

**VILLAGE OF SOMERSET
OPERATORS (BARTENDERS) LICENSE APPLICATION
FEE \$17.00**

Office Use Only
Received ___/___/___
Fee Received \$_____

QUALIFYING INFORMATION

1. Do you currently have a Village of Somerset Operator License? **YES or NO** (if no, complete 2 & 3)
2. Have you within the past two (2) years held a Wisconsin Class "A"/"Class A", Class "B"/"Class B", a Manager's or an Operator's License? **YES or NO**
3. Have you completed a Beverage Server Training Course at a vocational, Technical or Adult Education District? **YES or NO**

OPERATOR INFORMATION

Name (First, M.I., Last): _____
Maiden Name/Previous Legal Name: _____
Address: _____
City, State, Zip: _____
Phone: _____ Email: _____
Date of Birth: _____ Employer/Establishment: _____

****Applicant must provide a copy of their driver's license****

BACKGROUND INFORMATION

Have you been convicted of any felony? **YES or NO**

Date(s) of Conviction(s): _____ Name of Court(s): _____

Nature of Offense(s): _____

Have you been convicted of any misdemeanor(s)? **YES or NO**

Date(s) of Conviction(s): _____ Name of Court(s): _____

Nature of Offense(s): _____

Have you been convicted of violating an Ordinance or other offense (i.e. traffic)? **YES or NO**

Date(s) of Conviction(s): _____ Name of Court(s): _____

Nature of Offense(s): _____

Have you been convicted of violating any license law or ordinance regulating the sale of beverages or intoxicating liquors? **YES or NO**

Date(s) of Conviction(s): _____ Name of Court(s): _____

Nature of Offense(s): _____

****If additional space is needed, please attach a separate sheet****

**VILLAGE OF SOMERSET
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CERTIFICATION & SIGNATURE

To the governing body of the Village of Somerset, Wisconsin:

I hereby apply for a License to serve, from date hereof to June 30, 2027, inclusive (unless sooner revoked), Fermented Malt Beverages and Intoxicating Liquors, subject to the limitations imposed by Section 125.32(2) and 125.68 of the Wisconsin Statutes and all acts amendatory thereof and supplementary thereto, and hereby agree to comply with all laws, resolutions, ordinances and regulations, Federal, State or Local, affecting the sale of such beverages and liquors if a license be granted to me.

I certify that I am _____ years of age and **DO / DO NOT** have an arrest for a pending charge (NOTE: If there is a pending arrest, the Clerk may determine the details to see if the charge substantially related to the licensed activity).

Details of pending charge: _____

Choose one of the following:

I further certify that I have no conviction record.

I certify that I have a conviction record as listed in the background information.

This information will be used by the licensing authority to determine if the convictions are for offense(s) the circumstances of which substantially relate to the circumstances of the licensed activity. Reference Section 111.32, 111.322, and 111.325, Wisconsin State Statues.

All information provided and statements made by me as part of this application, or as part of any additional information provided in supports of this application, are complete, correct, and true to the best of my knowledge.

Applicant's Signature

Date

OFFICE USE ONLY

POLICE DEPARTMENT

Date of Background Check ____/____/____
Approved / Disapproved
PD Initials _____

CLERKS OFFICE

License # _____
Date Issued ____/____/____