Application for an "Operator's" License		, WI		\$10
To Serve Fermented Malt Beverages and Intoxicating Liquors	City-Town-Village	Zip Code		

I, the undersigned, do hereby respectfully make application to the local governing body of the (City – Town – Village) of, County of, Wisconsin for a License to serve,
from date hereof to June, 20, inclusive (unless sooner revoked), Fermented Malt Beverages and Intoxicating Liquors, subject to the limitations imposed by Section 125.32 (2) and 125.68 (2) of the Wisconsin Statutes and all acts amendatory thereof and supplementary thereto, and hereby agree to comply with all laws, resolutions, ordinances and regulations, Federal, State or Local, affecting the sale of such beverages and liquors if a license be granted to me.
I certify that I am years of age. Date of Birth//
X
Signature of Applicant
Answer the following questions fully and completely: Name of Applicant:
Address of Applicant:
If renewal (within the past 2 years held a Class "A", "Class A", "Class C", Class "B" or "Class B" license or permit or a manager's or operator's license), where was the privilege obtained? (City – Town – Village)
As required by WI Statutes Section 125.17(6), have you completed the alcohol awareness course? (circle one) YES NO If so, where?
Have you ever been convicted of any felony or of violating any law of the State of Wisconsin or of the United States? (circle one) YES NO
Date of such conviction// Name of Court Nature of Offense
Have you been convicted of violating any license law or ordinance regulating the sale of Fermented malt beverages or intoxicating liquors? (circle one) YES NO Nature of violation
Name and address of physician signing your health certificate files herewith (if required)

Application For An

Operators License

Section 125.32(2) & 125.68(2)

At a meeting of *the local governing body* of The (City – Town – Village) of

County of ______, Wis. And after due consideration of this application, it was moved and carried to grant a license to said

Name of Applicant

upon payment of the fee therefore to the Treasurer.

Clerk

License No. _____

Issued the ______ day of ______, _____,

ending _____, ____,

Clerk
