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

Please attach evidence that premises is open and operated as a licensed liquor establishment
(for those that also serve food, evidence should be a copy of a receipt specifically for liquor sale)

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

of alco	The undersigned hereby makes (make) application for the issuance of a Class city retailer's license for the sale pholic liquor for the term beginning, 20 and ending, 20 and hereby certifies
	y) to the following facts:
1.	Applicant's full name
2.	The applicant's form of business is
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 #17 for each person listed.)
10.	Does applicant seek a license to sell alcoholic liquor upon the premises as a restaurant?
	(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?
13.	(If so, attach copy of lease) 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 #17 on the next page.
16.	List State of Illinois retail liquor license number:

(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
	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
	Subscribed and sworn to before me thisday of, 20
	Notary Public