

BUSINESS LICENSE RENEWAL 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>

AD: 9
EXP DATE OF ALL LICENSES: 5/23/2024

Office Use Only:	App#361406, 361407	
N Objs No Yes	Chgs_NA	
Filed_ 2-8-24	Initials TR.	
Paid 5780	MPD	
Granted	Issued/Initials	

	BUSINESS CONTA	CT INFORMATION				
Section 1	Legal Entity Name : Brew City Pizza, Inc (cannot change on this application)	Trade/DBA Name: Domino's Pizza				
	Phone Number: (414) 357-7775	E-mail Address: john.brewcitypizza@hotmail.com				
	Premises Address (include city/state/zip): 7613 W GOOD HOPE RD Milwaukee WI 53223 (cannot change on this application)					
	Mailing Address (include city/state/zip): 11050 W BLUEMOUND RD Wauwatosa WI 53233					
	AGENT OF CORP/LLC/NONPROFIT /	SOLE PROPRIETOR / 1ST PARTNER				
Section 2	FULL LEGAL NAME (Last, First & Middle Initial): THEISEN, John, A	Date of Birth: 7/27/1965				
	Home Address (include city/state/zip) 20225 Rustic 12idge Cf	New Berlin WI 53146				
		6-5247-07 State: WI = 5				
		Percent of Ownership Interest: 49 % Home Phone: 414 350 746 Sell Phone:				
	LIST ALL PERSONS WITH 20% OR MORE OWN	ERSHIP INTEREST / ADDITIONAL PARTNER(S)				
Section 3	FULLEGAL NAME (Last, First & Middle Initial): Saretz Douglas Home Address (include city/state/zip): 4501 Jenna Dig Franklin	Date of Birth: 2 9 119 4 CD 15 NAUKE				
	Driver's License Number/State ID #: (\$\alpha \alpha	0-4049-01 State: WI 0				
	Percent of Ownership Interest: 49 % Home Phone:	Cell Phone: 414 350 7490				
	FULL LEGAL NAME (Last, First & Middle Initial):	Date of Birth:				
ecti						
Secti	Home Address (include city/state/zip):					
Secti	Home Address (include city/state/zip): Driver's License Number/State ID #:					
Secti		State: Cell Phone:				
Secti	Driver's License Number/State ID #:	Cell Phone:				
Secti	Driver's License Number/State ID #:	Cell Phone:				
Section 4 Secti	Driver's License Number/State ID #: Home Phone:: Percent of Ownership Interest: % Home Phone:: Check if there are additional persons with 20% or more owner Complete additional sheets as necessary. REQUIRED ACKNOWLED 1. The undersigned understands that applicants are required to inform to application. 2. The undersigned has knowledge of the City Ordinances and Wisconsist that the license may be subject to suspension, non-renewal or revocations. 3. The undersigned understands that applicants shall not willfully refuse not required of the general public because of race, color, sex, religion sexual orientation, gender identity or expression, familial status or the dressed in uniform or not; and shall not seek such information as a compersonnel for training or promotion on the basis of such information.	Cell Phone: rship interest or partners. DGEMENT & SIGNATURE the City Clerk within 10 days of any changes in any of the information supplied in this in State Statutes currently regulating the license applied for herein, and understands tion, if the applicants violate any rule or regulation relating to the license. to provide the services offered under this license, or add charges or require deposits, national origin or ancestry, age, handicap, lawful source of income, marital status, he fact that a person is now or has been a member of the military service, whether indition of employment, or penalize any employee or discriminate in the selection of				
	Driver's License Number/State ID #: Home Phone:: Check if there are additional persons with 20% or more owner Complete additional sheets as necessary. REQUIRED ACKNOWLED 1. The undersigned understands that applicants are required to inform to application. 2. The undersigned has knowledge of the City Ordinances and Wisconsist that the license may be subject to suspension, non-renewal or revocation and the undersigned understands that applicants shall not willfully refuse not required of the general public because of race, color, sex, religion sexual orientation, gender identity or expression, familial status or the dressed in uniform or not; and shall not seek such information as a compersonnel for training or promotion on the basis of such information. 1. I/we state that this application for a license is not made for and behavior.	Cell Phone: OGEMENT & SIGNATURE The City Clerk within 10 days of any changes in any of the information supplied in this in State Statutes currently regulating the license applied for herein, and understands tion, if the applicants violate any rule or regulation relating to the license. To provide the services offered under this license, or add charges or require deposits in national origin or ancestry, age, handicap, lawful source of income, marital status, the fact that a person is now or has been a member of the military service, whether and the individual or penalize any employee or discriminate in the selection of				



BUSINESS LICENSE RENEWAL PLAN OF OPERATION

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Licenses to be Renewed	Renewal Fee(s)						
Food Dealer - FREST 18850	\$1,250.00	Expiration Date: 5/23/2024					
Extended Hours - 24HRS 200160	\$225.00						
Filling Station -		File By Date:	2/21/2024				
Cigarette & Tobacco -		Date Late Fee Begins:	2/22/2024				
Weights & Measures -		Late Fee Amount:	\$75.00				
Sidewalk Dining -							
TOTAL DUE	\$1475						
Legal Entity Name: Brew City Pizza, Inc							
Premises Address: 7613 W GOOD HOPE RD							
Changes Since Last Application	?						
Are there any changes in your plans to address litter, noise, and/or security? 📈 No 🗌 Yes If yes, describe:							
Are there any changes to the hours of operation (as listed on your current license)? No Yes If yes, describe:							
Are there any changes to your current plan of operation or floor plan*? No See If yes, describe:							
*If there are changes to the floor plan, a new floor plan must be submitted with this renewal application. A sample plan can be found online at www.milwaukee.gov/licenses under License Forms and Related Information.							
Weights & Measures Licensees	Only	Sidewalk Dining					
Number/Type of Devices: Are there any changes to the number or types of No Yes If yes, contact our office f		Are there any changes to the sidewalk dining site plan? s. No Yes If yes, submit an updated site plan with this application.					
Food Dealer Licensees Only							
Your current food license includes the following business operations: DHS - MODERATE, Restaurant, Sales \$200,001 - \$2,000,000 Are there any changes to your plan of operation (for example, adding processing, changing sales amount or complexity, etc.)? Yes If yes, you must complete a "Request to Modify Food Establishment/Food Operation Plan" which can be obtained at www.milwaukee.gov/licenses under "Forms and Related Information" or by contacting our office.							
All Applicants: Signature							
Signature of Sole Proprietor; a Partner; or if a Corporation or LLC, the Agent must sign							