

CITY OF MILWAUKEE OFFICE OF THE CITY CLERK

Wednesday, May 15, 2024

COMMITTEE MEETING NOTICE

BAILEY, Charles, Agent Kinn GH LL LLC 600 N BROADWAY 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.

Wednesday, May 29, 2024 at 09:30 AM

The access code is <u>https://meet.goto.com/790544861</u>. If you wish to call in: <u>+1 (872) 240-3412</u> and use Access Code: 790-544-861 Please see the enclosed best practices document for further instructions.

Regarding:

Your Class B Tavern, Public Entertainment Premises and Hotel/Motel License Renewal Applications with Change of Agent and Banquet Hall Change of Hours From Closing at 10PM on Fri&Sat To Close at 1AM on Fri&Sat; AND Loading Zone License Transfer Application with Charge of Agent as agent for "Kinn GH LL LLC" for "Kinn MKE Guesthouse" at 600 N BROADWAY.

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 85-4-4, unless otherwise specified in the code, probative evidence concerning non-renewal, suspension or revocation may include evidence of the following: failure of the applicant to meet municipal qualifications, pending charges against or the conviction of any felony, misdemeanor, municipal offense or other offense, the circumstances of which substantially relate to the circumstances of the particular licensed or permitted activity, by the applicant or by any employee or other agent of the applicant. If the activities of the applicant involve a licensed premises, whether the premises tends to facilitate a public or private nuisance or has been the source of congregations of persons which have resulted in any of the following: disturbance of the peace; illegal drug activity; public drunkenness; drinking in public; harassment of passers-by; gambling; prostitution; sale of stolen goods; public urination; theft; assaults; battery; acts of vandalism including graffiti, excessive littering, lottering, illegal parking, loud noise at times when the licensed premise is open for business; traffic violations; curfew violations; lewd conduct; display of materials harmful to minors, pursuant to s. 106-9.6; or any other factor which reasonably relates to the public health, safety and welfare, or failure to comply with the approved plan of operation. It is the intention of the Common Council to suspend or non-renew the license if objectors provide testimony related to the factors enumerated in MCO 85-4-4 that the Common Council finds to be true by a preponderance of the evidence and/or police reports are found to be true by a preponderance of the evidence. The police reports and other attached documents relating to objections to the license are a part of this notice and expressly incorporated in this not

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.

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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. <u>www.milwaukee.gov/license</u> Phone: (414) 286-2238 Fax: (414) 286-3057 Email Address: License@milwaukee.gov AD 04



Wednesday, May 15, 2024



Notice of Public Hearing

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BAILEY, Charles, Agent

Kinn MKE Guesthouse at 600 N BROADWAY Class B Tavern, Public Entertainment Premises and Hotel/Motel License Renewal Applications with Change of Agent and Banquet Hall Change of Hours From Closing at 10PM on Fri&Sat To Close at 1AM on Fri&Sat; AND Loading Zone License Transfer Application with Change of Agent

Wednesday, May 29, 2024 at 9:30 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 5/29/2024 at 9:30 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 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	225 E MICHIGAN ST# 401	MILWAUKEE, WI 53202-4912
CURRENT OCCUPANT	225 E MICHIGAN ST# 402	MILWAUKEE, WI 53202-4912
CURRENT OCCUPANT	225 E MICHIGAN ST# 403	MILWAUKEE, WI 53202-4912
CURRENT OCCUPANT	225 E MICHIGAN ST# 404	MILWAUKEE, WI 53202-4912
CURRENT OCCUPANT	225 E MICHIGAN ST# 501	MILWAUKEE, WI 53202-4912
CURRENT OCCUPANT	225 E MICHIGAN ST# 502	MILWAUKEE, WI 53202-4912
CURRENT OCCUPANT	225 E MICHIGAN ST# 503	MILWAUKEE, WI 53202-4912
CURRENT OCCUPANT	225 E MICHIGAN ST# 504	MILWAUKEE, WI 53202-4912
CURRENT OCCUPANT	225 E MICHIGAN ST# 505	MILWAUKEE, WI 53202-4912
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CURRENT OCCUPANT	225 E MICHIGAN ST# 511	MILWAUKEE, WI 53202-4912
CURRENT OCCUPANT	225 E MICHIGAN ST# 601	MILWAUKEE, WI 53202-4912
CURRENT OCCUPANT	225 E MICHIGAN ST# 602	MILWAUKEE, WI 53202-4912
CURRENT OCCUPANT	225 E MICHIGAN ST# 603	MILWAUKEE, WI 53202-4912
CURRENT OCCUPANT	225 E MICHIGAN ST# 604	MILWAUKEE, WI 53202-4912
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CURRENT OCCUPANT	225 E MICHIGAN ST# 609	MILWAUKEE, WI 53202-4912
CURRENT OCCUPANT	225 E MICHIGAN ST# 610	MILWAUKEE, WI 53202-4912
CURRENT OCCUPANT	225 E MICHIGAN ST# 611	MILWAUKEE, WI 53202-4912
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Total Records: 26

Radius 250.0 feet and Center of the Circle: 600 N Broadway

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	eration for 600 N BROADWAY
How are the grounds kept cle	
How often will grounds be cl	
Who cleans the grounds?	Licensee Douilding Owner KEmployees Hired Maintenance Other:
Mother: Licensee	ted and/or addressed? (Security Manager approaches customer(s) (Call Police Asigns Posted (Sin Constant Contact With neighbors r smoking areas? (No Ves If Yes, Describe:
Number of garbage cans:	Inside 39 Locations All common Areas, berthropmad guestrooms
Is a crowd control barrier use	d? 🔀 No 🗌 Yes If Yes, Describe:
Number of restrooms:	9 Name of solid waste contractor: Waste Manoleement
	the premises? 🙀 No 🗌 Yes If Yes, list number of spaces: and describe security plans:
Do you have security person AND What are their resp What security equi	areas? No 18 Yes if Yes, describe security plans: The Monthored by Front Desk and Valet. Tel on the premise? No 18 Yes, how many? ionsibilities? Cremenal Scenetry oment do they use? Camenas
	restilization or training credentials:
Are unorange unity comprasy.	ENDIX Yes If Yes, list all locations: Lobby, Entry, Stairwelk, Commandes
	envined upon Check. In W/ Facial Recognition
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Alcohol 102 9	Food Sales % Entertainment % Other 90 %
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·回:Annaurant 如:回:Calla/co	rfea Shôo 🗇 Cocktall Lounge 👘 Convenience Store 🗍 Night Club 👘 Liquor Store 📑 Tavera 🔲 Sports Facility
📕 angla 👘 📓 bangla	
alexanization of the monthle	Restriction :
Ale distance objects of the	nurrent hours of operation or age restriction? [] No Wyes If Yes, Describe:
please Note : Nyan will un often Dawne fine New Jacobie : Division	explet brinner than the hours listed on your current license for even one event or holiday (for example, St. Patrick's Day,
Volustico va of coperation, all trage	restriction are listed on your current license.
a nizo al an anticapacity	and and
supprise new floor pain with this Inforroacion	renewal application. A sample plan can be found online at <u>www.pullwaukee.pov/licenses</u> under License Forms and Related Tromanencextension of Premises Application" is required if you are adding any square fontage to the licensed premises.
TO THE POWER OF A DESCRIPTION OF A DESCR	An Internet and the second s
a Chi)an HObling Harr	sidewai kolinings ite in an T 🗶 No 🗌 Yes 🛛 If Yes, submit an updated site plan with this application.
and the second se	
z lana danan hadi	B. Weights and Measures: Fee:
You, surent fordillerne include Are pare on, chanses to you fo TVD, perform	*the following fe6d over allons: de operation: as intel angle: Mino 口 Yes, Are there any changes to the number or types of devices? 风No 口Yes If yes, contact our office for further instructions.

The following types of entertainment have been approved for your current Public Entertainment Premises license: Disc Jockey, Patrons Dancing, Instrumental Musicians, Bands, Wedding Receptions, Private Parties 2 ADDING ENTERTAINMENT If applicable, check any entertainment you wish to add: ONLY CHECK ENTERTAINMENT TYPE(5) YOU ARE ADDING. YOUR CURRENT APPROVED ENTERTAINMENT IS LISTED ABOVE. ALSO SUBMIT AN UPDATED FLOOR PLAN AND PLAN OF OPERATION OR CONFIRMATION STATEMENT IF THE NEW ENTERTAINMENT DOES NOT CHANGE THE CURRENT PLAN OF OPERATION. Instrumental Musicians 🔲 Bands 🔲 Battle of the Dands Comedy Acts Disc Jockey Magic Shows Poetry Readings Dancing by Performers Jukebox Patron Contests Patrons Dancing Wrestling Adult Entertainment/ Bowling Alley Pool Tables 🗌 Karaoke Strippers/Erotic Dance How many? _ How many? Motion Pictures (movies by admission) Theatrical Performances Amusement Machines Concerts How many screens?_ Approx, # per year? How many? Approx. If per year? Other: No entertainment changes can take place until approved by Common Council and a new license has been issued and posted on the premises, 3. REMOVING ENTERTAINMENT If applicable, list any entertainment you wish to remove: are supported and the state of e wante i Will promoters ever, be used for any of the entertainment? 🕅 No 🗌 Yes 🛛 If Yes, Describer Aranytime will sound amplituation of used? INO & Yes If Yes, Describe: Speakers have always Seen year Time Bronguete Facility theCammo trages to inform the sity clerk within 10 days of any substantial changes in the information supplied in this application. Introduction of the services of fered under this license, or add charges or require deposite not required of the period bill the calles of meters color, sex, religion, national origin or ancestry, age, handleap, lawful source of income, marital status, sexual provident and an addition of the period of the per Linve moviega of the City drainances currently regulating public encertainment and understand that the license may be subject to autoension adhivenewsion revocations if will at early rule, law or regulation of the City of Milwaukee and State of Wisconsin. nature of Sole Proprietor, a Partner, or if a Corporation or LLC, the Agent must sign

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HOTEL & MOTEL LICENSE SUPPLEMENTAL RENEWAL APPLICATION

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

Legal Entity Name: Kinn GH LL LLC
Premises Address: 600 N BROADWAY
MILWAUKEE COUNTY REPRESENTATIVE
Is the applicant (sole proprietor, partners, or agent of Corp/LLC) a resident of Milwaukee County? Yes No If NO, a local representative (natural person) residing in Milwaukee County must be appointed. Provide the person's name and street address. P.O. Boxes are not acceptable.
Name of Person: Phone number:
Charles Bailey 773-909-4947
Street Address (including city and zip code):
2036 N. Prospect, Apt. 908, Milwanker, WI 53202
PLAN OF OPERATION & FLOOR PLAN
Describe your plans to train employees to recognize and report guest or resident behaviors that are indicative of human trafficking at the premises.
Allemployees are trained and video surveillance is monitored.
Rooms = 32
Are there any changes to your current plan of operation or floor plan*? 🔀 No 🗌 Yes If yes, describe:
*If there are changes to the floor plan, a new floor plan must be submitted with this renewal application. A sample plan can be found online at <u>www.milwaukee.gov/licenses</u> under License Forms and Related Information.
HOURS OF OPERATION
Are there any changes to the current hours of operation?
NO X YES If Yes, describe changes: Allow Banquette Facility to 1:00an Friday and Saturday
Hours of operation are listed on your current license.
SIGNATURE
Signature of Sole Proprietor; a Partner; or if a Corporation or LLC, the Agent must sign

BUSINESS TRANSFER APPLICOffice of the City Clerk License L200 E. Wells St. Room 105, Milw(414) 286-2238www.milwaukee.gov	Division
SECTION 1 CHECK THE TYPE OF TRANSFER:	and a second second Second second
CHANGE OF LOCATION	🕅 CHANGE OF AGENT 🔲 TRANSFER OF STOCK
SECTION 2 LIST ALL LICENSE(S) TO TRANSFER:	
Type/Number: Alcohol Beverage Type/Number: Cigaret	te and Takenco Type/Number: Loading Zone 5626
Type/Number: Business Type/Number: Hotel/	د.
SECTION 3 LICENSE(S) ARE CURRENTLY ISSUED TO:	
Legal Entity Name: K: nn GALL LLC Premises Address: 600 N. Broadway	
SECTION 4 TRANSFER TO: (ENTER ALL'OWNERSHIP IN	
	Corporation XLC Non Profit
Legal Entity Name: K:nn GH LL LLC Premises Address (include city/state/zip): GOO N. Broadway, M: wankee, WI Mailing Address: Same as premise Other (include city/state/zip)	Trade/DBA Name: K:nn Guesthouse Downtown 53202
Phone: 855-546-6653 SECTION 5 AGENT / SOLE PROPRIETOR / 1 ST PARTNER	Email: info@ k: inguesthouse.com
Home Address (include city/state/zip): 2036 N. Prospect, Apt 908, M: wa Driver's License Number/State ID #: B400-1416	Date of Birth: 11/14/1969 INKER, WI 53202 -9404-DJ State: WI
Home Phone:	Cell Phone: 773 -909-4947
Percent of Ownership Interest (if applicable):	Email: charles & Kinnguesthouse.com
	WNERSHIP INTEREST / ADDITIONAL PARTNERS
FULL LEGAL NAME (Last, First & Middle Initial): Kinn Chresth	pute LLC Date of Birth:
Home Address (include city/state/zip):	
600 N. Broadway, M. Iwanker, WI 53	
Driver's License Number/State ID #:	State:
Home Phone: \$55-546-6653	Cell Phone:
Percent of Ownership Interest: 100%	Emaily Kinnelsesthouse, con-
<u></u>	Date of Birth:
FULL LEGAL NAME (Last, First & Middle Initial): Home Address (include city/state/zip):	Date of Birth:
FULL LEGAL NAME (Last, First & Middle Initial):	State:
FULL LEGAL NAME (Last, First & Middle Initial): Home Address (Include city/state/zip):	
FULL LEGAL NAME (Last, First & Middle Initial): Home Address (include city/state/zip): Driver's License Number/State ID #:	Date of Birth:
FULL LEGAL NAME (Last, First & Middle Initial): Home Address (include city/state/zip): Driver's License Number/State ID #:	Date of Birth:
FULL LEGAL NAME (Last, First & Middle Initial): Home Address (include city/state/zip): Driver's License Number/State ID #:	Date of Birth:
FULL LEGAL NAME (Last, First & Middle Initial): Home Address (include city/state/zip): Driver's License Number/State ID #: Home Phone: Percent of Ownership Interest: Are there additional persons with 20% or more interest or partners?	Date of Birth: Date of Birth: Date of Birth: Ceil Phone: Email: No Yes If yes, attach additional forms as necessary. cation #(s) 364/144 Paid

SECTION 7	PLAN OF OPERATION & FLOOR PLAN
Are you requesti	ng changes to the current plan of operation or floor plan?
	ou must submit a new Plan of Operation and Floor Plan. Required for all changes of location.
· 🔲 No	
SECTION 8	SIGNATURE(S)

I/we understand that I am/we are required to inform the City Clerk within 10 days of any substantial changes in any of the information supplied in this application.

I/we have knowledge of the City Ordinances currently regulating the license applied for herein, and understand that the license may be subject to suspension, non-renewal or revocation, if I/we violate any rule or regulation relating to this license.

I/we understand that I/we shall not willfully refuse to provide the services offered under this license, or add charges or require deposits not required of the general public because of race, color, sex, religion, national origin or ancestry, age, handicap, lawful source of income, marital status, sexual orientation, gender identity or expression, familial status or the fact that a person is now or has been a member of the military service, whether dressed in uniform or not; and shall not seek such information as a condition of employment, or penalize any employee or discriminate in the selection of personnel for training or promotion on the basis of such information.

I/we certify that I am/we are the applicant and all statements are true and correct/

Signature of Agent or 20%+ Owner