GENERAL INSTRUCTIONS

BACKGROUND INVESTIGATION FORM: Each shareholder <u>and/or</u> site-manager must undergo a police background investigation that includes a fingerprint check through the Illinois State Police and the Federal Bureau of Investigation.

To begin the process of the background check for each person:

- Pay the Fingerprinting Process Fee and make an appointment. You may pay <u>online</u> via credit card or by visiting the liquor permits page at www.cityofevanston.org/residents/permits-licenses.
- After you've paid online, you should schedule a fingerprinting session by contacting the Evanston Police Department at (847) 866-5020 and anyone there can assist you with getting scheduled for a fingerprinting session.
- Bring the original receipt for \$43.25 that you paid to the *City of Evanston* **AND** a valid photo I.D. to your fingerprinting appointment.

*Note: Separate transactions are required for each person. Each establishment manager subsequently hired must submit to a fingerprint and background investigation. The Illinois State Police will process the background investigation.

City of Evanston annual Liquor License Application

SHAREHOLDER and/or SITE MANAGER BACKGROUND FORM

(Supplement C)

Managers <u>and</u> all parties holding a five percent (5%) or greater interest in the place of business, partnership, or corporation must complete this background form:								
Corporation/Partnership		•						
Business Name:								
PERSONAL INFORMAT	TON							
First Name:		L	ast Name:			Middle Initial.		
Title: Sole Owner Partner Corp Officer Site Manager D			Pirector Other: (% of S	% of Stock Ownership:			
Current Residential Address:		Suite/Apt.:	City:		State:	Zip:		
				T				
Home Phone:	Work Phone:		Cell Phone:	E-mail:				
Date of Birth (MM/DD/YYYY):			Place of Birth (City, State	and Country	ry):			
Are you a citizen of the United States? No, I am a citizen of:								
Naturalized Citizen:	Naturalization Informa			•				
Yes No	Date: City	y:	State:	County				
	STORY (list your present or mo	ost recent re	esidence first)					
1. Address:			City:		State:	Zip:		
2. Address:			City:		State:	Zip:		
3. Address:			City:		State:	Zip:		
1. Name of Employer/Business	(list your present or most recent	t employer f	rirst) Position:		Ctart Data	End Date:		
i. Name of Employer/Business			Position.		Start Date: End Date:			
Address (City, State, Zip):								
Telephone:	Reason for Leaving:							
2. Name of Employer/Business:			Position:		Start Date:	End Date:		
Address (City, State, Zip):						I		
Telephone:	Reason for Leaving:							
3. Name of Employer/Business:			Position:		Start Date:	End Date:		
Address (City, State, Zip):								
Telephone:	Reason for Leaving:							



City of Evanston annual Liquor License Application

ADDITIONAL INFORMATION:								
A. If you are a Manager, are you BASSET (Beverage Alcohol Sellers and Servers Education and Training) certified?								
 If yes, please attach a copy of your BASSET certification. If no, when do you expect to complete BASSET certification: 	☐ N/A ☐ Yes ☐ No							
 B. Have you completed the fingerprint/background check process with the City of Evanston? If no, when do you expect to submit fees and fingerprints? 	☐ Yes	□No						
C. Have you ever been convicted of violating a Local City Code, in any jurisdiction?	☐ Yes	□No						
D. Have you ever forfeited an appearance bond for any Federal, State, or Local violations?	☐ Yes	☐ No						
E. Has any license previously issued to you by Federal, State, or Local authorities been revoked?	☐ Yes	☐ No						
F. Were you ever convicted of a felony? If yes, please provide date, details and final disposition.	☐ Yes	□No						
 G. Were you ever arrested or convicted of any alcohol/drug related violation, including but not limited to, driving under the influence (DUI)/driving while intoxicated (DWI), public intoxication, or underage consumption of alcohol? If yes, please provide date, location, details regarding the violation, and final disposition. 	☐ Yes	□No						
H. Have you had a liquor license in any other jurisdiction. ☐ Yes ☐ No If Yes, set forth all details regarding same.								
If you have answered "Yes" to (C), (D), (E) (F) (G) or (H), attach a summary of explanation which include forfeiture, convictions and/or revocation.	date and plac	ce of						



WAIVER AND RELEASE STATEMENT

Please read these statement carefully and be aware by agreeing to allow the City of Evanston to investigate your residential, employment, and criminal background, you will be waiving and releasing all claims for damage you might sustain arising out of the criminal background check and review, which include fingerprinting.

I AUTHORIZE an investigator or other duly accredited representative of the City of Evanston or its agent to obtain any information relating to my activities from individuals, schools, residential management agents, employers, criminal justice agencies, retail business establishments, or other sources of information. This information may include, but is not limited to, my residential, achievement, performance, attendance, disciplinary, and employment history. I specifically authorize an investigation regarding my criminal history. I AUTHORIZE custodians of records and other sources of information pertaining to me to release such information upon request of the investigator or other duly accredited representative of the City of Evanston or its agents authorized above, regardless of any previous agreements to the contrary. I WAIVE and relinquish all claims I may have against the City of Evanston and its officers, agents, servants, and employees, as a result of participating in this background check. I had my legal counsel review this application prior to submission ☐ YES \square NO I SWEAR (OR AFFIRM) that the statements contained herein are true and correct. I understand that a liquor license is a personal privilege, not a right. I shall not violate any of the ordinances of the City of Evanston 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 I have read, understand, and shall abide by Title 3, Chapter 4 of Evanston City Code, the Liquor Control Regulations for the City of Evanston. I understand and agree that if I violate any local or state ordinance regarding alcohol sales, consumption, or possession, while I have an Evanston liquor dealer's license that said license may be revoked or suspended. I understand and agree that pursuant to Section 3-4-17 of the City Code, that I am strictly liable for every act or omission of violation of Title 3, Chapter 4 of the City Code or the Illinois Liquor Control Act. If any information submitted on this application is found to be untruthful, I understand and agree that my license application may be rejected. I understand and agree that I am responsible for the payment of court reporter fees if a license suspension/revocation hearing is convened relative to my license, and that if I fail to pay such fees (if any), my license (if granted) shall not be renewed. I understand that if my license is granted, that the renewal privilege granted in Title 3, Chapter4 of the City Code shall not be construed as a vested right. Shareholder/Site Manager Signature Date State of County of

Notary Signature

Subscribed and Sworn to before me this ______ day of _______, 20

(seal)