



TOWN OF LAFAYETTE – OPERATOR’S LICENSE APPLICATION / *SUBMIT APPLICATION WITH FEE*

PHONE 715 723-7692 ~ 5765 197TH ST., CHIPPEWA FALLS WI 54729

ALL QUESTIONS MUST BE ANSWERED COMPLETELY AND ACCURATELY BEFORE THE APPLICATION MAY BE PROCESSED AND THE FEE MUST BE PAID. REFUNDS WILL NOT BE ISSUED ONCE APPLICATION HAS

FEE: \$ 10.00 for License \$ 8.00 for Record Check TOTAL FEE AMT: \$ 18.00

THE OPERATOR’S LICENSE EXPIRES ON JUNE 30TH OF EACH YEAR. Not one year from date of application for license.

DATE OF APPLICATION: MONTH _____ DAY _____ 20 _____ *PLEASE PRINT*

FIRST _____ LAST NAME _____ MI _____

ADDRESS _____ CITY _____ STATE: _____ ZIP: _____

DATE OF BIRTH: ___/___/___ SOCIAL SECURITY # _____ PHONE _____

Does hereby apply for a License to serve from **date of application**, 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 WI 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.**

OPERATOR FOR NAME OF BUSINESS/BAR _____

Have you been convicted of any felony or of violating any law of the State of Wisconsin or the United States?
YES _____ NO _____ Nature of Offense: _____

Do you currently hold an operator’s license in another community: YES ___ NO ___ Where: _____

Have you completed the Alcohol Awareness Course? YES _____ NO _____

Date completed _____ and a copy of course completion required.

SIGNATURE OF APPLICANT _____

BEEN SUBMITTED. THE TOWN OF LAFAYETTE WILL DO A BACKGROUND CHECK BASED ON APPLICATION.

LIQUOR LICENSE HOLDERS AND/OR APPLICANTS FOR OPERATORS LICENSE. The operator license fee is \$10.00 and a criminal record check fee completed by the Town is \$ 8.00. THE APPLICATION MUST BE FILLED OUT COMPLETELY TO BE PROCESSED. If a record check reveals inconsistencies from your application, and/or felony charges, your application may be rejected and the fee forfeited.

State of Wisconsin law requires that applicants complete and approved Responsible Beverage Server’s course / Alcohol Awareness Course if they have not held a valid license or completed the course within the last two years. Proof of the class must be provided. If the course has not been completed you may be issued a PROVISIONAL OPERATOR’S LICENSE which is valid for 60 days. If we do not receive proof of your class completion your Provisional License will expire.

FOR OFFICE USE BACKGROUND CHECK DATE _____ BY _____ YEAR OF LICENSE 20 _____ /20 _____

PROVISIONAL LICENSE # _____ DATE OF ISSUE _____ AMT PD _____ CK/CASH

OPERATOR’S LICENSE # _____ DATE OF ISSUE _____ AMT PD _____ CK/CASH

EMPLOYERS: You are responsible for obeying Wisconsin’s Alcohol Beverage Laws.