	Village of Johnson Creek Operator License Application					125 Depot St, PO Box 238	
						Johnson Creek WI 53038	
Crossroads with a Future	Expires June 30 Yearly- Fees Non-Refundable					P: 920-699-2296 <u>vi.johnsoncreek.wi.gov</u>	
Fees include any applicable Circle: New (\$45) Renewal (\$45) Provisional (\$20) Temporary (\$20) background check charges.						Total Fee: \$	
Full Legal Name: Former Name(s):							
Driver's License #: Date of Birth:/ Copy of driver's license MUST be attached to application						/	_
Phone Number:			Email Address	:			
Street Address: City/State/Zip:							
Prior Street Address (if above address is less than 5 years)				State	ZIP	From	То
List establishment(s) where you intend to use this license, if approved:							
Have you ever been convicted of a felony? YES NO							
Within the past five (5) years, h	•				ourt for, or	forfeited a bor	nd for any of
the following? If uncertain, check WI Circuit Court Access at http://wcca.wicourts.gov a) Any underage alcohol violation? YES NO							
b) Operating a motor vehicle while intoxicated?						YES	NO
c) Selling or furnishing alcoholic beverages to underage person?						YES	NO
d) Permitting underage person on licensed premises?						YES	NO
e) Allowing persons on licensed premises after closing?						YES	NO
f) Any alcohol related violation other than a, b, c, d and e?						YES	NO
g) Sale or possession of drugs of any kind?						YES	NO
h) Fighting, disorderly conduct, assault or battery?						YES	NO
i) Resisting arrest or obstructing an officer?						YES	NO
j) Any crime or ordinance violation not listed above other than traffic or parking tickets?						YES	NO
For each "YES" in #3, identify all violations on the following lines. Attached additional sheets if needed or continue on back.							
Type of Arrest, Summons, Violation or Charge Month/Year						City	State
						,	
				1			
Within the last two (2) years, d	lid you have or com	plete one of the	following:	1			
Successfully completed a Responsible Alcohol Servers Course							
*New applicants must provide pr							_
Certification: I, the undersigned, do h part of this application. I understand t constitutes sufficient reason for rejec Federal, State and Local, pertaining to understand that this license is only va	that I am subject to a cr tion, denial, non-renew o the sale of such bevera	iminal history backg al, or revocation of ages and liquors, an	round check. I un my license. I am d if granted said I	derstand that an familiar with all la	inaccurate, r aws, resolutio	nisleading, or false ons, ordinances an	e answer Id regulations,
Applicant Signature:				Date:			
License #: Pro	v. Lic #:	_			APPROVE		DENY
License #: Pro Date Paid: Amo	unt: \$	Cash/Check#: _					
Clerk-Treasurer's Office Signature		Date		Police Depart	tment Signatur		te