

CITY OF DECATUR FINANCE DEPARTMENT #1 GARY K ANDERSON PLAZA DECATUR IL 62523 LICENSING – (217) 424-2709 LICENSE FEE: \$100 Background Ck: \$40/per person (owner(s), employees) License Expires June 30 Updated: 4/3/24

PLACE OF AMUSEMENT LICENSE APPLICATION PARTNERSHIP

PLEASE PRINT Name	newai		EMAIL		
Doing Business As			Phone #		
Business AddressStreet					
Street			City	State	Zip Code
Mailing AddressStreet			CI.		
			City	State	Zip Code
Applicant's Name		MI	Last	Phone #	
Names and Addresses of	Dartners:	IVII	Last		
	i aruicis.				
Name	MI	T	D	_Date of Birth	
Add		Last			
AddressStreet			City	State	Zip Code
Name			-	ate of Birth	
First	MI	Last		ate of Birtin	
Address					
Street			City	State	Zip Code
Name			D	ate of Birth	
	MI	Last			
AddressStreet			City	State	Zip Code
Name of Manager		MI	D Last	Date of Birth	
Address					
Street			City	State	Zip Code
Intended use of facility					
(be	specific, th	ne license is only	valid for specific	use listed here)	
TO BE COMPLETED BY FINANCE DEPT.		CE DEPT.	New	Renewal_	
		Amount Paid \$			
			Date Paid		
City Manager or Designe	ee	Date	License Nu	ımber	
			License Iss	sued	

CONTINUE ON SECOND PAGE

Owner of Record of premises to be licensed	:		
Name	e		
Address Address	City	State	e Zip Code
Address	City	State	Zip Code
Have you previously had a Liquor License of	or a Place of Amuse	ment License revoked	for any reason?
Yes No No. If Yes, ple			-
105100100. If 105, pic	Jase explain		
	***************************************	****	
Have you been convicted of a felony? Yes_	No		
		ACTION DEPOSES AND	G . ***G
THE UNDERSIGNED, BEING FIRST DUI	LY SWORN ON OA	ATH DEPOSES AND	SAYS:
1. That the matters and things set out in	this application are	true.	
2. That he/she is a partner in the busines			for hereby.
3. That the above named manager, if an	y, possesses the san	ne qualifications as are	required by law
and ordinance of a license. 4. That EACH PARTNER in said busin	ess is a resident of t	the City of Decetur III	inais, is not
4. That EACH PARTNER in said busin indebted to the City of Decatur; and I			
would render a person ineligible to re			
Alcoholic Liquors, as amended, and i	is otherwise eligible		
license; and has not had a license revo	oked for cause.		
	Signed		
	mn*,1		
	I ITIE		***************************************
Subscribed and sworn to before me this	day of	, 20	
		NOTARY PUBLIC	1
Seal)			



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PLACE OF AMUSEMENT

MANAGER' STATEMENT

Business Name					
Doing Business As			Phon	e	
Business Address Address				S140C03	
Address Email		City		State	Zip Code
THE UNDERSIGNED, BEING FIRST I	DULY SWORN	ON OATH DE	EPOSES A	ND SA	YS:
 That the matters and things set out That the undersigned is Manager amusement license and of the pressure That the undersigned has not been him/her ineligible to receive a lice Liquors, as amended; and would lapply for such license. 	of the business of the business of the business covered the convicted of an ense under the p	operated under nereby. ny offense or vi rovisions of An	olation what Act Rela	hich wor	uld render Alcoholic
PLEASE PRINT					
Manager's Name	MI	Last	_Phone #_		
Address	IVII	Last			
Address	City		State	Zip Coo	le
Date of Birth	Place	of Birth			
	Signature				
	Title				
Subscribed and sworn to before me this _	day of		,2	20	,
	-	NOTARY	PUBLIC		
(Seal)					



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PLACE OF AMUSEMENT LICENSE APPLICATION PARTNER'S STATEMENT

PLEASE PRINT Name					
			Phone #		
Business Address Street			State	Zip Code	
Names and Addresses		City	State	Zip Code	
Name			Date of Birth		
First Address	MI	Last			
Street		City	State	Zip Code	
Email					
		e or a Place of Amusen	nent License revoked for	or any reason?	
Yes No	No. If Yes,	please explain			
		• • —			
				<u> </u>	
 That the matter That he/she is a That the above and ordinance and ordinance	o, BEING FIRST Descriptions of the busing partner in the busing named manager, if of a license. ARTNER in said busing person ineligible to	NoNoNo	true. der the license applied the qualifications as are the City of Decatur, Illinged of any offense or violatine the provisions of An are the pr	For hereby. required by law nois; is not blation which Act Relating to	
		Signed			
		Title		1,	
Subscribed and sworn	to before me this _	day of			

NOTARY PUBLIC