



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

Wednesday, May 07, 2025

COMMITTEE MEETING NOTICE

AD 06

MCCOLLUM, Timothy C, Agent
ATKINSON NEIGHBORHOOD MARKET LLC
4168 N 16TH ST
Milwaukee, WI 53209

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.

Tuesday, May 20, 2025 at 01:45 PM

The access code is <https://meet.goto.com/724980021>. Please see the enclosed best practices document for further instructions.

Regarding: Your Class A Fermented Malt License Application as agent for "Atkinson Neighborhood Market LLC" for "Atkinson Neighborhood Market" at 3825 N 16th 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
Phone: (414) 286-2238 Fax: (414) 286-3057 Email Address: License@milwaukee.gov

Roman, Carmen

From: License
Sent: Wednesday, April 30, 2025 10:03 AM
To: Roman, Carmen
Subject: FW: Concerns regarding application of 3825 N 15th Street Milwaukee, WI 53206.

Follow Up Flag: Follow up
Flag Status: Flagged

Please add objection (Favi will have app as this was held at Committee yesterday)

Marissa Milano
She/her/hers
License Coordinator
City Clerk-License Division
200 E Wells St #105
www.milwaukee.gov/license

REDACTED
BY CR

Take Our Survey!

-----Original Message-----

From:
Sent: Saturday, April 26, 2025 2:52 PM
To: License <LICENSE@milwaukee.gov>
Subject: Concerns regarding application of 3825 N 15th Street Milwaukee, WI 53206.

Dear City Official/Planning Committee,

I hope this message finds you well.

I am writing to respectfully express my concerns regarding the pending application for a new business on 3825 N 15th Street Milwaukee, WI 53206. This is near _____, where currently _____ serving the local community

_____ provided essential goods, including fresh groceries, food staples, beer and malt beverages, and tobacco products — meeting the everyday needs of residents in this area. We are proud to _____ strong relationships with the community based on consistent service, trust, and support.

Opening another business offering the same types of products just two blocks away would directly impact _____ ability to continue operating successfully. Oversaturation of similar businesses within a small area can lead to unhealthy competition, strain local businesses that have faithfully served the neighborhood, and disrupt the economic stability of the community. Rather than strengthening the area, it could create economic hardship, reduce the quality of services, and threaten the balance and vibrancy we have worked hard to maintain.

We kindly ask that the City thoughtfully consider the long-term impact this new application could have not only _____ but on the entire neighborhood's stability and prosperity before granting approval.

Thank you very much for your time and consideration. I am available to discuss this further and would welcome the opportunity to provide additional information.

Date: 2/20/2025
Officer: SCHLEI

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

Name of Premise: Atkinson Neighborhood Market
Address: 3825 N 15th St

Phone: None
Owner: Timothy McCollum
Owner address: 4168 N 16th St
City State Zip: Milwaukee, WI 53209
Owner Phone: 414-522-4936
Owner email: mccollumtimothy@rocketmail.com

Manager: Same as owner
Home Address:
City State Zip:
Phone:
Email:

Preferred contact: Owner

Location currently open: ☐ YES ☒ NO

Projected open date: April or May

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

Hours of Operation: Sun: 8am-10pm ☐24 hours ☐Y ☐N
Mon: 8am-10pm
Tue: 8am-10pm
Wed: 8am-10pm
Thu: 8am-10pm
Fri: 8am-10pm
Sat: 8am-10pm

Premise Type: ☐Liquor Store
☒Convenience Store
☐Other:

Licenses currently held:
Alcohol: ☐Yes ☐No Class: #:

Tobacco: ☐ Yes ☐ No #:
 Food: ☐ Yes ☐ No #:
 Extended Hours: ☐ Yes ☐ No #:
 Secondhand Dealer: ☐ Yes ☐ No Type: #:
 Other: ☐ Yes ☐ No Type: #:
 Other: ☐ Yes ☐ No Type: #:

Exterior Survey:

1. Is the area around the location clean? ☒ Yes ☐ No
2. What surrounds the location? (Check all the apply)
 - a. ☐ Park
 - b. ☐ School
 - c. ☐ Youth Center
 - d. ☒ Church
 - e. ☐ Tavern(s) If so, how many
 - f. ☒ Residential
 - g. ☒ Other businesses
 - h. ☐ Other:
3. Can you see from the outside of the location into the interior ☐ Yes ☒ No
4. Can you see the employees inside of the location from the outside ☒ Yes ☐ No
5. Are exterior windows free of signage ☒ Yes ☐ No
6. Is there a parking lot ☐ Yes ☒ No
7. Is the parking lot clean? ☐ Yes ☐ No N/A
8. Is the parking lot well lit? ☐ Yes ☐ No N/A
9. Are there areas where a person could conceal themselves ☐ Yes ☒ No
10. Is there exterior lighting? ☐ Yes ☒ No. Does it appears to be adequate ☐ Yes ☒ No
11. Exterior Payphone? ☐ Yes ☒ No
12. Are there No Loitering Signs posted? ☐ Yes ☒ No
13. Are there exterior security cameras ☐ Yes ☒ No How Many:
14. Are the address numbers prominently displayed and easy to see ☒ Yes ☐ No

Camera Survey:

15. Does this location have security cameras? ☐ Yes ☒ No
16. Are they in working order? ☐ Yes ☐ No
17. What format are the cameras?
 - a. Color ☐ Yes ☐ No
 - b. Digital ☐ Yes ☐ No
 - c. VCR ☐ Yes ☐ No
 - d. Recorded ☐ Yes ☐ No
18. How long is footage stored for later viewing:
19. Are there exterior cameras ☐ Yes ☒ No How many:
20. Are there interior cameras ☐ Yes ☒ No How many:
21. Do all employees know how to retrieve recorded digital images/footage? ☐ Yes ☐ No

Interior Survey:

22. Is the storeowner willing to be a standing complainant regarding loitering? ☒ Yes ☐ No
 a. If yes have them fill out the standing complaint form and give them two of the commercial signs ☒ Yes ☐ No
23. Is the interior of the location neat and clean? ☐ Yes ☒ No Still under renovation
24. Does an interior camera face the entrance/exit? ☐ Yes ☒ No
25. Is there a lockable area that separates employees from customers? ☐ Yes ☒ No
26. Does the store sell single chore boy? ☐ Yes ☐ No N/A
27. Does the store sell blunt wraps? ☐ Yes ☐ No N/A
28. Does the store sell scales? ☐ Yes ☐ No N/A
29. Does the store sell items that may be used as crack pipes? ☐ Yes ☐ No N/A
 a. Describe item
30. Does the store have an over abundance of sandwich baggies: ☐ Yes ☐ No N/A
31. Does the owner understand that these items are often used for drug use? ☒ Yes ☐ No
32. Do the products in the store appear to be new and rotated often? ☐ Yes ☐ No N/A
33. Are emergency and non-emergency numbers posted near the phone? ☐ Yes ☒ No
34. Does the owner know how to contact their police district directly? ☒ Yes ☐ No
 a. Did you provide a district contact guide to the owner? ☒ Yes ☐ No

Complete this section if alcohol establishment is a convenience store:

(** Read full ordinance for all details "68-4.3 Convenience Food Stores")

All convenience food stores not exempted under sub. 3 shall:

1. Is the cash register located in a manner so that at the time of a sales transaction, the employee and customer are both visible from the sidewalk? ☐ Yes ☒ No **
2. Are the glass entrance and exit doors clear of any signs or advertisements with the exception of a sign which states that the cash register contains \$50 or less and that the safe is no accessible to employees? ☒ Yes ☐ No
3. Does the store maintain one of the following on the licensed premise:
 - a. A safe that was in use at the convenience food store on August 17, 1994? ☐ Yes ☒ No
 - b. A drop-safe or time release safe that weighs at least 500 pounds or which is attached to or set into the floor in a manner approved by the police department? ☐ Yes ☒ No
4. Is lighting provided for the store's parking area during all hours of darkness when employees or customers are on the premises at a minimum average of 2-foot candles per square foot, unless the store is not open for business after sunset and before sunrise? ☐ Yes ☐ No ☒ N/A
5. Are at least two high-resolution surveillance security cameras installed? ☐ Yes ☒ No
6. Are the security cameras in working order? ☐ Yes ☒ No
7. Does one camera show an overall view of the counter and register area? ☐ Yes ☒ No
8. Does one camera show a clear, identifiable, full frame image of the face of each person entering and leaving the store? ☐ Yes ☒ No
9. Are the camera views obstructed by fixtures or displays? ☐ Yes ☒ No
10. Is the recorded footage stored for at least 30 days? ☐ Yes ☒ No
11. Do all store employees know how to record footage from the camera system to media capable of being transferred to police custody? ☐ Yes ☒ No
12. Are customer entrances/exits made of glass or other transparent material? ☒ Yes ☐ No
 a. Exception: A store that does not have such doors on August 17, 1994 shall not be required to install such doors until the holder of the store's food dealer license changes.
13. Has the owner and their employees attended the Robbery Prevention Training with in 120 days of ownership or employment? ☐ Yes ☒ No

- a. Contact Community Outreach and Education at 935-7836 for schedule.

Sub 3. Exemptions. The requirements of this section do not apply to a convenience food store that conforms to either of the following descriptions:

- a-1. The store is located in an enclosed shopping structure, enclosed commercial building or hospital. A convenience food store is not in an enclosed structure or building if a customer can enter it directly from the outside.

Does store conform to a-1 ☐ Yes ☒ No

- a-2 The store physically separates employees from customers with a solid partition that bars a person from entering the employee area from the customer area, has a secure lock on the employee side of any door between the employee area and the customer, and conducts all transaction through a service window or similar arrangement.

Does store conform to a-2 ☐ Yes ☒ No

- a. At the commissioner's discretion, a convenience store may be exempted from any or all of the regulations specified in sub 2.

Does this location hold an exemption from the commissioner regarding any of the requirements of Sub 2? ☐ Yes ☐ No ☐ Unknown

ADDITIONAL COMMENTS/RECOMMENDATIONS:

Location is very bare bones with no cameras inside or outside. There is very little exterior lighting on the side and none to the front. There is a socket for a light in the front but that may not be sufficient and there is no way to check as there was no bulb in it. The inside has a moderate musty smell and possible sewage. I could do very little to check the safety of the location as there are no safety measures to actually look at. I did suggest a camera to cover the front entrance and cameras on either side of the posts in the main area.



Area : 21,862,585.93 ft²

A map of the Arlington Heights area. A large circle represents the city boundary. Inside the circle, a location pin marks 'Arlington Heights'. Surrounding the circle are several neighborhoods: 'Garden Homes' to the northwest, 'Franklin Heights' to the west, 'Borchert Field' to the south, 'Williamsburg' to the east, and 'Grover Heights' to the northeast. A road labeled 'W Capitol Dr' runs horizontally through the center. Other roads shown include 'Green Lake Rd' to the north, 'St Paul Village' to the northeast, and '22nd Ave' to the southeast. Various street numbers are visible, such as 108, 150, 43, 67, 150, and 22.

Class A Liquor and Malt

 City Limits

1.18.056

0 0.1 0.2 0.4 ml

0 0.17 0.35 0.7 km

San Germany Mass Distributors, City of Milwaukee, WI, Milwaukee County Land Use, San Toronto, Ontario, Canada, GeoTechnology, Inc.

Summary

Name	Count	Area(ft ²)	Length(mi)
Alcohol Licenses	10		

Alcohol Licenses

#	Legal Entity	Trade Name	Licensee	Address	License Type Name	Total Capacity	Expiration Date	Count
1	ATKINSON BEER & LIQUOR MART, INC	ATKINSON BEER & LIQUOR MART, INC	DARRELL C NICHOLSON, Agt	1101 W ATKINSON AV	Class A Malt & Class A Liquor License		2/8/2025, 6:00 PM	1
2	CATFISH LOUNGE, INC	CATFISH LOUNGE	JAMIE N GLADNEY, Agt	3646 N TEUTONIA AV	Class B Tavern License	80	6/12/2025, 7:00 PM	1
3	YOUNG'S BAR, INC	YOUNG'S BAR	CHARLENE E GRAY, Agt	3571 N TEUTONIA AV	Class B Tavern License	50	6/13/2025, 7:00 PM	1
4	Fateh 1 Inc.	Jack's Liquor	Sukhchain Singh, Agt	3565-67 N Teutonia AV	Class A Malt & Class A Liquor License		6/30/2025, 7:00 PM	1
5	SHANANIGAN S	SHANANIGAN S	CETTERY M GARDNER, SP	3751 N TEUTONIA AV	Class B Tavern License	70	9/23/2025, 7:00 PM	1
6	The 4th Quarter Sports Bar and Grill LLC	The 4th Quarter	Devida M Glover, Agt	1300 W KEEFE AV	Class B Tavern License		9/20/2025, 7:00 PM	1
7	DEAR N BEER FOOD LLC	DEAR N BEER FOOD	Ashhar Singh, Agt	1901 W Atkinson AV	Class A Fermented Malt Beverage Retailer's License		10/10/2025, 7:00 PM	1
8	DHILLON FOOD AND LIQUOR INC.	STARK FOOD	Baljinder S Dhillon, Agt	1301 W ATKINSON AV	Class A Malt & Class A Liquor License		10/16/2025, 7:00 PM	1
9	MALLET'S FOODS	MALLET'S FOODS	JOE F MALLET, SP	3501 N 14TH ST	Class A Fermented Malt Beverage Retailer's License		10/16/2025, 7:00 PM	1
10	STEWART'S REST SPOT	STEWART'S REST SPOT	JESSICA P STEWART, SP	1422 W ATKINSON AV	Class B Tavern License	49	11/24/2025, 6:00 PM	1

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



Wednesday, May 07, 2025



Notice of Public Hearing

Blank Notice

MCCOLLUM, Timothy C, Agent
Atkinson Neighborhood Market at 3825 N 15TH St
Class A Fermented Malt License Application

Tuesday, May 20, 2025 at 1:45 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 5/20/2025 at 1:45 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 internet are asked to contact the staff assistant, Yadira Melendez at (414) 286-2775 or 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.

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	1421 W ATKINSON AVE# 1	MILWAUKEE, WI 53206-2925
CURRENT OCCUPANT	1421 W ATKINSON AVE# 2	MILWAUKEE, WI 53206-2925
CURRENT OCCUPANT	1421 W ATKINSON AVE# 3	MILWAUKEE, WI 53206-2925
CURRENT OCCUPANT	1421 W ATKINSON AVE# 4	MILWAUKEE, WI 53206-2925
CURRENT OCCUPANT	1421 W ATKINSON AVE# 5	MILWAUKEE, WI 53206-2968
CURRENT OCCUPANT	1421 W ATKINSON AVE# 6	MILWAUKEE, WI 53206-2968
CURRENT OCCUPANT	1421 W ATKINSON AVE# 7	MILWAUKEE, WI 53206-2968
CURRENT OCCUPANT	1421 W ATKINSON AVE# 8	MILWAUKEE, WI 53206-2968
CURRENT OCCUPANT	1429 W ATKINSON AVE# 1	MILWAUKEE, WI 53206-2926
CURRENT OCCUPANT	1429 W ATKINSON AVE# 2	MILWAUKEE, WI 53206-2926
CURRENT OCCUPANT	1429 W ATKINSON AVE# 3	MILWAUKEE, WI 53206-2926
CURRENT OCCUPANT	1429 W ATKINSON AVE# 4	MILWAUKEE, WI 53206-2926
CURRENT OCCUPANT	1429 W ATKINSON AVE# 5	MILWAUKEE, WI 53206-2964
CURRENT OCCUPANT	1429 W ATKINSON AVE# 6	MILWAUKEE, WI 53206-2964
CURRENT OCCUPANT	1429 W ATKINSON AVE# 7	MILWAUKEE, WI 53206-2964
CURRENT OCCUPANT	1429 W ATKINSON AVE# 8	MILWAUKEE, WI 53206-2964
CURRENT OCCUPANT	1430 W ATKINSON AVE# 5	MILWAUKEE, WI 53206-2962
CURRENT OCCUPANT	1430 W ATKINSON AVE# 6	MILWAUKEE, WI 53206-2962
CURRENT OCCUPANT	1430 W ATKINSON AVE# 7	MILWAUKEE, WI 53206-2962
CURRENT OCCUPANT	1430 W ATKINSON AVE# 8	MILWAUKEE, WI 53206-2962
CURRENT OCCUPANT	1436 W ATKINSON AVE	MILWAUKEE, WI 53206-2922
CURRENT OCCUPANT	1438 W ATKINSON AVE# 1	MILWAUKEE, WI 53206-2963
CURRENT OCCUPANT	1438 W ATKINSON AVE# 2	MILWAUKEE, WI 53206-2963
CURRENT OCCUPANT	1438 W ATKINSON AVE# 3	MILWAUKEE, WI 53206-2963
CURRENT OCCUPANT	1438 W ATKINSON AVE# 4	MILWAUKEE, WI 53206-2963
CURRENT OCCUPANT	1444 W ATKINSON AVE	MILWAUKEE, WI 53206-2922
CURRENT OCCUPANT	1515 W ATKINSON AVE# 1	MILWAUKEE, WI 53206-2928
CURRENT OCCUPANT	1515 W ATKINSON AVE# 10	MILWAUKEE, WI 53206-2928
CURRENT OCCUPANT	1515 W ATKINSON AVE# 11	MILWAUKEE, WI 53206-2928
CURRENT OCCUPANT	1515 W ATKINSON AVE# 12	MILWAUKEE, WI 53206-2928
CURRENT OCCUPANT	1515 W ATKINSON AVE# 13	MILWAUKEE, WI 53206-2928
CURRENT OCCUPANT	1515 W ATKINSON AVE# 14	MILWAUKEE, WI 53206-2928
CURRENT OCCUPANT	1515 W ATKINSON AVE# 15	MILWAUKEE, WI 53206-2928
CURRENT OCCUPANT	1515 W ATKINSON AVE# 2	MILWAUKEE, WI 53206-2928
CURRENT OCCUPANT	1515 W ATKINSON AVE# 3	MILWAUKEE, WI 53206-2928
CURRENT OCCUPANT	1515 W ATKINSON AVE# 4	MILWAUKEE, WI 53206-2928
CURRENT OCCUPANT	1515 W ATKINSON AVE# 5	MILWAUKEE, WI 53206-2928
CURRENT OCCUPANT	1515 W ATKINSON AVE# 6	MILWAUKEE, WI 53206-2928
CURRENT OCCUPANT	1515 W ATKINSON AVE# 7	MILWAUKEE, WI 53206-2928
CURRENT OCCUPANT	1515 W ATKINSON AVE# 8	MILWAUKEE, WI 53206-2928
CURRENT OCCUPANT	1515 W ATKINSON AVE# 9	MILWAUKEE, WI 53206-2928
CURRENT OCCUPANT	3744 N 16TH ST	MILWAUKEE, WI 53206-2902
CURRENT OCCUPANT	3745 N 15TH ST	MILWAUKEE, WI 53206-2908
CURRENT OCCUPANT	3748 N 15TH ST	MILWAUKEE, WI 53206-2907
CURRENT OCCUPANT	3748A N 15TH ST	MILWAUKEE, WI 53206-2907
CURRENT OCCUPANT	3750 N 16TH ST	MILWAUKEE, WI 53206-2902

CURRENT OCCUPANT	3751 N 15TH ST	MILWAUKEE, WI 53206-2908
CURRENT OCCUPANT	3754 N 15TH ST	MILWAUKEE, WI 53206-2907
CURRENT OCCUPANT	3754 N 16TH ST	MILWAUKEE, WI 53206-2902
CURRENT OCCUPANT	3757 N 15TH ST	MILWAUKEE, WI 53206-2908
CURRENT OCCUPANT	3802 N 16TH ST	MILWAUKEE, WI 53206-2944
CURRENT OCCUPANT	3808 N 16TH ST	MILWAUKEE, WI 53206-2944
CURRENT OCCUPANT	3808A N 16TH ST	MILWAUKEE, WI 53206-2944
CURRENT OCCUPANT	3809 N 15TH ST	MILWAUKEE, WI 53206-2910
CURRENT OCCUPANT	3812 N 16TH ST	MILWAUKEE, WI 53206-2944
CURRENT OCCUPANT	3815 N 15TH ST	MILWAUKEE, WI 53206-2910
CURRENT OCCUPANT	3816 N 16TH ST	MILWAUKEE, WI 53206-2944
CURRENT OCCUPANT	3819 N 15TH ST	MILWAUKEE, WI 53206-2910
CURRENT OCCUPANT	3819A N 15TH ST	MILWAUKEE, WI 53206-2910
CURRENT OCCUPANT	3822 N 16TH ST	MILWAUKEE, WI 53206-2944
CURRENT OCCUPANT	3822A N 16TH ST	MILWAUKEE, WI 53206-2944
CURRENT OCCUPANT	3828 N 16TH ST	MILWAUKEE, WI 53206-2944
CURRENT OCCUPANT	3848 N 15TH ST	MILWAUKEE, WI 53206-2911
CURRENT OCCUPANT	3848A N 15TH ST	MILWAUKEE, WI 53206-2911
CURRENT OCCUPANT	3853 N 15TH ST# 1	MILWAUKEE, WI 53206-2913
CURRENT OCCUPANT	3853 N 15TH ST# 2	MILWAUKEE, WI 53206-2913
CURRENT OCCUPANT	3853 N 15TH ST# 3	MILWAUKEE, WI 53206-2913
CURRENT OCCUPANT	3853 N 15TH ST# 4	MILWAUKEE, WI 53206-2913
CURRENT OCCUPANT	3855 N 15TH ST# 5	MILWAUKEE, WI 53206-2914
CURRENT OCCUPANT	3855 N 15TH ST# 6	MILWAUKEE, WI 53206-2914
CURRENT OCCUPANT	3855 N 15TH ST# 7	MILWAUKEE, WI 53206-2914
CURRENT OCCUPANT	3855 N 15TH ST# 8	MILWAUKEE, WI 53206-2914
CURRENT OCCUPANT	3856 N 15TH ST	MILWAUKEE, WI 53206-2911
CURRENT OCCUPANT	3856A N 15TH ST	MILWAUKEE, WI 53206-2911
CURRENT OCCUPANT	3858 N 15TH ST	MILWAUKEE, WI 53206-2911
CURRENT OCCUPANT	3858A N 15TH ST	MILWAUKEE, WI 53206-2911
CURRENT OCCUPANT	3863 N 15TH ST	MILWAUKEE, WI 53206-2912
CURRENT OCCUPANT	3863A N 15TH ST	MILWAUKEE, WI 53206-2912
CURRENT OCCUPANT	3869 N 15TH ST	MILWAUKEE, WI 53206-2912

Blank Notice

Total Records: 79

Radius 250 feet and Center of the Circle: 3825 N 15th St



APPLICATION AMENDMENT

Office of the City Clerk License Division

200 E. Wells Street, Room 105, Milwaukee, WI 53202 (414) 286-2238

Date:

4/21/25

To the License Division of the City of Milwaukee:

I, Timothy McCollum, wish to amend my answer(s) on the application for a

(full legal name)

Alcohol/Food/Tobacco license at 3825 N 15th Street

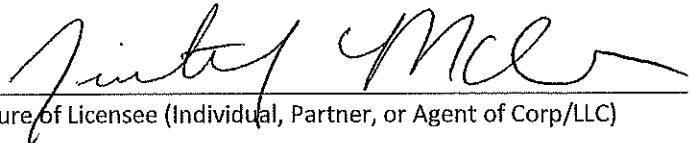
(type of license)

(premises address, if applicable)

by adding or amending the following information (complete only those sections being amended):

1. Answer to Question(s) # _____ should be: _____
2. Agent should be (full legal name): _____ Also complete 3, 4, 5 & 6
3. Date of birth should be: _____
4. Home address should be (include city/state/zip): _____
5. Phone number should be (include area code): _____
6. Driver's License Number/State ID Number should be: _____
7. Corporation/LLC name should be (full legal name): _____
8. Business name should be: _____
9. Premises address should be (include city/state/zip): _____
10. Business phone number should be (include area code): _____
11. Mailing address should be (include city/state/zip): 4168 N 16th Street Milwaukee
WI, 53209
12. Email address should be: _____
13. Recycling/Salvaging/Towing: Location where vehicle will be parked should be (include city/state/zip): _____
14. Class B Tavern: Age Distinction should be: _____
15. Other: Updating Sales Percentages
Food (60%) Alcohol (20%) Tobacco (9%) Household goods
(14%)

(Check with the License Division before submitting "Other" amendments using this form.)


 Signature of Licensee (Individual, Partner, or Agent of Corp/LLC)

Office Use Only:

Application #: 375916 Date: 4-21-25 Initials: TR To LC: _____LC Email: ☐MPD ☐NS ☐HD Initials: _____



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:

Operate a neighborhood store focused on fostering a sense of community by offering high-quality, locally sourced products that meet the needs of residents.

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

2. Business Operations

- a. Proposed Opening Date: March 1, 2025
- 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: _____
- 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: 2 Locations: 1 in front of store, one in the back
Outside: 2 Locations: side of building
- 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: City of Milwaukee

5. Security

- a. Are there onsite parking spaces? ☒ No ☐ Yes If yes, how many? _____ and describe the parking security plan: _____
- 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? 4 and list locations: Inside the store, 2 outside the front and side.
- e. Will searches/identification checks be done upon entry? ☒ No ☐ Yes If yes, describe _____

6. Percentage of Sales (must total 100%)

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

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

Type 1

- | | | | |
|---|---|---|--|
| <input type="checkbox"/> Full Service Restaurant | <input type="checkbox"/> Cafe/Coffee Shop | <input type="checkbox"/> Deli or Fast Food Restaurant | <input type="checkbox"/> Private/Fraternal/Veterans Club |
| <input type="checkbox"/> Night Club | <input type="checkbox"/> Tavern | <input type="checkbox"/> Cocktail Lounge | <input type="checkbox"/> Teen Club |
| <input type="checkbox"/> Banquet Hall | <input type="checkbox"/> Sports Facility | <input type="checkbox"/> Bowling Alley | |
| <input type="checkbox"/> Hotel/Motel: Number of Floors: _____
Number of Rooms: _____ | <input type="checkbox"/> Rooming House: Number of Floors: _____
Number of Rooms: _____ | | |

Type 2

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

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

- | | | | | | |
|--|---|--|---|---|---|
| <input checked="" type="checkbox"/> Occupancy Permit | <input checked="" type="checkbox"/> Cigarette, Tobacco,
Electronic Vape Products | <input type="checkbox"/> Gas Station | <input type="checkbox"/> Extended Hours | <input type="checkbox"/> Class "B" Tavern | <input type="checkbox"/> Weights & Measures |
| <input type="checkbox"/> Secondhand Dealer | <input type="checkbox"/> Precious Metal & Gem | <input checked="" type="checkbox"/> Other: <u>Class A Mail</u> | | | |

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

Capacity _____ (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: _____

c. Nearest Major Cross Street: Atkinson 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: Home City 3944 LLC Phone Number: 414-344-4300

Building Owner Address: PO Box 180525 Delafield WI 53018

10. Hours of Operation & Customers

Will customers be entering the premises? ☐ No ☒ Yes

8am - 9pm for alcohol sales (daily)

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	8 am	10 pm	50-200	15-60	none
Monday	8 am	10 pm	50-200	15-60	none
Tuesday	8 am	10 pm	50-200	15-60	none
Wednesday	8 am	10 pm	50-200	15-60	none
Thursday	8 am	10 pm	50-200	15-60	none
Friday	8 am	10 pm	50-200	15-60	none
Saturday	8 am	10 pm	50-200	15-60	none

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]

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/licenseLegal Entity Name: Atkinson Neighborhood Market LLCPremise Address: 3825 N 15th Street**Proximity of Premises to Church, School, Daycare Center or Hospital**Is the building within 300 feet of any church, school, daycare center or hospital? ☐ No ☒ Yes**"Service Bar Only" Designation**If applying for Class B or C license, are you applying for "Service Bar Only"? ☐ No ☒ Yes

Service Bar Only means customers cannot sit at the bar. Alcohol is served to employees who serve patrons seated at tables.

No stools, chairs or other articles of furniture shall be placed at the service bar for patrons to sit upon.

Business Informationa) Are you taking out this application for anyone that may not be eligible for a license? ☒ No ☐ 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? ☐ No ☒ 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? ☒ No ☐ 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?

☒ No ☐ Yes If yes, list name and address: _____**Property Information (New & Transfer Applicants Only)**a) Do you own or lease the building? ☐ Own ☒ Leaseb) Who owns the fixtures (for example, coolers, etc.)? owner / landlordc) Are you purchasing the stock and/or fixtures? ☒ No ☐ Yes If yes, amount paid \$ _____d) Total amount paid for business \$ 0e) Total amount paid for goodwill of the business \$ 0

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? ☒ No ☐ Yes**Lease Information (New & Transfer Applicants who are leasing the premises only)**a) Date lease begins 1/1/25 Ends 12/31/25b) Monthly rental \$ 1200c) Do you have an option to renew the lease? ☐ No ☒ Yesd) Does your lease allow for assignment to another party without the consent of the owner? ☒ No ☐ Yese) For what length of time have you been guaranteed occupancy (number of years)? 24 months


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


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

**FOOD DEALER LICENSE PLAN OF OPERATION**

OFFICE OF THE CITY CLERK, LICENSE DIVISION
CITY HALL, 200 E. WELLS ST, ROOM 105, MILWAUKEE, WI 53202
(414) 286-2238 • license@milwaukee.gov • www.milwaukee.gov/license

Legal Entity Name:

Atkinson Neighborhood Market LLC

Premises Address:

3825 N 15th Street**SECTION 1****TYPE OF BUSINESS**

What will be the majority of your food sales? (check one)



Restaurant Items (meals):

MEALS include, but are not limited to, chicken, ribs, sandwiches, roasted corn, baked potatoes, hot dogs, brats, tacos, nachos w/ cheese and meat, French fries, cooked or deep fried vegetables/fruit, cooked cheese curds, corn dogs, egg rolls, salads.



Retail Items (snacks and beverages):

RETAIL items include, but are not limited to, ice cream/soft serve, lemonade, snow cones, coffee, espresso, cappuccino, tea, fruit juice, smoothies, candy, dispensed soda, fruit cups, bakery, cookies, kettle corn, cotton candy, funnel cakes, fritters, tortilla chips w/ cheese.

Will it be a convenience store? ☒ Yes ☐ No

A convenience store contains less than 7,500 square feet of retail space and has, as its primary business, the sale of basic food items and in addition, sells household products or is a filling station that sells basic food items and household products.



Bed & Breakfast



Micro Market

All Applicants: Submit a menu or a list of food items that will be sold.

Will any wholesale business be done? ☒ No ☐ Yes If yes, what percentage of food sales will be wholesale?☐ Less than 25%☐ 25% or More AND:☐ Restaurant items (meals) will be sold – Complete this application and also contact DATCP.☐ NO restaurant items (meals) will be sold - Do NOT complete this application. Contact DATCP only.**SECTION 2****FOOD PROCESSING**Will any food processing be done? ☐ No ☒ Yes

Processing is defined as assembling, grinding, cutting, mixing, baking, coating, stuffing, packing, bottling, grilling, canning, extracting, fermenting, distilling, pickling, freezing, drying, smoking, or packaging.

SECTION 3**FOOD REQUIRING TEMPERATURE CONTROL**Will any food that requires temperature control be sold? ☐ No ☒ Yes
(includes dairy products such as milk, cheese, and ice cream, fish, shellfish, meat, poultry)

If yes, list the types of food items: Meat, Ice Cream, Cheese, Milk

SECTION 4 DETAILS OF OPERATION

- Will you have seating on site for dining? ☒ No ☐ Yes
- Will you be doing any catering? ☒ No ☐ Yes
- Will you be doing any delivery? ☒ No ☐ Yes
- Will you have outdoor activities? ☒ No ☐ Yes - Check all that apply: ☐ Bar ☐ Cooking/Grilling ☐ Dining
- Will you have a drive thru window? ☒ No ☐ Yes - Are hours different from inside? ☐ No ☐ Yes
If Yes, provide drive thru hours: _____
- Will scales or barcode scanners be used? ☒ No ☐ Yes - You must also apply for a Weights & Measures License.

SECTION 5 ADDITIONAL SITES

Where will food be prepared and/or sold?

- ☒ At a single site ☐ At multiple sites: How many? _____ (for example, a hotel with several dining rooms or bars)

If multiple sites, attach a Food Dealer Additional Site Addendum (ccl-foodadd) for each additional site.

SECTION 6 CONSTRUCTION OR CHANGES

Are you planning any construction, remodeling or equipment changes?

- ☒ No If No, SKIP to Section 7
- ☐ Yes If Yes, check all that apply: ☐ New construction of a building ☐ Renovation or remodeling
☐ Construction changes to existing building ☐ Equipment changes only

Provide a brief description of the changes: _____

Start date: _____

Name, Address & Phone Number of Architect: _____

_____Name, Address & Phone Number of Contractor: _____

_____**SECTION 7 ALCOHOL BEVERAGES**

Are you applying for an alcohol beverage license?

- ☐ No If No, SKIP to Section 8
- ☒ Yes If YES, if your food license is approved prior to the alcohol license, when do you want the food license issued?
☐ Immediately ☒ At the same time as the alcohol license

SECTION 8 ACKNOWLEDGEMENTS & SIGNATURE

You must initial each item confirming your understanding:

ym

I understand the Health Department must conduct an inspection and advise the License Division of their approval before the license may be issued.

ym

I understand I must obtain an occupancy permit from the Department of Neighborhood Services and an inspection may be required. Neighborhood Services must advise the License Division of their approval before the license may be issued.

ym

I understand the district alderperson will review and either support or object to my application. If he/she objects, I may appeal and be scheduled to appear before the Licenses Committee. The Licenses Committee will then make a recommendation to the Common Council. The Common Council must grant the license before it may be issued.

ym

I understand proof of payment for all license fees must be on file in the License Division before the license may be issued and the license must be issued and posted in my establishment prior to opening for business.

ym

I will not operate my food business until the license has been issued and posted in the establishment.

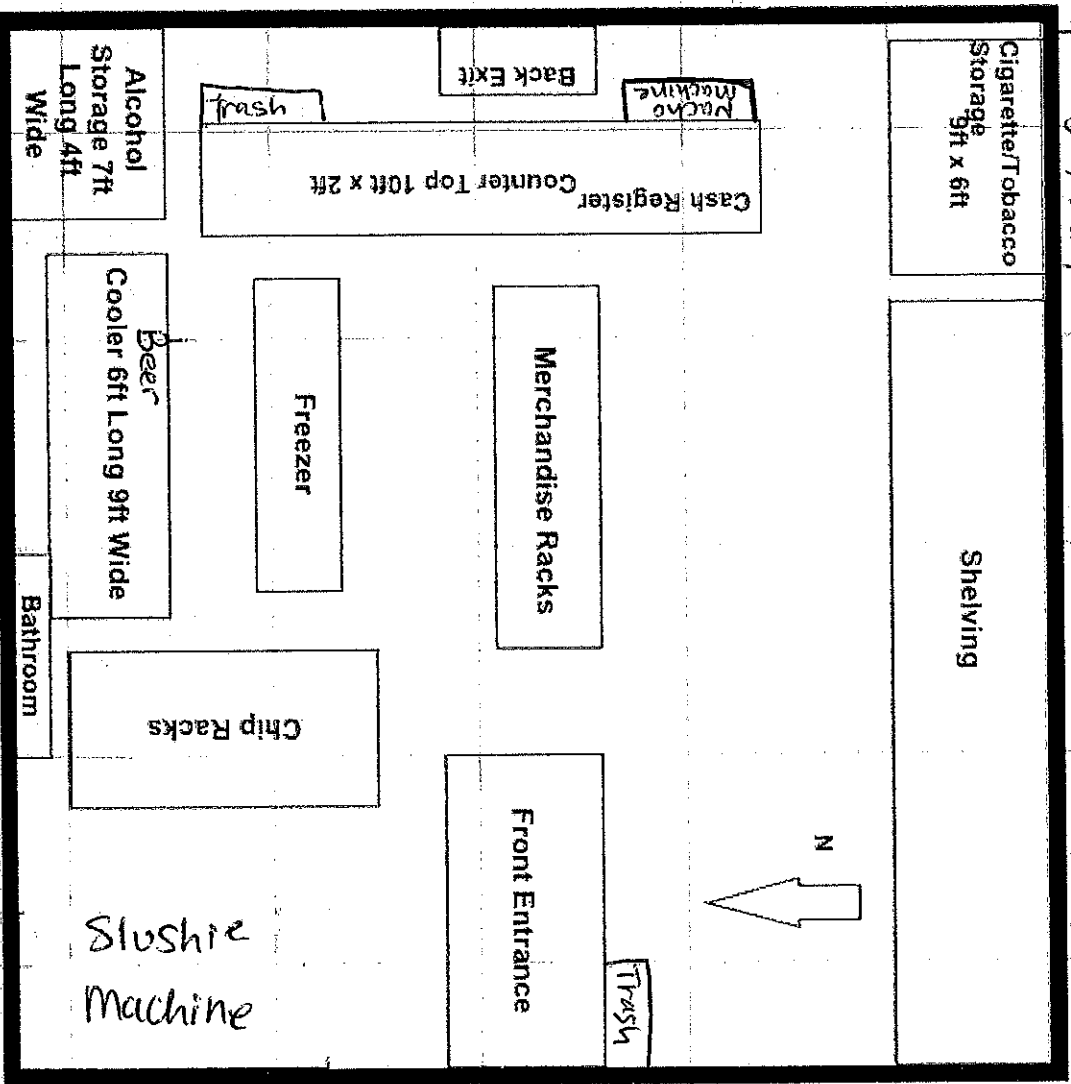
Signature of Sole Proprietor, Partner, or 20% Shareholder: _____

Signature of Additional Partner: _____

Atkinson Neighborhood Market

W Atkinson Street

used usual



Approx. 25ft
N 15th Street

Timothy McCollum Agent For
Atkinson Neighborhood Market LLC
3825 N 15th Street
Date January 14, 2025

Total Square Footage =
1,325 Sq. Ft