

Application for an "Operator's" License

to Serve Fermented Malt Beverages and Intoxicating Liquors

\$20.00 + \$10.00 background Check= **\$30.00**

Paid: Cash__ Check#_____ Credit Card__

_____, Sullivan, WI
Employer

I, the undersigned, do hereby respectfully make application to the local governing body of the **Village of Sullivan, County of Jefferson, Wisconsin** for a License to serve, from date hereof to **June 30, _____**, inclusive (unless 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.

Date of Birth ____/____/____

X _____
Signature of Applicant

Need to Provide a Copy of a Photo ID

Answer the following questions fully and completely:

Name of Applicant _____ Is application new or renewal? _____

Address of Applicant _____

If renewal (within the past 2 years held a Class "A", Class "A", Class "C", Class "B" or Class "B" license or permit or a manager's or operators' license), where was the privilege obtained? (City Town Village) _____

As required by WI Statutes Section 125.17(6), have you completed the alcohol awareness course? _____

If so, where? _____

Have you been convicted of any felony or of violating any law of the State of WI or of the United States? _____

Date of such conviction _____ Name of Court _____

Nature of offense _____

If yes, employer must sign the bottom of this form.

Have you been convicted of violating any license law or ordinance regulating the sale of Fermented malt beverages or intoxicating liquors? _____ Nature of violation _____

If yes, employer must sign the bottom of this form.

_____, certify that all of the above statements are true and correct.

X _____
Applicant's Signature

Date

X _____
Employer's Signature - if any convictions on record relating to alcohol