

# SCHEDULE FOR APPOINTMENT OF AGENT BY CORPORATION/NONPROFIT ORGANIZATION OR LIMITED LIABILITY COMPANY

Submit to municipal clerk.

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent. The following questions must be answered by the agent. The appointment must be signed by the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

To the governing body of:  Town  
 Village of \_\_\_\_\_ County of \_\_\_\_\_  
 City

The undersigned duly authorized officer(s)/members/managers of \_\_\_\_\_  
(registered name of corporation/organization or limited liability company)

a corporation/organization or limited liability company making application for an alcohol beverage license for a premises known as \_\_\_\_\_  
(trade name)

located at \_\_\_\_\_

appoints \_\_\_\_\_  
(name of appointed agent)

\_\_\_\_\_ (home address of appointed agent)

to act for the corporation/organization/limited liability company with full authority and control of the premises and of all business relative to alcohol beverages conducted therein. Is applicant agent presently acting in that capacity or requesting approval for any corporation/organization/limited liability company having or applying for a beer and/or liquor license for any other location in Wisconsin?

Yes  No If so, indicate the corporate name(s)/limited liability company(ies) and municipality(ies). \_\_\_\_\_

Is applicant agent subject to completion of the responsible beverage server training course?  Yes  No

How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin? \_\_\_\_\_

Place of residence last year \_\_\_\_\_

For: \_\_\_\_\_  
(name of corporation/organization/limited liability company)

By: \_\_\_\_\_  
(signature of Officer/Member/Manager)

And: \_\_\_\_\_  
(signature of Officer/Member/Manager)

## ACCEPTANCE BY AGENT

I, \_\_\_\_\_, hereby accept this appointment as agent for the  
(print/type agent's name)

corporation/organization/limited liability company and assume full responsibility for the conduct of all business relative to alcohol beverages conducted on the premises for the corporation/organization/limited liability company.

\_\_\_\_\_  
(signature of agent) \_\_\_\_\_ (date) Agent's age \_\_\_\_\_

\_\_\_\_\_ Date of birth \_\_\_\_\_  
(home address of agent)

## APPROVAL OF AGENT BY MUNICIPAL AUTHORITY (Clerk cannot sign on behalf of Municipal Official)

I hereby certify that I have checked municipal and state criminal records. To the best of my knowledge, with the available information, the character, record and reputation are satisfactory and I have no objection to the agent appointed.

Approved on \_\_\_\_\_ by \_\_\_\_\_ Title \_\_\_\_\_  
(date) (signature of proper local official) (town chair, village president, police chief)

# Auxiliary Questionnaire Alcohol Beverage License Application

*Submit to municipal clerk.*

**\*THIS FORM IS REQUIRED FOR EACH: INDIVIDUAL, MEMBERS OF THE CORPORATION, & AGENT (MAKE COPIES AS NECESSARY).**

Individual's Full Name <i>(please print)</i> <i>(last name)</i> <i>(first name)</i> <i>(middle name)</i>	
Home Address <i>(street/route)</i>	Post Office      City      State      Zip Code
Home Phone Number	Age      Date of Birth      Place of Birth
Email	

The *above named individual* provides the following information as a person who is *(check one)*:

- Applying for an alcohol beverage license as an **individual**.
- A member of a **partnership** which is making application for an alcohol beverage license.

\_\_\_\_\_ of \_\_\_\_\_  
*(Officer / Director / Member / Manager / Agent)*      ***(Name of Corporation, Limited Liability Company or Nonprofit Organization)***  
 which is making application for an alcohol beverage license.

The *above named individual* provides the following information to the licensing authority:

1. How long have you continuously resided in Wisconsin prior to this date? \_\_\_\_\_

2. Have you ever been convicted of any offenses (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of any other states or ordinances of any county or municipality? .....  Yes  No  
 If yes, give law or ordinance violated, trial court, trial date and penalty imposed, and/or date, description and status of charges pending. *(If more room is needed, continue on reverse side of this form.)*

3. Are charges for any offenses presently pending against you (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of other states or ordinances of any county or municipality? .....  Yes  No  
 If yes, describe status of charges pending. \_\_\_\_\_

4. Do you hold, are you making application for or are you an officer, director or agent of a corporation/nonprofit organization or member/manager/agent of a limited liability company holding or applying for any other alcohol beverage license or permit? .....  Yes  No  
 If yes, identify. \_\_\_\_\_  
*(Name, Location and Type of License/Permit)*

5. Do you hold and/or are you an officer, director, stockholder, agent or employe of any person or corporation or member/manager/agent of a limited liability company holding or applying for a wholesale beer permit, brewery/winery permit or wholesale liquor, manufacturer or rectifier permit in the State of Wisconsin? .....  Yes  No  
 If yes, identify. \_\_\_\_\_  
*(Name of Wholesale Licensee or Permittee)*      *(Address By City and County)*

6. Named individual must list in chronological order last two employers.

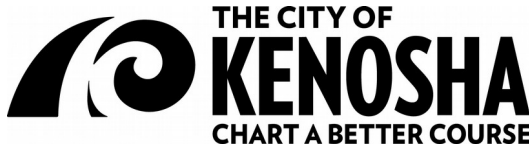
Employer's Name	Employer's Address	Employed From	To
Employer's Name	Employer's Address	Employed From	To

**READ CAREFULLY BEFORE SIGNING:** Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

**DL#:** \_\_\_\_\_

**Issuing State:** \_\_\_\_\_

\_\_\_\_\_  
*(Signature of Named Individual)*



**APPLICANT'S REPORT – POLICE RECORD**  
**CLK001 (rev. 08/17)**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_  
 (NOTE: Name Must Appear Exactly As It Appears On Driver's License Or State ID)

Home Address: \_\_\_\_\_  
 STREET CITY STATE ZIP

Date of Birth: \_\_\_\_\_ Driver's License #: \_\_\_\_\_  
 STATE NUMBER

License Applied For: \_\_\_\_\_

**PLEASE NOTE:** You may purchase a copy of your record for \$0.50 per page at the Records Department in the Public Safety Building, 1000-55th St. Additionally, check the WI Circuit Court Access website to obtain your circuit court records. Note: You must write your tickets, charges, citations, or offenses on the application. Do not attach copies of records.

1. Have you ever received any **tickets** or been charged with any **crimes** or **felonies** in any state?  **Yes**  **No**  
 If yes, provide: Charge, State, Date, Result (Include pending charges.)  
 (Examples: Speeding, WI, 5/8/2012, Guilty | Theft, FL, 5/22/2014, Dismissed | DUI, WI, 6/30/2017, Pending)

CHARGE	STATE	DATE	RESULT

2. Have you ever had your **driver's license suspended** or **revoked** in any state?  **Yes**  **No**  
 If yes, provide: Charge, State, Date

CHARGE	STATE	DATE

3. Have you ever served or been sentenced to serve time in **jail or prison in any state**?  **Yes**  **No**  
 If yes, provide: Charge, State, Date

CHARGE	STATE	DATE

4. Have you ever, while operating a business or engaged in a profession, been convicted of any charges involving unfair trade practices, unethical conduct, or discrimination in any state?  **Yes**  **No**  
 If yes, provide: Charge, State, Date, Result (Include pending charges.)

CHARGE	STATE	DATE	RESULT

5. List the name and address of all employers for which you have worked and/or businesses you have operated in the **past five (5) years**:

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6. Have you lived at your current home address for the **past (5) five years**?  **Yes**  **No**  
 If no, please list all addresses which you have resided at in the past (5) five years:

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7. Do you, the applicant, understand that if any of the information provided is false, and/or incomplete, you may be subjected to the penalties specified in 1.22 of the Code of General Ordinances, which is printed on the bottom of this application.  **Yes** \_\_\_\_\_

INITIAL

8. Do you, the applicant, understand that if any of the information provided is false, and/or incomplete, the license may be denied?  **Yes** \_\_\_\_\_

INITIAL

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

\_\_\_\_\_  
 Date

**1.22 LICENSE/PERMIT APPLICATIONS – CODE OF GENERAL ORDINANCES**

**A. Prohibition**

It shall be unlawful for any person, acting as an individual, a partner, a corporate officer, or an agent, to execute or file with any City Department, or to authorize any person to do so on their behalf, a license or permit application which is not true, correct and/or complete in all material respects and which was known by said person to be untrue, incorrect and/or incomplete. The term "in all material respects" shall mean with respect to some fact, which, if known to the granting authority, would be a basis or a consideration for license or permit denial.

**B. Penalty**

1) Any person violating Subsection A. above, shall, upon conviction thereof, be subject to a forfeiture not to exceed Five Hundred (\$500) Dollars, plus the payment of the costs of prosecution, and, in default of the timely payment thereof, shall be committed to the County Jail until such forfeiture has been paid, but not to exceed a period of thirty (30) days.

2) The license or permit granting authority may grant, but withhold the issuance of, any license or permit for a period not to exceed thirty (30) days from the date of granting under circumstances wherein an application is found by the granting authority to have violated Section A. above, and the applicant was provided with an opportunity to appear before the granting authority. The granting authority may also issue a written warning to the applicant which shall be made part of their license/permit record for two (2) consecutive license/permit years. Where such finding and penalty is made and imposed by other than the Common Council, applicant may, within ten (10) days of receipt of oral or written notice of the imposition of any such penalty, whichever is first, if both oral and written notice is provided, file a Notice of Appeal with the City Clerk and have such matter reviewed by the Common Council.

**1.225 ADMINISTRATIVE CHARGE FOR PROCESSING LICENSE/PERMIT APPLICATIONS**

The first Twenty-five (\$25) Dollars of the application fee for any License/Permit shall be retained by the City in the event of a License/Permit denial or the withdrawal of the application by applicant for administrative and processing costs, and the balance, if any, refunded to the applicant. Where the application fee is less than Twenty-five (\$25) Dollars, the entire application fee shall be retained by the City for administrative and processing costs.