TOWN OF ANSON CHIPPEWA COUNTY

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

(enclose with application)

Fee: \$10.00

To apply for an Operator's License, a certificate of completion for the Responsible Beverage Service Course within the last two years, or an operator's license within the last two years from another Wisconsin municipality must be provided. (Attach a copy)

Approved courses can be found at www.revenue.wi.gov/training/alcSellerServer.html

Filling out your application:

• An Operator License is a privilege, not a right. Any false answers or omissions may result in the denial of your application.

Last Name

- This application must be filled out accurately and completely.
- If you have any doubt as to whether to include facts of a specific incident, it is recommended that you disclose the information. If you are unsure about how to respond to any questions, check with the Town Clerk for clarification.

Review of your application:

First Name

• The Town of Anson will perform a background check.

Residence: Street Address		City			State	Zip	
Phone	Date of Birth		Birt	n Place (City, State)		Female	
						Male	
Driver's License Number/State			Licensed E	Licensed Establishment where Employed			
Previous Address			Email Add	Email Address:			
Is this a New or Renewal application (If New, attach course completion c		nce	with ano		hin the las	et two years)	
Have you ever been convicted of ar States and/or Have you been convice malt beverages or intoxicating liquous I swear that the information provide I certify that I am familiar with the lotthe sale of alcoholic beverages in the that falsification of this application is	ors? YES or and in this applications, resolutions to State of Wisco	g an No ation s, or onsin	y license l O If YES n is true a dinances o n and I aga	aw or ordinance regulations, please complete the and correct to the best and regulations, Federee to obey all provisi	llating the e informa of my kno eral, State	e sale of fermented ation on the back. owledge and belief. or Local, pertaining to	
Applicant's Signature & Date							
Date received by Municipal Clerk: _							
Date approved or denied by Town I	Board:						

Complete the following if you answered YES to convictions on page 1

List all felony & misdemeanor convictions:

Date of conviction:	_Name of Court:	
Offense:		
Date of conviction:	Name of Court:	
Offense:		
Date of conviction:	Name of Court:	
Offense:		
Date of conviction:	Name of Court:	
Offense:		
denial, at a regularly scheduled Town a letter with reasons for denial of the a letter to the Town Clerk within 14 d	ons and submit recommendations to the Town Board for either approval or Board meeting. If the license is denied, the Clerk shall provide the applicant eir license. Any applicant denied a license may appeal the decision by writing ays of receipt of the denial letter. The letter should state in detail the grounds e signed by the applicant. The Clerk shall submit the letter and application to	
	ULD BE DENIED BY THE TOWN BOARD, FEES ARE NON-REFUNDABLE NNOT RE-APPLY UNTIL ONE YEAR AFTER THE DENIAL.	
I hereby acknowledge that I read and	d understand the parameters for denial of an operator's license for	
the Town of Anson.		
Signed_	Date:	