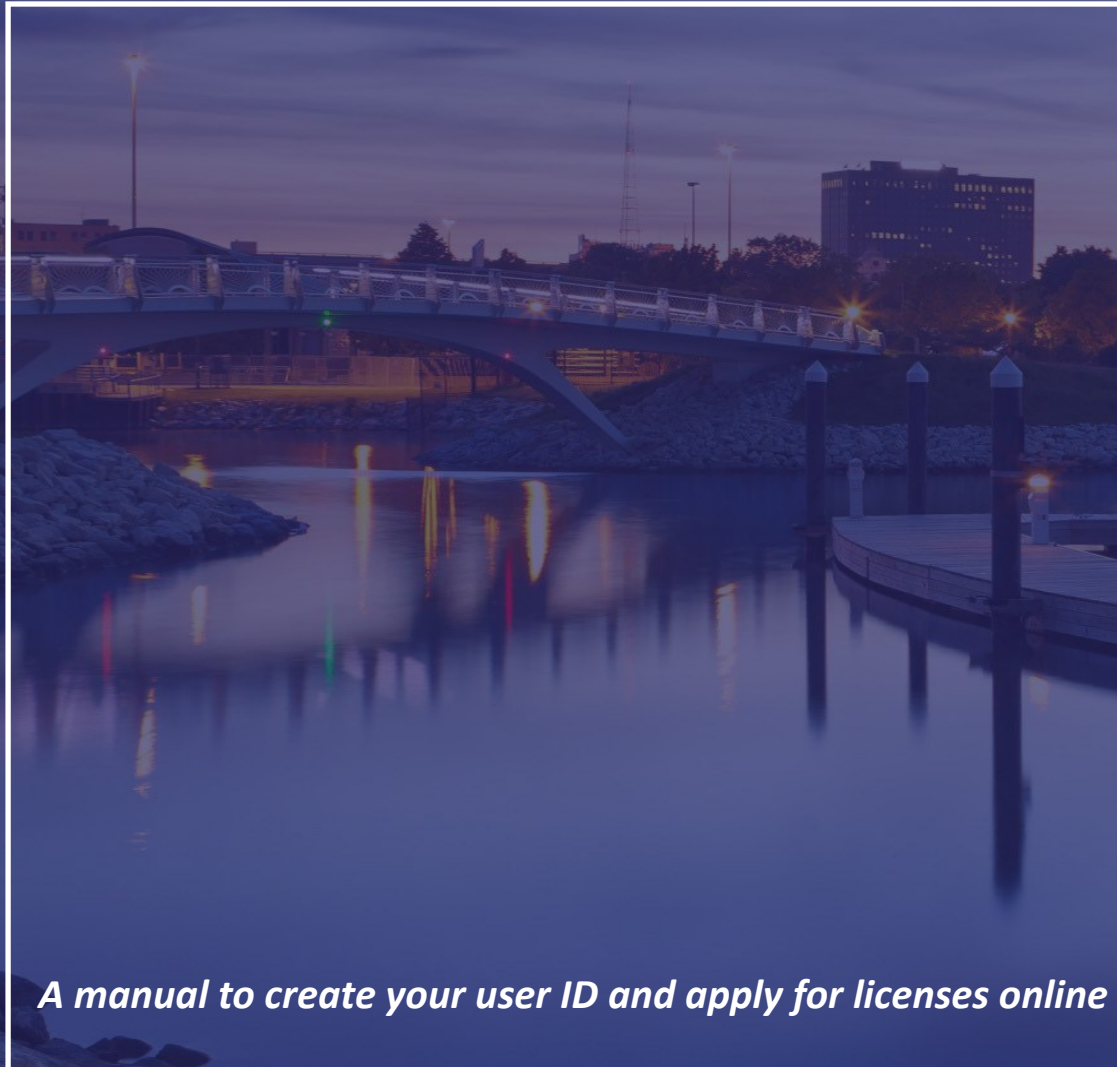




A manual to create your user ID and apply for licenses online

City of Milwaukee
License Division

Form
USERGUIDE



Applying Online is easy, convenient, and quick

Go to www.milwaukee.gov/lms to log in or create an account

Official Website of the City of Milwaukee

CALL for Action (414) 286-CITY | Click for Services

Directory Residents Business Visitors

Online Services

Announcements Accessibility Support Register for an Account Login

For all permit fees and submittal information, please see our Info Sheets page.
<https://city.milwaukee.gov/DNS/permits/DNSinfo>

Search...

Home Building Development Enforcement Licenses Public Works

Advanced Search

In response to the COVID-19 pandemic, many City offices currently have limited hours or are closed for walk-in services to prevent the spread of the virus. Please check the website for department updates to schedules and services. Please allow for additional time for City services to occur as City staff respond to developments.

COVID-19 UPDATE: All permitted work in the Public Way related to Essential Infrastructure and Essential Businesses and Operations will be required to follow the State of Wisconsin "Safer at Home" order and the City of Milwaukee "Stay-at-Home" Requirements. All entities shall meet Social Distancing Requirements between all individuals on the premises to the extent possible. If work within the right of way is found non-compliant with the State and City orders, the City will have the right to stop work and revoke any permit effective immediately.

We are pleased to offer our citizens, businesses, and visitors access to government services online, 24 hours a day, 7 days a week. [Contact Us](#)

Features Include:

- Schedule inspections online
- Review the record status and inspections results online
- Upload drawings, correspondence, photos and plans electronically
- Pay online after all regulatory or reviews have been met

Login

User Name or E-mail:

Password:

Login »

☐ Remember me on this computer

[New Users: Register for an Account](#)

PLEASE NOTE: Users are NOT required to log in to search records.

Current users login

Create a new account

HOW TO CREATE AN ACCOUNT

1

Read and accept the *Disclaimer of Liability*;

Online Services

Announcements

For all permit fees and submittal information, please see our Info Sheets page.
<https://city.milwaukee.gov/DNS/permits/DNSinfo>

Home Building Development Enforcement Licenses Public Works

Advanced Search ▾

Account Registration

You will be asked to provide the following information to open an account:

- Choose a user name and password
- Personal and Contact Information
- License Numbers if you are registering as a licensed professional (optional)

Please review and accept the terms below to proceed.

Disclaimer of Liability

The City of Milwaukee makes information available on its web site to enhance public knowledge and promote a better understanding of the City and its government. The City attempts to provide accurate, complete, and timely information. The City, however, cannot guarantee the quality, content, accuracy, or completeness of the information, text, graphics, links, and other items contained on its web pages because the material comes from a variety of sources, collected and maintained for different purposes. The City also retains the right to change any content on its web site without prior notice.

☒ I agree to the

[Continue Registration >](#)

*** Required Fields**

USER NAME: *

Must enter a User Name:

E-MAIL ADDRESS: *

Must enter a E-mail Address:

PASSWORD: *

Must enter a Password:

TYPE PASSWORD AGAIN: *

Must enter a Type Password Again:

ENTER SECURITY QUESTION: *

Select

Must enter a Enter Security Question:

ANSWER: *

Must enter a Answer:

☐ I have read, understand, and agree to the [Terms of Service](#)

[CONTINUE](#)

Select Contact Type

STEP 2 OF 2: CONTACT DETAILS

☒ Applicant

☐ Individual

☐ Operator

*** Required Fields**

FIRST: *

MIDDLE:

LAST: *

NAME OF BUSINESS:

WORK PHONE:

MOBILE PHONE:

2

proceed to enter your account information under “Login information”; then select “Applicant” and complete the following “Contact Information” prompts.

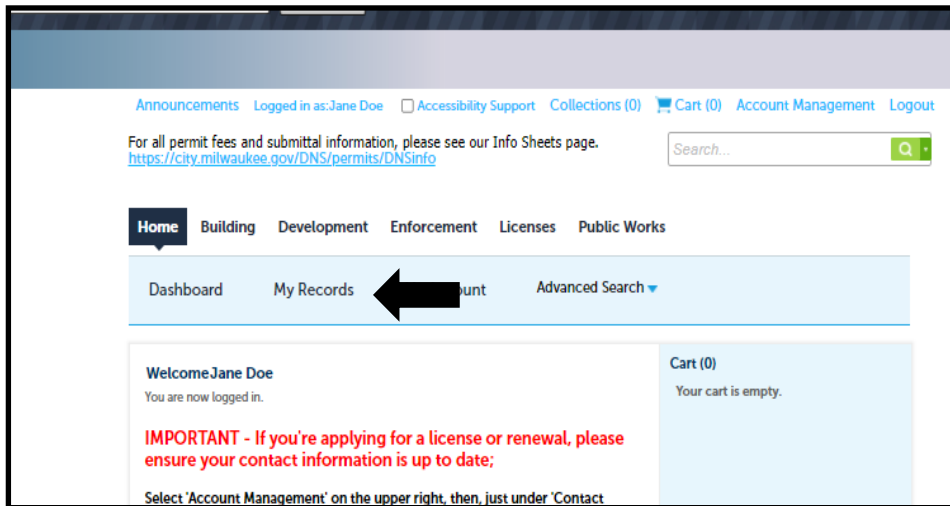
3

Your account is now set up. You can access it using the Login Form at www.milwaukee.gov/lms.

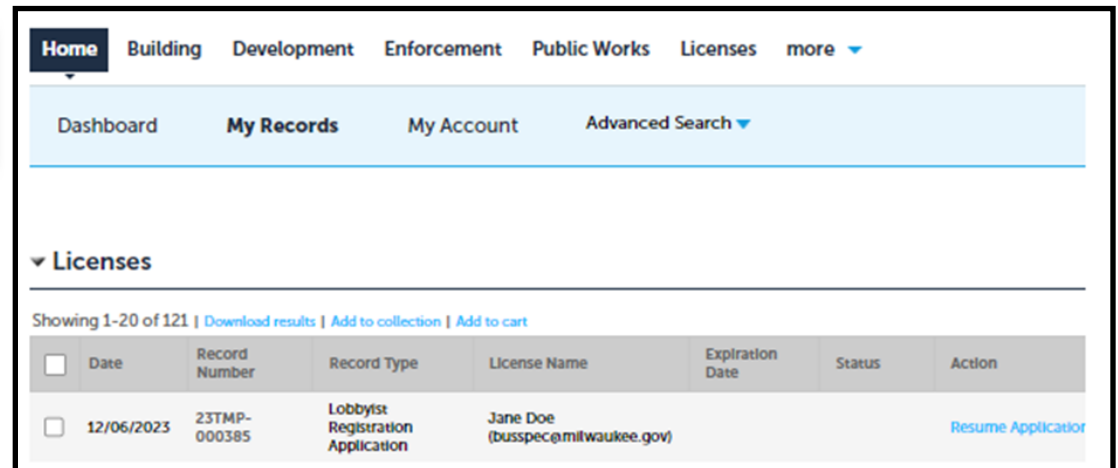
You can review your account information on the home tab once you log in.

HOW TO CHECK MY RECORD AND PROGRESS

On the home tab, select “My Records”. Then, select the Licenses drop-down, which will show current license applications and the status



The “Status” will change upon license approval, denial, or nonrenewal.



***Class B Beer
Business License Application***



How to Apply for a Class B Beer License

The screenshot shows the top navigation bar with 'Home', 'City Clerk' (highlighted with a red box), 'Building', 'Development', 'Enforcement', 'Licenses', and 'Public Works'. Below this is a secondary bar with 'Dashboard', 'My Records', 'My Account', and 'Advanced Search'. The main content area greets the user as 'Hello, licensetest'. It features two panels: 'Saved in Cart (0)' with a 'View Cart' button, and 'My Collection (0)' with a 'View Collections' button. Both panels contain the message 'There are no items in your shopping cart right now.' and 'You do not have any collections right now.' respectively. At the bottom, there is a 'Work in progress' section with a 'View All Records' button and a table with columns: Record Name, Record ID, Module, Creation Date, and Action. The first row shows 'Food Dealer'.

Review the Disclaimer of Liability. Once you have read the disclaimer, check the “I have read and accepted the above items” box, before selecting “Continue Application”.

Once your account is set up and you have logged-in, select “City Clerk” from the menu at the top of the page.

This screenshot shows the 'Licenses' menu item highlighted in the top navigation bar. Below it, a light blue bar contains the options 'Apply for a License' and 'Search Applications'.

Online Application

IMPORTANT - If you're applying for a license or renewal, please ensure your contact information is up to date;

Select 'Account Management' on the upper right, then, just under 'Contact Management', scroll to the right and select 'Action' then 'View'. Please then review and make any needed updates.

For additional license and renewal information, please visit the City Clerk site via [right clicking here](#), and opening in a new tab.

Welcome to the City of Milwaukee's Online Permitting System. Using this system you can submit and update information, pay fees, schedule inspections, track the status of your application, and print your final record all from the convenience of your home or office, 24 hours a day.

Please "Allow Pop-ups from This Site" before proceeding. You must accept the General Disclaimer below before beginning your application.

The screenshot shows a scrollable text box titled 'Disclaimer of Liability'. The text states: 'The City of Milwaukee makes information available on its web site to enhance public knowledge and promote a better understanding of the City and its government. The City attempts to provide accurate, complete, and timely information. The City, however, cannot guarantee the quality, content, accuracy, or completeness of the information, text, graphics, links, and other items contained on its web pages because the material comes from a variety of sources, collected and maintained for different'.

☒ I have read and accepted the above terms.

[Continue Application »](#)

How to Apply for a Class B Tavern License

To select the correct license application, either use the search bar and type “Class B Fermented Malt Beverage” or select “Liquor Business License Applications” and select the Class B Fermented Malt Beverage License Application.

Select a Record Type

Choose one of the following available record types. For assistance or help, click on the question mark icon.



▼ LIQUOR BUSINESS LICENSE APPLICATIONS

- ☐ Class A Fermented Malt Beverages Retailers License Application
- ☐ Class A Liquor and Malt Retailer License Application
- ☐ Class A Liquor Retailer License Application
- ☒ Class B Fermented Malt Beverage Application
- ☐ Class B Tavern License Application
- ☐ Class C Wine License Application

▼ Permits

- ☐ Class B Special Fermentation Malt Beverage Liquor Application

[Continue Application »](#)

Once you find the application, select continue application.

BUSINESS LICENSE INFO—CONTACT INFO

In the Business Contact Info section, first add the Business Entity. If this is a new business, select “Add New”. If it is a renewal, select “Look Up” and search for your business.

Business Entity

If filing as a Sole Proprietor

1. Add yourself as the Business Entity with Contact Information for your Business
 - Select sole proprietor
 - Select Occupancy Type from the list
2. Add yourself as the Agent-Sole Proprietor-1st Partner with Contact Information

If filing as a Partnership

1. Add yourself and all partners with contact information as the Business Entity
2. provide name/contact information for the first partner as Agent-Sole Proprietor-1st Partner
3. provide name/contact information for additional partner-shareholders
4. Occupancy Permit Status: Select appropriate item from the list. All partners must sign.

If filing as a Corporation or Limited Liability Company

1. Select LLC or Corporation, the legal entity name is the LLC or Corporation, provide business name and contact information as the Business Entity
2. provide name and contact information for the agent (also include percent of ownership interest if agent is also a shareholder)
3. provide the name and contact information for all Business shareholders that own 20% or more ownership interest
4. Occupancy Permit Status: Select appropriate item from the list. Two 20% or more shareholders must sign. If there are no 20% or more shareholders, a corporate officer must print their name and title and sign.

Select from Account

Add New

Look Up

Bed and Breakfast Business License Application

Contact Information

* Legal Entity Name ? Milwaukee B&B Inc.

* Doing Business As (DBA) Milwaukee B&B

* Address Line 1 200 E Wells St

* City: Milwaukee * State: WI * Zip: 53202

* E-mail: samueltdawson@gmail.com * Business Phone: 414-555-5555

* Type of Ownership: Corporation

* Occupancy Permit Select one from the List: has been obtained

Reason Occupancy Permit is not needed:

Add the Business Entity information, including the Legal name as it is registered with the Wisconsin Department of Financial Institutions. Be sure to list the proper Ownership type, as well as provide the status of your occupancy permit.

BUSINESS LICENSE INFO—CONTACT INFO

Once the Business Entity Information is entered, scroll down to “Add Additional Contact Address” to add a mailing address.

Contact Information

* Occupancy Permit Select one from the List:

has been obtained

Reason Occupancy Permit is not needed:

Prior Name Information

Showing 0-0 of 0

First	Middle	Last	Title	Suffix
No records found.				

[Add a Row](#) [Edit Selected](#) [Delete Selected](#)

▼ Contact Addresses

[Add Additional Contact Address](#)

To edit a contact address, click the address link.
Required contact address type(s): Mailing

Showing 0-0 of 0

Address Type	Recipient	Address	Action
No records found.			

[Continue](#) [Clear](#) [Discard Changes](#)

Contact Address Information

* Address Type:

Mailing

* Address Line 1:

200 E Wells St

Address Line 2:

Address Line 3:

* City:

Milwaukee

State:

WI

* ZIP Code:

53202

Country/Region:

United States

[Save and Close](#)

[Save and Add Another](#)

[Clear](#)

[Discard Changes](#)

Contact Information

from the List:

has been obtained

Reason Occupancy Permit is not needed:

Prior Name Information

Showing 0-0 of 0

First	Middle	Last	Title	Suffix
No records found.				

[Add a Row](#) [Edit Selected](#) [Delete Selected](#)

▼ Contact Addresses

[Add Additional Contact Address](#)

To edit a contact address, click the address link.
Required contact address type(s): Mailing

✔ Contact address added successfully.

Showing 1-1 of 1

Address Type	Recipient	Address	Action
Mailing		200 E Wells St	Actions

[Continue](#)

[Clear](#)

[Discard Changes](#)

In the Contact Address Information, select “Mailing” under Address Type, complete the form, and select “Save and Close”. Review your information for accuracy and select “Continue”.

BUSINESS LICENSE INFO—CONTACT INFO

Next, add the Agent-SoleProprietor-1st Partner information. Click “Select from Account”, which will allow you to select your contact information. From here, select the proper ad-

Select Contact from Account

Select a contact to attach to this application.
If the contact has multiple addresses, you can select which to use in the next step.

For Business Entity please select an Organization from your account.
Showing 1-2 of 2

Category	Type	Name
☐ Associated Contact	Individual	Dawson's Tavern, Inc.
☒ Associated Contact	Individual	Sam Dawson

[Continue](#) [Discard Changes](#)

Contact Information

*First:

Sam

Middle:

*Last:

Dawson

*Address Line 1

200 E Wells St.

*City:

Milwaukee

*State:

WI

*Zip:

53202

Business Phone:

Mobile Phone:

E-mail:

samueldawson@gmail.com

*Birth Date:

12/04/1993

*Driver's License/State ID #

WDL123456789

*Issuing State:

WI

*Business Owner Title:

--Select--

*Percentage of Ownership:

Review and edit the Contact Information form. Be sure to select the correct title under “Business Owner Title”, such as Owner, Agent, Partner, etc., as well as the Percentage of Ownership.

Additional Agent & Shareholders

List any additional partner(s) or owner(s) with 20% or more interest as a “Business Shareholder”

[Select from Account](#)

[Add New](#)

[Look Up](#)

Showing 0-0 of 0

Full Name	Business Name	Contact Type	Work Phone	Fax	E-mail	Action
No records found.						

[Save and resume later](#)

If the business has multiple agents/shareholders who hold 20% or more interest in the business, you can add their information using the same process as previously in the “Additional Agent & Shareholders” Section. Once complete, select “Continue Application”.

BUSINESS LICENSE INFO—LOCATION INFORMATION

In this section, you will need to search for the premises of your business. Start by entering the street number and name in to the corresponding fields, before selecting search. Review the results and select the appropriate address, parcel, and associated owners. If correct, click the “Select” button. If incorrect results are presented, exit the pop up and select “Clear” before reentering the premises information.

Address

To search for an address, please enter the Street Number and Street Name, and then select Search. A broader search works best. Do not fill in all of the values. The system will return all matching values allowing you to select the appropriate one.

* Street No.:

Direction:

--Select--

* Street Name:

Street Type:

--Select--

Unit No.:

Unit Type:

--Select--

City:

State:

--Select--

Zip:

Search

Clear

Review the Address, Parcel, and Owner information for accuracy. If any information is inaccurate, either edit the fields or try searching the address again to ensure you selected the proper location. When you are ready to move forward, select “Continue Application”.

Address Search Result List

Addresses

Showing 1-10 of 20

Address	City	State	Zip
☒ 200 200 E WELLS ST, 103 103, 218292 9111, MILWAUKEE 3921261000 WI 532023510, 200 E WELLS ST 103, 3921261000	MILWAUKEE	WI	532023510
☐ 200 200 E WELLS ST, 103B 103B, 469824 9111, MILWAUKEE 3921261000 WI 532023510, 200 E WELLS ST 103B, 3921261000	MILWAUKEE	WI	532023510
☐ 200 200 E WELLS ST, 103P 103P, 469825 9111, MILWAUKEE 3921261000 WI 532023510, 200 E WELLS ST 103P, 3921261000	MILWAUKEE	WI	532023510

BUSINESS PLAN INFORMATION— Part 1

In this section, you will need to enter information about your business plan, including the Type of Business (such as drive thru, delivery, and/or dining room, previous experience, premises information, litter and noise management, and smoking and sanitation. Enter all information possible. Fields with red astericks are required fields, though all fields should be filled out if possible. When complete, select “Continue Application”.

Business Operations

BUSINESS OPERATIONS

* Do you have experience operating this type of business?: ☐ Yes ☐ No

* Proposed Opening Date: 

Describe your experience operating this type of business:


* Is this premise under construction?: ☐ Yes ☐ No

List estimated completion date for construction.: 

Is this a franchise?: ☐ Yes ☐ No

Is this premises currently licensed?: 

Is the current licensee operating? :

* Do you have future plans for other businesses, licenses or permits at this location?:  ☐ Yes ☐ No

Describe future plans for other licenses or permits:

Address if you have previously held an Extended Hours License in Milwaukee?: 

Previous held Extended Hours license: ☐ Yes ☐ No

Are other businesses operating in the same building: 

LITTER AND NOISE

Check all that apply to how you are going to manage Litter and Noise for the business

Are grounds Swept: ☒	Grounds cleaned by pressure wash: ☐
Is litter picked up: ☒	Grounds cleaned daily: ☒
Grounds cleaned weekly: ☐	Grounds cleaned as needed: ☐
Grounds cleaned Monthly: ☐	Grounds kept clean other method:
How often grounds cleaned other:	Grounds cleaned by Licensee: ☒
Grounds cleaned by Building Owner: ☐	Grounds cleaned by Employees: ☒
Grounds cleaned by Hired Maintenance: ☐	Grounds cleaned by Other:
How are noise issues prevented and/or addressed. Security?: ☐	Noise issues Manager approaches customer(s): ☒
Noise issues Call Police: ☐	Noise issues Signs Posted: ☒
Noise issues other:	Describe sound amplification system if used:

4. Smoking and Sanitation

SMOKING AND SANITATION

Are there designated outdoor smoking areas? If yes please describe.

* Are there designated outdoor smoking areas?: ☐ Yes ☒ No

Designated outdoor smoking areas: 

* Number of Garbage Cans Inside:

* Inside garbage can locations:

* Number of Garbage Cans Outside:

* Outside garbage can locations:

* Describe if a crowd control barrier is used, if not then enter None:

* How many restrooms are on the premises?:

* Name of solid waste contractor: 

List Other waste contractor:

Save and resume later

Continue Application »

BUSINESS PLAN INFORMATION— Part 2

In the next portion of the Business Plan Info section, you will be asked to provide information about parking, security personnel and cameras, sales percentage, and existing licenses on the premise.

1 Info 2 Information 3 Food/Beverage 4 Documentation 5 Inventory 6 Licenses 7 Other

Step 2: Business Plan Information > Business Plan Info - Part 2

* indicates a required field.

5. Security

SECURITY

* Are there onsite parking spaces?:

☒ Yes ☐ No

REQUIRED

* Number of onsite parking spaces:

5

REQUIRED

* description of onsite parking security plan:

All spaces are in view of security cameras.

spell check

* Is there a loading zone? if not then enter None or if so please describe:

None

* Security personnel on premise:

☐ Yes ☒ No

Number of security personnel:

Security personnel responsibilities:

If security equipment is used please describe, otherwise enter None.:

Security personnel licensing, certification or training credentials:

* Will there be security cameras?:

☒ Yes ☐ No

REQUIRED

* Number of Security cameras:

3

REQUIRED

* Locations of security cameras:

Two inside, one outside

Describe searches/identification checks if done upon entry?:

6. Percentage of Sales

PERCENTAGE OF SALES

Showing 0-0 of 0

PERCENTAGE OF SALES (must total 100)	Percentage (such as 25 is 25%)	Description
No records found.		
Add a Row Edit Selected Delete Selected		

To add information about sales, select “Add a Row”. In new window, first select the product type, such as “Food”, and then add the percentage and a description, and select “Submit”. Repeat until your sales reach 100 %.

PERCENTAGE OF SALES

PERCENTAGE OF SALES (must total 100%):

Alcohol

Percentage (in decimals such as .25 is 25%):

95

Description:

Submit

Cancel

If there is an issue with your entries, you can easily edit the entry by selecting the Actions menu next to the entry and select either edit or delete.

PERCENTAGE OF SALES

Showing 1-1 of 1

☐	PERCENTAGE OF SALES (must total 100%)	Percentage (in decimals such as .25 is 25%)	Description	Actions
☐	Alcohol	95		Edit Delete
Add a Row Edit Selected Delete Selected				

BUSINESS PLAN INFORMATION— Part 2

Next, review the lists of business types, and existing licenses or permits and mark any that are currently active at the business premises.

Type 1 - Business/Licenses

TYPE 1 - BUSINESS

Existing Business License on the premises - Check all that apply

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

Type 2 - Business/Licenses

TYPE 2 - BUSINESS

What other licenses/permits will you hold at this location?

Used Car Dealer:	☐	Corner Store:
Amusement/Phonograph Distributor:	☐	Supermarket:
Personal Service Establishment (such as tattoo business, hair salon, tailor, etc.):	☐	Convenience Store:
Recycling, Salvage or Towing:	☐	Recording Studio:

License or Permits

EXISTING LICENSE OR PERMITS

What other licenses/permits do you already hold or will hold at this location? (check all that apply)

Center for Performing and Visual Arts:	☐	Cigarette & Tobacco:
Extended Hours:	☐	Food Peddler:
Food Retail:	☐	Food Restaurant:
Hotel:	☐	Loading Zone:
Parking Lot:	☐	Public Entertainment:
Sidewalk Dining:	☐	Weights & Measures:

BUSINESS PLAN INFORMATION— Part 3

In the Premises Description section, you are asked to add information about the premises, including the areas used in operating the business, and owner information.

PREMISES DESCRIPTION

Identify all areas used in operating the business. Check all that apply for Location, Building, Premises and Surroundings.

* Describe areas used in operating this business:

First floor; basement

Describe Building:

? Free Standing

Describe Building Other:

Describe Premises Structure:

? Multi Story

Number of Stories:

7

Describe Premises Structure Other:

Describe Surrounding Area:

Commercial

Describe Surrounding Area Other:

* Building Owner Name:

Owner Name

* Building Owner Phone Number:

4145555555

* Building Owner Address:

500 E Wells St

In Hours of Operations you can add your business hours and customer restriction information. To do this, select all the days of the week, and click “Edit Selected”.

11. Hours of Operation and Customers

HOURS OF OPERATION & CUSTOMERS

Edit the below Hours of Operation to reflect when you will Open and Close for business. If you open and close multiple times a day (e.g. 8am - 11am, 1pm - 4pm, enter the earliest and latest times (e.g. 8am - 4pm). If you are not open on any given day, select “Closed” for that day.



Required forms have not been completed in the section below. For each of the indicated rows, please click Edit from the Actions drop-down menu to complete the form.

Showing 1-7 of 7

☒	Day of the Week	Closed	Open Time (include am or pm)	Close Time (include am or pm)	
☒	Monday				Actions ▾
☒	Tuesday				Actions ▾
☒	Wednesday				Actions ▾
☒	Thursday				Actions ▾
☒	Friday				Actions ▾
☒	Saturday				Actions ▾
☒	Sunday				Actions ▾

Add a Row ▾

Edit Selected

Delete Selected

HOURS OF OPERATION & CUSTOMERS

Edit the below Hours of Operation to reflect when you will Open and Close for business. If you open and close multiple times a day (e.g. 8am - 11am, 1pm - 4pm, enter the earliest and latest times (e.g. 8am - 4pm). If you are not open on any given day, select “Closed” for that day.

Day of the Week:

Monday

* Closed:

☒ Yes ☐ No

Open Time (include am or pm):

Close Time (include am or pm):

Day of the Week:

Tuesday

* Closed:

☐ Yes ☒ No

Open Time (include am or pm):

8am

Close Time (include am or pm):

10pm

Day of the Week:

Wednesday

* Closed:

☐ Yes ☒ No

Open Time (include am or pm):

8am

In the new window, go day-by-day, entering the hours (or if closed select “Yes” in the “Closed” prompt”) . Once complete, select “Submit” before continuing the application.

Alcohol Beverage Retail App—Application Details

Review the prompts for the Alcohol Application Information, Responsible Server Course, Business Information, and Property Information sections. If you are leasing your business space, you will need to add information about your lease.

Alcohol Application Information

Premises Information

* Is the building within 300 feet of any church, school, daycare center or hospital?:

☐ Yes ☒ No

If applying for Class B or C license, are you applying for "Service Bar Only"? 

☐ Yes ☐ No

Applying for Hard Cider Only?:

☐ Yes ☐ No

Do you currently have a Class A Fermented Malt License?:

☐ Yes ☐ No

Responsible Server Course

RESPONSIBLE SERVER COURSE

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

Held a bartender's license or Class "B" Manager's License in state of Wisconsin?: 

☒ Yes ☐ No

Held a Class "A" or "B" Alcohol Beverage license in state of Wisconsin?: 

☒ Yes ☐ No

Completed a Responsible Beverage Server Training Course in state of Wisconsin?: 

☒ Yes ☐ No

BUSINESS INFORMATION

* Are you taking out this application for anyone that may not be eligible for a license?:

☐ Yes ☒ No

If Yes above list names and address:

* Will the agent, a partner or the individual licensee be conducting the day-to-day operations of the business?:

☒ Yes ☐ No

If No above list name and address of the person(s) who will:

* Does anyone else have money invested or any other interest in this business?:

☐ Yes ☒ No

Explain someone else has money or interest in the business:

* Have you made an agreement with anyone to repay any loan or any other payments based upon income from the business?:

☐ Yes ☒ No

If repaying loan or other payments from business income list names and address:

* Does the present owner or occupancy object to the granting of your license? :

☐ Yes ☒ No

Explain objection:

* FEIN:

FEIN123456789

* Wisconsin Seller's Permit Number:

WSP123456789

PROPERTY INFORMATION

(New and Transfer Applicants Only)

Do you own or lease the building?:

--Select-- 

* Who owns the fixtures (for example, coolers, etc.)?:

* Are you purchasing the stock and/or fixtures?:

☐ Yes ☐ No

If Yes \$ Amount paid for stock and or fixtures:

* Total amount paid for business:

Total amount paid for goodwill of the business:



Have you made arrangements with the seller for payment of personal property taxes?:

☐ Yes ☐ No

Alcohol Beverage Retail App—Addtl. Business Activity

Step 3: Alcohol Beverage Retail App>Addtl. Business Activity

* indicates a required field.

Custom Fields

BUSINESS ACTIVITY INFORMATION

Based on your business activity what other licenses/permits will you hold at this location? (select Yes to all that apply). Checking yes will allow this website to assist in the creation of supplemental license application that maybe required.

- Performing Arts: ☐ Yes ☒ No
- Cigarette & Tobacco: ☐ Yes ☒ No
- Extended Hours: ☐ Yes ☒ No
- Food Peddler: ☐ Yes ☒ No
- Food Retail: ☐ Yes ☒ No
- Food Restaurant: ☐ Yes ☒ No
- Hotel: ☐ Yes ☒ No
- Loading Zone: ☐ Yes ☒ No
- Parking Lot: ☐ Yes ☒ No
- Public Entertainment: ☐ Yes ☒ No
- Sidewalk Dining: ☐ Yes ☒ No
- Weights & Measures: ☒ Yes ☐ No

Save and resume later

[Continue Application »](#)

Review the list of common business license types that may be needed based on your plan of operation. Select “Yes” if you plan on including those activities, and you will be prompted to complete the appropriate supplemental application.

Step 3: Alcohol Beverage Retail App>Supplemental Forms

* indicates a required field.

Supplemental Forms

Supplemental Licenses

Showing 1-1 of 1

☐	Record Type	Application Type	Child Record ID	
☐	Weights & Measures Supplemental	Licenses/Business/Weights & Measures/Supplemental		Actions ▼
Add a Row ▼ Edit Selected Delete Selected				

Documentation—Attach Documentation

You will need to attach certain documents to your application in order for it to be completely processed. For a Class B Tavern License, you need to attach a Floor Plan. . If your business is an LLC or Corporation, you need to attach proof of DFI registration. You can use a photo of your articles of incorporation, or an image from the Wisconsin DFI Website with your registration information. To attach documents, select “Add”, and “Add” again in the pop-up window. Search your computer for the appropriate document(s) and select “Open”. Once uploaded, select “Continue”. Then, select the document type from the “Type” list, and add a brief description if application. Once complete, select “Save” before continuing the application.

Attachment

The maximum file size allowed is 100 MB.
ade;adp;bat;chm;cmd;com;cpl;exe;hta;htm;html;ins;isp;jar;js;jse;lib;lnk;mde;mht;mhtml;msc;msp;mst;php;pdf;scr;scs;shb;sys;vb;vbe;vbs;xld;xls;xlsx;wsf; are disallowed file types to upload.

Name	Type	Size	Latest Update	Action
No records found.				

Add

File Upload

The maximum file size allowed is 100 MB.
ade;adp;bat;chm;cmd;com;cpl;exe;hta;htm;html;ins;isp;jar;js;jse;lib;lnk;mde;mht;mhtml;msc;msp;mst;php;pdf;scr;scs;shb;sys;vb;vbe;vbs;xld;xls;xlsx;wsf; are disallowed file types to upload.

Floor Plan.pdf	100%
DFI Registration.pdf	100%

ContinueAddRemove AllCancel

* Type:

Plan - Floor Plan

Remove

File:

Floor Plan.pdf

100%

Description:

spell check

* Type:

DFI Registration

Remove

File:

DFI Registration.pdf

100%

Description:

spell check

SaveAddRemove All

REVIEW

In Step 5, you can review the entirety of the application. If you notice any incorrect information, you can simply select the “Edit” button next to that section and you will be taken to that portion of the application to make your edits.

Once you have reviewed the application and the information is accuracy, read the certification related to local ordinance and procedures, before checking the signature box and selecting continue application.

Step 5: Review

Save and resume later

Continue Application »

Please review all information below. Click the “Edit” buttons to make changes to sections or “Continue Application” to move on.

Record Type

Restaurant Food Dealer Business License Application

Business Entity

Edit

Test Restaurant Inc.
Test Restaurant
200 E Wells St
Milwaukee, WI, 53202

Business Phone: 414-555-5555
E-mail: testrest@gmail.com

Type of Ownership: Corporation
Occupancy Permit Select one from the List: has been obtained
Prior Name Information
No Custom Lists data for the sub group above.

Agent-Sole Proprietor-1st Partner

Edit

Individual
Sam Dawson
Birth Date: 12/04/1993
200 E Wells St
Milwaukee, WI, 53202
Business Owner Title: Owner
Percentage of Ownership: 100
Prior Name Information
No Custom Lists data for the sub group above.

E-mail: samueldawson@gmail.com
Driver's License/State ID # WDL123456789
Issuing State: WI

Additional Agent & Shareholders

Edit

Showing 0-0 of 0

Full Name	Business Name	Contact Type	Work Phone	Fax	E-mail	Action
No records found.						

Address

Edit

200 E WELLS ST
103
MILWAUKEE WI 532023510

Parcel

Edit

GRAPH NUMBER: 0072420001

17. Attach Documents

Edit

The maximum file size allowed is 100 MB.
ade;adp;bat;chm;cmd;com;cpl;exe;hta;htm;html;ins;isp;jar;js;jse;lib;lnk;mde;mhc;mhtml;msc;msh;msi;msp;msx;php;plf;scr;scs;shb;sys;vbe;vbs;vxd;wsc;wsf;
are disallowed file types to upload.

Name	Type	Size	Latest Update	Action
DFI.pdf	DFI Registration	129.96 KB	07/10/2024	Actions ▼
Floor Plan.pdf	Plan - Floor Plan	129.96 KB	07/10/2024	Actions ▼

I/we understand that I am/we are required to inform the City Clerk within 10 days of changes in any of the information supplied in this application.
I/we have knowledge of the City Ordinances currently regulating the license applied for herein, and understand that the license may be subject to suspension, non-renewal or revocation, if I/we violate any rule or regulation relating to this license.
I/we understand that I/we 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

☒ By checking this box, I agree to the above certification.

Date: 07/10/2024

Save and resume later

Continue Application »

SUPPLEMENTAL/RELATED APPLICATIONS

If you have any supplemental license applications to complete, you will be prompted to do so at this point. Select “Open” next to the application you wish to enter.

Record is not complete. Associated supplemental applications must be completed.

1	2	3	4 Documentation	5 Review	6 Associated Forms	7 Pay Fees	8 Record Issuance
---	---	---	-----------------	----------	--------------------	------------	-------------------

Step 6: Associated Forms

Associated Supplemental

Listed below are the items added to this record. You must fill out an associated supplemental for each item before this record can be submitted.

Added Items:

Public Entertainment Premises Business License Supplemental

[Open](#)

[Remove](#)

[Continue to Payment »](#)

[Save and resume later](#)

Once the supplemental application is completed, you will be returned to the Associated Forms page, when you will be prompted to “Continue to Payment”.

PAY FEES

In Step 7, you will be presented with the fees due at the time of application submission. Review the fees. If correct, select “Check Out”. If incorrect, review your application for any errors. If you are not ready to submit your application at this time, select “Defer Payment”.

1	2	3	4 Documentation	5 Review	6 Associated Forms	7 Pay Fees	8 Record Issuance
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Step 7: Pay Fees

Listed below are the preliminary fees based upon the information you've entered. The following screen will display your total fees.

Application/Renewal Fees

Fees	Qty.	Amount
Restaurant Food Dealer Business License Application		\$300.00
Business License Food Dealer Application Fee	1	\$300.00

[Recalculate](#)

TOTAL FEES: \$300.00

Note: This does not include additional fees which may be assessed later.

Listed below are conditions that will be applied once you submit your application. Note that these conditions must be resolved or met before your can get approval from the agency.

Conditions of Approval

Showing 1-1 of 1 | [Download results](#)

Restaurant Food Dealer Business License Application
Business Licensing - 1 Pending
Business Licensing
DFI Registration
Corporations require confirmation of the DFI Registration.

[Check Out »](#)

[Continue Shopping »](#)

[Defer Payment »](#)

You will be forwarded to your shopping Cart. Review the Cart contents. Once it is accurate, select “Checkout”. You will be forwarded to a payment page where you can enter your credit card or bank account information to process the payment. Once your information is entered, select “Submit Payment”.

Cart

1 Select item to pay	2 Payment information	3 Receipt/Record Issuance
----------------------	-----------------------	---------------------------

Step 1: Select item to pay

Click on the arrow in front of a row to display additional information. Items can be saved for a future checkout by clicking on the Save for later link.

Note: [Application Payment Receipt is not a valid Permit](#)

PAY NOW

200 E WELLS ST, 103, MILWAUKEE WI 532023510

2 Application(s) | \$300.00

▶ Restaurant Food Dealer Business License Application	Total due: \$300.00
24TMP-000429	
Public Entertainment Premises Business License Supplemental	Total due: \$0.00
24TMP-000431	

Total amount to be paid: \$300.00

Note: This does not include additional inspection fees which may be assessed later.

[Checkout »](#)

[Edit Cart »](#)

[Continue Shopping »](#)

RECEIPT/RECORD ISSUANCE

After your payment has been properly submitted, you will be issued records for your primary and supplemental applications and a receipt.

You can review your application records at any time by selecting “My Records” from the tool bar and selecting the appropriate application record from your list of licenses.

- 1 Select item to pay
- 2 Payment information
- 3 Receipt/Record issuance

Step 3: Receipt/Record issuance

Receipt



Your application(s) has been successfully submitted. Please print your record(s) and retain a copy for your records.
Note: Payment Receipt is not a valid Permit.

To view related records, click on the record number highlighted below and then click Record Info dropdown and select Related Records to view. Note that for Parking Meter Hood records, these will be reviewed prior to Issuance.

200 E WELLS ST, 103, MILWAUKEE WI 532023510

FREST-A24-00006



A notice was added to this record on 07/10/2024.
Condition: DFI Registration Severity: Notice
Total Conditions: 2 (Notice: 2)

[View additional details](#)

PEP-A24-00008

Home Building Development Enforcement Licenses Public Works more ▾

Dashboard **My Records** My Account Advanced Search ▾

▼ Licenses

Showing 1-20 of 47 | [Download results](#) | [Add to collection](#) | [Add to cart](#) | [Copy Record](#)

☐	Date	Record Number	Record Type	License Name	Expiration Date	Status	Action
☐	07/10/2024	FREST-A24-00006	Restaurant Food Dealer Business License Application			Open	
☐	07/10/2024	PEP-A24-00008	Public Entertainment Premises Business License Supplemental			Open	

REVIEWING YOUR RECORD

Once your application is submitted and the application fees are paid, you can check on the status of your record. If there are additional needs in order to proceed towards issuance. You can do things like pay additional fees after your health inspection, upload additional attachments, and see where your application is in the review process.

Record FREST-A24-00006:
Restaurant Food Dealer Business License Application
Record Status: Open

[Add to cart](#)
[Add to collection](#)
[Post](#)

Record Info ▾ Payments ▾ Conditions 2

Record Details
Processing Status
Related Records
Attachments
Inspections

Added to this record on 07/10/2024.
DFI Registration Severity: Notice
Conditions: 2 (Notice: 2)

Approval

Search...

[Hide Those Met](#)

T-A24-00006:
Food Dealer Business License Application
Status: Open

[Add to cart](#)
[Add to collection](#)
[Post](#)

Payments ▾ Conditions 2

ice was added to this record on 07/10/2024.
DFI Registration Severity: Notice
Conditions: 2 (Notice: 2)

[View Condition](#)

Fees

Outstanding:

Date	Invoice Number	Amount
07/10/2024	1358541	\$800.00
Total outstanding fees: \$800.00		

Paid:

Date	Invoice Number	Amount
07/10/2024	1358540	\$300.00
Total paid fees: \$300.00		

[Pay Fees](#)

LICENSE ISSUANCE

Home Building Development Enforcement Licenses Public Works more ▾

Dashboard **My Records** My Account Advanced Search ▾

▼ Licenses

Showing 1-20 of 47 | [Download results](#) | [Add to collection](#) | [Add to cart](#) | [Copy Record](#)

☐	Date	Record Number	Record Type	License Name	Expiration Date	Status	Action
☐	07/10/2024	FREST-00008	Restaurant Food Dealer Business License		07/10/2025	Active	Amendment

Record FREST-00008:
Restaurant Food Dealer Business License

Record Status: Active
Expiration Date: 07/10/2025

[Add to cart](#)
[Add to collection](#)

Record Info ▾ Payments ▾

Record Details

▼ More Details

- ☐ Related Contacts
- ☐ Application Information
- ☐ Application Information Table
- ☐ Parcel Information

Create Amendment

Once your license has been issued, you can review it the same way you reviewed the application, by selecting “My Records” on the tool bar and then selecting the appropriate license from your license list. In the License Record, you can see information from your application, as well as the status and expiration date. This is also where you can go to submit an amendment to your license, such as a change in in the plan of operation.

State Forms: DOCUSIGN

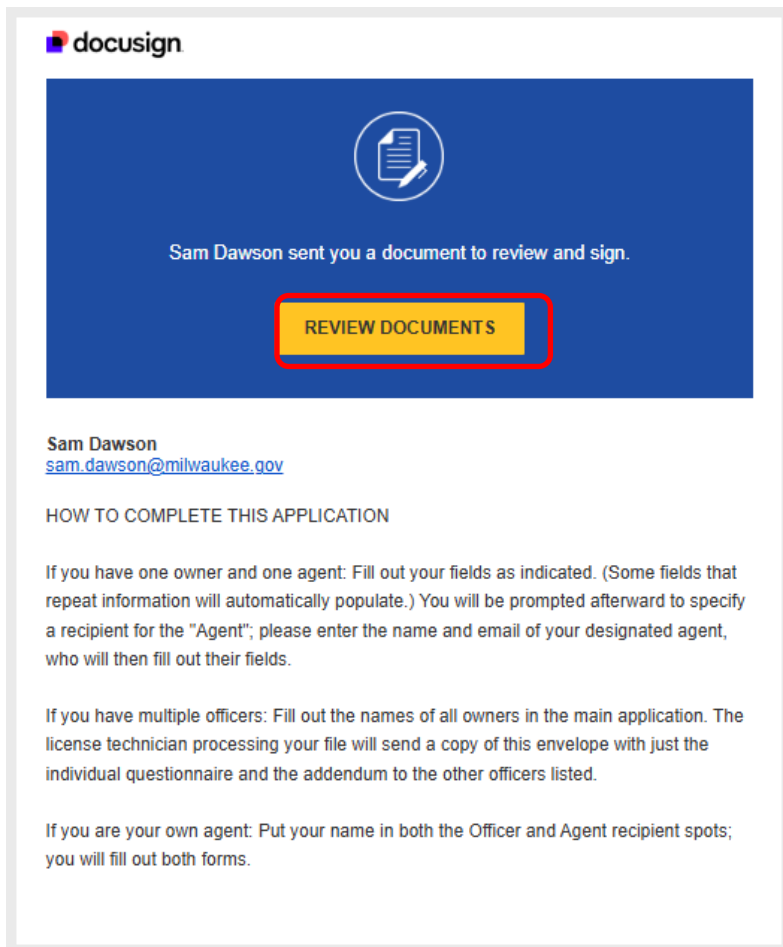
Alcohol beverage establishments are required to submit several state forms. Once your Class B Tavern License Application is submitted, a License Division specialist will share the following forms:

- **AB-200, Alcohol Beverage License Application:** completed by Officer, Sole Proprietor, General Partners, or LLC Member
- **AB-100, Alcohol Beverage Individual Questionnaire:** completed by sole proprietor OR all partners of a partnership OR all officers, the director, and the agent of a corporation or nonprofit organization OR members and agent of a limited liability company.
- **AB-101, Alcohol Beverage Appointment of Agent:** completed by sole proprietor OR officer, and the agent.

These forms are shared using DocuSign. When you receive a request to complete the form on DocuSign, follow the prompts to complete the necessary fields.

State Forms: AB-200

If you are a Office, Sole-Proprietor, or Partner, you may be assigned the AB-200 Alcohol Beverage License Application. If this is the case, you will received an email asking you to complete the form online using Docusign. On the email, select “Review Documents” which will open a new tab in your browser. Review and check the disclaimer, select “Continue” and when ready, select “Start” to begin completing the form.



docusign

Sam Dawson sent you a document to review and sign.

REVIEW DOCUMENTS

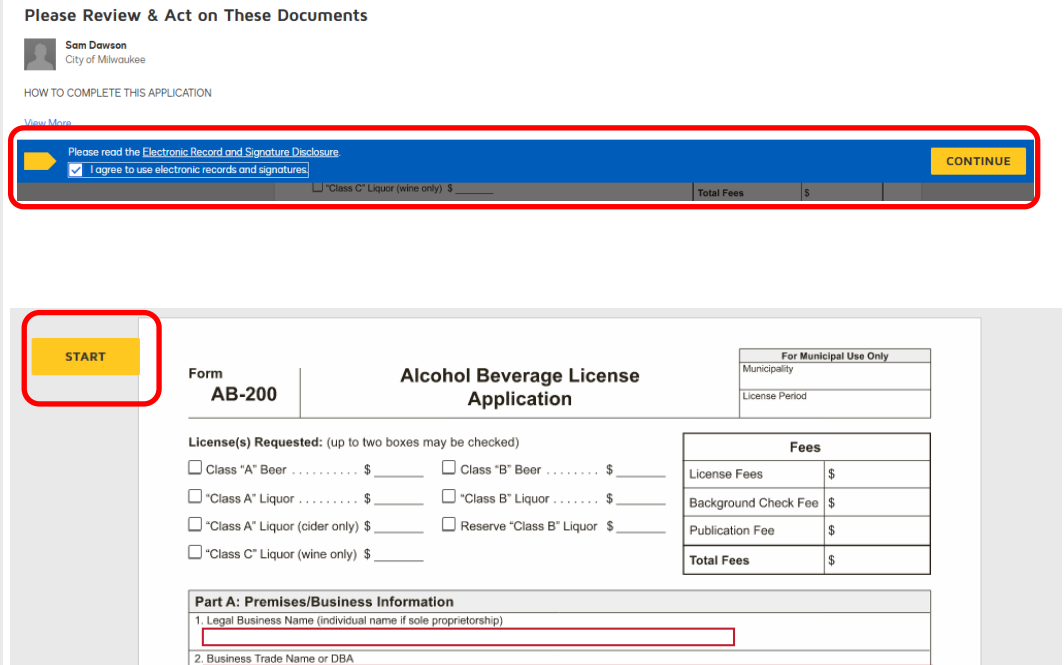
Sam Dawson
sam_dawson@milwaukee.gov

HOW TO COMPLETE THIS APPLICATION

If you have one owner and one agent: Fill out your fields as indicated. (Some fields that repeat information will automatically populate.) You will be prompted afterward to specify a recipient for the "Agent"; please enter the name and email of your designated agent, who will then fill out their fields.

If you have multiple officers: Fill out the names of all owners in the main application. The license technician processing your file will send a copy of this envelope with just the individual questionnaire and the addendum to the other officers listed.

If you are your own agent: Put your name in both the Officer and Agent recipient spots; you will fill out both forms.



Please Review & Act on These Documents

Sam Dawson
City of Milwaukee

HOW TO COMPLETE THIS APPLICATION

Please read the Electronic Record and Signature Disclosure

☒ I agree to use electronic records and signatures

CONTINUE

START

Form AB-200 Alcohol Beverage License Application

For Municipal Use Only

Municipality

License Period

License(s) Requested: (up to two boxes may be checked)

☐ Class "A" Beer \$ ☐ Class "B" Beer \$

☐ "Class A" Liquor \$ ☐ "Class B" Liquor \$

☐ "Class A" Liquor (cider only) \$ ☐ Reserve "Class B" Liquor \$

☐ "Class C" Liquor (wine only) \$

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

Part A: Premises/Business Information

1. Legal Business Name (individual name if sole proprietorship)

2. Business Trade Name or DBA

State Forms: AB-200

As you complete the form you will be required to enter information to necessary fields, and be given the opportunity to add information in non-required fields if those fields apply to your application. A yellow arrow will help guide you to which fields need to be completed. When you reach the end of the form, you are asked to provide a signature. Select the “Sign” button, which will open a signature module. Modify your electronic signature as necessary before selecting “Adopt & Sign” when it is ready.

Form AB-200 Alcohol Beverage License Application

For Municipal Use Only
Municipality
License Period

License(s) Requested: (up to two boxes may be checked)

☐ Class "A" Beer \$ ☐ Class "B" Beer \$
☐ "Class A" Liquor \$ ☐ "Class B" Liquor \$
☐ "Class A" Liquor (cider only) \$ ☐ Reserve "Class B" Liquor \$
☐ "Class C" Liquor (wine only) \$

Fees

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

Part A: Premises/Business Information

1. Legal Business Name (individual name if sole proprietorship)
2. Business Trade Name or DBA
3. FEIN
4. Wisconsin Seller's Permit Number
5. Entity Type (check one)
☐ Sole Proprietor ☐ Partnership ☐ Limited Liability Company ☐ Corporation ☐ Nonprofit Organization

Part D: Attestation

One of the following must sign and attest to this application:
• sole proprietor • one general partner of a partnership • one corporate officer • one member of an LLC

READ CAREFULLY BEFORE SIGNING: Under penalty of law, I have answered each of the above questions completely and truthfully. I agree that I am acting solely on behalf of the applicant business and not on behalf of any other individual or entity seeking the license. Further, I agree that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another individual or entity. I agree to operate this business according to the law, including but not limited to, purchasing alcohol beverages from state authorized wholesalers. I understand that lack of access to any portion of a licensed premises during inspection will be deemed a refusal to allow inspection. Such refusal is a misdemeanor and grounds for revocation of this license. I understand that any license issued contrary to Wis. Stat. Chapter 125 shall be void under penalty of state law. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Last Name First Name M.I.
Doe Jane M
Title Email Phone
Officer samueltdawson@gmail.com 4145555555
Signature Date
12/4/2024

Part E: For Clerk Use Only

Date Application Was Filed With Clerk	License Number	Date License Granted	Date License Issued
Signature of Clerk/Deputy Clerk		Date Provisional License Issued (if applicable)	

AB-200 (IN 03-24) - 2 -

Adopt Your Signature

Confirm your name, initials, and signature.

* Required

Full Name* Initials*
Jane Doe JD

SELECT STYLE **DRAW** **UPLOAD**

PREVIEW [Change Style](#)

Signed by: Initial
Jane Doe JD
CA0FFC1E6B99446...

By selecting Adopt and Sign, I agree that the signature and initials will be the electronic representation of my signature and initials for all purposes when I (or my agent) use them on documents, including legally binding contracts.

ADOPT AND SIGN **CANCEL**

According to the law, including but not limited to, purchasing alcohol beverages from state authorized wholesalers. I understand that lack of access

State Forms: DOCUSIGN

