

**WINNEBAGO COUNTY CATERER**  
**LIQUOR LICENSE - INDIVIDUAL**  
**OR PARTNERS APPLICATION**

Class \_\_\_\_\_

To the Liquor Control Commissioner of the County of Winnebago, State of Illinois:

The undersigned hereby makes application for the issuance of a County Caterer Liquor License for the sale of alcoholic liquor for the term ending \_\_\_\_\_, \_\_\_\_\_, and hereby certifies to the following:

1. (a) Name of Applicant: \_\_\_\_\_

\_\_\_\_\_  
Residence Address City State Zip Code

\_\_\_\_\_  
Date of Birth Social Security Number

(b) Names of all partners: (If none, so state) \_\_\_\_\_

\_\_\_\_\_  
Name Residence Address

\_\_\_\_\_  
City & State Zip Code Date of Birth Social Security No.

\_\_\_\_\_  
Name Residence Address

\_\_\_\_\_  
City & State Zip Code Date of Birth Social Security No.

\_\_\_\_\_  
Name Residence Address

\_\_\_\_\_  
City & State Zip Code Date of Birth Social Security No.

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Name Residence Address

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City & State Zip Code Date of Birth Social Security No.

(c) Actual name under which applicant, will be doing business:

Assumed Name #

(d) Actual name and address of any business and type of business thereof, which is presently owned, operated or managed, by applicant and all partners, if any \_\_\_\_\_

2. Is applicant licensed as a food dispenser? \_\_\_\_\_

(a) By what public entity \_\_\_\_\_

(b) License Number \_\_\_\_\_

3. Except for the names and addresses of corporate officials of bonafide lending institutions, list the name and address of any person or persons, the name and address of any trust as well as the name and address of any said trust's officers, and the name and address of any corporation as well as the name and address of any officer thereof;

(a) who have advanced money, loans or credit to the applicant or to any of the partners of the applicant, for business or personal purposes, during the past two years, or;

(b) who have advanced money, loans or credit to the applicant or to any of the partners of the applicant for the financing of this venture, or;

(c) who have offered or promised to advance money, loans or credit to the applicant or any partner of the applicant for the financing of this venture, or;

(d) from whom the applicant or any of the partners of the applicant intend to accept money, loans or credit for the financing of this venture, or;

(e) who co-signed or acted as surety for the applicant or any of the partners of the applicant, for personal or business reasons, during the past two years, or;

(f) who has any business interest of any kind, including loans, securities or contracts, overt or covert, with the applicant or any of the partners of the applicant, connected with the business venture sought to be initiated by the issuance of the license sought by the applicant. \_\_\_\_\_

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(If insufficient space, attach separate sheet)

4. List the name of any official, elected or appointed, of any public entity or any employee of any official, elected or appointed, of any public entity, or any employee of any public entity, who has any title or interest of any kind, pecuniary or otherwise, directly or indirectly, in the business for which this license is sought.
5. 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, 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? \_\_\_\_\_
6. Does the applicant currently hold a license to sell alcoholic liquor issued by the County or any other entity? \_\_\_\_\_
- If so, list the name (s) of the entity(ies) and the year the license(s) was (were) initially granted. \_\_\_\_\_
7. Is the applicant engaged in the manufacture of alcoholic liquors? \_\_\_\_\_
- If so, at what locations? \_\_\_\_\_
8. Is the applicant engaged in the business of an importing distributor or distributor of alcoholic liquors? \_\_\_\_\_
- If so, at what location or locations? \_\_\_\_\_
9. Will the business be conducted by a manager or agent? \_\_\_\_\_

If so, give name, address, etc.:

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Name	Residence Address		
City & State	Zip Code	Date of Birth	Social Security No.

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10. Do you hold any other current business licenses issued by any public entity, wherever situated?

\_\_\_\_\_

If so, what type of license do you currently hold and what is the address of the licensed premises?

\_\_\_\_\_

11a. Applicant's date of birth: \_\_\_\_\_  
Month Day Year

Applicant's telephone number: \_\_\_\_\_

Place of birth: \_\_\_\_\_

Are you a citizen of the United States? \_\_\_\_\_

If naturalized citizen, when naturalized? \_\_\_\_\_  
Month Day Year

Where naturalized? \_\_\_\_\_  
City State

Court in which (or law under which) naturalized? \_\_\_\_\_

Have you ever been convicted of any felony under any Federal or State Law? \_\_\_\_\_

If so, give date and state of offense: \_\_\_\_\_

Have you ever been convicted of being the keeper of a house of ill fame; or of pandering or other crime misdemeanor opposed to decency and morality? \_\_\_\_\_

If so, give name of person so convicted, giving dates and stating offense: \_\_\_\_\_

Have you ever been convicted of a violation of a Federal or State liquor law since February 1, 1934? \_\_\_\_\_

If so, give dates: \_\_\_\_\_

Have you ever permitted an appearance bond forfeiture for any of the violations aforementioned?

Have you made application for a similar license from a different governmental entity?

If so, give the date, name of entity to which the application was made, and disposition of application \_\_\_\_\_

**Has any license previously issued to you by State, Federal or local authorities been revoked?**

\_\_\_\_\_

**If so, state reasons therefore and date of revocation:** \_\_\_\_\_

\_\_\_\_\_

**11b. Name of partner \_\_\_\_\_ Phone number \_\_\_\_\_**

**Date of birth:** \_\_\_\_\_

Month Day Year

**Place of birth:** \_\_\_\_\_

**Are you a citizen of the United States?** \_\_\_\_\_

**If naturalized citizen, when naturalized?** \_\_\_\_\_

Month Day Year

**Where naturalized?** \_\_\_\_\_

City State

**Court in which (or law under which) naturalized** \_\_\_\_\_

\_\_\_\_\_

**Have you ever been convicted of any felony under any Federal or State law?** \_\_\_\_\_

**If so, give date and state offense** \_\_\_\_\_

\_\_\_\_\_

**Have you ever been convicted of being the keeper of a house of ill fame; or of pandering or other crime or misdemeanor opposed to decency and morality?** \_\_\_\_\_

**If so, give dates and state offense:** \_\_\_\_\_

\_\_\_\_\_

**Have you ever been convicted of a violation of a Federal or State liquor law since February 1, 1934?** \_\_\_\_\_

**If so, give dates** \_\_\_\_\_

\_\_\_\_\_

**Have you ever permitted an appearance bond forfeiture for any of the violations aforementioned?**

\_\_\_\_\_

**Have you made application for a similar other license from a different governmental entity?** \_\_\_\_\_

\_\_\_\_\_

If so, give the dates, name of the entity to which the application was made. \_\_\_\_\_

Has any license previously issued to you by State, Federal or local authorities been revoked?

If so, state reasons therefore and date of revocation: \_\_\_\_\_

If more than one partner, provide identical information requested in 16b on a separate sheet of paper and attach hereto.

12. In accordance with Sec. 3-18 of the Winnebago County Code, using a separate sheet of paper, list all employees. List all employee's names, ages, dates of birth, addresses, condition of health, length of residence in Winnebago County and position held.

**NOTE:** In order to insure that this information is accurate and current, the County Clerk must be notified in writing of any employees' termination of employment; and any new employees hired, manager or agent included.

13. How long have you been a resident of Winnebago County? \_\_\_\_\_

**AFFIDAVIT**

**STATE OF ILLINOIS                    )**  
**COUNTY OF WINNEBAGO            ) ss.**

**I (we) swear (affirm) that I (we) will not violate any of the ordinances of the County of Winnebago or the laws of the State of Illinois or any of the laws of the United States of America, in the conduct of the place of business described herein and that the statements contained in this application are true and correct to the best of my (our) knowledge and belief.**

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

**(Signature of all partners)**

**Subscribed and Sworn to before me**  
**this \_\_\_\_\_ day of**  
\_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
**Notary Public or County Clerk**