

TOWN OF SPRINGDALE | DANE COUNTY, WI  
**OPERATOR'S LICENSE APPLICATION**  
*to serve Fermented Malt Beverages and Intoxicating Liquors*

At least 2 weeks prior to the next monthly Town Board meeting (3<sup>rd</sup> Tuesday), please return this application along with the following:

- copy of your valid Wisconsin ID or Driver's License;
- \$20 license fee; and
- proof of completion of Wisconsin-approved alcohol beverage server training course.

*To be completed by applicant. Please print legibly.*

Name \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_\_\*  
Phone \_\_\_\_\_ Email \_\_\_\_\_  
Address \_\_\_\_\_

☐ **New License**  
☐ **Renewal**

If renewal, where was the original license obtained? \_\_\_\_\_  
\_\_\_\_\_

As required by WI Stat. 125.17 (6), have you completed a state-approved responsible beverage server training course? **Yes / No** If yes, where, and when? \_\_\_\_\_

*Applicants are not required to complete the training course if they are renewing an existing operator's license, have completed the training course within the last two years, or have held a retail license, manager's license, or operator's license anywhere in Wisconsin within the last two years.*

Have you been convicted of a felony? **Yes / No**

Have you been convicted of violating **any law** of the State of Wisconsin or of the United States? **Yes / No**

If yes to either question above, please provide: date of conviction, name of court, and description for each offense. Use reverse side or attach separate sheet for multiple offenses.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you been convicted of violating any license law or ordinance regulating the sale of Fermented Malt Beverages or Intoxicating Liquors? **Yes / No** If yes, describe: \_\_\_\_\_  
\_\_\_\_\_

I, the undersigned, do hereby respectfully make application to the local governing body of the Town of Springdale, Dane County, Wisconsin for a license to serve - from June 30 of this year until June 30 of the following year 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 affecting the sale of such beverages and liquors if a license be granted to me.

Under penalty of law, I certify that all information provided on this application is true.

\_\_\_\_\_  
*Applicant Signature*

\_\_\_\_\_  
*Date*

\* pursuant to Wis. Stat. 125.04(5), applicant must be 18 years or older on the date this application is made.