

**AGENDA ITEM EXECUTIVE SUMMARY****Agenda Item Number: 4****Title:**

Recommendation to approve a Proposal for a D10 Liquor License Application for Urban Air, Located at 2732 E. Main St., St. Charles.

**Presenter:**

Police Chief James Keegan

**Meeting:** Liquor Control Commission**Date:** October 19, 2020

Proposed Cost: \$

Budgeted Amount: \$

Not Budgeted: ☐**Executive Summary** (*if not budgeted please explain*):

Urban Air, owned and operated by Playville LLC, is operating at the former Butera site located at 2732 E. Main St. The business is already in operation and would like to add a liquor component to their business.

Please see the attached documents supporting this request.

**Attachments** (*please list*):

Summary, Floor Plan, Liquor License

**Recommendation/Suggested Action** (*briefly explain*):

Recommendation to approve a proposal for a D10 Liquor License application for Urban Air, located at 2732 E. Main St., St. Charles.

## Police Department



# Memo

Date: 10/12/2020

To: The Honorable Ray Rogina, Mayor-Liquor Commissioner

From: James Keegan, Chief of Police *J. Keegan #300*

Re: Background Investigation-Liquor Establishment/D-10 (Urban Air/2732 E. Main Street)

---

The purpose of this memorandum is to document and forward to your attention the results of the background investigation conducted by members of the St. Charles Police Department concerning the above mentioned establishment.

Urban Air is now operational at the former Butera Finer Foods (Foxfield Commons) and is looking to offer on-site alcohol consumption in their self-contained snack shop. This is a new business venture that is marketed as a "family adventure park).

A detective was assigned this investigation and reviewed both the site location/floor plans and the corresponding application material. We found nothing of a derogatory nature that would preclude either the site location or the applicant from moving forward with on-site consumption, subject to City Council approval.

This is a new D-10 liquor classification recently approved by the City Council in anticipation of the aforementioned business. Its convents are outlined below:

- *Class D-10 licenses shall authorize the retail sale of alcoholic liquors for consumption on the premises of an entertainment venue or theater, for consumption on the premises as determined in an approved site plan from a service bar or snack shop. Such licenses shall only be issued to establishments where the service of alcoholic beverages is ancillary and incidental to entertainment services.*

Thank you in advance for your consideration in this matter.



# Memo

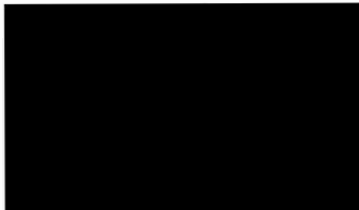
Date: 10/09/20  
To: Chief Keegan (via chain of command)  
From: Detective Crumlett  
Re: Liquor License Background, Playville LLC (Urban Air St. Charles)

---

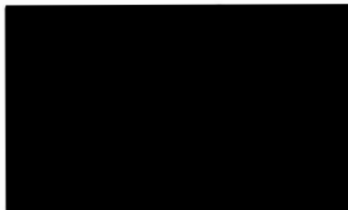
The purpose of this memo is to outline steps taken during the background investigation for a liquor license application. This investigation was done based on the application submitted for a Class D-10 license for the business, Playville LLC (Urban Air St. Charles). This business is to be located at 2732 E. Main St.

## Applicants:

Hussain, Yanis



White, Kevin M.



Gracia, Cristian A.



## Application:

The application was received on or around 08/26/20. The application is complete to include a signed lease, a menu, floor plan and a quote for Certificate of Insurance (dram shop). Yanis Hussain is listed as the Owner of Playville LLC. The general manager listed on the application are Kevin M. White (General Manager) and Arden Wood (Café Manager). Prior to completing the background check, I was informed Arden Wood was no longer the Café Manager. The new Café manager, Cristian A. Gracia was added to the application by General Manager White.

## Records Checks:

Yanis Hussain provided two address in the past 10 years

Current address of



Previous address of



Hussain's fingerprints were submitted to the FBI and Illinois Bureau of Identification; their reply indicated was arrested on 02/02/1998 in Houston Texas for forgery. On 04/07/1998 Hussain took a guilty plea and was sentenced to probation and a fine.

Kevin M. White provided one residence in the past 10 plus years;

Current address of [REDACTED]

A check with the Oswego Police records showed they had one contact with Kevin White which was an arrest for a Failure to Appear (FTA) Warrant from 2017. The FTA Warrant was for a DUI and possession of Cannabis arrest with the Northern Illinois University (NIU) Police Department in 2015. I contacted the NIU police records and was informed White was arrested by the NUI police for DUI and possession of cannabis. White had agreed to a plea agreement and has satisfied the terms of the agreement. TLO showed nothing that would prohibit obtaining a liquor license. I CLEAR showed no contacts for White. SCPD also showed no contacts for White.

A check of the Kane, Dekalb, and Kendall County Circuit Court Clerk database revealed nothing that would prohibit White from obtaining a liquor license.

White has a current BASSET certification. White's fingerprints were submitted to the FBI and Illinois Bureau of Identification; their reply indicated he had two arrests as detailed above. Illinois Secretary of State LLC check on Playville LLC showed nothing preventing it from being issued a Liquor License.

Cristian A. Gracia provided three addresses of residency on the application;

Current address of [REDACTED]

Previous address of [REDACTED]

Previous address of [REDACTED]

A check with Oswego Police records and TLO showed nothing that would prohibit obtaining a liquor license.

A search of I CLEAR showed no contacts for Gracia. SCPD records also showed no contacts for Gracia.

A check of the Kane, Dekalb, and Kendall County Circuit Court Clerk database revealed nothing that would prohibit Gracia from obtaining a liquor license.

Gracia has a current BASSET certification. Gracia's fingerprints were submitted to the FBI and Illinois Bureau of Identification; their reply indicated nothing that would deny the issuance of a Liquor License.



### **SITE VISIT and INTERVIEW WITH APPLICANTS:**

Urban Air is a “family adventure park” franchise with over one hundred and thirty locations nationwide. The first Urban air was opened in 2011 and is based out of Rockwall Texas.

On 10/07/20 I met with Kevin White and Cristian Gracia at the location for Urban Air St. Charles, 2732 East Main St. The interior of 2732 East Main St. is built to be an indoor family fun park. The entire business is inside a forty-seven thousand square foot building in the Foxfield Commons Shopping Center. The business contains a go cart track, a climbing wall, a ropes course, multiple trampolines, and bumper cars. They have a café in the back of the business that serves a limited menu including hamburgers, hotdogs, nachos, pizza, snacks and soft drinks. These food items are to be consumed in the café area where indoor seating and tables are provided. The café will handle all of the alcohol sales. I observed a separate lockable refrigerator behind the café counter where individual servings of beer and wine will be stored. Like the food, alcohol is to be consumed in the provided café area.

White became manager of Urban Air St. Charles in March of 2020. The business opened to the public on August 22, 2020. White was an employee of the Urban Air location in Naperville for a year prior to being promoted to Manager for the St. Charles location.

Cristian Gracia has been employed with Urban Air St. Charles since August 19<sup>th</sup> 2020 when he was hired as the café manager.

Notes in the application on the business plan indicate the hours of operation will be 3pm-8pm Monday thru Thursday, 3pm – 10pm Friday, 10am – 10pm Saturday, and 10am – 8pm on Sunday. There will be no live music and no outdoor seating. Smoking area will be in front of the building.

This concludes this background investigation.

CWC #355

7-24-2020

**City of St. Charles, Illinois Liquor Control Commissioner**  
**CITY RETAIL LIQUOR DEALER LICENSE APPLICATION**  
**APPLICATION FEE IS NON REFUNDABLE**



Incomplete applications will not be accepted.

Applications may be submitted to: 2 E. Main Street, St. Charles, IL 60174-1984

**APPLICATION CHECKLIST**

Check items to confirm all are attached to this application	Applicant	Office Use
<b>Application Fee of \$200</b> (5.08.070C) Non-refundable	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Completed Application</b> for all questions applicable to your business.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Copy of Lease/Proof of Ownership</b>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Copy of Dram Shop Insurance</b> or a letter from insurance agent with a proposed quote.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Copy of Articles of Corporation</b> , if applicable. <i>pending quote</i>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Completed B.A.S.S.E.T. (Beverage Alcohol Sellers &amp; Servers Training) form</b> - filled out for all employees. A copy of the B.A.S.S.E.T. certificate is <b>only</b> needed for <b>each manager</b> . It is the business establishment's responsibility to keep copies of all B.A.S.S.E.T. certificates on file for all of their employees. <i>articles of formation - pending</i> <i>pending for managers</i>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Copy of Site Plan for Establishment</b> (Drawn to scale including the parking lot, patio and/or deck, outdoor seating).	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Copy of Floor Plan for Establishment</b> (Drawn to scale and <b>must</b> include the layout of the establishment with tables, chairs, aisles, displays, cash register, bar, and lounge area with dimensions, percentage, and square footage noted for each space). Be sure to also include all <b>fixed objects</b> , such as pool tables, bar stools, vending/amusement machines; as well as all <b>exits</b> .	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Copy of Business Plan</b> , to include: Hours of Operation Copy of Menu Whether or not live music will be played at this establishment Will there be outdoor seating and/or outdoor designated smoking area <b>Do not include a marketing or financial plan with this business plan</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Are any building alterations planned for this site?</b> If not sure, please contact <b>Building &amp; Code Enforcement at 630.377.4406</b> and/or <b>Fire Prevention Bureau at 630.377.4458</b> to discuss whether or not a walk-thru and/or permit are necessary. <i>No</i>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<b>All managers have been fingerprinted who are employed by your establishment.</b> When new management is hired, it is imperative you contact the Mayor's office to be fingerprinted so the City's business files are appropriately updated. <i>pending (pd)</i>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Alcohol Tax Acknowledgement and Business Information Sheet</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

**OFFICIAL USE ONLY**

*Chad Smith* *355 DETECTIVE*  
 Signature of Investigating Officer Badge Number & Rank

☐ Approval Recommended\* ☐ Approval NOT Recommended

Signature of Chief of Police \_\_\_\_\_ Date \_\_\_\_\_

**\*ISSUANCE OF THIS LICENSE IS CONTINGENT ON MEETING ALL REQUIRED BUILDING AND FIRE DEPARTMENT REQUIREMENTS.**

Date Application Received: 7-21-2020

**LICENSE INFORMATION:**

☒ OA Package \$3200-3600

☐ OB Restaurant \$2400-3600

☐ OC Tavern \$2400-3600

☐ OD Hotel/Banquet/Arcada/Q-Center/Entertainment/Club - \$varies

☐ OG Brewery/Restaurant or Site License - \$varies

☐ Late Night Permit 1:00am \$800 (B/C only)

☐ Late Night Permit 2:00am \$2300 (B/C only)

\*Initial Liquor License fees for A, B, C, D, G are reduced by 50% for annual renewals and licenses issued after Nov 1.

\*Licenses are valid until April 30 following issuance and a renewal application is required for the next year (May 1-April 30) (5.08.040)

**APPLICANT INFORMATION**

1. Type of Business: ☐ Individual ☐ Partnership ☒ Corporation ☐ Other (explain):

2. Business Name: Playville LLC

3. Business Address: 2732 E Main St. St Charles IL 60174

4. Type of Business  
(5.08.070-3): Indoor  
recreation

5. Length of Time in this  
Business (5.08.070-4): Not open yet

6. Value of merchandise that normally will be in inventory when in  
operation (5.08.070-5): \$ 500.00

7. Business Phone:

8. Business E-mail: Yanis Hussain  
Urbanair St.  
charles.com

9. Business Website:

Urbanair St Charles

10. Illinois Tax ID Number:

82-4788372

11. Applicant/Contact Person Name:

Yanis Hussain

12. Title:

owner

14. Applicant Home Address, and all addresses for the last 10 years:

15. Filing:

16. Date:

18. If Corporation, Corporation Name:

Playville LLC

19. Corporation Address (city, state, zip code):

2732 E Main St. St. Charles IL 60174

**ADDITIONAL OWNERS, INVESTORS (greater than 5% interest), and MANAGER INFORMATION**

Full Name, include middle initial:

Kevin white

Title: General Manager

Birthdate:

Birthplace:

Driver's License#:

Home Phone:

Home Address, and all addresses for the last 10 years:

Email Address:



Full Name, include middle initial: <b>Arden Wood</b>		Title: <b>Cafe Manager</b>	
Birthdate:	Birthplace:	Driver's License#:	Home Phone:
Full Name, include middle initial:		Title:	
Birthdate:	Birthplace:	Driver's License#:	Home Phone:
Home Address, and all addresses for the last 10 years:		Email Address:	
BUSINESS ESTABLISHMENT LOCATION INFORMATION			
1. Exact Street Address for liquor license: <b>2732 E. Main St. St Charles IL 60174</b>	2. # Parking Spaces: <b>250</b>	3. Outside Dining s.f. [17.20.020-R]: <b>N/A</b>	4. Total Building s.f.: <b>47K</b>
5. Total # Seats: <b>100</b>	6. Live Entertainment Area s.f. [5.08.010-H]: <b>NONE</b>		
7. Brief Business Plan description based on type of establishment listed above (5.08.070-6): <b>Family Adventure Park open year round. w/ Go carts, Bumper cars, Trampolines, rock climbing etc. all indoor. Cafe serving hot dogs, wings, Icee, fountain drinks Beer/wine.</b>			

PROPOSED FLOOR PLAN/LAYOUT OF PROPERTY	
Attach to this application a floorplan or layout of the proposed facility to include the following:	
1.	Every application for Liquor license shall have attached thereto a site drawing of the proposed licensed premises, drawn to scale showing the following: <ul style="list-style-type: none"> <li>a. The location of all rooms, segregated areas, including outdoor seating areas and the square footage thereof;</li> <li>b. The designated use of each room or segregated area (i.e. dining room, holding bar, service bar, kitchen, restrooms, outdoor seating areas, all rooms and segregated areas, including outdoor areas where alcoholic liquor may be served or consumed and all locations where live entertainment may be provided);</li> <li>c. The proposed seating capacity of rooms or segregated areas where the public is permitted to consume food and/or alcoholic beverages and/or live entertainment may be provided.</li> </ul>
2.	The site drawing is subject to the approval of the Local Liquor Control Commissioner. The Local Liquor Commissioner may impose such restrictions as he deems appropriate on any license by noting the same on the approved site drawing or as provided on the face of the license.
3.	A copy of the approved site drawing shall be attached to the approved license and is made a part of said license.
4.	It shall be unlawful for any licensee to operate and/or maintain the licensed premises in any manner inconsistent with the approved site drawing.
THE FIRE PREVENTION BUREAU WILL FURNISH ALL FINAL, PERMITTED OCCUPANCY NUMBERS FOR THIS LICENSE.	

# **CORPORATION / PREMISES QUESTIONS**

1.	<p>If applicant is an individual or partnership, is each and every person a United States citizen (5.08.070-2)? <input checked="" type="radio"/> Yes <input type="radio"/> No</p> <p>Is any individual a naturalized citizen? <input type="radio"/> Yes <input checked="" type="radio"/> No</p> <p>If yes, print name(s), date(s), and place(s) of naturalization:</p>
2.	<p>Is the premises owned or leased (5.08.070-6A)? <input type="radio"/> Owned <input checked="" type="radio"/> Leased</p>
3.	<p>If the premises are leased, list the names and addresses of all direct owners or owners of beneficial interests in any trusts, if premises are held in trust (5.08.070-6B):</p> <p><b>Name of Building Owner:</b> Fox Field Commons LLC <span style="float: right;">Ryan Corcoran</span></p> <p><b>Address of Building Owner:</b> 423 S. 2nd St. St Charles, IL 60174 <span style="float: right;">Phone Number: 630 301 2999</span></p> <p><b>Mailing Address of Building Owner (if different):</b> <span style="float: right;">E-mail Address: Ryan@complexmgt.com</span></p> <p><b>Name of Building Owner:</b> <span style="float: right;">Phone Number:</span></p> <p><b>Address of Building Owner:</b> <span style="float: right;">E-mail Address:</span></p> <p><b>Mailing Address of Building Owner (if different):</b></p> <p><b>Name of Building Owner:</b> <span style="float: right;">Phone Number:</span></p> <p><b>Address of Building Owner:</b> <span style="float: right;">E-mail Address:</span></p> <p><b>Mailing Address of Building Owner (if different):</b></p>
4.	<p>Does the applicant currently operate, or operated in the past, any other establishment within the City of St. Charles that requires a liquor license? <input type="radio"/> Yes <input checked="" type="radio"/> No</p> <p>If yes, please list the business name(s) and address(es):</p>
5.	<p>Does applicant have any outstanding debt with the City of St. Charles, including, but not limited to, utility bills, alcohol tax, and permit fees, for any current or previous establishment owned, operated or managed by the applicant? <input type="radio"/> Yes <input checked="" type="radio"/> No</p> <p><i>If yes, please note the City of St. Charles requires all debt to be paid in full before consideration of a new or renewed liquor license is issued. (5.08.050)</i></p>
6.	<p>Are any improvements planned for the building and/or site that will require a building permit? <input type="radio"/> Yes <input checked="" type="radio"/> No</p> <p>If yes, has a building permit been applied for? <input type="radio"/> Yes <input type="radio"/> No <span style="float: right;">Date of permit application _____</span></p>
7.	<p>Has applicant applied for a similar or other license on the premises other than the one for which this license is sought (5.08.070-7)? <input type="radio"/> Yes <input checked="" type="radio"/> No</p> <p>If yes, what was the disposition of the application? Explain as necessary:</p>

8.	<p>Has applicant (and all persons listed on page 2 of this application) ever been convicted of a felony under any Federal or State law, or convicted of a misdemeanor opposed to decency or morality (5.08.070-8)? <input type="radio"/> Yes <input checked="" type="radio"/> No</p> <p>Is applicant (and all persons listed on page 2 of this application) disqualified from receiving a liquor license by reason of any matter contained in Illinois State law and/or City of St. Charles Municipal Ordinances? <input type="radio"/> Yes <input checked="" type="radio"/> No</p>	
9.	<p><b>List previous liquor licenses issued by any State Government or any subdivision thereof (5.08.070-9). Use additional paper if necessary.</b></p> <p><b>Government Unit:</b> _____ <b>Location, City/State:</b> _____</p> <p><b>Date:</b> _____ <b>Special Explanations:</b> _____</p> <p><b>Government Unit:</b> _____ <b>Location, City/State:</b> _____</p> <p><b>Date:</b> _____ <b>Special Explanations:</b> _____</p>	
10.	<p>Have any liquor licenses possessed ever been revoked (5.08.070-9)? <input type="radio"/> Yes <input checked="" type="radio"/> No</p> <p><b>If yes, list all reasons on a separate, signed letter accompanying this application.</b></p> <p>Has any director, officer, shareholder, or any of your managers, ever been denied liquor license from any jurisdiction?</p> <p><input checked="" type="radio"/> Yes <input type="radio"/> No</p> <p><b>If yes, proceed to Question 15. If more space is needed, please attach a separate sheet of paper with the information.</b></p>	
11.	<p><b>Complete ONLY if yes was answered to the question above (10):</b></p> <p><b>Name:</b> _____ <b>Name of Business:</b> _____</p> <p><b>Position with the Business:</b> _____ <b>Date(s) of Denial:</b> _____</p> <p><b>Reason(s) for Denial of License:</b> _____</p>	
12.	<p><b>Date of Incorporation (Illinois Corporations) (5.08.070-10):</b> TX - Feb 11, 2019</p> <p><b>Date qualified under Illinois Business Corporation Act to transact business in Illinois (Foreign Corporation):</b> _____</p>	
13.	<p>Has the applicant and all designated managers read and do they all understand and agree not to violate any laws of the United States, the State of Illinois, and any of the ordinances of the City of St. Charles in conducting business (5.08.070-11)?</p> <p><input checked="" type="radio"/> Yes <input type="radio"/> No</p> <p>Have you, or in the case of a corporation, the local manager, or in the case of a partnership any of the partners, ever been convicted of any violation of any law pertaining to alcoholic liquor? <input type="radio"/> Yes <input checked="" type="radio"/> No</p> <p>Have you, or in the case of a corporation the local manager, or in the case of a partnership any of the partners, ever been convicted of a felony? <input type="radio"/> Yes <input checked="" type="radio"/> No</p> <p>Have you ever been convicted of a gambling offense? <input type="radio"/> Yes <input checked="" type="radio"/> No (If a partnership or corporation, include all partners and the local manager(s).)</p>	



	<p>Will you and all your employees refuse to serve or sell alcoholic liquor to an intoxicated person or to a minor?</p> <p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>
14.	<p>All individual owners, partners, officers, directors, and/or persons holding directly or beneficially more than five (5) percent in interest of the stock of owners by interest listed on page 2 of this application must be fingerprinted by the City of St. Charles Police Department (5.08.070-A12).</p> <p>Has this been done? <input type="radio"/> Yes <input type="radio"/> No <i>pending</i></p> <p>If yes, date(s):</p>
15.	<p>Has the applicant attached proof of Dram Shop Insurance to this application or already furnished it to the City of St. Charles (5.08.060)? <input type="radio"/> Yes <input checked="" type="radio"/> No <i>pending</i> If already furnished, date of delivery:</p>
16.	<p>Is the premises within 100 feet of any real property of any church; school; hospital; home for the aged or indigent persons; home for veterans, their wives/husbands, or children; and/or any military or naval station (5.08.230)?</p> <p><input type="radio"/> Yes <input checked="" type="radio"/> No</p>

#### B.A.S.S.E.T. TRAINING

Please list employees required to have B.A.S.S.E.T training on this page – include all managers, assistant managers, bartenders, and clerks who are permitted to make alcoholic liquor sales. Include copies of certificates for managers only and mark Manager if applicable. Add another page, if needed.

Name (First, Middle, Last): *Kevin Matthew White* Birthdate: [REDACTED]

Home Street Address, Incl City, State, Zip: [REDACTED]

Date of Course: \_\_\_\_\_ Place Course was Taken: \_\_\_\_\_ Certificate Granted? Y/N \_\_\_\_\_ Expiration: \_\_\_\_\_

Name (First, Middle, Last): *Arden ~~At~~ Anderson Wood* Birthdate: [REDACTED]

Home Street Address, Incl City, State, Zip: [REDACTED]

Date of Course: \_\_\_\_\_ Place Course was Taken: \_\_\_\_\_ Certificate Granted? Y/N \_\_\_\_\_ Expiration: \_\_\_\_\_

Name (First, Middle, Last): \_\_\_\_\_ Birthdate: \_\_\_\_\_

Home Street Address, Incl City, State, Zip: \_\_\_\_\_

Date of Course: \_\_\_\_\_ Place Course was Taken: \_\_\_\_\_ Certificate Granted? Y/N \_\_\_\_\_ Expiration: \_\_\_\_\_

Name (First, Middle, Last): \_\_\_\_\_ Birthdate: \_\_\_\_\_

Home Street Address, Incl City, State, Zip: \_\_\_\_\_

Date of Course: \_\_\_\_\_ Place Course was Taken: \_\_\_\_\_ Certificate Granted? Y/N \_\_\_\_\_ Expiration: \_\_\_\_\_

#### NEW MANAGEMENT REQUIREMENTS

**Whenever a new manager comes on board, the City must be notified and that person must be fingerprinted.**

**It is the business establishment's responsibility to keep copies of all B.A.S.S.E.T. certificates on file for their employees.**



COMMENTS/ADDITIONAL INFORMATION

Business Name:

Playville LLC

SIGNATURES

Applicant's Signature

Subscribed and sworn before me this 21<sup>st</sup> day of July, 2020

(Seal)



Carrie Plemons  
Notary Public

ADDENDUM TO RETAIL LIQUOR LICENSE APPLICATION

To be completed by the City of St. Charles Police Department

Date:

10/09/2020

Name of Applicant:

YANIS HUSSAIN, KEVIN WHITE, CRISTIAN GRACIA

Name of Business:

Playville LLC URBAN AIR ST. CHARLES

Address of Business:

2732 EAST MAIN STREET

Ward Number:

2

Pursuant to the provision of the City of St. Charles Municipal Code, Chapter 5.08, Alcoholic Beverages, the following guide shall be in effect for the investigation of an applicant for a Retail Dealer's Liquor License:

1. Date on which applicant will begin selling retail alcoholic liquors at this location:
2. Is the location within 100 feet of any church; school; hospital; home for the aged or indigent persons; home for veterans, their wives/husbands or children; or any military or naval station? ☒ Yes ☐ No
3. If the answer to question 2 is yes, answer the following: Is applicant's place of business a hotel offering restaurant service, a regularly organized club, a restaurant, a food shop, or other place where the sale of alcoholic liquors is not the principal business? ☒ Yes ☐ No  
 If yes, answer a, b and c:  
 a. State the kind of such business: INDOOR Family Fun Park.  
 b. Give date on which applicant began the kind of business named at this location:  
 c. Has the kind of business designated been established at this location for such purpose prior to February 1, 1934, and carried on continuously since such time by either the applicant or any other person?  
☐ Yes ☒ No
4. If premises for which an alcoholic liquor license is herein applied for are within 100 feet of a church, have such premises been

	<p>licensed for the sale of alcoholic liquor at retail prior to the establishment of such church? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, have the premises been continuously operated and licensed for the sale of alcoholic liquor at retail since the original alcoholic liquor license was issued therefore? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>
5.	<p>Is the place for which the alcoholic liquor license is sought a dwelling house, flat, or apartment used for residential purposes?</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
6.	<p>Is there any access leading from premises to any other portion of the same building or structure used for dwelling or lodging purposes and which is permitted to be used or kept accessible for use by the public? (Connection between premises and such other portion of building or structure as is used only by the applicant, his/her family and personal guests not prohibited.)</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
7.	<p>If applicant conducts or will conduct in the same place any other class of business in addition to that of City Retailer of Alcoholic Liquor, state the kind and nature of such business: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
8.	<p>Are all rooms where liquor will be sold for consumption on the premises continuously lighted during business hours by natural light or artificial white light so that all parts of the interior shall be clearly visible? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
9.	<p>Are premises located in any building belonging to or under the control of the State of Illinois or any other political subdivision thereof, such as county, city, etc.? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
10.	<p>Are the premises for which license is herein applied for a store or place of business where the majority of customers are minors of school age or where the principal business transacted consists of school books, school supplies, food or drinks for such minors? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
11.	<p>It is required by the City of St. Charles that all employees undergo BASSET training. Provide a copy of the certificate of training completion for each manager. All certificates for managers have been submitted: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
12.	<p>From your observation and investigation, has applicant—to the best of your knowledge—truthfully answered all questions?</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If no, state exceptions:</p>
13.	<p>Have all persons named in this application been fingerprinted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Fingerprinted by: <u>ScPD</u> Date: <u>09/23/2020</u></p>
14.	<p>Other necessary data:</p>



**HOTCHKISS**  
INSURANCE

# Liquor Liability

## Warranted Policy Conditions

Terms are subject to the following warranted conditions based on the risk specific information provided on the application. Please note that coverage terms may be altered if any of the following conditions are not satisfied.

- The insured has no knowledge of more than 1 liquor liability and/or assault or battery claims or notification of potential liquor liability and/or assault or battery claims for this location arising out of occurrences within five years prior to the date the application is signed (excluding a liquor liability claim closed without payment because insured found not legally liable).
- The insured has no knowledge of more than three (3) citations, violations, charges or enforcement actions at this location within five (5) Years of the date of the application. Of those three (3), no more than two (2) relate to the sale or service of alcohol or criminal activities.
- Employees or other persons are not permitted to consume alcohol during the hours of employment or service.
- Only the insured and its authorized employees or members are permitted to serve alcohol. In the alternative, the insured agrees that persons serving alcohol who are not the insured's authorized employees or members are covered under a policy of liquor liability insurance with limits greater than or equal to the limits of this policy.
- The establishment closes by 2:30 AM daily. Alcohol sales cease by 2:00 AM.
- The insured does not offer beer for less than \$2.00.
- The insured does not offer liquor or wine for less than \$3.00.



## HOTCHKISS INSURANCE

# Liquor Liability

Form or Endorsement Edition Date	Endorsement Title <i>(Only the endorsement titles are shown below, please review the form for a complete description of coverage, which provide the only coverage represented by this proposal.)</i>	
ILP001	0104	OFAC
CG0033	1207	LIQUOR LIABILITY COVERAGE FORM
IL0017	1198	COMMON POLICY CONDITIONS
LD5S23j	0314	SIGNATURES
ALL20887	1006	CHUBB PRODUCER COMPENSATION PRACTICES & POLICIES
ALL21101	1106	TRADE OR ECONOMIC SANCTIONS ENDORSEMENT
WSG084	0511	ILLINOIS UNION INSURANCE COMPANY NOTICE
ALL39844	1010	CHUBB GROUP U.S. PRIVACY NOTICE
CG9909	1219	PREMIUM AUDIT NONCOMPLIANCE CHARGE
IL0021	0908	NUCLEAR ENERGY LIABILITY EXCLUSION
LD43271	0614	EXPANDED DEFINITION OF BODILY INJURY
LD43397	0614	EXPANDED DEFINITION OF EMPLOYEE ENCL.
LD43399	0614	SEPARATION OF INSURED'S AMENDATORY ENDORSEMENT
LD43402	0614	LIMITATION OF COVERAGE TO INSURED PREMISES ENDORSEMENT
LD43403	0215	PUNITIVE DAMAGES EXCLUSION
LD43421	0614	AMENDMENT OF PREMIUM AUDIT CONDITIONS ENDORSEMENT
LD43425	0614	DEFINITION OF "RECEIPTS"
LD43426	0614	AMENDMENT OF WHO IS AN INSURED ENDORSEMENT - NEWLY ACQUIRED OR NEWLY FORMED ORGANIZATIONS EXCLUDED
LD43428	0614	FIREARMS EXCLUSION
LD43430	0614	ADDITIONAL INSURED ENDORSEMENT - LIQUOR LICENSE HOLDER
LD43432	0614	MINIMUM EARNED PREMIUM ENDORSEMENT
LD43786	0814	WARRANTY ENDORSEMENT - EXCLUSION OF COVERAGE FOR BREACH OF ENUMERATED WARRANTIES - ONE OR FEWER PRIOR CLAIMS OR INCIDENTS
XS2X35d	0116	SERVICE OF SUIT ENDORSEMENT - ILLINOIS
SL24684	0812	ILLINOIS SURPLUS LINES NOTIFICATION
SL37994	0812	ILLINOIS DOMESTIC SURPLUS LINES INSURER NOTICE
TR51520	1118	POLICYHOLDER DISCLOSURE NOTICE OF TERRORISM INSURANCE COVERAGE

19 / 48



This proposal contains a brief outline of coverage to be included in any policy that may be issued in the future.  
This is only a summary and the terms and conditions of any policy will take precedence over the proposal.



**HOTCHKISS**  
INSURANCE

# Liquor Liability

**Carrier:** United States Liability Insurance Company. (A.M. Best Rating: A++, XI)

**Policy Term:** 7-22-20 to 7-22-21

## Coverage Details

Limits of Liability	Description
\$1,000,000	Per Occurrence <i>(Includes Assault &amp; Battery)</i>
\$2,000,000	Annual Aggregate <i>(Includes Assault &amp; Battery)</i>
Deductible	Description
Not Applicable	Deductible Per Occurrence

## Classifications/Exposures for Premium Basis (Subject to Audit)

Location	Premium Based on	Class Code	Classification	Premium Basis	Rate Per \$1,000
1	Sales	LIQ12	Restaurant With Sale Of Alcoholic Beverages That Are Less Than 25% Of The Total Food And Alcohol Receipts Of The Restaurant	\$40,000	\$1.0912
1	Sales	LIQ34	Additional Insured – Liquor License Holder (LD-43430)	1	0

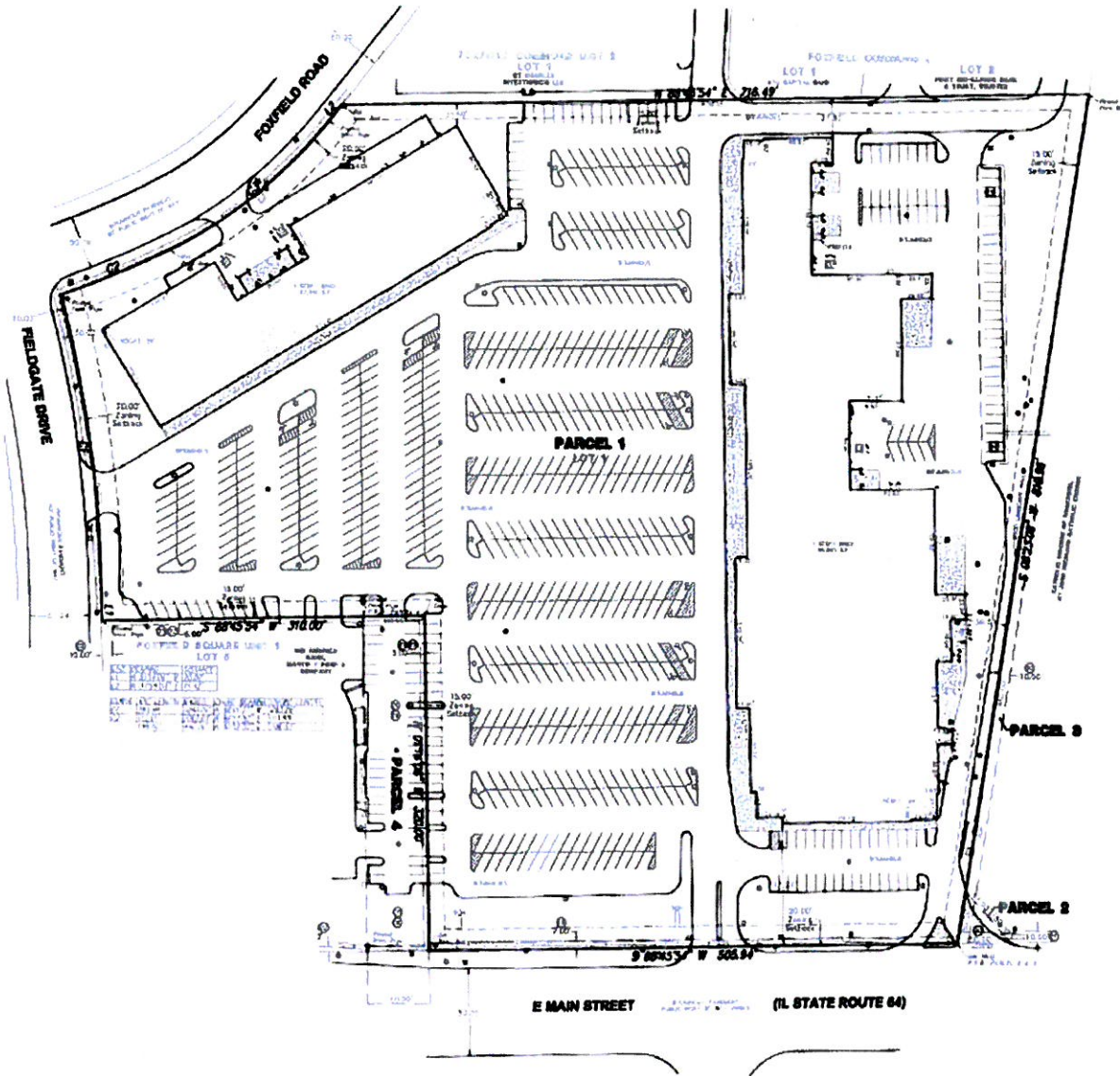
**Premium: \$856.<sup>00</sup>**

*(Pure Premium (25% Minimum Earned): \$729 + Company Fee \$100 + IL Tax \$26 + Stamping Fee \$1)*

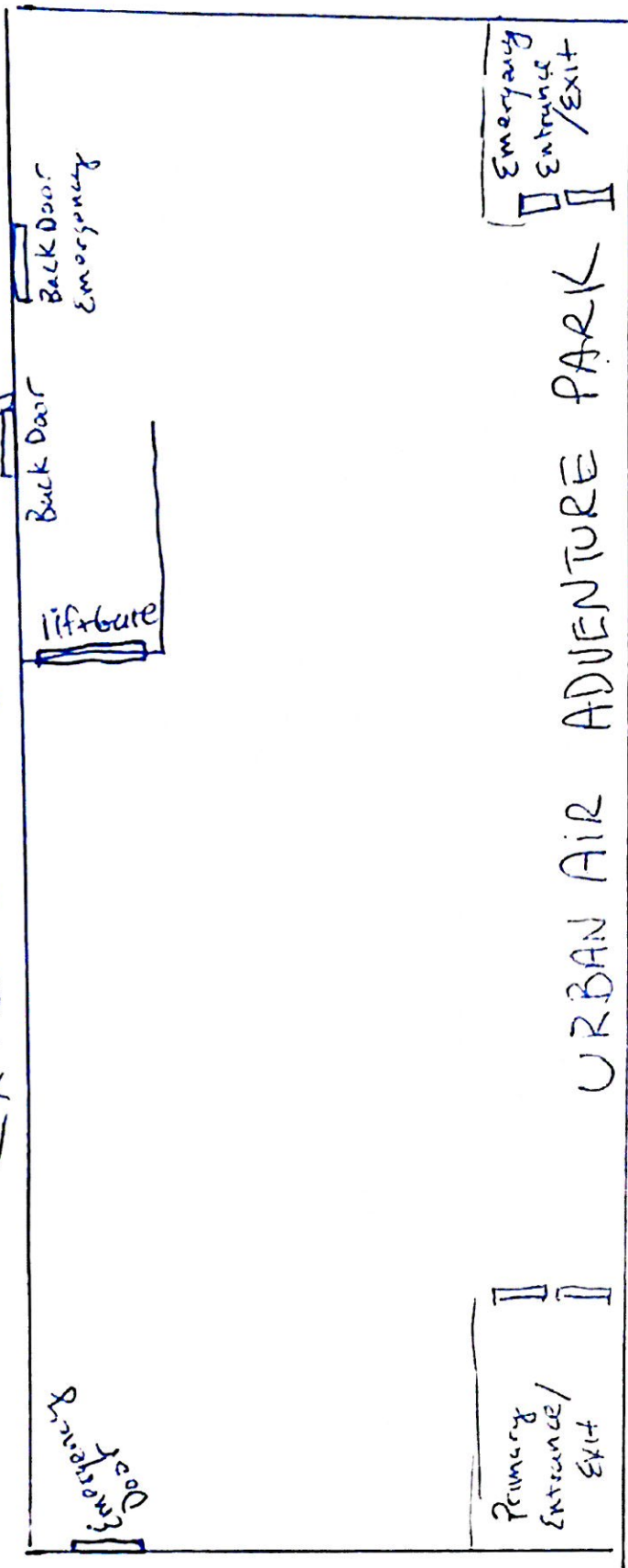
This proposal contains a brief outline of coverage to be included in any policy that may be issued in the future.  
This is only a summary and the terms and conditions of any policy will take precedence over the proposal.



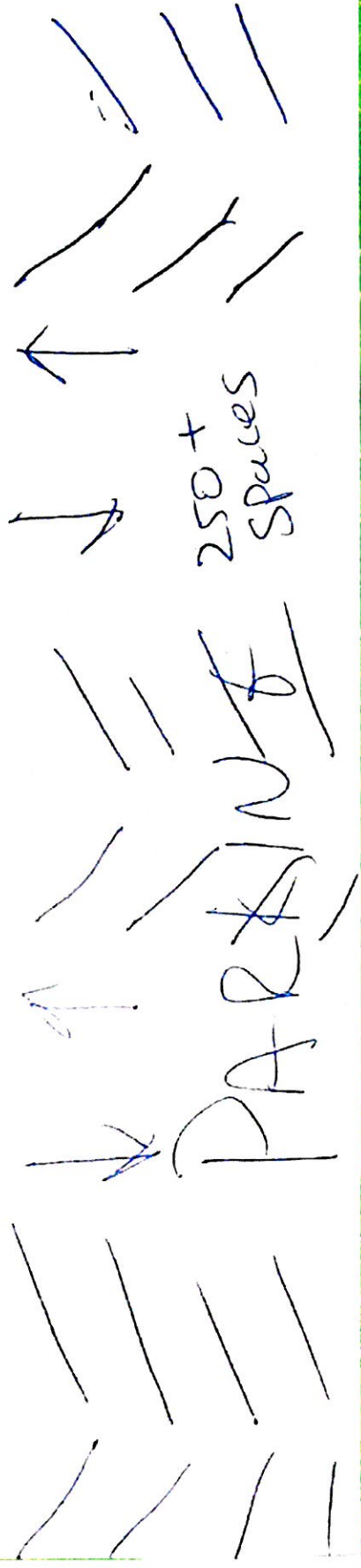
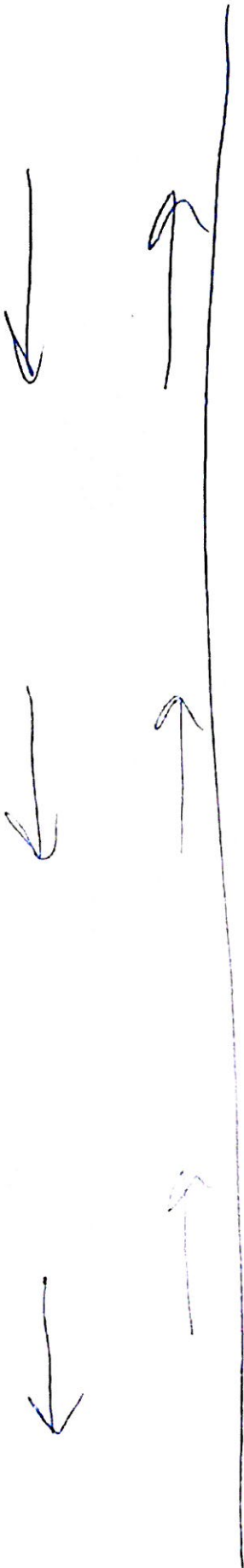
**EXHIBIT A**  
**SHOPPING CENTER SITE PLAN AND DELINEATION OF PREMISES**



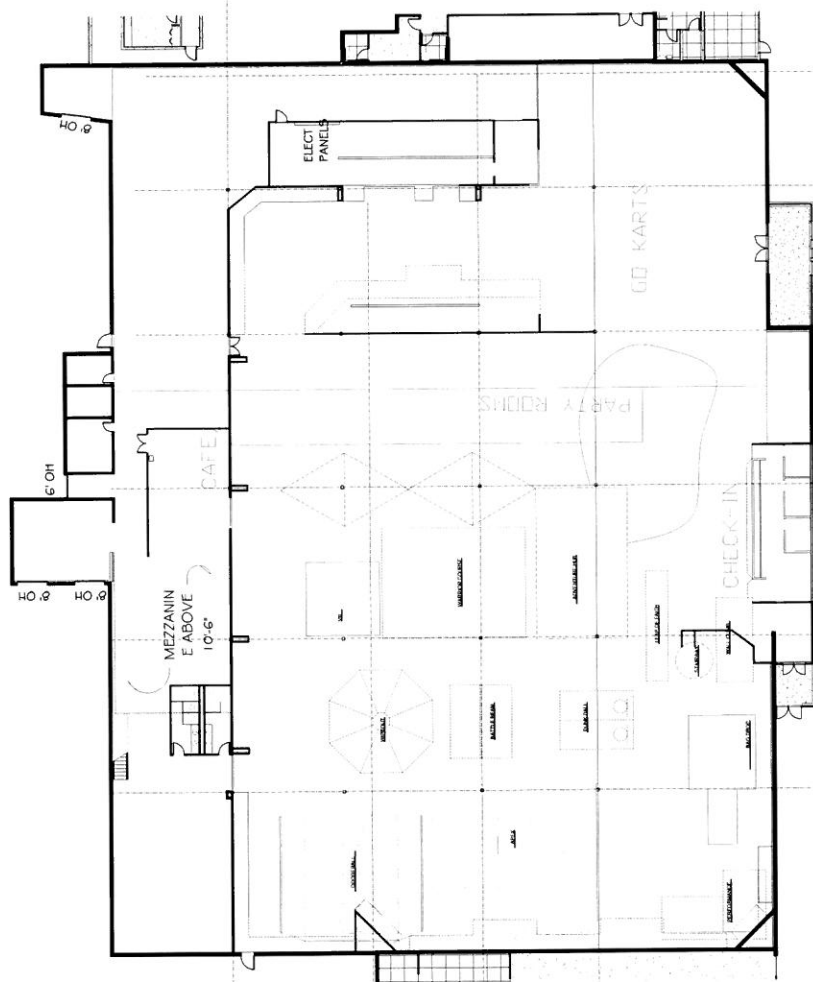
# Exterior Building

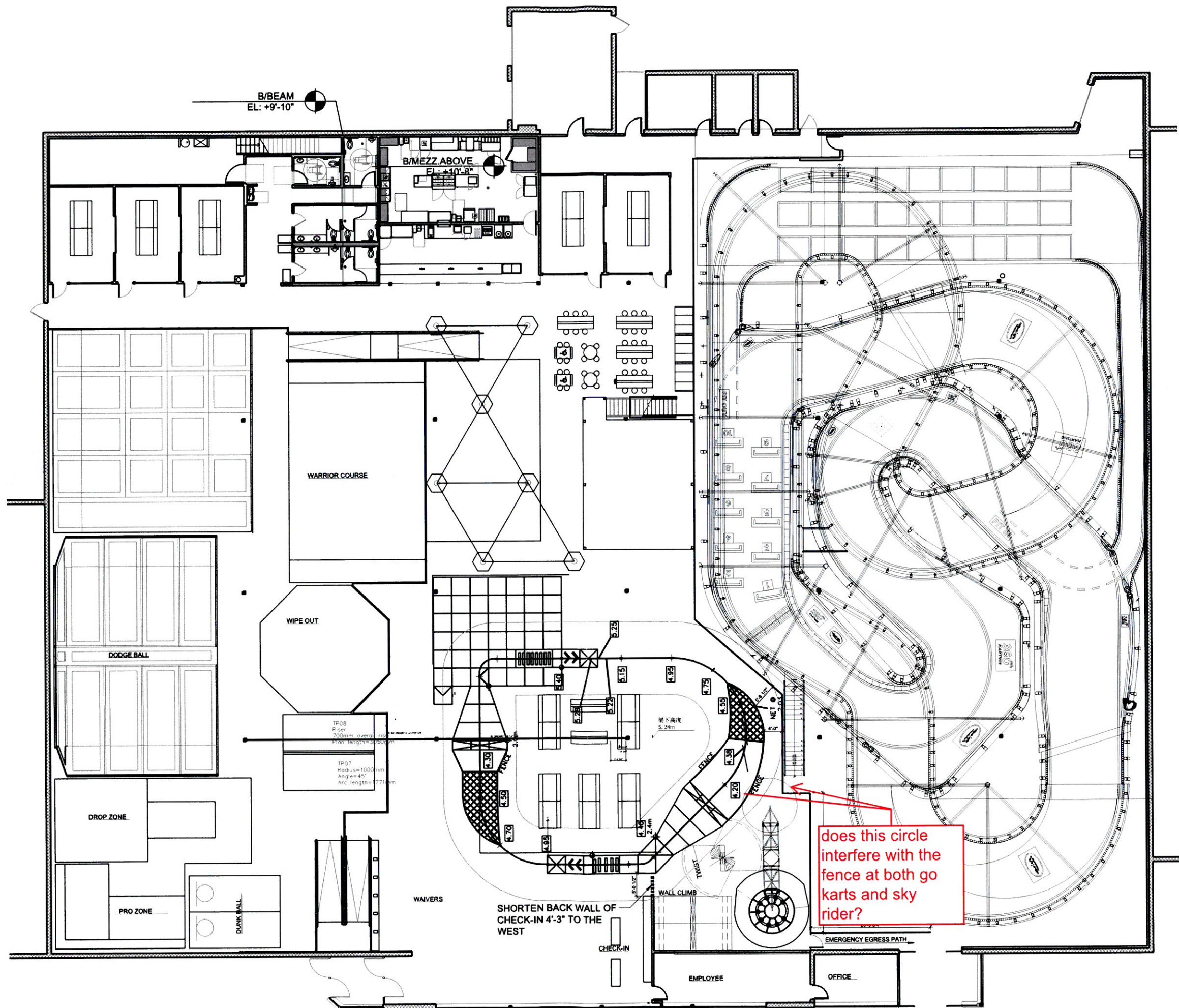


URBAN AIR ADVENTURE PARK









does this circle  
interfere with the  
fence at both go  
karts and sky  
rider?

## **Business plan**

Urban Adventure Park is an indoor recreational family fun center with a café. Parents and children can experience a fun filled day with electric indoor go-carts on a double decker track, bumper cars that can spin and flip the rider 360 degrees, varieties of trampolines, ninja warrior course, children's multi-level playground, climbing walls, battle beam, zip line, airwalk, birthday rooms, a café and much, much more.

The hours of operation are mon thru Thursday 3 pm to 8 pm. Friday and Saturday 10 am to 10 pm. Sunday 11 am to 8 pm.

The café menu will include hamburgers, hot dogs, nachos, chicken strips, pizza, veggie plates, etc. (a limited menu may be in effect during Covid-19 phases). Drinks will include refrigerated bottled Pepsi products, Pepsi fountain drinks, Iced fountain products, mixed beer and wine products only.

We will not sell or distribute alcoholic beverages to minors. Parents can purchase alcoholic beverages if they are NOT participating in any of the indoor activities.

There is plentiful indoor dining/seating with 10 picnic bench seating, 6 booth seating, 4 tables with chairs, 7 round top tables with chairs. There are 5 private enclosed party rooms as well as 2 mezzanine suites.

There is no outdoor seating and no live entertainment.

Urban Air, St. Charles

Playville LLC