

Lisa Kalata

From: Paul Matte
Sent: Tuesday, October 18, 2016 1:12 PM
To: Lisa Kalata
Subject: FW: Attached Image
Attachments: 3604_001.pdf

Kady Wolfe is recommended



Paul J. Matte
Detective
210 Progress Drive Suite #1
Cottage Grove, WI 53527
Office: (608) 839-4652
Dispatch: (608) 255-2345
Fax: (608) 839-4588
Email: pmatte@cottagegrovepolice.org
Web: www.cottagegrovepolice.org

From: Lisa Kalata
Sent: Thursday, October 13, 2016 4:04 PM
To: Paul Matte <pmatte@cottagegrovepolice.org>
Subject: FW: Attached Image

Paul,
Attached is an operator's license application for a background check.
Thank you have a great day☺

Lisa Kalata

Village Clerk
Village of Cottage Grove
221 East Cottage Grove Rd
Cottage Grove, WI 53527
608.839.4704
Fax 608.839.4698
www.vi.cottagegrove.wi.gov

From: copier@village.cottage-grove.wi.us [mailto:copier@village.cottage-grove.wi.us]
Sent: Thursday, October 13, 2016 4:08 PM
To: Lisa Kalata <lkalata@village.cottage-grove.wi.us>
Subject: Attached Image



VILLAGE OF COTTAGE GROVE OPERATORS LICENSE APPLICATION

New

Renewal

Please complete all required information. This application must be answered completely and accurately before processing. A \$25.00 license/application fee is required and must accompany this application. If you have not previously held an operators license in the Village of Cottage Grove a copy of the Responsible Beverage Servers Certificate must be attached. All applicants are required to provide a copy of their Wisconsin Drivers License or I.D. Card. The annual licensing period is from July 1 through June 30.

Full Name: Kathy Marie Wolfe
First Middle Last

Complete Address: 205 N Thompson Dr Apt. 7 Madison, WI 53714
Street Address City/State/Zip Code

Phone Number (h) 608-238-708 (w) ---

Drivers License Number [REDACTED]

Previous Names: --- Date of Birth [REDACTED]

Applicants must specify name, address and phone number of the establishment where they will be employed. Also the name of supervisor if we have any questions.

Name address & phone number of Establishment: 608-839-0322
Village Liquor
214 Cottage Grove Rd
Name of Supervisor: Stacey Gestol

List all previous addresses within the past 3 years:

639 Galena Court Sun Prairie, WI 53590
until 4/2016

Date and Location of Responsible Beverage Server Course
online 10/10/16

You must complete all boxes: Any question answered **YES** must be explained on the back of this page in detail, with any appropriate documentation attached. You may attach additional pages if necessary.

- In the past 5 years, have you been arrested, convicted of or charged with any of the following:

A. Illegal purchase, sale or providing alcoholic beverages.	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
B. Violation of closing hours at a licensed premises.	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
C. Operating a motor vehicle while under the influence of drugs and/or alcohol.	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
D. A violation of an alcohol beverage law, regulation or rule not specified above.	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
E. Disorderly conduct, criminal damage to property or obstructing an officer.	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
- Have you EVER been arrested, convicted of or charged with a Felony? Yes No
- Have you held any type of alcohol beverage license in the last 3 years? If so, list type and location on the back of this page. Yes No
- Do you presently have any overdue or outstanding forfeitures resulting from a violation of any county, state or local ordinance? Yes No
- Have you ever had any alcohol beverage license revoked, suspended or not renewed? Yes No

For Village Clerk's Use Only

Date Received 10/13/16

Fees Received 25.00

Receipt # 1.001223

Provisional # 1617-11P

Background Completed

Approved or Denied

Date Issued

License #

Legal Review if Denied

Certification-Please Read Carefully!

I hereby certify that the information provided on this application is true and correct. I understand that failure to provide all required information shall be grounds for denial of this alcohol beverage license. I further understand that falsification of any information provided may be grounds for denial or revocation of this license. I fully understand all state and local laws and ordinances governing the sale of alcoholic beverages that apply to this application, and agree to abide by those laws.

I hereby authorize the Village of Cottage Grove to perform a criminal background and drivers license check.

Signature Kathy Wolfe

Date 10/13/16