

Application for an Operator's License –

Town of Woodboro

Oneida County, Wisconsin

Name of Applicant: _____
(Please print clearly)

Address of Applicant: _____

Phone Number of Applicant: _____

I, _____ make application for an operator's license under s. 125.17 Wis. Stats., to sell alcohol beverages in a place operated for the sale of alcohol beverages in the Town of Woodboro, and I agree that I will comply with all laws, resolutions, ordinances, and regulations, state, federal, and local, affecting the sale of alcohol beverages, if a license is granted to me.

I certify that I am a person over 18 years of age – Date of Birth ____/____/____ - and that I have successfully completed a responsible beverage server training course. Attach a copy of the training course certification if this is for a new license or a certified copy of a current operator's license in a different municipality, which also serves as proof of training.

Dated this _____ day of _____, 20____.

Signature of Applicant

Fee of \$15.00 for a one-year license must accompany application. Check made to the Town of Woodboro.

Return to:
Judy May, Clerk
Town of Woodboro
8672 Old Hwy K Rd
Harshaw, WI 54529