



APPLICATION FOR LICENSE TO SERVE FERMENTED MALT BEVERAGES AND INTOXICATING LIQUORS

I hereby apply for a license to serve, from the date hereof, or from June 30, 2011 to July 1, 2013, inclusive (unless sooner revoked), fermented malt beverages and intoxicating liquors, subject to 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. I understand that I must satisfactorily complete the Responsible Beverage Services Course before an operator license will be issued.

ANSWER THE FOLLOWING QUESTIONS FULLY AND COMPLETELY -- PLEASE PRINT

Name of Applicant: (print): _____
First name Middle Int. Last Name

Address of Applicant: _____
Street Apt. # City

Date of Birth: _____ Phone: _____

Have you been convicted of any felony or of violating any law of the City of Elkhorn, State or Wisconsin or of the United States? (Excluding minor traffic violations not involving alcohol and/or drugs) Yes _____ No _____

Date of Conviction: _____ Name of Court: _____

Nature of Offense: _____

Drivers License No.: _____ Check one: [] New application [] Renewal

Have you been convicted of violating any license law or ordinance regulating the sale of beverages or intoxicating liquors? Yes _____ No _____

Bartending At: _____ Address: _____

State of Wisconsin
Walworth County

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

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

Applicant's Signature

Notary Public
My Commission Expires: _____

Date

Office Use Only: Fee Paid \$ _____ Receipt No. _____
Reviewed by Police Chief: _____ Acct. No. 100-444120
Provisional License No: _____ Date: _____
Beverage Svc. Course: _____ Date: _____
Date Council Granted: _____ Date: _____
Regular License No.: _____ Date: _____