



CITY OF HILLSBORO

MONTGOMERY COUNTY, ILLINOIS

447 South Main Street
Hillsboro, IL. 62049
(217) 532-5566 FAX (217) 532-5567

County Seat
Montgomery County

Established 1823

Hillsboro City Council
Regular Meeting, 7 p.m.
First & Third Tuesdays

Liquor License Application and Background Investigation Form

Applicant Name: _____

Address: _____

City / Town: _____ State: _____ Zip: _____

Phone Number: _____ Work: _____

Name of Business: _____

Location where you propose to sell alcoholic beverages:

Is the proposed location within One Hundred (100) feet of any church, school or hospital? _____

Will you obey the laws of the City of Hillsboro, County of Montgomery, of the State of Illinois, of the United States of America? _____

New or Renewal Permit: _____, if renewal current permit number: _____

LIQUOR LICENSE CLASS: (Circle One)

Class A — Retail

Class B — Convenience Store

Class C — Clubs

Class D — Packaged Liquor

Class E — Restaurants

Class F — Bowling Alley

Class G — Lake License

Class H — Temporary

Class J — Brewery/Distillery

Class J-1 — Manufactured Liquor

SEE BACK SIDE

LIQUOR BACKGROUND CHECK SHEET

(manager or person responsible for alcohol sales)

Name: _____

Date of Birth: _____ Driver's License Number & State: _____

Citizen of the United States of America: Yes No (circle one)

Place of Birth (city and state): _____

Have you ever been convicted of a felony: Yes No (circle one)

List all addresses where you have lived within the last five (5) years

| ADDRESS | CITY | STATE | ZIP |
|---------|------|-------|-----|
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I hereby authorize any person who is contacted by the Hillsboro Police Department to release any information pertaining to the background investigation including, but not limited to records or information relating to my past business information, financial stability, military, police, driving records and character for use by the Hillsboro Police Department in consideration of my application for Liquor License within the City of Hillsboro and for no other purpose.

In connection with my application referred to above, I authorize the City of Hillsboro to obtain, prepare, and use information concerning my current and former employment, general reputation and criminal history.

SIGNATURE: _____ DATE: _____

Subscribed and sworn before me this _____ day

of _____, 20_____

Notary Seal

Notary Public