

Fee: Regular: \$25.00 (Annual)
Provisional: \$15.00 (Valid for 60 days or until regular license is issued)

**Village of Rochester
Racine County**

Date Issued/ Denied _____
License # _____

Application for License to Serve Fermented Malt Beverages and Intoxicating Liquors (Operator's)

I hereby make application for an Operator's License under Section 125.17(1) of Wisconsin State Statute to sell/serve alcohol beverages in a Class "A" or Class "B" licensed establishment. I hereby agree that I will comply with all laws, resolutions, ordinances and regulations, State and Local, affecting alcohol beverages, if a license is granted to me.

I understand that the Regular Operator's License will expire on June 30th following the date of issuance.

Birth date _____ Driver's License # _____

Answer the following questions fully and completely: (Please print.)

Name of Applicant _____
First Middle Initial Last

Address of Applicant _____

Phone # _____ Is Application new or a renewal? _____

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

As required by WI Statutes Section 125.17(6), have you completed the alcohol awareness course? _____
If this is a new application, attach a copy of your course completion certificate.

Have you been convicted of any felony or of violating any law of the State of Wisconsin or of the United States?
_____ Date of such conviction _____

Name of Court _____

Nature of Offense _____

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

Place at which you will be selling/ serving alcohol beverages _____

CONSENT TO DISCLOSURE

I, by signing this application, consent to the full investigation of my background by law enforcement officials and also consent to the use and disclosure by the Village of Rochester, its elected officials, its employees and agents, of any and all information obtained in said investigation relative to my competency to be licensed for said position for which I am applying.

X _____
Signature

Date of Application