

Application for an "Operator's License Kendall, WI Monroe County

I, the undersigned, do hereby make application to the local governing body of the Village of Kendall, for a license to serve Fermented Malt Beverages and Intoxicating Liquor from the date hereof until June 30, _____, unless revoked or suspended sooner, subject to the limitations imposed by §125.32 (2) and §125.68 (2) of the Wisconsin State 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 is granted to me.

Full Legal Name (on DL) print _____
Current Address _____
City, State, Zip Code _____
Mailing Address if different _____
Social Security# _____ Telephone# _____
DL# _____ State _____
Date of Birth _____ Age _____

Establishment at which you will be employed as bartender _____

Indicate whether within two (2) years of the date of filing this application you have:

- 1. Held a bartender's license or Class "B" Manager's License in the state of Wisconsin? Yes No
Date: From _____ To _____ - Municipality _____
- 2. Held a Class "A" or "B" Alcohol Beverage license in the state of Wisconsin? Yes No
Date: From _____ To _____ - Municipality _____
- 3. Completed a Responsible Beverage Server Training Course authorized by Wis? Yes No
Attach copy of certification of completion

If "No" to ALL 3 questions above, you must complete a Responsible Beverage Server Training Course. If "Yes" to ALL 3 questions above, you must provide proof before the license can be issued.

Have you EVER been convicted of any felony, misdemeanor, or ordinance violation other than minor traffic violations?

Date of Conviction:	Violation/Offense	Pending	Jurisdiction
_____	_____	_____	_____
_____	_____	_____	_____

any further continue on back

Under penalty provided by law, the undersigned swears that he/she is the person who made the foregoing application and that the information supplied is true and correct. False, inaccurate or omitted information may be grounds for denial of the application. The signer certifies that he/she is familiar with the laws and regulations pertaining to the sale of alcoholic beverages. Signer agrees to observe the provisions of the Village of Kendall Municipal Code, and the Wisconsin Statutes. The signer agrees that the license, if granted, will not be assigned to another. **YOU MUST CARRY ON YOUR PERSON A VALID PICTURE ID ISSUED BY A GOVERNMENTAL AGENCY (DRIVER'S LICENSE, PASSPORT, ETC.) AT ALL TIMES WHILE WORKING PURSUANT TO THE OPERATOR'S LICENTS.**

Applicant's Signature _____ Date _____

Sworn to and subscribed before me on this _____ day of _____, 20____

Notary _____ Clerk _____

My commission expires: _____ or is permanent.