CITY OF GALESVILLE
APPLICATION FOR LICENSE TO SERVE FERMENTED MALT BEVERAGES AND INTOXICATING LIQUORS

TO THE COMMON COUNCIL OF THE CITY OF GALESVILLE, WISCONSIN:
I hereby apply 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 Sections 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 is granted to me.

I authorize the Galesville Chief of Police to submit a driver inquiry notice to the Wisconsin Department of Transportation and an identification record request pursuant to Section 19.35(1) and 165.82 to the Department of Justice regarding any felony or misdemeanor violations. In providing this authorization, I understand any prior convictions may be released to the Common Council and may result in the denial of this license application.

PLEASE PRINT:
Name of Applicant: _____ **Maiden Name:**_____
(include any aliases) **First** **Middle** **Last**

Date of Birth: _____ **WI Driver's License #** _____ **Phone:**_____

Address:_____**City:**_____**State:**_____**Zip:**_____
(No PO Boxes)

ANSWER THE FOLLOWING QUESTIONS:

- Name of establishment requiring Operator's License _____
- Is this license a ☐ Provisional, ☐ New Operator, ☐ Operator Renewal,
  (**valid for 60 days**)
- Have you held an operator's (bartender's) license within the past 2 years? ☐ Yes ☐ No
- Have you completed a Responsible Beverage Service Training Course in the State of WI within the past 2 years? ☐ Yes ☐ No
  If you answer **"Yes"** to either question and provide us with the license or course completion certificate, you will be issued a license valid until **June 30, 20____.** Otherwise, in accordance with Section 125.17, you will be issued a provisional license valid for **60 days**.
- Have you ever been convicted of violating any federal, state or local law regarding a controlled substance or for an act which substantially relates to the application? ☐ Yes ☐ No

Date	Nature of Offense	County	State

Please list additional convictions on reverse side of sheet.

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. Any person who knowingly provides materially false information on this application may be required to forfeit not more than $1,000.

_____ Signature of Applicant
_____ Approval of Chief of Police

Date received and filed w/municipal clerk	Date reported to council	License # and date of issue
Provisional License number/date issued	Amount paid	Signature of clerk/deputy clerk