# VILLAGE OF BELMONT

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## Application for an "Operator's" License

**To Serve Fermented Malt Beverages & Intoxicating Liquors**

**PLEASE PRINT the answers to the following questions fully *and* completely:**

Name (first/middle/last) _____ Phone No.: _____

Alias Names, if applicable _____

Address, City _____>Is application new or a renewal? _____

If renewal (within the past 2 years held a Class "A", "Class A", "Class C", Class "B" or "Class B" license or permit or a manager's or operator's license), where was the privilege obtained? (Town / City / Village) _____ (Provide a copy if NOT licensed from V/Belmont)

>As required by WI Statutes Section 125.17(6), have you completed the alcohol awareness course? _____ If so, where & when? _____ (If NEW application, provide a copy with application.)

**NOTE: A BACKGROUND CHECK WILL BE DONE BEFORE THIS APPLICATION IS PRESENTED TO THE VILLAGE BOARD.**
(Failure to be completely forthcoming may result in your application being denied)

>Have you been convicted of any felonies, misdemeanors, local ordinances, or traffic law violations in the United States? _____

If yes, date(s) of such conviction _____ Name of Court _____

Nature of offense(s) _____

_____
(use the back of this sheet if necessary)

>Have you been convicted of violating any license law or ordinance regulating the sale of fermented malt beverages or intoxicating liquors? _____ If yes, nature of violation(s) _____

>Social Security Number _____ >Driver's License Number (Provide Copy) _____

>Employing Agency _____ >Employer's Phone Number: 762-_____

I, the undersigned, do hereby respectfully make application to the local governing body of the Village of Belmont, County of Lafayette, Wisconsin for a license to serve, from date hereof to **June 30, 2018**, 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 be granted to me.

I certify that I am _____ years of age. Date of Birth _____/_____/19___ **X**_____
Applicant's Signature

**XXXX