

# Operator License Application

**Town of Clayton Town Hall**

8348 Hickory Ave

Larsen, WI 54947

Phone: 920-836-2007

Email: clerk@claytonwinnebago.gov

Website: <https://www.townofclayton.net/>

## LICENSE TYPE

\* FEES ARE NON-REFUNDABLE

DATE RECEIVED: \_\_\_\_\_

☐

Operator License

☐ Regular☐ Type A☐ New☐ Renewal

Expires: \_\_\_\_\_

☐Provisional License  
(Valid for 60 days)☐ Regular☐ Type A

Expires: \_\_\_\_\_

☐

Temporary License (Expires with event)

Expires: \_\_\_\_\_

I am submitting this application to the Town of Clayton, Winnebago County, Wisconsin, for a License to Serve Fermented Malt Beverages and Intoxicating Liquors from the date a License is granted through June 30, 20\_\_\_\_ (unless sooner revoked), subject to the limitations imposed by Section 125.32(2) and Section 125.68(2) of the Wisconsin Statutes and all acts amendatory and supplementary to these statutes. I agree to comply with all laws, resolutions, ordinances, and regulations, Federal, State, or Local, affecting the sale of such beverages and liquors if a license is granted to me

## APPLICANT INFORMATION

\*ANSWER ALL QUESTIONS COMPLETELY. PLEASE PRINT

Applicant Name (Last, First, MI): \_\_\_\_\_ Maiden: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ State License Issued In: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Sex: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Have you ever had an Operator's License? ☐ Yes ☐ No If yes, where? \_\_\_\_\_

Name of Establishment where you will be selling alcohol: \_\_\_\_\_

## CONVICTION RECORD

Have you ever been convicted of a felony, misdemeanor, or any law of Wisconsin or the USA? ☐ Yes ☐ No

If yes, provide date, location, and explanation of violation (Please be specific): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Have you ever been convicted of any alcohol law violation? ☐ Yes ☐ No

If yes, provide date, location, and explanation of violation (Please be specific): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## PENALTY NOTICE

I understand and agree that a civil and criminal background check will be performed prior to license issuance and that the Town of Clayton Board of Supervisors must review and approve the application. I swear that the information provided in this application is true and correct to the best of my knowledge and belief.

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

## Town of Clayton Operator License Information

To apply for an Operator's License, one of the following **MUST** be provided along with your completed, signed application form:

1. Proof of Registration for the Responsible Beverage Server Course
2. Certificate of Completion from the Responsible Beverage Server Course - **MUST** be dated within the past 2 years & brought to the Clerk's Office PRIOR to an Operator's License being issued
3. A current Operator's License from **another municipality** in the State of Wisconsin - a previous Operator's License from Town of Clayton does **NOT** meet this requirement

The application must be completed by answering all questions

**All** arrests and convictions must be listed on the application. It is your obligation to provide an accurate list. Omissions may result in the denial of your application.

If an Operator's License is needed immediately, a Provisional License may be applied for. Only one Provisional License per person, per year will be issued. Provisional Licenses are valid for 60 days.

**NOTE:** A Provisional License will only be issued if an application for a Regular Operator License is completed, with fees paid, and Provisional License fees are also paid.

License fees are non-refundable and are to be paid at the time of filing the application form. Please see the posted Town Fee Schedule for the most up to date license fees.

Renewal applications must be submitted by June 1st of the year the license expires.

It is strongly advised that you attend the Town Board meeting at which your application will be heard so you may answer any questions the Town Board may have of you.

### PARAMETERS FOR DENIAL OF AN OPERATOR'S LICENSE

Giving false information, incomplete information, or misinformation on the application.

An arrest or conviction of underage selling during the past five (5) years.

An arrest or conviction of underage person on premise during the past five (5) years.

Conviction of any substance abuse during the past five (5) years.

Conviction of driving/operating under the influence of any alcohol or controlled substance during the past five (5) years.

Conviction of allowing another person to use Operator's License during the past five (5) years.

Conviction of selling to an intoxicated person during the past five (5) years.

Conviction of selling after hours in the past five (5) years.

Conviction of selling without a license in the past five (5) years.

Conviction of any part of Wis. Stat. Chapter 125, not listed above, relating to alcoholic beverages during the past five (5) years.

An arrest or conviction of charges related to the activities performed while bartending within the past five (5) years.

Any habitual law offender or felon where the circumstances of the charges substantially relate to the licensing activity.

Convictions of illegal gambling during the past five (5) years.

Any applicant denied a license may appeal the decision by filing a Notice of Appeal with the Town Clerk within 14 days after written notice of denial is mailed to the applicant. The date of the next Town Board meeting at which an appeal will be heard will be included in the mailing. Denied applicants cannot re-apply for an Operator's License in the Town of Clayton until one year after the denial.

By signing this document, I acknowledge that I have read and understand the information regarding the Town of Clayton Operator License Information and the Parameters for Denial of an Operator's License

Signed: \_\_\_\_\_

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