

# CITY OF MILWAUKEE OFFICE OF THE CITY CLERK

Monday, August 26, 2024

### COMMITTEE MEETING NOTICE

AD 03

SCHULTZ, Angela, Agent 7-ELEVEN, INC P.O. Box 139044 Dallas, TX 75313

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 10, 2024 at 10:30 AM

The access code is <a href="https://meet.goto.com/360917733">https://meet.goto.com/360917733</a>. Please see the enclosed best practices document for further instructions.

Regarding:

Your Class A Fermented Malt & Class A Liquor (Cider Only), Extended Hours Establishments, Food Dealer and Weights & Measures Licenses Application as agent for "7-ELEVEN, INC" for "7 VEN # 35852J" at 1609 E NORTH Av.

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.



# CITY OF MILWAUKEE OFFICE OF THE CITY CLERK

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JIM OWCZARSKI, CITY CLERK

BY:

Jim Coonev

License Division Manager

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

# MILWAUKEE POLICE DEPARTMENT LICENSING

## CRIMINAL RECORD/ORDINANCE VIOLATION/INCIDENTS SYNOPSIS

LICENSE TYPE: AMALT  New:  RENEWAL:		No. 365935 Application Date:	
License Location: 1609 E North Business Name: 7-Eleven			
Licensee/Applicant: Stachnik, Daniel (Last Name, First Name, MI)  Date of Birth: 03/07/64			
Home Address: 5650 W Wahner Ave #205 City: Brown Deer Home Phone:	State: WI	<b>Zip Code:</b> 53223	
This report is written by Police Officer Penny Days.	Monreal, assi	igned to the License Investigation U	Jnit,

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

 On 05/30/24 at 8:13p.m., Milwaukee Police were conducting Underage Compliance Checks utilizing a minor police aide. The Police Aide entered 1609 E. North Ave., and did purchase alcohol from the cashier, who did not check Identification. The cashier was later notified of the violation and issued a citation (M582CBQ6N6). The cashier was cooperative with the officers.

Item #1 added as Previous premise





## Notice of Public Hearing

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SCHULTZ, Angela, Agent
7-ELEVEN # 35852J at 1609 E NORTH Av
Class A Fermented Malt & Class A Liquor (Cider Only), Extended Hours Establishments, Food
Dealer and Weights & Measures Licenses Application

### Tuesday, September 10, 2024 at 10:30 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 9/10/2024 at 10:30 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	CITY STATE ZIP
CURRENT OCCUPANT	1527 E NORTH AVE	MILWAUKEE, WI 53202-1032
CURRENT OCCUPANT	1531 E NORTH AVE	MILWAUKEE, WI 53202-1032
CURRENT OCCUPANT	1533 E NORTH AVE	MILWAUKEE, WI 53202-1032
CURRENT OCCUPANT	1537 E NORTH AVE	MILWAUKEE, WI 53202-1032
CURRENT OCCUPANT	1538 E WINDSOR PL	MILWAUKEE, WI 53202-1043
CURRENT OCCUPANT	1540 E WINDSOR PL	MILWAUKEE, WI 53202-1043
CURRENT OCCUPANT	1541 E NORTH AVE	MILWAUKEE, WI 53202-1032
CURRENT OCCUPANT	2112 N NEWHALL ST	MILWAUKEE, WI 53202-1027
CURRENT OCCUPANT	2114 N NEWHALL ST	MILWAUKEE, WI 53202-1027
CURRENT OCCUPANT	2115 N BARTLETT AVE	MILWAUKEE, WI 53202-1019
CURRENT OCCUPANT	2115 N NEWHALL ST	MILWAUKEE, WI 53202-1026
CURRENT OCCUPANT	2116 N NEWHALL ST	MILWAUKEE, WI 53202-1027
CURRENT OCCUPANT	2117 N NEWHALL ST	MILWAUKEE, WI 53202-1026
CURRENT OCCUPANT	2118 N NEWHALL ST	MILWAUKEE, WI 53202-1027
CURRENT OCCUPANT	2121 N BARTLETT AVE	MILWAUKEE, WI 53202-1019
CURRENT OCCUPANT	2121 N NEWHALL ST	MILWAUKEE, WI 53202-1026
CURRENT OCCUPANT	2123 N BARTLETT AVE	MILWAUKEE, WI 53202-1019
CURRENT OCCUPANT	2124 N NEWHALL ST	MILWAUKEE, WI 53202-1027
CURRENT OCCUPANT	2125 N NEWHALL ST	MILWAUKEE, WI 53202-1026
CURRENT OCCUPANT	2127 N BARTLETT AVE	MILWAUKEE, WI 53202-1019
CURRENT OCCUPANT	2128 N NEWHALL ST	MILWAUKEE, WI 53202-1027
CURRENT OCCUPANT	2129 N NEWHALL ST	MILWAUKEE, WI 53202-1026
CURRENT OCCUPANT	2200 N NEWHALL ST	MILWAUKEE, WI 53202-1028
CURRENT OCCUPANT	2202 N CAMBRIDGE AVE# 1	MILWAUKEE, WI 53202-1016
CURRENT OCCUPANT	2202 N CAMBRIDGE AVE# 2	MILWAUKEE, WI 53202-1016
CURRENT OCCUPANT	2202 N CAMBRIDGE AVE# 3	MILWAUKEE, WI 53202-1016
CURRENT OCCUPANT	2202 N CAMBRIDGE AVE# 4	MILWAUKEE, WI 53202-1016
CURRENT OCCUPANT	2203 N BARTLETT AVE	MILWAUKEE, WI 53202-1021
<b>CURRENT OCCUPANT</b>	2203 N NEWHALL ST	MILWAUKEE, WI 53202-1029
CURRENT OCCUPANT	2204 N NEWHALL ST	MILWAUKEE, WI 53202-1028
CURRENT OCCUPANT	2206 N CAMBRIDGE AVE	MILWAUKEE, WI 53202-1016
CURRENT OCCUPANT	2207 N NEWHALL ST	MILWAUKEE, WI 53202-1029.
CURRENT OCCUPANT	2208 N NEWHALL ST	MILWAUKEE, WI 53202-1028
CURRENT OCCUPANT	2209 N BARTLETT AVE	MILWAUKEE, WI 53202-1021
CURRENT OCCUPANT	2209 N NEWHALL ST	MILWAUKEE, WI 53202-1029
CURRENT OCCUPANT	2209A N BARTLETT AVE	MILWAUKEE, WI 53202-1021
CURRENT ÓCCUPANT	2210 N NEWHALL ST	M!LWAUKEE, WI 53202-1028
CURRENT OCCUPANT	2211 N NEWHALL ST	MILWAUKEE, WI 53202-1029
CURRENT OCCUPANT	2212 N NEWHALL ST	MILWAUKEE, WI 53202-1028
CURRENT OCCUPANT	2213 N BARTLETT AVE	MILWAUKEE, WI 53202-1021
CURRENT OCCUPANT	2213A N BARTLETT AVE	MILWAUKEE, WI 53202-1021
CURRENT OCCUPANT	2214 N NEWHALL ST	MILWAUKEE, WI 53202-1028
Blank Notice	•	•

Total Records: 42

Radius 250 feet and Center of the Circle: 1609 E North Av

### ccl-busplan 5/12/2020

# MILWAUKEE

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

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

1. T	ype of Business
Applyin	ng for: Extended Hours (12AM to 5AM) - if a food establishment; check all that apply: Delivery Drive Thru Dining Room
	Self Service Laundry Massage Establishment Effilling Station
	Other (supplemental application for specific license also required)
Provide	e a detailed description of the type of business you plan on operating:
	Convenience Store
Do уоц	have any experience operating this type of business? No Yes If yes, explain:
	usiness Operations
ā.	Proposed Opening Date: Currently open - Charge of Operator
þ.	Is this premise under construction? We No Yes If yes, list estimated completion date:
Ġ,	Is this premise under construction? Who Wes if yes, list estimated completion date:  Is this a franchise? No Wes  Is this premises currently licensed? No Wes If yes, list type of license:  Is the current licensee operating? No Wes If no, list date closed:  Do you have future plans for other hydresses. licenses or permits at this location? Wes
d.	Is this premises currently licensed? No Tyes If yes, list type of license:
e.	is the current licensee operating? No V Yes If no, list date closed:
f.	Do you have future plans for other businesses, licenses or permits at this location? Ves
	If yes, explain:
g.	Have you previously field an Extended Hours License in Milwaukee?  No Ves
	If yes, list address(es): 3301 N. Oakland, Hilwanker
h.	Are other businesses operating in the same building? No Yes If yes, describe:
3. Li	tter & Noise
à.	How are grounds kept clean? Sweep Pressure Wash Pick Up Litter Others
b.	How often will grounds be cleaned?
c.	Grounds cleaned by: Licensee Building Owner YEmployees 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? V No Yes If yes, describe:
4. Sı	moking & Sanitation
á,	Are there designated outdoor smoking areas? No Yes If yes, describe:
b.	Number of Garbage Cans: Inside: 7 Locations: Coffee bar/ front Counter
	Outside: 2 Locations: each Side of entrance
C,	Is a crowd control barrier used? 🗹 No 🗌 Yes 💮 If yes, describe:
d.	How many restrooms are on the premises?
e,	Name of solid waste contractor: Advanced Disposal Waste Management Other: 6FL Environment

5. Security		· · · · · · · · · · · · · · · · · · ·			
a. Are there onsite parking plant LED light	ng spaces? No 📉 Y	es If yes, ho	w many?	and descri	be the parking security
,		describe the	loading area security	plan:	
c. Will you have security	personnel on premise?				and answer the following:
Aniar ata Mait L	esponsibilities?	· · · · · · · · · · · · · · · · · · ·			
is security equip	ment used? No	Yes If yes, o	lescribe <u>Came</u> v	74.5	
List their licensing	g, certification, or train	ing credential	S		
Over registe	meras? [No Y Ye	s If yes, how	many? and	list locations:	entrance-2
e. Will searches/identifica	tion checks be done up	on entry?	No Yes If yes de	scribe	
. Percentage of Sale	s (must total 100	1%)			
Alcohol 7 %		<u> </u>	Canada de la composición dela composición de la composición de la composición dela composición dela composición dela composición de la composición de la composición de la composición dela composición de la composición del composición dela composición de		
ntertainment <u>Ø</u> %	Cigarettes 2	<u>.3</u> %	Secondhand Merchan	dise	Precious Metals & Gems
wnbroker Activity%	Salvaged Materials (such as scrap metal)	<u>g</u> %	Personal Services (suc body piercing, salon, to tenning, etc.)	allor,	Other 44 9% Describe: Non-God Merchand
Businesses/License	s on the Premise	s (check a	Il that applyl-	70	ACCOUNTING TO THE PARTY OF THE
pe 1   Full Service Restaurant				······································	
	☐ Cafe/Coffee Shop	Deli or F	ist Food Restaurant	Private/	/Fraternal/Veterans Club
Night Club	Tavern	Cocktall	Lounge	Teen Cl	ub
Banquet Hall	Sports Facility	☐ Bowling	Alley		
	oors:	Rooming		oors;	
pe 2 Liquor Store	☐ Corner Store	Supermar	·		
Gas Station	☐ Amusement/Phonog			Convente	· · · · · · · · · · · · · · · · · · ·
Used Car Dealer	Personal Service Est		r	Recycling	Salvage or Towing
T north center	(such as tattoo busin		tailor, etc.)	Recordin	g Studio
hat other licenses/permits will y	ou hold at this location? (	check all that a	nalv)		
Occupancy Permit C	igarette & Tobacco Gas	Station MEx	tended Hours   Close	Participan (PA	Succession in the succession of the succession in the succession i
Secondhand Dealer	Precious Metal & Gem	Other:	Triggs	e ravern [/]	weignts & Measures
Legal Capacity (only			above)		
, ),	Milwaukee Development			estions.)	

9. Premises D	escript	ion		1	-						
	Identify all area(s) of the premises that will be used in operating this business (include areas used only for storage): 劉章 Floor 日2 <sup>nd</sup> Floor 日Basement Storage 日Patio 日Beer Garden 日Sidewalk Cafe 日Deck 日Rooftop										
□Other: Descr	Other: Describe:										
b. Describe Locati	Describe Location: Major Thoroughfare Secondary Street Other:										
c. Nearest Major	Nearest Major Cross Street: Dalciana Ave.										
d. Describe Buildi	many party party										
					ries Cother:						
f. Describe Surro	unding Are	a: 🛮 Commercia	I □ Re	sidential 🔲 Indust	rial Cther:						
g. Building Owne	r Name:	<u>Eikland</u>	11.0	h 	rial Other:	1)857-11	56				
Building Owne	r Address:	1001000	VOT	- UDEN KURN	16.1 A . C						
10. Hours of C	)perati	on & Custor	ners	Class "A"	1: 8:00 cm to	1:00 pm (	Sunda Hhris Sunda				
Will customers be ent	ering the p	remises? 🔲 No	☐ Yes		·	•					
		Proposed Hour	s of Op	eration:	Estimated Number	Potential	Class B Tayern				
Day of the Week					of Customers	Age Range of	Applicant Only: Age Restriction				
Open Time (include a.m. or p.m			Close Time (include a.m. or p.m.)		expected each day	Customers	(if none, write 'None')				
Sunday	5 1	2: 00 AM	1156	ig mark	350	19-50					
Monday		24 hou	rs/		350						
Tuesday			/		350		MA				
Wednesday		Ida	SA	week	350		//				
Thursday					450						
Friday					500						
Saturday	/\	<b>y</b>	1		500		•				
An Extended Hours Es piercing, salon, tailor,	tablishmer tanning, e	nt License is requir tc.), recording stud	ed for a	ny convenience stor staurant which is op	e, filling station, personal en between the hours of	service establish 12:00 a.m. and 5	ment (such as tattop, body (100 a.m.				
Alcohol Establishment Permitted Hours of O				00 pm Sunday thru 00 am Sunday thru	Saturday Thursday, 6:00 am to 2:3	0 am Friday & Sa	turđay				
Entertainment Outdo	or Closing	Hours: 10:0 Is es	Opm Sun ablished	day-Thursday; 12:0 I by the Common Co	Dam Friday & Saturday; u ouncil in its approval of th	niess a different ' e licensee's plan	time, either earlier or later, of operation.				
11. Signature	(s)			(							
X Jennife	r Mev	udola Az		ec/Z	4						
Signature of Sole Prop VIF there are no 20	rietor, Par 0% or more	ther, or 20% or me a shareholders,	ore Share	éholder 🧪	Signature of additional p	artner or 20% of	more shareholder				

Corporate Officer-print name/title and sign)

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

Legal Entity Name: 7- Eleven, Inc. d/b/c 7- Eleven #35852J
Premise Address: 1609 E. North Ave., Milwaukee WI 53202
Proximity of Premises to Church School Days 10 100 100 100 100 100 100 100 100 100
Proximity of Premises to Church, School, Daycare Center or Hospital
is the building within 300 feet of any church, school, daycare center or hospital? You Yes
"Service Bar Only" Designation
If applying for Class B or Cilicense, are you applying for "Service Bar Only"?  Service Bar Only means customers cannot sit at the bar, Alcohol is served to employees who serve patrons seated at tables.  No stools, chairs or other articles of furniture shall be alread 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? V 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.
If no, list the name and address of the person(s) who will:
Class 8 Applicants: If the agent, a partner or the individual licensee will not be conducting the day-to-day operations of the busines the person(s) listed above must obtain a Class 8 Managers license.
t) Does anyone else have money invested or any other interest in this business?
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?
b) Who owns the fixtures (for example, coolers, etc.)?
c) Are you purchasing the stock and/or fixtures? INo Ses 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 6-1-2012 Ends 6-18-2027
b) Monthly rental 5
c) Do you have an option to renew the lease? I No I Yes
d) Does your lease allow for assignment to another party without the consent of the owner?   No  Yes
a) For what length of time have you been guaranteed occupancy (number of years)?



# ALCOHOL BEVERAGE & PUBLIC ENTERTAINMENT PREMISES SUPPLEMENTAL APPLICATION

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

(414) 286-2238 e-mail address: license@milwaukee.gov www.milwaukee.gov/license

Lacol Entitle Alexander
Legal Entity Name: 7- Eleven, Inc. d/b/c 7- Eleven #35852J
Premise Address: 1609 E. North Ave., Milwaulee WI 53202
Proximity of Premises to Church, School, Daycare Center or Hospital
Is the building within 300 feet of any church, school, daycare center or hospital?
"Service Bar Only" Designation
If applying for Class B or C license, are you applying for "Service Bar Only"? No Yes
Service Bar Only means customers cannot sit at the bar. Alcohol is served to appropriate the company of the com
and a state of duties of torritaine snail 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? You Yes
if yes, list their name and address:  b) Will the agent: a partner of the individual licenses be conducted to the individual licenses by the individual lice
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:
No. of the state o
Class 8 Applicants: If the agent, a partner or the individual licensee will not be conducting the day-to-day operations of the business
The state of the s
c) Does anyone else have money invested or any other interest in this business? V No Yes  If yes, explain:
d) Have you made an agreement with anyone to repay any loan or any other payments based upon become formed to be a second to b
Yes If yes, list name and address:
Property Information (New & Transfer Applicants Only)
a) Do you own or lease the building?
b) Who owns the fixtures (for example, coolers, etc.)? 1-Eleven, InC.
c) Are you purchasing the stock and/or fixtures?
d) Total amount paid for business s
e) Total amount paid for goodwill of the business \$ \$\phi\$
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 6-1-2012 Ends 6-10-2027
b) Monthly rental \$ 9016.00 c) Do you have an option to renew the lease? \( \text{No 17}\text{Yes}
d) Does you'r lease allow for assignment to another party without the consent of the owner? No Myes
For what length of time have you been guaranteed occupancy (number of years)? 6-18-27 (add 'L five )
(add'L five have you been guaranteed occupancy (number of years)? 6-18-27 (add'L five option)

Lea	se Information (Continued)
f)	In addition to paying the monthly cental, 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
g)	Does the present owner or occupant object to the granting of your license?  XNo
Cha	ange of Agent Applicants Only
	we 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):
Sign	nature
Signa (If no	Senn for Mendolo- Avalt. Secretors store of Sole Proprietor, Partner or 20% or More Stiarcholder 20% or more Shareholder, Corporate Officer-print name/title and sign)

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

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

Detailed floor plan

If a restaurant, copy of the menu



### FOOD DEALER LICENSE PLAN OF OPERATION

OFFICE OF THE CITY CLERK, LICENSE DIVISION
CITY HALL, 200 E. WELLS ST, ROOM 105, MILWAUKEE, WI S320Z
[414] 286-2238 Ilicense@milwaukee.gov Www.milwaukee.gov/license

Legal Entity Name: 17-15-121-10-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-
Frever, Inc. a/p/a 1-tle ven #35852J
1609 E. North Are. Milwauku. WI 53202
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, friiters, tortilla chips w/ cheese.
Will it be a convenience store?
☐ 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 V 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? \(\sum \text{No}\) \(\sum \text{Yes}\) (includes dairy products such as milk, cheese, and ice cream, fish, shellfish, meat, poultry)
If yes, list the types of food Items: hot-doss/pizza/dairy/breakfast- Sandwicks

cci-toggplan 2/28/19

SECTION 4 DETAILS OF OPERATI	ON,					
Will you have seating on site for dining?	₩ No	Yes				
Will you be doing any catering?	☑ No	Yes				
Will you be doing any delivery?	IN No	Yes				
Will you have outdoor activities?	₽ No	Yes - Check all that apply: Bar Cooking/Grilling Dining				
Will you have a drive thru window?	II No	Yes - Are hours different from inside? No Yes				
4 CENTRAL PROPERTY AND A PROPERTY AN		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 site	s: Hown	nany? (for example, a hotel with several dining rooms or bars)				
If multiple sites, attach a Food Dealer Addit	ional Site	Addendum (ccl-foodadd) for each additional site.				
SECTION 6 CONSTRUCTION OR	CHANGE	\$				
Are you planning any construction, remode	ling or eq	uipment changes?				
No If No, SXIP to Section 7						
Yes If Yes, check all that apply:	☐ New	construction of a building Renovation or remodeling				
	☐ Cons	truction changes to existing building Equipment changes only				
Provide a brief description of the changes:						
Start date:	,					
Name, Address & Phone Number of Archite	 irt-	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
	·					
Name, Address & Phone Number of Contra		A CONTRACTOR OF THE PROPERTY O				
sequet voness & Lucia Aguical or Collect	Ctoj	Managaria, and the same and the				
SECTION 7 ALCOHOL BEVERAGE	<u> </u>					
Are you applying for an alcohol beverage lie						
☐ No If No, SKIP to Section 8						
<b>1  </b>	paroved t	orior to the alcohol license, when do you want the food license issued?				
☐ Immediately						
SECTION 8 ACKNOWLEDGEMEN	12 86 216	MAT OUG				
You must initial each item confirming your	understar	adings				
understand the Health Departe	nent mus	f conduct an Inspection and advise the License Division of their approval				
before the license may be issued.						
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						
he issued.						
[ 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						
f A recommendation to the Commo	n Council	. The Common Council must grant the license before it may be issued.				
		nse fees must be on file in the License Division before the license may be I posted in my establishment prior to opening for business.				
		he liceose has been issued and posted in the establishment.				
Signature of Sole Proprietor, Partner, or 20		V-3/1/2 And Con				
Signature of Additional Partner:		· ,X				



### WEIGHTS & MEASURES LICENSE SUPPLEMENTAL APPLICATION

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

Office L	Jse Only:
App#	WEH DIEHT
Filed	5/14/2024
Initials	
Paid	
Lic#	The state of the s

Legal Entity Name:	7-Eleve	n,Inc.	d/b/a	T-Eleven	# 350	3 <i>52</i> J	
Premise Address:	1609 E.	No/4h	Ave.	H: Iwauku	MI	53202	
Device Type(s)	7			The riversal of the second	A. A		

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

    If you have 1-3 scanners, the total due is \$180. If you have 4 or more scanners, the total due is \$250. Check the Number of Devices (b).

	Device Type	License Period	Fee Per Device Type (a)	Number of Devices (b)	Total Fee Per Device Type (a x b)
Liqu	id Measuring Devices				
	Retail Petroleum Meters	12 months	\$60		
	0 to 30 gallons per minute	24 months	\$60		
	31 to 200 gallons per minute	24 months	\$250		
	Over 200 gallons per minute	24 months	\$250		
Scal	es				
	Measuring any weight amount	24 months	<b>\$5</b> 5		
Scar	ners		Fee for scanners is by range:	Check how many scanners you have	
X	Up to 3 scanners	24 months	\$130 total <sup>0</sup>	<b>□1</b> X 2 □3	
	Four or more scanners	24 months	\$250 total*	□4 □Other	
Oth	er Devices				
	Length Measuring Device	24 months	\$60		
	Timing Device	24 months	\$30		
	· · · · · · · · · · · · · · · · · · ·			Total Fee Due	120.00

### Signature

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

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

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

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

grature of additional partner or 20% or more shareholder

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

This form must be submitted with the Business License Application, Weights & Measures Plan of Operation, and appropriate fee. Forms can be obtained online at <a href="https://www.milwaukee.gov/licenses">www.milwaukee.gov/licenses</a>.

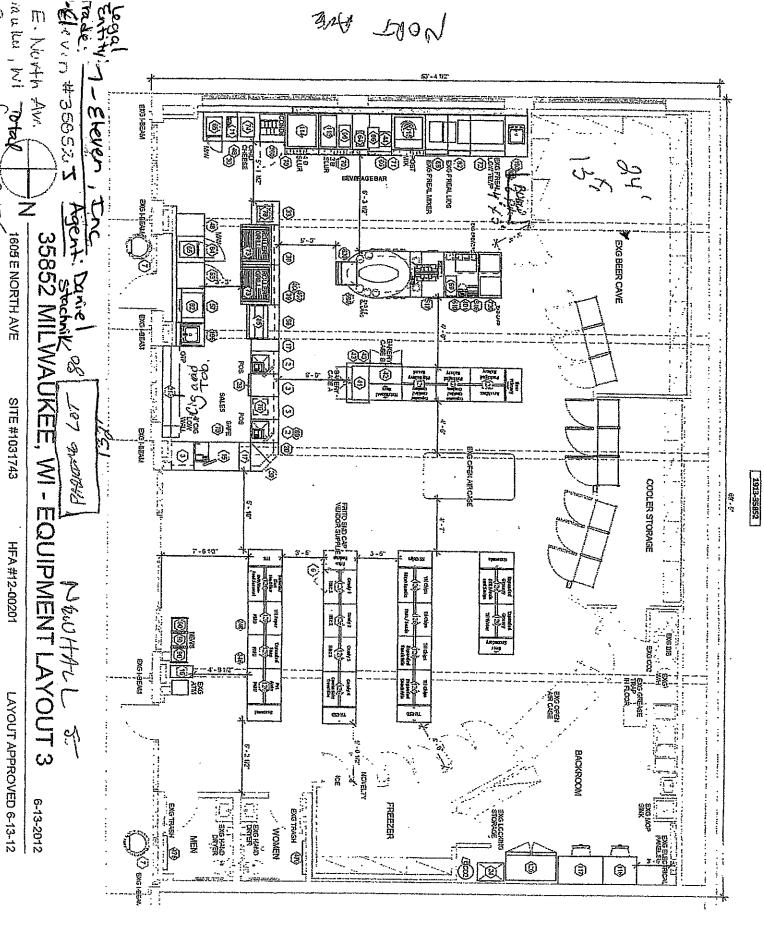
### ccl-wmplan 1/9/18

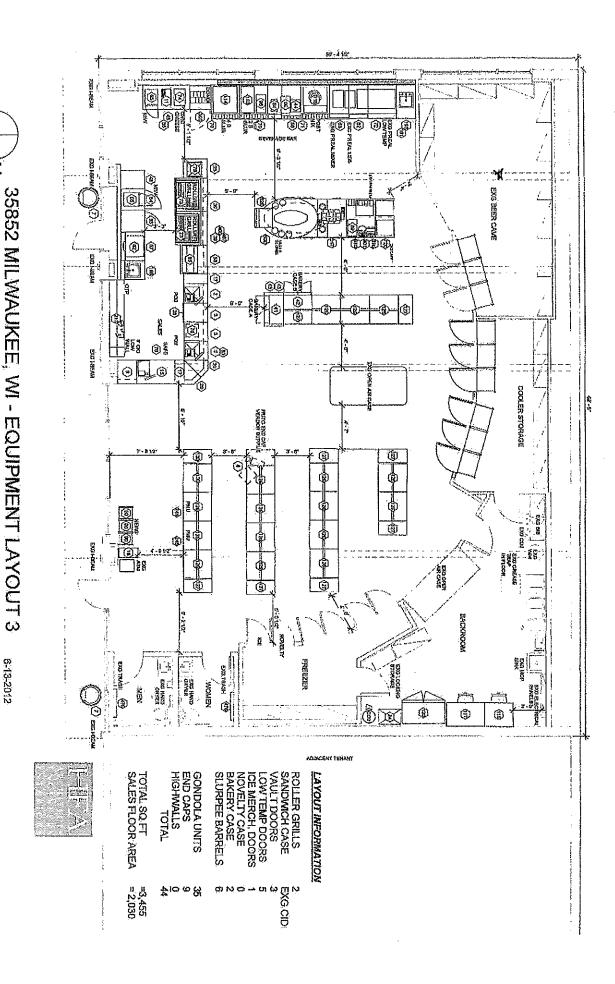


### WEIGHTS & MEASURES PLAN OF OPERATION

Office of the City Clerk License Division
200 E. Wells St. Room 105, Milwaukee, WI 53202
[414] 286-2238 <u>www.milwaukee.gov/license</u> <u>license@milwaukee.gov</u>

Legal Entity Name: 7-Eleven, Inc. of/b/a 7-Eleven #35652J
Legal Entity Name: 7-Eleven, Inc. a/b/a 7-Eleven #35652 J  Premise Address: 1609 E. North Ave, Hilwaukin WI 53202
Type of Business
Provide a brief description of the establishment/business:  LXI Sting Convenience 5tore with charge in operator
Other licenses may be required depending on the type of business you are operating.
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:
Signature
Signature of Sole Proprietor, Partner, or 20% or more Shareholder  Signature of additional partner or 20% or more shareholder
(if there are no 20% or more shareholders, Corporate Officer-print name/title and sign)
This form must be submitted with the Business License Application, Weights & Measures License Supplemental Application, and appropriate fee. Forms can be obtained online at <a href="https://www.milwaukee.gov/licenses">www.milwaukee.gov/licenses</a> .





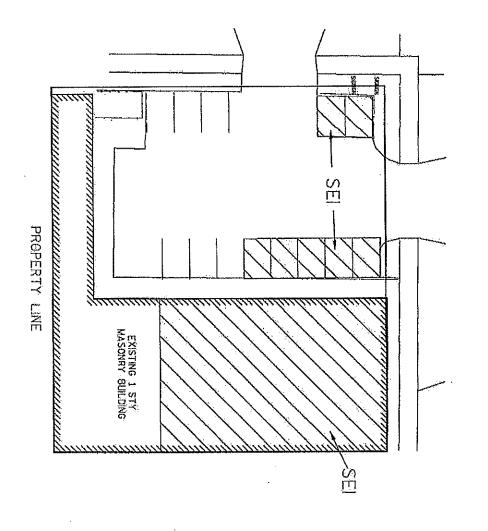
1805 E NORTH AVE

SITE #1031743

HFA #12-00201

LAYOUT APPROVED 6-13-12

## NORTH NEWHALL STREET



G	JORE
	1

OPEN PANTRY FOOD
MARTS OF WISCONSIN
10505 CORPORATE DRIVE,
SUITE 101
PLEASANT PRAIRIE, WI
53159-1605

EXHIBIT 1609 E, NORTH AVE MILWAUKEE, WISCONSIN

ENGINEES				
K.	Singh	& Assoc	iates,	Inc.
PODERE ROBBITED & EXTENDED PLANT HENDERGE CONSTITUTES				

NOOTEKS KOKNOOTETS & EST	PARTHET PLANT TO SELECT SE	ベルイ
1	i ja fučku juli i Partuncjulit Hrvatnijacki tru	
11	"Grande, W7 53123	
Phone (163101-117)	n Court of Wildelia and American States	-

DRAWN BY:	G.B.J.
CHECKED BY:	PAK.
CATE	08/05/12
PROJECT NO.:	4844
DRAWING FILE	EX101020

E. NORTH AVENUE