



VILLAGE OF FOX POINT APPLICATION FOR OPERATOR'S LICENSE

Date: _____ New License Renewal License

To be issued... As soon as approved Beginning of next license year (July 1)

Fee: \$120

- License is good for 2 years. License period runs from July 1 to June 30.

Answer the following questions completely. All questions must be answered or your application will not be processed.

Name & address of place of employment: _____

Last Name	First Name		Middle Name	Gender
Home Address	Apt #	City	State	Zip
Phone #	Date of Birth		Birth City & State	
Driver's License or State I.D. #	Issuing State			
Email				

Note: Additional personal information may be required for the purpose of completing a background check.

If approved, your license will be mailed to you. Please provide your mailing address:

Mailing Address	Apt #	City	State	Zip
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Have you successfully completed a Wisconsin-approved beverage serve training course within the last 2 years? Yes No

Note:

- **Training course must be approved by the Wisconsin Department of Revenue.** [See here](#) for a list of approved providers and courses.
- *New licenses require a copy of the certificate of completion for the Responsible Beverage Service Course.*

Have you held an operator's license within the last 2 years? Yes No

Please provide your license # and year of expiration. If license was not issued from the Village of Fox Point, a copy of your operator's license from other municipality must be provided.

Term of License	Name of Municipality
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Have you ever been convicted of any felony or misdemeanor for violation of any Federal law, any Wisconsin law, or any laws of any other state or ordinances of any other municipality?
 Yes No

If yes, provide law or ordinance violated, trial court, trial date, and penalty imposed, and/or date, description and status of charges pending: _____

Have you ever been convicted of violating any license, law, or ordinance regulating the sale of beverages or intoxicating liquors?
 Yes No

If yes, provide law or ordinance violated, trial court, trial date, and penalty imposed, and/or date, description and status of charges pending: _____

The Village of Fox Point Police Department will perform a background check.

In applying for licensing within the Village of Fox Point, I understand that I am required to provide my "full" name, address and other information necessary for the Village of Fox Point Police Department to conduct a personal history search.

I hereby apply for a license to serve Fermented Malt Beverages and Intoxicating Liquors, subject to the limitations imposed by Chapter 125 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 is granted to me.

I certify that I am the person who made and signed the foregoing application for an operator's license and that all the statements made herein are true and correct.

 Applicant Signature

 Date

Office Use Only

Receipt #: _____ Date Paid: _____ Date Sent to Police Dept.: _____

License #: _____ Date Issued: _____ Expiration: _____

Has the applicant successfully completed the responsible alcohol beverage training course or held and operator's license within the last 2 years? Yes No

Has the granting of a license been approved by the Police Department?
 Yes No Date Approved: _____