

# TOWN OF ROCK

## OPERATOR'S LICENSE APPLICATION

**TO: Town of Rock Town Board**

**I, the undersigned do hereby respectfully make application to the Town Board of the Town of Rock, Rock County, Wisconsin, for an "Operator's" License as provided by Section 125.17 of the Wisconsin Statutes, for year ending June 30, 2023.**

**I certify that I am \_\_\_\_ years of age. I am familiar with the laws, ordinances and regulations and I hereby agree if granted said license, to obey all provisions of said laws.**

**I certify that: ( check and complete one)**

**\_\_\_\_ I have successfully completed a responsible beverage servers training course ID # \_\_\_\_\_. (Certificate attached)**

**\_\_\_\_ I am presently enrolled in a responsible beverage servers training course at \_\_\_\_\_. Which is scheduled to start on \_\_\_\_\_.**

**\_\_\_\_ I am exempt from this provision because I have continuously held an operator's license with \_\_\_\_\_ since \_\_\_\_\_**

**Printed name \_\_\_\_\_ Birth Date \_\_\_\_\_**  
Last, First, Middle

**Street Address \_\_\_\_\_**

**City, State, Zip \_\_\_\_\_ Phone \_\_\_\_\_**

**Driver's license \_\_\_\_\_ Social Security # \_\_\_\_\_**

**Employer \_\_\_\_\_ Address \_\_\_\_\_**

**Your signature \_\_\_\_\_ Date \_\_\_\_\_**