

LIQUOR LICENSE APPLICATION FOR THE VILLAGE OF SOUTHERN VIEW

Check category of License desired-----

_____	Class 1-A	..... Tavern	.....	\$ 500.00	Annual Fee
_____	Class 1-B	..... One-day License	.....	\$ 25.00	Fee
_____	Class 2-A	..... Service Station	.....	\$ 600.00	Annual Fee
_____	Class 2-B	..... Package Sales	.....	\$ 400.00	Annual Fee
_____	Class 3-A	..... Hotel-Motel	.....	\$ 800.00	Annual Fee
_____	Class 3-B	..... Nightclub	.....	\$ 800.00	Annual Fee
_____	Class 1-AA	..... Tavern	.....	\$ 700.00	Annual Fee
_____	Class 1-BB	..... Outdoor Café	.....	\$ 100.00	Annual Fee
_____	Class 4	..... Restaurant	.....	\$ 400.00	Annual Fee
_____	Class 3-AA	..... Hotel-Motel	.....	\$ 1,000.00	Annual Fee
_____	Class 3-BB	..... Nightclub	.....	\$ 1,000.00	Annual Fee

PLUS, the Background Investigation Fee of \$ 70.00 (CASH); along with the  
New Application Fee of \$ 25.00; and/or the \$ 15.00 Renewal Fee.

TOTAL AMOUNT DUE \$ \_\_\_\_\_

Please Submit completed application with required fees in the form of cash or a cashier's  
check to: Village of Southern View, 3410 South Fifth, Southern View, Il. 62703

Fees must be paid in full and shall not be refundable in the event of denial, suspension or,  
revocation.

- 1) Name/address of applicant: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- 2) Location of place where the business will be conducted under license applied for here: \_\_\_\_\_  
(Address must read Southern View, Illinois)
- 3) Is location owned by applicant: \_\_\_\_\_
- 4) Is location rented or leased by applicant: \_\_\_\_\_  
What is expiration date of applicant's tenancy: \_\_\_\_\_
- 5) Is the applicant's residence within Southern View: \_\_\_\_\_
- 6) Applicant's Social Security Number or, Federal Employer's Identification number: \_\_\_\_\_
- 7) Applicant's date of birth: \_\_\_\_\_
- 8) Applicant's Illinois sales tax number: \_\_\_\_\_
- 9) Check if applicant is:  
\_\_\_\_\_ An individual proprietor  
\_\_\_\_\_ A sole proprietor  
\_\_\_\_\_ A general partnership  
\_\_\_\_\_ A limited partnership  
\_\_\_\_\_ An Illinois Corporation  
\_\_\_\_\_ A corporation chartered by another state
- 10) Is applicant the beneficial owner of the business planned to be operated under the License applied for: \_\_\_\_\_
- 11) If applicant is an individual or sole proprietor, is applicant a citizen of the United States: \_\_\_\_\_
- 12) If applicant is an individual or sole proprietor, and business will be conducted by a Manager or agent, is such manager or agent a citizen of the United States: \_\_\_\_\_  
\_\_\_\_\_
- 13) If applicant is a partnership, either general or limited, do any partners own more Than 5% of the partnership? Yes / No (circle one).

If yes, please identify each such partner, his/her percentage share, his/her place of residence and citizenship, and his/her social security number or federal employer's identification number: \_\_\_\_\_

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14) If applicant is a corporation, either Illinois or foreign, do any shareholders own more than 5% of the stock: \_\_\_\_\_

If yes, please identify each such shareholder, his/her percentage of stock, his/her place of residence and citizenship, his/her social security number or federal employer's identification number: \_\_\_\_\_

Note: Information may be submitted on a separate piece of paper attached to this Application.

15) If applicant is a foreign corporation, name the state or other entity which chartered the corporation: \_\_\_\_\_

16) If applicant is a foreign corporation, is it authorized to transact business in Illinois: \_\_\_\_\_

\*\*\* THE FOLLOWING QUESTIONS APPLY WHETHER APPLICANT IS AN INDIVIDUAL, PARTNERSHIP OR CORPORATION \*\*\*

\* Has the individual, a partner or a corporate officer, director or shareholder in Applicant been convicted of any felony or misdemeanor, other than traffic offenses, including but not limited to a) pandering, b) keeping a house of ill fame, c) any other crime opposed to decency and morality, d) any crime concerning the manufacture, possession or sale of alcoholic liquor, 3) a gambling offense proscribed by subsection (a) (3) through (a) (10) of Section 28-a or by Section 28-3 of the Illinois Criminal Code? Yes / No (circle one.)

If answer is yes, please give full explanation on a separate sheet of paper and attach to this application.

\* Has the manager or agent for an individual been convicted of any felony or misdemeanor, other than traffic offenses, including but not limited to (a) pandering, (b) keeping a house of ill fame, (c) any other crime opposed to decency and morality, (d) any crime concerning the manufacture, possession or sale of alcoholic liquor, (e) a gambling offense proscribed by subsections (a) (3) through (a) (10) of Section 28-1 or by Section 28-3 of the Illinois Criminal Code? Yes / No (circle one).

If answer is yes, please give full explanation on a separate sheet of paper and attach to this application.

\* Does the individual, a partner or a corporate officer, director or shareholder in applicant hold a federal wagering stamp for the current tax period? Yes / No (circle one).

If answer is yes, please give full explanation on a separate sheet of paper and attach to this application.

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

NOTE: Each applicant must execute a bond payable to the Village of Southern View in the penal sum of five hundred dollars (\$500.00), conditioned upon the applicant's or licensee's compliance with this ordinance. This bond must be attached to and filed with new application or renewal application.

Application must be signed by all applicants and verified by affidavit as follows:

A. Individual (s): Include date of birth for each...

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

(Make additional lines if needed.)

I, the undersigned notary public, hereby certify that the applicant(s) who have signed her/her/their names(s) above, appeared before me on \_\_\_\_\_, 20 \_\_\_\_; And stated under oath that he/she/they/had answered the foregoing questions and that such answers are true.

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

B. Partnership or Corporation:

\_\_\_\_\_ Name of Partnership / Corporation

By: \_\_\_\_\_ Attest: \_\_\_\_\_  
Name / Title Name, Secretary/ Asst. Sec'y.

I, the undersigned notary public, hereby certify that the applicant(s) who have signed his/her/their name(s) above appeared before me on \_\_\_\_\_, 20 \_\_\_\_; And stated under oath that he/ she/ they had answered the foregoing questions and that such answers are true.

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

