



# APPLICATION FOR LICENSE TO SERVE FERMENTED MALT BEVERAGES AND INTOXICATING LIQUORS

Village of Harrison, Wisconsin

\$35.00 1-year license to expire on June 30, \_\_\_\_\_  
\$50.00 2-year license to expire on June 30, \_\_\_\_\_

To the Village of Harrison, WI:

I hereby apply for a license to serve Fermented Malt Beverages and Intoxicating Liquors, subject to the limitations imposed by Section 125 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 understand that any falsification, omissions, or misleading information on this application is grounds for denial of my license application or revocation of any license issued.

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle I: \_\_\_\_\_  
 Street Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Day Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_  
 Date of Birth: \_\_\_\_\_ Where will you be working? : \_\_\_\_\_  
 Driver's License Number: \_\_\_\_\_

Do you currently hold or have held an operator's license within the last 2 years? YES \_\_\_ / NO \_\_\_

If yes, please list the municipality which issued your license: \_\_\_\_\_

List any offenses you have been convicted of in the **last 5 years** which were felony, misdemeanor, or local ordinance. Include juvenile convictions and alcohol related traffic violations (drunk driving, open intoxicant in vehicle, etc.) Failure of full disclosure may prohibit approval of license.

Violation	County or Municipality	Approximate Date

I swear that the information provided on this form is complete and truthful to the best of my knowledge.

Applicant Signature \_\_\_\_\_ Date: \_\_\_\_\_

**WITNESS SIGNATURE:**  
I physically witnessed the applicant sign their application.

Witness Signature: \_\_\_\_\_

Witness Address: \_\_\_\_\_

Amount Paid \$ \_\_\_\_\_ Cash CC check # \_\_\_\_\_  
 Course Certificate \_\_\_\_\_ **OR** Copy of Operator License \_\_\_\_\_  
 Background Check results: None Traffic only See Attached  
 Application Approved / Denied on \_\_\_\_\_  
 Clerk Signature: \_\_\_\_\_