

CITY OF MILWAUKEE OFFICE OF THE CITY CLERK

Tuesday, January 30, 2024

COMMITTEE MEETING NOTICE

AD 03

NORD, Steven J, Agent BOSS BABES, INC. 1122 N ASTOR St Milwaukee, WI 53202

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, February 13, 2024 at 10:00 AM

The access code is https://meet.goto.com/366065821. If you wish to call in: https://meet.goto.com/366065821. If you wish to call in: https://example.com/366065821. Please see the enclosed best practices document for further instructions.

Regarding:

Your Class A Malt & Class A Liquor and Weights & Measures License Applications as agent for "BOSS BABES, INC." for "Downer Avenue Wine & Spirits" at 2638 N DOWNER Av.

There is a possibility that your application may be denied for one or more of the following asons: 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



CITY OF MILWAUKEE OFFICE OF THE CITY CLERK

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COMMITTEE MEETING NOTICE

AD 03

NORD, Steven J, Agent BOSS BABES, INC. N114 W15918 HILBERT LN Germantown, WI 53022

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The access code is https://meet.goto.com/366065821. If you wish to call in: https://meet.goto.com/366065

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JIM OWCZARSKI, CITY CLERK

BY:

Jim Cooney License Division Manager

Date: 12/28/2023 Officer: PLUMLEY

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

| Name of Premise: Do Address: 2638 N Dov | | | Vine & | Spirits | | | |
|---|--------------|-------------|--------|---------|------------|--|--|
| Phone: | 262-337-2410 | | | | | | |
| Owner: Steven J Nord Owner address: N114W15918 Hilbert Lane City State Zip: Germantown WI 53022 Owner Phone: (262) 337-2410 Owner email: Steve@Downer.com | | | | | | | |
| Manager: Home Address: City State Zip: Phone: Email: | | | | | | | |
| Preferred contact: Pho | one | | | | | | |
| Location currently op | en: | \boxtimes | YES | | NO | | |
| Projected open date: | N/A | | | | | | |
| Day's open: \square S \square M | Λ∏T[| □w□ | Th 🔲 | F□SA | . 🛛 ALL | | |
| Hours of Operation: Mon: Tue: Wed: Thu: Fri: Sat: | | | | □24 h | ours □Y ⊠N | | |
| 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: LZ #: 5740 | |
|--|---|
| Other: Yes No Type: #: | |
| Tentanian Congress | |
| 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. Mother 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. | |
| 11. Exterior Payphone? | |
| 13. Are there exterior security cameras Yes No How Many: | |
| 14. Are the address numbers prominently displayed and easy to see Yes \(\subseteq No | |
| 14. At the address numbers prominently displayed and easy to see 22 100 2110 | |
| 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 fo <u>r later viewing:</u> 30 Days | |
| 19. Are there exterior cameras $\square Yes \square No How many:$ | |
| 20. Are there interior cameras \(\times \) Yes \(\times \) 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? \(\superstack Y \) Yes \(\sumstack N \) \(\superstack N \) |
|--|
| 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? |
| 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 |
| |
| 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? XYes \(\simeg\) 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? \square Yes \square No ** |
| 2. Are the glass entrance and exit doors clear of any signs or advertisements with the exception of a |
| 2. Are the glass entrance and exit doors clear of any signs of 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? Tyes 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? \(\sum \text{Yes} \subseteq \text{No}\) |
| 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 |
| 2. Does one camera shows a few identificials full frame image of the feet of each negroup entaging |
| 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. |

| 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 |

Sub 3. Exemptions. The requirements of this section do not apply to a convenience food store that

ADDITIONAL COMMENTS/RECOMMENDATIONS:

conforms to either of the following descriptions:

This store sells alcohol and a very small selection of tobacco products. The owner will be upgrading the camera system in the next year, and potentially adding additional surveillance cameras.

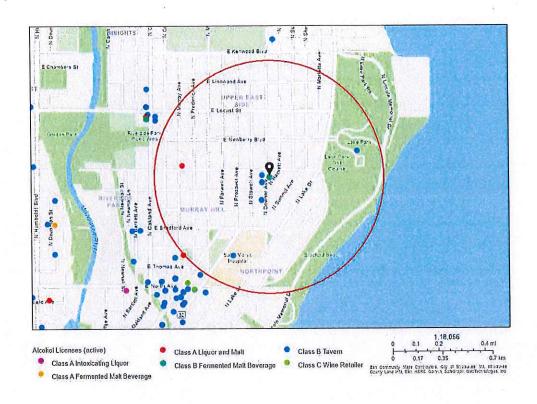


Concentration Map for 2638 N Downer Ave

Area of Interest (AOI) Information

Area: 21,862,585.76 ft2

Dec 19 2023 13:44:43 Central Standard Time



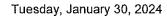
Summary

| Name | Count | Area(ft²) | Length(mi) |
|------------------|-------|-----------|------------|
| Alcohol Licenses | 11 | | |

Alcohol Licenses

| # | Legal Entity | Trade Name | Licensee | Address | License Type Name | Total Capacity | Expiration Date | Count |
|----|---|--------------------------------------|-------------------------------------|---------------------------|--|-------------------|------------------------|-------|
| 1 | HENRY'S TAVERN, LLC | HENRY'S TAVERN | NADER H PAKROO, Agt | 2523 E BELLEVIEW PL | Class B Tavern License | 50 | 2/9/2024, 6:00 PM | 1 |
| 2 | Cinema Beverages Holding Company LLC | Downer Theatre | DEBORAH TZORTZOS, Agt | 2589 N Downer AV | Class B Tavern License | 465 | 4/12/2024, 7:00 PM | 1 |
| 3 | KCS WINE & SPIRITS, INC | DOWNER WINE & SPIRITS | STEVEN J NORD, Agt | 2638 N DOWNER AV | Class A Malt & Class A Liquor License | | 7/10/2024, 7:00 PM | 1 |
| 4 | CANELA CAFE LLC | Canela Cafe | Dina Bouraxis- Awadallah, Agt | 2621 N DOWNER AV | Class B Tavern License | | 8/18/2024, 7:00 PM | 1 |
| 5 | H & H ASSAD, LLC | PARKSIDE LIQUOR & GROCERY | HANA O UPRIGHT, Agt | 2700 N MURRAY AV | Class A Malt & Class A Liquor License | | 8/16/2024, 7:00 PM | 1 |
| 6 | Milwaukee Catholic Home Inc | Milwaukee Catholic Home | Christopher A Reinheimer, Agt | 2462 N PROSPECT AV | Class B Tavern License | | 9/18/2024, 7:00 PM | 1 |
| 7 | MARY BART, LLC | BARTOLOTTA 'S LAKE PARK BISTRO | CHRISTIAN M DAMIANO, Agt | 3133 E NEWBERRY BL | Class B Tavern License | 200 | 9/21/2024, 7:00 PM | 1 |
| 8 | Nehring's Sendik's on Downer, LLC | Nehring's Sendik's on Downer | ANNE C FINCH- NEHRING, Agt | 2643 N Downer AV | Class B Tavern License | | 10/13/2024, 7:00 PM | 1 |
| 9 | BelAir Cantina Downer Inc | BelAir Cantina Downer | KRISTYN A Eitel, Agt | 2625 N DOWNER AV | Class B Tavern License | 150 | 9/27/2024, 7:00 PM | 1 |
| 10 | CAFE HOLLANDER DOWNER AVE LLC | CAFE HOLLANDER | ERIC G WAGNER, Agt | 2608 N DOWNER AV | Class B Tavern License | 200 | 11/1/2024, 7:00 PM | 1 |
| 11 | Giri Corporation | Stone Creek Coffee | Eric A Resch, Agt | 2650 N Downer AV | Class B Fermented Malt Beverage Retailer's License | | 10/16/2024, 7:00 PM | 1 |

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







Notice of Public Hearing

Blank Notice

NORD, Steven J, Agent
Downer Avenue Wine & Spirits at 2638 N DOWNER Av
Class A Malt & Class A Liquor and Weights & Measures License Applications

Tuesday, February 13, 2024 at 10:00 AM

To whom it may concern:

The above application has been made by the above named applicant(s). This requires approval from the Licenses Committee and the Common Council of the City of Milwaukee. The hearing before the Licenses Committee will take place on 2/13/2024 at 10:00 AM in Room 301-B, Third Floor, City Hall. This is a public hearing. Those wishing to view the proceeding are able to do so via the City Channel – Channel 25 on Spectrum Cable – or on the Internet at http://city.milwaukee.gov/citychannel. Those wishing to provide oral testimony via phone or 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 | 2505 E PARK PL# 1 | MILWAUKEE, WI 53211-3722 |
| CURRENT OCCUPANT | 2505 E PARK PL# 2 | MILWAUKEE, WI 53211-3722 |
| CURRENT OCCUPANT | 2505 E PARK PL# 3 | MILWAUKEE, WI 53211-3722 |
| CURRENT OCCUPANT | 2505 E PARK PL# 4 | MILWAUKEE, WI 53211-3722 |
| CURRENT OCCUPANT | 2505 E PARK PL# 5 | MILWAUKEE, WI 53211-3722 |
| CURRENT OCCUPANT | 2505 E PARK PL# 6 | MILWAUKEE, WI 53211-3722 |
| CURRENT OCCUPANT | 2508 E BELLEVIEW PL# 1 | MILWAUKEE, WI 53211-4228 |
| CURRENT OCCUPANT | 2508 E BELLEVIEW PL# 2 | MILWAUKEE, WI 53211-4228 |
| CURRENT OCCUPANT | 2508 E BELLEVIEW PL# 21 | MILWAUKEE, WI 53211-4228 |
| CURRENT OCCUPANT | 2508 E BELLEVIEW PL# 22 | MILWAUKEE, WI 53211-4228 |
| CURRENT OCCUPANT | 2508 E BELLEVIEW PL# 23 | MILWAUKEE, WI 53211-4228 |
| CURRENT OCCUPANT | 2508 E BELLEVIEW PL# 24 | MILWAUKEE, WI 53211-4228 |
| CURRENT OCCUPANT | 2508 E BELLEVIEW PL# 25 | MILWAUKEE, WI 53211-4228 |
| CURRENT OCCUPANT | 2508 E BELLEVIEW PL# 26 | MILWAUKEE, WI 53211-4228 |
| CURRENT OCCUPANT | 2508 E BELLEVIEW PL# 27 | MILWAUKEE, WI 53211-4228 |
| CURRENT OCCUPANT | 2508 E BELLEVIEW PL# 28 | MILWAUKEE, WI 53211-4228 |
| CURRENT OCCUPANT | 2508 E BELLEVIEW PL# 29A | MILWAUKEE, WI 53211-4228 |
| CURRENT OCCUPANT | 2508 E BELLEVIEW PL# 29B | MILWAUKEE, WI 53211-4228 |
| CURRENT OCCUPANT | 2508 E BELLEVIEW PL# 3 | MILWAUKEE, WI 53211-4228 |
| CURRENT OCCUPANT | 2508 E BELLEVIEW PL# 31 | MILWAUKEE, WI 53211-4229 |
| CURRENT OCCUPANT | 2508 E BELLEVIEW PL# 32 | MILWAUKEE, WI 53211-4229 |
| CURRENT OCCUPANT | 2508 E BELLEVIEW PL# 33 | MILWAUKEE, WI 53211-4229 |
| CURRENT OCCUPANT | 2508 E BELLEVIEW PL# 34 | MILWAUKEE, WI 53211-4229 |
| CURRENT OCCUPANT | 2508 E BELLEVIEW PL# 35 | MILWAUKEE, WI 53211-4229 |
| CURRENT OCCUPANT | 2508 E BELLEVIEW PL# 36 | MILWAUKEE, WI 53211-4229 |
| CURRENT OCCUPANT | 2508 E BELLEVIEW PL# 37 | MILWAUKEE, WI 53211-4229 |
| CURRENT OCCUPANT | 2508 E BELLEVIEW PL# 38 | MILWAUKEE, WI 53211-4229 |
| CURRENT OCCUPANT | 2508 E BELLEVIEW PL# 39A | MILWAUKEE, WI 53211-4229 |
| CURRENT OCCUPANT | 2508 E BELLEVIEW PL# 39B | MILWAUKEE, WI 53211-4229 |
| CURRENT OCCUPANT | 2508 E BELLEVIEW PL# 4 | MILWAUKEE, WI 53211-4228 |
| CURRENT OCCUPANT | 2508 E BELLEVIEW PL# 41 | MILWAUKEE, WI 53211-4229 |
| CURRENT OCCUPANT | 2508 E BELLEVIEW PL# 42 | MILWAUKEE, WI 53211-4229 |
| CURRENT OCCUPANT | 2508 E BELLEVIEW PL# 43 | MILWAUKEE, WI 53211-4229 |
| CURRENT OCCUPANT | 2508 E BELLEVIEW PL# 44 | MILWAUKEE, WI 53211-4229 |
| CURRENT OCCUPANT | 2508 E BELLEVIEW PL# 45 | MILWAUKEE, WI 53211-4229 |
| CURRENT OCCUPANT | 2508 E BELLEVIEW PL# 46 | MILWAUKEE, WI 53211-4229 |
| CURRENT OCCUPANT | 2508 E BELLEVIEW PL# 47 | MILWAUKEE, WI 53211-4229 |
| CURRENT OCCUPANT | 2508 E BELLEVIEW PL# 48 | MILWAUKEE, WI 53211-4229 |
| CURRENT OCCUPANT | 2508 E BELLEVIEW PL# 49A | MILWAUKEE, WI 53211-4251 |
| CURRENT OCCUPANT | 2508 E BELLEVIEW PL# 49B | MILWAUKEE, WI 53211-4251 |
| CURRENT OCCUPANT | 2508 E BELLEVIEW PL# 49C | MILWAUKEE, WI 53211-4251 |
| CURRENT OCCUPANT | 2508 E BELLEVIEW PL# 49D | , |
| CURRENT OCCUPANT | 2508 E BELLEVIEW PL# 5 | MILWAUKEE, WI 53211-4228 |
| CURRENT OCCUPANT | 2508 E BELLEVIEW PL# 51 | MILWAUKEE, WI 53211-4230 |
| CURRENT OCCUPANT | 2508 E BELLEVIEW PL# 52 | MILWAUKEE, WI 53211-4230 |
| CURRENT OCCUPANT | 2508 E BELLEVIEW PL# 53 | MILWAUKEE, WI 53211-4230 |
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CURRENT OCCUPANT **CURRENT OCCUPANT CURRENT OCCUPANT** CURRENT OCCUPANT **CURRENT OCCUPANT CURRENT OCCUPANT CURRENT OCCUPANT CURRENT OCCUPANT CURRENT OCCUPANT** CURRENT OCCUPANT **CURRENT OCCUPANT** CURRENT OCCUPANT CURRENT OCCUPANT CURRENT OCCUPANT **CURRENT OCCUPANT CURRENT OCCUPANT** CURRENT OCCUPANT

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2628 N STOWELL AVE# 5

MILWAUKEE, WI 53211-4230 MILWAUKEE, WI 53211-4228 MILWAUKEE, WI 53211-4230 MILWAUKEE, WI 53211-4228 MILWAUKEE, WI 53211-4228 MILWAUKEE, WI 53211-4233 MILWAUKEE, WI 53211-3723 MILWAUKEE, WI 53211-4253 MILWAUKEE, WI 53211-4253 MILWAUKEE, WI 53211-4276 MILWAUKEE, WI 53211-4253 MILWAUKEE, WI 53211-4276 MILWAUKEE, WI 53211-3850 MILWAUKEE, WI 53211-4220 MILWAUKEE, WI 53211-3841 MILWAUKEE, WI 53211-3850 MILWAUKEE, WI 53211-4220 MILWAUKEE, WI 53211-3828 MILWAUKEE, WI 53211-4220 MILWAUKEE, WI 53211-3840 MILWAUKEE, WI 53211-4223 **CURRENT OCCUPANT** CURRENT OCCUPANT **CURRENT OCCUPANT CURRENT OCCUPANT** CURRENT OCCUPANT **CURRENT OCCUPANT CURRENT OCCUPANT** CURRENT OCCUPANT CURRENT OCCUPANT CURRENT OCCUPANT CURRENT OCCUPANT **CURRENT OCCUPANT** 2628 N STOWELL AVE# 6 2629 N HACKETT AVE 2629 N SUMMIT AVE 2633 N HACKETT AVE# A 2633 N HACKETT AVE# B 2633 N HACKETT AVE# C 2633 N HACKETT AVE# D 2633 N HACKETT AVE# E 2633 N HACKETT AVE# F 2637 N SUMMIT AVE 2640 N STOWELL AVE 2641 N HACKETT AVE# 1 2641 N HACKETT AVE# 2 2641 N HACKETT AVE# 3 2641 N HACKETT AVE# 4 2641 N HACKETT AVE# 5 2641 N HACKETT AVE# 6 2645 N SUMMIT AVE 2649 N HACKETT AVE# 1 2649 N HACKETT AVE# 2 2649 N HACKETT AVE# 3 2649 N HACKETT AVE# 4 2649 N HACKETT AVE# 5 2649 N HACKETT AVE# 6 2649 N HACKETT AVE# 7 2651A N DOWNER AVE 2662 N HACKETT AVE 2664 N HACKETT AVE 2666 N HACKETT AVE 2700 N STOWELL AVE 2702 N STOWELL AVE 2703 N HACKETT AVE 2704 N STOWELL AVE 2706 N STOWELL AVE 2709 N HACKETT AVE 2710 N DOWNER AVE 2710 N HACKETT AVE 2711 N HACKETT AVE 2715 E PARK PL 2715 N HACKETT AVE 2715A E PARK PL# EAST 2715A E PARK PL# WEST 2716 N HACKETT AVE 2717 E PARK PL 2717 N HACKETT AVE 2718 N DOWNER AVE

2719 E PARK PL

MILWAUKEE, WI 53211-4223 MILWAUKEE, WI 53211-3833 MILWAUKEE, WI 53211-3850 MILWAUKEE, WI 53211-3834 MILWAUKEE, WI 53211-3850 MILWAUKEE, WI 53211-4220 MILWAUKEE, WI 53211-3835 MILWAUKEE, WI 53211-3850 MILWAUKEE, WI 53211-3836 MILWAUKEE, WI 53211-4245 MILWAUKEE, WI 53211-3832 MILWAUKEE, WI 53211-3832 MILWAUKEE, WI 53211-3832 MILWAUKEE, WI 53211-3772 MILWAUKEE, WI 53211-3772 MILWAUKEE, WI 53211-3857 MILWAUKEE, WI 53211-3772 MILWAUKEE, WI 53211-3772 MILWAUKEE, WI 53211-3857 MILWAUKEE, WI 53211-3753 MILWAUKEE, WI 53211-3856 MILWAUKEE, WI 53211-3857 MILWAUKEE, WI 53211-3843 MILWAUKEE, WI 53211-3857 MILWAUKEE, WI 53211-3843 MILWAUKEE, WI 53211-3843 MILWAUKEE, WI 53211-3856 MILWAUKEE, WI 53211-3843 MILWAUKEE, WI 53211-3857 MILWAUKEE, WI 53211-3753 MILWAUKEE, WI 53211-3843

| CURRENT OCCUPANT | 2719 N DOWNER AVE | MILWAUKEE, WI 53211-3754 |
|------------------|-----------------------|--------------------------|
| CURRENT OCCUPANT | 2719 N HACKETT AVE | MILWAUKEE, WI 53211-3857 |
| CURRENT OCCUPANT | 2719 N HACKETT AVE# A | MILWAUKEE, WI 53211-3857 |
| CURRENT OCCUPANT | 2721 N HACKETT AVE | MILWAUKEE, WI 53211-3857 |
| CURRENT OCCUPANT | 2722 N DOWNER AVE | MILWAUKEE, WI 53211-3753 |
| CURRENT OCCUPANT | 2723 N DOWNER AVE | MILWAUKEE, WI 53211-3754 |
| CURRENT OCCUPANT | 2725 N DOWNER AVE | MILWAUKEE, WI 53211-3754 |
| CURRENT OCCUPANT | 2726 N DOWNER AVE | MILWAUKEE, WI 53211-3753 |
| CURRENT OCCUPANT | 2728 N DOWNER AVE | MILWAUKEE, WI 53211-3753 |
| | | |

Blank Notice

Total Records: 149

Radius 250.0 feet and Center of the Circle: 2638 N Downer Av

ccl-busplan 5/12/2020



BUSINESS LICENSE PLAN OF OPERATION

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

| 1. T | ype of Business | | | | | | |
|--------|---|--|--|--|--|--|--|
| Applyi | ng 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) | | | | | | |
| Provid | e a detailed description of the type of business you plan on operating: Specialty liquor store | | | | | | |
| Do yo | u have any experience operating this type of business? 🔳 No 🗌 Yes 💮 If yes, explain: | | | | | | |
| 2. E | Business Operations | | | | | | |
| a. | Proposed Opening Date: 3/1/24 | | | | | | |
| 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 License | | | | | | |
| e. | Is the current licensee operating? | | | | | | |
| f. | Do you have future plans for other businesses, licenses or permits at this location? | | | | | | |
| | If yes, explain: | | | | | | |
| g. | | | | | | | |
| | If yes, list address(es): | | | | | | |
| h. | h. Are other businesses operating in the same building? No Yes If yes, describe: Small strip mall business operators | | | | | | |
| 3. L | tter & Noise | | | | | | |
| a. | How are grounds kept clean? Sweep Pressure Wash Pick Up Litter Other: | | | | | | |
| b. | How often will grounds be cleaned? In 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. S | moking & Sanitation | | | | | | |
| a. | Are there designated outdoor smoking areas? No Yes If yes, describe: | | | | | | |
| b. | Number of Garbage Cans: Inside: 3 Locations: Main floor | | | | | | |
| | Outside: 1 Locations: Back a Vey | | | | | | |
| 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: Eagle | | | | | | |

| 5. Se | ecurity | | | | | | | | |
|---------|---|------------|----------|---------------------------------|---------------|---------------------------|---|---------------------------|--------------------------------|
| a. | a. Are there onsite parking spaces? No Yes If yes, how many? and describe the parking security | | | | | | | | |
| | b. Is there a loading zone? No We Yes If yes, describe the loading area security plan: City ording 2010 | | | | | | | | |
| b. | Is there a lo | pading zo | ne? [| No WYes | If yes, de | escribe the lo | oading area security pla | n: Cify | loading Zone |
| c. | Will you ha | ve securi | ty pers | sonnel on pren | nise? 🔳 | No Yes | If yes, how many? | ar | nd answer the following: |
| | | | | onsibilities? | | | | | |
| | ls se | curity eq | uipme | nt used? 🔲 N | o 🔳 Y | es If yes, de | scribe Cameras, entry | / bell | |
| | List | their lice | nsing, | certification, o | r training | g credentials | n/a | - | |
| d. | Will there I | be securi | ty cam | eras? [] No beer coo | Yes Lev, S | If yes, how r Pore flu | many? 10 and list | locations: | front door, back case, |
| | | | | | | | No 🗌 Yes If yes, descri | | |
| 6. P | ercentag | e of S | ales | (must tota | l 100% | 6) | | | |
| Alcoh | ol | 91 | _% | Food | 2 | % | Secondhand Merchandis | e | Precious Metals & Gems |
| Enter | tainment | | _% | Cigarettes | 6 | % | % | | % |
| Pawn | broker Activit | У | % | Salvaged Mate (such as scrap | | % | Personal Services (such a body piercing, salon, tail tanning, etc.) | or, | Other 1 % Describe: Misc items |
| 7. B | usinesse | s/Lice | nses | on the Pre | emises | s (check a | all that apply): | | |
| Туре | | | | F3 - 5 4- 50 | | | | | Journal Makeurene Chule |
| | Full Service Re | estaurant | | ☐ Cafe/Coffee Shop ☐ Deli or F | | | | :/Fraternal/Veterans Club | |
| | Night Club | | | ☐ Tavern | | Cocktail | Lounge | ∐ Teen C | lub |
| | Banquet Hall | | | Sports Facil | ity | Bowling | · | | |
| | Hotel/Motel : | | | ors: | | Rooming | g House: Number of Floo | | |
| <u></u> | | Numbe | r of Roo | oms: | | | Number of Roc | oms: | |
| Type | 2 Liquor Store | | | Corner Stor | e e | Superma | arket | Conver | nience Store |
| | Gas Station | | | Amusemen | t/Phonog | raph Distribut | or | Recycli | ng, Salvage or Towing |
| | Used Car Dealer Personal Service Establishment Recording Studio (such as tattoo business, hair salon, tailor, etc.) | | | | | | | | |
| Wha | What other licenses/permits will you hold at this location? (check all that apply) | | | | | | | | |
| | ■Occupancy Permit Cigarette & Tobacco Gas Station Extended Hours Class "B" Tavern Weights & Measures | | | | | | | | |
| | Secondhand Dealer Precious Metal & Gem Other: | | | | | | | | |
| 8. | 8. Legal Capacity (only if a Type 1 premises in #7 above) | | | | | | | | |
| Capa | city | (| Call the | Milwaukee Dev | elopmen | t Center at 414 | 4-286-8211 if you have qu | estions.) | |

| 9. Premises Description | | | | | | | | | | |
|--|--|---|--|---|--|--|--|--|--|--|
| a. Identify all area(s) of the premises that will be used in operating this business (include areas used only for storage): ■1 st Floor □2 nd Floor ■Basement Storage □Patio □Beer Garden □Sidewalk Café □Deck □Rooftop | | | | | | | | | | |
| □Other: De | □Other: Describe: | | | | | | | | | |
| | | | | | | | | | | |
| c. Nearest Ma | F Park Di | | | | | | | | | |
| d. Describe Building: 🗌 Free Standing Building 🔳 Strip Mall 🔲 Other: | | | | | | | | | | |
| e. Describe Pr | emises Structure: 🔲 Single Sto | ry 🔳 Multi-Story - # of Sto | ries $\frac{2}{}$ Other: | | | | | | | |
| | rrounding Area: 🔳 Commercia | | | | | | | | | |
| | vner Name: B33 Downer Ave | | | | | | | | | |
| Building Ov | vner Address: 601 Union Stre | eet, Suite 1115, Seattle | , VVA 98101 | | | | | | | |
| 10. Hours o | Operation & Custon | mers | | | | | | | | |
| Will customers be | entering the premises? No | Yes | | | | | | | | |
| | Proposed Hour | s of Operation: | Estimated Number | Potential Age Range | Class B Tavern Applicant Only: | | | | | |
| Day of the Wee | Open Time (include a.m. or p.m.) (inc | | of Customers expected each day | of Customers | Age Restriction (If none, write 'None') | | | | | |
| Sunday | 9:00 a.m. | 9:00 p.m. | 150 | 21 to 80+ | | | | | | |
| Monday 9:00 a.m. 9:00 | | 9:00 p.m. | 125 | 21 to 80+ | | | | | | |
| Tuesday | Tuesday 9:00 a.m. 9:00 p.m. | | 150 | 21 to 80+ | | | | | | |
| Wednesday | 9:00 a.m. | 9:00 p.m. | 175 | 21 to 80+ | | | | | | |
| Thursday | 9:00 a.m. | 9:00 p.m. | 200 | 21 to 80+ | | | | | | |
| Friday | 9:00 a.m. | 9:00 p.m. | 250 | 21 to 80+ | | | | | | |
| Saturday | 9:00 a.m. | 9:00 p.m. | 750 | 21 to 80+ | | | | | | |
| An Extended Hour piercing, salon, tai | s Establishment License is requirely, tanning, etc.), recording stud | red for any convenience stor dio or restaurant which is op | e, filling station, persona en between the hours of | l service establish 12:00 a.m. and 5 | ment (such as tattoo, body :00 a.m. | | | | | |
| Alcohol Establishn Permitted Hours o | nents Class A: 8:00 | am to 9:00 pm Sunday thru am to 2:00 am Sunday thru | Saturday | | | | | | | |
| Entertainment Ou | | Opm Sunday-Thursday; 12:0 tablished by the Common Co | | | | | | | | |
| 11. Signatu | re(s) | | | | \ | | | | | |
| Signature of Sole Proprietor, Partner, or 20% or more Shareholder Signature of additional partner or 20% or more shareholder | | | | | | | | | | |
| (If there are r | to 20% or more shareholders, ficer-print name/title and sign) | do no | - Sugar D. | 2. | | | | | | |
| Son Application Information for a complete list of all required application forms | | | | | | | | | | |

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 <u>www.milwaukee.gov/license</u>

| Legal | Entity Name: Boss Babes, Inc. | | | | | | | | |
|----------------|---|--|--|--|--|--|--|--|--|
| Premi | Premise Address: 2638 N. Downer Ave., Milwaukee, WI 53211 | | | | | | | | |
| Proxi | Proximity of Premises to Church, School, Daycare Center or Hospital | | | | | | | | |
| Is the | Is the building within 300 feet of any church, school, daycare center or hospital? | | | | | | | | |
| "Serv | vice Bar Only" Designation | | | | | | | | |
| If app | olying for Class B or C license, are you applying for "Se | ervice Bar Only"? | | | | | | | |
| Servi No st | ce Bar Only means customers cannot sit at the bar. A ools, chairs or other articles of furniture shall be plac | alcohol is served to employees who serve patrons seated at tables. ed at the service bar for patrons to sit upon. | | | | | | | |
| Busir | ness Information | | | | | | | | |
| a) . | Are you taking out this application for anyone that m | ay not be eligible for a license? . 🚺 No 🔲 Yes | | | | | | | |
| | If yes, list their name and address: | T No. 17 Voc | | | | | | | |
| | | conducting the day-to-day operations of the business? No Yes will: | | | | | | | |
| | ir no, not the name and address of the person, of the | | | | | | | | |
| | | dividual licensee will not be conducting the day-to-day operations of the business, | | | | | | | |
| | the person(s) listed above must obtain a Class B Man Does anyone else have money invested or any other | | | | | | | | |
| c) | If yes, explain: The three shareholders of the corporate | | | | | | | | |
| | • | any loan or any other payments based upon income from the business? | | | | | | | |
| | ✓ No Yes If yes, list name and address: | | | | | | | | |
| Prop | erty Information (New & Transfe | r Applicants Only) | | | | | | | |
| a) | Do you own or lease the building? | □Own ☑Lease | | | | | | | |
| b) | Who owns the fixtures (for example, coolers, etc.)? | | | | | | | | |
| l ' | Are you purchasing the stock and/or fixtures? | No ✓Yes If yes, amount paid \$ | | | | | | | |
| | Total amount paid for business | \$ 699,000 | | | | | | | |
| · · | | ¢ | | | | | | | |
| (e) | Total amount paid for goodwill of the business | lationships 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 | e business, the excess may be considered goodwill. | | | | | | | |
| f) | | | | | | | | | |
| Leas | e Information (New & Transfer A | pplicants who are leasing the premises only) | | | | | | | |
| a) | Date lease begins 1/1/24 Ends 12/31/ | 26 | | | | | | | |
| b) | Monthly rental \$ 3,440.80 | | | | | | | | |
| c) | Do you have an option to renew the lease? 🔲 No | | | | | | | | |
| d) | | rty without the consent of the owner? No Yes | | | | | | | |
| e) | For what length of time have you been guaranteed of | occupancy (number of years)? 3 | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

| Lea | se Information (Continued) |
|----------|--|
| f) g) | 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 |
| Ha | If yes, explain |
| Sigi | nature |
| | ature of Sole Proprietor, Partner or 20% or More Shareholder or 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: Boss Babes, Inc. | | | | |
|---|--|--|--|--|
| Premises Address: 2638 N. Downer Ave., Milwaukee, WI 53211 | | | | |
| 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 5,000 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: | | | | |

ccl-foodplan 2/28/19

| SECTION 4 DETAILS OF OPERATION | ON | | | | | |
|--|-------------|--|--|--|--|--|
| Will you have seating on site for dining? | No No | Yes | | | | |
| Will you be doing any catering? | X No | Yes | | | | |
| Will you be doing any delivery? | No. | Yes | | | | |
| Will you have outdoor activities? | X 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? | | | | | | |
| | | many?(for example, a hotel with several dining rooms or bars) | | | | |
| If multiple sites, attach a Food Dealer Addit | tional Site | Addendum (ccl-foodadd) for each additional site. | | | | |
| SECTION 6 CONSTRUCTION OR | CHANGE | S | | | | |
| Are you planning any construction, remode | eling or ed | quipment changes? | | | | |
| No If No, SKIP to Section 7 | | | | | | |
| Yes If Yes, check all that apply: | ☐ Nev | v construction of a building Renovation or remodeling | | | | |
| | | struction changes to existing building | | | | |
| Provide a brief description of the changes: | | | | | | |
| Start date: | | | | | | |
| Name, Address & Phone Number of Archit | ect: | | | | | |
| | | | | | | |
| Name, Address & Phone Number of Contra | | | | | | |
| manay man coo at notice manager of control | | | | | | |
| SECTION 7 ALCOHOL BEVERAGE | ES | | | | | |
| Are you applying for an alcohol beverage li | icense? | | | | | |
| ☐ 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 tim | e as the alcohol license | | | | |
| SECTION 8 ACKNOWLEDGEMEN | NTS & SI | GNATURE | | | | |
| You must initial each item confirming your | understa | anding: | | | | |
| | | - | | | | |
| before the license may be issue | | st conduct an inspection and advise the License Division of their approval | | | | |
| SOZ understand must obtain an o | ccupancy | permit from the Department of Neighborhood Services and an inspection | | | | |
| he issued. | od Service | es must advise the License Division of their approval before the license may | | | | |
| SOZ understand the district alderp | erson wil | Il review and either support or object to my application. If he/she objects, I | | | | |
| may appeal and be scheduled t | o 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. I understand proof of payment for all license fees must be on file in the License Division before the license may be | | | | | | |
| | | nd posted in my establishment prior to opening for business. I the license has been issued and posted in the establishment. | | | | |
| I will not operate my rood business | | Oc ho | | | | |
| Signature of Sole Proprietor, Partner, or 20% Shareholder: | | | | | | |
| Signature of Additional Partner: | /9 7 | if M. Colom | | | | |
| | | | | | | |

Skie- Faon D. Z.

cci-wmplan 1/9/18

MILWAUKEE

WEIGHTS & MEASURES PLAN OF OPERATION

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

| Legal Entity Name: BOSS Balsel, Tuc, |
|--|
| Premise Address: 2638 N. Downer Ave., Milwauber WP 53211 |
| Type of Business |
| Provide a brief description of the establishment/business: Small retail establishment selly beer, whe, liquor, to bace, and snack items. Wan floor is retail area, There is a small envery area in the batement. Other licenses may be required depending on the type of business you are operating. |
| 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: |
| |
| 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) |
| This form must be submitted with the Business License Application, Weights & Measures License Supplemental Application, and appropriate fee. Forms can be obtained online at www.milwaukee.gov/licenses . |



WEIGHTS & MEASURES LICENSE SUPPLEMENTAL APPLICATION

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

| Office U | se Only: |
|----------|------------|
| App# | 00FP2E M3W |
| Filed | 13.19.23 |
| Initials | |
| Paid | |
| Lic# | |

| Legal Entity Name | 12000 | Rahas | ار ال | | | |
|-------------------|-------|--------|----------|----------------|-------|--|
| | | | | | | |
| Premise Address: | 2638 | N. Dow | ner tre. | bishvanter, WI | 53211 | |
| Device Type(s) | | | 1 | | | |

- Check all device types for which you need a license.
- For each device type checked, indicate how many you have in the Number of Devices column (b).
- Calculate the Total Fee Per Device Type by multiplying the Fee Per Device Type (a) by the Number of Devices (b).
- Add all Total Fee Per Device Type amounts together and that will be your Total Fee Due.
 - **Exception:** The Scanner fee is not per device. Check the box for the appropriate range. If you have 1-3 scanners, the total due is \$130. If you have 4 or more scanners, the total due is \$250. Check the Number of Devices (b).

| | Device Type | License Period | Fee Per Device Type (a) | Number of Devices (b) | Total Fee Per Device Type (a x b) |
|------|------------------------------|----------------|-------------------------------|-------------------------------------|---|
| Liqu | id Measuring Devices | | | | |
| | Retail Petroleum Meters | 12 months | \$60 | | |
| | 0 to 30 gallons per minute | 24 months | \$60 | | |
| | 31 to 200 gallons per minute | 24 months | \$250 | | |
| | Over 200 gallons per minute | 24 months | \$250 | | |
| Scal | ės | | | | |
| | Measuring any weight amount | 24 months | \$55 | | |
| Scar | nners | | Fee for scanners is by range | Check how many scanners you have | |
| V | Up to 3 scanners | 24 months | \$130 total* | □1 1 2 1 ⁷ 2 □3 | |
| | Four or more scanners | 24 months | \$250 total* | □4 □Other | |
| Oth | er Devices | | | | |
| | Length Measuring Device | 24 months | \$60 | | |
| | Timing Device | 24 months | \$30 | | |
| | | | | Total Fee Due | 130,00 |

Signature

I hereby agree that I will comply with the applicable sections of the Wisconsin State Statutes, Administrative Code and the Milwaukee Code of Ordinances regarding the operation of weighing and measuring devices.

I understand that all devices must be operated within the specifications, tolerances and other technical requirements set forth in the National Institute of Standards and Technology Handbook 44. I understand that the license for which I am applying must be posted on the premises or in my vehicle prior to opening for business or operating the device.

I understand that these device licenses are not transferable (with the exception of scanners). If the device is replaced or needs to be resealed, I must apply for and receive a new license so that an inspection of the device can be performed prior to its use. l acknowledge that as a condition of being issued this license, I must allow the Health Department into the establishment to test the device to validate its specifications/tolerances. If my devices are found out of compliance, I may be charged inspection fees. I have read, understand, and will adhere to all the above acknowledgments.

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)

This form must be submitted with the Business License Application, Weights & Measures Plan of Operation, and appropriate fee. Forms can be obtained online at www.milwaukee.gov/licenses.

