



# TOWN OF BLACK WOLF

380 E. Black Wolf Ave. Oshkosh, Wisconsin 54902

<b>Paid:</b>
<b>Location:</b>
<b>BG:</b>

ISSUANCE DATE: \_\_\_\_\_, 2018

EXPIRATION DATE: \_\_\_\_\_ **FEE: \$2.00**

## APPLICATION FOR TEMPORARY OPERATOR (BARTENDER) LICENSE (14 DAY LICENSE)

1. Name of Applicant: \_\_\_\_\_

2. Address of Applicant: \_\_\_\_\_  
\_\_\_\_\_

3. Phone Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Sex: F\_\_ M\_\_

4. Organization: \_\_\_\_\_

5. Date(s) of Event: \_\_\_\_\_

6. Location of Event: \_\_\_\_\_

STATE OF WISCONSIN)

SS.

WINNEBAGO COUNTY)

The undersigned hereby deposes that he/she is the applicant named on this application and that he/she has made complete answers to each question and said answers are true and correct.

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 2018.

\_\_\_\_\_  
Applicant Signature

Office: 920.688.1404

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email: info@townofblackwolf.com