

APPLICATION  
FOR  
LIQUOR LICENSE  
REQUIRED BY  
CITY OF MASCOUTAH

TO BE FILED WITH  
THE  
CITY CLERK

License No. \_\_\_\_\_  
Date Issued \_\_\_\_\_  
Expires \_\_\_\_\_  
Checked By \_\_\_\_\_  
Approved By \_\_\_\_\_  
Date \_\_\_\_\_  
Order to Receive No. \_\_\_\_\_  
Amount \_\_\_\_\_  
 Cash  Bank Draft  
 Cashier's Check  Money Order  
 Certified Check  \_\_\_\_\_

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**IMPORTANT – READ CAREFULLY – PERSONAL CHECKS NOT ACCEPTED UNLESS CERTIFIED**

This application properly completed and signed must be filed with the City Clerk and must be accompanied by a remittance in the proper amount, made payable to the CITY OF MASCOUTAH. This remittance must be in the form of a Business, Certified or Cashier's Check, United States Postal Money Order, Express Money Order, or Licensed Currency Exchange Money Order, Bank Draft, Bank Money order, or Personal Money Order. Cash will be accepted.

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The undersigned individual, partnership, firm, association, club or corporation hereby makes application for a Liquor License and submits the following information: **(Please type or print plainly.)**

1. Applicant: (a) Name: \_\_\_\_\_  
(b) Address: \_\_\_\_\_  
(c) Telephone: \_\_\_\_\_  
(d) Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_  
(e) Race: \_\_\_\_\_ Sex: \_\_\_\_\_  
(f) Age: \_\_\_\_\_  
(g) U.S. Citizen: Yes \_\_\_\_\_ No \_\_\_\_\_  
(h) If naturalized, give date and place of naturalization:  
Date: \_\_\_\_\_ Place: \_\_\_\_\_
2. Applicant's Business: (a) Name: \_\_\_\_\_  
(b) Address: \_\_\_\_\_  
(c) IBT No.: \_\_\_\_\_  
(c) Telephone: \_\_\_\_\_  
(d) Character of Business:  Restaurant  Grocery  Hotel  
 Tavern  Amusement Place  Country Club  
 Package Store  Department Store  Social Club  
 Other \_\_\_\_\_
3. (a) Number of current Liquor License: \_\_\_\_\_  
(b) Date Issued: \_\_\_\_\_ (c) Date Expires: \_\_\_\_\_
4. (a) If premises is being leased, give name, address and phone number of landlord:  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
(b) Date lease expires: \_\_\_\_\_
5. Give date you began liquor sales at this location: \_\_\_\_\_
6. (a) Give date of applicants first request for a City Liquor License: \_\_\_\_\_  
(b) Disposition of application: Granted \_\_\_\_\_ Denied \_\_\_\_\_ Withdrawn \_\_\_\_\_  
(c) Address of applicant when first application for a City Liquor License was made: \_\_\_\_\_  
\_\_\_\_\_

7. Are alcoholic liquors stored, but not sold, at any location other than the one given above? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, give location: \_\_\_\_\_
8. (a) Applicant's Retailers Occupation Tax (ROT) Registration Number: \_\_\_\_\_  
(b) Are you delinquent in payment of Retailer's Occupational Tax (Sales Tax)? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, give reasons why \_\_\_\_\_
9. Applicant's document locator number on Federal Special Tax Stamp: \_\_\_\_\_
10. Are you delinquent under the Cash Beer Law? Yes \_\_\_\_\_ No \_\_\_\_\_. If yes, give reasons why: \_\_\_\_\_  
\_\_\_\_\_
11. If retailer, are you delinquent under the thirty (30) day credit law? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, give reason why: \_\_\_\_\_
12. If distributor, are you delinquent under the fifteen (15) day credit law? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, give reason why: \_\_\_\_\_
13. Have you ever made application for a liquor license which has been denied? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, give reason why: \_\_\_\_\_
14. (a) Have you ever had any previous liquor license suspended or revoked? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, give reason why: \_\_\_\_\_  
(b) Where? City: \_\_\_\_\_ County: \_\_\_\_\_
15. Have you ever been convicted of a gambling offense or felony? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, give county of conviction and particulars thereof: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
16. (a) Do you possess a current Federal Wagering or Gaming Device Stamp? Yes \_\_\_\_\_ No \_\_\_\_\_  
(b) Stamp Number: \_\_\_\_\_ Amount \$ \_\_\_\_\_
17. Are you, or any other person, directly or indirectly, in your place of business a public official?  
Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, give name(s) and office held: \_\_\_\_\_  
\_\_\_\_\_
18. If this is a license renewal, have you made any political contributions within the past two (2) years?  
Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, give particulars thereof: \_\_\_\_\_  
\_\_\_\_\_
19. If co-partnership, please complete the following:  
(a) Date of formation: \_\_\_\_\_  
(b) Persons entitled to share in profits:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
20. All applications, except if applicant is a corporation, must complete Section 20. If applicant possesses an interest in a partnership, each person possessing such an interest in the partnership shall furnish the information provided in Section 20 and attach it to this application.

Any applicant that is a corporation need not complete Section 20, but is required to complete Section 21.

- (a) Name: \_\_\_\_\_ Sex: \_\_\_\_\_
- (b) Residence Address: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Do you reside in the City limits? \_\_\_\_\_ How long? \_\_\_\_\_  
Do you reside in the State of Illinois? \_\_\_\_\_ How long? \_\_\_\_\_
- (c) Date of birth? \_\_\_\_\_ Place of birth? \_\_\_\_\_  
Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_
- (d) Are you a citizen of the United States? \_\_\_\_\_ If a naturalized citizen, when and where were you naturalized? \_\_\_\_\_ Court in which (or law under which) you were naturalized? \_\_\_\_\_
- (e) Percentage of ownership in the business: \_\_\_\_\_%
- (f) Have you ever been charged with any felony under any Federal or State Law? Yes \_\_\_\_\_ No \_\_\_\_\_  
If so, give date, nature of offense, and disposition of said charge(s). \_\_\_\_\_  
\_\_\_\_\_
- (g) Have you ever been charged with being the keeper of a house of ill fame; or of pandering or other crime or misdemeanor opposed to decency and morality? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, give date, nature of offense and disposition of said charge(s): \_\_\_\_\_  
\_\_\_\_\_
- (h) Have you ever been charged with a violation of a Federal or State liquor law since February 1, 1934? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, give date and disposition of said charge(s): \_\_\_\_\_  
\_\_\_\_\_
- (i) Have you ever permitted an appearance bond forfeiture of any of the violations mentioned in e, f, or g? Yes \_\_\_\_\_ No \_\_\_\_\_
- (j) Have you made application for a similar other license for premises other than described in this application? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, give date, location of premises and disposition of application: \_\_\_\_\_
- (k) Has any license previously issued to you by State, Federal or local authorities been revoked? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, state reasons therefore and date of revocation: \_\_\_\_\_  
\_\_\_\_\_
- (l) Is the applicant engaged in the manufacture of alcoholic liquors? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, at what location(s)? \_\_\_\_\_
- (m) Is the applicant engaged in the business of an importing distributor or distributor of alcoholic liquors? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, at what location(s)? \_\_\_\_\_  
\_\_\_\_\_
- (n) List employer, address, type of employment, and manager for the past five (5) years?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- (o) Has, or had, the applicant ever had a local beer or liquor license? Yes \_\_\_\_\_ No \_\_\_\_\_ Been employed by a local liquor licensee? Yes \_\_\_\_\_ No \_\_\_\_\_ When? \_\_\_\_\_ Where? \_\_\_\_\_ Kind of business? \_\_\_\_\_  
Name of licensee? \_\_\_\_\_

- (p) Has or had the applicant directly or through any employee, officer, agent, subsidiary or affiliate, any other license to sell beer or liquor in the State of Illinois? Yes \_\_\_\_\_ No \_\_\_\_\_ How many? \_\_\_\_\_  
Location: \_\_\_\_\_
- (q) Has the applicant directly or through any employee, officer, agent, subsidiary or affiliate, any direct or indirect interest, financial or otherwise, in any other beer or liquor license? Yes \_\_\_\_\_ No \_\_\_\_\_  
Extent of interest: \_\_\_\_\_
- (r) Is the applicant directly or through any employee, officer, agent, subsidiary or affiliate, indebted to any person for money or property to be used in the licensed business? Yes \_\_\_\_\_ No \_\_\_\_\_ Amount \$ \_\_\_\_\_ Name: \_\_\_\_\_ Business or occupation of person to whom indebted? \_\_\_\_\_
- (s) Has applicant any relative, through blood or by marriage, engaged in the liquor business? Yes \_\_\_\_\_ No \_\_\_\_\_ Name: \_\_\_\_\_ Where? \_\_\_\_\_ Type: \_\_\_\_\_

21. If the applicant is a corporation, then Section 21 must be completed by responsible party possessing authority to disclose such information.

- (a) Date of incorporation: \_\_\_\_\_ (b) Date charter was issued: \_\_\_\_\_
- (c) Object for which corporation was organized: \_\_\_\_\_
- (d) If a majority in interest of the stock of the corporation is owned by one person or his nominee, give name and address of such person: Name: \_\_\_\_\_ Address: \_\_\_\_\_
- (e) Give address of principal office of corporation: \_\_\_\_\_
- (f) If foreign corporation, give State where incorporated and date you became qualified under the Illinois Business Corporation Act: State: \_\_\_\_\_ Date: \_\_\_\_\_
- (g) Has any officer, manager, or director of said corporation, or any stockholder or stockholders owning in the aggregate more than five percent (5%) of the stock of such corporation, ever been charged with any felony under any Federal or State Law? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, give the name of the person, the date, the nature of the offense, and the disposition of said charge(s). \_\_\_\_\_
- (h) Has any officer, manager, or director of said corporation, or any stockholder of stockholders owning in the aggregate more than five percent (5%) of the stock of such corporation, ever been charged with a violation of any Federal or State liquor law since February 1, 1934? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, give the name of the person, the date and the disposition of charge(s). \_\_\_\_\_
- (i) Has any officer, manager, or director of said corporation, or any stockholder or stockholders owning in the aggregate more than five percent (5%) of the stock of such corporation, ever been charged with being the keeper of a house of ill fame; or of pandering or other crime of misdemeanor opposed to decency and morality? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, give the name of the person, the date, the nature of the offense and the disposition of said charge(s): \_\_\_\_\_
- (j) Has any officer, manager, or director of said corporation, or any stockholder or stockholders owning in the aggregate more than five percent (5%) of stock of such corporation, ever permitted an appearance

bond forfeiture of any of the violations mentioned in f, g, or h? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, state particulars: \_\_\_\_\_

(k) Has the corporation (applicant) or any officer, manager, or director of said corporation, or any stockholder or stockholders owning in the aggregate more than five percent (5%) of the stock of such corporation, made an application for a similar license for this period for any premises other than those described above? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, give name of applicant, location of premises, date and disposition of application: \_\_\_\_\_

(l) Is any law enforcing official, mayor, member of the City Council or commission, member of a County Board, directly or indirectly interested in the business for which license is sought? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, who and of which commission? \_\_\_\_\_

(m) Has any license previously issued by State, Federal or local authorities to the corporation (applicant) or to any officer, manager, or director of said corporation, or any stockholder or stockholders owning in the aggregate more than five percent (5%) of the stock of such corporation, been revoked or suspended? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, give name of licensee and state reasons for, and the date of, the revocation or suspension: \_\_\_\_\_

22. Has any manufacturer, importing distributor or distributor directly or indirectly paid or agreed to pay for this license, advanced money or anything else of value, except as specifically permitted in the Act or any credit (other than merchandising credit in the ordinary course of business as specifically permitted in the Act) or is such a person directly or indirectly interested in the ownership, conduct of operation of the place of business? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, give particulars: \_\_\_\_\_

23a. List below, or on a separate sheet of paper, the name address, sex, date of birth, social security number, position and percentage of ownership in the business of every corporate officer or director who owns five percent (5%) or more of the shares of the applicant business entity.

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23b. List below, or on a separate sheet of paper, the names and addresses of any other officer or director of the corporation who is not listed in Section 23a.

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24. Will the business be conducted by a manager or agent? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, manager or agent, please complete the following:

(a) Name: \_\_\_\_\_

(b) Residence Address: \_\_\_\_\_  
Residence Telephone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

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- (c) Manager or agent for a partnership [ ], corporation [ ], or individual [ ]
- (d) Do you reside within the City limits? Yes \_\_\_\_\_ No \_\_\_\_\_ Race: \_\_\_\_\_ Sex: \_\_\_\_\_
- (e) Date of birth: \_\_\_\_\_ Place of birth: \_\_\_\_\_
- (f) Are you a citizen of the United States: Yes \_\_\_\_\_ No \_\_\_\_\_ If a naturalized citizen, when and where naturalized? \_\_\_\_\_  
If not a citizen of the United States, then where are you a citizen? \_\_\_\_\_  
Do you have a work permit to work in the United States? Yes \_\_\_\_\_ No \_\_\_\_\_
- (g) Driver's License number: \_\_\_\_\_ State: \_\_\_\_\_
- (h) Have you ever been charged with any felony under any Federal or State law? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, give date, the nature of the offense, and the disposition of said charge(s): \_\_\_\_\_  
\_\_\_\_\_
- (i) Have you ever been charged with being the keeper of the house of ill fame, or of pandering or other crime or misdemeanor opposed to decency and morality? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, give date, the nature of the offenses, and the disposition of said charge(s). \_\_\_\_\_  
\_\_\_\_\_
- (j) Have you ever been charged with a violation of any Federal or State liquor law since February 1, 1934? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, give date, the nature of the offense, and the disposition of said charge(s): \_\_\_\_\_  
\_\_\_\_\_
- (k) Have you ever permitted an appearance bond forfeiture for any of the violations mentioned in questions g, h, and i? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, state particulars: \_\_\_\_\_  
\_\_\_\_\_
- (l) Has any license previously issued to you by State, Federal or local authorities been revoked or suspended? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, state reasons therefor and date of revocation or suspension: \_\_\_\_\_  
\_\_\_\_\_
- (m) Give name of person who appointed you in your present capacity: \_\_\_\_\_  
\_\_\_\_\_ Date of appointment: \_\_\_\_\_

**AFFIDAVIT**

STATE OF ILLINOIS )  
                                  ) SS.  
                                  )

I swear (or affirm) that I will not violate any of the ordinances of the City of Mascoutah 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 questions 23a-m are true and correct to the best of my knowledge and belief.

\_\_\_\_\_  
(Signature of Manager or Agent)

\_\_\_\_\_  
(Print name of applicant)

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Notary Public

**NO LICENSE WILL BE ISSUED UNLESS ALL THE ABOVE QUESTIONS ARE FULLY ANSWERED.**

**AFFIDAVIT**  
**(Please read carefully before signing)**

I (We), swear (or affirm) and I (we) have proof of at least \$30,000 dram shop insurance coverage for injury to the person or property and proof of at least \$30,000 dram shop insurance coverage for loss of means of support resulting from death or injury of any person.

I (We), do solemnly swear (or affirm) that the statements given above are true and correct to the best of my (our) knowledge and belief; and I (we) will comply with all regulations of Federal, State, and Local Liquor Control Laws; that a copy of an ordinance governing the sale at retail of alcoholic liquors and beverages in Mascoutah, Illinois, has been furnished to me (us); that I (we) understand the same, and agree to comply with all the provisions set forth therein.

I (We) swear (or affirm) that I (we) will not violate any of the laws of the State of Illinois or of the United States of America in the conduct of the place of business described herein and state the statements contained in this application are true and correct and are made for the purpose of inducing the City of Mascoutah, Illinois, to issue the license herein applied for.

NOTE: If partnership, firm, association or corporation, application must be signed by at least two (2) members of such partnership, firm, association or club or both the President and Secretary of such corporation.

\_\_\_\_\_  
Signature and Title of Applicant

\_\_\_\_\_  
Signature and Title of Applicant

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, A.D. 20\_\_\_\_.

SEAL

\_\_\_\_\_  
Notary Public

**APPROVED – LIQUOR COMMISSIONER**

\_\_\_\_\_  
Mayor - City of Mascoutah

\_\_\_\_\_  
Chief of Police

**REASON FOR LIQUOR LICENSE DENIED OR WITHDRAWN:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signed by: \_\_\_\_\_ Date: \_\_\_\_\_