



CITY OF MONROE

1110 18th Avenue, Monroe, WI 53566

Phone (608) 329-2524 FAX (608) 329-2561

2016 - 2017

CITY OF MONROE, WISCONSIN

APPLICATION FOR LICENSE TO SERVICE FERMENTED MALT BEVERAGES AND INTOXICATING LIQUORS

\*\*OPERATOR'S LICENSE\*\*

Date \_\_\_\_\_

TO THE COMMON COUNCIL OF THE CITY OF MONROE, WISCONSIN:

I hereby apply for a license to serve, from date hereof to June 30, 2017 inclusive (unless sooner revoked), Fermented Malt Beverages and Intoxicating Liquors, subject to the limitation imposed by Section 125 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:

NEW \_\_\_ RENEWAL \_\_\_ NAME OF CLASS A/B LICENSEE (employer) \_\_\_\_\_

NAME OF APPLICANT \_\_\_\_\_
First Middle Initial Last

ADDRESS OF APPLICANT \_\_\_\_\_
Street Address
City State Zip

DATE OF BIRTH \_\_\_\_\_ PHONE NUMBER \_\_\_\_\_

Driver's License # and State of Issue \_\_\_\_\_

\*\*\*\*\*

I attest that I am the person who made the foregoing application for an operator's license, and that all statements and information provided are true and correct. I understand that the Monroe Police Department may perform a full background investigation prior to consideration of this application. I understand that providing any false information may be reason for denial.

Signature of Applicant \_\_\_\_\_

Turn over to also apply for a provisional license, if needed.

\*\*\*\*\*

(for office use only)

Police Dept. Signature \_\_\_\_\_

Approved \_\_\_ Disapproved \_\_\_

Fee: \$40.00 Date Pd. \_\_\_\_\_ (Acct # 4/403)

