



## Application for Village of Manteno Liquor License

The undersigned hereby make(s) application for the issuance of a Village retailer's license for the sale of alcoholic liquor for the term beginning May 1, 2020 and ending April 30, 2021, and hereby certifies to the following facts:

- 1) Applicants full name: \_\_\_\_\_  
(If partnership or corporation give names of ALL owners of more than 5%)

Name under which business is to be conducted:

\_\_\_\_\_

**\*\*Name how it should appear on the Liquor License:**

\_\_\_\_\_

- 2) Location of place of business for which license is sought:

\_\_\_\_\_

EXACT ADDRESS BY STREET AND NUMBER

Business Phone #: \_\_\_\_\_ Email Address: \_\_\_\_\_

Mailing Address if different from above: \_\_\_\_\_

- 3) State Principal kinds of business: \_\_\_\_\_

- 4) Class of license applied for (circle one) Class A Class B Class C Class D  
Class E Class F Class O (only w/class A)

- 5) 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?

\_\_\_\_\_

- 6) Does applicant own premises for which this license is sought? \_\_\_\_\_

- 7) Has applicant a lease on such premises covering the full period for which the license is sought? \_\_\_\_\_ If so, **attach a copy.**

- 8) Is applicant licensed as a food dispenser? \_\_\_\_\_
- 9) Is the location of applicant's business for which license is sought within 100 feet property line to property line, of any school, hospital, home for aged or indigent persons or for veterans, their wives or children, or any military or naval station, or 100 feet building to building from a church? \_\_\_\_\_
- 10) Is any law enforcing public official, mayor, trustee, member of a Village commission, or any president or member of a county board directly interested in the business for which this license is sought? \_\_\_\_\_
- 11) Has any manufacturer, importing distributor or distributor directly or indirectly paid or agreed to pay for this license, advanced money or anything of value, or any credit (other than merchandising credit in the ordinary course of business for a period not to exceed 30 days), or is such person directly or indirectly interested in the ownership, conduct or operation of the place of business? \_\_\_\_\_
- 12) Is the applicant or any affiliate, associate, subsidiary, officer, director or any other agent engaged in the manufacture of alcoholic liquors? \_\_\_\_\_
- If so, at what locations? \_\_\_\_\_
- 13) Is the applicant engaged in the business of an importing distributor or distributor of alcoholic liquors? \_\_\_\_\_
- If so, at what locations? \_\_\_\_\_
- 14) Will the business be conducted by a manager or agent? \_\_\_\_\_
- If so, give the name and residence address of such manager or agent:
- \_\_\_\_\_
- NAME
- \_\_\_\_\_
- ADDRESS

**INDIVIDUAL APPLICANT:**

- a) Name \_\_\_\_\_
- b) Date of Birth \_\_\_\_\_
- c) Residence Address \_\_\_\_\_
- d) Telephone Number \_\_\_\_\_
- e) Place of Birth \_\_\_\_\_

- f) Are you a citizen of the United States? \_\_\_\_\_
- g) If a naturalized citizen, when naturalized? (month/day/year) \_\_\_\_\_
- h) Have you ever been convicted of any felony under any Federal or State law?  
Yes \_\_\_\_\_ No \_\_\_\_\_
- i) If "Yes" give date and offense \_\_\_\_\_
- j) 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?  
Yes \_\_\_\_\_ No \_\_\_\_\_
- k) If "Yes" give dates and state offense \_\_\_\_\_
- l) Have you ever been convicted of a violation of a Federal or State Liquor law since February 1, 1934? Yes \_\_\_\_\_ No \_\_\_\_\_
- m) If "Yes", give dates and state offense \_\_\_\_\_
- n) Has any license previously issued to you by local authorities, State or Federal been revoked, suspended or fined? Yes \_\_\_\_\_ No \_\_\_\_\_
- o) If "Yes", give dates and explanation \_\_\_\_\_

**CO-PARTNERSHIP/CORPORATE APPLICANT**

- a) Name of partner, or corporate officers and directors and shareholders, if any:  
(Attach a separate sheet if necessary)  
\_\_\_\_\_
- b) Date of Birth (s) \_\_\_\_\_
- c) Residence Address \_\_\_\_\_
- d) Telephone Number \_\_\_\_\_
- e) Place of Birth \_\_\_\_\_
- f) Are you a citizen of the United States? \_\_\_\_\_
- g) If a naturalized citizen, when naturalized? (month/day/year) \_\_\_\_\_
- h) Have you ever been convicted of any felony under any Federal or State law?  
Yes \_\_\_\_\_ No \_\_\_\_\_
- i) If "Yes" give date and offense \_\_\_\_\_

- j) 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?  
Yes\_\_\_\_\_ No\_\_\_\_\_
- k) If “Yes” give dates and state offense\_\_\_\_\_
- l) Have you ever been convicted of a violation of a Federal or State Liquor law since February 1, 1934? Yes\_\_\_\_\_ No\_\_\_\_\_
- m) If “Yes”, give dates and state offense\_\_\_\_\_
- n) Has any license previously issued to you by local authorities, State or Federal been revoked, suspended or fined? Yes\_\_\_\_\_ No\_\_\_\_\_
- o) If “Yes”, give dates and explanation\_\_\_\_\_

STATE OF ILLINOIS )  
 ) SS  
 COUNTY OF KANKAKEE )

I (or we) swear (or affirm) that I (or we) will not violate any of the ordinances of the Village of Manteno 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

Subscribe and sworn to \_\_\_\_\_  
 Before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_

\_\_\_\_\_  
 Signature of Notary Public

SEAL

Have you included the following (if applicable):

- \_\_\_ Completed Liquor License Application
- \_\_\_ Completed Manager Application
- \_\_\_ Certificate of Insurance with Village of Manteno, **98 E. Third Street, Manteno, IL 60950** listed as Certificate Holder
- \_\_\_ Copy of current lease agreement – (if not owner of property)
- \_\_\_ Fee – *make checks payable to “Village of Manteno”*