



\_\_\_ Partnership                      \_\_\_ Limited Liability Partnership      \_\_\_ Individual(s)  
\_\_\_ Limited Partnership            \_\_\_ Corporation

FEIN: \_\_\_\_\_ Current State Liquor License Number: \_\_\_\_\_

Date of Incorporation/Organization (if applicable) \_\_\_\_\_

Date liquor sales expected to begin: \_\_\_\_\_

**6. OWNERSHIP INFORMATION FOR ENTITIES:**

The following information must be provided for each applicant, sole proprietor, partner, corporate officer, director, or shareholder with interests equal to or exceeding 5%. Not-for-profit organizations and associations must provide the requested information for all officer holders, directors, and managers. Please attach a copy of a photo ID for each person listed.

Full Legal Name:

\_\_\_\_\_

Title/Position: \_\_\_\_\_ Percent Interest: \_\_\_\_\_

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

Mailing Address (if different): \_\_\_\_\_

Home and Cell Phone Numbers: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Driver's License or ID Number: \_\_\_\_\_

*Note: If more than one owner/officer/director/member, please attach an additional page with the information above contained therein.*

**7. OWNERSHIP INFORMATION FOR INDIVIDUAL (S):**

Full Legal Name:

\_\_\_\_\_

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

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

Mailing Address (if different): \_\_\_\_\_

Home and Cell Phone Numbers: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Driver's License or ID Number: \_\_\_\_\_

*Note: If more than one individual hosting the event, please attach an additional page with the information above contained therein.*

**8. ELIGIBILITY QUESTIONS**

- a) Are you a citizen of the United States?
- b) If a naturalized citizen, when and where naturalized?
- c) Court in which (or law under which) naturalized?
- d) Are you a resident of Putnam County?
- e) How long have you been a resident of Putnam County?
- f) Do you own or lease the premises to be licensed (specify which)?
- g) Are you delinquent in the payment of any Putnam County real estate tax?
- h) Are any delinquent real estate taxes owed on the property at the business address listed in Section 1?
- i) Are you a public or law enforcement official in Putnam County?
- j) Have you ever been arrested, convicted, placed on supervision, received a deferred prosecution, or received a bond forfeiture or violation of pretrial release? If YES, please state offense(s) and give date of offense and jurisdiction:  
\_\_\_\_\_  
\_\_\_\_\_
- k) Have you ever been convicted of a crime with a State or Federal felony classification?
- l) Have you ever been denied a liquor license? If YES, state where and circumstances:  
\_\_\_\_\_  
\_\_\_\_\_

**9. DRAM SHOP (FOR SALE OF ALCOHOL) OR LIQUOR LIABILITY INSURANCE (FOR PROVIDING ALCOHOL)**

If the applicant is selling alcohol on the premises, does the applicant have dram shop liability insurance in the amount currently required by the State of Illinois?

If the applicant is providing alcohol on the premises, does the applicant have liquor liability insurance in the amount of \$1 Million Dollars naming the County and event location as Additional Insured?

If yes, please provide a Certificate of Insurance issued by an insurance company licensed to do business in the State of Illinois.

If no, the applicant is not eligible for a license.

**10. AFFIRMATION**

I, the undersigned applicant or authorized agent thereof, swear or affirm that the matters stated in the foregoing application are true and accurate to the best of my knowledge.

I agree to comply with the terms and conditions of the current Putnam County Liquor Ordinance.

By signing this agreement, the applicant(s) hereby agrees to defend, indemnify, release, hold harmless and forever discharge the County of Putnam, Illinois, its officials, agents, employees and the event location against any and all actions, suits, damages, claims, injuries, deaths, loss, liabilities, judgments, costs and expenses (including attorneys fees), which may in anywise accrue against the County of Putnam, Illinois, its officials, agents, employees and event location, arising in whole or in part of from any injuries, loss or damages that may be sustained while participating or that had participated in the the above mentioned event. The applicant assumes risk for any personal injury or property damages that may be sustained during the above requested event.

Further, the applicant shall be liable and shall indemnify the County of Putnam, Illinois, its agents, employees and the event location from any injury or loss sustained by a third party, which results from conduct or participation in the above specified event. We agree to fully defend the County of Putnam, Illinois, its agents, employees and the event location from any litigation that may arise from the above mentioned events.

Applicant acknowledges and agrees the above described event is sponsored, given, held and/or conducted solely by Applicant and/or its agents or representatives and solely for the benefit of the applicant, its assigns, guests and members. The event is not being sponsored by or given, held or conducted by or on behalf of the County of Putnam, Illinois, its agents, employees or event location. The County of Putnam, Illinois its agents, employees or event location are not selling, serving or providing any alcoholic beverages or malt/ brewed beverages for sale or service for the event, nor are they offering any personnel, servers or assistance of any kind for the sale of and/or service of alcoholic or malt/ brewed beverages to or for the applicant.

I agree to notify, in writing, the Putnam County Liquor Commissioner of any change in any of the information provided in this application that occurs at any time during the term of any license that is issued pursuant to this application. (Term is January 1 to December 31 annually).

Signature (Must be Notarized) \_\_\_\_\_

Title \_\_\_\_\_

Date \_\_\_\_\_

Signed and sworn to before me  
this \_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_.

\_\_\_\_\_  
Notary Public

