



190 W Station St. • P.O. Box 396 • St. Anne, IL 60964
Main/Billing 815-427-6783 • Public Works 815-427-8177 • Police 815-427-8126
www.villageofstanne.com

Application for Liquor License

The liquor control commissioner of the Village of St. Anne in Kankakee County, and the State of Illinois: The undersigned hereby makes application for a license for the sale of alcoholic liquors and beer under the provisions of an ordinance entitled “An Ordinance to Regulate the Sale of Alcoholic Beverages and Beer”, adopted January 4, 1943 and as amended in 1976, 1998 and 2015, and in support of said application states:

SECTION 1

License Applied For: Class A ☐ Class B ☐ Class C ☐
License Applied For: New ☐ Renewal ☐ Special Use ☐

If individual, complete Section 3 only.

If corporation or partnership, complete Sections 2 & 3

SECTION 2 *(Please Print)*

Business Name

Name of Registered Agent for Service of Process

Date of Organization

Address

Name of CEO or Managing Partner

City *State* *Zip*

Address of Retail outlet for which application is made

Phone

SECTION 3 *This section to be completed by the CEO, Managing Partner, or Individual (Please Print)*

Applicant's Name

Social Security Number

Address

Driver's License or State ID Number *State*

City *State* *Zip*

Place of Birth

Phone

Section 3 Continued on the following page

DOB



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SECTION 3 *Continued (Please Print)*

Is the applicant a US Citizen Yes ☐ No ☐

If the applicant is a naturalized citizen, the naturalization took place on the _____ day of _____, _____
by the order of the Court of the County of _____ and the State of _____

Has a previous liquor license issued to the applicant by state of subdivision thereof, or the Federal Government
ever been revoked? Yes ☐ No ☐

If yes, explain _____

Has the applicant ever been convicted of a felony? Yes ☐ No ☐

The liquor ordinance of the Village of St. Anne states that “No liquor license shall be issued to a person whose place of business is conducted by a manager or agent unless said manager or agent possesses the same qualifications required by the licensee”. Therefore, applicant agrees that any such manager or agent will submit the information requested on the enclosed form titled “Statement of Manager or Agent” at time of such individual’s employment to manage sales under any license which may be issued upon approval of this application.

Signature

Date

ACKNOWLEDGMENT

STATE OF ILLINOIS)
 : ss.
County of _____)

On the _____ day of _____, _____, before me, the undersigned Notary Public,
personally appeared _____, known to me to be the person whose name
is subscribed to the foregoing instrument, and acknowledged to me that s/he executed the same.

IN WITNESS WHEREOF, I have set my hand and seal the day and year as above written.

Notary Public for Illinois

Residing at _____
Commission Expires: _____