

Town of Oakland

Application for License to Serve Fermented Malt Beverages and Intoxicating Liquors

Application Date _____ Place of Employment _____ License # Issued _____

Print Applicant's Full Names _____

Date of Birth _____ Drivers License # _____

Social Security Number _____

Type of Licenses Requested:

_____ Provisional License (which is good for 60 days) Proof of enrollment will be required.

_____ Regular License to Serve (expires June 30 of ea yr.) Certificate of required class or current license required.

To the Town of Oakland, Burnett County , Wisconsin:

I hereby apply for a License to serve (unless sooner revoked) Fermented Malt Beverages and Intoxicating Liquors, subject to the limitation imposed by Sec 125.32 (2) and 125.68(2) of Wisconsin Statutes and all acts amendatory there of and supplementary there of, and hereby agree to comply with all laws, resolutions, ordinances and regulation. Federal, State of Local, affecting the sale of such beverages and liquors if a license be granted to me.

I certify that I am _____ years of age and do not have an arrest or conviction record.

Signature of Applicant

.....
Answer the following questions fully and completely:\

Name of Applicant _____

Address: _____

1: How long have you continuously resided in this State? _____

2: Have you ever been convicted of any felony or misdemeanor, (other than traffic, unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any other states of ordinances of any municipality? _____ If so, give law or ordinance violated, trial court, trial date and penalty imposed, and/ or date, description and status of charge pending _____

3: Are there any charges presently pending against you (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any laws of any other states of ordinances of any municipality? _____ If so please identify _____

4: Have you ever been convicted of violating any license law or ordinance regulation the sale of beverages or intoxicating liquors? _____ If so, what was the offense and date? _____

I have read and fully completed this application to the best of my Knowledge. I understand and agree that the Town of Oakland can and may request a record check as to the truth to the information I have given on this application. I also understand that this application, as advised by the state, And to eliminate the liability on the clerk, must by notarized before it is submitted.

Signature of Applicant: _____

SUBSCRIBED AND SWORN TO BEFORE ME

This _____ day of _____

_____ notary public

_____ my commission expires