

License to be used at (Name of Business) _____

1. Have you been convicted of any felony or misdemeanor? Yes ___ No ___
2. Have you been convicted of any license law or ordinance regulating the sale and/or consumption of fermented malt beverages or intoxicating liquors? Yes ___ No ___
3. Are there currently any federal, state, or local charges pending against you? Yes ___ No ___
4. Do you currently have any outstanding forfeitures owed to the Town of Excelsior? Yes ___ No ___

If you answered **yes** to any of the above questions, list the offense convicted of, date of conviction, the state and county of conviction and pending charges.

<u>Date</u>	<u>Nature of Offense</u>	<u>County</u>	<u>State</u>

STATE OF WISCONSIN
COUNTY OF SAUK

The undersigned, being first duly sworn on oath, deposes and says that I am the person named in the foregoing application, that I have read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of 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.

Signature of Applicant: _____ Date: _____

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

Notary Public
My Commission Expires: _____

(SEAL)