



**Mayor Mike Thoms
Liquor Commissioner**

1528 3rd Avenue
Rock Island, IL 61201
Telephone: (309) 732-2012
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APPLICATION FOR CITY OF ROCK ISLAND TEMPORARY LIQUOR LICENSE

Sec. 3-8. Types of Licenses and Fees:

- (h) **Temporary License:** Upon approval by the local liquor commissioner, and in the case of a park and recreation operated facility or property, the prior approval of the park and recreation board must also be obtained. A class T or temporary license to sell alcoholic liquor at retail **may be granted to organized clubs, societies, associations, fraternal organizations, duly constituted churches or other not for profit organizations.** A temporary license may be issued pursuant to this subsection for one (1) day, two (2) consecutive days, or three (3) consecutive days. The license shall specify on its face the duration.
- (1) No organization shall be issued more than one temporary license during any thirty (30) day period. This restriction may be waived by the local liquor commissioner upon application by any not for profit business association representing the Rock Island arts and entertainment district as part of public events that are within a scheduled program of events which schedule has been approved by the city council and, if so waived, the fee for such additional temporary license shall be one hundred dollars (\$100.00) per day.
 - (2) All applications for temporary licenses must be received by the liquor commissioner **at least thirty (30) days prior** to the dates being requested.
 - (3) All applicants for temporary licenses shall show evidence of dram shop liability insurance or other proof of financial responsibility prior to issuance of such license.
 - (4) The fee for a class T license shall be twenty five dollars (**\$25.00**) per day.

DATE OF APPLICATION

NOT-FOR-PROFIT TAX ID INFORMATION

PLEASE RETURN COMPLETED APPLICATION, ALONG WITH A COPY OF YOUR DRAM SHOP INSURANCE AND A CHECK MADE PAYABLE TO THE CITY OF ROCK ISLAND, TO THE MAYOR'S OFFICE AT LEAST 30 DAYS PRIOR TO YOUR EVENT.

1. LOCATION OF EVENT: Provide the following information regarding the location of your event.

ADDRESS OF EVENT LOCATION	CITY	STATE	ZIP CODE
NAME OF LOCATION			

2. ORGANIZATION – APPLICANT: Provide the following information regarding your organization.

NAME OF ORGANIZATION	ORGANIZATION ADDRESS
APPLICANT / CONTACT NAME	APPLICANT / CONTACT TITLE
APPLICANT / CONTACT ADDRESS	APPLICANT / CONTACT PHONE NUMBER

3. EVENT INFORMATION: Provide the following information regarding your upcoming event.

TYPE OF EVENT (trivia night, etc.)	DATE(S) OF EVENT
HOURS OF <u>EVENT</u> (5:00 p.m. – 10:00 p.m. etc.)	HOURS <u>ALCOHOL WILL BE SERVED</u> (7:00 p.m.– 9:30 p.m. etc)
BRIEFLY DESCRIBE HOW YOUR ORGANIZATION WILL MONITOR UNDERAGE DRINKING: (Wristbands, hand stamps, etc)	

I certify that the above statements are true and any untruths or omissions could be grounds for this temporary license to not be issued or to be revoked. I have read and understand the Ordinance concerning Temporary Liquor Licenses and realize that we are subject to any standards issued by the Liquor Commission and agree to abide by them and any amendments thereto.

Date: _____

Signed: _____

Title: _____

Date Received: _____

Accepted: _____

Date sent to Police Department: _____