

Business Name:_____ License Year:_____

VILLAGE OF PEORIA HEIGHTS

4901 N. Prospect Road
Peoria Heights, IL 61616

RETAIL LIQUOR DEALER'S LICENSE CLASSIFICATION

Please check desire license(s):	<u>Annual Cost</u>
A-1	\$700.00
A-2	\$700.00
B	\$400.00
C	\$500.00
C-1	\$100.00
D	\$400.00
E	\$ 50.00
F	\$ 50.00
G	\$250.00
H	\$100.00
I	\$400.00
===== J	\$400.00
Subclassification #1	\$100.00
===== *Subclassification #1A	\$100.00
Subclassification #2	\$250.00
===== Subclassification B-1	\$100.00

CLASSIFICATION DESCRIPTIONS

- A-1: Retail sale of alcoholic liquor, beer, ale or wine for consumption on the premises of a tavern as well as package sales.
- A-2: Retail sale of alcoholic liquor, beer, ale or wine for consumption on the premises of any restaurant which complies with the requirement that 33 1/3% or more of the gross revenue in any month from the operation of the licensed premises must be derived from the serving of meals

Business Name:_____ License Year:_____

- B: Retail sale of beer, ale, or wine only for consumption on the premises as well as package sales.
- C: Package retail sales only.
- C-1: The sale of alcoholic liquor as defined for Class C, 24 hours a day, 7 days a week.
- D: Retail sale in clubs for consumption on the premises only.
- E: Retail sale for temporary periods in conjunction with a bona fide special event.
- F: Single event for a 6 hour period during 1 day only Monday through Saturday.
- G: Retail Sale of alcoholic liquor, beer, ale, or wine in connection with the operation of an off-site catering business.
- H: Retail sale of alcoholic liquors, for consumption on the premises, valid 2 days of the week, 12 months of the year. Shall not be prorated less than 6 months.
- I: Retail sale of milk-based and/or sherbet-based dessert products containing alcoholic liquor from the premises of any ice cream parlor for consumption on such premises, and the retail sale of packaged milk-based and/or sherbet based dessert products containing alcoholic liquor in fully sealed containers from the premises of any ice cream parlor for consumption off of such premises.

Subclassification #1

Outdoor sale and consumption of alcoholic liquor, beer, ale or wine.

*Subclassification #1A

Outdoor sale and consumption of alcoholic liquor, beer, ale or wine in the Village right-of-way.

Subclassification #2

Supplemental license from 6:00 a.m. until 2:00 a.m. the following morning on Thursday, Friday, and Saturday to be issued to those licensees holding a valid class A, B, or D license.

Note

All first time applicants must be fingerprinted in order to complete a mandatory background test.

APPLICANT INFORMATION

1. Applicant's full name:_____
(Must be the individual who signs this application; if a club or corporation, must be an officer or owner of 30% or more of the corporation's stock or capital.)
Driver's License#:
2. Applicant's resident address:

Phone:
3. Applicant's place and date of birth:
4. Are you a citizen of the United States?

Business Name:_____ License Year:_____

5. If a naturalized citizen, when were you naturalized?

6. Where were you naturalized? (city & state)

7. Have you ever been convicted of a felony under Federal or State law?

If yes, give date(s) and state offense(s):

8. Has applicant ever been convicted of being the keeper of a house of ill fame or of pandering or other crime or misdemeanor opposed to decency and morality?

If yes, give date(s) and state offense(s):

9. Has the applicant ever been convicted of a violation of a Federal or State liquor law since February 1, 1934?

If yes, give date(s):

10. Has any license previously issued to you by State, Federal, or local authorities been revoked, suspended, or fined?

If yes, state reasons therefore and date(s)

11. Has the applicant ever received treatment for a chemical dependency or been involved in any incident involving the police, including traffic, in which alcohol liquor was involved?

If yes, give date(s), location(s), and results of any such treatment or incident:

12. Has applicant been involved in any battery, assault, fight, or public disorder?

If yes, give date(s), location(s), and disposition of any such incident(s):

BUSINESS INFORMATION

1. Name under which business is to be conducted:_____

2. Location of place of business for which license is sought:_____

3. State principle kind of business:_____

4. Does applicant own premises for which this license is sought?_____

If no, does applicant have lease on such premises covering the full period for which the license is sought?_____ If yes, attach copy.

5. Is applicant a licensed food dispenser?_____

6. If yes, approximately what percent of gross revenue is derived from food:_____

7. Is the location of the applicant's business for which this license is sought within 100 feet of any church or school?_____

- Business Name:_____ License Year:_____
8. Is any law enforcing public official, elected official, or appointed public official directly interested in the business for which license is sought?_____
9. Will the business be conducted by a manager or agent?_____
- If yes, provide the following information:
1. Full name of manager or agent:_____
 2. Manager or agent's resident address:_____
 3. Manager or agent's place and date of birth:_____
 4. Is manager or agent a citizen of the United States?_____
 5. If a naturalized citizen, when was s/he naturalized?_____
 6. Where was s/he naturalized? (city and state)_____
 7. Has manager or agent ever been convicted of any felony under Federal or State law?_____
If yes, give date(s) and state offense(s):_____
 8. Has manager or agent every been convicted of being the keeper of a house of ill fame or of pandering or other crime or misdemeanor opposed to decency and morality?_____
If yes, give date(s) and state offense(s):_____
 9. Has manager or agent ever been convicted of a violation of a Federal or State liquor law since February 1, 1934?_____
If yes, give date(s):_____
 10. Has any license previously issued to the manager or agent by State, Federal, or local authorities been revoked, suspended or fined?_____
If yes, state reasons therefore and date(s):_____

CORPORATION / PARTNERSHIP INFORMATION

1. Full legal name and date of incorporation (please attach a copy of corporation charter):_____
2. According to charter, what is (are) the object(s)s of the corporation?_____
3. Names of partner(s) or corporate officers and directors (attach separate sheet if necessary):_____
4. Is a majority in interest of stock owned by one person or his/her nominees?_____
If yes, give name and resident address of such person:_____
5. Would such person be able to qualify to receive the license sought in this application?_____

Business Name:_____ License Year:_____

AFFIDAVIT

I (we) swear (affirm) that I (we) will not violate any of the ordinances of the Village of Peoria Heights or laws in the State of Illinois or laws of the United States of America in the conduct of the place of business described herein and that the statements contained in this application are true and correct to the best of my (our) knowledge and belief.

Signature of Applicant(s)

STATE OF _____)

COUNTY OF _____)

_____, being duly sworn under oath, deposes and says that the statements in the above application are true to the best of his/her knowledge, information, and belief.

Subscribed and sworn to me this _____ day of _____, _____.

Notary Public

In and for the County of _____, State of _____.

Seal _____

Business Name:_____ License Year:_____
Remittances and bond (if not exempt) must accompany the submission of this application.
Remittance should be made payable to the order of the Village of Peoria Heights, Illinois.