

OPERATOR LICENSE APPLICATION

I, the undersigned, do hereby respectfully make application to the governing body of the Village of Muscodia, Grant and Iowa Counties, Wisconsin for a license to serve Fermented Malt Beverages and Intoxicating Liquors until the end of the license year (unless sooner revoked), subject to the limitation imposed by Section 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 be granted to me.

All information must be clearly printed

First Middle Last
Address: _____ City: _____ Zip: _____
Date of Birth: ____/____/____ Social Security Number: ____-____-____
Race: _____ Male / Female Maiden Name: _____

Have you completed a responsible beverage server training course as required by law-WI SS 125.17 (6)?
Yes / No If yes, a copy must be attached, unless already furnished.

Do you have any felony and/or misdemeanor charges presently pending against you that relate to regulating the sale of Fermented Malt beverages or Intoxicating Liquors? Yes / No If yes, give offense and location of court.

Have you **EVER** been convicted of violating any license law or ordinance regulating the sale of Fermented Malt beverages or Intoxicating Liquors? Yes / No If yes, give offense and date convicted.

If you were convicted of a Felony regulating the sale of Fermented Malt beverages or Intoxicating Liquors, the Village of Muscodia will not issue you a license.

A CRIMINAL BACKGROUND CHECK WILL BE COMPLETED ON ALL APPLICANTS

I, certify that all above statements are true and correct. I further acknowledge that providing false, inaccurate, misleading or incomplete information shall result in the Village of Muscodia automatically rejecting this application.

Signature of Applicant

Place of Employment - OR - Name of Non-profit organization

Office Use:
Amount Paid \$ _____ **Non-refundable** Date Paid _____

Village Official Signature Name of Temporary Event

Regular \$17; Provisional \$5; Temporary \$10 Date of event: _____