

**CITY OF WISCONSIN DELLS**  
**APPLICATION FOR OPERATOR'S (BARTENDER) LICENSE**

Per Wis. SS 125.32(2) and 125.68(2) and City Code 16.12(5)  
**SEE BACK SIDE OF APPLICATION FOR IMPORTANT INFORMATION**

**FOR OFFICE USE ONLY**

Current Licensing Period: July 1, 2024 to June 30, 2026 Amount Paid: \$ \_\_\_\_\_ Receipt No. \_\_\_\_\_

Police Dept. Background Check Date: \_\_\_\_\_ By: \_\_\_\_\_ Police Chief Recommendation:  Approve  Deny  
 Utilities \_\_\_\_\_  Taxes \_\_\_\_\_  Court \_\_\_\_\_  A/R \_\_\_\_\_  Parking \_\_\_\_\_  Other \_\_\_\_\_

New \$60 (Attach Beverage Server Training Cert.)  Renewal \$60  Temp. \$10 (Event & Dates: \_\_\_\_\_)

Name: \_\_\_\_\_  
Last First Middle

Other Names/Aliases used \_\_\_\_\_

Home Address: \_\_\_\_\_  
Street City State Zip

Mail License to (if different from Home Address): \_\_\_\_\_  
Street City State Zip

Date of Birth: \_\_\_\_\_ Driver's License # \_\_\_\_\_ State \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

List any other State(s) resided in within the last 5 years: \_\_\_\_\_

License to be used at (Name of Wisconsin Dells Business): \_\_\_\_\_

Have you been convicted of a felony? Yes \_\_\_ No \_\_\_  
Have you been arrested or convicted of any law or ordinance pertaining to alcohol or drugs? Yes \_\_\_ No \_\_\_  
Have you been arrested or convicted of any State, Federal or Local Laws (other than speeding tickets)? Yes \_\_\_ No \_\_\_  
Do you currently have any outstanding citations, parking tickets, and/or utilities owed to the City? Yes \_\_\_ No \_\_\_

If you answered yes to any of the above questions, please list information below or on a separate page:

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

Under penalty by law, I, the undersigned, state that I am the person named in this application and that I have read and made complete and truthful answers to each question. I agree to comply with all Federal, State and Local Laws, Resolution and Ordinances regarding the sale of alcohol beverages if a license is granted to me. I have read the back of the application and understand the parameters for denial of this license.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

This application for an Operator's (Bartender) License asks questions regarding past arrests and convictions. These questions **MUST** be answered truthfully so please read the questions carefully. The Wisconsin Dells Police Department will conduct a background check on all applicants. If the information on the application form is **NOT** correct or is incomplete, your application **WILL** be denied. The city's Legislative Committee has adopted the below "Parameters for Denial of an Operating License" as a guideline for license denials. If you have any questions, please ask before completing the application.

**PARAMETERS FOR DENIAL OF AN OPERATOR LICENSE:**

1. Any felony conviction substantially related to the circumstances of the job or licensed activity.
2. Falsifying or omitting information.
3. Incomplete application form.
4. Two (2) or more alcohol related offenses in the past 5 years:
  - This includes, but is not limited to, OWI, Wisconsin State Statute Chapter 125 violations, and/or violations that occurred on a premise that holds a liquor license.
5. Two (2) or more arrests in the past 5 years for offenses that substantially relate to the circumstances of the job or activity. This includes drug, violent, property, society and/or nuisance offenses including, but not limited to: battery, disorderly conduct, criminal damage to property, prostitution, possession of controlled substance, possession of drug paraphernalia and theft.
6. Any habitual law offender where the circumstances of the charge(s) substantially relate to the licensing activity.

If the Police Department does not recommend granting a license, the City Clerk shall forward the application to the Legislative Committee for recommendation and action by the Common Council.

**NOTE: IF YOUR APPLICATION IS DENIED, FEES ARE NON-REFUNDABLE. KEEPING IN MIND THE PARAMETERS LISTED, YOU MAY RE-APPLY WHEN YOU ARE ELIGIBLE, EXCEPT FOR FELONY OFFENDERS. IF THE CAUSE OF YOUR DENIAL WAS DUE TO OMITTING REQUIRED INFORMATION, YOU MAY RE-APPLY AFTER 3 MONTHS.**