

CITY OF MILWAUKEE OFFICE OF THE CITY CLERK

Monday, April 14, 2025

COMMITTEE MEETING NOTICE

AD 11

BECKLUND, Oscar E, Agent OZ DOGGZ LLC 3135 S 92ND ST Milwaukee, WI 53227

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, April 29, 2025 at 09:35 AM

The access code is https://meet.goto.com/329456501. Please see the enclosed best practices document for further instructions.

Regarding: Your Food Dealer and Food Peddler Licenses Application as agent for "Oz D D LLC" for "Oz Doggz" at 3135 S 92nd 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 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.

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

Richardson, Tonja

From: Sent: To: Subject: License Thursday, March 27, 2025 10:56 AM Richardson, Tonja FW: Oz Doggz - 3135 S 92nd - No LLC

Please add objection and confirm with Health that it has been added

Marissa Milano She/her/hers License Coordinator City Clerk-License Division 200 E Wells St #105 www.milwaukee.gov/license



Take Our Survey!

From: Castillo, Kristin <kcasti@milwaukee.gov>
Sent: Wednesday, March 26, 2025 11:00 AM
To: License <LICENSE@milwaukee.gov>; Cooney, Jim <Jim.Cooney@milwaukee.gov>; Lopez, Faviola
<Faviola.Martin@milwaukee.gov>
Cc: CEHSupervisor <CEHSupervisor@milwaukee.gov>; Langosch, Courtney <clango@milwaukee.gov>
Subject: Oz Doggz - 3135 S 92nd - No LLC

Не

We would like to put in an objection for Oscar Beaklund of Oz Doggz, LLC. who used to operate out of 8412 W Morgan Ave. previously Cinco de Mayo.

We issued a citation to Oscar yesterday for operating his hot dog cart without a license at this usual spot on 16/Wells. He has been issued several orders to cease for various issues since opening in 2023, yet more specifically in 2024, he has been operating without a license.

He has a current application in to use the base kitchen, Mo's Chicken Shack, at 3135 S 92nd St and has listed this Oz Doggz, LLC on the application. We checked DFI and his Oz Doggz, LLC has been administratively dissolved. Can you please verify he has an active LLC ?

Our process server will be serving at his home residence that we gave us yesterday which is the same as his application.

Let me know if you have questions, Thanks!

Kristin Castillo, REHS

Consumer Environmental Health Manager City of Milwaukee Health Department 841. N Broadway Ave. 3rd Floor Milwaukee, WI 53202 c. 414-323-9495

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NOTICE: This e-mail and any attachments may contain confidential information. Use and further disclosure of the information by the recipient must be consistent with applicable laws, regulations, and agreements. If you received this e-mail in error, please notify the sender; delete the e-mail; and do not use, disclose, or store the information it contains. This communication and any attachment(s) may include information that is protected from disclosure under the Freedom of Information Act, 5 U.S.C. § 552, or excepted from disclosure under the Wisconsin Public Records Law, Wis. Stat. §§ 19.31-19.39.

MILWAUKEE POLICE DEPARTMENT LICENSING

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CRIMINAL RECORD/ORDINANCE VIOLATION/INCIDENTS SYNOPSIS

DATE: 03/19/25 LICENSE TYPE: FOOD NEW: RENEWAL:

No. 378221 Application Date:

License Location: 3135 S 92nd St **Business Name:** Oz Doggz

Licensee/Applicant: Becklund, Oscar (Last Name, First Name, Mi) Date of Birth: 09/04/73

Home Address: 4210 S 61st ST City: Greenfield Home Phone:

State: WI Zip Code: 53220

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

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

- 1. On 11/01/20, the applicant was charged with OWI in Milwaukee Municipal Court. On 12/02/20, he was convicted and his license was revoked for 8 months.
- 2. On 04/05/23, the applicant was cited at N. 4th St., and W. Highland Av., for Food Dealer License Required.

Charge:Food Dealer License RequiredFinding:GuiltySentence:FineDate:07/13/23Case:23013202



Monday, April 14, 2025



Notice of Public Hearing

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BECKLUND, Oscar E, Agent Oz Doggz at 3135 S 92nd St Food Dealer and Food Peddler Licenses Application

Tuesday, April 29, 2025 at 9:35 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 4/29/2025 at 9:35 AM in Room 301-B, Third Floor, City Hall. This is a public hearing. Those wishing to view the proceeding are able to do so via the City Channel – Channel 25 on Spectrum Cable – or on the Internet at http://city.milwaukee.gov/citychannel. Those wishing to provide oral testimony via internet are asked to contact the staff assistant, Yadira Melendez at (414) 286-2775 or stasst5@milwaukee.gov 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
CURRENT OCCUPANT	3105 S 92ND ST
CURRENT OCCUPANT	3105A S 92ND ST
CURRENT OCCUPANT	3115 S 92ND ST
CURRENT OCCUPANT	9215A W OKLAHOMA AVE
Blank Notice	

CITY STATE ZIP MILWAUKEE, WI 53227-4411 MILWAUKEE, WI 53227-4411 MILWAUKEE, WI 53227-4411 MILWAUKEE, WI 53227-4316

Total Records: 4

Radius 250 and Center of the Circle: 3135 S 92nd St

ccl-amend 9/10/18



APPLICATION AMENDMENT

Office of the City Clerk License Division

200 E. Wells Street, Room 105, Milwaukee, WI 53202 (414) 286-2238

Date: 3-16-25

To the License Division of the City of Milwaukee:

bear E Beeklund , wish to amend my answer(s) on the application for a <u>т</u>, ((fuli legal name) license at ______ 8412 W. Moregan Ave Milwankee, WI 53228 (premises address, if applicable) (type of license)

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

LC Email: MPD NS HD Initials: _

1,	1. Answer to Question(s) # should be:	
2.	2. Agent should be (full legal name):	Also complete 3, 4, 5 & 6
3.	3. Date of birth should be:	
4.	 Home address should be (include city/state/zip): 	<u>.</u>
5.	5. Phone number should be (include area code):	
6.	6. Driver's License Number/State ID Number should be:	<u> </u>
7.	7. Corporation/LLC name should be (full legal name):	
8.	8. Business name should be:	
9.	9. Premises address should be (include city/state/zip):	
10.		
11.		
12.	12. Email address should be:	
13.	13. Recycling/Salvaging/Towing: Location where vehicle will be parked should be (inclu	ide city/state/zip):
14. 15.		5 5 92 nd St
	(Check with the License Division before submitting "Other" amendments using this form.)	Here wi Jodd/
	Signature of Licensee (Individual, Pa	artner, or Agent of Corp/LLC)
Offi	Office Use Only: Application #: 37822 Date: 31925 Initials: 7	Г То LC:



FOOD DEALER LICENSE APPLICATION FOR SHARED KITCHEN USERS

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

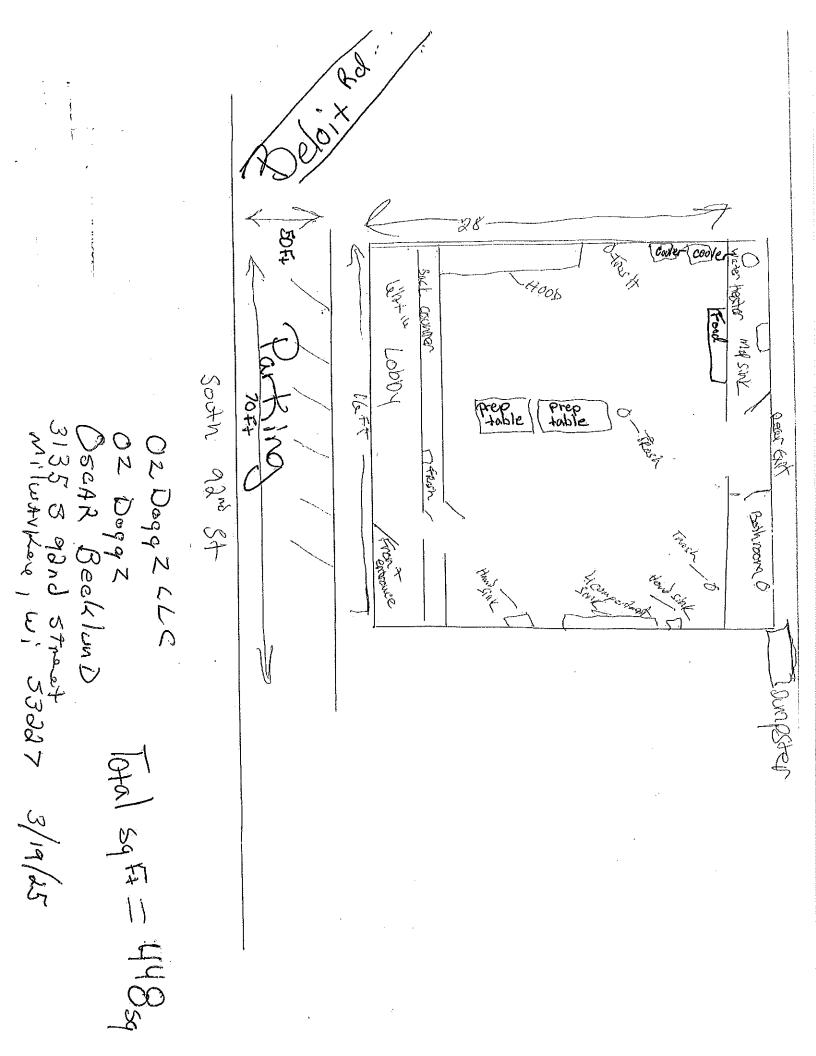
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Legal Entity Name (Individual, Partnership, Corp or LLC):	02 Deggz LLC	
Business Name: Oz Dogg Z	° / /	
Business Name: Oz Doggz Premises (Shared Kitchen) Address: 3135 5. 92nJ S	Int Milesuker 53227	
BUSINESS OPERATIONS		
Base for Mobile Vendor (Peddler) 🔲 Base for Temporary Event 🗌 Cate	erer 🔲 Other:	
FOOD PROCESSING		
What type of food items will be sold?		
Restaurant Items (meals): MEALS include, but are not limited to, chicken, ribs, sandwiches, roasted cor French fries, cooked or deep fried vegetables/fruit, cooked cheese curds, cor What percent of food items will be meals?%		
Retail Items (snacks and beverages): RETAIL items include, but are not limited to, ice cream/soft serve, lemonade candy, dispensed soda, fruit cups, bakery, cookies, kettle corn, cotton candy, What percent of food items will be retail?%		
All Applicants: Submit a menu or a list of food items sold.		
Will any food processing be done at the shared kitchen? 🗖 No 🗌 Yes Processing is defined as assembling, grinding, cutting, mixing, baking, coatin distilling, pickling, freezing, drying, smoking, or packaging.	g, stuffing, packing, bottling, grilling, canning, extracting, fermenting,	
Will any food that requires temperature control be sold? No 🔀 Yes (includes dairy products such as milk, cheese, and ice cream, fish, shellfish, r	neat, poultry)	
If yes, list the types of food items: <u>SAUSages + Hot</u> D.	»q5	
PLAN OF OPERATION		
a. How are grounds kept clean? 🗌 Sweep 🔲 Pressure Wash 🕅 Pick l	Jp 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 🕅 Call Police Signs Posted Other:		
e. Will a sound amplification system be used? 🔀 No 🗌 Yes If yes, describe:		
f. Number of Garbage Cans: Inside: Locations: Outside: Locations:6*#	Wisconsin/3135 59210 ST	
g. Name of solid waste contractor: Advanced Disposal Waste Man	agementOther:	
h. Is there a loading zone?	and list locations: 16th + Wrseensin/3135	

ccl-foodshareda	pp	4/18/	19
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PREMISES DESCRIPTION			
a. Are other businesses operating in t	he same building? 🙀 No 🗌 Yes If Yes, Describe:		
[3]1 st Floor □2 nd Floor □Baser	that will be used in operating this business (include area nent Storage Other: Describe:	1	
c. Describe Location: 🔀 Major Thore	oughfare 🔲 Secondary Street 🗌 Other:		
d. Nearest Major Cross Street:			
	ng Building 🖼 Strip Mall 🔲 Other:		
f. Describe Premises Structure: 🕅 S	ingle Story 🔲 Multi-Story - # of Stories	Other:	
g. Describe Surrounding Area: 🚮 Co	ommercial 🔲 Residential 🗍 Industrial 🗍 Other:		
h. Building Owner Name: Kicku	Means 5 5 9 and ST M. ladok	nber: 414-801-8142	
Building Owner Address: 313	5 3 gand St M. laAuk	.eq. 53221	
SHARED KITCHEN AGREEN	IENT		
SERVICES/FACILITIES (check all that will be	e used at the shared kitchen):		
Dry food storage	Handwashing facilities	Refrigeration / frozen food storage	
Restroom facilities	Equipment / utensil storage	Warewashing facilities (3 compartment sink)	
Chemical storage	Facilities to prepare or package food	Utilities: electrical connection Peddlers: overnight parking	
Garbage / recycling disposal	Potable water connection Waste water tank disposal facilities w/ grease		
DAY OF WEEK	Start Time (include am / pm)	End Time (include am / pm)	
Sunday			
Monday	•		
		(1,2)	
Tuesday	<u>O</u> AM	71 M	
Wednesday	ICAM	Y, M	
Thursday	10 AM	4 PM	
Friday			
Saturday			
I, the shared kitchen user, will utilize the services/facilities at this kitchen during the days/times indicated above. I will notify the City Clerk's Office (License Division) prior to discontinuing use of the kitchen. I will maintain an updated schedule of use of the kitchen with the City Clerk's Office (License Division) and keep a written log of the dates/times I am actually at the kitchen. (Peddlers: I will report to the facility at least once each operating day for cleaning and servicing.) Print Name(s): Oscare Backlum I) Sole Proprietor, Partners or 20% or More Shareholder Date: 3-14-25			
FOR COMPLETION BY THE SHARED KITCHEN OWNER			
Kitchen Owner's Business Name: Moc Chicken Shack			
I, the shared kitchen owner, acknowledge I have entered into an agreement with the user to utilize the services/facilities at this kitchen and agree to provide the user access to the kitchen on the days/times indicated above. I will maintain a written log of the dates/times the user is actually at the facility. I will promptly notify the City Clerk's Office (License Division) if this agreement is terminated or if the user fails to use the kitchen on the days/times they have indicated. I acknowledge that as the primary operator of the kitchen I am responsible for the maintenance and sanitation of the kitchen, and as such, I acknowledge I am responsible for maintaining the services/facilities being provided to the user in compliance with the Wisconsin Food Code.			
Print Name: <u>Ling Means</u>			
Signature: Date: Date:			

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ot Dogs BEEF H Hot Dogs Bratwirst ITAliAN SAUSage Dog Buns Hot Ketchujo MUSTArD SadA-MT. Dew/Coke/Sprite/DF. Coke Onton Squerkraut Tee ProPane for VAN Unleaded GAS