

## CITY OF MILWAUKEE OFFICE OF THE CITY CLERK

Thursday, August 29, 2019

#### **COMMITTEE MEETING NOTICE**

AD 01

DODSON, Charmice L, Agent Dodson Legacy LLC 3500-02 W Silver Spring DR 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, September 10, 2019 at 11:15 AM

Regarding:

Your Class B Tavern, Food Dealer, and Public Entertaint Premises License Applications Requesting Instrumental Musicians, Disc Jockey, Poetry Readings, Karaoke, 1 Pool Table, and 2 Amusement Machines and 25+ Age Restriction After 9 PM as agent for "Dodson Legacy LLC" for "Flourish" at 3500-02 W Silver Spring DR.

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 alds. 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

you celo

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

Thursday, August 29, 2019

#### **COMMITTEE MEETING NOTICE**

AD 01

DODSON, Charmice L, Agent Dodson Legacy LLC 4210 S Ravinia Dr Greenfield, WI 53221

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#### Tuesday, September 10, 2019 at 11:15 AM

Regarding:

Your Class B Tavern, Food Dealer, and Public Entertainment Premises License Applications Requesting Instrumental Musicians, Disc Jockey, Poetry Readings, Karaoke, 1 Pool Table, and 2 Amusement Machines and 25+ Age Restriction After 9 PM as agent for "Dodson Legacy LLC" for "Flourish" at 3500-02 W Silver Spring DR.

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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.

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JIM OWCZARSKI, CITY CLERK

· Jessica Celella

License Division Manager

### Martin, Faviola

From:

Sent:

Thursday, May 9, 2019 4:57 PM

To:

License

Subject:

3500-02 W silver spring dr

Follow Up Flag:

Follow up

Flag Status:

Flagged



### Sent from Yahoo Mail on Android

To whom it may concern,

My name is I am writing to object the tavern license at the address of 3500-02 w. Silver spring. I recently purchased a home in this neighborhood. During the time that this bar was open there as been numerous fights and shootings. I purchased my home in July of 20 The first night that I stayed in my home there was a fight in the bar located at that address. A man was shot in the head. Doesn't seem too welcoming as a young home owner. We have enough issues with our neighborhood. The absence of this bar has taken some of these issues away. So please dont appove this license or any other requested. This city is horrible...please don't add to the demise of it. Thank you.

Sent from Yahoo Mail on Android

## Martin, Faviola

From:

Sent:

Friday, May 10, 2019 2:17 PM

To:

License

Subject:

Written Objectives

Follow Up Flag:

Follow up

Flag Status:

Flagged

REDACTED RECORD

To whom this may concern,

I, am writing this claim is to object to opening a tavern at 3500-02 w Silver Spring. I live at down from the corner/bar. First and for most I have small children that live in my house. There are disabled people not only in my home., but up in down the block. That is definitely a hazard Without a parking lot. So they will be parking in front of my house. That brings a lot of traffic. People have been killed at the bar. Guns have been fired outside that location. To me it doesn't matter the owner. This is my community and I don't want it out of respect of the elderly and children, the many deaths that have occurred. Thank you

Date:06/05/19 Officer: Geniesse

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

Name of Premise: Flourish Address: 3500 W Silver Spring Dr Phone: None								
Owner address: 4210 City State Zip: Green: Owner Phone: 414-61	Owner: Charmice L Dodson b/f 09/08/73 DL. D325-1127-3828-00 Owner address: 4210 S Rainia Dr City State Zip: Greenfield, WI 53221 Owner Phone: 414-614-0574 Owner email: cdodson29@netzero.com							
Licensee/Agent: SAM Home Address: City State Zip: Phone: Email:	City State Zip: Phone:							
Preferred contact: Cha	armice ]	Dodson	·					
Location currently op	en:		YES	$\boxtimes$	NO			
Projected open date: (	07/01/19	9						
Day's open: S I	м []Т	□w□	]Th [	F ∐SÆ	\			
Hours of Operation:	Sun: Mon: Tue: Wed: Thu: Fri: Sat:	9a-2a 9a-2a		·	□24 hours □Y ⊠N			
Premise Type:		ern/Bar taurant er:	·		• •			
Licenses currently held:								

	Alcohol:	Yes   No Class:	<b>#:</b>
	Tobacco:	☐Yes ⊠No #:	
	Food:	Yes No #:	
	Extended Hours:	☐Yes ⊠No #:	
	Secondhand Dealer:	☐Yes ⊠No Type:	#:
	Other:	☐Yes ☐No Type:	#:
	Other:	Yes No Type:	<b>#:</b>
Exteri	or Survey:		
		location clean? ⊠Yes □N	lo .
		cation? (Check all the apply	
	a. Park		•
	b. School		
	c. Youth Cent	er	
	d. Church		
		f so, how many1	
	f. Residential	· · · · · · · · · · · · · · · · · · ·	
	g. Other busin		
	h. Other:		
3.	bonness and	outside of the location into	the interior \( \sum \text{Yes} \sum \text{No} \)
4.	•		from the outside Yes No
		free of signage Yes N	
6.	Is there a parking lot [		•
7.	Is the parking lot clear		
	Off-Street parking		
	Is the parking lot well		
	Valet Parking Yes		
10.	<del></del>	ave a guard? Yes No	
		ave cameras? Yes No	
11		a person could conceal the	mselves XYes No
			appears to be adequate Yes No
	Exterior Payphone?	☐Yes ⊠No	on the contract of the contrac
		g Signs posted? Yes	No
		urity cameras Yes No	
			nd easy to see ⊠Yes □No
10,	The me address name	ors prominently disprayed a	
Camer	ra Survey:		
		ve security cameras? Yes	⊠No
	Are they in working o		Z
	What format are the ca		
17.	a. Color	∏Yes ∏No	
-	b. Digital	Yes No	
	c. Recorded	Yes No	
20		tored for later viewing:	
	Are there exterior can		many.
	Are there interior cam		
			digital images/footage?  Yes No
∠J,	The art embrokees who	MATTO MATO TOTTO A C TOCOTROR	argreat tittescottooraso: [ ] 1 69 [ 110 .

	24. Cameras located in parking lot Yes No How many
Int	terior Survey:
·	25. What is the planned capacity unknown
	26. What is the minimum number of employees That will be on premise 3
	27. Is the storeowner willing to be a standing complainant regarding loitering? Yes No
	a. If yes have them fill out the standing complaint form and give them two of the
	commercial signs Yes No
	28. Is the interior of the location neat and clean?
	29. Does an interior camera face the entrance/exit?
	30. Is there a lockable area that separates employees from customers? Yes No
	31. Are emergency and non-emergency numbers posted near the phone? Yes No
	32. Does the owner know how to contact their police district directly? Yes No
	a. Did you provide a district contact guide to the owner? ⊠Yes ☐No
Sec	curity
	33. How many security personnel are going to be employed: 1
	34. How ill they be deployed: Interior 1 Exterior
	35. What days will they be deployed \(\sum \)Mon\(\sum \)Tue\(\sum \)Wed\(\sum \)Thu\(\sum \)Fri\(\sum \)Sat\(\sum \)Sun
	36. Will the security be managed by business Sor contracted
	37. Will they be armed Yes No
	38. What type of security measures to be used:
	Wanding/metal detector Wanding after 9p
	ID Scanner
	Dress Code
	Cover Charge
	Age restriction
	☐ Other

## ADDITIONAL COMMENTS/RECOMMENDATIONS:

Shanice stated she will be getting cameras soon and will contact d4 when they are installed. The building did not have a posted capacity.

Shanice stated this will be a restaurant/tavern. They will close at 11pm and will be kid friendly on the restaurant side.

Will have a live jazz band, but no DJ's

# MILWAUKEE POLICE DEPARTMENT LICENSE INVESTIGATION UNIT

## CRIMINAL RECORD/ORDINANCE VIOLATION/INCIDENTS SYNOPSIS

DATE: 10/12/2016

LICENSE TYPE: BTAVN

NEW:

RENEWAL: X

No. 239904

Application Date: 10/12/2016

**Expiration Date:** 

License Location: 3500-02 W Silver Spring Drive

Business Name: MJP Entertainment, LLC

**Aldermanic District:** 

Licensee/Applicant: Patton Sr, Michael J

(Last Name, First Name, MI)

Date of Birth: 04/20/1972

Home Address: 4121 W Rivers Edge Circle #213

City: Brown Deer

State: WI

**Zip Code:** 53209

Home Phone: (414) 371-1004

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

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

1. On 03/10/1997 the applicant was charged in Milwaukee County with Possess With Intent-Cocaine (>5-15G) §961.41(1m)(cm)4.

Charge:

Possess W/Intent-Cocaine (>5-15G)

Finding:

Guilty

Sentence:

Prison 10 Years

Date:

05/07/1997

Case#:

1997CF971175

2. On 08/27/2007 the applicant was cited at 2435 S. 8<sup>th</sup> Street in the City Of Milwaukee for Building Code Violations.

Charge:

**Building Code Violations** 

Finding:

Guilty - Milwaukee Municipal Court

Sentence:

\$1,480.00 Penalty

Date:

10/14/2008

Case#:

08040722

Page Two

RE: PATTON Sr, Michael J

3. On 01/23/2008 at 12:00AM, the applicant was cited by City Of Milwaukee for Building Code Violations at 1713 S 23rd Street.

Charge:

**Building Code Violations** 

Finding:

Guilty - Milwaukee Municipal Court

Sentence:

\$1,780.00 Penalty

Date:

10/14/2008

Case#:

08097409

4. On 12/28/2008 the applicant was charged in Milwaukee County with Battery §940.19(1).

Charge:

Battery

Finding:

Guilty

Sentence:

7 months house of correction (imposed and stayed); 18 months probation

Date:

03/12/2009

Case#:

2008CM007574

5. On 07/21/1995 the Wisconsin Department of Transportation suspended the applicant's driver's license for 9 months for Operating While Intoxicated.

### The following applies to corporate officer Maurice Cain:

6. Maurice Cain has the following outstanding parking and traffic citations:

09033319	Parking	\$730.00	Due on 07/20/09
08114527	OAS	\$109.00	Due on 12/15/08
08114528	OAS	\$83.80	Due on 12/15/08
11113487	OAS	\$88.80	Due on 01/09/12
11113488	OAS	\$114.00	Due on 01/09/12

7. On 12/19/92, Cain was charged with Drive or Operate Vehicle w/o Consent in Milwaukee County.

Charge:

Drive or Operate Vehicle w/o Consent

Finding:

Convicted

Sentence:

2 years probation/60 days HOC

Date:

10/27/93

Case: F924664

> 8. On 10/10/95, Cain was charged with Manufacture/Deliver Cocaine and Battery to Law Officers/Fire Fighters in Milwaukee County.

Charge:

Manufacture/Deliver Cocaine

Battery To Law Officers/Fire Fighters

Finding:

Convicted

Dismissed

Sentence:

1 year, 10 months Prison

Date:

12/12/95

Case:

95CF004440

9. On 08/28/99, Cain was charged with Possess W/Intent-Cocaine 2<sup>nd</sup> Offense in Milwaukee County.

Charge:

Possess W/Intent-Cocaine 2nd Offense

Finding:

Convicted

Sentence:

11 years Prison

Date:

12/14/99

Case: 99CF004379

- 10. On 03/04/12 at 2:36 am, Milwaukee police observed several subjects loitering about the entrance at Mike's Place located at 3500 W Silver Spring Drive. As officers monitored, they observed the subjects enter and exit the bar after closing and police conducted a License Premise Check. Officers spoke with Gregory Price, who identified himself as the new owner and manager. Price was advised of closing hours and patrons being in the bar after hours. Price told police that all patrons were out of the bar before closing and only a few guests who attended a birthday party stayed later. Price was given a warning.
- 11. On 05/05/12 at 1:34 am, Milwaukee police conducted a License Premise Check at 3500 W Silver Spring Drive and observed no violations.
- 12. On 05/13/12 at 12:30 am, Milwaukee police conducted a License Premise Check at 3500 W Silver Spring Drive and observed no violations.
- 13. On 06/24/12, Milwaukee police conducted a License Premise Check at 3500 W Silver Spring Drive and observed no violations.
- 14. On 09/08/12 at 12:50 am, Milwaukee police conducted a License Premise Check at 3500 W Silver Spring Drive and observed no violations. Officers spoke with the bartender Shalonda Williams, who provided police with her bartender's license, which was current.
- 15. On 09/22/12 at 1:22 am, Milwaukee police conducted a License Premise Check at 3500 W Silver Spring Drive. Officers spoke with the bartender Shalonda Williams as well as the licensee, Michael Patton. Officers smelled an odor of burnt marijuana on the rear outdoor patio but were unable to ascertain the source of the marijuana. Patton was advised and told to monitor the outdoor patio more closely.

16. On 10/27/12 at 12:30 am and on 11/25/12 at 1:30 am, Milwaukee police conducted a License Premise Check and observed no violations.

17. On 01/13/13 at 1:24 am, applicant received a citation for Presence of Minor at Licensed Premise at 3000 S 13<sup>th</sup> Street.

Charge:

Presence of Minor at Licensed Premise

Finding:

Not Guilty

Sentence:

Date:

03/24/2014

Case:

13014654

Page 4 Patton, Sr, Michael J

18. On 03/09/13 at 1:18 am, applicant received a citation for Presence of Minor at Licensed Premise at 3000 S 13<sup>th</sup> Street.

Charge:

Presence of Minor at Licensed Premise

Finding:

Guilty

Sentence:

\$457.00 fine 08/04/2014

Date: Case:

13034343

19. On 03/17/13 at 12:35 am, applicant received a citation for Liquor License Required at 3000 S 13<sup>th</sup> Street.

Charge: Finding:

Liquor License Required

Contono

Dismissed without prejudice

Sentence:

Date:

08/04/2014

Case: 13036811

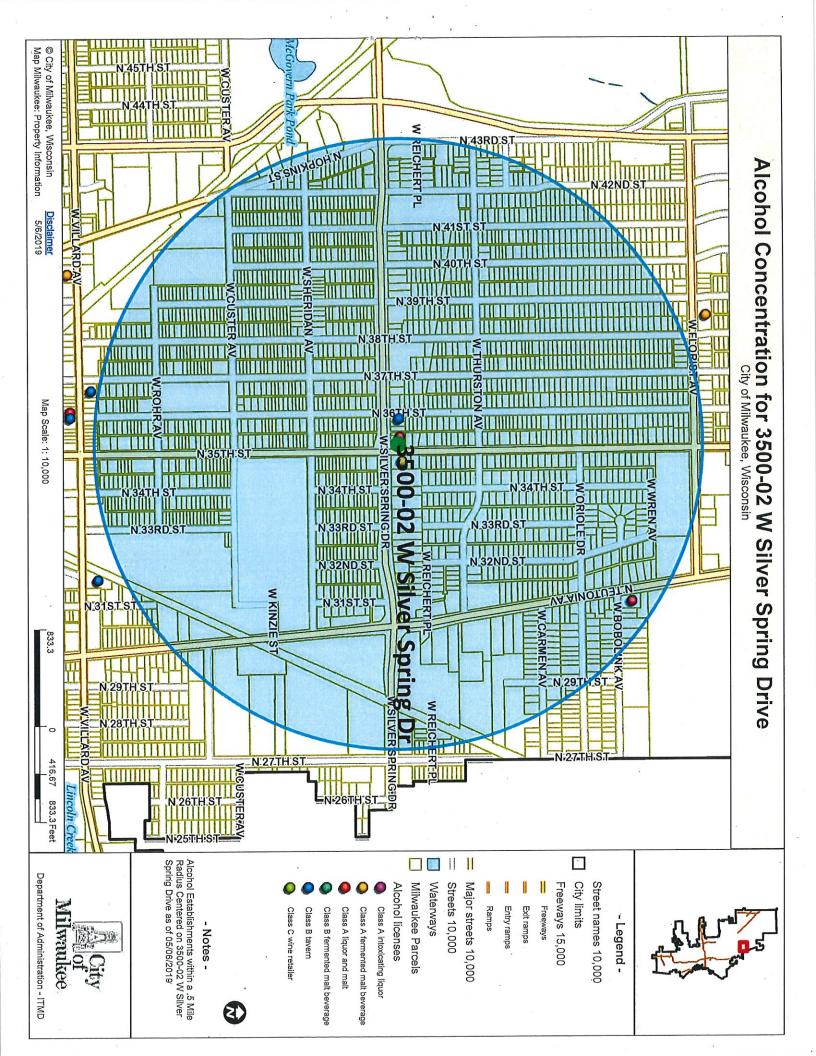
20. On 07/27/13 at 7:15 am, Milwaukee police were dispatched to Froedtert Hospital for a Battery complaint. Police spoke with the victim, James Pruitt, who stated he was at 3500 W Silver Spring at Mike's Tavern working as the bouncer when he observed an unknown female inside the bar smoking a cigarette. Pruitt told the female she had to go outside and smoke when an unknown male approached him and stated, "Don't disrespect my girlfriend". Pruitt stated he told both subjects to go outside so he could talk with them. Pruitt stated he attempted to diffuse the argument when the male took a "boxer stance". Pruitt stated he did the same because he wanted to protect himself. The male then removed an unknown type pistol from his front pants pocket and struck Pruitt in the face one time. Pruitt sustained a 1" laceration to the left side of his nose. Pruitt needed 12 stitches to close the wound. Police also spoke with Pruitt's brother who witnessed the incident and broke up the fight. Police later spoke with the owner Michael Patton, who stated he was in his office during the incident and was not aware that anything happened until Pruitt and his brother came back inside the tavern.

#17, #18 and #19 above previously reported, disposition added 10/01/2014.

- 21. On 02/14/2016 Milwaukee police were dispatched to a fight complaint at 3500 West Silver Spring Drive (Mike's Place). Investigation revealed security was told by a patron that someone was smoking marijuana in the bathroom. When security intervened and told a patron to leave, he became argumentative. This patron then began insulting another customer, who punched him in the face. Security did not wish to be a complainant for a citation, one of the involved patrons was no longer on the scene, and the other patron, who was intoxicated, was conveyed home by police.
- 22. On 02/25/2016 Milwaukee police were dispatched to a fight complaint at 3500 West Silver Spring Drive (Mike's Place). The bartender, Heather Franks, told police that 4 females had been fighting inside the bar. All the involved parties were gone when officers arrived.

- 23. On 03/09/2016 Milwaukee police monitored Mike's Place (3500 West Silver Spring Drive) as a proactive deterrence of potential unruly patrons. During this monitoring, no violations were observed and the tavern was orderly.
- 24. On 10/24/2016 Milwaukee police were dispatched to a shots fired complaint at 3500 West Silver Spring Drive. Officers discovered a homicide had occurred and the applicant was the victim. Milwaukee police incident report #162980100.

#### **PREVIOUS PREMISE**



Licensed Aicohol Beverage Establishments within a .5 Miles Radius Centered on 3500-02 W Silver Spring Drive as of 05/06/2019

License Summary Class A Fermented Malt Beverage Retailer's License Class A Malt & Class A Liquor License Class B Tavern License

Grand Total

Total capacity Address	3432 W SILVER SPRING DR	3510 W SILVER SPRING DR	5914 N TEUTONIA AV	3530 W SILVER SPRING DR
Total capac				20
License type name	Class A Fermented Malt Beverage Retailer's License	Class A Malt & Class A Liquor License	Class A Malt & Class A Liquor License	Class B Tavern License
Licensee	HARMINDER SINGH, Agt	KIMBERLY V WILLIAMS-YOUNG, Agt	GREGORY E DEAN, Agt	TERRY L HEINEMEIER, Agt
Trade name	RING FOOD MART	KIMBEES LIQUOR II	ONE STOP MINI MART	SILVER SPRING TAP
Legal entity	AMANPREET ENTERPRISES, LLC	KIMBEES LIQUOR II, LLC	NICKI'S KIDDIE CARE CENTER, INC	TERRY LEE'S CORPORATION

Thursday, August 29, 2019



## Licenses Committee **Notice of Hearing**

Michael Patton 1337 N 43rd St Milwaukee, WI 53209

Date:

9/10/2019

Time:

11:15 AM

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

The Licenses Committee will consider the following license application:

Class B Tavern, Food Dealer, and Public Entertainment Premises License Applications Requesting Instrumental Musicians, Disc Jockey, Poetry Readings, Karaoke, 1 Pool Table, and 2 Amusement Machines and 25+ Age Restriction After 9 PM

DODSON, Charmice L, Agent Flourish at 3500-02 W Silver Spring DR

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

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







## Notice of Public Hearing

DODSON, Charmice L, Agent Flourish at 3500-02 W Silver Spring DR

Class B Tavern, Food Dealer, and Public Entertainment Premises License Applications Requesting Instrumental Musicians, Disc Jockey, Poetry Readings, Karaoke, 1 Pool Table, and 2 Amusement Machines and 25+ Age Restriction After 9 PM

## Tuesday, September 10, 2019 at 11:15 AM

To whom it may concern:

The above application has been made by the above named applicant(s). This requires approval from the Licenses Committee and the Common Council of the City of Milwaukee. The hearing before the Licenses Committee will take place on 9/10/2019 at 11:15 AM, in Room 301-B, Third Floor, City Hall. If you wish, you may provide testimony at the hearing regarding the request; see below for further information. You are not required to attend the hearing. Once the Licenses Committee makes its recommendation, this recommendation is forwarded to the full Common Council for approval at its next regularly scheduled hearing. Please review the information below and if you have further questions regarding this process, please contact the License Division at (414) 286-2238.

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

- 1. The license application is scheduled to be heard at the above time. Due to other hearings running longer than scheduled, you may have to wait some time to provide your testimony.
- 2. You must appear in person and testify as to matters that you have personally experienced or seen. (You cannot provide testimony for your neighbor, parent or anyone else; this is considered hearsay and cannot be considered by the committee.)
- 3. No letters or petitions can be accepted by the committee (unless the person who wrote the letter or the persons who signed the petition are present at the committee hearing and willing to testify).
- 4. Persons opposed to the license application are given the opportunity to testify first; supporters may testify after the opponents have finished.
- 5. When you are called to testify, you will be sworn in and asked to give your name, and address. (If your first and/or last names are uncommon please spell them.)

- 6. You may then provide testimony.
- a. Include only information relating to the above license application.
- b. Include only information you have personally witnessed or seen.
- c. Provide concise and relevant information detailing how this business has affected or may affect the peaceful enjoyment of your neighborhood.
- d. If by the time you have the opportunity to testify, the information you wish to share has already been provided to the committee, you may state that you agree with the previous testimony. Redundant or repetitive testimony will not assist the committee in making its recommendation.
- 7. After giving your testimony, the members of the Licenses Committee and the licensee may ask questions regarding the testimony you have given or other factors relating to the license application.
- 8. Business Competition is not a valid basis for denial or non-renewal of a license.

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

		OTT OTATE TIP
OCCUPANT	MAIL ADDRESS	CITY, STATE ZIP
CURRENT OCCUPANT	5622 N 36TH ST	MILWAUKEE, WI 53209
CURRENT OCCUPANT	3526A W SILVER SPRING DR	MILWAUKEE, WI 53209
CURRENT OCCUPANT	5645 N 35TH ST	MILWAUKEE, WI 53209
CURRENT OCCUPANT	5559 N 35TH ST	MILWAUKEE, WI 53209
CURRENT OCCUPANT	5571 N 34TH 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	5632 N 36TH ST	MILWAUKEE, WI 53209
CURRENT OCCUPANT	5560 N 36TH ST	MILWAUKEE, WI 53209
CURRENT OCCUPANT	5635 N 35TH ST	MILWAUKEE, WI 53209
CURRENT OCCUPANT	5556 N 35TH ST	MILWAUKEE, WI 53209
CURRENT OCCUPANT	5605 N 35TH ST A	MILWAUKEE, WI 53209
CURRENT OCCUPANT	5650 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	5555A N 35TH ST	MILWAUKEE, WI 53209
CURRENT OCCUPANT	5565 N 35TH ST	MILWAUKEE, WI 53209
CURRENT OCCUPANT	5655 N 35TH ST	MILWAUKEE, WI 53209
CURRENT OCCUPANT	5640 N 36TH ST	M1LWAUKEE, WI 53209
CURRENT OCCUPANT	5555 N 35TH ST	MILWAUKEE, WI 53209
CURRENT OCCUPANT	5561 N 35TH ST	MILWAUKEE, WI 53209
CURRENT OCCUPANT	5619 N 35TH ST	MILWAUKEE, WI 53209
CURRENT OCCUPANT	5628 N 36TH ST	MILWAUKEE, WI 53209
CURRENT OCCUPANT	5622A N 36TH ST	MILWAUKEE, WI 53209
CURRENT OCCUPANT	5620 N 36TH ST	MILWAUKEE, WI 53209
CURRENT OCCUPANT	5644 N 36TH ST	MILWAUKEE, WI 53209
CURRENT OCCUPANT	5568 N 36TH ST	MILWAUKEE, WI 53209
CURRENT OCCUPANT	5556 N 36TH ST	MILWAUKEE, WI 53209
CURRENT OCCUPANT	5556A N 35TH ST	MILWAUKEE, WI 53209
CURRENT OCCUPANT	5605 N 35TH ST	MILWAUKEE, WI 53209
CURRENT OCCUPANT	5632A N 36TH ST	MILWAUKEE, WI 53209
CURRENT OCCUPANT	5560A N 36TH ST	MILWAUKEE, WI 53209
CURRENT OCCUPANT	5556A N 36TH ST	MILWAUKEE, WI 53209
CURRENT OCCUPANT	5638 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
		*

Total Records: 38

Radius: 250.0 feet and Center of Circle: 3500 W Silver Spring Dr



## 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

Legal Entity Name: Dodson Legacy LLC						
Premise Address: 3500-3502 W Silver Spring Dr., Milwaukee, WI 53209						
Proximity of Premises to Church, School, Daycare Center or Hospital						
is the building within 300 feet of any church, school, daycare center or hospital? X No Yes						
"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	UNIVERSITY OF THE STATE OF THE					
a) Are you taking out this application for anyone that may not be eligible for a license?   If yes, list their name and address:  b) Will the agent, a partner or the individual licensee be conducting the day-to-day operations of the business?   No XY  If no, list the name and address of the person(s) who will:	es					
Class B Applicants: If the agent, a partner or the individual licensee will not be conducting the day-to-day operations of 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?	ie business,					
Proof of Ownership, Lease, or Offer to Purchase (New & Transfer Applicants Only)	3					
Submit proof of ownership, lease, or offer to purchase the building with this application.  A lease or office to purchase must:  a) Be in the same legal entity name as that apply for the license  b) Reflect the 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?  Down X Lease  Michael Patton, Jr.						
c) Are you purchasing the stock and/or fixtures?						
e) Total amount paid for goodwill of the business \$\frac{N/A - New Business}{\frac{1}{2}}						
Goodwill comprises the reputation and customer relationships of an existing business. If the price you pay for the business exceeds the fair market value of all of the rest of the assets of the business, the excess may be considered goodwill.						
f) Have you made arrangements with the seller for payment of personal property taxes?   No   Yes						

Lease Information (New & Transfer Applica	ants who are leasing the premises	only)
a) Date lease begins () I I I I Ends () I I I I I I I I I I I I I I I I I I	out the consent of the owner? 図 No 図 Yes cy (number of years)? <u>\ し いれん</u> y anything additional to the owner of the building to なとさ、(ないなのにと。	guarantee performance
/ If yes, explain		
Change of Agent Applicants Only		11.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1
Have there been any changes to the floor plan since the last appl If no, a new floor plan is not required. If yes, submit a new floor		
Signature		
Signature of Sole Proprietor, Partner or 20% or More Shareholder (If no 20% or more Shareholder, Corporate Officer - print name/title	e and sign)	
Note: All information contained in this application is subject Deviating from approved plan of operation will subject licens Contact the License Division for information on how to reque	ee to citations, and/or suspension or non-renewal of st changes.	the license.
New and transfer of premise applicant	<del>_</del>	
Proof of ownership, lease or offer to purchase the building Detailed floor plan	5	
If a restaurant, copy of the menu		

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. T	ype of Business
Applyi	ng for:   Extended Hours (12AM to 5AM) - If a food establishment, check all that apply:   Delivery   Drive Thru   Dining Room
	Self Service Laundry Massage Establishment Filling Station
	Other (supplemental application for specific license also required)
To proplace	e a detailed description of the type of business you plan on operating: ovide a comfortable family orientated eatery and pub for our Thurston Woods Community. The where strangers become friends.
Do yo	u have any experience operating this type of business? No 🗹 Yes If yes, explain: Owner of Belli's Bistro
2. E	Susiness Operations
а.	Proposed Opening Date: Spring 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? 🔽 No 🗌 Yes If yes, list type of license:
e.	Is the current licensee operating? 🔽 No 🗌 Yes If no, list date closed:
f.	Do you have future plans for other businesses, licenses or permits at this location? 📈 No 🔲 Yes
	If yes, explain:
g.	Have you previously held an Extended Hours License in Milwaukee? 🔽 No 🗌 Yes
	If yes, list address(es):
h.	Are other businesses operating in the same building? V No Ves 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?
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? \( \sum \) No \( \sum \) Yes If yes, describe: \( 4000000000000000000000000000000000000
4. S	moking & Sanitation
a.	Are there designated outdoor smoking areas?  No  Yes If yes, describe: Cotrolled patio
b.	Number of Garbage Cans: Inside: 8 Locations: through out building
	Outside: 3 Locations: side of building
c.	Is a crowd control barrier used? 📈 No 🗌 Yes 💮 If yes, describe:
d.	How many restrooms are on the premises? 2
e.	Name of solid waste contractor: Advanced Disposal Waste Management Other:
d.	How many restrooms are on the premises? 2

5. Se	curity									
a.	a. Are there onsite parking spaces? No Yes If yes, how many? and describe the parking security									
l	plan:									
b.	o. Is there a loading zone? No Yes If yes, describe the loading area security plan:									
c.				_				_	nd answer the following:	
<u> </u>							d control, remov	•	uly guests	
							escribe		- The state of the	
									ate, 10+ years experience	
d.	Will there b	e securi	ty cam	neras? 🗌 No 🔽	Yes	If yes, how	many? 🍒 🖊 🙎 and lis	t locations:		
	Surrounding	g the outs	side an	d inside of the prope	erty					
e.	Will searche	es/identi	ificatio	on checks be done	e upor	n entry? 🔲 N	No 🗹 Yes If yes, desc	<sub>ribe</sub> after 9	)pm	
6. Pe	rcentage	e of Sa	ales	(must total 1	1009	%)				
Alcohol	l <u>j</u>	30	_%	Food .	_70	%	Secondhand Merchand	ise	Precious Metals & Gems	
Enterta	inment _		_%	Cigarettes		%	%		%	
Pawnbroker Activity% Salvaged Materials (such as scrap metal)			%	Personal Services (such as tattoo, body piercing, salon, tailor, tanning, etc.)		Other% Describe:%				
7. Bu	ısinesses	/Lice	nses	on the Prem	nises	s (check a	all that apply):			
Type 1										
☑ Fu	ll Service Res	taurant		Cafe/Coffee Sh	nop	Deli or Fast Food Restaurant		Private	Private/Fraternal/Veterans Club	
Ni,	ght Club			✓ Tavern		✓ Cocktail Lounge ☐ Teen		Teen C	lub	
Ва	nquet Hall			Sports Facility		Bowling	Alley			
□нс	otel/Motel :	Number	of Flo	ors:		Rooming	House: Number of Flo	ors:		
		Number	of Roo	oms:			Number of Ro	oms:	MANAGAMANA	
Type 2	uor Store			Corner Store		Superma	rket	Conven	ience Store	
☐Ga	s Station			Amusement/Pl	honog	raph Distributor		Recyclin	Recycling, Salvage or Towing	
Us	Used Car Dealer Personal Service Establishment Recording Studio (such as tattoo business, hair salon, tailor, etc.)					ng Studio				
What other licenses/permits will you hold at this location? (check all that apply)										
	☑Occupancy Permit □Cigarette & Tobacco □Gas Station □Extended Hours ☑Class "B" Tavern □ Weights & Measures									
Secondhand Dealer Precious Metal & Gem Other:										
8. Le	gal Capa	acity (	only	if a Type 1 p	oren	nises in #	7 above)			
Capacity 100 (Call the Milwaukee Development Center at 414-286-8211 if you have questions.)										

 $x = \frac{1}{x_0} \left( \frac{x_0}{x_0} \right)$ 

9. P	remises D	escription	A STATE OF S					
a.	a. Identify all area(s) of the premises that will be used in operating this business (include areas used only for storage):  ☑1st Floor □2nd Floor □Basement Storage ☑Patio □Beer Garden □Sidewalk Café □Deck □Rooftop							
	□Other: Descr	· .	<del></del> ,					
b.	Describe Locati	on: Major Thoroughfare	Secondary Street O	her:				
c.		Cross Street: Silver Sp	•					
d.		ng: 🗹 Free Standing Buildir						
e.		ses Structure: Single Sto						
f.	Describe Surro	unding Area: Commercia	I Residential Industr	ialOther:	7/5_3777			
g.		Name: Michael Pattor			1-10-0111			
	Business Owne	r Address: 4210 S Rav	nnia Dr., Greenfield.	VVI 53221				
10, 1	tours of O	peration & Custor	mers					
Will cu	stomers be ente	ering the premises?   No	<b>√</b> Yes					
		Proposed Hour	s of Operation:	Estimated Number	Potential	Class B Tavern		
Dayo	if the Week	A +	302 <del></del>	of Customers	Age Range of	Applicant Only: Age Restriction		
	Tig.	Open Time (Include a,m. or p.m.)	Close Time (include a.m. or p.m.)	expected each day	Customers	(If none, write 'None')		
5	iunday	11:00am	11:00pm	60	18-45	after 9pm - 25 +		
, N	Monday	11:00am	11:00pm	60	18-45	after 9pm - 25 +		
Ţ	uesday	11:00am	11:00pm	60	18-45	after 9pm - 25 +		
`Wa	kdnesday	11:00am	11:00pm	60	18-45	after 9pm - 25 +		
TI	nursday.	11:00am	11:00pm	60	18-45	after 9pm - 25 +		
7	Friday	11:00am	11:00pm	60	18-45	after 9pm - 25 +		
Si	aturday	11:00am	11:00pm	60	18-45	after 9pm - 25 +		
Washington the service of the servic	AND THE RESIDENCE OF THE PARTY	tablishment License is requir tanning, etc.), recording stud	do contracto de companyo de la comp		The state of the s			
	l Establishment		am to 9:00 pm Sunday thru			end region to the contract of		
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)								
Darmin Das								
		rietor, Partner, or 20% or mo	ore Shareholder	Signature of additional p	artner or 20% or	more shareholder		
		% or more shareholders, print name/title and sign)	•					
		,,						

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



## PUBLIC ENTERTAINMENT PREMISES LICENSE SUPPLEMENTAL APPLICATION

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

PREMISES ADDRESS: 3500-3502	W Silver Spring Dr, Milwa	ukee WI 53209				
TYPES OF ENTERTAINMENT (CH		n i Santa de la compania de la comp La compania de la co				
Instrumental Musicians	Battle of the Bands	Dancing by Performers	Amusement Machines How many?			
Bands	Comedy Acts	Adult Entertainment/ Strippers/Erotic Dance	Concerts Approx. # per year?			
Bowling Alley How many?	☑ Disc Jockey	Wresting	Theatrical Performances Approx. # per year?			
Pool Tables How many?	Magic Shows	Patron Contests	Jukebox			
Motion Pictures (movies by admission) - How many?	Noetry Readings	Patrons Dancing	Karaoke			
Other:			v.			
		riday & Saturday; unless a different time, ε n its approval of the licensee's plan of ope				
PROMOTERS/SOUND AMPLIFICA	XTION		en e			
Will promoters ever be used for any of the	he entertainment? 🔣 No 🗌 Yes	If Yes, Describe:				
At any time will sound amplification be u	used? 🔲 No 🔀 Yes 🛮 If Yes, Descri	ibe: Karaokl	-			
LEGAL CAPACITY OF PREMISES			en transport og skriver og skrive Grand for skriver og s			
(Call the Development C Premises License. If you would like to re here: If approved, this	quest the license be approved with	ons.) Legal capacity determines the form of a lower capacity than that listed about the capacity lister.	ve, indicate the lower capacity			
ACKNOWLEDGEMENT/SIGNATU		The second of the second second second second				
I understand that after the license has been issued, a change to the plan of operation will require a written request to change and approval from the Common Council. I agree to inform the City Clerk within 10 days of any substantial changes in the information supplied in this application. I understand that I shall not willfully refuse to provide the services offered under this license, or add charges or require deposits not required of the general public because of race, color, sex, religion, national origin or ancestry, age, handicap, lawful source of income, marital status, sexual orientation, gender identity or expression, familial status or the fact that a person is now or has been a member of the military service, whether dressed in uniform or not; and shall not seek such information as a condition of employment, or penalize any employee or discriminate in the selection of personnel for training or promotion on the basis of such information.						
I have knowledge of the City Ordinances currently regulating public entertainment, and understand that the license may be subject to suspension, non-renewal or revocation, if I violate any rule, law or regulation of the city of Milwaukee and State of Wisconsin.  Signature of Sole Proprietor, Partner or 20% or More Shareholder (If no 20% or more Shareholder, Corporate Officer - print name/title and sign)						
Office Use Only:	Δnn ·					

Only PEP? No Yes If Yes, Queue to MPD and Email Mgrs/Team Lead (must be heard w/in 60 days)



## **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: Dodson Legacy LLC
Premises Address: 3500-02 W. Silver Spring Dr., Milwaukee, WI 53209
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 ☐ 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></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 ☑ 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? No Yes (includes dairy products such as milk, cheese, and ice cream, fish, shellfish, meat, poultry)
If yes, list the types of food items: Beef, chicken, fish, milk, eggs, cheese, butter, yogurt, fruits, vegatables, fries

ccl-foodplan 2/28/19

SECTION 4 DETAILS OF OPERATION
Will you have seating on site for dining? ☐ No ☑ Yes
Will you be doing any catering?
Will you be doing any delivery?
Will you have outdoor activities?
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:
Start date:
Name, Address & Phone Number of Architect:
Name, Address & Phone Number of Contractor:
- Tomo, rearrest extractor.
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 approval 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, 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.
$\mathcal{L}_{\mathcal{L}}}}}}}}}}$
Signature of Sole Proprietor, Partner, or 20% Shareholdek: Whymia 1000000000000000000000000000000000000
Signature of Additional Partner:

