



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

Thursday, June 15, 2023

**COMMITTEE MEETING NOTICE**


AD 13

VANG, Touly, Agent  
RED SUN LLC  
4350 S 27TH St  
Milwaukee, WI 53221

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, June 27, 2023 at 01:55 PM**

The access code is <https://meet.goto.com/459516781>. If you wish to call in: **+1 (646) 749-3122** and use Access Code: **459-516-781**. Please see the enclosed best practices document for further instructions.

**Regarding:** Your Class B Tavern, Public Entertainment Premises and Food Dealer License Applications Requesting Instrumental Musicians, Disc Jockey, Karaoke, 6 Concerts/yr and Comedy Acts as agent for "RED SUN LLC" for "Red Sun Cafe"  4350 S 27TH St.

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 during normal business hours is available at reduced rates (5 hour limit) at the Milwaukee Center on the southwest corner of Kilbourn Avenue and Water Street. You must present a copy of the meeting notice to the parking cashier.

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](mailto:License@milwaukee.gov)





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

Thursday, June 15, 2023

**COMMITTEE MEETING NOTICE**

AD 13

VANG, Touly, Agent  
RED SUN LLC  
3636 W BARNARD AV  
Greenfield, WI 53221

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Date: 5-12-2023  
Officer: Michael Ward

City of Milwaukee Police Department  
90-5-1.5 Crime Prevention Survey  
Tavern Inspection

Name of Premise: Red Sun Cafe  
Address: 4350 S. 27<sup>th</sup> St.  
Phone:

Owner: Vang Touly  
Owner address: 3636 W. Barnard Ave  
City State Zip: Greenfield WI 53221  
Owner Phone: 414-526-4799  
Owner email: vangtouly@hotmail.com

Licensee/Agent: **Same**  
Home Address:  
City State Zip:  
Phone:  
Email:

Preferred contact:

Location currently open: ☐ YES ☒ NO

Projected open date:

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

Hours of Operation: Sun: 11am-11pm ☐24 hours ☐Y ☐N  
Mon: 11am-11pm  
Tue: 11am-11pm  
Wed: 11am to 11pm  
Thu: 11am-1am  
Fri: 11am-1am  
Sat: 11am -1am

Premise Type: ☐Tavern/Bar  
☒Restaurant  
☐Other:

Licenses currently held:

Alcohol: ☐ Yes ☐ No Class: #:  
Tobacco: ☐ Yes ☐ No #:   
Food: ☐ Yes ☐ No #:   
Extended Hours: ☐ Yes ☐ No #:   
Secondhand Dealer: ☐ Yes ☐ No Type: #:  
Other: ☐ Yes ☐ No Type: #:  
Other: ☐ Yes ☐ No Type: #:

**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. Off-Street parking ☒ Yes ☐ No
9. Is the parking lot well lit? ☒ Yes ☐ No
10. Valet Parking ☐ Yes ☒ No
  - a. Will this lot have a guard? ☐ Yes ☒ No
  - b. Will this lot have cameras? ☐ Yes ☒ No
11. Are there areas where a person could conceal themselves ☐ Yes ☒ No
12. Is there exterior lighting? ☒ Yes ☐ No. Does it appears to be adequate ☒ Yes ☐ No
13. Exterior Payphone? ☐ Yes ☒ No
14. Are there No Loitering Signs posted? ☐ Yes ☒ No **Discussion had regarding.**
15. Are there exterior security cameras ☐ Yes ☒ No How Many:
16. Are the address numbers prominently displayed and easy to see ☒ Yes ☐ No

**Camera Survey:**

17. Does this location have security cameras? ☒ Yes ☐ No
18. Are they in working order? ☒ Yes ☐ No
19. What format are the cameras?
  - a. Color ☒ Yes ☐ No
  - b. Digital ☒ Yes ☐ No
  - c. Recorded ☒ Yes ☐ No
20. How long is footage stored for later viewing: **1 Week**
21. Are there exterior cameras ☐ Yes ☒ No How many:
22. Are there interior cameras ☒ Yes ☐ No How many: **8**

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

**Owner/managers**

24. Cameras located in parking lot ☐Yes ☒No How many

**Interior Survey:**

25. What is the planned capacity 70

26. What is the minimum number of employees That will be on premise 2

27. Is the storeowner willing to be a standing complainant regarding loitering? ☐Yes ☒No

**Discussion had regarding.**

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

29. Does an interior camera face the entrance/exit? ☒Yes ☐No

30. Is there a lockable area that separates employees from customers? ☐Yes ☒No – **Will be adding**

31. Are emergency and non-emergency numbers posted near the phone? ☒Yes ☐No

32. 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

**Security**

33. How many security personnel are going to be employed: **No Security**

34. How will 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:**

Recommended fixing the deadbolt on the rear door. Recommended having the address located on the west side of the building for better view for s. 27<sup>th</sup> St..

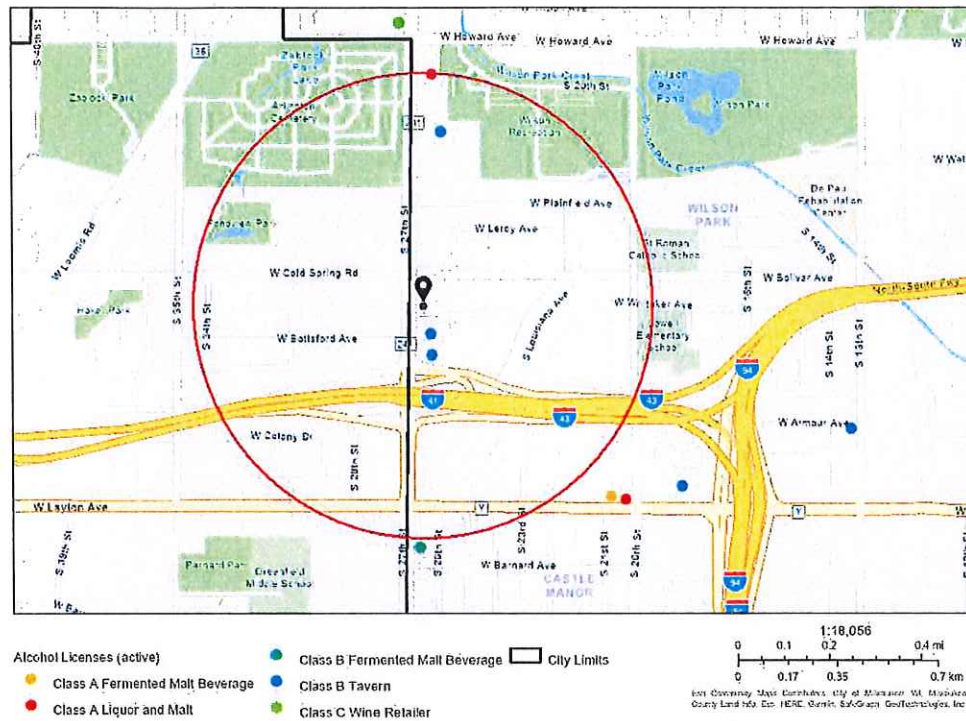


# City Concentration Map 4350 S 27TH ST

## Area of Interest (AOI) Information

Area : 21,862,585.68 ft<sup>2</sup>

Apr 20 2023 12:02:01 Central Daylight Time





4350 S 27TH ST

## Summary

Name	Count	Area(ft²)	Length(mi)
Alcohol Licenses	4		

## Alcohol Licenses

#	Legal Entity	Trade Name	Licensee	Address	License Type Name	Total Capacity	Expiration Date	Count
1	SIDHIVINAYA K, LLC	RODEWAY INN & SUITES	Arpit K Patel, Agt	4400 S 27TH ST	Class B Tavern License		7/26/2023, 7:00 PM	1
2	SIDHIVINAYA K, LLC	QUALITY SUITES	Arpit K Patel, Agt	4488 S 27TH ST	Class B Tavern License		9/20/2023, 7:00 PM	1
3	MM PLAZA, LLC	Monterrey Market Plaza	Robert Montemayor, Agt	3920 S 27TH ST	Class A Malt & Class A Liquor License		10/31/2023, 7:00 PM	1
4	Bowlero Wisconsin, LLC	JB's on 41	Franziska Buchholz, Agt	4040 S 27TH ST	Class B Tavern License	576	10/9/2023, 7:00 PM	1

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



Thursday, June 15, 2023



# Notice of Public Hearing

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VANG, Touly, Agent

Red Sun Cafe at 4350 S 27TH St

Class B Tavern, Public Entertainment Premises and Food Dealer License Applications Requesting  
Instrumental Musicians, Disc Jockey, Karaoke, 6 Concerts/yr and Comedy Acts

**Tuesday, June 27, 2023 at 1:55 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 6/27/2023 at 1:55 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](mailto: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.

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## **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	2431 W WHITAKER AVE	MILWAUKEE, WI 53221-2259
CURRENT OCCUPANT	2432 W WHITAKER AVE	MILWAUKEE, WI 53221-2260
CURRENT OCCUPANT	2437 W BOLIVAR AVE	MILWAUKEE, WI 53221-2253
CURRENT OCCUPANT	2439 W WHITAKER AVE	MILWAUKEE, WI 53221-2259
CURRENT OCCUPANT	2440 W WHITAKER AVE	MILWAUKEE, WI 53221-2260
CURRENT OCCUPANT	2503 W BOLIVAR AVE	MILWAUKEE, WI 53221-2255
CURRENT OCCUPANT	2506 W WHITAKER AVE	MILWAUKEE, WI 53221-2262
CURRENT OCCUPANT	2507 W WHITAKER AVE	MILWAUKEE, WI 53221-2261
CURRENT OCCUPANT	2509 W BOLIVAR AVE	MILWAUKEE, WI 53221-2255
CURRENT OCCUPANT	2512 W BOLIVAR AVE	MILWAUKEE, WI 53221-2256
CURRENT OCCUPANT	2514 W BOLIVAR AVE	MILWAUKEE, WI 53221-2256
CURRENT OCCUPANT	2514 W WHITAKER AVE	MILWAUKEE, WI 53221-2262
CURRENT OCCUPANT	2515 W BOLIVAR AVE	MILWAUKEE, WI 53221-2255
CURRENT OCCUPANT	2515 W WHITAKER AVE	MILWAUKEE, WI 53221-2261
CURRENT OCCUPANT	2520 W WHITAKER AVE	MILWAUKEE, WI 53221-2262
CURRENT OCCUPANT	2523 W BOLIVAR AVE	MILWAUKEE, WI 53221-2255
CURRENT OCCUPANT	2526 W BOLIVAR AVE	MILWAUKEE, WI 53221-2291
CURRENT OCCUPANT	2526A W BOLIVAR AVE	MILWAUKEE, WI 53221-2291
CURRENT OCCUPANT	2529 W BOLIVAR AVE	MILWAUKEE, WI 53221-2255
CURRENT OCCUPANT	2532 W BOLIVAR AVE	MILWAUKEE, WI 53221-2291
CURRENT OCCUPANT	2534 W BOLIVAR AVE	MILWAUKEE, WI 53221-2291
CURRENT OCCUPANT	2537 W BOLIVAR AVE	MILWAUKEE, WI 53221-2255
CURRENT OCCUPANT	2538 W BOLIVAR AVE	MILWAUKEE, WI 53221-2291
CURRENT OCCUPANT	2538A W BOLIVAR AVE	MILWAUKEE, WI 53221-2291
CURRENT OCCUPANT	2600 W BOLIVAR AVE	MILWAUKEE, WI 53221-2292
CURRENT OCCUPANT	2600 W WHITAKER AVE	MILWAUKEE, WI 53221-2264
CURRENT OCCUPANT	2601 W WHITAKER AVE	MILWAUKEE, WI 53221-2263
CURRENT OCCUPANT	2602 W BOLIVAR AVE	MILWAUKEE, WI 53221-2292
CURRENT OCCUPANT	2610 W WHITAKER AVE	MILWAUKEE, WI 53221-2264
CURRENT OCCUPANT	2610A W WHITAKER AVE	MILWAUKEE, WI 53221-2264
CURRENT OCCUPANT	2615 W WHITAKER AVE	MILWAUKEE, WI 53221-2263
CURRENT OCCUPANT	4273 S 26TH ST# 1	MILWAUKEE, WI 53221-2245
CURRENT OCCUPANT	4273 S 26TH ST# 2	MILWAUKEE, WI 53221-2245
CURRENT OCCUPANT	4273 S 26TH ST# 3	MILWAUKEE, WI 53221-2245
CURRENT OCCUPANT	4273 S 26TH ST# 4	MILWAUKEE, WI 53221-2245
CURRENT OCCUPANT	4273 S 26TH ST# 5	MILWAUKEE, WI 53221-2245
CURRENT OCCUPANT	4273 S 26TH ST# 6	MILWAUKEE, WI 53221-2245
CURRENT OCCUPANT	4273 S 26TH ST# 7	MILWAUKEE, WI 53221-2245
CURRENT OCCUPANT	4273 S 26TH ST# 8	MILWAUKEE, WI 53221-2245

Blank Notice

Total Records: 39

Radius 500.0 feet and Center of the Circle: 4350 S 27th St



## BUSINESS LICENSE PLAN OF OPERATION

ccl-busplan 5/12/2020

Office of the City Clerk License Division

200 E. Wells St. Room 105, Milwaukee, WI 53202

(414) 286-2238 www.milwaukee.gov/license e-mail address: [license@milwaukee.gov](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)

Provide a detailed description of the type of business you plan on operating:

Mid-size cafe that will offer food, drinks, and hookah for dine-in guests.

Do you have any experience operating this type of business? ☐ No ☒ Yes If yes, explain: Sushi restaurant / Kwik Trip

### 2. Business Operations

- a. Proposed Opening Date: 07/01/2023
- 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: \_\_\_\_\_
- 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: Smokies - tobacco products retailer

### 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: Indoor speakers for music

### 4. Smoking & Sanitation

- a. Are there designated outdoor smoking areas? ☒ No ☐ Yes If yes, describe: \_\_\_\_\_
- b. Number of Garbage Cans: Inside: 5 Locations: Kitchen, bar, front desk, storage rooms / r2  
Outside: 1 Locations: Outside - east side of building
- c. Is a crowd control barrier used? ☒ No ☐ Yes If yes, describe: \_\_\_\_\_
- d. How many restrooms are on the premises? 2 (1 male / 1 female)
- e. Name of solid waste contractor: ☐ Advanced Disposal ☐ Waste Management ☒ Other: TBD

## 5. Security

- a. Are there onsite parking spaces? ☐ No ☒ Yes If yes, how many? 8 and describe the parking security plan: security cameras (at least one to monitor lot at all times)
- 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 security cameras  
List their licensing, certification, or training credentials \_\_\_\_\_
- d. Will there be security cameras? ☐ No ☒ Yes If yes, how many? 8 and list locations: parking lot, hallway, front desk, dining area, bar, kitchen, backdoor,
- e. Will searches/identification checks be done upon entry? ☐ No ☒ Yes If yes, describe after 10pm

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

Alcohol <u>35</u> %	Food <u>50</u> %	Secondhand Merchandise _____ %	Precious Metals & Gems _____ %
Entertainment _____ %	Cigarettes _____ %		
Pawnbroker Activity _____ %	Salvaged Materials _____ % (such as scrap metal)	Personal Services (such as tattoo, body piercing, salon, tailor, tanning, etc.) _____ %	Other <u>15</u> % Describe: <u>general merchandise</u>

## 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: \_\_\_\_\_ Number of Rooms: \_\_\_\_\_  
☐ Rooming House: Number of Floors: \_\_\_\_\_ 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: Public Entertainment

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

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: 27<sup>th</sup> / Layton Ave or 27<sup>th</sup> / Bolivar Ave
- d. Describe Building: ☒ Free Standing Building ☐ Strip Mall ☐ Other: \_\_\_\_\_
- e. Describe Premises Structure: ☒ Single Story ☐ Multi-Story - # of Stories \_\_\_\_\_ ☐ Other: \_\_\_\_\_
- f. Describe Surrounding Area: ☒ Commercial ☐ Residential ☐ Industrial ☐ Other: \_\_\_\_\_
- g. Building Owner Name: Touly Vang Phone Number: 414 526 4799  
 Building Owner Address: 3636 W Barnard Ave, Greenfield, WI, 53221

## 10. Hours of Operation & Customers

Will customers be entering the premises? ☐ No ☒ Yes

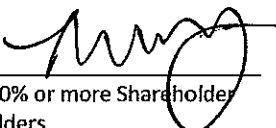
Day of the Week	Proposed Hours of Operation:		Estimated Number of Customers expected each day	Potential Age Range of Customers	Class B Tavern Applicant Only: Age Restriction (If none, write 'None')
	Open Time (include a.m. or p.m.)	Close Time (include a.m. or p.m.)			
Sunday	11:00 AM	11:00 PM	30	21-35	None
Monday	11:00 AM	11:00 PM	30	↓	↓
Tuesday	11:00 AM	11:00 PM	30		
Wednesday	11:00 AM	11:00 PM	30		
Thursday	11:00 AM	1:00 AM	50		
Friday	11:00 AM	1:00 AM	50		
Saturday	11:00 AM	1:00 AM	50		

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 Permitted Hours of Operation: Class A: 8:00 am to 9:00 pm Sunday thru Saturday  
 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)

Touly Vang / Owner   
 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: <u>Red Sun LLC</u>	
Premise Address: <u>4350 S 27th Street, Milwaukee, WI, 53221</u>	
<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: _____	
<input checked="" type="checkbox"/> d) Have you made an agreement with anyone to repay any loan or any other payments based upon income from the business? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If yes, list name and address: <u>Business loan - 700/month - to open this business</u>	
<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>Teddy Vang</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 \$ _____	
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? <input type="checkbox"/> No <input type="checkbox"/> Yes	
<b>Lease Information (New &amp; Transfer Applicants who are leasing the premises only)</b>	
a) Date lease begins <u>4/1/2023</u> Ends <u>4/1/2025</u>	
b) Monthly rental \$ <u>3000</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>2</u>	

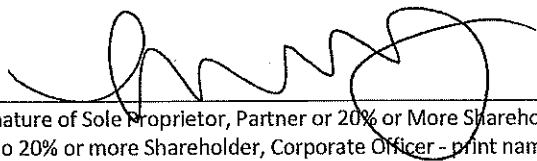
### Lease Information (Continued)

- 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 occupant 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**

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:

Red Sun LLC

Premises Address:

4350 S. 27<sup>th</sup> street, Milwaukee, WI, 53221**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: milk, cheese, deli meat, pizza, vegetables, fruit

**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:

Purchase and install prep table + beverage cooler

Start date: \_\_\_\_\_

Name, Address &amp; Phone Number of Architect: \_\_\_\_\_

Name, Address &amp; Phone Number of Contractor: \_\_\_\_\_

**SECTION 7 ALCOHOL BEVERAGES**

Are you applying for an alcohol beverage license?

- ☐ No If No, SKIP to Section 9
- ☒ 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:

SN

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

SN

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.

SN

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.

SN

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.

SN

I will not operate my food business until the license has been issued and posted in the establishment.

Signature of Sole Proprietor, Partner, or 20% Shareholder: \_\_\_\_\_

Signature of Additional Partner: \_\_\_\_\_





# 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 [www.milwaukee.gov/license](http://www.milwaukee.gov/license) e-mail address: [license@milwaukee.gov](mailto:license@milwaukee.gov)

**PREMISES ADDRESS:** 4350 S 27<sup>th</sup> Street, Milwaukee, WI, 53221

## TYPES OF ENTERTAINMENT (CHECK ALL THAT APPLY)

- |   |   |   |   |
|---|---|---|---|
| <input checked="" type="checkbox"/> Instrumental Musicians                          | <input type="checkbox"/> Battle of the Bands    | <input type="checkbox"/> Dancing by Performers                          | <input type="checkbox"/> Amusement Machines<br>How many? _____                |
| <input type="checkbox"/> Bands  | <input checked="" type="checkbox"/> Comedy Acts | <input type="checkbox"/> Adult Entertainment/<br>Strippers/Erotic Dance | <input checked="" type="checkbox"/> Concerts<br>Approx. # per year? <u>6</u>  |
| <input type="checkbox"/> Bowling Alley<br>How many? _____                           | <input checked="" type="checkbox"/> Disc Jockey | <input type="checkbox"/> Wrestling                                      | <input type="checkbox"/> Theatrical Performances<br>Approx. # per year? _____ |
| <input type="checkbox"/> Pool Tables<br>How many? _____                             | <input type="checkbox"/> Magic Shows            | <input type="checkbox"/> Patron Contests                                | <input type="checkbox"/> Jukebox  |
| <input type="checkbox"/> Motion Pictures (movies by<br>admission) - How many? _____ | <input type="checkbox"/> Poetry Readings        | <input type="checkbox"/> Patrons Dancing                                | <input checked="" type="checkbox"/> Karaoke                                   |
| <input type="checkbox"/> Other: _____   |   |   |   |

Entertainment Outdoor Closing Hours: 10:00pm Sunday-Thursdays; 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.

## PROMOTERS/SOUND AMPLIFICATION

Will promoters ever be used for any of the entertainment? ☒ No ☐ Yes If Yes, Describe:

At any time will sound amplification be used? ☐ No ☒ Yes If Yes, Describe: Indoor speakers

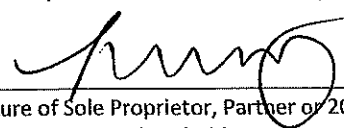
## LEGAL CAPACITY OF PREMISES

(Call the Development Center at 414-286-8211 with questions.) Legal capacity determines the fee for your Public Entertainment Premises License. If you would like to request the license be approved with a lower capacity than that listed above, indicate the lower capacity here: 75. If approved, this lower capacity will print on your license and override the capacity listed on your Occupancy Permit.

## ACKNOWLEDGEMENT/SIGNATURE

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.

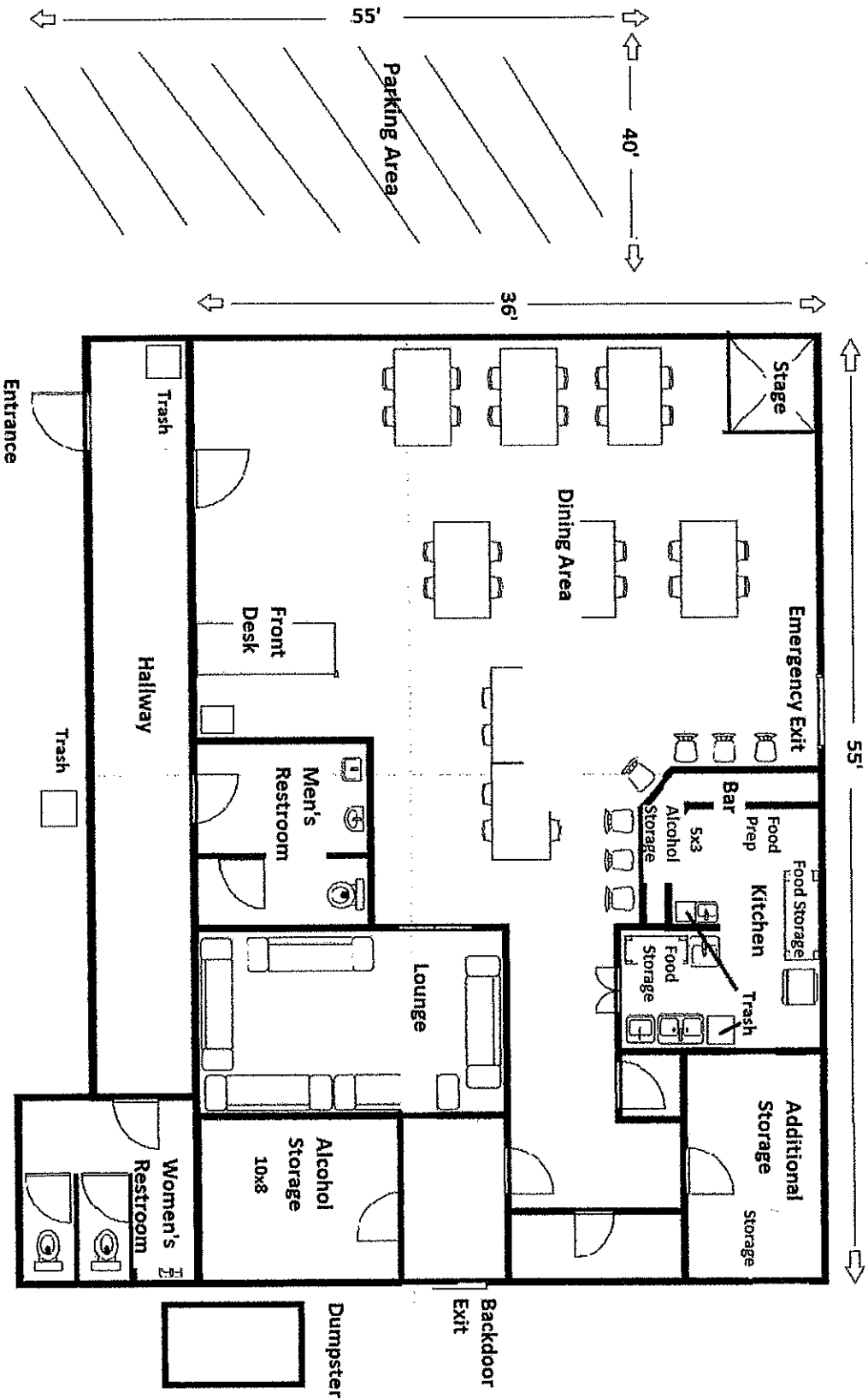
 Touly Vang  
Signature of Sole Proprietor, Partner or 20% or More Shareholder  
(If no 20% or more Shareholder, Corporate Officer - print name/title and sign)

## Office Use Only:

Initials: CE Filed: 4/20/2023 App: PEP350831

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

South 27th Street



Touly Vang - Agent for Red Sun LLC  
"Red Sun Cafe"  
4350 S 27th Street, Milwaukee, WI, 53221  
Date: 4/20/2023

**Total Square  
Footage =  
2,400'**

## APPS

## starters

## EGG ROLLS

**fries**

4.5

fresh cut potatoes  
add cheese +1, add bacon +2**sweet potato fries**

5.5

fresh cut sweet potato

**tate-or-tots**

4.5

deep fried tater tots  
add cheese +1, add bacon +2**the rings**

5.5

deep fried onion rings

**hmong style (3)**

8

pork, vermicelli, cabbage, carrots, green  
onions, cilantro**zaaa roll (3)**

8.5

salami, pepperoni, pasta sauce, fried in  
wonton wrap**burger rolls (3)**

8.5

beef, cabbage, onion, cheddar cheese,  
fried in wonton wrap**veggie (3)**

6

vermicelli, cabbage, carrots, green  
onions, cilantro

## crepes

## SWEET

## SAVORY

**strawbana**

9.5

strawberry, banana, chocolate, with  
whipped cream**berry me up**

10

blueberry, raspberry, strawberry sauce  
with whipped cream**all the butt-**

10

banana, peanut butter, nutella, wafer

**gimme some more**

10.5

toasted marshmallow, wafer, chocolate

**hot hammie**

9.5

ham, cheddar cheese, provolone cheese

**spicy italian**

11

salami, pepperoni, spinach, pepperjack  
cheese**veggie**

9

Spinach, green pepper, and choice of  
cheese: provolone or pepper jack**philly philly**

11.5

philly steak, green peppers, provolone  
cheese

all wraps and sandwiches come with fries

## wraps

### philly wrap

14

philly steak, green peppers, provolone cheese

### grilled chicken

13

grilled chicken, lettuce, house sauce

### buffalo chicken

14

buffalo chicken, jalapeno, lettuce, blue cheese and ranch

### B.L.T.

12

bacon, lettuce, tomatoes, house sauce

## sandwiches

### classic burger

11

1/4 lb burger, lettuce, tomatoes, onion, pickles, choice of cheese

### EXO chicken

14

fried chicken tender, jalapeno, lettuce, onion, tomato, special house sauce

### EXO burger

14

1/4 burger, bacon, onion ring, lettuce, onions, special house sauce, choice of cheese

### B.L.T.

12

bacon, lettuce, tomatoes, house sauce

## drinks

### soda

2.5

coke, sprite, dr. pepper

### coffee

4

house blend

### lemonade

2.5

### tea

3

green tea, black tea, berry tea



# hookah

## choose your size

<b>mini</b>	<b>15</b>	<b>social</b>	<b>20</b>	<b>party</b>	<b>28</b>
1 person 1 hose		2-4 people up to 2 hose		4+ people up to 4 hose	

## choose your flavor

### mix up to 3

apple  
blue berry  
bubblegum  
cherry  
coconut  
fresh  
grape  
grapefruit  
guava  
kiwi  
mango  
melon  
mint  
orange  
peach  
strawberry  
vanilla  
watermelon

**green dragon** 5

mint, passionfruit, cool menthol+

**fruit blast** 5

strawberry, peach, fierce fruit+

**vanilla ice** 5

vanilla, ivory gold+

**oh tang!** 5

orange, mint, amber rise+

### add ons

---

**add ice hose** 5

**refill** 10

change your flavor

---

# alcohol

## domestic

bud light  
miller light  
coors light

4

## XO'd fashioned

9

brandy or whiskey

## tequila sunrise

8.5

tequila, orange juice, grenadine

## mojito

9.5

rum, mint, lime

## premium beer

5

michelo ultra  
stella artois  
spotted cow  
corona extra  
modelo

## tropic blast

9.5

tequila, rum, pineapple juice, apple juice

## XO long island

9

rum, tequila, ice-tea, lemon

## pickle shot

4

## seltzers

5

white claw  
truly  
press  
vizzy

vodka, house mix pickle juice

## XO LOUNGE

4350 S 27th st  
milwaukee, wi 53221  
(414)123-4567

## SOCIAL MEDIA

instagram.com/xoloungemke  
facebook.com/xoloungemke

tag us on social media to get 10% off your order