

CITY OF MILWAUKEE OFFICE OF THE CITY CLERK

Thursday, January 14, 2021

COMMITTEE MEETING NOTICE

AD 02

SINGH, Jatinder, Agent 6315 STARK INC 6315 W FOND DU LAC AV

Milwaukee, WI 53218

You are requested to attend a virtual hearing to be held on:

Tuesday, January 26, 2021 at 09:35 AM

Regarding:

Your Class A Malt & Class A Liquor, Food Dealer, and World ts & Measures License Applications as agent for "6315 STARK INC" for "Stark Food III" at 6315 W FOND AC Av.

This meeting will be held via GoToMeeting. Please see the enclosed best practices document for further instructions. The access code is https://global.gotomeeting.com/join/778000629. If you wish to call in, please call https://global.gotomeeting.com/join/778000629. If you wish to call in, please call https://global.gotomeeting.com/join/778000629. If you wish to call in, please call https://global.gotomeeting.com/join/778000629. If you wish to call in, please call https://global.gotomeeting.com/join/778000629.

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 attend this meeting may result in the denial of your license. Individual applicants and partnership applicants must attend or attend by an attorney. The agent or attorney for corporate or limited liability applicants must attend. 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 attend the virtual hearing and are 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 request an interpreter attend the meeting with you, at your expense, so that you can answer questions and participate in your hearing.

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

BY:

License Division Manager

If you have questions regarding this meeting, please contact the staff assistant, Molly Kuether-Steele at (414) 286-2775 or molly.kuether-steele@milwaukee.gov.

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



CITY OF MILWAUKEE OFFICE OF THE CITY CLERK

Thursday, January 14, 2021

COMMITTEE MEETING NOTICE

AD 02

SINGH, Jatinder, Agent 6315 STARK INC 3104 W Silver Spring Dr

Milwaukee, WI 53209

You are requested to attend a virtual hearing to be held on:

Tuesday, January 26, 2021 at 09:35 AM

Regarding:

Your Class A Malt & Class A Liquor, Food Dealer, and Weights & Measures License Applications as agent for "6315 STARK INC" for "Stark Food III" at 6315 W FOND DU LAC Av.

This meeting will be held via GoToMeeting. Please see the enclosed best practices document for further instructions. The access code is https://global.gotomeeting.com/join/778000629. If you wish to call in, please call https://global.gotomeeting.com/join/778000629. If you wish to call in, please call https://global.gotomeeting.com/join/778000629. If you wish to call in, please call https://global.gotomeeting.com/join/778000629.

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JIM OWCZARSKI, CITY CLERK

Jan Celn

BY: ________

Jessica Celella

License Division Manager

If you have questions regarding this meeting, please contact the staff assistant, Molly Kuether-Steele at (414) 286-2775 or molly.kuether-steele@milwaukee.gov.

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

Date: 12/16/2020

Officer: Lawson Murrell

City of Milwaukee Police Department

90-5-1.5 Crime Prevention Survey

Convenience Store/Liquor Store Inspection

Name of Business: Stark Food III

Address: 6315 W. Fond Du Lac Ave

Phone: 414-395-3455

Owner: Jatinder Singh

Owner address: 3104 W. Silver Spring Dr

City State Zip: Milwaukee, WI. 53209

Owner Phone: 414-614-3592

Owner email: ja10der.singh@gmail.com

Manager: same as owner

Home Address: Click here to enter text.

City State Zip: Click here to enter text.

Phone: Click here to enter text.

Email: Click here to enter text.

Preferred contact: 414-6143592

Location currently op	en:	⊠YES	□NO		
Projected open date: Click here to enter text.					
Day's open: □S □M		W □Th	□F□SA	⊠ALL	
Hours of Operation:	Sun: 8	AM-9 P	M every d	ay	24 hours □Y □N
	Mon:	Click her	e to enter t	ext.	
	Tue: C	lick here	to enter te	xt.	
	Wed:	Click her	e to enter t	ext.	
	Thu: C	lick here	to enter te	xt.	
	Fri: Cli	ck here t	o enter tex	t.	
	Sat: Cl	ick here	to enter tex	ct.	
Premise Type:	⊠Liqu	or Store	9		
	□Con	venienc	e Store		
	□Oth	er:			
Licenses currently he	eld:				
Alcohol:		⊠Yes [□No Class	: A #: ALQN	/IL 318277
Tobacco:		⊠Yes [□No #: Clid	ck here to en	nter text.
Food:		⊠Yes [□No #: Clie	ck here to en	nter text.
Extended Ho	urs:	□Yes	⊠No#: Cl	ick here to e	nter text.
Secondhand	Dealer:	□Yes	□ No Туре	:Click here t	o enter text. #: Click here to enter text
Other:		⊠Yes	□No Type	:weights&m	neasures #: W&M 318282
Other:		□Yesˈl	□No Type	: Click here to	o enter text. #: Click here to enter text.

Who is your alcohol distributor? 1) Johnson Brothers 2) Breakthrough 3) General Beverage

Exterior Survey:

1.	Is the area around the location clean? $oxtime ext{Yes} oxtime ext{No}$
2.	What surrounds the location? (Check all the apply)
	a. \square Park
	b.
	c. Youth Center
	d. □Church
	e. ⊠Tavern(s) If so, how many 1 (not currently open)
	f. Residential
	g. Other businesses
	h. Other: Click here to enter text.
3.	Can you see from the outside of the location into the interior $oxtimes$ Yes $oxtimes$ No
4.	Can you see the employees inside of the location from the outside \square Yes \boxtimes 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 □Yes ☒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 Ves INo

Camera Survey:

14. Does this location have security cameras? \boxtimes Yes \square 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 ☐ Yes ☐ No How many:				
20. Do all employees know how to retrieve recorded digital images/footage? \boxtimes Yes \square No				

Interior Survey:

21.	Is the	e storeowner willing to be a standing c	omplainant reg	arding loitering? ⊠Yes □No
	a.	. If yes have them fill out the standing commercial signs ⊠Yes □No	g complaint fori	n and give them two of the
22.	Is the	e interior of the location neat and clear	n?	⊠Yes □No
23	Does	an interior camera face the entrance/	exit?	⊠Yes □No
24	Is the	ere a lockable area that separates emp	loyees from cus	stomers? ⊠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 : Click here to enter tex	ĸt.	
29	. Does	the store have an overabundance of	sandwich baggie	es: □Yes ⊠No
30	. Does	the owner understand that these iter	ns are often use	ed for drug use? ⊠Yes □No
31	. Do th	ne products in the store appear to be r	new and rotated	d often? ⊠Yes □No
32	. Are e	emergency and non-emergency number	ers posted near	the phone? ⊠Yes □No
33	. Does	the owner know how to contact their	police district o	directly? ⊠Yes □No
	a	. Did you provide a district contact gr	uide to the own	er? ⊠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? \square Yes \square 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 □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? \boxtimes Yes \square 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? \boxtimes Yes \square No 9. Are the camera views obstructed by fixtures or displays? □Yes ☒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				
 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. 				
13. Has the owner and their employees attended the Robbery Prevention Training within 120 days of ownership or employment? ⊠Yes □No				
a. Contact Community Outreach and Education at 935-7836 for schedule.				

<u>Sub 3. Exemptions</u> . The requirements of this section do not apply to a convenience food
store that conforms to either of the following descriptions:
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 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
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:

10 exterior cameras

30 interior cameras

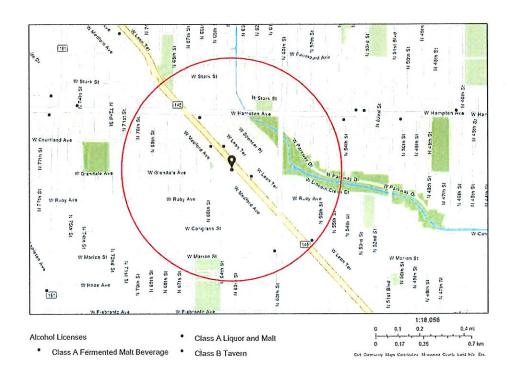


City Concentration Map 6315 W Fond Du Lac Ave

Area of Interest (AOI) Information

Area: 21,862,585.89 ft2

Dec 1 2020 11:16:32 Central Standard Time



Concentration Map 6315 W Fond Du Lac Ave

Summary

Name	Count	Area(ft²)	Length(mi)
Alcohol Licenses	7		

Alcohol Licenses

#	Legal Entity	Trade Name	Licensee	Address	License Type Name	Total Capacity	Expiration Date	Count
1	Nevey's LLC	Stark Food III	CHARNJIT KAUR, Agt	6315 W Fond du Lac AV	Class A Malt & Class A Liquor License		3/26/2021, 7:00 PM	1
2	HT Liquor & Spirits LLC	HT Liquor & Spirits	Hue T Vang, Agt	6422 W Fond Du Lac AV	Class A Malt & Class A Liquor License		9/2/2021, 7:00 PM	1
3	5700 Court LLC	Court MVP Sports Bar + Grill	Otis D Moore, Agt	5700 W FOND DU LAC AV	Class B Tavern License	99	5/7/2021, 7:00 PM	1
4	Ahdream Entertainment, LLC	Eve Dining	THOMAS J HOLMES, Agt	6222 W Fond Du Lac AV	Class B Tavern License		7/7/2021, 7:00 PM	1
5	FREMO'S	FREMO'S	PETER J FIUMEFREDD O, SP	6449 W FOND DU LAC AV	Class B Tavern License	80	7/13/2021, 7:00 PM	1
6	Club 4323, LLC	Genes Supper Club	JAMES T ROBINSON, JR, Agt	4323 N 60th ST	Class B Tavern License	160	3/1/2021, 6:00 PM	1
7	P&K Supermarket LLC	Food Town & Liquor	Pawan Kumar, Agt	6608 W Fond Du Lac AV	Class A Malt & Class A Liquor License		9/20/2021, 7:00 PM	1

Establishments within a 0.5 miles radius centered on area of interest.

Thursday, January 14, 2021



Licenses Committee Notice of Hearing

CHARNJIT KAUR HOLDINGS 6315 W Fond Du Lac Av Milwaukee, WI 53218

The Licenses Committee will consider the following license application:

Class A Malt & Class A Liquor, Food Dealer, and Weights & Measures License Applications SINGH, Jatinder, Agent Stark Food III at 6315 W FOND DU LAC Av

Date:

1/26/2021 09:35 AM

Location:

The hearing before the Licenses Committee will take place virtually on Tuesday, January 26, 2021. This is a public hearing. Those wishing to view the proceeding are able to do so via the City Channel – Channel

25 on Spectrum Cable – or on the Internet at

http://city.milwaukee.gov/citychannel. Those wishing to provide oral testimony will be asked to do so by phone or internet and are asked to contact the staff assistant, Molly Kuether-Steele at (414) 286-2775 or molly.kuether-steele@milwaukee.gov for necessary information. Please make such requests no later than one business day prior to the start of the meeting. You are not required to attend the hearing, but please see the information below if you would like to provide testimony

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.





Licenses Committee Notice of Hearing

CHARNJIT KAUR 4616 W Hampton Av Milwaukee, WI 53218

The Licenses Committee will consider the following license application:

Class A Malt & Class A Liquor, Food Dealer, and Weights & Measures License Applications SINGH, Jatinder, Agent Stark Food III at 6315 W FOND DU LAC Av

Date:

1/26/2021 09:35 AM

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Thursday, January 14, 2021



Notice of Public Hearing

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SINGH, Jatinder, Agent
Stark Food III at 6315 W FOND DU LAC Av
Class A Malt & Class A Liquor, Food Dealer, and Weights & Measures License Applications

Tuesday, January 26, 2021 at 9:35 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 virtually on 1/26/2021 at 9:35 AM. This is a public hearing. Those wishing to view the proceeding are able to do so via the City Channel – Channel 25 on Spectrum Cable – or on the Internet at http://city.milwaukee.gov/citychannel. Those wishing to provide oral testimony will be asked to do so by phone or internet and are asked to contact the staff assistant, Molly Kuether-Steele at (414) 286-2775 or molly.kuether-steele@milwaukee.gov for necessary information. Please make such requests no later than one business day prior to the start of the meeting. You are not required to attend the hearing, but please see the information below if you would like to provide testimony. Once the Licenses Committee makes its recommendation, this recommendation is forwarded to the full Common Council for approval at its next regularly scheduled hearing.

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 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 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	3151 N 37TH ST	MILWAUKEE, WI 53216
CURRENT OCCUPANT	3137A N 37TH ST	MILWAUKEE, WI 53216
CURRENT OCCUPANT	3123 N 37TH ST	MILWAUKEE, WI 53216
CURRENT OCCUPANT	3106 N 37TH ST	MILWAUKEE, WI 53216
CURRENT OCCUPANT	3614 W BURLEIGH ST	MILWAUKEE, WI 53210
CURRENT OCCUPANT	3139 N 35TH ST	MILWAUKEE, WI 53216
CURRENT OCCUPANT	3141A N 37TH ST	MILWAUKEE, WI 53216
CURRENT OCCUPANT	3130 N 37TH ST	MILWAUKEE, WI 53216
CURRENT OCCUPANT	3126A N 37TH ST	MILWAUKEE, WI 53216
CURRENT OCCUPANT	3120 N 37TH ST	MILWAUKEE, WI 53216
CURRENT OCCUPANT	3626 W BURLEIGH ST	MILWAUKEE, WI 53210
CURRENT OCCUPANT	3169 N 37TH ST 1	MILWAUKEE, WI 53216
CURRENT OCCUPANT	3530 W FOND DU LAC AVE 2	MILWAUKEE, WI 53216
CURRENT OCCUPANT	3161 N 37TH ST	MILWAUKEE, WI 53216
CURRENT OCCUPANT	3141 N 37TH ST	MILWAUKEE, WI 53216
CURRENT OCCUPANT	3137 N 37TH ST	MILWAUKEE, WI 53216
CURRENT OCCUPANT	3120A N 37TH ST	MILWAUKEE, WI 53216
CURRENT OCCUPANT	3169 N 37TH ST 3	MILWAUKEE, WI 53216
CURRENT OCCUPANT	3151A N 37TH ST	MILWAUKEE, WI 53216
CURRENT OCCUPANT	3147 N 37TH ST	MILWAUKEE, WI 53216
CURRENT OCCUPANT	3123A N 37TH ST	MILWAUKEE, WI 53216
CURRENT OCCUPANT	3169 N 37TH ST 2	MILWAUKEE, WI 53216
CURRENT OCCUPANT	3530 W FOND DU LAC AVE 1	MILWAUKEE, WI 53216
CURRENT OCCUPANT	3147 N 35TH ST	MILWAUKEE, WI 53216
CURRENT OCCUPANT	3126 N 37TH ST	MILWAUKEE, WI 53216
CURRENT OCCUPANT	3622 W BURLEIGH ST	MILWAUKEE, WI 53210
CURRENT OCCUPANT	3103 N 36TH ST	MILWAUKEE, WI 53216
CURRENT OCCUPANT	3157 N 37TH ST	MILWAUKEE, WI 53216
CURRENT OCCUPANT	3139A N 35TH ST	MILWAUKEE, WI 53216
CURRENT OCCUPANT	3147A N 35TH ST	MILWAUKEE, WI 53216
CURRENT OCCUPANT	3163 N 37TH ST	MILWAUKEE, WI 53216
CURRENT OCCUPANT	3157A N 37TH ST	MILWAUKEE, WI 53216
CURRENT OCCUPANT	3131 N 37TH ST	MILWAUKEE, WI 53216
CURRENT OCCUPANT	3127 N 37TH ST	MILWAUKEE, WI 53216
CURRENT OCCUPANT	3121 N 37TH ST	MILWAUKEE, WI 53216
CURRENT OCCUPANT	3169 N 37TH ST 4	MILWAUKEE, WI 53216
blank	notice	
Tatal Daggeder 3C		

Total Records: 36

Radius: 250.0 feet and Center of Circle: 6315 W Fond Du Lac Ave

ccl-busplan 5/12/2020



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-mall address: license@milwaukee.gov

1. Type of Business	
Applying for: Extended Hours (12AM to 5AM) - If a food establishment, check all that apply: Delivery Drive Thru Dining Roo	n
Self Service Laundry Massage Establishment Efilling Station	
Other (supplemental application for specific license also required)	
Provide a detailed description of the type of business you plan on operating: LIQUOR STORE	
LIQUOR STORE	
Do you have any experience operating this type of business? 🔲 No 🏿 Yes 💮 If yes, explain: WORKING IN RETAIL FOR PAST 20+	
2. Business Operations	
a. Proposed Opening Date: 12/01/2020	
b. Is this premise under construction? 🔳 No 🗌 Yes if yes, list estimated completion date:	
c. s this a franchise? No Yes	
d. Is this premises currently licensed? No layes If yes, list type of license: NEVEYS LLC	
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?	
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 Me Yes If yes, describe:	
3. Litter & 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. Smoking & Sanitation	3 3 (g 3 (4 (g)
a. Are there designated outdoor smoking areas? 🔳 No 🗌 Yes If yes, describe:	
b. Number of Garbage Cans: Inside: 3 Locations: FRONT DOOR, SIDE DOOR, BEHIND COUNTER	
Outside: 2 Locations: ENTERANCE	
c. Is a crowd control barrier used? 🌉 No 🛄 Yes — If yes, describe:	-
d. How many restrooms are on the premises? $\frac{2}{}$	
e. Name of solid waste contractor; Advanced Disposal Waste Management Other:	

5. Security					
a. Are there ensite parking spaces? No 🔳 Yes. If yes, how many? 12 and describe the parking security					
plan: SURVEILLANCE	CAMERAS INSTALLE	ED AROUNI	D THE BUILDING		
b. Is there a loading zone?	No Yes If yes, d	lescribe the l	oading area security plan:		
1			s If yes, how many?		l answer the following:
1					
, , ,			escribe		
		*			
d. Will there be security can COOLER, COUNTER		if yes, now	many? 16+ and list locati	ions: <u>~</u>	7010,022 @010220
-		n antru2	No Yes If yes, describe		
6. Percentage of Sales		aramana iyo aramana a	vo Tres in yes, describe		
Alcohol 37 %	Food 23	%			
			Secondhand Merchandise		Precious Metals & Gems%
Entertainment%		%			
Pawnbroker Activity%	Salvaged Materials (such as scrap metal)	<u></u> %	Personal Services (such as tatto body piercing, salon, tailor, tanning, etc.)%	· 1	Other 40 % Describe: CIG. TOB.HBA
7. Businesses/Licenses	on the Premise	s (check a	all that apply):		
Type 1	Cofo (Cisto - Chan	[] baltar 6	to the drawn of Fig.		
Full Sérvice Restaurant Night Club	Cafe/Coffee Shop Tavern	Cocktail	·		raternal/Vétérans Club
				een Clu	D
Banquet Hall	Sports Facility	Bowling	-		
Hotel/Motel: Number of Flo	oms:	[_] Rooming	g House: Number of Floors:		
Type 2			Hamber of Noonia,		
Liquor Store	Corner Store	Superma	rket Co	onvenie	nce Store
Gas Station	Amusement/Phonog	raph Distribut	or Re	ecycling;	, Salvage or Towing
Used Car Déaler	Used Car Dealer Personal Service Establishment Recording Studio (such as tattoo business, hair salon, tailor, etc.)				
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					
୍ରି Secondhaṇd Dealer ୍ରମ୍ମି Precious Metal & Gem ୍ରା Other:					
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. P	remises D	escription							
а.	a. Identify all area(s) of the premises that will be used in operating this business (include areas used only for storage):: 1 Floor								
	**	Other; Describe:							
b.	Describe Locati	Describe Location: Major Thoroughfare Secondary Street Other:							
Ç,		Nearest Major Cross Street: 60TH AND FOND DU LAC							
d.	Describe Building: Ma Free Standing Building Strip Mall Other:								
e.	Describe Premises Structure: Single Story Multi-Story - # of Stories Other:								
f,	Describe Surrounding Area: Commercial Residential Industrial Other: Building Owner Name: CHARNJIT KAUR Phone Number: 414-795-4056								
g.	Building Owner	Name: CHARNJIT KAU	K MINANE MINANKE	hone Number: 414-73	30-4000				
	Building Owner Address: 4616 W HAMPTON AVE, MILWAUKEE, WI 53218								
10.	Hours of C	peration & Custor	ners						
Will cu	ustomers be ent	ering the premises? 🔲 No	■ Yes						
		Proposed Hour	s of Operation:	Estimated Number	Potential	Class B Tavern			
Day	of the Week		el Ti	of Customers	Age Range of	Applicant Only: Age Restriction			
		Open Time (include a.m., or p.m.)	Close Time (include a.m. or p.m.)	expected each day	Customers	(If none, write 'None')			
	Sunday	08:00AM	09:00PM	100					
<u> </u>	Vionday	08:00/ IM	09:00PM	100					
		08:00AM	09:00PM	100					
684-8619 827-733	ednesday	08:00AM	09:00PM	100					
: (2) . (2)									
ı	hursday	MA00:80	09:00PM	100					
	Friday	MA00:80	09:00PM	150					
S	aturday.	MA00:80	09:00PM	150					
An Extended Hours Establishment License is required for any convenience store, filling station, personal service establishment (such as tattoo, body piercing, salon, tallor, 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 5 Permitted Flours 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)									
tampées fosts des luc									
Signature of Sole Proprietor, Partner, or 20% or more Shareholder Signature of additional partner or 20% or more shareholder (If there are no 20% or more shareholders,									
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 <u>www.milwaukee.gov/license</u>

Lega	Entity Name: 6315 STARK INC			,		
Premise Address: 6315 W FOND DU LAC AVE MIWAUKEE, WI 53218						
Proximity of Premises to Church, School, Daycare Center or Hospital						
ls th	e building within 300 feet of any church, school, dayc	aré center or hospital?	√ No	Yes		
"Ser	vice Bar Only" Designation					
lfap	oplying for Class B or Clicense, are you applying for "So	ervice Bar Only"?	☑ No	Yes	<u> </u>	
	vice Bar Only means customers cannot sit at the bar. A stools, chairs or other articles of furniture shall be plac				seated at tal	oles.
Bus	iness Information					
a)	Are you taking out this application for anyone that m	nay not be eligible for a lic	ense?	☑ No □	Yes	
	If yes, list their name and address:					
b)	Will the agent, a partner or the individual licensee be					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 in	dividual licensee will not	he conduction	by the day-to	o-day operat	 tions of the husiness
	the person(s) listed above must obtain a Class B Man		DC GOTTAGGET	ig the day to	s.day opera	nons of the pusitiess,
c)	Does anyone else have money invested or any other	interest in this business?	☑ No [Yes		
	If yes, explain:				-	
d)	Have you made an agreement with anyons to repay	any loan or any other pay	ments based	upon incom	e from the l	ousiness?
d)	Have you made an agreement with anyone to repay No Yes If yes, list name and address:	any loan or any other pay	ments based	upon incom	e from the I	ousiness?
				upan incom	e from the l	ousiness?
	No Yes If yes, list name and address:			upon incom	e from the l	ousiness?
Proj	✓ No Yes If yes, list name and address: perty Information (New & Transfel Do you own or lease the building?	r Applicants Onl		upan incom	e from the l	ousiness?
Proj	☑ No ☐ Yes If yes, list name and address: perty Information (New & Transfe	r Applicants Onl □Own ☑Lease	y).			ousiness?
Pro j a) b)	No Yes If yes, list name and address: perty Information (New & Transfe) Do you own or lease the building? Who owns the fixtures (for example, coolers, etc.)?	r Applicants Onl □Own ☑Lease LANDLORD	y).			ousiness?
Pro (a) b) c)	No Yes If yes, list name and address: perty Information (New & Transfe) Do you own or lease the building? Who owns the fixtures (for example, coolers, etc.)? Are you purchasing the stock and/or fixtures?	F Applicants Onl Own V Lease LANDLORD No Ves If yes, an	y).			ousiness?
Proj a) b) c) d)	No Yes If yes, list name and address: perty Information (New & Transfe Do you own or lease the building? Who owns the fixtures (for example, coolers, etc.)? Are you purchasing the stock and/or fixtures? Total amount paid for business Total amount paid for goodwill of the business Goodwill comprises the reputation and customer rel	F Applicants Onl □Own ☑Lease LANDLORD ☑No ☐Yes If yes, an \$ 0.00 \$ 0.00 ationships of an existing I	y). mount paid \$	he price you	pay for the	
Proj a) b) c) d) e)	Pority Information (New & Transfe) Do you own or lease the building? Who owns the fixtures (for example, coolers, etc.)? Are you purchasing the stock and/or fixtures? Total amount paid for business Total amount paid for goodwill of the business Goodwill comprises the reputation and customer rel fair market value of all of the rest of the assets of the	FApplicants Onling Own Vease LANDLORD Ves If yes, and \$0.00 \$0.00 ationships of an existing less business, the excess may	y) mount paid \$ business. If the	he price you ed goodwill.	pay for the	
Proj a) b) c) d)	No Yes If yes, list name and address: perty Information (New & Transfe Do you own or lease the building? Who owns the fixtures (for example, coolers, etc.)? Are you purchasing the stock and/or fixtures? Total amount paid for business Total amount paid for goodwill of the business Goodwill comprises the reputation and customer rel	FApplicants Onling Own Vease LANDLORD Ves If yes, and \$0.00 \$0.00 ationships of an existing less business, the excess may	y) mount paid \$ business. If the	he price you ed goodwill.	pay for the	
Proj a) b) c) d) e)	Perity Information (New & Transfe) Do you own or lease the building? Who owns the fixtures (for example, coolers, etc.)? Are you purchasing the stock and/or fixtures? Total amount paid for business Total amount paid for goodwill of the business Goodwill comprises the reputation and customer rel fair market value of all of the rest of the assets of the Have you made arrangements with the seller for pay se Information (New & Transfer Ar	FApplicants Onling Own Dease LANDLORD No Pes If yes, and \$0.00 \$0.00 ationships of an existing Inches of the excess may ment of personal propert	mount paid \$ business. If to be consider y taxes?	he price you ed goodwill. No 📝 Yes	pay for the	business exceeds the
Proj a) b) c) d) e) f)	Po Yes If yes, list name and address: perty Information (New & Transfe) Do you own or lease the building? Who owns the fixtures (for example, coolers, etc.)? Are you purchasing the stock and/or fixtures? Total amount paid for business Total amount paid for goodwill of the business Goodwill comprises the reputation and customer rel fair market value of all of the rest of the assets of the Have you made arrangements with the seller for pay Se Information (New & Transfer Ar Date lease begins 11/01/2020 Ends 10/31/2	FApplicants Onling Own Dease LANDLORD No Pes If yes, and \$0.00 \$0.00 ationships of an existing Inches of the excess may ment of personal propert	mount paid \$ business. If to be consider y taxes?	he price you ed goodwill. No 📝 Yes	pay for the	business exceeds the
Proj a) b) c) d) e) f)	Po Yes If yes, list name and address: perty Information (New & Transfe) Do you own or lease the building? Who owns the fixtures (for example, coolers, etc.)? Are you purchasing the stock and/or fixtures? Total amount paid for business Total amount paid for goodwill of the business Goodwill comprises the reputation and customer rel fair market value of all of the rest of the assets of the Have you made arrangements with the seller for pay Se Information (New & Transfer Ar Date lease begins 11/01/2020 Ends 10/31/2 Monthly rental \$ 15000.00	F Applicants Onl Own Lease LANDLORD No Yes If yes, and showing leads on the excess may ment of personal propert oplicants who are 2030	mount paid \$ business. If to be consider y taxes?	he price you ed goodwill. No 📝 Yes	pay for the	business exceeds the
Pro(a) b) c) d) e) f) Leae	Perity Information (New & Fransfe) Do you own or lease the building? Who owns the fixtures (for example, coolers, etc.)? Are you purchasing the stock and/or fixtures? Total amount paid for business Total amount paid for goodwill of the business Goodwill comprises the reputation and customer religir market value of all of the rest of the assets of the Have you made arrangements with the seller for pay See Information (New & Transfer Ar Date lease begins 11/01/2020 Ends 10/31/2 Monthly rental \$15000.00 Do you have an option to renew the lease?	PApplicants Onling Control of Presentations of the excess may ment of personal propertions of the policants who are 2030	mount paid \$ business. If to be consider y taxes? eleasing	he price you ed goodwill. No	pay for the	business exceeds the
### Proj	Do you own or lease the building? Who owns the fixtures (for example, coolers, etc.)? Are you purchasing the stock and/or fixtures? Total amount paid for business Total amount paid for goodwill of the business Goodwill comprises the reputation and customer rel fair market value of all of the rest of the assets of the Have you made arrangements with the seller for pay Se Information (New & Transfer Ar Date lease begins 11/01/2020 Ends 10/31/2 Monthly rental \$ 15000.00 Do you have an option to renew the lease? No you be part of the part of the part of the seller for pay	Applicants Onling I Lease LANDLORD No Yes If yes, and \$0.00 \$0.00 ationships of an existing I to business, the excess may ment of personal propert applicants who are 2030 Yes by without the consent of	mount paid \$ business. If the consider y taxes? e leasing the owner?	he price you ed goodwill. No	pay for the	business exceeds the
Pro(a) b) c) d) e) f) Leae	Perity Information (New & Fransfe) Do you own or lease the building? Who owns the fixtures (for example, coolers, etc.)? Are you purchasing the stock and/or fixtures? Total amount paid for business Total amount paid for goodwill of the business Goodwill comprises the reputation and customer religir market value of all of the rest of the assets of the Have you made arrangements with the seller for pay See Information (New & Transfer Ar Date lease begins 11/01/2020 Ends 10/31/2 Monthly rental \$15000.00 Do you have an option to renew the lease?	Applicants Onling I Lease LANDLORD No Yes If yes, and \$0.00 \$0.00 ationships of an existing I to business, the excess may ment of personal propert applicants who are 2030 Yes by without the consent of	mount paid \$ business. If the consider y taxes? e leasing the owner?	he price you ed goodwill. No	pay for the	business exceeds the

Lease Information (Continued)
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 Does the present owner or occupancy object to the granting of your license? No Yes If yes, explain
Change of Agent Applicants Only
Have there been any changes to the floor plan since the last application was submitted? No Yes If no, a new floor plan is not required. If yes, submit a new floor plan and explain the change(s):
Signature
Signature of Sole Proprietor, Partner or 20% or More Shareholder (If no 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: Detailed floor plan If a restaurant, copy of the menu

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FOOD DEALER LICENSE PLAN OF OPERATION

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

Legal Entity Name: 6315 STARK INC
Premises Address: 6315 W FOND DU LAC AVE, MILWAUKEE, 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? Land 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%
25% or More AND:
 Restaurant items (meals) will be sold — Complete this application and also contact DATCP. 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?
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? \(\sigma\) No \(\begin{array}{c}\) Yes (Includes dairy products such as milk, cheese, and ice cream, fish, shellfish, meat, poultry) If yes, list the types of food items: \(\begin{array}{c}\) MILK, CHEESE, ICE CREAM, MEAT, PIZZA,EGGS

ccl-foodplan 2/28/19

SECTION 4 DETAILS OF	OPERATION						
Will you have seating on site for o	ining? 🔀 No	Yes					
Will you be doing any catering?	X No	Yes					
Will you be doing any delivery?	X No	Yes					
Will you have outdoor activities?	∑ No	Yes - Check all that apply: Bar Cooking/Grilling Dining					
Will you have a drive thru window	w? ズ No	Yes - Are hours different from inside? No Yes					
		If Yes, provide drive thru hours:					
Will scales or barcode scanners b	e used? 🔳 No	Yes - You must also apply for a Weights & Measures License.					
SECTION 5 ADDITIONA	LSITES						
Where will food be prepared and	/or sold?						
At a single site At m	altiple sites: How r	many?(for example, a hotel with several dining rooms or bars)					
If multiple sites, attach a Food De	aler Additional Site	Addendum (ccl-foodadd) for each additional site.					
SECTION 6 CONSTRUCT	TION OR CHANGE	S					
Are you planning any construction	n, remodeling or ed	quipment changes?					
No If No, SKIP to Section	on 8						
Yes If Yes, check all that	apply: New	construction of a building Renovation or remodeling					
	Cons	struction changes to existing building Equipment changes only					
Provide a brief description of the	changes:						
Start date:							
Name, Address & Phone Number	of Architect:						
	- развания						
Name, Address & Phone Number	of Contractor:						
	· · · · ·						
SECTION 7 ALCOHOL B	EVERAGES						
Are you applying for an alcohol b	everage license?						
☐ No If No, SKIP to Section	n 8						
Yes If YES, if your food i	Resident Control of the Control of t						
Immediately	At the same time	e as the alcohol license					
SECTION:8 ACKNOWLE	DGEMENTS & SIG	SNATURE:					
You must initial each item confin	ning your understa	nding:					
b on dense and the Head	hh Dana tá cataon	the annual content of the content of					
before the license ma		t conduct an inspection and advise the License Division of their approval					
Lunderstand I must of	otaín an occupancy	permit from the Department of Neighborhood Services and an inspection					
may be required. Nei	gnbornood Services	must advise the License Division of their approval before the license may					
1 -24:^	ict alderperson will	review and either support or object to my application. If he/she objects, I pefore the Licenses Committee. The Licenses Committee will then make a					
recommendation to the	re Common Counci	I. 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.							
		the license has been issued and posted in the establishment.					
Signature of Soile Proprietor, Partner, or 20% Shareholder:							
	, 2. 247021101011	Olmos II					
Signature of Additional Partner:	\t	Cupu co					

ccl-wmplan 1/9/18

MILWAUKEE

WEIGHTS & MEASURES 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 license@milwaukee.gov

Legal Entity Name:	6315	Stark	Inc			
Premise Address:	63/5	W Fond		Ave. A	lilwauke, WI	532 18
Type of Busines	iS				,	
Provide a brief descrip	ition of the estab	olishment/business:	Liquor S	Store		
Other licenses may be	required depend	ding on the type of busi	iness you are opera	ting.		
Litter & 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:						
Signature						
Signature of Sole Proprie (If there are no 20% Corporate Officer-pr	or more sharehold	ders,	Signature	of additional pari	tner or 20% or more shareh	older
This form must be Application, and app	submitted wi propriate fee. F	ith the Business Lic orms can be obtained	ense Application d online at <u>www.</u>	, Weights & <u>milwaukee.go</u>	Measures License Sυ ν/licenses	ıpplemental

