Village of Wind Point, Wisconsin





NOTE: Provisional licenses will only be issued to an applicant enrolled in and pending completion of an authorized Responsible Beverage Service Course and who has not been denied an operator's license or who has not had their license revoked or suspended within the past twelve (12) months.

APPLICANT INFORMATION	N			
LAST NAME:	FIRST	NAME:	MID	DLE:
MAIDEN NAME:				
ADDRESS:				
PHONE:	DRIVER	RS LICENSE #:		
EMPLOYER INFORMATIO	N			
BUSINESS NAME:				
ADDRESS:				
CONTACT NAME:		PHONE:		
OLIFOTIONINAIDE	+			
QUESTIONNAIRE		NINO COMPLETIC		IODIZED
1. ARE YOU CURRENT ENR		ING COMPLETIC	_	
RESPONSIBLE BEVERAGE	SERVICE COURSE?		YES	NO
IF VEC. DI EASE DDO	VIDE NAME OF COLL			NIT.
IF YES, PLEASE PRO	VIDE NAME OF COU	KSE AND DATE (JF ENRULLIVIE	N1:
-				· · · · · · · · · · · · · · · · · · ·
APPLICANT SIGNATURE				
Under penalty of law, I swear	that the information pr	ovided in this appl	ication is true ar	nd correct to the best
of my knowledge and belief.	·			
,				
SIGNATURE:	DATE:			
DATE FILED:	AMOUNT PAID:	RECEIPT #:	REC	EIPTED BY:

LICENSE ISSUE DATE: EXPIRES: LICENSE NUMBER: