APPLICATION FOR A *PROVISIONAL* OPERATOR'S LICENSE

(All questions must be answered fully and completely)

I hereby apply for license to serve, for 60 days, from now to _____, 20___, inclusive (unless sooner revoked), Fermented Malt Beverages and Intoxicating Liquors, subject to the limitations imposed by Sections 125.32(2) and 125.68 of the Wis. Stats. 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.

1. **Name of Applicant (Print) _____**
   First Middle Last
   Have you ever used a different name (Maiden, Previous Marriage, Legal Name Change)? Yes No
   If "Yes", please list all names. Use reverse side if necessary.
   _____ _____ _____

2. **Address of Applicant _____**
   Street City/Village/Town State/Zip

3. **How long have you lived at above address? _____ If less than 10 yrs, please submit previous addresses on reverse side.**

4. **Telephone Number _____ Date of Birth _____ Sex M F**

5. **Driver's License Number _____ Social Security Number _____**

6. **Where will you work? _____**

7. **Have you been convicted of violating any Federal, State or Local Laws or Ordinances?**
   Exclude minor traffic offenses) Yes No

   If "Yes", give details. Use reverse side if necessary. _____
   Date Court Nature of Offense

STATE OF WISCONSIN, }
COUNTY OF LAFAYETTE }SS

The undersigned being first duly sworn on oath, deposes and says that he/she is the applicant named in the foregoing application and he/she has read (or had read) each of the questions in said application and that he/she has made complete answers to each questions, and that he/she said answers are true and correct.

_____ _____
Date Applicant's Signature

Subscribed and sworn to before me on this _____ day of _____, 200___.

_____ My Commission expires _____

POLICE DEPARTMENT USE ONLY. DO NOT WRITE BELOW THIS LINE

I have received the information submitted within this application and have found it to be: Accurate Inaccurate

COMMENTS:

In addition, I have found supplemental background information on the applicant which is substantially related to circumstances of the licensee's activity and should be considered in the issuance of the requested license. Yes No

COMMENTS:

APPROVED: YES *NO*

Date Police Department Representative

Office Use Only

Clerk:_____ Approved / Denied $15 Provisional License Receipt #_____ License #: _____