

Municipality

License(s) Requested	Fees	
<input type="checkbox"/> Temporary "Class B" Wine <input type="checkbox"/> Temporary Class "B" Beer	License Fees	\$
	Background Check	\$
	Total Fees	\$

Part A: Organization Information		
1. Organization Name		
2. Organization Permanent Address		
3. City	4. State	5. Zip Code
6. Mailing Address (if different from permanent address)		
7. FEIN	8. Date of Organization/Incorporation	9. State of Organization/Incorporation
10. Phone	11. Email	
12. Organization type (<i>check one</i>) <input type="checkbox"/> Bona Fide Club <input type="checkbox"/> Church <input type="checkbox"/> Fair Association/Agricultural Society <input type="checkbox"/> Veteran's Organization <input type="checkbox"/> Lodge/Society <input type="checkbox"/> Chamber of Commerce or similar Civic or Trade Organization under ch. 181, Wis. Stats.		
13. Is this organization required to hold a Wisconsin Seller's permit? <input type="checkbox"/> Yes <input type="checkbox"/> No		
14. Wisconsin Seller's Permit Number (if applicable)		

Part B: Individual Information			
List the name, title, and phone number for all officers, directors, and agent of the organization. Include an Individual Questionnaire (Form AB-100) for each person listed below. Attach additional sheets if necessary. Corporations must also include Alcohol Beverage Appointment of Agent (Form AB-101).			
Last Name	First Name	Title	Phone

Continued →

Part C: Event Information			
1. Name of Event (if applicable)			
2. Dates of Operation		3. Hours of Operation	
4. Premises Address			
5. City		6. State	7. Zip Code
8. County	9. Governing Municipality <input type="checkbox"/> City <input type="checkbox"/> Town <input type="checkbox"/> Village		10. Aldermanic District
		of: _____	
11. Organizer of Event (if not the named applicant)		12. Email and/or Phone Number for Organizer of Event	
13. Organizer Website		14. Event Website	
15. Premises Description - Describe the building or buildings and any outside areas where alcohol beverages and records are 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.			

Part D: Attestation			
Who must sign this application?			
<ul style="list-style-type: none"> • one officer or director of the nonprofit organization 			
<p>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 organization 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 according to the law, including but not limited to, purchasing alcohol beverages from Wisconsin-permitted 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.</p>			
Last Name		First Name	M.I.
Title	Email		Phone
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	

Form AB-220 Instructions

Temporary 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 an alcohol beverage license (sec. [125.09\(1\)](#), Wis. Stats.).

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.

Who may receive a temporary alcohol beverage license?

Only the following nonprofit organizations may receive a temporary alcohol beverage license (sec. [125.26\(6\)](#), Wis. Stats.):

- bona fide clubs, whether incorporated or not, which own, lease, or occupy a building or portion thereof used exclusively for club purposes, which is operated solely for a recreational, fraternal, social, patriotic, political, benevolent or athletic purpose but not for pecuniary gain and which only sells alcohol beverages incidental to its operation
- local chambers of commerce organized under ch. 181, Wis. Stats. or a similar civic or trade organization organized under ch. 181, Wis. Stats., to promote economic growth and opportunity within a local geographical area
- state, county, or local fair associations or agricultural societies
- churches, lodges or societies that have been in existence for at least 6 months before the date of application
- posts of veterans organizations

What types of events are temporary alcohol beverage licenses used for?

Picnics and similar gatherings of limited duration are the types of events that may qualify to use a temporary alcohol beverage license (sec. [125.26\(6\)](#), Wis. Stats.). Some examples of events where a temporary alcohol beverage license may be required include fundraisers, meetings of the post, picnics open to the public, fair booths, wine or beer walks, festivals, and more.

What activities are authorized under a temporary alcohol beverage license?

An organization that holds a temporary alcohol beverage license may sell, serve, and allow consumption of wine and/or beer at an event hosted by the organization on the premises approved by the municipal governing body. Organizations may host gatherings requiring an entrance fee to the event that includes service of alcohol beverages or may charge for the beer or wine by the glass. A chamber of commerce or similar trade organization may hold up to 20 temporary alcohol beverage licenses for purposes of organizing a wine or beer walk. Temporary alcohol beverage licenses do not authorize consumption or sale of distilled spirits. See [Publication 309](#), *Retail Alcohol Beverage Licensing Guide for Municipalities*, and [Publication 302](#), *Information for Wisconsin Alcohol Beverage and Tobacco Retailers*, for more details.

Specific Instructions

Municipality

- In the upper right hand corner, list the name of the city, town, or village for which you are applying for a temporary alcohol beverage license.

License(s) Requested and License Fees:

- Select the alcohol beverage license(s) you would like to apply for.
- The license fee is \$10 regardless of whether you are applying for one or both types of temporary alcohol beverage licenses. Your municipality may charge background check fees to determine your organization's fitness to hold the license.

Part A: Organization Information

- Enter all contact information for the organization. Use a general phone and email address where a municipal clerk can reach your organization during business hours.

- Box 7: Enter the [federal employer identification number](#) for the organization. Every organization must have an employer identification number (EIN), even if it will not have employees. The EIN is a unique number that identifies the organization to the Internal Revenue Service.
- Box 11: Check one box to describe your organization's purpose or function. If you cannot check one of these boxes, you may not qualify for a temporary alcohol beverage retail license.
- Box 12: Check yes or no to indicate if your organization is required to hold a Wisconsin seller's permit for sales and use tax purposes. Some nonprofit organizations are not required to hold a seller's permit if they qualify for the occasional sales exemption. See Part 4 of [Publication 206, Sales Tax Exemptions for Nonprofit Organizations](#), for the standards that must be met to qualify for the occasional sales exemption.
- Box 13: If Box 12 is yes, enter your seller's permit number. Seller's permits begin with the digits "456." For questions about obtaining a seller's permit, see [Seller's Permit Common Questions](#).

Part B: Individual Information

- Provide the names, titles and phone numbers for officers, directors, and the agent of the organization. Titles of persons requiring disclosure include, but are not limited to: President, Treasurer, Executive Director, Board Member. Obtain and submit Form [AB-100, Alcohol Beverage Individual Questionnaire](#), with your application for each person listed.
- Corporations must appoint an agent for this application. List the name of the agent in this section and include Form [AB-101, Alcohol Beverage Appointment of Agent](#), with this application. The agent of your organization must reside in Wisconsin.

Part C: Event Information

- Box 1: Insert the event name. If this event will be advertised to the public or membership, use the name included on that information.
- Box 2: Insert the dates of the event. Attach a listing of event dates if more space is needed.
- Box 3: Insert the hours of operation for the event dates.
- Boxes 4-10: Enter the address for the event premises. Also enter the county, local jurisdiction, and aldermanic district in which the premises is located.
- Box 11: Insert the name of the event organizer if the license applicant is not the organizer of the event.
- Boxes 12-14: Provide contact information for the event organizer, the organizer's website, and the event website, if applicable.
- Box 15: Describe the premises in detail. Attach a floor plan, festival layout, map, or diagram 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, and south office of the 5,000 square foot building.

Example: The premises is the 1,000 square foot tent within the southwest corner of the parking lot located at XYZ Church at 3456 Main St., Realtown, WI, 12345. All sales and storage of alcohol beverages and records will occur within the 1,000 square foot tent in the southwest corner of the parking lot.

Example: The premises is located at PDQ Park (7890 Main St., Realtown, WI, 12345). A 5,000 square foot tent will be constructed in the northeast corner of the park bordering the tree line and northern fence. All alcohol beverage sales and consumption will occur at this tent. Premises includes the adjacent north park office and the space between the tent and the office. Beverages and records will be securely stored in the north park office for the duration of the event.

Part D: Attestation

- One officer or director of the organization must sign the application.
- Read the attestation carefully, then sign and date.

Part E: For Clerk Use Only

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

Completion and Submission of AB-220

- Submit the completed application to the clerk of the municipality in which you are applying for a license.
- Submit a separate application for each temporary event. One application may be used to apply for a temporary event that occurs multiple times at the same premises.
- 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.
- Include the following forms with your license application:
 - Form [AB-100](#), *Alcohol Beverage Individual Questionnaire* for all officers, directors, and agent of the nonprofit organization
 - Form [AB-101](#), *Alcohol Beverage Appointment of Agent*
 - Payment for license and background check fees, as required by your municipality
 - Any other information and documents required by your municipality

Assistance

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

- Submission of this application and associated forms
- Availability of certain licenses in a community

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 \(wi.gov\)](http://www.wisconsin.gov/dor/alcohol-beverage)

Write: DORAlcohol@wisconsin.gov

Call: (608) 264-4573

Resources Provided by the Department of Revenue

[License common questions](#)

[Publication 302](#), *Information for Wisconsin Alcohol Beverage and Tobacco Retailers*

[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*

Agent Type (check one)

- Original (no fee) Successor (\$10 fee for municipal licensees only)

Part A: Business Information

1. Legal Business Name (individual name if sole proprietor)	
2. Business Trade Name or DBA	
3. Entity Type (check one) <input type="checkbox"/> Limited Liability Company <input type="checkbox"/> Corporation <input type="checkbox"/> Nonprofit Organization	
4. Alcohol Beverage Business Authorization (check one) <input type="checkbox"/> Municipal Retail License <input type="checkbox"/> State Permit	5. If successor agent, provide State Permit or Municipal Retail License Number
6. Describe the reason for appointing a successor agent, if successor is checked above.	

Part B: Agent Information

1. Last Name		2. First Name		3. M.I.	
4. Email				5. Phone	
6. Home Address					
7. City		8. State	9. Zip Code		10. Age
11. Drivers License/State ID Number			12. Drivers License/State ID State of Issuance		

Part C: Agent Questions

1. Have you satisfied the responsible beverage server training requirement? <input type="checkbox"/> Yes <input type="checkbox"/> No Submit proof of completion.
2. Have you completed Form AB-100, <i>Alcohol Beverage Individual Questionnaire</i> ? <input type="checkbox"/> Yes <input type="checkbox"/> No Submit a completed Form AB-100 with this form.
3. Have you been a Wisconsin resident for at least 90 continuous days? <input type="checkbox"/> Yes <input type="checkbox"/> No See instructions for exceptions.

Continued →

Part D: Business Attestation

READ CAREFULLY BEFORE SIGNING: I, the **Undersigned**, authorize the above-named individual to act for the above-named corporation, nonprofit organization, or limited liability company with full authority and control of the premises and of all alcohol beverage activities on such premises. I certify that I am authorized by the above-named entity to authorize this individual to act on behalf of the entity. If I am appointing a successor agent, I rescind all previous agent appointments for this premises. Further, I 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.
Title	Email		Phone	
Signature			Date	

Part E: Agent Attestation

READ CAREFULLY BEFORE SIGNING: I, the **Agent**, hereby accept this appointment as agent for the above-named corporation, nonprofit organization, or limited liability company and assume full responsibility for the conduct of all alcohol beverage activities on the premises for the above-named business. 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.
Signature			Date	

Form AB-101 Instructions

Alcohol Beverage Appointment of Agent

Who must complete Form AB-101?

State law requires corporations, limited liability companies (LLCs), and nonprofit organizations 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 [Publication 302, Information for Wisconsin Alcohol Beverage and Tobacco Retailers](#).
- Question 2: Appointed agents must submit Form AB-100, *Alcohol Beverage Individual Questionnaire*, in addition to this form.
- 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: DOR Alcohol Beverage (wi.gov)

Write: DORAlcohol@wisconsin.gov

Call: (608) 264-4573

Alcohol Beverage Individual Questionnaire

Date

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

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

Your alcohol beverage application or renewal is not complete until all required Individual Questionnaires are submitted.

Part A: Business Information	
1. Legal Business Name (individual name if sole proprietor)	
2. Business Trade Name or DBA	
3. Entity Type (<i>check one</i>)	
<input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Partnership <input type="checkbox"/> Limited Liability Company <input type="checkbox"/> Corporation <input type="checkbox"/> Nonprofit Organization	

Part B: Individual Information			
1. Last Name	2. First Name	3. M.I.	
4. Relationship to Business (Title)	5. Email	6. Phone	
7. Home Address			
8. City	9. State	10. Zip Code	11. Date of Birth
12. Drivers License/State ID Number		13. Drivers License/State ID State of Issuance	

Part C: Address History					
1. Do you currently reside in Wisconsin? <input type="checkbox"/> Yes <input type="checkbox"/> No					
If yes to 1 above, how long have you continuously lived in Wisconsin prior to the date of application?			<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 2px;">Years</td> <td style="width: 50%; padding: 2px;">Months</td> </tr> </table>	Years	Months
Years	Months				
2. List in chronological order all of your addresses within the last 5 years. Attach additional sheets if necessary.					
Previous Address 1	City	State	Zip Code		
Previous Address 2	City	State	Zip Code		
Previous Address 3	City	State	Zip Code		
Previous Address 4	City	State	Zip Code		
Previous Address 5	City	State	Zip Code		
3. List all states and counties you have lived in as an adult. Attach additional sheets if necessary.					
State	County	State	County		
State	County	State	County		
State	County	State	County		

Continued →

Part D: Criminal History

1. Have you ever been convicted of any offenses (excluding traffic offenses unless related to alcohol beverages) for violation of any federal, Wisconsin, or another state's laws or of any county or municipal ordinances? Yes No
 If yes to question 1, please list details of each conviction below. Attach additional sheets as needed.

Law/Ordinance Violated	Location	Conviction Date
Penalty Imposed		Was sentence completed? <input type="checkbox"/> Yes <input type="checkbox"/> No
Law/Ordinance Violated	Location	Conviction Date
Penalty Imposed		Was sentence completed? <input type="checkbox"/> Yes <input type="checkbox"/> No
Law/Ordinance Violated	Location	Conviction Date
Penalty Imposed		Was sentence completed? <input type="checkbox"/> Yes <input type="checkbox"/> No

2. Are charges for any offenses currently pending against you (excluding traffic offenses unless related to alcohol beverages) for violation of any federal, Wisconsin, or another state's laws or any county or municipal ordinances? Yes No
 If yes to question 2, describe nature and status of pending charges using the space below. Attach additional sheets as needed.

Part E: Attestation

READ CAREFULLY BEFORE SIGNING: Under penalty of law, I have answered each of the above questions completely and truthfully. I certify that I am not prohibited from participating in this business due to any involvement in another tier of the alcohol beverage industry as a restricted investor. 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.

Signature	Date
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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 \(wi.gov\)](http://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*