## APPLICATION FOR AN OPERATOR LICENSE 202\_\_ - 202\_\_ LICENSING YEAR

## TOWN OF WAUSAU, MARATHON COUNTY, WISCONSIN

Wausau, WI. 54403

	ndersigned, hereby makes application for an operator lice provisions of the Wisconsin Statute (Section 125.17) and	ense from the date hereof until and including the $30^{th}$ day of June $202\_\_$ , subject to date attests to the following:
1.	I am years of age and certify that I am a citizen of the United States.	
2.	Have you ever been convicted of any felony or misdemeanor for violation of any Federal law, any Wisconsin law and laws of any other states or ordinances of any municipality? No ( ) Yes ( ) if answer is yes, please complete the following:  Date: Name of Court Pending Charges	
	Have you ever been convicted on any violation of any law or ordinance regulating the sale of intoxicating liquors or beverages? No ( ) Yes ( )	
3.	. I have completed a responsible server training course within the last two years for which I am submitting proof of said training, OR	
4.	4. I have, within the last two years held a manager's retail or operator license, for which I am submitting proof. Issuing authority, expires	
5.	I am applying for this license to work at	
Enclos	sed is a check for \$15.00 made payable to <u>Town of Wausa</u>	a <u>u</u>
	Name (Print)	Date
	Address	Driver License #
	Signed	Phone
Town	e return completed form, required information, & fee to: of Wausau Clerk	Email
23623	35 Forest Lawn Rd.	