

VILLAGE OF MAPLETON

8524 W. Main St.

Mapleton, Illinois 61547

**APPLICATION FOR VILLAGE OF MAPLETON LIQUOR
LICENSE - INDIVIDUAL**

ESTABLISHMENT NAME _____

CONTACT PERSON & PHONE _____

() - _____

The undersigned applicant hereby makes application for the issuance of a license to engage in the business of selling alcoholic liquor, and provides the following information, attaching additional sheets as necessary to provide all information required, together with all required documents and application fee.

\$750.00 Application Fee Submitted Yes No

1. Type of application Original Change of Ownership
 Expansion of Premises

2. Class of license applied for:

 A - These licenses are those that operate primarily as a bar. Regular retailer's bar license permits the licensee to sell any and all alcoholic liquor by the drink or by the package only for consumption on the premise where sold.

 B - Permits the licensee primarily engaged in the production and wholesale distribution of beer, ale or other malt beverage and wine to sell alcoholic liquor at retail by drink on the premises or by the package for consumption off the premises.

The following information is to be provided for all persons sharing in the profits of the partnership:

3. Name – Applicant _____

Date of Birth ____/____/____

Resident Address (include zip code) _____

Home Telephone (____) _____

Driver's License No. & State Issued _____

Years residency in: State of IL: _____

Peoria County _____ Village of Mapleton _____

4. Name of business for which application is made ("doing business as" name) _____

Address _____

Telephone (____) _____ Fax (____) _____

5. Business office address to be used for all correspondence regarding this license, if approved (where certified mail is accepted): _____

Telephone (____) _____ Fax (____) _____

6. Nature of business _____

7. Date business began at this location ____/____/____

8. Length of time applicant has been in a business of this character _____

9. Nature of entertainment proposed to be offered _____

10. Are any monies owed to the Village by the applicant,

whether for bills, taxes, licenses, or otherwise?

Yes No If Yes, amount and length of time owed

11. Has a liquor license been revoked at this location within the past year? _____

12. Name of previous licensee, if any _____

13. Premises for which application is made were:

a. Purchased by applicant on ____/____/____
(attach copy of deed or contract for sale)

b. Leased by applicant from ____/____/____ to
____/____/____ (attach copy of lease, sublease,
or assignment)

14. Is the location of the premises for which license is sought within one hundred (100) feet of any church, school, hospital, home for the aged or indigent persons, or for veterans, their wives or children, or any naval or military station? Yes No

If Yes, is the applicant's place of business a hotel offering restaurant service, a regularly organized club, a food shop, or other place where the sale of liquor is not the principal business? Yes No

If yes, how long has the place of business been in operation?

15. Has any manufacturer, importing distributor, or distributor directly or indirectly paid or agreed to pay for this license, advanced money or anything else of value, or any credit (other than merchandising credit in the ordinary course of business for a period not to exceed 90 days), or is such a person, or any other person, directly or indirectly interested in the ownership,

conduct, or operation of the place of business?

Yes No

If Yes, give particulars _____

16. Has any person involved with this premises for which application is made been issued a Federal Wagering Stamp for the current tax year? Yes No

If Yes, list names: _____

17. Is any person who is a part of this application, or any other person, directly or indirectly interested in the business, a public official as defined in Sec. 2(14) Art. VI of the Illinois Liquor Control Act? Yes No

If Yes, list office held _____

18. Name – Manager _____

Date of Birth ____/____/____

Resident Address (include city & zip code) _____

Home Telephone (____) _____

Driver's License No. _____

% of stock owned _____

Years residency in: State of IL: _____

Peoria County _____ Village of Mapleton _____

19. List any governmental units to which an application for a liquor license has been submitted, date of such application,

disposition of such application, amounts of and reasons for fines imposed, dates, reason, and length of suspension or revocation, if any. This information must be provided by the applicant and the manager.

a. Applicant _____

b. Manager _____

20. List any convictions of non-traffic violations of any ordinance or statute of any city, county, or state or of the Federal government indicating the name of the offense(s) and date(s) of conviction. This information must be provided by all persons as stated in No. 19 above (attach additional sheets as necessary).

21. Name of contact person regarding this license

22. Email address of contact person _____

23. Phone number of contact person (during regular business hours) (_____) _____

24. Cell phone number of contact person (_____) _____

25. Establishment email address

AFFIDAVIT

I swear that I am the SOLE owner of the business above described, that the premises specified in this application comply with all respects with the requirements of the Illinois Liquor Control Law and ordinances of the City of Champaign, and that I and my manager are qualified and eligible to obtain the license applied for herein under the Illinois Liquor Control Law.

I swear that I will not violate any of the laws of the State of Illinois or of the United States of America or the ordinances of the City of Champaign in the conduct of the place of business described herein and that the statements contained in this application are true and correct and are made for the purpose of inducing the City of Champaign to issue the license herein applied for.

Signature – Applicant _____

Subscribed and sworn to
before me this _____ day
of _____, 201__

(Notary Public)

CRIMINAL BACKGROUND AND CREDIT CHECK

I authorize and empower the President of the Village of Mapleton or agent thereof or any other outside service company engaged by said President for this purpose, now or subsequently, to obtain, prepare, use, and furnish information concerning my current and former employment, education, credit, general reputation, criminal history information through correspondence, contact, or personal interviews with law enforcement agencies. Upon written request, I understand that said President will provide me with information regarding the nature and scope of the investigation if one is made.

Applicant _____

(print name)

(signature)

Date _____

Manager _____

(print name)

(signature)

Date _____