

**APPLICATION FOR OPERATOR'S LICENSE**

**New** \_\_\_\_\_ If new to Town of Dunn, please attach your Learn to Serve Certificate taken within the last two years or a Copy of your Wisconsin Operator's License held within the last two years

**Renewal to Town of Dunn** \_\_\_\_\_

TO THE TOWN CLERK OF THE TOWN OF DUNN, WISCONSIN:

I hereby apply for a license to serve from date hereof to June 30, \_\_\_\_\_ inclusive (unless sooner revoked), Fermented Malt Beverages and Intoxicating Liquors, subject to the limitations imposed by Section 66-054(11) and 176-05(11) of the Wisconsin Statutes and all acts amendatory thereof and ordinances and regulations, Federal, State of Local, affecting the sale of such beverages and liquors of a license be granted to me. I certify that I am a citizen of the United States and that the following completed statements are correct and true.

**(PLEASE PRINT NEATLY)**

Name of Applicant \_\_\_\_\_ Gender M/F  
(First) (Full Middle) (Last)

**Other Names Maiden/Alias** \_\_\_\_\_

Address of Applicant \_\_\_\_\_ DOB \_\_\_\_/\_\_\_\_/\_\_\_\_  
(No.) (Street) mm/dd/yyyy

\_\_\_\_\_  
(City) (State) (Zip Code)

Social Security Number: \_\_\_\_\_ Driver's License Number \_\_\_\_\_ State \_\_\_\_\_

Ethnicity: White Black Asian or Pacific Islander American Indian or Alaskan Native

Phone Numbers: Cell \_\_\_\_\_ Home \_\_\_\_\_

Current Employment or School Attending: \_\_\_\_\_

Have you been convicted of any felony or misdemeanor crimes (including traffic crimes) in Wisconsin or any other state in the United States? If yes, what crimes, dates of conviction, and County & State of conviction:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you even been convicted of any non-criminal traffic violations or local ordinances? If yes, what offenses, date of conviction, and city/county/state of conviction:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you ever been convicted of violating any license law or ordinance regulating the sale of beverages or intoxicating liquors? If yes, what offenses, date of conviction, and city/county/state of conviction:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name of employer for which license is intended: \_\_\_\_\_

I understand the fee of \$25.00 is not refunded if this application is denied.  
I understand that an incomplete and/or inaccurate application will be denied.

Date of Application: \_\_\_/\_\_\_/\_\_\_ Signature of Applicant: \_\_\_\_\_  
mm/dd/yyyy

**DO NOT WRITE BELOW THIS LINE**

Fee \$ \_\_\_\_\_ Received by: \_\_\_\_\_

Date: \_\_\_/\_\_\_/\_\_\_  
mm/dd/yyyy

**TOWN OF DUNN POLICE DEPARTMENT**

Records Checked: CCAP \_\_\_ Summit \_\_\_ DOT \_\_\_

Criminal History: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Driver's License History: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Ordinance Violation History: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Officer's Recommendations:

Approval: YES \_\_\_

NO \_\_\_; If NO, recommend appeal to The Board YES/NO  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Town of Dunn: Approval YES/NO

Dane County Case Number \_\_\_\_\_

\_\_\_\_\_