

Renewal applicants can skip questions 1-6

1. Have you successfully completed a Responsible Beverage Service Course in Wisconsin within the last two (2) years? (Attach certificate of completion) Yes No

2. How long have you continuously resided in Wisconsin? _____

3. Have you EVER been convicted of any felony, misdemeanor, ordinance or other traffic violations? Yes No
If yes please explain _____

4. Are there any pending criminal charges against you? Yes No
If yes please explain _____

5. Are there any pending drug/alcohol related offences against you? Yes No
If yes please explain _____

6. Have you been convicted of drug/alcohol related offences in the last 5 years? Yes No
If yes please explain _____

7. **Renewal Applicants:** Since your last application have you had any felony, misdemeanor, ordinance, criminal charges, or drug/alcohol offenses application? Yes No
If yes explain _____

ANY FALSE OR MISSING INFORMATION ON THIS APPLICATION WILL RESULT IN DENIAL OF YOUR OPERATOR'S LICENSE.
Please check this web site if you are unsure: <https://wcca.wicourts.gov/index.xsl>

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 criminal history background check by the Spring Valley Police Department. I give permission to make my juvenile records available for this application.

Please Note: Application must be signed in the presence of a notary public or the Village Clerk.

Applicant's Signature

Date

Please note: If your license is approved, you will be contacted when it is ready to be picked up at the Village Office. You will have 3 business days to pick it up. If you are caught bartending without having a license in your possession, you can be fined.

Notary:

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

Notary Public Municipal Clerk

Notary or Clerk Signature

My commission expires: _____ or is permanent.

Police Department Review Recommend Approval _____ Recommend Denial _____

Reason for Denial:

Signature of Reviewing Officer/Chief

Date