



Town of Royalton  
Location - E6136 State Road 54, New London, WI 54961  
Chairman, Nathan Togstad  
Clerk, Judy Doud, 920-340-0085  
Mailing - E6475 Heinke Rd, New London, WI 54961

### APPLICATION FOR OPERATORS (BARTENDER'S) LICENSE

I hereby apply for a license to serve, from the date hereof to June 30<sup>th</sup> inclusive (unless sooner revoked). Fermented Malt Beverages and Intoxicating Liquors, subject to the limitations imposed by § 125.32(2) & §125.68 (2) of the Wisconsin Statutes & all acts amendatory thereof & supplementary thereto & hereby agree to comply with all laws, resolutions, ordinances & regulations, Federal, State or Local affecting the sale of such beverages & liquors if a license is granted to me.

**\*PLEASE PRINT\***

1. Name \_\_\_\_\_

2. Address \_\_\_\_\_

3. Phone Number \_\_\_\_\_ Date of Birth \_\_\_\_\_

4. Name of Establishment where you will be serving alcohol \_\_\_\_\_

5. Have you ever been convicted of violating law(s) of the State of Wisconsin, or the United States?  
Yes \_\_\_\_\_ No \_\_\_\_\_

6. Have you ever been convicted of violating license law(s) or Ordinance(s) regulating sale of alcoholic Beverages?  
Yes \_\_\_\_\_ No \_\_\_\_\_

7. If you answered YES to questions 5 or 6, complete the questions below.

Date of Conviction: \_\_\_\_\_

Outcome: \_\_\_\_\_

8. Were you issued an Operator's License from the Town last year? Yes \_\_\_\_\_ No \_\_\_\_\_

9. Have you completed an approved Responsible Beverage Server Training Course as required by §125.17(6)?  
Yes \_\_\_\_\_ No \_\_\_\_\_

\*If you did not have a bartender license with Town last year, attach a copy of training certificate\*

#### APPLICANTS STATEMENT

I hereby certify that the answers on above application are complete, true and correct. I understand any omissions or falsifications are grounds for denial of license application, or revocation of any issued license. I agree that by granting this license, I will comply with laws of the State of Wisconsin & the Town ordinances.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date