

City of Eagle River - **TEMPORARY** OPERATOR LICENSE
Fermented Malt Beverages and Intoxicating Liquors

Fee \$15.00

Date Received: _____

Method of Payment: _____

To the Clerk of the City of Eagle River, Wisconsin: I hereby apply for a license to serve, inclusive (unless sooner revoked), Fermented Malt Beverages and Intoxicating Liquors, subject to the limitation imposed by Section 125.32 (2) and (125.68) (2) 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 me.

APPLICANT SECTION (PLEASE PRINT):

Today's Date: _____

Applicant Name: _____
First *FULL Middle Name* *Last*

Physical Address: _____

Mailing Address (if different): _____

Date of Birth: _____ Social Security #: _____

Race _____ Sex _____ Phone #(s): _____

E-Mail Address: _____

Name of Event: _____

Location of Event: _____

Event Date(s): From: _____ To: _____

Have you ever been convicted of violating any law of the State of Wisconsin or of the United States? _____

Date(s) of such conviction(s) _____

Nature of Offense(s) _____

Have you held a TEMPORARY Operator License since January 1st of the current Calendar Year? _____

Applicant Signature **X** _____

POLICE DEPARTMENT SECTION:

The issuance of an operator's license is herewith recommended: I hereby certify that I have checked City and State Criminal records and find the following convictions or reported misdemeanor convictions for the named applicant.

RECOMMENDED

NOT RECOMMENDED

VALID

Date

Signature of LEC

Date

Signature of Chief of Police

FOR OFFICE USE ONLY:

Approved by CC _____

Issued Temporary Card: Card # _____ Date Issued _____ Expiration Date _____

Notes: _____