

## CITY OF MILWAUKEE OFFICE OF THE CITY CLERK

Wednesday, October 08, 2014

#### **COMMITTEE MEETING NOTICE**

AD 12

AGUILAR VILLARREAL, Sonia, Agent Sabor Internacional LLC 2406 S 14th St

Milwaukee, WI 53215

You are requested to attend a hearing which is to be held in Room 301-B, Third Floor, City Hall on:

#### Monday, October 20, 2014 at 09:30 AM

Regarding:

Your Class B Tavern, Food Dealer - Restaurant, Extended Hours Establishment, and Public Entertainment Premises License Applications Requesting to Close at 4 AM Thurs-Sat and Requesting Instrumental Musicians, Patrons Dancing, Jukebox, and Karaoke as agent for "Sabor Internacional LLC" for "Sabor Internacional LLC" at 1234 S Cesar E Chavez DR.

There is a possibility that your application may be denied for one and municipal requirements; the fitness and appropriateness of the locution of be licensed and whether the location will create undesirable neighborhood problems (such as disorderly congregations of people, excessive litter, unreasonable noise, and traffic and parking problems), whether or not there is an over-concentration of alcohol beverage establishments in the neighborhood; whether or not you have been charged with or convicted of any felony, misdemeanor, municipal offense or other offense, the circumstances of which substantially relate to the licensed activity; and any other factors which reasonably relate to the public health, safety and welfare. See attached police report and/or written correspondence regarding this application. Please be advised the public will be able to provide information to the committee in person or in writing. The committee will receive and consider evidence regarding the above mentioned criteria.

Notice for applicants with warrants or unpaid fines:

Proof of warrant satisfaction or payment of fines must be submitted at the hearing on the above date and time. Failure to comply with this requirement may result in a delay of the granting/denial of your application.

Failure to appear at this meeting may result in the denial of your license. Individual applicants must appear only in person or by an attorney. Corporate or Limited Liability applicants must appear only by the agent designated on the application or by an attorney. Partnership applicants must appear by a partner listed on the application or by an attorney. If you wish to do so and at your own expense, you may be accompanied by an attorney of your choosing to represent you at this hearing.

You will be given an opportunity to speak on behalf of the application and to respond and challenge any charges or reasons given for the denial. No petitions can be accepted by the committee, unless the people who signed the petition are present at the committee hearing and willing to testify. You may present witnesses under oath and you may also confront and cross-examine opposing witnesses under oath. If you have difficulty with the English language, you should bring an interpreter with you, at your expense, so that you can answer questions and participate in your hearing.

You may examine the application file at this office during regular business hours prior to the hearing date. Inquiries regarding this matter may be directed to the person whose signature appears below.

Limited parking for persons attending meetings in City Hall is available at reduced rates (5 hour limit) at the Milwaukee Center on the southwest corner of East Kilbourn and North Water Street. Parking tickets must be validated in the first floor information booth in City Hall.

PLEASE NOTE: Upon reasonable notice, efforts will be made to accommodate the needs of disabled individuals through sign language interpreters or other auxiliary aids. For additional information or to request this service, contact the Council Services Division ADA Coordinator at (414) 286-2998, Fax - (414) 286-3456, TDD - (414) 286-2025.

JIM OWCZARSKI, CITY CLERK

BY: Rebecca N. Grill

**Deputy City Clerk** 

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. <a href="https://www.milwaukee.gov/license">www.milwaukee.gov/license</a> Phone: (414) 286-2238 Fax: (414) 286-3057 Email Address: License@milwaukee.gov

## MILWAUKEE POLICE DEPARTMENT LICENSING

## CRIMINAL RECORD/ORDINANCE VIOLATION/INCIDENTS SYNOPSIS

Date: 09/24/2014 LICENSE TYPE: Class B Tavern New:  RENEWAL:	ž	No. 194720 Application Date:	
License Location: 1234 S Cesar E Chavez  Business Name: Sabor Internacional I I C			

Licensee/Applicant: AGUILAR VILLAREAL, Sonia

(Last Name, First Name, MI)

Date of Birth: 11/09/1962

Home Address: 2406 S 14th St

City: Milwaukee State: WI Zip Code: 53215

Home Phone: (414) 628-2495

This report is written by Police Officer Gilbert Gwinn, assigned to the License Investigation Unit, Days.

The Milwaukee Police Department's investigation regarding this application revealed the following:

1. On 03/31/2008 the Wisconsin Department of Transportation revoked Byron GUDIEL'S driver's license for 6 months for Operating While Intoxicated. Byron GUDIEL is listed on the application as a 50% owner.

Date:10/04/14 Officer: Efrain Cornejo

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

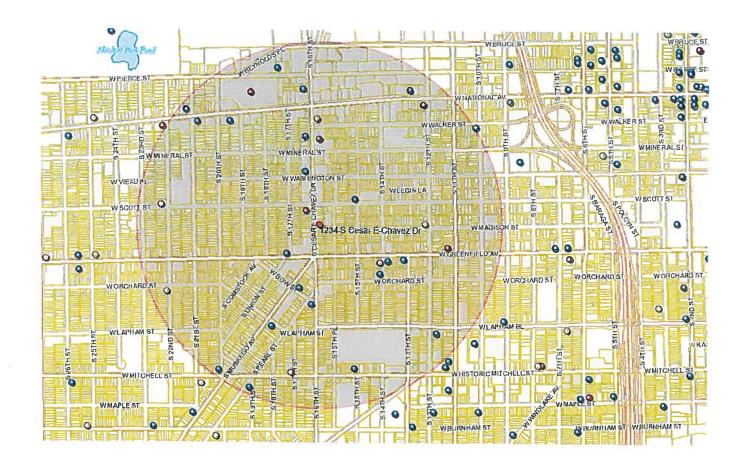
Name of Premise: Address: Phone:	Sabor International LCC 1234 S Cesar E Chavez Dr (414) 269-9435	
Owner: Owner address: City State Zip: Owner Phone: Owner email:	Sabor International LCC 1234 S Cesar E Chavez Dr Milwaukee,WI 53204 (414) 628-2493	
Licensee/Agent: Home Address: City State Zip: Phone: Email:	Sonia Aguilar-Villarreal 2406 S 14 <sup>th</sup> St Milwaukee,WI 53215 (414) 517-1318/(414) 628-2493 saguila962@yahoo.com	
Preferred contact: Son	nia Aguilar-Villarreal	
Location currently op	en: YES NO	
Projected open date: 1	Novenber 2014	
Day's open: S I	M □T □W □Th □F □SA ⊠ALL	
Hours of Operation:	Sun: 9A-12A Mon: 9A-12A Tue: 9A-12A Wed: 9A-12A Thu: 9A-2A Fri: 9A-2:30A Sat: 9A-2:30A	24 hours □Y ⊠N
Premise Type:	☐Tavern/Bar ☐Restaurant ☐Other:	

Alcohol:
Food:
Food:
Other: Yes No Type: #:    Yes No Type: #:   Yes No Type: #:   Yes No Type: #:   Yes No Type: #:   Yes No Type: #:
Other:
Exterior Survey:  1. Is the area around the location clean?  \[ \sqrt{Yes} \] 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. Street parking \[ \] Yes \[ \] No  7. Is there a parking lot \[ \] Yes \[ \] No  8. Is the parking lot clean? \[ \] Yes \[ \] No  9. Is the parking lot well lit? \[ \] Yes \[ \] No
1. Is the area around the location clean?
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. Street parking ☒Yes □No  7. Is there a parking lot □Yes ☒No  8. Is the parking lot clean? □Yes ☒No  9. Is the parking lot well lit? □Yes ☒No
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. Street parking □Yes □No 7. Is there a parking lot □Yes □No 8. Is the parking lot clean? □Yes □No 9. Is the parking lot well lit? □Yes □No
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. Street parking □Yes □No 7. Is there a parking lot □Yes □No 8. Is the parking lot clean? □Yes □No 9. Is the parking lot well lit? □Yes □No
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. Street parking Yes No 7. Is there a parking lot Yes No 8. Is the parking lot clean? Yes No 9. Is the parking lot well lit? Yes No
c.
d.
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. Street parking Yes No  7. Is there a parking lot Yes No  8. Is the parking lot clean? Yes No  9. Is the parking lot well lit? Yes No
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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. Street parking Yes No  7. Is there a parking lot Yes No  8. Is the parking lot clean? Yes No  9. Is the parking lot well lit? Yes No
<ol> <li>Can you see from the outside of the location into the interior ∑Yes ∑No</li> <li>Can you see the employees inside of the location from the outside ∑Yes ∑No</li> <li>Are exterior windows free of signage ∑Yes ∑No</li> <li>Street parking ∑Yes ∑No</li> <li>Is there a parking lot ∑Yes ∑No</li> <li>Is the parking lot clean? ∑Yes ∑No</li> <li>Is the parking lot well lit? ∑Yes ∑No</li> </ol>
<ul> <li>4. Can you see the employees inside of the location from the outside  Yes  No</li> <li>5. Are exterior windows free of signage  Yes  No</li> <li>6. Street parking  Yes  No</li> <li>7. Is there a parking lot  Yes  No</li> <li>8. Is the parking lot clean?  Yes  No</li> <li>9. Is the parking lot well lit? Yes  No</li> </ul>
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<ul> <li>5. Are exterior windows free of signage  Yes  No</li> <li>6. Street parking  Yes  No</li> <li>7. Is there a parking lot  Yes  No</li> <li>8. Is the parking lot clean?  Yes  No</li> <li>9. Is the parking lot well lit?  Yes  No</li> </ul>
<ul> <li>6. Street parking ∑Yes ∑No</li> <li>7. Is there a parking lot ∑Yes ∑No</li> <li>8. Is the parking lot clean? ∑Yes ∑No</li> <li>9. Is the parking lot well lit? ∑Yes ∑No</li> </ul>
<ul> <li>7. Is there a parking lot  Yes  No</li> <li>8. Is the parking lot clean? Yes  No</li> <li>9. Is the parking lot well lit? Yes  No</li> </ul>
<ul><li>8. Is the parking lot clean? ☐ Yes ☒ No</li><li>9. Is the parking lot well lit? ☐ Yes ☒ No</li></ul>
9. Is the parking lot well lit? ☐ Yes ⊠No
10. Valet Parking Lilyes IXINo
<u> </u>
a. Will this lot have a guard? Yes No
b. Will this lot have cameras? Tyes 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
15. Are there exterior security cameras ☐Yes ☒No How Many:
16. Are the address numbers prominently displayed and easy to see Yes No
10. The the data as named a prominently displayed and easy to see 1 es 110
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. VCR ☐Yes ☒No
d. Recorded Yes No
20. How long is footage stored for later viewing: unknown
21. Are there exterior cameras Yes No How many: 1
22. Are there interior cameras Yes No How many: 5

23. Do all employees know how to retrieve recorded digital images/footage? Yes No
24. Cameras located in parking lot Yes No How many
Interior Survey:
25. What is the planned/posted capacity pending
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?
29. Does an interior camera face the entrance/exit? \times Yes \times No
30. Are emergency and non-emergency numbers posted near the phone? Yes No
31. 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
32. How many security personnel are going to be employed: 2
33. How will they be deployed: Interior 1 Exterior1
34. What days will they be deployed ☐Mon☐Tue☐Wed☐Thu☐Fri☐Sat☐Sun
35. Will the security be managed by business or contracted
36. Will they be armed ☐Yes ☒No
37. What type of security measures will be used:
Wanding/metal detector
☐ ID Scanner
Dress Code
Cover Charge
Age restriction
Other
38. When at capacity, how will the overflow crowd be managed? She stated she doesn't
expect to be at capacity but will monitor.
39. Will a guard monitor the overflow crowd at all times? ⊠Yes □No

#### **ADDITIONAL COMMENTS/RECOMMENDATIONS:**

Applicant stated she plans on running a restaurant and wants to be able to serve alcohol to her customers. Applicant stated she plans to have karaoke on Friday and Saturday nights. I observed the business was setup as a restaurant. Applicant was advised to monitor smokers to keep noise down and will put a cigarette butt dispenser for the cigarette butts. She stated her surveillance system is not fully installed yet but it will be working when she opens the place up. The buildings power is currently not connected and she is waiting inspection for electrical.



()	e e e e e e e e e e e e e e e e e e e									
Licensed Alcohol	Beverage Establishments within a .5 Mile Rad	lus Centered on 1234 S. Cesar E. Chavez Drive, 9/19/2014					1			
					-					
						Total	1			
			License Summary				1			
			Class A Fermented Malt Beverage Retaile	r's License						
			Class A Mait & Class A Liquor License				5			
			Class B Fermented Malt Beverage Retaile	r's License						
			Class B Tavern License			2:	1			
					Grant Total	34				1
piration date	Legal entity	Trade name	Licensee	House number	Street direction	Street name		License type name	Total capacity	Room capaci
	EDDY'S FOODS	EDDY'S FOODS	MOHD A ATSHAN, SP	1239		12TH	ST	Class A Fermented Malt Beverage Retaller's License		
	Harjodh, Inc	Mi Pueblo	Harpreet S Chawla, Agt	1700		MITCHELL	ST	Class A Fermented Malt Beverage Retailer's License		1
	J & E GROCERY STORE, LLC	LA HACIENDA	JOSE SANCHEZ, Agt	820			DR	Class A Fermented Malt Beverage Retaller's License		
	L & J Grocery	L & J Grocery	Lynette C Eggars, SP	1401		GREENFIELD	AV	Class A Fermented Malt Beverage Retailer's License		
	OMKAR, LLC	ORCHARD FOOD MART	Maninder K Mann, Agt	2201		ORCHARD	ST	Class A Fermented Malt Beverage Retailer's License		
9/15/2015	R K A, LLC	ABC STORE	RAEID K ASSAD, Agt	1143	S	22ND	ST	Class A Fermented Malt Beverage Retaller's License		-
42/20/200	ABBUT THUR ALE									
	APPLE TWO, LLC	EL CHARRO LIQUOR STORE	VIKRAMJIT SINGH, Agt	1207		CESAR E CHAVEZ	DR	Class A Malt & Class A Liquor License		
	EL REY SPIRITS, INC	EL REY SPIRITS, INC	ERNESTO VILLARREAL, Agt	916		CESAR E CHAVEZ	DR	Class A Malt & Class A Liquor License		
	JENNY-3, INC	GREENFIELD PANTRY	YAMIRA GOVANI-WILBER, Agt	1110		GREENFIELD	AV	Class A Malt & Class A Liquor License		
	MEGA MARTS, LLC	PICK 'N SAVE #6864	Eibar Ruiz, Agt	1818		NATIONAL	AV	Class A Malt & Class A Liquor License		97
	NATIONAL MUFFLER & FOOD MART, INC	NATIONAL LIQUOR MART	YAMIRA GOVANI-WILBER, Agt	719		CESAR E CHAVEZ	DR	Class A Malt & Class A Liquor License		
10/13/2014	TEXAS FOOD	TEXAS FOOD	HAKAM K ASSAD, SP	1201	w	NATIONAL	AV	Class A Malt & Class A Liquor License		
0/2/2015	WAT PATH LAO BUDDHIST TEMPLE CORP	WAT CATTLO TO A CA		<u> </u>		<u> </u>				
2/2/2013	WAT FATE DAG BODDONIST TEMPLE CORP	WAT PATHOUMMAPHOUTHARAM LAO BUDDHIST TEMPLE CORP	SOUTHEP THIKEO, Agt	1925	W	NATIONAL	AV	Class B Fermented Malt Beverage Retailer's License	240	
10/11/2014	CANTARITOS BAR, LLC	CANTARITOS BAR	FRANCISCO GOMEZ-ORTIZ, Agt	1566	c	MUSKEGO	AV	Class B Tayern License		
5/3/2015	CLUB 039	CLUB 039	LORI J HERNANDEZ, SP	2000			ST	Class B Tayern License	52	
2/10/2015	Debbie Coops LLC	The Tool Box	Debra J Cooper, Agt	1500			ST	Class B Tayern License	63	
	EL A'S DE COPAS	EL A'S DE COPAS	JOSEFINA STEWART, SP	1226			AV		72	
4/8/2015	EL TORO BRAVO	EL TORO BRAVO	JUAN C CURIEL, SP	2039			AV	Class B Tavern License	63	
	Fierce Productions, LLC	Beso A Milwaukee Bar	Jose A Lainez-Cabrera, Agt	1537		CESAR E CHAVEZ		Class B Tavern License	98	
	INDIOS PLACE	INDHOS PLACE	JOSE S ESPINO, SP	915		CESAR E CHAVEZ		Class B Tavern License	80	
	JALISCO RESTAURANT, LLC	JALISCO RESTAURANT	CARLOS E CASERES, Agt	1035		CESAR E CHAVEZ		Class B Tavern License	160	
	Jaliscos Seafood Mexican Restaurant LLC	Jaliscos Seafood Mexican Restaurant	RUBEN HERRERA, Agt	1234		Cesar E Chavez	DR	Class B Tavern License	128	
	La Caribena LLC	La Caribena Restaurant	Edwin A Ordonez-Cardenas, Agt	1704				Class B Tavern License	49	
	LA CARRETA VIEJA	LA CARRETA VIEJA	ABEL SANTOS, SP			Pearl		Class B Tavern License		
	La Sirenita Bar, LLC	La Sirenita Bar	FRANCISCO MARTINEZ VILLEGAS, Agt	1339		GREENFIELD		Class B Tavern License	223	
	LOS DOS HERMANOS	LOS DOS HERMANOS	SILVESTRA MUNOZ, SP	1500		MITCHELL		Class B Tavern License	80	
	Oscar's Pub & Grill, LLC	Oscar's Pub & Grill	Elisabeth Stoeger, Agt					Class B Tavern License	25	
	PHANS GARDEN, INC	PHAN'S GARDEN	HO! T TRAN, Agt	1712				Class 8 Tavern License	146	
	R & D BEVERAGE CORPORATION	GANONG'S CORNER	DONNA M GANONG, Agt	1923				Class B Tavern License	240	
	SAN JOSE, LLC	CLUB GUADALAJARA	GUILLERMO RODRIGUEZ, Agt					Class B Tavern License	25	
	TAQUERIA EL JALAPENO	TAQUERIA EL JALAPENO		1135				Class B Tavern License	240	
	TEQUILA NIGHT CLUB	TEQUILA NIGHT CLUB	ANGEL GUTTERREZ GARNICA, SP	2106				Class B Tayern License	61	(1)
	The Merge Group LLC	Mango's	GUSTAVO GUIZAR, JR, SP	1460		MUSKEGO		Class B Tavern License		
	VILLA'S PLACE	VILLA'S PLACE	Gregory A Kieckbusch, Agt	721				Class B Tavern License		
4345013	TILLIA DI LINEE	I VILLA 3 FLACE	ALFREDO O VILLA, SP	1700	W	GREENFIELD	AV	Class B Tavern License	25	1





## Notice of Public Hearing

AGUILAR VILLARREAL, Sonia, Agent
Sabor Internacional LLC at 1234 S Cesar E Chavez DR
Class B Tavern, Food Dealer - Restaurant, Extended Hours Establishment, and Public Entertainment Premises License Applications Requesting to Close at 4 AM Thurs-Sat and Requesting Instrumental Musicians, Patrons Dancing, Jukebox, and Karaoke

#### Monday, October 20, 2014 at 9:30 AM

To whom it may concern:

The above application has been made by the above named applicant(s). This requires approval from the Licenses Committee and the Common Council of the City of Milwaukee. The hearing before the Licenses Committee will take place on 10/20/2014 at 9:30 AM, in Room 301-B, Third Floor, City Hall. If you wish, you may provide testimony at the hearing regarding the request; see below for further information. You are not required to attend the hearing. Once the Licenses Committee makes its recommendation, this recommendation is forwarded to the full Common Council for approval at its next regularly scheduled hearing. Please review the information below and if you have further questions regarding this process, please contact the License Division at (414) 286-2238.

## 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.

DECIDENT	MAII ADDDEOG	
RESIDENT	MAIL ADDRESS 1204 S CESAR E CHAVEZ DR	CITY AND ZIP CODE
	1204 S CESAR E CHAVEZ DR 1204A S CESAR E CHAVEZ DR	MILWAUKEE, WI 53204-2267
CURRENT RESIDENT	1204A 3 CESAR E CHAVEZ DR	MILWAUKEE, WI 53204-2267
CURRENT RESIDENT		MILWAUKEE, WI 53204-2258
CURRENT RESIDENT		MILWAUKEE, WI 53204-2258
CURRENT RESIDENT		MILWAUKEE, WI 53204-2258
CURRENT RESIDENT		MILWAUKEE, WI 53204-2258 MILWAUKEE, WI 53204-2259
CURRENT RESIDENT		MILWAUKEE, WI 53204-2259
CURRENT RESIDENT		MILWAUKEE, WI 53204-2258
CURRENT RESIDENT		MILWAUKEE, WI 53204-2238
	1215 S CESAR E CHAVEZ DR	MILWAUKEE, WI 53204-2014
CURRENT RESIDENT	1215A S CESAR E CHAVEZ DR	MILWAUKEE, WI 53204-2268
	1217 S CESAR E CHAVEZ DR	MILWAUKEE, WI 53204-2268
CURRENT RESIDENT		MILWAUKEE, WI 53204-2258
<b>CURRENT RESIDENT</b>		MILWAUKEE, WI 53204-2014
CURRENT RESIDENT		MILWAUKEE, WI 53204-2014
	1221 S CESAR E CHAVEZ DR	MILWAUKEE, WI 53204-2268
<b>CURRENT RESIDENT</b>		MILWAUKEE, WI 53204-2014
CURRENT RESIDENT		MILWAUKEE, WI 53204-2014
<b>CURRENT RESIDENT</b>		MILWAUKEE, WI 53204-2014
	1223 S CESAR E CHAVEZ DR	MILWAUKEE, WI 53204-2268
<b>CURRENT RESIDENT</b>		MILWAUKEE, WI 53204-2258
<b>CURRENT RESIDENT</b>		MILWAUKEE, WI 53204-2014
	1227 S CESAR E CHAVEZ DR	MILWAUKEE, WI 53204-2268
<b>CURRENT RESIDENT</b>		MILWAUKEE, WI 53204-2258
	1229 S CESAR E CHAVEZ DR 1	MILWAUKEE, WI 53204-2268
	1229 S CESAR E CHAVEZ DR 2	MILWAUKEE, WI 53204-2268
CURRENT RESIDENT	1229 S CESAR E CHAVEZ DR 3	MILWAUKEE, WI 53204-2268
<b>CURRENT RESIDENT</b>	1229 S CESAR E CHAVEZ DR 4	MILWAUKEE, WI 53204-2268
CURRENT RESIDENT	1230 S 15TH PL	MILWAUKEE, WI 53204-2258
<b>CURRENT RESIDENT</b>		MILWAUKEE, WI 53204-2014
CURRENT RESIDENT	1230 S CESAR E CHAVEZ DR	MILWAUKEE, WI 53204-2267
CURRENT RESIDENT		MILWAUKEE, WI 53204-2014
CURRENT RESIDENT		MILWAUKEE, WI 53204-2258
	1232 S CESAR E CHAVEZ DR	MILWAUKEE, WI 53204-2267
CURRENT RESIDENT		MILWAUKEE, WI 53204-2258
CURRENT RESIDENT		MILWAUKEE, WI 53204-2014
	1235 S CESAR E CHAVEZ DR	MILWAUKEE, WI 53204-2268
	1235B S CESAR E CHAVEZ DR	MILWAUKEE, WI 53204-2268
CURRENT RESIDENT		MILWAUKEE, WI 53204-2258
CURRENT RESIDENT		MILWAUKEE, WI 53204-2258
CURRENT RESIDENT		MILWAUKEE, WI 53204-2014
CURRENT RESIDENT		MILWAUKEE, WI 53204-2258
CURRENT RESIDENT		MILWAUKEE, WI 53204-2258
CURRENT RESIDENT		MILWAUKEE, WI 53204-2259
	1239 S CESAR E CHAVEZ DR	MILWAUKEE, WI 53204-2268
CURRENT RESIDENT		MILWAUKEE, WI 53204-2259
CURRENT RESIDENT		MILWAUKEE, WI 53204-2258
CURRENT RESIDENT		MILWAUKEE, WI 53204-2258
CURRENT RESIDENT		MILWAUKEE, WI 53204-2014
CURRENT RESIDENT		MILWAUKEE, WI 53204-2258
CURRENT RESIDENT		MILWAUKEE, WI 53204-2259
CURRENT RESIDENT		MILWAUKEE, WI 53204-2259
CURRENT RESIDENT		MILWAUKEE, WI 53204-2258
CURRENT RESIDENT	1240 5 1/11 51	MILWAUKEE, WI 53204-2014

Total Records: 78
Radius: 250.0 feet and Center of Circle: 1234 S Cesar E Chavez DR

Wednesday, October 08, 2014



### Licenses Committee Notice of Hearing

Torrijos, LLC 1306 S 16th St

Milwaukee, WI 53204

Date:

10/20/2014

Time:

09:30 AM

Location: Room 301-B, Third Floor, City Hall

The Licenses Committee will consider the following license application:

Class B Tavern. Food Dealer - Restaurant, Extended Hours Establishment, and Public Entertainment Premises License Applications Requesting to Close at 4 AM Thurs-Sat and Requesting Instrumental Musicians, Patrons Dancing, Jukebox, and Karaoke

AGUILAR VILLARREAL, Sonia, Agent Sabor Internacional LLC at 1234 S Cesar E Chavez DR

Please note this application may be recommended for denial based on fitness of the location due to concentration of alcohol beverage outlets in the area. If the application is denied for this reason, no other application for an alcohol beverage license for this location shall be recommended for approval by the Licenses Committee within three years of the date of denial unless the applicant has demonstrated a change of circumstances since the prior denial.

If you have any questions, please call (414) 286-2238.



Wednesday, October 08, 2014



## Licenses Committee Notice of Hearing

Juan Jose Torrijos 1213 S Cesar E Chavez Dr

Milwaukee, WI 53204

Date:

10/20/2014

Time:

09:30 AM

Location: Room 301-B, Third Floor, City Hall

The Licenses Committee will consider the following license application:

Class B Tavern, Food Dealer - Restaurant, Extended Hours Establishment, and Public Entertainment Premises License Applications Requesting to Close at 4 AM Thurs-Sat and Requesting Instrumental Musicians, Patrons Dancing, Jukebox, and Karaoke

AGUILAR VILLARREAL, Sonia, Agent Sabor Internacional LLC at 1234 S Cesar E Chavez DR

Please note this application may be recommended for denial based on fitness of the location due to concentration of alcohol beverage outlets in the area. If the application is denied for this reason, no other application for an alcohol beverage license for this location shall be recommended for approval by the Licenses Committee within three years of the date of denial unless the applicant has demonstrated a change of circumstances since the prior denial.

If you have any questions, please call (414) 286-2238.





1. Premises Location
Free Standing Building Strip Mall Other
2. Describe Premises Structure
Single Story Multi-Story - # of Stories Other
3. Describe Surrounding Area
Commercial Residential Industrial Other
4. Premises Location
a) Major Thoroughfare Secondary Street Other b) Nearest Cross Street 16th Street and Greef eld Aya
5. Proximity of Premises to Church, School, or Hospital
Is there at least 300 feet between the building and any church, school or hospital? Yes \(\Boxed{\text{No}}\) No
6. Miscellaneous Business Questions
a) Proposed Opening Date:
Check all that apply: Prepackaged Food Snacks Appetizers Catered Events
A menu must be submitted with this Plan of Operation for all restaurants.
8. Type of Business
Briefly describe the type of business you plan to operate if granted a license (attach additional sheets as necessary.)  Full Service Festawan  ,

9. Litter and Noise				
How are the grounds kept clean? Sweep Pressure Wash Pick Up Litter Other:				
How often will grounds be cleaned? Daily Weekly Other:				
Grounds Cleaned By: Licensee Building Owner Employees Hired Maintenance Other:				
How are noise issues prevented and/or addressed? Security Manager approaches customer(s) Call Police Signs Posted Other:				
10. Smoking and Sanitation				
Are there designated outdoor smoking areas? No Yes  If yes, describe the area(s) and provide location(s):				
Number of Garbage Cans: Inside: 6 Locations: Kitchen Bartroums Frund Outside: 3 Locations: Rear part of Brilding				
Is a Crowd Control Barrier used? No Yes If yes, describe:				
Describe sanitation facilities (restrooms): LEGR WOMEN I FOR Me W.				
Provide name of solid waste contractor: Rusle Disposar				
11. Security				
Are there parking spaces on the premises? No Yes If yes, number of spaces: and describe security provisions:				
Are there designated loading areas? No Yes If yes, describe security provisions				
Do you have security personnel on the premise? No Yes If yes, how many?				
AND What are their responsibilities?				
What security equipment do they use?				
List their licensing, certification or training credentials:				
Are there security cameras? No Yes If yes, list all locations: Inside and Ovaside				
Are searches and/or identification checks conducted upon entry? Vo Ves If yes, describe:				
12. Percentage of Sales (must total 100%)				
Alcohol 20 % Food Sales 80 % Entertainment % Other %				
13. Businesses On The Premise (choose 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				
☐ Bowling Alley ☐ Hotel ☐ Banquet Hall ☐ Sports Facility  Type 2				
☐ Liquor Store ☐ Corner Store ☐ Supermarket ☐ Convenience Store				
Gas Station Other				
14. Legal Capacity of Premises (Only premises identified as Type I in Question #13)				
(Call the Milwaukee Development Center at 414-286-8211 if you have questions.)				

15. Hours of	Operation					
Proposed Hours of Operation:  Number of  Customers  Potential Age Range  Class B Applicants: Age						
Day of the Week	Open	Close	Customers expected each day	of Customers	Restriction (If none, write 'None')	
Sunday	9 am	12 am	40	1-600	4	
Monday	gam	12 am	35	,1, 0		
Tuesday	9 am	12 am	35			
Wednesday	gam	12 am	40	V		
Thursday	9 am	2 am	SO			
Friday	90 am	2.30 am	65			
Saturday	9 am	2.309m	75	4		
Entertainment Indoo		lcohol beverage establisl on-alcohol establishmen	nment, same as alcohol t 1:00 am Sunday to Th	license hours. ursday; 1:30 am Friday an	d Saturday.	
Entertainment Outdo	oor Closing Hours -10: unl	00 pm Sunday – Thursda ess otherwise approved	y; 12:00 am Friday and by Common Council in l	Saturday, licensee's plan of operation	on.	
16. This Sect	ion to be Com	pleted by Alcoh	ol Applicants (	Only		
a) Property Owners Name: Juan Jose Torrido Phone Number: 414-698-4836 Address: 1213 S Cesar & Charez PrMil narke e ws 53204						
b) Are you taking out this application for anyone that may not be eligible for a license? No Yes  If yes, list name and address:						
		vidual licensee be condu	cting the day-to-day op	erations of the business?	☐ No <b>W</b> es	
c) Will the agent, a partner or the individual licensee be conducting the day-to-day operations of the business?   No 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.  d) Does anyone else have money invested or any other interest inithis business? No Yes						
If yes, explain:						
e) 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:  f) Will any of the following types of businesses be conducted at this location? (check all that apply)						
Bed & Breakfast Billiard/Pool Hall Comedy Club Indoor Golf Facility						
☐Video Game Center(6 or more games) ☐Brew Pub ☐Volleyball Court ☐Theater ☐Wine Tasting Room						
Department Store Pharmacy Gift Shop Museum Center for the Visual & Performing Arts  g) If applying for Class B or C license, are you applying for "Service Bar Only"? No Yes						
g) If applying for Class B or C license, are you applying for "Service Bar Only"? Ves  Service Bar Only means customers cannot sit at the bar. Alcohol is served to patrons seated at tables. No stools, chairs or other articles						
of furniture shall be placed at the service bar for patrons to sit upon.						
17. Proof of Ownership, Lease, or Offer to Purchase (new & transfer applicants only)						
Submit proof of ownership, lease, or offer to purchase the building with this application.						
A lease or office to purchase must:  a) Be in the same legal entity name as that apply for the license						
b) Reflect the sar	b) Reflect the same address as the premises address on this application c) Reflect current dates and					
d) Be signed by the lessor/seller and lease/buyer						

18.	Property Information (new & transfer applicants only)
a)	Do you own or lease the building? Own Lease
b)	Who owns the fixtures (for example, coolers, etc.)? Torrios (C
c)	Are you purchasing the stock and/or fixtures?  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? No Yes
19.	Lease Information (new & transfer applicants who are leasing the premises only)
a)	Date lease begins 8-1-14 Ends 7-31-15
b) c)	Monthly rental \$ 2700. —
d)	Do you have an option to renew the lease?  No <del>Yes</del> 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)?
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 occupancy object to the granting of your license? No Yes
	If yes, explain
	n yes, explain
20.	Change of Agent Applicants Only
<b>20.</b>	Change of Agent Applicants Only
20. Hav	
Hav If no	Change of Agent Applicants Only
Hav If no.	Change of Agent Applicants Only  e there been any changes to the floor plan since the last application was submitted?   No Yes  No App.  App.
Hav If no.	Change of Agent Applicants Only  e there been any changes to the floor plan since the last application was submitted? \( \bar{\text{No}} \) No \( \bar{\text{Yes}} \) Yes  o, a new floor plan is not required. If yes, submit a new floor plan and explain the change(s):  Notarized Signatures of Applicants  RIBED AND SWORN TO BEFORE ME  day of September  day of September  day of September  and Application was submitted? \( \bar{\text{No}} \) No \( \bar{\text{Yes}} \) Yes  Application Application was submitted? \( \bar{\text{No}} \) No \( \bar{\text{No}} \) Yes  Application Application was submitted? \( \bar{\text{No}} \) No \( \bar{\text{No}} \) Yes  Application Application was submitted? \( \bar{\text{No}} \) No \( \bar{\text{No}} \) Yes  Application Application was submitted? \( \bar{\text{No}} \) No \( \bar{\text{No}} \) Yes  Application Application was submitted? \( \bar{\text{No}} \) No \( \bar{\text{No}} \) Yes  Application Application was submitted? \( \bar{\text{No}} \) No \( \bar{\text{No}} \) Application Application was submitted? \( \bar{\text{No}} \) No \( \bar{\text{No}} \) Application Application was submitted? \( \bar{\text{No}} \) No \( \bar{\text{No}} \) Application Application was submitted? \( \bar{\text{No}} \) No \( \bar{\text{No}} \) Application Application was submitted? \( \bar{\text{No}} \) No \( \bar{\text{No}} \) Application Application was submitted? \( \bar{\text{No} \text{No} \) Applicati
Have If no 21.	Change of Agent Applicants Only  e 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):  Notarized Signatures of Applicants
Hav If no  21.  SUBSC	Change of Agent Applicants Only  e there been any changes to the floor plan since the last application was submitted? \( \bar{\text{No}} \) No \( \bar{\text{Yes}} \) Yes  o, a new floor plan is not required. If yes, submit a new floor plan and explain the change(s):  Notarized Signatures of Applicants  RIBED AND SWORN TO BEFORE ME  day of September  day of September  day of September  and Application was submitted? \( \bar{\text{No}} \) No \( \bar{\text{Yes}} \) Yes  Application Application was submitted? \( \bar{\text{No}} \) No \( \bar{\text{No}} \) Yes  Application Application was submitted? \( \bar{\text{No}} \) No \( \bar{\text{No}} \) Yes  Application Application was submitted? \( \bar{\text{No}} \) No \( \bar{\text{No}} \) Yes  Application Application was submitted? \( \bar{\text{No}} \) No \( \bar{\text{No}} \) Yes  Application Application was submitted? \( \bar{\text{No}} \) No \( \bar{\text{No}} \) Yes  Application Application was submitted? \( \bar{\text{No}} \) No \( \bar{\text{No}} \) Application Application was submitted? \( \bar{\text{No}} \) No \( \bar{\text{No}} \) Application Application was submitted? \( \bar{\text{No}} \) No \( \bar{\text{No}} \) Application Application was submitted? \( \bar{\text{No}} \) No \( \bar{\text{No}} \) Application Application was submitted? \( \bar{\text{No}} \) No \( \bar{\text{No}} \) Application Application was submitted? \( \bar{\text{No} \text{No} \) Applicati
Have If no 21.  SUBSO This (Clerk/	Change of Agent Applicants Only  e there been any changes to the floor plan since the last application was submitted? No Yes  o, a new floor plan is not required. If yes, submit a new floor plan and explain the change(s):  Notarized Signatures of Applicants  RIBED AND SWORN TO BEFORE ME  day of September  Agent/Owner/Partner  Notary Public)  Morary Public  Additional Owner/Partner
Have If no 21.  SUBSO This (Clerk/	Change of Agent Applicants Only  e there been any changes to the floor plan since the last application was submitted? No Yes  o, a new floor plan is not required. If yes, submit a new floor plan and explain the change(s):  Notarized Signatures of Applicants  RIBED AND SWORN TO BEFORE ME  day of September  day of September  Agent/Owher/Partner  Notary Public)
Hav If no  21.  SUBSO This (Clerk/ My Co *Nota	Change of Agent Applicants Only  e there been any changes to the floor plan since the last application was submitted? No Yes  b, a new floor plan is not required. If yes, submit a new floor plan and explain the change(s):  Notarized Signatures of Applicants  RIBED AND SWORN TO BEFORE ME  Additional Owner/Partner  Notary Public)  mmission Expires  ry Seal must be affixed.  Note: All information contained in this application is subject to approval by the Common Council.
Hav If no  21.  SUBSO This (Clerk/ My Co *Nota	Change of Agent Applicants Only  e there been any changes to the floor plan since the last application was submitted? No Yes  p, a new floor plan is not required. If yes, submit a new floor plan and explain the change(s):  Notarized Signatures of Applicants  RIBED AND SWORN TO BEFORE ME  Agent/Owner/Partner  Notary Public)  Motary Public  Motary Partner  Motary Public  Motary Pu
Hav If no  21.  SUBSO This (Clerk/ My Co *Nota	Change of Agent Applicants Only  e there been any changes to the floor plan since the last application was submitted? \NoYesNoNoNoNoNoNoNoN
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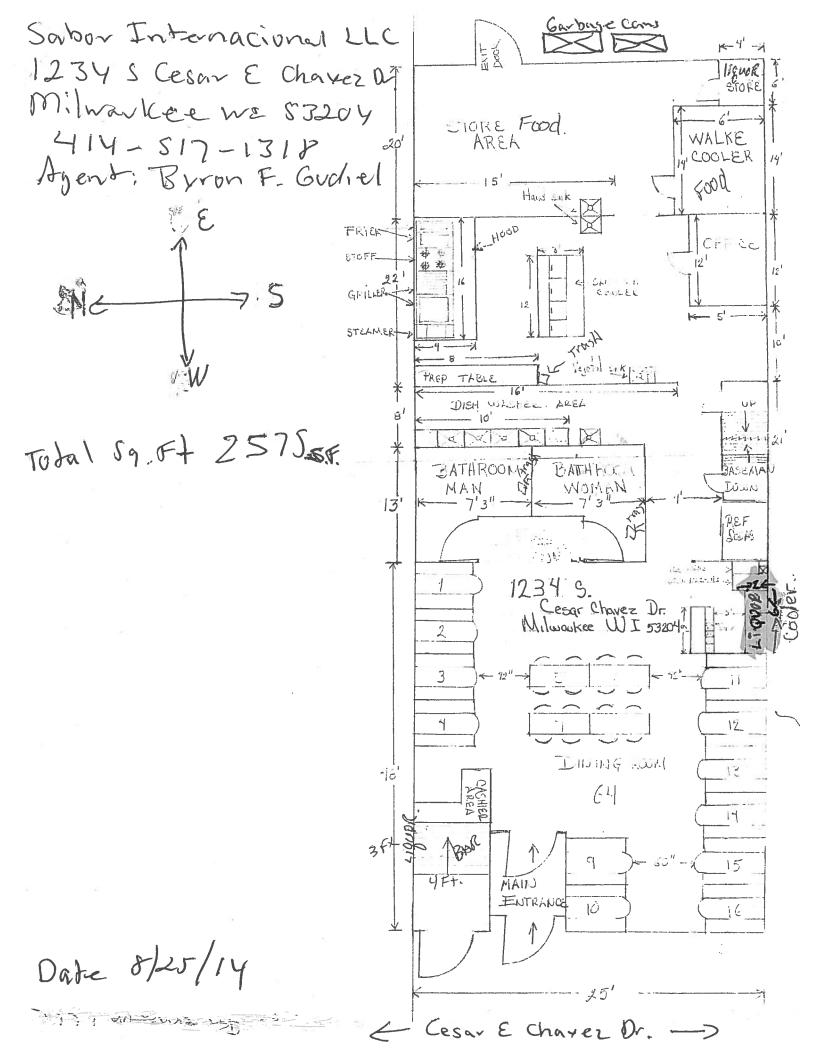


## PUBLIC ENTERTAINMENT PREMISES SUPPLEMENTARY APPLICATION

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

(1) TYPES OF ENTERTAINM	IENT (CHOOSE ALL THAT APPLY				
Instrumental Musicians	Bands	Battle of the Bands	Comedy Acts		
Disc Jockey	☐ Magic Shows	Poetry Readings	Dancing by Performers		
Adult Entertainment/ Strippers/Erotic Dance	Wrestling	Patron Contests	Patrons Dancing		
Jukebox	Karaoke	Bowling Alley How many?	Pool Tables How many?		
Motion Pictures	Amusement Machines –	Concerts	☐ Theatrical Performances		
How many?	How many?	Approx. # per year?	Approx. # per year?		
Other:					
(2) WILL PROMOTERS EVE	R BE USED FOR ANY OF THE ENT	ERTAINMENT?			
No Yes, describe:					
(3) LEGAL CAPACITY OF PR	EMISES				
(Call the Milwaukee Development Center at 414-286-8211 if you have questions.) Your legal capacity will determine the license fee for your Public Entertainment Premise License. If you would like to request that the license be approved with a lower capacity than that listed above, indicate lower capacity					
(4) IDENTIFY IF SOUND AN	IPLIFICATION IS USED				
No Yes, describe:					
(5) DECLARATIONS, ACKNOWLEDGEMENTS, AND DISCLOSURES					
<ol> <li>The undersigned understands 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.</li> <li>The undersigned agrees to inform the City Clerk within 10 days of any substantial changes in the information supplied in this application.</li> <li>The undersigned understands that applicants 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.</li> <li>The undersigned has knowledge of the City Ordinances currently regulating the public entertainment, and understands that the license may be subject to suspension, non-renewal or revocation, if the applicant violates any rule, law or regulation of the city of Milwaukee and State of Wisconsin.</li> </ol>					
(6) NOTARIZED SIGNATURES OF APPLICANTS  THE PROPERTY OF APPLICANTS					
SUBSCRIBED AND SWORN TO BEFORE ME This Standard day of September, 20 4 MOTAS Of Micro Conditional Owner/Partner  (Clerk/Notary Public) My Commission Expires Z 19 17 *Notary Seal must be affixed.  Additional Owner/Partner  WISCONSTITUTE  *Notary Seal must be affixed.					

Office Use Only: Initials: \_\_\_\_ Filed: \_\_\_\_ App #: \_\_\_\_ Permit #: \_\_\_\_ Granted: \_\_\_\_ Issued: \_\_\_



#### City of Milwaukee

### FOOD DEALER SUPPLEMENTAL APPLICATION / FOOD OPERATION PLAN

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

#### 1. Application Type

Indicate the ap	plication type and	complete the corresponding section.			
New app	lication (fee is \$3	00). For new applications, answer questions be	low and then continue on to section 2.		
Is this a s	ls this a simple change of ownership (no change in food operation) or a new establishment?				
Taking over existing operating licensed food business					
New establishment (anything other than a simple change of ownership)					
		of the food establishment			
F	cll Serv	vice Restaurant			
What is t	the anticipated ope	ning date or date of change of ownership:	1/1/14		
evaluatio	on is to assess the s	uitability of a prospective site for use as a food			
Modifica:	tion or amendn	nent to an existing food license or public hea	th approved operational plan. For modifications/amendments to		
existing est	ablishments, both	the operator and establishment cannot be diffe	erent then on existing license or the application is considered new.		
Answer the	two questions belo	ow (including the follow up detail if applicable)	and then continue on to section 2.		
VVIIatiat	Construction or	or building) change(s) are you planning ( <i>check c</i> renovation ( <i>fee is \$200</i> )	II that apply):		
j	Significant equip	oment change without construction or renovation	on (fee is \$50)		
[	Adding an additi	onal site at the same premises where food will	be prepared/processed or sold (fee is \$100 per additional site)		
L	No equipment o	r renovations are being planned			
What ch	anges are being pro	oposed to the food operation or specialized ar	provals are being requested (Note: \$75 operational change fee is		
cnur		if multiple items are checked): anges to the menu including the type or comple	with of food processing (foo is \$75)		
		lescribe proposed changes	exity of food blocessing (see is 575)		
	.1				
	Adding proces	sing when no processing was previously perfor	med, or adding additional types of processing (fee is \$75)		
			code requirements or the review of a specialized process		
		th department approval prior to implementation			
	Indicate	specialized processes/variances requested (che	* * * * *		
		☐ Acidified Rice☐ Bare Hand Contact to Ready to Eat Foods	☐ Sale without Consumer Advisory		
		☐ Curing	<ul> <li>☐ Shellfish - Comingling</li> <li>☐ Shellfish -Display Tanks</li> </ul>		
		☐ Dogs in Outside Dining Areas	☐ Smoking		
		☐ Non-continuous Cooking	☐ Sprouting		
		☐ Peddler Base	☐ Time as a Public Health Control		
		Reduced Oxygen Packaging	☐ Wild Game		
		☐ Other, specify			
	☐ Amending exis	ting license to reflect an increase in annual gro	ss sales or change in food operation (fee is the difference in the		
		the food licenses plus \$25 for transfer fee)	22 area or change in 1000 oberation (see is the dissessed in 106		
☐ No significant changes are being proposed in how food is prepared/processed or substantial menu changes. No addition of					
	specialized pro	ocess or activities requiring approval is being re	quested (no fee)		

2. Premises Description
Will food be prepared or sold at a single or multiple food preparation and/or sale sites:  Single
If multiple sites will be used, how many distinct sites will be used?
List all sites and briefly describe the nature of the food activities at each site:
U 1234 S Tesar & Charcz Dr. Milwarker NE 53204
1) 1234 S sesar & Charez Dr. Milwarker no 53204 Seatin Dinning
Note: Multiple sites may require more than one license or an additional site license depending upon the food activity conducted at any one site.
Indicate where on the premises food will be sold, served, consumed and/or stored: 1 <sup>st</sup> Floor 2 <sup>nd</sup> Floor Rooftop Basement  Other Floor, specify
☐ Other location, specify
Are any outdoor operations planned?   Yes No Unknown  What activities will be conducted outdoors (check all that apply)
☐ Bar ☐ Cooking/grilling
□ Dining – Patio
☐ Dining – Sidewalk ( <i>DPW permit required</i> ) ☐ Storage
☐ Other, specify
Seating provided on site for dining?  Ves  No
If yes, what is the seating capacity both inside and outside? 60
If yes, are there additional banquet facilities other than the main dining area?   Yes No
Total square footage of the establishment (exclude space utilized for other purposes other than food)
/20.000
Annual Gross Food Sales: 124,000. Sales Based on: Previous Year Previous Establishment Dest Estimate  Note: Inspector will request to review receipts periodically to validate if establishment has the appropriate license.
Number of Full Time Employees Number of Part Time Employees
The following items must be included with a new application:
Site Plan/Floor Plan: Site plan must identify the building in relation to streets, sidewalks, parking & garbage area.  Shared Kitchen Agreement, if applicable: If not using your own establishment as your base, provide a written and signed commissary
agreement. The agreement must include a list of all services provided by the commissary, such as restroom use, dry goods storage, use of refrigerator space (including the number of cubic feet of refrigeration space allocated to you), etc.
The following items must be submitted to inspector, prior to approval of inspection.
☐ Floor Plan: The plan must show the location of all equipment (sinks, refrigeration, stoves, ware-washing, etc.), plumbing, electrical services, mechanical ventilation, storage areas and restrooms. Plans must be a minimum of 11 X 14 inches in size including the layout of the floor plan
accurately drawn to a minimum scale of ¼ inch = 1 foot. Plans may be submitted in an electronic format.
☐ Equipment List: Provide the make and model number of all significant equipment (cooking, cooling, warewashing, etc.) All food equipment must be ANSI/NSF certified. No home-style equipment is allowed. Equipment specification sheets do not have to be provided at the time of submission, but must be provided upon Health Department request
☐ Finish Materials List: Provide a list of all finish materials (floors, walls, ceilings, counter tops). Surfaces must be smooth, nonabsorbent and
easily cleanable, and ceramic, porcelain or quarry tile must have set in base cove.  Lighting Plan: Provide a list of all light fixtures to be used in the food establishment. All light used in any food prep or storage areas must be
shielded or covered and flush or integral to the ceiling. Lighting in food preparation area must meet minimum illumination standards defined in the WI Food Code.
Pest Management Plan: Describe the establishments integrated pest management plan. Describe strategies to prevent pest entry into the food establishment & harborage of pests Identify if a licensed pest control service has been contracted, provide the name of the company and

frequency of service.

Any construction, remodeling or equipment changes planned?
Scope of the planned project?  New construction or conversion of an existing structure to be used as a food establishment Renovation/remodeling impacting 300ft <sup>2</sup> or more than of food preparation or display area Renovation/remodeling impacting less than 300ft <sup>2</sup> of food preparation or display area Renovation/remodeling limited to the instillation/change/replacement of food equipment
Provide a brief summary of the proposed construction, remodeling and/or equipment change:
Note: Building permits may be required, contact the Department of Neighborhood Services
Date alterations/changes planned to begin
Contact information for general contractor
Contact information for architect
4. BUSINESS TYPE
Overall Establishment Type ( <i>select the <u>one</u> that best describes the proposed business</i> )
<ul> <li>□ Bed and Breakfast</li> <li>□ Commissary or Mobile Food Peddler Base – a commercial kitchen used for the production of food to be served or sold at another location; a base of operations for a mobile food peddler where the vehicle, cart or unit which is used at a minimum for the service or cleaning of the peddler vehicle, cart or container. A base of operations for a caterer or seasonal market vendor for the preparation of food.</li> <li>□ Community Food Program – free meal site or food pantry. Any site in which all food is provided free of cost to those in need or to organizations who serve person's in need.</li> <li>□ Distiller or Brewer – facilities that are primarily engaged in the production of alcoholic beverages</li> <li>□ Food Distributor – a business that transports food for sale to retail and wholesale establishments and does not perform any processing or repacking of food items</li> <li>□ Is food stored on site □ Yes □ No</li> <li>□ Food Manufacturer - commercial operation that produces, packages, labels, or stores food for human consumption, but primarily does not provide food directly to a consumer, food is sole to distributors, retailers or restaurants, there may be a small store on site where only the manufacturers products are sold, but the majority of product is sold to other licensed food establishments Is there a retail store onsite? □ Yes □ No</li> <li>□ Food Store – a food establishment either mobile or permanent in which the majority of food sales consist of beverages or multiserving food products requiring further preparation prior to consumption, examples of food stores include bakeries, grocery stores, convenience stores, coffee shops, liquor stores. Food stores include business whose primary business is other than food, but offer convenience food items.</li> <li>Are you considered a convenience food store? □ Yes □ No</li> <li>A convenience food store contains less than 5,000 sq ft of retail sales space AND has as its primary business t</li></ul>
School— educational institution including elementary, middle and high schools, technical schools, colleges and university, where food service is limited to students (no sales to faculty or general public)
Restaurant – a food establishment either mobile or permanent in which the majority food sales consist of meals  5. FOOD OPERATION SCOPE
Type of Sales (check all that apply, even if it reflects a small percentage of the proposed business)  Made directly to the general public or end consumer (includes internet sales)  Made to other food establishments (wholesaler, distributors, retail or restaurants) who will resell your product(s)
What percentage of your planned food sales will be meals versus grocery items?
% from meals (ready-to-eat food sold to in single portions)
% from grocery items (multi-serving food products, typically requiring preparation before serving, includes beverages, bakery items and raw produce)

9 <sup>2</sup> •
Will 25% or more of your sales be to highly susceptible populations (defined as persons with medical conditions, elderly, or preschool age children)?  ☐ Yes ☑ No
Will customers be able to purchase food through a drive through? ☐ Yes ☑ No
Will customers be able to purchase food from a self-service salad or food bar? ☐ Yes ☑ No
Will food be prepared on site and then transported for sale or consumption at another location?   Yes No  If yes, check all the reason why the food will be transported  Catering Delivery Base for Mobile Food Peddler Base for temporary or seasonal food stand  Other, specify
6. FOOD, FOOD PREPERATION, FOOD PROCESSING
For restaurants provide a copy of the proposed menu or a detailed menu of all the foods and drinks you will be serving.  For all other establishments provide a summary below of the brief types of food products being sold.
Attached Menv.
Will any potentially hazardous food (food that requires temperature control) be offered for sale? Yes \square No Examples of potentially hazardous foods are meats, dairy, poultry, eggs, cut tomatoes or leafy greens, cut melons, cooked rice, beans or potatoes, or garlic in oil.  Will food be prepared or processed on site? Yes \square No Examples of processing are assembling, grinding, cutting, mixing, baking, grilling, frying, coating, stuffing, packing, bottling, pockaging, canning, extracting, fermenting, distilling, pickling, freezing, drying, smoking.
If yes, indicate the type of food processing that will be conducted:
chicken, Pork, sea food for the preparation of orders.
If performing processing, will there be any processing of potentially hazardous food? Des 🗆 No
7. WEIGHTS AND MEASURES
Will any items be offered for sale by weight or by volume? ☐ Yes ☐ No  If yes, describe number and type of devices used:
A separate weights and measures license is required for each scale.
Will electronic scanning devices be used for pricing/check out?   Yes  No
If yes, how many devices will be used
A scanner license is required if using an electronic scanning device.

8. LITTER/GARBAGE	/NOISE				
What are your plans to kee Sweep Hired Maintenance Other	_	(check all that apply):  Pressure Wash Building Owner's Responsibility		Pick-Up Litter Garbage Cans Outside	
Who is esponsible to keep Licensee Hired Maintenance		g Owner	Employ	/ees	
How often will the grounds Daily	Weekly	,	Other		
How are noise issues addressed (check all that ap    Security		ager approaches customer(s) Call police		lice	
Do you purchase, sell or exc	hange any secondhand article U MUST ALSO APPLY FOR A SE	s of personal property (include CONDHAND DEALER LICENS	ding used cell phor SE.	nes)?	
9. HOURS OF OPERA	TION				
Day of the Week	Proposed Hours (include a.m (if closed on any day Open	. or p.m.)		Drive Thru Hours (if not applicable, write "n/a") Open Close	
Sunday	9:00an		40		
Monday	9: Wan	12:00 am	35		
Tuesday	9:00 am	12:00 am	3 S	\W/ <sub>1</sub>	
Wednesday	9:00 am	12:00 gm	40	X/4/	
Thursday	9: W am	4:00 am	50	X	
Friday	9:00 am	4: Vu an	65		
Saturday	9:00 am	4:00 am	75		
10. ISSUANCE OF LIC					
If yes, what type o □ Class □ Class □ Class □ Class	ing beverages be sold at the es f license do you have or will yo A fermented malt beverage lid A liquor licenses B fermented malt beverage lid B liquor licenses C wine licenses	ou be applying for (check all tenses			
If yes, if your food license is immediately so you can	approved prior to the alcohol open your food business	license, would you like the fo		(check one)	

#### Affirmation of Understanding – Permit Needed to Operate

#### ALL NEW APPLICANTS – PLEASE READ <u>AND INITIAL</u> EACH ITEM CONFIRMING YOUR UNDERSTANDING:

1. $6$ I understand that an inspection and sign off by the Health Department is required before my permit may be issued
<ol> <li>SA I understand that an occupancy permit must be issued and an inspection may be required from the Department of Neighborhood Services before my permit may be issued.</li> </ol>
3. A understand that the Department of Neighborhood Services must sign off on my application with the License Division before my permit may be issued.
4. SA I understand the local council member must approve or deny my request before my permit is eligible to be issued.  If denied, I understand that I may be scheduled for a hearing before the License Committee of the Common Council.
5. She I understand that I must pay and the License Division must have proof of payment for the associated permit fees before my permit may be issued.
6. Sh I understand that all of the above must be complete before my permit is eligible to be issued.
7. I understand that the license/permit for which I am applying must be issued and posted in my business premises prior to opening for business.
I, Soma Aguilar Villaroof, will not operate my food business, until the permit has been issued and posted in
the establishment.  Signature of Applicant: Date: 18/19
Signature of Applicant: // Study Supply Date: 1/1 / 7



#### NEW FOOD DEALER SUPPLEMENTAL APPLICATION / FOOD OPERATION PLAN

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

Establishment Name/Address

1. Application Type Is this a/simple change of ownership (no change in food operation) or a new establishment?
Taking over existing operating licensed food business  New establishment (anything other than a simple change of ownership)
Provide a brief description of the food establishment
What is the anticipated opening date or date of change of ownership: $10-6-14$ (ASAP)
Attach the following to the supplemental application (check if attached)  Site Plan: Site plan must identify the building in relation to streets, sidewalks, parking & garbage area.  Shared Kitchen Agreement, if applicable: If sharing space in a commercial kitchen with another operator, provide a written and signed shared kitchen / commissary agreement. The agreement must include a list of all services provided by the commissary, such as restroom use, dry goods storage, use of refrigerator space (including the number of cubic feet of refrigeration space allocated to you), etc.
2. Construction, Remodeling and Equipment  Any construction, remodeling or equipment changes planned? Yes  No If no, skip to section 3.  Scope of the planned project?  New construction or conversion of an existing structure to be used as a food establishment  Renovation/remodeling of a food establishment, which may or may not include equipment changes  Renovation/remodeling limited to the instillation/change/replacement of food equipment
Provide a brief summary of the proposed construction, remodeling and/or equipment change:  Considering Self-Service pizza + Salad Suffet  Considering installation of Leen Tappens  Note: Building permits may be required, contact the Department of Neighborhood Services
Date alterations/changes planned to begin VIII A Plen opening
Contact information for general contractor
Contact information for architect
The following items must be submitted at the time of application for applications involving construction or remodeling. For renovations involving equipment only, provide an updated equipment list. Check the items included with this application.  Floor Plan: The plan must show the location of all equipment (sinks, refrigeration, stoves, ware-washing, etc.), plumbing, electrical services, mechanical ventilation, storage areas and restrooms. Plans must be a minimum of 11 X 14 inches in size including the layout of the floor plan accurately drawn to a minimum scale of ¼ inch = 1 foot. Plans may be submitted in an electronic format.  Equipment List: Provide the make and model number of all significant equipment (cooking, cooling, warewashing, etc.) All food equipment must be ANSI/NSF certified. No home-style equipment is allowed. Equipment specification sheets do not have to be provided at the time of submission, but must be provided upon Health Department request  Finish Materials List: Provide a list of all finish materials (floors, walls, ceilings, counter tops). Surfaces must be smooth, nonabsorbent and easily cleanable, and ceramic, porcelain or quarry tile must have set in base cove.  Lighting Plan: Provide a list of all light fixtures to be used in the food establishment. All light used in any food prep or storage areas must be shielded or covered and flush or integral to the ceiling. Lighting in food preparation area must meet minimum illumination standards defined in the Wi Food Code.  Other Items, such as a pest management plan, may be required based on a review of the establishment.

3. Premises Description
Will food be prepared or sold at a single or multiple food preparation and/or sale sites: Single  Multiple
If multiple sites will be used, how many distinct sites will be used?
List all sites and briefly describe the nature of the food activities at each site:
pizza, Sandwiches, pasta, vinje, fries, salad
Note: Multiple sites may require more than one license or an additional site license depending upon the food activity conducted at any one site.
Indicate where on the premises food will be sold, served, consumed and/or stored: 1st Floor 2nd Floor Rooftop Basement  Other Floor, specify  Other location, specify
Are any outdoor operations planned?
□ Other, specify
Seating provided on site for dining?  Yes  No  If yes, what is the seating capacity both inside and outside?  Yes  No  If yes, are there additional banquet facilities other than the main dining area?  Yes
Total square footage of the establishment (exclude space utilized for other purposes other than food)
Annual Gross Food Sales:  Sales Based on: Previous Year Previous Establishment Best Estimate  Note: Inspector will request to review receipts periodically to validate if establishment has the appropriate license.  Number of Full Time Employees  Number of Part Time Employees
4. BUSINESS TYPE Overall Establishment Type (select the one that best describes the proposed business)
☐ Bed and Breakfast
☐ Shared Kitchen, Commissary or Mobile Food Peddler Base — a commercial kitchen used for the production of food to be served or sold at another location; a base of operations for a mobile food peddler where the vehicle, cart or unit which is used at a minimum for the service or cleaning of the peddler vehicle, cart or container. A base of operations for a caterer or seasonal market vendor for the preparation of food.
<ul> <li>Community Food Program – free meal site or food pantry. Any site in which all food is provided free of cost to those in need or to organizations who serve person's in need.</li> </ul>
<ul> <li>□ Distiller or Brewer – facilities that are primarily engaged in the production of alcoholic beverages</li> <li>□ Food Distributor – a business that transports food for sale to retail and wholesale establishments and does not perform any processing or repacking of food items</li> </ul>
If distributor, is food stored on site 🗆 Yes 🔻 No
☐ Food Manufacturer - commercial operation that produces, packages, labels, or stores food for human consumption, but primarily does not provide food directly to a consumer, food is sole to distributors, retailers or restaurants, there may be a small store on site where only the manufacturers products are sold, but the majority of product is sold to other licensed food establishments  If manufacturer, is there a retail store onsite? ☐ Yes ☐ No
Food Store — a food establishment either mobile or permanent in which the majority of food sales consist of beverages or multi-serving food products requiring further preparation prior to consumption, examples of food stores include bakeries, grocery stores, convenience stores, coffee shops, liquor stores. Food stores include business whose primary business is other than food, but offer convenience food items.
Are you considered a convenience food store? Yes No  A convenience food store contains less than 5,000 sq ft of retail sales space AND has as its primary business the sale of basic food items and in addition sells household products. Basic food items may include, but are not limited to, milk and dairy products, bread products, prepared sandwiches, frozen entrees, refrigerated food and baby food. Household products may include, but are not limited to, cleaning products, paper products, baby products and pet food
<ul> <li>School – educational institution including elementary, middle and high schools, technical schools, colleges and university, where food         service is limited to students (no sales to faculty or general public)</li> </ul>
Restaurant - a food establishment either mobile or permanent in which the majority food sales consist of meals
☐ Tavern — a food establishment in which food sales are limited to beverages, primarily intoxicating beverages
Establishment Name: Sopranos VIVIA Page 2 of 10

5. FOOD OPERATION SCOPE  Type of sales <i>(check all that apply, even if it reflects a small percentage of the proposed business)</i> Made directly to the general public or end consumer (includes Internet sales)  Made to other food establishments (wholesaler, distributors, retail or restaurants) who will resell your product(s)			
What percentage of your planned food sales will be meals versus grocery items?			
% from meals (ready-to-eat food sold to in single portions)			
% from grocery items (multi-serving food products, typically requiring preparation before serving, includes beverages, bakery items and raw produce)			
Will 25% or more of your sales be to highly susceptible populations (defined as persons with medical conditions, elderly, or preschool age children)? ☐ Yes ☐ No			
Will customers be able to purchase food through a drive through?   Yes No			
Will customers be able to purchase food from a self-service salad or food bar? Yes I No POSCO			
Will food be prepared on site and then transported for sale or consumption at another location?   If yes, check all the reason why the food will be transported  Catering  Delivery  Base for Mobile Food Peddler  Base for temporary or seasonal food stand			
□Other, specify			
6. FOOD, FOOD PREPARATION, FOOD PROCESSING For restaurants provide a copy of the proposed menu or a detailed menu of all the foods and drinks you will be serving. For all other establishments provide a summary below of the brief types of food products being sold.			
The state of the s			
Will any potentially hazardous food (food that requires temperature control) be used or offered for sale?  Examples of potentially hazardous foods are meats, dairy, poultry, eggs, cut tomatoes or leafy greens, cut melons, cooked rice, beans or potatoes, or garlic in oil.  Will food be prepared or processed on site?  Wes   No  Processing defined as any manipulation of food including but and limited to a second line but and line but an			
Examples of potentially hazardous foods are meats, dairy, poultry, eggs, cut tomatoes or leafy greens, cut melons, cooked rice, beans or potatoes, or garlic in oil.			
Examples of potentially hazardous foods are meats, dairy, poultry, eggs, cut tomatoes or leafy greens, cut melons, cooked rice, beans or potatoes, or garlic in oil.  Will food be prepared or processed on site? Tyes  No  Processing defined as any manipulation of food, including but not limited to assembling, grinding, cutting, mixing, baking, grilling, frying, coating, stuffing, packing, bottling, packaging, canning, extracting, fermenting, distilling, pickling, freezing, drying or smoking of food.  If performing processing			
Examples of potentially hazardous foods are meats, dairy, poultry, eggs, cut tomatoes or leafy greens, cut melons, cooked rice, beans or potatoes, or garlic in oil.  Will food be prepared or processed on site? Types  No  Processing defined as any manipulation of food, including but not limited to assembling, grinding, cutting, mixing, baking, grilling, frying, coating, stuffing, packing, bottling, packaging, canning, extracting, fermenting, distilling, pickling, freezing, drying or smoking of food.  If performing processing  Will there be any processing of potentially hazardous food?			
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Examples of potentially hazardous foods are meats, dairy, poultry, eggs, cut tomatoes or leafy greens, cut melons, cooked rice, beans or potatoes, or garlic in oil.  Will food be prepared or processed on site?			
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Examples of potentially hazardous foods are meats, dalry, poultry, eggs, cut tomatoes or leafy greens, cut melons, cooked rice, beans or potatoes, or garlic in oil.  Will food be prepared or processed on site?  \[ \text{Ves} \] No  Processing defined as any manipulation of food, including but not limited to assembling, grinding, cutting, mixing, baking, grilling, frying, coating, stuffing, packing, bottling, packaging, canning, extracting, fermenting, distilling, pickling, freezing, drying or smoking of food.  If performing processing  Will there be any processing of potentially hazardous food?  \[ \text{Ves} \] No  Will raw meat be sold or used in food preparation?  \[ \text{Ves} \] No  If raw meat is to be used/sold, indicate the types of meat that will be used in food preparation or sold on site  Thin meats, poultry, fish, eggs (hamburger; silced meats; fillets; legs; wings)  \[ \text{Ves} \] No  \[ \text{Not Applicable} \]  Thick meats, whole poultry (roast beef; whole turkey, chickens, hams)  \[ \text{Ves} \] No  \[ \text{Not Applicable} \]  Meat which is ground fresh on site (hamburger, sausage, etc.)  \[ \text{Ves} \] No  \[ \text{Not Applicable} \]  If raw meat is to be used/sold, will meat be purchased pre-cut in Individual portions or in larger pieces that will be cut into Individual portions on site?  \[ \text{Individual portions} \] Larger pieces which are portioned on site  \[ \text{Individual portions} \]  Any precooked or ready to eat meats offered for sale?  \[ \text{Ves} \] No  Any prewashed and precut veggies prepared of sold?  \[ \text{Yes} \] No			

6. EOOD, FOOD PREPARATION, FOOD PR Will cold processed foods (salads, sandwiches, vegetable). If yes, are any of the cold processed foods pre	es, sushi) be offered for sale? 🗓 Yes 🛛	No		
Will hot processed foods (soups, stews, rice/noodles, gravy, chowders, casseroles, beans) be offered for sale?				
Will any bakery items which require refrigeration be offered for sale (cream pies, cheesecakes, baked custards/puddings, items containing whipped cream including frosting)  Yes No  If yes, are any of the refrigerated bakery items prepared on site? Yes				
Any frozen dairy desserts (soft serve, ice cream, frozen yogurt, gelato, custard)				
Any refrigerated dairy products (yogurt, milk, eggs, butter, etc.) offered for sale or used in food preparation? 🗹 Yes 🖂 No				
Any garlic in oil used in food preparation?   Yes No				
7: WEIGHTS AND MEASURES  Will any items be offered for sale by weight or by volum  If yes, describe number and type of devices us	e? □ Yes □ No			
in yes, describe number and type of devices us	CU,	t the first the section of the secti		
	,			
A separate weights and measures license is re-	quired for each scale.	and a millionistic statistical states of the		
Will electronic scanning devices be used for pricing/chec	ck out? 🗆 Yes 🖽 No			
If yes, how many devices will be used		, es		
A scanner license is required if using an electron	onic scanning device.			
8: VARIANCES/DEPARTMENT APPROVALS  Department approval of variances to the WI Food Code or local ordinances are required for the activities listed below. If submitted after the license application, a \$75 fee applies. Indicate specialized processes/variances requested with this application (check all that apply):				
☐ Acidification of food such as rice	☐ Fermenting foods	☐ Shellfish - comingling		
Bare hand contact to ready to eat foods	☐ Non-continuous cooking	☐ Shellfish -display tanks		
☐ Bathrooms accessible to the public	☐ Peddler base waiver	☐ Smoking for preservation		
☐ Convenience store safety requirements ☐ Curing	☐ Person in charge	☐ Sprouting		
☐ Dogs in outside dining areas ☐ Other, specify	☐ Reduced oxygen packaging ☐ Sale without consumer advisory	☐ Wild game		
The state of the s	N 1.A	MMM MM MM MMM MMM MMM MMM MMM MMM MMM		
	177			
100 APPL 在1004 图 图 1000 APPL 1000 A	NIMA CARACTERISTICS			
9. ISSUANCE OF LICENSE				
Will any alcohol or intoxicating beverages be sold at the		62		
If yes, what type of license do you have or will you be applying for (check all that apply)?  ☐ Class A fermented malt beverage licenses				
☐ Class A liquor licenses				
☐ Class B fermented malt beverage licenses				
☐ Class B liquor licenses ☐ Class C wine licenses	/ //4/7/			
If yes, if your food license is approved prior to the alcohol license, would you like the food license issued (check one)				
immediately so you can open your food business at the same time as the alcohol license				
CHRAIT THE CODA AL	ONG WITH THE PURINECE LICENS			

SUBMIT THIS FORM ALONG WITH THE BUSINESS LICENSE APPLICATION'S Page 4

11. STATE RESTAURANT LICENSURE CLASSIFICATION - SCORED CRITERIA		
Circle 1 if the answer is yes, circle for each of the criteria that apply.		Abstraction of the s
The restaurant contains a self-service salad or food bar.		Yes / No
The restaurant handles raw poultry, meat or seafood.	the bearing to a	Yes)/No
The seating capacity of the restaurant or operation is 50 or more.		Yes / No
Food is served through a drive through window for food pick-up.	and the state of t	Yes (No)
The restaurant promotes delivery of ready to eat food products to customers.		Yes (No)
Potentially hazardous foods are cooled, reheated or hot or cold held for service longer than 4 hrs.		Yes (No)
Food is prepared in one location and then transported to be served in another location.		Yes /(No
The restaurant contains or uses banquet facilities as well as a main dining area.		Yes /No
Food is served that requires preparation activities such as chopping, dicing, slicing, boiling, cooling, blanching or reheating in order for that product to be served.		Yes No
Number Marked Yes (co		3
Indicate the state level of restaurant complexity by circling the category in which the establishment falls based on the marked yes.	number of ite	ms above
Zero - SIMPLE ( 1-4 - MODERATE 5 or more = COMPLEX		
12. STATE RESTAURANT CLASSIFICATION QUASCORED CRITERIA		Se all
Is the food purchased and received by the restaurant and offered for sale bought in bulk and broken down into individual portions for sale or are items received individually packaged or both?	Bulk  Single Se  Both	rve
Food is not prepared until an order is placed.	`□ Yes	No
Food items are held hot for one meal period or for a maximum of 4 hours, whichever is less.	Yes	□No
Food Preparation is limited to mixing together prepackaged products that do not need to be cooked further except for aesthetic reasons (such as frozen food concentrate or with milk) or to condiment preparation (such as slicing onions or pickles.)	☐ Yes	X No
Any variances to the food code or local ordinance required	☐ Yes	No.
Operational Risk Categorization (check one)  Level 1: Sale limited to non-potentially hazardous pre-package food with no preparation or processing perform Level 2: Sale of PHF/TCS pre-package food with no preparation or processing performed at the establishment Level 3: Preparation and sale of non-potentially hazardous food.  Level 4: Preparation, sale and/or service of PHF/TCS only to order upon a consumer's request.  Level 5: Preparation, sale and/or service of PHF/TCS in advance, in quantities based on projected consumer of that is not sold or served, at an approved frequency.  Level 6: Preparation, sale and service/or service of PHF/TCS in advance, where preparation involves two or me combining potentially hazardous ingredients; thawing; cooking; cooling; reheating; hot holding, cold holding; or from the preparation in the preparatio	emand, and di ore of the follo reezing.	scards food owing steps:
Assigned Inspection Frequency  Risk Categorization Standard  Levels 1 & 2	rs requiring co move any healt	rrection. th department
Establishment Name: Sopianos	ge 8 of 10	

1 77 11

LICENSING CATEGORIZATION - FOR OFFICIAL USE ONLY				
To be completed by the Milwaukee Health Department during plan re	view and pre-inspection			
19. GROSS SALES VERFICATION				
City annual gross sales category: □ < 20,000  DATCP/retail annual gross sales category □ < 25,000	(20,001-200,000 (1) 25,001-999,999	☐ 200,0001-2,000,000 ☐ >2,000,000 ☐ 1,000,000 or more		
Method used to assign category: ☐ .Annual Sales Receipts ☐ .Estimate, specify method	Day or Partial Day Sales R	eceipts   Standard Performance Statistics		
20, LICENSE ASSESSMENT (complete city analstate designation)	on for either restaurant o	rretoil)		
Restaurant	dukens d	alders promise suresidence		
City Designation (select one)		State Designation (select one)		
Exempt / Acad Service Site	\$0	L Exempt		
Community Food Program / Meal Service Site	\$35	L Prepack		
Food processing with less than \$20,000 in gross sales	\$250	Simple		
Food processing with \$20,001 - \$200,000 in gross sales	\$525	Moderate		
Food processing with \$200,001 - \$2,000,000 in gross sales	\$800	Complex		
Food processing with 9200,001 = 92,000,000 in gross sales	\$1,250 61,735			
22,000,000 III gross sales	\$1,725			
CONSIDERAT	TIONS (CHECK ALL THAT A	APPLY)		
Additional sites, specify number	\$100/site	Commissary / Base		
		Caterer Peddler Seasonal		
Manufacturer		School		
DATCP license required, specify	-	Satellite Production		
DATCP license required, specify				
	_			
Retail				
City Designation	to the transmission of the second proof of the second	State Designation		
(select one type, indicate subtype if applicable)		(select one type, indicate subtype if applicable)		
Exempt	\$0	Exempt		
Community Food Program	\$35	Retail Food – No Processing (55)		
Food store with processing (indicate subtype)	A 4 mm	Retail Food – Processing only non PHF		
Less than \$20,000 in gross sales	\$350	Less than \$25,000 in gross sales (NA)		
\$20,001 - \$200,000 in gross sales	\$575	\$25,000 or more (33)		
\$200,001 - \$2,000,000 in gross sales	\$1,325	Retail Food Processing PHF		
Over \$2,000,000 in gross sales	\$2,050	Less than \$25,000 in gross sales (44)		
Food store without any processing (indicate subtype) (55)	del set se	\$25,000 - \$999,999 in gross sales (22)		
Less than \$20,000 in gross sales	\$200	\$1,000,000 or more in gross sales (11)		
\$20,001 - \$200,000 in gross sales	\$300			
\$200,001 - \$2,000,000 in gross sales	\$575			
Over \$2,000,000 in gross sales	\$875			
CONSIDERAT	TIONS (CHECK ALL THAT A			
Commissary / Base	TOTAL TOTAL TANK	Convenience Store		
Caterer Peddler Seasonal		Exempt Nonexempt		
Distributor		Distributor with retail store		
Manufacturer		Manufacturer with retail store		
DATCP license required, specify		DATCP license required, specify		
□ Wholessler				
☐ Wholesaler ☐ DATCP license required, specify				
DATE: neemse required, specify	-			

Establishment Name: SOR NO'S PIZZA



## EXTENDED HOURS ESTABLISHMENT LICENSE SUPPLEMENTAL APPLICATION & PLAN OF OPERATION

ccl-24hr1 7/17/14

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

Legal Entity Name:	InterNacional LUC		
Premise Address:	·	· Milwarter ws. 53204	
TYPE OF BUSINESS	The second contract of	· 111100400PP 102, 532DY	
Check the type of business that best Filling Station Convenience St	describes the business operation (check one): ore	Recording Studio	
	HOURS ESTABLISHMENT LICENSES HELD		
Has the applicant previously been lic limits of the City of Milwaukee? Plea	ensed, or otherwise permitted, to conduct an extended hours se check one: Yes No	establishment at a premises located within the	
BUILDING OWNER			
Provide the name and address (included 1213 5. RESOR	le city, state and zip code) of the building owner: Juan ENAVEZ Dr. Milwauke	Jose Torrisos 1 W. 53204	
What other types of licenses or perm	its do you, or will you, hold at this location? Check all that ap	oply:	
Gas Statio			
Restaurants Only:	estaurants Only:  Restaurants or Personal Service Establishment:		
Legal Occupancy Limit/Capacity	Number of Off-Street Parkin	ng Places ▶ <del>- O</del>	
HOURS OF OPERATION AND NOM	BER OF CUSTOMERS EXPECTED EACH DAY		
For each day of the week	List proposed hours of operation (include a.m. or p.m.)	List number of customers	
Sunday	gam to 12:00 AM	expected	
Monday	90	40 35	
Tuesday			
Wednesday	gam to 12:00 AM	35 4b	
Thursday	0 0 10 - 1	50	
Friday		1 =	
Saturday	gan to 4:00 am	65	
PLANS FOR SECURITY, LITTER AND		1 3	
Who is responsible for keeping the grounds How are the grounds kept clean? Swee How often will the grounds be cleaned?	it the premises: Security Cameras Security Guards Others clean? Security Guards Others Clean? Security Guards Others Camployees Hired Mail Pick Up Litter Searbage Cans Outside Of Daily Security Others  ressed? Security Call police Signs posted Manager appropriate the pressure of the pr	ntenance Other:	
Office Use Only: Initials App#  MPD		Resident 🔲 Copy of Occupancy Permit	
GrantedISSUEd_	Lic# Reissued F	ood license LYes LN/A	



## CITY OF MILWAUKEE OFFICE OF THE CITY CLERK

Wednesday, October 08, 2014

#### **COMMITTEE MEETING NOTICE**

AD 12

RIVERA, Emily, Agent Salas Burgers LLC 807 W Historic Mitchell St

Milwaukee, WI 53204

You are requested to attend a hearing which is to be held in Room 301-B, Third Floor, City Hall on:

#### Monday, October 20, 2014 at 09:30 AM

Regarding:

Your Class B Fermented Malt Beverage and Class C Wine Retailer's License Applications as agent for "Salas Burgers LLC" for "Salas Burgers" at 807 W Historic Mitchell St.

There is a possibility that your application may be denied for one or more of the public reasons: you do not meet the statutory and municipal requirements; the fitness and appropriateness of the location to be licensed and whether the location will create undesirable neighborhood problems (such as disorderly congregations of people, excessive litter, unreasonable noise, and traffic and parking problems), whether or not there is an over-concentration of alcohol beverage establishments in the neighborhood; whether or not you have been charged with or convicted of any felony, misdemeanor, municipal offense or other offense, the circumstances of which substantially relate to the licensed activity; and any other factors which reasonably relate to the public health, safety and welfare. See attached police report and/or written correspondence regarding this application. Please be advised the public will be able to provide information to the committee in person or in writing. The committee will receive and consider evidence regarding the above mentioned criteria. Possible denial because: This proposed location is in an area that has previously been found by the Common Council to be over concentrated with alcohol outlets. Attached is the concentration of alcohol beverage outlets in the area map existing at the time of the determination of the over concentration based on an address of 551 W Becher St. The Licenses Committee will consider concentration of alcohol beverage outlets as one question regarding the suitability of this location to be licensed as an alcohol beverage establishment. You may present evidence supporting your application. One issue that evidence should address is whether the licensure of this location is appropriate in light of the concentration of alcohol beverage outlets.

### 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 in City Hall is available at reduced rates (5 hour limit) at the Milwaukee Center on the southwest corner of East Kilbourn and North Water Street. Parking tickets must be validated in the first floor information booth in City Hall.

PLEASE NOTE: Upon reasonable notice, efforts will be made to accommodate the needs of disabled individuals through sign language interpreters or other auxiliary aids. For additional information or to request this service, contact the Council Services Division ADA Coordinator at (414) 286-2998, Fax - (414) 286-3456, TDD - (414) 286-2025.

Rebecca n. Hill

JIM OWCZARSKI, CITY CLERK

Rebecca N. Grill

**Deputy City Clerk** 

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 Phone: (414) 286-2238 Fax: (414) 286-3057 Email Address: License@milwaukee.gov



## CITY OF MILWAUKEE OFFICE OF THE CITY CLERK

Wednesday, October 08, 2014

#### **COMMITTEE MEETING NOTICE**

AD 12

RIVERA, Emily, Agent Salas Burgers LLC 4279 N 24<sup>th</sup> Pl

Milwaukee, WI 53209

You are requested to attend a hearing which is to be held in Room 301-B, Third Floor, City Hall on:

#### Monday, October 20, 2014 at 09:30 AM

Regarding:

Your Class B Fermented Malt Beverage and Class C Wine Retailer's License Applications as agent for "Salas Burgers LLC" for "Salas Burgers" at 807 W Historic Mitchell St.

There is a possibility that your application may be denied for one or more of the following reasons: you do not meet the statutory and municipal requirements; the fitness and appropriateness of the location to be licensed and whether the location will create undesirable neighborhood problems (such as disorderly congregations of people, excessive litter, unreasonable noise, and traffic and parking problems), whether or not there is an over-concentration of alcohol beverage establishments in the neighborhood; whether or not you have been charged with or convicted of any felony, misdemeanor, municipal offense or other offense, the circumstances of which substantially relate to the licensed activity; and any other factors which reasonably relate to the public health, safety and welfare. See attached police report and/or written correspondence regarding this application. Please be advised the public will be able to provide information to the committee in person or in writing. The committee will receive and consider evidence regarding the above mentioned criteria. Possible denial because: This proposed location is in an area that has previously been found by the Common Council to be over concentrated with alcohol outlets. Attached is the concentration of alcohol beverage outlets in the area map existing at the time of the determination of the over concentration based on an address of 551 W Becher St. The Licenses Committee will consider concentration of alcohol beverage outlets as one question regarding the suitability of this location to be licensed as an alcohol beverage establishment. You may present evidence supporting your application. One issue that evidence should address is whether the licensure of this location is appropriate in light of the concentration of alcohol beverage outlets.

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JIM OWCZARSKI, CITY CLERK

Rebecca N. Grill

Deputy City Clerk

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 Phone: (414) 286-2238 Fax: (414) 286-3057 Email Address: License@milwaukee.gov

Date:09/06/14 Officer: Efrain Cornejo

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

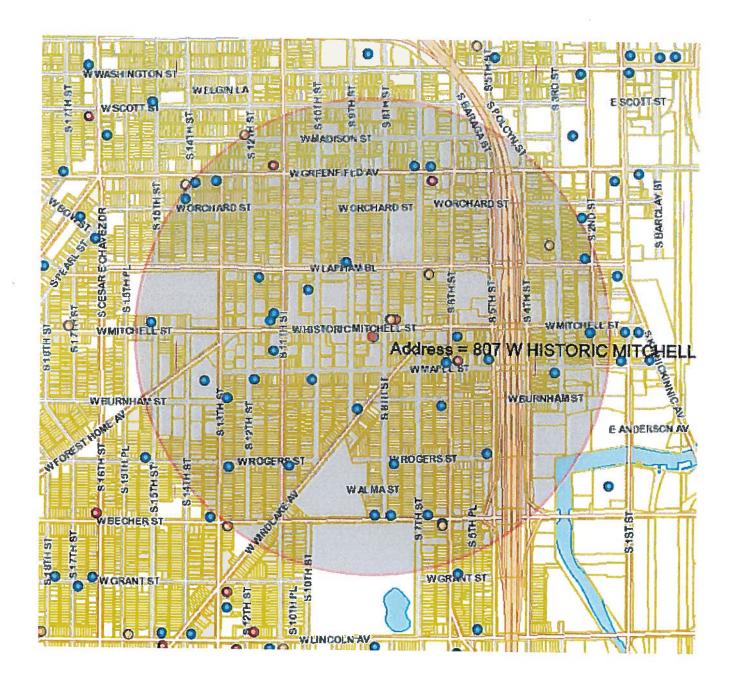
Name of Premise: Address: Phone:	Salas Burgers 807 W Historic Mitchell St (414) 384-3965	
Owner: Owner address: City State Zip: Owner Phone: Owner email:	Salas Burgers LLC 807 W Historic Mitchell St Milwaukee,WI 53204 (414) 384-3965	
Licensee/Agent: Home Address: City State Zip: Phone: Email:	Emily Rivera 4279 N 24 <sup>th</sup> Pl Milwaukee,WI 53209 (414) 841-9074 emilyrivera49@gmail.com	
Preferred contact: Em	ily Rivera	
Location currently op	en: YES NO	
Projected open date: (	9/08/14	
Day's open: S	M □T □W □Th □F □SA ⊠ALL	
Hours of Operation:	Sun: 10A-11P Mon: 10A-11P Tue: 10A-11P Wed: 10A-11P Thu: 10A-11P Fri: 10A-11P Sat: 10A-11P	24 hours □Y ⊠N
Premise Type:	☐Tavern/Bar ☑Restaurant ☐Other:	

Licenses currently held:		
Alcohol:	☐Yes ⊠No Class: #:	
Tobacco:	☐Yes ⊠No #:	
Food:	⊠Yes □No #: 005974	
Other:	Yes No Type: #:	
Other:		
Office.	☐Yes ☒No Type: #:	
Exterior Survey:		
<ol> <li>Is the area around the</li> </ol>	ne location clean? XYes No	
	location? (Check all the apply)	· ·
a. 🔲 Park	(	
b. School		
c. Youth Ce	ntor	
	III.CI	
d. Church	70 1	
	If so, how many	
f. Residenti		
g. ⊠Other bus	inesses	
h. 🔲 Other:		
3. Can you see from th	e outside of the location into the	interior XYes No
4. Can you see the em	ployees inside of the location from	n the outside XVes \ \ \ No
5. Are exterior window	vs free of signage Yes No	if the outside \( \sigma_1 \) is \( \sigma_1 \)
<ol> <li>Street parking ∑Y €</li> </ol>	e No	
7. Is there a parking lo		8
8. Is the parking lot cle		
9. Is the parking lot we		
10. Valet Parking Ye		
	have a guard? Tyes No	
b. Will this lot?	have cameras? □Yes ☒No	
	re a person could conceal themse	lves TYes No
12. Is there exterior ligh	ting? XYes No. Does it apr	pears to be adequate Yes No
13. Exterior Payphone?	Yes No	rears to be adequate 17 tes 1110
	ng Signs posted? Yes No	
15 Are there exterior se	curity cameras Yes No Hov	Ma
16 Are the address num	have receive at least 1 to 1	w Many:
10. Are the address num	bers prominently displayed and e	easy to see XIYes INo
Camana Survivor	.8	
Camera Survey:		
17. Does this location na	ave 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. VCR	☐Yes ⊠No	
d. Recorded	Yes No	
	stored for later viewing:	
21. Are there exterior ca	meras ☐Yes ⊠No How man	<b>1</b> 7*
22. Are there interior can		
	TI TOS KAILO LION IIIMII	y.

23. Do all employees know how to retrieve recorded digital images/footage? Yes No
24. Cameras located in parking lot Yes No How many
Interior Survey:
25. What is the planned/posted capacity 99
26. What is the minimum number of employees that will be on premise 2-3
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?
29. Does an interior camera face the entrance/exit?
30. Are emergency and non-emergency numbers posted near the phone? Yes No
31. 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
y and provided the continuous guitable to this owner.
Security
32. How many security personnel are going to be employed: 0
33. How will they be deployed: Interior 0 Exterior0
34. What days will they be deployed Mon Tue Wed Thu Fri Sat Sun
35. Will the security be managed by business or contracted
36. Will they be armed Yes No
37. What type of security measures will be used:
Wanding/metal detector
☐ ID Scanner
Dress Code
Cover Charge
Age restriction
Other
38. When at capacity, how will the overflow crowd be managed? She stated she doesn't
expect to be at capacity but will monitor.
39. Will a guard monitor the overflow crowd at all times? ☐Yes ☒No

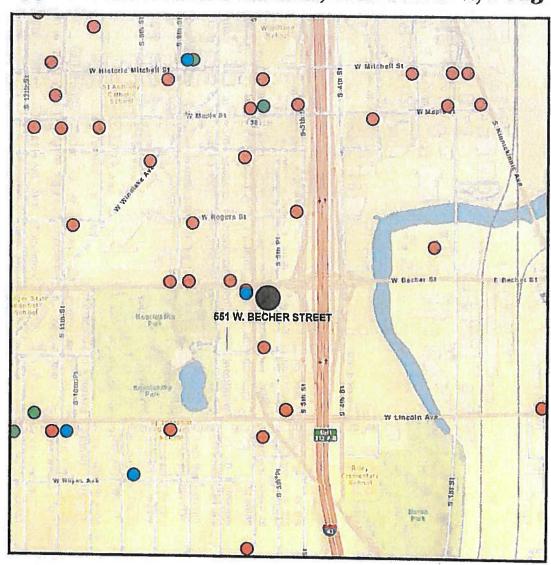
#### ADDITIONAL COMMENTS/RECOMMENDATIONS:

Applicant stated she plans on running a neighborhood restaurant and to be able to serve alcohol to her customers. Applicant stated she does not want to run a club/bar. I observed the business was setup as a restaurant. Applicant was advised to monitor smokers to keep noise down and will put a cigarette butt dispenser for the cigarette butts. She stated in the future she might rent out the place for small parties. Applicant was advised to to make sure her permits and occupany allowed her to host small parties and to apply for a Public Entertainment Permit.



		entered on 807 W Historic Mitchell August 15, 2014					10	all by Lianvendon	
icense Summary	*4.					Total			
lass A Fermente	ed Malt Beverage Retailer's License						4		
lass A Malt & Cl	lass A Liquor License			dieses i			4		
lass B Tavern Lie	cense					34	4		
	T					Grand Total 42			
	Service Special Control of the Contr			1			1		1
xpiration date	Legal entity	Trade name	Licensee	House number	Street direction	Street name	Street type	License type name	Total capacity
Apiration date	Legar entity	Trade fiable	LILENISEE	riouse number	Street unection	Street hallie	Street type		(Otal Capacit
7/25/2015	Amrit's Future LLC	El Paso Foods	a water and a second			l	1	Class A Fermented Malt	
	+		SUKHJINDER SINGH, Agt	1559		3rd	ST	Beverage Retailer's License	+
4/8/2015	BUCKAROO LTD	BRYANT'S COCKTAIL LOUNGE	JOHN M DYE, Agt	1579	5	9TH	ST	Class B Tavern License	
								Class A Malt & Class A Liquor	
	Campesino, LLC	Carniceria El Campesino	Paramjit Singh, Agt	635		GREENFIELD	AV	License	1
	CARNITAS MACHETES	CARNITAS MACHETES	FRANCISCO H LOPEZ, SP	2000		8TH	ST	Class B Tavern License	
<del></del>	Club 6 LLC	Club 6	BLAS CERDA, Agt	2101		6th	ST	Class B Tavern License	
	EL ESCONDITE	EL ESCONDITE	SONIA M FANTAUZZI, SP	1832		13TH	ST	Class B Tavern License	
	EL PAISANO HALL	EL PAISANO HALL	HECTOR SALINAS, SP	807	W	HISTORIC MITCHELL	ST	Class B Tavern License	1
	EL SIETE DE COPAS	EL SIETE DE COPAS	ANTONIO U OCAMPO, SP	1339		7TH	ST	Class B Tavern License	
1/17/2015	Greater Milwaukee Association of the Deaf Inc	Greater Milwaukee Association of the Deaf	JOHN P MURPHY, Agt	1725	S	11th	ST	Class B Tavern License	1
7/29/2015	GUANAJUATO'S BAR	GUANAJUATO'S BAR	FRANCISCO GONZALEZ, SR, SP	1979	S	5TH	ST	Class B Tavern License	1:
								Class A Malt & Class A Liquor	
1/17/2015	JENNY-3, INC	GREENFIELD PANTRY	YAMIRA GOVANI-WILBER, Agt	1110	w	GREENFIELD	AV	License	1.
	Kana Mojito Lounge, LLC	Bamboo Lounge	ANGEL M VELAZQUEZ, Agt	201		Mitchell	ST	Class 8 Tavern License	9
	KOZ'S MINI BOWL, INC	KOZ'S MINI BOWL	CAROL J KOSAKOSKI, Agt	2078		7TH	ST	Class B Tavern License	
	LA CARRETA VIEJA	LA CARRETA VIEJA	ABEL SANTOS, SP	1339		GREENFIELD	AV	Class B Tavern License	2
0/14/2013	DA CARRETA VICIA	LA CARRETA VICIA	ABEL SANTOS, SP	1223	VV	GKEENFIELD	AV		4.
							1	Class A Malt & Class A Liquor	
	LA LUNA LIQUOR, INC	LA LUNA LIQUOR	HANIN K ABDELRAHIM, Agt	552		MAPLE	ST	License	
5/2/2015	LA RAZA SPORTS BAR CORPORATION	LA RAZA SPORTS BAR / RESTAURANT	RICARDO REGALADO, Agt	854	W	WINDLAKE	AV	Class B Tavern License	6
2/26/2015	La Sirenita Bar, LLC	La Sirenita Bar	FRANCISCO MARTINEZ VILLEGAS, Agt	1500	W	MITCHELL	ST	Class B Tavern License	8
								Class A Fermented Malt	
11/4/2014	La Tiendita Quisquella	La Tiendita Quisquella	Deine J De La Rosa, SP	1610	s	7TH	ST	Beverage Retailer's License	
10/15/2014	LOS DOS HERMANOS	LOS DOS HERMANOS	SILVESTRA MUNOZ, SP	1301	W	GREENFIELD	AV	Class B Tavern License	2
6/30/2015	LUPE'S SQUIRREL CAGE	LUPE'S SQUIRREL CAGE	GUADALUPE BERRIOS, SP	1001	w	MAPLE	ST	Class B Tavern License	4
	Lupitas Restaurant, LLC	Lupitas Restaurant	Antonio Hernandez Lopez, Agt	1300		Burnham	ST	Class B Tavern License	
	Manny's Club 69, LLC	Club 69	Manuel Escobar, Agt	1663		11TH	ST	Class B Tavern License	4
0,10,1010			Ivialiaci cacasai, rigi	1003		42111	131		-
c/4.4/2045	AUTOUS LIBOURD AND ALL		\				1	Class A Malt & Class A Liquor	
	MITCHELL BEVERAGE, LLC	SAM'S LIQUOR	RUPINDER KAUR, Agt	732		HISTORIC MITCHELL	ST	License	
11///2014	Mitchell Park 6, LLC	Park 6	Tara A Cavazos, Agt	551	W	Historic Mitchell	ST	Class B Tavern License	9
								Class A Fermented Malt	
	MORELIA'S MARKET, LLC	MORELIA'S MARKET	JOSE F ORTIZ, Agt	2107		6TH	ST	Beverage Retailer's License	
	MULTIVERSE, INC	WOODY'S	PATRICK T HENEY, Agt	1579	S	2ND	ST	Class B Tavern License	9
4/9/2015	PALOMAS PLACE	PALOMAS PLACE	1 JESUS GAMEZ, SP	1905	S	6TH	ST	Class B Tavern License	2
	PARK PLACE SPORTS BAR	PARK PLACE SPORTS BAR	HOWARD J ZANZIG, SP	2079	S	8TH	ST	Class B Tavern License	7
11/8/2014	PEOPLES INN	PEOPLES INN	MARIA M RODRIGUEZ, SP	1139	W	MAPLE	ST	Class B Tavern License	4
5/21/2015	Promociones Nava, LLC	Club El Patron Bar	ESMERALDA NAVA, Agt	2000	S	13th	ST	Class B Tavern License	16
			1					Class A Fermented Malt	
8/3/2015	QUALITY DISCOUNT, LLC	QUALITY DISCOUNT	OMAR A ALI, Agt	738	w	HISTORIC MITCHELL	ST	Beverage Retailer's License	
4/10/2015	QuisQuella Bar LLC	QuisQuella Bar	Deine J De La Rosa, Agt	2078		8th	ST	Class B Tavern License	6
	R & D BEVERAGE CORPORATION	GANONG'S CORNER	DONNA M GANONG, Agt	1400		ORCHARD	ST	Class B Tavern License	2
3/16/2015		RED'S TAP	DAVID G MARTIN, SP	500		MAPLE	ST	Class B Tavern License	4
	RESTAURANTE PUERTO ESCONDIDO	RESTAURANTE PUERTO ESCONDIDO	EPIFANIA J MEDINA, SP	1116		HISTORIC MITCHELL	ST	Class B Tavern License	8
	RICHIE'S PUB	RICHIE'S PUB	RICHARD A DOBS, SP	2000		11TH	ST	Class B Tavern License	2
	SAN JOSE, LLC	CLUB GUADALAJARA	GUILLERMO RODRIGUEZ, Agt	1135		LAPHAM	BL	Class B Tavern License	24
	Siervito Properties LLC			1629					8
	Taqueria Los Altos de Jalisco, Inc.	La Casa Vieja	Byron F Gudiel, Agt			10th	ST	Class B Tavern License	
		Taqueria Los Altos de Jalisco	Juan J Torrijos, Agt	1336		7th	ST	Class B Tavern License	9
	TENTACIONES	TENTACIONES	MARTIN R SAAVEDRA, SP	600		MAPLE	ST	Class B Tavern License	7
10/22/2014	TRISKELE'S, LLC	TRISKELE'S	LYNN M WINTER, Agt	1801	5	3RD	ST	Class B Tavern License	7

### LICENSED ALCOHOL BEVERAGE ESTABLISHMENTS WITHIN A ONE-SQUARE-MILE AREA CENTERED ON 551 W. BECHER STREET, JANUARY 1, 2013



# ALCOHOL BEVERAGE LICENSE SUMMARY CLASS "A" LIQUOR CLASS "A" LIQUOR & MALT CLASS "A" MALT CLASS "A" MALT CLASS "B" BEER CLASS "B" BEER CLASS "B" TAVERN CLASS "B" TAVERN CLASS "C" WINE TOTAL: 43 LICENSES

#### LICENSED ALCOHOL BEVERAGE ESTABLISHMENTS WITHIN A ONE-SQUARE-MILE AREA CENTERED ON 551 W. BECHER STREET, JANUARY 1, 2013

	1		Licence	Expiration	11
Premises	Address		Туре	Date	Establishment Name
2011 S		ST	THE R. P. LEWIS CO., LANSING, MICH. 491-1403-1		HORNY GOAT BREWING
1801 S		ST			TRISKELE'S
1979 S		ST			GUANAJUATO'S BAR
1905 S		ST			PALOMAS PLACE
2101 S		ST			
2107 S		ST			CLUB SIXTH STREET
2178 S		ST	BTAVN		MORELIA'S MARKET
2316 S		ST	BTAVN		CEDAR INN
2497 S		ST		7/0/2013	EL SALVADOR RESTAURANT
2078 S			BTAVN		LA ESQUINA BAR
2000 S		ST			KOZ'S MINI BOWL
2078 S		ST	7.5		CARNITAS MACHETES
		ST	BTAVN		QuisQuella Bar
2079 S		ST			PARK PLACE SPORTS BAR
2366 S		PL			Salas Grocery
1629 S		ST			La Casa Vieja
1725 S		ST		1/17/2014	Greater Milwaukee Association of the Deaf
1801 S		ST		11/26/2013	Taqueria El Local
2000 S		ST			RICHIE'S PUB
	Historic Mitchell	ST		11/7/2013	
	HISTORIC MITCHELL		ALQML	6/14/2013	SAM'S LIQUOR
	HISTORIC MITCHELL			7/23/2013	QUALITY DISCOUNT
	HISTORIC MITCHELL		<b>BTAVN</b>	10/12/2013	EL PAISANO HALL
	HISTORIC MITCHELL	ST	<b>BTAVN</b>	12/19/2013	RESTAURANTE PUERTO ESCONDIDO
	KINNICKINNIC	ΑV	<b>BTAVN</b>	7/26/2013	THE BOTTLE MILWAUKEE
	LAPHAM	BL	<b>BTAVN</b>		CLUB GUADALAJARA
	LINCOLN	AV	<b>BTAVN</b>		BABY BOOMERS
	LINCOLN	ΑV	<b>BTAVN</b>		OLD TOWN SERBIAN GOURMET REST
	LINCOLN	AV	<b>BTAVN</b>	12/12/2013	FIESTA GARIBALDI
	LINCOLN	AV	<b>AMALT</b>	5/16/2013	BEER TOWN
	LINCOLN	AV	<b>BTAVN</b>		TAQUERIA LA SALSA
	LINCOLN	AV	ALQML	6/6/2013	EL LUCERO LIQUOR
1215 W	LINCOLN	AV	ALQML	10/10/2013	A & J POLISH DELI
100 W	MAPLE	ST	BTAVN	11/12/2013	
500 W	MAPLE	ST			RED'S TAP
552 W	MAPLE	ST	ALQML		LA LUNA LIQUOR
600 W	MAPLE	ST			TENTACIONES
1001 W	MAPLE		BTAVN		LUPE'S SQUIRREL CAGE
	MAPLE		BTAVN		PEOPLES INN
	MITCHELL		BTAVN		La Mexicana
	MITCHELL		BTAVN		TRANSFER PIZZERIA CAFE
	MITCHELL		BTAVN	1/14/2013	TRANSFER PIZZERIA CAFE TRANSFER PIZZERIA CAFE
	Mitchell		BTAVN	2/28/2014	Bamboo Lounge
	WINDLAKE		BTAVN	5/2/2013	
		14 A W	SIVAIA	<i><b>31212013</b></i>	LA RAZA SPORTS BAR / RESTAURANT

144923.xls AEH 1/10/2013





# Notice of Public Hearing

RIVERA, Emily, Agent
Salas Burgers at 807 W Historic Mitchell St
Class B Fermented Malt Beverage and Class C Wine Retailer's License Applications

#### Monday, October 20, 2014 at 9:30 AM

To whom it may concern:

The above application has been made by the above named applicant(s). This requires approval from the Licenses Committee and the Common Council of the City of Milwaukee. The hearing before the Licenses Committee will take place on 10/20/2014 at 9:30 AM, in Room 301-B, Third Floor, City Hall. If you wish, you may provide testimony at the hearing regarding the request; see below for further information. You are not required to attend the hearing. Once the Licenses Committee makes its recommendation, this recommendation is forwarded to the full Common Council for approval at its next regularly scheduled hearing. Please review the information below and if you have further questions regarding this process, please contact the License Division at (414) 286-2238.

# 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.

RESIDENT	MAIL ADDRESS	OLTY AND TIP CODE
CURRENT RESIDENT		CITY AND ZIP CODE
		MILWAUKEE, WI 53204-3422
CURRENT RESIDENT		MILWAUKEE, WI 53204-3553
CURRENT RESIDENT		MILWAUKEE, WI 53204-3553
CURRENT RESIDENT		MILWAUKEE, WI 53204-3553
CURRENT RESIDENT	1709 S 8TH ST 4	MILWAUKEE, WI 53204-3553
CURRENT RESIDENT	1709 S 8TH ST 5	MILWAUKEE, WI 53204-3553
CURRENT RESIDENT	1709 S 8TH ST 6	MILWAUKEE, WI 53204-3553
<b>CURRENT RESIDENT</b>		MILWAUKEE, WI 53204-3518
<b>CURRENT RESIDENT</b>		MILWAUKEE, WI 53204-3522
<b>CURRENT RESIDENT</b>		MILWAUKEE, WI 53204-3522
CURRENT RESIDENT		
	806 W HISTORIC MITCHELL ST	MILWAUKEE, WI 53204-3522
CURRENT DESIDENT	200 W HISTORIC MITCHELL ST	MILWAUKEE, WI 53204-3530
CURRENT RESIDENT	809 W HISTORIC MITCHELL ST 1	MILWAUKEE, WI 53204-3531
	809 W HISTORIC MITCHELL ST 2	MILWAUKEE, WI 53204-3531
	810 W HISTORIC MITCHELL ST	MILWAUKEE, WI 53204-3530
	812 W HISTORIC MITCHELL ST	MILWAUKEE, WI 53204-3530
	813 W HISTORIC MITCHELL ST	MILWAUKEE, WI 53204-3531
CURRENT RESIDENT	814 W HISTORIC MITCHELL ST	MILWAUKEE, WI 53204-3530
CURRENT RESIDENT	815 W HISTORIC MITCHELL ST	MILWAUKEE, WI 53204-3531
	830 W HISTORIC MITCHELL ST	MILWAUKEE, WI 53204-3530
	The second second second	WILLY TOTALL, WI 33204-3330

Total Records: 21 Radius: 250.0 feet and Center of Circle: 807 W Historic Mitchell ST

Wednesday, October 08, 2014



# Licenses Committee Notice of Hearing

**HECTOR & MARGARITA SALINAS** 813 W HISTORIC MITCHELL St

MILWAUKEE, WI 53204

Date:

10/20/2014

Time:

09:30 AM

Location: Room 301-B, Third Floor, City Hall

The Licenses Committee will consider the following license application:

Class B Fermented Malt Beverage and Class C Wine Retailer's License Applications RIVERA, Emily, Agent Salas Burgers at 807 W Historic Mitchell St

Please note this application may be recommended for denial based on fitness of the location due to concentration of alcohol beverage outlets in the area. If the application is denied for this reason, no other application for an alcohol beverage license for this location shall be recommended for approval by the Licenses Committee within three years of the date of denial unless the applicant has demonstrated a change of circumstances since the prior denial.

If you have any questions, please call (414) 286-2238.





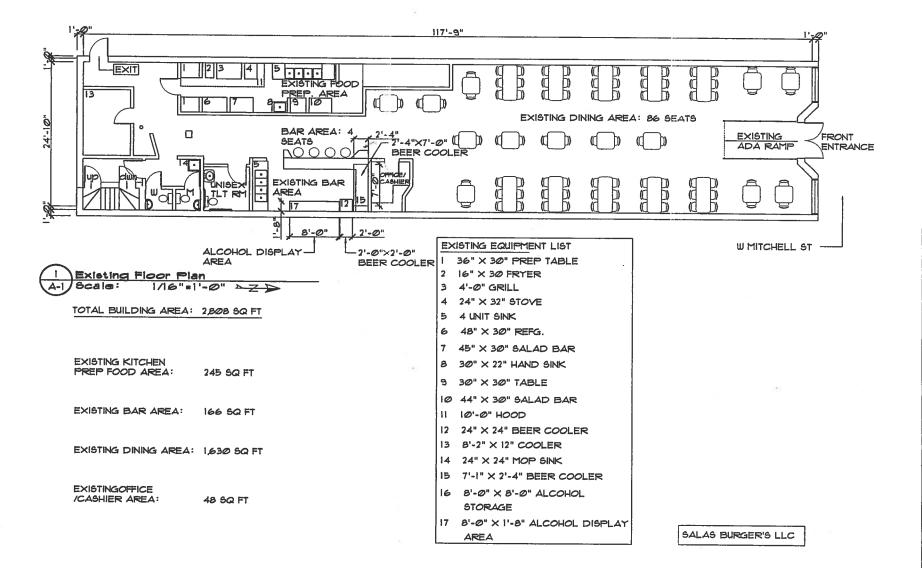
# PLAN OF OPERATION

1. Premises Location
Free Standing Building Strip Mall Other
2. Describe Premises Structure
Single Story Multi-Story - # of Stories Other
3. Describe Surrounding Area
Commercial Residential Industrial Other .
4. Premises Location
a) Major Thoroughfare Secondary Street Other b) Nearest Cross Street Mitchell St - 807 W.
5. Proximity of Premises to Church, School, or Hospital
Is there at least 300 feet between the building and any church, school or hospital? Yes 🗐 No
6. Miscellaneous Business Questions
a) Proposed Opening Date: b) Is this premise under construction? Yes No If yes, list estimated completion date: c) Is this a franchise? Yes No d) Is this premises currently licensed? Yes No If yes, list type of license: e) Is the current licensee operating? Yes No If no, list date closed: f) What other types of licenses/permits will you or do you hold at this location? (check all that apply) Cccupancy Permit Cigarette & Tobacco Gas Station Extended Hours Other: Food Ceal & License g) Do you have future plans for other businesses, licenses or permits at this location? Yes No If yes, explain:
7. Food
Will food be served on the premises? Now Yes If yes, a Food Dealer license is required.  Check all that apply: Reprepackaged Food Snacks Appetizers Catered Events  Full Meals – Hours of Food Service: From O: am To II: opm  A menu must be submitted with this Plan of Operation for all restaurants.
8. Type of Business
Briefly describe the type of business you plan to operate if granted a license (attach additional sheets as necessary.)  Dive in and Take wit.

9. Litter and Noise					
How are the grounds kept clean? Sweep Pressure Wash Pick Up Litter Other:					
How often will grounds be cleaned? Daily Weekly Other:					
Grounds Cleaned By: Licensee Building Owner Employees Hired Maintenance Other:					
How are noise issues prevented and/or addressed? Security Manager approaches customer(s) Call Police  Signs Posted Other: Cameras					
10. Smoking and Sanitation					
Are there designated outdoor smoking areas? No Yes  If yes, describe the area(s) and provide location(s):					
Number of Garbage Cans: Inside: 10 Locations: kitchen, bor, restrooms, diner Locations: behind bldg (1) grobage (1) Recycle					
Is a Crowd Control Barrier used? No Yes If yes, describe:					
Describe sanitation facilities (restrooms): MEN & WOMEN RM AND ADA UNISEX TOILET PL					
Provide name of solid waste contractor: waste managment?					
11. Security					
Are there parking spaces on the premises? If yes, number of spaces: and describe security provisions:					
Are there designated loading areas? III No Tes If yes, describe security provisions					
Do you have security personnel on the premise? No Yes If yes, how many? None Required this is a AND What are their responsibilities?					
What security equipment do they use?					
List their licensing, certification or training credentials:					
Are there security cameras? In No Yes If yes, list all locations: 607 will be INSTALLED unside upon Approval					
Are searches and/or identification checks conducted upon entry? I No Yes If yes, describe:  This is a Ramy or ibuted Restaurant					
12. Percentage of Sales (must total 100%)					
Alcohol <u>25</u> % Food Sales <u>75</u> % Entertainment <u>0</u> % Other %					
13. Businesses On The Premise (choose all that apply):					
Type 1    Full Service Restaurant					
Type 2  Liquor Store Corner Store Supermarket Rub Convenience Store  Gas Station Other Restaurant Bare GRIV					
14. Legal Capacity of Premises (Only premises identified as Type I in Question #13)					
(Call the Milwaukee Development Center at 414-286-8211 if you have questions.)					

15. H	lours of	f Operation				
Day of the Week		Proposed Hour	rs of Operation:	Number of	Potential Age Range	Class B Applicants: Age
Day of t	ine week	Open	Close	Customers expected each day	of Customers	Restriction (If none, write 'None')
Sunday 10:00 Am 11 pm		300	1-60	NONE		
Мо	nday	10:00 AM	TI PM	150-200		
Tue	esday	10:00 AM	llpm	150-200		
Wedr	nesday	10:00 AM	Upm	150-200		
Thui	rsday	10:00 M	Ilpm	150-200	ī	
Fri	iday	10:00 AM	11 pm	150-200		
	urday	10:00 AM	llpm	300		
Entertair	nment Indo	or Closing Hours - If alo	cohol beverage establishon-alcohol establishon-	hment, same as alcohol	license hours. ursday; 1:30 am Friday a	nd Saturday
Entertair	nment Outc	door Closing Hours -10:0	00 pm Sunday – Thursda	y; 12:00 am Friday and	Saturday,	
					licensee's plan of operati	ion.
16. T	his Sec	tion to be Comp	pleted by Alcoh	ol Applicants (	Only	
a) P	The state of the s					
	Address: 813w. Historic Mitchell Milw, WI 53704					
		ing out this application for anyone that may not be eligible for a license N Yes				
		he agent, a partner or the individual licensee be conducting the day-to-day operations of the business?  No !!! 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,						
ti	he person(s	icants: If the agent, a p ) listed above must obta	arther or the individual ain a Class B Managers li	l licensee will not be co cense.	onducting the day-to-day	operations of the business,
		e else have money invest	ted or any other interes	t in this business? 🌉 N	o 🗌 Yes	
	f yes, explaii					
		es. If yes, list name and a		n or any other payment	s based upon income fro	om the business?
				t this location? (check a	all that apply) NoN4	DDDL
	Bed & Bre	eakfast Billiard/Pool I	Hall Comedy Club	Indoor Golf Facility	III tilat abbit)	3 /- [/
_		-		•	ater Wine Tasting Roc	om
	Departme	ent Store Pharmacy	☐Gift Shop☐Museum	Center for the Visu	al & Performing Arts	
g) If	applying fo	or Class B or C license, ar	e you applying for "Serv	vice Bar Only"? 🌉 No [	Yes	
Se	Service Bar Only means customers cannot sit at the bar. Alcohol is served to patrons seated at tables. No stools, chairs or other articles					
of furniture shall be placed at the service bar for patrons to sit upon.						
17. Proof of Ownership, Lease, or Offer to Purchase (new & transfer applicants only)						
Submi	it proof of o	ownership, lease, or offe				meants only,
A lease	e or office to	o purchase must:				
		ne legal entity name as t ame address as the pren				
c) R	Reflect the same address as the premises address on this application Reflect current dates and					
d) B	e signed by	the lessor/seller and lea	ase/huver			

18.	Property Information (new & transfer applicants only)				
a)	Do you own or lease the building? Own Lease				
b)	Who owns the fixtures (for example, coolers, etc.)?				
c)	Are you purchasing the stock and/or fixtures? No 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?   No  Yes				
19.	Lease Information (new & transfer applicants who are leasing the premises only)				
a)	Date lease begins 8-1-14 Ends 7/31/2017  Monthly rental \$ 3000.00				
b)					
c) d)	Do you have an option to renew the lease?  No Yes				
e)	Does your lease allow for assignment to another party without the consent of the owner? No Yes  For what length of time have you been guaranteed occupancy (number of years)?				
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? We No Yes If yes, explain				
g)	Does the present owner or occupancy object to the granting of your license? No Yes				
	If yes, explain				
	Change of Agent Applicants Only				
Hav	Change of Agent Applicants Only  The there been any changes to the floor plan since the last application was submitted?  To, a new floor plan is not required. If yes, submit a new floor plan and explain the change(s):				
Hav If n	re there been any changes to the floor plan since the last application was submitted?				
Have If no	the there been any changes to the floor plan since the last application was submitted? No Reference to the floor plan since the last application was submitted? No Reference to the floor plan since the last application was submitted? No Reference to the floor plan since the last application was submitted?				
Have If no	Notarized Signatures of Applicants  CRIBED AND SWORN TO BEFORE ME  Aday of Application was submitted?  No President No Pre				
Have If no 21.	Notarized Signatures of Applicants  CRIBED AND SWORN TO BEFORE ME  day of  day of  day of  Agent/Oyner/Partner				
Have If no 21.	Notarized Signatures of Applicants  CRIBED AND SWORN TO BEFORE ME  Agent/Oyner/Partner  Notary Public)  Rich Yes Column 18 No Television was submitted?  No Television No Television West Column 18 No Television was submitted?  No Television No Television West Column 18 No Telev				
Have If no I	Notarized Signatures of Applicants  CRIBED AND SWORN TO BEFORE ME  day of  day of  day of  Agent/Oyner/Partner				
Hav If no 21.  SUBSO This (Clerk) My Co *Nota	Notarized Signatures of Applicants  CRIBED AND SWORN TO BEFORE ME  Agent/Oyner/Partner  Agent/Oyner/Partner  Additional Owner/Partner  Additional Owner/Partner  Additional Owner/Partner				
Hav If no 21.  SUBSO This (Clerk) My Co *Nota	Notarized Signatures of Applicants  RIBED AND SWORN TO BEFORE ME  Orange State of Applicants  Agent/Oyner/Partner  Additional Owner/Partner  Notary Public  Ty Seal must be affixed  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				
Have If no I	Notarized Signatures of Applicants  RIBED AND SWORN TO BEFORE ME  Notary Public)  Additional Owner/Partner  Notary Public OF Wishington 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.				
Have If no I	Notarized Signatures of Applicants  RIBED AND SWORN TO BEFORE ME  Orange State of Applicants  Agent/Oyner/Partner  Additional Owner/Partner  Notary Public  Ty Seal must be affixed  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				
Have If no I	Notarized Signatures of Applicants  CRIBED AND SWORN TO BEFORE ME  Agent/Oyner/Partner  Agent/Oyner/Partner  Additional Owner/Partner  Notary Public)  Additional Owner/Partner  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 premise applicants must submit the following:				
Have If no I	Notarized Signatures of Applicants  RIBED AND SWORN TO BEFORE ME  Agent/Oyner/Partner  Additional Owner/Partner  Notary Public)  Additional Owner/Partner  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 premise applicants must submit the following:  Proof of ownership, lease or offer to purchase the building				



# BMF DESIGN GROUP, I Architects - Enginee.

503 West Lincoln Avenu Milwaukee, Wisconsin 532 Phone - (414) 384-2996 Fax - (414) 384-3904

PROJECT
Salas Burger's I
At:
807 W. Historic
Mitchell St
Milwaukee, WI
Owner:
Emily Rivera
414-841-9074

PROJECTNO. 14-

DATE 08/14

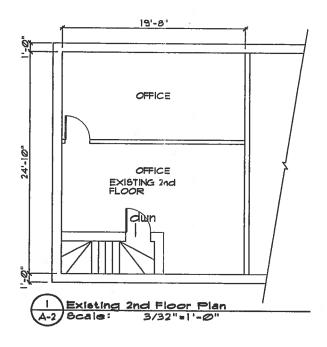
REVISIONS

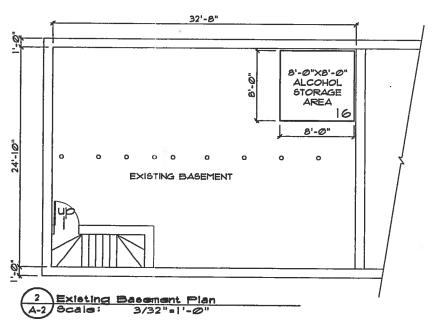
CHECKED BY L.B.

DRAWN BY M.N

SCALE Not to Se

SHEET NO. A-





#### BMI DESIGN GROUP

503 West Lincoln Aven Milwaukee, Wisconsin 53 Phone - (414) 384-299 Fax - (414) 384-3904

Architects - Engine

PROJECT
Salas Burger's At:
807 W. Historic
Mitchell St
Milwaukee, WI
Owner:
Emily Rivera
414-841-9074

PROJECTNO. 14-

DATE 08/14

REVISIONS			
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	H		

CHECKED BY L.B

DRAWN BY M.1

SCALE Not to S

SHEET NO. A-



# CITY OF MILWAUKEE OFFICE OF THE CITY CLERK

Wednesday, October 08, 2014

#### **COMMITTEE MEETING NOTICE**

**AD 12** 

STENSTRUP, Jerome L, Agent STENY'S, INC 800 S 2ND St

MILWAUKEE, WI 53204

You are requested to attend a hearing which is to be held in Room 301-B, Third Floor, City Hall on:

#### Monday, October 20, 2014 at 09:30 AM

Regarding:

Your Class B Tavern and Public Entertainment Premises License Renewal Applications as agent for "STENY'S, INC" for "STENY'S" at 800 S 2ND St.

There is a possibility that your application may be denied for ongainst or the conviction of any felony, misdemeanor, municipal offense or other offense, the circumstances of which substantially relate to the circumstances of the particular licensed activity, on behalf of the licensee, his or her employes, or patrons (if the licensee is a corporation or licensed limited partnership, the conviction of the corporate agent, officers, directors, members or any shareholder holding 20% or more of the corporation's total or voting stock, or proxies for that amount of stock, of any of the offenses enumerated in s. 125.12(2)(ag), Wis. Stats., as amended); the appropriateness of tavern location and premises; neighborhood problems due to management or location; failure of the licensee to operate the premise in accordance with the floor plan and plan of operation submitted pursuant to s. 90-5-1-c.of the Milwaukee Code of Ordinances; and any factors which reasonably relate to the public health, safety and welfare. See attached police report and/or written correspondence regarding this application. Please be advised the public will be able to provide information to the committee in person. The committee will receive and consider evidence regarding the above mentioned criteria.

Notice for applicants with warrants or unpaid fines:

Proof of warrant satisfaction or payment of fines must be submitted at the hearing on the above date and time. Failure to comply with this requirement may result in a delay of the granting/denial of your application.

Failure to appear at this meeting may result in the denial of your license. Individual applicants must appear only in person or by an attorney. Corporate or Limited Liability applicants must appear only by the agent designated on the application or by an attorney. Partnership applicants must appear by a partner listed on the application or by an attorney. If you wish to do so and at your own expense, you may be accompanied by an attorney of your choosing to represent you at this hearing.

You will be given an opportunity to speak on behalf of the application and to respond and challenge any charges or reasons given for the denial. No petitions can be accepted by the committee, unless the people who signed the petition are present at the committee hearing and willing to testify. You may present witnesses under oath and you may also confront and cross-examine opposing witnesses under oath. If you have difficulty with the English language, you should bring an interpreter with you, at your expense, so that you can answer questions and participate in your hearing.

You may examine the application file at this office during regular business hours prior to the hearing date. Inquiries regarding this matter may be directed to the person whose signature appears below.

Limited parking for persons attending meetings in City Hall is available at reduced rates (5 hour limit) at the Milwaukee Center on the southwest corner of East Kilbourn and North Water Street. Parking tickets must be validated in the first floor information booth in City Hall.

PLEASE NOTE: Upon reasonable notice, efforts will be made to accommodate the needs of disabled individuals through sign language interpreters or other auxiliary aids. For additional information or to request this service, contact the Council Services Division ADA Coordinator at (414) 286-2998, Fax - (414) 286-3456, TDD - (414) 286-2025.

JIM OWCZARSKI, CITY CLERK

BY: Rebecca N. Grill

Deputy City Clerk

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

#### MILWAUKEE POLICE DEPARTMENT LICENSE INVESTIGATION UNIT

#### CRIMINAL RECORD/ORDINANCE VIOLATION/INCIDENTS SYNOPSIS

DATE: 09/26/2014

LICENSE TYPE: BTAVN

NFW:

RENEWAL: X

No. 194070

Application Date: 09/09/2014

**Expiration Date:** 

License Location: 800 S 2<sup>nd</sup> St

Business Name: Steny's

Aldermanic District: 12

Licensee/Applicant: Stenstrup, Jerome L

(Last Name, First Name, Mi) Date of Birth: 12/19/1957

Home Address: W212S7354 Annes Wa

City: Muskego

State: WI

**Zip Code:** 53150

Home Phone: (262) 679 - 4935

This report is written by Police Officer Gilbert Gwinn, assigned to the License Investigation Unit, Days.

The Milwaukee Police Department's investigation regarding this application revealed the following:

1. On 03-31-06 at 2:50pm, applicant received a citation for Zoning Violations at 722-34 S 2<sup>nd</sup> St.

Charge:

**Zoning Violations** 

Finding:

**Guilty - Milwaukee Municipal Court** 

Sentence: \$150.00 Date:

10/17/2006

Case#:

06044491

#### **♯ Added disposition to item #1 on 08/30/2007.**

2. On 02/13/2007 at 11:30am, applicant was cited by City of Milwaukee for:

Charge:

**Alterations Without Permit** 

Finding:

Guilty - Milwaukee Municipal Court

Sentence:

\$416.00 penalty

Date:

05/03/2007

Case#:

07022022

#### Page 2 RE: Stenstrup, Jerome L.

- 3. On 12/28/2007 at 1:07am Milwaukee Police responded to a fight complaint at 800 S. 2<sup>nd</sup> Street (Steny's Tavern). Investigation revealed two bar patrons were shouting profanities, threw a beer bottle and were swinging at bar employees and other patrons. These patrons were asked to leave but they refused. Two other bar patrons assisted bar employees in removing the disorderly patrons from the bar. This resulted in the disorderly patrons receiving minor injuries. The patrons that assisted bar employees were no longer on the scene when officers arrived. No citations or incident reports were written.
- 4. On 03/21/2008 at 12:54am Milwaukee Police responded to an armed robbery complaint at S. 2<sup>nd</sup> Street and West National Avenue. Investigation revealed the victim had been robbed at gunpoint after leaving 800 S. 2<sup>nd</sup> Street (Steny's Tavern) and the victim returned to Steny's Tavern in order to use the phone to report the incident to police.

5. On 09/11/10 at 6:07 pm, Milwaukee police conducted a License Premise check at 800 S 2<sup>nd</sup> Street. Officers spoke to the bartender Amber Luedke who provided her bartenders license and the taverns liquor license. No violations were found.

6. On 08/31/12, applicant was convicted of OWI in Milwaukee County. His license was revoked for 6 months.

7. On 07/16/12 at 2:13 am, Milwaukee police were dispatched to 800 S 2<sup>nd</sup> Street for a Battery complaint. Officers spoke to Ryan Stenstrup who stated there was a fight on the outdoor patio area of the tavern. Stenstrup stated he did not observe the fight but did see one patron with a bloody nose. Stenstrup stated the patron did not need medical attention and left prior to police arrival. Police spoke to the caller who stated it was his friend that got beat up and provided police with the suspect's name and last known address. Officers first met with the victim who stated he had made a comment about the music and the that suspect went "nuts" and starting punching him 6 or 7 times in the face. The victim further stated that when he fell to the ground he was then kicked. Officers attempted to contact the suspect several times with no response. Officers mailed the suspect a citation for battery.

- 8. On 03/29/13 at 11:42 pm, Milwaukee police were dispatched to a Fight complaint at 800 S 2<sup>nd</sup> Street. Police spoke with the manager Erik Hinshaw, who stated approximately 8 males while leaving the bar, started an argument with other patrons. Hinshaw stated the argument got heated and that the bouncer at the door got himself between the two groups and separated them. Hinshaw stated he asked the group of 8 men to leave, which they did.
- 9. On 04/11/13 at 12:38 am, Milwaukee police were dispatched to 800 S 2<sup>nd</sup> Street for a Theft complaint. Police spoke to the victim who stated her purse had been stole from the hook hanging on the bar, and that the value of contents totaled more than \$7,000. Police spoke with the manager Brian Wagner who was bartending and stated he did not observe the incident. Police found that the bar's Class B Tavern license, which was provided to police, was expired. A report was filed regarding the theft.

- 10. On 10/19/2013 Milwaukee police, while on routine patrol, heard gunshots while in the 900 block of South 1<sup>st</sup> Street. Investigation revealed there had been an altercation inside Steny's (800 South 2<sup>nd</sup> Street) and the involved parties had been escorted out of the business by employees. Two gunshots were fired shortly after these parties were escorted out, resulting in one of the involved parties being shot in the chest. Milwaukee police incident report #132920032 filed.
- 11. On 11/24/2013 Milwaukee police responded to a Subject with a Gun complaint at 800 South 2<sup>nd</sup> Street (Steny's Bar). Officers discovered a subject inside the bar matching the description of the subject with a gun. Investigation revealed this subject was outside the business standing on the sidewalk when he fired a single shot into the air from a handgun. Officers recovered this handgun from the subject and arrested him. Milwaukee police incident report #133280116 filed.
- 12. On 04/26/2014 Milwaukee police responded to a Battery complaint at St. Mary's Hospital. Investigation revealed the victim was hit in the face with a beer bottle while inside Steny's tavern (800 South 2<sup>nd</sup> Street) on 04/26/2014 around 12:30am. The victim received treatment for a broken nose as well as stitches to his jaw. Milwaukee police incident report #141160039 filed.
- 13. On 09/01/2014 Milwaukee police were advised of a Shooting that occurred at South 2<sup>nd</sup> Street and West National Avenue. Investigation revealed that employees of Steny's Bar, including the cleaning crew, bartenders and the security officer, had completed their duties at the business and were making their way through the parking lot at 124 West National Avenue when they were approached by several males who tried to rob them. This escalated into a shooting resulting in the death of the one of the robbery suspects. Milwaukee police incident report #142440061 filed.

PA-33E (Rev. 3/13)

#### MILWAUKEE POLICE DEPARTMENT

#### REPORT OF INCIDENTS INVOLVING LICENSED PERSONS OR PREMISES

TO: Captain Alfonso MORALES Business Name: Steny's Bar Address of Licensed Premises: 800 S. 2<sup>nd</sup> St District: 2 Business Phone: 414-672-7139 Type of License: Class B Tavern ☐ Violation / ☐ Incident # 13-328-0116 Date of Incident: 11/24/13 Licensee or Manager on premises at time of violation / incident? X Yes No. Licensee cooperative? X Yes No (if no, explain in narrative section) Date: Licensee Notified by Officer: P.O. Gregory BORST Time: 6:30pm 11/24/13 Licensee or Agent's Name: Jerome L. STENSTRUP Date of Birth: 12/19/57 Home Address: 800 S. 2<sup>nd</sup> St, Milwaukee, WI 53204 Home Phone: 414-672-7139 Co-Licensee Name: None Date of Birth: Home Address: **Home Phone:** Class S License Number: Bartender Name: Adam C. PODROMORSKI Date of Birth: 08/29/84 Home Address: 800 S. 2<sup>nd</sup> St, Milwaukee, WI 53204 Home Phone: 414-672-7139 Class D License Number: 0204338 Licensed Person / Public Pass. Vehicle, etc.: None Date of Birth: Home Address: Home Phone: Class D License Number: VIOLATION/INCIDENT - DESCRIBE FACTS AND CIRCUMSTANCES IN NARRATIVE SECTION Name of Person Cited: Richard G. EVANGELISTA Date of Birth: 09/21/85 Citation Number: Violation & Ord. / Statue No.: 941.20(1)(b) **Court Date: Pending** Name of Person Cited: Date of Birth: **Citation Number:** Violation & Ord. / Statue No.: **Court Date:** Name of Person Cited: Date of Birth: Citation Number: Violation & Ord. / Statue No.: Court Date: Name of Person Cited: Date of Birth: Citation Number: Violation & Ord. / Statue No.: Court Date: Name of Person Cited: Date of Birth: **Citation Number:** Violation & Ord. / Statue No.: **Court Date: Investigating Officer:** District / Bureau: Date: **Commanding Officer** Date **DISPOSITION - FOR LICENSING ONLY** Citation No. Case Number **Disposition** Judge **Date** 

This report is written by PO Gregory BORST, District Two, Early shift. On Sunday, November 24, 2013, at 5:50 PM, Sq. 2240 (myself and PO BROCK) was dispatched to 800 S. 2nd St., which is a tavern called "Steny's Bar" for a subject with gun complaint. The caller stated that a white male, possibly Hispanic, wearing all black, had a gun and was shooting it in the air outside of this location. A further description stated he was 5'5" tall, heavy set, light complected, wearing a white t-shirt.

Upon arrival, we walked in thru the front door, and I immediately met with a Hispanic male, about 5'6" tall, light complected, wearing black pants, black hooded sweatshirt, and a white t-shirt. P.O. BROCK grabbed the man by the sleeves of his jacket for my safety and asked him if he had a gun on him. After looking away and not replying for about five seconds, he replied "yes." P.O. BROCK then asked him if he had a CCW permit and he replied "yes." I then disarmed the man, recovering a Smith & Wesson, .380 sub-compact pistol from the man's right side. The man then retrieved his WI ID card and WI CCW permit (#194200), he was identified as Richard G. EVANGELISTA (w/m, 9/21/85).

While speaking with him, I could smell a heavy odor of alcohol, and his speech was very slurred. I believe he was drunk at this time. I then walked outside with EVANGELISTA, who was not handcuffed, and he began to explain that he was approached by an unknown black male who engaged him in conversation to the effect that EVANGELISTA felt threatened. EVANGELISTA somewhat elaborated that the black male made racial slurs to him, saying this was his neighborhood and that he (EVANGELISTA) did not belong here because he is Mexican. EVANGELISTA said he shot once in the air with his gun to scare the man away. It should be noted that as I spoke with EVANGELISTA, his version of events was not consistent, most notably the number of black males he encountered. He would say "that guy" and "those guys" back and forth, and never really articulated how many men confronted him, despite me asking that direct question.

EVANGELISTA also stated, "I'm drunk, but I'm not going to let some guy talk to me like that." EVANGELISTA stated he was on the sidewalk on the north side of the building when this occurred, however his story was changing and evasive. A single casing was found just outside the front door of the bar, and it matched the color, caliber, and manufacturer of the bullets in the gun taken from EVANGELISTA. Also, the magazine in his gun was almost full, with room for one bullet in the magazine.

The entrance to the bar faces northwest, at the southeast corner of S. 2nd St. and W. National Ave. It should be noted that this intersection is a high traffic area at all times of the day with the number of stores and taverns in the area, and with W. National Ave. being a major thoughroughfare on Milwaukee's south side. Also, the Green Bay Packers football game was on today from Noon until about 4:00 PM. This bar is typically busy for football games and the bar tends to stay busy after the game. The temperature at this time was about 22 degrees, which I belive is the primary reason not many people were walking around outside. Inside the bar, the music was playing very loud, to the point I had to yell to communicate with people inside, and had to lean towards people to hear what they were saying.

I spoke to the manager, Adam C. PODROMORSKI (w/m, 08/29/84), on scene who stated he did not remember seeing EVANGELISTA during the day because it was busy in the bar. Another bartender, Rachel A. CORNILS (w/f, 06-27-85) noted that just before our arrival, EVANGELISTA came to the bar for a drink and she refused to serve him because she could tell he was intoxicated.

EVANGELISTA was then arrested for possessing a gun while intoxicated, and for discharging a firearm next to an occupied building. He was conveyed to District Two for processing. While in the

cell block at District Two, EVANGELISTA stated "I shot that gun off an hour and a half before you got there, I could have killed 20 people in the bar before you got there. I'm going to sue you and the bar."

Sq. 865, PO ERVING, attempted to conduct a breath test with EVANGELISTA on the Intoxilyzer machine. EVANGELISTA gave four futile attempts to blow into the machine, resulting in a refusal. EVANGELISTA stated we wanted him to "blow dirty" so he could not sue us. EVANGELISTA continued to rant on and on about how he would sue the bar for calling on him for firing the gun. I then told EVANGELISTA that the bar did not call, and no one I talked to into in the bar heard a gunshot. I then said it was likely that someone outside the bar called. EVANGELISTA stated "That's impossible. No one else was out there!"

Respectfully Submitted,

Officer Gregory BORST

PA-33E (Rev. 3/13)

13) MILWAUKEE POLICE DEPARTMENT REPORT OF INCIDENTS INVOLVING LICENSED PERSONS OR PREMISES.

	10: Captain Alfonso	MORALES			·	e <u> </u> =
	Business Name: Steny' Address of Licensed Pre Business Phone: 414-6	emises: 800 S, 2 <sup>nd</sup> St	Type of License: Class B Ta	vern License	<b>O</b> i	istrict: 2
	☐ Violation / ☒ Incide	nt # 14-116-0039	Date of Incident: 04-2	26-14		
	Licensee or Manager on	premises at time of violat	ion / incident? X Yes No			
		Yes No (if no, exp				
	Licensee Notified by Offi		·	Date: 04	4-27- Time:	12:20am
	Licensee or Agent's Nam Home Address: W212S	ne: STENSTRUP, Jero 17354 Ames Way, Mu	ome L. skego WI		Date of Birth: 12 Home Phone: 4	
	Co-Licensee Name: Home Address: Class S License Number			(,	Date of Birth: Home Phone:	6
*	Bartender Name: STEN Home Address: 802 S. Class D License Number	2 <sup>nd</sup> St. Milwaukee WI			Date of Birth: 11 Home Phone: 41	
nraw	Licensed Person / Public Home Address: Class D License Number				Date of Birth: Home Phone:	
	VIOLATION/IN	NCIDENT - DESCRIB	E FACTS AND CIRCUMST	ANCES IN N	ARRATIVE SE	CTION
	Name of Person Cited: Citation Number:		tion & Ord. / Statue No.:		Date of B	irth:
	Name of Person Cited: Citation Number:	Viola	tion & Ord. / Statue No.:		Date of Bi Court Dat	
	Name of Person Cited: Citation Number:	Violat	tion & Ord. / Statue No.:		Date of Bi Court Dat	
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	Name of Person Cited: Citation Number:	Viola	tion & Ord. / Statue No.:		Date of Bi Court Dat	
	Investigating Officer. P.	O. Richard BLAHA	CLL BOBANDistrict / Bure	eau: 23	Date: <b>04</b> -	27-14
	C	ommanding Officer			Date	
	Citation No.	Case Number	OSITION — FOR LICENSING O  Disposition	Jud	dge	Date
		ICENSE INVESTIG	GATION UNIT			
	R	ef <del>erred</del>				
	B	SAILA				<del></del>

This report is written by P.O. Richard BLAHA, assigned to District Two, Late Shift.

On Saturday, April 26, 2014, at 5:54am, I, squad 2320, was dispatched to a battery complaint at St. Mary's Hospital 2323 N. Lake Dr., in the City and County of Milwaukee. The battery occurred at Steny's Tavern 800 S. 2nd St., in Milwaukee.

Upon arrival I spoke with the victim, (identified as Kristopher N. OLSEN, w/m, 10-17-89), who stated he was inside Steny's tavern on 04-26-14, at approximately 12:30am. OLSEN stated that he asked Hector L CASAS Jr. (w/m, 07-02-86) a question. CASAS replied and OLSEN looked in another direction, when out of the corner of his left eye, he saw CASAS Jr. smash a beer bottle on his nose, causing it to shatter. OLSEN stated it happened quickly, and he was not able to react. OLSEN stated security was able to stop the altercation, and escorted both of them outside the tavern. CASAS Jr. fled the scene in an unknown direction, and his friends who witnessed the altercation, (Trevor A. NETTLES, w/m, 04-03-87, and James I. ALDER, w/m, 02-23-91), took OLSEN to St. Mary's hospital, in NETTLES vehicle. I observed OLSEN'S shirt and pants what appeared to be covered in dried blood at St. Mary's hospital. OLSEN received a broken nose and 11 stitches in his nose naval cavity, and 3 stitches to his lower jaw. There was no call for police, or an ambulance at Steny's on 04-26-14, regarding this incident

I spoke with Ryan J STENSTRUP, (w/m, 11-23-86) who was the bar tender at Steny's on 04-26-14. STENSTRUP has a class D operator's license. STENSTRUP stated he was aware of the incident that took place at approximately 12:30am on 04-26-14. STENSTRUP stated he knew a beer bottle was broken, but he didn't observe the fight. STENSTRUP stated later during the night he was told there was a lot of blood outside where one person involved in the altercation was escorted.

PA-33E (Rev. 10/08)

## MILWAUKEE POLICE DEPARTMENT

#### REPORT OF INCIDENTS INVOLVING LICENSED PERSONS OR PREMISES

#### TO: Captain Alfonso MORALES

والمراكب والمستطاعة والمتنابا

ORIGINAL Business Name: Steny's Inc. Address of Licensed Premises: 800 S. 2nd St. District: 2 Business Phone: 414-672-7139 Type of License: Class B ☐ Violation / ☐ Incident # 13-292-0032 Date of Incident: 10/19/13 Licensee or Manager on premises at time of violation / incident? 🛛 Yes 🔲 No Licensee cooperative? Yes No (if no, explain in narrative section) Licensee Notified by Officer: P.O. Lisa PURCELLI Date: 10/19/13 Time: 3:00am Licensee or Agent's Name: Ryan STENSTRUD Date of Birth: 11/23/86 Home Address: 800 S. 2<sup>nd</sup> St. Home Phone: 414-672-7139 City, State and Zip code: Milwaukee, WI 53204 Co-Licensee Name: Date of Birth: Home Address: **Home Phone:** City, State and Zip code: **Bartender Name:** Date of Birth: Home Address: Home Phone: City, State and Zip code: Licensed Person (Public Pass. Veh. Oper., etc): Date of Birth: Home Address: **Home Phone:** City, State and Zip code: <u>VIOLATION/INCIDENT -- DESCRIBE FACTS AND CIRCUMSTANCES IN NARRATIVE SECTION</u> Name of Person Cited: Date of Birth: Citation Number: Violation & Ord. / Statue No.: Court Date: Name of Person Cited: Date of Birth: Citation Number: Violation & Ord. / Statue No.: Court Date: Name of Person Cited: Date of Birth: Citation Number: Violation & Ord. / Statue No.: Court Date: Name of Person Cited: Date of Birth: Citation Number: Violation & Ord. / Statue No.: **Court Date:** Name of Person Cited: Date of Birth: Citation Number: Violation & Ord. / Statue No.: **Court Date:** Investigating Officer: P.O. Lisa PU District / Bureau: 2 Date: 9/25/14 Commanding Officer Date DISPOSITION/= FOR LIU ONLY Citation No. **Case Number** Disposition Judge **Date** 

#### NARRATIVE SECTION:

This report was written by P.O. Lisa PURCELLI assigned to Squad 2341 with P.O. Jeremy GONZALEZ at District Two, Late Shift.

On Saturday, October 19, 2013 at 2:07 a.m., we were on patrol in the 900 block on S. 1st St. heading northbound, when we heard two gunshot sounds. Our investigation determined that they occurred at 811 S. 2<sup>nd</sup> St., and as a result, Scliberto Saavedra (W/M, 12/26/82) was shot in the right side of his chest. Upon interviewing Kathryn M. Junius (W/F, 10/9/90), a waitress at Steny's, she stated there had been an argument inside the tavern between Saavedra and the suspects. She recognized that it had turned into a physical altercation, and one of them was bleeding profusely. She stated the employees escorted all of the subjects outside. Shortly after they all went outside, she went back inside and then heard the gunshots. She stated she did not see who did the shooting.

While on scene, I spoke to Ryan Stenstrup (W/M, 11/23/86) who stated he was a part owner of Steny's Tavern. He assisted me with reviewing the video surveillance from inside and outside of the tavern. Stenstrup was cooperative during the entire investigation, which lasted several hours.

This incident is related to CAD #13-292-0277

## MILWAUKEE POLICE DEPARTMENT

REPORT OF INCIDENTS INVOLVING LIGENSED PERSONS OR PREMISES

TO: Captain Alfonso MORALES Business Name: Steny's Address of Licensed Premises: 800 S. 2<sup>nd</sup> St. District: 2 Business Phone: 414-672-7139 Type of License: Class B ☐ Violation / ☐ Incident # 142440061 Date of Incident: 09/01/2014 Licensee Notified by Officer: P.O. Guadalupe VELASQUEZ Date: 09/19/14 Time: 12:30 p.m. Licensee or Agent's Name: Jerome L. Stenstrup Date of Birth: 12/19/57 Home Address: W212 S7354 Anne's Way, Muskego, 53150 Home Phone: 262-679-4935 Co-Licensee Name: Date of Birth: Home Address: Home Phone: Class S License Number: **Bartender Name:** Date of Birth: Home Address: Home Phone: Class D License Number: Licensed Person / Public Pass. Vehicle, etc.: Date of Birth: Home Address: Home Phone: Class D License Number: VIOLATION/INCIDENT - DESCRIBE FACTS AND CIRCUMSTANCES IN NARRATIVE SECTION Name of Person Cited: Date of Birth: Citation Number: Violation & Ord. / Statue No.: Court Date: Name of Person Cited: Date of Birth: Citation Number: Violation & Ord. / Statue No.: **Court Date:** Name of Person Cited: Date of Birth: Citation Number: Violation & Ord. / Statue No.: **Court Date:** Name of Person Cited: Date of Birth: Citation Number: Violation & Ord. / Statue No.: **Court Date:** Name of Person Cited: Date of Birth: Citation Number: Violation & Ord. / Statue No.: Court Date: P.O. Galet 6 Investigating Officer: P.O. Guadalupe VELASQUEZ District / Bureau: 22 Date: 09/19/14 Commanding Officer **DISPOSITION - FOR LICENSING ONLY** Citation No. **Case Number** Disposition Judge Date

#### PA-33E Narrative

This report is written by P.O. Guadalupe VELASQUEZ, assigned to District 2, Early Shift, Community Prosecution Unit.

On Monday, September 01, 2014, at 5:38 a.m., Milwaukee Police Department was advised of a shooting complaint at S. 2<sup>nd</sup> St. and W. National Av. Investigation revealed that the shooting incident occurred at 124 W. National Av., the Steny's Parking Lot. It was determined that the Steny's cleaning crew/ bartenders and the security officer had finished their cleaning duties and as they made their way into the parking lot several black males attempted to rob them. The incident escalated to a shooting that resulted in the death of one of the robbery suspects.

I contacted Mr. Stenstrup and advised him a PA-33 would be filed.





# Notice of Public Hearing

# STENSTRUP, Jerome L, Agent STENY'S at 800 S 2ND St

Class B Tavern and Public Entertainment Premises License Renewal Applications

#### Monday, October 20, 2014 at 9:30 AM

To whom it may concern:

The above application has been made by the above named applicant(s). This requires approval from the Licenses Committee and the Common Council of the City of Milwaukee. The hearing before the Licenses Committee will take place on 10/20/2014 at 9:30 AM, in Room 301-B, Third Floor, City Hall. If you wish, you may provide testimony at the hearing regarding the request; see below for further information. You are not required to attend the hearing. Once the Licenses Committee makes its recommendation, this recommendation is forwarded to the full Common Council for approval at its next regularly scheduled hearing. Please review the information below and if you have further questions regarding this process, please contact the License Division at (414) 286-2238.

# 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.

RESIDENT	MAIL ADDRESS	CITY AND ZIP CODE
A STATE OF THE PARTY OF THE PAR	122 W NATIONAL AVE	MILWAUKEE, WI 53204-1807
	124A W NATIONAL AVE	MILWAUKEE, WI 53204-1807
<b>CURRENT RESIDENT</b>		MILWAUKEE, WI 53204-1860
<b>CURRENT RESIDENT</b>	218 W WALKER ST	MILWAUKEE, WI 53204-1860
<b>CURRENT RESIDENT</b>	714 S 2ND ST 1	MILWAUKEE, WI 53204-1882
<b>CURRENT RESIDENT</b>	714 S 2ND ST 2	MILWAUKEE, WI 53204-1882
<b>CURRENT RESIDENT</b>	714 S 2ND ST 3	MILWAUKEE, WI 53204-1882
<b>CURRENT RESIDENT</b>	714 S 2ND ST 4	MILWAUKEE, WI 53204-1882
CURRENT RESIDENT	736 S 3RD ST	MILWAUKEE, WI 53204-1806
CURRENT RESIDENT		MILWAUKEE, WI 53204-1804
CURRENT RESIDENT	739 S 2ND ST	MILWAUKEE, WI 53204-1804
CURRENT RESIDENT		MILWAUKEE, WI 53204-1821
CURRENT RESIDENT		MILWAUKEE, WI 53204-1822
CURRENT RESIDENT		MILWAUKEE, WI 53204-1827
CURRENT RESIDENT		MILWAUKEE, WI 53204-1822
CURRENT RESIDENT		MILWAUKEE, WI 53204-1827
CURRENT RESIDENT		MILWAUKEE, WI 53204-1816
CURRENT RESIDENT		MILWAUKEE, WI 53204-1822
CURRENT RESIDENT		MILWAUKEE, WI 53204-1821
CURRENT RESIDENT		MILWAUKEE, WI 53204-1821
CURRENT RESIDENT		MILWAUKEE, WI 53204-1827
CURRENT RESIDENT		MILWAUKEE, WI 53204-1827
CURRENT RESIDENT		MILWAUKEE, WI 53204-1827
CURRENT RESIDENT		MILWAUKEE, WI 53204-1827
CURRENT RESIDENT		MILWAUKEE, WI 53204-1822
CURRENT RESIDENT		MILWAUKEE, WI 53204-1816
CURRENT RESIDENT		MILWAUKEE, WI 53204-1822
CURRENT RESIDENT	839A S 2ND ST	MILWAUKEE, WI 53204-1822

Total Records: 29
Radius: 250.0 feet and Center of Circle: 800 S 2nd ST

2014-2015 Plan of Operation for 800 S 2ND ST

1. Litter and Noise					
How are the grounds kept clean? X Sweep Pressure Wash X Pick Up Litter Other:					
How often will grounds be cleaned? XDaily Weekly Other:					
Grounds Cleaned By: Licensee Building Owner Employees Hired Maintenance Other:					
How are noise issues prevented and/or addressed? Security Manager approaches customer(s) Call Police  Signs Posted Other:					
2. Smoking and Sanitation					
Are there designated outdoor smoking areas? No 🗵 Yes  If yes, describe the area(s) and provide location(s): Outside beer gardem in rear of establishment.					
Number of Garbage Cans: Inside: 6 Locations: behind bar Outside: 2 Locations: beer garden					
Is a Crowd Control Barrier used? 🔀 No 🗌 Yes If yes, describe:					
Describe sanitation facilities (restrooms): men and women separate facilities inside bar facility					
Provide name of solid waste contractor:					
3. Security					
Are there parking spaces on the premises? No 🛽 Yes If yes, number of spaces: 22 and describe security provisions:					
Are there designated loading areas? 🗵 No 🗌 Yes If yes, describe security provisions					
Do you have security personnel on the premise? No 🗵 Yes If yes, how many? DA 24111					
AND What are their responsibilities? checking patrons for identification					
What security equipment do they use?					
List their licensing, certification or training credentials:					
Are there security cameras? No X Yes If yes, list all locations: <u>inside bar area</u>					
Are searches and/or identification checks conducted upon entry? No X Yes If yes, describe: By door man as needed					
4. Percentage of Sales (must total 100%)					
Alcohol 67 % Food Sales 33 % Entertainment 9 % Other 9 %					
5. Businesses On The Premise (choose all that apply):					
▼ Full Service Restaurant					
☐ Night Club ☐ Tavern ☐ Cocktail Lounge ☐ Teen Club					
Bowling Alley Hotel Banquet Hall Sports Facility					
Liquor Store Corner Store Supermarket Convenience Store					
Gas Station Other					
6. Hours of Operation and Age Restriction					
Are there any changes to the current hours of operation or age restriction? XX No Yes If yes, describe					
Please Note: If you will be open earlier or later than the hours listed on your current license for even one event or holiday (for example, St. Patrick's Day, Brewers Opening Day, etc.) during the license period, this must be reported and printed on your license.  Your hours of operation and age restriction are listed on your current license.					
7. Floor Plan					
Are there any changes to the current floor plan? 🗴 No 🗌 Yes If yes, describe					
AND submit a new floor plan with this application. Changes in floor plan include changing the location of tables, games, etc. within your current licensed premises. If your changes include adding any additional areas or square footage to your premises, or any renovations to the building will be done, a Permanent Extension of Premises application must be filed.					

## PUBLIC ENTERTAINMENT PREMISES RENEWAL SUPPLEMENTARY APPLICATION

(1) CURRENT ENTERTAINMENT					
The following types of entertainment have been approved for your current Public Entertainment Premises license: Karaoke, 8 Amusement Machines, 1 Pool Table					
(2) SELECT ANY TYPES OF ENTERTAINMENT THAT YOU ARE REQUESTING TO ADD *No changes in entertainment shall take place until approved by the Common Council and a new license has been issued and posted on the premises.					
Instrumental Musicians	Bands	Battle of the Bands	Comedy Acts		
☐ Disc Jockey	Magic Shows	Poetry Readings	Dancing by Performers		
Adult Entertainment/ Strippers/Erotic Dance	☐ Wrestling	Patron Contests	Patrons Dancing		
Jukebox	Karaoke	Bowling Alley How many?	Pool Tables		
Motion Pictures	Amusement Machines –	Concerts	How many? Theatrical Performances		
How many screens?		Approx. # per year?			
Other:		Approx. # per year!	Approx. # per year?		
(3) REMOVE ENTERTAINME					
If applicable, list any entertain	inment you wish to remove: _				
	BE USED FOR ANY OF THE ENT				
No Yes, describe:					
(5) LEGAL CAPACITY OF PRE	AND DESCRIPTION OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN COLUM				
determine the license fee for you	ukee Development Center at 414- our Public Entertainment Premise listed above, indicate lower capac apacity listed on your Occupancy P	icense. If you would like to req	uest that the license be approved		
(6) IDENTIFY IF SOUND AMPLIFICATION IS USED					
No Yes, describe:					
(7) DECLARATIONS, ACKNOWLEDGEMENTS, AND DISCLOSURES					
<ol> <li>The undersigned understands 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.</li> <li>The undersigned agrees to inform the City Clerk within 10 days of any substantial changes in the information supplied in this application.</li> <li>The undersigned understands that applicants 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.</li> <li>The undersigned has knowledge of the City Ordinances currently regulating the public entertainment, and understands that the license may be subject to suspension, non-renewal or revocation, if the applicant violates any rule, law or regulation of the city of Milwaukee and State of Wisconsin.</li> </ol>					
(8) NOTARIZED SIGNATURES OF APPLICANTS					
SUBSCRIBED AND SWORN TO BEFORE ME This Distribution August 1, 20 14  Agent/purisor/Control  August 21, 2016  My Commission Spikes August 21, 2016  *Notary Seal must be affixed.					