

**TOWN OF RHINE
APPLICATION FOR OPERATOR'S LICENSE**

I, the undersigned, do hereby make application to the Town of Rhine Board, in the Town of Rhine, in Sheboygan County, for an Operator's License as provided by Section 125.17 of the WI State Statutes, to serve alcoholic beverages in a place licensed in the Town of Rhine for the sale of alcoholic beverages. I agree that I will comply with all laws, resolutions, ordinances, and regulation -- State, Federal and Local -affecting the sale of alcoholic beverages, if a license is granted to me, for the year ending June 30, 2017.

I certify that I was born on _____, 19____, and am a person 18 years of age or older and that **I have successfully completed a Responsible Beverage Server training course (attach proof of course completion if not submitted previously).**

| | | |
|-------------------------------------|----------------|---------------|
| Name (include middle initial) _____ | | |
| Social Security No. _____ | | |
| Address _____ | | |
| City/Village _____ | | |
| State _____ | Zip Code _____ | Phone # _____ |

| |
|--|
| Name of Establishment where License will be used _____ |
| Signature of Employer _____ |

Have you been convicted of violating any license law or ordinance regulating the sale of alcoholic beverages? _____

Have you ever been convicted of a felony, OWI, or any alcohol or drug offenses?
If so, please be specific _____

Dated this _____ day of _____, 20 _____.

Signature _____

Check One: New Application _____ Renewal _____

Background checks are performed for all applicants...both new and renewals.

Fee: \$15.00 per Year -- Payable with Application

| | |
|---------------------------------|---------------------------|
| ****OFFICE USE**** | |
| Received by _____ | Date _____ |
| Paid _____ | |
| Date of Town Board Action _____ | License No. Granted _____ |