



CITY OF MILWAUKEE  
OFFICE OF THE CITY CLERK

Monday, June 15, 2026

COMMITTEE MEETING NOTICE

AD 13

SINGH, Manjit, Agent  
BOLLYWOOD ENTERTAINMENT LLC  
445 WESTMOOR DR  
BROOKFIELD, WI 53005

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, June 30, 2026 at 09:35 AM**

The access code is <https://meet.goto.com/873979789>. Please see the enclosed best practices document for further instructions.

**Regarding:** Your Class B Tavern, Public Entertainment Premises and Food Dealer Licenses Application Requesting Instrumental Musicians, Disc Jockey, Bands and Patrons Dancing as agent for "BOLLYWOOD ENTERTAINMENT LLC" for "THE AVION BLEU" at 5917 S HOWELL 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 during normal business hours is available at reduced rates (5 hour limit) at the Associated Bank River 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](http://www.milwaukee.gov/license)  
Phone: (414) 286-2238 Fax: (414) 286-3057 Email Address: License@milwaukee.gov

# MILWAUKEE POLICE DEPARTMENT LICENSING

## CRIMINAL RECORD/ORDINANCE VIOLATION/INCIDENTS SYNOPSIS

DATE: 05/20/26

LICENSE TYPE: Class B Tavern

NEW:

RENEWAL:

No. 393486

Application Date:

License Location: 5917 S Howell

Business Name: The Terminal

Licensee/Applicant: Halser, Joseph G IV  
(Last Name, First Name, MI)

Date of Birth: 03/01/67

Home Address: 5188 W Princeton Pines Ct

City: Franklin

State: WI Zip Code: 53132

Home Phone:

This report is written by Police Officer Penny Monreal, assigned to the License Investigation Unit, Days.

The Milwaukee Police Department's investigation regarding this application revealed the following:

1. On 08/19/17, James Halser (33.3% Shareholder) was charged with OWI in Cudahy Municipal Court. On 09/07/17 he was convicted and his license was revoked for 6 months.

=====

### Previous Premise

Date: 05/19/2026  
Officer: PO Fabian Garcia

City of Milwaukee Police Department  
90-5-1.5 Crime Prevention Survey  
Tavern Inspection

Name of Premise: The Avion Bleu  
Address: 5917 S. Howell Avenue  
Phone:

Owner:  
Owner address:  
City State Zip:  
Owner Phone:  
Owner email:

Licensee/Agent: Manjit Singh  
Home Address: 445 Westmoor Drive  
City State Zip: Brookfield WI 53005  
Phone: 262-894-0913  
Email: manjit@tasteofindiawi.com

Preferred contact: phone

Location currently open:  YES  NO

Projected open date: once license are approved

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

Hours of Operation: Sun: 7a-12a 24 hours Y N  
Mon: 7a-12a  
Tue: 7a-12a  
Wed: 7a-12a  
Thu: 7a-12a  
Fri: 7a-12a  
Sat: 7a-12a

Premise Type:  Tavern/Bar  
 Restaurant  
 Other: Banquette

Licenses currently held:

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

**Exterior Survey:**

1. Is the area around the location clean?  Yes  No
2. What surrounds the location? (Check all the apply)
  - a.  Park
  - b.  School
  - c.  Youth Center
  - d.  Church
  - e.  Tavern(s) If so, how many
  - f.  Residential
  - g.  Other businesses
  - h.  Other:
3. Can you see from the outside of the location into the interior  Yes  No
4. Can you see the employees inside of the location from the outside  Yes  No
5. Are exterior windows free of signage  Yes  No
6. Is there a parking lot  Yes  No
7. Is the parking lot clean?  Yes  No
8. Off-Street parking  Yes  No
9. Is the parking lot well lit?  Yes  No **Not Observed**
10. Valet Parking  Yes  No
  - a. Will this lot have a guard?  Yes  No
  - b. Will this lot have cameras?  Yes  No
11. Are there areas where a person could conceal themselves  Yes  No
12. Is there exterior lighting?  Yes  No. Does it appears to be adequate  Yes  No
13. Exterior Payphone?  Yes  No
14. Are there No Loitering Signs posted?  Yes  No **WILL ADD**
15. Are there exterior security cameras  Yes  No How Many: **WILL ADD APPR 10**
16. Are the address numbers prominently displayed and easy to see  Yes  No

**Camera Survey: WILL BE ADDING CAMERAS**

17. Does this location have security cameras?  Yes  No
18. Are they in working order?  Yes  No
19. What format are the cameras?
  - a. Color  Yes  No
  - b. Digital  Yes  No
  - c. Recorded  Yes  No
20. How long is footage stored for later viewing:
21. Are there exterior cameras  Yes  No How many: **WILL ADD 10**
22. Are there interior cameras  Yes  No How many: **WILL ADD 6**
23. Do all employees know how to retrieve recorded digital images/footage?  Yes  No

24. Cameras located in parking lot  Yes  No How many **WILL ADD**

**Interior Survey:**

25. What is the planned capacity? 300
26. What is the minimum number of employees That will be on premise: 20
27. 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
28. Is the interior of the location neat and clean?  Yes  No
29. Does an interior camera face the entrance/exit?  Yes  No
30. Is there a lockable area that separates employees from customers?  Yes  No
31. Are emergency and non-emergency numbers posted near the phone?  Yes  No
32. 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

**Security**

33. How many security personnel are going to be employed: 1-3
34. How will they be deployed: Interior  Exterior
35. What days will they be deployed  Mon  Tue  Wed  Thu  Fri  Sat  Sun
36. Will the security be managed by business  or contracted
37. Will they be armed  Yes  No
38. What type of security measures to be used:
- Wanding/metal detector
  - ID Scanner
  - Dress Code
  - Cover Charge
  - Age restriction
  - Other JUST FOR PRESENCE AND SAFETY

**ADDITIONAL COMMENTS/RECOMMENDATIONS:**

This report was written by Police Officer Fabian GARCIA assigned to District 6-Days, Squad 6164.

On Tuesday, May 19, 2026 at 11am, I met with licensee/agent Manjit SINGH at 5917 S. Howell Avenue. SINGH stated that he will be calling the location The Avion Bleu and this space will be used as a banquette hall. SINGH plans to be open every day and the hours will vary depending when and what time the space is needed. SINGH stated the location will not be open no later than 12am and no earlier than 7am.

The location currently does not have exterior nor interior surveillance cameras. SINGH stated that he plans on installing 10 exterior surveillance cameras, 8 of which will be mounted on the property facing out into the parking lot and facing the entry and exit points. Two surveillance cameras will be installed to face the entrance into the parking lots. SINGH stated that the interior will have approximately 6 surveillance cameras throughout. A conversation was had regarding placement of cameras, which SINGH stated they will be facing any entry/exit points and near the bar area.

SINGH stated that he plans to have security for every event that is planned, which can range from 1 to 3 security guards. SINGH stated he will only have three security guards if alcohol is involved, which he will have one security guard in the parking lot and two in the interior. There are currently no "No Loitering" or "No Trespassing" signs posted on the property but plans to install signs in the near future. SINGH stated that he is going to be adding a new sign that is close to S. Howell that will have the address posted

SINGH was willing to be a standing complainant and filled and signed the form while on scene. SINGH was also provided with a District 6 community contact guide. This concludes my report and I do not have any additional comments/recommendations at this time.

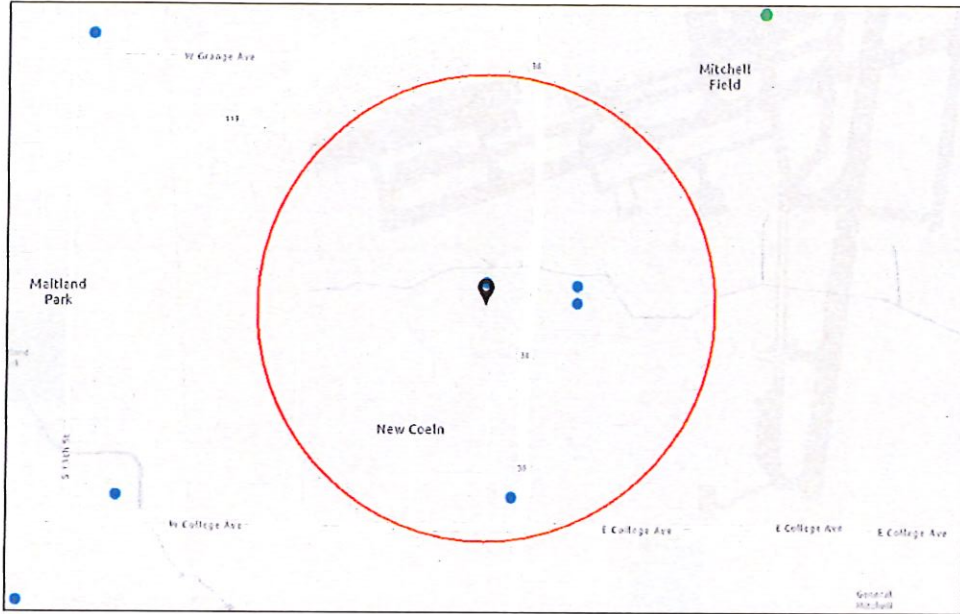


# Concentration Map for 5917 S Howell Av

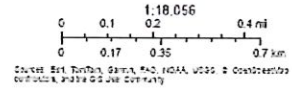
## Area of Interest (AOI) Information

Area : 21,862,585.72 ft<sup>2</sup>

May 12 2026 11:32:23 Central Daylight Time



- Alcohol Licenses (active)
- Class A Liquor and Mall
  - Class B Fermented Malt Beverage
  - Class B Tavern



## Summary

Name	Count	Area(ft <sup>2</sup> )	Length(mi)
Alcohol Licenses	4		

## Alcohol Licenses

#	Legal Entity	Trade Name	Licensee	Address	License Type Name	Total Capacity	Expiration Date	Count
1	The Bowery Group LLC	The Red Zone-Milwaukee	Roger William Hein, Agt	6247 S Howell AV	Class B Tavern License		5/22/2026, 7:00 PM	1
2	Howell Avenue ES Lodging Associates LLC	Home 2 Suites - Milwaukee Airport	Kenneth D Franz, Agt	5880 S HOWELL AV	Class B Tavern License		7/13/2026, 7:00 PM	1
3	AIRPORT LOUNGE, INC	AIRPORT LOUNGE	GEORGE C TSITSOS, Agt	5881 S HOWELL AV	Class B Tavern License	237	10/12/2026, 7:00 PM	1
4	HOWELL AVE FOS LODGING ASSOCIATES, LLC	HILTON GARDEN INN-MILWAUKEE AIRPORT	Kenneth D Franz, Agt	5890 S HOWELL AV	Class B Tavern License	120	11/2/2026, 6:00 PM	1

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



Monday, June 15, 2026



# Notice of Public Hearing

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SINGH, Manjit, Agent  
The Avion Bleu at 5917 S HOWELL Av  
Class B Tavern, Public Entertainment Premises and Food Dealer Licenses Application Requesting  
Instrumental Musicians, Disc Jockey, Bands and Patrons Dancing

**Tuesday, June 30, 2026 at 9:35 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 6/30/2026 at 9:35 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](mailto: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.

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## 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	5881 S HOWELL AVE	MILWAUKEE, WI 53207-6229
CURRENT OCCUPANT	5905 S HOWELL AVE	MILWAUKEE, WI 53207-6231
CURRENT OCCUPANT	5910 S HOWELL AVE	MILWAUKEE, WI 53207-6232
CURRENT OCCUPANT	5922 S HOWELL AVE	MILWAUKEE, WI 53207-6232
CURRENT OCCUPANT	5937 S HOWELL AVE	MILWAUKEE, WI 53207-6231

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Total Records: 5

Radius 250 feet and Center of the Circle: 5917 S Howell Av



# BUSINESS LICENSE PLAN OF OPERATION

ccl-busplan 5/12/2020

Office of the City Clerk License Division  
200 E. Wells St. Room 105, Milwaukee, WI 53202  
(414) 286-2238 www.milwaukee.gov/license e-mail address: [license@milwaukee.gov](mailto: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: see last page of application

Do you have any experience operating this type of business?  No  Yes If yes, explain: Own 2 other restaurants. Brookfield and Milw.

## 2. Business Operations

- a. Proposed Opening Date: as soon as possible
- b. Is this premise under construction?  No  Yes If yes, list estimated completion date: \_\_\_\_\_
- c. Is this a franchise?  No  Yes
- d. Is this premises currently licensed?  No  Yes If yes, list type of license: \_\_\_\_\_
- e. Is the current licensee operating?  No  Yes If no, list date closed: 2024
- f. Do you have future plans for other businesses, licenses or permits at this location?  No  Yes  
if yes, explain: Alcohol, Entertainment, Food
- g. Have you previously held an Extended Hours License in Milwaukee?  No  Yes  
If yes, list address(es): \_\_\_\_\_
- h. Are other businesses operating in the same building?  No  Yes If yes, describe: \_\_\_\_\_

## 3. Litter & Noise

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

## 4. Smoking & Sanitation

- a. Are there designated outdoor smoking areas?  No  Yes If yes, describe: toilet
- b. Number of Garbage Cans: Inside: 7 Locations: 2 @ bar, 1 ea. tl room, 4 @ table area  
Outside: 3 Locations: main exit, 2 at deck
- c. Is a crowd control barrier used?  No  Yes If yes, describe: \_\_\_\_\_
- d. How many restrooms are on the premises? 2 sets
- e. Name of solid waste contractor:  Advanced Disposal  Waste Management  Other: \_\_\_\_\_

## 5. Security

- a. Are there onsite parking spaces?  No  Yes If yes, how many? 300 and describe the parking security plan: None
- b. Is there a loading zone?  No  Yes If yes, describe the loading area security plan: \_\_\_\_\_
- c. Will you have licensed security on premise?  No  Yes If yes, how many? \_\_\_\_\_ and answer the following:  
 What are their responsibilities? \_\_\_\_\_  
 Describe equipment used \_\_\_\_\_  
 List their License Number (s) \_\_\_\_\_
- d. Will there be security cameras?  No  Yes If yes, how many? 6 and list locations: 2 outside, 4 inside
- e. Will searches/identification checks be done upon entry?  No  Yes If yes, describe \_\_\_\_\_

## 6. Percentage of Sales (must total 100%)

Alcohol <u>40</u> %	Food <u>60</u> % Cigarettes, Electronic Vape Devices, <u>0</u> % Tobacco Products	Secondhand Merchandise <u>0</u> %	Precious Metals & Gems <u>0</u> %
Entertainment <u>0</u> %	Salvaged Materials <u>0</u> % (such as scrap metal)	Personal Services (such as tattoo, body piercing, salon, tailor, tanning, etc.) <u>0</u> %	Other <u>0</u> % Describe: _____
Pawnbroker Activity _____ %			

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

### Type 1

- Full Service Restaurant     Cafe/Coffee Shop     Deli or Fast Food Restaurant     Private/Fraternal/Veterans Club
- Night Club     Tavern     Cocktail Lounge     Teen Club
- Banquet Hall     Sports Facility     Bowling Alley
- Hotel/Motel : Number of Floors: \_\_\_\_\_     Rooming House: Number of Floors: \_\_\_\_\_  
 Number of Rooms: \_\_\_\_\_    Number of Rooms: \_\_\_\_\_

### Type 2

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

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

- Occupancy Permit     Cigarette, Tobacco, Electronic Vape Products     Gas Station     Extended Hours     Class "B" Tavern     Weights & Measures
- Secondhand Dealer     Precious Metal & Gem     Other: Entertainment

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

Capacity 300 (Call the Milwaukee Development Center at 414-286-8211 if you have questions.)

## 9. Premises Description

- a. Identify all area(s) of the premises that will be used in operating this business (include areas used only for storage):  
 1<sup>st</sup> Floor  2<sup>nd</sup> 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: College Avenue
- d. Describe Building:  Free Standing Building  Strip Mall  Other: \_\_\_\_\_
- e. Describe Premises Structure:  Single Story  Multi-Story - # of Stories \_\_\_\_\_  Other: \_\_\_\_\_
- f. Describe Surrounding Area:  Commercial  Residential  Industrial  Other: \_\_\_\_\_
- g. Building Owner Name: Manjit Singh Phone Number: 262-894-0913  
 Building Owner Address: 445 Westmoor Drive, Brookfield, WI 53005

## 10. Hours of Operation & Customers

Will customers be entering the premises?  No  Yes

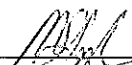
Day of the Week	Proposed Hours of Operation:		Estimated Number of Customers expected each day	Potential Age Range of Customers	Class B Tavern Applicant Only: Age Restriction (If none, write 'None')
	Open Time (include a.m. or p.m.)	Close Time (include a.m. or p.m.)			
Sunday	10 am	12 am	unknown	0-100	NONE
Monday	10 AM	12 AM	300		
Tuesday	SAME	SAME	300		
Wednesday	SAME	SAME	300		
Thursday	SAME	SAME	300		
Friday	SAME	SAME	300		
Saturday	SAME	SAME	300		

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

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

Entertainment Outdoor Closing Hours: 10:00pm Sunday-Thursday; 12:00am Friday & Saturday; unless a different time, either earlier or later, is established by the Common Council in its approval of the licensee's plan of operation.

## 11. Signature(s)

  
 Signature of Sole Proprietor, Partner, or 20% or more Shareholder  
 (If there are no 20% or more shareholders,  
 Corporate Officer-print name/title and sign)

\_\_\_\_\_  
 Signature of additional partner or 20% or more shareholder

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

## BUSINESS PLAN OF OPERATION

Legal Name: Bollywood Entertainment, LLC  
Business Name: The Avion Bleu (DBA)  
Address: 5917 Howell Avenue, Milwaukee  
Owner: Manjit Singh

Wedding & Banquet hall holding special events such as weddings, corporate events, large gatherings. There will be an average of 2 - 3 events per weekend.  
All events will have catering services and alcohol service during open hours, via full-service bar.

There will be an area for entertainment and dance floor.

Decorating the facility is available.

Facility is ADA accessible with onsite parking, including an elevated outdoor patio area, accessible via the upper level.

Facility will allow exclusive access for attendees only during a booking.

We will have all required licenses required for operation in Milwaukee, including Class B License, DHS license, and entertainment licenses, and Responsible Beverage Server Certificate.



# ALCOHOL BEVERAGE & PUBLIC ENTERTAINMENT PREMISES SUPPLEMENTAL APPLICATION

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

Legal Entity Name: **Bollywood Entertainment, LLC**

Premise Address: **5917 S. Howell Avenue**

### Proximity of Premises to Church, School, Daycare Center or Hospital

Is the building within 300 feet of any church, school, daycare center or hospital?  No  Yes

### "Service Bar Only" Designation

If applying for Class B or C license, are you applying for "Service Bar Only"?  No  Yes  
Service Bar Only means customers cannot sit at the bar. Alcohol is served to employees who serve patrons seated at tables. No stools, chairs or other articles of furniture shall be placed at the service bar for patrons to sit upon.

### Business Information

- a) Are you taking out this application for anyone that may not be eligible for a license?  No  Yes  
If yes, list their name and address: \_\_\_\_\_
  - b) Will the agent, a partner or the individual licensee be conducting the day-to-day operations of the business?  No  Yes  
If no, list the name and address of the person(s) who will: \_\_\_\_\_
- Class B Applicants: If the agent, a partner or the individual licensee will not be conducting the day-to-day operations of the business, the person(s) listed above must obtain a Class B Managers license.
- c) Does anyone else have money invested or any other interest in this business?  No  Yes  
If yes, explain: \_\_\_\_\_
  - d) Have you made an agreement with anyone to repay any loan or any other payments based upon income from the business?  
 No  Yes If yes, list name and address: \_\_\_\_\_

### Property Information (New & Transfer Applicants Only)

- a) Do you own or lease the building?  Own  lease
- b) Who owns the fixtures (for example, coolers, etc.)? **building owner owns coolers. Tenant owns remainder**
- c) Are you purchasing the stock and/or fixtures?  No  Yes If yes, amount paid \$ \_\_\_\_\_
- d) Total amount paid for business \$ **0**
- e) Total amount paid for goodwill of the business \$ **0**

Goodwill comprises the reputation and customer relationships of an existing business. If the price you pay for the business exceeds the fair market value of all of the rest of the assets of the business, the excess may be considered goodwill.

Form Continues on next page →

## Lease Information (New & Transfer Applicants who are leasing the premises only)

- a) Date lease begins waiting for Ends \_\_\_\_\_
- b) Monthly rental approvals \_\_\_\_\_
- 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)?  \_\_\_\_\_
- 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): \_\_\_\_\_

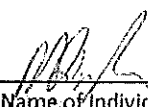
## Responsible Beverage Server Training

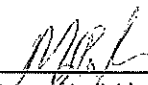
- a) Within the last 2 years have you held a bartender's license in the state of Wisconsin?  No  Yes
- b) Within the last 2 years have you held a Class "A" or Class "B" alcohol beverage license, or a Class "B" manager's license in the state of Wisconsin?  No  Yes
- c) Within the last 2 years have you completed a Responsible Beverage Server Training Course in the state of Wisconsin?  No  Yes

If you answered no to all the above questions, proof of course completion must be provided by submitting your course certificate to the License Division.

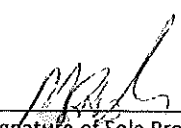
For Course enrollment information, contact MATC at (414) 297-8370 or for similar approved courses see "Training" on the Wisconsin Department of Revenue's Website (<https://www.revenue.wi.gov/Pages/Training/alcSellerServer.aspx>)

I understand that a license will not be issued without a copy of the course certificate or proof of the license held within the last two years being submitted to the License Division.

  
\_\_\_\_\_  
Print Name of Individual/Partner/Agent

  
\_\_\_\_\_  
Signature of Individual/Partner/Agent

## Signature

  
\_\_\_\_\_  
Signature of Sole Proprietor, Partner or 20% or More Shareholder  
(If no 20% or more Shareholder, Corporate Officer - print name/title and sign)

Note: All information contained in this application is subject to approval by the Common Council.  
Deviating from approved plan of operation will subject licensee to citations, and/or suspension or non-renewal of the license.  
Contact the License Division for information on how to request changes.

## New and transfer of premises applicants must submit the following:

- Detailed floor plan
- If a restaurant, copy of the menu



# FOOD DEALER LICENSE PLAN OF OPERATION

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

Legal Entity Name:

Premises Address:

## SECTION 1 TYPE OF BUSINESS

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

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

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

Will it be a convenience store?  Yes  No

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

Bed & Breakfast

Micro Market

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

Will any wholesale business be done?  No  Yes If yes, what percentage of food sales will be wholesale?

Less than 25%

25% or More AND:

Restaurant items (meals) will be sold – Complete this application and also contact DATCP.

NO restaurant items (meals) will be sold - Do NOT complete this application. Contact DATCP only.

## SECTION 2 FOOD PROCESSING

Will any food processing be done? , No  Yes

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

## SECTION 3 FOOD REQUIRING TEMPERATURE CONTROL

Will any food that requires temperature control be sold?  No  Yes  
(includes dairy products such as milk, cheese, and ice cream, fish, shellfish, meat, poultry)

If yes, list the types of food items: Chicken, Meat, French fries  
cheese curds

**SECTION 4 DETAILS OF OPERATION**

Will you have seating on site for dining?  No  Yes

Will you be doing any catering?  No  Yes

Will you be doing any delivery?  No  Yes

Will you have outdoor activities?  No  Yes - Check all that apply:  Bar  Cooking/Grilling  Dining

Will you have a drive thru window?  No  Yes - Are hours different from inside?  No  Yes  
If Yes, provide drive thru hours:

Will scales or barcode scanners be used?  No  Yes - You must also apply for a Weights & Measures License.

**SECTION 5 ADDITIONAL SITES**

Where will food be prepared and/or sold?  
 At a single site  At multiple sites: How many? \_\_\_\_\_ (for example, a hotel with several dining rooms or bars)  
 If multiple sites, attach a Food Dealer Additional Site Addendum (ccl-foodadd) for each additional site.

**SECTION 6 CONSTRUCTION OR CHANGES**

Are you planning any construction, remodeling or equipment changes?  
 No If No, SKIP to Section 8  
 Yes If Yes, check all that apply:  New construction of a building  Renovation or remodeling  
 Construction changes to existing building  Equipment changes only

Provide a brief description of the changes: no equipment in facility. New equip. need purchase & delivered

Start date: July 1, 2026

Name, Address & Phone Number of Architect: Morph Designs LLC, W10953 Dead End Road, Waupun, WI 53963 920-948-7975

Name, Address & Phone Number of Contractor: \_\_\_\_\_

**SECTION 7 ALCOHOL BEVERAGES**

Are you applying for an alcohol beverage license?  
 No If No, SKIP to Section 9  
 Yes If YES, if your food license is approved prior to the alcohol license, when do you want the food license issued?  
 Immediately  At the same time as the alcohol license

**SECTION 8 ACKNOWLEDGEMENTS & SIGNATURE**

You must initial each item confirming your understanding:

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

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

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

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

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

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

Signature of Additional Partner: \_\_\_\_\_



# 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](http://www.milwaukee.gov/license) e-mail address: [license@milwaukee.gov](mailto:license@milwaukee.gov)

**PREMISES ADDRESS:** 5917 S. Howell Avenue

**TYPES OF ENTERTAINMENT (CHECK ALL THAT APPLY)**

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

*Entertainment Outdoor Closing Hours: 10:00pm Sunday-Thursday; 12:00am Friday & Saturday; unless a different time, either earlier or later, is established by the Common Council in its approval of the licensee's plan of operation.*

**PROMOTERS/SOUND AMPLIFICATION**

Will promoters ever be used for any of the entertainment?  No  Yes If Yes, Describe:

At any time will sound amplification be used?  No  Yes If Yes, Describe:

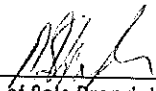
**LEGAL CAPACITY OF PREMISES**

300 (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.

**ACKNOWLEDGEMENT/SIGNATURE**

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

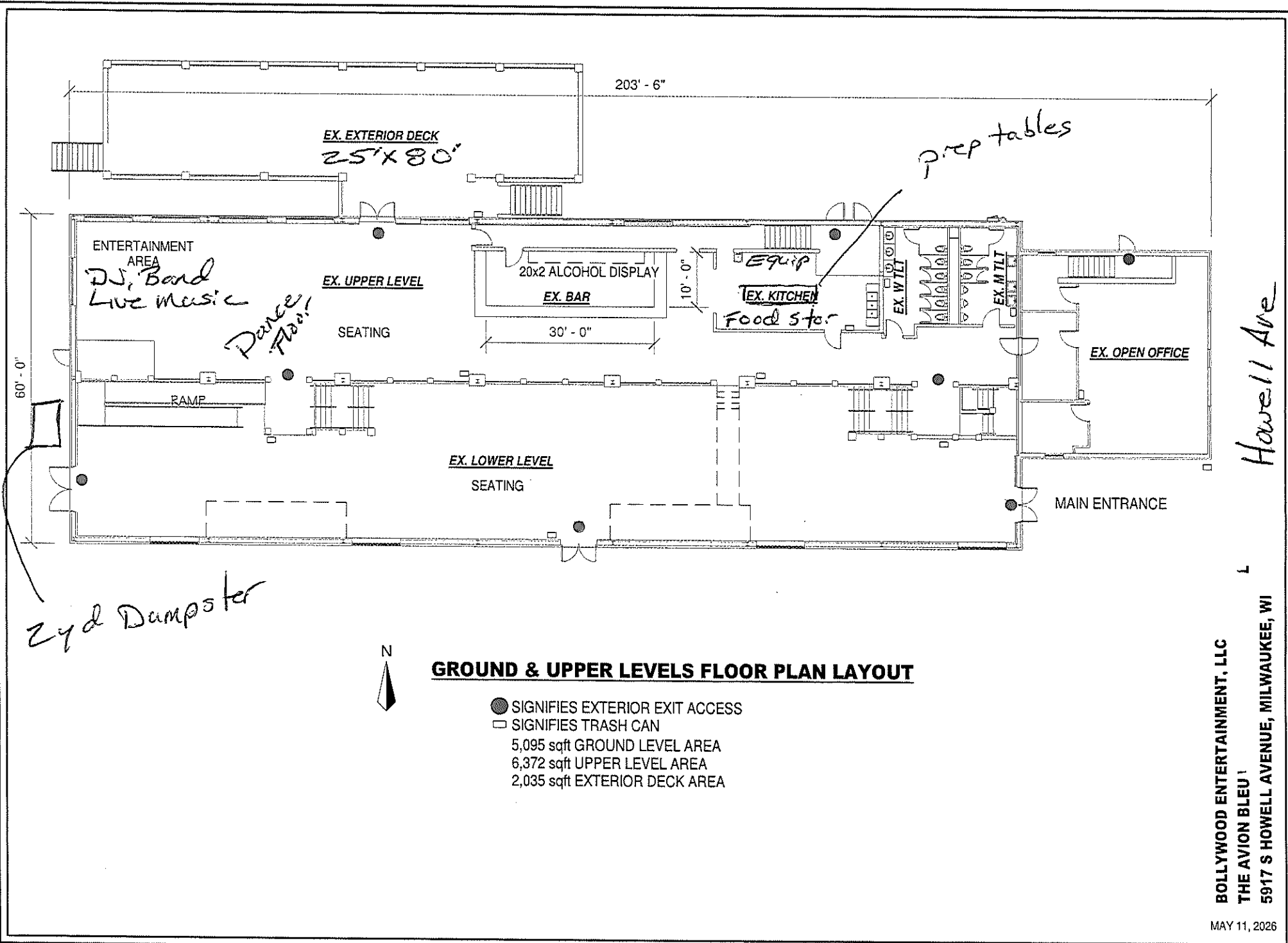
I have knowledge of the City Ordinances currently regulating public entertainment, and understand that the license may be subject to suspension, non-renewal or revocation, if I violate any rule, law or regulation of the city of Milwaukee and State of Wisconsin.

  
\_\_\_\_\_  
Signature of Sole Proprietor, Partner or 20% or More Shareholder  
(If no 20% or more Shareholder, Corporate Officer - print name/title and sign)

**Office Use Only:**

Initials: \_\_\_\_\_ Filed: \_\_\_\_\_ App: \_\_\_\_\_

Only PEP?  No  Yes If Yes,  Queue to MPD and  Email Mgrs/Team Lead (must be heard w/in 60 days)



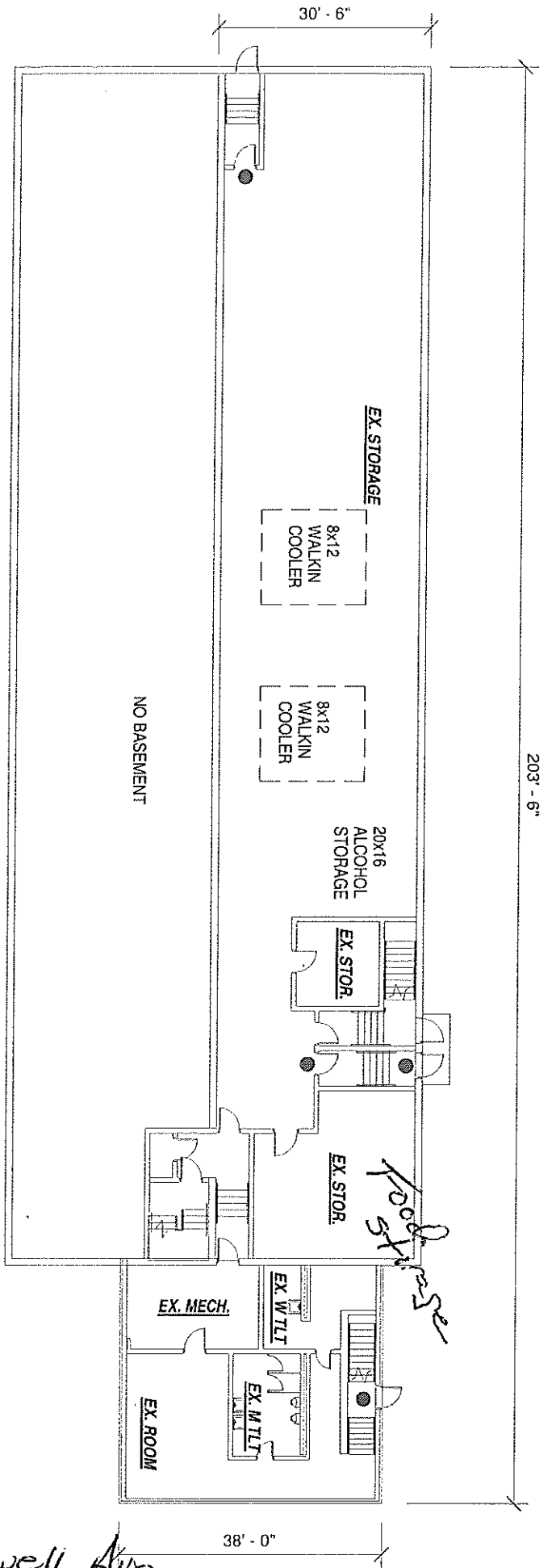
**GROUND & UPPER LEVELS FLOOR PLAN LAYOUT**

- SIGNIFIES EXTERIOR EXIT ACCESS
- SIGNIFIES TRASH CAN
- 5,095 sqft GROUND LEVEL AREA
- 6,372 sqft UPPER LEVEL AREA
- 2,035 sqft EXTERIOR DECK AREA

BOLLYWOOD ENTERTAINMENT, LLC  
 THE AVION BLEU I  
 5917 S HOWELL AVENUE, MILWAUKEE, WI

MAY 11, 2026

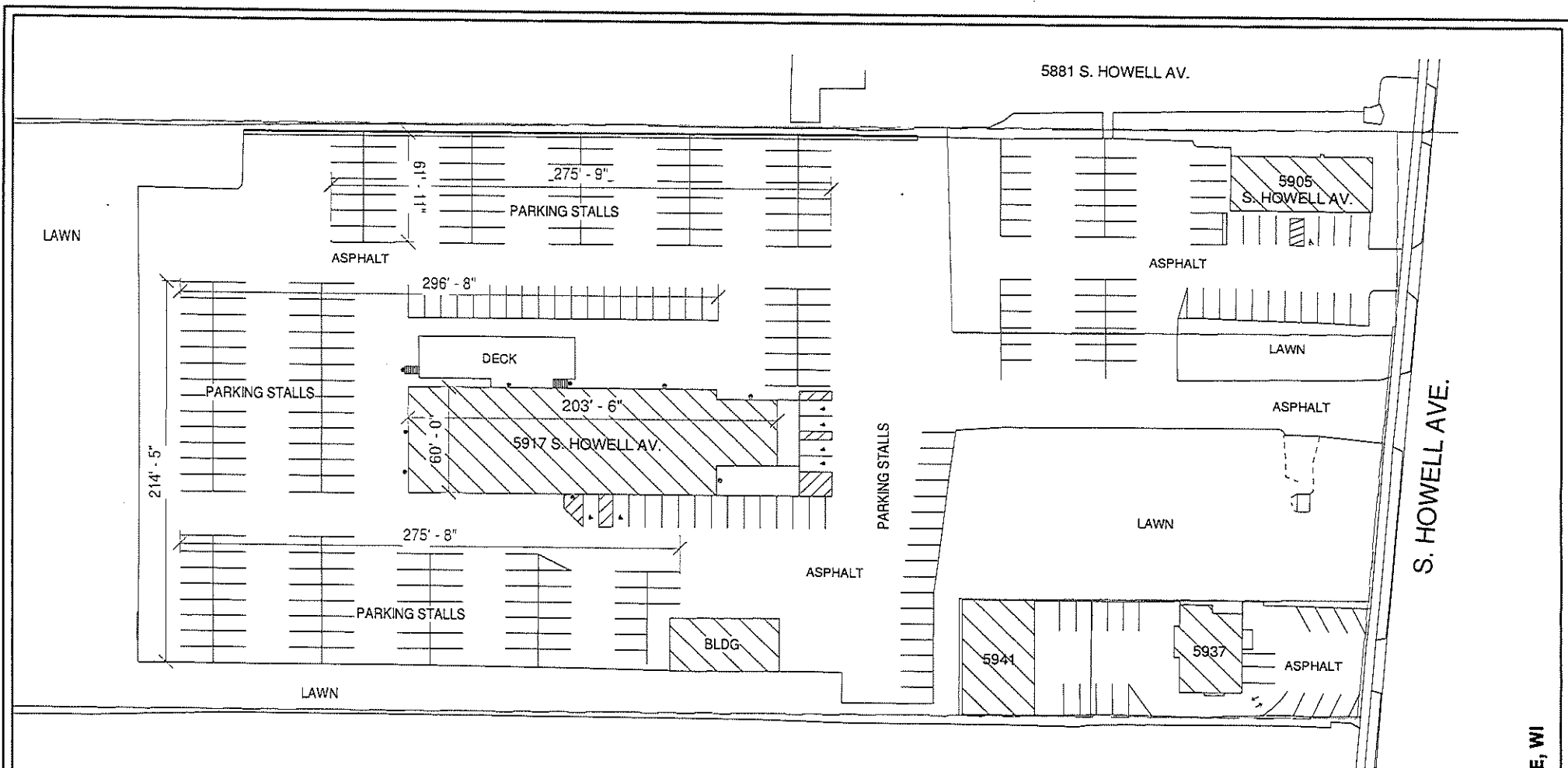
Howell Ave



**BASEMENT LEVELS FLOOR PLAN LAYOUT**

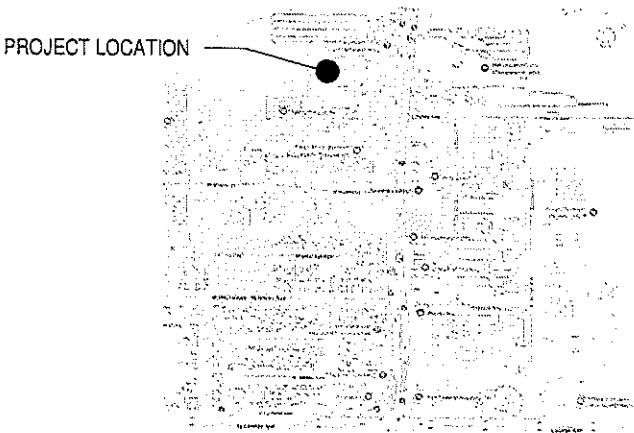
● SIGNIFIES EXTERIOR EXIT ACCESS  
 6,176 sqft BASEMENT LEVEL AREA

Howell Ave



**EXISTING SITE LAYOUT**

- 6,176 sqft BASEMENT LEVEL AREA
- 5,095 sqft GROUND LEVEL AREA
- 6,372 sqft UPPER LEVEL AREA
- 2,035 sqft EXTERIOR DECK AREA
- 19,678 sqft



**BOLLYWOOD ENTERTAINMENT, LLC**  
**THE AVION BLEU I**  
**5917 S HOWELL AVENUE, MILWAUKEE, WI**

MAY 11, 2026

Ballywood Easter Dinner 44-

Hsu Fry

Thandi's chicken

Samosa

Nani

Butter chicken

chicken TIKKA masala

SAA Paneer

Shahi Paneer

Aloo Gobhi

Aulab Jannun

Kulfi