9/25/2024 LICENSE APPLICATION for OPERATOR2YR



License # 240281 FEES ARE NON-REFUNDABLE

SECTION 11.010 CITY OF MANITOWOC

SECTION 1 – APPLICANT INFORMATION					
Applicant Name (Las ELLIOTT, SHANEKA M			Previous Name(s)		
Street Address 2350 S 23RD ST LOT 1082			City MANITOWOC	State WI	Zip 54220
Driver's License/ID Number Expiration Date E430-7938-2761-08				Renewal License True	
Date of Birth	Sex	Telephone Number			
7/11/1982	FEMALE	(920) 374-6420			
Submit Wisconsin Beverage Server Course Certificate with this application. True					
Where will you be using this license? Not employed yet					
SECTION 2— PENALTY NOTICE					
Under penalty of law, I swear that the information provided in this application is true and correct to the best of my knowledge and belief. Failure to answer any of the above questions truthfully will be considered grounds for denial of this license application. The applicant certifies that he/she is familiar with the laws and regulations pertaining to the sale of alcoholic beverages. Signer agrees to observe the provisions of the Manitowoc Municipal code and Wisconsin Statutes. Signature of Applicant:					

Date License was Issued (for City Clerk Use Only)_____