



**VILLAGE OF RIVER FOREST
LOCAL LIQUOR LICENSE RENEWAL APPLICATION**

THIS APPLICATION MUST BE FILED NO LATER THAN SIXTY (60) DAYS PRIOR TO EXPIRATION. NO RENEWAL APPLICATION FEE IS REQUIRED.

1. **NAME OF LICENSEE:** _____

2. **NAME OF BUSINESS:** _____

ADDRESS: _____

3. **CLASS OF LOCAL LIQUOR LICENSE:** _____

AMOUNT DUE: \$ _____

4. **PERIOD FOR WHICH RENEWAL IS SOUGHT: JANUARY 1, _____ THROUGH
DECEMBER 31, _____**

5. **DESCRIBE ANY CHANGES WHICH MAY HAVE OCCURRED SINCE THE ORIGINAL
AND/OR PREVIOUS RENEWAL APPLICATION WAS APPROVED:**

6. **NAME OF CURRENT MANAGER:** _____

ADDRESS: _____

7. **ATTACH AN AFFIDAVIT STATING THE APPLICATION IS TRUE AND COMPLETE.**

SIGNATURE(S) OF APPLICANT(S): _____
