



ALCOHOL BEVERAGE & FOOD ESTABLISHMENTS REQUEST TO CHANGE HOURS OF OPERATION, FLOOR PLAN, BUSINESS OPERATIONS AND/OR AGE RESTRICTION

OFFICE OF THE CITY CLERK LICENSE DIVISION
200 E. WELLS ST. ROOM 105, MILWAUKEE, WI 53202
(414) 286-2238 EMAIL: LICENSE@MILWAUKEE.GOV

Check License Type(s): Alcohol Beverage Food

Legal Entity Name (Individual, Partnership, Corporation or LLC): _____

Agent's Name (Corp/LLC): _____

Trade Name: _____

Business Address (include city/state/zip code): _____ Aldermanic District: _____

Mailing Address: Identify the address where all correspondence from the License Division should be sent. Check (✓) one:
 Same as Business Address above
 Same as Home Address as follows: _____ (include city/state/zip code)
 Other as follows: _____ (include city/state/zip code)

Business E-mail Address: _____ Business Phone Number: _____

REQUEST TO CHANGE HOURS OF OPERATION AS FOLLOWS:

Day of the Week	Current Hours of Operation:		Proposed Hours of Operation:		Number of Customers expected each day	Class B Taverns: Age Restriction for each day (if over 21) (This is optional) If none, write "none"
	Open	Close	Open	Close		
Sunday						
Monday						
Tuesday						
Wednesday						
Thursday						
Friday						
Saturday						

Prohibited Hours of Operation: Class A: 9:00 PM to 8:00 AM
 Class B/C: Monday thru Friday 2:00 AM – 6:00 AM; Class B/C: Saturday thru Sunday 2:30 AM – 6:00 AM
 Food: 12:00 AM to 5:00 AM (unless an Extended Hours license is also held)

Office Use Only:

Filed _____ Initials _____ Food App# _____ Alcohol App# _____

MPD (Alcohol) _____ LC _____ CC _____ License #s _____

REQUEST TO CHANGE FLOOR PLAN AS FOLLOWS:

New floor plan(s) must be submitted with this application.
(See next page for detailed floor plan instructions.)

**** This form should be used for changing the location of tables, games, etc. within your current licensed premises. If your changes include adding any additional areas or square footage to your premises, or any renovations to the building will be done, do NOT complete this form. A Permanent Extension of Premises is required.**

REQUEST TO CHANGE BUSINESS OPERATIONS AS FOLLOWS:

Current business operations: _____

Proposed change(s) to the business operations: _____

Besides the changes requested above, there are no further changes. The current plan of operation (including floor plan) will be followed. I understand any changes to the plan of operation (including floor plan) need to be requested and approved before implementing.

Subscribed and sworn to before me
this ____ day of _____, 20____

Print Name of Individual, Partner, Agent, or 20% or more Shareholder

Notary Public, State of Wisconsin
My commission expires: _____
[Notary Seal must be affixed](#)

Signature of Individual, Partner, Agent, or 20% or more Shareholder

Warning: Penalty provided for submitting false statements and affidavits with this application.

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. This includes the basement even if it used only for storage.
- Handwritten plans are acceptable.
- Plans do not need to be architectural drawings and need not be to scale.

ALL FLOOR PLAN MUST INCLUDE THE FOLLOWING:

1. Dimensions of the premises (length x width) and
 Total square feet of the premises
2. Label all entrances and exits
3. Show building/licensed premises in relation to surrounding streets and
 Provide street names
4. 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.
5. Label all seating areas, food preparation areas and bars (as applicable)
6. Mark the North point (N↑) on each page
7. Write the date on each page
8. Write the legal entity name (and agent's name if a corporation or LLC) on each page
9. Write the trade (business) name on each page
10. Write the premise address on each page
11. Label all trash cans inside and outside of the premises
12. Label all outdoor areas used for the sale or service of alcohol beverages and/or food (for example, patios, beer gardens, sidewalk cafes and decks) and
 Provide the dimensions (length x width) of all outdoor areas used for the sale and service of alcohol beverages and/or food.

ALCOHOL APPLICANTS ONLY:

1. Label all alcohol storage areas (coolers, etc.) and
 Provide dimensions (length x width) of the alcohol storage areas
2. Label all alcohol display areas (behind the bar, shelves, etc.) and
 Provide dimensions (length x width) of the alcohol display areas

FILLING STATION APPLICANTS ONLY:

1. Label all gas pumps