Date approved by Town Board

Date received by Municipal Clerk:

vn	Board:	

03.16.2017 jen.jensen

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 certify that I am years of age. Date of Birth: ______ Answer the following questions fully and completely: Is application New or Renewal? Applicant Name: Applicant Address: If renewal (within the past two years), where was the privilege obtained? As required by Wisconsin Statutes Section 125.17(6), have you completed the alcohol awareness course? If this is a New Application, attach proof of course completion. If so, Where? Have you been convicted of any felony or of violating any laws of the State of Wisconsin or of the United States and/or Have you been convicted of violating any license law or ordinance regulating the sale of fermented malt beverages or intoxicating liquors? Date of conviction: Name of Court: _____ Nature of offense: I, the undersigned Applicant, certify under penalty & perjury of the laws of the State of Wisconsin, that the foregoing is true and correct and that I am the person completing & signing this application. I agree to comply with all laws subject to the limitations imposed by the State Statutes mentioned

above. Date received by Municipal Clerk:

Applicant's	Signature
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Town of Anson Chippewa County

Application for an Operator's (Bartender's) License To serve fermented malt beverages and intoxicating liquors

I, the undersigned, do hereby respectfully make application to the local governing body of the Town of Anson, Chippewa County, Wisconsin for a License to serve, from date hereof to June 30, 20______, inclusive (unless sooner revoked), fermented malt beverages and intoxicating liquors, subject to the limitations imposed by Section 125.04, 125.17 and 134.66 of the Wisconsin Statutes and all acts amendatory thereof and supplementary

Date approved by Town Board:

03.16.2017 jen.jensen

Fee: \$10.00

(enclose with application)

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I certify that I am ______ years of age. Date of Birth: ______

Answer the following questions fully and completely:

Applicant Name: Applicant Address:

If renewal (within the past two years), where was the privilege obtained?

As required by Wisconsin Statutes Section 125.17(6), have you completed the alcohol awareness course? If so. Where?

If this is a New Application, attach proof of course completion.

_____ Is application New or Renewal? ______

Have you been convicted of any felony or of violating any laws of the State of Wisconsin or of the United States and/or Have you been convicted of violating any license law or ordinance regulating the sale of fermented malt beverages or intoxicating liquors?

Date of conviction: ______ Name of Court: ______

Nature of offense:

I, the undersigned Applicant, certify under penalty & perjury of the laws of the State of Wisconsin, that the foregoing is true and correct and that I am the person completing & signing this application. I agree to comply with all laws subject to the limitations imposed by the State Statutes mentioned above.

Applicant's Signature

Fee: \$10.00

(enclose with application)