

| License(s) Requested                                                                                | Fees              |           |
|-----------------------------------------------------------------------------------------------------|-------------------|-----------|
| <input type="checkbox"/> Temporary "Class B" Wine <input type="checkbox"/> Temporary Class "B" Beer | License Fees      | \$        |
|                                                                                                     | Background Check  | \$        |
|                                                                                                     | <b>Total Fees</b> | <b>\$</b> |

| Part A: Organization Information                                                                                                                                                                                                                                                                                                                                                              |                                       |                                        |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|----------------------------------------|
| 1. Organization Name                                                                                                                                                                                                                                                                                                                                                                          |                                       |                                        |
| 2. Organization Permanent Address                                                                                                                                                                                                                                                                                                                                                             |                                       |                                        |
| 3. City                                                                                                                                                                                                                                                                                                                                                                                       | 4. State                              | 5. Zip Code                            |
| 6. Mailing Address (if different from permanent address)                                                                                                                                                                                                                                                                                                                                      |                                       |                                        |
| 7. FEIN                                                                                                                                                                                                                                                                                                                                                                                       | 8. Date of Organization/Incorporation | 9. State of Organization/Incorporation |
| 10. Phone                                                                                                                                                                                                                                                                                                                                                                                     | 11. Email                             |                                        |
| 12. Organization type ( <i>check one</i> )<br><input type="checkbox"/> Bona Fide Club <input type="checkbox"/> Church <input type="checkbox"/> Fair Association/Agricultural Society <input type="checkbox"/> Veteran's Organization<br><input type="checkbox"/> Lodge/Society <input type="checkbox"/> Chamber of Commerce or similar Civic or Trade Organization under ch. 181, Wis. Stats. |                                       |                                        |
| 13. Is this organization required to hold a Wisconsin Seller's permit? ..... <input type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                                                                                                                                                         |                                       |                                        |
| 14. Wisconsin Seller's Permit Number (if applicable)                                                                                                                                                                                                                                                                                                                                          |                                       |                                        |

| Part B: Individual Information                                                                                                                                                                                                                                                                                   |            |       |       |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|-------|-------|
| List the name, title, and phone number for all officers, directors, and agent of the organization. Include an Individual Questionnaire (Form AB-100) for each person listed below. Attach additional sheets if necessary.<br>Corporations must also include Alcohol Beverage Appointment of Agent (Form AB-101). |            |       |       |
| Last Name                                                                                                                                                                                                                                                                                                        | First Name | Title | Phone |
|                                                                                                                                                                                                                                                                                                                  |            |       |       |
|                                                                                                                                                                                                                                                                                                                  |            |       |       |
|                                                                                                                                                                                                                                                                                                                  |            |       |       |
|                                                                                                                                                                                                                                                                                                                  |            |       |       |
|                                                                                                                                                                                                                                                                                                                  |            |       |       |

Continued →

**Part C: Event Information**

1. Name of Event (if applicable)

2. Dates of Operation

3. Hours of Operation

4. Premises Address

5. City

6. State

7. Zip Code

8. County

9. Governing Municipality ☐ City ☐ Town ☐ Village  
of: \_\_\_\_\_

10. Aldermanic District

11. Organizer of Event (if not the named applicant)

12. Email and/or Phone Number for Organizer of Event

13. Organizer Website

14. Event Website

15. Premises Description - Describe the building or buildings and any outside areas where alcohol beverages and records are sold, stored, or consumed, and related records are kept. Describe all rooms within the building, including living quarters. Authorized alcohol beverage activities and storage of records may occur only on the premises described in this application. Attach a map or diagram and additional sheets if necessary.

**Part D: Attestation**

Who must sign this application?

- one officer or director of the nonprofit organization

**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 organization 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 according to the law, including but not limited to, purchasing alcohol beverages from Wisconsin-permitted 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.

Title

Email

Phone

Signature

Date

**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

# Form AB-220 Instructions

## Temporary Alcohol Beverage License Application

### Who needs an alcohol beverage license?

Any individual or entity that wants to sell alcohol beverages to consumers or allow consumption in a public place must get an alcohol beverage license (sec. [125.09\(1\)](#), Wis. Stats.).

### Who issues alcohol beverage licenses?

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

### Who may receive a temporary alcohol beverage license?

Only the following nonprofit organizations may receive a temporary alcohol beverage license (sec. [125.26\(6\)](#), Wis. Stats.):

- bona fide clubs, whether incorporated or not, which own, lease, or occupy a building or portion thereof used exclusively for club purposes, which is operated solely for a recreational, fraternal, social, patriotic, political, benevolent or athletic purpose but not for pecuniary gain and which only sells alcohol beverages incidental to its operation
- local chambers of commerce organized under ch. 181, Wis. Stats. or a similar civic or trade organization organized under ch. 181, Wis. Stats., to promote economic growth and opportunity within a local geographical area
- state, county, or local fair associations or agricultural societies
- churches, lodges or societies that have been in existence for at least 6 months before the date of application
- posts of veterans organizations

### What types of events are temporary alcohol beverage licenses used for?

Picnics and similar gatherings of limited duration are the types of events that may qualify to use a temporary alcohol beverage license (sec. [125.26\(6\)](#), Wis. Stats.). Some examples of events where a temporary alcohol beverage license may be required include fundraisers, meetings of the post, picnics open to the public, fair booths, wine or beer walks, festivals, and more.

### What activities are authorized under a temporary alcohol beverage license?

An organization that holds a temporary alcohol beverage license may sell, serve, and allow consumption of wine and/or beer at an event hosted by the organization on the premises approved by the municipal governing body. Organizations may host gatherings requiring an entrance fee to the event that includes service of alcohol beverages or may charge for the beer or wine by the glass. A chamber of commerce or similar trade organization may hold up to 20 temporary alcohol beverage licenses for purposes of organizing a wine or beer walk. Temporary alcohol beverage licenses do not authorize consumption or sale of distilled spirits. See [Publication 309](#), *Retail Alcohol Beverage Licensing Guide for Municipalities*, and [Publication 302](#), *Information for Wisconsin Alcohol Beverage and Tobacco Retailers*, for more details.

## Specific Instructions

### *Municipality*

- In the upper right hand corner, list the name of the city, town, or village for which you are applying for a temporary alcohol beverage license.

### *License(s) Requested and License Fees:*

- Select the alcohol beverage license(s) you would like to apply for.
- The license fee is \$10 regardless of whether you are applying for one or both types of temporary alcohol beverage licenses. Your municipality may charge background check fees to determine your organization's fitness to hold the license.

### *Part A: Organization Information*

- Enter all contact information for the organization. Use a general phone and email address where a municipal clerk can reach your organization during business hours.

- Box 7: Enter the [federal employer identification number](#) for the organization. Every organization must have an employer identification number (EIN), even if it will not have employees. The EIN is a unique number that identifies the organization to the Internal Revenue Service.
- Box 11: Check one box to describe your organization's purpose or function. If you cannot check one of these boxes, you may not qualify for a temporary alcohol beverage retail license.
- Box 12: Check yes or no to indicate if your organization is required to hold a Wisconsin seller's permit for sales and use tax purposes. Some nonprofit organizations are not required to hold a seller's permit if they qualify for the occasional sales exemption. See Part 4 of [Publication 206, Sales Tax Exemptions for Nonprofit Organizations](#), for the standards that must be met to qualify for the occasional sales exemption.
- Box 13: If Box 12 is yes, enter your seller's permit number. Seller's permits begin with the digits "456." For questions about obtaining a seller's permit, see [Seller's Permit Common Questions](#).

#### *Part B: Individual Information*

- Provide the names, titles and phone numbers for officers, directors, and the agent of the organization. Titles of persons requiring disclosure include, but are not limited to: President, Treasurer, Executive Director, Board Member. Obtain and submit Form [AB-100, Alcohol Beverage Individual Questionnaire](#), with your application for each person listed.
- Corporations must appoint an agent for this application. List the name of the agent in this section and include Form [AB-101, Alcohol Beverage Appointment of Agent](#), with this application. The agent of your organization must reside in Wisconsin.

#### *Part C: Event Information*

- Box 1: Insert the event name. If this event will be advertised to the public or membership, use the name included on that information.
- Box 2: Insert the dates of the event. Attach a listing of event dates if more space is needed.
- Box 3: Insert the hours of operation for the event dates.
- Boxes 4-10: Enter the address for the event premises. Also enter the county, local jurisdiction, and aldermanic district in which the premises is located.
- Box 11: Insert the name of the event organizer if the license applicant is not the organizer of the event.
- Boxes 12-14: Provide contact information for the event organizer, the organizer's website, and the event website, if applicable.
- Box 15: Describe the premises in detail. Attach a floor plan, festival layout, map, or diagram if possible.

**Example:** The premises is located at 1234 Main St., Realtown, WI, 12345, and includes only the first-floor bar room, dining room, kitchen, and south office of the 5,000 square foot building.

**Example:** The premises is the 1,000 square foot tent within the southwest corner of the parking lot located at XYZ Church at 3456 Main St., Realtown, WI, 12345. All sales and storage of alcohol beverages and records will occur within the 1,000 square foot tent in the southwest corner of the parking lot.

**Example:** The premises is located at PDQ Park (7890 Main St., Realtown, WI, 12345). A 5,000 square foot tent will be constructed in the northeast corner of the park bordering the tree line and northern fence. All alcohol beverage sales and consumption will occur at this tent. Premises includes the adjacent north park office and the space between the tent and the office. Beverages and records will be securely stored in the north park office for the duration of the event.

#### *Part D: Attestation*

- One officer or director of the organization must sign the application.
- Read the attestation carefully, then sign and date.

#### *Part E: For Clerk Use Only*

- "Date license granted" means the date the municipal governing body approved the license to be issued.
- "Date license issued" means the date the municipal clerk physically issued the license certificate document.

## Completion and Submission of AB-220

- Submit the completed application to the clerk of the municipality in which you are applying for a license.
- Submit a separate application for each temporary event. One application may be used to apply for a temporary event that occurs multiple times at the same premises.
- License applications must be filed with the municipal clerk at least 15 days before they can be approved by the governing body, except licenses issued by municipalities within Milwaukee County. Governing bodies of municipalities within Milwaukee County establish their own period that applications must be filed with the municipal clerk.
- Include the following forms with your license application:
  - Form [AB-100](#), *Alcohol Beverage Individual Questionnaire* for all officers, directors, and agent of the nonprofit organization
  - Form [AB-101](#), *Alcohol Beverage Appointment of Agent*
  - Payment for license and background check fees, as required by your municipality
  - Any other information and documents required by your municipality

## Assistance

This form is prepared by the Department of Revenue for use by municipal governments. If you require assistance with this form, consider reaching out to your local clerk for assistance with the following:

- Submission of this application and associated forms
- Availability of certain licenses in a community

If you have questions about alcohol beverage laws and regulations, you may contact the Department of Revenue using the contact information below.

Website: [DOR Alcohol Beverage \(wi.gov\)](http://DORAlcoholBeverage.wi.gov)

Write: [DORAlcohol@wisconsin.gov](mailto:DORAlcohol@wisconsin.gov)

Call: (608) 264-4573

## Resources Provided by the Department of Revenue

[License common questions](#)

[Publication 302](#), *Information for Wisconsin Alcohol Beverage and Tobacco Retailers*

[Publication 309](#), *Retail Alcohol Beverage Licensing Guide for Municipalities*

[Fact Sheet 3101](#), *Licenses for Retail Sale of Alcohol Beverages*

[Fact Sheet 3103](#), *Licensed or Permitted Premises Description*

[Fact Sheet 3116](#), *Reserve "Class B" Liquor Licenses*

[Fact Sheet 3118](#), *"Class B" Liquor License Quotas*