## 1 YEAR TOWN OF GRAND RAPIDS APPLICATION FOR BEVERAGE OPERATOR'S LICENSE

| Name:   | Date of Birth:   |
|---|--|
| (Last) (First)  | (M.I.)   |
| Address:  | Place of Birth:  |
| City:   | State: Zip:  |
| Telephone Number:   | Married [ ] Yes [ ] No   |
| List alias/maiden/other names you have used in the  | a nast   |
| Where will you be employed as a beverage operation  |  |
| Have you been denied or had a beverage operator   |  |
| Thave you been defined of flad a beverage operator  | s license revoked? [ ] res [ ] NO VVIIY!   |
| Have you ever been convicted of any crime, traffic  | or ordinance violation? [ ] Yes [ ] No List  |
| Past Occupations:   |  |
| i asi Occupations.  |  |
| Past places of residency:   |  |
| •   |  |
| List two references: (other than bartenders and far   | mily)  |
| Name:   | Telephone:   |
| Name:   | Telephone:   |
| year ending June 30, as provided by Section 125. ordinances. I certify that I am a citizen of the United States a been convicted of a felony or for violation of the National Pro | and a resident of the State of Wisconsin, and that I have not hibition Act.  d regulations pertaining to the sale of beverages under a Class all provisions of said laws. I further state that all information |
| Signature:  | Date:  |
|   |  |
|   | USE ONLY   |
|   | INVESTIGATION: sed upon my findings the beverage operator's license [ ] should not be granted  |
| Chief of Police:  | Date:  |
| TOWN BOARD ACTION: Meeting Held   | [ ] Approved [ ] Denied  |
| New [ ] Class Date: Date Paid:  |  |
| Renewal [ ] Renewal Verified [ ]  |  |