CITY OF SOUTH BELOIT, ILLINOIS
Application for Registration as Employee
Retail Liquor

JANUARY 1, 2020 TO
DECEMBER 31, 2020

South Beloit, Illinois, _____, 20____.

PLEASE CIRCLE ONE:
New Renewal Fee: $30.00

The undersigned hereby makes application for registration as an employee of a business establishment holding a Retail Liquor License from said City under the provisions of Section 6-126 of the City Ordinance of South Beloit, Illinois, as amended.

PLEASE TYPE OR PRINT LEGIBLY

1. Applicant's Name: _____
   (First) (Middle Initial) (Last)
2. Present Address: _____
   Street Address City State Zip
3. Former Address: _____
   Last 6 yrs Street Address City State Zip
4. Alias: _____
5. Maiden Name: _____
6. Date of Birth: _____
7. Age: _____
8. Sex: _____
9. Place of Birth: _____
10. Social Security No: _____
11. Driver's License No. and State: _____
12. Name & Address of Liquor Establishment re: Employment _____
13. List any conviction of laws or ordinances you have incurred during the past ten years:

_____

_____

_____

NOTE: A PHOTO ID OF THE APPLICANT MUST ACCOMPANY THE APPLICATION.
APPLICANT MUST BE 21 YEARS OLD TO SERVE OR SELL ALCOHOL

Having read and answered all of the statements, I swear that the answers given are true and correct in every way and I understand that this application will be denied and any license previously granted will be revoked upon the giving of a false or incomplete answer to any question.

_____
Signature of Applicant

EMPLOYER CERTIFICATION STATEMENT:

I, _____hereby certify that as _____of_____
(Name) (corp officer/partner/manager) (Establishment)
have completed a background check on the applicant and that all information related to prior criminal convictions is accurate.

_____
Signature Date

_ _

FOR OFFICE USE ONLY:
License # _____
Approved by the City Council of South Beloit, Illinois
This ____ day of _____, 20_____