



**LIQUOR LICENSE APPLICANT BACKGROUND INFORMATION FORM**

Name of applicant: \_\_\_\_\_  
Last First Middle

Home address: \_\_\_\_\_  
Street City State Zip Code

Home phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Date of birth: \_\_\_\_\_ Place of birth: \_\_\_\_\_  
City County State

Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Color of eyes: \_\_\_\_\_ Color of hair: \_\_\_\_\_

Social security number: \_\_\_\_\_

Name of business liquor license is being applied for: \_\_\_\_\_

Business address: \_\_\_\_\_

Business phone number: \_\_\_\_\_

**List All Residences for the Past Five (5) Years**

<u>Dates of Residence (From/To)</u>	<u>Street Address</u>	<u>City</u>	<u>State</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Place of employment: \_\_\_\_\_

Business address: \_\_\_\_\_

Business phone: \_\_\_\_\_ Employment start date: \_\_\_\_\_

**List all Previous Places of Employment for the past five (5) Years:**

(If necessary please use back of this sheet for additional information)

Dates To/From                      Company                      City/State                      Reason for Leaving

---

---

---

---

---

---

**List three (3) Character References:**

Name: \_\_\_\_\_ Home phone: \_\_\_\_\_

Home address: \_\_\_\_\_

Business/Profession/Place of employment: \_\_\_\_\_

Business address: \_\_\_\_\_

Business phone: \_\_\_\_\_ Years known: \_\_\_\_\_

Name: \_\_\_\_\_ Home phone: \_\_\_\_\_

Home address: \_\_\_\_\_

Business/Profession/Place of employment: \_\_\_\_\_

Business address: \_\_\_\_\_

Business phone: \_\_\_\_\_ Years known: \_\_\_\_\_

Name: \_\_\_\_\_ Home phone: \_\_\_\_\_

Home address: \_\_\_\_\_

Business/Profession/Place of employment: \_\_\_\_\_

Business address: \_\_\_\_\_

Business phone: \_\_\_\_\_ Years known: \_\_\_\_\_

**List Three (3) Credit References:**

Company name: \_\_\_\_\_ Business phone: \_\_\_\_\_

Business address: \_\_\_\_\_

How known: \_\_\_\_\_

(If this is a loan, please state the purpose of the loan: if paid in full or when it will be)

Company name: \_\_\_\_\_ Business phone: \_\_\_\_\_

Business address: \_\_\_\_\_

How known: \_\_\_\_\_

(If this is a loan, please state the purpose of the loan: if paid in full or when it will be)

Company name: \_\_\_\_\_ Business phone: \_\_\_\_\_

Business address: \_\_\_\_\_

How known: \_\_\_\_\_

(If this is a loan, please state the purpose of the loan: if paid in full or when it will be)

-----

Do you have a checking account: Yes \_\_\_\_\_ No \_\_\_\_\_

Name of the bank: \_\_\_\_\_

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

Do you have a savings account: Yes \_\_\_\_\_ No \_\_\_\_\_

Name of the bank: \_\_\_\_\_

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

Please answer the following questions: (If necessary please use the back of this page)

Have you ever been arrested: Yes \_\_\_\_\_ No \_\_\_\_\_

(If yes, list below)

<u>Date of Arrest</u>	<u>Charge</u>	<u>Disposition</u>	<u>Arresting Agency</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____





WAIVER FORM

I, the undersigned, as part of my application for a license to be issued by the City of Rochelle, do hereby authorize the Rochelle Police Department to conduct a background investigation (including school, bank, employer, credit, criminal, traffic, and other records) and to make said investigation available to city officials.

Dated: \_\_\_\_\_

\_\_\_\_\_  
Signature