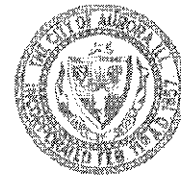


LLA**City of Aurora, Illinois
Local Liquor License Application**

Incomplete applications will not be accepted.

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

Date Application Received _____

License Year: _____

New License: ☐Change in Ownership/Corporation: ☒Change in License Class: ☐**APPLICANT INFORMATION**

A. Corporation name:

AURORA Athletic Club INC.

Class Applying For:

Class B

B. Business name (dba):

Aurora Athletic Club

C. Type of Business: ☐ Sole Proprietor ☐ Partnership ☐ Corporation ☒ LLC ☐ Non-Profit

C. Previous business name (if dba changed):

550 Clearwater Dr N. Aurora IL 60542

D. Corporate Mailing Address if different from the physical location address (city, state, zip code):

E. Business telephone:

630-897-5577

F. Business website:

in process

G. Business Email:

I. Owner or Manager contact name for license:

CASSANDRA HOLLARBUSH / MARTIN PACONE

J. Contact telephone:

K. Contact e-mail address:

BUSINESS ESTABLISHMENT LOCATION INFORMATION

A. Address applying for liquor license (exact street address):

550 Clearwater Drive

B. Zip code

60542

C. # Parking Spaces

70

D. Total Building s.f.

66,211 s.f.

E. Entertainment Area

/

F. Kitchen (Square Footage)

96 s.f.
12' BY 8'

G. Total Number of Seats

50

H. Seating Area s.f.

25' BY 25'
625 s.f.

I. Number of bar seats

28

J. Retail/public Area s.f.

1,576 s.f.

K. Cooler s.f.

8' BY 8' 64 s.f.

L. Dry Storage s.f.

20' BY 20'
400 s.f.

M. Sale Counter s.f.

20' BY 15'
300 s.f.**OFFICIAL USE ONLY**☐ Approved☐ Denied

Date Approved/Denied: _____

Date Issued: _____

Mayor, Liquor Control Commissioner

Application Checklist

(Check items to confirm attached to application)	Applicant	Office Use Only
Application Fee (\$250.00)	<input type="checkbox"/>	
Completed Local Liquor License Application (LLA).	<input checked="" type="checkbox"/>	
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.	<input type="checkbox"/>	
Copy of completed State Liquor License Application (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)	<input type="checkbox"/>	X
Certificate of Occupancy (issued by City of Aurora Building and Permits)	<input type="checkbox"/>	X
Copy of the Articles of Incorporation	<input type="checkbox"/>	
Certificate of Good Standing from Illinois Secretary of State 2018	<input checked="" type="checkbox"/>	2018
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.)	<input type="checkbox"/>	
Copy of Lease/Proof of Ownership.	<input checked="" type="checkbox"/>	
Proof of current Dram Shop Insurance Policy (Certificate of Liability Insurance) with City of Aurora listed as certificate holder at the maximum limit.	<input checked="" type="checkbox"/>	
Copy of State Certified Beverage Alcohol Sellers/Servers Training Certificate (BASSET) (servers and managers dated within past three years)	<input checked="" type="checkbox"/>	2
Organization chart/ listing with Names, Title, Address and percentage of stock of Corporation officers and directors	<input checked="" type="checkbox"/>	X
Certificate of Registration (Food & Beverage Tax-- register with City of Aurora Revenue and Collections for liquor sales and payment of required bond).	<input checked="" type="checkbox"/>	
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))	<input checked="" type="checkbox"/>	
Copy of Health Department Certificate (for licensees who prepare and serve food for consumption on premises)	<input checked="" type="checkbox"/>	
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.)	<input checked="" type="checkbox"/>	
Current list of names, dates of birth and home addresses of all members (Class B)	<input type="checkbox"/>	X

Corporation / Premises Questions

[illegible]

10. If applicant is applying for a **Class B - Fraternal Society or Club Liquor License**:

A. How many dues-paying members do you have? 112 (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
Regular T.V.

☐ Other: _____

Days and hours entertainment planned:

SUN	MON	TUES	WED	THUR	FRI	SAT
<u>Ø</u>	<u>Ø</u>	<u>Ø</u>	<u>Ø</u>	<u>Ø</u>	<u>Ø</u>	<u>Ø</u>

12. Do you employ security?

☒ Yes ☐ No ☐ Only when entertainment is held - SPECIAL EVENTS @ The Pavilion

If Yes, do you: ☐ Hire Private Security Company ☒ Use On - Staff Employees

☐ 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. Do you have security cameras on premise? ☐ Yes ☒ No - NO YET INSTALLED

If yes, are they: ☐ Indoor ☐ Outdoor ☐ Both

If yes, please provide a brief description of the location(s): _____

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:

ONLY FROZEN PIZZA IS SERVED - MARTY PACCIONE HAS A FOOD HANDLING CERTIFICATE

15. For **Class G-1**, check the retail item categories available for purchase at the location:

☐ Dairy ☐ Baked Goods ☒ Frozen Goods - PIZZA ☐ Groceries

☐ Snack Foods ☐ Health Aids ☐ Beauty Aids

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

MARINO PACIONE
President VP. CASSANOVA HOLLANBUSH

CASSANOVA HOLLANBUSH

Secretary

MARINO PACIONE

Treasurer

Signed and sworn to before me this 4th day of

October, 2019.

Notary Public

Signature

Signature



(SEAL)