



CITY OF MILWAUKEE
OFFICE OF THE CITY CLERK

Tuesday, September 14, 2021

COMMITTEE MEETING NOTICE

AD 12

Brian D Mitchell

8606 W Hampton Av

Milwaukee, WI 53225

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

Tuesday, September 28, 2021 at 09:20 AM

Regarding: Your Food Dealer and Food Peddler License Applications for "Gladys Treats" at 811 W Historic Mitchell St.

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/284170701>. If you wish to call in, please call **+1 (786) 535-3211** and use Access Code: 284-170-701.

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.

MILWAUKEE POLICE DEPARTMENT LICENSING

CRIMINAL RECORD/ORDINANCE VIOLATION/INCIDENTS SYNOPSIS

DATE: 07/14/21

LICENSE TYPE:

NEW:

RENEWAL:

No. 326730

Application Date: 07/12/21

License Location:

Business Name:

Licensee/Applicant: Mitchell, Brian D
(Last Name, First Name, MI)

Date of Birth: 10/19/89

Home Address: 811 W. Historic Mitchell St.

City: Milwaukee

State: WI Zip Code: 53204

Home Phone:

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

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

1. On 07/12/12 the applicant was charged in Milwaukee County with Carry Conceal Weapon (Misdemeanor)

Charge: Carry Conceal Weapon
Finding: Guilty
Sentence: 6 Months House of Correction
Date: 12/11/13
Case: 2012CM003734

2. On 02/03/13 the applicant was charged in Milwaukee County with Possession of THC (Misdemeanor) Bail Jumping (Misdemeanor)

Charge1: Possession of THC
2: Bail Jumping
Finding: Dismissed but read in
Sentence:
Date: 12/11/13
Case: 2013CM000092

3. On 09/02/13 the applicant was cited by Shorewood Police for Damage to Property.

Charge: Damage to property
Finding: Guilty
Sentence: Fine
Date: 10/02/13
Case: 16695

4. On 09/05/13 the applicant was charged in Milwaukee County for Credit Card-Fraudulent Use (Misdemeanor) Entry to Locked Vehicle (Misdemeanor) – Party to a Crime Criminal Damage to Property (Misdemeanor) - Party to a Crime Theft- Party to a Crime (Misdemeanor) Bail Jumping (Misdemeanor)

Charge1: Credit Card-Fraudulent Use - PTAC
2: Entry to Locked Vehicle - PTAC
3: Criminal Damage to Property - PTAC
4: Theft - PATC
5: Bail Jumping
Finding: Charged Dismissed but Read In
Sentence:
Date: 12/11/13
Case: 2013CM003998

5. On 09/06/13 the applicant was charged in Milwaukee County for 2 counts Criminal Damage to Property – Party to a Crime (Misdemeanor) 2 counts Entry to locked Vehicle – Party to a Crime (Misdemeanor) Theft Party to a Crime (Misdemeanor)

Charge1: 2 counts Criminal Damage to Property – PTAC
2: 2 counts Entry to locked Vehicle – PTAC
3: Theft - PTAC
Finding: Dismissed but Read In
Sentence:
Date: 12/11/13
Case: 2013CM004020

6. On 09/11/13 the applicant was charged in Milwaukee County for Possess Firearm – Contrary to Injunction.

Charge: Possess Firearm - Contrary to Injunction
Finding: Guilty
Sentence: 2 Years State Prison, 2 Years Supervision
Date: 12/11/13
Case: 2013CF004179

7. On 08/17/17 the applicant was charged in Outagamie County for Disorderly Conduct – Repeater.

Charge: Disorderly Conduct – Repeater
Finding: Guilty
Sentence: 90 Days Local Jail
Date: 08/08/19
Case: 2017CF000719

8. On 06/05/19 the applicant was charged in Washington County for Fin Trans. Card – Fraudulent Use (Misdemeanor) Credit Card – Fraudulent Use (Misdemeanor) Misappropriate Id Info – Obtain Money (Felony) 3 counts Bail Jumping (Felony)

Charge1: Fin Trans. Card – Fraudulent Use
2: Credit Card – Fraudulent Use
3: Misappropriate Id Info – Obtain Money
4: 3 counts Bail Jumping
Finding: Guilty
Sentence: 60 days Local Jail, 2 Years Probation
Date: 10/24/19
Case: 2019CF000260

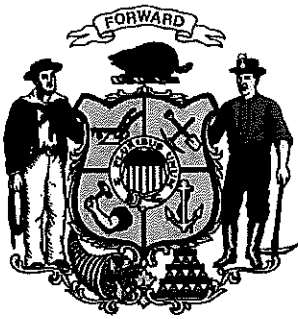
9. On 07/12/19 the applicant was cited by Oak Creek Police for Resisting or Obstructing an Officer.

Charge: Resisting or Obstructing an Officer
Finding: Guilty
Sentence: Fine
Date: 08/13/19
Case: 8780SNQ7QB

10. **The applicant has the following past due fines owed to Milwaukee Municipal Court:**

16060899 Operating While Revoked \$124.00 due 02/06/17 (Warrant Status)
16060900 Failure to Obey Traffic Officer/ Signal \$ 98.80 due 02/06/17

11. The applicant is on probation for item #7. Email Notification to the Wisconsin Department of Corrections on 07/14/21 requesting they provide information to the License Division regarding the probation/parole status and the end date of the status.



Wisconsin Department of Corrections

Division of Community Corrections | Region 3 Office

Date:
To: Milwaukee Common Council/Licensing Division
From:

It was brought to my attention that a client under our supervision, Brian Mitchell, has applied for a Food Dealer-Restaurant license from the City of Milwaukee. Client Brian Mitchell is currently on an 3 year Probation term that is scheduled to discharge on 10/24/22 for the offense of Ct. 1 Fin. Trans. Card Fraud Use, Ct. Credit Card-Fraudulent Use, and Ct. 4 Bail-Jumping Felony.

This letter is to inform you that such a licensure would not be in violation of their rules/conditions of supervision. If circumstances change, we will take measures appropriately, including action that may affect such licensure. We made this decision based in part, on the following information:

A - Residence Stability: Client has maintained residence stability **Yes**.

B - Reporting History: Client has maintained required contacts with agent **Yes**.

C - Police Contact: Client has had police contact while on supervision **No**.

D - Overall level of cooperation: has client complied with referrals and services designed to address criminogenic needs **Yes**.

***** DCC recommends license not be granted due the following: (check one)**

- * License/employment has a direct nexus to committing offense. _
- * License/employment would have a negative impact on the client based on specific treatment needs. (HIPPA prohibits the disclosure of specific treatment needs)
- * Sex offenses.

In providing the information within this letter, the Department of Corrections assumes no liability for the Council's reliance on such information.

Sincerely,

Pamla Jones
P&P Agent

Corrections Field Supervisor



Tuesday, September 14, 2021



Notice of Public Hearing

blank
notice

MITCHELL, Brian D
Gladys Treats at 811 W Historic Mitchell St
Food Dealer and Food Peddler License Applications

Tuesday, September 28, 2021 at 9:25 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 9/28/2021 at 9:25 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	1664 S 8TH ST	MILWAUKEE, WI 53204-3422
CURRENT OCCUPANT	1712 S 9TH ST	MILWAUKEE, WI 53204-3518
CURRENT OCCUPANT	728 W MAPLE ST	MILWAUKEE, WI 53204-3522
CURRENT OCCUPANT	728A W MAPLE ST	MILWAUKEE, WI 53204-3522
CURRENT OCCUPANT	730 W MAPLE ST	MILWAUKEE, WI 53204-3522
CURRENT OCCUPANT	806 W HISTORIC MITCHELL ST	MILWAUKEE, WI 53204-3530
CURRENT OCCUPANT	809 W HISTORIC MITCHELL ST, 1	MILWAUKEE, WI 53204-3531
CURRENT OCCUPANT	809 W HISTORIC MITCHELL ST, 2	MILWAUKEE, WI 53204-3531
CURRENT OCCUPANT	812 W HISTORIC MITCHELL ST	MILWAUKEE, WI 53204-3530
CURRENT OCCUPANT	813 W HISTORIC MITCHELL ST	MILWAUKEE, WI 53204-3531
CURRENT OCCUPANT	814 W HISTORIC MITCHELL ST	MILWAUKEE, WI 53204-3530
CURRENT OCCUPANT	815 W HISTORIC MITCHELL ST	MILWAUKEE, WI 53204-3531
CURRENT OCCUPANT	830 W HISTORIC MITCHELL ST	MILWAUKEE, WI 53204-3530
blank	notice	

Total Records: 13

Radius: 250.0 feet and Center of Circle: 811 W Historic Mitchell St



BUSINESS LICENSE PLAN OF OPERATION

ccl-busplan 5/12/2020

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: 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)

Provide a detailed description of the type of business you plan on operating: A DONUT SNACK SHOP, WITH A MOBILE DONUT CART CABINET OUT FRONT AT LOCATION

Do you have any experience operating this type of business? No Yes If yes, explain:

2. Business Operations

- a. Proposed Opening Date: 08/01/21
- 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: RESTAURANT ICE CREAM
- 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? No Yes If yes, describe: HALAL Food Restaurant

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: _____
- b. Number of Garbage Cans: Inside: 4 Locations: 1 dining hall, 2 kitchen, 1 back door
Outside: 3 Locations: 1 front store, 2 Milwaukee City Cans Back Location
- 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: _____

5. Security

- a. Are there onsite parking spaces? No Yes If yes, how many? ~~_____~~ and describe the parking security plan: _____
- b. Is there a loading zone? No Yes If yes, describe the loading area security plan: MOST of Cardys Treats product can be delivered through front entrance, there is A Alley load zone back Do
- c. Will you have security personnel on premise? No Yes If yes, how many? _____ and answer the following:
 What are their responsibilities? _____
 Is security equipment used? No Yes If yes, describe _____
 List their licensing, certification, or training credentials _____
- d. Will there be security cameras? No Yes If yes, how many? 7 and list locations: 2 front, 3 inside Dining, 2 Back Door
- e. Will searches/identification checks be done upon entry? No Yes If yes, describe _____

6. Percentage of Sales (must total 100%)

Alcohol _____%	Food <u>100</u> %	Secondhand Merchandise _____%	Precious Metals & Gems _____%
Entertainment _____%	Cigarettes _____%		
Pawnbroker Activity _____%	Salvaged Materials _____% (such as scrap metal)	Personal Services (such as tattoo, body piercing, salon, tailor, tanning, etc.) _____%	Other _____% Describe: _____

7. Businesses/Licenses on the Premises (check all that apply):

Type 1

- Full Service Restaurant Cafe/Coffee Shop Deli or Fast Food Restaurant Private/Fraternal/Veterans Club
- Night Club Tavern Cocktail Lounge Teen Club
- Banquet Hall Sports Facility Bowling Alley
- Hotel/Motel: Number of Floors: _____ Number of Rooms: _____
 Rooming House: Number of Floors: _____ Number of Rooms: _____

Type 2

- Liquor Store Corner Store Supermarket Convenience Store
- Gas Station Amusement/Phonograph Distributor Recycling, Salvage or Towing
- Used Car Dealer Personal Service Establishment (such as tattoo business, hair salon, tailor, etc.) Recording 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. Legal Capacity (only if a Type 1 premises in #7 above)

Capacity 45 (Call the Milwaukee Development Center at 414-286-8211 if you have questions.)

9. Premises Description

- 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 Café Deck Rooftop
 Other: Describe: _____
- b. Describe Location: Major Thoroughfare Secondary Street Other: _____
- c. Nearest Major Cross Street: 6th ST
- d. Describe Building: Free Standing Building Strip Mall Other: _____
- e. Describe Premises Structure: Single Story Multi-Story - # of Stories 2 Other: _____
- f. Describe Surrounding Area: Commercial Residential Industrial Other: _____
- g. Building Owner Name: Hector Salina Phone Number: 414-234-6226
 Building Owner Address: unknown

10. Hours of Operation & Customers

Will customers be entering the premises? No Yes

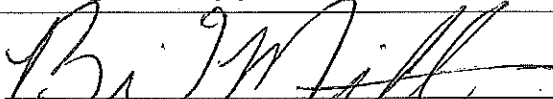
Day of the Week	Proposed Hours of Operation:		Estimated Number of Customers expected each day	Potential Age Range of Customers	Class B Tavern Applicant Only: Age Restriction (If none, write 'None')
	Open Time (include a.m. or p.m.)	Close Time (include a.m. or p.m.)			
Sunday	9 AM	PM 9			
Monday	9	9	60		
Tuesday	9	9			
Wednesday	9	9			
Thursday	9	9			
Friday	9	9			
Saturday	9	9			

An Extended Hours Establishment License is required for any convenience store, filling station, personal service establishment (such as tattoo, body piercing, salon, tailor, tanning, etc.), recording studio or restaurant which is open between the hours of 12:00 a.m. and 5:00 a.m.

Alcohol Establishments Class A: 8:00 am to 9:00 pm Sunday thru Saturday
 Permitted Hours of Operation: Class B: 6:00 am to 2:00 am Sunday thru Thursday, 6:00 am to 2:30 am Friday & Saturday

Entertainment Outdoor Closing Hours: 10:00pm Sunday-Thursday; 12:00am Friday & Saturday; unless a different time, either earlier or later, is established by the Common Council in its approval of the licensee's plan of operation.

11. Signature(s)



Signature of Sole Proprietor, Partner, or 20% or more Shareholder
 (If there are no 20% or more shareholders,
 Corporate Officer-print name/title and sign)

Signature of additional partner or 20% or more shareholder

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



FOOD DEALER LICENSE PLAN OF OPERATION

ccl-foodplan 2/28/19

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: Brian Demarco Mitchell

Premises Address: 811 W. Mitchell St Milwaukee WI 53204

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%

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? 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: _____

SECTION 4 DETAILS OF OPERATION

Will you have seating on site for dining? No Yes

Will you be doing any catering? No Yes

Will you be doing any delivery? No Yes

Will you have outdoor activities? No Yes - Check all that apply: Bar Smoking/Grilling Dining

Will you have a drive thru window? No Yes - Are hours different from inside? No Yes
If Yes, provide drive thru hours: _____

Will scales or barcode scanners be used? No Yes - You must also apply for a Weights & Measures License.

SECTION 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: _____

SECTION 7 ALCOHOL BEVERAGES

Are you applying for an alcohol beverage license?
 No If No, SKIP to Section 8
 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:

BU I understand the Health Department must conduct an inspection and advise the License Division of their approval before the license may be issued.

BU 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.

BU 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.

BU 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.

BU I will not operate my food business until the license has been issued and posted in the establishment.

Signature of Sole Proprietor, Partner, or 20% Shareholder: BU [Signature]

Signature of Additional Partner: _____



FOOD PEDDLER 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: Brian Demarco Kutchera

Premises Address: 811 W. Mitchell

1. Mobile Unit Description

Mobile Unit Type: Motorized Vehicle - includes a peddler truck, vehicle, or trailer that must be pulled by a motorized vehicle
 Pushed, Pedaled, or Pulled Vehicle - does not require a motorized vehicle to move from site to site
 Carried Container

Provide the following information:
 Color Yellow Length 5' L x 24" W x 30.5" H ft Width _____ ft Height _____ ft
 Make _____ Model Lil orbits Mobile Year _____
 License Plate Number (if applicable) _____ CABINET VIN (if applicable) _____

2. Food Operations

What type of food items will be sold?
 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.

All Applicants: Submit a menu or a list of food items sold. Complete menu of Food mobile CART IS
"Deep Fried Mini Donuts" - Nothing else sold on mobile CART

Will food processing be done on the mobile unit? No Yes

Processing includes assembling, grinding, cutting, mixing, baking, coating, stuffing, packing, bottling, grilling, canning, extracting, fermenting, distilling, pickling, freezing, drying, smoking, or packaging

Will food that requires temperature control be sold? No Yes Foods requiring temperature control include dairy products such as milk, cheese, and ice cream, fish, shellfish, meat, poultry

If yes, list the food items: _____

Do you intend to sell ice cream, popsicles, or other frozen confections? No Yes
 If yes, you must also obtain an Ice Cream Peddler License. Submit your Ice Cream Peddler License Application with this application. If anyone else will be operating the mobile unit, they must also obtain an Ice Cream Peddler License.

3. Service Base

Food peddlers must obtain a Food Dealer License for their service base. If you do not have a base, you must obtain a variance from the Health Dept.

Check one:
 I will obtain a food dealer license for my service base located in the City of Milwaukee.
 I will obtain a food dealer license for my service base located outside the city of Milwaukee in another WI municipality. I will submit copies of the base license and health inspection report completed within the previous 12 month period to the License Division.
 I will contact the City of Milwaukee Health Department to apply for a variance.

4. Affirmation of Understanding - License Needed to Operate & Requirements

Read and initial each item confirming your understanding:
 Health Department inspection and approval is required before my license may be issued.
 A license must be issued for my service base or a variance obtained before my Food Peddler License may be issued.
 The license must be issued and posted on the mobile unit prior to operating
 A current Food Peddler Itinerary must be on file with the License Division and at the service base.
 I must keep a written log of all days I am at the service base, including the time I arrive and leave.

Signature of Sole Proprietor, Partner, or 20% or more Shareholder _____
 Signature of Additional Partner _____

FOOD PEDDLER ITINERARY

Business Name: GLADYS TREATS

List all Vending Location Addresses	Check the Location Type	List the Days of the Week at this Location	Start Time (include am/pm)	End Time (include am/pm)
<u>811 W. Mitchell</u>	<input checked="" type="checkbox"/> Public Way <input type="checkbox"/> Event <input checked="" type="checkbox"/> Private Property <input type="checkbox"/> Seasonal Market	<u>W-S-Mon</u>	<u>9 AM</u>	<u>9 PM</u>
	<input type="checkbox"/> Public Way <input type="checkbox"/> Event <input type="checkbox"/> Private Property <input type="checkbox"/> Seasonal Market			
	<input type="checkbox"/> Public Way <input type="checkbox"/> Event <input type="checkbox"/> Private Property <input type="checkbox"/> Seasonal Market			
	<input type="checkbox"/> Public Way <input type="checkbox"/> Event <input type="checkbox"/> Private Property <input type="checkbox"/> Seasonal Market			
	<input type="checkbox"/> Public Way <input type="checkbox"/> Event <input type="checkbox"/> Private Property <input type="checkbox"/> Seasonal Market			
	<input type="checkbox"/> Public Way <input type="checkbox"/> Event <input type="checkbox"/> Private Property <input type="checkbox"/> Seasonal Market			
	<input type="checkbox"/> Public Way <input type="checkbox"/> Event <input type="checkbox"/> Private Property <input type="checkbox"/> Seasonal Market			
	<input type="checkbox"/> Public Way <input type="checkbox"/> Event <input type="checkbox"/> Private Property <input type="checkbox"/> Seasonal Market			
	<input type="checkbox"/> Public Way <input type="checkbox"/> Event <input type="checkbox"/> Private Property <input type="checkbox"/> Seasonal Market			
	<input type="checkbox"/> Public Way <input type="checkbox"/> Event <input type="checkbox"/> Private Property <input type="checkbox"/> Seasonal Market			
	<input type="checkbox"/> Public Way <input type="checkbox"/> Event <input type="checkbox"/> Private Property <input type="checkbox"/> Seasonal Market			
	<input type="checkbox"/> Public Way <input type="checkbox"/> Event <input type="checkbox"/> Private Property <input type="checkbox"/> Seasonal Market			
	<input type="checkbox"/> Public Way <input type="checkbox"/> Event <input type="checkbox"/> Private Property <input type="checkbox"/> Seasonal Market			

SIGNATURE(S)

I understand that any changes I wish to make must be reported to the City Clerk (License Division) on an updated Itinerary form before any changes can be implemented. I will keep a copy of my current Itinerary on my mobile until and at my service base all times.

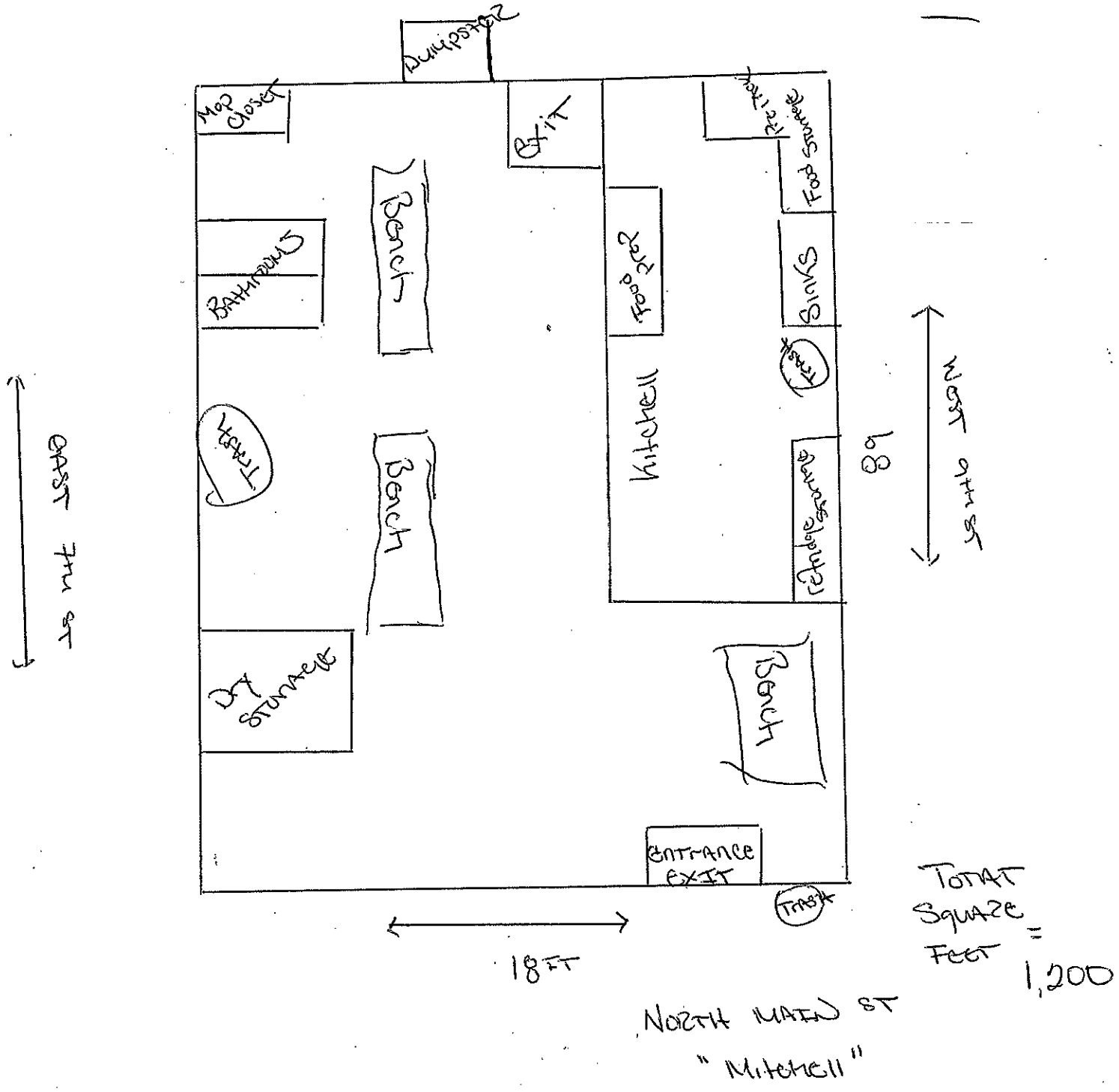
I understand that failure to maintain a current itinerary with the City Clerk (License Division) may result in progressive enforcement action including citation and permit suspension and/or revocation.

[Signature]
 Sole Proprietor, Partner, or 20% or more Shareholder

 Additional Partner

MAPLE ST

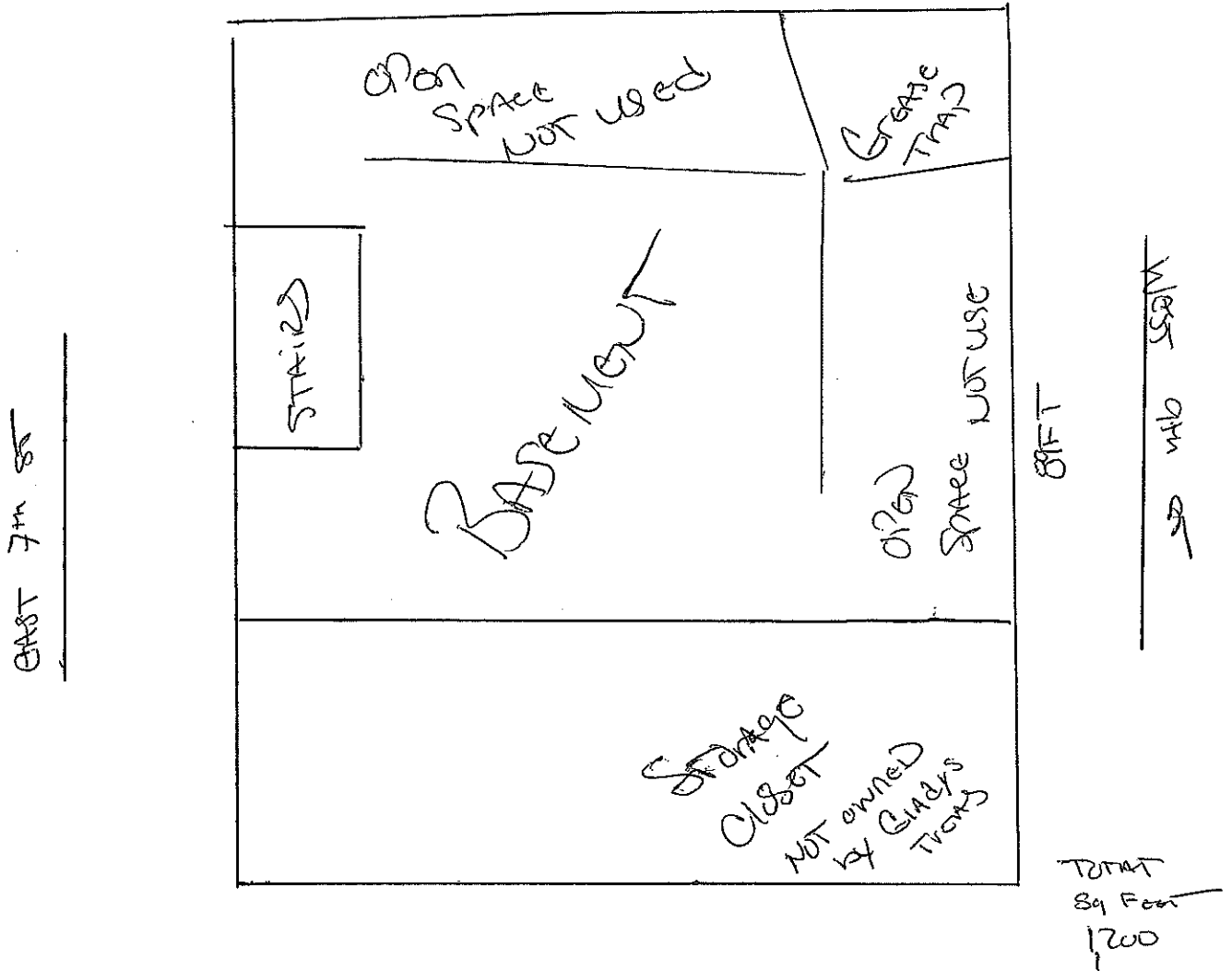
* FLOOR PLAN



Brian Demarco Mitchell
 Grady's TREATS
 811 W. Mitchell St Milwaukee, WI 53204
 July 8" 2021

(BASEMENT) FLOOR PLAN

MAPLE ST



NORTH MAIN Mitchell ST

18 FT

Brian Demarco Mitchell
Gladys Trays
811 W. Mitchell St Milwaukee 53204
07/8/21