



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

Tuesday, October 07, 2025

COMMITTEE MEETING NOTICE

AD 07

ASHA, Nader, Agent
MIDNIGHT LLC
10218 W BEACON HILL DR
FRANKLIN, WI 53132

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, October 21, 2025 at 10:30 AM

The access code is <https://meet.goto.com/479852445>. Please see the enclosed best practices document for further instructions.

Regarding: Your Class A Malt & Class A Liquor, Extended Hours Establishments, Food Dealer and Weights & Measures Licenses Application Requesting to Open 24Hr Everyday as agent for "MIDNIGHT LLC" for "MIDNIGHT" at 4800 W FOND DU LAC Av.

There is a possibility that your application may be denied for one or more of the following reasons: The recommendation of the committee regarding the application shall be based on evidence presented at the hearing. Per MCO 85-2.7-4, probative evidence concerning whether or not a new license should be granted may be presented on the following subjects: whether or not the applicant meets the municipal requirements, the appropriateness of the location and premises where the licensed premises is to be located and whether use of the premises for the purposes or activities permitted by the license would tend to facilitate a public or private nuisance or create undesirable neighborhood problems such as disorderly patrons, unreasonably loud noise, litter, and excessive traffic and parking congestion. Probative evidence relating to these matters may be taken from the plan of operation submitted with the license application, if any, but shall not include the content of any music. Evidence regarding the fitness of the location of the premises to be maintained as the principal place of business, including but not limited to whether there is an overconcentration of businesses of the type for which the license is sought; whether the proposal is consistent with any pertinent neighborhood business or development plans, or the location's proximity to areas where children are typically present. The applicant's record in operating similarly licensed premises; and whether or not the applicant has been charged with or convicted of any felony, misdemeanor, municipal offense or other offense, the circumstances of which substantially relate to the activity to be permitted by the license being applied for or any other factor which reasonably relates to the public health, safety or welfare may also be considered. See attached police report or correspondence.

**Notice for applicants with
warrants or unpaid fines:**

Proof of warrant satisfaction or payment of fines must be submitted at the hearing on the above date and time. Failure to comply with this requirement may result in a delay of the granting/denial of your application.

Failure to appear at this meeting may result in the denial of your license. Individual applicants must appear only in person or by an attorney. Corporate or Limited Liability applicants must appear only by the agent designated on the application or by an attorney. Partnership applicants must appear by a partner listed on the application or by an attorney. If you wish to do so and at your own expense, you may be accompanied by an attorney of your choosing to represent you at this hearing.

You will be given an opportunity to speak on behalf of the application and to respond and challenge any charges or reasons given for the denial. No petitions can be accepted by the committee, unless the people who signed the petition are present at the committee hearing and willing to testify. You may present witnesses under oath and you may also confront and cross-examine opposing witnesses under oath. If you have difficulty with the English language, you should bring an interpreter with you, at your expense, so that you can answer questions and participate in your hearing.

You may examine the application file at this office during regular business hours prior to the hearing date. Inquiries regarding this matter may be directed to the person whose signature appears below.

Limited parking for persons attending meetings during normal business hours is available at reduced rates (5 hour limit) at the Milwaukee Center on the southwest corner of Kilbourn Avenue and Water Street. You must present a copy of the meeting notice to the parking cashier.

PLEASE NOTE: Upon reasonable notice, efforts will be made to accommodate the needs of disabled individuals through sign language interpreters or other auxiliary aids. For additional information or to request this service, contact the Council Services Division ADA Coordinator at (414) 286-2998, Fax - (414) 286-3456, TDD - (414) 286-2025.

JIM OWCZARSKI, CITY CLERK

BY: _____

**Jim Cooney
License Division Manager**

If you have questions regarding this notice, please contact the License Division at (414) 286-2238.

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



Office of African American Affairs

Cavaliar Johnson
Mayor

Melissa Buford
Director

October 1, 2025

Milwaukee Common Council Licensing Committee
200 E. Wells Street
Milwaukee, WI 53202

RE: Opposition to Proposed Convenience Store at 4808 West Fond du Lac Avenue

Dear Members of the Licensing Committee,

I am writing on behalf of the Office of African American Affairs to formally express our opposition to the proposed convenience store at 4808 West Fond du Lac Avenue which was formerly a storefront church.

The proposed location is directly adjacent to a city-operated facility that delivers critical community services and programs; particularly those focused on public health, youth engagement, and self-care. The presence of this type of business is counterproductive to our mission and may undermine the environment we strive to maintain for the community members who rely on our services.

The neighborhood is already heavily saturated with convenience and liquor stores, contributing to a pattern of public health concerns. We have observed a persistent issue with litter and debris, particularly tobacco wrappers and liquor bottles around our facility and throughout the area. This is not simply a matter of aesthetics; it reflects a deeper public health challenge that affects the surrounding community. Furthermore, the types of goods typically sold at these establishments often run counter to the services we provide and the outcomes we strive to achieve such as reducing substance abuse, promoting healthy lifestyles, and fostering a safe, supportive community environment.

Given these factors, we strongly urge the Licensing Committee to consider these concerns. Our office remains committed to collaborating with city leadership on sustainable, community-centered development that uplifts and empowers residents, rather than further burdening neighborhoods already facing challenges.

Thank you for your time and attention to this matter.

Sincerely,

Melissa A. Buford

Melissa A. Buford, Director
City of Milwaukee Office of African American Affairs

This material is available in alternative formats for individuals with disabilities upon request. Please contact 414-286-3475, ADACoordinator@milwaukee.gov or TTY: 711.

REDACTED
BY
AC

Petition opposing the licensing of a new 24-hour convenience store, MIDNIGHT, located at 4800 W. Fond Du Lac Ave.

To the Office of the City Clerk-License Division, City Hall, Room 105, 200 East Wells Street, Milwaukee, WI 53202

The undersigned residents and concerned citizens of Grasslyn Manor Neighborhood strongly oppose the proposed licensing of a new 24-hour convenience store, MIDNIGHT, at 4800 W Fond Du Lac Ave.

The establishment of a 24-hour convenience store in this location would negatively impact the community in several ways:

Increased Crime and Public Safety Concerns:

Establishments operating 24 hours a day can become hotspots for crime, with one study suggesting that late-night operations are the leading sites for employee homicides in the US. Opening a 24-hour convenience store could lead to an increase in undesirable activity in the neighborhood, including:

- Higher rates of theft and vandalism.
- Potential for drug and alcohol-related incidents, particularly when alcohol sales are included.
- Increased loitering and disruptive behavior, disturbing the peace and quiet of residents.
- Increased litter thrown in streets and neighborhood yards

Noise and Light Pollution:

A 24-hour operation will generate increased noise and light pollution, especially during late-night and early morning hours. This will disturb residents, negatively affecting their quality of life and potentially impacting sleep patterns and overall well-being.

Traffic and Parking Issues

The establishment of a 24-hour store will likely increase vehicle traffic and potentially exacerbate traffic flow on Fond Du Lac Ave., particularly during peak hours and just prior to the end of liquor sales. This can lead to increased congestion, noise, and safety hazards for pedestrians and drivers alike.

Lack of Necessity

There is no demonstrable need for another convenience store, particularly one operating 24 hours a day, given the potential negative consequences for the community.

The licensing application for the proposed establishment, MIDNIGHT at 4800 W Fond Du Lac Ave. should be denied. Prioritizing the safety, well-being, and peaceful enjoyment of our neighborhood is paramount.

Sincerely,
Concerned Residents of Grasslyn Manor Neighborhood

CITY OF MILWAUKEE
LICENSE DIVISION
2025 AUG -5 AM 9:21

Petition opposing the licensing of a new 24-hour convenience store, MIDNIGHT, located at 4800 W. Fond Du Lac Ave.

Date

Printed Name

Address

REDACTED
BY AC

REDACTED
BY AC

DATE

7/28/25

7/28/28

7/28/24

7/28/2

7-31-2

7312

7-31-2

7-31-25

7/31/25

7/31/2

7/31/2

8-31-12

7/31/25

7/31/2

7/31/25

7/31/2

Crite, Yvette

From: License
Sent: Monday, August 11, 2025 11:24 AM
To: Crite, Yvette
Subject: FW: Objection to the New License Application by Nader Asher, Agt. MIDNIGHT LLC

Follow Up Flag: Follow up
Flag Status: Flagged

Please add objection

Marissa Milano
She/her/hers
License Coordinator
City Clerk-License Division
200 E Wells St #105
www.milwaukee.gov/license



[Take Our Survey!](#)

REDACTED
BY


From:
Sent: Wednesday, July 23, 2025 1:11 PM
To: License <LICENSE@milwaukee.gov>
Subject: Objection to the New License Application by Nader Asher, Agt. MIDNIGHT LLC

As long term residents of this neighborhood, we have great concern for safety of this neighborhood's residents if this extended hours license is granted. Most of the gas stations with convenience stores in the immediate area no longer stay open extended hours due to crime, robbery and violence. This new store is surrounded on three sides by residential homes. worry about gunfire erupting in neighborhood anytime for that matter. We have enough of that already. We don't need to invite another target for violence. Please be sensible and say no to extended hours. Thank you.

MILWAUKEE POLICE DEPARTMENT

LICENSING

CRIMINAL RECORD/ORDINANCE VIOLATION/INCIDENTS SYNOPSIS

DATE: 08/01/25
LICENSE TYPE: AMALT
NEW: ☒
RENEWAL: ☐

No. 383578
Application Date:

License Location: 4800 W Fond du Lac
Business Name: Midnigght

Licensee/Applicant: Asha, Nader
(Last Name, First Name, MI)
Date of Birth: 01/03/82

Home Address: 10218 W Beacon Hill Dr
City: Franklin State: WI Zip Code: 53132
Home Phone:

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

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

1. On 06/06/22, the applicant was charged with Disorderly Conduct by Oak Creek Police. On 09/13/22, he was convicted and fined.



Crime Prevention Through Environmental Design CPTED Survey

Date Received:

Date Returned:

Date Completed: August 8th 2025 10:00 AM

Milwaukee PD CAD Number: P2508080442

Milwaukee PD Case Number: C2508080442

Address/Location: 4808 W. FOND DU LAC AVE

CPTED Auditor: P.O. THEODORE R. CHAVOLIER

Contact Person(s): NAOMI ASHA

Telephone/Cell: (414) 943-5513

Office: N/A

Person Requesting Audit and Why: NAOMI ASHA

History Of Area: CHURCH / MINISTRIES

CPTED - Site Audit

Crime Prevention Through Environmental Design (CPTED) is a proactive crime fighting technique in which the proper design and effective use of the built environment can lead to a reduction in the fear of and incidents of crime and an improvement in quality of life. It is very important to realize CPTED principals reduce the opportunity for crime; however crime prevention / social programs should be implemented to tackle the underlying cause of crime. These steps work in conjunction to create a safe environment to work live or play.

THIS CPTED SURVEY HAS BEEN CONDUCTED AS A PUBLIC SERVICE OF THE MILWAUKEE POLICE DEPARTMENT. THIS SURVEY IS INTENDED TO ASSIST YOU IN IMPROVING THE OVERALL LEVEL OF SECURITY ONLY. **IT IS NOT INTENDED TO IMPLY THE EXISTING SECURITY MEASURES, OR PROPOSED SECURITY MEASURES ARE ABSOLUTE OR PERFECT.**

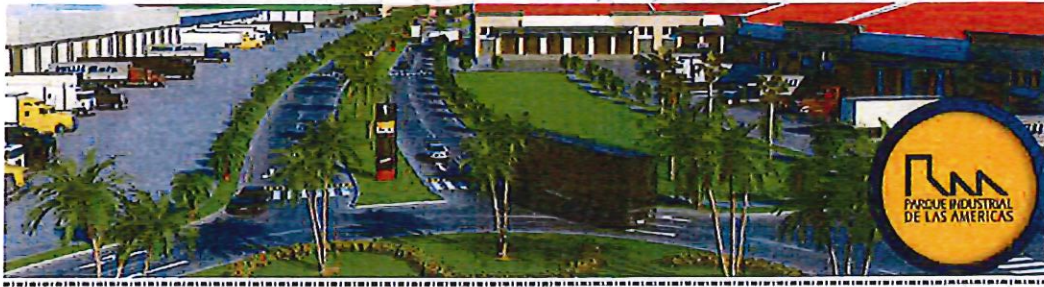
ALL NEW CONSTRUCTION OR RETROFITS SHOULD COMPLY WITH EXISTING BUILDING CODES, ZONING LAWS AND FIRE CODES. PRIOR TO INSTALLATION OR MODIFICATIONS THE PROPER LICENCES AND VARIANCES SHOULD BE OBTAINED AND INSPECTIONS SHOULD BE CONDUCTED BY THE APPROPRIATE AGENCY.

The four key concepts of CPTED are:

1. ***Access Control***
2. ***Surveillance***
3. ***Territorial Reinforcement***
4. ***Lighting***

Access Control:

Properly located entrances, exits, fencing, landscaping and lighting can direct both foot and motor vehicle traffic in ways that discourage crime.



Surveillance:

The three types of surveillance are: **1. Natural, 2. Organized 3. Mechanical**

Generally, criminals do not want to be seen. Placing physical features, activities and people in ways that minimize the ability to see what is going on discourages crime. Landscaping and lighting are two methods used to provide natural surveillance.

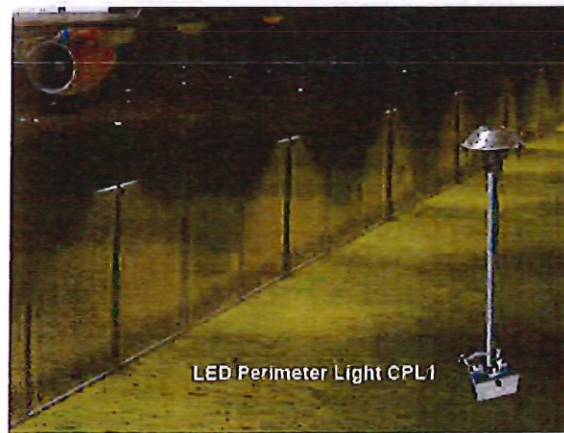


Territorial Reinforcement:



Residential & Commercial Fence Solutions

Lighting:



EXTERIOR

AREA	DESCRIPTION	YES	NO	N/A
HEDGES/BUSHES				
Higher than 4 feet				X
Close to windows				X
Entrapment areas			X	
Near windows or doors				X
TREES				
Blocking view of bldg. from road			X	
Entrapment areas			X	
FENCES				
Higher than 4 feet			X	
Private/semi private			X	
Chain link			X	
Landscaping around fences			X	
Lock on gates				X
LOT LIGHTING				X
Motion detectors	- NONE -		X	
Fluorescent lighting	- NONE -		X	
High pressure sodium	- NONE -		X	
Low pressure sodium	- NONE -		X	
Metal halide	- NONE -		X	
STORAGE SHEDS				
Secure lock on door	- NONE -			X
Visible from business	- NONE -			X
PARKING				
Close to main doors		X		
Lighted parking lot			X	
GARBAGE BINS				
Close to door	- NONE -			X
Causing entrapment zones	- NONE -			X
AIR CONDITIONER				
Window mounted	- NONE -		X	
Roof mounted	- NONE -		X	
VENTILATION GRATES				
Secured or locked	- NONE -		X	
Access gained into bldg. From grate	- NONE -		X	

SECURITY

AREA	LOCATION	YES	NO	N/A
ALARM SYSTEM	Installed		X	
	Monitored with key holders		X	
	Motion detectors		X	
	All doors alarmed		X	
	Stickers on windows and doors		X	

BUILDING - EXTERIOR

AREA	DESCRIPTION	YES	NO	N/A
MAIN DOOR	Solid door		X	
	Glass door with metal frame	X		
	Re-enforced frame for dead bolt		X	
	More than one lock device on door		X	
	Lighted area			X
	Alarm system on door		X	
	Un-obstructed view into business		X	
REAR DOOR	Solid door			
	Glass door with metal frame	X		
	Re-enforced frame for dead bolt		X	
	More than one locking device on door		X	
	Lighted area		X	
	Alarm system on door			X
	Obstructions / entrapment zones near door		X	
				X
OTHER (specify)				
WINDOWS	Lighted areas			
	Steel frames on windows		X	
	Windows open	X		
	-If yes, equipped with locks			X
	Obstructions on ground away from windows	X		
	Alarm system on windows		X	
	Windows located near ground		X	
	-If yes, clear from obstructions			X
	Bars on all windows	X		

SITE SCAN:

Sight Lines/Surveillance (obstructions, design problems):

CLEAR / OPEN FROM ROAD

Entrapment Zones (alley ways, entrance ways):

NONE

Movement Predictors (desired lines, existing pathways, bridges or tunnels):

NONE

Activity Generators (parking lots, corner stores, parks, benches, bus stops):

OPEN PARKING LOT

Community Impact (type of buildings around the site, existing land use):

GENERAL RETAIL SHOPS - TAVERN

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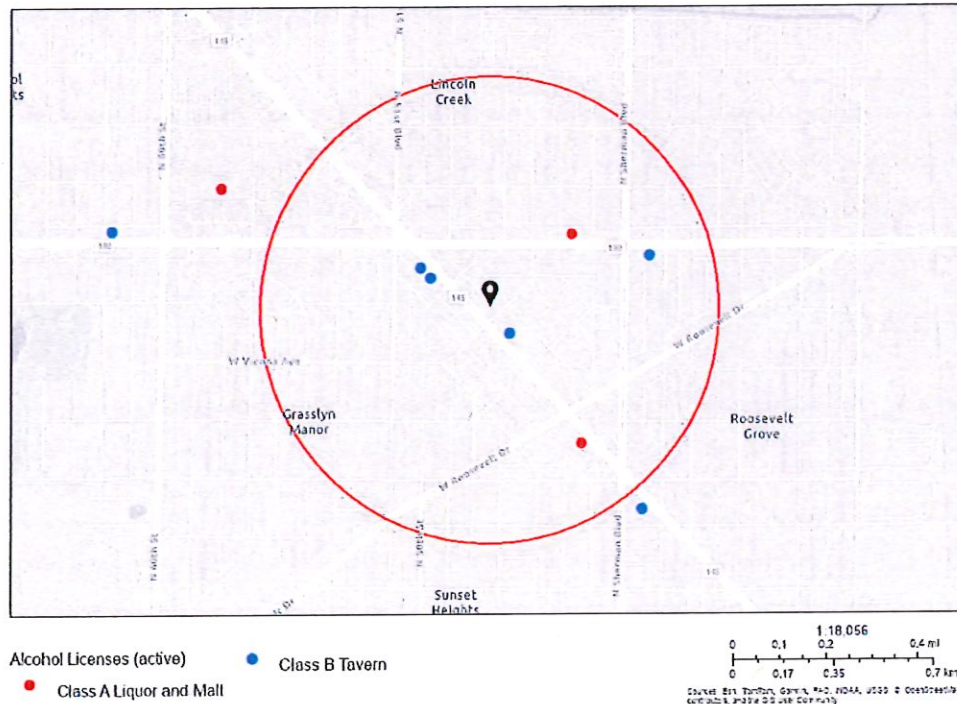
NOTES:

City of Fond Du Lac
Concentration Map for 4800 W Fond Du Lac Ave

Area of Interest (AOI) Information

Area : 21,862,585.81 ft²

Jul 16 2025 13:34:35 Central Daylight Time



Summary

Name	Count	Area(ft²)	Length(mi)
Alcohol Licenses	6		

Alcohol Licenses

#	Legal Entity	Trade Name	Licensee	Address	License Type Name	Total Capacity	Expiration Date	Count
1	Crave BBQ Restaurant LLC	Crave BBQ	Christopher Wade, Agt	4923-25 W FOND DU LAC AV	Class B Tavern License		7/27/2025, 7:00 PM	1
2	Sandhar Liquor INC	North End Beverage	Manjit K Sandhar, Agt	4409 W Fond Du Lac AV	Class A Malt & Class A Liquor License		10/31/2025, 7:00 PM	1
3	DN Group LLC	Best Buy Liquor	RUPINDER K RANDHAWA, Agt	4426 W Capitol DR	Class A Malt & Class A Liquor License		10/23/2025, 7:00 PM	1
4	UPPA YARD LLC	Uppa Yard	Sherine G Edwards, Agt	4943&4947 W FOND DU LAC AV	Class B Tavern License		12/15/2025, 6:00 PM	1
5	Whiskey Still, LLC	BNB Cap Tap	Bill G Farrow, Agt	4221 W Capitol DR	Class B Tavern License	79	3/31/2026, 7:00 PM	1
6	A TASTE OF SOUL MKE LLC	A TASTE OF SOUL MKE	Timothy R Stotts, Agt	4706 W FOND DU LAC AV	Class B Tavern License		3/2/2026, 6:00 PM	1

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



Tuesday, October 07, 2025



Notice of Public Hearing

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ASHA, Nader, Agent
MIDNIGHT at 4800 W FOND DU LAC Av
Class A Malt & Class A Liquor, Extended Hours Establishments, Food Dealer and Weights &
Measures Licenses Application Requesting to Open 24Hr Everyday

Tuesday, October 21, 2025 at 10:30 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 10/21/2025 at 10:30 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	4615 W LEON TER	MILWAUKEE, WI 53216-2432
CURRENT OCCUPANT	4617 W LEON TER	MILWAUKEE, WI 53216-2432
CURRENT OCCUPANT	4619 W LEON TER	MILWAUKEE, WI 53216-2432
CURRENT OCCUPANT	4622 W LEON TER	MILWAUKEE, WI 53216-2433
CURRENT OCCUPANT	4622A W LEON TER	MILWAUKEE, WI 53216-2433
CURRENT OCCUPANT	4625 W LEON TER	MILWAUKEE, WI 53216-2432
CURRENT OCCUPANT	4628 W LEON TER	MILWAUKEE, WI 53216-2433
CURRENT OCCUPANT	4629 W LEON TER	MILWAUKEE, WI 53216-2432
CURRENT OCCUPANT	4634 W LEON TER	MILWAUKEE, WI 53216-2433
CURRENT OCCUPANT	4635 W LEON TER	MILWAUKEE, WI 53216-2432
CURRENT OCCUPANT	4638 W HOYT PL	MILWAUKEE, WI 53216-2327
CURRENT OCCUPANT	4707 W MELVINA ST	MILWAUKEE, WI 53216-2340
CURRENT OCCUPANT	4709 W LEON TER	MILWAUKEE, WI 53216-2332
CURRENT OCCUPANT	4709A W LEON TER	MILWAUKEE, WI 53216-2332
CURRENT OCCUPANT	4712 W LEON TER	MILWAUKEE, WI 53216-2333
CURRENT OCCUPANT	4715 W LEON TER	MILWAUKEE, WI 53216-2332
CURRENT OCCUPANT	4715A W LEON TER	MILWAUKEE, WI 53216-2332
CURRENT OCCUPANT	4719 W FOND DU LAC AVE	MILWAUKEE, WI 53216-2424
CURRENT OCCUPANT	4719 W LEON TER	MILWAUKEE, WI 53216-2332
CURRENT OCCUPANT	4720 W LEON TER	MILWAUKEE, WI 53216-2333
CURRENT OCCUPANT	4725 W FOND DU LAC AVE	MILWAUKEE, WI 53216-2424
CURRENT OCCUPANT	4729 W FOND DU LAC AVE	MILWAUKEE, WI 53216-2424
CURRENT OCCUPANT	4731 W LEON TER	MILWAUKEE, WI 53216-2332
CURRENT OCCUPANT	4732 W FOND DU LAC AVE	MILWAUKEE, WI 53216-2425
CURRENT OCCUPANT	4735 W FOND DU LAC AVE	MILWAUKEE, WI 53216-2424
CURRENT OCCUPANT	4735 W LEON TER	MILWAUKEE, WI 53216-2332
CURRENT OCCUPANT	4741 W LEON TER	MILWAUKEE, WI 53216-2332
CURRENT OCCUPANT	4745 W LEON TER	MILWAUKEE, WI 53216-2332
CURRENT OCCUPANT	4751 W LEON TER	MILWAUKEE, WI 53216-2332
CURRENT OCCUPANT	4751A W LEON TER	MILWAUKEE, WI 53216-2332
CURRENT OCCUPANT	4800 W HOYT PL	MILWAUKEE, WI 53216-2329
CURRENT OCCUPANT	4802 W HOYT PL	MILWAUKEE, WI 53216-2329
CURRENT OCCUPANT	4809 W FOND DU LAC AVE	MILWAUKEE, WI 53216-2322
CURRENT OCCUPANT	4819 W FOND DU LAC AVE	MILWAUKEE, WI 53216-2322
CURRENT OCCUPANT	4825 W FOND DU LAC AVE	MILWAUKEE, WI 53216-2322
CURRENT OCCUPANT	4829 W FOND DU LAC AVE	MILWAUKEE, WI 53216-2322
CURRENT OCCUPANT	4829A W FOND DU LAC AVE	MILWAUKEE, WI 53216-2322
CURRENT OCCUPANT	4833 W FOND DU LAC AVE	MILWAUKEE, WI 53216-2322
CURRENT OCCUPANT	4835 W FOND DU LAC AVE	MILWAUKEE, WI 53216-2322
CURRENT OCCUPANT	4839 W FOND DU LAC AVE	MILWAUKEE, WI 53216-2322
CURRENT OCCUPANT	4841 W FOND DU LAC AVE	MILWAUKEE, WI 53216-2322
CURRENT OCCUPANT	4845 W FOND DU LAC AVE	MILWAUKEE, WI 53216-2322
CURRENT OCCUPANT	4847 W FOND DU LAC AVE	MILWAUKEE, WI 53216-2322

Blank Notice

Total Records: 43

Radius 250 feet and Center of the Circle: 4800 W Fond du Lac 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
☐ Other (supplemental application for specific license also required)

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

Do you have any experience operating this type of business? ☐ No ☒ Yes If yes, explain: Owned Grocery store

2. Business Operations

- a. Proposed Opening Date: 09/01/2025
- b. Is this premise under construction? ☐ No ☒ Yes If yes, list estimated completion date: 08/25/2025
- c. Is this a franchise? ☒ No ☐ Yes
- d. Is this premises currently licensed? ☒ No ☐ Yes If yes, list type of license: _____
- e. Is the current licensee operating? ☐ No ☐ Yes If no, list date closed: N/A
- 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 ☐ Yes If yes, describe: _____

3. Litter & Noise

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

4. Smoking & Sanitation

- a. Are there designated outdoor smoking areas? ☒ No ☐ Yes If yes, describe: _____
- b. Number of Garbage Cans: Inside: 1 Locations: Inside The Kitchen, The cashier
Outside: 1 Locations: By Left Side the Building
- c. Is a crowd control barrier used? ☒ No ☐ Yes If yes, describe: _____
- d. How many restrooms are on the premises? 1
- e. Name of solid waste contractor: ☐ Advanced Disposal ☐ Waste Management ☒ Other: GFL

5. Security

- a. Are there onsite parking spaces? ☐ No ☒ Yes If yes, how many? 30 and describe the parking security plan: Security Cameras
- b. Is there a loading zone? ☒ No ☐ Yes If yes, describe the loading area security plan: _____
- c. Will you have licensed security on premise? ☒ No ☐ Yes If yes, how many? _____ and answer the following:
What are their responsibilities? _____
Describe equipment used _____
List their License Number (s) _____
- d. Will there be security cameras? ☐ No ☒ Yes If yes, how many? 16 and list locations: BY CASHIER,
ALL ENTERANCES INSIDE/ OUTSIDE THE STORE
- e. Will searches/identification checks be done upon entry? ☒ No ☐ Yes If yes, describe _____

6. Percentage of Sales (must total 100%)

Alcohol <u>25</u> %	Food <u>75</u> % Cigarettes, Electronic Vape Devices, 8 % Tobacco Products	Secondhand Merchandise _____ %	Precious Metals & Gems _____ %
Entertainment _____ %			
Pawnbroker Activity _____ %	Salvaged Materials _____ % (such as scrap metal)	Personal Services (such as tattoo, body piercing, salon, tailor, tanning, etc.) _____ %	Other <u>23</u> % Describe: <u>KITCHEN</u>

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, Electronic Vape Products ☐ 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):
☒ 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: FOND DU LAC. W 48TH
- 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: LEGACY REALSTATE LLC Phone Number: 414-9435513
 Building Owner Address: 10218 W BEACON HILL DR, FRANKLIN, WI 53132

10. Hours of Operation & Customers

Will customers be entering the premises? ☐ No ☒ Yes → ALSO HOURS: 8:00 am - 9:00 pm

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	<u>12:00 a.m.</u>	<u>11:59 p.m.</u>	<u>150</u>	<u>20 and up</u>	
Monday	<u>12:00 a.m.</u>	<u>11:59 p.m.</u>	<u>200</u>	<u>20 and up</u>	
Tuesday	<u>12:00 a.m.</u>	<u>12:59 p.m.</u>	<u>150</u>	<u>20 and up</u>	
Wednesday	<u>12:00 a.m.</u>	<u>11:59 p.m.</u>	<u>200</u>	<u>20 and up</u>	
Thursday	<u>12:00 a.m.</u>	<u>11:59 p.m.</u>	<u>150</u>	<u>20 and up</u>	
Friday	<u>12:00 a.m.</u>	<u>12:59 p.m.</u>	<u>200</u>	<u>20 and up</u>	
Saturday	<u>12:00 a.m.</u>	<u>11:59 p.m.</u>	<u>190</u>	<u>20 and up</u>	

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

Legal Entity Name: **MIDNIGHT LLC**

Premise Address: **4800 W FOND DU LAC AVE MILWAUKEE, WI 53216**

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

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

"Service Bar Only" Designation

If applying for Class B or C license, are you applying for "Service Bar Only"? ☒ No ☐ Yes

Service Bar Only means customers cannot sit at the bar. Alcohol is served to employees who serve patrons seated at tables. No stools, chairs or other articles of furniture shall be placed at the service bar for patrons to sit upon.

Business Information

a) Are you taking out this application for anyone that may not be eligible for a license? ☒ No ☐ Yes

If yes, list their name and address: _____

b) Will the agent, a partner or the individual licensee be conducting the day-to-day operations of the business? ☐ No ☒ Yes

If no, list the name and address of the person(s) who will: _____

Class B Applicants: If the agent, a partner or the individual licensee will not be conducting the day-to-day operations of the business, the person(s) listed above must obtain a Class B Managers license.

c) Does anyone else have money invested or any other interest in this business? ☒ No ☐ Yes

If yes, explain: _____

d) Have you made an agreement with anyone to repay any loan or any other payments based upon income from the business?

☒ No ☐ Yes If yes, list name and address: _____

Property Information (New & Transfer Applicants Only)

a) Do you own or lease the building? ☐ Own ☒ Lease

b) Who owns the fixtures (for example, coolers, etc.)? **MIDNIGHT LLC**

c) Are you purchasing the stock and/or fixtures? ☒ No ☐ Yes If yes, amount paid \$ _____

d) Total amount paid for business \$ **70000.00**

e) Total amount paid for goodwill of the business \$ _____

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? ☐ No ☒ Yes

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

a) Date lease begins **06/05/2025** Ends **06/05/2030**

b) Monthly rental \$ **2500**

c) Do you have an option to renew the lease? ☐ No ☒ Yes

d) Does your lease allow for assignment to another party without the consent of the owner? ☒ No ☐ Yes

e) For what length of time have you been guaranteed occupancy (number of years)? **5**

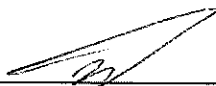
Lease Information (Continued)

- 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 • www.milwaukee.gov/license

Legal Entity Name: **MIDNIGHT LLC**Premises Address: **4800 W FOND DU LAC 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 7,500 square feet of retail space and has, as its primary business, the sale of basic food items and in addition, sells household products or is a filling station that sells basic food items and household products.

☐ Bed & Breakfast☐ Micro Market

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

Will any wholesale business be done? ☒ No ☐ Yes If yes, what percentage of food sales will be wholesale?☐ Less than 25%☐ 25% or More AND:☐ Restaurant items (meals) will be sold – Complete this application and also contact DATCP.☐ NO restaurant items (meals) will be sold - Do NOT complete this application. Contact DATCP only.**SECTION 2 FOOD PROCESSING**Will any food processing be done? ☐ No ☒ Yes

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

SECTION 3 FOOD REQUIRING TEMPERATURE CONTROLWill 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: **MILK, CHESSE ,ICE CREAM, FISH ,MEAT, POULTRY**

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:

FLOORING, PAINTING, SHELVES AND COUNTERS

Start date:

Name, Address & Phone Number of Architect:

Khaddour Home Improvement
719 W. Tripp Ave
Milwaukee, WI 53220

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:

- NA I understand the Health Department must conduct an inspection and advise the License Division of their approval before the license may be issued.
- NA 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.
- NA 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.
- NA 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.
- NA I will not operate my food business until the license has been issued and posted in the establishment.

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

Signature of Additional Partner: _____



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: MIDNIGHT LLC

Premise Address: 4800 W FOND DU LAC AVE MILWAUKEE, WI 53216

Type of Business

Provide a brief description of the establishment/business:

CONVENIENCE STORE

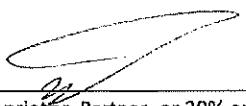
Other licenses may be required depending on the type of business you are operating.

FOOD LICENSE, TOBACCO, ALCOHOL

Litter & Noise

- a. How are grounds kept clean? ☒ Sweep ☐ Pressure Wash ☐ Pick Up Litter ☐ Other: _____
- b. How often will grounds be cleaned? ☒ Daily ☐ Weekly ☐ As Needed ☐ Monthly ☐ Other: _____
- c. Grounds cleaned by: ☐ Licensee ☐ Building Owner ☒ Employees ☐ Hired Maintenance ☐ Other: _____
- d. How are noise issues prevented and/or addressed? ☐ Security ☒ Manager approaches customer(s) ☐ Call Police
☐ Signs Posted ☐ Other: _____

Signature



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

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.



WEIGHTS & MEASURES LICENSE

SUPPLEMENTAL APPLICATION

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

Office Use Only:

App# _____
Filed _____
Initials _____
Paid _____
Lic # _____

Legal Entity Name: MIDNIGHT LLC

Premise Address: 4800 W FOND DU LAC AVE MILWAUKEE, WI 53216

Device Type(s)

- Check all device types for which you need a license.
 - For each device type checked, indicate how many you have in the Number of Devices column (b).
 - Calculate the Total Fee Per Device Type by multiplying the Fee Per Device Type (a) by the Number of Devices (b).
 - Add all Total Fee Per Device Type amounts together and that will be your Total Fee Due.
- * **Exception:** The Scanner fee is not per device. Check the box for the appropriate range.
If you have 1-3 scanners, the total due is \$130. If you have 4 or more scanners, the total due is \$250.
Check the Number of Devices (b).

Device Type	License Period	Fee Per Device Type (a)	Number of Devices (b)	Total Fee Per Device Type (a x b)
Liquid Measuring Devices				
☐ Retail Petroleum Meters	12 months	\$60		
☐ 0 to 30 gallons per minute	24 months	\$60		
☐ 31 to 200 gallons per minute	24 months	\$250		
☐ Over 200 gallons per minute	24 months	\$250		
Scales				
☒ Measuring any weight amount	24 months	\$55	2	
Scanners				
☐ Up to 3 scanners	24 months	\$130 total*	☐ 1 ☐ 2 ☐ 3	
☐ Four or more scanners	24 months	\$250 total*	☐ 4 ☐ Other _____	
Other Devices				
☐ Length Measuring Device	24 months	\$60		
☐ Timing Device	24 months	\$30		

Total Fee Due 770

Signature

I hereby agree that I will comply with the applicable sections of the Wisconsin State Statutes, Administrative Code and the Milwaukee Code of Ordinances regarding the operation of weighing and measuring devices.

I understand that all devices must be operated within the specifications, tolerances and other technical requirements set forth in the National Institute of Standards and Technology Handbook 44. I understand that the license for which I am applying must be posted on the premises or in my vehicle prior to opening for business or operating the device.

I understand that these device licenses are not transferable (with the exception of scanners). If the device is replaced or needs to be resealed, I must apply for and receive a new license so that an inspection of the device can be performed prior to its use.

I acknowledge that as a condition of being issued this license, I must allow the Health Department into the establishment to test the device to validate its specifications/tolerances. If my devices are found out of compliance, I may be charged inspection fees.

I have read, understand, and will adhere to all the above acknowledgments.

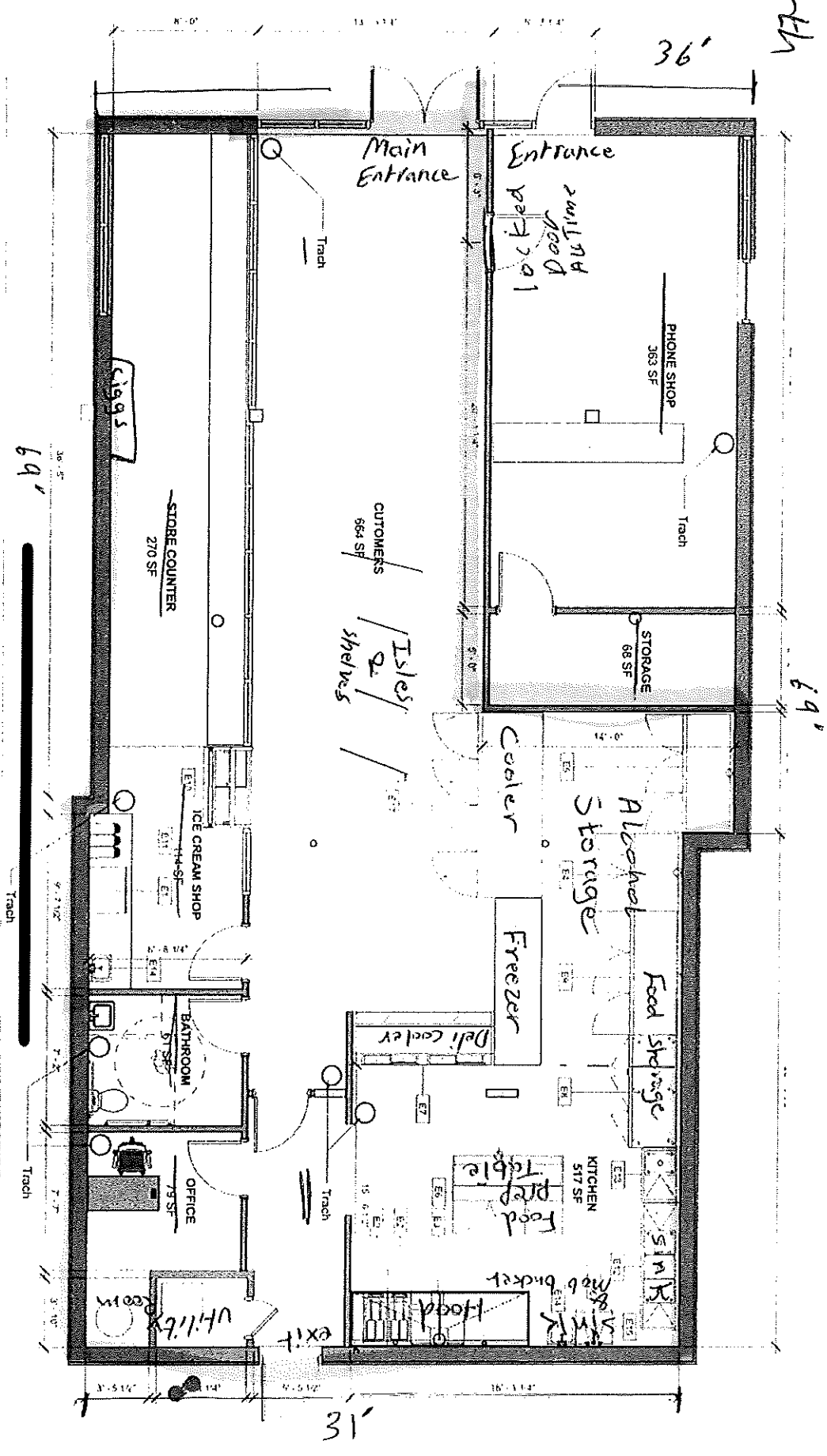
Signature of Sole Proprietor, Partner, or 20% or more Shareholder
(If there are no 20% or more shareholders,
Corporate Officer-print name/title and sign)

Signature of additional partner or 20% or more shareholder

This form must be submitted with the Business License Application, Weights & Measures Plan of Operation, and appropriate fee.
Forms can be obtained online at www.milwaukee.gov/licenses.

name: Midnight - Legal Entity: Midnight LLC Total Square Ft = 2279.32
 4800 W. Fond du Lac Ave
 Agent: Adrian Asha

North ↑



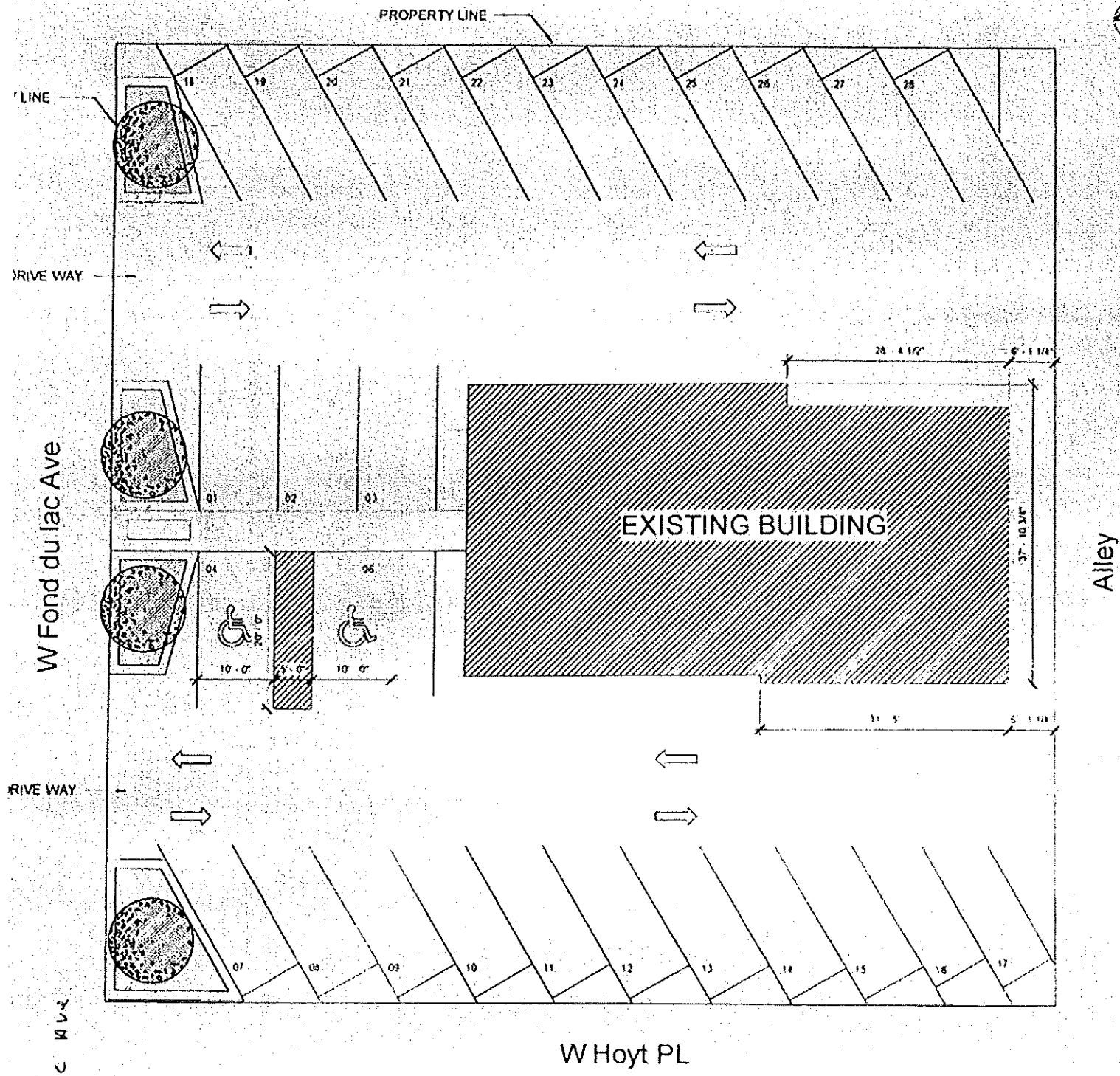
48th St.

07/09/2025

Midnight Star
1800 W Fond du Lac Ave

→ N

07/09/2025



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