

VILLAGE OF SUMMIT
7321 W. 59th Street
Summit, Illinois 60501

**APPLICATION FOR
SPECIAL EVENT LIQUOR LICENSE**

DATE SUBMITTED: _____

The Liquor Commissioner hereby grants permission for the issuance of a Special Event Liquor License to the qualified fraternal, social or religious organization, as allowed by Chapter 5-2-6 of the Summit Village Code.

Organization Name _____

Address: _____

City _____ **State** _____ **Zip** _____

Contact Name: _____

Phone: _____

Date(s) of Special Event: _____

Location of Event: _____

Time of Event: _____ **Beginning** _____ **Ending**

A Certificate of Insurance must be provided.

APPLICANT SIGNATURE (All applications must be signed)

For Office Use Only

FEE: \$50.00

LICENSE NUMBER: _____