



CITY OF MILWAUKEE  
OFFICE OF THE CITY CLERK

Friday, September 03, 2021

COMMITTEE MEETING NOTICE


AD 10

KUMAR, Kulwinder, Agent  
SHARMA INC  
6131 W BLUE MOUND Rd

MILWAUKEE, WI 53213

You are requested to attend a virtual hearing to be held on:

**Monday, September 20, 2021 at 01:35 PM**

**Regarding:** Your Public Entertainment Premises License Application Requesting 3 Amusement Machines as agent for "SHARMA INC" for "ONE STOP PANTRY" at 6131  UE MOUND Rd.

This meeting will be held via GoToMeeting. Please see the enclosed best practices document for further instructions. The access code is <https://global.gotomeeting.com/join/733111181>. If you wish to call in, please call +1 (646) 749-3122 and use Access Code: 733-111-181.

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.

**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 attend this meeting may result in the denial of your license. Individual applicants and partnership applicants must attend or attend by an attorney. The agent or attorney for corporate or limited liability applicants must attend. 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 attend the virtual hearing and are 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 request an interpreter attend the meeting with you, at your expense, so that you can answer questions and participate in your hearing.

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 meeting, please contact the staff assistant, Molly Kuether-Steele at (414) 286-2775 or [molly.kuether-steele@milwaukee.gov](mailto:molly.kuether-steele@milwaukee.gov).

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



Friday, September 03, 2021



# Notice of Public Hearing

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KUMAR, Kulwinder, Agent  
ONE STOP PANTRY at 6131 W BLUE MOUND Rd  
Public Entertainment Premises License Application Requesting 3 Amusement Machines

**Monday, September 20, 2021 at 1:35 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 virtually on 9/20/2021 at 1:35 PM. 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 will be asked to do so by phone or internet and are asked to contact the staff assistant, Molly Kuether-Steele at (414) 286-2775 or [molly.kuether-steele@milwaukee.gov](mailto:molly.kuether-steele@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.

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## 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 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 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.)  
**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.**
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.

OCCUPANT	MAIL ADDRESS	CITY STATE ZIP
CURRENT OCCUPANT	357 N 62ND ST	MILWAUKEE, WI 53213-4130
CURRENT OCCUPANT	359 N 62ND ST	MILWAUKEE, WI 53213-4130
CURRENT OCCUPANT	360 N 63RD ST	MILWAUKEE, WI 53213-4139
CURRENT OCCUPANT	360A N 63RD ST	MILWAUKEE, WI 53213-4139
CURRENT OCCUPANT	361 N 62ND ST	MILWAUKEE, WI 53213-4130
CURRENT OCCUPANT	363 N 62ND ST	MILWAUKEE, WI 53213-4130
CURRENT OCCUPANT	401 N 62ND ST	MILWAUKEE, WI 53213-4132
CURRENT OCCUPANT	403 N 61ST ST	MILWAUKEE, WI 53213-4124
CURRENT OCCUPANT	404 N 63RD ST	MILWAUKEE, WI 53213-4141
CURRENT OCCUPANT	405 N 62ND ST	MILWAUKEE, WI 53213-4132
CURRENT OCCUPANT	407 N 61ST ST	MILWAUKEE, WI 53213-4124
CURRENT OCCUPANT	408 N 63RD ST	MILWAUKEE, WI 53213-4141
CURRENT OCCUPANT	411 N 61ST ST	MILWAUKEE, WI 53213-4124
CURRENT OCCUPANT	411 N 62ND ST	MILWAUKEE, WI 53213-4132
CURRENT OCCUPANT	411A N 62ND ST	MILWAUKEE, WI 53213-4132
CURRENT OCCUPANT	414 N 63RD ST	MILWAUKEE, WI 53213-4141
CURRENT OCCUPANT	415 N 62ND ST	MILWAUKEE, WI 53213-4132
CURRENT OCCUPANT	416 N 63RD ST	MILWAUKEE, WI 53213-4141
CURRENT OCCUPANT	417 N 61ST ST	MILWAUKEE, WI 53213-4124
CURRENT OCCUPANT	419 N 61ST ST	MILWAUKEE, WI 53213-4124
CURRENT OCCUPANT	425 N 61ST ST	MILWAUKEE, WI 53213-4124
CURRENT OCCUPANT	6110 W ST PAUL AVE	MILWAUKEE, WI 53213-4120
CURRENT OCCUPANT	6111 W BLUE MOUND RD, A	MILWAUKEE, WI 53213-4142
CURRENT OCCUPANT	6111 W BLUE MOUND RD, B	MILWAUKEE, WI 53213-4142
CURRENT OCCUPANT	6111 W BLUE MOUND RD, C	MILWAUKEE, WI 53213-4142
CURRENT OCCUPANT	6111 W BLUE MOUND RD, D	MILWAUKEE, WI 53213-4142
CURRENT OCCUPANT	6111 W ST PAUL AVE	MILWAUKEE, WI 53213-4121
CURRENT OCCUPANT	6115A W BLUE MOUND RD	MILWAUKEE, WI 53213-4142
CURRENT OCCUPANT	6116 W ST PAUL AVE	MILWAUKEE, WI 53213-4120
CURRENT OCCUPANT	6116A W ST PAUL AVE	MILWAUKEE, WI 53213-4120
CURRENT OCCUPANT	6117 W ST PAUL AVE	MILWAUKEE, WI 53213-4121
CURRENT OCCUPANT	6119 W ST PAUL AVE	MILWAUKEE, WI 53213-4121
CURRENT OCCUPANT	6125 W ST PAUL AVE	MILWAUKEE, WI 53213-4121
CURRENT OCCUPANT	6130 W ST PAUL AVE	MILWAUKEE, WI 53213-4120
CURRENT OCCUPANT	6130A W ST PAUL AVE	MILWAUKEE, WI 53213-4120
CURRENT OCCUPANT	6133 W ST PAUL AVE	MILWAUKEE, WI 53213-4121
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Total Records: 36

Radius: 250.0 feet and Center of Circle: 6131 W Blue Mound Rd



## ALCOHOL BEVERAGE & PUBLIC ENTERTAINMENT PREMISES SUPPLEMENTAL APPLICATION

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

Legal Entity Name: SHARMA INC

Premise Address: 6131 W. Bluemound Rd

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

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

### "Service Bar Only" Designation

If applying for Class B or C license, are you applying for "Service Bar Only"?  No  Yes

Service Bar Only means customers cannot sit at the bar. Alcohol is served to employees who serve patrons seated at tables. No stools, chairs or other articles of furniture shall be placed at the service bar for patrons to sit upon.

### Business Information

a) Are you taking out this application for anyone that may not be eligible for a license?  No  Yes

If yes, list their name and address: \_\_\_\_\_

b) Will the agent, a partner or the individual licensee be conducting the day-to-day operations of the business?  No  Yes

If no, list the name and address of the person(s) who will: \_\_\_\_\_

Class B Applicants: If the agent, a partner or the individual licensee will not be conducting the day-to-day operations of the business, the person(s) listed above must obtain a Class B Managers license.

c) Does anyone else have money invested or any other interest in this business?  No  Yes

If yes, explain: \_\_\_\_\_

d) Have you made an agreement with anyone to repay any loan or any other payments based upon income from the business?

No  Yes If yes, list name and address: \_\_\_\_\_

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

a) Do you own or lease the building?  Own  Lease

b) Who owns the fixtures (for example, coolers, etc.)? 1 owner

c) Are you purchasing the stock and/or fixtures?  No  Yes If yes, amount paid \$ \_\_\_\_\_

d) Total amount paid for business \$ 1/1/1

e) Total amount paid for goodwill of the business \$ 1/1/1

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 6/1/19 Ends \_\_\_\_\_

b) Monthly rental \$ 1/1/1

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)? Yes

## 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 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):  
\_\_\_\_\_

Signature

*Alexander Kemoz*

*Alexander Kemoz*

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



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: 6131 W. Bluemound Rd MKW 53213

TYPES OF ENTERTAINMENT (CHECK ALL THAT APPLY)

- Instrumental Musicians, Bands, Bowling Alley, Pool Tables, Motion Pictures, Battle of the Bands, Comedy Acts, Disc Jockey, Magic Shows, Poetry Readings, Dancing by Performers, Adult Entertainment, Wrestling, Patron Contests, Patrons Dancing, Amusement Machines (checked), Concerts, Theatrical Performances, Jukebox, Karaoke. Other: Gambling Machine

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.

PROMOTERS/SOUND AMPLIFICATION

Will promoters ever be used for any of the entertainment? [X] No [ ] Yes If Yes, Describe: At any time will sound amplification be used? [X] No [ ] Yes If Yes, Describe: Sound from gambling machine

LEGAL CAPACITY OF PREMISES

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

ACKNOWLEDGEMENT/SIGNATURE

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

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

Office Use Only: Initials: Filed: App: Only PEP? [ ] No [ ] Yes If Yes [ ] Queue to MPD and [ ] Email Merg/Team Lead (must be heard w/in 60 days)



61<sup>st</sup> Street

Bluemound Road

48 ft

2 PARKING

Slot  
Machines

Atm

Ice

Door

5

6

6 ft

Counter

Coffee

16 ft

20 ft  
Shelf

4 ft

20 ft  
Shelf

4 ft

25 ft  
walkin cooler  
soda & juice

Exit

52 ft

3 ft  
Beer cooler  
Storage

7 ft  
18 ft

12 ft

Beer  
Cooler

8 ft

Beer

48 ft

gent: Kulwinder Kumar  
6131 W. Bluemound RD.  
Milwaukee, WI 53213



# PLAN OF OPERATION CONFIRMATION STATEMENT FOR ADDITIONAL LICENSE APPLICATIONS

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

Date: 07/06/2021

New License(s) Being Applied For: Sharma INC

I confirm that the plan of operation on file with the City Clerk License Division which was previously submitted with my BEER LICENSE  
Type of License(s)

application(s) has not changed, except for the addition of this business being operated at 6131 W. Bluemond Rd  
Premises Address

I understand that before any changes to the plan can be made, a "Permanent Change to Business Plan of Operation Application" must be submitted and approved.

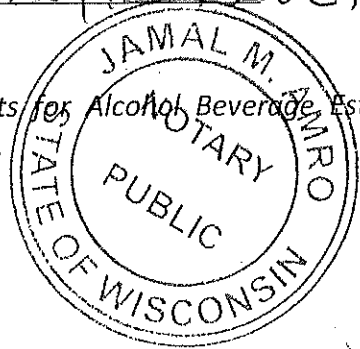
Subscribed and sworn to before me \*\*

this 7<sup>th</sup> day of July, 2021

[Signature]  
Notary Public, State of Wisconsin

Kulwinder Kaur  
Signature of agent, sole proprietor, partner or 20% or more shareholder

My commission expires: 10/15/2021  
Notary Seal must be affixed



\*\* Confirmation Statements for Alcohol Beverage Establishments and Public Entertainment Premises must be notarized.