



Village of North Freedom
105 N Maple St | PO Box 300
North Freedom, WI 53951

License Expires Each Year on June 30	
Type	Fee
<input type="checkbox"/> New	\$45
<input type="checkbox"/> Renewal	\$25

Operator's License Application

To serve Fermented Malt Beverages and Intoxicating Liquors

License Period: July 1, 20 ____ to June 30, 20 ____

I, the undersigned, do hereby respectfully make application to the local governing body of the Village of North Freedom, County of Sauk, Wisconsin for License to serve, from date hereof to June 30, ____, 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 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 certify that I am ____ years of age. DOB ____/____/____ X_____
Signature of Applicant

Answer the following questions fully and completely:

Name/Address of Employer: _____

Name of Applicant _____ Is application NEW or RENEWAL

Address of Applicant _____ City _____ State _____

If renewal (within the past 2 years held a Class "A", "Class A", "Class C", Class "B", or "Class B" license or permit or a manager's or operator's license) where was the privileged obtained? _____

As required by WI Statutes Section 125.17(6), have you completed the alcohol awareness course? YES or NO
If so, where? _____

Have you been convicted of any felony or of violating any law of the State of Wisconsin or of the United States?
YES or NO

(You can use the space below or a separate page to detail out such convictions)

Date of such conviction _____

Name of Court _____

Nature offense _____

Have you been convicted of violating any license law or ordinance regulating the sale of Fermented malt beverages or intoxicating liquors? YES or NO

Name of Violation _____

STATE OF WISCONSIN
SAUK COUNTY

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

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

X _____
Applicant Sign Here

Notary Public, State of Wisconsin
My Commission Expires: _____

Filling Out Your Application

- * An Operator License is a privilege, not a right. Any false answers or omissions may result in the denial of your application.
- * This application must be filled out accurately and completely.
- * If you have any doubt as to whether to include the facts of a specific incident, it is recommended that you disclose the information.
- * If you are unsure about how to respond to any questions on this form, check with the Villager Clerk for clarification.
- * Your application will not be processed until you deal with outstanding warrants.
- * You can obtain information regarding your arrest and conviction record from the police department, the court with which you interacted, or the Wisconsin Circuit Court Access website at <https://wcca.wicourts.gov/> (CCAP may not provide a comprehensive list of ALL arrests and convictions).

Review of Your Application

- * The Village of North Freedom will perform a background check to verify that the information you have provided is complete and accurate.
- * Applications are formally approved by the Clerk/Treasurer or if denied by the Clerk/Treasurer – the Full Village of North Freedom Board. The Village of North Freedom Board of Trustees meets on the second Monday of each month.