

Town of Navarino Operator's Licenses Application PLEASE PRINT CLEARLY

Name: (First – Must list full first name) (Middle Initial) (Last) (Previous Last Name)

Street Address City State Zip Code

DOB: _____ Phone: _____

Are you known by or have you used any other name in the past? Yes No If So List

Have you ever been convicted of a felony? Yes No If Yes of what and when?

Have you ever had a Beverage Operator's License? Yes No If yes, where? _____

Have you ever had an Operator's License Revoked and/or suspended? Yes No If yes, reason why?

Have you EVER been convicted of a misdemeanor or ordinance violation in the past five (5) years (e.g. speeding, OWI, disorderly conduct, driving without a license, etc.)? Yes No

If yes, when, where and what type of violation? _____

Do you currently have any pending convictions of a misdemeanor or ordinance violation (e.g. speeding, OWI, disorderly conduct, driving without a license, etc.)? Yes No

If yes, when, where and what type of violation? _____

Have you EVER been convicted of any violation of the Wisconsin Statutes and/or federal law pertaining to the sale of alcoholic beverage and/or the manufacture, possession or deliverance of a controlled substance?

Yes No If yes, when, where and what type of violation? _____

Do you currently have any pending convictions of any violation of the Wisconsin Statutes and/or federal law pertaining to the sale of alcoholic beverage and/or the manufacture, possession or deliverance of a controlled substance?

Yes No If yes, when, where and what type of violation? _____

CERTIFICATION AND ACKNOWLEDGEMENT

I further certify that I am familiar with the laws, ordinances and regulations pertaining to the sale of malt and liquor beverages and I hereby agree, if granted said license, to obey all provisions of said laws.

Under penalty of law, I swear that the information provided in the application is true and correct to the best of my knowledge and belief and that incomplete or incorrect information provided in response to the questions will be grounds for denial of this application or license may be revoked.

_____ Applicant's Signature Date _____

