



CITY OF LAKE GENEVA

TEMPORARY OPERATOR LICENSE

*PLEASE FILL IN ALL BLANKS COMPLETELY, AS INCOMPLETE APPLICATIONS
WILL BE REJECTED. FEE OF \$10.00 IS PAYABLE TO CITY OF LAKE GENEVA AND
DUE UPON APPLICATION.*

NOTE: This license shall be issued to persons under the terms of Wisconsin State Statutes 125.17 (4). License shall be issued only to operators employed by or donating their services to non-profit corporations. A maximum of one temporary operator license will be issued to any individual per year. This license shall be valid only for the period of time specified on the license, which time period shall not exceed fourteen (14) days.

APPLICANT INFORMATION

Name: _____
Last First Middle

Maiden Name: _____ Date of Birth: _____

Address (Physical): _____

Mailing Address (if different): _____

City, State, Zip: _____

Phone: _____

Drivers License #: _____

ORGANIZATION WHERE SERVICES OF LICENSEE WILL BE EMPLOYED

Organization Name: _____

Address: _____

Name of Event where licensee will work: _____

Date of Event: _____

APPLICANT SIGNATURE

DATE: _____

For Office Use Only

Date Filed: _____

Receipt No: _____

Total Amount: _____

Verification that no other temporary licenses have been issued
to this applicant in current year: _____

License Issued: _____

License Number: _____

License Expires: _____