



TEMPORARY OPERATOR’S LICENSE APPLICATION

For one (1) to fourteen (14) consecutive days, two (2) per calendar year, \$10 fee

FILLING OUT YOUR APPLICATION

1. Should your information on this application not be complete, correct or legible, your license may be denied.
2. Applications must include a copy of Responsible Beverage Server Class Certificate or current license from another Wisconsin Municipality and a copy of the front and back of your valid driver’s license or state issued photo identification card.

REVIEW OF YOUR APPLICATION

1. Somers will perform a background check and recommend approval or denial.
2. If you are denied, you may request an appeal through the Village Clerk's office and your appeal will be placed on the next Village or Town Board agenda. If your application is denied, the fee is non-refundable, and you cannot reapply for a minimum period of six months. Meetings of the Village or Town Board are open to the public. This application is a public record and subject to release.

PLEASE PRINT CLEARLY

FIRST NAME		M.I.	LAST NAME	
OTHER NAMES, ALIASES, OR BIRTHDATES EVER USED				
DATE OF BIRTH	AGE	DRIVER LICENSE NO.		ISSUING STATE
HOME ADDRESS			CITY	STATE & ZIP
PHONE		EMAIL		
MAILING ADDRESS (IF DIFFERENT)			CITY	STATE & ZIP
SPONSORING ORGANIZATION:				
EVENT:			EVENT DATE(S):	

ARREST AND CONVICTION RECORD

Since your 17th birthday, have you ever been convicted of a felony or misdemeanor? (Including criminal traffic offenses)	YES	NO
As a juvenile, were you ever waived into adult court and convicted of a felony or misdemeanor?	YES	NO
Have you ever been convicted by a military court-martial?	YES	NO

Have you ever been convicted of disorderly conduct that involved violence against another person?	YES	NO
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List any PENDING Citations, Tickets or Criminal Charges

YEAR	LOCATION	CHARGE	At time of incident were you under the influence of alcohol and/or other drugs?	Did the incident occur in or around a business that serves alcohol?

Criminal Convictions & Citations, Excluding Traffic Citations that are Not Alcohol Related

YEAR	LOCATION	CHARGE	At time of incident were you under the influence of alcohol and/or other drugs?	Did the incident occur in or around a business that serves alcohol?

I hereby agree to display and/or surrender my operator's license to any police officer or the State of Wisconsin for verification while I am working and further agree to abide by the State Statutes and local ordinances governing the sale of beer and intoxicating liquors. I hereby acknowledge being given and having read a copy of Wis. Stat. 125.32 (2) and (3). I give the Village of Somers permission to perform any necessary checks to verify the above statements. Under penalty of law, I swear that the information provided in this application is true and correct to the best of my knowledge and belief.

SIGNATURE OF APPLICANT	DATE
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For Office Use Only

Date Paid	Amount Paid	Conditions: Education ___ Police ___ Fees ___
Clerk Approval	Date	Village Board Approval Date
License # Issued:		