



136 North Monroe Street, Waterloo, WI 53594-1198
 Phone - (920) 478-3025
 Fax - (920) 478-2021
 Email – cityhall@waterloowi.us
 Website: www.waterloowi.us

FOR OFFICE USE ONLY:			DATE RECEIVED	____/____/____
APPLICATION			RECEIPT NUMBER	_____
<input type="checkbox"/>	Provisional (expires 60 days)	\$ 15.00	RESPONSIBLE BEVERAGE SERVER	
<input type="checkbox"/>	Temporary (1 to 14 days)	\$ 15.00	COURSE COMPLETION DATE	____/____/____
<input type="checkbox"/>	New Operator's (expires odd year)	\$ 60.00	APPROVED LICENSE #	_____
<input type="checkbox"/>	Renewal (expires odd year)	\$ 30.00	DATE OF COUNCIL APPROVAL	____/____/____
TOTAL AMOUNT PAID \$ _____			DATE OF COUNCIL DENIAL	____/____/____
			DATE MAILED LICENSE OR DENIAL	____/____/____

PART A APPLICANT INSTRUCTIONS

- ❖ Please read this form carefully prior to filling out your Operator's (Bartender's) License Application. Any questions should be directed to the City Clerk's office at (920) 478-3025.
- ❖ Applicant understands that the application and license fee payments are non-refundable and are due and payable at the time of filing the application form.
- ❖ All applications for a bi-yearly operator's license shall be filed in the office of the Clerk-Treasurer on or before May 31 of odd-numbered years, provided that nothing shall prevent the Council from granting any license which is applied for at least five working days before a Council meeting at any other time, which said license will expire on June 30 of the next odd-numbered year. License fees shall not be prorated even though the licenses are issued for less than a full term.
- ❖ To apply for a new Operator's License one of the following must be provided along with your completed, signed application and applicable fees.
 1. Certificate of completion from an approved State of Wisconsin Department of Revenue responsible beverage server training course within the past 2 years.
 2. A current Operator's License from another municipality in the State of Wisconsin.
- ❖ The Clerk/Treasurer may issue a provisional operator's license. Provisional Licenses are valid for 60 days after issuance. Provisional Licenses will only be issued to an applicant enrolled in an approved State of Wisconsin Department of Revenue responsible beverage server training course and who has not been denied an Operator's License or who has not had their license revoked or suspended within the past twelve (12) months, and the applicable fee is submitted.
- ❖ Temporary Operator's Licenses shall be issued by the Clerk/Treasurer provided that:
 1. This license is issued only to operators employed by, or donating their services to, non-profit organizations.
 2. No person may hold more than one license of this kind per year.
 3. The license is valid for any period from one (1) to fourteen (14) days, and the period for which it is valid is stated on the license.
 4. The applicable fee is submitted.

❖ **APPLICANT MUST COMPLETE THE APPLICATION PARTS A AND B COMPLETELY AND ACCURATELY. ANY INCOMPLETE, INACCURATE OR UNTRUTHFUL INFORMATION ON ANY LICENSE APPLICATION SHALL BE CAUSE FOR DENIAL OF SUCH LICENSE.**

❖ Applicant must meet the below requirements. **PLEASE CHECK EACH STATEMENT AS READ.**

- Applicant must be at least 18 by the time of issuance.
- Applicant must not have a felony conviction within the last 5 years, the offense(s) substantially relating to the alcohol beverage licensing activity, or be a habitual law offender as defined in State Statutes 939.62(2). In determining habitual law offender status, the background check may go back 15 years.
- Applicant has not had an OWI conviction within the past 1 year.
- Applicant has not had two or more alcohol related convictions within the past 2 years.
- Applicant does 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 a bar within the past 2 years.
- Applicant does not have a possession of a controlled substance conviction within the past 2 years.
- Applicant does not have a Sale or Delivery of controlled substance conviction within the past 5 years.
- Applicant has complied with all court ordered assessments resulting from an OWI or controlled substance conviction.

A criminal background records check will be conducted on all applicants by the Waterloo Police Department. This background check may include, but is not limited to, Wisconsin State Criminal History, Waterloo Police Department records, Driver's License (CIB, NCIC, P&P, DOT) and with other law enforcement agencies where applicant previously resided. The Waterloo Police Department will make a report and forward a recommendation to the Common Council on the applicant based on the above criteria. If granted, your Operator's License will be mailed to your place of residence as indicated on the application. Please allow up to five (5) business days for processing.

Return all pages of this application in person to: City of Waterloo
Please Note: Application must be signed in the presence of a notary public or the City Clerk. 136 N. Monroe Street
Waterloo, WI 53594
(920) 478-3025

Make checks payable to: City of Waterloo

PART B APPLICATION FOR LICENSE TO SERVE FERMENTED MALT BEVERAGES AND INTOXICATING LIQUORS

I, the undersigned, do hereby make application to the local governing body of the City of Waterloo, for a license to serve Fermented Malt Beverages and Intoxicating Liquor from the date hereof until June 30, _____, unless revoked or suspended sooner, subject to the limitations imposed by §125.32 (2) and §125.68 (2) of the Wisconsin State 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 is granted to me.

ANSWER ALL QUESTIONS COMPLETELY. PLEASE PRINT CLEARLY USING BLACK INK. Use the reverse side of paper if you cannot answer any question in the space provided.

Applicant Information

Last Name		First Name	Middle Name	Maiden Name
Address of Residence				Best Contact Phone Number
City		State	Zip Code	Place of Birth
How long have you lived in Wisconsin?	City and State of Former Residency (if applicable)			Date of Birth
Previous Address				Sex: Race:
Driver's License Number			State of Issuance	

Employer Information Pertaining to the Operator's License

Employer's Name			Date of Employment
Address of Employer			Employer Phone Number
City	State	Zip Code	Type of Establishment

Applicant Questionnaire

- Do you now hold or have you ever been issued any license or permit associated with the sale of alcoholic beverages and issued in the State of Wisconsin? Yes No

If Yes, Type of license or permit. _____

Dates License Held _____ / _____ / _____ to _____ / _____ / _____

Issuing Municipality _____

- Have you successfully completed a Responsible Beverage Service Course in Wisconsin within the last two (2) years? (*Attach certificate of completion*) Yes N/A

- Are you currently enrolled in a Responsible Beverage Service Course? Yes No

If Yes, Location of Course: _____

Date of Course _____ / _____ / _____ Date of Completion _____ / _____ / _____

(Attach proof of course enrollment)

- Have you EVER been convicted of any felony, misdemeanor, or ordinance violation other than minor traffic violations? Yes No

Date of Conviction	Violation/Offense	Jurisdiction
Date of Conviction	Violation/Offense	Jurisdiction
Date of Conviction	Violation/Offense	Jurisdiction
Date of Conviction	Violation/Offense	Jurisdiction

- Are there currently any criminal charges presently pending against you? Yes No

Date of Offense	Violation/Offense	Jurisdiction
Date of Offense	Violation/Offense	Jurisdiction
Date of Offense	Violation/Offense	Jurisdiction
Date of Offense	Violation/Offense	Jurisdiction

PART C TO BE COMPLETED IN THE PRESENCE OF A NOTARY PUBLIC OR CITY CLERK

READ CAREFULLY BEFORE SIGNING. Under penalty provided by law, the undersigned, being duly sworn on oath, says that he/she is the person who made the foregoing application and that the information supplied is true and correct. False, inaccurate or omitted information 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 City of Waterloo Municipal Code, and the 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's Signature _____/_____/_____
Date

City of Waterloo
 Jefferson County
 State of Wisconsin

Sworn to and subscribed before me on this _____ day of _____, 20 _____

Notary or Clerk Signature Notary Public Municipal Clerk

My commission expires: _____ or is permanent.

CITY SEAL/NOTARY SEAL

For Police Department Office Use Only	
Background Check Completed Yes / No	
Officer: _____	
Date Referred to Police Dept:	____/____/____
Date of Background Check:	____/____/____
Date Referred Back to Clerk:	____/____/____
Approval Recommended:	Yes / No
Reason	_____
_____	_____
_____	_____
_____	_____

PART D TO BE COMPLETED BY THE CITY CLERK/TREASURER

Applicant: _____ Approved Denied

A copy of this document is required to be delivered to the applicant in the event of denial of an Operator License.

If the application is denied by the Waterloo Common Council, the applicant will be informed in writing as to the reason(s) therefore, and of the opportunity to request a reconsideration of the application by the Common Council in a closed session. Such notice shall be sent by registered mail to, or served upon, the applicant at least ten (10) days prior to the Council's reconsideration of the matter. At such hearing, the applicant may present evidence and testimony as to why the license should be issued.

If, upon reconsideration, the Council again denies the application, the City shall notify the applicant in writing of the reason(s) for the denial. An applicant, who is denied any license upon reconsideration of the matter, may apply to Circuit Court pursuant to §125.12(2)(d), Wis. Statutes for review.

Reason(s) for Denial:

CITY SEAL

Signature of City Clerk/Treasurer

____/____/____