

## Operator License Application

I, the undersigned, do hereby make application to the Town of Windsor, County of Dane, State of Wisconsin, for an "Operator's" License as provided by Section 125.17 of the Wisconsin State Statutes.

Non-Refundable Fee:

\$30.00 New/Renewal

\$15 Provisional

**Filling out your application**

- ◆ An Operator License is a privilege, not a right. Any false answers or omissions may result in the denial of your application.
- ◆ This application must be filled out accurately and completely, attach additional sheets if necessary to ensure all information is being reported.
- ◆ If you have any doubt as to whether to include the facts of a specific incident, it is recommended that you disclose the information.
- ◆ If you are unsure about how to respond to any questions on this form, check with the Town Clerk or staff for clarification.
- ◆ Your application will not be processed until you resolve any outstanding arrest warrants.
- ◆ You can obtain information regarding your arrest and conviction record from the court with which you interacted, or the Wisconsin Circuit Court Access website at [www.wcca.wicourts.gov/index.xsl](http://www.wcca.wicourts.gov/index.xsl) (CCAP may not provide a complete list of ALL convictions, such as Municipal Court records aren't included; however, you are responsible for providing complete information).

**Review of your application**

- ◆ The Town of Windsor will perform a background check to verify that the information you have provided is complete and accurate.
- ◆ All applications are reviewed and acted on by the Windsor Town Board. If there are concerns about your arrest and/or conviction record as it relates to your application, or if it appears that you falsified or omitted information from your application, the Town Board may call you to appear before them.
- ◆ If you are asked to appear but choose not to do so, your application may be denied.
- ◆ Meetings of the Town Board are open to the public and are normally held the 1<sup>st</sup> and 3<sup>rd</sup> Thursday of each month at 5:00 p.m.

Last Name		First Name				M.I.		
Residence: Street Address		City/Town/Village			State	Zip		
Phone	Date of Birth	Birth Place(City, State)	Race	Sex	Height	Weight	Hair	Eyes
Place of Employment		Contact person & phone number						
Driver's License (State & Number)				Social Security Number				

Other names, aliases or birthdates ever used:

**CHECK ONE:**

The Applicant has completed an Alcohol Awareness course. A copy of the completion certificate is attached.

**OR**

The Applicant has been issued an Operator's License in Wisconsin within the past 2 years. If *not* Town of Windsor, a copy of the license is attached.

Municipality License issued by: \_\_\_\_\_ Date Issued: \_\_\_\_\_

Cities and State(s) lived in since age 18, including where you now reside:	From:	To:
	From:	To:
	From:	To:
	From:	To:

Indicate whether you are a U.S. Citizen, U.S. Alien, or Temporary Resident:

U.S. Citizen    Alien    Temporary Resident (employment number \_\_\_\_\_ )

**ARREST AND CONVICTION RECORD**

**Please attach a separate sheet explaining the circumstances of each offense identified below that resulted in a conviction**

Since your 17 <sup>th</sup> birthday, have you ever been convicted of a felony or misdemeanor? (Including criminal traffic offenses)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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