

TOWN OF WATERFORD

County of Racine

State of Wisconsin

415 N. Milwaukee St.

Waterford, WI 53185

Phone: (262)534-1871

Email:

tmayer@townofwaterford.net

APPLICATION FOR SODA WATER BEVERAGE LICENSE

To the Town Board of the Town of Waterford:

I (we), the undersigned, hereby apply for a license to sell SODA WATER BEVERAGES to be consumed on or off the premises, subject to the limitation imposed by Wis. Stat. §66.053 and acts amendatory hereof and supplementary thereto, and hereby agree to comply with all laws, resolutions, ordinances and regulations affecting the sale of such beverages during the license year ending June 30th, 20____.

Name of Business: _____

Location of Premises: _____

Owner(s): _____

Manager: _____

Description of other business to be conducted upon licensed premises: _____

Have you ever been convicted of any felony or of violating any law of the State of Wisconsin or of the United States of America? Y/N If yes: Date of Conviction:

_____ Name of Court: _____

Nature of Offense: _____

Have you been convicted of violating any license law or ordinance regulating the sale of beverages/intoxicating liquor? Y/N

If a corporation or association: List name of corporation; names, addresses, and ages of officers.

Name	Address	Age
------	---------	-----

Applicant Signature

Date