

RESOLUTION # _____ OF THE CITY OF BROOKFIELD, WISCONSIN

Committee: Legislative & Licensing
Committee Date: April 4, 2023
Committee Recommendation:

Public Hearing: n/a
Council Date: April 18, 2023
Council Action:

***Original Class B Beer & Liquor License for an applicant –
AHTRST Concessions, LLC, d/b/a: Sheraton Milwaukee
Brookfield Hotel, 375 S. Moorland Road, Agent: Omar A. Naimi***

WHEREAS, an applicant, Sheraton Milwaukee Brookfield Hotel, 375 S. Moorland Road, requests an Original Class B Beer & Liquor License in the City of Brookfield, and

WHEREAS, the Legislative & Licensing Committee considered the Original Class B Beer & Liquor License application at its meeting held on April 4, 2023 and recommends approval thereof.

NOW, THEREFORE, BE IT RESOLVED, by the Common Council of the City of Brookfield that it hereby grants an Original Class B Beer & Liquor License for Sheraton Milwaukee Brookfield Hotel, 375 S. Moorland Road, and

BE IT FURTHER RESOLVED, that the proper city official(s) be hereby authorized and directed to carry out the council's action, including, but not limited to signing documents, implementing technical revisions to documents to effectuate the best interest of the City, and correcting scrivener's errors.

Adopted this 18th day of April, 2023.

Approved:

Mayor Steven V. Ponto

Attested:

City Clerk Michelle Luedtke

Original Alcohol Beverage Retail License Application

(Submit to municipal clerk.)

For the license period beginning: _____ ending: _____
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: Town of }
 Village of } BROOKFIELD
 City of }

County of WAUKESHA Aldermanic Dist. No. _____
 (if required by ordinance)

Check one: Individual Limited Liability Company
 Partnership Corporation/Nonprofit Organization

TYPE OF LICENSE REQUESTED	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$ 100
<input type="checkbox"/> Class C wine	\$
<input type="checkbox"/> Class A liquor	\$
<input type="checkbox"/> Class A liquor (cider only)	\$ N/A
<input checked="" type="checkbox"/> Class B liquor	\$ 500
<input type="checkbox"/> Reserve Class B liquor	\$
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$ 20
TOTAL FEE	\$ 620

Name (individual / partners give last name, first, middle; corporations / limited liability companies give registered name)
AHTRST CONCESSIONS, LLC

An "Auxiliary Questionnaire," Form AT-103, must be completed and attached to this application by each individual applicant, by each member of a partnership, and by each officer, director and agent of a corporation or nonprofit organization, and by each member/manager and agent of a limited liability company. List the full name and place of residence of each person.

President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
PRES / CHLOUPEK	MARK	MILENKO	3124 HANOVER, DALLAS, TX 75225
Vice President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
VP / KOVACH	KAREN	LOUISE	8224 PAISLEY, THE COLONY, TX 75056
Secretary / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
VP / SMITH	ROBERT	PAUL	7300 SWANSON DR, PLANO, TX 75025
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
SOLE MEMBER/AHTRUST	CONCESSIONS	TRUST	5301 HEADQUARTERS DR, PLANO, TX 75024
Agent Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
NAIMI	OMAR	AHMED	15275 BRIARIDGE CT, ELM GROVE, WI 53122
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
MANAGER / CHLOUPEK	MARK	MILENKO	3124 HANOVER, DALLAS, TX 75225

1. Trade Name SHERATON MILWAUKEE BROOKFIELD HOTEL Business Phone Number 262-364-1024
 2. Address of Premises 375 S. MOORLAND RD Post Office & Zip Code BROOKFIELD 53005

3. 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 the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.)

ALCOHOL SERVED IN RESTAURANT, BAR, LOUNGE, MEETING ROOMS, COURTYARD AND POOL. ALCOHOL IS STORED IN BASEMENT COOLERS AND INVOICES ARE KEPT IN THE SALES OFFICE.

4. Legal description (omit if street address is given above): N/A

5. (a) Was this premises licensed for the sale of liquor or beer during the past license year? Yes No

(b) If yes, under what name was license issued? REAL HOSPITALITY GROUP, LLC

6. Is individual, partners or agent of corporation/limited liability company subject to completion of the responsible beverage server training course for this license period? **If yes, explain** Yes No
REQUIREMENTS UNDER LICENSE TYPE

7. Is the applicant an employe or agent of, or acting on behalf of anyone except the named applicant? Yes No
If yes, explain.

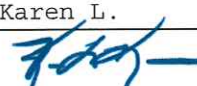
8. Does any other alcohol beverage retail licensee or wholesale permittee have any interest in or control of this business? **If yes, explain** Yes No

9. (a) **Corporate/limited liability company applicants only:** Insert state DE and date 04/20/15 of registration.
- (b) Is applicant corporation/limited liability company a subsidiary of any other corporation or limited liability company? **If yes, explain** Yes No
APPLICANT HAS ONE MEMBER, AHTRUST CONCESSIONS TRUST - 100% OWNERSHIP

- (c) Does the corporation, or any officer, director, stockholder or agent or limited liability company, or any member/manager or agent hold any interest in any other alcohol beverage license or permit in Wisconsin? **If yes, explain.** Yes No
THE CORPORATION HOLDS THE FOLLOWING WI LICENSES: 2021-058, 464.696,
2022/23-008, 2022-65, 2070.

10. Does the applicant understand they must register as a Retail Beverage Alcohol Dealer with the federal government, Alcohol and Tobacco Tax and Trade Bureau (TTB) by filing (TTB form 5630.5d) before beginning business? [phone 1-877-882-3277] Yes No
11. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776] Yes No
12. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? 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. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000. Signer agrees to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants, or one member of a partnership applicant must sign; one corporate officer, one member/manager of Limited Liability Companies must sign.) 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.

Contact Person's Name (Last, First, M.I.) Kovach, Karen L.	Title/Member Vice President	Date 01/26/2023
Signature 	Phone Number	Email Address

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>3-13-23 MS</u>	Date reported to council / board <u>4-4-23</u> <u>4-18-23</u>	Date provisional license issued	Signature of Clerk / Deputy Clerk
Date license granted	Date license issued	License number issued	

CITY OF BROOKFIELD
Surrender of Alcohol License – NEW OWNER

Legal/Real Name of Current Licensee: Real Hospitality Group, LLC

Premise Address: 375 S Moorland Road, Brookfield, WI 53005

Trade Name: Sheraton Milwaukee Brookfield Hotel

This is to advise that the undersigned is surrendering the following license(s)

- Combination "Class B" Beer & Liquor
- Class "B" Beer
- Class "A" Beer and/or "Class A" Liquor (circle which apply)
- Wholesale Beer
- "Class C" Wine

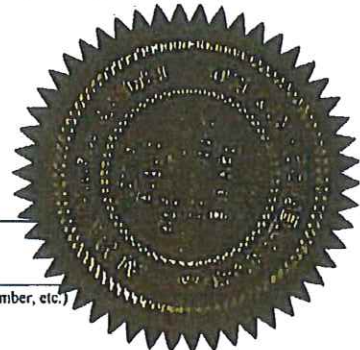
Date: 3/8/2023 **Current Licensee**
 By: [Signature]
Authorized Signatory
Manager
Authorized Signatory Title: (Secretary, Member, Partner, etc.)

STOP HERE – If surrendering license to City of Brookfield only

Check Box if leasing or selling business premise
 to: AHTRST Concessions LLC Sheraton Milwaukee Brookfield Hotel
(Insert Legal/Real Name of Proposed Licensee and Trade Name) (d/b/a: Trade Name)

and understand that said license(s) will be cancelled upon the Common Council's granting of a license to the applicant named herein.

There is no guarantee that the new owner will be approved a license.



NEW APPLICANT
[Signature]
Authorized Signatory
Karen Kovach - Vice President
Authorized Signatory Title: (President, Secretary, Member, etc.)

CURRENT LICENSEE:
[Signature]
Authorized Signatory
Manager
Authorized Signatory Title: (President, Secretary, Member, etc.)

State of Maryland)
 County of Worcester) s.s.

My Commission Expires
 January 03, 2024

On this 10th day of MARCH, 2023, personally came before me
Benjamin Seidel, known to me to be the person(s) who
 executed the foregoing Surrender of License, and known to me to be the **Current Licensee** and acknowledged that
 s/he executed the foregoing document.

[Signature]
 Notary Public
 My Commission expires:

State of TEXAS)
County of COLLIN) ss.

On the 10 day of March, 2023, personally came before me
Karen Kovach, known to me to be the person(s) who
executed the foregoing Surrender of License, and known to me to be the **Proposed New Applicant** and
acknowledged that s/he executed the foregoing document.



[Handwritten Signature]

Notary Public
My Commission expires:

Surrender of Alcohol License

