

APPLICATION FOR OPERATOR'S LICENSE

TO SERVE FERMENTED MALT BEVERAGES AND INTOXICATING LIQUOR IN THE TOWN OF KILDARE, JUNEAU COUNTY WI

Fermented Malt Beverages, and Intoxicating Liquors, subject to the limitations imposed by § 125.32 (2) and § 125.68 (2) of the Wisconsin Statutes
For License Period Ending June 30, 20__ ~ Unless Sooner Revoked

NEW _____ RENEWAL _____ PROVISIONAL (60 DAYS ONLY) _____

PLEASE ANSWER THE FOLLOWING QUESTIONS FULLY AND COMPLETELY

APPLICANT _____
Last First Middle Previous Name(s)

HOME ADDRESS _____
Street Address City State Zip

PREVIOUS ADDRESS _____
Street Address City State Zip

DATE OF BIRTH ____/____/____ I certify that I am ____ years of age X ____
Month Day Year Age (At time of application) Signature

Home Phone # _____ Cell Phone # _____

E-MAIL Address _____

DRIVER'S LICENSE or WISCONSIN ID # _____ STATE ISSUED _____

How long have you continuously resided in Wisconsin prior to this date? _____

PLACE OF EMPLOYMENT UNDER THIS LICENSE _____ Phone # _____

Applicants: State Statute 125.17(6) requires proof of completion of a Responsible Beverage Server Course (*must be submitted before the application is reviewed by the Town Board*) A PROVISIONAL OPERATOR LICENSE may be issued only if the applicant is enrolled in a training course (*must provide enrollment receipt and course certificate once completed.*)

APPLICATIONS WILL NOT BE ACCEPTED UNLESS PROPER PROOF IS SUBMITTED.

Within the last two (2) years, did you have or complete one of the following: (*Check and attach a copy of ONE of the following*)

- ____ Successfully completed a Responsible Beverage Server Training Course within last 2 years (*Attach Certificate*)
____ Held a valid Operator's License issued in Wisconsin within past 2 years (*Attach proof, if not from Town of Kildare*)
____ No, I am currently enrolled in an approved Responsible Beverage Server Training Course; please include a Provisional (60 day) Operator License. (*Additional fee of \$10 – must submit approved course enrollment receipt and certificate after completion*)

HAVE YOU EVER BEEN CONVICTED OF OR CHARGED WITH THE FOLLOWING VIOLATIONS, IN AND/OR OUT OF WISCONSIN?

If application is a renewal, please list only those violations occurring in the past year.

Any Pending Charges Yes ____ No ____ Any Felonies (*no date limit*) Yes ____ No ____
Any Misdemeanors (*no date limit*) Yes ____ No ____ Any Traffic and Local Ordinances (*no date limit*) Yes ____ No ____
Any Alcohol Related Offenses (*no date limit*) Yes ____ No ____

(*If "yes", give date, municipality, and violation. Use a separate sheet if additional space is needed*)

Date: ____/____/____ Municipality: _____ Violation: _____

Date: ____/____/____ Municipality: _____ Violation: _____

READ CAREFULLY BEFORE SIGNING: The undersigned, being first duly sworn on oath says that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned hereby agrees to comply with all laws, resolutions, ordinances and regulations, Federal, State or Local, affecting the sale of fermented malt beverages and intoxicating liquors if a license is granted and further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. 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.

Signature of Applicant: _____ Date: ____/____/____

For official use only

Date Received by Town ____/____/____ Payment in the amount of _____ Check/Money Order # _____

At a meeting of the local governing body of the Town of Kildare, Juneau County Wisconsin and after due consideration of this application, it was moved and carried to grant a license to above applicant upon payment of the fee therefore to the Treasurer.

License Number _____ Issued the _____ day of _____, 20__ ending on June 30, 20__.