

## CITY OF MILWAUKEE OFFICE OF THE CITY CLERK

Wednesday, September 13, 2023

#### COMMITTEE MEETING NOTICE

**AD 15** 

BARNETT, Kevine J, Agent Yardies LLC 3536 N 99TH St Milwaukee, WI 53222

You are requested to attend a hearing which is to be held in Room 301-B, Third Floor, City Hall or you may attend virtually using the link below

#### Tuesday, September 26, 2023 at 10:05 AM

The access code is <a href="https://meet.goto.com/986783021">https://meet.goto.com/986783021</a>. If you wish to call in: +1 (408) 650-3123 and use Access Code: 986-783-021.

Please see the enclosed best practices document for further instructions.

Regarding:

Your Waiver Request of the Time Limit to Receive the Class B Tavern, Public Entertainment Premises and Food Dealer Licenses as agent for "Yardies LLC" for "Yardies" at 267 20th St.

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

Notice for applicants with warrants or unpaid fines:

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

Failure to appear at this meeting may result in the denial of your license. Individual applicants must appear only in person or by an attorney. Corporate or Limited Liability applicants must appear only by the agent designated on the application or by an attorney. Partnership applicants must appear by a partner listed on the application or by an attorney. If you wish to do so and at your own expense, you may be accompanied by an attorney of your choosing to represent you at this hearing. You will be given an opportunity to speak on behalf of the application and to respond and challenge any charges or reasons given for the denial. No petitions can be accepted by the committee, unless the people who signed the petition are present at the committee hearing and willing to testify. You may present witnesses under oath and you may also confront and cross-examine opposing witnesses under oath. If you have difficulty with the English language, you should bring an interpreter with you, at your expense, so that you can answer questions and participate in your hearing.

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

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

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

JIM OWCZARSKI, CITY CLERK

BY:

Jim Cooney

License Division Manager

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

Case 2010PA000321PJ Document 10

Filed 03-29-2023

Page 1 of 2

FILED 03-29-2023 Anna Maria Hodges Clerk of Circuit Court 2010PA000321PJ

DATE SIGNED: March 29, 2023

Electronically signed by David R. Pruhs Court Commissioner

## STATE OF WISCONSIN, CIRCUIT COURT, MILWAUKEE COUNTY

IN RE THE PATERNITY OF: KAHLON MONTRAL BARNETT

Order to Show Cause

STATE OF WISCONSIN, PETITIONER JACINDA R GATSON, RESPONDENT

10PA000321 PJ Court Case: Agency Order ID:4010PA000321 IV-D Case(s):

4424507

AND

KEVIN J BARNETT, RESPONDENT

For Official Use

August 30, 2000 e

Upon the attached affidavit, IT IS ORDERED:

KEVINE J BARNETT must appear

Date and Time:

Presiding Official:

ANA M BERRIOS

TELEPHONE

15 minutes before your hearing time, you must call 414-278-5169 (FCC1). The court will call you back from a blocked number when your hearing is ready to begin. Make sure your phone can accept calls from a blocked number.

DO NOT APPEAR AT THE COURTHOUSE.

You must appear and provide the court information about your compliance with the court order, including your ability to pay or otherwise comply with the order.

This is a contempt action and your ability to pay or otherwise comply with the order is the critical issue. You may provide the court information about your ability to pay or otherwise comply with the order, which may include paper documentation or testimony.

The Milwaukee County Clerk of Court is an equal opportunity service provider. If you need assistance to access services or need material in an alternate format, please call (414) 985-5757.

### YOU ARE NOTIFIED:

The court may impose one or more of the following sanctions, pursuant to Chapter 785, Wis. Stats., if you are found in contempt:

- payment of money to compensate for a loss resulting from the contempt;

- imprisonment for up to six (6) months or for so long as the contempt continues, whichever is shorter;

- a forfeiture of up to \$2,000 per day for each day of noncompliance;

Filed 03-29-2023

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FILED 03-29-2023 Anna Maria Hodges **Clerk of Circuit Court** 

2010PA000321PJ

### STATE OF WISCONSIN, CIRCUIT COURT, MILWAUKEE COUNTY

IN RE THE PATERNITY OF: KAHLON MONTRAL BARNETT STATE OF WISCONSIN, PETITIONER

Affidavit for Contempt

10PA000321 PJ Court Case: Agency Order ID: 4010PA000321 4424507 IV-D Case(s):

JACINDA R GATSON, RESPONDENT

AND

KEVIN J BARNETT, RESPONDENT

For Official Use

#### UNDER OATH I STATE:

I am a representative of the Milwaukee County Child Support Agency, which represents the State of Wisconsin, I do not represent any individual in this action.

The State of Wisconsin is a real party in interest in this case, pursuant to § 767.205(2), Wis. Stats.

According to the payment records maintained on the Kids information Data System (KIDS), KEVINE J BARNETT has failed to comply with the court order for support and owes an arrearage on this case.

The arrears, interest and fees as of March 20, 2023 are \$2,040.54, of which \$390.00 is owed to the State of Wisconsin.

KEVINE J BARNETT was previously ordered to pay \$35.31 per week toward current child support.

This affidavit is in support of the state's motion for contempt.

This affidavit is also in support of the state's request that KEVINE J BARNETT be ordered to participate in and comply with the provisions of the Children First program.

PARALEGAL

Subscribed and sworn to before me on

morch 21

Date

Notary Public, State of Wisconsin, County of MILWAUKEE

My commission (is permanent) (expires)

- an order designed to ensure compliance; and/or

- a different sanction if the court finds the other sanctions would not be effective to stop the contempt.

### KEVINE J BARNETT must produce at the hearing:

- a copy of his/her tax returns for the last two years;

- a wage statement from his/her employer for the eight weeks immediately preceding the date of this hearing;

- a statement of the receipt of any veteran's benefits or Social Security benefits;

- a statement of any unemployment or disability benefits that he/she is currently receiving;

- a statement of any other income that he/she receives;

- a completed financial disclosure form; and

- information about any health insurance available to cover his/her child(ren), including the types of insurance and costs for the single and family plan. This includes employer-sponsored health insurance, or health insurance available through another individual or organization. If KEVINE J BARNETT's child(ren) is/are already enrolled in a health insurance plan, he/she must bring proof of coverage such as an enrollment card or a copy of the policy.

KEVINE J BARNETT shall be personally served a copy of this order to show cause and annexed affidavit at least five (5) days before the hearing.

STATE OF WISCONSIN

**CIRCUIT COURT** 

MILWAUKEE COUNTY

IN RE THE PATERNITY OF: KAHLON MONTRAL BARNETT

NOTICE AND ORDER TO WITHDRAW WARRANT AND/OR ORDER TO APPEAR

STATE OF WISCONSIN, PETITIONER

JACINDA R GATSON, Respondent

AND

KEVINE J BARNETT, Co-Respondent

COURT CASE #10PA000321PJ IVD #4424507

FAMILY COURT: B

#### FINDINGS:

**KEVINE J BARNETT,** Respondent in the above case was seen by Milwaukee County Child Support Services, made a child support payment and provided employment information.

Respondent has been informed of the next court date and that, if he does not appear, the court may make orders that affect his interest or issue a new warrant for arrest. Child Support Services will send Court hearing notices to both parties.

Based upon the above, Milwaukee County Child Support Services has asked the Court to withdraw the outstanding bench warrant of **KEVINE J BARNETT**.

THE NEXT HEARING ON THE ABOVE REFERENCED CASE IS SCHEDULED TO BE HEARD BEFORE THE FAMILY COURT COMMISSIONER'S OFFICE, MILWAUKEE COUNTY COURTHOUSE, 901 North 9th Street, Milwaukee, Wisconsin, on the following date by TELEPHONE:

**DATE: AUGUST 30, 2023** 

TIME:\_\_1:15\_PM\_\_

FCC-1

VIA TELEPHONE: 15 MINUTES BEFORE YOUR HEARING TIME, PARTIES MUST CALL 414-278-5169 (FCC-1). THE COURT WILL CALL BACK FROM A BLOCKED NUMBER WHEN THE YOUR HEARING IS READY TO BEGIN. DO NOT APPEAR IN PERSON.

**ORDERS** 

The Warrant is withdrawn for KEVINE J BARNETT and he is ordered to appear as above.



## Office of the City Clerk License Division

Jim Owczarski City Clerk jowcza@milwaukee.gov

Jim Cooney License Division Manager Jim.cooney@milwaukee.gov

July 12, 2023

BARNETT, Kevine J 3536 N 99TH St Milwaukee, WI 53222

Dear License Applicant:

Your police report shows you have the following past due fines and/or outstanding warrants.

Entity: Yardies LLC

Warrant Type

Comments

Satisfied/Paid

The applicant has the following warrants with Walworth and Milwaukee County:

06PA139

Child Support 04/03/23

Body Only

2023004819

Child Support 05/04/23

\$100.00

Proof that the fines/warrants have been satisfied should be submitted to our office immediately. If you have a fine/warrant in the City of Milwaukee, you can contact (414) 286-3800 for payment information. If you dispute the fine/warrant information, contact the License Investigation Unit at (414) 935-7430.

Renewal Applicants: Failure to do so will result in you being scheduled to appear before the

Licenses Committee, and a possible denial of the renewal or lapse in your

license.

New Applicants: Failure to do so wi

Failure to do so will result in no further action being taken regarding your application. If you wish to pursue the license in the future and it has been over one year since the application was filed, you will be required to file a

new application.

Sincerely,

Carmen Roman

License Specialist III

Carre Rose



## MILWAUKEE POLICE DEPARTMENT LICENSING

### CRIMINAL RECORD/ORDINANCE VIOLATION/INCIDENTS SYNOPSIS

Date: 06/19/23 LICENSE TYPE: Class B Tavern New:  Renewal:	No. 320704 Application Date: 02/15/2021
License Location: 2679 N 30 <sup>th</sup> St Business Name: Yardies	
Licensee/Applicant: BARNETT, Kevine J (Last Name, First Name, MI)  Date of Birth: 05/26/1983	
Home Address: 4545 N 39 <sup>th</sup> St City: Milwaukee State: WI Home Phone:	<b>Zip Code</b> : 53209
This report is written by Police Officer Monreal, assigned	to the License Investigation Unit, Days.
The Milwaukee Police Department's investigation regardi	ng this application revealed the following:
On 06/29/2021 the applicant was charged in Milwai (Felony) and Obstructing an Officer (Misdemeanor)	
Charge 1: Harboring/Aiding a Felon 2: Obstructing an Officer Finding 1: Dismissed but Read in 2: Guilty Sentence: 1 year Probation Date: 06/13/2022 Case: 2021CF002619	
2. On 10/17/2021 the applicant was cited in the City o	f Milwaukee at 2911 N. 29 <sup>th</sup> St. for License

Establishment exceeding Occupancy and Smoking Prohibited.

Licensed Premise Exceeding Occupancy Charge 1:

**Smoking Prohibited** 

Finding: Guilty

Fine Charge #1 \*\*\*warrant status\*\*\* Sentence:

07/25/22 Date:

22000111, 22000112 Case:

3. The applicant has the following warrants with Walworth and Milwaukee County:

06PA139 2023004819 Child Support Child Support

04/03/23 05/04/23 Body Only \$100.00







## Notice of Public Hearing

Blank Notice

BARNETT, Kevine J, Agent Yardies at 2679 N 30th St

Waiver Request of the Time Limit to Receive the Class B Tavern, Public Entertainment Premises and Food Dealer Licenses

## Tuesday, September 26, 2023 at 10:05 AM

To whom it may concern:

The above application has been made by the above named applicant(s). This requires approval from the Licenses Committee and the Common Council of the City of Milwaukee. The hearing before the Licenses Committee will take place on 9/26/2023 at 10:05 AM in Room 301-B, Third Floor, City Hall. This is a public hearing. Those wishing to view the proceeding are able to do so via the City Channel – Channel 25 on Spectrum Cable – or on the Internet at http://city.milwaukee.gov/citychannel. Those wishing to provide oral testimony via phone or internet are asked to contact the staff assistant, Yadira Melendez at (414) 286-2775 or stasst5@milwaukee.gov for necessary information. Please make such requests no later than one business day prior to the start of the meeting. You are not required to attend the hearing, but please see the information below if you would like to provide testimony. Once the Licenses Committee makes its recommendation, this recommendation is forwarded to the full Common Council for approval at its next regularly scheduled hearing.

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

- 1. The license application is scheduled to be heard at the above time. Due to other hearings running longer than scheduled, you may have to wait some time to provide your testimony.
- 2. You must appear in person and testify as to matters that you have personally experienced or seen. (You cannot provide testimony for your neighbor, parent or anyone else; this is considered hearsay and cannot be considered by the committee.)
- 3. No letters or petitions can be accepted by the committee (unless the person who wrote the letter or the persons who signed the petition are present at the committee hearing and willing to testify).
- 4. Persons opposed to the license application are given the opportunity to testify first; supporters may testify after the opponents have finished.
- 5. When you are called to testify, you will be sworn in and asked to give your name, and address. (If your first and/or last names are uncommon please spell them.)

- 6. You may then provide testimony.
- a. Include only information relating to the above license application.
- b. Include only information you have personally witnessed or seen.
- c. Provide concise and relevant information detailing how this business has affected or may affect the peaceful enjoyment of your neighborhood.
- d. If by the time you have the opportunity to testify, the information you wish to share has already been provided to the committee, you may state that you agree with the previous testimony. Redundant or repetitive testimony will not assist the committee in making its recommendation.
- 7. After giving your testimony, the members of the Licenses Committee and the licensee may ask questions regarding the testimony you have given or other factors relating to the license application.
- 8. Business Competition is not a valid basis for denial or non-renewal of a license.

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

OCCUPANT	MAIL ADDRESS	CITY STATE ZIP
CURRENT OCCUPANT	2641 N 30TH ST	MILWAUKEE, WI 53210-2633
CURRENT OCCUPANT	2664 N 30TH ST	MILWAUKEE, WI 53210-2632
CURRENT OCCUPANT	2665 N 29TH ST	MILWAUKEE, WI 53210-2629
CURRENT OCCUPANT	2666 N 30TH ST	MILWAUKEE, WI 53210-2632
CURRENT OCCUPANT	2672 N 30TH ST	MILWAUKEE, WI 53210-2632
CURRENT OCCUPANT	2672A N 30TH ST	MILWAUKEE, WI 53210-2632
CURRENT OCCUPANT	2673 N 29TH ST	MILWAUKEE, WI 53210-2629
CURRENT OCCUPANT	2673A N 29TH ST	MILWAUKEE, WI 53210-2629
CURRENT OCCUPANT	2673B N 29TH ST	MILWAUKEE, WI 53210-2629
CURRENT OCCUPANT	2674 N 30TH ST	MILWAUKEE, WI 53210-2632
CURRENT OCCUPANT	3010 W PEMBERTON AVE	MILWAUKEE, WI 53210-2641
CURRENT OCCUPANT	3012 W PEMBERTON AVE	MILWAUKEE, WI 53210-2641

Blank Notice

Total Records: 12

Radius 250.0 feet and Center of the Circle: 2679 N 30th St

### ccl-busplan 5/12/2020



### **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. 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:
Tavern with tood service two story building with patro. Basement ased for liquor storage
Do you have any experience operating this type of business? \( \sum No \omega Yes \) If yes, explain: Wanage T. Lay's Lounge
2. Business Operations
a. Proposed Opening Date: 12-15-2020
b. Is this premise under construction? No 🗵 Yes If yes, list estimated completion date:
c. Is this a franchise? 🔀 No 🔲 Yes
d. Is this premises currently licensed? 🔀 No 🗌 Yes If yes, list type of license:
e. Is the current licensee operating? 📈 No 🗌 Yes If no, list date closed:
f. Do you have future plans for other businesses, licenses or permits at this location? 🔀 No 🗌 Yes
If yes, explain:
g. Have you previously held an Extended Hours License in Milwaukee? X 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? X Sweep Pressure Wash Pick Up Litter Other:
b. How often will grounds be cleaned? Daily Weekly As Needed Monthly Other:
c. Grounds cleaned by: KLicensee Building Owner KEmployees 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? \(\sigma\) No \(\sigma\) Yes If yes, describe: \(\subseteq\) When hosting \(\sigma\).
4. Smoking & Sanitation
a. Are there designated outdoor smoking areas? No Yes If yes, describe: Back Patro
b. Number of Garbage Cans: Inside: B Locations: behind bars, balarooms by expires
Outside: 2 Locations: Patto
c. Is a crowd control barrier used? \( \sum \) No \( \sum \) Yes If yes, describe: \( \begin{array}{c} \alpha \text{ Area fenced in } \end{array} \)
d. How many restrooms are on the premises?
e. Name of solid waste contractor: Advanced Disposal Waste Management Stother: Fagle DISPOSA

5. Security						
	a. Are there onsite parking spaces? No 🛛 Yes If yes, how many? 🧏 and describe the parking security					
• • • • • • • • • • • • • • • • • • • •	plan: there will be cameras					
b. Is there a loading zone?	through back patho door. There will be security plan: the loading will be through back patho door. There will be security cameras. Area has fence					
c. Will you have security per	sonnel on premise?	No Yes	if yes, how many?	-4 an	d answer the following:	
			, ID sheck, see	curity	overall	
	ent used? 🗌 No 🔘 Ye			l- 00 0	0.000./	
List their licensing,	certification, or training	credentials	training through	in Cun	ayang	
d. Will there be security cam OUTSIDE, 2 PARKIN	neras? □No XI Yes <u>a , 2 patro, 8 1</u>	If yes, how i	nany? <u>16</u> and list lo	cations: _	perimeter of building	
e. Will searches/Identification	ر ر on checks be done upon	entry? 🔲 N	√o X Yes If yes, describe	<u>:10ch</u>	eck and wand	
6. Percentage of Sales						
Alcohol	Food <u>15</u>	%	Secondhand Merchandise		Precious Metals & Gems	
Entertainment	Cigarettes	<u>%</u>	%		%	
	Salvaged Materials	%	Personal Services (such as t		Other%	
Pawnbroker Activity%	(such as scrap metal)		body piercing, salon, tailor, tanning, etc.)%		Describe:	
7. Businesses/Licenses	on the Premises	s (check a	all that apply):			
Type 1	Coto/Cotton Chan	□ nakaar			Trucks and high and Clark	
Full Service Restaurant	☐ Cafe/Coffee Shop		_		/Fraternal/Veterans Club	
☐ Night Club	Tavern	Cocktail			up	
			Bowling Alley  Rooming House: Number of Floars:			
1 -	oms:	Rooming House: Number of Floors:  Number of Rooms:				
Type 2						
Liquor Store	☐ Corner Store ☐ Supermarket		arket [	Conven	lence Store	
Gas Station	Amusement/Phonograph Distribut		cor [	Recycling, Salvage or Towing		
Used Car Dealer	Personal Service Establishment (such as tattoo business, hair saloi		n, tallor, etc.)	Recording Studio		
What other licenses/permits will y	you hold at this location? (	check all that	apply)			
⊠Occupancy Permit ⊠C	igarette & Tobacco ☐Ga	s 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 285 (Call the	2 Milwaukee Development	: Center at 41	4-286-8211 If you have quest	tions.)		

		·				
9. Premises D	escription					
a. Identify all area মি1 <sup>st</sup> Floor মি	a(s) of the premises that will 2 <sup>nd</sup> Floor KiBasement Stora	be used in operating this busings	siness (include areas used n □Sidewalk Café □D	only for storage eck □Rooftop	);	
□Other: Descr						
b. Describe Locati	ion: 🔀 Major Thoroughfare	Secondary Street Ot	her: W Center a	and $N 30$	th street	
c. Nearest Major	Cross Street: Fond du	Lac Avenue				
	ng: 💢 Free Standing Buildir					
	ises Structure: 🔲 Single Sto	• • • • • • • • • • • • • • • • • • • •		***************************************	·	
f. Describe Surro	unding Area: Commercia	I 🗌 Residential 🔀 Industr	ial 🗌 Other:			
g. Building Owner Name: Tarna, Collins Phone Number: 414-397-3906  Building Owner Address: 3536 N 99th Street, Milwayke, WI 53222						
and the second second	peration & Custor					
Will customers be ent	ering the premises? 🔲 No	<b>⊠</b> ,Yes			·	
Day of the Week	Proposed Hour	s of Operation:	Estimated Number of Customers	Potential Age Range	Class B Tavern Applicant Only:	
Day of the work	Open Time (include a.m. or p.m.)	Close Time (include a.m. or p.m.)	expected each day	of Customers	Age Restriction (If none, write 'None')	
Sunday	Gam	2am	90	21-45	21-45	
Monday	Gam	2 am	140	21-45	21-45	
Tuesday	Gam	2 am	140	21-45	21-45	
Wednesday	Gam	2 am	90	21-45	21-45	
Thursday	G am	2 am	90	21-45	21-45	
Friday	Gam	2:30 am	280	21-45	21-45	
Saturday	6 am	2:30 am	280	21-45	21-45	
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 Establishmen Permitted Hours of O		am to 9:00 pm Sunday thru am to 2:00 am Sunday thru		0 am Friday & Sa	turday	
Entertainment Outdo		Opm Sunday-Thursday; 12:0 tablished by the Common Co				
11. Signature	(s)					
(If there are no 2	Parthett prietor, Parther, or 20% or m 0% or more shareholders, r-print name/title and sign)	ore Shareholder	Signature of additional p	partner or 20% or	more shareholder	



# 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

regai	Entity Name: Yardies LLC	
Prem	ise Address: 2679 N 3041 Str	ect, Milwaukee
Prox	dimity of Premises to Church, School	ol, Daycare Center or Hospital
Is th	e building within 300 feet of any church, school, dayca	re center or hospital? 📈 No 🔲 Yes
"Ser	vice Bar Only" Designation	
	plying for Class B or Clicense, are you applying for "Se	
Serv No :	rice Bar Only means customers cannot sit at the bar. A stools, chairs or other articles of furniture shall be place	lcohol is served to employees who serve patrons seated at tables. ed at the service bar for patrons to sit upon.
Bus	iness Information	
a)	Are you taking out this application for anyone that ma	ay not be eligible for a license? 💹 No 🗌 Yes
b)	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? \(\bigcap\) No \(\bigcap\) Yes
- 12)		will:
	Class B Applicants: If the agent, a partner or the inc	lividual licensee will not be conducting the day-to-day operations of the business,
	the person(s) listed above must obtain a Class B Man	agers license.
c)	Does anyone else have money invested or any other if yes, explain:	interest in this business?   M NO   Yes
d}	Have you made an agreement with anyone to repay a	any loan or any other payments based upon income from the business?
	No Yes If yes, list name and address:	
Pro	No Yes If yes, list name and address: perty information (New & Transfe	
Pro a)		
	perty information (New & Transfe	r Applicants Only)
a)	perty information (New & Transfe	r Applicants Only) □own ⊠tease
a) b)	perty information (New & Transfer Do you own or lease the building? Who owns the fixtures (for example, coolers, etc.)?	r Applicants Only) □Own ⊠Lease ○DW∩
a) b) c)	perty information (New & Transfel Do you own or lease the building? Who owns the fixtures (for example, coolers, etc.)? Are you purchasing the stock and/or fixtures?	r Applicants Only) □Own ⊠Lease ○DW∩
a) b) c) d)	perty information (New & Transference)  Do you own or lease the building?  Who owns the fixtures (for example, coolers, etc.)?  Are you purchasing the stock and/or fixtures?  Total amount paid for business  Total amount paid for goodwill of the business	r Applicants Only)  □ Own □ Lease □ DW∩ □ No □ Yes If yes, amount paid \$ \$ □ 0 \$ □ O  stationships of an existing business. If the price you pay for the business exceeds the
a) b) c) d)	perty information (New & Transference)  Do you own or lease the building?  Who owns the fixtures (for example, coolers, etc.)?  Are you purchasing the stock and/or fixtures?  Total amount paid for business  Total amount paid for goodwill of the business  Goodwill comprises the reputation and customer relations.	TApplicants Only)  Own Atease  OWN  No Ayes If yes, amount paid \$ \$ \$  \$  O \$  Stationships of an existing business. If the price you pay for the business exceeds the e business, the excess may be considered goodwill.
a) b) c) d) e)	perty information (New & Transfer Do you own or lease the building? Who owns the fixtures (for example, coolers, etc.)? Are you purchasing the stock and/or fixtures? Total amount paid for business Total amount paid for goodwill of the business Goodwill comprises the reputation and customer relair market value of all of the rest of the assets of the	TApplicants Only)  Own Atease  OWN  No Ayes If yes, amount paid \$ \$ \$  \$  O \$  Stationships of an existing business. If the price you pay for the business exceeds the e business, the excess may be considered goodwill.
a) b) c) d) e)	Do you own or lease the building? Who owns the fixtures (for example, coolers, etc.)? Are you purchasing the stock and/or fixtures? Total amount paid for business Total amount paid for goodwill of the business Goodwill comprises the reputation and customer relair market value of all of the rest of the assets of the Have you made arrangements with the seller for pay	TApplicants Only)  Own Atease  OWN  No Ayes If yes, amount paid \$ \$ \$ \$ \$ \$ \$ O \$  Stationships of an existing business. If the price you pay for the business exceeds the business, the excess may be considered goodwill.  In the price you pay for the business exceeds the position of personal property taxes?  In the price you pay for the business exceeds the position of personal property taxes?  In the price you pay for the business exceeds the position of personal property taxes?  In the price you pay for the business exceeds the position of personal property taxes?  In the price you pay for the business exceeds the position of personal property taxes?  In the price you pay for the business exceeds the position of personal property taxes?  In the price you pay for the business exceeds the position of personal property taxes?  In the price you pay for the business exceeds the position of personal property taxes?  In the price you pay for the business exceeds the position of personal property taxes?  In the price you pay for the business exceeds the position of personal property taxes?  In the price you pay for the business exceeds the personal property taxes?  In the price you pay for the business exceeds the personal property taxes?  In the price you pay for the business exceeds the personal property taxes?  In the price you pay for the business exceeds the personal property taxes?  In the price you pay for the business exceeds the personal property taxes?  In the price you pay for the business exceeds the personal property taxes?  In the price you pay for the business exceeds the personal property taxes?
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a) b) c) d) e) f) Lea a) b) c)	Do you own or lease the building?  Who owns the fixtures (for example, coolers, etc.)?  Are you purchasing the stock and/or fixtures?  Total amount paid for business  Total amount paid for goodwill of the business  Goodwill comprises the reputation and customer relair market value of all of the rest of the assets of the Have you made arrangements with the seller for pay use Information (New & Transfer A)  Date lease begins 8/1/2020 Ends 8/3  Monthly rental \$ 1000.00	r Applicants Only)  Own Alease OWO No Alease \$ O \$ \$ O \$  Stationships of an existing business. If the price you pay for the business exceeds the e business, the excess may be considered goodwill.  Imment of personal property taxes? No Yes  Poplicants who are leasing the premises only)  Yes
a) b) c) d) e) f) Lea a) b) c) d)	Do you own or lease the building?  Who owns the fixtures (for example, coolers, etc.)?  Are you purchasing the stock and/or fixtures?  Total amount paid for business  Total amount paid for goodwill of the business  Goodwill comprises the reputation and customer relair market value of all of the rest of the assets of the Have you made arrangements with the seller for pay  ISE Information (New & Transfer A)  Date lease begins 8/1/2020 Ends 8/3  Monthly rental \$ 1000.00  Do you have an option to renew the lease? \( \square\$ No \( \square\$ Does your lease allow for assignment to another par	r Applicants Only)  Own Atease OWO No Ayes If yes, amount paid \$ \$ \$ O \$ Attionships of an existing business. If the price you pay for the business exceeds the e business, the excess may be considered goodwill.  Interpretation of personal property taxes?  No Ayes  Poplicants who are leasing the premises only)  Yes  Yes  Yes  Yes
a) b) c) d) e) f) Lea a) b) c)	Do you own or lease the building?  Who owns the fixtures (for example, coolers, etc.)?  Are you purchasing the stock and/or fixtures?  Total amount paid for business  Total amount paid for goodwill of the business  Goodwill comprises the reputation and customer relair market value of all of the rest of the assets of the Have you made arrangements with the seller for pay use Information (New & Transfer A)  Date lease begins 8/1/2020 Ends 8/3  Monthly rental \$ 1000.00	r Applicants Only)  Own Atease OWO No Ayes If yes, amount paid \$ \$ \$ O \$ Attionships of an existing business. If the price you pay for the business exceeds the e business, the excess may be considered goodwill.  Interpretation of personal property taxes?  No Ayes  Poplicants who are leasing the premises only)  Yes  Yes  Yes  Yes

Lea	se 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? X No Yes If yes, explain sdigsdig
g)	Does the present owner or occupancy object to the granting of your license? XNo Yes  If yes, explain sulpsulg
Cha	ange of Agent Applicants Only
lfr	eve there been any changes to the floor plan since the last application was submitted? No Yes no, a new floor plan is not required. If yes, submit a new floor plan and explain the change(s):  (Gosdf
Sig	nature
	Ky xine Barne / /- ature of Sole Proprietor, Partner or 20% or More Shareholder o 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



# 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 e-mall address: license@milwaukee.gov

PREMISES ADDRESS: 2679	N 30th Strect,	Milwaukee		
TYPES OF ENTERTAINMENT (CH	ECK ALL THAT APPLY)			
Instrumental Musicians	Battle of the Bands	Dancing by Performers	Amusement Machines How many?	
Bands	Comedy Acts	Adult Entertainment/ Strippers/Erotic Dance	Concerts Approx. # per year?	
☐ Bowling Alley How many?	X Disc Jockey	Wresting	Theatrical Performances Approx. # per year?	
X  Pool Tables   How many?	Magic Shows	Patron Contests	☑ Jukebox	
Motion Pictures (movies by admission) - How many?	Poetry Readings	Patrons Dancing	Karaoke	
Other:				
Entertainment Outdoor Closing Hours:		m Friday & Saturday; unless a different time cil in its approval of the licensee's plan of o		
PROMOTERS/SOUND AMPLIFIC	ATION			
Will promoters ever be used for any of	the entertainment? 🔲 No 🗌			
1				
At any time will sound amplification be	used? [] No.[X] Yes If Yes, De	escribe: Who ? West of the		
LEGAL CAPACITY OF PREMISES				
Premises License. If you would like to r	equest the license be approved is lower capacity will print on yo	our license and override the capacity lis	bove, indicate the lower capacity	
ACKNOWLEDGEMENT/SIGNATU	Committee of the commit			
I understand that after the license has the Common Council. I agree to inform I understand that I shall not willfully re the general public because of race, cole orientation, gender identity or express dressed in uniform or not; and shall no selection of personnel for training or p	nthe City Clerk within 10 days of fuse to provide the services offer or, sex, religion, national origin o ion, familial status or the fact tha t seek such information as a con	any substantial changes in the Informa red under this license, or add charges o or ancestry, age, handicap, lawful sourc at a person is now or has been a memb dition of employment, or penalize any	ation supplied in this application.  or require deposits not required of the of income, marital status, sexual ther of the military service, whether	
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.				
Kevine BarnetT				
Signature of Sole Proprietor, Partner o (If no 20% or more Shareholder, Corpo	r 20% or More Shareholder rate Officer - print name/title ar	nd sign)		
Office Use Only: Initials: Filed: Fil	App : ☐Queue to MPD and ☐Em	ail Mgrs/Team Lead (must be hear	d w/in 60 days)	



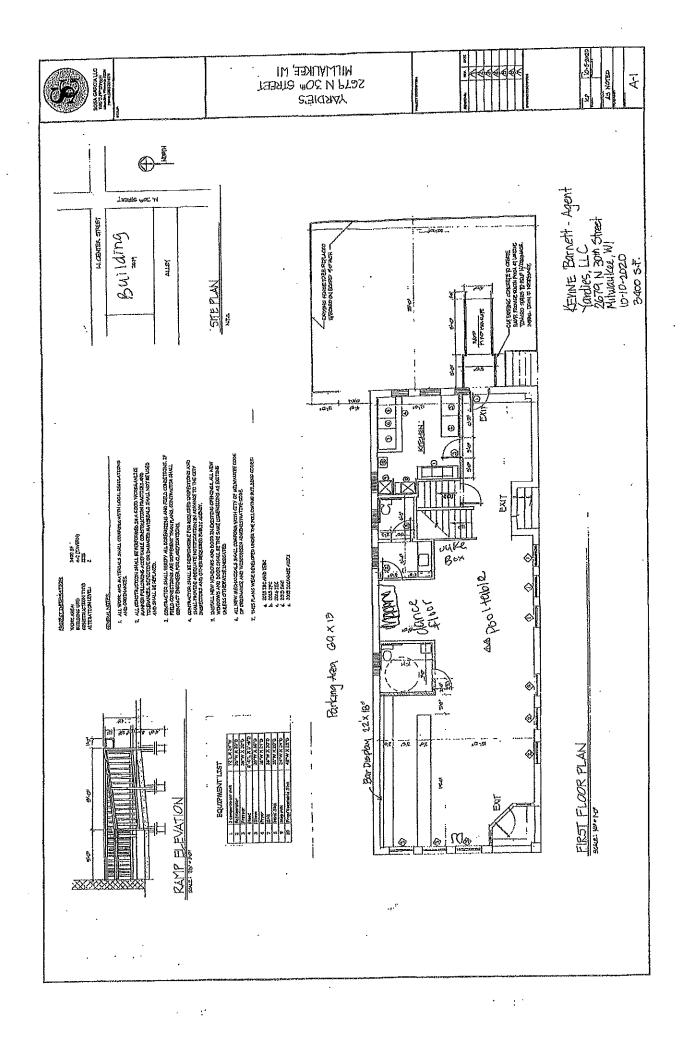
## FOOD DEALER LICENSE PLAN OF OPERATION

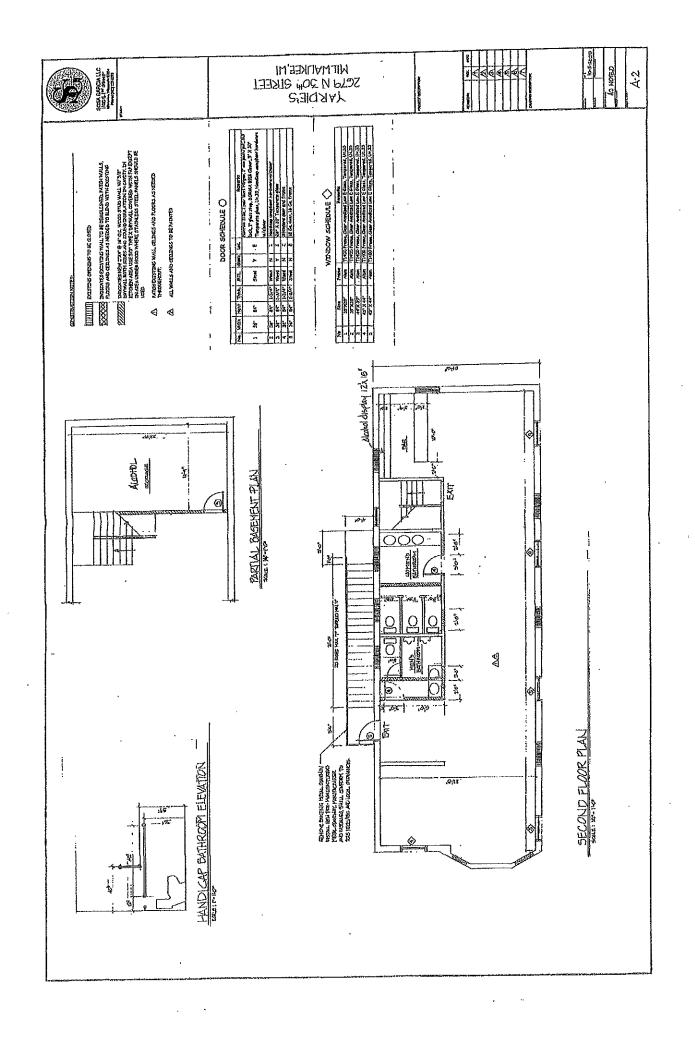
OFFICE OF THE CITY CLERK, LICENSE DIVISION
CITY HALL, 200 E. WELLS ST, ROOM 105, MILWAUKEE, WI 53202
{414} 286-2238 • license@milwaukee.gov \* www.milwaukee.gov/license

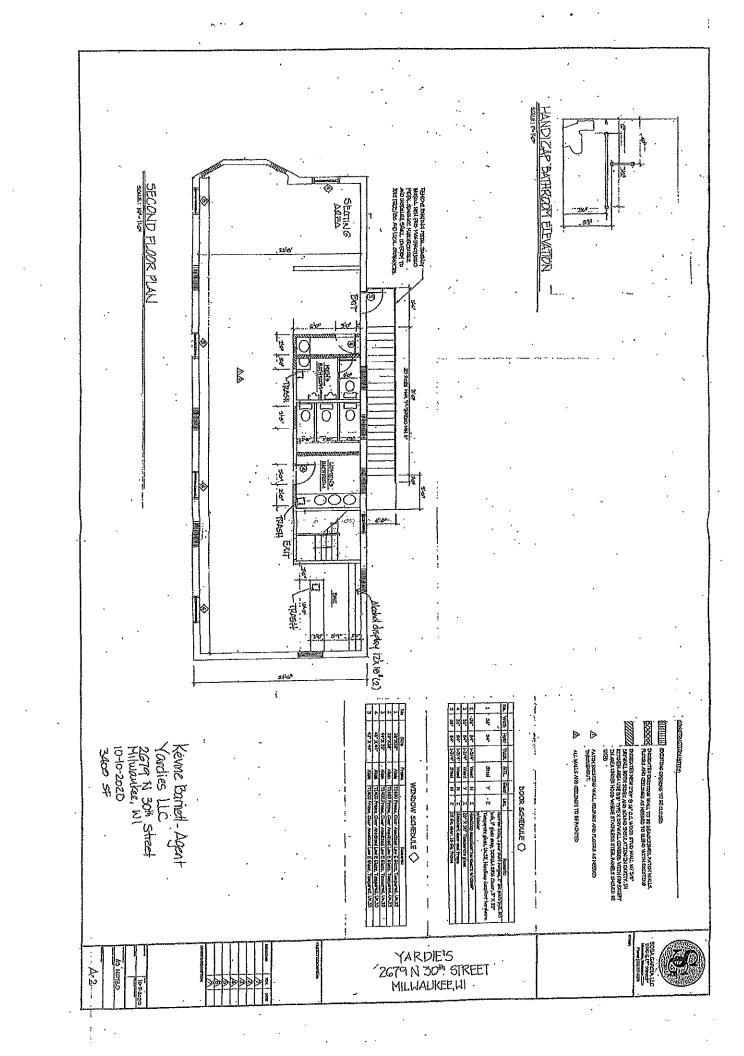
Legal Entity Name: Yardies LLC
Premises Address: 2679 N 30th Street, Milwaukee, WI
SECTION 1 TYPE OF BUSINESS
What will be the majority of your food sales? (check one)
Restaurant Items (meals):  MEALS include, but are not limited to, chicken, ribs, sandwiches, roasted corn, baked potatoes, hot dogs, 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 X 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 X Yes (includes dairy products such as milk, cheese, and ice cream, fish, shellfish, meat, poultry)
If yes, list the types of food items: Meat, poultry, lamb, fish, Shellfish

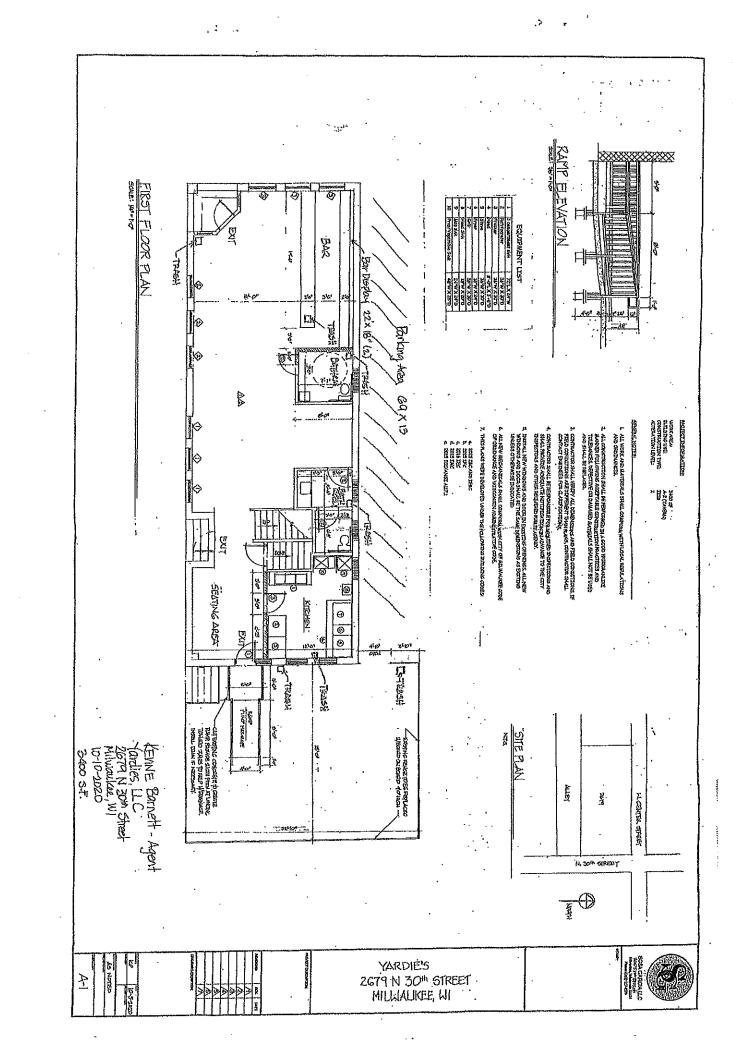
ccl-foodplan 2/28/19

SECTION 4 DETAILS OF OPERATION	
Will you have seating on site for dining? 🔲 No 💢 Yes	٦
Will you be doing any catering? 🔀 No 🗌 Yes	-
Will you be doing any delivery? Yes	
Will you have outdoor activities? ☐ No ☐ Yes - Check all that apply: ☐ Bar ☐ Cooking/Grilling ☐ Dining	
Will you have a drive thru window? X No Yes - Are hours different from inside? No Yes	
If Yes, provide drive thru hours:	١
Will scales or barcode scanners be used? No Yes - You must also apply for a Welghts & Measures License.	
SECTION 5 ADDITIONAL SITES	
Where will food be prepared and/or sold?	1
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	
Provide a brief description of the changes: A New Kitchen will be installed	
Start date:	
Name, Address & Phone Number of Architect:	
Name, Address & Phone Number of Contractor:	
Harris A Chore Harris of Contractors	
SECTION 7 ALCOHOL BEVERAGES	•
Are you applying for an alcohol beverage license?	<del></del>
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:	
LI understand the Health Department must conduct an inspection and advise the License Division of their approval	
before the license may be issued.    B   Understand   I must obtain an occupancy permit from the Department of Neighborhood Services and an inspection	
1 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.    Understand the district alderperson will review and either support or object to my application. If he/she objects,	
I understand the district alderperson will review and either support or object to my application. If he/she objects, may appeal and be scheduled to appear before the Licenses Committee. The Licenses Committee will then make a	I
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.	
issued and the license must be issued and posted in my establishment prior to opening for business.  I will not operate my food business until the license has been issued and posted in the establishment.	
issued and the license must be issued and posted in my establishment prior to opening for business.	









Royne Barnett - Lyon Yourles ILC 2679 N 304 Sheet Hillwanker, WI 10-10-20 SARD SF.

YARDIE'S '2G79 N 30"! STREET MILWAUKEE,WI



Karla Priest FullSizeRender.jpeg Aug 7, 2020 at 2113:57 PM Karla Priest

## Yardies Menu

Oxtails
Stew pork
Stew peas
Curry goat
Jerk chicken
Fried chicken
Curry chicken
Ackee and salt fish
Brown stew chicken

SIDES Festival Plantain

Poridge

Cabbage

White rice

Jerk egg rolls