

Would you like your business listed in the Village of Winthrop Harbor's Business Directory? ___ Yes ___ No

Name, Address and Date of Incorporation with State of Illinois:

Location of place of business where license is to be utilized: _____

New
applic-
ants
only

Have you ever applied for a liquor license before?

- Yes
 No

If yes, where? _____

When? _____ Was License approved? ___ Yes ___ No

If License was approved, how long did you operate under such license?

_____ Months _____ Years

I (We) Understand that the license hereby applied for shall become null and void if there is any change in ownership or corporate structure. I (We) further understand this license is non-transferable between owner(s) or locations.

I (We) certify that all the information given is true and correct to the best of my (our) knowledge.

Applicant's Signature(s):

1. _____ Date: _____

2. _____ Date: _____

3. _____ Date: _____

4. _____ Date: _____

Notary Certification (Mandatory)

The foregoing signature(s) were executed before me this _____
Day of _____, 200__

_____ Notary Public

The following items must accompany your liquor license application:

_____ **Fingerprints of all Principals** (new applicants only)

_____ **\$500.00 Liquor License Bond**

_____ **Articles of Incorporation** (non-residents or changes)

_____ **Copy of Building Lease**

Owner(s) Information

*Owner of Premises: _____

*Are you the sole owner of the business for which this license is applied?

- YES** (If yes, please fill out only #1 below)
 NO*If no, list all partners, or if a corporation, list all officers of the corporation and the percentage of ownership of each:

1. _____ Percentage _____ %

Address: _____

Ph#: _____ How long at this address? _____

SS#: _____ DOB: _____ DL#: _____

Place of birth: _____ US Citizen? YES/NO if No, date naturalized: _____

*How long at this address? _____

*Naturalized Citizen: _____ YES _____ NO

*If yes, place of naturalization: _____

*Have you ever been convicted of a felony or immoral conduct? _____ YES _____ NO

If yes, explain where: _____

2. _____ Percentage _____ %

Address: _____

Ph#: _____ How long at this address? _____

SS#: _____ DOB: _____ DL#: _____

Place of birth: _____ US Citizen? YES/NO if No, date naturalized: _____

*How long at this address? _____

*Naturalized Citizen: _____ YES _____ NO

*If yes, place of naturalization: _____

*Have you ever been convicted of a felony or immoral conduct? _____ YES _____ NO

If yes, explain where: _____
3. _____ Percentage _____ %

Address: _____

Ph#: _____ How long at this address? _____

SS#: _____ DOB: _____ DL#: _____

Place of birth: _____ US Citizen? YES/NO if No, date naturalized: _____

*How long at this address? _____

*Naturalized Citizen: _____ YES _____ NO

*If yes, place of naturalization: _____

*Have you ever been convicted of a felony or immoral conduct? _____ YES _____ NO

If yes, explain where: _____

4. _____ Percentage _____ %

Address: _____

Ph#: _____ How long at this address? _____

SS#: _____ DOB: _____ DL#: _____

Place of birth: _____ US Citizen? YES/NO if No, date naturalized: _____

*How long at this address? _____

*Naturalized Citizen: _____ YES _____ NO

*If yes, place of naturalization: _____

*Have you ever been convicted of a felony or immoral conduct? _____ YES _____ NO

If yes, explain where: _____

***Required information for Liquor/Tobacco Application**

For Village Use only:

Liquor License

These premises was inspected on: _____

Approval Denial: Date: _____

By: _____ WHPD

Based on my inspection, I recommend:

Approval Denial:

By: _____ WHFD

This Application approved this _____ Day of _____ 20__

Mayor and Liquor Commissioner

These premises was inspected on: _____

Based on my inspection, I recommend:

Approval Denial:

By: _____ Building Administrator/Inspector

This Application approved this _____ Day of _____ 20__

Building Administrator/Inspector

For Village Use only:

Tobacco License

Approved: _____ Denied _____ Date: _____

By: _____

This premises was inspected on: _____

Based on my inspection, I recommend: Approval: _____ Denial: _____

By: _____ WH Building Department

This Application approved this _____ Day of _____ 20__

Mayor of the Village of Winthrop Harbor

FOOD LICENSE

The following Departments have been notified:

Police Department Public Works Fire Bldg Dept.

Received By: _____ Amt Rec: _____ Date: _____

STATE OF ILLINOIS)
)
COUNTY OF LAKE)

SS:

**PERSONAL NON-SURETY BOND
FOR TOBACCO SALES LICENSE**

KNOWN BY ALL THOSE PRESENT:

FIRST: That the undersigned is a signatory to an application for a license to sell tobacco in the Village of Winthrop Harbor, and submits this bond in support of that application;

SECOND: That the undersigned has received a copy of the Village's Tobacco Ordinance and understands the requirements of the same;

THIRD: That the undersigned does hereby personally agree and undertake to ensure that the business enterprise which may receive the license applied for herewith will at all times comply in all respects with the requirements of the said Tobacco Ordinance;

FOURTH: That this Bond is submitted to the Village of Winthrop Harbor by the undersigned as and for evidence of the undersigned persons' agreement to ensure the applicant's faithful performance of all obligations imposed by the said Tobacco Ordinance, and to stand as security for the payment of all fines and penalties that may be imposed under the said Ordinance during the term of the license applied for herewith;

FIFTH: That aside from the personal guaranty of the undersigned reflected by the signature on this instrument, no surety or other surety is pledged by the undersigned herewith;

SIXTH: That the extent of the obligation of the undersigned on this bond is limited to the penal sum of FIVE HUNDRED (\$500.00) DOLLARS.

IN WITNESS WHEREOF, the undersigned has set his or her hand and seal on the date below:

_____ Date: _____

FORM AND SUBSTANCE OF BOND IS ACCEPTED AND APPROVED:

APPROVED:

ATTEST:

MAYOR

VILLAGE CLERK