

# Operator License Application

To Serve Fermented Malt Beverages and Intoxicating Liquors

Date
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Application Type <i>(check one)</i>			
<input type="checkbox"/> New (\$15 fee)	<input type="checkbox"/> Renewal (\$15 fee)	<input type="checkbox"/> Provisional	<b>FEE DUE WITH APPLICATION</b>

Applicant Information <b>ATTACH A COPY OF DRIVERS LICENSE WITH APPLICATION</b>			
Last Name	First Name	M.I.	
Email			Phone
Home Address			Date of Birth
City	State	Zip Code	Age
Drivers License/State ID Number	State of Issue	Employer Establishment Name	

Applicant Question	
Have you held an operator's license within the past two years? <i>NEW APPLICANTS: If with another municipality, attach copy of license.</i>	..... <input type="checkbox"/> Yes <input type="checkbox"/> No
Have you satisfied the responsible beverage server training requirement? <i>NEW APPLICANTS: Submit proof of completion.</i>	..... <input type="checkbox"/> Yes <input type="checkbox"/> No

Criminal History		
Have you ever been convicted of any offenses (excluding traffic offenses unless related to alcohol beverages) for violation of any federal, Wisconsin, or another state's laws or of any county or municipal ordinances? . . . . . <input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, please list details of conviction below. Attach additional sheets as needed.		
Law/Ordinance Violated	Location	Conviction Date
Penalty Imposed		Was sentence completed? . . . . . <input type="checkbox"/> Yes <input type="checkbox"/> No
Are charges for any offenses currently pending against you (excluding traffic offenses unless related to alcohol beverages) for violation of any federal, Wisconsin, or another state's laws or any county or municipal ordinances? . . . . . <input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, describe nature and status of pending charges using the space below. Attach additional sheets as needed.		

Attestation	
I hereby apply for a license to serve, from date hereof to <b>June 30, 2027</b> , 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 thereof and supplementary regulations, 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 is granted to me. Under penalty of law, I certify the above information is true, correct and complete and that falsification may result in denial of such license. Further, I understand that refunds are not allowed for any portion of the application fee paid even if denied for any reason.	
Signature	Date

For Clerk Use Only				
Date Application Was Filed With Clerk	Date reported to Board	License Number	Date License Granted	Date License Issued
Signature of Clerk/Deputy Clerk		Amount Paid	Date Provisional License Issued (if applicable)	