

## CITY OF MILWAUKEE OFFICE OF THE CITY CLERK

Tuesday, February 20, 2024

#### COMMITTEE MEETING NOTICE

**AD 11** 

MIRANDA, Carlos, Agent Miranda Bar LLC 2758 S 35TH St Milwaukee, WI 53215

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 05, 2024 at 02:10 PM

The access code is <a href="https://meet.goto.com/453468061">https://meet.goto.com/453468061</a>. If you wish to call in: <a href="https://meet.goto.com/453468061">+1 (571) 317-3122</a> and use Access Code: 453-468-061

Please see the enclosed best practices document for further instructions.

Regarding:

Your Class B Tavern, Public Entertainment Premises and Food Dealer License Applications Requesting Disc Jockey, Karaoke and Patrons Dancing as agent for "Miranda Bar LLC" for "Dario's Place" at 2758 S 35TH 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.



## CITY OF MILWAUKEE OFFICE OF THE CITY CLERK

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JIM OWCZARSKI, CITY CLERK

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Jim Cooney License Division Manager

If you have questions regarding this notice, please contact the License Division at (414) 286-2238.

Date: 01/23/2024 Officer: POF Garcia

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

| Name of Premise: Dar<br>Address: 2758 S. 35 <sup>th</sup><br>Phone: 414-881-5852                                  |   |          |             |                   |     |
|---|---|----------|-------------|-------------------|-----|
| Owner:<br>Owner address:<br>City State Zip:<br>Owner Phone:<br>Owner email:                                       |   |          |             |                   |     |
| Licensee/Agent: Carlo<br>Home Address: 4701<br>City State Zip:Greenf<br>Phone: 414-881-5852<br>Email: 414miranda@ | W. Loomis Rd<br>ield, WI 53220  |          |             |                   |     |
| Preferred contact: pho  | one   |          |             |                   |     |
| Location currently op   | en:   | YES      | $\boxtimes$ | NO                |     |
| Projected open date:  | Early March if  | possible |             |                   |     |
| Day's open: S I   | MMTMM   | Th 🛛 F   | SA⊠         | ☐ALL .            |     |
| Hours of Operation:   | Sun: 5p-2a<br>Mon: closed<br>Tue: 5p-2a<br>Wed: 5p-2a<br>Thu: 5p-2a<br>Fri: 5p-2:30a<br>Sat: 5p-2:30a |          |             | □24 hours □ Y ⊠ N | ± 2 |
| Premise Type:   | ⊠Tavern/Bar<br>□Restaurant<br>□Other:   |          |             |                   |     |
| Licenses currently he Alcohol:  | eld:<br>□Ye   | s□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                       | e location clean? 🛛 Yes 🗌 No   |
|   | ocation? (Check all the apply)   |
| a. 🔀 Park                                       |  |
| b. School                                       |  |
| c. Youth Cer                                    | ter  |
| d. LChurch                                      |  |
|   | If so, how many  |
| f. Residentia                                   |  |
| g. 💆 Other busi                                 | nesses   |
| h. Other:                                       | <b>7</b>   |
| 3. Can you see from the                         | e outside of the location into the interior Yes No                             |
| 4. Can you see the emp                          | loyees inside of the location from the outside Yes \( \subsetence \text{No} \) |
| 5. Are exterior window                          | rs free of signage Yes No  |
| 6. Is there a parking lot                       |  |
| 7. Is the parking lot cle                       |  |
| 8. Off-Street parking ∑                         |  |
| 9. Is the parking lot we                        |  |
| 10. Valet Parking ☐ Ye                          |  |
| a. Will this lot                                | have a guard? Yes No   |
|   | have cameras? X Yes \( \sum \) No  |
| 11. Are there areas when                        | re a person could conceal themselves Yes No                                    |
|   | ting? Yes No. Does it appears to be adequate Yes No                            |
| 13. Exterior Payphone?                          | Yes No   |
| 14. Are there No Lotter                         | ng Signs posted? Yes No Will add   |
| 15. Are there exterior se                       | curity cameras Yes No How Many: Will add                                       |
| 16. Are the address num                         | abers prominently displayed and easy to see ⊠Yes ☐ No                          |
| Garage Survey Will add                          |  |
| Camera Survey: Will add                         | ave security cameras? ☐ Yes ☒ No   |
| 17. Does this location if                       | ave security carriers? The   |
| 18. Are they in working 19. What format are the |  |
| ~ 1   | □Yes □No   |
|   | Yes No   |
| b. Digital<br>c. Recorded                       | Tyes TNo   |
|   | e stored for later viewing:  |
| 21. Are there exterior ca                       |  |
| 22. Are there interior ca                       |  |
| 23 Do all employees let                         | now how to retrieve recorded digital images/footage? Yes No                    |
| 24. Cameras located in                          |  |
| 21 Californi to acoust Hi                       | K  |

**Interior Survey:** 

| 25. What is the planned capacity? Unknown at this time   |
|--|
| 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?   ☐ Yes ☐ 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 Under renovation  |
|  |
|  |
| 30. Is there a lockable area that separates employees from customers? \( \sum \text{Yes} \sum \text{No} \)                                   |
| 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 \( \subseteq \) 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: 1 to 2   |
| 34. How will they be deployed: Interior X Exterior   |
| 35. What days will they be deployed \( \sum \) Mon \( \sum \) Tue \( \sum \) Wed \( \sum \) Thu \( \sum \) Fri \( \sum \) Sat \( \sum \) 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:   |
|  |
| ☐ ID Scanner   |
| ☐ Dress Code   |
| Cover Charge   |
| Age restriction 21 and older   |
| Other Checking ID at the front door  |
| C Cute Cute Cute Cute Cute Cute Cute Cut   |

#### ADDITIONAL COMMENTS/RECOMMENDATIONS:

This report was written by Police Officer Fabian GARCIA assigned to District 6-Community Community Partnership Unit.

On Tuesday, January 23, 2024, at 4:00 pm, I met with licensee/agent Carlos Miranda at 2758 S. 35th Street.

The location is currently under renovation and currently does not have any surveillance cameras installed. Carlos stated that their projected open date will be in early March if possible. Carlos stated that he would like to have this location set up as a sports bar. Carlos stated that they plan to be open from Tuesday to Sunday and closed on Mondays.

The location had multiple brand new windows installed, which allows good sight lines. The location is equipped with a parking lot, which is located in the rear of the location and can be access through the alley. The alley does have light fixtures throughout, which provides adequate lighting for their parking lot.

Carlos stated that once all licenses are approved he plans on placing 2 exterior cameras, one will face the front entrance and exit doors. One exterior cameras will be placed in the rear of the business (east side), which will also cover their parking lot. Carlos stated that he plans on installing 4 interior cameras. A discussion was had regarding placement of the cameras, which Carlos stated that he will make sure that one of the cameras do face the entry and exit points. Carlos stated that they will have a landline, which he will post the non-emergency and emergency numbers as well.

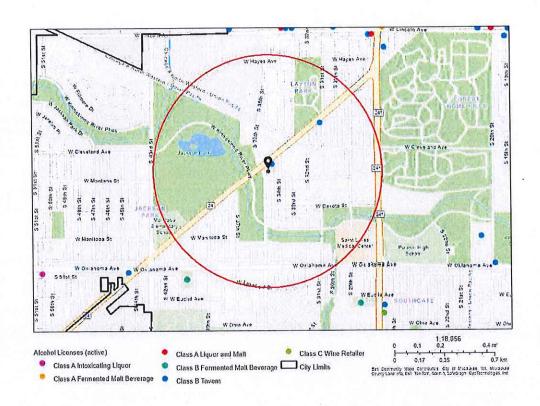
Carlos stated that they do plan on having a hire security guard, which will be managed by them, who will be equipped with a wanded metal detector and will be checking every ones identification cards. The security personal will only be deployed on the weekends, but can changed if needed. Carlos was provided with a community contact guide and also with a standing complainant form. This concludes my report.



#### Area of Interest (AOI) Information

Area: 21,862,585.97 ft2

Jan 8 2024 12:06:22 Central Standard Time



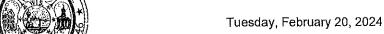
#### Summary

| Name             | Count | Area(ft²) | Length(mi) |
|------------------|-------|-----------|------------|
| Alcohol Licenses | 2     |           |            |

#### Alcohol Licenses

| # | Legal Entity                    | Trade Name               | Licensee                               | Address                  | License Type<br>Name         | Total<br>Capacity | Expiration<br>Date    | Count |
|---|---------------------------------|--------------------------|--|--------------------------|------------------------------|-------------------|-----------------------|-------|
| 1 | REHLEH LLC                      | The<br>Pressroom<br>MKE  | Robert E<br>Holmes, Agt                | 3105 W Forest<br>Home AV | Class B<br>Tavern<br>License |                   | 3/23/2024,<br>7:00 PM | 1     |
| 2 | El Jimador<br>Restaurant<br>LLC | El Jimador<br>Restaurant | JOSE D<br>ALVAREZ<br>HERNANDEZ,<br>Agt | 3447 W Forest<br>Home AV | Class B<br>Tavern<br>License |                   | 7/29/2024,<br>7:00 PM | 1     |

Establishments within a 0,5 miles radius centered on area of interest,







## Notice of Public Hearing

Blank Notice

MIRANDA, Carlos, Agent Dario's Place at 2758 S 35TH St

Class B Tavern, Public Entertainment Premises and Food Dealer License Applications Requesting Disc Jockey, Karaoke and Patrons Dancing

#### Tuesday, March 05, 2024 at 2:10 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 3/5/2024 at 2:10 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         | MAIL ADDRESS              | CITY STATE ZIP           |
|------------------|---------------------------|--------------------------|
| CURRENT OCCUPANT | 2761 S 34TH ST            | MILWAUKEE, WI 53215-3541 |
| CURRENT OCCUPANT | 2800 S 35TH ST            | MILWAUKEE, WI 53215-3546 |
| CURRENT OCCUPANT | 2802 S 34TH ST            | MILWAUKEE, WI 53215-3544 |
| CURRENT OCCUPANT | 2803 S 34TH ST            | MILWAUKEE, WI 53215-3543 |
| CURRENT OCCUPANT | 2806 S 35TH ST            | MILWAUKEE, WI 53215-3546 |
| CURRENT OCCUPANT | 2809 S 34TH ST            | MILWAUKEE, WI 53215-3543 |
| CURRENT OCCUPANT | 2810 S 34TH ST            | MILWAUKEE, WI 53215-3544 |
| CURRENT OCCUPANT | 2812 S 35TH ST            | MILWAUKEE, WI 53215-3546 |
| CURRENT OCCUPANT | 2815 S 34TH ST            | MILWAUKEE, WI 53215-3543 |
| CURRENT OCCUPANT | 2818 S 35TH ST            | MILWAUKEE, WI 53215-3546 |
| CURRENT OCCUPANT | 2819 S 34TH ST            | MILWAUKEE, WI 53215-3543 |
| CURRENT OCCUPANT | 3429 W FOREST HOME AVE    | MILWAUKEE, WI 53215-3531 |
| CURRENT OCCUPANT | 3429 W FOREST HOME AVE# A | MILWAUKEE, WI 53215-3531 |
| CURRENT OCCUPANT | 3447 W FOREST HOME AVE    | MILWAUKEE, WI 53215-3531 |
|                  |                           |                          |

Blank Notice

Total Records: 14

Radius 300.0 feet and Center of the Circle: 2758 S 35th St

ccl-busplan 5/12/2020

# MILWAUKEE

#### **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: 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:  |                |
| SPORT BAR  |                |
| Do you have any experience operating this type of business? \( \sum \text{No \bar{Y}} \text{ If yes, explain: Darto has worked in bars} \)  2. Business Operations |                |
| 2. Business Operations Over 10 year 3  | NAME<br>OF THE |
| a. Proposed Opening Date: <u>03-29-2024</u>  |                |
| b. Is this premise under construction? □ No 🛛 Yes If yes, list estimated completion date: <u>03-22-202</u>   |                |
| 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 X Yes   |                |
| If yes, explain: Food, hookah bar  |                |
| g. Have you previously held an Extended Hours License in Milwaukee? X No Yes   |                |
| If yes, list address(es):  |                |
| h. Are other businesses operating in the same building? X No Yes If yes, describe:   | C (W.J.)       |
| 3. Litter & Noise  |                |
| a. How are grounds kept clean? X Sweep Pressure Wash X 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 X Yes If yes, describe:   T SPEAKELS  |                |
| 4. Smoking & Sanitation  |                |
| a. Are there designated outdoor smoking areas? No X Yes If yes, describe: Patio  |                |
| b. Number of Garbage Cans: Inside: 8 Locations: by exit doors, behind bar  |                |
| outside: 5 Locations: behind bar and infront of be   | ir             |
| c. Is a crowd control barrier used? 🔯 No 🗌 Yes If yes, describe:   |                |
| d. How many restrooms are on the premises? 3   |                |
| e. Name of solid waste contractor: Advanced Disposal Waste Management Other:   |                |

| 5. Security  |   |                  |  |               |                             |
|--|---|------------------|--|---------------|-----------------------------|
| a. Are there onsite parking spaces? 🔲 No 🔀 Yes If yes, how many? and describe the parking security   |   |                  |  |               |                             |
| plan: Comevas  |   |                  |  |               |                             |
| b. Is there a loading zone?  | No 🗌 Yes If yes, d                          | escribe the l    | oading area security plar  | 1;            |                             |
| c. Will you have security per  | sonnel on premise? 🔀                        | 【No ☐ Yes        | If yes, how many?  | ar            | nd answer the following:    |
| What are their resp  |   |                  | 0 -  |               |                             |
| Is security equipme  | ent used? 🗌 No 🔀 Y                          | es If yes, de    | escribe <u>Cameva</u>  | 15            |                             |
| List their licensing,  | certification, or training                  | g credentials    |  |               | . 1                         |
| d. Will there be security cam  1 Front de  | or, 1 in fa                                 | arkine           | 16t  |               |                             |
| e. Will searches/identification  | on checks be done upor                      | n entry? 📈       | o 🗌 Yes If yes, descril  | be <u>unt</u> | <u>"I costumer orders</u>   |
| 6. Percentage of Sales   | (must total 100%                            | %)               |  | adı           |                             |
| Alcohol <u>80</u> %  | Food LO                                     | <u> </u> %       | Secondhand Merchandise   | e             | Precious Metals & Gems      |
| Entertainment%   | Cigarettes                                  | %                | %  |               | 76                          |
| Pawnbroker Activity%   | Salvaged Materials<br>(such as scrap metal) | %                | Personal Servičes (such a<br>body piercing, salon, tailc<br>tanning, etc.) | or,           | Other 10% Describe: HCOKAHS |
| 7. Businesses/Licenses   | on the Premise                              | s (check a       | all that apply):   |               |                             |
| Type 1   |   |                  |  |               |                             |
| Full Service Restaurant  | Cafe/Coffee Shop                            | Deli or F        | ast Food Restaurant  |               | /Fraternal/Veterans Club    |
| ☐ Night Club   | X Tavern                                    | Cocktail         | Lounge   | Teen C        | ilub                        |
| Banquet Hall   | Sports Facility                             | Bowling          | Alley  |               |                             |
| Hotel/Motel: Number of Flo   | oors:                                       | Roomin           | g House: Number of Floo  | ors:          | <del></del>                 |
| Number of Ro   | oms:  |                  | Number of Roo  | ms:           |                             |
| Type 2 Liquor Store  | Corner Store                                | Superma          | arket  | ☐ Conver      | nience Store                |
| Gas Station  | Amusement/Phonog                            | graph Distribut  | tor  | Recycli       | ng, Salvage or Towing       |
| Used Car Dealer  | Demonal Samiles Establishment               |                  |  |               |                             |
| What other licenses/permits will y   | you hold at this location?                  | (check all that  | apply)   |               |                             |
| Occupancy Permit 1 igarette & Tobacco Gas Station Extended Hours Class "B" Tavern Weights & Measures |   |                  |  |               |                             |
| Secondhand Dealer  | Precious Metal & Gem 🕽                      | Other: <u>HO</u> | OKAH'S with  | NO M          | icotine                     |
| 8. Legal Capacity (only if a Type 1 premises in #7 above)  |   |                  |  |               |                             |
| Capacity (Call the   | e Milwaukee Developmen                      | t Center at 41   | 4-286-8211 if you have que   | estions.)     |                             |

.

| 9. Premises D                                    | escription  |  |  |   |   |
|--|---|--|--|---|---|
|  | (s) of the premises that will be 2nd Floor Basement Stora                               |  |  |   | ·):   |
|  | ibe:  |  |  |   | ·   |
| b. Describe Locati                               | on: 🖊 Major Thoroughfare  | Secondary Street Ot  | her:   |   |   |
|  | Cross Street: Forest  |  |  |   |   |
|  | ng: 🖊 Free Standing Buildin   |  |  |   |   |
| e. Describe Premi                                | ses Structure: 🛮 Single Sto   | ry Multi-Story - # of Sto                                    | ries Other:  |   |   |
|  | unding Area: 🛮 Commercia  |  |  |   |   |
|  | Name: DANIEL I  |  |  |   |   |
| Building Owner                                   | Address: 1569 S V   | luskego Ave I  | hlwaukes, u  | 17.532                                    | 84  |
| 10. Hours of O                                   | peration & Custor   | ners   |  |   |   |
| Will customers be ente                           | ering the premises? 🔲 No  | <b>∠</b> Yes   |  |   |   |
| Day of the Week                                  | Proposed Hour   | s of Operation:  | Estimated Number of Customers                          | Potential<br>Age Range<br>of<br>Customers | Class B Tavern<br>Applicant Only:               |
|  | Open Time<br>(include a.m. or p.m.)   | Close Time<br>(include a.m. or p.m.)                         | expected each day                                      |   | Age Restriction (If none, write 'None')         |
| Sunday   | 11:00 Am  | 1:45 Am  | 45   | 21-55                                     | 21+   |
| Monday   | 11:00 Am  | 1:45 Am  | 30   | 21-55                                     | 21+   |
| Tuesday  | 11:00 Am  | 1:45 Am  | 30   | 21-55                                     | 21+   |
| Wednesday  | 11:00 Am  | 1:45 Am  | 30   | 21-55                                     | 21+   |
| Thursday   | 11:00 am  | 1:45 Am  | 50   | 21-55                                     | 21+   |
| Friday   | Maam  | 2:30 Am  | 80   | 21-55                                     | 21+   |
| Saturday   | 11:00 am  | 2:30 Am  | 80   | 21-65                                     | 21+   |
| An Extended Hours Es<br>piercing, salon, tailor, | tablishment License is requir<br>tanning, etc.), recording stud                         | ed for any convenience stor<br>Iío or restaurant which is op | e, filling station, persona<br>en between the hours of | l service establish<br>12:00 a.m. and !   | nment (such as tattoo, body<br>5:00 a.m.        |
| Alcohol Establishment<br>Permitted Hours of Op   |   | am to 9:00 pm Sunday thru<br>am to 2:00 am Sunday thru       |  | 0 am Friday & Sa                          | turday  |
| Entertainment Outdo                              |   | Opm Sunday-Thursday; 12:0<br>tablished by the Common Co      |  |   | time, either earlier or later,<br>of operation. |
| 11. Signature                                    | <b>(s)</b>  |  |  |   |   |
| had st   | in  |  | <b>BO</b>  |   |   |
| (If there are no 20                              | orietor, Partner, or 20% or m<br>0% or more shareholders,<br>print name/title and sign) | ore Shareholder  | Signature of additional p                              | partner or 20% or                         | more shareholder                                |



# 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: Miranda Bar LLC   |
|--|
| Premise Address: 2758 S 35th 8t Milwauker WI 53215   |
| Proximity of Premises to Church, School, Daycare Center or Hospital  |
| is the building within 300 feet of any church, school, daycare center or hospital? 💢 No 🗌 Yes  |
| "Service Bar Only" Designation   |
| If applying for Class B or C license, are you applying for "Service Bar Only"?   |
| 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. |
| Business Information   |
| a) Are you taking out this application for anyone that may not be eligible for a license? No 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? \(\sigma\) No \(\sigma\) 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? X No Yes   |
| If yes, explain:   |
| d) Have you made an agreement with anyone to repay any loan or any other payments based upon income from the business?  No Yes If yes, list name and address:  |
| Property Information (New & Transfer Applicants Only)  |
| a) Do you own or lease the building? ☐Own 【【Clease   |
| b) Who owns the fixtures (for example, coolers, etc.)? <u>building</u> owner   |
| c) Are you purchasing the stock and/or fixtures? No Yes If yes, amount paid \$   |
| A A  |
|  |
| e) Total amount paid for goodwill of the business 5  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   |
| Lease Information (New & Transfer Applicants who are leasing the premises only)  |
| a) Date lease begins 10-D1-2023 Ends 12-31-2027  |
| b) Monthly rental \$ 3000  |
| c) Do you have an option to renew the lease?  No  Yes  |
| d) 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)? 4 year 3  |
|  |

| Lea | se 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? X No Yes If yes, explain  |
| g)  | Does the present owner or occupant object to the granting of your license? No Ses  |
| Cha | ange of Agent Applicants Only  |
| Ha  | ve there been any changes to the floor plan since the last application was submitted?☑ No ☐Yes   |
|     | no, a new floor plan is not required. If yes, submit a new floor plan and explain the change(s):   |
| Sig | nature   |
|     | And Wind   |
|     | ature of Sole Proprietor, Partner or 20% or More Shareholder<br>o 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



## 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 e-mail address: license@milwaukee.gov

| PREMISES ADDRESS: 2758   | 3 S 35th 8t  | MIWAUKEE WI  | 53215  |
|--|--|--|--|
| TYPES OF ENTERTAINMENT (CH   | 化海绵 化环烷酸 医抗尿素性尿病 医神经病 医神经炎病 医克克氏病 化二氯甲基甲基乙基甲基  |  |  |
| Instrumental Musicians   | Battle of the Bands  | Dancing by Performers  | Amusement Machines How many?   |
| Bands  | Comedy Acts  | Adult Entertainment/ Strippers/Erotic Dance  | Concerts Approx. # per year?   |
| Bowling Alley How many?  | X Disc Jockey  |  | Theatrical Performances Approx. # per year?  |
| Pool Tables How many?  | Magic Shows  | Patron Contests  | Jukebox  |
| Motion Pictures (movies by admission) - How many?  | Poetry Readings  | Patrons Dancing  | X Karaoke  |
| Other:   |  |  |  |
| Entertainment Outdoor Closing Hours:   | ,  | n Friday & Saturday; unless a different time<br>cil in its approval of the licensee's plan of o <sub>l</sub>   | -  |
| PROMOTERS/SOUND AMPLIFIC   | ATION  |  |  |
| Will promoters ever be used for any of   | the entertainment? 💢 No 🗌  | Yes If Yes, Describe:  | •  |
| At any time will sound amplification be  | used? No X Yes If Yes, De  | scribe: DJ speak   | ers  |
| LEGAL CAPACITY OF PREMISES   |  |  |  |
| (Call the Development Premises License. If you would like to r here: If approved, th   | request the license be approved v  | estions.) Legal capacity determines the<br>with a lower capacity than that listed a<br>ur license and override the capacity lis  | bove, indicate the lower capacity  |
| ACKNOWLEDGEMENT/SIGNATI  | URE  |  |  |
| I understand that after the license has<br>the Common Council. I agree to inform<br>I understand that I shall not willfully re<br>the general public because of race, colo<br>orientation, gender identity or express<br>dressed in uniform or not; and shall no<br>selection of personnel for training or p | n the City Clerk within 10 days of<br>fuse to provide the services offer<br>or, sex, religion, national origin or<br>ion, familial status or the fact tha<br>t seek such information as a conc | any substantial changes in the informa<br>ed under this license, or add charges o<br>ancestry, age, handicap, lawful source<br>t a person is now or has been a memb<br>lition of employment, or penalize any | ntion supplied in this application.  For require deposits not required of For eof income, marital status, sexual For er of the military service, whether |
| I have knowledge of the City Ordinance suspension, non-renewal or revocation   | es currently regulating public ente<br>n, if I violate any rule, law or regul  | ertainment, and understand that the li<br>ation of the city of Milwaukee and Sta   | cense may be subject to<br>te of Wisconsin.  |
| Signature of Sole Proprietor, Partner o<br>(If no 20% or more Shareholder, Corpo   |  | d sign)  |  |
| Office Use Only: Initials: Filed:  | Арр :  | -  |  |

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



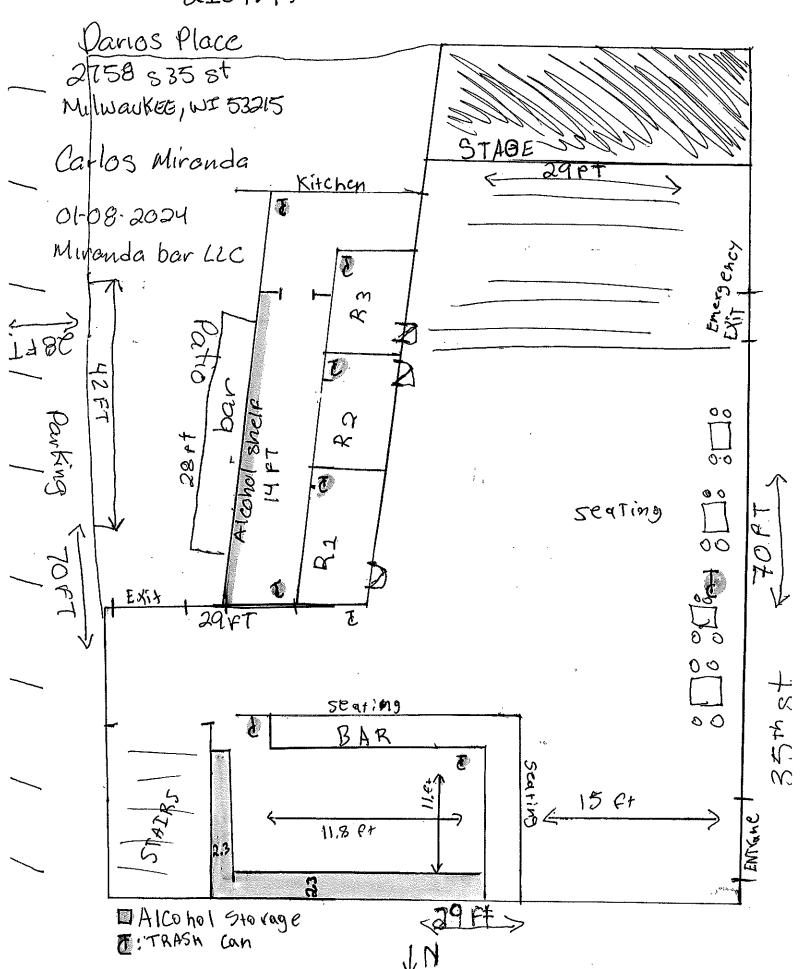
#### FOOD DEALER LICENSE PLAN OF OPERATION

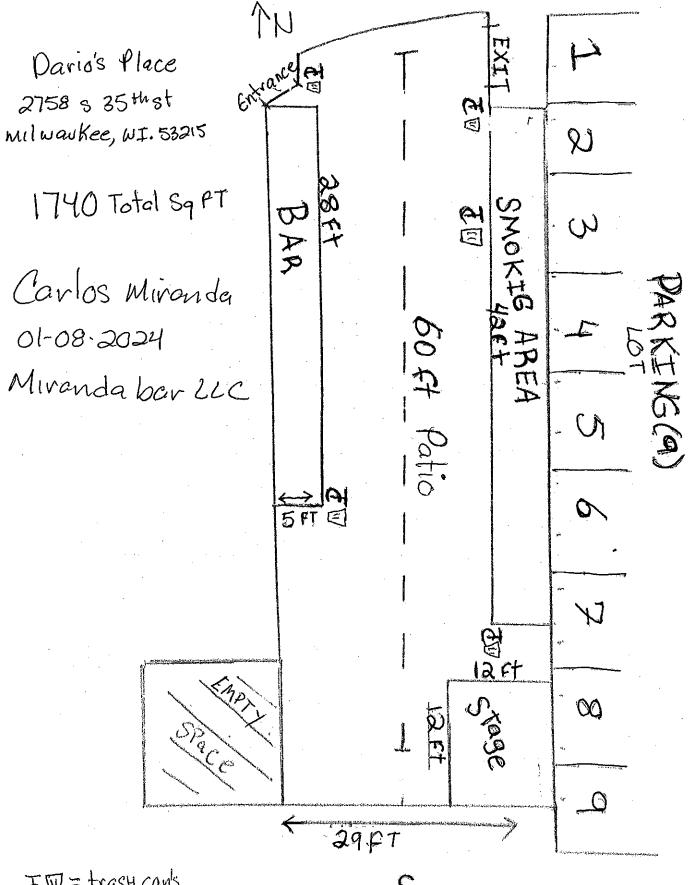
OFFICE OF THE CITY CLERK, LICENSE DIVISION
CITY HALL, 200 E. WELLS ST, ROOM 105, MILWAUKEE, WI 53202
(414) 286-2238 • license@milwaukee.gov • www.milwaukee.gov/license

| Legal Entity Name: Dario's Place  |
|---|
| Premises Address: 2758 s 35th st Milwaukee, WI- 53215   |
| 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. Palermo Villa Inc  |
| Will any wholesale business be done? X No Yes If yes, what percentage of food sales will be wholesale?  |
| Less than 25%   |
| <ul><li>25% or More AND:</li><li>Restaurant items (meals) will be sold – Complete this application and also contact DATCP.</li></ul>  |
| 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 X 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 \[ \times \] Yes (includes dairy products such as milk, cheese, and ice cream, fish, shellfish, meat, poultry)  If yes, list the types of food items: \[ \text{Fvo 2en} \] P(\text{72es}  |

ccl-foodplan 2/28/19

| SECTION 4 DETAILS OF OPERATION   |
|--|
| Will you have seating on site for dining? No X Yes   |
| Will you be doing any catering?  |
| Will you be doing any delivery?  |
| 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 7  |
| Yes If Yes, check all that apply:  New construction of a building  Renovation or remodeling  |
| Construction changes to existing building Kequipment changes only  |
| Provide a brief description of the changes:  |
| Start date:  |
| Name, Address & Phone Number of Architect:   |
|  |
| Name, Address & Phone Number of Contractor:  |
|  |
| SECTION 7 ALCOHOL BEVERAGES  |
| Are you applying for an alcohol beverage license?  |
| ☐ No If No, SKIP to Section 8  |
| Yes If YES, if your food license is approved prior to the alcohol license, when do you want the food license issued?   |
| Immediately At the same time as the alcohol license  |
| SECTION 8 ACKNOWLEDGEMENTS & SIGNATURE   |
| You must initial each item confirming your understanding:  |
| I understand the Health Department must conduct an inspection and advise the License Division of their approval  |
| before the license may be issued.  |
| 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.   |
| 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.   |
| 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.   |
| 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: Jumn Winn   |
| - Control of the Cont |
| Signature of Additional Partner:   |





E回=trash can's

380 Total SqFt Darro's Place 2758 s 35th St MI WOOKEG, WI 53215 Carlos Miranda 01-08-2024 Miranda bar LLC <u> فأهر حج </u> cold storage Alcohol storage 9,6 20° F DRY storage 9,81

186

(1)

MENU Frozen Pizza's

Pizza Pepæroni Pizza Sausage

Pizza cheese

popcorn