

**APPLICATION FOR OPERATOR'S LICENSE: TO SERVE FERMENTED MALT BEVERAGES
AND INTOXICATING LIQUOR IN THE VILLAGE OF LYNDON STATION**

NEW: _____ RENEWAL: _____ PROVISIONAL (60days/No extensions): _____

Instructions: Complete sections 1 through 6. Return this form to the Village of Lyndon Station Clerk's Office with the appropriate fees. Please PRINT clearly. Illegible applications will be returned. You must be 18 yrs. old or older to apply.

1. Place of Employment Under License (if applicable): _____ Business Phone Number: _____

2. Applicant Name: _____
 Last Name **First Name** **Middle** **Maiden**

Date of Birth: _____ Sex: M - F Social Security Number: _____

Driver's License # _____ State Issued: _____ Expiration Date: _____

Current Address: _____
 House Number **Street Name** **City** **State** **Zip**

Phone Number: _____ Email Address: _____

3. Applicants: State Statute 125.17(6) requires proof of completion of a Responsible Beverage Server Course (must be submitted before the application is reviewed by the Village Board) A PROVISIONAL OPERATOR LICENSE may be issued only if the applicant is enrolled in a training course (must provide enrollment receipt and course certificate once completed.) APPLICATIONS WILL NOT BE ACCEPTED UNLESS PROPER PROOF IS SUBMITTED.

Within the last two (2) years, did you have or complete one of the following: (Check and attach a copy of ONE of the following)

- Successfully completed a Responsible Beverage Server Training Course within last 2 years (Attach Certificate)
- Held a valid Operator's License issued in Wisconsin within past 2 years (Attach proof, if not Lyndon Station)
- No, I am currently enrolled in an approved Responsible Beverage Server Training Course; please include a Provisional (60 day) Operator License. (Additional fee of \$15 - must submit approved course enrollment receipt and certificate after completion)

4. Do you have any pending charges or have you ever been convicted of the following violations, in or outside of Wisconsin? Include ALL violations.

- | | |
|--|----------------|
| Any Pending Charges | Yes ___ No ___ |
| Any Felonies (no date limit) | Yes ___ No ___ |
| Any Misdemeanors (no date limit) | Yes ___ No ___ |
| Any Traffic and Local Ordinances (no date limit) | Yes ___ No ___ |
| Any Alcohol Related Offenses (no date limit) | Yes ___ No ___ |

VIOLATION	DATE	LOCATION

5. I hereby apply for a license to serve Fermented Malt Beverages and Intoxicating Liquors subject to the limitations imposed by Sections of 125.04, 125.12, 125.32(2) and 125.68(2) of the Wisconsin Statutes and all acts amendatory thereto and supplementary thereof and I hereby agree to comply with all Federal, State or local laws, resolutions, ordinances and regulations, affecting the sale of such beverages and liquors if a license be granted to me. This license shall expire on **June 30th**, the second year after the date of issuance. (Or sooner if revoked)

The undersigned, being first duly sworn on oath says that he/she is the person named in the foregoing application for an operator's license; that all the statements made by the applicant are true and correct. I further understand a full background investigation may be conducted by the Lyndon Station Police Department prior to consideration of this application. Additionally, I further understand that falsification of any information shall be grounds for denial or revocation of this license and may result in criminal prosecution.

Applicant's Signature

Subscribed and sworn to before me
 This ___ day of _____, _____

(SEAL)

 Village Clerk or Notary Public
 My commission expires _____

Official Use Only

	<u>One Year</u>	<u>Two Year</u>
New Application	\$40.00	\$50.00
Renewal Application	\$25.00	\$35.00
Provisional (60 day)	\$15.00	

Date Received in Office: _____ Receipt Number: _____

Forwarded to Lyndon Station Police Department on: _____

FOR POLICE DEPARTMENT INVESTIGATION USE

Data/Records: _____

Other: _____

Forward to Board for Approval: _____

Police Recommendation: Approval Denial

Officer Signature Date