

VILLAGE OF ARLINGTON

APPLICATION TO SERVE FERMENTED MALT BEVERAGES AND INTOXICATING LIQUORS

Pursuant to Section 16-20, subject to limitations imposed by Wis. Stats. 125.17 and 125.68(2)

Name: Last, First & Middle Initial	Previous Last Name	Home Phone #	
Street Address	City	State	Zip Code
Driver's License Number & State	Social Security Number	Sex	Date of Birth

How long have you continuously resided in Wisconsin? _____ Since Birth

Place of employment as an Operator and phone number? _____

How long have you been employed as a Wisconsin Operator? _____ In the Village? _____

Have you completed the Beverage Server Program? YES NO If yes, where? _____

Copy of certificate of completion must be provided to the Village.

Have you been arrested for any crime within the past 7 years? YES NO

If yes, for what, date, county, and issuing agency? _____

Have you been convicted of any crime within the past 7 years? YES NO

If yes, for what, date, county, and issuing agency? _____

Are there pending criminal charges against you? YES NO

If yes, for what, date, county, and issuing agency? _____

Have you ever been issued a village, city, or county ordinance citation involving any of the following:

drugs, disorderly conduct, resisting/obstructing arrest, or assaultive behavior? YES NO

If yes, for what, date, county, and issuing agency? _____

Have you been arrested for or convicted of any alcohol-related offenses within the past 7 years? (Offenses

may include, but are not limited to: operating a motor vehicle while intoxicated, underage drinking, procuring alcohol to under-age persons, open intoxicants, etc.) If so, explain: _____

The undersigned deposes and states that he/she is the person in the foregoing application that applicant has read and made a complete answer to each question, and the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application.

False information on this application may result in denial.

Signature

Date of Application

New Operator \$15.00 60 Day Provisional Operator \$15.00 # _____ Exp: _____

Renewal Operator \$15.00 Temporary Operator \$0.00 (one per year limit)

BOTTOM PORTION FOR ADMINISTRATIVE USE

License # _____ This license expires _____

Clerk Department Approval: _____ Recommended _____ Not Recommended _____ DOJ Checked _____

Reason for denial, if not recommended: _____

Village Clerk Signature	Date	Receipt Date:
Date Approved by Village Board	Date Issued	Receipt #