



ALCOHOL BEVERAGE AND BUSINESS LICENSE RENEWAL INFORMATION

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

HUERTA, Miguel, Agent
EL SENORIAL, LLC
1901 S 31ST ST
MILWAUKEE WI 53215

Note: The License Division is currently closed to in-person assistance due to the COVID-19 pandemic. Applications may be submitted via email to license@milwaukee.gov or via mail.

Current Licenses Expire: **2/26/2021**
 Renewal Filing Deadline: **12/10/2020**
 Late Fee Imposed After: **1/1/2021**

License Type and Number	License Fee (includes the \$10 publication fee)
BTAVN 207915	\$610.00
FREST 13883	\$800.00
PEP 6426	See Table Below
24HRS 199160	\$225.00

Public Entertainment Premises (PEP)	
This fee is based on the maximum capacity of the premises as established by the Common Council.	
Capacity	License Fee
25 or fewer persons, or premises without a capacity	\$150
26-79 persons	\$250
80-99 persons	\$375
100-149 persons	\$500
150-179	\$700
180-299	\$1000
300-499	\$1500
500 or more persons	\$2000

Fee Payment

The \$10 publication fee must be paid at time of application. License fees must be paid prior to the expiration date of your current license(s).

Late Fee

\$75.00

Contents

Enclosed is a renewal application for **1901 S 31ST ST**. If you hold other licenses for this location that expire at the same time, those renewal applications may be included.

Sidewalk Dining

If you are renewing a Sidewalk Dining Facility Permit you must include an insurance certificate with the renewal application.

Change of Agent / 20% or More Shareholder

- Any new agent or 20% or more shareholder must:
 - Complete an Auxiliary Questionnaire Form
 - Submit fingerprints (see the reverse page for instructions)
- In addition, new agents must:
 - Complete Schedule for Appointment of Agent Form
 - Within 5 days of being fingerprinted, contact the Milwaukee Police Department, License Investigation Unit, (414) 935-7430, for an interview and to provide proof of residency.
 - Submit one of the following:
 - A Responsible Beverage Server Course approved by the WI Dept of Revenue dated within the last two years.
 - An alcohol license for another Wisconsin Municipality that is no more than two years expired

Forms can be obtained at www.milwaukee.gov/license or by contacting our office.

Issuance of License

Per ordinance, renewal applications must be on file a minimum of 14 days before granting by the Common Council.

State law prohibits the License Division from issuing your license in the event of of the following:

- The Wisconsin Department of Revenue has placed a hold due to delinquent taxes; or
- An alcohol beverage wholesaler has placed a hold due to delinquent unpaid bills.

References

- Milwaukee Code of Ordinances Chapter 90
www.milwaukee.gov/ordinances
- Wisconsin State Statutes Chapter 125
www.legis.state.wi.us/rsb/stats.html

RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side. BTAVN 207915
 For the license period beginning 2/27/2021; ending 2/26/2022

TO THE GOVERNING BODY of the CITY OF MILWAUKEE, MILWAUKEE COUNTY

Aldermanic District No. 8 HUERTA, Miguel, Agent

Type of Legal Entity: **Limited Liability Company**

Complete A or B. All must complete C.

A: Individual or Partnership:

B: Full name of Corporation/Nonprofit Organization/Limited Liability Company: **EL SENORIAL, LLC**

Applicant's Wisconsin Seller's Permit Number: 456-1026290927-03	
Federal Employer Identification Number (FEIN):	
LICENSE REQUESTED ▶	
TYPE	FEE
<input type="checkbox"/> Class A Beer	\$
<input type="checkbox"/> Class B Beer	\$
<input type="checkbox"/> Class C Wine	\$
<input type="checkbox"/> Class A Liquor	\$
<input type="checkbox"/> Class A Liquor (cider only)	N/A
<input type="checkbox"/> Class B Liquor	\$
<input type="checkbox"/> Reserve Class B Liquor	\$
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$
TOTAL FEE	\$

C. 1. Trade Name ▶ **EL SENORIAL** Business Phone Number **(414) 385-9538**

2. Address of Premises ▶ **1901 S 31ST ST** Post Office & Zip Code ▶ **MILWAUKEE WI 53215**

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes No

4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for sales, service, consumption and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.)

FIRST FLOOR, EAST PATIO, BASEMENT STORAGE

5. Legal description (omit if street address is given above):

6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, corporation licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any municipality? **If yes, complete the reverse side** Yes No

b. Are **charges for any offenses presently pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? Yes No

If yes, complete the reverse side

7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? Yes No

If yes, explain.

8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax Return of the licensee? Yes No

If not, explain.

9. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776] Yes No

10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? Yes No

11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? Yes No

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin State Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitted false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Miguel Huerta
 (Officer of Corporation/Member/Manager of Limited Liability Company/Partner/Individual)

TO BE COMPLETED BY CLERK:		
Date received and filed with municipal clerk	Date reported to council/board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

INSTRUCTIONS FOR RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION (AT-115A)

THIS RENEWAL FORM CANNOT BE USED IF:

1. There is a change in business entity (i.e. individual has changed to partnership or corporation/limited liability company; partnership changed to individual or corporation/limited liability company; corporation changed to individual, partnership or limited liability company) and if limited liability company has been dissolved.
2. Partners are added or dropped.
3. Application is made in a different municipality.

PARTNERSHIPS:

Indicate full name and home address of each partner. One partner must sign application. **Reminder:** If partners have been added or dropped since your last application, you must use Form AT-106 (Original Alcohol Beverage License Application).

CORPORATIONS:

One owner must sign application. Be sure to answer Question No. 7 by indicating any change of owners, agent, and/or changes in home address. If there are any changes in owners or agent each must complete Form AT-103 (Auxiliary Questionnaire). If there has been a change in agent since your last approved agent, he/she must complete Form AT-104 (Schedule for Appointment of Agent) AND AT-103 (Auxiliary Questionnaire) in addition to this (AT-115) form.

LIMITED LIABILITY COMPANY:

One owner must sign application. Follow procedure under Corporations for any change of owner or agent.

NOTE: Use ink or typewriter when filling in applications. Be sure to answer all questions fully and accurately. Any lack of access to any portion of a licensed premises during inspection will be deemed a refusal to permit inspection. Such refusal is a misdemeanor and grounds for revocation of this license.

DISCRIMINATION CLAUSE:

The applicant shall not willfully refuse to provide those services offered under this license or refuse to employ or discharge any person otherwise qualified because of race, color, creed, sex, national origin or ancestry; the applicant shall not seek information as a condition of employment, or penalize any employee or discriminate in the selection of personnel for training or promotion solely on the basis of such information. The applicant also shall not discriminate against any member of the military service dressed in uniform by willfully refusing services offered under this license.

Complete, sign and return this form to the clerk.

If answer to Question No. 6a and/or 6b on the reverse side is "YES," outline details below"

CONVICTIONS

1. NAME _____ STATUTE NO./LOCAL ORDINANCE _____
CHARGE _____ WHERE CONVICTED _____
DATE _____ PENALTY _____ MISDEMEANOR FELONY

2. NAME _____ STATUTE NO./LOCAL ORDINANCE _____
CHARGE _____ WHERE CONVICTED _____
DATE _____ PENALTY _____ MISDEMEANOR FELONY

3. NAME _____ STATUTE NO./LOCAL ORDINANCE _____
CHARGE _____ WHERE CONVICTED _____
DATE _____ PENALTY _____ MISDEMEANOR FELONY

PENDING CHARGE

1. NAME _____ STATUTE NO./LOCAL ORDINANCE _____
PENDING CHARGE _____ DATE _____



BUSINESS RENEWAL APPLICATION

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

Licenses Being Renewed:
BTAVN 207915 24HRS 199160 FREST 13883 PEP 6426
Filing Deadline: 12/10/2020
\$75.00 Late Fee Assessed After 1/1/2021

Office Use Only:	App # _____
N Objs No ___ Yes ___	Chgs _____
Filed _____	Initials _____
Paid _____	MPD _____
Granted _____	Lic # _____
AD 8	

BUSINESS CONTACT INFORMATION

Section 1	Legal Entity Name :EL SENORIAL, LLC	Trade/DBA:EL SENORIAL
	Phone:(414) 385-9538	E-mail: HUERTAMI@YAHOO.COM
	Premises Address (include city/state/zip): 1901 S 31ST ST MILWAUKEE WI 53215	
	Mailing Address (include city/state/zip): 1901 S 31ST ST MILWAUKEE WI 53215	

AGENT OF CORP/LLC/NONPROFIT / SOLE PROPRIETOR / 1ST PARTNER

Section 2	FULL LEGAL NAME (Last, First & Middle Initial): HUERTA, Miguel, Agent	Date of Birth: 07-19-65
	Home Address (include city/state/zip): 3748 S. 24th ST	
	Driver's License Number/State ID #: H630-5406-5259-07 State: WI	
	Percent % of Ownership Interest: 100%	Home Phone: Cell Phone: (414) 218-0733

LIST ALL PERSONS WITH 20% OR MORE OWNERSHIP INTEREST / ADDITIONAL PARTNER(S)

Section 3	FULL LEGAL NAME (Last, First & Middle Initial):	Date of Birth:
	Home Address (include city/state/zip):	
	Driver's License Number/State ID #: [] [] [] [] - [] [] [] [] - [] [] [] [] - [] [] State: _____	
	Percent % of Ownership Interest:	Home Phone: Cell Phone:
	FULL LEGAL NAME (Last, First & Middle Initial):	Date of Birth:
	Home Address (include city/state/zip):	
	Driver's License Number/State ID #: [] [] [] [] - [] [] [] [] - [] [] [] [] - [] [] State: _____	
	Percent % of Ownership Interest:	Home Phone: Cell Phone:

Check if there are additional persons with 20% or more ownership interest or partners. Complete additional sheets as necessary.

REQUIRED SIGNATURE

Section 4	<ol style="list-style-type: none"> The undersigned understands that applicants are required to inform the City Clerk within 10 days of any changes in any of the information supplied in this application. The undersigned has knowledge of the City Ordinances currently regulating the license applied for herein, and understands that the license may be subject to suspension, non-renewal or revocation, if the applicants violate any rule or regulation relating to the license. The undersigned understands that applicants shall not wilfully refuse to provide the services offered under this license, or add charges or require deposits not required of the general public because of race, color, sex, religion, national origin or ancestry, age, handicap, lawful source of income, marital status, sexual orientation, gender identity or expression, familial status or the fact that a person is now or has been a member of the military service, whether dressed in uniform or not; and shall not seek such information as a condition of employment, or penalize any employee or discriminate in the selection of personnel for training or promotion on the basis of such information. I/we state that this application for a license is not made for and behalf of any other person and that the applicant is not acting as an agent for, or in the employment of another.
	Sole Proprietor, a Partner, or if a Corporation or LLC, the agent must sign: <u>Miguel Huerta</u>

Office Use Only:
Current License: New Renewal Granted: No Issues WL Suspension Other _____

2021-2022 Plan of Operation for 1901 S 31ST ST

1. Litter & Security Plans

How are the grounds kept clean? Sweep Pressure Wash Pick Up Litter Other:

How often will grounds be cleaned? Daily Weekly Other:

Who cleans the grounds? Licensee Building Owner Employees Hired Maintenance Other:

How are noise issues prevented and/or addressed? Security Manager approaches customer(s) Call Police Signs Posted
 Other:

Are there designated outdoor smoking areas? No Yes If Yes, Describe:

Number of garbage cans: Inside 6 Locations: Kitchen - Bar - waitress station - dishwasher area
Outside 2 Locations: Parking lot

Is a crowd control barrier used? No Yes If Yes, Describe:

Number of restrooms: 3 Name of solid waste contractor: Waste Management

Are there parking spaces on the premises? No Yes If Yes, list number of spaces: 19 and describe security plans:
Cameras and Security guard Patrols

Are there designated loading areas? No Yes If Yes, describe security plans:
Surveillance Cameras

Do you have security personnel on the premise? No Yes If Yes, how many? 1
AND What are their responsibilities? Supervise activity including parking lot and building area
What security equipment do they use? Uniform and equipment provided by the agent
List their licensing, certification or training credentials: _____

Are there security cameras? No Yes If Yes, list all locations: Around the building - parking lot dining bar bar area kitchen

Are searches and/or identification checks conducted upon entry? No Yes If Yes, describe:

2. Percentage of Sales (must total 100%)

Alcohol 15 % Food Sales 85 % Entertainment _____ % Other _____ %

3. Businesses On The Premises (choose all that apply):

Restaurant Cafe/Coffee Shop Cocktail Lounge Convenience Store Night Club Liquor Store Tavern Sports Facility
 Hotel Banquet Hall Supermarket Private/Fraternal/Veterans' Club Other:

4. Hours of Operation and Age Restriction

Are there any changes to the current hours of operation or age restriction? No Yes If Yes, Describe:

Please Note: If you will be open earlier or later than the hours listed on your current license for even one event or holiday (for example, St. Patrick's Day, Brewers Opening Day, etc.) during the license period, this must be reported and printed on your license.
Your hours of operation and age restriction are listed on your current license.

5. Floor Plan and Capacity

Are you requesting any changes to your capacity or floor plan*? No Yes If yes, describe: _____ and submit a new floor plan with this renewal application. A sample plan can be found online at www.milwaukee.gov/licenses under License Forms and Related Information.
Alcohol/Food Establishments: A "Permanent Extension of Premises Application" is required if you are adding any square footage to the licensed premises.

6. Sidewalk Dining: Fee:

Are there any changes to the sidewalk dining site plan? No Yes If Yes, submit an updated site plan with this application.

7. Food License: FREST 13883 Fee: \$800.00

Your current food license includes the following food operations:
DHS - COMPLEX, Sales \$20,001 - \$200,000, Tavern Restaurant
Are there any changes to your food operations as listed above?
 No Yes, if Yes, explain _____

8. Weights and Measures: Fee:

Number/Type of Devices:
Are there any changes to the number or types of devices? No Yes
If yes, contact our office for further instructions.

1. CURRENT APPROVED ENTERTAINMENT

The following types of entertainment have been approved for your current Public Entertainment Premises license:

Instrumental Musicians

2. ADDING ENTERTAINMENT

If applicable, check any entertainment you wish to add: **ONLY CHECK ENTERTAINMENT TYPE(S) YOU ARE ADDING. YOUR CURRENT APPROVED ENTERTAINMENT IS LISTED ABOVE.**

- | | | | |
|---|--|--|---|
| <input checked="" type="checkbox"/> Instrumental Musicians | <input type="checkbox"/> Bands | <input type="checkbox"/> Battle of the Bands | <input type="checkbox"/> Comedy Acts |
| <input type="checkbox"/> Disc Jockey | <input type="checkbox"/> Magic Shows | <input type="checkbox"/> Poetry Readings | <input type="checkbox"/> Dancing by Performers |
| <input type="checkbox"/> Jukebox | <input type="checkbox"/> Wrestling | <input type="checkbox"/> Patron Contests | <input type="checkbox"/> Patrons Dancing |
| <input type="checkbox"/> Adult Entertainment/
Strippers/Erotic Dance | <input type="checkbox"/> Karaoke | <input type="checkbox"/> Bowling Alley
How many? _____ | <input type="checkbox"/> Pool Tables
How many? _____ |
| <input type="checkbox"/> Motion Pictures (movies by admission)
How many screens? _____ | <input type="checkbox"/> Amusement Machines
How many? _____ | <input type="checkbox"/> Concerts
Approx. # per year? _____ | <input type="checkbox"/> Theatrical Performances
Approx. # per year? _____ |
| <input type="checkbox"/> Other: _____ | | | |

No entertainment changes can take place until approved by Common Council and a new license has been issued and posted on the premises.

3. REMOVING ENTERTAINMENT

If applicable, list any entertainment you wish to remove:

4. PROMOTERS/SOUND AMPLIFICATION

Will promoters ever be used for any of the entertainment? No Yes If Yes, Describe:

At any time will sound amplification be used? No Yes If Yes, Describe:

5. SIGNATURE

I understand that after the license has been issued, a change to the plan of operation will require a written request to change and approval from the Common Council.

I agree to inform the City Clerk within 10 days of any substantial changes in the information supplied in this application.

I understand that I shall not willfully refuse to provide the services offered under this license, or add charges or require deposits not required of the general public because of race, color, sex, religion, national origin or ancestry, age, handicap, lawful source of income, marital status, sexual orientation, gender identity or expression, familial status or the fact that a person is now or has been a member of the military service, whether dressed in uniform or not; and shall not seek such information as a condition of employment, or penalize any employee or discriminate in the selection of personnel for training or promotion on the basis of such information.

I have knowledge of the City Ordinances currently regulating public entertainment, and understand that the license may be subject to suspension, non-renewal or revocation, if I violate any rule, law or regulation of the city of Milwaukee and State of Wisconsin.

Miguel Huerta
Signature of Sole Proprietor, a Partner, or if a Corporation or LLC, the Agent must sign