



CITY OF MILWAUKEE
OFFICE OF THE CITY CLERK

Tuesday, June 08, 2021

COMMITTEE MEETING NOTICE

AD 10

HARMANPREET, Kaur, Agent
Bani Foods Inc
2719 N Blaine Pl
Milwaukee, WI 53210

You are requested to attend a virtual hearing to be held on:

Tuesday, June 22, 2021 at 10:10 AM

Regarding: Your Class A Malt, Food Dealer, Weights & Measures, and Public Entertainment Premises License Applications Requesting 3 Amusement Machines as agent for "Bani Foods Inc" for "Express Pantry" at 2719 N Blaine Pl.

This meeting will be held via GoToMeeting. Please see the enclosed best practices document for further instructions. The access code is <https://global.gotomeeting.com/join/743465261>. If you wish to call in, please call +1 (571) 317-3112 and use Access Code: 743-465-261.

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 attend this meeting may result in the denial of your license. Individual applicants and partnership applicants must attend or attend by an attorney. The agent or attorney for corporate or limited liability applicants must attend. 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 attend the virtual hearing and are 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 request an interpreter attend the meeting with you, at your expense, so that you can answer questions and participate in your hearing.

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 meeting, please contact the staff assistant, Molly Kuether-Steele at (414) 286-2775 or molly.kuether-steele@milwaukee.gov.

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

Tuesday, June 08, 2021

COMMITTEE MEETING NOTICE

AD 10

HARMANPREET, Kaur, Agent
Bani Foods Inc
8929 S Pond View Dr
Oak Creek, WI 53154

You are requested to attend a virtual hearing to be held on:

Tuesday, June 22, 2021 at 10:10 AM

Regarding: Your Class A Malt, Food Dealer, Weights & Measures, and Public Entertainment Premises License Applications Requesting 3 Amusement Machines as agent for "Bani Foods Inc" for "Express Pantry" at 2719 N Blaine Pl.

This meeting will be held via GoToMeeting. Please see the enclosed best practices document for further instructions. The access code is <https://global.gotomeeting.com/join/743465261>. If you wish to call in, please call +1 (571) 317-3112 and use Access Code: 743-465-261.

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JIM OWCZARSKI, CITY CLERK

BY: _____

Jim Cooney

License Division Manager

If you have questions regarding this meeting, please contact the staff assistant, Molly Kuether-Steele at (414) 286-2775 or molly.kuether-steele@milwaukee.gov.

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

Date: 5/14/2021

Officer: Bowie Buchner

City of Milwaukee Police Department

90-5-1.5 Crime Prevention Survey

Convenience Store/Liquor Store Inspection

Name of Business: Express Pantry

Address: 2719 N Blaine Pl

Phone: 414-377-8864

Owner: Harmanpreet Kaur

Owner address: 8929 S Pond View Dr

City State Zip: Oak Creek, WI 53154

Owner Phone: 414-377-2269

Owner email: realarmaan@icloud.com

Manager: Click here to enter text.

Home Address: Click here to enter text.

City State Zip: Click here to enter text.

Phone: Click here to enter text.

Email: Click here to enter text.

Preferred contact: Harmanpreet Kaur

Location currently open: YES NO

Projected open date: Click here to enter text.

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

Hours of Operation: Sun: 7:00AM – 9:00PM 24 hours Y N

Mon: 7:00AM – 9:00PM

Tue: 7:00AM – 9:00PM

Wed: 7:00AM – 9:00PM

Thu: 7:00AM – 9:00PM

Fri: 7:00AM – 9:00PM

Sat: 7:00AM – 9:00PM

Premise Type: Liquor Store

Convenience Store

Other:

Licenses currently held:

Alcohol: Yes No Class: A #: AMALT 322939

Tobacco: Yes No #: CIG 322941

Food: Yes No #: FOOD 322940

Extended Hours: Yes No #: Click here to enter text.

Secondhand Dealer: Yes No Type:Click here to enter text. #: Click here to enter text.

Other: Yes No Type:Weights & Measures #: W&M 322942

Other: Yes No Type: Click here to enter text. #: Click here to enter text.

Who is your alcohol distributor? Beer Capitol and General Beverage

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 Click here to enter text.
 - f. Residential
 - g. Other businesses
 - h. Other: Click here to enter text.
3. Can you see from the outside of the location into the interior Yes No
4. Can you see the employees inside of the location from the outside Yes No
5. Are exterior windows free of signage Yes No
6. Is there a parking lot Yes No
7. Is the parking lot clean? Yes No
8. Is the parking lot well lit? Yes No
9. Are there areas where a person could conceal themselves Yes No
10. Is there exterior lighting? Yes No. Does it appears to be adequate Yes No
11. Exterior Payphone? Yes No, inoperable
12. Are there No Loitering Signs posted? Yes No
13. Are the address numbers prominently displayed and easy to see Yes No

Camera Survey:

14. Does this location have security cameras? Yes No

15. Are they in working order? Yes No

16. What format are the cameras?

a. Color Yes No

b. Digital Yes No

c. VCR Yes No

d. Recorded Yes No

17. How long is footage stored for later viewing: three weeks

18. Are there exterior cameras Yes No How many: 3

19. Are there interior cameras Yes No How many: 13

20. Do all employees know how to retrieve recorded digital images/footage? Yes No

Interior Survey:

21. 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

22. Is the interior of the location neat and clean? Yes No

23. Does an interior camera face the entrance/exit? Yes No

24. Is there a lockable area that separates employees from customers? Yes No

25. Does the store sell single chore boy? Yes No

26. Does the store sell blunt wraps? Yes No

27. Does the store sell scales? Yes No

28. Does the store sell items that may be used as crack pipes? Yes No

a. Describe item : Click here to enter text.

29. Does the store have an overabundance of sandwich baggies: Yes No

30. Does the owner understand that these items are often used for drug use? Yes No

31. Do the products in the store appear to be new and rotated often? Yes No

32. Are emergency and non-emergency numbers posted near the phone? Yes No

33. 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

Complete this section if alcohol establishment is a convenience store:

(** Read full ordinance for all details "68-55 Convenience Food Stores")

All convenience food stores not exempted under sub. 3 shall:

1. Is the cash register located in a manner so that at the time of a sales transaction, the employee and customer are both visible from the sidewalk? Yes No **
2. Are the glass entrance and exit doors clear of any signs or advertisements with the exception of a sign which states that the cash register contains \$50 or less and that the safe is no accessible to employees? Yes No
3. Does the store maintain one of the following on the licensed premise:
 - a. A safe that was in use at the convenience food store on August 17, 1994?
Yes No
 - b. A drop-safe or time release safe that weighs at least 500 pounds or which is attached to or set into the floor in a manner approved by the police department? Yes No
4. Is lighting provided for the store's parking area during all hours of darkness when employees or customers are on the premises at a minimum average of 2-foot candles per square foot, unless the store is not open for business after sunset and before sunrise? Yes No N/A
5. Are at least two high-resolution surveillance security cameras installed?
Yes No
6. Are the security cameras in working order? Yes No
7. Does one camera show an overall view of the counter and register area?
Yes No
8. Does one camera show a clear, identifiable, full frame image of the face of each person entering and leaving the store? Yes No
9. Are the camera views obstructed by fixtures or displays? Yes No

10. Is the recorded footage stored for at least 30 days? Yes No

11. Do all store employees know how to record footage from the camera system to media capable of being transferred to police custody? Yes No

12. Are customer entrances/exits made of glass or other transparent material?

Yes No

- a. Exception: A store that does not have such doors on August 17, 1994 shall not be required to install such doors until the holder of the store's food dealer license changes.

13. Has the owner and their employees attended the Robbery Prevention Training within 120 days of ownership or employment? Yes No

- a. Contact Community Outreach and Education at 935-7836 for schedule.

Sub 3. Exemptions. The requirements of this section do not apply to a convenience food store that conforms to either of the following descriptions:

a-1. The store is located in an enclosed shopping structure, enclosed commercial building or hospital. A convenience food store is not in an enclosed structure or building if a customer can enter it directly from the outside.

Does store conform to a-1 Yes No

a-2 The store physically separates employees from customers with a solid partition that bars a person from entering the employee area from the customer area, has a secure lock on the employee side of any door between the employee area and the customer, and conducts all transaction through a service window or similar arrangement.

Does store conform to a-2 Yes No

a. At the commissioner's discretion, a convenience store may be exempted from any or all of the regulations specified in sub 2.

Does this location hold an exemption from the commissioner regarding any of the requirements of Sub 2? Yes No

ADDITIONAL COMMENTS/RECOMMENDATIONS:

2719 N Blaine Pl, Milwaukee, WI, 53210, USA

Summary

Name	Count	Area(ft ²)	Length(mi)
Alcohol Licenses	5		

Alcohol Licenses

#	Legal Entity	Trade Name	Licensee	Address	License Type Name	Total Capacity	Expiration Date	Count
1	Muzahem LLC	Hanna Food	Fady Muzahem, Agt	2778 N 59TH ST	Class A Fermented Malt Beverage Retailer's License		10/14/2021, 7:00 PM	1
2	Battlebox Cafe & Lounge LLC	Battlebox Cafe & Lounge	Bryant L Adams, Agt	5419 W Lisbon AV	Class B Tavern License		11/4/2021, 7:00 PM	1
3	Blaine PL Xpress Pantry Inc	Express Pantry	Gurinder S Nagra, Agt	2719 N Blaine PL	Class A Fermented Malt Beverage Retailer's License		5/28/2021, 7:00 PM	1
4	Wally's Pub	Wally's Pub	Dennis J Jahnke, SP	5525 W Lisbon AV	Class B Tavern License	75	6/29/2021, 7:00 PM	1
5	CIMBALNIK'S LIQUOR, INC	STEVE'S LIQUOR	STEVEN M CIMBALNIK, Agt	6213 W APPLETON AV	Class A Malt & Class A Liquor License		12/9/2021, 6:00 PM	1

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



Tuesday, June 08, 2021

Licenses Committee Notice of Hearing

GURINDER NAGRA
6811 N Teutonia Ave
Milwaukee, WI 53209

The Licenses Committee will consider the following license application:

Class A Malt, Food Dealer, Weights & Measures, and Public Entertainment
Premises License Applications Requesting 3 Amusement Machines
HARMANPREET, Kaur, Agent
Express Pantry at 2719 N Blaine Pl

Date: 6/22/2021

Time: 10:10 AM

Location: The hearing before the Licenses Committee will take place virtually on Tuesday, June 22, 2021. 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 will be asked to do so by phone or internet and are asked to contact the staff assistant, Molly Kuether-Steele at (414) 286-2775 or molly.kuether-steele@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

Please note this application may be recommended for denial based on fitness of the location due to concentration of alcohol beverage outlets in the area. If the application is denied for this reason, no other application for an alcohol beverage license for this location shall be recommended for approval by the Licenses Committee within three years of the date of denial unless the applicant has demonstrated a change of circumstances since the prior denial.





Tuesday, June 08, 2021

Licenses Committee Notice of Hearing

Sarbjit Kaur
2719 N Blaine Pl
Milwaukee, WI 53210

The Licenses Committee will consider the following license application:

Class A Malt, Food Dealer, Weights & Measures, and Public Entertainment
Premises License Applications Requesting 3 Amusement Machines
HARMANPREET, Kaur, Agent
Express Pantry at 2719 N Blaine Pl

Date: 6/22/2021

Time: 10:10 AM

Location: The hearing before the Licenses Committee will take place virtually on Tuesday, June 22, 2021. 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 will be asked to do so by phone or internet and are asked to contact the staff assistant, Molly Kuether-Steele at (414) 286-2775 or molly.kuether-steele@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

Please note this application may be recommended for denial based on fitness of the location due to concentration of alcohol beverage outlets in the area. If the application is denied for this reason, no other application for an alcohol beverage license for this location shall be recommended for approval by the Licenses Committee within three years of the date of denial unless the applicant has demonstrated a change of circumstances since the prior denial.





Tuesday, June 08, 2021



Notice of Public Hearing

blank
notice

HARMANPREET, Kaur, Agent
Express Pantry at 2719 N Blaine Pl
Class A Malt, Food Dealer, Weights & Measures, and Public Entertainment Premises License
Applications Requesting 3 Amusement Machines

Tuesday, June 22, 2021 at 10:10 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 virtually on 6/22/2021 at 10:10 AM. 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 will be asked to do so by phone or internet and are asked to contact the staff assistant, Molly Kuether-Steele at (414) 286-2775 or molly.kuether-steele@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 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 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	2676 N 63RD ST, 1	MILWAUKEE, WI 53213-1550
CURRENT OCCUPANT	2676 N 63RD ST, 2	MILWAUKEE, WI 53213-1550
CURRENT OCCUPANT	2676 N 63RD ST, 3	MILWAUKEE, WI 53213-1550
CURRENT OCCUPANT	2676 N 63RD ST, 4	MILWAUKEE, WI 53213-1550
CURRENT OCCUPANT	2681 N 62ND ST, 1	MILWAUKEE, WI 53213-1562
CURRENT OCCUPANT	2681 N 62ND ST, 2	MILWAUKEE, WI 53213-1562
CURRENT OCCUPANT	2681 N 62ND ST, 3	MILWAUKEE, WI 53213-1562
CURRENT OCCUPANT	2681 N 62ND ST, 4	MILWAUKEE, WI 53213-1562
CURRENT OCCUPANT	2704 N 63RD ST	MILWAUKEE, WI 53210-2148
CURRENT OCCUPANT	2710 N 63RD ST	MILWAUKEE, WI 53210-2148
CURRENT OCCUPANT	2715 N 63RD ST	MILWAUKEE, WI 53210-2148
CURRENT OCCUPANT	2716 N 63RD ST	MILWAUKEE, WI 53210-2148
CURRENT OCCUPANT	2721 N 63RD ST	MILWAUKEE, WI 53210-2148
CURRENT OCCUPANT	2722 N 63RD ST	MILWAUKEE, WI 53210-2148
CURRENT OCCUPANT	2727 N 63RD ST	MILWAUKEE, WI 53210-2148
CURRENT OCCUPANT	2728 N 63RD ST	MILWAUKEE, WI 53210-2148
CURRENT OCCUPANT	2731 N 63RD ST	MILWAUKEE, WI 53210-2148
CURRENT OCCUPANT	2732 N 63RD ST	MILWAUKEE, WI 53210-2148
CURRENT OCCUPANT	2735 N 63RD ST	MILWAUKEE, WI 53210-2148
CURRENT OCCUPANT	2739 N 63RD ST	MILWAUKEE, WI 53210-2148
CURRENT OCCUPANT	2740 N 61ST ST, 1	MILWAUKEE, WI 53210-2110
CURRENT OCCUPANT	2740 N 61ST ST, 2	MILWAUKEE, WI 53210-2110
CURRENT OCCUPANT	2740 N 61ST ST, 3	MILWAUKEE, WI 53210-2110
CURRENT OCCUPANT	2740 N 61ST ST, 4	MILWAUKEE, WI 53210-2110
CURRENT OCCUPANT	2741 N 63RD ST	MILWAUKEE, WI 53210-2148
CURRENT OCCUPANT	2743 N 63RD ST	MILWAUKEE, WI 53210-2148
CURRENT OCCUPANT	2747 N 63RD ST	MILWAUKEE, WI 53210-2148
CURRENT OCCUPANT	6100 W LISBON AVE, 1	MILWAUKEE, WI 53210-2123
CURRENT OCCUPANT	6100 W LISBON AVE, 2	MILWAUKEE, WI 53210-2123
CURRENT OCCUPANT	6100 W LISBON AVE, 3	MILWAUKEE, WI 53210-2123
CURRENT OCCUPANT	6100 W LISBON AVE, 4	MILWAUKEE, WI 53210-2123
CURRENT OCCUPANT	6107 W CENTER ST, 1	MILWAUKEE, WI 53210-2156
CURRENT OCCUPANT	6107 W CENTER ST, 2	MILWAUKEE, WI 53210-2156
CURRENT OCCUPANT	6107 W CENTER ST, 3	MILWAUKEE, WI 53210-2156
CURRENT OCCUPANT	6107 W CENTER ST, 4	MILWAUKEE, WI 53210-2156
CURRENT OCCUPANT	6107 W LISBON AVE	MILWAUKEE, WI 53210-2125
CURRENT OCCUPANT	6109 W LISBON AVE	MILWAUKEE, WI 53210-2125
CURRENT OCCUPANT	6110 W LISBON AVE, 1	MILWAUKEE, WI 53210-2126
CURRENT OCCUPANT	6110 W LISBON AVE, 2	MILWAUKEE, WI 53210-2126
CURRENT OCCUPANT	6110 W LISBON AVE, 3	MILWAUKEE, WI 53210-2126
CURRENT OCCUPANT	6110 W LISBON AVE, 4	MILWAUKEE, WI 53210-2126
CURRENT OCCUPANT	6111 W LISBON AVE	MILWAUKEE, WI 53210-2125
CURRENT OCCUPANT	6116 W LISBON AVE, 1	MILWAUKEE, WI 53210-2127
CURRENT OCCUPANT	6116 W LISBON AVE, 2	MILWAUKEE, WI 53210-2127
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CURRENT OCCUPANT	6116 W LISBON AVE, 4	MILWAUKEE, WI 53210-2127

CURRENT OCCUPANT	6117 W LISBON AVE	MILWAUKEE, WI 53210-2125
CURRENT OCCUPANT	6122 W LISBON AVE, 1	MILWAUKEE, WI 53210-2128
CURRENT OCCUPANT	6122 W LISBON AVE, 2	MILWAUKEE, WI 53210-2128
CURRENT OCCUPANT	6122 W LISBON AVE, 3	MILWAUKEE, WI 53210-2128
CURRENT OCCUPANT	6122 W LISBON AVE, 4	MILWAUKEE, WI 53210-2128
CURRENT OCCUPANT	6125 W LISBON AVE	MILWAUKEE, WI 53210-2125
CURRENT OCCUPANT	6126 W LISBON AVE, 1	MILWAUKEE, WI 53210-2129
CURRENT OCCUPANT	6126 W LISBON AVE, 2	MILWAUKEE, WI 53210-2129
CURRENT OCCUPANT	6126 W LISBON AVE, 3	MILWAUKEE, WI 53210-2129
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CURRENT OCCUPANT	6131 W LISBON AVE	MILWAUKEE, WI 53210-2125
CURRENT OCCUPANT	6132 W LISBON AVE, 1	MILWAUKEE, WI 53210-2130
CURRENT OCCUPANT	6132 W LISBON AVE, 2	MILWAUKEE, WI 53210-2130
CURRENT OCCUPANT	6132 W LISBON AVE, 3	MILWAUKEE, WI 53210-2130
CURRENT OCCUPANT	6132 W LISBON AVE, 4	MILWAUKEE, WI 53210-2130
CURRENT OCCUPANT	6135 W LISBON AVE	MILWAUKEE, WI 53210-2125
CURRENT OCCUPANT	6141 W LISBON AVE	MILWAUKEE, WI 53210-2125
CURRENT OCCUPANT	6143 W LISBON AVE	MILWAUKEE, WI 53210-2125
CURRENT OCCUPANT	6205 W LISBON AVE, 1	MILWAUKEE, WI 53210-2134
CURRENT OCCUPANT	6205 W LISBON AVE, 2	MILWAUKEE, WI 53210-2134
CURRENT OCCUPANT	6205 W LISBON AVE, 3	MILWAUKEE, WI 53210-2134
CURRENT OCCUPANT	6205 W LISBON AVE, 4	MILWAUKEE, WI 53210-2134
CURRENT OCCUPANT	6211 W CENTER ST, 1	MILWAUKEE, WI 53210-2160
CURRENT OCCUPANT	6211 W CENTER ST, 2	MILWAUKEE, WI 53210-2160
CURRENT OCCUPANT	6211 W CENTER ST, 3	MILWAUKEE, WI 53210-2160
CURRENT OCCUPANT	6211 W CENTER ST, 4	MILWAUKEE, WI 53210-2160
CURRENT OCCUPANT	6211 W LISBON AVE, 1	MILWAUKEE, WI 53210-2136
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CURRENT OCCUPANT	6211 W LISBON AVE, 4	MILWAUKEE, WI 53210-2136
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Total Records: 76

Radius: 250.0 feet and Center of Circle: 2719 N Blaine Pl



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: license@milwaukee.gov

ccl-busplan 5/12/2020

1. Type of Business	
Applying for:	<input type="checkbox"/> Extended Hours (12AM to 5AM) - If a food establishment, check all that apply: <input type="checkbox"/> Delivery <input type="checkbox"/> Drive Thru <input type="checkbox"/> Dining Room <input type="checkbox"/> Self Service Laundry <input type="checkbox"/> Massage Establishment <input type="checkbox"/> Filling Station <input checked="" type="checkbox"/> Other (supplemental application for specific license also required)
Provide a detailed description of the type of business you plan on operating: <u>CONVENIENCE STORE WITH BEER</u>	
Do you have any experience operating this type of business? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If yes, explain: <u>I HAVE WORKED IN THE PAST</u>	
2. Business Operations	
a.	Proposed Opening Date: <u>06/01/2021</u>
b.	Is this premise under construction? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, list estimated completion date: _____
c.	Is this a franchise? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
d.	Is this premises currently licensed? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If yes, list type of license: <u>FOOD, CLASS A BEER, CIG. OCCUPANCY</u>
e.	Is the current licensee operating? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If no, list date closed: _____
f.	Do you have future plans for other businesses, licenses or permits at this location? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, explain: _____
g.	Have you previously held an Extended Hours License in Milwaukee? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, list address(es): _____
h.	Are other businesses operating in the same building? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, describe: _____
3. Litter & Noise	
a.	How are grounds kept clean? <input checked="" type="checkbox"/> Sweep <input type="checkbox"/> Pressure Wash <input checked="" type="checkbox"/> Pick Up Litter <input type="checkbox"/> Other: _____
b.	How often will grounds be cleaned? <input checked="" type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> As Needed <input type="checkbox"/> Monthly <input type="checkbox"/> Other: _____
c.	Grounds cleaned by: <input checked="" type="checkbox"/> Licensee <input type="checkbox"/> Building Owner <input checked="" type="checkbox"/> Employees <input type="checkbox"/> Hired Maintenance <input type="checkbox"/> Other: _____
d.	How are noise issues prevented and/or addressed? <input type="checkbox"/> Security <input checked="" type="checkbox"/> Manager approaches customer(s) <input type="checkbox"/> Call Police <input checked="" type="checkbox"/> Signs Posted <input type="checkbox"/> Other: _____
e.	Will a sound amplification system be used? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, describe: _____
4. Smoking & Sanitation	
a.	Are there designated outdoor smoking areas? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, describe: _____
b.	Number of Garbage Cans: Inside: <u>2</u> Locations: <u>By CASH REGISTER, RESTROOM</u> Outside: <u>1</u> Locations: <u>BY THE MAIN ENTRANCE</u>
c.	Is a crowd control barrier used? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, describe: _____
d.	How many restrooms are on the premises? <u>1</u>
e.	Name of solid waste contractor: <input type="checkbox"/> Advanced Disposal <input checked="" type="checkbox"/> Waste Management <input type="checkbox"/> Other: _____

5. Security

- a. Are there onsite parking spaces? No Yes If yes, how many? 12 and describe the parking security plan: SECURITY CAMERA SYSTEM MONITOR PARKING LOT 24/7
- b. Is there a loading zone? No Yes If yes, describe the loading area security plan: _____
- c. Will you have security personnel on premise? No Yes If yes, how many? _____ and answer the following:
 What are their responsibilities? _____
 Is security equipment used? No Yes If yes, describe _____
 List their licensing, certification, or training credentials _____
- d. Will there be security cameras? No Yes If yes, how many? 16 and list locations: MONITORS INSIDE AND STORE SURROUNDING
- e. Will searches/identification checks be done upon entry? No Yes If yes, describe _____

6. Percentage of Sales (must total 100%)

Alcohol <u>10</u> %	Food <u>55</u> %	Secondhand Merchandise _____ %	Precious Metals & Gems _____ %
Entertainment <u>5</u> %	Cigarettes <u>30</u> %	Personal Services (such as tattoo, body piercing, salon, tailor, tanning, etc.) _____ %	Other _____ % Describe: _____
Pawnbroker Activity _____ %	Salvaged Materials (such as scrap metal) _____ %		

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: _____ Number of Rooms: _____

Rooming House: Number of Floors: _____ 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 Gas Station Extended Hours Class "B" Tavern Weights & Measures

Secondhand Dealer Precious Metal & Gem Other: FOOD, CLASS A' BEER

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

Capacity N/A (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):
 1st Floor 2nd Floor Basement Storage Patio Beer Garden Sidewalk Café Deck Rooftop
 Other; Describe: _____
- b. Describe Location: Major Thoroughfare Secondary Street Other: _____
- c. Nearest Major Cross Street: BLAINE PL & WEST CENTER STREET
- 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: SARBJIT KAUR Phone Number: 414-3772269
 Building Owner Address: 2219 N BLAINE PL, MIL, WI 53210

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.)			
Monday	7am	9pm	200	ALL	
Tuesday	11	11	200	11	
Wednesday	11	11	200	11	
Thursday	11	11	200	11	
Friday	11	11	200	11	
Saturday	11	11	200	11	

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: ALCOHOL
 Class A: 8:00 am to 9:00 pm Sunday thru Saturday
 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)

Sarbjit Kaur
 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.



**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

Legal Entity Name: <u>BANI FOODS INC.</u>
Premise Address: <u>2719 N. BLAINE PL MILWAUKEE WI 53216</u>
Proximity of Premises to Church, School, Daycare Center or Hospital
Is the building within 300 feet of any church, school, daycare center or hospital? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
"Service Bar Only" Designation
If applying for Class B or C license, are you applying for "Service Bar Only"? <input checked="" type="checkbox"/> No <input type="checkbox"/> 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? <input checked="" type="checkbox"/> No <input type="checkbox"/> 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? <input type="checkbox"/> No <input checked="" type="checkbox"/> 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? <input checked="" type="checkbox"/> No <input type="checkbox"/> 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? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, list name and address: _____
Property Information (New & Transfer Applicants Only)
a) Do you own or lease the building? <input checked="" type="checkbox"/> Own <input type="checkbox"/> Lease
b) Who owns the fixtures (for example, coolers, etc.)? <u>BANI FOODS INC</u>
c) Are you purchasing the stock and/or fixtures? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If yes, amount paid \$ <u>40,000</u>
d) Total amount paid for business <u>\$ 200,000</u>
e) Total amount paid for goodwill of the business <u>\$ 240,000</u>
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.
f) Have you made arrangements with the seller for payment of personal property taxes? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Lease Information (New & Transfer Applicants who are leasing the premises only)
a) Date lease begins _____ Ends _____
b) Monthly rental \$ _____ <u>- N / A -</u>
c) Do you have an option to renew the lease? <input type="checkbox"/> No <input type="checkbox"/> Yes
d) Does your lease allow for assignment to another party without the consent of the owner? <input type="checkbox"/> No <input type="checkbox"/> Yes
e) For what length of time have you been guaranteed occupancy (number of years)? _____

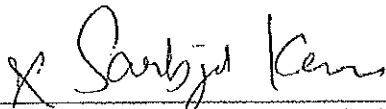
Lease Information (Continued)

- 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 — N/A —
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):

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

cd-foodplan 2/28/19

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

Legal Entity Name:	BANI FOODS, INC
Premises Address:	2719 N BLAINE PL, MILWAUKEE, WI 53210
SECTION 1 TYPE OF BUSINESS	
<p>What will be the majority of your food sales? (check one)</p> <p><input type="checkbox"/> 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.</p> <p><input checked="" type="checkbox"/> 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.</p> <p><input checked="" type="checkbox"/> Will this be a convenience store? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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.</p> <p><input type="checkbox"/> Bed & Breakfast <input type="checkbox"/> Micro Market</p> <p>All Applicants: Submit a menu or a list of food items that will be sold.</p>	
<p>Will any wholesale business be done? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, what percentage of food sales will be wholesale?</p> <p><input type="checkbox"/> Less than 25%</p> <p><input type="checkbox"/> 25% or More AND: <input type="checkbox"/> Restaurant Items (meals) will be sold - Complete this application and also contact DATCP. <input type="checkbox"/> NO restaurant items (meals) will be sold - Do NOT complete this application. Contact DATCP only.</p>	
SECTION 2 FOOD PROCESSING	
<p>Will any food processing be done? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes</p> <p>Processing is defined as assembling, grinding, cutting, mixing, baking, coating, stuffing, packing, bottling, grilling, canning, extracting, fermenting, distilling, pickling, freezing, drying, smoking, or packaging.</p>	
SECTION 3 FOOD REQUIRING TEMPERATURE CONTROL	
<p>Will any food that requires temperature control be sold? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (Includes dairy products such as milk, cheese, and ice cream, fish, shellfish, meat, poultry)</p> <p>If yes, list the types of food items: <u>MILK, CHEESE, ICE CREAM</u></p>	

SECTION 4: DETAILS OF OPERATION	
Will you have seating on site for dining?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Will you be doing any catering?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Will you be doing any delivery?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Will you have outdoor activities?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes - Check all that apply: <input type="checkbox"/> Bar <input type="checkbox"/> Cooking/Grilling <input type="checkbox"/> Dining
Will you have a drive thru window?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes - Are hours different from Inside? <input type="checkbox"/> No <input type="checkbox"/> Yes If Yes, provide drive thru hours: _____
Will scales or barcode scanners be used?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes - You must also apply for a Weights & Measures License.
SECTION 5: ADDITIONAL SITES	
Where will food be prepared and/or sold? <input checked="" type="checkbox"/> At a single site <input type="checkbox"/> 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? <input checked="" type="checkbox"/> No If No, SKIP to Section 8 <input type="checkbox"/> Yes If Yes, check all that apply: <input type="checkbox"/> New construction of a building <input type="checkbox"/> Renovation or remodeling <input type="checkbox"/> Construction changes to existing building <input type="checkbox"/> 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? <input type="checkbox"/> No If No, SKIP to Section 8 <input checked="" type="checkbox"/> Yes If YES, if your food license is approved prior to the alcohol license, when do you want the food license issued? <input type="checkbox"/> Immediately <input checked="" type="checkbox"/> At the same time as the alcohol license	
SECTION 8: ACKNOWLEDGEMENTS & SIGNATURE	
You must initial each item confirming your understanding: <div style="display: flex; align-items: flex-start;"> <div style="margin-right: 10px;"> <p><i>SL</i></p> <p><i>SL</i></p> <p><i>SL</i></p> <p><i>SL</i></p> <p><i>SL</i></p> </div> <div> <p>I understand the Health Department must conduct an inspection and advise the License Division of their approval before the license may be issued.</p> <p>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.</p> <p>I understand the district aide/person 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.</p> <p>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.</p> <p>I will not operate my food business until the license has been issued and posted in the establishment.</p> </div> </div>	
Signature of Sole Proprietor, Partner, or 20% Shareholder: <u>X Santzilk Karina</u>	
Signature of Additional Partner: _____	

101



WEIGHTS & MEASURES PLAN OF OPERATION

ccl-wmplan 1/9/18

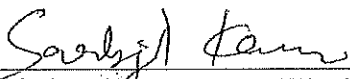
Office of the City Clerk License Division
200 E. Wells St., Room 105, Milwaukee, WI 53202
(414) 286-2238 www.milwaukee.gov/license license@milwaukee.gov

Legal Entity Name: <u>BANI FOODS INC.</u>	
Premise Address: <u>2719 N. BLAINE PL, MILWAUKEE WI 53210</u>	
Type of Business	
Provide a brief description of the establishment/business: <u>CONVENIENCE STORE WITH BEER</u>	
<i>Other licenses may be required depending on the type of business you are operating.</i>	
Litter & Noise	
a. How are grounds kept clean? <input checked="" type="checkbox"/> Sweep <input type="checkbox"/> Pressure Wash <input checked="" type="checkbox"/> Pick Up Litter <input type="checkbox"/> Other: _____ b. How often will grounds be cleaned? <input checked="" type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> As Needed <input type="checkbox"/> Monthly <input type="checkbox"/> Other: _____ c. Grounds cleaned by: <input checked="" type="checkbox"/> Licensee <input type="checkbox"/> Building Owner <input type="checkbox"/> Employees <input type="checkbox"/> Hired Maintenance <input type="checkbox"/> Other: _____ d. How are noise issues prevented and/or addressed? <input type="checkbox"/> Security <input checked="" type="checkbox"/> Manager approaches customer(s) <input type="checkbox"/> Call Police <input checked="" type="checkbox"/> Signs Posted <input type="checkbox"/> Other: _____	
Signature	
<u>X Sarah Jil Kan</u>	_____
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
<i>This form must be submitted with the Business License Application, Weights & Measures License Supplemental Application, and appropriate fee. Forms can be obtained online at www.milwaukee.gov/licenses.</i>	



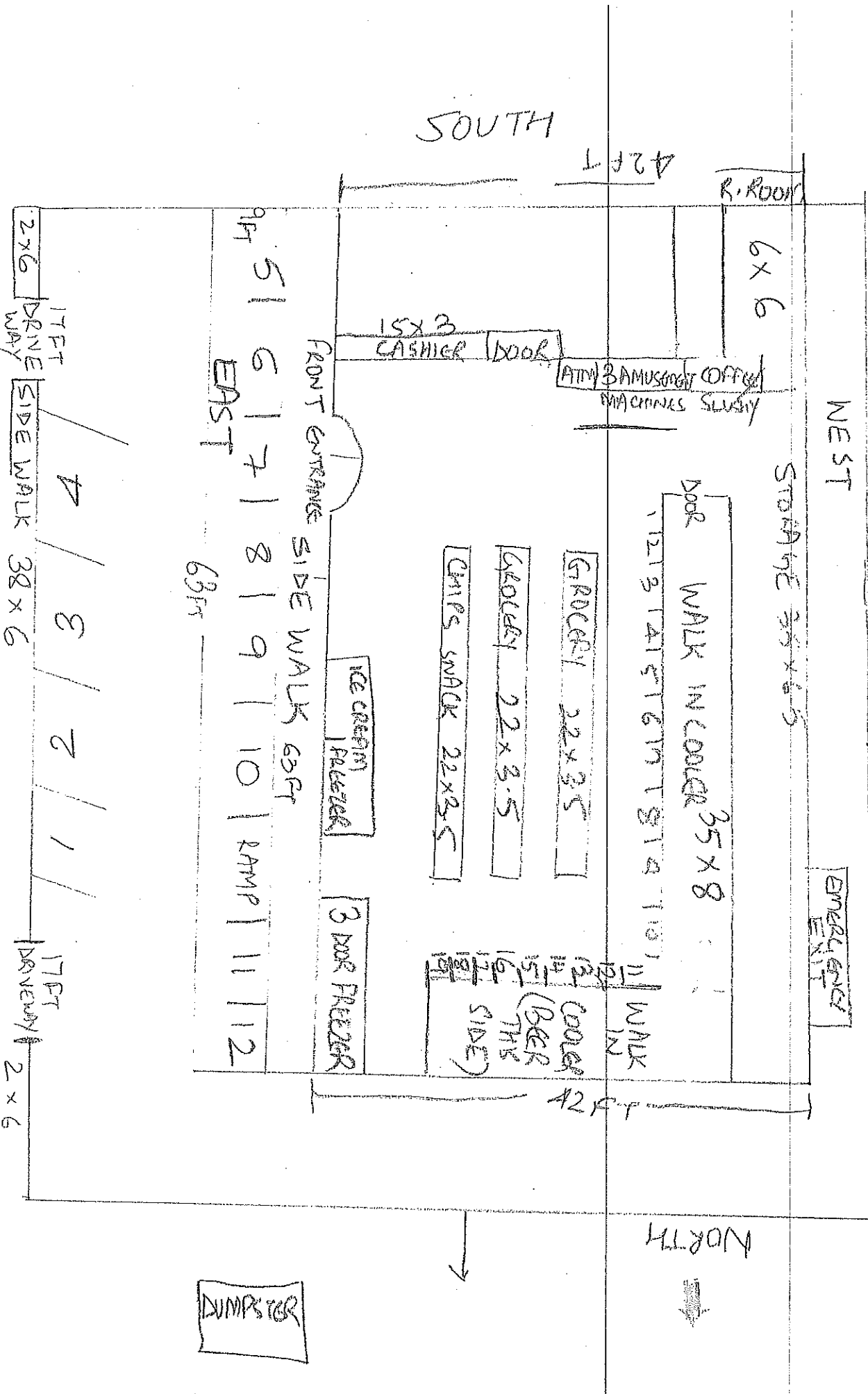
PUBLIC ENTERTAINMENT PREMISES LICENSE SUPPLEMENTAL APPLICATION

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

PREMISES ADDRESS: 2719 N Blaine PL		
TYPES OF ENTERTAINMENT (CHECK ALL THAT APPLY)		
<input type="checkbox"/> Instrumental Musicians <input type="checkbox"/> Bands <input type="checkbox"/> Bowling Alley How many? _____ <input type="checkbox"/> Pool Tables How many? _____ <input type="checkbox"/> Motion Pictures (movies by admission) - How many? _____ <input type="checkbox"/> Other: _____	<input type="checkbox"/> Battle of the Bands <input type="checkbox"/> Comedy Acts <input type="checkbox"/> Disc Jockey <input type="checkbox"/> Magic Shows <input type="checkbox"/> Poetry Readings	<input type="checkbox"/> Dancing by Performers <input type="checkbox"/> Adult Entertainment/ Strippers/Erotic Dance <input type="checkbox"/> Wrestling <input type="checkbox"/> Patron Contests <input type="checkbox"/> Patrons Dancing
<input checked="" type="checkbox"/> Amusement Machines How many? <u>3</u> <input type="checkbox"/> Concerts Approx. # per year? _____ <input type="checkbox"/> Theatrical Performances Approx. # per year? _____ <input type="checkbox"/> Jukebox <input type="checkbox"/> Karaoke		
<i>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.</i>		
PROMOTERS/SOUND AMPLIFICATION		
Will promoters ever be used for any of the entertainment? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If Yes, Describe:		
At any time will sound amplification be used? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If Yes, Describe:		
LEGAL CAPACITY OF PREMISES		
<u>NA</u> (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: EO Filed: 5/17/2021 App: PEP 324130
 Only PEP? No Yes If Yes, Queue to MPD and Email Mgrs/Team Lead (must be heard w/in 60 days)

BANI FOODS INC. DEA EXPRESS PANTRY, 2719 N BLAINE RD, MIL, WI S3210
 HARMAN PLETZ RUCK (AGENT), 414-442-1550



SOUTH

42ft

R. ROOM

6x6

WEST

STORAGE 35x6.5

EMERGENCY EXIT

ATM/BAMUSGROFF OFFICE MACHINES SLUSHY

15x3 CASHIER DOOR

DOOR WALK IN COOLER 35x8

1213 1415 1617 1819 20

GROCERY 22x35

GROCERY 22x3.5

CHIPS SNACK 22x25

ICE CREAM FREEZER

3 DOOR FREEZER

WALK IN

COOLER (3) (BEER THE SIDE)

SIDE WALK 63ft

63ft

FRONT ENTRANCE EAST

5 | 6 | 7 | 8 | 9 | 10 | RAMP | 11 | 12

17ft DRIVE WAY

SIDE WALK 38x6

4

3

2

1

17ft DRIVEWAY

2x6

NORTH

42ft

DUMPSTER