

CITY OF MILWAUKEE OFFICE OF THE CITY CLERK

Wednesday, February 05, 2025

COMMITTEE MEETING NOTICE

AD 07

CHEN, Zhen NAN, Agent TOUCH DOWN WINGS & SEAFOOD EXPRESS INC. 3440 W FOND DU LAC AV Milwaukee, WI 53210

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, February 19, 2025 at 02:10 PM

The access code is https://meet.goto.com/757663973. Please see the enclosed best practices document for further instructions.

Regarding:

Your Food Dealer License Application as agent for "Touch Down Wings & Seafood Express Inc." for "Touch Down Wings & Seafood" at 3440 W Fond Du Lac 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 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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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

Jackson, Annette

From:

Cooney, Jim

Sent:

Wednesday, January 22, 2025 8:28 AM

To:

Jackson, Annette

Cc: Subject: Lopez, Faviola; Milano, Marissa FW: Objection to New Restaurant (January 14th 2025)

Please add.

Jim Cooney License Division Manager City Clerk-License Division 200 E Wells St #105 414-286-2238 www.milwaukee.gov/license Take our Survey!





From: Savage, Nick < Nick.Savage@milwaukee.gov>

Sent: Tuesday, January 21, 2025 4:13 PM

To: Lopez, Faviola < Faviola. Martin@milwaukee.gov >; Cooney, Jim < Jim. Cooney@milwaukee.gov >

Cc: Jackson, DiAndre < DiAndre. Jackson@milwaukee.gov>

Subject: FW: Objection to New Restaurant (January 14th 2025)

Good Afternoon,

We received this objection to Touchdown Wings.

Can we place this objection in their file?

Thank you,

Nick Savage

Legislative Assistant | 7th District Alderman DiAndre Jackson City Hall 200 E. Wells Street room 205 Milwaukee, Wisconsin 53202

Office: 414-286-2863

Nick.Savage@Milwaukee.gov

From:

Sent: Tuesday, January 21, 2025 3:52 PM

To: Jackson, DiAndre < DiAndre Jackson@milwaukee.gov > Subject: Objection to New Restaurant (January 14th 2025)

Dear Alderman Jackson,

r and I wanted to raise my objection to another unhealthy food operation that is about to open at the site of the former KFC at 3440 W Fond du Lac Ave. I believe it is named "Touchdowns and Wings".

Our community does not need another unhealthy food option in this area!!!

There is already a "Checkers" immediately across the street from this address and numerous other unhealthy sites that litter the Fond Du Lac corridor. With the health disparities that malign the black community another "WING" spot is simply not needed. I would hope that you and your office would promote a different type of establishment, a healthier choice, in our community.

Thanking you in advance.



Wednesday, February 05, 2025



Notice of Public Hearing

Blank Notice

CHEN, Zhen NAN, Agent Touch Down Wings & Seafood at 3440 W Fond Du Lac Av Food Dealer License Application

Wednesday, February 19, 2025 at 2:10 PM

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 2/19/2025 at 2:10 PM 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 recomméndation, 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.

		OUTLATE ZID
OCCUPANT	MAIL ADDICESS	CITY STATE ZIP MILWAUKEE, WI 53210-1919
CURRENT OCCUPANT	3032 N 3411101	MILWAUKEE, WI 53210-1919
CURRENT OCCUPANT	30327111	MILWAUKEE, WI 53210-1919
CURRENT OCCUPANT	3058 N 34TH ST	MILWAUKEE, WI 53210-1919
CURRENT OCCUPANT	3058A N 34TH ST	MILWAUKEE, WI 53210-1919
CURRENT OCCUPANT	3064 N 34TH ST	MILWAUKEE, WI 53210-1313
CURRENT OCCUPANT	3068 N 34TH ST	MILWAUKEE, WI 53210-1919
CURRENT OCCUPANT	3068A N 34TH ST	MILWAUKEE, WI 53210-1919
CURRENT OCCUPANT	3104 N 34TH ST	MILWAUKEE, WI 53216-3702
CURRENT OCCUPANT	3110 N 35TH ST# 1	MILWAUKEE, WI 53216-3746
CURRENT OCCUPANT	3110 N 35TH ST# 2	MILWAUKEE, WI 53216-3746
CURRENT OCCUPANT	3110 N 35TH ST# 3	MILWAUKEE, WI 53216-3746
CURRENT OCCUPANT	3110 N 35TH ST# 4	MILWAUKEE, WI 53216-3746
CURRENT OCCUPANT	3110 N 35TH ST# 5	MILWAUKEE, WI 53216-3746
CURRENT OCCUPANT	3111 N 34TH ST	MILWAUKEE, WI 53216-3701
CURRENT OCCUPANT	3111A N 34TH ST	MILWAUKEE, WI 53216-3701
CURRENT OCCUPANT	3118 N 34TH ST	MILWAUKEE, WI 53216-3702
CURRENT OCCUPANT	3119 N 34TH ST	MILWAUKEE, WI 53216-3701
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CURRENT OCCUPANT	3120 N 34TH ST	MILWAUKEE, WI 53216-3702
CURRENT OCCUPANT	3120 N 35TH ST	MILWAUKEE, WI 53216-3706
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CURRENT OCCUPANT		MILWAUKEE, WI 53216-3706
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Blank Notice		

Total Records: 37
Radius 250 feet and Center of the Circle: 3440 W Fond Du Lac Av



APPLICATION AMENDMENT

Office of the City Clerk License Division 200 E. Wells Street, Room 105, Milwaukee, WI 53202 (414) 286-2238

Date: 1/6/2025

e License Division of the City of Milwaukee:	
tizhen Nan Chen	, wish to amend my answer(s) on the application for a
(full legal name)	110 7 al 111 lac A1/7-
(full legal name) Mark Dealer license at 2,440 (type of license)) VV - WY A A A COLC PACE PROPERTY Premises address, if applicable)
dding or amending the following information (complete o	only those sections being amended):
Answer to Question(s) #should be:	11.2.2.4.5.9.6
Agent should be (full legal name):	Also complete 3, 4, 5 & 6
Date of birth should be:	
Home address should be (include city/state/zip):	
Phone number should be (include area code):	
Driver's License Number/State ID Number should be:	
Corporation/LLC name should be (full legal name):	
Business name should be:	
Premises address should be (include city/state/zip):	
Premises address should be (make)	1.
. Business phone number should be (include area code);
the should be linglade city/state/zin):	
. Mailing address should be (include city) state, 219).	
Empil address should be:	
P. Email address should be:	will be parked should be (include city/state/zip):
Recycling/Salvaging/Towing: Location where vehicle	
4. Class B Tavern: Age Distinction should be:	
5. Other: Change plan of A	application to clean Three Times
s. Jan 11340 class the Day	King lot 3 daily
Check with the License Division before submitting "Other" amend	dments/using this form.)
tencer min 40	
	40
	nature of Licensee (Individual, Partner, or Agent of Corp/LLC)
Sign	ature of Licensee (multidual), raidies, or rigent of early and
Office Use Only: Application #: 366360 Date:	1.6.25 Initials: TR . To LC:
LC Email: MPD NS HD	initials:

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. Type of Business
Applying for: Extended Hours (12AM to 5AM) - If a food establishment, check all that apply: Delivery 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:
Declarant
Do you have any experience operating this type of business? \[\text{No \infty} Yes \] If yes, explain: We have thany restaurants at difference operations.
7. DUSINESS OUCLAUONS
a Proposed Opening Date: 7/1/2024
b. Is this premise under construction? X No Yes If yes, list estimated completion date:
c. Is this a franchise? No Yes
Who I yes list type of license:
e. Is the current licensee operating? No Yes If no, list date closed: _/WWICA / W
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? X 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?
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:
Locations: Looky Well
b. Number of Garbage Calls. Miside: Locations: Trush Wea
c. Is a crowd control barrier used? No Yes If yes, describe:
c. Is a crowd control partier used? At the promises?
d. How many restrooms are on the premises? 2 e. Name of solid waste contractor: □Advanced Disposal □Waste Management ☑Other: □
e. Name of solid waste contractor: []Advanced Disposal [] Waste Wallagement

plan:	plan:b. Is there a loading zone? K. c. Will you have licensed secuth what are their responseribe equipment List their License Nurd. Will there be security came	No Yes If yes, des	scribe the loa	ading area security plan		
Statere a loading zone? No Yes If yes, describe the loading area security plan:	c. Will you have licensed secutive their response of their response of their List their License Nurd. Will there be security came	No Yes If yes, des	No Yes	If yes, how many?		
Will you have licensed security on premise? No Yes If yes, how/many? and answer the following: What are their responsibilities?	c. Will you have licensed secu What are their respo Describe equipment List their License Nu d. Will there be security came	urity on premise? 📈 onsibilities? used	No Yes	If yes, how many?		
What are their responsibilities? Describe equipment used List their License Number (s). d. Will there be security cameras?	What are their respondence Describe equipment List their License Nur d. Will there be security came	onsibilities? used	No 🗌 Yes	If yes,how many?	an	
What are their responsibilities? Describe equipment used List their License Number (s). d. Will there be security cameras?	What are their respondent Describe equipment List their License Nur d. Will there be security came	onsibilities? used				d answer the following:
d. Will there be security cameras? No Yes If yes, how many?	List their License Nu d. Will there be security came					
e. Will searches/identification checks be done upon entry? No	List their License Nu d. Will there be security cam	mber (s)				
e. Will searches/identification checks be done upon entry? No Yes If yes, describe I. Percentage of Sales (must total 100%) Icohol	d. Will there be security came					1 110 110
e. Will searches/identification checks be done upon entry? No Yes If yes, describe I. Percentage of Sales (must total 100%) Icohol		eras? 🗌 No 🕱 Yes	If yes, how n	nany? <u>5</u> and list	ocations: _	insul the
e. Will searches/identification checks be done upon entry? No Yes If yes, describe I. Percentage of Sales (must total 100%) Icohol	2 wilding					
Percentage of Sales (must total 100%) Icohol	e. Will searches/identificatio	n checks be done upon	entry? XN	lo 🗌 Yes If yes, descri	be	
Food						
Cigarettes, Electronic Vape Devices, Tobacco Products		Food	<u>"O</u> %	Secondhand Merchandis	e	Precious Metals & Gems
Salvaged Materials Salvage	intertainment%	Vape Devices,				<u> </u>
Full Service Restaurant	Pawnbroker Activity%	Salvaged Materials	0_%	body piercing, salon, tail	or,	
Full Service Restaurant	7. Businesses/Licenses	on the Premises	s (check a	all that apply):		
Full Service Restaurant	Type 1				□ Private	e/Fraternal/Veterans Club
Night Club	Full Service Restaurant					
Hotel/Motel: Number of Floors:	☐ Night Club	Tavern			[] teen	ciab
Number of Rooms: Number of Rooms: Number of Rooms:	☐ Banquet Hall	Sports Facility				
Type 2 Liquor Store	☐ Hotel/Motel: Number of Flo	oors:	Roomin	•		
□ Liquor Store □ Corner Store □ Supermarket □ Convenience store □ Gas Station □ Amusement/Phonograph Distributor □ Recycling, Salvage or Towing □ Used Car Dealer □ Personal Service Establishment □ Recording Studio (such as tattoo business, hair salon, tailor, etc.) 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: □	Number of Ro	ooms:		Number of Ro	OHS.	
Gas Station	Type 2	Corper Store	Superm	narket	Conve	enience Store
Used Car Dealer					☐ Rесус	ling, Salvage or Towing
Used Car Dealer (such as tattoo business, hair salon, tailor, etc.) 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 Electronic Vape Products Secondhand Dealer Precious Metal & Gem Other:	Gas Station				-	n o. !
Occupancy Permit Cigarette, Tobacco, Gas Station Extended Hours Class "B" Tavern Weights & Measures Secondhand Dealer Precious Metal & Gem Other:	Used Car Dealer	Such as tattoo bus	stabiishment iness, hair sal	on, tailor, etc.)	[] Recor	rding Studio
Secondhand Dealer Precious Metal & Gem Other:	What other licenses/permits will	you hold at this location?	(check all tha	at apply)		_
Secondhand Dealer Precious Metal & Gem Other:	Occupancy Permit	Cigarette, Tobacco,	Gas Station	Extended Hours Class	"B" Tavern	Weights & Measures
	Secondhand Dealer	Precious Metal & Gem	Other:			
A LAMBER BROKEN FRIENDE A LANCE E DICTIONAL DE LA LA MARTINE DE LA MARTI				#7 above)		

a. Identify all area(s	s) of the premises that will be d Floor Basement Storage	used in operating this busine □Patio □Beer Garden	ness (include areas used c □Sidewalk Café □De	only for storage): ck □Rooftop	
Other: Describ	oe: only one s	from W/o Busen	nent		
- Magrant Major C	ross Street: 2/411 V	v. Biwleigh			
f Describes Duildin	a. Kroe Standing Building	Strip Mall Other:			
e. Describe Premis	es Structure: Single Story	Multi-Story - # of Stor	es Other:		
	F-3	I m I lim do notri	ol Cother		
g. Building Owner	Name: Xiao Ling HW	ang F	hone Number: 920	481454	<i>M</i> ₂
Building Owner	nding Area: Sommercial Name: Haw July Hu Address: 2462 Bird	h paintle Cir.	Coreen Buy, us	54502	
	peration & Custon				
	ering the premises? \(\begin{align*} \text{No} \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\				
	Proposed Hours		Estimated Number	Potential Age Range	Class B Tavern Applicant Only:
Day of the Week		Close Time	of Customers expected each day	of	Age Restriction
	Open Time (include a.m. or p.m.)	(include a.m. or p.m.)	expected each day	Customers	(If none, write 'None')
Sunday	Noon- 1000pm	10:00 PIN	700	20-50	None
Monday	11:00 AM - 10:00 AM		200	20-50	pone
Tuesday	11:00AM-10-00PM	1,	200	70-50	More
Wednesday	11200AM-10100PM	l '	700	20-50	None
Thursday	1700/2n-/0:00/PM		700	20-50	None
Friday	11:00 AM - 11:00 DIN	1/00 PM	700	20-50	None
Saturday	This DAAN - 1200DIN	11:00 PM	700	20-50	Mone
An Extended Hours E	stablishment License is requir, tanning, etc.), recording stu	and for any convenience sto	re, filling station, person pen between the hours o	al service establis of 12:00 a.m. and	hment (such as tattoo, body 5:00 a.m.
Alcohol Establishmer	· Class Av. 9:00	am to 9:00 nm Sunday thre	ı Saturday		
Permitted Hours of C	anoration: Class R: 6:00	o am to 2:00 am Sunday thro	a Thursday, 6:00 am to 2:	30 am Friday & 5	aturuay Etime either earlier or later
Entertainment Outd	oor Closing Hours: 10:	00pm Sunday-Thursday; 12: stablished by the Common	OOam Friday & Saturday; Council in its approval of	the licensee's pla	t time, either earlier or later n of operation.
11. Signature					
	_ 1	*	> hours	in che	
Thand	e Chen	more Chareholder	Signature of additiona	I partner or 20%	or more shareholder
Signature of Sole Pr	oprietor, Partner, or 20% or r 20% or more shareholders,	Hole Maleliolaei			
(in the costs no	er-print name/title and sign)				

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



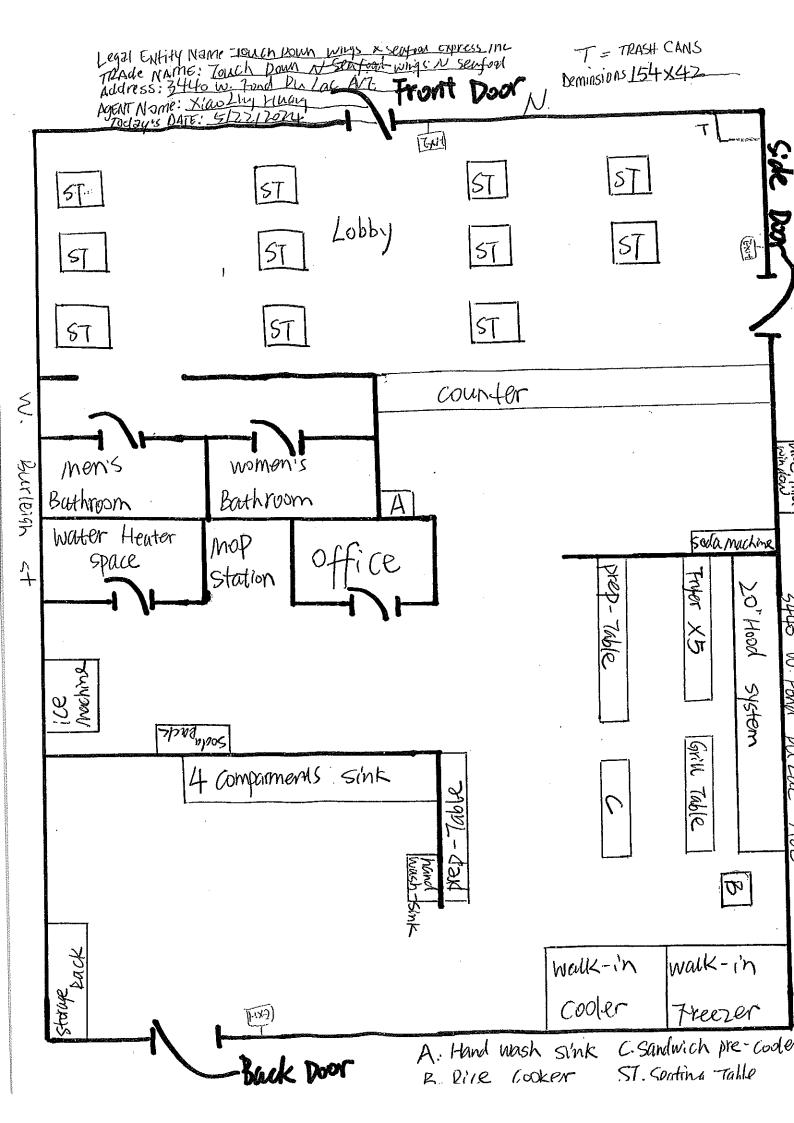
FOOD DEALER LICENSE PLAN OF OPERATION

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

egal Entity Name: 7 auch Down Wings & Senfood Zypress Inc.
Premises Address: 3440 W. Fond Dr Lac AVE, Milwan Kee M 53
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? XNo Yes If yes, what percentage of food sales will be wholesale?
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 No No
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? Who Wyes (includes dairy products such as milk, cheese, and ice cream, fish, shellfish, meat, poultry)
If yes, list the types of food items: Chicken Wings & Secretary.

ccl-foodplan 2/28/19

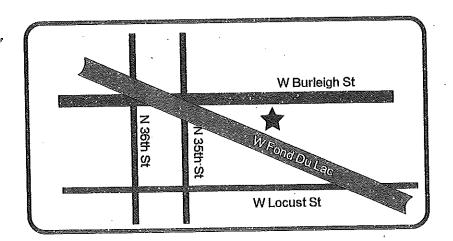
	1
SECTION 4 DETAILS OF OPERATION	
Will you have seating on site for dining? \(\sum \text{No}\) No \(\sum Yes\)	
Will you be doing any catering?	
Will you be doing any delivery? ☐ No ☑ Yes	The state of the s
Will you have outdoor activities?	
Will you have a drive thru window? \qquad \text{No} \text{No} \text{Ves - Are hours different from inside?}	F
If Yes, provide drive thru hours:	1
Will scales or barcode scanners be used? 🔀 No 🔲 Yes - You must also apply for a Weigh	ts & Measures License.
SECTION 5 ADDITIONAL SITES	
Where will food be prepared and/or sold?	soveral dining rooms or bars)
At a single site At multiple sites: How many? (for example, a hotel with	several diffing rooms of bursy
If multiple sites, attach a Food Dealer Additional Site Addendum (ccl-foodadd) for each addition	iai site.
SECTION 6 CONSTRUCTION OR CHANGES	
Are you planning any construction, remodeling or equipment changes?	
No If No, SKIP to Section 7	
Yes If Yes, check all that apply: New construction of a building Re	enovation or remodeling
Construction changes to existing building	Equipment changes only
Provide a brief description of the changes:	
Start date:	
Name, Address & Phone Number of Architect:	
Name, Address & Phone Number of Contractor:	
SECTION 7 ALCOHOL BEVERAGES	
Are you applying for an alcohol beverage license?	
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 time as the alcohol license	
SECTION 8 ACKNOWLEDGEMENTS & SIGNATURE	
You must initial each item confirming your understanding:	
I understand the Health Department must conduct an inspection and advise the	License Division of their approval
before the license may be issued.	orhood Services and an inspection
I understand I must obtain an occupancy permit from the Department of Neighborhood Services must advise the License Division of the	ir approval before the license may
be issued. I understand the district alderperson will review and either support or object to may appeal and be scheduled to appear before the Licenses Committee. The Licenses Committee are the committee of the committee of the committee of the committee.	CH3C3 COMMITTEES IVIII
recommendation to the Common Council. The Common Council must grant and I understand proof of payment for all license fees must be on file in the License I understand proof of payment for all license fees must be on file in the License I understand proof of payment for all license fees must be on file in the License I understand and posted in my establishment prior to o	DIVISION DETONE THE HOUSE
issued and the license must be issued and posted in my establishment provide of 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:	· ·
Signature of Additional Partner:	





414-949-2218 414-949-2219





3411 W Burleigh Street A.K.A 3440 W Fond du Lac Ave, Milwankee, Wi 53210

ONLINE ORDER touchdownwingsnseafood.com

BUSINESS HOURS

MON ~ THURS: 11:00AM ~ 10:00PM

FRI ~ SAT: 11:00AM ~ 11:00PM

SUNDAY: 12:00AM ~ 10:00PM

\$9.99 (\$8.99 BONELESS)

6PC WINGS

FRIES/DRINK

\$13.50 (\$12.50 BONELESS) 10 PC WINGS FRIES/DRINK





\$12.99 5PC TRADITIONAL 5PC BONELESS FRIES/DRINK



































Choice of meat: Ste With 8"Hoagie Roll, Grilled Mushrooms, Mayc

Philly Sandwich Only
Philly w/ Fries
Philly w/ 5pcs Wings
Philly 5pcs Wings w/ Fries
Extra Cheese \$0.50 / Extra Meat \$2.50

TENDE

	Tender Only
2PCS	4.49
4PCS	8.49
6PCS	11.99
10PCS	19.99

SHIII

	Shrimp Only
6PCS	7.49
12PCS	13.49

(fish choice of tilapi

	Fish Only	w/ Fries
1PCS	3.89	5.19
2PCS	6.99	8.49
10PCS	30.99	34.49

FRE

VEGGIE SHRIMP OR CHICKEN OR BEEF HOUSE

GET YOU HANDS DIRMY

Garlic Butter LP/ Garlic Butter Med Garlic Butter Cajun/Boiled Only/House Special

	1/2	1lb
S1 Crawfish	6.99	13.95
S2 Shrimp (Head Off)	10.99	20.95
S3 Green Mussels	7.99	14.99
S4 Black Mussels	6.99	12.99
S5 Snow Crab	15.99	30.99
S6 lobster tail	20.95	40.65

