



**CITY OF MILWAUKEE  
OFFICE OF THE CITY CLERK**

Thursday, May 16, 2024

**COMMITTEE MEETING NOTICE**

AD 10

MAYS, Kenneth L, Agent  
Five Corner Fish Market, LLC  
6016 W LISBON 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, May 29, 2024 at 10:40 AM**

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

**Regarding:** Your Class B Tavern and Food Dealer License Application as agent for "Five Corner Fish Market, LLC" for "Five Corner Fish Market" at 6016 W LISBON 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](http://www.milwaukee.gov/license)  
Phone: (414) 286-2238 Fax: (414) 286-3057 Email Address: License@milwaukee.gov



**CITY OF MILWAUKEE  
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AD 10

MAYS, Kenneth L, Agent  
Five Corner Fish Market, LLC  
4174 N 62<sup>nd</sup> ST  
Milwaukee, WI 53216

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**Wednesday, May 29, 2024 at 10:40 AM**

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# MILWAUKEE POLICE DEPARTMENT LICENSING

## CRIMINAL RECORD/ORDINANCE VIOLATION/INCIDENTS SYNOPSIS

**DATE:** 02/05/24

**LICENSE TYPE:** Class B Tavern

**NEW:**

**RENEWAL:**

**No. 361146**

**Application Date:**

**License Location:** 6016 W Lisbon

**Business Name:** Five Corners Fish Market

**Licensee/Applicant:** Mays, Kenneth L  
(Last Name, First Name, MI)

**Date of Birth:** 02/14/83

**Home Address:** 4174 N 62<sup>nd</sup> St

**City:** Milwaukee

**State:** WI **Zip Code:** 53216

**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 09/23/21, the applicant was cited and convicted of Intoxicant in Vehicle-Operator in Milwaukee Municipal Court.
2. On 08/02/22, the applicant was charged with Operate Boat at Excess Speed in Milwaukee County Circuit Court.

**Charge:** Operate Boat in Excess Speed

**Finding:** Guilty

**Sentence:** Fine

**Date:** 09/13/22

**Case:** 2022FO000793

# MILWAUKEE POLICE DEPARTMENT LICENSING

## CRIMINAL RECORD/ORDINANCE VIOLATION/INCIDENTS SYNOPSIS

**DATE:** 02/05/24

**LICENSE TYPE:** FOOD DEALER

**NEW:**

**RENEWAL:**

**No. 361146**

**Application Date:**

**License Location:** 6016 W Lisbon

**Business Name:** Red Snapper

**Licensee/Applicant:** DeVougas, Steven  
(Last Name, First Name, MI)

**Date of Birth:** 03/10/83

**Home Address:** 3004 N 70<sup>th</sup> St

**City:** Milwaukee

**State:** WI **Zip Code:** 53210

**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 09/20/19 at 5:41p.m., Milwaukee Police were dispatched to a Battery at 6016 W. Lisbon. Investigation revealed a customer entered and was causing a disturbance and the employee grabbed them by the arm. Both the employee and customer were issued citations.
2. On 11/26/23 at 10:58a.m., Milwaukee Police were dispatched to an Entry at 6016 W. Lisbon. Investigation revealed the rear door was pried open and suspects gained entry, taking a cash register box, containing cash.

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**PREVIOUS PREMISE**

Date: March 9, 2024  
Officer: Alicia Walker &  
Dominique Thompson

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

Name of Premise: Five Corner Fish Market  
Address: 6016 W Lisbon Av  
Phone: 414-210-4970

Owner: Ahmed Properties LLC  
Owner address: 8101 W 123<sup>rd</sup> St  
City State Zip: Palos Park, IL 64064  
Owner Phone:  
Owner email:

Licensee/Agent: Kenneth Mays  
Home Address: 4174 N 62<sup>nd</sup> St  
City State Zip: Milwaukee, WI 53216  
Phone: 414-699-9991  
Email:

Preferred contact: Kenneth Mays

Location currently open:  YES  NO

Projected open date:

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

Hours of Operation: Sun: 10:30AM TO 11:59PM 24 hours Y N  
Mon: 10:30AM TO 11:59PM  
Tue: 10:30AM TO 11:59PM  
Wed: 10:30AM TO 11:59PM  
Thu: 10:30AM TO 11:59PM  
Fri: 10:30AM TO 11:59PM  
Sat: 10:30AM TO 11:59PM

Premise Type:  Tavern/Bar  
 Restaurant  
 Other:

Licenses currently held:

- Alcohol:  Yes  No Class: B #: BTAVN 361146  
Tobacco:  Yes  No #:  
Food:  Yes  No #: FREST 361147  
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
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
15. Are there exterior security cameras  Yes  No How Many: 8
16. Are the address numbers prominently displayed and easy to see  Yes  No

**Camera Survey:**

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: 30 days
21. Are there exterior cameras  Yes  No How many: 8
22. Are there interior cameras  Yes  No How many: 8

23. Do all employees know how to retrieve recorded digital images/footage?  Yes  No  
24. Cameras located in parking lot  Yes  No How many 8

**Interior Survey:**

25. What is the planned capacity  
26. What is the minimum number of employees That will be on premise 5  
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:  
34. How ill 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

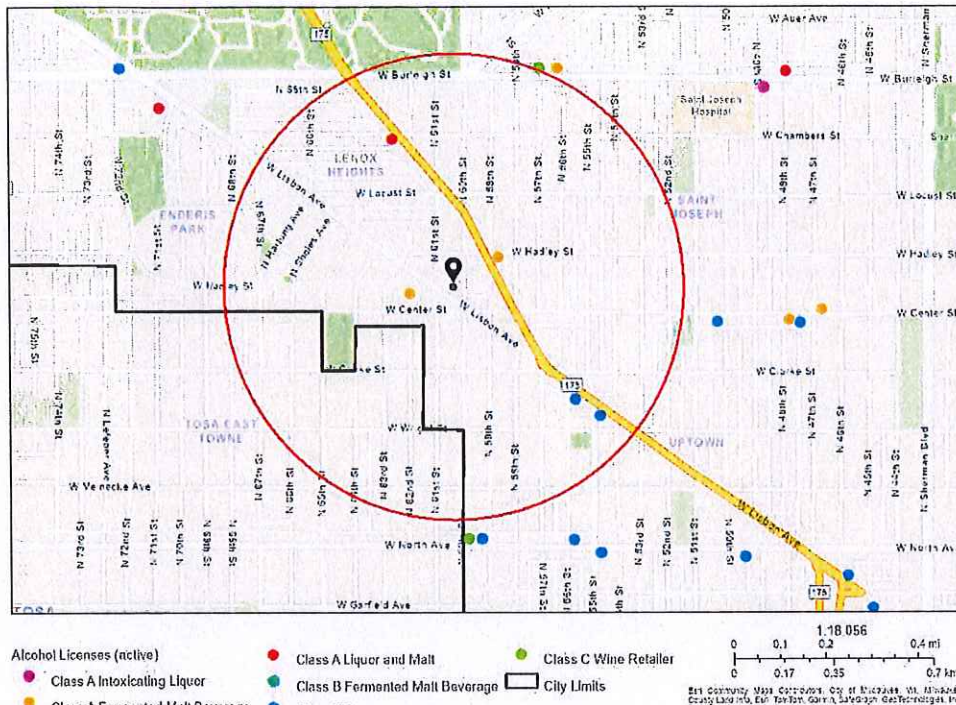
**ADDITIONAL COMMENTS/RECOMMENDATIONS:**

Mr. Mays stated that he will get some no loitering signs, he do have no trespassing signs. Mr. Mays will be the only person who will have access to the cameras. He will not have security personnel.

**Area of Interest (AOI) Information**

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

Feb 1 2024 12:09:44 Central Standard Time





## Summary

Name	Count	Area(ft <sup>2</sup> )	Length(mi)
Alcohol Licenses	5		

## Alcohol Licenses

#	Legal Entity	Trade Name	Licensee	Address	License Type Name	Total Capacity	Expiration Date	Count
1	Wally's Pub	Wally's Pub	Dennis J Jahnke, SP	5525 W Lisbon AV	Class B Tavern License	75	6/29/2024, 7:00 PM	1
2	Bani Foods Inc	Express Pantry	Sarbjit Kaur, Agt	2719 N Blaine PL	Class A Fermented Malt Beverage Retailer's License		7/10/2024, 7:00 PM	1
3	RKS LIQUOR 2 INC.	STEVE'S LIQUOR	Sukhwinder Singh, Agt	6213 W APPLETON AV	Class A Malt & Class A Liquor License		6/19/2024, 7:00 PM	1
4	Muzahem LLC	Hanna Food	Fady Muzahem, Agt	2778 N 59TH ST	Class A Fermented Malt Beverage Retailer's License		10/14/2024, 7:00 PM	1
5	Battlebox Cafe & Lounge LLC	Battlebox Cafe & Lounge	Bryant L Adams, Agt	5419 W Lisbon AV	Class B Tavern License		11/4/2024, 6:00 PM	1

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



Thursday, May 16, 2024



# Notice of Public Hearing

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MAYS, Kenneth L, Agent  
Five Corner Fish Market at 6016 W LISBON Av  
Class B Tavern and Food Dealer License Application

**Wednesday, May 29, 2024 at 10:40 AM**

To whom it may concern:

The above application has been made by the above named applicant(s). This requires approval from the Licenses Committee and the Common Council of the City of Milwaukee. The hearing before the Licenses Committee will take place on 5/29/2024 at 10:40 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	2721 N 59TH ST	MILWAUKEE, WI 53210-1502
CURRENT OCCUPANT	2721A N 59TH ST	MILWAUKEE, WI 53210-1502
CURRENT OCCUPANT	2724 N 60TH ST	MILWAUKEE, WI 53210-2101
CURRENT OCCUPANT	2724A N 60TH ST	MILWAUKEE, WI 53210-2101
CURRENT OCCUPANT	2725 N 59TH ST	MILWAUKEE, WI 53210-1502
CURRENT OCCUPANT	2725A N 59TH ST	MILWAUKEE, WI 53210-1502
CURRENT OCCUPANT	2730 N 60TH ST	MILWAUKEE, WI 53210-2101
CURRENT OCCUPANT	2731 N 59TH ST	MILWAUKEE, WI 53210-1502
CURRENT OCCUPANT	2736 N 60TH ST	MILWAUKEE, WI 53210-2101
CURRENT OCCUPANT	2736A N 60TH ST	MILWAUKEE, WI 53210-2101
CURRENT OCCUPANT	2740 N 60TH ST	MILWAUKEE, WI 53210-2101
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	2742 N 60TH ST	MILWAUKEE, WI 53210-2101
CURRENT OCCUPANT	2743A N 59TH ST	MILWAUKEE, WI 53210-1502
CURRENT OCCUPANT	2747 N 60TH ST	MILWAUKEE, WI 53210-2102
CURRENT OCCUPANT	2748 N 60TH ST	MILWAUKEE, WI 53210-2101
CURRENT OCCUPANT	2748A N 60TH ST	MILWAUKEE, WI 53210-2101
CURRENT OCCUPANT	2749 N 59TH ST	MILWAUKEE, WI 53210-1502
CURRENT OCCUPANT	2750 N 61ST ST	MILWAUKEE, WI 53210-2108
CURRENT OCCUPANT	2752 N 60TH ST	MILWAUKEE, WI 53210-2101
CURRENT OCCUPANT	2753 N 60TH ST	MILWAUKEE, WI 53210-2102
CURRENT OCCUPANT	2755 N 59TH ST	MILWAUKEE, WI 53210-1502
CURRENT OCCUPANT	2758 N 60TH ST	MILWAUKEE, WI 53210-2101
CURRENT OCCUPANT	2759 N 60TH ST	MILWAUKEE, WI 53210-2102
CURRENT OCCUPANT	2760 N 60TH ST	MILWAUKEE, WI 53210-2101
CURRENT OCCUPANT	2760 N 61ST ST	MILWAUKEE, WI 53210-2108
CURRENT OCCUPANT	2764 N 60TH ST	MILWAUKEE, WI 53210-2101
CURRENT OCCUPANT	2766 N 61ST ST	MILWAUKEE, WI 53210-2108
CURRENT OCCUPANT	2766A N 61ST ST	MILWAUKEE, WI 53210-2108
CURRENT OCCUPANT	2767 N 60TH ST	MILWAUKEE, WI 53210-2102
CURRENT OCCUPANT	2770 N 61ST ST	MILWAUKEE, WI 53210-2108
CURRENT OCCUPANT	2773 N 60TH ST	MILWAUKEE, WI 53210-2102
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

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Total Records: 39

Radius 250.0 feet and Center of the Circle: 6016 W Lisbon 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

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
[X] Other (supplemental application for specific license also required)

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

Restaurant

Do you have any experience operating this type of business? [ ] No [X] Yes If yes, explain: manager + operation Reo Snapper

2. Business Operations

- a. Proposed Opening Date: 02/01/2024
b. Is this premise under construction? [X] No [ ] Yes If yes, list estimated completion date:
c. Is this a franchise? [X] No [ ] Yes
d. Is this premises currently licensed? [ ] No [X] Yes If yes, list type of license: Restaurant
e. Is the current licensee operating? [ ] No [X] Yes If no, list date closed:
f. Do you have future plans for other businesses, licenses or permits at this location? [X] 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? [X] No [ ] Yes If yes, describe:

3. Litter & Noise

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

4. Smoking & Sanitation

- a. Are there designated outdoor smoking areas? [X] No [ ] Yes If yes, describe:
b. Number of Garbage Cans: Inside: 5 Locations: Front, 2 prep area 2 cook + Bag Wall
Outside: 3 Locations: 2 each side of entrance 1 Dumpster
c. Is a crowd control barrier used? [X] No [ ] Yes If yes, describe:
d. How many restrooms are on the premises? 1
e. Name of solid waste contractor: [ ] Advanced Disposal [ ] Waste Management [X] Other: Eagle Disposal

## 5. Security

- a. Are there onsite parking spaces?  No  Yes If yes, how many? 44 and describe the parking security plan: 4 cameras & Parking Lot lights
- 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: 2 back doors Both sides of building, entrance, prep, cash register, office, Parking lot
- e. Will searches/identification checks be done upon entry?  No  Yes If yes, describe \_\_\_\_\_

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

Alcohol <u>20</u> %	Food <u>80</u> %	Secondhand Merchandise _____ %	Precious Metals & Gems _____ %
Entertainment _____ %	Cigarettes _____ %	_____ %	_____ %
Pawnbroker Activity _____ %	Salvaged Materials _____ % (such as scrap metal)	Personal Services (such as tattoo, body piercing, salon, tailor, tanning, etc.) _____ %	Other _____ % Describe: _____

## 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: \_\_\_\_\_

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

Capacity \_\_\_\_\_ (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: Lisbon Ave.
- 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: Arnold Properties LLC Phone Number: 708-274-3343  
 Building Owner Address: 8101 W. 123<sup>rd</sup> St Palos Park IL 64064

## 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	1030 am	1159 pm	20	17-75	none
Monday	1030 am	1159 pm	20	17-75	none
Tuesday	1030 am	1159 pm	25	17-77	none
Wednesday	1030 am	1159 pm	25	17-75	none
Thursday	1030 am	1159 pm	40	17-77	none
Friday	1030 am	1159 pm	60	17-77	none
Saturday	1030 am	1159 pm	50	17-77	none

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.



# 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: <u>Five Corner Fish Market LLC</u>
Premise Address: <u>6016 W. Lisbon</u>
<b>Proximity of Premises to Church, School, Daycare Center or Hospital</b>
Is the building within 300 feet of any church, school, daycare center or hospital? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>"Service Bar Only" Designation</b>
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.
<b>Business Information</b>
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: _____
<b>Property Information (New &amp; Transfer Applicants Only)</b>
a) Do you own or lease the building? <input type="checkbox"/> Own <input checked="" type="checkbox"/> Lease
b) Who owns the fixtures (for example, coolers, etc.)? <u>Owner</u>
c) Are you purchasing the stock and/or fixtures? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, amount paid \$ _____
d) Total amount paid for business \$ <u>0</u>
e) Total amount paid for goodwill of the business \$ <u>0</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 checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>Lease Information (New &amp; Transfer Applicants who are leasing the premises only)</b>
a) Date lease begins <u>2/1/24</u> Ends <u>May 2026</u>
b) Monthly rental \$ <u>4,000<sup>00</sup></u>
c) Do you have an option to renew the lease? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
d) Does your lease allow for assignment to another party without the consent of the owner? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
e) For what length of time have you been guaranteed occupancy (number of years)? <u>1 year</u>

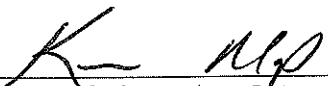
**Lease Information (Continued)**

- 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 occupant 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):  
\_\_\_\_\_

**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: Five Corner Fish Market LLC

Premises Address: 6016 W. Lisbon Ave Milwaukee WI 53216

## 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?  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: Fish / Shellfish / Cheese / meat

**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 7

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: \_\_\_\_\_

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?

No 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:

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

km 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.

km 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.

km 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.

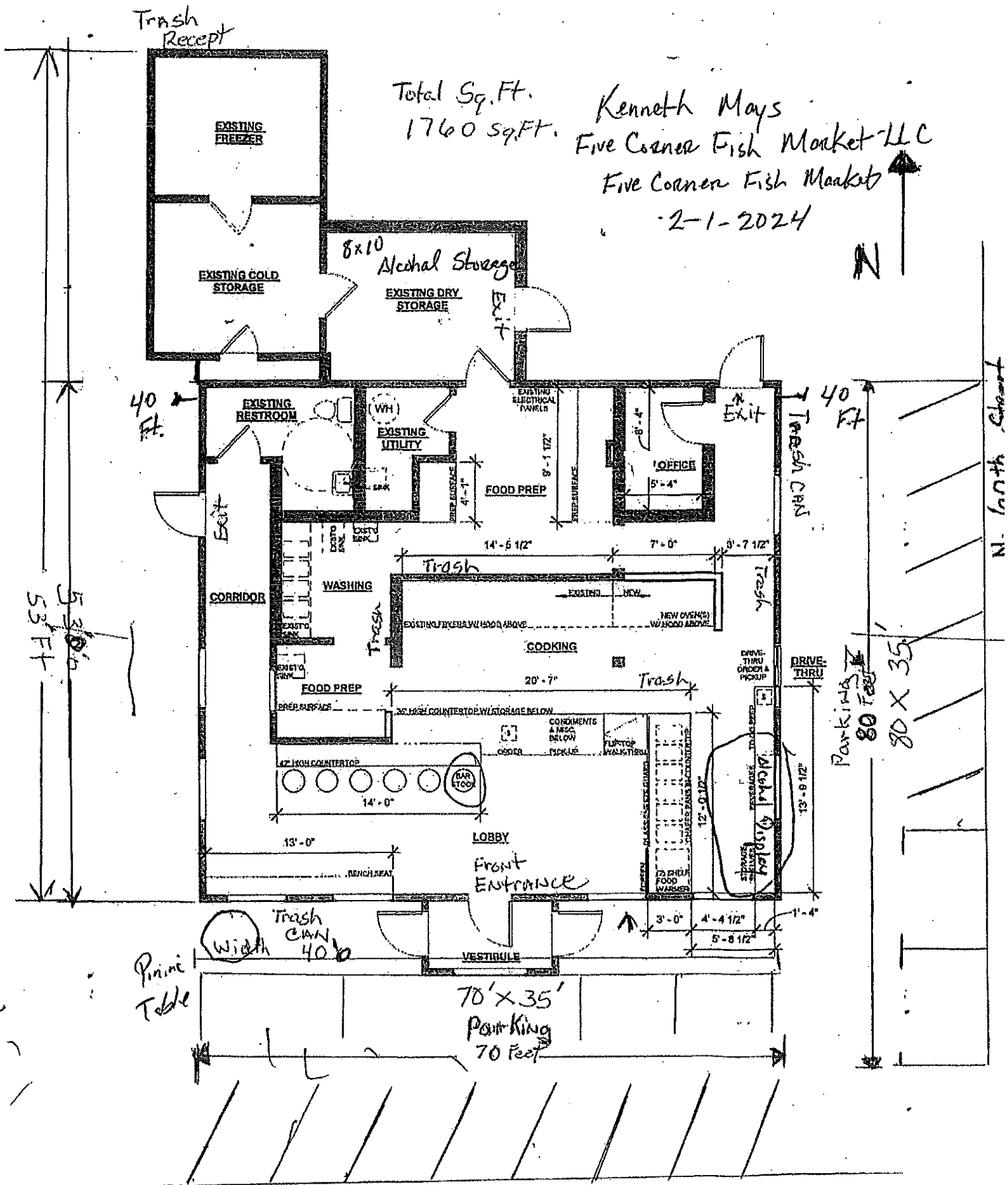
km I will not operate my food business until the license has been issued and posted in the establishment.

Signature of Sole Proprietor, Partner, or 20% Shareholder: km Mof

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

Total Sq. Ft.  
1760 Sq. Ft.

Kenneth Mays  
Five Corner Fish Market-LLC  
Five Corner Fish Market  
-2-1-2024



Five Corner  
Fish Market  
LLC

## STARTERS

BREADED MUSHROOMS	5.99
KID'S CHICKEN TENDER (3PC)	4.99
FRIED OKRA	6.99
CHEESE FRIES	5.99
HUSH PUPPIES (8PC)	5.99

## CHICKEN PARTY WINGS

6 PIECE	12.99
12 PIECE	16.99
30 PIECE	39.99
50 PIECE	59.99

## JUMBO SHRIMP

6 PIECE	15.99	12 PIECE	24.99
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## CHICKEN & FISH

<b>CATFISH FILLET</b>		<b>CATFISH STEAKS</b>	
2PC	15.99	2PC	14.99
4PC	17.99	4PC	16.99
10PC	36.99	10PC	35.99
20PC	69.99	20PC	69.99
50PC	159.99	50PC	169.99
<b>PERCH</b>		<b>COD</b>	
2PC	13.99	2PC	12.99
4PC	15.99	4PC	14.99
10PC	34.99	10PC	29.99
20PC	64.99	20PC	55.99

## COMBOS

ALL COMBOS INCLUDE FRIES, COLESLAW & BREAD

<b>COMBO #1 - FISH &amp; FISH</b>	18.99
PICK 2PC OF ONE & 1PC OF ANOTHER ; CATFISH FILLET, CATFISH STEAK, COD OR PERCH	
<b>COMBO #2 - FISH &amp; SHRIMP</b>	18.99
PICK ONE: 2PC CATFISH FILLETS, 2PC CATFISH STEAKS, 2PC COD OR 2PC PERCH & 5PC LARGE SHRIMP	
<b>COMBO #3 - FISH &amp; CHICKEN</b>	18.99
PICK ONE: 2PC CATFISH FILLETS, 2PC CATFISH STEAKS, 2PC COD OR 2PC PERCH & 3PC PARTY WINGS	
<b>COMBO #4 - JUMBO SHRIMP &amp; CHICKEN</b>	18.99
5PC PARTY WINGS & 4PC JUMBO SHRIMP	
<b>COMBO #5 - CATFISH NUGGET</b>	16.99
10-12PC OF CATFISH CUT IN NUGGET SIZED BITES	

## SANDWICHES

<b>CATFISH PO BOY</b>	14.99
A NEW ORLEANS CLASSIC WITH OUR TASTY CATFISH & FRIES	
<b>SHRIMP PO BOY</b>	14.99
A NEW ORLEANS CLASSIC WITH DELICIOUS SHRIMP & FRIES	
<b>FAT BOY</b>	16.99
WHY CHOOSE BETWEEN SHRIMP OR CATFISH WHEN YOU CAN HAVE BOTH? (FRIES INCLUDED)	
<b>PHILLY CHEESESTEAK SANDWICH</b>	16.99
MILWAUKEE'S BEST (FRIES INCLUDED)	

## FAMILY PLATTERS

<b>JUNIOR PLATTER</b>	59.99
8PC JUMBO PARTY WINGS, 5PC CATFISH FILLET, 3PC PERCH, 10PC SHRIMP, BOX OF FRIES, 1-16OZ COLESLAW & 1 LOAF OF BREAD	

<b>FAMILY PLATTER</b>	79.99
12PC JUMBO PARTY WINGS, 5PC CATFISH FILLET, 5PC PERCH, 14PC SHRIMP, BOX OF FRIES, 1-16OZ OKRA, 1-16OZ COLESLAW & 1 LOAF OF BREAD	

<b>SIDES</b>		<b>BEVERAGES</b>	
COLESLAW	5.99	BOTTLED WATER	1.99
FRENCH FRIES	4.99	SODA	1.49
SPAGHETTI	6.99	LEMONADE	2.79
GUMBO	8.99	SWEET TEA	2.79
CATFISH SALAD	12.99		
SHRIMP & GRITS	15.99		