



Town of Eagle, P.O. Box 327, 820 E Main Street, Eagle, Wisconsin 53119
www.townofeaglewi.us (262) 594-5800, (262) 594-5820

APPLICATION FOR OPERATOR'S LICENSE

Request: Renewal (\$25.00) New (\$25.00) Provisional (\$15.00) Temporary (\$20.00)

NOTE: A \$7.00 Investigative Fee is included in the application fee

APPLICANT INFORMATION

Full Name: _____ Date of Birth: _____

Driver's License #: _____ State: _____ Exp Date: _____

Address: _____ City: _____ State: _____ Zip: _____

Daytime Phone: _____ Fax: _____

E-Mail: _____

Place of Employment: _____ Employer Phone: _____

I certify that:

- I have held an operator's, premises or manager's license within the past two years (*if in another municipality other than the Town of Eagle, proof is required*), have completed the "Responsible Beverage Server's Training Course" (*certificate is required*) OR enrolled in the "Responsible Beverage Server's Training Course" (*copy of enrollment receipt is required*).
- I am familiar with all laws, resolutions, ordinances and regulation, Federal, State and Local, pertaining to the sale of such beverages and liquors, and if granted said license, do agree with and obey all provisions thereof.

Have you ever been convicted of a felony? No Yes

If so, state date, nature of offense and location:

<u>Date</u>	<u>Nature of Offense</u>	<u>Location: City, County and State</u>

Have you been arrested or cited for any other offenses (do not include traffic violations unless it is drug or alcohol-related)? No Yes

If so, state date, nature of offense and location:

<u>Date</u>	<u>Nature of Offense</u>	<u>Location: City, County and State</u>

I do hereby make application for an operator's license from the date hereof to June 30, 20___, inclusive, (unless sooner revoked) to dispense alcoholic beverages on premises requiring a retail Class "A", "Class A", Class "B", "Class B", or "Class C" license, all subject to provisions of and limitations imposed by Chapter 125 of the Wisconsin Statutes and Chapter 6 and all acts amendatory thereof and supplementary thereto.

I further certify that the statements in the foregoing application subscribed by me are true and correct to the best of my knowledge.

Applicant's Signature _____

FOR OFFICE USE ONLY

Receipt #	License # (New/Renewal)	License # (Provisional)	License # (Temporary)
Disposition of Investigative Check			