

Application for License to Serve Fermented Malt Beverages and Intoxicating Liquors

To the Village Board of the Village of Fredonia

(Today's Date)

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 125.17 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 is granted to me. I also, as the applicant, grant the Village of Fredonia authorization to, within one year of this date, obtain any information and record pertaining to me from any source and hereby release any individual or institution from any and all liability for damages of whatever kind which may result to me, my heirs, family, or associates because of compliance with this authorization and request to release information.

Answer the following questions fully and completely: PLEASE PRINT

1. Name of Applicant: Last: _____			First: _____			Middle Initial: _____		
2a. Current Address: _____								
City: _____			State: _____			Zip: _____		
b. Previous Address: _____								
(If less than 2 years at current address) City: _____ State: _____ Zip: _____								
3. Date of Birth: _____				4. Social Security Number: _____				
5. Drivers License Number: _____					6. Phone Number: _____			
7. Establishment where this license will be used: _____								
8. Have you ever been convicted of any felony or of violating any law under the State of Wisconsin or of the United States? Yes <input type="checkbox"/> No <input type="checkbox"/>								
Date of such conviction: _____				Name of Court: _____				
Nature of offense: _____								
9. Have you been convicted of violating any license law or ordinance regulating the sale of beverages or intoxicating liquors? Yes <input type="checkbox"/> No <input type="checkbox"/>								
Nature of offense: _____								

STATE OF WISCONSIN, Ozaukee County

ss. _____
Signature of Applicant

_____, being first duly sworn on oath says that he is the person who made and signed the foregoing application for an operator's license; that all the statements made by the application are true.

Subscribed and sworn to before me this _____
day of _____

**NOTORIZATION
REQUIRED**

Notary Public, _____ County, WI

My Commission Expires: _____

For Village Use Only	
Date completed application received: _____	
STATUS OF APPLICATION	
<input type="checkbox"/> Rejected/Date: _____	
Reason: _____	
<input type="checkbox"/> Approved/Date: _____	
License Number: _____	
Date Issued: _____	