City of Oconomowoc
Bartender/Operator License Application
174 E. Wisconsin Avenue, Box 27, Oconomowoc, WI 53066
(262) 569-3235

Call _____
Mail _____
Other _____

$30.00 Fee for Original/Renewal or $15.00 Fee for Provisional - **PLUS** a $15.00 Background Check Fee

Date:	**License Period:** July 1, 20___ - June 30, 20___
Name of Applicant (First, Middle, Last):	
Male / Female	**Maiden Name:**
Address of Applicant (include city, state and zip code):	
List places of residence over the past year, if different:	
Telephone (include area code):	**Cell Phone:**
Date of Birth:	**Email:**
Driver's License Number:	
List Name of Business where you will be working:	
Do you currently hold an operator's license in another community?	**Yes / No**
If yes list the community: City / Village / Town of	**County:**
Have you held a bartender/operator license in the past?	**Yes / No** **From** **to**
If yes list the community: City / Village / Town of	**County:**
Have you been convicted of violating any Federal, State or local law or ordinance relating to the sale of beverages as defined by State law?	**Yes / No**
If yes, please explain.	

I am hereby applying for a bartender/operator license from the date above, for the specified license period, unless sooner revoked, and hereby agree to comply with all laws, resolutions, ordinances and regulations, State, Federal or local laws affecting the sale of beverages as defined by Wisconsin State Statutes.

I hereby certify or declare under the penalty of perjury under the laws of the State of Wisconsin that the foregoing is true and correct.

Signature of Applicant **Date**

For City Use Only

Subscribed and sworn to before me

City Clerk/Deputy Clerk, City of Oconomowoc/Notary Public
My Commision Expires : _____ **Date**

Type of License Applied for:	**Original**	**Renewal**	**Provisional**
Council Approval Date:		**License Number:**	

Police Department Recommendation **Date**