



CITY OF MOLINE LIQUOR LICENSE

CHANGE OF BUSINESS/CORPORATE NAME - TYPE - ADDRESS

- This form is to be used if the business name, business type, corporation name or corporation address is changing.
- The City of Moline requires notice of change within fourteen (14) days of said change pursuant to Section 4-3207(b) of the Moline Code of Ordinances.

Please complete this form, attach supporting documents showing proof of change, and send to:

City Clerk / Deputy Local Liquor Control Commissioner
619 16th Street, Moline, IL 61265
cityclerk@moline.il.us

1. Type of Business

Check if new type

Sole Proprietor

Partnership

Illinois Corporation

Foreign Corporation

Limited Liability Company

Exact Name of Current Liquor License Holder –

List both the corporation name and the business (DBA) name:

2. Address of Business (DBA):

3. New Business (DBA) Name:

Or

New Corporation Name:

Or

New Corporation Address:

AFFIDAVIT OF APPLICANT

This affidavit must be signed before a notary public.

STATE OF _____)
) SS
COUNTY OF _____)

I, the undersigned being first duly sworn upon my oath state and depose as follows:

1. I understand that the foregoing information is set forth so that the aforementioned might obtain an amended liquor license in the City of Moline.
2. That under the State laws of the State of Illinois, the answers to questions are material to the question of whether or not the establishment is entitled under the law to obtain an amended liquor license in the State of Illinois.
4. That I understand that making a false affidavit constitutes perjury where a false answer is made knowingly to a material question.
5. That I have personally prepared the answers to the above questions.
6. That I have reread the answers, find them to be wholly true, and I wholly understand them.

Signature of Licensee Owner or Manager

Printed Name of Licensee Owner or Manager

Title

Subscribed and sworn to before me this _____ day of _____, 20____.

(seal)

Notary Public