



# City of La Crosse, Wisconsin

## APPLICATION FOR BEVERAGE OPERATOR LICENSE

Check One:  New  Renewal

Fee: \$ \_\_\_\_\_

Invoice: \_\_\_\_\_

2-YEAR

60-DAY PROVISIONAL

14-DAY TEMPORARY

Approved by the Common Council.

Must also apply for the 2-year; issued once the background investigation is complete and approved.

Issued to operators employed by, or donating services to, non-profit corporations. Max two per year.

Note: When applying within a license year, the period may be shorter than 2 years.

Year ending June, 20 \_\_\_\_\_

Period ending: \_\_\_\_\_

Period: From \_\_\_\_\_ To \_\_\_\_\_

NAME	First <b>Caprice</b>	Full Middle <b>Belicia</b>	Last <b>Delagrave</b>
AGE	<b>29</b>		
DATE OF BIRTH	[REDACTED]		
PHONE NUMBER	<b>608-385-1032</b>		
EMAIL	<b>delagravec@gmail.com</b>		
ADDRESS	Street <b>1515 State street</b>	City <b>LaCrosse</b>	State Zip <b>WI 54601</b>
MAILING ADDRESS <small>If different.</small>	<b>511 3rd st N. La Crosse Wisconsin, 54601</b>		
PLACE OF EMPLOYMENT <small>Where you will be using the license; must be in the City of La Crosse.</small>	<b>511 3rd st N. La Crosse Wisconsin, 54601</b>		
IDENTIFICATION <small>Driver License/State ID Number</small>	Number [REDACTED]	State <b>WI</b>	
<b>Violations – please read carefully!</b> List ALL violations (Federal, State and City) INCLUDING speeding or other traffic violations, alcohol, drug, etc. Include any pending violations and/or charges that were dismissed. Failure to list all violations may result in the rejection of this application. **IF THIS IS A RENEWAL, list only violations since date of your last application.			
HAVE YOU EVER BEEN ARRESTED? YES <input type="checkbox"/> NO <input type="checkbox"/>		IF YES, FOR A FELONY? YES <input type="checkbox"/> NO <input type="checkbox"/>	
DESCRIPTION OF OFFENSE	DATE OF OFFENSE	CITY & STATE OF OFFENSE	
<b>Disorderly conduct &amp; poss. of <sup>illegal</sup> prescription</b>	<b>10-31-12</b>	<b>Lancaster, WI</b>	
<b>Possess THC &amp; Retail theft &lt; \$500</b>	<b>2-1-13</b>	<b>Sparta, WI</b>	
<b>Battery-misdemeanor</b>	<b>7-15-13</b>	<b>Lancaster, WI</b>	
<b>OWI</b>	<b>3-9-16</b>	<b>LaCrosse, WI</b>	

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 violations and/or for any outstanding debts owed to the City.

Signature: *Caprice Delagrave* Date: 6/1/22

**Approval of Municipal Authority** - Investigations done by the La Crosse Police Department.

Upon investigation of statements made on this application and municipal and state criminal records, license is hereby:  APPROVED  DENIED

Office Use Only      Training: \_\_\_\_\_      Granted: \_\_\_\_\_      2-Year License Number: \_\_\_\_\_

