

OFFICE OF THE MAYOR

1420 Miner Street Des Plaines, IL 60016 P: 847.391.5301 W: desplaines.org

### CHECKLIST FOR A SPECIAL OCCASION LIQUOR LICENSE

#### ALL APPLICANTS MUST REMIT THE FOLLOWING

- Completed application for a Special Occasion Liquor License (may be supplemental to the Event License)
- Payment in the amount of \$28.00 per day

# *Please note an Event License may be required to issue the Special Occasion Liquor License. To determine, contact the licensing division at the information below.*

#### **DEPARTMENT PHONE NUMBERS FOR FURTHER QUESTIONS OR CONCERNS**

- <u>Zoning Department / 847-391-5306</u> For information on permitted uses, the zoning of a property and available sites
- <u>Building Department / 847-391-5380</u> For information on building renovations, alterations and requirements for building permits
- <u>Fire Prevention Bureau / 847-391-5340</u> For information pertaining to fire safety requirements
- <u>Health & Sanitation Department / 847-391-5377</u> For information pertaining to food related, environmental, state and health/safety requirements
- <u>Licensing Division / 847-391-5366</u>
  For information on registration requirements, licensing requirements and status of an application



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## APPLICATION FOR A SPECIAL OCCASION LIQUOR LICENSE

#### **EVENT INFORMATION**

| Name of Event:                                |                      |                       |                      |
|---|----------------------|-----------------------|----------------------|
| Location:                                     |                      |                       |                      |
| <u><b>Detailed</b></u> Description of the Eve |                      |                       |                      |
| Dates to be held: 1 <sup>st</sup> day:        | 2 <sup>nd</sup> day: | 3 <sup>rd</sup> day:  | 4 <sup>th</sup> day: |
| Times to be held: 1 <sup>st</sup> day:        |                      |                       |                      |
| # of Attendees                                | # of tables/chairs   | # of Seating Capacity |                      |
| ORGANIZATION / COMPANY II                     | NFORMATION           |                       |                      |
| Name:   |                      |                       |                      |
| Address:                                      |                      | Phone #:              |                      |
| City:   |                      | St:                   | Zip:                 |
| Representative:                               |                      | Email:                |                      |
| Home Address:                                 | Driver's License #:  |                       |                      |
| City:   |                      | St:                   | Zip:                 |

#### **ATTESTATION**

I attest that I nor any on site supervisor, manager or bartender have been convicted, pled guilty to or been found guilty of pandering or a crime/misdemeanor to indecency, immorality, prostitution, solicitation or house of ill fame.

I consent to the inspection of the registered place of the event by city officers and employees to verify compliance with all municipal ordinances, codes and regulations.

I understand that no temporary event holding a Special Occasion Liquor License may operate in a manner that constitutes a nuisance in fact; is in violation of any zoning, building, fire or health ordinances, codes and regulations; or is in as unsanitary or unsafe manner.

I agree to be in full compliance of all governmental laws, IL State statutes and municipal ordinances while the Special Occasion Liquor License is in force.

I understand it is my responsibility to insure that persons under the age of 21 or intoxicated patrons of the event will not be served alcohol.

| Representative Signature: | Date: |
|---------------------------|-------|
|                           |       |

| FOR OFFICE USE |  |
|----------------|--|
| ID Number:     |  |

Distribution Date: \_\_\_\_\_