

No-Sale Event Venue
Permit Application

Fees	
BTR Fee	\$
Permit Fee	\$ 300
Background Check Fees	\$
Total Fees	\$

For DAB Use Only	
Permit #	Date Received

Part A: Property Information

1. Property Owner Name(s)		
2. Property Address		
3. City	4. State	5. Zip Code
6. County	7. Governing Municipality: <input type="checkbox"/> City <input type="checkbox"/> Town <input type="checkbox"/> Village of: _____	8. Property Owner Phone
9. Property Owner Email		
10. Property Description - Describe the building or buildings and any outdoor areas where renters, lessee, and guests may carry in and consume alcohol beverages and where any related records are kept. Describe all buildings and outdoor areas on the property where these activities will take place. Authorized alcohol beverage activities and storage of records may occur only on the property described in this application. Attach a map or diagram and additional sheets if necessary to expand on the description.		

Part B: Business Information of Property Operator

1. Legal Business Name of Entity Operating Property (individual name if sole proprietor)			
2. Business Trade Name or DBA (if applicable)			
3. FEIN		4. Wisconsin Seller's Permit Number (if applicable)	
5. State of Organization	6. Date of Organization	7. Wisconsin DFI Entity ID	8. Business Activity (NAICS) Code
9. Entity Type (check one): <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Partnership <input type="checkbox"/> Limited Liability Company <input type="checkbox"/> Corporation			
10. If Limited Liability Company, federal income taxes will be filed as a: <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Single member/disregarded entity			
11. Website			
12. Mailing Address (if different from property address)			
13. City		14. State	15. Zip Code

Part C: Criminal History

1. Has the property operator (sole proprietorship, partnership, limited liability company, or corporation) been convicted of violating federal or state laws or local ordinances? Exclude traffic offenses unless related to alcohol beverages. If yes, describe the nature of the violation. Attach additional sheets if necessary <input type="checkbox"/> Yes <input type="checkbox"/> No		
Law/Ordinance Violated	Location	Trial Date
Penalty Imposed	Was the sentence completed? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Law/Ordinance Violated	Location	Trial Date
Penalty Imposed		Was the sentence completed? <input type="checkbox"/> Yes <input type="checkbox"/> No
2. Are charges for any offense pending against the property owner? Exclude traffic offenses unless related to alcohol beverages <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, describe the nature and status of pending charges in the space below. Attach additional sheets if necessary.		

Part D: Persons Affiliated With Business

1. Is the applicant business owned by another business entity? ☐ Yes ☐ No
 If yes, provide the name(s) and FEIN(s) of the business entity owners below. Attach additional sheets or a business ownership illustration if necessary.

Legal Name of Business Entity	Business Entity FEIN

2. Does the applicant business or do any of its officers, directors, members, agent, employees, owners, or other related individuals or entities have any interest in a Wisconsin-permitted alcohol beverage wholesaler or producer? ☐ Yes ☐ No
 If yes, provide the name of the individual or entity and describe the nature of the interest.

3. List the name, title and ownership percentage below for each individual or entity holding the following positions in the applicant business listed in Part B, Question 1. Attach additional sheets if necessary.

- Sole proprietor: individual's name
- Partnership: all partners
- Corporation and nonprofit organization: all officers, directors, and agent*
- Limited liability company: all members, managers, and agent*

****Form [AB-300](#), *Personal Questionnaire*, must be submitted with this application for each individual listed with any of the above roles, including individuals holding these roles for entities listed in Part D, Question 1. Any restricted investor listed in question 2 must also complete AB-300.****

- Also list any private stockholders, shareholders, or other owners not otherwise listed

***Form [AB-101](#), *Appointment of Agent*, must be submitted with this application if the applicant business is a corporation or limited liability company.**

Last Name	First Name	Title	Ownership Percentage (must total 100%)

Part E: Interest Restrictions

1. Does the applicant hold an alcohol beverage producer or distributor permit? ☐ Yes ☐ No
2. Does the applicant serve as an officer, manager, member, director, or agent for an alcohol beverage production or distributor permittee? ☐ Yes ☐ No
3. Does the applicant hold an ownership interest of more than 10% in an alcohol beverage producer or distributor permittee? ☐ Yes ☐ No
4. Does the applicant hold an ownership interest of 10% or less in an alcohol beverage producer or distributor permittee? If yes, complete Form [AB-104a](#) or [AB-104b](#), *Restricted Investor Affidavit*, and attach to this application ☐ Yes ☐ No
5. Does the applicant hold any other interest in an alcohol beverage producer or distributor permittee? ☐ Yes ☐ No
Describe the nature of the interest below. Attach additional sheets if necessary.

Part F: Other Questions

1. How many events were held at the property within the 12 months immediately preceding this application? _____
2. Are there any alcohol beverage licenses or permits wholly or in part for the property identified in Part A? ☐ Yes ☐ No

Part G: Contact Person

Enter the person's information below for whom the division should contact with questions about this application.

1. Last Name	2. First Name	3. Relation to Applicant (owner, employee, legal counsel, etc.)
4. Email		5. Phone

Enter the information for the general contact who will be knowledgeable about the day-to-day activities of the property (if different than above).

6. Last Name	7. First Name	8. Relation to Applicant (owner, employee, legal counsel, etc.)
9. Email		10. Phone

Part H: Attestation

The property owner must sign and attest to this application:

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 permit. Further, I agree that the rights and responsibilities conferred by the permit(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 understanding the following:

1. Possession and consumption of distilled spirits on property covered by a No-Sale Event Venue is prohibited when in use by the renter or lessee.
2. Sales of alcohol beverages are prohibited on property covered by a No-Sale Event Venue Permit, unless the renter or lessee of the property covered by the permit holds a temporary Class B license issued by the governing municipality for such sales.
3. I am prohibited from providing alcohol beverages to any renter or lessee of the property named on this application.
4. Events with 20 or more people are required to have alcohol beverage service performed by a person holding an operator's license.
5. If a permitted No-Sale Event Venue permit holder later elects to apply for a Class "B" beer license, they must provide written notice to the Division of Alcohol Beverages.

Part H: Attestation (con't)

I understand that lack of access to any portion of the permitted property during inspection will be deemed a refusal to allow inspection. Such refusal is a misdemeanor and grounds for revocation of this permit. I understand that any permit issued contrary to Wis. Stats. 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	

Form AB-353 Instructions

No-Sale Event Venue Permit Application

Who needs this permit?

A Wisconsin event venue intending to rent or lease real property for use as an event venue at which fermented malt beverages and wine are consumed on no more than 6 days per calendar year and no more than one day per month, and not obtain any alcohol beverage retail license should apply for a no-sale event venue permit.

Fee calculation

- The Business Tax Registration fee of \$20 is owed if the applicant has never registered with the Department of Revenue (DOR). No fee is due if the applicant is currently registered.
- The permit fee for this alcohol beverage permit is \$300 for a 2-year period.
 - If this 2-year cycle has already started due to an existing permit, a portion of the permit fee may be prorated and refunded.
- The background check fee is \$7 for each sole proprietor, partner, officer, director, member, manager, and agent.
 - This fee is non-refundable.
 - If submitting multiple alcohol beverage permit applications, pay this fee only once per person.
- Submit all applicable fees above with the permit application documents.

SPECIFIC INSTRUCTIONS

Part A: Property Information

- Question 1: List name(s) of the owner(s) of the property seeking the permit, including all people and entities listed on the deed.
- Question 2 -7: List the address of the property seeking a permit.
- Question 8 - 9: List contact information for the property owner listed in Part A, Question 1.
- Question 10: Describe the real property where renters, leases, and guests may carry in and consume alcohol beverages and any related records are kept. P.O. boxes are not acceptable. Attach a map or diagram and additional sheets if necessary, but a text description is required.

Example: The property is located at 1234 Main St., Realtown, WI, 12345, and includes the entire 5,000 square ft pole barn and entire 2 acre square ft fenced grass field directly to the northwest of the barn.

Part B: Business Information

- Question 1: List the legal name of the entity seeking the permit, which could be a real person, partnership, LLC, or corporation. This should be the entity that will take the actions allowed by the permit.
- Question 2: (Optional)
- Question 3: List the Federal Employer Identification Number issued by the IRS, or the social security number if applicant is an individual person.
- Question 4: List the 15-digit Wisconsin sales tax account number held by the applicant, if applicable. Sales tax accounts begin with digits "456."
- Question 5 - 6: List the state and date of legal organization.
- Question 7: List the [Wisconsin Department of Financial Institutions Entity ID](#) if the applicant is registered with DFI.
- Question 8: See this link for a [Business Activity Code](#) lookup.
- Question 9: Check one box to indicate the type of legal entity applying for this permit.
- Question 10: If LLC is checked in Question 9, choose the option matching how federal income taxes are filed. Leave blank if applicant is not an LLC.
- Question 11: (optional) provide the URL of the business operator.
- Questions 12 - 15: (Optional) If mail should be delivered to an address other than the property address, list that address here. P.O. boxes are acceptable.

Part C: Criminal History Questions

- Charges and convictions, including felony convictions, are not automatic disqualifiers to alcohol beverage permitting. Provide as much information as possible about any conviction or charge listed.

Note: Subject to the Wisconsin Fair Employment Law (Ch. 111, Wis. Stats.), persons with convictions or pending charges may, if those offenses are sufficiently relevant, be prohibited from holding alcohol beverage license and permits under sec. [125.04\(5\)\(a\)\(1\)](#) Wis. Stats. See the Department of Revenue's [Permit Predetermination Common Questions](#) for offenses that may prevent someone from holding permits.

Part D: Persons Affiliated With Business

- Question 1: Describe if the applicant entity is owned, in whole or in part, by another entity that is not an individual person, such as an LLC or corporation. Attach an ownership tree if there are multiple ownership layers to describe.
- Question 2: Other related individuals or entities include managers and supervisors who are involved in day-to-day operations of the business.
- Question 3: Examples for title field include sole proprietor, partner, president, CEO, LLC member, etc.

Part E: Interest Restriction Questions

- Question 1: Indicate if the applicant has any producer permit (brewery, winery, manufacturer, etc.) or wholesaler permit (fermented malt beverage or liquor wholesalers).
- Question 4: See DAB's website for additional forms, including [AB-104a](#) or [AB-104b](#).

Part F: Other Questions

- Question 1: The applicant must certify in the permit application how many events were held at the venue in the 12-month period immediately preceding the application.
- Question 2: The property described in Part A may not also be covered by any other alcohol beverage retail license, other than a properly issued temporary (picnic) Class "B" beer or "Class B" wine license.

Part G: Contact Person

Provide contact information for the person the division should contact with questions on this permit application and ongoing operations. This could be an owner, employee, attorney, or other representative.

Part H: Attestation

- Read the attestation carefully, then sign and date.

Additional Forms and Documents

Submit the following forms or documents with this permit application.

- Form [AB-300](#), *Personal Questionnaire*
- Form [AB-101](#), *Appointment of Agent*
- Form [A-222](#), Power of Attorney if the applicant is appointing a power of attorney

Submission

Mail this form, along with all required forms, documents, and payments to the address below:

Wisconsin Department of Revenue
Division of Alcohol Beverages
PO Box 8934
Madison WI 53708-8934

Applications may be shipped expedited/overnighted to the following physical address:

Wisconsin Department of Revenue
Division of Alcohol Beverages
2135 Rimrock Rd
Madison WI 53713
MS 5-DAB

Assistance

This form is designed by the Division of Alcohol Beverages. If you require assistance with this form, or if you have questions about alcohol beverage laws and regulations, you may contact the Division of Alcohol Beverages using the contact information below:

Website: [DOR Alcohol Beverage \(wi.gov\)](https://www.wisconsin.gov/dor/alcohol-beverage)

Write: DORAlcoholPermits@wisconsin.gov

Call: (608) 266-2526