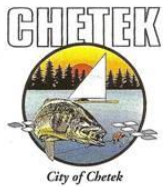


Call to pickup \_\_\_\_\_ phone number: \_\_\_\_\_



**Application for License to serve fermented malt beverages & Intoxicating Liquors**

- 60 day provisional \_\_\_\_\_ to \_\_\_\_\_  
Fee- \$17.00
- Annual \_\_\_\_\_ to June 30<sup>th</sup> \_\_\_\_\_  
Fee - \$30.00

I hereby apply for a license to serve fermented malt beverages and Intoxicating liquors, subject to the limitation imposed by Section 125.32(2) and 125.68(2) of the Wisconsin Statutes and all acts amendatory thereof and supplementary thereto, 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 be granted to me. **To the best of my applicant's knowledge and belief, the information on this application is true, correct and complete.**

Applicant Name (last, first, MI)	Phone number:
Address:	City/State/Zip
mailing address (if different from above)	Date of birth ___ / ___ / ___
Drivers license # ___ / ___ / ___ State of Issue: ___	driver license expiration date: ___ / ___ / ___
Establishment where you will be employed:	Notes:

**Answer the following questions:**

Are you renewing a bartender/operator license issued by the City of Chetek? Yes  If yes, expiration date \_\_\_\_\_ No

Have you held a bartender/operator license issued by another municipality or completed the "Responsible Beverage Training Course" within the previous two years? Yes  If yes, date of issue \_\_\_\_\_ municipality issued by: \_\_\_\_\_ No

**Attach a copy of license or training certificate.**

**If you answered "no"** to both questions above, you will need to complete the "Responsible Beverage Training Course" before a license can be issued.

This application is subject to a criminal background check by the police department, amongst other things. Your arrest or conviction record may justify the denial of your application if the circumstances of the charges substantially relate to the alcohol beverage licensing activity, if you have been a habitual law offender, or if you have been convicted of a felony.

Applicant signature \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_  
Signed in front of employer \_\_\_\_\_ employer signature \_\_\_\_\_  
(Employer signature) printed name of employer

Or  
\_\_\_\_\_  
Signed in front of notary State of Wisconsin }  
Barron County } Signed or attested before me on \_\_\_\_\_ by \_\_\_\_\_  
\_\_\_\_\_, notary - commission expires \_\_\_\_\_

*(Your completed license will be mailed to the above address unless you request us to call you to pick it up.)*

**Official use only**

Receipt # \_\_\_\_\_ date \_\_\_\_\_ Attached: \_\_\_ training certificate or \_\_\_ copy of a license

Application reviewed by police official: \_\_\_\_\_ Date: \_\_\_\_\_

Approved \_\_\_\_\_ Denied \_\_\_\_\_ Denial is based on the following offenses: \_\_\_\_\_

Appeal to council date: \_\_\_\_\_ approved \_\_\_\_\_ denied \_\_\_\_\_ License # \_\_\_\_\_