

**Cook County Liquor Control  
Commission**

**Kenneth Harris**

Deputy Liquor Control Commissioner

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**Cook County Liquor Control  
Commission**

**Toni Preckwinkle**

President

Cook County Board of  
Commissioners

**Current Liquor License Business Update Application**

**BUSINESS NAME:**

Primary Owner Name:

Current Liquor License Number:

Business Address:

City, State and Zip Code

Business phone:

Business phone(Alternate)

Email:

**PLEASE PROVIDE THE FOLLOWING INFORMATION FOR THE INDIVIDUAL PERSON FILLING THIS APPLICATION:**

Full Name:

Current Home Address:

Date of Birth:

Personal phone:

**ADDITIONAL INFORMATION:**

Are you seeking to make any floor plan or building plan modification for video gaming terminals? YES  NO

Are you seeking on-premise Alcohol consumption? YES  NO

Are you seeking both on-premise and off-premise Alcohol consumption? YES  NO

Are you planning on making any modification or alteration to the existing sign on the property? YES  NO

Are you planning on putting up a new sign on the property? YES  NO

Are you seeking any occupancy changes to your existing occupancy, like adding floor space, increase in number of staff, additional staff, additional parking? YES  NO

Are you seeking any permits for construction, electrical or plumbing work for the above location? YES  NO

Is any increase in parking anticipated? YES  NO

**If YES to any of the above questions, you must explain in the space on the next page and receive approval from the Cook County Department of Building and Zoning. The Department of Building and Zoning will review request for permits, occupancy updates, floor plans (new parking plans may be requested) and will need to do a final inspection prior to the Cook County Liquor Commission approval.**

Describe the business plan update:

The applicant hereby affirms the above Application is true and correct. The facts stated are made from applicant's personal knowledge and information, and applicant is authorized to act on behalf of the business listed above. Applicant further affirms that the applicant meets all legal requirements to apply for and hold an Illinois Liquor License and will not violate the laws of the United States, the State of Illinois, or the County of Cook and all agencies thereof.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Position with Organization

\_\_\_\_\_  
Date

**FOR OFFICE USE ONLY DO NOT WRITE IN AREA BELOW:**

Department of Building and Zoning Approval Number:

Approval Date:

Date of Final Inspection:

Review of any outstanding debt:

Liquor Commission Approval:

Approval Date:

Retail Liquor License Approval:

Circle one:

On-Premise

Off-Premise

Both

Letter Approval for the Illinois Liquor Commission: