

# City of Anna

## APPLICATION FOR LIQUOR LICENSE SPECIAL EVENT ONLY- PRIVATE PROPERTY

Must be submitted no less than forty-five (45) before the proposed event.

### Applicant Information

Date of Application: \_\_\_\_\_

Name of Business/Organization: \_\_\_\_\_  
(Special Event License Holder)

Business FEIN: \_\_\_\_\_ State License Number: \_\_\_\_\_

Contact Person: \_\_\_\_\_  
*First M. I. Last*

Permanent Address: \_\_\_\_\_  
*Street*  
\_\_\_\_\_  
*City State Zip*

Phone Number: \_\_\_\_\_ Cell Phone Number: \_\_\_\_\_

Alternate Contact Person: \_\_\_\_\_  
(Required) *First M. I. Last*

Permanent Address: \_\_\_\_\_  
*Street*  
\_\_\_\_\_  
*City State Zip*

Phone Number: \_\_\_\_\_ Cell Phone Number: \_\_\_\_\_

## Event Information

Applications will not be processed unless ALL of the following information is submitted.

1. Address of Event Location requested: \_\_\_\_\_  
Street  
\_\_\_\_\_  
City State Zip
2. Date(s) of Special Event(s): \_\_\_\_\_ (If your group is having a special event on multiple dates, one application is acceptable and one insurance policy listing all dates.)
3. Time of Special Event: From: \_\_\_\_\_ To: \_\_\_\_\_
4. Description of Event(s):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
5. Projected Total Number of Attendees \_\_\_\_\_
6. Dram Shop Insurance attached: Yes: \_\_\_ No: \_\_\_
7. Fee per Event Attached: Yes: \_\_\_ No: \_\_\_  
\$ 50.00 PER ONE DAY EVENT  
\$ 100.00 PER MULTIPLE DAY EVENT (1 TO 15 CONSECUTIVE DAYS)
8. Copy of Illinois State Liquor License/Permit attached: Yes: \_\_\_ No: \_\_\_  
(State license/permit must be turned in no less than 14 days before the event)

## Eligibility Questions

The questions below pertain to the applicant and the applicants designated event manager. If any questions are answered with a "YES," attach a full written explanation to this document.

- A. Are you delinquent in the payment of any Illinois business taxes? [235 ILCS 5/6-3]  
 YES  NO
- B. Are you delinquent under the "cash beer" law?  
 YES  NO
- C. If retailer, are you delinquent under the "30-day credit" law?  
 YES  NO
- D. Have you submitted an application for a liquor license which was denied? [235 ILCS 5/6-2(14)]  
 YES  NO
- E. Have you ever had any previous liquor license suspended or revoked? [235 ILCS 5/6-2(7)]  
 YES  NO
- F. Have you ever been convicted of a felony? [235 ILCS 5/8-2(4)]  
 YES  NO
- K. Are you, or is any other person having a direct interest in your place of business, a public or law enforcing official with jurisdictional authority? [235 ILCS 5/6-2(14)]  
 YES  NO
- L. Have you received or borrowed money or anything of value directly or indirectly from any other licensee, representatives of a licensee, or suppliers of alcoholic products?  
 YES  NO
- M. Are you more than 30 days delinquent complying with a child support payment order? [5 ILCS 100/10-65(c)]  
 YES  NO
- O. If a Corporate Licensee, is your corporation ineligible to be issued this license? [235 ILCS 5/6-2(a)(10) and 5/6-2(a)(10a)].  
 YES  NO

## Additional Documents

In addition to any and all of the documents required by the Application hereinabove, Applicant, and any and all owner(s), officer(s), partner(s), member(s), shareholder(s), premises manager(s), or agent(s) of the Applicant, where applicable, shall also be required to submit:

- A. Affidavit; and
- B. Criminal Background and Check Authorization; and
- C. Copy of photo identification card; and
- D. Check payable to the City of Anna for the amount of the requested class of License; and
- E. Any other document requested by the Commissioner or required in connection with this Application.
- F. Proof of Ownership/Lease Agreement
- G. Certificate of Insurance

- H. **Manager name and contact information; manager either live in Union County or be present during event**
- I. **If inc.—Copy of Articles of Incorporation**
- J. **Certificate of Good Standing**
- K. **Copy of Illinois State License**
- L. **If additional Affidavits / Background Authorizations needed make additional copies.**







