

CITY OF COLLINSVILLE, ILLINOIS

APPLICATION FOR CLASS G LIQUOR LICENSE

Class G Liquor Licenses are issued for special events and temporarily authorize the retail sale for consumption on the premises of alcoholic liquors in any non-residential location for a period of three (3) days or less.

No person shall have temporary license or combination of temporary licenses under this section for a total of more than six (6) days in any 12-month period.

The license fee for a Class G licenses is \$100.00 per day. Licenses will only be issued to government entities and civic, patriotic, fraternal, educational, religious or benevolent organizations which have been in active and continuous existence for at least one year in the same location in the City prior to the making of this application and which in good faith have maintained a membership role during such one year period.

Applicants shall submit proof of adequate dram shop insurance as required by the Illinois Liquor Control Act of 1934, as it is now or may hereafter be amended, prior to being issued such license. Applications must be submitted at least four (4) weeks prior to the date(s) desired. This requirement may be waived by the Liquor Commission should he find that sufficient time remains prior to the event for the City and the State to process the application.

The undersigned hereby respectfully makes application for a Class G license to sell alcoholic liquors at retail, under existing Ordinances and regulations of the City of Collinsville, and in support submits the following information.

1. Name and residence of applicant (in case of partnership or corporation, the name and residence of each partner or principal officers of the partnership or corporation).

2. Place of Birth (or naturalization): _____
a) Date of Birth: _____
b) Social Security Number: _____
c) Drivers License Number/State: _____
3. The applicant is a citizen of the United States and a resident of the City of Collinsville, Illinois, or one year immediately prior to the date of this application.
_____ Yes _____ No
4. State whether applicant has ever been convicted of a felony or misdemeanor. If yes, explain on separate sheet:
_____ Yes _____ No
5. State whether applicant has ever had a license issued to sell alcoholic liquors at retail revoked. If yes, explain on separate sheet.
_____ Yes _____ No

Applicant herein understands and agrees that any license issued by virtue of this application may be revoked without notice in the event of any false statement herein, or in the vent of any violation of the laws of the State of Illinois or of the United States and existing Collinsville Ordinances and regulations.

State dates of the special event and what event will be held at this address:

I hereby swear (of affirm) that I will not violate any of the laws of the State of Illinois or of the United States, or of the City of Collinsville in the operation of the special event described herein and for which any license may be granted hereunder.

Signature of Applicant

Address of Applicant

Phone Number of Applicant

TO BE ATTACHED TO APPLICATION::

- License Fee of \$100 per day
- Certificate of Dram Shop Insurance

STATE OF ILLINOIS)
) SS
COUNTY OF MADISON)

Subscribed and sworn to before me this _____ day of _____, _____.

Notary Public

(NOTARY SEAL)

-----FOR OFFICE USE ONLY-----

License Number: _____
Class of License: _____
Receipt Number: _____
Amount Paid: _____
Quarterly Payments: YES NO
Date Paid: _____
Licensee: _____
Business Name: _____
Address: _____
APPROVED:

Liquor Commissioner

Date: _____