



Village of Round Lake

442 North Cedar Lake Road, Round Lake, IL 60073
847-546-5400 fax 847-546-5405
www.eroundlake.com

APPLYING FOR A LIQUOR LICENSE

SELECT A SITE AND CHECK THE ZONING

To begin the process, please complete and return the Zoning Compliance worksheet from the Business License application packet. The proposed business will be reviewed for zoning and land use regulations. If the proposed business is a Special Use, additional time must be allowed for the approval process. The sale of alcohol requires a Special Use in the following zoning districts: C-1, C-2, C-3, C-4 and I-1.

BACKGROUND SCREENING

All owners and managers must submit to a background check and fingerprinting. Complete and return the Background Screening Disclosure along with payment in the amount of forty-five dollars (\$45.00) for each applicant, to the Village Hall. Once payment is made, your application will be forwarded to the Police Department who will contact you to set up an appointment for your screening. The timeframe on the results is typically 4-6 weeks. After a background check has been completed and if there is no issue of concern, the Special Use process may commence.

SPECIAL USE PROCESS

A public hearing will be held with the Plan Commission/ Zoning Board of Appeals (PCZBA). The PCZBA will recommend approval or denial to the Board of Trustees. The Board of Trustees has the final decision on all zoning matters. If the special use is granted, the liquor license application will be submitted to the Liquor Commissioner for review, approval, or denial. The filing fee for a Special Use is five-hundred dollars (\$500.00), due at time of application submittal. Due to legal notice requirements, the process for a Special Use typically takes 4-6 weeks. Please visit the Village website for a meeting calendar.

APPLY FOR BUILDING/SIGN PERMITS

If you are doing any remodeling or installing signage, you must obtain a building permit. Please contact the Building Department at (847)546-0963 to apply for the necessary permits.

BUSINESS OCCUPANCY INSPECTION

Your floor plan will be reviewed and the Building Department will contact you to schedule a Business Occupancy Inspection. The Building Inspector and Fire Marshal will conduct a thorough inspection to ensure the building meets the current code standards. The Business and Liquor Licenses will not be issued until inspection approval has been given.

It is the applicant's responsibility to obtain the necessary permits from the Lake County Department of Health. The Business Occupancy Inspection may not be scheduled until the Health Department approval is received.

LICENSE ISSUANCE

The Village will contact the applicant once the License is ready for issuance. The license will be prepared within 2-5 business days. The license fee must be paid at time of issuance. The term of the license year is May 1 to April 30.

GRAND OPENING

Please notify the Village Clerk and/or the Deputy Clerk of the date and time of your Grand Opening Event. Depending on availability, Village Officials will gladly attend.



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LIQUOR LICENSE SUBMITTAL CHECKLIST

To get the process started, please submit the following:

- Completed Liquor License Application;
- Completed Business License Application and supporting documentation;
- Completed Background Screening Disclosure for applicant(s) and manager(s);
- Completed Verification, notarized;
- A color copy of driver's license for applicant(s) and manager(s).

Once background screening is complete, the following must be submitted:

- Completed petition packet for Special Use and supporting documentation;
- Certificate of Insurance:
 - Submit Dram Shop Insurance. Each applicant for a license shall furnish evidence of insurance coverage against Dram Shop liability as established by the Illinois Liquor Control Act, Chapter 235 ILCS 5/6-21, covering the proposed licensee and the owner of the premises for a full twelve (12) month period.
 - In addition to dram shop insurance required by state law, all liquor licensees during the term of their license shall further maintain and provide a certificate of insurance showing proof of general liability insurance coverage as to the licensee, the premises and including the **village and the village liquor commissioner as co-insured (additional insured)** in liability amounts of not less than one million dollars (\$1,000,000.00) per occurrence;
- Bassett Training Certificates for all individuals selling and/or serving alcoholic beverages;
- If premises are owned by the applicant, attach a copy of deed or title policy;
- If premises is leased, attach a copy of lease;
- If premises is held in trust, provide a copy of the trust agreement;
- Enclose a copy of the floor plan of your establishment, designating the square footage of the facility and the area where liquor will be sold. If you are a restaurant, indicate seating capacity and lounge area, if any;
- For Sole Proprietors, enclose a copy of the Assumed Business Name Certificate from Lake County;
- For Corporations and LLCs, enclose the Articles of Incorporation/ Organization;
- For Partnerships, enclose the Partnership Agreement;

Items to submit after State Approvals are received:

- A copy of your State of Illinois Liquor License;
- A copy of your State Gaming License (if applicable.)

Acceptable forms of payment: Credit Card (MasterCard/Discover/American Express, NO VISA) cash, check (payable to the Village of Round Lake)



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BACKGROUND SCREENING DISCLOSURE AND WRITTEN AUTHORIZATION

(Please read this form carefully)

DISCLOSURE

I have been notified that the Village of Round Lake and the Round Lake Police Department may request that a background screening be conducted to verify any information I have provided in connection with my liquor license application.

The Village of Round Lake or the Round Lake Police Department may request a consumer report and/or an investigative consumer report in connection with my liquor license application or at any time during my liquor license is valid in accordance with all applicable laws. These reports may include information about my background, including but not limited to character, mode of living, criminal history records, sex offender registry records, Social Security records, educational records, employment records, credit reports, driving records, and license/certification records, or any other such record, written or otherwise, that is deemed appropriate.

Upon written request to the Village of Round Lake and proper identification, I have the right to be informed when a consumer report or investigative consumer report is conducted, and the right to make a request to Innovative Credit Solutions, the consumer reporting agency vendor, within a reasonable period of time, as to the nature and substance of all information in its files on me at the time of my request, including the sources of information and the recipients of any reports on me that Innovative Credit Solutions has previously furnished. Communications with Innovative Credit Solutions should be directed to PO Box 1386, Columbia, South Carolina 29202 800-345-2746.

AUTHORIZATION

My signature below authorizes the procurement of a consumer report and/or investigative consumer report upon the Village of Round Lake or the Round Lake Police Department's request in conjunction with my application for a liquor license.

I have read this Disclosure and Written Authorization; I understand the provisions stated herein, and I agree to the terms.

Print Name (First, MI, Last)

Social Security Number

Signature

Driver's License Number, State, & Expiration Date

Date

Date of Birth



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APPLICATION FOR LIQUOR LICENSE

TYPE OF LICENSE REQUESTED

<input type="checkbox"/>	CLASS A	(TAVERN WITH FULL LIQUOR PACKAGED GOODS)	\$1,200.00
<input type="checkbox"/>	CLASS A-1	(TAVERN WITH FULL LIQUOR PACKAGED GOODS, LIMITED HOURS)	\$1,200.00
<input type="checkbox"/>	CLASS B	(PACKAGED GOODS - FULL LIQUOR)	\$1,200.00
<input type="checkbox"/>	CLASS B-1	(PACKAGED GOODS - BEER AND WINE)	\$1,200.00
<input type="checkbox"/>	CLASS B-2	(RESTAURANT - BEER AND WINE)	\$1,200.00
<input type="checkbox"/>	CLASS B-3	(RESTAURANT - FULL LIQUOR)	\$1,200.00
<input type="checkbox"/>	CLASS C	(NON-PROFIT CLUBS)	\$1,200.00
<input type="checkbox"/>	CLASS C-1	(CATERING)	\$1,200.00
<input type="checkbox"/>	CLASS D	(SPECIAL EVENT/TEMPORARY)	\$ 50.00
<input type="checkbox"/>	CLASS D-1	(SPECIAL VILLAGE SPONSORED EVENT)	\$ 150.00
<input type="checkbox"/>	CLASS E	(BRING YOUR OWN LIQUOR, "BYO")	\$ 600.00
<input type="checkbox"/>	CLASS F	(ANNUAL TWENTY-SIX (26) INTERMITTENT DATE)	\$1,000.00
<input type="checkbox"/>	LATE-HOUR	(FOR CLASS A, B-2 AND B-3 HOLDER, CLOSING TIME IS 3AM)	\$ 100.00
<input type="checkbox"/>	CLASS RP	(RESTAURANT PACKAGE GOODS, FOR A CLASS B-2 OR B-3 HOLDER)	\$ 600.00
<input type="checkbox"/>	VIDEO GAMING	(FOR CLASS A, B-2, B-3, C ONLY, COST IS PER TERMINAL*REQUIRES SEPARATE APPLICATION)	\$ 25.00

BUSINESS INFORMATION

BUSINESS NAME:

DBA:

ADDRESS:

CITY:

STATE:

ZIP:

PHONE:

FAX:

WEBSITE:

BUSINESS EMAIL:

MANAGER INFORMATION

NAME:

ADDRESS:

CITY:

STATE:

ZIP:

PHONE:

FAX:

EMAIL:

APPLICANT INFORMATION

RELATIONSHIP TO THE BUSINESS FOR WHICH THE LICENSE IS SOUGHT:

OWNER OFFICER DIRECTOR SHAREHOLDER LLC MANAGER PARTNER

NAME:

ADDRESS:

CITY:

STATE:

ZIP:

BIRTHDATE:

SOCIAL SECURITY #

DRIVER'S LICENSE/STATE ID #

STATE ISSUED:

U.S CITIZEN? YES NO

PLACE OF BIRTH:

DATE AND PLACE OF NATURALIZATION:

APPLICANT BACKGROUND INFORMATION

HAS THE APPLICANT EVER BEEN ISSUED A LIQUOR LICENSE?

YES NO

IF YES, LIST CITY, STATE AND DATE OF ISSUANCE:

HAS THE APPLICANT EVER HAD ANY LIQUOR LICENSE SUSPENDED OR REVOKED?

YES NO

IF YES, PROVIDE A DETAILED EXPLANATION AND DOCUMENTATION:

HAS THE APPLICANT EVER BEEN CONVICTED OF:

A FELONY UNDER ANY STATE OR FEDERAL LAW?

YES NO

PANDERING OR A SIMILAR OFFENSE?

YES NO

ANY VIOLATION UNDER A STATE OR FEDERAL LIQUOR LAW?

YES NO

ANY GAMBLING OFFENSE?

YES NO

FOR ALL YES ANSWERS, PROVIDE A DETAILED EXPLANATION (INCLUDING STATE OF OFFENSE, DATE OF CONVICTION, SENTENCE IMPOSED, AND JURISDICTION WHICH CONVICTED) AND INCLUDE DETAILED DOCUMENTATION.

TYPE OF BUSINESS ENTITY CORPORATION LIMITED LIABILITY COMPANY PARTNERSHIP SOLE PROPRIETOR OTHER:

HAVE YOU OR WILL YOU BE APPLYING FOR A STATE OF ILLINOIS VIDEO GAMING LICENSE?

 YES NO**FOR SOLE PROPRIETORS**

ASSUMED BUSINESS CERTIFICATE FROM LAKE COUNTY ATTACHED

 YES**FOR PARTNERSHIPS**

DATE OF FORMATION:

PARTNERSHIP AGREEMENT ATTACHED

 YES

APPLICANT INFORMATION PAGE COMPLETED AND ATTACHED FOR EACH PARTNER

 YES**FOR CORPORATIONS**

NAME OF CORPORATION/ LLC:

DATE OF INCORPORATION:

CERTIFICATE OF INCORPORATION BEEN FILED WITH THE STATE OF ILLINOIS?

 YES NO

IS THE CORPORATION OR LLC, IS IT IN GOOD STANDING WITH THE STATE OF ILLINOIS?

 YES NO

IF A FOREIGN CORPORATION, IS IT AUTHORIZED TO TRANSACT BUSINESS IN ILLINOIS?

 YES NO**IF YES, A CERTIFICATE OF QUALIFICATION IS ATTACHED** YES NOARTICLES OF INCORPORATION DEPICTING THE NAMES OF ALL STOCKHOLDERS,
OFFICERS, DIRECTORS AND THEIR POSITIONS ARE ATTACHED. YES

I UNDERSTAND THE ISSUANCE OF THIS LICENSE IS CONDITIONAL UPON COMPLIANCE WITH ALL VILLAGE CODES AND ORDINANCES, STATE AND FEDERAL LAW, AND THE RESULTS OF ANY INSPECTIONS REQUIRED BY ORDINANCE AT THIS TIME AND ANY FURTHER INSPECTIONS WHILE THIS LICENSE IS IN FORCE. I HAVE READ THIS APPLICATION AND ANSWERED ALL QUESTIONS FULLY. THE INFORMATION I HAVE SUBMITTED IN THIS APPLICATION IS COMPLETE AND TRUTHFUL TO THE BEST OF MY KNOWLEDGE.

*SIGNATURE OF APPLICANT**DATE***FOR OFFICE USE**

LIQUOR CLASS: _____ FEE: \$ _____

SU APPROVED: _____

LIQUOR CLASS: _____ FEE: \$ _____

LL APPROVED: _____

LIQUOR CLASS: _____ FEE: \$ _____

AMOUNT PAID: _____

CHECK NUMBER: _____

TOTAL LICENSE FEE: \$ _____



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(STATE OF ILLINOIS)

SS.

(COUNTY OF LAKE)

VERIFICATION

I, _____, being duly sworn, depose and say that I am the

PRINT NAME

_____ and have answered the questions in the application with a complete

PRESIDENT, PARTNER, OWNER, ETC.

understanding of the questions asked and the answers given. The answers given are true in substance and in fact and are offered to induce the Liquor Control Commissioner to issue a liquor license to the applicant.

Applicant Signature

Sworn to before me

this _____ day of _____, 201__.

SEAL

Notary Signature