

**\$30.00/\$60.00**

**Application for Operators License**

to Serve Fermented Malt Beverages and Intoxicating Liquors in the Village of Sauk City

Date: \_\_\_\_\_ Fee Paid: \_\_\_\_\_ Receipt #: \_\_\_\_\_ New: \_\_\_\_\_ Renewal: \_\_\_\_\_

WARNING: Failure to fully answer, or falsifying answers, to any of the foregoing questions is a criminal offense and may result in charges in addition to cause for denial of license and will further prevent the applicant from filing another application for a period of six (6) months.

**APPLICATION FEES ARE NON-REFUNDABLE**

I hereby apply for an Operators License to serve, from the date granted **July 1, 2020 until June 30, 2022**, unless revoked, fermented malt beverages and intoxicating liquors subject to the limitations imposed by the Wisconsin Statutes and Village of Sauk City ordinances and all acts amendatory thereof and supplementary thereto. I 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. I am aware that the Village of Sauk City may take up to thirty (30) days to act on my application. **APPLICATION FEES ARE NON-REFUNDABLE**

Driver's License No.: \_\_\_\_\_ Sex: M/F Age: \_\_\_\_\_ years old

Date of Birth: \_\_\_\_\_ Prospective Employer: \_\_\_\_\_

Print Name: \_\_\_\_\_  
(First Name) (FULL Middle Name) (Last Name)

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

**Answer the following questions fully and completely:**

Name of applicant: \_\_\_\_\_

Address of applicant: \_\_\_\_\_

Have you been found guilty or pled No Contest to any violation, any State Laws, Federal Laws or Local Ordinances? (Speeding tickets are a conviction.) \_\_\_\_\_

What Violation(s): \_\_\_\_\_

Date of Conviction(s): \_\_\_\_\_ Name of Court: \_\_\_\_\_

Have you been convicted of violating any License Law or Ordinance Regulating the Sale of Beverages or Intoxicating Liquors?: \_\_\_\_\_

**\*\*\*\*\*This section below must be signed in front of a Notary Public\*\*\*\*\***

I have read the Wisconsin Alcohol Beverage Laws for Retailers and Fully Understand the Laws.

Applicant Signature: \_\_\_\_\_

STATE OF WISCONSIN, SS SAUK COUNTY

Being first duly sworn on oath say that I am the person who made and signed the foregoing application for an operator's license and that all the statements made by the applicant are true.

Applicant Signature: \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_.

\_\_\_\_\_ Notary Public, Sauk County, Wisconsin.

Commission expires: \_\_\_\_\_

**Records Check**

**Outstanding Fines & Fees**

Municipal Fines \_\_\_\_\_

Village of Sauk City Fees \_\_\_\_\_

TOTAL \$ \_\_\_\_\_

Recommended for Approval: \_\_\_\_\_ Recommended for Nonapproval: \_\_\_\_\_

**PROVIDING FALSE OR INACCURATE INFORMATION, OR OMITTING INFORMATION, WILL BE GROUNDS FOR DENIAL.**