



CITY OF WAUKESHA
CLERK TREASURER'S DEPARTMENT
 201 Delafield Street, Waukesha WI 53188
 Tel: (262) 524-3550 Fax: (262) 524-3888
www.waukesha-wi.gov

OFFICE USE ONLY! - BTC

Clerk Initials: _____

AAC Date: _____

Record Ck requested: _____

License #: _____

BARTENDER / OPERATOR LICENSE APPLICATION

For license period ending June 30, 20

Application Information – Section 1

Check One: Regular License Temp License for Non-profit event (Fee: \$22, limit 2/year, 14-day max) Event Date: _____

Check One: Initial Application - \$82 Renewal Application - \$82 Reapplication (due to application being rejected) - \$20

Within the last 2 years, prior to the date of filing this application, have you:

1. Held a bartender's license or acted as an agent of a licensed liquor establishment in Wisconsin? Yes No
2. Completed a Responsible Beverage Server Training Course certified by the State of Wisconsin? Yes No

**If you answered "No" to both questions above, you must complete a Responsible Beverage Training Course and provide proof before a regular license can be issued. *If you answered "Yes" to any question above, you must provide proof before a regular license can be issued.*

Applicant Information – Section 2

First Name _____ Middle Name _____ Last Name _____

Maiden Name (if any): _____ Date of Birth _____ Check One: Male Female

Phone Number _____ Email _____

Home Address _____

City _____ State _____ Zip Code _____

Violations – Section 3

(please initial that you understand the following) _____ I understand failure to list all violations may result in my application being rejected. If my application is rejected, I can choose to pay the reapplication fee of \$20 if I want to be issued a license. I further understand that a complete record check will be conducted by the Waukesha Police Department and compared to the information I provided on this application.
Please know that not all information is listed on the Wisconsin Court System website also known as C-CAP.

***Renewal Applicants only need to disclose new information since the last time you applied for a bartender license.**

1. Have you ever been arrested, cited or convicted of charges related to activities performed while bartending? Yes No
2. Have you had any arrests, charges, or citations related to controlled substance or involving alcoholic beverages? Yes No
3. Have you ever been convicted of a felony? Yes No

List all arrests, convictions, dismissals & pending cases from age 18 to now below including details of any questions you answered "Yes" to above unless this is a renewal application. If this is a renewal application, please list all items since your last application.

List Violations with Approximate Date (Do not include speeding & parking violations)

**Continue on back of form if necessary.*

Employment – Section 4

Place of Employment as licensed operator: _____ Street Name: _____

Applicant Consent & Signature – Section 5

I, the undersigned, do hereby make an application to the City of Waukesha for an Operator's License to serve or sell fermented malt beverages and intoxicating liquors subject to Wisconsin Statutes and City of Waukesha Ordinances. I authorize the City of Waukesha to conduct a background check to verify the information provided, and authorize the release of all information regarding my record.

Signature _____ Date _____

<input type="checkbox"/> Prov. Approved	<input type="checkbox"/> Prov. Denied	Prov. License Mailed: _____	Council Date: _____	Final License Mailed: _____
<input type="checkbox"/> Temp. Approved	<input type="checkbox"/> Temp. Denied	Temp. License Mailed: _____	Council Date: _____	