



Village of Downers Grove

LIQUOR LICENSE APPLICATION

Date: _____

Application is hereby made to the Local Liquor Commissioner of the Village of Downers Grove for issuance of a Class _____ liquor license, pursuant to the ordinances of the Village and laws of the State of Illinois.

1. GENERAL INFORMATION

1.1. Applicant

Name: _____

Address: _____

Phone: _____

1.2. Status

___ Individual(s) or Sole Proprietorship

___ Corporation

___ Limited Liability Company

___ Partnership

___ Other (explain) _____

1.3. Liquor Manager

Name: _____

Address: _____

Phone: _____

Driver's License Number: _____

Social Security Number (Last Four): _____

Date of Birth: _____

Place of Birth: _____

2. **PREMISES**

2.1. Doing Business As: _____

Address: _____

Phone: _____

2.2. Does Applicant beneficially own the premises for which a license is

sought? ___ No ___ Yes

a. If yes, Applicant must attached proof of ownership. (i.e. deed)

b. If Applicant is not the beneficial owner of the premises, does
Applicant have a lease thereon for the full period for which the
license is to be issued? ___ No ___ Yes

If yes,

i. A copy of lease must be attached; and,

ii. Identify the owner or rental agent for the property:

Name: _____

Address: _____

Phone: _____

2.3. Are the premises located within one hundred feet of any church, school, hospital, home for aged or indigent persons or for veterans, their spouses or children, or any military or naval stations?

☐ No ☐ Yes

2.4. State the anticipated date of occupancy. _____

3. CORPORATION/LIMITED LIABILITY COMPANY

This section must be completed by authorized agent of any corporate or limited liability company Applicant. If Applicant is a partnership, skip section 3 and go to section 4. If Applicant is neither a corporation, limited liability company, nor a partnership, skip sections 3 and 4 and go to section 5.

3.1. Applicant was incorporated or organized under the laws of the State of _____ on the _____ day of _____, A.D., _____.

3.2. If Applicant was not incorporated or organized under the laws of the State of Illinois, is Applicant a foreign corporation or limited liability company authorized to transact business in the State of Illinois?

☐ No ☐ Yes

3.3. Registered Agent:

Name: _____

Address: _____

Phone: _____

3.4. Corporate and limited liability company Applicants must complete and attach Officers and Directors, and Ownership Interests forms.

4. PARTNERSHIP

This section must be completed by authorized agent of any partnership Applicant. If Applicant is not a partnership, skip to Section 5.

4.1. Applicant was formed under the laws of the State of _____
on the _____ day of _____, A.D., _____.

4.2. Is Applicant a limited partnership pursuant to the Illinois Revised
Uniform Limited Partnership? ___ No ___ Yes

4.3. If Applicant was not formed under the laws of the State of Illinois, is
Applicant a foreign partnership qualified under the Illinois Uniform
Partnership Act or the Illinois Uniform Limited Partnership Act, as now
or hereafter amended, to transact business in the State of Illinois?
___ No ___ Yes

4.4. Registered Agent: ___ Not Applicable

Name: _____

Address: _____

Phone: _____

4.5. General Partner: ___ Not Applicable

Note: if there is more than one general partner, include that general partner who is to be primarily responsible for operation of the licensed premises.

Name: _____

Address: _____

Phone: _____

4.6. Managing Partner: _____ Not Applicable

Note: if there is more than one managing partner, include that managing partner who is to be primarily responsible for operation of the licensed premises.

Name: _____

Address: _____

Phone: _____

4.7. Partnership Applicants must complete and attach Partnership forms.

5. SOLE PROPRIETORSHIP

Name: _____

NOTE: Pursuant to 235 ILCS 5/6-2 (1) Sole proprietor must be resident of the Village in which the premises covered by the license is located.

Pursuant to 235 ILCS 5/6-2 (3) Sole proprietor must be a citizen of the United States.

Skip to Section 6.

6. QUALIFICATIONS

6.1. Has any liquor license issued to the applicant, the liquor manager, or any person or entity listed on Officers and Directors, Ownership Interests, or Partnership forms ever been fined, revoked or suspended?

___ No

___ Yes, please identify the following:

a. Jurisdiction revoking or suspending license: _____

b. Date of revocation or suspension: _____

c. Reason given by revoking jurisdiction for revocation or suspension:

d. Additional explanatory information, if desired: _____

6.2. Has Applicant, the liquor manager, or any person or entity listed on the Officers and Directors, Ownership Interests, or Partnership forms ever been convicted of violating any Federal or State law concerning the manufacture, possession or sale of alcoholic liquor, or forfeited their bond for failure to appear in court to answer charges for any such violation?

___ No

___ Yes, please identify the following:

- a. Jurisdiction revoking or suspending license: _____
- b. Date of revocation or suspension: _____
- c. Reason given by revoking jurisdiction for revocation or suspension:

- d. Additional explanatory information, if desired: _____

6.3. Has Applicant, the liquor manager, or any person or entity listed on the Officers and Directors, Ownership Interests, or Partnership forms, ever been convicted of a felony under Federal or State law?

___ No

___ Yes, please identify the following:

- a. Jurisdiction revoking or suspending license: _____
- b. Date of revocation or suspension: _____
- c. Reason given by revoking jurisdiction for revocation or suspension:

- d. Additional explanatory information, if desired: _____

6.4. Is Applicant the beneficial owner of the business to be operated?

___ Yes ___ No

6.5. Has Applicant, the liquor manager, or any person or entity listed on the Officers and Directors, Ownership Interests, or Partnership forms,

ever been convicted of a gambling offense in violation of Sections 28-1(a)(3) through (a)(10), or Section 28-3, of the Illinois Criminal Code (ILL. REV. STAT., ch. 38), as heretofore or hereafter amended.

___ No

___ Yes, please identify the following:

a. Jurisdiction revoking or suspending license: _____

b. Date of revocation or suspension: _____

c. Reason given by revoking jurisdiction for revocation or suspension:

d. Additional explanatory information, if desired: _____

6.6. Has Applicant, the liquor manager, or any person or entity listed on the Officers and Directors, Ownership Interests, or Partnership forms, been issued a federal wagering stamp by the federal government for the current tax period?

___ No

___ Yes, please provide details.

6.7. Has a federal wagering stamp has been issued by the federal government for the current tax period for the premises for which a license is sought?

☐ No

☐ Yes, please provide details.

6.8. Is applicant a citizen of the United States?

☐ Yes ☐ No ☐ Not Applicable – Corporation / LLC /

Partnership

6.9. Is applicant a resident of Downers Grove?

☐ Yes ☐ No ☐ Not Applicable – Corporation / LLC /

Partnership

7. SUBMITTALS

7.1. In addition to this application form the following are submitted as applicable:

☐ Liquor Manager

☐ Officers and Directors

☐ Ownership Interests

- ☐ Partnership
- ☐ Declaration
- ☐ Outdoor Sales Application
- ☐ Certifications
- ☐ Articles of Incorporation or Organization (if applicable)
- ☐ Proof of Ownership of Premises (i.e. title report)
- ☐ Lease-If premises not beneficially owned by Applicant (for the full period for which the license is to be issued)
- ☐ Floor Plan, as required for any premises to be licensed for sale of alcoholic liquor for consumption on the premises, drawn to scale, and with sufficient detail to depict types of seating, location of bars and other design features.
- ☐ Employee liquor handling training manual
- ☐ Application fee
- ☐ Certificate of Insurance
- ☐ Menu (If applicable)
- ☐ Reduced Menu - after regular menu hours (If applicable)

7.2. Applicant understands and agrees that additional information and material may be required during the processing of this application related to applicant's qualifications, the information provided herein, including attachments, fingerprinting, and the class of license involved. Applicant agrees to provide such additional information and material and that failure to do so may delay the processing of this application or result in its denial.

7.3. In the event Applicant is made aware that any information or document submitted as part of this application process is inaccurate or incomplete, Applicant agrees to immediately notify the Village and provide appropriate corrections. Applicant understands and agrees to provide such additional information and material, and that failure to do so may delay the processing of this application or result in its denial.

THE UNDERSIGNED, BEING DULY SWORN, DOES STATE AS FOLLOWS:

A. THAT THE UNDERSIGNED IS EMPOWERED TO PREPARE AND SIGN THIS APPLICATION ON BEHALF OF THE APPLICANT.

B. THAT THE UNDERSIGNED HAS REVIEWED THIS APPLICATION, AND ALL ATTACHMENTS AND SUBMITTALS, AND THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND ACCURATE.

Name of Corporation/Limited Liability Company/Partnership/Sole

Proprietorship:

Applicant Signature:

Printed Name:

Title:

Date:
