

**APPLICATION TO THE
CITY LIQUOR CONTROL COMMISSIONER
FOR A RETAILER'S LICENSE
FOR THE SALE OF ALCOHOLIC LIQUORS**

To the Liquor Control Commissioner of the City of Olney, Richland County, Illinois:

The undersigned hereby makes (make) application for the issuance of a Class _____ city retailer's license for the sale of alcoholic liquor for the term beginning _____, 20__ and ending _____, 20__ and hereby certifies (certify) to the following facts:

1. Applicant's full name _____
2. The applicant's form of business is _____
(Partnership) (Association) (Sole Proprietorship) (Corporation)
3. Name of individual, partnership or corporation _____
4. Name under which business is to be conducted _____
5. Address of business for which license is sought _____
6. Principal kind _____ Length of time in business _____
7. If applicant is a corporation, incorporated under the laws of the State of _____ on the _____ day of _____, _____.
8. The objects for which said corporation was organized are _____.
9. List names of all partners, officers, managers, directors and all persons entitled to share in the profits of said business.
(Also complete #16 for each person listed.)

10. Does applicant seek a license to sell alcoholic liquor upon the premises as a restaurant? _____
If so, are premises:
(A) Maintained and held out to the public as a place where meals are actually and regularly served? _____
(B) Provided with adequate and sanitary kitchen and dining room equipment and capacity with sufficient employees to prepare, cook and serve suitable food? _____
11. Does applicant own premises for which this license is sought? _____
12. Has applicant a lease on such premises covering the full period for which the license is sought? _____
(If so, attach copy of lease)
13. Is any law enforcing public official, mayor, member of the city council, or any such official directly interested in the business for which license is sought? _____
14. The applicant now has on hand goods, wares and merchandise in the amount of \$ _____ consisting of _____

15. Will the business be conducted by a manager or agent? _____
If so, complete #16 on the next page.
16. **Complete for each applicant, partner, officer, manager, director or shareholder owning more than 5% of the stock in**

a corporation (Complete and attach additional copies, if necessary).

- (a) Name _____ Title _____
- (b) Residence address _____ Telephone number _____
- (c) Resided in the City of Olney since _____
- (d) Date of birth _____ Place of birth _____
- (e) Are you a citizen of the United States? _____ If a naturalized citizen, when naturalized? _____
Where naturalized? _____ Court in which (or law under which) naturalized _____
- (f) Have you ever been convicted of any felony under any Federal or State Law? _____
If so, give date and state offense _____
- (g) Have you 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 so, give dates and state offense _____
- (h) Have you ever been convicted of a violation of a Federal or State liquor law since February 1, 1934? _____
If so, give dates _____
- (i) Have you made application for a similar other license for premises other than described in this application? _____
If so, give date, location of premises and disposition of application _____
- (j) Has any license previously issued to you by State, Federal or local authorities been revoked, suspended or fined? _____
If so, state reasons therefore and date(s) _____

Signature of Applicant

Signature of Applicant

AFFIDAVIT

STATE OF ILLINOIS)
) SS.
COUNTY OF RICHLAND)

I (or we) swear (or affirm) that I (or we) will not violate any of the ordinances of the City of Olney or the laws of the State of Illinois or the 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

Signature of Applicant

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

Notary Public