

**City of Ladysmith**  
**Operator License Application**

to Serve/Sell Fermented Malt Beverages and Intoxicating Liquors



**APPLICATION FOR: (Please check one)**

**REGULAR OPERATOR LICENSE-\$30.00 for 1 year (Payable to City of Ladysmith)**

To serve/sell fermented malt beverages and intoxicating liquors

License expires June 30, 20\_\_

**NEW APPLICANT                      OR                      RENEWAL APPLICANT**

**PROVISIONAL OPERATOR LICENSE-\$15.00 for 60 days**

To serve fermented malt beverages and intoxicating liquors

Must be enrolled in Responsible Beverage Server Training Course

License expires 60 days after issuance

**PRINT the answers to the following questions fully and completely:**

Name \_\_\_\_\_

First

Middle Initial

Last

Current Address: \_\_\_\_\_

Previous Address (if less than 2 yrs): \_\_\_\_\_

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_      Driver's License # \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Establishment Where Employed: \_\_\_\_\_

**Circle One:   U.S. Citizen      U.S. Alien      Temporary Resident (Employment # \_\_\_\_\_)**

**FILL IN ALL THAT APPLY:**

I have held an operator's, premise's or manager's license within the past two years (if in another municipality other than the City of Ladysmith, proof is required. Please attach copy of license.)

I have completed the "Responsible Beverage Server's Training Course"

Date: \_\_\_\_\_ Name of Provider: \_\_\_\_\_ (Attach Certificate)

I have enrolled in the "Responsible Beverage Server's Training Course"

Scheduled Date of Course: \_\_\_\_\_ Name of Provider: \_\_\_\_\_

**ANSWER THE FOLLOWING QUESTIONS FULLY AND COMPLETELY:**

Have you ever been **convicted of any felony?** **YES                      NO**

Have you ever **violated any law** of the State of Wisconsin or of the United States? **YES                      NO**

If yes, what was the nature of the conviction \_\_\_\_\_

Name of Court \_\_\_\_\_ Date of Conviction \_\_\_\_\_

Have you been **convicted of violating any license law or ordinance regulating** **YES                      NO**

**the sale of beverages or intoxicating liquors?** If yes, give details: \_\_\_\_\_

**Turn over to sign application.....**

I, the undersigned, do hereby make application to the City Council of the City of Ladysmith, Rusk County, Wisconsin, for an "Operator's License" as provided by Section 125.17 of the Wisconsin Statutes from date hereof to June 30, 20\_\_\_\_, inclusive (unless sooner revoked). I am familiar with the laws, ordinances, and regulations (Federal, State and Local) affecting the sale of Fermented Malt Beverages and Intoxicating Liquors, and do hereby agree if granted said license to obey all provisions of said laws.

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Signature of Applicant

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**OFFICE USE ONLY**

Date Application Faxed to PD \_\_\_\_\_ Fee paid by Check # \_\_\_\_\_ or Cash \_\_\_\_\_

LPD Approved: \_\_\_\_\_ Date: \_\_\_\_\_

Chief of Police

Denied: \_\_\_\_\_ Date: \_\_\_\_\_

Chief of Police

Date presented to City Council \_\_\_\_\_ Council Action: Approve \_\_\_\_\_ Deny \_\_\_\_\_

Comments: \_\_\_\_\_

License # Issued \_\_\_\_\_ Term of License \_\_\_\_\_ to June 30, 20\_\_\_\_