NEW AND TRANSFER OF LOCATION ALCOHOL BEVERAGE PREMISE APPLICATIONS

Customers must schedule an appointment ahead of time to have their application reviewed and filed

Alcohol Beverage Applications include Class B Tavern, Class B Beer, Class C Wine, Class A Malt, Class A Liquor, and Class A Liquor & Malt

Unless you already hold a food license or have a pending application on file, a new food application must be filed with your alcohol application.

Appointments can be made by calling (414) 286-2238 or emailing license@milwaukee.gov.

Applicants must have application forms completed prior to arrival. Our office is unable to assist applicants in the completion of the entire application; assistance is limited to answering specific questions regarding completion of the application.

If you are 10 minutes or more late for your appointment, it may need to be rescheduled.

ALCOHOL BEVERAGE ESTABLISHMENT BUSINESS INFORMATION

Office of the City Clerk License Division
200 E. Wells St. Room 105, Milwaukee, WI 53202
(414) 286-2238 e-mail address: license@milwaukee.gov www.milwaukee.gov/license

This information was created to assist persons filing applications to hold alcohol beverage establishment licenses. This brief overview does not replace the applicant's responsibility to review Chapter 90 of the Milwaukee Code of Ordinances ("MCO") related to alcohol beverage regulations and licensing requirements and Chapter 125 of the Wisconsin State Statutes. See s. 90-1, MCO, for key definitions, s. 90-4 for classifications of licenses, and s. 90-6 for license qualifications related to age and residency.

APPLICATION CERTIFICATION The Office of the City Clerk—License Division must certify that your application is complete before your application can be referred to the License Committee for its recommendation as to whether or not your license should be granted. Certification of your application as complete cannot be made until 10 days after all of the following has occurred:

1. Completed application has been properly filed by the applicant.
2. Neighborhood has been notified by our office of your application.
3. Sworn Assurance form has been properly filed with our office by the applicant.

HEARING SCHEDULED WITHIN 3 CYCLES Applications for alcohol beverage establishments are required to be referred to the License Committee within 3 full cycles of the Common Council (generally 9 weeks) after the date the application was certified as complete.

Who needs an Alcohol Beverage License?

A license is required for those who wish to sell, barter, or serve any intoxicating liquors or fermented malt beverages.

Forms Needed

- Business Application (ccl-bapp)
- Original Alcohol Beverage License Application (AT-106)
- Schedule for Appointment of Agent (AT-104)
- Auxiliary Questionnaire – Alcohol Beverage License Application (AT-103a)
- Addendum to Original Alcohol License Application (ccl-alc1)
- Plan of Operation (ccl-pln)
- Detailed Floor Plan (see instructions on Plan of Operation)
- Lease or Proof of Ownership
- Public Entertainment Premises Supplementary Application (ccl-pep1) if applicable
- Cigarette and Tobacco Products Application (ccl-cig1) if applicable
- Menu, if restaurant

Fees

Alcohol Beverage Establishment

License Type	Fee*
Class "A" Malt	$360
Class "A" Liquor	$510
Class "A" Liquor and Malt	$860
Class "B" Beer	$110
Class "B" Tavern	$610
Class "C" Wine	$110
*Includes the $10 publication fee.	

Public Entertainment Premises
Based on the maximum capacity of the premises as established by the Common Council:

Capacity	Fee
25 or fewer persons, or premises without a capacity:	$150
26-79 persons:	$250
80-99 persons:	$375
100-149 persons:	$500
150-179 persons:	$700
180-299 persons:	$1000
300-499 persons:	$1,500
500 or more persons:	$2,000

Cigarette and Tobacco Products: $100

Complete Application

1. Business Application (ccl-bapp)

The sole proprietor, both partners, or the agent of the LLC or corporation must have been a Wisconsin state resident for greater than 90 days prior to the date of application.

2. Original Alcohol Beverage License Application (AT-106)
If applying for the Class "B" Fermented Malt Beverage License and Class "C" Wine License, only one application and publication fee of $10 is required.

If the premise has been licensed before as an alcohol beverage establishment and you wish to expand on what was listed as the premises description (ex: add a sidewalk café), the additional area will be considered a permanent extension of premises.

If the premise description will include a sidewalk café, a Sidewalk Dining Facility Permit must be obtained from the Department of Public Works before the license can be issued.

3. Schedule for Appointment of Agent (AT-104)
Applicants who are corporations or limited liability companies must complete schedule.

4. Auxiliary Questionnaire-Alcohol Beverage License Application (AT-103a)
This form must be completed by all persons listed on the Business Application.

As part of this form, applicants are required to provide detailed information regarding all arrests and convictions in their application. Failure to do so may result in prosecution.

A detailed arrest and conviction report may be obtained from the Milwaukee Police Department, Open Records Section, 2333 N. 49th Street - 2nd Floor (49th St. between North & Lisbon), if proper identification is presented.

5. Addendum to Original License Application (ccl-alc4).
This form must be completed by the individual, all partners, or the agent.

6. Plan of Operation (ccl-pln1)

7. Detailed Floor Plan
Instructions are included on page 5 of the Plan of Operation.

8. Public Entertainment Premises Application (ccl-pep1)
Applicants who wish to conduct or operate public entertainment must complete the Public Entertainment Premises Application. The type(s) of entertainment granted will be listed on your license. In order to make changes, a Request to Change the Plan of Operation for a Public Entertainment Premises License must be applied for, approved, and a new license issued before you can change the current plan of operation.

Exemptions:
No public entertainment premises license shall be required for the following:

- A theater or motion picture house at which the only person or organization providing motion pictures or theater performances is the person or organization that owns the premises.
- Organizations formed exclusively for the purpose of ballet performance and instruction and which have received tax-exempt status from the United States internal revenue service.
- Billiard tables provided on the premises of bona fide clubs or social organizations not operating for private profit which provide other membership privileges and activities, even though there is a charge for playing billiards.
- Any public show or exhibition conducted exclusively by charitable, eleemosynary, educational or religious organizations on their own premises.
- Any dance studio, which means a room, place or space in which dancing classes are held and dancing instruction is given for hire.
- Recorded background music which is incidental to operation of the establishment located on the premises and is either:
    - In the case of a licensed alcohol beverage premises, operated by the licensee, manager or bartender.
    - In the case of a premises without an alcohol beverage license, operated by a regular employee of the establishment.

9. Application for Cigarette and Tobacco Products License (ccl-cig1)
Applicants who wish to offer cigarettes or tobacco products for sale on the premises must file this application.

Ban on Flavored Cigarettes Enacted: It is illegal to sell fruit-, candy-, or clove-flavored cigarettes.

Vending Machines Sales Prohibited: The U.S. Food & Drug Administration has banned the sale of cigarettes through vending machines.

10. Provide required notarized signatures on all forms.
The following persons must provide notarized signatures on the application forms:

If the legal entity is a(n)…	Then the person(s) required to sign the form is/are….
Individual	The individual applicant
Partnership	All partners
LLC or Corporation	Agent or one person holding 20% or more ownership interest

Commissioned notaries public, including attorneys, must impress notary seals on each page notarized.

[!] Any applications filed without required notarial seals will be returned.

The License Division may notarize your documents, provided the person whose signature is going to be notarized is present. There is a $.50 per page charge for notarizing documents.

Changes to notarized forms can only be made by the person who signed the form.

11. Proof of Ownership or Lease.
Applicants must submit with the application documents showing proof of ownership, lease or offer to purchase related to the proposed licensed premises.

Leases or offers to purchase contingent upon the granting of the license are accepted.

12. Menu
All restaurant applicants must submit a copy of the menu.

13. File application and additional required forms with the appropriate license fee.
New license applicants wishing to file applications in person must schedule an appointment by contacting the License Division at (414) 286-2238 or license@milwaukee.gov.

Applicants must have application forms completed prior to arrival. Our office is unable to assist applicants in the completion of the entire application; assistance is limited to answering specific questions regarding completion of the application.
Only the $10 publication fee must be submitted at the time the application is filed.

[!] Incomplete applications or those submitted without a complete floor plan, proof of ownership, lease or offer to purchase will not be accepted.

Proof of Identity Required. All persons filing or amending applications in-person, or picking up licenses or permits, must provide proof of identity.

Notice of Public Interest

Effective July 1, 2010, all applicants for new alcohol beverage retail establishment licenses are required to post a Notice of Public Interest (form ccl-143b) for the purposes of providing notice to the public that a new application has been filed and that written objections to the granting of the license based on the proposed operation of the licensed premises can be submitted by any interested party to the Office of the City Clerk-License Division.

See s. 90-5-8-a-2-c, MCO.

The Notice of Public Interest is required to be posted in a place easily viewable to members of the public from the outside of the proposed licensed premises. The posting and maintaining of the notice shall be at the expense of the applicant.

The Notice of Public Interest is required to be posted upon filing of the new application with the Office of the City Clerk-License Division, and shall remain posted until the application is recommended for granting or denial by the Licenses Committee of the Common Council, or withdrawn by the applicant, whichever occurs first.

Replacement Notices of Public Interest are available online at www.milwaukee.gov/license. See “Notice of Public Interest, New Application” on the “Forms” webpage to create and print a replacement notice.

Sworn Assurance of Posting

Immediately after properly posting the Notice of Public Interest, file with the Office of the City Clerk-License Division a Sworn Assurance (form ccl-143c) confirming the posting.

The Office of the City Clerk-License Division must certify that your application is complete before your application can be referred to the Licensing Committee for its recommendation as to whether or not your license should be issued.

Certification of your application as complete cannot be made until 10 days after the Sworn Assurance form has been properly filed.

Interview and Residency

After all applicants have submitted fingerprints, the individual, all partners, or the agent of the corporation or limited liability company will receive a written notice by mail to contact the Milwaukee Police Department-License Investigation Unit for a telephone interview.

You will also be required to provide proof of residency.

Note: Failure to comply with the fingerprinting, interview, and residency requirements in a timely manner will cause a delay in the certification of your application as complete.

Police Representative Meeting

After fingerprints of all applicants have been filed, the individual, all partners, or the agent will receive written notice by mail to contact the Milwaukee Police Department to schedule a meeting with a representative to review the submitted floor plan and plan of operation. A Crime Prevention Through Environmental Design Survey will need to be completed.

Responsible Beverage Server Course

Individual applicants, each partner, or the agent if a corporation or limited liability company must successfully complete an approved Responsible Beverage Server Training course offered by the Milwaukee Area Technical College (414) 297-8370, or similar approved course at http://www.revenue.wi.gov/training/alcSellerServer.html

Applicants attending Wisconsin C.A.R.E., T.I.P.S. or N.R. A. must have certificates/diplomas, which indicate that the course complies with 125.04 & 125.17, Wis. Stats.

The server-training course does not need to be completed if one of the following are met:

1. Within the past 2 years, you held a Class "A", or Class "B" Liquor license, or a Class" B" Manager's license in Wisconsin.

2. Within the past 2 years, you held a Bartender's license in Wisconsin.

3. Within the past 2 years, you have already completed the course.

Note: Proof must be submitted to the License Division that a course was completed or if the license held was not issued by the City of Milwaukee.

Seller’s Permit

A copy of your Wisconsin State Seller’s Permit must be submitted to the License Division before your license can be issued.

Department of Financial Institutions

Proof that your registration has been filed and processed by the Department of Financial Institutions must be submitted to the License Division before your license can be issued.

Health Inspection

Health Department inspection of the premises must be made and any violations corrected. Contact the Health Department, 841 N. Broadway, (414) 286-3674, to make an appointment for inspection.

Additional Licenses

Applications and information related to the following license and permits can be obtained online at www.milwaukee.gov/license, or from our office:

Class "B" Manager's License. A Class "B" Manager's license is required for the person managing the day-to-day operations of the Class B business if that person is not the individual proprietor, partner, or the agent of the corporation or limited liability company.

Class "D" Bartender's License. A license is required for all persons selling or serving alcohol. The alcohol beverage establishment licensee (Individual, Partners, Agent) does not need a bartender's license. (Officers and members do need a license.)

Members of a licensee's family may be exempt if all of the following requirements are met:

1. Premises must be licensed as an individual or partnership.

2. Person must be an immediate family member (spouse, son, daughter, father, mother, mother-in-law, father-in-law, son-in-law, or daughter-in-law)
Brothers or sisters are not eligible.

3. Person must be 21 years of age or older. If over age 18 and they do not have their own operator's license, they must be under the immediate supervision by the licensee, agent, adult member of the licensee's immediate family, or a person with an operator's license.

4. Person must be living in the same residence as the license.

5. Exemption is only applicable at the licensed family premises.

Retail Dealer's Stamp

Federal Law also requires purchase of retail liquor dealer's stamp. Call 1-800-937-8864 for details or visit http://www.ttb.gov/alcohol/retailers/index.htm

Special Occupational Tax

Federal Bureau of Alcohol, Tobacco and Firearms: A special occupational tax must be paid before beginning business. Call 1-800-937-8864 or go to www.ttb.gov for information.

Additional References

- Ch. 90, Milwaukee Code of Ordinances, www.milwaukee.gov/ordinances;
- Ch.125, Wis. Stats., www.legis.state.wi.us/rsb/stats.html;
- WI Department of Revenue, www.dor.state.wi.us/forms/alcohol/index.html

GRANTING OF LICENSES

Step 1. Notice of hearing sent to applicant
Notice is mailed to all applicants (the individual, both partners, or the agent) to appear before the License Committee.

[!] No regular meetings of the License Committee and Common Council are scheduled during the month of August.

Step 2. Committee recommendation made
The License Committee makes its recommendation to the Common Council and then the Common Council votes on the recommendation at the next scheduled meeting. (Licenses are not granted by the License Committee.)

Step 3. Holds placed by other city departments
If all requirements for the Health Department and Department of Neighborhood Services are not met, they will place a hold on the issuance of your license.

Step 4. Common Council grants/denies license
Licenses are granted by the Common Council at regularly scheduled meetings, which are usually held once a month. Applicants do not appear before the Common Council.

Step 5. License is issued after holds released
Applicants for whom licenses are granted by the Common Council can be issued on the date of granting if:

- All license fees have been paid
- There are no holds on the issuance placed by other City departments
- Responsible Beverage Server Course requirements are met
- State Seller's Permit or clearance slip has been submitted
- Proof that the corporation or LLC has registered with the Wisconsin Department of Financial Institutions has been submitted

License expires 1 year from date of issuance.

License must be issued within 1 year of approval, or a waiver from the Licenses Committee is needed.

Table 1. Sales and Service Restrictions related to each type of Alcohol Beverage Establishment License

Type of Alcohol Beverage License	Type of Alcohol Beverages Permitted	Consumption on Premises, Restrictions	Sale for Off-Premise Consumption, Restrictions	Permitted Hours of Operation [1]
Class "A" Malt	Beer, Fermented Malt Beverages	Not permitted **[6]**	Quantities of no more than 4.5 gallons at any one time **[2]**	8 a.m. to 9 p.m.
Class "A" Liquor	Wine, Intoxicating Liquors	Not permitted **[6]**	No restriction on quantity sold	8 a.m. to 9 p.m.
Class "B" Beer [4]	Beer, Fermented Malt Beverages	By the glass or in an opened original container	Sales for off-premises between 8 a.m. and 9 p.m. only. No restriction on quantity sold	Sun. – Thurs.: 6 a.m. to 2 a.m. Fri. – Sat.: 6 a.m. to 2:30 a.m. **[3]**
Class "B" Tavern [4]	Beer, Fermented Malt Beverages, Wine, Intoxicating Liquors	Intoxicating Liquor: By the glass only; bottle service not permitted All Other Alcohol: By the glass or in an opened original container	Sales for off-premises between 8 a.m. and 9 p.m. only. Intoxicating Liquor: Restricted quantities of no more than 4 liters at any one time. Wine and beer in unlimited quantities.	Sun. – Thurs.: 6 a.m. to 2 a.m. Fri. – Sat.: 6 a.m. to 2:30 a.m. **[3]**
Class "C" Wine [5]	Wine only Wine shall mean products obtained from the normal alcohol fermentation of the juice or must of sound, ripe grapes, other fruits or other agricultural products, imitation wine, compounds sold as wine, vermouth, cider, perry, mead and **sake**, if such products contain 2 of 1% or more of alcohol by volume.	By the glass or in an opened original container. Restricted quantities of no more than 1 bottle at any one time	Sales for off-premises between 8 a.m. and 9 p.m. only. No restriction on quantity sold	Sun. – Thurs.: 6 a.m. to 2 a.m. Fri. – Sat.: 6 a.m. to 2:30 a.m.

[1] Unless more restrictive hours are established under the plan of operation approved by the Common Council as part of the license.
[2] Limitation of 4.5 gallons does not apply if a Class "A" Liquor license is also held for the same premises by the same entity.
[3] On January 1, premises holding Class "B" licenses are not required to close.
[4] "Service Bar Only" Designation: Provides same privileges as Class "B" Beer/Tavern, except all alcohol beverages shall be served only to patrons seated at tables.
[5] Eligibility: Food must account for 50% or more of gross receipts. See s. 90-4-9-c and d, MCO.
[6] Class A establishments may provide up to 2 free taste samples of wine or fermented malt beverages per day to any one person for consumption on the premises between the hours of 11 A.M. and 7 P.M. Sample size must be no more than 3 fluid ounces each. See s. 90-3-5 and s. 90-3-6, MCO.

FEDERAL TAX RESPONSIBILITIES, WHAT BUSINESS OWNERS NEED TO KNOW

As a business owner, you need to know your federal tax responsibilities. In addition to knowing about federal taxes, you need to make some basic business decisions.

Understanding and complying with tax requirements is a necessary aspect of doing business.

IRS WEB RESOURCES

Starting, Operating or Closing a Business
Whether you are a budding entrepreneur, or an established business owner, you will find everything you need to start and manage your business venture.
http://www.irs.gov/businesses/small/article/0,,id=110417,00.html

Business Taxes
The form of business you operate determines what taxes you must pay and how you pay them.
http://www.irs.gov/businesses/small/article/0,,id=98966,00.html

Checklist for Starting a Business
This checklist provides the basic steps you should follow to start a business.
http://www.irs.gov/businesses/small/article/0,,id=98810,00.html

Employer ID Number
An Employer Identification Number, also known as a Federal Tax Identification Number, is used to identify a business entity.
http://www.irs.gov/businesses/small/article/0,,id=98350,00.html
Online Application - Form SS-4
Apply online for the Employer Identification Number
http://www.irs.gov/businesses/small/article/0,,id=102767,00.html

NON-PROFIT/CHARITABLE ORGANIZATONS
Non-Profit organizations (tax exempt status) are required to register as (501) (c) (3) Organizations with the Internal Revenue Service, Department of the Treasury. If your legal entity has not been registered call 1 (800) 829-5500, or apply online at http://www.irs.gov/charities/index.html the legal name registered must be the same as the legal entity name applying for the license. A copy of your documentation from the Internal Revenue Service confirming your status as a (501) (c) (3) organization must be submitted to the License Division before your license can be issued.

SMALL BUSINESS RESOURCES

These are just a few of the many government websites with business information.

Small Business Administration The SBA's Small Business Planner includes information and resources that will help you at any stage of the business lifecycle.
http://www.sba.gov/

Social Security Administration Visit Business Services Online; a suite of applications enabling organizations and authorized individuals to conduct business with the Social Security Administration. This includes filing Forms W-2 electronically for free.
http://www.socialsecurity.gov/

U.S. Department of Labor The Employers' page provides information on Wages and Work Hours, Workplace Safety and Health, and Retirement and Health Benefits.
http://www.dol.gov/

State Links – This IRS.gov link will allow you to connect to your state's website for small business information.
http://www.irs.gov/businesses/small/article/0,,id=101082,00.html

Department of Agriculture - Office of Small & Disadvantaged Business Utilization The Mission of this office is to provide maximum opportunities for small businesses to participate in USDA contracting activities. http://www.usda.gov/osdbu/

Business.gov the official business link to the U.S. Government, is managed by the U.S. Small Business Administration (SBA) in a partnership with 21 other federal agencies

FirstGov.gov and FirstGov En Español As the U.S. government's official web portal, FirstGov.gov makes it easy for the public to get U.S. government information and services on the web. FirstGov.gov also serves as the catalyst for a growing electronic government.

ALCOHOL BEVERAGE LICENSE
APPLICATION CHECKLIST

PLEASE REFER TO THE ALCOHOL BEVERAGE ESTABLISHMENT INFORMATION SHEETS FOR DETAILED INFORMATION.

I. MUST BE COMPLETED PRIOR TO SCHEDULING BEFORE THE LICENSES COMMITTEE:

☐ a. Submit the following to the License Division:
- Application
- Floor plan
- Proof of ownership, lease or offer to purchase the building,
- Menu (if applicable)

☐ b. Pay $10.00 Publication Fee
☐ c. Post Notice of Public Interest and return the Sworn Assurance of Posting to License Division
☐ d. Report for fingerprinting
☐ e. Receive letter from Police Department and complete residency proof, interview, and meeting
☐ f. Contact alderperson's office/address neighborhood concerns
☐ g. License Division receives police report

II. APPROVAL/DENIAL:

☐ a. Receive notice for and attend License Committee meeting *(Attendance required)*
☐ b. Common Council meeting (*Attendance is not required*)

III. COMPLETE ANYTIME PRIOR TO ISSUANCE OF THE LICENSE:

☐ a. Contact Health Department
☐ b. Contact Neighborhood Services

The License Division must receive an electronic release from the Health Department and Neighborhood Services before your license will be issued. A verbal approval from an inspector is not acceptable.

☐ c. Occupancy Permit
☐ d. State Sellers Permit
☐ e. Corporation/LLC Register with Department of Financial Institutions
☐ f. Non-profit organizations register with Internal Revenue Service, Dept. of Treasury
☐ g. Pay license fees
☐ h. Submit Responsible Beverage Server Course certificate

IV. ALSO REMEMBER TO:

☐ a. Post license in a conspicuous place in your establishment
☐ b. Report in writing any changes regarding your application to the License Division within 10 Days
☐ c. Renew each year by the "File By" Date on the Renewal Information Sheets to ensure that there is not a lapse in your license

Please Note: The minimum processing time for an application is 5-6 weeks.

ORIGINAL ALCOHOL BEVERAGE RETAIL LICENSE APPLICATION

Submit to municipal clerk.

Applicant's WI Seller's Permit No.:	FEIN Number:

LICENSE REQUESTED ▶	
TYPE	**FEE**
☐ Class A beer	$
☐ Class B beer	$
☐ Class C wine	$
☐ Class A liquor	$
☐ Class B liquor	$
☐ Reserve Class B liquor	$
☐ Class B (wine only) winery	$
Publication fee	$
TOTAL FEE	$

For the license period beginning _____ 20 _____ ;
ending _____ 20 _____

TO THE GOVERNING BODY of the: ☐ Town of ☐ Village of ☐ City of } _____

County of _____ Aldermanic Dist. No. _____ (if required by ordinance)

1. The named ☐ INDIVIDUAL ☐ PARTNERSHIP ☐ LIMITED LIABILITY COMPANY ☐ CORPORATION/NONPROFIT ORGANIZATION
   hereby makes application for the alcohol beverage license(s) checked above.
2. Name (individual/partners give last name, first, middle; corporations/limited liability companies give registered name): ▶ _____

   An **"Auxiliary Questionnaire," Form AT-103, must be completed and attached to this application by each individual applicant, by each member of a partnership, and by each officer, director and agent of a corporation or nonprofit organization, and by each member/manager and agent of a limited liability company.** List the name, title, and place of residence of each person.

Title	Name	Home Address	Post Office & Zip Code
President/Member			
Vice President/Member			
Secretary/Member			
Treasurer/Member			
Agent ▶			
Directors/Managers			

3. Trade Name ▶ _____ Business Phone Number _____
4. Address of Premises ▶ _____ Post Office & Zip Code ▶ _____
5. Is individual, partners or agent of corporation/limited liability company subject to completion of the responsible beverage server training course for this license period? . . . . . ☐ Yes ☐ No
6. Is the applicant an employe or agent of, or acting on behalf of anyone except the named applicant? . . . . . ☐ Yes ☐ No
7. Does any other alcohol beverage retail licensee or wholesale permittee have any interest in or control of this business? . . . . . ☐ Yes ☐ No
8. (a) **Corporate/limited liability company applicants only:** Insert state _____ and date _____ of registration.
   (b) Is applicant corporation/limited liability company a subsidiary of any other corporation or limited liability company? . . . . . ☐ Yes ☐ No
   (c) Does the corporation, or any officer, director, stockholder or agent or limited liability company, or any member/manager or agent hold any interest in any other alcohol beverage license or permit in Wisconsin? . . . . . ☐ Yes ☐ No
   (NOTE: All applicants explain fully on reverse side of this form every YES answer in sections 5, 6, 7 and 8 above.)
9. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) _____
10. Legal description (omit if street address is given above): _____
11. (a) Was this premises licensed for the sale of liquor or beer during the past license year? . . . . . ☐ Yes ☐ No
    (b) If yes, under what name was license issued? _____
12. Does the applicant understand they must file a Special Occupational Tax return (TTB form 5630.5) before beginning business? [phone 1-800-937-8864] . . . . . ☐ Yes ☐ No
13. Does the applicant understand a Wisconsin Seller's Permit must be applied for and issued in the same name as that shown in Section 2, above? [phone (608) 266-2776] . . . . . ☐ Yes ☐ No
14. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? . . ☐ Yes ☐ No

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signers. Signers agree to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants and each member of a partnership applicant must sign; corporate officer(s), members/managers of Limited Liability Companies must sign.) Any lack of access to any portion of a licensed premises during inspection will be deemed a refusal to permit inspection. Such refusal is a misdemeanor and grounds for revocation of this license.

SUBSCRIBED AND SWORN TO BEFORE ME

this _____ day of _____, 20 _____

_____
(Officer of Corporation/Member/Manager of Limited Liability Company/Partner/Individual)

_____
(Clerk/Notary Public)

_____
(Officer of Corporation/Member/Manager of Limited Liability Company/Partner)

My commission expires _____

_____
(Additional Partner(s)/Member/Manager of Limited Liability Company if Any)

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk	Date reported to council/board	Date provisional license issued	Signature of Clerk / Deputy Clerk
Date license granted	Date license issued	License number issued	

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 the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

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

The undersigned duly authorized officer(s)/members/managers 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)

And: _____
(signature of Officer/Member/Manager)

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.

_____ _____ Agent's age _____
(signature of agent) *(date)*

_____ 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)*

AUXILIARY QUESTIONNAIRE
ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk.

Individual's Full Name *(please print)* *(last name)*		*(first name)*		*(middle name)*
Home Address *(street/route)*	Post Office	City	State	Zip Code
Home Phone Number	Age	Date of Birth	Place of Birth	

The **above named individual** provides the following information as a person who is *(check one)*:

☐ Applying for an alcohol beverage license as an **individual**.

☐ A member of a **partnership** which is making application for an alcohol beverage license.

☐ _____ of _____
(Officer/Director/Member/Manager/Agent) *(Name of Corporation, Limited Liability Company or Nonprofit Organization)*

which is making application for an alcohol beverage license.

The **above named individual** provides the following information to the licensing authority:

1. (a) How long have you continuously resided in Wisconsin prior to this date? _____

   (b) Have you resided in the City of Milwaukee continuously for one year immediately prior to this date? . . . . . ☐ Yes ☐ No

2. (a) Have you ever been convicted of any offenses (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, or laws of any other states? . . . . . ☐ Yes ☐ No

   (b) Have you ever been convicted of any violations of any county or municipal ordinances? . . . . . ☐ Yes ☐ No
   If yes, give law or ordinance violated, trial court, trial date and penalty imposed, and/or date, description and status of charges pending. *(If more room is needed, continue on reverse side of this form.)*

   _____

3. Are charges for any offenses presently pending against you (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of other states or ordinances of any county or municipality? . . . . . ☐ Yes ☐ No
   If yes, describe status of charges pending. _____

4. Do you hold, are you making application for or are you an officer, director or agent of a corporation/nonprofit organization or member/manager/agent of a limited liability company holding or applying for any other alcohol beverage license or permit?. . . . . ☐ Yes ☐ No
   If yes, identify. _____
   (Name, Location and Type of License/Permit)

5. Do you hold and/or are you an officer, director, stockholder, agent or employe of any person or corporation or member/manager/agent of a limited liability company holding or applying for a wholesale beer permit, brewery/winery permit or wholesale liquor, manufacturer or rectifier permit in the State of Wisconsin? . . . . . ☐ Yes ☐ No
   (If yes, identify.)
   _____ _____
   (Name of Wholesale Licensee or Permittee) *(Address by City and County)*

READ CAREFULLY BEFORE SIGNING: I, The undersigned, shall not willfully refuse to provide those services offered under this license, or refuse to employ or discharge any person otherwise qualified because of race, color, creed, sex, national origin or ancestry; I shall not seek information as a condition of employment, or penalize any employe or discriminate in the selection of personnel for training or promotion solely on the basis of such information. I also shall not discriminate against any member of the military service dressed in uniform by willfully refusing services offered under this license.

The undersigned, being first duly sworn on oath, deposes and says that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application.

Subscribed and sworn to before me

this _____ day of _____, 20 ___

_____ _____
(Clerk/Notary Public) *(Signature of Named Individual)*

My commission expires _____

AUXILIARY QUESTIONNAIRE
ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk.

Individual's Full Name *(please print)* *(last name)*		*(first name)*		*(middle name)*
Home Address *(street/route)*	Post Office	City	State	Zip Code
Home Phone Number	Age	Date of Birth	Place of Birth	

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☐ _____ of _____
(Officer/Director/Member/Manager/Agent) *(Name of Corporation, Limited Liability Company or Nonprofit Organization)*

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   (If yes, identify.)
   _____ _____
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Subscribed and sworn to before me

this _____ day of _____, 20 ___

_____ _____
(Clerk/Notary Public) *(Signature of Named Individual)*

My commission expires _____

AUXILIARY QUESTIONNAIRE
ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk.

Individual's Full Name *(please print)* *(last name)*		*(first name)*		*(middle name)*
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☐ _____ of _____
(Officer/Director/Member/Manager/Agent) *(Name of Corporation, Limited Liability Company or Nonprofit Organization)*

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   (Name, Location and Type of License/Permit)

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   _____ _____
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Subscribed and sworn to before me

this _____ day of _____, 20 ___

_____ _____
(Clerk/Notary Public) *(Signature of Named Individual)*

My commission expires _____

AUXILIARY QUESTIONNAIRE
ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk.

Individual's Full Name *(please print)* *(last name)*		*(first name)*		*(middle name)*
Home Address *(street/route)*	Post Office	City	State	Zip Code
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2. (a) Have you ever been convicted of any offenses (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, or laws of any other states? . . . . . ☐ Yes ☐ No

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   (If yes, identify.)
   _____ _____
   (Name of Wholesale Licensee or Permittee) *(Address by City and County)*

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Subscribed and sworn to before me

this _____ day of _____, 20 ___

_____ _____
(Clerk/Notary Public) *(Signature of Named Individual)*

My commission expires _____

ADDENDUM TO ORIGINAL ALCOHOL BEVERAGE LICENSE APPLICATION

To be completed by the individual, all partners, or the agent of a corporation/limited liability company:

Wisconsin State Statutes require that all new applicants complete a Responsible Beverage Server Training Course.

You do not need to take the course if you answer yes to one of the following questions and provide proof of such:

1. Within the last 2 years have you held a bartender's license in the state of Wisconsin?
   ☐ Yes ☐ No
2. Within the last 2 years have you held a Class "A" or Class "B" alcohol beverage license, or a Class "B" manager's license in the state of Wisconsin? ☐ Yes ☐ No
3. Within the last 2 years have you completed a Responsible Beverage Server Training Course in the state of Wisconsin? ☐ Yes ☐ No

IF YOU ANSWERED NO TO ALL OF THE ABOVE QUESTIONS, PROOF OF COURSE COMPLETION MUST BE PROVIDED BY SUBMITTING YOUR COURSE CERTIFICATE TO THE LICENSE DIVISION.

For course enrollment information, contact MATC at (414) 297-8370 or for similar approved courses see "Training" on the Wisconsin Department of Revenue's website at **www.dor.state.wi.us**.

I understand that a license will not be issued without a copy of the course certificate or proof of the license held within the last two years being submitted to the License Division.

SUBSCRIBED AND SWORN TO BEFORE ME THIS

_____day of_____20_____

_____
Print name of Individual/Partner/Agent

_____
Notary Public, State of Wisconsin

_____
Signature of Individual/Partner/Agent

My Commission expires_____
Notary Seal must be affixed

****

Office Use Only

Initials_____ Date Filed_____ LICENSE TYPE & NO. _____

City Clerk - License Division
City Hall, 200 E. Wells St., Room 105
Milwaukee, WI 53202
(414) 286-2238 license@milwaukee.gov

City of Milwaukee

PLAN OF OPERATION

1. Premises Location

☐ Free Standing Building ☐ Strip Mall ☐ Other _____

2. Describe Premises Structure

☐ Single Story ☐ Multi-Story - # of Stories _____ ☐ Other _____

3. Describe Surrounding Area

☐ Commercial ☐ Residential ☐ Industrial ☐ Other _____

4. Premises Location

a) ☐ Major Thoroughfare ☐ Secondary Street ☐ Other _____
b) Nearest Cross Street _____

5. Proximity of Premises to Church, School, Daycare Center or Hospital

Is there at least 300 feet between the building and any church, school, daycare center or hospital? ☐ Yes ☐ No

6. Miscellaneous Business Questions

a) Proposed Opening Date: _____
b) Is this premise under construction? ☐ Yes ☐ No If yes, list estimated completion date: _____
c) Is this a franchise? ☐ Yes ☐ No
d) Is this premises currently licensed? ☐ Yes ☐ No If yes, list type of license: _____
e) Is the current licensee operating? ☐ Yes ☐ No If no, list date closed:_____
f) What other types of licenses/permits will you or do you hold at this location? (check all that apply)
☐Occupancy Permit ☐Cigarette & Tobacco ☐Gas Station ☐Extended Hours
☐Other:_____
g) Do you have future plans for other businesses, licenses or permits at this location? ☐ Yes ☐ No

If yes, explain:_____

7. Food

Will food be served on the premises? ☐ No ☐ Yes If yes, a Food Dealer license is required.

Check all that apply: ☐Prepackaged Food ☐Snacks ☐Appetizers ☐Catered Events

☐ Full Meals – Hours of Food Service: From_____ To_____

A menu must be submitted with this Plan of Operation for all restaurants.

8. Type of Business

Briefly describe the type of business you plan to operate if granted a license (attach additional sheets as necessary.)

_____

_____

_____

9. Litter and Noise

How are the grounds kept clean? ☐ Sweep ☐ Pressure Wash ☐ Pick Up Litter ☐ Other: _____

How often will grounds be cleaned? ☐ Daily ☐ Weekly ☐ Other: _____

Grounds Cleaned By: ☐ Licensee ☐ Building Owner ☐ Employees ☐ Hired Maintenance ☐ Other: _____

How are noise issues prevented and/or addressed? ☐ Security ☐ Manager approaches customer(s) ☐ Call Police
☐ Signs Posted ☐ Other: _____

10. Smoking and Sanitation

Are there designated outdoor smoking areas? ☐ No ☐ Yes
If yes, describe the area(s) and provide location(s): _____

Number of Garbage Cans: Inside: _____ Locations: _____
Outside: _____ Locations: _____

Is a Crowd Control Barrier used? ☐ No ☐ Yes If yes, describe: _____

Describe sanitation facilities (restrooms): _____

Provide name of solid waste contractor: _____

11. Security

Are there parking spaces on the premises? ☐ No ☐ Yes If yes, number of spaces: _____ and describe security provisions:
_____

Are there designated loading areas? ☐ No ☐ Yes If yes, describe security provisions _____

Do you have security personnel on the premise? ☐ No ☐ Yes If yes, how many? _____

AND What are their responsibilities? _____

What security equipment do they use? _____

List their licensing, certification or training credentials: _____

Are there security cameras? ☐ No ☐ Yes If yes, list all locations: _____

Are searches and/or identification checks conducted upon entry? ☐ No ☐ Yes If yes, describe: _____
_____

12. Percentage of Sales (must total 100%)

Alcohol _____ %	Food Sales _____ %	Entertainment _____ %	Other _____ %

13. Businesses On The Premise (choose all that apply):

Type 1

☐ Full Service Restaurant	☐ Cafe/Coffee Shop	☐ Deli or Fast Food Restaurant	☐ Private/Fraternal/Veterans Club
☐ Night Club	☐ Tavern	☐ Cocktail Lounge	☐ Teen Club
☐ Bowling Alley	☐ Hotel	☐ Banquet Hall	☐ Sports Facility

Type 2

☐ Liquor Store	☐ Corner Store	☐ Supermarket	☐ Convenience Store
☐ Gas Station	☐ Other_____		

14. Legal Capacity of Premises (Only premises identified as Type I in Question #13)

_____ (Call the Milwaukee Development Center at 414-286-8211 if you have questions.)

15. Hours of Operation

Day of the Week	Proposed Hours of Operation:		Number of Customers expected each day	Potential Age Range of Customers	Class B Applicants: Age Restriction (If none, write 'None')
	Open	Close			
Sunday					
Monday					
Tuesday					
Wednesday					
Thursday					
Friday					
Saturday					

Entertainment Indoor Closing Hours - If alcohol beverage establishment, same as alcohol license hours.
If non-alcohol establishment 1:00 am Sunday to Thursday; 1:30 am Friday and Saturday.

Entertainment Outdoor Closing Hours - 10:00 pm Sunday – Thursday; 12:00 am Friday and Saturday,
unless otherwise approved by Common Council in licensee's plan of operation.

16. This Section to be Completed by Alcohol Applicants Only

a) Property Owners Name: _____ Phone Number: _____
Address: _____

b) Are you taking out this application for anyone that may not be eligible for a license? ☐ No ☐ Yes
If yes, list name and address: _____

c) Will the agent, a partner or the individual licensee be conducting the day-to-day operations of the business? ☐ No ☐ Yes
If no, list the name and address of the person(s) who will: _____
_____

Class B Applicants: If the agent, a partner or the individual licensee will not be conducting the day-to-day operations of the business, the person(s) listed above must obtain a Class B Managers license.

d) Does anyone else have money invested or any other interest in this business? ☐ No ☐ Yes
If yes, explain:_____

e) Have you made an agreement with anyone to repay any loan or any other payments based upon income from the business?
☐ No ☐ Yes If yes, list name and address: _____

f) Will any of the following types of businesses be conducted at this location? (check all that apply)
☐Bed & Breakfast ☐Billiard/Pool Hall ☐Comedy Club ☐Indoor Golf Facility
☐Video Game Center(6 or more games) ☐Brew Pub ☐Volleyball Court ☐Theater ☐Wine Tasting Room
☐Department Store ☐Pharmacy ☐Gift Shop ☐Museum ☐Center for the Visual & Performing Arts

g) If applying for Class B or C license, are you applying for "Service Bar Only"? ☐ No ☐ Yes
Service Bar Only means customers cannot sit at the bar. Alcohol is served to patrons seated at tables. No stools, chairs or other articles of furniture shall be placed at the service bar for patrons to sit upon.

17. Proof of Ownership, Lease, or Offer to Purchase (new & transfer applicants only)

Submit proof of ownership, lease, or offer to purchase the building with this application.
A lease or office to purchase must:

a) Be in the same legal entity name as that apply for the license
b) Reflect the same address as the premises address on this application
c) Reflect current dates and
d) Be signed by the lessor/seller and lease/buyer

18. Property Information (new & transfer applicants only)

a) Do you own or lease the building? ☐Own ☐Lease

b) Who owns the fixtures (for example, coolers, etc.)? _____

c) Are you purchasing the stock and/or fixtures? ☐No ☐Yes If yes, amount paid $_____

d) Total amount paid for business $_____

e) Total amount paid for goodwill of the business $_____

Goodwill comprises the reputation and customer relationships of an existing business. If the price you pay for the business exceeds the fair market value of all of the rest of the assets of the business, the excess may be considered goodwill.

f) Have you made arrangements with the seller for payment of personal property taxes? ☐ No ☐ Yes

19. Lease Information (new & transfer applicants who are leasing the premises only)

a) Date lease begins_____ Ends_____

b) Monthly rental $_____

c) Do you have an option to renew the lease? ☐ No ☐ Yes

d) Does your lease allow for assignment to another party without the consent of the owner? ☐ No ☐ Yes

e) For what length of time have you been guaranteed occupancy (number of years)? _____

f) In addition to paying the monthly rental, will you have to pay anything additional to the owner of the building to guarantee performance of the lease? ☐ No ☐ Yes If yes, explain_____

g) Does the present owner or occupancy object to the granting of your license? ☐ No ☐ Yes

If yes, explain_____

20. Change of Agent Applicants Only

Have there been any changes to the floor plan since the last application was submitted? ☐ No ☐ Yes

If no, a new floor plan is not required. If yes, submit a new floor plan and explain the change(s): _____

21. Notarized Signatures of Applicants

SUBSCRIBED AND SWORN TO BEFORE ME

This_____ day of _____, 20_____

_____
(Clerk/Notary Public)

My Commission Expires_____

*Notary Seal must be affixed.

_____
Agent/Owner/Partner

_____
Additional Owner/Partner

Note: All information contained in this application is subject to approval by the Common Council.
Deviating from approved plan of operation will subject licensee to citations, and/or suspension or non-renewal of the license.
Contact the License Division for information on how to request changes.

New and transfer of premise applicants must submit the following:

☐ Proof of ownership, lease or offer to purchase the building

☐ Detailed floor plan

☐ If a restaurant, copy of the menu

If you do not provide all required information, your application will be returned to you.

Detailed Floor Plan

Please read all instructions before preparing the floor plan.

- A detailed floor plan must be submitted with this application.
- Any application submitted without the detailed floor plan (including all required items as listed below) will be returned.
- Even if the premise has been previously licensed and a floor plan submitted a new floor plan must be submitted with this application.
- The floor plan must be filed on 8 ½ x 11 inch size paper.
- A separate sheet of paper must be filed for each floor where business will be conducted.
- Handwritten plans are acceptable.
- Plans do not need to be architectural drawings and need not be to scale.

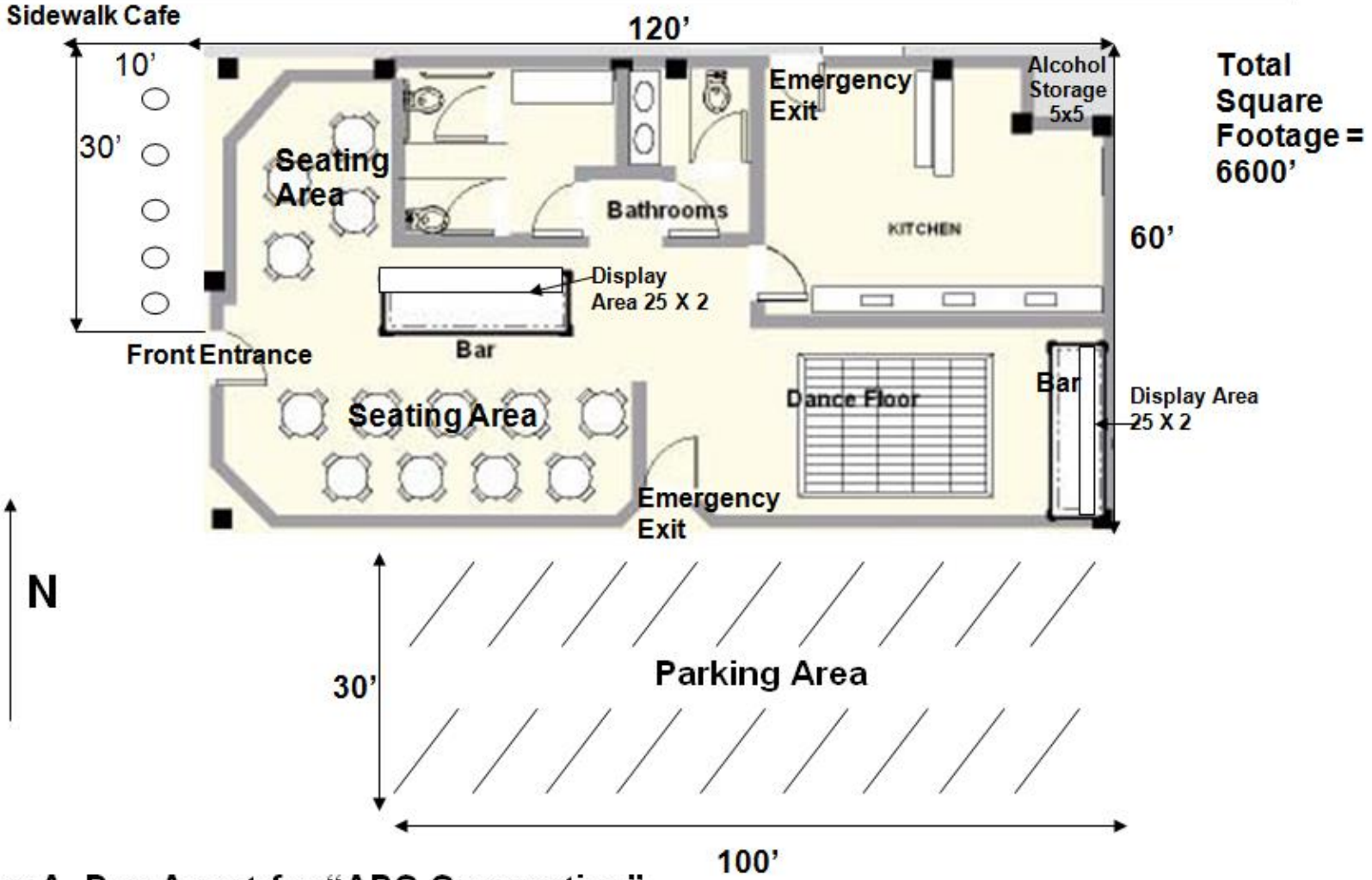
The floor plan must include all of the following:

1. ☐ Dimensions of the premises (length x width) and
   ☐ Total square feet of the premises
2. ☐ Label all entrances and exits
3. ☐ Label all parking areas on the premises (do not include street parking) This is required even if the parking is shared, for example, a strip mall and
   ☐ Provide the dimensions (length x width) of all parking areas on the premises. The parking area(s) should be marked on the floor plan for the first floor showing the relation to the building.
4. ☐ Label all seating areas, food preparation areas and bars (as applicable)
5. ☐ Mark the North point (N↑) on each page
6. ☐ Write the date on each page
7. ☐ Write the legal entity name (and agent's name if a corporation or LLC) on each page
8. ☐ Write the trade (business) name on each page
9. ☐ Write the premise address on each page

Alcohol applicants only:

1. ☐ Even if the basement is used for alcohol storage only, a floor plan of the basement is still required.
2. ☐ Label all alcohol storage areas (coolers, etc.) and
   ☐ Provide dimensions (length x width) of the alcohol storage areas
3. ☐ Label all alcohol display areas (behind the bar, shelves, etc.) and
   ☐ Provide dimensions (length x width) of the alcohol display areas
4. ☐ Class B & C Applicants Only: Label all outdoor areas used for the sale or service of alcohol beverages (for example, patios, beer gardens, sidewalk cafes and
   ☐ Provide the dimensions (length x width) of all outdoor areas used for the sale and service of alcohol beverages

Floor Plan Sample: Please see page 5 of the Plan of Operation for a list of all items that **must** be included. ***Reminder: The areas for Alcohol Beverage Storage and Display must be included and the dimensions must be given.*** **This includes basement storage.**



John A. Doe Agent for "ABC Corporation"
"My Bar"
122 Any Street
Date: June 1, 2005

PUBLIC ENTERTAINMENT PREMISES SUPPLEMENTAL APPLICATION

Office of the City Clerk License Division
200 E. Wells St. Room 105, Milwaukee, WI 53202
(414) 286-2238 www.milwaukee.gov/license e-mail address: license@milwaukee.gov

TYPES OF ENTERTAINMENT (CHOOSE ALL THAT APPLY)

☐ Instrumental Musicians ☐ Bands ☐ Battle of the Bands ☐ Comedy Acts

☐ Disc Jockey ☐ Magic Shows ☐ Poetry Readings ☐ Dancing by Performers

☐ Adult Entertainment/ Strippers/Erotic Dance ☐ Wrestling ☐ Patron Contests ☐ Patrons Dancing

☐ Jukebox ☐ Karaoke ☐ Bowling Alley How many? _____ ☐ Pool Tables How many? _____

☐ Motion Pictures How many? _____ ☐ Amusement Machines – How many? _____ ☐ Concerts Approx. # per year? _____ ☐ Theatrical Performances Approx. # per year? _____

☐ Other: _____

WILL PROMOTERS EVER BE USED FOR ANY OF THE ENTERTAINMENT?

☐ No ☐ Yes, describe: _____

LEGAL CAPACITY OF PREMISES

_____ (Call the Milwaukee Development Center at 414-286-8211 w questions.) Your legal capacity will determine the license fee for your Public Entertainment Premise License. If you would like to request that the license be approved with a lower capacity than that listed above, indicate lower capacity_____. If approved, this lower capacity will print on your license and override the capacity listed on your Occupancy Permit.

IDENTIFY IF SOUND AMPLIFICATION IS USED

☐ No ☐ Yes, describe: _____

DECLARATIONS, ACKNOWLEDGEMENTS, & DISCLOSURES

The undersigned understands that after the license has been issued, a change to the plan of operation will require a written request to change and approval from the Common Council.

The undersigned agrees to inform the City Clerk within 10 days of any substantial changes in the information supplied in this application.

The undersigned understands that applicants shall not willfully refuse to provide the services offered under this license, or add charges or require deposits not required of the general public because of race, color, sex, religion, national origin or ancestry, age, handicap, lawful source of income, marital status, sexual orientation, gender identity or expression, familial status or the fact that a person is now or has been a member of the military service, whether dressed in uniform or not; and shall not seek such information as a condition of employment, or penalize any employee or discriminate in the selection of personnel for training or promotion on the basis of such information.

The undersigned has knowledge of the City Ordinances currently regulating public entertainment, and understands that the license may be subject to suspension, non-renewal or revocation, if the applicant violates any rule, law or regulation of the city of Milwaukee and State of Wisconsin.

60 DAY WAIVER (FOR APPLICANTS ALSO APPLYING FOR OTHER LICENSES AT THIS TIME)

I request that my Public Entertainment Premises LICENSE application be HELD subject to the review requirements of the other licenses for which I am applying. I THEREFORE waive the requirement of Milwaukee Code of Ordinances SECTION 108-5-1-b requiring THAT THE COMMON COUNCIL DENY OR GRANT MY Public Entertainment Premises application within 60 days after certification. Signature of Applicant:_____

NOTARIZED SIGNATURES OF APPLICANTS

SUBSCRIBED AND SWORN TO BEFORE ME

This_____day of _____ , 20 _____ _____
Agent/Owner/Partner

_____ _____
(Clerk/Notary Public) Additional Owner/Partner

My Commission Expires_____*Notary Seal must be affixed.

Office Use Only: Initials:_____ Filed:_____ App :_____ ☐ Waiver Signed
☐ Only PEP or ☐ Waiver Not Signed: Email Mgr:_____ Granted_____ License #_____

Application for Cigarette and Tobacco Products License

Applicant's Wisconsin 15-digit Sales Tax Account Number

☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ ←

This must be issued in the same legal name of the licensee below.

Legal Name (corporation, llc, partnership or sole proprietor)	Federal Employer Identification No. (FEIN)
Trade or Business Name	Business Telephone Number
Premises Address	Business Located in City of Milwaukee; Milwaukee County
Mailing Address (if different from Premises Street Address	City, State, Zip Code

1. Type of Legal Entity (check one)
   ☐ Sole Proprietor ☐ Partnership ☐ Corporation/LLC, enter date incorporated: _____
   ☐ Out of State Corporation/LLC – Are you registered to do business in Wisconsin? ☐ Yes ☐ No

2. List in the space provided below the exact location in the building where cigarettes and tobacco products will be sold:
   _____

3. Do you understand that it is illegal to sell fruit-, candy-, or clove-flavored cigarettes? ☐ Yes ☐ No

4. Identify the type of business offering cigarettes and tobacco products for sale. Check (√) one, and describe (if "Other"):
   ☐ Retail Food Store ☐ Filling Station/Convenience Store ☐ Other: _____

5. Does the applicant understand that they must purchase cigarettes only from manufacturers, distributors or jobbers who hold a permit with the Wisconsin Department of Revenue? ☐ Yes ☐ No

6. Does the applicant understand that they must obtain a Tobacco Products Distributor permit if purchasing untaxed tobacco products from an out-of-state company? (Tobacco Products Distributor permit is available from the Wisconsin Department of Revenue at 608-261-6435.) ☐ Yes ☐ No

7. Does the applicant understand that they cannot purchase/exchange cigarettes or tobacco products from another retailer, including transferring existing stock to a new owner? ☐ Yes ☐ No

8. Does the applicant understand that they must provide employees with tobacco sales training approved by the Wisconsin Department of Health and Family Services? (SmokeCheck.org) ☐ Yes ☐ No

9. Does the applicant understand that they may not sell, give or otherwise provide cigarettes/tobacco products to minors? ☐ Yes ☐ No

10. Does the applicant understand that they may not sell single cigarettes? ☐ Yes ☐ No

11. Does the applicant understand that cigarette and tobacco products invoices must be kept on the licensed premises for two years from the date of the invoice and be available for inspection by the Wisconsin Department of Revenue/law enforcement and that failure to comply can result in criminal penalties, including loss of cigarettes/tobacco products? ☐ Yes ☐ No

12. Does the applicant understand that only cigarettes and roll-your-own (RYO) tobacco products listed on the Wisconsin Department of Justice's website labeled "Directory of Certified Tobacco Manufacturers and Brands" at www.doj.state.wi.us/dls/tobacco/index.html may be sold in Wisconsin? ☐ Yes ☐ No

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the applicant. Applicant agrees to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, cannot be assigned to another. Any lack of access to any portion of a licensed premises during inspection will be deemed a refusal to permit inspection. Such refusal is a misdemeanor and grounds for revocation of this license.

Signature of Sole Proprietor/Partner/Agent or 20% or More Owner: _____

Date: _____ Print Name: _____

Food Dealer Supplemental Application Informational Sheet

Office of the City Clerk License Division
200 E. Wells St. Room 105, Milwaukee, WI 53202
(414) 286-2238 E-MAIL ADDRESS: LICENSE@MILWAUKEE.GOV
WWW.MILWAUKEE.GOV/LICENSE

Walk-In Customer Service - Restricted Hours

Applicants wishing to file applications in person rather than by mail, may do so in our office Monday to Friday (except holidays) during the following times only:

8:15 a.m. to 12:00 p.m.; 1:30 p.m. to 4:00 p.m.

Applicants must have application forms completed prior to arrival. Our office is unable to assist applicants in the completion of the entire application; assistance is limited to answering specific questions regarding completion of the application.

License Period: License expires 1 year from date of issuance. License must be issued within 1 year of approval, or a waiver from the Licenses Committee is needed.

Fees: *$300 Initial Fee due at the time of Application; Remaining license fee is paid after review by Health Inspector but must be received prior to issuance. Once inspection is complete an invoice will be mailed or emailed to you for payment.

Restaurant	
Community Food Program / Meal Service Site	$35
Prepack	$250
Food processing - less than $20,000 in gross sales	$525
Food processing - $20,001 - $200,000 in gross sales	$800
Food processing $200,001 - $2,000,000 in gross sales	$1250
Food processing with over $2,000,000 in gross sales	$1725
Additional Site	$100
Retail	
Community Food Program / Meal Service Site	$35
Food processing - less than $20,000 in gross sales	$350
Food processing - $20,001 - $200,000 in gross sales	$575
Food processing $200,001 - $2,000,000 in gross sales	$1325
Food processing with over $2,000,000 in gross sales	$2050
Food no processing less than $20,000 in gross sales	$200
Food no processing $20,001 - $200,000 in gross sales	$300
Food no processing $200,001 - $2,000,000 in gross sales	$575
Food no processing with over $2,000,000 in gross sales	$875

Forms Needed

- Business Application ccl-bapp1
- Food Dealer Supplemental Application/Food Operation Plan
- Agreement Relating to Storage of Food in Private Residence (Submit a completed "Agreement Relating to Storage of Food in a Private Residence" form ONLY if you are stocking vending machines or are a food distributor using a private residence as the business address.)
- Affirmation of Understanding - Permit Needed to Operate (Items 1-7 must be initialed confirming your understanding.)

Who Needs a Food Dealer License?

A license is required of every person, partnership, association or corporation that manufactures, offers for sale, stores, distributes or sells food in the City of Milwaukee. Food is defined as all articles used for food, drink or condiment including ice or water used by humans, whether simple, mixed, or compound and articles used or intended for use as ingredients in the composition or preparation thereof. See s. 68-4, Milwaukee Code of Ordinances.

Exemptions:

- A person selling only bottled or canned non-alcohol drinks that do not require refrigeration is not required to have a license.
- Individuals holding peddlers' permits that do not serve meals.
- This license is also not required of religious, fraternal, youth, civic or patriotic organizations, service clubs or religious assemblies that sell food only one day during the fiscal year, although they are required to complete an application and be inspected by the Health Department.
- Individuals who sell home canned products and meet all of the criteria contained in s. 97.29(2), Wis Stats.
- Churches; religious, fraternal, youths' or patriotic organizations, service clubs or civic organizations that occasionally (20 times or fewer per license year) prepare, serve or sell meals to transients or the general public. (they may need to licensed and inspected as temporary events, however).
- Any public or private school lunchroom for which food service is directly provided by the school. (If food is provided through a private contractor, the contractor must be licensed).
- A private individual selling food from a movable or temporary stand at a public farm sale (whom are licensed as farmer's markets as part of a temporary license).
- The serving of canned soda through a State licensed vending machine.
- Any college campus as defined in s. 36.05, Wis. Stats., institution as defined in s. 36.51(1)(b), Wis. Stats., or technical college that serves meals only to the students enrolled in the college campus, institution or school or to authorized elderly persons under s. 36.51or 38.36, Wis. Stats.
- A concession stand at a locally sponsored sporting event, such as a little league game. In this paragraph, "concession stand" means a food stand that serves meals and is operated exclusively for the benefit of a participating youth sports team or program or the governing of youth sports organization, and "locally sponsored sporting event" means a competitive game, taking place inside or outside, specifically for youth, that is organized or sponsored by one or more local business, governmental or other civic organization, or by parents of the youth, including a school-sponsored interscholastic sports competition.
- A retail food establishment primarily engaged in selling fresh fruits and vegetables, honey, cider, sorghum or maple syrup produced by the operator in the City of Milwaukee of the retail food establishment if no other food processing activities are conducted at that retail food establishment.
- A restaurant, vending machine, vending machine commissary or other establishment for which a permit is issued under s. 254.64., Wis. Stats., to the extent that the activities of the establishment are covered by the permit.
- An establishment selling only vitamins or vitamin supplements regulated by the Food and Drug Administration (FDA). This does not include herbs or herbal teas, so if those are being sold a license is required.

Authorized Representative Statement

In order for someone other than the applicant to pick up the license, an Authorized Representative Statement must be on file in the License Division.

Health Department Inspection

At least 24 hours after filing your application, contact the Health Department at (414) 286-3674 to obtain your inspector's name and phone number. Then contact the inspector between 8:00 am and 9:30 am Monday thru Friday to make an appointment for inspection of the premises. The License Division will receive written notification directly from the Health Department when all requirements are met.

Fingerprinting & Background Check

Fingerprinting is required of the individual, all partners, or the agent and all 20% or more shareholders. See Business Information sheet for further instructions.

Common Council/Neighborhood Review:

You may wish to contact the district alderperson where your establishment will be located at (414) 286-2221 to discuss your plans for the business.

For applicants applying for a Food Dealer license for an establishment without a companion Alcohol application, approval will be needed from the district Alderperson prior to issuance of the license. Upon submission of the application to the License Division, the application will be submitted to the local Alderperson's office for approval.

Their office has 15 days to indicate their approval or objection to the application. If the Alderperson objects to the license, our office will notify you of the objection by mail. If you wish to appeal the objection, you must, within 10 days of receiving our notice of objection, inform our office that you wish to appeal. Your application will then be placed on file to be scheduled for a hearing before the License Committee. If you do not wish to appeal the objection, you can withdraw the application and apply for a refund (if fees have been paid).

If our office does not receive notification from you within 10 days of the objection notice, your application will be considered withdrawn and a new application will need to be filed if you wish to again pursue the license. See s. 68-4-3a-d, Milwaukee Code of Ordinances.

Wisconsin Seller's Permit:

All applicants must provide proof that they hold a WI Seller's Permit. This is obtained from the WI Department of Revenue, 819 N. 6th St, Room 408, (414) 227-4000, www.dor.state.wi.us/. The legal entity name on the permit must be exactly the same as the legal entity applying for the license.

EXEMPTIONS: A seller's permit **will not** be issued to wholesalers, manufacturers and other businesses not making direct retail sales of tangible property or taxable services.

Department of Financial Institutions

Proof that your registration has been filed and processed by the Department of Financial Institutions must be submitted to the License Division before your license can be issued.

Neighborhood Notices & Objections:

Notices of Public Interest will be mailed to residential neighbors within 250 feet of the premises. Notices advise the neighbors that an application has been filed and provide them information regarding filing an objection.

If there are neighborhood objections or items on the police background check, you may need to appear before the Licenses Committee. If recommended for approval, then the application will be granted by the Common Council. Meetings are 1-2 times per month. There are no meetings in August.

Issuance of the License

The license fee must be paid, police background check received, alderperson approval received, and written notification received from the Health Department and Department of Neighborhood Services prior to the license being issued. Typically, from the date of application, issuance of the license will be a minimum of 15 days.

ADDITIONAL REQUIREMENTS

Robbery Prevention/Deterrence Training

Section 68-4.3 of the Milwaukee Code of Ordinances states "Owners and employees of convenience food stores shall be required to complete a training course in robbery prevention approved of or provided by the police department within 120 days of ownership or employment." The Community Services Section offers several training courses on Convenience Store Robbery Prevention/Deterrence at the Safety Academy each year. http://city.milwaukee.gov/cstore#.U9aDPjoo6Uk

Food Manager Certification

Per City Ordinances and the Wisconsin Food Code, each licensed restaurant and food establishment that processes potentially hazardous food must have at least one manager or operator certified in food protection practices within 90 days after a business opens. In the City of Milwaukee, the certificate holder must be on the premises when there are more than five food handlers working. In the City of Milwaukee, in order to renew a food protection practices certificate, the certificate holder must satisfactorily pass a Conference for Food Protection accredited examination. http://city.milwaukee.gov/cfm#.U9aHMzoo6Uk

Sidewalk Dining Facility Permit:

If your plan of operation includes allowing customers of your business to consume food or beverages on a sidewalk café (in/on the public right of way) you must list this in your premise description on the application. A permit must also be obtained from the City of Milwaukee Development Center. To obtain an application, please contact the Department of City Development at (414)286-8211. No license will be issued that includes a Sidewalk Café in the premise description until and unless this permit has been obtained. Our office will confirm with DCD that the permit has been applied for and issued prior to the issuance of your Food Dealer license. If you wish to obtain your Food Dealer license prior to the issuance of your Sidewalk Dining Facility Permit, please notify our office, as we can omit the Sidewalk Dining area from the premise description on the license and add it later once the permit has been obtained.

Extended Hours License:

If you wish to be open for business between the hours of midnight and 5 am, you will also need to apply for an Extended Hours License. This application is also acquired from the License Division.

Secondhand Dealer License:

If you purchase, sell or exchange any secondhand articles of personal property (including used cell phones), you will also need to apply for a Secondhand Dealer License. "Secondhand" means previously owned by a member of the general public immediately prior to your transaction. This application is also acquired from the License Division.

More Information:

Review ch. 68, Milwaukee Code of Ordinances online at www.milwaukee.gov/ordinances. Keep informed of changes online under "View What's New!" at www.milwaukee.gov/license

FOOD DEALER SUPPLEMENTAL APPLICATION / FOOD OPERATION PLAN

OFFICE OF THE CITY CLERK, LICENSE DIVISION
CITY HALL, 200 E. WELLS ST, ROOM 105, MILWAUKEE, WI 53202 ▪
(414) 286-2238 ▪ license@milwaukee.gov ▪ www.milwaukee.gov/license

1. Application Type

Indicate the application type and complete the corresponding section.

☐ **New application** *(fee is $300)*. For new applications, answer questions below and then continue on to section 2.

Is this a simple change of ownership (no change in food operation) or a new establishment?

- ☐ Taking over existing operating licensed food business
- ☐ New establishment (anything other than a simple change of ownership)

Provide a brief description of the food establishment

What is the anticipated opening date or date of change of ownership:

☐ **Site Evaluation - Optional** *(fee is $100)* Site evaluations are optional, and done only upon request. The purpose of the site evaluation is to assess the suitability of a prospective site for use as a food establishment.

☐ **Modification or amendment** to an existing food license or public health approved operational plan. For modifications/amendments to existing establishments, both the operator and establishment cannot be different then on existing license or the application is considered new. Answer the two questions below (including the follow up detail if applicable) and then continue on to section 2.

What facilities (equipment or building) change(s) are you planning (*check all that apply*):

- ☐ Construction or renovation *(fee is $200)*
- ☐ Significant equipment change without construction or renovation *(fee is $50)*
- ☐ Adding an additional site at the same premises where food will be prepared/processed or sold (fee is $100 per additional site)
- ☐ No equipment or renovations are being planned

What changes are being proposed to the food operation or specialized approvals are being requested (*Note: $75 operational change fee is charged only once even if multiple items are checked*):

☐ Substantial changes to the menu including the type or complexity of food processing (*fee is $75*)

Briefly describe proposed changes

☐ Adding processing when no processing was previously performed, or adding additional types of processing (*fee is $75*)

☐ Requests for modifications or variances to public health food code requirements or the review of a specialized process requiring health department approval prior to implementation (*fee is $75*)

Indicate specialized processes/variances requested (check all that apply):

- ☐ Acidified Rice
- ☐ Bare Hand Contact to Ready to Eat Foods
- ☐ Curing
- ☐ Dogs in Outside Dining Areas
- ☐ Non-continuous Cooking
- ☐ Peddler Base
- ☐ Reduced Oxygen Packaging
- ☐ Other, specify
- ☐ Sale without Consumer Advisory
- ☐ Shellfish - Comingling
- ☐ Shellfish -Display Tanks
- ☐ Smoking
- ☐ Sprouting
- ☐ Time as a Public Health Control
- ☐ Wild Game

☐ Amending existing license to reflect an increase in annual gross sales or change in food operation (fee is the difference in the cost between the food licenses plus $25 for transfer fee)

☐ No significant changes are being proposed in how food is prepared/processed or substantial menu changes. No addition of specialized process or activities requiring approval is being requested (*no fee*)

2. Premises Description

Will food be prepared or sold at a single or multiple food preparation and/or sale sites: ☐ Single ☐ Multiple

If multiple sites will be used, how many distinct sites will be used?

List all sites and briefly describe the nature of the food activities at each site:

Note: Multiple sites may require more than one license or an additional site license depending upon the food activity conducted at any one site.

Indicate where on the premises food will be sold, served, consumed and/or stored: ☐ 1st Floor ☐2nd Floor ☐Rooftop ☐Basement

☐ Other Floor, specify_____

☐Other location, specify _____

Are any outdoor operations planned? ☐ Yes ☐ No ☐ Unknown

What activities will be conducted outdoors (check all that apply)

☐ Bar
☐ Cooking/grilling
☐ Dining – Patio
☐ Dining – Sidewalk (*DPW permit required*)
☐ Storage
☐ Other, specify

Seating provided on site for dining? ☐ Yes ☐ No

If yes, what is the seating capacity both inside and outside?

If yes, are there additional banquet facilities other than the main dining area? ☐ Yes ☐ No

Total square footage of the establishment (exclude space utilized for other purposes other than food)

Annual Gross Food Sales: Sales Based on: ☐ Previous Year ☐ Previous Establishment ☐ Best Estimate

Note: *Inspector will request to review receipts periodically to validate if establishment has the appropriate license.*

Number of Full Time Employees Number of Part Time Employees

The following items must be included with a new application:

☐ Site Plan/Floor Plan: Site plan must identify the building in relation to streets, sidewalks, parking & garbage area.

☐ Shared Kitchen Agreement, if applicable: If not using your own establishment as your base, provide a written and signed commissary agreement. The agreement must include a list of all services provided by the commissary, such as restroom use, dry goods storage, use of refrigerator space (including the number of cubic feet of refrigeration space allocated to you), etc.

The following items must be submitted to inspector, prior to approval of inspection.

☐ Floor Plan: The plan must show the location of all equipment (sinks, refrigeration, stoves, ware-washing, etc.), plumbing, electrical services, mechanical ventilation, storage areas and restrooms. Plans must be a minimum of 11 X 14 inches in size including the layout of the floor plan accurately drawn to a minimum scale of ¼ inch = 1 foot. Plans may be submitted in an electronic format.

☐ Equipment List: Provide the make and model number of all significant equipment (cooking, cooling, warewashing, etc.) All food equipment must be ANSI/NSF certified. No home-style equipment is allowed. Equipment specification sheets do not have to be provided at the time of submission, but must be provided upon Health Department request

☐ Finish Materials List: Provide a list of all finish materials (floors, walls, ceilings, counter tops). Surfaces must be smooth, nonabsorbent and easily cleanable, and ceramic, porcelain or quarry tile must have set in base cove.

☐ Lighting Plan: Provide a list of all light fixtures to be used in the food establishment. All light used in any food prep or storage areas must be shielded or covered and flush or integral to the ceiling. Lighting in food preparation area must meet minimum illumination standards defined in the WI Food Code.

☐ Pest Management Plan: Describe the establishments integrated pest management plan. Describe strategies to prevent pest entry into the food establishment & harborage of pests Identify if a licensed pest control service has been contracted, provide the name of the company and frequency of service.

3. Construction, Renovations, Kitchen Equipment Changes or Remodeling

Any construction, remodeling or equipment changes planned**?** ☐ Yes ☐ No If no, skip to section 4.

Scope of the planned project?

☐ New construction or conversion of an existing structure to be used as a food establishment
☐ Renovation/remodeling impacting 300ft^2 or more than of food preparation or display area
☐ Renovation/remodeling impacting less than 300ft^{2}of food preparation or display area
☐ Renovation/remodeling limited to the instillation/change/replacement of food equipment

Provide a brief summary of the proposed construction, remodeling and/or equipment change:

Note: Building permits may be required, contact the Department of Neighborhood Services

Date alterations/changes planned to begin _____

Contact information for general contractor _____

Contact information for architect _____

4. BUSINESS TYPE

Overall Establishment Type (*select the one that best describes the proposed business*)

☐ Bed and Breakfast
☐ Commissary or Mobile Food Peddler Base – a commercial kitchen used for the production of food to be served or sold at another location; a base of operations for a mobile food peddler where the vehicle, cart or unit which is used at a minimum for the service or cleaning of the peddler vehicle, cart or container. A base of operations for a caterer or seasonal market vendor for the preparation of food.
☐ Community Food Program – free meal site or food pantry. Any site in which all food is provided free of cost to those in need or to organizations who serve person's in need.
☐ Distiller or Brewer – facilities that are primarily engaged in the production of alcoholic beverages
☐ Food Distributor – a business that transports food for sale to retail and wholesale establishments and does not perform any processing or repacking of food items

Is food stored on site ☐ Yes ☐ No

☐ Food Manufacturer - commercial operation that produces, packages, labels, or stores food for human consumption, but primarily does not provide food directly to a consumer, food is sole to distributors, retailers or restaurants, there may be a small store on site where only the manufacturers products are sold, but the majority of product is sold to other licensed food establishments

Is there a retail store onsite? ☐ Yes ☐ No

☐ Food Store – a food establishment either mobile or permanent in which the majority of food sales consist of beverages or multi-serving food products requiring further preparation prior to consumption, examples of food stores include bakeries, grocery stores, convenience stores, coffee shops, liquor stores. Food stores include business whose primary business is other than food, but offer convenience food items.

Are you considered a convenience food store? ☐ Yes ☐ No

A convenience food store contains less than 5,000 sq ft of retail sales space AND has as its primary business the sale of basic food items and in addition sells household products. Basic food items may include, but are not limited to, milk and dairy products, bread products, prepared sandwiches, frozen entrees, refrigerated food and baby food. Household products may include, but are not limited to, cleaning products, paper products, baby products and pet food

☐ School – educational institution including elementary, middle and high schools, technical schools, colleges and university, where food service is limited to students (no sales to faculty or general public)
☐ Restaurant – a food establishment either mobile or permanent in which the majority food sales consist of meals

5. FOOD OPERATION SCOPE

Type of Sales (*check all that apply, even if it reflects a small percentage of the proposed business*)

☐ Made directly to the general public or end consumer (includes internet sales)
☐ Made to other food establishments (wholesaler, distributors, retail or restaurants) who will resell your product(s)

What percentage of your planned food sales will be meals versus grocery items?

☐ % from meals (ready–to–eat food sold to in single portions)
☐ % from grocery items (multi-serving food products, typically requiring preparation before serving, includes beverages, bakery items and raw produce)

Will 25% or more of your sales be to highly susceptible populations (defined as persons with medical conditions, elderly, or preschool age children)?
☐ Yes ☐ No

Will customers be able to purchase food through a drive through? ☐ Yes ☐ No

Will customers be able to purchase food from a self-service salad or food bar? ☐ Yes ☐ No

Will food be prepared on site and then transported for sale or consumption at another location? ☐ Yes ☐ No

If yes, check all the reason why the food will be transported

☐ Catering ☐ Delivery ☐ Base for Mobile Food Peddler ☐ Base for temporary or seasonal food stand

☐Other, specify

6. FOOD, FOOD PREPERATION, FOOD PROCESSING

For restaurants provide a copy of the proposed menu or a detailed menu of all the foods and drinks you will be serving.
For all other establishments provide a summary below of the brief types of food products being sold.

Will any potentially hazardous food (food that requires temperature control) be offered for sale? ☐ Yes ☐ No
Examples of potentially hazardous foods are meats, dairy, poultry, eggs, cut tomatoes or leafy greens, cut melons, cooked rice, beans or potatoes, or garlic in oil.

Will food be prepared or processed on site? ☐ Yes ☐ No
Examples of processing are assembling, grinding, cutting, mixing, baking, grilling, frying, coating, stuffing, packing, bottling, packaging, canning, extracting, fermenting, distilling, pickling, freezing, drying, smoking.

If yes, indicate the type of food processing that will be conducted:

If performing processing, will there be any processing of potentially hazardous food? ☐Yes ☐No

7. WEIGHTS AND MEASURES

Will any items be offered for sale by weight or by volume? ☐ Yes ☐ No

If yes, describe number and type of devices used:

A separate weights and measures license is required for each scale.

Will electronic scanning devices be used for pricing/check out? ☐ Yes ☐ No

If yes, how many devices will be used

A scanner license is required if using an electronic scanning device.

8. LITTER/GARBAGE/NOISE

What are your plans to keep the grounds clean (check all that apply):

☐ Sweep	☐ Pressure Wash	☐ Pick Up Litter
☐ Hired Maintenance	☐ Building Owner's Responsibility	☐ Garbage Cans Outside
☐ Other		

Who is responsible to keep the grounds clean?

☐ Licensee	☐ Building Owner	☐ Employees
☐ Hired Maintenance	☐ Other	

How often will the grounds be cleaned?

☐ Daily	☐ Weekly	☐ Other

How are noise issues addressed (check all that apply):

☐ Security	☐ Manager approaches customer(s)	☐ Call police
☐ Signs posted	☐ Other	

Do you purchase, sell or exchange any secondhand articles of personal property (including used cell phones)?
☐ **NO** ☐ **YES IF YES, YOU MUST ALSO APPLY FOR A SECONDHAND DEALER LICENSE.**

9. HOURS OF OPERATION

Day of the Week	Proposed Hours of Operation (include a.m. or p.m.) (if closed on any days, write "closed")		Number of Customers expected each day	Drive Thru Hours (if not applicable, write "n/a")	
	Open	Close		Open	Close
Sunday					
Monday					
Tuesday					
Wednesday					
Thursday					
Friday					
Saturday					

10. ISSUANCE OF LICENSE

Will any alcohol or intoxicating beverages be sold at the establishment? ☐ Yes ☐ No

If yes, what type of license do you have or will you be applying for (check all that apply)?

☐ Class A fermented malt beverage licenses
☐ Class A liquor licenses
☐ Class B fermented malt beverage licenses
☐ Class B liquor licenses
☐ Class C wine licenses

If yes, if your food license is approved prior to the alcohol license, would you like the food license issued (check one)
☐ immediately so you can open your food business ☐ at the same time as the alcohol license

SUBMIT THIS FORM ALONG WITH THE "BUSINESS LICENSE APPLICATION"

AGREEMENT RELATING TO STORAGE OF FOOD IN A PRIVATE RESIDENCE

Must be completed if you are stocking vending machines or are a food distributor using a private residence as your business address.

Food storage by a vending machine owner or distributor in a private residence is limited as follows.

NOTE: No other food dealers may store food in a private residence.

1. Prior to issuance of a license, the storage area must be inspected and in compliance with the following:

A. Food storage in the home must be limited to commercially packaged, non-potentially hazardous snack foods such as gums candies, and chips.

B. All food must be stored in its original container. There can be no storage of unwrapped bulk food products or removal of product from its original package for repackaging of any kind.

C. No food can be stored in any room used as living or sleeping quarters. Food storage must be in a separate room, used exclusively for food storage. No other non-food items can be stored in this room. The room must also be equipped with a tight-fitting, self-closing door. No pets are to be kept or allowed in the food storage area.

D. No food can be stored in a garage or other buildings outside the dwelling unit.

E. Foods must be stored off the floor and away from the wall in rodent/insect proof containers (i.e., plastic or metal containers with tight-fitting lids).

F. There shall be no sales made in or around the dwelling unit.

G. This approval is only applicable to vending machine owners, peddlers, and distributors without retail operations or warehouses, and storage is limited to what can be sold in a week's time.

H. Operator must agree to unannounced annual inspection of the storage area by the Milwaukee Health Department as a condition of licensing. Violation of any of the above requirements is grounds for denial or revocation of a license.

I. Operator must have a Statement of Home Occupation on file with the Department of Building Inspection.

J. Vehicles used in transporting foods are also subject to inspection and approval by the Health Department.

K. No food can be stored in an attic unless the attic is properly finished and ventilated.

I have read and agree to the above as a condition of licensing.

Operator's Signature: _____

2. In lieu of storage of food in my home, I will purchase product from an approved source as I need it for same day distribution without the storing of excess product.

I have read and agree to the above as a condition of licensing.

Operator's Signature: _____

Affirmation of Understanding – Permit Needed to Operate

ALL NEW APPLICANTS – PLEASE READ <u>AND INITIAL</u> EACH ITEM CONFIRMING YOUR UNDERSTANDING:

1. _____ I understand that an inspection and sign off by the Health Department is required before my permit may be issued.
2. _____ I understand that an occupancy permit must be issued and an inspection may be required from the Department of Neighborhood Services before my permit may be issued.
3. _____ I understand that the Department of Neighborhood Services must sign off on my application with the License Division before my permit may be issued.
4. _____ I understand the local council member must approve or deny my request before my permit is eligible to be issued. If denied, I understand that I may be scheduled for a hearing before the License Committee of the Common Council.
5. _____ I understand that I must pay and the License Division must have proof of payment for the associated permit fees before my permit may be issued.
6. _____ I understand that all of the above must be complete before my permit is eligible to be issued.
7. _____ I understand that the license/permit for which I am applying must be issued and posted in my business premises prior to opening for business.

I, _____, will not operate my food business, until the permit has been issued and posted in the establishment.

Signature of Applicant: _____ Date: _____