

CHECK THE APPROPRIATE ANSWER TO THE QUESTIONS BELOW:

- 1. Have you ever been arrested, pled guilty, or been convicted of any alcohol beverage related offense including any of the following, on or after your 17th birthday:
 - A. Illegal purchase, sale, or providing intoxicating liquor or beer? Yes_____ No_____
 - B. Violation of closing hours at a licensed premises? Yes_____ No_____
 - C. Any other violation of laws pertaining to alcohol beverages? Yes_____ No_____
 - D. Disorderly conduct/criminal damage to property that occurred at a licensed establishment? Yes_____ No_____
 - E. Obstructing a police officer while on the licensed premises for the sale of alcohol beverages? Yes_____ No_____

- 2. Have you as a juvenile or adult been convicted of:
 - A. Operating a motor vehicle while under the influence of alcohol or controlled substance or with a prohibited alcohol concentration (stats. 346.63)? Yes_____ No_____
 - B. Operating a Motor Vehicle in violation of Absolute Sobriety? (for persons under age 21)(Statute 346.935) Yes_____ No_____
 - C. Having alcohol beverages in your possession in a motor vehicle as a driver or passenger (stats. 346.935) Yes_____ No_____

- 3. Have you ever been convicted of or pled guilty to a misdemeanor or felony? Yes_____ No_____

- 4. Do you have any pending ordinance, criminal charges? Yes_____ No_____

- 5. Do you presently have any overdue or outstanding forfeitures resulting from a violation of an ordinance of any county, city, village, or town? Yes_____ No_____

If you have answered yes to any of the above questions, list the charge, exact location of arresting agency, date of conviction and penalty.

List the name and address of the licensed alcohol beverage premises that will employ you.

I hereby certify that the information provided on the application is true and correct. I understand that failure to provide all required information shall be grounds for denial of my alcohol beverage license. I further understand that falsification of any information shall be grounds for denial or revocation of this license. I am aware of the laws governing the sale of alcohol beverage and agree to abide by those laws. I understand that the Police Department will do a background check based on my application. I hereby authorize the records requested by the Police Department in its investigation.

Signature of Applicant Date Signed

FOR OFFICIAL USE ONLY

Police Department background check done by: _____ Date: _____

Approved / Denied by: _____ Reason: _____

Attended the required educational course: YES NO RENEWAL (circle one)

Copy of certificate attached: YES NO (circle one)

Fee paid: \$_____ Date reviewed by Village Board: _____