

CITY OF GALESBURG

City Clerk's Office

Operating under Council Manager form of Government Since 1957

Individual Liquor License

Date _____

Classification _____

Application fee of \$250.00 must accompany this application.

1. Name of Individual _____

D/B/A _____

Address (Premise to be licensed) _____

Home Address _____

Cell Phone _____ E-mail address _____

Date of Birth _____ Place of Birth _____

Driver's License Number _____

2. Are you ineligible to receive a license because of any matter contained in any federal or state law? _____ Yes _____ No

3. Have you been convicted of a violation of any federal or state law concerning the manufacture, possession or sale of alcoholic beverages or forfeited your bond to appear in court and answer charges of any such violation? _____ Yes _____ No

4. Have you ever been convicted of keeping a house of prostitution or pandering or other crime or misdemeanor opposed to decency and morality? _____ Yes _____ No

5. Do you hold any public or official position? _____ Yes _____ No

6. Are you a law-enforcing officer? _____ Yes _____ No

7. If you have answered yes to any of the past five (5) questions, please explain:

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8. Is the applicant the owner of the premise for which the license is sought? _____ Yes _____
No

9. Do premises proposed to be licensed comply with the requirements of Section 113.067
(Premises Limitations)? _____ Yes _____ No

10. If the premise is a restaurant, as defined in Section 113.001, are meals regularly served?
_____ Yes _____ No

11. Are said premises within 100 feet of any church, school, hospital, home for the aged or
insane persons or veterans, their wives or children, or any military or naval station? (School =
Boundary line to Boundary line Church = measured from the nearest part of any building used
for worship Section 113.041(c) Geographical Restrictions) _____ Yes _____ No

12. Has any application for a liquor license been made in prior years by applicants on other
premises? _____ Yes _____ No

13. Have the applicants ever had a license for the sale of alcoholic beverages revoked or
suspended? _____ Yes _____ No

14. Do the applicants agree that if the license is revoked for cause, no license shall thereafter be
issued for the sale of alcoholic beverages upon the licenses premise or to the applicant for a
period of one year from and after date of such revocation? _____ Yes _____ No

15. As a condition precedent to the granting of a license, do you understand that any police
officer or other official for the City of Galesburg, Illinois may at all times have free and
unrestricted access to the licensed premise for the purpose of inspecting the same, and it shall
not be necessary for such officer to procure any legal process before entering in and upon said
premise? _____ Yes _____ No

16. Is the place of business for which license is sought to be conducted by a manager or agent?
_____ Yes _____ No

Name of manager _____ (Manager must fill out separate statement)

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17. In what business is the applicant engaged? _____

18. How long engaged in such business? _____

19. State the amount of goods, wares, and merchandise on hand: _____

20. Do you intend to apply for a Gaming License with the State of Illinois? _____ Yes _____ No

21. Is any public official or law-enforcing officer interested, in any way, directly or indirectly, in the conduct of such business or the proceeds thereof or in the sale or distribution of alcoholic liquors on said premises? _____ Yes _____ No

22. Are you an importing distributor or distributor? _____ Yes _____ No

23. If so, do you conduct your business as such importing distributor or distributor upon the premises for which license is sought? _____ Yes _____ No

24. Have you accepted, received, or borrowed money or anything else of value, or accepted or received credit, other than merchandise credit, in the ordinary course of business, for a period not to exceed thirty (30) days, directly or indirectly, from any manufacturer or distributor or alcoholic liquors or from any person connected with or in any representing, or from any member of the family such manufacturers, importing distributor or wholesaler, or from any stockholder in any corporation engaged in the manufacturing, distributing and wholesaling of such liquor, or from any officer, manager or agent of such manufacturer? _____ Yes _____ No

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I, _____ the applicant, making the foregoing application, being first duly sworn, on oath depose and say that I have read the questions contained in the foregoing application and that the same are true both in substance and in fact.

Signature

STATE OF ILLINOIS)

COUNTY OF KNOX)

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

Notary Public

Please note: all signers of this document must sign in the presence of a Notary Public. Do Not Sign Without The Witness Of A Notary Public.

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Statement by Owner of Premises

I/We, _____,
do hereby certify that as the owner/owners of the premises described in the attached
application _____ of

_____ agree that if the City of Galesburg, Illinois, issues a license to the applicant named in such application for said premises and such license is thereafter revoked for cause, the said City will neither be required nor requested to issue another license for said premises to any other person whatsoever for a period of one year after such revocation.

Signature

Residence

Signature

Residence

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Manager's Statement

Name of Business _____

Address of Business _____

Manager _____

Manager's Address _____

Date of Birth _____ Driver's License _____

Have you ever been convicted of a felony under any federal or state law or of keeping a house of prostitution or pandering or of other crimes or misdemeanors opposed to decency and morality? _____ Yes _____ No

If yes, please explain _____

Signature of Owner

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Diagram to scale the area to be operated under such license.

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I/We _____, do hereby authorize a review of and full disclosure of all records concerning myself to any duly authorized agent of the Galesburg Police Department, whether the said records are of public, private or confidential nature. I understand that any information obtained by a personal history background investigation, which is developed directly or indirectly, in whole or in part, upon this release authorization will be considered in determining my suitability for application. I also certify that any person(s) who may furnish such information concerning me shall not be held accountable for giving this information; and I do hereby release said person(s) from any and all liability, which may be incurred as a result of furnishing such information. I further release the City of Galesburg from any and all liability, which may be incurred as a result of collecting such information.

I hereby swear/affirm that all information in or supplementing this application is complete, true and accurate to the best of my knowledge. I understand that by providing false, misleading, or incomplete information on this application is grounds for revocation if discovered subsequent to licensing.

A photocopy of this release form will be valid as an original thereof, even though the said photocopy does not contain an original writing of my signature. I have read and fully understand the contents of this "Authorization for Release of Personal Information."

Signature of Owner