



CITY OF MILWAUKEE
OFFICE OF THE CITY CLERK

Thursday, September 14, 2023

COMMITTEE MEETING NOTICE

AD 07

WADE, Christopher, Agent
Crave BBQ Restaurant LLC
2454 N 22ND ST
Milwaukee, WI 53206

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

Tuesday, September 26, 2023 at 01:00 PM

The access code is <https://meet.goto.com/986783021>. If you wish to call in: [+1 \(408\) 650-3123](tel:+14086503123) and use Access Code: [986-783-021](tel:986783021). Please see the enclosed best practices document for further instructions.

Regarding: Your Class B Tavern License Application as agent for "Crave BBQ Restaurant LLC" for "Crave BBQ" at 4923-25 W FOND DU LAC 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.

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

Roman, Carmen

From: License
Sent: Wednesday, June 21, 2023 2:53 PM
To: Roman, Carmen
Cc: Cooney, Jim; Martin, Faviola
Subject: FW: Lisa Zollicoffer

Please add objection

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

REDACTED RECORD



From: ''
Sent: Wednesday, June 21, 2023 2:43 PM
To: License <LICENSE@milwaukee.gov>
Subject:

Good afternoon,

I _____ is submitting my disapproval for Class B Tavern licensing to Crave BBQ located at 4923-25 W Fond du lac Ave Milwaukee Wisconsin 53216.

After _____ the area for _____ plus years, _____ cars driving over the speed limit which have caused a high number of car accidents over the years. We do not need more taverns, bars or restaurants which serves alcoholic beverages! Buildings have been ran into and people have been hit in the area! I believe the access of alcohol on our extremely busy streets will increase the numbers of accidents, violence and debris! Also, it increases the risk of our children and adult pedestrians being hit by drunken drivers while crossing the corner at Fond du lac and Melvina St or the surrounding areas!

Also see, the forwarding report from Chief Health Policy Advisor Dr. Ben Weston that Milwaukee County has reported 2022: Milwaukee County's deaths has increased by 64% since 2017 due to alcohol!

Please do not license Crave BBQ a Class B Tavern license!

Let's revitalize Milwaukee to it's beauty and not help it decline to a heap of trash!

Thank you,

REDACTED RECORD

Chief Health Policy Advisor shared this graphic Monday to reveal that alcohol-related deaths in Milwaukee County have risen substantially since 2019. "Has your alcohol intake [increased]?" he asked. "NOW is a great time to cut back."

County Sees Rise in Alcohol-Related Deaths

Mortality trends show that alcohol-related deaths in Wisconsin have increased dramatically after the COVID pandemic. Chief Health Policy Advisor Dr. Ben Weston recently shared a graphic that showed the national average for alcohol-related deaths increased by 26% between 2019 and 2020. In Wisconsin, it increased by 64%.

Dr. Weston explained the COVID-19 pandemic played a large role in the increase. "COVID has been a society-changing event for many folks and has caused a lot of strain," he said. "More broadly, when we look at past years,

there are all sorts of things that contribute to alcohol use. That could be mental health issues, it could be stress, it could be other substance issues as well."

If you or someone you know struggles with alcohol use, Milwaukee County has resources available for free. To get started, call the 24-hour line at (414) 257-722 or visit the Wisconsin Department of Health Services' [Substance Use Resources webpage](#).

This message is intended for the sole use of the individual and entity to which it is addressed, and may contain information that is privileged, confidential and exempt from disclosure under applicable law. If you are not the intended addressee, nor authorized to receive for the intended addressee, you are hereby notified that you may not use, copy, disclose or distribute to anyone the message or any information contained in the message. If you have received this message in error, please immediately advise the sender by reply email and delete the message.

REDACTED RECORD

Date: 07/01/2023
Officer: Alicia Walker &
Dominique Thompson

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

Name of Premise: Crave BBQ
Address: 4923-25 W. Fond Du Lac Av
Phone: 414-509-6278

Owner: Christopher Wade & Maria Wade
Owner address: 2454 N. 22nd St.
City State Zip: Milwaukee, WI 53206
Owner Phone: 414-308-5841 & 414-215-5929
Owner email: cravebbqmke@gmail.com

Licensee/Agent:
Home Address:
City State Zip:
Phone:
Email:

Preferred contact: Christopher Wade

Location currently open: YES NO

Projected open date:

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

Hours of Operation: Sun: 12:00PM – 8:00PM 24 hours Y N
Mon: 12:00PM – 8:00PM
Tue: 12:00PM – 8:00PM
Wed: 12:00PM – 8:00PM
Thu: 12:00PM – 8:00PM
Fri: 12:00PM – 8:00PM
Sat: 12:00PM – 8:00PM

Premise Type: Tavern/Bar
Restaurant
Other:

Licenses currently held:

- Alcohol: Yes No Class: B #: BTAVN 353359
Tobacco: Yes No #:
Food: Yes No #: FREST 353478
Extended Hours: Yes No #:
Secondhand Dealer: Yes No Type: #:
Other: Yes No Type: #:
Other: Yes No Type: #:

Exterior Survey:

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

Camera Survey:

17. Does this location have security cameras? Yes No
18. Are they in working order? Yes No
19. What format are the cameras?
 - a. Color Yes No
 - b. Digital Yes No
 - c. Recorded Yes No
20. How long is footage stored for later viewing: 36 hours
21. Are there exterior cameras Yes No How many: 5
22. Are there interior cameras Yes No How many: 2

23. Do all employees know how to retrieve recorded digital images/footage? Yes No
 24. Cameras located in parking lot Yes No How many

Interior Survey:


25. What is the planned capacity 50
 26. What is the minimum number of employees That will be on premise 4 - 5
 27. Is the storeowner willing to be a standing complainant regarding loitering? Yes No
 a. If yes have them fill out the standing complaint form and give them two of the commercial signs Yes No
 28. Is the interior of the location neat and clean? Yes No
 29. Does an interior camera face the entrance/exit? Yes No
 30. Is there a lockable area that separates employees from customers? Yes No
 31. Are emergency and non-emergency numbers posted near the phone? Yes No
 32. Does the owner know how to contact their police district directly? Yes No
 a. Did you provide a district contact guide to the owner? Yes No

Security

33. How many security personnel are going to be employed: 1
 34. How ill they be deployed: Interior Exterior 1
 35. What days will they be deployed Mon Tue Wed Thu Fri Sat Sun
 36. Will the security be managed by business or contracted
 37. Will they be armed Yes No
 38. What type of security measures to be used:
 Wanding/metal detector
 ID Scanner
 Dress Code No baseball hats, hoodies & gym shoes
 Cover Charge
 Age restriction 30 and up
 Other

ADDITIONAL COMMENTS/RECOMMENDATIONS:

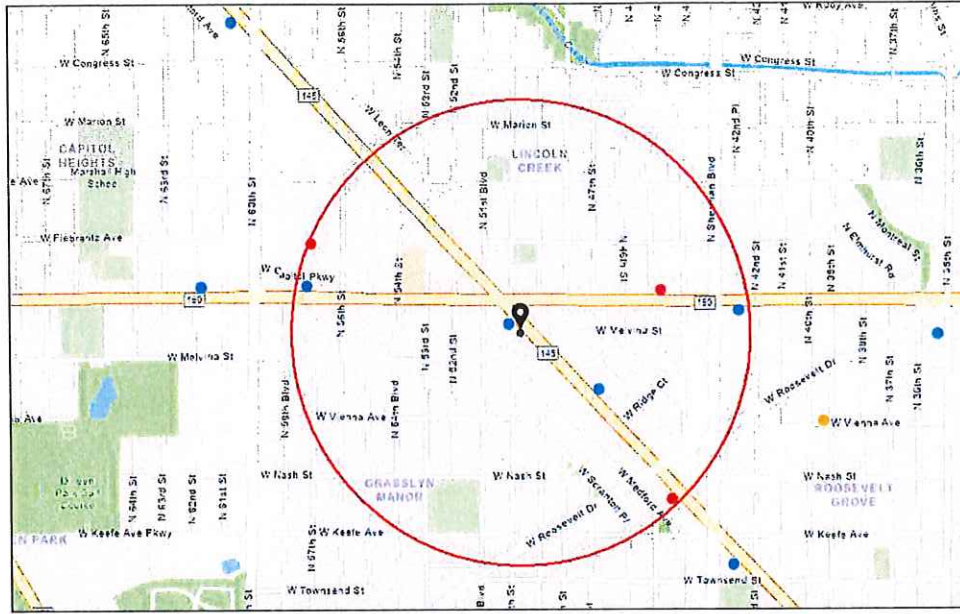
The owner is will be getting No Loitering signs next week. The owner will be changing the storage on the video footage so it can be stored longer. The owner will be adding more camera's in the inside. Only both owners will have access to the video footage. They are not selling alcohol beverages until the Liquor license is approved.

 **City of Milwaukee** 4923 W Fond du Lac Ave

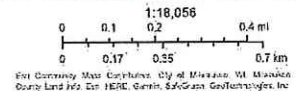
Area of Interest (AOI) Information

Area : 21,862,585.68 ft²

Jun 12 2023 12:23:57 Central Daylight Time



- Alcohol Licenses (active)
- Class B Tavern
 - Class A Fermented Malt Beverage
 - Class A Liquor and Malt
 - City Limits



Summary

Name	Count	Area(ft²)	Length(mi)
Alcohol Licenses	7		

Alcohol Licenses

#	Legal Entity	Trade Name	Licensee	Address	License Type Name	Total Capacity	Expiration Date	Count
1	LAUGHINGCR ABWI INC.	Laughing Crab	Ying Yu, Agt	5712 W CAPITOL DR	Class B Tavern License		6/16/2023, 7:00 PM	1
2	Sandhar Liquor INC	North End Beverage	Manjit K Sandhar, Agt	4409 W Fond Du Lac AV	Class A Malt & Class A Liquor License		10/31/2023, 7:00 PM	1
3	Mega Marts, LLC	Pick N Save #6365	ROCHELLE R SMITH, Agt	5700 W Capitol DR	Class A Malt & Class A Liquor License		11/12/2023, 6:00 PM	1
4	A TASTE OF SOUL MKE LLC	A TASTE OF SOUL MKE	Timothy R Stotts, Agt	4706 W FOND DU LAC AV	Class B Tavern License		1/2/2024, 6:00 PM	1
5	Whiskey Still, LLC	BNB Cap Tap	Bill G Farrow, Agt	4221 W Capitol DR	Class B Tavern License	79	2/5/2024, 6:00 PM	1
6	UPPA YARD LLC	Uppa Yard	Sherine G Edwards, Agt	4943&4947 W FOND DU LAC AV	Class B Tavern License		4/16/2024, 7:00 PM	1
7	DN Group LLC	Best Buy Liquor	RUPINDER K RANDHAWA, Agt	4426 W Capitol DR	Class A Malt & Class A Liquor License		10/23/2023, 7:00 PM	1

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



Thursday, September 14, 2023



Notice of Public Hearing

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WADE, Christopher, Agent
Crave BBQ at 4923-25 W FOND DU LAC Av
Class B Tavern License Application

Tuesday, September 26, 2023 at 1:00 PM

To whom it may concern:

The above application has been made by the above named applicant(s). This requires approval from the Licenses Committee and the Common Council of the City of Milwaukee. The hearing before the Licenses Committee will take place on 9/26/2023 at 1:00 PM in Room 301-B, Third Floor, City Hall. This is a public hearing. Those wishing to view the proceeding are able to do so via the City Channel – Channel 25 on Spectrum Cable – or on the Internet at <http://city.milwaukee.gov/citychannel>. Those wishing to provide oral testimony via phone or internet are asked to contact the staff assistant, Yadira Melendez at (414) 286-2775 or stasst5@milwaukee.gov for necessary information. Please make such requests no later than one business day prior to the start of the meeting. You are not required to attend the hearing, but please see the information below if you would like to provide testimony. Once the Licenses Committee makes its recommendation, this recommendation is forwarded to the full Common Council for approval at its next regularly scheduled hearing.

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

1. The license application is scheduled to be heard at the above time. Due to other hearings running longer than scheduled, you may have to wait some time to provide your testimony.
2. You must appear in person and testify as to matters that you have personally experienced or seen. (You cannot provide testimony for your neighbor, parent or anyone else; this is considered hearsay and cannot be considered by the committee.)
3. No letters or petitions can be accepted by the committee (unless the person who wrote the letter or the persons who signed the petition are present at the committee hearing and willing to testify).
4. Persons opposed to the license application are given the opportunity to testify first; supporters may testify after the opponents have finished.
5. When you are called to testify, you will be sworn in and asked to give your name, and address. (If your first and/or last names are uncommon please spell them.)
6. You may then provide testimony.
 - a. Include only information relating to the above license application.
 - b. Include only information you have personally witnessed or seen.
 - c. Provide concise and relevant information detailing how this business has affected or may affect the peaceful enjoyment of your neighborhood.
 - d. If by the time you have the opportunity to testify, the information you wish to share has already been provided to the committee, you may state that you agree with the previous testimony. Redundant or repetitive testimony will not assist the committee in making its recommendation.
7. After giving your testimony, the members of the Licenses Committee and the licensee may ask questions regarding the testimony you have given or other factors relating to the license application.
8. Business Competition is not a valid basis for denial or non-renewal of a license.
Please Note: If you have submitted an objection to the above application your objection cannot be considered by the committee unless you personally testify at the hearing.

OCCUPANT	MAIL ADDRESS	CITY STATE ZIP
CURRENT OCCUPANT	3883 N 50TH ST	MILWAUKEE, WI 53216-2301
CURRENT OCCUPANT	4835 W CAPITOL DR	MILWAUKEE, WI 53216-2318
CURRENT OCCUPANT	4835 W CAPITOL DR# A	MILWAUKEE, WI 53216-2318
CURRENT OCCUPANT	4909 W MELVINA ST	MILWAUKEE, WI 53216-2344
CURRENT OCCUPANT	4909A W MELVINA ST	MILWAUKEE, WI 53216-2344
CURRENT OCCUPANT	4930 W MELVINA ST	MILWAUKEE, WI 53216-2345
CURRENT OCCUPANT	4932 W MELVINA ST	MILWAUKEE, WI 53216-2345
CURRENT OCCUPANT	4970 W MEDFORD AVE	MILWAUKEE, WI 53216-2335
CURRENT OCCUPANT	5001 W MEDFORD AVE	MILWAUKEE, WI 53216-2336
CURRENT OCCUPANT	5001A W MEDFORD AVE	MILWAUKEE, WI 53216-2336
CURRENT OCCUPANT	5008 W MEDFORD AVE	MILWAUKEE, WI 53216-2337
CURRENT OCCUPANT	5009 W MEDFORD AVE	MILWAUKEE, WI 53216-2336
CURRENT OCCUPANT	5018 W MEDFORD AVE	MILWAUKEE, WI 53216-2337
CURRENT OCCUPANT	5022 W MEDFORD AVE	MILWAUKEE, WI 53216-2337
CURRENT OCCUPANT	5022A W MEDFORD AVE	MILWAUKEE, WI 53216-2337
CURRENT OCCUPANT	5034 W MEDFORD AVE	MILWAUKEE, WI 53216-2337
CURRENT OCCUPANT	5040 W MEDFORD AVE	MILWAUKEE, WI 53216-2337
CURRENT OCCUPANT	5040A W MEDFORD AVE	MILWAUKEE, WI 53216-2337
CURRENT OCCUPANT	5044 W MEDFORD AVE	MILWAUKEE, WI 53216-2337
CURRENT OCCUPANT	5044A W MEDFORD AVE	MILWAUKEE, WI 53216-2337
CURRENT OCCUPANT	5050 W MEDFORD AVE	MILWAUKEE, WI 53216-2337
CURRENT OCCUPANT	5050A W MEDFORD AVE	MILWAUKEE, WI 53216-2337
CURRENT OCCUPANT	5056 W MEDFORD AVE	MILWAUKEE, WI 53216-2337
CURRENT OCCUPANT	5060 W MEDFORD AVE	MILWAUKEE, WI 53216-2337
CURRENT OCCUPANT	5060A W MEDFORD AVE	MILWAUKEE, WI 53216-2337

Blank Notice

Total Records: 25

Radius 250.0 feet and Center of the Circle: 4923 W Fond du Lac Av



BUSINESS LICENSE PLAN OF OPERATION

ccl-busplan 5/12/2020

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

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:

Take out BBA drinks

Do you have any experience operating this type of business? No Yes If yes, explain: Been licensed almost a year now

2. Business Operations

- a. Proposed Opening Date: _____
- 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
- 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: NO LOITERING ALLOWED
- 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: 5 Locations: lobby, kitchen, Outside: 1 Locations: outside area Front Door
- c. Is a crowd control barrier used? No Yes If yes, describe: _____
- d. How many restrooms are on the premises? 2
- e. Name of solid waste contractor: Advanced Disposal Waste Management Other: _____

5. Security

- a. Are there onsite parking spaces? No Yes If yes, how many? _____ and describe the parking security plan: _____
- 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, how many? 4 and list locations: 2 Inside
2 Outside with more coming
- e. Will searches/identification checks be done upon entry? No Yes If yes, describe _____

6. Percentage of Sales (must total 100%)

Alcohol <u>25</u> %	Food <u>75</u> %	Secondhand Merchandise _____ %	Precious Metals & Gems _____ %
Entertainment _____ %	Cigarettes _____ %	_____ %	_____ %
Pawnbroker Activity _____ %	Salvaged Materials _____ % (such as scrap metal)	Personal Services (such as tattoo, body piercing, salon, tailor, tanning, etc.) _____ %	Other _____ % Describe: _____

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

Type 1

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

Type 2

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

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

- Occupancy Permit Cigarette & Tobacco Gas Station Extended Hours Class "B" Tavern Weights & Measures
- Secondhand Dealer Precious Metal & Gem Other: _____

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

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

9. Premises Description

- a. Identify all area(s) of the premises that will be used in operating this business (include areas used only for storage):
 1st Floor 2nd Floor Basement Storage Patio Beer Garden Sidewalk Café Deck Rooftop
 Other: Describe: _____
- b. Describe Location: Major Thoroughfare Secondary Street Other: Fond du Lac Ave.
- c. Nearest Major Cross Street: Capitol
- 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: Zack Snobar Phone Number: 414.419.5763
 Building Owner Address: _____

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	10AM	10pm	50	18-75	None
Monday	10AM	10pm	50	18-75	
Tuesday	10AM	10pm	50	18-75	
Wednesday	10AM	10pm	50	18-75	
Thursday	10AM	10pm	50	18-75	
Friday	10AM	10pm	50	18-75	
Saturday	10AM	10pm	50	18-75	

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)

Maura Wade
 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)

Cl. Wade
 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: <u>Crave BBQ Restaurant LLC.</u>	
Premise Address: <u>4923-25 W. Fond du Lac Ave</u>	
Proximity of Premises to Church, School, Daycare Center or Hospital	
Is the building within 300 feet of any church, school, daycare center or hospital? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
"Service Bar Only" Designation	
If applying for Class B or C license, are you applying for "Service Bar Only"? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Service Bar Only means customers cannot sit at the bar. Alcohol is served to employees who serve patrons seated at tables. No stools, chairs or other articles of furniture shall be placed at the service bar for patrons to sit upon.	
Business Information	
a) Are you taking out this application for anyone that may not be eligible for a license? <input checked="" type="checkbox"/> No <input type="checkbox"/> 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? <input type="checkbox"/> No <input checked="" type="checkbox"/> 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? <input checked="" type="checkbox"/> No <input type="checkbox"/> 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? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, list name and address: _____	
Property Information (New & Transfer Applicants Only)	
a) Do you own or lease the building? <input type="checkbox"/> Own <input checked="" type="checkbox"/> Lease	
b) Who owns the fixtures (for example, coolers, etc.)? <u>ME</u>	
c) Are you purchasing the stock and/or fixtures? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, amount paid \$ _____	
d) Total amount paid for business \$ _____	
e) Total amount paid for goodwill of the business \$ _____ <u>NA</u>	
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? <input type="checkbox"/> No <input type="checkbox"/> Yes	
Lease Information (New & Transfer Applicants who are leasing the premises only)	
a) Date lease begins <u>08-28</u> Ends <u>08-28-2025</u>	
b) Monthly rental \$ <u>3000</u>	
c) Do you have an option to renew the lease? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	
d) Does your lease allow for assignment to another party without the consent of the owner? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
e) For what length of time have you been guaranteed occupancy (number of years)? <u>3 yrs</u>	

Lease Information (Continued)

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

Change of Agent Applicants Only

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

Signature



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

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

New and transfer of premises applicants must submit the following:

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

BBQ
 Crave Restaurant LLC
 4923-25 Fond Du Lac Ave
 Mil, WI 53210

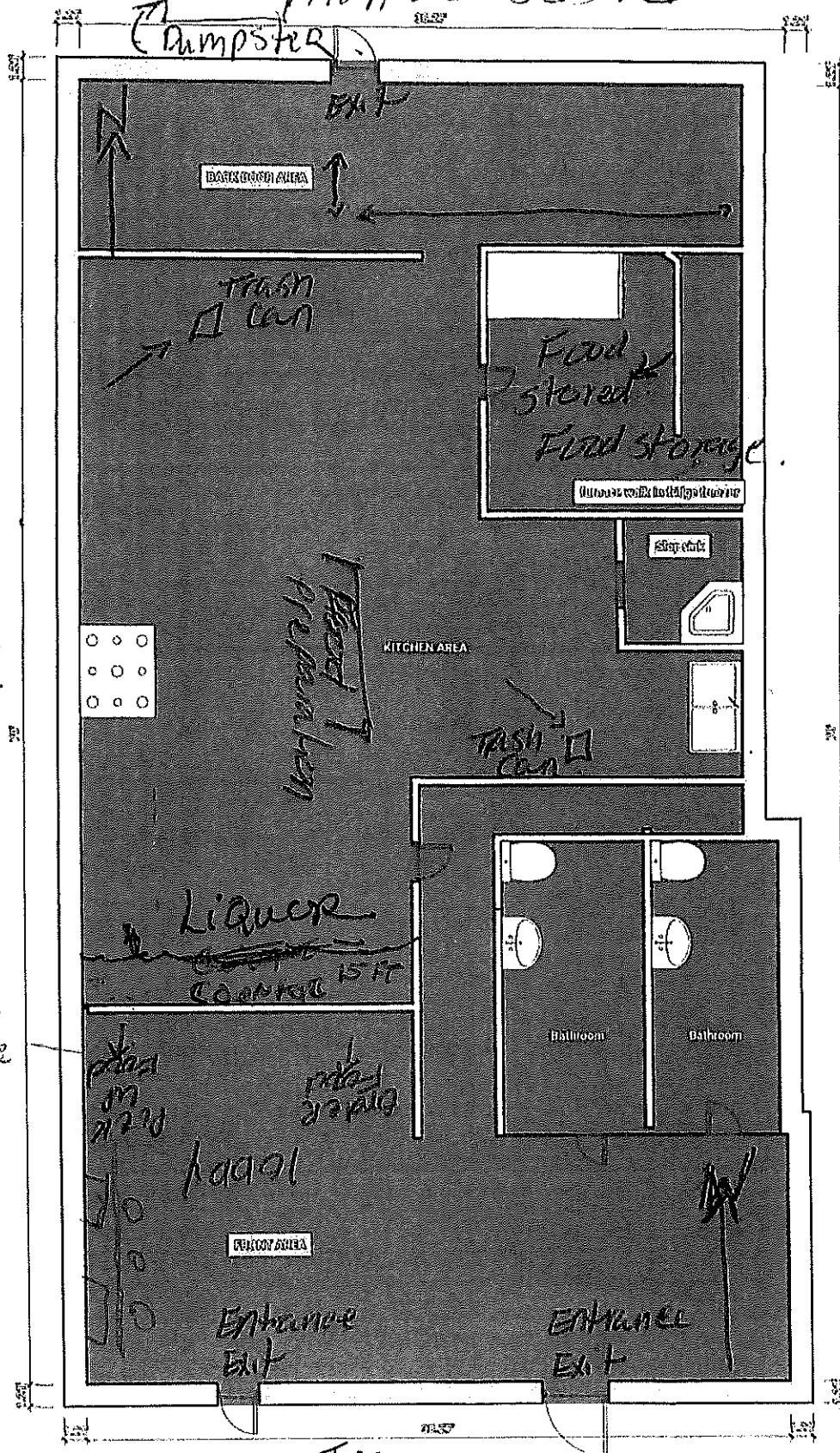
Trade
 NAME

Crave
 BBQ

Agent
 Name

Chris WADE

JUNE 12 23



Melina

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TOTAL SQ
 2,508