

# CITY OF MILWAUKEE OFFICE OF THE CITY CLERK

Wednesday, July 06, 2022

### COMMITTEE MEETING NOTICE

**AD 08** 

RUIZ ROJO, Rafael, Agent Restaurante El Rinconcito De Rafa LLC 3217 S 9TH Pl Milwaukee, WI 53215

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

### Tuesday, July 19, 2022 at 10:20 AM

Regarding:

Your Class B Tavern and Weights & Measures License Applications as agent for "Restaurante El Rinconcito De Rafa LLC" for "Carnitas De Rafa Restaurante El 2344 S 27th St.

This meeting will be held via GoToMeeting. Please see the enclosed best practices document for further instructions. The access code is <a href="https://meet.goto.com/935616013">https://meet.goto.com/935616013</a>. If you wish to call in, please call +1 (872) 240-3311 and use Access Code: 935-616-013.

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

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

Date:6-27-22 Officer: PO Matthew Diener

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

Name of Premise: Address: Phone:	Carnitas 2344 S : N/P		fa		
Owner: Owner address: City State Zip: Owner Phone: Owner email:	Rafael I 3217 S Milwau 414-759 ruizredi	9 <sup>th</sup> P1 kee, W 9-1918	T 5321:		
Licensee/Agent: Home Address: City State Zip: Phone: Email:	same				
Preferred contact: Ce	11 .	•			
Location currently or	en:		YES	$\boxtimes$	NO
Projected open date:	July 2022	2			
Day's open: S	м □т [	]w[	]Th [_]	F ∐SA	A 🖂 ALL
Hours of Operation:	Mon: Tue:	6a-10p 6a-10p 6a-10p 6a-10p 6a-10p 6a-10p 6a-10p	) ) ) )		□24 hours □Y ⊠N
Premise Type:		ern/Bar aurant er:	•		

Licenses currently no		<b>-</b>		
Alcohol:	∐Yes ≥	No Class:	#:	•
Tobacco:	□Yes 🗵	No #:		
Food:	□Yes 🗵	No #:		
Other:	Parameter Comment	No Type:	#:	
Other:		No Type:	#:	
Omer.	I es	лио туре.	$\pi$ .	
Exterior Survey:				v.
1. Is the area ar	ound the location c	lean? XYes	No	
	nds the location? (C			
а. Пра	•		11.77	
	hool ·			
<del></del>	outh Center			
	nurch	•		
<del></del>				
	vern(s) If so, how i	many		
=	sidential			
~ =	her businesses			_
	her:			<b></b>
	from the outside of			
	the employees insid			side ⊠Yes ∐No
5. Are exterior	windows free of sig	gnage 🏻 Yes	sNo	
<ol><li>Street parkin</li></ol>	g ⊠Yes □No			
7. Is there a par	king lot XYes 🔲	No		•
	g lot clean? XYes			
	g lot well lit?⊠Ye			
10. Valet Parkin				
	this lot have a guar	do TVes T	No	
	this lot have a guar		<b>=</b> _	
				as Mara
	eas where a person			
			oes it appears to b	e adequate ⊠Yes ⊡No
13. Exterior Pay	<u>,                                    </u>	Yes No	K //	
	Loitering Signs po			
	terior security came			
16. Are the addr	ess numbers promi	nently displa	yed and easy to se	e ⊠Yes ∐No
Camera Survey:				
	cation have security	Loamerac?	Vec MNo	
	working order?		1 res ⊠r40	•
•		r es TTM		,
	are the cameras?	Ът		
a. Color		_No		
b. Digit		No		
c. VCR		_No		
d. Reco	<u></u>	_]No		
20. How long is	footage stored for l	later viewing	: 7-10 days	
21. Are there ex			How many: 2 to be	e installed
22. Are there int	erior cameras	more incomment	How many: 2 to be	· ·

23. Do all employees know how to retrieve recorded digital images/footage? ⊠Yes ☐No
24. Cameras located in parking lot Yes No How many1
Interior Survey:
25. What is the planned/posted capacity 28
26. What is the minimum number of employees that will be on premise 4
27. Is the storeowner willing to be a standing complainant regarding loitering? ⊠Yes □N
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?
29. Does an interior camera face the entrance/exit?
30. Are emergency and non-emergency numbers posted near the phone? ☐ Yes ☐ No
31. Does the owner know how to contact their police district directly? Xyes No
a. Did you provide a district contact guide to the owner? Yes No
Security
32. How many security personnel are going to be employed: N/A
33. How will they be deployed: Interior Exterior
34. What days will they be deployed Mon Tue Wed Thu Fri Sat Sun
35. Will the security be managed by business or contracted
36. Will they be armed ☐Yes ☐No
37. What type of security measures will be used:
Wanding/metal detector
ID Scanner
Dress Code
Cover Charge
Age restriction
Other
38. When at capacity, how will the overflow crowd be managed?
39. Will a guard monitor the overflow crowd at all times? Yes No

# ADDITIONAL COMMENTS/RECOMMENDATIONS:

The applicant is opening the location strictly as a Mexican restaurant specializing in carnitas and other mexican foods. He stated that an IT specialist is coming next week to install cameras outside, in the parking lot, and inside the premise.

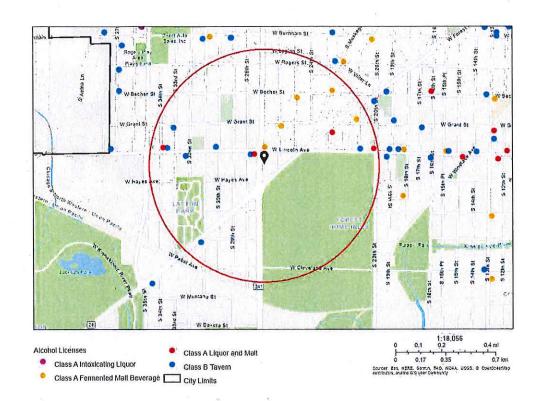


# City Concentration Map - 2344 S 27TH ST Milwaukee

### Area of Interest (AOI) Information

Area: 21,862,585.81 ft2

May 25 2022 11:51:00 Central Daylight Time



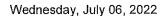
# 5/25/2022

# Summary

Name	Count	Area(ft²)	Length(mi)
Alcohol Licenses	16		

# Alcohol Licenses

#	Legal Entity	Trade Name	Licensee	Address	License Type Name	Total Capacity	Expiration Date	Count
1	RTSP, LLC	JUST ONE MORE	ANTONIO S PEREZ, Agt	3209 W LINCOLN AV	Class B Tavern License	25	1/17/2022, 6:00 PM	1
2	Aarvind Food Mart, LLC	Lucky Food & Beer	LAKHWINDER KAUR, Agt	2638 W Lincoln AV	Class A Fermented Malt Beverage Retailer's License	24	12/16/2021, 6:00 PM	1
3	CHILLY WILLYS SALOON	CHILLY WILLYS SALOON	DAVID W OLSON, SP	3301 W GRANT ST	Class B Tavern License	25	2/28/2022, 6:00 PM	.1
4	Villana's Place, LLC	Villana's Place	Juan Manuel Macias Gallardo, Agt	3000 W LINCOLN AV	Class B Tavern License	160	2/7/2022, 6:00 PM	1
5	Chispita's Store LLC	Jalisco's Supermarket	Monica Gomez Vega, Agt	2000 W LINCOLN AV	Class A Malt & Class A Liquor License	,	3/30/2022, 7:00 PM	1
6	ABDELAL,	GRANT MARKET	SAED F ABDELAL, Agt	2100 W GRANT ST	Class A Fermented Malt Beverage Retailer's License	11	5/13/2022, 7:00 PM	1
7	Farida, LLC	South Ave Foods	Thaher M Qatoum, Agt	2108 S 25TH ST	Class A Fermented Malt Beverage Retailer's License	8	5/5/2022, 7:00 PM	1
8	Punjab Food LLC	J&C El Centenario Market	Rita M Bhatti, Agt	2082 S Muskego AV	Class A Fermented Malt Beverage Retailer's License		5/23/2022, 7:00 PM	1
9	LA PICA #3, LLC	LA PICA CARR 3 BAR & HALL	WILLIAM RIVERA, Agt	3427-31 W LINCOLN AV	Class B Tavern License	162	7/28/2022, 7:00 PM	1
10	Seven Star Liquor LLC	Seven Star Liquor	JASJEET SINGH, Agt	2223 W Forest Home AV	Class A Malt & Class A Liquor License		7/25/2022, 7:00 PM	1
11	Treder KMK	Supermarket La Veracruzana	ERIC J TREDER, Agt	2539 W Grant ST	Class A Fermented Malt Beverage Retailer's License		3/1/2022, 6:00 PM	1
12	Agave Azul	Agave Azul	FRANCISCO RIOS, JR, SP	3316 W Lincoln AV	Class B Tavern License	94	9/23/2022, 7:00 PM	1
13	Arora Pantry Inc	Quick Pick Food Mart	Gurmeet S Arora, Agt	3332 W Lincoln AV	Class A Malt & Class A Liquor License		8/30/2022, 7:00 PM	1
14	Holler House	Holler House	Catherine Haefke, SP	2042 W Lincoln AV	Class B Tavern License	-	9/20/2022, 7:00 PM	1
15	LINCOLN BEER & LIQUOR INC.	LINCOLN BEER & LIQUOR	Gurjit K Singh, Agt	2717 W Lincoln AV	Class A Malt & Class A Liquor License	٠	10/31/2022, 7:00 PM	1
16	MCFINAGIN LLC	BREW CITY TAP	MARK S SILBER, Agt	3105 W FOREST HOME AV	Class B Tavern License	80	10/10/2022, 7:00 PM	1







# Notice of Public Hearing

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RUIZ ROJO, Rafael
Carnitas De Rafa Restaurante at 2344 S 27th St.
Class B Tavern and Weights & Measures License Applications

# Tuesday, July 19, 2022 at 10:20 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 07/19/2022 at 10:20 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 for necessary information. Please make such requests no later than one business day prior to the start of the meeting. You are not required to attend the hearing, but please see the information below if you would like to provide testimony. Once the Licenses Committee makes its recommendation, this recommendation is forwarded to the full Common Council for approval at its next regularly scheduled hearing.

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

- 1. The license application is scheduled to be heard at the above time. Due to other hearings running longer than scheduled, you may have to wait some time to provide your testimony.
- 2. You must 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	2319 S 27TH ST	MILWAUKEE, WI 53215-2922
CURRENT OCCUPANT	2320 S 27TH ST	MILWAUKEE, WI 53215-2923
CURRENT OCCUPANT	2320 S 28TH ST	MILWAUKEE, WI 53215-2926
CURRENT OCCUPANT	2320A S 28TH ST	MILWAUKEE, WI 53215-2926
CURRENT OCCUPANT	2321 S 26TH ST	MILWAUKEE, WI 53215-2920
CURRENT OCCUPANT	2322 S 27TH ST	MILWAUKEE, WI 53215-2923
CURRENT OCCUPANT	2322A S 27TH ST	MILWAUKEE, WI 53215-2923
CURRENT OCCUPANT	2323 S 26TH ST	MILWAUKEE, WI 53215-2920
CURRENT OCCUPANT	2324 S 28TH ST	MILWAUKEE, WI 53215-2926
<b>CURRENT OCCUPANT</b>	2326 S 27TH ST	MILWAUKEE, WI 53215-2923
<b>CURRENT OCCUPANT</b>	2326 S 28TH ST	MILWAUKEE, WI 53215-2926
<b>CURRENT OCCUPANT</b>	2327 S 26TH ST	MILWAUKEE, WI 53215-2920
<b>CURRENT OCCUPANT</b>	2328 S 26TH ST	MILWAUKEE, WI 53215-2921
<b>CURRENT OCCUPANT</b>	2328 S 28TH ST	MILWAUKEE, WI 53215-2926
CURRENT OCCUPANT	2329 S 27TH ST	Milwaukee, WI 53215-2922
<b>CURRENT OCCUPANT</b>	2330 S 27TH ST	MILWAUKEE, WI 53215-2923
CURRENT OCCUPANT	2330A S 27TH ST	MILWAUKEE, WI 53215-2923
CURRENT OCCUPANT	2331 S 26TH ST	MILWAUKEE, WI 53215-2920
CURRENT OCCUPANT	2331A S 26TH ST	MILWAUKEE, WI 53215-2920
CURRENT OCCUPANT	2332 S 28TH ST	MILWAUKEE, WI 53215-2926
CURRENT OCCUPANT	2334 S 26TH ST	MILWAUKEE, WI 53215-2921
CURRENT OCCUPANT	2334 S 27TH ST	MILWAUKEE, WI 53215-2923
CURRENT OCCUPANT	2334A S 26TH ST	MILWAUKEE, WI 53215-2921
CURRENT OCCUPANT	2334A S 27TH ST	MILWAUKEE, WI 53215-2923
CURRENT OCCUPANT	2335 S 26TH ST	MILWAUKEE, WI 53215-2920
CURRENT OCCUPANT	2336 S 28TH ST	MILWAUKEE, WI 53215-2926
CURRENT OCCUPANT	2337 S 26TH ST	MILWAUKEE, WI 53215-2920
CURRENT OCCUPANT	2338 S 28TH ST	MILWAUKEE, WI 53215-2926
CURRENT OCCUPANT	2339 S 26TH ST	MILWAUKEE, WI 53215-2920
CURRENT OCCUPANT	2339 S 27TH ST	MILWAUKEE, WI 53215-2922
CURRENT OCCUPANT	2340 S 27TH ST	MILWAUKEE, WI 53215-2923
CURRENT OCCUPANT	2340A S 27TH ST	MILWAUKEE, WI 53215-2923
CURRENT OCCUPANT	2341 S 26TH ST	MILWAUKEE, WI 53215-2920
CURRENT OCCUPANT	2341A S 26TH ST	MILWAUKEE, WI 53215-2920
CURRENT OCCUPANT	2342 S 27TH ST	MILWAUKEE, WI 53215-2923
CURRENT OCCUPANT	2342 S 28TH ST	MILWAUKEE, WI 53215-2926
CURRENT OCCUPANT	2345 S 26TH ST	MILWAUKEE, WI 53215-2920
CURRENT OCCUPANT	2347 S 26TH ST	MILWAUKEE, WI 53215-2920
CURRENT OCCUPANT	2347A S 26TH ST	MILWAUKEE, WI 53215-2920
CURRENT OCCUPANT	2348 S 28TH ST	MILWAUKEE, WI 53215-2926
CURRENT OCCUPANT	2348A S 28TH ST	MILWAUKEE, WI 53215-2926
CURRENT OCCUPANT	2349 S 27TH ST	MILWAUKEE, WI 53215-2922
CURRENT OCCUPANT	2350 S 27TH ST	MILWAUKEE, WI 53215-2923
CURRENT OCCUPANT	2352 S 27TH ST	MILWAUKEE, WI 53215-2923
CURRENT OCCUPANT	2352 S 28TH ST	MILWAUKEE, WI 53215-2926
CURRENT OCCUPANT	2354 S 27TH ST	MILWAUKEE, WI 53215-2923

CURRENT OCCUPANT **CURRENT OCCUPANT CURRENT OCCUPANT** CURRENT OCCUPANT **CURRENT OCCUPANT CURRENT OCCUPANT CURRENT OCCUPANT CURRENT OCCUPANT CURRENT OCCUPANT** CURRENT OCCUPANT **CURRENT OCCUPANT CURRENT OCCUPANT CURRENT OCCUPANT** CURRENT OCCUPANT **CURRENT OCCUPANT CURRENT OCCUPANT** CURRENT OCCUPANT CURRENT OCCUPANT CURRENT OCCUPANT CURRENT OCCUPANT CURRENT OCCUPANT CURRENT OCCUPANT **CURRENT OCCUPANT CURRENT OCCUPANT** CURRENT OCCUPANT CURRENT OCCUPANT **CURRENT OCCUPANT** CURRENT OCCUPANT **CURRENT OCCUPANT CURRENT OCCUPANT CURRENT OCCUPANT CURRENT OCCUPANT CURRENT OCCUPANT CURRENT OCCUPANT CURRENT OCCUPANT** CURRENT OCCUPANT CURRENT OCCUPANT **CURRENT OCCUPANT** CURRENT OCCUPANT CURRENT OCCUPANT **CURRENT OCCUPANT** CURRENT OCCUPANT **CURRENT OCCUPANT CURRENT OCCUPANT CURRENT OCCUPANT CURRENT OCCUPANT CURRENT OCCUPANT** 

2354 S 28TH ST 2354A S 27TH ST 2356 S 28TH ST 2358 S 27TH ST 2358 S 28TH ST 2358A S 28TH ST 2360 S 27TH ST 2556 W FOREST HOME AVE 2558 W FOREST HOME AVE 2601 W LINCOLN AVE 2603 W LINCOLN AVE 2604 W FOREST HOME AVE 2605 W LINCOLN AVE 2607 W LINCOLN AVE 2608 W FOREST HOME AVE 2608A W FOREST HOME AVE 2611 W LINCOLN AVE 2612 W FOREST HOME AVE 2614 W FOREST HOME AVE 2614A W FOREST HOME AVE 2615 W LINCOLN AVE 2617 W LINCOLN AVE 2617A W LINCOLN AVE 2618 W FOREST HOME AVE 2618A W FOREST HOME AVE 2622 W FOREST HOME AVE 2623 W LINCOLN AVE 2626 W FOREST HOME AVE 2626A W FOREST HOME AVE 2627 W LINCOLN AVE 2629 W LINCOLN AVE 2630 W FOREST HOME AVE 2630A W FOREST HOME AVE 2631 W LINCOLN AVE 2633 W LINCOLN AVE 2635 W LINCOLN AVE 2636 W HAYES AVE 2639 W LINCOLN AVE 2640 W HAYES AVE 2640A W HAYES AVE 2641 W LINCOLN AVE 2709 W LINCOLN AVE 2712 W HAYES AVE 2712A W HAYES AVE 2713 W LINCOLN AVE 2713A W LINCOLN AVE

2720 W HAYES AVE

MILWAUKEE, WI 53215-2926 MILWAUKEE, WI 53215-2923 MILWAUKEE, WI 53215-2926 MILWAUKEE, WI 53215-2923 MILWAUKEE, WI 53215-2926 MILWAUKEE, WI 53215-2926 MILWAUKEE, WI 53215-2923 MILWAUKEE, WI 53215-2941 MILWAUKEE, WI 53215-2941 MILWAUKEE, WI 53215-2476 MILWAUKEE, WI 53215-2476 MILWAUKEE, WI 53215-2961 MILWAUKEE, WI 53215-2476 MILWAUKEE, WI 53215-2476 MILWAUKEE, WI 53215-2961 MILWAUKEE, WI 53215-2961 MILWAUKEE, WI 53215-2476 MILWAUKEE, WI 53215-2961 MILWAUKEE, WI 53215-2961 MILWAUKEE, WI 53215-2961 MILWAUKEE, WI 53215-2476 MILWAUKEE, WI 53215-2476 MILWAUKEE, WI 53215-2476 MILWAUKEE, WI 53215-2961 MILWAUKEE, WI 53215-2961 MILWAUKEE, WI 53215-2961 MILWAUKEE, WI 53215-2476 MILWAUKEE, WI 53215-2961 MILWAUKEE, WI 53215-2961 MILWAUKEE, WI 53215-2476 MILWAUKEE, WI 53215-2476 MILWAUKEE, WI 53215-2961 MILWAUKEE, WI 53215-2961 MILWAUKEE, WI 53215-2476 MILWAUKEE, WI 53215-2476 MILWAUKEE, WI 53215-2476 MILWAUKEE, WI 53215-2948 MILWAUKEE, WI 53215-2476 MILWAUKEE, WI 53215-2948 MILWAUKEE, WI 53215-2948 MILWAUKEE, WI 53215-2476 MILWAUKEE, WI 53215-2454 MILWAUKEE, WI 53215-2950 MILWAUKEE, WI 53215-2950 MILWAUKEE, WI 53215-2454 MILWAUKEE, WI 53215-2454 MILWAUKEE, WI 53215-2950

CURRENT OCCUPANT 2720A W HAYES AVE MILWAUKEE, WI 53215-2950

**Blank Notice Total Records: 94** 

Radius 250.0 feet and Center of Circle: 2344 S 27th St



### **BUSINESS LICENSE PLAN OF OPERATION**

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: <u>license@milwaukee.gov</u>

1. T	ype of Business
Applyir	ng 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
	ther (supplemental application for specific license also required)
Provid	e a detailed description of the type of business you plan on operating: FULL SERVICE MEXICAN RETAURANT
	have any experience operating this type of business?  No  Yes If yes, explain: MANAGED A RESTAURANT
2. B	usiness Operations
a.	Proposed Opening Date: 06/17/2022
b.	Is this premise under construction? 🔳 No 🗌 Yes If yes, list estimated completion date:
C.	Is this a franchise? 🔳 No 🗌 Yes
đ.	Is this premises currently licensed? No Tyes If yes, list type of license: RESTAURANT
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?
	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? X No Yes If yes, describe:
3. Li	tter & 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. S	moking & Sanitation
a.	Are there designated outdoor smoking areas? 🔳 No 🗌 Yes If yes, describe:
b.	Number of Garbage Cans: Inside: 4 Locations: 3 N KITCHEN, 1 N DINING ROOM
	Outside: Locations: PARKING LOT
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. Se	curity	y-contrasti					4.	
a.		•				many? <u>16</u> an		
	plan: PARKING WILL BE MONITORED BY CAMERAS AND PROPER SIGNAGE WILL BE INSTALLED							
b.	Is there a loading zone? No Yes If yes, describe the loading area security plan:							
c.	c. Will you have security personnel on premise? No Yes If yes, how many? and answer the following:							
	ls sec	urity eqเ	iipme	nt used? 🏰 No 🗌	Yes If yes, de	scribe		and the shift the section of the sec
			-					
d.						many? 6 and list	locations: .	2 IN DINING ROOM,
<u> </u> 				NBASEMENT, 1 IN				
e.			CONTRACTOR OF THE PARTY OF THE			lo 🗌 Yes If yes, descri	be	
		y		(must total 100				
Alcoh	ol <u></u>	10	_%	Food <u>90</u>	%	Secondhand Merchandise	e	Precious Metals & Gems
Entert	ainment		_%	Cigarettes	%	%		%
Pawnl	vnbroker Activity% Salvaged Materials (such as scrap metal)		%	Personal Services (such as tattoo, body piercing, salon, tailor, tanning, etc.)%		Other% Describe:		
7. B	7. Businesses/Licenses on the Premises (check all that apply):							
Туре		·	200 a tomas - 1 ( 1 ( 1 ( 1 ( 1 ( 1 ( 1 ( 1 ( 1 ( 1	Afficiency in the second of th		100000000000000000000000000000000000000		
<b>     </b>	ull Service Res	taurant		Cafe/Coffee Shop		ast Food Restaurant	Private/Fraternal/Veterans Club Teen Club	
	Night Club			Tavern	<del></del>	_		lub
	Banquet Hall	•		Sports Facility	Bowling			
F	Hotel/Motel:			ors:	Rooming			
T	-	Number	of Ro	oms:		Number of Roo	ms:	
Type	iquor Store			Corner Store	Superma	arket	Conven	ience Store
	Gas Station Amusement/Phonogra		ograph Distribut	raph Distributor		Recycling, Salvage or Towing		
	Used Car Dealer Personal Service Establishment Recording Studio (such as tattoo business, hair salon, tailor, etc.)							
Wha	at other licens	es/permit	s will y	ou hold at this location	? (check all that	apply)		
	Occupa	ncy Permi	t 🔲 C	igarette & Tobacco 🔲 🤇	Gas Station 🔲 🛭	Extended Hours Class "I	B" Tavern 🎚	Weights & Measures
•	Second	and Deal	er 🔲	Precious Metal & Gem	Other:			
8. 1	egal Cap	acity (	only	y if a Type 1 pre	mises in t	l7 above)		
Capa	city <u>28</u>	(C	all the	Milwaukee Developme	nt Center at 414	4-286-8211 if you have que	estions.)	

war and a second se		year or a surprise with a secretary section 4.25 miles	AND SECTION OF THE PARTY OF THE		AND THE RESIDENCE OF THE PROPERTY OF THE PROPE	
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: Descr	☐ Other: Describe:					
b. Describe Locati	on: Major Thoroughfare	Secondary Street Ot	her:			
	Cross Street: LINCOLN					
	ng: 🔳 Free Standing Buildin —					
	ses Structure: 🔲 Single Sto					
	unding Area: 🔳 Commercia Name: RICARDO BECE					
g. Building Owner	r Address: 6807 SEVEN N	MILE RD, CALEDONIA	WI 53402			
	7.7					
10. Hours of C	peration & Custor	mers /	eti distributa eta 1911. 1979 - Maria II.			
	ering the premises? \(\bigcap\) No	■ Yes				
	Proposed Hour	s of Operation:	Estimated Number	Potential Age Range	Class B Tavern Applicant Only:	
Day of the Week	Open Time :	Close Time	of Customers expected each day	of	Age Restriction	
	(include a.m. or p.m.)			Customers	(If none, write 'None')	
Sunday	6AM	10PM	50-130	0-100	NONE	
Monday	6AM	10PM	30-70	0-100	NONE	
Tuesday	6AM	10PM	30-70	0-100	NONE	
Wednesday	6AM	10PM	30-70	0-100	NONE	
Thursday	6AM	10PM	30-70	0-100	NONE	
Friday	6AM	10PM	30-90	0-100	NONE	
Saturday 19	6AM	10PM	50-13 <b>0</b>	0-100	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 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, ls established by the Common Council in its approval of the licensee's plan of operation.						
11. Signature	11. Signature(s)					
Probel	Pi		_			
	orietor, Partner, or 20% or m 0% or more shareholders	ore Shareholder	Signature of additional p	partner or 20% or	more shareholder	
(If there are no 20% or more shareholders, Corporate Officer-print name/title and sign)						



# ALCOHOL BEVERAGE & PUBLIC ENTERTAINMENT PREMISES SUPPLEMENTAL APPLICATION

Office of the City Clerk License Division
200 E. Wells St. Room 105, Milwaukee, WI 53202

(414) 286-2238 e-mail address: license@milwaukee.gov www.milwaukee.gov/license Legal Entity Name: RESTAURANTE EL RINCONCITO DE RAFA, LLC Premise Address: 2344 S 27TH ST, MILWAUKEE WI 53215 Proximity of Premises to Church, School, Daycare Center or Hospital is the building within 300 feet of any church, school, daycare center or hospital? "Service Bar Only" Designation If applying for Class B or C license, are you applying for "Service Bar Only"? Service Bar Only means customers cannot sit at the bar. Alcohol is served to employees who serve patrons seated at tables. No stools, chairs or other articles of furniture shall be placed at the service bar for patrons to sit upon-**Business Information** Are you taking out this application for anyone that may not be eligible for a license? If yes, list their name and address: Will the agent, a partner or the individual licensee be conducting the day-to-day operations of the business? 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. Does anyone else have money invested or any other interest in this business? No Yes If yes, explain: Have you made an agreement with anyone to repay any loan or any other payments based upon income from the business? No Yes If yes, list name and address: Property Information (New & Transfer Applicants Only) Own Lease Do you own or lease the building? **BUILDING OWNER** Who owns the fixtures (for example, coolers, etc.)? ☐ No Yes If yes, amount paid \$8000 Are you purchasing the stock and/or fixtures? ς0 Total amount paid for business \$0 Total amount paid for goodwill of the business Goodwill comprises the reputation and customer relationships of an existing business. If the price you pay for the business exceeds the fair market value of all of the rest of the assets of the business, the excess may be considered goodwill. 

# Goodwill comprises the reputation and customer relationships of an existing business. If the price you pay for the business except fair market value of all of the rest of the assets of the business, the excess may be considered goodwill. f) Have you made arrangements with the seller for payment of personal property taxes? No Yes Lease Information (New & Transfer Applicants who are leasing the premises only) a) Date lease begins 06/01/2022 Ends 05/31/2024 b) Monthly rental \$2500 c) Do you have an option to renew the lease? No Yes d) Does your lease allow for assignment to another party without the consent of the owner? No Yes e) For what length of time have you been guaranteed occupancy (number of years)? 2 YEARS

Leas	se Information (Continued)
f) g)	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? Rentally No Yes If yes, explain
Cha	nge of Agent Applicants Only
	ve there been any changes to the floor plan since the last application was submitted? No Yes o, a new floor plan is not required. If yes, submit a new floor plan and explain the change(s):
Sigr	nature
	ture of Sole Proprietor, Partner or 20% or More Shareholder 20% or more Shareholder, Corporate Officer - print name/title and sign)
	Note: All information contained in this application is subject to approval by the Common Council.  Deviating from approved plan of operation will subject licensee to citations, and/or suspension or non-renewal of the license.  Contact the License Division for information on how to request changes.
	New and transfer of premises applicants must submit the following:  Detailed floor plan  If a restaurant, copy of the menu



# FOOD DEALER LICENSE PLAN OF OPERATION

OFFICE OF THE CITY CLERK, LICENSE DIVISION
CITY HALL, 200 E. WELLS ST, ROOM 105, MILWAUKEE, WI 53202
(414) 286-2238 \* license@milwaukee.gov \* www.milwaukee.gov/license

Legal Entity Name: RESTAURANTE EL RINCONCITO DE RAFA, LLC
Premises Address: 2344 S 27TH ST, MILWAUKEE WI 53215
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: MEAT, CHEESE

ccl-foodplan 2/28/19

SECTION 4 DETAILS OF OPERATION
Will you have seating on site for dining? No 🔳 Yes
Will you be doing any catering?
Will you be doing any delivery?
Will you have outdoor activities? Yes - Check all that apply: Bar Cooking/Grilling Dining
Will you have a drive thru window?
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:  ADD COMMERCIAL STOVE AND GRILL
Start date: 06/01/2022
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:
RR I understand the Health Department must conduct an inspection and advise the License Division of their approval
before the license may be issued.
K   K   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.
R 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.
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.
R. A.I will not operate my food business until the license has been issued and posted in the establishment.



# WEIGHTS & MEASURES LICENSE SUPPLEMENTAL APPLICATION

OFFICE OF THE CITY CLERK, LICENSE DIVISION
CITY HALL, 200 E. WELLS ST, ROOM 105, MILWAUKEE, WI 53202
(414) 286-2238 \* license@milwaukee.gov \* www.milwaukee.gov/license

Office Us	se Only:
App#	
Filed	NAME OF THE PERSON OF THE PERS
Initials	
Paid	
Lic#	

Legal Entity Name:	RESTAURANTE EL	<b>RINCONCITO</b>	DE RAFA,	LLC
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Premise Address: 2344 S 27TH ST, MILWAUKEE WI 53215

### Device Type(s)

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

    If you have 1-3 scanners, the total due is \$130. If you have 4 or more scanners, the total due is \$250. Check the Number of Devices (b).

	Device Type	License Period	Fee Per Device Type (a)	Number of Devices (b)	Total Fee Per Device Type (a x b)
Ligu	divieasuring Devices			Lister Earling	
	Retail Petroleum Meters	12 months	\$60		
	0 to 30 gallons per minute	24 months	\$60		
	31 to 200 gallons per minute	24 months	\$250		
	Over 200 gallons per minute	24 months	\$250		
Scal	<b>15</b> (* )				
X	Measuring any weight amount	24 months	\$55	1	
Scar	ners	2.00	7 Fels for stapping	Enecking//meny	
	Up to 3 scanners	24 months	\$130 total*		
	Four or more scanners	24 months	\$250 total*	□4 □Other	
Oth	i Devices				
	Length Measuring Device	24 months	\$60		
	Timing Device	24 months	\$30		
				Total Fee Due	55.00

### Signature

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

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

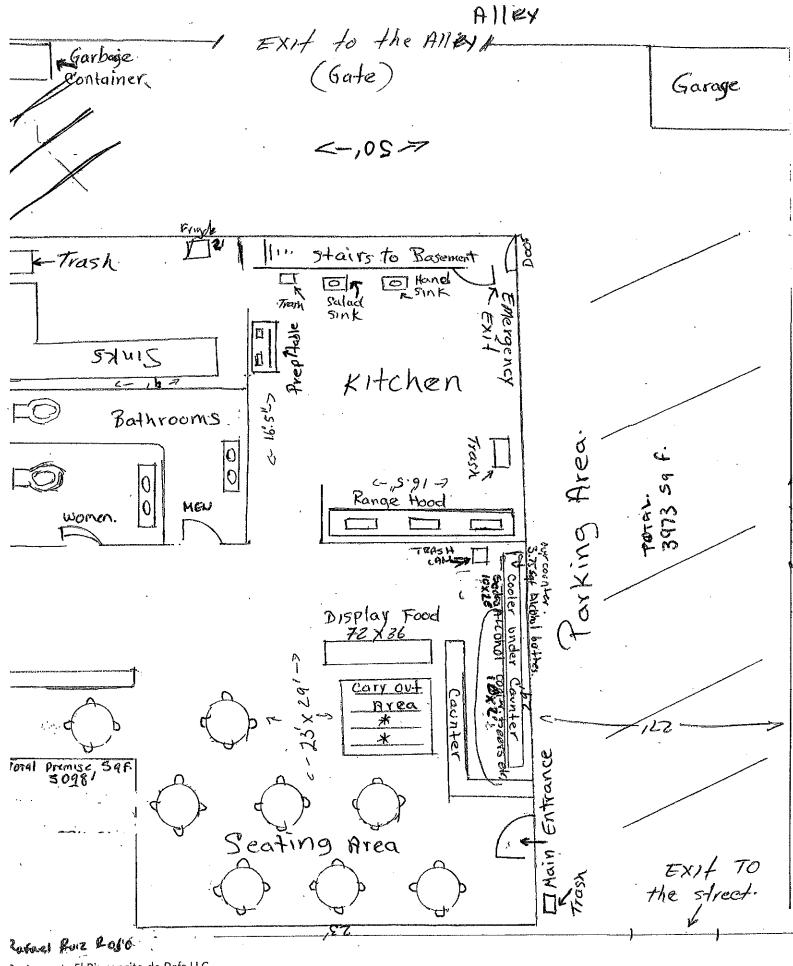
I understand that these device licenses are not transferable (with the exception of scanners). If the device is replaced or needs to be resealed, I must apply for and receive a new license so that an inspection of the device can be performed prior to its use. I acknowledge that as a condition of being issued this license, I must allow the Health Department into the establishment to test the device to validate its specifications/tolerances. If my devices are found out of compliance, I may be charged inspection fees. I have read, understand, and will adhere to all the above acknowledgments.

Signature of Sole Proprietor, Partner, or 20% or more Shareholder

(if there are no 20% or more shareholders, Corporate Officer-print name/title and sign)

Signature of additional partner or 20% or more shareholder

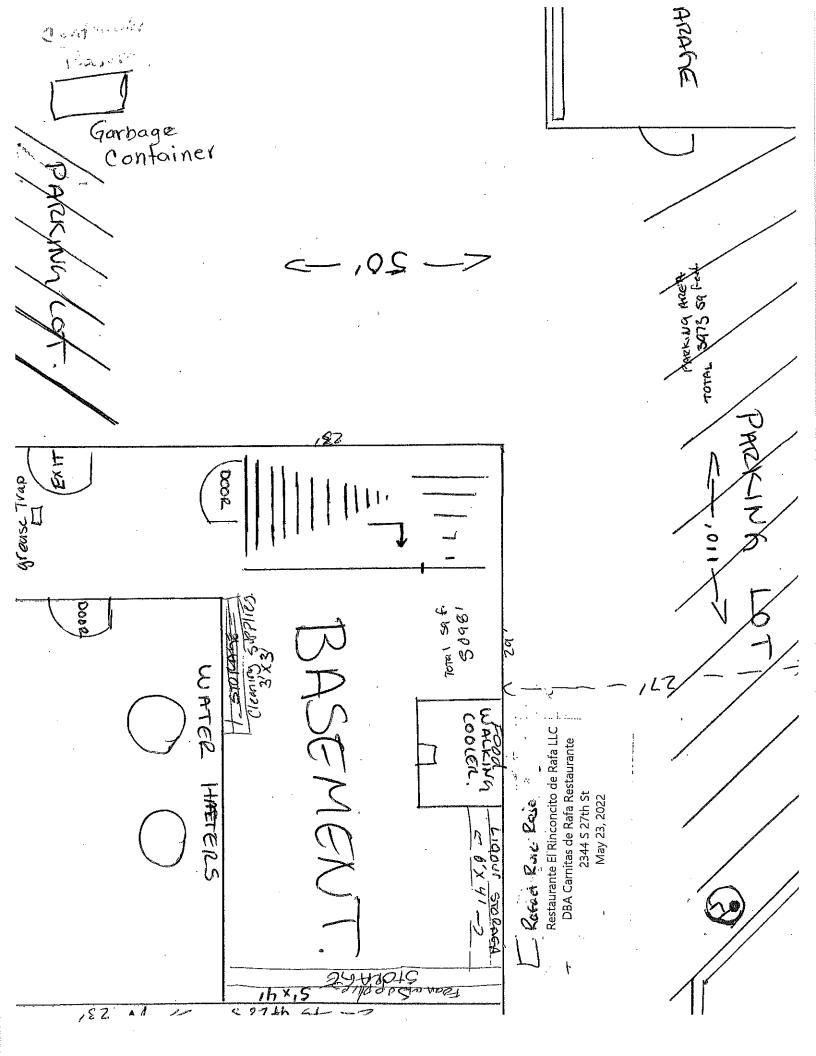
This form must be submitted with the Business License Application, Weights & Measures Plan of Operation, and appropriate fee. Forms can be obtained online at www.milwaukee.gov/licenses.



Restaurante El Rinconcito de Rafa LLC DBA Carnitas de Rafa Restaurante 2344 S 27th St May 23, 2022

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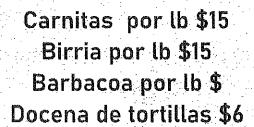
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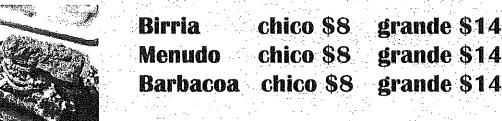








# Especialidades de la casa





# **Favoritos**

Taco de carnitas tortilla suave con carnitas, cebolla y cilantro \$3.50

Taco dorado tortilla dorada rellena con carne de molida de cerdo \$2.00

Taco dorado ahogado tortilla dorada rellena de carne molida de cerdo con carnitas salsa y lechuga \$3.00

Torta ahogada GDL birote relleno con carnitas, cebolla curtida, ahogada en salsa \$10.00

Quesadilla tortilla de harina con queso derretido \$3.00

Quesadilla Supreme tortilla de harina, queso y carne de su preferencia \$5.00 Quesabirria y consomé taco dorado de birria con queso derretido y taza de consomé\$8.00

Taco de barbacoa taco dorado de barbacoa, cebollas fritas \$3.50

Torta de barbacoa birote relleno con babacoa \$10.00

Burrito carne de su elección, arroz y fríjoles \$10.00



Chicharrón verde \$12 Chicharrón rojo \$12 Orden de Frijoles puercos \$6 Orden de arroz \$4 Orden de 3 tortillas \$2

