OPERATOR'S LICENSE APPLICATION

PART A - APPLICANT INSTRUCTIONS

File this completed application and the fee ($50.00) with the city clerk. Upon satisfaction of these requirements, you will be issued a provisional license, which is valid for 60 days. You must provide proof of completion of the "Responsible Beverage Server" course before a regular license may be issued. Answer all questions completely. Use the reverse side if you cannot answer a question within the space provided.

PART B - TO BE COMPLETED BY APPLICANT

1. Full Name (LAST, FIRST, MIDDLE): _____
2. Date of Birth: _____ 3. Sex: _____ 4. Race: _____
5. Aliases (including maiden name): _____
6. Address: _____
   STREET ADDRESS CITY, STATE & ZIP CODE
7. Home Phone: _____ 8. Business Phone: _____
9. Height: _____ 10. Weight: _____ 11. Hair: _____ 12. Eyes: _____
13. How long have you lived in Wisconsin? _____ Brown County?: _____ Green Bay?: _____
14. Previous Addresses in the past five years: _____
15. Employer's Name and Address (WHERE LICENSE IS TO BE USED): _____
16. Have you been convicted of any felony, misdemeanor, or ordinance violation (OTHER THAN MINOR TRAFFIC VIOLATIONS)? (IF YES, SUPPLY DATES AND CONVICTIONS): _____

PART C - TO BE COMPLETED AT THE CITY CLERK'S OFFICE

READ CAREFULLY BEFORE SIGNING. Under penalty provided by law, the signer states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. Any inaccurate answer may be grounds for denial of the application. The signer certifies that he/she is familiar with the laws and regulations pertaining to the sale of alcoholic beverages. Signer agrees to observe the provisions of the Green Bay Municipal Code and Wisconsin Statutes. The signer agrees that the license, if granted, will not be assigned to another. **YOU MUST CARRY ON YOUR PERSON A VALID PICTURE ID ISSUED BY A GOVERNMENTAL AGENCY (DRIVER'S LICENSE, PASSPORT, ETC.) AT ALL TIMES WHILE WORKING PURSUANT TO THE OPERATOR'S LICENSE. WHILE WORKING PURSUANT TO A PROVISIONAL LICENSE, YOU MUST ALSO KEEP THIS FORM ON YOUR PERSON AT ALL TIMES.**

_____
(Applicant Signature)

_____
(Date)

PART D – FOR CITY USE ONLY

Application Type: ☐ New; ☐ Renewal Beverage Server Course Completed ☐

Police Department Recommendation: ☐ Grant; ☐ Deny; made by: _____

Expires: _____ Council Date: _____

FORM GB-33.09 (1/2014)