

# VILLAGE OF PARK RIDGE

PORTAGE COUNTY, WISCONSIN

## OPERATOR'S (BARTENDER'S) LICENSE APPLICATION

Name \_\_\_\_\_ Age \_\_\_\_\_ DOB \_\_\_\_\_  
(First) (Middle) (Last)

Maiden/Other Possible Names \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_ DL # \_\_\_\_\_

Other Addresses During Past 5 Years (**use back if necessary**) \_\_\_\_\_

Have you ever been denied an operator's license? YES / NO (If 'YES', **explain on back of page**)

Have you ever had an operator's license revoked? YES / NO (If 'YES', **explain on back of page**)

Where will you be employed? \_\_\_\_\_  **One-Year** License  **Two-Year** License

Do you currently have a pending criminal charge, or have you ever been convicted of a felony, crime, offense or other violation of the law or as a "habitual" or "repeat" law offender?

YES  NO

If the answer is 'YES', explain on back of page, stating "WHAT FOR", "WHEN", "WHERE", and the DISPOSITION.

**Also list on back of page all convictions of the law involving drugs, drug paraphernalia, or alcohol, including underage drinking, and the date of conviction for each offense.**

### OATH

I solemnly swear/affirm that the information given on this application is the truth, the whole truth, and nothing but the truth, so help me God. (I am aware that any willful misrepresentation or falsification of information on this application could result in criminal prosecution for False Swearing.)

\_\_\_\_\_  
Signature of Applicant (must be signed in the presence of a Notary Public)

**See back for additional  
required signature**

STATE OF WISCONSIN)

SS

COUNTY OF PORTAGE)

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Notary Public

My commission expires \_\_\_\_\_.

| Office Use Only  |  | Office Use Only                               |   |       |
|--|--|---|---|-------|
| <input type="checkbox"/> New                               | <input type="checkbox"/> Renewal       | <input type="checkbox"/> Provisional Fee Paid | <input type="checkbox"/> Regular Fee Paid |       |
| <input type="checkbox"/> Course Completed _____            | <input type="checkbox"/> Valid License | Dates:  | Requested                                 | Rec'd |
| Provisional License Issued on _____                        |  | County  | _____                                     | _____ |
| Village Board Review Date _____                            |  | City  | _____                                     | _____ |
| <input type="checkbox"/> License Approved: License # _____ |  | CIB   | _____                                     | _____ |
| <input type="checkbox"/> License Denied: Reason _____      |  | CCAP  | _____                                     | _____ |
| _____  |  | Other   | _____                                     | _____ |
| Applicant notified _____                                   |  | _____   | _____                                     | _____ |

INSTRUCTIONS

PRINT CLEARLY. **This application form must be signed under oath before a Notary Public.** Any willful misrepresentation or falsification of information on this application may result in its rejection, and may result in prosecution for False Swearing, which carries a fine of up to \$10,000, or imprisonment of not more than five years, or both. Should these factors become known after the license has been issued, it shall be grounds for canceling the license.

PAYMENT

**Payment must be submitted along with the application.** A one-year license costs \$20.00; a two-year license costs \$30.00. Your completed application form and *nonrefundable* fee should be submitted to the Village Clerk/Treasurer, 516 Sunrise Avenue, Stevens Point, WI 54481. Checks should be made payable to 'Village of Park Ridge'.

All licenses expire on June 30. There is no prorating of license fees. The license should be on display in the establishment where you are employed.

REQUIREMENTS

Applicant must meet the following requirements (in addition to state-mandated requirements):

- May not have a felony conviction within the last 5 years, the offense(s) substantially relating to the alcohol beverage licensing activity
- May not be a habitual law offender as defined in State Statutes 939.62(2). In determining habitual law offender status, the check may go back 15 years
- May not have had two or more alcohol-related convictions within the past two years
- May not have any criminal or ordinance convictions that are related to the license requested, to include but not limited to, gambling, controlled substances, disorderly conduct, battery in bar within the past two years
- May not have a possession of a controlled substance conviction within the past two years
- May not have a sale or delivery of controlled substance conviction within the past five years
- Must have complied with all court-ordered assessments resulting from an OWI or controlled substance conviction
- May not have any pending charges, the offense(s) substantially relating to the alcohol beverage licensing activity

**\*\*\*Additional required signature (to acknowledge you have read all of the above):** \_\_\_\_\_

---

*(Attach additional pages as needed when answering questions from first page of application):*