



CITY of MONMOUTH
 100 East Broadway
 Monmouth, IL. 61462
 Phone: 309-734-2141



APPLICATION FOR LICENSE TO SELL ALCOHOLIC LIQUOR

APPLICATION MUST BE COMPLETE OR IT WILL NOT BE ACCEPTED.

1. Name and address of establishment to be licensed:

Name _____

Address _____

Phone Number _____

2. **Name of licensee as it should appear on license: (MUST BE EXACT)**

3. What classification of license is desired? _____

Explain under what terms the establishment is being purchased/rented:

4. Name and address of applicant (Be sure to list any name that applicant may have been previously known by)

Name _____
(Last, First, Middle Initial)

Address _____

Date of Birth _____

Social Security Number _____

Business Phone Number _____

Home Phone Number _____

5. Name of spouse and any previous marriages

Name _____
(Last, First, Middle Initial)

Address _____

Date of Birth _____

Social Security Number _____

Business Phone Number _____

Home Phone Number _____

List addresses for the past ten years _____

6. Are you a citizen of the United States? Yes _____ No _____

7. List present employment, or the most recent in the past five years.

8. Is the business a sole proprietorship? Yes _____ No _____
If so, list the full name, address and date of birth of the sole proprietor.

Name _____

Address _____

Date of Birth _____

9. Is your business in a partnership? Yes _____ No _____
If so, attach name of the partners, their addresses, dates of birth and Social Security Numbers.

10. Is your business a corporation? Yes _____ No _____
If so, attach a verified list of stockholders who own interest in said corporation, including their addresses and dates of birth. If a corporation, give the name of the corporation and date of incorporation.

Corporation Name _____

Date of incorporation _____

11. If a corporation, is corporation incorporated in the State of Illinois?
Yes _____ No _____

12. If corporation is foreign, is it licensed to do business in the State of Illinois?
Yes _____ No _____

13. Is your business controlled by a manager or agent? Yes _____ No _____
If so, list the full names, addresses, dates of birth, and social security numbers of the manager(s), or agent(s).

Name _____
(Last, First, Middle Initial)

Address _____

Date of Birth _____

Social Security Number _____

14. Do you own the premises for which this license is sought?
Yes _____ No _____

15. Have you held a license to sell liquor before? Yes _____ No _____ If so, when and where.

16. Are any of the following connected or interested in any way either directly or indirectly in the operation of the business for which this application is made: Law Enforcement, Public Official, Mayor, Alderman, or any member of the County Board? Yes_____ No_____ If so, indicate the full name, date of birth, and capacity of such individual(s).

17. Give the name and address of three people to be contacted regarding your character and reputation in the City of Monmouth or the community in which you most recently lived – **these must be professional/business references, not personal or related:**

1. Name _____

Address _____

Phone Number _____

2. Name _____

Address _____

Phone Number _____

3. Name _____

Address _____

Phone Number _____

18. Have you ever been convicted of a felony in any jurisdiction?
Yes_____ No_____ If so, when and where? _____

19. Have you ever been convicted of being a keeper of, or are you now keeping a house of ill fame, or have you ever been convicted of pandering or other crime or misdemeanor opposed to decency and morality? Yes_____ No_____. If so, when and where?

20. Have you ever had a liquor license revoked for any reason? Yes_____ No_____

21. Have you ever been convicted of a violation of any Federal or State law concerning the manufacture, possession, or sale of alcoholic liquor or have you ever forfeited a bond to appear in court for any such violation? Yes_____ No_____. If so, when and where? _____

22. Have you or any other person named herein ever been convicted of a gambling offense as described by the laws of the State of Illinois or a city gambling ordinance, or have you, or any other person named herein, a federal gaming device or federal wagering stamp? Yes_____ No_____ If so, explain. _____

23. Have the premises for which this license is being sought been issued a federal wagering stamp? Yes_____ No_____

24. Do you understand that any violation of any city ordinance or state law by a license holder may result in the suspension or revocation of your city liquor license?
Yes_____ No_____

25. **Do you agree to notify this commission of any change in ownership, in the corporation or management of the establishment for which this license is being sought as you are required by law to do so?** Yes _____ No _____
26. Do you understand and agree that you must provide the City Clerk's office with a certificate of your current dram shop insurance liability initially and each year upon renewal of your license? Yes _____ No _____
27. According to State Statute #235ILCS5/6-1, a Liquor License holder must be a resident of the city in which the licensed is issued, unless a corporation. Are you a resident of the City of Monmouth? Yes _____ No _____ **If the answer to this question is no, then the applicant must provide corporation papers with this application.**

The above information is a true and correct statement to the best of my knowledge and if I, or we, are found guilty of misrepresenting the facts, then the local liquor commissioner will be expected to immediately revoke the license without any refund to the license holder. By my signature below, I hereby consent to any records check or other personal inquiries.

Applicant

Date

APPLICATION MUST BE ACCOMPANIED BY:

- 1) \$400 non-refundable deposit.
- 2) An approved detailed business plan for all new businesses. One is not required if the applicant is an existing business corporation or an established business owner currently holding a liquor license at another location.

APPLICATION MUST BE NOTARIZED.

Subscribed and sworn to before me
this _____ day of _____ 20_____.

Notary Public

Approved by the Mayor of the City of Monmouth,
Illinois, this _____ day of _____, A.D. 20_____.

Mayor