



**CITY OF MILWAUKEE
OFFICE OF THE CITY CLERK**

Wednesday, August 29, 2018

COMMITTEE MEETING NOTICE

AD 09

Laporsha M Cooper
10734 W Villard Av

Milwaukee, WI 53225

You are requested to attend a hearing which is to be held in Room 301-B, Third Floor, City Hall on:

Tuesday, September 11, 2018 at 09:15 AM

Regarding: Your Class B Tavern, Food Dealer, and Public Entertainment Premises License Applications Requesting Disc Jockey, Jukebox, Patrons Dancing, 5 Amusement Machines, 12 Bowling Lanes, and 1 Pool Table for "Court Lanes Mill" at 4707 W Mill 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 in City Hall is available at reduced rates (5 hour limit) at the Milwaukee Center on the southwest corner of East Kilbourn and North Water Street. Parking tickets must be validated in the first floor information booth in City Hall.

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: _____

Jessica Celella

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

Case : 101002413650

Client Info:

Name:

Address:

Phone Number: :

Email:

Confidential?: N

Issue: City Clerk License Object/Support Web

Date Submitted: 08/01/2018

Status: open

Date Completed:

Address: 4707 W MILL RD

Due Date: 08/31/2018

Reason for request:

Object to License| WE OBJECT TO THE APPLICATION FOR A NEW LICENSE FOR COURT LANES MILL. WE ARE THE GRACELAND BLOCK WATCH.Parking,LOUD MUSIC,LITTER, LATE HOURS WITH LIQUOR IS NOT WANTED IN OUR NEIGHBORHOOD. PLEASE DENY!

Case notes:

1. entered address: 4707 W MILL RD

Staff comments:

Agent Created Case

[Click here to view map and/or images](#)

REDACTED RECORD

Date:07/28/18
Officer: Tracey Geniesse

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

Name of Premise: Court Lanes
Address: 4707 W Mill Rd
Phone: 414-353-7116

Owner: Cooper, Laporsha b/f 08/05/1991
Owner address: 10734 W Villard Ave
City State Zip: Milwaukee, WI 53225
Owner Phone: 414-484-2637
Owner email: lmcoop36@icloud.com

Licensee/Agent: Cooper, Laporsha
Home Address: 10734 W Villard Avw
City State Zip: Milwaukee, WI 53225
Phone: 414-484-2637
Email: lmcoop36@icloud.com

Preferred contact: Cooper, Bennie C b/m03/07/1971

Location currently open: YES NO

Projected open date: 08/01/18

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: bowling alley

Licenses currently held:

- Alcohol: Yes No Class: #:
- Tobacco: Yes No #:
- Food: Yes No #:
- Occupancy: Yes No #:
- Other: Yes No Type: #:
- Other: Yes No Type: #:

Who is your alcohol distributor? Badger

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 bus stop? Yes No
7. Is there a bus shelter? Yes No N/A
8. Street parking Yes No
9. Is there a parking lot Yes No
10. Is the parking lot clean? Yes No N/A
11. Is the parking lot well lit? Yes No N/A
12. Valet Parking Yes No
 - a. Will this lot have a guard? Yes No N/A
 - b. Will this lot have cameras? Yes No N/A
13. Are there areas where a person could conceal themselves Yes No
14. Is there exterior lighting? Yes No. Does it appears to be adequate Yes No
15. Exterior Payphone? Yes No
16. Are there No Loitering Signs posted? Yes No
17. Are there exterior security cameras Yes No How Many: 4
18. Are the address numbers prominently displayed and easy to see Yes No

Exterior Comments: Needs to put up No Loitering signs

Camera Survey:

19. Does this location have security cameras? Yes No
20. Are they in working order? Yes No
21. What format are the cameras?
 - a. Color Yes No

- b. Digital Yes No
- c. VCR Yes No
- d. Recorded Yes No

- 22. How long is footage stored for later viewing: Unknown
- 23. Are there exterior cameras Yes No How many: 4
- 24. Are there interior cameras Yes No How many: 4
- 25. Do all employees know how to retrieve recorded digital images/footage? Yes No
- 26. Cameras located in parking lot Yes No N/A How many: 4

Camera Survey Comments:

Interior Survey:

- 27. What is the planned/posted capacity 200 bowling alley, 100 hall total of 300
- 28. What is the minimum number of employees that will be on premise 4
- 29. 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
- 30. Is the interior of the location neat and clean? Yes No
- 31. Does an interior camera face the entrance/exit? Yes No
- 32. Are emergency and non-emergency numbers posted near the phone? Yes No
- 33. 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

Interior Comments:

Security

- 34. How many security personnel are going to be employed: 1 N/A
- 35. How will they be deployed: Interior Exterior 1 N/A
- 36. What days will they be deployed Mon Tue Wed Thu Fri Sat Sun ALL
- 37. Will the security be managed by business or contracted
- 38. Will they be armed Yes No N/A
- 39. What type of security measures will be used: N/A
 - Wanding/metal detector
 - ID Scanner
 - Dress Code
 - Cover Charge
 - Age restriction
 - Other
- 40. When at capacity, how will the overflow crowd be managed? Security will monitor and have a counter
- 41. Will a guard monitor the overflow crowd at all times? Yes No

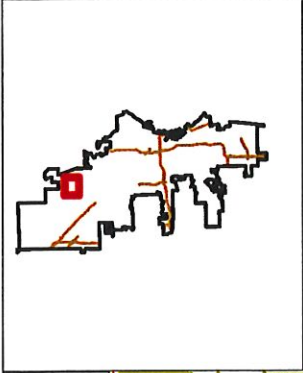
Security Comments: Unknown what company and Unknown if they will be armed at this point

ADDITIONAL COMMENTS/RECOMMENDATIONS:

Post no loitering signs, consider a ID reader and wand.

Alcohol Concentration for 4707 W Mill Rd

City of Milwaukee, Wisconsin



- Legend -

Street names 10,000



City limits

Freeways 15,000



Major streets 10,000



Street names 10,000



ADDRESS 4707 W MILL RD



Map Scale: 1: 10,000

Disclaimer
7/12/2018

© City of Milwaukee, Wisconsin
Map Milwaukee: Property Information

- Notes -

Alcohol Establishments within a .5 Mile Radius Centered on 4707 W Mill Rd as of July 12th, 2018



Department of Administration - ITMD

Alcohol Concentration for 4707 W Mill Rd

There are No Alcohol Establishments within a .5 Mile radius Centered on 4707 W Mill Rd as of July 12th, 2018.



Wednesday, August 29, 2018

Licenses Committee Notice of Hearing

J M SUTTON
6665 N RANGE LINE Rd

GLENDALE, WI 53209

Date: 9/11/2018
Time: 09:15 AM
Location: Room 301-B, Third Floor, City Hall

The Licenses Committee will consider the following license application:

Class B Tavern, Food Dealer, and Public Entertainment Premises License
Applications Requesting Disc Jockey, Jukebox, Patrons Dancing, 5 Amusement
Machines, 12 Bowling Lanes, and 1 Pool Table
Laporsha M Cooper
Court Lanes Mill at 4707 W Mill Rd

Please note this application may be recommended for denial based on fitness of the location due to concentration of alcohol beverage outlets in the area. If the application is denied for this reason, no other application for an alcohol beverage license for this location shall be recommended for approval by the Licenses Committee within three years of the date of denial unless the applicant has demonstrated a change of circumstances since the prior denial.

If you have any questions, please call (414) 286-2238.





Wednesday, August 29, 2018



Notice of Public Hearing

COOPER, Laporsha M

Court Lanes Mill at 4707 W Mill Rd

Class B Tavern, Food Dealer, and Public Entertainment Premises License Applications
Requesting Disc Jockey, Jukebox, Patrons Dancing, 5 Amusement Machines, 12 Bowling Lanes,
and 1 Pool Table

Tuesday, September 11, 2018 at 9:15 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 9/11/2018 at 9:15 AM, in Room 301-B, Third Floor, City Hall. If you wish, you may provide testimony at the hearing regarding the request; see below for further information. You are not required to attend the hearing. Once the Licenses Committee makes its recommendation, this recommendation is forwarded to the full Common Council for approval at its next regularly scheduled hearing. Please review the information below and if you have further questions regarding this process, please contact the License Division at (414) 286-2238.

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	4624 W MILL RD	MILWAUKEE, WI 53218
CURRENT OCCUPANT	4805 W MILL RD	MILWAUKEE, WI 53218
CURRENT OCCUPANT	6430 N 48TH CT	MILWAUKEE, WI 53223
CURRENT OCCUPANT	4811 W MILL RD	MILWAUKEE, WI 53218
CURRENT OCCUPANT	4808 W MILL RD	MILWAUKEE, WI 53218
CURRENT OCCUPANT	4810 W MILL RD	MILWAUKEE, WI 53218
CURRENT OCCUPANT	4722 W MILL RD	MILWAUKEE, WI 53218
CURRENT OCCUPANT	4632 W MILL RD	MILWAUKEE, WI 53218
CURRENT OCCUPANT	4625 W MILL RD	MILWAUKEE, WI 53218
CURRENT OCCUPANT	4621 W MILL RD	MILWAUKEE, WI 53218
CURRENT OCCUPANT	6436 N 48TH CT	MILWAUKEE, WI 53223
CURRENT OCCUPANT	4706 W MILL RD	MILWAUKEE, WI 53218
CURRENT OCCUPANT	4630 W MILL RD	MILWAUKEE, WI 53218
CURRENT OCCUPANT	4802 W MILL RD	MILWAUKEE, WI 53218
CURRENT OCCUPANT	4714 W MILL RD	MILWAUKEE, WI 53218
CURRENT OCCUPANT	4707 W MILL RD	MILWAUKEE, WI 53218
CURRENT OCCUPANT	4622 W MILL RD	MILWAUKEE, WI 53218
CURRENT OCCUPANT	6423 N 47TH ST	MILWAUKEE, WI 53223
CURRENT OCCUPANT	4621 W MILL RD A	MILWAUKEE, WI 53218
CURRENT OCCUPANT	4708 W MILL RD	MILWAUKEE, WI 53218
CURRENT OCCUPANT	6409 N 47TH ST	MILWAUKEE, WI 53223

Total Records: 21

Radius: 250.0 feet and Center of Circle: 4707 W Mill Rd



BUSINESS LICENSE PLAN OF OPERATION

cci-busplan 12/14/17

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

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:

Bowling Alley- Family Fun Entertainment

Do you have any experience operating this type of business? No Yes If yes, explain: Bartending, Customer Service, Bowling alley.

2. Business Operations

- a. Proposed Opening Date: 08/01/2018
- 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: Food dealer Restuarant
- 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: _____

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: Metal Bucket on westside
- b. Number of Garbage Cans: Inside: 9 Locations: Bar Area, Bathroom, Lanes, Kitchen.
Outside: 1 Locations: Northeast parking lot + Front Door
- c. Is a crowd control barrier used? No Yes If yes, describe: _____
- d. How many restrooms are on the premises? 5
- e. Name of solid waste contractor: Advanced Disposal Waste Management Other: Togo

5. Security

- a. Are there onsite parking spaces? No Yes If yes, indicate how many? 44 and describe the parking security plan: Cameras
- b. Is there a loading zone? No Yes If yes, describe the loading area security plan: _____
- c. Will you have security personnel on premise? No Yes If yes, how many? _____ and answer the following:
 What are their responsibilities? _____
 Is security equipment used? No Yes If yes, describe _____
 List their licensing, certification, or training credentials _____
- d. Will there be security cameras? No Yes If yes, where? Main entrance, Lanes, Bar, outside
- e. Will searches/identification checks be done upon entry? No Yes If yes, describe _____

6. Percentage of Sales (must total 100%)

Alcohol <u>20</u> %	Food <u>10</u> %	Secondhand Merchandise <u>0</u> %	Precious Metals & Gems <u>0</u> %
Entertainment <u>70</u> %	Cigarettes <u>0</u> %	Personal Services (such as tattoo, body piercing, salon, tailor, tanning, etc.) <u>0</u> %	Other _____ % Describe: _____
Pawnbroker Activity <u>0</u> %	Salvaged Materials (such as scrap metal) <u>0</u> %		

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 Gas Station Extended Hours Class "B" Tavern Weights & Measures
- Secondhand Dealer Precious Metal & Gem Other: public Entertainment premises

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

Capacity 300 (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):

1st Floor 2nd 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: Mill Rd.

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: J.M. Sutton Phone Number: 414-251-0193

Business Owner Address: 6665 N. Range line Rd, Glendale 53209

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	6:00 AM	2:00 AM	60	All Ages	None
Monday	6:00 AM	2:00 AM	70	All Ages	None
Tuesday	6:00 AM	2:00 AM	70	All Ages	None
Wednesday	6:00 AM	2:00 AM	70	All Ages	None
Thursday	6:00 AM	2:00 AM	70	All Ages	None
Friday	6:00 AM	2:30 AM	40	All Ages	None
Saturday	6:00 AM	2:30 AM	40	All Ages	None

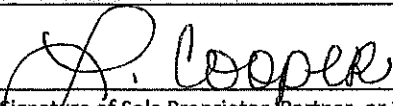
An Extended Hours Establishment License is required for any convenience store, filling station, personal service establishment (such as tattoo, body piercing, salon, tailor, tanning, etc.), recording studio or restaurant which is open between the hours of 12:00 a.m. and 5:00 a.m.

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)


 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

Legal Entity Name: LADORSKA COOPER

Premise Address: 4707 W. Mill 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 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: _____

Proof of Ownership, Lease, or Offer to Purchase (New & Transfer Applicants Only)

Submit proof of ownership, lease, or offer to purchase the building with this application.
A lease or offer to purchase must:

- a) Be in the same legal entity name as that apply for the license
- b) Reflect the same address as the premises address on this application
- c) Reflect current dates and
- d) Be signed by the lessor/seller and lessee/buyer

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.)? J. M. Sutton
- c) Are you purchasing the stock and/or fixtures? No Yes If yes, amount paid \$ _____
- d) Total amount paid for business \$ N/A
- e) Total amount paid for goodwill of the business \$ 0

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 07/01/18 Ends 6/30/2019
- b) Monthly rental \$2,000.00
- 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)? 10 yrs.
- 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 occupancy 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): _____

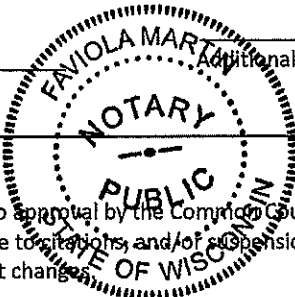
Notarized Signatures of Applicants

SUBSCRIBED AND SWORN TO BEFORE ME
 This 12 day of July, 20 18

 (Clerk/Notary Public)

J. Cooper
 Sole Proprietor, Partner, 20% or more Shareholder, or
 Agent – only if there are no 20% or more shareholders

My Commission Expires 2-22-2020
 *Notary Seal must be affixed.



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 premise applicants must submit the following:

- Proof of ownership, lease or offer to purchase the building
- Detailed floor plan
- If a restaurant, copy of the menu



PUBLIC ENTERTAINMENT PREMISES LICENSE SUPPLEMENTAL APPLICATION

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

PREMISES ADDRESS: 4707 W. Mill Rd

TYPES OF ENTERTAINMENT (CHECK ALL THAT APPLY)

<input type="checkbox"/> Instrumental Musicians	<input type="checkbox"/> Bands	<input type="checkbox"/> Battle of the Bands	<input type="checkbox"/> Comedy Acts
<input checked="" type="checkbox"/> Disc Jockey	<input type="checkbox"/> Magic Shows	<input type="checkbox"/> Poetry Readings	<input type="checkbox"/> Dancing by Performers
<input checked="" type="checkbox"/> Jukebox	<input type="checkbox"/> Wrestling	<input type="checkbox"/> Patron Contests	<input checked="" type="checkbox"/> Patrons Dancing
<input type="checkbox"/> Adult Entertainment/ Strippers/Erotic Dance	<input type="checkbox"/> Karaoke	<input checked="" type="checkbox"/> Bowling Alley How many? <u>12 lanes</u>	<input checked="" type="checkbox"/> Pool Tables How many? <u>1</u>
<input type="checkbox"/> Motion Pictures on Projection Screens – How many? _____	<input checked="" type="checkbox"/> Amusement Machines – How many? <u>5</u>	<input type="checkbox"/> Concerts Approx. # per year? _____	<input type="checkbox"/> Theatrical Performances Approx. # per year? _____
<input type="checkbox"/> Other: _____			

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: _____

LEGAL CAPACITY OF PREMISES

100 (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.

NOTARIZED SIGNATURES

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.

SUBSCRIBED AND SWORN TO BEFORE ME

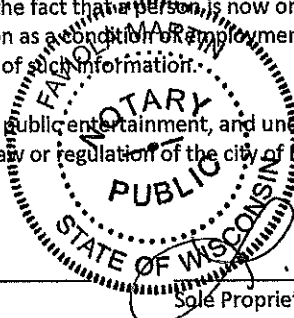
This 12 day of July, 2018

[Signature]
(Clerk/Notary Public)

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

My Commission Expires 2-22-2020
Notary Seal must be affixed

Additional partner or 20% or more shareholder _____



Office Use Only:
Initials: _____ Filed: _____ App: _____

Check if only PEP (must be heard w/in 60 days) Granted _____ License # _____



FOOD DEALER LICENSE PLAN OF OPERATION

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

Legal Entity Name: Laporsha Cooper

Premises Address: 4707 W. Mill Rd

SECTION 1 TYPE OF BUSINESS

Type of application (check one): taking over a currently operating business starting a new business
 Anticipated opening date? 08/01/18

Check the type that best describes your business (check only one):
 See Food Dealer License Information sheet for definitions.

Restaurant Bed & Breakfast
 Retail Establishment Base for Food Peddler
 Base for Temporary/Seasonal Food Stand

If retail, will it be a convenience store? Yes No
 (Convenience Stores have less than 5,000 sq ft of retail space, primary business is the sale of basic food items, and in addition sells household products)

In addition, will any wholesale business be done? Yes No

If yes, what percentage of the business will be wholesale? Less than 25% 25% or More (Contact DATCP)*

Will retail items be sold? No Yes If Yes, indicate percentage of food sales 8 %

Will restaurant items be sold? No* Yes If Yes, indicate percentage of food sales 92 %

* If you checked "25% or More" of the business will be wholesale and answered "No" to restaurant items being sold, do not continue completing this application. A City of Milwaukee License is not required. Contact DATCP only.

SECTION 2 FOOD PROCESSING

Will any food processing be done? No Yes
Processing is defined as assembling, grinding, cutting, mixing, baking, coating, stuffing, packing, bottling, grilling, canning, extracting, fermenting, distilling, pickling, freezing, drying, smoking, or packaging.

If Yes, check the types of food items:

SNACKS & BEVERAGES
includes, but is not limited to, ice cream/soft serve, lemonade, snow cones, coffee, espresso, cappuccino, tea, fruit juice, smoothies, candy, dispensed soda, fruit cups, bakery, cookies, popcorn, kettle corn, cotton candy, funnel cakes, fritters, tortilla chips w/ cheese

MEALS
includes, but is 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

SECTION 3 FOOD REQUIRING TEMPERATURE CONTROL

Will any food that requires temperature control be sold? No Yes
 (includes dairy products such as milk, cheese, and ice cream, fish, shellfish, meat, poultry)

If yes, list the types of food items: veggies, cheese, meat

SECTION 4 SHARED KITCHEN

Will you be sharing kitchen space with another operator?

- No If No, SKIP to Section 5
- Yes If Yes, check one:
 - I will rent space from another operator ("Shared Kitchen Agreement" is required)
 - I will rent space to another operator (peddler/caterer)

SECTION 5 DETAILS OF OPERATION

Answer the following questions:

- 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
 - If Yes to outdoor activities, check all that apply: Bar Cooking/Grilling Dining
- Will you have a drive thru window? No Yes
 - If Yes to drive thru, are hours different from inside? No Yes
 - If Yes, provide drive thru hours: _____
- Will any scales or barcode scanners be used? No Yes
 - If Yes, a Weights & Measures application must be completed and a license obtained.

SECTION 6 ADDITIONAL SITES

Where will food be prepared and/or sold?

- At a single site
 - At multiple sites (for example, a hotel with several dining rooms or bars) How many? _____
- If multiple sites, attach a Food Dealer Additional Site Addendum (ccl-foodadd) for each additional site.

SECTION 7 CONSTRUCTION OR CHANGES

Are you planning any construction, remodeling or equipment changes?

- No If No, SKIP to Section 8
- Yes If Yes, check all that apply:
 - New construction of a building
 - Construction changes to an existing building
 - Renovation or remodeling
 - Equipment changes only (installation or replacement)

Provide a brief description of the changes: _____

Start date: _____

Name, Address & Phone Number of Architect: _____

Name, Address & Phone Number of Contractor: _____

SECTION 8 ALCOHOL BEVERAGES

Are you applying for an alcohol beverage license?

No

If No, SKIP to Section 9

Yes

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

SECTION 9 ACKNOWLEDGEMENTS & SIGNATURE

You must initial each item confirming your understanding:

LC

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

LC

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.

LC

I understand the district alderperson will review and either approve or deny my application. If denied, 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.

LC

I understand proof of payment for all license fees must be on file in the License Division before the license may be issued.

LC

I understand the license must be issued and posted in my establishment prior to opening for business.

LC

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

Signature of sole proprietor, partner, agent or 20% shareholder: _____

J. Cooper

Signature of additional partner(s): _____

Menu - Court Lanes Mill

Hamburgers - \$3.00

Hamburgers + Fries - \$4.50

Chz Burgers - \$3.50

Chz Burgers + Fries - \$5.00

6 wings - \$5.50 w/ Fries

Fries - \$2.00

4 Chicken strips - \$5.50 w/ Fries

Pizza a - \$6.00 Chz

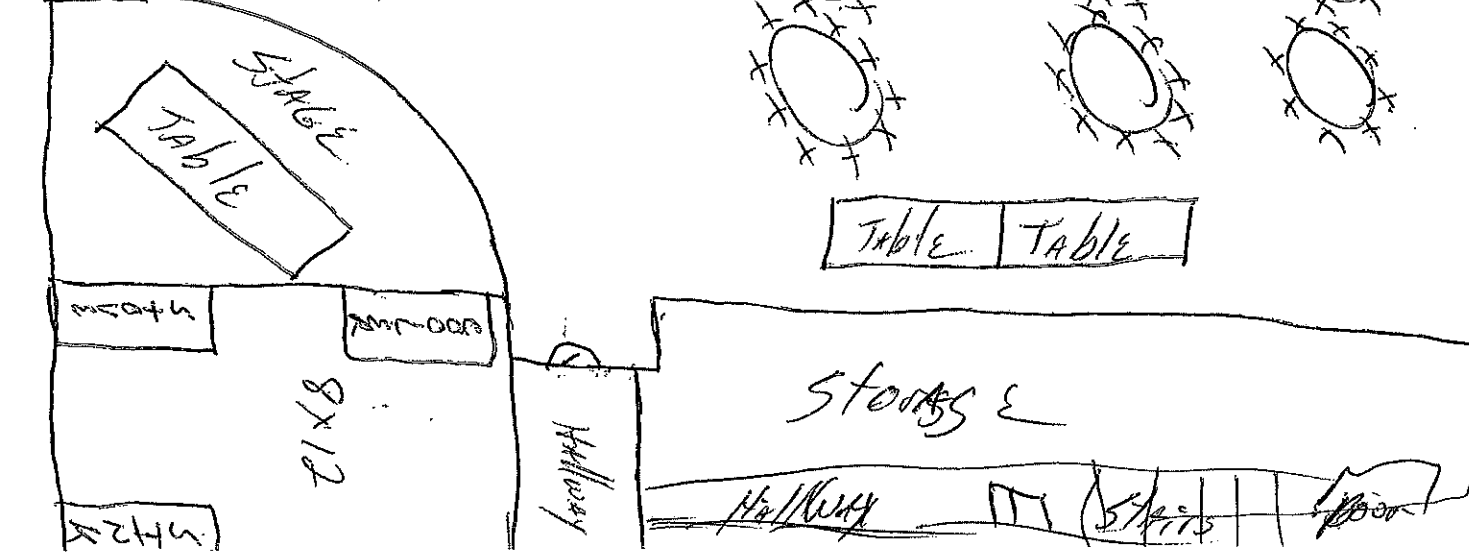
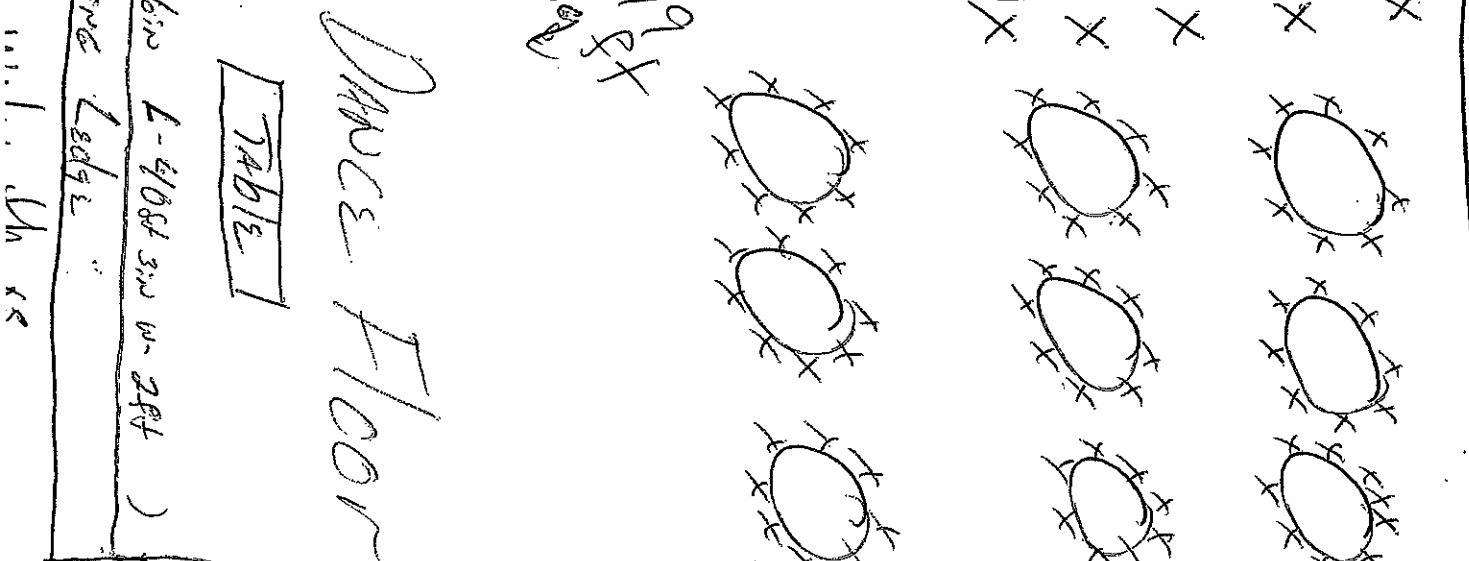
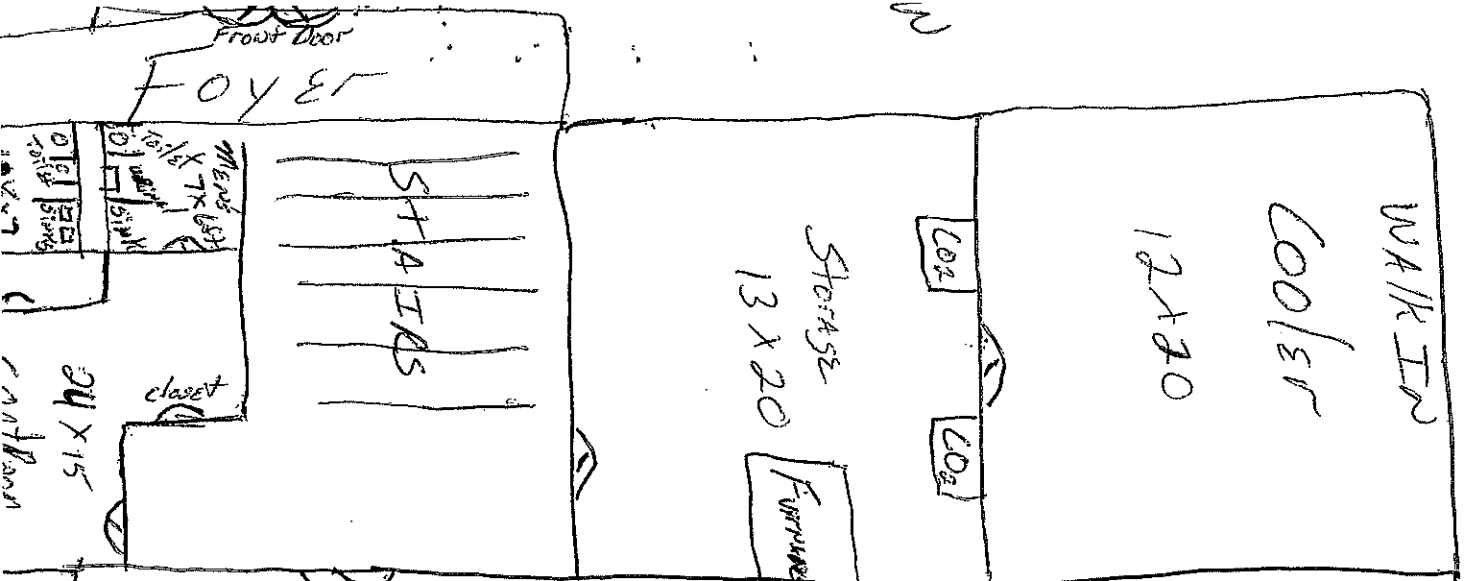
\$ 7.50 Chz + 1 topping (sausage or pep.)

\$ 8.50 Chz + saug + pep.

\$ 9.00 Supreme

\$ 10.00 Deluxe

Mill road
N
BASEMENT





CITY OF MILWAUKEE
OFFICE OF THE CITY CLERK

Wednesday, August 29, 2018

COMMITTEE MEETING NOTICE

AD 09

MYLES, Shalonda, Agent
Mid-City Motorsports LTD
N112 W16298 Mequon Rd #127

Germantown, WI 53022

You are requested to attend a hearing which is to be held in Room 301-B, Third Floor, City Hall on:

Tuesday, September 11, 2018 at 09:15 AM

Regarding: Your Secondhand Motor Vehicle Dealer's License Wholesale Only Application as agent for "Mid-City Motorsports LTD" for "Mid-City Motorsports" at 7384 N 60TH St.

There is a possibility that your application may be denied for one or more of the following reasons: Neighborhood Objections to the granting of such a license due to the creation of undesirable neighborhood problems, such as: parking and traffic problems which cause the normal flow of traffic on roadways and alleys to be impeded, loitering, littering, noise, loud music, and conduct which will have an adverse impact on the public health, safety and welfare of the community. Additionally, the over concentration of secondhand motor vehicle dealers in the neighborhood such that the concentration will have an adverse impact on the public health, safety and welfare of the neighborhood. you do not meet the statutory and municipal requirements; the appropriateness of the location to be licensed and whether the location will create undesirable neighborhood problems, whether or not you have been charged with or convicted of any felony, misdemeanor, municipal offense or other offense, the circumstances of which substantially relate to the licensed activity; and any other factors which reasonably relate to the public health, safety and welfare. Please be advised the public will be able to provide information to the committee in person or in writing. The committee will receive and consider evidence regarding the above mentioned criteria.

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 in City Hall is available at reduced rates (5 hour limit) at the Milwaukee Center on the southwest corner of East Kilbourn and North Water Street. Parking tickets must be validated in the first floor information booth in City Hall.

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: _____

Jessica Celella
License Division Manager

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



Wednesday, August 29, 2018



Notice of Public Hearing

MYLES, Shalonda, Agent
Mid-City Motorsports at 7384 N 60TH St
Secondhand Motor Vehicle Dealer's License - Wholesale Only Application

Tuesday, September 11, 2018 at 9:15 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 9/11/2018 at 9:15 AM, in Room 301-B, Third Floor, City Hall. If you wish, you may provide testimony at the hearing regarding the request; see below for further information. You are not required to attend the hearing. Once the Licenses Committee makes its recommendation, this recommendation is forwarded to the full Common Council for approval at its next regularly scheduled hearing. Please review the information below and if you have further questions regarding this process, please contact the License Division at (414) 286-2238.

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	7424A N 60TH ST	MILWAUKEE, WI 53223
CURRENT OCCUPANT	7253 N 60TH ST	MILWAUKEE, WI 53223

Total Records: 2

Radius: 1000.0 feet and Center of Circle: 7384 N 60th St



BUSINESS LICENSE PLAN OF OPERATION

ccl-busplan 12/14/17

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

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) wholesale used cars

Provide a detailed description of the type of business you plan on operating:
Auction license (office space only)

Do you have any experience operating this type of business? No Yes If yes, explain:

2. Business Operations

- a. Proposed Opening Date: 09/01/2018
- 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: _____

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: _____
- b. Number of Garbage Cans: Inside: 1 Locations: conference room
Outside: 1 Locations: DOCK
- 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: Eagle

5. Security

- a. Are there onsite parking spaces? No Yes If yes, indicate how many? 20 and describe the parking security plan: Blink camera system, posted signs.
- b. Is there a loading zone? No Yes If yes, describe the loading area security plan: _____
- c. Will you have security personnel on premise? No Yes If yes, how many? _____ and answer the following:
 What are their responsibilities? _____
 Is security equipment used? No Yes If yes, describe Blink camera system
 List their licensing, certification, or training credentials N/A
- d. Will there be security cameras? No Yes If yes, where? _____
- e. Will searches/identification checks be done upon entry? No Yes If yes, describe N/A

6. Percentage of Sales (must total 100%)

Alcohol <u>0</u> %	Food <u>0</u> %	Secondhand Merchandise <u>0</u> %	Precious Metals & Gems <u>0</u> %
Entertainment <u>0</u> %	Cigarettes <u>0</u> %	Personal Services (such as tattoo, body piercing, salon, tailor, tanning, etc.) <u>0</u> %	Other <u>100</u> % Describe: <u>Auction license</u>
Pawnbroker Activity <u>0</u> %	Salvaged Materials (such as scrap metal) <u>0</u> %		

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

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 Gas Station Extended Hours Class "B" Tavern Weights & Measures
- Secondhand Dealer Precious Metal & Gem Other: N/A

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

Capacity N/A (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):

1st Floor 2nd Floor Basement Storage Patio Beer Garden Sidewalk Café Deck Rooftop

Other: Describe: OFFICE space only

b. Describe Location: Major Thoroughfare Secondary Street Other: _____

c. Nearest Major Cross Street: Good Hope Road

d. Describe Building: Free Standing Building Strip Mall Other: _____

e. Describe Premises Structure: Single Story Multi-Story - # of Stories _____ Other: _____

f. Describe Surrounding Area: Commercial Residential Industrial Other: _____

g. Building Owner Name: Mega development Phone Number: 414 839 4848

Business Owner Address: 12600 Wisconsin Ave Brookfield WI

10. Hours of Operation & Customers

Will customers be entering the premises? No Yes

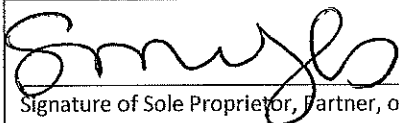
Day of the Week	Proposed Hours of Operation:		Estimated Number of Customers expected each day	Potential Age Range of Customers	Class B Tavern Applicant Only: Age Restriction (if none, write 'None')
	Open Time (include a.m. or p.m.)	Close Time (include a.m. or p.m.)			
Sunday	Closed				
Monday	8:30am	4:00pm	0	0	0
Tuesday					
Wednesday	8:30am	4:00pm	0	0	0
Thursday					
Friday	8:30am	4:00pm	0	0	0
Saturday					

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 Permitted Hours of Operation: Class A: 8:00 am to 9:00 pm Sunday thru Saturday
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)



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.



SECONDHAND MOTOR VEHICLE DEALER LICENSE SUPPLEMENTAL PLAN OF OPERATION

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

Legal Entity Name: MID-CITY MOTORSPORTS LTD

Premises Address: 7384 N. Both Street Milwaukee, WI 53223

SECTION 1 LICENSE TYPE

What type of license are you applying for? (check one) Retail Wholesale

SECTION 2

Will you also be dealing in secondhand vehicle parts? Yes No

If wholesale, is the premises address a residential (home) address? Yes No

If yes, you must obtain a Home Occupational Statement from the Department of Neighborhood Services (414) 286-3874.
No vehicles can be parked and no customers are allowed at the premises.

The following questions in Section 2 do not apply to wholesale from a residential address. Go to Section 3.

Number of parking spaces available to customers/employees 20

Number of parking spaces that will be used for display/storage of Secondhand Motor Vehicles 0

Do you understand that all vehicles associated with the business must be stored on the licensed premise? Yes No

What are your plans to ensure this requirement is met (check all that apply)? Employee Training
 Supervisor Monitoring Fenced Lot Keys Kept in Locked Box Other: _____

Do you understand all maintenance/repair work to these vehicles must be confined to the licensed premise? Yes No

What are your plans to ensure this requirement is met (check all that apply)? Employee Training
 Supervisor Monitoring Designated Repair Area Other: N/A NO REPAIRS ON SITE

Do you understand all keys to used motor vehicles offered for sale must be kept in a secure lockbox inside the dealership building at all times when the dealership is not open for business? Yes No

What are your plans to ensure this requirement is met (check all that apply)? Employee Training
 Supervisor Monitoring Other: CAMERA SYSTEM

SECTION 3 DISCLOSURE

Has any person on the application ever had a license relating to the activities licensed in Milwaukee Code of Ordinances Chapter 92 denied, not renewed, suspended, or revoked? No Yes

If yes, provide the circumstances and jurisdiction in which the event occurred (including a record of any actions from the State Department of Transportation and Financial Institutions relating to suspensions, revocations, forfeitures and warnings imposed by these departments relating to the operation of any automotive sales business by the applicant):

SECTION 4 SIGNATURES

[Signature] _____
Sole Proprietor, Partner, or 20% or more Shareholder Additional partner or 20% or more shareholder
(If there are no 20% or more shareholders,
Corporate Officer-print name/title and sign)