

### CITY OF MILWAUKEE OFFICE OF THE CITY CLERK

Wednesday, February 22, 2023

#### COMMITTEE MEETING NOTICE

AD 01

CHEATHAM, Brandalynn C, Agent MOMS HOUSE LLC 18620 Midland Pl Brookfiled, WI 53045

You are requested to attend a hearing which is to be held in Room 301-B, Third Floor, City Hall or you may attend virtually using the link below.

#### Tuesday, March 07, 2023 at 02:05 PM

The access code is <u>https://meet.goto.com/446591181</u>. If you wish to call in: <u>+1 (571) 317-3122</u> and use Access Code: 446-591-181 Please see the enclosed best practices document for further instructions.

#### **Regarding:** Your Class B Tavern, Public Entertainment Premises and Food Dealer License Applications Requesting 5 Amusement Machines as agent for "MOMS HOUSE LLC" for "TONY'S BBQ" at 3510 W VILLARD Av.

There is a possibility that your application may be denied for one or reaction 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<br/>warrants or unpaid fines:Proof of warrant satisfaction or payment of fines must be submitted at the hearing on the<br/>above date and time. Failure to comply with this requirement may result in a delay of the<br/>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

Jim Cooney License Division Manager

BY:

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. <u>www.milwaukee.gov/license</u> Phone: (414) 286-2238 Fax: (414) 286-3057 Email Address: License@milwaukee.gov

## Date: 12/12/2022 Officer: T. Geniesse

## <u>City of Milwaukee Police Department</u> <u>90-5-1.5 Crime Prevention Survey</u> Tavern Inspection

Name of Premise: Tony's BBQ Address: 3510 w Villard Ave Phone: 414-464-6833

Owner: Brandalynn C Cheatham 9/19/80, C350-0608-0839-03, EXP 9/23 Owner address: 18620 Midland Pl City State Zip: Brookfield, WI 53045 Owner Phone: 608-421-8323 Owner email: brandycheatam@gmail.com

Licensee/Agent: : Brandalynn C Cheatham Home Address: 18620 Midland Pl City State Zip: : Brookfield, WI 53045 Phone: 608-421-8323 Email: brandycheatam@gmail.com

Preferred contact: Brandalynn C Cheatham

Location currently open: 🛛 YES 🗌 NO	0
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Projected open date:

Day's open:  $\boxtimes$ S  $\square$ M  $\boxtimes$ T  $\boxtimes$ W  $\boxtimes$ Th  $\boxtimes$ F  $\boxtimes$ SA  $\square$ ALL

Hours of Operation:	Sun: Mon: Tue: Wed: Thu: Fri: Sat:	12P-8P Closed 11A-9P 11A-9P 11A-9P 11A-10P 11A-10P	⊡24 hours ⊡Y ⊠N
Premise Type:		vern/Bar staurant ser:	
Licenses currently he Alcohol: Tobacco:	ld:	□Yes ⊠No Class: □Yes ⊠No #:	#:

1

Yes No #: Food Dealer #0013290 D&D Ashley's 1501 W

Food: Center St

∐Yes ⊠No  #:	
	#:
∐Yes ⊠No Type:	#:
□Yes □No Type:	#:
	☐Yes ⊠No #: ☐Yes ⊠No Type: ☐Yes ⊠No Type: ☐Yes ☐No Type:

#### **Exterior Survey:**

- 1. Is the area around the location clean?  $\boxtimes$  Yes  $\square$  No
- 2. What surrounds the location? (Check all the apply)
  - a. 🗌 Park
  - b. School
  - c. []Youth Center
  - d. Church
  - e.  $\square$ Tavern(s) If so, how many
  - f.  $\square$  Residential
  - g.  $\square$  Other businesses
  - h. Other:
- 3. Can you see from the outside of the location into the interior  $\Box$ Yes  $\boxtimes$ No
- 4. Can you see the employees inside of the location from the outside Yes No
- 5. Are exterior windows free of signage  $\Box$  Yes  $\boxtimes$  No
- 6. Is there a parking lot  $\Box$  Yes  $\boxtimes$  No
- 7. Is the parking lot clean? Yes No No lot
- 8. Off-Street parking Xes No
- 9. Is the parking lot well lit? Yes No No lot
- 10. Valet Parking Yes No
  - a. Will this lot have a guard? Yes No
  - b. Will this lot have cameras?  $\boxtimes$  Yes  $\square$ No
- 11. Are there areas where a person could conceal themselves  $\square$  Yes  $\square$  No
- 12. Is there exterior lighting? XYes No. Does it appears to be adequate Yes No.
- 13. Exterior Payphone? Yes No
- 14. Are there No Loitering Signs posted? Yes No
- 15. Are there exterior security cameras ⊠Yes □No How Many: 2
- 16. Are the address numbers prominently displayed and easy to see XYes No

#### Camera Survey:

- 17. Does this location have security cameras? XYes No
- 18. Are they in working order? X Yes No
- 19. What format are the cameras?
  - a. Color  $extsf{Yes}$  No
  - b. Digital  $extsf{Yes} \square extsf{No}$
  - c. Recorded  $extsf{Yes}$  No
- 20. How long is footage stored for later viewing: 21 days
- 21. Are there exterior cameras  $\Box$  Yes  $\Box$  No How many: 2
- 22. Are there interior cameras X Yes No How many: 7
- 23. Do all employees know how to retrieve recorded digital images/footage? Yes No
- 24. Cameras located in parking lot Yes No How many No parking lot

#### **Interior Survey:**

- 25. What is the planned capacity 45 until next inspection is completed
- 26. What is the minimum number of employees That will be on premise 3
- 27. Is the storeowner willing to be a standing complainant regarding loitering?  $\boxtimes$  Yes  $\square$ No
  - a. If yes have them fill out the standing complaint form and give them two of the commercial signs Yes No
- 28. Is the interior of the location neat and clean?
- ⊠Yes □No ⊠Yes □No
- 29. Does an interior camera face the entrance/exit?
- 30. Is there a lockable area that separates employees from customers? XYes No
- 31. Are emergency and non-emergency numbers posted near the phone? XYes No
- 32. Does the owner know how to contact their police district directly?  $\square$  Yes  $\square$  No
  - a. Did you provide a district contact guide to the owner?  $\overleftarrow{\Delta}Yes$   $\Box No$

#### <u>Security</u>

- 33. How many security personnel are going to be employed: 0
- 34. How ill they be deployed: Interior Exterior
- 35. What days will they be deployed Mon Tue Wed Thu Fri Sat Sun
- 36. Will the security be managed by business or contracted
- 37. Will they be armed Yes No
- 38. What type of security measures to be used:
  - Wanding/metal detector
    - ID Scanner
    - Dress Code
  - Cover Charge
  - Age restriction
  - 🗌 Other

### ADDITIONAL COMMENTS/RECOMMENDATIONS:

Ms. Cheatham stated they are keeping the business the same. They will update District Four if there are any changes.

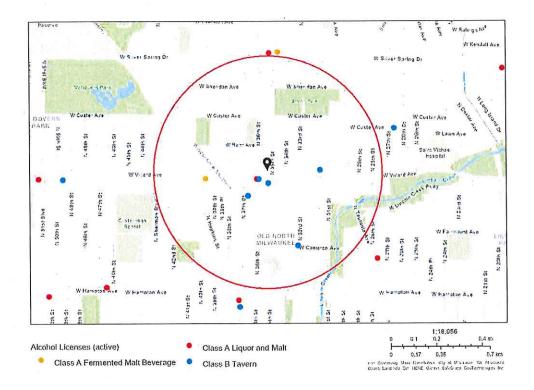
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# City Concentration Map for 3510 W Villard Av

### Area of Interest (AOI) Information

Area : 21,862,585.89 ft<sup>2</sup>

Nov 11 2022 14:59:30 Central Standard Time



about:blank

## Summary

Name	Count	Area(ft²)	Length(mi)
Alcohol Licenses	7		

Alcohol Licenses

#	Legal Entity	Trade Name	Licensee	Address	License Type Name	Total Capacity	Expiration Date	Count
1	PEARL LIQUOR, INC	SUNSHINE LIQUOR & DELI	JAGJIT S CHEEMA, Agt	3541 W VILLARD AV	Class A Malt & Class A Liquor License		12/19/2022, 6:00 PM	1
2	Uptown Bar and Grill	Uptown Bar and Grill	Tonia R Otis, SP	3535 W VILLARD AV	Class B Tavern License		12/5/2022, 6:00 PM	1
3	C-NOTE'S SPORTS LOUNGE	C-NOTE'S SPORTS LOUNGE	CEDRIC R HORTON, SP	5138 N 37TH ST	Class B Tavern License	49	2/7/2023, 6:00 PM	1
4	BOC Group LLC	Oasis Jazz Bar & Grill	Liza M Blackburn, Agt	3120 W Villard AV	Class B Tavern License	675	2/7/2023, 6:00 PM	1
5	STNJ Enterprises LLC	Adam's Bar & Grill	Sia Xiong, Agt	3300 W Cameron AV	Class B Tavern License	80	5/3/2023, 7:00 PM	1
6	Tomato Patch	Tomato Patch	Judith A Styne, SP	5173 N 35th ST	Class B Tavern License	80	7/13/2023, 7:00 PM	1
7	Singh, Inc	One Stop Pantry	KANWARVIR SINGH, Agt	3927 W Villard AV	Class A Fermented Malt Beverage Retailer's License		8/21/2023, 7:00 PM	1

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



Wednesday, February 22, 2023



## Notice of Public Hearing

**Blank Notice** 

CHEATHAM, Brandalynn C, Agent TONY'S BBQ at 3510 W VILLARD Av

Class B Tavern, Public Entertainment Premises and Food Dealer License Applications Requesting 5 Amusement Machines

## Tuesday, March 07, 2023 at 2:05 PM

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 3/7/2023 at 2:05 PM in Room 301-B, Third Floor, City Hall. This is a public hearing. Those wishing to view the proceeding are able to do so via the City Channel – Channel 25 on Spectrum Cable – or on the Internet at http://city.milwaukee.gov/citychannel. Those wishing to provide oral testimony via phone or internet 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 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 CURRENT OCCUPANT

MAIL ADDRESS 3424 W VILLARD AVE 3426 W VILLARD AVE# 1 3426 W VILLARD AVE# 2 3427 W VILLARD AVE# 201 3427 W VILLARD AVE# 202 3427 W VILLARD AVE# 203 3427 W VILLARD AVE# 204 3427 W VILLARD AVE# 205 3427 W VILLARD AVE# 206 3427 W VILLARD AVE# 207 3427 W VILLARD AVE# 208 3427 W VILLARD AVE# 209 3427 W VILLARD AVE# 210 3427 W VILLARD AVE# 211 3427 W VILLARD AVE# 212 3427 W VILLARD AVE# 213 3427 W VILLARD AVE# 214 3427 W VILLARD AVE# 215 3427 W VILLARD AVE# 216 3427 W VILLARD AVE# 217 3427 W VILLARD AVE# 301 3427 W VILLARD AVE# 302 3427 W VILLARD AVE# 303 3427 W VILLARD AVE# 304 3427 W VILLARD AVE# 305 3427 W VILLARD AVE# 306 3427 W VILLARD AVE# 307 3427 W VILLARD AVE# 308 3427 W VILLARD AVE# 309 3427 W VILLARD AVE# 310 3427 W VILLARD AVE# 311 3427 W VILLARD AVE# 312 3427 W VILLARD AVE# 313 3427 W VILLARD AVE# 314 3427 W VILLARD AVE# 315 3427 W VILLARD AVE# 316 3427 W VILLARD AVE# 317 3427 W VILLARD AVE# 405 3427 W VILLARD AVE# 406 3427 W VILLARD AVE# 407 3427 W VILLARD AVE# 408 3427 W VILLARD AVE# 409 3427 W VILLARD AVE# 410 3427 W VILLARD AVE# 411 3427 W VILLARD AVE# 412 3427 W VILLARD AVE# 413 CITY STATE ZIP

MILWAUKEE, WI 53209-4710 MILWAUKEE, WI 53209-4710 MILWAUKEE, WI 53209-4710 MILWAUKEE, WI 53209-4700 MILWAUKEE, WI 53209-4774 MILWAUKEE, WI 53209-4776 MILWAUKEE, WI 53209-4776

CURRENT OCCUPANT **Blank Notice** 

3427 W VILLARD AVE# 414 3427 W VILLARD AVE# 415 3427 W VILLARD AVE# 416 3427 W VILLARD AVE# 417 3504 W VILLARD AVE# LOWR 3504 W VILLARD AVE# UPPR 3518 W VILLARD AVE 3519 W VILLARD AVE 3520A W VILLARD AVE 3522 W VILLARD AVE 3528 W VILLARD AVE 5185 N 35TH ST# 1 5185 N 35TH ST# 2 5185 N 35TH ST# 3 5185 N 35TH ST# 4 5185 N 35TH ST# 5 5185 N 35TH ST# 6 5185 N 35TH ST# 7 5204 N 36TH ST 5218 N 36TH ST 5220 N 35TH ST 5224 N 36TH ST 5224A N 36TH ST 5229 N 36TH ST 5229 N 36TH ST# A 5231 N 36TH ST 5232 N 36TH ST 5236 N 36TH ST 5237 N 35TH ST# 1 5237 N 35TH ST# 2 5237 N 35TH ST# 3 5237 N 35TH ST# 4 5237 N 35TH ST# 5 5237 N 35TH ST# 6 5237 N 35TH ST# 7 5237 N 35TH ST# 8 5240A N 35TH ST 5242 N 36TH ST 5248 N 36TH ST

MILWAUKEE, WI 53209-4776 MILWAUKEE, WI 53209-4776 MILWAUKEE, WI 53209-4776 MILWAUKEE, WI 53209-4776 MILWAUKEE, WI 53209-4712 MILWAUKEE, WI 53209-4712 MILWAUKEE, WI 53209-4712 MILWAUKEE, WI 53209-4711 MILWAUKEE, WI 53209-4712 MILWAUKEE, WI 53209-4712 MILWAUKEE, WI 53209-4712 MILWAUKEE, WI 53209-5378 MILWAUKEE, WI 53209-4706 MILWAUKEE, WI 53209-4706 MILWAUKEE, WI 53209-4704 MILWAUKEE, WI 53209-4706 MILWAUKEE, WI 53209-4706 MILWAUKEE, WI 53209-4705 MILWAUKEE, WI 53209-4705 MILWAUKEE, WI 53209-4705 MILWAUKEE, WI 53209-4706 MILWAUKEE, WI 53209-4706 MILWAUKEE, WI 53209-4703 MILWAUKEE, WI 53209-4703 MILWAUKEE, WI 53209-4703 MILWAUKEE, WI 53209-4703 MILWÁUKEE, WI 53209-4703 MILWAUKEE, WI 53209-4703 MILWAUKEE, WI 53209-4703 MILWAUKEE, WI 53209-4703 MILWAUKEE, WI 53209-4704 MILWAUKEE, WI 53209-4706 MILWAUKEE, WI 53209-4706

Total Records: 85

Radius 250.0 feet and Center of Circle: 3510 W Villard Av



## **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: <u>license@milwaukee.gov</u>

1. 1	Type of Business
Apply	ing 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
Provid	de a detailed description of the type of business you plan on operating: RESTAURANT
Do yo	ou have any experience operating this type of business? 🗌 No 🔳 Yes 🛛 If yes, explain: I HAVE ANOTHER RESTAURANT
2. E	Business Operations
a.	Proposed Opening Date: 01/15/2023
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: Business
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. L	itter & 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)
	Signs Posted Other:
e.	Will a sound amplification system be used? 📓 No 🗌 Yes If yes, describe:
4. S	moking & Sanitation
a.	Are there designated outdoor smoking areas? 🔳 No 🗌 Yes If yes, describe:
b.	Number of Garbage Cans: Inside: Locations: CASH REGISTAR, BATHROOM, 3 IN BACK
	Outside: Locations: ON THE SIDEWALK 100 FEET FROM 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 Dother:

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: LOADING IN THE BACK,							
	THE AREA IS GATED,	LOCKED AND KEPT	SECURE.	-				
C.	Will you have security per	sonnel on premise? 🔳	No 🗌 Ye	s If yes, how many? _	ar	nd answer the following:		
	What are their resp	oonsibilities?						
	ls security equipme	ent used? 📕 No 🗌 Yo	es If yes, de	escribe				
d.	Will there be security cam			many? <u>5</u> and list	locations:	Lobby, register, Ritchen Backdoor		
	CAMERAS INSIDE & A		and a second second second second			· · · · · · · · · · · · · · · · · · ·		
e.	Will searches/identification	er and the second s		No 🔄 Yes If yes, descr	ibe			
Alcoh	ercentage of Sales	Food 70						
AILON			70	Secondhand Merchandis	se	Precious Metals & Gems		
Enter	ainment%	Cigarettes	%	%		%		
Pawn	broker Activity%	Salvaged Materials	%	Personal Services (such a body piercing, salon, tail		Other%		
Tawn		(such as scrap metal)	10000	tanning, etc.)		Describe:		
	usinesses/Licenses	on the Premises	check a	all that apply):		1		
Type	1 Full Service Restaurant	Cafe/Coffee Shop	🔳 Deli or F	ast Food Restaurant	Private	/Fraternal/Veterans Club		
ı 🗌 ا	light Club	Tavern	Cocktail	Lounge	🗌 Teen Cl	lub		
	Banquet Hall	Sports Facility	Bowling	Alley		8		
🗆 י	lotel/Motel : Number of Flo	ors:	🗌 Roomin	g House: Number of Floo	ors:			
	'Number of Ro	oms:		Number of Roo	oms:			
Туре	2 .iquor Store	Corner Store	Superma	arket	Conven	ience Store		
	Sas Station	Amusement/Phonog	raph Distribut	or	🗌 Recyclin	ng, Salvage or Towing		
	Jsed Car Dealer	Personal Service Est (such as tattoo busin		n, tailor, etc.)	🗌 Recordi	ng Studio		
Wha	at other licenses/permits will y	you hold at this location? (	check all that			<i>x</i> .		
	Occupancy Permit	igarette & Tobacco 🔲 Ga	s Station 🔲	Extended Hours 🔳 Class "	B" Tavern	] Weights & Measures		
	Secondhand Dealer	Precious Metal & Gem	]Other:	2		τ.		
8.	egal Capacity (only	y if a Type 1 pren	nises in #	7 above)		,		
	LL C			1-286-8211 if you have que	estions.)			

Profinises Description         10       Identify all area[0] of the premises that will be used in operating this business (include areas used only for storage): Fir "floor D2" floor D2" floo	0 0								
Bit Notion       Describe       Describe       Describe       Describe         b.       Describe       Describ	9. Premises Description								
□ Other: Describe:       Image: String	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 □Boofton								
b.       Describe Location: Im Major Thoroughfare Image Secondary Street Image Other:         c.       Nearest Major Cross Street:       STIT STREET         d.       Describe Building:       Free Standing Building       Strip Mall       Other:         e.       Describe Building:       Free Standing Building       Strip Mall       Other:									
c. Nearest Major Cross Street: 3011 STREET d. Describe Building: IF Free Standing Building I strip Mall [ Other:									
e.       Describe Prentises Structure:       □ Single Story       Image: Multi-Story + of Stories       2       □ Other:         f.       Describe Surrounding Area:       Image: Commercial       Image: Story       Phone Number:       - 4/4 4/6 4/- 6/8 3/3         Building Owner Name:       TLoV       Phone Number:       - 4/4 4/6 4/- 6/8 3/3         Building Owner Address:         J. Hours of Operation & Customers         Will customers be entering the premises? I No IP Yes         Day of the Week       Proposed Hours of Operation:         Open Time (Include a.m. or p.m.)       Close Time (Include a.m. or p.m.)       Estimated Number of Customers       Open Time (Include a.m. or p.m.)         Sunday       12PM       8PM       50       21-70       NONE         Monday       CLOSED       CLOSED       0       21-70       NONE         Wednesday       11AM       9PM       50       21-70       NONE         Thursday       11AM       9PM       80       21-70       NONE         Saturday       11AM       9PM       80       21-70       NONE         Friday       11AM       10PM       80       21-70       NONE         An Extended Hours Estabilishment License is required for any	c. Nearest Majo	r Cross Street: 35TH ST	REET						
e.       Describe Prentises Structure:       □ Single Story       Image: Multi-Story-# of Stories       □ Other:         f.       Describe Surrounding Area:       Image: Commercial       Image: Story # of Stories       Phone Number:       4/17-1647-6833         Building Owner Name:       TLoV       Phone Number:       4/17-1647-6833         Building Owner Address:       S 12       Will customers       Proposed Hours of Operation:       Estimated Number of Customers       Age Range of Customers         Will customers be entering the premises?       No       Image: Proposed Hours of Operation:       Estimated Number of Customers       Age Range of Customers of Customers       Age Range of Customers of Cu	d. Describe Build	ling: 🔳 Free Standing Buildi	ng 🔲 Strip Mall 🔲 Other	ſŧ					
f.       Describe Surrounding Area: III Commercial III Residential I Industrial I Other:	e. Describe Prem	nises Structure: 🔲 Single Sto	ory 🔳 Multi-Story - # of Sto	ories 2 🗌 Other	:				
Building Owner Address: 3 5 12 W V: I and Avc         10. Hours of Operation & Customers         Will customers be entering the premises?       No Proposed Hours of Operation:       Estimated Number of Customers       Class B Tavern Applicant Only: Age Rearge of Customers of Customers of Customers of Customers of Customers of Customers       Class B Tavern Applicant Only: Age Rearge of Customers       Class B Tavern Applicant Only: Age Restriction (If none, write 'None')         Sunday       12PM       8PM       50       21-70       NONE         Monday       CLOSED       0       21-70       NONE         Wednesday       11AM       9PM       50       21-70       NONE         Wednesday       11AM       9PM       50       21-70       NONE         Thursday       11AM       9PM       80       21-70       NONE         Friday       11AM       10PM       80       21-70       NONE         Saturday       11AM       10PM       80       21-70       NONE         An Extended Hours Stablishment       Class Is : 8:00 am to 3:00 pm Sunday thru Saturday       200 am. and 5:00 a.m.       Acohd Scablishment (sch as tattoo, body pierong, salon, tailor, taning, etc.), recording studio or restaurant which is open between the hours of 12:00 a.m. and 5:00	f. Describe Surro	ounding Area: 🔳 Commerci	al 🔳 Residential 🗌 Indust	rial Other:					
10. Hours of Operation & Customers         Will customers be entering the premises? I No I Yes         Proposed Hours of Operation:       Proposed Hours of Operation:       Open Time (include a.m. or p.m.)       Close Time of Customers expected each day       Opential Age Rearge of Customers       Close B Tavern Applicant Only: Age Restriction (if none, write 'None')         Sunday       12PM       8PM       50       21-70       NONE         Monday       CLOSED       CLOSED       0       21-70       NONE         Wednesday       11AM       9PM       50       21-70       NONE         Wednesday       11AM       9PM       80       21-70       NONE         Friday       11AM       9PM       80       21-70       NONE         Saturday       11AM       9PM       80       21-70       NONE         Friday       11AM       10PM       80       21-70       NONE         An Extended Hours Establishment License is required for any convenience store, filling station, personal service establishment (such as tatioo, body plercing, salon, tallor, tanning, etc.), recording studio or restaurant which is open between the hours of 12:00 a.m. and 5:00 a.m.       3:00 a.m.         Alcohol Establishment B       Class B       8:00 am to 9:00 pm Sunday thru	g. Building Owne	er Name: <u>TLÖV</u>		Phone Number:	- 464-6	8.33			
Will customers be entering the premises?       In Proposed Hours of Operation:       Estimated Number of Customers of Operation:       Proposed Hours of Operation:       Class B Tavern Applicant Only: Age Reange of Customers of Customers         Day of the Week       Open Time (include a.m. or p.m.)       Close Time (include a.m. or p.m.)       Estimated Number of Customers       Potential Age Range of Customers       Applicant Only: Age Restriction (if none, write 'None')         Sunday       12PM       8PM       50       21-70       NONE         Monday       CLOSED       CLOSED       0       21-70       NONE         Wednesday       11AM       9PM       50       21-70       NONE         Wednesday       11AM       9PM       50       21-70       NONE         Thursday       11AM       9PM       80       21-70       NONE         Friday       11AM       9PM       80       21-70       NONE         Saturday       11AM       10PM       80       21-70       NONE         An Extended Hours Establishment License is required for any convenience store, filling station, personal service establishment (such as tattoo, body plercing, salon, tailor, tanning, etc.), recording studio or restaurant which is open between the hours of 21:00 a.m. and 5:00 a.m.       Establishments       Class B <th< td=""><td>Building Owne</td><td>er Address: <u>3512</u></td><td>N Villard AVC</td><td></td><td></td><td></td></th<>	Building Owne	er Address: <u>3512</u>	N Villard AVC						
Proposed Hours of Operation:         Estimated Number of Customers expected each day         Potential Age Range of Customers expected each day         Class B Tavern Applicant Only: Age Restriction (If none, write 'None')           Sunday         12PM         8PM         50         21-70         NONE           Monday         CLOSED         CLOSED         0         21-70         NONE           Tuesday         11AM         9PM         50         21-70         NONE           Wednesday         11AM         9PM         50         21-70         NONE           Wednesday         11AM         9PM         50         21-70         NONE           Thursday         11AM         9PM         50         21-70         NONE           Staturday         11AM         9PM         80         21-70         NONE           Friday         11AM         9PM         80         21-70         NONE           Staturday         11AM         10PM         80         21-70         NONE           Staturday         11AM         10PM         80         21-70         NONE           Staturday         11AM         10PM         80         21-70         NONE           Staturday         11AM <td< td=""><td>10. Hours of C</td><td><b>Operation &amp; Custo</b></td><td>mers</td><td></td><td></td><td></td></td<>	10. Hours of C	<b>Operation &amp; Custo</b>	mers						
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Day of the Week       Open Time (include a.m. or p.m.)       Close Time (include a.m. or p.m.)       of Customers expected each day       Age Range of Customers       Applicant Only: Age Restriction (if none, write 'None')         Sunday       12PM       8PM       50       21-70       NONE         Monday       CLOSED       CLOSED       0       21-70       NONE         Tuesday       11AM       9PM       50       21-70       NONE         Wednesday       11AM       9PM       50       21-70       NONE         Thursday       11AM       9PM       50       21-70       NONE         Friday       11AM       9PM       80       21-70       NONE         Thursday       11AM       9PM       80       21-70       NONE         Friday       11AM       10PM       80       21-70       NONE         Saturday       11AM       10PM       80       21-70       NONE         An Extended Hours Establishment License Is required for any convenience store, filling station, personal service establishment (such as tattoo, body percing, salon, tailor, taming, 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 2:00 am Sunday thru Staturday       6:00 am to 2:00		Proposed Hour	s of Operation:	Estimated Number	Potential	Class B Tavern			
(include a.m. or p.m.)       (include a.m. or p.m.)       (include a.m. or p.m.)       Customers       (if none, write 'None')         Sunday       12PM       8PM       50       21-70       NONE         Monday       CLOSED       CLOSED       0       21-70       NONE         Tuesday       11AM       9PM       50       21-70       NONE         Wednesday       11AM       9PM       50       21-70       NONE         Thursday       11AM       9PM       50       21-70       NONE         Friday       11AM       9PM       80       21-70       NONE         An Extended Hours Establishment License is required for any convenience store, filling station, personal service establishment (such as tattoo, body plercing, salon, tailor, taning, etc.), recording studio or restaurant which is open between the hours of 12:00 a.m. and 5:00 a.m.       and so0 a.m.         Alcohol Establishments       Class A:       8:00 ant to 9:00 pm Sunday thru Staurday       and relay a staurday: 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 of Sole Hopprietor, Partner, or 20% or more Shareholder the Chaefhurt       Signature of additional partner or 20% or more shareholder the Chaefhurt         Signature of Sole Hopprietor, Partner, or 20% or more shareholder the Chaefhurt       Signature of addi	Day of the Week	Onen Time			Construction and the second second second second	Applicant Only:			
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Wednesday       11AM       9PM       50       21-70       NONE         Thursday       11AM       9PM       50       21-70       NONE         Thursday       11AM       9PM       80       21-70       NONE         Friday       11AM       10PM       80       21-70       NONE         Saturday       11AM       10PM       80       21-70       NONE         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       Intervention of operation.         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.       Intervention.         11. Signature of Sole Proprietor, Partner, or 20% or more shareholders, Corporate of Sole Proprietor, Partner, or 20% or more shareholders, Corporate of Sole Proprietor, Partner, or 20% or more shareholders, Corporate of different name/title and sign)       Signature of additional partner or 20% or more shareholders, Corporate of the are pb 20% or more shareholders, Corporate of the are pb 20% or more	Monday	CLOSED	CLOSED	0	21-70				
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Corporate Øfficer-print name/title and sign)	Signature of Sole Prop	rietor, Partner, or 20% or mo	re Shareholder OFFICES	ignature of additional pa	rtner or 20% or n	nore shareholder			
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MILV	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: MOMS HOUSE, LLC
Prem	ise Address: 3510 W VILLARD AVE
Prox	imity of Premises to Church, School, Daycare Center or Hospital
ls the	e building within 300 feet of any church, school, daycare center or hospital? 🛛 🗹 No 🗌 Yes
"Ser	vice Bar Only" Designation
Serv	plying for Class B or C license, are you applying for "Service Bar Only"? I No Yes ice Bar Only means customers cannot sit at the bar. Alcohol is served to employees who serve patrons seated at tables. tools, chairs or other articles of furniture shall be placed at the service bar for patrons to sit upon.
Busi	ness Information
a)	Are you taking out this application for anyone that may not be eligible for a license? IV No Ves
b)	If yes, list their name and address:
c) d)	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. Does anyone else have money invested or any other interest in this business?   ✓ No  Yes If yes, explain: Have you made an agreement with anyone to repay any loan or any other payments based upon income from the business? ✓ No  Yes If yes, list name and address:
Prop	perty Information (New & Transfer Applicants Only)
a)	Do you own or lease the building?
b)	Who owns the fixtures (for example, coolers, etc.)? TLOV
c)	Are you purchasing the stock and/or fixtures?
d)	Total amount paid for business
e)	Total amount paid for goodwill of the business \$
	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? 🔲 No 🗹 Yes
Leas	se Information (New & Transfer Applicants who are leasing the premises only)
a)	Date lease begins 01/01/2023 Ends 01/01/2033
b)	Monthly rental \$2000
c) d)	Do you have an option to renew the lease? 🔲 No 🗹 Yes Does your lease allow for assignment to another party without the consent of the owner? 🗹 No 🗌 Yes
e)	For what length of time have you been guaranteed occupancy (number of years)? 30

	se Information (Continued)			
f}	In addition to paying the monthly rental, will you ha of the lease? 🗹 No 🗌 Yes If yes, explain	ve to pay anything additiona	I to the owner of the building to	guarantee performance
g)	Does the present owner or occupant object to the g	ranting of your license? 🛛 🗹	No 🔤 Yes	
	If yes, explain			
ČL-			"令法"之言,是"言言" 建绿矿生变的 网络人	1. S. C. Marriero, Phys. Cogr. C. 2010 (1996) 11
LNa	nge of Agent Applicants Only			
Hav	ve there been any changes to the floor plan since the	last application was submitt	ed?IV No TYes	
	o, a new floor plan is not required. If yes, submit a new			
		v noor plan and explain the t	mange(s).	
••••••••••••••••••••••••••••••••••••••				
	iature			
Signat	nature Brandalym Ch ture of Sole Proprietor, Partner or 20% of More Sharel	eather Officer		
Signat		eather Officer		

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.

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## New and transfer of premises applicants must submit the following:

Detailed floor plan

If a restaurant, copy of the menu

ccl-foodplan 2/28/19



## FOOD DEALER LICENSE PLAN OF OPERATION

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

## Legal Entity Name: MOMS HOUSE, LLC

## Premises Address: 3510 W VILLARD AVE MILWAUKEE, WI 53209

#### 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, fish, meat, positry, Scafood

			ccl-foodplan 2/28/19
SECTION	4 DETAILS OF OPERAT	ION	
Will you h	ave seating on site for dining?	No	Yes ·
Will you b	e doing any catering?	🗌 No	Yes
Will you b	e doing any delivery?	🗌 No	Ves
Will you h	ave outdoor activities?	🔳 No	Yes - Check all that apply: Bar Cooking/Grilling Dining
Will you h	ave a drive thru window?	🕅 No	Yes - Are hours different from inside?
			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			
Where wil	II food be prepared and/or sold?		
🔳 At a sii	ngle site 🛛 🗌 At multiple site	es: How r	many?(for example, a hotel with several dining rooms or bars)
If multiple	sites, attach a Food Dealer Addi	tional Site	e Addendum (ccl-foodadd) for each additional site.
SECTION	6 CONSTRUCTION OR	CHANGE	ES
Are you pl	lanning any construction, remode	eling or ea	quipment changes?
No	If No, SKIP to Section 8		
 Yes	If Yes, check all that apply:	□ New	v construction of a building Renovation or remodeling
			struction changes to existing building Equipment changes only
Provide a	brief description of the changes:		
Start date			
	dress & Phone Number of Archit		
Name, Ad	diess of hone Number of Archic		
Mana Ad	duces 9 Phone Number of Contra		
Name, Au	dress & Phone Number of Contra	actor:	
SECTION	7 ALCOHOL BEVERAG	ES	
electrope wip	pplying for an alcohol beverage li		
No	If No, SKIP to Section 8		
Yes		approved	prior to the alcohol license, when do you want the food license issued?
	📕 Immediately 🗌 At the		
SECTION	8 ACKNOWLEDGEMEN	NTS & SIG	GNATURE
Vou must	initial each item confirming your	understa	andin <i>a</i> :
BCC			
	I understand the Health Depart before the license may be issue		st conduct an inspection and advise the License Division of their approval
BCC	I understand I must obtain an o	ccupancy	permit from the Department of Neighborhood Services and an inspection
	may be required. Neighborhoo be issued.	d Service	s must advise the License Division of their approval before the license may
BCC	I understand the district alderp		I review and either support or object to my application. If he/she objects, I
			before the Licenses Committee. The Licenses Committee will then make a il. The Common Council must grant the license before it may be issued.
BCC	I understand proof of payment	for all lice	ense fees must be on file in the License Division before the license may be
BCC			nd posted in my establishment prior to opening for business. the license has been issued and posted in the establishment.
<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>			(1)
Signature	of Sole Proprietor, Partner, or 20	0% Shareh	holder:
Signature	of Additional Partner:		/

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## PUBLIC ENTERTAINMENT PREMISES LICENSE SUPPLEMENTAL APPLICATION

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> e-mail address: <u>license@milwaukee.gov</u>

PREMISES ADDRESS: 3510	W Villard Ave	Milwauker, WI 53	209					
TYPES OF ENTERTAINMENT (CHECK ALL THAT APPLY)								
Instrumental Musicians	Battle of the Bands	Dancing by Performers	Amusement Machines					
Bands	Comedy Acts	Adult Entertainment/ Strippers/Erotic Dance	Concerts Approx. # per year?					
Bowling Alley How many?	נע ז'usc Jockey	Wresting	Theatrical Performances Approx. # per year?					
Pool Tables How many?	Magic Shows	Patron Contests	Jukebox					
Motion Pictures (movies by admission) - How many?	C roetry Readings	Patrons Dancing	i Karaoke					
Other:	· · · · · · · · · · · · · · · · · · ·							
Entertainment Outdoor Closing Hours:	10:00pm Sunday-Thursday; 12:00am F Is established by the Common Council	riday & Saturday; unless a different time, o in its approval of the licensee's plan of ope	either earlier or later, ration.					
PROMOTERS/SOUND AMPLIFIC	ATION							
Will promoters ever be used for any of t	he entertainment? 🗹 No 🗌 Yes	s If Yes, Describe:						
At any time will sound amplification be u	used? 🗹 No 🗌 Yes 🛛 If Yes, Descr	ibe:	-					
LEGAL CAPACITY OF PREMISES								
Premises License. If you would like to re	quest the license be approved wit	ions.) Legal capacity determines the f h a lower capacity than that listed abc license and override the capacity liste	ove, indicate the lower capacity					
ACKNOWLEDGEMENT/SIGNATU								
ACKNOWLEDGENIEN //SIGNATORE         I understand that after the license has been issued, a change to the plan of operation will require a written request to change and approval from the Common Council. I agree to inform the City Clerk within 10 days of any substantial changes in the information supplied in this application. I understand that I 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 have knowledge of the City Ordinances currently regulating public entertainment, and understand that the license may be subject to suspension, non-renewal or revocation, if I violate any rule, law or regulation of the city of Milwaukee and State of Wisconsin.         Signature of sole Proprietor, Partner or 20% or More Shareholder         (If no 20% or more Shareholder, Corporate Officer - print name/title and sign)								
Office Use Only: Initials: Filed:	App :							

Only PEP? No Yes If Yes, Queue to MPD and Email Mgrs/Team Lead (must be heard w/in 60 days)

+S yt SE  $\bigwedge$ N = Grame/Amuschient machines Low Store moor At 12 ch Direch Fod Storage 21' floor ~ Villard Ave Pool Storage Alcohol D Storage 10'x10' J 11 Fool Prep Secondart Streh Znd Kitchen Beck Alcoholic Benercy Ford Tony S' BBQ Page 1 125 k 15-5-4 34100101 210V Ser H Otrash Mon Printer of Aravets Pool dan Mons House Ilc Spandylon Cheatham Agent 50 Prash 2628 59/44 3506-3510 W Villerd Ave Milwaukee WF 53209 Prep Pool itz Food display O in 1-2-2022 pddo-Beck Table TNorth aburats Po of 2/901 ٨ ~1

+5 15 EN store H.H. 111 Star Food Page 2 Kasement 21 ALENEL 10×15 w villard Ave Tonys RISCU g Food Storage P. North P. North 2628 Sq/Ft 2506-3510 W Villerd Ave 5506-3510 W Villerd Ave diluculee WI 53209 diluculee WI 53209 Alonis House 11c Monis House 11c 17 1111111 ,917

## (GKLEL) BEAMS RED GIOP

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TERRUE REMARCATEREN

# W VEILERCE AVE Keet WI 53209 64-6833 414-462-2239

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