



CITY OF MILWAUKEE  
OFFICE OF THE CITY CLERK

Wednesday, May 25, 2022

COMMITTEE MEETING NOTICE

AD 06

BHULLAR, Rajbir S, Agent  
BHULLAR TWO CORP  
8660 S LIBERTY LN #2202  
Oak Creek, WI 53154

You are requested to attend a hearing which is to be held in Room 301-B, Third Floor, City Hall on:

**Wednesday, June 01, 2022 at 08:45 AM**

**Regarding:** Your Class A Fermented Malt, Food Dealer and Weights & Measures License Applications as agent for "BHULLAR TWO CORP" for "Keefe Food Mart" at 103 E KEEFE Av.

There is a possibility that your application may be denied for one or more of the following reasons: The recommendation of the committee regarding the application shall be based on evidence presented at the hearing. Per MCO 85-2.7-4, probative evidence concerning whether or not a new license should be granted may be presented on the following subjects: whether or not the applicant meets the municipal requirements, the appropriateness of the location and premises where the licensed premises is to be located and whether use of the premises for the purposes or activities permitted by the license would tend to facilitate a public or private nuisance or create undesirable neighborhood problems such as disorderly patrons, unreasonably loud noise, litter, and excessive traffic and parking congestion. Probative evidence relating to these matters may be taken from the plan of operation submitted with the license application, if any, but shall not include the content of any music. Evidence regarding the fitness of the location of the premises to be maintained as the principal place of business, including but not limited to whether there is an overconcentration of businesses of the type for which the license is sought; whether the proposal is consistent with any pertinent neighborhood business or development plans, or the location's proximity to areas where children are typically present. The applicant's record in operating similarly licensed premises; and whether or not the applicant has been charged with or convicted of any felony, misdemeanor, municipal offense or other offense, the circumstances of which substantially relate to the activity to be permitted by the license being applied for or any other factor which reasonably relates to the public health, safety or welfare may also be considered. See attached police report or correspondence.

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

Failure to appear at this meeting may result in the denial of your license. Individual applicants must appear only in person or by an attorney. Corporate or Limited Liability applicants must appear only by the agent designated on the application or by an attorney. Partnership applicants must appear by a partner listed on the application or by an attorney. If you wish to do so and at your own expense, you may be accompanied by an attorney of your choosing to represent you at this hearing.

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

You may examine the application file at this office during regular business hours prior to the hearing date. Inquiries regarding this matter may be directed to the person whose signature appears below.

Limited parking for persons attending meetings in City Hall is available at reduced rates (5 hour limit) at the Milwaukee Center on the southwest corner of East Kilbourn and North Water Street. Parking tickets must be validated in the first floor information booth in City Hall.

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

JIM 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



Wednesday, May 25, 2022



# Notice of Public Hearing

Blank Notice

\*\*\*\*\*

---

BHULLAR, Rajbir S, Agent  
Keefe Food Mart at 103 E KEEFE Av  
Class A Fermented Malt, Food Dealer and Weights & Measures License Applications

**Wednesday, June 01, 2022 at 8:45 AM**

To whom it may concern:

The above application has been made by the above named applicant(s). This requires approval from the Licenses Committee and the Common Council of the City of Milwaukee. The hearing before the Licenses Committee will take place on 6/1/2022 at 8:45 AM, in Room 301-B, Third Floor, City Hall. If you wish, you may provide testimony at the hearing regarding the request; see below for further information. You are not required to attend the hearing. Once the Licenses Committee makes its recommendation, this recommendation is forwarded to the full Common Council for approval at its next regularly scheduled hearing. Please review the information below and if you have further questions regarding this process, please contact the License Division at (414) 286-2238.

---

## 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	106 W KEEFE AVE	MILWAUKEE, WI 53212-1518
CURRENT OCCUPANT	106 W RANDOLPH ST	MILWAUKEE, WI 53212-1559
CURRENT OCCUPANT	106A W KEEFE AVE	MILWAUKEE, WI 53212-1518
CURRENT OCCUPANT	106B W KEEFE AVE	MILWAUKEE, WI 53212-1518
CURRENT OCCUPANT	108 W KEEFE AVE	MILWAUKEE, WI 53212-1518
CURRENT OCCUPANT	116 W KEEFE AVE	MILWAUKEE, WI 53212-1518
CURRENT OCCUPANT	116A W KEEFE AVE	MILWAUKEE, WI 53212-1518
CURRENT OCCUPANT	121 W KEEFE AVE	MILWAUKEE, WI 53212-1517
CURRENT OCCUPANT	202 E KEEFE AVE	MILWAUKEE, WI 53212-1537
CURRENT OCCUPANT	3426 N 1ST ST	MILWAUKEE, WI 53212-1529
CURRENT OCCUPANT	3437 N 1ST ST	MILWAUKEE, WI 53212-1528
CURRENT OCCUPANT	3437 N PALMER ST	MILWAUKEE, WI 53212-1542
CURRENT OCCUPANT	3439 N 1ST ST	MILWAUKEE, WI 53212-1528
CURRENT OCCUPANT	3440 N 1ST ST	MILWAUKEE, WI 53212-1529
CURRENT OCCUPANT	3441 N PALMER ST	MILWAUKEE, WI 53212-1542
CURRENT OCCUPANT	3445 N PALMER ST	MILWAUKEE, WI 53212-1542
CURRENT OCCUPANT	3448 N 1ST ST	MILWAUKEE, WI 53212-1529
CURRENT OCCUPANT	3448A N 1ST ST	MILWAUKEE, WI 53212-1529
CURRENT OCCUPANT	3451 N 1ST ST	MILWAUKEE, WI 53212-1577
CURRENT OCCUPANT	3451 N PALMER ST	MILWAUKEE, WI 53212-1542
CURRENT OCCUPANT	3452 N 1ST ST	MILWAUKEE, WI 53212-1529
CURRENT OCCUPANT	3452A N 1ST ST	MILWAUKEE, WI 53212-1529
CURRENT OCCUPANT	3453 N PALMER ST	MILWAUKEE, WI 53212-1542
CURRENT OCCUPANT	3455 N 1ST ST	MILWAUKEE, WI 53212-1577
CURRENT OCCUPANT	3455 N PALMER ST	MILWAUKEE, WI 53212-1542
CURRENT OCCUPANT	3456 N 1ST ST	MILWAUKEE, WI 53212-1529
CURRENT OCCUPANT	3457 N 1ST ST	MILWAUKEE, WI 53212-1577
CURRENT OCCUPANT	3457 N PALMER ST	MILWAUKEE, WI 53212-1542
CURRENT OCCUPANT	3459 N PALMER ST	MILWAUKEE, WI 53212-1542
CURRENT OCCUPANT	3460 N 1ST ST	MILWAUKEE, WI 53212-1529
CURRENT OCCUPANT	3461 N 1ST ST	MILWAUKEE, WI 53212-1577
CURRENT OCCUPANT	3461 N PALMER ST	MILWAUKEE, WI 53212-1542
CURRENT OCCUPANT	3461A N 1ST ST	MILWAUKEE, WI 53212-1577
CURRENT OCCUPANT	3512 N PALMER ST	MILWAUKEE, WI 53212-1545
CURRENT OCCUPANT	3512A N PALMER ST	MILWAUKEE, WI 53212-1545
CURRENT OCCUPANT	3525 N 1ST ST	MILWAUKEE, WI 53212-1503

Blank Notice

Total Records: 36

Radius 250.0 feet and Center of Circle: 103 E Keefe Av

# MILWAUKEE POLICE DEPARTMENT LICENSING

## CRIMINAL RECORD/ORDINANCE VIOLATION/INCIDENTS SYNOPSIS

DATE: 08/06/2020  
LICENSE TYPE: AMALT  
NEW:   
RENEWAL:

No. 312456  
Application Date: 08/05/2020

License Location: 103 East Keefe Avenue  
Business Name: Yuvraj Food Mart

Licensee/Applicant: Dhillon, Baljinder S.  
(Last Name, First Name, MI)

Date of Birth: 04/15/1977

Home Address: 3159 West Bridge Street  
City: Greenfield  
Home Phone: 414-442-9445

State: WI Zip Code: 53221

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 10/01/2016 the applicant was cited at 3500 West Fond Du Lac Avenue in the city of Milwaukee for Sale of Cigarettes to Minor/Underage.

Charge: Sale of Cigarettes to Minor/Underage  
Finding: Guilty  
Sentence: \$280.00 fine  
Date: 10/30/017  
Case: 16065997

=====  
**Item #1 Updated on 08/21/18**

2. On 01/19/18 at 8:50 am, Milwaukee Police conducted a license premise check at the address of 103 E. Keefe Avenue (All for Us). Officers observed that all the licenses were visible and posted per compliance but the clerk on duty did not have a valid Class "D" operator's license. Officers called the agent and he stated that he knew the clerk did not possess a valid license and was working at the store. The agent was cited.

Charge: Responsible Person on Premise Required  
Finding: Dismissed  
Sentence: \$0.00  
Date: 08/17/18  
Case: 18020129

3. On 08/11/18 a 17 year old working in conjunction with the Milwaukee Police Department and WI WINS Tobacco initiative, was able to purchase a 2 pack of grape Swisher Sweet Cigars at 103 E. Keefe Avenue (All for Us). The sales clerk denied selling the item and stated that he does not work there. The station was mailed a MARTS Program enrollment packet.

Charge: Sale of Cigarette to Minor/Underage  
Finding: Guilty  
Sentence: \$500.00Fine  
Date: 12/05/19  
Case: 19026305

=====  
Item #3 updated with addition of citation on 08/19/2019 .

4. On 08/25/2018 the applicant was cited in the City of Milwaukee at 3476 N. Holton St for Sale of Cigarette to Minor/Underage.

Charge: Sale of Cigarette to Minor/Underage  
Finding: Dismissed  
Sentence:  
Date: 03/04/20  
Case: 19022065

5. On 03/04/2019 officers conducted a licensed premise check at All for Us Foods, 103 E. Keefe Av, based on a complaint of the business selling single cigarettes. The clerk provided all the business licenses and a Class D operator's license. The officer observed a pack of cigarettes next to the register but the clerk denied they were for selling single cigarettes. The officer advised that a secret shopper may come in a check to see if the business is selling singles cigarettes in the future.
6. On 05/14/2019 at 9:04pm officers observed subjects exiting the store at 103 E. Keefe Av. The officers conducted a licensed premise check because this location has a Class A Malt license. The clerk stated the business stopped selling alcohol at 9:00pm but remained open for food sales until 10:00pm. He stated the lights to the beer cooler were turned off at 9 but the coolers were not locked. The owner responded while the officers were on scene and was cooperative.
7. On 07/11/2019 officers conducted a licensed premise check at All for Us, 103 E. Keefe Av. This business has a Class A Malt license and the officer asked the clerk for his Class D Operator's license. The clerk stated he had one but it was expired. The officer checked LIRA and found the clerk had applied for a license in 03/2016 but never paid for the license. The applicant was issued a citation for Responsible Person on Premise.

Charge: Responsible Person on Premise  
Finding: pending further proceedings on **11/03/2020**  
Sentence:  
Date:  
Case: 19029870

=====  
Items #3 & #4 with Disposition on 08/06/2020  
Item #7 updated with new court date on 08/06/2020

**PREVIOUS PREMISE**

Date: 04/11/22  
Officer: Monreal

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

Name of Premise: Keefe Food Mart  
Address: 103 E Keefe  
Phone: 414-539-5837  
Owner: Bhullar, Rajbir S  
Owner address: 8660 S Liberty Ln #2202  
City State Zip: Oak Creek, WI 53154  
Owner Phone: 414-736-9186  
Owner email: [rajbirbhullar90@gmail.com](mailto:rajbirbhullar90@gmail.com)

Manager: Same  
Home Address:  
City State Zip:  
Phone:  
Email:

Preferred contact: Same

Location currently open:  YES  NO

Projected open date: 05/22

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

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

Premise Type: Liquor Store  
Convenience Store  
Other:

Licenses currently held:

- Alcohol:  Yes  No  
Tobacco:  Yes  No  
Food:  Yes  No  
Extended Hours:  Yes  No  
Secondhand Dealer:  Yes  No  
Other:  Yes  No  
Other:  Yes  No

**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 appear to be adequate  Yes  No
11. Are there No Loitering Signs posted?  Yes  No
12. Are the address numbers prominently displayed and easy to see  Yes  No

**Camera Survey:**

13. Does this location have security cameras?  Yes  No
14. Are they in working order?  Yes  No
15. What format are the cameras?
  - a. Color  Yes  No
  - b. Digital  Yes  No
  - c. VCR  Yes  No
  - d. Recorded  Yes  No
16. Are there exterior cameras  Yes  No How many? 4
17. Are there interior cameras  Yes  No How many? 12
18. Are at least two high-resolution surveillance security cameras installed?  Yes  No
19. Does one camera show an overall view of the counter and register area?  Yes  No
20. Does one camera show a clear, identifiable, full frame image of the face of each person entering and leaving the store?  Yes  No
21. Are the camera views obstructed by fixtures or displays?  Yes  No



22. Is the recorded footage stored for at least 30 days?  Yes  No
23. Do all store employees know how to record footage from the camera system to media capable of being transferred to police custody?  Yes  No

**Interior Survey:**

24. Is the storeowner willing to be a standing complainant regarding loitering?  Yes  No
25. Is the interior of the location neat and clean?  Yes  No
26. Does an interior camera face the entrance/exit?  Yes  No
27. Is there a lockable area that separates employees from customers?  Yes  No
28. Does the store sell single chore boy?  Yes  No
29. Does the store sell blunt wraps?  Yes  No
30. Does the store sell scales?  Yes  No
31. Does the store sell items that may be used as crack pipes?  Yes  No
- a. Describe item
32. Does the store have an over abundance of sandwich baggies?  Yes  No
33. Does the owner understand that these items are often used for drug use?  Yes  No
34. Do the products in the store appear to be new and rotated often?  Yes  No
35. Are emergency and non-emergency numbers posted near the phone?  Yes  No
36. 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 "68-4.3 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 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.
6. Has the owner and their employees attended the Robbery Prevention Training with in 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:**

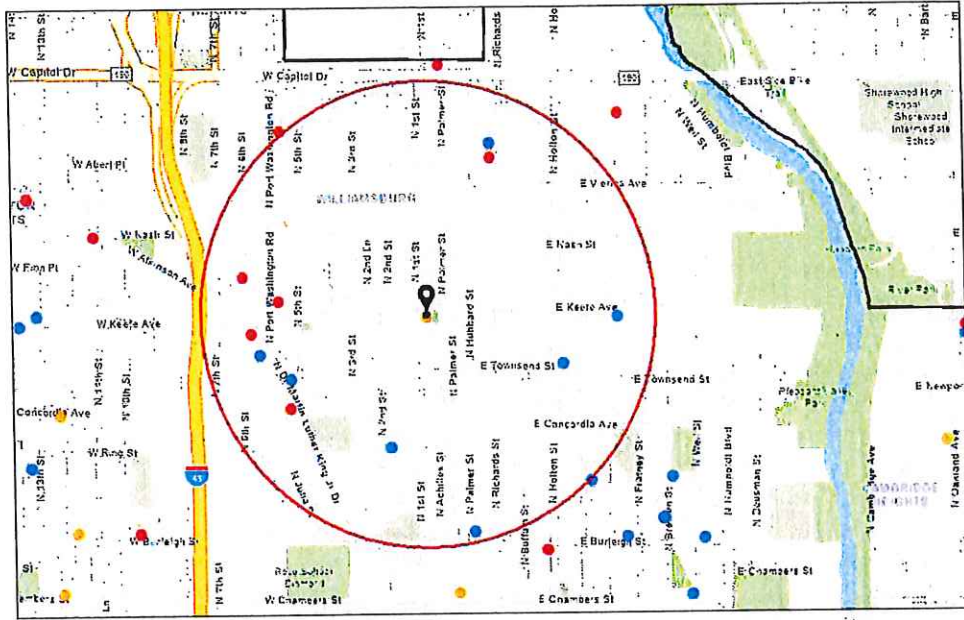
Advised to contact Community Outreach regarding Robbery Prevention 4/13

# City of Milwaukee Concentration Map

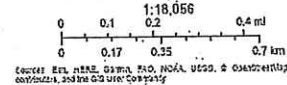
## Area of Interest (AOI) Information

Area : 21,862,585.55 ft<sup>2</sup>

Mar 24 2022 9:54:33 Central Daylight Time



- Alcohol Licenses
  - Class A Fermented Malt Beverage
  - Class A Liquor and Malt
  - Class B Tavern
- City Limits



## Summary

Name	Count	Area(ft <sup>2</sup> )	Length(mi)
Alcohol Licenses	13		

## Alcohol Licenses

#	Legal Entity	Trade Name	Licensor	Address	License Type Name	Total Capacity	Expiration Date	Count
1	ACD PRODUCTIO N, INC	ART BAR CAFE & GALLERY	DONALD R KRAUSE, Agt	722-732 E BURLEIGH ST	Class B Tavern License	217	12/17/2021, 6:00 PM	1
2	King Hall, LLC	King Hall	DAREN JACKSON, Agt	3413 N Martin L King Jr DR	Class B Tavern License	200	2/7/2022, 6:00 PM	1
3	D&D's Lounge LLC	D&D's Lounge LLC	Douglas S Davis, Agt	3853 N Richards ST	Class B Tavern License	99	2/13/2022, 6:00 PM	1
4	GREEN RING II	GREEN RING II	ISAAC T RAGSDALE, SP	3305 N MARTIN L KING JR DR	Class A Malt & Class A Liquor License		3/2/2022, 6:00 PM	1
5	Sims Grocery Inc	Davis and Son Food & Liquor	HARBANS KAUR, Agt	3562 N Martin L King Jr DR	Class A Malt & Class A Liquor License		3/21/2022, 7:00 PM	1
6	GLASS SLIPPER	GLASS SLIPPER	JIMMY D JORDAN, SP	3250 N 2ND ST	Class B Tavern License	80	3/21/2022, 7:00 PM	1
7	Sam's Place Jazz LLC	Sam's Place Jazz Cafe	Sam E Belton, Agt	3338 N Martin L King Jr DR	Class B Tavern License	88	4/3/2022, 7:00 PM	1
8	The Milwaukee Filling Station, Inc	The Riverwest Filling Station	Bryan A Atinsky, Agt	701 E KEEFE AV	Class B Tavern License	80	6/13/2022, 7:00 PM	1
9	MET HALL, INC INK	RET LOUNGE	L C WHITEHEAD, Agt	3400 N HOLTON ST	Class B Tavern License	80	6/17/2022, 7:00 PM	1
10	CONNOISSEUR ENCOUNTER S CO, INC	SHERMER SPECIALTIES	DOMINIC A LAMPONE, Agt	3837 N RICHARDS ST	Class A Malt & Class A Liquor License		7/25/2022, 7:00 PM	1
11	AULAKH CORP	Happy Food Mart	Jagroop Singh, Agt	103 E KEEFE AV	Class A Fermented Malt Beverage Retailer's License		7/17/2022, 7:00 PM	1
12	Bhullar Corp	Corner Liquor	Rajbir S Bhullar, Agt	3500 N PORT WASHINGTON AV	Class A Malt & Class A Liquor License		10/11/2022, 7:00 PM	1
13	Action Food & Liquor LLC	Action Food & Liquor	Mohammad Owais, Agt	3455 N Martin L King Jr DR	Class A Malt & Class A Liquor License		10/15/2022, 7:00 PM	1

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



# 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) CORNER STORE

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: WORKED IN RETAIL FOR YEARS

## 2. Business Operations

- a. Proposed Opening Date: 05/01/2022
- 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: AULAKH CORP
- 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: 3 Locations: CASH REG., ENTERANCE, KITCHEN AREA  
Outside: 1 Locations: BY FRONT DOOR OUTSIDE
- 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 \_\_\_\_\_  
 List their licensing, certification, or training credentials \_\_\_\_\_
- d. Will there be security cameras?  No  Yes If yes, how many? 16 and list locations: THROUGHOUT INSIDE STORE AND OUTSIDE
- e. Will searches/identification checks be done upon entry?  No  Yes If yes, describe \_\_\_\_\_

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

Alcohol <u>20</u> %	Food <u>30</u> %	Secondhand Merchandise _____ %	Precious Metals & Gems _____ %
Entertainment _____ %	Cigarettes _____ %	Personal Services (such as tattoo, body piercing, salon, tailor, tanning, etc.) _____ %	Other <u>50</u> % Describe: <u>CIG &amp; MISC</u>
Pawnbroker Activity _____ %	Salvaged Materials _____ % (such as scrap metal)		

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

### Type 1

- Full Service Restaurant       Cafe/Coffee Shop       Deli or Fast Food Restaurant       Private/Fraternal/Veterans Club
- Night Club       Tavern       Cocktail Lounge       Teen Club
- Banquet Hall       Sports Facility       Bowling Alley
- Hotel/Motel : Number of Floors: \_\_\_\_\_       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) 19/18

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: KEEFE AND HOLTON
- d. Describe Building:  Free Standing Building  Strip Mall  Other: \_\_\_\_\_
- e. Describe Premises Structure:  Single Story  Multi-Story - # of Stories 3  Other: \_\_\_\_\_
- f. Describe Surrounding Area:  Commercial  Residential  Industrial  Other: \_\_\_\_\_
- g. Building Owner Name: BALJINDER S. DHILLON Phone Number: 414-303-5119  
 Building Owner Address: 3476 N HOLTON ST, MILWAUKEE, WI 53212

## 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	09:00PM	200		
Monday	8:00AM	09:00PM	200		
Tuesday	8:00AM	09:00PM	200		
Wednesday	8:00AM	09:00PM	200		
Thursday	8:00AM	09:00PM	200		
Friday	8:00AM	09:00PM	200		
Saturday	8:00AM	09:00PM	200		

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

Legal Entity Name: <b>BHULLAR TWO Corp</b>	
Premise Address: <b>103 E KEEFE AVE, MILWAUKEE, WI 53212</b>	
<b>Proximity of Premises to Church, School, Daycare Center or Hospital</b>	
Is the building within 300 feet of any church, school, daycare center or hospital? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
<b>"Service Bar Only" Designation</b>	
If applying for Class B or C license, are you applying for "Service Bar Only"? <input checked="" 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.	
<b>Business Information</b>	
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 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: _____	
<b>Property Information (New &amp; Transfer Applicants Only)</b>	
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.)? <u>landlord</u>	
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 <u>\$ 0.00</u>	
e) Total amount paid for goodwill of the business <u>\$ 0.00</u>	
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 checked="" type="checkbox"/> Yes	
<b>Lease Information (New &amp; Transfer Applicants who are leasing the premises only)</b>	
a) Date lease begins <u>05/01/2022</u> Ends <u>04/30/2032</u>	
b) Monthly rental <u>\$ 6500.00</u>	
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 checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
e) For what length of time have you been guaranteed occupancy (number of years)? <u>10 YRS</u>	



**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](mailto:license@milwaukee.gov) • [www.milwaukee.gov/license](http://www.milwaukee.gov/license)

Legal Entity Name: **BHULLAR TWO CORP**

Premises Address: **103 E KEEFE AVE, MILWAUKEE, WI 53212**

## 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: DAIRY, PIZZA, MEAT, POULTRY, FISH, ICE CREAM, MILK, CHEESE, EGGS, SANDWICHES

**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:

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

PSB 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.

PSB 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.

PSB 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.

PSB 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: B. Bill

Signature of Additional Partner: Sydney



**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: **BHULLAR TWO CORP**

Premise Address: **103 E KEEFE AVE, MILWAUKEE WI 53212**

**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>				
<input checked="" type="checkbox"/> Up to 3 scanners	24 months	\$130 total*	<input type="checkbox"/> 1 <input checked="" 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		

**Total Fee Due** \$ 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.

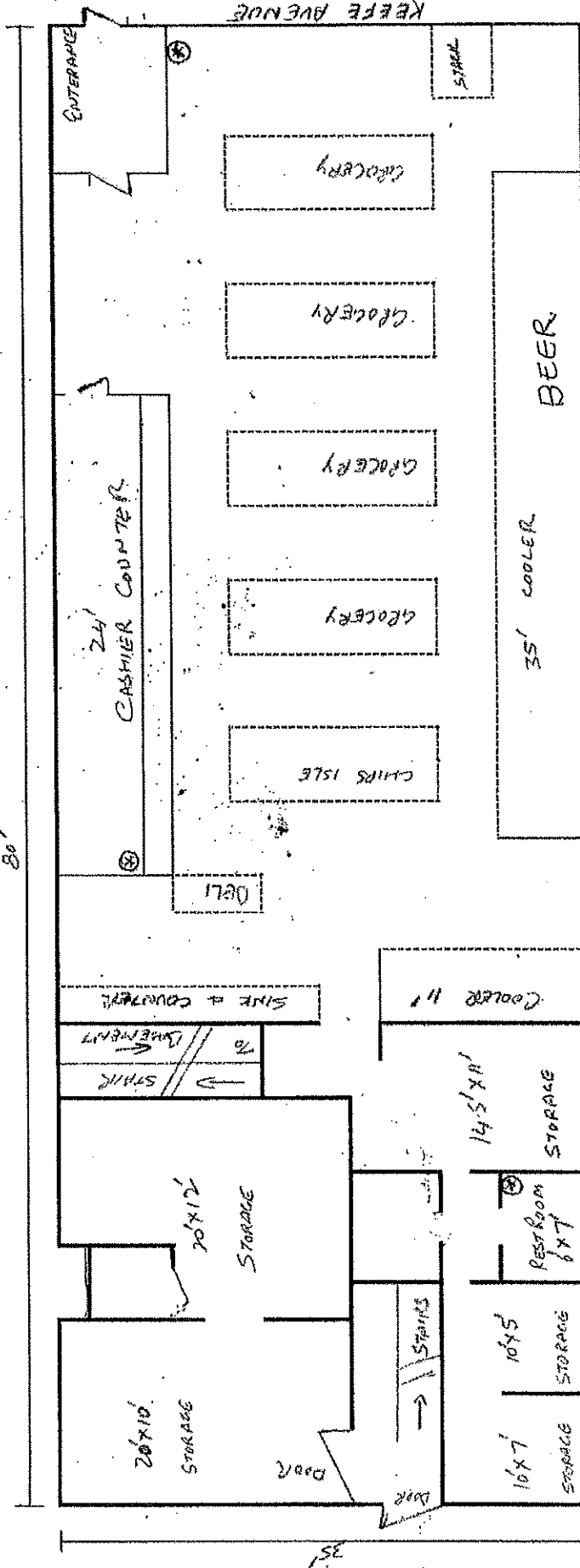
Signature of Sole Proprietor, Partner, or 20% or more Shareholder  
(If there are no 20% or more shareholders,  
Corporate Officer-print name/title and sign)

Signature of additional partner or 20% or more shareholder

*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).*

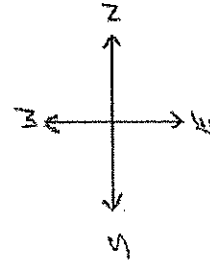
N 1ST STREET

80'



⊕ CARBAGE

80 X 35'  
2800 SQ FT



Agent Rajbir S. Bhullar  
 Bhullar Two Corp Dba Keefe Food Mart  
 103 E Keefe Ave, Milwaukee, WI 53212