



PEP-22-2

Public Entertainment Premises (Annual)

Status: Active

Date Created: Apr 27, 2023

Applicant

Maribel Alamillo
malamillo@cecentertainment.com
1707 Market Place Blvd., Suite 200
C/O Licensing
Irving, TX 75063
972-258-5481

Primary Location

2990 S 108 ST
West Allis, WI 53227

Application Information

New or Renewal

Renewal

Choose type period you are renewing the license.

Before May 16

Do you wish to apply for a provisional license for an additional \$25, so you do not have a lapse in your license and are unable to operate?

No

Business Information

Type of Organization

LLC

Legal Name (corporation, limited liability company, or partnership)

CEC Entertainment, LLC

DBA/Trade/Business Name

Chuck E Cheeses

Business Address (License Location)

2990 S 108th St

Business City

West Allis

Business State

WI

Business Zip Code

53227

Business Phone Number

972-258-5481

Business Email

malamillo@cecentertainment.com

Total number of members of the legal entity (INCLUDING THE AGENT) who are WISCONSIN residents

1

If Mailing Address Is Different

Business Mailing Address

C/O Licensing Dept., 1707 Market
Place Blvd. #200

City

Irving

State

TX

Zip Code

75063

Applicant / License Agent Information

Is this agent the same or do you have a new agent for this license period?

Same Agent

Applicant Last Name (include suffix if applicable)

Kuffer

Applicant First Name

Brandon

Applicant Middle Initial

J

Mailing Address

c/o Licensing, 1707 Market Place Blvd.
#200

City

Irving

State

Texas

Zip Code

75063

County

USA

E-Mail Address

malamillo@cecentertainment.com

Plan of Operation

Are you also applying for an alcohol beverage license at this time?

No

Do you wish to change your hours of operation?

No

What is the capacity (occupancy load) of the premises?

500+

Acceptance & Signature

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



2. I understand that after the license is issued, a change to the plan of operation, entertainment, or floor plan, will require approval from the Common Council.



3. I agree to comply with the plan of operation, entertainment, and floor plan approved as part of this application.



4. I understand that the fee is due at the time of application. Failure to submit the required fee will result in the application not being processed. You will receive an email with the a link to pay the fee after you submit this application.



Digital Signature (Individual, Partner, Manager of Limited Liability Company (LLC), Member, Officer of Corporation)

David A. Deck, Assistant Secretary

04/27/2023

List position (Individual, Partner, Member, President, etc.)

Assistant Secretary

Check for Outstanding Personal Property Taxes

Attachments

 843 West Allis WI - Brandon DL.pdf

Uploaded by Maribel Alamillo on Apr 27, 2023 at 12:52 pm

 officer DL.pdf

Uploaded by Maribel Alamillo on Apr 27, 2023 at 12:53 pm

 843 West Allis WI - Game Layout.pdf

Uploaded by Maribel Alamillo on Apr 27, 2023 at 12:53 pm



PEP-22-5

Public Entertainment Premises (Annual)

Status: Active

Date Created: May 12, 2023

Applicant

Cory Hundley
sk8ucork@aol.com
13033 Coco Plum Lane
Naples, FL 34119
4147048445

Primary Location

10928 W OKLAHOMA AVE
West Allis, WI 53227

Owner:

Cory Hundley
10928 West Oklahoma Avenue West
Allis, WI 53227

Application Information

New or Renewal

Renewal

Choose type period you are renewing the license.

Before May 16

Do you wish to apply for a provisional license for an additional \$25, so you do not have a lapse in your license and are unable to operate?

No

Business Information

Type of Organization

LLC

Legal Name (corporation, limited liability company, or partnership)

Wisconsin Skate University Inc

DBA/Trade/Business Name

Incrediroll Skate & Family Fun Center

Business Address (License Location)

10928 W Oklahoma Avenue

Business City

West Allis

Business State

Wisconsin

Business Zip Code

53227

Business Phone Number

4147048445

Business Email

sk8ucork@aol.com

Total number of members of the legal entity (INCLUDING THE AGENT) who are WISCONSIN residents

2

If Mailing Address Is Different

Business Mailing Address

13033 Coco Plum Lane

City

Naples

State

FL

Zip Code

34119

Applicant / License Agent Information

Is this agent the same or do you have a new agent for this license period?

Same Agent

Applicant Last Name (include suffix if applicable)

Hundley

Applicant First Name

Cory

Applicant Middle Initial

G

Mailing Address

13033 Coco Plum Lane

City

Naples

State

FL

Zip Code

34119

County

Collier

E-Mail Address

SK8UCORK@AOL.COM

Plan of Operation

Are you also applying for an alcohol beverage license at this time?

No

Do you wish to change your hours of operation?

No

What is the capacity (occupancy load) of the premises?

500+

Acceptance & Signature

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



2. I understand that after the license is issued, a change to the plan of operation, entertainment, or floor plan, will require approval from the Common Council.



3. I agree to comply with the plan of operation, entertainment, and floor plan approved as part of this application.



4. I understand that the fee is due at the time of application. Failure to submit the required fee will result in the application not being processed. You will receive an email with the a link to pay the fee after you submit this application.



Digital Signature (Individual, Partner, Manager of Limited Liability Company (LLC), Member, Officer of Corporation)

Cory Hundley/GG

05/12/2023

List position (Individual, Partner, Member, President, etc.)

President

Check for Outstanding Personal Property Taxes
