Village of Pardeeville
Application for an "Operator's" License

I, the undersigned, hereby make application to the local governing body of the Village of Pardeeville in Columbia County, for an "Operator's" License as provided by WI Statute 125.17, for the license year July 1, 2018 through June 30, 2019.

I certify that I am _____ years of age, and am familiar with the laws, ordinances, and regulations governing the sale and service of alcoholic beverages, and agree, if granted this license, to obey all provisions of local and state laws governing such sale and service.

Name _____ **Date of Birth** _____
　　　　Last　　　　　First　　　　　Middle

Drivers License #_____ **Social Security #**_____

Current Address _____ **Phone #** _____
　　　　　　Street Address, City, State, Zip

List all prior addresses for the last 5 years:

Street Address	City	State	Zip	From	To

City and State where you were born: _____

Name of Employer's Business _____ **Phone #** _____

　　HAVE you ever held an alcohol or operator's license from the Village of Pardeeville? _____Yes_____No

　　HAVE you ever held an alcohol or operator's license from another municipality/township? _____Yes_____No
　　If Yes, specify where and when:_____

　　HAVE you **EVER** been convicted of **ANY** offenses in **ANY** State? _____Yes_____No
　　If Yes:
　　For what?_____
　　　　　　　　　　　　When_____ Which
　　　　　　　　　　　　Court?_____

　　For what?_____
　　　　　　　　　　　　When_____ Which
　　　　　　　　　　　　Court?_____

HAVE you completed the state-required "Beverage Server" Course?_____Yes_____No. If yes, please provide a copy of the certificate of completion with this application. If No, we will issue a Provisional License for 60 days (if you pass the background check), within which time you must complete this course and provide the certificate of completion.

I hereby affirm that the above questions have been truthfully answered. I also authorize the Village of Pardeeville to review and check the information on this application and to refer this application for a full background investigation. I further understand that any incomplete, inaccurate or false answers will constitute sufficient reason for rejection, denial or revocation of the license.

_____　　　_____
　　　　　Applicant's Signature　　　　　　　　　　　　　　　　　　　　Date

Subscribed and sworn to before me this　　　　　**FEES:** (Certified or Uncertified)
_____day of _____, 20_____

　　　　　　　　　　　　　　　　　　　　　　　　Operator's(C) -　　$30.00　Cash___Ck___
_____　　　　　Provisional (UC) -　$15.00　Cash___Ck___
Signature 　**Circle one: Clerk/Notary Public**　　　　Background Check - $10.00
　　　　　　　　　　　　　　　　　　　　　　　Cash___Ck___

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For Office Use:
Approved____Rejected____ at Village Board meeting on _____ Background Check Confirmation #_____
　　　　　　　　　　　　　　　　　　　　　　Date