

CITY OF MILWAUKEE OFFICE OF THE CITY CLERK

Tuesday, August 23, 2022

COMMITTEE MEETING NOTICE

AD 09

ALLEN, Nedra, Agent Wireless Vision LLC 40700 WOODWARD Av #500 Bloomfield Hills, MI 48304

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

Friday, September 02, 2022 at 09:10 AM

Regarding:

Your Secondhand Dealer's and Weights & Measures License Transfer Applications with Change of Agent as agent for "Wireless Vision LLC" for "T-Mobile" at 7335 ODD HOPE Rd.

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/392400829. If you wish to call in, please call +1 (571) 317-3112 and use Access Code: 392-400-829.

There is a possibility that your application may be denied for one or more of the following reasons: Neighborhood Objections to the granting of the license based on the type of business conducted at the premises, thefts, purchase of stolen goods, excessive littering, loud noise, traffic violations and other factors which relate to the health, safety and welfare of the neighborhood and generate undesirable secondary effects, you do not meet the statutory and municipal requirements; the appropriateness of the location to be licensed and whether the location will create undesirable neighborhood problems, 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 stasst5@milwaukee.gov



Tuesday, August 23, 2022



Notice of Public Hearing

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ALLEN, Nedra
T-Mobile at 7335 W GOOD HOPE Rd.

Secondhand Dealer's and Weights & Measures License Transfer Applications with Change of Agent

Friday, September 02, 2022 at 09:10 AM

To whom it may concern:

The above application has been made by the above named applicant(s). This requires approval from the Licenses Committee and the Common Council of the City of Milwaukee. The hearing before the Licenses Committee will take place virtually on 09/02/2022 at 09:10 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 CURRENT OCCUPANT **CURRENT OCCUPANT CURRENT OCCUPANT** CURRENT OCCUPANT **CURRENT OCCUPANT CURRENT OCCUPANT** CURRENT OCCUPANT **CURRENT OCCUPANT CURRENT OCCUPANT CURRENT OCCUPANT** CURRENT OCCUPANT MAIL ADDRESS 7020 W GOOD HOPE RD 7110 W GOOD HOPE RD 7111 N 76TH ST 7125 N 76TH ST 7717 W GOOD HOPE RD, 106 7717 W GOOD HOPE RD, 107 7717 W GOOD HOPE RD, 108 7717 W GOOD HOPE RD, 109 7717 W GOOD HOPE RD, 110 7717 W GOOD HOPE RD, 113 7717 W GOOD HOPE RD, 114 7717 W GOOD HOPE RD, 115 7717 W GOOD HOPE RD, 116 7717 W GOOD HOPE RD, 117 7717 W GOOD HOPE RD, 301 7717 W GOOD HOPE RD, 304 7717 W GOOD HOPE RD, 305 7717 W GOOD HOPE RD, 306 7717 W GOOD HOPE RD, 307 7717 W GOOD HOPE RD, 308 7717 W GOOD HOPE RD, 309 7717 W GOOD HOPE RD, 310 7717 W GOOD HOPE RD, 311 7717 W GOOD HOPE RD, 312 7717 W GOOD HOPE RD, 315 7717 W GOOD HOPE RD, 316 7717 W GOOD HOPE RD, 317 7717 W GOOD HOPE RD, 319 7717 W GOOD HOPE RD, 320 7717 W GOOD HOPE RD, 321 7717 W GOOD HOPE RD, 322 7717 W GOOD HOPE RD, 401 7717 W GOOD HOPE RD, 404 7717 W GOOD HOPE RD, 405 7717 W GOOD HOPE RD, 406 7717 W GOOD HOPE RD, 407 7717 W GOOD HOPE RD, 408 7717 W GOOD HOPE RD, 409 7717 W GOOD HOPE RD, 410 7717 W GOOD HOPE RD, 411 7717 W GOOD HOPE RD, 412 7717 W GOOD HOPE RD, 413 7717 W GOOD HOPE RD, 415 7717 W GOOD HOPE RD, 416 7717 W GOOD HOPE RD, 417 7717 W GOOD HOPE RD, 418

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Blank Notice Total Records: 69

Radius 1,000 feet and Center of Circle: 7335 W Good Hope Rd

MILWAUKEE

BUSINESS TRANSFER APPLICATION

ccl-transfer1 2/24/20

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

SECTION 1 CHECK THE TYPE OF TRANSFER:	
☐ CHANGE OF LOCATION ☐ REORGANIZATION OF LEGAL ENTITY	☑ CHANGE OF AGENT ☐ TRANSFER OF STOCK
SECTION 2 LIST ALL LICENSE(S) TO TRANSFER:	
Type/Number: SHD-0001756 Type/Number:	Type/Number:
Type/Number: W&M-0006857 Type/Number:	Type/Number:
SECTION 3 LICENSE(S) ARE CURRENTLY ISSUED TO:	· · · · · · · · · · · · · · · · · · ·
Legal Entity Name: Wireless Vision LLC	Val. (1.1.)
Premises Address: 7335 W. Good Hope Rd, Milwaukee, V	NI 53223
SECTION 4 TRANSFER TO: (ENTER ALL OWNERSHIP INFORMATION WHETHER IT IS CHANGING OR NOT)	
Legal Entity (check one): Sole Proprietor Partnership Co	orporation VLLC Non Profit
Legal Entity Name:	Trade/DBA Name: T-Mobile
Wireless Vision LLC Premises Address (Include city/state/zlp): 7335 W. Good Ho	pe Rd, Milwaukee, WI 53223
145 W. Oklahoma Av	e #7, Milwaukee, WI 50207
Mailing Address: Same as premise Mother (include city/state/zip): 40700 Woodward Ave Suite 250, Bloo	
Phone: 248-406-4630	Email: wvlicensing@wirelessvision.com
SECTION 5 AGENT / SOLE PROPRIETOR / 1 ST PARTNER	
FULL LEGAL NAME (Last, First & Middle Initial): Allen, Nedra	Date of Birth: 05/16/1982
Home Address (include city/state/zip): 44271 Pine Drive, Sterling Heights, MI 48313	
Driver's License Number/State ID #: A 4 5 0 -6 2 6 0	-1537-1 slate: MI
Home Phone: 248-406-4630	Cell Phone:
Percent of Ownership Interest (if applicable):	Email: wvlicensing@wirelessvision.com
SECTION 6 LIST ALL PERSONS WITH 20% OR MORE OW	NERSHIP INTEREST / ADDITIONAL PARTNERS
FULL LEGAL NAME (Last, First & Middle Initial):	Date of Birth:
Home Address (include city/state/zip):	
Driver's License Number/State ID #:	Cell Phone:
: Percent of Ownership Interest:	Email:
FULL LEGAL NAME (Last, First & Middle Initial):	Date of Birth:
Home Address (include city/state/zip):	NO. 10 10 10 10 10 10 10 10 10 10 10 10 10
	2
Driver's License Number/State ID #;	- State:
Home Phone:	Cell Phone:
Percent of Ownership Interest:	Email:
Are there additional persons with 20% or more interest or partners?	No Yes If yes, attach additional forms as necessary.
Office Use Only: Initials 01 Filed 07/07/22 Application II(s) 340016 Paid	
	cc
Issued License #(s)	

SHD 24006 WM 340017

SECTION 7 PLAN OF OPERATION & FLOOR PLAN
SECTION / FLAN OF OF ENGINEER & LEGALITHE
Are you requesting changes to the current plan of operation or floor plan?
Yes If Yes, you must submit a new Plan of Operation and Floor Plan. Required for all changes of location.
☑ No
SECTION 8 SIGNATURE(S)
I/we understand that I am/we are required to inform the City Clerk within 10 days of any substantial changes in any of the information supplied in this application.
I/we have knowledge of the City Ordinances currently regulating the license applied for herein, and understand that the license may be subject to suspension, non-renewal or revocation, if I/we violate any rule or regulation relating to this license. I/we understand that I/we shall not willfully refuse to provide the services offered under this license, or add charges or require deposits not required of the general public because of race, color, sex, religion, national origin or ancestry, age, handicap, lawful source of income, marital status, sexual orientation, gender identity or expression, familial status or the fact that a person is now or has been a member of the military service, whether dressed in uniform or not; and shall not seek such information as a condition of employment, or penalize any employee or discriminate in the selection of personnel for training or promotion on the basis of such information.
I/we certify that I am/we are the applicant and all statements are true and correct.
Signature of Agent or 20%+ Owner

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