

## Department of Police



RONALD J. TISCHER, CHIEF

February 6, 2017

Kevin T. O'Brien 430 9<sup>th</sup> St N La Crosse, WI 54601

Dear Mr. O'Brien:

Your application for Beverage Operator's License is being recommended	for denial for the following
reason(s):	

$\bigcirc$	Probation/Parole status.
()	Current charges pending.
()	Outstanding warrants.
(_)	Past conviction record.
()	Incomplete Application: omitted past violations
(X)	Other: 3 or more Alcohol Related Violations in last 5 years

If you have questions or want to discuss this recommendation please contact the Police Records Supervisor Steve Butterfield at 789-7230.

You may also appeal this denial by requesting a hearing before the Judiciary and Administration Committee of the Common Council no later than 5:00 P.M., fifteen (15) days before the second Thursday of the month. This can be done by contacting the City Clerk at 789-7510.

Sincerely,

Steve Butterfield

Records/Licensing Division

789-7230

cc. Chief of Police, City Attorney, City Clerk

## Application for Beverage Operator's License - La Crosse, WI

Renewal:

New: X

The undersigned respectfully applies for a Beverage Operator's License for:

To The Common Council of the City of La Crosse:

Receipt Number:

143529

14-Day X 2 Year Period from: Year ending June 30, 2018 O'BRIEN Last Name KEVIN T First Name and MI **THOMAS** Full Middle Name 21 Age Date of Birth JANESVILLE, WI Place of Birth (608) 436-8597 Phone Current Address 430 9TH ST N LA CROSSE WI 54601 City, State, Zip Add'l Mail Name 430 9TH ST N Mailing Address LA CROSSE WI 54601 Mailing City, State, Zip Previous Address 1437 STATE ST LA CROSSE WI 54601 Previous City, State, Zip ANIMAL HOUSE Place of Employment Identification I certify the above information is true, correct and complete, and that falsification may result in denial of such license. Further, I understand that refunds are not allowed for any portion of the application fee paid even if denied for past and/or pending offenses and/or for any outstanding debts owed to the City. Signature of Applicant: Date of Application: 1/5/2017 FOR OFFICE USE ONLY 2-Year License Number: Initial of CCO Emp: SLC Granted: Training: CERTIFICATION 12/28/16 I, the undersigned Chief of Police of the City of La Crosse, do hereby certify that I have examined the within applicant as to his/her qualifications as a beverage operator in the City of La Crosse and hereby anneave such application. Date: 1-23-17 Signature of Chief: