

**Liquor License Applicant / New Manager Application**  
**(Managers/Assistant Managers Shall Be at Least 21 Years of Age)**

Name of Liquor License Applicant or Licensee Seeking to Employ a New Manager/Assistant Manager:

\_\_\_\_\_

Date Proposed New Manager/Assistant Manager Commenced Duties: \_\_\_\_\_ Position Title: \_\_\_\_\_

Address of Business: \_\_\_\_\_

Name of License Applicant or New Manager/Asst. Manager: Last: \_\_\_\_\_ First: \_\_\_\_\_ M.I.: \_\_\_\_\_

Current Address of License Applicant or New Manager/Asst. Manager: \_\_\_\_\_

Personal Phone Number: \_\_\_\_\_ Driver's License Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

U.S. Citizenship: Yes ☐ No ☐

Naturalization (if applicable) Date: \_\_\_\_\_ Place: \_\_\_\_\_

Sex: M ☐ F ☐ Race: \_\_\_\_\_ Height: \_\_\_\_\_ Hair Color: \_\_\_\_\_ Eye Color: \_\_\_\_\_

1. Has the license applicant or proposed new manager/asst. manager ever sold, delivered, or given away any alcoholic liquor in violation of any state law or city ordinance, to a person under the minimum age required to purchase or possess liquor?  
Yes ☐ No ☐ If yes, please detail the circumstances below or attach a separate sheet:
  
2. Has the license applicant or proposed new manager/asst. manager ever been convicted of a felony or Class A misdemeanor?  
Yes ☐ No ☐ If yes, please detail the circumstances below or attach a separate sheet:
  
3. Please list the license applicant or proposed new manager's/assistant manager's addresses for the ten (10) year period prior to the date of this application or attach a separate sheet listing full addresses.

4. Has the license applicant or proposed new manager/assistant manager ever been known at any time by any other name or names?

Yes ☐ No ☐ If yes, please list those names below:

5. The license applicant or proposed new manager/assistant manager and the licensee, by their signatures below, affirm that the license applicant or proposed new manager/assistant manager will not in the future violate any laws of the State of Illinois, or of the United States, or any ordinances of the City, controlling the retail sale of alcoholic liquor and the conduct of his/her place of business.

6. The license applicant or proposed new manager/assistant manager further affirms by his/her signature below that the information provided in this application is true and correct to the best of his/her knowledge.

Date: \_\_\_\_\_  
Signature (License Applicant or Proposed New Manager/Assistant Manager)

Subscribed and sworn to before me this

\_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_

\_\_\_\_\_  
Notary Public

(Notary Seal)

CORPORATION SIGNATURES:

INDIVIDUAL OR PARTNERSHIP SIGNATURES:

\_\_\_\_\_  
President

\_\_\_\_\_  
Secretary

(Seal)

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Return Completed Application to: City Clerk; City of Wheaton  
P.O. Box 727  
303 W. Wesley St.  
Wheaton, IL 60187-0727  
Ph: 630-260-2012 Fax: 630-260-2017

License applicants and/or new managers must arrange fingerprinting at Biometric Impressions. A \$65 fee, payable to Biometric Impressions, is due at the time of fingerprinting for state and federal charges associated with processing the fingerprints (credit/debit or money order – no checks or cash). Prior to scheduling, you must request a copy of the fingerprint consent form from the City Clerk. The form and payment shall be delivered to Biometric Impressions at the time of appointment.

New managers/assistant managers must provide, within 30 days of start date, documentation to the City of having completed an Alcohol Training Course (Basset Certificate).