Form AB-200

Alcohol Beverage License Application

For Municipal Use C	nly
Municipality	
License Period	

License(s) Requested: (up to two boxes may	be checked)			Fees	•	
Class "A" Beer \$] Class "B" Beer \$	Lice	ense Fee	es	\$	
☐ "Class A" Liquor	Glass B" Liquor \$	Bac	kground	Check Fee	\$	
Class A" Liquor (cider only) \$	Reserve "Class B" Liquor \$	Pub	lication	Fee	\$	
Class C" Liquor (wine only) \$		Tot	al Fees		\$	
Part A: Premises/Business Information)					
Legal Business Name (individual name if sole prop						
2. Business Trade Name or DBA						
3. FEIN	4. Wisconsin S	Seller's Permit N	Number			
5. Entity Type (check one) Sole Proprietor Partnership	☐ Limited Liability Company	☐ Corpor	ation	☐ Nonpro	fit Organiz	ation
6. State of Organization	7. Date of Organization			DFI Registrati		
9. Premises Address						
10. City		11. 5	State	12, Zip Code		
13. County	14. Governing Municipality: City of:	Town	Village	15. Aldermani	c District	
16. Premises Phone	17. Premises Email		18. Web	site		
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.						
20. Mailing Address (if different from premises addre	ess)					
21. City		22.	State	23. Zip Code		
Part B: Questions			446334		11.30 11.30	
Has the business (sole proprietorship, partn violating federal or state laws or local ordinal If yes, list the details of violation below. Atta	ances? Exclude traffic offenses un	or corporation) less related to) been c o alcoho	onvicted of beverages.	Yes	☐ No
Law/Ordinance Violated	Location		Tr	al Date	····	
Penalty imposed		Was sentend	ce comp	leted?	Yes	☐ No
Law/Ordinance Violated	Location		Tr	ial Date		
Penalty Imposed		Was sentend	ce comp	leted?	Yes	☐ No

2.	2. Are charges for any offenses pending against the business? Exclude traffic offenses unless related to alcohol Yes No beverages.							
	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 individuals or entities a restricte If yes, provide the name of the	d investor with an	v intere	est in an alcohol be	everage pro	ducer or distribut	related tor?	Yes No
4.	Is the applicant business owned If yes, provide the name(s) and	by another busine FEIN(s) of the busi	ss entit	ty?ntity owners below.	Attach add	litional sheets as		Yes No
4a	. Name of Business Entity			4b. Business	Entity FEIN			
5.	Have the partners, agent, or sole this license period? Submit proo	e proprietor satisfie f of completion	d the re	esponsible beverag	ge server tr	aining requiremer	nt for	Yes No
6.	Is the applicant business indebte	ed to any wholesal	er beyo	and 15 days for bee	r or 30 day	s for liquor/wine?		Yes No
7.	Does the applicant business owe	e past due municip	al prop	erty taxes, assessr	ments, or of	ther fees?		Yes 🗌 No
Pi	art C: Individual Information	1		**********				
Qt	st the name, title, and phone number uestion 4: sole proprietor, all officers, anagers, and agent of a limited liabilit	directors, and agent	of a corp	poration or nonprofit c	itions in the a organization,	applicant business of a partners of a partners	or businesses Inership, and	listed in Part B, all members,
Inc	clude Form AB-100 for each person li	sted below. Corpora	tions an	d LLCs must appoint	an agent by	including Form AB-	101.	
La	st Name	First Name			Title		Phone	
							1	···
Pa	art D: Attestation					eu) een ti		
Or	ne of the following must sign and							
		general partner of	•	'	corporate of		e member of	
rig ac to rev	AD CAREFULLY BEFORE SIGNIN m acting solely on behalf of the appl hts and responsibilities conferred by cording to the law, including but not any portion of a licensed premises docation of this license. I understance derstand that I may be prosecuted for all provides materially false informations.	icant business and r the license(s), if gra limited to, purchasin uring inspection will I that any license iss r submitting false sta	not on be nted, wi g alcoho be deen ued con stements	ehalf of any other ind Ill not be assigned to ol beverages from stance and a refusal to allow atrary to Wis. Stat. Cl s and affidavits in cor	ividual or en another indi ate authorize vinspection. hapter 125 s nection with	tity seeking the lice vidual or entity. I a ed wholesalers. I ur Such refusal is a m hall be void under this application, an	nse. Further, gree to operated and that inderstand that is demeanor appendity of stand that any perion.	I agree that the e this business lack of access and grounds for te law. I further
La	st Name			First Name				M.I.
Tit	le		Email				Phone	
Sig	nature				Date			
Pa	art E: For Clerk Use Only							
	te Application Was Filed With Clerk	License Number			Date Lic	cense Granted	Date Licens	e Issued
Sig	gnature of Clerk/Deputy Clerk					Date Provisional I	icense Issued	(if applicable)

Form AB-200 Instructions

Alcohol Beverage License Application

Who needs an alcohol beverage license?

Any individual or entity that wants to sell alcohol beverages to consumers or allow consumption in a public place must get a retail alcohol beverage license.

Who issues alcohol beverage licenses?

Cities, villages, and towns issue alcohol beverage licenses after the governing body (city council, town or village board) grants the license.

Specific Instructions

License Period:

Annual licenses expire June 30 each year, except licenses issued by the City of Milwaukee. Annual licenses issued by
the City of Milwaukee also may be issued at any time throughout the year, but are valid for one year from the date of
issuance.

License Requested and License Fees:

- · Select the alcohol beverage license(s) you would like to apply for.
- Generally, you may apply for no more than two licenses for the same premises. Further, some license combinations are not acceptable, (e.g., "Class A" and a Class "B").
- For descriptions of each of the alcohol beverage licenses and their authorizations, see <u>Publication 302</u>, <u>Information for Wisconsin Alcohol Beverage and Tobacco Retailers</u>, and <u>Face Sheet 3101</u>, <u>Licenses for Retail Sale of Alcohol Beverages</u>.
- License costs are determined by the municipality within a range set by state law. Ask your clerk how much the license, background check, and publishing fees in that municipality cost.
- License fees for licenses issued for less than one year must be prorated according to the number of months or fraction
 of months remaining in the licensing period.

Part A: Premises/Business Information

- Box 1: Enter the legal business name or individual name if a sole proprietor.
- Box 2: Enter the trade name or "doing business as" name, if different than the name in box 1.
- Box 4: Seller's permits begin with the digits "456." For questions about obtaining a seller's permit, see Seller's Permit Common Questions.
- Box 5: Check one entity type to indicate how the business is legally organized.
- Box 6-7: Provide the state and date of organization of the legal entity.
- Box 8: Provide the Wisconsin Department of Financial Institutions Registration number. This number is assigned to the entity when it is registered with DFI. It can be located using the Department of Financial Institution's <u>Corporate Records Search</u>.
- Boxes 9-19: All requests for "premises" information are requests for the physical location within the municipality and contact information to reach the business during open hours.
- Box 19: Describe the premises in detail. Include outdoor spaces if your municipality allows it. Some municipalities have specific requirements for outdoor spaces as a part of the licensed premises. Call your municipal clerk to learn more. Attach a floor plan if possible.

Example: The premises is located at 1234 Main St., Realtown, WI 12345 and includes only the first-floor bar room, dining room, kitchen, north storage room, and south office of the 5,000 square foot building.

• Box 20-23 Provide the mailing address for the business, if different from the address in boxes 9-12.

Part B: Questions

 Questions 1 and 2: Disclose any civil or criminal violations of law and pending charges in any jurisdiction (federal, state, or local ordinance). Include detailed descriptions of any violations of law involving alcohol beverages. Attach additional sheets as necessary.

- Question 3: Wisconsin law generally prohibits alcohol beverage industry members from having an interest in another tier.
 The law provides some exceptions, with limitations, for restricted investors. If the applicant business, or any of its officers, directors, members, agent, employees, owners, or other related individuals has an interest in an alcohol beverage producer or distributor, list the restricted investors and describe the nature of their interest. A restricted investor with an allowable interest in another tier must complete AB-104, Restricted Investor Affidavit. Attach additional sheets as necessary.
- Question 4: If the applicant is owned by another business entity, provide the legal entity name(s) and FEIN(s) of all upstream entity ownership. Attach an organizational chart if possible. Include all persons involved in upstream entity ownership in the table in Part C and submit Form AB-100 for each of those persons with this application.
- Question 5: Wisconsin law requires all sole proprietors, partners, and agents of corporations and LLCs to successfully
 complete a Wisconsin approved responsible beverage server (RBS) training course within the past two years unless one of
 the following applies. Submit the associated document with this application.
 - · The applicant is renewing a license, or
 - Within the past two years:
 - a. The applicant held a manager's or operator's (bartender) license.
 - b. The applicant held or was the agent of a corporation or LLC that held any municipally issued alcohol beverage license in Wisconsin.

Note: To learn about your responsibility to complete the responsible beverage server requirement, please review <u>Publication 302</u>, *Information for Wisconsin Alcohol Beverage and Tobacco Retailers*.

- Question 6: A licensee may only buy liquor or beer for cash or on credit terms for a period not to exceed 15 days for beer and 30 days for liquor. A person may not be issued a license if they are indebted to a wholesaler in excess of these limits.
- Question 7: Renewal of licenses may be denied pursuant to a local ordinance if the licensee owes past due municipal taxes, assessments, or other fees.

Part C: Individual Information

• Provide basic information for all persons involved in the retail alcohol beverage business who are owners, officers, directors, managers, members, or the agent. Include ownership information as identified in Part B, Question 4.

Example: Titles could include Agent, President, Treasurer, Director, Chief Financial Officer, Member, Partner, etc.

- Sole-proprietors, partners in a partnership, and the agent of an LLC or corporation must reside in Wisconsin continuously for 90 days prior to application.
- Include an Alcohol Beverage Individual Questionnaire (Form AB-100) for each person listed in this section with the submission of this application.

Part D: Attestation

Read the attestation carefully, then sign and date.

Part E: For Clerk Use Only

- "Date license granted" means the date the municipal governing body approves the license to be issued.
- "Date license issued" means the date the municipal clerk issues the license certificate document.

Completion and Submission of AB-200

- · Submit the completed application to the clerk of the municipality in which you are applying for a license.
- License applications must be filed with the municipal clerk at least 15 days before they can be approved by the governing body, except licenses issued by municipalities within Milwaukee County. Governing bodies of municipalities within Milwaukee County establish their own period that applications must be filed with the municipal clerk.
- In addition to Form AB-200, include:
 - · Form AB-100, Alcohol Beverage Individual Questionnaire, for all individuals listed in part C
 - · Form AB-101 Alcohol Beverage Appointment of Agent, for corporation, nonprofit organizations, and LLC applicants
 - · License and publication fees as required by your municipality

- Responsible beverage server training course completion certificate or other acceptable replacement document described in Part B, Question 5
- · Proof the applicant holds a seller's permit, such as a copy of the seller's permit document

Note: See <u>Publication 206</u>, Sales Tax Exemptions for Nonprofit Organizations, for information on when a nonprofit organization may be exempt from holding a seller's permit.

· All other information and documents required by your municipality

NOTE: You are required by federal law to register as an Alcohol Dealer with the federal Alcohol and Tobacco Tax and Trade Bureau (TTB) before beginning business. Use <u>Form TTB F 5630.5d</u>, *Alcohol Dealer Registration*, and return the form to the address listed on the instructions.

Open Records

This application is an open record under Wisconsin law (sec. 19.35, Wis. Stats.) and may be provided to the public. If this license is issued by your municipality, your municipality must report the license to the Wisconsin Department of Revenue. The department publishes a list of alcohol beverage licensees reported by municipalities. The department will not disclose personal information such as residential addresses, home phone numbers, social security numbers, age, birth date, and place of birth of individuals, including partners, officers, directors, members, managers, and agents of corporations or LLCs.

Assistance

This form is designed by the Department of Revenue for use by municipal governments. If you require assistance with this form, consider reaching out to your municipal clerk for assistance with the following:

· Submission of this application and associated forms

· Availability and cost of certain licenses

If you have questions about alcohol beverage laws and regulations, you may contact the Department of Revenue using the contact information below.

Website: DOR Alcohol Beverage (wi.gov)
Write: DORAlcohol@wisconsin.gov

Call: (608) 264-4573

Resources Provided by the Department of Revenue

License frequently asked questions

Publication 302 DOR Alcohol Beverage Laws for Retailers Licenses

Publication 309 Retail Alcohol Beverage Licensing Guide for Municipalities

Fact Sheet 3101 Licenses for Retail Sale of Alcohol Beverages

Fact Sheet 3103 Licensed or Permitted Premises Description

Fact Sheet 3116 Reserve "Class B" Liquor Licenses

Fact Sheet 3118 "Class B" Liquor License Quotas



Form		
Α	B-1	00

Alcohol Beverage Individual Questionnaire

Date	

All individuals involved in the alcohol beverage business must complete this form, including:

sole proprietor

- all officers, directors, and agent of a corporation or nonprofit organization
 members and agent of a limited liability company
- all partners of a partnership

 Your alcohol beverage application or reper

Your alco	hol beverage applicat	ion or renev	wal is not complet	e until	all require	d Individual Question	nnaires are	e submitted.	
Part A:	Business Informa	tion		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
1. Legal E	Business Name (individua	l name if sol	e proprietor)			The state of the s			
2. Busine	ss Trade Name or DBA					, ,, ,			
3. Entity 7	Type (check one)								
☐ So	le Proprietor	Partnership	Limited	Liabilit	y Compan	y Corporation	on 🗌	Nonprofit O	rganization
Part B:	Individual Informa	ation							
1. Last Na	ame			2. Fir	st Name	,		······································	3. M.l.
4. Relatio	nship to Business (Title)		5. Email					6. Phone	
7. Home	Address					***************************************			
8. City					9. State	10. Zip Code		11. Date of B	irth
12. Drive	rs License/State ID Numt	oer				13. Drivers License/S	<u>l</u> State ID Stat	e of Issuance	
D (O.									
	Address History								
1. Do yo	ou currently reside in V	visconsin? .			• • • • • • • •	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •	····· 🔲 `	Yes No
If yes	to 1 above, how long	have you co	ontinuously lived in	n Wisco	onsin prior	to the date of applica	ation?	Years	Months
2. List in	chronological order a	ll of your ad	dresses within the	e last 5	years. Att	ach additional sheets	if necessa	ary.	<u> </u>
	Address 1			City			State	Zip Code	
Previous	Address 2		1 = 11111 = 11111 = 11111 = 11111 = 11111 = 1111 = 1111 = 1111 = 1111 =	City			State	Zip Code	
					•			Z.p 0000	
Previous	Address 3			City	City Sta			Zip Code	
Previous Address 4 City State Zip Code									
Previous Address 5 City State Zip C					Zip Code				
3. List al	I states and counties y	ou have liv	ed in as an adult.	Attach	additional	sheets if necessary.			
State	County	State	County		State	County	State	County	
State	County	State	County		State	County	State	County	

Continued →

Part D: Criminal History			
Have you ever been convicted of any offenses (excluding for violation of any federal, Wisconsin, or another state)			
If yes to question 1, please list details of each conviction	n below. Attach additio	nal sheets as needed.	
Law/Ordinance Violated	Location		Conviction Date
Penalty Imposed		Was sentence compl	eted? Yes No
Law/Ordinance Violated	Location	Market Annual Control of Control	Conviction Date
Penalty Imposed	,	Was sentence compl	eted? Yes No
Law/Ordinance Violated	Location		Conviction Date
Penalty Imposed		Was sentence compl	eted? Yes No
beverages) for violation of any federal, Wisconsin, or a ordinances?			
Part E: Attestation			10-mil 1 - Mil
READ CAREFULLY BEFORE SIGNING: Under pena truthfully. I certify that I am not prohibited from participal beverage industry as a restricted investor. I understand under penalty of state law. I further understand that I ma with this application, and that any person who knowing to forfeit not more than \$1,000 if convicted.	ating in this business o d that any license issu y be prosecuted for sul	lue to any involvemer ed contrary to Wis. S pmitting false stateme	nt in another tier of the alcohol tat. Chapter 125 shall be void nts and affidavits in connection
Signature		Date	

Form AB-100 Instructions

Alcohol Beverage Individual Questionnaire

Who must complete Form AB-100?

All persons involved in the applicant business who are sole proprietors, partners of a partnership, officers, directors, members, managers, or agents must complete and submit Form AB-100. These persons must be identified in Form AB-101, *Alcohol Beverage Appointment of Agent*, Form AB-200, *Alcohol Beverage License Application*.

Where do I submit Form AB-100?

If applying for a retail alcohol beverage license, submit this form with Form AB-200, Alcohol Beverage License Application to the clerk of the municipality in which the applicant business is located.

If applying for an alcohol beverage permit, submit this form as required by the permit application to the Division of Alcohol Beverages.

To update the agent for an alcohol beverage license or permit, submit this form with Form AB-101, *Alcohol Beverage Appointment of Agent* to the issuer of the authorization.

Specific Instructions

Date

· Date the form in the top right corner.

Part A: Business Information

- Box 1: Enter the legal business name, If sole proprietor, enter the individual's first and last name.
- Box 2: Enter the business trade name or "doing business as" name, if different than the name in box 1.
- Box 3: Check one entity type to indicate how the business is legally organized.

Note: This business information must match the information on any license application (Form AB-200) or existing license certificate.

Part B: Individual Information

- Provide all requested personal information.
- Box 4: Enter your title or describe your relationship to the business. Examples: President, Treasurer, Director, Chief Financial Officer, Member, Partner, Agent, etc.

Part C: Address History

 Question 2: List in chronological order all residential addresses within the last five years starting with your most recent address.

Part D: Criminal History

- Question 1: Disclose any civil or criminal violations of law in any jurisdiction (federal, state, or local ordinance), and include detailed descriptions of any violations of law involving alcohol beverages (OWI, disorderly conduct, etc.).
- Question 2: Disclose any pending charges against you in any jurisdiction and include detailed descriptions of any charges involving alcohol beverages.

Note: Subject to the Wisconsin Fair Employment Law (Ch. 111, Wis. Stats.), persons with convictions or pending charges may, if those offenses are sufficiently relevant, be prohibited from holding alcohol beverage license and permits under sec. 125.04(5)(a)(1) Wis. Stats. See the Department of Revenue's Permit Predetermination Common Questions for offenses that may prevent someone from holding a license.

Part E: Attestation

· Read the attestation carefully, then sign and date.

Assistance

This form is designed by the Department of Revenue for use by municipal governments. Reach out to your municipal clerk for assistance with the following:

- · Submission of the retail license application and supplemental forms
- · Availability and cost of certain licenses.

If you have questions about alcohol beverage laws and regulations, you may contact the Department of Revenue using the contact information below.

Website: DOR Alcohol Beverage (wi.gov)

Write: DORAlcohol@wisconsin.gov

Call: (608) 264-4573

Resources Provided by the Department of Revenue

License frequently asked questions

Publication 302 DOR Alcohol Beverage Laws for Retailers Licenses

Publication 309 Retail Alcohol Beverage Licensing Guide for Municipalities

Fact Sheet 3101 Licenses for Retail Sale of Alcohol Beverages

Fact Sheet 3103 Licensed or Permitted Premises Description

Fact Sheet 3116 Reserve "Class B" Liquor Licenses

Fact Sheet 3118 "Class B" Liquor License Quotas

Form AB-101

Alcohol Beverage Appointment of Agent

Date	

Agent Type (check one)		NAME OF STREET	The control of the co			. 1 () . 1
Original (no fee)	ccessor (\$10 fee for muni	icipal licens	sees only)			
Part A: Business Information				·. ·	-	
Legal Business Name (individual name if s	sole proprietor)					
2. Business Trade Name or DBA						
Z. Dashiess Hade Name of Davi						
3. Entity Type (check one)	nited Liability Company		Corporation	☐ Non	profit Organizati	ion
Alcohol Beverage Business Authorization Municipal Retail License	(check one) 5. State Permit	If successo	r agent, provide Sta	ite Permit or Mui	nicipal Retail Lice	nse Number
6. Describe the reason for appointing a succ	essor agent, if successor is	checked ab	ove.			
Part B: Agent Information						
Part B: Agent Information 1. Last Name	1.3	First Name				3. M.l.
1. Last Name	1.3					3. M.I.
	1.3				5. Phone	3. M.I.
1. Last Name	1.3					3. M.I.
Last Name Lemail Home Address	1.3	First Name			5. Phone	3. M.I.
Last Name Email	1.3		9. Zip Code			3. M.I.
Last Name Lemail Home Address	1.3	First Name	9. Zip Code	pense/State ID S	5. Phone 10. Age	3. M.I.
Last Name Lemail Home Address 7. City	1.3	First Name	9. Zip Code	cense/State ID S	5. Phone 10. Age	3. M.I.
Last Name Lemail Home Address 7. City	1.3	First Name	9. Zip Code	cense/State ID S	5. Phone 10. Age	3. M.I.
Last Name Lenail Home Address City Drivers License/State ID Number	1.3	First Name	9. Zip Code	cense/State ID S	5. Phone 10. Age tate of Issuance	
1. Last Name 4. Email 6. Home Address 7. City 11. Drivers License/State ID Number Part C: Agent Questions	2.	8. State	9. Zip Code		5. Phone 10. Age tate of Issuance	
Last Name Lenail Home Address City Drivers License/State ID Number	2.	8. State	9. Zip Code		5. Phone 10. Age tate of Issuance	
4. Email 6. Home Address 7. City 11. Drivers License/State ID Number Part C: Agent Questions 1. Have you satisfied the responsible	beverage server training Alcohol Beverage Indivi	8. State	9. Zip Code 12. Drivers Licent?	ee) or	5. Phone 10. Age tate of Issuance	
4. Email 6. Home Address 7. City 11. Drivers License/State ID Number Part C: Agent Questions 1. Have you satisfied the responsible I Submit proof of completion. 2. Have you completed Form AB-100, Form AB-300, Alcohol Beverage Personal Submit proof of Submit Proof	beverage server training Alcohol Beverage Indivi	8. State requirements of the state of the st	9. Zip Code 12. Drivers Licent? ent?	9 0) or	5. Phone 10. Age tate of Issuance	∕es
1. Last Name 4. Email 6. Home Address 7. City 11. Drivers License/State ID Number Part C: Agent Questions 1. Have you satisfied the responsible I Submit proof of completion. 2. Have you completed Form AB-100, Form AB-300, Alcohol Beverage Personal Submit Proof Personal Submit P	beverage server training Alcohol Beverage Indivi	8. State requirements of the state of the st	9. Zip Code 12. Drivers Licent? ent?	9 0) or	5. Phone 10. Age tate of Issuance	/es □ No

Part D: Business Attestation			
READ CAREFULLY BEFORE SIGNING: I, the corporation, nonprofit organization, or limited beverage activities on such premises. I certion behalf of the entity. If I am appointing a sulunderstand that I may be prosecuted for suany person who knowingly provides materially if convicted.	d liability company with full fy that I am authorized by t accessor agent, I rescind al bmitting false statements a	authority and control of the prother above-named entity to auth Il previous agent appointments and affidavits in connection with	remises and of all alcohol norize this individual to act for this premises. Further, on this application, and that
Last Name	First Name		M.i.
Title	Email		Phone
Signature		Date	J
Part E: Agent Attestation			
READ CAREFULLY BEFORE SIGNING: I, the nonprofit organization, or limited liability come on the premises for the above-named busin and affidavits in connection with this applicate application may be required to forfeit not more	pany and assume full respo ess. I further understand th ion, and that any person wh	onsibility for the conduct of all a hat I may be prosecuted for su	alcohol beverage activities ubmitting false statements
Last Name	First Name		M.I.
		`	
Signature		Date	

Form AB-101 Instructions

Alcohol Beverage Appointment of Agent

Who must complete Form AB-101?

State law requires corporations and limited liability companies (LLCs) to appoint an agent that takes responsibility for the licensed or permitted premises.

Use this form to appoint an agent for a new premises or to appoint a successor agent when there is a change before the license or permit is up for renewal.

Where do I submit Form AB-101?

Submit Form AB-101 to the appropriate issuing authority, either the clerk of the municipality in which the business or organization is located, or the Division of Alcohol Beverages.

Form AB-101 may be submitted with a license or permit application or at any time to indicate there is a change in agent prior to the license or permit renewal period.

Specific Instructions

Date:

· Date the form in the top right corner.

Agent Type:

- Select original appointment if you are applying for your license or permit for the first time or are renewing a license or permit.
- · Select successor agent if you are reporting a change of agent during the licensing or permitting period.

Part A: Business Information

- Box 1: Enter the legal business name. If a sole-proprietorship, enter the individual's first and last name.
- · Box 2: Enter the trade name or "doing business as", if different than the name in box 1.
- · Box 3: Check one entity type to indicate how the business is legally organized.

Note: This business information must match the information on the license or permit application.

- Box 4: Select which alcohol beverage authorization you hold or are applying for.
- Box 5: For appointment of a successor agent, enter your state permit number (15-digit Wisconsin Tax ID number) or municipal retail license number (if applicable) for which you are appointing a successor agent. If you do not have a municipal retail license number, provide any applicable identifier (e.g., store number or location).
- · Box 6: For appointment of a successor agent, describe the reason for the change in agent.

Part B: Agent Information

Provide all requested personal information.

Part C: Agent Questions

- Question 1: Wisconsin law requires all agents of corporations and LLCs to successfully complete a Wisconsin approved responsible beverage server (RBS) training course within the past two years unless:
 - The applicant is renewing a municipal alcohol beverage retail license, or
 - Within the past two years:
 - a. The applicant held a manager's or operator's (bartender) license.
 - b. The applicant held or was the agent of a corporation or LLC that held any municipally issued retail alcohol beverage license in Wisconsin.

- Some agents for state permittees are exempt from responsible beverage server course requirements. The following
 permittees are exempt from RBS course requirements: Alcohol Beverage Warehouse, Industrial Fermented Malt
 Beverages, Wholesalers, Manufacturers, Rectifiers, Direct Wine Shippers, Wholesale Alcohol, Medicinal Alcohol,
 Industrial Alcohol, and Industrial Wine.
 - If you are applying to be the agent of one of these exempt permittees, answer "yes" to Question 1.
- To learn about your responsibility to complete the responsible beverage server requirement, review <u>Publication 302</u>, Information for Wisconsin Alcohol Beverage and Tobacco Retailers.
- Question 2: Appointed agents for a retail licensee must complete Form AB-100, Alcohol Beverage Individual
 Questionnaire, and submit it to the municipal clerk in which the licensed business is located. Appointed agents for a
 permittee must complete and submit Form AB-300, Alcohol Beverage Personal Questionnaire, and submit it to the
 Division of Alcohol Beverages.
- Question 3: Appointed agents must be Wisconsin residents for at least 90 continuous days prior to the date of application, except for direct wine shipper permittees.

Part D: Business Attestation

 An authorized representative should sign, date, and provide requested personal information on behalf of the business.

Part E: Agent Attestation

• The agent being appointed should read the attestation carefully, then sign and date.

Assistance

If you have questions about alcohol beverage laws and regulations, you may contact the Department of Revenue using the contact information below.

Website: <u>DOR Alcohol Beverage (wi.gov)</u>
Write: <u>DORAlcohol@wisconsin.gov</u>

Call: (608) 264-4573