Application for an Operator's License

**To Serve Fermented Malt Beverages and Intoxicating Liquors**

I, the undersigned, do hereby respectfully make application to the local governing body of the **Town of Warren,** County of St. Croix, Wisconsin for a License to serve, from date hereof to June 30, 202\_, 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 State 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 of a license be granted to me.

Name (print) First Middle Last

Street Address (include P.O. Box, if applicable)

Date of Application

City, State, Zip Code

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Primary Establishment Where You Intend To Work Date of Birth Home Phone Number

Is this application \*\* **New** or a **Renewal ?** (circle one)

**THE TOWN OF WARREN SHALL NOT ISSUE OR RENEW AN ALCOHOL-RELATED LICENSE TO ANY PERSON WHO HAS A FELONY CONVICTION OR A HABITUAL LAW OFFENDER PURSUANT TO SECTION 125.04(5)(b), WISCONSIN STATE STATUTES, WHERE THE OFFENSE(s) IS RELATED TO THE ALCHOLOLIC BEVERAGE LICENSING AGENCY.**

*Other Licensing Criteria is Noted on the Reverse*

\*\* If this is a NEW Operator’s Application, the Certificate of Completion must be attached.

## Have you in the past two (2) years been issued an Operator's License?

**Yes** if YES, what municipality issued it? (circle one of the following) City Village Town of:

**No** if NO, you must provide a **Certificate of Completion** of the

*Responsible Beverage Service Course.* These classes are held at Wisconsin Indianhead Technical College or online at [www.dor.state.wi.us/training/index.htm](http://www.dor.state.wi.us/training/index.html)l

(learn2serve recommended)

Have you ever been convicted or arrested of a felony, misdemeanor, ordinance violation, or an OWI/DWI? Please include any matters not yet adjudicated or pending.

**Yes** if YES, please provide details and courts that handled the matters on the reverse side of this application.

# No

## If this application is a **renewal,** any conviction or arrest within the past twelve (12) months?

**Yes** if YES, please provide details and courts that handled the matters on the reverse side of this application.

# No

**This Application Is Not A Renewal**

I certify that I am years of age; that I am a citizen of the United States; that I am familiar with the laws, ordinances

and regulations pertaining to the sale of intoxicating liquor and/or fermented malt beverage; that I consent to a mandatory back- ground check, and the information I have provided on this application is true and correct.

THIS APPLICATION SHOULD BE ACCOMPANIED BY THE APPROPRIATE LICENSE FEE:

***$10.00 OPERATOR'S LICENSE*** *or*

***$10.00 PROVISIONAL LICENSE***

Signature of Applicant (please use Middle Initial)

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| **Town of Warren Operator License Application Criteria** |
| The Town may refuse to issue or renew an alcohol-related license for the following reasons: |
| \* False information provided on the Application. |  |
| \* Any alcohol-related criminal offense; any alcohol-related ordinance offense; disorderly conduct or |
| battery where alcohol is involved; battery in a bar; or a DWI criminal conviction shall be considered. |
| \* Any criminal or ordinance offense that is related to the license requested (including but not limited to |
| the following examples: gambling, any drug offense, disorderly conduct, battery in a bar, or similar |
| offenses. |  |
| The Town may refuse to issue or renew an alcohol-related license to persons with two or more convictions |
| within the past twelve months for the following or similar violation(s) [this is not a complete list and other |
| offenses may be considered if they are substantially related to the license applied for]: |
| \* Prior selling violations in the last 12 months - 1 violation (after warning) |
| \* Prior Contributing to Minors violation in the last 12 months - 1 violation (after warning) |
| \* Prior After Hours violation in the last 12 months - 1 violation (after warning) |
| \* Any other offenses related to the illegal sale of alcoholic beverages |  |
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| ***For Applicant Use Only Law Enforce*** | ***ment Use Only*** |
| Pursuant to ordinance, the undersigned has made the |
| investigation required in the case of the application of |
| said applicant for a beverage operator's license. |
| I have performed a reasonable investigation on this |
| applicant which has not identified any prior arrests |
| or convictions. |
| I have performed a reasonable investigation on this |
| applicant which has identified the prior arrest(s) or |
| conviction(s) noted below: |
|  |
| *Authorized* | *Signature date* |
| ***Clerk/Treasurer Use Only*** |
| After due consideration of the above applicant by the |
| Town of Warren, authority to issue the license was: |
|  | **GRANTED DENIED** |
| Date Paid: |
| Receipt #: |
| License issued this day of \_, 20  |
| *Deina Shirmer, Clerk/Treasurer* |