



BUSINESS LICENSE APPLICATION

SEE INFORMATION SHEET FOR THE TYPE OF LICENSE FOR WHICH YOU ARE APPLYING FOR ADDITIONAL FORMS REQUIRED

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: license@milwaukee.gov

ccl-busapp 12/3/14

BUSINESS CONTACT INFORMATION

Section 1

Form for Section 1: BUSINESS CONTACT INFORMATION. Includes checkboxes for Sole Proprietor, Corporation, LLC, Partnership, Nonprofit Organization. Fields for Legal Entity Name (Cobblestone Partners LLC), Business/Trade Name (Valhalla), Phone (414-735-2424), E-mail (manager@valhallamke.com), Premises Address (1111 N. Old World 3rd Street, Milwaukee 53203), and Mailing Address options.

AGENT / SOLE PROPRIETOR / 1ST PARTNER INFORMATION

Section 2

Form for Section 2: AGENT / SOLE PROPRIETOR / 1ST PARTNER INFORMATION. Fields for Full Legal Name (McUity Kenneth J), Date of Birth (1/10/65), Home Address (5573 N. Hollywood Ave, Whitefish Bay, WI 53217), Driver's License Number/State ID # (M254-5106-5070-24), State (WI), Home Phone (NA), Cell Phone (414-731-1812), Cell Phone Provider (T-Mobile), and Percent % of Ownership Interest (100%).

LIST ALL PERSONS WITH 20% OR MORE OWNERSHIP INTEREST / ADDITIONAL PARTNER(S)

Section 3

Form for Section 3: LIST ALL PERSONS WITH 20% OR MORE OWNERSHIP INTEREST / ADDITIONAL PARTNER(S). Multiple rows for name, address, license, phone, and ownership interest.

OCCUPANCY PERMIT STATUS AND SIGNATURE(S)

Form for Section 4: OCCUPANCY PERMIT STATUS AND SIGNATURE(S). Includes 'CHECK ONE' for occupancy permit status, a declaration of understanding of regulations, and a statement of truthfulness.

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.

Office Use Only: Initials: Filed: Applications: Exp Date: License # Note Other Lics



Sidewalk Dining Facility Supplemental Application

ccl-side1 6/13/16

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(414) 286-2238 www.milwaukee.gov/license e-mail address: license@milwaukee.gov

Premises Address: 1111 N OLD WORLD THIRD ST

Aldermanic District # 4

Business Operations

1. Check one: Also applying for Food/Alcohol license(s) at this time

Currently hold Food/Alcohol license(s) # _____

2. Sidewalk Dining Facility will operate from: Start Date: 5/1/17 to End Date: 10/30/17

3. Will any food preparation be done outdoors? No Yes

If yes, describe: _____

AND complete/submit the "Request To Modify Food Establishment/Food Operational Plan" with this application

4. What type of security will be provided? Same as Food/Alcohol Other: _____

5. Will any sidewalk dining facility improvements be physically attached to public structures? No Yes

If yes, describe: _____

Property Owner

Check one: Applicant owns the property

Property owner's information/signature provided below (REQUIRED):

Name: _____ Phone # _____

Address: _____

Property Owner's Signature: _____

Signature

Signature of Applicant:  _____

Submit this application with the following additional forms:

- Detailed Floor Plan (see page 2 for detailed instructions)
 - Sidewalk Dining Facility Certificate of Insurance (ccl-side4)
 - Business License Application (ccl-busapp)*
 - Business Plan of Operation (ccl-busplan)*
- *only one copy of these forms is needed if submitting with other license applications
- Request To Modify Food Establishment/Food Operational Plan (if preparing food outdoors)

Office Use Only:

Initials _____ Filed _____ App # _____ Lic # _____

Also holds/applying for: Food Alcohol Perm Ext

Queue for Approval to: Health DNS CC

Email for Approval to: DPW



BUSINESS LICENSE PLAN OF OPERATION

ccl-busplan 9/26/16

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(414) 286-2238 www.milwaukee.gov/license e-mail address: license@milwaukee.gov

1. Type of Business

Applying for: Extended Hours (12AM to 5AM) - If a food establishment, check all that apply: Delivery Drive Thru Dining Room
 Self Service Laundry Massage Establishment Filling Station
 Other (supplemental application for specific license also required)

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

Do you have any experience operating this type of business? No Yes If yes, explain: uber Tax room

2. Business Operations

- a. Proposed Opening Date: 3/1/17
- b. Is this premise under construction? No Yes If yes, list estimated completion date: 2/10/17
- c. Is this a franchise? No Yes
- d. Is this premises currently licensed? No Yes If yes, list type of license: _____
- e. Is the current licensee operating? No Yes If no, list date closed: _____
- f. Do you have future plans for other businesses, licenses or permits at this location? No Yes
If yes, explain: _____
- g. Have you previously held an Extended Hours License in Milwaukee? No Yes
If yes, list address(es): _____
- h. Are other businesses operating in the same building? No Yes If yes, describe: _____

3. Litter & Noise

- a. How are grounds kept clean? Sweep Pressure Wash Pick Up Litter Other: _____
- b. How often will grounds be cleaned? Daily Weekly As Needed Monthly Other: _____
- c. Grounds cleaned by: Licensee Building Owner Employees Hired Maintenance Other: _____
- d. How are noise issues prevented and/or addressed? Security Manager approaches customer(s) Call Police
 Signs Posted Other: _____
- e. Will a sound amplification system be used? No Yes If yes, describe: stereo system

4. Smoking & Sanitation

- a. Are there designated outdoor smoking areas? No Yes If yes, describe: outside to south
- b. Number of Garbage Cans: Inside: 4 Locations: ends of bar, in front, near restrooms
Outside: 1 Locations: near smoking area
- c. Is a crowd control barrier used? No Yes If yes, describe: _____
- d. How many restrooms are on the premises? 2
- e. Name of solid waste contractor: Advanced Disposal Waste Management Other: _____

9. Premises Description

a. Identify all area(s) of the premises that will be used in operating this business (include areas used only for storage):

1st Floor 2nd Floor Basement Storage Patio Beer Garden Sidewalk Café Deck Rooftop

Other: Describe: _____

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

c. Nearest Major Cross Street: Highland + 3rd street

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

e. Describe Premises Structure: Single Story Multi-Story - # of Stories 3 Other: _____

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

g. Building Owner Name: McQuity Holdings LLC Phone Number: 414-731-1812

Business Owner Address: 1111 N. Old World 3rd Street, Milwaukee 53003

10. Hours of Operation & Customers

Will customers be entering the premises? No Yes


Day of the Week	Proposed Hours of Operation:		Estimated Number of Customers expected each day	Potential Age Range of Customers	Class B Tavern Applicant Only: Age Restriction (If none, write 'None')
	Open Time (include a.m. or p.m.)	Close Time (include a.m. or p.m.)			
Sunday	11am	10 pm	150	18-90	None
Monday	4pm	2 am	250		
Tuesday	4am	2 am	450		
Wednesday	4pm	2 am	450		
Thursday	4pm	2 am	450		
Friday	11am	2:30 am	1000		
Saturday	11am	2:30 am	1000		

An Extended Hours Establishment License is required for any convenience store, filling station, personal service establishment (such as tattoo, body piercing, salon, tailor, tanning, etc.), recording studio or restaurant which is open between the hours of 12:00 a.m. and 5:00 a.m.

Alcohol Establishments Class A: 8:00 am to 9:00 pm Sunday thru Saturday
 Permitted Hours of Operation: Class B: 6:00 am to 2:00 am Sunday thru Thursday, 6:00 am to 2:30 am Friday & Saturday

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

11. Signature(s)


 Sole Proprietor, Partner, Agent, or 20% or more Shareholder

 Signature of additional partner or 20% or more Shareholder

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

