APPLICATION FOR PROVISIONAL BAR OPERATOR'S LICENSE

To the local governing body of the Town of Scott, Lincoln County, WI:			
I, the undersigned, do hereby respectfully mak provided by Section 125.17 of the Wisconsin S		n Provisional Opera	tor's License as
I certify that I am years of age. I am currently enrolled in a Wisconsin Responsible Beverage Service course, and confirmation of my enrollment in said course is attached.			
I understand that upon my completion of the Wisconsin Responsible Beverage Service course, I must provide written evidence of having completed said course to the Town of Scott, Lincoln County, WI.			
I understand that if issued, the provisional lice	nse will be valid fo	or a period not to ex	xceed sixty days.
Signature			
Name Printed			
Address	-		
Employing Agency	_		
Return completed form with proof of course e Clerk, W6692 Sunset Drive, Merrill, WI 54452.	•	o fee payable to To	wn of Scott to Town
Received by the Clerk of the Town of Scott this	sday	/ of	, 20
Provisional License issued effective for the period		to	
	Bonny Graap		