



VILLAGE OF EAST TROY

APPLICATION FOR OPERATOR'S LICENSE

Request: <input type="checkbox"/> New or Renewal (\$60.00)	<input type="checkbox"/> Provisional (\$25.00)	<input type="checkbox"/> Temporary (\$15.00)
2 Year		
NOTE: Above charges include a \$10.00 Investigative Fee		

APPLICANT'S FULL NAME (Please Print) (Last Name, First Name, Middle) (Maiden)			
HOME ADDRESS		CITY	STATE
DAYTIME PHONE		E-MAIL	
NAME OF ESTABLISHMENT			ESTABLISHMENT PHONE

- I certify that:
- I have held an Operator's, Premises or Manager's license within the past two years (If in a municipality other than the Village of East Troy, proof is required), have completed the "Responsible Beverage Server's Training Course" within the past two years (Certificate required) or successfully completed a "Responsible Beverage Server's Training Course" (Copy of Completion Certificate is required).
 - I am familiar with all laws, resolutions, ordinances and regulations, Federal, State and Local, pertaining to the sale of such beverages and liquors, and if granted said license, do agree with and will obey all provisions thereof.
 - I am a citizen of the United States.
 - I have been a resident of the State of Wisconsin continuously since _____.
 - I have been a resident of the (Village / City / Town) of _____ since _____.
 - I am _____ years of age.

Have you ever been convicted of a felony? No Yes If yes, state date, nature of offense and location:
Date Nature of Offense Location: City, County and State (use back of form if needed)

Have you been arrested or issued citations for any other offenses? No Yes If yes, state date, nature of offense and location:
Date Nature of Offense Location: City, County and State (use back of form if needed)

I hereby make application for an Operator's License from the date hereof to June 30, 20____, inclusive, (unless revoked sooner) to dispense alcoholic beverages on premises requiring a retail Class "A", "Class A", Class "B", or "Class B" license, all subject to provisions of and limitations imposed by Chapter 125 of the WI Statutes and Chapter 305 of the East Troy Municipal Code, and all acts amendatory thereof and supplementary thereto.

I further certify that all statements made above are true. I give the Village of East Troy permission to perform any necessary checks to verify the above statements. I understand if any false statements are made on this application it may be grounds for denial. I further agree to comply with and be bound by all laws, ordinances, rules, regulations and penalties pertaining to the requested license. I understand that all fees are non-refundable.

Date _____ **Applicant's Signature** _____
(MAIL OR PICK-UP)

PLEASE ATTACH COPY OF DRIVER'S LICENSE

- For Office Use Only -

Rev 3/2019

Date Paid	Amount Paid	License No (New-Renew 2 Year)	License No. (Provisional)	License No. (Temporary)
	\$			
Disposition of Investigative Check:		Date:	Date Approved by Village Board:	Receipt to: 100-44120