

A temporary liquor license may be requested for sale of alcoholic liquor to be consumed on the premises at a special event. Special event is defined as a preplanned, single gathering event or series of related consecutive daily gatherings or events of an entertainment, cultural, recreational, or sporting nature, or any other similar nature, held by an individual or entity, whether for-profit or non-profit, where food and drinks are sold, served, or dispensed. Such temporary permit may be issued to a club, society, fraternal or benevolent organization or association which is organized not for pecuniary profit or to a non-for-profit entity, organization, or group, and shall only be valid for a period of not more than four consecutive days.

Temporary Liquor License Checklist

The following checklist will help you understand the information needed and steps that must be taken to apply for a liquor license:

- Submit completed application and appropriate application fee (\$50 Per Day).
 - Make all checks payable to **City of Waukegan** and note the name of your business on the check.
- Note: Separate Special Events application may be required. Deadlines include application 30 days prior to event.
- Full payment of all prior years' fees and all City accounts in good standing are required prior to application processing.
- Proof of a valid state liquor permit or license for special event
 - Note: For-profits must apply for a standard retailer's license from the State of IL to hold a special event
- Proof of dram shop liability insurance to the maximum limits naming City of Waukegan as an additional insured.
- Proof of completion from state-certified beverage alcohol sellers and service education and training program (BASSET)

Complete the following Temporary Liquor License Application form and submit to:

**City of Waukegan
Licensing Department – First Floor - Window #4
100 N. Martin Luther King Jr. Avenue
Waukegan, IL 60085
Phone: (847) 360-0334**

No more than three temporary permits may be granted to any organization during a calendar year, except by the city council and upon good cause shown, if the council feels such additional permits are appropriate.

Terms

- The applicant shall comply with all applicable City, state, and federal laws, ordinances, codes, conditions, regulations, and requirements.
- Liquor license is non-transferrable and can only be used as designated. The permit is required to be posted on site at the event location. The City of Waukegan reserves the right to suspend or cancel the license.

After submitting all forms, your application will be reviewed by the Licensing Office. The Licensing Office will notify you within thirty (30) calendar days after filing with the status of your application. Please do not assume that your liquor license will be approved.

Event:
Date(s) Requested:

BUSINESS INFORMATION		
1. Business Name:		
2. Doing Business As (DBA):		
3. Business Address:		
4. City:	5. State:	6. Zip:
7. Telephone:	8. Fax:	
9. E-mail:	10. Website:	
11. Business Type: <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Manager/Agent		
12. Date Incorporated:	13. State of Incorporation:	
14. Illinois Sales Tax Number:		
15. Describe the event (The narrative must include the type and appeal of the event, the reason for liquor sales, and the location of the event.):		

Note: Applicants not in good standing with the City of Waukegan and/or State of Illinois will not be considered.

ACKNOWLEDGEMENT		
I confirm I am not disqualified from receiving the license for which I am applying by reason of any matter or item contained in the laws of the State of Illinois, this chapter, or any other code or ordinance of the City of Waukegan		
I confirm that I have not and will not violate any federal, state, or local law, ordinance, or regulation in the conduct of this business.		
I agree to provide any other documents the local liquor commissioner may request pursuant to state or local liquor control laws, rules and regulations.		
Applicant Name:	Applicant Signature:	Date:

FOR OFFICE USE ONLY	
Date Application Received:	
Application fee paid? (\$50 Per Day)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Dram shop liability insurance?	<input type="checkbox"/> Yes <input type="checkbox"/> No
IL Liquor License?	<input type="checkbox"/> Yes <input type="checkbox"/> No
BASSET certifications?	<input type="checkbox"/> Yes <input type="checkbox"/> No
PERMIT APPROVED/DENIED	
Permit #:	Date: