

## **Class "H" Temporary Liquor License**

Application for this type of license cannot be considered for issuance unless all requirements defined by the Illinois Liquor Control Commission are fulfilled. Only not-for-profit organizations registered with the State of Illinois and political organizations will be considered for Class "H" temporary licenses.

### **Waukegan City Ordinance - Section 3-40. (a) (17):**

Class "H" known as a temporary license, shall authorize the licensee to sell and offer for sale at retail at the place specified in such application for license only, alcoholic liquors for use and consumption, but not for resale, in any form for the day specified in the license. The fee for such temporary license shall be \$35.00 per day. Such temporary license shall not be issued to the same organization on more than three occasions during each fiscal year of the City. Class "H" licenses shall be available only to not-for-profit organizations registered with the State of Illinois and to political organizations.

### **Documents Required:**

1. A completed City of Waukegan Class "H" Liquor License application, signed and notarized and any other pertinent information requested by the Liquor Commissioner prior to issuance of the temporary license.
2. A copy of the State of Illinois not-for-profit organization designation.
3. A copy of the Certificate of Insurance for the specific special event, listing the dram shop insurance carrier, agent and limits of the policy as required by the Illinois Liquor Control Commission.
4. A copy of the State of Illinois Liquor Control Commission, Special Event License applied for.  
Attached please find the application for a State of Illinois special event retailer's liquor license.
5. A statement that all ordinances of the City of Waukegan relating to the event have been or will be complied with.

**All required information must be attached for consideration by the City of Waukegan Liquor Commissioner.**

Reference Links:

[Illinois Liquor Control Commission](#)

[City of Waukegan Alcoholic Beverage Ordinance](#)

\_\_\_\_\_ **TODAY'S DATE:** \_\_\_\_\_

**BUSINESS INFORMATION**

Organization Name: \_\_\_\_\_  
Business Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Phone Number: \_\_\_\_\_

**BOARD OF DIRECTOR INFORMATION**

President Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Treasurer Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Secretary Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

**EVENT INFORMATION**

Event Date: \_\_\_\_\_ Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_  
Event Type: \_\_\_\_\_  
Event Address: \_\_\_\_\_  
Price per Ticket: \_\_\_\_\_

**INSURANCE INFORMATION**

Contracted Insurance Carrier: \_\_\_\_\_  
Contracted Insurance Agent: \_\_\_\_\_  
Dram Shop Coverage: \_\_\_\_\_  
Extent of Limits Provided: \_\_\_\_\_

**ACKNOWLEDGEMENT**

*I (or we) swear or affirm that I (or we) will not violate any of the City of Waukegan ordinances or the laws of the State of Illinois or the laws of the United States of America, in the conduct of the place of business described herein and the statements contained in this application are true and correct to the best of my (our) knowledge and belief.*

\_\_\_\_\_ Office Name and Title                      \_\_\_\_\_ Officer Signature                      \_\_\_\_\_ Date

**NOTARY**

State of Illinois

County of \_\_\_\_\_

Signed and sworn (or affirmed) to before me on this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_ by  
 \_\_\_\_\_ (name of person making statement).

\_\_\_\_\_ Notary Public Signature

(seal)

**FOR OFFICE USE ONLY**

During fiscal year 20\_\_\_\_ thru 20\_\_\_\_ this organization has used \_\_\_\_ licenses.

License valid from \_\_\_\_\_  AM  PM to \_\_\_\_\_  AM  PM

**APPROVED**

**DENIED**

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Mayor – Liquor Commissioner’s Signature

Date