Fee: Regular: $25.00 (Annual)
              Provisional: $15.00 (Valid for 60 days or until regular license is issued)

<div align="right">

Village of Rochester
Racine County

</div>

Date Issued/ Denied _____
License # _____

Application for License to Serve Fermented Malt Beverages and Intoxicating Liquors (Operator's)

I hereby make application for an Operator's License under Section 125.17(1) of Wisconsin State Statute to sell/serve alcohol beverages in a Class "A" or Class "B" licensed establishment. I hereby agree that I will comply with all laws, resolutions, ordinances and regulations, State and Local, affecting alcohol beverages, if a license is granted to me.

I understand that the Regular Operator's License will expire on June 30th following the date of issuance.

Birth date _____   Driver's License # _____

Answer the following questions fully and completely: (Please print.)

Name of Applicant   _____
                                      First   Middle Initial   Last
Address of Applicant   _____

Phone # _____   Is Application new or a renewal for Village of Rochester? _____

Place at which you will be selling/ serving alcohol beverages _____

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

As required by WI Statutes Section 125.17(6), have you completed the alcohol awareness course? _____
If this is a new application, attach a copy of your course completion certificate.

Have you been convicted of any felony or of violating any law of the State of Wisconsin or of the United States?
_____   Date of such conviction _____

Name of Court   _____

Nature of Offense   _____

Have you ever been convicted of any offenses (excluding traffic offenses unless related to alcohol beverages) for violation of any federal, Wisconsin, or another state's laws or of any county or municipal ordinances?
_____   Date of such conviction_____

Name of Court   _____

Nature of Offense   _____

CONSENT TO DISCLOSURE

I, by signing this application, consent to the full investigation of my background by law enforcement officials and also consent to the use and disclosure by the Village of Rochester, its elected officials, its employees and agents, of any and all information obtained in said investigation relative to my competency to be licensed for said position for which I am applying.

X_____   _____
                        Signature   Date of Application