

**Town of Blooming Grove, Dane County, Wisconsin**  
**Application for an Operator's License**

to serve Fermented Malt Beverages and Intoxicating Liquors in the Town of Blooming Grove

\_\_\_\_\_ New      \_\_\_\_\_ Renewal      Date \_\_\_\_\_

I, the undersigned, make application to the Town of Blooming Grove, Dane County, Wisconsin for a license to serve, from date hereof through June 30, 20\_\_\_\_, (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.

**Answer the following questions fully and truthfully.** This information is maintained in strict confidence.

Legal Name of Applicant \_\_\_\_\_ Phone \_\_\_\_\_

Address of Applicant \_\_\_\_\_ City/State/ZIP \_\_\_\_\_

Date of Birth \_\_\_\_\_ Gender \_\_\_\_\_ Race \_\_\_\_\_

Driver's License Number \_\_\_\_\_ State Issued \_\_\_\_\_

As required by Wisconsin State Statute 125.17(6) have you completed the Beverage Server Training Course? \_\_\_\_\_

If yes, where? \_\_\_\_\_

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

If yes, date of arrest or conviction: \_\_\_\_\_ Name of court: \_\_\_\_\_

Describe offense: \_\_\_\_\_

Have you ever been arrested or convicted of violating any law or ordinance regulating the sale of Fermented malt beverages or intoxicating liquors? \_\_\_\_\_

If yes, describe: \_\_\_\_\_

Have you ever had a license to serve alcoholic beverages suspended or revoked, or surrendered the license in lieu of suspension or revocation? \_\_\_\_\_

If yes, provide place and date: \_\_\_\_\_

Have you ever been arrested or convicted of operating a motor vehicle while intoxicated? \_\_\_\_\_

If yes, provide place and date: \_\_\_\_\_

Name of employer for which license is intended: \_\_\_\_\_

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

I understand that state law allows for a fine of up to \$1000.00 if this form is not completed truthfully.

\_\_\_\_\_  
Printed applicant name

\_\_\_\_\_  
Applicant signature

\_\_\_\_\_  
Date