



July 1, 2022 – June 30, 2024 Operator's License Application

To be used to apply for an operator's license.

2828 Allouez Ave., Bellevue, WI 54311 | p. (920) 468-5225

TYPE OF LICENSE

☐ Provisional License - \$15 fee; valid for 60 days

☐ Renewal – Operator's License - \$50 fee; valid for two years

☐ New: Operator's License - \$50 fee
select if **applying** between 7/1/22 – 6/30/23

☐ New: Half-Term Operator's License — \$25 fee
select if **applying** between 7/1/23 – 6/30/24

APPLICANT INFORMATION

Print Name: _____
Last First MI

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Date of Birth: _____

Employer Name: _____ Phone: _____

Employer Address: _____

LICENSE APPROVAL

Upon Board approval of this
Operator's License Application,
how do you want to be notified:

☐ Call applicant to pick-up
☐ Mail to applicant

☐ Call employer to pick-up
☐ Mail to employer

ACKNOWLEDGEMENT

I, the undersigned, do hereby respectfully make application to the local governing body of the Village of Bellevue, County of Brown, State of Wisconsin, for an Operator's License as provided by Wisconsin § 125.17, through **June 30, 2024**. I certify that I am _____ years of age. I am familiar with laws, ordinances and regulations and I hereby agree if granted said license, to obey all provisions of said laws.

Applicant Signature: _____ Date: _____

OFFICE USE

Fee: ☐ \$15 – Provisional License #: _____ Expiration Date: _____ (valid for 60 days from the date issued)

☐ \$50 – New: Operator's License Valid From: _____ to **June 30, 2024**

☐ \$25 – New: Half-Term Operator's License Valid From: _____ to **June 30, 2024**

☐ \$50 – Renewal: Operator's License Valid From: _____ to **June 30, 2024**

Date Paid: _____ Amount Paid: _____ Receipt #: _____

GL Account # 100-44121

Received & attached copy of:

☐ Valid Photo ID Date of Criminal Record Check: _____

☐ Responsible Beverage Server Card/Certificate License No.: _____ Initials: _____

☐ Previous Bellevue Operator License (if applicable; # _____) Date Village Board Approved: _____

☐ Other Municipality Operator License (if applicable) Date Mailed: _____ Date Picked-Up: _____