



VILLAGE OF FOX LAKE SPECIAL EVENT USE APPLICATION

Retail Class B Liquor License

1. Organization/Corporation _____ Name of Contact _____
2. Address _____ Phone _____
3. Do you have a current Village of Fox Lake Liquor License? YES _____ NO _____
4. If YES, License Number _____ Expiration Date _____
5. Do you have an Illinois Liquor License? YES _____ NO _____
6. If YES, License Number _____ Expiration Date _____
7. Have you ever been convicted of a felony? YES _____ NO _____
 - a. If yes, please state felony of which you were convicted; where and when it was committed, as well as state of U.S. court in which conviction took place and final disposition.

8. Have you or one of your employees ever been convicted of pandering? YES _____ NO _____
9. Have you ever been convicted of a gambling offense as prescribed by subsection (a) (3) through (a) (10) of Section 28-1 or by Section 28-3 of the Criminal Code of Illinois?
 - a. YES _____ NO _____
 - b. If yes, please state offense, date of conviction, sentence imposed and jurisdiction in which convicted.

10. Name of Dram Shop and/or General Liability Insurance Provider _____

a. *A Certificate of Insurance listing the Village of Fox Lake as additionally insured must be submitted prior to the event date.

11. Type of Event: Non-for profit Private Organization

12. Name of Event _____ Event Contact Name _____

13. Address of Contact _____ Phone Number _____

14. Location of Event _____

15. Date and Time of Event _____

The undersigned does hereby agree to hold harmless and indemnify the Village of Fox Lake, a Municipal Corporation in Lake and McHenry Counties, Illinois, from all demands, claims, actions or causes of action, assessments, losses, damages, suits, judgements, costs, attorney's fees and expenses incurred by reason of any claims, obligations, debts, demands or liabilities existing or asserted against the Village prior to and including the date of the "Special Event", or thereafter coming into being or thereafter asserted by reason of any statement of fact, action or failure to act, including but not limited to, any damages or deficiency due to any breach of warranty, misrepresentation, or non-fulfillment of any agreement on the part of the undersigned or said indemnitors under this agreement, or any misrepresentation in or omission from any document and/or other instrument given or to be given by the undersigned as part of its "Special Event".

I, _____, being duly sworn, depose and say that I have answered the questions in the application with a complete understanding of the questions asked and the answers given. The answers given are true in substance and in fact are offered to induce the Liquor Control Commissioner to issue a Liquor License to the applicant.

IN WITNESS WHEREOF, the undersigned have executed this Agreement this _____ day of _____, 20_____.

By: _____
President (Organization)

By: _____
Secretary (Organization)

STATE OF ILLINOIS }
COUNTY OF }
 }

I, the undersigned, a Notary Public in and for said County, in the State aforesaid, **DO HEREBY CERTIFY THAT** _____ and _____ personally known to me to be the same person(s) whose name is subscribed the foregoing instrument, appeared before me this day in person, and acknowledged that he/she signed, sealed and delivered the said instrument as a free and voluntary act, for the uses and purposes therein set forth.

GIVEN under my hand and official seal, this _____ day of _____, 20_____.
(Handwritten signature)

NOTARY PUBLIC



SPECIAL EVENT CLASS B CHECKLIST Retail Class B Liquor License

Organization Name _____

Event Name _____

Date completed _____

Special Event Application complete w/ signatures and notaries _____

Basset for individuals serving (if alcohol is being served) _____

Certificate of Insurance Additional Insured Requirements

Dram Shop / Liquor Liability of \$1,000,000.00 Listing VOFL
***(if alcohol is being served)* _____

Per occurrence Liability of \$1,000,000.00 Listing VOFL _____

General Aggregate Liability of \$2,000,000.00 Listing VOFL _____

Payment \$20.00 _____

Received and reviewed by _____

Date _____

Police Department Review and Approval _____

Date _____