	AGENDA ITEM EXECUTIVE SUMMARY									
	Title:	Recommend Approval for Class B3 Liquor License for Bulldog Ale House								
ST. CHARLES	Presenter:	Mayor DeWitte								
Please check appropri	iate box:									
Government Operations			X	Government Services 02.27.12						
Planning & Development				City Council						
Public Hearing	,									
Estimated Cost:			Budg	geted: YES NO						
If NO, please explain how item will be funded:										
Executive Summary:				**		. 1	. 261 E B	, ·		
This is a request for a Class B3 liquor license for Bulldog Ale House to be located at 3615 E Main Street, St. Charles (former Bennigan's location). A background check has been completed as well as all documents are in order and have been signed off by the Police Department.										
Attachments: (please list)										
Application (front page)										
Recommendation / Suggested Action (briefly explain):										
Request approval for a Class B3 liquor license for Bulldog Ale House to be located at 3615 E Main Street. St. Charles (former Bennigan's location).										

Agenda Item Number: 7.a

For office use only:

For Office Use Received: Fee Paid: \$ Receipt

CITY OF ST. CHARLES

LIQUOR CONTROL COMMISSIONER
TWO EAST MAIN STREET
ST. CHARLES, ILLINOIS 60174-1984



City Retail Liquor Dealer License Application (rev. 6/10) Non-Refundable

Ordinance 5.08.050.A1 App	lication must be completed	in full Incomplete appli	cations will be rejected		
Business Type: Circle one Indiv	·				
Business Name BULLADG	ALE HOUSE	Sales Tax #	Dending		
Business Address 3615 E	MAINST	Business Pho	ne #		
Contact Person MAROUANE					
Bassett Certification Plm Qm q	License C	lass: B			
If Corporation, Corporate Name					
Corporation Address 708 Corporate Officers, plus Manager of E Or Sole Proprietor	S. LASA Utt stablishment, Officers must	include President, Vice Presider	nt, Secretary and Treasure		
Have you had a business within the Ci If yes, list address of business					
Full Name, include Middle Initial(V\)	PROUNCE TAIR	Title			
Birth Date <u>a</u> <u>3</u> Birthplace <u>i</u>	Driver's License	# Prome Phone	e#(
Home Address			ameliacom,		
Full Name, include Middle Initial/	NEFMET AHME	Tì Title			
Birth Date <u>J.</u>	•				
Home Address					
Full Name, include Middle Initial		Title			
			Home Phone #		
Home Address					
Full Name, include Middle Initial		Title			
			Home Phone #		
Home Address					
Sch	edule of Annual Fees for Re	•			
Class A Package Liquor Sales: A-1 (Pkg. Stores Only) A-2 (Pkg. Stores – Grocery/Drug) A-3 (Gourmet Beers & Wine) A-4 (Brewery & Sales) Class B Predominately Food	\$1,600/year \$1,600/year \$1,600/year \$1,600/year	Class C Predominately Liquor: C-1 (On Premise Sales) C-2 (Entertainment) C-3 (Beer & Wine Only) Class D (Site Specific & Hotel/N D-1 (Pheasant Run)	\$4,000/year		
B-1 (Small Restaurant – no holding bar) B-2 (Holding Bar[s]) B-3 (Live Entertainment) B-4 (Beer & Wine Only) B-5 (Counter Senice Beer & Wine Only)	\$1,200/year \$1,600/year \$2,600/year \$1,200/year \$1,200/year	D-2 (Hotels/Motels) \$2,000/year D-3 (Banquet Halls & County Clubs) \$2,000/year D-4 (Clubs) \$1,000/year D-5 (Arcada) \$2,000/year D-6 (O-Center) \$2,000/year			