

Application for an Operator's License

Town of Lucas, Dunn County, WI

To serve fermented malt beverages and intoxicating liquors

Answer the following questions fully and completely (please type or print):

Name of applicant: _____ New application Renewal application

Address of applicant: _____

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 Village City of _____

Have you completed a responsible beverage server training course that conforms with WI Stat. 125.17(6)(a)? Yes No

If yes, where? _____

Have you been convicted of any felony or of violating any law of the State of Wisconsin or the United States? Yes No

Date of conviction: _____ Name of court: _____

Nature of offense: _____

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

Nature of violation: _____

I, the undersigned, do hereby respectfully make application to the local governing body of the Town of Lucas, Dunn County, Wisconsin for a license to serve, from the date hereof to June 30, 2024, 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 be granted to me. All statements made in this application are true.

I certify that I am _____ years of age. Date of birth ___/___/____

(signature of applicant)

Subscribed and sworn before me this _____ day of _____, 20____

(signature of Town Clerk or Notary Public)

Office Use Only

\$17 fee received Background check completed Date: _____

Approved by Lucas Town Board Date: _____

License #: _____ Issue date: _____ Expiration date: _____

Clerk signature: _____