

VILLAGE OF BUFFALO GROVE

Administrative Services Department

50 Raupp Boulevard, Buffalo Grove, IL 60089

Phone: 847-459-2500 | www.vbg.org



Application for Annual Liquor License

Date: _____

Liquor License Term – May 1 through April 30

First time applicants must include non-refundable \$500 application fee

If initial license is issued after November 1st, annual license fee is prorated by 50%

☐ NEW

☐ RENEWAL

Class(es) for Which License(s) are Requested:

CHECK ALL REQUESTED	LICENSE CLASS	DESCRIPTION OF CLASS	ANNUAL LICENSE FEE
☐	A	On Premise – Full Service Restaurant	\$2400
☐	A-1	On Premise – Full Service Restaurant (Beer/Wine Only)	\$1500
☐	B	On Premise – Bar/Tavern	\$2500
☐	B-1	On Premise – Bar/Tavern (Beer/Wine Only)	\$1800
☐	C	Off Premise – Package Retail	\$2500
☐	C-1	Off Premise – Package Retail (Beer/Wine Only)	\$1800 (\$300 with any Class A or B)
☐	C-2	Off Premise – Package Retail (Beer/Wine Only) – Fueling Station	\$1800
☐	D	On Premise / Package Retail – Brew Pub	\$4000
☐	E	Off Premise – Catering	\$1200
☐	F	On Premise – Complimentary (Beer/Wine Only)	\$100
☐	F-1	Off Premise – Gift Delivery Service	\$250
☐	G	On Premise – Government Organization	\$100
☐		BYOB (must have Class A, A-1, or D)	\$150
☐		Annual Tasting (must have Class C or C-1)	\$1000
☐		Outdoor Seating with Serving of Alcoholic Beverages (Application and site plan required)	

Part I: Applicant Information

Business Entity Information

Applicant / Legal Business Name (The exact “legal name” as it appears in the official business formation documentation.)

“Doing Business As” Name (The exact “Doing Business As” (DBA) name as it appears in the official business formation documentation.)

Type of Business: ☐ Sole Proprietor ☐ Partnership ☐ LLC ☐ Corporation ☐ Other _____

Business Location

Business Address (Include extended address if applicable (ex. 100-102 Main St) and suite number.)

Buffalo Grove, IL 60089

Business Phone
()

Business Email Address

Principal kind of business

Billing / Mailing Address

Attention

Address

Suite/Apt. #

City

State

ZIP Code

Phone
()

Email Address

Registered Agent

Name

Address

Suite/Apt. #

City

State

ZIP Code

Phone
()

Email Address



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Part II: Corporate / LLC / Partnership / Sole Proprietor Information

Business Owner and Officer Information (If more than three, please list all additional owners and officers on a separate sheet of paper.)
Each individual owning 5% or more shall have his or her fingerprints submitted to the Village for the purpose of a criminal history records check.

- o **Sole Proprietors** are required to provide information about the **Individual** who owns the business.
- o **General Partnerships, Limited Partnerships and Limited Liability Partnerships** are required to provide information about all the **Partners** of the organization.
- o **Limited Liability Companies** are required to provide information about the organization's **Members**, and any other **shareholder(s)** with a beneficial interest.
- o **Corporations** are required to provide information about the organization's **President, Secretary**, and any other **shareholder(s)** owning 5% or more of stock.

Title: ☐ Sole Proprietor ☐ Partner ☐ President ☐ Managing Member ☐ Other:					
Ownership %	First Name		Last Name		
Current Residential Address			Suite/Apt. #	City	State ZIP Code
Business Phone ()	Cell Phone ()		Email Address		

Title: ☐ Sole Proprietor ☐ Partner ☐ President ☐ Managing Member ☐ Other:					
Ownership %	First Name		Last Name		
Current Residential Address			Suite/Apt. #	City	State ZIP Code
Business Phone ()	Cell Phone ()		Email Address		

Title: ☐ Sole Proprietor ☐ Partner ☐ President ☐ Managing Member ☐ Other:					
Ownership %	First Name		Last Name		
Current Residential Address			Suite/Apt. #	City	State ZIP Code
Business Phone ()	Cell Phone ()		Email Address		

Part III: On-Site General Manager Information

Will the business be conducted by a manager or agent? ☐ Yes ☐ No

If yes, individual shall complete **Statement of Manager Form** and have his or her fingerprints submitted to the Village for the purpose of a criminal history records check.

On-Site General Manager Information					
Name					
Current Residential Address			Suite/Apt. #	City	State ZIP Code
Phone ()			Email Address		

Part IV: Business Premises

Property Owner / Management Company					
This property is (choose one) ☐ owned / ☐ leased / ☐ subleased by the applicant. (If leased or subleased, provide lessor information and copy of lease)					
Property Owner / Management Company			Lease start date:		Lease end date:
Address			Suite/Apt. #	City	State ZIP Code
Phone ()			Email Address		
Beneficiary of Trust, if property is held in trust					



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Part V: Previous Liquor License Information

Has the applicant or any other person listed in Part II ever held a liquor license in the United States? ☐ Yes ☐ No
If yes, please list all businesses and locations, including the city, county, and state (Attach additional pages if necessary)

Business Name	Address, City, County, State	State License #	Local License #	Expiration Date

Part VI: Background Information

For questions answered yes, a written, detailed explanation is required and must be attached to this application

		Yes	No
1	Is the location of applicant's business for which the license(s) is sought within 100 feet of any church, school, hospital, home for aged or indigent persons or veterans, their wives or children, or military or naval station?	☐	☐
2	Has any manufacturer, distributor or importing distributor directly or indirectly furnished, loaned or rented any interior decorations other than signs for inside and outside use (except signs prior to February 1, 1934) costing in the aggregate more than \$100.00 in any one calendar year for use in or about the premises for which the license(s) is sought?	☐	☐
3	Has any manufacturer, distributor or importing distributor directly or indirectly paid or agreed to pay for license, advanced money or anything else of value, or any credit (other than merchandising credit in the ordinary course of business for a period not to exceed 90 days) or is such person directly or indirectly interested in the ownership, conduct or operation of the place of business? (Interior decorations and signs mentioned in question 2 exempted)	☐	☐
4	Is the applicant engaged in the manufacture of alcoholic liquor? If yes, at what location(s)?	☐	☐
5	Is the applicant conducting the business of an importing distributor or distributor of alcoholic liquors? If yes, at what location(s)?	☐	☐
6	Is any law enforcing official, mayor, alderman, member of a city council or commission, member of a village board, or member of a county board, directly or indirectly interested in the business for which the license(s) is sought?	☐	☐
7	Has the applicant or any other person listed in Part II ever been convicted of a gambling offense?	☐	☐
8	Has the applicant or any other person listed in Part II ever been convicted of any felony under any Federal or State Law?	☐	☐
9	Has the applicant or any other person listed in Part II ever been convicted of a violation of the Federal or State Prohibition or Liquor Acts?	☐	☐
10	Is the applicant delinquent in payment of Retailer's Occupational Tax (Sales Tax)?	☐	☐
11	If a retailer, is the applicant delinquent under the 30 day credit law?	☐	☐
12	Is the applicant delinquent under the cash beer law?	☐	☐
13	Has the applicant or any other person listed in Part II ever been a shareholder, partner, owner, manager, or employee of, or otherwise involved with, an establishment that was fined, or had its liquor license suspended or revoked?	☐	☐
14	Does the applicant or any other person listed in Part II have outstanding, past due financial obligations owed to the Village of Buffalo Grove, including but not limited to fines, fees, utility charges, and taxes?	☐	☐



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Part VII: Application Submittal

The following documents **must** be submitted with this application:

- ☐ Articles of Incorporation or Organization (first time applicants)
- ☐ Copy of assumed name certificate, if applicable (first time applicants, or upon change)
- ☐ Detailed floor plan showing layout of premises, clearly marking where alcohol is prepared, stored, sold, and served. (first time applicants or upon change)
- ☐ Copy of valid lease (first time applicants and upon lease renewal or extension)
- ☐ Written liquor control policy (first time applicants, or upon change)
- ☐ Certificate of Insurance indicating that a policy of dram shop insurance is in force for the premises at which the license is to be issued in an amount not less than \$500,000.00
- ☐ Additional Insured Endorsement listing the Village of Buffalo Grove as an additional insured
- ☐ Cancellation Endorsement with minimum 10-day notice to Village of Buffalo Grove
- ☐ Written list of employees who mix, serve, or sell alcohol
- ☐ Basset certificates for all employees on above list
- ☐ Outdoor seating application and site plan, if requested

PART VIII: Acknowledgement

The applicant hereby acknowledges and agrees that:

- o A Village of Buffalo Grove Liquor License is a privilege and may be revoked pursuant to the Ordinances of this Village, or the laws of the State of Illinois or of the United States of America;
- o The applicant, the applicant's agent, and/or the applicant's designated manager shall, upon the request of the Village, and in connection with this application and any Village Liquor Licenses issued pursuant thereto, submit to fingerprinting by the Buffalo Grove Police Department;
- o The applicant shall pay the administrative expenses, including without limitation court costs and attorney's fees, incurred by the Village of Buffalo Grove in connection with any hearing before the Village Liquor Control Commissioner concerning this application or any Village Liquor Licenses issued pursuant thereto;
- o The applicant has read, and will not violate, any of the Ordinances of this Village, or the laws of the State of Illinois or of the United States of America, in the conduct of the business on the premises to be licensed;
- o The applicant is not disqualified to receive the Village Liquor License(s) requested in this application by reason of any provision of the laws of the State of Illinois or the Buffalo Grove Municipal Code and Ordinances;
- o The statements contained in the application are true and correct to the best of the applicant's knowledge and belief;
- o The Village of Buffalo Grove, or its authorized agent, shall have the right to enter the premises for the purpose of inspecting to ensure compliance with all applicable Codes and Ordinances.

The undersigned hereby makes application for the issuance of a local liquor license under Chapter 5.20 of the Village of Buffalo Grove Municipal Code.

Applications by corporations shall be sworn to and signed by the corporate president and attested to and signed by the corporate secretary.
Applications by a partnership shall be sworn to and signed by two members of the partnership.

Signature of Applicant

Signature of Applicant

Printed Name of Applicant

Printed Name of Applicant

Title of Applicant

Title of Applicant

Date

Date

THIS NOTARIZATION REQUIRED FOR ANY OF THE ABOVE SIGNATURES

State of Illinois, County of _____

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

Notary Public

My Commission Expires

SEAL