

APPLICATION FOR OPERATOR'S LICENSE TO SERVE FERMENTED MALT BEVERAGES AND INTOXICATING LIQUORS

To the Clerk of the Town of Stanley, Barron County, Wisconsin:

I hereby apply for a license to serve, from date hereof to June 30, 2023, inclusive (unless sooner revoked), Fermented Malt Beverages and Intoxicating Liquors, subject to the limitations imposed by Chapter 125 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 is granted to me.

APPLICATION FEE: \$10.00

Please answer all questions fully and completely (PLEASE PRINT):

Application for: _____ NEW LICENSE or _____ RENEWAL Date: _____
(from the Town of Stanley. Renewals DO NOT need to be Notarized)

Name of applicant: _____

Address: _____

Driver's License Number: _____ State: _____ Date of Birth: _____

Wisconsin Statutes require that all applicants have completed a Responsible Beverage Service course prior to their being issued an operator's license. For a new applicant, the course must have been completed within the past two years. Have you completed such a course? _____

Location of the course: _____ Date Completed: _____
New applicants, please include a copy of the course certificate with your application.

Have you ever been convicted of any felony for the violation of any State, Federal or other laws? _____

If "Yes", please explain: _____

Have you ever been convicted of violating any license, law or ordinance regulating the sale of fermented malt beverages or intoxicating liquors? _____ If "Yes", please explain: _____

Have you ever been convicted of violating any laws regulating the operation of a motor vehicle while under the influence of an intoxicant? _____ If "Yes", please explain: _____

I certify that I am the person who made and signed the foregoing application for an Operator's License and that all statements are true and correct.

Applicant's signature: _____

Subscribed and sworn before me this _____ day of _____, _____.

_____ My commission expires _____
Notary Public, Barron County, State of Wisconsin