



GENERAL INSTRUCTIONS

- APPLICATION FORM:** The form must be completed in its entirety. Please print neatly or type. Corporate applicants must also provide the signature of the authorized representative. Applicants must complete and sign the affidavit provided. Supplement forms A, B, and C are to be submitted with application. Supplement C must be completed by each Owner, Shareholder and/or Manager. Please submit a complete application with all required attachments at one time.
- LIQUOR CONTROL CODE:** All applicants are expected to review the Evanston Liquor Control Code and the Illinois State liquor codes before applying for a license. Information provided by staff and in written documentation is for informational purposes only and is not to be relied on in lieu of a full review of the liquor code.
- BACKGROUND INVESTIGATION FORM:** Each shareholder and/or 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 online via credit card or by visiting the liquor permits page at www.cityofevanston.org/residents/permits-licenses.
- After you've paid online, you should have a fingerprinting session by contacting Catalina De La Rosa at the Evanston Police Department at 847-866-5023.
- 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.

4. LIQUOR LIABILITY INSURANCE (Dram Shop):

- Each applicant must acquire Liquor Liability Insurance (Dram Shop) in the amount of \$1,000,000.
- City of Evanston is to be named as an additional insured with respect to the General Liability and Liquor Liability policies. Endorsements should **not** be pursuant to a written agreement.
- Please review City of Evanston liquor code section 3-4-4 for further information.
- Evidence of the insurance must be attached in the form of an ACORD Certificate of Insurance at the time of application submittal.
- The ACORD Liquor Liability Insurance Certificate should name the City of Evanston as Certificate Holder and Additional Insured. Additional insured language must read exactly as follows: "**City of Evanston is an Additional Insured with respect to General Liability and Liquor Liability pursuant to City of Evanston code section 3-4-4**". Licenses will not be granted if this exact language is not contained in the description of operations.

5. SURETY BOND

- Each applicant is required to provide a surety bond in the amount of \$2,500. Surety bonds can be acquired through your insurance agent or broker.
- Such bond shall provide against any violation by the principal, his agents or employees of any of the terms of the City Code, rules and regulations now in force or which may hereafter be in force in the City affecting the operation of such business.

6. OTHER DOCUMENTS AND INFORMATION REQUIRED

- Payment of the first/initial annual license fee
- Articles of Incorporation/Organization
- Evidence of Good Standing with State of Illinois
- A copy of Dram Shop/Liquor Liability Insurance listing City of Evanston as Certificate Holder **AND** Additional Insured
- BASSET Training Certification for all Site Managers and Owners
- If a restaurant or other entity offering onsite consumption, a copy of the proposed menu
- A copy of the applicants lease
- Floor Plan of Liquor Establishment
- Current business/food establishment license issued by the City of Evanston, (once received for new businesses)
- A copy of your Illinois State Liquor License (once received for new businesses)
- Listing of all goods, wares, and merchandise (if applicable)



City of Evanston Application for Liquor License

Date:	<input type="checkbox"/> New business <input type="checkbox"/> Change of Ownership/Corporation <input type="checkbox"/> Change of License Class	Liquor Class:	Initial license Fee:
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1. APPLICANT

A. Corporation name:			
B. Business name:			
C. Previous business name (if <i>dba</i> changed):			
D. Business address (city, state, zip code):			
E. Business telephone:	F. Business website:	G. Business Email:	H. Illinois business tax number:

2. BUSINESS ESTABLISHMENT LOCATION INFORMATION

A. Address applying for liquor license (exact street address):	Evanston	Zip code:
B. Full description of the location including floor layout, specific floors, rooms, etc. (attach a site plan):	C. Is the business required to be located within the "Retail Package Store Area"? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, is it located within the "Retail Package Store Area"? <input type="checkbox"/> Yes <input type="checkbox"/> No	

3. BUSINESS TYPE & LIQUOR SERVICE INFORMATION

A. Business type: <input type="checkbox"/> Restaurant <input type="checkbox"/> Hotel <input type="checkbox"/> Package Store <input type="checkbox"/> Grocery Store <input type="checkbox"/> BrewPub			
<input type="checkbox"/> Craft Distillery <input type="checkbox"/> Craft Brewery <input type="checkbox"/> Craft Winery <input type="checkbox"/> Other (explain):			
Describe the nature of the business / kind of business:			
Liquor to be served and/or sold: <input type="checkbox"/> Alcoholic liquor <input type="checkbox"/> Beer & Wine only <input type="checkbox"/> Beer Only <input type="checkbox"/> Wine only			
Days and times liquor is served: <input type="checkbox"/> Sunday to <input type="checkbox"/> Monday to <input type="checkbox"/> Tuesday to <input type="checkbox"/> Wednesday to <input type="checkbox"/> Thursday to <input type="checkbox"/> Friday to <input type="checkbox"/> Saturday to			
Liquor will served or sold by: <input type="checkbox"/> Glass <input type="checkbox"/> Bottle <input type="checkbox"/> Can <input type="checkbox"/> Waitstaff <i>and/or</i> <input type="checkbox"/> Over the counter			

4. BUSINESS SPECIFIC INFORMATION (for restaurants)	
A. Does the applicant seek to sell and/or serve liquor upon the premises of a restaurant? If your response is "No," skip this section and proceed to section 5.	<input type="checkbox"/> yes <input type="checkbox"/> no
B. Does the restaurant premises maintain and conduct business to the public as an establishment where meals are actually and regularly served?	<input type="checkbox"/> yes <input type="checkbox"/> no
C. Does the restaurant provide adequate and sanitary kitchen and dining room equipment and capacity, with sufficient employees to prepare, cook, and serve suitable food?	<input type="checkbox"/> yes <input type="checkbox"/> no
D. How many tables are or will be in the restaurant? What is the seating capacity?	
E. Is there an existing or proposed menu? If your response is "no", please create a proposed menu before applying. If your response is "Yes," please attach the menu.	<input type="checkbox"/> yes <input type="checkbox"/> no
F. Does the restaurant currently hold or has applied for a City of Evanston food license? If your response is "Yes," what is the expected issue date?	<input type="checkbox"/> yes <input type="checkbox"/> no

5. BUSINESS SPECIFIC INFORMATION (for hotels)	
A. Does the applicant seek to sell and/or serve liquor upon the premises of a hotel? If your response is "No," skip this section and proceed to section 6.	<input type="checkbox"/> yes <input type="checkbox"/> no
B. Does the hotel premises maintain and conduct business to the public as an establishment where meals are actually and regularly served?	<input type="checkbox"/> yes <input type="checkbox"/> no
C. Does the hotel provide adequate and sanitary kitchen and dining room equipment and capacity, with sufficient employees to prepare, cook, and serve suitable food?	<input type="checkbox"/> yes <input type="checkbox"/> no
D. Does the hotel have at least 50 regular rooms for transients?	<input type="checkbox"/> yes <input type="checkbox"/> no
E. Does the hotel currently hold or has applied for a City of Evanston food license? If your response is "Yes," what is the expected issue date?	<input type="checkbox"/> yes <input type="checkbox"/> no

6. BUSINESS SPECIFIC INFORMATION (for package stores)	
A. Does the applicant seek to sell liquor upon the premises of a package store? If your response is "No," skip this section and proceed to section 7.	<input type="checkbox"/> yes <input type="checkbox"/> no
B. Is the package store premises located in the "retail package store area" as defined by the attached map?	<input type="checkbox"/> yes <input type="checkbox"/> no
C. Is the package store used only for retail sale of alcoholic liquor in original packages to persons at least 21 years of age for consumption off the premises?	<input type="checkbox"/> yes <input type="checkbox"/> no
D. Has the applicant reviewed the Liquor Code definition of a "package store"?	<input type="checkbox"/> yes <input type="checkbox"/> no

7. BUSINESS SPECIFIC INFORMATION (for grocery stores)	
A. Does the applicant seek to sell and liquor upon the premises of a grocery store and/or combination store? If your response is "No," skip this section and proceed to section 8.	<input type="checkbox"/> yes <input type="checkbox"/> no
B. Does the grocery store premises consist of a grocery store and combination store under one roof?	<input type="checkbox"/> yes <input type="checkbox"/> no
C. Does the grocery store provide a minimum of 12,000 square feet of production, preparation, and display for product sales? Approximately how many square feet are provided? sq.ft.	<input type="checkbox"/> yes <input type="checkbox"/> no
D. Does the grocery store currently hold or has applied for a City of Evanston food license? If your response is "Yes," what is the expected issue date?	<input type="checkbox"/> yes <input type="checkbox"/> no

8. BUSINESS SPECIFIC INFORMATION (BrewPub)	
A. Does the applicant seek to sell and liquor upon the premises of a BrewPub? If your response is "No," skip this section and proceed to section 9.	<input type="checkbox"/> yes <input type="checkbox"/> no
B. Does the brewpub premises maintain and conduct business to the public as an establishment where meals are actually and regularly served?	<input type="checkbox"/> yes <input type="checkbox"/> no
C. Does the brewpub provide adequate and sanitary kitchen and dining room equipment and capacity, with sufficient employees to prepare, cook, and serve suitable food?	<input type="checkbox"/> yes <input type="checkbox"/> no
D. How many tables are or will be in the brewpub? _____ What is the seating capacity? _____	
E. Is there an existing or proposed menu? If your response is "no", please create a proposed menu before applying. If your response is "Yes," please attach the menu.	<input type="checkbox"/> yes <input type="checkbox"/> no
F. Does the brewpub currently hold or has applied for a City of Evanston food license? If your response is "Yes," what is the expected issue date? _____ If "no" provide date when you will apply: _____	<input type="checkbox"/> yes <input type="checkbox"/> no

9. BUSINESS SPECIFIC INFORMATION (Craft Distillery)	
A. Does the applicant seek to sell and liquor upon the premises of a Craft Distillery? If your response is "No," skip this section and proceed to section 10.	<input type="checkbox"/> yes <input type="checkbox"/> no
B. Does the craft distiller possess a valid craft distiller license from the State of Illinois? If "No", Please provide date you intend to obtain you license: _____	<input type="checkbox"/> yes <input type="checkbox"/> no
C. Does the craft distiller intend to have a tasting room? If "Yes", What is the seating capacity? _____	<input type="checkbox"/> yes <input type="checkbox"/> no
D. Has the applicant reviewed the Liquor Code definition and class description of a "craft distiller"?	<input type="checkbox"/> yes <input type="checkbox"/> no

10. BUSINESS SPECIFIC INFORMATION (Craft Brewery)	
A. Does the applicant seek to sell and liquor upon the premises of a Craft Brewery? If your response is "No," skip this section and proceed to section 11.	<input type="checkbox"/> yes <input type="checkbox"/> no
B. Does the craft brewery possess a valid craft distiller license from the State of Illinois? If "No", Please provide date you intend to obtain you license: _____	<input type="checkbox"/> yes <input type="checkbox"/> no
C. Does the craft brewery intend to have a tasting room? If "Yes", What is the seating capacity? _____	<input type="checkbox"/> yes <input type="checkbox"/> no
D. Does the craft brewery intend to offer retail sale of beer for on site consumption? If "Yes" you must offer food service. Please upload a proposed menu.	<input type="checkbox"/> yes <input type="checkbox"/> no
E. Is there an existing or proposed menu? If your response is "Yes," please attach the menu.	<input type="checkbox"/> yes <input type="checkbox"/> no
F. Does the craft brewery currently hold or has applied for a City of Evanston food license? If your response is "Yes," what is the expected issue date? _____	<input type="checkbox"/> yes <input type="checkbox"/> no
G. Has the applicant reviewed the Liquor Code definition and class description of a "craft brewery"?	<input type="checkbox"/> yes <input type="checkbox"/> no

11. BUSINESS SPECIFIC INFORMATION (Craft Winery)	
A. Does the applicant seek to sell and liquor upon the premises of a Craft Winery? If your response is "No," skip this section and proceed to section 12.	<input type="checkbox"/> yes <input type="checkbox"/> no
B. Does the craft winery possess a valid craft distiller license from the State of Illinois? If "No", Please provide date you intend to obtain you license: _____	<input type="checkbox"/> yes <input type="checkbox"/> no
C. Does the craft winery intend to have a tasting room? If "Yes", What is the seating capacity? _____	<input type="checkbox"/> yes <input type="checkbox"/> no
D. Does the craft winery intend to offer retail sale of beer for on site consumption? If "Yes" you must offer food service. Please upload a proposed menu.	<input type="checkbox"/> yes <input type="checkbox"/> no
E. Is there an existing or proposed menu? If your response is "Yes," please attach the menu.	<input type="checkbox"/> yes <input type="checkbox"/> no
F. Does the craft winery currently hold or has applied for a City of Evanston food license? If your response is "Yes," what is the expected issue date? _____	<input type="checkbox"/> yes <input type="checkbox"/> no
G. Has the applicant reviewed the Liquor Code definition and class description of a "craft winery"?	<input type="checkbox"/> yes <input type="checkbox"/> no

12. PREMISES OWNERSHIP INFORMATION	
A. Does the corporation own the premises for which this liquor license is being sought? If your response is "Yes," attach a copy of ownership and proceed to section 13.	<input type="checkbox"/> yes <input type="checkbox"/> no
B. Does the corporation possess a lease on such premises covering the full period for which such liquor license is sought?	<input type="checkbox"/> yes <input type="checkbox"/> no
C. What is the period covered by the lease? _____ to _____	
D. What is the name of the Landlord? _____	
E. What is the address of the Landlord? <i>(please include city, state, and zip code.)</i> _____	

13. ELIGIBILITY QUESTIONS	
A. Has the owner or any relative had a business or liquor license revoked?	<input type="checkbox"/> yes <input type="checkbox"/> no
B. Is the owner <i>disqualified</i> to receive a license by reason of any matter or thing contained in Title 3, Chapter 4 of the City of Evanston Code, other ordinance, and laws of the State of Illinois or other ordinances of the City of Evanston?	<input type="checkbox"/> yes <input type="checkbox"/> no
C. Does the owner <i>agree</i> not to violate any laws of the State of Illinois, or of the United States, or any ordinance of the City of Evanston in the conduct of his or her place of business?	<input type="checkbox"/> yes <input type="checkbox"/> no
D. Does the owner/officer (s) owe any debt or unpaid tax to the City of Evanston? If yes, explain: _____	<input type="checkbox"/> yes <input type="checkbox"/> no
E. Has the owner received assistance in preparing this application? If the response is "Yes," please provide the information below.	<input type="checkbox"/> yes <input type="checkbox"/> no
name	address
	telephone
	relationship

City of Evanston Annual Liquor License Application

I, the Applicant and/or duly appointed representative, have reviewed the prepared application and accept it as true and correct to the best of my knowledge. I agree to report any changes to the contents of this application, whether they occur before or after a license is issued, to the City of Evanston within 30 days. I agree to notify the City of Evanston of any and all changes in corporate stockholder shares, corporate officers and directors. **Further, I understand that the liquor license issued is not transferrable. It is understood that the acceptance and deposition of the fee herein tendered *does not* constitute acceptance of the liquor license application.**

Signature of Applicant

Date

City of Evanston Liquor License Application

AFFIDAVIT

State of _____)
County of _____) SS

The undersigned hereby makes application for a Class _____ liquor license. I / we swear (or affirm) that I / we will not violate any of the ordinances of the City of Evanston or 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; that I have read and understand Title 3, Chapter 4 of the Evanston City Code; and that the statements contained in this application are true and correct.

Signature of Applicant

Signature of Applicant

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

(seal)

Notary Public

CORPORATE INFORMATION FORM

(Supplement A)

Applicants must file business with Secretary of State:

Name of Corporation/Partnership:

Corporate Address:

Corporate Ph #:	Corporate Email:	FEIN:
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Business Status:

Date Corporation/Partnership was Organized:

State Articles of Incorporation/Organization filed:

Date Articles of Incorporation/Organization **filed** with Secretary of State:

Date Certification of Incorporation/Organization was **issued** by Secretary of State:

Are there any amendments to Articles of Incorporation? <i>(if yes, provide date filed)</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	<u>Date Amendment Filed</u>
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What are the total shares of stock created by this Corporation?

H. List stockholders with 5% or more in holdings *(corporations with a long list, attach copy of list):*

Name	Percentage of Stock

Has Corporation attached an organization chart /listing with Names, Title, Address and Percentage of Stock of Corporation officers and directors? If no, explain:	<input type="checkbox"/> Yes <input type="checkbox"/> No
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Has the Corporation attached evidence of Good Standing with the State of Illinois? If no, explain:	<input type="checkbox"/> Yes <input type="checkbox"/> No
--	--

Has the Corporation attached a file-stamped copy of Articles of Incorporation/organization ? If no, explain:	<input type="checkbox"/> Yes <input type="checkbox"/> No
--	--

Explain any existing options & names of persons concerned as they pertain to purchase or acquire stock at a future date:

What is the objective of Corporation?

Has a <i>Shareholder and/or Site Manager Background Form</i> been completed for each person holding (5%) or more stock in this corporation?	<input type="checkbox"/> Yes <input type="checkbox"/> No
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CITY OF EVANSTON
Cook County, Illinois

CORPORATE SURETY BOND
(Supplement B)

Surety Bond #: _____

KNOW ALL MEN BY THESE PRESENTS, THAT THE UNDERSIGNED, _____
of the City of _____, County of _____, and State of _____, a corporation organized and existing
under the laws of the State of _____, as Principal and _____, organized and existing under the law of the
State of _____, and licensed to do business in of the City of Evanston, County of Cook, and State of Illinois, hereinafter
called the sureties, are held and firmly bound unto the City of Evanston, a municipal corporation, in the sum of TWENTY-FIVE
HUNDRED AND NO/100 DOLLARS (\$2,500) for the payment whereof to the City of Evanston, the principal and said sureties bind
themselves, their heirs, executors, administrators, and assigns jointly and severally firmly by these presents. Signed, sealed, and dated
this _____ DAY OF _____, 20_____.

WHEREAS the above named principal has been granted a license as an alcoholic liquor dealer by the Liquor Control
Commissioner of the City of Evanston under the provision of the Title 3, Chapter 4, relating to the Sale of Alcoholic Liquor, of the
Municipal Code of the City of Evanston, recodified January 2014, and amendments thereto, which license will expire on the _____ DAY
OF _____, 20_____.

NOW, THEREOF, the Condition of the foregoing obligation is such that if the said principal, his agents and employees, shall
comply with all the provisions of Title 3, Chapter 4, of the Municipal Code of the City of Evanston hereinbefore described, and any and
all other ordinances of the City of Evanston relating to the operation of the business of Alcoholic Liquor, as defined in said ordinance;
and if said principal, his agents or employees shall not violate said ordinance or any ordinances, rules or regulations now in force or
which may hereafter be in force in the City of Evanston affecting the operation of said business, then this obligation shall be void;
otherwise it shall remain in full force and effect.

City of Evanston Annual Liquor License Application

PRINCIPAL

Signed, sealed, and dated this _____ DAY OF _____, 20____.

By:

Title: _____ (affix seal)

State of _____)

County of _____)

SURETIES

Signed, sealed, and dated this _____ DAY OF _____, 20____.

By:

By:

Title:

Title:

State of _____)

State of _____)

County of _____)

County of _____)

(affix seal)

(affix seal)

State of _____)

County of _____) SS

ACKNOWLEDGEMENT OF CORPORATE SURETY

The foregoing instrument was acknowledged before me
by _____

this _____ day of _____, 20____.

Notary Signature

(affix seal)

SHAREHOLDER and/or SITE MANAGER BACKGROUND FORM

(Supplement C)

Managers and 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 Name:

Business Name:

PERSONAL INFORMATION

First Name:		Last Name:		Middle Initial:	
Title: <input type="checkbox"/> Sole Owner <input type="checkbox"/> Partner <input type="checkbox"/> Corp Officer <input type="checkbox"/> Site Manager <input type="checkbox"/> Director <input type="checkbox"/> Other: (_____)				% of Stock Ownership:	
Current Residential Address:		Suite/Apt.:	City:	State:	Zip:
Home Phone:	Work Phone:	Cell Phone:	E-mail:		
Date of Birth (MM/DD/YYYY):		Place of Birth (City, State and Country):			
Are you a citizen of the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No, I am a citizen of:					
Naturalized Citizen: <input type="checkbox"/> Yes <input type="checkbox"/> No		Naturalization Information: Date: City: State: County:			

RESIDENCE/ADDRESS HISTORY (list your present or most recent residence first)

1. Address:	City:	State:	Zip:
2. Address:	City:	State:	Zip:
3. Address:	City:	State:	Zip:

EMPLOYMENT HISTORY (list your present or most recent employer first)

1. 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):			
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. N/A
- If no, when do you expect to complete BASSET certification: _____ Yes No

B. Have you completed the fingerprint/background check process with the City of Evanston? Yes No

- If no, when do you expect to submit fees and fingerprints? _____

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? Yes No
If yes, please provide date, details and final disposition.

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? Yes No

If yes, please provide date, location, details regarding the violation, and final disposition.

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 date and place of forfeiture, convictions and/or revocation.

City of Evanston Annual Liquor License Application

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 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, Chapter 4 of the City Code shall not be construed as a vested right.

Shareholder/Site Manager Signature

Date

State of _____)
) SS.
County of _____)

Subscribed and Sworn to before me this _____ day of _____, 20_____.

Notary Signature

(seal)

City of Evanston Annual Liquor License Application

**City of Evanston
Liquor License Application Checklist**

This checklist will assist you in submitting a complete application packet:

<i>(Check items to confirm they are attached)</i>	√	For Office Use Only
• Application	<input type="checkbox"/>	
• Application Fee	<input type="checkbox"/>	
• Fingerprinting Processing Fee(s)	<input type="checkbox"/>	
• Corporate Information Form	<input type="checkbox"/>	
• Corporate Officers Listing	<input type="checkbox"/>	
• Organization chart	<input type="checkbox"/>	
• Articles of Incorporation/Organization	<input type="checkbox"/>	
• Evidence of Good Standing with State of Illinois	<input type="checkbox"/>	
• Shareholder and/or Site Manager Background Form and Reference Sheet	<input type="checkbox"/>	
• Corporate Surety Bond Form	<input type="checkbox"/>	
• Dram Shop Insurance / Liquor Liability Certification listing City of Evanston as Certificate Holder AND Additional insured	<input type="checkbox"/>	
• Menu	<input type="checkbox"/>	
• Floor Plan of Establishment	<input type="checkbox"/>	
• Listing of goods, wares, and merchandise currently on hand (if applicable)	<input type="checkbox"/>	
• Current business/food establishment license issued by the City of Evanston (if applicable)	<input type="checkbox"/>	
• List of existing Illinois State and Local retail liquor license (include license type, business name, address, City, and State) (if applicable)	<input type="checkbox"/>	
• Lease Agreement or Proof of Property Ownership	<input type="checkbox"/>	
• BASSET Certification Acquired or Pending	<input type="checkbox"/>	

Liquor Tax Acknowledgment Form

A tax is hereby levied and imposed upon the privilege of purchasing beverages containing alcoholic liquor at a lawfully licensed liquor dealer in the City for consumption on or off the premises at the rate of six percent (6%) of the purchase price, exclusive of any other tax charged for such alcoholic liquor.

All Home Rule Taxes have a standardized due date of the 20th day following the month in which the taxable activity occurred. A Home Rule Tax return is required even if no sales were made for the month. All late forms are assessed a 10% penalty on the principal amount due per month.

Monthly liquor tax returns can be submitted online, in-person or via mail.

I acknowledge I have read the above statement

Print Name

Date

Signature

