CITY OF GLENDALE
5909 North Milwaukee River Parkway
City Hall, WI 53209

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AGENDA-LEGISLATIVE, JUDICIARY & FINANCE COMMITTEE MEETING

Monday, July 14, 2025
5:45 PM

1. **Call to Order / Roll Call**

2. **Adoption of Minutes**

   a. Approval: Minutes from June 9th, 2025, Legislative, Judiciary, and Finance Committee Agenda Meeting

3. **New Business**

   a. Recommendation to the Common Council: *Approval of Application for Class "B" (beer) Retailer License* - Filed by Karampelas Investments Inc. for Gyro Palace located at 5336 N Port Washington Road.

   b. Recommendation to the Common Council: *Approval of Application for Class "B" (beer & liquor) Retailer License* - Filed by Pedro's South American Food, LLC for La Cocina Del Sur - Empanada Bar located at 6969 N Port Washington Road.

4. **Adjournment**

NOTICE: Although this is NOT a meeting of the Glendale Common Council, a majority of Council members may be in attendance. No action or deliberation by the Council will take place.

Upon reasonable notice, efforts will be made to accommodate the needs of persons with disabilities.

CITY OF GLENDALE

Glendale, Wisconsin 53209
MINUTES- Legislative, Judiciary & Finance Committee

Monday, June 9, 2025

5:45 PM

1. Call to Order / Roll Call

Ald. Gelhard called the meeting to order at 6:08 PM.

Roll Call: Present: Ald. Gelhard, Ald. Vukovic, Ald. Schmelzling
Other Officials Present: Ald. Bailey, City Administrator Karl Warwick
Absent: None.

2. Adoption of Minutes

a. Approval: Minutes from March 10, 2025, Legislative, Judiciary, and Finance Committee Agenda Meeting

Motion made by Ald. Vukovic, and seconded by Ald. Schmelzling to approve the Meeting Minutes from March 10, 2025, Legislative, Judiciary, and Finance Committee Agenda Meeting. Ayes: All. Noes: None. Abstain: None.

3. New Business

a. Recommendation to the Common Council: *Approval of Application for Class "A" (beer) Retailer License* - Filed by Speedway, LLC for Speedway #4125 located at 6170 North Green Bay Avenue.

City Administrator, Karl Warwick, briefly discussed Speedway's new application for a Class "A" Beer License, which, if approved, would be valid as of July 1, 2025. Chief Fugman did not have any concerns regarding this new application. Motion made by Ald. Schmelzling, and seconded by Ald. Vukovic to approve the Class "A" (beer) Retailer License application filed by Speedway, LLC for Speedway #4125 located at 6170 North Green Bay Avenue. Ayes: All. Noes: None. Abstain: None.

b. Review and Possible Action: 2025 Renewal Alcohol Beverage License Applications.

Motion made by Ald. Schmelzling, and seconded by Ald. Vukovic to amend the 2025 Renewal Alcohol Beverage License Applications list by removing King Crab Shack and approving the updated renewal list. Ayes: All. Noes: None. Abstain: None.

4. Adjournment

Motion made by Ald. Vukovic, and seconded by Ald. Schmelzling to adjourn the Legislative, Judiciary and Finance Committee Meeting at 6:19 PM. Ayes: All. Noes: None. Abstain: None.

[MIN_SIGNATURES]

Form **AB-200**

Alcohol Beverage License Application

For Municipal Use Only	
Municipality	
License Period	

License(s) Requested: (up to two boxes may be checked)

- ☐ Class "A" Beer . . . . . $ 100
- ☒ Class "B" Beer . . . . . $ 100
- ☐ "Class A" Liquor . . . . . $ 500
- ☐ "Class B" Liquor . . . . . $ 500
- ☐ "Class A" Liquor (cider only) $ _____
- ☐ Reserve "Class B" Liquor $ _____
- ☐ "Class C" Liquor (wine only) $ 100

Publication Fee $25
Background Check (CIB) Fee $15
(per person listed in Part C)

Fees	
License Fees	$ 100
Background Check Fee	$ 15
Publication Fee	$ 25
Total Fees	$ 140

Part A: Premises/Business Information

1. Legal Business Name (individual name if sole proprietorship)
KARAMPELAS INVESTMENTS INC.

2. Business Trade Name or DBA
GYRO PALACE

456-0002819995-04

3. FEIN
20-446-3788

4. Wisconsin Seller's Permit Number
004-0002819995-01

5. Entity Type *(check one)*
☐ Sole Proprietor ☐ Partnership ☐ Limited Liability Company ☒ Corporation ☐ Nonprofit Organization

6. State of Organization
WI

7. Date of Organization
7-31-2002

8. Wisconsin DFI Registration Number

9. Premises Address
5336 N. PORT WASHINGTON RD.

10. City
GLENDALE

11. State
WI

12. Zip Code
53217

13. County
MILWAUKEE

14. Governing Municipality: ☒ City ☐ Town ☐ Village
of: GLENDALE

15. Aldermanic District

16. Premises Phone
414-332-2210

17. Premises Email

18. Website
GYROPALACETOGO.COM

19. Premises Description - Describe the building or buildings where alcohol beverages are produced, sold, stored, or consumed, and related records are kept. Describe all rooms within the building, including living quarters. Authorized alcohol beverage activities and storage of records may occur only on the premises described in this application. Attach a map or diagram and additional sheets if necessary.

FAST SIGNS RETAIL PLAZA. FAR NORTH END CAP OF PLAZA

20. Mailing Address (if different from premises address)

21. City

22. State

23. Zip Code

Part B: Questions

1. Has the business (sole proprietorship, partnership, limited liability company, or corporation) been convicted of violating federal or state laws or local ordinances? Exclude traffic offenses unless related to alcohol beverages. ☐ Yes ☒ No

If yes, list the details of violation below. Attach additional sheets if necessary.

Law/Ordinance Violated	Location	Trial Date
Penalty Imposed	Was sentence completed? . . . . . ☐ Yes ☐ No	
Law/Ordinance Violated	Location	Trial Date
Penalty Imposed	Was sentence completed? . . . . . ☐ Yes ☐ No	

2. Are charges for any offenses pending against the business? Exclude traffic offenses unless related to alcohol beverages. ☐ Yes ☒ No

If yes, describe the nature and status of pending charges using the space below. Attach additional sheets as needed.

3. Is the applicant business or any of its officers, directors, members, agent, employees, owners, or other related individuals or entities a restricted investor with any interest in an alcohol beverage producer or distributor? ☐ Yes ☒ No
If yes, provide the name of the restricted investor and describe the nature of the interest.

4. Is the applicant business owned by another business entity? ☐ Yes ☒ No
If yes, provide the name(s) and FEIN(s) of the business entity owners below. Attach additional sheets as needed.

4a. Name of Business Entity	4b. Business Entity FEIN

5. Have the partners, agent, or sole proprietor satisfied the responsible beverage server training requirement for this license period? Submit proof of completion. ☒ Yes ☐ No

6. Is the applicant business indebted to any wholesaler beyond 15 days for beer or 30 days for liquor/wine? ☐ Yes ☒ No

7. Does the applicant business owe past due municipal property taxes, assessments, or other fees? ☐ Yes ☒ No

Part C: Individual Information

List the name, title, and phone number for each person or entity holding the following positions in the applicant business or businesses listed in Part B, Question 4: sole proprietor, all officers, directors, and agent of a corporation or nonprofit organization, all partners of a partnership, and all members, managers, and agent of a limited liability company. Attach additional sheets if necessary.

Include Form AB-100 for each person listed below. Corporations and LLCs must appoint an agent by including Form AB-101.

Last Name	First Name	Title	Phone
KARAMPELAS	NIKO	OWNER	414-688-0071

Part D: Attestation

One of the following must sign and attest to this application:

• sole proprietor • one general partner of a partnership • one corporate officer • one member of an LLC

READ CAREFULLY BEFORE SIGNING: Under penalty of law, I have answered each of the above questions completely and truthfully. I agree that I am acting solely on behalf of the applicant business and not on behalf of any other individual or entity seeking the license. Further, I agree that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another individual or entity. I agree to operate this business according to the law, including but not limited to, purchasing alcohol beverages from state authorized wholesalers. I understand that lack of access to any portion of a licensed premises during inspection will be deemed a refusal to allow inspection. Such refusal is a misdemeanor and grounds for revocation of this license. I understand that any license issued contrary to Wis. Stat. Chapter 125 shall be void under penalty of state law. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than $1,000 if convicted.

Last Name	First Name	M.I.
KARAMPELAS	NIKO	A

Title	Email	Phone
OWNER	karampelasnick@YAHoo.com	414-688-0071

Signature	Date

Part E: For Clerk Use Only

Date Application Was Filed With Clerk	License Number	Date License Granted	Date License Issued

Signature of Clerk/Deputy Clerk	Date Provisional License Issued (if applicable)

Form **AB-200**

Alcohol Beverage License Application

For Municipal Use Only	
Municipality	
License Period	

License(s) Requested: (up to two boxes may be checked)

- ☐ Class "A" Beer . . . . . $ 100
- ☒ Class "B" Beer . . . . . $ 100
- ☐ "Class A" Liquor . . . . . $ 500
- ☒ "Class B" Liquor . . . . . $ 500
- ☐ "Class A" Liquor (cider only) $ _____
- ☐ Reserve "Class B" Liquor $ _____
- ☐ "Class C" Liquor (wine only) $ 100

Publication Fee $25
Background Check (CIB) Fee $15
(per person listed in Part C)

Fees	
License Fees	$ 600
Background Check Fee	$ 15
Publication Fee	$ 25
Total Fees	$ 640.00

Part A: Premises/Business Information

1. Legal Business Name (individual name if sole proprietorship)
Pedro's SouthAmerican food, LLC

2. Business Trade Name or DBA
LA COCINA DEL SUR - EMPANADA BAR

3. FEIN
612-050-653

4. Wisconsin Seller's Permit Number
456103120043904

5. Entity Type *(check one)*
☐ Sole Proprietor ☐ Partnership ☒ Limited Liability Company ☐ Corporation ☐ Nonprofit Organization

6. State of Organization
WISCONSIN

7. Date of Organization
08-01-2022

8. Wisconsin DFI Registration Number
P095629

9. Premises Address
6969 N. Port Washington Rd

10. City
Glendale

11. State
WI

12. Zip Code
53217

13. County
Milwaukee

14. Governing Municipality: ☐ City ☒ Town ☐ Village
of: Glendale

15. Aldermanic District

16. Premises Phone
414-591-4602

17. Premises Email
empanadasmke@gmail.com

18. Website
lacocinamke.com

19. Premises Description - Describe the building or buildings where alcohol beverages are produced, sold, stored, or consumed, and related records are kept. Describe all rooms within the building, including living quarters. Authorized alcohol beverage activities and storage of records may occur only on the premises described in this application. Attach a map or diagram and additional sheets if necessary.

Beer, wine and cocktails will be served from the counter or tables. There is a patio where drinks will also be served. Storage will be kept in the back office of the Establishment

20. Mailing Address (if different from premises address)
1004 E Fairy Chasm Rd

21. City
Bayside

22. State
WI

23. Zip Code
53217

Part B: Questions

1. Has the business (sole proprietorship, partnership, limited liability company, or corporation) been convicted of violating federal or state laws or local ordinances? Exclude traffic offenses unless related to alcohol beverages. ☐ Yes ☒ No

If yes, list the details of violation below. Attach additional sheets if necessary.

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Include Form AB-100 for each person listed below. Corporations and LLCs must appoint an agent by including Form AB-101.

Last Name	First Name	Title	Phone
Tejada	Pedro	owner	414-591-4602

Part D: Attestation

One of the following must sign and attest to this application:

• sole proprietor • one general partner of a partnership • one corporate officer • one member of an LLC

READ CAREFULLY BEFORE SIGNING: Under penalty of law, I have answered each of the above questions completely and truthfully. I agree that I am acting solely on behalf of the applicant business and not on behalf of any other individual or entity seeking the license. Further, I agree that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another individual or entity. I agree to operate this business according to the law, including but not limited to, purchasing alcohol beverages from state authorized wholesalers. I understand that lack of access to any portion of a licensed premises during inspection will be deemed a refusal to allow inspection. Such refusal is a misdemeanor and grounds for revocation of this license. I understand that any license issued contrary to Wis. Stat. Chapter 125 shall be void under penalty of state law. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than $1,000 if convicted.

Last Name	First Name	M.I.
Tejada	Pedro	E

Title	Email	Phone
owner	empanadasmke@gmail.com	414-591-4602

Signature	Date
Pedro Tejada	6/25/2025

Part E: For Clerk Use Only

Date Application Was Filed With Clerk	License Number	Date License Granted	Date License Issued

Signature of Clerk/Deputy Clerk	Date Provisional License Issued (if applicable)