

City of Aurora, Illinois Local Liquor License Application



License Year:

Incomplete applications will not be accepted.

Completed applications may be submitted to: City Clerk's Office, 44 E. Downer Pl.

Date Application Received _____

New License: Change in Ownership/Corporation: Change in License Class:				
APPLICANT INFORMATION				
A. Corporation name: AURORA Athletic Club	**************************************	Class Applying For:		
B. Business name (dba): AUROUA Athletic Club				
C. Type of Business: Sole Proprietor Partnership Corporation LLC Non-Profit				
550 Clepwopter Dr. N. Aurora ZC 60542				
D. Corporate Mailing Address if different from the physical location address (city, state, zip code):				
E. Business telephone: F. Business website: IN Precess	G. Business Email:			
I. Owner or Manager contact name for license: CASS PNOR HOLLAR SUSN / MARTIN PACIONE				
J. Contact telephone:	Contact e-mail address:			
BUSINESS ESTABLISHMENT LOCATION INFO	RMATION			
A. Address applying for liquor license (exact street address):	B. Zip code	C. # Parking Spaces		
550 CLAR WATER DRIVE	60542	る		
D. Total Building E. Entertainment F. Kitchen	G. Total Number of	H. Seating Area s.f.		
s.f. Area (Square 763 Footage) /2' By 8'	Seats 50	25' By 25'		
I. Number of J. Retail/public K. Cooler s.f.	L. Dry Storage s.f.	M. Sale Counter		
bar seats	1 ^{5f} 20' By 20' 400 sf.	20' By 15" 300 sf		
OFFICIAL USE ONLY				
Approved Denied Date Approved/Denied:				
Maria Nacionali della per i all'Alla della d	te Issued:			
Mayor, Liquor Control Commissioner				

Application Checklist (Check items to confirm attached to application) Applicant Office Use Only Application Fee (\$250.00) Completed Local Liquor License Application (LLA). Completed Financial Disclosure Form (FDF) - for new establishments, expansion an existing establishment, or buying an existing business, when the business holds a Liquor License only. Copy of completed State Liquor License Application X (https://www2.illinois.gov/ilcc/Pages/Applications.aspx) (in Section 3 do not include social security numbers or date of birth for local license application consideration) Certificate of Occupancy (issued by City of Aurora Building and Permits) ·X Copy of the Articles of Incorporation 2018 2018 Certificate of Good Standing from Illinois Secretary of State Floor Plan of Establishment (drawn to scale including all spaces including outdoor seating. Must include the layout of the establishment with tables, chairs, aisles, displays, cash register, bar, and lounge area with percentages and square footage of each space. Class O include all seating configurations.) W Copy of Lease/Proof of Ownership. Proof of current Dram Shop Insurance Policy (Certificate of Liability Insurance) with City of Aurora listed as certificate holder at the maximum limit. W Copy of State Certified Beverage Alcohol Sellers/Servers Training Certificate (BASSET) (servers 2 and managers dated within past three years) Organization chart/listing with Names, Title, Address and percentage of stock of Corporation X officers and directors Certificate of Registration (Food & Beverage Tax-register with City of Aurora Revenue and Collections for liquor sales and payment of required bond). Copy of Menu (Class A, Class B, Class E, Class E-1, Class F, Class L, Class O, Class P, Class S and Class S-1)) Copy of Health Department Certificate (for licensees who prepare and serve food for consumption on premises) Personal Information Form(s) (PIF) (one for each owner of 5% or owner, corporate officers to be listed on the license and on-site manager.) Current list of names, dates of birth and home addresses of all members (Class B) X

Rev. 11/2018

If Yes, explain. 3. How long has the corporation been in the business of the retail sale of alcohol (years/months)? 4. Do you have or intend to have a management contract with another entity or person, who is not a bona fide employee, to manage the licensed business for you? "Yes No." If Yes, state the name and address of the manager or management company. A management company affidavit must accompany this application. 5. If this is a new license application, what kind of business was previously conducted in the space in which you intend to operate your business. 6. State the estimated value of goods, wares and merchandise to be used in the course of business. 7. Other than when making an initial application for a license, has your corporation or any predecessor to or subsidiary or parent of your corporation ever been subject to charges, hearing, or investigation by any jurisdiction with respect to a liquor license? If Yes, list each and every charge, the date of the charge, the eventual disposition of the charge, and the municipality or other jurisdiction bringing the charge. If no charges were filed, state the reason(s) for the investigation or hearing. 8. Please list names and addresses of other establishments the business or partners owns and operates that have active licenses within the State of Illinois.	CO.	poration / Fremises Questions
2. Is the corporation obligated to pay a percentage of profits to a parent corporation or any person or entity not listed as a shareholder above? Yes No If Yes, explain. 3. How long has the corporation been in the business of the retail sale of alcohol (years/months)? 4. Do you have or intend to have a management contract with another entity or person, who is not a bona fide employes, to manage the licensed business for you? Yes No If Yes, state the name and address of the manager or management company. A management company affidavit must accompany this application. 5. If this is a new license application, what kind of business was previously conducted in the space in which you intend to operate your business Yeuroff Club 6. State the estimated value of goods, wares and merchandise to be used in the course of business. 7. Other than when making an initial application for a license, has your corporation or any predecessor to or subsidiary or parent of your corporation ever been subject to charges, hearing, or investigation by any jurisdiction with respect to a liquor license? Yes No If Yes, list each and every charge, the date of the charge, the eventual disposition of the charge, and the municipality or other jurisdiction bringing the charge. If no charges were filed, state the reason(s) for the investigation or hearing. 8. Please list names and addresses of other establishments the business or partners owns and operates that have active licenses within the State of Illinois.	1.	Is the corporation a subsidiary of a parent corporation? Yes No
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	9.	Is the premises within 100 Feet of a church, grade school, middle school, alternative school or high school, hospital, or home for the indigent? Yes No

10.	If applicant is applying for a Class B - Fraternal Society or Club Liquor License:				
	A. How many dues-paying members do you have? //2 (Attach a listing of members' names and addresses.)				
	B. Does your club have the qualifications described in the Illinois Act and the City of Aurora Liquor Ordinance?: ☑ Yes □ No.				
11.	Does your establishment have entertainment? ☐ Yes ☐ No				
	If Yes, what form(s) of entertainment do you offer? Bands/Solo DJ Televised Sports Requier 7.V,				
	Other:				
	Days and hours entertainment planned: SUN MON TUES WED THUR FRI SAT				
	SUN MON TUES WED THUR FRI SAT O 6 6 6 6 6 6				
12.	Do you employ security?				
	X Yes □ No □ Only when entertainment is held — Special Grew's @ The Povillion				
	If Yes, do you: ☐ Hire Private Security Company				
	☐ Hire Off– Duty Police Officers ☐ Combination of the Above				
	If you hire a Private Security Company, please provide the company name and contact person.				
13.	Da you have accurity compron on promise?				
10.	Do you have security cameras on premise? □ Yes 🗴 No — No y €+ /NSTo lied If yes, are they: □ Indoor □ Outdoor □ Both				
	If yes, please provide a brief description of the location(s):				
	if yes, please provide a biter description of the location(s).				
5.0 <u>4</u> (0 4)					
14.	For Classes required to serve food for consumption on the licensed premises, please list the name of the chef(s) for the location applying for a liquor license: ON IN FROZEN PIZZA 15 SERUED - MARTY PACIONE HOS A FOOD HANDING CENTIFICATE				
15.					
	For Class G-1, check the retail item categories available for purchase at the location:				
	For Class G-1, check the retail item categories available for purchase at the location: Dairy Baked Goods Frozen Goods Groceries				

Affidavit

I, authorized agent(s) for the applicant, first being duly sworn, under oath, depose and state that the information contained in the foregoing application is true and correct.

I also understand that any untrue, inconsistent, incorrect or misleading information contained herein shall be cause for the refusal to grant, non-renewal or the revocation of any license granted pursuant to this application.

I further state that I have read and understand all applicable laws, including, without limitation, statutory provisions set forth in the Illinois Liquor Control Act of 1934, 235 ILCX 5/1-1, et. seq. and Chapter 6 of the City of Aurora's Code of Ordinances and fully understand my obligations under said applicable local laws.

I swear and affirm not to violate any of the relevant laws of the United States, the State of Illinois or any of the ordinances of the City of Aurora in the conduct of the place of business described herein. I understand and agree that if I violate any local, state or federal laws regarding alcohol sales, consumption or possession, while I have a City of Aurora Liquor License, said license may be suspended or revoked. If said violation occurs within the first year (probationary period) a liquor hearing will be called and the license may be revoked immediately, with no progressive discipline required.

I further authorize the City of Aurora or any of its designated agents to contact any agency or individual named or referred to in this Application for the purpose of verifying and/or clarifying any information I have provided herein.

I further certify that if any of the foregoing information changes during the course of the current license year, including, without limitation, changes to the status of the State liquor license, changes in the corporate stockholder shares or corporate officers, I will notify the City of Aurora, in writing, within seven (7) days of such change.

Corporate/LLC Signatures	Individual/Partnership Signatures
President UP, CASSAWDILA HOLLANBUSH CASSAWDILA HOLLANBUSH	
President UP, CASSAWOILA HOLLANDUST	
CASSALODIA HOUARBUSH	
Secretary	Signature
MALLOW PACTOR	
Treasurer	Signature
Signed and sworn to before me this 4 day of	
October, 20 19	"OFFICIAL SEAL" Olga Homar Notary Public, State of Illinois
	My Commission Expires March 09, 2022
Notary Public W	(SEAL)