

# Village of Maywood

40 Madison Street  
Maywood, IL 60153  
708-450-6360

**Mayor Edwenna Perkins**

**Viola Mims, Village Clerk**



**Class C**

**Liquor License Application**

**(Temporary Liquor License – Sales or Transfers of Liquor)**

**(Non-Municipal Property)**

## LIQUOR LICENSE REQUIREMENTS

- Submit completed application to the Clerk's Office
- Provide Certificate of Bassett Training
- Provide Dram Shop Insurance Certificate
- Provide Bond
- Provide a map of area where alcohol will be served
- Submit to fingerprinting and background check

**YOUR COMPLETED APPLICATION FOR A TEMPORARY LIQUOR LICENSE MUST BE SUBMITTED TO THE VILLAGE OF MAYWOOD LIQUOR CONTROL COMMISSIONER AT LEAST 45 DAYS PRIOR TO THE EVENT.**

**License Type: Class C**

**Application Fee: \$75.00**

**License Fee: \$75.00 (per event)**

The undersigned hereby makes application for the issuance of a temporary/special event permit for the possession, sale, and dispensing, of alcoholic beverages: \_\_\_\_\_

(Date of Application)

## APPLICATION INFORMATION

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/STATE/ZIP CODE: \_\_\_\_\_

TELEPHONE NO: (\_\_\_\_) \_\_\_\_\_ (H) (\_\_\_\_) \_\_\_\_\_ (C)

E-MAIL: \_\_\_\_\_

## PRIOR LIQUOR LICENSE INFORMATION

A. Have you ever applied for and been denied a liquor license? Yes \_\_\_ No \_\_\_ If yes, please explain.

B. Has your License been previously suspended or revoked? Yes \_\_\_ No \_\_\_ If yes, please explain. \_\_\_\_\_

## SPECIAL EVENT REQUIRED DETAILS

- A. Provide the date(s) and time(s) the event will be held.
- B. Provide the name and address of the event.
- C. Provide the name/type of the event.
- D. Indicate the total number of calendar days for the event. (7 day Maximum)

