Application for an "Operator's" License

To Serve Fermented Malt Beverages and Intoxicating Liquors

☐ New ☐ Renewal Town of Blooming Grove, WI _____, 20____
Date

I, the undersigned, make application to the local governing body of the Town of Blooming Grove, County of Dane, Wisconsin for a License to serve, from date hereof to June 30, 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 Statues 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.

Answer the following questions fully and completely:

Name of Applicant _____ Phone _____
First (legal) Middle Last

Address of Applicant _____

*Date of Birth _____ *Sex _____ *Race _____

*Driver's License Number _____ State issued out of _____

As required by WI Statutes Section 125.17 (6), have you completed the Beverage Server Training Course? _____

If so, where? _____

Have you been arrested or convicted of a felony or any alcohol-related or drug-related misdemeanor? _____

Date of arrest or conviction _____ Name of Court _____

Nature of offense _____

Have you been arrested or convicted of violating any law or ordinance regulating the sale of Fermented malt beverages or intoxicating liquors? _____ Nature of violation/conviction _____

Have you ever had a license to serve alcohol beverages suspended or revoked, or surrendered the license in lieu of suspension or revocation? _____ If yes, provide the place and date _____

Have you been arrested or convicted of operating a motor vehicle while intoxicated? _____ Date(s) _____

Name of employer for which license is intended _____

I understand that the fee of $20.00 is not refunded if this application is denied.

* We request this information so we can verify your criminal and driving history. This information is maintained in confidence.

STATE OF WISCONSIN
Dane County

_____, being first duly sworn on oath says that (s)he is the person who made and signed the foregoing application for an operator's license; that all the statements made by the applicant are true.

X _____
Applicant sign here

Subscribed and sworn to before me this _____
day of _____, 20 _____

_____
Notary Public, _____ County, Wisconsin