

# Application for an "Operator's License"

Town of Brooklyn N5988 County Road A, Green Lake, WI 54941

[www.townofbrooklyn.com](http://www.townofbrooklyn.com) (920) 294-6600

Request: Renewal (\$50.00) \_\_\_\_\_ New (\$50.00) \_\_\_\_\_

Applicant's Full Name (Please Print): First: \_\_\_\_\_ Middle: \_\_\_\_\_ Last: \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

I am \_\_\_\_\_ years of age. Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Name of Establishment: \_\_\_\_\_ Phone Number: \_\_\_\_\_

I am a citizen of the United States, and a resident of the State of Wisconsin continuously since \_\_\_\_\_.

I have been a resident of the Town of Brooklyn since: \_\_\_\_\_

### Answer the following questions, fully and completely:

As required by Wisconsin Statutes, Sec. 125.17(6), have you completed the alcohol awareness course? Yes, \_\_\_ No \_\_\_

Where: \_\_\_\_\_

I have completed the "Responsible Beverage Server's Training Course. (copy of enrollment receipt).

Have you been convicted of any felony or of violating any law of the State of Wisconsin or of the United States? Yes

\_\_\_\_\_ No \_\_\_\_\_ If Yes: Date of such conviction? \_\_\_\_\_

Name of Court: \_\_\_\_\_ Nature of Offense \_\_\_\_\_

Have you been convicted of violating any license law or ordinance regulating the sale of Fermented malt beverages or intoxicating liquors? \_\_\_\_\_

Nature of offense: \_\_\_\_\_

I, the undersigned, do hereby respectfully make application to the governing body of the Town of Brooklyn, County of Green Lake, Wisconsin for a License to serve, from July 1<sup>st</sup> to June 30<sup>th</sup>, inclusive (unless sooner revoked). Fermented Malt Beverages and Intoxicating Liquors, subject to the limitations imposed by Section 125.32 (2) and 125.68 (2) 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 be granted to me. I further certify that the statements in the foregoing application subscribed by me are true and correct to the best of my knowledge.

Signature of applicant: \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 2021

\_\_\_\_\_  
Clerk

Kathleen Morris

ENCLOSE APPLICATION FEE: \$50.00 Check: \_\_\_\_\_ Cash \_\_\_\_\_

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Date Issued: \_\_\_\_\_ License # \_\_\_\_\_

"Responsible Beverage Server's Training Course \_\_\_\_\_ On file

Disposition of Investigative check: \_\_\_\_\_