

ANNUAL FEE <u>\$13.00 + BACKGROUND FEE \$7.00=\$20.00</u> (January 1 – December 31)

new renewal			
		r's License Requir	
Drivers License Number		PRINT CLEARLY Date of Birth	Phone Number
Male Female	First Name Middle Name	Last Name	
Street Address City Sta	e Zip		
Name of Business (Where are you using this license?)		Street Address of Business	
	convicted of any offense class or local law? Yes N		isdemeanor, or ordinance violation under any xplain):
2. Have you ever changed	your name? Yes N	o (if Yes, list all ot	her names you have had):
<ol> <li>Are there CRIMINAL (if Yes, please explain)</li> </ol>		inance violations Pl	ENDING against you? Yes No
			rmation on your application. If any pepartment will reject your license application.
	wers on this application are t ag of this license, to comply w		the best of my knowledge. I agree, in State of Wisconsin, and to the provisions of
Signature	re Date		
Office Use Only:			
	Deceive #	D-11 A /	ion and Datas A on D
Council Action and Date: A	A or D I	Police Act	ion and Date: A or D Date Issued:

**CITY OF** 

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