



VILLAGE OF RIVER FOREST
LOCAL LIQUOR LICENSE RENEWAL APPLICATION
JANUARY 1, 2020 THROUGH DECEMBER 31, 2020

THIS APPLICATION MUST BE FILED NO LATER THAN SIXTY (60) DAYS PRIOR TO EXPIRATION. NO RENEWAL APPLICATION FEE IS REQUIRED.

Provide a certificate of liquor liability insurance **naming the Village of River Forest, 400 Park Avenue, River Forest IL 60305 as the certificate holder for the License period and naming the Village of River Forest, its officials, employees, agents and volunteers as additional insured.** The coverage amount must be sufficient to cover the maximum amount of liability under the Illinois Liquor Control Act and insurance must be provided by a company satisfactory to the Village.

APPLICANT		
Name of Licensee	Name of Business	
Address River Forest, IL 60305		Phone

CLASS OF LOCAL LIQUOR LICENSE						
<input type="checkbox"/> Class 1	<input type="checkbox"/> Class 2	<input type="checkbox"/> Class 3	<input type="checkbox"/> Class 4	<input type="checkbox"/> Class 4A	<input type="checkbox"/> Class 4B	<input type="checkbox"/> Class 6
Amount Due: _____						

CONTACT INFORMATION (license coordinator or responsible party)		
Name	Email Address	
Address		Phone

ON-SITE MANAGER INFORMATION		
Name	Email Address	
Home Address		Phone

OWNERSHIP INFORMATION

Is any individual identified in this or previous applications, or any other person, directly or indirectly interested in the place of business a public official? ☐ Yes ☐ No

If yes, provide particulars:

Since your last liquor license application/renewal, have there been any changes in officers, directors, and shareholders with an aggregate of more than five percent of the shares of ownership of the corporation or of any persons receiving a direct or indirect benefit from the profits of the sale of alcoholic liquor in the Village? ☐ Yes ☐ No

If yes, describe changes in ownership and list any *new* officers, director, and/or shareholders below (use additional sheets if necessary).

Name		Position/Title	
Citizenship		Naturalization (if applicable)	Date: Place:
Home Address		Date of Birth	
City/State/Zip		Home Phone	
Driver's License #		Social Security #	
Name		Position/Title	
Citizenship		Naturalization (if applicable)	Date: Place:
Home Address		Date of Birth	
City/State/Zip		Home Phone	
Driver's License #		Social Security #	
Name		Position/Title	
Citizenship		Naturalization (if applicable)	Date: Place:
Home Address		Date of Birth	
City/State/Zip		Home Phone	
Driver's License #		Social Security #	

RIGHTS TO THE PROPERTY

I hereby certify that the property is (select one):

- ☐ Owned by the applicant
- ☐ Leased from the Landlord. Date Lease Expires: _____
- ☐ Managed via an operating or management agreement. Date Agreement Expires: _____

Landlord

Contact Person

Phone

CERTIFICATIONS / AFFIRMATIONS

The applicant, or the person signing on behalf of the applicant, and all individuals required to be identified in this application affirm that they have never been convicted of a felony or a Class A misdemeanor and are not disqualified to receive a liquor license by reason of any matter or thing contained in the laws of the State of Illinois or the provisions of Title 8 Chapter 5 §9 of Village Code.

☐ Yes ☐ No

The applicant affirms that he and all individuals required to be identified in this application have not in the past, and will not in the future, violate any of the laws of the State of Illinois, or of the United States, or any ordinance of the Village, controlling the retail sale of alcoholic liquor and the conduct of his place of business.

☐ Yes ☐ No

The applicant affirms that he, and all individuals required to be identified in this application, have never sold, delivered, or given away alcoholic liquor in violation of any state law, or Village ordinance, to a person under the minimum age required to purchase or possess liquor.

☐ Yes ☐ No

The applicant, or the person signing on behalf of the applicant, affirms that the applicant is not delinquent in the payment of any Local or State business taxes (sales, food & beverage, withholding, etc.).

☐ Yes ☐ No

The applicant, or the person signing on behalf of the applicant, affirms that if this application is allowed and a license is granted, and thereafter the applicant acquires, hires, or appoints a new manager, not listed as a manager in this local liquor license application, that within five (5) days of the date the new manager commences his duties, the applicant shall:

- Submit an application containing all information required by Title 8 Chapter 5 § 23 of Village Code to the River Forest local liquor commissioner; and
- Comply with all requirements set forth for the original manager.

☐ Yes ☐ No

If the applicant cannot affirm any of the above, provide particulars below.

AFFIDAVIT

(Please read carefully before signing)

I (We) the undersigned, being duly sworn, say that I (each of us) have read the above and foregoing application and that the matters stated therein are true, complete and correct and are made upon personal knowledge and information, and are made for the purpose of inducing the Village of River Forest to issue the license herein applied for.

I (We) understand Liquor Liability Insurance MUST remain in force during the period for which the license is issued.

I (We) will not violate any applicable ordinance of the Village, state law or laws of the United States in the conduct of the business for which a license is sought.

I (We) have read and understand the full text of the ordinance (Title 8 -Chapter 5).

I (We) further swear I (we) am (are) the partner(s) or the duly constituted and elected officer(s) of said applicant and as such are authorized and empowered to execute this application for and on behalf of said applicant.

(INDIVIDUAL)

(PARTNERSHIP OR CORPORATION)*

Name Title

Name Title

Subscribed and sworn before me this _____
day of _____, A.D., 20_____.

(NOTARY PUBLIC)

(NOTARY SEAL)

*If applicant is a corporation, have the President or other authorized officer sign the Corporate name by him/her as President; also have the Secretary attest their signature as Secretary and affix the seal of the corporation. If applicant is a partnership, each partner must sign.

MATERIAL MISSTATEMENTS TO OR FALSIFICATION OF THE INFORMATION REQUESTED IN THIS APPLICATION ARE GROUNDS FOR DENYING AN APPLICATION. NON-COMPLIANCE WITH THE PERMIT IS GROUNDS FOR REVOCATION AND/OR FINES TO THE FULLEST EXTENT OF THE MUNICIPAL CODE. FUTURE PERMIT APPLICATIONS COULD ALSO BE DENIED.