APPLICATION FOR LICENSE TO SERVE FERMENTED
MALT BEVERAGES AND INTOXICATING LIQUOR
Chapter 247-6 City of Mayville Municipal Code
Non-Refundable Payment due at time of Application.
We will need a copy of your driver's license & class certification.
One Year $20.00; Two Year $30.00; Provisional $10.00

Date: _________________

TO THE CITY CLERK OF THE CITY OF MAYVILLE:
I hereby apply for a license to serve, from the date hereof until June 30, ________, inclusive (unless sooner revoked) fermented malt beverages and intoxicating liquors, subject to the limitations imposed by Section 125.32(2) and 125.68(2) of the Wisconsin Statutes and all acts amendatory thereof and supplementary thereto, and hereby 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 be granted to me.

I certify that I am a citizen of the United States and have been a residence of the State of Wisconsin continuously since __________ and the City of Mayville since __________.

Name: ____
(First) (Middle) (Last)

Maiden Name: ____________________ Date of Birth: ______________ Sex: __________

Present Address: ____________________________________ Zip: ______________
(Address) (City) (State)

Telephone: ____________________ Email for future notification of renewal: ________________________

Address Prior to Mayville Residency: ____________________________________
(Address) (City) (Zip)

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Have you ever been convicted of any felony or violating any law of the State of Wisconsin or of the United Sates or any municipal ordinance regulating the sale of intoxicating liquors? ________

Date of Convictions: ________________________ Name of Court: ___________________________

Nature of Offense: ____

Where will you be employed in the City of Mayville? ______________________________________

Do you presently hold a Mayville Bartender License? ______________________________________

If no, did you at one time hold such a license? ______________ Year ________

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Signature of Applicant

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Pursuant to Ordinance, the undersigned recommends that an operator's license be granted to the above mentioned applicant.

______________________________ ______________________________
Chief/Captain Signature Date

License Number Issued: ___________________
Provisional License Number Issued (if applicable): ___________________________