



7325 W. Forest Home Ave., Room 102  
Greenfield, WI 53220  
Telephone: (414) 329-5219  
Fax: (414) 543-0591

License Fee: \$10.00  
Personal History Search Fee: \$8  
Add \$8 for each maiden/previous name

**TEMPORARY  
APPLICATION FOR AN OPERATOR'S LICENSE**

I hereby make application to the City Clerk of the City of Greenfield for a license to serve fermented malt beverages and intoxicating liquors, subject to all the limitations imposed by Sections 125.17, 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, Federal, State, or Local, affecting the sale of such beverages and liquors if a license be granted me. **Said license shall be valid from one day to fourteen days.**

In applying for licensing within the City of Greenfield, I understand that I am required to provide my full name, address and other information necessary for the Greenfield Police Department to conduct a personal history search.

ANSWER THE FOLLOWING QUESTIONS COMPLETELY: (PLEASE PRINT) (**All questions must be answered or your application will not be processed.**)

Complete Legal Name of applicant \_\_\_\_\_  
(FULL First Name) (FULL Middle Name) (Last Name)

List all names (maiden and/or previous) used in the last 15 years \_\_\_\_\_

Home address \_\_\_\_\_ Apt. # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Telephone # \_\_\_\_\_

Email \_\_\_\_\_ Last four digits of Social Security Number \_\_\_\_\_

Date of birth \_\_\_\_\_ City and State of birth \_\_\_\_\_

List all states in which you have previously lived \_\_\_\_\_

Driver's License or Wisconsin ID Number \_\_\_\_\_ State \_\_\_\_\_

Give name and address of licensed location at which you expect to be employed, or are employed, if granted a temporary operator's license \_\_\_\_\_

Have you ever been convicted of violating any State or Local license law or ordinance relating to intoxicating liquors or fermented malt beverages, including violations of operating a vehicle while under the influence of an intoxicant, underage possession/consumption of alcohol, selling or providing alcohol to underage persons? No \_\_\_\_\_ Yes \_\_\_\_\_

If yes, answer the following:

Date of such conviction \_\_\_\_\_ Name of court \_\_\_\_\_

Nature of offense \_\_\_\_\_

Have you ever been convicted of any felony, or of violating any law of the State of Wisconsin or of the United States?  
No\_\_\_\_\_ Yes\_\_\_\_\_ If yes, answer the following:

Date of such conviction\_\_\_\_\_ Name of court\_\_\_\_\_

Nature of offense\_\_\_\_\_

Under penalty of law, I swear that the information provided in this application is true and correct to the best of my knowledge.

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Signature of applicant

**RESTRICTIONS:**

1. No person may hold more than two licenses of this kind per year.
2. This license may be issued only to operators employed by, or donating their services to, nonprofit corporations.