

RECEIPT # _____
ACCOUNT NO. 101.030.622

AMOUNT - \$ 5.00
"CLASS B" - \$10.00

LICENSE NO. _____

LICENSE YEAR:
CITY OF RACINE
APPLICATION FOR NONINTOXICATING BEVERAGE LICENSE

I/WE HEREBY APPLY FOR A LICENSE TO SELL AND/OR SERVE IN THE CITY OF RACINE FROM DATE HEREOF UNTIL JUNE 30, 2012 (UNLESS SOONER REVOKED), BEVERAGES OF LESS THAN ONE-HALF (1/2) OF ONE (1) PER CENTUM OF ALCOHOL BY VOLUME SUBJECT TO THE LIMITATIONS IMPOSED BY SECTION 66.0433(1) OF THE WISCONSIN STATUTES, AND HEREBY AGREE TO COMPLY WITH ALL LAWS, RESOLUTIONS, ORDINANCES AND REGULATIONS AFFECTING THE SALE OF SUCH BEVERAGES.

PLEASE ANSWER THE FOLLOWING QUESTIONS FULLY AND COMPLETELY:

(Check One:) BUSINESS IS:

_____ CORPORATION _____ PARTNERSHIP _____ INDIVIDUAL _____ OTHER _____
(Please specify)

PLEASE SUPPLY:

LEGAL NAME OF BUSINESS (/OWNER): _____

TRADE NAME: _____

BUSINESS ADDRESS: _____

BUSINESS TELEPHONE: _____ **ZIP CODE** _____

HOME ADDRESS: _____

CITY _____ **STATE** _____ **ZIP CODE** _____

HOME TELEPHONE: _____

SIGNATURE OF APPLICANT (Please print SIGNATURE) **DATE OF BIRTH**

SIGNATURE OF PARTNER /(IF APPLIES) (Please print SIGNATURE) **DATE OF BIRTH**

DATE

OFFICE OF THE CITY CLERK
730 WASHINGTON AVENUE, RACINE, WI 53403
(262) 636-9171