



AT THE EDGE OF THE CITY AND
THE HEART OF EVERYTHING

Village of Shorewood
3930 N Murray Ave.
Shorewood WI 53211
Telephone (414) 847-2601

License Fee: \$80.00 – Good for two (2) license years.
A license period runs for two (2) years from July 1 to June 30. No proration for partial years. Background check included in fee.

APPLICATION FOR OPERATOR'S LICENSE TO SERVE FERMENTED MALT BEVERAGES AND INTOXICATING LIQUORS

PLEASE ANSWER THE FOLLOWING QUESTIONS FULLY AND COMPLETELY:

Date: _____ New License* **OR** Renewal License

New applicants must show proof of completion of the "Responsible Beverage Server" course prior to submission.

I request the license be issued: as soon as approved **OR** at the beginning of the next license year (July 1)

Name/Address of Employer: _____

First Name:		Last Name:		Middle Initial:	<input type="checkbox"/> Male
					<input type="checkbox"/> Female
Home Address:		City:	State:	Zip:	
Telephone Number:	E-mail Address:		Race:		
			This information is required for the background check.		
			<input type="checkbox"/> White		
Date of Birth:	Driver's License Number:		<input type="checkbox"/> Black		
			<input type="checkbox"/> Asian or Pacific Islander		
			<input type="checkbox"/> American Indian or Alaskan Native		

If approved, your license will be mailed to you. Please provide the address you would like the license mailed to:

Mailing Address:	City:	State:	Zip:

Have you ever been convicted of any felony or of violating any State or Federal Law? Yes* **OR** No

**If yes, explain the nature of the offense, date and penalty:*

To the Clerk of the Village of Shorewood, Wisconsin: I hereby make application for a license to serve Fermented Malt Beverages and Intoxicating Liquors in the Village of Shorewood, Wisconsin, subject to the provision and limitations imposed by Chapter 125 of the Wisconsin Statutes and all act amendatory thereof and supplementary thereto, and hereby agree to comply with all laws, resolutions, ordinances and regulations, Federal, State, and Local, affecting the sale of such beverages and liquors, if a license be granted me.

READ CAREFULLY BEFORE SIGNING BEFORE A NOTARY: Under penalty provided by law, I certify that the aforementioned information is correct to the best of my knowledge and I agree to operate according to law.

Applicant's Signature

Subscribed and sworn to before me this _____ day of _____, 20_____.

My Commission expires _____
Notary Public, State of Wisconsin

Office Use Only:
Police Chief Approval: _____
Date Approved: _____
License Number: _____
Date Issued: _____