



CITY OF MILWAUKEE
OFFICE OF THE CITY CLERK

Wednesday, February 22, 2023

COMMITTEE MEETING NOTICE

AD 08

CAMACHO, Maria Y, Agent
MS. YESENIA'S CREATIVE STUDIO LLC
2928 W FOREST HOME Av
Milwaukee, WI 53215

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, March 07, 2023 at 09:45 AM

The access code is <https://meet.goto.com/446591181>. If you wish to call in: +1 (571) 317-3122 and use Access Code: 446-591-181
Please see the enclosed best practices document for further instructions.

Regarding: Your Class B Tavern (Beer and Wine Only), Public Entertainment Premises and Food Dealer License Applications Requesting Instrumental Musicians, Disc Jockey, Poetry Readings, Comedy Acts and Dancing by Performers as agent for "MS. YESENIA'S CREATIVE STUDIO LLC" for "MS. YESENIA'S CREATIVE STUDIO" at 2926 W FOREST HOME 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 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 OW CZARSKI, 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



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JIM OWCZARSKI, CITY CLERK

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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

SERVICE NOW

BY

B. BOHMANN PLUMBING, INC.

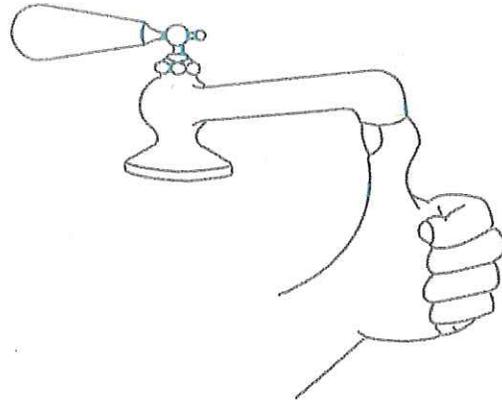
2932 W. Forest Home Ave.

Milwaukee, WI 53215

(414) 645-1444

www.bohmannplumbing.com

info@bohmannplumbing.com



November 15, 2022

Brian and Lina Bohmann

2932-2934 W. Forest Home Ave

2516 S. 30th St

Milwaukee, WI 53215

In Support of License for Ms. Yesenia's Creative Studio LLC.

We are the residential and commercial neighbors of the Camacho's home and commercial spaces. We have known the Comachos since they originally rented the first floor at 2926 W. Forest Home. We find them to be community minded / oriented, family based and a healthy asset to this neighborhood and the overall social structure of Milwaukee.

We personally and professionally applaud their entrepreneurial spirit. We are happy to assist them whenever and however we can.

Their hope to bring more people to this section of Forest Home Ave for social and commercial purposes is life enhancing.

2022 NOV 17 P 3:37
CITY OF MILWAUKEE
LICENSE DIVISION

Date: 12/28/2022
Officer: PO Fabian Garcia

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

Name of Premise: Ms. Yesenia's Creative Studio
Address: 2926 W. Forest Home Avenue
Phone: 414-870-5007

Owner:
Owner address:
City State Zip:
Owner Phone:
Owner email:

Licensee/Agent: Maria Y. Camacho
Home Address: 2928 W. Forest Home Avenue
City State Zip: Milwaukee, WI 53215
Phone: 414-870-5007
Email: mariayesenia1284@gmail.com

Preferred contact: phone

Location currently open: YES NO

Projected open date:

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

Hours of Operation: Sun: Closed 24 hours Y N
Mon: 7a-8p
Tue: 7a-8p
Wed: 7a-8p
Thu: 7a-8p
Fri: 7a-11p
Sat: 8a-3p

Premise Type: Tavern/Bar
Restaurant
Other: Studio

Licenses currently held: None
Alcohol: Yes No Class: #:

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

Exterior Survey:

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

Camera Survey:

17. Does this location have security cameras? Yes No **Will be adding**
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:
21. Are there exterior cameras Yes No How many:
22. Are there interior cameras Yes No How many:
23. Do all employees know how to retrieve recorded digital images/footage? Yes No
24. Cameras located in parking lot Yes No **N/A** How many

Interior Survey:

25. What is the planned capacity under 50
26. What is the minimum number of employees That will be on premise 4
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 **under construction**
29. Does an interior camera face the entrance/exit? Yes No **will add cameras**
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 No planned security at this time.

33. How many security personnel are going to be employed:
34. How will they be deployed: Interior Exterior
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
 - Cover Charge
 - Age restriction
 - Other

ADDITIONAL COMMENTS/RECOMMENDATIONS:

This report was written by Police Officer Fabian Garcia assigned to squad 6264, CLO/CPU.

On Wednesday, December 28, 2022, at 2:30 pm, my partner Officer Ward and I met with licensee/agent Maria Y. Camacho. Mrs. Camacho stated that they plan on opening up this location as a creative studio for youth and their families.

Mrs. Camacho stated that they plan to be open from Monday-Saturday and they are currently under construction. Mrs. Camacho stated they would like to add exterior lights and security cameras but would have to see if that would be possible to add anything to the exterior of the property. Mrs. Camacho stated they plan on adding approximately 8 to 9 interior security cameras. 4 to 5 cameras will be installed in the Café/bar area, one camera in the hallway, which leads to the studio, and 3 cameras inside of the actual studio, which is located in the rear of the property. Mrs. Camacho stated that only a studio manager and her husband and she will have access to surveillance footage. Discussion was had regarding the placement of cameras.

Mrs. Camacho stated they plan on posting "No Loitering" signs as well to the front of the property. There is a gangway that is located between their property and the building to the east of them. Mrs. Camacho and her husband stated that they are already in contact with the property owner of the building to the east of them to go half and half on a fence for that gangway. Mrs. Camacho and her husband were provided with a District resource guide.

No additional comments/recommendations at this time.

2926 W FOREST HOME AVE

Summary

Name	Count	Area(ft ²)	Length(mi)
Alcohol Licenses	13		

Alcohol Licenses

#	Legal Entity	Trade Name	Licensee	Address	License Type Name	Total Capacity	Expiration Date	Count
1	Aarvind Food Mart, LLC	Lucky Food & Beer	LAKHWINDER KAUR, Agt	2638 W Lincoln AV	Class A Fermented Malt Beverage Retailer's License		12/20/2022, 6:00 PM	1
2	Kamal Food Mart, LLC	Kamal Food Mart	Kamal J Singh, Agt	2539 W GRANT ST	Class A Fermented Malt Beverage Retailer's License		1/2/2023, 6:00 PM	1
3	Villana's Place, LLC	Villana's Place	Juan Manuel Macias Gallardo, Agt	3000 W LINCOLN AV	Class B Tavern License	160	2/7/2023, 6:00 PM	1
4	RTSP, LLC	JUST ONE MORE	ANTONIO S PEREZ, Agt	3209 W LINCOLN AV	Class B Tavern License	25	2/8/2023, 6:00 PM	1
5	REHLEH LLC	The Pressroom MKE	Robert E Holmes, Agt	3105 W Forest Home AV	Class B Tavern License		3/23/2023, 7:00 PM	1
6	Valcarcel, LLC	AsianRican Foods	Julie L Valcarcel, Agt	3300 W Lincoln AV	Class B Tavern License		5/24/2023, 7:00 PM	1
7	CHILLY WILLYS SALOON	CHILLY WILLYS SALOON	DAVID W OLSON, SP	3301 W GRANT ST	Class B Tavern License	25	3/1/2023, 6:00 PM	1
8	OBEROI REAL ESTATE LLC	Quick Pick Food Mart	Meetu Oberoi, Agt	3332 W LINCOLN AV	Class A Malt & Class A Liquor License		7/4/2023, 7:00 PM	1
9	El Jimador Restaurant LLC	El Jimador Restaurant	JOSE D ALVAREZ HERNANDEZ, Agt	3447 W Forest Home AV	Class B Tavern License		7/29/2023, 7:00 PM	1
10	LA PICA #3, LLC	LA PICA CARR 3 BAR & HALL	WILLIAM RIVERA, Agt	3427-31 W LINCOLN AV	Class B Tavern License	162	7/28/2023, 7:00 PM	1
11	Restaurante El Rinconcito De Rafa LLC	Carnitas De Rafa Restaurante	Rafael Ruiz Rojo, Agt	2344 S 27th ST	Class B Tavern License		7/26/2023, 7:00 PM	1
12	Agave Azul	Agave Azul	FRANCISCO RIOS, JR, SP	3316 W Lincoln AV	Class B Tavern License	94	9/23/2023, 7:00 PM	1
13	LINCOLN BEER & LIQUOR INC.	LINCOLN BEER & LIQUOR	Gurjit K Singh, Agt	2717 W Lincoln AV	Class A Malt & Class A-Liquor License		10/31/2023, 7:00 PM	1

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



Wednesday, February 22, 2023



Notice of Public Hearing

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CAMACHO, Maria Y, Agent
MS. YESENIA'S CREATIVE STUDIO at 2926 W FOREST HOME Av
Class B Tavern (Beer and Wine Only), Public Entertainment Premises and Food Dealer License
Applications Requesting Instrumental Musicians, Disc Jockey, Poetry Readings, Comedy Acts and
Dancing by Performers

Tuesday, March 07, 2023 at 9:45 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 3/7/2023 at 9:45 AM in Room 301-B, Third Floor, City Hall. This is a public hearing. Those wishing to view the proceeding are able to do so via the City Channel – Channel 25 on Spectrum Cable – or on the Internet at <http://city.milwaukee.gov/citychannel>. Those wishing to provide oral testimony via 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	2454 S 30TH ST	MILWAUKEE, WI 53215-2852
CURRENT OCCUPANT	2455 S 29TH ST	MILWAUKEE, WI 53215-2933
CURRENT OCCUPANT	2455A S 29TH ST	MILWAUKEE, WI 53215-2933
CURRENT OCCUPANT	2459 S 29TH ST	MILWAUKEE, WI 53215-2933
CURRENT OCCUPANT	2459 S 30TH ST	MILWAUKEE, WI 53215-2851
CURRENT OCCUPANT	2460 S 30TH ST	MILWAUKEE, WI 53215-2852
CURRENT OCCUPANT	2461 S 29TH ST	MILWAUKEE, WI 53215-2933
CURRENT OCCUPANT	2467 S 30TH ST	MILWAUKEE, WI 53215-2851
CURRENT OCCUPANT	2472 S 30TH ST	MILWAUKEE, WI 53215-2852
CURRENT OCCUPANT	2512 S 29TH ST	MILWAUKEE, WI 53215-2905
CURRENT OCCUPANT	2512A S 29TH ST	MILWAUKEE, WI 53215-2905
CURRENT OCCUPANT	2516 S 29TH ST	MILWAUKEE, WI 53215-2905
CURRENT OCCUPANT	2516A S 29TH ST	MILWAUKEE, WI 53215-2905
CURRENT OCCUPANT	2519 S 30TH ST	MILWAUKEE, WI 53215-2829
CURRENT OCCUPANT	2520 S 29TH ST	MILWAUKEE, WI 53215-2905
CURRENT OCCUPANT	2521 S 30TH ST	MILWAUKEE, WI 53215-2829
CURRENT OCCUPANT	2522 S 29TH ST	MILWAUKEE, WI 53215-2905
CURRENT OCCUPANT	2522A S 29TH ST	MILWAUKEE, WI 53215-2905
CURRENT OCCUPANT	2522B S 29TH ST	MILWAUKEE, WI 53215-2905
CURRENT OCCUPANT	2533 S 29TH ST	MILWAUKEE, WI 53215-2904
CURRENT OCCUPANT	2535 S 29TH ST	MILWAUKEE, WI 53215-2904
CURRENT OCCUPANT	2537 S 29TH ST	MILWAUKEE, WI 53215-2904
CURRENT OCCUPANT	2539 S 29TH ST	MILWAUKEE, WI 53215-2904
CURRENT OCCUPANT	2541 S 29TH ST	MILWAUKEE, WI 53215-2904
CURRENT OCCUPANT	2543 S 29TH ST	MILWAUKEE, WI 53215-2904
CURRENT OCCUPANT	2545 S 29TH ST	MILWAUKEE, WI 53215-2904
CURRENT OCCUPANT	2547 S 29TH ST	MILWAUKEE, WI 53215-2904
CURRENT OCCUPANT	2549 S 29TH ST	MILWAUKEE, WI 53215-2904
CURRENT OCCUPANT	2554 S 30TH ST	MILWAUKEE, WI 53215-2860
CURRENT OCCUPANT	2554A S 30TH ST	MILWAUKEE, WI 53215-2860
CURRENT OCCUPANT	2900A W ARTHUR AVE	MILWAUKEE, WI 53215-2940
CURRENT OCCUPANT	2902A W ARTHUR AVE	MILWAUKEE, WI 53215-2940
CURRENT OCCUPANT	2902B W ARTHUR AVE	MILWAUKEE, WI 53215-2940
CURRENT OCCUPANT	2904A W ARTHUR AVE	MILWAUKEE, WI 53215-2940
CURRENT OCCUPANT	2904B W ARTHUR AVE	MILWAUKEE, WI 53215-2940
CURRENT OCCUPANT	2906 W ARTHUR AVE	MILWAUKEE, WI 53215-2940
CURRENT OCCUPANT	2912 W ARTHUR AVE	MILWAUKEE, WI 53215-2940
CURRENT OCCUPANT	2914 W ARTHUR AVE	MILWAUKEE, WI 53215-2940
CURRENT OCCUPANT	2918 W FOREST HOME AVE	MILWAUKEE, WI 53215-2947
CURRENT OCCUPANT	2920 W ARTHUR AVE	MILWAUKEE, WI 53215-2940
CURRENT OCCUPANT	2920 W FOREST HOME AVE# A	MILWAUKEE, WI 53215-2947
CURRENT OCCUPANT	2920 W FOREST HOME AVE# B	MILWAUKEE, WI 53215-2947
CURRENT OCCUPANT	2924 W ARTHUR AVE	MILWAUKEE, WI 53215-2940
CURRENT OCCUPANT	2928 W FOREST HOME AVE	MILWAUKEE, WI 53215-2947
CURRENT OCCUPANT	2930 W ARTHUR AVE	MILWAUKEE, WI 53215-2940
CURRENT OCCUPANT	2934 W FOREST HOME AVE	MILWAUKEE, WI 53215-2947

CURRENT OCCUPANT	3002 W ARTHUR AVE	MILWAUKEE, WI 53215-2857
CURRENT OCCUPANT	3002A W ARTHUR AVE	MILWAUKEE, WI 53215-2857
CURRENT OCCUPANT	3006 W ARTHUR AVE	MILWAUKEE, WI 53215-2857
CURRENT OCCUPANT	3008 W ARTHUR AVE	MILWAUKEE, WI 53215-2857
CURRENT OCCUPANT	3012 W ARTHUR AVE	MILWAUKEE, WI 53215-2857
CURRENT OCCUPANT	3013 W ARTHUR AVE	MILWAUKEE, WI 53215-2856
CURRENT OCCUPANT	3016 W ARTHUR AVE	MILWAUKEE, WI 53215-2857
CURRENT OCCUPANT	3017 W ARTHUR AVE	MILWAUKEE, WI 53215-2856

Blank Notice

Total Records: 54

Radius 250.0 feet and Center of Circle: 2926 W Forest Home Av



APPLICATION AMENDMENT

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

Date: 2/23/2013

To the License Division of the City of Milwaukee:

Maria Yessenia Camacho (full legal name), wish to amend my answer(s) on the application for a

Class B Tavern, Public Eat/Drink license at 2926 W Forest Home Ave Milwaukee WI:
(type of license) (premises address, if applicable) 53215
Food Dealer

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

1. Answer to Question(s) # _____ should be: _____
2. Agent should be (full legal name): _____ Also complete 3, 4, 5 & 6
3. Date of birth should be: _____
4. Home address should be (include city/state/zip): _____
5. Phone number should be (include area code): _____
6. Driver's License Number/State ID Number should be: _____
7. Corporation/LLC name should be (full legal name): _____
8. Business name should be: _____
9. Premises address should be (include city/state/zip): _____
10. Business phone number should be (include area code): _____
11. Mailing address should be (include city/state/zip): _____
12. Email address should be: _____
13. Recycling/Salvaging/Towing: Location where vehicle will be parked should be (include city/state/zip): _____
14. Class B Tavern: Age Distinction should be: _____
15. Other: I would like change my class B Tavern to Class B Beer & Class C wine
(Check with the License Division before submitting "Other" amendments using this form.)

Maria Yessenia Camacho
Signature of licensee (Individual, Partner, or Agent of Corp/LLC)

Office Use Only: STAVN Application #: 344802 Date: 2/24/2013 Initials: (ce) To LC: _____
LC Email: MPD NS HD Initials: _____



BUSINESS LICENSE PLAN OF OPERATION

ccl-busplan 5/12/2020

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

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:

Cafe e Creative Studio

Do you have any experience operating this type of business? No Yes If yes, explain: *Restaurant industry / cafe in Mexico*

2. Business Operations

- a. Proposed Opening Date: *Mon - Tuesday Thursday - Friday - Sat*
- 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: *Speakers*

4. Smoking & Sanitation

- a. Are there designated outdoor smoking areas? No Yes If yes, describe: _____
- b. Number of Garbage Cans: Inside: *4* Locations: *Around the Studio e Cafe*
Outside: *1* Locations: *Outside the Door*
- c. Is a crowd control barrier used? No Yes If yes, describe: _____
- d. How many restrooms are on the premises? *1*
- e. Name of solid waste contractor: Advanced Disposal Waste Management Other: *we are still shopping around*

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? 5 and list locations: Above the Bar and the 4 corners of the room
- e. Will searches/identification checks be done upon entry? No Yes If yes, describe to check at the time of purchasing Alcohol

6. Percentage of Sales (must total 100%)

Alcohol <u>25</u> %	Food <u>25</u> %	Secondhand Merchandise <u>1</u> %	Precious Metals & Gems _____ %
Entertainment _____ %	Cigarettes _____ %	Personal Services (such as tattoo, body piercing, salon, tailor, tanning, etc.) _____ %	Other <u>50</u> % Describe: <u>Coffee</u>
Pawnbroker Activity _____ %	Salvaged Materials _____ % (such as scrap metal)		

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: _____ Number of Rooms: _____
 Rooming House: Number of Floors: _____ 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: Facing main st" Forest home ave

c. Nearest Major Cross Street: Forest home ave and 30th st.

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: Maria Yessenia M. Camacho Phone Number: 414-870-5007

Building Owner Address: 2928 W Forest Home Ave Milwaukee WI 53225

10. Hours of Operation & Customers

Will customers be entering the premises? No Yes

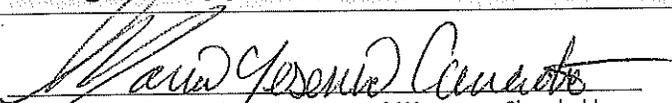
Day of the Week	Proposed Hours of Operation:		Estimated Number of Customers expected each day	Potential Age Range of Customers	Class B Tavern Applicant Only: Age Restriction (If none, write 'None')
	Open Time (include a.m. or p.m.)	Close Time (include a.m. or p.m.)			
Sunday	Close	→			
Monday	7am - 8pm	8 pm	30	0-100	
Tuesday	7am	8 pm	30	0-100	
Wednesday	7am	8 pm	30	0-100	
Thursday	7am	8 pm	30	0-100	
Friday	7am	11 pm	30	0-100	
Saturday	9am	3 pm	30	0-100	

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: Ms. Yesenia Creative Studios
 Premise Address: 2926 W Forest Home Ave Milwaukee WI 53215

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.)? Yesenia Camacho

c) Are you purchasing the stock and/or fixtures? No Yes If yes, amount paid \$ 10,000

d) Total amount paid for business \$ 15,000

e) Total amount paid for goodwill of the business \$ 5,000

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 11-22 Ends 11-27

b) Monthly rental \$ 800

c) Do you have an option to renew the lease? No Yes

d) Does your lease allow for assignment to another party without the consent of the owner? No Yes

e) For what length of time have you been guaranteed occupancy (number of years)? 5 years

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


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

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

New and transfer of premises applicants must submit the following:

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



FOOD DEALER LICENSE PLAN OF OPERATION

ccl-foodplan 2/28/19

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

Legal Entity Name: Ms. Yesenia Creative Studio LLC

Premises Address: 2926 W Forest Home Ave Milwaukee WI 53215

SECTION 1 TYPE OF BUSINESS

What will be the majority of your food sales? (check one)

Restaurant Items (meals):
MEALS include, but are not limited to, chicken, ribs, sandwiches, roasted corn, baked potatoes, hot dogs, brats, tacos, nachos w/ cheese and meat, French fries, cooked or deep fried vegetables/fruit, cooked cheese curds, corn dogs, egg rolls, salads.

Retail Items (snacks and beverages):
RETAIL items include, but are not limited to, ice cream/soft serve, lemonade, snow cones, coffee, espresso, cappuccino, tea, fruit juice, smoothies, candy, dispensed soda, fruit cups, bakery, cookies, kettle corn, cotton candy, funnel cakes, fritters, tortilla chips w/ cheese.

Will it be a convenience store? Yes No
A convenience store contains less than 5,000 square feet of retail space and has, as its primary business, the sale of basic food items and in addition, sells household products or is a filling station that sells basic food items and household products.

Bed & Breakfast
 Micro Market

All Applicants: Submit a menu or a list of food items that will be sold.

Will any wholesale business be done? No Yes If yes, what percentage of food sales will be wholesale?

Less than 25%

25% or More AND:
 Restaurant Items (meals) will be sold – Complete this application and also contact DATCP.
 NO restaurant items (meals) will be sold - Do NOT complete this application. Contact DATCP only.

SECTION 2 FOOD PROCESSING

Will any food processing be done? No Yes

Processing is defined as assembling, grinding, cutting, mixing, baking, coating, stuffing, packing, bottling, grilling, canning, extracting, fermenting, distilling, pickling, freezing, drying, smoking, or packaging.

SECTION 3 FOOD REQUIRING TEMPERATURE CONTROL

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

If yes, list the types of food items: milk, cheese, whip cream, oat milk, juice, \$

SECTION 4 DETAILS OF OPERATION

Will you have seating on site for dining? No Yes

Will you be doing any catering? No Yes

Will you be doing any delivery? No Yes

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

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

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

SECTION 5 ADDITIONAL SITES

Where will food be prepared and/or sold?
 At a single site At multiple sites: How many? _____ (for example, a hotel with several dining rooms or bars)
 If multiple sites, attach a Food Dealer Additional Site Addendum (ccl-foodadd) for each additional site.

SECTION 6 CONSTRUCTION OR CHANGES

Are you planning any construction, remodeling or equipment changes?
 No If No, SKIP to Section 8
 Yes If Yes, check all that apply: New construction of a building Renovation or remodeling
 Construction changes to existing building Equipment changes only

Provide a brief description of the changes: New bathrooms, bar and Setup upgrades.
 Start date: Nov - 1st - 2022
 Name, Address & Phone Number of Architect: _____
 Name, Address & Phone Number of Contractor: _____

SECTION 7 ALCOHOL BEVERAGES

Are you applying for an alcohol beverage license?
 No If No, SKIP to Section 8
 Yes If YES, if your food license is approved prior to the alcohol license, when do you want the food license issued?
 Immediately At the same time as the alcohol license

SECTION 8 ACKNOWLEDGEMENTS & SIGNATURE

You must initial each item confirming your understanding:

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

MP 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.

MP I understand the district alderperson will review and either support or object to my application. If he/she objects, I may appeal and be scheduled to appear before the Licenses Committee. The Licenses Committee will then make a recommendation to the Common Council. The Common Council must grant the license before it may be issued.

MP I understand proof of payment for all license fees must be on file in the License Division before the license may be issued and the license must be issued and posted in my establishment prior to opening for business.

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

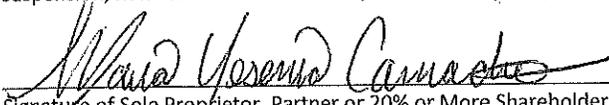
Signature of Sole Proprietor, Partner, or 20% Shareholder: Yanis Yesein Conacho

Signature of Additional Partner: _____



PUBLIC ENTERTAINMENT PREMISES LICENSE SUPPLEMENTAL APPLICATION

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

PREMISES ADDRESS: <u>2926 W Forest Home Ave Milwaukee WI 53215</u>			
TYPES OF ENTERTAINMENT (CHECK ALL THAT APPLY)			
<input checked="" type="checkbox"/> Instrumental Musicians	<input type="checkbox"/> Battle of the Bands	<input checked="" type="checkbox"/> Dancing by Performers	<input type="checkbox"/> Amusement Machines How many? _____
<input type="checkbox"/> Bands	<input checked="" type="checkbox"/> Comedy Acts	<input type="checkbox"/> Adult Entertainment/ Strippers/Erotic Dance	<input type="checkbox"/> Concerts Approx. # per year? _____
<input type="checkbox"/> Bowling Alley How many? _____	<input checked="" type="checkbox"/> Disc Jockey	<input type="checkbox"/> Wrestling	<input type="checkbox"/> Theatrical Performances Approx. # per year? _____
<input type="checkbox"/> Pool Tables How many? _____	<input type="checkbox"/> Magic Shows	<input type="checkbox"/> Patron Contests	<input type="checkbox"/> Jukebox
<input type="checkbox"/> Motion Pictures (movies by admission) - How many? _____	<input checked="" type="checkbox"/> Poetry Readings	<input type="checkbox"/> Patrons Dancing	<input type="checkbox"/> Karaoke
<input checked="" type="checkbox"/> Other: _____			
<i>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.</i>			
PROMOTERS/SOUND AMPLIFICATION			
Will promoters ever be used for any of the entertainment? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If Yes, Describe: _____			
At any time will sound amplification be used? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If Yes, Describe: <u>small, speakers ambiance mood</u>			
LEGAL CAPACITY OF PREMISES			
_____ (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 Mgrs/Team Lead (must be heard w/in 60 days)

MS YESENA'S
STUDIO'S
CAFÈ

LIST OF SPIRITS

Coffee Liqueur

Licor 43

Chambord Raspberry Liqueur

Aged Rum

Gin Tonic

Amaretto

Vodka Tonic

Cherry Brandy

Pure Cognac

Agave Tequila

Local Beers

Imported Beers

Wines & Champagnes

*Ms. Gusen's
Studio & Cafe*

COFFEE & TEAS



PALLA PAYANO

Mocha Latte with Marshmallow fluff and gummies

CAFE DE OYA

Light roast served with a cinnamon stick

BUENOS DIAS SENOR SOL

Med roast, 2 shots of expresó , dulce de leche and served with a smile

GANSITOS

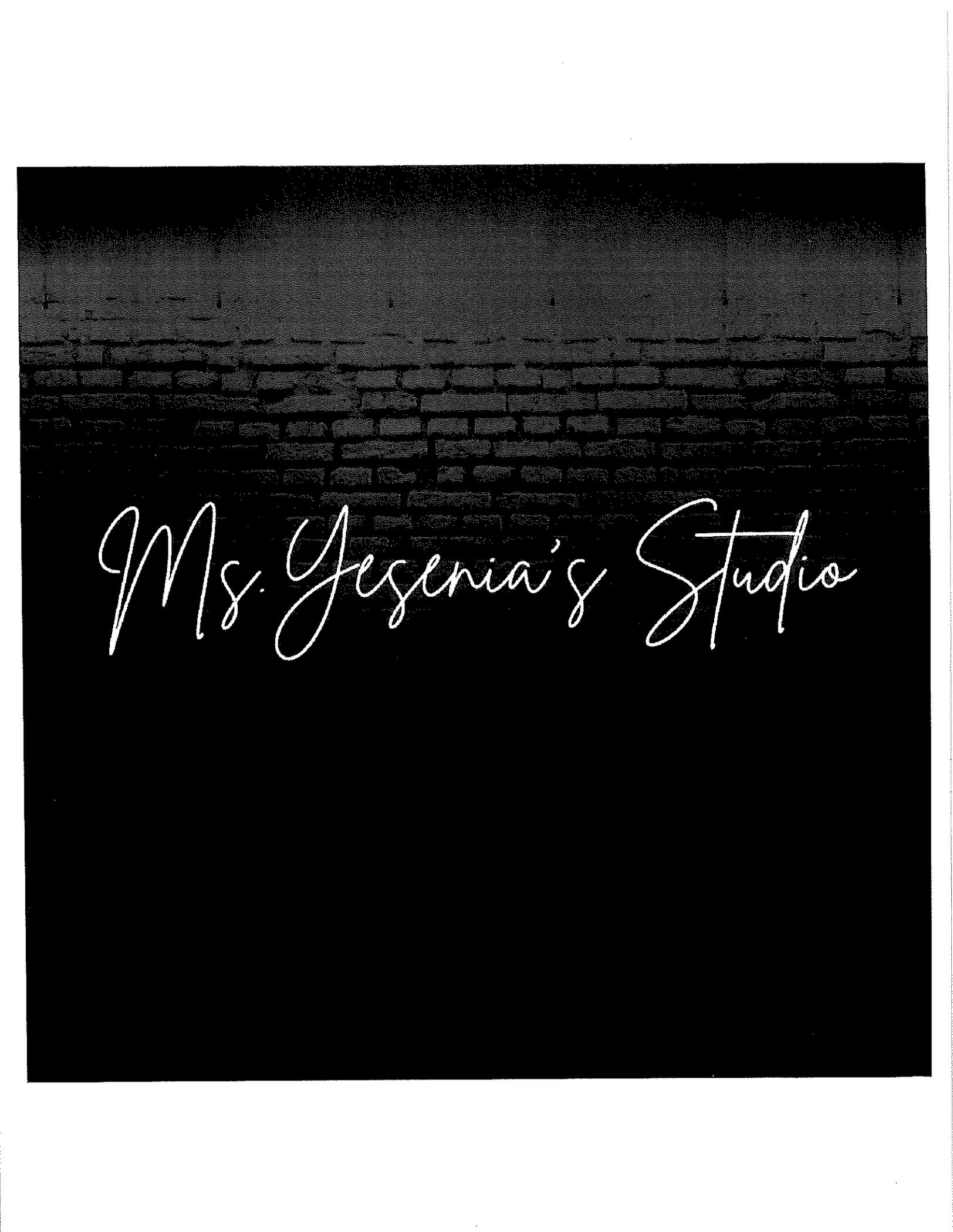
Mocha Latte, raspberry syrup, Topped w Whip Cream

BIEN RELAX

Chamomile, Lavender Tea served with steamed Lemon aid

PANSAS VERDES

Green tea w/ Steamed Mint Lemon aid



Ms. Jesenia's Studio

*Ms. Gerson's
Studio & Cafe*

COFFEE & TEAS



PALLA PAYASO

Mocha Latte with Marshmallow fluff and gummies

CAFE DE OYA

Light roast served with a cinnamon stick

BUENOS DIAS SENOR SOL

Med roast, 2 shots of espresso - dulce de leche and served with a smile

GANSITOS

Mocha Latte, raspberry syrup. Topped w Whip Cream

BIEN RELAX

Chamomile, Lavender Tea served with steamed Lemon aid

PANSAS VERDES

Green tea w/ Steamed Mint Lemon aid