Office Use: Attach copy of training certificate Bill to Establishment (renewal season only) Attach copy of receipt(s) Establishment Paid in Advance (renewal season only) Attach copy of provisional license if issued Applicant Paid (receipt attached) Attach copy of license if issued **CITY OF WAUPUN OPERATOR LICENSE APPLICATION** License expires June 30 of every year **APPLICATION FOR**: (PLEASE CHECK ALL THAT APPLY) **Recommended for Approval:** Police Chief _____ 🗆 Yes 🗆 No **REGULAR OPERATOR LICENSE- \$20.00** License No. _____ □ NEW APPLICANT □ RENEWAL APPLICANT □ PROVISIONAL OPERATOR LICENSE-\$10.00 License No._____ License expires 60 days after issuance. Name as appears on Driver's License____ Middle First Last Maiden Race: Circle one: Male Female Date of Birth___/___ Driver's License No. and State _____ Address:_____City, State, Zip: _____ Home Phone#: Cell Phone #: Citizen of United States? \Box Yes \Box No Email Address: _____ How long have you lived at this address?_____ List all previous alias' used _____ What is the name of the establishment where you will be serving/selling Malt Beverages and/or Intoxicating Liquors?_____ Within the last 2 years, did you have or complete one of the following: Yes No -Completed Responsible Alcohol Servers Course -Were the sole proprietor of retail alcohol license -Held an Operator's License issued in WI -Were an alcohol agent for a retail alcohol license HAVE YOU EVER BEEN CONVICTED OF ANY ALCOHOL BEVERAGE RELATED OFFENSES, INCLUDING ANY OF THE FOLLOWING, AS A JUVENILE OR AN ADULT? Please Circle NO 1. Illegal purchase, sale or providing of intoxicating liquor or beer? YES 2. Violation of closing hours at a licensed premise? YES NO 3. Any other violation of laws pertaining to alcoholic beverages? YES NO 4. Disorderly conduct or criminal damage to property that occurred at a licensed establishment? YES NO 5. Obstruction of a police officer while on a licensed premise for the sale of alcoholic beverages? YES NO 6. Operating a motor vehicle while under the influence of alcohol or controlled substance or with a prohibited alcohol concentration (WI Stat 346.63)? YES NO

7. Operating a motor vehicle while under age 21 with a blood alcohol of more than .0% but not more than .08% (WI Stat. 346.63(2)(m)?	YES	NO
8. Having alcohol beverages in your possession in a motor vehicle as a driver or a passenger (WI Stat. 346.935)?	YES	NO
HAVE YOU EVER BEEN CONVICTED OF A FELONY IN WISCONSIN?	YES	NO
HAVE YOU EVER BEEN CONVICTED OF A FELONY OUT OF THE STATE OF WISCONSIN? If yes, what State(s)	YES	NO
DO YOU HAVE ANY CRIMINAL OR ORDINANCE CHARGES PRESENTLY PENDING AGAINST YOU?	YES	NO
DO YOU PRESENTLY HAVE ANY OVERDUE OR OUTSTANDING FORFEITURES RESULTING FROM A VIOLATION OF ANY CITY ORDINANCE?	YES	NO
If you have answered YES to any of the above questions, list the date, nature Of offense and the location of the offense (City, County and State)		
Date Nature of Offense Location: City, County and State		

I hereby apply for a license to serve Fermented Malt Beverages and Intoxicating Liquors, subject to the limitations imposed by Section 125.32(2), and 125.68(2) of the Wisconsin Statutes and all acts amendatory and supplementary of those sections, 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 is granted to me.

The license shall, if issued, be from the date of its issuance to June 30, 20_____, unless the license is revoked by the City of Waupun prior to that date.

I attest I am at least eighteen years of age, is of good moral character, and am the person who made and signed this application for an Operator's License; and that all the statements are true.

(Applicant Signature)