



CITY OF MILWAUKEE
OFFICE OF THE CITY CLERK

Thursday, March 24, 2022

COMMITTEE MEETING NOTICE

AD 09

GARCIA, Jennifer, Agent
Holt Logistics Corporation
8617 W BROWN DEER Rd
Milwaukee, WI 53224

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

Wednesday, April 06, 2022 at 10:10 AM

Regarding: Your Class B Tavern, Food Dealer-Restaurant, and Public Entertainment Premises License Applications Requesting Bands, 2 Pool Tables, Comedy Acts, Disc Jockey, Poetry Readings, Dancing by Performers, Patrons Dancing, 2 Amusement Machines, Jukebox, and Karaoke equipment for "Holt Logistics Corporation" for "Mr. B's Restaurant" at 8617 W BROWN DEER Rd.

This meeting will be held via GoToMeeting. Please see the enclosed best practices document for further instructions. The access code https://meet.goto.com/376935573. If you wish to call in, please call +1 (669) 224-3412 and use Access Code: 376-935-573

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: [Signature]

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 Email Address: License@milwaukee.gov



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

Thursday, March 24, 2022

**COMMITTEE MEETING NOTICE**

AD 09

GARCIA, Jennifer, Agent  
Holt Logistics Corporation  
2767 N 44<sup>th</sup> St  
Milwaukee, WI 53210

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**Wednesday, April 06, 2022 at 10:10 AM**

**Regarding:** Your Class B Tavern, Food Dealer-Restaurant, and Public Entertainment Premises License Applications Requesting Bands, 2 Pool Tables, Comedy Acts, Disc Jockey, Poetry Readings, Dancing by Performers, Patrons Dancing, 2 Amusement Machines, Jukebox, and Karaoke as agent for "Holt Logistics Corporation" for "Mr. B's Restaurant" at 8617 W BROWN DEER Rd.

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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.**

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

Date: 02/07/22  
Officer: T. Geniesse

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

Name of Premise: Mr. B's Restaurant and lounge  
Address: 8617 W. Brown Deer Rd  
Phone: Pending

Owner: Garcia, Jennifer NMI B/F 04/28/1970  
Owner address: 2767 N 44<sup>th</sup> St  
City State Zip: Milwaukee, WI 53210  
Owner Phone: 414-499-1115  
Owner email: jenjop@yahoo.com

Licensee/Agent: Jennifer Garcia  
Home Address: 2767 N 44<sup>th</sup> St  
City State Zip: Milwaukee, WI 53210  
Phone: 414-499-1115  
Email: jenjop@yahoo.com

Preferred contact: Craig Berry 11/17/67

Location currently open:  YES  NO

Projected open date: 02/28/22

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

Hours of Operation: Sun: 9a-2a 24 hours Y N  
Mon: 9a-2a  
Tue: 9a-2a  
Wed: 9a-2a  
Thu: 9a-2a  
Fri: 9a-2:30a  
Sat: 9a-2:30a

Premise Type: Tavern/Bar  
Restaurant  
Other: Lounge

Licenses currently held:

Alcohol:  Yes  No Class: #:  
 Tobacco:  Yes  No #:  
 Food:  Yes  No #:  
 Extended Hours:  Yes  No #:  
 Secondhand Dealer:  Yes  No Type: #:  
 Other:  Yes  No Type: #:  
 Other:  Yes  No Type: #:

**Exterior Survey:**

1. Is the area around the location clean?  Yes  No
2. What surrounds the location? (Check all the apply)
  - a.  Park
  - b.  School
  - c.  Youth Center
  - d.  Church
  - e.  Tavern(s) If so, how many
  - f.  Residential
  - g.  Other businesses
  - h.  Other:
3. Can you see from the outside of the location into the interior  Yes  No
4. Can you see the employees inside of the location from the outside  Yes  No
5. Are exterior windows free of signage  Yes  No
6. Is there a parking lot  Yes  No
7. Is the parking lot clean?  Yes  No
8. Off-Street parking  Yes  No
9. Is the parking lot well lit?  Yes  No
10. Valet Parking  Yes  No
  - a. Will this lot have a guard?  Yes  No
  - b. Will this lot have cameras?  Yes  No
11. Are there areas where a person could conceal themselves  Yes  No
12. Is there exterior lighting?  Yes  No. Does it appears to be adequate  Yes  No
13. Exterior Payphone?  Yes  No
14. Are there No Loitering Signs posted?  Yes  No
15. Are there exterior security cameras  Yes  No How Many: pending
16. Are the address numbers prominently displayed and easy to see  Yes  No

**Camera Survey:**

17. Does this location have security cameras?  Yes  No
18. Are they in working order?  Yes  No
19. What format are the cameras?
  - a. Color  Yes  No
  - b. Digital  Yes  No
  - c. Recorded  Yes  No
20. How long is footage stored for later viewing: 7 days
21. Are there exterior cameras  Yes  No How many:
22. Are there interior cameras  Yes  No How many: 16
23. Do all employees know how to retrieve recorded digital images/footage?  Yes  No

24. Cameras located in parking lot  Yes  No How many Pending

**Interior Survey:**

- 25. What is the planned capacity 505
- 26. What is the minimum number of employees That will be on premise 15
- 27. Is the storeowner willing to be a standing complainant regarding loitering?  Yes  No
  - a. If yes have them fill out the standing complaint form and give them two of the commercial signs  Yes  No
- 28. Is the interior of the location neat and clean?  Yes  No
- 29. Does an interior camera face the entrance/exit?  Yes  No
- 30. Is there a lockable area that separates employees from customers?  Yes  No
- 31. Are emergency and non-emergency numbers posted near the phone?  Yes  No
- 32. Does the owner know how to contact their police district directly?  Yes  No
  - a. Did you provide a district contact guide to the owner?  Yes  No

**Security**

- 33. How many security personnel are going to be employed: 1-12
- 34. How ill they be deployed: Interior Exterior
- 35. What days will they be deployed  Mon  Tue  Wed  Thu  Fri  Sat  Sun
- 36. Will the security be managed by business  or contracted
- 37. Will they be armed  Yes  No pending
- 38. What type of security measures to be used:
  - Wanding/metal detector special events only
  - ID Scanner
  - Dress Code
  - Cover Charge special events
  - Age restriction
  - Other

**ADDITIONAL COMMENTS/RECOMMENDATIONS:**

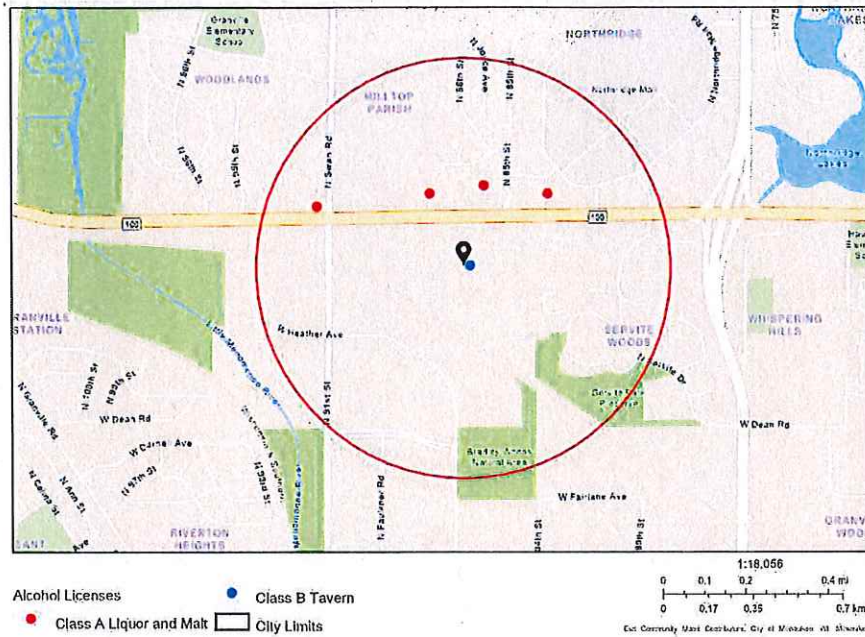


# Concentration Map for 8617 W Brown Deer Rd

## Area of Interest (AOI) Information

Area : 21,862,585.93 ft<sup>2</sup>

Jan 19 2022 16:39:26 Central Standard Time



## Summary

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

## Alcohol Licenses

#	Legal Entity	Trade Name	Licensee	Address	License Type Name	Total Capacity	Expiration Date	Count
1	FAMILY MART, LLC	LIQUOR DEPOT	VIPAN DUTTA, Agt	9108 W BROWN DEER RD	Class A Malt & Class A Liquor License		2/4/2022, 6:00 PM	1
2	Royal Plaza Liquor Inc	Royal Plaza Liquor Inc	GURMEET K DHILLON, Agt	8700 W BROWN DEER RD	Class A Malt & Class A Liquor License		4/9/2022, 7:00 PM	1
3	Family Foods Corporation	Family Foods	VIPAN DUTTA, Agt	8328 W Brown Deer RD	Class A Malt & Class A Liquor License		7/8/2022, 7:00 PM	1
4	Milwaukee Banquet LLC	Buffet City AKA Indian Pub and Dining	Satwinder Singh, Agt	8617 W Brown Deer RD	Class B Tavern License		8/1/2022, 7:00 PM	1
5	Daxa LLC	Brown Deer Beverage	CHIRAG J PATEL, Agt	8564 W Brown Deer RD	Class A Malt & Class A Liquor License		9/20/2022, 7:00 PM	1

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



Thursday, March 24, 2022



# Notice of Public Hearing

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Garcia, Jennifer

Mr. B's Restaurant at 8617 W Brown Deer Rd

Class B Tavern, Food Dealer-Restaurant, and Public Entertainment Premises License Applications Requesting Bands, 2 Pool Tables, Comedy Acts, Disc Jockey, Poetry Readings, Dancing by Performers, Patrons Dancing, 2 Amusement Machines, Jukebox, and Karaoke

**Wednesday, April 6, 2022 at 10:10 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 4/06/2022 at 10:10 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.**











CURRENT OCCUPANT	8661 W GREENBROOK DR	MILWAUKEE, WI 53224-2126
CURRENT OCCUPANT	8671 W GREENBROOK DR	MILWAUKEE, WI 53224-2126
CURRENT OCCUPANT	8701 W GREENBROOK DR	MILWAUKEE, WI 53224-2128
CURRENT OCCUPANT	8711 W GREENBROOK DR	MILWAUKEE, WI 53224-2128

Blank Notice

Total Records: 191

Radius: 600.0 feet and Center of Circle: 8617 W Brown Deer Rd



Thursday, March 24, 2022

## Licenses Committee Notice of Hearing

Slinger Cheese LLC  
12419 W Hampton Av  
Butler, WI 53007

The Licenses Committee will consider the following license application:

Class B Tavern, Food Dealer-Restaurant, and Public Entertainment Premises  
License Applications Requesting Bands, 2 Pool Tables, Comedy Acts, Disc Jockey,  
Poetry Readings, Dancing by Performers, Patrons Dancing, 2 Amusement  
Machines, Jukebox, and Karaoke  
GARCIA, Jennifer, Agent  
Mr. B's Restaurant at 8617 W BROWN DEER Rd

Date: 4/6/2022

Time: 10:10 AM

Location: The hearing before the Licenses Committee will take place virtually on Wednesday, April 6, 2022. 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.

Please note this application may be recommended for denial based on fitness of the location due to concentration of alcohol beverage outlets in the area. If the application is denied for this reason, no other application for an alcohol beverage license for this location shall be recommended for approval by the Licenses Committee within three years of the date of denial unless the applicant has demonstrated a change of circumstances since the prior denial.

If you have any questions, please call (414) 286-2238.





# 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:

Full service restaurant

Do you have any experience operating this type of business?  No  Yes If yes, explain: 25 yrs

## 2. Business Operations

- a. Proposed Opening Date: 2/1/22
- 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: Class B, Food
- 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): 7330 N 76th St
- h. Are other businesses operating in the same building?  No  Yes If yes, describe: Restaurant, Day Care

## 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: 10 Locations: Restrooms, Bar, Dining Room  
Outside: 10 Locations: Door, Parking Lot
- c. Is a crowd control barrier used?  No  Yes If yes, describe: \_\_\_\_\_
- d. How many restrooms are on the premises? 3
- 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? 500 and describe the parking security plan: Lights, Cameras, Security Patrolling
- b. Is there a loading zone?  No  Yes If yes, describe the loading area security plan: Lights, Cameras
- c. Will you have security personnel on premise?  No  Yes If yes, how many? 3 and answer the following:  
 What are their responsibilities? Patrol Parking lot  
 Is security equipment used?  No  Yes If yes, describe \_\_\_\_\_  
 List their licensing, certification, or training credentials NA
- d. Will there be security cameras?  No  Yes If yes, how many? 10 and list locations: Exit Doors  
Parking lot
- e. Will searches/identification checks be done upon entry?  No  Yes If yes, describe \_\_\_\_\_

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

Alcohol <u>15</u> %	Food <u>75</u> %	Secondhand Merchandise _____ %	Precious Metals & Gems _____ %
Entertainment <u>10</u> %	Cigarettes _____ %	Personal Services (such as tattoo, body piercing, salon, tailor, tanning, etc.) _____ %	Other _____ % Describe: _____
Pawnbroker Activity _____ %	Salvaged Materials _____ % (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: \_\_\_\_\_       Rooming House: Number of Floors: \_\_\_\_\_  
 Number of Rooms: \_\_\_\_\_      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 500 (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: 91<sup>st</sup>

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: Milwaukee Berquats LLC Phone Number: \_\_\_\_\_

Building Owner Address: 8617 W Brown Deer Rd Milw, WI 53224

## 10. Hours of Operation & Customers

Will customers be entering the premises?  No  Yes

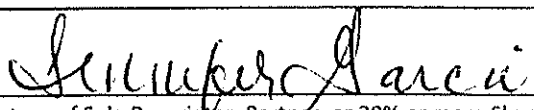
Day of the Week	Proposed Hours of Operation:		Estimated Number of Customers expected each day	Potential Age Range of Customers	Class B Tavern Applicant Only: Age Restriction (If none, write 'None')
	Open Time (include a.m. or p.m.)	Close Time (include a.m. or p.m.)			
Sunday	11 AM	2 AM	200	8-80	None
Monday	11 AM	2 AM	200	8-80	None
Tuesday	11 AM	2 AM	200	8-80	None
Wednesday	11 AM	2 AM	200	8-80	None
Thursday	11 AM	2 AM	200	8-80	None
Friday	11 AM	2:30 AM	200	8-80	None
Saturday	11 AM	2:30 AM	200	8-80	None

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

Alcohol Establishments Permitted Hours of Operation: Class A: 8:00 am to 9:00 pm Sunday thru Saturday  
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>Holt Logistics Corporation</u>	
Premise Address: <u>8617 W Brown Deer Rd Milwaukee, WI</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 type="checkbox"/> No <input checked="" 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>Milwaukee Banquets LLC</u>
c) Are you purchasing the stock and/or fixtures?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, amount paid \$ _____
d) Total amount paid for business	\$ <u>0</u>
e) Total amount paid for goodwill of the business	\$ <u>0</u>
Goodwill comprises the reputation and customer relationships of an existing business. If the price you pay for the business exceeds the fair market value of all of the rest of the assets of the business, the excess may be considered goodwill.	
f) Have you made arrangements with the seller for payment of personal property taxes?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>Lease Information (New &amp; Transfer Applicants who are leasing the premises only)</b>	
a) Date lease begins	<u>1/1/22</u> Ends <u>12/31/27</u>
b) Monthly rental	\$ <u>7000.00</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 type="checkbox"/> No <input checked="" type="checkbox"/> Yes
e) For what length of time have you been guaranteed occupancy (number of years)?	<u>5 yrs</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

ccl-foodplan 2/28/19

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: Holt Logistics Corporation

Premises Address: 8617 W Brown Deer Rd

## 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: Chicken, Beef, Fish

**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: \_\_\_\_\_  
 Start date: \_\_\_\_\_  
 Name, Address & Phone Number of Architect: \_\_\_\_\_  
 \_\_\_\_\_  
 Name, Address & Phone Number of Contractor: \_\_\_\_\_  
 \_\_\_\_\_

**SECTION 7 ALCOHOL BEVERAGES**

Are you applying for an alcohol beverage license?  
 No If No, SKIP to Section 8  
 Yes If YES, if your food license is approved prior to the alcohol license, when do you want the food license issued?  
 Immediately  At the same time as the alcohol license

**SECTION 8 ACKNOWLEDGEMENTS & SIGNATURE**

You must initial each item confirming your understanding:

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

SG 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.

SG 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.

SG 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.

SG 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: Jennifer Garcia

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:** 8617 W Brown Deer Rd Milw, WI 53224

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

<input type="checkbox"/> Instrumental Musicians	<input type="checkbox"/> Battle of the Bands	<input checked="" type="checkbox"/> Dancing by Performers	<input checked="" type="checkbox"/> Amusement Machines How many? <u>2</u>
<input checked="" type="checkbox"/> Bands	<input checked="" type="checkbox"/> Comedy Acts	<input checked="" type="checkbox"/> Adult Entertainment/ Strippers/Erotic Dance	<input type="checkbox"/> Concerts Approx. # per year? _____
<input type="checkbox"/> Bowling Alley How many? _____	<input checked="" type="checkbox"/> Disc Jockey	<input type="checkbox"/> Wrestling	<input type="checkbox"/> Theatrical Performances Approx. # per year? _____
<input checked="" type="checkbox"/> Pool Tables How many? <u>2</u>	<input type="checkbox"/> Magic Shows	<input type="checkbox"/> Patron Contests	<input checked="" type="checkbox"/> Jukebox
<input type="checkbox"/> Motion Pictures (movies by admission) - How many? _____	<input checked="" type="checkbox"/> Poetry Readings	<input checked="" type="checkbox"/> Patrons Dancing	<input checked="" type="checkbox"/> Karaoke
<input type="checkbox"/> Other: _____			

*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:

**LEGAL CAPACITY OF PREMISES**

TBD (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.

*Senupel Garcia*  
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:**

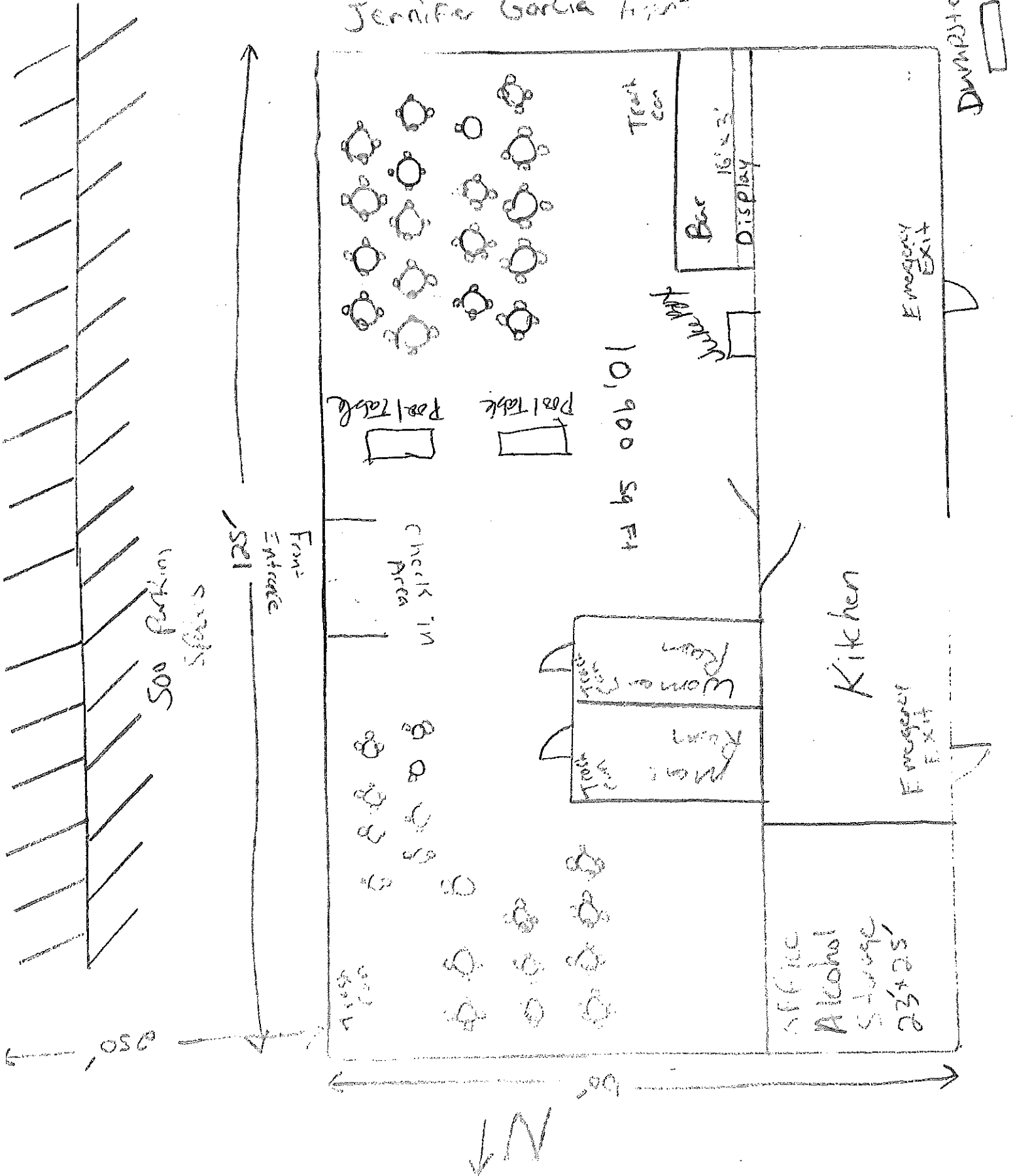
Initials: \_\_\_\_\_ Filed: \_\_\_\_\_ App: \_\_\_\_\_

Only PEP?  No  Yes If Yes,  Queue to MPD and  Email Mgrs/Team Lead (must be heard w/in 60 days)

Mc. B's  
Restaurant

Holt Logistics Corporation  
8617 W Brown Deer Rd  
Milwaukee, WI 53224  
Jennifer Garcia Agent

11/23/21



W Brown Deer Rd

# Food Menu

- 7 Piece Wings w/fries - \$14
  - Flavors ~ Kisses and Spices, Buffalo, Barbecue, Spicy Garlic, Plain.
- 25 Piece Wing Platter w/fries - \$35
- 3 Piece Chicken Tender w/fries - \$12
- 3 Piece Catfish (Fried or Grilled) w/fries - \$12
- 7 Piece Shrimp (Fried or Grilled) w/fries - \$15
- Ribeye Steak Sandwich w/fries - \$19
- Hamburger w/fries \$11
  - Add Cheese \$1
- Ribeye Steak w/fries or baked potato - \$43
- Fried Lobster Tail w/fries or baked potato \$39
- Lobster and Steak w/fries or baked potato - \$65
- Chicken Salad \$9
- Shrimp Salad \$18

## *Appetizers*

Mozzarella Sticks \$5

Fried Okra \$5

Jalapeño Poppers \$5

Onion Rings \$5

House Salad \$7

**"CONSUMING RAW OR UNDERCOOKED MEATS, POULTRY, SEAFOOD, SHELLFISH OR EGGS MAY INCREASE YOUR RISK OF FOODBORNE ILLNESS, ESPECIALLY IF YOU HAVE CERTAIN MEDICAL CONDITIONS."**