

STATE OF ILLINOIS)
) SS.
COUNTY OF COOK)

Who, first being duly sworn, under oath deposes and says that he/she is the applicant(s) for the license requested in the foregoing Application; that he/she is of good repute, character and standing and that answers to the questions asked in the foregoing Application are true and correct in every detail. I further state that I have read and understand the provisions of the Park Ridge Municipal Code Liquor Ordinance (12-6) which addresses the sale and delivery of alcoholic beverages. I further agree not to violate any of the laws of the State of Illinois, the United States of America or any of the ordinances of the City of Park Ridge in the conduct of my place of business.

I ALSO UNDERSTAND THAT AN UNTRUE, INCORRECT OR MISLEADING ANSWER GIVEN IN THIS APPLICATION IS SUFFICIENT CAUSE FOR THE REFUSAL TO GRANT OR THE REVOCATION OF ANY LICENSE GRANTED PURSUANT TO THIS APPLICATION.

I further give my permission to the City of Park Ridge or any agency of the City to check with any agency or individual named or referred to in this Application to verify or clarify any answer that I have given.

SIGNATURE OF APPLICANT (OWNER)

Subscribed and sworn to before me this _____ day of _____, 20_____.

NOTARY PUBLIC

SEAL