



317 S. MAIN ST.
JEFFERSON, WISCONSIN 53549
674-7700



PROVISIONAL LICENSE APPLICATION

To serve fermented malt beverages and intoxicating liquors

License Effective ___ / ___ / ___ to ___ / ___ / ___ (60 day period) Provisional License # _____

This license is not renewable and can only be issued in combination with a regular Operator's License.

NAME OF APPLICANT: _____
FIRST MIDDLE INITIAL LAST

ADDRESS OF APPLICANT: _____

DATE OF BIRTH ___ / ___ / ___ SSN ___ - ___ - ___ PHONE NUMBER (___) ___ - ___

Where Do You Intend To Use This License? _____

- Have you ever been refused a license to serve fermented beverages and intoxicating liquors? YES NO
- Have you ever had such a license revoked? YES NO
- Have you even been convicted of violating any criminal statute? YES NO
- Have you even been convicted of violating any license law or ordinance regulating the sale of beverage or intoxicating liquors? YES NO

If you answered "YES" to any of the above questions, please give a complete explanation.

The undersigned, upon penalty of perjury, declares the foregoing application to be complete and accurate. Furthermore, I hereby empower the City of Jefferson and any of it's agents to obtain information pertaining to me and do hereby release any agency, business, or individual from any and all liability for damages of whatever kind which may at any time result to me, my heirs, family or associates because of compliance with this authorization and request to release information or any attempt to comply with it. I hereby agree to comply with all federal, state, and municipal laws, resolutions, ordinances and regulations affecting the sale of such beverage and liquors if the license privilege should be granted to me.

Signature of Applicant: _____ Date: _____

FOR OFFICE USE ONLY

PAID: Cash Check _____ Cost: \$15.00

Application MUST be filed with a Regular Operator's License!

Signature of Individual issuing Provisional License: _____

