Form AB-101

# Alcohol Beverage Appointment of Agent

Date	
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Agent Type (check one)				·			
☐ Original (no fee) ☐ Successor (\$10 fee for municipal licensees only)							
Part A: Business Information		<u> </u>					
Legal Business Name (individual name if sole proprietor)							
2. Business Trade Name or DBA							
3. Entity Type (check one) Limited Liability Company	/ [	Corporation	Organization				
4. Alcohol Beverage Business Authorization (check one)  Municipal Retail License  5. If successor agent, provide State Permit or Municipal Retail License							
Part B: Agent Information							
	2. First Name	First Name					
				3. M.I.			
4. Email	, ,,_,	5, Phone					
6. Home Address							
7. City	8. State	9. Zip Code	10. Age	10. Age			
11. Drivers License/State ID Number		12. Drivers Lie	cense/State ID State of I	/State ID State of Issuance			
Part C: Agent Questions							
Have you satisfied the responsible beverage server training Submit proof of completion.	ng requireme	nt?		Yes No			
<ol> <li>Have you completed Form AB-100, Alcohol Beverage Indi Submit a completed Form AB-100 with this form.</li> </ol>	vidual Quest	ionnaire?		Yes No			
3. Have you been a Wisconsin resident for at least 90 continuous days?							
				·			

Part D: Business Attestation								
READ CAREFULLY BEFORE SIGNING: I, corporation, nonprofit organization, or limit beverage activities on such premises. I cer on behalf of the entity. If I am appointing a I understand that I may be prosecuted for any person who knowingly provides material if convicted.	led fiability co <del>n</del> rtify that I am a successor age submitting false	npany with full authority and on authorized by the above-name nt, I rescind all previous agen a statements and affidavits in	control of the ped entity to aut t appointments connection wit	premises and horize this ind s for this prem th this applica	of all alcohol lividual to act ises. Further, tion, and that			
Last Name		First Name			M.I.			
Title	Email		179	Phone	<u> </u>			
Signature	1		Date					
			· ·					
Part E: Agent Attestation								
READ CAREFULLY BEFORE SIGNING: I, the <b>Agent</b> , herby accept this appointment as agent for the above-named corporation, nonprofit organization, or limited liability company and assume full responsibility for the conduct of all alcohol beverage activities on the premises for the above-named business. 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.			
Claratura								
Signature			Date					

## Form AB-101 Instructions

Alcohol Beverage Appointment of Agent

### Who must complete Form AB-101?

State law requires corporations, limited liability companies (LLCs), and nonprofit organizations to appoint an agent that takes responsibility for the licensed or permitted premises.

Use this form to appoint an agent for a new premises or to appoint a successor agent when there is a change before the license or permit is up for renewal.

#### Where do I submit Form AB-101?

Submit Form AB-101 to the appropriate issuing authority, either the clerk of the municipality in which the business or organization is located, or the Division of Alcohol Beverages.

Form AB-101 may be submitted with a license or permit application or at any time to indicate there is a change in agent prior to the license or permit renewal period.

#### **Specific Instructions**

#### Date:

· Date the form in the top right corner.

## Agent Type:

- Select original appointment if you are applying for your license or permit for the first time or are renewing a license or permit.
- · Select successor agent if you are reporting a change of agent during the licensing or permitting period.

## Part A: Business Information

- Box 1: Enter the legal business name. If a sole-proprietorship, enter the individual's first and last name.
- Box 2: Enter the trade name or "doing business as", if different than the name in box 1.
- Box 3: Check one entity type to indicate how the business is legally organized.

Note: This business information must match the information on the license or permit application.

- Box 4: Select which alcohol beverage authorization you hold or are applying for.
- Box 5: For appointment of a successor agent, enter your state permit number (15-digit Wisconsin Tax ID number) or municipal retail license number (if applicable) for which you are appointing a successor agent. If you do not have a municipal retail license number, provide any applicable identifier (e.g., store number or location).
- Box 6: For appointment of a successor agent, describe the reason for the change in agent.

#### Part B: Agent Information

Provide all requested personal information.

#### Part C: Agent Questions

- Question 1: Wisconsin law requires all agents of corporations and LLCs to successfully complete a Wisconsin approved responsible beverage server (RBS) training course within the past two years unless:
  - · The applicant is renewing a municipal alcohol beverage retail license, or
  - Within the past two years:
    - a. The applicant held a manager's or operator's (bartender) license.
    - b. The applicant held or was the agent of a corporation or LLC that held any municipally issued retail alcohol beverage license in Wisconsin.

- Some agents for state permittees are exempt from responsible beverage server course requirements. The following permittees are exempt from RBS course requirements: Alcohol Beverage Warehouse, Industrial Fermented Malt Beverages, Wholesalers, Manufacturers, Rectifiers, Direct Wine Shippers, Wholesale Alcohol, Medicinal Alcohol, Industrial Alcohol, and Industrial Wine.
  - If you are applying to be the agent of one of these exempt permittees, answer "yes" to Question 1.
- To learn about your responsibility to complete the responsible beverage server requirement, review <u>Publication 302</u>, Information for Wisconsin Alcohol Beverage and Tobacco Retailers.
- Question 2: Appointed agents must submit Form AB-100, Alcohol Beverage Individual Questionnaire, in addition to this form.
- Question 3: Appointed agents must be Wisconsin residents for at least 90 continuous days prior to the date of application, except for direct wine shipper permittees.

#### Part D: Business Attestation

 An authorized representative should sign, date, and provide requested personal information on behalf of the business.

## Part E: Agent Attestation

• The agent being appointed should read the attestation carefully, then sign and date.

### **Assistance**

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) **Write:** DORAlcohol@wisconsin.gov

Call: (608) 264-4573