I, RUTH A. SCOTT, do hereby certify that I am the duly appointed Deputy City Clerk of the City of DeKalb, DeKalb County, Illinois, and as such officer, I am the keeper of the records and files of the City Council of said City.

I do further certify that the attached is a true and correct copy of:

ORDINANCE 2018-046

AUTHORIZING A SPECIAL USE PERMIT FOR A VIDEO GAMING ESTABLISHMENT AT 850-852 S. 4TH STREET, DEKALB, ILLINOIS (MAISY'S).

PASSED BY THE CITY COUNCIL of the City of DeKalb, Illinois, on the 27th day of August, 2018, and the original is now on file at the City of DeKalb Municipal Building.

WITNESS my hand and the official seal of said City this 17th day of October, 2018.

RUTH A. SCOTT, Deputy City Clerk

Prepared by:
Return To
Deputy City Clerk Ruth Scott
City of DeKalb
200 South Fourth Street
DeKalb, IL 60115
ORDINANCE 2018-046      PASSED: AUGUST 27, 2018

AUTHORIZING A SPECIAL USE PERMIT FOR A VIDEO GAMING ESTABLISHMENT AT 850-852 S. 4TH STREET, DEKALB, ILLINOIS (MAISY’S).

WHEREAS, the City of DeKalb is a home rule municipality with the power and authority conferred upon it by the Illinois Municipal Code and the Constitution of the State of Illinois; and

WHEREAS, Brad Coppens (herein referred to as “Petitioner”), and Brian Scholle and Sheela Prahlad (herein referred to as “Owners”) of property located at 850-852 South 4th Street, DeKalb, Illinois (herein referred to as “Subject Property”), have petitioned the City of DeKalb for approval of a special use permit for a Video Gaming Establishment; and

WHEREAS, pursuant to proper legal notice, a public hearing was conducted by the Planning and Zoning Commission on July 5, 2018, and August 8, 2018; and

WHEREAS, the City and Petitioner have conducted all required public hearings before the Planning and Zoning Commission of the City of DeKalb for the special use permit a Video Gaming Establishment for the Subject Property, and have otherwise satisfied all conditions precedent to the adoption of this Ordinance; and

WHEREAS, the City Council has reviewed and adopts the following findings of fact of the Planning and Zoning Commission of the City of DeKalb, finds that the proposed special use permit is in conformance with the applicable factors contained therein, and finds that approval of the special use permit for the Subject Property is in the public interest and promotes the public health, safety and welfare;

STANDARDS OF A SPECIAL USE – ARTICLE 14.03.05 (2) OF THE UNIFIED DEVELOPMENT ORDINANCE

1. The proposed special use complies with all provisions of the applicable district regulations.

The proposed video gaming establishment will comply with all regulations of the “GC” General Commercial District and the Unified Development Ordinance (“UDO”). The subject property is 120 feet away from the nearest property line of a school meeting the state minimum separation requirement for liquor sales per the Illinois Liquor Control Act.

2. The proposed special use will not be unreasonably detrimental to the value of other property in the neighborhood in which it is to be located or to the public welfare at large.

The proposed special use will not have a detrimental effect on the adjacent properties or land uses. The site has been zoned commercial for decades and is in proximity to a
variety of commercial uses. Data from the City's Police Department indicates there is no significant demand for public safety resources nor any quality of life or crime concerns related to the existing video gaming establishments in the City. The special use permit will have restrictions regarding the hours for liquor sales and limits on signage that are more restrictive than the UDO allows.

3. The location and size of the special use, the nature and intensity of the operation involved in or conducted in connection with it, and the location of the site with respect to streets giving access to it are such that the special use will not dominate the immediate neighborhood so as to prevent development and use of neighboring property in accordance with the applicable zoning district regulations.

The special use will not dominate the immediate area and will not prevent development on the neighboring properties. The surrounding area is already developed with commercial uses along South 4th St. including a car wash, automotive repair business, day care centers, school administrative offices, a restaurant and gas station. Two single-family homes are directly east of the site along Culver Street with Founders Elementary School further to the east. Single-family homes exist to the southeast of the site. Video gaming is licensed in the Twin Tavern bar located 1 ½ blocks south of the subject site and at the American Legion three blocks south along South 4th Street.

4. Adequate utility, drainage and other such necessary facilities have been or will be provided.

Adequate public services are already provided to the subject site.

5. The proposed use, where such developments and uses are deemed consistent with good planning practice, or can be operated in a manner that is not detrimental to the permitted developments and uses in the district; can be developed and operated in a manner that is visually compatible with the permitted uses in the surrounding area; shall in all other respects conform to the applicable regulations of the district in which it is located; and is deemed essential or desirable to preserve and promote the public health, safety and general welfare of the City of DeKalb.

The proposed special use will not be detrimental to the permitted developments and uses on the site or to the surrounding area. Restrictions will be placed on the advertising of the video gaming in relation to signage and liquor sales will start later than allowed per the applicant's liquor license. Revenues from the video gaming operation are estimated by the applicant to be $20,000 per year. The proposed special use will take up a vacant tenant space on South 4th Street and will be an economic benefit to the corridor.

NOW, THEREFORE, BE IT ORDAINED BY THE CITY COUNCIL of the City of DeKalb, Illinois as follows:
Section 1. The recitals set forth in the preamble are hereby incorporated herein by reference and made a part of this Ordinance.

Section 2. This Ordinance is limited and restricted to the Subject Property described as follows:

The property is commonly described as 850-852 South 4th Street, DeKalb, Illinois 60115, has a Parcel Identification Number (PIN) of 08-26-102-003 and is legally described as follows:

The West 120 Feet of Lot 27 in Block 1 in Lawler’s Subdivision to the City of DeKalb, Being a Subdivision of Plat of Lots 26 and 27 in Block 1, According to the Plat Thereof Recorded in Book “G” of Plats, Page 134, as Document No. 211827 on March 30, 1948 in DeKalb County, Illinois.

Section 3. A special use permit for a video gaming establishment is hereby approved on the Subject Property subject to the following conditions:

1. The video gaming establishment shall operate in compliance with the site plan (Sheet A1) dated June 11, 2018, including enclosing the dumpster on the south side of the building with a six-foot high sight-proof wood fence and labeled as Exhibit A.

2. The video gaming establishment shall only be allowed to operate in the area as shown as “Video Gaming” on the floor plan (Sheet A2) dated June 11, 2018, and labeled as Exhibit B.

3. The special use must comply with the City of DeKalb issued liquor license for the site with supplemental licensure for video gaming issued per Resolution 2018-073.

4. The sale of alcohol shall not occur at the video gaming establishment before 10:00 a.m., Monday through Sunday.

5. Wall signs for the video gaming establishment shall be limited to the west building elevation and shall not contain advertising related to the sale or presence of alcohol or video gaming. Window signage advertising the sale or presence of alcohol or video gaming shall be limited to no more than 40% of one of the window panes (excluding the doors) on the west building elevation. Temporary signage shall not contain advertising related to the sale or presence of alcohol or video gaming. All other signage shall meet the requirements of the UDO.

Section 4. All ordinances or portions thereof in conflict with this ordinance, including the prior versions of the ordinances included above, are hereby repealed.

Section 5. Should any provision of this Ordinance be declared invalid by a court of competent jurisdiction, the remaining provisions will remain in full force and affect the same as if the invalid provision had not been a part of this Ordinance.
Section 6. That all provisions of the UDO shall remain in full force and effect and this Ordinance shall take effect upon its passage and approval according to Law. The City Clerk, or designee, shall record a copy of this Ordinance included herein after execution of this Ordinance.


ATTEST:

LYNN A. FAZEKAS, City Clerk

JERRY SMITH, Mayor
EXHIBIT A

CULVER ST.

SITE PLAN

- TOTAL AVAILABLE PARKING SPACES INCLUDING one ACCESSIBLE SPACE = 14 SPACES.

JUNE 11, 2018

650, 652 & 654 S. FOURTH ST. DEKalB, IL 60115

SITE PLAN 4 PARKING LAYOUT SHEET A1
RESOLUTION 2018-073             PASSED: JUNE 11, 2018

AUTHORIZING A BAR LIQUOR LICENSE WITH SUPPLEMENTAL LICENSURE FOR VIDEO GAMING TERMINALS FOR CAMERON CLAN LLC, D/B/A MAISY’S, 852 S. FOURTH STREET, DEKALB, ILLINOIS.

WHEREAS, the City of DeKalb regulates the sale of alcoholic beverages within the corporate limits of the City pursuant to the applicable provisions of the Illinois Liquor Control Act and Chapter 38 of the City Code of Ordinances; and

WHEREAS, the City has received and reviewed an application for a Bar Liquor License with supplemental licensure for video gaming, for the establishment known as Maisy’s, located at 852 S. Fourth Street, DeKalb, Illinois, and to be operated by Cameron Clan, LLC, and the City Council has determined that it is appropriate to issue said licenses to the establishment;

NOW, THEREFORE, BE IT RESOLVED BY THE COUNCIL OF THE CITY OF DEKALB, ILLINOIS:

Section 1: A liquor license, Bar, with supplemental license for up to five (5) video gaming terminals, shall be issued for Maisy’s, 852 S. Fourth Street, DeKalb, Illinois ("Licensee") subject to the following terms and conditions:

1. After issuance, the license shall be subject to all provisions of the City Code of the City of DeKalb, including those provisions pertaining to the term of an initial issuance of liquor license, renewal of liquor license, and similar provisions, unless specifically waived herein.

2. This Licensee shall be required to obtain the Liquor Commissioner’s approval of a Business Plan and Premises Plan, which provide for the orderly conduct of the Licensee. Said Plans shall be subject to approval by the Liquor Commissioner with the advice and recommendation of the Chief of Police and must be approved prior to commencement of operations of the Premises. The City Council expressly authorizes the Liquor Commissioner to approve of further and specific regulations of the uses of the Premises within the Business Plan and Premises Plan, either as initially approved or as later amended by the Liquor Commissioner.

3. The License shall be conditioned upon the following conditions precedent to final issuance:

   a. The applicant shall be required to obtain all required zoning approvals and special use permits;

   b. The applicant shall be required to obtain and maintain at all times a fire life safety license for the licensed premises;

   c. The applicant shall be required to obtain all required building permits for interior and exterior modifications, to complete all modifications in accordance with approved plans, and thereafter to obtain an acceptable final inspection of the premises;
d. The applicant shall obtain a state liquor license prior to commencing liquor operations, and shall obtain a state video gaming license prior to commencing video gaming operations;

e. The applicant shall be required to obtain the Liquor Commissioner's approval of its business plan, premises plan and security plan with the recommendation of the Chief of Police;

f. The applicant shall be required to adhere to the occupancy limit, once established; and,

g. The applicant shall operate the premises in accordance with all applicable codes and ordinances and shall collect and remit all taxes required under applicable federal, state or local laws.

4. The License shall be deemed to permanently include the following restrictions:

a. The property shall otherwise comply with all applicable City Codes and Ordinances.

b. The property shall comply with applicable UDO requirements and parking restrictions.

c. The License shall not authorize the installation or maintenance of more than five (5) Video Gaming Terminals.

City staff are authorized and directed to issue a license upon satisfaction of the conditions precedent to issuance, and to thereafter enforce the terms of licensure included herein. Pending completion of those items, a conditional license shall issue. Said conditional license may be utilized to obtain any required federal or state licensure and may be relied upon by any superior governmental body.

Section 2: That the City Clerk of the City of DeKalb, Illinois, be authorized and directed to attest the Mayor's Signature and shall be effective thereupon.

PASSED BY THE CITY COUNCIL of the City of DeKalb, Illinois, at a Regular meeting thereof held on the 11th day of June, 2018, and approved by me as Mayor on the same day. Passed by an 8-0 roll call vote. Aye: Jacobson, Finucane, Marquardt, Fagan, Noreiko, Verbic, Faivre, Smith. Nay: None.

ATTEST:

RUTH A. SCOTT, Deputy City Clerk

JERRY SMITH, Mayor
City of DeKalb Local Liquor License Application Supplement

Type of License(s) Sought (Pick one primary license, and all applicable sub-licenses or categories desired):

- **Package Liquor Store**
  - + Tasting Permit
- **Grocery or Drug Store**
  - Size (Select One)
    - Small (8,790 – 19,999 sq. ft.)
    - Medium (20,000 – 40,000 sq. ft.)
    - Large (40,001+ sq. ft.)
  - + Tasting Permit
  - + Annual Caterer License

- **BYOB**

- **Restaurant** (Primarily Restaurant)
  - Type of Alcohol Service (Select One)
    - Low Alcohol by Volume
    - Unrestricted
  - + Bar License
  - + Hospitality License for Banquet Sales
  - + Live Entertainment
  - + Tasting Permit
  - + Annual Caterer License

- **Bar (Primarily Bar)**
  - With Over-The-Counter Package Liquor sales
  - + Restaurant License
  - + Hospitality License for Banquet Sales
  - + Live Entertainment
  - + Tasting Permit
  - + Annual Caterer License

- **Public Entity / Non-Profit ("PEP")**
  - + Live Entertainment

Note: If you are applying for a license for Video Gaming Devices at the licensed establishment, a separate application must be filed.

Please Attach a Detailed Floor Plan for the proposed licensed establishment. The Floor Plan should clearly reflect all entrances and exits, restrooms, areas where alcohol will be served, stored, prepared or consumed, and similar information. If there are proposed separate areas for consumption (e.g., bar and restaurant), each area should be depicted (along with bathrooms intended to be used). Floor plans must comply with all requirements of state law and Chapter 38 of the City Code.
Please attach a Signed and Completed Waiver for Completion of Criminal Background Check, for all owners and managers.

By submitting this signed application, you are certifying under oath, and subject to penalties of perjury, that:

a. No owners or managers are delinquent on any tax, obligation, parking citation, ordinance violation, or other cost fee or expense due and payable to the City of DeKalb.

b. You have reviewed Chapter 38 of the City of DeKalb Code of Ordinances and shall comply therewith, including but not limited to Sections 38.09, 38.21 and 38.23.

c. All of the contents of your State Liquor License Application, this Local Supplement, and any attachments hereto are true and accurate, and fully disclose all relevant facts and information.

d. You consent to the inspection provisions of Section 38.09(a).

Please attach a Certified Check for the Initial Application Fee, in the amount of $520.00, payable to the City of DeKalb (non-refundable).

Please provide a detailed, written description of the security plan for the premises. The security plan should address: a) measures for age verification prior to entry into the premises and/or prior to sale of alcohol; b) method of storing and securing alcohol prior to sale; c) method of securing site access; d) training to be provided to employees and alcohol servers; e) security plan for rowdy or disruptive patrons; f) anti-theft policies and countermeasures; g) surveillance equipment to be utilized and surveillance plan; and, h) any other related security information. In addition, please address any license-specific security measures (common examples: for bars, how will over-the-counter package sales be conducted; for hotels, how will mini-bars be secured from unauthorized access; for grocery stores, how will small containers (e.g. 'flats') be secured).

Please attach a certificate of insurance compliant with Section 38.06. The certificate must name the City of DeKalb as additional primary insured without right of subrogation for licensees using City owned property, all others only need to name City of DeKalb as additional insured for general liability and liquor liability, and with a 30 day notice of cancellation, on statutory dram shop liability insurance and on a minimum $1,000,000 comprehensive general liability insurance policy.

If cross-marketing is permitted for your establishment, please provide a written description of your cross-marketing plan. For PENP licenses, please attach proof of your governmental ownership or non-profit status.
6. Security plan for the premises. (See attached drawing)

(a) A free standing sign post will be placed just inside the front door to notify customers that no one under the age of 21 is permitted.

(a1) Anyone who enters who looks under 30 years of age will be carded prior to them being allowed to either play the machines or have an alcoholic beverage.

(b) Alcohol ready for sale will be kept in a refrigerator behind the bar. See B1 for location of refrigerator. Alcohol that will be stored for future use will be stocked in the back room, which will be locked. See B2 on map.

(C) Site access will be secured by taking the following measures. The only unlocked door during business hours will be the front door. See drawing figure C1. The door will have a ringer on it to tell the worker that someone has entered. There will also be a surveillance camera pointed at the front door. Door C2 will be used as the emergency exit.

(D) Alcohol training for employees. All employees will be required to pass the Illinois Basset Alcohol Certification course online before they are allowed to start working on the premises.

(E) Security plan for rowdy customers. A panic button will be placed under the bar (B1 on drawing). If the employee working feels that they've tried everything the Basset course has told them to do, and still the customer is unruly, rowdy, or the employee feels uneasy, overwhelmed, or frightened, the panic button will be pushed.

(F) Anti-theft Policies. Video surveillance by 4 cameras (noted as S1, S2, S3, and S4 on attached drawing) will be in use. A monthly inventory will be kept to ensure that the alcohol being sold matches up with the sales receipts.

(G) The premises will have video surveillance and alarm system. We are currently awaiting bids on video system to be used. 4 cameras will be placed in the facility. See attached drawing.

Camera labeled as S1 S2 S3 S4 on drawing.
# Certificate of Liability Insurance

**Producer:**
- **Name:** Nihan, Charles
- **Phone:** (815) 748-1489
- **A&C #:**
- **Addr:**

**Insured:**
- **Name:** Clan LLC
- **IL:** 60115-1746

**Certificate Number:** CL184192804

**Date:** 04/19/2018

**Coverages:**
- **PENDING**

## Coverage Details

**Type of Insurance:**
- **Commercial General Liability**
  - **Claims-Made:**
  - **Occur:**
  - **Each Occurrence:**
    - Premises & Operations: $1,000,000
    - Medical Expenses: $100,000
    - Personal & Property: $1,000,000
  - **Aggregate:**
  - **Limits:**
  - **General Aggregate:** $1,000,000
  - **Products-Commissions:** $1,000,000
  - **Employee Benefits:**
  - **Combined Single Limit:**
    - Bodily Injury (Per person):
    - Bodily Injury (Per accident):
    - Property Damage: Per accident:
  - **UM/PL Retention:**
    - **Y/N:** N/A
  - **Workers Compensation and Employers' Liability**
    - **Y/N:**
  - **Proprietor/Partner/Executive Officer/Manager Excluded?**
    - (Mandatory in IL)
  - **Description of Operations:**

## Liquor Liability
- **Y:**
- **PENDING**
- **04/19/2018**
- **04/19/2019**
- **1,000,000**

**Description of Operations/Locations/vehicles:**
City of DeKalb is additional insured for General Liability and liquor liability. 30 day cancel notice applies.

## Cancellation

**City of DeKalb**

**DeKalb**

**IL:** 60115

**Authorized Representative:**

**Should any of the above described policies be cancelled before the expiration date thereof, notice will be delivered in accordance with the policy provisions.**

© 1988-2016 ACORD CORPORATION. All rights reserved.
Please provide a detailed signage plan. Signs are required to notify patrons of applicable age restrictions. Sign content and location must be submitted and approved.

If outdoor seating is desired, please provide a detailed outdoor seating plan. This should include a site plan showing the outdoor seating area, fencing, controlled access points, location relative to parking, private property, and public rights of way, location where alcohol will be stored and served, seating area, occupancy limits, and similar information. Please also include a written narrative describing operational plans for running, servicing, monitoring and securing the outdoor seating area.

Please describe the proposed hours of operation for the licensed premises. If different areas of the premises are to have different hours of operation, please identify. Please ensure that hours of operation comply with City Code Section 38.25.

Please provide a detailed description of your training plan for Alcohol Servers. Please note that all Alcohol Servers, as defined in Section 38.01, MUST COMPLETE A CERTIFIED ALCOHOL SERVER EDUCATION PROGRAM THAT IS STATE-ACCREDITED AS A BASSET PROGRAM AND/OR APPROVED BY THE CITY PRIOR TO THE DATE ON WHICH SUCH EMPLOYEES START SERVING, PREPARING OR SELLING ALCOHOL.

Please attach a copy of your City of DeKalb Fire Life Safety License, or a copy of your file-stamped application therefore.

Are you requesting a conditional liquor license (prior to issuance of Certificate of Occupancy)? If yes, please describe the reasons for such request and to proceed to sic.

Please attach a completed, signed copy of your application for a State of Illinois Liquor License, with all supplements. Please note that by applying for a City liquor license, you are agreeing to provide copies to the City of all correspondence between your licensed establishment and the Illinois Liquor Control Commission.

Please provide a brief narrative of your experience in the line of business you are seeking a license for.

Please attach any other information you believe would be helpful in the evaluation of your Application.

Signed and submitted under Oath, this 18th day of April 2018

Applicant:

[Signature]

Printed:

Owner:

Title:
10. Signage Plan. A sign will be placed just inside the front door (See attached drawing, sign labeled on drawing as A1) on a stand that says...

NO ONE UNDER THE AGE OF

21 ALLOWED
13. Training program for alcohol servers.

All employees will be required to pass the Online Bas®et training program before they are allowed to work at the facility. All employees will be required to ask for ID from anyone entering the facility that looks younger than 30 years of age. Employees will only be allowed to sell one alcoholic beverage at a time per customer. Anyone attempting to leave the facility with an alcoholic beverage will be stopped and asked to dispose of it before exiting.
Fire-Life Safety License Application
Municipal Code, Chapter 16

Incomplete applications will be returned to applicant

This application must be postmarked no later than January 31 to avoid the late fee.

Fire Prevention Officers will be conducting inspections starting in February; no appointment will be necessary unless otherwise notified by the Fire Prevention Officer. All inspections will be conducted during your normal business hours. If it is more convenient for you to have an appointment, please call (815) 748-8457 to schedule your appointment.

Return ORIGINAL completed application with license fee to:
Finance Department, City of DeKalb, 200 S. 4th Street, DeKalb, IL 60115
MAKE CHECKS PAYABLE TO “CITY OF DEKALB”

Application is hereby made for a Fire-Life Safety License for the period May 1 through April 30

<table>
<thead>
<tr>
<th>BUSINESS INFORMATION</th>
<th>(Please make any necessary changes - type or print clearly)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Company or Corporation Name:</td>
<td>Cameron Clan LLC DBA Maisy's □ Sole Proprietor □ Partnership □ Corporation □ LLC</td>
</tr>
<tr>
<td>Business Name (DBA):</td>
<td>Maisy's</td>
</tr>
<tr>
<td>Building Address:</td>
<td>852 S Fourth Street, DeKalb, IL 60115</td>
</tr>
<tr>
<td>License issued to:</td>
<td>Maisy's</td>
</tr>
<tr>
<td>Occupancy:</td>
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</table>

NO LICENSE WILL BE ISSUED TO ANY BUSINESS WITH AN OUTSTANDING DEBT TO CITY

Are you registered with the Finance Division for Restaurant, Bar & Package Liquor Tax? Yes □ No □

IDENTIFICATION - TO BE COMPLETED BY ALL APPLICANTS

| Business Owner & Phone # | Name: Brad Comers |
| Business Manager | |

<table>
<thead>
<tr>
<th>Mailing Address (Please include City/State/Zip in Address)</th>
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<tbody>
<tr>
<td>Address:</td>
</tr>
<tr>
<td>City, State, Zip Code:</td>
</tr>
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E-Mail address of contact person:

I agree that, if live entertainment is to be provided at the above referenced business establishment, a public service announcement will be made not more than ten minutes prior to the start of a program that clearly identifies all means of egress available.

I hereby certify that I am the owner of record, or authorized designee, for the above referenced business establishment and am making this application as said owner, or authorized designee. I agree to all applicable laws of this jurisdiction. Further, I, the undersigned, swear that the above information is correct and so hereby authorize the Fire Chief, or his/her designee, to make proper inspections of the above building.

SIGNATURE

Print Name and Title: ___________________________________________ Date: __________

FOR CITY USE ONLY

Date Payment Received: ____________________________ Payment Stamp Here

Fee Paid: ____________ Check #: ____________ Cash: □

Questions about this form? Call (815) 748-2387
**THIS FORM MUST ACCOMPANY APPLICATION**

<table>
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<tr>
<th>BUSINESS INFORMATION</th>
<th>FIRE DEPARTMENT INFORMATION</th>
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<tr>
<td>BUSINESS NAME: Maisy's</td>
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<tr>
<td>BUILDING ADDRESS: 852 5th Ave</td>
<td></td>
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<tr>
<td>PHONE: (815) 755-5721</td>
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**AFTER HOURS EMERGENCY CONTACT INFORMATION**

EMERGENCY CONTACT PERSONNEL (MUST BE AVAILABLE 24-HOURS/DAY, 365 DAYS/YEAR) WILL BE CALLED IN THE ORDER LISTED, BEGINNING AT NUMBER ONE AND CONTINUING DOWN THE LIST

<table>
<thead>
<tr>
<th>CONTACT #1</th>
</tr>
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<tbody>
<tr>
<td>NAME: Brad Jones</td>
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<tr>
<td>HOME PHONE:</td>
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<table>
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<tr>
<th>CONTACT #2</th>
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<tbody>
<tr>
<td>NAME: Kristen Welch</td>
</tr>
<tr>
<td>HOME PHONE:</td>
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<td>CELL PHONE/PAGER:</td>
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<tr>
<th>CONTACT #4</th>
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<tbody>
<tr>
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<tr>
<td>HOME PHONE:</td>
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<tr>
<td>CELL PHONE/PAGER:</td>
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**ADDITIONAL INFORMATION**

ALARM COMPANY NAME: |
ALARM COMPANY 24 HOUR PHONE NUMBER: |

**BUSINESS HOURS:**

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<td>1</td>
</tr>
<tr>
<td>SUNDAY</td>
<td>10</td>
<td>1</td>
</tr>
</tbody>
</table>

**FOR POLICE DEPARTMENT USE ONLY**

- NEW STREET
- NEW CONSTRUCTION
- ESTABLISHED BUSINESS/NEW ADDRESS
- NEW BUSINESS/ESTABLISHED ADDRESS
- NEW BUSINESS/NEW ADDRESS
- BUSINESS CLOSED

DATE RECEIVED: |
DATE CAD MODIFIED: |

PLEASE KEEP THIS FORM ON FILE AND E-MAIL OR FAX UPDATES TO THE FINANCE DEPARTMENT (Rachel.pacey@cityofdekalb.com) FAX: 815-748-2304
IF YOU HAVE ANY QUESTIONS ABOUT THIS FORM AND THE INFORMATION ON IT, PLEASE CONTACT THE DEKALB POLICE DEPARTMENT AT (815) 748-8400 OR THE FINANCE DEPARTMENT AT (815) 748-2387.
APPLICATION FOR STATE OF ILLINOIS
RETAILER'S LIQUOR LICENSE

REMEMBER: YOU CANNOT PURCHASE OR SELL ALCOHOL WITHOUT A VALID STATE LIQUOR LICENSE!

DEFINITION: A Retailer's Liquor License shall allow the licensee to sell and offer for sale at retail, only at the premises specified in such license, alcoholic liquor for use or consumption, but not for resale in any form; provided that any retail liquor license issued to a manufacturer shall only permit such manufacturer to sell alcoholic beverages at retail on the premises actually occupied by such manufacturer [235 ILCS 55-1(d)], the only exception being a wine-maker's retail license—2nd location [235 ILCS 55-1(1)]. All applicants for licensing as a liquor "retailer" must complete this application form. Respond to all questions on the application and furnish all required supporting documents. Failure to do so will result in the rejection of the application and non-issuance of a state liquor license.

RETAILER'S LIQUOR LICENSE

The following documents and information are REQUIRED prior to receiving for your state license:

1. A completed application (no handwriting on first page)
2. A copy of your Local Liquor License
3. A copy of your Federal Employer Identification Number (F:E:IN)
4. Illinois Business Tax (Sales Tax Account) Number, if applicable, visit www.ilsos.com biz tax, click on Businesses, and then Business Registration, to obtain this number. If you have any questions, call 217-885-6707.
5. Signature of Authorized Person

NOTE: The date of expiration of your initial State license will coincide with the 12-month period that begins on the issue date of your local liquor license. In some cases, the term of your first year's State liquor license may be less than a full year in duration.

IL 567-0015 (03/2009)
### Application for State of Illinois Retailer’s Liquor License

#### 1. APPLICANT - CORPORATE INFORMATION

**A. FEIN**

Enter your Federal Employer Identification Number (FEIN) in this box. The FEIN is a nine-digit number issued by the U.S. Internal Revenue Service. This number is used for verification purposes only. If you do not have an FEIN number, call 1-800-829-3678 for general information on how to apply and to obtain the form you will need.

| FEIN & | 82-5017005 |

**B. ILLINOIS BUSINESS TAX NUMBER (SALES TAX ACCOUNT NUMBER)**

Enter the eight-digit Illinois Dept. of Revenue Business Tax (Sales Tax Account) Number. You MUST HAVE THIS NUMBER IN ORDER FOR A LICENSE TO BE ISSUED. If you need to obtain this number, visit [www.tax.illinois.gov](http://www.tax.illinois.gov) and click on the "Businesses", and then the "Business Registration." If you have any questions, call 217-785-3707.

| ILLINOIS BUSINESS TAX | 4961-3639 |

**C. TELEPHONE**

Enter the area code/telephone number/extension of the sole proprietorship, corporation, etc.

| AREA CODE/TELEPHONE NO. | 815-751-5729 | EXT. |

**D. COUNTY**

Enter the county where the sole proprietorship, corporation, etc. is located.

| COUNTY | DeKalb |

**E. NAME**

Enter the name of the sole proprietorship (assumed name), partnership, corporation (Illinois, national, or foreign), or limited liability company in this box. This name must be consistent with the name printed on your local liquor license and the your Illinois Department of Revenue Sales Tax Registration Certificate.

| NAME | Cameron Clan LLC, DBA Maisy's |

**F. ADDRESS**

Enter the street address, city, state, and Zip Code of the sole proprietorship, corporation, etc.

<table>
<thead>
<tr>
<th>ADDRESS</th>
<th>CITY</th>
<th>STATE</th>
<th>ZIP CODE</th>
</tr>
</thead>
<tbody>
<tr>
<td>852 S 4TH STREET</td>
<td>DeKalb</td>
<td>IL</td>
<td>60115</td>
</tr>
</tbody>
</table>
2. **STATUS OF BUSINESS**

Check the applicable box (assumed name/sole proprietorship, partnership, Illinois corporation, foreign corporation, limited liability company) which corresponds to your business's legal form as filed with the Office of the Secretary of State.

Based on the box you check, provide the date of the filing of the sole proprietorship/assumed name with the county clerk; in the case of a co-partnership, the date of formation of the partnership; in the case of an Illinois corporation, the date of its incorporation; in the case of a foreign corporation, the foreign state where it was incorporated and the date, as well as the date of its becoming qualified under the "Business Corporation Act of 1983" to transact business in the State of Illinois; in the case of a limited partnership, the date of formation of such partnership; or in the case of a limited liability company, the date of formation of such entity.

*NOTE:* In the case of a sole proprietorship, Section 56-2 of the Illinois Liquor Control Act requires that the business owner reside within the jurisdiction that grants the local liquor license.

<table>
<thead>
<tr>
<th>A.</th>
<th>SOLE PROPRIETORSHIP</th>
<th>DATE FILLED WITH COUNTY CLERK: __________________________</th>
</tr>
</thead>
<tbody>
<tr>
<td>B.</td>
<td>PARTNERSHIP</td>
<td>DATE OF FORMATION: ___________________________</td>
</tr>
<tr>
<td>C.</td>
<td>ILLINOIS CORPORATION</td>
<td>DATE OF INCORPORATION: ___________________________</td>
</tr>
<tr>
<td>D.</td>
<td>FOREIGN CORPORATION</td>
<td>STATE OF INCORPORATION: ___________________________</td>
</tr>
<tr>
<td>E.</td>
<td>LIMITED LIABILITY COMPANY</td>
<td>DATE FORMED: _______________</td>
</tr>
</tbody>
</table>

If "C" or "D" is checked, indicate your current Secretary of State file number here

(if you do not have this number available, please contact the Secretary of State's office at 312-793-3380)

3. **OWNERSHIP INFORMATION**

Provide the owner/officer/partner information in accordance with the business status described under Question 2. This information must be submitted for all owners/officers/partners. The same information must be submitted for shareholders with interest equal to or exceeding 5%.

The following information must be provided for each individual applicant, sole proprietor, officer, corporate officer or director (whether or not they own any stock), shareholder owning in the aggregate stock equal to or more than 5% (including officers, directors and shareholders with stock equal to or more than 6% for all corporate shareholders), and/or manager or agent conducting the business, indicate the total percentage of stock of the corporation, if any, which is held by persons who hold less than a 5% interest. All non-profit organizations and associations must provide the requested information for all corporate officers, directors and managers. If additional space is needed, provide information on a separate sheet(s) in the same format as this application requires.

For each owner/officer/partner/shareholder, provide full name, home address, city, state, Zip Code, social security number, date of birth, sex, title/position, home telephone number, and percentage ownership. Percentage ownership should equal 100%. If there are a number of shareholders owning less than 5%, indicate the aggregate total of ownership under E.

| A. NAME (LAST, FIRST, MIDDLE INITIAL): Coppens, Bradley C |
| B. NAME (LAST, FIRST, MIDDLE INITIAL): Welch, Kristen E |

<table>
<thead>
<tr>
<th>C. NAME (LAST, FIRST, MIDDLE INITIAL):</th>
<th>ADDRESS</th>
<th>CITY</th>
<th>STATE</th>
<th>ZIP</th>
</tr>
</thead>
<tbody>
<tr>
<td>SOCIAL SECURITY NO.</td>
<td>DATE OF BIRTH</td>
<td>SEX</td>
<td>TITLE/POSITION</td>
<td>AREA CODE/TELEPHONE NO.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>D. NAME (LAST, FIRST, MIDDLE INITIAL):</th>
<th>ADDRESS</th>
<th>CITY</th>
<th>STATE</th>
<th>ZIP</th>
</tr>
</thead>
<tbody>
<tr>
<td>SOCIAL SECURITY NO.</td>
<td>DATE OF BIRTH</td>
<td>SEX</td>
<td>TITLE/POSITION</td>
<td>AREA CODE/TELEPHONE NO.</td>
</tr>
</tbody>
</table>

E. **TOTAL PERCENTAGE OF ALL STOCK HELD BY ALL PERSONS WITH LESS THAN 5% INTEREST**

IL 867-0015 (03/2009)
4. Business Premise Information

If you wish to operate your business or sell alcoholic beverages at the licensed premises, please check the box to the left.

A. Name/Done Business As (DBA)

Enter the name of the business which will be selling or serving alcoholic beverages at the licensed premises. Note: The name must be consistent with your Illinois liquor license and on your Illinois Dept. of Revenue Sales Tax Registration Certificate.

NAME (DOING BUSINESS AS DBA)

Cameron Clan LLC DBA Maisy's

B. Telephone

Enter the area code/telephone number of the business premise location.

AREA CODE/TELEPHONE NO.

815-751-5739 EXT.

C. Address

In the next five boxes enter the address, city, state, Zip Code and county of the business premises. This address information must be consistent with information on your local liquor license and on your Illinois Department of Revenue Sales Tax Registration Certificate.

ADDRESS

852 S 4th Street

DEKALB

IL 60115 DEKALB

D. Business Type

Check the one box which best describes the type of business in operation. If the selections listed are inappropriate, describe the business under "other".

A. ☐ Drug Store/Pharmacy

B. ☐ Restaurant

C. ☐ Convenience

D. ☐ Supermarket

E. ☐ Liquor Store

F. ☐ Department Store

G. ☐ Bar/Tavern

H. ☐ Hotel/Motel

I. ☐ Convenience & Gas

J. ☐ Small Grocery

K. ☐ Gas Station

L. ☐ Other Video Gaming Cafe

E. Warehousing

If any of your inventory is warehoused, provide the name, street address, city, state, Zip Code, and county of the warehouse.

ADDRESS

CITY

STATE

ZIP CODE

COUNTY

F. Leased Premises

If you lease your premises, the lease must cover the full term of the license. If you lease, provide the landlord's name, telephone number, street address, city, state, Zip Code, and county.

LANDLORD NAME

BRIAN R. SCHOLLE

ADDRESS

CITY

STATE

ZIP CODE

COUNTY
5. LOCAL LICENSE INFORMATION/ LIQUOR LICENSE HISTORY

A. LOCAL LIQUOR LICENSE INFORMATION

Please enter the local liquor license number, the date it was issued, the date it expires, the municipality or county that issued the license and the date you intend to begin selling alcoholic beverages at this business premise. Alcoholic beverages may not be sold or offered for sale prior to the date that the State liquor license is issued. If you have begun selling alcoholic beverage products before obtaining this license, you will be required to fill out a "delinquency affidavit" to explain the circumstances.

Note: In unincorporated areas, the county acts as the local liquor licensing authority.

<table>
<thead>
<tr>
<th>MUNICIPALITY/COUNTY ISSUING LOCAL LIQUOR LICENSE</th>
<th>LOCAL LICENSE NO.</th>
<th>DATE ISSUED</th>
<th>EXPIRATION DATE</th>
<th>DATE YOU BEGAN LIQUOR SALES AT THIS PREMISE</th>
</tr>
</thead>
</table>

B. FIRST LICENSE APPLICATION - LICENSE HISTORY

Indicate by checking the correct box whether or not this is the corporation's, sole proprietorship's, etc.'s first application for a State liquor license at any premises. If you check "no", indicate the date of your first State liquor license application. Also indicate whether the license was granted, denied or withdrawn. Provide the address of your first State liquor license application. If you have ever had a license application denied or if you ever withdrew an application, please provide a written statement describing the reason and circumstances.

IS THIS YOUR FIRST STATE LICENSE APPLICATION?  YES  X  NO

IF NO, PROVIDE DATE FIRST APPLIED:

DISPOSITION:  GRANTED  DENIED  WITHDRAWN

ADDRESS OF FIRST STATE APPLICATION:

C. TYPE OF LIQUOR LICENSE

Check the box which describes the manner in which you sell alcoholic beverages to consumers - "on-premise", "off-premise", or "combined". This information must be consistent with your approval granted by the local liquor licensing authority.

☑ ON-PREMISE CONSUMPTION (PATRONS CONSUME ALCOHOLIC BEVERAGES ON PREMISE ONLY)
☐ OFF-PREMISE CONSUMPTION (CARRY-OUT PURCHASES ONLY)
☐ ON/OFF-PREMISE CONSUMPTION COMBINATION (BOTH ON-PREMISE CONSUMPTION AND CARRY-OUTS)

6. CERTIFICATE OF INSURANCE

ATTACH PHOTOCOPY OF YOUR "CERTIFICATE OF INSURANCE" (NOT THE POLICY DECLARATION)

You MUST provide a copy of your Certificate of Insurance if alcohol is consumed on-premise (this certificate is not required for carry-out only establishments). The Certificate of Insurance must show that you have liquor liability insurance and must include the following:
1) The applicant named as the insured (e.g., if the applicant is a corporation, then the corporation's name must be listed; if the applicant is a sole proprietor, then the sole proprietor's name must be listed); 2) The address of the location where the liquor is being consumed; and 3) The dates of coverage and the coverage limits.
7. ELIGIBILITY QUESTIONS

The questions below pertain to the applicant and any other person listed under Corporate Officer/Ownership Information. Refer to page 3 of this form. If any questions are answered with a "YES," attach a full-written explanation to this document.

7A  □ YES  ☑ NO  Are you delinquent in the payment of any Illinois business tax (sales, withholding, etc.)? [235 ILCS 6/6-3]

7B  □ YES  ☑ NO  Are you delinquent under the "cash beer" law?

7C  □ YES  ☑ NO  If retailer, are you delinquent under the "30-day credit" law?

7D  □ YES  ☑ NO  Have you ever made application for a liquor license which has been denied? [235 ILCS 6/6-2(14)]

7E  □ YES  ☑ NO  Have you ever had any previous liquor license suspended or revoked? [235 ILCS 6/6-2(7)]

7F  □ YES  ☑ NO  Have you ever been convicted of a felony? [235 ILCS 6/6-2(4)]

7G  □ YES  ☑ NO  Have you ever been convicted of a gambling offense as defined under section 6/8-2 of the Act which includes offenses enumerated in 720 ILCS 5/23-1(a)(1), "gambling," 720 ILCS 5/23-1.1(a)-(d) "syndicated gambling;" and 720 ILCS 5/29-3 "keeping a gambling place."

7H  □ YES  ☑ NO  Do you possess a current Federal Wagering Stamp?

7I  □ YES  ☑ NO  Are you, or is any other person having a direct interest in your place of business, a public or law enforcing official with jurisdictional authority? [235 ILCS 6/6-2(14)]

7J  □ YES  ☑ NO  Have you received or borrowed money or anything of value directly or indirectly from any other licensee, representatives of a licensee, or suppliers of alcoholic products?

7K  □ YES  ☑ NO  Are you or any other person having a direct interest in your place of business more than 30 days delinquent complying with a child support payment order? [8 ILCS 101/10-68(c)]

7L  □ YES  ☑ NO  Are you in violation of the required liquor liability insurance coverage stated in section 6-21(a) of the Liquor Control Act [235 ILCS 6/7] regarding establishments that sell alcoholic liquors for use or consumption on the licensed retail premises?

7M  □ YES  ☑ NO  If a Corporate Licensee, is your corporation ineligible to be issued this license? [235 ILCS 6/6-2(e)(10) and 6/6-2(e)(10a)]

8. HOURS OF OPERATION

List the daily hours open for business. This information will assist Commission field agents in choosing an inspection time which causes the least disruption to the business.

<table>
<thead>
<tr>
<th>MON</th>
<th>TUES</th>
<th>WED</th>
<th>THURS</th>
<th>FRI</th>
<th>SAT</th>
<th>SUN</th>
</tr>
</thead>
<tbody>
<tr>
<td>9am to 10</td>
<td>9am to 10</td>
<td>9am to 10</td>
<td>9am to 10</td>
<td>9am to 10</td>
<td>9am to 10</td>
<td>10am to 10</td>
</tr>
</tbody>
</table>

9. SIGNATURE/TITLE/DATE

Please sign and date the application form and provide your title with the organization. The application must be signed by an owner, an officer or partner. The signature must be an original, rubber stamps are not accepted.

I, THE Undersigned Applicant or Authorized Agent Thereof, Swear or Affirm That: The Matters Stated in the Foregoing Application Are True and Correct; They Are Made Upon My Personal Knowledge and Information; They Are Made for the Purpose of Requesting the State of Illinois to Issue the License Herein Applied For; The Applicant is Qualified and Eligible to Obtain the License Applied For; and the Applicant will Not Violate Any of the Laws of the United States of America or the State of Illinois, in Particular, the Illinois Liquor Control Act, Rules and Regulations, and the Civil Rights Sections Thereof.

Further, I Agree to Notify this Commission Within 30 Working Days of Changes in Any of the Above Information. (Note: If the person signing this application is not listed in Section 3, They Must Provide the State with Their Personal Information as Indicated in Section 3 Even If They Do Not Own 5% or More of the Business.)

[Signature]

[Title/Position]

[Date: 4/3/08]

IL 587-0015 (03/2009) PAGE 6 OF 6
17. Experience in line of business seeking license for.

This will be the first Video Gaming Establishment I have opened. I have been researching this endeavor for several years now. I have done my due diligence on the pros and cons of everything involved in opening a video gaming establishment. Since the numbers these places are generating is accessible to the public, I have studied the information which provides insight into why certain places work, and why some don’t. I have also attempted to open a video gaming establishment in another town that was voted down by their City Council.
18. Other information that will be helpful

I have attached the City Council Goals that apply to the location of my facility.
City Operations

Simple

- Attract “multi-disciplined” staff in order to de-specialize the operation
- Emergency Operations Center planning
- Airport self-sufficient
- Airport strategy meeting
- COW on meeting logistics

- Add to City Board/Commission at least one (1) person of color/millennial
- Explore grant opportunities
- Define core services
- Cultural competency training for City residents
- Increase effectiveness and efficiency with technology

Complex

Public Safety

Simple

- Goal setting on reduction of crime
- Attack crime head on and reduce known criminal influences
- Be more proactive in reducing crime
- Reduce crime by 25%
- Crime reduce 10%
- Decrease violent crime
- Attack known blight head on

Complex

- Explore cameras installed in downtown

Economic Development

Simple

- Focus on areas outside of downtown
- Increase efforts to draw business to East and West Lincoln Highway and South 4th Street
- Increase business activity on South 4th Street and East Lincoln Highway
• Install at least one new retail space – South 4th Street corridor
• Mooney building or property reused
• Investigate potential for downtown hotel
• Pursue development of sports complex/outdoor sports facility
• Reduce commercial vacancies by 25%
• Conduct feasibility study with NIU regarding research park
• Grow living wage jobs by 15%
• Expand for dynamic businesses*
• Able to business thinking by 15%
• Create more friendly environment for local UDO*
• Increase park space on shared parking lot
• Reduce land use and footprint
• Reduce number of trips
• Use vacant small space for pop up stores*
• Identify retail use for at least one building contiguous to Airport*

Complex

Residential Development

Simple

• Issue permits for 10 new home builds at $200,000 or more

• Think outside the box in terms of growth and rooftops
• Institute rooming house conversion program
• Study lighting needs – North 5th Ward
• Residential rehab program

Complex

Northern Illinois University

Simple

Complex

• Improve communications with NIU
  enrollment
Renewal

License No.: DeKalb

Initial application fee - $500.00 per device (maximum 5 devices)

Gambling Device License Application
Municipal Code, Chapter 38.27

Incomplete applications will be returned to applicant.

Return ORIGINAL completed application with fee payable to the City of DeKalb to:

City of DeKalb
Finance Department
200 S. 4th Street
DeKalb, IL 60115

Application is hereby made for a Gambling Device License for the period

---

**BUSINESS INFORMATION** (Please make any necessary changes - type or print clearly)

<table>
<thead>
<tr>
<th>Business Name:</th>
<th>Maizy's</th>
<th>Sole Proprietor</th>
<th>Partnership</th>
<th>Corporation</th>
<th>LLC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Corporation Name:</td>
<td>Cameron Clan LLC</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Building Address:</td>
<td>853 S 4th Street DeKalb IL 60115</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>License Issued to:</td>
<td>Cameron Clan LLC 853 S 4th Street DeKalb IL 60115</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Principal Business conducted at this location:</td>
<td>Video Gaming</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**NO LICENSE WILL BE ISSUED TO ANY BUSINESS WITH AN OUTSTANDING DEBT TO CITY**

Are there any liens of the City of DeKalb against the property? Yes ☐ No ☒

Do you owe money to any other city department? Yes ☐ No ☒

Has applicant(s) ever been convicted of any violation of the Gaming Laws of the State of Illinois or any other state or any Federal Gaming Laws? Yes ☐ No ☒

**IDENTIFICATION - TO BE COMPLETED BY ALL APPLICANTS**

<table>
<thead>
<tr>
<th>Business Owner</th>
<th>Name</th>
<th>Mailing Address</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Cameron Clan LLC</td>
<td>Address:</td>
</tr>
<tr>
<td></td>
<td>D.B.A. Maizy's</td>
<td>City, State, Zip Code:</td>
</tr>
<tr>
<td></td>
<td>Brad Coppen</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Vending Machine Company</th>
<th>Name</th>
<th>Mailing Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gaming and Entertainment Management</td>
<td>Address:</td>
<td></td>
</tr>
</tbody>
</table>

**LICENSE WILL BE MAILED TO BUSINESS ADDRESS:**

Mail Correspondence (including renewal applications) to: Business Owner | Business Manager | Vending Machine Company

Mail copy of license to different address? Yes ☐ No ☒

If yes, please provide address to send copy to:

Address: |

City, State, Zip Code: DeKalb IL 60115

**FEES:**
Number of Video Gaming Terminals: 5
(maximum 5 terminals)

TOTAL AMOUNT DUE: $2500

DESCRIPTION OF DEVICE(S):
Description, mechanical features and name of manufacturer of device(s) on hand at time of application; attach a layout detailing the plan of location including security measures, separation from area that minors are located, location of adults supervising measures and layout of video terminals and cash terminals:

Manufacturers include: IGT, Bally, WMS, Spielo

If necessary, please use a separate sheet of paper for descriptions of more machines.

INCLUDED WITH THIS APPLICATION:

I HEREBY AGREE TO THE FOLLOWING:

The undersigned hereby states that information contained in this application is true to the best of his/her knowledge and that all statements set forth are of his/her own free will. The undersigned applicant agrees to pay any and all expenses, including compensation for damages and the undersigned will indemnify and hold harmless the City, its officers, boards, commissions, agents and employees from and against any action, proceeding, claim of liability, or other relief, asserted against the City resulting from the issuance of this license. The Video Gaming License is treated as a supplemental license to the licensed premises' liquor license. Any violation of the Video Gaming Act or any violation of any provision of this Chapter 38 shall constitute a violation of the terms and conditions of both the Video Gaming License and the establishment's liquor license. Any suspension, revocation, termination or other disciplinary proceeding applicable to a licensed premises liquor license shall be applicable to its Video Gaming License, and any proceeding applicable to the Video Gaming License shall be applicable to the liquor license. A suspension, revocation or termination of either license shall automatically result in the suspension, revocation or termination of the other license. Any Video Gaming Terminal utilized in a licensed premises shall be installed in a fixed location described in the drawing from which the Video Gaming Terminal is visible to staff of the licensed premises at all times. It shall be unlawful for any person under the age of 21 years to operate, play or utilize a Video Gaming Terminal.

SIGNATURE: [Signature]
Date: 4-26-18

Print Name and Title: