



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

Wednesday, September 14, 2022

**COMMITTEE MEETING NOTICE**

AD 10

MC CULLUM, Shayvon, Agent  
PRESSED CAFE, LLC  
3822 N 83RD St  
Milwaukee, WI 53222

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

**Tuesday, September 27, 2022 at 09:10 AM**

**Regarding:** Your Public Entertainment Premises and Food Dealer License Applications Requesting Community Workshops, Painting, Poetry Readings and Comedy Acts as agent for "PRESSED CAFE, LLC" for "PRESSED CAFE" at 235 N 36TH St.

This meeting will be held via GoToMeeting. Please see the enclosed best practices document for further instructions. The access code is <https://meet.gotomeeting.com/953593573>. If you wish to call in, please call [+1 \(872\) 240-3412](tel:+18722403412) and use Access Code: 953-593-573.

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

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

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

Failure to attend this meeting may result in the denial of your license. Individual applicants and partnership applicants must attend or attend by an attorney. The agent or attorney for corporate or limited liability applicants must attend. If you wish to do so and at your own expense, you may be accompanied by an attorney of your choosing to represent you at this hearing.

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

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

JIM OWCZARSKI, CITY CLERK

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

Jim Cooney  
License Division Manager

**If you have questions regarding this meeting, please contact the staff assistant, Yadira Melendez at (414) 286-2775 or [stasst5@milwaukee.gov](mailto:stasst5@milwaukee.gov)**

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



Wednesday, September 14, 2022



# Notice of Public Hearing

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MC CULLUM, Shayvon  
PRESSED CAFE at 235 N 36TH St.  
Public Entertainment Premises and Food Dealer License Applications Requesting Community  
Workshops, Painting, Poetry Readings and Comedy Acts

**Tuesday, September 27, 2022 at 09:10 AM**

To whom it may concern:

The above application has been made by the above named applicant(s). This requires approval from the Licenses Committee and the Common Council of the City of Milwaukee. The hearing before the Licenses Committee will take place virtually on 09/27/2022 at 09:10 AM. This is a public hearing. Those wishing to view the proceeding are able to do so via the City Channel – Channel 25 on Spectrum Cable – or on the Internet at <http://city.milwaukee.gov/citychannel>. Those wishing to provide oral testimony will be asked to do so by phone or internet and are asked to contact the staff assistant, 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 testify as to matters that you have personally experienced or seen. (You cannot provide testimony for your neighbor, parent or anyone else; this is considered hearsay and cannot be considered by the committee.)
3. No letters or petitions can be accepted by the committee (unless the person who wrote the letter or the persons who signed the petition are willing to testify).
4. Persons opposed to the license application are given the opportunity to testify first; supporters may testify after the opponents have finished.
5. When you are called to testify, you will be sworn in and asked to give your name, and address. (If your first and/or last names are uncommon please spell them.)
6. You may then provide testimony.
  - a. Include only information relating to the above license application.
  - b. Include only information you have personally witnessed or seen.
  - c. Provide concise and relevant information detailing how this business has affected or may affect the peaceful enjoyment of your neighborhood.
  - d. If by the time you have the opportunity to testify, the information you wish to share has already been provided to the committee, you may state that you agree with the previous testimony. Redundant or repetitive testimony will not assist the committee in making its recommendation.
7. After giving your testimony, the members of the Licenses Committee and the licensee may ask questions regarding the testimony you have given or other factors relating to the license application.
8. Business Competition is not a valid basis for denial or non-renewal of a license.

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

OCCUPANT	MAIL ADDRESS	CITY STATE ZIP
CURRENT OCCUPANT	201 N 36TH ST	MILWAUKEE, WI 53208-4110
CURRENT OCCUPANT	206 N 36TH ST	MILWAUKEE, WI 53208-4109
CURRENT OCCUPANT	206 N 37TH ST	MILWAUKEE, WI 53208-3701
CURRENT OCCUPANT	207 N 36TH ST	MILWAUKEE, WI 53208-4110
CURRENT OCCUPANT	207A N 36TH ST	MILWAUKEE, WI 53208-4110
CURRENT OCCUPANT	208 N 37TH ST	MILWAUKEE, WI 53208-3701
CURRENT OCCUPANT	210 N 36TH ST	MILWAUKEE, WI 53208-4109
CURRENT OCCUPANT	210 N 37TH ST	MILWAUKEE, WI 53208-3701
CURRENT OCCUPANT	211 N 36TH ST	MILWAUKEE, WI 53208-4110
CURRENT OCCUPANT	211 N 37TH ST	MILWAUKEE, WI 53208-3702
CURRENT OCCUPANT	214 N 36TH ST	MILWAUKEE, WI 53208-4109
CURRENT OCCUPANT	214 N 37TH ST	MILWAUKEE, WI 53208-3701
CURRENT OCCUPANT	215 N 36TH ST	MILWAUKEE, WI 53208-4110
CURRENT OCCUPANT	215 N 37TH ST	MILWAUKEE, WI 53208-3702
CURRENT OCCUPANT	217 N 37TH ST	MILWAUKEE, WI 53208-3702
CURRENT OCCUPANT	218 N 36TH ST	MILWAUKEE, WI 53208-4109
CURRENT OCCUPANT	218 N 37TH ST	MILWAUKEE, WI 53208-3701
CURRENT OCCUPANT	219 N 36TH ST	MILWAUKEE, WI 53208-4110
CURRENT OCCUPANT	219 N 37TH ST	MILWAUKEE, WI 53208-3702
CURRENT OCCUPANT	220 N 37TH ST	MILWAUKEE, WI 53208-3701
CURRENT OCCUPANT	221 N 37TH ST	MILWAUKEE, WI 53208-3702
CURRENT OCCUPANT	222 N 36TH ST	MILWAUKEE, WI 53208-4109
CURRENT OCCUPANT	222A N 36TH ST	MILWAUKEE, WI 53208-4109
CURRENT OCCUPANT	223 N 36TH ST	MILWAUKEE, WI 53208-4110
CURRENT OCCUPANT	223 N 37TH ST	MILWAUKEE, WI 53208-3702
CURRENT OCCUPANT	223A N 36TH ST	MILWAUKEE, WI 53208-4110
CURRENT OCCUPANT	224 N 37TH ST	MILWAUKEE, WI 53208-3701
CURRENT OCCUPANT	225 N 36TH ST	MILWAUKEE, WI 53208-4110
CURRENT OCCUPANT	226 N 36TH ST	MILWAUKEE, WI 53208-4109
CURRENT OCCUPANT	226 N 37TH ST	MILWAUKEE, WI 53208-3701
CURRENT OCCUPANT	226A N 36TH ST	MILWAUKEE, WI 53208-4109
CURRENT OCCUPANT	227 N 36TH ST	MILWAUKEE, WI 53208-4110
CURRENT OCCUPANT	227 N 37TH ST	MILWAUKEE, WI 53208-3702
CURRENT OCCUPANT	229 N 36TH ST	MILWAUKEE, WI 53208-4110
CURRENT OCCUPANT	229 N 37TH ST	MILWAUKEE, WI 53208-3702
CURRENT OCCUPANT	230 N 37TH ST	MILWAUKEE, WI 53208-3701
CURRENT OCCUPANT	231 N 36TH ST	MILWAUKEE, WI 53208-4110
CURRENT OCCUPANT	232 N 37TH ST	MILWAUKEE, WI 53208-3701
CURRENT OCCUPANT	234 N 37TH ST	MILWAUKEE, WI 53208-3701
CURRENT OCCUPANT	234A N 37TH ST	MILWAUKEE, WI 53208-3701
CURRENT OCCUPANT	235 N 37TH ST, 1	MILWAUKEE, WI 53208-3702
CURRENT OCCUPANT	235 N 37TH ST, 2	MILWAUKEE, WI 53208-3702
CURRENT OCCUPANT	235 N 37TH ST, 3	MILWAUKEE, WI 53208-3702
CURRENT OCCUPANT	237 N 36TH ST, 1	MILWAUKEE, WI 53208-4138
CURRENT OCCUPANT	237 N 36TH ST, 2	MILWAUKEE, WI 53208-4138
CURRENT OCCUPANT	237 N 36TH ST, 3	MILWAUKEE, WI 53208-4138

CURRENT OCCUPANT	237 N 36TH ST, 4	MILWAUKEE, WI 53208-4138
CURRENT OCCUPANT	238 N 36TH ST	MILWAUKEE, WI 53208-4109
CURRENT OCCUPANT	239 N 37TH ST	MILWAUKEE, WI 53208-3702
CURRENT OCCUPANT	303 N 35TH ST	MILWAUKEE, WI 53208-4108
CURRENT OCCUPANT	303 N 36TH ST	MILWAUKEE, WI 53208-4112
CURRENT OCCUPANT	308 N 37TH ST	MILWAUKEE, WI 53208-3703
CURRENT OCCUPANT	309 N 36TH ST	MILWAUKEE, WI 53208-4112
CURRENT OCCUPANT	309 N 37TH ST	MILWAUKEE, WI 53208-3704
CURRENT OCCUPANT	313 N 36TH ST	MILWAUKEE, WI 53208-4112
CURRENT OCCUPANT	316 N 36TH ST	MILWAUKEE, WI 53208-4111
CURRENT OCCUPANT	316 N 37TH ST	MILWAUKEE, WI 53208-3703
CURRENT OCCUPANT	317 N 36TH ST	MILWAUKEE, WI 53208-4112
CURRENT OCCUPANT	320 N 36TH ST	MILWAUKEE, WI 53208-4111
CURRENT OCCUPANT	321 N 36TH ST	MILWAUKEE, WI 53208-4112
CURRENT OCCUPANT	3506 W MT VERNON AVE	MILWAUKEE, WI 53208-4117
CURRENT OCCUPANT	3511 W MT VERNON AVE	MILWAUKEE, WI 53208-4118
CURRENT OCCUPANT	3516 W PARK HILL AVE	MILWAUKEE, WI 53208-4120
CURRENT OCCUPANT	3518 W PARK HILL AVE	MILWAUKEE, WI 53208-4120
CURRENT OCCUPANT	3519 W MT VERNON AVE	MILWAUKEE, WI 53208-4118
CURRENT OCCUPANT	3520 W MT VERNON AVE	MILWAUKEE, WI 53208-4117
CURRENT OCCUPANT	3520 W PARK HILL AVE	MILWAUKEE, WI 53208-4120
CURRENT OCCUPANT	3522 W MT VERNON AVE	MILWAUKEE, WI 53208-4117
CURRENT OCCUPANT	3529 W MT VERNON AVE	MILWAUKEE, WI 53208-4118
CURRENT OCCUPANT	3530 W PARK HILL AVE	MILWAUKEE, WI 53208-4120
CURRENT OCCUPANT	3532 W MT VERNON AVE	MILWAUKEE, WI 53208-4117
CURRENT OCCUPANT	3607 W MT VERNON AVE	MILWAUKEE, WI 53208-3718
CURRENT OCCUPANT	3612 W MT VERNON AVE	MILWAUKEE, WI 53208-3717
CURRENT OCCUPANT	3618 W MT VERNON AVE	MILWAUKEE, WI 53208-3717
CURRENT OCCUPANT	3623 W MT VERNON AVE	MILWAUKEE, WI 53208-3718
CURRENT OCCUPANT	3630 W PARK HILL AVE	MILWAUKEE, WI 53208-3723
CURRENT OCCUPANT	3702 W MT VERNON AVE	MILWAUKEE, WI 53208-3719
CURRENT OCCUPANT	3706 W MT VERNON AVE	MILWAUKEE, WI 53208-3719

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Total Records: 78

Radius 250.0 feet and Center of Circle: 235 N 36th St

# Pressed Cafe, LLC

## Menu

- Coffee
- Ice Cream
- Sandwiches
- Salads - pre packaged
- Water
- Juices
- Soups - pre packaged



# 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](mailto: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:

Coffee Shop

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

## 2. Business Operations

- a. Proposed Opening Date: Aug 6<sup>th</sup> 2022
- b. Is this premise under construction?  No  Yes If yes, list estimated completion date: July 30<sup>th</sup>
- 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: \_\_\_\_\_

## 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: 6 Locations: counter, 2 restrooms, hallway storage  
Outside: 1 Locations: Dumpster (back of building)
- c. Is a crowd control barrier used?  No  Yes If yes, describe: \_\_\_\_\_
- d. How many restrooms are on the premises? 2
- 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? \_\_\_\_\_ and describe the parking security plan: \_\_\_\_\_
- b. Is there a loading zone?  No  Yes If yes, describe the loading area security plan: \_\_\_\_\_
- c. Will you have security personnel on premise?  No  Yes If yes, how many? \_\_\_\_\_ and answer the following:  
 What are their responsibilities? \_\_\_\_\_  
 Is security equipment used?  No  Yes If yes, describe \_\_\_\_\_  
 List their licensing, certification, or training credentials \_\_\_\_\_
- d. Will there be security cameras?  No  Yes If yes, how many? 2 and list locations: front door  
main area
- e. Will searches/identification checks be done upon entry?  No  Yes If yes, describe \_\_\_\_\_

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

Alcohol <u>0</u> %	Food <u>50</u> %	Secondhand Merchandise <u>0</u> %	Precious Metals & Gems <u>0</u> %
Entertainment <u>50</u> %	Cigarettes <u>0</u> %	Personal Services (such as tattoo, body piercing, salon, tailor, tanning, etc.) <u>0</u> %	Other _____ % Describe: _____
Pawnbroker Activity <u>0</u> %	Salvaged Materials <u>0</u> % (such as scrap metal)		

### 7. Businesses/Licenses on the Premises (check all that apply):

#### Type 1

- Full Service Restaurant  Cafe/Coffee Shop  Deli or Fast Food Restaurant  Private/Fraternal/Veterans Club
- Night Club  Tavern  Cocktail Lounge  Teen Club
- Banquet Hall  Sports Facility  Bowling Alley
- Hotel/Motel : Number of Floors: \_\_\_\_\_ Number of Rooms: \_\_\_\_\_  
 Rooming House: Number of Floors: \_\_\_\_\_ Number of Rooms: \_\_\_\_\_

#### Type 2

- Liquor Store  Corner Store  Supermarket  Convenience Store
- Gas Station  Amusement/Phonograph Distributor  Recycling, Salvage or Towing
- Used Car Dealer  Personal Service Establishment (such as tattoo business, hair salon, tailor, etc.)  Recording Studio

What other licenses/permits will you hold at this location? (check all that apply)

- Occupancy Permit  Cigarette & Tobacco  Gas Station  Extended Hours  Class "B" Tavern  Weights & Measures
- Secondhand Dealer  Precious Metal & Gem  Other: \_\_\_\_\_

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

Capacity \_\_\_\_\_ (Call the Milwaukee Development Center at 414-286-8211 if you have questions.)

## 9. Premises Description

a. Identify all area(s) of the premises that will be used in operating this business (include areas used only for storage):

1<sup>st</sup> Floor  2<sup>nd</sup> Floor  Basement Storage  Patio  Beer Garden  Sidewalk Café  Deck  Rooftop

Other: Describe: \_\_\_\_\_

b. Describe Location:  Major Thoroughfare  Secondary Street  Other: \_\_\_\_\_

c. Nearest Major Cross Street: 36<sup>th</sup> / Mt. Vernon

d. Describe Building:  Free Standing Building  Strip Mall  Other: \_\_\_\_\_

e. Describe Premises Structure:  Single Story  Multi-Story - # of Stories 2  Other: \_\_\_\_\_

f. Describe Surrounding Area:  Commercial  Residential  Industrial  Other: \_\_\_\_\_

g. Building Owner Name: Bullpen MWS Phone Number: 414-745-8543

Building Owner Address: 4100 W. River Ln, Milw WI 53209

## 10. Hours of Operation & Customers

Will customers be entering the premises?  No  Yes

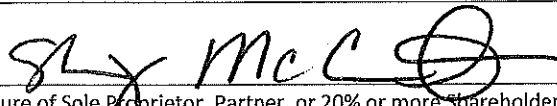
Day of the Week	Proposed Hours of Operation:		Estimated Number of Customers expected each day	Potential Age Range of Customers	Class B Tavern Applicant Only: Age Restriction (If none, write 'None')
	Open Time (include a.m. or p.m.)	Close Time (include a.m. or p.m.)			
Sunday	6:00am	9:00pm	50	1 yrs - 99 yrs ↓	
Monday	6:00am	9:00pm	50		
Tuesday	6:00am	9:00pm	50		
Wednesday	6:00am	9:00pm	50		
Thursday	6:00am	9:00pm	50		
Friday	6:00am	9:00pm	50		
Saturday	6:00am	9:00pm	50		

An Extended Hours Establishment License is required for any convenience store, filling station, personal service establishment (such as tattoo, body piercing, salon, tailor, tanning, etc.), recording studio or restaurant which is open between the hours of 12:00 a.m. and 5:00 a.m.

Alcohol Establishments Class A: 8:00 am to 9:00 pm Sunday thru Saturday  
Permitted Hours of Operation: Class B: 6:00 am to 2:00 am Sunday thru Thursday, 6:00 am to 2:30 am Friday & Saturday

Entertainment Outdoor Closing Hours: 10:00pm Sunday-Thursday; 12:00am Friday & Saturday; unless a different time, either earlier or later, is established by the Common Council in its approval of the licensee's plan of operation.

## 11. Signature(s)

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

\_\_\_\_\_  
Signature of additional partner or 20% or more shareholder

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





# ALCOHOL BEVERAGE & PUBLIC ENTERTAINMENT PREMISES SUPPLEMENTAL APPLICATION

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

Legal Entity Name: <u>Pressed Cafe, LLC</u>	
Premise Address: <u>235 N. 36<sup>th</sup> St. Milwaukee, WI 53208</u>	
<b>Proximity of Premises to Church, School, Daycare Center or Hospital</b>	
Is the building within 300 feet of any church, school, daycare center or hospital? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
<b>"Service Bar Only" Designation</b>	
If applying for Class B or C license, are you applying for "Service Bar Only"? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Service Bar Only means customers cannot sit at the bar. Alcohol is served to employees who serve patrons seated at tables. No stools, chairs or other articles of furniture shall be placed at the service bar for patrons to sit upon.	
<b>Business Information</b>	
a) Are you taking out this application for anyone that may not be eligible for a license? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
If yes, list their name and address: _____	
b) Will the agent, a partner or the individual licensee be conducting the day-to-day operations of the business? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	
If no, list the name and address of the person(s) who will: _____	
Class B Applicants: If the agent, a partner or the individual licensee will not be conducting the day-to-day operations of the business, the person(s) listed above must obtain a Class B Managers license.	
c) Does anyone else have money invested or any other interest in this business? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
If yes, explain: _____	
d) Have you made an agreement with anyone to repay any loan or any other payments based upon income from the business? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
If yes, list name and address: _____	
<b>Property Information (New &amp; Transfer Applicants Only)</b>	
a) Do you own or lease the building? <input type="checkbox"/> Own <input checked="" type="checkbox"/> Lease	
b) Who owns the fixtures (for example, coolers, etc.)? <u>Leasce</u>	
c) Are you purchasing the stock and/or fixtures? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If yes, amount paid \$ <u>10,000</u>	
d) Total amount paid for business \$ <u>0</u>	
e) Total amount paid for goodwill of the business \$ <u>0</u>	
Goodwill comprises the reputation and customer relationships of an existing business. If the price you pay for the business exceeds the fair market value of all of the rest of the assets of the business, the excess may be considered goodwill.	
f) Have you made arrangements with the seller for payment of personal property taxes? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
<b>Lease Information (New &amp; Transfer Applicants who are leasing the premises only)</b>	
a) Date lease begins <u>July 1, 21</u> Ends <u>July 1, 2026</u>	
b) Monthly rental \$ <u>800.00</u>	
c) Do you have an option to renew the lease? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	
d) Does your lease allow for assignment to another party without the consent of the owner? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
e) For what length of time have you been guaranteed occupancy (number of years)? <u>5 years</u>	

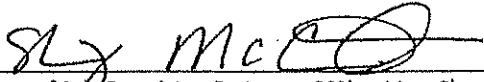
### Lease Information (Continued)

- f) In addition to paying the monthly rental, will you have to pay anything additional to the owner of the building to guarantee performance of the lease?  No  Yes If yes, explain \_\_\_\_\_
- g) Does the present owner or occupancy object to the granting of your license?  No  Yes  
If yes, explain \_\_\_\_\_

### Change of Agent Applicants Only

Have there been any changes to the floor plan since the last application was submitted?  No  Yes  
If no, a new floor plan is not required. If yes, submit a new floor plan and explain the change(s):  
\_\_\_\_\_

### Signature



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

Note: All information contained in this application is subject to approval by the Common Council.  
Deviating from approved plan of operation will subject licensee to citations, and/or suspension or non-renewal of the license.  
Contact the License Division for information on how to request changes.

### New and transfer of premises applicants must submit the following:

- Detailed floor plan  
 If a restaurant, copy of the menu



# FOOD DEALER LICENSE PLAN OF OPERATION

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

Legal Entity Name: Pressed Cafe. LLC

Premises Address: 235 N. 36<sup>th</sup>, Milwaukee WI 53208

## SECTION 1 TYPE OF BUSINESS

What will be the majority of your food sales? (check one)

Restaurant Items (meals):  
 MEALS include, but are not limited to, chicken, ribs, sandwiches, roasted corn, baked potatoes, hot dogs, brats, tacos, nachos w/ cheese and meat, French fries, cooked or deep fried vegetables/fruit, cooked cheese curds, corn dogs, egg rolls, salads.

Retail Items (snacks and beverages):  
 RETAIL items include, but are not limited to, ice cream/soft serve, lemonade, snow cones, coffee, espresso, cappuccino, tea, fruit juice, smoothies, candy, dispensed soda, fruit cups, bakery, cookies, kettle corn, cotton candy, funnel cakes, fritters, tortilla chips w/ cheese.

Will it be a convenience store?  Yes  No  
 A convenience store contains less than 5,000 square feet of retail space and has, as its primary business, the sale of basic food items and in addition, sells household products or is a filling station that sells basic food items and household products.

- Bed & Breakfast
- Micro Market

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

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

## SECTION 2 FOOD PROCESSING

Will any food processing be done?  No  Yes  
 Processing is defined as assembling, grinding, cutting, mixing, baking, coating, stuffing, packing, bottling, grilling, canning, extracting, fermenting, distilling, pickling, freezing, drying, smoking, or packaging.

## SECTION 3 FOOD REQUIRING TEMPERATURE CONTROL

Will any food that requires temperature control be sold?  No  Yes  
 (includes dairy products such as milk, cheese, and ice cream, fish, shellfish, meat, poultry)  
 If yes, list the types of food items: milks, cheese, ice, meat, poultry, salads

**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 8

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: upgrades only

Start date: June 2022

Name, Address & Phone Number of Architect: \_\_\_\_\_

Name, Address & Phone Number of Contractor: \_\_\_\_\_

**SECTION 7 ALCOHOL BEVERAGES**

Are you applying for an alcohol beverage license?

No If No, SKIP to Section 8

Yes If YES, if your food license is approved prior to the alcohol license, when do you want the food license issued?  
 Immediately  At the same time as the alcohol license

**SECTION 8 ACKNOWLEDGEMENTS & SIGNATURE**

You must initial each item confirming your understanding:

- SM I understand the Health Department must conduct an inspection and advise the License Division of their approval before the license may be issued.
- MS 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.
- SM 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.
- SM 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.
- SM 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: SLY Mc [Signature]

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



# PUBLIC ENTERTAINMENT PREMISES LICENSE SUPPLEMENTAL APPLICATION

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

PREMISES ADDRESS: 235 N. 36th, Milwaukee WI 53208

**TYPES OF ENTERTAINMENT (CHECK ALL THAT APPLY)**

- |   |   |   |   |
|---|---|---|---|
| <input type="checkbox"/> Instrumental Musicians                                     | <input type="checkbox"/> Battle of the Bands        | <input type="checkbox"/> Dancing by Performers                          | <input type="checkbox"/> Amusement Machines<br>How many? _____                |
| <input type="checkbox"/> Bands  | <input checked="" type="checkbox"/> Comedy Acts     | <input type="checkbox"/> Adult Entertainment/<br>Strippers/Erotic Dance | <input type="checkbox"/> Concerts<br>Approx. # per year? _____                |
| <input type="checkbox"/> Bowling Alley<br>How many? _____                           | <input type="checkbox"/> Disc Jockey                | <input type="checkbox"/> Wrestling                                      | <input type="checkbox"/> Theatrical Performances<br>Approx. # per year? _____ |
| <input type="checkbox"/> Pool Tables<br>How many? _____                             | <input type="checkbox"/> Magic Shows                | <input type="checkbox"/> Patron Contests                                | <input type="checkbox"/> Jukebox  |
| <input type="checkbox"/> Motion Pictures (movies by<br>admission) - How many? _____ | <input checked="" type="checkbox"/> Poetry Readings | <input type="checkbox"/> Patrons Dancing                                | <input type="checkbox"/> Karaoke  |
| <input checked="" type="checkbox"/> Other: <u>Community Workshops, Painting</u>     |   |   |   |

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.

**PROMOTERS/SOUND AMPLIFICATION**

Will promoters ever be used for any of the entertainment?  No  Yes If Yes, Describe:

At any time will sound amplification be used?  No  Yes If Yes, Describe: speakers

**LEGAL CAPACITY OF PREMISES**

\_\_\_\_\_ (Call the Development Center at 414-286-8211 with questions.) Legal capacity determines the fee for your Public Entertainment Premises License. If you would like to request the license be approved with a lower capacity than that listed above, indicate the lower capacity here: \_\_\_\_\_. If approved, this lower capacity will print on your license and override the capacity listed on your Occupancy Permit.

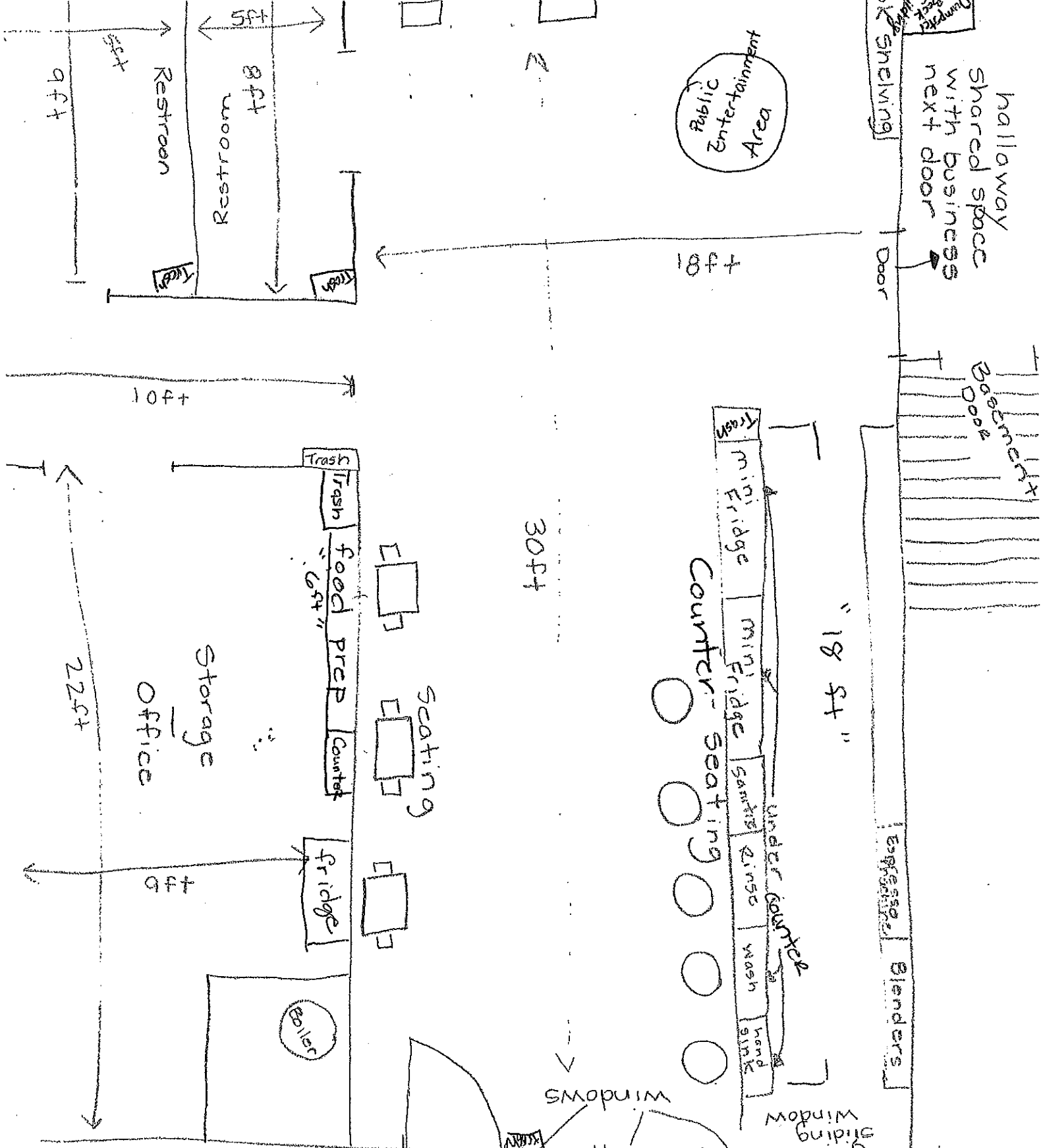
**ACKNOWLEDGEMENT/SIGNATURE**

I understand that after the license has been issued, a change to the plan of operation will require a written request to change and approval from the Common Council. I agree to inform the City Clerk within 10 days of any substantial changes in the information supplied in this application. I understand that I shall not willfully refuse to provide the services offered under this license, or add charges or require deposits not required of the general public because of race, color, sex, religion, national origin or ancestry, age, handicap, lawful source of income, marital status, sexual orientation, gender identity or expression, familial status or the fact that a person is now or has been a member of the military service, whether dressed in uniform or not; and shall not seek such information as a condition of employment, or penalize any employee or discriminate in the selection of personnel for training or promotion on the basis of such information.

I have knowledge of the City Ordinances currently regulating public entertainment, and understand that the license may be subject to suspension, non-renewal or revocation, if I violate any rule, law or regulation of the city of Milwaukee and State of Wisconsin.

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

Office Use Only  
Initials: CV Filed: 8/23/18 App: PEP 339581  
Only PEP?  No  Yes If Yes,  Queue to MPD and  Email Mgrs/Team Lead (must be heard w/in 60 days)



Pressed Cafe  
 235 N. 36th  
 Milwaukee WI 53208

Pressed Cafe, LLC

TSF = "800" 36th street (Mt. Vernon @ Corner)  
 N →

Agent - Shayvon McCullum

# Pressed Cafe, LLC

## Menu

- Coffee
- Ice Cream
- Sandwiches
- Salads - pre packaged
- Water
- Juices
- Soups - pre packaged