Town of Eagle Point Bartender/Operator License Application Chippewa County License period: _______, 2025 to JUNE 30, 2025 FEE: \$20.00

First Name:	Last Name:		M.I.:
Address:	City:	State:	Zip:
Date of Birth:/	Social Security last 4 digits:	Phone:	
Driver's License #:	Are you 18 years or old	ler: Yes/No	
Name of Business where you	will be working:		
*Do you currently hold or have *If Yes what year:	e had an operator's license for the Tow ——	vn of Eagle Point? \	res/No
	rator's license in another community? what year:		erk: Yes/No
*Have you had any arrests or	convictions? Yes/No		
If Yes list what and date:			
•	tor (Bartender) license or completed a ation, then according to Section 125.1 ess Training Course.	_	-
*Have you completed the Alco *Copy given to clerk: Yes/No	hol Awareness Course? Yes/No Da	ite completed:	_//
and correct. The applicant under application. The applicant agrees Wisconsin State Statutes and her	penalty of perjury under the laws of the S restands that the information on their curre is to comply with all laws subject to the lim reby agree to comply with all resolutions, ring of such beverages and liquors if a lice iminal record check will be done.	ent and past records w hitations imposed by So ordinances, regulation	ill become part of this ection 125.17(1) of the ns, Federal, State, and
*Signed:	*Date:	/	
Applicant			
	Office Use Only		
Background check OK dat Clerk Initials:	te/20		
Date of Provisional License Issue	ed://20 to//20	\$20.00PD:/2	20ck#cash
Date of Regular License Issued:	//20	\$20.00PD://20	0ck#cash
Approved by Town Board on:	//20		