



Liquor Control Commissioner  
Village of Wilmette, Illinois

## APPLICATION FOR VILLAGE OF WILMETTE CLASS E LIQUOR LICENSE\*

\* This application requests information pursuant to Chapter 11, Liquor Control of the Municipal Code of Wilmette, 1993 (as amended). Failure to provide any information will result in the automatic denial of a license.

Date Application Submitted: _____	Fee Tendered: \$ _____
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FOR OFFICE USE ONLY	
Date Received: _____, 20__	
Disposition: _____ Denied	Date: _____, 20__
_____ Granted	License # _____
	Date License Issued: _____, 20__
	Date License Expires: _____, 20__

**GENERAL INFORMATION**

Applicant Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone#: \_\_\_\_\_

Fax #: \_\_\_\_\_

Web Site or E-mail Address: \_\_\_\_\_

Indicate whether this is your first application for a Class E Liquor license:    ڤ Yes                      ڤ No

If you have ever had a Class E Application denied, please provide a separate written statement setting forth the reasons and circumstances.

**STATUS OF APPLICANT**

Club                            Date of Formation: \_\_\_\_\_

Association                  Date of Formation: \_\_\_\_\_

Church                         Date of Formation: \_\_\_\_\_

Charity                         Date of Formation: \_\_\_\_\_

Individual                     Date of Birth: \_\_\_\_\_

School                         Date of Formation: \_\_\_\_\_

Other                           \_\_\_\_\_

**EVENT INFORMATION**

ڤ Annual Event                      ڤ New Event

Name of Event: \_\_\_\_\_

Location: \_\_\_\_\_

Date(s): \_\_\_\_\_

Hours: \_\_\_\_\_(am/pm) to \_\_\_\_\_(am/pm)

Description of Event: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Estimated Number of Attendees: \_\_\_\_\_

Name(s) and Phone# of person(s) in charge of the Event:

Name: \_\_\_\_\_ Phone# \_\_\_\_\_

Name: \_\_\_\_\_ Phone# \_\_\_\_\_

Name: \_\_\_\_\_ Phone# \_\_\_\_\_

Name: \_\_\_\_\_ Phone# \_\_\_\_\_

Does the Applicant maintain Comprehensive General Liability Insurance:    ڤ Yes            ڤ No

**CERTIFICATION**

I, the undersigned Applicant or authorized agent thereof, swear, affirm and certify that the matters stated in this Application are true and correct and are made upon my personal knowledge and information for the express purpose of obtaining a liquor license from the Village of Wilmette. Further, I swear, affirm and certify that the Applicant is qualified and eligible to obtain the license applied for and that the Applicant understands and agrees not to violate any of the laws of the United States of America, the State of Illinois or the Village of Wilmette.

\_\_\_\_\_  
Print Name of Applicant/Authorized Agent

\_\_\_\_\_  
Title/Position

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature