



**Village of Elk Mound**  
**License Application – Operator**  
 PO BOX 188, ELK MOUND, WI 54739  
 Phone: 715-879-5011, Fax: 715-879-5851

(PLEASE PRINT)

Date of Application: \_\_\_\_\_ Licensing Year: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
 (FIRST) (MIDDLE) (LAST)

Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

City, State & Zip \_\_\_\_\_

Name of Business \_\_\_\_\_  
 Working At: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone #: \_\_\_\_\_  
 Applicant's \_\_\_\_\_  
 Drivers License #: \_\_\_\_\_ DL Issuing State: \_\_\_\_\_  
 (ATTACH COPY OF LICENSE)

Answer the Following Questions Completely	Yes	No/NA	Date Rec'd
1. Have you provided the Village Clerk with proof that you attended Responsible Beverage Servers Class or a copy of a previous operator's license? (Attach copy of the scheduled class enrollment, resp. beverage class certificate or copy of previous license to this application)			
2. Have you been convicted of a felony, misdemeanor or other offense, which substantially relates to the circumstances of the licensed activity? (If yes, please explain below)			

Enter applicable arrest and conviction information, including dates, here: \_\_\_\_\_

I hereby certify the foregoing answers are true and correct. I agree, in consideration of the granting of this license, to comply with the laws of the State of Wisconsin, the Municipal Code and the rules and regulations of the various regulatory agencies and commissions of the Village of Elk Mound pertaining to the supervision of activities permitted under the license for which this application is made. I understand this license may be revoked by the issuing authority according to the law. Section 111.321, 111.322, 111.325 & 111.335, Wisconsin Statutes, limits the information a licensing agency may ask regarding the arrest and conviction record of an applicant. **If you have been arrested and the charges are still pending and this license requires you to qualify for a fidelity bond, or if the pending charges substantially relate to the activity for which you seek the license, you must provide such arrest information on this application. Take notice, the state law provides the Town may suspend or revoke a license issued upon this application if the applicant fails to provide this information.** If you have doubts as to what you must enter see your own lawyer, or the Wisconsin Department of Industry, Labor and Human Relations. Village employees shall not advise you on this matter.

\_\_\_\_\_  
 (Applicant Signature)

Subscribed and sworn to me this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_

\_\_\_\_\_  
 (Signature of Notary Public)

Notary Public, \_\_\_\_\_ County, WI

My Commission (is Permanent) or Expires: \_\_\_\_\_

Submit the completed application along with the non-refundable license fees of **\$15.00** for a Provisional Operator's License and **\$45.00** for an Operator's License to the **Village of Elk Mound, PO Box 188, Elk Mound, WI 54739.**

Operator License No. \_\_\_\_\_ Approved On: \_\_\_\_\_