



APPLICATION FORM FOR
CLASS 'SE" LICENSE
(SPECIAL EVENT)

TO THE LIQUOR CONTROL COMMISSIONER OF WILL COUNTY:

Your petitioner respectfully petitions you to grant _____
a Special Event License and respectfully states as follows:

1. Name of Establishment: _____ License Class _____
2. Address: _____ Phone Number: _____
3. Owner's Name _____ Phone Number _____
4. Address: _____ City _____
5. Type of Event _____
6. Type of Entertainment, if any? _____ Location: _____
7. Does any fine or judgment, whatsoever, remain unpaid by applicant in any court of Will County? Yes No

Signed: _____ Date: _____

A copy of liquor liability insurance (dram shop) must be included with this Application.

STATE OF ILLINOIS		
COUNTY OF WILL	}	SS
<p>The above signed, being duly sworn, upon oath, depose____ and say ___ that he, she, or they ha___ signed the above and foregoing application for a license and that he, she or they ha__ read the questions and answers thereto and the statements therein as set forth in the above application and that the same is true in substance and in fact.</p> <p>Subscribed and sworn to before me, this _____ day of _____, _____ A.D.</p> <p>_____</p> <p style="text-align: center;">NOTARY PUBLIC</p> <p style="text-align: right; margin-right: 100px;">_____ WILL COUNTY LIQUOR CONTROL COMMISSIONER</p>		



SPECIAL EVENT OR TEMPORARY LIQUOR LICENSE REQUEST

ADDITIONAL INFORMATION FORM

PLEASE COMPLETE:	
PETITIONER:	
APPLYING FOR:	SPECIAL EVENT OR TEMPORARY
DATE(S) TO BE HELD:	
LOCATION:	
NON-FOR-PROFIT ORGANIZATION:	

Please answer all of the following questions pertaining to your event:

1.) How many people are expected to attend?	2.) What are the times the event will be held? Start: _____ End: _____
3.) If tickets for the event are being sold, how many have already been sold?	4.) Attach a copy of the Secretary of State Articles of Incorporation indicating that the petitioner is a non-for-profit organization.
4.) What type of safety and security provisions will be in effect for the event?	
5.) How is the alcohol going to be controlled?	
6.) Where is the parking located? Be specific.	7.) Will there be enough parking for this event?
8.) Is there live entertainment? If so, indicate the start and stop times: Start: _____ Stop: _____	9.) Will there be port-a-johns on the premises? How many?
10.) Has consideration to the neighbors been given? If so, how?	
11.) Is there any other information that you would like to share concerning this event?	

Individual completing this form:	Title: _____	Date: _____
X	Phone No.: _____	