



CITY OF MILWAUKEE
OFFICE OF THE CITY CLERK

Monday, March 1, 2021

COMMITTEE MEETING NOTICE

AD 10

HAMILTON, Anton L, Agent
Us or Nothing Investments LLC
5233 W CENTER St

Milwaukee, WI 53210

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

Tuesday, March 09, 2021 at 11:35 AM

Regarding: Your Class A Malt and Food Dealer License Applications as agent for "Us or Nothing Investments LLC" for "Maxx Out Tobacco and Groceries" at 5233 W CENTER St.

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/668235757>. If you wish to call in, please call +1 (669) 224-3412 and use Access Code: 668-235-757.

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 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:

Jessica Celella
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.

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



CITY OF MILWAUKEE
OFFICE OF THE CITY CLERK

Monday, March 1, 2021

COMMITTEE MEETING NOTICE

AD 10

HAMILTON, Anton L, Agent
Us or Nothing Investments LLC
4453 N 62nd St

Milwaukee, WI 53218

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Tuesday, March 09, 2021 at 11:35 AM

Regarding: Your Class A Malt and Food Dealer License Applications as agent for "Us or Nothing Investments LLC" for "Maxx Out Tobacco and Groceries" at 5233 W CENTER St.

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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

Becker, Keren

From:
Sent: Thursday, December 3, 2020 9:37 AM
To: License
Subject: 5233 W Center

Categories: Purple category

REDACTED RECORD

Committee,

I am opposed to granting the Class A liquor license to MAXX Out tobacco and groceries.

1. West Center Street corridor (BID#39) has enough places to buy malt liquor.
2. I am concerned about the horrible rate of accidents on this stretch and believe that alcohol will only make it worse.
3. The management of MAXX Out has not been very concerned about the neighborhood: Parking is out of control, the mask mandate has been ignored, and single cigarette sales happen often.
4. The store is within 50 feet of a day care and only a block from a grade school.

I live very close to this establishment and see what is happening on that corner. I have been diligently working to improve W, Center Street for years and do not see this as a step toward a better neighborhood.

Thank you for taking my concerns.

MILWAUKEE POLICE DEPARTMENT LICENSING

CRIMINAL RECORD/ORDINANCE VIOLATION/INCIDENTS SYNOPSIS

DATE: 12/03/2020

LICENSE TYPE: Class B Tavern

NEW:

RENEWAL:

No. 318304

Application Date: 12/02/2020

License Location: 5233 W Center St

Business Name: Us or Nothing Investments LLC

Licensee/Applicant: HAMILTON, Anton L
(Last Name, First Name, MI)

Date of Birth: 03/24/1977

Home Address: 2676 N 53rd St

City: Milwaukee

State: WI **Zip Code:** 53210

Home Phone:

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

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

1. On 04/01/2012 the applicant was charged in Milwaukee County with Attempt Manufacture/Deliver Heroin (Felony), Possess w/Intent Cocaine (Felony) and Possession of Firearm by Felon (Felony).

Charge 1: Attempt Manufacture/Deliver Heroin

2: Possess w/Intent Cocaine

3: Possession of Firearm by Felon

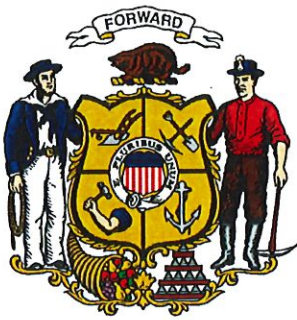
Finding: Guilty all charges

Sentence: 6 years prison, 5 years extended supervision

Date: 08/23/2012

Case: 2012CF001477

2. The applicant is on Parole for item #1. Email notification sent to the Wisconsin Department of Corrections on 12/03/2020 requesting they provide information to the License Division regarding the Probation/Parole status and the end date of the status.



Wisconsin Department of Corrections

Division of Community Corrections | Region 3 Office

Date:
To: Milwaukee Common Council/Licensing Division
From:

It was brought to my attention that Mr./Ms. ___Hamilton has applied for a ___ Class A Malt Beverage Retailers ___ license from the City of Milwaukee. Mr./Ms. _____Hamilton is currently on an ___ extended supervision term which is scheduled to discharge on _3/23/23_ for the offense of _Manuf/Deliver – Heroin, Poss w/ Int – Cocaine, and Possession of a Firearm by a Felon.

This letter is to inform you that such a licensure would ___not be___ in violation of his/her rules/conditions of supervision. If circumstances change, we will take whatever action we deem appropriate, including action which may affect such licensure. This decision was made based in part, on the following information:

A - Residence Stability: offender has maintained residence stability (yes)
offender has not maintained residence stability (no)

B - Reporting History: offender has maintained required contacts with agent (yes)
offender has not maintained required contacts with agent (no)

C - Police Contact: offender has had police contact while on supervision (no)
offender has not had police contact while on supervision (yes)

D - Overall level of cooperation: has offender complied with referrals and services designed to address criminogenic needs (yes)

****** DCC recommends license not be granted due the following:(check one)**

- * License/employment has a direct nexus to committing offense. _____
- * License/employment would have a negative impact on the offender based on specific treatment needs. (HIPPA prohibits the disclosure of specific treatment needs)_____
- * Sex offenses. _____

In providing the information within this letter, the Department of Corrections assumes no liability for the Council's reliance on such information.

Sincerely,

___Kerri Olson_____

___Beverly Dillon_____

Date: 12/16/2020
Officer: Whittenberger

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

Name of Premise:
Address: 5233 W Center St
Phone: 414-312-8834

Owner: Anton Hamilton
Owner address: 4453 N 62nd St
City State Zip: Milwaukee, WI 53218
Owner Phone: 414-416-3590
Owner email: antonhamilton617@gmail.com

Manager: Devon Hamilton
Home Address: 4453 N 62nd St
City State Zip: Milwaukee, WI 53218
Phone: 414-687-3792
Email: N/!

Preferred contact: Anton Hamilton (owner)

Location currently open: YES NO

Projected open date: N/A

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

Hours of Operation: Sun: 8A-9P 24 hours Y N
Mon: 8A-9P
Tue: 8A-9P
Wed: 8A-9P
Thu: 8A-9P
Fri: 8A-9P
Sat: 8A-9P

Premise Type: Liquor Store
Convenience Store
Other:

Licenses currently held:

- Alcohol: Yes No Class: A #:
Tobacco: Yes No #: 1029834
Food: Yes No #:
Extended Hours: Yes No #:
Secondhand Dealer: Yes No Type: #:
Other: Yes No Type: #:
Other: Yes No Type: #:

Who is your alcohol distributor? --- Will use Capitol

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: Daycare
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? N/A
8. Is the parking lot well lit? N/A
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
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: 30 days
19. Are there exterior cameras Yes No How many: 2
20. Are there interior cameras Yes No How many: 4

21. Do all employees know how to retrieve recorded digital images/footage? Yes No

Interior Survey:

22. 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

23. Is the interior of the location neat and clean? Yes No

24. Does an interior camera face the entrance/exit? Yes No

25. Is there a lockable area that separates employees from customers? Yes No

26. Does the store sell single chore boy? Yes No

27. Does the store sell blunt wraps? Yes No

28. Does the store sell scales? Yes No

29. Does the store sell items that may be used as crack pipes? Yes No

a. Describe item N/A

30. Does the store have an overabundance of sandwich baggies? Yes No

31. Does the owner understand that these items are often used for drug use? Yes No

32. Do the products in the store appear to be new and rotated often? Yes No

33. Are emergency and non-emergency numbers posted near the phone? Yes No

34. 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

Complete this section if alcohol establishment is a convenience store:

(** Read full ordinance for all details "68-55 Convenience Food Stores")

All convenience food stores not exempted under sub. 3 shall:

1. Is the cash register located in a manner so that at the time of a sales transaction, the employee and customer are both visible from the sidewalk? Yes No **
2. Are the glass entrance and exit doors clear of any signs or advertisements with the exception of a sign which states that the cash register contains \$50 or less and that the safe is no accessible to employees? Yes No
3. Does the store maintain one of the following on the licensed premise:
 - a. A safe that was in use at the convenience food store on August 17, 1994? Yes No
 - b. A drop-safe or time release safe that weighs at least 500 pounds or which is attached to or set into the floor in a manner approved by the police department? Yes No
4. Is lighting provided for the store's parking area during all hours of darkness when employees or customers are on the premises at a minimum average of 2-foot candles per square foot, unless the store is not open for business after sunset and before sunrise? Yes No N/A
5. Are at least two high-resolution surveillance security cameras installed? Yes No
6. Are the security cameras in working order? Yes No
7. Does one camera show an overall view of the counter and register area? Yes No
8. Does one camera show a clear, identifiable, full frame image of the face of each person entering and leaving the store? Yes No
9. Are the camera views obstructed by fixtures or displays? Yes No
10. Is the recorded footage stored for at least 30 days? Yes No (Unknown)
11. Do all store employees know how to record footage from the camera system to media capable of being transferred to police custody? Yes No
12. Are customer entrances/exits made of glass or other transparent material? Yes No

- a. Exception: A store that does not have such doors on August 17, 1994 shall not be required to install such doors until the holder of the store's food dealer license changes.
13. Has the owner and their employees attended the Robbery Prevention Training within 120 days of ownership or employment? Yes No
- a. Contact Community Outreach and Education at 935-7836 for schedule.

Sub 3. Exemptions. The requirements of this section do not apply to a convenience food store that conforms to either of the following descriptions:

- a-1. The store is located in an enclosed shopping structure, enclosed commercial building or hospital. A convenience food store is not in an enclosed structure or building if a customer can enter it directly from the outside.
Does store conform to a-1 Yes No

- a-2. The store physically separates employees from customers with a solid partition that bars a person from entering the employee area from the customer area, has a secure lock on the employee side of any door between the employee area and the customer, and conducts all transaction through a service window or similar arrangement.
Does store conform to a-2 Yes No

- a. At the commissioner's discretion, a convenience store may be exempted from any or all of the regulations specified in sub 2.
Does this location hold an exemption from the commissioner regarding any of the requirements of Sub 2? Yes No

ADDITIONAL COMMENTS/RECOMMENDATIONS:

This location has been under this owner for approximately 3 years. The owner stated that he is looking to get his liquor license. When asked about distributors he stated he would most likely use Capitol. There were no "No Loitering" signs on the outer part of the location. The lighting on the outer part of the store could be improved and brighter. There was no way to see the employee from the sidewalk or street. There was signage, bars, and merchandise in the way that caused visibility issues. The owner stated if there were future issues with loitering that he would be willing to sign a standing complain form and work with police. The owner stated if issues ever got out of hand that he would be open to hiring security. The store was very clean, just the visibility of the store is an issue.

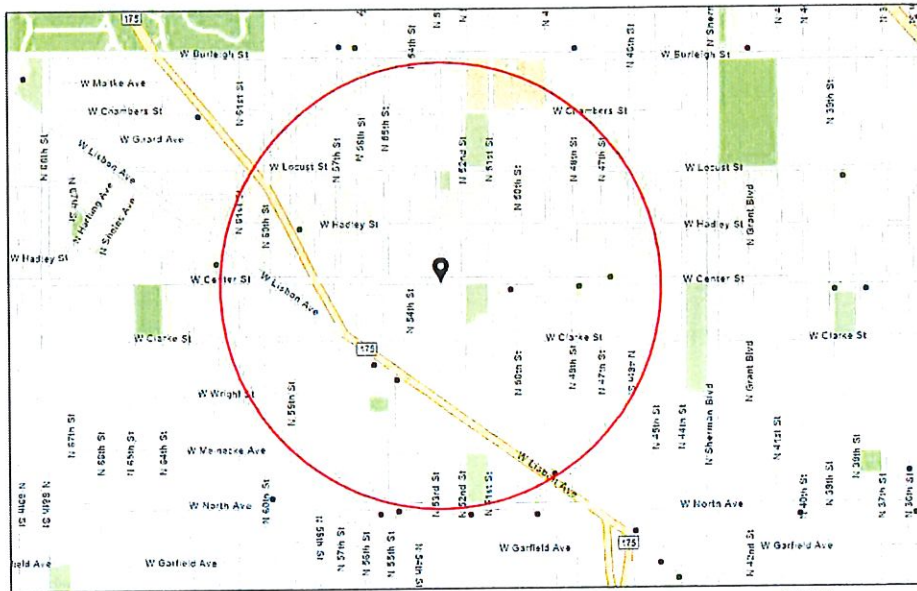


Concentration Map 5233 W Center St

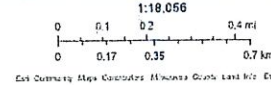
Area of Interest (AOI) Information

Area : 21,862,585.64 ft²

Dec 3 2020 12:29:26 Central Standard Time



- Alcohol Licenses
- Class A Fermented Malt Beverage
 - Class B Fermented Malt Beverage
 - Class A Liquor and Mall
 - Class B Tavern
 - Class C Wine Retailer



Concentration Map 5233 W Center St

Summary

Name	Count	Area(ft ²)	Length(mi)
Alcohol Licenses	8		

Alcohol Licenses

#	Legal Entity	Trade Name	Licensee	Address	License Type Name	Total Capacity	Expiration Date	Count
1	Muzahem LLC	Hanna Food	Fady Muzahem, Agt	2778 N 59TH ST	Class A Fermented Malt Beverage Retailer's License		10/14/2021, 7:00 PM	1
2	Bittercube LLC	Bittercube Apothecary	Ira E Koplowitz, Agt	4828 W Lisbon AV	Class B Tavern License	49	10/22/2021, 7:00 PM	1
3	K & O INVESTMENT S, LLC	Jay's Uptown Cafe	ODEAN H TAYLOR, Agt	5007-09 W CENTER ST	Class B Tavern License	99	12/29/2020, 6:00 PM	1
4	Wally's Pub	Wally's Pub	Dennis J Jahnke, SP	5525 W Lisbon AV	Class B Tavern License	75	6/29/2021, 7:00 PM	1
5	Battlebox Cafe & Lounge LLC	Battlebox Cafe & Lounge	Bryant L Adams, Agt	5419 W Lisbon AV	Class B Tavern License		11/4/2021, 7:00 PM	1
6	K & O INVESTMENT S, LLC	Jay's Uptown Cafe	ODEAN H TAYLOR, Agt	5007-09 W CENTER ST	Class B Tavern License	99	12/29/2021, 6:00 PM	1
7	Center Street Foods LLC	Center Street Foods	Jay HADDAD, Agt	4630 W Center ST	Class A Fermented Malt Beverage Retailer's License		3/9/2021, 6:00 PM	1
8	Ansh Petroleum, Inc.	Hannawi Meat and Deli	Satpal Singh, Agt	4737 W Center ST	Class A Fermented Malt Beverage Retailer's License		7/26/2021, 7:00 PM	1

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



Monday, March 1, 2021

Licenses Committee Notice of Hearing

MICHAEL WISNIEWSKI
1621 E IRVING PI
Milwaukee, WI 53202

The Licenses Committee will consider the following license application:

Class A Malt and Food Dealer License Applications
HAMILTON, Anton L, Agent
Maxx Out Tobacco and Groceries at 5233 W CENTER St

Date: 3/9/2021

Time: 11:35 AM

Location: The hearing before the Licenses Committee will take place virtually on Tuesday, March 9, 2021. 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 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

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





Monday, March 1, 2021



Notice of Public Hearing

blank
notice

HAMILTON, Anton L, Agent
Maxx Out Tobacco and Groceries at 5233 W CENTER St
Class A Malt and Food Dealer License Applications

Tuesday, March 09, 2021 at 11:35 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 virtually on 3/9/2021 at 11:35 AM. 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 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 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	2712 N 53RD ST 4	MILWAUKEE, WI 53210
CURRENT OCCUPANT	5308 W CENTER ST A	MILWAUKEE, WI 53210
CURRENT OCCUPANT	5228 W CENTER ST 202	MILWAUKEE, WI 53210
CURRENT OCCUPANT	5228 W CENTER ST 204	MILWAUKEE, WI 53210
CURRENT OCCUPANT	5305 W CENTER ST 2	MILWAUKEE, WI 53210
CURRENT OCCUPANT	2650 N 53RD ST	MILWAUKEE, WI 53210
CURRENT OCCUPANT	2668 N 54TH ST	MILWAUKEE, WI 53210
CURRENT OCCUPANT	2652 N 54TH ST	MILWAUKEE, WI 53210
CURRENT OCCUPANT	5314 W CENTER ST B	MILWAUKEE, WI 53210
CURRENT OCCUPANT	5220 W CENTER ST 4	MILWAUKEE, WI 53210
CURRENT OCCUPANT	2712 N 53RD ST 1	MILWAUKEE, WI 53210
CURRENT OCCUPANT	2721 N 52ND ST	MILWAUKEE, WI 53210
CURRENT OCCUPANT	5229 W CENTER ST	MILWAUKEE, WI 53210
CURRENT OCCUPANT	5313 W CENTER ST 1	MILWAUKEE, WI 53210
CURRENT OCCUPANT	5314 W CENTER ST A	MILWAUKEE, WI 53210
CURRENT OCCUPANT	5308 W CENTER ST	MILWAUKEE, WI 53210
CURRENT OCCUPANT	5228 W CENTER ST 203	MILWAUKEE, WI 53210
CURRENT OCCUPANT	5220 W CENTER ST 2	MILWAUKEE, WI 53210
CURRENT OCCUPANT	2712 N 53RD ST 3	MILWAUKEE, WI 53210
CURRENT OCCUPANT	2719 N 53RD ST	MILWAUKEE, WI 53210
CURRENT OCCUPANT	5305 W CENTER ST 3	MILWAUKEE, WI 53210
CURRENT OCCUPANT	2640 N 53RD ST	MILWAUKEE, WI 53210
CURRENT OCCUPANT	5225 W CENTER ST 1	MILWAUKEE, WI 53210
CURRENT OCCUPANT	2664 N 54TH ST	MILWAUKEE, WI 53210
CURRENT OCCUPANT	5228 W CENTER ST 201	MILWAUKEE, WI 53210
CURRENT OCCUPANT	5220 W CENTER ST 3	MILWAUKEE, WI 53210
CURRENT OCCUPANT	2727 N 53RD ST	MILWAUKEE, WI 53210
CURRENT OCCUPANT	2725 N 53RD ST	MILWAUKEE, WI 53210
CURRENT OCCUPANT	2643 N 53RD ST	MILWAUKEE, WI 53210
CURRENT OCCUPANT	5305 W CENTER ST 5	MILWAUKEE, WI 53210
CURRENT OCCUPANT	5305 W CENTER ST 4	MILWAUKEE, WI 53210
CURRENT OCCUPANT	2662 N 53RD ST	MILWAUKEE, WI 53210
CURRENT OCCUPANT	2658 N 54TH ST	MILWAUKEE, WI 53210
CURRENT OCCUPANT	2712 N 53RD ST 2	MILWAUKEE, WI 53210
CURRENT OCCUPANT	5231 W CENTER ST	MILWAUKEE, WI 53210
CURRENT OCCUPANT	2658 N 53RD ST	MILWAUKEE, WI 53210
CURRENT OCCUPANT	2657 N 52ND ST	MILWAUKEE, WI 53210
CURRENT OCCUPANT	2651 N 52ND ST	MILWAUKEE, WI 53210
CURRENT OCCUPANT	5313 W CENTER ST 3	MILWAUKEE, WI 53210
CURRENT OCCUPANT	2649 N 53RD ST	MILWAUKEE, WI 53210
CURRENT OCCUPANT	5305 W CENTER ST 1	MILWAUKEE, WI 53210
CURRENT OCCUPANT	2646 N 53RD ST	MILWAUKEE, WI 53210
CURRENT OCCUPANT	5225 W CENTER ST 2	MILWAUKEE, WI 53210
CURRENT OCCUPANT	2647 N 52ND ST	MILWAUKEE, WI 53210
CURRENT OCCUPANT	5313 W CENTER ST 2	MILWAUKEE, WI 53210
CURRENT OCCUPANT	5314 W CENTER ST C	MILWAUKEE, WI 53210

CURRENT OCCUPANT	5220 W CENTER ST 1	MILWAUKEE, WI 53210
CURRENT OCCUPANT	2724 N 53RD ST	MILWAUKEE, WI 53210
CURRENT OCCUPANT	5225 W CENTER ST 3	MILWAUKEE, WI 53210
CURRENT OCCUPANT	2645 N 52ND ST	MILWAUKEE, WI 53210
Wagner, Antoinette	2719 N 53rd ST	MILWAUKEE, WI 53210
blank	notice	

Total Records: 50

Radius: 250.0 feet and Center of Circle: 5233 W Center st



BUSINESS LICENSE PLAN OF OPERATION

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:

Convenience store

Do you have any experience operating this type of business? No Yes If yes, explain: Owner operator of other stores.

2. Business Operations

- a. Proposed Opening Date: October 25, 2020
- b. Is this premise under construction? No Yes If yes, list estimated completion date: _____
- c. Is this a franchise? No Yes
- d. Is this premises currently licensed? No Yes If yes, list type of license: _____
- e. Is the current licensee operating? No Yes If no, list date closed: _____
- f. Do you have future plans for other businesses, licenses or permits at this location? No Yes
 If yes, explain: _____
- g. Have you previously held an Extended Hours License in Milwaukee? No Yes
 If yes, list address(es): _____
- h. Are other businesses operating in the same building? No Yes If yes, describe: _____

3. Litter & Noise

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

4. Smoking & Sanitation

- a. Are there designated outdoor smoking areas? No Yes If yes, describe: _____
- b. Number of Garbage Cans: Inside: 2 Locations: Entrance behind counter
 Outside: 1 Locations: West side of building
- 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 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: Video surveillance (AV)
 List their licensing, certification, or training credentials _____
- d. Will there be security cameras? No Yes If yes, how many? 4 and list locations: 2 Indoor behind register, Right rear wall 2 outdoor path-facing entrance
- e. Will searches/identification checks be done upon entry? No Yes If yes, describe _____

6. Percentage of Sales (must total 100%)

Alcohol <u>23</u> %	Food <u>34</u> %	Secondhand Merchandise _____ %	Precious Metals & Gems _____ %
Entertainment _____ %	Cigarettes <u>33</u> %	_____ %	_____ %
Pawnbroker Activity _____ %	Salvaged Materials _____ % (such as scrap metal)	Personal Services (such as tattoo, body piercing, salon, tailor, tanning, etc.) _____ %	Other _____ % Describe: _____

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

Type 1

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

Type 2

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

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

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

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

Capacity 10 (Call the Milwaukee Development Center at 414-286-8211 if you have questions.)

9. Premises Description

- a. Identify all area(s) of the premises that will be used in operating this business (include areas used only for storage):
 1st Floor 2nd Floor Basement Storage Patio Beer Garden Sidewalk Café Deck Rooftop
 Other: Describe: _____
- b. Describe Location: Major Thoroughfare Secondary Street, Other: _____
- c. Nearest Major Cross Street: Center + 53rd
- d. Describe Building: Free Standing Building Strip Mall Other: _____
- e. Describe Premises Structure: Single Story Multi-Story - # of Stories 2 Other: _____
- f. Describe Surrounding Area: Commercial Residential Industrial Other: _____
- g. Building Owner Name: Michael Wozniowski Phone Number: (414) 429-4857
 Building Owner Address: 1621 E Irving Pl

10. Hours of Operation & Customers

Will customers be entering the premises? No Yes

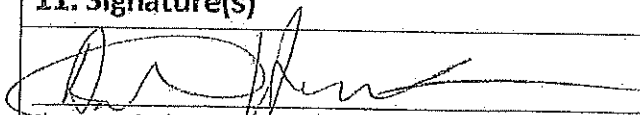
Day of the Week	Proposed Hours of Operation:		Estimated Number of Customers expected each day	Potential Age Range of Customers	Class B Tavern Applicant Only: Age Restriction (If none, write 'None')
	Open Time (include a.m. or p.m.)	Close Time (include a.m. or p.m.)			
Sunday	8:00am	10:00pm	100	10-70yrs	
Monday	8:00am	10:00pm	100	10-70yrs	
Tuesday	8:00am	10:00pm	100	10-70yrs	
Wednesday	8:00am	10:00pm	100	10-70yr	
Thursday	8:00am	10:00pm	100	10-70yrs	
Friday	8:00am	10:00pm	100	10-70yr	
Saturday	8:00am	10:00pm	100	10-70yr	

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:	US OR Nothing Investments LLC
Premise Address:	5233 W. Center St
Proximity of Premises to Church, School, Daycare Center or Hospital	
Is the building within 300 feet of any church, school, daycare center or hospital? <input type="checkbox"/> No <input type="checkbox"/> Yes	
"Service Bar Only" Designation	
If applying for Class B or C license, are you applying for "Service Bar Only"? <input type="checkbox"/> No <input type="checkbox"/> Yes	
Service Bar Only means customers cannot sit at the bar. Alcohol is served to employees who serve patrons seated at tables. No stools, chairs or other articles of furniture shall be placed at the service bar for patrons to sit upon.	
Business Information	
a) Are you taking out this application for anyone that may not be eligible for a license? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
If yes, list their name and address: _____	
b) Will the agent, a partner or the individual licensee be conducting the day-to-day operations of the business? <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> Yes	
If no, list the name and address of the person(s) who will: _____	
Class B Applicants: If the agent, a partner or the individual licensee will not be conducting the day-to-day operations of the business, the person(s) listed above must obtain a Class B Managers license.	
c) Does anyone else have money invested or any other interest in this business? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
If yes, explain: _____	
d) Have you made an agreement with anyone to repay any loan or any other payments based upon income from the business? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, list name and address: _____	
Property Information (New & Transfer Applicants Only)	
a) Do you own or lease the building? <input type="checkbox"/> Own <input checked="" type="checkbox"/> Lease	
b) Who owns the fixtures (for example, coolers, etc.)? Applicant (Antonio Hamutin)	
c) Are you purchasing the stock and/or fixtures? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, amount paid \$ _____	
d) Total amount paid for business \$ 10000	
e) Total amount paid for goodwill of the business \$ 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? <input type="checkbox"/> No <input type="checkbox"/> Yes	
Lease Information (New & Transfer Applicants who are leasing the premises only)	
a) Date lease begins 10/01/2020 Ends 9/30/2025	
b) Monthly rental \$ 500.00	
c) Do you have an option to renew the lease? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	
d) Does your lease allow for assignment to another party without the consent of the owner? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	
e) For what length of time have you been guaranteed occupancy (number of years)? 3 years	

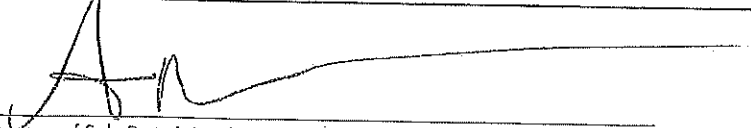
Lease Information (Continued)

- 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 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: US OR Nothing Investments LLC

Premises Address: 5233 W. Center St.

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: _____

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: _____
 Start date: _____
 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:

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

US of Nothing Investments LLC - Center St - Anton Hamilton 10/29/202
Total sq ft 975
5233 W Center
Max Out Tobacco and Groceries LLC

North ↑

Anton Hamilton

