



information for all officers, directors and managers. Indicate the total percentage of stock of the corporation, if any, which is held by persons who have less than 5% interest. **If additional space is needed, type or print information in the same format and attach the sheet to this application.**

PLEASE PRINT

Name (First, Middle, Last)	Address	Date of Birth	Soc. Sec. Number	Position	Percentage of Ownership

AFFIDAVIT

I, the undersigned applicant or authorized agent thereof, swear or affirm that the matters stated in the foregoing application are true and correct, are made upon my personal knowledge and information, are made for the purpose of requesting the City of South Beloit, Illinois to issue the license herein applied for and that the applicant is qualified and eligible to obtain the license applied for. I further swear or affirm that the applicant will not violate any of the laws of the United States of America, The City of South Beloit, or the State of Illinois in particular, the liquor Control Act and the civil rights section thereof.

\_\_\_\_\_  
Signature of Applicant or Authorized Agent

\_\_\_\_\_  
Signature of Applicant or Authorized Agent

\_\_\_\_\_  
Title or Position

\_\_\_\_\_  
Title or Position

\_\_\_\_\_  
Date Signed

\_\_\_\_\_  
Date Signed

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_

\_\_\_\_\_  
A Notary Public for said County and State

**NOTE: Signatures must be notarized.  
Application MUST be accompanied by a \$10,000 Surety Bond.**

**Ordinance 1733 – An Ordinance Providing for a Permit Process for Serving Alcohol at No Charge at Public Events  
See Attachment for Requirements**