

### CITY OF MILWAUKEE OFFICE OF THE CITY CLERK

Wednesday, October 31, 2018

#### **COMMITTEE MEETING NOTICE**

AD 09

HILL, Joyce, Agent Retox Martini Lounge LLC 8555 N SERVITE DR

Milwaukee, WI 53223

You are requested to attend a hearing which is to be held in Common Council Chamber, Third Floor, City Hall on:

### Monday, November 05, 2018 at 08:30 AM

Regarding:

Your Class B Tavern and Public Entertainment Premises License Renewal Applications as agent for "Retox Martini Lounge LLC" for "Retox Martini Lounge" at 6901 W Brown Deer Rd.

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.

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

your Colon

BY: Jessica Celella

License Division Manager

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

## MILWAUKEE POLICE DEPARTMENT LICENSING

CRIMINAL RECORD/ORDINANCE VIOLATION/INCIDENTS
SYNOPSIS

| DATE: | 10/03/2018 | 2 |
|-------|------------|---|
| D~1L, | 10/00/2010 | , |

LICENSE TYPE: Class B Tavern

lass B Tavern

New: ☐ Renewal: ⊠

License Location: 6901 W Brown Deer Rd

Licensee/Applicant: Hill, Joyce M

Business Name: Retox Martini Lounge LLC

(Last Name, First Name, MI)

Date of Birth: 03/02/1953

Home Address: 8555 N Servite Dr.

City: Milwaukee

State: WI Zip Code: 53233

No. 281748

Application Date: 10/01/2018

Home Phone:

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

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

1. On 09/27/2018 at 12:15pm officers, along with Agent William GRAY from the WI Department of Revenue, conducted a license premise check at 6901 W. Brown Deer Rd. The officer found the sole employee, Cheree PERRYMAN, in the kitchen area. The officers observed the establishments licenses were not posted and found several items for smoking Hookah. The officers observed several open containers of liquor with a large funnel next to them. They also observed several boxes of liquor with labels from Express Liquor Store. The applicant arrived on scene and stated she has not displayed he licenses. Her son, Larry WILLIAMS, could not find invoices for the liquor and stated he has bought liquor from the store on occasion because the distributor was closed or has a poor selection. He stated he did not know this was illegal. The officers seized 271 bottles of liquor and a package of hookah tobacco. The applicant was issued citations for not having a bartender on the premise and failure to display licenses.

Charge 1: Responsible person on Premise

2: Failure to Display License

Finding 1: pending initial appearance 11/13/2018

2: pending initial appearance 11/13/2018

Sentence 1:

2:

Date:

Citation #1: J980X0Q6SM

2: M581351TJR

### Milwaukee Police Department

749 W. State Street Milwaukee, WI 53233

414-933-4444

Case #:182700066

OtherEvent #: 18-LP-0373

×

#### Incident

### 6901 W BROWN DEER RD Milwaukee, WISCONSIN 53223

Incident Date/Time::

09/27/2018 12:15:54

**CAD Number::** 

182701186

District::

Beat::

420

Reporting Area::

33

### **Business Agent (1)**

Licensed Premise Data (1)

#### HILL, JOYCE MARIE

Person Involvement: (Must choose

AGENT from drop down): DOB::

03/02/1953

Sex::

**FEMALE** 

Race::

**BLACK/AFRICAN AMERICAN** 

Address::

8555 N SERVITE DR

City::

MILWAUKEE

State::

WISCONSIN

Zip Code::

53218

### **RETOX MARTINI LOUNGE**

Address::

6901 W BROWN DEER RD

City::

Milwaukee

State::

WISCONSIN 53223

Zip Code:;

License Type::

**Alcohol** 

Licensee Notification Was Made::

Yes

Licensee Notified Date/Time::

09/27/2018 12:30:00

J980X0Q6SM

Business Was Cited For Violation:: Yes

Citation Number: (Additional

Citations List in Narrative):

90-8-1

Violation/Ordinance Number::

Licensee was cooperative: (if not explain in narrative):

Yes

Licensee or Manager was on

premises at time of violation/incident::

Nο

### Narrative (1)

### **INITIAL INVESTIGATION**

Stoebich, Joseph R 022644

09/28/2018

This report is written by P.O. Joseph STOEBICH assigned to District 4 Early Shift, Squad 4238.

Printed On10/01/2018

Page 1 of 2

Printed By Novak, David

### Milwaukee Police Department

749 W. State Street Milwaukee, WI 53233 414-933-4444

Case #:182700066

OtherEvent #: 18-LP-0373

×

On Thursday September 28, 2018 I was assigned to work with Special Agents William GRAY and Mario ALTUZAR of the State of Wisconsin Department of Revenue to conduct business inspections in District 4. At 12:15pm we conducted an inspection of Retox Martini Lounge located at 6901 W. Brown Deer Rd. The location is a bar and night club that sells food and alcohol.

Upon arrival the only employee in the building was Cheree C. PERRYMAN (b/f 1-30-77). She stated she helps the cook in the back room of the kitchen and she is currently the only employee inside while the cook is running errands.

We conducted an inspection of the premises and we did not observe the license or permit displayed in the premises. We observed several dozen hookahs on shelves between the kitchen and bar with a point of sale machine nearby. We observed several of the hookahs filled with tobacco wrapped in tin foil. We observed several dozen individually wrapped mouth pieces for hookahs. We observed two open containers of hookah tobacco and one sealed container of hookah tobacco. The premises does not have a tobacco license.

We observed in the office several open containers of liquor as well as a large funnel next to them. We observed several boxes of liquor and beer labeled from Express Liquor Store Milwaukee 3833 N. Teutonia Ave. We did not observe any invoices inside the premises. PERRYMAN called the owner, Joyce M. HILL (b/f 3-2-53), and her son, Larry B. WILLIAMS (b/m 6-29-75), who arrived on scene during the inspection. HILL stated she has not displayed her permit or license.

WILLIAMS stated he could not find the invoices for the liquor or beer and they are not on site. WILLIAMS stated on several occasions he has bought liquor and beer from liquor stores to sell at the bar, WILLIAMS stated he does this because vendors do not have a large variety of alcohol and they are not open at night. WILLIAMS stated he did not know this was illegal.

We seized 271 bottles of wine, liquor, and beer from the premises that were not found on any invoices. We seized an unopened package of hookah tobacco. A property receipt was issued.

I issued citation #J980X0Q6SM for not having a bartender or licensee on the premises at the time of the inspection. I issued citation #M581351TJR for not displaying any license or permit on the premises.

| Office | er (2) |
|--------|--------|
|        |        |

Reporting Officer:

Stoebich, Joseph R (022644)

09/28/2018 15:31:00

Section: (Work Location):

42

Approving Officer:

Barchus, Diana S (013430)

09/28/2018 19:07:48

Section: (Work Location):

42

2018-2019 Plan of Operation for 6901 W BROWN DEER RD

| 1. Litter & Security Plans  |  |  |  |
|---|--|--|--|
| How are the grounds kept clean? Sweep Pressure Wash Pick Up Litter Other:   |  |  |  |
| How often will grounds be cleaned? Daily Weekly Other:  |  |  |  |
| Who cleans the grounds?   |  |  |  |
| How are noise issues prevented and/or addressed? Security Manager approaches customer(s) Call Police Signs Posted Other:  |  |  |  |
| Are there designated outdoor smoking areas? \(\begin{align*}\text{No \$\mathbb{U}\$ Yes & If \$\mathbb{A}\est{es}\$, \(\begin{align*}\text{D}\text{No }\text{\$\mathbb{U}\$ Yes & If \$\mathbb{A}\est{es}\$, \(\begin{align*}\text{D}\text{No }\text{\$\mathbb{U}\$ Yes & If \$\mathbb{A}\est{es}\$, \(\begin{align*}\text{D}\text{No }\text{\$\mathbb{U}\$ Yes & If \$\mathbb{A}\est{es}\$, \(\beta\text{D}\text{No }\text{\$\mathbb{U}\$ Yes & If \$\mathbb{A}\est{es}\$, \(\beta\text{No }\text{\$\mathbb{U}\$ Yes & If \$\mathbb{A}\est{es}\$, \(\beta\text{No }\text{\$\mathbb{M}\$ Yes & If \$\mathbb{M}\$ Yes & If \$M | escribe: 4 Feet From Front doors   |  |  |
| · · · · · · · · · · · · · · · · · · ·   | tchen Bar Area   |  |  |
| Oytside 4 Locations: B  | ack of Building  |  |  |
| Is a crowd control barrier used? 🗘 No 🗌 Yes If Yes, Describe:   |  |  |  |
| Number of restrooms: 4 Name o   | fsolid waste contractor: City of milwaukee   |  |  |
| Are there parking spaces on the premises? □ No Wes If Yes, list number of spaces 200 and describe security plans:   |  |  |  |
| Lot Patroll And Door Security  Are there designated loading areas? ☐ No ☑ Yes If Yes, describe security plans:  |  |  |  |
|   |  |  |  |
| Back of Bullding  Do you have security personnel on the premise? \( \text{No   Yes, how many   100 \( \text{2 people} \)  |  |  |  |
| AND What are their responsibilities? Maintain Order + Satety 1 Special events   |  |  |  |
|   |  |  |  |
| List their licensing, certification or training credentials:  | ecurity Agency   |  |  |
| Are there security cameras? No V Yes If Yes, list all locations:  | tchen And Frontoutside + Bar Area  |  |  |
| Are searches and/or identification checks conducted upon entry? \(\subseteq\) No  | Yes If Yes, describe:  |  |  |
| 2. Percentage of Sales (must total 100%)  |  |  |  |
| ~~  |  |  |  |
| Alcohol 30 % Food Sales 60 %  | Entertainment /D % Other%  |  |  |
| 3. Businesses On The Premises (choose all that apply):  | Entertainment 1/2 % Other%   |  |  |
| 3. Businesses On The Premises (choose all that apply):  | Entertainment / / / / Other / / / / / / / / / / / / / / / / / / /  |  |  |
| 3. Businesses On The Premises (choose all that apply):  MRestaurant Cafe/Coffee Shop Cocktail Lounge Conveni  |  |  |  |
| 3. Businesses On The Premises (choose all that apply):  MRestaurant Cafe/Coffee Shop Cocktail Lounge Conveni Hotel Banquet Hall Supermarket Private/  4. Hours of Operation and Age Restriction   | ence Store    Night Club    Liquor Store    Tavern    Sports Facility Fraternal/Veterans' Club    Other:   |  |  |
| 3. Businesses On The Premises (choose all that apply):  MRestaurant Cafe/Coffee Shop Cocktail Lounge Conveni Hotel Banquet Hall Supermarket Private/  | ence Store    Night Club    Liquor Store    Tavern    Sports Facility Fraternal/Veterans' Club    Other:   |  |  |
| 3. Businesses On The Premises (choose all that apply):    Restaurant  | ence Store   |  |  |
| 3. Businesses On The Premises (choose all that apply):    Restaurant  | ence Store   |  |  |
| 3. Businesses On The Premises (choose all that apply):    Main   Cafe/Coffee Shop   Cocktail Lounge   Convenied     Hotel   Banquet Hall   Supermarket   Private/   4. Hours of Operation and Age Restriction   Are there any changes to the current hours of operation or age restriction   Please Note: If you will be open earlier or later than the hours listed on your cut Brewers Opening Day, etc.) during the license period, this must be reported and Your hours of operation and age restriction are listed on your current license.  | ence Store   |  |  |
| 3. Businesses On The Premises (choose all that apply):    Restaurant  | ence Store   |  |  |
| 3. Businesses On The Premises (choose all that apply):    Main   Cafe/Coffee Shop   Cocktail Lounge   Convenied     Hotel   Banquet Hall   Supermarket   Private/   4. Hours of Operation and Age Restriction   Are there any changes to the current hours of operation or age restriction   Please Note: If you will be open earlier or later than the hours listed on your current Brewers Opening Day, etc.) during the license period, this must be reported and Your hours of operation and age restriction are listed on your current license.   5. Floor Plan and Capacity   Are you requesting any changes to your capacity or floor plan*?   No   Yes submit a new floor plan with this renewal application. A sample plan can be four   | ence Store    Night Club    Liquor Store    Tavern    Sports Facility Fraternal/Veterans' Club    Other:  On?    No    Yes If Yes, Describe:  arrent license for even one event or holiday (for example, St. Patrick's Day, is printed on your license.  If yes, describe: |  |  |
| 3. Businesses On The Premises (choose all that apply):  Mestaurant Cafe/Coffee Shop Cocktail Lounge Conveni Banquet Hall Supermarket Private/ 4. Hours of Operation and Age Restriction  Are there any changes to the current hours of operation or age restriction  Please Note: If you will be open earlier or later than the hours listed on your currents of operation and age restriction are listed on your current license.  5. Floor Plan and Capacity  Are you requesting any changes to your capacity or floor plan*?   | ence Store   |  |  |
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| 3. Businesses On The Premises (choose all that apply):    Mestaurant  | ence Store   |  |  |
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| 3. Businesses On The Premises (choose all that apply):  MRestaurant   | ence Store   |  |  |

| . CURRENT APPROVED ENTERTAINMENT   |   |                                     |                                     |  |
|--|---|-------------------------------------|-------------------------------------|--|
| The following types of entertainment have been approved for your current Public Entertainment Premises license:  |   |                                     |                                     |  |
| Comedy Acts, Disc Jockey, Poetry Readings, J   | ukebox, Karaoke, Instrumental                     | Musicians, Bands, 1 Pool Table      |                                     |  |
|  |   |                                     |                                     |  |
|  |   |                                     |                                     |  |
| 2. ADDING ENTERTAINMENT  |   |                                     |                                     |  |
| If applicable, check any entertainment you w ENTERTAINMENT IS LISTED ABOVE.  | ish to add: ONLY CHECK ENTER                      | RTAINMENT TYPE(S) YOU ARE AD        | DDING. YOUR CURRENT APPROVED        |  |
| Instrumental Musicians   | Bands   | ☐ Battle of the Bands               | Comedy Acts                         |  |
| ☐ Disc Jockey  | Magic Shows                                       | Poetry Readings                     | Dancing by Performers               |  |
| Jukebox  |   |                                     |                                     |  |
| Adult Entertainment/ Karaoke Bowling Alley Pool Tables   |   |                                     |                                     |  |
| Strippers/Erotic Dance How many? How many?   |   |                                     |                                     |  |
| ☐ Motion Pictures (movies by admission) ☐ Amusement Machines ☐ Concerts ☐ Theatrical Performances  |   |                                     |                                     |  |
| _  | How many? Approx. # per year? Approx. # per year? |                                     |                                     |  |
| Other:   |   |                                     |                                     |  |
| No entertainment changes can take place un   | til approved by Common Counc                      | il and a new license has been issu  | ued and posted on the premises.     |  |
| 3. REMOVING ENTERTAINMENT  |   |                                     |                                     |  |
| If applicable, list any entertainment you wish to remove:  |   |                                     |                                     |  |
|  |   |                                     |                                     |  |
| 4. PROMOTERS/SOUND AMPLIFICA   |   |                                     |                                     |  |
| Will promoters ever be used for any of the entertainment? \[ \bigcap \text{No \bigcap Yes} \] If Yes, Describe:  |   |                                     |                                     |  |
| Radio + internet And Flyers  |   |                                     |                                     |  |
| At any time will sound amplification be used?  No Ves If Yes, Describe:  |   |                                     |                                     |  |
| 2 speakers.  |   |                                     |                                     |  |
| 5. SIGNATURE   |   |                                     |                                     |  |
| I understand that after the license has been issued, a change to the plan of operation will require a written request to change and approval from the Common Council.  |   |                                     |                                     |  |
| I agree to inform the City Clerk within 10 days of any substantial changes in the information supplied in this application.  |   |                                     |                                     |  |
| I understand that I shall not willfully refuse to provide the services offered under this license, or add charges or require deposits not required of the general public because of race, color, sex, religion, national origin or ancestry, age, handicap, lawful source of income, marital status, sexual orientation, gender identity or expression, familial status or the fact that a person is now or has been a member of the military service, whether dressed in uniform or not; and shall not seek such information as a condition of employment, or penalize any employee or discriminate in the selection of personnel for training or promotion on the basis of such information. |   |                                     |                                     |  |
| I have knowledge of the City Ordinances curr<br>suspension, non-renewal or revocation, if I vi   |   |                                     |                                     |  |
| ·  |   | -oyce Hill                          | oration or LLC, the Agent must sign |  |
|  | Signature of Sole!                                | Proprietor, a Partner, or if a Corp | oration or LLC, the Agent must sign |  |

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### CITY OF MILWAUKEE OFFICE OF THE CITY CLERK

Wednesday, October 31, 2018

#### COMMITTEE MEETING NOTICE

AD 06

SCHAEFER, Matthew A, Agent Uncle Wolfie's Breakfast Tavern LLC 1805 N Hubbard St

Milwaukee, WI 53212

You are requested to attend a hearing which is to be held in Common Council Chamber, Third Floor, City Hall on:

### Monday, November 05, 2018 at 08:45 AM

Regarding:

Your Class B Tavern, Food Dealer, and Sidewalk Dining License Applications as agent for "Uncle Wolfie's Breakfast Tavern LLC" for "Uncle Wolfie's Breakfast Tavern" at 234 E Vine St.

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

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JIM OWCZARSKI, CITY CLERK

Hem Cela

BY: Jessica Celella

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

### Cooney, Jim

From:

Celella, Jessica

Sent:

Monday, October 1, 2018 3:13 PM

To: Cc: Cooney, Jim Byrd, Yashica

Subject:

FW: 10 AM Oct. 2nd License Hearing - Uncle Wolfie's Breakfast Tavern - Historic Brewers

Hill Association No Objection

#### Please add

From: Kuether-Steele, Molly

**Sent:** Monday, October 1, 2018 1:47 PM **To:** Celella, Jessica; Byrd, Yashica

Subject: FW: 10 AM Oct. 2nd License Hearing - Uncle Wolfie's Breakfast Tavern - Historic Brewers Hill Association No

Objection

FYI

From: Molly Booth [mailto:president@historicbrewershill.com]

Sent: Monday, October 01, 2018 1:36 PM

To: Coggs, Milele

Cc: Dantzler, Akuwa; Osterman, Jeffrey; Kuether-Steele, Molly; Uncle Wolfie

Subject: 10 AM Oct. 2nd License Hearing - Uncle Wolfie's Breakfast Tayern - Historic Brewers Hill Association No.

Objection

### Dear Alderwoman Coggs,

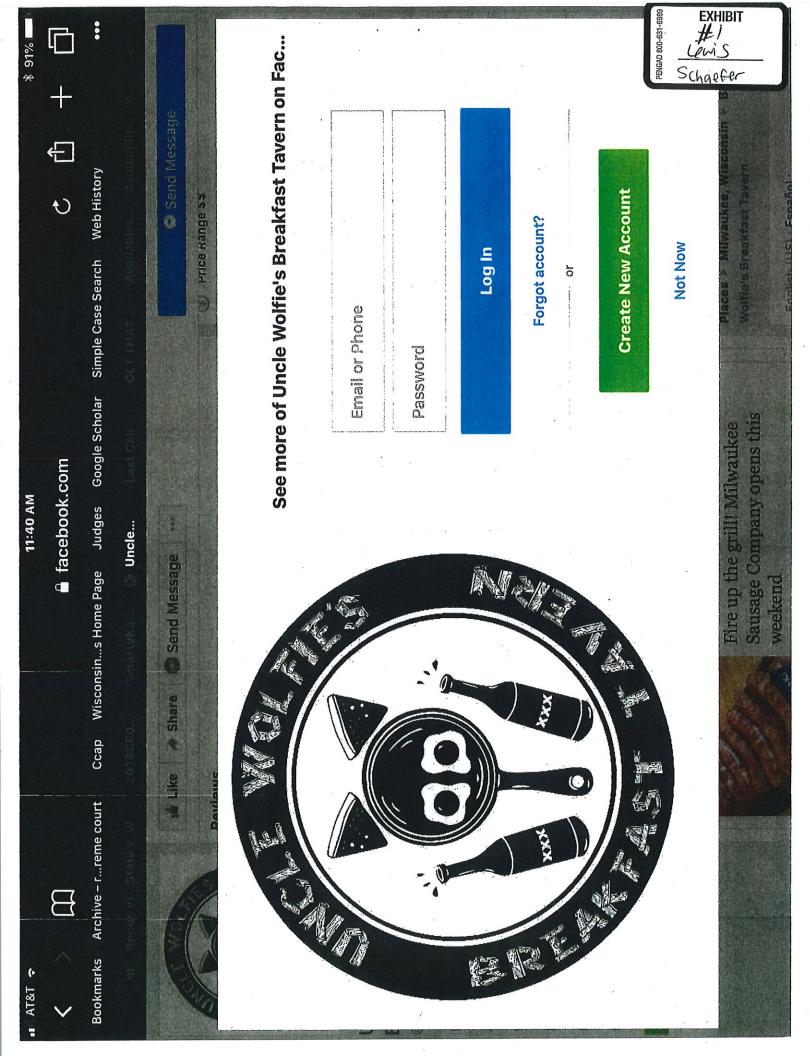
On Thursday, Sept. 20th, 2018, the Historic Brewers Hill Association (HBHA) Board of Directors met with Whitney and Wolfgang Schaefer, owners of Uncle Wolfie's Breakfast Tavern proposed at 234 E Vine Street. The Board reviewed their proposed business operations, exterior elevations, and asked questions of the applicants. Additionally, the applicants completed the HBHA license questionnaire in May 2018 which is available for both members and the general public to view at the Association's website: <a href="http://historicbrewershill.com/resources/economic-development/license-requests/">http://historicbrewershill.com/resources/economic-development/license-requests/</a>.

The submitted questionnaire and proposed license information were also presented at two HBHA neighborhood meetings in which no comments and/or objections were raised by meeting attendees.

The Board of Directors voted to unanimously **not object** to the proposed Class B Tavern, Food Dealer, and Sidewalk Dining license applications. We welcome the proposed business into the diverse and urban Brewers Hill neighborhood.

Respectfully Submitted on behalf of the HBHA Board of Directors,

Molly Booth HBHA President



### Cooney, Jim

From:

Sent:

Friday, June 15, 2018 4:21 PM

To:

License

Subject:

Application of Uncle Wolfie's Breakfast Tavern, LLC

Follow Up Flag:

Follow up

Flag Status:

Flagged

To Whom It May Concern:

# REDACTED RECORD

I am writing to express my objection to the Class B Liquor License application filed by Matthew Schaefer as agent for Uncle Wolfie's Breakfast Tavern, LLC. The application is for the premises located at 234 East Vine Street, Milwaukee, Wisconsin 53212.

I object to the application for the following reasons:

- 1. There has recently been granted a Class B Liquor license for View MKE, which is located directly across the street from the premises at 234 East Vine Street in Milwaukee. Part of the View MKE plan of operations is to have weekend Brunch service.
- 2. There is absolutely no off-street parking available owned and controlled by either View MKE or the owner of the premises located at 234 East Vine Street in Milwaukee. Addition of another Class B Licensee will undoubtedly add to the parking problem that exists in the area. Many who live in homes on East Vine Street are without off-street parking for their vehicles; adding another Class B Licensee in the area will complicate an already congested parking situation.
- 3. This particular premises is within 50 feet of the front door to our home. I do not wish to have a licensee within 100 feet of the front door.

  Licensee within 100 feet of the front door.

  If this license is approved, there will be active alcohol service within 100 feet of our home for 16 or more hours per day, seven (7) days per week. This would fundamentally change the character of the neighborhood in which we live, and our quality of life would be adversely affected.
- 4. Although 234 East Vine Street was built as a small Schlitz neighborhood tavern, and there is historical precedent for using the establishment as a tavern, the premises at has not had an active liquor license therein for over 25 years. I informed the previous owner, Robert L. Crawford, that I would oppose any Class B License that he might seek for the premises; my opposition to the addition of a second Class B Establishment on the block is long-standing.
- 5. The premise is relatively small, and its design was intended to be a neighborhood bar. This proposed establishment has been reviewed by/promoted in Milwaukee Magazine, the Milwaukee Journal, OnMilwaukee Dining, and the Milwaukee Business Journal. This amount of promotion will draw patrons from all points of the Metro Area; these patrons will need accommodations beyond what the neighborhood is able to provide.
- 6. East Vine Street ends in a bluff at North Hubbard Street. North Hubbard Street, East Vine Street, and North Palmer Streets are all relatively narrow streets existing within a well-established historic neighborhood. Such narrow streets will prove most unforgiving for intoxicated drivers.

- 7. It is known that increasing alcoholic beverage licensees and sales, particularly in a highly-concentrated area, increases crime, nuisance, and motor vehicle hazards.
- 8. When the now-owners were scouting this building for purchase, informed the real estate agent that we would oppose a Class B Liquor license for any proposed establishment on the basis of concentration of licenses within a relatively small area. We have made no secret of our opposition to having that premises turned into a tavern. The Owners' agent was made aware of our opposition prior to their closing on the premises.
- 9. For the owners to expend significant resources toward advancing a "Breakfast Tavern" without securing licensing in advance speaks to its owners having a predisposition toward asking for forgiveness after the fact, instead of securing permission in advance. Surely, it is part of any sound business plan to know the regulatory environment in which one plans to operate a business. Obtaining a Class B Liquor License is no small matter it involves a license application and a public hearing process. The application is not guaranteed to be approved. The residents of Brewers' Hill should not be compelled to accept another liquor licensee in such a concentrated space simply because renovation funds have been spent.

For the foregoing reasons, I respectfully request that this matter be set for hearing before the licensing committee, and that I be notified of the time and date of the hearing.

Respectfully submitted,

### Cooney, Jim

From:

**Sent:** Friday, June 15, 2018 8:26 AM

To:

License

Subject:

Objection to Class B license at 234 N. Vine Street

Follow Up Flag:

Follow up

Flag Status:

Flagged

REDACTED RECORD

to 234 E. Vine Street. Mr. Schaffer has been a decent neighbor but has never once spoken with me regarding his intention of obtaining a Class B liquor license for his premises. I was told that he will be operating some type of "breakfast establishment" but I cannot understand why a liquor license will be necessary for that type of business. My experience shows that people who drink at breakfast generally have an alcohol addiction.

Establishment that serve alcohol increase the insurance risk factors for a given area. More liquor means more risk. More risks means higher homeowners and auto insurance premiums.

Quality of life is also a factor. Liquor establishments do not increase the quality of life for a residential neighborhood and mostly tend to decrease it.

Increased traffic also makes it difficult to monitor the neighborhood and increases the risk of criminal activity.

A Class B license already exists for one restaurant that is located directly across the street from 234 E. Vine. This is already becoming a congested neighborhood and parking is rapidly becoming a problem. Parking on Hubbard Street is almost nonexistent and most of the patrons for the existing restaurant park further west on Vine Street and pass my house on their way to that establishment. The proposed license will increase that traffic and increase the number of inebriated persons passing my home on their way to their cars.

At present, the owner of this establishment lives above the proposed restaurant with his wife and child. However, the norm for this area is that once the children reach school age the family relocates to a suburban community.

Finally, if his proposed restaurant does not do as well as expected, there will be a natural tendency to gravitate to towards increasing liquor sales to offset food sale losses. There are already too many liquor establishments in this area.

Overall, I was not keen on the idea of a restaurant, but I can live with it. However, another restaurant with liquor is too much. For the reasons stated above, I object to the issuance of a Class B liquor license at 234 E. Vine Street.

Date:09/04/18 Officer: Monreal

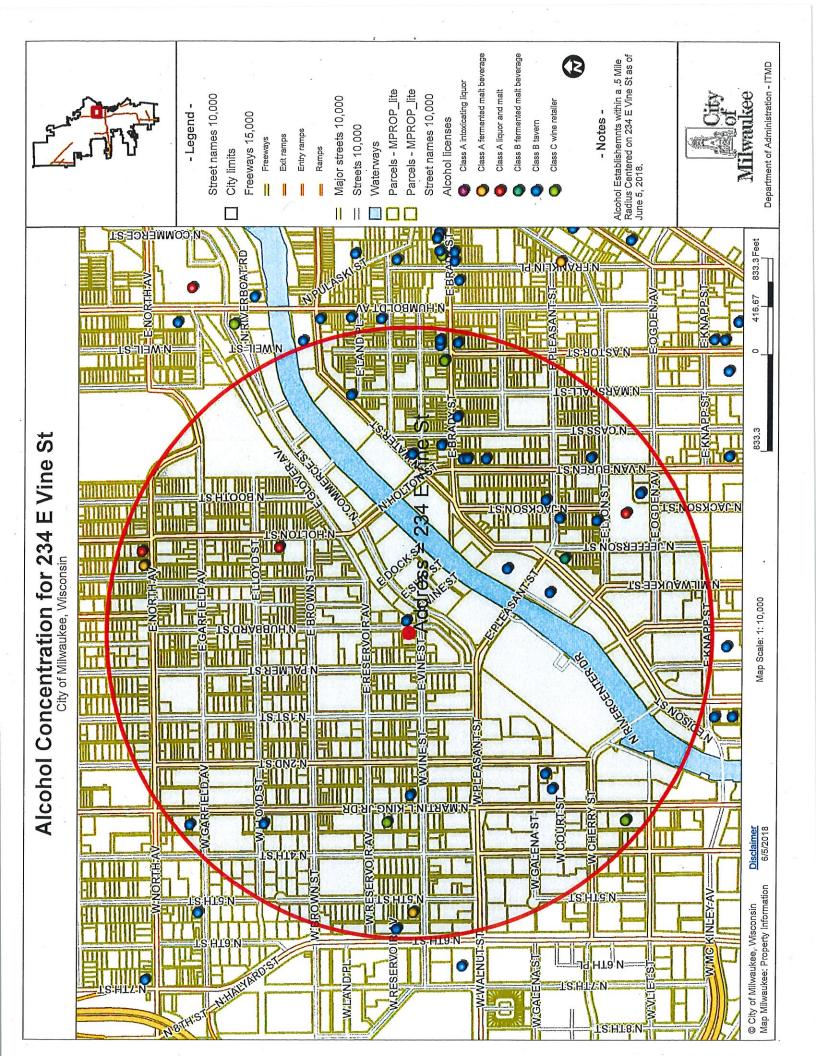
# City of Milwaukee Police Department 90-5-1.5 Crime Prevention Survey Tavern Inspection

| Name of Premise:<br>Address:<br>Phone:                                  | Uncle Wolfie's Breakfast Tav<br>234 E. Vine St.<br>262-365-8253                                | yern           |
|---|--|----------------|
| Owner: Owner address: City State Zip: Owner Phone: Owner email:         | Schaeffer, Matthew A.<br>1805 N. Hubbard<br>Milwaukee, WI<br>262-365-8253                      | ·              |
| Licensee/Agent:<br>Home Address:<br>City State Zip:<br>Phone:<br>Email: | Same   |                |
| Preferred contact: Sar  | me   |                |
| Location currently op   | oen: YES 🖂   | NO             |
| Projected open date:  |  |                |
| Day's open: S   | M  | . ⊠ALL         |
| Hours of Operation:   | Sun: 7A-3P<br>Mon: 7A-3P<br>Tue: 7A-3P<br>Wed: 7A-3P<br>Thu: 7A-7P<br>Fri: 7A-7P<br>Sat: 7A-7P | 24 hours □Y ☒N |
| Premise Type:   | ☐Tavern/Bar<br>☑Restaurant<br>☐Other:  |                |

| Licenses currently held:                                   |                                    |    |
|--|------------------------------------|----|
| Alcohol: Yes ⊠No Class:                                    | #:                                 |    |
| Tobacco: Yes No  | #:                                 |    |
| Food: Yes No   | #:                                 |    |
| Occupancy: Yes No  | #:                                 |    |
| Other: Yes No Type:  | #:                                 |    |
| Other: Yes No Type:  | #:                                 |    |
|  |                                    |    |
| Who is your alcohol distributor? Badger, still deciding of | on wine Distributor                |    |
| Exterior Survey:   |                                    |    |
| 1. Is the area around the location clean? ⊠Yes ☐           |                                    |    |
| 2. What surrounds the location? (Check all the app         | ly)                                |    |
| a. Park  |                                    |    |
| b. School  |                                    |    |
| c. Youth Center  |                                    |    |
| d. Church  |                                    |    |
| e. Tavern(s) If so, how many                               |                                    | •  |
| f. $\mathbf{\underline{\boxtimes}}$ Residential            | •                                  |    |
| g. Other businesses  |                                    |    |
| h. Other:  | · ·                                |    |
| 3. Can you see from the outside of the location into       |                                    |    |
| 4. Can you see the employees inside of the location        | n from the outside ⊠Yes ∐No        |    |
| <ol> <li>Are exterior windows free of signage</li></ol>    | No                                 |    |
| 6. Is there a bus stop? ☐Yes ☒No                           | •                                  |    |
| 7. Is there a bus shelter? ☐ Yes ☒No ☐N/A                  | •                                  |    |
| 8. Street parking ☐Yes ☒No                                 |                                    |    |
| 9. Is there a parking lot □Yes ⊠No                         |                                    | i, |
| 10. Is the parking lot clean? ☐ Yes ☐ No ☒N/A              |                                    |    |
| 11. Is the parking lot well lit? ☐ Yes ☐ No ☒ N/A          |                                    |    |
| 12. Valet Parking □Yes ⊠No                                 |                                    |    |
| a. Will this lot have a guard? ☐Yes ☐No                    |                                    |    |
| b. Will this lot have cameras? Yes No                      |                                    |    |
| 13. Are there areas where a person could conceal the       | emselves 🗌 Yes 🔲 No                |    |
| 14. Is there exterior lighting? Yes No. Does               | it appears to be adequate ⊠Yes □No | ,  |
| 15. Exterior Payphone? ☐Yes ☒No                            |                                    |    |
| 16. Are there No Loitering Signs posted? Yes               | ]No                                |    |
| 17. Are there exterior security cameras ⊠Yes ☐No           |                                    |    |
| 18. Are the address numbers prominently displayed          |                                    |    |
| Exterior Comments:   |                                    |    |
| Camera Survey:   |                                    |    |
| 19. Does this location have security cameras? XYe          | s 🗆 No                             |    |
| 20. Are they in working order? ∑Yes ☐No                    | ·                                  |    |
| 21. What format are the cameras?                           |                                    |    |
| a. Color ⊠Yes □No  |                                    | •  |
| · · · · · · · · · · · · · · · · · · ·                      |                                    |    |
|  |                                    |    |
|  | ,                                  | -  |
|  | 2                                  |    |

| b. Digital Yes No  |
|--|
| c. VCR Yes No  |
| d. Recorded Yes No   |
| 22. How long is footage stored for later viewing: 30 Days  |
| 23. Are there exterior cameras Yes No How many: 4  |
| 24. Are there interior cameras Yes No How many: 4  |
| 25. Do all employees know how to retrieve recorded digital images/footage? Yes No  |
| 26. Cameras located in parking lot Yes No N/A How many   |
| Camera Survey Comments:  |
|  |
| Interior Survey:   |
| 27. What is the planned/posted capacity 99   |
| 28. What is the minimum number of employees that will be on premise 2  |
| 29. Is the storeowner willing to be a standing complainant regarding loitering? Yes No   |
| a. If yes have them fill out the standing complaint form and give them two of the  |
| commercial signs Yes No  |
| 30. Is the interior of the location neat and clean?  |
| 31. Does an interior camera face the entrance/exit?  |
| 32. Are emergency and non-emergency numbers posted near the phone? Yes No  |
| 33. Does the owner know how to contact their police district directly? Yes No  |
| a. Did you provide a district contact guide to the owner? Yes No   |
| Interior Comments:   |
|  |
| Security   |
| 34. How many security personnel are going to be employed:  |
| 35. How will they be deployed: Interior Exterior N/A   |
| 36. What days will they be deployed Mon Tue Wed Thu Fri Sat Sun ALL  |
| 37. Will the security be managed by business or contracted   |
| 38. Will they be armed Yes No N/A  |
| 39. What type of security measures will be used:  \[ \sum N/A \]   |
| Wanding/metal detector   |
| ID Scanner   |
| Dress Code   |
| Cover Charge   |
| Age restriction  |
| Other  |
| 40. When at capacity, how will the overflow crowd be managed? Waiting List   |
| 41. Will a guard monitor the overflow crowd at all times? Yes No   |
| Security Comments:   |
| at the state of th |

### ADDITIONAL COMMENTS/RECOMMENDATIONS:



| Alcohol Establishments within a .5 Mile Radius Centered on 234 E Vine St. as of June 5, 2018 | Radius Centered on 234 E Vine St. as   | s of June 5, 2018  |  |  |  |  |
|--|--|--|--|--|--|--|
|  |  | THE PARTY OF THE P | THE PARTY CONTRACTOR OF THE PA |  |  |  |
| License Summary  |  | and Address of the Ad |  |  | Total  |  |
| 77.00  | -  |  |  |  | Armin de la companion de la co | 1  |
| Class A Fermented Malt Beverage Retailer's License   | ler's License  |  |  |  | 2  |  |
| Class A Malt & Class A Liquor License  |  |  | Principle of the Control of the Cont | The state of the s | 6  |  |
| Class B Fermented Mait Beverage Retailer's License   | ler's License  |  | And the state of t |  |  | - Charles  |
| Class B Tavern License   |  | And the state of t | The state of the s |  | 20   |  |
| Class C Wine Retailer's License  | To a find a second and a second a secon | Total Control of the  | **************************************   |  |  | ***************************************  |
|  |  |  | 773111   |  | 1177   |  |
|  |  |  | Option and the second s | Grand Total  | 36   | A STATE OF THE STA |
| Legal entity   | Trade name   | Licensee   | License type name  | Total capacity   Boom capacity   | Address  | Expiration date  |
| KRAYEM, INC  | QUICK STOP FOODS   | MOHAMMAD I EL-HASSAN, Agt  | Class A Fermented Malt Beverage Retailer's License   | 1  | 41E NORTH AV   | 12/11/18   |
| Penny Saver, LLC   | Penny Saver  | Nayef M Azzam, Agt   | Class A Fermented Malt Beverage Retailer's License   |  | STOWNINE ST  | 11/20/18   |
| Four Gems LLC  | Holton Liquor & Food   | MOHAMMAD F NAZER, Agt  | Class A Mait & Class A Liquor License  |  | 2301 N Holton ST   | 5/16/19  |
| MEGA MARTS, LLC  | PICK 'N SAVE #6868   | NEIL F WALLACE, Agt  | Class A Malt & Class A Liquor License  | A THE STREET STREET, S | 605 E LYON ST  | 10/22/18   |
| Pueblo Foods & Liquor, Inc   | Pueblo Foods & Liquor  | GURINDER S NAGRA, Agt  | Class A Malt & Class A Liquor License  |  | 2029-31 N HOLTON ST  | 7/22/18  |
| Alderaan Holdings LLC  | Alderaan Coffee  | David N Neumann, Agt   | Class B Fermented Malt Beverage Retailer's License   | 111  | 1560 N Water ST  | 10/15/18   |
| SATORI RESTAURANT LLC  | THAI-NAMITE RESTAURANT   | SARINLADA PANYASOPA, Agt   | Class B Fermented Malt Beverage Retaller's License   | 68   | 932 E BRADY ST   | 6/14/19  |
| Urban Beets Inc  | Urban Beets Cafe.& Juicery   | Dawn M Balistreri, Agt   | Class B Fermented Malt Beverage Retaller's License   | -  | 1401 N Martin L King Jr DR   | 8/1/18   |
| Baldwin Trade LLC  | The Diplomat   | Dane K Baldwin, Agt  | Class B Tavern License   |  | 100 815 E Brady ST   | 7/24/18  |
| Board Game Barrister, LTD  | Oak & Shield Gaming Pub  | Lynn M Nilles, Agt   | Class B Tavern License   |  | 600 E Ogden AV B   | 4/8/19   |
| CASABLANCA RESTAURANT, LLC   | CASABLANCA RESTAURANT  | ALAA I MUSA, Agt   | Class B Tavern License   | 365 310 Inside, 55 Balcony   | L  | 7/29/18  |
| CHIPOTLE MEXICAN GRILL OF CO, LLC  | CHIPOTLE MEXICAN GRILL #313  | Brian J Bushaw, Agt  | Class B Tavern License   | 66   |  | 3/19/19  |
| Colglasand Investments LLC   | Mangos Cafe East   | Francisco Sandino-Escobar, Agt   | Class B Tavern License   | 83   | 1682 N Van Buren ST  | 2/8/19   |
| D & S Food Services Inc.   | Suite 414  | Judith A Schieffer, Agt  | Class B Tavern License   | 135  | 1543 N 2nd ST 4TH FLOOR  | 10/101   |
| DEM ANO, INC   | REGANO'S ROMAN COIN  | MARY T REGANO, Agt   | Class B Tavern License   | 08   | 1004 E BRADY ST  | 6/29/18  |
| GLORIOSO'S ENTERPRISES, LTD  | GLORIOSO'S ITALIAN MARKET  | MICHAEL A GLORIOSO, Agt  | Class B Tavern License   | 82   | 1011 E BRADY ST  | 5/3/19   |
| Lakes Venture LLC  | Fresh Thyme Farmers Market   | Carol J Doherty, Agt   |  |  | 470 E Pleasant ST  | \$/29/19   |
| LANDFALL II, LI.C  | POINTS EAST PUB  | LORI A HASSETT, Agt  | Class B Tavern License   | 160  | 1501 N JACKSON ST  | 10/10/18   |
| LIU'S ORIENTAL KITCHEN, LLC  | Lucky Liu's  | HENRY LIU, Agt   |  | 80   | 1664 N VAN BUREN ST  | 5/3/19   |
| Mar Bar LLC  | Mai Bar  | Kevin D Perkins, Agt   | Class B Tavern License   |  | 1840 N 6th ST  | 3/29/19  |
| On The Bayou inc   | On The Bayou   | Janice L Johnson, Agt  | Class B Tavern License   |  | 2053 N Martin L King Jr DR   | 2/4/19   |
| Our Sports Bar Inc   | Skybox Sports Bar  | Toi Lisa Mark, Agt   | Class B Tavern License   | 300  | 2213 N Martin L King Ir DR   | 1/17/19  |
| Pleasant Kare, LLC   | Pleasant Kafe  | Lorna K Stone, Agt   | Class B Tavern License   |  | 1600 N Jackson ST  | 11/10/18   |
| Ked Lion Restaurant Group LLC  | Red Lion Pub on Tannery Row  | CHRISTOPHER J TINKER, Agt  | Class B Tavern License   | 274  | 1850 N WATER ST  | 12/2/18  |
| SANFURD RESTAURANT, INC  | SANFORD RESTAURANT   | Justin L Aprahamian, Agt   | Class B Tavern License   | 80   | 1547 N JACKSON ST  | 10/29/18   |
| The Brown Bottle, LLC  | The Brown Bottle   | Samuel H Denny, Agt  | Class B Tavern License   |  | 221 W Galena ST  | 4/21/19  |
| Ine Other Ones LLC   | Birch + Butcher  | , Agt  | Class B Tavern License   |  | 459 E Pleasant ST  | 11/8/18  |
| Inple OI Sports Bar LLC  | Triple OT Sports Bar LLC   |  | Class B Tavern License   | 66   | 1806 N MARTIN L KING JR DR   | 61/6/4   |
| Trocadero MKE LLC  | DiModa   | H, JR, Agt   | Class B Tavern License   |  | 1758 N Water ST  | 1/9/19   |
| WAN FU, INC  | EMPEROR OF CHINA   |  | Class B Tavern License   | 25   | 1010 E BRADY ST  | 9/25/18  |
| Wayneco Corporation  | Angelo's Piano Lounge  |  | Class B Tavern License   | 49   | 1686 N VAN BUREN ST  | 3/14/19  |
| Wolf Peach, LLC  | Wolf Peach   | GINA M GRUENEWALD, Agt   | Class B Tavern License   |  | 1818 N Hubbard ST  | 10/21/18   |
| Y-NOT II TAVERN  | Y-NOT II TAVERN  | ANTHONY F DE PALMA, SP   | Class B Tavern License   | 100  | 706 E LYON ST  | 6/29/18  |
| Mi Casa Su Cafe LLC  | Mi Casa Su Cafe  | Daniel J Trotter, Agt  | Class C Wine Retailer's License  |  | 1839A N MARTIN L KING JR DR  | 8/9/18   |
| SATORI RESTAURANT LLC  | THAI-NAMITE RESTAURANT   | SARINLADA PANYASOPA, Agt   | Class C Wine Retailer's License  | 68   | 932 E BRADY ST   | 6/14/18  |
| Urban Beets Inc  | Urban Beets Cafe & Juicery   | Dawn M Balistreri, Agt   | Class C Wine Retailer's License  |  | 1401 N Martin L King Jr DR   | 8/1/18   |
|  |  |  |  |  |  |  |

ccl-busplan 12/14/17

# MILWAUKEE

### **BUSINESS LICENSE PLAN OF OPERATION**

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

| 1. T   | ype of Business  |
|--------|--|
| Applyi | ng for:     Extended Hours (12AM to 5AM) - If a food establishment, check all that apply:    Delivery   Drive Thru   Dining Room   |
|        | Self Service Laundry Massage Establishment Filling Station   |
|        | Other (supplemental application for specific license also required)  |
|        | e a detailed description of the type of business you plan on operating:  |
| י ע    | nea style restourement specializing in Breakfost, Lunch, and Coffee  |
| Do you | near style restauremnt specializing in Breakfast, Lunch, and Coffee where any experience operating this type of business? I No 12 yes If yes, explain: 2 decades in Service Industry |
| 2. B   | Business Operations Coken bea  |
| a.     | Proposed Opening Date:   |
| b.     | Is this premise under construction?  No Yes If yes, list estimated completion date:  |
| c.     | is this a franchiser A two T res   |
| d.     | Is this premises currently licensed? No  Yes If yes, list type of license:   |
| e.     | Is the current licensee operating?   X 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? \( \sum \) No \( \sum \) Yes If yes, describe: \( \frac{notal}{notal} \) Howe goods store                                       |
| 3. Li  | tter & Noise   |
| a.     | How are grounds kept clean? X Sweep X Pressure Wash Pick Up Litter Other:  |
| b.     | How often will grounds be cleaned? Daily Weekly As Needed Monthly Other:   |
| c.     | Grounds cleaned by: Licensee Building Owner Employees Hired Maintenance Other:   |
| d.     | How are noise issues prevented and/or addressed? Security Manager approaches customer(s) Call Police   |
|        | Signs Posted Other:  |
| e.     | Will a sound amplification system be used? X No Yes If yes, describe:  |
| 4. S   | moking & Sanitation  |
| a.     | 'Are there designated outdoor smoking areas? No Yes If yes, describe:  |
| b.     | Number of Garbage Cans: Inside: 10 Locations: Ban, Stirstation, 2 kitchen, 2 PNO, POS,   |
|        | Outside: Locations:  |
| €c.    | Is a crowd control barrier used? 🛛 No 🗌 Yes 💮 If yes, describe:  |
| d.     | How many restrooms are on the premises?  |
| e.     | Name of solid waste contractor: Advanced Disposal Waste Management   Other:  |

| 5. Security   |   |                  |  |   |                          |
|---|---|------------------|--|---|--------------------------|
| a. Are there onsite parking spaces? 📈 No 🗌 Yes If yes, indicate how many? and describe the parking security   |   |                  |  |   |                          |
| plan: Pare  | plan: Pare hing on Street   |                  |  |   |                          |
| b. \ Is there a loading zone? '   | b. Is there a loading zone? No Yes If yes, describe the loading area security plan: Campes on each side of Suiday to the control of Yes If yes, how many? and answer the following: |                  |  |   | meres on                 |
| esch sie  | le 2 3n:1   | ding ?           | Extorion   | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |                          |
| c. Will you have security pe  | rsonnel on premise?   | <b>X</b> No ☐ Ye | s If yes, how many?  | a                                       | nd answer the following: |
|   | ponsibilities?  |                  | _  |   |                          |
|   |   |                  | escribe <u>Caners</u>  | •                                       |                          |
| List their licensing,   | certification, or trainin   | ng credentials   |  |   | terior                   |
|   |   |                  |  |   |                          |
| e. Will searches/identification checks be done upon entry? 💢 No 🗌 Yes If yes, describe  |   |                  |  |   |                          |
| 6. Percentage of Sales (must total 100%)  |   |                  |  |   |                          |
| Alcohol 20425 %   | Food 7  | Sm. o            | Secondhand Merchandise   |   | Precious Metals & Gems   |
| Entertainment%  | Cigarettes  | <u>0</u> %       | — %  |   | %                        |
| Pawnbroker Activity%  | Salvaged Materials/<br>(such as scrap metal)  | <u>@</u> %       | Personal Services (such as body piercing, salon, tailor tanning, etc.) |   | Other% Describe:         |
| 7. Businesses/Licenses  | on the Premise  | s (check a       | all that apply):   |   |                          |
| Type 1 Xi Full Service Restaurant   | Cafe/Coffee Shop  | C Doll or 5      | ast Food Restaurant  | D-freeks                                | to a subtraction of the  |
| ☐ Night Club  | Tavern  | Cocktail         |  | Private,<br>Teen Cl                     | /Fraternal/Veterans Club |
| Banquet Hall  | Sports Facility   | Bowling          | -  | reen c.                                 | au                       |
| ☐ Hotel/Motel: Number of Flo  | •   |                  | •  | -,                                      |                          |
| Hotel/Motel: Number of Floors: Rooming House: Number of Floors: Number of Rooms: Number of |   |                  |  |   |                          |
| Type 2  |   |                  |  |   |                          |
| Liquor Store  | ☐ Corner Store ☐ Supermarket ☐ Convenience St   |                  |  | ence Store                              |                          |
| Gas Station   | Amusement/Phonograph Distributor Recycling, Salvage or To   |                  |  | g, Salvage or Towing                    |                          |
| Used Car Dealer   | Used Car Dealer Personal Service Establishment Recording Studio (such as tattoo business, hair salon, tailor, etc.)   |                  |  |   |                          |
| What other licenses/permits will yo   | ou hold at this location? (   | check all that a | apply)   |   |                          |
| Occupancy Permit Ci   | garette & Tobacco 🔲 Ga  | s Station E      | xtended Hours  | Tavern [                                | ] Weights & Measures     |
| Secondhand Dealer F   | recious Metal & Gem   | ]Other:          |  |   |                          |
| 8. Legal Capacity (only   | if a Type 1 pren  | nises in #       | 7 above)   |   |                          |
| Capacity 99 (Call the   | Milwaukee Development   | Center at 414-   | -286-8211 if you have questi   | ions.)                                  |                          |

| 9. Premises Description  |  |                                      |                   |                 |                                       |  |
|--|--|--------------------------------------|-------------------|-----------------|---------------------------------------|--|
|  |  |                                      |                   |                 |                                       |  |
| Identify all area(s) of the premises that will be used in operating this business (include areas used only for storage):   |  |                                      |                   |                 |                                       |  |
| □Other: Desc   |  |                                      |                   |                 |                                       |  |
| b. Describe Locat  | tion: 🗌 Major Thoroughfare                     | Secondary Street 🔲 O                 | ther:             |                 |                                       |  |
| c. Nearest Major   | Cross Street: Wate                             | rst on N                             | uk pr.            |                 |                                       |  |
| d. Describe Building: Free Standing Building Strip Mall Other:   |  |                                      |                   |                 |                                       |  |
| e. Describe Premises Structure: Single Story Multi-Story - # of Stories Other:   |  |                                      |                   |                 |                                       |  |
| f. Describe Surrounding Area: Commercial Residential Industrial Other:  Building Owner Name: Phone Number: 262.365.825.8   |  |                                      |                   |                 |                                       |  |
| Building Owner Name: 2 Phone Number: 162.365.825 Business Owner Address: 1805 N. Hubband St. Milwan hele, w/   |  |                                      |                   |                 |                                       |  |
| Business Owne  | er Address: 1805 W.                            | Mubbend St. 1                        | rilwon her,       | <i>ا</i> ص      |                                       |  |
| 10. Hours of C   | peration & Custon                              | mers                                 |                   |                 |                                       |  |
| Will customers be entering the premises?  No XYes  |  |                                      |                   |                 |                                       |  |
|  | Proposed Hour                                  | s of Operation:                      | Estimated Number  | Potential       | Class B Tavern                        |  |
| Day of the Week  |  |                                      | of Customers      | Age Range<br>of | Applicant Only:<br>Age Restriction    |  |
|  | Open Time<br>(include a.m. or p.m.)            | Close Time<br>(include a.m. or p.m.) | expected each day | Customers       | (If none, write 'None')               |  |
| Sunday   |  |                                      | 450               |                 |                                       |  |
|  | 7 3/1 7 10 10 10 10 10 10 10 10 10 10 10 10 10 |                                      |                   |                 |                                       |  |
|  | 1 2 1 1 1 1 0 0-100 MONE                       |                                      |                   |                 |                                       |  |
| Tuesday  | Tuesday 7 = an 1pm 170 0-100 NONE              |                                      |                   |                 | NONE                                  |  |
| Wednesday  | nesday A H                                     |                                      | NONE              |                 |                                       |  |
| Thursday   | 7 san  | Track PM                             | 280               | 0-100           | NONE                                  |  |
| Friday   | 7\$2M  | 7 \$ PM                              | 320               | 0-100           | NONE                                  |  |
| Saturday   | Fan  | 7 & PM                               | 450               | 0-100           | NONE                                  |  |
| An Extended Hours Establishment License is required for any convenience store, filling station, personal service establishment (such as tattoo, body piercing, salon, tailor, tanning, etc.), recording studio or restaurant which is open between the hours of 12:00 a.m. and 5:00 a.m. |  |                                      |                   |                 |                                       |  |
| Alcohol Establishments Class A: 8:00 am to 9:00 pm Sunday thru Saturday  |  |                                      |                   |                 |                                       |  |
| Permitted Hours of Operation: Class B: 6:00 am to 2:00 am Sunday thru Thursday, 6:00 am to 2:30 am Friday & Saturday   |  |                                      |                   |                 |                                       |  |
| Entertainment Outdoor Closing Hours: 10:00pm Sunday-Thursday; 12:00am Friday & Saturday; unless a different time, either earlier or later, Is established by the Common Council in its approval of the licensee's plan of operation.   |  |                                      |                   |                 |                                       |  |
| 11. Signature(   |  | :                                    |                   |                 |                                       |  |
| <b>A</b>   |  |                                      |                   |                 | · · · · · · · · · · · · · · · · · · · |  |
|  | mil  |                                      |                   |                 |                                       |  |
| Signature of Sole Prophetor, Partner, or 20% or more Shareholder  (If there are no 20% or more shareholders,  Signature of additional partner or 20% or more shareholder   |  |                                      |                   |                 |                                       |  |
|  | print name/title and sign)                     |                                      |                   |                 |                                       |  |

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



### **APPLICATION AMENDMENT**

Office of the City Clerk License Division 200 E. Wells Street, Room 105, Milwaukee, WI 53202 (414) 286-2238

Date: 10/22/2018

| To ti                | the License Division of the City of Milwaukee:                               |  |
|----------------------|--|--|
|                      | •  | , wish to amend my answer(s) on the application for a    |
|                      | (full legal name)  112SS B Tower   license at 23 (type of license) (premise) | , wish to amend my answer(s) on the application for a  4 |
| by a                 | adding or amending the following information (complete only                  | those sections being amended):                           |
|                      |  |  |
| 1.                   | Answer to Question(s) # should be:   |  |
| 2.                   |  | Also complete 3, 4, 5 & 6                                |
| 3.                   | Date of birth should be:   |  |
| 4.                   | Home address should be (include city/state/zip):                             |  |
| 5.                   | Phone number should be (include area code):                                  |  |
| 6.                   | Driver's License Number/State ID Number should be:                           |  |
| 7.                   | Corporation/LLC name should be (full legal name):                            |  |
| 8.                   | Business name should be:   |  |
| 9.                   | Premises address should be (include city/state/zip):                         |  |
| 10.                  | Business phone number should be (include area code):                         |  |
| 11.                  | Malling address should be (include city/state/zip):                          |  |
| 12.                  | Email address should be:   |  |
| 13.                  | Recycling/Salvaging/Towing: Location where vehicle will be                   | parked should be (include city/state/zip):               |
| 14.                  |  |  |
| 15.                  | Other: Howas of openation:   | 7an-3pm Every Day (MON-SUN)                              |
|                      | (Check with the License Division before submitting "Other" amendments u      | sing this form.)   |
|                      |  |  |
|                      |  |  |
|                      | Signature o  | f Licensee (Individual, Partner, or Agent of Corp/LLC)   |
|                      |  | $\checkmark$   |
| <del>Janaara j</del> |  |  |
| Offic                | ice Use Only: Application #: Date:   | initials: To LC:   |
| ,                    | LC Email: MPD NS HD Initials   |  |



## ALCOHOL BEVERAGE & PUBLIC ENTERTAINMENT PREMISES 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 www.milwaukee.gov/license

| Legal Entity Name: walk wolfies Breakfast Tareen  |  |  |  |
|---|--|--|--|
| Premise Address: 234 E. v. ne St. Milvanher, WI 53212   |  |  |  |
| Proximity of Premises to Church, School, Daycare Center or Hospital   |  |  |  |
| is th   | nere at least 300 feet between the building and any church, school, daycare center or hospital?  |  |  |
| "Se   | rvice Bar Only" Designation  |  |  |
| If a  | oplying for Class B or C license, are you applying for "Service Bar Only"? 🛱 No 🗌 Yes  |  |  |
| Service Bar Only means customers cannot sit at the bar. Alcohol is served to patrons seated at tables. No stools, chairs or other articles of furniture shall be placed at the service bar for patrons to sit upon. |  |  |  |
| Bus   | iness Information  |  |  |
| a)  | Are you taking out this application for anyone that may not be eligible for a license? No Yes  |  |  |
| b)  | Will the agent, a partner or the individual licensee be conducting the day-to-day operations of the business?   No   Yes   |  |  |
|   | If no, list the name and address of the person(s) who will:  |  |  |
|   | Class B Applicants: If the agent, a partner or the individual licensee will not be conducting the day-to-day operations of the business, the person(s) listed above must obtain a Class B Managers license.  |  |  |
| c)  | Does anyone else have money invested or any other interest in this business? No X Yes  If yes, explain: Loan acquired through the SBA  Have you made an agreement with anyone to repay any loan or any other payments based upon income from the business? |  |  |
| d)  | If yes, explain: Loan acquired through the 53A   |  |  |
| u,  | No Yes If yes, list name and address: 5BA (mough Sunrit (Nd. + Union - 304 & Monster) wandered   |  |  |
| Pro   | of of Ownership, Lease, or Offer to Purchase (new & transfer applicants only)  |  |  |
|   | mit proof of ownership, lease, or offer to purchase the building with this application.  |  |  |
| а)<br>а)  | ase or office to purchase must:  Be in the same legal entity name as that apply for the license  |  |  |
| b)  | Reflect the same address as the premises address on this application   |  |  |
| c)<br>d)  | Reflect current dates and Be signed by the lessor/seller and lessee/buyer  |  |  |
| Property Information (new & transfer applicants only)   |  |  |  |
| a)  | Do you own or lease the building? Own Lease  |  |  |
| b)  | Who owns the fixtures (for example, coolers, etc.)? Business owner (Matthew Schalfer)  |  |  |
| °C) 🍼   | Are you purchasing the stock and/or fixtures? No Yes If yes, amount paid \$  |  |  |
| d)  | Total amount paid for business \$  |  |  |
| e) (  | Total amount paid for goodwill of the business \$  |  |  |
|   | Goodwill comprises the reputation and customer relationships of an existing business. If the price you pay for the business exceeds the fair market value of all of the rest of the assets of the business, the excess may be considered goodwill.         |  |  |
| <b>f)</b>   | Have you made arrangements with the seller for payment of personal property taxes? 📈 No 🗌 Yes  |  |  |

| Lease Information (new & transfer applicants who are leasing the premises only)  |  |  |
|--|--|--|
| a) Date lease begins 4/1/2018 Ends 4/1/2039  |  |  |
| a) Date lease begins 4112018 Ends 4112039 b) Monthly rental \$ 44,000  |  |  |
| c) Do you have an option to renew the lease? No X Yes  |  |  |
| d) Does your lease allow for assignment to another party without the consent of the owner? ሺ No 🗌 Yes  |  |  |
| e) For what length of time have you been guaranteed occupancy (number of years)? 21  |  |  |
| f) In addition to paying the monthly rental, will you have to pay anything additional to the owner of the building to guarantee performance of the lease?  |  |  |
| g) Does the present owner or occupancy object to the granting of your license? Mo Tyes   |  |  |
| If yes, explain  |  |  |
| Change of Agent Applicants Only  |  |  |
| Have there been any changes to the floor plan since the last application was submitted? 🔲 No 🔲 Yes   |  |  |
| If no, a new floor plan is not required. If yes, submit a new floor plan and explain the change(s):  |  |  |
| Notarized Signatures of Applicants   |  |  |
| SUBSCRIBED AND SWORN TO BEFORE ME This   |  |  |
| Sole Proprietor, Partner, 20% of more Shareholder, or  AMARINA MARINA MA |  |  |
| (Clerk/Notary Public)  |  |  |
| My Commission Expires 2-22-7020 Additional partner or 20% or more shareholder  |  |  |
| *Notary Seal must be affixed.  |  |  |
| Note: All information contained in this application is subject to apply a by the Common Council.  Deviating from approved plan of operation will subject licensee to citations, and/or suspension or non-renewal of the license.  Contact the License Division for information on how to request changes.  |  |  |
| New and transfer of premise applicants must submit the following:  |  |  |
| Proof of ownership, lease or offer to purchase the building Detailed floor plan lif a restaurant, copy of the menu   |  |  |



### FOOD DEALER LICENSE PLAN OF OPERATION

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

| Legal Entity Name: Uncle Wolfres Breskszet Tovern LLC  |
|--|
| Premises Address: 234 6. V. ne St. Milwanhee, wi 53212   |
| SECTION 1 TYPE OF BUSINESS   |
| Type of application (check one):   |
| Check the type that best describes your business (check only one):  See Food Dealer License Information sheet for definitions.  Restaurant   |
| SECTION 2 FOOD PROCESSING  |
| Will any food processing be done? No X Yes  Processing is defined as assembling, grinding, cutting, mixing, baking, coating, stuffing, packing, bottling, grilling, canning, extracting, fermenting, distilling, pickling, freezing, drying, smoking, or packaging.  |
| If Yes, check the types of food items:  SNACKS & BEVERAGES  includes, but is not limited to, ice cream/soft serve, lemonade, snow cones, coffee, espresso, cappuccino, tea, fruit juice, smoothies, candy, dispensed soda, fruit cups, bakery, cookies, popcorn, kettle corn, cotton candy, funnel cakes, fritters, tortilla chips w/ cheese  MEALS  includes, but is not limited to, chicken, ribs, sandwiches, roasted corn, baked potatoes, hot dogs, brats, tacos, nachos w/ cheese and meat, French fries, cooked or deep fried vegetables/fruit, cooked cheese curds, corn dogs, egg rolls, salads |
| SECTION 3 FOOD REQUIRING TEMPERATURE CONTROL   |
| Will any food that requires temperature control be sold?   [Includes dairy products such as milk, cheese, and ice cream, fish, shellfish, meat, poultry)  If yes, list the types of food items:   [Milk (cheese) west pulled.]   |

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| SECTION 4  | SHARED KITCHEN  |  |  |  |  |
|--|---|--|--|--|--|
| Will you be sharing kitchen space with another operator?   |   |  |  |  |  |
| IX No  | If No, SKIP to Section 5  |  |  |  |  |
| ☐ Yes  | If Yes, check one:  |  |  |  |  |
|  | I will rent space from another operator ("Shared Kitchen Agreement" is required)  |  |  |  |  |
|  | ☐ I will rent space to another operator (peddler/caterer)   |  |  |  |  |
| SECTION 5  | DETAILS OF OPERATION  |  |  |  |  |
| Answer the follow  | ring questions:   |  |  |  |  |
| Will you l   | have seating on site for dining?  |  |  |  |  |
| Will you i   | be doing any catering?  |  |  |  |  |
| Will you i   | be doing any delivery?  |  |  |  |  |
| Will you l   | nave outdoor activities?  |  |  |  |  |
| If Yes   | to outdoor activities, check all that apply: Bar   Cooking/Grilling  Dining   |  |  |  |  |
| Will you l   | nave a drive thru window? X No Yes  |  |  |  |  |
| If Yes   | to drive thru, are hours different from inside?   |  |  |  |  |
| If Yes   | , provide drive thru hours:   |  |  |  |  |
| Will any s   | cales or barcode scanners be used?  |  |  |  |  |
| If Yes   | a Weights & Measures application must be completed and a license obtained.  |  |  |  |  |
| SECTION 6  | ADDITIONAL SITES  |  |  |  |  |
| Where will food b  | e prepared and/or sold?   |  |  |  |  |
| At a single sit  | e   |  |  |  |  |
|  |   |  |  |  |  |
|  | tes (for example, a hotel with several dining rooms or bars) How many?es, attach a Food Dealer Additional Site Addendum (ccl-foodadd) for each additional site. |  |  |  |  |
| ii multiple sit  | cs, attach a rood Dealer Additional Site Addendam (ccroodada) for each additional site.   |  |  |  |  |
| SECTION 7  | CONSTRUCTION OR CHANGES   |  |  |  |  |
| Are you planning a   | any construction, remodeling or equipment changes?  |  |  |  |  |
| ☐ No If No   | o, SKIP to Section 8  |  |  |  |  |
| Yes If Ye  | s, check all that apply:  |  |  |  |  |
| 1  | New construction of a building  |  |  |  |  |
|  | Construction changes to an existing building  |  |  |  |  |
| · [X]  | denovation or remodeling  |  |  |  |  |
| <b>! ! ! !</b>   | quipment changes only (installation or replacement)   |  |  |  |  |
| Provide a brie   | ef description of the changes: Interior removation (Equipment installation)   |  |  |  |  |
| Start date:  | Monch, 2018   |  |  |  |  |
|  | Phone Number of Architect: JAKnotter Architects   |  |  |  |  |
|  | NIB W23217 Stone Ridge Dr. Ste 300 Wonhesha, w)   |  |  |  |  |
| NIB W23217 Stone Ritge Dr. Ste 300 Wanhesha, w) Name, Address & Phone Number of Contractor: Barthenh. Ver Construction, Inc. 53188 |   |  |  |  |  |
|  | WISG NS694 Pilgrin Pd. Menomonee Falls, w1 53051  |  |  |  |  |
|  | $\boldsymbol{\nu}$  |  |  |  |  |

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| SECTION 8   | ALCOHOL BEVERAGES  |  |  |  |
|---|--|--|--|--|
| Are you applying for an alcohol beverage license? |  |  |  |  |
| ☐ No  | If No, SKIP to Section 9   |  |  |  |
| Yes   | If YES, if your food license is approved prior to the alcohol beverage license, when do you want the   |  |  |  |
|   | food license issued? Immediately At the same time as the alcohol license   |  |  |  |
| SECTION 9   | ACKNOWLEDGEMENTS & SIGNATURE   |  |  |  |
| You must init                                     | tial each item confirming your understanding:  |  |  |  |
| Eng !   | understand the Health Department must conduct an inspection and advise the License Division of their approval efore the license may be issued.   |  |  |  |
| m   | understand I must obtain an occupancy permit from the Department of Neighborhood Services and an inspection<br>may be required. Neighborhood Services must advise the License Division of their approval before the license may<br>e issued. |  |  |  |
| (m)   | understand the district alderperson will review and either approve or deny my application. If denied, I may appeal and be scheduled to appear before the Licenses Committee. The Licenses Committee will then make a                         |  |  |  |
|   | ecommendation to the Common Council. The Common Council must grant the license before it may be issued.<br>Understand proof of payment for all license fees must be on file in the License Division before the license may be                |  |  |  |
| [ [ [ [ ] ] ] ] [ [ ] [ ] [ ] [ ]                 | understand the license must be issued and posted in my establishment prior to opening for business.  |  |  |  |
|   | will not operate my food business until the license has been issued and posted in the establishment.   |  |  |  |
|   | sole proprietor, partner, agent or 20% shareholder:  |  |  |  |
| Signature of additional partner(s):               |  |  |  |  |
|   |  |  |  |  |



### **Sidewalk Dining Facility Supplemental Application**

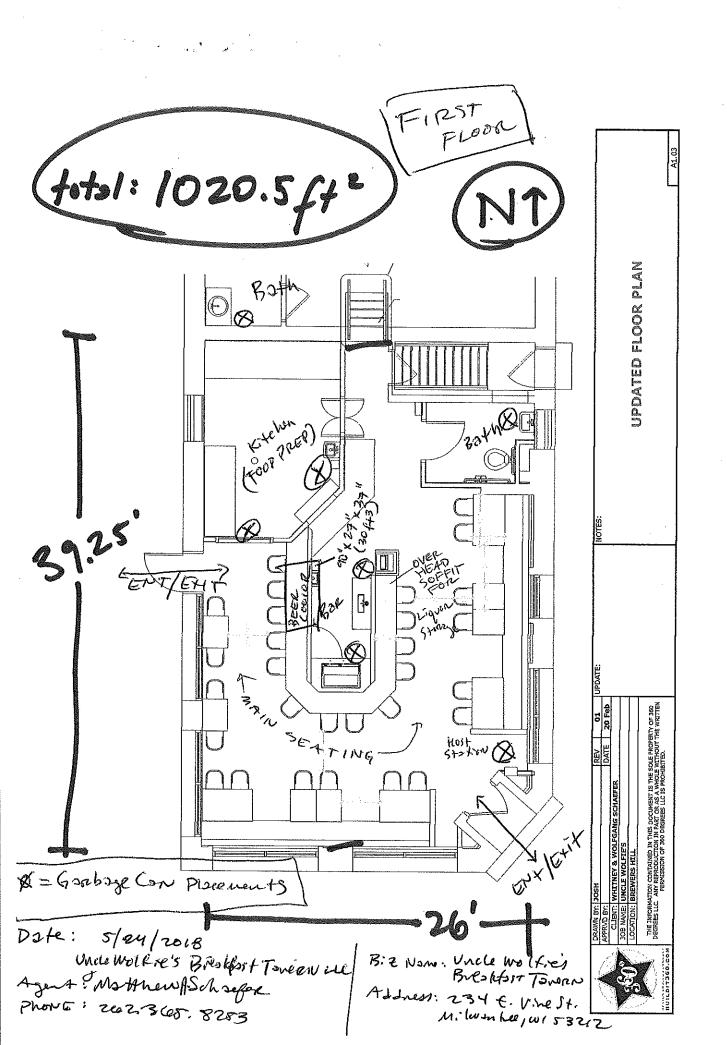
ccl-side1 12/18/17

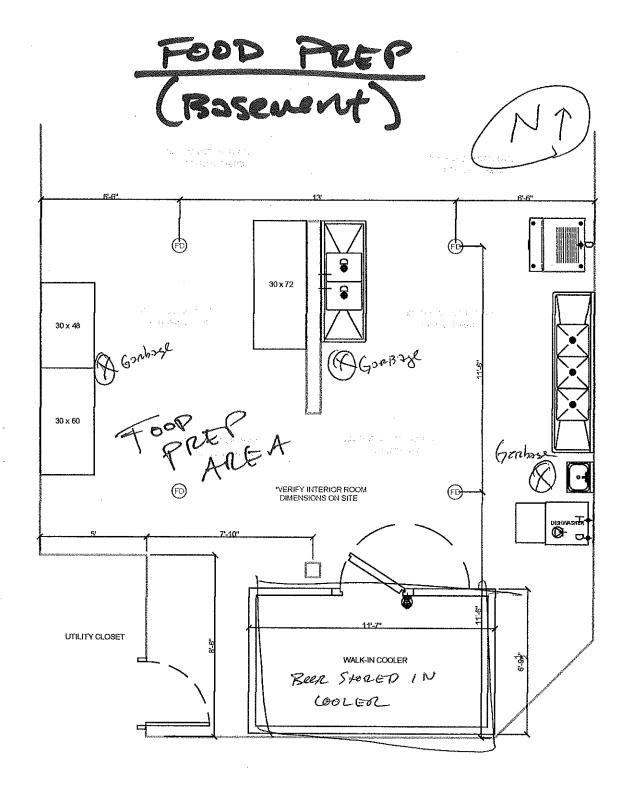
Office of the City Clerk License Division
200 E. Wells St. Room 105, Milwaukee, WI 53202
(414) 286-2238 www.milwaukee.gov/license e-mail address: license@milwaukee.gov

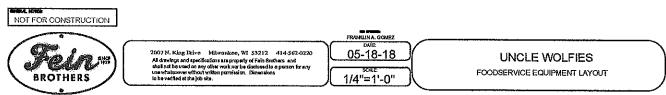
| Business Name: Uncle Wolfies Breshisst Tavean Aldermanic District # (  |  |  |  |
|--|--|--|--|
| Business Name: Uncle Wolfie's Breshfast Tavern Aldermanic District # (a  Premises Address: 234 E. Vine St. Milwanher, w1 53212   |  |  |  |
| Business Operations  |  |  |  |
| Check one:   |  |  |  |
| Alcohol application has not changed, except for the addition of this sidewalk dining facility.  have included a new Business Plan of Operation reflecting requested changes.   |  |  |  |
| Sidewalk Dining Facility will operate from: Start Date: to End Date:   |  |  |  |
| Property Owner   |  |  |  |
| Check one: Applicant owns the property  Property owner's information/signature provided below (REQUIRED):  Name: Mathematical Schalfer  Phone # 762.365.8253  Address: 1805 N. Hubbara 5t. Milwan hel, WI 532/2  Property Owner's Signature: |  |  |  |
| Signature(s)   |  |  |  |
| Signature of Sole Proprietor, Partner, or 20% of more Shareholder (If there are no 20% or more shareholders, Corporate Officer-print name/title and sign)  |  |  |  |
| Office Use Only:   |  |  |  |
| Initials Filed App # Lic #  Alsoholdsis applying for:FoodAlcoholPerm Ext  Outpute All Apps to:HealthDNSCC  |  |  |  |

□DPW

Email for Approval to:







Date: 5/24/2018

Uncle Wolfier Breakfast Taveau LLC

Agent: MathewA.Schalfer Phone: 262-365.8253

B-Z Name: Uncle Wolfier Breakfast Takorn Adman: 234 E. Vine St.
Milwanicee, W1 53212

