



Class T Temporary Liquor License Application

Applicant Information

Applicant: STEVE QUIES (RYBD VENTURES)
Business Name (d/b/a): POISON IVY PUB
(Must have current Village of Roscoe Liquor License)
Village of Roscoe Liquor License Number: 459-24 License Class: F (full liquor)
Primary Contact Person /Agent: STEVE QUIES
Mailing Address: 5765 ELEVATOR
Email: [REDACTED]
Business Phone: 815 623 1180 Other Phone: [REDACTED] Fax: [REDACTED]

General Information

Type of Event FALL FEST
Address/Location of Event 5727 BROAD ST
Set up dates and times THUR
Tear down dates and times MON
Event Date 9/6/24 Alcohol Sales Start Time: 5:00 PM Alcohol Sales End Time: 10:00 PM
Event Date 9/7/24 Alcohol Sales Start Time: 12:00 PM Alcohol Sales End Time: 10:00 PM
Event Date 9/8/24 Alcohol Sales Start Time: 12:00 PM Alcohol Sales End Time: 8:00 PM
Event Date _____ Alcohol Sales Start Time: _____ Alcohol Sales End Time: _____

Dram Shop Coverage

Attach a copy of the policy declaration to this application

List dram insurance coverage including name and address of insurance company for the licensee and premises for which the alcoholic liquor will be sold for the duration of the license.

Insurance Company Name: Coyle-Kiley Insurance Agency
Address: 810 N. Alpine Rd, Rockford, IL 61107
Policy Number: LL10012154 Coverage Limits: \$1,000,000⁰⁰

License Information

Number of Days Requested 3 Class T Temporary (One Day) \$ 100.00/day

Office Use Only

Date Issued: _____ Expires: _____ Fee: _____ License No: _____

☐ Check # _____ ☐ Cash ☐ Credit Card Receipt # _____