



BEVERAGE OPERATOR LICENSE APPLICATION

****To prevent errors during background checks, we require each applicant to include a copy of their state issued Driver License or State Issued ID**

AND

For new applicant: proof of current Wisconsin Responsible Beverage Training
 For renewals (meaning you currently hold an operator's license): a copy of your current operator's license or
 proof of current Wisconsin Responsible Beverage Training

Application fees will not be refunded. A police background check will be completed. Please read carefully & answer all questions. Falsification, misrepresentation or incompleteness may be grounds for denial.

PLEASE PRINT

PERMIT TYPE:	_____ 1 year (\$30.00) _____ 2 year (\$50.00)		_____ NEW _____ RENEWAL	
	_____ Temporary (\$10.00)*		Date of Event: _____	
	*Have you previously had a Temporary Beverage Operator's License in the current calendar year for which you are applying? _____ YES _____ NO			
NAME (Must be <u>legal</u> name)				
		FIRST	FULL MIDDLE	LAST
PREVIOUS NAME		OTHER NAMES/ALIASES EVER USED		
DATE OF BIRTH	PHONE NUMBER			
ADDRESS		STREET ADDRESS	CITY	STATE ZIP
PLACE OF EMPLOYMENT <small>Where you will be using the license; must be in the Village of Iola</small>				
IDENTIFICATION NUMBER <small>Driver License/State ID Number</small>				
How Long have you been a resident of the State of Wisconsin?				
Have you ever had a Beverage Operator's License before?		_____ YES* _____ NO		
*If yes, where? (Attach proof of any current license issued outside of the Village of Iola)				

(APPLICATION CONTINUES ON SIDE 2)

FOR OFFICE USE ONLY				
POLICE DEPARTMENT		Date Background check approved:		Authorized by:
CLERK'S OFFICE		Date Rec:	Amt. Paid:	_____ Training certificate _____ Driver's License or ID
BEVERAGE OPERATORS LICENSE #:			Date Issued on:	
Temporary License valid from: ____/____/____ to ____/____/____				
NOTATIONS:				

VIOLATIONS

Please read the following questions carefully! Include any pending violations and/or charges, even if dismissed. Failure to provide complete and accurate information may result in the denial of this application. If this is a renewal, only list violations from the date of your last application.

***Drug/Alcohol related Offense* is to be read in the broadest possible sense. If you have any doubt as to whether an offense is considered alcohol/drug related, you shall disclose the information.**

Have you EVER had an Operator's License revoked and/or suspended?	___ YES* ___ NO
*If yes, identify location(s), allegation(s), approximate date(s), and disposition(s):	
Have you EVER been <u>convicted</u> of a FELONY?	___ YES* ___ NO
*If yes, identify location(s), allegation(s), approximate date(s), and disposition(s):	
Have you been <u>convicted</u> of a MISDEMEANOR or ORDINANCE VIOLATION in the past 10 years?	___ YES* ___ NO
*If yes, identify location(s), allegation(s), approximate date(s), and disposition(s):	
Are there any <u>pending</u> FELONY, MISDEMEANOR or ORDINANCE VIOLATION charges against you?	___ YES* ___ NO
*If yes, identify location(s), allegation(s), approximate date(s), and disposition(s):	
Have you ever, as an adult, been <u>convicted</u> of a drug/alcohol related offense*?	___ YES* ___ NO
*If yes, identify location(s), allegation(s), approximate date(s), and disposition(s):	
Are there any <u>pending</u> drug/alcohol related offenses* against you?	___ YES* ___ NO
*If yes, identify location(s), allegation(s), approximate date(s), and disposition(s):	

CERTIFICATION AND ACKNOWLEDGEMENT

(Please **read** and **initial** statements below to certify and acknowledge the following statements.)

_____ I further certify that I am familiar with the laws, ordinances, and regulations pertaining to the sale of malt and liquor beverages and I hereby agree, if granted said license to obey all provisions of said laws.

_____ Under penalty of law, I swear that the information provided in this application is true and current to the best of my knowledge and belief. I understand that incomplete or incorrect information provided in response to any questions on said application may result in the denial of this application.

Applicant's Signature

Date