



CITY OF MILWAUKEE
OFFICE OF THE CITY CLERK

Thursday, May 28, 2015

COMMITTEE MEETING NOTICE

AD 11

PATEL, Pravinkumar R, Agent
OM Rajdeep Liquor Inc
8635 W Schlinger Av

West Allis, WI 53214

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

Tuesday, June 02, 2015 at 08:45 AM

Regarding: Your Class A Malt & Class A Liquor License and Food Dealer License Applications as agent for "OM Rajdeep Liquor Inc" for "RNR Liquor" at 8333 W MORGAN 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 OW CZARSKI, CITY CLERK

BY: _____

Jason Schunk
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

MILWAUKEE POLICE DEPARTMENT
LICENSE INVESTIGATION UNIT

CRIMINAL RECORD/ORDINANCE VIOLATION/INCIDENTS
SYNOPSIS

DATE: 06/05/2014

LICENSE TYPE: ALQML

NEW:

RENEWAL: X

No. 188917

Application Date: 06/04/2014

Expiration Date:

License Location: 8333 W Morgan Avenue

Aldermanic District: 11

Business Name: R N R Liquor & Convenience

Licensee/Applicant: Sachdeva, Ravi

(Last Name, First Name, MI)

Date of Birth: 12/02/59

Male:

Female:

Home Address: 6103 Twin Oak Drive

City: Greendale

State: Wi

Zip Code: 53129

Home Phone: (414) 817-1160

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 4-4-2003 at 6:27pm a 20-year-old Milwaukee Police Aide entered Ratta's Liquor Deli, 8333 W Morgan Ave. The aide did so at the direction of Milwaukee Police officers. The aide was able to purchase a 6 pack of Dos Equis, an alcoholic beverage. The cashier, licensee Ravi Sachdeva, did request ID, looked at it and sold the beverage to the aide. The licensee was issued a citation for the following:

Charge: Sale To Underage

Finding: **Guilty**

Sentence: Fined \$150.00

Date: 06/03/03

Case: 03073651

Citation: 57971756

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2. On 06/11/2009 at 8:10pm a Milwaukee police aide, working in conjunction with Milwaukee police, was able to purchase a 6 pack of Miller brand beer from the clerk, Rosy Sachdeva, at 8333 W. Morgan Avenue (R N R Liquor). Rosy Sachdeva, who is listed on the application as Secretary and 50% shareholder, was cited for Sale of Alcohol to Underage Person.

Charge: Sale of Alcohol to Underage Person
Finding: Guilty
Sentence: \$100.00 fine
Date: 08/05/2009
Case: 09096653

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PREVIOUS PREMISES

Date: 05/11/2015
Officer: KLEIN

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

Name of Premise: R and R Liquor
Address: 8333 W. Morgan Ave
Phone: 414-545-6811

Owner: Sanatkumar Prahladbhat PATEL
Owner address: 649 Sheffield Ave #649
City State Zip: Bolingbraer Il. 60440
Owner Phone: 414-510-1947
Owner email:

Manager: Pravinkumar PATEL
Home Address: 8635 W. Schlinger Ave
City State Zip: West Allis, Wi 53214
Phone: 414-243-0127
Email:

Preferred contact: Store Phone Pravinkumar PATEL

Location currently open: YES NO

Projected open date: 06-02-2015

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

Hours of Operation: Sun: 8:00am to 9:00pm
Mon: 8:00am to 9:00pm
Tue: 8:00am to 9:00pm
Wed: 8:00am to 9:00pm
Thu: 8:00am to 9:00pm
Fri: 8:00am to 9:00pm
Sat: 8:00am to 9:00pm
24 hours Y N

Premise Type: Liquor Store
Convenience Store
Other:

Licenses currently held:

Alcohol: Yes No Class: #: 5830 W. Greenfield
Tobacco: Yes No #: 683 S. Hawley Rd
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
8. Is the parking lot well lit? Yes No
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: 1 week
19. Are there exterior cameras Yes No How many: 1
20. Are there interior cameras Yes No How many: 8
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
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
27. Does the store sell blunt wraps? Yes No
28. Does the store sell scales? Yes No
29. Does the store sell items that may be used as crack pipes? Yes No
a. Describe item N/A
30. Does the store have an over abundance of sandwich baggies: Yes No
31. Does the owner understand that these items are often used for drug use? Yes No
32. Do the products in the store appear to be new and rotated often? Yes No
33. Are emergency and non-emergency numbers posted near the phone? Yes No
34. Does the owner know how to contact their police district directly? Yes No
a. Did you provide a district contact guide to the owner? Yes No

Complete this section if alcohol establishment is a convenience store:

(** Read full ordinance for all details "68-55 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 within 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:

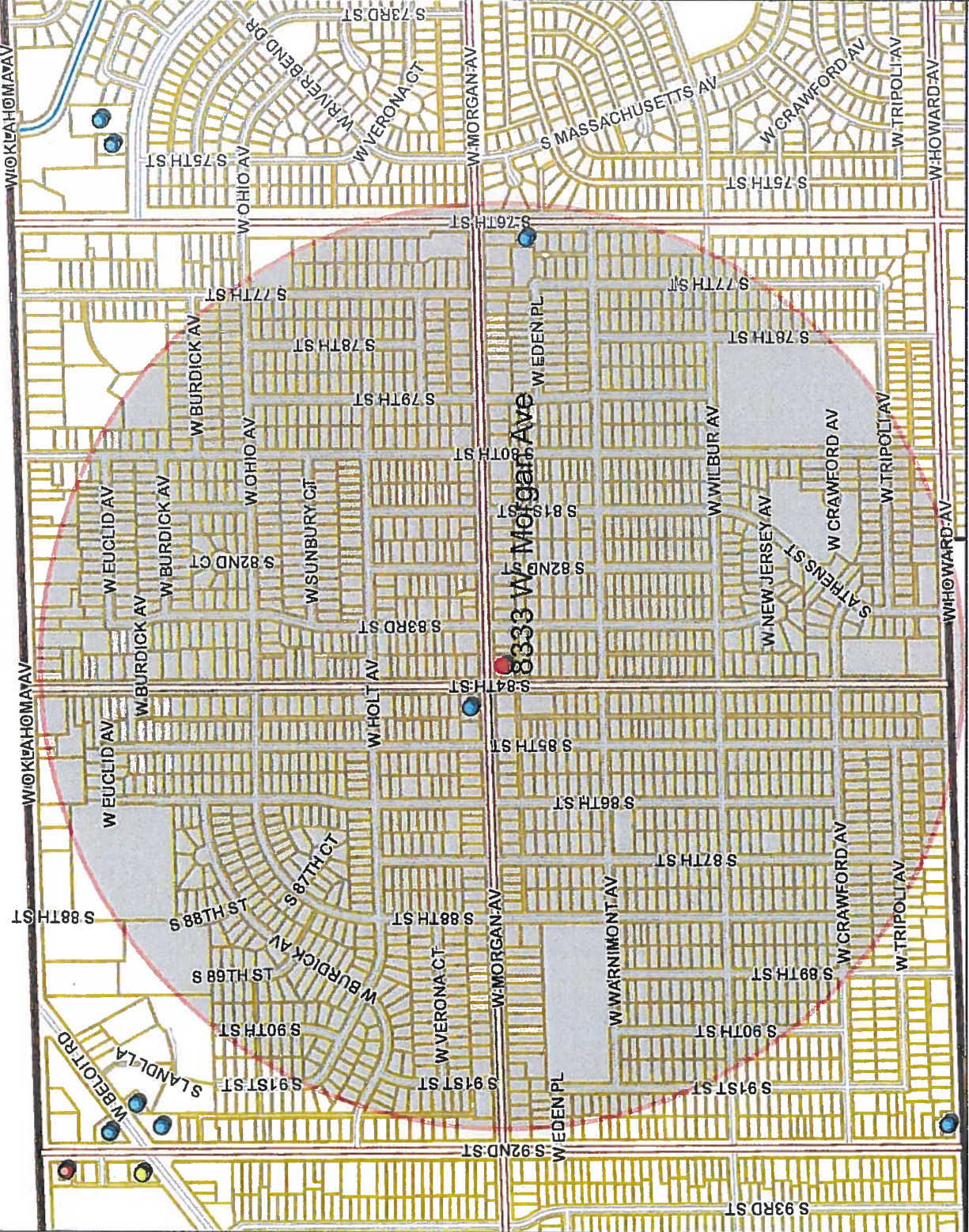
- a-1. The store is located in an enclosed shopping structure, enclosed commercial building or hospital. A convenience food store is not in an enclosed structure or building if a customer can enter it directly from the outside.
Does store conform to a-1 Yes No
- a-2. The store physically separates employees 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

ADDITIONAL COMMENTS/RECOMMENDATIONS:

Soon to be former owner is aware of the drug paraphernalia and commented that they are a big seller in the store.

Alcohol Concentration for 8333 W. Morgan Avenue

City of Milwaukee, Wisconsin



- Legend -

- City limits
- Parcels
- Freeways
- Freeways
- Exit ramps
- Entry ramps
- Ramps
- Major streets
- Streets
- Waterways
- 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 -

Alcohol establishments within a .5 mile radius centered on 8333 W. Morgan Avenue on 4/29/15



Department of Administration - ITMD



Map Scale: 1: 10,000

© City of Milwaukee, Wisconsin
 Map Milwaukee: Property Information
 Disclaimer
 4/29/2015

Licensed Alcohol Beverage Establishments within a .5 Mile Radius Centered on 8333 W. Morgan Avenue, 4/29/15

Legal entity	Trade name	Licensee	Address	License type	License type name	Total capacity	Room capacity	Expiration date
A J PETROLEUM, INC	R N R LIQUOR & CONVENIENCE	RAVI SACHDEVA, Agt	8333 W MORGAN AV	ALQJML	Class A Malt & Class A Liquor License			7/28/2015
Cinco De Mayo Fiesta LLC FRANKIE & JOHNNIE'S, LLC	Cinco De Mayo Fiesta TANINO'S	Fidel Coatzozon Chagaia, Agt FRANCESCO LAFFRANCHINI, Agt	8412 W Morgan AV 3525 S 76TH ST	BTAVERN BTAVERN	Class B Tavern License Class B Tavern License	142 125		7/23/2015 3/19/2016
	License Summary	Total						
	Class A Malt & Class A Liquor License	1						
	Class B Tavern License	2						
	Grand Total	3						



Thursday, May 28, 2015

Licenses Committee Notice of Hearing

SHUBH INVESTMENT, LLC
C/O ROSY SACHDEVA
8333 W Morgan Ave
Milwaukee, WI 532201

Date: 6/2/2015
Time: 08:45 AM
Location: Common Council Chambers, Third Floor, City Hall

The Licenses Committee will consider the following license application:

Class A Malt & Class A Liquor License and Food Dealer License Applications
PATEL, Pravinkumar R, Agent
RNR Liquor at 8333 W MORGAN 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.





Thursday, May 28, 2015

Licenses Committee Notice of Hearing

OM Rajdeep Real Estate Inc
8333 W Morgan Ave
Milwaukee, WI 532201

Date: 6/2/2015
Time: 08:45 AM
Location: Common Council Chambers, Third Floor, City Hall

The Licenses Committee will consider the following license application:

Class A Malt & Class A Liquor License and Food Dealer License Applications
PATEL, Pravinkumar R, Agent
RNR Liquor at 8333 W MORGAN 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.





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: <u>OM RAJDEEP LIQUOR INC</u>
Premise Address: <u>8333 W MORGAN AVE, MILWAUKEE 'S3220</u>
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 type="checkbox"/> Own <input checked="" type="checkbox"/> Lease
b) Who owns the fixtures (for example, coolers, etc.)? <u>OM RAJDEEP LIQUOR INC</u>
c) Are you purchasing the stock and/or fixtures? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If yes, amount paid \$ <u>300,000</u>
d) Total amount paid for business \$ <u>0</u>
e) Total amount paid for goodwill of the business \$ <u>250,000</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 05/01/15 Ends 05/31/2030
- b) Monthly rental \$ 6000
- 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)? 15423
- 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

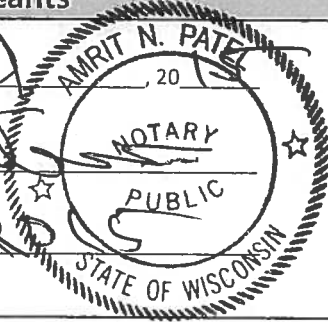
Have there been any changes to the floor plan since the last application was submitted? No Yes
If no, a new floor plan is not required. If yes, submit a new floor plan and explain the change(s): _____

Notarized Signatures of Applicants

SUBSCRIBED AND SWORN TO BEFORE ME
This 23 day of April, 2015

Amrit N. Patel
(Clerk/Notary Public)

My Commission Expires 12-6-20
*Notary Seal must be affixed.



X Burnh n. Patel
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



BUSINESS LICENSE PLAN OF OPERATION

ccl-busplan 3/17/15

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 Establishment License Filling Station License Other (plan of operation for specific license also required)

Provide a detailed description of the type of business you plan on operating:

LIQUOR STORE

Do you have any experience operating this type of business? No Yes

If yes, explain: **I OWN 3 GROCERY STORE WITH BEER LOCATION IN CITY OF MKE.**

2. Business Operations

- a. Proposed Opening Date: 06/01/15
- 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: CLASS A LIQUOR / FOOD / CIG / OCCUPANCY
- 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 N/A
If yes, list address(es): _____
- h. Are other businesses operating in the same building? No Yes If yes, describe: _____

3. Litter & Noise Control

- a. How are grounds kept clean? Sweep Pressure Wash Pick Up Litter Hired Maintenance
 Building Owner Responsibility Garbage Cans Outside 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: _____
Will a sound amplification system be used? No Yes If yes, describe: _____
- e. Are there designated outdoor smoking areas? No Yes If yes, describe: _____
- f. Number of Garbage Cans: Inside: 2 Locations: BY CASH REGISTER & IN RESTROOM
Outside: 1 Locations: BY FRONT DOOR OUTSIDE
- g. Is a crowd control barrier used? No Yes If yes, describe: _____
- h. Describe sanitation facilities (restrooms): EMPLOYEES CLEAN / SANITIZE RESTROOMS
- i. Name of solid waste contractor: Advanced Disposal Waste Management Other: _____

4. Parking & Security

- a. Are there off-street parking places? No Yes If yes, how many? 10
 Describe security plan for parking lot: SECURITY CAMERA SYSTEM MONITORS PARKING LOT 24/7
- b. Is there a loading zone? No Yes If yes, describe security for loading zone _____
- c. Will you have security personnel on premise? No Yes If yes, how many? _____
 What are their responsibilities? _____
- Is security equipment used? No Yes If yes, describe _____
 List their licensing, certification, or training credentials _____
- Will there be security cameras? No Yes If yes, where? MONITORS INSIDE & STORE SURROUNDINGS
- Will searches or identification checks be conducted upon entry? No Yes If yes, describe _____

5. Percentage of Sales (must total 100%)

Alcohol <u>80</u> %	Food <u>10</u> %	Secondhand Merchandise <u>0</u> %	Precious Metals & Gems <u>0</u> %
Entertainment _____ %	Cigarettes <u>10</u> %		
Pawnbroker Activity <u>0</u> %	Salvaged Materials <u>0</u> % (such as scrap metal)	Other <u>0</u> % Describe: <u>0</u>	

6. 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"/> Bowling Alley | <input type="checkbox"/> Hotel | <input type="checkbox"/> Banquet Hall | <input type="checkbox"/> Sports Facility |

Type 2

- | | | | |
|--|---|---|--|
| <input checked="" type="checkbox"/> Liquor Store | <input 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"/> Auto Wrecker | |
| <input type="checkbox"/> Used Car Dealer | <input type="checkbox"/> Used Auto Parts | <input type="checkbox"/> Personal Service Establishment | <input type="checkbox"/> Recording Studio |

What other types of 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: _____

7. Legal Capacity (only if a Type 1 premises in #6 above)

Capacity 30 (Call the Milwaukee Development Center at 414-286-8211 if you have questions.)

N/A

8. Premises Description

d. 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: _____

e. Describe Location: Major Thoroughfare Secondary Street Other: _____

f. Nearest Major Cross Street: MORRAN AVE / 84TH ST.

g. Describe Building: Free Standing Building Strip Mall Other: _____

h. Describe Premises Structure: Single Story Multi-Story - # of Stories 1 Other: _____

i. Describe Surrounding Area: Commercial Residential Industrial Other: _____

j. Property Owner's Name: OM RATDEEP REAL ESTATE INC. Phone Number: 414 243 0129

Address: 8333 W. MORRAN AVE MILWAUKEE, WI 53220

9. Hours of Operation & Customers

Will customers be entering the premises? No Yes

Day of the Week	Proposed Hours of Operation:		Number of Customers expected each day	Potential Age Range of Customers	Class B Applicants: Age Restriction (If none, write 'None')
	Open (include a.m. or p.m.)	Close (include a.m. or p.m.)			
Sunday	8:00 AM	9:00 PM	200	18 & OVER	NONE
Monday	8:00 AM	9:00 PM	200	"	- N/A -
Tuesday	8:00 AM	9:00 PM	200	"	- N/A -
Wednesday	8:00 AM	9:00 PM	200	"	- N/A -
Thursday	8:00 AM	9:00 PM	200	"	- N/A -
Friday	8:00 AM	9:00 PM	200	"	- N/A -
Saturday	8:00 AM	9:00 PM	200	"	N/A -

Entertainment Indoor Closing Hours - If alcohol beverage establishment, same as alcohol license hours.
 If non-alcohol establishment 1:00 am Sunday to Thursday; 1:30 am Friday and Saturday.

Entertainment Outdoor Closing Hours - 10:00 pm Sunday - Thursday; 12:00 am Friday and Saturday,
 unless otherwise approved by Common Council in licensee's plan of operation.

10. Required Signature(s)

X Benin R. Patel
 Sole Proprietor, Partner, Agent, or 20% or more Shareholder

 Signature of additional partner or 20% or more Shareholder

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



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 type="checkbox"/> Instrumental Musicians	<input type="checkbox"/> Bands	<input type="checkbox"/> Battle of the Bands	<input type="checkbox"/> Comedy Acts
<input type="checkbox"/> Disc Jockey	<input type="checkbox"/> Magic Shows	<input type="checkbox"/> Poetry Readings	<input type="checkbox"/> Dancing by Performers
<input type="checkbox"/> Adult Entertainment/ Strippers/Erotic Dance	<input type="checkbox"/> Wrestling	<input type="checkbox"/> Patron Contests	<input type="checkbox"/> Patrons Dancing
<input type="checkbox"/> Jukebox	<input type="checkbox"/> Karaoke	<input type="checkbox"/> Bowling Alley	<input type="checkbox"/> Pool Tables
<input type="checkbox"/> Motion Pictures	<input checked="" type="checkbox"/> Amusement Machines --	<input type="checkbox"/> Concerts	<input type="checkbox"/> Theatrical Performances
How many? _____	How many? <u>2</u>	Approx. # per year? _____	Approx. # per year? _____
<input type="checkbox"/> Other: _____			

WILL PROMOTERS EVER BE USED FOR ANY OF THE ENTERTAINMENT?

No Yes, describe: _____

LEGAL CAPACITY OF PREMISES

30 (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.

WILL SOUND AMPLIFICATION EVER BE USED?

No Yes, describe: _____

DECLARATIONS, ACKNOWLEDGEMENTS, & DISCLOSURES

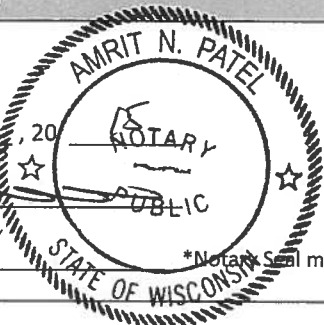
Read And Initial Each Item Confirming Your Understanding:

- PR 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.
- PR I agree to inform the City Clerk within 10 days of any substantial changes in the information supplied in this application.
- PR 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.
- PR 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.

NOTARIZED SIGNATURES OF APPLICANTS

SUBSCRIBED AND SWORN TO BEFORE ME

This 23 day of April, 2015
Amrit N. Patel
(Clerk/Notary Public)
My Commission Expires 12/06/15



Amrit N. Patel
Agent/Owner/Partner

Additional Owner/Partner

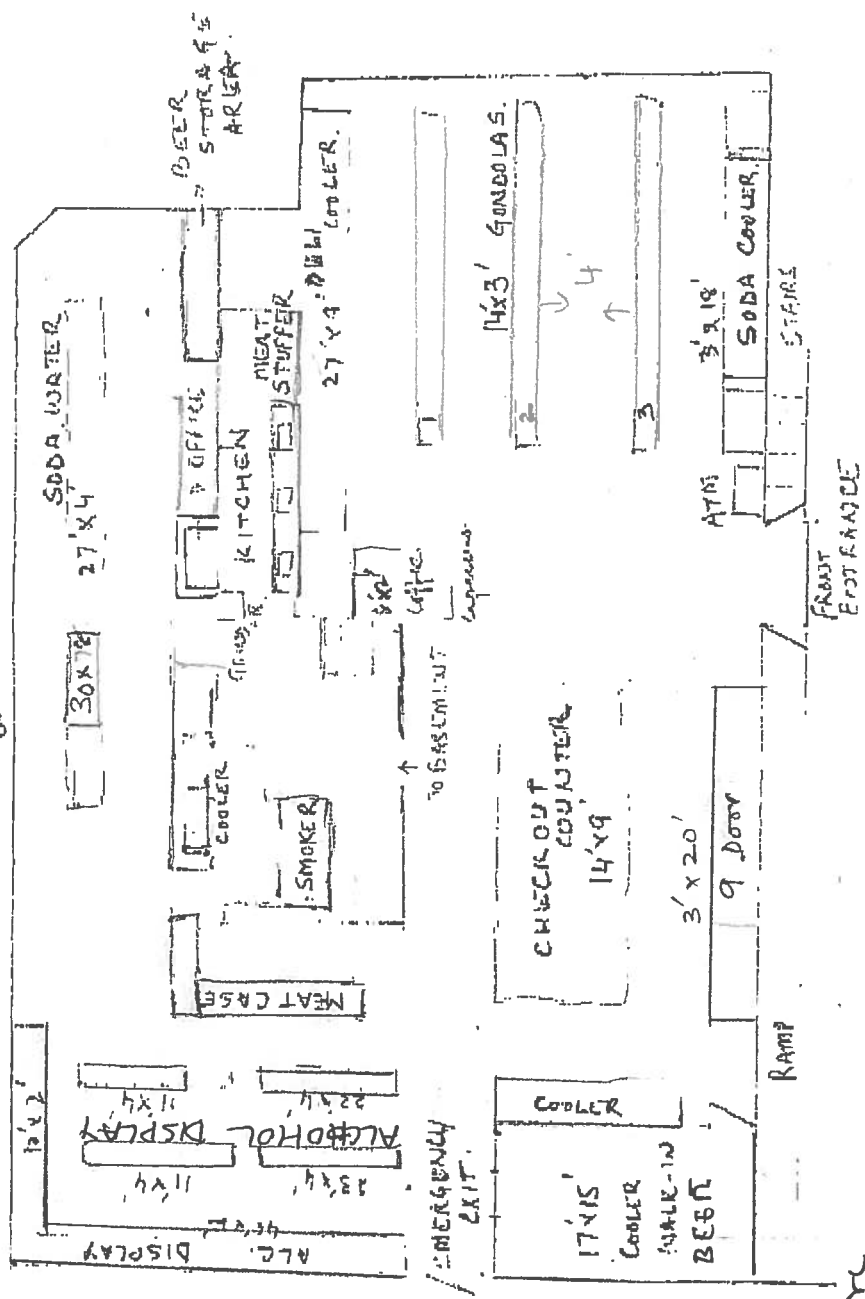
*Notary Seal must be affixed.

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

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

84 STREET

80



TOTAL SQUARE
FOOT =
4,495 SQ. FT

ALLEY

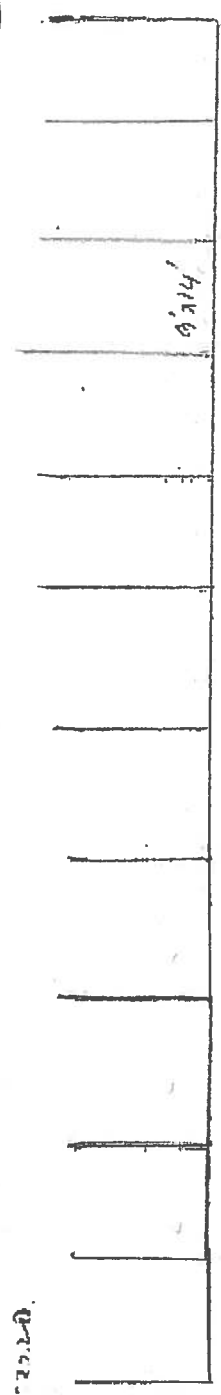
RRR LIQUOR DBA

OM RAJDEEP LIQUOR INC
8333 S. MORGAN AVE
WEST ALLIS, WI 53220

04-28-15 412-127-220



MORGAN AVE



PARKING AREA
10 PARKING



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: **OM RAJDEEP LIQUOR INC**
 Premise Address: **8333 W MORAN AVE MILWAUKEE WI 53220**

1. Application Type

Indicate the application type and complete the corresponding section.

New application (fee is \$300). For new applications, answer questions below and then continue on to section 2.

Is this a simple change of ownership (no change in food operation) or a new establishment?

- Taking over existing operating licensed food business
- New establishment (anything other than a simple change of ownership)

Provide a brief description of the food establishment

LIQUOR STORE

What is the anticipated opening date or date of change of ownership: **06/01/15**

Site Evaluation - Optional (fee is \$100) Site evaluations are optional, and done only upon request. The purpose of the site evaluation is to assess the suitability of a prospective site for use as a food establishment.

Modification or amendment to an existing food license or public health approved operational plan. For modifications/amendments to existing establishments, both the operator and establishment cannot be different than on existing license or the application is considered new. Answer the two questions below (including the follow up detail if applicable) and then continue on to section 2.

What facilities (equipment or building) change(s) are you planning (check all that apply):

- Construction or renovation (fee is \$200)
- Significant equipment change without construction or renovation (fee is \$50)
- Adding an additional site at the same premises where food will be prepared/processed or sold (fee is \$100 per additional site)
- No equipment or renovations are being planned

What changes are being proposed to the food operation or specialized approvals are being requested (Note: \$75 operational change fee is charged only once even if multiple items are checked):

- Substantial changes to the menu including the type or complexity of food processing (fee is \$75)

Briefly describe proposed changes

- Adding processing when no processing was previously performed, or adding additional types of processing (fee is \$75)

- Requests for modifications or variances to public health food code requirements or the review of a specialized process requiring health department approval prior to implementation (fee is \$75)

Indicate specialized processes/variances requested (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Acidified Rice | <input type="checkbox"/> Sale without Consumer Advisory |
| <input type="checkbox"/> Bare Hand Contact to Ready to Eat Foods | <input type="checkbox"/> Shellfish - Comingling |
| <input type="checkbox"/> Curing | <input type="checkbox"/> Shellfish -Display Tanks |
| <input type="checkbox"/> Dogs in Outside Dining Areas | <input type="checkbox"/> Smoking |
| <input type="checkbox"/> Non-continuous Cooking | <input type="checkbox"/> Sprouting |
| <input type="checkbox"/> Peddler Base | <input type="checkbox"/> Time as a Public Health Control |
| <input type="checkbox"/> Reduced Oxygen Packaging | <input type="checkbox"/> Wild Game |
| <input type="checkbox"/> Other, specify | |

- Amending existing license to reflect an increase in annual gross sales or change in food operation (fee is the difference in the cost between the food licenses plus \$25 for transfer fee)

- No significant changes are being proposed in how food is prepared/processed or substantial menu changes. No addition of specialized process or activities requiring approval is being requested (no fee)

2. Premises Description

Will food be prepared or sold at a single or multiple food preparation and/or sale sites: Single Multiple

If multiple sites will be used, how many distinct sites will be used?

List all sites and briefly describe the nature of the food activities at each site:

Note: Multiple sites may require more than one license or an additional site license depending upon the food activity conducted at any one site.

Indicate where on the premises food will be sold, served, consumed and/or stored: 1st Floor 2nd Floor Rooftop Basement

Other Floor, specify _____

Other location, specify _____

Are any outdoor operations planned? Yes No Unknown

What activities will be conducted outdoors (check all that apply)

Bar

Cooking/grilling

Dining – Patio

Dining – Sidewalk (DPW permit required)

Storage

Other, specify

Seating provided on site for dining? Yes No

If yes, what is the seating capacity both inside and outside?

If yes, are there additional banquet facilities other than the main dining area? Yes No

Total square footage of the establishment (exclude space utilized for other purposes other than food)

Annual Gross Food Sales: Sales Based on: Previous Year Previous Establishment Best Estimate

Note: Inspector will request to review receipts periodically to validate if establishment has the appropriate license.

Number of Full Time Employees

Number of Part Time Employees

The following items must be included with a new application at the time of filing:

- Site Plan/Floor Plan: Site plan must identify the building in relation to streets, sidewalks, parking & garbage area, see sample and instructions. Food manufacturers, distributors, commissaries, and meal service establishments as defined in section 4 are exempt.
- Shared Kitchen Agreement, if applicable: If not using your own establishment as your base, provide a written and signed commissary agreement. The agreement must include a list of all services provided by the commissary, such as restroom use, dry goods storage, use of refrigerator space (including the number of cubic feet of refrigeration space allocated to you), etc.

The following items must be submitted to inspector, prior to approval of inspection.

- Floor Plan: The plan must show the location of all equipment (sinks, refrigeration, stoves, ware-washing, etc.), plumbing, electrical services, mechanical ventilation, storage areas and restrooms. Plans must be a minimum of 11 X 14 inches in size including the layout of the floor plan accurately drawn to a minimum scale of 1/4 inch = 1 foot. Plans may be submitted in an electronic format.
- Equipment List: Provide the make and model number of all significant equipment (cooking, cooling, warewashing, etc.) All food equipment must be ANSI/NSF certified. No home-style equipment is allowed. Equipment specification sheets do not have to be provided at the time of submission, but must be provided upon Health Department request
- Finish Materials List: Provide a list of all finish materials (floors, walls, ceilings, counter tops). Surfaces must be smooth, nonabsorbent and easily cleanable, and ceramic, porcelain or quarry tile must have set in base cove.
- Lighting Plan: Provide a list of all light fixtures to be used in the food establishment. All light used in any food prep or storage areas must be shielded or covered and flush or integral to the ceiling. Lighting in food preparation area must meet minimum illumination standards defined in the WI Food Code.
- Pest Management Plan: Describe the establishments integrated pest management plan. Describe strategies to prevent pest entry into the food establishment & harborage of pests Identify if a licensed pest control service has been contracted, provide the name of the company and frequency of service.

3. Construction, Renovations, Kitchen Equipment Changes or Remodeling

Any construction, remodeling or equipment changes planned? Yes No If no, skip to section 4.

Scope of the planned project?

- New construction or conversion of an existing structure to be used as a food establishment
- Renovation/remodeling impacting 300ft² or more than of food preparation or display area
- Renovation/remodeling impacting less than 300ft² of food preparation or display area
- Renovation/remodeling limited to the instillation/change/replacement of food equipment

Provide a brief summary of the proposed construction, remodeling and/or equipment change:

Note: Building permits may be required, contact the Department of Neighborhood Services

Date alterations/changes planned to begin _____

Contact information for general contractor _____

Contact information for architect _____

4. BUSINESS TYPE

Overall Establishment Type (select the one that best describes the proposed business)

- Bed and Breakfast
- Commissary or Mobile Food Peddler Base – a commercial kitchen used for the production of food to be served or sold at another location; a base of operations for a mobile food peddler where the vehicle, cart or unit which is used at a minimum for the service or cleaning of the peddler vehicle, cart or container. A base of operations for a caterer or seasonal market vendor for the preparation of food.
- Community Food Program – free meal site or food pantry. Any site in which all food is provided free of cost to those in need or to organizations who serve person's in need.
- Distiller or Brewer – facilities that are primarily engaged in the production of alcoholic beverages
- Food Distributor – a business that transports food for sale to retail and wholesale establishments and does not perform any processing or repacking of food items
 - Is food stored on site Yes No
- Food Manufacturer - commercial operation that produces, packages, labels, or stores food for human consumption, but primarily does not provide food directly to a consumer, food is sold to distributors, retailers or restaurants, there may be a small store on site where only the manufacturers products are sold, but the majority of product is sold to other licensed food establishments
 - Is there a retail store onsite? Yes No
- Food Store – a food establishment either mobile or permanent in which the majority of food sales consist of beverages or multi-serving food products requiring further preparation prior to consumption, examples of food stores include bakeries, grocery stores, convenience stores, coffee shops, liquor stores. Food stores include business whose primary business is other than food, but offer convenience food items.
 - Are you considered a convenience food store? Yes No
 - A convenience food store contains less than 5,000 sq ft of retail sales space AND has as its primary business the sale of basic food items and in addition sells household products. Basic food items may include, but are not limited to, milk and dairy products, bread products, prepared sandwiches, frozen entrees, refrigerated food and baby food. Household products may include, but are not limited to, cleaning products, paper products, baby products and pet food
- School – educational institution including elementary, middle and high schools, technical schools, colleges and university, where food service is limited to students (no sales to faculty or general public)
- Restaurant – a food establishment either mobile or permanent in which the majority food sales consist of meals

5. FOOD OPERATION SCOPE

Type of Sales (check all that apply, even if it reflects a small percentage of the proposed business)

- Made directly to the general public or end consumer (includes internet sales)
- Made to other food establishments (wholesaler, distributors, retail or restaurants) who will resell your product(s)

What percentage of your planned food sales will be meals versus grocery items?

- 65 % from meals (ready-to-eat food sold to in single portions)
- 35 % from grocery items (multi-serving food products, typically requiring preparation before serving, includes beverages, bakery items and raw produce)

Will 25% or more of your sales be to highly susceptible populations (defined as persons with medical conditions, elderly, or preschool age children)?
 Yes No

Will customers be able to purchase food through a drive through? Yes No

Will customers be able to purchase food from a self-service salad or food bar? Yes No

Will food be prepared on site and then transported for sale or consumption at another location? Yes No

If yes, check all the reason why the food will be transported

- Catering Delivery Base for Mobile Food Peddler Base for temporary or seasonal food stand
 Other, specify _____

6. FOOD, FOOD PREPERATION, FOOD PROCESSING

For restaurants provide a copy of the proposed menu or a detailed menu of all the foods and drinks you will be serving.
For all other establishments provide a summary below of the brief types of food products being sold.

Will any potentially hazardous food (food that requires temperature control) be offered for sale? Yes No

Examples of potentially hazardous foods are meats, dairy, poultry, eggs, cut tomatoes or leafy greens, cut melons, cooked rice, beans or potatoes, or garlic in oil.

Will food be prepared or processed on site? Yes No

Examples of processing are assembling, grinding, cutting, mixing, baking, grilling, frying, coating, stuffing, packing, bottling, packaging, canning, extracting, fermenting, distilling, pickling, freezing, drying, smoking.

If yes, indicate the type of food processing that will be conducted:

If performing processing, will there be any processing of potentially hazardous food? Yes No

7. WEIGHTS AND MEASURES

Will any items be offered for sale by weight or by volume? Yes No

If yes, describe number and type of devices used:

A separate weights and measures license is required for each scale.

Will electronic scanning devices be used for pricing/check out? Yes No

If yes, how many devices will be used _____

A scanner license is required if using an electronic scanning device.

8. ISSUANCE OF LICENSE

Will any alcohol or intoxicating beverages be sold at the establishment? Yes No

If yes, what type of license do you have or will you be applying for (check all that apply)?

- Class A fermented malt beverage licenses
 Class A liquor licenses
 Class B fermented malt beverage licenses
 Class B liquor licenses
 Class C wine licenses

If yes, if your food license is approved prior to the alcohol license, would you like the food license issued (check one)

- immediately so you can open your food business at the same time as the alcohol license

9. Affirmation of Understanding – Permit Needed to Operate

READ AND INITIAL EACH ITEM CONFIRMING YOUR UNDERSTANDING:

1. PR I understand that an inspection and sign off by the Health Department is required before my permit may be issued.
2. PR I understand that an occupancy permit must be issued and an inspection may be required from the Department of Neighborhood Services before my permit may be issued.
3. PR I understand that the Department of Neighborhood Services must sign off on my application with the License Division before my permit may be issued.
4. PR I understand the local council member must approve or deny my request before my permit is eligible to be issued. If denied, I understand that I may be scheduled for a hearing before the License Committee of the Common Council.
5. PR I understand that I must pay and the License Division must have proof of payment for the associated permit fees before my permit may be issued.
6. PR I understand that all of the above must be complete before my permit is eligible to be issued.
7. PR I understand that the license/permit for which I am applying must be issued and posted in my business premises prior to opening for business.
8. PR I will not operate my food business until the permit has been issued and posted in the establishment.

10. Required Signature(s)

X

Bernie D. Deibel

Sole Proprietor, Partner, 20% or more Shareholder,
or the Agent - only if there are no 20% or more shareholders

Signature of additional partner or 20% or more shareholder

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

**VENDING MACHINE OWNERS AND FOOD DISTRIBUTORS
USING A PRIVATE RESIDENCE AS THEIR BUSINESS ADDRESS**

AGREEMENT RELATING TO STORAGE OF FOOD IN A PRIVATE RESIDENCE

Food storage by a vending machine owner or distributor in a private residence is limited as follows.

NOTE: No other food dealers may store food in a private residence.

1. Prior to issuance of a license, the storage area must be inspected and in compliance with the following:

- A. Food storage in the home must be limited to commercially packaged, non-potentially hazardous snack foods such as gums, candies, and chips.
- B. All food must be stored in its original container. There can be no storage of unwrapped bulk food products or removal of product from its original package for repackaging of any kind.
- C. No food can be stored in any room used as living or sleeping quarters. Food storage must be in a separate room, used exclusively for food storage. No other non-food items can be stored in this room. The room must also be equipped with a tight-fitting, self-closing door. No pets are to be kept or allowed in the food storage area.
- D. No food can be stored in a garage or other buildings outside the dwelling unit.
- E. Foods must be stored off the floor and away from the wall in rodent/insect proof containers (i.e., plastic or metal containers with tight-fitting lids).
- F. There shall be no sales made in or around the dwelling unit.
- G. This approval is only applicable to vending machine owners, peddlers, and distributors without retail operations or warehouses, and storage is limited to what can be sold in a week's time.
- H. Operator must agree to unannounced annual inspection of the storage area by the Milwaukee Health Department as a condition of licensing. Violation of any of the above requirements is grounds for denial or revocation of a license.
- I. Operator must have a Statement of Home Occupation on file with the Department of Building Inspection.
- J. Vehicles used in transporting foods are also subject to inspection and approval by the Health Department.
- K. No food can be stored in an attic unless the attic is properly finished and ventilated.

I have read and agree to the above as a condition of licensing.

Operator's Signature: K. Burns n. Patel

2. In lieu of storage of food in my home, I will purchase product from an approved source as I need it for same day distribution without the storing of excess product.

I have read and agree to the above as a condition of licensing.

Operator's Signature: K. Burns n. Patel