



Village of Downers Grove

LIQUOR BUSINESS ACTIVITY DECLARATION

Name of Liquor License Applicant / Holder: _____

Doing Business As: _____

Address: _____

Phone: _____

License Class: _____

Main or Principal Business to be conducted by the Applicant on the premises
stated above: _____

Wherein the following of the business is devoted to the sale / service of:

Food _____ (%)

Alcohol _____ (%)

Non-alcoholic Beverages: _____ (%)

Other – List: _____

Monday: _____ Open _____ Close

Tuesday: _____ Open _____ Close

Wednesday: _____ Open _____ Close

Thursday: _____ Open _____ Close

Friday: _____ Open _____ Close

Saturday: _____ Open _____ Close

Sunday: _____ Open _____ Close

The undersigned, being duly sworn, does state as follows:

That the undersigned is empowered to prepare and sign this application on behalf of the applicant.

That the undersigned has reviewed this declaration and that the information contained herein is true and accurate.

Applicant Signature _____

Printed Name _____

Title _____

Date _____