



**Town of Delafield  
Fermented Malt Beverages & Intoxicating Liquors License Application**

**Please be advised that the Waukesha County Sheriff will review and verify the information on your application. If any information is not complete or correct, it is likely that the Town Board will disapprove your license application.**

\_\_\_\_\_, being first duly sworn on oath, says that he/she is the person who made and signed the foregoing application for an operator's license; that all statements made by the applicant are true and correct.

\_\_\_\_\_  
Signature of Applicant

Subscribed and sworn to before me this

\_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

\_\_\_\_\_  
Notary Public, Waukesha County, WI

My commission expires \_\_\_\_\_

**FOR OFFICE USE ONLY**

**RECEIPT #** \_\_\_\_\_

**APPROVED BY TOWN BOARD** \_\_\_\_\_

**LICENSE#** \_\_\_\_\_