



CITY OF MILWAUKEE
OFFICE OF THE CITY CLERK

Thursday, October 31, 2024

COMMITTEE MEETING NOTICE

AD 09

WESTERHAUSEN, Kelly J, Agent
KELLYS TRACKSIDE INN LLC
8762 N GRANVILLE Rd
Milwaukee, WI 53224

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, November 12, 2024 at 09:00 AM

The access code is https://meet.goto.com/904159581. Please see the enclosed best practices document for further instructions.

Regarding: Your Class B Tavern, Public Entertainment Premises and Food Dealer Licenses Application Requesting Instrumental Musicians, Disc Jockey, Jukebox, Bands, Karaoke, 5 Amusement Machines, Battle of the Bands, Poetry Readings, Patron Contests, Comedy Acts, Patrons Dancing, 1 Pool Table and 1 Dart Board as agent for "KELLYS TRACKSIDE INN LLC" for "KELLYS TRACKSIDE INN" at 8762 N GRANVILLE Rd.

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

Handwritten signature of Jim Cooney

BY: Jim Cooney
License Division Manager

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

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



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OFFICE OF THE CITY CLERK**

Thursday, October 31, 2024

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KELLYS TRACKSIDE INN LLC  
7022 W NORTH AV  
Wauwatosa, WI 53213

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**JIM OWCZARSKI, CITY CLERK**

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

**Jim Cooney**  
License Division Manager

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

# MILWAUKEE POLICE DEPARTMENT LICENSING

## CRIMINAL RECORD/ORDINANCE VIOLATION/INCIDENTS SYNOPSIS

**DATE:** 08/30/24

**LICENSE TYPE:** Class B Tavern

**NEW:**

**RENEWAL:**

**No. 370704**

**Application Date:**

**License Location:** 8762 N Granville

**Business Name:** Kellys Trackside Inn

**Licensee/Applicant:** Westerhausen, Kelly J  
(Last Name, First Name, MI)

**Date of Birth:** 01/06/78

**Home Address:** 7022 W North Ave

**City:** Wauwatosa

**State:** Wi **Zip Code:** 53213

**Home Phone:**

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 05/20/22, the applicant was charged with Intentionally Point Firearm at Person, Disorderly Conduct (Use of Dangerous Weapon) in Milwaukee County Circuit Court.

**Charge1:** Intentionally Point Firearm

**2:** Disorderly Conduct

**Finding1:** Dismissed but Read In

**2:** Guilty

**Sentence:** 1-day local jail, Fine

**Date:** 04/06/23

**Case:** 2022CM001318

2. On 08/18/22, the applicant was charged with Carry Concealed Weapon and Bail Jumping in Milwaukee County Circuit Court.

**Charge1:** Carry Concealed Weapon

**2:** Bail Jumping

**Finding1:** Dismissed but Read In

**2:** Guilty

**Sentence:** 1-day local jail

**Date:** 04/06/23

Case: 2022CM002122

# MILWAUKEE POLICE DEPARTMENT

## LICENSING

### CRIMINAL RECORD/ORDINANCE VIOLATION/INCIDENTS SYNOPSIS

**DATE:** 08/30/24

**LICENSE TYPE:** Class B Tavern

**NEW:**

**RENEWAL:**

**No. 370704**

**Application Date:**

**License Location:** 8762 N Granville

**Business Name:** Irie Palace

**Licensee/Applicant:** Hudson-Britton, Deshawn  
(Last Name, First Name, MI)

**Date of Birth:** 09/24/94

**Home Address:** 4539 N 57<sup>th</sup> St

**City:** Milwaukee

**State:** Wi **Zip Code:** 53218

**Home Phone:**

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 01/31/23, the applicant was charged with OWI in Washington County Circuit Court. On 03/02/23, he was convicted and his license was revoked for 1 year for Implied Consent.
2. On 03/23/23 at 1:51p.m., Milwaukee Police were dispatched to a Fight in the area of 107/Granville. On arrival the officers observed a vehicle in the parking lot of 8762 N. Granville Rd. Investigation revealed this was a civil dispute regarding child custody.
3. On 04/23/23 at 8:51p.m., Milwaukee Police were dispatched to a Fight at 8762 N. Granville Rd. On arrival the officers interviewed the agent who denied a fight took place inside, but seemed irritated by the officer's presence. The officers requested to see the video surveillance, however, the agent stated it didn't work. The officers requested to see the license for the bar, which the agent pulled out of a folder in a drawer. The agent was advised they needed to be visibly posted, to which he complied.
4. On 12/31/23 at 4:42p.m., Milwaukee Police were dispatched to a Stolen Vehicle at 8762 N. Granville Rd. On arrival officers observed a vehicle in the driveway of the business with steering column damage, running and unoccupied. The caller was the agent of the bar and stated they did not see who got out of the vehicle. The agent was cooperative with the investigation.

5. The applicant owes the following past due fines to Milwaukee Municipal Court

**22042863**

**Operating After Suspension**

**\*\*\*warrant status\*\*\***

=====

**PREVIOUS PREMISE**

Date: 09/04/2024  
Officer: Tracey Geniesse

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

Name of Premise: Kelly's Trackside Inn  
Address: 8762 N Granville Rd  
Phone: Pending

Owner: Kelly Jo Westerhausen W/F 1/6/78, W2365107850606 exp 1/29  
Owner address: 7022 W North Ave  
City State Zip: Wauwatosa, WI 53213  
Owner Phone: 414-460-9205  
Owner email:kellywesterhausen@gmail.com

Licensee/Agent: Kelly Jo Westernhausen  
Home Address: 7022 W North Ave  
City State Zip: Wauwatosa, WI 53213  
Phone: 414-460-9205  
Email: kellywesterhausen@gmail.com

Preferred contact: Kelly Jo Westernhausen

Location currently open:  YES  NO

Projected open date: September of 2024

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

Hours of Operation: Sun: 6a-2a 24 hours Y N  
Mon: 6a-2a  
Tue: 6a-2a  
Wed: 6a-2a  
Thu: 6a-2a  
Fri: 6a-2:30a  
Sat: 6a-2:30a

Premise Type: Tavern/Bar  
Restaurant  
Other:

Licenses currently held:  
Alcohol: Yes No Class: #:  
Tobacco: Yes No #:

- Food:  Yes  No #:
- Extended Hours:  Yes  No #:
- Secondhand Dealer:  Yes  No Type: #:
- Other:  Yes  No Type: #:
- Other:  Yes  No Type: #:

**Exterior Survey:**

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

**Camera Survey:**

17. Does this location have security cameras?  Yes  No
18. Are they in working order?  Yes  No
19. What format are the cameras?
  - a. Color  Yes  No
  - b. Digital  Yes  No
  - c. Recorded  Yes  No
20. How long is footage stored for later viewing: 30 days
21. Are there exterior cameras  Yes  No How many:
22. Are there interior cameras  Yes  No How many:
23. Do all employees know how to retrieve recorded digital images/footage?  Yes  No
24. Cameras located in parking lot  Yes  No How many

**Interior Survey:**

25. What is the planned capacity 80

26. What is the minimum number of employees That will be on premise 2-6
27. Is the storeowner willing to be a standing complainant regarding loitering? Yes No  
 a. If yes have them fill out the standing complaint form and give them two of the commercial signs Yes No
28. Is the interior of the location neat and clean? Yes No
29. Does an interior camera face the entrance/exit? Yes No
30. Is there a lockable area that separates employees from customers? Yes No
31. Are emergency and non-emergency numbers posted near the phone? Yes No
32. Does the owner know how to contact their police district directly? Yes No  
 a. Did you provide a district contact guide to the owner? Yes No

**Security**

33. How many security personnel are going to be employed: 1
34. How ill they be deployed: Interior Exterior will be inside and outside
35. What days will they be deployed MonTueWedThuFriSatSun
36. Will the security be managed by business or contracted
37. Will they be armed Yes No
38. What type of security measures to be used:  
Wanding/metal detector  
ID Scanner eventually  
Dress Code no gang attire  
Cover Charge only for special events  
Age restriction 25 and older  
Other

**ADDITIONAL COMMENTS/RECOMMENDATIONS:**

Kelly will get cameras interior and exterior. She is in the process of finding deals.  
 The bar will be 25 and up  
 Will conduct daily special and have fish fries and a menu for lunch and dinner.  
 No private parties or rent out space for special events.  
 If they have a rowdy crowd, they will change the music, which will also be a limited playlist, ask the person(s) to leave etc.  
 Will call prior to opening for a final walk through.



## Summary

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

## Alcohol Licenses

#	Legal Entity	Trade Name	Licensee	Address	License Type Name	Total Capacity	Expiration Date	Count
1	107 LLC	Bar107	ALPESH B PATEL, Agt	8775 N 107th ST	Class B Tavern License	150	10/9/2024, 7:00 PM	1
2	El Tenampa LLC	El Tenampa Mexican Grill & Cantina	Victor M Ramirez Velasquez, Agt	8660 N 107TH ST	Class B Tavern License		10/9/2024, 7:00 PM	1
3	AARYAN, LLC	HAMPTON BEVERAGE II	ALPESH B PATEL, Agt	8608 N 107TH ST	Class A Malt & Class A Liquor License		10/21/2024, 7:00 PM	1
4	Boppy LLC	Sheehan's	KERRY A SHERIDAN, Agt	8741 N Granville RD	Class B Tavern License	99	12/27/2024, 6:00 PM	1
5	Irie Palace LLC	Irie Palace	Deshawn L Hudson-Britton, Agt	8762 N Granville RD	Class B Tavern License		4/11/2025, 7:00 PM	1

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



Thursday, October 31, 2024



# Notice of Public Hearing

Blank Notice

WESTERHAUSEN, Kelly J, Agent

KELLYS TRACKSIDE INN at 8762 N GRANVILLE Rd

Class B Tavern, Public Entertainment Premises and Food Dealer Licenses Application Requesting Instrumental Musicians, Disc Jockey, Jukebox, Bands, Karaoke, 5 Amusement Machines, Battle of the Bands, Poetry Readings, Patron Contests, Comedy Acts, Patrons Dancing, 1 Pool Table and 1 Dart Board

**Tuesday, November 12, 2024 at 9:00 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 11/12/2024 at 9:00 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](mailto:stasst5@milwaukee.gov) for necessary information. Please make such requests no later than one business day prior to the start of the meeting. You are not required to attend the hearing, but please see the information below if you would like to provide testimony. Once the Licenses Committee makes its recommendation, this recommendation is forwarded to the full Common Council for approval at its next regularly scheduled hearing.

## **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	8658 N GRANVILLE RD	MILWAUKEE, WI 53224-2308
CURRENT OCCUPANT	8660 N 107TH ST	MILWAUKEE, WI 53224-2224
CURRENT OCCUPANT	8660A N 107TH ST	MILWAUKEE, WI 53224-2224
CURRENT OCCUPANT	8741 N GRANVILLE RD	MILWAUKEE, WI 53224-2317
CURRENT OCCUPANT	8762 N GRANVILLE RD	MILWAUKEE, WI 53224-2310

Blank Notice

Total Records: 5

Radius 500 feet and Center of the Circle: 8762 N Granville Rd



# APPLICATION AMENDMENT

Office of the City Clerk License Division  
200 E. Wells Street, Room 105, Milwaukee, WI 53202 (414) 286-2238

Date: 10/11/24

### To the License Division of the City of Milwaukee:

I, Kelly Westerhausen, wish to amend my answer(s) on the application for a  
(full legal name)

Liquor license at 8762 N Granville rd  
(type of license) (premises address, if applicable)

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

1. Answer to Question(s) # \_\_\_\_\_ should be: \_\_\_\_\_
2. Agent should be (full legal name): Kelly Westerhausen Also complete 3, 4, 5 & 6
3. Date of birth should be: 01/06/1978
4. Home address should be (include city/state/zip): 7022 west north ave  
Wauwatosa, wi 53213
5. Phone number should be (include area code): 4144609205
6. Driver's License Number/State ID Number should be: \_\_\_\_\_
7. Corporation/LLC name should be (full legal name): Kelly Westerhausen
8. Business name should be: Kelly's Trakside Inn
9. Premises address should be (include city/state/zip): 8762 n Granville  
Milwaukee, WI 53224
10. Business phone number should be (include area code): 4144609205
11. Mailing address should be (include city/state/zip): 7022 west north ave  
Wauwatosa, WI 53213
12. Email address should be: kellywesterhausen@gmail.com
13. Recycling/Salvaging/Towing: Location where vehicle will be parked should be (include city/state/zip): ~~7022 west north ave~~
14. Class B Tavern: Age Distinction should be: None
15. Other: \_\_\_\_\_

Changing time 7 AM to 11 PM Sunday through Saturday no age restriction  
(Check with the License Division before submitting "Other" amendments using this form.)

Signature of Licensee (Individual, Partner, or Agent of Corp/LLC)

Office Use Only: Application #: 370704 Date: 10/16/24 Initials: YC To LC: \_\_\_\_\_  
LC Email: MPD NS HD Initials: \_\_\_\_\_



# BUSINESS LICENSE PLAN OF OPERATION

ccl-busplan 5/12/2020

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

## 1. Type of Business

Applying for:  Extended Hours (12AM to 5AM) - If a food establishment, check all that apply:  Delivery  Drive Thru  Dining Room  
 Self Service Laundry  Massage Establishment  Filling Station  
 Other (supplemental application for specific license also required)

Provide a detailed description of the type of business you plan on operating:

Bar with Food

Do you have any experience operating this type of business?  No  Yes If yes, explain: I've been in Food + Bar

## 2. Business Operations

- a. Proposed Opening Date: 9-25-24
- 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?  No  Yes  
If yes, list address(es): \_\_\_\_\_
- h. Are other businesses operating in the same building?  No  Yes If yes, describe: \_\_\_\_\_

for 28 years

## 3. Litter & Noise

- a. How are grounds kept clean?  Sweep  Pressure Wash  Pick Up Litter  Other: \_\_\_\_\_
- b. How often will grounds be cleaned?  Daily  Weekly  As Needed  Monthly  Other: \_\_\_\_\_
- c. Grounds cleaned by:  Licensee  Building Owner  Employees  Hired Maintenance  Other: \_\_\_\_\_
- d. How are noise issues prevented and/or addressed?  Security  Manager approaches customer(s)  Call Police  
 Signs Posted  Other: \_\_\_\_\_
- e. Will a sound amplification system be used?  No  Yes If yes, describe: \_\_\_\_\_

## 4. Smoking & Sanitation

- a. Are there designated outdoor smoking areas?  No  Yes If yes, describe: Out side Back of Bar
- b. Number of Garbage Cans: 1 Inside: 1 Locations: Bathrooms, under bar, behind bar, kitchen  
Outside: X Locations: Back of businesses
- c. Is a crowd control barrier used?  No  Yes If yes, describe: \_\_\_\_\_
- d. How many restrooms are on the premises? 2
- e. Name of solid waste contractor:  Advanced Disposal  Waste Management  Other: \_\_\_\_\_

### 5. Security

- a. Are there onsite parking spaces?  No  Yes If yes, how many? 52 and describe the parking security plan: Lights, cameras and security
- b. Is there a loading zone?  No  Yes If yes, describe the loading area security plan: \_\_\_\_\_
- c. Will you have licensed security on premise?  No  Yes If yes, how many? 1-2 and answer the following:  
 What are their responsibilities? Checking ID's checking for weapons  
 Describe equipment used \_\_\_\_\_  
 List their License Number (s) CN Private Security LLC
- d. Will there be security cameras?  No  Yes If yes, how many? 5 and list locations: Inside and outside
- e. Will searches/identification checks be done upon entry?  No  Yes If yes, describe Checking Everyone

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

Alcohol <u>50</u> %	Food <u>30</u> % Cigarettes, Electronic Vape Devices, Tobacco Products _____ %	Secondhand Merchandise _____ %	Precious Metals & Gems _____ %
Entertainment <u>20</u> %	Pawnbroker Activity _____ %	Salvaged Materials _____ % (such as scrap metal)	Personal Services (such as tattoo, body piercing, salon, tailor, tanning, etc.) _____ %
			Other _____ % Describe: _____

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

#### Type 1

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

#### Type 2

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

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

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

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

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

## 9. Premises Description

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

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

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

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

c. Nearest Major Cross Street: 107<sup>th</sup> St

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

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

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

g. Building Owner Name: Michael Batzler Phone Number: \_\_\_\_\_

Building Owner Address: 950 Stone Meadow Ct, Hubertus, WI 53033

## 10. Hours of Operation & Customers

Will customers be entering the premises?  No  Yes

Day of the Week	Proposed Hours of Operation:		Estimated Number of Customers expected each day	Potential Age Range of Customers	Class B Tavern Applicant Only: Age Restriction (If none, write 'None')
	Open Time (include a.m. or p.m.)	Close Time (include a.m. or p.m.)			
Sunday	6 A.M.	2 A.M.	30	25-75	none
Monday	6 A.M.	2 A.M.	30	25-75	none
Tuesday	6 A.M.	2 A.M.	30	25-75	none
Wednesday	6 A.M.	2 A.M.	30	25-75	none
Thursday	6 A.M.	2 A.M.	30	25-75	none
Friday	6 A.M.	2:30 A.M.	50	25-75	none
Saturday	6 A.M.	2:30 A.M.	50	25-75	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, is established by the Common Council in its approval of the licensee's plan of operation.

## 11. Signature(s)

Kelly W

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

Signature of additional partner or 20% or more shareholder

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



**ALCOHOL BEVERAGE & PUBLIC ENTERTAINMENT PREMISES  
SUPPLEMENTAL APPLICATION**

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

Legal Entity Name: Kelly's Trackside Inn

Premise Address: 8702 N. Grandville Rd

**Proximity of Premises to Church, School, Daycare Center or Hospital**

Is the building within 300 feet of any church, school, daycare center or hospital?  No  Yes

**"Service Bar Only" Designation**

If applying for Class B or C license, are you applying for "Service Bar Only"?  No  Yes  
Service Bar Only means customers cannot sit at the bar. Alcohol is served to employees who serve patrons seated at tables. No stools, chairs or other articles of furniture shall be placed at the service bar for patrons to sit upon.

**Business Information**

- a) Are you taking out this application for anyone that may not be eligible for a license?  No  Yes  
If yes, list their name and address: \_\_\_\_\_
- b) Will the agent, a partner or the individual licensee be conducting the day-to-day operations of the business?  No  Yes  
If no, list the name and address of the person(s) who will: \_\_\_\_\_  
  
Class B Applicants: If the agent, a partner or the individual licensee will not be conducting the day-to-day operations of the business, the person(s) listed above must obtain a Class B Managers license.
- c) Does anyone else have money invested or any other interest in this business?  No  Yes  
If yes, explain: \_\_\_\_\_
- d) Have you made an agreement with anyone to repay any loan or any other payments based upon income from the business?  
 No  Yes If yes, list name and address: \_\_\_\_\_

**Property Information (New & Transfer Applicants Only)**

- a) Do you own or lease the building?  Own  Lease
- b) Who owns the fixtures (for example, coolers, etc.)? Owners
- c) Are you purchasing the stock and/or fixtures?  No  Yes If yes, amount paid \$ \_\_\_\_\_
- d) Total amount paid for business \$ \_\_\_\_\_
- e) 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.
- 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 8-1-24 Ends 8-1-25
- b) Monthly rental \$ 1,000
- 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)? 5

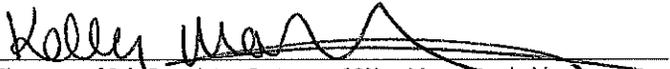
### Lease Information (Continued)

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

### Change of Agent Applicants Only

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

### Signature

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

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

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

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



# FOOD DEALER LICENSE PLAN OF OPERATION

ccl-foodplan 2/28/19

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

Legal Entity Name:	Kellys Trackside Inn
Premises Address:	8762 N. Grandville Rd
<b>SECTION 1 TYPE OF BUSINESS</b>	
What will be the majority of your food sales? (check one)	
<input checked="" type="checkbox"/> 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.	
<input type="checkbox"/> 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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.	
<input type="checkbox"/> Bed & Breakfast <input type="checkbox"/> Micro Market	
All Applicants: Submit a menu or a list of food items that will be sold.	
Will any wholesale business be done? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, what percentage of food sales will be wholesale?	
<input type="checkbox"/> Less than 25%	
<input type="checkbox"/> 25% or More AND:	
<input type="checkbox"/> Restaurant items (meals) will be sold – Complete this application and also contact DATCP.	
<input type="checkbox"/> NO restaurant items (meals) will be sold - Do NOT complete this application. Contact DATCP only.	
<b>SECTION 2 FOOD PROCESSING</b>	
Will any food processing be done? <input type="checkbox"/> No <input checked="" type="checkbox"/> 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.	
<b>SECTION 3 FOOD REQUIRING TEMPERATURE CONTROL</b>	
Will any food that requires temperature control be sold? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (includes dairy products such as milk, cheese, and ice cream, fish, shellfish, meat, poultry)	
If yes, list the types of food items: Cheese meat fish poultry	

**SECTION 4 DETAILS OF OPERATION**

Will you have seating on site for dining?  No  Yes

Will you be doing any catering?  No  Yes

Will you be doing any delivery?  No  Yes

Will you have outdoor activities?  No  Yes - Check all that apply:  Bar  Cooking/Grilling  Dining

Will you have a drive thru window?  No  Yes - Are hours different from inside?  No  Yes  
 If Yes, provide drive thru hours: \_\_\_\_\_

Will scales or barcode scanners be used?  No  Yes - You must also apply for a Weights & Measures License.

**SECTION 5 ADDITIONAL SITES**

Where will food be prepared and/or sold?

At a single site  At multiple sites: How many? \_\_\_\_\_ (for example, a hotel with several dining rooms or bars)

If multiple sites, attach a Food Dealer Additional Site Addendum (ccl-foodadd) for each additional site.

**SECTION 6 CONSTRUCTION OR CHANGES**

Are you planning any construction, remodeling or equipment changes?

No If No, SKIP to Section 7

Yes If Yes, check all that apply:  New construction of a building  Renovation or remodeling  
 Construction changes to existing building  Equipment changes only

Provide a brief description of the changes: \_\_\_\_\_

Start date: \_\_\_\_\_

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

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

**SECTION 7 ALCOHOL BEVERAGES**

Are you applying for an alcohol beverage license?

No If No, SKIP to Section 8

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

**SECTION 8 ACKNOWLEDGEMENTS & SIGNATURE**

You must initial each item confirming your understanding:

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

KW 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.

KW 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.

KW 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.

KW I will not operate my food business until the license has been issued and posted in the establishment.

Signature of Sole Proprietor, Partner, or 20% Shareholder: Kelly West

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



# PUBLIC ENTERTAINMENT PREMISES LICENSE SUPPLEMENTAL APPLICATION

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

PREMISES ADDRESS: ~~8702~~ 8702 N. Granville Milwaukee WI 53224

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

- |   |   |   |   |
|---|---|---|---|
| <input checked="" type="checkbox"/> Instrumental Musicians                          | <input checked="" type="checkbox"/> Battle of the Bands | <input type="checkbox"/> Dancing by Performers                          | <input checked="" type="checkbox"/> Amusement Machines<br>How many? <u>5</u>  |
| <input checked="" type="checkbox"/> Bands   | <input checked="" type="checkbox"/> Comedy Acts         | <input type="checkbox"/> Adult Entertainment/<br>Strippers/Erotic Dance | <input type="checkbox"/> Concerts<br>Approx. # per year? _____                |
| <input type="checkbox"/> Bowling Alley<br>How many? _____                           | <input checked="" type="checkbox"/> Disc Jockey         | <input type="checkbox"/> Wrestling                                      | <input type="checkbox"/> Theatrical Performances<br>Approx. # per year? _____ |
| <input checked="" type="checkbox"/> Pool Tables<br>How many? <u>1</u>               | <input type="checkbox"/> Magic Shows                    | <input checked="" type="checkbox"/> Patron Contests                     | <input checked="" type="checkbox"/> Jukebox                                   |
| <input type="checkbox"/> Motion Pictures (movies by<br>admission) - How many? _____ | <input checked="" type="checkbox"/> Poetry Readings     | <input checked="" type="checkbox"/> Patrons Dancing                     | <input checked="" type="checkbox"/> Karaoke                                   |
| <input checked="" type="checkbox"/> Other: <u>dart board</u>                        |   |   |   |

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

### PROMOTERS/SOUND AMPLIFICATION

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

At any time will sound amplification be used?  No  Yes If Yes, Describe: Karaoke, Disc Jockey

### LEGAL CAPACITY OF PREMISES

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

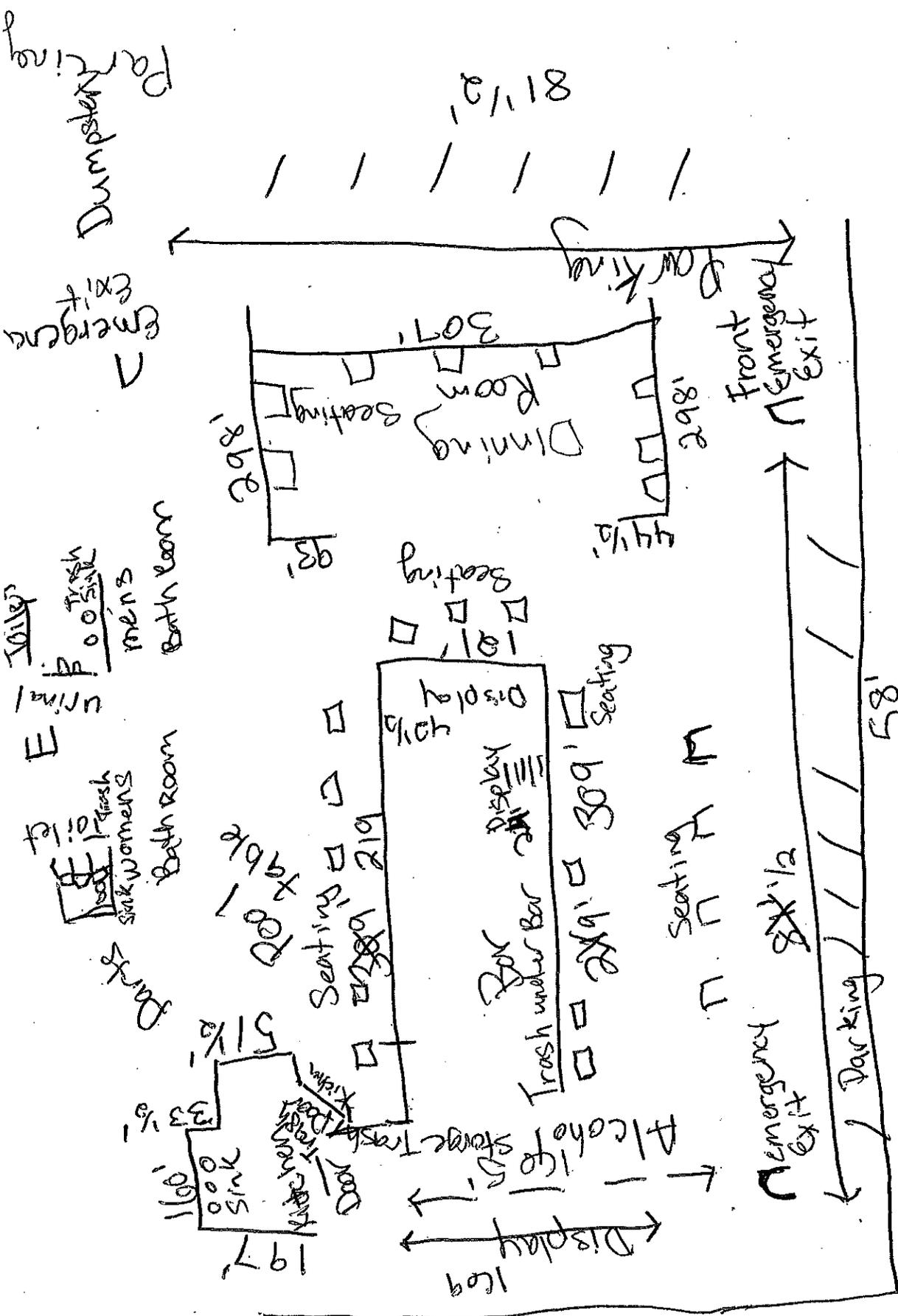
### ACKNOWLEDGEMENT/SIGNATURE

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

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

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

Office Use Only:  
Initials: RC Filed: 8-29-24 App: PEP370706  
Only PEP?  No  Yes If Yes,  Queue to MPD and  Email Mgrs/Team Lead (must be heard w/in 60 days)



107 st

58'

Hellis Trackside Inn. LLC

Hellis Trackside Inn

107<sup>st</sup> and Grandville

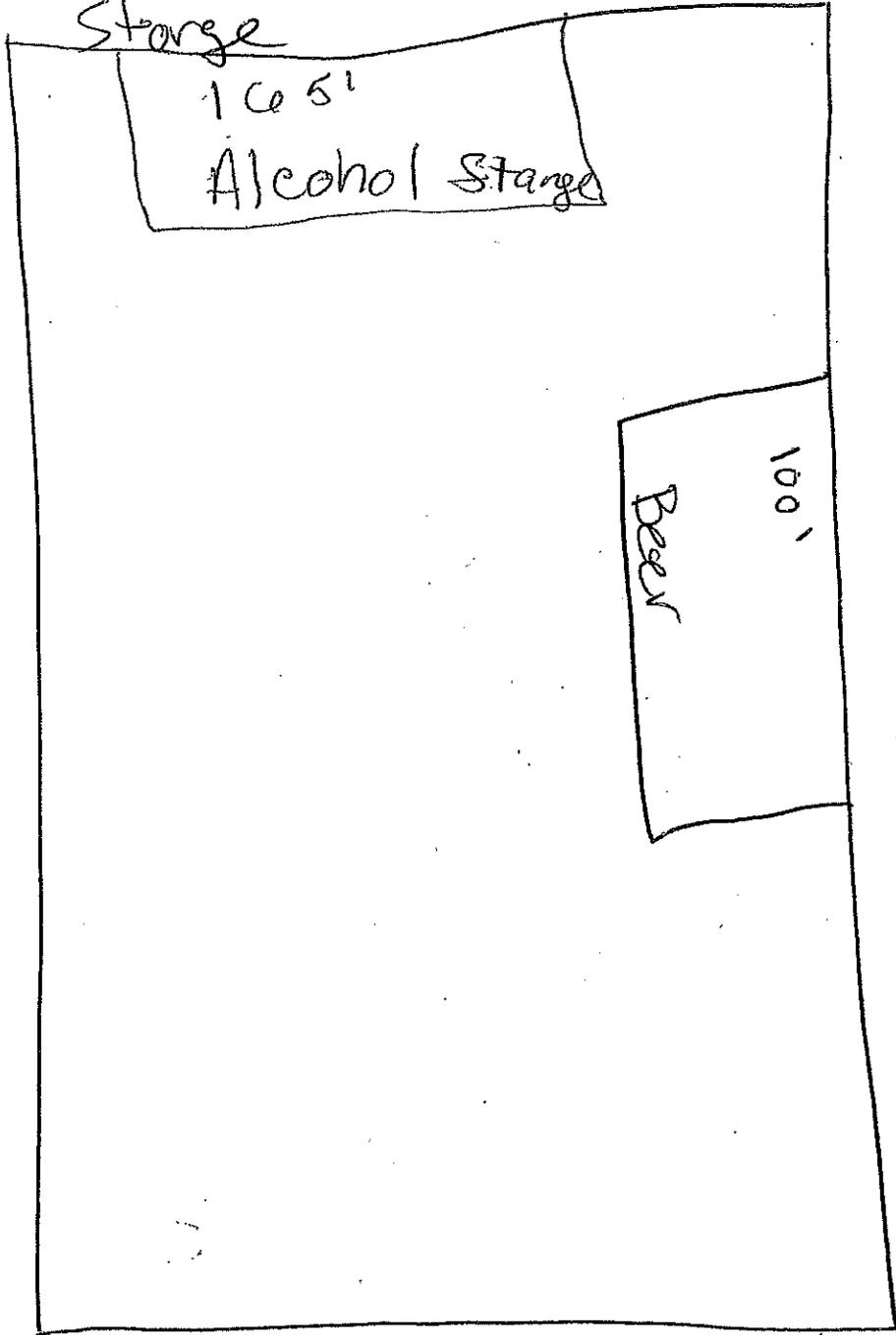
Aug 26, 2024

Total

Seating = 3,751  
Footage =

N

Basement  
Storage



Total  
Sq Ft 3,751

Kelly's Trackside Inn, LLC  
Kelly's Trackside Inn  
107th Granville  
Ave 26.2024

# KELLY'S TRACKSIDE INN

## MENU

**CHICKEN WINGS** \$12.99

SERVED WITH FRIES  
FLAVORS: BUFFALO, GARLIC PARM, LEMON  
PEPPER

**CHEESEBURGER SLIDERS**

\$12.99  
SERVED WITH FRIES

**MINI TACOS** \$12.99

SERVED WITH LETTUCE, TOMATO, SOUR CREAM,  
CHEESE, CILANTRO  
MEAT CHOICE: BEEF OR CHICKEN

**PHILLY CHEESESTEAK**

\$12.99  
ONIONS, GREEN PEPPERS, CHEESE, MUSHROOMS,  
MAYO

**ONION RINGS** \$9.99

**FRIES** \$9.99

**PIZZA (YOUR CHOICE)** \$9.99

PEPPERONI, CHEESE, SUPREME, SAUSAGE

**SPINACH ARTICHOKE DIP**

\$11.99

