

# Application for Temporary License to Serve Fermented Malt Beverages

(Valid for 14 Days/Only One Per Person Per Year)

To the Village Board of the Village of Fredonia \_\_\_\_\_

(Today's Date)

I hereby apply for a license to serve, from date \_\_\_\_\_ to \_\_\_\_\_ inclusive (unless sooner revoked), Fermented Malt Beverages, subject to the limitations imposed by Section 125.17 of the Wisconsin 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 if a license is granted to me. I also, as the applicant, grant the Village of Fredonia authorization to, within one year of this date, obtain any information and record pertaining to me from any source and hereby release any individual or institution from any and all liability for damages of whatever kind which may result to me, my heirs, family, or associates because of compliance with this authorization and request to release information.

**Answer the following questions fully and completely: PLEASE PRINT**

1. Name of Applicant: Last: _____		First: _____	Middle Initial: _____
2a. Current Address: _____			
City: _____		State: _____	Zip: _____
b. Previous Address: _____			
(If less than 2 years at current address) City: _____ State: _____ Zip: _____			
3. Date of Birth: _____		4. Social Security Number: _____	
5. Drivers License Number: _____		6. Phone Number: _____	
7. Event where this license will be used: _____			
8. Have you ever been convicted of any felony or of violating any law under the State of Wisconsin or of the United States? Yes <input type="checkbox"/> No <input type="checkbox"/>			
Date of such conviction: _____		Name of Court: _____	
Nature of offense: _____			
9. Have you been convicted of violating any license law or ordinance regulating the sale of beverages or intoxicating liquors? Yes <input type="checkbox"/> No <input type="checkbox"/>			
Nature of offense: _____			

STATE OF WISCONSIN, Ozaukee County

ss. \_\_\_\_\_

Signature of Applicant

\_\_\_\_\_, being first duly sworn on oath says that he is the person who made and signed the foregoing application for an operator's license; that all the statements made by the application are true.

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_

NOTARIZATION  
REQUIRED

Notary Public, \_\_\_\_\_ County, WI

My Commission Expires: \_\_\_\_\_

For Village Use Only	
Date completed application received: _____	
STATUS OF APPLICATION	
<input type="checkbox"/> Rejected/Date: _____	Reason: _____
_____	
<input type="checkbox"/> Approved/Date: _____	License Number: _____
Date Issued: _____	