## Schedule for Appointment of Agent by Corporation / Nonprofit Organization or Limited Liability Company

Submit to municipal clerk.

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent. The following questions must be answered by the agent. The appointment must be signed by an officer of the corporation/organization or one member/manager of a limited liability company and the recommendation made by the proper local official.

To the neuroming body of	Town		0.	such of	
To the governing body of:	Village of		Cc	bunty of	
The undersigned duly author	prized officer/memt	per/manager of		poration / Organization or Limited Liability Company)	
a corporation/organization c	r limited liability cor	npany making a	application for an alcohol beve	erage license for a premises known as	
			(Trade Name)		
located at					
appoints		(Name	e of Appointed Agent)		
		(Home Add	dress of Appointed Agent)		
		·			
to alcohol beverages condu	cted therein. Is app	plicant agent pre	esently acting in that capacity	I of the premises and of all business relative or requesting approval for any corporation/ any other location in Wisconsin?	
Yes No If se	o, indicate the corpo	orate name(s)/li	imited liability company(ies) a	nd municipality(ies).	
Is applicant agent subject to	completion of the r	esponsible bev	verage server training course?	? Yes No	
How long immediately prior	to making this appli	ication has the a	applicant agent resided contir	nuously in Wisconsin?	
Place of residence last yea	r				
For	:				
Bv	(Name of Corporation / Organization / Limited Liability Company) By:				
			(Signature of Officer / Member /	( Manager)	
Any person who knowingly \$1,000.	provides materially	false informatio	on in an application for a licens	se may be required to forfeit not more than	
		ACCEP	TANCE BY AGENT		
l,	(Print / Type Agen	nt's Name)	, her	eby accept this appointment as agent for the	
	nited liability compa	any and assum	ne full responsibility for the ganization/limited liability com	conduct of all business relative to alcohol npany.	
				Agent's age	
(Si	gnature of Agent)		(Date)	Date of birth	
	(Home Ad	dress of Agent)			
			NT BY MUNICIPAL AUTHOR		
			nal records. To the best of mine no objection to the agent	y knowledge, with the available information, appointed.	
Approved on	by		Proper Local Official)	Title	
(Date)		(Signature of F	Proper Local Official)	(Town Chair, Village President, Police Chief)	