



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

Tuesday, May 03, 2022

COMMITTEE MEETING NOTICE

AD 12

MARTINEZ, JR, Felipe, Agent
Walkers Lounge & Events LLC
817 W National Av
Milwaukee, WI 53204

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

Tuesday, May 17, 2022 at 09:25 AM

Regarding: Your Permanent Extension of Premise Applications for Alcohol and Food Adding West Sidewalk, Deck at the North and Pergola (For Temporary Change of Plan Permits Only) at the North-East as agent for "Walkers Lounge & Events LLC" for "Walkers Lounge & Events" at 626 S 5TH St.

This meeting will be held via GoToMeeting. Please see the enclosed best practices document for further instructions. The access code is <https://meet.goto.com/677760957>. If you wish to call in, please call [+1 \(646\) 749-3122](tel:+16467493122) and use Access Code: 677-760-957.

There is a possibility that your application may be denied for one or more of the following reasons: you do not meet the statutory and municipal requirements; the fitness and appropriateness of the location to be licensed and whether the location will create undesirable neighborhood problems (such as disorderly congregations of people, excessive litter, unreasonable noise, and traffic and parking problems), whether or not there is an over-concentration of alcohol beverage establishments in the neighborhood; whether or not you have been charged with or convicted of any felony, misdemeanor, municipal offense or other offense, the circumstances of which substantially relate to the licensed activity; and any other factors which reasonably relate to the public health, safety and welfare. See attached police report and/or written correspondence regarding this application. Please be advised the public will be able to provide information to the committee in person or in writing. The committee will receive and consider evidence regarding the above mentioned criteria.

Notice for applicants with warrants or unpaid fines:

Proof of warrant satisfaction or payment of fines must be submitted at the hearing on the above date and time. Failure to comply with this requirement may result in a delay of the granting/denial of your application.

Failure to attend this meeting may result in the denial of your license. Individual applicants and partnership applicants must attend or attend by an attorney. The agent or attorney for corporate or limited liability applicants must attend. If you wish to do so and at your own expense, you may be accompanied by an attorney of your choosing to represent you at this hearing.

You will be given an opportunity to speak on behalf of the application and to respond and challenge any charges or reasons given for the denial. No petitions can be accepted by the committee, unless the people who signed the petition attend the virtual hearing and are willing to testify. You may present witnesses under oath and you may also confront and cross-examine opposing witnesses under oath. If you have difficulty with the English language, you should request an interpreter attend the meeting with you, at your expense, so that you can answer questions and participate in your hearing.

PLEASE NOTE: Upon reasonable notice, efforts will be made to accommodate the needs of disabled individuals through sign language interpreters or other auxiliary aids. For additional information or to request this service, contact the Council Services Division ADA Coordinator at (414) 286-2998, Fax - (414) 286-3456, TDD - (414) 286-2025.

JIM OWCZARSKI, CITY CLERK

BY: _____

Jim Cooney
License Division Manager

If you have questions regarding this meeting, please contact the staff assistant, Yadira Melendez at (414) 286-2775 or stas5@milwaukee.gov



Tuesday, May 03, 2022



Notice of Public Hearing

Blank Notice

MARTINEZ, JR, Felipe
Walkers Lounge & Events at 626 S 5TH St.
Permanent Extension of Premise Applications for Alcohol and Food Adding West Sidewalk, Deck
at the North and Pergola (For Temporary Change of Plan Permits Only) at the North-East

Tuesday, May 17, 2022 at 09:25 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 05/17/2022 at 09:25 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, 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 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.)
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	410 W PIERCE ST	MILWAUKEE, WI 53204-1703
CURRENT OCCUPANT	415 W PIERCE ST	MILWAUKEE, WI 53204-1704
CURRENT OCCUPANT	415A W PIERCE ST	MILWAUKEE, WI 53204-1704
CURRENT OCCUPANT	416 W PIERCE ST	MILWAUKEE, WI 53204-1703
CURRENT OCCUPANT	416 W PIERCE ST, A	MILWAUKEE, WI 53204-1703
CURRENT OCCUPANT	524 W PIERCE ST	MILWAUKEE, WI 53204-1717
CURRENT OCCUPANT	524A W PIERCE ST	MILWAUKEE, WI 53204-1717
CURRENT OCCUPANT	600 S 6TH ST, A	MILWAUKEE, WI 53204-1524
CURRENT OCCUPANT	600 S 6TH ST, B	MILWAUKEE, WI 53204-1524
CURRENT OCCUPANT	608 S 5TH ST, 1	MILWAUKEE, WI 53204-1541
CURRENT OCCUPANT	608 S 5TH ST, 2	MILWAUKEE, WI 53204-1541
CURRENT OCCUPANT	608 S 5TH ST, 3	MILWAUKEE, WI 53204-1541
CURRENT OCCUPANT	614 S 6TH ST	MILWAUKEE, WI 53204-1524
CURRENT OCCUPANT	618A S 6TH ST	MILWAUKEE, WI 53204-1524
CURRENT OCCUPANT	626 S 5TH ST, 1	MILWAUKEE, WI 53204-1519
CURRENT OCCUPANT	626 S 5TH ST, 2	MILWAUKEE, WI 53204-1519

Blank Notice

Total Records: 16

Radius 250.0 feet and Center of Circle: 626 S 5th St



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:

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

2. Business Operations

- a. Proposed Opening Date: MAY, 1 2022
- 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: CLASS B TAVERN
- 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: OUT SIDE EVENTS
- 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: KITCHEN RENTALS

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: OUTSIDE SPEAKERS

4. Smoking & Sanitation

- a. Are there designated outdoor smoking areas? No Yes If yes, describe: _____
- b. Number of Garbage Cans: Inside: 12 Locations: BAR(2) KITCHEN(6) BATH(2) STAIRS(2)
Outside: 2 Locations: REAR OF LOT
- c. Is a crowd control barrier used? No Yes If yes, describe: CRATES in front
- d. How many restrooms are on the premises? 3
- 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? 22 and describe the parking security plan: WE HAVE 2 LOT ATTENDANTS
- b. Is there a loading zone? No Yes If yes, describe the loading area security plan: ROAD OF BUILDING, SIGNS AND GATES
- c. Will you have security personnel on premise? No Yes If yes, how many? 2-8 and answer the following:
 What are their responsibilities? CHECKING ID/SEARCHING, HELP WITH TRAFFIC
 Is security equipment used? No Yes If yes, describe METAL DETECTORS/SCANNER
 List their licensing, certification, or training credentials _____
- d. Will there be security cameras? No Yes If yes, how many? 10 and list locations: BAR 2 FRONT N/S 2 FRONT BAR 2 BACK BAR 1 LOT 1 ROAD 2
- e. Will searches/identification checks be done upon entry? No Yes If yes, describe _____

6. Percentage of Sales (must total 100%)

Alcohol <u>50</u> %	Food <u>50</u> %	Secondhand Merchandise _____ %	Precious Metals & Gems _____ %
Entertainment _____ %	Cigarettes _____ %	Personal Services (such as tattoo, body piercing, salon, tailor, tanning, etc.) _____ %	Other _____ % Describe: _____
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: 1 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 Glass "B" Tavern Weights & Measures
- Secondhand Dealer Precious Metal & Gem Other: _____

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

Capacity 364 (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: 5TH STREET BRUCE

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: SOBE ZARATE Phone Number: 414-405-8595

Building Owner Address: _____

10. Hours of Operation & Customers

Will customers be entering the premises? No Yes

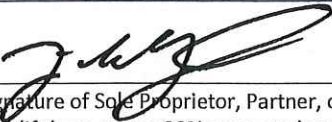
Day of the Week	Proposed Hours of Operation:		Estimated Number of Customers expected each day	Potential Age Range of Customers	Class B Tavern Applicant Only: Age Restriction (If none, write 'None')
	Open Time (include a.m. or p.m.)	Close Time (include a.m. or p.m.)			
Sunday	10 AM	2 AM		21-45	
Monday	10 AM	1 AM			
Tuesday	10 AM	1 AM		21-45	
Wednesday	10 AM	1 AM		21-45	
Thursday	10 AM	1 AM		21-45	
Friday	10 AM	2 AM		21-45	
Saturday	10 AM	12 AM		21-45	

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.



Sidewalk Dining Facility Supplemental Application

ccl-side1 2/21/18

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

Business Name: WALKERS Lounge & Events LLC Aldermanic District # 12

Premises Address:

Business Operations

Check one: I/we are also applying for Food/Alcohol license(s) at this time.
 I/we currently hold Food/Alcohol license(s) AND
 confirm that the Business Plan of Operation on file which was previously submitted with the Food and/or Alcohol application has not changed, except for the addition of this sidewalk dining facility.
 I have included a new Business Plan of Operation reflecting requested changes.

Sidewalk Dining Facility will operate from: Start Date: MAY 5 2022 to End Date: _____
Will any food preparation be done outdoors? No Yes
If yes, describe: _____
Will any sidewalk dining facility improvements be physically attached to public structures? No Yes
If yes, describe: NEW TABLES / umbrellas / furniture

Property Owner

Check one: Applicant owns the property
 Property owner's information/signature provided below (REQUIRED):
Name: JOSE G. ZARATE Phone # 414-405-8595
Address: 11609 N. BOBOLINK LN. MEQUON, WI 53092
Property Owner's Signature: [Signature]

Signature(s)

[Signature]
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

Office Use Only:
Initials _____ Filed _____ App # _____
Processing LS: Queue to: HD DNS CC Email To: DPW Primary LS
Also: holds is applying for: Food Alcohol Perm Ext



**PERMANENT EXTENSION OF PREMISES APPLICATION
FOOD AND ALCOHOL BEVERAGE ESTABLISHMENTS**

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

Section A	Date of Application: <u>3/15/2022</u>	Aldermanic District: <u>PERCOT</u>
	Licensee (Name of individual; partners, or agent, if Corp/LLC): <u>WALKER'S LOUNGE & EVENTS LLC</u>	
	Corporation or LLC Name (if applicable): <u>FELIPE MARTINEZ</u>	Business Name: <u>WALKER'S LOUNGE & EVENTS</u>
	Business Address (include city, state, zip): <u>626 S 5TH STREET MILWAUKEE, WI 53204</u>	
	(Optional) Mailing Address (include city, state, zip):	Business Telephone Number: <u>414-312-7563</u>
Section B	This request is for the permanent extension of premises for a: <input checked="" type="checkbox"/> FOOD license <input checked="" type="checkbox"/> ALCOHOL license	
	The Current Premises Description is: <u>FIRST FLOOR BASEMENT STORAGE</u>	
	Identify the specific area(s) for which the permanent extension of premises is requested. Check all that apply and list for each the relationship of the area to the premises (example: north side, front, etc.)	
	<input checked="" type="checkbox"/> Sidewalk café (public sidewalk) at the <u>WEST</u> side of the premises in front of the following street address(es) <u>626 S 5TH ST</u> (area must be contiguous with licensed area and under the licensee's control) (An application for a Siding Dining Facility Permit must also be submitted with this application.)	
	<input type="checkbox"/> Patio (concrete surface) at the _____ side of the premises <u>PM</u>	
<input type="checkbox"/> Beer garden (soil/grass surface) at the _____ side of the premises		
<input checked="" type="checkbox"/> Deck (attached to building) at the <u>NORTH</u> side of the premises		
<input checked="" type="checkbox"/> Addition to the: <input type="checkbox"/> 1 st floor <input type="checkbox"/> 2 nd floor <input type="checkbox"/> 3 rd floor <input type="checkbox"/> Basement <input checked="" type="checkbox"/> Other: <u>PARKING LOT</u> at the <u>NORTH EAST</u> side of the premises (<u>pergola</u>)		
<input checked="" type="checkbox"/> Other: Describe area(s): <u>PERGOLA ONLY USE FOR TEMPORARY CHANGE OF PLANS</u>		
Does extension area have an additional street address? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, list address: _____		
List all type(s) of business(es) that will operate at this location? <input checked="" type="checkbox"/> Tavern <input checked="" type="checkbox"/> Restaurant		
<input checked="" type="checkbox"/> Other: Describe: <u>PUBLIC ENTERTAINMENT</u>		
Section C	 _____ Signature of Sole Proprietor; a Partner; or if a Corporation or LLC, the Agent must sign	

Office Use Only:

Filed 4/12/2022 Initials (Signature) App #: Food FDEXT Alcohol PERMEXT 330398

Queue to:

- | | | |
|--|-----------------------------------|---------------------------------|
| <input checked="" type="checkbox"/> QNS (all) | <input type="checkbox"/> Approved | <input type="checkbox"/> Hold |
| <input checked="" type="checkbox"/> HD (all food) | <input type="checkbox"/> Approved | <input type="checkbox"/> Hold |
| <input type="checkbox"/> CC Food Only (no alcohol) | <input type="checkbox"/> Approved | <input type="checkbox"/> Denied |

Email to:

- | | | | |
|--|-----------------------------------|-------------------------------|---|
| <input type="checkbox"/> DPW (sidewalk cafes/parklets) | <input type="checkbox"/> Approved | <input type="checkbox"/> Hold | <input type="checkbox"/> Sidewalk Dining Facility Permit Issued |
|--|-----------------------------------|-------------------------------|---|

New Licenses Issued: Food _____ Initials _____ Alcohol _____ Initials _____

CURRENT FLOOR PLAN

