

Liquor License Change of Agent/Manager Application

Owner Business Name: _____ Business Name (DBA): _____

Phone: _____

The Liquor Ordinance indicates that the Manager, Agent, or Owner must be a resident of Lake County, IL and must provide proof of Lake County residency.

Liquor Manager Name: _____ Phone: _____

Home Address: _____ City: _____ State: _____ Zip: _____

Email Address: _____ Date of Birth: _____

County of Birth: _____ State of Birth: _____ Gender: _____ Race: _____

SS #: _____ Drivers License #: _____

U.S. Citizen? Yes No If naturalized citizen, provide: Date _____ Location _____

List the addresses of your last 3 residences:

Address: _____ City: _____ State: _____ Zip: _____

Address: _____ City: _____ State: _____ Zip: _____

Address: _____ City: _____ State: _____ Zip: _____

Has the applicant or member of the partnership/corporation ever been convicted of a felony under the Federal, State Law, gambling, pandering, keeping a house of ill fame or misdemeanor opposed to decency or morality, any misdemeanor, any Federal/State Liquor Laws, or forfeited any bond? Yes No

If yes, give dates & location details: _____

Changes in Interest, Partnerships, & Corporations

Per Section 6-18 of the Gurnee Municipal Code, changes in personnel or any licensee are subject to the following requirements:

- A. Any changes in the partnerships, officers, directors, persons holding directly or beneficially more than five percent (5%) of the stock or ownership interest, or managers of establishment licensed under this Chapter, shall be reported in writing to the local Liquor Control Commissioner within ten (10) days of this change. All such persons shall meet all the standards of this ordinance and must otherwise qualify to hold a license.

AFFIDAVIT

I (we) swear that I (we) will not violate any of the ordinances of the Village of Gurnee or laws of the State of Illinois or 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 knowledge and belief.

Liquor Manager (Print)

Liquor Manager (Signature)

Subscribed and sworn to before me this

SEAL

____ day of _____ AD _____

Notary Public: _____

Submit Completed Application to:

Village of Gurnee • 325 N. O'Plaine Road • Gurnee, IL 60031 • Phone: 847-599-7500 • Fax: 847-623-9475