2026 Liquor License

11 - Class BL Boutique Gaming

ANNAS CAFE LLC – ROSCOE dba ANNA'S LUCKY 777 UNIT 6

ANNAS CAFE LLC – ROSCOE dba ANNA'S LUCKY 777 UNIT 4

MILLION MILE LLC dba CECE'S LUCKY SLOTS

DANDY'S INC dba DANDY'S SLOTS

EMPIRE SLOTS ROSCOE LLC dba ROYALTY SLOTS

JACKPOT JOE'S LLC dba JACKPOT JOE'S

ADRI'S GAMING BOUTIQUE, INC dba LUCKY HORSESHOE

SUZZIE, LLC dba MAMA SUE'S DELI & SLOTS

NEXT STOP ENTERPRISES LLC dba NEXT STOP GAMING

PIPITONE INC dba SLOTS OF FORTUNE

A G P 18 INCORPORATED dba SLOTS OF FORTUNE

ROSCOE

10631 Main Street, P.O. Box 283, Roscoe IL 61073
Phone) 815-623-2829 Fax) 815-623-1360 Email) jreidinger@villageofroscoe.com

RETAIL LIQUOR DEALER'S LICENSE APPLICATION

§114 of Village of Roscoe Code of Ordinances

SECTION 1: Applicant Information

Primary Contact Person /Agent: Anthony Donato

Licensee: Anna's Cafe LLC - Roscoe

Business Name (d/b/a): Anna's Lucky 777

Mailing Address: 707 Osterman Ave Unit 1546 Deerfield, IL 60015

Premise Address: 5257 Swanson Rd Unit 6, Roscoe, IL 61073

Email: [redacted]

Business Phone: 815-654-7568 Other Phone: _____ Fax: _____

Corporate Information (if applicable)

Illinois Corporate Registration Number: 04876024 Date of Incorporation/Formation: 07/01/2014

Is corporation in good standing with Illinois Secretary of State: (•) Yes ( ) No

If foreign corporation, date qualified to do business in Illinois: _____

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: Society Insurance

Address: 150 Camelot Dr, Fond du Lac, WI 54936

Policy Number: BP10027820 Coverage Limits: $2,000,000

Anticipated Revenue

Attach a copy of your financial statement.

Indicate anticipated percentage of total annual revenue from each of the following categories Percentages must total 100%

Alcohol Sales: 10 %

Food Sales: 10 %

General Merchandise (or other): _____ %

Net Terminal Income (gaming revenue): 80 %

License Information

Check one box. If license class selected is different than previous year a five-hundred-dollar application fee is required.

☐	**Class A**	**On & Off Premises Full Liquor**	**$4,000.00**
☐	**Class D**	**On Premise Only Beer & Wine**	**$2,500.00**
☐	**Class F**	**On Premise Only Full Liquor**	**$3,000.00**
☐	**Class G**	**Package Store Beer & Wine**	**$2,000.00**
☐	**Class C**	**Package Store Full Liquor**	**$3,000.00**
☑	**Class BL**	**Boutique Gaming Full Liquor**	**$6,000.00**
☐	**Class BP**	**Brew Pub Full Liquor**	**$2,500.00**
☐	**Class CT**	**Caterer Retailer Full Liquor**	**$ 500.00**
☐	**Application Fee (new licenses and license class changes only)**		**$ 500.00**

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RETAIL LIQUOR DEALER'S LICENSE APPLICATION

§114 of Village of Roscoe Code of Ordinances

SECTION 1: Applicant Information

Primary Contact Person /Agent: Anthony Donato

Licensee: Anna's Cafe LLC - Roscoe

Business Name (d/b/a): Anna's Lucky 777

Mailing Address: 707 Osterman Ave Unit 1546 Deerfield, IL 60015

Premise Address: 5257 Swanson Rd Unit 4, Roscoe, IL 61073

Email: [redacted]

Business Phone: 815-654-7568 Other Phone: _____ Fax: _____

Corporate Information (if applicable)

Illinois Corporate Registration Number: 04876024 Date of Incorporation/Formation: 07/01/2014

Is corporation in good standing with Illinois Secretary of State: (•) Yes ( ) No

If foreign corporation, date qualified to do business in Illinois: _____

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: Society Insurance

Address: 150 Camelot Dr, Fond du Lac, WI 54936

Policy Number: BP10027820 Coverage Limits: $2,000,000

Anticipated Revenue

Attach a copy of your financial statement.

Indicate anticipated percentage of total annual revenue from each of the following categories Percentages must total 100%

Alcohol Sales: 10 %

Food Sales: 10 %

General Merchandise (or other): _____ %

Net Terminal Income (gaming revenue): 80 %

License Information

Check one box. If license class selected is different than previous year a five-hundred-dollar application fee is required.

☐	**Class A**	**On & Off Premises Full Liquor**	**$4,000.00**
☐	**Class D**	**On Premise Only Beer & Wine**	**$2,500.00**
☐	**Class F**	**On Premise Only Full Liquor**	**$3,000.00**
☐	**Class G**	**Package Store Beer & Wine**	**$2,000.00**
☐	**Class C**	**Package Store Full Liquor**	**$3,000.00**
☑	**Class BL**	**Boutique Gaming Full Liquor**	**$6,000.00**
☐	**Class BP**	**Brew Pub Full Liquor**	**$2,500.00**
☐	**Class CT**	**Caterer Retailer Full Liquor**	**$ 500.00**
☐	**Application Fee (new licenses and license class changes only)**		**$ 500.00**

ROSCOE

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RETAIL LIQUOR DEALER'S LICENSE APPLICATION

§114 of Village of Roscoe Code of Ordinances

SECTION 1: Applicant Information

Primary Contact Person /Agent: Colton Lane

Licensee: Million Mile LLC

Business Name (d/b/a): CeCe's Lucky Slots

Mailing Address: 11907 Main Street Suite 2

Premise Address: 11907 Main Street

Email: [redacted]

Business Phone: 815-270-0093 Other Phone: [redacted] Fax: _____

Corporate Information (if applicable) 6395139

Illinois Corporate Registration Number: ~~4275-9390~~ Date of Incorporation/Formation: 12-22-15

Is corporation in good standing with Illinois Secretary of State: ◉Yes ○No

If foreign corporation, date qualified to do business in Illinois: _____

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: Society Insurance ~ Mosher & Associates

Address: 127 W. 8th St. Monroe, WI 53566

Policy Number: BP2301256 02 Coverage Limits: $1,000,000.00

Anticipated Revenue

Attach a copy of your financial statement.

Indicate anticipated percentage of total annual revenue from each of the following categories Percentages must total 100%

Alcohol Sales: 20 %

Food Sales: 0 %

General Merchandise (or other): 0 %

Net Terminal Income (gaming revenue): 80 %

License Information

Check one box. If license class selected is different than previous year a five-hundred-dollar application fee is required.

☐	**Class A**	**On & Off Premises Full Liquor**	**$4,000.00**
☐	**Class D**	**On Premise Only Beer & Wine**	**$2,500.00**
☐	**Class F**	**On Premise Only Full Liquor**	**$3,000.00**
☐	**Class G**	**Package Store Beer & Wine**	**$2,000.00**
☐	**Class C**	**Package Store Full Liquor**	**$3,000.00**
☑	**Class BL**	**Boutique Gaming Full Liquor**	**$6,000.00**
☐	**Class BP**	**Brew Pub Full Liquor**	**$2,500.00**
☐	**Class CT**	**Caterer Retailer Full Liquor**	**$ 500.00**
☐	**Application Fee** (new licenses and license class changes only)		**$ 500.00**

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RETAIL LIQUOR DEALER'S LICENSE APPLICATION

§114 of Village of Roscoe Code of Ordinances

SECTION 1: Applicant Information

Primary Contact Person /Agent: Peter P. Gwizdala

Licensee: Peter P. Gwizdala

Business Name (d/b/a): Dandys Slots

Mailing Address: 5066 Rockrose Ct.

Premise Address: 5066 Rockrose Ct.

Email: [redacted]

Business Phone: 815-270-0791 Other Phone: [redacted] Fax: _____

Corporate Information (if applicable)

Illinois Corporate Registration Number: 7234247 37-1947955 Date of Incorporation/Formation: _____

Is corporation in good standing with Illinois Secretary of State: (Yes) No

If foreign corporation, date qualified to do business in Illinois: _____

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, Inc

Address: 810 N. Alpine Rd, Rockford, IL 61107-3673

Policy Number: _____ Coverage Limits: _____

Anticipated Revenue

Attach a copy of your financial statement.

Indicate anticipated percentage of total annual revenue from each of the following categories. Percentages must total 100%

Alcohol Sales: 10 %

Food Sales: _____ %

General Merchandise (or other): _____ %

Net Terminal Income (gaming revenue): 90 %

License Information

Check one box. If license class selected is different than previous year a five-hundred-dollar application fee is required.

☐	**Class A**	**On & Off Premises Full Liquor**	**$4,000.00**
☐	**Class D**	**On Premise Only Beer & Wine**	**$2,500.00**
☐	**Class F**	**On Premise Only Full Liquor**	**$3,000.00**
☐	**Class G**	**Package Store Beer & Wine**	**$2,000.00**
☐	**Class C**	**Package Store Full Liquor**	**$3,000.00**
☑	**Class BL**	**Boutique Gaming Full Liquor**	**$6,000.00**
☐	**Class BP**	**Brew Pub Full Liquor**	**$2,500.00**
☐	**Class CT**	**Caterer Retailer Full Liquor**	**$ 500.00**
☐	**Application Fee (new licenses and license class changes only)**		**$ 500.00**

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RETAIL LIQUOR DEALER'S LICENSE APPLICATION

§114 of Village of Roscoe Code of Ordinances

SECTION 1: Applicant Information

Primary Contact Person /Agent: Michael Capriola Ii

Licensee: Empire Slots Roscoe

Business Name (d/b/a): Empire Slots Roscoe

Mailing Address: 4972 Hononegah Rd

Premise Address: 4972 Hononegah Rd

Email: [redacted]

Business Phone: 8159789724 Other Phone: _____ Fax: _____

Corporate Information (if applicable)

Illinois Corporate Registration Number: 9945709 Date of Incorporation/Formation: _____

Is corporation in good standing with Illinois Secretary of State: (X) Yes ( ) No

If foreign corporation, date qualified to do business in Illinois: _____

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: BroadMoor Agency Inc

Address: 3923 East State St

Policy Number: US-2025-118 Coverage Limits: 1,000,000

Anticipated Revenue

Attach a copy of your financial statement.

Indicate anticipated percentage of total annual revenue from each of the following categories. Percentages must total 100%

Alcohol Sales: 10 %

Food Sales: 0 %

General Merchandise (or other): 0 %

Net Terminal Income (gaming revenue): 90 %

License Information

Check one box. If license class selected is different than previous year a five-hundred-dollar application fee is required.

☐	**Class A**	**On & Off Premises Full Liquor**	**$4,000.00**
☐	**Class D**	**On Premise Only Beer & Wine**	**$2,500.00**
☐	**Class F**	**On Premise Only Full Liquor**	**$3,000.00**
☐	**Class G**	**Package Store Beer & Wine**	**$2,000.00**
☐	**Class C**	**Package Store Full Liquor**	**$3,000.00**
☑	**Class BL**	**Boutique Gaming Full Liquor**	**$6,000.00**
☐	**Class BP**	**Brew Pub Full Liquor**	**$2,500.00**
☐	**Class CT**	**Caterer Retailer Full Liquor**	**$ 500.00**
☐	**Application Fee** (new licenses and license class changes only)		**$ 500.00**

ROSCOE

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RETAIL LIQUOR DEALER'S LICENSE APPLICATION

§114 of Village of Roscoe Code of Ordinances

SECTION 1: Applicant Information

Primary Contact Person /Agent: Thomas Santopolo

Licensee: Jackpot Joes LLC

Business Name (d/b/a): Jackpot Joes

Mailing Address: 5059 Edgemere Ct. Roscoe, IL 61073

Premise Address: 5059 Edgemere Ct. Roscoe, IL 61073

Email: [redacted]

Business Phone: 815-270-0729 Other Phone [redacted] Fax: N/A

Corporate Information (if applicable)

Illinois Corporate Registration Number: 0340777 27-900019 Date of Incorporation/Formation: 2017

Is corporation in good standing with Illinois Secretary of State: ☒ Yes ○ No

If foreign corporation, date qualified to do business in Illinois: _____

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: Accord / Reese Insurance Agency

Address: 420 Financial #102 Rockford, IL 61107

Policy Number: 0076939257 Coverage Limits: 1,000,000.00 SEE Attached

Anticipated Revenue

Attach a copy of your financial statement.

Indicate anticipated percentage of total annual revenue from each of the following categories. Percentages must total 100%

Alcohol Sales: 45 %

Food Sales: _____ %

General Merchandise (or other): _____ %

Net Terminal Income (gaming revenue): 55 %

License Information

Check one box. If license class selected is different than previous year a five-hundred-dollar application fee is required.

☐	**Class A**	**On & Off Premises Full Liquor**	**$4,000.00**
☐	**Class D**	**On Premise Only Beer & Wine**	**$2,500.00**
☐	**Class F**	**On Premise Only Full Liquor**	**$3,000.00**
☐	**Class G**	**Package Store Beer & Wine**	**$2,000.00**
☐	**Class C**	**Package Store Full Liquor**	**$3,000.00**
☒	**Class BL**	**Boutique Gaming Full Liquor**	**$6,000.00**
☐	**Class BP**	**Brew Pub Full Liquor**	**$2,500.00**
☐	**Class CT**	**Caterer Retailer Full Liquor**	**$ 500.00**
☐	**Application Fee (new licenses and license class changes only)**		**$ 500.00**

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RETAIL LIQUOR DEALER'S LICENSE APPLICATION

§114 of Village of Roscoe Code of Ordinances

SECTION 1: Applicant Information

Primary Contact Person /Agent: DIANA L KITE

Licensee: ADEI'S GAMING BOUTIQUE DBA LUCKY HORSESHOE SLOTS

Business Name (d/b/a): ADEI'S GAMING BOUTIQUE DBA LUCKY HORSESHOE SLOTS

Mailing Address: 4424 PRAIRIE RD ROCKFORD, IL 61102

Premise Address: 5441 BRIDGE ST UNIT A ROSCOE, IL 61073

Email: [redacted]

Business Phone: 815-222-6762 Other Phone: _____ Fax: _____

Corporate Information (if applicable)

Illinois Corporate Registration Number: 70985284 Date of Incorporation/Formation: _____

Is corporation in good standing with Illinois Secretary of State: ☒ Yes ○ No

If foreign corporation, date qualified to do business in Illinois: _____

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: ECKBURG INSURANCE GROUP, INC.

Address: P.O. BOX 15490 LOVES PARK, IL 61132

Policy Number: LL102153 Coverage Limits: 1,000,000

Anticipated Revenue

Attach a copy of your financial statement.

Indicate anticipated percentage of total annual revenue from each of the following categories. Percentages must total 100%

Alcohol Sales: 1 %

Food Sales: 0 %

General Merchandise (or other): 0 %

Net Terminal Income (gaming revenue): 99 %

License Information

Check one box. If license class selected is different than previous year a five-hundred-dollar application fee is required.

☐	**Class A**	**On & Off Premises Full Liquor**	**$4,000.00**
☐	**Class D**	**On Premise Only Beer & Wine**	**$2,500.00**
☐	**Class F**	**On Premise Only Full Liquor**	**$3,000.00**
☐	**Class G**	**Package Store Beer & Wine**	**$2,000.00**
☐	**Class C**	**Package Store Full Liquor**	**$3,000.00**
☒	**Class BL**	**Boutique Gaming Full Liquor**	**$6,000.00**
☐	**Class BP**	**Brew Pub Full Liquor**	**$2,500.00**
☐	**Class CT**	**Caterer Retailer Full Liquor**	**$ 500.00**
☐	**Application Fee** (new licenses and license class changes only)		**$ 500.00**

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RETAIL LIQUOR DEALER'S LICENSE APPLICATION

§114 of Village of Roscoe Code of Ordinances

SECTION 1: Applicant Information

Primary Contact Person /Agent: Ezio Marino

Licensee: Suzzie, LLC

Business Name (d/b/a): Mama Sue's Deli & Slots

Mailing Address: 7390 Winding Way Roscoe IL 61073

Premise Address: 5428 Williams Dr. Roscoe IL 61073

Email: [redacted]

Business Phone: 815-270-1380 Other Phone: [redacted] Fax:

Corporate Information (if applicable)

Illinois Corporate Registration Number: 07002017 Date of Incorporation/Formation: 5/30/18

Is corporation in good standing with Illinois Secretary of State: (•) Yes ( ) No

If foreign corporation, date qualified to do business in Illinois: N/A

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: Illinois Casualty Company

Address: 323 Main St. Pecatonica IL 61063

Policy Number: LL 105108 Coverage Limits: $1,000,000

Anticipated Revenue

Attach a copy of your financial statement.

Indicate anticipated percentage of total annual revenue from each of the following categories Percentages must total 100%

Alcohol Sales: 3.1 %

Food Sales: 0.1 %

General Merchandise (or other): 0 %

Net Terminal Income (gaming revenue): 96.8 %

License Information

Check one box. If license class selected is different than previous year a five-hundred-dollar application fee is required.

☐	**Class A**	**On & Off Premises Full Liquor**	**$4,000.00**
☐	**Class D**	**On Premise Only Beer & Wine**	**$2,500.00**
☐	**Class F**	**On Premise Only Full Liquor**	**$3,000.00**
☐	**Class G**	**Package Store Beer & Wine**	**$2,000.00**
☐	**Class C**	**Package Store Full Liquor**	**$3,000.00**
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☐	**Class BP**	**Brew Pub Full Liquor**	**$2,500.00**
☐	**Class CT**	**Caterer Retailer Full Liquor**	**$ 500.00**
☐	**Application Fee** (new licenses and license class changes only)		**$ 500.00**

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RETAIL LIQUOR DEALER'S LICENSE APPLICATION

§114 of Village of Roscoe Code of Ordinances

SECTION 1: Applicant Information

Primary Contact Person /Agent: Ezio Marino

Licensee: Next Stop Enterprises LLC

Business Name (d/b/a): Next Stop Gaming

Mailing Address: 7390 Winding Way Roscoe IL 61073

Premise Address: 5215 Elevator Rd. Roscoe IL 61073

Email: [redacted]

Business Phone: 815-270-0760 Other Phone: [redacted] Fax:

Corporate Information (if applicable)

Illinois Corporate Registration Number: 05543428 Date of Incorporation/Formation: 12/15/15

Is corporation in good standing with Illinois Secretary of State: (•) Yes ( ) No

If foreign corporation, date qualified to do business in Illinois: N/A

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: Illinois Casualty Company

Address: 403 S Prairie St., Bethalto IL 62010-0205

Policy Number: LL104161 Coverage Limits: $1,000,000

Anticipated Revenue

Attach a copy of your financial statement.

Indicate anticipated percentage of total annual revenue from each of the following categories Percentages must total 100%

Alcohol Sales:	4.1 %
Food Sales:	0 %
General Merchandise (or other):	0 %
Net Terminal Income (gaming revenue):	95.9 %

License Information

Check one box. If license class selected is different than previous year a five-hundred-dollar application fee is required.

☐	**Class A**	**On & Off Premises Full Liquor**	**$4,000.00**
☐	**Class D**	**On Premise Only Beer & Wine**	**$2,500.00**
☐	**Class F**	**On Premise Only Full Liquor**	**$3,000.00**
☐	**Class G**	**Package Store Beer & Wine**	**$2,000.00**
☐	**Class C**	**Package Store Full Liquor**	**$3,000.00**
☑	**Class BL**	**Boutique Gaming Full Liquor**	**$6,000.00**
☐	**Class BP**	**Brew Pub Full Liquor**	**$2,500.00**
☐	**Class CT**	**Caterer Retailer Full Liquor**	**$ 500.00**
☐	**Application Fee** (new licenses and license class changes only)		**$ 500.00**

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RETAIL LIQUOR DEALER'S LICENSE APPLICATION

§114 of Village of Roscoe Code of Ordinances

SECTION 1: Applicant Information

Primary Contact Person /Agent: Antonino Pipitone
Licensee: Pipitone Inc.
Business Name (d/b/a): Slots of Fortune
Mailing Address: PO Box 66 Rockton, IL 61072
Premise Address: 4763 Bluestem Rd Roscoe, IL 61073
Email: [redacted]
Business Phone: 815-543-8201 Other Phone: _____ Fax: _____

Corporate Information (if applicable)

Illinois Corporate Registration Number: 6921-000-7 Date of Incorporation/Formation: 1-07-2014
Is corporation in good standing with Illinois Secretary of State: ☒ Yes ○ No
If foreign corporation, date qualified to do business in Illinois: N/A

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: Society Insurance Company (Mouktow Insurance Agency)
Address: 301 E. Main St Suite 1 Rockton, IL 61072
Policy Number: BP1503262Z Coverage Limits: $1,000,000.00

Anticipated Revenue

Attach a copy of your financial statement.
Indicate anticipated percentage of total annual revenue from each of the following categories. Percentages must total 100%

Alcohol Sales: 35 %
Food Sales: 0 %
General Merchandise (or other): 0 %
Net Terminal Income (gaming revenue): 65 %

License Information

Check one box. If license class selected is different than previous year a five-hundred-dollar application fee is required.

☐	**Class A**	**On & Off Premises Full Liquor**	**$4,000.00**
☐	**Class D**	**On Premise Only Beer & Wine**	**$2,500.00**
☐	**Class F**	**On Premise Only Full Liquor**	**$3,000.00**
☐	**Class G**	**Package Store Beer & Wine**	**$2,000.00**
☐	**Class C**	**Package Store Full Liquor**	**$3,000.00**
☒	**Class BL**	**Boutique Gaming Full Liquor**	**$6,000.00**
☐	**Class BP**	**Brew Pub Full Liquor**	**$2,500.00**
☐	**Class CT**	**Caterer Retailer Full Liquor**	**$ 500.00**
☐	**Application Fee** (new licenses and license class changes only)		**$ 500.00**

VILLAGE of ROSCOE

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RETAIL LIQUOR DEALER'S LICENSE APPLICATION

§114 of Village of Roscoe Code of Ordinances

SECTION 1: Applicant Information

Primary Contact Person /Agent: Jessica Pipitone

Licensee: AGP 18 Inc.

Business Name (d/b/a): Slots of Fortune

Mailing Address: PO Box 66 Rockton IL 61072

Premise Address: 4767 Bluestem Rd Roscoe

Email: [redacted]

Business Phone: 815-543-8801 Other Phone [redacted] Fax:

Corporate Information (if applicable)

Illinois Corporate Registration Number: 70278413 Date of Incorporation/Formation: 08/04/2015

Is corporation in good standing with Illinois Secretary of State: ☒ Yes ○ No

If foreign corporation, date qualified to do business in Illinois:

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: Society Insurance Company (Macktown Insurance Agency)

Address: 301 E. Main St Suite 1 Rockton, IL 61072

Policy Number: BP1503262 2 Coverage Limits: $1,000,000.00

Anticipated Revenue

Attach a copy of your financial statement.

Indicate anticipated percentage of total annual revenue from each of the following categories. Percentages must total 100%

Alcohol Sales: 35 %

Food Sales: 0 %

General Merchandise (or other): 0 %

Net Terminal Income (gaming revenue): 65 %

License Information

Check one box. If license class selected is different than previous year a five-hundred-dollar application fee is required.

☐	**Class A**	**On & Off Premises Full Liquor**	**$4,000.00**
☐	**Class D**	**On Premise Only Beer & Wine**	**$2,500.00**
☐	**Class F**	**On Premise Only Full Liquor**	**$3,000.00**
☐	**Class G**	**Package Store Beer & Wine**	**$2,000.00**
☐	**Class C**	**Package Store Full Liquor**	**$3,000.00**
☒	**Class BL**	**Boutique Gaming Full Liquor**	**$6,000.00**
☐	**Class BP**	**Brew Pub Full Liquor**	**$2,500.00**
☐	**Class CT**	**Caterer Retailer Full Liquor**	**$ 500.00**
☐	**Application Fee (new licenses and license class changes only)**		**$ 500.00**