AGENDA
LICENSING/PERMIT COMMITTEE
Kenosha Municipal Office Building – Room 202
Monday, December 9, 2013

6:30 p.m.

Chairman:	**Jesse Downing**	**Alderperson:**	**Curt Wilson**
Vice Chair:	**Patrick Juliana**	**Alderperson:**	**Chris Schwartz**
Alderperson:	**Anthony Kennedy**		

CALL TO ORDER
ROLL CALL

Approval of the minutes of the regular meeting held on November 11th, and the special meeting held on December 2nd, 2013.

NOTE: All licenses and permits are subject to withholding of issuance by the City Clerk as specified in Section 1.045 of the Code of General Ordinances.

1. Applications for new Operator's (Bartender) licenses, with a recommendation from the City Attorney to grant, subject to:
   - 0 demerit points:
   a. Alyssa Roberts
   b. Deion Scarbrough
   - 20 demerit points:
   c. Aja Kunza
   d. Mariah Martinez
   - 25 demerit points:
   e. Pamela Rolle
   f. Crystal Burdine
   g. Nassem Samhan
   - 30 demerit points:
   h. Lacey Rowsey
   I. Robert McDermott, III
   j. Nicholas Klein
   k. Erika Olivares
   - 40 demerit points:
   l. Marcos Perez
   - 50 demerit points:
   m. Ryan Krehbiel
   n. Andrew Smith
   o. Kristina Sorrentino
   p. Jacob Donohue
   q. Rebecca Hickey
   - 80 demerit points:
   r. Jaimie Budzinski
   s. Katherine Matalas

2. Applications for new Operator's (Bartender) licenses, with a recommendation from the City Attorney to deny, based on:
   - material police record:
   a. Eugene Schiaffino
   b. Iris Nunez
   c. Sam Jiminez

3. Application of Brandon Thomas for a new Operator's (Bartender) license, with a recommendation from the City Attorney to defer.

4. Applications for new Taxi Driver's licenses, with a recommendation from the City Attorney to grant, subject to:
- 20 demerit points:
a. Jason Mouzes
- 80 demerit points:
b. Robert Eyler

5. Applications for new Taxi Driver's licenses, with a recommendation from the City Attorney to deny, based on:
- material police record:
a. Richard Beiser

6. Applications for new Taxi Driver's licenses, with a recommendation from the City Attorney to defer.
a. Modeen Museitef
b. Antonio Turner

7. Renewal application of Food and Fun First, LLC, (The Good Garden Cafe and Wine Gallery) for an Outdoor Dining Area with Outdoor Extension License located at 5925 6th Ave., with a recommendation from the City Attorney to grant, subject to non-renewal revocation. (2nd District)

8. Application of Yolanda Green for a Public Entertainment License located at 3010 Roosevelt Road, Children's Recreational Club DF8, with no adverse recommendations. (8th District)

9. Application of Abdul Kaisani for a Probationary Cabaret License located at 3214 – 60th Street, Olympus Bar & Lounge, with no adverse recommendations. (11th District)

10. Renewal application of GNT Financial, LLC, for a Pawn Broker License located at 7944 Sheridan Road, #3, GNT Jewelry & Loan, with no adverse recommendations. (12th District)

11. Renewal applications for Secondhand Article Dealer's licenses, with no adverse recommendations:
a. Colosseum Games, LLC (Colosseum Games, 5719 - 75th St.) (14th District)
b. Jerome E. Binsfeld (JB Coins, 6040 – 39th Ave., Ste. 7) (15th District)
c. Keynote, Inc. (Music Go Round, 5708 A - 75th Street) (14th District)
d. Maggie Mae's, LLC, (Maggie Mae's, 1016 – 60th Street) (2nd District)
e. A Vintage Vault, LLC (A Vintage Vault, 3816 Roosevelt Road) (8th District)
f. Old Toys Live On, LLC (Old Toys Live On, 7619 Sheridan Rd.) (12th District)
g. John P. Fox (CJD Aversa Antiques, 619 – 58th St.) (2nd District)
h. Bonnie Mirkiewicz (Forever Grateful Resale Boutique & Art Gallery, 5000 – 7th Ave.) (2nd District)
I. Suburban Ore, LLC (Suburban Ore, 627 – 58th St.) (2nd District)
j. CD DVD Game, LLC (CD DVD Game Warehouse, 3717 – 80th Street) (14th District)

12. Renewal applications for Secondhand Jewelry Dealer's licenses, with no adverse recommendations:
a. Gold Diamond & Design, Inc. (Gold Diamond & Design, 10320 – 75th St., Ste. B) (16th District)
b. Jacob Sadoff (Midwest Goldbuyers, 3824 Roosevelt Rd.) (8th District)
c. Westown of Kenosha, Inc. (Westown Food & Liquor, 3203 – 60th Street) (3rd District)

13. Renewal application of Nowshad Irani for a Secondhand Jewelry Dealer's License located at 2400 – 52nd Street, Superior Gold Express, with a recommendation from the City Attorney to grant. (7th District)

14. Renewal applications for Secondhand Article and Secondhand Jewelry Dealer's licenses, with no adverse recommendations:
    a. Goldtronics, LLC (Jewelry & Electronics Exchange, 6212 – 22nd Ave.) (3rd District)
    b. Anita M. Wellman (Lucky 7 Thrift, 711 – 57th Street) (2nd District)
    c. Christopher Ruland (Roosevelt Road Antiques, 3720 Roosevelt Road) (8th District)
    d. Christine Isham (Monica's Thrift Shop, 1916 – 52nd Street) (7th District)
    e. GNT Financial, LLC (GNT Jewelry & Loan, 7944 Sheridan Road, #3) (12th District)

15. Renewal applications for Massage Therapist Licenses, with no adverse recommendations:
    a. Jadvyga Valiauga (Body Wise Therapeutic Massage, 4923 60th St.) (15th District)
    b. Lin Liang Wu (Shanghai Spa, 7944 Sheridan Road) (12th District)
    c. Cunjun Wang (Oriental Shiatsu Massage, 3717 – 52nd Street) (10th District)

16. Renewal applications for Kennel & Pet Shop Licenses, with no adverse recommendations:
    a. Kenosha County Humane Society (Safe Harbor, 7811 – 60th Ave.) (14th District)
    b. Wagin' Tail Resort (5403 – 52nd Street) (11th District)
    c. Puppy Tub & Motel, Inc. (Puppy Tub & Motel, 2419 – 52nd Street) (7th District)
    d. Puparotzi Palace, LLC (Puparotzi Palace, 7609 Sheridan Road) (12th District)
    e. Kindred Kitties, Ltd. (Kindred Kitties, 614 – 59th Street) (2nd District)
    f. Lemke & Lemke (Jim's Aquarium & Pets, 6205 – 75th Street) (14th District)
    g. Jo's Exotic Birds, Ltd. (Jo's Exotic Birds, 7534 Sheridan Road) (12th District)
    h. Happy Tails Doggy Day Care, LLC (Central Bark Doggy Day Care, 7600 – 75th Street) (16th District)
    I. Petco Animal Supplies Stores, Inc. (Petco #618, 6910 Green Bay Road) (16th District)

17. Renewal applications for Pet Fancier Permits, with no adverse recommendations:
    a. Janine Walczak (8735 – 37th Ave.) (14th District)
    b. James O'Brien (1709 – 61st Street) (3rd District)
    c. George Horvat (2020 – 16th Ave.) (1st District)
    d. Michael Hogan (6504 – 43rd Ave.) (15th District)
    e. Sherry Hawkins (5503 – 24th Ave., Lower) (7th District)
    f. Barbara Contro (3301 – 13th Street) (4th District)
    g. Mary Santiago, (4711 – 42nd Ave.) (10th District)
    h. Cassandra Brown (5032 – 14th Ave.) (7th District)

18. Ordinance by Alderperson Kevin E. Mathewson – To Create Section 1.03 F.18 (of the Code of General Ordinances) Regarding the Procedure for a Presiding Officer to Participate in Debate.

Regarding items 19 through 20 the Licensing/Permit Committee may go into Closed Session for purpose of deliberation under authority of §19.85 (1), Wisconsin Statutes, and then reconvene into open session for purpose of holding hearings and making final determinations.

19. Complaint by the City Clerk seeking revocation of the Class "A" Retail Beer License of DSD Group, LLC d/b/a Roosevelt Oil, Amarjit Dhindsa, Agent. *(8th District) (Deferred from the meeting on October 28, 2013)*

20. Complaint by the City Clerk seeking revocation of the Class "B" Beer/"Class B" Liquor Combination License of Bragados Banquets, LLC d/b/a Bragados Banquets, Marco Mendez, Agent.*(14th District) (Deferred from the meeting on October 28, 2013)*

CITIZENS COMMENTS/BUSINESS AS AUTHORIZED BY LAW

ALDERMEN COMMENTS

NOTICE IS HEREBY GIVEN THAT A MAJORITY OF THE MEMBERS OF THE COMMON COUNCIL MAY BE PRESENT AT THE MEETING, AND ALTHOUGH THIS MAY CONSTITUTE A QUORUM OF THE COMMON COUNCIL, THE COUNCIL WILL NOT TAKE ANY ACTION AT THIS MEETING.

IF YOU ARE DISABLED AND IN NEED OF ASSISTANCE, PLEASE CALL 653-4020BEFORE THIS MEETING

Licensing/Permit Committee

Minutes of Meeting Held November 11, 2013

A meeting of the Licensing/Permit Committee was held on November 11, 2013 in Room 202 of the Kenosha Municipal Building.

The meeting was called to order at 6:30 p.m. by Chair Downing.

At roll call, the following members were present: Alderpersons Juliana, Wilson, Kennedy and Schwartz. Assistant City Attorney Bill Richardson was present.

Approval of the minutes of the special meeting held October 28, 2013.
It was moved by Alderperson Juliana, seconded by Alderperson Wilson to approve. Motion carried unanimously.

1. Applications for Operator's (Bartender) licenses, with a recommendation from the City Attorney to grant, subject to:
   - 10 demerit points:
   a. Nicholas Perrelle – *present & spoke*
   b. Betty Julin
   - 30 demerit points:
   c. Reina Northern
   - 40 demerit points:
   d. John Quinn
   It was moved by Alderperson Wilson, seconded by Alderperson Kennedy to concur with the recommendation of the City Attorney. Motion carried unanimously.

2. Applications for new Operator's (Bartender) license, with a recommendation from the City Attorney to deny, based on:
   - material police record:
   a. Nathan Baternik ***(Deferred from the October 28, 2013 meeting.)***
   b. Bradley Mays ***(Deferred from the October 28, 2013 meeting.)***
   It was moved by Alderperson Kennedy, seconded by Alderperson Juliana to concur with the recommendation of the City Attorney. Motion carried unanimously.

3. Application of Paul Conforti for a new Taxi Driver's License, with a recommendation from the City Attorney to deny based on material police record. ***(Deferred from the October 28, 2013 meeting.)***
   Applicant was present and spoke. Alderperson Kennedy spoke. It was moved by Alderperson Kennedy, seconded by Alderperson Wilson to concur with the recommendation of the City Attorney. Motion carried unanimously.

4. Application of KenoshaFest, Inc., Michael P. Wais, Agent, for a Class "A" Beer/"Class A" Liquor License located at 3207 80th Street (Festival Foods) to be effective December 6, 2013, upon surrender of a similar license from Festmark, Inc., with a recommendation from the City Attorney to grant, subject to 45 demerit points. *(14th District)*
   Applicant was present and spoke, stating that he had amended the application in the Clerk's office earlier in the day. It was moved by Alderperson Kennedy, seconded by Alderperson Schwartz to approve, subject to 25 demerit points. Motion carried unanimously.

5. Application of STT Lighthouse LLC, for a Transfer of Agent status of the Class "B" Beer/"Class B" Liquor License located at 5130 4th Avenue (Breakwater Bar and Grill), from Lisa Meyers to Laura Lynn Saarnio, with a recommendation from the City Attorney to grant, subject to 0 demerit points. *(2nd District)*
Applicant was present and spoke. It was moved by Alderperson Kennedy, seconded by Alderperson Schwartz to concur with the recommendation of the City Attorney. Motion carried unanimously.

6. Renewal application of Kimberly Gorsuch for a Pet Fancier Permit, with no adverse recommendations. *(9th District)*
It was moved by Alderperson Wilson, seconded by Alderperson Kennedy to approve. Motion carried unanimously.

7. Ordinance by Alderperson Curt Wilson - Co-Sponsors: Alderperson Rocco J. LaMacchia Sr. and Alderperson Chris Schwartz -To Amend Subsection 13.02 A.1 of the Code of General Ordinances Regarding Pawnbrokers and Secondhand Article and Jewelry Dealers Definitions and Subsection 13.02 H. Regarding Fees.
Alderpersons Wilson and Kennedy spoke, and the ordinance was to be referred to the Finance Committee with an attached fee structure schedule. It was moved by Alderperson Kennedy, seconded by Alderperson Schwartz to approve. Motion carried unanimously.

8. Ordinance by Alderperson David F Bogdala – To repeal and recreate Subparagraph 1.03A. of the Code of General Ordinances entitled "Order of Business", to amend Subparagraph 1.03 A.9.c. entitled "Speaker Sign-up" and to repeal and recreate subparagraph 1.03 A.9. e. entitled "Public Hearings".
Alderperson Bogdala was present and spoke. Alderpersons Kennedy, Juliana, and Wilson spoke. It was moved by Alderperson Kennedy, seconded by Alderperson Juliana to strike the redline language under "A" and add "f" under A.9. with the language of "The Common Council by a majority vote of the members present, may extend the time period to permit all speakers who have signed up an opportunity to speak." Motion carried 3-2, with Alderpersons Wilson and Downing voting nay. It was moved by Alderperson Kennedy, seconded by Alderperson Schwartz to amend "c." to include the language "No person may sign up someone to speak who is not present". Motion carried unanimously. It was then moved by Alderperson Kennedy, seconded by Alderperson Wilson to approve as amended. Motion carried unanimously.

9. Discussion regarding the Cabaret License located at 3000 Roosevelt Road (Big Shotz Sports Bar).
Alderperson Bogdala spoke on behalf of Alderperson Mathewson, and read Alderperson Mathewson's memo for the record. Lindsay Post was present and spoke, and provided the committee signed petitions regarding revocation of the cabaret license. Inspector Lindquist spoke on behalf of Chief Morrissey. Alderpersons Kennedy and Downing spoke. It was requested by the committee to provide the Clerk's office and Chair Downing with a copy of the petition.

CITIZEN COMMENTS: Bartender applicant John Quinn spoke regarding the committee's recommendation.

STAFF/ALDERMEN COMMENTS: None

There being no further business to come before the Licensing/Permit Committee, it was moved, seconded and unanimously carried to adjourn at 7:17 p.m.

Licensing/Permit Committee

Minutes of Special Meeting Held December 2, 2013

A special meeting of the Licensing/Permit Committee was held on December 2, 2013, in Room 204 of the Kenosha Municipal Building.

The meeting was called to order at 6:47 p.m. by Chair Downing.

At roll call, the following members were present: Alderpersons Wilson and Schwartz. Alderpersons Juliana and Kennedy were excused. Deputy City Attorney Matt Knight was present.

1. Application of Dante Bindelli for a new Operator's (Bartender) license, with a recommendation from the City Attorney to grant, subject to 45 demerit points.
   Applicant was present and spoke. It was moved by Alderperson Schwartz, seconded by Alderperson Wilson to concur with the recommendation of the City Attorney. Motion carried unanimously.

2. Application of Speedway, LLC, Michael Cobb, Agent, for a Class "A" Retail Beer Only License located at 3708 – 60th Street, Speedway #4029, to be effective December 3, 2013, with no adverse recommendations. *(11th District)*
   Anthony Nudo was present and spoke. Alderperson Downing commented regarding locking coolers. It was moved by Alderperson Wilson, seconded by Alderperson Schwartz to approve. Motion carried unanimously.

3. Application of Kenosha Midnight, Inc, for a Transfer of Agent status of the Class "B" Beer/"Class B" Liquor License located at 5605 – 22nd Avenue, Kenosha Midnight, from Laurie Mueller to Samhan Samhan, with a recommendation from the City Attorney to grant, subject to 25 demerit points. *(2nd District)*
   Applicant was present and spoke. It was moved by Alderperson Wilson, seconded by Alderperson Kennedy to concur with the recommendation of the City Attorney. Motion carried unanimously.

Citizen Comments: None

Alderperson/Staff Comments: None

There being no further business to come before the Licensing/Permit Committee, it was moved, seconded and unanimously carried to adjourn at 6:54 p.m.

NEW BARTENDER License

Police Record Report

APPLICANT INFORMATION			
Date of Application	Name of Applicant	Applicant's Date of Birth	Driver's License Status
11/25/2013	Alyssa Roberts		Valid
License Number	Address of Applicant	Business (where license is to be used)	Business Address
N140930	6634-31st Avenue	Matt's on Main	

DATE OF CHARGE	OFFENSE	CASE STATUS	OFFENSE LISTED ON APPLICATION	POINTS
6/9/2011	LICENSE NOT ON PERSON	GUILTY		0

CITY ATTORNEY'S RECOMMENDATION	
Offense Demerit Points	0
Were all offenses listed on the application?	
TOTAL DEMERIT POINTS	0

CITY ATTORNEY'S COMMENTS

FINAL RECOMMENDATION

[X] **GRANT**, Subject to [0] Demerit Points

[ ] **DENY**, based on material police record (substantially related to the license activity)

[ ] **DEFER or GRANT subject to** Non-Renewal Revocation due to False Application

NEW BARTENDER License

Police Record Report

APPLICANT INFORMATION			
Date of Application	Name of Applicant	Applicant's Date of Birth	Driver's License Status
11/13/2013	Deion Scarbrough		Valid
License Number	Address of Applicant	Business (where license is to be used)	Business Address
N140894	405-61st Street, #2	Art Bar	

DATE OF CHARGE	OFFENSE	CASE STATUS	OFFENSE LISTED ON APPLICATION	POINTS
10/14/2010	LICENSE NOT ON PERSON	GUILTY	Y	0

CITY ATTORNEY'S RECOMMENDATION	
Offense Demerit Points	0
Were all offenses listed on the application?	
TOTAL DEMERIT POINTS	0

CITY ATTORNEY'S COMMENTS

FINAL RECOMMENDATION

[X] **GRANT,** Subject to [0] Demerit Points

[ ] **DENY,** based on material police record (substantially related to the license activity)

[ ] **DEFER or GRANT subject to** Non-Renewal Revocation due to False Application

NEW BARTENDER License

Police Record Report

APPLICANT INFORMATION			
Date of Application	Name of Applicant	Applicant's Date of Birth	Driver's License Status
11/11/2013	Aja Kunza		Valid
License Number	Address of Applicant	Business (where license is to be used)	Business Address
N140896	2420-52nd Street	Tilted Kilt	7000-74th Place

DATE OF CHARGE	OFFENSE	CASE STATUS	OFFENSE LISTED ON APPLICATION	POINTS
*APPLICANT LISTED AN UNDERAGE DRINKING VIOLATION IN ILLINOIS IN 2010				20

CITY ATTORNEY'S RECOMMENDATION	
Offense Demerit Points	20
Were all offenses listed on the application?	Y
TOTAL DEMERIT POINTS	20

CITY ATTORNEY'S COMMENTS

FINAL RECOMMENDATION

[X] **GRANT,** Subject to [20] Demerit Points

[ ] **DENY,** based on material police record (substantially related to the license activity)

[ ] **DEFER or GRANT subject to** Non-Renewal Revocation due to False Application

NEW BARTENDER License

Police Record Report

APPLICANT INFORMATION			
Date of Application	Name of Applicant	Applicant's Date of Birth	Driver's License Status
11/13/2013	Mariah Martinez		Valid
License Number	Address of Applicant	Business (where license is to be used)	Business Address
N140897	5605-52nd Street, #8	CVS	

DATE OF CHARGE	OFFENSE	CASE STATUS	OFFENSE LISTED ON APPLICATION	POINTS
3/16/2011	UNDERAGE LIQUOR VIOLATION	GUILTY	Y	20

CITY ATTORNEY'S RECOMMENDATION	
Offense Demerit Points	20
Were all offenses listed on the application?	Y
TOTAL DEMERIT POINTS	20

CITY ATTORNEY'S COMMENTS

FINAL RECOMMENDATION

[X] **GRANT**, Subject to [20] Demerit Points

[ ] **DENY**, based on material police record (substantially related to the license activity)

[ ] **DEFER or GRANT subject to** Non-Renewal Revocation due to False Application

NEW BARTENDER License

Police Record Report

APPLICANT INFORMATION			
Date of Application	Name of Applicant	Applicant's Date of Birth	Driver's License Status
10/9/2013	Pamela Rolle		ID Card Only
License Number	Address of Applicant	Business (where license is to be used)	Business Address
N140891	7105-104th Ave, Unit B	Walgreen's	7535-Green Bay Rd

DATE OF CHARGE	OFFENSE	CASE STATUS	OFFENSE LISTED ON APPLICATION	POINTS
7/9/2013	OPERATING W/O A LICENSE	GUILTY	Y	5
*APPLICANT ALSO LISTED A CHARGE IN CALIFORNIA ON 08-05-09 OF DISTURBING THE PEACE				20

CITY ATTORNEY'S RECOMMENDATION	
Offense Demerit Points	25
Were all offenses listed on the application?	Y
TOTAL DEMERIT POINTS	25

CITY ATTORNEY'S COMMENTS

FINAL RECOMMENDATION

[X] **GRANT,** Subject to [25] Demerit Points

[ ] **DENY,** based on material police record (substantially related to the license activity)

[ ] **DEFER or GRANT subject to** Non-Renewal Revocation due to False Application

NEW BARTENDER License

Police Record Report

APPLICANT INFORMATION			
Date of Application	Name of Applicant	Applicant's Date of Birth	Driver's License Status
11/20/2013	Crystal Burdine		Valid
License Number	Address of Applicant	Business (where license is to be used)	Business Address
N140920	4041-6th Avenue	Ayra's Amoco	1900-22nd Avenue

DATE OF CHARGE	OFFENSE	CASE STATUS	OFFENSE LISTED ON APPLICATION	POINTS
10/6/2011	OPERATING WHILE SUSPENDED	GUILTY	Y	10
1/11/2012	OPERATING WHILE SUSPENDED	GUILTY	Y	10
6/19/2013	JUV/TOBACCO VIOLATIONS	GUILTY	Y	5

CITY ATTORNEY'S RECOMMENDATION	
Offense Demerit Points	25
Were all offenses listed on the application?	Y
TOTAL DEMERIT POINTS	25

CITY ATTORNEY'S COMMENTS

FINAL RECOMMENDATION

[X] **GRANT,** Subject to [25] Demerit Points

[ ] **DENY,** based on material police record (substantially related to the license activity)

[ ] **DEFER or GRANT subject to** Non-Renewal Revocation due to False Application

NEW BARTENDER License

Police Record Report

APPLICANT INFORMATION			
Date of Application	Name of Applicant	Applicant's Date of Birth	Driver's License Status
11/25/2013	Nassem Samhan		Valid IL
License Number	Address of Applicant	Business (where license is to be used)	Business Address
N140936	1858-Rosemary Ln,Gurnee,IL 60031	Not Listed	

DATE OF CHARGE	OFFENSE	CASE STATUS	OFFENSE LISTED ON APPLICATION	POINTS
	*APPLICANT LISTED THAT HE SOLD BEER TO AN UNDERAGE DECOY IN ILLINOIS IN NOVEMBER OF 2013			25
	*APPLICANT ALSO LISTED THAT HIS LICENSE WAS SUSPENDED IN 2011 AND 2013 (Driver's License)			

CITY ATTORNEY'S RECOMMENDATION	
Offense Demerit Points	25
Were all offenses listed on the application?	Y
TOTAL DEMERIT POINTS	25

CITY ATTORNEY'S COMMENTS

FINAL RECOMMENDATION

X **GRANT**, Subject to 25 Demerit Points

DENY, based on material police record (substantially related to the license activity)

DEFER or GRANT subject to Non-Renewal Revocation due to False Application

NEW BARTENDER License

Police Record Report

APPLICANT INFORMATION			
Date of Application	Name of Applicant	Applicant's Date of Birth	Driver's License Status
11/22/2013	Lacey Rowsey		ID Card Only
License Number	Address of Applicant	Business (where license is to be used)	Business Address
N140923	2933-43rd Street	Carl & Doug's	

DATE OF CHARGE	OFFENSE	CASE STATUS	OFFENSE LISTED ON APPLICATION	POINTS
2/16/2009	OPERATING W/O LICENSE	GUILTY	Y	10
9/27/2010	DISORDERLY CONDUCT	GUILTY	Y	20

CITY ATTORNEY'S RECOMMENDATION

Offense Demerit Points	30
Were all offenses listed on the application?	Y
TOTAL DEMERIT POINTS	30

CITY ATTORNEY'S COMMENTS

FINAL RECOMMENDATION

[X] **GRANT**, Subject to [30] Demerit Points

[ ] **DENY**, based on material police record (substantially related to the license activity)

[ ] **DEFER or GRANT subject to** Non-Renewal Revocation due to False Application

NEW BARTENDER License

Police Record Report

APPLICANT INFORMATION			
Date of Application	Name of Applicant	Applicant's Date of Birth	Driver's License Status
11/22/2013	Robert McDermott		Valid
License Number	Address of Applicant	Business (where license is to be used)	Business Address
N140925	6111-5th Avenue	Motor Alley	

DATE OF CHARGE	OFFENSE	CASE STATUS	OFFENSE LISTED ON APPLICATION	POINTS
4/19/2011	OPERATING WHILE SUSPENDED	GUILTY	N	10

CITY ATTORNEY'S RECOMMENDATION	
Offense Demerit Points	10
Were all offenses listed on the application?	NO – 20
TOTAL DEMERIT POINTS	30

CITY ATTORNEY'S COMMENTS

FINAL RECOMMENDATION

[X] **GRANT**, Subject to [30] Demerit Points

[ ] **DENY**, based on material police record (substantially related to the license activity)

[ ] **DEFER or GRANT subject to** Non-Renewal Revocation due to False Application

NEW BARTENDER License

Police Record Report

APPLICANT INFORMATION			
Date of Application	Name of Applicant	Applicant's Date of Birth	Driver's License Status
11/22/2013	Nicholas Klein		Valid
License Number	Address of Applicant	Business (where license is to be used)	Business Address
N140926	929 Bonnie Lane,Genoa City,WI	Brat Stop	12304-75th Street

DATE OF CHARGE	OFFENSE	CASE STATUS	OFFENSE LISTED ON APPLICATION	POINTS
3/30/2013	DRUG/POSSESS MARIJUANA - Amended Disorderly Conduct	GUILTY	Y	10
*APPLICANT ALSO LISTED A DISORDERLY CONDUCT CHARGE FROM JULY OF 2013				
10/2/2009	POSS OF THC (MISD)	GUILTY	Y	20

CITY ATTORNEY'S RECOMMENDATION	
Offense Demerit Points	30
Were all offenses listed on the application?	Y
TOTAL DEMERIT POINTS	30

CITY ATTORNEY'S COMMENTS

FINAL RECOMMENDATION

[X] **GRANT**, Subject to [30] Demerit Points

[ ] **DENY**, based on material police record (substantially related to the license activity)

[ ] **DEFER or GRANT subject to** Non-Renewal Revocation due to False Application

NEW BARTENDER License

Police Record Report

APPLICANT INFORMATION			
Date of Application	Name of Applicant	Applicant's Date of Birth	Driver's License Status
11/14/2013	Erika Olivares		ID Card Only
License Number	Address of Applicant	Business (where license is to be used)	Business Address
N140922	1916-63rd Street	Walgreen's	3805-80th Street

DATE OF CHARGE	OFFENSE	CASE STATUS	OFFENSE LISTED ON APPLICATION	POINTS
7/7/2024	OPERATING W/O LICENSE	GUILTY	N	10

CITY ATTORNEY'S RECOMMENDATION	
Offense Demerit Points	10
Were all offenses listed on the application?	NO – 20
TOTAL DEMERIT POINTS	30

CITY ATTORNEY'S COMMENTS

FINAL RECOMMENDATION

[X] **GRANT,** Subject to [30] Demerit Points

[ ] **DENY,** based on material police record (substantially related to the license activity)

[ ] **DEFER or GRANT subject to** Non-Renewal Revocation due to False Application

NEW BARTENDER License

Police Record Report

APPLICANT INFORMATION			
Date of Application	Name of Applicant	Applicant's Date of Birth	Driver's License Status
11/18/2013	Marcos Perez		Valid
License Number	Address of Applicant	Business (where license is to be used)	Business Address
N140906	6935-54th Street	Not Listed	

DATE OF CHARGE	OFFENSE	CASE STATUS	OFFENSE LISTED ON APPLICATION	POINTS
5/5/2012	UNDERAGE LIQUOR VIOLATION	GUILTY	N	20

CITY ATTORNEY'S RECOMMENDATION	
Offense Demerit Points	20
Were all offenses listed on the application?	NO – 20
TOTAL DEMERIT POINTS	40

CITY ATTORNEY'S COMMENTS

FINAL RECOMMENDATION

[X] **GRANT,** Subject to [40] Demerit Points

[ ] **DENY,** based on material police record (substantially related to the license activity)

[ ] **DEFER or GRANT subject to** Non-Renewal Revocation due to False Application

NEW BARTENDER License

Police Record Report

APPLICANT INFORMATION			
Date of Application	Name of Applicant	Applicant's Date of Birth	Driver's License Status
11/12/2013	Ryan Krehbiel		Valid
License Number	Address of Applicant	Business (where license is to be used)	Business Address
N140899	818-93rd St, Pl. Prairie	Cellar Door	7944 Sheridan Rd

DATE OF CHARGE	OFFENSE	CASE STATUS	OFFENSE LISTED ON APPLICATION	POINTS
1/13/2011	BLOOD ALCOHOL CONTENT	GUILTY	Y	
1/13/2011	OPERATING WHILE INTOXICATED	GUILTY	Y	50

CITY ATTORNEY'S RECOMMENDATION	
Offense Demerit Points	50
Were all offenses listed on the application?	Y
TOTAL DEMERIT POINTS	50

CITY ATTORNEY'S COMMENTS

FINAL RECOMMENDATION

[X] **GRANT**, Subject to [50] Demerit Points

[ ] **DENY**, based on material police record (substantially related to the license activity)

[ ] **DEFER or GRANT subject to** Non-Renewal Revocation due to False Application

NEW BARTENDER License

Police Record Report

APPLICANT INFORMATION			
Date of Application	Name of Applicant	Applicant's Date of Birth	Driver's License Status
11/9/2013	Andrew Smith		Valid Illinois
License Number	Address of Applicant	Business (where license is to be used)	Business Address
N140895	625 Red Bridge Road, Lake Zurich,IL	Tilted Kilt	7000-74th Place

DATE OF CHARGE	OFFENSE	CASE STATUS	OFFENSE LISTED ON APPLICATION	POINTS
*APPLICANT LISTED A DUI CHARGE IN 2010 IN ILLINOIS				50

CITY ATTORNEY'S RECOMMENDATION

Offense Demerit Points	50
Were all offenses listed on the application?	Y
TOTAL DEMERIT POINTS	50

CITY ATTORNEY'S COMMENTS

FINAL RECOMMENDATION

[X] **GRANT,** Subject to [50] Demerit Points

[ ] **DENY,** based on material police record (substantially related to the license activity)

[ ] **DEFER or GRANT subject to** Non-Renewal Revocation due to False Application

NEW BARTENDER License

Police Record Report

APPLICANT INFORMATION			
Date of Application	Name of Applicant	Applicant's Date of Birth	Driver's License Status
11/25/2013	Kristina Sorrentino		Revoked
License Number	Address of Applicant	Business (where license is to be used)	Business Address
N140934	6036-31st Avenue	Walgreen's	3805-80th Street

DATE OF CHARGE	OFFENSE	CASE STATUS	OFFENSE LISTED ON APPLICATION	POINTS
7/19/2013	DRUG/POSSESS MARIJUANA	DISPO PENDING	Y	No Charges Filed
7/19/2013	OPERATING WHILE INTOXICATED-1st OFFENSE	DISPO PENDING	Y	50
7/19/2013	DRUG/POSSESS SYN	DISPO PENDING	Y	No Charges Filed

CITY ATTORNEY'S RECOMMENDATION	
Offense Demerit Points	50
Were all offenses listed on the application?	Y
TOTAL DEMERIT POINTS	50

CITY ATTORNEY'S COMMENTS

FINAL RECOMMENDATION

[X] **GRANT,** Subject to [50] Demerit Points

[ ] **DENY,** based on material police record (substantially related to the license activity)

[ ] **DEFER or GRANT subject to** Non-Renewal Revocation due to False Application

NEW BARTENDER License

Police Record Report

APPLICANT INFORMATION			
Date of Application	Name of Applicant	Applicant's Date of Birth	Driver's License Status
11/21/2013	Jacob Donahue		Suspended
License Number	Address of Applicant	Business (where license is to be used)	Business Address
N140918	2722-75th Street	Festival Foods	3207-80th Street

DATE OF CHARGE	OFFENSE	CASE STATUS	OFFENSE LISTED ON APPLICATION	POINTS
8/6/2009	OPERATING WHILE SUSPENDED	GUILTY	N	10
12/3/2009	OPERATING WHILE SUSPENDED	GUILTY	N	10
11/5/2010	OPERATING WHILE SUSPENDED	GUILTY	N	10
4/6/2012	LICENSE NOT ON PERSON	GUILTY	N	N/A

CITY ATTORNEY'S RECOMMENDATION	
Offense Demerit Points	30
Were all offenses listed on the application?	NO – 20
TOTAL DEMERIT POINTS	50

CITY ATTORNEY'S COMMENTS

FINAL RECOMMENDATION

[X] **GRANT,** Subject to [50] Demerit Points

[ ] **DENY,** based on material police record (substantially related to the license activity)

[ ] **DEFER or GRANT subject to** Non-Renewal Revocation due to False Application

NEW BARTENDER License

Police Record Report

APPLICANT INFORMATION			
Date of Application	Name of Applicant	Applicant's Date of Birth	Driver's License Status
11/2/2013	Rebecca Hickey		Valid
License Number	Address of Applicant	Business (where license is to be used)	Business Address
N140939	1778 Sheridan Road	Pick n Save	5210-75th Street

DATE OF CHARGE	OFFENSE	CASE STATUS	OFFENSE LISTED ON APPLICATION	POINTS
9/26/2011	LICENSE NOT ON PERSON	GUILTY	N	0
10/6/2011	OPERATING WHILE SUSPENDED	GUILTY	N	10
5/5/2012	OPERATING WHILE SUSPENDED	GUILTY	N	10
11/29/2012	OPERATING WHILE SUSPENDED	GUILTY	N	10

CITY ATTORNEY'S RECOMMENDATION

Offense Demerit Points	30
Were all offenses listed on the application?	NO – 20
TOTAL DEMERIT POINTS	50

CITY ATTORNEY'S COMMENTS

FINAL RECOMMENDATION

[X] **GRANT,** Subject to [50] Demerit Points

[ ] **DENY,** based on material police record (substantially related to the license activity)

[ ] **DEFER or GRANT subject to** Non-Renewal Revocation due to False Application

NEW BARTENDER License

Police Record Report

APPLICANT INFORMATION			
Date of Application	Name of Applicant	Applicant's Date of Birth	Driver's License Status
11/15/2013	Jaimie Budzinski		Valid
License Number	Address of Applicant	Business (where license is to be used)	Business Address
N140910	1243 N. Sunnyslope Drive, #206 Mt.Pleasant,WI 53406	Walgreen's	3805-80th Street

DATE OF CHARGE	OFFENSE	CASE STATUS	OFFENSE LISTED ON APPLICATION	POINTS
3/2/2011	BLOOD ALCOHOL CONTENT	DISMISSED	Y	
3/2/2011	2ND -OPERATING WHILE INTOXICATED	GUILTY	Y	80

CITY ATTORNEY'S RECOMMENDATION	
Offense Demerit Points	80
Were all offenses listed on the application?	Y
TOTAL DEMERIT POINTS	80

CITY ATTORNEY'S COMMENTS

FINAL RECOMMENDATION

[X] **GRANT,** Subject to [80] Demerit Points

[ ] **DENY,** based on material police record (substantially related to the license activity)

[ ] **DEFER or GRANT subject to** Non-Renewal Revocation due to False Application

NEW BARTENDER License

Police Record Report

APPLICANT INFORMATION			
Date of Application	Name of Applicant	Applicant's Date of Birth	Driver's License Status
11/25/2013	Katherine Matalas		Valid
License Number	Address of Applicant	Business (where license is to be used)	Business Address
N140931	6524-42nd Avenue	Finney's	

DATE OF CHARGE	OFFENSE	CASE STATUS	OFFENSE LISTED ON APPLICATION	POINTS
11/19/2009	OPERATING WHILE INTOXICATED 3rd OFFENSE	GUILTY	Y	80

CITY ATTORNEY'S RECOMMENDATION

Offense Demerit Points	80
Were all offenses listed on the application?	Y
TOTAL DEMERIT POINTS	80

CITY ATTORNEY'S COMMENTS

FINAL RECOMMENDATION

[X] **GRANT**, Subject to [80] Demerit Points

[ ] **DENY**, based on material police record (substantially related to the license activity)

[ ] **DEFER or GRANT subject to** Non-Renewal Revocation due to False Application

NEW BARTENDER License

Police Record Report

APPLICANT INFORMATION			
Date of Application	Name of Applicant	Applicant's Date of Birth	Driver's License Status
Not Listed	Eugene Schiaffino		Valid
License Number	Address of Applicant	Business (where license is to be used)	Business Address
N140887	1832-22nd Ave, #15	Rumors	1912-52nd Street

DATE OF CHARGE	OFFENSE	CASE STATUS	OFFENSE LISTED ON APPLICATION	POINTS
*APPLICANT LISTED GAMBLING/TAX FROM 1989 - FELONY				100

CITY ATTORNEY'S RECOMMENDATION	
Offense Demerit Points	100
Were all offenses listed on the application?	
TOTAL DEMERIT POINTS	100

CITY ATTORNEY'S COMMENTS

FINAL RECOMMENDATION

[ ] **GRANT**, Subject to [ ] Demerit Points

[X] **DENY**, based on material police record (substantially related to the license activity)

[ ] **DEFER or GRANT subject to** Non-Renewal Revocation due to False Application

FOR OFFICE USE ONLY:

License # N40887 Issue Date _____

☐ Beverage Course OK ☐ HOLD for Beverage Course Initials _____

City of Kenosha
625 52nd St, Room 105
Kenosha, WI 53140
(262) 653-4020

APPLICATION
CITY OF KENOSHA OPERATOR'S (BARTENDER) LICENSE
(§125.17, Wisconsin Statutes, §10.02 C. of the City of Kenosha Code of General Ordinances)
FEE: $75.00 (Type 217)

I hereby apply for an Operator's License to serve Alcoholic Beverages in any place of business operated under a Class "B", "Class B", Class "A", "Class A" License in the City of Kenosha to and including the **30th day of June,** 2015. (Unless sooner revoked). I hereby note that I am responsible for knowing and abiding by the contents of Chapter 125, Wisconsin Statutes and Chapter 10 of the Code of General Ordinances and that my license may be suspended, revoked, or not renewed, and/or I may be subject to a civil forfeiture for non-compliance therewith.

THE FOLLOWING QUESTIONS MUST BE ANSWERED (PLEASE READ)

Last Name SCHIAFFINO **First Name** EUGENE **MI** A
(NOTE: Name must appear exactly as it appears on driver's license or state ID)

Date of Birth _____ **Sex** M **Day Phone #** (262) 496-7256

Home Address 1832-22ND AVE #15

City/State/Zip KENOSHA, WI 53140

Email Address GKNOWS@WI.RR.COM

Driver's License or State ID Number _____
(Must indicate the state if this is not a Wisconsin DL or ID)

Name of Business Where License is to be Used (If Unknown At This Time, Leave Blank. NOTE: license may only be utilized in the City of Kenosha) RUMORS

Address of Business Where License is to be Used 1912-52ND ST

Have you, as an adult, ever been convicted of a major crime (felony), a minor crime (misdemeanor), or of violating a municipal or county ordinance in Wisconsin or in any other state, or do you have such a charge pending at this time? ☒ Yes ☐ No If Yes, state charge, year offense committed or alleged to be committed, and disposition:
GAMBLING/TAX 1989 felony

Have you, as an adult, ever served time, or been sentenced to serve time, in a jail or prison in Wisconsin or in any other state? ☒ Yes ☐ No If yes, please explain: ABOVE SEPT 89 - SEPT 90

Have you ever had your driver's license suspended or revoked in Wisconsin or in any other state? ☐ Yes ☒ No If yes, please explain: _____

. Have you received any traffic citations in Wisconsin or in any other state within the past five years, or do you have any such citations pending? □ Yes ☑ No If yes, state charge, year offense committed or alleged to be committed, and disposition: _____

5. Have you, as an adult, been convicted of any state of federal charges, or do you have such charges pending at this time, involving unfair trade practices, unethical conduct, or discrimination? □ Yes ☑ No If yes, state charge, year offense committed or alleged to be committed, and disposition: _____

6. List the name and address of all employers for which you have worked and/or businesses you have operated in the past five years: (Please include employment that is not related to the license applied for.)
BEEN AT RUMORS FOR 15 YEARS

7. List all addresses at which you have lived in the past five years: 1832-22nd AVE #14

8. I have read and understand the "Applicants Please Read" section of this application. I hereby certify that I am the applicant named in the foregoing application, and I have read each and every question and answered each and every question truly, correctly, and completely, under penalty of law for failure to do so.

Signed: _____ APPLICANT'S SIGNATURE

Date: _____

APPLICANTS PLEASE READ

NOTICE: If this application contains statements or information which is untrue, incorrect and/or incomplete in any material respect, it will be denied.

A. Prohibition – It shall be unlawful for any person, acting as an individual, a partner, a corporate officer, or an agent, to execute or file with any City Department, or to authorize any person to do so on their behalf, a license or permit application which is not true, correct and/or complete in all material respects and which was known by said person to be untrue, incorrect and/or incomplete. The term "in all material respects" shall mean with respect to some fact, which, if known to the granting authority, would be a basis or a consideration for license or permit denial.

B. Penalty 1) Any person violating Subsection A. above, shall, upon conviction thereof, be subject to a forfeiture not to exceed Five Hundred ($500) Dollars, plus the payment of the costs of prosecution, and, in default of the timely payment thereof, shall be committed to the County Jail until such forfeiture has been paid, but not to exceed a period of thirty (30) days. 2) The license of permit granting authority may grant, but withhold the issuance of, any license or permit for a period not to exceed thirty (30) days from the date of granting under circumstances wherein an application is found by the granting authority to have violated Section A. above, and the applicant was provided with an opportunity to appear before the granting authority. The granting authority may also issue a written warning to the applicant which shall be made part of their license/permit record for two consecutive license/permits years. Where such finding and penalty is made and imposed by other than the Common Council, applicant may, within ten days of receipt of oral or written notice of the imposition of any such penalty, whichever is first, if both oral and written notice is provided, file a Notice of Appeal with the City Clerk and have such matter reviewed by the Common Council.

Per §1.225 of the Code of General Ordinances, "The first Twenty-Five Dollars of the application fee for any License/Permit shall be retained by the City in the event of a License/Permit denial or the withdrawal of the application by applicant for administrative and processing costs, and the balance, if any, refunded to the applicant. Where the application fee is less than Twenty-five Dollars, the entire application fee shall be retained by the City for administrative and processing costs.

Please file this application and pay the appropriate fee in person.

NEW BARTENDER License

Police Record Report

APPLICANT INFORMATION			
Date of Application	Name of Applicant	Applicant's Date of Birth	Driver's License Status
11/8/2013	Iris Nunez		ID Card Only
License Number	Address of Applicant	Business (where license is to be used)	Business Address
N140884	6111-12th Avenue	Lotus Sports Bar	

DATE OF CHARGE	OFFENSE	CASE STATUS	OFFENSE LISTED ON APPLICATION	POINTS
5/20/2013	POSSESS W/ INTENT-THC (<=200 GRAMS) FELONY	REF TO CRIM CT	Y	100
5/20/2013	DRUG/PARAPHERNALIA SELL/P	REF TO CRIM CT	Y	20

CITY ATTORNEY'S RECOMMENDATION	
Offense Demerit Points	120
Were all offenses listed on the application?	Y
TOTAL DEMERIT POINTS	120

CITY ATTORNEY'S COMMENTS

FINAL RECOMMENDATION

[ ] **GRANT,** Subject to [ ] Demerit Points

[X] **DENY,** based on material police record (substantially related to the license activity)

[ ] **DEFER or GRANT subject to** Non-Renewal Revocation due to False Application

Acceptance

OPERATOR'S (BARTENDER) LICENSE

Type: 217 Fee: $75.00

FILED 11-8
INITIALS RS
ADVERSE/NO ADV
LP
CC

☒ Beverage Course Completed
☐ **HOLD** for Beverage Course

License # 140884

~~I hereby apply for an Operator's License to serve Alcoholic Beverages in any place of business operated~~ under a Class "B", "Class B", Class "A", "Class A" License in the City of Kenosha to and including the **30th day of June,** 2015. (Unless sooner revoked). I hereby note that I am responsible for knowing and abiding by the contents of Chapter 125, Wisconsin Statutes and Chapter 10 of the Code of General Ordinances and that my license may be suspended, revoked, or not renewed, and/or I may be subject to a civil forfeiture for non-compliance therewith.

Last Name Nuñez First Name Iris MI I
(NOTE: Name must appear exactly as it appears on driver's license or state ID)

Date of Birth — Gender F Phone # (262) 705-0568

Home Address 6111 12th Ave

City/State/Zip Kenosha, WI 53143

Email Iris-nunez05@hotmail.com

Driver's License or State ID Number ____ STATE ____ NUMBER

Name of Business Where License will be used Lotus Sports Bar
(PLEASE NOTE: license may be utilized in the City of Kenosha only.)

ANSWER THE FOLLOWING QUESTIONS TRULY AND COMPLETELY:

1. Have you, as an adult, ever been convicted of a major crime (felony), minor crime (misdemeanor), or of violating a municipal or county ordinance in Wisconsin, or in any other State; or do you have a charge pending at this time? ☒ Yes ☐ No
   If yes, state: charge, year, result
   - Charge pending for intent to sell. The year of 2013 (sell marijuana) (currently being charged)
   - Truancy ticket in 2009/2010 from Bradford

2. Have you, as an adult, ever served time; or have been sentenced to serve time in a jail or prison in Wisconsin or any other State? ☒ Yes ☐ No **If yes, explain:**
   Jail for one night in Kenosha for possesion.

-OVER-

3. Have you ever had your driver's license suspended or revoked in Wisconsin or in any other State?
□ Yes ☒ No **If yes, explain:**
No license

4. Have you received any traffic citations in Wisconsin or in any other State within the past five (5) years; or do you have any such citations pending? □ Yes ☒ No
If yes, state: **charge, year, result**

5. Have you, as an adult, within the past five (5) years, while operating a business or engaged in a profession, been convicted of any state or federal charges; or do you have charges pending at this time involving unfair trade practices, unethical conduct, or discrimination? □ Yes ☒ No
If yes, state: **charge, year, result**

6. List the name and address of all employers for which you have worked and/or businesses you have operated in the past five (5) years:
El Sarape 5836 75th St
Lotus Sports Bar 3216 60th Street

7. List all addresses at which you have lived in the past five (5) years:
9222 62nd place Kenosha, WI 53142
6111 12th Ave Kenosha, WI 53143

8. I have read and understand the "Applicants Please Read" section of this application. I hereby certify that I am the applicant named in this application, and I have read and answered each and every question truly, correctly, and completely, under penalty of law for failure to do so.

Signed: [signature] Date: 11-8-13

APPLICANTS PLEASE READ

NOTICE: If this application contains statements or information which is untrue, incorrect and/or incomplete in any material respect, **it will be denied.**

Per §1.225 of the Code of General Ordinances, "The first Twenty-Five Dollars of the application fee for any License/Permit shall be retained by the City in the event of a License/Permit denial or the withdrawal of the application by applicant for administrative and processing costs, and the balance, if any, refunded to the applicant.

NEW BARTENDER License

Police Record Report

APPLICANT INFORMATION			
Date of Application	Name of Applicant	Applicant's Date of Birth	Driver's License Status
11/27/2013	Sam Jiminez		Revoked
License Number	Address of Applicant	Business (where license is to be used)	Business Address
N140935	2119 Shoop St, Racine	Good Garden Café	

DATE OF CHARGE	OFFENSE	CASE STATUS	OFFENSE LISTED ON APPLICATION	POINTS
12/14/2008	OPERATING WHILE SUSPENDED	GUILTY	Y	10
2/6/2009	OPERATING AFTER REVOCATION	GUILTY	Y	10
12/31/2009	OPERATING AFTER REVOCATION	GUILTY	Y	10
5/1/2010	OPERATING AFTER REVOCATION	GUILTY	Y	10
5/25/2010	OPERATING WHILE SUSPENDED	GUILTY	Y	10
3/31/2011	OPERATING WHILE SUSPENDED	GUILTY	Y	10
6/1/2011	BLOOD ALCOHOL CONTENT	GUILTY	Y	50
6/1/2011	OPERATING WHILE INTOXICATED	GUILTY	Y	
6/1/2011	OPERATING WHILE SUSPENDED	GUILTY	Y	10
6/14/2011	OPERATING WHILE SUSPENDED	GUILTY	Y	10
7/6/2011	OPERATING WHILE SUSPENDED	GUILTY	Y	10
8/17/2011	OPERATING WHILE SUSPENDED	GUILTY	Y	10
8/25/2011	OPERATING WHILE INTOXICATED	GUILTY	Y	80
8/25/2011	OPERATING WHILE SUSPENDED	GUILTY	Y	10
8/25/2011	BLOOD ALCOHOL CONTENT	GUILTY	Y	
8/9/2012	IMPLIED CONSENT	GUILTY	Y	
8/9/2012	OPERATING WHILE INTOXICATED	GUILTY	Y	80
6/2/2013	OPERATING AFTER REVOCATION	GUILTY	Y	10
1/23/2012	THEFT/SHOPLIFTING 200+	GUILTY	Y	20

CITY ATTORNEY'S RECOMMENDATION

Offense Demerit Points	370
Were all offenses listed on the application?	
TOTAL DEMERIT POINTS	370

CITY ATTORNEY'S COMMENTS

FINAL RECOMMENDATION

[ ] **GRANT**, Subject to [ ] Demerit Points

[X] **DENY**, based on material police record (substantially related to the license activity)

[ ] **DEFER or GRANT subject to** Non-Renewal Revocation due to False Application

OPERATOR'S (BARTENDER) LICENSE

Type: 217 Fee: $75.00

FILED 11/27
INITIALS
ADVERSE/NO ADV
LP
CC

☒ Beverage Course Completed
☐ **HOLD** for Beverage Course

License # 140935
Provisional Issued: yes no

I hereby apply for an Operator's License to serve Alcoholic Beverages in any place of business operated under a Class "B", "Class B", Class "A", "Class A", and/or "Class C" License in the City of Kenosha to and including the 30th day of June, 2015. (Unless sooner revoked). I hereby note that I am responsible for knowing and abiding by the contents of Chapter 125, Wisconsin Statutes and Chapter 10 of the Code of General Ordinances and that my license may be suspended, revoked, or not renewed, and/or I may be subject to a civil forfeiture for non-compliance therewith.

Last Name: Jimenez First Name: Sam MI: T
(NOTE: Name must appear exactly as it appears on driver's license or state ID)

Date of Birth: [illegible] Gender: M Phone: 262-412-8225

Home Address: 2119 Shoop St Racine Wi 53404
CITY STATE ZIP

Email: STJ249@Gmail.com yes ok
(correspondence will be via email if address is given)

Driver's License or State ID Number WI [illegible]
STATE NUMBER

Name of Business Where License will be used Good Garden Cafe
(PLEASE NOTE: license may be utilized in the City of Kenosha only.)

ANSWER THE FOLLOWING QUESTIONS TRULY AND COMPLETELY:

. Have you, as an adult, ever been convicted of a major crime (felony), minor crime (misdemeanor), or of violating a municipal or county ordinance in Wisconsin, or in any other State; or do you have a charge pending at this time? ☒ Yes ☐ No
If yes, state: **charge, year, result**
retail theft 2008 + 2011 ticket + probation
3 DUI's 2011, 2011, 2012 suspension of lisence, Jail time

. Have you, as an adult, ever served time; or have been sentenced to serve time in a jail or prison in Wisconsin or any other State? ☒ Yes ☐ No **If yes, explain:**
Sentenced 180 days for 3rd DUI

-OVER-

3. Have you ever had your driver's license suspended or revoked in Wisconsin or in any other State?
☒ Yes ☐ No **If yes, explain:**
DUI, Driving after suspension then driving after revocation. Initially suspended because of points being taking away for speeding.

4. Have you received any traffic citations in Wisconsin or in any other State within the past five (5) years; or do you have any such citations pending? ☒ Yes ☐ No
If yes, state: charge, year, result
multiple speeding tickets, multiple Driving after Suspensions, Driving after revocation, Driving under the influence 2006-2012

5. Have you, as an adult, within the past five (5) years, while operating a business or engaged in a profession, been convicted of any state or federal charges; or do you have charges pending at this time involving unfair trade practices, unethical conduct, or discrimination? ☐ Yes ☒ No
If yes, state: charge, year, result

6. List the name and address of all employers for which you have worked and/or businesses you have operated in the past five (5) years:
Good Garden Cafe - Kenosha, Wi. Captain Mikes - Kenosha Wi P.O.P. - Kenosha Wi Halpin personal - Kenosha, Wi Hubot - Mongolian Grill Kenosha Wi QPS - Kenosha Wi.

7. List all addresses at which you have lived in the past five (5) years:
2119 Shoop St Racine wi. 217 mersens ave Racine wi 2001 84th st Kenosha Wi 1502 67th pl Kenosha Wi.

READ CAREFULLY BEFORE SIGNING: I hereby certify that I am the applicant named in this application, and I have read and answered each and every question truly, correctly, and completely, under penalty of law for failure to do so. If this application contains statements or information which is untrue, incorrect and/or incomplete in any material respect, **it will be denied.**

Applicant's Signature: [signature] Date: 11/27/2013

have received a copy of the NOTICE pertaining to LICENSE/PERMIT APPLICATIONS from the City Clerk's Office SJ
(Applicant's Initials)

NEW BARTENDER License

Police Record Report

APPLICANT INFORMATION			
Date of Application	Name of Applicant	Applicant's Date of Birth	Driver's License Status
10/31/2013	Brandon Thomas		Suspended
License Number	Address of Applicant	Business (where license is to be used)	Business Address
N140900	1108-87th Ave, #7	Speedway	3012 Washington Rd

DATE OF CHARGE	OFFENSE	CASE STATUS	OFFENSE LISTED ON APPLICATION	POINTS
11/18/2012	OPERATING WHILE SUSPENDED	GUILTY	Y	
11/26/2012	OPERATING WHILE SUSPENDED	GUILTY	Y	
5/22/2013	OPERATING WHILE SUSPENDED	GUILTY	Y	

*APPLICANT HAS AN ACTIVE WARRANT THROUGH PLEASANT PRAIRIE POLICE DEPARTMENT -CONTEMPT OF COURT - OPERATING WHILE SUSPENDED /OPERATING W/O INSURANCE - BOND $531.50 OR BODY

CITY ATTORNEY'S RECOMMENDATION

Offense Demerit Points

Were all offenses listed on the application?

TOTAL DEMERIT POINTS

CITY ATTORNEY'S COMMENTS

DEFER – ACTIVE WARRANT

FINAL RECOMMENDATION

☐ **GRANT**, Subject to ☐ Demerit Points

☐ **DENY**, based on material police record (substantially related to the license activity)

☐ **DEFER or GRANT subject to** Non-Renewal Revocation due to False Application

Adverse

FOR OFFICE USE ONLY:

License # 140900 **Issue Date** _____

☒ **Beverage Course OK** ☐ **HOLD for Beverage Course** **Initials** RS

APPLICATION
CITY OF KENOSHA OPERATOR'S (BARTENDER) LICENSE
(§125.17, Wisconsin Statutes, §10.02 C. of the City of Kenosha Code of General Ordinances)
FEE: $75.00 (Type 217)

City of Kenosha
625-52nd St, Room 105
Kenosha, WI 53140
262-653-4020

I hereby apply for an Operator's License to serve Alcoholic Beverages in any place of business operated under a Class "B", "Class B", Class "A", "Class A" License in the City of Kenosha to and including the 30th day of June, 2015. (Unless sooner revoked). I hereby note that I am responsible for knowing and abiding by the contents of Chapter 125, Wisconsin Statutes and Chapter 10 of the Code of General Ordinances and that my license may be suspended, revoked, or not renewed, and/or I may be subject to a civil forfeiture for non-compliance therewith.

THE FOLLOWING QUESTIONS MUST BE ANSWERED (PLEASE READ)

Last Name Thomas **First Name** Brandon **MI** J
(NOTE: Name must appear exactly as it appears on driver's license or state ID)

Date of Birth _____ **Sex** M **Day Phone #** 262-705-2742

Home Address 1108 87th Ave Apt #7

City/State/Zip Kenosha Wi 53144

Email Address MystikBlue9@Aim.com

Driver's License or State ID Number _____
(Must indicate the state if this is not a Wisconsin DL or ID)

Name of Business Where License is to be Used (If Unknown At This Time, Leave Blank. NOTE: license may only be utilized in the City of Kenosha) Speedway

Address of Business Where License is to be Used 3012 Washington Road Kenosha Wi 53144

1. Have you, as an adult, ever been convicted of a major crime (felony), a minor crime (misdemeanor), or of violating a municipal or county ordinance in Wisconsin or in any other state, or do you have such a charge pending at this time? ☐ Yes ☒ No If Yes, state charge, year offense committed or alleged to be committed, and disposition: _____

2. Have you, as an adult, ever served time, or been sentenced to serve time, in a jail or prison in Wisconsin or in any other state? ☐ Yes ☒ No If yes, please explain: _____

3. Have you ever had your driver's license suspended or revoked in Wisconsin or in any other state? ☒ Yes ☐ No If yes, please explain: Suspend for Traffic Tickets In Mount pleasant and Sturtevant

4. Have you received any traffic citations in Wisconsin or in any other state within the past five years, or do you have any such citations pending? ☒ Yes ☐ No If yes, state charge, year offense committed or alleged to be committed, and disposition: 2 citations In Mount pleasant - 2 In Sturtevant - All In 2012/2013

5. Have you, as an adult, been convicted of any state of federal charges, or do you have such charges pending at this time, involving unfair trade practices, unethical conduct, or discrimination? ☐ Yes ☒ No If yes, state charge, year offense committed or alleged to be committed, and disposition: _____

6. List the name and address of all employers for which you have worked and/or businesses you have operated in the past five years: (Please include employment that is not related to the license applied for.)
Speedway LLC Sept 2010 - Now, Piggly Wiggly 3900 Erie Racine 53402

7. List all addresses at which you have lived in the past five years: 1108 87th Ave #7 - 27007 94th place Camp Lake - 4110 Manhattan Dr. Racine 53402

8. I have read and understand the "Applicants Please Read" section of this application. I hereby certify that I am the applicant named in the foregoing application, and I have read each and every question and answered each and every question truly, correctly, and completely, under penalty of law for failure to do so.

Signed: _____
APPLICANT'S SIGNATURE

Date: 10/31/13

APPLICANTS PLEASE READ

NOTICE: If this application contains statements or information which is untrue, incorrect and/or incomplete in any material respect, it will be denied.

A. Prohibition – It shall be unlawful for any person, acting as an individual, a partner, a corporate officer, or an agent, to execute or file with any City Department, or to authorize any person to do so on their behalf, a license or permit application which is not true, correct and/or complete in all material respects and which was known by said person to be untrue, incorrect and/or incomplete. The term "in all material respects" shall mean with respect to some fact, which, if known to the granting authority, would be a basis or a consideration for license or permit denial.

B. Penalty 1) Any person violating Subsection A. above, shall, upon conviction thereof, be subject to a forfeiture not to exceed Five Hundred ($500) Dollars, plus the payment of the costs of prosecution, and, in default of the timely payment thereof, shall be committed to the County Jail until such forfeiture has been paid, but not to exceed a period of thirty (30) days. 2) The license of permit granting authority may grant, but withhold the issuance of, any license or permit for a period not to exceed thirty (30) days from the date of granting under circumstances wherein an application is found by the granting authority to have violated Section A. above, and the applicant was provided with an opportunity to appear before the granting authority. The granting authority may also issue a written warning to the applicant which shall be made part of their license/permit record for two consecutive license/permits years. Where such finding and penalty is made and imposed by other than the Common Council, applicant may, within ten days of receipt of oral or written notice of the imposition of any such penalty, whichever is first, if both oral and written notice is provided, file a Notice of Appeal with the City Clerk and have such matter reviewed by the Common Council.

Per §1.225 of the Code of General Ordinances, "The first Twenty-Five Dollars of the application fee for any License/Permit shall be retained by the City in the event of a License/Permit denial or the withdrawal of the application by applicant for administrative and processing costs, and the balance, if any, refunded to the applicant. Where the application fee is less than Twenty-five Dollars, the entire application fee shall be retained by the City for administrative and processing costs.

Please file this application and pay the appropriate fee in person.

TAXI DRIVER LICENSES

Police Record Report

APPLICANT INFORMATION			
Date of Application	Name of Applicant	Applicant's Date of Birth	Driver's License Status
12/3/2013	Jason Mouzes		Valid
License Number	Address of Applicant	Business (where license is to be used)	Business Address
N140050	5315-53rd Street	Keno Cab	

DATE OF CHARGE	OFFENSE	CASE STATUS	OFFENSE LISTED ON APPLICATION	POINTS
5/15/2012	DRUG/POSSESS MARIJUANA	GUILTY	N	20

CITY ATTORNEY'S RECOMMENDATION	
Offense Demerit Points	20
Were all offenses listed on the application?	NO – 20
TOTAL DEMERIT POINTS	40

CITY ATTORNEY'S COMMENTS

FINAL RECOMMENDATION

[X] **GRANT**, Subject to [40] Demerit Points

[ ] **DENY,** based on material police record (substantially related to the license activity)

[ ] **DEFER or GRANT subject to** Non-Renewal Revocation due to False Application

TAXI DRIVER'S LICENSE

Police Record Report

APPLICANT INFORMATION

Date of Application	Name of Applicant	Applicant's Date of Birth	Driver's License Status
12/3/2013	Robert Eyler		Valid

License Number	Address of Applicant	Business (where license is to be used)	Business Address
N140048	1784 Sheridan Road Lot 22	Keno Cab	

DATE OF CHARGE	OFFENSE	CASE STATUS	OFFENSE LISTED ON APPLICATION	POINTS
1/8/2010	DRIVING OVER WALK	GUILTY	Y	20
2/24/2012	FAILURE TO OBEY TRAFFIC SIGN OR SIGNAL	GUILTY	Y	20
6/19/2012	OBSTRUCTING TRAFFIC	GUILTY	Y	20
4/11/2012	BATTERY/DV	GUILTY	Y	20

CITY ATTORNEY'S RECOMMENDATION

Offense Demerit Points	80
Were all offenses listed on the application?	Y
TOTAL DEMERIT POINTS	80

CITY ATTORNEY'S COMMENTS

FINAL RECOMMENDATION

[X] **GRANT,** Subject to [80] Demerit Points

[ ] **DENY,** based on material police record (substantially related to the license activity)

[ ] **DEFER or GRANT subject to** Non-Renewal Revocation due to False Application

TAXI DRIVER'S LICENSE

Police Record Report

APPLICANT INFORMATION			
Date of Application	Name of Applicant	Applicant's Date of Birth	Driver's License Status
11/7/2013	Richard Beiser		Valid
License Number	Address of Applicant	Business (where license is to be used)	Business Address
140045	5710-7th Avenue	Not Listed	Not Listed

DATE OF CHARGE	OFFENSE	CASE STATUS	OFFENSE LISTED ON APPLICATION	POINTS
10/18/2010	FAILURE TO FASTEN SEATBELT	GUILTY	Y	10
3/8/1995	MANUF/DELIVER COCAINE BASE -2 CTS. FELONY	GUILTY	Y	100 X 2

CITY ATTORNEY'S RECOMMENDATION

Offense Demerit Points	210
Were all offenses listed on the application?	Y
TOTAL DEMERIT POINTS	210

CITY ATTORNEY'S COMMENTS

FINAL RECOMMENDATION

[ ] **GRANT**, Subject to [ ] Demerit Points

[X] **DENY**, based on material police record (substantially related to the license activity)

[ ] **DEFER or GRANT subject to** Non-Renewal Revocation due to False Application

E-MAILED NOV 07 REC'D
Letter mailed 11/11/13 [illegible]

FILED 11/7
INITIALS [illegible]
ADVERSE/NO ADV
LP 12-9-13
CC

TAXI DRIVER'S LICENSE

Type: 144 Fee: $30.00

Expires: April 30, 2014 License # 140045

The undersigned requests that a license be granted in accordance with Chapter XIII, Section 13.07 G. of the Code of General Ordinances of the City of Kenosha, and certifies that the following information is true and correct to the best of his/her knowledge.

Last Name: BEISER First Name: RICHARD MI: J
(NOTE: Name must appear exactly as it appears on driver's license or state ID)

Date of Birth: / / Gender: MALE Phone: 262-652-6583

Home Address: 5710 7th avenue

City/State/Zip: Kenosha WI 53140

Email: N/A (correspondence will be via email if address is given)

Driver's License or State ID Number WI (STATE) (NUMBER)

Name of Business Where License will be used I WILL APPLY TO ALL TAXI COMPANIES

ANSWER THE FOLLOWING QUESTIONS TRULY AND COMPLETELY:

1. Have you, as an adult, ever been convicted of a major crime (felony), minor crime (misdemeanor), or of violating a municipal or county ordinance in Wisconsin, or in any other State; or do you have a charge pending at this time? ☒ Yes ☐ No
If yes, state: **charge, year, result**
CONTROLLED SUBSTANCE - 1994 - PRISON, FINE, SUPERVISION; SERVED SENTENCE, PAID FINE, RELEASED FROM SUPERVISION IN JANUARY OF 2008 - PLEASE SEE ATTACHED LETTER FROM D.O.C.

2. Have you, as an adult, ever served time; or have been sentenced to serve time in a jail or prison in Wisconsin or any other State? ☒ Yes ☐ No **If yes, explain:**
PLEASE SEE ABOVE, PLUS PRIOR ARRESTS ON MY POLICE FILE; HOWEVER NOTHING IN THE LAST 19 YEARS

3. Have you ever had your driver's license suspended or revoked in Wisconsin or in any other State?
☒ Yes ☐ No **If yes, explain:**
FEBRUARY OF 1990 - OWI - OPERATING WHILE IMPAIRED - ON PAIN MEDICATION FOR A BROKEN BONE FROM A SKIING ACCIDENT

-OVER-

l. Have you received any traffic citations in Wisconsin or in any other State within the past five (5) years; or do you have any such citations pending? ☒ Yes ☐ No
If yes, state: **charge, year, result**
10/8/10 - CRYSTAL LAKE ILLINOIS - IMPROPER USE OF SEAT BELTS - $10 FINE

. Have you, as an adult, within the past five (5) years, while operating a business or engaged in a profession, been convicted of any state or federal charges; or do you have charges pending at this time involving unfair trade practices, unethical conduct, or discrimination? ☐ Yes ☒ No
If yes, state: **charge, year, result**

. List the name and address of all employers for which you have worked and/or businesses you have operated in the past five (5) years:
BLUE LINE TRANSPORT - LIBERTYVILLE IL.
SERVICE FIRST TRANSPORTATION - WOODSTOCK IL.

List all addresses at which you have lived in the past five (5) years:
5710 7th avenue Kenosha WI 53140

I hereby certify that I am the applicant named in this application, and I have read and answered each and every question truly, correctly, and completely, under penalty of law for failure to do so.
I also certify that:

- I am able to read and write the English language
- I am not addicted to the use of intoxicating liquor or drugs
- I am at least 18 years of age
- I have a valid Wisconsin Driver's License
- I have never been arrested, except as listed above

Applicant's Signature: Richard J. Beiser Date: 11/7/13

have received a copy of the NOTICE pertaining to LICENSE/PERMIT APPLICATIONS from the City Clerk's Office Mailed 11/21/13
(Applicant's Initials) mn

After filing this application for a Taxi Driver's License with the City Clerk, you must go to the Safety Building at 1000 55th Street to have your picture and fingerprints taken. You must do this Monday through Friday between the hours of 1:00 and 3:00 pm only.

11/7/13

Dearest Committee Members,

I spoke recently with my ward alderperson who is also on the licensing committee and she recommended that I reapply for a taxi permit. On my last application, I was denied a permit due to my police record. However, this was 6 years after I was given the first of 3 permits — 2004, 2005, and 2007. Also — my police record did not change in the last 19 years. All relevant paperwork is included in this application. I never received any traffic tickets or demerit points while having the 3 previous permits. I'm just asking for the chance to earn a living. Also, I'm not asking for any special favor; conversely just the renewal of something that this committee has granted me 3 times previously.

Thanking You,

Richard Beiser

2005
RENEWAL
PERMIT

Kenosha Police Department
DANIEL C. WADE
Chief of Police

Area Code (262) 605-5200

TO : Richard B

REF : TAXI DRIVER PERMIT RENEWAL

DATE : 03-21-05

Please note that the Kenosha Police Department has processed your application for the Renewal of your Taxi Driver's Permit. A background check was completed, and it was determined that you are eligible for the renewal of your permit.

Your application will be forwarded to the Common Council prior to the April 30, 2005 expiration date. The City Clerk's Office will mail your permit to the address listed on your application.

If you have any questions, please contact the City Clerk's Office at (262) 653-4020.

Asst. Chief P.J. Weidn

Assistant Chief Patrick J. Weidn

PJW/ka

The mission of the Kenosha Police Department is to serve all people with respect, fairness and compassion. We are committed to preserving peace, order and safety; enforcing laws and ordinances; and safeguarding constitutional rights.

ECD

HOMELAND SECURITY TRAINING CERTIFICATE

The certificate serves as a record of training indicating that:

Print Name: Richard J. Beiser

Has successfully completed the IAC Basic Air Cargo Security Training for Authorized Representatives

U.S. DEPARTMENT OF HOMELAND SECURITY

Date of Completion: 6/25/07

Test Results: 100%

WARNING: This record contains Sensitive Security Information that is controlled under 49 CFR parts 15 and 1520. No part of this record may be disclosed to persons without a "need to know", as defined in 49 CFR parts 15 and 1520, except with the written permission of the Administrator of the Transportation Security Administration or the Secretary of Transportation. Unauthorized release may result in civil penalty or other action. For U.S. government agencies, public disclosure is governed by 5 U.S.C. 552 and 49 CFR parts 15 and 1520.

Transportation Security Administration

2007
HEARING

CO **PORTS OF DEPARTMENTS**

8. App er list on file in the Office of the City Cler
   a. e(s).
   b. er and/or Liquor license(s).
   c. Special "Class B" Wine license(s).
   d.

9. Req)-bed addition to an existing CBRF facil rict) (Clare Bridge of Kenosha)
   (C.P.- Ayes 9: Noes 0) **PUBLIC HEARING**

RECOMMENDATIONS FROM THE COMMITTEE ON LICENSING/PERMITS

NOTE: All licenses and permits are subject to withholding of issuance by the City Clerk as specified in Section 1.045 of the Code of General Ordinances.

10. Approve the following applications for new Operator's (Bartender) licenses, subject to:
    -25 demerit points:
    a. Mary Sue Sereno
    b. Bryan R. Thusius
    -50 demerit points:
    c. Carmen Benavidez
    d. Katie Lee
    e. James L. Melander
    -75 demerit points:
    f. Shauna Rigney
    -85 demerit points:
    g. Angela H. Sutherland
    (Ayes 3: Noes 0) **HEARING**

11. DENY the following applications for new Operator's (Bartender) licenses, based on:
    -material police record:
    a. Jacquelyn R. Sexton
    -material police record and false application:
    c. Vanessa Colon (Deferred from the meeting of September 24, 2007)
    (Ayes 3: Noes 0) **HEARING**

12. Approve application of Richard J. Beiser for a Taxi Driver's license, subject to 60 demerit points. (Ayes 3: Noes 0) **HEARING**

Jim Doyle
Governor

Matthew J. Frank
Secretary

State of Wisconsin
Department of Corrections

Division of Community Corrections
9531 Rayne Rd., Suite II
Sturtevant, WI 53177
(262) 884-3780 (phone)
(262) 884-3799 (fax)

January 8, 2008

Mr. Richard Beiser
5710 7th Avenue
Kenosha, WI 53140

Dear Mr. Beiser:

I have today signed the Administrative Action granting you an *Early Discharge* from probation. You are discharged as of the date of this letter. Because it sometimes takes a few weeks to process the discharge, you should keep this letter with you in the event that you are stopped or questioned by law enforcement.

If you were on supervision for a misdemeanor, you will not receive a discharge certificate. After 8 weeks you will be able to check with the Probation and Parole office to make sure that the discharge was processed.

I want to congratulate you on this accomplishment. Less than 1% of the persons placed on Probation or Parole are recommended for Early Discharge. Clearly your agent saw your potential for success. This is an achievement to be proud of. It is our hope that you take this opportunity and make the most of it.

I wish you well.

Sincerely,

Lisa Kenyon, Regional Chief
Division of Community Corrections, Region II

JANUARY 2008
EARLY RELEASE
FROM SUPERVISION

2010 HEARING

C.3. Approve the following applications for new Taxi Dr

-35 demerit points:
a. Karen Lain

-60 demerit points:
b. Jack Krueger

(Ayes 4: Noes 0) **HEARING**

C.4. Approve the following applications for new Taxi Dr
80 demerit points:
a. Clinton Matthews
b. Jeffrey Peterson
c. Jane Wiarek

(Ayes 3: Noes 1) **HEARING**

C.5. DENY the following applications for new Taxi Driver's license, based on
-material police record & false application:
a. Matthew Krisor
b. Michael Tidwell

(Ayes 4: Noes 0) **HEARING**

C.6. Approve application of James Peterson for a Taxi Driver's license, subject to ***10 demerit points***. (Ayes 4: Noes 0) **HEARING**

C.7. Approve application of Richard J. Beiser for a new Taxi Driver's license, subject to ***75 demerit points***. (Ayes 3: Noes 1) **HEARING**

C.8. Approve application of East Frontage LLC, Anthony DeBartolo, Agent, for a Class "B" Beer/"Class B" Liquor License located at 6325 120th Ave., (***The Hub***), with acceptance of a conditional surrender of a similar license at the same location from Landri Hub LLC (17th District). (Ayes 3: Noes 0: Abstain 1) **HEARING**

C.9. Approve application of Laszlo Kiss for a Secondhand Article Dealer License located at 6826 Sheridan Road, (Antiques Revival) with no adverse recommendations. (3rd District) (Ayes 4: Noes 0) **HEARING**

CITY OF KENOSHA
625 - 52nd Street, Room 105
Kenosha, Wisconsin 53140-3480
Phone (262)653-4020
Fax (262)653-4023
cityclerk@kenosha.org
www.kenosha.org

Michael K. Higgins
City Clerk – Treasurer

Debra L. Salas
Deputy City Clerk-Treasurer

February 2, 2010

2010
DENIAL

Richard J Beiser
5710 7th Ave
Kenosha, WI 53140

Re: Application for a Taxi Driver license

Dear Applicant:

Please be advised that on Monday, February 1, 2010 the City of Kenosha Common Council **denied** your application for a Taxi Driver license. The application was denied based on material police record.

Sincerely,

Debra L. Salas
Deputy City Clerk/Treasurer

TAXI DRIVER'S LICENSE

Police Record Report

APPLICANT INFORMATION			
Date of Application	Name of Applicant	Applicant's Date of Birth	Driver's License Status
11/8/2013	Modeen A. Museitef		Valid
License Number	Address of Applicant	Business (where license is to be used)	Business Address
N140046	7301-98th Ave, Unit G	M&M Cab Company	Not Listed

DATE OF CHARGE	OFFENSE	CASE STATUS	OFFENSE LISTED ON APPLICATION	POINTS
4/11/2009	OBSTRUCTING TRAFFIC	GUILTY	N	20
4/11/2009	DEFACE OR OBSTRUCT OFFICIAL SIGN	GUILTY	N	20

*APPLICANT ALSO LISTED THAT HE HAS CHARGES PENDING IN MISSOURI FOR SELLING K-2 APPROXIMATELY 1 1/2 YEARS AGO.

CITY ATTORNEY'S RECOMMENDATION	
Offense Demerit Points	
Were all offenses listed on the application?	
TOTAL DEMERIT POINTS	

CITY ATTORNEY'S COMMENTS:

DEFER

NEED DOCUMENTATION ON K-2 CHARGE; CRIMINAL?

FINAL RECOMMENDATION

[ ] **GRANT**, Subject to [ ] Demerit Points

[ ] **DENY**, based on material police record (substantially related to the license activity)

[ ] **DEFER or GRANT subject to** Non-Renewal Revocation due to False Application

2810 M 9240

TAXI DRIVER'S LICENSE

Type: 144 Fee: $30.00

FILED 11/8
INITIALS M
ADVERSE/NO ADV
LP
CC

Expires: April 30, 2014

License # N 1460246

The undersigned requests that a license be granted in accordance with Chapter XIII, Section 13.07 G. of the Code of General Ordinances of the City of Kenosha, and certifies that the following information is true and correct to the best of his/her knowledge.

Last Name: MUSEITEF First Name: MODEEN MI: A
(NOTE: Name must appear exactly as it appears on driver's license or state ID)

Date of Birth. Gender: M Phone: (262) 749-2277

Home Address: 7301 98th Ave. Unit G

City/State/Zip: KENOSHA, WI. 53142

Email: (correspondence will be via email if address is given)

Driver's License or State ID Number WI (STATE) (NUMBER)

Name of Business Where License will be used M + M CAB CO.

ANSWER THE FOLLOWING QUESTIONS TRULY AND COMPLETELY:

1. Have you, as an adult, ever been convicted of a major crime (felony), minor crime (misdemeanor), or of violating a municipal or county ordinance in Wisconsin, or in any other State; or do you have a charge pending at this time? ☑ Yes ☐ No
   If yes, state: **charge, year, result**
   MISSOURI (PENDING)
   Selling K-2 - 1½ yrs ago

2. Have you, as an adult, ever served time; or have been sentenced to serve time in a jail or prison in Wisconsin or any other State? ☐ Yes ☐ No **If yes, explain:**

3. Have you ever had your driver's license suspended or revoked in Wisconsin or in any other State?
   ☑ Yes ☐ No **If yes, explain:** ? Don't remember exactly when?

-OVER-

4. Have you received any traffic citations in Wisconsin or in any other State within the past five (5) years; or do you have any such citations pending? □ Yes ☑ No
If yes, state: **charge, year, result**

5. Have you, as an adult, within the past five (5) years, while operating a business or engaged in a profession, been convicted of any state or federal charges; or do you have charges pending at this time involving unfair trade practices, unethical conduct, or discrimination? ☑ Yes □ No
If yes, state: **charge, year, result**
MISSOURI — PENDING

6. List the name and address of all employers for which you have worked and/or businesses you have operated in the past five (5) years:
WDC MILWAUKEE, WI.
414 933-3200

7. List all addresses at which you have lived in the past five (5) years:
7103 104th Ave. — Kenosha, WI.
7301 90th Ave. — Kenosha, WI.

8. I hereby certify that I am the applicant named in this application, and I have read and answered each and every question truly, correctly, and completely, under penalty of law for failure to do so.
I also certify that:

- I am able to read and write the English language
- I am not addicted to the use of intoxicating liquor or drugs
- I am at least 18 years of age
- I have a valid Wisconsin Driver's License
- I have never been arrested, except as listed above

Applicant's Signature: Modesa J. Mustafa Date: NOV. 8th 2013

I have received a copy of the NOTICE pertaining to LICENSE/PERMIT APPLICATIONS from the City Clerk's Office M.M.
(Applicant's Initials)

***After filing this application for a Taxi Driver's License with the City Clerk, you must go to the Safety Building at 1000 55th Street to have your picture and fingerprints taken. You must do this Monday through Friday between the hours of 1:00 and 3:00 pm only.**

TAXI DRIVER'S LICENSE

Police Record Report

APPLICANT INFORMATION			
Date of Application	Name of Applicant	Applicant's Date of Birth	Driver's License Status
11/5/2013	Antonio Turner		Valid
License Number	Address of Applicant	Business (where license is to be used)	Business Address
190044	918 English St., Rear, Racine	ANT Transportation	Not Listed

DATE OF CHARGE	OFFENSE	CASE STATUS	OFFENSE LISTED ON APPLICATION	POINTS
2/14/2011	Disorderly Conduct	Guilty	N	20

*APPLICANT LISTED CHARGES OF BURGLARY, THEFT & ASSAULTS IN TEXAS AND IS CURRENTLY ON PROBATION.

CITY ATTORNEY'S RECOMMENDATION

Offense Demerit Points _____

Were all offenses listed on the application? _____

TOTAL DEMERIT POINTS _____

CITY ATTORNEY'S COMMENTS

DEFER

NEED CONVICTION STATUS REPORTS ON ALL OUT-OF-STATE VIOLATIONS

FINAL RECOMMENDATION

☐ **GRANT,** Subject to ☐ Demerit Points

☐ **DENY,** based on material police record (substantially related to the license activity)

☐ **DEFER or GRANT subject to** Non-Renewal Revocation due to False Application

2 809M
9134

TAXI DRIVER'S LICENSE

Type: 144 Fee: $30.00

FILED 11-5-13
INITIALS CS
ADVERSE/NO ADV
LP
CC

Expires: April 30, 2014

License # ~~[illegible]~~ 140044

The undersigned requests that a license be granted in accordance with Chapter XIII, Section 13.07 G. of the Code of General Ordinances of the City of Kenosha, and certifies that the following information is true and correct to the best of his/her knowledge.

Last Name: TURNER First Name: ANTONIO MI: L
(NOTE: Name must appear exactly as it appears on driver's license or state ID)

Date of Birth: _____ Gender: M Phone: 262-664-1751

Home Address: 918 ENGLISH ST REAR

City/State/Zip: RACINE WI 53402

Email: ANT and ANTONIO TURNER 92@YAHOO.COM (correspondence will be via email if address is given)

Driver's License or State ID Number WI (STATE) _____ (NUMBER)

Name of Business Where License will be used ANT TRANSPORTION

ANSWER THE FOLLOWING QUESTIONS TRULY AND COMPLETELY:

1. Have you, as an adult, ever been convicted of a major crime (felony), minor crime (misdemeanor), or of violating a municipal or county ordinance in Wisconsin, or in any other State; or do you have a charge pending at this time? ☒ Yes ☐ No
   If yes, state: **charge, year, result**
   IN TEXAS BURLGY THEFT, And ASSULTS

2. Have you, as an adult, ever served time; or have been sentenced to serve time in a jail or prison in Wisconsin or any other State? ☐ Yes ☒ No **If yes, explain:**

3. Have you ever had your driver's license suspended or revoked in Wisconsin or in any other State?
   ☐ Yes ☒ No **If yes, explain:**

-OVER-

4. Have you received any traffic citations in Wisconsin or in any other State within the past five (5) years; or do you have any such citations pending? ☑ Yes ☐ No
If yes, state: **charge, year, result**
I WAS NOT PAYING ATTENTION 2011

5. Have you, as an adult, within the past five (5) years, while operating a business or engaged in a profession, been convicted of any state or federal charges; or do you have charges pending at this time involving unfair trade practices, unethical conduct, or discrimination? ☐ Yes ☐ No
If yes, state: **charge, year, result**

6. List the name and address of all employers for which you have worked and/or businesses you have operated in the past five (5) years:
POPEYES FRIED CHICKEN IN RACINE

7. List all addresses at which you have lived in the past five (5) years:
501 SHELBOURNE CT 1030 MAY FAIR ROAD, 833 COLLEGE AVE.
PRESENT 918 ENGLISH ST RENT

8. I hereby certify that I am the applicant named in this application, and I have read and answered each and every question truly, correctly, and completely, under penalty of law for failure to do so.
I also certify that:

- I am able to read and write the English language
- I am not addicted to the use of intoxicating liquor or drugs
- I am at least 18 years of age
- I have a valid Wisconsin Driver's License
- I have never been arrested, except as listed above

Applicant's Signature: _____ Date: 11-5-13

I have received a copy of the NOTICE pertaining to LICENSE/PERMIT APPLICATIONS from the City Clerk's Office _____
(Applicant's Initials)

***After filing this application for a Taxi Driver's License with the City Clerk, you must go to the Safety Building at 1000 55th Street to have your picture and fingerprints taken. You must do this Monday through Friday between the hours of 1:00 and 3:00 pm only.**

MATT WILL PROVIDE
BACKUP FOR
AGENDA ITEM 7
AT THE MEETING

FOOD & FUN FIRST, LLC
THE GOOD GARDEN CAFE AND WINE GALLERY

APPLICATION FOR OUTDOOR DINING AREA
WITH OUTDOOR EXTENSION LICENSE

NA
LD 12/9
CC 12/16

E-MAILED NOV 15 REC'D

E-MAILED NOV 14 REC'D

APPLICATION FOR PUBLIC ENTERTAINMENT LICENSE
Section 12.05 Code of General Ordinances
City of Kenosha, Wisconsin

Required for live music performances and live entertainment, including but not limited to, the performance of any act, play or stunt, dramatic reading, monologue, amateur talent contest, or disc jockey show

District #8

Check One:	X Annual	☐ One (1) Day
	Type 119	Type 118
	Fee: $300.00	Fee: $50.00
	Term: July 1st to June 30th 2014	Term: One (1) Day

Non-renewable

Applicant (check one):

X	Individual Person
	Limited Liability Company
	Partnership
	Corporation

NOTE: Applicant should be same name as the Wisconsin Sellers Permit for business.

Applicant Name: Yolanda Green

Business Name: Children's Recreational Club DF8

Business Address & Phone # 3010 Roosevelt Rd

Define all Areas and Rooms of Premises Designated to be Licensed: Main entrance - first restroom to the right (unisex)

Provide name, address, telephone number and date of birth of individual, each partner, each corporate officer (must be 18 years of age or older), as applicable:

Name	Address	Phone	Date of Birth
Yolanda Green	4601 52 Ave		

Attach a "Applicant's Report of Police Record" form for each individual, partner and corporate officer check here if attached X.

Have you obtained from the City Clerk a current copy of §12.05, "Public Entertainment Licenses"?
X YES ~~NO~~

9. If you previously held the license applied for, was it ever suspended or revoked? NA If yes, please explain:

10. Describe in detail the type of entertainment to be provided: Band practices for Students, Dance/Cheer Practices for Students. Birthday Parties, Wedding receptions, Bridal Showers, Baby Showers, etc.

NOTICE: If this application and/or attachments contain statements or information which are not true, correct nd complete in all material respects, this license may be denied and you may be subject to criminal or civil enalties.

TATE OF WISCONSIN)

OUNTY OF KENOSHA)

he undersigned, being duly sworn says that (he/she)(is/they are) the applicant(s) named in the foregoing pplication that (he/she)(has/they have) read each and every question and answered each and every question uly, correctly and completely, under penalty of law for failure to do so.

pplicant's Signature (Individual/Partner/President)

pplicant's Signature (Other Partner/Officer of Corp.)

bscribed and sworn to before me this 13 day of November, 2013

otary Public

y commission expires 3/30/14

FOR OFFICE USE ONLY

te Filed/Receipted 11/15/13 PP

CERTIFICATION BY THE CITY CLERK'S OFFICE

HEREBY state that the above application was granted by the Common Council on the _____ day of _____, _____, and applicant was issued license # _____ on the _____ day of _____, _____.

gnature: _____

le: _____

E-MAILED NOV 22 REC'D

FILED 11/22/13
INITIALS mn
ADVERSE/NO ADV
LP 12/9
CC 12/16

CABARET LICENSE
PROBATIONARY

Type: 228 Fee: $150/6 months

Effective: 12/17/13 To: 6/17/14
(6 months)

PLEASE NOTE: This license is non-renewable. Applications shall be referred by the City Clerk to the Police Department. The Police Department shall make a report, in writing, to the City Attorney as to any police record of the applicant, which may reflect upon good moral character or business responsibility. The City Attorney shall examine said record and make a recommendation to the Committee on Licenses/Permits based thereon as to whether the license shall be granted. The Committee on Licenses/Permits shall review all applications, any reports, the recommendation of the City Attorney and all other information before it. Said Committee shall recommend to the Common Council either the granting or denial of each application. (In accordance to Chapter X, Section 10.07 of the Code of General Ordinances of the City of Kenosha.)

1. Licensee Name: Abdul Kaisani District # 11
(NOTE: must be same name as beer/liquor license)

2. Trade Name & Address: Olympus Bar & Lounge 3214-60th St 53144

3. If license is in the name of a Corporation or LLC, Agent Name: —

4. Date of Birth of Agent (if Corporation/LLC) or Individual: Abdul A. Kaisani

5. Address: 408 Emerald Drive Mt. Pleasant, WI 53406 Phone: 804-405-4317 Email: akaisani@gmail.com
(correspondence will be via email if address is given)

6. Driver's License Number: [illegible]
(must indicate if this is not a Wisconsin DL)

7. Have you, as an adult, ever been convicted of a major crime (felony) or minor crime (misdemeanor) in Wisconsin, or in any other State; or do you have a charge pending at this time? □ Yes ☒ No
If yes, state: **charge, year, result**
~~FEB 12 2013 AMUSEMENT DEVICE VIOLATION PAID FINE~~

8. Have you, as an adult, ever been convicted of violating a municipal or county ordinance in Wisconsin or in any state; or do you have a charge pending at this time? ☒ Yes □ No
If yes, state: **charge, year, result**
FEB 12-2013- AMUSEMENT DEVICE VIOLATION PAID FINE.

9. Have you, as an adult, ever served time; or have been sentenced to serve time in a jail or prison in Wisconsin or any other State? □Yes ☒No **If yes, explain:**

-OVER-

10. Have you ever had your driver's license suspended or revoked in Wisconsin or in any other State?
□ Yes ☒ No **If yes, explain:**

11. Have you received any traffic citations in Wisconsin or in any other State within the past five (5) years; or do you have any such citations pending? □ Yes ☒ No
If **yes**, state: **charge, year, result**

12. Have you, as an adult, within the past five (5) years, while operating a business or engaged in a profession, been convicted of any state or federal charges; or do you have charges pending at this time involving unfair trade practices, unethical conduct, or discrimination? □ Yes ☒ No
If **yes**, state: **charge, year, result**

13. List the name and address of all employers for which you have worked and/or businesses you have operated in the past five (5) years:
TONYS BAR B.Q. RICHMOND VA. 1983 - 2012
OLYMPUS BAR LOUNGE 2012 - PRESENT

14. List all addresses at which you have lived in the past five (5) years:
408 EMERALD DR. MT. PLEASANT WI. 53406
1031 KESTREL DR. ASHLAND VA. 23005

READ CAREFULLY BEFORE SIGNING: Under penalty provided for by law, the undersigned states that each of the above questions has been truthfully answered to the best of his/her/their knowledge. (Individual applicants and each member of a partnership must sign; designated corporate officers must sign.)

Applicant's Signature: _____ **Date:** 11.22.13
(Individual/Agent of Corporation)

I have received a copy of the NOTICE pertaining to LICENSE/PERMIT APPLICATIONS from the City Clerk's Office _____
(Applicant's Initials)

E-MAILED NOV 1 2 2013

FILED 11/14/13
INITIALS MN
ADV/NO ADVERSE
LP 12/9
CC 12/16

PAWN BROKER LICENSE
(Chapter 13.02, Code of General Ordinances)

Type: 166 Fee: $210.00/year

Expires: December 31, 2014

The Licensee (applicant) is ☐ an individual ~~☐ a partnership~~ JVS ☒ a corporation

Licensee Name: Gnt Financial LLC, District # 12th

Trade Name: Gnt Jewelry & Loan Address: 7944 Sheridan Rd #3 Kenosh 53143

Phone Number: 262-653-9200 Email: gntjewelryloan@Gmail.Com

If Individual: list name, home address, phone number, date of birth:

If Partnership or Corporation: list name, home address, phone number, & date of birth of all partners/members:
Thomas V. Stout 700 S. Mcarec WAUkegan IL 60085 317-716-5248
Gregory Lagunov 2454 Seminole Ct. Riverwoods IL 60015 847-293-7878

APPLICANT'S REPORT OF POLICE RECORD (ATTACHMENT)

Each applicant, including an individual, a partner or an officer, director or agent of any corporation must fill out and attach an "Applicant's Report of Police Record". (This form may be duplicated if more copies are needed) Attached? ☒ Yes ☐ No

BUSINESS INFORMATION

Business Name, Address, State, Zip Code and Business Number:
Gnt Jewelry & Loan 7944 Sheridan Rd #3 Kenosha 53143 262-653-9200

Building Owner's Name, Home Address, State, Zip Code and Phone Number:
Himmat Gill 6035 A+A mount Cir. Racine WI 53406 4114801706

Manager or Proprietor of Business, Home Address, State, Zip Code, Phone Number, Email:
Thomas V. Stout 700 S. Mcarec WAUkegan IL 60085 317-716-5248
tstout1000@YAhoo.Com

GENERAL INFORMATION

Have you attached to this application a Five Hundred ($500) Dollar Bond, with at least two (2) sureties, for the observation of all City of Kenosha Ordinances relating to pawnbrokers? ☒ Yes ☐ No

Have you obtained from the City Clerk a current copy of S. 13.02 of the Code of General Ordinances entitled "Pawnbrokers"? ☒ Yes ☐ No

Do you understand that it is your responsibility to obtain a supply of "Property Transaction Record" forms? ☒ Yes ☐ No

(PLEASE NOTE THAT YOU ARE RESPONSIBLE FOR KNOWING AND ABIDING BY THE CONTENTS THEREOF AND YOUR LICENSE MAY BE SUSPENDED OR REVOKED AND/OR YOU MAY BE SUBJECT TO A CIVIL FORFEITURE FOR NON-COMPLIANCE THEREWITH.)

LICENSE REVOCATION

I/We, the undersigned, understand that this license may be denied or revoked by the Common Council for fraud, misrepresentation or false statement contained in the application or for any violation of §943.34 (receiving stolen property), 948.62 (receiving stolen property from a child) or 948.63 (receiving property from a child), Wisconsin Statutes.

The undersigned, being first duly sworn on oath, disposes and says that (he/she is) (they are) the applicant(s) named in the foregoing application; that (he/she has) (they have) read each and every question and answered each and every question truly, correctly and completely, under penalty of law for failure to do so.

Individual/Partner LLC Partner

Partner/Corporate Officer LLC partner

Corporate Officer/Director

Corporate Officer/Director

Subscribed and sworn to before me this 12TH day of NOVEMBER, 2013.

Notary Public

My Commission Expires: 11-28-2016

"OFFICIAL SEAL"
Ivaylo Draganov
Notary Public, State of Illinois
My Commission Expires 11/28/2016

I have received a copy of the NOTICE pertaining to LICENSE/PERMIT APPLICATIONS from the City Clerk's Office JVS
(Applicant's Initials)

SECONDHAND ARTICLE DEALER'S LICENSE

(Chapter 13.02, Code of General Ordinances)

Type: 164 **Fee: $27.50/year**

Expires: December 31, 2014

FILED 11/18/13
INITIALS MM
ADV/NO ADVERSE
LP 12/9
CC 12/16

E-MAILED NOV 18 [illegible]

he Licensee (applicant) is □ an individual ~~☒ a partnership~~ ☒ a corporation

icensee Name: Colosseum Games LLC District # 14

rade Name: Colosseum Games Address: 5719 75th Street Kenosha, WI 53142

hone Number: 262-909-6121 Email: colosseumgamesofwi@gmail.com

Individual: list name, home address, phone number, date of birth:

Partnership or Corporation: list name, home address, phone number, & date of birth of all partners/members:

Gerald Z. Robinson
7210 57th Ave Apt 101 Kenosha, WI 53142
262-515-6607
04/28/82

Kevin D. Ollila
6412 62nd Ave Kenosha, WI 53142
262-515-0959

APPLICANT'S REPORT OF POLICE RECORD (ATTACHMENT)

ach applicant, including an individual, a partner or an officer, director or agent of any corporation must fill out and attach an Applicant's Report of Police Record". (This form may be duplicated if more copies are needed) Attached? ☒ Yes □ No

BUSINESS INFORMATION

usiness Name, Address, State, Zip Code and Business Number: Colosseum Games LLC 5719 75th Street Kenosha, WI 53142 262-909-6121

uilding Owner's Name, Home Address, State, Zip Code and Phone Number: KSG Development 5715 75th St 719-694-4123

anager or Proprietor of Business, Home Address, State, Zip Code, Phone Number, Email: erald Robinson 7210 57th Ave Apt 101 Kenosha, WI 53142 262-515-6607 Kenowhereman@yahoo.com

GENERAL INFORMATION

ave you obtained from the City Clerk a current copy of S.13.02 of the Code of General Ordinances entitled Secondhand Article and Jewelry Dealers"? ☒ Yes □ No

o you understand that it is your responsibility to obtain a supply of "Property Transaction Record" forms? ☒ Yes □ No

LEASE NOTE THAT YOU ARE RESPONSIBLE FOR KNOWING AND ABIDING BY THE CONTENTS THEREOF AND YOUR LICENSE AY BE SUSPENDED OR REVOKED AND/OR YOU MAY BE SUBJECT TO A CIVIL FORFEITURE FOR NON-COMPLIANCE THEREWITH.)

LICENSE REVOCATION

We, the undersigned, understand that this license may be denied or revoked by the Common Council for fraud, ıisrepresentation or false statement contained in the application or for any violation of §943.34 (receiving stolen roperty), 948.62 (receiving stolen property from a child) or 948.63 (receiving property from a child), Wisconsin Statutes.

he undersigned, being first duly sworn on oath, disposes and says that (he/she is) (they are) the applicant(s) named in the ›regoing application; that (he/she has) (they have) read each and every question and answered each and every question uly, correctly and completely, under penalty of law for failure to do so.

ıdividual/Partner

Partner/Corporate Officer

orporate Officer/Director

Corporate Officer/Director

ubscribed and sworn to before me this 18 day of November, 2013.

otary Public
ly Commission Expires: 4-11-17

ave received a copy of the NOTICE pertaining to LICENSE/PERMIT APPLICATIONS from the City Clerk's Office

(Applicant's Initials)

SECONDHAND ARTICLE DEALER'S LICENSE

(Chapter 13.02, Code of General Ordinances)

Type: 164 Fee: $27.50/year

Expires: December 31, 2014

FILED	11/11/13
INITIALS	MM
ADV/NO ADVERSE	
LP	12/9
CC	12/16

E-MAILED NOV 11 REC'D

he Licensee (applicant) is ☒ an individual ☐ a partnership ☐ a corporation

icensee Name: Jerome F. Binsfeld District # 15

rade Name: JB Coins Address: 6040 39th Ave Suite 7

hone Number: 262-657-4653 Email:

Individual: list name, home address, phone number, date of birth: Jerome F Binsfeld 262-654-6272 4620 Harrison RD Kenosha, WI 53142

Partnership or Corporation: list name, home address, phone number, & date of birth of all partners/members:

APPLICANT'S REPORT OF POLICE RECORD (ATTACHMENT)

ach applicant, including an individual, a partner or an officer, director or agent of any corporation must fill out and attach an Applicant's Report of Police Record". (This form may be duplicated if more copies are needed) Attached? ☐ Yes ☐ No

BUSINESS INFORMATION

usiness Name, Address, State, Zip Code and Business Number:
JB Coins 6040 39th Ave Suite 7 Kenosha, WI 53142

uilding Owner's Name, Home Address, State, Zip Code and Phone Number:
Dino Paielli Paielli's bakery 6020 39th Ave Kenosha, WI 53142 654-0785

Ianager or Proprietor of Business, Home Address, State, Zip Code, Phone Number, Email:
Same

GENERAL INFORMATION

Iave you obtained from the City Clerk a current copy of S.13.02 of the Code of General Ordinances entitled Secondhand Article and Jewelry Dealers"? ☐ Yes ☒ No Mailed 11/11/13 MM

o you understand that it is your responsibility to obtain a supply of "Property Transaction Record" forms? ☒ Yes ☐ No

LEASE NOTE THAT YOU ARE RESPONSIBLE FOR KNOWING AND ABIDING BY THE CONTENTS THEREOF AND YOUR LICENSE MAY BE SUSPENDED OR REVOKED AND/OR YOU MAY BE SUBJECT TO A CIVIL FORFEITURE FOR NON-COMPLIANCE THEREWITH.)

LICENSE REVOCATION

/We, the undersigned, understand that this license may be denied or revoked by the Common Council for fraud, nisrepresentation or false statement contained in the application or for any violation of §943.34 (receiving stolen roperty), 948.62 (receiving stolen property from a child) or 948.63 (receiving property from a child), Wisconsin Statutes.

.he undersigned, being first duly sworn on oath, disposes and says that (he/she is) (they are) the applicant(s) named in the oregoing application; that (he/she has) (they have) read each and every question and answered each and every question ruly, correctly and completely, under penalty of law for failure to do so.

Jerome F Bonifield
ndividual/Partner

Partner/Corporate Officer

Corporate Officer/Director

Corporate Officer/Director

ubscribed and sworn to before me this 6th day of November, 2013.

Susan J Smuda
otary Public
ly Commission Expires: 5-17-15

SUSAN J SMUDA
Notary Public
State of Wisconsin

ave received a copy of the NOTICE pertaining to LICENSE/PERMIT APPLICATIONS from the City Clerk's Office JB
(Applicant's Initials)

SECONDHAND ARTICLE DEALER'S LICENSE

(Chapter 13.02, Code of General Ordinances)

Type: 164 Fee: $27.50/year

Expires: December 31, 2014

FILED	11-15-13
INITIALS	RS
ADV	NO ADVERSE
LP	12/9
CC	12/16

E-MAILED NOV 15 REC'D

he Licensee (applicant) is ☐ an individual ☐ a partnership ☒ a corporation

icensee Name: Keynote Inc District # 14

rade Name: Music Go Round Address: 5708 A 75th Street

hone Number: 262-697-7625 Email: Skott@MusicGoRoundKenosha.com

Individual: list name, home address, phone number, date of birth: N/A

Partnership or Corporation: list name, home address, phone number, & date of birth of all partners/members:
Skott Moriarty · 9339 Brookside Drive Hales Corners WI 53130 414-524-1021
Kenneth Siegel 3666 E. Iona Terrace Cudahy WI 53110 414-324-3739

APPLICANT'S REPORT OF POLICE RECORD (ATTACHMENT)

ach applicant, including an individual, a partner or an officer, director or agent of any corporation must fill out and attach an Applicant's Report of Police Record". (This form may be duplicated if more copies are needed) Attached? ☒ Yes ☐ No

BUSINESS INFORMATION

usiness Name, Address, State, Zip Code and Business Number:
Music Go Round 5708 A 75th Street Kenosha WI 53142 262-697-7625

uilding Owner's Name, Home Address, State, Zip Code and Phone Number:
Plaza 50 / Richard Yusdeh PO Box 240788 Milwaukee WI 53224 262-786-4365

Manager or Proprietor of Business, Home Address, State, Zip Code, Phone Number, Email:
Owners listed above

GENERAL INFORMATION

Have you obtained from the City Clerk a current copy of S.13.02 of the Code of General Ordinances entitled Secondhand Article and Jewelry Dealers"? ☒ Yes ☐ No

Do you understand that it is your responsibility to obtain a supply of "Property Transaction Record" forms? ☒ Yes ☐ No

PLEASE NOTE THAT YOU ARE RESPONSIBLE FOR KNOWING AND ABIDING BY THE CONTENTS THEREOF AND YOUR LICENSE MAY BE SUSPENDED OR REVOKED AND/OR YOU MAY BE SUBJECT TO A CIVIL FORFEITURE FOR NON-COMPLIANCE THEREWITH.)

LICENSE REVOCATION

/We, the undersigned, understand that this license may be denied or revoked by the Common Council for fraud, nisrepresentation or false statement contained in the application or for any violation of §943.34 (receiving stolen roperty), 948.62 (receiving stolen property from a child) or 948.63 (receiving property from a child), Wisconsin Statutes.

The undersigned, being first duly sworn on oath, disposes and says that (he/she is) (they are) the applicant(s) named in the oregoing application; that (he/she has) (they have) read each and every question and answered each and every question ruly, correctly and completely, under penalty of law for failure to do so.

ndividual/Partner

Partner/Corporate Officer

Corporate Officer/Director

Corporate Officer/Director

ubscribed and sworn to before me this 11th day of November, .

lotary Public

fy Commission Expires: 5-18-2014

SCOTT M. WISNIEWSKI
Notary Public
State of Wisconsin

have received a copy of the NOTICE pertaining to LICENSE/PERMIT APPLICATIONS from the City Clerk's Office

(Applicant's Initials)

SECONDHAND ARTICLE DEALER'S LICENSE

(Chapter 13.02, Code of General Ordinances)

Type: 164 Fee: $27.50/year

Expires: December 31, 2014

FILED	11/11/13
INITIALS	mn
ADV/NO ADVERSE	
LP	12/9
CC	12/16

E-MAILED NOV 11 REC'D

ıe Licensee (applicant) is ☐ an individual ☐ a partnership ☒ a corporation

censee Name: Maggie Mae's LLC District # 2

ade Name: Maggie Mae's Address: 1016 60th Street

ıone Number: (262) 237-8232 Email: maggie.maes.resale@gmail.com

Individual: list name, home address, phone number, date of birth: 4327 Wilsm Rd 847-997-1784

Partnership or Corporation: list name, home address, phone number, & date of birth of all partners/members:
Margaret Cintron, 4327 Wilsm Rd Kenosha (262) 237-8232

APPLICANT'S REPORT OF POLICE RECORD (ATTACHMENT)

ıch applicant, including an individual, a partner or an officer, director or agent of any corporation must fill out and attach an Applicant's Report of Police Record". (This form may be duplicated if more copies are needed) Attached? ☒ Yes ☒ No NC

BUSINESS INFORMATION

usiness Name, Address, State, Zip Code and Business Number:
Maggie Maes 1016 60th Street Kenosha WI 53140 (262) 237-8232

uilding Owner's Name, Home Address, State, Zip Code and Phone Number:
Frank Espisito 6767 Pershing Blvd Kenosha WI 53142

Manager or Proprietor of Business, Home Address, State, Zip Code, Phone Number, Email:
Margaret Cintron 4327 Wilsm Rd Kenosha WI 53142 maggie.maes.resale@gmail.com
maggie.maes.resale@gmail.com

GENERAL INFORMATION

ave you obtained from the City Clerk a current copy of S.13.02 of the Code of General Ordinances entitled Secondhand Article and Jewelry Dealers"? ☒ Yes ☐ No

o you understand that it is your responsibility to obtain a supply of "Property Transaction Record" forms? ☒ Yes ☐ No

LEASE NOTE THAT YOU ARE RESPONSIBLE FOR KNOWING AND ABIDING BY THE CONTENTS THEREOF AND YOUR LICENSE IAY BE SUSPENDED OR REVOKED AND/OR YOU MAY BE SUBJECT TO A CIVIL FORFEITURE FOR NON-COMPLIANCE THEREWITH.)

LICENSE REVOCATION

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Margaret A Cinton
ndividual/Partner

Partner/Corporate Officer

Corporate Officer/Director

Corporate Officer/Director

ubscribed and sworn to before me this 11 day of November, 2013.

Notary Public
My Commission Expires: 4-11-17

ave received a copy of the NOTICE pertaining to LICENSE/PERMIT APPLICATIONS from the City Clerk's Office MC
(Applicant's Initials)

E-MAILED DEC 0 2 REC'D

SECONDHAND ARTICLE DEALER'S LICENSE

(Chapter 13.02, Code of General Ordinances)

Type: 164 Fee: $27.50/year

Expires: December 31, 2014

FILED 12-2-13
INITIALS RS
ADV/NO ADVERSE 12/9
LP
CC 12/16

he Licensee (applicant) is ☐ an individual ☒ a partnership ☐ a corporation

icensee Name: ~~Ed + Julie Dominguez~~ A Vintage Vault, LLC District # 8

rade Name: A Vintage Vault Address: 3816 Roosevelt Rd, Kenosha WI 53142

hone Number: 262-697-9606 Email: avintagevault.kenosha@gmail.com

Individual: list name, home address, phone number, date of birth:

Partnership or Corporation: list name, home address, phone number, & date of birth of all partners/members:
Ed Dominguez, 2504 41st Ave, Kenosha, WI 53144, 262-945-9542,
Julie Dominguez, " " " , 262-945-4559,

APPLICANT'S REPORT OF POLICE RECORD (ATTACHMENT)

ach applicant, including an individual, a partner or an officer, director or agent of any corporation must fill out and attach an Applicant's Report of Police Record". (This form may be duplicated if more copies are needed) Attached? ☒ Yes ☐ No

BUSINESS INFORMATION

usiness Name, Address, State, Zip Code and Business Number:
A Vintage Vault, 3816 Roosevelt Rd, Kenosha, WI 53142, 262-697-9606

uilding Owner's Name, Home Address, State, Zip Code and Phone Number:
Shirley Willie, 3810 Roosevelt Rd Kenosha

Manager or Proprietor of Business, Home Address, State, Zip Code, Phone Number, Email: avintagevault.kenosha@gmail.com
Julie Dominguez, 2504 41st Ave, Kenosha WI 53144, 262-945-4559

GENERAL INFORMATION

Have you obtained from the City Clerk a current copy of S.13.02 of the Code of General Ordinances entitled Secondhand Article and Jewelry Dealers"? ☒ Yes ☐ No (Mailed 12/2/13 RS)

Do you understand that it is your responsibility to obtain a supply of "Property Transaction Record" forms? ☒ Yes ☐ No

PLEASE NOTE THAT YOU ARE RESPONSIBLE FOR KNOWING AND ABIDING BY THE CONTENTS THEREOF AND YOUR LICENSE MAY BE SUSPENDED OR REVOKED AND/OR YOU MAY BE SUBJECT TO A CIVIL FORFEITURE FOR NON-COMPLIANCE THEREWITH.)

LICENSE REVOCATION

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Edward Dominguez
ndividual/Partner EDWARD DOMINGUEZ

Julie Dominguez
Partner/Corporate Officer JULIE DOMINGUEZ

orporate Officer/Director

Corporate Officer/Director

ubscribed and sworn to before me this 29 day of NOVEMBER, 2012.

otary Public
ly Commission Expires: 6/29/2014

MARK D. PECHER NOTARY PUBLIC STATE OF WISCONSIN

ave received a copy of the NOTICE pertaining to LICENSE/PERMIT APPLICATIONS from the City Clerk's Office Mailed 12/2/13
(Applicant's Initials) MM

E-MAILED NOV 27 REC'D

FILED 11/27
INITIALS RS
ADV/NO ADVERSE
LP 12/9
CC 12/16

SECONDHAND ARTICLE DEALER'S LICENSE

(Chapter 13.02, Code of General Ordinances)

Type: 164 Fee: $27.50/year

Expires: December 31, 2014

The Licensee (applicant) is ☐ an individual ☐ a partnership ☒ a corporation

Licensee Name: Old toys live on, LLC District # 12

Trade Name: Old toys live on Address: 7619 Sheridan rd Kenosha 53143

Phone Number: (262) 577-1696 Email: Oldtoyslivean@gmail.com

If Individual: list name, home address, phone number, date of birth:

If Partnership or Corporation: list name, home address, phone number, & date of birth of all partners/members:
Michael Thompson, 1806-24th St,

APPLICANT'S REPORT OF POLICE RECORD (ATTACHMENT)

Each applicant, including an individual, a partner or an officer, director or agent of any corporation must fill out and attach an "Applicant's Report of Police Record". (This form may be duplicated if more copies are needed) Attached? ☒ Yes ☐ No

BUSINESS INFORMATION

Business Name, Address, State, Zip Code and Business Number:
Old Toys live on 7619 Sheridan rd Kenosha WI 53143

Building Owner's Name, Home Address, State, Zip Code and Phone Number:
Mike Thompson

Manager or Proprietor of Business, Home Address, State, Zip Code, Phone Number, Email:
1806 24th Street Kenosha WI 53140 (262) 577-1696 Oldtoyslivean@gmail.com

GENERAL INFORMATION

Have you obtained from the City Clerk a current copy of S.13.02 of the Code of General Ordinances entitled "Secondhand Article and Jewelry Dealers"? ☒ Yes ☐ No

Do you understand that it is your responsibility to obtain a supply of "Property Transaction Record" forms? ☒ Yes ☐ No

(PLEASE NOTE THAT YOU ARE RESPONSIBLE FOR KNOWING AND ABIDING BY THE CONTENTS THEREOF AND YOUR LICENSE MAY BE SUSPENDED OR REVOKED AND/OR YOU MAY BE SUBJECT TO A CIVIL FORFEITURE FOR NON-COMPLIANCE THEREWITH.)

LICENSE REVOCATION

I/We, the undersigned, understand that this license may be denied or revoked by the Common Council for fraud, misrepresentation or false statement contained in the application or for any violation of §943.34 (receiving stolen property), 948.62 (receiving stolen property from a child) or 948.63 (receiving property from a child), Wisconsin Statutes.

The undersigned, being first duly sworn on oath, disposes and says that (he/she is) (they are) the applicant(s) named in the foregoing application; that (he/she has) (they have) read each and every question and answered each and every question truly, correctly and completely, under penalty of law for failure to do so.

Individual/Partner

Partner/Corporate Officer

Corporate Officer/Director

Corporate Officer/Director

Subscribed and sworn to before me this 27th November day of November, 2013.

Notary Public

My Commission Expires: 3/30/14

I have received a copy of the NOTICE pertaining to LICENSE/PERMIT APPLICATIONS from the City Clerk's Office MT
(Applicant's Initials)

E-MAILED NOV 20 REC'D

SECONDHAND ARTICLE DEALER'S LICENSE

(Chapter 13.02, Code of General Ordinances)

Type: 164 Fee: $27.50/year

Expires: December 31, 2014

FILED 11-2013
INITIALS TS
ADV/NO ADVERSE
LP 12/9
CC 12/16

ne Licensee (applicant) is ☒ an individual ☐ a partnership ☐ a corporation

icensee Name: John P. Fox District # 2

rade Name: CJD Aversa Antiques Address: ~~619-58~~ 619-58th ST.

hone Number: 262-496-0334 Email:

Individual: list name, home address, phone number, date of birth: John Fox 4803-7th AVE 262.496.0334

Partnership or Corporation: list name, home address, phone number, & date of birth of all partners/members:

APPLICANT'S REPORT OF POLICE RECORD (ATTACHMENT)

ach applicant, including an individual, a partner or an officer, director or agent of any corporation must fill out and attach an Applicant's Report of Police Record". (This form may be duplicated if more copies are needed) Attached? ☒ Yes ☐ No

BUSINESS INFORMATION

usiness Name, Address, State, Zip Code and Business Number: CJD AVERSA ANTIQUES 619-58th ST. Kenosha WI 53140 # WI 456-0000580769-04

uilding Owner's Name, Home Address, State, Zip Code and Phone Number: Swanington Prop. LLC 635 Wildwood Parkway Cape Coral FL. 33904 239.849.8074

Manager or Proprietor of Business, Home Address, State, Zip Code, Phone Number, Email: John Fox 4803-7th Ave Kenosha WI 53140 262.496.0334

GENERAL INFORMATION

Have you obtained from the City Clerk a current copy of S.13.02 of the Code of General Ordinances entitled Secondhand Article and Jewelry Dealers"? ☒ Yes ☐ No

Do you understand that it is your responsibility to obtain a supply of "Property Transaction Record" forms? ☒ Yes ☐ No

PLEASE NOTE THAT YOU ARE RESPONSIBLE FOR KNOWING AND ABIDING BY THE CONTENTS THEREOF AND YOUR LICENSE MAY BE SUSPENDED OR REVOKED AND/OR YOU MAY BE SUBJECT TO A CIVIL FORFEITURE FOR NON-COMPLIANCE THEREWITH.)

LICENSE REVOCATION

I/We, the undersigned, understand that this license may be denied or revoked by the Common Council for fraud, misrepresentation or false statement contained in the application or for any violation of §943.34 (receiving stolen property), 948.62 (receiving stolen property from a child) or 948.63 (receiving property from a child), Wisconsin Statutes.

The undersigned, being first duly sworn on oath, disposes and says that (he/she is) (they are) the applicant(s) named in the foregoing application; that (he/she has) (they have) read each and every question and answered each and every question truly, correctly and completely, under penalty of law for failure to do so.

Individual/Partner

Partner/Corporate Officer

Corporate Officer/Director

Corporate Officer/Director

Subscribed and sworn to before me this 26 day of November, 2013.

Notary Public
My Commission Expires: 4-11-17

have received a copy of the NOTICE pertaining to LICENSE/PERMIT APPLICATIONS from the City Clerk's Office
(Applicant's Initials)

E-MAIL FD NOV 20 REC'D

SECONDHAND ARTICLE DEALER'S LICENSE

(Chapter 13.02, Code of General Ordinances)

Type: 164 Fee: $27.50/year

Expires: December 31, 2014

FILED	11-20-13
INITIALS	RS
ADV/NO ADVERSE	
LP	12/9
CC	12/16

he Licensee (applicant) is ☒ an individual ☐ a partnership ☐ a corporation

icensee Name: Bonnie Mirkiewicz District # 2

rade Name: Forever Grateful Resale Boutique + Art Gallery Address: 5000 7th Ave

hone Number: 2624844139 Email: bonnie lnc@sbcglobal.net

Individual: list name, home address, phone number, date of birth: Bonnie Mirkiewicz

Partnership or Corporation: list name, home address, phone number, & date of birth of all partners/members:

Bonnie Mirkiewicz
7738 6th Ave 2624844139
Kenosha WI
53140

APPLICANT'S REPORT OF POLICE RECORD (ATTACHMENT)

ach applicant, including an individual, a partner or an officer, director or agent of any corporation must fill out and attach an Applicant's Report of Police Record". (This form may be duplicated if more copies are needed) Attached? ☒ Yes ☐ No

BUSINESS INFORMATION

usiness Name, Address, State, Zip Code and Business Number: 2624844139
Forever Grateful Resale Boutique + Art Gallery 5000 7th Ave Kenosha WI 53140

uilding Owner's Name, Home Address, State, Zip Code and Phone Number:
Robert Venn 5000 7th Ave, Kenosha WI 53140 262-652-9782

Manager or Proprietor of Business, Home Address, State, Zip Code, Phone Number, Email:
Bonnie Mirkiewicz 7738 6th Ave Kenosha WI 53143 2624844139
Bonnielnc@sbcglobal.net

GENERAL INFORMATION

Have you obtained from the City Clerk a current copy of S.13.02 of the Code of General Ordinances entitled Secondhand Article and Jewelry Dealers"? ☒ Yes ☐ No

Do you understand that it is your responsibility to obtain a supply of "Property Transaction Record" forms? ☒ Yes ☐ No

PLEASE NOTE THAT YOU ARE RESPONSIBLE FOR KNOWING AND ABIDING BY THE CONTENTS THEREOF AND YOUR LICENSE MAY BE SUSPENDED OR REVOKED AND/OR YOU MAY BE SUBJECT TO A CIVIL FORFEITURE FOR NON-COMPLIANCE THEREWITH.)

LICENSE REVOCATION

/We, the undersigned, understand that this license may be denied or revoked by the Common Council for fraud, nisrepresentation or false statement contained in the application or for any violation of §943.34 (receiving stolen roperty), 948.62 (receiving stolen property from a child) or 948.63 (receiving property from a child), Wisconsin Statutes.

The undersigned, being first duly sworn on oath, disposes and says that (he/she is) (they are) the applicant(s) named in the oregoing application; that (he/she has) (they have) read each and every question and answered each and every question ruly, correctly and completely, under penalty of law for failure to do so.

Bonni Emery Bonni Emery

ndividual/Partner

Partner/Corporate Officer

Corporate Officer/Director

Corporate Officer/Director

ubscribed and sworn to before me this 26 day of November, 2013.

Michele L Regan

lotary Public

Ay Commission Expires: 4-11-17

ave received a copy of the NOTICE pertaining to LICENSE/PERMIT APPLICATIONS from the City Clerk's Office Bm

(Applicant's Initials)

SECONDHAND ARTICLE DEALER'S LICENSE

(Chapter 13.02, Code of General Ordinances)

FILED 11/20
INITIALS
ADV NO ADVERSE
LP 12/9
CC 12/14

Type: 164 Fee: $27.50/year E-MAILED NOV 20 REC'D

Expires: December 31, 2014

The Licensee (applicant) is ☐ an individual ☐ a partnership ☑ a corporation

Licensee Name: Suburban Ore LLC District # 2

Trade Name: Suburban Ore Address: 627 - 58th st. Kenosha, WI 53140

Phone Number: 262-748-7181 Email: suburbanore@gmail.com

If Individual: list name, home address, phone number, date of birth:

If Partnership or Corporation: list name, home address, phone number, & date of birth of all partners/members:
Ellen Forwerda, 7824-5th Ave. Kenosha, WI, 53143 / 262-748-7181

APPLICANT'S REPORT OF POLICE RECORD (ATTACHMENT)

Each applicant, including an individual, a partner or an officer, director or agent of any corporation must fill out and attach an "Applicant's Report of Police Record". (This form may be duplicated if more copies are needed) Attached? ☑ Yes ☐ No

BUSINESS INFORMATION

Business Name, Address, State, Zip Code and Business Number:
Suburban Ore 627-58th st, Kenosha, WI 53140 ph# 262-748-7181

Building Owner's Name, Home Address, State, Zip Code and Phone Number:
Dee Marie Swanningson (Swanningson Properties LLC) 635 Wildwood Pky, Cape Coral FL 33904 ph# 239-849-8074

Manager or Proprietor of Business, Home Address, State, Zip Code, Phone Number, Email:
Ellen Forwerda, 7824-5th Ave. Kenosha, WI, 53143, 262-748-7181
suburbanore@gmail.com

GENERAL INFORMATION

Have you obtained from the City Clerk a current copy of S.13.02 of the Code of General Ordinances entitled "Secondhand Article and Jewelry Dealers"? ☑ Yes ☐ No

Do you understand that it is your responsibility to obtain a supply of "Property Transaction Record" forms? ☑ Yes ☐ No

(PLEASE NOTE THAT YOU ARE RESPONSIBLE FOR KNOWING AND ABIDING BY THE CONTENTS THEREOF AND YOUR LICENSE MAY BE SUSPENDED OR REVOKED AND/OR YOU MAY BE SUBJECT TO A CIVIL FORFEITURE FOR NON-COMPLIANCE THEREWITH.)

LICENSE REVOCATION

I/We, the undersigned, understand that this license may be denied or revoked by the Common Council for fraud, misrepresentation or false statement contained in the application or for any violation of §943.34 (receiving stolen property), 948.62 (receiving stolen property from a child) or 948.63 (receiving property from a child), Wisconsin Statutes.

The undersigned, being first duly sworn on oath, disposes and says that (he/she is) (they are) the applicant(s) named in the foregoing application; that (he/she has) (they have) read each and every question and answered each and every question truly, correctly and completely, under penalty of law for failure to do so.

Individual/Partner

Partner/Corporate Officer

Corporate Officer/Director

Corporate Officer/Director

Subscribed and sworn to before me this 20th day of November, 2013.

Notary Public

My Commission Expires: 3/15/15

I have received a copy of the NOTICE pertaining to LICENSE/PERMIT APPLICATIONS from the City Clerk's Office EZ

(Applicant's Initials)

SECONDHAND ARTICLE DEALER'S LICENSE

(Chapter 13.02, Code of General Ordinances)

Type: 164 Fee: $27.50/year

Expires: December 31, 2014

FILED 11/21/13
INITIALS
ADV/NO ADVERSE
LP 12/9
CC 12/16

E-MAILED NOV 21 REC'D

he Licensee (applicant) is ☐ an individual ☐ a partnership ☒ a corporation

icensee Name: ~~CAROLE M. EISENHAUER~~ CD DVD Game, LLC (MO) District # 14

'rade Name: CD DVD GAME WAREHOUSE Address: 3717-80th ST KENOSHA 53142

hone Number: 262-942.9400 Email: cmecdw@aol.com.

f Individual: list name, home address, phone number, date of birth:

f Partnership or Corporation: list name, home address, phone number, & date of birth of all partners/members:
CAROLE M. EISENHAUER 7515-26th AVE, KENOSHA, WI 53143 6520127

APPLICANT'S REPORT OF POLICE RECORD (ATTACHMENT)

ach applicant, including an individual, a partner or an officer, director or agent of any corporation must fill out and attach an Applicant's Report of Police Record". (This form may be duplicated if more copies are needed) Attached? ☒ Yes ☐ No

BUSINESS INFORMATION

usiness Name, Address, State, Zip Code and Business Number:
CD DVD GAME WAREHOUSE

uilding Owner's Name, Home Address, State, Zip Code and Phone Number:
A&R KATZ MANAGEMENT 3175 COMMERCIAL AVE, NORTHBROOK, IL 847-205-1200

anager or Proprietor of Business, Home Address, State, Zip Code, Phone Number, Email:
SAME AS ABOVE

GENERAL INFORMATION

ve you obtained from the City Clerk a current copy of S.13.02 of the Code of General Ordinances entitled econdhand Article and Jewelry Dealers"? ☒ Yes ☐ No

you understand that it is your responsibility to obtain a supply of "Property Transaction Record" forms? ☒ Yes ☐ No

EASE NOTE THAT YOU ARE RESPONSIBLE FOR KNOWING AND ABIDING BY THE CONTENTS THEREOF AND YOUR LICENSE AY BE SUSPENDED OR REVOKED AND/OR YOU MAY BE SUBJECT TO A CIVIL FORFEITURE FOR NON-COMPLIANCE THEREWITH.)

LICENSE REVOCATION

I/We, the undersigned, understand that this license may be denied or revoked by the Common Council for fraud, misrepresentation or false statement contained in the application or for any violation of §943.34 (receiving stolen property), 948.62 (receiving stolen property from a child) or 948.63 (receiving property from a child), Wisconsin Statutes.

The undersigned, being first duly sworn on oath, disposes and says that (he/she is) (they are) the applicant(s) named in the foregoing application; that (he/she has) (they have) read each and every question and answered each and every question truly, correctly and completely, under penalty of law for failure to do so.

Individual/Partner

Partner/Corporate Officer

Corporate Officer/Director

Corporate Officer/Director

Subscribed and sworn to before me this 21st day of November, 2013.

Notary Public

My Commission Expires: 05-10-2015

JAMES RODDEN NOTARY PUBLIC STATE OF WISCONSIN

have received a copy of the NOTICE pertaining to LICENSE/PERMIT APPLICATIONS from the City Clerk's Office _____
(Applicant's Initials)

E-MAILED NOV 20 2013

SECONDHAND JEWELRY DEALER'S LICENSE

(Chapter 13.02, Code of General Ordinances)

Type: 165 Fee: $30.00/year

Expires: December 31, 2014

FILED	11-20-13
INITIALS	RS
ADV/NO ADVERSE	
LP	12/9
CC	12/16

ne Licensee (applicant) is ☐ an individual ☐ a partnership ☒ a corporation

censee Name: Gold Diamond + Design Inc District # 16

ade Name: Gold Diamond + Design Inc Address: 10320 75th St Suite B Kenosha WI 53142

ione Number: 262-697-0884 Email: golddiamonddesign@sbcglobal.net

Individual: list name, home address, phone number, date of birth:

Partnership or Corporation: list name, home address, phone number, & date of birth of all partners/members:

udrey Vesnefsky 3324 13th St Racine WI 53405 262-697-0884

don Langsfeld 3324 13th St Racine WI 53405 262-697-0884

APPLICANT'S REPORT OF POLICE RECORD (ATTACHMENT)

ch applicant, including an individual, a partner or an officer, director or agent of any corporation must fill out and attach an pplicant's Report of Police Record". (This form may be duplicated if more copies are needed) Attached? ☒ Yes ☐ No

BUSINESS INFORMATION

siness Name, Address, State, Zip Code and Business Number:

old Diamond + Design Inc 10320 75th St Suite B Kenosha WI 53142 262-697-0884

ilding Owner's Name, Home Address, State, Zip Code and Phone Number:

ryan Kozak 10320 75th St Suite A Kenosha, WI 53142 697-8766

nager or Proprietor of Business, Home Address, State, Zip Code, Phone Number, Email:

ryan Kozak 10320 75th St Suite A Kenosha WI 53142 697.8766

GENERAL INFORMATION

ve you obtained from the City Clerk a current copy of S.13.02 of the Code of General Ordinances entitled econdhand Article and Jewelry Dealers"? ☐ Yes ☒ No

you understand that it is your responsibility to obtain a supply of "Property Transaction Record" forms? ☒ Yes ☐ No

EASE NOTE THAT YOU ARE RESPONSIBLE FOR KNOWING AND ABIDING BY THE CONTENTS THEREOF AND YOUR LICENSE Y BE SUSPENDED OR REVOKED AND/OR YOU MAY BE SUBJECT TO A CIVIL FORFEITURE FOR NON-COMPLIANCE THEREWITH.)

LICENSE REVOCATION

I/We, the undersigned, understand that this license may be denied or revoked by the Common Council for fraud, misrepresentation or false statement contained in the application or for any violation of §943.34 (receiving stolen property), 948.62 (receiving stolen property from a child) or 948.63 (receiving property from a child), Wisconsin Statutes.

The undersigned, being first duly sworn on oath, disposes and says that (he/she is) (they are) the applicant(s) named in the foregoing application; that (he/she has) (they have) read each and every question and answered each and every question truly, correctly and completely, under penalty of law for failure to do so.

Individual/Partner

Partner/Corporate Officer

Corporate Officer/Director

Corporate Officer/Director

Subscribed and sworn to before me this 14th day of November, 2013.

Notary Public

My Commission Expires: 9-4-16

NOTARY PUBLIC
KATHY OLLE
STATE OF WISCONSIN

I have received a copy of the NOTICE pertaining to LICENSE/PERMIT APPLICATIONS from the City Clerk's Office _____
(Applicant's Initials)

SECONDHAND JEWELRY DEALER'S LICENSE

(Chapter 13.02, Code of General Ordinances)

Type: 165 Fee: $30.00/year

Expires: December 31, 2014

FILED	11/26
INITIALS	MC
ADV/NO ADVERSE	
I.P	12/9
CC	12/16

The Licensee (applicant) is ☒ an individual ☐ a partnership ☐ a corporation

Licensee Name: Jacob Sadoff District # 8

Trade Name: Midwest Goldbuyers Address: 3824 Roosevelt Rd. Kenosha, WI

Phone Number: 630-823-3099 Email: operations@midwestgoldbuyers.com

If Individual: list name, home address, phone number, date of birth: Jacob Sadoff 300 N. Martingale Rd. 630-233-0330

If Partnership or Corporation: list name, home address, phone number, & date of birth of all partners/members:

APPLICANT'S REPORT OF POLICE RECORD (ATTACHMENT)

Each applicant, including an individual, a partner or an officer, director or agent of any corporation must fill out and attach an "Applicant's Report of Police Record". (This form may be duplicated if more copies are needed) Attached? ☒ Yes ☐ No

Yes

BUSINESS INFORMATION

Business Name, Address, State, Zip Code and Business Number:
Midwest Goldbuyers 3824 Roosevelt Rd., Kenosha, WI 53142

Building Owner's Name, Home Address, State, Zip Code and Phone Number:
Rich Willie R&S Willie Properties, 3810 Roosevelt, Kenosha, WI 262-914-3276

Manager or Proprietor of Business, Home Address, State, Zip Code, Phone Number, Email:
Shari Jonas 300 N. Martingale Rd. Schaumburg, IL 60173, 630-823-3099 operations@midwestgoldbuyers.com

GENERAL INFORMATION

Have you obtained from the City Clerk a current copy of S.13.02 of the Code of General Ordinances entitled "Secondhand Article and Jewelry Dealers"? ☒ Yes ☐ No

Do you understand that it is your responsibility to obtain a supply of "Property Transaction Record" forms? ☒ Yes ☐ No

(PLEASE NOTE THAT YOU ARE RESPONSIBLE FOR KNOWING AND ABIDING BY THE CONTENTS THEREOF AND YOUR LICENSE MAY BE SUSPENDED OR REVOKED AND/OR YOU MAY BE SUBJECT TO A CIVIL FORFEITURE FOR NON-COMPLIANCE THEREWITH.)

LICENSE REVOCATION

I/We, the undersigned, understand that this license may be denied or revoked by the Common Council for fraud, misrepresentation or false statement contained in the application or for any violation of §943.34 (receiving stolen property), 948.62 (receiving stolen property from a child) or 948.63 (receiving property from a child), Wisconsin Statutes.

The undersigned, being first duly sworn on oath, disposes and says that (he/she is) (they are) the applicant(s) named in the foregoing application; that (he/she has) (they have) read each and every question and answered each and every question truly, correctly and completely, under penalty of law for failure to do so.

Individual/Partner

Partner/Corporate Officer

Corporate Officer/Director

Corporate Officer/Director

Subscribed and sworn to before me this 25th day of NOVEMBER, 2013.

Rita L. Harrity

Notary Public

My Commission Expires: 05-07-2016

RITA L. HARRITY
OFFICIAL SEAL
Notary Public - State of Illinois
My Commission Expires
May 07, 2016

I have received a copy of the NOTICE pertaining to LICENSE/PERMIT APPLICATIONS from the City Clerk's Office _____
(Applicant's Initials)

SECONDHAND JEWELRY DEALER'S LICENSE

(Chapter 13.02, Code of General Ordinances)

FILED	11/7/13
INITIALS	mm
ADV/NO ADVERSE	(NO ADVERSE)
LP	12/9
CC	12/16

Type: 165 Fee: $30.00/year E-MAILED NOV 07 REC'D

Expires: December 31, 2014 E-MAILED NOV 15 REC'D

he Licensee (applicant) is ☐ an individual ☐ a partnership ☒ a corporation

icensee Name: Westown of Kenosha Inc. District # 3

rade Name: Westown food & liquor Address: 3203 60th St. 53144

hone Number: (262) 654-8021 Email: westown2@sbcglobal.net

Individual: list name, home address, phone number, date of birth:

Partnership or Corporation: list name, home address, phone number, & date of birth of all partners/members:
Sameer A. Ali / 4718 wood Rd. Racine, WI 53403 / (262) 497-0238 /
Rani A. Ali / 6450 San Marino Dr. Racine, WI 53406 / (262) 994-3565 /

APPLICANT'S REPORT OF POLICE RECORD (ATTACHMENT)

ch applicant, including an individual, a partner or an officer, director or agent of any corporation must fill out and attach an pplicant's Report of Police Record". (This form may be duplicated if more copies are needed) Attached? ☒ Yes ☐ No

BUSINESS INFORMATION

siness Name, Address, State, Zip Code and Business Number:
Westown food & liquor, 3203 60th St. Kenosha, WI 53144, 654-8021

ilding Owner's Name, Home Address, State, Zip Code and Phone Number:
Westown LLC, 4718 wood Rd. Racine, WI 53403, (262) 497-0238

anager or Proprietor of Business, Home Address, State, Zip Code, Phone Number, Email:
Sameer Ali, 4718 wood Rd. Racine, WI 53403, (262) 497-0238
westown2@sbcglobal.net

GENERAL INFORMATION

ave you obtained from the City Clerk a current copy of S.13.02 of the Code of General Ordinances entitled econdhand Article and Jewelry Dealers"? ☒ Yes ☐ No

you understand that it is your responsibility to obtain a supply of "Property Transaction Record" forms? ☒ Yes ☐ No

LEASE NOTE THAT YOU ARE RESPONSIBLE FOR KNOWING AND ABIDING BY THE CONTENTS THEREOF AND YOUR LICENSE AY BE SUSPENDED OR REVOKED AND/OR YOU MAY BE SUBJECT TO A CIVIL FORFEITURE FOR NON-COMPLIANCE THEREWITH.)

LICENSE REVOCATION

/We, the undersigned, understand that this license may be denied or revoked by the Common Council for fraud, nisrepresentation or false statement contained in the application or for any violation of §943.34 (receiving stolen roperty), 948.62 (receiving stolen property from a child) or 948.63 (receiving property from a child), Wisconsin Statutes.

The undersigned, being first duly sworn on oath, disposes and says that (he/she is) (they are) the applicant(s) named in the oregoing application; that (he/she has) (they have) read each and every question and answered each and every question ruly, correctly and completely, under penalty of law for failure to do so.

ndividual/Partner

Partner/Corporate Officer

Corporate Officer/Director

Corporate Officer/Director

ubscribed and sworn to before me this 7 day of November, 2013.

Notary Public
My Commission Expires: 4-11-17

have received a copy of the NOTICE pertaining to LICENSE/PERMIT APPLICATIONS from the City Clerk's Office S.B
(Applicant's Initials)

Police use

FILED	12-2-13
INITIALS	25
ADV/NO ADVERSE	
LP	
CC	

SECONDHAND JEWELRY DEALER'S LICENSE

(Chapter 13.02, Code of General Ordinances)

Type: 165 Fee: $30.00/year

Expires: December 31, 2014

The Licensee (applicant) is ☒ an individual ☐ a partnership ☐ a corporation

Licensee Name: IRANI, NOOSHAD P. District # 7

Trade Name: SUPERIOR GOLD EXPRESS Address: 2400 52ND ST.

Phone Number: 262-654-4990 Email: PEESHEE345@YAHOO.COM
262-620-4155

If Individual: list name, home address, phone number, date of birth:

If Partnership or Corporation: list name, home address, phone number, & date of birth of all partners/members:

APPLICANT'S REPORT OF POLICE RECORD (ATTACHMENT)

Each applicant, including an individual, a partner or an officer, director or agent of any corporation must fill out and attach an "Applicant's Report of Police Record". (This form may be duplicated if more copies are needed) Attached? ☒ Yes ☐ No

BUSINESS INFORMATION

Business Name, Address, State, Zip Code and Business Number:
SUPERIOR GOLD EXPRESS 2400 52ND ST. KENOSHA, WI. 53140

Building Owner's Name, Home Address, State, Zip Code and Phone Number:
JOHN W. ROGOWSKI JR PROPERTIES

Manager or Proprietor of Business, Home Address, State, Zip Code, Phone Number, Email:
JR PROPERTIES 2409 52ND ST. SUITE 3 KENOSHA, WI. 53140
262-653-9132 (262-945-6559 EMERGENCY ONLY)

GENERAL INFORMATION

Have you obtained from the City Clerk a current copy of S.13.02 of the Code of General Ordinances entitled "Secondhand Article and Jewelry Dealers"? ☒ Yes ☐ No

Do you understand that it is your responsibility to obtain a supply of "Property Transaction Record" forms? ☒ Yes ☐ No

PLEASE NOTE THAT YOU ARE RESPONSIBLE FOR KNOWING AND ABIDING BY THE CONTENTS THEREOF AND YOUR LICENSE MAY BE SUSPENDED OR REVOKED AND/OR YOU MAY BE SUBJECT TO A CIVIL FORFEITURE FOR NON-COMPLIANCE THEREWITH.)

LICENSE REVOCATION

I/We, the undersigned, understand that this license may be denied or revoked by the Common Council for fraud, misrepresentation or false statement contained in the application or for any violation of §943.34 (receiving stolen property), 948.62 (receiving stolen property from a child) or 948.63 (receiving property from a child), Wisconsin Statutes.

The undersigned, being first duly sworn on oath, disposes and says that (he/she is) (they are) the applicant(s) named in the foregoing application; that (he/she has) (they have) read each and every question and answered each and every question truly, correctly and completely, under penalty of law for failure to do so.

Individual/Partner

Partner/Corporate Officer

Corporate Officer/Director

Corporate Officer/Director

Subscribed and sworn to before me this 2 day of December, 2013.

Notary Public
My Commission Expires: 12-4-16
Kenosha WI

I have received a copy of the NOTICE pertaining to LICENSE/PERMIT APPLICATIONS from the City Clerk's Office _____
(Applicant's Initials)

SECONDHAND JEWELRY DEALER'S LICENSE

Police Record Report

APPLICANT INFORMATION			
Date of Application	Name of Applicant	Applicant's date of Birth	Driver's License Status
12/2/2013	Nowshad Irani		Valid
License Number	Address of Applicant	Business (where license is to be used)	Business Address
	604-68th Street	Superior Gold Express	2400-52nd Street

DATE OF CHARGE	OFFENSE	CASE STATUS	OFFENSE LISTED ON APPLICATION	POINTS
9/4/2013	Miscellaneous Offense -Failing to Document – N1320001	GUILTY	N	N/A

CITY ATTORNEY'S RECOMMENDATION		
Offense Demerit Points		
Were all offenses listed on the application?		
TOTAL DEMERIT POINTS		

CITY ATTORNEY'S COMMENTS

APPLICATION IS FALSE, FAILED TO IDENTIFY VIOLATION ON THE APPLICATION.
FALSE APPLICATION IS A BASIS FOR DISCIPLINE.
POLICE DEPARTMENT INDICATES THAT OPERATOR IS COOPERATIVE WITH P.D. AND RESPONSIVE.

FINAL RECOMMENDATION

☐ **GRANT**, Subject to ☐ Demerit Points

☐ **DENY**, based on material police record (substantially related to the license activity)

☐ **DEFER or GRANT subject to** Non-Renewal Revocation due to False Application

APPLICANT'S REPORT- POLICE RECORD

NAME: IRANI, NOWSHAD P.

ADDRESS: 604 68TH ST. KENOSHA, WI. 53143

DATE OF BIRTH:

DRIVER'S LICENSE #: I

(must indicate if this is not a Wisconsin DL)

LICENSE APPLIED FOR: BUY & SELL USED JEWELRY

Applicant must truly, correctly and completely answer the following questions, or in the alternative, subject themselves to the penalties specified n §1.22 of the Code of General Ordinances, a copy of which is printed on the reverse side of this application. In the event the information is nntrue, incorrect, and/or incomplete it will be denied.

.. Have you, as an adult, ever been convicted of a major crime (felony) or minor crime (misdemeanor) in Wisconsin, or in any other State; or do you have a charge pending at this time? □ Yes ☒ No
If **yes**, state: **charge, year, result**

!. Have you, as an adult, ever been convicted of violating a municipal or county ordinance in Wisconsin or in any state; or do you have a charge pending at this time? □ Yes ☒ No
If **yes**, state: **charge, year, result**

i. Have you, as an adult, ever served time; or have been sentenced to serve time in a jail or prison in Wisconsin or any other State? □ Yes ☒ No **If yes, explain:**

l. Have you ever had your driver's license suspended or revoked in Wisconsin or in any other State?
□ Yes ☒ No **If yes, explain:**

i. Have you received any traffic citations in Wisconsin or in any other State within the past five (5) years; or do you have any such citations pending? □ Yes ☒ No
If **yes**, state: **charge, year, result**

-OVER-

6. Have you, as an adult, within the past five (5) years, while operating a business or engaged in a profession, been convicted of any state or federal charges; or do you have charges pending at this time involving unfair trade practices, unethical conduct, or discrimination? ☐ Yes ☒ No
If yes, state: **charge, year, result**

7. List the name and address of all employers for which you have worked and/or businesses you have operated in the past five (5) years:
SUPERIOR GOLD EXPRESS
8400 52ND ST.
KENOSHA, WI. 53140

8. List all addresses at which you have lived in the past five (5) years:
604 68TH ST. KENOSHA, WI. 53143

Applicant's Signature: _____ **Date:** 11-20-13

PLEASE READ: §1.22 LICENSE/PERMIT APPLICATIONS - CODE OF GENERAL ORDINANCES

A. Prohibition It shall be unlawful for any person, acting as an individual, a partner, a corporate officer, or an agent, to execute or file with any City Department, or to authorize any person to do so on their behalf, a license or permit application which is not true, correct and/or complete in all material respects and which was known by said person to be untrue, incorrect and/or incomplete. The term "in all material respects" shall mean with respect to some fact, which, if known to the granting authority, would be a basis or a consideration for license or permit denial.

B. Penalty
1) Any person violating Subsection A. above, shall, upon conviction thereof, be subject to a forfeiture not to exceed Five Hundred ($500) Dollars, plus the payment of the costs of prosecution, and, in default of the timely payment thereof, shall be committed to the County Jail until such forfeiture has been paid, but not to exceed a period of thirty (30) days.
2) The license or permit granting authority may grant, but withhold the issuance of, any license or permit for a period not to exceed thirty (30) days from the date of granting under circumstances wherein an application is found by the granting authority to have violated Section A. above, and the applicant was provided with an opportunity to appear before the granting authority. The granting authority may also issue a written warning to the applicant which shall be made part of their license/permit record for two (2) consecutive license/permit years. Where such finding and penalty is made and imposed by other than the Common Council, applicant may, within ten (10) days of receipt of oral or written notice of the imposition of any such penalty, whichever is first, if both oral and written notice is provided, file a Notice of Appeal with the City Clerk and have such matter reviewed by the Common Council.

§1.225 ADMINISTRATIVE CHARGE FOR PROCESSING LICENSE/PERMIT APPLICATIONS

The first Twenty-five ($25) Dollars of the application fee for any License/Permit shall be retained by the City in the event of a License/Permit denial or the withdrawal of the application by applicant for administrative and processing costs, and the balance, if any, refunded to the applicant. Where the application fee is less than Twenty-five ($25) Dollars, the entire application fee shall be retained by the City for administrative and processing costs.

E-MAILED NOV 25 REC'D

SECONDHAND ARTICLE DEALER'S LICENSE

(Chapter 13.02, Code of General Ordinances)

Type: 164 Fee: $27.50/year

Expires: December 31, 2014

FILED	11-25-13
INITIALS	25
ADV/NO ADVERSE	
LP	12/9
CC	12/16

he Licensee (applicant) is ☐ an individual ☐ a partnership ☑ a corporation

icensee Name: Goldtronics LLC District # 3

rade Name: Jewelry & Electronics Exchange Address: 6212 22nd Ave

hone Number: 262-652-2233 Email: Amad1225@gmail.com

Individual: list name, home address, phone number, date of birth:

Partnership or Corporation: list name, home address, phone number, & date of birth of all partners/members:

Amad Otallah
8245 S. 43rd St.
Franklin, WI 53132
(414) 406-1199

APPLICANT'S REPORT OF POLICE RECORD (ATTACHMENT)

ach applicant, including an individual, a partner or an officer, director or agent of any corporation must fill out and attach an Applicant's Report of Police Record". (This form may be duplicated if more copies are needed) Attached? ☐ Yes ☐ No

BUSINESS INFORMATION

usiness Name, Address, State, Zip Code and Business Number:
Jewelry & Electronics Exchange 6212 22nd Ave Kenosha, WI 53143 262-652-2233

uilding Owner's Name, Home Address, State, Zip Code and Phone Number:
Abeel Mohammad 6301 105th Ave Kenosha, WI 53142 262-620-9258

Manager or Proprietor of Business, Home Address, State, Zip Code, Phone Number, Email:
mad Otallah 8245 S. 43rd St. Franklin, WI 53132 414-406-1199 Amad1225@gmail.com

GENERAL INFORMATION

Have you obtained from the City Clerk a current copy of S.13.02 of the Code of General Ordinances entitled Secondhand Article and Jewelry Dealers"? ☑ Yes ☐ No

Do you understand that it is your responsibility to obtain a supply of "Property Transaction Record" forms? ☑ Yes ☐ No

PLEASE NOTE THAT YOU ARE RESPONSIBLE FOR KNOWING AND ABIDING BY THE CONTENTS THEREOF AND YOUR LICENSE MAY BE SUSPENDED OR REVOKED AND/OR YOU MAY BE SUBJECT TO A CIVIL FORFEITURE FOR NON-COMPLIANCE THEREWITH.)

LICENSE REVOCATION

/We, the undersigned, understand that this license may be denied or revoked by the Common Council for fraud, nisrepresentation or false statement contained in the application or for any violation of §943.34 (receiving stolen roperty), 948.62 (receiving stolen property from a child) or 948.63 (receiving property from a child), Wisconsin Statutes.

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ndividual/Partner

Partner/Corporate Officer

Corporate Officer/Director

Corporate Officer/Director

ubscribed and sworn to before me this 25 day of Nov, 2018.

Notary Public
My Commission Expires: 3-15-15

have received a copy of the NOTICE pertaining to LICENSE/PERMIT APPLICATIONS from the City Clerk's Office

(Applicant's Initials)

E-MAILED NOV 25 REC'D

FILED	11-25-13
INITIALS	RS
ADV/NO ADVERSE	
LP	12/9
CC	12/16

SECONDHAND JEWELRY DEALER'S LICENSE

(Chapter 13.02, Code of General Ordinances)

Type: 165 Fee: $30.00/year

Expires: December 31, 2014

he Licensee (applicant) is ☐ an individual ☐ a partnership ☑ a corporation

icensee Name: Goldtronics LLC District # 3

rade Name: Jewelry & Electronics Exchange Address: 6212 22nd Ave

hone Number: 262-652-2233 Email: Amad1225@gmail.com

Individual: list name, home address, phone number, date of birth:

Partnership or Corporation: list name, home address, phone number, & date of birth of all partners/members:
Amad Otallah
8245 S.43rd St.
Franklin, WI 53132
D.O.B 414-406-1199

APPLICANT'S REPORT OF POLICE RECORD (ATTACHMENT)

ach applicant, including an individual, a partner or an officer, director or agent of any corporation must fill out and attach an pplicant's Report of Police Record". (This form may be duplicated if more copies are needed) Attached? ☐ Yes ☐ No

BUSINESS INFORMATION

usiness Name, Address, State, Zip Code and Business Number:
Jewelry & Electronics Exchange 6212 22nd Ave Kenosha, WI 53143 262-652-2233

uilding Owner's Name, Home Address, State, Zip Code and Phone Number:
Ahed Mohammad 6301 105th Ave, Kenosha, WI 53142 262-620-9258

anager or Proprietor of Business, Home Address, State, Zip Code, Phone Number, Email:
Amad Otallah 8245 S.43rd St. Franklin, WI 53132 414-406-1199
Amad1225@gmail.com

GENERAL INFORMATION

ave you obtained from the City Clerk a current copy of S.13.02 of the Code of General Ordinances entitled econdhand Article and Jewelry Dealers"? ☑ Yes ☐ No

o you understand that it is your responsibility to obtain a supply of "Property Transaction Record" forms? ☑ Yes ☐ No

LEASE NOTE THAT YOU ARE RESPONSIBLE FOR KNOWING AND ABIDING BY THE CONTENTS THEREOF AND YOUR LICENSE AY BE SUSPENDED OR REVOKED AND/OR YOU MAY BE SUBJECT TO A CIVIL FORFEITURE FOR NON-COMPLIANCE THEREWITH.)

LICENSE REVOCATION

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The undersigned, being first duly sworn on oath, disposes and says that (he/she is) (they are) the applicant(s) named in the foregoing application; that (he/she has) (they have) read each and every question and answered each and every question truly, correctly and completely, under penalty of law for failure to do so.

Individual/Partner

Partner/Corporate Officer

Corporate Officer/Director

Corporate Officer/Director

Subscribed and sworn to before me this 25 day of Nov, 2013.

Notary Public

My Commission Expires: 3-15-15

have received a copy of the NOTICE pertaining to LICENSE/PERMIT APPLICATIONS from the City Clerk's Office (Mail) MN

(Applicant's Initials)

E-MAILED NOV 20 2013

SECONDHAND ARTICLE DEALER'S LICENSE

(Chapter 13.02, Code of General Ordinances)

Type: 164 Fee: $27.50/year

Expires: December 31, 2014

FILED	11-20-13
INITIALS	RS
ADV/NO ADVERSE	(NO ADVERSE)
LP	12/9
CC	12/16

he Licensee (applicant) is ☒ an individual ☐ a partnership ☐ a corporation

icensee Name: ANITA M. WELLMAN District # 2

rade Name: LUCKY 7 THRIFT Address: 711 57th ST.

hone Number: 847-445-8767 Email: WELLMANANITA63@gmail.com

Individual: list name, home address, phone number, date of birth: ANITA WELLMAN, 91 BEECH AVE - WAUKEGAN, IL 60087 847-445-8767

Partnership or Corporation: list name, home address, phone number, & date of birth of all partners/members:

APPLICANT'S REPORT OF POLICE RECORD (ATTACHMENT)

ach applicant, including an individual, a partner or an officer, director or agent of any corporation must fill out and attach an Applicant's Report of Police Record". (This form may be duplicated if more copies are needed) Attached? ☒ Yes ☐ No

BUSINESS INFORMATION

usiness Name, Address, State, Zip Code and Business Number:
LUCKY 7 THRIFT - 711 57th ST. KENOSHA, WI 53140 - 847-445-8767

uilding Owner's Name, Home Address, State, Zip Code and Phone Number:
JAMES TWOMEY - 920 61ST - KENOSHA, WI 53143 - 1-800-228-1943 jetwomey@aol.com

Manager or Proprietor of Business, Home Address, State, Zip Code, Phone Number, Email:
ANITA WELLMAN - 91 BEECH AVE - WAUKEGAN, IL 60087 - 847-445-8767 - WELLMANANITA63@gmail.com

GENERAL INFORMATION

Have you obtained from the City Clerk a current copy of S.13.02 of the Code of General Ordinances entitled Secondhand Article and Jewelry Dealers"? ☒ Yes ☐ No

Do you understand that it is your responsibility to obtain a supply of "Property Transaction Record" forms? ☒ Yes ☐ No

PLEASE NOTE THAT YOU ARE RESPONSIBLE FOR KNOWING AND ABIDING BY THE CONTENTS THEREOF AND YOUR LICENSE MAY BE SUSPENDED OR REVOKED AND/OR YOU MAY BE SUBJECT TO A CIVIL FORFEITURE FOR NON-COMPLIANCE THEREWITH.)

LICENSE REVOCATION

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Individual/Partner

Partner/Corporate Officer

Corporate Officer/Director

Corporate Officer/Director

Subscribed and sworn to before me this 20 day of Nov, 2013.

Notary Public

My Commission Expires: 3-15-15

I have received a copy of the NOTICE pertaining to LICENSE/PERMIT APPLICATIONS from the City Clerk's Office Mail (MA)

(Applicant's Initials)

E-MAILED NOV 20 REC'D

SECONDHAND JEWELRY DEALER'S LICENSE

(Chapter 13.02, Code of General Ordinances)

Type: 165 Fee: $30.00/year

Expires: December 31, 2014

FILED	11-20-13
INITIALS	RS
ADV/NO ADVERSE	
LP	12/9
CC	12/16

he Licensee (applicant) is ☒ an individual ☐ a partnership ☐ a corporation

icensee Name: ANITA M. WELLMAN District # 2

rade Name: LUCKY 7 THRIFT Address: 711 57TH ST.

hone Number: 847-445-8767 Email: WELLMANANITA63@gmail.com

Individual: list name, home address, phone number, date of birth: 91 BEECH AVE - WAUKEGAN, IL 60087 847-445-8767 -

Partnership or Corporation: list name, home address, phone number, & date of birth of all partners/members:

APPLICANT'S REPORT OF POLICE RECORD (ATTACHMENT)

ch applicant, including an individual, a partner or an officer, director or agent of any corporation must fill out and attach an pplicant's Report of Police Record". (This form may be duplicated if more copies are needed) Attached? ☒ Yes ☐ No

BUSINESS INFORMATION

siness Name, Address, State, Zip Code and Business Number:
LUCKY 7 THRIFT - 711 57TH ST. KENOSHA, WI 53140 847-445-8767

ilding Owner's Name, Home Address, State, Zip Code and Phone Number:
JAMES TWOMEY 920 61ST ST KENOSHA, WI 53143 - 1-800-228-1943

nager or Proprietor of Business, Home Address, State, Zip Code, Phone Number, Email:
ANITA M. WELLMAN - 91 BEECH AVE, WAUKEGAN, IL 60087 - 847-445-8767 - WELLMANANITA63@gmail.com

GENERAL INFORMATION

ve you obtained from the City Clerk a current copy of S.13.02 of the Code of General Ordinances entitled econdhand Article and Jewelry Dealers"? ☒ Yes ☐ No

you understand that it is your responsibility to obtain a supply of "Property Transaction Record" forms? ☒ Yes ☐ No

EASE NOTE THAT YOU ARE RESPONSIBLE FOR KNOWING AND ABIDING BY THE CONTENTS THEREOF AND YOUR LICENSE AY BE SUSPENDED OR REVOKED AND/OR YOU MAY BE SUBJECT TO A CIVIL FORFEITURE FOR NON-COMPLIANCE THEREWITH.)

LICENSE REVOCATION

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Individual/Partner

Partner/Corporate Officer

Corporate Officer/Director

Corporate Officer/Director

Subscribed and sworn to before me this 20 day of Nov, 2013.

Notary Public

My Commission Expires: 3-15-15

have received a copy of the NOTICE pertaining to LICENSE/PERMIT APPLICATIONS from the City Clerk's Office Maie(Mu)

(Applicant's Initials)

SECONDHAND ARTICLE DEALER'S LICENSE

(Chapter 13.02, Code of General Ordinances)

Type: 164 Fee: $27.50/year

Expires: December 31, 2014

FILED 11/7/13
INITIALS: Tma
ADV/NO ADVERSE
LP 12/9
CC 12/16

E-MAILED NOV 07 REC'D

he Licensee (applicant) is ■ an individual □ a partnership □ a corporation

icensee Name: Christopher Ruland District # 8

rade Name: Roosevelt Road Antiques Address: 3720 Roosevelt Road

hone Number: (262) 764-2800/818-2507 Email: nruland@wi.rr.com

Individual: list name, home address, phone number, date of birth: Same as above d.o.b. / /

Partnership or Corporation: list name, home address, phone number, & date of birth of all partners/members:

APPLICANT'S REPORT OF POLICE RECORD (ATTACHMENT)

ach applicant, including an individual, a partner or an officer, director or agent of any corporation must fill out and attach an Applicant's Report of Police Record". (This form may be duplicated if more copies are needed) Attached? □ Yes □ No

BUSINESS INFORMATION

usiness Name, Address, State, Zip Code and Business Number:
Roosevelt Rd Antiques + consignments 3720 Roosevelt Road Kenosha, WI (262) 764-2800

uilding Owner's Name, Home Address, State, Zip Code and Phone Number:
Chris Ruland 3720 Roosevelt Road, Kenosha, WI 53142 (262) 818-2507

Manager or Proprietor of Business, Home Address, State, Zip Code, Phone Number, Email:
Chris Ruland 3720 Roosevelt Road Kenosha, WI 53142 (262) 818-2507

GENERAL INFORMATION

Have you obtained from the City Clerk a current copy of S.13.02 of the Code of General Ordinances entitled Secondhand Article and Jewelry Dealers"? ■ Yes □ No

o you understand that it is your responsibility to obtain a supply of "Property Transaction Record" forms? ■ Yes □ No

PLEASE NOTE THAT YOU ARE RESPONSIBLE FOR KNOWING AND ABIDING BY THE CONTENTS THEREOF AND YOUR LICENSE MAY BE SUSPENDED OR REVOKED AND/OR YOU MAY BE SUBJECT TO A CIVIL FORFEITURE FOR NON-COMPLIANCE THEREWITH.)

LICENSE REVOCATION

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adividual/Partner

Partner/Corporate Officer

Corporate Officer/Director

Corporate Officer/Director

ubscribed and sworn to before me this 7 day of November, 2013.

otary Public

ly Commission Expires: 4-11-17

ave received a copy of the NOTICE pertaining to LICENSE/PERMIT APPLICATIONS from the City Clerk's Office CR

(Applicant's Initials)

SECONDHAND JEWELRY DEALER'S LICENSE

(Chapter 13.02, Code of General Ordinances)

Type: 165 Fee: $30.00/year

Expires: December 31, 2014

FILED 11/7/13
INITIALS mn
ADV/NO ADVERSE
LP 12/9
CC 12/16

E-MAILED NOV 07

he Licensee (applicant) is ■ an individual □ a partnership □ a corporation

icensee Name: Christopher Ruland District # 8

rade Name: Roosevelt Road Antiques + Consignments Address: 3720 - Roosevelt Road

hone Number: (262) 764-2800 (262) 818-2507 Email: Arruland@wi.rr.com

Individual: list name, home address, phone number, date of birth: Same as above d.o.b.

Partnership or Corporation: list name, home address, phone number, & date of birth of all partners/members:

N/A

APPLICANT'S REPORT OF POLICE RECORD (ATTACHMENT)

ch applicant, including an individual, a partner or an officer, director or agent of any corporation must fill out and attach an pplicant's Report of Police Record". (This form may be duplicated if more copies are needed) Attached? □ Yes □ No

BUSINESS INFORMATION

usiness Name, Address, State, Zip Code and Business Number:
Roosevelt Road Antiques + Consignments 3720 - Roosevelt Rod Kenosha, wi 53142 (262) 764-2800

uilding Owner's Name, Home Address, State, Zip Code and Phone Number:
Chris Ruland 3720 - Roosevelt Road Kenosha wi 53142 (262) 818-2507

anager or Proprietor of Business, Home Address, State, Zip Code, Phone Number, Email:
Chris Ruland 3720 - Roosevelt Road Kenosha wi 53142 (262) 818-2507 arruland@wi.rr.com

GENERAL INFORMATION

ave you obtained from the City Clerk a current copy of S.13.02 of the Code of General Ordinances entitled econdhand Article and Jewelry Dealers"? ■ Yes □ No

you understand that it is your responsibility to obtain a supply of "Property Transaction Record" forms? ■ Yes □ No

EASE NOTE THAT YOU ARE RESPONSIBLE FOR KNOWING AND ABIDING BY THE CONTENTS THEREOF AND YOUR LICENSE AY BE SUSPENDED OR REVOKED AND/OR YOU MAY BE SUBJECT TO A CIVIL FORFEITURE FOR NON-COMPLIANCE THEREWITH.)

LICENSE REVOCATION

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ndividual/Partner

Partner/Corporate Officer

Corporate Officer/Director

Corporate Officer/Director

ubscribed and sworn to before me this 7 day of November, 2013.

Notary Public

Ly Commission Expires: 4-11-17

ave received a copy of the NOTICE pertaining to LICENSE/PERMIT APPLICATIONS from the City Clerk's Office CR

(Applicant's Initials)

E-MAILED NOV 13 REC'D

FILED 11/13/13
INITIALS TN
ADV/NO ADVERSE
LP 12/9
CC 12/14

SECONDHAND ARTICLE DEALER'S LICENSE

(Chapter 13.02, Code of General Ordinances)

Type: 164 Fee: $27.50/year

Expires: December 31, 2014

he Licensee (applicant) is ☒ an individual ☐ a partnership ☐ a corporation

icensee Name: Christine Isham District # 7

rade Name: Monicas Thrift Shop Address: 1916-52 St Kenosha Wi

hone Number: 262-652-6387 Email: lulu isham@yahoo.com

Individual: list name, home address, phone number, date of birth: Christine Isham
8743 Sheridan Rd #87 Kenosha Wi 53143 262-945-8169

Partnership or Corporation: list name, home address, phone number, & date of birth of all partners/members:

APPLICANT'S REPORT OF POLICE RECORD (ATTACHMENT)

ach applicant, including an individual, a partner or an officer, director or agent of any corporation must fill out and attach an Applicant's Report of Police Record". (This form may be duplicated if more copies are needed) Attached? ☒ Yes ☐ No

BUSINESS INFORMATION

usiness Name, Address, State, Zip Code and Business Number: 262-652-6387
Monicas Thrift Shop 1916-52 St Kenosha Wi 53140

uilding Owner's Name, Home Address, State, Zip Code and Phone Number:
Nello Cristiano 2407-63 St. Kenosha Wi 53143

Manager or Proprietor of Business, Home Address, State, Zip Code, Phone Number, Email:
Christine Isham 8743-Sheridan Rd #87 Kenosha Wi 53143

GENERAL INFORMATION

Have you obtained from the City Clerk a current copy of S.13.02 of the Code of General Ordinances entitled Secondhand Article and Jewelry Dealers"? ☒ Yes ☐ No

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Christine Cohen

idividual/Partner

Partner/Corporate Officer

orporate Officer/Director

Corporate Officer/Director

ubscribed and sworn to before me this 13 day of November, 2013.

otary Public

ly Commission Expires: 4-11-17

ave received a copy of the NOTICE pertaining to LICENSE/PERMIT APPLICATIONS from the City Clerk's Office CI

(Applicant's Initials)

E-MAILED NOV 13 REC'D

FILED 11/13/13
INITIALS TN
ADV/NO ADVERSE
LP 12/9
CC 12/16

SECONDHAND JEWELRY DEALER'S LICENSE

(Chapter 13.02, Code of General Ordinances)

Type: 165 Fee: $30.00/year

Expires: December 31, 2014

ıe Licensee (applicant) is ☒ an individual ☐ a partnership ☐ a corporation

.censee Name: Christine Isham District # 7

ıade Name: Monica's Thrift Shop Address: 1916-52St Kenosha Wi

ıone Number: 262-652-6387 Email: lulu isham@yahoo.com

Individual: list name, home address, phone number, date of birth: Christine Isham
8743-Sheridan Rd #87 Kenosha Wi 53143 262 945 8169

Partnership or Corporation: list name, home address, phone number, & date of birth of all partners/members:

APPLICANT'S REPORT OF POLICE RECORD (ATTACHMENT)

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BUSINESS INFORMATION

ısiness Name, Address, State, Zip Code and Business Number: 262-652-6387
Monicas Thrift Shop 1916-52St Kenosha Wi 53140

ıilding Owner's Name, Home Address, State, Zip Code and Phone Number:
Nello Christiano 2407-63St Kenosha Wi 53142 262-658-1200

ınager or Proprietor of Business, Home Address, State, Zip Code, Phone Number, Email:
Christine Isham 8743-Sheridan Rd #87 Kenosha Wi 53143
262-945-8169

GENERAL INFORMATION

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ı you understand that it is your responsibility to obtain a supply of "Property Transaction Record" forms? ☒ Yes ☐ No

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Christine Solom

ndividual/Partner

Partner/Corporate Officer

Corporate Officer/Director

Corporate Officer/Director

Subscribed and sworn to before me this 13 day of November, 2013

Nicole L Nelson

Notary Public

My Commission Expires: 4-11-17

have received a copy of the NOTICE pertaining to LICENSE/PERMIT APPLICATIONS from the City Clerk's Office CI

(Applicant's Initials)

SECONDHAND ARTICLE DEALER'S LICENSE

(Chapter 13.02, Code of General Ordinances)

Type: 164 Fee: $27.50/year

Expires: December 31, 2014

FILED	11/14/13
INITIALS	mm
ADV/NO ADVERSE	
LP	12/9
CC	12/16

The Licensee (applicant) is ☐ an individual ☒ a partnership ☒ a corporation

Licensee Name: Gnt Financial LLC District # 12

Trade Name: Gnt Jewelry + Loan Address: 7944 Sheridan Rd #3 Kenosha 53143

Phone Number: 262-653-9200 Email: gntjewelryloan@gmail.com

If Individual: list name, home address, phone number, date of birth:

If Partnership or Corporation: list name, home address, phone number, & date of birth of all partners/members:

Thomas V. Stout 700 S. Mercer Waukegan IL 60085 317-716-5248

Coregory Lagunov 2454 Seminole Ct. Riverwoods IL 60015 847-293-7878

APPLICANT'S REPORT OF POLICE RECORD (ATTACHMENT)

Each applicant, including an individual, a partner or an officer, director or agent of any corporation must fill out and attach an "Applicant's Report of Police Record". (This form may be duplicated if more copies are needed) Attached? ☒ Yes ☐ No

BUSINESS INFORMATION

Business Name, Address, State, Zip Code and Business Number:
Gnt Jewelry + Loan 7944 Sheridan Rd #3 Kenosha WI 53143 262-653-9200

Building Owner's Name, Home Address, State, Zip Code and Phone Number:
Himmat Gill 6635 Altamont Cir Racine WI 53406 4148017106

Manager or Proprietor of Business, Home Address, State, Zip Code, Phone Number, Email:
Thomas V. Stout 700 S. Mercer Waukegan IL 60085 317-716-5248
tstout1000@yahoo.com

GENERAL INFORMATION

Have you obtained from the City Clerk a current copy of S.13.02 of the Code of General Ordinances entitled "Secondhand Article and Jewelry Dealers"? ☒ Yes ☐ No

Do you understand that it is your responsibility to obtain a supply of "Property Transaction Record" forms? ☒ Yes ☐ No

(PLEASE NOTE THAT YOU ARE RESPONSIBLE FOR KNOWING AND ABIDING BY THE CONTENTS THEREOF AND YOUR LICENSE MAY BE SUSPENDED OR REVOKED AND/OR YOU MAY BE SUBJECT TO A CIVIL FORFEITURE FOR NON-COMPLIANCE THEREWITH.)

LICENSE REVOCATION

I/We, the undersigned, understand that this license may be denied or revoked by the Common Council for fraud, misrepresentation or false statement contained in the application or for any violation of §943.34 (receiving stolen property), 948.62 (receiving stolen property from a child) or 948.63 (receiving property from a child), Wisconsin Statutes.

The undersigned, being first duly sworn on oath, disposes and says that (he/she is) (they are) the applicant(s) named in the foregoing application; that (he/she has) (they have) read each and every question and answered each and every question truly, correctly and completely, under penalty of law for failure to do so.

Thomas V. Stunt
Individual/Partner LLC. member

Partner/Corporate Officer
LLC member

Corporate Officer/Director

Corporate Officer/Director

Subscribed and sworn to before me this 12TH day of NOVEMBER, 2013.

Ivaylo Draganov
Notary Public
My Commission Expires: 11-28-2016

"OFFICIAL SEAL"
Ivaylo Draganov
Notary Public, State of Illinois
My Commission Expires 11/28/2016

I have received a copy of the NOTICE pertaining to LICENSE/PERMIT APPLICATIONS from the City Clerk's Office TVS
(Applicant's Initials)

SECONDHAND JEWELRY DEALER'S LICENSE

(Chapter 13.02, Code of General Ordinances)

Type: 165 Fee: $30.00/year

Expires: December 31, 2014

FILED 11/14/13
INITIALS mr
ADV/NO ADVERSE
LP 12/9
CC 12/16

The Licensee (applicant) is ☐ an individual ☒ a partnership ☒ a corporation

Licensee Name: Cont Financial LLC. District # 12

Trade Name: Cont Jewelry & Loan Address: 7944 Sheridan Rd #3 Kenosha 53143

Phone Number: 262-653-9200 Email: gntjewelryloan@gmail.com

If Individual: list name, home address, phone number, date of birth:

If Partnership or Corporation: list name, home address, phone number, & date of birth of all partners/members:

Thomas V. Stout 700 S. Mcaree Waukegan IL 60085 317-716-5248

Gregory Lagunov 2454 Seminole ct. Riverwoods IL 60015 847-293-7878

APPLICANT'S REPORT OF POLICE RECORD (ATTACHMENT)

Each applicant, including an individual, a partner or an officer, director or agent of any corporation must fill out and attach an "Applicant's Report of Police Record". (This form may be duplicated if more copies are needed) Attached? ☐ Yes ☐ No

BUSINESS INFORMATION

Business Name, Address, State, Zip Code and Business Number:
Cont Jewelry & Loan 7944 Sheridan Rd #3 Kenosha WI 53143 262-653-9200

Building Owner's Name, Home Address, State, Zip Code and Phone Number:
Himmat Gill 6035 Alta mount Cir. Racine WI 53406 414 801 7106

Manager or Proprietor of Business, Home Address, State, Zip Code, Phone Number, Email:
Thomas V. Stout 700 S. Mcaree Waukegan IL 60085 317-716-5248

GENERAL INFORMATION

Have you obtained from the City Clerk a current copy of S.13.02 of the Code of General Ordinances entitled "Secondhand Article and Jewelry Dealers"? ☒ Yes ☐ No

Do you understand that it is your responsibility to obtain a supply of "Property Transaction Record" forms? ☒ Yes ☐ No

(PLEASE NOTE THAT YOU ARE RESPONSIBLE FOR KNOWING AND ABIDING BY THE CONTENTS THEREOF AND YOUR LICENSE MAY BE SUSPENDED OR REVOKED AND/OR YOU MAY BE SUBJECT TO A CIVIL FORFEITURE FOR NON-COMPLIANCE THEREWITH.)

LICENSE REVOCATION

I/We, the undersigned, understand that this license may be denied or revoked by the Common Council for fraud, misrepresentation or false statement contained in the application or for any violation of §943.34 (receiving stolen property), 948.62 (receiving stolen property from a child) or 948.63 (receiving property from a child), Wisconsin Statutes.

The undersigned, being first duly sworn on oath, disposes and says that (he/she is) (they are) the applicant(s) named in the foregoing application; that (he/she has) (they have) read each and every question and answered each and every question truly, correctly and completely, under penalty of law for failure to do so.

Individual/Partner LLC member

Partner/Corporate Officer LLC member

Corporate Officer/Director

Corporate Officer/Director

Subscribed and sworn to before me this 12th day of NOVEMBER, 2013.

Notary Public

My Commission Expires: 11-28-2016

"OFFICIAL SEAL"
Ivaylo Draganov
Notary Public, State of Illinois
My Commission Expires 11/28/2016

I have received a copy of the NOTICE pertaining to LICENSE/PERMIT APPLICATIONS from the City Clerk's Office TVS
(Applicant's Initials)

E-MAILED NOV 19 REC'D

FILED 11/19/13
INITIALS mn
ADVERSE NO ADV
LP 12/9
CC 12/16

KENOSHA MASSAGE THERAPIST LICENSE

(§13.125 City of Kenosha Code of General Ordinances)

Type: 130 Fee: $100.00

☐ New ☒ Renewal

Last Name: VALIAUGA First Name: JADVYGA MI: —

(NOTE: Name must appear exactly as it appears on driver's license or state ID)

Date of Birth: [illegible] Gender: F Phone: 262-237-1022

(must be at least 18 years old)

Home Address: 4426-45th ave Kenosha, WI 53144

CITY STATE ZIP

Email: vyga-valiauga@yahoo.com

(correspondence will be via email if address is given)

Driver's License or State ID Number WI [illegible]

STATE NUMBER

Name and address of Business Where License will be used Body Wise therapeutic massage

(PLEASE NOTE: license may be utilized in the City of Kenosha only)

Attach the Following:

a. Copy of birth certificate or drivers license ☒ **check if attached**

b. Certificate from a medical doctor **dated within ninety (90) days of the date of application** providing verification of immunization against Rubella and Hepatitis B and verification of negative results of Tuberculosis through Mantoux PPD Test or chest X-ray. In the case of positive results, there must be a physician's statement that the condition is not contagious. ☐ **check if attached** By Dec 2

c. Documentation that you graduated from a school providing a minimum of five hundred (500) in-class hours of training in massage therapy in a curriculum approved by or substantially similar to a curriculum approved by the American Massage Therapy Association, the International Myomassethics Federation, Inc., or another National or International professional massage therapy organization which has an approved massage therapy curriculum. ☐ **check if attached** ☒ **N/A~ renewal**

d. Certificate of Insurance covering the license period or remainder thereof indicating that applicant has a policy of malpractice insurance written by an insurance company licensed to do business in the State of Wisconsin in the minimum amount of One Million (1,000,000.00) Dollars in coverage per person. ☒ **check if attached**

e. Attach "Applicants Report of Police Record". ☒ **check if attached**

Have you obtained from the City Clerk a current copy of §13.125 of the Code of General Ordinances entitled "Massage Therapists"? ☒ **Yes** ☐ **No** (PLEASE NOTE: YOU ARE RESPONSIBLE FOR KNOWING AND ABIDING BY THE CONTENTS THEREOF AND YOUR LICENSE/PERMIT MAY BE SUSPENDED OR REVOKED AND/OR YOU MAY BE SUBJECT TO A CIVIL FORFEITURE FOR NONCOMPLIANCE THEREWITH.)

Have you ever previously applied for and been denied the license herein applied for? □ **Yes** ☒ **No**
If yes, explain: _____

_____

Do you understand that after filing this application with the City Clerk, you must go to the Safety Building at 1000-55th Street, to have your picture taken, Monday through Friday between the hours of 1:00 and 3:00 p.m. ONLY? ☒ **Yes** □ **No**

According to Section 13.25 H., Required Abbreviations and Titles In Advertising: (Unless licensed by the State of Wisconsin), Licensed Massage Therapists shall, in their advertisements within the City of Kenosha, use one of the following: **"Kenosha LMT" or "Kenosha Licensed Massage Therapist".**

READ CAREFULLY BEFORE SIGNING: I hereby certify that I am the applicant named in this application, and I have read and answered each and every question truly, correctly, and completely, under penalty of law for failure to do so. If this application contains statements or information which is untrue, incorrect and/or incomplete in any material respect, **it may be denied.**

Applicant's Signature: T. Valiouga Date: 11-19-13

I have received a copy of the NOTICE pertaining to LICENSE/PERMIT APPLICATIONS from the City Clerk's Office T. V.
(Applicant's Initials)

E-MAILED NOV 21 REC'D

FILED 11/21/13
INITIALS mn
ADVERSE NO ADV
LP 12/9
CC 12/16

KENOSHA MASSAGE THERAPIST LICENSE

(§13.125 City of Kenosha Code of General Ordinances)

Type: 130 Fee: $100.00

☐ New ☒ Renewal

Last Name: Wu First Name: Lin Liang MI: —

(NOTE: Name must appear exactly as it appears on driver's license or state ID)

Date of Birth: 0 / / Gender: F Phone: 312-823-3877

(must be at least 18 years old)

Home Address: 1607 Walter Ave Racine WI 53403

CITY STATE ZIP

Email: wangzhen53233@hotmail.com

(correspondence will be via email if address is given)

Driver's License or State ID Number WI [illegible]

STATE NUMBER

Name and address of Business Where License will be used Shanghai Spa: 7944 Sheridan Rd, Kenosha WI 53143

(PLEASE NOTE: license may be utilized in the City of Kenosha only)

District #12

Attach the Following:

a. Copy of birth certificate or drivers license ☒ **check if attached**

b. Certificate from a medical doctor **dated within ninety (90) days of the date of application** providing verification of immunization against Rubella and Hepatitis B and verification of negative results of Tuberculosis through Mantoux PPD Test or chest X-ray. In the case of positive results, there must be a physician's statement that the condition is not contagious. ☒ **check if attached**

c. Documentation that you graduated from a school providing a minimum of five hundred (500) in-class hours of training in massage therapy in a curriculum approved by or substantially similar to a curriculum approved by the American Massage Therapy Association, the International Myomassethics Federation, Inc., or another National or International professional massage therapy organization which has an approved massage therapy curriculum. ~~☐ **check if attached**~~ ☐ **N/A~ renewal**

d. Certificate of Insurance covering the license period or remainder thereof indicating that applicant has a policy of malpractice insurance written by an insurance company licensed to do business in the State of Wisconsin in the minimum amount of One Million (1,000,000.00) Dollars in coverage per person. ☒ **check if attached**

e. Attach "Applicants Report of Police Record". ☒ **check if attached**

Have you obtained from the City Clerk a current copy of §13.125 of the Code of General Ordinances entitled "Massage Therapists"? ☒ **Yes** ☐ **No** (PLEASE NOTE: YOU ARE RESPONSIBLE FOR KNOWING AND ABIDING BY THE CONTENTS THEREOF AND YOUR LICENSE/PERMIT MAY BE SUSPENDED OR REVOKED AND/OR YOU MAY BE SUBJECT TO A CIVIL FORFEITURE FOR NONCOMPLIANCE THEREWITH.)

Have you ever previously applied for and been denied the license herein applied for? ☐ **Yes** ☑ **No**
If yes, explain: _____

_____

Do you understand that after filing this application with the City Clerk, you must go to the Safety Building at 1000-55th Street, to have your picture taken, Monday through Friday between the hours of 1:00 and 3:00 p.m. ONLY? ☑ **Yes** ☐ **No**

According to Section 13.25 H., Required Abbreviations and Titles In Advertising: (Unless licensed by the State of Wisconsin), Licensed Massage Therapists shall, in their advertisements within the City of Kenosha, use one of the following: **"Kenosha LMT" or "Kenosha Licensed Massage Therapist".**

READ CAREFULLY BEFORE SIGNING: I hereby certify that I am the applicant named in this application, and I have read and answered each and every question truly, correctly, and completely, under penalty of law for failure to do so. If this application contains statements or information which is untrue, incorrect and/or incomplete in any material respect, **it may be denied.**

Applicant's Signature: _____ Date: 11-21-13

I have received a copy of the NOTICE pertaining to LICENSE/PERMIT APPLICATIONS from the City Clerk's Office L.W.
(Applicant's Initials)

E-MAILED NOV 20

FILED 11-20-13
INITIALS RS
ADVERSE/NO ADV
LP 12/9
CC 12/16

KENOSHA MASSAGE THERAPIST LICENSE

(§13.125 City of Kenosha Code of General Ordinances)

Type: 130 Fee: $100.00

☐ New ☒ Renewal

Last Name: WANG First Name: CUNJUN MI: ____

(NOTE: Name must appear exactly as it appears on driver's license or state ID)

Date of Birth: ____ Gender: F Phone: (262) 652-4064

(must be at least 18 years old)

Home Address: 4809-68TH ST KENOSHA WI. 53142

CITY STATE ZIP

Email: n/a

(correspondence will be via email if address is given)

Driver's License or State ID Number WI ____

STATE NUMBER

Name and address of Business Where License will be used ORIENTAL SHIATSU MASSAGE 3717-52ST KENOSHA, WI.

(PLEASE NOTE: license may be utilized in the City of Kenosha only)

Attach the Following:

a. Copy of birth certificate or drivers license ☒ **check if attached**

b. Certificate from a medical doctor **dated within ninety (90) days of the date of application** providing verification of immunization against Rubella and Hepatitis B and verification of negative results of Tuberculosis through Mantoux PPD Test or chest X-ray. In the case of positive results, there must be a physician's statement that the condition is not contagious. ☒ **check if attached**

c. Documentation that you graduated from a school providing a minimum of five hundred (500) in-class hours of training in massage therapy in a curriculum approved by or substantially similar to a curriculum approved by the American Massage Therapy Association, the International Myomassethics Federation, Inc., or another National or International professional massage therapy organization which has an approved massage therapy curriculum. ☐ **check if attached** ☒ **N/A~ renewal**

d. Certificate of Insurance covering the license period or remainder thereof indicating that applicant has a policy of malpractice insurance written by an insurance company licensed to do business in the State of Wisconsin in the minimum amount of One Million (1,000,000.00) Dollars in coverage per person. ☒ **check if attached**

e. Attach "Applicants Report of Police Record". ☒ **check if attached**

Have you obtained from the City Clerk a current copy of §13.125 of the Code of General Ordinances entitled "Massage Therapists"? ☒ **Yes** ☐ **No** (PLEASE NOTE: YOU ARE RESPONSIBLE FOR KNOWING AND ABIDING BY THE CONTENTS THEREOF AND YOUR LICENSE/PERMIT MAY BE SUSPENDED OR REVOKED AND/OR YOU MAY BE SUBJECT TO A CIVIL FORFEITURE FOR NONCOMPLIANCE THEREWITH.) (email - tm)

Have you ever previously applied for and been denied the license herein applied for? □ Yes ☒ No
If yes, explain: _____

_____

Do you understand that after filing this application with the City Clerk, you must go to the Safety Building at 1000-55th Street, to have your picture taken, Monday through Friday between the hours of 1:00 and 3:00 p.m. ONLY? ☒ **Yes** □ **No**

According to Section 13.25 H., Required Abbreviations and Titles In Advertising: (Unless licensed by the State of Wisconsin), Licensed Massage Therapists shall, in their advertisements within the City of Kenosha, use one of the following: **"Kenosha LMT" or "Kenosha Licensed Massage Therapist".**

READ CAREFULLY BEFORE SIGNING: I hereby certify that I am the applicant named in this application, and I have read and answered each and every question truly, correctly, and completely, under penalty of law for failure to do so. If this application contains statements or information which is untrue, incorrect and/or incomplete in any material respect, **it may be denied.**

Applicant's Signature: Ceen Jun Dang Date: 11-20-13

I have received a copy of the NOTICE pertaining to LICENSE/PERMIT APPLICATIONS from the City Clerk's Office (Maie) MM
(Applicant's Initials)

E-MAILED NOV 26 REC'D

KENNEL & PET SHOP LICENSES

(Chapter 14.015- City of Kenosha, Code of General Ordinances)

Type: ☐ 81 (non-commercial)
☐ 82 (commercial)
☒ 83 (humane society)
☐ 84 (pet shop)

FILED 11/26
INITIALS
LP (NA) 12/9
CC 12/16

Fee: $200.00/year ☐ NEW ☒ RENEWAL

Licensee Name: Kenosha County Humane Society District # 14

Trade Name: Safe Harbor Address: 7811-60th Avenue

Phone Number: 262-694-4047 Email: animals@safeharborhumane.com

If Individual, Partnership or Corporation: list name, home address, phone number, & date of birth of all partners/members: attached

Primary Contact Person: Amanda Angove Phone Number: 262-694-4047

Number of animals sought to be kept on licensed premises: Dogs 105 Cats 120

READ CAREFULLY BEFORE SIGNING: Under penalty provided for by law, the undersigned states that each of the above questions has been truthfully answered to the best of his/her/their knowledge. (Individual applicants and each member of a partnership must sign; designated corporate officers must sign.)

Amanda Angove 11/22/13
(Individual/Partner/Member) Date

(Partner/Member) Date

I have received a copy of the NOTICE pertaining to LICENSE/PERMIT APPLICATIONS from the City Clerk's Office
(Applicant's Initials)

FOR DEPARTMENT USE ONLY

FIRE: ☐Approved ☐Not Approved Holds: By:

COMMUNITY DEVELOPMENT & INSPECTIONS: Zoning : Occupancy Permit:
Any other zoning permits required (such as variances or conditional use permits):
☐Approved ☐Not Approved Holds: By:

HEALTH: Number of Dogs Approved : Number of Cats Approved : ☐Not Approved
Holds: By:

CITY CLERK: Dog Tag Numbers Issued: Cat Tag Numbers Issued: By:

CITY OF KENOSHA
KENNEL AND PET SHOP LICENSE APPLICATION
(§14.015 of the Code of General Ordinances)
License Period - January 1 to December 31

License Fee: $200/year
☐ New Application ☒ Renewal Application ☐ Amendment (no charge)
Date: 11-23-12

1. Check activity to be licensed:

☐ Non-Commercial Kennel (081) ☐ Commercial Kennel (082) ☒ Humane Society (083) ☐ Pet Shop (084)

2. The named ☐ INDIVIDUAL ☐ PARTNERSHIP ☒ CORPORATION/NON-PROFIT ORGANIZATION hereby makes application for the license checked above.

3. Name (**individual/partners** give last name, first, middle; **corporations** give registered name):

4. Business Name Kenosha County Humane Society DBA Safe Harbor Humane Society Phone# 262-694-4047
5. Address of Premises 7811-60th Ave
6. Number of dogs and cats sought to be kept on licensed premises: Dogs ____ Cats ____
7. Name, Address and Phone Number of Person to Contact Relative to this Application:
Amanda Angore, Executive Director, 7811-60th Ave, Kenosha (262)694-4047
8. If an **individual or partnership**, identify each person:

Name ____
Address/City/Zip ____
Phone Number ____
Name ____
Address/City/Zip ____
Phone Number ____

9. If a corporation, check one: ☐ FOR PROFIT CORPORATION ☐ NOT FOR PROFIT CORPORATION (attach a copy of tax-exempt certificate)

10. If a corporation, identify each corporate officer:

President Frank J Carmichael
Address/City/Zip 8310-43rd Ave Kenosha, WI 53142
Phone Number 262-697-2389
Vice President William P. Bohlman
Address/City/Zip 437-44th St #3 Kenosha, WI 53140
Phone Number 262-605-9968
Secretary Jennifer L Somerlott DOB
Address/City/Zip 7111-32nd St Kenosha, WI 53142
Phone Number 262-652-5895
Treasurer William Bohlman
Address/City/Zip ____
Phone Number ____

**********OVER**********

E-MAILED NOV 15 REC'D NA

FILED 11/15/13
INITIALS mm
LP 12/9
CC 12/16

KENNEL & PET SHOP LICENSES

(Chapter 14.015- City of Kenosha, Code of General Ordinances)

Type: ☐ 81 (non-commercial)
☒ 82 (commercial)
☐ 83 (humane society)
☐ 84 (pet shop)

Fee: $200.00/year ☐ NEW ☒ RENEWAL Exp. 12-31-14

Licensee Name: Wagin' Tail Resort District # 11

Trade Name: Wagin' Tail Resort Address: 5403 52nd St

Phone Number: 262-656-1111 Email: nancycroft@wagintailresort.com

If Individual, Partnership or Corporation: list name, home address, phone number, & date of birth of all partners/members:

A. Nancy Croft 4980 Darlene Dr Gurnee IL 60031
Gary M. Croft 4980 Darlene Dr Gurnee IL 60031 } Same

Primary Contact Person: Nancy Croft Phone Number: 262-656-1111 wm 224-627-5965 cell

Number of animals sought to be kept on licensed premises: Dogs 60 Cats —

READ CAREFULLY BEFORE SIGNING: Under penalty provided for by law, the undersigned states that each of the above questions has been truthfully answered to the best of his/her/their knowledge. (Individual applicants and each member of a partnership must sign; designated corporate officers must sign.)

Nancy Croft 11-7-13
(Individual/Partner/Member) Date

(Partner/Member) Date

I have received a copy of the NOTICE pertaining to LICENSE/PERMIT APPLICATIONS from the City Clerk's Office NC
(Applicant's Initials)

FOR DEPARTMENT USE ONLY

FIRE: ☐Approved ☐Not Approved Holds: By:

COMMUNITY DEVELOPMENT & INSPECTIONS: Zoning : Occupancy Permit:
Any other zoning permits required (such as variances or conditional use permits):
☐Approved ☐Not Approved Holds: By:

HEALTH: Number of Dogs Approved : Number of Cats Approved : ☐Not Approved
Holds: By:

CITY CLERK: Dog Tag Numbers Issued: Cat Tag Numbers Issued: By:

E-MAILED NOV 19 REC'D

FILED 11-18-13
INITIALS RS
NA 12/9
LP
CC 12/16

KENNEL & PET SHOP LICENSES

(Chapter 14.015- City of Kenosha, Code of General Ordinances)

Type: ☐ 81 (non-commercial)
☒ 82 (commercial)
☐ 83 (humane society)
☐ 84 (pet shop)

Fee: $200.00/year ☐ NEW ☒ RENEWAL

Licensee Name: ~~Kennel and Pet Shop~~ ~~The~~ Puppy Tub & Motel Inc. District # 7

Trade Name: ~~The~~ Puppy Tub & Motel Address: 2419 52nd St Kenosha wi 53143

Phone Number: 262 654-4808 Email: —

If Individual, Partnership or Corporation: list name, home address, phone number, & date of birth of all partners/members:

Javier Jaramillo / 6111 24th Av. Kenosha wi 53143 / (262) 484-1306 / DOB
Maria del Pilar Jaramillo / 6111 24th Av. Kenosha wi 53143 (262) 705-7343 /

Primary Contact Person: Javier Jaramillo Phone Number: 262 484-1306.

Number of animals sought to be kept on licensed premises: Dogs 44 Cats 6

READ CAREFULLY BEFORE SIGNING: Under penalty provided for by law, the undersigned states that each of the above questions has been truthfully answered to the best of his/her/their knowledge. (Individual applicants and each member of a partnership must sign; designated corporate officers must sign.)

Javier Jaramillo. 11-18-13
(Individual/Partner/Member) Date

Maria P Jaramillo 11-18-13
(Partner/Member) Date

I have received a copy of the NOTICE pertaining to LICENSE/PERMIT APPLICATIONS from the City Clerk's Office JJ MPJ
(Applicant's Initials)

FOR DEPARTMENT USE ONLY

FIRE: ☐Approved ☐Not Approved Holds:_____ By:_____

COMMUNITY DEVELOPMENT & INSPECTIONS: Zoning : _____ Occupancy Permit:_____
Any other zoning permits required (such as variances or conditional use permits):_____
☐Approved ☐Not Approved Holds:_____ By:_____

HEALTH: Number of Dogs Approved :_____ Number of Cats Approved :_____ ☐Not Approved
Holds:_____ By:_____

CITY CLERK: Dog Tag Numbers Issued:_____ Cat Tag Numbers Issued:_____ By:_____

E-MAILED NOV 19 2013

FILED 11/18
INITIALS
LP 12/9
CC 12/16

KENNEL & PET SHOP LICENSES

(Chapter 14.015- City of Kenosha, Code of General Ordinances)

Type: ☐ 81 (non-commercial)
☒ 82 (commercial)
☐ 83 (humane society)
☐ 84 (pet shop)

Fee: $200.00/year ☐ NEW ☒ RENEWAL

Licensee Name: Puparotzi Palace, LLC District # 12

Trade Name: Puparotzi Palace Address: 7609 Sheridan Rd

Phone Number: 262-564-1866 Email: GFMOB8787@AOL.com

If Individual, Partnership or Corporation: list name, home address, phone number, & date of birth of all partners/members:

Greg Frost 11933 Old Greenbay Rd Pleasant Prairie WI 53158
D.O.B

Primary Contact Person: Greg Frost Phone Number: 262-620-1223

Number of animals sought to be kept on licensed premises: Dogs 6 Cats 2

READ CAREFULLY BEFORE SIGNING: Under penalty provided for by law, the undersigned states that each of the above questions has been truthfully answered to the best of his/her/their knowledge. (Individual applicants and each member of a partnership must sign; designated corporate officers must sign.)

Greg Frost 11-13-13
(Individual/Partner/Member) Date

(Partner/Member) Date

RECEIVED
NOV 18 2013
CITY OF KENOSHA
CITY CLERK-TREASURER

I have received a copy of the NOTICE pertaining to LICENSE/PERMIT APPLICATIONS from the City Clerk's Office
(Applicant's Initials)

FOR DEPARTMENT USE ONLY

FIRE: ☐Approved ☐Not Approved Holds:_____ By:_____

COMMUNITY DEVELOPMENT & INSPECTIONS: Zoning :_____ Occupancy Permit:_____
Any other zoning permits required (such as variances or conditional use permits):_____
☐Approved ☐Not Approved Holds:_____ By:_____

HEALTH: Number of Dogs Approved :_____ Number of Cats Approved :_____ ☐Not Approved
Holds:_____ By:_____

CITY CLERK: Dog Tag Numbers Issued:_____ Cat Tag Numbers Issued:_____ By:_____

Called left voicemail opens at 1:00 Fri

E-MAILED NOV 12 2013

FILED 11/12/13
INITIALS ads
NA
LP 12/8
CC 12/15

KENNEL & PET SHOP LICENSES

(Chapter 14.015- City of Kenosha, Code of General Ordinances)

Type: ☒ 81 (non-commercial)
☐ 82 (commercial)
~~☐ 83 (humane society)~~
☐ 84 (pet shop)

Fee: $200.00/year ☐ NEW ☒ RENEWAL

Licensee Name: Kindred Kitties Ltd, District # 2

Trade Name: Kindred Kitties Address: 614 59th Street

Phone Number: 262/605-0533 Email: cathrynmcd@aol.com

If Individual, Partnership or Corporation list name, home address, phone number, & date of birth of all partners/members: Board of Directors

Donna Kelly 6409 59th Avenue Kenosha 53142 President
Karen S. Seibert 4721 5th Avenue Kenosha 53140 Treasurer
Cathy M. McDowell 6925 Shagbark Lane Burlington 53105 Secretary
Christina Hammelev 3018 86th St, Unit 203 Kenosha, 53142 Vice President

Primary Contact Person: Cathy McDowell Phone Number: 262/605-0533

Number of animals sought to be kept on licensed premises: Dogs — Cats 60

READ CAREFULLY BEFORE SIGNING: Under penalty provided for by law, the undersigned states that each of the above questions has been truthfully answered to the best of his/her/their knowledge. (Individual applicants and each member of a partnership must sign; designated corporate officers must sign.)

CMcDowell 11/8/13
(Individual/Partner/Member) Date

Karen Seibert 11/10/13
(Partner/Member) Date

RECEIVED
NOV 12 2013
CITY OF KENOSHA
CITY CLERK-TREASURER

I have received a copy of the NOTICE pertaining to LICENSE/PERMIT APPLICATIONS from the City Clerk's Office cm
(Applicant's Initials)

FOR DEPARTMENT USE ONLY

FIRE: ☐Approved ☐Not Approved Holds:_____ By:_____

COMMUNITY DEVELOPMENT & INSPECTIONS: Zoning :_____ Occupancy Permit:_____
Any other zoning permits required (such as variances or conditional use permits):_____
☐Approved ☐Not Approved Holds:_____ By:_____

HEALTH: Number of Dogs Approved :_____ Number of Cats Approved :_____ ☐Not Approved
Holds:_____ By:_____

CITY CLERK: Dog Tag Numbers Issued:_____ Cat Tag Numbers Issued:_____ By:_____

E-MAILED NOV 21 REC'D

FILED	11/21
INITIALS	mn
LP	NA 12/9
CC	12/16

KENNEL & PET SHOP LICENSES

(Chapter 14.015- City of Kenosha, Code of General Ordinances)

Type: ☐ **81 (non-commercial)**
☐ **82 (commercial)**
☐ **83 (humane society)**
☑ **84 (pet shop)**

Fee: $200.00/year ☐ NEW ☑ RENEWAL

Licensee Name: Lemke / Lemke District # 14

Trade Name: Jim's Aquarium / Pets Address: 6205-75th St.

Phone Number: 262 6944222 Email: jimlem@wi.rr.com

If Individual, Partnership or Corporation: list name, home address, phone number, & date of birth of all partners/members:

James F. Lemke 6318-48th St.
Linda D. Lemke 6318-48th St

Primary Contact Person: James Lemke Phone Number: 262 6546164

Number of animals sought to be kept on licensed premises: Dogs 0 Cats 0

READ CAREFULLY BEFORE SIGNING: Under penalty provided for by law, the undersigned states that each of the above questions has been truthfully answered to the best of his/her/their knowledge. (Individual applicants and each member of a partnership must sign; designated corporate officers must sign.)

James F. Lemke 11/14/13
(Individual/Partner/Member) Date

Linda D. Lemke 11/14/13
(Partner/Member) Date

I have received a copy of the NOTICE pertaining to LICENSE/PERMIT APPLICATIONS from the City Clerk's Office JFL
(Applicant's Initials)

FOR DEPARTMENT USE ONLY

FIRE: ☐Approved ☐Not Approved Holds:_____ By:_____

COMMUNITY DEVELOPMENT & INSPECTIONS: Zoning :_____ Occupancy Permit:_____
Any other zoning permits required (such as variances or conditional use permits):_____
☐Approved ☐Not Approved Holds:_____ By:_____

HEALTH: Number of Dogs Approved :_____ Number of Cats Approved :_____ ☐Not Approved
Holds:_____ By:_____

CITY CLERK: Dog Tag Numbers Issued:_____ Cat Tag Numbers Issued:_____ By:_____

E-MAILED NOV 19 REC'D

FILED 11/18
INITIALS
LP 12/9
CC 12/16
NO ADV

KENNEL & PET SHOP LICENSES

(Chapter 14.015- City of Kenosha, Code of General Ordinances)

Type: ☐ 81 (non-commercial)
☐ 82 (commercial)
☐ 83 (humane society)
☒ 84 (pet shop)

Fee: $200.00/year ☐ NEW ☒ RENEWAL

Licensee Name: Jos Exotic Birds, LTD District # 12

Trade Name: Jo's Exotic Birds, ~~Ltd~~ Address: 7534 Sheridan Rd.

Phone Number: 262 654 1609 Email: Josbirds@sbcglobal.net

If Individual, Partnership or Corporation: list name, home address, phone number, & date of birth of all partners/members:

(A) Jo Cole 9936 29th Ave Pleasant Prairie WI 262-697-1804
Richard Cole 9936 29th Ave Pleasant Prairie WI 262 697-1804
(W)

Primary Contact Person: Jo Ann Cole Phone Number: 262-654-1609

Number of animals sought to be kept on licensed premises: Dogs 0 Cats 0

READ CAREFULLY BEFORE SIGNING: Under penalty provided for by law, the undersigned states that each of the above questions has been truthfully answered to the best of his/her/their knowledge. (Individual applicants and each member of a partnership must sign; designated corporate officers must sign.)

RECEIVED
NOV 18 2013
CITY OF KENOSHA
CITY CLERK-TREASURER

Jo Cole 11-14-13
(Individual/Partner/Member) Date

11-14-13
(Partner/Member) Date

I have received a copy of the NOTICE pertaining to LICENSE/PERMIT APPLICATIONS from the City Clerk's Office JC
(Applicant's Initials)

FOR DEPARTMENT USE ONLY

FIRE: ☐Approved ☐Not Approved Holds: By:

COMMUNITY DEVELOPMENT & INSPECTIONS: Zoning : Occupancy Permit:
Any other zoning permits required (such as variances or conditional use permits):
☐Approved ☐Not Approved Holds: By:

HEALTH: Number of Dogs Approved : Number of Cats Approved : ☐Not Approved
Holds: By:

CITY CLERK: Dog Tag Numbers Issued: Cat Tag Numbers Issued: By:

E-MAILED NOV 13 RC'D

FILED 11/13/13
INITIALS
LP NA 12/9
CC 12/16

KENNEL & PET SHOP LICENSES

(Chapter 14.015- City of Kenosha, Code of General Ordinances)

Type: ☐ 81 (non-commercial)
☒ 82 (commercial)
☐ 83 (humane society)
☐ 84 (pet shop)

Fee: $200.00/year ☐ NEW ☒ RENEWAL

Licensee Name: Happy Tails Doggy Day Care LLC DBA Central Bark Doggy Day Care District # 16

Trade Name: Central Bark Doggy Day Care Address: 7600 75th St., Suite #202

Phone Number: 262-694-3647 Email: Kenosha@CentralBarkUSA.com

If Individual, Partnership or Corporation: list name, home address, phone number, & date of birth of all partners/members:

Laura Kriofsky - 9010 18th St., Kenosha, WI 53144
262-859-2737

Primary Contact Person: Laura Kriofsky Phone Number: 262-694-3647

Number of animals sought to be kept on licensed premises: Dogs 72 Cats 0

READ CAREFULLY BEFORE SIGNING: Under penalty provided for by law, the undersigned states that each of the above questions has been truthfully answered to the best of his/her/their knowledge. (Individual applicants and each member of a partnership must sign; designated corporate officers must sign.)

Laura Kriofsky 11/7/13
(Individual/Partner/Member) Date

(Partner/Member) Date

RECEIVED
NOV 13 2013
CITY OF KENOSHA
CITY CLERK-TREASURER

I have received a copy of the NOTICE pertaining to LICENSE/PERMIT APPLICATIONS from the City Clerk's Office L.K.
(Applicant's Initials)

FOR DEPARTMENT USE ONLY

FIRE: ☐Approved ☐Not Approved Holds:_____ By:_____

COMMUNITY DEVELOPMENT & INSPECTIONS: Zoning :_____ Occupancy Permit:_____
Any other zoning permits required (such as variances or conditional use permits):_____
☐Approved ☐Not Approved Holds:_____ By:_____

HEALTH: Number of Dogs Approved :_____ Number of Cats Approved :_____ ☐Not Approved
Holds:_____ By:_____

CITY CLERK: Dog Tag Numbers Issued:_____ Cat Tag Numbers Issued:_____ By:_____

E-MAILED DEC 04 REC'D
EM notice 12/4 (MM)

FILED	12/4
INITIALS	MM
LP	12/9
CC	12/14

KENNEL & PET SHOP LICENSES

(Chapter 14.015- City of Kenosha, Code of General Ordinances)

Type: □ 81 (non-commercial)
□ 82 (commercial)
□ 83 (humane society)
☒ 84 (pet shop)

Fee: $200.00/year □ NEW ☑ RENEWAL

Licensee Name: Petco Animal Supplies Stores, Inc. District # 16

Trade Name: Petco #618 Address: 6910 Green Bay Rd

Phone Number: 262-697-8480 Email: Jamie.Castellanos@Petco.com

If Individual, Partnership or Corporation: list name, home address, phone number, & date of birth of all partners/members:

See Dist

Primary Contact Person: J. Castellanos Phone Number: 858-453-7845 x.9301

Number of animals sought to be kept on licensed premises: Dogs 0 Cats 0

READ CAREFULLY BEFORE SIGNING: Under penalty provided for by law, the undersigned states that each of the above questions has been truthfully answered to the best of his/her/their knowledge. (Individual applicants and each member of a partnership must sign; designated corporate officers must sign.)

R Shea 12/4/13
(Individual/Partner/Member) Date

(Partner/Member) Date

I have received a copy of the NOTICE pertaining to LICENSE/PERMIT APPLICATIONS from the City Clerk's Office (Mail)
(Applicant's Initials)

FOR DEPARTMENT USE ONLY

FIRE: □Approved □Not Approved Holds: By:

COMMUNITY DEVELOPMENT & INSPECTIONS: Zoning : Occupancy Permit:
Any other zoning permits required (such as variances or conditional use permits):
□Approved □Not Approved Holds: By:

HEALTH: Number of Dogs Approved : Number of Cats Approved : □Not Approved
Holds: By:

CITY CLERK: Dog Tag Numbers Issued: Cat Tag Numbers Issued: By:

PASSI/PETCO Southwest/IPSD Officers

Jim M. Myers		President	9125 Rehco Road, San Diego CA 921221
Patricia A. Ward	4	Treasurer	9125 Rehco Road, San Diego CA 921221
Darragh J. Davis	5	Vice President, General Counsel and Secretary	9125 Rehco Road, San Diego CA 921221
Richard L. Delano	3	Assistant Treasurer	9125 Rehco Road, San Diego CA 921221
Richard D. Skeen		Assistant Treasurer	9125 Rehco Road, San Diego CA 921221

Directors

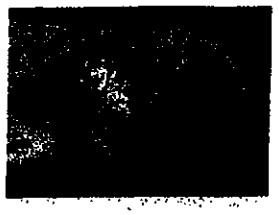
Jim M. Myers		Director	9125 Rehco Road, San Diego CA 921221
Patricia A. Ward	4	Director	9125 Rehco Road, San Diego CA 921221

E-MAILED NOV 22 2013

LP 12/9
NA.

Type 85

Fee: $35.00 (Non-Refundable)
Expires 12/31



CITY OF KENOSHA
City Ordinances §14.013 D.
PET FANCIER PERMIT
LICENSE PERIOD FROM January 1st to December 31st (No Pro-ration) 2014 Renewal

District 14

1. Name Janine Walczak
2. Address 8735 37TH Ave Kenosha WI 53142
3. Drivers License Number [illegible]
4. Phone Number 262-948-1295
5. Number of dogs*_____ Number of cats 3 (limit of up to five (5) dogs, cats or combination thereof. *Working dogs such as service dogs, medical alert dogs and certified therapy dogs are not included in the pet limit calculation. However, they must remain licensed in the City.
6. Are there any working, service, medical alert or certified therapy dogs included in #5? If so, please attach accreditation. Check here if attached ☐ N/A
7. Attach proof of current dog and/or cat licenses. Check here if attached. ☒
8. Do you currently have, or have you had within the past two (2) years, a conviction for animal cruelty, neglect or mistreatment of an animal? ☒ no ☐ yes
   If yes, please explain_____

Janine Walczak
Signature of Applicant

11/22/13
Date

For Office Use Only

RS 11-22-13
Clerk's Initials/Date Receipted

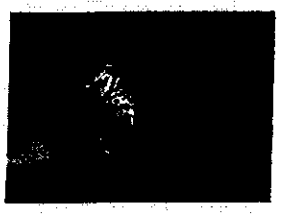
Date Granted by Licensing/Permit Committee

NA
LP 12/9

E-MAILED NOV 25 REC'D

Type 85

Fee: $35.00 (Non-Refundable)
Expires 12/31



CITY OF KENOSHA
City Ordinances §14.013 D.
PET FANCIER PERMIT
LICENSE PERIOD FROM January 1st to December 31st (No Pro-ration) Renewal 2014

1. Name James E. O'Brien District 3
2. Address 1709 61st Street Kenosha WI 53143
3. Drivers License Number
4. Phone Number 262-657-7055 James.obrien@wi.rr.com
5. Number of dogs* 3 + 2 Number of cats 0 (limit of up to five (5) dogs, cats or combination thereof. *Working dogs such as service dogs, medical alert dogs and certified therapy dogs are not included in the pet limit calculation. However, they must remain licensed in the City.
6. Are there any working, service, medical alert or certified therapy dogs included in #5? If so, please attach accreditation. Check here if attached ☐ N/A
7. Attach proof of current dog and/or cat licenses. Check here if attached. ☒
8. Do you currently have, or have you had within the past two (2) years, a conviction for animal cruelty, neglect or mistreatment of an animal? ☒ no ☐ yes
   If yes, please explain

Signature of Applicant

11/25/2013
Date

For Office Use Only

11/28/13 (mn)
Clerk's Initials/Date Receipted

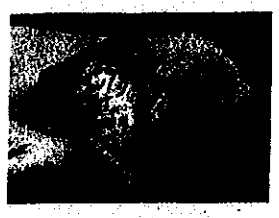
Date Granted by Licensing/Permit Committee

NA
LP 12/9

E-MAILED NOV 19 RECD

Type 85

Fee: $35.00 (Non-Refundable)
Expires 12/31



CITY OF KENOSHA
City Ordinances §14.013 D.
PET FANCIER PERMIT
LICENSE PERIOD FROM January 1st to December 31st (No Pro-ration) 2014 Renewal

1. Name George Horvat District # 1
2. Address 2020 76th AVE. 53140
3. Drivers License Number [illegible]
4. Phone Number 551-7188
5. Number of dogs* 2 Number of cats 1 (limit of up to five (5) dogs, cats or combination thereof. *Working dogs such as service dogs, medical alert dogs and certified therapy dogs are not included in the pet limit calculation. However, they must remain licensed in the City.
6. Are there any working, service, medical alert or certified therapy dogs included in #5? If so, please attach accreditation. Check here if attached ☐ N/A
7. Attach proof of current dog and/or cat licenses. Check here if attached. ☒
8. Do you currently have, or have you had within the past two (2) years, a conviction for animal cruelty, neglect or mistreatment of an animal? ☒ no ☐ yes
   If yes, please explain _____

Signature of Applicant

11.17.13
Date

For Office Use Only

RS / 11-19-13
Clerk's Initials/Date Receipted

Date Granted by Licensing/Permit Committee

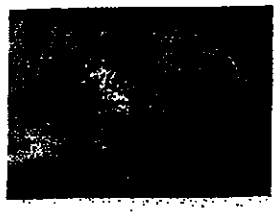
LP 12/9
NA

E-MAILED NOV 22 REC'D

Type 85

E-MAILED NOV 22 REC'D

Fee: $35.00 (Non-Refundable)
Expires 12/31



CITY OF KENOSHA
City Ordinances §14.013 D.
PET FANCIER PERMIT
LICENSE PERIOD FROM January 1st to December 31st (No Pro-ration)

2014 Renewal

1. Name MICHAEL K. HOGAN District 15
2. Address 6504 43RD AVE, KENOSHA 53142
3. Drivers License Number [illegible] 3
4. Phone Number 262-652-9415
5. Number of dogs* 2 Number of cats 2 (limit of up to five (5) dogs, cats or combination thereof. *Working dogs such as service dogs, medical alert dogs and certified therapy dogs are not included in the pet limit calculation. However, they must remain licensed in the City.
6. Are there any working, service, medical alert or certified therapy dogs included in #5? If so, please attach accreditation. Check here if attached ☐ N/A
7. Attach proof of current dog and/or cat licenses. Check here if attached. ☒
8. Do you currently have, or have you had within the past two (2) years, a conviction for animal cruelty, neglect or mistreatment of an animal? ☒ no ☐ yes
   If yes, please explain _____

Michael K Hogan
Signature of Applicant

11/21/13
Date

For Office Use Only

11/22/13
Clerk's Initials/Date Receipted

Date Granted by Licensing/Permit Committee

NA
LD 12/9

Type 85

Fee: $35.00 (Non-Refundable)
Expires 12/31

E-MAILED NOV 20 RE

CITY OF KENOSHA
City Ordinances §14.013 D.
PET FANCIER PERMIT
LICENSE PERIOD FROM January 1st to December 31st (No Pro-ration)

2014 Renewal

1. Name Sherry Hawkins District 7
2. Address 5503 - 24th Ave, Lower, Kenosha, WI 53140
3. Drivers License Number [redacted]
4. Phone Number 262-705-0731
5. Number of dogs* 0 Number of cats 3 +1 (limit of up to five (5) dogs, cats or combination thereof. *Working dogs such as service dogs, medical alert dogs and certified therapy dogs are not included in the pet limit calculation. However, they must remain licensed in the City.
6. Are there any working, service, medical alert or certified therapy dogs included in #5? If so, please attach accreditation. Check here if attached ☐ NONE
7. Attach proof of current dog and/or cat licenses. Check here if attached. ☒
8. Do you currently have, or have you had within the past two (2) years, a conviction for animal cruelty, neglect or mistreatment of an animal? ☒ no ☐ yes
If yes, please explain _____

Sherry Hawkins
Signature of Applicant

11/12/13
Date

For Office Use Only

DLG 11/20/13
Clerk's Initials/Date Receipted

Date Granted by Licensing/Permit Committee

NA
LP12/9

E-MAILED NOV 12 REC'D

Type 85

Fee: $35.00 (Non-Refundable)
Expires 12/31

Renewal
2014

CITY OF KENOSHA
City Ordinances §14.013 D.
PET FANCIER PERMIT
LICENSE PERIOD FROM January 1st to December 31st (No Pro-ration)

1. Name BARBARA CONTRO D.O.B.
2. Address 3301 13TH STREET District 4
3. Drivers License Number
4. Phone Number 262 344 5641
5. Number of dogs*_____ Number of cats 4 (limit of up to five (5) dogs, cats or combination thereof. *Working dogs such as service dogs, medical alert dogs and certified therapy dogs are not included in the pet limit calculation. However, they must remain licensed in the City.
6. Are there any working, service, medical alert or certified therapy dogs included in #5? If so, please attach accreditation. Check here if attached ☐ N/A
7. Attach proof of current dog and/or cat licenses. Check here if attached. ☒
8. Do you currently have, or have you had within the past two (2) years, a conviction for animal cruelty, neglect or mistreatment of an animal? ☒ no ☐ yes
   If yes, please explain_____

Barbara Contro
Signature of Applicant

11/12/2013
Date

For Office Use Only

WK 11/12/13
Clerk's Initials/Date Receipted

Date Granted by Licensing/Permit Committee

NA✓
LP 12/9

E-MAILED NOV 25 REC'D

Type 85

Fee: $35.00 (Non-Refundable)
Expires 12/31

CITY OF KENOSHA
City Ordinances §14.013 D.
PET FANCIER PERMIT
LICENSE PERIOD FROM January 1st to December 31st (No Pro-ration)

1. Name MARY SANTIAGO District 10
2. Address 4711 - 42nd AVE
3. Drivers License Number
4. Phone Number 262- 658- 4274
5. Number of dogs* 4 Number of cats_____ (limit of up to five (5) dogs, cats or combination thereof. *Working dogs such as service dogs, medical alert dogs and certified therapy dogs are not included in the pet limit calculation. However, they must remain licensed in the City.
6. Are there any working, service, medical alert or certified therapy dogs included in #5? If so, please attach accreditation. Check here if attached ☐ N/A
7. Attach proof of current dog and/or cat licenses. Check here if attached. ☒
8. Do you currently have, or have you had within the past two (2) years, a conviction for animal cruelty, neglect or mistreatment of an animal? ☒ no ☐ yes
   If yes, please explain_____

Mary Santiago
Signature of Applicant

11-19-13
Date

For Office Use Only

11/25/13
Clerk's Initials/Date Receipted

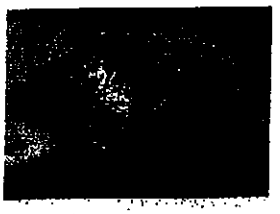
Date Granted by Licensing/Permit Committee

NA
LP12/9

E-MAILED NOV 26 REC'D

Type 85

Fee: $35.00 (Non-Refundable)
Expires 12/31



CITY OF KENOSHA
City Ordinances §14.013 D.
PET FANCIER PERMIT
LICENSE PERIOD FROM January 1st to December 31st (No Pro-ration)

District 7

1. Name Cassandra Brown
2. Address 5032 14th Ave / Kenosha / wi 53140
3. Drivers License Number
4. Phone Number 262-344-2262
5. Number of dogs* 1 Number of cats 3 (limit of up to five (5) dogs, cats or combination thereof. *Working dogs such as service dogs, medical alert dogs and certified therapy dogs are not included in the pet limit calculation. However, they must remain licensed in the City.
6. Are there any working, service, medical alert or certified therapy dogs included in #5? If so, please attach accreditation. Check here if attached ☐ No
7. Attach proof of current dog and/or cat licenses. Check here if attached. ☑ Proof of 2013 licence Permit Paper. wouldn't give 2014 yet cause of this for 4th Pet
8. Do you currently have, or have you had within the past two (2) years, a conviction for animal cruelty, neglect or mistreatment of an animal? ☒ no ☐ yes
If yes, please explain

Cassandra Brown
Signature of Applicant

11/21/13
Date

For Office Use Only

Clerk's Initials/Date Receipted 11/26/13

Date Granted by Licensing/Permit Committee

① Copy of Proof of 2012 & 2013 Pet fancyers licence

② Copy of Proof Shots & Paid city licence for Bloop, Prapp & Baby Penelope.

③ They wouldn't give Buddy until this okay so here is proof of his shots & a check for his 2014 tags.

* Cassandra Brown has given us a check for 4th animal 11/26/13

ORDINANCE NO. _____

SPONSOR: ALDERPERSON KEVIN MATHEWSON

TO CREATE SECTION 1.03 F.18 OF THE CODE OF GENERAL ORDINANCES REGARDING THE PROCEDURE FOR A PRESIDING OFFICER TO PARTICIPATE IN DEBATE

The Common Council of the City of Kenosha, Wisconsin, do ordain as follows:

Section One: Section 1.03 F.18. of the Code of General Ordinances for the City of Kenosha, Wisconsin, is hereby created as follows:

18. If the presiding officer of the Common Council, a committee of the Common Council, or an authority, board, or commission of the City wishes to participate in the debate, the presiding officer must vacate the chair and pass the gavel to a member of the body who shall temporarily preside in the place of the presiding officer during the pendancy of the time the presiding officer holds the floor. Provided that the presiding officer was not the maker of a motion on the matter while holding the floor, upon the presiding officer relinquishing the floor, he or she shall reassume the chair, retake the gavel and continue to preside. In the event that the presiding officer was the maker of a motion, he or she may reassume the chair on the ensuing matter. Nothing herein may be construed to prohibit the presiding officer from seconding motions without vacating the chair.

Section Two: This Ordinance shall become effective upon passage and publication.

ATTEST: _____ City Clerk

APPROVED: _____Mayor

Passed:

Published:

Drafted By:
EDWARD R. ANTARAMIAN
City Attorney

COPY

COMMON COUNCIL
CITY OF KENOSHA, WISCONSIN

In The Matter Of:

THE CLASS "A" RETAIL BEER LICENSE
OF DSD GROUP, LLC
d/b/a ROOSEVELT OIL
Amarjit Dhindsa, Agent
2710 Roosevelt Road
Kenosha, WI 53143

SUMMONS
ORDER TO APPEAR
AND SHOW CAUSE

TO: Amarjit Dhindsa, Agent
DSD Group, LLC
2710 Roosevelt Road
Kenosha, WI 53143

YOU ARE HEREBY ORDERED TO APPEAR AND SHOW CAUSE, on **Monday**, the **28th** day of **October, 2013**, at **6:30** o'Clock in the **P.M.** in **Room 202** of the Municipal Office Building, 625 52nd Street, Kenosha, Wisconsin, before the Committee on Licenses/Permits of the Common Council of the City of Kenosha, Wisconsin, **AND SHOW CAUSE** why the Class "B" Beer and "Class B" Liquor License should not be revoked for the reasons specified in the attached Complaint.

YOUR FAILURE TO APPEAR WILL RESULT IN THE NONRENEWAL AND REVOCATION OF SAID LICENSE

Dated at Kenosha, Wisconsin, this 14th day of October, 2013.

CITY OF KENOSHA, WISCONSIN

By: _____
DEBRA SALAS
City Clerk/Treasurer

Drafted by:
MATTHEW A. KNIGHT
Deputy City Attorney

COMMON COUNCIL
CITY OF KENOSHA, WISCONSIN

In The Matter Of:

THE CLASS "A" RETAIL BEER LICENSE OF DSD GROUP, LLC d/b/a ROOSEVELT OIL
Amarjit Dhindsa, Agent
2710 Roosevelt Road
Kenosha, WI 53143

COMPLAINT

NOW COMES DEBRA SALAS, City Clerk/Treasurer for the City of Kenosha, Wisconsin, and hereby states and complains as follows:

1. Debra Salas is an adult resident of the State of Wisconsin, and is the City Clerk/Treasurer for the City of Kenosha, Wisconsin;

2. Amarjit Dhindsa, agent of DSD Group, LLC, d/b/a Roosevelt Oil, hereinafter "Licensee", at all times relevant herein, was and is an adult resident of the City of Kenosha, Wisconsin, and as of April 19, 2013, resided at 7336 - 148th Avenue, Kenosha, Wisconsin;

3. Licensee was initially granted a Class "A" Retail Beer License, hereinafter "License", by the Common Council for the City of Kenosha, Wisconsin, hereinafter referred to as "Council", on December 18, 2006, pursuant to Chapter 10 of the Code of General Ordinances of the City of Kenosha, Wisconsin;

4. On June 3, 2013, the Council granted renewal of said License pursuant to Section 10.063 G. of the Code of General Ordinances, Kenosha, Wisconsin, for the licensing period beginning on July 1, 2013, and concluding on June 30, 2014, subject to a non renewal revocation hearing.

5. That following a nonrenewal revocation hearing the Licensee's License was suspended for 15 days and upon reinstatement the Licensee was issued 80 demerit points as documented more completely in the Findings of Fact, Conclusions of Law, and Recommendation,

and the Order of Suspension attached hereto and incorporated herein as Exhibits A and B;

6. That Licensee was assessed twenty (20) demerit points based upon a conviction of Licensee's employee, Sumit Bedi, and one companion ticket issued to Amarjit Dhindsa, the Licensee's agent, for Sale of Alcohol to an Underage Person, contrary to Wisconsin Statute 125.01(1)(a), pursuant to Sections 10.063 E.1. And 10.063 E.7.a.1. of the Code of General Ordinances, said violation having occurred on November 12, 2012, and resulting in a conviction in the Municipal Court for the City of Kenosha on January 16, 2013;

7. That Licensee was assessed twenty (20) demerit points based upon a conviction of Licensee's employee, Deborah Cook, and one companion ticket issued to Amarjit Dhindsa, the Licensee's agent, for No Licensed Operator on Licensed Premises, contrary to Wisconsin Statute 125.32(2), pursuant to Sections 10.063 E.1. And 10.063 E.7.a.1. of the Code of General Ordinances, said violation having occurred on October 17, 2012, and resulting in a conviction in the Municipal Court for the City of Kenosha on January 16, 2013;

8. That Licensee has accumulated one hundred twenty (120) demerit points within seven hundred thirty (730) consecutive days pursuant to Section 10.063 of the Code of General Ordinances;

9. Pursuant to Section 10.063 E.3. of the Code of General Ordinances, the accumulation of one hundred (100) demerit points subjects the Licensee to nonrenewal, revocation and/or suspension of said License held by Licensee, as determined by Council.

NOW, THEREFORE, Complainant requests the suspension and/or revocation of the License held by Licensee.

Dated at Kenosha, Wisconsin, this 14th day of October, 2013.

CITY OF KENOSHA, WISCONSIN

DEBRA SALAS
City Clerk/Treasurer

Subscribed and sworn to before me
this 14th day of October, 2013.

Notary Public, Kenosha County, WI
My Commission expires/is: 7-20-14

Drafted by:
MATTHEW A. KNIGHT
Deputy City Attorney

COPY

COMMON COUNCIL
CITY OF KENOSHA, WISCONSIN

In The Matter Of:

THE CLASS "B" BEER/"CLASS B" LIQUOR COMBINATION LICENSE OF BRAGADOS BANQUETS, LLC d/b/a BRAGADOS BANQUETS
Marco Mendez, Agent
4820 - 75th Street
Kenosha, WI 53142

SUMMONS
ORDER TO APPEAR AND SHOW CAUSE

TO: Marco Mendez, Agent
Bragados Banquets, LLC
4820 - 75th Street
Kenosha, WI 53142

YOU ARE HEREBY ORDERED TO APPEAR AND SHOW CAUSE, on **Monday**, the **28th** day of **October, 2013**, at **6:30** o'Clock in the **P.M.** in **Room 202** of the Municipal Office Building, 625 52nd Street, Kenosha, Wisconsin, before the Committee on Licenses/Permits of the Common Council of the City of Kenosha, Wisconsin, **AND SHOW CAUSE** why the Class "B" Beer and "Class B" Liquor License should not be revoked for the reasons specified in the attached Complaint.

YOUR FAILURE TO APPEAR WILL RESULT IN THE NONRENEWAL AND REVOCATION OF SAID LICENSE

Dated at Kenosha, Wisconsin, this 9th day of October, 2013.

CITY OF KENOSHA, WISCONSIN

By: _____
DEBRA SALAS
City Clerk/Treasurer

Drafted by:
MATTHEW A. KNIGHT
Deputy City Attorney

COMMON COUNCIL
CITY OF KENOSHA, WISCONSIN

In The Matter Of:

THE CLASS "B" BEER/"CLASS B" LIQUOR COMBINATION LICENSE OF BRAGADOS BANQUETS, LLC d/b/a BRAGADOS BANQUETS
Marco Mendez, Agent
4820 - 75th Street
Kenosha, WI 53142

COMPLAINT

NOW COMES DEBRA SALAS, City Clerk/Treasurer for the City of Kenosha, Wisconsin, and hereby states and complains as follows:

1. Debra Salas is an adult resident of the State of Wisconsin, and is the City Clerk/Treasurer for the City of Kenosha, Wisconsin;

2. Marco Mendez, owner, member and agent of Bragados Banquets, LLC, d/b/a Roosevelt Oil, hereinafter "Licensee", at all times relevant herein, was and is an adult resident of the City of Kenosha, Wisconsin, and as of April 19, 2013, resided at 11402 - 11th Avenue, Pleasant Prairie, Wisconsin;

3. Licensee was initially granted a Class "B" Beer/"Class B" Liquor Combination License, hereinafter "License", by the Common Council for the City of Kenosha, Wisconsin, hereinafter referred to as "Council", on July 18, 2011, pursuant to Chapter 10 of the Code of General Ordinances of the City of Kenosha, Wisconsin;

4. On June 17, 2013, the Council granted renewal of said License pursuant to Section 10.063 of the Code of General Ordinances, Kenosha, Wisconsin, for the licensing period beginning on July 1, 2013, and concluding on June 30, 2014, subject to a non renewal revocation hearing.

5. That following a prior nonrenewal revocation hearing the Licensee's License was issued 80 demerit points following a hearing before the Council on November 5, 2012, as

documented more completely in the Findings of Fact, Conclusions of Law, and Recommendation, and the Order of Reinstatement attached hereto and incorporated herein as Exhibits A and B;

6. That on March 2, 2013, Licensee was issued a municipal citation for violation of Wisconsin Statute §125.07(3)(b), Permitting an Underage Person to Loiter on Licensed Premises. That Licensee made an initial appearance in the City of Kenosha Municipal Court on March 21, 2013, pleading not guilty. That this matter remains pending at this time and is scheduled for trial before the Municipal Court on October 17, 2013. Furthermore, that this violation was not reviewed or considered by the Council in the original revocation proceeding;

7. That pursuant to the City of Kenosha Code of General Ordinances, Sections 10.063D.1. and 6.a.1., Licensee is subject to an assessment of twenty (20) demerit points for violating Wisconsin Statute §125.07.3B;

8. That Licensee has accumulated one hundred (100) demerit points during the 2012-2013 licensing term based upon the foregoing pursuant to Section 10.063;

9. Pursuant to Section 10.063D.1. of the Code of General Ordinances, the accumulation of one hundred (100) demerit within two consecutive licensing terms subjects the Licensee to the nonrenewal, revocation or suspension of said License, as determined by Council.

NOW, THEREFORE, Complainant requests the revocation of the License held by Licensee.

Dated at Kenosha, Wisconsin, this 9th day of October, 2013.

CITY OF KENOSHA, WISCONSIN

DEBRA SALAS
City Clerk/Treasurer

Subscribed and sworn to before me
this 9th day of October, 2013.

Notary Public, Kenosha County, WI
My Commission expires/is: 7-20-14

Drafted by:
MATTHEW A. KNIGHT
Deputy City Attorney