

**APPLICATION FOR LICENSE TO SERVE FERMENTED MALT BEVERAGES AND
INTOXICATING LIQUORS for the VILLAGE OF BELLEVILLE
BELLEVILLE, WISCONSIN 53508**

TO THE BOARD OF THE VILLAGE OF BELLEVILLE, WISCONSIN:

I hereby apply for a license to serve, from date hereof to June 30, 20_____, inclusive (unless sooner revoked), Fermented Malt Beverages and Intoxicating Liquors, subject to the limitations imposed by WI 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 be granted to me.

NOTICE: THIS APPLICATION SHALL BE DENIED IF ALL SECTIONS ARE NOT COMPLETED TRUTHFULLY AND WITH NO OMISSIONS. THE LICENSE SHALL NOT BE GRANTED FOR A MINIMUM OF 5 DAYS AFTER RECEIPT OF APPLICATION IN VILLAGE OFFICE.

Name of Applicant _____
First
Middle
Last

Address: _____ Phone Number _____

I am _____ yrs. of age. Date of Birth: ____/____/____ Driver's Lic. # & State _____

____ RENEWAL OPERATOR'S LICENSE – \$25.00 Two Year License (Exempt from Beverage Training Course)

____ NEW OPERATOR'S LICENSE – \$30.00 Two Year License

Have you completed the Responsible Beverage Course?

_____ YES - Year Completed _____ (Copy of certificate attached)

_____ NO - I have held a license within the last two years (Copy of license attached)

_____ NO - I am registered to take class on _____

_____ I would like a PROVISIONAL LICENSE (\$15.00) until I am able to complete the course.

THIS BOX MUST BE COMPLETED BY ALL APPLICANTS

1. Within the last 10 yrs. have you ever been convicted of any offenses (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, or any laws of any other states or ordinances of any municipality? YES NO (Circle one)
2. Are charges for any offenses presently pending against you (other than traffic unrelated to alcohol beverages) for violation within the last 10 yrs. of any federal laws, any Wisconsin laws, or any laws of other states or ordinances of any municipality? YES NO

If you answered yes above, give law or ordinance violated, trial court, trial date and penalty imposed, and/or date, description and status of charges pending. If more room is needed, continue on reverse side of this form.

Nature of Offense: _____

Date of Conviction/Trial Date: _____ Name of Court: _____

State of Wisconsin)
 County of Dane)

 Applicants signature (Must be Notarized)

_____ being first duly sworn on oath says that he/she is the person who made and signed the foregoing application and that all statements made by the applicant are true.

Subscribed and sworn to before me this _____ day of _____, 20____.

_____, Notary Public. My commission expires: _____

OFFICE USE ONLY

Approved by Police: Yes No By: _____ Date: _____ Village Board Approved on: _____
 Date Paid: _____ By: _____ Revised for use 6/25/15