

CITY OF AURORA, ILLINOIS BUSINESS INFORMATION SHEET



Type of PRE-Application	Liquor License		
Business Entity Information			
Type of Business	Sole Proprietor Partnership LLC Corporation Non-Profit		
Legal Name of Business The exact "legal name" as it appears in the official business formation documentation.	NOTHING BUT WINERS, INC. For Sole Proprietors, this is the full name of the business owner as it appears on the Sole Proprietor's government-issued photo ID.		
"Doing Business As" Name The exact "Doing Business As" (DBA) Name as it appears in the official business formation documentation.	Nothing But Winges, Two. Sole Proprietors or Partnerships conducting business in Illinois under an assumed name (a name other than your own) are required to file for an Assumed Name Certificate with the Kane County Clerk's Office at 217 S. Batavia Avenue, Geneva, IL.		
O A State of Illinois File Number is REQUIRED for all (Illinois and Non-Illinois based) LPs, LLPs, LLCs, Corporations, and Non-Profit Corporations. State of Illinois File # 7 0 1 2 6 7 9 6 Assigned by the Illinois Secretary of State at 69 W. Washington St., Suite 1240, 312.793-3380 or www.cyberdriveillinois.com/departments/business_services/			
O A Federal Employer Identification Number (EIN) is REQUIRED for all business entity types except for Sole Proprietorships.			
Employer Identification # 47-3748028			
O An Account ID is REQUIRED for ALL business entity types that conduct business in the State of Illinois or with Illinois customers.			
(formerly IBT #) IDOR Account # 4167-9547			
Business Activity and Location			
Business Activity List your business activities, including all products and /or services to be offered.	WINE & CRAFT BEER FOR OFF PREMISE CONSUMPTION ONLY		
Business Site Address Provide the full business location address where the business transactions and /or activities occur. If applicable, provide the extended address (e.g. 100-102 N. Main Street)	1515 BUTTERFIEZD ROAD 111		
Square footage used by the business:			
Primary Contact Person	JAWICE LYNN First Name Middle Name		
	BURDETTELLANDE Jr/Sr.		
Contact Phone #	-ax#		
Contact E-mail Address			

e SECURITESA	Identify any securities (stocks, bonds, COD	s, etc.) sold to fund Expenses, Part 2
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	EVIEW THE FOLLOWING STATEMENT AND SIGN YOUR ACK	KNOWLEDGEMENT BELOW
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SERVICE STREET,	9/4/15	
Signature of Applicant	Date	
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Notary Public in and for said County and State	any city,	al Seal (PLACE SEAL HERE)
Moral & Ediblic Wallow in Said Coduck and State	Petra Jua	arez Cross
	Notary Public My Commission F	State of Illinois expires 11-15-2016