

LICENSE APPLICATION for TEMPORARY OPERATOR'S



License # _____

License fee: \$10.00

Drivers License or State ID required

Code: COP1 & COP1-PD **FEES ARE NON-REFUNDABLE**

ONLY 1 TEMPORARY LICENSE ISSUED PER YEAR.

SECTION 11.010
CITY OF MANITOWOC

SECTION 1 – APPLICANT INFORMATION

| | | | |
|-----------------------------------|------|--------------------------|-----|
| Applicant Name (Last, First, MI) | | Maiden Name | |
| Street Address | City | State | Zip |
| Driver's License/ID Number | | State Licenses Issued In | |
| Date of Birth | Sex | Telephone Number | |

Are you employed by or donating your services to a nonprofit corporation? Yes No
*(If **NO**, you cannot apply for a temporary operator's license)*

Name of Nonprofit: _____ Dates (Maximum 14 days from July 1st to June 30th)

Have you had an Operator's (Bartender's) License or were you an agent for a licensed premise in the past two years?
Yes No
If Yes; where?

SECTION 2 – CONVICTION RECORD

Have you EVER been convicted of a felony? Yes No
If Yes; when, where and what type of violation? (Please be specific)

Have you EVER been convicted of a misdemeanor, ordinance violation or traffic offenses? Yes No
If Yes; when, where and what type of violation? (Example; OWI, disorderly conduct, retail theft, sale of alcohol to underage person)

SECTION 3– PENALTY NOTICE

Under penalty of law, I swear that the information provide in this application is true and correct to the best of my knowledge and belief. Failure to answer any of the above questions truthfully will be considered grounds for denial of this license application. The applicant certifies that he/she is familiar with the laws and regulations pertaining to the sale of alcoholic beverages. Signer agrees to observe the provisions of the Manitowoc Municipal Code and Wisconsin Statutes.

Signature of Applicant: _____

STATE OF WISCONSIN)
MANITOWOC COUNTY (ss

The above named applicant being first duly sworn on oath says that he/she is the person who made and signed the foregoing application for an operator's license; that all the statements made by the applicant are true.

Subscribed and sworn to before me this _____ day of _____, 20____.

My commission expires _____

Notary Public, Manitowoc Co., Wisconsin

FOR OFFICE USE ONLY

Chief of Police Recommendation: Grant Deny

Made By: _____



- **OPERATOR (BARTENDER) LICENSE**

- To apply for an Operator's License send your completed, signed application form to Manitowoc City Clerk's Office, 900 Quay Street.
- **License fees are non-refundable** and are to be paid at the time of filing the application form with the Clerk's office at 900 Quay Street.
 - Temporary operator license is \$10
 - **ONLY 1 TEMPORARY LICENSE IS ISSUED PER YEAR (14 day maximum)**
- Questions? Please call (920)686-6950