

**VILLAGE OF BLOOMINGDALE
CLASS V VIDEO GAMING
SUPPLEMENTAL LIQUOR LICENSE**

Applicant: _____
(Must be the same as on primary liquor license)

Doing Business As: (if different from above): _____

Circle Yes or No

Yes No Do you hold a Village Class D-2 Dining (Full Liquor), H Hotel or R Resort liquor license?

Yes No Do you have a license from the Illinois Gaming Board to operate Video Gaming Terminals at your establishment?

Yes No Will all Video Gaming Terminals be located in an area restricted to individuals 21 years of age or older?

Yes No Will the VGT's be screened from view from individuals less than 21 years of age?

The fee for a Class V license shall be \$500 per VGT per year. No more than six (6) video gaming terminals shall be located on a licensed establishment.

	Illinois Gaming Board VGT Tag No.
1	
2	
3	
4	
5	
6	

ALL APPLICANTS MUST FURNISH THE FOLLOWING:

1. Copy of license issued by the Illinois Gaming Board.
2. A scaled floor plan of the licensed premises identifying the location and screening of the video gaming area.
3. Payment to the Village in the amount of \$500.00 per video gaming terminal.
4. Signed Affidavit on page 2.

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AFFIDAVIT

STATE OF ILLINOIS)
COUNTY OF DU PAGE)

I (or we) swear (or affirm) that I (or we) will not violate any of the ordinances of the Village of Bloomingdale and the laws of the State of Illinois and the laws of the United States of America, in the conduct of the place of business described herein and that the statements contained in this application are true and correct to the best of my (our) knowledge and belief.

The undersigned hereby acknowledges that the undersigned has read and understands all Village ordinances and State statutes regulating the sale of alcohol, the operation of video gaming terminals, the holders of liquor licenses, video gaming licenses and the issuance, suspension and revocation of liquor licenses and supplemental video gaming liquor licenses by the Liquor Control Commissioner of the Village of Bloomingdale, Du Page County, Illinois.

Applicant - President

Partner - Secretary

Manager

Subscribed and sworn to before
Me this _____ day of
_____, 20__.

Notary Public