

OFFICE OF THE CITY CLERK

Wednesday, July 09, 2025

COMMITTEE MEETING NOTICE

AD 13

ZHOU, Yan, Agent H SPA LLC 3935 S HOWELL Av #2 Milwaukee, WI 53207

You are requested to attend a hearing which is to be held in Room 301-B, Third Floor, City Hall or you may attend virtually using the link below.

Tuesday, July 22, 2025 at 09:30 AM

The access code is https://meet.goto.com/827697613. Please see the enclosed best practices document for further instructions.

Regarding: Your Massage Establishment License Application as agent for "H SPA LLC" for "H SPA" at 3935 S HOWELL Av #2.

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



CITY OF MILWAUKEE OFFICE OF THE CITY CLERK

Wednesday, July 09, 2025

COMMITTEE MEETING NOTICE

AD 13

ZHOU, Yan, Agent H SPA LLC 2544 LEACH DR Naperville, IL 60564

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JIM OWCZARSKI, CITY CLERK

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BY:

Jim Cooney License Division Manager

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200 E. Wells Street, Room 105, City Hall, Milwaukee, WI 53202. <u>www.milwaukee.gov/license</u> Phone: (414) 286-2238 Fax: (414) 286-3057 Email Address: License@milwaukee.gov Roman, Carmen

From: Sent: To: Cc: Subject:

Follow Up Flag: Flag Status: Cooney, Jim Monday, June 16, 2025 3:50 PM Roman, Carmen Lopez, Faviola; Milano, Marissa FW: 3935 S Howell Ave, Suite 2

Follow up Flagged

Please add.

From: Spiker, Scott <Scott.Spiker@milwaukee.gov> Sent: Monday, June 16, 2025 3:35 PM



To: itscher, Jarrett <Jarrett.Litscher@milwaukee.gov> Cc: Felix, Carlos <cfelix@milwaukee.gov>; Velasquez, Guadalupe <gvelas@milwaukee.gov>; Cooney, Jim <Jim.Cooney@milwaukee.gov>; Laritson, Peter <plarit@milwaukee.gov>; Lyons, Kimberly <KLYONS@milwaukee.gov> Subject: RE: 3935 S Howell Ave, Suite 2

Jarrett: Can you see whether the LIU (police) or DNS can enforce here? This massage studio appears to be operating without a license.

Also have this email added to the premises for when the actual go to pull a license.

Thanks.

Alderman Scott Spiker

City of Milwaukee District 13, The Garden District Desk: 414.286.8537 Cell: 414.708.1884 Scott.Spiker@milwaukee.gov

From:

Sent: Monday, June 16, 2025 3:30 PM To: Litscher, Jarrett <<u>Jarrett.Litscher@milwaukee.gov</u>>; Spiker, Scott <<u>Scott.Spiker@milwaukee.gov</u>> Subject: Re: 3935 S Howell Ave, Suite 2

Afternoon Scott,

1

141 24

The business at 3935 s Howell sign says open and guys are coming in and out of the place. The sign in the window is an "Open" sign and below it say "Massage". All the blinds at this location are fully closed and no signs.

On Tuesday, June 10, 2025 at 08:51:54 AM CDT, Spiker, Scott <<u>scott.spiker@milwaukee.gov</u>> wrote:

See below. We have received no application. Depending on the operator, these can be very nice or sketchy. We will have to see who applies.

If they try to open without a license, let us know so that we can get MPD involved. (Jarrett: The IU.)

Best, Ald. Spiker REDABY (OR)

Get Outlook for iOS

From: Cooney, Jim <<u>Jim.Cooney@milwaukee.gov</u>> Sent: Tuesday, June 10, 2025 8:36:21 AM To: Spiker, Scott <<u>Scott.Spiker@milwaukee.gov</u>>; Lopez, Faviola <<u>Faviola.Martin@milwaukee.gov</u>>; Milano, Marissa <<u>Idcoord@milwaukee.gov</u>>; Litscher, Jarrett <<u>Jarrett.Litscher@milwaukee.gov</u>> Cc: Hansen, Matthew <<u>mahans@milwaukee.gov</u>> Subject: RE: 3935 S Howell Ave, Suite 2

Good morning,

A massage parlor needs a Massage Establishment License from our office in addition to an Occupancy Permit. An Occupancy Permit is a prerequisite for issuance of the license. At this time, there are no applications on file with us.

Jim Cooney License Division Manager City Clerk-License Division 200 E Wells St #105 414-286-2365 www.milwaukee.gov/license Take our survey!

-----Original Message-----From: Spiker, Scott <<u>Scott.Spiker@milwaukee.gov</u>> Sent: Monday, June 9, 2025 6:14 PM To: Cooney, Jim <<u>Jim.Cooney@milwaukee.gov</u>>; Lopez, Faviola <<u>Faviola.Martin@milwaukee.gov</u>>; Milano, Marissa <<u>Idcoord@milwaukee.gov</u>>; Litscher, Jarrett <<u>Jarrett.Litscher@milwaukee.gov</u>> Cc: Hansen, Matthew <<u>mahans@milwaukee.gov</u>> Subject: 3935 S Howell Ave, Suite 2

I received a report that there is a message parlor coming in at this address, and that they have already received occupancy here.

2

This is supposed to be licensed, no, and shouldn't the occupancy be tied to the granting of the license?

Please clarify. Thank you.

Jarrett: Follow up. -Ald. Spiker

The City of Milwaukee is subject to Wisconsin Statutes related to public records. Unless otherwise exempted from the public records law, senders and receivers of City of Milwaukee e-mail should presume that e-mail is subject to release upon request, and is subject to state records retention requirements.





Office of the City Clerk License Division

Jim Owczarski Cily Clerk jowcza@milwaukee.gov

Jim Cooney License Division Manager jim.cooney@milwaukee.gov

June 17, 2025

Juan Li H Spa LLC 3935 S Howell Ave #2 Milwaukee, WI 53207

Dear Mr. Li:

It has come to our attention that a massage establishment is operating at 3935 S Howell Ave #2. While a Certificate of Occupancy has been issued for the space as a personal service establishment, please be advised that a Massage Establishment License is also required to legally operate this type of business.

Accordingly, the business must cease operations immediately until a license is obtained. You may download the application at <u>www.milwaukee.gov/licensespermits</u>. If you have any questions about the application process, please contact our office at (414) 286-2238 or via email at license@milwaukee.gov.

Operating without a valid license may result in citations or additional enforcement action.

Sincerely,

Jim Cooney License Division Manager

Cc: <u>yli603466@gmail.com</u> Milwaukee Police Department





Wednesday, July 09, 2025



Notice of Public Hearing

Blank Notice

ZHOU, Yan, Agent H SPA at 3935 S HOWELL Av #2 Massage Establishment License Application

Tuesday, July 22, 2025 at 9:30 AM

To whom it may concern:

The above application has been made by the above named applicant(s). This requires approval from the Licenses Committee and the Common Council of the City of Milwaukee. The hearing before the Licenses Committee will take place on 7/22/2025 at 9:30 AM in Room 301-B, Third Floor, City Hall. This is a public hearing. Those wishing to view the proceeding are able to do so via the City Channel – Channel 25 on Spectrum Cable – or on the Internet at http://city.milwaukee.gov/citychannel. Those wishing to provide oral testimony via internet are asked to contact the staff assistant, Yadira Melendez at (414) 286-2775 or stasst5@milwaukee.gov for necessary information. Please make such requests no later than one business day prior to the start of the meeting. You are not required to attend the hearing, but please see the information below if you would like to provide testimony. Once the Licenses Committee makes its recommendation, this recommendation is forwarded to the full Common Council for approval at its next regularly scheduled hearing.

Important details for those wishing to provide information for the Licenses Committee to consider when making its recommendation:

1. The license application is scheduled to be heard at the above time. Due to other hearings running longer than scheduled, you may have to wait some time to provide your testimony.

2. You must appear in person and testify as to matters that you have personally experienced or seen. (You cannot provide testimony for your neighbor, parent or anyone else; this is considered hearsay and cannot be considered by the committee.)

3. No letters or petitions can be accepted by the committee (unless the person who wrote the letter or the persons who signed the petition are present at the committee hearing and willing to testify).

4. Persons opposed to the license application are given the opportunity to testify first; supporters may testify after the opponents have finished.

5. When you are called to testify, you will be sworn in and asked to give your name, and address. (If your first and/or last names are uncommon please spell them.) 6. You may then provide testimony.

a. Include only information relating to the above license application.

b. Include only information you have personally witnessed or seen.

c. Provide concise and relevant information detailing how this business has affected or may affect the peaceful enjoyment of your neighborhood.

d. If by the time you have the opportunity to testify, the information you wish to share has already been provided to the committee, you may state that you agree with the previous testimony. Redundant or repetitive testimony will not assist the committee in making its recommendation.

7. After giving your testimony, the members of the Licenses Committee and the licensee may ask questions regarding the testimony you have given or other factors relating to the license application.

8. Business Competition is not a valid basis for denial or non-renewal of a license.

Please Note: If you have submitted an objection to the above application your objection cannot be considered by the committee unless you personally testify at the hearing.

OCCUPANT	MAIL ADDRESS	CITY STATE ZIP
CURRENT OCCUPANT	107 E VAN BECK AVE	MILWAUKEE, WI 53207-4451
CURRENT OCCUPANT	107A E VAN BECK AVE	MILWAUKEE, WI 53207-4451
CURRENT OCCUPANT	119 E VAN BECK AVE	MILWAUKEE, WI 53207-4451
CURRENT OCCUPANT	119A E VAN BECK AVE	MILWAUKEE, WI 53207-4451
CURRENT OCCUPANT	3906 S 1ST ST	MILWAUKEE, WI 53207-4302
CURRENT OCCUPANT	3911 S 1ST ST	MILWAUKEE, WI 53207-4301
CURRENT OCCUPANT	3911A S 1ST ST	MILWAUKEE, WI 53207-4301
CURRENT OCCUPANT	3914 S 1ST ST	MILWAUKEE, WI 53207-4302
CURRENT OCCUPANT	3914A S 1ST ST	MILWAUKEE, WI 53207-4302
CURRENT OCCUPANT	3915 S 1ST ST	MILWAUKEE, WI 53207-4301
CURRENT OCCUPANT	3915 S HOWELL AVE	MILWAUKEE, WI 53207-4421
CURRENT OCCUPANT	3922 S 1ST ST	MILWAUKEE, WI 53207-4302
CURRENT OCCUPANT	3925 S 1ST ST	MILWAUKEE, WI 53207-4301
CURRENT OCCUPANT	3925A S 1ST ST	MILWAUKEE, WI 53207-4301
CURRENT OCCUPANT	3926 S 1ST ST	MILWAUKEE, WI 53207-4302
CURRENT OCCUPANT	3932 S 1ST ST	MILWAUKEE, WI 53207-4302
CURRENT OCCUPANT	3933 S 1ST ST	MILWAUKEE, WI 53207-4301
CURRENT OCCUPANT	3933A S 1ST ST	MILWAUKEE, WI 53207-4301
CURRENT OCCUPANT	3936 S 1ST ST	MILWAUKEE, WI 53207-4302
CURRENT OCCUPANT	3936A S 1ST ST	MILWAUKEE, WI 53207-4302
CURRENT OCCUPANT	3937 S 1ST ST	MILWAUKEE, WI 53207-4301
CURRENT OCCUPANT	3937A S 1ST ST	MILWAUKEE, WI 53207-4301
	3942 S 1ST ST	MILWAUKEE, WI 53207-4302
CURRENT OCCUPANT	3943 S 1ST ST	MILWAUKEE, WI 53207-4301
CURRENT OCCUPANT	3948 S 1ST ST	MILWAUKEE, WI 53207-4302
CURRENT OCCUPANT	3948A S 1ST ST	MILWAUKEE, WI 53207-4302
CURRENT OCCUPANT	3949 S 1ST ST	MILWAUKEE, WI 53207-4301
CURRENT OCCUPANT	3950A S HOWELL AVE	MILWAUKEE, WI 53207-4467
CURRENT OCCUPANT	3952 S 1ST ST	MILWAUKEE, WI 53207-4302
CURRENT OCCUPANT	3954 S 1ST ST	MILWAUKEE, WI 53207-4302
CURRENT OCCUPANT	3954 S HOWELL AVE# 1	
CURRENT OCCUPANT	3954 S HOWELL AVE# 2	
CURRENT OCCUPANT	3955 S 1ST ST	MILWAUKEE, WI 53207-4301
CURRENT OCCUPANT	3958 S 1ST ST	MILWAUKEE, WI 53207-4302
CURRENT OCCUPANT	3959 S 1ST ST	MILWAUKEE, WI 53207-4301
CURRENT OCCUPANT		MILWAUKEE, WI 53207-4421
CURRENT OCCUPANT		MILWAUKEE, WI 53207-4421
CURRENT OCCUPANT	3965 S 1ST ST	MILWAUKEE, WI 53207-4301
CURRENT OCCUPANT	3966 S 1ST ST	MILWAUKEE, WI 53207-4302
CURRENT OCCUPANT	3969 S 1ST ST	MILWAUKEE, WI 53207-4301
CURRENT OCCUPANT	3969A S 1ST ST	MILWAUKEE, WI 53207-4301
	3972 S 1ST ST	MILWAUKEE, WI 53207-4302
CURRENT OCCUPANT	3978 S 1ST ST	MILWAUKEE, WI 53207-4302
CURRENT OCCUPANT	37703 131 JT	
Blank Notice		8 Î
Total Records: 43	6.1 of 1 2025 C	Harrall Ave #2

Radius 250 feet and Center of the Circle: 3935 S Howell Av #2



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-mailaddress: <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 Drive Thru Dining Room				
Self Service Laundry				
Other (supplemental application for specific license also required)				
Provide a detailed description of the type of business you plan on operating:				
TRADITIONAL BUDY. SCALP + FOOT MASSIAGE SPA				
Do you have any experience operating this type of business? IN NO KYes If yes, explain: EXPERIENCE IN HULT, PLE SPAS				
2. Business Operations				
a. Proposed Opening Date: 1, 2025				
b. Is this premise under construction? 📈 No 🗌 Yes If yes, list estimated completion date:				
c. Is this a franchise? No Yes				
d. Is this premises currently licensed? No XYes If yes, list type of license: MASSAGE LICENSE OCCUPANCY PERMI				
e. Is the current licensee operating? 🗌 No XYes If no, list date closed:				
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? 📈 No 🗌 Yes				
If yes, list address(es):				
h. Are other businesses operating in the same building? No XYes If yes, describe: RESTAURANT				
3. Litter & Noise				
a. How are grounds kept clean? 🕅 Sweep 🗌 Pressure Wash 📈 Pick Up Litter 🗌 Other:				
b. How often will grounds be cleaned? Daily 🛛 Weekly 🗌 As Needed 🗍 Monthly 🗍 Other:				
c. Grounds cleaned by: KLicensee 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: LICENSEE ADDRESSES				
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:				
a. Are there designated outdoor smoking areas? X No Yes If yes, describe: b. Number of Garbage Cans: Inside: 4 Locations: 2 Battheoons, Kitched, Fricket Des K				
Outside: 1 Locations: BACK UF SPA				
c. Is a crowd control barrier used? 🔎 No 🗌 Yes 🛛 If yes, describe:				
d. How many restrooms are on the premises?				
e. Name of solid waste contractor: Advanced Disposal Waste Management Other:				

5. Security										
a. A	a. Are there onsite parking spaces? 🔀 No 🗌 Yes If yes, how many? and describe the parking security									
	plan:									
b. Is	b. Is there a loading zone? 📈 No 🗌 Yes If yes, describe the loading area security plan:									
c. V										
	What are their responsibilities?									
	Describe equipment used									
	List their License Number (s)									
d. \	d. Will there be security cameras? \Box No XYes If yes, how many? Z and list locations: Frost, Back									
e. Will searches/identification checks be done upon entry? 🗖 No 🗌 Yes If yes, describe										
6. Pe	rcentage of Sales	(must total 100%	6)		S de tite					
Alcohol Entertai	Ø	Food Cigarettes, Electronic Vape Devices, Tobacco Products	<u> </u>	Secondhand Merchandi	ise	Precious Metals & Gems				
Pawnbr	oker Activity%	Salvaged Materials (such as scrap metal)	<u>} %</u>	Personal Services (such body piercing, salon, tai tanning, etc.) <u>1</u> 00		Other% Describe:				
7. Bu	7. Businesses/Licenses on the Premises (check all that apply):									
Type 1	Il Service Restaurant	Cafe/Coffee Shop	Deli or F	ast Food Restaurant	Private	e/Fraternal/Veterans Club				
🗌 Nig	ght Club	Tavern	🗌 Cocktail	Cocktail Lounge		Club				
Ba	nquet Hall	Sports Facility	Bowling	Alley		X				
Ho	tel/Motel : Number of Flo	ors:	🗌 Rooming	g House: Number of Flo	oors:	<u>in status se se</u>				
	Number of Roo	oms:		Number of Ro	ooms:					
Type 2	uor Store	Corner Store	Superma	rket	Conver	nience Store				
	s Station	Amusement/Phonograph Distributor				ng, Salvage or Towing				
Us	Used Car Dealer (such as tattoo business, hair salon, tailor, etc.)									
What	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.)										

x

9. Premises D	escription		1							
a. Identify all area	a(s) of the premises that will 2 nd Floor □Basement Stora	be used in operating this bu age □Patio □Beer Garde	siness (include areas useo n □Sidewalk Café □D	d only for storage Deck □Rooftop):					
	Other: Describe:									
b. Describe Locat	ion: Major Thoroughfare	Secondary Street O	ther:							
	· · · · · · · · · · · · · · · · · · ·									
	ng: 🔲 Free Standing Buildir									
	ises Structure: Single Sto									
f. Describe Surro	unding Area: A Commercia r Name: Xhevit t r Address: <u>3985 S</u>	I Residential Industr	rial 🗌 Other:	14) 312-	52.62					
g. Building Owne	r Name: Xhevit t	zeapri	Phone Number:	17 313-						
Building Owne	r Address: <u> </u>	HOWELL, PIILW	ANDEE WIT							
10. Hours of C	peration & Custo	mers								
Will customers be ent	ering the premises? 🔲 No	Yes								
	Proposed Hours of Operation:		Estimated Number of Customers	Potential Age Range	Class B Tavern Applicant Only:					
Day of the Week	Open Time (include a.m. or p.m.)	Close Time (include a.m. or p.m.)	expected each day	of Customers	Age Restriction (If none, write 'None')					
Sunday	Sunday 9:00 pm		6-15	21-70	-					
Monday	9:00 AM	9:00 PM 9:00 PM	6-15	21-70						
Tuesday	9:00 AM	9:00 pm	6-15	21-70						
Wednesday	9:00 AM	9:00 pm	6-15	21-70						
Thursday	9:00 AM	9:00 pm	6-15	21-70						
Friday	9:00 AM	9:00 pm								
Saturday	9:00 AM	9:00 pm	6-15	21-70	-					
An Extended Hours Es	stablishment License is requint tanning, etc.), recording stu	red for any convenience stor	re, filling station, persona oen between the hours of	ll service establis f 12:00 a.m. and !	nment (such as tattoo, body 5:00 a.m.					
Alcohol Establishmen Permitted Hours of O	ts Class A: 8:00	am to 9:00 pm Sunday thru am to 2:00 am Sunday thru	Saturday							
Entertainment Outdo	or Closing Hours: 10:0	Opm Sunday-Thursday; 12:0	Oam Friday & Saturday; u	unless a different	time, either earlier or later					
11. Signature		tablished by the Common C	ouncil in its approval of t	he licensee's plan	of operation.					
II. Signature										
260) }	Yan zhou		-		ж В.					
Signature of Sole Pro (If there are no 2	prietor, Partner, or 20% or m 0% or more shareholders, r-print name/title and sign)	ore Shareholder	Signature of additional	partner or 20% o	r more shareholder					

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

