

# CITY OF MILWAUKEE OFFICE OF THE CITY CLERK

Wednesday, May 29, 2019

#### COMMITTEE MEETING NOTICE

AD 01

MORGAN, Michael A, Agent Supreme Delivery Services, LLC 5650 N 36th St

Milwaukee, WI 53209

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

#### Tuesday, June 04, 2019 at 01:30 PM

Regarding:

Your Recycling, Salvaging or Towing Vehicle License Application Requirement Collecting Salvaged Motor Vehicle Parts as agent for "Supreme Delivery Services, LLC" for reme Towing" at 5650 N 36th 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.

### 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.

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JIM OWCZARSKI, CITY CLERK

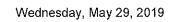
BY:

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







### Notice of Public Hearing

MORGAN, Michael A, Agent
Supreme Towing at 5650 N 36th St
Recycling, Salvaging or Towing Vehicle License Application Requesting Collecting/Delivering
Salvaged Motor Vehicle Parts

#### Tuesday, June 04, 2019 at 1:30 PM

To whom it may concern:

The above application has been made by the above named applicant(s). This requires approval from the Licenses Committee and the Common Council of the City of Milwaukee. The hearing before the Licenses Committee will take place on 6/4/2019 at 1:30 PM, 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.

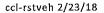
Please Note: If you have submitted an objection to the above application your objection cannot be considered by the committee unless you personally testify at the hearing.

| OCCUPANT         | MAIL ADDRESS             | CITY, STATE ZIP     |
|------------------|--------------------------|---------------------|
| CURRENT OCCUPANT | 5645 N 35TH ST           | MILWAUKEE, WI 53209 |
| CURRENT OCCUPANT | 5661 N 35TH ST           | MILWAUKEE, WI 53209 |
|                  | 5666 N 35TH ST           | MILWAUKEE, WI 53209 |
| CURRENT OCCUPANT | 3510A W SILVER SPRING DR | MILWAUKEE, WI 53209 |
| CURRENT OCCUPANT | 5626 N 35TH ST           | MILWAUKEE, WI 53209 |
| CURRENT OCCUPANT | 5667 N 36TH ST           | MILWAUKEE, WI 53209 |
| CURRENT OCCUPANT | 5687 N 36TH ST           | MILWAUKEE, WI 53209 |
| CURRENT OCCUPANT | 3526A W SILVER SPRING DR | MILWAUKEE, WI 53209 |
| CURRENT OCCUPANT | 5622 N 36TH ST           | MILWAUKEE, WI 53209 |
| CURRENT OCCUPANT | 5635 N 35TH ST           | MILWAUKEE, WI 53209 |
| CURRENT OCCUPANT | 5605 N 35TH ST A         | MILWAUKEE, WI 53209 |
| CURRENT OCCUPANT | 5626 N 37TH ST           | MILWAUKEE, WI 53209 |
| CURRENT OCCUPANT | 5625 N 36TH ST           | MILWAUKEE, WI 53209 |
| CURRENT OCCUPANT | 5632 N 36TH ST           | MILWAUKEE, WI 53209 |
| CURRENT OCCUPANT | 5635 N 36TH ST           | MILWAUKEE, WI 53209 |
| CURRENT OCCUPANT | 5653 N 36TH ST           | MILWAUKEE, WI 53209 |
| CURRENT OCCUPANT | 5629 N 35TH ST           | MILWAUKEE, WI 53209 |
| CURRENT OCCUPANT | 5637 N 35TH ST           | MILWAUKEE, WI 53209 |
| CURRENT OCCUPANT | 5644 N 35TH ST           | MILWAUKEE, WI 53209 |
| CURRENT OCCUPANT | 5648 N 35TH ST           | MILWAUKEE, WI 53209 |
| CURRENT OCCUPANT | 5654 N 35TH ST           | MILWAUKEE, WI 53209 |
| CURRENT OCCUPANT | 5662 N 36TH ST           | MILWAUKEE, WI 53209 |
| CURRENT OCCUPANT | 5683 N 36TH ST           | MILWAUKEE, WI 53209 |
| CURRENT OCCUPANT | 5626A N 37TH ST          | MILWAUKEE, WI 53209 |
| CURRENT OCCUPANT | 5643 N 36TH ST           | MILWAUKEE, WI 53209 |
| CURRENT OCCUPANT | 5650 N 36TH ST           | MILWAUKEE, WI 53209 |
| CURRENT OCCUPANT | 5655 N 35TH ST           | MILWAUKEE, WI 53209 |
| CURRENT OCCUPANT | 5634 N 37TH ST           | MILWAUKEE, WI 53209 |
| CURRENT OCCUPANT | 5619 N 35TH ST           | MILWAUKEE, WI 53209 |
| CURRENT OCCUPANT | 5682 N 36TH ST           | MILWAUKEE, WI 53209 |
| CURRENT OCCUPANT | 5619 N 36TH ST           | MILWAUKEE, WI 53209 |
| CURRENT OCCUPANT | 5640 N 36TH ST           | MILWAUKEE, WI 53209 |
| CURRENT OCCUPANT | 5640 N 37TH ST           | MILWAUKEE, WI 53209 |
| CURRENT OCCUPANT | 5667 N 35TH ST           | MILWAUKEE, WI 53209 |
| CURRENT OCCUPANT | 5654 N 36TH ST           | MILWAUKEE, WI 53209 |
| CURRENT OCCUPANT | 5675 N 36TH ST           | MILWAUKEE, WI 53209 |
| CURRENT OCCUPANT | 5620 N 36TH ST           | MILWAUKEE, WI 53209 |
| CURRENT OCCUPANT | 5622A N 36TH ST          | MILWAUKEE, WI 53209 |
| CURRENT OCCUPANT | 5628 N 36TH ST           | MILWAUKEE, WI 53209 |
| CURRENT OCCUPANT | 5631 N 36TH ST           | MILWAUKEE, WI 53209 |
| CURRENT OCCUPANT | 5644 N 36TH ST           | MILWAUKEE, WI 53209 |
| CURRENT OCCUPANT | 5650 N 37TH ST           | MILWAUKEE, WI 53209 |
| CURRENT OCCUPANT | 5647 N 36TH ST           | MILWAUKEE, WI 53209 |
| CURRENT OCCUPANT | 5656 N 37TH ST           | MILWAUKEE, WI 53209 |
| CURRENT OCCUPANT | 5681 N 35TH ST           | MILWAUKEE, WI 53209 |
| CURRENT OCCUPANT | 5605 N 35TH ST           | MILWAUKEE, WI 53209 |
| ·                |                          |                     |

| CURRENT OCCUPANT | 5674 N 37TH ST           | MILWAUKEE, WI 53209 |
|------------------|--------------------------|---------------------|
| CURRENT OCCUPANT | 5659 N 36TH ST           | MILWAUKEE, WI 53209 |
| CURRENT OCCUPANT | 5638 N 35TH ST           | MILWAUKEE, WI 53209 |
| CURRENT OCCUPANT | 5662 N 35TH ST           | MILWAUKEE, WI 53209 |
| CURRENT OCCUPANT | 5689 N 35TH ST           | MILWAUKEE, WI 53209 |
| CURRENT OCCUPANT | 3518A W SILVER SPRING DR | MILWAUKEE, WI 53209 |
| CURRENT OCCUPANT | 3512 W SILVER SPRING DR  | MILWAUKEE, WI 53209 |
| CURRENT OCCUPANT | 5660 N 37TH ST           | MILWAUKEE, WI 53209 |
| CURRENT OCCUPANT | 5665 N 36TH ST           | MILWAUKEE, WI 53209 |
| CURRENT OCCUPANT | 5666 N 37TH ST           | MILWAUKEE, WI 53209 |
| CURRENT OCCUPANT | 5686 N 36TH ST           | MILWAUKEE, WI 53209 |
| CURRENT OCCUPANT | 5632A N 36TH ST          | MILWAUKEE, WI 53209 |
|                  |                          |                     |

Total Records: 58

Radius: 250.0 feet and Center of Circle: 5650 N 36th St





# RECYCLING, SALVAGING OR TOWING VEHICLE LICENSE SUPPLEMENTAL APPLICATION

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

|  | la.   |  |  |
|--|---|--|--|
| Legal Entity Name: Suprum  | e Delivery S  | ervices LLC  |  |
| Business Address: Susp N   | 36th Street 1                                       | MILW, WI 53209   |  |
| Do you currently hold any license  | es in the City of Milwau                            | kee? No Yes If yes   | s, list: DriveRS 1 Concealed Capi  |
| Has any person on the application e<br>93 denied, not renewed, suspended   |   |  | Milwaukee Code of Ordinances Chapter   |
|  | inancial Institutions relat                         | ing to suspensions, revocat  | a record of any actions from the State lions, forfeitures and warnings imposed applicant):   |
| Do you understand that you must fo<br>Do you understand that all records a   | illow all recordkeeping, read reports must be avail | eporting and operating regulating regulations about the police department. | llations in MCO 93-45.1-3? No Yes ent upon request?  |
| Vehicle Operations ch  | eck all that apply                                  | ,  |  |
| Collecting/Delivering Junk and V   | Valuable Metal                                      | Non-Consensual Tov   | ving - Repossession Only   |
| ☐ Transporting Waste Tires   |   | Non-Consensual Tov   | ving – By Contract with the  |
| Collecting/Delivering Salvaged I (including secondhand tires/bat   |   | city of winwaukee te   | · ·  |
| Vehicle Information If   | you have more than or                               | e vehicle, complete the  | Vehicle Information, Page 2  |
| Vehicle Make:  OMC   | Model:<br>FowALD                                    | Year: 1994   | Plate #: 61555   |
| VIN #: 180C4 B1K55   | 7001411   | US DOT)# or WI DOT<br>operating authority                                  |  |
| Address where this vehicle will be p   | arked when not in use: Stoppage                     | 1700 w Silver  |  |
| Describe the facility where the vehi   |   | park on city streets):<br>StomEE Park                                      | ng lot assigned parking.   |
| What are your plans to ensure that Alarm System Securi   |   | als will be stored in a secur<br>Fenced Facility                           | e lot or facility?   |
| Required Signature(s)  |   |  | A LANGE PROPERTY OF THE PROPER |
| Sole Proprietor, Partner, or 20% or<br>(If there are no 20% or more shareh   |   | Additional partner   | or 20% or more shareholder   |
| Corporate Officer-print name/title a   | and sign)   | ,  | A SAUGUSTA   |
| VA A TOTAL AND THE STATE OF THE | A ALONG WITH THE BUSII                              | NESS LICENSE APPLICATION   | & PLAN OF OPERATION  |
| Office Use Only:   |   | Permiț#  | m.   |

| Office Use Only: |       |      | Permiț# |           |
|------------------|-------|------|---------|-----------|
| Initials         | Filed | App# | Paid ,  | MPD       |
| DNS              | LC    | СС   | lssued  | License # |



# CITY OF MILWAUKEE OFFICE OF THE CITY CLERK

Wednesday, May 29, 2019

#### COMMITTEE MEETING NOTICE

AD 01

SINGH, Rajwinder, Agent HAMPTON MEAT MARKET INC. 5308 W Hampton Av Milwaukee, WI 53218

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

#### Tuesday, June 04, 2019 at 01:30 PM

Regarding:

Your Class A Malt & Liquor, Food Dealer, and Weights & Measures License Applications as agent for "HAMPTON MEAT MARKET INC." for "HAMPTON MEAT MARKET" at 5308 W Hampton 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. See attached police report or correspondence.

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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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JIM OWCZARSKI, CITY CLERK

BY: Jessica Celella

License Division Manager

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# CITY OF MILWAUKEE OFFICE OF THE CITY CLERK

Wednesday, May 29, 2019

#### COMMITTEE MEETING NOTICE

AD 01

SINGH, Rajwinder, Agent HAMPTON MEAT MARKET INC. 6807 85<sup>th</sup> Ave Kenosha, WI 53142

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

#### Tuesday, June 04, 2019 at 01:30 PM

Regarding:

Your Class A Malt & Liquor, Food Dealer, and Weights & Measures License Applications as agent for "HAMPTON MEAT MARKET INC." for "HAMPTON MEAT MARKET" at 5308 W Hampton Av.

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JIM OWCZARSKI. CITY CLERK

3Y:

Jessica Celella

License Division Manager

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

# REDACTED RECORD

#### Martin, Faviola

From:

License

Sent:

Monday, April 8, 2019 3:04 PM

To:

Martin, Faviola

Subject:

FW: Public Interest Notice 5308 W. Hampton Ave.

Follow Up Flag:

Follow up

Flag Status:

Flagged

Keren Becker
License Specialist III
City Clerk – License Division
O: (414) 286-2238
F: (414) 286-3057
License@Milwaukee.gov
www.Milwaukee.gov/license



From

Sent: Monday, April 8, 2019 2:53 PM

To: License

Cc

Subject: Public Interest Notice 5308 W. Hampton Ave.

I, strongly object to licensing Class A Malt, Class A Liquor and Food Dealer at 5308 W.

Hampton Ave.

There are already 3 bars in the neighborhood. There have been shootings, murders and increased police involved incidents in this neighborhood. Adding alcohol sales will likely add more troubling elements to an already troubled area.

As a to the applicant I will say these are not good neighbors. There is constantly loud noise from the parking lot. The police have been called on several occasions due to noise and marijuana smoke emanating from the business as well as cars in the parking lot. There are constantly loud radios blaring in the parking lot and the City has been called numerous times due to build up of trash, lack of policing the parking lot, lack of shoveling sidewalk, lack of proper noise control.

I hope full police records are sought for this business, the number of times pot has been found in cars and the overall poor cleanliness of the lot and its surroundings.

Sincerely,

Contact:

e-mail:

Date: 5/13/2019

Officer: Bowie Buchner

### City of Milwaukee Police Department

### 90-5-1.5 Crime Prevention Survey

#### **Convenience Store/Liquor Store Inspection**

Name of Business: Hampton Meat Market

Address: 5308 W Hampton Av

Phone: 847-660-3480

Owner: Rajwinder Singh

Owner address: 6807 85th St

City State Zip: Kenosha, WI 53142

Owner Phone: 847-660-3480 or 908-494-0992

Owner email: dilraj2@hotmail.com

Manager: Rajwinder Singh

Home Address: 6807 85th St

City State Zip: Kenosha, WI 53142

Phone: 847-660-3480

Email: dilraj2@hotmail.com

Preferred contact: Rajwinder Singh

| Location currently op | oen:     | □YES ⊠NO            |                        |                              |
|-----------------------|----------|---------------------|------------------------|------------------------------|
| Projected open date:  |          |                     | ·                      |                              |
| Day's open: □S □M     |          | W □Th □F □SA ⊠A     | LL                     |                              |
| Hours of Operation:   | Sun: 8   | :00am-7:00pm        | 24 hours □Y □N         |                              |
|                       | Mon:     | 8:00am-7:00pm       |                        |                              |
|                       | Tue: 8   | :00am-7:00pm        |                        |                              |
|                       | Wed:     | 8:00am-7:00pm       |                        |                              |
|                       | Thu: 8   | 3:00am-7:00pm       |                        |                              |
|                       | Fri: 8:0 | 00am-7:00pm         |                        |                              |
|                       | Sat: 8   | :00am-7:00pm        |                        |                              |
|                       |          |                     |                        |                              |
| Premise Type:         | □Liqu    | uor Store           |                        |                              |
|                       | ⊠Cor     | nvenience Store     |                        |                              |
|                       | □Oth     | er:                 |                        |                              |
| Licenses currently he | eld:     |                     |                        |                              |
| Alcohol:              |          | ⊠Yes □No Class: A   | #: ALQML291339         | This license is applied for  |
| Tobacco:              |          | ⊠Yes □No #: ClG291  | 343                    | This license is applied for  |
| Food:                 |          | ⊠Yes □No #: FOOD2   | 91341                  | This license is applied for  |
| Extended Hou          | urs: ˌ   | □Yes ⊠No #: Click h | ere to enter text.     |                              |
| Secondhand [          | Dealer:  | □Yes ⊠No Type:Cli   | ck here to enter text. | #: Click here to enter text. |
| Other:                |          | □Yes ⊠No Type:We    | ights and Measures     | #: Click here to enter text. |
| Other:                |          | □Yes ⊠No Type: Clid | ck here to enter text. | #: Click here to enter text. |

Who is your alcohol distributor? None at the time, possibly beachwood

#### **Exterior Survey:**

| 1.   | Is the area around the location clean? $\square$ Yes $\boxtimes$ No   |
|------|---|
| 2.   | What surrounds the location? (Check all the apply)  |
|      | a. □Park  |
|      | b. □School  |
|      | c.   Youth Center   |
|      | d.   Church   |
|      | e. Tavern(s) If so, how many Click here to enter text.  |
|      | f.   Residential  |
|      | g. Other businesses   |
|      | h. 🗵 Other: Vacant lot  |
| 3.   | Can you see from the outside of the location into the interior $\square$ Yes $\boxtimes$ No                         |
| 4.   | Can you see the employees inside of the location from the outside $\square$ Yes $\ oxtimes$ No                      |
| 5.   | Are exterior windows free of signage □Yes ⊠No   |
| 6.   | Is there a parking lot ⊠Yes □No   |
| 7.   | Is the parking lot clean? ⊠Yes □No  |
| 8.   | Is the parking lot well lit? ⊠Yes □No   |
| 9.   | Are there areas where a person could conceal themselves $\square Yes oxtimes No$                                    |
| 10   | . Is there exterior lighting? $oxtimes$ Yes $oxtimes$ No. Does it appears to be adequate $oxtimes$ Yes $oxtimes$ No |
| 11   | . Exterior Payphone? □Yes ⊠No, inoperable   |
| , 12 | . Are there No Loitering Signs posted? □Yes ☒No   |
| 13   | . Are the address numbers prominently displayed and easy to see $oxtimes$ Yes $oxtimes$ No                          |

| <u>Camera</u> | Survey: |
|---------------|---------|
|               |         |

| Camera Survey:  |
|---|
| 14. Does this location have security cameras? □Yes ⊠No  |
| 15. Are they in working order? □Yes ⊠No   |
| 16. What format are the cameras?  |
| a. Color ⊠Yes □No   |
| b. Digital ⊠Yes □No   |
| c. VCR □Yes ⊠No   |
| d. Recorded ⊠Yes □No  |
| 17. How long is footage stored for later viewing: 14 days   |
| 18. Are there exterior cameras □Yes ☑No How many:   |
| 19. Are there interior cameras $\square$ Yes $\boxtimes$ No How many:                                 |
| 20. Do all employees know how to retrieve recorded digital images/footage? $oxtimes$ Yes $oxtimes$ No |
|   |
|   |

#### **Interior Survey:**

| 21. Is the storeowner willing to be a standing c                    | omplainant regarding loitering? ⊠Yes ∐No          |
|---|---|
| a. If yes have them fill out the standing commercial signs ⊠Yes □No | g complaint form and give them two of the         |
| 22. Is the interior of the location neat and clea                   | n? ⊠Yes □No                                       |
| 23. Does an interior camera face the entrance/                      | 'exit? □Yes ⊠No                                   |
| 24. Is there a lockable area that separates emp                     | loyees from customers? □Yes ⊠No                   |
| 25. Does the store sell single chore boy?                           | □Yes ⊠No  |
| 26. Does the store sell blunt wraps?                                | □Yes ⊠No  |
| 27. Does the store sell scales?                                     | □Yes ⊠No  |
| 28. Does the store sell items that may be used                      | as crack pipes? □Yes ⊠No                          |
| a. Describe item N/A  | `   |
| 29. Does the store have an overabundance of                         | sandwich baggies: □Yes ⊠No                        |
| 30. Does the owner understand that these iter                       | ns are often used for drug use? ⊠Yes □No          |
| 31. Do the products in the store appear to be                       | new and rotated often? $\square$ Yes $oxtimes$ No |
| 32. Are emergency and non-emergency number                          | ers posted near the phone? □Yes 図No               |
| 33. Does the owner know how to contact their                        | police district directly? ⊠Yes □No                |
| a. Did you provide a district contact g                             | uide to the owner?⊠Yes □No                        |

#### Complete this section if alcohol establishment is a convenience store:

(\*\* Read full ordinance for all details "68-55 Convenience Food Stores") All convenience food stores not exempted under sub. 3 shall: 1. Is the cash register located in a manner so that at the time of a sales transaction, the employee and customer are both visible from the sidewalk? ☐Yes ☐No \*\* 2. Are the glass entrance and exit doors clear of any signs or advertisements with the exception of a sign which states that the cash register contains \$50 or less and that the safe is no accessible to employees? ☐Yes ☒No 3. Does the store maintain one of the following on the licensed premise: a. A safe that was in use at the convenience food store on August 17, 1994? □Yes ⊠No b. A drop-safe or time release safe that weighs at least 500 pounds or which is attached to or set into the floor in a manner approved by the police department? □Yes 図No 4. Is lighting provided for the store's parking area during all hours of darkness when employees or customers are on the premises at a minimum average of 2-foot candles per square foot, unless the store is not open for business after sunset and before sunrise? ⊠Yes □No □N/A 5. Are at least two high-resolution surveillance security cameras installed? □Yes ⊠No 6. Are the security cameras in working order?  $\square$  Yes  $\boxtimes$  No 7. Does one camera show an overall view of the counter and register area? □Yes ⊠No 8. Does one camera show a clear, identifiable, full frame image of the face of each person entering and leaving the store? ☐Yes ☒No

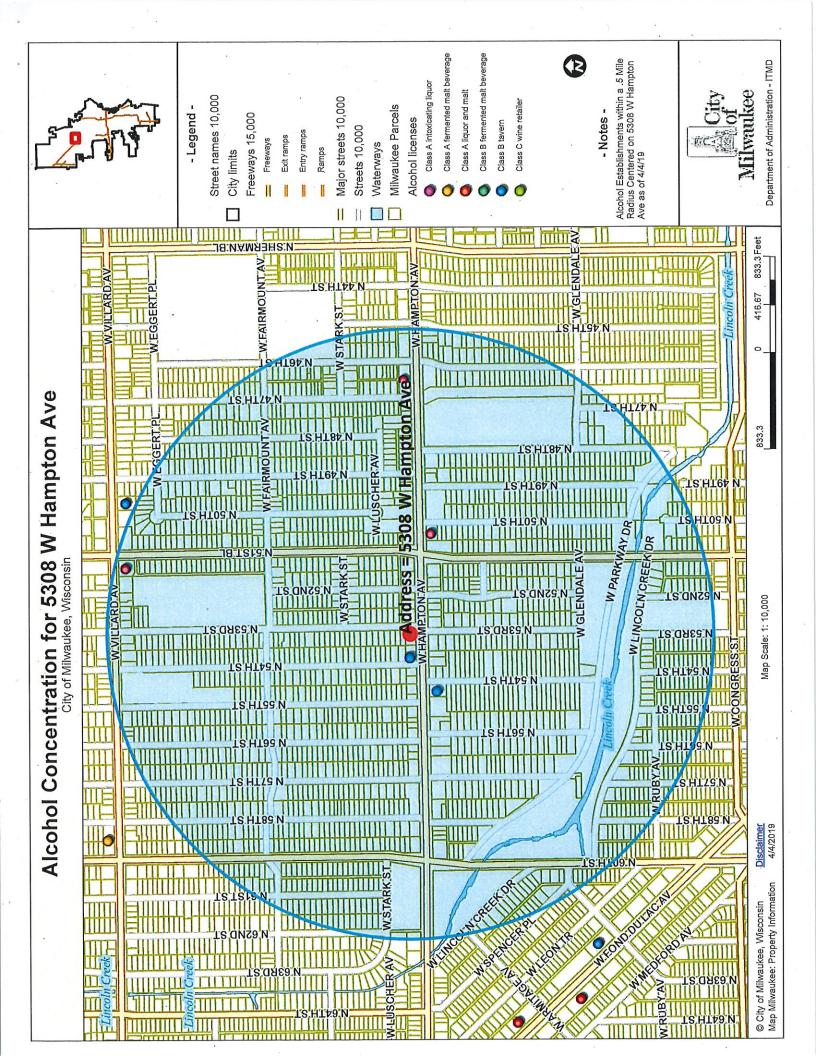
9. Are the camera views obstructed by fixtures or displays?  $\square$  Yes  $\square$  No

| 10. Is the recorded footage stored for at least 30 days? □Yes ⊠No  |
|--|
| 11. Do all store employees know how to record footage from the camera system to media capable of being transferred to police custody? □Yes ☒No   |
| 12. Are customer entrances/exits made of glass or other transparent material?  |
| □Yes ⊠No   |
| <ul> <li>Exception: A store that does not have such doors on August 17, 1994 shall<br/>not be required to install such doors until the holder of the store's food<br/>dealer license changes.</li> </ul> |
| 13. Has the owner and their employees attended the Robbery Prevention Training within 120 days of ownership or employment? □Yes ⊠No  |
|  |

| Sub 3. Exemption     | s. The requirements of this section do not apply to a convenience food  |
|----------------------|---|
| store that conform   | ns to either of the following descriptions:   |
|                      |   |
|                      |   |
|                      | is located in an enclosed shopping structure, enclosed commercial building or   |
| •                    | nience food store is not in an enclosed structure or building if a customer can   |
| enter it directly fr |   |
| Does store confor    | m to a-1 □Yes ⊠ No  |
|                      |   |
|                      |   |
|                      | physically separates employees from customers with a solid partition that bars  |
|                      | tering the employee area from the customer area, has a secure lock on the any door between the employee area and the customer, and conducts all |
|                      | gh a service window or similar arrangement.   |
| •                    | m to a-2 □Yes ⊠No   |
| buch store domo.     |   |
|                      |   |
| a.                   | At the commissioner's discretion, a convenience store may be exempted   |
|                      | from any or all of the regulations specified in sub 2.  |
|                      | Does this location hold an exemption from the commissioner regarding any  |
| ·                    | of the requirements of Sub 2? ☐Yes ☒No  |
|                      |   |
|                      |   |
|                      |   |

#### ADDITIONAL COMMENTS/RECOMMENDATIONS:

This location was being remodeled at the time of this inspection. There was no product and the interior had not yet been set up. The windows were covered at the time and the window on the front door was covered with a sign that stated the business was closed for remodeling. Regarding the no loitering sign on the exterior there was not one at the time of the inspection, but I was told they would have signs up before they opened. As far as security cameras I was told that they plan to install 12-16 cameras, but they did not know exact locations they where going to place the cameras as the store is still being remodeled. There also was no safe at the location, but I was told that they would be getting a drop safe or time release safe.



|    | ⋖  | m                       | U.   | Δ  | lli            | 1                     | פ               |         |
|----|--|-------------------------|--|--|----------------|-----------------------|-----------------|---------|
| ۲, | Licensed Alcohol Beverage                          | Establishments within a | Licensed Alcohol Beverage Establishments within a .5 Miles Radius Centered on 5308 W Hampton A | Hampton Ave as of 4/4/19   |                |                       |                 |         |
| 2  |  |                         |  |  |                |                       |                 |         |
| ъ  | License Summary                                    |                         | ,  | The second secon |                |                       | Total           |         |
| 4  | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,            |                         |  |  |                |                       |                 |         |
| £  | Class A Fermented Malt Beverage Retailer's License | t Beverage Retailer's L | icense   | THE PARTY OF THE P |                |                       |                 | 1       |
| 9  | Class A Malt & Class A Liquor License              | iquor License           |  | The state of the s |                |                       |                 | 3       |
| _  | 7 Class B Tavern License                           |                         |  | THE THE TAX AND ADDRESS OF THE TAX AND ADDRESS OF THE TAX AND ADDRESS OF THE TAX ADDRESS  |                |                       |                 | 33      |
| Ø  |  |                         |  |  |                | Grand Total           |                 | 7       |
| 6  |  |                         |  |  |                |                       |                 |         |
| ដ  |  |                         |  |  |                |                       |                 |         |
| H  | Legal entity                                       | Trade name              | Licensee   | License type name  | Total capacity | Address               | Expiration date |         |
| 12 | 12 Burbachs Market Inc.                            | Burbachs Market         | Gurdip S Sodhi, Agt  | Class A Fermented Malt Beverage Retailer's License   |                | 5308 W Hampton AV     |                 | 5/8/19  |
| 13 | 13 4616 Stark INC.                                 | Stark Foods II          | CHARNJIT KAUR, Agt   | Class A Malt & Class A Líquor License  |                | 4616 W Hampton AV     |                 | 12/4/19 |
| 14 | 14 Toor Stores LLC                                 | Jack's Liquor           | Davinder S Toor, Agt   | Class A Malt & Class A Liquor License  |                | 5009 W Hampton AV     |                 | 6/19/19 |
| 13 | ASR, INC   | VILLARD FOODS           | AHMAD A ABDALLAH, Agt  | Class A Malt & Class A Liquor License  |                | 5123 W VILLARD AV     |                 | 2/21/20 |
| 16 | II Life Bar LLC                                    | III Life Bar            | TIPHANNIE M ROBY, Agt  | Class B Tavern License   |                | 5334 W Hampton AV     |                 | 3/29/19 |
| 17 | 17 III Life Bar LLC                                | II Life Bar             | TIPHANNIE M ROBY, Agt  | Class B Tavern License   |                | 5334 W Hampton AV     |                 | 3/29/20 |
| 18 | 18 BIL-MAC, INC                                    | HAMPTON HOUSE           | HAMPTON HOUSE JEFFREY P KAMERMAYER, Agt  | Class B Tavern License   | 100            | 100 5403 W HAMPTON AV |                 | 3/25/20 |

Wednesday, May 29, 2019



### Licenses Committee Notice of Hearing

J & Z REALESTATE LLC 5308 W HAMPTON Av Milwaukee, WI 53218

Date:

6/4/2019

Time:

01:30 PM

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

The Licenses Committee will consider the following license application:

Class A Malt & Liquor, Food Dealer, and Weights & Measures License Applications SINGH, Rajwinder, Agent HAMPTON MEAT MARKET at 5308 W Hampton Av

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

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



Wednesday, May 29, 2019



### Licenses Committee Notice of Hearing

RAJWINDER SINGH 6807 85<sup>TH</sup> AVE KENOSHA, WI 53142

Date:

6/4/2019

Time:

01:30 PM

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

The Licenses Committee will consider the following license application:

Class A Malt & Liquor, Food Dealer, and Weights & Measures License Applications SINGH, Rajwinder, Agent HAMPTON MEAT MARKET at 5308 W Hampton Av

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

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





Wednesday, May 29, 2019



# Notice of Public Hearing

SINGH, Rajwinder, Agent
HAMPTON MEAT MARKET at 5308 W Hampton Av
Class A Malt & Liquor, Food Dealer, and Weights & Measures License Applications

#### Tuesday, June 04, 2019 at 1:30 PM

To whom it may concern:

The above application has been made by the above named applicant(s). This requires approval from the Licenses Committee and the Common Council of the City of Milwaukee. The hearing before the Licenses Committee will take place on 6/4/2019 at 1:30 PM, 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.

| OCCUPANT         | MAIL ADDRESS        | CITY, STATE ZIP     |
|------------------|---------------------|---------------------|
| CURRENT OCCUPANT | 4847 N 53RD ST      | MILWAUKEE, WI 53218 |
| CURRENT OCCUPANT | 4832 N 54TH ST      | MILWAUKEE, WI 53218 |
| CURRENT OCCUPANT | 4837 N 53RD ST      | MILWAUKEE, WI 53218 |
| CURRENT OCCUPANT | 4762 N 53RD ST      | MILWAUKEE, WI 53218 |
| CURRENT OCCUPANT | 4844 N 54TH ST      | MILWAUKEE, WI 53218 |
| CURRENT OCCUPANT | 5219A W HAMPTON AVE | MILWAUKEE, WI 53218 |
| CURRENT OCCUPANT | 4821 N 52ND ST      | MILWAUKEE, WI 53218 |
| CURRENT OCCUPANT | 4837 N 52ND ST      | MILWAUKEE, WI 53218 |
| CURRENT OCCUPANT | 4826 N 54TH ST      | MILWAUKEE, WI 53218 |
| CURRENT OCCUPANT | 4815 N 53RD ST      | MILWAUKEE, WI 53218 |
| CURRENT OCCUPANT | 4840 N 54TH ST      | MILWAUKEE, WI 53218 |
| CURRENT OCCUPANT | 5334 W HAMPTON AVE  | MILWAUKEE, WI 53218 |
| CURRENT OCCUPANT | 4826A N 54TH ST     | MILWAUKEE, WI 53218 |
| CURRENT OCCUPANT | 4844 N 53RD ST      | MILWAUKEE, WI 53218 |
| CURRENT OCCUPANT | 5210 W HAMPTON AVE  | MILWAUKEE, WI 53218 |
| CURRENT OCCUPANT | 4821 N 53RD ST      | MILWAUKEE, WI 53218 |
| CURRENT OCCUPANT | 4829 N 52ND ST      | MILWAUKEE, WI 53218 |
| CURRENT OCCUPANT | 4829 N 53RD ST      | MILWAUKEE, WI 53218 |
| CURRENT OCCUPANT | 4828 N 53RD ST      | MILWAUKEE, WI 53218 |
| CURRENT OCCUPANT | 4814 N 54TH ST      | MILWAUKEE, WI 53218 |
| CURRENT OCCUPANT | 4820 N 53RD ST      | MILWAUKEE, WI 53218 |
| CURRENT OCCUPANT | 4836 N 53RD ST      | MILWAUKEE, WI 53218 |
|                  |                     |                     |

Total Records: 22

Radius: 250.0 feet and Center of Circle: 5308 W Hampton Ave

ccl-busplan 3/15/18



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

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

| 1. T    | ype of Business  |
|---------|--|
| Applyir | 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)  |
| Provid  | e a detailed description of the type of business you plan on operating:  |
| *5      | Meat Market with been and governy.   |
| Do you  | e a detailed description of the type of business you plan on operating:  Meat Market with beer and grocery.  I have any experience operating this type of business?   No XYes If yes, explain:   Year Working at Store in It   |
| 2. B    | distriess Operations   |
| a.      | Proposed Opening Date: 4/1/2019  |
| 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? \( \sum_{No} \sum_{ |
| e.      | Is the current licensee operating?   No X 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:  |
| 3. Li   | tter & Noise   |
| a.      | How are grounds kept clean? Sweep 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? 🔯 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: Locations:   |
|         | Outside: Locations: By the pontilion   |
| С.      | Is a crowd control barrier used? XNo 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 XYes  | If yes, how     | many?an                                    | d describe | the parking security     |
| plan: monito                     | plan: monitored by employees.  |                 |  |            |                          |
| b. Is there a loading zone?      | ☐ No 💢 Yes If yes, d   | escribe the lo  | oading area security plar                  | 1:         | <u> </u>                 |
|                                  | red by emy   |                 |  |            |                          |
| c. Will you have security pe     | rsonnel on premise? 🏚  | No Yes          | If yes,how many?                           | an         | nd answer the following: |
|                                  |  |                 | , , , , , , , , , , , , , , , , , , ,      |            |                          |
|                                  |  |                 | scribe                                     |            |                          |
|                                  |  |                 |  |            |                          |
| d. Will there be security car    |  |                 |  |            |                          |
|                                  | the building   |                 |  |            |                          |
| e. Will searches/identificati    | CONTRACTOR OF THE PERSON OF TH |                 | No Yes If yes, describ                     | oe         |                          |
| 6. Percentage of Sales           |  | %)<br>→         |  |            |                          |
| Alcohol                          | Food   | %               | Secondhand Merchandise                     | е          | Precious Metals & Gems   |
| Entertainment%                   | Cigarettes   | 0%              | %  |            | %                        |
|                                  | Salvaged Materials   | _%              | Personal Services (such a                  |            | Other%                   |
| Pawnbroker Activity%             | (such as scrap metal)  |                 | body piercing, salon, tailo tanning, etc.) |            | Describe:                |
| 7. Businesses/Licenses           | on the Premise   | s (check a      | all that apply):                           |            |                          |
| Type 1                           |  |                 | 1.5 d Partament                            | □ Drivete  | /Fraternal/Veterans Club |
| Full Service Restaurant          | Cafe/Coffee Shop   | _               | ast Food Restaurant                        |            |                          |
| ☐ Night Club                     | ∐ Tavern   | Cocktail        |  | Teen C     | iub                      |
| Banquet Hall                     | Sports Facility  | Bowling         |  |            |                          |
| Hotel/Motel: Number of Fl        |  | ∐ Roomin        | g House: Number of Floo<br>Number of Roo   |            |                          |
| Type 2                           | ooms:  |                 | Hamber of Roo                              | /          |                          |
| Liquor Store                     | Corner Store   | Superma         | arket                                      | Conven     | ience Store              |
| ☐ Gas Station                    | Amusement/Phonog   | graph Distribut | cor  | Recyclin   | ng, Salvage or Towing    |
| Used Car Dealer                  | Personal Service Es  |                 | n, tailor, etc.)                           | Record     | ing Studio               |
| What other licenses/permits will | you hold at this location?   | (check all that | apply)                                     |            |                          |
|                                  |  |                 | Extended Hours Class "E                    | 3" Tavern  | Weights & Measures       |
| Secondhand Dealer                | ]Precious Metal & Gem [  | Other:          | ass A Malt.                                |            |                          |
| 8. Legal Capacity (on            | y if a Type 1 pre  | mises in ‡      | ‡7 above)                                  |            |                          |
| Capacity (Call the               | e Milwaukee Developmen   | t Center at 41  | 4-286-8211 if you have que                 | estions.)  |                          |

| 9. Premises D   | escription   |  |  |  |   |
|---|--|--|--|--|---|
| a. Identify all area  | a. Identify all area(s) of the premises that will be used in operating this business (include areas used only for storage):  X1 <sup>st</sup> Floor □2 <sup>nd</sup> Floor □Basement Storage □Patio □Beer Garden □Sidewalk Café □Deck □Rooftop |  |  |  |   |
|   | Other: Describe:   |  |  |  |   |
| b. Describe Locat   | ion: Major Thoroughfare  | Secondary Street Ot  | her:   |  |   |
| c. Nearest Major  | ion: Major Thoroughfare<br>Cross Street: 1 aw  | ston Ave d   | N 53 ra St   |  | · · · · · · · · · · · · · · · · · · ·           |
|   | ng: Kree Standing Buildin  |  |  |  |   |
|   | ises Structure: 🂢 Single Sto   |  |  |  |   |
| f. Describe Surro   | unding Area: 🛛 Commercia<br>r Name: <u>Rajwindu</u>  | Residential Industr  | ial Other:   | 00 110 11 67   | 202   |
| g. Building Owne  | r Name: Kajwinde   | ~ Singh.   | Phone Number: 40   | 52110  | 192   |
| Business Owne   | er Address: 6807   | gon menue, L   | moeng, WI  | <u> </u>   |   |
| 10. Hours of C  | peration & Custor  | mers   |  |  |   |
| Will customers be ent   | ering the premises?  | Yes  |  |  |   |
| Day of the Week   | Proposed Hour  | s of Operation:  | Estimated Number<br>of Customers<br>expected each day    | Potential Age Range of Customers   | Class B Tavern Applicant Only:                  |
| Day of the week   | Open Time<br>(include a.m. or p.m.)  | Close Time<br>(include a.m. or p.m.)                         |  |  | Age Restriction<br>(If none, write 'None')      |
| Sunday  | 8 Am   | 6 pm   | 50   | 12-60y   | •   |
| Monday  | h  | FPM  | 4  | •  |   |
| Tuesday   | ч  | . 4  | 4  | 6  |   |
| Wednesday   | u  | 4  | 4  | u ·  | *   |
| Thursday  | и  | 4  |  | ,  |   |
| Friday  | 4  | v  | 7  | ,  | 9 9   |
| Saturday  | u  | y  |  | • ~  |   |
| An Extended Hours Espiercing, salon, tailor,  | stablishment License is requir<br>tanning, etc.), recording stud   | ed for any convenience stor<br>dio or restaurant which is op | e, filling station, persona<br>en between the hours of   | l service establish<br>12:00 a.m. and 5  | ment (such as tattoo, body<br>:00 a.m.          |
| Alcohol Establishmen<br>Permitted Hours of O  |  | am to 9:00 pm Sunday thru<br>am to 2:00 am Sunday thru       |  | 0 am Friday & Sat  | turday  |
| Entertainment Outdo   | or Closing Hours: 10:0   | Opm Sunday-Thursday; 12:0<br>tablished by the Common Co      | Oam Friday & Saturday; u<br>ouncil in its approval of th | nless a different t<br>ne licensee's plan  | time, either earlier or later,<br>of operation. |
| 11. Signature   | (s)  |  |  |  |   |
| × @0:   | Jen  |  | a a  | ,  |   |
| Signature of Sole Proprietor, Partner, or 20% or more Shareholder  Signature of additional partner or 20% or more shareholder |  |  |  |  |   |
| (If there are no 2  | 0% or more shareholders,   |  |  | A STATE OF THE STA |   |
| Cornorate Office  | r-print name/title and sign)   |  |  |  |   |



#### **FOOD DEALER LICENSE PLAN OF OPERATION**

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

| Legal Entity Name: HAMPTON MEAT MARKET ING  |
|---|
| Premises Address: 5308 W HAMPTON AVE, MILWADKEE, WI 53218   |
| SECTION 1 TYPE OF BUSINESS  |
| What will be the majority of your food sales? (check one)   |
| Restaurant Items (meals):  MEALS include, but are not limited to, chicken, ribs, sandwiches, roasted corn, baked potatoes, hot dogs, brats, tacos, nachos w/ cheese and meat, French fries, cooked or deep fried vegetables/fruit, cooked cheese curds, corn dogs, egg rolls, salads.                                       |
| Retail Items (snacks and beverages):  RETAIL items include, but are not limited to, ice cream/soft serve, lemonade, snow cones, coffee, espresso, cappuccino, tea, fruit juice, smoothies, candy, dispensed soda, fruit cups, bakery, cookies, kettle corn, cotton candy, funnel cakes, fritters, tortilla chips w/ cheese. |
| Will it be a convenience store? XYes No A convenience store contains less than 5,000 square feet of retail space and has, as its primary business, the sale of basic food items and in addition, sells household products or is a filling station that sells basic food items and household products.                       |
| ☐ Bed & Breakfast ☐ Micro Market  |
| All Applicants: Submit a menu or a list of food items that will be sold.  |
| Will any wholesale business be done? 🔀 No 🔲 Yes If yes, what percentage of food sales will be wholesale?  |
| Less than 25%   |
| <ul> <li>25% or More AND:</li> <li>Restaurant items (meals) will be sold – Complete this application and also contact DATCP.</li> <li>NO restaurant items (meals) will be sold – Do NOT complete this application. Contact DATCP only.</li> </ul>   |
| SECTION 2 FOOD PROCESSING   |
| Will any food processing be done? No X Yes  |
| Processing is defined as assembling, grinding, cutting, mixing, baking, coating, stuffing, packing, bottling, grilling, canning, extracting, fermenting, distilling, pickling, freezing, drying, smoking, or packaging.   |
| SECTION 3 FOOD REQUIRING TEMPERATURE CONTROL  |
| Will any food that requires temperature control be sold? \(\sum \text{No}\) No \(\text{No}\)Yes (includes dairy products such as milk, cheese, and ice cream, fish, shellfish, meat, poultry)   |
| If yes, list the types of food items: FISH, NEAT, POULTRY, MILK, CHEESE, TCE CREAT  |

ccl-foodplan 9/26/18

| SECTION 5 DETAILS OF OPERATION  |
|---|
| Will you have seating on site for dining?   |
| Will you be doing any catering?   |
| Will you be doing any delivery? Yes   |
| Will you have outdoor activities? ☐ No ☐ Yes - Check all that apply: ☐ Bar ☐ Cooking/Grilling ☐ Dining  |
| Will you have a drive thru window? Yes - Are hours different from inside? No Yes  |
| If Yes, provide drive thru hours:   |
| Will scales or barcode scanners be used? No Yes - You must also apply for a Weights & Measures License.   |
| SECTION 6 ADDITIONAL SITES  |
| Where will food be prepared and/or sold?  |
| At a single site At multiple sites: How many?(for example, a hotel with several dining rooms or bars)   |
| If multiple sites, attach a Food Dealer Additional Site Addendum (ccl-foodadd) for each additional site.  |
| SECTION 7 CONSTRUCTION OR CHANGES   |
| Are you planning any construction, remodeling or equipment changes?   |
| No If No, SKIP to Section 8   |
| Yes If Yes, check all that apply:  New construction of a building Renovation or remodeling  |
| ☐ Construction changes to existing building ☐ Equipment changes only  |
| Provide a brief description of the changes: <u>Cuill be adding a hood</u> , new roof  |
| Provide a brief description of the changes:  Cuill be adding a hood, new roof,  flowing 4 toucking up outside reacting.   |
| Name, Address & Phone Number of Architect:  |
| Trume, Address & Filorie Hamber Styllismesti.   |
| Name, Address & Phone Number of Contractor:   |
| Name, Address & Filone Number of Contractor.  |
| 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 license, when do you want the food license issued?  |
| M Immediately ☐ At the same time as the alcohol license   |
| SECTION 9 ACKNOWLEDGEMENTS & SIGNATURE  |
| You must initial each item confirming your understanding:   |
|   |
| I understand the Health Department must conduct an inspection and advise the License Division of their approval before the license may be issued.   |
| Lunderstand I must obtain an occupancy permit from the Department of Neighborhood Services and an inspection  |
| may be required. Neighborhood Services must advise the License Division of their approval before the license may be issued.   |
| I understand the district alderperson will review and either support or object to my application. If he/she objects, I  |
| may appeal and be scheduled to appear before the Licenses Committee. The Licenses Committee will then make a recommendation to the Common Council. The Common Council must grant the license before it may be issued. |
| I understand proof of payment for all license fees must be on file in the License Division before the license may be  |
| issued and the license must be issued and posted in my establishment prior to opening for business.  I will not operate my food business until the license has been issued and posted in the establishment.           |
|   |
| Signature of Sole Proprietor, Partner, or 20% Shareholder:  |
|   |

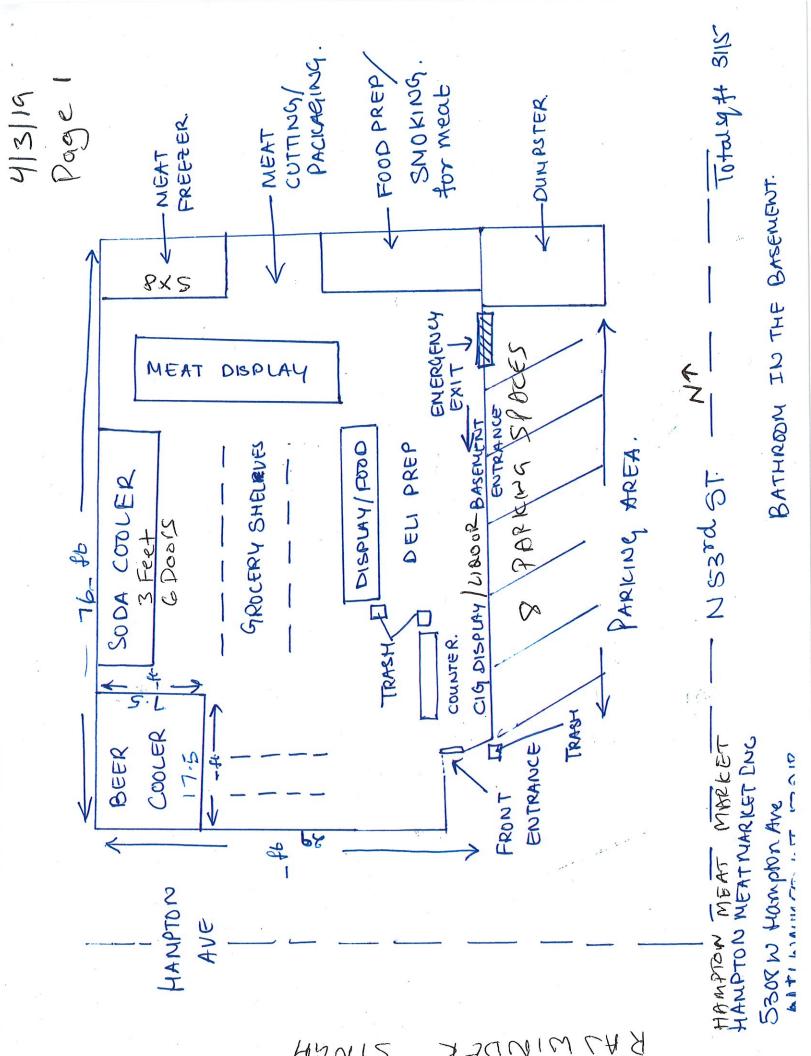


#### **WEIGHTS & MEASURES PLAN OF OPERATION**

ccl-wmplan 1/9/18

Office of the City Clerk License Division
200 E. Wells St. Room 105, Milwaukee, WI 53202
(414) 286-2238 <a href="www.milwaukee.gov/license">www.milwaukee.gov/license</a> <a href="license@milwaukee.gov/license">license@milwaukee.gov/license</a>

| Legal Entity Name:  | Haruphon Meat Moulet Inc  |  |
|---|---|--|
| Premise Address:  | Haruphon Meat Moulet Inc<br>5308 W hampton Are, Mihoude WI 53218  |  |
| Type of Business  |   |  |
| Provide a brief description of the establishment/business: Its a meat store that will also sell grocery, agol Beer. |   |  |
| Other licenses may be r   | required depending on the type of business you are operating.   |  |
| Litter & Noise  |   |  |
| b. How often will g<br>c. Grounds cleaned<br>d. How are noise is  | skept clean? Sweep Pressure Wash Pick Up Litter Other: rounds be cleaned? Daily Weekly As Needed Monthly Other: by: Sticensee Building Owner Employees Hired Maintenance Other: sues prevented and/or addressed? Security Manager approaches customer(s) Call Police osted Other: |  |
| Signature   |   |  |
| (If there are no 20% o  | Signature of additional partner or 20% or more shareholder or more shareholders, nt name/title and sign)  |  |
| 1 -   | submitted with the Business License Application, Weights & Measures License Supplemental ropriate fee. Forms can be obtained online at <a href="https://www.milwaukee.gov/licenses">www.milwaukee.gov/licenses</a> .  |  |





# CITY OF MILWAUKEE OFFICE OF THE CITY CLERK

Wednesday, May 29, 2019

#### **COMMITTEE MEETING NOTICE**

AD 10

DONOVAN, Ryan W, Agent IAN'S PIZZA STORY HILL MKE LLC 5300 W BLUE MOUND Rd Milwaukee, WI 53208

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

Tuesday, June 04, 2019 at 01:30 PM

Regarding:

Your Class B Beer, Class C Wine, Food Dealer, and Extended Hours License Applications Requesting to Close at 4 AM Fri-Sat as agent for "IAN'S PIZZA STORY HILL MKE LLC" for "IAN'S PIZZA STORY HILL" at 5300 W BLUE MOUND 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 85-2.7-4, probative evidence concerning whether or not a new license should be granted may be presented on the following subjects: whether or not the applicant meets the municipal requirements, the appropriateness of the location and premises where the licensed premises is to be located and whether use of the premises for the purposes or activities permitted by the license would tend to facilitate a public or private nuisance or create undesirable neighborhood problems such as disorderly patrons, unreasonably loud noise, litter, and excessive traffic and parking congestion. Probative evidence relating to these matters may be taken from the plan of operation submitted with the license application, if any, but shall not include the content of any music. Evidence regarding the fitness of the location of the premises to be maintained as the principal place of business, including but not limited to whether there is an overconcentration of businesses of the type for which the license is sought; whether the proposal is consistent with any pertinent neighborhood business or development plans, or the location's proximity to areas where children are typically present. The applicant's record in operating similarly licensed premises; and whether or not the applicant has been charged with or convicted of any felony, misdemeanor, municipal offense or other offense, the circumstances of which substantially relate to the activity to be permitted by the license being applied for or any other factor which reasonably relates to the public health, safety or welfare may also be considered. See attached police report or correspondence.

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

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

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

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

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

Limited parking for persons attending meetings 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

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



# CITY OF MILWAUKEE OFFICE OF THE CITY CLERK

Wednesday, May 29, 2019

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Regarding:

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JIM OWCZARSKI, CITY CLERK

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

# REDACTED RECORD

Proza having extended hours if they will be sarving the they will dose.

We don't believe it would be beneficial

for them to serve a who the past bir close
because the drum's people coming and going.

Som the bars on bluemend ord are already
a postlem being land and aboveras til late
into the wight. We've had broken bootles
and liquor cups in our yard and all over
the struct making it was fe to valk my
dog and for neighbors to walk their dogs
and they feel was fe and start banking which
bothes mere problems.

Date: 05/25/19 Officer: Whittenberger

# City of Milwaukee Police Department 90-5-1.5 Crime Prevention Survey Convenience Store/Liquor Store Inspection

| Name of Premise: Iar<br>Address: 5300 W Blu<br>Phone: 414-727-9200   |   | C)   |
|--|---|--|
| Owner: Ryan W. DO<br>Owner address: 2547<br>City State Zip: Wauw<br>Owner Phone: Cell –<br>Owner email: ryan@i | atosa, WI 53213<br>608-609-7530   | 15-7398-4293-03)                             |
| Manager: General Ma<br>Home Address:<br>City State Zip:  | anager: Anthony Covelli   | Assistant Manager: Jerry Flemming            |
| Phone:<br>Email:   | COVELLI # 262-909-6353  | FLEMMING # 262-312-4575                      |
| Preferred contact: Sto   | ore Phone   |  |
| Location currently op  | en: YES 🖂   | МО   |
| Projected open date:   | 06/25/19  |  |
| Day's open: S  | M   | ALL  |
| Hours of Operation:  | Sun: 11A-11P (12A if late B Mon: 11A-11P (12A if late I Tue: 11A-11P (12A if late B Wed: 11A-11P (12A if late I Thu: 11A-11P (12A if late B Fri: 11A – 3A Sat: 11A – 3A | Brewer Game)<br>Brewer Game)<br>Brewer Game) |
| Premise Type:  | ☐ Liquor Store ☐ Convenience Store ☐ Other: Pizza by the slice.   | serving bottle/can beer and wine             |

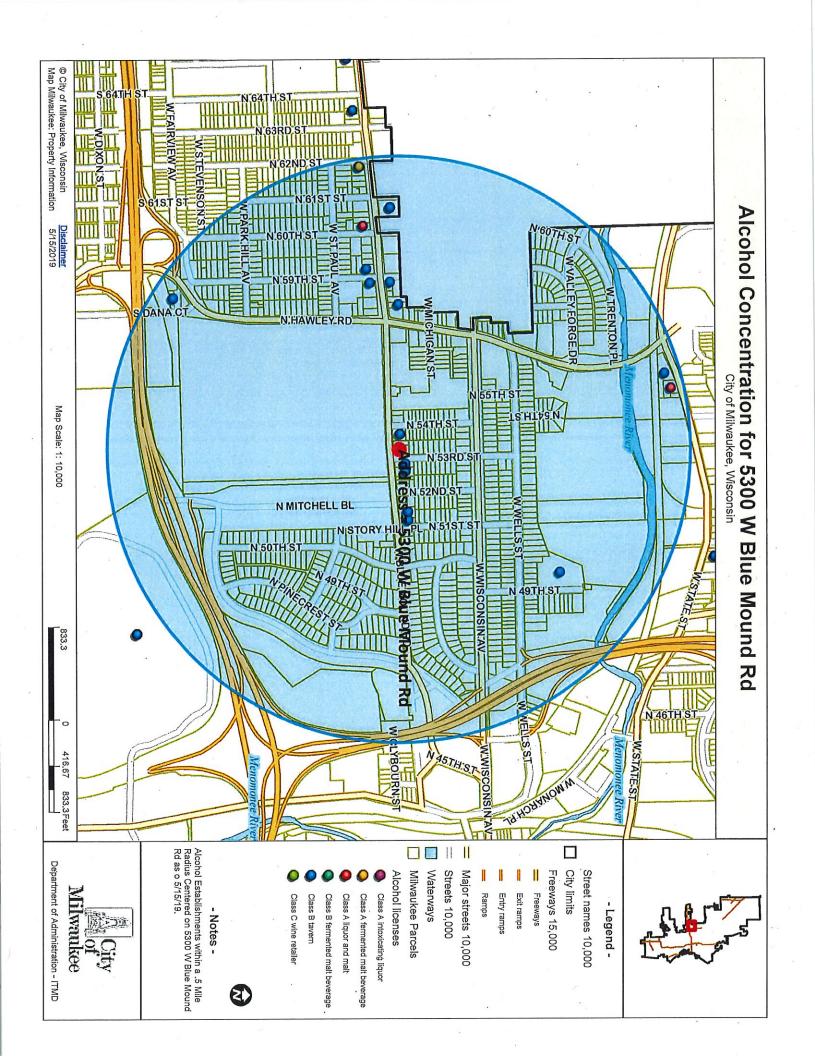
|        | HOL, FOOD, AND E          | XTENDED HOURS                |                                    |
|--------|---------------------------|------------------------------|------------------------------------|
| ALCO.  | Alcohol:                  | Yes No Class:                | #:                                 |
|        | Tobacco:                  | Yes No #:                    |                                    |
|        | Food:                     | Yes No #:                    |                                    |
|        | Extended Hours:           | Yes No #:                    |                                    |
|        |                           | ===                          | #:                                 |
|        | Secondhand Dealer:        | ☐Yes ⊠No Type:               |                                    |
|        | Other:                    | Yes No Type:                 | #:                                 |
|        | Other:                    | Yes No Type:                 | , #:                               |
| Exteri | or Survey:                | •                            |                                    |
|        |                           | location clean? XYes         | No                                 |
|        |                           | ocation? (Check all the app  |                                    |
|        | a.     Park               |                              |                                    |
|        | b. School                 |                              | ,                                  |
|        | c Youth Cent              | ter                          |                                    |
|        | d. Church                 |                              |                                    |
|        | A                         | f so, how many: 3            |                                    |
|        | f. Residential            |                              |                                    |
|        |                           |                              | •                                  |
|        | <b>=</b>                  | lesses                       |                                    |
| 2      |                           | autoide of the leastion int  | the interior Vog No                |
| 3.     | Can you see from the      | outside of the location into | o the interior Yes No              |
|        |                           |                              | n from the outside Yes No          |
|        |                           | s free of signage Yes        | N0                                 |
| 6.     | Is there a parking lot    |                              | ·                                  |
| 7.     | Is the parking lot clea   |                              | •                                  |
| 8.     | Is the parking lot well   | l lit? <i>UNKNOWN</i>        | <b></b>                            |
| 9.     | Are there areas where     | e a person could conceal th  | emselves ⊠Yes ∐No                  |
| 10     | . Is there exterior light | ing? XYes No. Does           | it appears to be adequate UNKNOWN  |
|        | . Exterior Payphone?      | ☐Yes ⊠No                     |                                    |
| 12     | . Are there No Loiterin   | ng Signs posted? [[Yes_[>    | ]No                                |
| 13     | . Are there exterior sec  | curity cameras Yes N         | o How Many:                        |
| 14     | . Are the address numb    | pers prominently displayed   | and easy to see ☐Yes ☒No           |
|        |                           |                              |                                    |
| Came   | ra Survey:                |                              | •                                  |
|        |                           | ve security cameras? Ye      | es 🕅 No                            |
| 16     | . Are they in working of  | order? Tyes No               | _                                  |
|        | . What format are the     |                              |                                    |
| 17     | a. Color                  | □Yes □No                     | •                                  |
|        | b. Digital                | Yes No                       |                                    |
|        |                           | Yes No                       | •                                  |
|        |                           |                              |                                    |
| 4.0    | d. Recorded               | ∐Yes ∐No                     |                                    |
|        |                           | stored for later viewing:    |                                    |
|        | . Are there exterior car  |                              | · ·                                |
|        | . Are there interior can  |                              |                                    |
| 21     | . Do all employees kno    | ow how to retrieve recorde   | d digital images/footage? ☐Yes ☒No |

| Interior Survey:   |
|--|
| 22. Is the storeowner willing to be a standing complainant regarding loitering? XYes No  |
| <ul> <li>a. If yes have them fill out the standing complaint form and give them two of the</li> </ul>  |
| commercial signs Yes No  |
| 23. Is the interior of the location neat and clean? Yes No   |
| 24. Does an interior camera face the entrance/exit?  |
| 25. Is there a lockable area that separates employees from customers? ⊠Yes ☐No   |
| 26. Does the store sell single chore boy?  |
| 27. Does the store sell blunt wraps? ☐ Yes ☑No   |
| 28. Does the store sell scales? ☐Yes ☒No ☐   |
| 29. Does the store sell items that may be used as crack pipes? ☐ Yes ☒No   |
| a. Describe item N/A   |
| 30. Does the store have an over abundance of sandwich baggies: Yes No  |
| 31. Does the owner understand that these items are often used for drug use? Yes No   |
| 32. Do the products in the store appear to be new and rotated often? Yes No  |
| 33. Are emergency and non-emergency numbers posted near the phone? Yes No  |
| 34. Does the owner know how to contact their police district directly? ∑YesNo  |
| a. Did you provide a district contact guide to the owner? XYes \(\sumbell\)No  |
|  |
| Control of the section of the Land and a Mille Assessment for a commence of the section of   |
| Complete this section if alcohol establishment is a convenience store:  (** Pand full and income for all details "68 55 Convenience Food Stores")                  |
| (** Read full ordinance for all details "68-55 Convenience Food Stores")   |
| All convenience food stores not exempted under sub. 3 shall:  1. Is the cash register located in a manner so that at the time of a sales transaction, the employee |
| and customer are both visible from the sidewalk? $\boxtimes$ Yes $\square$ No **   |
| 2. Are the glass entrance and exit doors clear of any signs or advertisements with the exception of  |
| sign which states that the cash register contains \$50 or less and that the safe is no accessible to   |
| employees? Tyes No   |
| 3. Does the store maintain one of the following on the licensed premise:   |
| a. A safe that was in use at the convenience food store on August 17, 1994? Yes No   |
| b. A drop-safe or time release safe that weighs at least 500 pounds or which is attached to o  |
| set into the floor in a manner approved by the police department? Yes No   |
| 4. Is lighting provided for the store's parking area during all hours of darkness when employees or  |
| customers are on the premises at a minimum average of 2-foot candles per square foot, unless the   |
| store is not open for business after sunset and before sunrise? Yes No N/A   |
| 5. Are at least two high-resolution surveillance security cameras installed? Yes No  |
| 6. Are the security cameras in working order? ☐ Yes ☒ No   |
| 7. Does one camera show an overall view of the counter and register area? Yes No   |
| 8. Does one camera show a clear, identifiable, full frame image of the face of each person entering  |
| and leaving the store? Yes No  |
| 9. Are the camera views obstructed by fixtures or displays? ☐Yes ☒No   |
| 10. Is the recorded footage stored for at least 30 days? Tyes XINO   |

|        |         | all store employees know how to record footage from the camera system to media capable of    |
|--------|---------|--|
|        |         | ng transferred to police custody? Yes No   |
|        | 12. Ar  | e customer entrances/exits made of glass or other transparent material? Yes No               |
|        |         | a. Exception: A store that does not have such doors on August 17, 1994 shall not be          |
|        |         | required to install such doors until the holder of the store's food dealer license changes.  |
|        |         | s the owner and their employees attended the Robbery Prevention Training with in 120 days    |
|        | of      | ownership or employment? Yes No UNKNOWN, reaching out VIA email to owner                     |
|        |         | a. Contact Community Outreach and Education at 935-7836 for schedule.                        |
| ~ * *  |         |  |
|        |         | otions. The requirements of this section do not apply to a convenience food store that       |
| conton | ns to e | ther of the following descriptions:  |
|        | _ 1     | The stand in leasted in an analysis of changing atmost and commonsial building on            |
|        | a-1.    | The store is located in an enclosed shopping structure, enclosed commercial building or      |
|        |         | hospital. A convenience food store is not in an enclosed structure or building if a customer |
|        |         | can enter it directly from the outside.  |
|        |         | Does store conform to a-1 Yes № No   |
|        | a-2     | The store physically separates employees from customers with a solid partition that bars a   |
|        | a-Z     | person from entering the employee area from the customer area, has a secure lock on the      |
|        |         | employee side of any door between the employee area and the customer, and conducts all       |
|        |         | transaction through a service window or similar arrangement.                                 |
|        |         | Does store conform to a-2 Yes No   |
|        |         | Does store comorni to a-2[1] i es [N] i vo   |
|        |         | a. At the commissioner's discretion, a convenience store may be exempted from any or all     |
|        |         | of the regulations specified in sub 2.   |
|        |         | Does this location hold an exemption from the commissioner regarding any of the              |
|        |         | requirements of Sub 2? Yes No  |
|        |         | rodunements of pap 5: 102 Maro   |

#### ADDITIONAL COMMENTS/RECOMMENDATIONS:

This location is not yet complete in the interior of the location. The owner stated he was going to eventually have security cameras (apx 7-10 total). Cameras will be in the interior and exterior. There will be a security system in place and done through H&S Protection. Owner stated there will be only alcohol served until midnight, regardless of day of the week. The alcohol will be in an under counter clear beverage storage unit. The customer side will be locked.



| censed Alcohol Beverage Establishm   | licensed Alcohol Beverage Establishments within a .5 Miles Radius Centered on 5300 W Blue Mound Rd as of 5/15/19 | 5300 W Blue Mound Rd as of 5/15/ | 19   |                                       |                        |  |
|--|--|----------------------------------|--|---------------------------------------|------------------------|--|
| hereby er mannerere delta delta della dell |  |                                  |  |                                       |                        |  |
| License Summary  |  |                                  |  | A                                     | Total                  |  |
| Class A Fermented Malt Beverage Retailer's License   | Retailer's License   | -                                |  |                                       |                        |  |
| Class A Malt & Class A Liquor License  | se   |                                  |  |                                       | 2                      |  |
| Class A Retailer's intoxicating Liquor License   | or License   |                                  |  |                                       | 14                     | W                                      |
| ass B Tavern License   |  |                                  |  |                                       | 16                     |  |
| sung.  |  |                                  |  | · Grand total                         | . 20                   |  |
| · · · · · · · · · · · · · · · · · · ·  | -  |                                  |  |                                       |                        |  |
| Legal entity   | ONE STOP PANTRY  | KULWINDER KUMAR, Apt             | Class A Fermented Mait Reverage Retailer's License | lotal capacity Room capacity          |                        | Expiration date                        |
| Kettle Range Meat Company LLC  | Kettle Range Meat Company  | Mark D Bearce, Agt               | Class A Malt & Class A Liquor License              | · · · · · · · · · · · · · · · · · · · | 5501 W State ST 2      | 2020-03-31700:00:00:00:000000          |
| ANDHAR ENTERPRISES, INC  | BLUEMOUND LIQUOR   | HARJIT SANDHAR, Agt              | Class A Malt & Class A Liquor License              |                                       | ON BRIDGE              | 2019-09-21T00:00:00.0000000            |
| HARMA INC  | ONE STOP PANTRY  | KULWINDER KUMAR, Agt             | Class A Retailer's Intoxicating Liquor License     |                                       | [                      | 2020-02-04\(\text{T00:00:00.0000000}\) |
| NCORE, INC   | MONREAL'S ENCORE   | NICOLAS S MONREAL, Agt           | Class B Tavern License                             | 80                                    |                        | 019-06-30700:00:00.00000               |
| tory Hill BKC LLC  | Story Hill Bottle - Kitchen - Cup  | DANIELS SIDNER, Agt              | Class B Tavern License                             |                                       | ound RD                | 2019-07-30100:00:00.0000000            |
| aldemar 5108 LLC   | Fat Valdy's  | Rosa Isela Real Perez, Agt       | Class & Tavern License                             |                                       |                        | 2019-06-02\00:00:00.0000000            |
| aldemar 5108 LLC   | Fat Valdy's  | Rosa Isela Real Perez, Agt       | Class B Tavern License                             |                                       |                        | 2020-06-02T00:00:00.0000000            |
| & V, INC   | KELLY'S BLEACHERS  | ANTHONY L LUCHINI, Agt           | Class B Tavern License                             | 150                                   | L                      | 2019-10-01700:00:00.0000000            |
| B Tavern, LLC  | J&B's Blue Ribbon Bar & Grill  | JONATHAN E BLIESNER, Agt         | Class B Tavern License                             | 150                                   | ۵                      | 2020-02-27T00:00:00.0000000            |
| OugOut 54 Inc  | Dugour 54  | KARLIS A VECITIS, Agt            | Class B Javern License                             | 689 600 first floor, 89 - lower level | $\perp$                | 2019-05-26100:00:00.0000000            |
| CAZCO INIC   | SAZIS STATE HOUSE  | STEPHEN P SATAMA Art             | Class B Taylorn License                            | 228                                   | חם אט                  | 010 05 30000-0000 0000                 |
| avols LLC  | Tavo's Signature Cuisine   | Susy A Orue, Agt                 | Class B Tavern License                             | 25                                    | 5814 W BLUE MOUND RD 2 | 2020-05-02700:00:00:00:0000000         |
| S OF MILWAUKEE, INC  | STEVE'S ON BLUEMOUND   | SAMUELT SALAJA, Agt              | Class B Tavern License                             | 216                                   |                        | 2019-06-30T00:00:00.0000000            |
| BARBIERE'S ITALIAN INN, LTD  | BARBIERE'S ITALIAN INN   | Steven J Thalman, Agt            | Class B Tavern License                             | 90                                    |                        | 2019-06-30700:00:00.0000000            |
| MC ZARS II, LLC  | MC GINNS   | JEFFREY P DOBBE, Agt             | Class B Tavern License                             | 189                                   | Ø                      | 2020-03-19T00:00:00.0000000            |
| Allwaukee Steakhouse LLC   | Milwaukee Steakhouse   | KEVIN M NUGENT, Agt              | Class B Tayern License                             | 99                                    |                        | 2019-05-24T00:00:00.0000000            |
| Manked Steakhouse LLC  | Milwankee Steakingse   | ALAIN MINOGENI, ASI              | Class o (aveil) declise                            | 99                                    | 6024 W Blue Nound KD   | 2020-05-24100:00:00:00:00:000          |
|  |  |                                  |  |                                       |                        |  |
| •  |  |                                  |  |                                       |                        |  |
|  |  |                                  |  |                                       |                        |  |
|  |  |                                  | ٠.   |                                       |                        |  |
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|  |  |                                  |  |                                       |                        |  |
|  |  |                                  |  |                                       |                        |  |
|  | ,  |                                  |  |                                       |                        |  |

Wednesday, May 29, 2019



## Licenses Committee **Notice of Hearing**

**Brian Gingrass** 2547 N 69th St Wauwatosa, WI 53213

Date:

6/4/2019

Time:

01:30 PM

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

The Licenses Committee will consider the following license application:

Class B Beer, Class C Wine, Food Dealer, and Extended Hours License Applications Requesting to Close at 4 AM Fri-Sat DONOVAN, Ryan W, Agent IAN'S PIZZA STORY HILL at 5300 W BLUE MOUND Rd

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

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





### Licenses Committee Notice of Hearing

STREAMLINE 53 LLC 839 N 73RD St Wauwatosa, WI 53213

Date:

6/4/2019.

Time:

01:30 PM

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

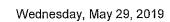
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If you have any questions, please call (414) 286-2238.









## Notice of Public Hearing

DONOVAN, Ryan W, Agent
IAN'S PIZZA STORY HILL at 5300 W BLUE MOUND Rd
Class B Beer, Class C Wine, Food Dealer, and Extended Hours License Applications Requesting
to Close at 4 AM Fri-Sat

### Tuesday, June 04, 2019 at 1:30 PM

To whom it may concern:

The above application has been made by the above named applicant(s). This requires approval from the Licenses Committee and the Common Council of the City of Milwaukee. The hearing before the Licenses Committee will take place on 6/4/2019 at 1:30 PM, 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.

| OCCUPANT         | MAIL ADDRESS           | CITY, STATE ZIP     |
|------------------|------------------------|---------------------|
| CURRENT OCCUPANT | 5218 W BLUE MOUND RD   | MILWAUKEE, WI 53208 |
| CURRENT OCCUPANT | 523 N 54TH ST          | MILWAUKEE, WI 53208 |
| CURRENT OCCUPANT | 518 N 54TH ST          | MILWAUKEE, WI 53208 |
| CURRENT OCCUPANT | 5326 W BLUE MOUND RD 1 | MILWAUKEE, WI 53208 |
| CURRENT OCCUPANT | 539 N 53RD ST          | MILWAUKEE, WI 53208 |
| CURRENT OCCUPANT | 517 N 53RD ST          | MILWAUKEE, WI 53208 |
| CURRENT OCCUPANT | 505 N 53RD ST 3        | MILWAUKEE, WI 53208 |
| CURRENT OCCUPANT | 505 N 53RD ST 2        | MILWAUKEE, WI 53208 |
| CURRENT OCCUPANT | 519A N 52ND ST         | MILWAUKEE, WI 53208 |
| CURRENT OCCUPANT | 535 N 53RD ST          | MILWAUKEE, WI 53208 |
| CURRENT OCCUPANT | 531 N 54TH ST          | MILWAUKEE, WI 53208 |
| CURRENT OCCUPANT | 517 N 54TH ST          | MILWAUKEE, WI 53208 |
| CURRENT OCCUPANT | 5326 W BLUE MOUND RD 2 | MILWAUKEE, WI 53208 |
| CURRENT OCCUPANT | 5326 W BLUE MOUND RD 4 | MILWAUKEE, WI 53208 |
| CURRENT OCCUPANT | 546 N 53RD ST          | MILWAUKEE, WI 53208 |
| CURRENT OCCUPANT | 525 N 52ND ST          | MILWAUKEE, WI 53208 |
| CURRENT OCCUPANT | 519 N 54TH ST          | MILWAUKEE, WI 53208 |
| CURRENT OCCUPANT | 544 N 54TH ST          | MILWAUKEE, WI 53208 |
| CURRENT OCCUPANT | 532 N 54TH ST          | MILWAUKEE, WI 53208 |
| CURRENT OCCUPANT | 533 N 53RD ST          | MILWAUKEE, WI 53208 |
| CURRENT OCCUPANT | 505 N 53RD ST 1        | MILWAUKEE, WI 53208 |
| CURRENT OCCUPANT | 5230 W BLUE MOUND RD A | MILWAUKEE, WI 53208 |
| CURRENT OCCUPANT | 529 N 53RD ST          | MILWAUKEE, WI 53208 |
| CURRENT OCCUPANT | 540 N 53RD ST          | MILWAUKEE, WI 53208 |
| CURRENT OCCUPANT | 530 N 53RD ST          | MILWAUKEE, WI 53208 |
| CURRENT OCCUPANT | 526 N 53RD ST          | MILWAUKEE, WI 53208 |
| CURRENT OCCUPANT | 535 N 52ND ST          | MILWAUKEE, WI 53208 |
| CURRENT OCCUPANT | 531A N 54TH ST         | MILWAUKEE, WI 53208 |
| CURRENT OCCUPANT | 536 N 54TH ST          | MILWAUKEE, WI 53208 |
| CURRENT OCCUPANT | 519 N 52ND ST          | MILWAUKEE, WI 53208 |
| CURRENT OCCUPANT | 5208B W BLUE MOUND RD  | MILWAUKEE, WI 53208 |
| CURRENT OCCUPANT | 526 N 54TH ST          | MILWAUKEE, WI 53208 |
| CURRENT OCCUPANT | 522 N 54TH ST          | MILWAUKEE, WI 53208 |
| CURRENT OCCUPANT | 541 N 53RD ST          | MILWAUKEE, WI 53208 |
| CURRENT OCCUPANT | 521 N 53RD ST          | MILWAUKEE, WI 53208 |
| CURRENT OCCUPANT | 536 N 53RD ST          | MILWAUKEE, WI 53208 |
| CURRENT OCCUPANT | 529 N 52ND ST          | MILWAUKEE, WI 53208 |
| CURRENT OCCUPANT | 5208A W BLUE MOUND RD  | MILWAUKEE, WI 53208 |
| CURRENT OCCUPANT | 540 N 54TH ST          | MILWAUKEE, WI 53208 |
| CURRENT OCCUPANT | 5326 W BLUE MOUND RD 3 | MILWAUKEE, WI 53208 |
| CURRENT OCCUPANT | 545 N 53RD ST          | MILWAUKEE, WI 53208 |
| CURRENT OCCUPANT | 517 N 53RD ST A        | MILWAUKEE, WI 53208 |
| CURRENT OCCUPANT | 505 N 53RD ST 4        | MILWAUKEE, WI 53208 |
|                  |                        | •                   |

Total Records: 43

Radius: 250.0 feet and Center of Circle: 5300 W Blue Mound Rd

#### ccl-busplan 3/15/18

# 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. 7   | Type of Business  |
|--------|---|
| Apply  | ing 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)   |
| Provid | de a detailed description of the type of business you plan on operating:  |
|        | PIZZA RESTAVIANT, PIZZA by the Stree breadsticks, Salads, Pizzas  |
| Do yo  | The a detailed description of the type of business you plan on operating:  PIZZO RESTAVION, PIZZO by the STOCE, breadsticks, Salads, PIZZO by the STOCE by the STOCE breadsticks, Salads, PIZZO by the STOCE by the |
| 2. E   | Business Operations   |
| a.     | Proposed Opening Date: 6-10-19  |
| b.     | Is this premise under construction? 🗌 No 🖫 Yes If yes, list estimated completion date: 🔟 — 🐧 — 🎾  |
| c.     | Is this a franchise? No X 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): 2036 F. North Ave " IUG F Suncar Ave  |
| h.     | Are other businesses operating in the same building? 📝 No 🗌 Yes If yes, describe:   |
| 3. L   | itter & Noise   |
| a.     | How are grounds kept clean? Sweep Ressure Wash Pick Up Litter Other:  |
| b.     | How often will grounds be cleaned?  |
| 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? \( \text{No \( \text{Yes} \) If yes, describe: \( \text{Sectuls \( \text{No \( \text{Text} \) and \( Vest \( \text{No \( \tex      |
| 4. S   | moking & Sanitation   |
| a.     | Are there designated outdoor smoking areas? 🔀 No 🗌 Yes If yes, describe:  |
| b.     | Number of Garbage Cans: Inside: Locations: Though out Costone area, Both Bathrooms  |
|        | Outside: 7_ Locations: 0 75 8   |
| c.     | Is a crowd control barrier used? No X Yes If yes, describe: When busy Stantions, Josef Sor line   |
| d.     | How many restrooms are on the premises?   |
| e.     | Name of solid waste contractor: Advanced Disposal Waste Management Other: Food  |

| 5. Security  |   |              |   |                           |  |
|--|---|--------------|---|---------------------------|--|
| a. Are there onsite parking  | spaces? 🗌 No 🕱 Yes                                | If yes, how  | many? and describ   | e the parking security    |  |
| plan: Malny dilik  | ( spaces, both                                    | 2 11:4       | monitored by Enploy   | yers on Shift             |  |
| b. Is there a loading zone?  | ☐ No 🏿 Yes If yes, de                             | scribe the l | oading area security plan: Monit  | tored by exployers        |  |
| : eventually co  | malas   |              |   |                           |  |
| c. Will you have security pe   |   |              |   |                           |  |
| What are their responsibilities?   |   |              |   |                           |  |
| Is security equipment used? \( \text{No } \text{Yes If yes, describe } \( \text{H:5 Protection Security System} \)                                 |   |              |   |                           |  |
|  | certification, or training                        |              |   |                           |  |
| d. Will there be security can  | neras? 🙀 No 🗌 Yes I                               | f yes, how   | many? and list locations:   |                           |  |
| We glan to in  | stall pace we                                     | have a       | some cash flow  |                           |  |
| e. Will searches/identification checks be done upon entry? 💢 No 🗌 Yes If yes, describe   |   |              |   |                           |  |
| 6. Percentage of Sales   | (must total 100%                                  | )            |   |                           |  |
| Alcohol <u>2</u> %   | Food 934  | <b>,</b> _%  | Secondhand Merchandise  | Precious Metals & Gems    |  |
| Entertainment%   | Cigarettes  | %            | %   | %                         |  |
| Pawnbroker Activity%   | Salvaged Materials(such as scrap metal)           | %            | Personal Services (such as tattoo,<br>body piercing, salon, tailor,<br>tanning, etc.) | Other% Describe:          |  |
| 7. Businesses/Licenses on the Premises (check all that apply):   |   |              |   |                           |  |
| Type 1 Full Service Restaurant   | Cafe/Coffee Shop                                  | ☐ Delí or F  | ast Food Restaurant Private   | :/Fraternal/Veterans Club |  |
| ☐ Night Club   | Tavern  | Cocktail     | Lounge Teen C   | llub                      |  |
| ☐ Banquet Hall   | Sports Facility                                   | Bowling      | Alley   |                           |  |
| Hotel/Motel: Number of Flo   | ors:  | Rooming      | House: Number of Floors:  | !                         |  |
| Number of Ro   | oms:  |              | Number of Rooms:  | ·                         |  |
| Type 2   | По  | ,<br>,       | ulus [m] o  |                           |  |
| Liquor Store   | ☐ Corner Store                                    | Superma      |   | lience Store              |  |
| Gas Station  | Amusement/Phonogra                                | ph Distribut | or L Recyclii   | ng, Salvage or Towing     |  |
| Used Car Dealer  | Personal Service Estab<br>(such as tattoo busine: |              | Record  | ing Studio                |  |
| What other licenses/permits will you hold at this location? (check all that apply)   |   |              |   |                           |  |
| Occupancy Permit C   | igarette & Tobacco Gas S                          | Station 🔼 E  | xtended Hours 🛱 Class "B" Tavern 🛭  |                           |  |
| Secondhand Dealer  | Precious Metal & Gem 🔲 C                          | Other:       |   | -                         |  |
| 8. Legal Capacity (only  | if a Type 1 premi                                 | ises in #    | 7 above)  |                           |  |
| 8. Legal Capacity (only if a Type 1 premises in #7 above)  Capacity (Call the Milwaukee Development Center at 414-286-8211 if you have questions.) |   |              |   |                           |  |

| 9. Premises D  | escription   |  | . •                           |                        |  |  |
|--|--|--|-------------------------------|------------------------|--|--|
| a. 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 □ Beasement Storage □ Patio □ Beer Garden □ Sidewalk Café □ Deck □ Rooftop                                |  |  |                               |                        |  |  |
| Other: Describe:   |  |  |                               |                        |  |  |
| b. Describe Location: Major Thoroughfare Secondary Street Other:   |  |  |                               |                        |  |  |
| c. Nearest Major Cross Street: 53 Blooms Mound W  d. Describe Building: A 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:   |  |  |                               |                        |  |  |
| g. Building Owner Name: 31/2 6503(265) Phone Number: 414-839-5694  Business Owner Address: 2547 N 69th 54 Warwatosa, WI 53213  |  |  |                               |                        |  |  |
|  |  |  |                               |                        |  |  |
| 10. Hours of O   | peration & Custor  | mers   |                               |                        |  |  |
| Will customers be ente   | ering the premises? 🔲 No                                 | Yes  | •                             |                        |  |  |
| Day of the Week  | Proposed Hour  | s of Operation:  | Estimated Number of Customers | Potential<br>Age Range | Class B Tavern<br>Applicant Only:          |  |
|  | Open Time<br>(include a.m. or p.m.)                      | Close Time<br>(include a.m. or p.m.)   | expected each day             | of<br>Customers        | Age Restriction<br>(If none, write 'None') |  |
| Sunday   | Sunday 9 an RHOUSE BOOMOO B-99 None                      |  |                               |                        |  |  |
| Monday gan Dan 300 B-99 None   |  |  |                               |                        | None                                       |  |
| Tuesday  | gan  | van  | 300                           | 3-00                   | Nobe                                       |  |
| Wednesday  | 9 00   | 12 an  | 300                           | 6-99                   | None                                       |  |
| Thursday   | gan  | zan  | 300                           | 0-00                   | None.                                      |  |
| Friday   | d an   | yan  | 500                           | 0-90                   | None                                       |  |
| Saturday   | gan  | yam  | 500                           | 0-99                   | 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(   | s)   |  |                               |                        |  |  |
| 102  | 1  |  | 77                            | 4                      |  |  |
|  |  | - Classical de la companya de la com | 4                             | 4                      |  |  |
|  | rietor, Partner, or 20% or mo<br>% or more shareholders, | ore Snareholder  | Signature of additional p     | artner or 20% or I     | more shareholder                           |  |
| Corporate Officer-   | print name/title and sign)                               |  |                               |                        |  |  |

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



# ALCOHOL BEVERAGE & PUBLIC ENTERTAINMENT PREMISES SUPPLEMENTAL APPLICATION

Office of the City Clerk License Division

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

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

| egal Entity Name: Lan's Pizza Story Hill MKE, LLC   |  |  |  |  |  |
|---|--|--|--|--|--|
| remise Address: 5300 W Bloc Mound Rd  |  |  |  |  |  |
| Proximity of Premises to Church, School, Daycare Center or Hospital   |  |  |  |  |  |
| Is the building within 300 feet of any church, school, daycare center or hospital?  |  |  |  |  |  |
| Service Bar Only" Designation   |  |  |  |  |  |
| If applying for Class B or C license, are you applying for "Service Bar Only"? X No Yes   |  |  |  |  |  |
| Service Bar Only means customers cannot sit at the bar. Alcohol is served to employees who serve patrons seated at tables. No stools, chairs or other articles of furniture shall be placed at the service bar for patrons to sit upon.   |  |  |  |  |  |
| Business Information  |  |  |  |  |  |
| a) Are you taking out this application for anyone that may not be eligible for a license? X 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 es  If yes, explain:   |  |  |  |  |  |
|   |  |  |  |  |  |
| If yes, explain:  |  |  |  |  |  |
|   |  |  |  |  |  |
| If yes, explain:  |  |  |  |  |  |
| If yes, explain:    Have you made an agreement with anyone to repay any loan or any other payments based upon income from the business?   No   Yes If yes, list name and address:   BNO   Harris   Bank   Yes   N water (SX   Millian with SX   Millian with SX   Millian with SX   SX   SX   SX   SX   SX   SX   SX  |  |  |  |  |  |
| If yes, explain:  Have you made an agreement with anyone to repay any loan or any other payments based upon income from the business?  No Yes If yes, list name and address:  Proof of Ownership, Lease, or Offer to Purchase (New & Transfer Applicants Only)  Submit proof of ownership, lease, or offer to purchase the building with this application.  A lease or offer to purchase must:  a) Be in the same legal entity name as that apply for the license   |  |  |  |  |  |
| If yes, explain:  Have you made an agreement with anyone to repay any loan or any other payments based upon income from the business?  No Yes If yes, list name and address:  Proof of Ownership, Lease, or Offer to Purchase (New & Transfer Applicants Only)  Submit proof of ownership, lease, or offer to purchase the building with this application.  A lease or offer to purchase must:  a) 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  |  |  |  |  |  |
| If yes, explain:  Have you made an agreement with anyone to repay any loan or any other payments based upon income from the business?  No Yes If yes, list name and address:  Proof of Ownership, Lease, or Offer to Purchase (New & Transfer Applicants Only)  Submit proof of ownership, lease, or offer to purchase the building with this application.  A lease or offer to purchase must:  a) Be in the same legal entity name as that apply for the license   |  |  |  |  |  |
| If yes, explain:  Have you made an agreement with anyone to repay any loan or any other payments based upon income from the business?  No Yes If yes, list name and address:  DO HOUSE BANK TO NUMBER OF MINOR WILLIAM STORMS ONLY)  Submit proof of ownership, lease, or offer to purchase the building with this application.  A lease or offer to purchase must:  a) 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) Reflect current dates and   |  |  |  |  |  |
| If yes, explain:    Have you made an agreement with anyone to repay any loan or any other payments based upon income from the business?   No   Yes If yes, list name and address:   Bho   Harris   Bear   Yes   Name   Yes   Name   Yes   Name   Yes   Yes   Name   Yes   Yes |  |  |  |  |  |
| If yes, explain:  Have you made an agreement with anyone to repay any loan or any other payments based upon income from the business?  No Yes If yes, list name and address:  Proof of Ownership, Lease, or Offer to Purchase (New & Transfer Applicants Only)  Submit proof of ownership, lease, or offer to purchase the building with this application.  A lease or offer to purchase must:  a) 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) Reflect current dates and d) Be signed by the lessor/seller and lessee/buyer  Property Information (New & Transfer Applicants Only)  |  |  |  |  |  |
| If yes, explain:  |  |  |  |  |  |
| If yes, explain:    Have you made an agreement with anyone to repay any loan or any other payments based upon income from the business?   No   Yes If yes, list name and address:   BMO   Harris   Book   Yes   Music   St   Milvarker   WIS  |  |  |  |  |  |
| If yes, explain:  |  |  |  |  |  |
| If yes, explain:  Have you made an agreement with anyone to repay any loan or any other payments based upon income from the business?  No Yes If yes, list name and address: Doo Harris Based upon income from the business?  Proof of Ownership, Lease, or Offer to Purchase (New & Transfer Applicants Only)  Submit proof of ownership, lease, or offer to purchase the building with this application.  A lease or offer to purchase must:  a) 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) Reflect current dates and  d) Be signed by the lessor/seller and lessee/buyer  Property Information (New & Transfer Applicants Only)  a) Do you own or lease the building?  Do you own or lease the building?  Who owns the fixtures (for example, coolers, etc.)?  Are you purchasing the stock and/or fixtures?  No Xes If yes, amount paid \$ 300.000  d) Total amount paid for business  |  |  |  |  |  |

| Leas             | se Information (New & Transfer Applicants who are leasing the premises only)  |
|------------------|---|
| a)               | Date lease begins ()나 '5' 201는 Ends OC 15' 2023   |
| b)               | Monthly rental \$ 2500 /  |
| c)               | Do you have an option to renew the lease? 🔲 No 🖄 Yes  |
| d)               | Does your lease allow for assignment to another party without the consent of the owner? 🖈 No 🗌 Yes  |
| e)               | For what length of time have you been guaranteed occupancy (number of years)?   |
| f)               | In addition to paying the monthly rental, will you have to pay anything additional to the owner of the building to guarantee performance of the lease?   No Yes If yes, explain Carbona Contain Add Add September 1988. |
| g)               | Does the present owner or occupancy object to the granting of your license? 🔀 No 🗌 Yes  |
|                  | If yes, explain   |
| Cha              | inge of Agent Applicants Only   |
| Hav              | ve there been any changes to the floor plan since the last application was submitted? 🔲 No 🗌 Yes  |
| lf no            | o, a new floor plan is not required. If yes, submit a new floor plan and explain the change(s):   |
|                  |   |
|                  |   |
| Sign             | nature  |
| Signat<br>(if no | ture of Sole Proprietor, Partner or 20% or More Shareholder<br>20% or more Shareholder, Corporate Officer - print name/title and sign)  |

Note: All information contained in this application is subject to approval by the Common Council.

Deviating from approved plan of operation will subject licensee to citations, and/or suspension or non-renewal of the license. Contact the License Division for information on how to request changes.

### New and transfer of premises applicants must submit the following:

▶ Proof of ownership, lease or offer to purchase the building

Detailed floor plan

☐If 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 • license@milwaukee.gov • www.milwaukee.gov/license

| Legal Entity Name: Jan's Pizza Story Hill MKE, LLC  |
|---|
| Premises Address: 5300 W Blue Mound Rd  |
| SECTION 1 TYPE OF BUSINESS  |
| What will be the majority of your food sales? (check one)   |
| Restaurant Items (meals):  MEALS include, but are not limited to, chicken, ribs, sandwiches, roasted corn, baked potatoes, hot dogs, brats, tacos, nachos w/ cheese and meat, French fries, cooked or deep fried vegetables/fruit, cooked cheese curds, corn dogs, egg rolls, salads.                                       |
| Retail items (snacks and beverages):  RETAIL items include, but are not limited to, ice cream/soft serve, lemonade, snow cones, coffee, espresso, cappuccino, tea, fruit juice, smoothies, candy, dispensed soda, fruit cups, bakery, cookies, kettle corn, cotton candy, funnel cakes, fritters, tortilla chips w/ cheese. |
| Will it be a convenience store? Yes No A convenience store contains less than 5,000 square feet of retail space and has, as its primary business, the sale of basic food items and in addition, sells household products or is a filling station that sells basic food items and household products.                        |
| ☐ Bed & Breakfast ☐ Micro Market  |
| All Applicants: Submit a menu or a list of food items that will be sold.  |
| Will any wholesale business be done? No Tyes If yes, what percentage of food sales will be wholesale?   |
| Less than 25%   |
| <ul><li>25% or More AND:</li><li>Restaurant items (meals) will be sold – Complete this application and also contact DATCP.</li></ul>  |
| NO restaurant items (meals) will be sold - Do NOT complete this application. Contact DATCP only.  |
| SECTION 2 FOOD PROCESSING   |
| Will any food processing be done? No System   |
| Processing is defined as assembling, grinding, cutting, mixing, baking, coating, stuffing, packing, bottling, grilling, canning, extracting, fermenting, distilling, pickling, freezing, drying, smoking, or packaging.   |
| SECTION 3 FOOD REQUIRING TEMPERATURE CONTROL  |
| Will any food that requires temperature control be sold? No Yes  (includes dairy products such as milk, cheese, and ice cream, fish, shellfish, meat, poultry)  |
| If yes, list the types of food items: Dairy, near, Rouling, Jagger, Fron, Skill fish  |

ccl-foodplan 2/28/19

| SECTION 4 DETAILS OF OPERATION   |    |
|--|----|
| Will you have seating on site for dining? \( \sum \) No \( \sum \) Yes   | ,  |
| Will you be doing any catering?  |    |
| Will you be doing any delivery?  |    |
| Will you have outdoor activities? ☐ Yes - Check all that apply: ☐ Bar ☐ Cooking/Grilling ☐ Dini  | ng |
| Will you have a drive thru window?   |    |
| If Yes, provide drive thru hours:  |    |
| Will scales or barcode scanners be used? No Yes - You must also apply for a Weights & Measures License.  |    |
| SECTION 5 ADDITIONAL SITES   |    |
| Where will food be prepared and/or sold?   |    |
| At a single site At multiple sites: How many?(for example, a hotel with several dining rooms or bars)  |    |
| If multiple sites, attach a Food Dealer Additional Site Addendum (ccl-foodadd) for each additional site.   |    |
| SECTION 6 CONSTRUCTION OR CHANGES  |    |
| Are you planning any construction, remodeling or equipment changes?  |    |
| ☐ No If No, SKIP to Section 8  |    |
| Yes If Yes, check all that apply: New construction of a building Renovation or remodeling  |    |
| Construction changes to existing building Equipment changes only   |    |
| Provide a brief description of the changes: 40 aking < kit roal, 4000, Flooring  |    |
| Start date:  |    |
| Name, Address & Phone Number of Architect:  MGD General  |    |
| W215 E Wisconsin Ave   |    |
|  |    |
| Name, Address & Phone Number of Contractor: Naghoton, w.T. 53058   |    |
| Sano as Architect  |    |
| SECTION 7 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 license, when do you want the food license issued?   |    |
| Immediately   At the same time as the alcohol license  |    |
| SECTION 8 ACKNOWLEDGEMENTS & SIGNATURE   |    |
| You must initial each item confirming your understanding:  |    |
| I understand the Health Department must conduct an inspection and advise the License Division of their approva   | I  |
| before the license may be issued.  |    |
| I understand I must obtain an occupancy permit from the Department of Neighborhood Services and an inspection may be required. Neighborhood Services must advise the License Division of their approval before the license may |    |
| be issued.   |    |
| I understand the district alderperson will review and either support or object to my application. If he/she objects may appeal and be scheduled to appear before the Licenses Committee. The Licenses Committee will then make |    |
| recommendation to the Common Council. The Common Council must grant the license before it may be issued.   |    |
| I understand proof of payment for all license fees must be on file in the License Division before the license may be issued and the license must be issued and posted in my establishment prior to opening for business.       | e  |
| I will not operate my food business until the license has been issued and posted in the establishment.   |    |
| (45)   |    |
| Signature of Sole Proprietor, Partner, or 20% Shareholder:   |    |
| Signature of Additional Partner:   |    |

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