



CITY OF MONONA - OPERATOR LICENSE APPLICATION

Pursuant to Wisconsin Statutes Section 125.17, subject to limitations imposed by as 125.17 and 125.68(2)

FEES ARE NON-REFUNDABLE

Operator's – Regular - \$40.00
Operator's – Two Year - \$65.00

Operator's – Provisional - \$15.00
Operator's – Temporary - \$10.00

New License

Renewal License

This license expires on June 30, 20_____

Full Legal Name of Applicant:		Sex:	Male	Female
Street Address:				
City:	State:	Zip Code:		
Date of Birth:		Telephone Number:		
Drivers License Number and State:				

How long have you continuously resided in Wisconsin? _____

Place of employment as an Operator: _____ Telephone: _____

Have you registered for the Alcohol Awareness Program? Yes No Date of Class: _____

Have you completed the Alcohol Awareness Program? Yes No Date Completed: _____

Have you ever been convicted of a misdemeanor or felony in the past 5 years? Yes No

If yes, please explain: _____

Are there any pending criminal charges against you? Yes No

If yes, please explain: _____

Are there any pending drug/alcohol related offenses against you? Yes No

If yes, please explain: _____

Have you been convicted of drug/alcohol related offenses in the last 5 years? Yes No

If yes, please explain: _____

ANY FALSE OR MISSING INFORMATION ON THIS APPLICATION WILL RESULT IN DENIAL OF YOUR OPERATOR'S LICENSE.

I, the undersigned, affirm that I made complete and true answers to each question, and understand my past record will become a part of this application. I understand that I am subject to a driver's license check, a local police records check, and a criminal history background check by the City of Monona Police Department.

Subscribed and sworn before me
this _____ day of _____, 20_____

***With my signature I affirm the statement above and that I have read the instructions provided on the reverse and understand the disclosure requirements:**

Notary Public

My Commission expires: _____ Signature of Applicant: _____

Police Department Review: Recommend Approval _____ Recommend Denial _____ Review _____

Reason for denial, if not recommended: _____

Signature of Police Chief: _____ Date: _____

LRC Approval (if required) Date: _____ City Council Approval Date: _____

License No. Issued: Provisional # _____ Operator # _____ Date Issued: Provisional _____ Operator _____

IMPORTANT:

**READ and SIGN this notice before completing your application!
Incomplete and incorrect applications will be rejected.**

PARAMETERS FOR REVIEW OF OPERATOR (BARTENDER) LICENSE

Arrests and convictions, including pending matters, of any part of Chapter 125 State Statutes or of offenses substantially related to the alcohol beverage licensing activity within the last five (5) years are considered for review. The following are examples and do NOT constitute an exclusive list:

1. Lying, giving false or incomplete information, or misinformation on the Application.
2. Underage consumption/possession of alcohol or controlled substance.
3. Furnishing or sale of alcohol to minors.
4. Any substance abuse conviction.
5. Driving under the influence of any alcohol or controlled substance.
6. Allowing a person to use Operator's license.
7. Selling to an intoxicated person.
8. Selling after hours.
9. Selling without a license.
10. Giving away intoxicating liquor to evade provisions of law.
11. Habitual law offender (multiple convictions or pending charges).
12. A felony conviction which substantially relates to the alcohol beverage licensing activity until the applicant has been duly pardoned.
13. Convictions with supervision agreements shall be considered a conviction until the applicant has satisfactorily completed supervision and is released by the respective court.

- ❖ Your application **MUST** be legible and filled out completely, including **middle initial and driver's license number**.
- ❖ Your application **WILL** be investigated by the Monona Police Department.

**For both misdemeanor and felony offenses,
regardless of your age:**

- ❖ You **MUST** disclose **ALL** criminal, drug, and alcohol-related convictions within the past 5 years.
- ❖ You must **ALSO** disclose all **PENDING** criminal, drug, and alcohol-related charges.
 - If you are in doubt about the nature of the charge or the timing, you should disclose the incident.
 - Your license will be denied if you fail to disclose ALL convictions within the past 5 years OR any pending charges for criminal, drug, or alcohol-related offenses.

I have read and understand these instructions and disclosure requirements:

Signature