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APPLICATION FOR STATE OF ILLINOIS SPECIALTY LIQUOR LICENSE AUCTION — AIRPLANE — BOAT — RAILROAD

The following are various classes of specialty liquor licenses. Check the box that applies to the type/class of license for which you are applying. Be sure to acquire the proper supporting documents required for the particular license class. If the supporting documents are not included, your application will be rejected.

A. <input type="checkbox"/> AUCTION **PLEASE INCLUDE COPY OF STATE AUCTIONEER LICENSE**	FEE: \$150.00 PER AUCTION
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An auction liquor license means a person who obtains prior written approval from the State Commission to sell or offer for sale at auction, on a specified date, wine or spirits for private use or consumption, or for resale by an Illinois liquor licensee in accordance with the provisions of the Liquor Control Act ILCS 5/1-3.32. An auction liquor license will be issued to a person and it will permit the auction liquor licensee to hold the auction anywhere in the State. An auction liquor license must be obtained for each auction at least 14 days in advance of the auction date. **A \$25.00 late fee will be required if the application is not received 14 days in advance of the auction date.**

B. <input type="checkbox"/> AIRPLANE	FEE: \$150.00 PER PLANE
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An airplane liquor license shall permit the licensee to import alcoholic liquors into this state from any point in the United States outside this state and to store such alcoholic liquors in this state; to make wholesale purchases of alcoholic liquors directly from manufacturers, any class of distributor from within or outside this state. An airplane license shall permit the sale or dispensing of alcoholic liquors on any passenger airplane regularly operated by a common carrier in this state, but shall not permit the sale for resale of any alcoholic liquors to any licensee within this state. **SUPPORTING DOCUMENTS REQUIRED:** Tax bond required by one of the following enclosed forms: a) REG-4-A, Financial Responsibility Bond, or b) REG-4-D, Financial Institution Irrevocable Letter of Credit Bond.

C. <input type="checkbox"/> BOAT	FEE: \$1,000.00
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A boat license shall allow the sale of alcoholic liquor in individual drinks, on any passenger boat regularly operated as a common carrier on navigable waters in this state, on which the boat maintains a public dining room or restaurant thereon. **SUPPORTING DOCUMENTS REQUIRED:** Tax bond required by one of the following enclosed forms: a) REG-4-A, Financial Responsibility Bond, or b) REG-4-D, Financial Institution Irrevocable Letter of Credit Bond.

D. <input type="checkbox"/> RAILROAD	FEE: \$150.00 PER DINING, LOUNGE, BUFFET, OR CLUB CAR
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A railroad license shall permit the licensee to import alcoholic liquors into this state from any point in the United States outside this state and to store such alcoholic liquors in this state; to make wholesale purchases of alcoholic liquors directly from manufacturers, any class of distributor from within or outside this state. A railroad license shall permit the sale or dispensing of alcoholic liquors on any passenger rail car regularly operated by a common carrier in this state, but shall not permit the sale for resale of any alcoholic liquors to any licensee within this state. **SUPPORTING DOCUMENTS REQUIRED:** Tax bond required by one of the following enclosed forms: a) REG-4-A, Financial Responsibility Bond, or b) REG-4-D, Financial Institution Irrevocable Letter of Credit Bond.

IMPORTANT NOTICE: THE ILLINOIS LIQUOR CONTROL COMMISSION IS REQUESTING DISCLOSURE OF INFORMATION THAT IS NECESSARY UNDER THE ILLINOIS LIQUOR CONTROL ACT (235 ILCS 5/1 ET SEQ.). DISCLOSURE OF THIS INFORMATION IS MANDATORY. FAILURE TO PROVIDE ANY INFORMATION WILL RESULT IN THE NON-ISSUANCE OF YOUR LICENSE.

A. AUCTION LICENSE APPLICANTS ONLY:

AUCTION DETAILS:

- A. Provide the date and time that the auction will be held. When you receive your printed license certificate from the Commission, times will be listed in military time; ie “0200” = 2AM, “1200” = noon, “2400” = midnight; etc.
- B. Provide the address/location of the auction. If an address is not available, provide specific instructions to enable our investigators to find the location.

Date of Auction From (Month/Day/Year)	Time From (AM/PM)	Date Of Auction To (Month/Day/Year)	Time From (AM/PM)	Auction Address (Street Address/City/State/Zip)

B. AIRPLANE AND RAILROAD LICENSE APPLICANTS ONLY:

You may fill out one application, but you must obtain a license certificate for each airplane or applicable rail car. A license certificate must be on each plane or train that serves alcoholic beverages.

Indicate how many airplanes or rail cars are to be issued certificates:

FEE: \$ _____	\$150.00 Per Plane, i.e., If you have 50 planes traveling in Illinois, the fee would be a total of \$7,500. (50 x \$150=\$7,500)
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FEE: \$ _____	\$150.00 Per Rail Car, i.e., If you have 5 rail cars where alcoholic beverages are served/sold traveling in Illinois, the fee would be a total of \$750. (5 x \$150=\$750)
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C. BOAT LICENSE APPLICANTS ONLY:

READ MESSAGE BELOW AND CONTINUE TO PAGE (3).

The following applies to all licenses:

MAKE CHECK OR MONEY ORDER PAYABLE TO THE ILLINOIS LIQUOR CONTROL COMMISSION.
THE COMMISSION DOES NOT ACCEPT U.S. CURRENCY/CASH AS PAYMENT.

PLEASE PRINT OR TYPE THE INFORMATION REQUESTED IN THE SPACES PROVIDED. THE APPLICATION FORM MUST BEAR AN ORIGINAL SIGNATURE.

2. STATUS OF BUSINESS

Check the applicable box (sole proprietorship, partnership, Illinois corporation, foreign corporation, limited liability company) which corresponds to your business' official papers filed with the Office of the Illinois Secretary of State.

Based on the box that you check, provide the date of the filing of the sole proprietorship with the county clerk; in the case of a partnership, the date of formation of the partnership; in the case of an Illinois corporation, the date of its incorporation; in the case of a foreign corporation, the foreign state where it was incorporated and the date, as well as the date of its becoming qualified under the "Business Corporation Act of 1983" to transact business in the State of Illinois; or in the case of a limited liability company, the date of formation of such entity.

- A. Sole Proprietorship Date Filed with County Clerk: _____
- B. Partnership Date of Formation: _____
- C. Illinois Corporation Date of Incorporation: _____
- D. Foreign Corporation State of Incorporation: _____ Date Qualified to do Business in IL: _____
- E. Limited Liability Company Date Formed: _____

3. OWNERSHIP INFORMATION

Provide the owner/officer/partner information in accordance with the business status described under Question 2. This information must be submitted for all owners/officers/partners. The same information must be submitted for shareholders with interests equal to or exceeding five percent.

The following information must be provided for each individual applicant, sole proprietor, partner, corporate officer or director (whether or not they own any stock), shareholder owning in the aggregate stock equal to or more than five percent, (including officers, directors and shareholders with stock equal to or more than five percent for all corporate shareholders), and/or manager or agent conducting the business. Indicate the total percentage of stock of the corporation, if any, which is held by persons who hold less than a five percent interest. If additional space is needed, provide information on a separate sheet(s) in the same format as this application requires. **Before completing this section, check the questions in Section 5 - Eligibility.**

For each owner/officer/partner/five percent shareholder, provide full name, home address, city, state, ZIP code, Social Security number, date of birth, sex, title/position, home telephone number, and percentage ownership. Percentage ownership should equal 100 percent. If there are a number of shareholders owning less than five percent, indicate the aggregate total of ownership under Line E.

A.

NAME (LAST, FIRST, MIDDLE INITIAL)			HOME ADDRESS		CITY	STATE	ZIP
SOCIAL SECURITY NO.	DATE OF BIRTH	SEX	TITLE/POSITION	AREA CODE/HOME TELEPHONE		% OWNED	
				()			

B.

NAME (LAST, FIRST, MIDDLE INITIAL)			HOME ADDRESS		CITY	STATE	ZIP
SOCIAL SECURITY NO.	DATE OF BIRTH	SEX	TITLE/POSITION	AREA CODE/HOME TELEPHONE		% OWNED	
				()			

C.

NAME (LAST, FIRST, MIDDLE INITIAL)			HOME ADDRESS		CITY	STATE	ZIP
SOCIAL SECURITY NO.	DATE OF BIRTH	SEX	TITLE/POSITION	AREA CODE/HOME TELEPHONE		% OWNED	
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D.

NAME (LAST, FIRST, MIDDLE INITIAL)			HOME ADDRESS		CITY	STATE	ZIP
SOCIAL SECURITY NO.	DATE OF BIRTH	SEX	TITLE/POSITION	AREA CODE/HOME TELEPHONE		% OWNED	
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E. Total percentage of all stock held by persons with less than five percent interest _____ %

4. BUSINESS PREMISE INFORMATION

If you want your renewal application, your license certificate and other ILCC correspondence sent to your business premise address, please check this box.

A. NAME/DOING BUSINESS AS (DBA)

Enter the name of the business which will be selling or serving alcoholic beverages at the licensed premises. **Note: This name must be consistent with the name printed on your Illinois Department of Revenue Sales Tax Certificate.**

NAME (DOING BUSINESS AS DBA)

B. TELEPHONE

Enter the area code, telephone number and extension at the business premise location.

AREA CODE/TELEPHONE NO.	
()	EXT.

C. ADDRESS

Enter the address, city, state, ZIP code and county of the business premises. This address information must be consistent with information on your local liquor license and on your Illinois Department of Revenue Sales Tax Registration Certificate.

ADDRESS	CITY	STATE	ZIP CODE	COUNTY

D. WAREHOUSING

If any of your inventory is warehoused, provide the name, street address, city, state, ZIP code and county of the warehouse.

ADDRESS	CITY	STATE	ZIP CODE	COUNTY

E. LEASED PREMISES

If you lease your premises, the lease must cover the full term of the license. If you lease, provide the landlord's name, telephone number, street address, city, state, ZIP code and county.

LANDLORD NAME		AREA CODE/TELEPHONE NO.		
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ADDRESS	CITY	STATE	ZIP CODE	COUNTY

5. ELIGIBILITY QUESTIONS

These questions apply to the applicant and any other person listed under Section 3. These questions must be answered. If the questions are not checked, the application will be rejected. If any question is checked "yes," a written, detailed explanation is required and must be attached to this application.

- 6-18 YES NO Are you delinquent in the payment of any Illinois business taxes (sales, withholding, etc.)?
- 6-19 YES NO Are you delinquent under the "cash beer" law?
- 6-20 YES NO Are you delinquent under the "30-day credit" law?
- 6-22 YES NO Have you ever applied for and been denied a liquor license?
- 6-23 YES NO Have you had any previous liquor license revoked?
- 6-24 YES NO Have you ever been convicted of a felony?
- 6-25 YES NO Have you ever been convicted of a gambling offense as defined under section 5/6-2 of the act which includes offenses enumerated in 720 ILCS 5/28-1(a)1-11, "gambling;" 720 ILCS 5/28-1.1(a)-(d) "syndicated gambling;" and 720 ILCS 5/28-3 "keeping a gambling place"?
- 6-26 YES NO Do you possess a current federal wagering stamp? (issued by the United States Internal Revenue Service to tax wagering activity)
- 6-27 YES NO Are you, or any other person with a direct interest in your place of business, a public official or law enforcement official in the same jurisdiction as the license?
- 6-28 YES NO Have you received or borrowed money or anything of value directly or indirectly from any other licensees, representatives of a licensee, or suppliers of alcoholic products?
- 6-30 YES NO If operating as a sole proprietorship or a partnership, are you or your partner(s) currently not citizens of the United States or resident aliens with legal status?

6. SIGNATURE/TITLE/DATE

Please sign and date the application form and provide your title with the organization. The application must be signed by an owner, an officer, a partner or an officially authorized agent of the business. **The signature must be an original;** rubber stamps, photocopies, or faxed copies are not accepted.

I, THE UNDERSIGNED APPLICANT OR AUTHORIZED AGENT THEREOF, SWEAR OR AFFIRM THAT: THE MATTERS STATED IN THE FOREGOING APPLICATION ARE TRUE AND CORRECT; THEY ARE MADE UPON MY PERSONAL KNOWLEDGE AND INFORMATION; THEY ARE MADE FOR THE PURPOSE OF REQUESTING THE STATE OF ILLINOIS TO ISSUE THE LICENSE HEREIN APPLIED FOR; THE APPLICANT IS QUALIFIED AND ELIGIBLE TO OBTAIN THE LICENSE APPLIED FOR; AND THE APPLICANT WILL NOT VIOLATE ANY OF THE LAWS OF THE UNITED STATES OF AMERICA OR THE STATE OF ILLINOIS, IN PARTICULAR, THE ILLINOIS LIQUOR CONTROL ACT, RULES AND REGULATIONS, AND THE CIVIL RIGHTS SECTIONS THEREOF.

FURTHER, I AGREE TO NOTIFY THIS COMMISSION WITHIN 30 WORKING DAYS OF CHANGES IN ANY OF THE ABOVE INFORMATION

SIGNATURE OF APPLICANT/AUTHORIZED AGENT

TITLE/POSITION

DATE