

**THIS APPLICATION MUST BE COMPLETED WITH EITHER TYPEWRITTEN OR HANDWRITTEN LEGIBLE TEXT. APPLICATIONS THAT ARE NOT LEGIBLE WILL BE NOT ACCEPTED.**

**PROVIDING INACCURATE INFORMATION SHALL BE CAUSE FOR LICENSE DENIAL AND/OR REVOCATION.**

**THE VILLAGE OF MAYWOOD  
LOCAL LIQUOR CONTROL COMMISSION  
RETAIL LIQUOR LICENSE APPLICATION**

**NEW / RENEWAL: \_\_\_\_\_  
(\$750.00 Non-Refundable Application Fee for  
issuance of new Liquor License; one-time only fee)**

**DATE: \_\_\_\_\_**

Edwenna Perkins, Honorable Presiding Village President  
and Local Liquor Control Commissioner  
Village of Maywood, Illinois

Reference in this Application to an owner shall mean any person who is an owner of more than five percent (5%) of the corporation, a partner in a partnership or a member of a limited liability company, which is applying for the license. All questions must be answered completely. QUESTIONS ARE TO BE ANSWERED ACCURATELY. IF QUESTIONS ARE NOT ANSWERED ACCURATELY, THE LICENSE WILL BE SUBJECT TO REVOCATION. IT WILL NOT BE A DEFENSE THAT ANSWERS WERE GIVEN TO THE BEST OF THE ANSWERER'S KNOWLEDGE. IT IS YOUR RESPONSIBILITY TO ASCERTAIN THE ACCURACY OF YOUR RESPONSE. **IF MORE SPACE IS NEEDED TO FULLY RESPOND, ATTACH A SEPARATE PAGE(S).**

The undersigned (an owner), \_\_\_\_\_ (name), \_\_\_\_\_ (title) of \_\_\_\_\_ d/b/a \_\_\_\_\_ (business name and assumed name) makes application for a Class \_\_\_\_\_ liquor license, at the address of \_\_\_\_\_ for the period ending December 31, 2\_\_\_\_, and tenders the sum of \$\_\_\_\_\_, the prescribed fee as set forth in the following:

**SCHEDULE OF ANNUAL FEES FOR THE VARIOUS CLASSES OF RETAIL LIQUOR LICENSES (SECTIONS 117.23 and 117.26 OF THE MAYWOOD VILLAGE CODE (MVC)):**

	<u>Application Fee</u>	<u>Annual Fee</u> (Regular**Extended Hours)
CLASS A: Full Service Restaurant	\$750.00	\$ 2,100.00 / \$2,400.00**
CLASS B: Package Store	\$750.00	\$ 5,000.00* / \$10,000.00*
CLASS C: Temporary License - Special Events (Non-Village Property; Two-Day Maximum)	\$ 75.00	\$ 75.00
CLASS D: Club	\$750.00	\$ 1,250.00
CLASS E: Temporary License (Per Day) Municipal Property Only	\$ 75.00	\$ 125.00
CLASS F: Banquet Hall License	\$750.00	\$ 1,000.00 / \$1,300.00
CLASS G: Restaurant Beer and Wine Only	\$750.00	\$ 1,600.00 / \$1,900.00**
CLASS H: Limited Service Restaurant; Beer and Wine Only	\$750.00	\$ 1,250.00 / \$1,550.00**
CLASS I: Package Store – Beer and Wine Only	\$750.00	\$ 2,500.00
CLASS J: Outdoor Café License	\$750.00	\$ 300.00
CLASS K: Caterer License	\$750.00	\$ 750.00 / \$1,000.00**
CLASS L: Limited Restaurant – Recreational Facility	\$750.00	\$ 1,550.00 / \$1,850.00**

**\*See Section 117.23(B)(2,3) for eligibility and annual fees for a Class B (Package Store) liquor license.**

AN OWNER MUST COMPLETE THIS APPLICATION, IF A MANAGER IS TO BE EMPLOYED BY THE OWNER, THE MANAGER WILL ALSO HAVE TO COMPLETE AND SUBMIT AN APPLICATION, WHICH WILL BE MARKED AS A "SUPPLEMENTAL APPLICATION." NO FEE WILL BE CHARGED TO PROCESS THE SUPPLEMENTAL APPLICATION. EACH LICENSE TERMINATES ON THE 31<sup>ST</sup> DAY OF DECEMBER.

THIS INFORMATION MUST BE PROVIDED FOR EACH INDIVIDUAL, WHO WILL AT ANY PARTICULAR TIME, BE THE PERSON ON THE PREMISES, AND HAVE SUPERVISORY OR MANAGEMENT RESPONSIBILITY OVER OTHER EMPLOYEES. IF NEEDED, PLEASE PROVIDE REQUIRED INFORMATION ON A SEPARATE SHEET OF PAPER. ALL MANAGEMENT PERSONNEL MUST BE FINGERPRINTED BY THE MAYWOOD POLICE DEPARTMENT, AND MUST MAKE AN APPOINTMENT FOR FINGERPRINTING 72 HOURS IN ADVANCE. NO FINGERPRINTING WILL BE DONE WITHOUT AN APPOINTMENT.

SPECIAL EVENT LICENSE APPLICANTS MUST COMPLETE THE ATTACHED "SPECIAL EVENT RIDER."

**INFORMATION ON APPLICANT AND PERSON COMPLETING THIS APPLICATION.**

Pursuant to Title XI, Chapter 117, Section 117.21 of the Maywood Village Code, please provide the following information.

- A. Name: \_\_\_\_\_  
Male: \_\_\_\_\_ Female: \_\_\_\_\_
- B. Mailing Address: \_\_\_\_\_
- C. Address of Residence: \_\_\_\_\_
- D. Home Phone No.: \_\_\_\_\_ Cell: \_\_\_\_\_
- E. Work Phone No.: \_\_\_\_\_ Pager: \_\_\_\_\_
- F. Are You A Citizen of the U.S.? Yes ( ) No ( )
- G. If naturalized citizen, time and place of naturalization: \_\_\_\_\_
- H. Place of Birth: \_\_\_\_\_
- I. Driver's License Number: \_\_\_\_\_
- J. Height: \_\_\_\_\_
- K. Weight: \_\_\_\_\_
- L. Color of eyes: \_\_\_\_\_
- M. Color of hair: \_\_\_\_\_
- N. Social Security number: \_\_\_\_\_
- O. Vehicles owned with registration numbers: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- P. Businesses owned or operated within the last 5 years that required a liquor license, stating: (a) Name of business; (b) State and municipal liquor license numbers; (c) Address; and (d) Phone number.

Business Name \_\_\_\_\_

Address \_\_\_\_\_ Phone Number \_\_\_\_\_

Dates owned: From \_\_\_\_\_ To \_\_\_\_\_

Describe any liquor license incident requiring police intervention: \_\_\_\_\_

State liquor license # \_\_\_\_\_ Date of license \_\_\_\_\_

Municipal liquor license # \_\_\_\_\_ Date of license \_\_\_\_\_

Name, address and telephone number of municipality issuing liquor license: \_\_\_\_\_

- Q. Has any of the Applicant's liquor licenses ever been suspended or revoked?

Yes ( ) No ( ) Please Explain: \_\_\_\_\_

- R. State your relationship to the business for which the license is sought. \_\_\_\_\_

- S. If this is a new license application, what kind of business was previously conducted in the space where you intend to operate your business? \_\_\_\_\_

- T. Name and date of corporation to which license is to be issued. \_\_\_\_\_

- U. Name, address, and phone number, under which the licensed business will be operated.

Business Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Address \_\_\_\_\_ City/State/Zip Code \_\_\_\_\_

- V. Does the Applicant own the building or the space in which the business is located?  
Yes ( ) No ( ) [Attach proof of ownership (e.g., a deed) to this Application].

- W. Does the applicant lease the building or the space in which the business is located?  
Yes ( ) No ( ) [Attach a certified copy of Lease to this Application]

- X. Is the nearest part of any church building used for worship services or educational programs within 100 feet of the nearest part of the proposed licensed premises?  
Yes ( ) No ( )

- Y. Is any school (other than an institution of higher learning), hospital, home for the aged, indigent persons or for veterans, their spouses and/or children within 100 feet of the proposed licensed premises? Yes ( ) No ( )
- Z. Do you have or intend to have a manager or a management contract with another entity or person, who is not a bona fide employee, to manage the licensed business for you? Yes ( ) No ( )
- AA. If the answer to Question Number 8 is "Yes," state the name, age, address and telephone number of the manager, or for a management company state the same information, as applicable, for the company and for any assigned representative of the company who will serve as the on-site manager.

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*(The manager or management company must complete and submit an Application, which will be marked as a "Supplemental Application.".)*

- BB. Has the Applicant made application for similar or other liquor license on premises other than described in this application? Yes ( ) No ( )  
(If yes, provide disposition of such application on the Addendum)
- CC. Date of incorporation or organization of your company: \_\_\_\_\_  
(As applicable, attach a copy of the Articles of Incorporation, Articles of Organization, Shareholders Agreement, Operating Agreement and Partnership Agreement).
- DD. If the Applicant is a corporation or a limited liability company, has it ever been dissolved, either voluntarily or involuntarily? Yes ( ) No ( ) If yes, list the date of reinstatement:  
\_\_\_\_\_
- EE. If the Applicant is incorporated or organized in a state other than the State of Illinois, you must attach the document pursuant to which the company is qualified under Illinois law to transact business in Illinois.
1. List the names, addresses, dates of birth, telephone numbers and social security numbers of all Officers and Directors.

Name	Address	Office Held
Date of Birth	Social Security No.	Phone No.
Name	Address	Office Held
Date of Birth	Social Security No.	Phone No.
Name	Address	Office Held
Date of Birth	Social Security No.	Phone No.

2. List the names, addresses, dates of birth and social security numbers of all partners (if a partnership), members (if a limited liability company), or shareholders who own in the aggregate more than 5% of the stock of the corporation.
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Name	Address	% of Stock
Date of Birth	Social Security No.	Phone No.

Name	Address	% of Stock
Date of Birth	Social Security No.	Phone No.

3. Is the Applicant a subsidiary of a parent corporation? \_\_\_\_\_. If so, state the name, address and telephone number of the parent corporation. *(The Local Liquor Control Commission has the right to require that the parent company complete and submit this Application).*

4. Is the Applicant obligated to pay a percentage of profits to any person or entity not listed In Question Numbers 1 and 2? Yes ( ) No ( ) If yes, explain and identify the name, address and telephone number of such persons or entities: \_\_\_\_\_

5. Has the Applicant or any person listed in Questions Numbers 1 or 2 or any of your managers ever held another liquor license in the United States? Yes ( ) No ( ) If yes, state the dates, city and state of each license:

License Holder: \_\_\_\_\_ Date: \_\_\_\_\_

City and State: \_\_\_\_\_

License Holder: \_\_\_\_\_ Date: \_\_\_\_\_

City and State: \_\_\_\_\_

6. Has the Applicant or any person listed in Question Numbers 1 or 2 or any of your managers ever been denied a liquor license from any jurisdiction? Yes ( ) No ( ) If yes, state the particulars: \_\_\_\_\_

7. Has the Applicant or any person listed in questions 1 or 2, or any of your managers/personnel ever had a previous liquor license (whether wholesale or retail) revoked by the Federal Government or by any state, county or local government? Yes ( ) No ( ) If yes, explain: \_\_\_\_\_

8. Other than when making an initial application for a license, has the Applicant or any predecessor to or subsidiary or corporate parent entity of the Applicant ever been subject to charges, hearing or investigation by any jurisdiction with respect to a liquor license? \_\_\_\_\_ If yes, please state: a) the previous licensor; b) the licensee(s) by names and addresses; c) the address of the licensed premises; and d) the names of the licensed establishment and the date or dates of such revocation or suspension: \_\_\_\_\_

9. If the answer to Question Numbers 6 or 7 is "Yes," describe every charge on a separate sheet: a) the date of the charge; b) the final disposition of the charge; and c) name, address and telephone number of the municipality or other jurisdiction bringing the charge.

If no charges were involved, state the reason for the investigation or hearing: \_\_\_\_\_

10. Has the Applicant, persons listed in Question Numbers 1 and 2, or any Staff members, your managers, ever been found guilty of a felony, a misdemeanor, including but not limited to any gambling offense, the sale or use of illegal drugs or any alcohol related traffic offense? \_\_\_\_\_. If so, explain the charge, the date, the city and state where the charge was brought, and the disposition. This must include all findings of guilty, whether subsequently vacated or not and shall specifically include any orders of court supervision, whether satisfactorily completed or not.

Name of Person: \_\_\_\_\_ Charge: \_\_\_\_\_

Date: \_\_\_\_\_ City and State: \_\_\_\_\_

Disposition: \_\_\_\_\_

Name of Person: \_\_\_\_\_ Charge: \_\_\_\_\_

Date: \_\_\_\_\_ City and State: \_\_\_\_\_

Disposition: \_\_\_\_\_

11. Please attach a verified financial statement showing the assets and liabilities of the Applicant dated no later than thirty (30) days prior to date of the Application. Additionally, a verified financial statement must be submitted for all persons who will share in the profits or losses of a limited liability company or a partnership, which seeks a liquor license, as well as for shareholders owning more than five percent (5%) of a corporation which applies for a license.

12. The Applicant's Retailer Occupational Tax Registration (ROT) Number: \_\_\_\_\_ and  
the Applicant's Federal Employer Identification Number (FEIN): \_\_\_\_\_

13. Is the Applicant delinquent in the payment of the Retailer's Occupational Tax (sales tax)? \_\_\_\_\_. If the answer is "Yes," explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

14. Is any person listed in Question Numbers 1 and 2 or any of your managers an elected public official? Yes ( ) No ( ) If yes, state the office and unit of government: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

15. Is any other person directly or indirectly connected with the operation, ownership or management of the Applicant's place of business or the premises to be licensed an elected public official? Yes ( ) No ( ). If yes, state the particulars: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

16. Does any person listed in Question Numbers 1 or 2 or any of your managers hold any law enforcement office? Yes ( ) No ( ). If yes, name the title and agency:

Person: \_\_\_\_\_ Title: \_\_\_\_\_

Agency: \_\_\_\_\_

***(When answering Question Numbers 17 through 26, the term "person" shall include any partnership in which the person was a partner, any limited liability company in which the person was a member, or any corporation in which the person was or is more than a 5% shareholder).***

17. In the past two years, has any person listed in Question Numbers 1 or 2 or have any of your managers made any political contributions to any member of the Maywood Board of Trustees or to any member of the Illinois State Liquor Commission? \_\_\_\_\_  
\_\_\_\_\_

18. If the answer to question number 17 is "Yes," identify each contribution and the amount:  
\_\_\_\_\_

19. Does any person listed in Question Numbers 1 and 2 or any of your managers possess a current Federal Wagering or Gambling Device Stamp? \_\_\_\_\_. If so, state the reasons: \_\_\_\_\_  
\_\_\_\_\_

20. State the value of goods, wares and merchandise to be used in the business that are purchased and on hand at this time: \_\_\_\_\_

21. If this is a renewal application, has the ownership or management changed in any manner since the prior application? \_\_\_\_\_. If yes, please explain the nature of the change(s): \_\_\_\_\_

22. Does the business that is proposed to be licensed currently carry Dram Shop Insurance coverage for the premises or have a binder for Dram Shop Insurance coverage to be issued upon approval of the liquor license? \_\_\_\_\_. If so, attach a copy of the insurance certificate or binder. The Applicant should provide the Village Manager with at least a binder during the application review process in order to expedite the consideration of the application. A certificate of insurance meeting the requirements of the Maywood Village Code must be provided to the Village Manager following following license approval in order for a liquor license to be issued.

23. If the premises are leased, does the owner of the premises carry Dram Shop or Liability Insurance coverage? \_\_\_\_\_. If so, attach a copy of the insurance certificate.

***(If the answer to either Question Number 24, 25 or 26 is "No," no license shall be issued pursuant to Title XI, Chapter 117, Section 117.22 of the Maywood Village Code.)***

24. Pursuant to Title XI, Chapter 117, Section 117.22 of the Maywood Village Code, no license shall be issued if any of the below statements cannot be answered in the affirmative by the Applicant. By signing this Application, the Applicant affirmatively states that the Applicant is:

- A. A person who is a resident of the Village (**unless Subsections J, K or L apply**).
- B. A person of good character and reputation in the community in which he or she resides.

- C. A person who is a citizen of the United States.
- D. A person who has not been convicted of a felony under any federal or state law, unless the Local Liquor Control Commissioner determines, after investigation, that such person has been sufficiently rehabilitated to warrant the public trust after considering matters set forth in such person's application and the Commission's investigation. The burden of proof of sufficient rehabilitation shall be on the applicant.
- E. A person who has not been convicted of being the keeper of or is not keeping a house of ill fame.
- F. A person who has not been convicted of pandering, sexual molestation or other crime or misdemeanor opposed to decency and morality.
- G. A person whose license to sell alcoholic liquor has not been revoked for cause.
- H. A person who at the time of application for renewal of license issued hereunder would be eligible for such license upon a first application.
- I. A copartnership, where all members of such copartnership are qualified to obtain a license.
- J. A corporation where:
  - (i) No officer, manager, or director, stockholder or stockholders thereof owning in the aggregate more than five percent (5%) of the stock of such corporation, is ineligible to receive a license hereunder for any reason other than citizenship and residency.
  - (ii) It is incorporated in Illinois and is in good standing under the laws of Illinois, or if an out of state or foreign corporation which is qualified under the Illinois Business Corporation Act to transact business in Illinois, it is in good standing under the state of incorporation.
- K. A person whose place of business is conducted and physically controlled and operated by a manager or agent and such manager or agent possesses the same qualifications required of an individual licensee hereunder.
- L. A person who has not been convicted of a violation of any federal or state law concerning the sale or use of illegal drugs, or the manufacture, possession or sale of alcoholic liquor, or has not forfeited his bond to appear in court to answer charges of any such violation, unless the Local Liquor Control Commissioner determines, after investigation, that such person has been sufficiently rehabilitated to warrant the public trust after considering matters set forth in such person's application and the Commission's investigation. The burden of proof of sufficient rehabilitation shall be on the applicant.
- M. A person who either owns the premises (or the beneficial interest in a land trust owning the premises) for which a license is sought, or has a lease thereon for the full period for which the license is to be issued.
- N. A person who is a beneficial owner of the business to be operated by the licensee.



- O. A person who is not any full-time employee or officer of the Village, including members of the local liquor control commission, the Village President, members of the Board of Trustees, any members of either the Plan Commission, the Zoning Board of Appeals and the Board of Fire and Police Commissioners, and no such employee, member or official shall be interested in any way, either directly or indirectly, in the manufacture, sale, or distribution of alcoholic liquors.
  - P. A person or entity to whom a federal wagering stamp has not been issued by the federal government for the current tax period
  - Q. A person who has not been convicted of a gambling offense as proscribed by any of subsections (a) (3) through (a) (11) of Section 28-1 of, or as proscribed by Section 28-1.1 or 28-3 of, the Criminal Code of 1961, or as proscribed by a statute replaced by any of the aforesaid statutory provisions.
  - R. A person who is twenty-one (21) years of age or older.
  - S. A person who has obtained a state liquor license
25. Pursuant to Title XI, Chapter 117, Section 117.22 of the Maywood Village Code, by signing this Application, the Applicant affirmatively states that:
- A. The Applicant has not been convicted of a felony or any other offenses prohibited under Title XI of the Maywood Village Code.
  - B. The Applicant will not violate any of the laws of the Village, the State or of the United States in the conduct or operation of the place of business to be licensed.
26. The Applicant shall complete and submit with this Application an Authorization for Release of Information Relative to Application for Retail Liquor License on a form approved by the Village and the attached Rider regarding the Village Code's prohibition on loitering.

IF A NEW MANAGER HAS BEEN OR IS ADDED TO THE BUSINESS, THAT PERSON MUST CONTACT THE MAYWOOD POLICE DEPARTMENT, (708) 450-4470, TO SCHEDULE AN APPOINTMENT TO BE FINGERPRINTED, AND MUST SUBMIT A SUPPLEMENTAL APPLICATION. THE APPOINTMENT SHOULD BE MADE MONDAY THROUGH FRIDAY FROM 9:00 A.M. TO 5:00 P.M.

**A LIQUOR LICENSE IS NOT TRANSFERABLE.** IF YOU ANTICIPATE A SALE OF THE BUSINESS, OR A CHANGE IN OWNERSHIP OR MANAGEMENT, IT IS YOUR SOLE RESPONSIBILITY TO ASSURE THAT THE REQUIRED NOTIFICATION AND/OR REAPPLICATION PROCESS IS STARTED AT LEAST 120 DAYS PRIOR TO THE CHANGE. ALL INVESTIGATIONS BY THE LOCAL AUTHORITIES MUST BE COMPLETED BEFORE THE LOCAL LIQUOR CONTROL COMMISSIONER AND LOCAL LIQUOR CONTROL COMMISSION WILL CONSIDER THE APPLICATION.

Corporate Seal  
(If applicant is corporation)

STATE OF ILLINOIS )  
 ) SS.  
COUNTY OF C O O K )

The undersigned, \_\_\_\_\_, first being duly sworn, under oath deposes and says that \_he\_ is/are the Applicant(s) for the license requested in the foregoing Application; that \_he\_ is/are of good repute, character and standing and that answers to the questions asked in the foregoing Application are true and correct in every detail. I further state that I have read and understand the Code provisions of the Maywood Village Code that govern the sale and delivery of alcoholic beverages. I further agree not to violate any of the laws of the State of Illinois, the United States of America or any of the ordinances of the Village of Maywood in the conduct of my place of business.

I ALSO UNDERSTAND THAT AN UNTRUE, INCORRECT OR MISLEADING ANSWER GIVEN IN THIS APPLICATION IS SUFFICIENT CAUSE FOR THE REFUSAL TO GRANT OR THE REVOCATION OF ANY LICENSE GRANTED PURSUANT TO THIS APPLICATION.

I further give my permission to the Village of Maywood or any agency of the Village of Maywood to check with any agency or individual named or referred to in this Application to verify or clarify any answer that I have given.

\_\_\_\_\_  
APPLICANT

Subscribed and Sworn to before me  
this \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
NOTARY PUBLIC

**APPLICATION APPROVED:**

\_\_\_\_\_  
Local Liquor Control Commissioner

Date: \_\_\_\_\_

Revised 12/16/13

**RIDER TO MAYWOOD LIQUOR LICENSE APPLICATION**

Chapter 117 (Alcoholic Beverages), Subsection 117.59 (Liquor in public places: vehicles; No loitering) of the Maywood Village Code states as follows:

“(c) It shall be a violation of the Village’s Liquor Ordinance for any holder of a liquor license to allow any person or persons to loiter on the licensed premises. The term loiter means: stand, sit or lie in or upon any private parking lot, private sidewalk, private walkway area, or private property utilized for public use, so as to hinder or obstruct unreasonably the free passage of pedestrians thereon or so as to prevent the free access into or out of the entrance(s) of any licensed premises, which is open to the public. A holder of a liquor license who violates this subsection shall be subject to citation and to all penalties provided in Section 117.99, including but not limited to monetary fines and suspension or revocation of his or her liquor license. Upon presentation to the Local Liquor Control Commissioner of evidence that a holder of a liquor license has been found guilty or entered a plea of guilty in a court of law for violation of this subsection, the Commissioner shall immediately suspend the liquor license held by that person for a period of seven (7) days, during which a public hearing shall be held. At the public hearing, a holder of a liquor license who has been found guilty in a court of law or who enters a plea of guilty relative to such a violation shall be subject to all penalties provided in Section 117.99, including but not limited to monetary fines and suspension or revocation of his or her liquor license.”

**I, THE UNDERSIGNED LIQUOR LICENSE APPLICANT, HAVE READ CHAPTER 117 (LIQUOR) OF THE MAYWOOD VILLAGE CODE, INCLUDING SUBSECTION 117.59 ABOVE, AND UNDERSTAND THE LIQUOR LICENSE REGULATIONS THAT ARE SET FORTH IN CHAPTER 117 AND MY OBLIGATION TO COMPLY WITH THE LIQUOR LICENSE REGULATIONS SET FORTH IN CHAPTER 117. IN THE EVENT THAT I AM ISSUED A LIQUOR LICENSE, I UNDERSTAND AND AGREE THAT ANY VIOLATION OF THE LIQUOR LICENSE REGULATIONS SET FORTH IN CHAPTER 117 SHALL RESULT IN ME BEING SUBJECT TO ALL PENALTIES PROVIDED IN SECTION 117.99, INCLUDING BUT NOT LIMITED TO MONETARY FINES AND SUSPENSION OR REVOCATION OF THE LIQUOR LICENSE.**

**LIQUOR LICENSE APPLICANT**

By: \_\_\_\_\_  
Applicant

By: \_\_\_\_\_  
Notary Public

Date: \_\_\_\_\_

Date: \_\_\_\_\_

**SPECIAL EVENT RIDER**

THE APPLICANT SHALL COMPLETE THIS SPECIAL EVENT RIDER AS PART OF THE APPLICATION FOR A SPECIAL EVENT LICENSE.

**1. Pre-Application Review.**

- Did you request a Pre-Application Review? (Yes / No).
- Did you submit a pre-application letter (as well as other documents) to the Local Liquor Control Commissioner? (Yes / No). If yes, attach a copy of the submittal to this Rider.
- Did you meet with the Local Liquor Control Commissioner as part of the Pre-Application Review? (Yes / No).
- Did you receive any correspondence from the Local Liquor Control Commissioner or any Village personnel regarding the Pre-Application Review? (Yes / No). If yes, attach a copy of the correspondence to this Rider.

2. **Location.** Attach a diagram or site plan for the special event location, including the locations of any alcoholic beverage tents, individual retail sales/tasting booths or an alcoholic beverage sales/consumption areas, the size, internal set up, fence requirements and designated security entrance and exit points for patrons and minors.

3. **Security for Outdoor Alcoholic Beverage Tent and Alcoholic Beverage Sales/Consumption Area.** Describe the security measures to be employed in regard to the operation of the alcoholic beverage tent and/or alcoholic beverage sales/consumption area with respect to minors and adults who enter these areas: \_\_\_\_\_

4. **Music.** Are you planning to have amplified music or live music or other forms of music entertainment at an outdoor special event? (Yes / No). If yes, describe the sound system, the type of music (live, amplified, other) and location of the musicians and sound equipment: \_\_\_\_\_

5. **Signage.** Are you planning to post any advertising signs that relate to the sale of beer, wine or other alcoholic liquor within the alcoholic beverage tent or alcoholic beverage sales/consumption area? If so, please attach copies of the proposed signs.

6. **Number of Events.** Identify the number of special events you plan to conduct in the current calendar year, specify the dates of each event and state the name of each event: \_\_\_\_\_

7. **State and Village Licenses.** Attach proof of application for or receipt of all other required Village and State licenses, including a State special event liquor license or similar approval.

8. **Insurance.** Attach an insurance certificate or binder for the required insurance coverage as required by Section 117.57 of the Liquor Control Ordinance.

9. **License and Indemnification Agreement.** Attach a signed and dated License and Indemnification Agreement (Village-approved form).

10. **Additional Municipal Services.** Identify any municipal services, such as police, fire, emergency medical services and public works personnel and services that are requested for the special event: \_\_\_\_\_

By: \_\_\_\_\_ (Applicant) Date: \_\_\_\_\_.