

**ALL LIQUOR LICENSES MUST BE APPROVED BY THE MENARD COUNTY BOARD OF COMMISSIONERS PRIOR TO THE EVENT. THE BOARD MEETS THE 2<sup>ND</sup> AND LAST TUESDAY OF EACH MONTH.**

Date of Event: \_\_\_\_\_  
Hours of Event: \_\_\_\_\_

License #: \_\_\_\_\_  
Fee Paid: \_\_\_\_\_

**APPLICATION FOR LIQUOR LICENSE  
Menard County, Illinois**

1. Name of Applicant: \_\_\_\_\_

Name of person completing this form if different from above: \_\_\_\_\_

2. Address of Applicant: \_\_\_\_\_

a. Contact telephone number: \_\_\_\_\_

3. Location & legal description of premises for which license is sought: \_\_\_\_\_

\_\_\_\_\_

4. Applicant's date of birth: \_\_\_\_\_

5. Driver's License #: \_\_\_\_\_

6. Position with business: \_\_\_\_\_

7. Percentage of ownership in the business: \_\_\_\_\_

8. Name(s), date of birth, driver's license #, position and percentage of ownership in the business of every partner, corporate officer, director, manager and any person who owns 5% or more of the shares of the business or parent corporation of the business:

| Name & Address | Date of Birth | Driver's License # | Position in Business | % Ownership |
|----------------|---------------|--------------------|----------------------|-------------|
|----------------|---------------|--------------------|----------------------|-------------|

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

a. If a "club" within the meaning of the Ill. Rev. Stat., Ch. 43, Par. 95.24, attach hereto, two (2) copies of a list of names and residences of your members.

b. If a club, are your affairs and management conducted by a board of directors, executive committee or similarly body chosen by the members at their annual meeting? \_\_\_\_\_

c. Is any member, officer, agent or employee of the club paid any profit from the distribution or sale of liquor beyond the amount of such salary as may be fixed and voted at any annual meeting by the members or its board of directors or other governing body out of the general revenue of the club? \_\_\_\_\_

9. Have you ever applied for a state liquor license before? \_\_\_\_\_

If so, when? \_\_\_\_\_

Where was the business located? \_\_\_\_\_

10. Have you ever had a liquor license revoked? \_\_\_\_\_

If yes, why? \_\_\_\_\_

11. Have you ever had a liquor license application denied? \_\_\_\_\_

If yes, why? \_\_\_\_\_

12. If applicant is a partnership, state date on which partnership was formed: \_\_\_\_\_

13. If applicant is a corporation, state:

a. Date of incorporation: \_\_\_\_\_

b. The objects for which the corporation was organized: \_\_\_\_\_

\_\_\_\_\_

c. The names and addresses of all corporate officers and directors: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

d. The State of incorporation: \_\_\_\_\_

e. If foreign corporation, date became qualified under Illinois Business Corporation Act to transact business in Illinois: \_\_\_\_\_

14. State your citizenship: \_\_\_\_\_

a. If a naturalized citizen, state the time & place of naturalization: \_\_\_\_\_

\_\_\_\_\_

15. State the character of the business for which the license is sought: \_\_\_\_\_

16. State your place of birth: \_\_\_\_\_

17. Have you ever been convicted of gambling or a felony under any State or Federal law? \_\_\_\_\_  
a. If yes, give particulars: \_\_\_\_\_
18. Have you ever been convicted of the crime of pandering or other crime or misdemeanor involving moral turpitude? \_\_\_\_\_  
a. If yes, give particulars: \_\_\_\_\_
19. 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 forfeited your bond to appear in court to answer charges for any such violation? \_\_\_\_\_  
a. If yes, give particulars: \_\_\_\_\_
20. Is applicant, or any person in the business, a public official? \_\_\_\_\_  
a. If yes, give particulars: \_\_\_\_\_
21. a. Who is in charge of operating the business? \_\_\_\_\_  
b. Name of person(s), address(es), & age(s) of person(s) in charge when person in (a) above is not present:  
\_\_\_\_\_  
\_\_\_\_\_  
c. Have person(s) (a) or (b) ever been issued a liquor license which was revoked for any cause? \_\_\_\_\_  
If yes, give particulars: \_\_\_\_\_  
d. Have person(s) (a) or (b) ever been convicted of gambling or a felony under any State or Federal law?  
\_\_\_\_\_  
If yes, give particulars: \_\_\_\_\_  
e. Have person(s) (a) or (b) ever been convicted of pandering or other crime or misdemeanor involving moral turpitude? \_\_\_\_\_  
If yes, give particulars: \_\_\_\_\_  
f. Have person(s) (a) or (b) ever been convicted of a violation of any Federal or State law concerning the manufacture, possession or sale of alcoholic liquor or has forfeited his/her bond to appear in court to answer charges for any such violation? \_\_\_\_\_  
If yes, give particulars: \_\_\_\_\_
22. What is the location and legal description of the place where it is proposed that you will operate under such license? \_\_\_\_\_  
\_\_\_\_\_

23. Do you own or will own the premises for which such license is sought? \_\_\_\_\_
24. Name and address of landlord if premise is leased: \_\_\_\_\_
25. State the Class or Classes of licenses for which the application is made: \_\_\_\_\_
26. You are required to attach proof of financial responsibility of the applicant to respond to damages resulting from the ownership, maintenance or operation of the business for bodily injury, loss of support, or death in an amount not less than \$250,000 per person and \$500,000 per incident. Attach a copy of proof of financial responsibility to the back of this application. This application will be denied if proof of financial responsibility is not attached to the application.

**If not, license cannot be issued.**

The applicant hereby states that he/she will not violate any law of the State or the United States nor any ordinance of the County in the conduct of his/her place of business and further states that the answers given to the above questions are true and correct.

\_\_\_\_\_  
(Applicant)

State of Illinois

SS

County of Menard

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

\_\_\_\_\_  
(Notary Public)

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