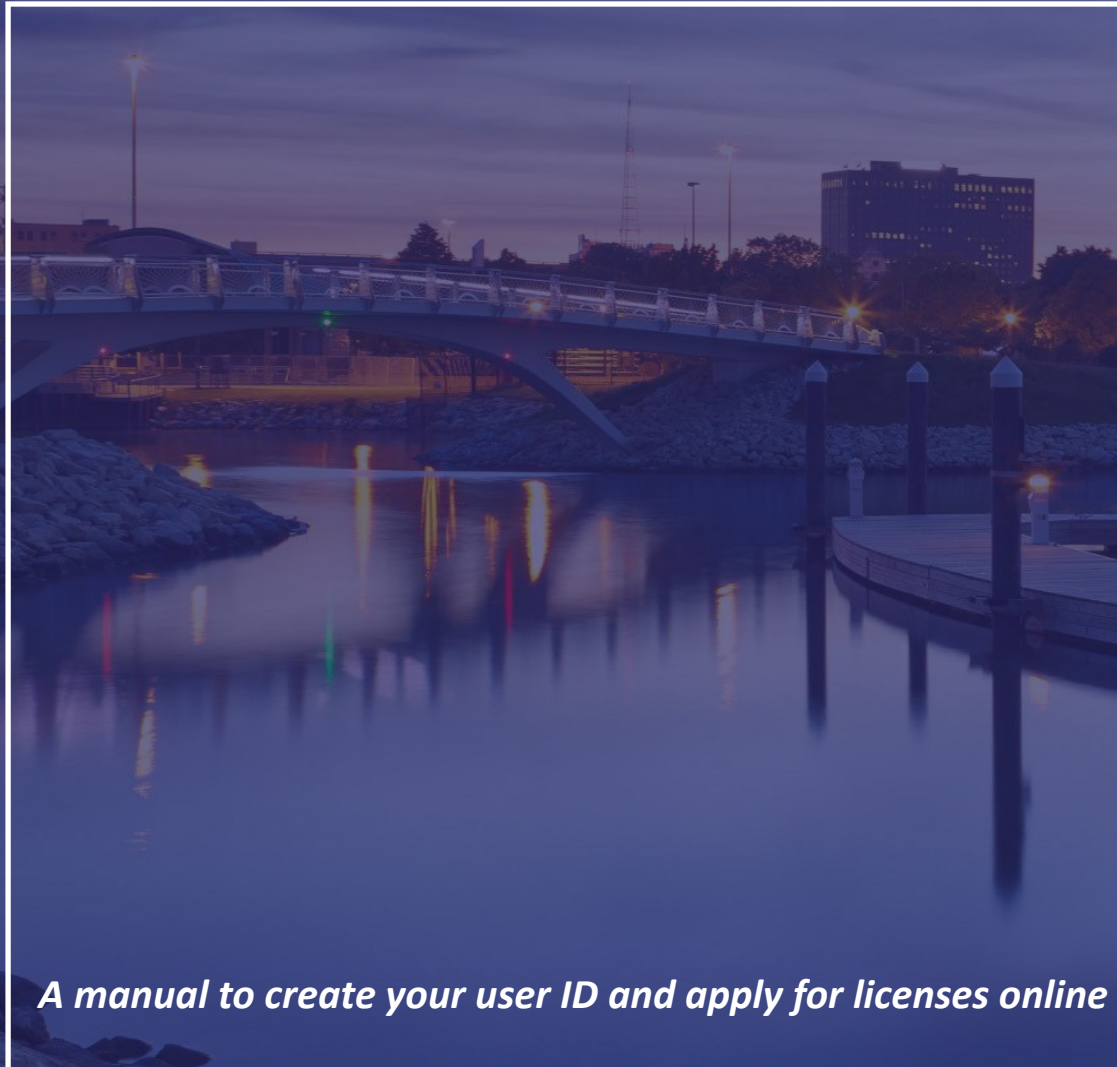




A manual to create your user ID and apply for licenses online

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.

Announcements 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

Your account is successfully registered.

Congratulations. You have successfully registered an account.

Account Information

User Name:	Janedoe
E-mail:	janedoe@milwaukee.gov
Password:	*****
Security Question:	What is the name of your favorite pet?

Contact Information

Jane A Doe	Home Phone: 414-111-1111
200 E Wells St	Work Phone:
janedoe@milwaukee.gov	Mobile Phone:
	Fax:

Contact Address List

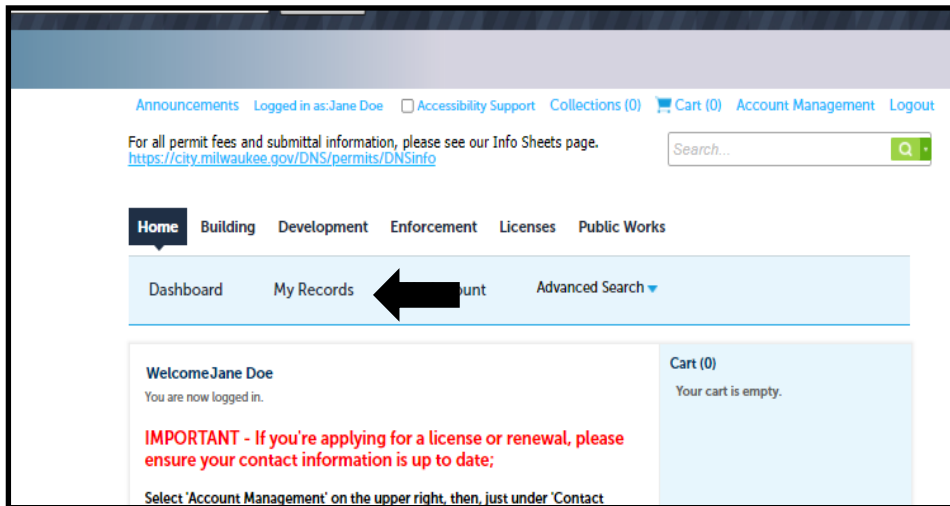
▼ Contact Addresses

Showing 0-0 of 0

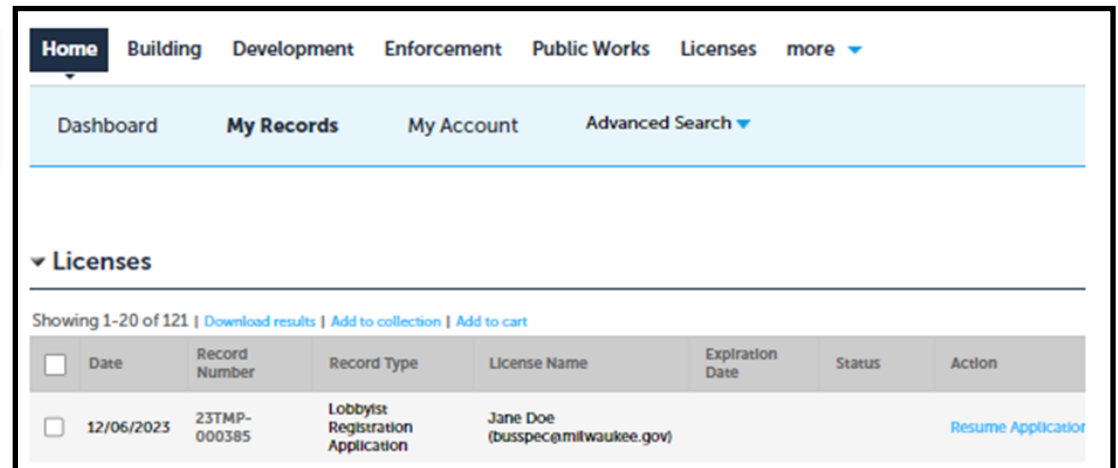
Address Type	Recipient	Address
No records found.		

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.



***Secondhand Motor Vehicle Dealer
Business License Application***



How to Apply for a Secondhand Motor Vehicle Dealer Business License

The screenshot shows the top navigation bar of the City of Milwaukee website. The 'City Clerk' link is highlighted with a red box. Below the navigation bar, the user is logged in as 'licensetest'. The main content area shows two empty sections: 'Saved in Cart (0)' and 'My Collection (0)'. At the bottom, there is a 'Work in progress' section with a table header for 'Food Dealer'.

Record Name	Record ID	Module	Creation Date	Action
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.

The screenshot shows the 'Licenses' menu item highlighted in a red box. Below the navigation bar, the user is logged in as 'licensetest'. The main content area shows two empty sections: 'Saved in Cart (0)' and 'My Collection (0)'. At the bottom, there is a 'Work in progress' section with a table header for 'Food Dealer'.

Record Name	Record ID	Module	Creation Date	Action
Food Dealer				

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 containing the 'Disclaimer of Liability'. The text states that 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 Secondhand Motor Vehicle Dealer Business License

To select the correct license application, either use the search bar and type “Secondhand” or select Secondhand Motor Vehicle Dealer License from the Premises Business drop-down menu.

Select a Record Type

Choose one of the following available record types. For assistance or to a



Search

- ▶ BUSINESS LICENSE APPLICATIONS
 - ▶ Contractor Registration
 - ▶ Environmental
 - ▶ Food Drink and Entertainment
 - ▶ Miscellaneous Licenses
 - ▶ PUBLIC PASSENGER VEHICLE
 - ▶ VEHICLE RELATED
 - ▶ TEMPORARY BUSINESS LICENSE APPLICATIONS
- ▼ PREMISES BUSINESS LICENSES
 - ☐ Amusement Machine Distributor Application
 - ☐ Escort Service Business Application
 - ☐ Hotel Motel Business License Application
 - ☐ Massage Establishment Business License Application
 - ☐ Mobile Home Park Application
 - ☐ Private Alarm Business License Application 
 - ☐ Private Alarm Sales Business License Application 
 - ☐ Private First Responder Service Business License Application 
 - ☐ Rooming House Business License Application
 - ☐ Secondhand Dealer Business License Application
 - ☒ Secondhand Motor Veh. Dealer Application
 - ☐ Self Service Laundry Application
 - ☐ Snow Plowing Equipment Application
 - ☐ Tattoo and Body Piercing Business License Application
- ▶ Licenses
- ▶ OTHER BUSINESS LICENSE APPLICATIONS

Once you find the application, select continue application.

[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

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”.

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

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:

Middle:

* Last:

Sam

Dawson

* Address Line 1

200 E Wells St.

* City:

* State:

* Zip:

Milwaukee

WI

53202

Business Phone:

Mobile Phone:

E-mail:

* Birth Date:

samuelt dawson@gmail.com

12/04/1993

* Driver's License/State ID #

* Issuing State:

WDL123456789

WI

* Business Owner Title:

* Percentage of Ownership:

--Select--

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

Continue Application

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:	* Street Name:	Street Type:
	--Select--		--Select--
Unit No.:	Unit Type:		
	--Select--		
City:	State:	Zip:	
	--Select--		
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 (i.e. previous experience, litter and noise management). Enter all information possible. Fields with red asterisks are required fields, though all fields should be filled out if possible. When complete, select “Continue Application”.

1. Type of Business

TYPE OF BUSINESS

*Do you have any experience operating this type of business?:

spell check

Other (supplemental application for specific license also required):

spell check

2. Business Operations

BUSINESS OPERATIONS

*Proposed Opening Date:

*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?:

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

Are other businesses operating in the same building:

LITTER AND NOISE

How are grounds kept clean and how often will they be cleaned?

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:

☐

SMOKING AND SANITATION

*Are there designated outdoor smoking areas?:

☐ Yes ☐ No

If Yes above, describe designated 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:

BUSINESS PLAN INFORMATION— Part 2

Next, enter parking and security information. If you will have security cameras or personnel, you will need to enter information about the location of cameras and equipment used by security personnel, percentage of sales, and existing business licenses/activities.

SECURITY

* Are there onsite parking spaces?:

☐ Yes ☒ No

Number of onsite parking spaces:

Will timing devices be used to establish parking charges?:

☐ Yes ☐ No

Number of Timing devices:

description of onsite parking security plan:

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

Number of Security cameras:

Locations of security cameras:

Describe searches/identification checks if done upon entry?:

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

Showing 0-0 of 0

PERCENTAGE OF SALES (must total 100)
No records found.

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

PERCENTAGE OF SALES

PERCENTAGE OF SALES (must total 100):

Pawnbroker Activity

[Submit](#)

[Cancel](#)

Percentage (such as 25 is 25%):

Description:

100

PERCENTAGE OF SALES

Showing 1-1 of 1

☐	PERCENTAGE OF SALES (must total 100)	Percentage (such as 25 is 25%)	Description	
☐	Pawnbroker Activity	100		Actions

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

Check the boxes that correspond to any existing licenses or permits held by the applicant at that business location.

EXISTING LICENSE OR PERMITS

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

Occupancy Permit:	☐	Cigarette & Tobacco:	☐
Filling Station:	☐	Extended Hours:	☐
Class “B” Tavern:	☐	Weights & Measures:	☐
Secondhand Dealer:	☐	Precious Metal & Gem:	☐

BUSINESS PLAN INFORMATION— Part 3

In the premises description section, describe the area of the premises used in the operation of the business (such as, first floor, and basement). Add the building owner information.

PREMISES DESCRIPTION

Identify all areas used in operating business

* Describe areas used in operating this business:

First floor, basement

spell check

Describe Location: Major Thoroughfare:

Describe Location: Secondary Street:

Nearest Major Cross Street:

Describe Building:

? --Select--

Describe Building Other:

Describe Premises Structure:

? --Select--

Number of Stories:

Describe Premises Structure Other:

Describe Surrounding Area:

--Select--

Describe Surrounding Area Other:

* Building Owner Name:

Test Owner

* Building Owner Phone Number:

4145555555

* Building Owner Address:

200 E Wells St

In the Hours of Operation section, select all days of the week and click “Edit Selected”. Enter the appropriate opening and closing hours for each day, or if closed, mark as such.

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): **REQUIRED**

9am

* Close Time (include am or pm): **REQUIRED**

9pm

Day of the Week:

Tuesday

Closed:

☐ Yes ☐ No

Open Time (include am or pm):

Close Time (include am or pm):

Day of the Week:

Wednesday

Closed:

☐ Yes ☐ No

Open Time (include am or pm):

Close Time (include am or

Secondhand Vehicle Dealer Plan —Plan of Operation

Next, complete the Basic Business Information, Vehicle Storage,, Maintenance, and Keys sections. Be sure to include descriptions of storage, maintenance, and key security practices.

Basic Business Information

BASIC BUSINESS INFORMATION

What type of business will you operate? (Select all that apply)

*What type of license are you applying for? :

Retail

*Will you also be dealing in secondhand

If wholesale, is the premises address a residential (home) address?: ?

☐ Yes ☐ No

Number of parking spaces available

REQUIRED

*Number of parking spaces that will be used for display/storage of Secondhand Motor Vehicles:

10

Wisconsin Seller's Permit Number:

Vehicle Storage

VEHICLE STORAGE

What are your plans to ensure Vehicle Storage requirement is met (check all that apply)?

*I understand that all vehicles must be stored on the licensed premises.: ☒ *Describe your plan to comply with vehicle storage

Vehicle Maintenance

VEHICLE MAINTENANCE

What are your plans to ensure Vehicle Maintenance requirement are met (check all that apply)?

*I understand that all maintenance and repair work must be confined to the licensed premises.: ☒ *Describe your plan to comply with vehicle maintenance

Vehicle Keys

VEHICLE KEYS

What are your plans to ensure Vehicle Keys requirement are met (check all that apply)?

*I understand that keys must be stored in a secure lock box.: ☒ *Describe your plan to comply with vehicle key requirements

Save and resume later

Continue Application »

Secondhand Vehicle Dealer—Acknowledgements

Next, read and confirm understanding of the acknowledgements sections, and if necessary, provide information about past license disciplinary actions.

Step 3: Secondhand Vehicle Dealer > Acknowledgements

* indicates a required field.

Acknowledgements

ACKNOWLEDGEMENTS

* Has any person on the application ever had a license relating to the activities licensed in Milwaukee Code of Ordinances Chapter 92 denied, not renewed, suspended, or revoked?  ☐ Yes ☒ No

Provide the circumstances and jurisdiction in which the event occurred (including a record of any actions from the State Department of Transportation and Financial Institutions relating to suspensions, revocations, forfeitures and warnings imposed by these departments relating to the operation of any automotive sales business by the applicant):





Secondhand Motor Vehicle Dealer Plan — Supplemental License List

Here, you will be presented with a list of supplemental licenses needed for other business activities based on your response to other questions on the application. Review the list, add or remove licenses as needed.

Step 3: Secondhand Dealer Plan > Supplemental License List

Each row below list a supplemental license that is required based on information you provided within this application. After this application is submitted the supplemental licenses will be pre filled in with your information a ready for you to complete them individually where additional information is required. Having all required license should speed up your license process.

* indicates a required field.

Supplementals

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

Save and resume later

Continue Application »

Documentation—Attach Documentation

You will need to attach certain documents to your application in order for it to be completely processed. If your business is an LLC or Corporation, you need to attach proof of DFI registration. To do this, 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;plf;scr;scs;shb;sys;vb;vbe;vbs;vxd;wsc;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;r
are disallowed file types to upload.

Floor Plan.docx

100%

Continue

Add

Remove All

Cancel

*Type:

Plan - Floor Plan

File:

Floor Plan.docx

100%

Description:

spell check

Save

Add

Remove All

Save and resume later

REVIEW

In Step 5, you can review the entirety of the Massage Establishment Business 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. Once complete, select Continue to payment.

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

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

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

[Edit](#)

Agent-Sole Proprietor-1st Partner

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

[Edit](#)

Additional Agent & Shareholders

Showing 0-0 of 0

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

Address

200 E WELLS ST
103
MILWAUKEE WI 532023510

[Edit](#)

Parcel

[Edit](#)

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;msp;msx;php;piif;scr;scx;shb;sys;vb;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 »](#)

Associated Forms

If need to submit supplemental applications with your Secondhand Dealer Application, you will be presented with those applications in Step 6. Click Open next to the supplemental license name and complete the application before continuing to payment.

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.

You are not required to submit Associated Forms at this time, please Continue to Payment

Continue to Payment

Supplemental Forms:
Weights & Measures Supplemental

Continue to Payment »

Open

Remove

Save and resume later

Weights & Measures Supplemental

1 Weights & Measures Plan 2 Documentation 3 Review 4 Associated Forms

Step 1: Weights & Measures Plan > Supplemental Devices

* indicates a required field.

Liquid Measuring Devices

LIQUID MEASURING DEVICES

Enter Number of Devices for all devices types for which you need a license.

Number of Retail Petroleum Meters (12 month period and \$60 per device):	Retail Petroleum Meter Fee:
Number of 0 to 30 gallons per minute (24 month period at \$60 per device):	0 to 30 gallons per minute Fee:
Number of 31 to 200 gallons per minute (24 month period at \$250 per device):	31 to 200 gallons per minute Fee:
Number of Over 200 gallons per minute (24 month period at \$250 per device):	Over 200 gallons per minute Fee:

Custom Fields

SCALES

Number of scales measuring any weight amount: ⓘ	Measuring scale Fee:

SCANNERS

The Scanner fee is not per device. Check the box for the appropriate range. If you have 1-3 scanners, the total due is \$130. If you have 4 or more scanners, the total due is \$250. Check the Number of Devices (b).

*How many Scanner devices will be used?:	Scanner Fee:

OTHER DEVICES

Number of length measuring devices: ⓘ	Length measuring device Fee:
Number of Timing Devices: ⓘ	Timing Device Fee:

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.

You are not required to submit Associated Forms at this time, please Continue to Payment

Continue to Payment

Supplemental Forms:
Weights & Measures Supplemental

View Remove

Continue to Payment »

Save and resume later

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”.

Step 6: 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
Parking Lot Business License Fee	1	\$50.00

TOTAL FEES: \$50.00

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 you can get approval from the agency.

Conditions of Approval

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

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		

[Pay Fees](#)

Paid:

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

LICENSE ISSUANCE

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.

[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

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

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

[Record Info](#) ▼ [Payments](#) ▼

Record Details

▼ More Details

☒ Related Contacts

☒ Application Information

☒ Application Information Table

☒ Parcel Information

Create Amendment