



APPLICATION FOR AN "OPERATOR'S" LICENSE

The local governing body of (City-Town-Village) _____

County of _____, Wisconsin.

I, the undersigned, do hereby respectfully make application to the local government body of the (City-Town-Village) of _____, County of _____, Wisconsin, for an "Operator's" License as provided by Section 125.17 of the Wisconsin Statutes, for the year ending June 30, 20____.

I certify that I am _____ years of age, I am familiar with the laws, ordinances, and regulations and I hereby agree, if granted said license, to obey all provisions of said laws.

Signature

Print Full Name

Address

City

State

Date of Birth