TOWN OF FRIENDSHIP
W6931 Cty Tk N
Van Dyne, WI
(920) 922-8425

Fax: 920-238-9567

EMPLOYER FORM FOR NEW APPLICANTS

DATE:_____

TO THE TOWN OF FRIENDSHIP:

_____ will be employed at the location listed below and will
(Name of employee)

be selling alcoholic beverages, if granted an operator's license by the Town Board.

Name of Business _____

Signed by _____
(Title)

Phone Number _____

Operator's license application attached _____

Fee: $30.00 for two year license
Fee: $38.00 for a New two year license