

## Operator License Application

I, the undersigned, do hereby make application to the Village 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 Village 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 <https://wcca.wicourts.gov/> (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 Village 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 Village 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 Village 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 Village 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/Village/Town		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. Must be within two years.

**OR**

The Applicant has been issued an Operator's License in Wisconsin within the past 2 years. If *not* Village 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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As a juvenile, were you waived into adult court and convicted of a felony or misdemeanor?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever been convicted by a military court-martial?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever been convicted of disorderly conduct that involved violence against another person?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

**LIST ANY PENDING CRIMINAL CHARGES OR CITATIONS  
IF NONE PLEASE STATE N/A**

YEAR	Location	Charge	At the time of incident were you under the influence of alcohol and/or other drugs?	Did the incident occur in or around an establishment that serves alcohol?

**LIST ALL PRIOR CONVICTIONS FOR VIOLATIONS OF CRIMINAL LAWS, MUNICIPAL OR OTHER ORDINANCES OR REGULATIONS IN ANY STATE (EXCLUDING PARKING TICKETS)**

***IF NONE PLEASE STATE N/A***

YEAR	Location	Charge	At the time of incident were you under the influence of alcohol and/or other drugs?	Did the incident occur in or around an establishment that serves alcohol?

*The undersigned affirms that he/she is the person named in the foregoing application and that he/she completed this form and answered the questions completely and honestly. The applicant understands his/her record will be verified by Village of Windsor staff. **False information on this application may result in denial.***

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date of Application