Application For License To Serve Fermented Malt Beverages and Intoxicating Liquors

TO THE COUNCIL OF THE CITY OF MENOMONIE, WISCONSIN:

I hereby apply 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 125.32(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 to me.

Answer the following questions fully and completely: **PLEASE PRINT**

NAME _____

FIRST NAME MIDDLE NAME (**full**) LAST NAME

Driver's License # _____ **State DL Issued in** _____

Telephone Number _____ **Email address** _____

Local Address _____

(Street) *(City)* *(Zip code)*

Permanent Address _____

Date of Birth _____ **Age** _____ **Gender: Male / Female**

Place of Employment _____

I hereby authorize the Menomonie Police Department to furnish all information pertaining to my application for an operator's license to the licensing authorities of the City of Menomonie. This release is authorized with full understanding that the information will be safeguarded against unauthorized disclosure to any party not having a legitimate need for it in the property discharge of official business of the City of Menomonie.

I hereby release the City of Menomonie, its officers and employees from any liability for damages which may result to me on account of compliance with this authorization.

_____

SIGNATURE OF APPLICANT

LICENSE FEE - New license - $40.00 - Code 19 - $30 license fee; Code 48 - $10.00 Investigation fee

- Renewal - $25.00 - Code 19 - $15 license fee; Code 48 - $10.00 Investigation fee

RECEIPT # _____ PAID BY: APPLICANT or OTHER _____

BTC Completed _____ at _____ OR Renewal

Date Location or On-Line

For Office Use: (circle one)

Date Investigation Complete: _____-- ---_____ Approve Deny

Initials of Records Technician (or person who conducted investigation) _____

Signature of Police Chief (or designated staff officer) _____