

**CITY OF BLACK RIVER FALLS, WISCONSIN  
APPLICATION TO SERVE FERMENTED MALT BEVERAGES  
AND INTOXICATING LIQUORS**

New Application  
 Renewal  
Date Of Application \_\_\_\_\_

- Operator's License Fee = \$10.00 Valid from date of issuance until June 30, \_\_\_\_\_
- Provisional License Fee = \$ 6.00 Valid for 60 days from date of issuance
- Temporary License Fee = \$ 1.00 Valid for 14 days from date of issuance

**NOTICE:** If this is a New Application, a \$5.00 Background Investigation Fee will be added to the License Fee

**Applicant:** Please print all answers clearly and legibly. You must provide all requested information. An incomplete or illegible application may result in a delay in processing or a denial of a license

Applicants Full Name: \_\_\_\_\_ Date of Birth \_\_\_\_\_  
First Middle Last Month/Day/Year

Address: \_\_\_\_\_ Telephone: ( ) \_\_\_\_\_  
Street City State Zip Code

Driver's License: \_\_\_\_\_ Employer \_\_\_\_\_  
Number State Name of Business for whom Applicant will sell Alcohol Beverages

Type of Business:  Convenience/Grocery Store  Restaurant  Bar  Other

Have you had a Server's License in the last 12 months? If yes, provide name of issuing authority, date issued, and date of expiration in space below.	Yes <input type="checkbox"/> No <input type="checkbox"/>
Have you attended or are you enrolled in a Responsible Server Training Course? If yes, please provide date and location of training in space below.	Yes <input type="checkbox"/> No <input type="checkbox"/>
Are there now any Criminal Charges pending against you? If yes please provide dates of offenses, jurisdiction of charges, and nature of offenses in space below.	Yes <input type="checkbox"/> No <input type="checkbox"/>
Have you ever been convicted of a Felony or Misdemeanor for a violation of Federal, State or Municipal Law pertaining to the sale of Fermented Malt Beverages or Intoxicating Liquors? If yes provide please provide dates of offenses, jurisdiction of charges, and nature of offenses in space below.	Yes <input type="checkbox"/> No <input type="checkbox"/>

**TO THE COMMON COUNCIL OF THE CITY OF BLACK RIVER FALLS**

I, the undersigned, do hereby apply for a license to serve Fermented Malt Beverages and Intoxicating Liquors, subject to the limitations empowered by Chapter 125.04(4) of the Wisconsin State 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 from the date hereof to June 30, \_\_\_\_\_, inclusive unless sooner revoked. I certify that I am a citizen of the United States and I have been a resident of the State of Wisconsin continuously since \_\_\_\_\_ and that I am \_\_\_\_\_ years of age

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

STATE OF WISCONSIN  
JACKSON COUNTY

\_\_\_\_\_ Duly Sworn On Oath, States That He/She Is The Person Who Made And Signed The Foregoing Application For An Operator's License, And That All Statements And Or Representations Made By Said Applicant Are True And Correct

SUBSCRIBED AND SWORN BEFORE ME THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, 20\_\_

Notary Public, Jackson County Wisconsin  
My Commission Expires \_\_\_\_\_

Approved / Disapproved \_\_\_\_\_ Date: \_\_\_\_\_