

**VILLAGE OF NORTHBROOK  
COOK COUNTY, ILLINOIS**

**RENEWAL APPLICATION FOR RETAIL LIQUOR LICENSE  
FOR THE PERIOD ENDING SEPTEMBER 30, 2021**

The undersigned hereby makes application for the renewal of its Village Retail License for the sale of alcoholic beverages under Chapter 4 of the Municipal Code of Northbrook, Illinois, as amended, for the period ending **September 30, 2021**. If required, applicant(s) and/or the designated manager or agent of the premises must submit to fingerprinting by the Northbrook Police Department in connection with this Initial Application for Retail Liquor License. The undersigned certifies to the Village of Northbrook that the following facts are true and correct:

**NOTE: Complete Parts as Follows: If a Part or Question is Not Applicable, Mark "N/A"**

<b>Part I:</b> All Applicants	<b>Part III:</b> All Applicants	<b>Part IV:</b> A, B, C or D, based on type of entity
<b>Part II:</b> All Applicants	<b>Part V:</b> All Applicants	<b>Part IV:</b> E, based on type of owner/manager

**PART I. GENERAL INFORMATION**

1.	Name of Applicant (person who will hold license and operate the business):		
	Doing Business As Name (D/B/A), if any:		
2.	Applicant Street Address (and P.O. Box, if any), City, County, State, Zip Code		
3.	Contact Person Information for Applicant: Telephone Number: Mobile Number:	Contact Person Email Address:	
4.	Class(es) of Alcoholic Liquor Sales for Which Licenses Are Requested: (PLEASE CHECK ALL THAT APPLY)		
CHECK CLASSES APPLIED FOR	LICENSE CLASS	DESCRIPTION OF CLASS	ANNUAL RENEWAL APPLICATION FEE
	A	On-Premises Consumption/Restaurant—All Alcohol	\$2,000
	B	Retail Package Sales for Off-Premises Consumption—All Alcohol	\$2,000
	B-1	Retail Package Sales for Off-Premises Consumption—Beer & Wine Only	\$2,000
	C	Club	\$1,400
	D	Annexed Property	As applicable
	E	On-Premises Consumption/Restaurant—Beer & Wine Only	\$1,130
	F	Tastings/Classes/Seminars [with Class B or B-1 only]	\$1,000
	G	Catering	\$1,000
	H	On-Premises Consumption—Wine By the Glass Only [with Class B or B-1 only]	\$275
	I	BYOB/Restaurant—Beer & Wine Only	\$750
	J	Hotel	\$3,000
	K	Golf Course	\$1,500
	L	Movie Theater	\$2,000
	O	On-Premises Consumption—Full Service Personal Care Services or Non-Food Retail Establishment	\$750
	P-1	On-Premises Consumption and Retail Package Sales—Distillery Tasting Room	\$2,000
	P-2	On-Premises Consumption and Retail Package Sales—Brewery/Brew Pub Tasting Room	\$2,000
	Secondary Functions (Page 2)	Retail Sale Original Package Multiple Preparation Areas Multiple Service Areas, <b>including ALL Outdoor Dining</b>	\$275 Each

**PART II. INFORMATION ABOUT PREMISES TO BE LICENSED**

1.	Address of Premises to be Licensed:	
2.	Contact Information at Premises to be Licensed: Telephone Number: Mobile Number:	Email Address:
3.	Location of Applicant's Principal Place of Business, if different:	
4.	Principal Kind of Business	Date Business Commenced at this Premises:
5.	Is Premises: Owned? <input type="checkbox"/> Leased? <input type="checkbox"/> Under Permit? <input type="checkbox"/>	If Leased, Provide Commencement Date and Termination Date of Lease or Permit  Attach Copy of Lease or Permit
6.	Name and Address of Landlord/Lessor/Entity Issuing Permit:	
7.	<b>Identify ALL AREAS in which alcoholic liquors are proposed to be prepared, served, sold and stored. Attach a drawing or sketch</b> of the Premises which shows ALL AREAS, and <b>specifically mark each area.</b> If this includes <u>any areas outside buildings on the Premises</u> , include a plat or site plan showing, and clearly indicate, the areas in which alcoholic liquors are proposed to be prepared and served, any doors for access to the buildings on the Premises, and any fencing or barriers existing or proposed. Is there any change to the areas since your last application? Yes <input type="checkbox"/> No <input type="checkbox"/> <i>If Yes, please attach new drawing/sketch/plat/site plan.</i>	
8.	If outdoor service is requested, has the Applicant applied for an outdoor seating license? Yes <input type="checkbox"/> No <input type="checkbox"/>	
9.	Proposed Hours of Operation and Hours of Alcohol Sales and Service:	
10.	Menu: Attach a copy of the printed menu for food service on the premises. Is there any change to the menu since your last application? Yes <input type="checkbox"/> No <input type="checkbox"/> <i>If Yes, please attach new menus.</i>	
11.	Proposed Secondary Liquor Function License for Class A or Class E only: (mark all that apply) The additional annual fee for each approved Secondary Liquor Function is \$275.00. Applicants should mark all of the categories below that apply and provide the required information. <i>An outdoor service/seating area is a secondary function. No secondary function may begin or be modified without a secondary function license. (Please note this MUST have prior approval by the Liquor Commissioner)</i>	
A.	Retail sale of alcoholic liquor in original package form for consumption off the Premises	
B.	Additional specific and permanent lounge area(s) designed, intended, and used primarily for the preparation and service of alcoholic beverages to the public for consumption. List each such area and mark on the drawing sketch required by item #7 above.	
	a.	
	b.	
	c.	
C.	Service of alcoholic beverages to areas of the Premises proposed to be licensed that are distinctly separate and removed from the prime alcoholic beverage preparation and service area. <b>This includes Outdoor Dining Areas.</b> List each such area and mark on the drawing sketch required by item #7 above.	
	a.	
	b.	
	c.	

**PART III. INFORMATION ABOUT ALL APPLICANTS**

1.	Provide the number, location, and expiration date of every State Liquor License issued to the applicant under the Illinois Liquor Control Act (attach additional sheets if necessary).		
	<u>License Number</u>	<u>Location</u>	<u>Expiration Date</u>

2.	<p>Provide the number, location and expiration date of every existing liquor license issued to the applicant by any unit of local government in the State of Illinois (attach additional sheets if necessary; also include description of license class if not a Village of Northbrook license):</p> <table border="1" data-bbox="162 126 1531 262"> <thead> <tr> <th data-bbox="162 126 487 168">License Number</th> <th data-bbox="487 126 1177 168">Location</th> <th data-bbox="1177 126 1531 168">Expiration Date</th> </tr> </thead> <tbody> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>	License Number	Location	Expiration Date									
License Number	Location	Expiration Date											
3	<p>Provide the application number, location, and disposition of any liquor license applied for by the applicant other than those described in Part III(1) and (2) above (attach additional sheets if necessary).</p> <table border="1" data-bbox="162 325 1531 462"> <thead> <tr> <th data-bbox="162 325 487 367">Application Number</th> <th data-bbox="487 325 1177 367">Location</th> <th data-bbox="1177 325 1531 367">Disposition</th> </tr> </thead> <tbody> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>	Application Number	Location	Disposition									
Application Number	Location	Disposition											
4.	<p><b>For items 5, 6, 7, 8 and 9 in this Part III</b>, if there is no change to your responses since your last application to the Village for this License, please mark the “No Changes” box. If your responses are different at this time, please mark the “Yes, I have Changes” box and provide your answers to each item.          No Changes Since Last Application <input type="checkbox"/> Yes, I have Changes That Are Shown Below <input type="checkbox"/></p>												
5.	<p>Has any Manufacturer, Importing Distributor or Distributor, as those terms are defined in 235 ILCS 5/1-3.08, 3.15 and 3.16, directly or indirectly paid or agreed to pay for this license, or advanced money, 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), to the applicant for the Premises to be licensed or the business described in this application? Yes <input type="checkbox"/> No <input type="checkbox"/>          If "yes", give details:</p>												
6.	<p>Is any Manufacturer, Importing Distributor, or Distributor directly or indirectly interested in the ownership, conduct, or operation of the Premises proposed to be licensed or the business described in this application? Yes <input type="checkbox"/> No <input type="checkbox"/>          If "yes", give details:</p>												
7.	<p>A. Has the Federal Government issued a gaming device stamp or wagering stamp for the current tax period for the Premises proposed to be licensed? Yes <input type="checkbox"/> No <input type="checkbox"/>          If "yes", give details:</p> <p>B. Has the Federal Government issued a gaming device stamp or wagering stamp to the applicant, including any partner if the applicant is a partnership, or any officer, manager, director or shareholder owning in the aggregate more than five percent (5%) of the stock, if the applicant is a corporation? Yes <input type="checkbox"/> No <input type="checkbox"/>          If "yes", give details:</p>												
8.	<p>Has the applicant obtained, or does the applicant plan to obtain, a loan to operate the business described in this application? Yes <input type="checkbox"/> No <input type="checkbox"/>          If "yes," what is the amount of the loan? \$ _____          Provide the name and address of the lender:</p>												
9.	<p>Has the applicant 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? Yes <input type="checkbox"/> No <input type="checkbox"/>          If "yes", give details:</p>												
10.	<p>Insurance: All applicants must <b>attach to this application</b> a certificate of insurance demonstrating 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. Such certificates of insurance shall demonstrate that the required insurance will be in effect for the duration of the requested license, and that the Village shall be notified at least ten (10) days prior to the cancellation or modification of such policy.</p>												
11.	<p>BASSET: All applicants must <b>attach to this application</b> current proof of completion of a BASSET program by the manager of the licensed premises and all employees who mix, serve or sell alcoholic beverages to the public. If not yet completed (New employees only), this proof must be submitted <u>not later than 120 days after issuance of the initial license.</u></p>												

**PART IV. INFORMATION ABOUT VARIOUS TYPES OF APPLICANTS**

Each Applicant must complete one of Subparts A, B, C, and D of this Part IV depending on the type of Applicant you are:

Subpart A: Individual Owners and Partnerships	Subpart C: Limited Liability Company
Subpart B: Corporation	Subpart D: Club (Not-for-Profit)

Each Applicant must complete BOTH parts of Subpart E of this Part IV:

Subpart E: Involved Owner	Subpart E: Involved Manager
---------------------------	-----------------------------

**SUBPART A. INDIVIDUAL OWNER/PARTNERSHIP**

The following information must be supplied by the individual owner or, in the case of a partnership, all persons entitled to share in the partnership profits. If more than two people are involved, the same information must be supplied for each such person on a separate sheet attached to this application.

	Information or Question	Person 1	Person 2
1.	Name		
2.	Address		
3.	Telephone Number		
4.	Mobile Telephone Number		
5.	Electronic Mail Address		
6.	Date of Birth (month/day/year) Place of Birth		
7.	Citizen of the United States	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
	Naturalized Citizen of the United States (include date, place and court of naturalization)	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
8.	Have you ever been convicted of any felony under any Federal or State Law? If Yes, state offense and date of offense:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
9.	Have you ever been convicted of a violation of the Federal or State Prohibition or Liquor Acts? If Yes, provide details	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
10.	Have you ever permitted an appearance bond forfeiture for any of the violations mentioned in IV.A.10 or IV.A.11 above? If Yes, provide details	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
11.	Has any liquor license previously issued to you by State, Federal or Local Authorities ever been revoked, suspended or refused? If Yes, provide details.	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
12.	Are you, or is any individual directly or indirectly interested in your place of business, an officer or the President or a Member of the Board of Trustees of the Village of Northbrook? If Yes, provide details	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
13.	In the case of a partnership, state the percentage of each partner's individual interest. Attach list if necessary		

**SUBPART B. CORPORATION**

The following information must be supplied if the applicant is a Corporation for Profit:

1.	Name of Applicant Corporation  Doing Business As Name (D/B/A), if any:
2.	Date and State of Incorporation
3.	Object(s) of corporation, as set forth in charter or articles of incorporation. Attach additional sheets, if necessary
4.	Provide a listing of the names and residences of the officers and directors. Attach separate sheets, if necessary
5.	If the applicant is a privately held corporation, list the names and addresses of all shareholders having more than a 5% interest in the business. Attach additional sheets, if necessary. If the applicant is publicly traded, also list the exchange on which its shares are traded. Attach corporate organization chart.

**SUBPART C. LIMITED LIABILITY COMPANY**

The following information must be supplied if the applicant is a limited liability company:

1.	Name of Applicant Limited Liability Company  Doing Business As Name (D/B/A), if any:
2.	Date and State of Creation
3.	Object(s) of limited liability company, as set forth in charter or articles of incorporation. Attach additional sheets, if necessary.
4.	Provide a listing of the names and residences of the managing member, officers and directors. Attach separate sheets, if necessary
5.	If the applicant is a privately held limited liability company, list the names and addresses of all members having more than a 5% interest in the business. Attach additional sheets, if necessary. If the applicant is publicly traded, also list the exchange on which its shares are traded. Attach Company organization chart.

**SUBPART D. CLUB (NOT FOR PROFIT)**

The following information must be supplied if the applicant is a Club, as defined in the Liquor Control Act:

1.	Name of Applicant Corporation  Doing Business As Name (D/B/A), if any:
2.	Date and State of Incorporation
3.	Object(s) of corporation, as set forth in charter or articles of incorporation. Attach additional sheets, if necessary

**PART E. INVOLVED OWNER (Must Be Completed)**

Section 4-47(b) of the Northbrook Municipal Code requires that the business for which this license is sought must be conducted by an involved owner. The following information must be supplied by the applicant, if an individual, or by the applicant's designated involved owner. (an individual applicant or involved owner may omit lines (1) through (5)):

1.	Full Name (first, middle, last name):	
2.	Street Address (and P.O. Box, if any), City, County, State, Zip Code:	
3.	Telephone Number: Mobile Number:	Email Address:
4.	Previous Street Address (and P.O. Box, if any), City, County, State, Zip Code:	
	<p><b>For items 5 through 12 in this Part IV.E, if there is no change to your responses since your last application to the Village for this License, please mark the "No Changes" box. If your responses are different at this time, please mark the "Yes, I have Changes" box and provide your answers to each item.</b></p> <p>No Changes Since Last Application <input type="checkbox"/>    Yes, I have Changes That Are Shown Below <input type="checkbox"/></p>	
5.	Date of Birth:	Place of Birth:
6.	Citizen of United States: Yes <input type="checkbox"/> No <input type="checkbox"/>	Naturalized Citizen? Yes <input type="checkbox"/> No <input type="checkbox"/>
	<p>NOTE: Owner must submit one of the following:          ▶ U.S. Passport (current)    ▶ U.S. Naturalization Papers (certified)    ▶ U.S. Birth Certificate (certified)          ▶ Certificate of U.S. Citizenship (certified)    ▶ U.S. Citizen ID Card (current)</p>	
7.	Driver's License or State ID Number:	Social Security Number:
8.	Previous Employer Name:	
9.	Previous Employer Street Address (and P.O. Box, if any), City, County, State, Zip Code:	
10.	<p>Have you ever been convicted of any felony under any Federal or State Law? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>If "yes", state offense and date of offense:</p>	
11.	<p>Have you ever been convicted of a violation of a Federal or State Prohibition or Liquor Act?</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/> If "yes", give details:</p>	
12.	<p>Have you ever permitted an appearance bond forfeiture for any of the violations mentioned in IV.E.10 or IV.e.11 above? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, provide details</p>	
13.	What experience do you have operating or managing a business that sells liquor?	
14.	<p>Have you submitted to fingerprinting at the Northbrook Police Department? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>NOTE: Owner Information page (signed and notarized) and a copy of Owner's driver's license/State ID must be submitted to Village Clerk prior to scheduling an appointment to be fingerprinted at the Northbrook Police Department.</p>	

The involved owner hereby acknowledges and agrees that:

- 1) a Village of Northbrook Retail 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 the United States of America;
- 2) the involved owner shall, upon the request of the Village Manager, and in connection with this application and any Retail Liquor Licenses issued pursuant thereto, submit to fingerprinting by the Northbrook Police Department;
- 3) the involved owner 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 business on the Premises to be licensed;
- 4) the involved owner is not disqualified to receive the Retail Liquor License requested in this application by reason of any provision of the laws of the State of Illinois or Village codes and ordinances; and
- 5) the statements contained in this Subpart E are true and correct to the best of the involved owner's knowledge and belief.

Subscribed and sworn to before me this _____ day of _____, 20_____.  _____ Notary Public	Signature of Involved Owner:
	Printed Name:
	Title:

**PART E. INVOLVED MANAGER(S)**

**(Must Be Completed Even if Same as the Owner and one must be completed by each Manager if more than one)**

Section 4-47(b) of the Northbrook Municipal Code requires that the business for which this license is sought must be conducted by an involved manager. The following information must be supplied by each manager.

1.	Full Name (first, middle, last name):	
2.	Street Address (and P.O. Box, if any), City, County, State, Zip Code:	
3.	Telephone Number: Mobile Number:	Email Address:
4.	Previous Street Address (and P.O. Box, if any), City, County, State, Zip Code:	
	<p><b>For items 5 through 12 in this Part IV.E, if there is no change to your responses since your last application to the Village for this License, please mark the "No Changes" box. If your responses are different at this time, please mark the "Yes, I have Changes" box and provide your answers to each item.</b></p> <p>No Changes Since Last Application <input type="checkbox"/>    Yes, I have Changes That Are Shown Below <input type="checkbox"/></p>	
5.	Date of Birth:	Place of Birth:
6.	Citizen of United States: Yes <input type="checkbox"/> No <input type="checkbox"/>	Naturalized Citizen? Yes <input type="checkbox"/> No <input type="checkbox"/>
	<p>NOTE: Manager must submit one of the following:          ► U.S. Passport (current)    ► U.S. Naturalization Papers (certified)    ► U.S. Birth Certificate (certified)          ► Certificate of U.S. Citizenship (certified)    ► U.S. Citizen ID Card (current)</p>	
7.	Driver's License or State ID Number:	Social Security Number:
8.	Previous Employer Name:	
9.	Previous Employer Street Address (and P.O. Box, if any), City, County, State, Zip Code:	
10.	<p>Have you ever been convicted of any felony under any Federal or State Law? Yes <input type="checkbox"/>    No <input type="checkbox"/></p> <p>If "yes", state offense and date of offense:</p>	
11.	<p>Have you ever been convicted of a violation of a Federal or State Prohibition or Liquor Act?</p> <p>Yes <input type="checkbox"/>    No <input type="checkbox"/>    If "yes", give details:</p>	
12.	<p>Have you ever permitted an appearance bond forfeiture for any of the violations mentioned in IV.E.10 or IV.E.11 above? Yes <input type="checkbox"/>    No <input type="checkbox"/>    If Yes, provide details</p>	
13.	What experience do you have operating or managing a business that sells liquor?	
14.	<p>Have you submitted to fingerprinting at the Northbrook Police Department? Yes <input type="checkbox"/>    No <input type="checkbox"/></p> <p>NOTE: Manager Information page (signed and notarized) and a copy of Manager's driver's license/State ID must be submitted to Village Clerk prior to scheduling an appointment to be fingerprinted at the Northbrook Police Department.</p>	

The involved owner hereby acknowledges and agrees that:

- 1) a Village of Northbrook Retail 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 the United States of America;
- 2) the involved owner shall, upon the request of the Village Local Liquor Control Commissioner or designee, and in connection with this application and any Retail Liquor Licenses issued pursuant thereto, submit to fingerprinting by the Northbrook Police Department;
- 3) the involved manager 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 business on the Premises to be licensed;
- 4) the involved manager is not disqualified to receive the Retail Liquor License requested in this application by reason of any provision of the laws of the State of Illinois or Village codes and ordinances; and
- 5) the statements contained in this Subpart E are true and correct to the best of the involved manager's knowledge and belief.

Subscribed and sworn to before me this _____ day of _____, 20_____.  _____ Notary Public	Signature of Involved Manager:
	Printed Name:
	Title:

**PART V. ACKNOWLEDGEMENT**

***The applicant hereby acknowledges and agrees that:***

- 1) a Village of Northbrook Retail 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 the United States of America;
- 2) the applicant, the applicant's agent, officers, the involved owner, and/or the applicant's designated manager shall, upon the request of the Village Local Liquor Control Commissioner or designee, and in connection with this application and any Retail Liquor Licenses issued pursuant thereto, submit to fingerprinting by the Northbrook Police Department;
- 3) the applicant shall pay the administrative expenses, including without limitation court costs and attorneys' fees, incurred by the Village of Northbrook in connection with any hearing before the Village Local Liquor Control Commissioner concerning this application or any Retail Liquor Licenses pursuant thereto;
- 4) 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 business on the Premises to be licensed;
- 5) the applicant is not disqualified to receive the Retail Liquor License requested in this application by reason of any provision of the laws of the State of Illinois or Village codes and ordinances;
- 6) the statements contained in this application are true and correct to the best of the applicant's knowledge and belief;
- 7) the Village of Northbrook, 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; and
- 8) the applicant has paid in full, by cashier's check, certified check, money order or cash, any and all taxes owed by the applicant to the Village of Northbrook; and
- 9) the undersigned warrants and represents to the Village of Northbrook that he or she is authorized to execute this application on behalf of the applicant, and is authorized to bind the applicant to the requirements of this Application and applicable law.

<b>INDIVIDUAL OWNER <input type="checkbox"/> or PARTNERSHIP <input type="checkbox"/></b>  _____ Signature of Applicant  _____ Printed Name of Applicant  _____ Signature of Applicant  _____ Printed Name of Applicant	<b>CORPORATION <input type="checkbox"/> or CLUB <input type="checkbox"/></b>  _____ Signature of Applicant's President  _____ Printed Name of President  _____ Signature of Applicant's Secretary  _____ Printed Name of Secretary	<b>LIMITED LIABILITY COMPANY <input type="checkbox"/></b>  _____ Signature of Managing Member  _____ Printed Name of Managing Member  _____ Signature of Additional Member (if required)  _____ Printed Name of Additional Member
--	--	---

***THIS NOTARIZATION REQUIRED FOR ANY OF THE ABOVE SIGNATURES.***

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

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