



N64W23760 Main Street  
Sussex, Wisconsin 53089  
(262) 246-5200  
info@sussexwi.gov  
villagesussex.org

---

**AMENDED AGENDA  
VILLAGE OF SUSSEX  
PARKS & RECREATION BOARD  
6:30 PM TUESDAY, June 18, 2024  
SUSSEX CIVIC CENTER – COMMUNITY ROOM 1<sup>ST</sup> FLOOR  
N64W23760 MAIN STREET**

---

Pursuant to the requirements of Section 19.84, Wis. Stats., notice is hereby given of a meeting of the Village of Sussex Park & Recreation Board, at which a quorum of the Village Board may attend in order to gather information about a subject which they have decision making responsibility. The meeting will be held at the above noted date, time and location. Notice of Village Board Quorum, (Chairperson to announce the following if a quorum of the Village Board is virtually in attendance at the meeting: Please let the minutes reflect that a quorum of the Village Board is present and that the Village Board members may be making comments under any area where the public may comments or if the rules are suspended to allow them to do so.)

1. Roll call
2. Consideration and possible action on the minutes from the May 21, 2024, meeting
3. Comments from Citizens Present
4. Discussion and Possible Action on Special Event Permit: Amorphic Brewing
5. Discussion and Possible Action on Department of Revenue AB-105
6. Park & Recreation Director's Report
7. Topics for Future Agenda Items
  - a. No July Meeting
8. Adjournment

Robert Fourness  
Chairperson

---

Jeremy Smith  
Village Administrator

**VILLAGE OF SUSSEX  
PARK AND RECREATION BOARD  
6:30 PM TUESDAY, May 21, 2024  
SUSSEX CIVIC CENTER  
N64W23760 MAIN STREET, SUSSEX, WI 53089**

**MINUTES**

Meeting was called to order at 6:30pm.

**1. Roll Call**

Members Present: Chairman Bob Fourness, Chuck Vojtas, Kelly Tetting, Chris Kostka, and Nadine Coenen

Members Excused: Trustee Ron Wells, Mike Waltz

Staff Present: Parks and Recreation Director, Halie Dobbeck

**2. Consideration and action on minutes from the April 16, 2024, meeting.**

Motion by Coenen, seconded by Tetting to approve the minutes as presented.

Motion Carried 5-0.

**3. Park and Open Space Open House Discussion**

Motion by Vojtas, seconded by Tetting to approve the Park and Open Space Plan as presented.

Motion Carried 5-0.

**4. Grogan Park Renovation Layout**

Motion by Fourness, seconded by Kostka, to approve the Grogan Park Layout as presented.

Motion Carried 5-0.

**5. Comments from Citizens**

Braden Desmarais, N56W24473 Partridge Lane, Sussex shared with the board that he would like to build a larger bike rack for Melinda Weaver Park to accommodate multiple sized tires and increase the bike capacity. Dobbeck requested that Braden complete the online Eagle Scout form and that she would be in touch regarding next steps.

**6. Village of Sussex Tree Management Plan**

Nathan Schuettplez of Wachtel Tree Science presented on his findings on the Tree Management Plan. He summarized the plan and answered board questions.

Chuck Vojtas left the meeting at 7:23pm.

Motion by Fourness, seconded by Kostka to approve and adopt the Tree Management Plan as presented.

Motion Carried 4-0.

**7. Melinda Weaver Park Hours**

Dobbeck presented the memo in the packet regarding the request from residents to alter the open time at Melinda Weaver Park from Sunrise to 7:00am to better accommodate the surrounding neighborhood.

Motion by Coenen, seconded by Tetting to change the Melinda Weaver Park start time to 7:00am.

Motion Carried 4-0.

**8. Director's Report**

Dobbeck provided the following:

-An update on Vista Run trail construction as well as shared the designs that were prepared for the Vista Run play pods

-An update that the Main Pavilion Committee would be taking a tour of southeastern Wisconsin stages/bandshells/park areas for additional inspiration and ideas on Thursday.

-Upcoming Events:

-Classic Car Cruise Night 6/13

-Pints in the Park: Prides Crossing Park 6/20

**9. Topics for Future Agenda Items**

No future topics were discussed.

**10. Adjournment**

Motion by Kostka, seconded by Coenen to adjourn at 8:24 p.m.

Motion Carried 4-0.

Respectfully Submitted,  
Halie Dobbeck  
Parks and Recreation Director

DRAFT



## Sussex Parks & Recreation Department

N64 W23760 Main Street - Sussex, WI 53089

Phone: 262-246-5200 Fax: 262-246-5222

Email: [info@villagesussex.org](mailto:info@villagesussex.org)

### Community Special Event Packet

A **SPECIAL EVENT** is defined as any event that will meet at least one of these stipulations:

- 200 or more people in attendance
- Open to the public
- Sales of any kind (ticket for entry, concessions, alcoholic beverages, etc.)
- Special events include but are not limited to Run/Walk Events, Fundraisers, Car/Tractor Shows, and Tournaments

#### Special Event Application Process:

1. Create an Organizational Civic Rec account at [villagesussex.org/services/recreation/programs/register](http://villagesussex.org/services/recreation/programs/register) online.
2. Fill out the attached Application for a Special Event.
3. Submit a nonprofit form (if applicable). Nonprofits receive resident fee discount.
4. The application will need two approvals: Park & Rec Board (3<sup>rd</sup> Tuesday of the month at 6:30 pm in the Civic Center Community Room) and Village Board (4<sup>th</sup> Tuesday of the month at 6:00 pm in the Civic Center Board Room). Board approval is required for the first year of the event or if there are substantial changes to your reoccurring event. **It is highly recommended that you attend these meetings.**
5. After your rental application has been approved and processed you will receive an invoice. Fees and deposit must be paid within 30 days of invoice.
6. Provide proof of Event Liability Insurance. The liability insurance must be written by an insurance company licensed to do business in the state of Wisconsin. It shall contain the endorsement for contractual liability to support the indemnity and hold harmless provision of the policy, covering death, personal injury and property damage in the amount of one million dollars while naming the Village of Sussex as an additional insured.



## Application for a Special Event

Sussex Parks & Recreation Department

N64 W23760 Main Street - Sussex, WI 53089

Phone: 262-246-5200 Fax: 262-246-5222

Email: info@villagesussex.org

### EVENT INFORMATION - Answer all questions completely

Organization Point of Contact: Alan Willhite

Name of Event: Amorphic Beer Garden

Date(s) of Rental: 17-AUG-2024 and 14-SEP-2024

Rental Hours (including set-up/take-down): 1:00 pm to 9:00 pm

Estimated Parking Needs: 30 spots Estimated Attendance: 100

Location of Event:  Village Park  Armory Park  Civic Center

Check the following applicable components  
of your event:

Fundraiser

Sell concessions/Sales of Any Kind

Food Trucks

Fireworks Display

Overnight Camping

Attracts more than 200 people

Amusement Rides, Inflatables

Tractor Show/Pull

Parade or Run/Walk event

Other (explain)

Please describe the purpose of your event, list any additional activities at your event or special requests:

Beer garden featuring craft beer from Amorphic Beer (Milwaukee microbrewery) plus 1-2 food trucks. As a microbrewery, we can operate a secondary retail location using our Brewer's Alcohol Beverage Permit from the State of Wisconsin (309-1030664699-06) with approval by the Village Board and the state [AB-105F form, no class B license required]. We would intend to sell our beer plus some non-alcoholic offerings (no wine or liquor).

We held a beer garden at Village Park in Sussex last year and were very pleased with the community response. We would be delighted to return this year at the dates listed above.

## RENTAL FEES:

Check, cash and credit card are accepted (checks payable to: Village of Sussex). A convenience fee will be added to transactions paid with a credit/debit card. After your rental application has been processed and approved an invoice will be created. Fees and deposit must be paid within 30 days of invoice.

(R) - Resident, (NR) - Non-Resident. A resident is classified by the municipality to whom you pay your taxes.

**\$150.00 REFUNDABLE DEPOSIT REQUIRED WITH ALL RENTALS.**

## RENTABLE SPACES:

### Park Open Air Shelters

(Capacity determined by # of picnic tables at each shelter.

Picnic tables will not be relocated)

- \$155R/ \$184NR Village Park Lions Open Air Shelter (Cap. 240)  
 \$55R/ \$69NR Village Park Early Days Open Air Shelter (Cap. 40)  
 \$80R/ \$100NR Village Park North Open Air Shelter (Cap. 60)  
 \$45R/ \$57NR Village Park Concession Stand Shelter (Cap. 30)  
 \$40R/ \$50NR Armory Park Open Air Shelter (Cap. 24)

### Enclosed Park Facilities

- \$100R/ \$125NR Village Park Lion's Building (Cap. 40)  
 \$75R/ \$94NR Armory Concession Stand w/ shelter Cap. 40)  
 \$75R/ 94NR Madeline Park Train Depot (Cap. 25)

### The Grove: Oak Room

(Capacity 150) (2 hour minimum)

#### **(Seated at Tables 104)**

- \$55/ hour (R)  
 \$69/ hour (NR)

### The Grove: Maple Room & Kitchen

(Capacity 75) (2 hour minimum)

#### **(Seated at Tables 48)**

- \$45/ hour (R)  
 \$57/ hour (NR)

### Green Space (Approval Needed)

- \$25R/ \$32NR (Village Park Designated Green Space)  
 \$25R/ \$32NR Circlemasters Green Space

### Disc Golf

- \$100R/ \$125NR Closure for special event  
 \$25R/ \$32NR League (3 hour period per day)

### Baseball/Softball Diamonds (3 hour period/field)

- \$30 Village Park #1 South  
 \$30 Village Park #2 Central  
 \$30 Village Park #3 North  
 \$30 Village Park Lighted Diamond  
 \$10 Lights for Lighted Diamond (fee/day)  
 \$30 Hardball Diamond  
 \$30 Armory Park #1  
 \$30 Armory Park #2  
 \$30 Armory Park #3  
 \$30 Armory Park #4 (T-ball/Little League)  
 \$20 Field Prep Per Diamond  
 \$200 Tournament Fee per field

### Tennis Courts (3 hour period/court)

- \$10R/ \$13NR Melinda Weaver #1  
 \$10R/ \$13NR Melinda Weaver #2

### Volleyball Courts (fee per court)

- \$10R/ \$13NR Village Park #1  
 \$10R/ \$13NR Village Park #2

### Soccer Fields (3 hour period per rental)

- \$30 Armory #1-6  \$5 Armory #7

### Sussex Civic Center (2 Hour Minimum)

#### **Board Room - Dimensions 49'x 37'**

##### **Capacity 125/ Seated 80**

- \$40/ hour (R)  
 \$50/ hour (NR)

#### **Board Room w/ Patio - Dimensions 99' x 46'**

##### **Patio Capacity 190/ Seated 48**

- \$75/ hour (R)  
 \$94/ hour (NR)

#### **Community Room—Dimensions 64' x 29'**

##### **Capacity 125/ Seated 80**

- \$40/ hour (R)  
 \$50/ hour (NR)

#### **Craft Room (Capacity 20)**

- \$20/ hour (R)  
 \$25/ hour (NR)

#### **Multipurpose Room - Dimensions 50' x 90'**

##### **Capacity 225/ Seated 192**

- \$80/ hour (R)  
 \$100/ hour (NR)  
 \$55 kitchen flat fee

#### **Studio (Capacity 40)**

##### **No food/beverages allowed**

- \$20/ hour (R)  
 \$25/ hour (NR)

EVENT DETAILS	NO	YES	ACTION TO BE TAKEN	FEE
Will there be outdoor amplified sound?	X		See Chapter 9 in Village of Sussex Municipal Code regarding noise regulations.	
Will alcohol be consumed?		X	\$15 Beer/Beverage Permit Fee per day	
<b>OR</b>				
Will alcohol be sold? (This includes any charges made for alcohol directly or indirectly for alcohol)		X	\$10 Temporary Alcohol License, \$10 Operator License for each individual serving alcohol and actual cost for each background check. <b>The Village Clerk's office MUST be contacted (262-246-5200) to obtain rules &amp; regulations regarding sales, service and permit applications no later than thirty (30) days prior to the rental.</b>	
Are you requesting any Village street(s) to be closed to traffic?	X		Prepare traffic control plan in conformance with Waukesha County Sheriffs Department and provide to the Village of Sussex.	
Does this event involve a plan for tents, stages, inflatable bounce houses or temporary structures?	X		Must contact Diggers Hotline at least 14 days in advance to have the area marked. Any fees will be the responsibility of the renter.	
Will you be using electricity?	X		Use of electricity may be metered and charged after the event is complete.	
Will there be a need for additional refuse or recycling containers?	X		Provide your anticipated refuse and recycling needs. An additional fee may apply.	
Do you plan to provide additional portable toilets at your event based on expected attendance?	X		Ratio 1 to 100 or 1 to 50 for Alcohol Focused Events required. If not, Village of Sussex staff will determine needs for additional restrooms and bill you accordingly. For any special event, port-o-johns will be assessed a special cleaning fee for each day of the event if using Village port-o-johns.	
Would you like to post an event banner up to 30 days prior to your event to promote? (Village Park and Armory Park renters only)		X	\$30 Temporary Sign Permit is required.	
Have you provided a plan that includes information about security and emergency services on your site plan?	X		Consultation with the Fire and Sheriff's Dept. may be needed.	
Will you be having any kind of animals, performances, or amusement rides?	X		Must provide a certificate of insurance listing Village of Sussex as additional insured.	
Have you determined your parking plan?	X		Please provide details.	
Are you requesting the use of traffic safety equipment, signs or barricades?	X		Please provide details of number and event location of requested traffic safety equipment. Additional fee may apply.	
Does your event have a fireworks display?	X		A permit is required from the Fire Dept and a copy must be given to the Village of Sussex.	

**TOTAL OF FEES**

<b>Part A: Producer Information</b>		
1. Business Legal Name (individual name if sole proprietor) KELLERMEISTER BEVERAGES, LLC		
2. Business Name or DBA BREWFINITY BREWING CO	3. Agent Name CHAD OSTRAM	
4. FEIN 47-5354872	5. Wisconsin Seller's Permit Number 456-1028904632-02	
6. Wisconsin Producer Permit Number 309-1028904632	7. Producer Type <input checked="" type="checkbox"/> Brewery <input type="checkbox"/> Winery <input type="checkbox"/> Liquor Manufacturer/Rectifier	
8. Contact Person's First Name CHAD	9. Last Name OSTRAM	10. M.I. R
11. Contact Person's Phone (262) 271-2701	12. Contact Person's Email chad@brewfinitybrewing.com	

<b>Part B: Production Quantity</b>		
<b>Note:</b> Check appropriate quantity for permit held (see instructions). If you hold more than one producer permit, check the total aggregate quantity produced for each type of permit. Enter the highest quantity produced in any of the last three calendar years.		
<b>Brewery</b>	<b>Manufacturer/Rectifier</b>	<b>Winery</b>
<input type="checkbox"/> Less than 250 barrels	<input type="checkbox"/> Less than 1,500 liters	<input type="checkbox"/> Less than 1,000 gallons
<input checked="" type="checkbox"/> 250 - 2,499 barrels	<input type="checkbox"/> 1,500 - 4,999 liters	<input type="checkbox"/> 1,000 - 4,999 gallons
<input type="checkbox"/> 2,500 - 7,499 barrels	<input type="checkbox"/> 5,000 - 34,999 liters	<input type="checkbox"/> 5,000 - 24,999 gallons
<input type="checkbox"/> 7,500 or more barrels	<input type="checkbox"/> 35,000 or more liters	<input type="checkbox"/> 25,000 or more gallons
Calendar year: 2023	Calendar year:	Calendar year:
Quantity: 415	Quantity:	Quantity:

**Complete only ONE of Part C, D or E.**

<b>Part C: Request for Full-Service Retail Sales at the Production Premises</b>				
1. Start Date	2. Production Premises 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: _____			

<b>Part D: Request for Fixed Full-Service Retail Outlet</b>				
1. Are you transferring one fixed full-service retail outlet to a new location? ..... <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, complete boxes 2 through 9.				
2. Current Outlet Name				
3. Current Outlet Premises Address				
4. City	5. State	6. Zip Code		
7. County	8. Governing Municipality <input type="checkbox"/> City <input type="checkbox"/> Town <input type="checkbox"/> Village of: _____			9. Premises Phone Number

Continued →



**Part D: Request for Fixed Full-Service Retail Outlet (Cont.)**

**New Fixed Retail Outlet Information (complete boxes 10 through 23)**

10. Start Date		11. New Outlet Name	
12. New Outlet Premises Address			
13. City		14. State	15. Zip Code
16. County		17. Governing Municipality <input type="checkbox"/> City <input type="checkbox"/> Town <input type="checkbox"/> Village of: _____	
18. Premises Phone Number			
19. Premises Description - Describe the building or buildings and any outside areas where alcohol beverages are produced, 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.			
20. Will you operate a restaurant on the premises? ..... <input type="checkbox"/> Yes <input type="checkbox"/> No			
21. What alcohol beverages will be offered for sale? (check all that apply) ..... <input type="checkbox"/> Beer <input type="checkbox"/> Wine <input type="checkbox"/> Intoxicating Liquor (other than wine)			
22. What alcohol beverages does the permittee produce? (check all that apply) <input type="checkbox"/> Beer <input type="checkbox"/> Wine <input type="checkbox"/> Intoxicating Liquor (other than wine)			
23. How will customers be served? (check all that apply) ... <input type="checkbox"/> Samples <input type="checkbox"/> On-premises consumption <input type="checkbox"/> Off-premises consumption			

**Part E: Request for Unlimited Transfer Full-Service Retail Outlet**

1. Name of Event (if applicable) SUSSEX PINTS IN THE PARK		
2. Dates of Operation (attach a schedule, if necessary) 06/20/2024		3. Hours of Operation 4PM - 9PM
4. Premises Address Prides Crossing Park, N70W23483 Prides Road		
5. City SUSSEX		6. State WI
		7. Zip Code 53089
8. County WAUKESHA		9. Governing Municipality <input type="checkbox"/> City <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village of: SUSSEX
10. Organizer of Event (if not the named applicant) HALIE DOBBECK		11. Email and/or Phone Number for Organizer of Event HDOBBECK@VILLAGESUSSEX.ORG
12. Organizer Website		13. Event Website
14. Premises Description - Describe the building or buildings and any outside areas where alcohol beverages are produced, 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.  The event will be held outside in the park. The Brewfinity van and dispensing trailer will be used with records stored in the van for the duration of the event. See attached map for details.		
15. On-Site Contact (Last Name, First Name) OSTRAM, CHAD		16. On-Site Contact Phone (262) 271-2701
		17. On-Site Contact Email CHAD@BREWFINITYBREWING.COM
18. Will you operate a restaurant on the premises? ..... <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
19. What alcohol beverages will be offered for sale? (check all that apply) ..... <input checked="" type="checkbox"/> Beer <input checked="" type="checkbox"/> Wine <input type="checkbox"/> Intoxicating Liquor (other than wine)		
20. What alcohol beverages does the permittee produce? (check all that apply) <input checked="" type="checkbox"/> Beer <input type="checkbox"/> Wine <input type="checkbox"/> Intoxicating Liquor (other than wine)		
21. How will customers be served? (check all that apply) ... <input type="checkbox"/> Samples <input checked="" type="checkbox"/> On-premises consumption <input type="checkbox"/> Off-premises consumption		

**Part F: Attestation**

Who must sign this application?

- sole proprietor      • general partner of a partnership      • corporate officer      • member of an LLC

**READ CAREFULLY BEFORE SIGNING:**

I understand and agree to the following:

- I will not operate this location outside of the dates and times approved by the municipality and Division of Alcohol Beverages.
- I will operate this location according to municipal ordinance and restrictions imposed as a condition of receiving this authorization.
- I will purchase alcohol beverages I do not produce from an authorized source, such as a Wisconsin-permitted wholesaler.
- I will operate this location according to Wisconsin law and administrative regulation including but not limited to: underage restrictions, closing hours, licensed operators, and record keeping requirements.

Further, 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 authorization. Further, I agree that the rights and responsibilities conferred by the authorization, if granted, will not be assigned to another individual or entity. I understand that lack of access to any portion of a premises during inspection will be deemed a refusal to allow inspection. Such refusal is a misdemeanor and grounds for revocation of this authorization. I understand that any authorization issued contrary to Wis. Stats. Chapter 125 shall be void under penalty of Wisconsin 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.

Signature <i>Chad Ostram</i>		Date 05/07/2024	
Last Name OSTRAM		First Name CHAD	M.I. R
Title OWNER/MEMBER	Email CHAD@BREWFINITYBREWING.COM	Phone (262) 271-2701	

**Part G: For Municipal Use Only (Complete if Requesting Authorization in Part D or E)**1. Will the municipality limit the scope of alcohol beverages offered for sale? .....  Yes  No2. Will the municipality impose any requirements or restrictions for the full-service retail outlet? .....  Yes  No

3. Describe municipal restrictions indicated in questions 1 or 2 above.

1. Alcohol beverages may only be offered for sale during event hours.
2. Alcohol beverages may only be consumed in designated area as shown on map.

4. Last Name of Municipal Official Moore		5. First Name Jennifer		6. M.I. A.
7. Signature of Municipal Official <i>Jennifer A. Moore</i>			8. Date 05/13/2024	
9. Date Application was Filed with Clerk 05/08/2024		10. Date Full-Service Retail Outlet Approved by Governing Body 01/28/2020		

# Form AB-105 Instructions

## *Producer Full-Service Retail Sales Application*

### **Who may apply for full-service retail sales?**

Producer permittees may apply for full-service retail sales on or off the production premises. Producer permittees include brewers, rectifiers, manufacturers, and wineries.

### **Who qualifies for full-service retail sales?**

- A brewery that manufactures a minimum of 250 barrels of fermented malt beverages.
- A manufacturer/rectifier that produces a minimum of 1,500 liters of intoxicating liquor.
- A winery that produces a minimum of 1,000 gallons of wine.

### **What are full-service retail sales?**

Permittees that are granted full-service retail sales privileges may:

- Sell fermented malt beverages and intoxicating liquor at retail for on- or off-premises consumption at their production premises and at one or more off-site full-service retail outlets.
- Provide taste samples of fermented malt beverages and intoxicating liquor.

### **What are full-service retail outlets?**

Full-service retail outlets are authorized locations for full-service retail sales at places other than the permittee's production premises.

### **What is the difference between a fixed and unlimited transfer full-service retail outlet?**

Fixed full-service retail outlets may be transferred from one location to another once per year. Unlimited transfer full-service retail outlets may be transferred an unlimited number of times in a year. Only one of a producer's full-service retail outlets may be transferred without limitation on frequency.

### **How many full-service retail outlets may I have?**

The number of full-service retail outlets a producer qualifies for is determined by alcohol beverage production volume. Producers may have a maximum of three full-service outlets, regardless of the number or type of producer permits they hold.

### **Who approves full-service retail sales?**

Full-service retail sales on the production premises need only be approved by the Division of Alcohol Beverages. Municipalities do not issue licenses for full-service retail sales outlets; however, municipalities must approve of the outlets. The applicant must forward the municipal approval to the Division of Alcohol Beverages for final granting of the authority for sales to commence on the premises.

### **Can a municipality limit authorized sales at a full-service retail outlet?**

Yes, a municipality can limit authorized sales at a full-service retail outlet. Municipalities may limit the scope of alcohol beverages offered for sale by the permittee. Municipal approval of a full-service retail outlet must be based on the same standards and criteria, established by ordinance, for the evaluation and approval of retail licenses. A municipality may not impose any requirement or restriction in connection with the approval that the municipality does not impose on retail licensees.

### **How do I fill out Form AB-105 and begin the application process?**

Authorizations requested on Form AB-105 must be applied for only one premises in one municipality at a time. To request multiple authorizations, submit a separate Form AB-105 for each location/premises.

Parts A, B, and F: Applicants must complete Parts A, B, and F.

Parts C, D, and E: Complete only one Part. Form AB-105 must be used to request only one authorization at a time.

**Example:** A producer applicant requesting full-service retail sales authorization on the production premises should complete Parts A, B, C, and F.

**Example:** A producer applicant requesting a fixed full-service retail outlet should complete Parts A, B, D, and F.

**Example:** A producer applicant requesting an unlimited transfer full-service retail outlet should complete Parts A, B, E, and F. Producer applicants requesting authorization in Part E must complete one Form AB-105 for each premises. Applicants may use the same Form AB-105 to request authorization for multiple dates and times occurring on the same premises.

Municipal approval is required for authorizations requested in Parts D and E. If a producer is applying for authorization in either of these sections, the completed application must first be submitted to the governing municipality.

After the municipality has granted approval by completing Part G, the applicant should submit AB-105 to the Division of Alcohol Beverages for final approval. If the applicant is only requesting authorization in Part C, the application does not require municipal approval and may be submitted directly to the Division of Alcohol Beverages.

### **Specific Instructions:**

#### *Part A: Producer Information*

- Box 1: Enter the legal business name.
- Box 2: Enter the trade name or "doing business as" name, if different than the name in box 1.
- Box 3: Enter the name of the approved agent appointed for your producer permit.
- Box 4: Enter Federal Employer Identification Number (FEIN).
- Box 5: Enter Wisconsin seller's permit number.
- Box 6: Enter the 15-digit Wisconsin Tax Account Number of the permit that these authorizations should be associated with.
- Box 7: Check the corresponding producer permit type.
- Box 8-10: Enter contact person's name.
- Box 11: Enter contact person's phone number.
- Box 12: Enter contact person's email address.

#### *Part B: Production Quantity*

- Check the highest cumulative total of alcohol beverages produced in any one of the three preceding calendar years for each specific permit type held.
  - Do not include alcohol beverages produced under a contract production agreement.
- Enter the calendar year in which the highest cumulative total of alcohol beverages produced was met.
- Enter the exact quantity of alcohol beverages produced.
- If an applicant holds more than one type of permit or multiple permits of the same type, the aggregate number of full-service retail outlets that may be established is the maximum number authorized under their permit type, but not exceeding three full-service retail outlets.
  - Under these circumstances, each authorized full-service retail outlet shall serve as the full-service retail outlet associated with each applicable permit, regardless of whether permittee would otherwise be entitled to fewer full-service retail outlets when calculated under their other permit(s).

#### *Part C: Request for Full-Service Retail Sales at the Production Premises*

- Authorization under this portion does not require municipal approval. If the applicant is not seeking other retail authorizations on this form, it can be submitted directly to the Division of Alcohol Beverages.
- Box 1: Enter the date that you would like to begin full-service retail sales.
- Box 2-5: List the premises address for the permit identified in Part A, boxes 5 and 6.
- Box 6: Name the county where the production premises is located.
- Box 7: Name the governing municipality where the production premises is located.

#### *Part D: Request for Fixed Full-Service Retail Outlet*

- Authorization under this section must be approved by the municipality in which the retail outlet is located prior to submitting to the Division of Alcohol Beverages for final approval.
- Box 1: Check yes if you are applying to transfer a fixed full-service outlet from one location to another. Fixed Full-Service Retail Outlets may be transferred from place-to-place once per year with approval of the municipality that governs the new location.
- Boxes 2-9: Complete these boxes if you checked yes in box 1 to describe the current premises you are applying to transfer.

- Box 10: Enter the date that you would like to open the full-service retail outlet for business.
- Boxes 11-18: Complete these boxes to describe the location of your new premises.
- Box 19: Describe the premises in detail. Include outdoor spaces if the municipality allows it. Attach a floor plan 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, north storage room, and south office of the 5,000-square-foot building.

- Box 20: Producers may operate a restaurant on the premises of a full-service retail outlet with municipal and division approval.
- Box 21: Check all types of alcohol beverages that will be offered for sale at the full-service retail outlet, including beverages made by the producer or producer group.
- Box 22: Check all the alcohol beverages that are made by the producer under all their permits.
- Box 23: Check all types of service that apply to this full-service retail outlet.
  - Samples mean 3 oz. of beer, 3 oz. of wine, or 0.5 oz. of liquor provided free of charge to an individual.
  - On-premises consumption means alcohol beverages served by the glass to be consumed by the customer at the premises identified in Box 18.
  - Off-premises consumption means alcohol beverages sold in original, unopened containers for customers to consume away from the premises identified in Box 18.

*Part E: Request for Unlimited Transfer Full-Service Retail Outlet*

- Authorizations under Part E must be for dates of operation where the unlimited transfer location will be located at the same premises in the same municipality. You must use a new Form AB-105 to request authorization for each separate premises, regardless of whether the separate premises are in the same municipality.
- Box 1: If you are requesting authorization to initiate or move your unlimited transfer outlet to a specific event like a farmer's market, festival, or other community event, name it here.
- Box 2: List the requested dates of operation. Attach a schedule or calendar of events, if necessary.
- Box 3: List the requested hours of operation. If no hours are listed, the approving municipality and the Division will assume you are seeking authorization to operate during all hours allowed under Chapter 125, Wis. Stats.
- Box 4-9: Identify the premises address.
- Box 10-13: If you are requesting authorization to move your unlimited transfer outlet to a specific event, provide contact information for the event organizer, if not the named applicant.
- Box 14: Describe the premises in detail. Include outdoor spaces if the municipality allows it. Attach a floor plan 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, north storage room, 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. Alcohol beverages and records will be securely stored in the north park office for the duration of the event.

- Box 15-17: Provide the name and contact information for a person who will be in control of the premises for the duration of the requested time.
- Box 18: Producers may operate a restaurant on the premises of a full-service retail outlet with municipal and Division of Alcohol Beverages approval.
- Box 19: Check all types of alcohol beverages that will be offered for sale at the full-service retail outlet, including beverages made by the producer under all their permits.
- Box 20: Check all the alcohol beverages that are made by the producer under all their permits.
- Box 21: Check all the types of service that apply to this full-service retail outlet.
  - Samples mean 3 oz. of beer, 3 oz. of wine, or 0.5 oz. of liquor provided free of charge to an individual.
  - On-premises consumption means alcohol beverages served by the glass to be consumed by the customer at the premises identified in Box 14.
  - Off-premises consumption means alcohol beverages sold in original, unopened containers for customers to consume

away from the premises identified in Box 14.

#### *Part F: Attestation*

- Read the attestation carefully, then sign and date.

#### *Part G: For Municipal Use Only*

- Box 1: Check yes or no to indicate if the municipality will limit the scope of alcohol beverages offered for sale at this full-service retail outlet.
- Box 2: Check yes or no to indicate if the municipality will impose other requirements or restrictions on the full-service retail outlet.
- Box 3: Describe any limitations the municipality has placed on the full-service retail outlet as indicated in questions 1 or 2. Some limitations may be: parking, zoning, or noise ordinance restrictions; not allowing sales of alcohol beverages for off-premises consumption.
- Box 4-10: The municipal official completing this part should fill in the information requested.

### **Completion and Submission of Form AB-105**

- The producer applicant should complete Parts A, B, and F completely, and either Part C, D, or E, depending on the type of authorization requested.
- If requesting only a Part C authorization, the application can be submitted directly to the Division of Alcohol Beverages. No municipal approval is required for Part C authorizations.
- If requesting a Part D or E authorization, provide the application to the municipality where the proposed full-service retail outlet will be located.
  - The municipality should complete Part G and return it to the producer applicant.
  - The producer applicant should provide the completed AB-105 to the Division of Alcohol Beverages for final approval.
- Sales of alcohol beverages at full-service retail outlets may not commence until the Division of Alcohol Beverages has provided final approval by way of issuing a printed authorization to the applicant to be posted at the retail premises identified in this application.

After Form AB-105 is completed by the producer and approved by the municipality in Part G, submit the form to the Division of Alcohol Beverages for final approval in one of two ways:

- Email: [DORAlcoholPermits@wisconsin.gov](mailto:DORAlcoholPermits@wisconsin.gov)
- Mail the form to the following address:

Wisconsin Department of Revenue  
Division of Alcohol Beverages  
P.O. Box 8934  
Madison, WI 53708-8934

### **Assistance**

This form is designed by the Department of Revenue. If you require assistance with this form, consider reaching out to the Division of Alcohol Beverages for assistance with submission of this application and associated forms.

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 \(wi.gov\)](http://DORAlcoholBeverage.wi.gov)

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

**Call:** (608) 264-4573