



CITY OF MILWAUKEE  
OFFICE OF THE CITY CLERK

Thursday, June 25, 2015

COMMITTEE MEETING NOTICE

AD 11

ABDELWAHAB, Thaer M, Agent  
Tarifco Export Inc  
2652 W Berwyn

Chicago, IL 60625

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

**Tuesday, July 07, 2015 at 09:15 AM**

**Regarding:** Your Secondhand Motor Vehicle Dealer's License Application - Wholesale as agent for "Tarifco Export Inc" for "Tarifco Export" at 3500 S 92ND St #1C.

There is a possibility that your application may be denied for one or more of the following reasons: The recommendation of the committee regarding the application shall be based on evidence presented at the hearing. Per MCO 85-2.7-4, probative evidence concerning whether or not a new license should be granted may be presented on the following subjects: whether or not the applicant meets the municipal requirements, the appropriateness of the location and premises where the licensed premises is to be located and whether use of the premises for the purposes or activities permitted by the license would tend to facilitate a public or private nuisance or create undesirable neighborhood problems such as disorderly patrons, unreasonably loud noise, litter, and excessive traffic and parking congestion. Probative evidence relating to these matters may be taken from the plan of operation submitted with the license application, if any, but shall not include the content of any music. Evidence regarding the fitness of the location of the premises to be maintained as the principal place of business, including but not limited to whether there is an overconcentration of businesses of the type for which the license is sought; whether the proposal is consistent with any pertinent neighborhood business or development plans, or the location's proximity to areas where children are typically present. The applicant's record in operating similarly licensed premises; and whether or not the applicant has been charged with or convicted of any felony, misdemeanor, municipal offense or other offense, the circumstances of which substantially relate to the activity to be permitted by the license being applied for or any other factor which reasonably relates to the public health, safety or welfare may also be considered.

**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:

Jason Schunk  
License Division Manager

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

200 E. Wells Street, Room 105, City Hall, Milwaukee, WI 53202. [www.milwaukee.gov/license](http://www.milwaukee.gov/license)  
Phone: (414) 286-2238 Fax: (414) 286-3057 Email Address: [License@milwaukee.gov](mailto:License@milwaukee.gov)



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OFFICE OF THE CITY CLERK

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COMMITTEE MEETING NOTICE

AD 11

ABDELWAHAB, Thaer M, Agent  
Tarifco Export Inc  
3500 S 92ND St #1C

Milwaukee, WI 53228

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**Tuesday, July 07, 2015 at 09:15 AM**

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JIM OWCZARSKI, CITY CLERK

BY: \_\_\_\_\_

Jason Schunk  
License Division Manager

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

200 E. Wells Street, Room 105, City Hall, Milwaukee, WI 53202. [www.milwaukee.gov/license](http://www.milwaukee.gov/license)  
Phone: (414) 286-2238 Fax: (414) 286-3057 Email Address: [License@milwaukee.gov](mailto:License@milwaukee.gov)



Thursday, June 25, 2015



# Notice of Public Hearing

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ABDELWAHAB, Thaer M, Agent  
Tarifco Export at 3500 S 92ND St #1C  
Secondhand Motor Vehicle Dealer's License Application - Wholesale

**Tuesday, July 07, 2015 at 9:15 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 7/7/2015 at 9:15 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.

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## Important details for those wishing to provide information for the Licenses Committee to consider when making its recommendation:

1. The license application is scheduled to be heard at the above time. Due to other hearings running longer than scheduled, you may have to wait some time to provide your testimony.
2. You must appear in person and testify as to matters that you have personally experienced or seen. (You cannot provide testimony for your neighbor, parent or anyone else; this is considered hearsay and cannot be considered by the committee.)
3. No letters or petitions can be accepted by the committee (unless the person who wrote the letter or the persons who signed the petition are present at the committee hearing and willing to testify).
4. Persons opposed to the license application are given the opportunity to testify first; supporters may testify after the opponents have finished.
5. When you are called to testify, you will be sworn in and asked to give your name, and address. (If your first and/or last names are uncommon please spell them.)
6. You may then provide testimony.
  - a. Include only information relating to the above license application.
  - b. Include only information you have personally witnessed or seen.
  - c. Provide concise and relevant information detailing how this business has affected or may affect the peaceful enjoyment of your neighborhood.
  - d. If by the time you have the opportunity to testify, the information you wish to share has already been provided to the committee, you may state that you agree with the previous testimony. Redundant or repetitive testimony will not assist the committee in making its recommendation.
7. After giving your testimony, the members of the Licenses Committee and the licensee may ask questions regarding the testimony you have given or other factors relating to the license application.
8. Business Competition is not a valid basis for denial or non-renewal of a license.  
**Please Note: If you have submitted an objection to the above application your objection cannot be considered by the committee unless you personally testify at the hearing.**

RESIDENT	MAIL ADDRESS	CITY AND ZIP CODE
CURRENT RESIDENT	3465 S 91ST ST	MILWAUKEE, WI 53227-4409
CURRENT RESIDENT	3467 S 91ST ST	MILWAUKEE, WI 53227-4409
CURRENT RESIDENT	3467 S 92ND ST	MILWAUKEE, WI 53227-4417
CURRENT RESIDENT	3473 S 92ND ST	MILWAUKEE, WI 53227-4417
CURRENT RESIDENT	3476 S 92ND ST	MILWAUKEE, WI 53227-4418
CURRENT RESIDENT	3478 S 92ND ST	MILWAUKEE, WI 53227-4418
CURRENT RESIDENT	3479 S 91ST ST 1	MILWAUKEE, WI 53227-4409
CURRENT RESIDENT	3479 S 91ST ST 2	MILWAUKEE, WI 53227-4409
CURRENT RESIDENT	3479 S 91ST ST 3	MILWAUKEE, WI 53227-4409
CURRENT RESIDENT	3479 S 91ST ST 4	MILWAUKEE, WI 53227-4409
CURRENT RESIDENT	3479 S 91ST ST 5	MILWAUKEE, WI 53227-4409
CURRENT RESIDENT	3479 S 91ST ST 6	MILWAUKEE, WI 53227-4409
CURRENT RESIDENT	3479 S 91ST ST 7	MILWAUKEE, WI 53227-4409
CURRENT RESIDENT	3479 S 91ST ST 8	MILWAUKEE, WI 53227-4409
CURRENT RESIDENT	3480 S 92ND ST	MILWAUKEE, WI 53227-4418
CURRENT RESIDENT	3482 S 92ND ST	MILWAUKEE, WI 53227-4418
CURRENT RESIDENT	3484 S 92ND ST	MILWAUKEE, WI 53227-4418
CURRENT RESIDENT	3486 S 92ND ST	MILWAUKEE, WI 53227-4418
CURRENT RESIDENT	3488 S 92ND ST	MILWAUKEE, WI 53227-4418
CURRENT RESIDENT	3490 S 92ND ST	MILWAUKEE, WI 53227-4418
CURRENT RESIDENT	3505 S 92ND ST	MILWAUKEE, WI 53228-1541
CURRENT RESIDENT	3511 S 92ND ST	MILWAUKEE, WI 53228-1541
CURRENT RESIDENT	3513 S 92ND ST	MILWAUKEE, WI 53228-1541
CURRENT RESIDENT	3520 S 92ND ST 1	MILWAUKEE, WI 53228-1542
CURRENT RESIDENT	3520 S 92ND ST 2	MILWAUKEE, WI 53228-1542
CURRENT RESIDENT	3520 S 92ND ST 3	MILWAUKEE, WI 53228-1542
CURRENT RESIDENT	3520 S 92ND ST 4	MILWAUKEE, WI 53228-1542
CURRENT RESIDENT	3524 S 93RD ST	MILWAUKEE, WI 53228-1546
CURRENT RESIDENT	3525 S 92ND ST	MILWAUKEE, WI 53228-1541
CURRENT RESIDENT	3531 S 92ND ST	MILWAUKEE, WI 53228-1541
CURRENT RESIDENT	3541 S 92ND ST	MILWAUKEE, WI 53228-1541
CURRENT RESIDENT	3541A S 92ND ST	MILWAUKEE, WI 53228-1541
CURRENT RESIDENT	3542 S 92ND ST	MILWAUKEE, WI 53228-1575
CURRENT RESIDENT	3543 S 91ST ST	MILWAUKEE, WI 53228-1537
CURRENT RESIDENT	3544 S 92ND ST	MILWAUKEE, WI 53228-1575
CURRENT RESIDENT	3545 S 92ND ST	MILWAUKEE, WI 53228-1541
CURRENT RESIDENT	3550 S 92ND ST	MILWAUKEE, WI 53228-1575
CURRENT RESIDENT	3550A S 92ND ST	MILWAUKEE, WI 53228-1575
CURRENT RESIDENT	3551 S 91ST ST	MILWAUKEE, WI 53228-1537
CURRENT RESIDENT	3551A S 91ST ST	MILWAUKEE, WI 53228-1537
CURRENT RESIDENT	9017 W MORGAN AVE	MILWAUKEE, WI 53228-1559
CURRENT RESIDENT	9025 W MORGAN AVE	MILWAUKEE, WI 53228-1559
CURRENT RESIDENT	9035 W MORGAN AVE	MILWAUKEE, WI 53228-1559
CURRENT RESIDENT	9036 W EDEN PL	MILWAUKEE, WI 53228-1582
CURRENT RESIDENT	9100 W EDEN PL	MILWAUKEE, WI 53228-1550
CURRENT RESIDENT	9101 W MORGAN AVE 1	MILWAUKEE, WI 53228-1561
CURRENT RESIDENT	9101 W MORGAN AVE 2	MILWAUKEE, WI 53228-1561
CURRENT RESIDENT	9101 W MORGAN AVE 3	MILWAUKEE, WI 53228-1561
CURRENT RESIDENT	9101 W MORGAN AVE 4	MILWAUKEE, WI 53228-1561
CURRENT RESIDENT	9105 W EDEN PL	MILWAUKEE, WI 53228-1549
CURRENT RESIDENT	9106 W EDEN PL	MILWAUKEE, WI 53228-1550
CURRENT RESIDENT	9111 W MORGAN AVE 1	MILWAUKEE, WI 53228-1561
CURRENT RESIDENT	9111 W MORGAN AVE 2	MILWAUKEE, WI 53228-1561
CURRENT RESIDENT	9111 W MORGAN AVE 3	MILWAUKEE, WI 53228-1561
CURRENT RESIDENT	9111 W MORGAN AVE 4	MILWAUKEE, WI 53228-1561

CURRENT RESIDENT	9114 W EDEN PL	MILWAUKEE, WI 53228-1550
CURRENT RESIDENT	9120 W EDEN PL	MILWAUKEE, WI 53228-1550
CURRENT RESIDENT	9120A W EDEN PL	MILWAUKEE, WI 53228-1550
CURRENT RESIDENT	9125 W MORGAN AVE 1	MILWAUKEE, WI 53228-1585
CURRENT RESIDENT	9125 W MORGAN AVE 2	MILWAUKEE, WI 53228-1585
CURRENT RESIDENT	9125 W MORGAN AVE 3	MILWAUKEE, WI 53228-1585
CURRENT RESIDENT	9125 W MORGAN AVE 4	MILWAUKEE, WI 53228-1585
CURRENT RESIDENT	9125 W MORGAN AVE 5	MILWAUKEE, WI 53228-1585
CURRENT RESIDENT	9125 W MORGAN AVE 6	MILWAUKEE, WI 53228-1585
CURRENT RESIDENT	9126 W MORGAN AVE	MILWAUKEE, WI 53228-1589
CURRENT RESIDENT	9128 W MORGAN AVE	MILWAUKEE, WI 53228-1589
CURRENT RESIDENT	9130 W MORGAN AVE	MILWAUKEE, WI 53228-1589
CURRENT RESIDENT	9132 W MORGAN AVE	MILWAUKEE, WI 53228-1589
CURRENT RESIDENT	9134 W MORGAN AVE	MILWAUKEE, WI 53228-1589
CURRENT RESIDENT	9136 W MORGAN AVE	MILWAUKEE, WI 53228-1589
CURRENT RESIDENT	9138 W MORGAN AVE	MILWAUKEE, WI 53228-1589
CURRENT RESIDENT	9140 W MORGAN AVE	MILWAUKEE, WI 53228-1589
CURRENT RESIDENT	9200 W MORGAN AVE	MILWAUKEE, WI 53228-1563
CURRENT RESIDENT	9204 W MORGAN AVE	MILWAUKEE, WI 53228-1563
CURRENT RESIDENT	9206 W MORGAN AVE	MILWAUKEE, WI 53228-1563
CURRENT RESIDENT	9210 W MORGAN AVE	MILWAUKEE, WI 53228-1563
CURRENT RESIDENT	9221 W MORGAN AVE	MILWAUKEE, WI 53228-1562
CURRENT RESIDENT	9223 W MORGAN AVE	MILWAUKEE, WI 53228-1562

**Total Records: 79**

**Radius: 250.0 feet and Center of Circle: 3500 S 92nd ST**



**SECONDHAND MOTOR VEHICLE DEALER,  
USED MOTOR VEHICLE DEALER-PARTS ONLY &  
USED BIKE, TIRE & BATTERY LICENSE  
SUPPLEMENTAL PLAN OF OPERATION**

Office of the City Clerk License Division

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

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

Legal Entity Name: Tarifco Export Inc.

Premise Address: 3500 S. 92 St. 1 C Milwaukee WI 53228

Type of License applied for (check one):

- |   |   |
|---|---|
| <input type="checkbox"/> Secondhand Motor Vehicle Retail Dealer               | <input type="checkbox"/> Used Bike, Tire & Battery Retail Dealer    |
| <input checked="" type="checkbox"/> Secondhand Motor Vehicle Wholesale Dealer | <input type="checkbox"/> Used Bike, Tire & Battery Wholesale Dealer |
| <input type="checkbox"/> Used Motor Vehicle Retail Dealer – Parts Only        |   |
| <input type="checkbox"/> Used Motor Vehicle Wholesale Dealer – Parts Only     |   |

**RETAIL DEALERS ONLY**

Total Number of Parking Spaces (including customer/employee parking) \_\_\_\_\_

Number of Parking Spaces that will be used for Display/Storage of Secondhand Motor Vehicles \_\_\_\_\_

**STORAGE, MAINTENANCE & REPAIR**

Do you understand that all vehicles associated with the business must be stored on the licensed premise? ☒ Yes ☐ No

List your plans to ensure this requirement is met: \_\_\_\_\_

Do you understand all maintenance/repair work to these vehicles must be confined to the licensed premise? ☒ Yes ☐ No

List your plans to ensure this requirement is met: \_\_\_\_\_

**DISCLOSURE**

Has the applicant ever had a license relating to the activities licensed in Milwaukee Code of Ordinances Chapter 93 denied, not renewed, suspended, or revoked? ☒ No ☐ Yes

If yes, provide the circumstances and jurisdiction in which the event occurred (including a record of any actions from the State Department of Transportation and Financial Institutions relating to suspensions, revocations, forfeitures and warnings imposed by these departments relating to the operation of any automotive sales business by the applicant:

**REQUIRED SIGNATURE(S)**

Sole Proprietor, Partner, 20% or more Shareholder,  
or the Agent - only if there are no 20% or more shareholders

Signature of additional partner or 20% or more shareholder

**SUBMIT THIS FORM ALONG WITH THE  
BUSINESS LICENSE APPLICATION & BUSINESS LICENSE PLAN OF OPERATION**

Office Use Only:

Initials \_\_\_\_\_ Filed \_\_\_\_\_ App# \_\_\_\_\_



## BUSINESS LICENSE PLAN OF OPERATION

ccl-busplan 3/17/15

Office of the City Clerk License Division

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

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

### 1. Type of Business

Applying for: ☐ Extended Hours Establishment License ☐ Filling Station License ☐ Other (plan of operation for specific license also required)

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

Auto whole sale

Do you have any experience operating this type of business? ☐ No ☒ Yes

If yes, explain:

### 2. Business Operations

- a. Proposed Opening Date: A.S.A.P
- b. Is this premise under construction? ☒ No ☐ Yes If yes, list estimated completion date: \_\_\_\_\_
- c. Is this a franchise? ☒ No ☐ Yes
- d. Is this premises currently licensed? ☐ No ☒ Yes If yes, list type of license: other Auto wholesalers
- e. Is the current licensee operating? ☐ No ☒ Yes If no, list date closed: \_\_\_\_\_
- f. Do you have future plans for other businesses, licenses or permits at this location? ☒ No ☐ Yes  
If yes, explain: \_\_\_\_\_
- g. Have you previously held an Extended Hours License in Milwaukee? ☒ No ☐ Yes  
If yes, list address(es): \_\_\_\_\_
- h. Are other businesses operating in the same building? ☐ No ☒ Yes If yes, describe: Auto wholesalers

### 3. Litter & Noise Control

- a. How are grounds kept clean? ☐ Sweep ☐ Pressure Wash ☐ Pick Up Litter ☐ Hired Maintenance  
☒ Building Owner Responsibility ☐ Garbage Cans Outside ☐ Other: \_\_\_\_\_
- b. How often will grounds be cleaned? ☐ Daily ☐ Weekly ☐ As Needed ☐ Monthly ☐ Other: \_\_\_\_\_
- c. Grounds cleaned by: ☐ Licensee ☒ Building Owner ☐ Employees ☐ Hired Maintenance ☐ Other: \_\_\_\_\_
- d. How are noise issues prevented and/or addressed? ☐ Security ☒ Manager approaches customer(s) ☐ Call Police  
☐ Signs Posted ☐ Other: \_\_\_\_\_  
Will a sound amplification system be used? ☒ No ☐ Yes If yes, describe: \_\_\_\_\_
- e. Are there designated outdoor smoking areas? ☐ No ☒ Yes If yes, describe: \_\_\_\_\_
- f. Number of Garbage Cans: Inside: 2 Locations: Hallway  
Outside: 2 Locations: Parking lot
- g. Is a crowd control barrier used? ☒ No ☐ Yes If yes, describe: \_\_\_\_\_
- h. Describe sanitation facilities (restrooms): 2 Restrooms each floor
- i. Name of solid waste contractor: ☒ Advanced Disposal ☐ Waste Management ☐ Other: \_\_\_\_\_

#### 4. Parking & Security

- a. Are there off-street parking places? ☐ No ☒ Yes If yes, how many? 3  
Describe security plan for parking lot: \_\_\_\_\_
- b. Is there a loading zone? ☒ No ☐ Yes If yes, describe security for loading zone \_\_\_\_\_
- c. Will you have security personnel on premise? ☒ No ☐ Yes If yes, how many? \_\_\_\_\_  
What are their responsibilities? \_\_\_\_\_  
Is security equipment used? ☒ No ☐ Yes If yes, describe \_\_\_\_\_  
List their licensing, certification, or training credentials \_\_\_\_\_  
Will there be security cameras? ☒ No ☐ Yes If yes, where? \_\_\_\_\_  
Will searches or identification checks be conducted upon entry? ☒ No ☐ Yes If yes, describe \_\_\_\_\_

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

Alcohol _____%	Food _____%	Secondhand Merchandise _____%	Precious Metals & Gems _____%
Entertainment _____%	Cigarettes _____%		
Pawnbroker Activity _____%	Salvaged Materials _____% (such as scrap metal)	Other _____% Describe: _____	

#### 6. Businesses/Licenses on the Premises (check all that apply):

##### Type 1

- |  |   |   |  |
|--|---|---|--|
| <input type="checkbox"/> Full Service Restaurant | <input type="checkbox"/> Cafe/Coffee Shop | <input type="checkbox"/> Deli or Fast Food Restaurant | <input type="checkbox"/> Private/Fraternal/Veterans Club |
| <input type="checkbox"/> Night Club              | <input type="checkbox"/> Tavern           | <input type="checkbox"/> Cocktail Lounge              | <input type="checkbox"/> Teen Club                       |
| <input type="checkbox"/> Bowling Alley           | <input type="checkbox"/> Hotel            | <input type="checkbox"/> Banquet Hall                 | <input type="checkbox"/> Sports Facility                 |

##### Type 2

- |   |   |   |  |
|---|---|---|--|
| <input type="checkbox"/> Liquor Store               | <input type="checkbox"/> Corner Store                     | <input type="checkbox"/> Supermarket                    | <input type="checkbox"/> Convenience Store |
| <input type="checkbox"/> Gas Station                | <input type="checkbox"/> Amusement/Phonograph Distributor | <input type="checkbox"/> Auto Wrecker                   |  |
| <input checked="" type="checkbox"/> Used Car Dealer | <input type="checkbox"/> Used Auto Parts                  | <input type="checkbox"/> Personal Service Establishment | <input type="checkbox"/> Recording Studio  |

What other types of licenses/permits will you hold at this location? (check all that apply)

- ☐ Occupancy Permit ☐ Cigarette & Tobacco ☐ Gas Station ☐ Extended Hours ☐ Class "B" Tavern ☐ Weights & Measures  
☐ Secondhand Dealer ☐ Precious Metal & Gem ☐ Other: \_\_\_\_\_

#### 7. Legal Capacity (only if a Type 1 premises in #6 above)

Capacity \_\_\_\_\_ (Call the Milwaukee Development Center at 414-286-8211 if you have questions.)



## 8. Premises Description

d. Identify all area(s) of the premises that will be used in operating this business (include areas used only for storage):

☒ 1<sup>st</sup> Floor ☐ 2<sup>nd</sup> Floor ☐ Basement Storage ☐ Patio ☐ Beer Garden ☐ Sidewalk Café ☐ Deck ☐ Rooftop

☐ Other: Describe: \_\_\_\_\_

e. Describe Location: ☒ Major Thoroughfare ☐ Secondary Street ☐ Other: \_\_\_\_\_

f. Nearest Major Cross Street: 92nd, Morgan

g. Describe Building: ☒ Free Standing Building ☐ Strip Mall ☐ Other: \_\_\_\_\_

h. Describe Premises Structure: ☐ Single Story ☒ Multi-Story - # of Stories 2 ☐ Other: \_\_\_\_\_

i. Describe Surrounding Area: ☐ Commercial ☒ Residential ☐ Industrial ☐ Other: \_\_\_\_\_

j. Property Owner's Name: Barbara Hendrickson Phone Number: 414-541-6289

Address: \_\_\_\_\_

## 9. Hours of Operation & Customers


Will customers be entering the premises? ☐ No ☐ Yes

Day of the Week	Proposed Hours of Operation:		Number of Customers expected each day	Potential Age Range of Customers	Class B Applicants: Age Restriction (If none, write 'None')
	Open (include a.m. or p.m.)	Close (include a.m. or p.m.)			
Sunday					
Monday					
Tuesday					
Wednesday					
Thursday	10:00 am	2:00 P.M	5		
Friday					
Saturday					

Entertainment Indoor Closing Hours - If alcohol beverage establishment, same as alcohol license hours.  
If non-alcohol establishment 1:00 am Sunday to Thursday; 1:30 am Friday and Saturday.

Entertainment Outdoor Closing Hours - 10:00 pm Sunday - Thursday; 12:00 am Friday and Saturday,  
unless otherwise approved by Common Council in licensee's plan of operation.

## 10. Required Signature(s)

  
Sole Proprietor, Partner, Agent, or 20% or more Shareholder

\_\_\_\_\_  
Signature of additional partner or 20% or more Shareholder

See Application Information for a list of all required application forms.



CITY OF MILWAUKEE  
OFFICE OF THE CITY CLERK

Tuesday, June 30, 2015

COMMITTEE MEETING NOTICE

AD 11

ALJAYYAB, Younis, Agent  
Y&J Autosale LLC  
3500 S 92nd St #3D

Milwaukee, WI 53228

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

**Tuesday, July 07, 2015 at 09:15 AM**

**Regarding:** Your Secondhand Motor Vehicle Dealer's License Application - Wholesale as agent for "Y&J Autosale LLC" for "Y&J Autosale" at 3500 S 92nd St #3D.

There is a possibility that your application may be denied for one or more of the following reasons: The recommendation of the committee regarding the application shall be based on evidence presented at the hearing. Per MCO 85-2.7-4, probative evidence concerning whether or not a new license should be granted may be presented on the following subjects: whether or not the applicant meets the municipal requirements, the appropriateness of the location and premises where the licensed premises is to be located and whether use of the premises for the purposes or activities permitted by the license would tend to facilitate a public or private nuisance or create undesirable neighborhood problems such as disorderly patrons, unreasonably loud noise, litter, and excessive traffic and parking congestion. Probative evidence relating to these matters may be taken from the plan of operation submitted with the license application, if any, but shall not include the content of any music. Evidence regarding the fitness of the location of the premises to be maintained as the principal place of business, including but not limited to whether there is an overconcentration of businesses of the type for which the license is sought; whether the proposal is consistent with any pertinent neighborhood business or development plans, or the location's proximity to areas where children are typically present. The applicant's record in operating similarly licensed premises; and whether or not the applicant has been charged with or convicted of any felony, misdemeanor, municipal offense or other offense, the circumstances of which substantially relate to the activity to be permitted by the license being applied for or any other factor which reasonably relates to the public health, safety or welfare may also be considered.

**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:

Jason Schunk

License Division Manager

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

200 E. Wells Street, Room 105, City Hall, Milwaukee, WI 53202. [www.milwaukee.gov/license](http://www.milwaukee.gov/license)  
Phone: (414) 286-2238 Fax: (414) 286-3057 Email Address: [License@milwaukee.gov](mailto:License@milwaukee.gov)



Tuesday, June 30, 2015



# Notice of Public Hearing

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ALJAYYAAB, Younis, Agent  
Y&J Autosale at 3500 S 92nd St #3D  
Secondhand Motor Vehicle Dealer's License Application - Wholesale

**Tuesday, July 07, 2015 at 9:15 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 7/7/2015 at 9:15 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.

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## Important details for those wishing to provide information for the Licenses Committee to consider when making its recommendation:

1. The license application is scheduled to be heard at the above time. Due to other hearings running longer than scheduled, you may have to wait some time to provide your testimony.
2. You must appear in person and testify as to matters that you have personally experienced or seen. (You cannot provide testimony for your neighbor, parent or anyone else; this is considered hearsay and cannot be considered by the committee.)
3. No letters or petitions can be accepted by the committee (unless the person who wrote the letter or the persons who signed the petition are present at the committee hearing and willing to testify).
4. Persons opposed to the license application are given the opportunity to testify first; supporters may testify after the opponents have finished.
5. When you are called to testify, you will be sworn in and asked to give your name, and address. (If your first and/or last names are uncommon please spell them.)
6. You may then provide testimony.
  - a. Include only information relating to the above license application.
  - b. Include only information you have personally witnessed or seen.
  - c. Provide concise and relevant information detailing how this business has affected or may affect the peaceful enjoyment of your neighborhood.
  - d. If by the time you have the opportunity to testify, the information you wish to share has already been provided to the committee, you may state that you agree with the previous testimony. Redundant or repetitive testimony will not assist the committee in making its recommendation.
7. After giving your testimony, the members of the Licenses Committee and the licensee may ask questions regarding the testimony you have given or other factors relating to the license application.
8. Business Competition is not a valid basis for denial or non-renewal of a license.  
**Please Note: If you have submitted an objection to the above application your objection cannot be considered by the committee unless you personally testify at the hearing.**

RESIDENT	MAIL ADDRESS	CITY AND ZIP CODE
CURRENT RESIDENT	3465 S 91ST ST	MILWAUKEE, WI 53227-4409
CURRENT RESIDENT	3467 S 91ST ST	MILWAUKEE, WI 53227-4409
CURRENT RESIDENT	3467 S 92ND ST	MILWAUKEE, WI 53227-4417
CURRENT RESIDENT	3473 S 92ND ST	MILWAUKEE, WI 53227-4417
CURRENT RESIDENT	3476 S 92ND ST	MILWAUKEE, WI 53227-4418
CURRENT RESIDENT	3478 S 92ND ST	MILWAUKEE, WI 53227-4418
CURRENT RESIDENT	3479 S 91ST ST 1	MILWAUKEE, WI 53227-4409
CURRENT RESIDENT	3479 S 91ST ST 2	MILWAUKEE, WI 53227-4409
CURRENT RESIDENT	3479 S 91ST ST 3	MILWAUKEE, WI 53227-4409
CURRENT RESIDENT	3479 S 91ST ST 4	MILWAUKEE, WI 53227-4409
CURRENT RESIDENT	3479 S 91ST ST 5	MILWAUKEE, WI 53227-4409
CURRENT RESIDENT	3479 S 91ST ST 6	MILWAUKEE, WI 53227-4409
CURRENT RESIDENT	3479 S 91ST ST 7	MILWAUKEE, WI 53227-4409
CURRENT RESIDENT	3479 S 91ST ST 8	MILWAUKEE, WI 53227-4409
CURRENT RESIDENT	3480 S 92ND ST	MILWAUKEE, WI 53227-4418
CURRENT RESIDENT	3482 S 92ND ST	MILWAUKEE, WI 53227-4418
CURRENT RESIDENT	3484 S 92ND ST	MILWAUKEE, WI 53227-4418
CURRENT RESIDENT	3486 S 92ND ST	MILWAUKEE, WI 53227-4418
CURRENT RESIDENT	3488 S 92ND ST	MILWAUKEE, WI 53227-4418
CURRENT RESIDENT	3490 S 92ND ST	MILWAUKEE, WI 53227-4418
CURRENT RESIDENT	3505 S 92ND ST	MILWAUKEE, WI 53228-1541
CURRENT RESIDENT	3511 S 92ND ST	MILWAUKEE, WI 53228-1541
CURRENT RESIDENT	3513 S 92ND ST	MILWAUKEE, WI 53228-1541
CURRENT RESIDENT	3520 S 92ND ST 1	MILWAUKEE, WI 53228-1542
CURRENT RESIDENT	3520 S 92ND ST 2	MILWAUKEE, WI 53228-1542
CURRENT RESIDENT	3520 S 92ND ST 3	MILWAUKEE, WI 53228-1542
CURRENT RESIDENT	3520 S 92ND ST 4	MILWAUKEE, WI 53228-1542
CURRENT RESIDENT	3524 S 93RD ST	MILWAUKEE, WI 53228-1546
CURRENT RESIDENT	3525 S 92ND ST	MILWAUKEE, WI 53228-1541
CURRENT RESIDENT	3531 S 92ND ST	MILWAUKEE, WI 53228-1541
CURRENT RESIDENT	3541 S 92ND ST	MILWAUKEE, WI 53228-1541
CURRENT RESIDENT	3541A S 92ND ST	MILWAUKEE, WI 53228-1541
CURRENT RESIDENT	3542 S 92ND ST	MILWAUKEE, WI 53228-1575
CURRENT RESIDENT	3543 S 91ST ST	MILWAUKEE, WI 53228-1537
CURRENT RESIDENT	3544 S 92ND ST	MILWAUKEE, WI 53228-1575
CURRENT RESIDENT	3545 S 92ND ST	MILWAUKEE, WI 53228-1541
CURRENT RESIDENT	3550 S 92ND ST	MILWAUKEE, WI 53228-1575
CURRENT RESIDENT	3550A S 92ND ST	MILWAUKEE, WI 53228-1575
CURRENT RESIDENT	3551 S 91ST ST	MILWAUKEE, WI 53228-1537
CURRENT RESIDENT	3551A S 91ST ST	MILWAUKEE, WI 53228-1537
CURRENT RESIDENT	9017 W MORGAN AVE	MILWAUKEE, WI 53228-1559
CURRENT RESIDENT	9025 W MORGAN AVE	MILWAUKEE, WI 53228-1559
CURRENT RESIDENT	9035 W MORGAN AVE	MILWAUKEE, WI 53228-1559
CURRENT RESIDENT	9036 W EDEN PL	MILWAUKEE, WI 53228-1582
CURRENT RESIDENT	9100 W EDEN PL	MILWAUKEE, WI 53228-1550
CURRENT RESIDENT	9101 W MORGAN AVE 1	MILWAUKEE, WI 53228-1561

CURRENT RESIDENT	9101 W MORGAN AVE 2	MILWAUKEE, WI 53228-1561
CURRENT RESIDENT	9101 W MORGAN AVE 3	MILWAUKEE, WI 53228-1561
CURRENT RESIDENT	9101 W MORGAN AVE 4	MILWAUKEE, WI 53228-1561
CURRENT RESIDENT	9105 W EDEN PL	MILWAUKEE, WI 53228-1549
CURRENT RESIDENT	9106 W EDEN PL	MILWAUKEE, WI 53228-1550
CURRENT RESIDENT	9111 W MORGAN AVE 1	MILWAUKEE, WI 53228-1561
CURRENT RESIDENT	9111 W MORGAN AVE 2	MILWAUKEE, WI 53228-1561
CURRENT RESIDENT	9111 W MORGAN AVE 3	MILWAUKEE, WI 53228-1561
CURRENT RESIDENT	9111 W MORGAN AVE 4	MILWAUKEE, WI 53228-1561
CURRENT RESIDENT	9114 W EDEN PL	MILWAUKEE, WI 53228-1550
CURRENT RESIDENT	9120 W EDEN PL	MILWAUKEE, WI 53228-1550
CURRENT RESIDENT	9120A W EDEN PL	MILWAUKEE, WI 53228-1550
CURRENT RESIDENT	9125 W MORGAN AVE 1	MILWAUKEE, WI 53228-1585
CURRENT RESIDENT	9125 W MORGAN AVE 2	MILWAUKEE, WI 53228-1585
CURRENT RESIDENT	9125 W MORGAN AVE 3	MILWAUKEE, WI 53228-1585
CURRENT RESIDENT	9125 W MORGAN AVE 4	MILWAUKEE, WI 53228-1585
CURRENT RESIDENT	9125 W MORGAN AVE 5	MILWAUKEE, WI 53228-1585
CURRENT RESIDENT	9125 W MORGAN AVE 6	MILWAUKEE, WI 53228-1585
CURRENT RESIDENT	9126 W MORGAN AVE	MILWAUKEE, WI 53228-1589
CURRENT RESIDENT	9128 W MORGAN AVE	MILWAUKEE, WI 53228-1589
CURRENT RESIDENT	9130 W MORGAN AVE	MILWAUKEE, WI 53228-1589
CURRENT RESIDENT	9132 W MORGAN AVE	MILWAUKEE, WI 53228-1589
CURRENT RESIDENT	9134 W MORGAN AVE	MILWAUKEE, WI 53228-1589
CURRENT RESIDENT	9136 W MORGAN AVE	MILWAUKEE, WI 53228-1589
CURRENT RESIDENT	9138 W MORGAN AVE	MILWAUKEE, WI 53228-1589
CURRENT RESIDENT	9140 W MORGAN AVE	MILWAUKEE, WI 53228-1589
CURRENT RESIDENT	9200 W MORGAN AVE	MILWAUKEE, WI 53228-1563
CURRENT RESIDENT	9204 W MORGAN AVE	MILWAUKEE, WI 53228-1563
CURRENT RESIDENT	9206 W MORGAN AVE	MILWAUKEE, WI 53228-1563
CURRENT RESIDENT	9210 W MORGAN AVE	MILWAUKEE, WI 53228-1563
CURRENT RESIDENT	9221 W MORGAN AVE	MILWAUKEE, WI 53228-1562
CURRENT RESIDENT	9223 W MORGAN AVE	MILWAUKEE, WI 53228-1562

Total Records: 79

Radius: 250.0 feet and Center of Circle: 3500 S 92nd ST



**SECONDHAND MOTOR VEHICLE DEALER,  
USED MOTOR VEHICLE DEALER-PARTS ONLY &  
USED BIKE, TIRE & BATTERY LICENSE  
SUPPLEMENTAL PLAN OF OPERATION**

Office of the City Clerk License Division

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

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

Legal Entity Name: J & J Autosale LLC

Premise Address: 3500 S. 92nd St Suite 3D, Milwaukee, WI 53228

Type of License applied for (check one):

- |   |   |
|---|---|
| <input type="checkbox"/> Secondhand Motor Vehicle Retail Dealer               | <input type="checkbox"/> Used Bike, Tire & Battery Retail Dealer    |
| <input checked="" type="checkbox"/> Secondhand Motor Vehicle Wholesale Dealer | <input type="checkbox"/> Used Bike, Tire & Battery Wholesale Dealer |
| <input type="checkbox"/> Used Motor Vehicle Retail Dealer – Parts Only        |   |
| <input type="checkbox"/> Used Motor Vehicle Wholesale Dealer – Parts Only     |   |

**RETAIL DEALERS ONLY**

Total Number of Parking Spaces (including customer/employee parking) \_\_\_\_\_

Number of Parking Spaces that will be used for Display/Storage of Secondhand Motor Vehicles \_\_\_\_\_

**STORAGE, MAINTENANCE & REPAIR**

Do you understand that all vehicles associated with the business must be stored on the licensed premise? ☒ Yes ☐ No

List your plans to ensure this requirement is met: Fenced premises

Do you understand all maintenance/repair work to these vehicles must be confined to the licensed premise? ☒ Yes ☐ No

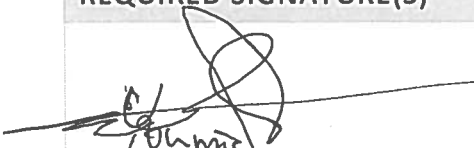
List your plans to ensure this requirement is met: Handled by professional maintenance


**DISCLOSURE**

Has the applicant ever had a license relating to the activities licensed in Milwaukee Code of Ordinances Chapter 93 denied, not renewed, suspended, or revoked? ☒ No ☐ Yes

If yes, provide the circumstances and jurisdiction in which the event occurred (including a record of any actions from the State Department of Transportation and Financial Institutions relating to suspensions, revocations, forfeitures and warnings imposed by these departments relating to the operation of any automotive sales business by the applicant:

**REQUIRED SIGNATURE(S)**

  
Sole Proprietor, Partner, 20% or more Shareholder,  
or the Agent - only if there are no 20% or more shareholders

  
Signature of additional partner or 20% or more shareholder

**SUBMIT THIS FORM ALONG WITH THE  
BUSINESS LICENSE APPLICATION & BUSINESS LICENSE PLAN OF OPERATION**

Office Use Only:

Initials \_\_\_\_\_ Filed \_\_\_\_\_ App# \_\_\_\_\_



## BUSINESS LICENSE PLAN OF OPERATION

ccl-busplan 3/17/15

Office of the City Clerk License Division  
200 E. Wells St. Room 105, Milwaukee, WI 53202  
(414) 286-2238 www.milwaukee.gov/license e-mail address: [license@milwaukee.gov](mailto:license@milwaukee.gov)

### 1. Type of Business

Applying for: ☐ Extended Hours Establishment License ☐ Filling Station License ☐ Other (plan of operation for specific license also required)

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

*wholesaler for cars*

Do you have any experience operating this type of business? ☐ No ☒ Yes

If yes, explain: *I worked for dealers before*

### 2. Business Operations

- a. Proposed Opening Date: *06/20/2015*
- b. Is this premise under construction? ☒ No ☐ Yes If yes, list estimated completion date: \_\_\_\_\_
- c. Is this a franchise? ☒ No ☐ Yes
- d. Is this premises currently licensed? ☒ No ☐ Yes If yes, list type of license: \_\_\_\_\_
- e. Is the current licensee operating? ☐ No ☐ Yes If no, list date closed: \_\_\_\_\_
- f. Do you have future plans for other businesses, licenses or permits at this location? ☒ No ☐ Yes  
If yes, explain: \_\_\_\_\_
- g. Have you previously held an Extended Hours License in Milwaukee? ☒ No ☐ Yes  
If yes, list address(es): \_\_\_\_\_
- h. Are other businesses operating in the same building? ☐ No ☒ Yes If yes, describe: *All owners of the*

*businesses operate dealerships*

### 3. Litter & Noise Control

- a. How are grounds kept clean? ☒ Sweep ☐ Pressure Wash ☒ Pick Up Litter ☐ Hired Maintenance  
☒ Building Owner Responsibility ☒ Garbage Cans Outside ☐ Other: \_\_\_\_\_
- b. How often will grounds be cleaned? ☒ Daily ☐ Weekly ☒ As Needed ☐ Monthly ☐ Other: \_\_\_\_\_
- c. Grounds cleaned by: ☒ Licensee ☒ Building Owner ☐ Employees ☐ Hired Maintenance ☐ Other: \_\_\_\_\_
- d. How are noise issues prevented and/or addressed? ☐ Security ☒ Manager approaches customer(s) ☐ Call Police  
☐ Signs Posted ☐ Other: \_\_\_\_\_  
Will a sound amplification system be used? ☒ No ☐ Yes If yes, describe: \_\_\_\_\_
- e. Are there designated outdoor smoking areas? ☒ No ☐ Yes If yes, describe: \_\_\_\_\_
- f. Number of Garbage Cans: Inside: *2* Locations: *inside the building office*  
Outside: *2* Locations: *outside the main building*
- g. Is a crowd control barrier used? ☒ No ☐ Yes If yes, describe: *no*
- h. Describe sanitation facilities (restrooms): \_\_\_\_\_
- i. Name of solid waste contractor: ☐ Advanced Disposal ☒ Waste Management ☐ Other: \_\_\_\_\_

#### 4. Parking & Security

- a. Are there off-street parking places? ☒ No ☐ Yes If yes, how many? \_\_\_\_\_  
Describe security plan for parking lot: \_\_\_\_\_
- b. Is there a loading zone? ☒ No ☐ Yes If yes, describe security for loading zone \_\_\_\_\_
- c. Will you have security personnel on premise? ☒ No ☐ Yes If yes, how many? \_\_\_\_\_  
What are their responsibilities? \_\_\_\_\_  
Is security equipment used? ☐ No ☐ Yes If yes, describe \_\_\_\_\_  
List their licensing, certification, or training credentials \_\_\_\_\_  
Will there be security cameras? ☐ No ☐ Yes If yes, where? \_\_\_\_\_  
Will searches or identification checks be conducted upon entry? ☐ No ☐ Yes If yes, describe \_\_\_\_\_

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

Alcohol <u>0</u> %	Food <u>0</u> %	Secondhand Merchandise <u>100</u> %	Precious Metals & Gems <u>0</u> %
Entertainment <u>0</u> %	Cigarettes <u>0</u> %		
Pawnbroker Activity <u>0</u> %	Salvaged Materials <u>0</u> % (such as scrap metal)	Other _____ % Describe: _____	

#### 6. Businesses/Licenses on the Premises (check all that apply):

##### Type 1

- |  |   |   |  |
|--|---|---|--|
| <input type="checkbox"/> Full Service Restaurant | <input type="checkbox"/> Cafe/Coffee Shop | <input type="checkbox"/> Deli or Fast Food Restaurant | <input type="checkbox"/> Private/Fraternal/Veterans Club |
| <input type="checkbox"/> Night Club              | <input type="checkbox"/> Tavern           | <input type="checkbox"/> Cocktail Lounge              | <input type="checkbox"/> Teen Club                       |
| <input type="checkbox"/> Bowling Alley           | <input type="checkbox"/> Hotel            | <input type="checkbox"/> Banquet Hall                 | <input type="checkbox"/> Sports Facility                 |

##### Type 2

- |   |   |   |  |
|---|---|---|--|
| <input type="checkbox"/> Liquor Store               | <input type="checkbox"/> Corner Store                     | <input type="checkbox"/> Supermarket                    | <input type="checkbox"/> Convenience Store |
| <input type="checkbox"/> Gas Station                | <input type="checkbox"/> Amusement/Phonograph Distributor | <input type="checkbox"/> Auto Wrecker                   |  |
| <input checked="" type="checkbox"/> Used Car Dealer | <input type="checkbox"/> Used Auto Parts                  | <input type="checkbox"/> Personal Service Establishment | <input type="checkbox"/> Recording Studio  |

What other types of licenses/permits will you hold at this location? (check all that apply)

None

- ☒ Occupancy Permit ☐ Cigarette & Tobacco ☐ Gas Station ☐ Extended Hours ☐ Class "B" Tavern ☐ Weights & Measures  
☒ Secondhand Dealer ☐ Precious Metal & Gem ☐ Other: \_\_\_\_\_

#### 7. Legal Capacity (only if a Type 1 premises in #6 above)

Capacity \_\_\_\_\_ (Call the Milwaukee Development Center at 414-286-8211 if you have questions.)



## 8. Premises Description

d. Identify all area(s) of the premises that will be used in operating this business (include areas used only for storage):

☐ 1<sup>st</sup> Floor ☐ 2<sup>nd</sup> Floor ☐ Basement Storage ☐ Patio ☐ Beer Garden ☐ Sidewalk Café ☐ Deck ☐ Rooftop

☒ Other: Describe: office & the parking spaces outside

e. Describe Location: ☒ Major Thoroughfare ☐ Secondary Street ☐ Other: \_\_\_\_\_

f. Nearest Major Cross Street: 92nd & Morgan

g. Describe Building: ☐ Free Standing Building ☒ Strip Mall ☐ Other: \_\_\_\_\_

h. Describe Premises Structure: ☒ Single Story ☐ Multi-Story - # of Stories \_\_\_\_\_ ☐ Other: \_\_\_\_\_

i. Describe Surrounding Area: ☒ Commercial ☐ Residential ☐ Industrial ☐ Other: \_\_\_\_\_

j. Property Owner's Name: C. Barbara Hendrickson Phone Number: 414-541-6289

Address: Barbara Milwaukee & New Berlin

## 9. Hours of Operation & Customers

Will customers be entering the premises? ☒ No ☒ Yes

Day of the Week	Proposed Hours of Operation:		Number of Customers expected each day	Potential Age Range of Customers	Class B Applicants: Age Restriction (If none, write 'None')
	Open (include a.m. or p.m.)	Close (include a.m. or p.m.)			
Sunday	NO	NO	None	—	/
Monday	10:00 AM	12:00 PM	<del>5:00</del>	—	/
Tuesday	NO				
Wednesday	NO				
Thursday	NO				
Friday	NO				
Saturday	NO				

Entertainment Indoor Closing Hours - If alcohol beverage establishment, same as alcohol license hours.  
If non-alcohol establishment 1:00 am Sunday to Thursday; 1:30 am Friday and Saturday.

Entertainment Outdoor Closing Hours - 10:00 pm Sunday – Thursday; 12:00 am Friday and Saturday,  
unless otherwise approved by Common Council in licensee's plan of operation.

## 10. Required Signature(s)

[Signature]  
Sole Proprietor, Partner, Agent, or 20% or more Shareholder

[Signature]  
Signature of additional partner or 20% or more Shareholder

See Application Information for a list of all required application forms.



CITY OF MILWAUKEE  
OFFICE OF THE CITY CLERK

Thursday, June 25, 2015

COMMITTEE MEETING NOTICE

AD 11

DJILAS, Petar, Agent  
UNA CAFE, INC  
4410 W FOREST HOME AV

MILWAUKEE, WI 53219

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

**Tuesday, July 07, 2015 at 09:15 AM**

**Regarding:** Your Class B Tavern License and Public Entertainment Premises Renewal Applications With Transfer of Stock and Removing 1 Amusement Machine as agent for "UNA CAFE, INC" for "UNA" at 4410 W FOREST HOME Av.

There is a possibility that your application may be denied for one or more of the following reasons: The recommendation of the committee regarding the application shall be based on evidence presented at the hearing. Per MCO 85-4-4, unless otherwise specified in the code, probative evidence concerning non-renewal, suspension or revocation may include evidence of the following: failure of the applicant to meet municipal qualifications, pending charges against 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 or permitted activity, by the applicant or by any employee or other agent of the applicant. If the activities of the applicant involve a licensed premises, whether the premises tends to facilitate a public or private nuisance or has been the source of congregations of persons which have resulted in any of the following: disturbance of the peace; illegal drug activity; public drunkenness; drinking in public; harassment of passers-by; gambling; prostitution; sale of stolen goods; public urination; theft; assaults; battery; acts of vandalism including graffiti, excessive littering, loitering, illegal parking, loud noise at times when the licensed premise is open for business; traffic violations; curfew violations; lewd conduct; display of materials harmful to minors, pursuant to s. 106-9.6; or any other factor which reasonably relates to the public health, safety and welfare, or failure to comply with the approved plan of operation. See attached police report or correspondence.

**Notice for applicants with warrants or unpaid fines:**

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

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

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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.

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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:

Jason Schunk

License Division Manager

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

200 E. Wells Street, Room 105, City Hall, Milwaukee, WI 53202. [www.milwaukee.gov/license](http://www.milwaukee.gov/license)  
Phone: (414) 286-2238 Fax: (414) 286-3057 Email Address: [License@milwaukee.gov](mailto:License@milwaukee.gov)

MILWAUKEE POLICE DEPARTMENT  
LICENSE INVESTIGATION UNIT

CRIMINAL RECORD/ORDINANCE VIOLATION/INCIDENTS  
SYNOPSIS

DATE: 05/28/2015

LICENSE TYPE: BTAVN

NEW:

RENEWAL: X

No. 211794

Application Date: 05/27/2015

Expiration Date:

License Location: 4410 W Forest Home Avenue

Aldermanic District: 11

Business Name: Una

Licensee/Applicant: Djilas, Petar

(Last Name, First Name, MI)

Date of Birth: 07/17/1971

Male: X

Female:

Home Address: 3137 S 56<sup>th</sup> Street

City: Milwaukee

State: Wi

Zip Code: 53219

Home Phone: (414) 328-1797

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 08/22/07 at 11:15 pm, applicant was issued a citation for Sale Of Alcohol To Underage Person at 4410 W Forest Home.

Charge:	Sale of Alcohol To Underage Person
Finding:	Guilty
Sentence:	Fined \$160.00
Date:	10/19/07
Case:	07103206

=====

2. On 12/24/2013 the Wisconsin Department of Transportation revoked Bozana Jovanovich's driver's license for 6 months for Operating While Intoxicated. Bozana Jovanovich is listed on the application as 49% shareholder.

=====

3. On 05/22/2014 Milwaukee police were dispatched to a fight at 4410 West Forest Home Avenue (Una's Bar). Officers discovered that there had been a fight inside the bar that continued once the involved parties exited the business. Several of the combatants were conveyed to area hospitals, including one victim that sustained lacerations to his neck, chest and hands requiring more than 20 stitches to repair. Milwaukee police incident report #141420035 filed.
4. On 03/27/2015 while investigating a trouble with subject complaint at 4410 West Forest Home Avenue (Una Café), officers conducted a licensed premise check. During this check, officers discovered the Class D operator's license possessed by the bartender, Colleen Santner, had expired on 12/31/2014. The bartender, and the business's manager Amy Seguin who was not in the business at the time of the violation, received a warning regarding this violation.

# MILWAUKEE POLICE DEPARTMENT

## REPORT OF INCIDENTS INVOLVING LICENSED PERSONS OR PREMISES

TO: Captain Diana Rowe

Business Name: Una Cafe

Address of Licensed Premises: 4410 W. Forest Home Ave

District: 6

Business Phone: 327-2393

Type of License: Class B

☐ Violation / ☒ Incident # 14-142-0035

Date of Incident: 05-22-14

Licensee or Manager on premises at time of violation / incident? ☒ Yes ☐ NoLicensee cooperative? ☒ Yes ☐ No (If no, explain in narrative section)

Licensee Notified by Officer: PO F R. Somers

Date: 05-27-14

Time: 2010

Licensee or Agent's Name: Djilas, Petar

Date of Birth: 07-17-71

Home Address: 2019 E. Lake Bluff Bl Shorewood, WI

Home Phone: 3281797

Co-Licensee Name:

Date of Birth:

Home Address:

Home Phone:

Class S License Number:

Bartender Name: Seguin, Amy E

Date of Birth: 05-13-77

Home Address: 4437 W. Forest Home Ave

Home Phone: 559-2039

Class D License Number: 206351

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 &amp; Ord. / Statue No.:

Court Date:

Name of Person Cited:

Date of Birth:

Citation Number:

Violation &amp; Ord. / Statue No.:

Court Date:

Name of Person Cited:

Date of Birth:

Citation Number:

Violation &amp; Ord. / Statue No.:

Court Date:

Name of Person Cited:

Date of Birth:

Citation Number:

Violation &amp; Ord. / Statue No.:

Court Date:

Name of Person Cited:

Date of Birth:

Citation Number:

Violation &amp; Ord. / Statue No.:

Court Date:

Investigating Officer: PO F R. Somers

District / Bureau: 64

Date: 05-27-14

Capt Diana Rowe  
Commanding Officer

MAY 30 2014  
Date

**DISPOSITION – FOR LICENSING ONLY**

Citation No.	Case Number	Disposition	Judge	Date

LICENSE INVESTIGATION UNIT

Received

Referred

By

P.O. J. Dummann then changed locations to 4944 W. Forest Home Av. Upon arrival I was informed the stabbing victim (CARTAGENA, Mike M/W, 05-21-92) was transported to Froedtert Hospital by MFD Med unit #18. At the location I met BONG, Michael A. (M/W, 05-18-77 of 4944 W. Forest Home Av.) whom lives at the location. BONG was highly intoxicated. BONG stated he was at Una's bar with CARTAGENA and another black male. BONG stated he met this black male earlier in the night at another bar in the area. He stated the black males name was Tony and he was over 6 feet in height. BONG could not give any other description of Tony. BONG stated the three of them went over to Una's at some unknown time in the night. BONG stated shortly after arriving a fight broke out in the street at Una's while he was outside with CARTAGENA and Tony. BONG stated he observed CARTAGENA get punched in the back of the head by an unknown white male wearing a flannel Shirt. BONG stated he then observed CARTAGENA get punched and kicked multiple times while on the ground by the white male wearing a flannel, an unknown Hispanic male with a white shirt, and another unknown subject. BONG stated he then ran over to CARTAGENA and punched one of the subjects in the head. He then heard CARTAGENA yell "run" so he ran to his house with CARTAGENA from the location. While at the location BONG realized CARTAGENA was bleeding from the neck and hands so he called police. BONG stated he did not observe any subjects with a knife or bottle. BONG stated he did not observe Tony in the fight and did not see him exit the location.

P.O. J. Dummann was then advised another victim of the fight was transported from the scene by Curtis Ambulance to West Allis Memorial Hospital. P.O. J. Dummann then changed locations to meet the victim.

P.O. J. Dummann located the victim (RANKIN, Ryan M. M/W, 05-13-77) at West Allis Memorial Hospital. RANKIN was admitted at 2:25am and was being treated by Doctor HIEBERT. RANKIN was highly intoxicated and appeared reluctant to speak with police. RANKIN stated he is a regular at Una's bar and was at the location from about 10:00pm till when the fight started. RANKIN stated he was inside Una's bar when he observed five or six subjects fighting in the street directly outside of the bar. RANKIN stated he exited the bar and attempted to break up the fight. RANKIN stated he was knocked down by an unknown subject and then kicked in the head by an unknown subject. RANKIN also stated he sustained a cut to his right index finger at some point. RANKIN stated he could not describe any of the subjects involved except for his friend Christopher LINDBERG who he observed in the street being kicked by two or three subjects. RANKIN stated he did not observe anyone with a knife or bottle. RANKIN stated he did not wish to press charges. RANKIN sustained five stitches to his right index finger. P.O. J. Dummann also observed a shoe print to the right side of his head as well as redness and swelling to the right side of his head.

P.O. J. Dummann then changed locations to Froedtert Hospital to speak with Mike CARTAGENA. CARTAGENA was admitted at 2:42AM and was being treated by Doctor Heidi LUDTKE. CARTAGENA stated he was at Una's bar with his friend Michael BONG and another black male whom they met earlier in the night. CARTAGENA did not know the name of the black male. CARTAGENA stated everything was fine at the bar until a fight broke out in the street outside the bar "out of no where". CARTAGENA stated he just lit a cigarette when someone punched him in the back of the head. CARTAGENA stated he fell to the ground and then laid on his back. While on his back he observed three males punching and kicking him in the head and body. He described one subject as a white male, mid 30's, gray hair, wearing a black tee shirt. He described the other subject as a white male, mid 30's, short, spiked hair, wearing a white tee shirt. He described the last subject as a Serbian male, mid 30's, black hair, wearing a red shirt. CARTAGENA stated he did not know if these subjects were ever in the bar or if they came from another bar. CARTAGENA stated it felt as if the subjects were kicking and punching him all over. He stated he did not know he was stabbed until he somehow ran to BONG's house. CARTAGENA stated BONG called 911 where he was then conveyed to the Hospital by ambulance. CARTAGENA stated he did not get a great look at the subjects and would not be able to identify the suspects. CARTAGENA sustained a slash like stab laceration to both side of his neck, chest, and hands. CARTAGENA sustained over 20 stitches.

P.O. J. Dummann then changed locations to St. Luke's Hospital to speak further with Christopher LINDBERG. LINDBERG was admitted to the hospital at 2:26AM and was being treated by Doctor ADLER. LINDBERG was highly intoxicated and would not answer my questions. LINDBERG would not state who did

this to him and refused to answer any questions. LINDBERG stated he did not wish to be a victim. LINDBERG received multiple stitches to his head, wrist, and hands.

# MILWAUKEE POLICE DEPARTMENT

## REPORT OF INCIDENTS INVOLVING LICENSED PERSONS OR PREMISES

TO: Captain Diana Rowe

Business Name: Una Cafe

Address of Licensed Premises: 4410 W. Forest Home Ave

District: 6

Business Phone: 327-2393

Type of License: Class B

☒ Violation / ☐ Incident #

Date of Incident: 03-26-15

Licensee or Manager on premises at time of violation / incident? ☒ Yes ☐ NoLicensee cooperative? ☒ Yes ☐ No (If no, explain in narrative section)

Licensee Notified by Officer: PO Michael Krohn

Date: 03-26-15

Time: 0100

Licensee or Agent's Name: Djilas, Petar

Date of Birth: 07-17-71

Home Address: 2019 E. Lake Bluff Bl Shorewood, WI

Home Phone: 328-1797

Co-Licensee Name:

Date of Birth:

Home Address:

Home Phone:

Class S License Number:

Bartender Name: Santner, Colleen

Date of Birth: 07-16-87

Home Address: 4804 W. Forest Home Ave

Home Phone: 552-4835

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 &amp; Ord. / Statue No.:

Court Date:

Name of Person Cited:

Date of Birth:

Citation Number:

Violation &amp; Ord. / Statue No.:

Court Date:

Name of Person Cited:

Date of Birth:

Citation Number:

Violation &amp; Ord. / Statue No.:

Court Date:

Name of Person Cited:

Date of Birth:

Citation Number:

Violation &amp; Ord. / Statue No.:

Court Date:

Name of Person Cited:

Date of Birth:

Citation Number:

Violation &amp; Ord. / Statue No.:

Court Date:

Investigating Officer: P.O. Michael Krohn

District / Bureau: 64

Date: 03-27-15

*Capt. Diana Rowe*  
 \_\_\_\_\_  
 Commanding Officer

**MAR 28 2015**  
 \_\_\_\_\_  
 Date

**DISPOSITION - FOR LICENSING ONLY**

Citation No.	Case Number	Disposition	Judge	Date

LICENSE INVESTIGATION UNIT  
 Received 4-2-15

Referred

By *[Signature]*



This report is written by P.O. F R. Somers assigned to District Six, Power Shift.

The following information is based off P.O. Joshua Dummann's report.

On 05-22-14 at 1:56am squad 6321 (P.O. DUMMANN) was dispatched to 4410 W. Forest Home Av. for a Fight complaint.

I then followed MED 18 to Froedert with the victim of the stabbing, later identified as (CARTAGENA, Mike M/W, 05-21-92).

Upon arrival P.O. J. Dummann observed numerous subjects outside Una's Bar at 4410 W. Forest Home Av. as well as numerous MFD units treating subjects.

P.O. J. Dummann spoke with LINDBERG, Christopher A. (M/W, 12-25-80) who was badly injured. P.O. J. Dummann observed a laceration above his left eye, his right wrists, both hands, and cuts all over both legs. LINDBERG was highly intoxicated and uncooperative. LINDBERG would not answer questions regarding who injured him or what the individuals looked like. He did state he was a victim but would not indulge in what happened. LINDBERG was then conveyed to St. Luke's Hospital by Curtis 333.

P.O. J. Dummann then spoke with PITRE, Eric S. (M/W, 08-17-72) whom was a witness of the fight. PITRE was highly intoxicated. PITRE stated there was an argument inside the bar between two or three people. PITRE stated some of the individuals, unknown how many, exited the bar. PITRE stated a fight ensued shortly after "out of nowhere". PITRE was unable to give descriptions of actors other than stating there was a big black male involved. PITRE estimated there was four or five people fighting on the sidewalk and street outside of the bar at 4410 W. Forest Home Av.

P.O. J. Dummann then spoke with the bartender (SEGUIN, Amy E. F/W, 05-13-77) of Una's at 4410 W. Forest Home Av. SEGUIN stated there was an argument inside the bar around 1:30AM. She stated a large black male, a muscular Hispanic male and another white male, all unknown clothing descriptions, were upset because the poker machine was not working inside the bar. She stated the three individuals then exited the bar. Shortly after she observed a fight ensue outside the bar on the sidewalk and street. She stated about five or six subjects were fighting. SEGUIN stated she observed a regular customer, LINDBERG, laying on the sidewalk being punched and kicked by two or three subjects. She described one of the subjects as a large black male and the other subject as a Hispanic male, unknown clothing description. SEGUIN also stated she observed another patron identified as KOMINA, Nikola get punched by a Hispanic male wearing a white T-shirt in the street. SEGUIN stated KOMINA lives at 4707 W. Euclid Av. #2. KOMINA was not on scene.

P.O. J. Dummann then changed locations to 4707 W. Euclid Av. #2 to speak with KOMINA. KOMINA, identified as KOMINA, Nikola (M/W, 04-24-84) stated he was at Una's all night. KOMINA was highly intoxicated. KOMINA stated he was very confused about what happened. KOMINA stated he was outside the bar on the sidewalk when a fight broke out between about 10 individuals. KOMINA was unable to describe any of the individuals. KOMINA at one point was knocked down by an unknown subject. KOMINA stated he was not sure how the fight ended, but remembered walking home. KOMINA was very uncooperative and was unable to answer multiple questions because of his intoxication level. KOMINA stated he did not see anyone with a knife or bottle at the location.

P.O. J. Dummann was then informed by dispatch there was a stabbing victim located at 4944 W. Forest Home Av. who was involved in the fight at Una's Bar.

This report is written by P.O. Michael Krohn, assigned to District Six, Power Shift.

On Wednesday, March 27, 2015 at 12:13am, I along with P.O. Christopher Jackson and Sqd. 6320 (P.O. Brian Heder) responded to 4410 W. Forest Home Ave (Una Café) for a trouble with subject.

While at the location I conducted a license premise check and spoke with the bartender, Colleen M. Santner (w/f, 07-16-87). Santner produced her Class D Bartenders License, which expired on 12-31-14. Santner was surprised when I told her that her license was expired. Santner stated that she received her license in May of 2013 and she had the understanding it was good for two years. Santner also stated that she moved in October of 2014 and that the mail must not have been forwarded to her new address. Santner then called the bar manager, Amy E. Seguin (w/f, 01-14-75) who lives directly across the street from the bar.

Seguin came immediately over to the bar and I explained that Santner's license was expired. Seguin stated that Santner has been bartending there for a little over a year. Seguin stated that she should have kept better track of the employee's licenses.

After looking through the license premise reports we have on file, this is the first offense for Santner and Una Café for not having a valid Class D bartender. At this time, because of the cooperation of Santner and Seguin, a warning was issued, but a License Premise Report would be written. I checked on LIRA and Santner had gone that same day and applied for an Individual Provisional Renewal License. While onscene Seguin had sent a text to the licensee and informed him of the violation.

End of report.



Thursday, June 25, 2015



# Notice of Public Hearing

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DJILAS, Petar, Agent

UNA at 4410 W FOREST HOME Av

Class B Tavern License and Public Entertainment Premises Renewal Applications With Transfer  
of Stock and Removing 1 Amusement Machine

**Tuesday, July 07, 2015 at 9:15 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 7/7/2015 at 9:15 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.

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## Important details for those wishing to provide information for the Licenses Committee to consider when making its recommendation:

1. The license application is scheduled to be heard at the above time. Due to other hearings running longer than scheduled, you may have to wait some time to provide your testimony.
2. You must appear in person and testify as to matters that you have personally experienced or seen. (You cannot provide testimony for your neighbor, parent or anyone else; this is considered hearsay and cannot be considered by the committee.)
3. No letters or petitions can be accepted by the committee (unless the person who wrote the letter or the persons who signed the petition are present at the committee hearing and willing to testify).
4. Persons opposed to the license application are given the opportunity to testify first; supporters may testify after the opponents have finished.
5. When you are called to testify, you will be sworn in and asked to give your name, and address. (If your first and/or last names are uncommon please spell them.)
6. You may then provide testimony.
  - a. Include only information relating to the above license application.
  - b. Include only information you have personally witnessed or seen.
  - c. Provide concise and relevant information detailing how this business has affected or may affect the peaceful enjoyment of your neighborhood.
  - d. If by the time you have the opportunity to testify, the information you wish to share has already been provided to the committee, you may state that you agree with the previous testimony. Redundant or repetitive testimony will not assist the committee in making its recommendation.
7. After giving your testimony, the members of the Licenses Committee and the licensee may ask questions regarding the testimony you have given or other factors relating to the license application.
8. Business Competition is not a valid basis for denial or non-renewal of a license.

**Please Note: If you have submitted an objection to the above application your objection cannot be considered by the committee unless you personally testify at the hearing.**

RESIDENT	MAIL ADDRESS	CITY AND ZIP CODE
CURRENT RESIDENT	3058 S 45TH ST	MILWAUKEE, WI 53219-3414
CURRENT RESIDENT	3059 S 44TH ST	MILWAUKEE, WI 53219-3409
CURRENT RESIDENT	3059A S 44TH ST	MILWAUKEE, WI 53219-3409
CURRENT RESIDENT	3124 S 44TH ST	MILWAUKEE, WI 53219-4807
CURRENT RESIDENT	3124A S 44TH ST	MILWAUKEE, WI 53219-4807
CURRENT RESIDENT	4416 W OKLAHOMA AVE	MILWAUKEE, WI 53219-3451
CURRENT RESIDENT	4416A W OKLAHOMA AVE	MILWAUKEE, WI 53219-3451
CURRENT RESIDENT	4426 W OKLAHOMA AVE 1	MILWAUKEE, WI 53219-3451
CURRENT RESIDENT	4426 W OKLAHOMA AVE 2	MILWAUKEE, WI 53219-3451
CURRENT RESIDENT	4426 W OKLAHOMA AVE 3	MILWAUKEE, WI 53219-3451
CURRENT RESIDENT	4426 W OKLAHOMA AVE 4	MILWAUKEE, WI 53219-3451
CURRENT RESIDENT	4432 W OKLAHOMA AVE	MILWAUKEE, WI 53219-3451
CURRENT RESIDENT	4437 W FOREST HOME AVE	MILWAUKEE, WI 53219-4835
CURRENT RESIDENT	4500 W OKLAHOMA AVE	MILWAUKEE, WI 53219-3454
CURRENT RESIDENT	4501 W OKLAHOMA AVE	MILWAUKEE, WI 53219-3455
CURRENT RESIDENT	4501A W OKLAHOMA AVE	MILWAUKEE, WI 53219-3455
CURRENT RESIDENT	4507 W OKLAHOMA AVE	MILWAUKEE, WI 53219-3455
CURRENT RESIDENT	4508 W OKLAHOMA AVE	MILWAUKEE, WI 53219-3454
CURRENT RESIDENT	4509 W OKLAHOMA AVE	MILWAUKEE, WI 53219-3455
CURRENT RESIDENT	4510 W OKLAHOMA AVE	MILWAUKEE, WI 53219-3454
CURRENT RESIDENT	4512 W OKLAHOMA AVE	MILWAUKEE, WI 53219-3454
CURRENT RESIDENT	4513 W OKLAHOMA AVE	MILWAUKEE, WI 53219-3455

**Total Records: 23**

**Radius: 250.0 feet and Center of Circle: 4410 W Forest Home AV**

**2015-2016 Plan of Operation for 4410 W FOREST HOME AV****1. 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: EMPLOYEES APPROACH CUSTOMERS**2. Smoking and Sanitation**Are there designated outdoor smoking areas? ☐ No ☒ Yes OUTSIDE, AT A REASONABLEIf yes, describe the area(s) and provide location(s): DISTANCE FROM ENTRANCENumber of Garbage Cans: Inside: 3 Locations: (1) MENS ROOM, (1) WOMENS ROOM, (1) BEHIND BAR  
Outside: \_\_\_\_\_ Locations: \_\_\_\_\_Is a Crowd Control Barrier used? ☒ No ☐ Yes If yes, describe: \_\_\_\_\_Describe sanitation facilities (restrooms): (1) MENS ROOM W/ (1) TOILET & (1) URINAL; (1) WOMENS ROOMProvide name of solid waste contractor: W/ (1) TOILET**3. Security**Are there parking spaces on the premises? ☐ No ☒ Yes If yes, number of spaces: 7 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? 2

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: \_\_\_\_\_Are searches and/or identification checks conducted upon entry? ☐ No ☒ Yes If yes, describe: ID'S ARE CHECKED ON ENTRY FOR AGE VERIFICATION**4. Percentage of Sales (must total 100%)**Alcohol 95 % Food Sales \_\_\_\_\_ % Entertainment \_\_\_\_\_ % Other 5 %**5. Businesses On The Premise (choose all that apply):**

- |  |  |  |   |
|--|--|--|---|
| <input type="checkbox"/> Full Service Restaurant | <input type="checkbox"/> Cafe/Coffee Shop  | <input type="checkbox"/> Deli or Fast Food Rest. | <input type="checkbox"/> Private/Fraternal/Veterans' Club |
| <input type="checkbox"/> Night Club              | <input checked="" type="checkbox"/> Tavern | <input type="checkbox"/> Cocktail Lounge         | <input type="checkbox"/> Teen Club                        |
| <input type="checkbox"/> Bowling Alley           | <input type="checkbox"/> Hotel             | <input type="checkbox"/> Banquet Hall            | <input type="checkbox"/> Sports Facility                  |
| <input type="checkbox"/> Liquor Store            | <input type="checkbox"/> Corner Store      | <input type="checkbox"/> Supermarket             | <input type="checkbox"/> Convenience Store                |
| <input type="checkbox"/> Gas Station             | <input type="checkbox"/> Other _____       |  |   |

**6. Hours of Operation and Age Restriction**Are there any changes to the current hours of operation or age restriction? ☒ 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.

**(1) CURRENT ENTERTAINMENT**

The following types of entertainment have been approved for your current Public Entertainment Premises license:

Jukebox, 5 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.**

<input type="checkbox"/> Instrumental Musicians	<input type="checkbox"/> Bands	<input type="checkbox"/> Battle of the Bands	<input type="checkbox"/> Comedy Acts
<input type="checkbox"/> Disc Jockey	<input type="checkbox"/> Magic Shows	<input type="checkbox"/> Poetry Readings	<input type="checkbox"/> Dancing by Performers
<input checked="" type="checkbox"/> Jukebox	<input type="checkbox"/> Wrestling	<input type="checkbox"/> Patron Contests	<input type="checkbox"/> Patrons Dancing
<input type="checkbox"/> Adult Entertainment/ Strippers/Erotic Dance	<input type="checkbox"/> Karaoke	<input type="checkbox"/> Bowling Alley	<input checked="" type="checkbox"/> Pool Tables
<input type="checkbox"/> Motion Pictures	<input checked="" type="checkbox"/> Amusement Machines -	<input type="checkbox"/> Concerts	<input type="checkbox"/> Theatrical Performances
How many screens? _____	How many? <u>4</u>	Approx. # per year? _____	How many? <u>1</u> Approx. # per year? _____
<input type="checkbox"/> Other: _____			

**(3) REMOVE ENTERTAINMENT**

If applicable, list any entertainment you wish to remove: \_\_\_\_\_

**(4) WILL PROMOTERS EVER BE USED FOR ANY OF THE ENTERTAINMENT?**

☒ No ☐ Yes, describe: \_\_\_\_\_

**(5) LEGAL CAPACITY OF PREMISES**

80 (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 \_\_\_\_\_. If approved, this lower capacity will print on your license and override the capacity listed on your Occupancy Permit.

**(6) IDENTIFY IF SOUND AMPLIFICATION IS USED**

☐ No ☒ Yes, describe: INDOOR ONLY, JUKEBOX & RADIO SYSTEM

**(7) DECLARATIONS, ACKNOWLEDGEMENTS, & DISCLOSURES**

**Read And Initial Each Item Confirming Your Understanding:**

1. ☒ I understand that after the license has been issued, a change to the plan of operation will require a written request to change and approval from the Common Council.
2. ☒ I agree to inform the City Clerk within 10 days of any substantial changes in the information supplied in this application.
3. ☒ I understand that I shall not willfully refuse to provide the services offered under this license, or add charges or require deposits not required of the general public because of race, color, sex, religion, national origin or ancestry, age, handicap, lawful source of income, marital status, sexual orientation, gender identity or expression, familial status or the fact that a person is now or has been a member of the military service, whether dressed in uniform or not; and shall not seek such information as a condition of employment, or penalize any employee or discriminate in the selection of personnel for training or promotion on the basis of such information.
4. ☒ I have knowledge of the City Ordinances currently regulating public entertainment, and understand that the license may be subject to suspension, non-renewal or revocation, if I violate any rule, law or regulation of the city of Milwaukee and State of Wisconsin.

**(8) NOTARIZED SIGNATURES OF APPLICANTS**

**SUBSCRIBED AND SWORN TO BEFORE ME**

This 22<sup>ND</sup> day of MAY, 2015

Dagmar K. Velencic  
(Clerk/Notary Public)

My Commission Expires Feb 26, 2015

P. Mi Cen  
Agent/Owner/Partner  
Boziana Tomovic  
Additional Owner/Partner

\*Notary Seal must be affixed.



CITY OF MILWAUKEE  
OFFICE OF THE CITY CLERK

Thursday, June 25, 2015

COMMITTEE MEETING NOTICE

AD 11

OKLOBDZIJA, Jovo, Agent  
ST SAVA SERBIAN ORTHODOX CATHEDRAL  
3201 S 51ST St

MILWAUKEE, WI 53219

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

**Tuesday, July 07, 2015 at 09:15 AM**

**Regarding:** Your Class B Special License Application for 8/21/15-8/23/15 as agent for "ST SAVA SERBIAN ORTHODOX CATHEDRAL" for "ST SAVA SERBIAN ORTHODOX CATHEDRAL" at 3201 S 51ST St.

There is a possibility that your application may be denied for one or more of the following reasons: Possible denial because: the appropriateness of the location and site for which the license is sought and whether the event for which the license is sought will create undesirable neighborhood problems; the hours during which the event would be operated on the site and the likely effect of the event on the surrounding area; whether previous licenses granted to the same applicant or to other applicants for the same site have resulted in neighborhood problems including, but not limited to, complaints of loud music, noise, litter, disorderly assemblages, loitering or public urination; whether the applicant has been charged or convicted of any felony, misdemeanor, municipal offense or other offense, the circumstances of which substantially relate to the activity for which the license is sought; 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. 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.

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JIM OWCZARSKI, CITY CLERK

BY: \_\_\_\_\_

Jason Schunk  
License Division Manager

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



CITY OF MILWAUKEE  
OFFICE OF THE CITY CLERK

Thursday, June 25, 2015

COMMITTEE MEETING NOTICE

AD 11

OKLOBDZIIA, Jovo, Agent  
ST SAVA SERBIAN ORTHODOX CATHEDRAL  
8631 W Forest Hill Ave

Franklin, WI 53132

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

**Tuesday, July 07, 2015 at 09:15 AM**

**Regarding:** Your Class B Special License Application for 8/21/15-8/23/15 as agent for "ST SAVA SERBIAN ORTHODOX CATHEDRAL" for "ST SAVA SERBIAN ORTHODOX CATHEDRAL" at 3201 S 51ST St.

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JIM OWCZARSKI, CITY CLERK

BY:

Jason Schunk  
License Division Manager

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





Thursday, June 25, 2015



# Notice of Public Hearing

---

OKLOBDZIJA, Jovo, Agent  
ST SAVA SERBIAN ORTHODOX CATHEDRAL at 3201 S 51ST St  
Class B Special License Application for 8/21/15-8/23/15

**Tuesday, July 07, 2015 at 9:15 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 7/7/2015 at 9:15 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
CURRENT RESIDENT	3108 S 53RD ST	MILWAUKEE, WI 53219-4520
CURRENT RESIDENT	3120 S 51ST ST	MILWAUKEE, WI 53219-4512
CURRENT RESIDENT	3122 S 53RD ST	MILWAUKEE, WI 53219-4520
CURRENT RESIDENT	3124 S 51ST ST	MILWAUKEE, WI 53219-4512
CURRENT RESIDENT	3128 S 51ST ST	MILWAUKEE, WI 53219-4512
CURRENT RESIDENT	3130 S 53RD ST	MILWAUKEE, WI 53219-4520
CURRENT RESIDENT	3133 S 50TH ST	MILWAUKEE, WI 53219-4509
CURRENT RESIDENT	3133 S 53RD ST	MILWAUKEE, WI 53219-4521
CURRENT RESIDENT	3133A S 50TH ST	MILWAUKEE, WI 53219-4509
CURRENT RESIDENT	3134 S 51ST ST	MILWAUKEE, WI 53219-4512
CURRENT RESIDENT	3136 S 53RD ST	MILWAUKEE, WI 53219-4520
CURRENT RESIDENT	3136A S 53RD ST	MILWAUKEE, WI 53219-4520
CURRENT RESIDENT	3138 S 51ST ST	MILWAUKEE, WI 53219-4512
CURRENT RESIDENT	3139 S 50TH ST	MILWAUKEE, WI 53219-4509
CURRENT RESIDENT	3139A S 50TH ST	MILWAUKEE, WI 53219-4509
CURRENT RESIDENT	3141 S 53RD ST	MILWAUKEE, WI 53219-4521
CURRENT RESIDENT	3144 S 53RD ST	MILWAUKEE, WI 53219-4520
CURRENT RESIDENT	3145 S 50TH ST	MILWAUKEE, WI 53219-4509
CURRENT RESIDENT	3146 S 51ST ST	MILWAUKEE, WI 53219-4512
CURRENT RESIDENT	3147 S 53RD ST	MILWAUKEE, WI 53219-4521
CURRENT RESIDENT	3150 S 51ST ST	MILWAUKEE, WI 53219-4512
CURRENT RESIDENT	3151 S 53RD ST	MILWAUKEE, WI 53219-4521
CURRENT RESIDENT	3153 S 50TH ST	MILWAUKEE, WI 53219-4509
CURRENT RESIDENT	3154 S 53RD ST	MILWAUKEE, WI 53219-4520
CURRENT RESIDENT	3156 S 51ST ST	MILWAUKEE, WI 53219-4512
CURRENT RESIDENT	3159 S 50TH ST	MILWAUKEE, WI 53219-4509
CURRENT RESIDENT	3160 S 51ST ST	MILWAUKEE, WI 53219-4512
CURRENT RESIDENT	3161 S 53RD ST	MILWAUKEE, WI 53219-4521
CURRENT RESIDENT	3170 S 53RD ST	MILWAUKEE, WI 53219-4520
CURRENT RESIDENT	3171 S 53RD ST	MILWAUKEE, WI 53219-4521
CURRENT RESIDENT	3200 S 53RD ST	MILWAUKEE, WI 53219-4522
CURRENT RESIDENT	3201 S 53RD ST	MILWAUKEE, WI 53219-4523
CURRENT RESIDENT	3202 S 51ST ST	MILWAUKEE, WI 53219-4513
CURRENT RESIDENT	3206 S 51ST ST	MILWAUKEE, WI 53219-4513
CURRENT RESIDENT	3206 S 53RD ST	MILWAUKEE, WI 53219-4522
CURRENT RESIDENT	3209 S 53RD ST	MILWAUKEE, WI 53219-4523
CURRENT RESIDENT	3214 S 51ST ST	MILWAUKEE, WI 53219-4513
CURRENT RESIDENT	3216 S 53RD ST	MILWAUKEE, WI 53219-4522
CURRENT RESIDENT	3217 S 50TH ST	MILWAUKEE, WI 53219-4511
CURRENT RESIDENT	3217 S 53RD ST	MILWAUKEE, WI 53219-4523
CURRENT RESIDENT	3217A S 53RD ST	MILWAUKEE, WI 53219-4523
CURRENT RESIDENT	3221 S 53RD ST	MILWAUKEE, WI 53219-4523
CURRENT RESIDENT	3222 S 51ST ST	MILWAUKEE, WI 53219-4513
CURRENT RESIDENT	3222 S 53RD ST	MILWAUKEE, WI 53219-4522
CURRENT RESIDENT	3223 S 50TH ST	MILWAUKEE, WI 53219-4511
CURRENT RESIDENT	3224 S 53RD ST	MILWAUKEE, WI 53219-4522
CURRENT RESIDENT	3227 S 53RD ST	MILWAUKEE, WI 53219-4523
CURRENT RESIDENT	3228 S 51ST ST	MILWAUKEE, WI 53219-4513
CURRENT RESIDENT	3231 S 50TH ST	MILWAUKEE, WI 53219-4511
CURRENT RESIDENT	3232 S 51ST ST	MILWAUKEE, WI 53219-4513
CURRENT RESIDENT	3232 S 53RD ST	MILWAUKEE, WI 53219-4522
CURRENT RESIDENT	3235 S 53RD ST	MILWAUKEE, WI 53219-4523
CURRENT RESIDENT	3237 S 50TH ST	MILWAUKEE, WI 53219-4511
CURRENT RESIDENT	3238 S 51ST ST	MILWAUKEE, WI 53219-4513
CURRENT RESIDENT	3240 S 53RD ST	MILWAUKEE, WI 53219-4522

CURRENT RESIDENT	3243 S 50TH ST	MILWAUKEE, WI 53219-4511
CURRENT RESIDENT	3244 S 51ST ST	MILWAUKEE, WI 53219-4513
CURRENT RESIDENT	3248 S 51ST ST	MILWAUKEE, WI 53219-4513
CURRENT RESIDENT	3250 S 53RD ST	MILWAUKEE, WI 53219-4522
CURRENT RESIDENT	3250A S 53RD ST	MILWAUKEE, WI 53219-4522
CURRENT RESIDENT	3251 S 50TH ST	MILWAUKEE, WI 53219-4511
CURRENT RESIDENT	3254 S 51ST ST	MILWAUKEE, WI 53219-4513
CURRENT RESIDENT	3257 S 50TH ST	MILWAUKEE, WI 53219-4511
CURRENT RESIDENT	3258 S 53RD ST	MILWAUKEE, WI 53219-4522
CURRENT RESIDENT	3260 S 51ST ST	MILWAUKEE, WI 53219-4513
CURRENT RESIDENT	3260A S 51ST ST	MILWAUKEE, WI 53219-4513
CURRENT RESIDENT	3266 S 51ST ST	MILWAUKEE, WI 53219-4513
CURRENT RESIDENT	3266 S 53RD ST	MILWAUKEE, WI 53219-4522
CURRENT RESIDENT	3270 S 51ST ST	MILWAUKEE, WI 53219-4513
CURRENT RESIDENT	3274 S 51ST ST	MILWAUKEE, WI 53219-4513
CURRENT RESIDENT	5010 W EUCLID AVE	MILWAUKEE, WI 53219-4525
CURRENT RESIDENT	5026 W EUCLID AVE	MILWAUKEE, WI 53219-4525
CURRENT RESIDENT	5031 W OKLAHOMA AVE	MILWAUKEE, WI 53219-4545
CURRENT RESIDENT	5213 W OKLAHOMA AVE	MILWAUKEE, WI 53219-4502
CURRENT RESIDENT	5215 W OKLAHOMA AVE	MILWAUKEE, WI 53219-4502
CURRENT RESIDENT	5219 W OKLAHOMA AVE	MILWAUKEE, WI 53219-4502
CURRENT RESIDENT	5221 W OKLAHOMA AVE	MILWAUKEE, WI 53219-4502
CURRENT RESIDENT	5227 W OKLAHOMA AVE	MILWAUKEE, WI 53219-4502
CURRENT RESIDENT	5300 W EUCLID AVE	MILWAUKEE, WI 53219-4427

**Total Records: 80**

**Radius: 250.0 feet and Center of Circle: 3201 S 51st ST**

City Clerk, City of Milwaukee  
City Hall Room 105  
200 East Wells  
Milwaukee, WI 53202-3570

St Sava Serbian Orthodox Church  
Millie Jocovic, President  
3201 S 51st  
Milwaukee, WI 53219

Dear City Clerk,

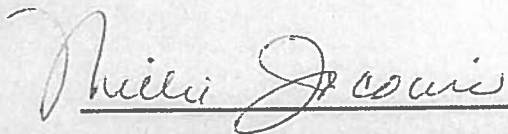
Please be advised that our applications for our annual Serbian Days church festival for 2015 were submitted with incorrect dates for our event. The **correct dates** are EFF: 08/21/2015 EXP 08/23/2015.

**Not 08/28/2015-08/30/2015.**

I am submitting this correction per the instructions of License Specialist Jim Cooney who was the person accepting the original application for both Food and Class B Extension of Premises.

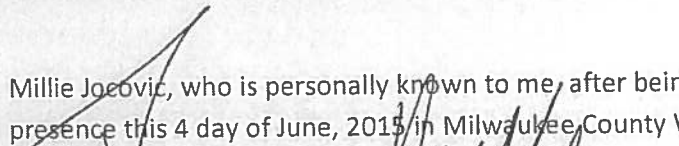
He has also informed us that the person in charge of the event will need to appear in front of the committee due to the current vacancy in Aldermanic District 11. That person, Jovo Oklobdzija, can be notified of the time and place for his appearance at the church's address above.

I sincerely apologize for the error our staff made in the completion of our applications and hope they can be corrected in time for our event. My cell number should you need to contact me is 414-322-0315.

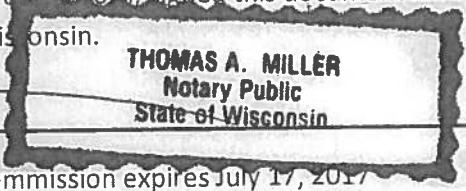


June 4, 2015

Millie Jocovic, President St Sava Serbian Orthodox Church



Millie Jocovic, who is personally known to me, after being duly sworn, signed this document in my presence this 4 day of June, 2015 in Milwaukee County Wisconsin.



**THOMAS A. MILLER**  
Notary Public  
State of Wisconsin

Thomas A Miller, Notary Public, State of Wisconsin. My commission expires July 17, 2017

## APPLICATION FOR TEMPORARY CLASS "B"/CLASS B RETAILER'S LICENSE

See Additional Information on reverse side. Contact the municipal clerk for questions.

FEE \$

☐ Town☐ Village☒ City of MilwaukeeCounty of Milwaukee

The named organization applies for: (check appropriate box(es).)

☒ A Temporary Class "B" license to sell fermented malt beverages at picnics or similar gatherings under s. 125.26(6), Wis. Stats.☒ A Temporary "Class B" license to sell wine at picnics or similar gatherings under s. 125.51(10), Wis. Stats.at the premises described below during a special event beginning 8/28/15 and ending 8/30/15 and agree to comply with all laws, resolutions, ordinances and regulations (state, federal or local) affecting the sale of fermented malt beverages and/or wine if the license is granted.1. ORGANIZATION (check appropriate box) ☐ Bona fide Club ☒ Church ☐ Lodge/Society ☐ Veteran's Organization ☐ Fair Association(a) Name ST SAUA Serbian Orthodox Church(b) Address 3201 S. 51<sup>st</sup> Milwaukee, WI 53219  
(Street)(c) Date organized 1912(d) If corporation, give date of incorporation Not Profit(e) If the named organization is not required to hold a Wisconsin seller's permit pursuant to s. 77.54 (7m), Wis. Stats., check this box: ☒

(f) Names and addresses of all officers:

President MILLIE JACOVIC 4690 N 126<sup>th</sup> Butler, WI 53007Vice President MIRIJAN RAJNOVIC 11926 W. Holt Ave West Allis WI 53227Secretary NADA RAJNOVIC 11926 W. Holt Ave West Allis WI 53227Treasurer GORAN VUKOVIC 15330 W. Harcourt on New Berlin WI 53151(g) Name and address of manager or person in charge of affair: JASO OKLOBAZIJA (414-977-9009) cell 8631 W. Forest Hill Ave. Franklin WI 53132

2. LOCATION OF PREMISES WHERE BEER AND/OR WINE WILL BE SOLD:

(a) Street number 3201 S. 51<sup>st</sup> + 5101 W. Oklahoma Ave Cultural Center

(b) Lot \_\_\_\_\_ Block \_\_\_\_\_

(c) Do premises occupy all or part of building? ALL

(d) If part of building, describe fully all premises covered under this application, which floor or floors, or room or rooms, license is to cover:

3. NAME OF EVENT

(a) List name of the event ST SAUA Serbian Days(b) Dates of event Friday 8/28 - Sun 8/30 2015

## DECLARATION

The Officer(s) of the organization, individually and together, declare under penalties of law that the information provided in this application is true and correct to the best of their knowledge and belief.

ST. SAUA Serbian Orthodox Church  
(Name of Organization)Office Milica B. Jovic 5-24-15  
(Signature/date)Officer \_\_\_\_\_  
(Signature/date)Office Mirijana Rajnovic 5-24-15  
(Signature/date)Officer \_\_\_\_\_  
(Signature/date)

Date Filed with Clerk \_\_\_\_\_

Date Reported to Council or Board \_\_\_\_\_

Date Granted by Council \_\_\_\_\_

License No. \_\_\_\_\_



CITY OF MILWAUKEE  
OFFICE OF THE CITY CLERK

Thursday, June 25, 2015

COMMITTEE MEETING NOTICE

AD 11

PHILBIN, Gary, Agent  
Dollar Tree Stores Inc  
500 Volvo Parkway

Chesapeake, VA 23320

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

**Tuesday, July 07, 2015 at 09:15 AM**

**Regarding:** Your Food Dealer Retail Application as agent for "Dollar Tree Stores Inc" for "Dollar Tree #06067" at 3164 S 76th St.

There is a possibility that your application may be denied for one or more of the following reasons: The recommendation of the committee regarding the application shall be based on evidence presented at the hearing. Per MCO 85-2.7-4, probative evidence concerning whether or not a new license should be granted may be presented on the following subjects: whether or not the applicant meets the municipal requirements, the appropriateness of the location and premises where the licensed premises is to be located and whether use of the premises for the purposes or activities permitted by the license would tend to facilitate a public or private nuisance or create undesirable neighborhood problems such as disorderly patrons, unreasonably loud noise, litter, and excessive traffic and parking congestion. Probative evidence relating to these matters may be taken from the plan of operation submitted with the license application, if any, but shall not include the content of any music. Evidence regarding the fitness of the location of the premises to be maintained as the principal place of business, including but not limited to whether there is an overconcentration of businesses of the type for which the license is sought; whether the proposal is consistent with any pertinent neighborhood business or development plans, or the location's proximity to areas where children are typically present. The applicant's record in operating similarly licensed premises; and whether or not the applicant has been charged with or convicted of any felony, misdemeanor, municipal offense or other offense, the circumstances of which substantially relate to the activity to be permitted by the license being applied for or any other factor which reasonably relates to the public health, safety or welfare may also be considered.

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warrants or unpaid fines:**

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JIM OWCZARSKI, CITY CLERK

BY:

Jason Schunk  
License Division Manager

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

200 E. Wells Street, Room 105, City Hall, Milwaukee, WI 53202. [www.milwaukee.gov/license](http://www.milwaukee.gov/license)  
Phone: (414) 286-2238 Fax: (414) 286-3057 Email Address: [License@milwaukee.gov](mailto:License@milwaukee.gov)



Thursday, June 25, 2015



# Notice of Public Hearing

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PHILBIN, Gary, Agent  
Dollar Tree #06067 at 3164 S 76th St  
Food Dealer Retail Application

**Tuesday, July 07, 2015 at 9:15 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 7/7/2015 at 9:15 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.

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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.
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RESIDENT	MAIL ADDRESS	CITY AND ZIP CODE
CURRENT RESIDENT	3200 S 75TH ST	MILWAUKEE, WI 53219-3746
CURRENT RESIDENT	3200 S 76TH ST 1	MILWAUKEE, WI 53219-3703
CURRENT RESIDENT	3200 S 76TH ST 2	MILWAUKEE, WI 53219-3703
CURRENT RESIDENT	3200 S 76TH ST 3	MILWAUKEE, WI 53219-3703
CURRENT RESIDENT	3208 S 77TH ST	MILWAUKEE, WI 53219-3742
CURRENT RESIDENT	3212 S 76TH ST	MILWAUKEE, WI 53219-3703
CURRENT RESIDENT	3213 S 75TH ST	MILWAUKEE, WI 53219-3747
CURRENT RESIDENT	3214 S 76TH ST	MILWAUKEE, WI 53219-3703
CURRENT RESIDENT	3220 S 76TH ST	MILWAUKEE, WI 53219-3703
CURRENT RESIDENT	3220A S 76TH ST	MILWAUKEE, WI 53219-3703
CURRENT RESIDENT	3221 S 75TH ST	MILWAUKEE, WI 53219-3747
CURRENT RESIDENT	7443 W HONEY CREEK DR	MILWAUKEE, WI 53219-3968
CURRENT RESIDENT	7451 W HONEY CREEK DR	MILWAUKEE, WI 53219-3968
CURRENT RESIDENT	7501 W HONEY CREEK DR	MILWAUKEE, WI 53219-3749

**Total Records: 15**

**Radius: 250.0 feet and Center of Circle: 3164 S 76th ST**





## BUSINESS LICENSE PLAN OF OPERATION

ccl-busplan 3/17/15

Office of the City Clerk License Division

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

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

### 1. Type of Business

Applying for: ☐ Extended Hours Establishment License ☐ Filling Station License ☒ Other (plan of operation for specific license also required)

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

Variety Retail store with prepackage foods  
(no food prep)

Do you have any experience operating this type of business? ☐ No ☒ Yes

If yes, explain: operate over 6,000 stores - been in business since 10/15/1986

### 2. Business Operations

- a. Proposed Opening Date: 7/23/2015
- b. Is this premise under construction? ☐ No ☒ Yes If yes, list estimated completion date: C/S 5/26/15 Est open 7/23/15
- c. Is this a franchise? ☒ No ☐ Yes
- d. Is this premises currently licensed? ☒ No ☐ Yes If yes, list type of license: \_\_\_\_\_
- e. Is the current licensee operating? ☒ No ☐ Yes If no, list date closed: \_\_\_\_\_
- f. Do you have future plans for other businesses, licenses or permits at this location? ☐ No ☒ Yes  
If yes, explain: I will obtain all necessary licenses to operate
- g. Have you previously held an Extended Hours License in Milwaukee? ☒ No ☐ Yes  
If yes, list address(es): \_\_\_\_\_
- h. Are other businesses operating in the same building? ☒ No ☐ Yes If yes, describe: \_\_\_\_\_

### 3. Litter & Noise Control

- a. How are grounds kept clean? ☐ Sweep ☐ Pressure Wash ☐ Pick Up Litter ☒ Hired Maintenance  
☒ Building Owner Responsibility ☐ Garbage Cans Outside ☐ Other: \_\_\_\_\_
- b. How often will grounds be cleaned? ☒ Daily ☐ Weekly ☐ As Needed ☐ Monthly ☐ Other: \_\_\_\_\_
- c. Grounds cleaned by: ☐ Licensee ☒ Building Owner ☐ Employees ☐ Hired Maintenance ☐ Other: \_\_\_\_\_
- d. How are noise issues prevented and/or addressed? ☐ Security ☒ Manager approaches customer(s) ☒ Call Police  
☐ Signs Posted ☐ Other: \_\_\_\_\_  
Will a sound amplification system be used? ☒ No ☐ Yes If yes, describe: \_\_\_\_\_
- e. Are there designated outdoor smoking areas? ☒ No ☐ Yes If yes, describe: \_\_\_\_\_
- f. Number of Garbage Cans: Inside: \_\_\_\_\_ Locations: \_\_\_\_\_  
Outside: \_\_\_\_\_ Locations: \_\_\_\_\_
- g. Is a crowd control barrier used? ☒ No ☐ Yes If yes, describe: \_\_\_\_\_
- h. Describe sanitation facilities (restrooms): 2-unisex restrooms
- i. Name of solid waste contractor: ☐ Advanced Disposal ☐ Waste Management ☐ Other: to be determined

#### 4. Parking & Security

- a. Are there off-street parking places? ☒ No ☐ Yes If yes, how many? \_\_\_\_\_

Describe security plan for parking lot: \_\_\_\_\_

- b. Is there a loading zone? ☐ No ☒ Yes If yes, describe security for loading zone REAR of Bldg

- c. Will you have security personnel on premise? ☒ No ☐ Yes If yes, how many? \_\_\_\_\_

What are their responsibilities? NA

Is security equipment used? ☐ No ☒ Yes If yes, describe Burglar Alarm

List their licensing, certification, or training credentials \_\_\_\_\_

Will there be security cameras? ☐ No ☒ Yes If yes, where? throughout interior

Will searches or identification checks be conducted upon entry? ☒ No ☐ Yes If yes, describe \_\_\_\_\_

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

Alcohol _____%	Food <u>10</u> %	Secondhand Merchandise _____%	Precious Metals & Gems _____%
Entertainment _____%	Cigarettes _____%		
Pawnbroker Activity _____%	Salvaged Materials _____% (such as scrap metal)	Other <u>90</u> % Describe: <u>Variety Retail</u>	

#### 6. Businesses/Licenses on the Premises (check all that apply):

##### Type 1

- |  |   |   |  |
|--|---|---|--|
| <input type="checkbox"/> Full Service Restaurant | <input type="checkbox"/> Cafe/Coffee Shop | <input type="checkbox"/> Deli or Fast Food Restaurant | <input type="checkbox"/> Private/Fraternal/Veterans Club |
| <input type="checkbox"/> Night Club              | <input type="checkbox"/> Tavern           | <input type="checkbox"/> Cocktail Lounge              | <input type="checkbox"/> Teen Club                       |
| <input type="checkbox"/> Bowling Alley           | <input type="checkbox"/> Hotel            | <input type="checkbox"/> Banquet Hall                 | <input type="checkbox"/> Sports Facility                 |

##### Type 2

- |  |   |   |  |
|--|---|---|--|
| <input type="checkbox"/> Liquor Store    | <input type="checkbox"/> Corner Store                     | <input type="checkbox"/> Supermarket                    | <input type="checkbox"/> Convenience Store |
| <input type="checkbox"/> Gas Station     | <input type="checkbox"/> Amusement/Phonograph Distributor | <input type="checkbox"/> Auto Wrecker                   |  |
| <input type="checkbox"/> Used Car Dealer | <input type="checkbox"/> Used Auto Parts                  | <input type="checkbox"/> Personal Service Establishment | <input type="checkbox"/> Recording Studio  |

What other types of licenses/permits will you hold at this location? (check all that apply)

- ☒ Occupancy Permit ☐ Cigarette & Tobacco ☐ Gas Station ☐ Extended Hours ☐ Class "B" Tavern ☒ Weights & Measures  
☐ Secondhand Dealer ☐ Precious Metal & Gem ☒ Other: WI Dept of Revenue Sellers Permit

#### 7. Legal Capacity (only if a Type 1 premises in #6 above)

Capacity NA (Call the Milwaukee Development Center at 414-286-8211 if you have questions.)

## 8. Premises Description

d. Identify all area(s) of the premises that will be used in operating this business (include areas used only for storage):

☒ 1<sup>st</sup> Floor ☐ 2<sup>nd</sup> Floor ☐ Basement Storage ☐ Patio ☐ Beer Garden ☐ Sidewalk Café ☐ Deck ☐ Rooftop

☐ Other: Describe: \_\_\_\_\_

e. Describe Location: ☒ Major Thoroughfare ☐ Secondary Street ☐ Other: \_\_\_\_\_

f. Nearest Major Cross Street: S 76<sup>th</sup> St + W Oklahoma Ave

g. Describe Building: ☐ Free Standing Building ☒ Strip Mall ☐ Other: \_\_\_\_\_

h. Describe Premises Structure: ☒ Single Story ☐ Multi-Story - # of Stories \_\_\_\_\_ ☐ Other: \_\_\_\_\_

i. Describe Surrounding Area: ☒ Commercial ☐ Residential ☐ Industrial ☐ Other: \_\_\_\_\_

j. Property Owner's Name: NDC, LLC Phone Number: 414-761-2040 ext 1

Address: 6312 S 27<sup>th</sup> Street Oak Creek WI 53154

## 9. Hours of Operation & Customers

Will customers be entering the premises? ☐ No ☒ Yes

Day of the Week	Proposed Hours of Operation:		Number of Customers expected each day	Potential Age Range of Customers	Class B Applicants: Age Restriction (If none, write 'None')
	Open (include a.m. or p.m.)	Close (include a.m. or p.m.)			
Sunday	9 AM	9 PM	700	14-80	
Monday	9 AM	9 PM	400	14-80	
Tuesday	9 AM	9 PM	400	14-80	
Wednesday	9 AM	9 PM	400	14-80	
Thursday	9 AM	9 PM	400	14-80	
Friday	9 AM	9 PM	700	14-80	
Saturday	9 AM	9 PM	700	14-80	

Entertainment Indoor Closing Hours - If alcohol beverage establishment, same as alcohol license hours.  
If non-alcohol establishment 1:00 am Sunday to Thursday; 1:30 am Friday and Saturday.

Entertainment Outdoor Closing Hours - 10:00 pm Sunday – Thursday; 12:00 am Friday and Saturday,  
unless otherwise approved by Common Council in licensee's plan of operation.

## 10. Required Signature(s)

  
Sole Proprietor, Partner, Agent, or 20% or more Shareholder

\_\_\_\_\_  
Signature of additional partner or 20% or more Shareholder

See Application Information for a list of all required application forms.



# FOOD DEALER LICENSE PLAN OF OPERATION

OFFICE OF THE CITY CLERK, LICENSE DIVISION

CITY HALL, 200 E. WELLS ST, ROOM 105, MILWAUKEE, WI 53202 •

(414) 286-2238 • [license@milwaukee.gov](mailto:license@milwaukee.gov) • [www.milwaukee.gov/license](http://www.milwaukee.gov/license)Legal Entity Name: Dollar Tree Stores, IncPremises Address: 3164 S 76th Street AKA 2519 W Oklahoma Avenue1. Application Type Milwaukee, WI 53219

Is this a new food business or are you taking over a food business which is currently operating?

☐ Taking over a currently operating, licensed food business☒ New business (includes taking over a closed food business)

Will you be sharing kitchen space with another food establishment?

☐ Yes, I intend to rent space in my kitchen to other food businesses☐ Yes, I am renting space from another food business which will also be using the kitchen\*☒ No, I will be the only food business using the space PRE PACKAGE FOODS ONLY

\*If renting space in a commercial kitchen with another operator, a completed and signed Shared Kitchen Agreement is required.

The form is available at [www.milwaukee.gov/license](http://www.milwaukee.gov/license)

Provide a brief description of the food establishment.

VARiety RETAIL store with PRE PACKAGE FOODS ONLY

Attach a copy of your menu or general listing of the types of food products that will be sold. Indicate what information you will be including:

☐ Menu☒ List of the types of products (for example: packaged foods, deli case, meat department)

What is the anticipated opening date or date of change of ownership:

7/23/2015

## 2. Construction, Remodeling and Equipment

Are 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 installation/change/replacement of food equipment

Provide a brief summary of the proposed construction, remodeling and/or equipment change:

Demolish Existing interior finishes  
Build new interior walls, paint, and install fixtures

Note: Building permits may be required. Contact the City of Milwaukee Development Center.

Date alterations/changes planned to begin 5/26/2015

Name, address and phone number of architect

Lingle Design 158 West Main Street Lena, IL 61048  
815-369-9155

Name, address and phone number of general contractor

HARDcastle 26800 Highway 74 Washington, OK 73093405-288-2311

### 3. Premises Description

Will food be prepared or sold at a single or multiple food preparation and/or sale sites (for example a hotel with multiple dining rooms or bars):

☒ 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:

PRE PACKAGE ONLY

Are any outdoor operations planned? ☐ Yes ☒ No

If yes, what activities will be conducted outdoors (check all that apply):

☐ Bar ☐ Cooking/Grilling ☐ Dining – Patio ☐ Dining – Sidewalk (DPW permit required) ☐ Storage

☐ Other, specify

Seating provided on site for dining? ☐ Yes ☐ No ☒ NA

If yes, are there additional banquet facilities other than the main dining area? ☐ Yes ☐ No ☒ NA

Total square footage of the establishment (exclude space utilized for other purposes other than food)

Number of Full Time Employees

Number of Part Time Employees

### 4. Business Type

Establishment Type (select the one that best describes the proposed business)

☐ **Bed and Breakfast**

☐ **Community Food Program** – free meal site or food pantry. Any site where all food is provided free of cost to those in need, or to organizations serving persons in need.

☐ **Distiller or Brewer** – facilities that are primarily engaged in the production of alcoholic beverages

☐ **Food Distributor** – a business that transports food for sale to retail and wholesale establishments and does not perform any food items

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 sold 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 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 businesses whose primary business is other than food (book store, pharmacy, etc.), but offer convenience food items.

If Food store, are you considered a convenience food store (see definition below)? ☐ 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

☐ **School** – educational institution including elementary, middle and high schools. Check type:

☐ **Satellite Kitchen** is a school kitchen with limited food preparation including reheating or holding of cooked food, storage of cold ready-to-eat food items and portioning and serving of bulk requiring no on-site preparation for service

☐ **Production Kitchen** is a school kitchen in which food preparation activities beyond reheating, portioning and hot and cold holding are performed

☐ **Restaurant** is a school kitchen operated by an outside entity or contractor, any school meal program not directly operated by the schools

☐ **Restaurant** – a food establishment in which the majority food sales consist of meals or other items ready for immediate consumption

☐ **Shared Kitchen, Commissary or Base** – a commercial kitchen used for the production of food to be served or sold at another location; a base of operations for a food peddler caterer or seasonal market vendor

☐ **Tavern** – a food establishment in which food sales are limited to beverages, primarily intoxicating beverages

#### 4. Business Type (Continued)

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)  
☐ % from grocery items (foods typically requiring preparation before serving, includes typical grocery items, beverages, bakery items and raw produce)

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 reasons why the food will be transported:

- ☐ Catering ☐ Delivery ☐ Base for Mobile Food Peddler ☐ Base for temporary or seasonal food stand

☐ Other-Describe:

#### 5. ISSUANCE OF LICENSE

Will any alcohol or intoxicating beverages be sold at the establishment? ☐ Yes ☒ No

If yes, what type of license do you have or will you be applying for?

- ☐ Class A fermented malt beverage license ☐ Class A liquor license  
☐ Class B fermented malt beverage licenses ☐ Class B liquor license  
☐ Class C wine license

If yes, if your food license is approved prior to the alcohol license, when would you like the food license issued?

- ☐ immediately so you can open your food business ☐ at the same time as the alcohol license

#### 6. AFFIRMATION OF UNDERSTANDING – PERMIT NEEDED TO OPERATE

Read and initial each item confirming your understanding:

GP  
GP

I understand that an inspection and sign off by the Health Department is required before my permit may be issued.

I understand that the Health Department will review my application and will update the application based on what is observed during my onsite inspection. My representative onsite at the time of inspection must have the authority to approve corrections to my application.

GP

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.

GP

I understand that the Department of Neighborhood Services must sign off on my application with the License Division before my permit may be issued.

GP

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 appeal and be scheduled for a hearing before the License Committee of the Common Council.

GP

I understand that the License Division must have proof of payment for the associated permit fees before my permit may be issued.

GP

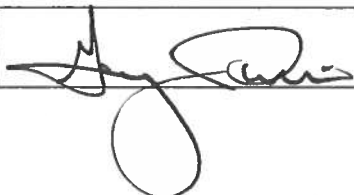
I understand that all of the above must be complete before my permit is eligible to be issued.

GP  
GP

I understand that the license for which I am applying must be issued and posted in my business premises prior to opening for business.

I, GARY Philbin, will not operate my food business, until the permit has been issued and posted in the establishment.  
Name of Applicant

Signature of  
Applicant:



Date:

5/28/2015

## *Dollar Tree Stores*

### *Pre-packaged Food Category List*

Cookies  
Crackers  
Fruit Snacks  
Pretzels  
Chips  
Nuts  
Popcorn  
Meat Snacks (Beef Jerky)  
Canned Vegetables  
Canned Fruits  
Canned Meats/Seafood  
Boxed Dinners (Mac & Cheese, Instant Potatoes, Bagged Rice, etc.)  
Pasta Noodles & Sauce  
Baking (Cake/Cookie Mixes)  
Cooking Oils  
Desserts (Pudding, Apple Sauce)  
Pickles & Condiments  
Soups  
Breakfast Foods (Oatmeal, Syrup, Breakfast Bars, etc.)  
Bottled/ Pre-packaged Drinks (Water, Soda, Juice, Tea, Instant Coffee, etc.)  
Bagged/ Boxed Candy (Chocolate, Gum, Fruit Candies, Mints, etc.)

### *Freezer/Coolers*

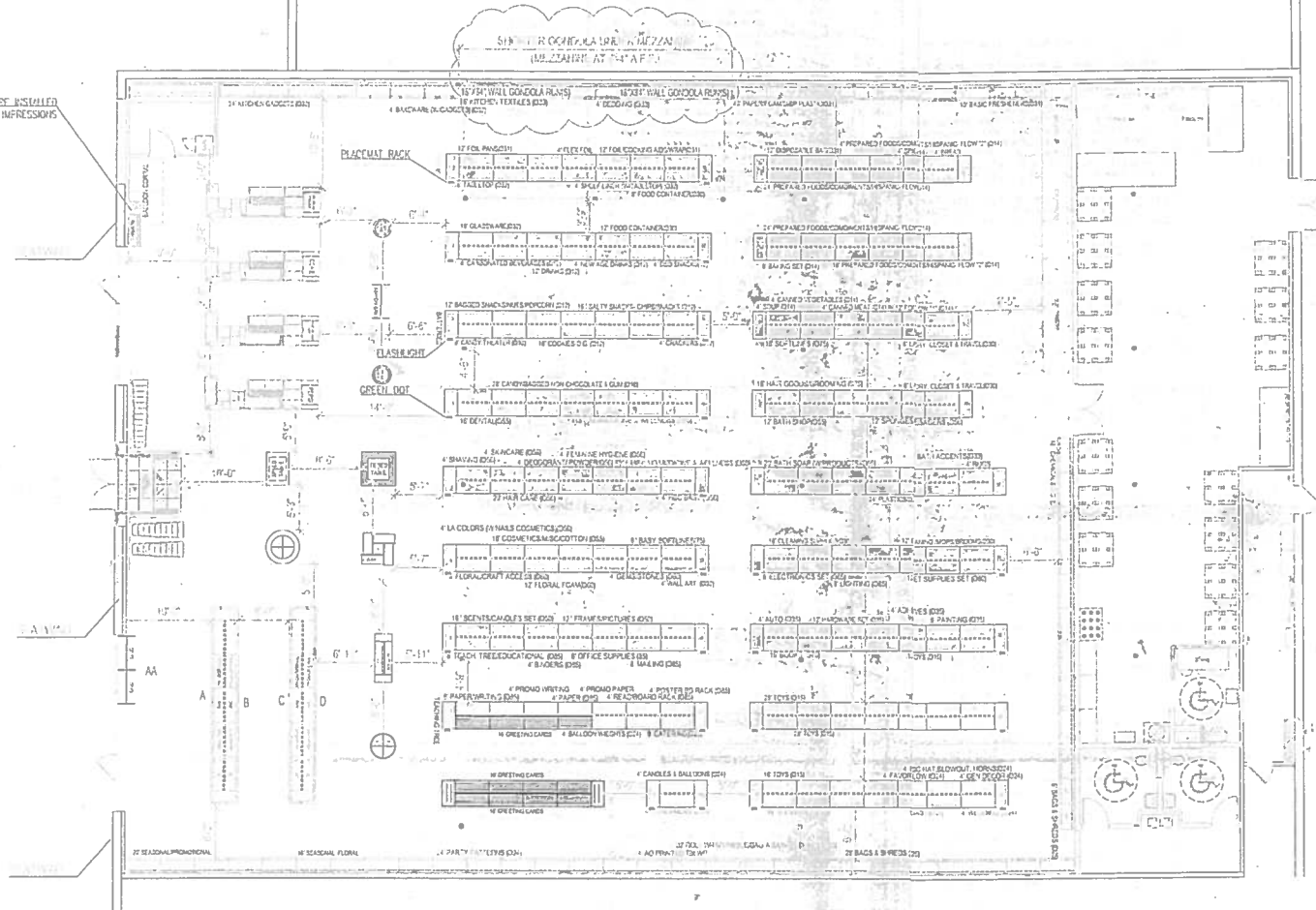
Dairy (Milk, Shelled Eggs, Yogurt, Cheese)  
Fruits/Vegetables (Frozen)  
Meat/Frozen Fish  
Flavored Drinks  
Frozen Pizzas  
Frozen Burritos  
Frozen Breakfast Foods (Waffles, French Toast Sticks)  
Frozen Desserts  
Frozen Dinners

### *Ice Cream Bunkers*

Pre-packaged single serve ice cream

**\*\*All items are pre-packaged**

**\*\*There is no food preparation or food handling**



CHECK LANES (MERCH)  
C = 4

STORE NO: 6067  
TRI CITY BANK CENTER  
MILWAUKEE, WI

BY	DESCRIPTION	REV DATE	REV NO.	BY	DESCRIPTION
	M.D.R. TRANSFER ALL STORE FIXTURES				
	FROM DOLLAR TREE 5263.				

## STORE PLANNING

DATE: 04/28/2015      DRAWN BY: SSG

SQUARE FOOTAGE	
TOTAL SPACE LEASED	12,830 SF
SALES FLOOR AREA	10,635 SF
USABLE SALES FLOOR	10,293 SF
USABLE STOCK ROOM	1,284 SF 100 %
CEILING HEIGHT	10'-5"
TOTAL LINEAR FEET	

DATE: 4/19/15 DRAWN BY: CA  
DOLLAR TREE LAYOUT





CITY OF MILWAUKEE  
OFFICE OF THE CITY CLERK

Thursday, June 25, 2015

COMMITTEE MEETING NOTICE

AD 11

THOMAS, Jane A, Agent  
AMF BOWLING CENTERS, INC  
7313 Bell Creek Rd

Mechanicsville, VA 23111

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

**Tuesday, July 07, 2015 at 09:15 AM**

**Regarding:** Your Class B Tavern License Transfer - Change of Hours To Open Sun 4PM-12AM, Mon 12PM-11PM, Tues 4PM-11PM, Wed 9AM-11PM, Thurs 4PM-2AM, Fri 10AM-2AM, and Sat 10AM-11PM Instead of Opening 10AM Sat-Sun and 11AM Mon-Fri and Closing 12AM Sun-Thurs and 2AM Fri-Sat as agent for "AMF BOWLING CENTERS, INC" for "AMF WEST LANES" at 7505 W OKLAHOMA Av.

There is a possibility that your application may be denied for one or more of the following reasons: The recommendation of the committee regarding the application shall be based on evidence presented at the hearing. Per MCO 85-2.7-4, probative evidence concerning whether or not a new license should be granted may be presented on the following subjects: whether or not the applicant meets the municipal requirements, the appropriateness of the location and premises where the licensed premises is to be located and whether use of the premises for the purposes or activities permitted by the license would tend to facilitate a public or private nuisance or create undesirable neighborhood problems such as disorderly patrons, unreasonably loud noise, litter, and excessive traffic and parking congestion. Probative evidence relating to these matters may be taken from the plan of operation submitted with the license application, if any, but shall not include the content of any music. Evidence regarding the fitness of the location of the premises to be maintained as the principal place of business, including but not limited to whether there is an overconcentration of businesses of the type for which the license is sought; whether the proposal is consistent with any pertinent neighborhood business or development plans, or the location's proximity to areas where children are typically present. The applicant's record in operating similarly licensed premises; and whether or not the applicant has been charged with or convicted of any felony, misdemeanor, municipal offense or other offense, the circumstances of which substantially relate to the activity to be permitted by the license being applied for or any other factor which reasonably relates to the public health, safety or welfare may also be considered.

**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:

Jason Schunk  
License Division Manager

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

200 E. Wells Street, Room 105, City Hall, Milwaukee, WI 53202. [www.milwaukee.gov/license](http://www.milwaukee.gov/license)  
Phone: (414) 286-2238 Fax: (414) 286-3057 Email Address: [License@milwaukee.gov](mailto:License@milwaukee.gov)



CITY OF MILWAUKEE  
OFFICE OF THE CITY CLERK

Thursday, June 25, 2015

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AD 11

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7505 W Oklahoma Ave

Milwaukee, WI 53219

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200 E. Wells Street, Room 105, City Hall, Milwaukee, WI 53202. [www.milwaukee.gov/license](http://www.milwaukee.gov/license)  
Phone: (414) 286-2238 Fax: (414) 286-3057 Email Address: [License@milwaukee.gov](mailto:License@milwaukee.gov)



Thursday, June 25, 2015



# Notice of Public Hearing

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THOMAS, Jane A, Agent

AMF WEST LANES at 7505 W OKLAHOMA Av

Class B Tavern License Transfer - Change of Hours To Open Sun 4PM-12AM, Mon 12PM-11PM, Tues 4PM-11PM, Wed 9AM-11PM, Thurs 4PM-2AM, Fri 10AM-2AM, and Sat 10AM-11PM  
Instead of Opening 10AM Sat-Sun and 11AM Mon-Fri and Closing 12AM Sun-Thurs and 2AM Fri-Sat

**Tuesday, July 07, 2015 at 9:15 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 7/7/2015 at 9:15 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.

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## Important details for those wishing to provide information for the Licenses Committee to consider when making its recommendation:

1. The license application is scheduled to be heard at the above time. Due to other hearings running longer than scheduled, you may have to wait some time to provide your testimony.
2. You must appear in person and testify as to matters that you have personally experienced or seen. (You cannot provide testimony for your neighbor, parent or anyone else; this is considered hearsay and cannot be considered by the committee.)
3. No letters or petitions can be accepted by the committee (unless the person who wrote the letter or the persons who signed the petition are present at the committee hearing and willing to testify).
4. Persons opposed to the license application are given the opportunity to testify first; supporters may testify after the opponents have finished.
5. When you are called to testify, you will be sworn in and asked to give your name, and address. (If your first and/or last names are uncommon please spell them.)
6. You may then provide testimony.
  - a. Include only information relating to the above license application.
  - b. Include only information you have personally witnessed or seen.
  - c. Provide concise and relevant information detailing how this business has affected or may affect the peaceful enjoyment of your neighborhood.
  - d. If by the time you have the opportunity to testify, the information you wish to share has already been provided to the committee, you may state that you agree with the previous testimony. Redundant or repetitive testimony will not assist the committee in making its recommendation.
7. After giving your testimony, the members of the Licenses Committee and the licensee may ask questions regarding the testimony you have given or other factors relating to the license application.
8. Business Competition is not a valid basis for denial or non-renewal of a license.  
**Please Note: If you have submitted an objection to the above application your objection cannot be considered by the committee unless you personally testify at the hearing.**

RESIDENT	MAIL ADDRESS	CITY AND ZIP CODE
CURRENT RESIDENT	3200 S 75TH ST	MILWAUKEE, WI 53219-3746
CURRENT RESIDENT	3213 S 75TH ST	MILWAUKEE, WI 53219-3747
CURRENT RESIDENT	7328 W HONEY CREEK DR 1	MILWAUKEE, WI 53219-3965
CURRENT RESIDENT	7328 W HONEY CREEK DR 2	MILWAUKEE, WI 53219-3965
CURRENT RESIDENT	7328 W HONEY CREEK DR 3	MILWAUKEE, WI 53219-3965
CURRENT RESIDENT	7328 W HONEY CREEK DR 4	MILWAUKEE, WI 53219-3965
CURRENT RESIDENT	7400 W FERNWOOD CIR 1	MILWAUKEE, WI 53219-3948
CURRENT RESIDENT	7400 W FERNWOOD CIR 2	MILWAUKEE, WI 53219-3948
CURRENT RESIDENT	7400 W FERNWOOD CIR 3	MILWAUKEE, WI 53219-3948
CURRENT RESIDENT	7400 W FERNWOOD CIR 4	MILWAUKEE, WI 53219-3948
CURRENT RESIDENT	7401 W FERNWOOD CIR 1	MILWAUKEE, WI 53219-3950
CURRENT RESIDENT	7401 W FERNWOOD CIR 2	MILWAUKEE, WI 53219-3950
CURRENT RESIDENT	7401 W FERNWOOD CIR 3	MILWAUKEE, WI 53219-3950
CURRENT RESIDENT	7401 W FERNWOOD CIR 4	MILWAUKEE, WI 53219-3950
CURRENT RESIDENT	7401 W HONEY CREEK DR	MILWAUKEE, WI 53219-3968
CURRENT RESIDENT	7404 W FERNWOOD CIR 1	MILWAUKEE, WI 53219-3970
CURRENT RESIDENT	7404 W FERNWOOD CIR 2	MILWAUKEE, WI 53219-3970
CURRENT RESIDENT	7404 W FERNWOOD CIR 3	MILWAUKEE, WI 53219-3970
CURRENT RESIDENT	7404 W FERNWOOD CIR 4	MILWAUKEE, WI 53219-3970
CURRENT RESIDENT	7406 W FERNWOOD CIR 1	MILWAUKEE, WI 53219-3952
CURRENT RESIDENT	7406 W FERNWOOD CIR 2	MILWAUKEE, WI 53219-3952
CURRENT RESIDENT	7406 W FERNWOOD CIR 3	MILWAUKEE, WI 53219-3952
CURRENT RESIDENT	7406 W FERNWOOD CIR 4	MILWAUKEE, WI 53219-3952
CURRENT RESIDENT	7408 W FERNWOOD CIR 1	MILWAUKEE, WI 53219-3953
CURRENT RESIDENT	7408 W FERNWOOD CIR 2	MILWAUKEE, WI 53219-3953
CURRENT RESIDENT	7408 W FERNWOOD CIR 3	MILWAUKEE, WI 53219-3953
CURRENT RESIDENT	7408 W FERNWOOD CIR 4	MILWAUKEE, WI 53219-3953
CURRENT RESIDENT	7409 W HONEY CREEK DR	MILWAUKEE, WI 53219-3968
CURRENT RESIDENT	7410 W FERNWOOD CIR 1	MILWAUKEE, WI 53219-3954
CURRENT RESIDENT	7410 W FERNWOOD CIR 2	MILWAUKEE, WI 53219-3954
CURRENT RESIDENT	7410 W FERNWOOD CIR 3	MILWAUKEE, WI 53219-3954
CURRENT RESIDENT	7410 W FERNWOOD CIR 4	MILWAUKEE, WI 53219-3954
CURRENT RESIDENT	7414 W FERNWOOD CIR 1	MILWAUKEE, WI 53219-3955
CURRENT RESIDENT	7414 W FERNWOOD CIR 2	MILWAUKEE, WI 53219-3955
CURRENT RESIDENT	7414 W FERNWOOD CIR 3	MILWAUKEE, WI 53219-3955
CURRENT RESIDENT	7414 W FERNWOOD CIR 4	MILWAUKEE, WI 53219-3955
CURRENT RESIDENT	7417 W HONEY CREEK DR	MILWAUKEE, WI 53219-3968
CURRENT RESIDENT	7420 W FERNWOOD CIR 1	MILWAUKEE, WI 53219-3956
CURRENT RESIDENT	7420 W FERNWOOD CIR 2	MILWAUKEE, WI 53219-3956
CURRENT RESIDENT	7420 W FERNWOOD CIR 3	MILWAUKEE, WI 53219-3956
CURRENT RESIDENT	7420 W FERNWOOD CIR 4	MILWAUKEE, WI 53219-3956
CURRENT RESIDENT	7421 W FERNWOOD CIR 1	MILWAUKEE, WI 53219-3957
CURRENT RESIDENT	7421 W FERNWOOD CIR 2	MILWAUKEE, WI 53219-3957
CURRENT RESIDENT	7421 W FERNWOOD CIR 3	MILWAUKEE, WI 53219-3957
CURRENT RESIDENT	7421 W FERNWOOD CIR 4	MILWAUKEE, WI 53219-3957
CURRENT RESIDENT	7425 W HONEY CREEK DR	MILWAUKEE, WI 53219-3968
CURRENT RESIDENT	7435 W HONEY CREEK DR	MILWAUKEE, WI 53219-3968
CURRENT RESIDENT	7443 W HONEY CREEK DR	MILWAUKEE, WI 53219-3968
CURRENT RESIDENT	7451 W HONEY CREEK DR	MILWAUKEE, WI 53219-3968
CURRENT RESIDENT	7501 W HONEY CREEK DR	MILWAUKEE, WI 53219-3749

**Total Records: 51**

**Radius: 250.0 feet and Center of Circle: 7505 W Oklahoma AV**

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# ALCOHOL BEVERAGE & FOOD ESTABLISHMENTS REQUEST TO CHANGE HOURS OF OPERATION, FLOOR PLAN, BUSINESS OPERATIONS AND/OR AGE RESTRICTION

OFFICE OF THE CITY CLERK LICENSE DIVISION  
200 E. WELLS ST. ROOM 105, MILWAUKEE, WI 53202  
(414) 286-2238 EMAIL: [LICENSE@MILWAUKEE.GOV](mailto:LICENSE@MILWAUKEE.GOV)

Check License Type(s): ☒ Alcohol Beverage ☒ Food

Legal Entity Name (Individual, Partnership, Corporation or LLC): *AMF Bowling Centers Inc.*

Agent's Name (Corp/LLC): *Jane Thomas.*

Trade Name: *AMF West Lanes.*

Business Address (include city/state/zip code): *7505 W. OKLAHOMA Ave., Milwaukee, WI 53219* Aldermanic District: *II*

Mailing Address: Identify the address where all correspondence from the License Division should be sent. Check (✓) one:

☐ Same as Business Address above

☐ Same as Home Address as follows: \_\_\_\_\_ (include city/state/zip code)

☒ Other as follows: *7313 Bull Creek Rd, Mechanicsville, VA 23111* (include city/state/zip code)

Business E-mail Address: *Lgonzalez@AMF.COM.* Business Phone Number: *414-321-5050* Business Fax Number: *414-321-8429*

## REQUEST TO CHANGE HOURS OF OPERATION AS FOLLOWS:

Day of the Week	Current Hours of Operation:		Proposed Hours of Operation:		Number of Customers expected each day	Class B Taverns: Age Restriction for each day (if over 21) (This is optional) If none, write "none"
	Open	Close	Open	Close		
Sunday	10:00 AM.	12:00 AM.	4:00 PM.	12:00 AM.		2015 JUN - 8 A 12:45 CITY OF MILWAUKEE LICENSE DIVISION
Monday	<del>11:00 AM</del> 4:00 PM	<del>12:00 AM</del> 11:00 PM.	12:00 NOON	11:00 PM.		
Tuesday	<del>9:00 AM</del> 4:00 PM	<del>12:00 AM</del> 11:00 PM.	4:00 PM.	11:00 PM.		
Wednesday	<del>11:00 AM</del> 4:00 PM	<del>12:00 AM</del> 11:00 PM.	9:00 AM	11:00 PM.		
Thursday	<del>11:00 AM</del> 4:00 PM	<del>12:00 AM</del> 11:00 PM.	4:00 PM	2:00 AM.		
Friday	<del>11:00 AM</del> 4:00 PM.	2:00 AM.	10:00 AM.	2:00 AM.		
Saturday	10:00 AM.	2:00 AM.	10:00 AM	11:00 PM.		

Office Use Only:

Filed 6-10-15 Initials JK Food App# 212620 Alcohol App# 212620 LC \_\_\_\_\_ Granted \_\_\_\_\_

☒ Remove from MPD queue ☒ Give application directly to manager and 2) send an email to the primary specialist to advise

7/7 9:15  
250'

Prohibited Hours of Operation: Class A: 9:00 PM to 8:00 AM  
Class B/C: Monday thru Friday 2:00 AM – 6:00 AM; Class B/C: Saturday thru Sunday 2:30 AM – 6:00 AM  
Food: 12:00 AM to 5:00 AM (unless an Extended Hours license is also held)

**REQUEST TO CHANGE FLOOR PLAN AS FOLLOWS:**

New floor plan(s) must be submitted with this application.  
(See next page for detailed floor plan instructions.)

**\*\* This form should be used for 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, do NOT complete this form. A Permanent Extension of Premises is required.**

**REQUEST TO CHANGE BUSINESS OPERATIONS AS FOLLOWS:**

Current business operations: \_\_\_\_\_

Proposed change(s) to the business operations: \_\_\_\_\_

As a result of the changes you are requesting, are there changes being made to the:

Plan of Operation ☒ No ☐ Yes If yes, submit an updated Plan of Operation Supplement  
Floor Plan ☒ No ☐ Yes If yes, submit an updated Floor Plan

Subscribed and sworn to before me

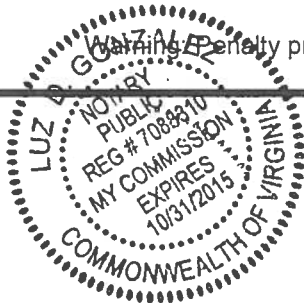
this 29 day of May, 2015.

My Notary Seal  
Notary Public, State of Virginia  
My commission expires: 10/31/15  
Notary Seal must be affixed

Burt

Print Name of Individual, Partner, Agent, or 20% or more  
Shareholder

Signature of Individual, Partner, Agent, or 20% or more  
Shareholder



Warning: Penalty provided for submitting false statements and affidavits with this application.