

## Sarah Haltaufderheide

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**From:** David Stortz  
**Sent:** Saturday, April 25, 2020 3:31 AM  
**To:** Lisa Kalata  
**Cc:** Sarah Haltaufderheide; Daniel Layber  
**Subject:** FW: Operators license  
**Attachments:** 4550\_001.pdf

After reviewing Anthony ML Thomas' WORCS, DOT, RMS, and WI Circuit Court Access records, I have not located any alcohol or other related violations which would prevent Thomas from obtaining his Operators License and I recommend Thomas for approval of his Village of Cottage Grove Operators License Application.



## STATE OF WISCONSIN DEPARTMENT OF JUSTICE

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- Request Date: **4/25/2020**
- Report Date: **4/25/2020**

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

- Name: **THOMAS, ANTHONY M**
- Date of Birth: **2/27/1998**
- Alias Names:

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# 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: Anthony Thomas  
First Middle Last

Complete Address: \_\_\_\_\_  
Street Address City/State/Zip Code

Phone Number (h) \_\_\_\_\_ (w) \_\_\_\_\_

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: SN6223 839-3154

Name of Supervisor: Jan Miller

Date and Location of Responsible Beverage Server Course: Learn 2 Serve

04-17-2020

### List all previous addresses within the past 3 years:

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 <input checked="" type="checkbox"/>
B. Violation of closing hours at a licensed premises.	Yes _____	No <input checked="" type="checkbox"/>
C. Operating a motor vehicle while under the influence of drugs and/or alcohol.	Yes _____	No <input checked="" type="checkbox"/>
D. A violation of an alcohol beverage law, regulation or rule not specified above.	Yes _____	No <input checked="" type="checkbox"/>
E. Disorderly conduct, criminal damage to property or obstructing an officer.	Yes _____	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 4/24/20

Fees Received 25.00

Receipt # 7.604099

Provisional # 1926-2P

Background Completed 4/25/20

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 Anthony Thomas

Date 04/23/2020