VILLAGE OF WESTON

OPERATOR LICENSE APPLICATION

LICENSE TYPE: Operator License

Please review the information below and correct any errors shown:

NAME: **BUSINESS NAME:**

ADDRESS:

NEW ADDRESS: _____ **BIRTH DATE:**

DRIVERS LICENSE #: **TELEPHONE NUMBER:**

APPLICANT NOTICE:

1. The *VILLAGE* performs background checks on all applicants. The *VILLAGE OF WESTON* may suspend, revoke or deny a license issued upon this application if the applicant fails to provide requested information or is not truthful in completion of this application.

2. The *VILLAGE OF WESTON* does not issue licenses or permits related to alcohol beverages to any person who has habitually been a law offender or has been convicted of a felony that the *VILLAGE* determines, substantially relates to the licensing activity unless the person has been duly pardoned.

3. Even if your license has been granted by Council, it will be held if you owe any outstanding fines, forfeitures or other debts to the *VILLAGE*.

4. Because application fees offset the cost to process your application, the fees are non-refundable regardless of whether you obtain a license or not.

Have you been arrested, or have charges pending or been convicted of any offenses, or violations or any federal, state, or municipal laws or ordinances here or any other municipality? ☐ NO ☐ YES (Complete arrest or conviction information below)

NAME _____ STATUTE # / LOCAL ORDINANCE _____

CHARGE _____ WHERE CONVICTED _____

DATE _____ PENALTY _____ MISDEMEANOR _____ FELONY _____

List additional information regarding arrest / conviction information on the back of this application.

I hereby testify the above information is true and correct. I agree, in consideration of the granting of this license to comply with the laws of the State of Wisconsin, the *VILLAGE OF WESTON* Municipal Code and the rules and regulations of the various regulatory agencies and commissions of the *VILLAGE OF WESTON* pertaining to the supervision of activities permitted under the license for which this application is made. I understand this license may be revoked by the *VILLAGE OF WESTON* according to the law.

Note: If you renew by mail and have not received your license by the end of June, please call the *VILLAGE OF WESTON CLERK*

_____ _____

(APPLICANT (SIGNATURE) (DATE)

Remit completed application with payment to:

VILLAGE OF WESTON
VILLAGE CLERK
5500 SCHOFIELD AVE, WESTON, WI 54476