

CITY OF WAUKEGAN LIQUOR LICENSE 2022 APPLICATION INSTRUCTIONS

Terms

- This application is only valid for the fiscal year of May 1 – April 30.
- All liquor license renewals for consecutive fiscal years must be accompanied by a new completed application.
- The applicant shall comply with all applicable City, state, and federal laws, ordinances, codes, conditions, regulations, and requirements.
- Liquor license is non-transferrable and can only be used as designated. **The permit is required to be posted on site at the business location.** The City of Waukegan reserves the right to suspend or cancel the license.

Notice

- Upon approval of the application and issuance of any new liquor license, the licensee will be placed on a one-year probation period. During said probationary period, if the licensee violates any section of the liquor ordinance, as specified in a probationary agreement that includes a management plan, put forth to the licensee prior to the issuance of a license, a liquor hearing will be called and the license may be revoked immediately, with no progressive discipline required.
- In the event that the local Liquor Control Commissioner refuses to grant a license, they shall place on file in their office the rejected application and a document setting forth reasons for their refusal to grant the license. Copies of the rejected application and the document setting forth the reasons for refusal shall also be served by certified mail upon the applicant for the license at the address stated on the license application. The rejected applicant may, within ten (10) days from the receipt of said notice of rejection, request a hearing before the local Liquor Control Commissioner, at which time all interested parties shall be heard.
- The decision of the local Liquor Control Commissioner, in granting or refusing to grant a city license following hearing, may be appealed to the state Liquor Control Commission, and shall be considered by such commission on the record, and not de novo.
- No person shall knowingly furnish false or misleading information or withhold any relevant information on any application for any license required by this chapter nor knowingly cause or suffer another to furnish or withhold such information on their behalf. No person shall knowingly furnish any false or misleading information in the investigation of any application for a license required by this chapter. No person shall willfully withhold any information that is relevant to any such investigation when called upon by any city representative to furnish such information. The furnishing of false or misleading information or withholding any relevant information on any application for any license required by this chapter shall be grounds for denial of any such application, or if discovered after the issuance of any such license, shall be grounds for a fine, suspension, or revocation, or any combination thereof, of the license.

After submitting all forms, your application will be reviewed by the Collector's Office. The Collector's Office will notify you within thirty (30) calendar days after filing with the status of your application. Please do not assume that your liquor license will be approved.

CITY OF WAUKEGAN LIQUOR LICENSE
May 1, 2021 – April 30, 2022 APPLICATION

Please type or print clearly. Incomplete applications will not be processed.

TYPE OF APPLICATION: New Renewal LIQUOR LICENSE CLASS: _____

STATE OF IL LIQUOR LICENSE # : _____ COW LIQUOR ACCT # : _____

STATE OF IL LIQUOR LICENSE EXPIRATION DATE _____

BUSINESS INFORMATION		
1. Business Name:		
2. Doing Business As (DBA):		
3. Business Address:		
4. City:	5. State:	6. Zip:
7. Telephone:	8. Fax:	
9. E-mail:	10. Website:	
11. Business Type: <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Manager/Agent		
12. Date Incorporated:		13. State of Incorporation:
14. Illinois Sales Tax Number:		
15. Is the business registered with the Secretary of State? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, attach certificate of good standing.		

Applicants not in good standing with the City of Waukegan and/or State of Illinois will not be considered.

APPLICANT INFORMATION		
1. Applicant's Name:		
2. Applicant's Home Address:		
3. City:	4. State:	5. Zip:
6. Daytime Phone:	7. Mobile:	
8. Fax:	9. E-mail:	
10. Date of birth:	11. Place of birth:	
12. Are you a United States citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No		
13. If a naturalized citizen: When naturalized? (Month/Day/Year) Where naturalized? (City/State)		
14. Have you ever been convicted of any felony under any federal or state law? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, provide date and offense:		
15. Have you ever been convicted of any gambling offenses under any federal or state law? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, provide date and offense:		
16. Do you possess a current federal wagering stamp or gambling stamp? <input type="checkbox"/> Yes <input type="checkbox"/> No		
17. Have you ever been convicted of a federal or state liquor law violation? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, provide date(s):		
18. Have you submitted an application for a liquor license for a premises other than described in this application? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, provide date, location of premise, and disposition of application:		
19. Has any license previously issued to you by state, federal, or local authorities been revoked, suspended, or fined? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, attach an explanation(s) or reasons plus date(s):		
20. Applicant is a law enforcing public official of the City or of any other government or government agency? <input type="checkbox"/> Yes <input type="checkbox"/> No		

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21. Does the premise or business for which the license is sought comprises any place of business where the majority of customers are under the age of twenty one (21) years, or where the principal business consists of the sale of school materials or food for such customers? <input type="checkbox"/> Yes <input type="checkbox"/> No
22. Does the retail sale of alcohol on the premise for which the license is sought violate any provision of the City of Waukegan zoning code or any other City code and denote any schools, hospitals, senior citizen center, daycare center, orphanage, transitional service facility, nursing or professional care facility, homes for veterans and their spouses or families, churches or religious center used for worship or educational purposes, or any military station or facility within four hundred (400) feet of the proposed premises? <input type="checkbox"/> Yes <input type="checkbox"/> No
23. Are you or any of the officers, partners, and/or shareholders currently delinquent in payment to the Illinois Department of Revenue, the City of Waukegan, or any other governmental entity? <input type="checkbox"/> Yes <input type="checkbox"/> No
24. Do you intend to have the business conducted by a manager or agent? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, complete the manager/agent form below.</i>

Note: If you answered "yes" to any of the items listed above, an explanation must be included or attached.

MANAGER/AGENT DESIGNEE (IF APPLICABLE)		
1. Manager/Agent Name:		
2. Home Address:		
3. City:	4. State:	5. Zip:
6. Daytime Phone:	7. Mobile:	
8. Fax:	9. E-mail:	
10. Date of birth:	11. Place of birth:	
12. Are you a United States citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No		
13. If a naturalized citizen: When naturalized? (Month/Day/Year) Where naturalized? (City/State)		
14. Have you ever been convicted of any felony under any federal or state law? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, provide date and offense:		
15. Have you ever been convicted of any gambling offenses under any federal or state law? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, provide date and offense:		
16. Do you possess a current federal wagering stamp or gambling stamp? <input type="checkbox"/> Yes <input type="checkbox"/> No		
17. Have you ever been convicted of a federal or state liquor law violation? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, provide date(s):		
18. Have you submitted an application for a liquor license for a premises other than described in this application? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, provide date, location of premise, and disposition of application:		
19. Has any license previously issued to you by state, federal, or local authorities been revoked, suspended, or fined? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, attach an explanation(s) or reasons plus date(s):		
20. Are you or any of the officers, partners, and/or shareholders currently delinquent in payment to the Illinois Department of Revenue, the City of Waukegan, or any other governmental entity? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Note: If you answered "yes" to any of the items listed above, an explanation must be included or attached.		
21. I confirm I have reviewed the City of Waukegan Liquor Code. Signature of Manager/Agent Designee:		

Note: The City Liquor Commissioner must be notified of any change in Manager/Agent with full information as required in section 3-20 (a)-(d)

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SALES
<p>1. Attach a description of the type of business/liquor sales. If new, this should include how the proposed business will be a material benefit to the City of Waukegan, the type and character of business of the applicant, the objects for which such business is organized, and in the case of a corporation or club, the place of incorporation and the objects for which it was formed. This statement shall include an estimate of anticipated alcoholic liquor sales as a percentage of the gross annuals sales of the business.</p>
<p>2. Any and all alcohol servers, as defined in and required by Public Act 099-0046, hired by, and retained, on the premise of the applicant shall complete and be issued certification of completion of Beverage Alcohol Sellers and Servers Education and Training (BASSET) within 120 days after employment begins. Copies must be provided with this application.</p>
<p>3. Attach business license issued by City of Waukegan.</p>

RESTAURANT
<p>Does applicant seek a license to sell alcoholic liquor upon the premises as a restaurant? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes:</p> <ol style="list-style-type: none">1. Are premises maintained and held out to the public where meals are actually and regularly served? <input type="checkbox"/> Yes <input type="checkbox"/> No2. Are premises provided with adequate and sanitary kitchen and dining room equipment and capacity with sufficient employees to prepare, cook, and serve suitable food? <input type="checkbox"/> Yes <input type="checkbox"/> No3. Has any manufacturer, importing distributor, or distributor indirectly paid or agreed to pay for this license, advance money, or anything of value, or any credit (other than merchandising credit in the ordinary course of business for a period not to exceed 30 days) or such a person directly or indirectly interested in the ownership, conduct, or operations of this place of business? <input type="checkbox"/> Yes <input type="checkbox"/> No

BUSINESS/SITE PLAN (NEW APPLICANTS ONLY)
<p>1. Attach business plan.</p>
<p>2. Please provide a reproducible drawing/layout of the business’ floor plan including appropriate mix of seating options within the establishment. If additional space is needed, please attach a separate sheet. Applications will not be considered without this item.</p>

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SAFETY/SECURITY

1. Provide information detailing any and all camera equipment located on the interior and exterior of the premises.

REAL ESTATE

1. Holder of the title of the real estate where the business will be located:

Name:
 Address:
 City, State, Zip:
 Phone:
 E-mail:

2. If the property is leased:

Lessee Name:
 Lessee Address:
 Lessee City, State, Zip:
 Phone:
 E-mail:
 Lease expires:

3. Attach certificate of occupancy.

INSURANCE

1. Dram shop liability insurance IS IS NOT attached

The City requires the applicant produce proof of dram shop liability insurance at the required statutory maximum limits set forth in section 6-21 of the Liquor Control Act of 1934 as amended from time to time.

2. Liability insurance IS IS NOT attached

The City requires the applicant to obtain general liability insurance that includes the City of Waukegan as an additional insured. The insurance must, at minimum, be in the amount of one million dollars (\$1,000,000) for injury and death (combined single limits), or such a higher amount as required by law, as well as property insurance, in an amount of not less than the assessed value of the property, or two hundred thousand dollars (\$200,000), whichever is higher.

ACKNOWLEDGEMENT

I confirm I am not disqualified from receiving the license for which I am applying by reason of any matter or item contained in the laws of the State of Illinois, this chapter, or any other code or ordinance of the City of Waukegan

I confirm that I have not and will not violate any federal, state, or local law, ordinance, or regulation in the conduct of this business.

I confirm I will comply with the fingerprint requirement under Section 3-5(h) and 3-26 of the City Code as part of the background check in conjunction with Section 4-7 of the Illinois Liquor Control Act.

Applicant Name:

Applicant Signature:

Date:

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OWNERSHIP

In the case of an individual: the full name, address, date of birth, place of birth of the applicant, and a statement as to whether the applicant is a resident of the City of Waukegan;

In the case of a partnership: the full names, addresses, dates of birth, and places of birth of each and every person entitled to share in the profits thereof;

In the case of a corporation for profit or a club: the full names, addresses, dates of birth, and places of birth of all officers, directors, and persons owning directly or beneficially or otherwise controlling in aggregate, more than five percent (5%) of voting shares or stock in such corporation; or

In the case of a limited liability company: the full names, addresses, dates of birth, and places of birth of all members and managers directly owning or having an interest in such entity.

1. Name:

Home Address:

City, State, Zip:

Phone:

E-mail:

Driver's License Number:

Date of Birth:

Place of Birth:

Are you a United States citizen? Yes No

Are you a resident of Waukegan? Yes No

2. Name:

Home Address:

City, State, Zip:

Phone:

E-mail:

Driver's License Number:

Date of Birth:

Place of Birth:

Are you a United States citizen? Yes No

Are you a resident of Waukegan? Yes No

3. Name:

Home Address:

City, State, Zip:

Phone:

E-mail:

Driver's License Number:

Date of Birth:

Place of Birth:

Are you a United States citizen? Yes No

Are you a resident of Waukegan? Yes No

Note: See Code of Ordinances – Waukegan, IL Chapter 3, Section 3-6 (a) 1-21 & (b) restrictions on licenses.

SUBMIT ADDITIONAL PAGES OF THIS FORM AS NEEDED

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Business Name:	
Type of Application: <input type="checkbox"/> New <input type="checkbox"/> Renewal	Liquor License Class:
VIDEO GAMING TERMINALS	<input type="checkbox"/> Yes <input type="checkbox"/> No
# OF VGT	
VIDEO GAMING SUPPLIER:	
# of Amusement devices	
# of Dart Boards	
# of Billiards / Shuffle Board	
PLEASE PROVIDE YOUR HOURS OF OPERATION BELOW:	

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• **Sec. 3-32. - Hours of operation.**

(a) (1) The licensee may sell or permit to be sold for consumption on the licensed premises, alcoholic liquors only between the following hours, unless otherwise provided:

(2) Licensees holding class A, class C, or class F liquor licenses authorizing the sale of alcoholic liquor for consumption off premises, may sell or permit to be sold for consumption off the premises, alcoholic liquor only between the following hours:

The day prior to Thanksgiving Day	6:00 a.m. to 2:00 a.m. the following day
New Year's Eve	6:00 a.m. to 4:00 a.m. the following day, subject to the provisions of paragraph (b)(1) below.

(b) (1) *New Year's Day.* Any license, classifications which allow for the consumption of alcoholic liquor on the premises may remain open until 2:00 a.m. on New Year's Day. Furthermore, any such establishment may request to sell alcoholic liquor between 2:00 a.m. and 4:00 a.m. on New Year's Day; provided that such request shall be subject to the following requirements:

- a. A written request shall be submitted to the local liquor control commissioner on or before December 15 prior to the date for which permission is sought.
- b. The fee for said time extension shall be in an amount as set forth in [section 3-55](#) of this chapter and shall be submitted with the application.
- c. The licensee shall close and secure the doors at 2:00 a.m. so as not to allow any customers to enter the premises after that hour.
- e. The local liquor control commissioner may deny such request from any establishment that has had its liquor license suspended within the past year or for any establishment that owes the city money or is in violation of any city codes.

YES OR NO	EVE	BUSINESS NAME/ADDRESS	SIGNATURE
<input type="checkbox"/> Yes <input type="checkbox"/> No	THANKSGIVING		
<input type="checkbox"/> Yes <input type="checkbox"/> No	NEW YEARS		

PLEASE FILL OUT ABOVE IF YOU WISH TO PARTICIPATE IN THANKSGIVING OR NEW YEARS EVE