



Mayor Joseph Michaelis  
Liquor Commissioner

## APPLICATION FOR LIQUOR LICENSE RENEWAL

### 1. Business Information

**Business Name:** (Exactly as it appears on your license – including corporation, LLC, etc.)

**Business Address:**

**Business Telephone Number:**

**Has a Liquor License been revoked at this location within the past year?**

### 2. Applicant Information

Name (Last, First, Middle Initial)				Title
Address	City	State	Zip Code	Area Code / Telephone Number

### 3. Manager / Agent for the Business -

Name (Last, First, Middle Initial)				Title
Home Address	City	State	Zip Code	Area Code / Telephone Number

**4. Are the premises owned or leased?**

- I hereby certify that the property is owned by the applicant.
- I hereby certify that the property is leased from the landlord.
- I hereby certify that the property is managed via an operating or management agreement.

Landlord name: \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip \_\_\_\_\_

**5. Is the current business floorplan the same as previously submitted?**

- Yes
- No

**If no, please provide an updated floorplan.**

***NOTE: Dram shop liability insurance must be carried by Licensee. A current copy of a Memorandum of Insurance to cover this licensing period must be presented before the license can be renewed.***

*Please include a copy of your current State of Illinois Liquor License to this application along with a copy of your dram shop liability insurance.*

**PLEASE READ AND SIGN:**

**I hereby certify that the activities of the licensed establishment as listed on the Application for Renewal have not deviated during the past licensing period and that nothing has occurred and /or changed, which would cause ineligibility for licensure since the Licensee was first issued a license. I further certify that if any of the foregoing information changes during the course of the current license year, including without limitation, changes to the status of the State liquor license, changes in the corporate stockholder shares or corporate officers, I will notify the City of Highland, in writing within seven (7) days of such change. I further understand and agree to abide by the Liquor Ordinance and laws of the City of Highland and State of Illinois during this renewal period.**

**I understand that in the event that any representation in the Application for Liquor License Renewal is false, or is violated; my liquor license may be revoked.**

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

Signed: \_\_\_\_\_

Title: \_\_\_\_\_