**Application – OPERATOR/BARTENDER License**

**License year: July 1, \_\_\_\_\_\_ to June 30, \_\_\_\_\_\_**

**To Serve Fermented Malt Beverages and Intoxicating Liquors**

**$ 30.00 Operator License**

**$ 15.00 Provisional License (60 days)**

FEES ARE NON-REFUNDABLE

|  |
| --- |
| I, the undersigned, do hereby respectfully make application to the local governing body of the Village of Random Lake, County of Sheboygan, Wisconsin for a License to serve, from date hereof to June 30, \_\_\_\_\_\_, inclusive (unless sooner revoked), Fermented Malt Beverages and Intoxicating Liquors, subject to the limitations imposed by Section 125.32 (2) and 125.68 (2) of the Wisconsin Statues 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. |
|  |  |  |  |  |
| 1. | New [ ]  | Renewal [ ]   | Date filing: |  |
|  |  Prev. Lic. # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |  |
| 2. | Name: |  |
|  |  | First | Middle | Last |
| 3. | Social Security No.: |  | Driver’s License No.: |  |
|  |  |  |  |  |
| 4. | Home Address: |  |  |  |
|  |  | Street | City/State | Zip Code |
| 5. | Phone Number: |  | Ethnicity: |  |
|  |  |  |  |  |
| 6. | Sex: | M [ ]  | F [ ]  | Date of Birth: |  | Age: |  | Place of Birth: |  |
|  |  |
| 7. | Are you a citizen of the United States | Yes [ ]  No [ ]   |
| 8. | List all your residences for the past Two years to the date of application: |
|  |  |
|  |  |
|  |  |
| 9. | Have you EVER been convicted of violating any: (Please note that any incomplete, inaccurate or untruthful information on any license application shall be cause for denial of such license. Including traffic laws.) |
|  | Federal Laws ANYWHERE? |  |
|  | Wisconsin State Laws? |  |
|  | Laws of ANY other State? |  |
|  | Ordinances of the Village of Random Lake? |  |
| 10. | Specify offenses, giving date and places of convictions (if more space is needed use the back of this sheet): |  |
|  |  |
|  |  |
|  |  |
| 11. | Where will you be serving/selling alcohol beverages? |
|  | Business Name:  |  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
| Clerk/Treasurer |  | Applicant’s Signature |
| ***Office Use Only*** |
| [ ]  **Approved \_\_\_/\_\_\_/\_\_\_** [ ]  **Rejected \_\_\_/\_\_\_/\_\_\_**  | **reason:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
|  |  |
| [ ]  $ 30.00 – Operator License | [ ]  cash [ ]  check #\_\_\_\_\_\_\_\_\_\_ | License #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |  |
| [ ]  $ 15.00 – \*Provisional License (30 days)  | [ ]  cash [ ]  check #\_\_\_\_\_\_\_\_\_\_ | License #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | \*training certificate received \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ |  |

**96 Russell Drive, P.O. Box 344, Random Lake, WI 53075**

**Telephone: (920) 994-4852 Facsimile: (920) 994-2390 Website: www.randomlakewi.com**