

\$75 LICENSE ACCT #: 11101-44110
\$15 RECORD CHECK ACCT #: 11101-46100

0806-19



BILL #: 2310
DATE: 6/04/2019
RECEIPT #: 2017 2969-6

5074/1110

OPERATOR'S LICENSE APPLICATION

THIS LICENSE WILL BE MAILED TO THE ADDRESS LISTED BELOW.

NEW ☒ RENEWAL ☐

NAME Pearce Zachary E MAIDEN NAME _____
LAST FIRST M.I.

ADDRESS 228 Kilbide Dr CITY Racine STATE WI ZIP 53402

DATE OF BIRTH _____ HOME TELEPHONE NO. 262-221-2539

BUSINESS NAME WHERE LICENSE IS TO BE USED Racine Country Club

ARE YOU AT LEAST 18 YEARS OLD? ☒ YES ☐ NO

I hereby apply for an operator's license to draw, serve and/or sell alcohol beverages as defined by law, until the end of the licensing period, subject to the conditions and limitations imposed by chapter 125 of the Wisconsin statutes and by chapter 6 of the Racine municipal code.


HAVE YOU EVER BEEN CONVICTED OF ANY OFFENSES? You do not need to include minor traffic offenses.
YES _____ NO ☒

(IF YES, GIVE LAW OR ORDINANCE VIOLATED, TRIAL COURT, TRIAL DATE AND PENALTY IMPOSED, AND/OR DATE, DESCRIPTION AND STATUS OF CHARGES PENDING.)

DO YOU HAVE ANY CHARGES PENDING AGAINST YOU? You do not need to include minor traffic offenses.
YES _____ NO ☒

(IF YES, DESCRIBE STATUS OF CHARGES PENDING.)

NOTE: WISCONSIN LAW PROHIBITS THE GRANTING OF AN OPERATOR'S LICENSE TO A PERSON WITH AN ARREST OR CONVICTION RECORD, SUBJECT TO WIS. STAT. SECS. 111.321, 111.322, 111.335 AND 125.12(1)(b).



SIGNATURE OF APPLICANT

Serving Alcohol Incorporated

is proud to present this certificate to

Zach Pecoraro

for successful completion of the online course

Wisconsin Alcohol Seller-Server



PERSONS COMPLETING THIS COURSE HAVE AGREED TO EXECUTE THE FOLLOWING POLICIES TO THE BEST OF THEIR ABILITIES.

- * CARD ANY PERSON 35 YEARS OF AGE OR YOUNGER
- * OBSERVE AND REPORT ANY CUSTOMER SHOWING SIGNS OF POSSIBLE IMPAIRED BEHAVIOR TO MANAGEMENT
- * RESPOND IMMEDIATELY TO ANY POSSIBLE PROBLEM SITUATION
- * DETERMINE THE PEOPLE ENTERING THE PREMISES TO CONSUME ALCOHOL ARE OF LEGAL ALCOHOL DRINKING AGE AND RECORD THEM IF THERE IS ANY QUESTION ABOUT THEIR AGE
- * ENSURE A PERSON MATCHES THEIR VALID LEGAL IDENTIFICATION

This is a Wisconsin Department of Revenue approved Responsible Beverage Server Training Course in compliance with Sec. 125.17 (6) and 125.04 (5) (a) 5. Wis. Stats.

Verify online at
servingalcohol.com

Verification Code
dry9rrLpbJ

Date Issued
Mar 28th, 2019

VALID FOR 2 YEARS

Learn more about this wallet card at <http://servingalcohol.com/wallet-card>

Wisconsin Bartender License

Name: Zach Pecoraro

Certification Date: Mar 28th, 2019

Certificate Code: dry9rrLpbJ

Verify Online: servingalcohol.com

125.17(6) & 125.04(5)(a)5. Wis. Stats.

SERVING ALCOHOL INC

VALID FOR 2 YEARS

Zachary Pecoraro

Cover Sheet for Alcohol Beverage Application Background Checks

Type of license:

<input type="checkbox"/> Class "A"	<input type="checkbox"/> "Class A"
<input type="checkbox"/> Class "B"	<input type="checkbox"/> "Class B"
<input type="checkbox"/> Operator's license	<input type="checkbox"/> "Class C"

Background check: ☐ Sgt L Webb ☐ 6/7/19
(Name of person at RPD) Date results received

Results:

☐ No Record

☐ Record exists, but the person still qualifies under policy guidelines

☐ Charges pending which, if convicted would disqualify the applicant under guideline number(s):

☒ Record exist and the person is disqualified under policy guidelines number(s):

☐ 1- Felony conviction which substantially relates

☐ 2- One or more offenses within the past 5 years involving crimes of violence, lack of cooperation with law enforcement or distribution of drugs; or 2 or more of the same offenses within past 10 years, which substantially relates

☐ 3- Two or more offenses within the past 5 years involving disorderly behavior, criminal damage to property, prostitution, alcohol beverage offenses, possession of a controlled substance, possession of paraphernalia, operating while under the influence of drugs or intoxicants, operating with a prohibited alcohol concentration, open intoxicants, perjury or other crimes of dishonesty, etc., which substantially relate

☐ 4- A habitual law offense (2 or more offenses within the past year, 3 or more offenses within the past 5 years, 5 or more offenses within the past 10 years

☒ 5- False statement on license application

#did not disclose 2015 conviction

Dear Applicant:

Your records check came back with the following convictions:

<u>Year</u>	<u>Offense</u>
2015	Poss of THC- Non criminal

Based on these convictions, you are disqualified under Policy Guideline # ____ (see cover sheet and policy guidelines for details) from obtaining an alcohol beverage/operator's license. The public safety and licensing committee will be notified of this records check, along with the fact that you do not qualify for a license.

This matter will now go before committee on **July 23, 2019 at 5:30p.m. Room 307** for a hearing. At that time, you must present **competent evidence of rehabilitation** in order to overcome the disqualification. These must include all of the following (if applicable to you).

- Certified copy of honorable discharge or separation under honorable conditions
- A copy of local, state or federal release document (from the Department of Corrections or your parole or probation agent) showing discharge from incarceration or probation/parole
- A copy of the department of correction's document showing completion of probation, extended supervision or parole
- Other evidence showing that one year has elapsed since release of institution without subsequent conviction of a crime along with evidence showing compliance with all terms of probation, extended supervision or parole.

In addition to presenting the above documentation, you should also address the following factors or bring documentation of the following before the committee:

- Evidence of the nature and seriousness of any offenses convicted
- Evidence of all circumstances relative to the offense, including mitigating circumstances or social conditions surrounding the commission of the offense
- The age of the individual at the time of the offense
- The length of time elapsed since offense committed
- Letters of reference by persons who have been in contact with the individual since the applicant's release
- Other relevant evidence of rehabilitation and present fitness presented

If you would like to submit any of these documents for the committee to consider, please do so at least 24 hours before the committee meeting at the clerk's office. Please contact us with any other questions. Thank you.