
After reviewing Alison D Houge's WORCS, DOT, RMS, and WI Circuit Court Access records, I have not located any recent issues which would prevent Houge from obtaining her Operators License and I recommend Houge for approval of her Village of Cottage Grove Operators License Application.



STATE OF WISCONSIN DEPARTMENT OF JUSTICE

- Request Date: **6/23/2019**
- Report Date: **6/23/2019**

This criminal background check was performed by searching the following data submitted to the Crime Information Bureau

- Name: **HOUGE, ALISON D**
 - Date of Birth: **3/17/1972**
 - Alias Names:
-

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VILLAGE OF COTTAGE GROVE OPERATORS LICENSE APPLICATION

New A
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: Alison Dale Houge
First Middle Last

Complete Address: _____
Street Address City/State/Zip Code

Phone Number (h) 608 _____

Drivers License Number _____

Previous Names: _____ Date of Birth _____

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) VILLAGE LIQVORS 839-0222
214 W COTTAGE GROVE RD.
Name of Supervisor: SAM KISSBENDER

List all previous addresses within the past 3 years: _____

Date and Location of Responsible Beverage Server Course
6-10-19 ONLINE

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 ___ No
 - B. Violation of closing hours at a licensed premises. Yes ___ No
 - C. Operating a motor vehicle while under the influence of drugs and/or alcohol. Yes ___ No
 - D. A violation of an alcohol beverage law, regulation or rule not specified above. Yes ___ No
 - E. Disorderly conduct, criminal damage to property or obstructing an officer. Yes ___ No
- 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 6/21/19

Fees Received 25.00

Receipt # 7.00376

Provisional # 1920-19A

Background Completed 6/23/19

Approved or Denied Approved

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 Alison Houge Date 6/12/19