

Renewal Alcohol Beverage License Application

FOR CLERKS ONLY	
Municipality	
License Period	

License(s) Requested

- | | |
|--|--|
| <input type="checkbox"/> Class "A" Beer \$ _____ | <input type="checkbox"/> "Class A" Liquor \$ _____ |
| <input type="checkbox"/> Class "B" Beer \$ _____ | <input type="checkbox"/> "Class B" Liquor \$ _____ |
| <input type="checkbox"/> "Class C" Wine \$ _____ | <input type="checkbox"/> "Class A" Liquor (Cider Only) \$ <u> 0 </u> |
| <input type="checkbox"/> Reserve "Class B" Liquor \$ _____ | <input type="checkbox"/> "Class B" (Wine Only) Winery \$ _____ |

License Fees	\$
Publication Fee	\$
Background Check	\$
Total Fees	\$

Part A: Premises/Business Information

1. Legal Business Name (registered entity name or individual's name if sole proprietorship)		
2. Trade Name or DBA		
3. Premises Address		
4. County	5. Municipality	6. Aldermanic District
7. Mailing Address (if different from premises address)		
8. FEIN	9. Wisconsin Seller's Permit Number	
10. Premises Phone	11. Premises Email	
12. 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		
13. Describe your premises in detail. Attach a floor plan if possible. If you do not want to change your premises description, use the same language previously approved by your municipality, which may be found on your most recent license certificate. Requested changes to the premises description must be approved by the municipal governing body.		

Part B: Questions

1. Have you added or removed any partners, officers, directors, or managing members since your most recent application was submitted? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes to question 1, please list the names, titles, and phone numbers of any changed persons, and attach Form AT-103 for all NEW members.		
First Name	Last Name	
Phone	Title	<input type="checkbox"/> Add <input type="checkbox"/> Remove
First Name	Last Name	
Phone	Title	<input type="checkbox"/> Add <input type="checkbox"/> Remove
First Name	Last Name	
Phone	Title	<input type="checkbox"/> Add <input type="checkbox"/> Remove

Part B: Questions Cont.

2. Has any partner, officer, director, managing member, or agent had any changes to their most recently filed Form AT-103 including updated contact information, changes in address, criminal history, interest restrictions, etc? If yes, attach a new Form AT-103 reflecting the updated information Yes No
3. Does the licensee or any of its officers, directors, managing members, or agent hold any direct or indirect interest in any other alcohol beverage wholesaler or producer (e.g., brewer, brewpub, winery, distillery)? If yes, please explain using the space below. Attach additional sheets if necessary Yes No
4. Have the partners, agent, or sole proprietor, satisfied the responsible beverage server training requirement for this license period? Yes No
5. Is the person or business identified in Part A, the genuine seller of alcohol beverages and operator of the business (e.g., reporter of profit/loss from the sale of alcohol beverages on their income tax return, holder of the seller's permit for the business location, payer of employees, taxes, utilities, and other expenses for the business, etc.)? Yes No
6. Is the business indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? Yes No
7. Does the applicant owe municipal property taxes, assessments, or other fees? Yes No

Part C: For Corporate/LLC Applicants Only:

1. Has your designated agent changed since your most recent application? If yes, list the new agent name below and attach Form AT-103 for that person and a Form AT-104 Yes No
- | | | |
|--------------------|------------------|--------------------|
| 2. Agent Last Name | Agent First Name | Agent Phone Number |
|--------------------|------------------|--------------------|

Part D: Attestation

Who must sign this application?

- sole proprietor
- one general partner of a partnership
- one corporate officer
- one managing 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.

Signature		Date
Name (Last, First, M.I.)		
Title	Email	Phone

Part E: For Clerk Use Only

Date application was filed with clerk	Date reported to governing body	Date provisional license issued (if applicable)
Date license granted	License number	Date license issued
Signature of Clerk/Deputy Clerk		

Form AT-115 Instructions

Alcohol Beverage License Application Renewal

When should I use AT-115?

- You hold an expiring alcohol beverage retail license and would like to renew the license.
- If your legal business entity has changed or you are moving your premises to a new location outside your current municipality, use Form AT-106, *Original Alcohol Beverage License Application*.
- If you are applying for a new alcohol beverage license, you must use Form AT-106.

Who issues alcohol beverage licenses?

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

How to fill out AT-115?

License Period:

- Annual licenses start July 1 and expire June 30 the following year except licenses issued by the City of Milwaukee. Annual licenses issued by the City of Milwaukee may be issued at any time throughout the year and are valid for one year from the date of issuance.

Licenses Requested and License Fees:

- Select all 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 [Publication 302, Information for Wisconsin Alcohol Beverage and Tobacco Retailers](#).
- License costs are determined by the municipality within a range set by state law. Ask your clerk how much the license, background check, and publication fees in that municipality cost.
- License fees for licenses issued for less than 1 year must be prorated according to the number of months or fraction of months remaining in the licensing year.

Part A: Premises/Business Information

- Enter the legal business name in box 1.
- Enter the trade name or “doing business as” name in box 2, if different than the name in box 1.
- All requests for “premises” information are requests for the physical location within the municipality and contact information to reach the business during open hours.
- Check one entity type in box 12 to indicate how the business is legally organized.
- Box 9: For questions about obtaining a seller’s permit, see [Sellers Permit Common Questions](#).
- Box 13: Describe your premises in detail. Attach a floor plan if possible. If you do not want to change your premises description, use the same language previously approved by your municipality, which may be found on your most recent license certificate. Requested changes to the premises description must be approved by the municipal governing body.

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.

Part B: Questions

- Question 1: Answer yes if you have added a new partner, officer, director, managing member, or if someone left your business’ organization.

Provide basic information for all NEW persons involved in the applicant business, including:

- Partners of a partnership
- Officers, directors, and agent of a corporation or nonprofit organization
- Managing members and agent of a limited liability company

Example titles: Director, Chief Financial Officer, Member, Partner, etc.

- Include a Supplemental Questionnaire (Form AT-103) for each person added in this section with the submission of this application.

NOTE: If your business entity changed (e.g., from an LLC to a Corporation) you may not use this form. Please apply for your license with Form AT-106.

- Question 2: Answer yes to this question if any of your continuing partners, officers, directors, managing members, or agent have had changes in any information that's reported on AT-103 including:
 - Contact information
 - Address
 - Interest restrictions
 - Criminal history

Include an updated Form AT-103 for any persons that require reporting of changes.

- Question 3: Wisconsin law generally prohibits businesses and individuals from having an interest in more than one tier of the alcohol beverage industry (production, wholesale, and retail). Some examples of prohibited interest restrictions are described in Administrative Code ([Tax 8.87](#), Wis. Adm. Code).
- Question 6: A licensee may only buy liquor or beer for cash or on credit terms for a period not to exceed:
 - Beer - 15 days
 - Liquor - 30 days

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 municipal taxes, assessments, or other fees.

Part C: For Corporate/LLC Applicants Only

- Complete this section if you checked corporation or a limited liability company in box 12, Part A.
- Question 1: Answer yes to this question if your business has a new appointed agent. Include an AT-103 for that person and an AT-104 with 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 approved the license to be issued.
- “Date license issued” means the date the municipal clerk issued the license certificate document.

Completion and Submission of AT-115

- 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 AT-115, include:
 - Form AT-103 for the sole-proprietor; all officers, directors, and agent of a corporation or nonprofit organization; all members/partners of a partnership; all managing members and agent of a limited liability company.
 - Form AT-104 for corporation 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 4.
 - Proof the applicant holds a seller's permit, such as a copy of the seller's permit document
Note see [Publication 206](#), *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 [Form TTB F 5630.5d Alcohol Dealer Registration](#) and return the form to the address listed on the instructions.

Open Records

This application is an open record under state 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 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 local clerk for assistance with the following:

- Submission of this application and associated forms
- Availability and cost 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://DORAlcoholBeverage.wi.gov)

Write: DORAlcoholTobaccoEnforcement@wisconsin.gov

Call: (608) 264-4573

Resources Provided by the Department of Revenue

[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*

Alcohol Beverage License Application Supplemental Questionnaire

Date

This form must be submitted to the municipal clerk, and be accompanied by one or more of the following forms: AT-104, AT-106, AT-108, AT-115, or AT-200. One Form AT-103 must be completed by each person involved in the applicant business or parent company including:

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

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

Part A: Premises/Business Information				
1. Registered Entity Name (or individual name if sole proprietor)				
2. 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. Name (Last, First, M.I.)				
2. Relationship to Registered Entity (Title)		3. Email		4. Phone
5. Home Address				
6. City		7. State	8. Zip Code	9. Date of Birth
10. Drivers License/State ID Number			11. Drivers License/State ID State of Issuance	

Part C: Address History	
List in chronological order your last two residence addresses within the last 5 years.	
Previous Address 1	
Previous City, State, Zip	Dates (MM/YYYY - MM/YYYY)
Previous Address 2	
Previous City, State, Zip	Dates (MM/YYYY - MM/YYYY)

Part D: Employment History	
List in chronological order your last two employers within the last 5 years.	
Employer's Name	
Employer's Address	Dates Employed (MM/YYYY - MM/YYYY)
Employer's Name	
Employer's Address	Dates Employed (MM/YYYY - MM/YYYY)

Part E: Criminal History

1. Have you ever been convicted of any offenses (other than traffic offenses unrelated 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	Trial Date
------------------------	------------

Penalty Imposed	Was sentence completed? <input type="checkbox"/> Yes <input type="checkbox"/> No
-----------------	--

Law/Ordinance Violated	Trial Date
------------------------	------------

Penalty Imposed	Was sentence completed? <input type="checkbox"/> Yes <input type="checkbox"/> No
-----------------	--

2. Are charges for any offenses currently pending against you (other than traffic offenses unrelated 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 F: Questions

1. Have you lived in any state other than Wisconsin as an adult? If yes, please list them in the space below. If no, continue to question 2. Yes No

2. How long have you continuously lived in Wisconsin prior to the date of application?	Years	Months
--	-------	--------

3. Do you hold a direct or indirect interest in any alcohol beverage wholesaler or producer (e.g. brewer, brewpub, winery, distillery)? If yes, please explain using the space below. Attach additional sheets as needed. Yes No

Part G: Attestation

READ CAREFULLY BEFORE SIGNING: 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 AT-103 Instructions

Alcohol Beverage License Application/Supplemental Questionnaire

Who must complete Form AT-103?

All persons involved in the applicant business who are partners of a partnership, officers, directors, managing members, sole proprietors, or agents. These persons must be identified in the schedule for appointment of agent (Form AT-104), original license application (Form AT-106), retail license transfer (Form AT-108) the renewal license application (Form AT-115), or the appointment of successor agent (Form AT-200).

Where do I submit Form AT-103?

Submit this form with Form AT-104, AT-106, AT-108, AT-115, or AT-200 to the clerk of the municipality in which the applicant business is located.

Specific Instructions

Date

- Date the form in the top left corner.

Part A: Premises/Business Information

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

Note: This business information must match the information on the license application (Form AT-106 or AT-115).

Part B: Individual Information

- Provide all requested personal information.
- For box 2: 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

- List your two most recent addresses within the past five years.

Part D: Employment History

- List your two most recent employers/business ventures within the past five years.

Part E: 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 a retail alcohol beverage license 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 F: Questions

- Question 4: Wisconsin law generally prohibits businesses and individuals from having an interest in more than one tier of the alcohol beverage industry (production, wholesale, and retail). Disclose whether you hold a direct or indirect interest in any alcohol beverage wholesaler or producer (e.g., brewer, brewpub, winery, distillery).
- Examples of prohibited interest restrictions are described in Administrative Code ([Tax 8.87](#), Wis. Adm. Code).

Note: If you hold a direct or indirect interest in an alcohol beverage wholesaler or producer, you may not be eligible to hold an alcohol beverage license. Before submitting this form, reach out to your municipal clerk or the Department of Revenue.

Part G: 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: DORAlcoholTobaccoEnforcement@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*

Schedule for Appointment of Agent by Corporation / Nonprofit Organization or Limited Liability Company

Submit to municipal clerk.

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent. The following questions must be answered by the agent. The appointment must be signed by an officer of the corporation/organization or one member/manager of a limited liability company and the recommendation made by the proper local official.

To the governing body of: Town
 Village of _____ County of _____
 City

The undersigned duly authorized officer/member/manager of _____
(Registered Name of Corporation / Organization or Limited Liability Company)

a corporation/organization or limited liability company making application for an alcohol beverage license for a premises known as _____
(Trade Name)

located at _____

appoints _____
(Name of Appointed Agent)

_____ *(Home Address of Appointed Agent)*

to act for the corporation/organization/limited liability company with full authority and control of the premises and of all business relative to alcohol beverages conducted therein. Is applicant agent presently acting in that capacity or requesting approval for any corporation/organization/limited liability company having or applying for a beer and/or liquor license for any other location in Wisconsin?

Yes No If so, indicate the corporate name(s)/limited liability company(ies) and municipality(ies).

Is applicant agent subject to completion of the responsible beverage server training course? Yes No

How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin? _____

Place of residence last year _____

For: _____
(Name of Corporation / Organization / Limited Liability Company)

By: _____
(Signature of Officer / Member / Manager)

Any person who knowingly provides materially false information in an application for a license may be required to forfeit not more than \$1,000.

ACCEPTANCE BY AGENT

I, _____, hereby accept this appointment as agent for the
(Print / Type Agent's Name)

corporation/organization/limited liability company and assume full responsibility for the conduct of all business relative to alcohol beverages conducted on the premises for the corporation/organization/limited liability company.

(Signature of Agent) _____ *(Date)* Agent's age _____

_____ Date of birth _____
(Home Address of Agent)

APPROVAL OF AGENT BY MUNICIPAL AUTHORITY (Clerk cannot sign on behalf of Municipal Official)

I hereby certify that I have checked municipal and state criminal records. To the best of my knowledge, with the available information, the character, record and reputation are satisfactory and I have no objection to the agent appointed.

Approved on _____ by _____ Title _____
(Date) *(Signature of Proper Local Official)* *(Town Chair, Village President, Police Chief)*

Sauk Prairie Police Department - Chief of Police

Recommended for Approval: _____

Not Recommended for Approval: _____

Criminal History:

Driving Record: