



Operator License Application

Village of Union Grove · 925 15th Ave. Union Grove, WI 53182 · Phone: (262) 878-1818
 Fax: (262) 878-3782 · E-mail: info@vi.uniongrove.wi.gov · Website: www.uniongrovewi.gov

To apply for an Operator (Bartender) license to serve fermented malt beverages and/or intoxicating liquors, submit this application, license fee and any required attachments by mail, in the Municipal Center drop-box or in-person at the Municipal Center during normal business hours (Monday-Friday, 8 a.m. to 4:30 p.m.). Contact the Village Offices for questions at (262) 878-1818.

Section A. Type of License (Check at least one):

- Operator License (New)** – Attach \$100.00 fee, copy of driver's license or state ID, and copy of certificate showing successful completion of a Beverage Server Training Course within the past two years OR copy of Operator's License issued from a municipality in Wisconsin within the past two years. Valid 2 years
- Operator License (Renewal)** – Attach \$100.00 fee and copy of driver's license or state ID. Valid 2 years
- Temporary Operator License** – Attach \$10.00 fee and copy of driver's license or state ID. Note that license shall be issued only to operators employed by or donating their services to non-profit organizations. A maximum of two temporary operator licenses will be issued to any individual per year. This license shall be valid only for the period of time specified on the license, which time period shall not exceed fourteen (14) days.
- Provisional Operator License** – Attach \$15.00 fee, copy of driver's license or state ID, and proof of enrollment in Beverage Server Training Course OR copy of valid Operator's License issued from another municipality in Wisconsin. License shall be valid for up to sixty (60) days or upon approval of a regular Operator License.
- Background Check on all Operator Licenses** – Attach \$10.00 fee for background check
- Successfully completed a Responsible Alcohol Servers Course or**
- Held an Operator License issued in Wisconsin in the last two years or**
- Were an Alcohol Agent for a retail Alcohol License**

Section B. Applicant Information:

1. Full Name: _____
2. Date of Birth: _____
3. Full Address: _____
4. Telephone Number: _____
5. Driver License Number: _____ State of Issuance: _____
6. Gender: _____ Female _____ Male
7. E-mail Address: _____

Section C. Business or Organization:

1. Name of Business where License will mainly be used (if applicable): _____
2. For Temporary or Provisional License, name and date of event where license will be used:

Section D. Previous Offenses (Attach additional pages, if necessary):

Wisconsin Law prohibits the granting of an operator's license to an individual who has an arrest or conviction which substantially relates to the circumstances of the employment for which the license is require

1. Have you ever been convicted of any felony or misdemeanor? _____ Yes _____ No
2. Date(s) of Conviction(s): _____
3. Name of Court: _____
4. Nature of Offense: _____
5. 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, please explain: _____

Section E. Certification and Signature

I, by the signing of this application, consent to the full investigation of my background by law enforcement officials and also consent to the use and disclosure by the Village of Union Grove, a Wisconsin Municipal Corporation; its elected officials; its employees and its agents of any and all information obtained in said investigation relative to my competency to be license for said position for which I am applying. I attest that the information in this application is true and correct to the best of my knowledge.

Applicant Signature: _____ Date: _____

This Section for Office Use Only:

Date Filed: _____ Permit Fee: \$ _____ Received By: _____
Approval Decision Date: _____ Decision: _____
Conditions: _____
License Issue Date: _____ License #: _____



VILLAGE OF UNION GROVE BACKGROUND CHECK/POLICE RECORD CHECK

Circle One: Liquor License - Agent | Massage License | Peddler Permit | Food Truck

Fee: \$10.00

Full Legal Name (print) _____ Date of Birth: ____ / ____ / ____

Address: _____ City _____ State _____ Zip _____

Sex: Female _____ Male _____ Race _____ Former Name: _____

Email: _____ Phone: _____

Driver's License Number: _____ Expiration Date ____ / ____ / ____

Other Valid ID e.g. Wisconsin Photo ID, Passport # _____

Place of Employment (Name & Address) : _____

Prior Street Address (if above address is less than 5 years): _____

City _____ State _____ Zip _____ Dates: ____ / ____ / ____ to ____ / ____ / ____

COPY OF YOUR PHOTO ID MUST BE ATTACHED

Certification: I hereby certify that the information on this application is complete, accurate, true and agree to comply with all state and local laws, ordinances, and regulations. By signing this form, you agree to allow the Village to conduct a background check.

Signature of Applicant: _____ Date: ____ / ____ / ____

POLICE INVESTGATION USE ONLY

Racine County Sheriff Department Comments:

C.I.B. & N.C.I.C. Comments:

Contact Dept Ag, Trade and Consumer protection for Direct Sellers Permits: 414-266-1234 jay.garbe@wisconsin.gov

Return Completed Form & Payment to:

Village of Union Grove Village Clerk
925 15th Ave
Union Grove, WI 53182

Questions:

Village Hall Main Line: 262-878-1818 Option 2

Email: info@vi.uniongrove.wi.gov

Date Received Stamp