



**Application for Sale of Package Liquor, Growlers or Spirits**

Date: \_\_\_\_\_

Application Type: Sale of Package Liquor \_\_\_\_\_ Growlers or Spirits \_\_\_\_\_

Licensee Corporate Name: \_\_\_\_\_

License Class: \_\_\_\_\_

Licensee Establishment Doing Business As Name:  
\_\_\_\_\_

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

Business Phone: \_\_\_\_\_

Manager Name: \_\_\_\_\_

Manager Phone: \_\_\_\_\_

Manager E-Mail:  
\_\_\_\_\_

I certify the dramshop/liquor liability insurance related to the licensee is sufficient to fully cover the activities and operations applied for in this form. The licensee further indemnifies the City of Rochelle and its employees and agents from any and all liability related to any and all claims that arise directly or indirectly from Emergency Order 20-01 and any activities undertaken by the licensee pursuant to the order.

I understand that I remain obligated to comply with all other requirements of the Rochelle Municipal Code and the State Law, including those related to the verification of identity and sale of alcohol to persons age 21 or older. I further understand that additional steps may need to be taken in order to undertake any action under the Order, including but not limited to securing the appropriate category or designation of State liquor license.

I certify that I have the authority to act as an agent of the Licensee and bind the licensee to legal obligation.

Signed: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Title: \_\_\_\_\_

On Behalf of Licensee: \_\_\_\_\_