



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

Wednesday, July 09, 2025

**COMMITTEE MEETING NOTICE**


AD 10

HAMILTON, Anton L, Agent  
LISBON AVE GROCERY, TOBACCO & ACCESSORIES LLC  
5611 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.

**Tuesday, July 22, 2025 at 09:00 AM**

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

**Regarding:** Your Food Dealer License Application as agent for "LISBON AVE GROCERY, TOBACCO & ACCESSORIES LLC" for "LISBON AVE GROCERY, TOBACCO & ACCESSORIES" at 5611  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.**





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AD 10

HAMILTON, Anton L, Agent  
LISBON AVE GROCERY, TOBACCO & ACCESSORIES LLC  
5625 N 92<sup>ND</sup> ST  
Milwaukee, WI 53225

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**Regarding:** Your Food Dealer License Application as agent for "LISBON AVE GROCERY, TOBACCO & ACCESSORIES LLC" for "LISBON AVE GROCERY, TOBACCO & ACCESSORIES" at 5611 W LISBON Av.

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**JIM OWCZARSKI, CITY CLERK**

BY: \_\_\_\_\_

**Jim Cooney**  
License Division Manager

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



# WISCONSIN DEPARTMENT OF CORRECTIONS

Governor Tony Evers / Secretary

Division of Community Corrections / Region 3 Office

Date: 6/24/25

To: Milwaukee Common Council/Licensing Division

From: Department of Corrections

It was brought to my attention that a client under our supervision, Anton Hamilton, has applied for a Food Dealers Retail license from the City of Milwaukee. Mr. Hamilton is currently on an extended supervision that is scheduled to discharge on 5/16/2026 for the offense of Manufacture/Deliver Heroin (>10-50g), Possess w/Intent-Cocaine (>15-40g) and Possession of Firearm by Felon.

This letter is to inform you that such a licensure would not be in violation of their rules/conditions of supervision. If circumstances change, we will take measures appropriately, including action that may affect such licensure. We made this decision based in part, on the following information:

**A - Residence Stability:** Client has maintained residence stability **Yes**.

**B - Reporting History:** Client has maintained required contacts with agent **Yes**.

**C - Police Contact:** Client has had police contact while on supervision **Yes**.

**D - Overall level of cooperation:** has client complied with referrals and services designed to address criminogenic needs **Yes**.

**\*\*\*\* DCC recommends license not be granted due the following: (check one)**

- \* ☐ License/employment has a direct nexus to committing offense.\_
- \* ☐ License/employment would have a negative impact on the client based on specific treatment needs.  
(HIPPA prohibits the disclosure of specific treatment needs)
- \* ☐ Sex offenses.

**In providing the information within this letter, the Department of Corrections assumes no liability for the Council's reliance on such information.**

Sincerely,

*Nakiya Wright*

P&P Agent

*Carol J. Mabe*

Corrections Field Supervisor



# MILWAUKEE POLICE DEPARTMENT

## LICENSING

### CRIMINAL RECORD/ORDINANCE VIOLATION/INCIDENTS SYNOPSIS

**DATE:** 05/27/25

**LICENSE TYPE:**

**NEW:** ☒

**RENEWAL:** ☐

**No. 381405**

**Application Date:**

**License Location:** 5611 W. Lisbon Ave.

**Business Name:** Lisbon Ave Grocery

**Licensee/Applicant:** Hamilton, Anton L.  
(Last Name, First Name, MI)

**Date of Birth:** 03/24/1977

**Home Address:** 5625 N. 92<sup>nd</sup> Street

**City:** Milwaukee

**State:** WI **Zip Code:** 53225

**Home Phone:**

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

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

1. On 05/15/2021, the applicant was charged in Milwaukee County Court with Possession with Intent to Deliver Controlled substance-THC (<200 Grams-Felony), Possession of a Firearm by Felon (Felony).

Charge 1: Possession with Intent to Deliver Controlled substance-THC  
2: Possession of a Firearm by Felon  
Finding: Guilty  
Sentence: 18 Months State Prison; 18 Extended Supervision  
Date: 03/24/2022  
Case: 2021CF001924

2. On 08/10/202, the applicant was cited at 4453 N. 62<sup>nd</sup> Street for Building Code Violations

Charge: Building Code Violations  
Findings: Guilty  
Sentence: Fine  
Date: 09/29/2022  
Case: 22040418

3. The applicant is currently on probation for item 1. On 06/02/2025, an email was sent to the Department of Correction requesting they provide information to the City License Division regarding probation status with an end date.



Wednesday, July 09, 2025



# Notice of Public Hearing

Blank Notice

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HAMILTON, Anton L, Agent  
LISBON AVE GROCERY, TOBACCO & ACCESSORIES at 5611 W LISBON Av  
Food Dealer License Application

**Tuesday, July 22, 2025 at 9:00 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 9:00 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 | 2516 N 56TH ST  | MILWAUKEE, WI 53210-2232 |
| CURRENT OCCUPANT | 2518 N 56TH ST  | MILWAUKEE, WI 53210-2232 |
| CURRENT OCCUPANT | 2518 N 57TH ST  | MILWAUKEE, WI 53210-2206 |
| CURRENT OCCUPANT | 2521 N 56TH ST  | MILWAUKEE, WI 53210-2233 |
| CURRENT OCCUPANT | 2522 N 56TH ST  | MILWAUKEE, WI 53210-2232 |
| CURRENT OCCUPANT | 2523 N 55TH ST  | MILWAUKEE, WI 53210-2746 |
| CURRENT OCCUPANT | 2524 N 56TH ST  | MILWAUKEE, WI 53210-2232 |
| CURRENT OCCUPANT | 2524 N 57TH ST  | MILWAUKEE, WI 53210-2206 |
| CURRENT OCCUPANT | 2527 N 56TH ST  | MILWAUKEE, WI 53210-2233 |
| CURRENT OCCUPANT | 2528 N 57TH ST  | MILWAUKEE, WI 53210-2206 |
| CURRENT OCCUPANT | 2530 N 56TH ST  | MILWAUKEE, WI 53210-2232 |
| CURRENT OCCUPANT | 2531 N 56TH ST  | MILWAUKEE, WI 53210-2233 |
| CURRENT OCCUPANT | 2531 N 57TH ST  | MILWAUKEE, WI 53210-2207 |
| CURRENT OCCUPANT | 2532 N 56TH ST  | MILWAUKEE, WI 53210-2232 |
| CURRENT OCCUPANT | 2534 N 57TH ST  | MILWAUKEE, WI 53210-2206 |
| CURRENT OCCUPANT | 2535 N 57TH ST  | MILWAUKEE, WI 53210-2207 |
| CURRENT OCCUPANT | 2537 N 56TH ST  | MILWAUKEE, WI 53210-2233 |
| CURRENT OCCUPANT | 2538 N 57TH ST  | MILWAUKEE, WI 53210-2206 |
| CURRENT OCCUPANT | 2540 N 58TH ST  | MILWAUKEE, WI 53210-2212 |
| CURRENT OCCUPANT | 2541 N 56TH ST  | MILWAUKEE, WI 53210-2233 |
| CURRENT OCCUPANT | 2541 N 57TH ST  | MILWAUKEE, WI 53210-2207 |
| CURRENT OCCUPANT | 2542 N 57TH ST  | MILWAUKEE, WI 53210-2206 |
| CURRENT OCCUPANT | 2545 N 57TH ST  | MILWAUKEE, WI 53210-2207 |
| CURRENT OCCUPANT | 2546 N 58TH ST  | MILWAUKEE, WI 53210-2212 |
| CURRENT OCCUPANT | 2547 N 56TH ST  | MILWAUKEE, WI 53210-2233 |
| CURRENT OCCUPANT | 2547A N 56TH ST | MILWAUKEE, WI 53210-2233 |
| CURRENT OCCUPANT | 2548 N 57TH ST  | MILWAUKEE, WI 53210-2206 |
| CURRENT OCCUPANT | 2548A N 57TH ST | MILWAUKEE, WI 53210-2206 |
| CURRENT OCCUPANT | 2550 N 58TH ST  | MILWAUKEE, WI 53210-2212 |
| CURRENT OCCUPANT | 2551 N 57TH ST  | MILWAUKEE, WI 53210-2207 |
| CURRENT OCCUPANT | 2552 N 57TH ST  | MILWAUKEE, WI 53210-2206 |
| CURRENT OCCUPANT | 2552A N 57TH ST | MILWAUKEE, WI 53210-2206 |
| CURRENT OCCUPANT | 2556 N 58TH ST  | MILWAUKEE, WI 53210-2212 |
| CURRENT OCCUPANT | 2557 N 57TH ST  | MILWAUKEE, WI 53210-2207 |
| CURRENT OCCUPANT | 2558 N 57TH ST  | MILWAUKEE, WI 53210-2206 |
| CURRENT OCCUPANT | 2562 N 58TH ST  | MILWAUKEE, WI 53210-2212 |
| CURRENT OCCUPANT | 2563 N 57TH ST  | MILWAUKEE, WI 53210-2207 |
| CURRENT OCCUPANT | 2567 N 57TH ST  | MILWAUKEE, WI 53210-2207 |
| CURRENT OCCUPANT | 2568 N 58TH ST  | MILWAUKEE, WI 53210-2212 |
| CURRENT OCCUPANT | 2568A N 58TH ST | MILWAUKEE, WI 53210-2212 |
| CURRENT OCCUPANT | 2572 N 58TH ST  | MILWAUKEE, WI 53210-2212 |
| CURRENT OCCUPANT | 2573 N 57TH ST  | MILWAUKEE, WI 53210-2207 |
| CURRENT OCCUPANT | 2577 N 57TH ST  | MILWAUKEE, WI 53210-2207 |
| CURRENT OCCUPANT | 2578 N 58TH ST  | MILWAUKEE, WI 53210-2212 |
| CURRENT OCCUPANT | 2600 N 56TH ST  | MILWAUKEE, WI 53210-2235 |
| CURRENT OCCUPANT | 2602 N 56TH ST  | MILWAUKEE, WI 53210-2235 |

|                  |                    |                          |
|------------------|--------------------|--------------------------|
| CURRENT OCCUPANT | 2603 N 55TH ST     | MILWAUKEE, WI 53210-2333 |
| CURRENT OCCUPANT | 2606 N 56TH ST     | MILWAUKEE, WI 53210-2235 |
| CURRENT OCCUPANT | 2607 N 55TH ST     | MILWAUKEE, WI 53210-2333 |
| CURRENT OCCUPANT | 2607A N 55TH ST    | MILWAUKEE, WI 53210-2333 |
| CURRENT OCCUPANT | 2610 N 56TH ST     | MILWAUKEE, WI 53210-2235 |
| CURRENT OCCUPANT | 2612 N 56TH ST     | MILWAUKEE, WI 53210-2235 |
| CURRENT OCCUPANT | 2616 N 56TH ST     | MILWAUKEE, WI 53210-2235 |
| CURRENT OCCUPANT | 2620 N 56TH ST     | MILWAUKEE, WI 53210-2235 |
| CURRENT OCCUPANT | 2623 N 56TH ST     | MILWAUKEE, WI 53210-2236 |
| CURRENT OCCUPANT | 2625 N 56TH ST     | MILWAUKEE, WI 53210-2236 |
| CURRENT OCCUPANT | 5512 W CLARKE ST   | MILWAUKEE, WI 53210-2352 |
| CURRENT OCCUPANT | 5524 W LISBON AVE  | MILWAUKEE, WI 53210-2755 |
| CURRENT OCCUPANT | 5525 W LISBON AVE  | MILWAUKEE, WI 53210-2756 |
| CURRENT OCCUPANT | 5534 W LISBON AVE  | MILWAUKEE, WI 53210-2755 |
| CURRENT OCCUPANT | 5534A W LISBON AVE | MILWAUKEE, WI 53210-2755 |

Blank Notice

Total Records: 61

Radius 250 feet and Center of the Circle: 5611 W Lisbon Av





# APPLICATION AMENDMENT

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

ccl-amend 9/10/18

Date: 6/12/25

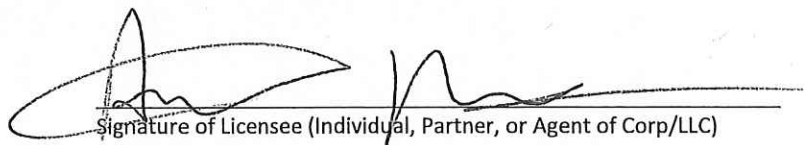
To the License Division of the City of Milwaukee:

I, Anton Hamilton, wish to amend my answer(s) on the application for a  
(full legal name)  
Food Dealers license at 5611 W Lisbon Ave.  
(type of license) (premises address, if applicable)

by adding or amending the following information (complete only those sections being amended):

1. Answer to Question(s) # \_\_\_\_\_ should be: \_\_\_\_\_
2. Agent should be (full legal name): \_\_\_\_\_ Also complete 3, 4, 5 & 6
3. Date of birth should be: \_\_\_\_\_
4. Home address should be (include city/state/zip): \_\_\_\_\_
5. Phone number should be (include area code): \_\_\_\_\_
6. Driver's License Number/State ID Number should be: \_\_\_\_\_
7. Corporation/LLC name should be (full legal name): \_\_\_\_\_
8. Business name should be: \_\_\_\_\_
9. Premises address should be (include city/state/zip): \_\_\_\_\_
10. Business phone number should be (include area code): \_\_\_\_\_
11. Mailing address should be (include city/state/zip): \_\_\_\_\_
12. Email address should be: \_\_\_\_\_
13. Recycling/Salvaging/Towing: Location where vehicle will be parked should be (include city/state/zip): \_\_\_\_\_
14. Class B Tavern: Age Distinction should be: \_\_\_\_\_
15. Other: Change from no processing to processing

(Check with the License Division before submitting "Other" amendments using this form.)

  
Signature of Licensee (Individual, Partner, or Agent of Corp/LLC)

Office Use Only: Application #: 381405 Date: 6.12.25 Initials: TR To LC: \_\_\_\_\_  
LC Email: ☐MPD ☐NS ☐HD Initials: \_\_\_\_\_



## 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) Food

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

Convenient Store

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

### 2. Business Operations

- a. Proposed Opening Date: June 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 ☐ Yes If yes, list type of license: \_\_\_\_\_
- e. Is the current licensee operating? ☒ No ☐ Yes 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 ☒ Yes If yes, describe: Strip mall

### 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: 3 Locations: around the store  
Outside: 1 Locations: back
- 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: \_\_\_\_\_



## 5. Security

- a. Are there onsite parking spaces? ☐ No ☒ Yes If yes, how many? 6 and describe the parking security plan: Chowder
- 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? 8 and list locations: Around store
- e. Will searches/identification checks be done upon entry? ☒ No ☐ Yes If yes, describe \_\_\_\_\_

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

|                            |   |  |                                  |
|----------------------------|---|--|----------------------------------|
| Alcohol _____%             | Food <u>91</u> %<br>Cigarettes, Electronic<br>Vape Devices,<br>Tobacco Products <u>91</u> % | Secondhand Merchandise<br>_____%   | Precious Metals & Gems<br>_____% |
| Entertainment _____%       | Salvaged Materials _____%<br>(such as scrap metal)  | Personal Services (such as tattoo,<br>body piercing, salon, tailor,<br>tanning, etc.) _____% | Other _____%<br>Describe: _____  |
| Pawnbroker Activity _____% |   |  |                                  |

## 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):

☒ 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: Lisbon

c. Nearest Major Cross Street: Lisbon

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: both

g. Building Owner Name: Murterza Sajan Phone Number: 414-232-3333

Building Owner Address: 5611 W Lisbon

## 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          | 7 AM                             | 11:59 PM                          | 400   | 1411                             |  |
| Monday          | 7 AM                             | 11:59 PM                          | 400   | 1                                |  |
| Tuesday         | 7 AM                             | 11:59 PM                          | 400   | 1                                |  |
| Wednesday       | 7 AM                             | 11:59 PM                          | 400   | 1                                |  |
| Thursday        | 7 AM                             | 11:59 PM                          | 400   | 1                                |  |
| Friday          | 7 AM                             | 11:59 PM                          | 400   | 1                                |  |
| Saturday        | 7 AM                             | 11:59 PM                          | 400   | 1                                |  |

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.



MILWAUKEE

**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: LisBon Ave Grocery Tobacco and AccessoriesPremises Address: 5611 W LisBon**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 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:

Pizza, meats, frozen foods

**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 &amp; Phone Number of Architect: \_\_\_\_\_

Name, Address &amp; 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:

- DA I understand the Health Department must conduct an inspection and advise the License Division of their approval before the license may be issued.
- DA 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.
- DA 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.
- DA 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.
- DA 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: \_\_\_\_\_



Lisbon Ave Grocery Tobacco and Accessories LLC  
5611 W Lisbon Ave  
Anten Hampton

2900 SF

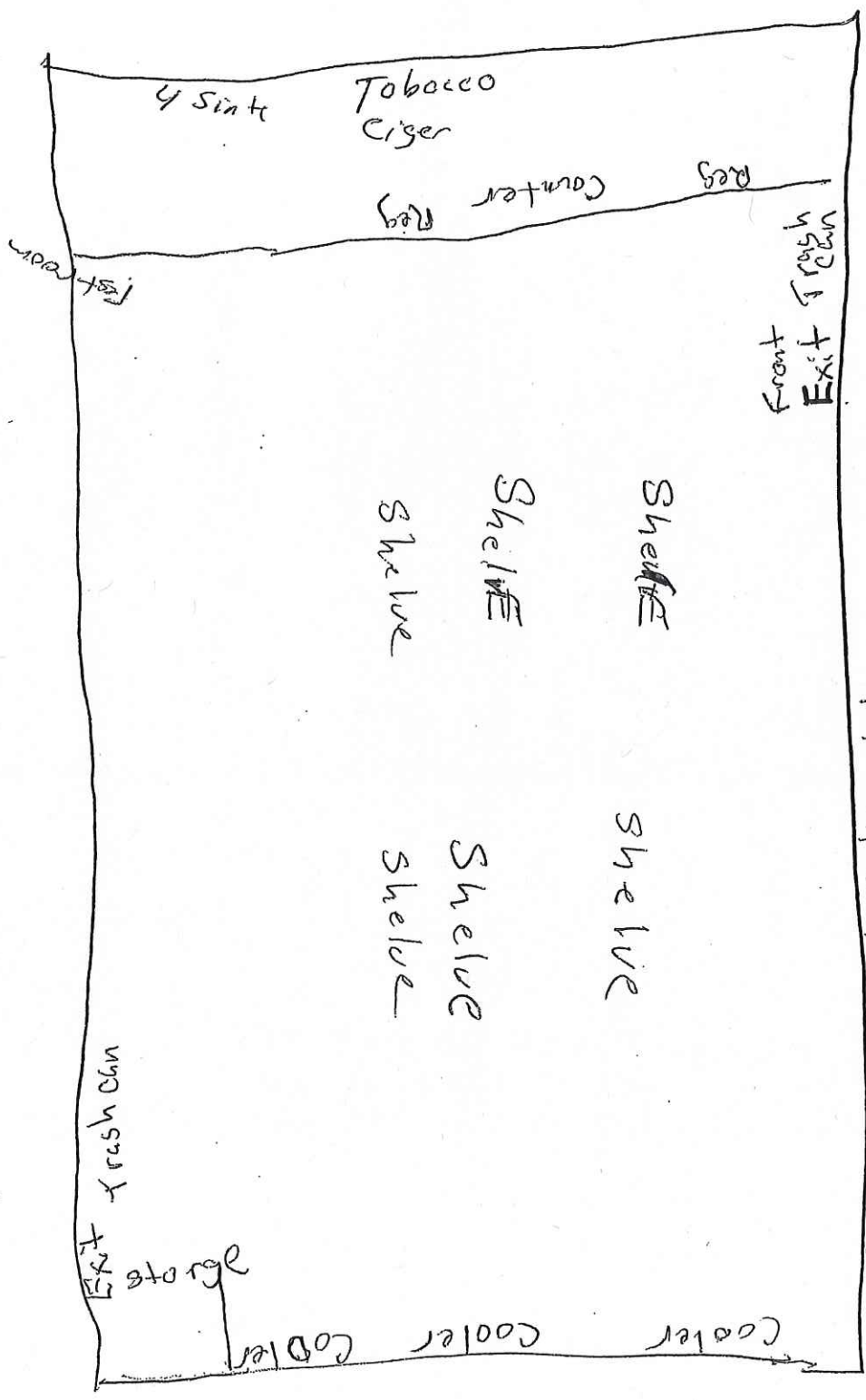
Lisbon Ave



107 boulevard | | | | |

mos 7021

56th Street



Lisbon Grocery 1195  
5611 W Lisbon Ave