

**Village of Palmyra**  
**APPLICATION FOR OPERATOR'S LICENSE**

Request: ☒ Renewal (\$25.00) ☐ New (\$25.00) ☐ Provisional (\$15.00) ☐ Temporary (\$7.00)  
NOTE: The above fee includes an Investigative Fee.

APPLICANT'S FULL NAME (Please Print) (Last Name, First Name, Middle, Maiden)

Loeffler, Christine Angela

PLACE OF BIRTH

Waukesha Wisconsin

ZIP

512-06

CITY

Fort Atkinson

STATE

WI

53538

DAYTIME PHONE

262-470-5935

E-MAIL

Christine.loeffler@gmail.com

NAME OF ESTABLISHMENT

Squidys 2

ESTABLISHMENT PHONE

262-495-2588

I certify that:

- I have held an operator's, premises or manager's license within the past two years (if in another municipality other than the Village of Palmyra, proof is required), have completed the "Responsible Beverage Server's Training Course" (certificate is required) or enrolled in the "Responsible Beverage Server's Training Course" (copy of enrollment receipt is required).
- I am familiar with all laws, resolutions, ordinances and regulation, Federal, State and Local, pertaining to the sale of such beverages and liquors, and if granted said license, do agree with and obey all provisions thereof.
- I am a citizen of the United States.
- I have been a resident of the State of Wisconsin continuously since 1981.
- I have been a resident of the (Village / City / Town) of Fort Atkinson since 2010.
- I am 44 years of age.
- I understand that by signing below that the Village of Palmyra will be conducting a background check.

Have you ever been charged, arrested and/or convicted of violating any Federal, State or Local laws, including traffic? If yes, please specify offenses, giving dates and locations:

☒ NO

☐ YES-explain:

Do you have any pending charges (Federal, State, Local) for which you are awaiting trial or a final disposition? If you answer yes, specify offenses, giving dates and locations:

☒ NO

☐ YES-explain:

**I further certify that the statements in the foregoing application subscribed by me are true and correct to the best of my knowledge. Answering falsely to any of the above questions may result in denial of your license.**

I do hereby make application for an operator's license from the date hereof to June 30, 2024, inclusive, (unless sooner revoked) to dispense alcoholic beverages on premises requiring a retail Class "A", "Class A", Class "B", or "Class B" license, all subject to provisions of and limitations imposed by Chapter 125 of the Wisconsin Statutes and Chapter 12 of the Village of Palmyra Municipal Code, and all acts amendatory thereof and supplementary thereto.

Subscribed and sworn to me this 18 day

of June, 2025

Notary Public or Village Clerk

L. Mueller

County

Jefferson

Commission Expires

Perm

Applicant's Signature

[Signature]

Record Check: Pass Fail

Receipt #

License # (New/Renewal)

License # (Provisional)

License # (Temporary)