

**APPLICATION FOR LICENSE TO SERVE FERMENTED MALT
BEVERAGES AND INTOXICATING LIQUORS**

FEE: \$ 15.00 license	(Acct #100.125.441200.44121)
25.00 record check	(Acct #100.125.461100.46112)
<u>10.00</u> processing	(Acct #100.125.461100.46112)
\$ 50.00 TOTAL	

DATE: _____

(All pertinent blanks must be filled and questions answered before this application can be processed.)

I hereby apply for a license to serve, for the licensing year ending June 30, 2022, inclusive (unless sooner revoked), Fermented Malt Beverages and Intoxicating Liquors, subject to the limitations imposed by Sections 66.054 (11), 125.32 (2), and 125.68 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 have been a resident of the State of Wisconsin continuously since _____ and of the (circle one) City/Village/Town of _____ continuously since _____; and I am _____ years of age.

I authorize the Hartford Chief of Police to submit a driver inquiry notice to the Wisconsin Department of Transportation and an identification record request pursuant to § 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 City's Finance & Personnel Committee and may result in the denial of this license application.

ANSWER THE FOLLOWING QUESTIONS FULLY AND COMPLETELY: (This form must be signed in order for the application to be processed)

- Name (print) _____
First Middle Last Maiden
- Address _____
Street City/Village/Town State/Zip
- How long have you lived at above address _____. If less than 10 years, please submit previous addresses on reverse side.
- Date of Birth _____ Place of Birth _____
- Phone # _____ Where will you work _____
- 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 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, 2021. Otherwise, in accord with § 125.17, you will be issued a provisional license valid for 60 days.)

Signature of Applicant

PREVIOUS ADDRESSES

Number and Street	City/State	Length of Time
_____	_____	_____
_____	_____	_____
_____	_____	_____

(FOR POLICE DEPARTMENT USE ONLY; DO NOT WRITE BELOW THIS LINE)

I have received the information submitted within this application and have found it to be:
Accurate _____ Inaccurate _____

COMMENTS: _____

In addition, I have found supplemental background information on the applicant which is substantially related to circumstances of the licensee's activity and should be considered in the issuance of the requested license.
Yes _____ No _____

COMMENTS: _____

Based upon this information, I recommend that the license be: Approved _____ Denied _____

Chief of Police

I recommend that the license be: Approved _____ Denied _____

City Clerk