



Liquor License Change of Agent, Manager or Director Form

Legal business name: _____

Doing business as: _____ Telephone #: (____) _____

Is Primary Manager or agent conducting business? YES NO

If so, Manager, Agent must provide:

Name: _____

Home Address: _____

Home Telephone: (____) _____

Race: _____ Sex: _____

Date of Birth: _____

Place of Birth, State and County: _____

SS#: _____

Drivers License #: _____

Citizenship: _____

If naturalized citizen, when & where: _____

List last three residence addresses: (City and State Zip Code)

1. _____

2. _____

3. _____

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 or State liquor laws, or forfeited any bond? _____

If yes, give dates and location details:

Village Liquor Ordinance indicates that the Manager, Agent or Owner must be a resident of Lake County, Illinois. Under Section 6-18 of the Gurnee Municipal Code, **Changes in Interest, partnerships, and Corporations**. Changes in personnel of any licensee are subject to the following requirements.

- A. Any changes in the partnerships, officers, directors, persons holding directly or beneficially more the 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 swear that I 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.

X _____
(Signature of Applicant)

Subscribed and sworn to me before this
_____ day _____ of _____ A.D.

Notary: _____

NOTE: Before returning your completed application, please make sure all fields are completed. If there is a question(s) that does not apply to your operation, complete with NA (Not Applicable) in order to speed processing.

Return completed form to Gurnee Village Hall, 325 N. O'Plaine Road, Gurnee, IL 60031