THE CITY OF ROCKFORD ILLINOIS, USA

CORPORATE APPLICATION
APPLICATION FOR CITY RETAILER'S LICENSE TO SELL TOBACCO PRODUCTS

The undersigned hereby files an application for the issuance of a city retailer's license for the sale of tobacco for the term ending April 30, 20____, and hereby certifies to the following facts:

1. APPLICANT CORPORATE INFORMATION
   a. Applicant's corporate name and address: _____

   *ALL OFFICERS, DIRECTORS AND SHAREHOLDERS OWNING IN AGGREAGATE MORE THAN 5% OF THE STOCK OF THIS CORPORATION MUST COMPLETE AND SUBMITT AN INDIVIDUAL CORPORATE APPLICATION AND COMPLETE A BACKGROUND CHECK PRIOR TO THE ISSUANCE OF A TOBACCO LICENSE

   b. State names of officers as indicated, with their respective residence addresses, giving street and number, city and state:

   President _____ _____
   (Residence Address)

   Vice President_____ _____
   (Residence Address)

   Secretary_____ _____
   (Residence Address)

   Treasurer_____ _____
   (Residence Address)

   Director _____ _____
   (Residence Address)

   Director _____ _____
   (Residence Address)

   c. State names of stockholders, with their respective residence addresses, giving street and number, City and State:
   (If the total number of stockholders is twenty (20) or less, provide the names and addresses of ALL stockholders. If the number of stock holders is twenty-one (21) or more, list only those stock holders owning more than five percent interest in the corporation. Attach additional paper to application if space provided below is insufficient.)

   Stockholder _____
   (Residence Address)

   Stockholder _____
   (Residence Address)

   Stockholder _____
   (Residence Address)

Stockholder _____
(Residence Address)

Stockholder _____
(Residence Address)

d. Date of incorporation _____ Under Laws of State of _____
If the state is a state other than Illinois, the date upon which the corporation was certified as a foreign corporation entitled to conduct business in Illinois _____

e. Object of corporation, as set forth in charter

_____
(If Insufficient space, attach separate sheet)

f. Is the corporation a widely held corporation or a closely held corporation?

_____

2. BUSINESS INFORMATION

(a) Name under which business is to be conducted _____

(b) Location and description of place of business for which license is sought:
_____Telephone No. _____
(Exact address by street and number)

(c). The character and principal type of the business:

_____
(i.e. tavern, restaurant, grocery store, gas station, night club, etc.)

(d) Does the applicant beneficially own or have a contract to purchase the premises for which this license is sought? ____

If not, has applicant a lease on such premises covering the full period for which license is sought? If so, please provide:

(i) Name and address of lessor _____

(ii) Period covered by lease: From _____, 20_____ to _____, 20__

(e) Is applicant licensed as a food dispenser? _____ If so, give number of license _____

(f) The length of time the applicant has been in the business of the character described above _____

(g) Is the premises for which a tobacco license is sought comprised of a store or other place of business where the majority of customers are under the age of eighteen (18) years or where the principal business transacted consists of the sale of school books, school supplies, food, lunches, or drinks for such customers? _____

(h) Will applicant be personally, actively involved in the on premises day-to-day operation of the business to be licensed? _____

(i) Is the business or will the business for which a tobacco license is sought be managed by a manager or agent? _____

*If the answer is yes, all managers/agents must complete a background check and manager/agent application prior to the issuance of a liquor license.

(j) What is the amount of anticipated tobacco sales as a percentage of gross annual sales of the business?

_____

3. Is the location of applicant's business for which license is sought within 100 feet of the nearest property line of any of the following properties:
School _____ Church _____ Mental health clinic_____
Hospitals_____Senior citizen housing _____ Child care center _____
Transitional service facility _____ Homeless/indigent shelter _____Hospices _____
Community based housing as defined by the City of Rockford Zoning Ordinance_____
Nursing or personal care facility_____ Homes for veterans, their spouses or children_____
Any military or naval stations _____ Any church building used for worship or educational purposes
_____

4. Is any law enforcing official, mayor, alderman or member of the city council directly or indirectly interested in the business for which license is sought'? _____

5. Has any manufacturer, importing distributor or distributor directly or indirectly paid or agreed to pay for this license, advanced money or anything else of value, or any credit (other than merchandising credit in the ordinary course of business for a period not to exceed 90 days), or is such person directly or indirectly interested in the ownership, conduct or operation of the place of business? (Interior decorations and signs complying with state law exempted.) _____

6. Do you hold any other current business licenses issued by the City of Rockford? Yes ( ) No ( )

If so, what type of license do you currently hold and what is the address of the licensed premises?

_____ _____
(type) (address)

7. Has the corporation (applicant) or any officer, manager, or director of said corporation, or any stockholder(s) owning in the aggregate more than five per cent (5%) of the stock of such corporation, made application for a similar license for this period for any premises other than those described above? _____

If so, give name of applicant, location of premises, date and disposition of application _____

8. Does applicant hold or ever held a tobacco license issued by the state of Illinois to any other political subdivision of Illinois or any other state? _____

(i) If yes, please list from which political subdivisions applicant has been issued a tobacco license
_____
_____
_____

(ii) Has any previous license to applicant, any license previously issued by State, Federal or local authorities to the corporation (applicant) or to any officer, manager, or director of said corporation, or any stockholder or stockholders owning in the aggregate more than five per cent (5%) of the stock of such corporation, been revoked? If so, give name of licensee and state reasons for and date of revocation. _____

9. Does the applicant agree to not violate any of the laws of the State of Illinois or of the United States, or any ordinance of the City of Rockford in the conduct of applicant's place of business? _____

10. Illinois Retailers Occupation Tax number currently assigned to the business or individual applicant:

_____

11. Is the business for which a tobacco license is sought or the individual applicant currently delinquent in payments to the Illinois Department of Revenue, City of Rockford or any other governmental entity?

_____

12. What is the existing inventory level for the proposed business? _____

_____

13. Will the applicant hire private security licensed by the State of Illinois upon the written request of the liquor commissioner? _____

14. Has any officer, manager, or director of said corporation, or any stockholder or stockholders owning in the aggregate more than five per cent (5%) of the stock of such corporation, ever been convicted of any felony under any Federal or State law? If so, give name of person so convicted, stating date and offense

_____

_____

15. Has any officer, manager, or director of said corporation, or any stockholder or stockholders owning in the aggregate more than five per cent (5%) of the stock of such corporation, ever been convicted of a violation of any Federal or State liquor law since February 1, 1934? If so, give name of person so convicted, and give date _____

_____

16. Has any officer, manager, or director of said corporation, or any stockholder or stockholders owning in the aggregate more than five per cent (5%) of the stock of such corporation, ever been convicted of gambling, keeping a gambling place, of being the keeper of a house of ill fame; or of pandering or other crime or misdemeanor opposed to decency and morality? _____

If so, give name of person so convicted, giving dates and stating offense _____

_____

17. Does the licensed premises, applicant or any officer, manager or director of said corporation or any stockholder(s) owning in the aggregate more than twenty per cent (20%) of the stock of such corporation currently hold a federal wagering stamp? _____

STATE OF ILLINOIS)
COUNTY OF WINNEBAGO) **SS.**

I swear (or affirm) that I will not violate any of the ordinances of the City of Rockford or the laws of the State of Illinois or the laws of the United States of America, in the conduct of the place of business described herein and that the statements contained in this application are true and correct to the best of my knowledge and belief.

Subscribed and Sworn to before me this _____day of _____, A.D. 20_____

_____ Notary Public

_____ Signature of Applicant