, Security Make Regular Checks & Rounds of Premises
- b. Is there a loading zone? No Yes If yes, describe the loading area security plan: Locked & Secured Doors
- 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, where? Public, Hotel Lounge, Restaurant Areas
- e. Will searches/identification checks be done upon entry? No Yes If yes, describe _____

6. Percentage of Sales (must total 100%)

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

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: 3 Rooming House: Number of Floors: _____
 Number of Rooms: 140 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 490 (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):
 1st Floor 2nd Floor Basement Storage Patio Beer Garden Sidewalk Café Deck Rooftop
 Other: Describe: _____
- b. Describe Location: Major Thoroughfare Secondary Street Other: 5105 S. Howell - Airport Location
- c. Nearest Major Cross Street: _____
- d. Describe Building: Free Standing Building Strip Mall Other: _____
- e. Describe Premises Structure: Single Story Multi-Story - # of Stories 3 Other: _____
- f. Describe Surrounding Area: Commercial Residential Industrial Other: _____
- g. Building Owner Name: _____ Phone Number: _____
 Business Owner Address: _____

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 | 11:30 AM | 12 mid | 150 | 25+ | 21 |
| Monday | 11:30 AM | 12 mid | 150 | 25+ | 21 |
| Tuesday | 11:30 AM | 12 mid | 250 | 25+ | 21 |
| Wednesday | 11:30 AM | 12 mid | 250 | 25+ | 21 |
| Thursday | 11:30 AM | 12 mid | 200 | 25+ | 21 |
| Friday | 11:30 AM | 2:00 AM | 300 | 25+ | 21 |
| Saturday | 11:30 AM | 2:00 AM | 300 | 25+ | 21 |

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 Closing Hours: Indoors: Alcohol beverage establishments: Same as alcohol license hours
 Non-alcohol establishments: 1:00 am Sunday thru Thursday, 1:30 am Friday & Saturday
 Outdoors: All establishments: 10:00 pm Sunday thru Thursday, 12:00 am Friday & Saturday
 (unless otherwise approved by the Common Council in licensee's plan of operation)

11. Signature(s)

Ann A. Johnson
 Sole Proprietor, Partner, Agent, or 20% or more Shareholder

 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 PLAN OF OPERATION**

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: SASAS HOSPITALITY LLC |
| Premise Address: 5105 S. HOWELL AVE, MILWAUKEE, WI 53207 |
| Proximity of Premises to Church, School, Daycare Center or Hospital |
| Is there at least 300 feet between the building and any church, school, daycare center or hospital? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| “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 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 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: _____ |
| Proof of Ownership, Lease, or Offer to Purchase (new & transfer applicants only) |
| Submit proof of ownership, lease, or offer to purchase the building with this application. A lease or offer to purchase must: a) Be in the same legal entity name as that apply for the license b) Reflect the same address as the premises address on this application c) Reflect current dates and d) Be signed by the lessor/seller and lessee/buyer |
| 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>PROPERTY</u> |
| c) Are you purchasing the stock and/or fixtures? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If yes, amount paid \$ <u>0</u> |
| d) Total amount paid for business \$ <u>0</u> |
| e) Total amount paid for goodwill of the business \$ <u>0</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 |

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

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? No Yes
- d) Does your lease allow for assignment to another party without the consent of the owner? No Yes
- e) For what length of time have you been guaranteed occupancy (number of years)? _____
- 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): _____

Notarized Signatures of Applicants

SUBSCRIBED AND SWORN TO BEFORE ME

This 19 day of April, 2017

Kathleen D. Mitchell
(Clerk/Notary Public)

My Commission Expires 2-12-18
*Notary Seal must be affixed

[Signature]
Sole Proprietor, Partner, 20% or more Shareholder, or Agent — only if there are no 20% or more shareholders

Additional partner or 20% or more shareholder

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 premise applicants must submit the following:

- Proof of ownership, lease or offer to purchase the building
- 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

TYPES OF ENTERTAINMENT (CHECK ALL THAT APPLY)

| | | | |
|---|---|--|---|
| <input checked="" type="checkbox"/> Instrumental Musicians | <input checked="" type="checkbox"/> Bands | <input type="checkbox"/> Battle of the Bands | <input type="checkbox"/> Comedy Acts |
| <input checked="" type="checkbox"/> Disc Jockey | <input checked="" type="checkbox"/> Magic Shows | <input type="checkbox"/> Poetry Readings | <input type="checkbox"/> Dancing by Performers |
| <input checked="" type="checkbox"/> Jukebox | <input type="checkbox"/> Wrestling | <input type="checkbox"/> Patron Contests | <input checked="" type="checkbox"/> Patrons Dancing |
| <input type="checkbox"/> Adult Entertainment/ Strippers/Erotic Dance | <input checked="" type="checkbox"/> Karaoke | <input type="checkbox"/> Bowling Alley | <input checked="" type="checkbox"/> Pool Tables |
| <input type="checkbox"/> Motion Pictures | <input type="checkbox"/> Amusement Machines – | <input type="checkbox"/> Concerts | <input type="checkbox"/> Theatrical Performances |
| How many? _____ | How many? _____ | Approx. # per year? _____ | How many? <u>ONE</u> |
| <input type="checkbox"/> Other: _____ | | Approx. # per year? _____ | |

Entertainment Indoor Hours: Alcohol beverage establishment: same as alcohol license hours.
Non-alcohol establishment: 10:30am to 1:00am Sun to Thurs; 1:30am Fri-Sat

Entertainment Outdoor Closing Hours: 10:00pm Sunday-Thursday; 12:00am Friday & Saturday; unless otherwise approved by Common Council.

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: **ONLY FOR BANQUET HALL & MEETING ROOMS**

LEGAL CAPACITY OF PREMISES

490 (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.

NOTARIZED SIGNATURES

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.

SUBSCRIBED AND SWORN TO BEFORE ME

This 18th day of April, 20 17

Amanda A. Jaggard Anderson
Agent/20% or More Shareholder/Partner

[Signature]
(Clerk/Notary Public)
My Commission Expires 10/21/2019

OFFICIAL SEAL

SOCORRO F. LENO

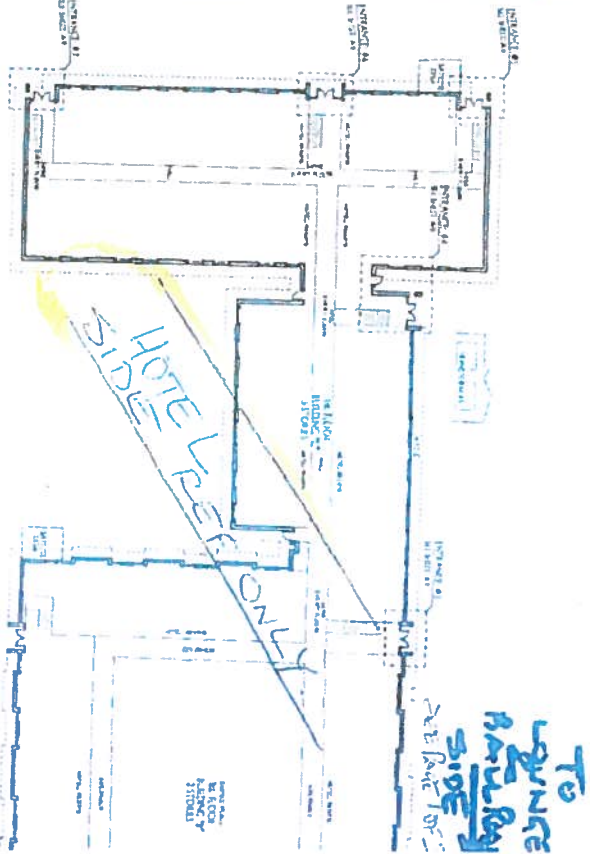
Notary Public - State of Illinois

My Commission Expires 10/21/2019

Agent/20% or More Shareholder/Partner

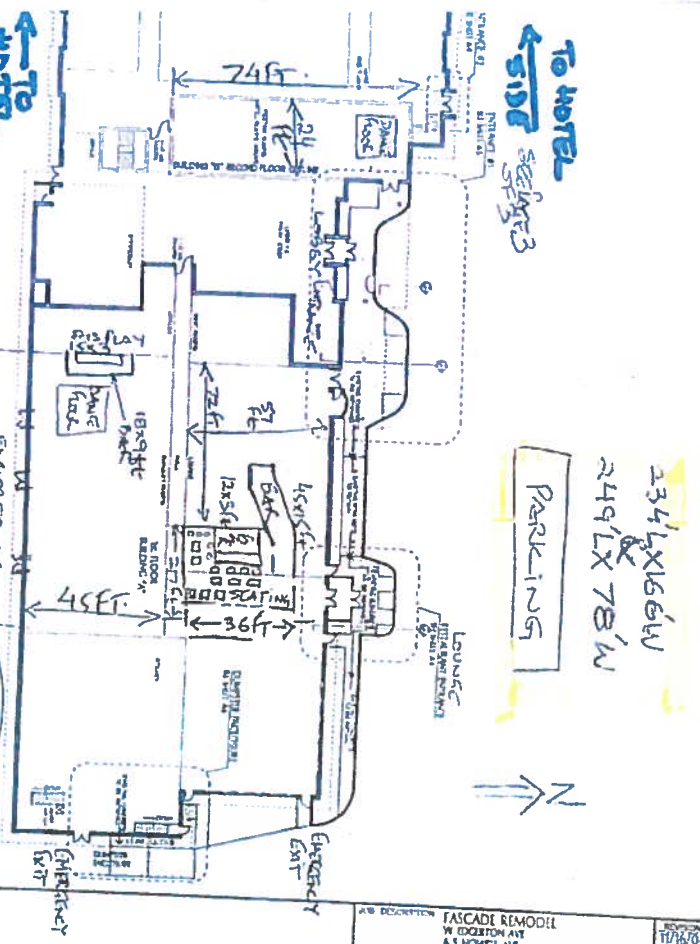
Office Use Only: Initials: _____ Filed: _____ App: _____

Check if only PEP (must be heard w/in 60 days) Granted _____ License # _____



7/16/12 Best Construction Practices
 SARAS HOSPITALITY LLC
 AGENT: MARK JOHNSON
 5105 S HOWELL AVE
 MILWAU, WI 53207

MAST SCALE PLAN 1/8" = 1'-0"



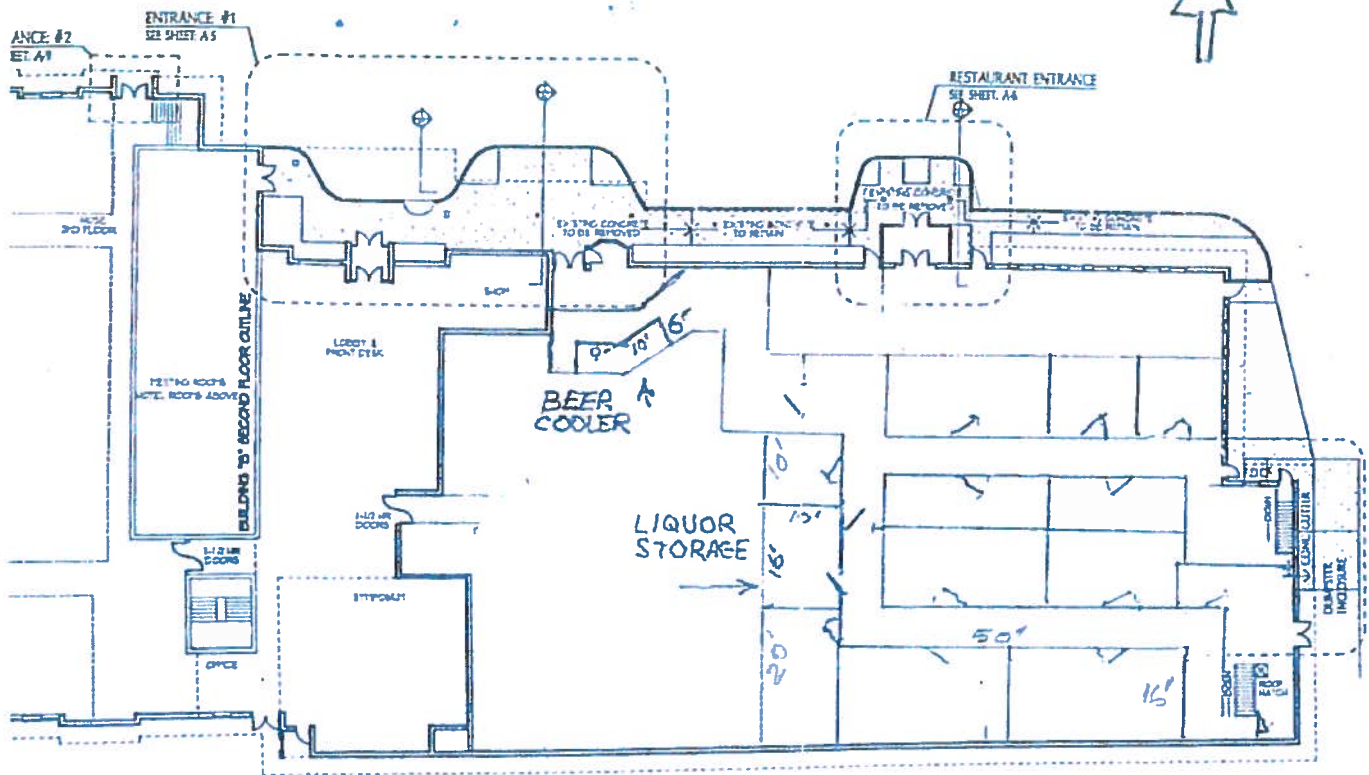
FORM SECT. FT
 4146 + 9881
 LOUNGE + RAIL ROOMS
 = 14027 SQ. FT.
 (137.5 LENGTH X 102' WIDTH)
 5105 S HOWELL
 MILWAU, WI 53207

| DETAILS OF FINISHES | |
|---------------------|-----------------------------|
| WALLS | 1/2" GYPSUM BOARD ON STUDS |
| CEILING | 1/2" GYPSUM BOARD ON JOISTS |
| FLOOR | 4" CONCRETE ON GRAVEL |
| DOORS | 1-1/2" SOLID CORE |
| WINDOWS | 1/2" GYPSUM BOARD ON SILL |
| BASE | 1/2" GYPSUM BOARD ON SILL |
| TRIM | 1/2" GYPSUM BOARD ON SILL |
| MECHANICAL | 1/2" GYPSUM BOARD ON SILL |
| ELECTRICAL | 1/2" GYPSUM BOARD ON SILL |
| PLUMBING | 1/2" GYPSUM BOARD ON SILL |
| PAINT | 1/2" GYPSUM BOARD ON SILL |
| GLASS | 1/2" GYPSUM BOARD ON SILL |
| IRONWORK | 1/2" GYPSUM BOARD ON SILL |
| MECHANICAL | 1/2" GYPSUM BOARD ON SILL |
| ELECTRICAL | 1/2" GYPSUM BOARD ON SILL |
| PLUMBING | 1/2" GYPSUM BOARD ON SILL |
| PAINT | 1/2" GYPSUM BOARD ON SILL |
| GLASS | 1/2" GYPSUM BOARD ON SILL |
| IRONWORK | 1/2" GYPSUM BOARD ON SILL |



1265 E. WISCONSIN AVE., PEAUNEE, WI 53072 (262)691-2121 FAX (262)691-1159

| | |
|---------------------|---|
| PROJECT DESCRIPTION | FASCIAE REMODEL |
| PROJECT LOCATION | W COLETON AVE & S HOWELL AVE, MILWAUKEE, WI |
| DATE | 8/05/04 |
| PROJECT NO. | AACTED FLOOR PLAN |
| REVISION | 7/16/12 |



D/B/A BEST WESTERN PLUS AIRPORT
 BASEMENT (STORAGE)

114 Sq. Ft (19'L x 6'W)
 460 Sq. Ft (46'L x 10'W)
 800 Sq. Ft (50'L x 16'W)
 1374 Sq. Ft TOTAL

SASAS HOSPITALITY LLC
 AGENT MARK JOHNSON

SIOSS & HOWELL
 MILWAUKEE WI 53207

4/28/17

PLAN
 20'-0"

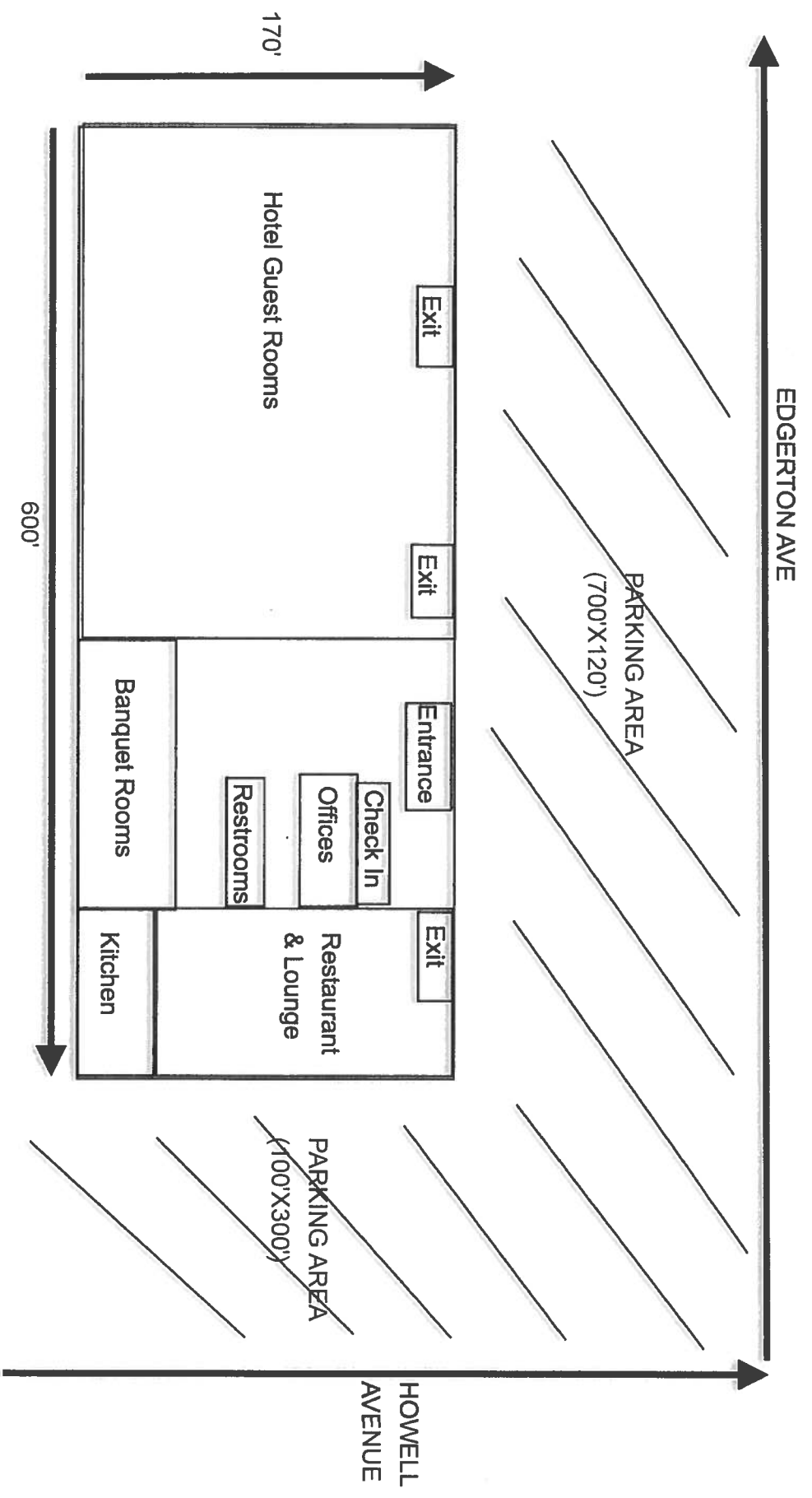
| BUILDING "A" INFORMATION | |
|--------------------------|-----------------------|
| AREA | APPROX SQUARE FOOTAGE |
| LEDGE | 4346 SQ. FT. |
| BAR/REST HALLS | 8714 SQ. FT. |
| DINING ROOM | 4393 SQ. FT. |
| STYPODUM | 1,107 SQ. FT. |
| LOBBY & SHOP | 338 SQ. FT. |
| STORAGE | 4848 SQ. FT. |
| OFFICES | 107 SQ. FT. |
| MANAGEMENT | 3480 SQ. FT. |
| REST ROOMS | 85 SQ. FT. |
| TOTAL SQ. FT. | 27848 SQ. FT. |

| BUILDING "B" INFORMATION | |
|--------------------------|-----------------------|
| AREA | APPROX SQUARE FOOTAGE |
| HOTEL ROOMS | 12844 SQ. FT. |
| COLLONADE | 8900 SQ. FT. |
| DOPED PLAZA | 5431 SQ. FT. |
| RESTROOMS | 2848 SQ. FT. |
| TOTAL SQ. FT. | 28023 SQ. FT. |

| BUILDING "C" INFORMATION | |
|--------------------------|-----------------------|
| AREA | APPROX SQUARE FOOTAGE |
| HOTEL ROOMS | 46334 SQ. FT. |
| HALL | 8195 SQ. FT. |
| TOTAL SQ. FT. | 54529 SQ. FT. |

| TOTAL COMPLEX | |
|---------------|-----------------------|
| AREA | APPROX SQUARE FOOTAGE |
| BUILDING "A" | 27848 SQ. FT. |
| BUILDING "B" | 28023 SQ. FT. |
| BUILDING "C" | 54529 SQ. FT. |
| TOTAL SQ. FT. | 110400 SQ. FT. |

| | |
|---|---|
| REVISION | 11/16/04 |
| JOB DESCRIPTION | FACADE REMODEL W. EDGERTON AVE & S. HOWELL AVE MILWAUKEE, WI |
| DATE | 8/05/04 |
| DESIGNER | |
| DRAWING DESCRIPTION | MASTER FLOOR PLAN |
| 1265 E. WISCONSIN AVE., PEWAUKEE, WI. 53072 | (262)891-2121 FAX (262)891-1159 |
| dibi INCORPORATED | |
| JOB DESCRIPTION | FACADE REMODEL W. EDGERTON & S. HOWELL AVE MILWAUKEE, WI |
| SHEET # | A-3 |
| JOB # | 455 |



AMM AMBACT

Agent for SASAS Hospitality LLC

SASAS Hospitality LLC

Best Western Plus Milwaukee Airport

5105 S Howell Ave

Milwaukee, WI 53207

April 17, 2017

Total
Square
Footage =