

**CITY OF SPRINGFIELD, ILLINOIS**  
**LIQUOR LICENSE CHANGE OF BUSINESS NAME APPLICATION**  
**NON-REFUNDABLE APPLICATION FEE \$15.00**  
**J. Michael Houston, Mayor and Liquor Control Commissioner**

**WARNING:** THE *FILING* OF THIS APPLICATION DOES NO PERMIT THE APPLICANT TO ENGAGE IN THE SALE OF ALCOHOLIC LIQUOR UNDER THE PROPOSED D/B/A NAME CHANGE.

This application is for a **CHANGE OF BUSINESS NAME ONLY**. The applicant further states and declares that the information tendered on the original application with respect to ownership, managers, etc., has remained unchanged.

**CURRENT INFORMATION:**

\*Name of Corp / Partnership/Owner: \_\_\_\_\_

\*D/B/A: \_\_\_\_\_

\*Address: \_\_\_\_\_ Zip Code \_\_\_\_\_

\*Classification \_\_\_\_\_ Phone \_\_\_\_\_

\*(Must be exactly as appears on current license)

Who is Current *Manager* on File & Date Employed? \_\_\_\_\_

When does Current *Lease/Contract For Deed* Agreement Expire?: \_\_\_\_\_

**PROPOSED NEW D/B/A NAME:** \_\_\_\_\_

***THE FOLLOWING MUST BE ATTACHED:***

\_\_\_\_\_ Copy of Liquor Liability Insurance with hours covering hours of sales (Dram Shop Insurance) ; **AND**

\_\_\_\_\_ Lease/Contract for Deed - A properly executed copy of the lease, signed by lessee and lessor. (Note: The lease must reflect the new business name, *if the d.b.a. is referenced in the current lease*)

**AFFIDAVIT**

The undersigned, being duly sworn, on oath, certifies that all information supplied in this application is true and correct as to myself/ourselves, in any partners or corporation and its stockholders, as well as managers listed and that I/we will advise the Liquor Commissioner, in writing, if any information supplied becomes invalid or additional information is required by the Springfield Liquor Code now or as hereafter amended.

***Signature required: Individual applicant or all partners; If limited partnership, all general partners and any limited partner owning more than 50% interest in such limited partnership; If corporation, all officers, directors and any stockholder owning more than 50% of stock of such corporation. All signitors must also indicate their official title or position.***

Signature \_\_\_\_\_ Signature \_\_\_\_\_

Print Name \_\_\_\_\_ Print Name \_\_\_\_\_

Title \_\_\_\_\_ Title \_\_\_\_\_

***NOTARIZATION OF SIGNATURE IS REQUIRED***

SUBSCRIBED AND SWORN to before me this \_\_\_ day of \_\_\_\_\_,

(SEAL) \_\_\_\_\_ Notary Public

Application RECEIVED on: \_\_\_\_\_

BY: \_\_\_\_\_

APPLICATION approved / denied: Date \_\_\_\_\_ By: \_\_\_\_\_

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