**2024/2025 APPLICATION FOR OPERATOR’S LICENSE**

**Section 66.054 (1) (f); (11) (a); (b); (c) 176.05 (11) Wisconsin Statutes**

**To the governing body of the Town of Townsend, County of Oconto, Wisconsin:**

I do hereby make application for an Operator’s License in the Town of Townsend from this date to

**June 30, 2025** inclusive, to dispense Fermented Malt Beverages on premises requiring a Retail Class “B” Fermented Malt Beverage License, for sale or service of such beverages to a consumer for consumption in or upon the premises where sold; and to dispense Intoxicating Liquors on premises requiring a Retail Liquor License; subject to provisions of and limitations imposed by Section 66.054 (11) and 176.05 (11) of the Wisconsin Statutes.

**Renewal applicant ($10) \_\_\_\_\_ New applicant ($20) \_\_\_\_\_\_**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth \_\_\_\_\_/\_\_\_\_\_\_\_/\_\_\_\_\_\_

Physical Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Place of Employment: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_ I certify that I have **NOT** been convicted of a felony.

\_\_\_\_\_ I certify that I **HAVE** **BEEN** convicted of a felony. Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ County: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Nature of Offense: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I am a citizen of the United States and a Wisconsin Resident continuously for not less than one year prior to the date hereof and a resident for \_\_\_\_\_\_\_\_\_\_\_\_\_ years in the Town/City of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I have completed a Responsible Beverage Server Course **Y N** Date: \_\_\_\_\_\_\_\_\_\_\_\_\_

Place: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I have held an Operator’s License for \_\_\_\_\_\_\_\_\_\_\_\_ years.

I certify that I am familiar with all laws, resolutions, ordinances, Federal, State and Local pertaining to the sale of Intoxicating Beverages and Liquors and if granted a license do agree to comply with and obey all provisions thereof.

 **Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Office Use Only**

**Wis Circuit Court Checked on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ OK? \_\_\_\_\_**

**Reviewed by Town of Townsend board on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Approved** or **Denied**