



# City of La Crosse, Wisconsin

## APPLICATION FOR *BEVERAGE OPERATOR* LICENSE

Check One:  New  Renewal

Fee: \$ \_\_\_\_\_

Invoice: \_\_\_\_\_

2-YEAR

Approved by the Common Council.  
Note: When applying within a license year, the period may be shorter than 2 years.

60-DAY PROVISIONAL

Must also apply for the 2-year; issued once the background investigation is complete and approved.

14-DAY TEMPORARY

Issued to operators employed by, or donating services to, non-profit corporations. Max two per year.

Year ending June, 20 \_\_\_\_\_

Period ending: \_\_\_\_\_

Period: From \_\_\_\_\_ To \_\_\_\_\_

<b>NAME</b>	First	<u>Full</u> Middle	Last
<b>AGE</b>			
<b>DATE OF BIRTH</b>			
<b>PHONE NUMBER</b>			
<b>EMAIL</b>			
<b>ADDRESS</b>	Street	City	State Zip
<b>MAILING ADDRESS</b> If different.			
<b>PLACE OF EMPLOYMENT</b> Where you will be using the license; must be in the City of La Crosse.			
<b>IDENTIFICATION</b> Driver License/State ID Number	Number	State	
<b>Violations – please read carefully!</b> List ALL violations (Federal, State and City) INCLUDING speeding or other traffic violations, alcohol, drug, etc. Include any pending violations and/or charges that were dismissed. Failure to list all violations may result in the rejection of this application. <b>**IF THIS IS A RENEWAL</b> , list only violations since date of your last application.			
<b>HAVE YOU EVER BEEN ARRESTED? YES <input type="checkbox"/> NO <input type="checkbox"/></b>		<b>IF YES, FOR A FELONY? YES <input type="checkbox"/> NO <input type="checkbox"/></b>	
<b>DESCRIPTION OF OFFENSE</b>	<b>DATE OF OFFENSE</b>	<b>CITY &amp; STATE OF OFFENSE</b>	

I certify the above information is true, correct and complete and that falsification may result in denial of such license. Further, I understand that refunds are not allowed for any portion of the application fee paid even if denied for past and/or pending violations and/or for any outstanding debts owed to the City.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Approval of Municipal Authority** - Investigations done by the La Crosse Police Department.

Upon investigation of statements made on this application and municipal and state criminal records, license is hereby:  **APPROVED**  **DENIED**

**Office Use Only**      Training: \_\_\_\_\_      Granted: \_\_\_\_\_      2-Year License Number: \_\_\_\_\_

