

APPLICATION FOR AN OPERATOR'S LICENSE

I, the undersigned, do hereby respectfully make an application to the local governing body of the Village of Hixton, County of Jackson, Wisconsin, for a License to serve, from the date hereof to June 30, 20\_\_\_\_ inclusive (unless sooner revoked,) Fermented Malt Beverages and Intoxicating Liquors, subject to the limitations 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 would be granted to me.

I certify that I am \_\_\_\_\_ years of age. DATE of BIRTH \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_ x \_\_\_\_\_  
Signature of Applicant

ANSWER THE FOLLOWING QUESTIONS FULLY AND COMPLETELY:

NAME OF APPLICANT \_\_\_\_\_  
ADDRESS OF APPLICANT \_\_\_\_\_  
\_\_\_\_\_

IF RENEWAL, (Within the past 2 years held a CLASS "A", "B", OR "C" License or Permit or a Manager's or Operator's License)  
WHERE WAS THE PRIVILEGE OBTAINED? (CITY, VILLAGE, TOWN) \_\_\_\_\_

AS REQUIRED BY WI STATUES SECTION 125.71(6), HAVE YOU COMPLETED THE ALCOHOL AWARENESS COURSE? \_\_\_\_\_  
IF SO, WHERE? \_\_\_\_\_

HAVE YOU BEEN CONVICTED OF VIOLATING ANY LICNSE LAW OR ORDINANCE REGULATING THE SALE OF FERMENTED MALT BEVERAGES OR INTOXICATING LIQUORS? \_\_\_\_\_  
NATURE OF VIOLATION? \_\_\_\_\_

\_\_\_\_\_, being first duly sworn on oath says that (s)he is the person who made and signed the foregoing application for an operator's license; that all the statements made by the applicant are true.  
(Please Print Name Here)

X \_\_\_\_\_  
Applicant sign here Location of Employment

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

\_\_\_\_\_  
Clerk/Deputy Clerk