



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

Wednesday, January 14, 2026

**COMMITTEE MEETING NOTICE**

AD 06

KAUR, Pardeep, Agent  
ATKINSON FOOD & BEER INC.  
1901 W ATKINSON Av  
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, January 27, 2026 at 11:10 AM**

The access code is <https://meet.goto.com/673613197>. Please see the enclosed best practices document for further instructions.

**Regarding:** Your Class A Fermented, Food Dealer and Weights & Measures Licenses Application as agent for "ATKINSON FOOD & BEER INC." for "ATKINSON FOOD & BEER" at 1901 W ATKINSON 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](http://www.milwaukee.gov/license)  
Phone: (414) 286-2238 Fax: (414) 286-3057 Email Address: [License@milwaukee.gov](mailto:License@milwaukee.gov)





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

Wednesday, January 14, 2026

**COMMITTEE MEETING NOTICE**

AD 06

KAUR, Pardeep, Agent  
ATKINSON FOOD & BEER INC.  
7401 S STONE HEDGE DR  
FRANKLIN, WI 53132

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**Tuesday, January 27, 2026 at 11:10 AM**

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**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](http://www.milwaukee.gov/license)  
Phone: (414) 286-2238 Fax: (414) 286-3057 Email Address: [License@milwaukee.gov](mailto:License@milwaukee.gov)

Date: 11/14/2025  
Officer: Gussie Nelson

City of Milwaukee Police Department  
90-5-1.5 Crime Prevention Survey  
Convenience Store/Liquor Store Inspection

Name of Premise: Atkinson Food and Bear Inc.  
Address: 1901 W Atkinson St.

Phone: 414-699-7243  
Owner: Harjinder Singh  
Owner address: 7401 S Stonehedge Dr.  
City State Zip: Franklin, WI 53132  
Owner Phone: 414-699-7243  
Owner email: Harry.414.699@gmail.com

Manager: Same as info Above  
Home Address:  
City State Zip:  
Phone:  
Email:

Preferred contact: Harjinder Singh

Location currently open: ☒ YES ☐ NO

Projected open date: October

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

Hours of Operation: Sun: 9:00AM to 9:00PM ☐24 hours ☐Y ☒N  
Mon: 9:00AM to 9:00PM  
Tue: 9:00AM to 9:00PM  
Wed: 9:00AM to 9:00PM  
Thu: 9:00AM to 9:00PM  
Fri: 9:00AM to 9:00PM  
Sat: 9:00AM to 9:00PM

Premise Type: ☐Liquor Store  
☒Convenience Store  
☒Other: Beer

Licenses currently held:

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. Is the parking lot well lit? ☐ Yes ☐ No
9. Are there areas where a person could conceal themselves ☒ Yes ☐ No
10. Is there exterior lighting? ☒ Yes ☐ No. Does it appears to be adequate ☐ Yes ☒ No
11. Exterior Payphone? ☐ Yes ☒ No
12. Are there No Loitering Signs posted? ☐ Yes ☒ No
13. Are there exterior security cameras ☒ Yes ☐ No How Many: 2, 1 working
14. Are the address numbers prominently displayed and easy to see ☒ Yes ☐ No

**Camera Survey:**

15. Does this location have security cameras? ☒ Yes ☐ No
16. Are they in working order? ☒ Yes ☐ No
17. What format are the cameras?
  - a. Color ☒ Yes ☐ No
  - b. Digital ☒ Yes ☐ No
  - c. VCR ☒ Yes ☐ No
  - d. Recorded ☒ Yes ☐ No
18. How long is footage stored for later viewing: Owner is unsure how long it is stored.
19. Are there exterior cameras ☒ Yes ☐ No How many: 1
20. Are there interior cameras ☒ Yes ☐ No How many: 7
21. Do all employees know how to retrieve recorded digital images/footage? ☒ Yes ☐ No

# MILWAUKEE POLICE DEPARTMENT

## LICENSING

### CRIMINAL RECORD/ORDINANCE VIOLATION/INCIDENTS SYNOPSIS

DATE: 11/10/25

LICENSE TYPE: Class B Tavern

NEW: ☒

RENEWAL: ☐

No. 387262

Application Date:

License Location: 1901 W Atkinson

Business Name: Tip Top Foods

Licensee/Applicant: Kaur, Simerjot  
(Last Name, First Name, MI)

Date of Birth:

Home Address:

City:

State:

Zip Code:

Home Phone:

This report is written by Police Officer Penny Monreal, assigned to the License Investigation Unit, Days.

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

1. On 08/02/25 at 2:00p.m., Milwaukee Police were dispatched to a Shots Fired at 1901 W. Atkinson. Investigation revealed suspects entered the business, stole items, then fired shots at the cashier, striking the glass. No one was injured and the business was cooperative, allowing officers to view video surveillance.

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PREVIOUS PREMISE

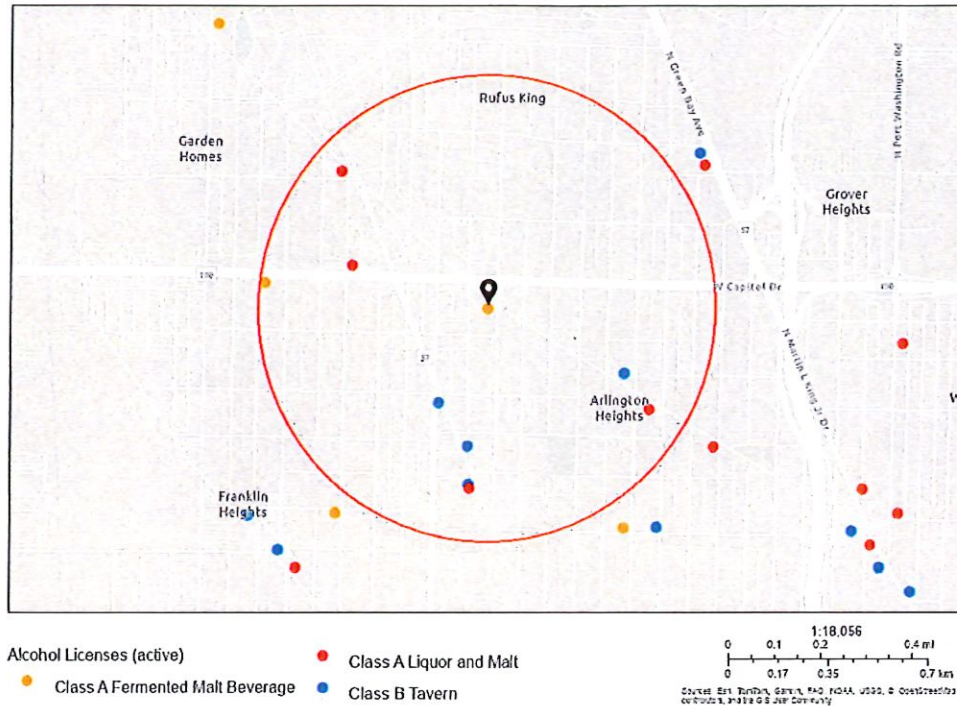


# Concentration Map for 1901 W Atkinson Ave

## Area of Interest (AOI) Information

Area : 21,862,585.72 ft<sup>2</sup>

Oct 30 2025 15:38:19 Central Daylight Time





## Summary

Name	Count	Area(ft²)	Length(mi)
Alcohol Licenses	10		

## Alcohol Licenses

#	Legal Entity	Trade Name	Licensee	Address	License Type Name	Total Capacity	Expiration Date	Count
1	STEWART'S REST SPOT	STEWART'S REST SPOT	JESSICA P STEWART, SP	1422 W ATKINSON AV	Class B Tavern License	49	11/24/2025, 6:00 PM	1
2	Loves Supermarket II LLC	Loves Supermarket II LLC	HARJINDER S BRAICH, Agt	2305 W Atkinson AV	Class A Malt & Class A Liquor License		1/17/2026, 6:00 PM	1
3	CAPITOL KHAPTAD INC	Capital Pantry	Govind Phulara, Agt	2483 W CAPITOL DR	Class A Fermented Malt Beverage Retailer's License		3/19/2026, 7:00 PM	1
4	CATFISH LOUNGE, INC	CATFISH LOUNGE	JAMIE N GLADNEY, Agt	3646 N TEUTONIA AV	Class B Tavern License	80	6/12/2026, 7:00 PM	1
5	YOUNG'S BAR, INC	YOUNG'S BAR	CHARLENE E GRAY, Agt	3571 N TEUTONIA AV	Class B Tavern License	50	6/13/2026, 7:00 PM	1
6	DRAKE, INC	TEUTONIA WINE & LIQUOR	BRYAN DRAKE, Agt	2232 W CAPITOL DR	Class A Malt & Class A Liquor License		6/29/2026, 7:00 PM	1
7	Fateh 1 Inc.	Jack's Liquor	Sukhchain Singh, Agt	3565-67 N Teutonia AV	Class A Malt & Class A Liquor License		7/16/2026, 7:00 PM	1
8	SHANANIGAN S	SHANANIGAN S	CETTERY M GARDNER, SP	3751 N TEUTONIA AV	Class B Tavern License	70	9/23/2026, 7:00 PM	1
9	DHILLON FOOD AND LIQUOR INC.	STARK FOOD	Baljinder S Dhillon, Agt	1301 W ATKINSON AV	Class A Malt & Class A Liquor License		10/16/2026, 7:00 PM	1
10	DEAR N BEER FOOD LLC	DEAR N BEER FOOD	Simerjot Kaur, Agt	1901 W Atkinson AV	Class A Fermented Malt Beverage Retailer's License		10/10/2026, 7:00 PM	1

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



Wednesday, January 14, 2026



# Notice of Public Hearing

Blank Notice

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KAUR, Pardeep, Agent  
ATKINSON FOOD & BEER at 1901 W ATKINSON Av  
Class A Fermented, Food Dealer and Weights & Measures Licenses Application

**Tuesday, January 27, 2026 at 11:10 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 1/27/2026 at 11:10 AM in Room 301-B, Third Floor, City Hall. This is a public hearing. Those wishing to view the proceeding are able to do so via the City Channel – Channel 25 on Spectrum Cable – or on the Internet at <http://city.milwaukee.gov/citychannel>. Those wishing to provide oral testimony via internet are asked to contact the staff assistant, Yadira Melendez at (414) 286-2775 or [stasst5@milwaukee.gov](mailto: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.

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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 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	1811 W CAPITOL DR	MILWAUKEE, WI 53206-2460
CURRENT OCCUPANT	1811A W CAPITOL DR	MILWAUKEE, WI 53206-2460
CURRENT OCCUPANT	1819 W CAPITOL DR	MILWAUKEE, WI 53206-2460
CURRENT OCCUPANT	1819A W CAPITOL DR	MILWAUKEE, WI 53206-2460
CURRENT OCCUPANT	1825 W CAPITOL DR	MILWAUKEE, WI 53206-2460
CURRENT OCCUPANT	1825A W CAPITOL DR	MILWAUKEE, WI 53206-2460
CURRENT OCCUPANT	1831 W CAPITOL DR	MILWAUKEE, WI 53206-2460
CURRENT OCCUPANT	1832 W ATKINSON AVE# 1	MILWAUKEE, WI 53206-2451
CURRENT OCCUPANT	1832 W ATKINSON AVE# 10	MILWAUKEE, WI 53206-2451
CURRENT OCCUPANT	1832 W ATKINSON AVE# 11	MILWAUKEE, WI 53206-2451
CURRENT OCCUPANT	1832 W ATKINSON AVE# 12	MILWAUKEE, WI 53206-2451
CURRENT OCCUPANT	1832 W ATKINSON AVE# 2	MILWAUKEE, WI 53206-2451
CURRENT OCCUPANT	1832 W ATKINSON AVE# 3	MILWAUKEE, WI 53206-2451
CURRENT OCCUPANT	1832 W ATKINSON AVE# 4	MILWAUKEE, WI 53206-2451
CURRENT OCCUPANT	1832 W ATKINSON AVE# 5	MILWAUKEE, WI 53206-2451
CURRENT OCCUPANT	1832 W ATKINSON AVE# 6	MILWAUKEE, WI 53206-2451
CURRENT OCCUPANT	1832 W ATKINSON AVE# 7	MILWAUKEE, WI 53206-2451
CURRENT OCCUPANT	1832 W ATKINSON AVE# 8	MILWAUKEE, WI 53206-2451
CURRENT OCCUPANT	1832 W ATKINSON AVE# 9	MILWAUKEE, WI 53206-2451
CURRENT OCCUPANT	1904 W MELVINA ST	MILWAUKEE, WI 53206-2464
CURRENT OCCUPANT	1905 W ATKINSON AVE# 1	MILWAUKEE, WI 53206-2453
CURRENT OCCUPANT	1905 W ATKINSON AVE# 2	MILWAUKEE, WI 53206-2453
CURRENT OCCUPANT	1905 W ATKINSON AVE# 3	MILWAUKEE, WI 53206-2453
CURRENT OCCUPANT	1905 W ATKINSON AVE# 4	MILWAUKEE, WI 53206-2453
CURRENT OCCUPANT	1905 W ATKINSON AVE# 5	MILWAUKEE, WI 53206-2453
CURRENT OCCUPANT	1905 W ATKINSON AVE# 6	MILWAUKEE, WI 53206-2453
CURRENT OCCUPANT	1908 W MELVINA ST	MILWAUKEE, WI 53206-2464
CURRENT OCCUPANT	1914 W MELVINA ST	MILWAUKEE, WI 53206-2464
CURRENT OCCUPANT	1916 W MELVINA ST	MILWAUKEE, WI 53206-2464
CURRENT OCCUPANT	1917 W ATKINSON AVE# 1	MILWAUKEE, WI 53206-2452
CURRENT OCCUPANT	1917 W ATKINSON AVE# 2	MILWAUKEE, WI 53206-2452
CURRENT OCCUPANT	1917 W ATKINSON AVE# 3	MILWAUKEE, WI 53206-2452
CURRENT OCCUPANT	1917 W ATKINSON AVE# 4	MILWAUKEE, WI 53206-2452
CURRENT OCCUPANT	1918 W MELVINA ST	MILWAUKEE, WI 53206-2464
CURRENT OCCUPANT	1920 W MELVINA ST	MILWAUKEE, WI 53206-2464
CURRENT OCCUPANT	1920A W MELVINA ST	MILWAUKEE, WI 53206-2464
CURRENT OCCUPANT	1925 W ATKINSON AVE	MILWAUKEE, WI 53206-2452
CURRENT OCCUPANT	3888 N 19TH ST	MILWAUKEE, WI 53206-2432
CURRENT OCCUPANT	3900 N 19TH ST	MILWAUKEE, WI 53206-2434
CURRENT OCCUPANT	3900A N 19TH ST	MILWAUKEE, WI 53206-2434
CURRENT OCCUPANT	3902 N 19TH PL	MILWAUKEE, WI 53206-1903
CURRENT OCCUPANT	3904 N 19TH PL	MILWAUKEE, WI 53206-1903
CURRENT OCCUPANT	3908 N 19TH PL	MILWAUKEE, WI 53206-1903
CURRENT OCCUPANT	3908A N 19TH PL	MILWAUKEE, WI 53206-1903
CURRENT OCCUPANT	3914 N 19TH PL	MILWAUKEE, WI 53206-1903
CURRENT OCCUPANT	3915 N 19TH PL	MILWAUKEE, WI 53206-1904

CURRENT OCCUPANT	3918 N 19TH PL	MILWAUKEE, WI 53206-1903
CURRENT OCCUPANT	3919 N 19TH ST	MILWAUKEE, WI 53206-2435
CURRENT OCCUPANT	3920 N 19TH PL	MILWAUKEE, WI 53206-1903
CURRENT OCCUPANT	3922 N 19TH PL	MILWAUKEE, WI 53206-1903
CURRENT OCCUPANT	3922A N 19TH PL	MILWAUKEE, WI 53206-1903
CURRENT OCCUPANT	3923 N 19TH ST	MILWAUKEE, WI 53206-2435
CURRENT OCCUPANT	3923A N 19TH ST	MILWAUKEE, WI 53206-2435
CURRENT OCCUPANT	3926 N 19TH PL	MILWAUKEE, WI 53206-1903
CURRENT OCCUPANT	3926A N 19TH PL	MILWAUKEE, WI 53206-1903
CURRENT OCCUPANT	3927 N 19TH PL	MILWAUKEE, WI 53206-1904
CURRENT OCCUPANT	3929 N 19TH ST	MILWAUKEE, WI 53206-2435
CURRENT OCCUPANT	3930 N 19TH PL	MILWAUKEE, WI 53206-1903
CURRENT OCCUPANT	3933 N 19TH PL	MILWAUKEE, WI 53206-1904
CURRENT OCCUPANT	3934 N 19TH PL	MILWAUKEE, WI 53206-1903
CURRENT OCCUPANT	3934A N 19TH PL	MILWAUKEE, WI 53206-1903
CURRENT OCCUPANT	3937 N 19TH PL	MILWAUKEE, WI 53206-1904
CURRENT OCCUPANT	3937A N 19TH PL	MILWAUKEE, WI 53206-1904
CURRENT OCCUPANT	3939 N 19TH PL	MILWAUKEE, WI 53206-1904
CURRENT OCCUPANT	3940 N 19TH PL	MILWAUKEE, WI 53206-1903
CURRENT OCCUPANT	3940A N 19TH PL	MILWAUKEE, WI 53206-1903
CURRENT OCCUPANT	3945 N 19TH PL	MILWAUKEE, WI 53206-1904
CURRENT OCCUPANT	3947 N 18TH ST	MILWAUKEE, WI 53206-2431
CURRENT OCCUPANT	3947 N 19TH PL	MILWAUKEE, WI 53206-1904
CURRENT OCCUPANT	3947A N 19TH PL	MILWAUKEE, WI 53206-1904
CURRENT OCCUPANT	3949 N 18TH ST	MILWAUKEE, WI 53206-2431
CURRENT OCCUPANT	3951 N 19TH PL	MILWAUKEE, WI 53206-1904
CURRENT OCCUPANT	3953 N 18TH ST	MILWAUKEE, WI 53206-2431
CURRENT OCCUPANT	3959 N 19TH PL# 101	MILWAUKEE, WI 53206-1904
CURRENT OCCUPANT	3959 N 19TH PL# 102	MILWAUKEE, WI 53206-1904
CURRENT OCCUPANT	3959 N 19TH PL# 103	MILWAUKEE, WI 53206-1904
CURRENT OCCUPANT	3959 N 19TH PL# 104	MILWAUKEE, WI 53206-1904
CURRENT OCCUPANT	3959 N 19TH PL# 105	MILWAUKEE, WI 53206-1904
CURRENT OCCUPANT	3959 N 19TH PL# 106	MILWAUKEE, WI 53206-1904
CURRENT OCCUPANT	3959 N 19TH PL# 201	MILWAUKEE, WI 53206-1904
CURRENT OCCUPANT	3959 N 19TH PL# 202	MILWAUKEE, WI 53206-1904
CURRENT OCCUPANT	3959 N 19TH PL# 203	MILWAUKEE, WI 53206-1904
CURRENT OCCUPANT	3959 N 19TH PL# 204	MILWAUKEE, WI 53206-1904
CURRENT OCCUPANT	3959 N 19TH PL# 205	MILWAUKEE, WI 53206-1904
CURRENT OCCUPANT	3959 N 19TH PL# 206	MILWAUKEE, WI 53206-1904
CURRENT OCCUPANT	3959 N 19TH PL# 301	MILWAUKEE, WI 53206-1904
CURRENT OCCUPANT	3959 N 19TH PL# 302	MILWAUKEE, WI 53206-1904
CURRENT OCCUPANT	3959 N 19TH PL# 303	MILWAUKEE, WI 53206-1904
CURRENT OCCUPANT	3959 N 19TH PL# 304	MILWAUKEE, WI 53206-1904
CURRENT OCCUPANT	3959 N 19TH PL# 305	MILWAUKEE, WI 53206-1904
CURRENT OCCUPANT	3959 N 19TH PL# 306	MILWAUKEE, WI 53206-1904

Blank Notice

Total Records: 91

Radius 250 feet and Center of the Circle: 1901 W Atkinson 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](mailto: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:  
CONVENIENCE STORE

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

### 2. Business Operations

- a. Proposed Opening Date: 09/20/2025
- 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 & BEER
- e. Is the current licensee operating? ☐ No ☒ Yes If no, list date closed: \_\_\_\_\_
- f. Do you have future plans for other businesses, licenses or permits at this location? ☒ No ☐ Yes  
If yes, explain: \_\_\_\_\_
- g. Have you previously held an Extended Hours License in Milwaukee? ☐ No ☐ Yes  
If yes, list address(es): \_\_\_\_\_
- h. Are other businesses operating in the same building? ☐ No ☐ Yes If yes, describe: \_\_\_\_\_

### 3. Litter & Noise

- a. How are grounds kept clean? ☒ Sweep ☐ Pressure Wash ☒ Pick Up Litter ☐ Other: \_\_\_\_\_
- b. How often will grounds be cleaned? ☒ Daily ☐ Weekly ☒ As Needed ☐ Monthly ☐ Other: \_\_\_\_\_
- c. Grounds cleaned by: ☒ Licensee ☐ Building Owner ☒ Employees ☐ Hired Maintenance ☐ Other: \_\_\_\_\_
- d. How are noise issues prevented and/or addressed? ☐ Security ☐ Manager approaches customer(s) ☒ Call Police  
☒ Signs Posted ☐ Other: \_\_\_\_\_
- e. Will a sound amplification system be used? ☒ No ☐ Yes If yes, describe: \_\_\_\_\_

### 4. Smoking & Sanitation

- a. Are there designated outdoor smoking areas? ☒ No ☐ Yes If yes, describe: \_\_\_\_\_
- b. Number of Garbage Cans: Inside: 2 Locations: NEAR THE COUNTER & REST ROOM  
Outside: 1 Locations: NEAR 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: \_\_\_\_\_



## 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 licensed security on premise? ☒ No ☐ Yes If yes, how many? \_\_\_\_\_ and answer the following:  
 What are their responsibilities? \_\_\_\_\_  
 Describe equipment used \_\_\_\_\_  
 List their License Number (s) \_\_\_\_\_
- d. Will there be security cameras? ☐ No ☒ Yes If yes, how many? 8 and list locations: INSIDE THE STORE & SURROUNDING STORE
- e. Will searches/identification checks be done upon entry? ☒ No ☐ Yes If yes, describe \_\_\_\_\_

## 6. Percentage of Sales (must total 100%)

Alcohol <u>15</u> %	Food <u>30</u> % Cigarettes, Electronic Vape Devices, Tobacco Products <u>40</u> %	Secondhand Merchandise _____ %	Precious Metals & Gems _____ %
Entertainment _____ %	Salvaged Materials _____ % (such as scrap metal)	Personal Services (such as tattoo, body piercing, salon, tailor, tanning, etc.) _____ %	Other <u>15</u> % Describe: <u>LOTTERY</u>
Pawnbroker Activity _____ %			

## 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, Electronic Vape Products ☐ 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):  
☒ 1<sup>st</sup> Floor ☐ 2<sup>nd</sup> Floor ☐ Basement Storage ☐ Patio ☐ Beer Garden ☐ Sidewalk Café ☐ Deck ☐ Rooftop  
☐ Other: Describe: \_\_\_\_\_
- b. Describe Location: ☒ Major Thoroughfare ☐ Secondary Street ☐ Other: \_\_\_\_\_
- c. Nearest Major Cross Street: \_\_\_\_\_
- 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: JASWINDER SINGH Phone Number: 414 531 9246  
 Building Owner Address: 1901 W ATKINSON AVE

## 10. Hours of Operation & Customers

Will customers be entering the premises? ☐ No ☒ Yes

Day of the Week	Proposed Hours of Operation:		Estimated Number of Customers expected each day	Potential Age Range of Customers	Class B Tavern Applicant Only: Age Restriction (If none, write 'None')
	Open Time (include a.m. or p.m.)	Close Time (include a.m. or p.m.)			
Sunday	6:00 AM	9:00 PM	180	ALL AGE	
Monday	6:00 AM	9:00 PM	180	ALL AGE	
Tuesday	6:00 AM	9:00 PM	180	ALL AGE	
Wednesday	6:00 AM	9:00 PM	180	ALL AGE	
Thursday	6:00 AM	9:00 PM	180	ALL AGE	
Friday	6:00 AM	9:00 PM	180	ALL AGE	
Saturday	6:00 AM	9:00 PM	180	ALL AGE	

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)

Pardeep Kaur  
 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)

Jaswinder Singh  
 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](http://www.milwaukee.gov/license)

Legal Entity Name: **ATKINSON FOOD & BEER INC.**

Premise Address: **1901 W ATKINSON AVE, MILWAUKEE , WI 53206**

## 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.)? LAND LORD

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

d) Total amount paid for business \$ TBD

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

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.

## Lease Information (New & Transfer Applicants who are leasing the premises only)

a) Date lease begins 09/05/2025 Ends 08/31/2028

b) Monthly rental \$ 5000.00

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

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

e) For what length of time have you been guaranteed occupancy (number of years)? 3 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 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

X Pardeep Kaur

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**

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

Legal Entity Name: **ATKINSON FOOD & BEER INC.**Premises Address: **1901 W ATKINSON AVE, MILWAUKEE , WI 53206****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 7,500 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, and ice cream, fish, shellfish, meat, poultry

**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 7
- ☐ 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: \_\_\_\_\_

Start date: \_\_\_\_\_

Name, Address &amp; Phone Number of Architect: \_\_\_\_\_

Name, Address &amp; 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:

H.S.

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

H.S.

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.

H.S.

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.

H.S.

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.

H.S.

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: \_\_\_\_\_

Signature of Additional Partner: \_\_\_\_\_

Pardeep Kaur



## WEIGHTS & MEASURES PLAN OF OPERATION

ccl-wmpln 1/9/18

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

Legal Entity Name:

ATKINSON Food & BEER INC.

Premise Address:

1901 W ATKINSON AVE. MILWAUKEE WI 53206

### Type of Business

Provide a brief description of the establishment/business:

C-Store

Other licenses may be required depending on the type of business you are operating.

### Litter & Noise

- a. How are grounds kept clean? ☒ Sweep ☐ Pressure Wash ☒ Pick Up Litter ☐ Other: \_\_\_\_\_
- b. How often will grounds be cleaned? ☒ Daily ☐ Weekly ☐ As Needed ☐ Monthly ☐ Other: \_\_\_\_\_
- c. Grounds cleaned by: ☒ Licensee ☐ Building Owner ☒ Employees ☐ Hired Maintenance ☐ Other: \_\_\_\_\_
- d. How are noise issues prevented and/or addressed? ☐ Security ☒ Manager approaches customer(s) ☐ Call Police  
☒ Signs Posted ☐ Other: \_\_\_\_\_

### Signature

X Pardeep Kaur

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)

Hayinder Singh

Signature of additional partner or 20% or more shareholder

This form must be submitted with the Business License Application, Weights & Measures License Supplemental Application, and appropriate fee. Forms can be obtained online at [www.milwaukee.gov/licenses](http://www.milwaukee.gov/licenses).



# WEIGHTS & MEASURES LICENSE SUPPLEMENTAL APPLICATION

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

## Office Use Only:

App# \_\_\_\_\_  
Filed \_\_\_\_\_  
Initials \_\_\_\_\_  
Paid \_\_\_\_\_  
Lic # \_\_\_\_\_

Legal Entity Name: ATKINSON FOOD & BEER INC.

Premise Address: 1901 W ATKINSON AVE MILWAUKEE WI 53206

## Device Type(s)

- Check all device types for which you need a license.
  - For each device type checked, indicate how many you have in the Number of Devices column (b).
  - Calculate the Total Fee Per Device Type by multiplying the Fee Per Device Type (a) by the Number of Devices (b).
  - Add all Total Fee Per Device Type amounts together and that will be your Total Fee Due.
- \* **Exception:** The Scanner fee is not per device. Check the box for the appropriate range.  
If you have 1-3 scanners, the total due is \$130. If you have 4 or more scanners, the total due is \$250.  
Check the Number of Devices (b).

Device Type	License Period	Fee Per Device Type (a)	Number of Devices (b)	Total Fee Per Device Type (a x b)
<b>Liquid Measuring Devices</b>				
<input type="checkbox"/> Retail Petroleum Meters	12 months	\$60		
<input type="checkbox"/> 0 to 30 gallons per minute	24 months	\$60		
<input type="checkbox"/> 31 to 200 gallons per minute	24 months	\$250		
<input type="checkbox"/> Over 200 gallons per minute	24 months	\$250		
<b>Scales</b>				
<input checked="" type="checkbox"/> Measuring any weight amount	24 months	\$55	1	55
<b>Scanners</b>				
		Fee for scanners is by range	Check how many scanners you have	
<input checked="" type="checkbox"/> Up to 3 scanners	24 months	\$130 total*	<input checked="" type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3	130
<input type="checkbox"/> Four or more scanners	24 months	\$250 total*	<input type="checkbox"/> 4 <input type="checkbox"/> Other _____	
<b>Other Devices</b>				
<input type="checkbox"/> Length Measuring Device	24 months	\$60		
<input type="checkbox"/> Timing Device	24 months	\$30		
<b>Total Fee Due</b>				185

## Signature

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

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

I understand that these device licenses are not transferable (with the exception of scanners). If the device is replaced or needs to be resealed, I must apply for and receive a new license so that an inspection of the device can be performed prior to its use.

I acknowledge that as a condition of being issued this license, I must allow the Health Department into the establishment to test the device to validate its specifications/tolerances. If my devices are found out of compliance, I may be charged inspection fees.

I have read, understand, and will adhere to all the above acknowledgments.

X Pardeep Kaur

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)

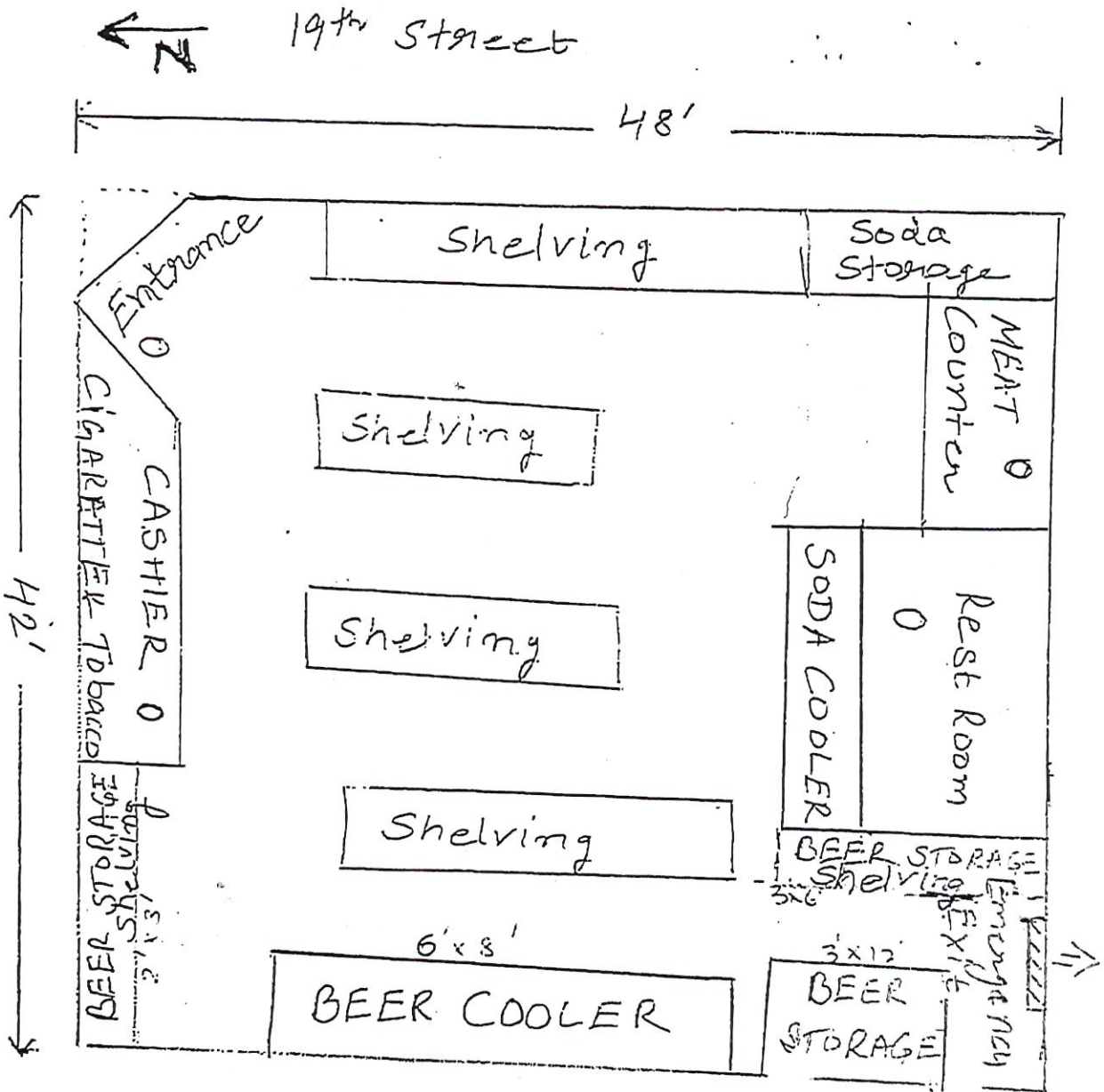
Hayinder Singh

Signature of additional partner or 20% or more shareholder

**This form must be submitted with the Business License Application, Weights & Measures Plan of Operation, and appropriate fee.**  
Forms can be obtained online at [www.milwaukee.gov/licenses](http://www.milwaukee.gov/licenses).



Beer, Cigarette and Tobacco Floor Plan  
 FOR ATKINSON FOOD & BEER, INC.  
 1901 W ATKINSON AVE MILWAUKEE WI-53206



Agent HARJINDER SINGH  
 ATKINSON FOOD & BEER INC.  
 1901 W ATKINSON AVE  
 MILWAUKEE WI-53206  
 DATE 10-30-85  
 ATKINSON FOOD & BEER

ATKINSON AVE  
 42'  
 19th Street  
 48'

CASHIER  
 CIGARETTES & TOBACCO  
 BEER  
 BEER COOLER  
 BEER STORAGE  
 BEER STORAGE  
 SODA COOLER  
 Rest Room  
 MEAT Counter  
 Soda Storage  
 Shelving  
 Shelving  
 Shelving  
 Entrance  
 Emergency Exit

Total  
 Square  
 Footage =  
 8016 sq ft