



City of La Crosse, Wisconsin

APPLICATION FOR BEVERAGE OPERATOR LICENSE

Check One: New Renewal

Fee: \$ 25

Invoice: _____

2-YEAR

60-DAY PROVISIONAL

14-DAY TEMPORARY

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

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.

Year ending June, 20 _____

Period ending: _____

Period: From _____ To _____

NAME	First <u>Chrissa</u>	Full Middle <u>Elise</u>	Last <u>Roberts</u>
AGE	<u>29</u>		
DATE OF BIRTH	[REDACTED]		
PHONE NUMBER	<u>(608) 477-3501</u>		
EMAIL	<u>robertschrissa@gmail.com</u>		
ADDRESS	Street <u>1018 9th St. S.</u>	City <u>LaCrosse</u>	State <u>W.</u> Zip <u>54601</u>
MAILING ADDRESS If different.	<u>W6861 Hidden Valley Rd. Holmen, W.</u>		
PLACE OF EMPLOYMENT Where you will be using the license; must be in the City of La Crosse.	<u>Mr. Stix</u>		
IDENTIFICATION Driver License/State ID Number	Number [REDACTED]	State <u>W.</u>	

Violations – please read carefully! 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 NO IF YES, FOR A FELONY? YES NO

DESCRIPTION OF OFFENSE	DATE OF OFFENSE	CITY & STATE OF OFFENSE
<u>Posses. of Meth</u>	<u>April 27, 2021</u>	<u>Vilas County</u>
<u>have a d. v. exp. on which exp. in 12 months</u>		
<u>Owi 1st</u>	<u>2019</u>	<u>LaCrosse</u>
<u>Trespassing</u>	<u>2017</u>	<u>LaCrosse</u>

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: Chrissa Roberts Date: 05/31/22

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: _____

DESCRIPTION OF OFFENSE	DATE OF OFFENSE	CITY & STATE OF OFFENSE
Criminal trespassing	2015	
Criminal Damage	2012	
Battery	2011	