



VILLAGE OF LAKE IN THE HILLS
RENEWAL LIQUOR LICENSE APPLICATION

Date: _____

Name of the Liquor License Applicant:
(as it is to appear on the license): _____

Lake in the Hills Business Address: _____

Business Phone Number: _____ Main Contact/Licensing Email: _____

Select the Class of Liquor License being applied for:

- Class A Class A-1 Class A-2 Class B Class B-1 Class C Class D
Class E Class E-1 Class F Class G Class MBP Class BWT Class BWT-1
Class H Class A-3

The full and complete responses to the requested statements and information contained within this application must be immediately updated if any of the statements or information change during the term of any license.

This renewal application for a liquor license is being submitted on behalf of (Mark One):

- Individual / Sole Proprietorship (Complete Section 1)
Partnership (Complete Section 2)
Club, Corporation (Complete Section 3)
Limited Liability Corporation (Complete Section 4)

- 1. Yes No Is the Applicant a resident of Lake in the Hills (Individual or Partnership Applicants only)?
2. Yes No Is the Applicant of good character and reputation in the Village?
3. Yes No Is the Applicant a US citizen or naturalized citizen? (Individual or Partnership Applicants only)? If a naturalized citizen, please provide the following:
Place of Birth _____
Time and Place of Naturalization _____
4. Yes No The Applicant(s) has never been convicted of a felony under any Federal or State law? (If yes, skip to question #6)
5. Yes No If the Applicant(s) answered no to question #4, has evidence of sufficient rehabilitation been provided with the application?
6. Yes No The Applicant(s) has never been convicted of being the keeper or is not keeping a house of ill fame?
7. Yes No The Applicant(s) has never been convicted of pandering or other crime or misdemeanor opposed to decency and morality?
8. Yes No The Applicant(s) has never been convicted of a violation of any Federal or State law concerning the manufacture, possession or sale of alcoholic liquor, subsequent to the passage of the Illinois Liquor Control Act of 1934 or has not forfeited his bond to appear in court to answer charges for any such violation?
9. Yes No The Applicant(s) has never been convicted of a gambling offense as prescribed by any of subsections (a)(3) through (a)(10) of Section 5/28-1 of, or as proscribed by Section 5/28-1 of the "Criminal Code of 1961" approved July 28, 1961, as amended (720 ILCS 5/28-2 and 5/28-3), or as proscribed by a statute replaced by any of the aforesaid statutory provisions?
10. Yes No The premises have not been issued a federal wagering stamp by the federal government for the current tax period?
11. Yes No The Applicant(s) has not been issued a federal wagering stamp by the federal government for the current tax period?
12. Yes No Do the Applicant(s) agree that all premises used for the retail sale of alcoholic liquor, or for the storage of such liquor for sale, shall be kept in full compliance with the laws and ordinances regulating the condition of premises used for the storage of sale of food for human consumption?

13. Yes No If this place of business is conducted by a manager or agent, does that manager or agent possess the same qualifications required by the licensee, with the exception of beneficially owning the premises or having a lease thereon?
14. Yes No Was the Applicant(s) eligible for such license upon a first application?
15. Yes No The Applicant(s) has never had a previous license revoked by any State or Subdivision thereof, or by the Federal Government? If a revocation has occurred, please explain:
- _____
- _____
16. State whether the Applicant(s) has made an application for a similar or other license on premises other than described in this application? If yes, explain the disposition of such license application:
- _____
- _____

SECTION 1: INDIVIDUAL (SOLE PROPRIETORSHIP)

The Applicant is an individual entitled to the profits of this business and his/her name, address and other pertinent information is required as follows: (use additional paper if necessary)

A. Sole Proprietorship (Individual)

Name: _____

Address: _____

Phone: _____

Birth Date: _____

Social Security Number: _____

Title: _____

Signature: _____

B. Manager (Sole Proprietorship – Individual)

Name: _____

Address: _____

Phone: _____

Birth Date: _____

Social Security Number: _____

SECTION 2: PARTNERSHIP

- Yes No The general partnership, or any limited partnership thereof, owning more than five percent of the aggregate limited partner interest in such co-partnership *is* eligible to receive a license based on the requirements contained herein?
- Yes No The partnership has never been issued a federal wagering stamp by the federal government for the current tax period, or none of the partners have ever been issued a federal gambling devise stamp or federal wagering stamp by the federal government for the current tax period?

A. Members (Partnership)

Name: _____

Address: _____

Phone: _____

Birth Date: _____

Social Security Number: _____

Signature: _____

Name: _____

Address: _____

Phone: _____

Birth Date: _____

Social Security Number: _____

Signature: _____

Name: _____
Address: _____
Phone: _____
Birth Date: _____
Social Security Number: _____
Signature: _____

B. Manager

Name: _____
Address: _____
Phone: _____
Birth Date: _____
Social Security Number: _____

SECTION 3: CLUB OR CORPORATION

The Applicant is a Corporation, and the person signing the application is a duly authorized agent of the said Applicant Corporation, and the following representations are made in connection with this application:

- Yes No All officers, managers or directors thereof, or any stockholder(s) owning in the aggregate more than five percent of the stock of such corporation *are* eligible to receive a license based on the requirements contained herein, **with the exception of citizenship and residence in the Village?**
- Yes No No officer, manager or director thereof, or any stockholder(s) owning in the aggregate more than 20 percent of the stock of such corporation has been issued a federal wagering stamp for the current tax period.
- Yes No Has the corporation been incorporated in Illinois, or is it a foreign corporation which is qualified under the "Business Corporation Act of 1983 (805 ILCS 5/1.01 et seq.) to transact business in Illinois?

A. President

Name: _____
Address: _____
Phone: _____
Birth Date: _____
Social Security Number: _____
Signature: _____

B. Secretary

Name: _____
Address: _____
Phone: _____
Birth Date: _____
Social Security Number: _____
Signature: _____

C. Officers or Directors (Use additional paper if necessary)

Name: _____
Address: _____
Phone: _____
Birth Date: _____
Social Security Number: _____

Name: _____
Address: _____
Phone: _____
Birth Date: _____
Social Security Number: _____

Name: _____
Address: _____
Phone: _____
Birth Date: _____
Social Security Number: _____

D. Stockholders (owning 5% or more of the stock of the Applicant or agent who will conduct the business)

Name: _____
Address: _____
Phone: _____
Birth Date: _____
Social Security Number: _____
Number of Shares: _____

Name: _____
Address: _____
Phone: _____
Birth Date: _____
Social Security Number: _____
Number of Shares: _____

Name: _____
Address: _____
Phone: _____
Birth Date: _____
Social Security Number: _____
Number of Shares: _____

E. Manager

Name: _____
Address: _____
Phone: _____
Birth Date: _____
Social Security Number: _____

SECTION 4: LIMITED LIABILITY CORPORATION (LLC)

The Applicant is a Corporation, and the person signing the application is a duly authorized agent of the said Applicant Corporation, and the following representations are made in connection with this application:

Yes No All officers, managers or directors thereof, or any stockholder(s) owning in the aggregate more than five percent of the stock of such corporation *are* eligible to receive a license based on the requirements contained herein, with the exception of citizenship and residence in the Village?

Yes No No officer, manager or director thereof, or any stockholder(s) owning in the aggregate more than 20 percent of the stock of such corporation has been issued a federal wagering stamp for the current tax period.

A. Members or Managing Members

Name: _____
Address: _____
Phone: _____
Birth Date: _____
Social Security Number: _____
Signature: _____

Name: _____
Address: _____
Phone: _____
Birth Date: _____
Social Security Number: _____
Signature: _____

Name: _____
Address: _____
Phone: _____
Birth Date: _____
Social Security Number: _____
Signature: _____

Name: _____
Address: _____
Phone: _____
Birth Date: _____
Social Security Number: _____
Signature: _____

B. Manager

Name: _____
Address: _____
Phone: _____
Birth Date: _____
Social Security Number: _____
Signature: _____

ASSERTIONS

The Applicant(s) will familiarize themselves with all of laws of the United States, State of Illinois, and the ordinances of the Village of Lake in the Hills pertaining to the sale of alcoholic liquor and abide by them.

The Applicant(s) will not violate any of the laws of the State, or of the United States, or any ordinances, rule or resolution of the Village in the conduct of his or her place of business?

The Applicant(s) has never been convicted of a felony and is not disqualified to receive a license by reason of any matter of thing contained in Section 33.03, laws of this State or the ordinances, rules or resolutions of the Village?

The Applicant(s) understands that in the event there is a change of ownership in a licensed business, or change of managers, or partners in a partnership, or shareholders in a corporation who own more than 5 percent of the stock of a corporation, or members in a limited liability company, a background check for the new owner, manager, partner or shareholder or member shall be required. The Liquor Commissioner may issue or renew the license prior to owner/manager of the existing business is to be retained until such time as the background investigation has been received, reviewed, and approved by the Liquor Commissioner. However, if the background check reveals information provided is false, the license will be subject to immediate revocation, the licensee will be subject to a fine and there shall be no refund of any portion of the license fee.

The Applicant is not a law enforcing public official, including members of the Local Liquor Control Commission, the Village President, any member of the Board of Trustees or any president or member of a county board; and no such official shall be interested directly in the manufacture, sale or distribution of alcoholic liquor, except that license may be granted to such official in relation to premises which are not located within the territory subject to the jurisdiction of that official if the issuance of such license is approved by the Local Liquor Control Commission.

The Applicant(s) understand that any and all licenses issued pursuant to Chapter 33 of the Municipal Code shall be subject to any and all changes or amendments which may be hereafter made, and any and all rules adopted by the Liquor Commissioner or Liquor Commission. Any and all licenses shall be subject to any restrictions or conditions deemed desirable to the Liquor Commissioner or Liquor Commission.

Dated this ____ day of _____, 20____, _____
Signature of Applicant

Subscribed and sworn to, before me

This ____ day of _____, 20____

Notary Notary Public (seal)