	New
П	Ponowal



City Clerk's Office, 9229 W Loomis Rd Franklin, WI 53132 (414) 425-7500

License:	\$50		
Provisional:	\$15		
Duplicate:	\$10		

## Please print, sign and return to Clerk's Dept.

## **OPERATOR'S LICENSE APPLICATION**

Application Date:	Em	nployer(s):			
APPLICANT INFORMAT	<u>'ION</u> : <mark>(Please inc</mark> l	ude a LEGIBLE copy	of Driver's License of	or State ID)	
(First)	(Middle)	(Last)	(Alias, I	Maiden, Previous Name)	
(House Number & Street)			(Apt/Unit #)		
(City)		(State)	(Zip Code)	(Date of Birth)	
(Phone Numl	 per)		(Email)		
charged with a crime, p	lease indicate not	applicable (N/A).			
APPLICANT CONSENT	& SIGNATURE:				
Wisconsin Statutes, and all ordinances and regulations	acts amendatory the federal, state or loc	reof and supplemental the cal, affecting the sale of	nereto, and hereby agree such beverages and liqu	to the limitations imposed by §125 to comply with all laws, resolutions uors if a license is granted to me. In in which said license is issued.	
The City of Franklin will com the License Committee rega			ed on this application. You	u may be contacted to appear befor	
	has been convicted	of a misdemeanor or a		all be issued by the City Clerk upong to the activity being licensed, the	
	1.335, be issued und	der this chapter to any p		alcohol beverages may, subject of y been a law offender or has been	
	denial or revocation	n of my Operator's Lic	application, and under ense. Additionally, I ac	med in the preceding application rstand that any false or omitte knowledge that I have read an heck of my name.	
X					
Signature of Applicant			Date		
Where would you like you	ır license sent? □	Home Address □ E	mployer Address		
OFFICE USE ONLY:					
Required Application Materia					
☐ Application ☐ License Fe			w/Expired Applicants Only)		