

CITY OF MILWAUKEE OFFICE OF THE CITY CLERK

Tuesday, August 31, 2021

COMMITTEE MEETING NOTICE

AD 05

WALIA, Ajit S, Agent Spring Financials LLC 8210 W Capitol DR Milwaukee, WI 53222

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

Monday, September 20, 2021 at 09:15 AM

Regarding:

Your Public Entertainment Premises License Application Requesting 5 Amusement Machines as agent for "Spring Financials LLC" for "W-Pantry-41 #82" at 8210 W Capitol DR.

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/733111181. If you wish to in, please call https://global.gotomeeting.com/join/733111181.

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

BY:

Jim Cooney

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

Tuesday, August 31, 2021

COMMITTEE MEETING NOTICE

AD 05

WALIA, Ajit S, Agent Spring Financials LLC 4725 N 159th St Brookfield, WI 53005

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Monday, September 20, 2021 at 09:15 AM

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JIM OWCZARSKI, CITY CLERK

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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

MILWAUKEE POLICE DEPARTMENT LICENSING

CRIMINAL RECORD/ORDINANCE VIOLATION/INCIDENTS SYNOPSIS

DATE: 07/02/21 LICENSE TYPE: PEP NEW: RENEWAL:		No. 326157 Application Date: 07/01/21
License Location: 8210 W Capitol Dr Business Name: Spring Financials		
Licensee/Applicant: WALIA, Ajit S (Last Name, First Name, MI) Date of Birth: 08/22/1960		
Home Address: 4725 N 159 th St City: Brookfield Home Phone:	State: WI	Zip Code: 53005
This report is written by Police Officer Monre	eal, assigned t	o the License Investigation Unit, Days.
The Milwaukee Police Department's investig	jation regardin	g this application revealed the following:
 On 09/14/2019 the applicant was cite Sale of Cigarette to Minor/Underage. 		f Milwaukee at 1202 W. Highland Av for
Charge: Sale of Cigarette to Minor/Und Dismissed without Prejudice Sentence: Date:	erage	
Case: 19047624		
Item #1 updated with new court date on 11/0		=======================================

2. On 11/09/2019 a 17-year-old working in conjunction with the Milwaukee Police and the WI WINS Tobacco Initiative was able to purchase a Black and Mild cigar from the clerk at 8210 W. Capitol Dr. The clerk did ask for ID but made the sale anyway. The clerk stated he must have read the ID wrong because of poor eye sight. The applicant was mailed a citation for Sale of Cigarette to Minor/Underage. The citation was Dismissed.

3. On 04/20/21 Milwaukee Police conducted a License Premise Check at W-Pantry, 8210 W. Capitol Dr., in regards to information received they had entertainment machines operating on the premise without a Public Entertainment License. Officers did observe 5 machines illuminated and operating, two of which were being played by customers. The employee was advised of the need to obtain the license prior to operating the machines. The employee was cooperative and agreed to unplug the machines until the license was obtained. No other violations were observed,

Milwaukee Police Department

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

Case #:211100070

OtherEvent #: 21-LP-1081

Incident

8210 W CAPITOL DR MILWAUKEE, WISCONSIN 53222

Incident Date/Time::

04/20/2021 11:20:00

CAD Number::

211100851

District::

7

Beat::

720

Reporting Area::

1769

Business Agent (1)

WALIA, AJIT S

Person Involvement: (Must choose

Agent

AGENT from drop down): DOB::

08/22/1960

Sex::

MALE

Race::

AMERICAN INDIAN OR ALASKAN NATIVE

Phone 1 Number::

(414)-588-0554

Phone 1 Type::

Phone

Address::

4725 N 159TH ST

City::

BROOKFIELD

State::

WISCONSIN

Zip Code::

53005

Licensed Persons Involved (1)

CHAND, TARLOK

Person Involvement::

Merchant

DOB::

10/25/1974

Sex::

MALE

Race::

WHITE

Address::

1297 Balmoral Ct

City::

Brookfield WISCONSIN

State:: Zip Code::

53005

Licensed Premise Data (1)

W-PANTRY

Address::

8210 W CAPITOL DR

City::

MILWAUKEE

State::

WISCONSIN

Zip Code::

53222

License Type::

Filling Station

Licensee Notification Was Made::

Yes

Licensee Notified Date/Time::

04/20/2021 11:20:00

Business Was Cited For Violation:: No

Licensee was cooperative: (if not

explain in narrative):

Printed By Monreal, Penny

Milwaukee Police Department

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

Case #:211100070

OtherEvent #: 21-LP-1081

Licensee or Manager was on premises at time of violation/incident::

Yes

Narrative (1)

INITIAL INVESTIGATION

Brown, Penny A 014805

04/20/2021

This report is written by PO Penny MONREAL assigned to License Investigation Unit.

On Tuesday, April 20, 2021, PO Xavier BENITEZ and I conducted a License Premise Check at 8210 W. Capitol Dr., W-Pantry, regarding "entertainment" or "gaming" machines on the premise without a Public Entertainment Premise License (PEP). On arrival officers observed 5 machines, two were being played by customers. Officers introduced ourselves to the cashier (Tarlok CHAND A/M 10/25/74),and requested to see the license's pertinent to the establishment. CHAND was cooperative and provided a valid Food, Tobacco, and Filling Station, however, did not have a Public Entertainment Premise License. CHAND was advised of the need to obtain a PEP License and it was suggested he unplug all the machines until the License was obtained. CHAND was cooperative and stated he would comply.

I then contacted the agent (Ajit S. WALIA) via the telephone and advised him of the situation. WALIA was very cooperative and stated he would comply immediately.

Officer (2)

Reporting Officer:

Brown, Penny A (014805)

04/20/2021 13:54:00

Section: (Work Location):

27

Approving Officer:

Raden, Chad M (010032)

04/21/2021 12:48:00

Section: (Work Location):

27



Tuesday, August 31, 2021



Notice of Public Hearing

blank notice

WALIA, Ajit S, Agent W-Pantry-41 #82 at 8210 W Capitol DR Public Entertainment Premises License Application Requesting 5 Amusement Machines

Monday, September 20, 2021 at 9:15 AM

To whom it may concern:

The above application has been made by the above named applicant(s). This requires approval from the Licenses Committee and the Common Council of the City of Milwaukee. The hearing before the Licenses Committee will take place virtually on 9/20/2021 at 9:15 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.

CURRENT OCCUPANT CURREN	OCCUPANT	MAIL ADDRESS	CITY STATE ZIP MILWAUKEE, WI 53222-1803
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CURRENT OCCUPANT 8312 W CAPITOL DR MILWAUKEE, WI 53222-1802			
CORRENT OCCOTANT	CURRENT OCCUPANT		
blank notice	CURRENT OCCUPANT		MILWAUKEE, WI 53222-1802
	blank	notice	

Total Records: 29

Radius: 250.0 feet and Center of Circle: 8210 W Capitol Dr

ccl-busplan 5/12/2020

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: license@milwaukee.gov

1. Type of Business
Applying for:
Self Service Laundry Massage Establishment Filling Station
Other (supplemental application for specific license also required)
Provide a detailed description of the type of business you plan on operating:
Gas Station with cig+ tobacco, weights + measures, food dealer and out
Do you have any experience operating this type of business? No X Yes If yes, explain: 35 years operating various
Do you have any experience operating this type of business? \[\begin{align*} No \text{\tex{\tex
a. Proposed Opening Date: NA - Alseady open
b. Is this premise under construction? XNo Yes If yes, list estimated completion date:
a lethic a franchica? N. No. T. Yes
d. Is this premises currently licensed? No Xyes If yes, list type of license: Filling Station, Gg of Tobacco, Tood Dealer Weights + 96
e. Is the current licensee operating? \(\sum \text{NO} \sum \text{NO} \sum \text{NS} \text{ for no, list date closed.} \)
f. Do you have future plans for other businesses, licenses or permits at this location? No Yes
If yes, explain: Adding a Public entertainment license for games
g. Have you previously held an Extended Hours License in Milwaukee? No Yes
If yes list address(es):
h. Are other businesses operating in the same building? \(\sum \text{No X Yes If yes, describe: \(\sum \text{xx return + accounting office} \)
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
a. Are there designated outdoor smoking areas? No Yes If yes, describe:
Locations Toxide deproper back behind counter, to
b. Number of Garbage Cans: Inside: 1 Locations: 4t Demps and against building
Mo Ves If yes describe:
the promises of the promises of
Maste Management Tother:
e. Name of solid waste contractor:Advanced Disposal Estwaste Management

5. Security						
a. Are there onsite parking	spaces? No XYes	if yes, how i	many? and	describe	the parking security	
plan: <u>Security</u>	plan: Security cameras over entire lot *Manager deals with any is there a loading zone? No Yes If yes, describe the loading area security plan:					
b. Is there a loading zone?	Is there a loading zone? No Yes If yes, describe the loading area security plan:					
Will you have security personnel on premise? No Yes If yes, how many? and answer the following:						
What are their responsibilities?						
Is security equipm	nent used? 🛚 No 🔲 Y	es If yes, de	escribe			
List their licensing	, certification, or trainin	g credentials	1.2		11 5 51.5	
d. Will there be security ca	d. Will there be security cameras? \(\sum \) No \(\sum \) Yes if yes, how many? \(\frac{16}{16} \) and list locations: \(\frac{1}{10} \) Side, \(\frac{5}{10} \)					
e. Will searches/identificat	ion checks be done upo	n entry? 💢	No Yes If yes, describ	e		
5. Percentage of Sales					to the second se	
Alcohol%	Food 40 30	%	Secondhand Merchandise		Precious Metals & Gems	
Entertainment 5 %	Cigarettes 10 20	<u>ヷ</u> %	%		%	
Pawnbroker Activity%	Salvaged Materials (such as scrap metal)	%	Personal Services (such as body piercing, salon, tailor tanning, etc.)	r,	Other 45 % Describe: Fiel	
7. Businesses/License	s on the Premise	s (check				
Type 1				·		
Full Service Restaurant	Cafe/Coffee Shop	Deli or l	Fast Food Restaurant		e/Fraternal/Veterans Club	
☐ Night Club	☐ Tavern	Cocktai	l Lounge	Teen C	Club	
Banquet Hall	Sports Facility	Bowling	g Alley			
☐ Hotel/Motel : Number of I	loors:	Roomin				
Number of I	Rooms:		Number of Rooi	ms:		
Type 2	Corner Store	Superm	arket	☐ Conver	nience Store	
Liquor Store	Amusement/Phono	-		_	ing, Salvage or Towing	
Gas Station			no.	-		
Used Car Dealer	Personal Service E (such as tattoo bus		on, tailor, etc.)	Record	ding Studio	
What other licenses/permits wi					,	
Occupancy Permit	Cigarette & Tobacco 🔀 🤇	Gas Station	Extended Hours Class "E	3" Tavern	Weights & Measures	
Secondhand Dealer	Precious Metal & Gem	Other: 10	od dealer, Pul	stic e	entertainment	
8. Legal Capacity (or						
			14-286-8211 if you have que	etione 1		
Capacity (Call	the Milwaukee Developme	in Center at 4.	TH-500-05TT II YOU HAVE YUE			

9. Premises Do	escription						
a. Identify all area	a. Identify all area(s) of the premises that will be used in operating this business (include areas used only for storage): ☑1 st Floor □2 nd Floor □Basement Storage □Patio □Beer Garden □Sidewalk Café □Deck □Rooftop						
	□Other: Describe:						
b. Describe Locati							
c. Nearest Major	Cross Street: 16th of	Capital Ur			<u></u>		
d. Describe Buildi	ng: Kree Standing Buildir	ng 🛗 Strip Mall 🔲 Other:	A				
e. Describe Premi	ses Structure: 🏿 Single Sto	ry Multi-Story - # of Sto	ries Cther:				
f. Describe Surrou	unding Area: 🕍 Commercia	l Residential Industr	ial 🗌 Other:				
g. Building Owner	Name: Spring hi	rancials LLC 210 W Capital	Phone Number: 414	- 593-067	<u>10</u>		
Building Owner	Address:	210 W Capital	Dr. Milwai	nee wi	<u> </u>		
10. Hours of O	peration & Custo	mers					
Will customers be ente	ering the premises? 🔲 No	☐ Yes			1		
Day of the Week	Proposed Hours of Operation:		Estimated Number of Customers	Potential Age Range	Class B Tavern Applicant Only:		
Day of the Week	Open Time (include a.m. or p.m.)	Close Time (include a.m. or p.m.)	expected each day	of Customers	Age Restriction (If none, write 'None')		
Sunday	5am	12am	300	21-100			
Monday	И	И	<i>30</i> 0	И			
Tuesday	И	ll l	300	ll			
Wednesday	U	11	300	11			
Thursday	11	l l	300	И			
Friday	4	e l	400	U			
Saturday	И	//	400	11			
		red for any convenience stor dio or restaurant which is op					
Alcohol Establishment Permitted Hours of Op		am to 9:00 pm Sunday thru am to 2:00 am Sunday thru		0 am Friday & Sat	turday		
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)						
Ant	So well	ors Sharpholder	Signature of additional p	partner or 20% or	more shareholder		
(If there are no 20	rietor, Partner, or 20% or m 0% or more shareholders, -print name/title and sign)		Signature of additional p	January 1 2070 01			



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: Spring Financials LLC					
Premise Address: 8210 W Capital Dr. Milwaukee WI 53222					
Proximity of Premises to Church, School, Daycare Center or Hospital					
Is the	e building within 300 feet of any church, school, daycare center or hospital? XNO Yes				
"Ser	vice Bar Only" Designation				
Serv	oplying for Class B or C license, are you applying for "Service Bar Only"? No Yes vice Bar Only means customers cannot sit at the bar. Alcohol is served to employees who serve patrons seated at tables. stools, chairs or other articles of furniture shall be placed at the service bar for patrons to sit upon.				
Busi	iness Information				
a)	Are you taking out this application for anyone that may not be eligible for a license?				
b)	If yes, list their name and address: Will the agent, a partner or the individual licensee be conducting the day-to-day operations of the business? If no, list the name and address of the person(s) who will: Satwinder Singh Brookfeld WI 53005				
c) d)	Class B Applicants: If the agent, a partner or the individual licensee will not be conducting the day-to-day operations of the business, the person(s) listed above must obtain a Class B Managers license. Does anyone else have money invested or any other interest in this business? If yes, explain: Have you made an agreement with anyone to repay any loan or any other payments based upon income from the business? Yes If yes, list name and address:				
Pro	perty Information (New & Transfer Applicants Only)				
a)	Do you own or lease the building? ☐ Lease				
b)	Who owns the fixtures (for example, coolers, etc.)? Building Cuner				
c)	Are you purchasing the stock and/or fixtures?				
d)	Total amount paid for business \$				
e)	Total amount paid for goodwill of the business \$				
	Goodwill comprises the reputation and customer relationships of an existing business. If the price you pay for the business exceeds the fair market value of all of the rest of the assets of the business, the excess may be considered goodwill.				
f)	Have you made arrangements with the seller for payment of personal property taxes? No Yes				
Lease Information (New & Transfer Applicants who are leasing the premises only)					
a)	Date lease begins Ends Monthly rental \$				
b)	Monthly rental \$				
c)	Do you have an option to renew the lease? No Yes				
(d)	Does your lease allow for assignment to another party without the consent of the owner? \(\begin{align*}\) No \(\begin{align*}\) Yes For what length of time have you been guaranteed occupancy (number of years)? \(\begin{align*}\)				
(e)	TOT WIND THE PORT FOR DECIT Businettees acceptancy frames of Louist.				

Lea	se Information (Continued)
f) g)	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
Cha	ange of Agent Applicants Only
	ve there been any changes to the floor plan since the last application was submitted? No Yes no, a new floor plan is not required. If yes, submit a new floor plan and explain the change(s):
Sig	nature
_	ature of Sole Proprietor, Partner or 20% or More Shareholder 20% or more Shareholder, Corporate Officer - print name/title and sign)
(II II)	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

ccl-pepapp 8/23/18



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: 8210 W CAPITAL DR. MILLOCKE LUIS 53272						
PREMISES ADDRESS: 8210	W CAPITAL I	or milesapes L	US 53222			
TYPES OF ENTERTAINMENT (CH	ECK ALL THAT APPLY)		,			
☐ 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?	Poetry Readings	Patrons Dancing	Karaoke			
Other:						
Entertainment Outdoor Closing Hours:	10:00pm Sunday-Thursday; 12:00d Is established by the Common Cou	am Friday & Saturday; unless a different tin ncil in its approval of the licensee's plan of	ne, either earlier or later, operation.			
PROMOTERS/SOUND AMPLIFIC	ATION					
Will promoters ever be used for any of	the entertainment? V No	Yes If Yes, Describe:				
		Andrew Market Ma	Andrew Control of the			
At any time will sound amplification be	used? \\ \ No \ Yes IT Yes, \	escribe:				
LEGAL CAPACITY OF PREMISES						
Premises License. If you would like to here: 25 of Few 2 If approved, the	request the license be approved	with a lower capacity than that listed	above, indicate the lower capacity			
ACKNOWLEDGEMENT/SIGNAT						
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.						
Amt Svon well (Mnoz) Signature of Sole Proprietor, Partner or 20% or More Shareholder (If no 20% or more Shareholder, Corporate Officer - print name/title and sign) Ant SINGH WALLA						
Office Use Only: Initials: Filed: App : Only PEP? No Yes If Yes, Queue to MPD and Email Mgrs/Team Lead (must be heard w/in 60 days)						

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