

CITY OF JACKSONVILLE
APPLICATION FOR LICENSE TO SELL ALCOHOLIC LIQUORS
Andy Ezard, Mayor and Local Liquor Commissioner

The undersigned hereby make(s) application for the issuance of a City of Jacksonville license for the sale of alcoholic liquor for the term ending December 31, _____ and hereby certifies (certify) to the following facts.

1. Applicant's Name _____
Residence Address _____ Email _____
Telephone Number _____ Cell Phone Number _____
Date of Birth _____ Social Security Number _____
Driver's License: State _____ Number _____ Issued _____ Expires _____
If you are a resident of the City of Jacksonville, how long have been a resident? _____
Are you a citizen of the United States? _____ If a naturalized citizen, when naturalized? _____
Have you ever been convicted of any felony under a Federal or State law? _____
If so, give date and state offense _____
Have you ever been convicted of being the keeper of a house of ill fame (or are you now keeping such house) or pandering or other crime or misdemeanor opposed to decency and morality? _____
Have you ever been convicted of a violation of a Federal or State liquor law since February 1, 1934? _____
If so, give dates _____
Have you ever permitted an appearance bond forfeiture for any of the violations mentioned above? _____
Have you made application for a similar license for premises other than described in this application? _____
If so, give date, location of premises and disposition of application _____
Has any license previously issued to you by State, Federal or local authorities been revoked? _____
If so, state reasons therefor and date of revocation _____

2. Name of Partner (*furnish this information for all partners*) _____
Residence Address _____ Email _____
Telephone Number _____ Cell Phone Number _____
Date of Birth _____ Social Security Number _____
Driver's License: State _____ Number _____ Issued _____ Expires _____
If you are a resident of the City of Jacksonville, how long have you been a resident? _____
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If so, state reasons therefor and date of revocation _____

3. Name under which business is to be conducted _____
4. Address of place of business _____
5. Circle type of license desired:

| | | |
|------------------------------------|--|----------|
| A | Beer and wine for consumption off premises – Monday through Saturday | \$600 |
| AA | Beer and wine for consumption off premises – Monday through Sunday | \$800 |
| B | All alcoholic liquor for consumption off premises – Monday through Saturday | \$800 |
| BB | All alcoholic liquor for consumption off premises – Monday through Sunday | \$1025 |
| C | All alcoholic liquor for consumption on or off premises – Monday through Saturday | \$1100 |
| CC | All alcoholic liquor for consumption on or off premises – Monday through Sunday | \$1375 |
| D | Beer and wine for consumption on premises – Monday through Saturday | \$1025 |
| DD | Beer and wine for consumption on premises – Monday through Sunday | \$1150 |
| E | All alcoholic liquor for consumption on premises – Monday through Saturday | \$1275 |
| EE | All alcoholic liquor for consumption on premises – Monday through Sunday | \$1375 |
| Bowling Alley Club | All alcoholic liquor for consumption on or off premises – Monday through Sunday | \$1375 |
| Fairgrounds/ Fair Board | All alcoholic liquor for consumption on premises during the Morgan County Fair - Monday through Sunday | \$400 |
| Fairgrounds/ Speedway | All alcoholic liquor for consumption on premises in conjunction with automobile races and any other events - Monday through Sunday | \$1375 |
| P-Beer & Wine | Beer and wine for consumption at The Links Golf Course, when Course is open | \$500 |
| P-Alcoholic Liquor | All alcoholic liquor for consumption at The Links Golf Course, when Course is open | \$1000 |
| GC | All alcoholic liquor for consumption on premises – Monday through Sunday | \$1375 |
| BH | All alcoholic liquor for consumption on premises only when event is taking place | \$687.50 |
| CV | All alcoholic liquor for consumption on a college campus by a food service/beverage vendor for banquets, receptions, catered meals and special social events - Monday through Sunday | \$687.50 |
| GP | All alcoholic liquor for consumption on premises at a gaming parlor – Monday through Sunday | \$5000 |
| PLAZA | Beer and wine for consumption on premises at designated areas of the Jacksonville Downtown Plaza upon approval of the Mayor – During all day events from 11 a.m. to 10 p.m. During evening events only from 5 p.m. to 10 p.m. | \$300 |

6. Do you agree that the City of Jacksonville may make investigation into your moral character and credit record? _____
7. Does applicant own premises for which this license is sought? _____
8. Has applicant a lease on such premises covering the full period of which license is sought? _____
If so, give name and address of lessor _____
Period covered by lease: From: _____ To: _____
9. *For Class B, BB, C and CC only:* Is the location of applicant's business for which license is sought within 100 feet of any church, school, hospital, home for aged or indigent persons or for veterans, their spouses or children, or any military or naval station? _____

10. If applicant is a corporation, attach a list of names and addresses of the principal officers and of each stockholder owning more than five percent (5%) and attach completed Qualification of Officer, Stockholder, and Manager or Agent form for each such person.
11. If applicant is a Club, attach a list of names and addresses of the principal officers and attach completed Qualification of Officer form for each such person.
12. If applicant is a corporation, in what State is it incorporated? _____
If not incorporated in Illinois, is applicant qualified under the Illinois Business Corporation Act to transact business in Illinois? _____
13. *For Class BH, D, DD, E, EE and GC only:* Does the licensed premises derive less than thirty percent (30%) of its gross income from the sale of alcoholic liquor? _____
14. Will the business be conducted by a Manager or Agent? (Must reside within Jacksonville city limits) _____
List Manager's name and address and attach completed Qualification of Manager form for each such Manager:

15. Attach a sketch of the property where your licensed premises is located, drawn to scale, indicating clearly the area of the property that is to be the licensed premises. Section 3-17 of the City's Liquor Ordinance defines the "licensed premises" as the "permanent structure, or portion thereof," described in this application. NOTE: Sales of alcoholic liquor cannot occur outside the "licensed premises", and for all except Class A and AA licenses, employees must be off the "licensed premises" during certain hours.
16. Attach a list of employees, and their birthdates, working on the licensed premises. NOTE: Section 3-42 of the Liquor Ordinance requires licensees to submit a revised employee list with each change due to departure or hiring.
17. For Special Events applicants only:
 - A. Attach written authorization from the owner for use of the premises if not owned by applicant.
 - B. Describe the nature of the event planned _____
 - C. Attach a certificate of insurance showing evidence of Dram Shop and Liability insurance coverage.
 - D. State the time(s) and date(s) for the term of the Special Events license _____
 - E. Describe the kind of enclosure which will be around the licensed premises _____

AFFIDAVIT

STATE OF ILLINOIS)

) SS

COUNTY OF MORGAN)

I (We) swear I (we) will not violate any of the ordinances of the City of Jacksonville 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.

Applicant's Signature

Subscribed and Sworn to before me this _____ day of _____, _____

Notary Public
(SEAL)

NOTES:

1. Completed, signed and notarized applications with required attachments are to be submitted to the Mayor's Office for the approval process. All applications go before the City Council for approval to increase licenses.
2. If applicant is a corporation, provide corporate information in item 1 on page 1. Information for individuals (stockholders, officers and manager) is provided on page 4 (Qualification of Officer, Stockholder and Manager or Agent). Each individual must complete, sign and have notarized this form.
3. If applicant is an individual owner, provide individual information in item 1 on page 1. The applicant does not complete page 4; however, if the business is operated by a manager other than the owner, the manager must complete, sign and have notarized page 4.
4. If applicant is a partnership, provide partnership information in item 2 on page 1.

QUALIFICATION OF OFFICER, STOCKHOLDER AND MANAGER OR AGENT

(Complete this form for each officer, stockholder, manager and/or agent)

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Residence Address _____
Telephone Number _____ Cell Phone Number _____
Email Address _____
Date of Birth _____ Social Security Number _____
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2. Name under which business is to be conducted _____
3. Address of place of business _____

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Applicant's Signature

Subscribed and Sworn to before me this _____ day of _____, _____

(Official Use Only)

Applicant(s) cleared through the Jacksonville Police Dept:

Notary Public
(SEAL)

Signature JPD Officer

Date

License: _____ Approved _____ Disapproved