

**VILLAGE OF STOCKBRIDGE**  
**APPLICATION FOR**  
**RENEWAL**  
**OF OPERATOR'S LICENSE**

TO: VILLAGE OF STOCKBRIDGE  
CALUMET COUNTY  
WISCONSIN

I hereby apply for the renewal of my 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 66.054(11) and 176.05(11) 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 the license be granted to me.

I hereby certify that I have answered the following questions to the best of my knowledge and belief.

FULL NAME (Including middle initial) \_\_\_\_\_

CURRENT ADDRESS \_\_\_\_\_

AGE AND DATE OF BIRTH \_\_\_\_\_

DATE OF LAST ISSUED OPERATOR'S LICENSE \_\_\_\_\_

Since your last issued operator's license have you been convicted of any felony or of violating any law of the State of Wisconsin or of the United States?

\_\_\_\_\_

Date of Such Conviction \_\_\_\_\_

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

Since your last issued operator's license have you been convicted of violating any license law or ordinance regulating the sale of beverages or intoxicating liquors?

\_\_\_\_\_

I understand that willfully withholding information or making false statements on this application will be basis for revocation and possible court action. I understand that it is my responsibility to report any violations on my record during the license period to the Village of Stockbridge. I agree to these conditions and I hereby certify that all statements contained herein are true and complete to the best of my knowledge.

WITNESS:

\_\_\_\_\_

\_\_\_\_\_

Signature of Applicant

***Copy of photo ID must accompany application***

04/2010