

APPLICATION FOR OPERATOR'S LICENSE
Town of Quincy, Adams County, Wisconsin

I, the undersigned, do hereby make application to the Town Board of the Town of Quincy, Adams County, Wisconsin, for an "Operator's" License as provided by Section 125.17 of the Wisconsin Statutes, for the year ending June 30, 2026.

I certify that:

- I have completed the required Responsible Beverage Server Course. I understand I need to show proof of course the first time I apply in the Town of Quincy.
- I am scheduled to take the required Responsible Beverage Server Course on _____. I understand I need to show proof of course before I am issued an "Operator's" License.
- This is not applicable to me.

Have you ever been convicted on any felony or misdemeanor (other than traffic) for any violation of any federal laws, any Wisconsin laws, any laws of any other states or ordinances of any municipality?

(Circle one) YES NO

If YES, give law or ordinance violated, trial court, trial date and penalty imposed, and/or the date, description and status of charges pending. **Include documentation if necessary.

I, the undersigned, have applied for a license through the Town of Quincy and hereby consent for the Town of Quincy to conduct a criminal history background check that may include photographs and fingerprints. This information to be used in licensing consideration by the Town of Quincy.

APPLICANT --- Please Print

Name _____ Date of Birth _____
(Last) (First) (Initial)

Address _____ Phone _____
(Number & Street) (City) (Zip Code)

Name of business where license is expected to be utilized _____

✓ **APPLICANT'S SIGNATURE** _____

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Town Hall Use Only
License No: _____ Date Approved: _____

Town Board required background check: Date: _____

Paid By: (Circle One) Employing Agency Applicant Other: _____

Comments:
