TOWN OF EGG HARBOR

5242 COUNTY I, STURGEON BAY, WI 54235 ♦ OFFICE HOURS: Monday thru Thursday 8:30-4:00PM
Phone 920-743-6141 ♦ Fax 920-743-1102 ♦ Email: clerk@townofeggharbor.org

2023/2024 APPLICATION for OPERATOR'S LICENSE

I hereby apply for a License to serve from date hereof to June 30, 2024, Inclusive (unless sooner revoked), Fermented Malt Beverages and intoxicating Liquors, subject to the limitations imposed by Section 66.054(11) and 176.05(11) 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 me.

I certify that I am _______years of age.

ANSWER THE FOLLOWING QUESTIONS FULLY AND COMPLETE

Name of Applicant____

Address of Applicant____

Have you been convicted of a felony or violating any law of the State of WI or of the United States?______
Date of such conviction.____________Name of Court_____________________________
Nature of offense____

Have you been convicted of violating any license law or ordinance regulating the sale of beverage or intoxicating liquor?____

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**I have completed the RESPONSIBLE BARTENDER COURSE on _____________(date)
______________________________(place, beverage course within the State of WI)

**Or ___check if you have been issued an Operator's license within the last two years in the State of WI other then within The Town of Egg Harbor.

**Or___check if you have been issued an Operator’s license within the last two years in the Town of Egg Harbor.

PLEASE ATTACH A COPY OF BARTENDER CERTIFICATE or License issued within the last two years from another jurisdiction. (not needed if this is a renewal in the Town of Egg Harbor within the last 2 years)

Dated this_______day of _______________20____

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Signature of Applicant

FEE: $10.00