

Village of Hampshire Hampshire Liquor Commission Meeting Thursday, December 2, 2021 - 6:00 PM

Hampshire Village Hall - 234 S. State Street

AGENDA

- 1. Call to Order.
- 2. Establish Quorum.
- 3. Approve Meeting Minutes of October 7, 2021.
- 4. Review and approve Renewal of Liquor Licenses for 2022.
- 5. Other Business
- 6. Adjournment.

Attendance: By Public Act 101-0640, all public meetings and public hearings for essential governmental services may be held by video or tele conference during a public health disaster, provided there is an accommodation for the public to participate, and submit questions and comments prior to meeting. If you would like to attend this meeting by Video or Tele Conference, you must e-mail the Village Clerk with your request no later than noon (12 PM) two days prior to the meeting, and a link to participate will be sent to your e-mail address the day of the meeting, including all exhibits and other documents (the packet) to be considered at the meeting.

<u>Accommodations</u>: The Village of Hampshire, in compliance with the Americans With Disabilities Act, requests that persons with disabilities, who require certain accommodations to allow them to observe and/or participate in the meeting(s) or have questions about the accessibility of the meeting(s) or facilities, contact the Village at 847-683-2181 to allow the Village to make reasonable accommodations for these persons.

HAMPSHIRE LIQUOR COMMISSION

October 7, 2021

Mike Reid, Chairman, called the meeting to order at 6:30 p.m.

Present: Trustee Koth, Mott

Absent: None

Also present: Alma - Early times street rods

Trustee Mott moved, to approve the minutes for June 23, 2021.

Seconded by Koth Motion carried by voice vote Ayes: Koth, Mott, Reid

Nays: None Absent: None

Ms. Carranza introduced herself to the commission; she owns a restaurant in East Dundee, her husband owns a Rosati's in Carpentersville. She will be serving food at the bar half American and half Mexican.

Trustee Koth moved, to approve the new owner at Jimmy's Sports Bar Alma Carranza Class A-2., and pro rate the fee in the amount of \$208.00 for the last two months of the year. Contingent upon her fingerprints coming back from the Illinois State Police.

Seconded by Mott Motion carried by roll call vote Ayes: Koth, Mott, Reid

Nays: None Absent: None

Other Business:

Trustee Koth would like know the requirements on fencing for beer and wine events. The requirements will be on the agenda at the next liquor commission meeting.

Adjournment

Trustee Mott moved, to adjourn the Liquor Commission meeting at 6:43 p.m.

Seconded by Koth Motion carried by voice vote

Ayes: Koth, Mott, Reid

Nays: None Absent: None

Mike Reid Jr., Village President



DATE: 11/17/2021

327084 \$1,500.00

Village of Hampshire 234 S. State Street, Hampshire, IL 60140

Phone: 847-683-2181 - www.hampshireil.org

OR LIQUOR LICENSE

N	AME OF BUSINESS: CASEY'S GENERAL STORE #3066 SALES TAX ID: 3519-3395
N	AME OF APPLICANT: CASEY'S RETAIL COMPANY
Αſ	DDRESS OF BUSINESS : 820 WARNER ST, PO BOX 443, HAMPSHIRE, IL 60140
В	USINESS PHONE NO.: 847-683-9110
M	AILING ADDRESS: CASEY'S RETAIL COMPANY, ONE SE CONVENIENCE BLVD, PO BOX 3001, ANKENY, IA 50021
TC	D: Local Liquor Control Commission Village of Hampshire, Illinois
of as	Irsuant to the provisions of Chapter IIIV, Alcoholic Liquor Regulations, of the Municipal Code Hampshire, Illinois, as amended, and pursuant to Chapter 43 of the Illinois Revised Statutes, amended, the undersigned hereby makes application for an Alcoholic Liquor cense as follows:
1.	License Class and Annual Fee (check one):
	Class A-1 - \$1,500.00 Class C-4 - \$1,500.00
	Class A-2 - \$1,250.00 Class D - \$1,750.00
	× Class B-1 - \$1,500.00 Class E - \$1,750.00
	Class B-2 - \$1,500.00 Class F - \$1,500.00
	Class C-1 - \$1,500.00 Class G - \$ 75.00
	Class C-2 - \$1,500.00 Class H- \$ 500.00
	Class C-3 - \$1,750.00 Class I- \$ 500.00
2.	License Period:
	Commencing on January 1, 2022 and ending December 31, 2022 or Commencing on and ending December 31,
3.	Type of Business Entity (check one):
	☐ Individual
	Partnership Other (specify)

4. The following information must be provided with respect to any and all individual owners, partners, corporate officers, corporate directors, resident managers, and, if a corporation, all persons owning directly or beneficially more than 5% of the corporation stock:

NOTE: Full names must be listed with middle initials. Furthermore, the applicant must notify the Local Liquor Control Commission of change in the partnership, officers, directors, persons holding directly or beneficially more than 5% in interest of the stock or ownership interest, or managers of the establishment within ten (10) days of said change.

Na	ame: PLEASE SEE ATTACHED OFFICER LIST, NO PERSO	ONS INDIVIDUALLY OR AN AGGREGATE OWN 5% OF CORP STOCK.
BII	RTHDAY:	_
НС	OME ADDRESS:	
DF	RIVERS LICENSE#	HOME PHONE#
BL	JSINESS STATUS:	
PE	ERCENTAGE OF STOCK HELD:	
Na	ame:	
	RTHDAY:	
	OME ADDRESS:	
DF	RIVERS LICENSE#	HOME PHONE#
ΒL	JSINESS STATUS:	
PE	ERCENTAGE OF STOCK HELD: (If additional space is required,	please attach a separate sheet of paper)
5.	• •	es? YES, ALL OFFICERS ARE CITIZENS BORN IN THE U.S.
		oration:d to transact business in Illinois pursuant to the Illinois poration 04-14-04, QUALIFIED TO DO BUSINESS IN ILLINOIS 04-29-04.
6.	5. State the character of the applicant's business, and in case of a corporation, the objects for which it was formed. WE ARE A MORALLY SOUND CORPORATION FORMED AS A CHAIN OF CONVENIENCE STORES	
7.	State the location and physical description license and the nature of the business at SUCASEY'S GENERAL STORE #3066, 820 WARNER	
	State whether the applicant has ever had a	liquor license issued by the Federal government, any WE HOLD MANY LIQUOR LICENSES IN ILLINOIS

If answer is in the affirmative, state the name of the licensing unit of government, when and

where said of license was issued, PLEASE SEE ATTACHED

	Has the applicant ever had any previous liquor license revoked? NO
١	Has the applicant and the designated managers read and do they understand and agree not to violate any of the liquor laws of the United States, the State of Illinois or any of the ordinances of the Village of Hampshire in conducting business?
4	State whether all individual owners, partners, officers, directors, persons holding more than 5% of the corporate stock have been fingerprinted by the Illinois State Police and, if so the date thereof. NO PERSONS INDIVIDUALLY OR AN AGGREGATE OWN 5% OF CORP STOCK.
	Note: This application will remain incomplete and will not be
	considered until question #11 can be answered in the
	affirmative.
	State the name of the person who will generally be managing the ongoing affairs of this business at these premises. KIMBERLY CARROLL IS OUR LOCAL MANAGER/AGENT
	State whether said manager has been fingerprinted by the Illinois State Police and, if so the date thereof. KIMBERLY CARROLL WILL GO TO PD TO BE FINGERPRINTED THE WEEK OF 11/22/2021
	Note: This application will remain incomplete and will not be
	considered until question #12 can be answered in the
	affirmative.
	Has the applicant attached Surety Bond and Certificate of Liability Insurance to this application or already furnished it to the Village?
	THE SURETY BOND WILL COME TO THE VILLAGE FROM OUR BONDING COMPANY, CERTIFICATE OF LIABILITY INSURANCE IS ATTACHED.
	If the applicant does not own the premises for which the license is sought, does the applicant have a lease for the full period for which the license is to be issued? WE OWN.
١	f the answer is in the affirmative, attach a copy of said lease to the application.
	State whether the applicant has ever been convicted of a felony offense under any Federal or State law? NO
6.	State whether the applicant has ever been convicted of a violation of any Federal or State law concerning the manufacture, possession or sale of alcoholic liquor? YES, WE HAVE HAD SUSPENSIONS, PLEASE
1	State whether a Federal Gaming Device Stamp or Federal Wagering Stamp has been issued to the applicant, the premises, or to any corporation in which the applicant holds 5% or more Stock? NO, NO PERSONS INDIVIDUALLY OR AN AGGREGATE OWN 5% OF CORP STOCK.
	f answer is in the affirmative, has the stamp been issued for any portion or all of the time to be covered by this applicant?
^	to the constitution of the form and another of any abounds asked beginsted beautiful to the
.გ.	Is the premises within 100 feet of any real property of any church, school, hospital, home for the aged or indigent persons or for veterans, their wives or children, or any military or naval station?
.9.	Are the premises for which license is herein applied for a store or other place of business where the majority of customers are minors of school age or where the principal business transacted consists of school books, school supplies, food, lunches or drinks for such minors? NO

20.	. Does the applicant understand and agree that during the license period, any violation of Federal State or Village laws and ordinances will be referred to the Local Liquor Control Commission and that such violation may result in the suspension or revocation of said license? YES				
	1. Does the applicant understand and agree that members of the Local Liquor Control Commission and/or Hampshire Police Department shall have the authority to enter at any time upon the premises licensed hereunder to determine whether any State or Village laws and ordinances have been or are being violated, and at such time to examine the premises of said licensee in connection therewith? YES				
22.	22. Does the applicant understand and agree that a license shall be purely a personal privilege, and shall not constitute property, nor shall it be subject to attachment, garnishment or execution, nor shall it be alienable or transferable, voluntarily or involuntarily, or subject to being encumbered or hypothecated? YES				
23.	23. (If applying for other classes except Class B-1 and B-2): Does the applicant understand that the acceptability of all entertainment shall be subject to review by the Local Liquor Control Commission? YES On the attached addendum for Entertainment, please list and briefly describe, any and all entertainment to be provided in your establishment during the period of this license. (If any additional entertainment is planned during the period of this license, such entertainment must be listed and described for, and approved by, the Hampshire Liquor Commission prior to being conducted or performed. Additional entertainment forms are available at the Office of the Village Clerk.				
		F APPLICANT (S) FOR C	CASEY'S RETAII		
CO	RPORATIO	N SIGNATURES	M	INDIVIDUAL OR PARTNERSHIP SIGNATURES	
Pre	s	JE 61 3		BY STEPHEN P. BRAMLAGE, PRESIDENT	
Sec. Douglos m. Beed			BY DOUGLAS M. BEECH, ASSISTANT SECRETARY		
Cou	STATE OF IOWA) SS County of POLK)				
The undersigned swears that all statements are true and correct.					
				FOR CASEY'S RETAIL COMPANY	
CO	RPORATE	SEAL			
Sut		nd sworn to before me of NOVEMBER	this 2021		
	CARLAN ON P.	JAMIE DIETRICH Commission Number 820699 My Commission Exp. 10/15/2022		Jamie Dietrich Notary Public	



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 6/14/2021

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).				
PRODUCER		CONTACT NAME: Lori Godbey		
LMC Insurance & Risk Management, Inc.		PHONE (A/C, No, Ext): 515-237-0114	FAX (A/C, No): 515	244-9535
4200 University Ave., Suite 200 West Des Moines IA 50266-5945		ADDRESS: lori.godbey@lmcins.com		
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		INSURER(S) AFFORDING COVERAGE		NAIC#
		INSURER A: ACE American Insurance Co	mpany	22667
INSURED	CASEGEN-01	INSURER B: Indemnity Insurance Compa	ny of North America	43575
Casey's General Stores, Inc. P O Box 3001		INSURER C : ACE Fire Underwriters Insur-	ance Company	20702
One Convenience Blvd		INSURER D : ACE Property & Casualty Ins	s Co	20699
Ankeny IA 50021		INSURER E :		
		INSURER F:		
COVERAGES CERTIFICATE	NUMBER: 50251628	REVIS	ION NUMBER:	
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS				

CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. POLICY EFF POLICY EXP INSR LTR ADDL SUBR LIMITS TYPE OF INSURANCE **POLICY NUMBER** (MM/DD/YYYY) 7/1/2021 7/1/2022 COMMERCIAL GENERAL LIABILITY XSLG72488556 \$1,000,000 Х EACH OCCURRENCE Α DAMAGE TO RENTED PREMISES (Ea occurrence) X OCCUR \$1,000,000 CLAIMS-MADE MED EXP (Any one person) \$0 \$1,000,000 SIR \$1,000,000 PERSONAL & ADV INJURY \$5,000,000 GENERAL AGGREGATE GEN'L AGGREGATE LIMIT APPLIES PER: PRO-JECT \$5,000,000 PRODUCTS - COMP/OP AGG POLICY OTHER: COMBINED SINGLE LIMIT (Ea accident) \$5,000,000 AUTOMOBILE LIABILITY 7/1/2021 7/1/2022 ISAH25553032 BODILY INJURY (Per person) Х ANY AUTO OWNED AUTOS ONLY SCHEDULED BODILY INJURY (Per accident) AUTOS NON-OWNED PROPERTY DAMAGE (Per accident) HIRED AUTOS ONLY **AUTOS ONLY** \$2,000,000 Deductible X UMBRELLA LIAB XEVG72528207001 7/1/2021 7/1/2022 \$5,000,000 Х EACH OCCURRENCE OCCUR **EXCESS LIAB** AGGREGATE \$5,000,000 CLAIMS-MADE DED RETENTION \$ WORKERS COMPENSATION 7/1/2022 PER STATUTE 7/1/2021 WI RC67812591 AND EMPLOYERS' LIABILITY 7/1/2021 7/1/2022 SCFC67812633 E.L. EACH ACCIDENT \$1,000,000 ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) N N/A E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 If yes, describe under DESCRIPTION OF OPERATIONS below E.L. DISEASE - POLICY LIMIT \$1,000,000 1,000,000 7/1/2021 7/1/2022 Each Occurence Liquor Liability XSLG72488556 Aggregate 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Named Insured Includes: Casey's Retail Company, Casey's Services Company, Casey's Marketing Company, Casey's Services Company, CGS Stores, LLC, Buck's, Inc., Buck's, LLC; Chicago SPE (N), LLC, Buchanan Energy (N), LLC, Buchanan Energy (S), LLC, Buck's LLC of Collinsville, C. T. Jewell Company, Inc., Buck's Intermediate Holdings LLC and Buck's Holdco, Inc.

RE: #3066 liquor permit

CERTIFICATE HOLDER	CANCELLATION
Village of Hampshire 234 S State Street	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
PO Box 457 Hampshire IL 60140-0457	Anne Macfarland



Merchants Bonding Company (Mutual) P.O. Box 14498, Des Moines, Iowa 50306-3498 Phone: (800) 678-8171 Fax: (515) 243-3854

CONTINUATION CERTIFICATE

(to be filed with the obligee)

IL 57104	\$1,500		Liquor Retailer	
BOND NO.	AMOUNT		DESCRIPTION	
OBLIGEEVillage of Hampshire				
MERCHANTS	BONDING COMPANY (N	MUTUAL) hereby continu	es in force Bond for:	
PRINCIPAL		CASEY'S RETA	AIL COMPANY	
DBA				
All liability under this	Continuation Certificate is	s effective 12/01/2	020 and terminates midnight12/01/202	21
			pany's liability under said Bond and this and all	
			eed in the aggregate the largest single amount nam	ied
	orsement attached thereto			
vvitness the signature	e of its President under th	le corporate sear on	October 1, 2020	
		NOING COMP	MERCHANTS BONDING COMPANY (MUTUAL)	
		O OHPURA TE	•	
Attest:		N -0- ED		
2/1//	Alamar Ca	1933	Jarry Taylo	
- weare	Secretary	Hair Hall	President	
·	000,0101	$\stackrel{\wedge}{\hookrightarrow}$		
		CERTIFICATION	N	
I hereby certify that the	ne following is a true and	correct copy of Section 1	(b) and Section 1(d) of Article VI of the Bylaws of	
			it: Section 1(b) "The President, Secretary, or	_
			ave power and authority to execute on behalf of the	
			rtakings, recognizances, contracts of indemnity and ignature of any authorized officer and the seal of th	
			Power of Attorney or Certification thereof authorizi	
			other suretyship obligations of the Company, and su	
			as though manually fixed."	
•	ne following are duly elect	ed officers of the Compa	ny: Larry Taylor, President; and William Warner, Jr.	,
Secretary.				
		set my hand as President	and affix the Corporate Seal of the MERCHANTS	
BONDING COMPAN	,	NG Co.		
this <u>1st</u> day o	f October 202	ONO RPO	MERCHANTS BONDING COMPANY (MUT	UAL)
Attest:		Sign	3 .	
11.1.	1/ 1	-0- E	3 Larry 7.1	
William	Harner y,	1933	5. Jaylor	
:	Secretary	43W (14	President	
			•	
On this 1st day of			ared Larry Taylor, to me personally known, who be	
by me duly sworn did say that he is President of the MERCHANTS BONDING COMPANY (MUTUAL), the corporation				
described in the foregoing instrument, and that the Seal affixed to the said instrument is the Corporate Seal of the said Corporation and that the said instrument was signed and sealed in behalf of said Corporation by authority of its Board of				
Directors.	t the said instrument was	s signed and sealed in b	chair of said corporation by authority of no board	. 01
Witnessed to and sul	hearihad hy ma on C	October 1, 2020	tolly mason	
vvidiessed to and su			Notary Public	
	LARIAL OF PO	OLLY MASON		



Partnership

PAID

Village of Hampshire

NOV 1 5 2021

234 S. State Street, Hampshire, IL 60140 Phone: 847-683-2181 • www.hampshireil.org

Village of Hampshire EMBRACE OPPORTUNITY HONOR TRADITION

APPLICATION FOR LIQUOR LICENSE
DATE:
NAME OF BUSINESS: REDOX RESTAURANT & BAR SALES TAX ID: 3413-0667
NAME OF APPLICANT: MARIAS VIKKI INC. of/b/a Red Ox Restaurant & Bar
ADDRESS OF BUSINESS: 129 E. DAK KNOLL HAMPSHIRE, IZ. 60140
BUSINESS PHONE NO.: 847-683-2300
MAILING ADDRESS: 129 E.OAK KNOLL, HAMPSHIRE, IL. 60140
TO: Local Liquor Control Commission Village of Hampshire, Illinois
Pursuant to the provisions of Chapter IIIV, Alcoholic Liquor Regulations, of the Municipal Code of Hampshire, Illinois, as amended, and pursuant to Chapter 43 of the Illinois Revised Statutes, as amended, the undersigned hereby makes application for an Alcoholic Liquor License as follows: 1. License Class and Annual Fee (check one):
Class A-1 - \$1,500.00 Class A-2 - \$1,250.00 Class B-1 - \$1,500.00 Class B-2 - \$1,500.00 Class C-1 - \$1,500.00 Class C-2 - \$1,500.00 Class C-3 - \$1,750.00 Class C-3 - \$1,750.00 Class C-3 - \$1,750.00 Class C-3 - \$1,750.00 Class C-4 - \$1,500.00 Class D - \$1,750.00 Class E - \$1,750.00 Class F - \$1,750.00 Class G - \$ 75.00 Class H- \$ 500.00 Class C-3 - \$1,750.00 Class I- \$ 500.00
2. License Period:
Commencing on January 1, 2022 and ending December 31, 2022 or Commencing on and ending December 31,
3. Type of Business Entity (check one):
Individual Corporation

Other (specify)

- 4. The following information must be provided with respect to any and all individual owners, partners, corporate officers, corporate directors, resident managers, and, if a corporation, all persons owning directly or beneficially more than 5% of the corporation stock:
 - NOTE: Full names must be listed with middle initials. Furthermore, the applicant must notify the Local Liquor Control Commission of change in the partnership, officers, directors, persons holding directly or beneficially more than 5% in interest of the stock or ownership interest, or managers of the establishment within ten (10) days of said change.

Name: DIMITRA PANTELIS
BIRTHDAY: 12 - 10 - 1958
HOME ADDRESS: 1410 Pheasant Trail, HAMPSHIRE, IL 60140 DRIVERS LICENSE# P534-1605-8951 HOME PHONE# 847-683-7041
DRIVERS LICENSE# <u>P534-1605-8951</u> HOME PHONE# <u>847-683-704</u> 1
BUSINESS STATUS: OWNER
PERCENTAGE OF STOCK HELD: 100 %
Name:
BIRTHDAY:
HOME ADDRESS:
DRIVERS LICENSE# HOME PHONE#
BUSINESS STATUS:
PERCENTAGE OF STOCK HELD:(If additional space is required, please attach a separate sheet of paper)
5. Is the applicant a citizen of the United States?
If an Illinois corporation, state date of corporation:
6. State the character of the applicant's business, and in case of a corporation, the objects for which it was formed. FULL SERVICE RESTAURANT AND LOUNGE.
7. State the location and physical description of the premises which is to be operated under such license and the nature of the business at such location. 129 E. OAK KNOW, HAMPSHIRE, TL. FULL SERVICE RESTAURANT AND LOUNGE.
8. State whether the applicant has ever had a liquor license issued by the Federal government, any
State government or any municipality
If answer is in the affirmative, state the name of the licensing unit of government, when and where said of license was issued. VILLAGE OF HAMPSHIRE STATE OF FLINDIS, ATE

9.	Has the applicant ever had any previous liquor license revoked?
10.	Has the applicant and the designated managers read and do they understand and agree not to violate any of the liquor laws of the United States, the State of Illinois or any of the ordinances of the Village of Hampshire in conducting business?
11.	State whether all individual owners, partners, officers, directors, persons holding more than 5% of the corporate stock have been fingerprinted by the Illinois State Police and, if so the date thereof. Note: This application will remain incomplete and will not be considered until question #11 can be answered in the affirmative.
12.	State the name of the person who will generally be managing the ongoing affairs of this business at these premises. DIMITRA PANTELIS
13.	Has the applicant attached Surety Bond and Certificate of Liability Insurance to this application or already furnished it to the Village? ———————————————————————————————————
14.	If the applicant does not own the premises for which the license is sought, does the applicant have a lease for the full period for which the license is to be issued? <u>YES</u> のいん ゴア If the answer is in the affirmative, attach a copy of said lease to the application.
15.	State whether the applicant has ever been convicted of a felony offense under any Federal or State law?
16.	State whether the applicant has ever been convicted of a violation of any Federal or State law concerning the manufacture, possession or sale of alcoholic liquor?
	State whether a Federal Gaming Device Stamp or Federal Wagering Stamp has been issued to the applicant, the premises, or to any corporation in which the applicant holds 5% or more Stock?
18.	Is the premises within 100 feet of any real property of any church, school, hospital, home for the aged or indigent persons or for veterans, their wives or children, or any military or naval station?
19.	Are the premises for which license is herein applied for a store or other place of business where the majority of customers are minors of school age or where the principal business transacted consists of school books, school supplies, food, lunches or drinks for such minors?

20. Does the applicant understand and agree that a State or Village laws and ordinances will be ref that such violation may result in the suspension	erred to the Local Liquor Control Commission and
21. Does the applicant understand and agree that and/or Hampshire Police Department shall have premises licensed hereunder to determine who have been or are being violated, and at such tire connection therewith?	re the authority to enter at any time upon the ether any State or Village laws and ordinances
22. Does the applicant understand and agree that a shall not constitute property, nor shall it be submor shall it be alienable or transferable, voluntaencumbered or hypothecated?	oject to attachment, garnishment or execution,
	please list and briefly describe, any and all ment during the period of this license. (If any period of this license, such entertainment must he Hampshire Liquor Commission prior to being
SIGNATURE OF APPLICANT (S) CORPORATION SIGNATURES Pres. Sed. Jimith Lamb	INDIVIDUAL OR PARTNERSHIP SIGNATURES
STATE OF COUNTY OF DEKALE) SS	
The undersigned swears that all statements are tr	ue and correct.
OFFICIAL SEAL DANIEL KRULL NOTARY PUBLIC - STATE OF ILLINOIS MY COMMISSION EXPIRES: 10/08/24	Ü
Subscribed and sworn to before me this	- Du Lu

Notary Public



Western Surety Company

CONTINUATION CERTIFICATE

Western Surety Company hereby continues in force	ce Bond No. 14540751 briefly	
described as RESTAURANT/LIQUOR VILLAGE OF HAM	1PSHIRE ,	
for MARIA & VIKKI, INC. DBA RED OX RESTAURAN		
2	, as Principal,	
in the sum of \$ FIVE THOUSAND AND NO/100	Dollars, for the term beginning	
November 26 , 2021 , and ending	November 26 , 2022 , subject to all	
the covenants and conditions of the original bond refer	rred to above.	
This continuation is issued upon the express con	dition that the liability of Western Surety Company	
under said Bond and this and all continuations thereof shall not be cumulative and shall in no event exceed		
the total sum above written.		
Dated this <u>8th</u> day of <u>October</u> ,		
	WESTERN SURETY COMPANY By Paul T. Brufat, Vice President	

THIS "Continuation Certificate" MUST BE FILED WITH THE ABOVE BOND.

WESTERN SUBSTY COMPANY , ONE OF AMERICAS OLDEST BONDING COMPANIES 🖪



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 11/23/2020

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

lf th	SUBROGATION IS WAIVED, subject to is certificate does not confer rights to	the:	terms ertifi	and conditions of the po cate holder in lieu of such	ncy, ce Lendor	rtain policies sement(s).	may require	an encorsemen	i. A state	ment (<i>,</i> 111
-	DUCER				CONTA NAME:	CT Peter Stav	/rou				
	a Lee Enterprises Inc				PHONE	(847) 70			FAX (A/C, No):	(847) 7	793-0776
	a Lee Enterprises inc				(A/C, No	noto@eta	vinsurance.cor	n L	(AVC, NO):	-	
	45 W.Petronella Dr., Ste. 2				ADDRE	33					NAIC#
				IL 60048		Dades 1	Autual Insuran	DING COVERAGE Ce Co			13420
-	rtyville			IE 00040	INSURE	Ct	Fire Insurance			_	19070
INSU	Maria & Vikki Inc., DBA: Red Ox	Doct	ouran	t & Dar	INSURE	ND.					
	129 E. Oak Knoll Drive	Nesi	aulail	(& Dai	INSURE						
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	CLUSIONS AND CONDITIONS OF SUCH PO		S. LIM		REDUC	POLICY EFF	POLICY EXP				
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	CLAIMS-MADE OCCUR							PREMISES (Ea occur	TOTAL T	F 00	
	X Liquor Liability					12/01/2020	40/04/0004	MED EXP (Any one p		4.00	0,000
Α.				0070373965		12/01/2020	12/01/2021	PERSONAL & ADV IN		2 20	0,000
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGA		4.00	0,000
	POLICY PRO- LOC							PRODUCTS - COMPA		\$ 1,00 \$ 1,00	
	OTHER:							Liquor Liability COMBINED SINGLE	1 10 4170		0,000
	AUTOMOBILE LIABILITY							(Ea accident)		\$	
	ANY AUTO							BODILY INJURY (Per		\$	
	OWNED SCHEDULED AUTOS AUTOS							BODILY INJURY (Per PROPERTY DAMAGE		\$	
	HIRED NON-OWNED AUTOS ONLY							(Per accident)		\$	
										\$	
	UMBRELLA LIAB OCCUR							EACH OCCURRENC	E	\$	
	EXCESS LIAB CLAIMS-MADE							AGGREGATE		\$	
	DED RETENTION \$							PER		\$	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N							➤ PER STATUTE	OTH- ER	500	000
В	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	N/A		UB6N079046		05/10/2020	05/10/2021	E.L. EACH ACCIDEN		\$ 500, • 500,	
-	(Mandatory in NH)							E.L. DISEASE - EA E		\$ F00	
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLI	CYLIMIT	_{\$} 500,	000
						1					
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	CRIPTION OF OPERATIONS / LOCATIONS / VEHICLE			01, Additional Remarks Schedule,	may be a	ttached if more sp	pace is required)				
Loc	ation: 129 E. Oak Knoll Drive, Hampshire, Il	_ 60	140								
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					SHO	ULD ANY OF T	HE ABOVE DE	SCRIBED POLICIE	S BE CAN	CELLEI	D BEFORE
					THE	EXPIRATION D	ATE THEREO	, NOTICE WILL BE			
	Village of Hampshire				ACC	ORDANCE WIT	TH THE POLICY	PROVISIONS.			
	243 S State Street				AU == 12	DITED DESCRE	UTATR/E		_	_	
1	PO Box 457				AUTHO	RIZED REPRESEN	TIALIVE				

© 1988-2015 ACORD CORPORATION. All rights reserved.

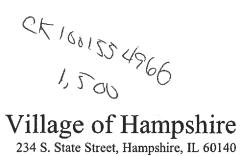
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IL 60140-0457

Hampshire



HONOR TRADITION



234 S. State Street, Hampshire, IL 60140 Phone: 847-683-2181 • www.hampshireil.org

APPLICATION FOR LIQUOR LICENSE

DATE:11/1	9/21			
NAME OF BU	SINESS: Love's Travel Stops & Cour	ntry Sto	res, Inc.	SALES TAX ID: 3383-8836
NAME OF API	PLICANT: Love's Travel Stop #763			
ADDRESS OF	BUSINESS: 201 A Love's Crossing,	Hamps	hire, IL 60140	
BUSINESS PHO	ONE NO.:847-683-7433			
MAILING ADD	DRESS:Attn: Licensing, PO Box 262	210, Okl	lahoma City, OK 73126	
•	or Control Commission Hampshire, Illinois			
of Hampshire	ne provisions of Chapter IIIV, Ale , Illinois, as amended, and purs the undersigned hereby makes lows:	uant t	o Chapter 43 of the	Illinois Revised Statutes,
1. License Cla	ass and Annual Fee (check one)	•		
X	Class A-1 - \$1,500.00 Class A-2 - \$1,250.00 Class B-1 - \$1,500.00 Class B-2 - \$1,500.00 Class C-1 - \$1,500.00 Class C-2 - \$1,500.00		Class C-4 - \$1 Class D - \$1 Class E - \$1 Class F - \$1 Class G - \$ Class H- \$,750.00 1,750.00 .,500.00 75.00 500.00
2. License Pe	_ Class C-3 - \$1,750.00	_	Class I- \$	500.00
Commenci Commenci	ing on January 1, <u>2022</u> and eing on and e			
3. Type of Bu	siness Entity (check one):			
	Individual	х	Corporation	
	Partnership		Other (specify)	

4. The following information must be provided with respect to any and all individual owners, partners, corporate officers, corporate directors, resident managers, and, if a corporation, all persons owning directly or beneficially more than 5% of the corporation stock:

NOTE: Full names must be listed with middle initials. Furthermore, the applicant must notify the Local Liquor Control Commission of change in the partnership, officers, directors, persons holding directly or beneficially more than 5% in interest of the stock or ownership interest, or managers of the establishment within ten (10) days of said change.

Na	ame: Please See Attached List
BII	RTHDAY:
HC	DME ADDRESS:
DF	RIVERS LICENSE# HOME PHONE#
ΒL	JSINESS STATUS:
PE	RCENTAGE OF STOCK HELD:
Na	ame:
BII	RTHDAY:
HC	DME ADDRESS:
DF	RIVERS LICENSE# HOME PHONE#
Вι	JSINESS STATUS:
PE	(If additional space is required, please attach a separate sheet of paper)
5.	Is the applicant a citizen of the United States?Yes If naturalized, state date and place of naturalization: If an Illinois corporation, state date of corporation:
	If a foreign corporation, state date qualified to transact business in Illinois pursuant to the Illinois Business Corporation Act.
6.	State the character of the applicant's business, and in case of a corporation, the objects for which it was formed. Convenience store w/fuel, fast food, tire sales/repair, light Mechanical & Roadside assistance
7.	State the location and physical description of the premises which is to be operated under such license and the nature of the business at such location
8.	State whether the applicant has ever had a liquor license issued by the Federal government, any State government or any municipality. Yes If answer is in the affirmative, state the name of the licensing unit of government, when and where said of license was issued. Please See Attached List

9.	Has the applicant ever had any previous liquor license revoked? No
	If answer is in the affirmative, state the date and reason for such revocation
10.	Has the applicant and the designated managers read and do they understand and agree not to violate any of the liquor laws of the United States, the State of Illinois or any of the ordinances of the Village of Hampshire in conducting business? Yes
11.	State whether all individual owners, partners, officers, directors, persons holding more than 5% of the corporate stock have been fingerprinted by the Illinois State Police and, if so the date thereofNo
	Note: This application will remain incomplete and will not be considered until question #11 can be answered in the affirmative.
12.	State the name of the person who will generally be managing the ongoing affairs of this business at these premises. Nil Patel
	State whether said manager has been fingerprinted by the Illinois State Police and, if so the date thereof. August 2020
	Note: This application will remain incomplete and will not be considered until question #12 can be answered in the affirmative.
13.	Has the applicant attached Surety Bond and Certificate of Liability Insurance to this application or already furnished it to the Village? Yes
14.	If the applicant does not own the premises for which the license is sought, does the applicant have a lease for the full period for which the license is to be issued?N/A
	If the answer is in the affirmative, attach a copy of said lease to the application.
1 5.	State whether the applicant has ever been convicted of a felony offense under any Federal or State law?No
16.	State whether the applicant has ever been convicted of a violation of any Federal or State law concerning the manufacture, possession or sale of alcoholic liquor?No
	State whether a Federal Gaming Device Stamp or Federal Wagering Stamp has been issued to the applicant, the premises, or to any corporation in which the applicant holds 5% or more Stock?NO
	If answer is in the affirmative, has the stamp been issued for any portion or all of the time to be covered by this applicant?N/A
18.	Is the premises within 100 feet of any real property of any church, school, hospital, home for the aged or indigent persons or for veterans, their wives or children, or any military or naval station? No
19.	Are the premises for which license is herein applied for a store or other place of business where the majority of customers are minors of school age or where the principal business transacted

consists of school books, school supplies, food, lunches or drinks for such minors? No

	20. Does the applicant understand and agree that during the license period, any violation of Federal, State or Village laws and ordinances will be referred to the Local Liquor Control Commission and that such violation may result in the suspension or revocation of said license? Yes
	21. Does the applicant understand and agree that members of the Local Liquor Control Commission and/or Hampshire Police Department shall have the authority to enter at any time upon the premises licensed hereunder to determine whether any State or Village laws and ordinances have been or are being violated, and at such time to examine the premises of said licensee in connection therewith?Yes
	22. Does the applicant understand and agree that a license shall be purely a personal privilege, and shall not constitute property, nor shall it be subject to attachment, garnishment or execution, nor shall it be alienable or transferable, voluntarily or involuntarily, or subject to being encumbered or hypothecated? Yes
	23. (If applying for other classes except Class B-1 and B-2): Does the applicant understand that the acceptability of all entertainment shall be subject to review by the Local Liquor Control Commission?N/AOn the attached addendum for Entertainment, please list and briefly describe, any and all entertainment to be provided in your establishment during the period of this license. (If any additional entertainment is planned during the period of this license, such entertainment must be listed and described for, and approved by, the Hampshire Liquor Commission prior to being conducted or performed. Additional entertainment forms are available at the Office of the Village Clerk.
	SIGNATURE OF APPLICANT (S) CORPORATION SIGNATURES Pres. Share Wharton Shane Wharton The Grazy American Signature
Assistant	Sec
	STATE OF Oklahoma) SS County of Oklahoma)
	The undersigned swears that all statements are true and correct. Docusigned by: Amy Guzzy -Amy Guzzy
	CORPORATE SEAL # 14004645
	Subscribed and sworn to before me this Question Qu

Notary Public



Fidelity and Deposit Company of Maryland Home Office: P.O. Box 1227, Baltimore, MD 21203-1227

CONTINUATION CERTIFICATE for Miscellaneous Term Bonds

Bond No. LPM9259649

as Principal, and the FIDELITY AN	ND DEPOSIT COMPANY (OF MARYLAND	, a	s Surety, in a certair
Bond No. LPM9259649	dated the,	1st	day of	March
in the penalty of				
-			One Thousand Five Hi	undred and 00/100
Dollars (\$1,500.00), in favor of	One moderna my	andred and 60/100
NULLACE OF HAMPSHIPE				
term of one year beginning on the _	1st	day of	March	
said bond and any and all continuat this certificate shall not be valid uni	tions thereof shall in no evoless signed by said Princip	SIT COMPANY OF MA ent exceed in the aggr al.	RYLAND regate the above nam	ed penalty, and that
modified, and that the liability of the said bond and any and all continuate this certificate shall not be valid unit	tions thereof shall in no eve	SIT COMPANY OF MA ent exceed in the aggr	RYLAND	under
said bond and any and all continuat	tions thereof shall in no evoless signed by said Princip	SIT COMPANY OF MAlent exceed in the aggral. day of	RYLAND regate the above nam November	under under ded penalty, and that
said bond and any and all continuat this certificate shall not be valid uni Signed, sealed and dated this Witness:	tions thereof shall in no evoless signed by said Princip	SIT COMPANY OF MA ent exceed in the aggr al.	RYLAND regate the above nam November	under under ded penalty, and that
said bond and any and all continuat this certificate shall not be valid uni Signed, sealed and dated this	tions thereof shall in no evoless signed by said Princip	SIT COMPANY OF MAlent exceed in the aggral. day of	RYLAND regate the above nam November & COUNTRY STORES, IN	under ded penalty, and that 2021 CORPOR (SEAL)
said bond and any and all continuat this certificate shall not be valid un Signed, sealed and dated this Vitness:	tions thereof shall in no evoless signed by said Princip	SIT COMPANY OF MAlent exceed in the aggral. day of	RYLAND regate the above nam November	under ded penalty, and that 2021 CORPOR (SEAL)
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said bond and any and all continuat this certificate shall not be valid un Signed, sealed and dated this Vitness:	tions thereof shall in no evoless signed by said Princip	SIT COMPANY OF MAlent exceed in the aggral. day of	RYLAND regate the above nam November & COUNTRY STORES, IN Prince	under ed penalty, and that 2021 CORPOR & CORPOR (SEAL)
said bond and any and all continuat this certificate shall not be valid uni Signed, sealed and dated this Witness:	tions thereof shall in no evoless signed by said Princip	ent exceed in the aggral. day of LOVE'S TRAVEL STOPS	RYLAND regate the above nam November & COUNTRY STORES, IN Princ	under ed penalty, and that 2021 CORPOR & CORPOR (SEAL)

Tonie Petranek, Attorney In Fact

ZURICH AMERICAN INSURANCE COMPANY COLONIAL AMERICAN CASUALTY AND SURETY COMPANY FIDELITY AND DEPOSIT COMPANY OF MARYLAND POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS: That the ZURICH AMERICAN INSURANCE COMPANY, a corporation of the State of New York, the COLONIAL AMERICAN CASUALTY AND SURETY COMPANY, a corporation of the State of Illinois, and the FIDELITY AND DEPOSIT COMPANY OF MARYLAND a corporation of the State of Illinois (herein collectively called the "Companies"), by Robert D. Murray, Vice President, in pursuance of authority granted by Article V, Section 8, of the By-Laws of said Companies, which are set forth on the reverse side hereof and are hereby certified to be in full force and effect on the date hereof, do hereby nominate, constitute, and appoint Ricardo J. REYNA, Tina MCEWAN, Don E. CORNELL, Joshua SAUNDERS, Robbi MORALES, Sophinie HUNTER, Kelly A. WESTBROOK, Tonie PETRANEK, Mikaela PEPPERS of Dallas, Texas, EACH, its true and lawful agent and Attorney-in-Fact, to make, execute, seal and deliver, for, and on its behalf as surety, and as its act and deed: any and all bonds and undertakings, and the execution of such bonds or undertakings in pursuance of these presents, shall be as binding upon said Companies, as fully and amply, to all intents and purposes, as if they had been duly executed and acknowledged by the regularly elected officers of the ZURICH AMERICAN INSURANCE COMPANY at its office in New York, New York., the regularly elected officers of the FIDELITY AND DEPOSIT COMPANY OF MARYLAND at its office in Owings Mills, Maryland., and the regularly elected officers of the FIDELITY AND DEPOSIT COMPANY OF MARYLAND at its office in Owings Mills, Maryland., in their own proper persons.

The said Vice President does hereby certify that the extract set forth on the reverse side hereof is a true copy of Article V, Section 8, of the By-Laws of said Companies, and is now in force.

IN WITNESS WHEREOF, the said Vice-President has hereunto subscribed his/her names and affixed the Corporate Seals of the said ZURICH AMERICAN INSURANCE COMPANY, COLONIAL AMERICAN CASUALTY AND SURETY COMPANY, and FIDELITY AND DEPOSIT COMPANY OF MARYLAND, this 11th day of May, A.D. 2021.







ATTEST: ZURICH AMERICAN INSURANCE COMPANY COLONIAL AMERICAN CASUALTY AND SURETY COMPANY FIDELITY AND DEPOSIT COMPANY OF MARYLAND

By: Robert D. Murray
Vice President

Dawn & Brown

By: Dawn E. Brown Secretary

State of Maryland County of Baltimore

On this 11th day of May, A.D. 2021, before the subscriber, a Notary Public of the State of Maryland, duly commissioned and qualified, Robert D. Murray, Vice President and Dawn E. Brown, Secretary of the Companies, to me personally known to be the individuals and officers described in and who executed the preceding instrument, and acknowledged the execution of same, and being by me duly sworn, deposeth and saith, that he/she is the said officer of the Company aforesaid, and that the seals affixed to the preceding instrument are the Corporate Seals of said Companies, and that the said Corporate Seals and the signature as such officer were duly affixed and subscribed to the said instrument by the authority and direction of the said Corporations.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal the day and year first above written.



Constance A. Dunn, Notary Public My Commission Expires: July 9, 2023

Constance a. Dum

Authenticity of this bond can be confirmed at bondvalidator.zurichna.com or 410-559-8790

EXTRACT FROM BY-LAWS OF THE COMPANIES

"Article V, Section 8, Attorneys-in-Fact. The Chief Executive Officer, the President, or any Executive Vice President or Vice President may, by written instrument under the attested corporate seal, appoint attorneys-in-fact with authority to execute bonds, policies, recognizances, stipulations, undertakings, or other like instruments on behalf of the Company, and may authorize any officer or any such attorney-in-fact to affix the corporate seal thereto; and may with or without cause modify of revoke any such appointment or authority at any time."

CERTIFICATE

I, the undersigned, Vice President of the ZURICH AMERICAN INSURANCE COMPANY, the COLONIAL AMERICAN CASUALTY AND SURETY COMPANY, and the FIDELITY AND DEPOSIT COMPANY OF MARYLAND, do hereby certify that the foregoing Power of Attorney is still in full force and effect on the date of this certificate; and I do further certify that Article V, Section 8, of the By-Laws of the Companies is still in force.

This Power of Attorney and Certificate may be signed by facsimile under and by authority of the following resolution of the Board of Directors of the ZURICH AMERICAN INSURANCE COMPANY at a meeting duly called and held on the 15th day of December 1998.

RESOLVED: "That the signature of the President or a Vice President and the attesting signature of a Secretary or an Assistant Secretary and the Seal of the Company may be affixed by facsimile on any Power of Attorney...Any such Power or any certificate thereof bearing such facsimile signature and seal shall be valid and binding on the Company."

This Power of Attorney and Certificate may be signed by facsimile under and by authority of the following resolution of the Board of Directors of the COLONIAL AMERICAN CASUALTY AND SURETY COMPANY at a meeting duly called and held on the 5th day of May, 1994, and the following resolution of the Board of Directors of the FIDELITY AND DEPOSIT COMPANY OF MARYLAND at a meeting duly called and held on the 10th day of May, 1990.

RESOLVED: "That the facsimile or mechanically reproduced seal of the company and facsimile or mechanically reproduced signature of any Vice-President, Secretary, or Assistant Secretary of the Company, whether made heretofore or hereafter, wherever appearing upon a certified copy of any power of attorney issued by the Company, shall be valid and binding upon the Company with the same force and effect as though manually affixed.

IN TESTIMONY WHEREOF, I have hereunto subscribed my name and affixed the corporate seals of the said Companies, this _18th_day of _November_____, _2021.





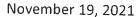


By:

Brian M. Hodges Vice President

TO REPORT A CLAIM WITH REGARD TO A SURETY BOND, PLEASE SUBMIT A COMPLETE DESCRIPTION OF THE CLAIM INCLUDING THE PRINCIPAL ON THE BOND, THE BOND NUMBER, AND YOUR CONTACT INFORMATION TO:

Zurich Surety Claims
1299 Zurich Way
Schaumburg, IL 60196-1056
www.reportsfclaims@zurichna.com
800-626-4577



Village of Hampshire PO Box 457 Hampshire, IL 60140-0457

Dear Madam/Sir,

Please find enclosed the Alcohol Renewal for Love's Travel Stop #763. Also please find a check in the amount of \$1500.00 to cover the fees.

Please send the license/permit and all correspondence to the corporate office address listed below.

Love's Travel Stops & Country Stores, Inc. Attn: Licensing Department PO Box 26210 Oklahoma City, OK 73126

Should you have any questions or require any additional information, please call or email me. I may be reached by telephone at (405) 302-6770 or by email at Rhona.Freeman@Loves.com. You may also contact the Licensing Department at storelicensing@loves.com or 405-463-8891.

Sincerely,

Rhona Freeman

Licensing Coordinator Lead



Village of Hampshire

234 S. State Street, Hampshire, IL 60140

Plant 847-683-2181 • www.hampshireil.org

APPLICATION FOR LIQUOR LICENSE
DATE: November 17,3001
NAME OF BUSINESS: Prod Parager #305 SALES TAX ID: 3038-0730
NAME OF APPLICANT: ROOM PROPERTY LIC
ADDRESS OF BUSINESS: 19081 US HUY 30, Hampshul, I
BUSINESS PHONE NO.: 25 300-903 - CORD-85387-1700
MAILING ADDRESS: 1501 WOOMFALD Rd, Ste 300 S, Schrumburg, I
TO: Local Liquor Control Commission Village of Hampshire, Illinois
Pursuant to the provisions of Chapter IIIV, Alcoholic Liquor Regulations, of the Municipal Code of Hampshire, Illinois, as amended, and pursuant to Chapter 43 of the Illinois Revised Statutes, as amended, the undersigned hereby makes application for an Alcoholic Liquor License as follows:
1. License Class and Annual Fee (check one):
Class A-1 - \$1,500.00 Class A-2 - \$1,250.00 Class B-1 - \$1,500.00 Class B-2 - \$1,500.00 Class C-1 - \$1,500.00 Class C-2 - \$1,500.00 Class C-3 - \$1,750.00 Class C-4 - \$1,500.00 Class C-3 - \$1,750.00 Class C-3 - \$1,750.00 Class C-3 - \$1,750.00 Class C-4 - \$1,500.00 Class C-4 - \$1,500.00 Class C-4 - \$1,500.00 Class C-3 - \$1,750.00 Class C-3 - \$1,750.00 Class C-4 - \$1,500.00 Class C-4 - \$1,500.00 Class C-4 - \$1,500.00 Class C-3 - \$1,750.00 Class C-3 - \$1,500.00 Class C-4 - \$1,500.00 Class C-3 - \$1,750.00 Class C-3 - \$1,500.00 Class C-3 - \$1,750.00 Class C-3 - \$1,750.00 Class C-3 - \$1,750.00
2. License Period:
Commencing on January 1, and ending December 31, or Commencing on and ending December 31,
3. Type of Business Entity (check one):
☐ Individual ☐ Corporation
Partnership

4. The following information must be provided with respect to any and all individual owners, partners, corporate officers, corporate directors, resident managers, and, if a corporation, all persons owning directly or beneficially more than 5% of the corporation stock:

NOTE: Full names must be listed with middle initials. Furthermore, the applicant must notify the Local Liquor Control Commission of change in the partnership, officers, directors, persons holding directly or beneficially more than 5% in interest of the stock or ownership interest, or managers of the establishment within ten (10) days of said change.

ame: Plase See attached list.
RTHDAY:
ME ADDRESS:
RIVERS LICENSE# HOME PHONE#
SINESS STATUS:
RCENTAGE OF STOCK HELD:
me:
RTHDAY:
OME ADDRESS:
RIVERS LICENSE# HOME PHONE#
SINESS STATUS:
RCENTAGE OF STOCK HELD:(If additional space is required, please attach a separate sheet of paper)
Is the applicant a citizen of the United States?
If an Illinois corporation, state date of corporation:
State the character of the applicant's business, and in case of a corporation, the objects for which it was formed.
State the location and physical description of the premises which is to be operated under such license and the nature of the business at such location.
State whether the applicant has ever had a liquor license issued by the Federal government, any State government or any municipality. If answer is in the affirmative, state the name of the licensing unit of government, when and where said of license was issued.

9.	Has the applicant ever had any previous liquor license revoked?
10.	Has the applicant and the designated managers read and do they understand and agree not to violate any of the liquor laws of the United States, the State of Illinois or any of the ordinances of the Village of Hampshire in conducting business?
11.	State whether all individual owners, partners, officers, directors, persons holding more than 5% of the corporate stock have been fingerprinted by the Illinois State Police and, if so the date thereof. Note: This application will remain incomplete and will not be considered until question #11 can be answered in the affirmative.
12.	State the name of the person who will generally be managing the ongoing affairs of this business
	State whether said manager has been fingerprinted by the Illinois State Police and, if so the date
	Note: This application will remain incomplete and will not be
	considered until question #12 can be answered in the
	affirmative.
13.	Has the applicant attached Surety Bond and Certificate of Liability Insurance to this application or already furnished it to the Village?
14.	If the applicant does not own the premises for which the license is sought, does the applicant have a lease for the full period for which the license is to be issued? If the answer is in the affirmative, attach a copy of said lease to the application.
15.	State whether the applicant has ever been convicted of a felony offense under any Federal or State law?
16.	State whether the applicant has ever been convicted of a violation of any Federal or State law concerning the manufacture, possession or sale of alcoholic liquor?
	State whether a Federal Gaming Device Stamp or Federal Wagering Stamp has been issued to the applicant, the premises, or to any corporation in which the applicant holds 5% or more Stock?
	If answer is in the affirmative, has the stamp been issued for any portion or all of the time to be covered by this applicant?
18.	Is the premises within 100 feet of any real property of any church, school, hospital, home for the aged or indigent persons or for veterans, their wives or children, or any military or naval station?
19.	Are the premises for which license is herein applied for a store or other place of business where the majority of customers are minors of school age or where the principal business transacted consists of school books, school supplies, food, lunches or drinks for such minors?

		e that during the license period, any violation of Federal, be referred to the Local Liquor Control Commission and pension or revocation of said license?
	and/or Hampshire Police Department sh premises licensed hereunder to determi	e that members of the Local Liquor Control Commission hall have the authority to enter at any time upon the line whether any State or Village laws and ordinances such time to examine the premises of said licensee in
	shall not constitute property, nor shall it	e that a license shall be purely a personal privilege, and be subject to attachment, garnishment or execution, voluntarily or involuntarily, or subject to being
	acceptability of all entertainment shall be Commission? On the attached addendum for Entertainment to be provided in your established additional entertainment is planned dur be listed and described for, and approve	s B-1 and B-2): Does the applicant understand that the se subject to review by the Local Liquor Control nment, please list and briefly describe, any and all tablishment during the period of this license. (If any ing the period of this license, such entertainment must ad by, the Hampshire Liquor Commission prior to being ertainment forms are available at the Office of the
	SIGNATURE OF APPLICANT (S) CORPORATION SIGNATURES Pres	INDIVIDUAL OR PARTNERSHIP SIGNATURES
/	sec. If I	
	STATE OF	
	The undersigned swears that all statements	s are true and correct.
	Subscribed and sworn to before me this 29 day of November 297	OFFICIAL SEAL AHMED RASOOL NOTARY PUBLIC - STATE OF ILLINOIS MY COMMISSION EXPIRES:10/06/24
	-	Notary Bublic
		Notary Public

EXHIBIT A

ROAD RANGER, L.L.C. 1501 Woodfield Rd. Suite 300S Schaumburg, IL 60173 EIN – 36-4005006

OFFICERS

 Marko Zaro Moraga
 DOB: 11/02/1979
 SS#: 662-31-4602
 TITLE: Manager

 ADDRESS: 104 Governors Way, Hawthorn Woods, IL 60047
 DL: IL Z656-5407-9312

Email - mzaro@roadrangerusa.com Phone: (815) 387–1700 x 346

 Jake W. DeArvil
 DOB: 03/30/1990
 SS#: 319-86-2883
 TITLE: Secretary

 ADDRESS: 415 Roland Avenue, Rockford, IL 61107
 DL: IL D614-4399-0092

Email: jdearvil@roadrangerusa.com Phone: (815) 387-1700 x 370

OWNER

Enex Investments US, Inc. – 1501 Woodfield Road, Suite 300S, Schaumburg, IL 60173

<u>Date of Formation</u>: 07/27/2018 Delaware <u>Ownership %</u> - 100%

EIN: 35-2640590

Letter ID: L0951605680



STATE OF ILLINOIS

LIQUOR CONTROL COMMISSION Governor JB Pritzker

5A-0105946

License Number

IN ACCORDANCE WITH THE LIQUOR CONTROL ACT OF 1934, THIS CERTIFIES THAT:

ROAD RANGER LLC ROAD RANGER L.L.C. 4930 EAST STATE ST ROCKFORD IL 61108-2289

Winnebago

HAS PAID ALL FEES AND IS ISSUED A LICENSE IN THE-FOLLOWING CLASS:

BASSET

10/14/21

Effective:

10/14/21

THIS LICENSE EXPIRES ON:

ISSUE DATE:

07/31/22

THIS LICENSE MUST BE FRAMED AND HUNG IN PLAIN VIEW IN A CONSPICUOUS PLACE ON THE LICENSED PREMISES.

Warehouse: N/A

Sales Tax Acct # 26380730

THIS LICENSE NOT TRANSFERABLE

AS TO PRINCIPAL

P-000102

Return Documents to: Return Documents to.

Ellia Campbell Ut JUN
Lav Title - National Div.
2000 W. Galena Blvd. #200 Aurora, IL 60506



2007K020545

SANDY WEGMAN RECORDER - KANE COUNTY, IL

RECORDED: 2/21/2007 3:50 PM REC FEE: 26,000 RHSPS FEE: 10.00 PAGES: 5

THIS INSTRUMENT WAS PREPARED BY: . Timothy Miedona, Esq. Lowndes, Drosdick, Doster, Kantor & Reed, P.A. 450 South Orange Avenue, Suite 250 Orlando, Florida 32801 (407)843-4600

RECORDING REQUESTED BY AND WHEN RECORDED RETURN TO Road Ranger, L.L.C 4930 East State Steet Rockford, Minois 61108 Attn: Legal Department (818)387-1700

Re: Store No.: 235

Tax ID No.: 01-03-200-014 & 01-02-100-009 (not

listed on commitment)

MEMORANDUM OF LEASE

THIS MEMORANDUM OF LEASE is made as of the 12 day 2007 pursuant to Section 3.1 of a certain LAND AND BUILDING LEASE AGREEMENT dated February 12, 2007 (the "Lease"), between the parties identified below.

This Memorandum of Lease is made and entered into by and between NATIONAL RETAIL PROPERTIES, LP, a Delaware limited partnership, ("Landlord") and ROAD RANGER, L.L.C., an Illinois limited liability company ("Tenant") who agree as follows:

Terms and Premises. Pursuant to the Lease entered into by and between Landlord and Tenant, Landlord leases to Tenant and Tenant leases from Landlord that certain real property, together with all the improvements thereon and appurtenances thereunto belonging (the 'Premises'), which legal description is attached hereto and incorporated herein as Exhibit "A," commonly known as: ROAD RANGER STORE NO. 235

19 North 681 US Highway 20, Hampshire, Illinois

Client#: 1542330

 $oldsymbol{ACORD}_{ ilde{\sim}}$

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 10/28/2021

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer any rights to the certificate holder in lieu of such endorsement(s).

PRODUCER	CONTACT NAME:					
USI Insurance Services, LLC	PHONE (A/C, No, Ext): 800 969-2399 FAX (A/C, No):					
13075 Manchester Road, Suite 325	E-MAIL ADDRESS:					
Saint Louis, MO 63131	INSURER(S) AFFORDING COVERAGE	NAIC#				
800 969-2399	INSURER A: Cincinnati Specialty Underwriters Ins	13037				
INSURED	INSURER B : Bridgeway Insurance Company	12489				
Road Ranger, LLC	INSURER C : Homesite Insurance Company	17221				
1501 Woodfield Road, Suite 300 S	INSURER D : PinnaclePoint Insurance Company	15137				
Schaumburg, IL 60173	INSURER E: The Cincinnati Insurance Company	10677				
	INSURER F: Lexington Insurance Company	19437				
COVERACES CERTIFICATE NUMBER:	REVISION NUMBER:					

CERTIFICATE NUMBER: COVERAGES THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

ISR TR	TYPE OF INSURANCE	ADDLS	SUBR	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	s
A	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR			CSU0142124	10/28/2021	10/28/2022	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence)	\$1,000,000 \$100,000
t	X BI/PD Ded:5,000		ĺ				MED EXP (Any one person)	\$
Ī							PERSONAL & ADV INJURY	\$1,000,000
t	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$2,000,000
Ī	POLICY PRO- X LOC						PRODUCTS - COMP/OP AGG	\$2,000,000
- 1	OTHER:							\$
=	AUTOMOBILE LIABILITY			EPP0364214	10/28/2021	10/28/2022	COMBINED SINGLE LIMIT (Ea accident)	s1,000,000
Ī	X ANY AUTO						BODILY INJURY (Per person)	\$
ı	OWNED SCHEDULED AUTOS		1				BODILY INJURY (Per accident)	\$
Ì	X HIRED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	\$
-1								\$
3	UMBRELLA LIAB X OCCUR			8EA7XL000210400	10/28/2021	10/28/2022	EACH OCCURRENCE	s2,000,000
:	X EXCESS LIAB CLAIMS-MADE			CXS00044300	10/28/2021	10/28/2022	AGGREGATE	s2,000,000
1	DED X RETENTION \$10000			021908075				\$
	WORKERS COMPENSATION			WCP7002688	10/28/2021	10/28/2022	X PER OTH-	
	ANY PROPRIETOR/PARTNER/EXECUTIVE	MIZA					E.L. EACH ACCIDENT	\$1,000,000
	OFFICER/MEMBER EXCLUDED? (Mandatory in NH)		N/A				E.L. DISEASE - EA EMPLOYEE	\$1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$1,000,000
4	Liquor Liab			CSU0142124	10/28/2021	10/28/2022	\$1,000,000 - occ \$1,000,000 - agg	

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Location: Store 235, 19 N 681 US Hwy 20, Hampshire, IL 60140

Certificate Holder is included as Additional Insured with respect to General Liability, if required by written contract.

** Excess Liability Information **

(See Attached Descriptions)

CERTIFICATE HOLDER	CANCELLATION
Village of Hampshire 234 S State Street	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
Hampshire, IL 60140	AUTHORIZED REPRESENTATIVE
91	Rlow
14	@ 4000 2015 ACODD COPPORATION All rights reserved

EXHIBIT ROAD RANGER, L.L.C. LIQUOR LICENSE APPLICATIONS

	LICENSES ISSUED TO ROAD RANGER, L.L.C. Mon							
Store	Street Address	City	ST	County	<u>Zip</u>	<u>Issued</u>		
118	3752 Camp Butler Road	Springfield	IL	Sangamon	62707	Dec-06		
132	4910 North Market Street	Champaign	IL	Champaign	61821	Jun-08		
136	2762 County Highway N	Cottage Grove	WI	Dane	53527	Nov-08		
139	1112 East Southline Drive	Tuscola	IL	Douglas	61953	Dec-07		
140	2705 - 12th Street	Mendota	IL	La Salle	61342	Apr-07		
144	100 Plaza Drive	Elk Run Heights	IA	Black Hawk	50707	Nov-07		
145	205 North Highway Drive	Fenton	MO	St Louis	63026	Dec-06		
153	1101 N 7th Street	Rochelle	IL	Ogle	61068	Feb-07		
157	905 Hen House Road	Okawville	ΙL	Washington	62271	Aug-07		
181	500 Toronto Road	Springfield	IL	Sangamon	62711	Dec-11		
185	501 South Main Street	McLean	IL	McLean	61754	Apr-13		
186	1311 North Carolyn Drive	Minonk	IL	Woodford	61760	Jun-12		
203	4980 South Main Street	Rockford	IL	Winnebago	61102	May-07		
205	6070 Gardner Street	South Beloit	IL	Winnebago	61080	Jun-08		
206	902 North Elida Street	Winnebago	IL	Winnebago	61088	Feb-09		
209	102 East Woody Drive	Oakdale	WI	Monroe	54660	Jun-08		
210	890 E Hwy 38	Rochelle	ΙL	Ogle	61068	Oct-18		
211	7500 E Riverside Blvd	Loves Park	IL	Winnebago	61111	Apr-07		
225	2835 North Main Street	Princeton	1L	Bureau	61356	Apr-08		
235	19 North 681 US Highway	Hampshire	IL	Kane	60140	Dec-07		
236	1946 A Energy Drive	East Troy	WI	Walworth	53120	Jun-08		
242	22345 Highway 28	St Robert	MO	Pulaski	65584	May-07		
263	3041 N IL Route 71	Ottawa	IL	La Salle	61350	Dec-11		
265	1801 South Galena Ave	Dixon	IL	Lee	61021	Sep-11		
266	700 King Road	New Berlin	IL	Sangamon	62670	Dec-12		
267	10602 South Cage Blvd	Pharr	TX	Hidalgo	78577	Sep-14		
268	1776 South Court Street	Grayville	IL	White	62844	Dec-14		
269	2003 Illinois Highway 1	Marshall	IL	Clark	62441	Dec-14		
270	9977 North Interstate 35	Moore	TX	Frio	78057	Mar-15		
271	10490 W Interstate Hwy 20	Odessa	TX	Ector	79763	May-15		
272	45 East Texas State Hwy 44	Encinal	TX	La Salle	78019	Dec-15		
273	18337 Templeton Avenue	Combes	TX	Cameron	78535	Dec-15		
275	601 Highway 277 North	Sonora	TX	Sutton	76950	Mar-16		
276	6615 N Interstate Hwy 35	Lacy Lakeview	TX	McLennan	76705	Oct-16		
277	907 N McCoy Blvd	New Boston	TX	Bowie	75570	Jan-20		
278	2202 N Main St	Brinkley	AR	Monroe	72021	Jun-20		
279	1701 IL Route 148	Marion	IL	Williamson	62959	Oct-20		
280	2300 TX 464 Loop Road	Monahans	TX	Ward	79756	Aug-21		
as of:	29-Nov-21							



Western Surety Company

CONTINUATION CERTIFICATE

Western Surety Company hereby continues in force Bond No. 69614427 briefly
described as LIQUOR VILLAGE OF HAMPSHIRE
for ROAD RANGER, L.L.C.
, as Principal,
in the sum of \$ ONE THOUSAND FIVE HUNDRED AND NO/100 Dollars, for the term beginning
December 31 , 2020 , and ending December 31 , 2021 , subject to all
the covenants and conditions of the original bond referred to above.
This continuation is issued upon the express condition that the liability of Western Surety Company
under said Bond and this and all continuations thereof shall not be cumulative and shall in no event exceed
the total sum above written.
Dated this 12th day of November, 2020.
WESTERN SURETY COMPANY By T. Brufat, Vice President

THIS "Continuation Certificate" MUST BE FILED WITH THE ABOVE BOND.

COMPANY ONE OF A HERICA'S OLDEST BONDING COMPANY . OHE OF A HERICA'S OLDEST BONDING COMPANIES 🖰

Form 90-A-8-2012

Western Surety Company

POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS:

Coverage. Form F1975-1-2016

That WESTERN SURETY COMPANY, a corporation organized and existing under the laws of the State of South Dakota, and authorized and licensed to do business in the States of Alabama, Alaska, Arizona, Arkansas, California, Colorado, Connecticut, Delaware, District of Columbia, Florida, Georgia, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Michigan, Minnesota, Mississippi, Missouri, Montana, Nebraska, Nevada, New Hampshire, New Jersey, New Mexico, New York, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Utah, Vermont, Virginia, Washington, West Virginia, Wisconsin, Wyoming, and the United States of America, does hereby make, constitute and appoint

Wisconsin, Wy	oming, and the	United States of	America, does h	ereby make,	constitute and app	oint	
	Paul T. B	ruflat	of		Sioux Falls		
State of	South Da	kota	, its regularly	elected	Vice President		
as Attorney-in-	Fact, with full p	ower and author	ity hereby confe	erred upon hi	m to sign, execute	, acknowledge ar	nd deliver for
and on its beha	alf as Surety an	d as its act and d	eed, the followin	g bond:			
	TIOD TITTE	E OF HAMBOUT	מם:				
OneLLU	OOK ATTPAG	UF HAMPSHI	.KE				
bond with bond	d number6	9614427					
for ROAD R	ANGER, L.L	.C.					
as Principal in	the penalty am	ount not to excee	d:\$1,500.00		•		
Company duly a Section 7. Al name of the Con Board of Directo Attorneys-in-Fac seal is not nece signature of any	dopted and now in the present of the	n force, to-wit: undertakings, Powe sident, Secretary, a e. The President, s shall have authority dity of any bonds, p the corporate seal n	ers of Attorney, or ny Assistant Secre any Vice Presiden to issue bonds, p policies, undertakin nay be printed by f	other obligation tary, Treasurer it, Secretary, a policies, or und igs, Powers of acsimile.	t copy of Section 7 as of the corporation , or any Vice Preside ny Assistant Secreta ertakings in the nam Attorney or other of	shall be executed in nt, or by such other iry, or the Treasure e of the Company. oligations of the cor	n the corporate officers as the or may appoint The corporate poration. The
In Witness Vice Presiden	Whereof, the	said WESTERN ith the corporate	SURETY CON seal affixed this	MPANY has	caused these pre _ day of <u>Nover</u>	sents to be exe	2020 .
ATTEST	J. ne	lson	,	W E 5	TERN SUF	Buffet	PANY
		[*] L. Nelson, Assista	nt Secretary			Paul T. Bruflat,	
STATE OF SC	OUTH DAKOTA	\					
COUNTY OF M	MINNEHAHA	Ss					The state of the s
	Paul T. I	ay of <u>Novembe</u> Bruflat	ani	d	before me, a Notai L. Nelson	y Public, persona	illy appeared
who, being by	me duly sworn,	acknowledged th	at they signed th	ne above Pow	rer of Attorney as	Vice President	
and Assistant	Secretary, resp	ectively, of the s	aid WESTERIN	SURETY CO	MPANY, and ackn	owledged said in	istrument to
be the voluntar	ry act and deed .%%%%%%%%%%	of said Corporation	on.				
Š	J. MOH	R 🕺			200	1	
J. SEA	NOTARY PU SOUTH DA	KOTA CONT		2 	4 11/6	mr_	Notary Public
+444	, 62 63 63 63 63 63 63 63 63		My Commission				• • • • •
To validate	bond auther	ticity, go to <u>v</u>	ww.cnasuret	y.com > 0	wner/Obligee S	ervices > Val	laate Bond

BASSET Card



SALLY HANSEN PO BOX 88 UNION IL 60180 October 15, 2019

Letter ID: L0353908304

License No.:

5A-0105946

Expiration Date:

9/23/2022

License Type:

Basset Card

Your "Student ID number" is: 20190923001

Your "Trainer's ID number" is: 5A-0105946

Your BASSET Card is located BELOW

DO NOT throw away this letter as you will need your "Student ID number" directly above to re-print your card.

IMPORTANT:

To re-print your card, visit the Illinois Liquor Control Commission website at <u>LCC.illinois.gov</u> (click on the RESOURCES tab to access the "BASSET Card Lookup" page).

ILLINOIS LIQUOR CONTROL COMMISSION

100 W. Randolph Street, Suite 7-801 - Chicago, IL 60601 BEVERAGE ALCOHOL SELLERS AND SERVERS EDUCATION AND TRAINING [BASSET] CARD

Date of Certification: 9/23/2019 Expires: 9/23/2022
Trainer's IL Liquor License Number: 5A-0105946

SALLY HANSEN

PO BOX 88

UNION IL 60180

Card is not transferrable - OFF-PREMISE ONLY

BASSET Card

JEFF RAPP

5576 REIDENBACK RD

SOUTH BELOIT IL 61080



October 15, 2019



Letter ID: L0219690576

License No.:

5A-0105946

Expiration Date:

9/27/2022

License Type:

Basset Card

Your "Student ID number" is: 20190927003

Your "Trainer's ID number" is: 5A-0105946

Your BASSET Card is located BELOW

DO NOT throw away this letter as you will need your "Student ID number" directly above to re-print your card.

IMPORTANT:

To re-print your card, visit the Illinois Liquor Control Commission website at ILCC.illinois.gov (click on the RESOURCES tab to access the "BASSET Card Lookup" page).

ILLINOIS LIQUOR CONTROL COMMISSION

100 W. Randolph Street, Suite 7-801 - Chicago, IL 60601 BEVERAGE ALCOHOL SELLERS AND SERVERS **EDUCATION AND TRAINING [BASSET] CARD**

Date of Certification: 9/27/2019 Expires: 9/27/2022 Trainer's IL Liquor License Number: 5A-0105946

JEFF RAPP

5576 REIDENBACK RD

SOUTH BELOIT IL 61080

Card is not transferrable - OFF-PREMISE ONLY

BASSET Card



STEVEN ROTHMAN 274 WILKINS DR. DES PLAINES IL 60016 October 15, 2019

Letter ID: L1696085584

License No.: Expiration Date:

5A-0105946

License Type:

9/22/2022 Basset Card

Your "Student ID number" is: 20190922002

Your "Trainer's ID number" is: 5A-0105946

Your BASSET Card is located BELOW

DO NOT throw away this letter as you will need your "Student ID number" directly above to re-print your card.

IMPORTANT:

To re-print your card, visit the Illinois Liquor Control Commission website at ILCC.illinois.gov (click on the RESOURCES tab to access the "BASSET Card Lookup" page).

ILLINOIS LIQUOR CONTROL COMMISSION

100 W. Randolph Street, Suite 7-801 - Chicago, IL 60601 BEVERAGE ALCOHOL SELLERS AND SERVERS EDUCATION AND TRAINING [BASSET] CARD

Date of Certification: 9/22/2019 Expires: 9/22/2022 Trainer's IL Liquor License Number: 5A-0105946

STEVEN ROTHMAN

274 WILKINS DR.

DES PLAINES IL 60016

Card is not transferrable - OFF-PREMISE ONLY

BASSET Card



NADJA FELL PO BOX 478 HAMPSHIRE IL 60110 October 15, 2019

Letter ID: L1427650128

License No.:

5A-0105946

Expiration Date:

9/26/2022

License Type:

Basset Card

Your "Student ID number" is: 20190926001

Your "Trainer's ID number" is: 5A-0105946

Your BASSET Card is located BELOW

DO NOT throw away this letter as you will need your "Student ID number" directly above to re-print your card.

IMPORTANT:

To re-print your card, visit the Illinois Liquor Control Commission website at <u>ILCC.illinois.gov</u> (click on the RESOURCES tab to access the "BASSET Card Lookup" page).

ILLINOIS LIQUOR CONTROL COMMISSION

100 W. Randolph Street, Suite 7-801 - Chicago, IL 60601 BEVERAGE ALCOHOL SELLERS AND SERVERS EDUCATION AND TRAINING [BASSET] CARD

Date of Certification: 9/26/2019 Expires: 9/26/2022 Trainer's IL Liguor License Number: 5A-0105946

NADJA FELL

PO BOX 478

HAMPSHIRE IL 60110

Card is not transferrable - OFF-PREMISE ONLY



Village of Hampshire

234 S. State Street, Hampshire, IL 60140 Phone: 847-683-2181 • www.hampshireil.org

APPLICATION FOR LIQUOR LICENSE

DATE:					
NAME OF BUSINESS: TA Operating LLC d/b/a TravelCenters of America ALES TAX ID: 2494-0712					
NAME OF APPLICANT: Patrick Hyland					
ADDRESS OF BUSINESS: 19 N. 430 US Highway 20, Hampshire, IL					
BUSINESS PHONE NO.: 847-683-4558					
MAILING ADDRESS: 255 Washington Street, Suite 100, Newton, MA 02458					
TO: Local Liquor Control Commission Village of Hampshire, Illinois					
Pursuant to the provisions of Chapter IIIV, Alcoholic Liquor Regulations, of the Municipal Code of Hampshire, Illinois, as amended, and pursuant to Chapter 43 of the Illinois Revised Statutes, as amended, the undersigned hereby makes application for an Alcoholic Liquor License as follows:					
1. License Class and Annual Fee (check one):					
Class A-1 - \$1,500.00 Class C-4 - \$1,500.00 Class D - \$1,750.00					
Class B-1 - \$1,500.00 Class E - \$1,750.00					
X Class B-2 - \$1,500.00 Class F - \$1,500.00					
Class C-1 - \$1,500.00 Class G - \$ 75.00					
Class C-2 - \$1,500.00 Class H- \$ 500.00					
Class C-3 - \$1,750.00 Class I- \$ 500.00					
2. License Period:					
Commencing on January 1, 2022 and ending December 31, 2021 or Commencing on and ending December 31,					
3. Type of Business Entity (check one):					
Individual Corporation					
Partnership X Other (specify) Limited Liability Company					

4. The following information must be provided with respect to any and all individual owners, partners, corporate officers, corporate directors, resident managers, and, if a corporation, all persons owning directly or beneficially more than 5% of the corporation stock:

NOTE: Full names must be listed with middle initials. Furthermore, the applicant must notify the Local Liquor Control Commission of change in the partnership, officers, directors, persons holding directly or beneficially more than 5% in interest of the stock or ownership interest, or managers of the establishment within ten (10) days of said change.

Name: Please see attached rider.				
BIRTHDAY:				
HOME ADDRESS:				
	HOME PHONE#			
BUSINESS STATUS:				
PERCENTAGE OF STOCK HELD:				
Name:				
BIRTHDAY:				
HOME ADDRESS:				
	HOME PHONE#			
BUSINESS STATUS:				
PERCENTAGE OF STOCK HELD:	ease attach a separate sheet of paper)			
5. Is the applicant a citizen of the United States If naturalized, state date and place of natura If an Illinois corporation, state date of corpor	s?N/A alization:			
If a foreign corporation, state date qualified t	to transact business in Illinois pursuant to the Illinois			
6. State the character of the applicant's busines which it was formed. TA Operating LLC is a	multi-state retail licensee engaged in			
travel hospitality. 7. State the location and physical description of the premises which is to be operated under such license and the nature of the business at such location.				
19 N 430 US Highway 20, Hampshire, IL 601	40 - Travel Center			
State government or any municipality				
If answer is in the affirmative, state the name where said of license was issued. <u>Please see</u>	of the licensing unit of government, when and			
- Fields See See	WASHER TUST.			

9.	Has the applicant ever had any previous liquor license revoked? No If answer is in the affirmative, state the date and reason for such revocation.
10.	Has the applicant and the designated managers read and do they understand and agree not to violate any of the liquor laws of the United States, the State of Illinois or any of the ordinances of the Village of Hampshire in conducting business? Yes
11.	State whether all individual owners, partners, officers, directors, persons holding more than 5% of the corporate stock have been fingerprinted by the Illinois State Police and, if so the date thereof. Local applicant was fingerprinted 11/16/21 Note: This application will remain incomplete and will not be considered until question #11 can be answered in the affirmative.
12.	State the name of the person who will generally be managing the ongoing affairs of this business at these premises. Patrick Hyland State whether said manager has been fingerprinted by the Illinois State Police and, if so the date
	Note: This application will remain incomplete and will not be considered until question #12 can be answered in the affirmative.
13.	Has the applicant attached Surety Bond and Certificate of Liability Insurance to this application or already furnished it to the Village? Yes
	If the applicant does not own the premises for which the license is sought, does the applicant have a lease for the full period for which the license is to be issued? $\frac{Yes}{I}$ If the answer is in the affirmative, attach a copy of said lease to the application.
15.	State whether the applicant has ever been convicted of a felony offense under any Federal or State law? No
16.	State whether the applicant has ever been convicted of a violation of any Federal or State law concerning the manufacture, possession or sale of alcoholic liquor? Yes - please see attached rider.
	State whether a Federal Gaming Device Stamp or Federal Wagering Stamp has been issued to the applicant, the premises, or to any corporation in which the applicant holds 5% or more Stock?
	If answer is in the affirmative, has the stamp been issued for any portion or all of the time to be covered by this applicant?
18.	Is the premises within 100 feet of any real property of any church, school, hospital, home for the aged or indigent persons or for veterans, their wives or children, or any military or naval station?
19.	Are the premises for which license is herein applied for a store or other place of business where the majority of customers are minors of school age or where the principal business transacted consists of school books, school supplies, food, lunches or drinks for such minors? N_0

20 December - multi-control of the state of	and distinguished because with the second second second
- · · · · · · · · · · · · · · · · · · ·	at during the license period, any violation of Federal, referred to the Local Liquor Control Commission and sion or revocation of said license? Yes
and/or Hampshire Police Department shall h premises licensed hereunder to determine v	at members of the Local Liquor Control Commission have the authority to enter at any time upon the whether any State or Village laws and ordinances time to examine the premises of said licensee in
	at a license shall be purely a personal privilege, and subject to attachment, garnishment or execution, ntarily or involuntarily, or subject to being
23. (If applying for other classes except Class B-1 acceptability of all entertainment shall be sul Commission? N/A	and B-2): Does the applicant understand that the bject to review by the Local Liquor Control
On the attached addendum for Entertainmer entertainment to be provided in your establis additional entertainment is planned during the	shment during the period of this license. (If any ne period of this license, such entertainment must the Hampshire Liquor Commission prior to being
SIGNATURE OF APPLICANT (S) CORPORATION SIGNATURES TA Operating LLC by:	INDIVIDUAL OR PARTNERSHIP SIGNATURES
Mark R. Young, Executive Vice President, General Counse	1
Commonwealth of	
STATE OF Massachusetts)	
County of Middlesex)	
	TA Operating LCC By:
CORPORATE SEAL	Mark R. Young Executive Vice President & General Counsel
Subscribed and sworn to before me this day o NOTARY PUBLIC Commonwealth of Massachusetts My Commission Expires On 07/15/2027	Dema a. Mc
	i i i i i i i i i i i i i i i i i i i

CONTINUATION CERTIFICATE

The <u>RLI Insurance Company</u> (hereinafter called the Surety) hereby continues in force its Bond No. <u>CMS0277196</u> in the sum of <u>One Thousand Five Hundred Dollars and 00/100</u> (\$1,500.00) Dollars, on behalf of <u>TA Operating LLC dba TravelCenters of America</u> in favor of <u>Village of Hampshire</u>, <u>Illinois</u> subject to all the conditions and terms thereof through <u>December 31</u>, 2022 at location of risk.

This Continuation is executed upon the express condition that the Surety's liability shall not be cumulative and shall be limited at all times by the amount of the penalty stated in the bond.

IN WITNESS WHEREOF, the Surety has caused this instrument to be signed by its duly authorized Attorney-in-Fact and its corporate seal to be hereto affixed this 8th day of November, 2021.

RLI Insurance Company
Surety

By: Nant Kinnett

Frank Kinnett, Attorney-in-Fact (IL License #1727357)

POWER OF ATTORNEY

RLI Insurance Company Contractors Bonding and Insurance Company

9025 N. Lindbergh Dr. Peoria, IL 61615 Phone: 800-645-2402

Know All Men by These Presents:

That this Power of Attorney is not valid or in effect unless attached to the bond which it authorizes executed, but may be detached by the approving officer if desired.

That RLI Insurance Company and/or Contractors Bonding and Intogether, the "Company") do hereby make, constitute and appoint:	surance Company, each an Illinois corporation, (separately and
John E. Genet, Jarrod Hitt, Frank Kinnett, jointly or severally	
in the City of	and deliver for and on its behalf as Surety, in general, any and all
The acknowledgment and execution of such bond by the said Attorney in I executed and acknowledged by the regularly elected officers of the Compa	
RLI Insurance Company and/or Contractors Bonding and Insuran following is a true and exact copy of a Resolution adopted by the Board of	
"All bonds, policies, undertakings, Powers of Attorney or other obligation the Company by the President, Secretary, any Assistant Secretary, Treasure of Directors may authorize. The President, any Vice President, Sec Attorneys in Fact or Agents who shall have authority to issue bonds, policies are is not necessary for the validity of any bonds, policies, undertakings signature of any such officer and the corporate seal may be printed by fact	urer, or any Vice President, or by such other officers as the Board retary, any Assistant Secretary, or the Treasurer may appoint icies or undertakings in the name of the Company. The corporate, Powers of Attorney or other obligations of the corporation. The
IN WITNESS WHEREOF, the RLI Insurance Company and/or Cont caused these presents to be executed by its respective Vice Presidents ANO Management of the Company and/or Control Cont	RLI Insurance Company Contractors Bonding and Insurance Company
State of Illinois SSS	By: Vice President Vice President
County of Peoria	CERTIFICATE
On this <u>2nd</u> day of <u>June</u> , <u>2020</u> , before me, a Notary Public, personally appeared <u>Barton W. Davis</u> , who being by me duly sworn, acknowledged that he signed the above Power of Attorney as the aforesaid officer of the RLI Insurance Company and/or Contractors Bonding and Insurance Company and acknowledged said instrument to be the voluntary act and deed of said corporation.	I, the undersigned officer of RLI Insurance Company and/or Contractors Bonding and Insurance Company, do hereby certify that the attached Power of Attorney is in full force and effect and is irrevocable; and furthermore, that the Resolution of the Company as set forth in the Power of Attorney, is now in force. In testimony whereof, I have hereunto set my hand and the seal of the RLI Insurance Company and/or Contractors Bonding and Insurance Company this
Catherine D. Glover CATHERINE D. GLOVER OFFICIAL SEAL Notary Public	By: Jeffrey Drick Corporate Secretary

1054448020212

BASSET Handler Training & Food Handler

This Certificate of Completion is to Certify that

PATRICK HYLAND

has met all training requirements and successfully completed the following course and/or exam

Illinois Basset Alcohol Training

Completion Date: 08/27/2021

Expiration Date 08/26/2024

uniess officialise manifated by your local jurise don

State Student ID 402397

Course/Exam Provider Number: 5A-0079696

Diverses Learning Inc. d/b/a BASSET permit com and SureSell Basset is approved by the Illinois Liquor Control Commission, (ILCC) Your training information has been submitted to the Illinois Liquor Control Commission. This is a temporary contribate and your official BASSET certification card will be

mailed to you directly from them

Authorized Signature

Diversys Learning, Inc 1101 Arrow Point Drive, Suite 302 Cedar Park, TX 78613



TR Elsin \$0044 19 N 430 US Highway 70 Hampsbire D. 60140 847-683-4650

MARKETT # 41864001 Tial Nov 16, 2021 11 52

Catherine Donaldson

Register \$41

Pay Dut # 41864001 / ORTHUR

ALCHARIT & SUB- P/

Fire Burnet Hane 1990 RdM17

RECEIVED.

Lash

Signature

Store Manager: 847-683-4550

flease come assint Your feedback nations feli us about woor visit for a chance to won a \$250 still card at wise tafeedback con-

VILLAGE OF HAMPSHIRE 234 S. State Street Hampshire, Illinois



RECEIPT FOR FINGERPRINTING

DATER	ECEIVED: 11-16-21
Receive	d from: PATRICIC HILAND 720 Pochet LAZE SCHALMALLE IL 60193 ACC.
Paid:	PATRICIC HILAND 720 Pochet LAZE SCHAUMBURG TU 60193 NOV 16 2021 Check No.: Village of Hampshire
	By: Sul R. Vasquez Verk
	RECEIPT FOR NOTICE
Date:	11/16/21 Signature
	Please call the Hampshire Police Department to make an appointment Hampshire Police Dept.: 215 Industrial Drive Unit D Phone # 847-683-2240
	Copy of this receipt must be taken to the police department before fingerprinting

HUSCHBLACKWELL

Martha Mitchell Paralegal 190 Carondelet Plaza, Suite 600 St. Louis, MO 63105 Direct: 3143456339

Fax: 3144801505

martha.mitchell@huschblackwell.com

November 17, 2021



Via Federal Express

Ms. Linda Vasquez Village Clerk Village of Hampshire 234 S. State Street Hampshire, IL 60140

Re: TA Operating LLC d/b/a TravelCenters of America

2022 Renewal Application for Alcoholic Liquor License

Dear Ms. Vasquez:

We represent TA Operating LLC ("TAO") in its alcoholic beverage regulatory matters. Enclosed with this letter please find:

- 1. Executed License Renewal application for alcoholic liquor and responsive rider for questions 8 and 16.
- 2. A rider of TAO's member, officers and directors. The rider contains their personal information and has been marked confidential. We kindly request that the Village of Hampshire maintain it as such.
- 3. The original Surety Bond Continuance Certificate for the above license.
- 4. The Certificate of Insurance for 2022 will be sent to you upon receipt.
- 5. A check made payable to the Village of Hampshire in the amount of \$1500.00 for the applicable Class B-2 fee.

Please note that the previous reported manager John Beuckens has been replaced by a new manager, Patrick Hyland. Enclosed is a copy of the paid receipt for Mr. Hyland's background check and fingerprint processing along with a copy of his BASSET certificate.

After your review of our license renewal documents, kindly forward a copy of the new license via email to Martha.Mitchell@huschblackwell.com.

Please do not hesitate to contact the undersigned at (314) 345-6339 or at the above email address should you have any questions or require additional information.

HUSCHBLACKWELL

Thank you for your kind attention to this matter.

Very truly yours,

Martha Mitchell

Paralegal

Enclosures

HB: 4841-9274-1586 Husch Blackwell LLP



EMBRACE OPPORTUNITY HONOR TRADITION

Village of Hampshire 234 S. State Street, Hampshire, IL 60140 Phone: 847-683-2181 • www.hampshireil.org

APPLICATION FOR LIQUOR LICENSE

DATE:	11/27/21					
NAME OF BUSINESS: CJMS, INC. al Hatissand Sun Wines spirite SALES TAX ID: 3939-8439						
NAME OF APPLICANT: Mukesh C PATEL						
ADDRESS O	ADDRESS OF BUSINESS: 107 W. OAK Knoll Dr. Hampshire, IL. 60140					
BUSINESS P	HONE NO.: 847-683	-7691				
MAILING AL	DDRESS: SAME AS	ABOVE				
	quor Control Commission of Hampshire, Illinois					
Pursuant to the provisions of Chapter IIIV, Alcoholic Liquor Regulations, of the Municipal Code of Hampshire, Illinois, as amended, and pursuant to Chapter 43 of the Illinois Revised Statutes, as amended, the undersigned hereby makes application for an Alcoholic Liquor License as follows:						
V	Class and Annual Fee (check one	<i>j</i> ·				
	Class A-1 - \$1,500.00	Class C-4 - \$1,500.00				
	Class A-2 - \$1,250.00 Class B-1 - \$1,500.00	Class D - \$1,750.00 Class E - \$1,750.00				
	Class B-2 - \$1,500.00	Class F - \$1,500.00				
***************************************	Class C-1 - \$1,500.00	Class G - \$ 75.00				
	Class C-2 - \$1,500.00	Class H- \$ 500.00				
***************************************	Class C-3 - \$1,750.00	Class I- \$ 500.00				
2. License P	eriod:					
Commencing on January 1, 2022 and ending December 31, 2022 or Commencing on and ending December 31,						
	usiness Entity (check one):					
	Individual	Corporation				
	Partnership	Other (specify)				

4. The following information must be provided with respect to any and all individual owners, partners, corporate officers, corporate directors, resident managers, and, if a corporation, all persons owning directly or beneficially more than 5% of the corporation stock:

NOTE: Full names must be listed with middle initials. Furthermore, the applicant must notify the Local Liquor Control Commission of change in the partnership, officers, directors, persons holding directly or beneficially more than 5% in interest of the stock or ownership interest, or managers of the establishment within ten (10) days of said change.

Name: Mukesh C VATEL
BIRTHDAY: 1/18/1968
HOME ADDRESS: 2406 King James AVE. ST. CHARLES, IL. 60174
DRIVERS LICENSE# P340-5436-8018 HOME PHONE# 630-587-0173
BUSINESS STATUS: CWMCorb
PERCENTAGE OF STOCK HELD: 70%
Name: BHAVINI Parekh
BIRTHDAY: 7/1/1977
HOME ADDRESS: 287 SONDRA Dr. Elgin, IL. 60124
DRIVERS LICENSE# PG20-0717-7787 HOME PHONE# 847-612-1000
BUSINESS STATUS: CURRENT
PERCENTAGE OF STOCK HELD: 30 %
(If additional space is required, please attach a separate sheet of paper)
5. Is the applicant a citizen of the United States?
If naturalized, state date and place of naturalization: _ Chicago - 1986
If an Illinois corporation, state date of corporation:
If a foreign corporation, state date qualified to transact business in Illinois pursuant to the Illinois
Business Corporation Act. N/A
6. State the character of the applicant's business, and in case of a corporation, the objects for
which it was formed. RETAIL RETAIL SALE of Wire & Spirits
7. State the location and physical description of the premises which is to be operated under such
license and the nature of the business at such location. 107 W. OAK KNOLL Dr.
HAMPSHIRE, IL. 60140
8. State whether the applicant has ever had a liquor license issued by the Federal government, any
State government or any municipality
where said of license was issued. STATE OF Illimis July 2021

9.	Has the applicant ever had any previous liquor license revoked? No
	If answer is in the affirmative, state the date and reason for such revocation.
10.	Has the applicant and the designated managers read and do they understand and agree not to violate any of the liquor laws of the United States, the State of Illinois or any of the ordinances of the Village of Hampshire in conducting business?
11.	State whether all individual owners, partners, officers, directors, persons holding more than 5% of the corporate stock have been fingerprinted by the Illinois State Police and, if so the date thereof. Decados, Nov 2009, Sept 2011, May2020
	Note: This application will remain incomplete and will not be considered until question #11 can be answered in the affirmative.
12.	State the name of the person who will generally be managing the ongoing affairs of this business at these premisesMukesh PATEL
	State whether said manager has been fingerprinted by the Illinois State Police and, if so the date thereof. Mes 2009, Seet 2011
	Note: This application will remain incomplete and will not be considered until question #12 can be answered in the affirmative.
13.	Has the applicant attached Surety Bond and Certificate of Liability Insurance to this application or already furnished it to the Village?
	If the applicant does not own the premises for which the license is sought, does the applicant have a lease for the full period for which the license is to be issued? Yes (same copy on file f the answer is in the affirmative, attach a copy of said lease to the application.
	State whether the applicant has ever been convicted of a felony offense under any Federal or State law?No
	State whether the applicant has ever been convicted of a violation of any Federal or State law concerning the manufacture, possession or sale of alcoholic liquor?
t	State whether a Federal Gaming Device Stamp or Federal Wagering Stamp has been issued to he applicant, the premises, or to any corporation in which the applicant holds 5% or more stock?
	f answer is in the affirmative, has the stamp been issued for any portion or all of the time to be covered by this applicant?
	s the premises within 100 feet of any real property of any church, school, hospital, home for the aged or indigent persons or for veterans, their wives or children, or any military or naval station? $N_{\mathfrak{Q}}$
ţ	Are the premises for which license is herein applied for a store or other place of business where the majority of customers are minors of school age or where the principal business transacted consists of school books, school supplies, food, lunches or drinks for such minors? N_0

20. Does the applicant understand and agree that during the license period, any violation of Federal, State or Village laws and ordinances will be referred to the Local Liquor Control Commission and that such violation may result in the suspension or revocation of said license?
21. Does the applicant understand and agree that members of the Local Liquor Control Commission and/or Hampshire Police Department shall have the authority to enter at any time upon the premises licensed hereunder to determine whether any State or Village laws and ordinances have been or are being violated, and at such time to examine the premises of said licensee in connection therewith?
22. Does the applicant understand and agree that a license shall be purely a personal privilege, and shall not constitute property, nor shall it be subject to attachment, garnishment or execution, nor shall it be alienable or transferable, voluntarily or involuntarily, or subject to being encumbered or hypothecated?
23. (If applying for other classes except Class B-1 and B-2): Does the applicant understand that the acceptability of all entertainment shall be subject to review by the Local Liquor Control Commission? On the attached addendum for Entertainment, please list and briefly describe, any and all entertainment to be provided in your establishment during the period of this license. (If any additional entertainment is planned during the period of this license, such entertainment must be listed and described for, and approved by, the Hampshire Liquor Commission prior to being conducted or performed. Additional entertainment forms are available at the Office of the Village Clerk.
SIGNATURE OF APPLICANT (S) CORPORATION SIGNATURES Pres. Mukesh Patel Sec. Mukesh Patel Sec. Mukesh Patel
STATE OF <u>Illinois</u>) County of <u>Kane</u>)
The undersigned swears that all statements are true and correct.
JUSTUS VANDERVIALT Official Soal Metary Public - State of Illinois CORPORATE SEALON Expires Jan 4, 2023
Subscribed and sworn to before me this
Notary Public

a la



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 11/24/2021

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed.

	f SUBROGATION IS WAIVED, subjection in the subjection of the subjection of the subject of the su	to the ce	ertificate holder in lieu of s	such en	dorsement(s).	-		
Schatz & Associates, Inc 500 Park Ave, Unit 201 Lake Villa, IL 60046			CONTACT NAME: PHONE (0.47) 0.70 (700						
			PHONE (A/C, No, Ext): (847) 356-1520 FAX (A/C, No): (847) 356-5055 E-MAIL ADDRESS; Customerservice@schatzins.com						
Lar	ve vina, iL 00040			ADDRE					
				-			RDING COVERAGE		NAIC#
ins	URED				RA:Liberty	Mutuai Gr	oup		
		\62	O total	INSURE					
	CJMS Inc., DBA: Tuscan S 107 W Oak Knoll Dr	un wine	& spirits	INSURE					
	Hampshire, IL 60140			INSURE					
				INSURE					
CC	OVERAGES CER	OTIFICA:	TE NUMBER:	INSURE	RF:		DELUCION NUMBER		
	THIS IS TO CERTIFY THAT THE POLICI			/HAVE B	EEN ISSUED	TO THE INCLU	REVISION NUMBER:		OLIOV DEDIGE
- 11	NDICKTED. NOTWITHSTANDING ANY I	KEQUIKE	MENT. LERM OR CONDITIO	JN OF A	NY CONTRA	CT OR OTHER	? DOCHMENT WITH RESDI	T TO	O MULICUITUR
U	ERTIFICATE MAY BE ISSUED OR MAY XCLUSIONS AND CONDITIONS OF SUCH	' PERTAI	N. THE INSURANCE AFFOR	SUED BY	THE POLIC	IES DESCRIE	SED HEREINIS SHE IECT 1	ΓΟ AL	L THE TERMS,
INSF	TOP OF MOURANCE	ADDL SUI	POLICY NUMBER	E DEEIN F	POLICY EFF	POLICY EXP		_	
A	X COMMERCIAL GENERAL LIABILITY	INSU WY	D FOLICI NUMBER		(MM/DD/YYYY)	(MM/DD/YYYY)	LIMIT		1,000,000
	CLAIMS-MADE X OCCUR		BZS57452300		11/17/2021	11/17/2022	EACH OCCURRENCE DAMAGE TO RENTED	\$	1,000,000
					11/1//2021	11/1//2022	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	15,000
							MED EXP (Any one person)	\$	10,000
	GEN'L AGGREGATE LIMIT APPLIES PER:	1					PERSONAL & ADV INJURY	\$	2,000,000
	POLICY PRO- LOC						GENERAL AGGREGATE	\$	2,000,000
	OTHER:						PRODUCTS - COMP/OP AGG		2,000,000
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	\$	
	ANY AUTO							\$	
	OWNED SCHEDULED AUTOS ONLY						BODILY INJURY (Per person)	\$	
	HIRED NON-OWNED AUTOS ONLY						BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)		
	AUTOS UNLY AUTOS ONLY						(Per accident)	\$	
	UMBRELLA LIAB OCCUR						FAOU COCUPERATOR	5	
	EXCESS LIAB CLAIMS-MADE						EACH OCCURRENCE	\$	
	DED RETENTION \$	1 1					AGGREGATE	\$	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						PER OTH- STATUTE ER	\$	
	ANY PROPRIETOR/PARTNER/EXECUTIVE							_	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N/A					E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE	\$	
	If yes, describe under DESCRIPTION OF OPERATIONS below							\$	
Α	LIQUOR LIABILITY		BZS57452300		11/17/2021	11/17/2022	E.L. DISEASE - POLICY LIMIT LIQUOR LIMIT	3	1,000,000
									,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
HIS	CRIPTION OF OPERATIONS / LOCATIONS / VEHIC certificate does not affirmatively or negfied.	LES (ACOF gatively (RD 101, Additional Remarks Sched guarantee that the terms of	ule, may ba any con	e attached if mor tract betweer	e space is requin 1 the insured	^{ed)} and the certificate holder	r hav	e been
CEI	RTIFICATE HOLDER			CANC	ELLATION				
Village of Hampshire 234 S State Street PO Box 457 Hampshire, IL 60140-0457			THE	EXPIRATION	DATE TH	ESCRIBED POLICIES BE CA EREOF, NOTICE WILL E Y PROVISIONS.	ANCE BE D	LLED BEFORE ELIVERED IN	
				AUTHORIZED REPRESENTATIVE					



Continuation Certificate

WB Index: 2450257

CJMS Inc., DBA: Tuscan Sun Wine & spirits 107 W Oak Knoll Dr Hampshire, IL 60140-9720

PRINCIPAL

CJMS Inc., DBA: Tuscan Sun Wine & spirits 107 W Oak Knoll Dr

Hampshire, IL 60140-9720

BOND NUMBER: 2450257

BOND DESCRIPTION: License & Permit Compliance Bond

Liquor License Bond

BOND TERM: 11/17/2021 TO 11/17/2022

BOND PENALTY: \$ 1,500.00

WEST BEND MUTUAL INSURANCE COMPANY hereby continues in force the bond referenced above, subject to all the covenants and conditions of the original bond.

This continuation is issued upon the express condition that the liability of WEST BEND MUTUAL INSURANCE COMPANY under said Bond and this and all continuations thereof shall not be cumulative in any term, calendar year or licensing period unless specifically required by law, statute, ordinance or regulation of the obligee and shall in no event exceed the total sum above written or any amendments, endorsements, or riders attached thereto.

OBLIGEE Village of Hampshire

234 S State St ,PO Box 457 Hampshire, IL 60140-7001

AGENT 12007 SCHATZ & ASSOCIATES INC 500 PARK AV UNIT 201 LAKE VILLA, IL 60046

***TELEPHONE 847-356-1520

Dated this 13th day of November 2021

THIS "Continuation Certificate" MUST BE FILED WITH THE ABOVE BOND.

PRINCIPAL COPY

MICHIGAN ONLY: This policy is exempt from filing requirements of Section 2236 of the Insurance Code of 1956, 1956 PA 218 and MCL 500.2236.



12007

D

BOND EXECUTION REPORT

Date: 11/13/2021

Bond Number: 2450257

SCHATZ & ASSOCIATES INC 500 PARK AV UNIT 201 LAKE VILLA, IL 60046

PRINCIPAL INFORMATION:

CJMS Inc., DBA: Tuscan Sun Wine & spirits 107 W Oak Knoll Dr Hampshire, IL 60140-9720

Billing Address - if blank, see Principal above:

c/o:

107 W Oak Knoll Dr Hampshire, IL 60140-9720

Obligee Information:

Village of Hampshire

234 S State St ,PO Box 457 Hampshire, IL 60140-7001

WB Index: 2450257

Bond Eff Date: 11/17/2021 Bond Exp Date:11/17/2022

Bond Type: License & Permit Compliance Bond

Work Description: Liquor License Bond

Current Bond Penalty: \$ 1,500.00 Previous Bond Penalty: \$ 1,500.00

Bond Premium: \$ 50.00 Premium Change: \$ 0.00

THIS IS NOT AN INVOICE

MICHIGAN ONLY: This policy is exempt from filing requirements of Section 2236 of the Insurance Code of 1956, 1956 PA 218 and MCL 500.2236.



Continuation Certificate

WB Index: 2450257 D

SCHATZ & ASSOCIATES INC 500 PARK AV UNIT 201 LAKE VILLA, IL 60046

PRINCIPAL

CJMS Inc., DBA: Tuscan Sun Wine & spirits

107 W Oak Knoll Dr

Hampshire, IL 60140-9720

BOND NUMBER: 2450257

BOND DESCRIPTION: License & Permit Compliance Bond

Liquor License Bond

BOND TERM: 11/17/2021 TO 11/17/2022

BOND PENALTY: \$ 1,500.00

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This continuation is issued upon the express condition that the liability of WEST BEND MUTUAL INSURANCE COMPANY under said Bond and this and all continuations thereof shall not be cumulative in any term, calendar year or licensing period unless specifically required by law, statute, ordinance or regulation of the obligee and shall in no event exceed the total sum above written or any amendments, endorsements, or riders attached thereto.

OBLIGEE Village of Hampshire

234 S State St ,PO Box 457 Hampshire, IL 60140-7001

12007 **AGENT**

SCHATZ & ASSOCIATES INC 500 PARK AV UNIT 201 LAKE VILLA, IL 60046

***TELEPHONE 847-356-1520

Dated this 13th . 2021 November day of

THIS "Continuation Certificate" MUST BE FILED WITH THE ABOVE BOND.

AGENT COPY

MICHIGAN ONLY: This policy is exempt from filing requirements of Section 2236 of the Insurance Code of 1956, 1956 PA 218 and MCL 500.2236.



Continuation Certificate

WB Index: 2450257

Village of Hampshire

234 S State St ,PO Box 457 Hampshire, IL 60140-7001

PRINCIPAL

CJMS Inc., DBA: Tuscan Sun Wine & spirits

107 W Oak Knoll Dr

Hampshire, IL 60140-9720

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OBLIGEE Village of Hampshire

234 S State St ,PO Box 457 Hampshire, IL 60140-7001

AGENT 12007 SCHATZ & ASSOCIATES INC 500 PARK AV UNIT 201 LAKE VILLA, IL 60046

***TELEPHONE 847-356-1520

Dated this 13th day of November , 2021

THIS "Continuation Certificate" MUST BE FILED WITH THE ABOVE BOND.

OBLIGEE COPY

MICHIGAN ONLY: This policy is exempt from filing requirements of Section 2236 of the Insurance Code of 1956, 1956 PA 218 and MCL 500.2236.





\$	
	WEST BEND
A STATE OF THE STA	A MUTUAL INSURANCE COMPANY®

Bond No	2450257
---------	---------

POWER OF ATTORNEY

Know all men by these Presents, That West Bend Mutual Insurance Company, a corporation having its principal office in the City of West Bend, Wisconsin does make, constitute and appoint:

Kevin A. Steiner

lawful Attorney(s)-in-fact, to make, execute, seal and deliver for and on its behalf as surety and as its act and deed any and all bonds, undertakings and contracts of suretyship, provided that no bond or undertaking or contract of suretyship executed under this authority shall exceed in amount the sum of:

One Thousand Five Hundred Dollars and Zero Cents 1,500.00

This Power of Attorney is granted and is signed and sealed by facsimile under and by the authority of the following Resolution adopted by the Board of Directors of West Bend Mutual Insurance Company at a meeting duly called and held on the 21st day of December, 1999.

Appointment of Attorney-In-Fact. The president or any vice president, or any other officer of West Bend Mutual Insurance Company may appoint by written certificate Attorneys-In-Fact to act on behalf of the company in the execution of and attesting of bonds and undertakings and other written obligatory instruments of like nature. The signature of any officer authorized hereby and the corporate seal may be affixed by facsimile to any such power of attorney or to any certificate relating therefore and any such power of attorney or certificate bearing such facsimile signatures or facsimile seal shall be valid and binding upon the company, and any such power so executed and certified by facsimile signatures and facsimile seal shall be valid and binding upon the company in the future with respect to any bond or undertaking or other writing obligatory in nature to which it is attached. Any such appointment may be revoked, for cause, or without cause, by any said officer at any time.

In witness whereof, the West Bend Mutual Insurance Company has caused these presents to be signed by its president undersigned and its corporate seal to be hereto duly attested by its secretary this 17th day of August, 2021.

Attest

Christopher C. Zwygart

Christopher C. Zwygart Secretary

State of Wisconsin
County of Washington

Kevin A. Steiner

Chief Executive Officer/President

On the 17th day of August, 2021, before me personally came Kevin A. Steiner, to me known being by duly sworn, did depose and say that he resides in the County of Washington, State of Wisconsin; that he is the President of West Bend Mutual Insurance Company, the corporation described in and which executed the above instrument; that he knows the seal of the said corporation; that the seal affixed to said instrument is such corporate seal; that is was so affixed by order of the board of directors of said corporation and that he signed his name thereto by like order.



Matthew E. Carlton Senior Corporate Attorney Notary Public, Washington Co., WI My Commission is Permanent

The undersigned, duly elected to the office stated below, now the incumbent in West Bend Mutual Insurance Company, a Wisconsin corporation authorized to make this certificate, Do Hereby Certify that the foregoing attached Power of Attorney remains in full force effect and has not been revoked and that the Resolution of the Board of Directors, set forth in the Power of Attorney is now in force.

Signed and sealed at West Bend, Wisconsin this 13th day of

November

2021

Heather Dunn

Vice President - Chief Financial Officer

Notice: Any questions concerning this Power of Attorney may be directed to the Bond Manager at West Bend Mutual Insurance Company.





HONOR TRADITION

NOV 3 3 2021

Village of Hampshire

234 S. State Street, Hampshire, IL 60140 Phone: 847-683-2181 • www.hampshireil.org

APPLICATION FOR LIQUOR LICENSE

DATE: November 9, 2021			
AME OF BUSINESS: Hampshire Township Park District SALES TAX ID:			
AME OF APPLICANT: Stephanie Barone			
DDRESS OF BUSINESS: 390 South Live., Hampshire, IL 60140			
USINESS PHONE NO.: 847-683-2690			
MAILING ADDRESS: P.O. Box 953, Hampshire, IL 60140			
TO: Local Liquor Control Commission Village of Hampshire, Illinois			
Pursuant to the provisions of Chapter IIIV, Alcoholic Liquor Regulations, of the Municipal Code of Hampshire, Illinois, as amended, and pursuant to Chapter 43 of the Illinois Revised Statutes, as amended, the undersigned hereby makes application for an Alcoholic Liquor License as follows: 1. License Class and Annual Fee (check one):			
Class A-1 - \$1,500.00 Class A-2 - \$1,250.00 Class B-1 - \$1,500.00 Class B-2 - \$1,500.00 Class C-1 - \$1,500.00 Class C-1 - \$1,500.00 Class C-3 - \$1,500.00 Class C-3 - \$1,500.00 Class C-3 - \$1,750.00			
2. License Period: Commencing on January 1, 2027 and ending December 31, 2027 or Commencing on and ending December 31,			
. Type of Business Entity (check one):			
☐ Individual ☐ Corporation			
Partnership			

4. The following information must be provided with respect to any and all individual owners, partners, corporate officers, corporate directors, resident managers, and, if a corporation, all persons owning directly or beneficially more than 5% of the corporation stock:

NOTE: Full names must be listed with middle initials. Furthermore, the applicant must notify the Local Liquor Control Commission of change in the partnership, officers, directors, persons holding directly or beneficially more than 5% in interest of the stock or ownership interest, or managers of the establishment within ten (10) days of said change.

Name: Stephanie A. Barone	
BIRTHDAY: 04 01 1984	
HOME ADDRESS: 2140 Orchard in Car	pentersville, IL 60110
DRIVERS LICENSE# 8650-7618-4694	HOME PHONE# 815-762-1670
BUSINESS STATUS:	
PERCENTAGE OF STOCK HELD:	
Name:	
BIRTHDAY:	
HOME ADDRESS:	
DRIVERS LICENSE#	HOME PHONE#
BUSINESS STATUS:	
PERCENTAGE OF STOCK HELD:(If additional space is required, plea	ase attach a separate sheet of paper)
	zation:
If an Illinois corporation, state date of corpora If a foreign corporation, state date qualified to Business Corporation Act	transact business in Illinois pursuant to the Illinois
6. State the character of the applicant's business which it was formed. Parks + recrea	
7. State the location and physical description of license and the nature of the business at such Seyller Park 43 E. Jefferson, Bruce	the premises which is to be operated under such location. Community Rwn-390 South Ave., a Rean Park-299 W. Jefferson, Rackow Park
8. State whether the applicant has ever had a lique State government or any municipality. Yes If answer is in the affirmative, state the name of	

where said of license was issued. State of Illinoir

9.	Has the applicant ever had any previous liquor license revoked? No life answer is in the affirmative, state the date and reason for such revocation.
10.	Has the applicant and the designated managers read and do they understand and agree not to violate any of the liquor laws of the United States, the State of Illinois or any of the ordinances of the Village of Hampshire in conducting business?
11.	State whether all individual owners, partners, officers, directors, persons holding more than 5% of the corporate stock have been fingerprinted by the Illinois State Police and, if so the date thereof.
	Note: This application will remain incomplete and will not be considered until question #11 can be answered in the affirmative.
12.	State the name of the person who will generally be managing the ongoing affairs of this business at these premisesStephane Barone
	State whether said manager has been fingerprinted by the Illinois State Police and, if so the date thereof.
	Note: This application will remain incomplete and will not be considered until question #12 can be answered in the affirmative.
13.	Has the applicant attached Surety Bond and Certificate of Liability Insurance to this application or already furnished it to the Village?
	If the applicant does not own the premises for which the license is sought, does the applicant have a lease for the full period for which the license is to be issued? $\underline{\qquad}$ If the answer is in the affirmative, attach a copy of said lease to the application.
15.	State whether the applicant has ever been convicted of a felony offense under any Federal or State law?
16.	State whether the applicant has ever been convicted of a violation of any Federal or State law concerning the manufacture, possession or sale of alcoholic liquor?
	State whether a Federal Gaming Device Stamp or Federal Wagering Stamp has been issued to the applicant, the premises, or to any corporation in which the applicant holds 5% or more Stock?
	If answer is in the affirmative, has the stamp been issued for any portion or all of the time to be covered by this applicant?
18.	Is the premises within 100 feet of any real property of any church, school, hospital, home for the aged or indigent persons or for veterans, their wives or children, or any military or naval station?
19.	Are the premises for which license is herein applied for a store or other place of business where the majority of customers are minors of school age or where the principal business transacted consists of school books, school supplies, food, lunches or drinks for such minors? N_0

	t during the license period, any violation of Federal, eferred to the Local Liquor Control Commission and on or revocation of said license?
and/or Hampshire Police Department shall ha premises licensed hereunder to determine wh	t members of the Local Liquor Control Commission ave the authority to enter at any time upon the hether any State or Village laws and ordinances ime to examine the premises of said licensee in
22. Does the applicant understand and agree that shall not constitute property, nor shall it be sun nor shall it be alienable or transferable, volunt encumbered or hypothecated?	ubject to attachment, garnishment or execution,
additional entertainment is planned during th	ject to review by the Local Liquor Control t, please list and briefly describe, any and all hment during the period of this license. (If any e period of this license, such entertainment must the Hampshire Liquor Commission prior to being
SIGNATURE OF APPLICANT (S) CORPORATION SIGNATURES	INDIVIDUAL OR PARTNERSHIP SIGNATURES
Pres	Baron
Sec	
STATE OF <u>Illinois</u>)) SS County of <u>Kene</u>)	
The undersigned swears that all statements are t	true and correct.
CORPORATE SEAL	OFFICIAL SEAL
Subscribed and sworn to before me this	PATRICIA L PRILL NOTARY PUBLIC - STATE OF ILLINOIS MY COMMISSION EXPIRES 01/09/25 —•
	Datrice of Drule

Notary Public

Brett Davis, Chief Executive Officer



LICENSE AND PERMIT BOND

Know All Men By These Presents:

That we, Hampshire	Park District	, of the		
Village of Hampshire	, State ofIllinois	as Principal, and the PARK		
DISTRICT RISK MANAGEMEN	Γ AGENCY, an entity of	duly organized under the statutes of the		
State of, as an	intergovernmental risk	management pool, are held and firmly		
bound unto the Village of Hampshi	re, State of Illinois	, Obligee, in the		
penal sum of Fifteen H	<u>fundred</u> and No/100t	<u>hs</u> DOLLARS (\$1,500.00)		
lawful money of the United States, to be paid to the said Obligee, for which payment well and				
truly to be made, we bind ourselve	s and our legal represe	ntatives, jointly and severally by these		
presents.				
been licensed for Lique	or License			
comply with the laws and ordinar	nces, including all Am his obligation to be voi	y perform the duties and in all things and ments thereto, appertaining to the d, otherwise to remain in full force and uation Certificate.		
This bond may be terminated at any time by the Surety upon sending notice in writing; by certified mail, to the clerk of the Political Subdivision with whom this bond is filed and to the Principal, addressed to them at the Political Subdivision named herein, and at the expiration of thirty-five (35) days from the mailing of said notice, this bond shall ipso facto terminate and the surety shall thereupon be relieved from any liability for any acts or omissions of the Principal subsequent to said date.				
Dated this 11th day of November, 2021.				
		Hampshire Park District		
~~~~~		8.4		
The original and the second	1	Sou en		
The state of the s	· 网络中国	Principal		
Experience and				
		PARK DISTRICT RISK MANAGEMENT AGENCY		

#### **CERTIFICATE OF COVERAGE**

#### Name and Address of Agency

Park District Risk Management Agency 2033 Burlington Avenue Lisle, Illinois 60532-1646 630-769-0332

#### Name and Address of Member

Hampshire Township Park District 390 South Ave Hampshire, IL 60140

#### SCOPE OF COVERAGE

The Park District Risk Management Agency (PDRMA) is an intergovernmental self-insurance and risk management pool established under the constitution and the statutes of the State of Illinois to provide coverage for its members against certain claims and losses. Each member of PDRMA is entitled to the scope and amounts of coverage set forth below. In addition, PDRMA may extend the same scope of coverage to non-members. However, any coverage extended to a non-member is subject to all of the terms, conditions, exclusions, and amendments that are applicable to the members.

The above named entity is a member in good standing of the Park District Risk Management Agency. The scope of coverage provided by the agency may, however, be revised at any time by the actions of PDRMA's governing body. As of the date this certificate is issued, the information set out below accurately reflects the scope of coverage established for the current coverage year. This document may not be used to extend Additional Insured status to the certificate holder or any other individual/organization/entity.

Scope of Coverage	Coverage Document	Coverage Dates	Limits Each Occurrence	In millions (000,000)
General Liability	L010121	1/1/2021-12/31/2021	Bodily Injury and Property	
* Commercial general liability			Damage combined	3
* Occurrence				
* Liquor liability			Personal Injury	3
Automobile Liability	L010121	1/1/2021-12/31/2021	Bodily Injury and Property	
* any auto			Damage combined	3
Workers' Compensation	WC010121	1/1/2021-12/31/2021		Statutory
Employer's Liability	WC010121	1/1/2021-12/31/2021		3
	DEIGH OF COURT			

#### DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

The Village of Hampshire is/are additionally insured for Hampshire Park District's liquor service locations at 390 South Avenue, Hampshire, IL, 400 E. Jefferson Avenue, Hampshire, IL, 299 W. Jefferson Avenue, Hampshire, IL and 1363 Romke Road, Hampshire, IL

Certificate Holder		
Village of Hampshire		
234 S. State St.	R.A.	
Hampshire, IL, 60140	Dell Sam	
	Authorized Representative	Date Issued: 11/15/2021
		© 2015 PDRMA

#### **BASSET Card**



STEPHANIE BARONE 390 SOUTH AVENUE HAMPSHIRE IL 60140 August 20, 2021

Letter ID: L1923082248

License No.:

5A-0110606

**Expiration Date:** 

3/31/2024

License Type:

**Basset Card** 

Your "Student ID number" is: 18043662

Your "Trainer's ID number" is: 5A-0110606

Your BASSET Card is located BELOW

# DO NOT throw away this letter as you will need your "Student ID number" directly above to re-print your card.

#### IMPORTANT:

To re-print your card, visit the Illinois Liquor Control Commission website at <a href="LCC.illinois.gov"><u>ILCC.illinois.gov</u></a> (click on the RESOURCES tab to access the "BASSET Card Lookup" page).

#### ILLINOIS LIQUOR CONTROL COMMISSION

100 W. Randolph Street, Suite 7-801 - Chicago, IL 60601 BEVERAGE ALCOHOL SELLERS AND SERVERS EDUCATION AND TRAINING [BASSET] CARD

Date of Certification: 3/31/2021 Expires: 3/31/2024
Trainer's IL Liquor License Number: 5A-0110606

STEPHANIE BARONE.
390 SOUTH AVENUE
HAMPSHIRE IL 60140

**Card is not transferrable**

31200 11-30-51



#### Village of Hampshire

234 S. State Street, Hampshire, IL 60140 Phone: 847-683-2181 • www.hampshireil.org

#### **APPLICATION FOR LIQUOR LICENSE**

DATE: 13012			
NAME OF BUSINESS: Tmm minnihans Inc dox Pub SALES TAX ID: 4265-3126			
NAME OF APPLICANT: Jeff Namrocki			
ADDRESS OF BUSINESS: 1000 S. State St. Hampshire 16 60140			
BUSINESS PHONE NO.: 847 346~ 8218			
MAILING ADDRESS: 1000 S. state St. Hampshire 16 60140			
TO: Local Liquor Control Commission Village of Hampshire, Illinois			
Pursuant to the provisions of Chapter IIIV, Alcoholic Liquor Regulations, of the Municipal Code of Hampshire, Illinois, as amended, and pursuant to Chapter 43 of the Illinois Revised Statutes, as amended, the undersigned hereby makes application for an Alcoholic Liquor License as follows:			
1. License Class and Annual Fee (check one):			
Class A-1 - \$1,500.00 Class A-2 - \$1,250.00 Class B-1 - \$1,500.00 Class B-2 - \$1,500.00 Class C-1 - \$1,500.00 Class C-2 - \$1,500.00 Class C-3 - \$1,750.00 Class C-4 - \$1,500.00 Class C-3 - \$1,750.00 Class C-3 - \$1,750.00 Class C-4 - \$1,500.00 Class C-3 - \$1,750.00 Class C-3 - \$1,750.00 Class C-4 - \$1,500.00 Class C-3 - \$1,750.00 Class C-3 - \$1,750.00 Class C-4 - \$1,500.00 Class C-4 - \$1,500.00 Class C-4 - \$1,500.00 Class C-3 - \$1,750.00 Class C-4 - \$1,500.00 Class C-4 - \$1,500.00 Class C-4 - \$1,500.00 Class C-4 - \$1,500.00 Class C-4 - \$1,750.00 Class C-4 - \$1,750.00 Class C-4 - \$1,750.00 Class C-4 - \$1,750.00 Class C-3 - \$1,750.00 Class C-3 - \$1,750.00 Class C-4 - \$1,500.00 Class C-3 - \$1,750.00 Class C-3 - \$1,750.00 Class C-4 - \$1,500.00 Class C-4 - \$1,500.00 Class C-4 - \$1,500.00 Class C-3 - \$1,750.00 Class C-3 - \$1,500.00 Class C-3 - \$1,750.00 Class C-3 - \$1,750.00			
2. License Period:			
Commencing on January 1, <u>AOA \ and ending December 31, <u>AOA \ and ending December 31, </u> or or and ending December 31,</u>			
3. Type of Business Entity (check one):			
☐ Individual			
Partnership Other (specify)			

4. The following information must be provided with respect to any and all individual owners, partners, corporate officers, corporate directors, resident managers, and, if a corporation, all persons owning directly or beneficially more than 5% of the corporation stock:

NOTE: Full names must be listed with middle initials. Furthermore, the applicant must notify the Local Liquor Control Commission of change in the partnership, officers, directors, persons holding directly or beneficially more than 5% in interest of the stock or ownership interest, or managers of the establishment within ten (10) days of said change.

Name: Michael Gallo
BIRTHDAY: 1112 1967
HOME ADDRESS: 63) Greens View Dr. Algonguin 12 60102  DRIVERS LICENSE# 6400-5506-7012  HOME PHONE# 847-208-9316
DRIVERS LICENSE# 6400 - 5506 - 7012 HOME PHONE# 847 - 208 - 9316
BUSINESS STATUS: President
PERCENTAGE OF STOCK HELD: 67%
Name: Jeff Newrock 1
BIRTHDAY: 12 22 (97)
HOME ADDRESS: 614 Da Vinci Dr Hampshire 16 60140  DRIVERS LICENSE# N620-4357-1363 HOME PHONE# 847-346-8218
DRIVERS LICENSE# N630 - 4357 - 1363 HOME PHONE# 847 -346-8218
BUSINESS STATUS: Vice President
PERCENTAGE OF STOCK HELD: 53%  (If additional space is required, please attach a separate sheet of paper)
5. Is the applicant a citizen of the United States?
If an Illinois corporation, state date of corporation:
6. State the character of the applicant's business, and in case of a corporation, the objects for which it was formed.
7. State the location and physical description of the premises which is to be operated under such license and the nature of the business at such location. らんしていてのもにする。
8. State whether the applicant has ever had a liquor license issued by the Federal government, any State government or any municipality.
If answer is in the affirmative, state the name of the licensing unit of government, when and where said of license was issued.

9.	Has the applicant ever had any previous liquor license revoked?
10.	Has the applicant and the designated managers read and do they understand and agree not to violate any of the liquor laws of the United States, the State of Illinois or any of the ordinances of the Village of Hampshire in conducting business?
11.	State whether all individual owners, partners, officers, directors, persons holding more than 5% of the corporate stock have been fingerprinted by the Illinois State Police and, if so the date thereof.
	Note: This application will remain incomplete and will not be
	considered until question #11 can be answered in the affirmative.
12.	State the name of the person who will generally be managing the ongoing affairs of this business at these premises.
	State whether said manager has been fingerprinted by the Illinois State Police and, if so the date thereof.  Note: This application will remain incomplete and will not be considered until question #12 can be answered in the
	Note: This application will remain incomplete and will not be
	considered until question #12 can be answered in the affirmative.
13.	Has the applicant attached Surety Bond and Certificate of Liability Insurance to this application or already furnished it to the Village?
	If the applicant does not own the premises for which the license is sought, does the applicant have a lease for the full period for which the license is to be issued?
	If the answer is in the affirmative, attach a copy of said lease to the application.
15.	State whether the applicant has ever been convicted of a felony offense under any Federal or State law? _ 🗷 &
16.	State whether the applicant has ever been convicted of a violation of any Federal or State law concerning the manufacture, possession or sale of alcoholic liquor?
	State whether a Federal Gaming Device Stamp or Federal Wagering Stamp has been issued to the applicant, the premises, or to any corporation in which the applicant holds 5% or more Stock? $\mathbb{N}_{\mathcal{O}}$
	If answer is in the affirmative, has the stamp been issued for any portion or all of the time to be covered by this applicant?
18.	Is the premises within 100 feet of any real property of any church, school, hospital, home for the aged or indigent persons or for veterans, their wives or children, or any military or naval station?
19.	Are the premises for which license is herein applied for a store or other place of business where the majority of customers are minors of school age or where the principal business transacted consists of school books, school supplies, food, lunches or drinks for such minors?

20. Does the applicant understand and agree that State or Village laws and ordinances will be ref that such violation may result in the suspension	erred to the Local Liquor Control Commission and
21. Does the applicant understand and agree that and/or Hampshire Police Department shall have premises licensed hereunder to determine whe have been or are being violated, and at such time connection therewith?	ve the authority to enter at any time upon the ether any State or Village laws and ordinances
22. Does the applicant understand and agree that shall not constitute property, nor shall it be substant and shall it be alienable or transferable, voluntations encumbered or hypothecated?	eject to attachment, garnishment or execution,
23. (If applying for other classes except Class B-1 an acceptability of all entertainment shall be subject Commission?  On the attached addendum for Entertainment, entertainment to be provided in your establish additional entertainment is planned during the be listed and described for, and approved by, the conducted or performed. Additional entertainment Village Clerk.	please list and briefly describe, any and all ment during the period of this license. (If any period of this license, such entertainment must he Hampshire Liquor Commission prior to being
SIGNATURE OF APPLICANT (S) CORPORATION SIGNATURES Pres.	INDIVIDUAL OR PARTNERSHIP SIGNATURES
Sec. Jeff Nenh	
STATE OF	
The undersigned swears that all statements are tr	ue and correct.
CORPORATE SEAL  Subscribed and sworn to before me this	OFFICIAL SEAL M BRANDES NOTARY PUBLIC - STATE OF ILLINOIS MY COMMISSION EXPIRES: 10/18/23
	Notary Public



#### CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

11/13/2020 THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provision

PO SHOW TRIES  NEURED  NEURED  TAMAY Minnihan's Inc. DBA Newman's Comer Pub 1000 S State Street 1000 S Sta	PR	IT SUBROGATION IS WAIVED, subj this certificate does not confer rights ODUCER Dadmoor Agency	to the c	ertificate holder in lieu of s	CONTACT NAME:	ent(s).	- may require an endorsen	ient. A	statement on
MODERAL PROPRIES OF INSURANCE LIMITS STORMS OF I	PU	Box 17069			PHONE			. (815) DCE C702	
MSURER 1. Badger Mutual Insurance 13420  TMM Minnihan's inc. DBA Nowman's Comer Pub 1000 S State Street Hampshire, it. 60140  EXEMPTION OF STATE STREET HAMP STATE THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN INSURED TO THE INSURED THE POLICY PERIOD NOTICE TO MY PERIOD ANY PECULIFICATE NUMBER: INSURED TO THE INSURED TO THE INSURED THE POLICY PERIOD NOTICE TO MY PERIOD ANY PECULIFICATE NUMBER: INSURED TO THE INSURANCE DESCRIPTION OF ANY CONTRACT OF OTHER POLICY PERIOD NOTICE TO MY PERIOD OF ANY PERIOD OF JUNE OF MANY PERIOD OF JUNE OF ANY PERIOD OF ANY PERIO	RO	CKTORD, IL 61110			E-MAIL ADDRESS: CL	broadmo	pragency.com	0).(010	7 500-0703
MSURER 1. Badger Mutual Insurance 13420  TMM Minnihan's inc. DBA Nowman's Comer Pub 1000 S State Street Hampshire, it. 60140  EXEMPTION OF STATE STREET HAMP STATE THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN INSURED TO THE INSURED THE POLICY PERIOD NOTICE TO MY PERIOD ANY PECULIFICATE NUMBER: INSURED TO THE INSURED TO THE INSURED THE POLICY PERIOD NOTICE TO MY PERIOD ANY PECULIFICATE NUMBER: INSURED TO THE INSURANCE DESCRIPTION OF ANY CONTRACT OF OTHER POLICY PERIOD NOTICE TO MY PERIOD OF ANY PERIOD OF JUNE OF MANY PERIOD OF JUNE OF ANY PERIOD OF ANY PERIO						INSURER(S)	AFFORDING COVERAGE		NAIC #
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MSURER D: MSURER	1145								
Hampshire, IL 60140  MSURER C: MSURER E: MSURE		1 MW/ Minnihan's Inc. DBA	Newma	n's Corner Pub	INSURER C:				
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#### CONTINUATION CERTIFICATE

Western Surety Company hereby continues in fe	orce Bond No. 64888403 briefly
described as SPORTS BAR VILLAGE OF HAMPSHIR	•
for TMM MINNIHAN'S INC. DBA NEWMAN'S CORNE	R PUB
	D NO/100 Dollars, for the term beginning
	December 03 , 2021 , subject to all
the covenants and conditions of the original bond ref	
This continuation is issued upon the express co	ondition that the liability of Western Surety Company
under said Bond and this and all continuations there	of shall not be cumulative and shall in no event exceed
the total sum above written.	
Dated this3rd day ofDecember	2020
TANKE TO THE TANK THE	By Paul T. Brufat, Vice President

THIS "Continuation Certificate" MUST BE FILED WITH THE ABOVE BOND.

ADENDED COMPONED WESTERN SURETY COMPANY . ONE OF A HERICA'S DEDICE PONDENC COMPANIES COM

Form 90-A-8-2012

# Western Surety Company

#### **POWER OF ATTORNEY**

#### KNOW ALL MEN BY THESE PRESENTS:

That WESTERN St	DETY COMPANY	· .				
and authorized and its	RETY COMPANY, a co	rporation organize	d and existing	y under the law	s of the State of So	uth Dakota
The state of the state of the state of	riwisi Himbodollaaalla. R	UCCHURD WIDHARAT	G Mindinainai	Rineau III		
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Pa	ul T. Bruflat	of		Sioux Falls		
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as Attorney-in-Fact, wit	h full power and authori	ty hereby conferre	d upon him to	o sign, execute	acknowledge and	deliver to
and on its behalf as Sur	rety and as its act and de	ed, the following I	ond:			
One SPORTS RA	R VILLAGE OF HAM	BOHTEN				
	A JACOB OB MAIN	POHIKE	<del></del>			
bond with bond number	64888403			AND THE RESERVE OF THE PARTY OF		
for TMM MINNIHAN	'S INC. DBA NEWMA	AN'S CORNER	PUB	1		
as Principal in the penal	ity amount not to exceed	:\$1,500.00				
Western Surety Comp Company duly adopted and	cany further certifies that the and inforce, to wit:	ne following is a tru	e and exact co	py of Section 7	of the by-laws of Wes	stern Summ
Section 7. All bonds, po	Misies undertakings Bown					
name of the Company by the	ne President, Secretary, any athorize. The President, ar	y Assistant Secretary	a obligations of A Treasurer, or	ithe corporation any Vice Preside	shall be executed in the	19 corporate
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Boal is not necessary for the	se validity of any bonds as	dieles and dele	nes, or undertar	kings in the nam	e of the Company. Th	ie corporate
signature of any such office	er and the corporate seal ma	by be printed by face	, rowers of Atto imile.	orney or other of	oligations of the corpo	ration. The
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COUNTY OF MINNEHAL	HA }\$8					100
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	day of <u>December</u> ul T. Bruflat		020, befo	re me, a Notar	y Public, personally	appeared
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and Assistant Secretary	vorn, acknowledged that	niey signed the a	Dove Power o	f Attorney as	Vice President	
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+ ** ** ** ** ** ** ** ** ** **	· · · · · · · · · · · · · · · · · · ·	y Commission Exp	oires June 23,	2021	No	tary Public

To validate bond authenticity, go to <a href="https://www.cnasurety.com">www.cnasurety.com</a> > Owner/Obligee Services > Validate Bond Form F1978-1-2016





### **APPLICATION FOR LIQUOR LICENSE**

DATE:
NAME OF BUSINESS: Speedway 5036 SALES TAX ID: 2873.4785
NAME OF BUSINESS: Speedway 5036 SALES TAX ID: 2873.4785  NAME OF APPLICANT: Speedway LLC
ADDRESS OF BUSINESS: 110 Arrowhead Dr., Hampshire, 12
BUSINESS PHONE NO.: (841) 683. 9372
MAILING ADDRESS: PO Box 1580, Atm: License Dept., Springfield. OH 45501
TO: Local Liquor Control Commission Village of Hampshire, Illinois
Pursuant to the provisions of Chapter IIIV, Alcoholic Liquor Regulations, of the Municipal Code of Hampshire, Illinois, as amended, and pursuant to Chapter 43 of the Illinois Revised Statutes, as amended, the undersigned hereby makes application for an Alcoholic Liquor License as follows:
1. License Class and Annual Fee (check one):
Class A-1 - \$1,500.00 Class A-2 - \$1,250.00 Class B-1 - \$1,500.00 Class B-2 - \$1,500.00 Class C-1 - \$1,500.00 Class C-2 - \$1,500.00 Class C-3 - \$1,750.00
2. License Period:
Commencing on January 1, 2022 and ending December 31, 2022 or Commencing on and ending December 31,
3. Type of Business Entity (check one):
☐ Individual ☐ Corporation
Partnership Other (specify) LLC

4. The following information must be provided with respect to any and all individual owners, partners, corporate officers, corporate directors, resident managers, and, if a corporation, all persons owning directly or beneficially more than 5% of the corporation stock:

NOTE: Full names must be listed with middle initials. Furthermore, the applicant must notify the Local Liquor Control Commission of change in the partnership, officers, directors, persons holding directly or beneficially more than 5% in interest of the stock or ownership interest, or managers of the establishment within ten (10) days of said change.

Name: Attached: Officer Hist'
BIRTHDAY:
HOME ADDRESS:
DRIVERS LICENSE# HOME PHONE#
BUSINESS STATUS:
PERCENTAGE OF STOCK HELD: A Hached: "Schedule of Ownership"
Name:
HOME ADDRESS: 1240 Umbolenstock Rd. Elgin, /2
DRIVERS LICENSE# HOME PHONE#
BUSINESS STATUS:
PERCENTAGE OF STOCK HELD: Control (If additional space is required, please attach a separate sheet of paper)
5. Is the applicant a citizen of the United States?
If an Illinois corporation, state date of corporation: $\frac{10/29/1997}{1}$ If a foreign corporation, state date qualified to transact business in Illinois pursuant to the Illinois Business Corporation Act.
6. State the character of the applicant's business, and in case of a corporation, the objects for which it was formed. <u>Own Operate Chain of Petail Convenience Stores</u> ω gaso in
7. State the location and physical description of the premises which is to be operated under such license and the nature of the business at such location. Lydala Hour Plan Attached.
8. State whether the applicant has ever had a liquor license issued by the Federal government, any State government or any municipality.  If answer is in the affirmative, state the name of the licensing unit of government, when and where said of license was issued Atached: UST OF IL Speedway Licenses

### **CONFIDENTIAL - DO NOT DISTRIBUTE**

Title	Name	Address	DOB	License #	Phone	Percentage
President	Timothy Thomas Griffith	754 East Schantz Avenue, Oakwood, OH 45419	8/27/1969	TY994570	937-864-3000	0%
Executive Vice President	Glenn Michael Plumby	281 Southwood Trail, Beavercreek, OH 45440	3/2/1959	RU179982	937-864-3000	0%
Senior Vice President Marketing	Timothy Lee Rupp	292 Signature Drive South, Xenia, OH 45385	1/30/1969	RK360240	937-864-3000	0%
Assistant Controller	Joey Keith Allen	9962 Creek Landing Way, Dayton, OH 45458	3/9/1965	RQ761020	937-864-3000	0%

### SCHEDULE OF OWNERSHIP

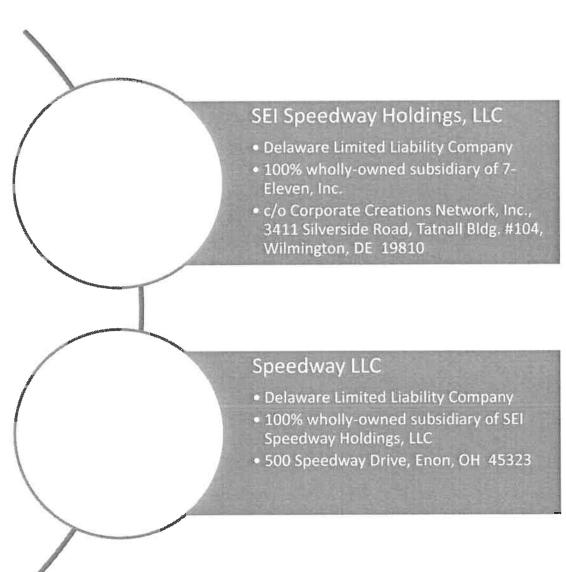
### **SPEEDWAY LLC**

(a Delaware limited liability company)
Date of Formation: July 18, 1997 (Delaware)

500 Speedway Drive Enon, OH 45323 (937) 864-3000

(or)

P.O. Box 1500 Springfield, OH 45501 (937) 864-3000



Building Type: C4500 Speedy Cafe V3 Beverage Dest. CFL Bear Cave

### Store # 5036

Hampshire, IL ProFloor 8/5/2021 Last Modified: 8/8/2021

Speedway	Brand	Store #	Address	City	State	ZipCode	Alcohol Sold
Speedway   0001412   19730 South Harlem Avenue   Frankfort   IL   60423-8692   Beer & Wine sales   Speedway   0001414   19855 La Grange Road   Mokena   IL   60448-848   Beer & Wine sales   Speedway   0001415   2925 Riverstone Court   Kankakee   IL   60041-850   Beer & Wine sales   Speedway   0001416   11151 West Lincoln Highway   Frankfort   IL   60423-7428   Beer & Wine sales   Speedway   0001417   4022 US Highway 34   Oswego   IL   60543-9882   Beer & Wine sales   Speedway   0001417   4022 US Highway 34   Oswego   IL   60543-9882   Beer & Wine sales   Speedway   0001420   1551 West 143rd Street   Homer Glen   IL   60491-8814   Beer & Wine sales   Speedway   0001420   1551 West 143rd Street   Homer Glen   IL   60491-8813   Beer & Wine sales   Speedway   0001421   22310 South La Grange Road   Frankfort   IL   60423-8812   Beer & Wine sales   Speedway   0001422   22310 South La Grange Road   Frankfort   IL   60423-8812   Beer & Wine sales   Speedway   0001424   18701 Wolf Road   Mokena   IL   60448-8945   Beer & Wine sales   Speedway   0001424   18701 Wolf Road   Mokena   IL   60448-8945   Beer & Wine sales   Speedway   0001425   10250 Lemont Rd, Suite A   Darien   IL   60651-5949   Beer & Wine sales   Speedway   0001425   393 South Cedar Road   New Lenox   IL   60458-961   Beer & Wine sales   Speedway   0001425   393 South Cedar Road   New Lenox   IL   60459-1649   Beer & Wine sales   Speedway   0001425   3915   Beer & Wine sales   Speedway   0001425   3915   Beer & Wine sales   Speedway   000396   3176 N US Highway 12   Volo   IL   60073-6100   Beer & Wine sales   Speedway   000396   3176 N US Highway 12   Volo   IL   60073-6100   Beer & Wine sales   Speedway   0004293   2001 Crystal Parkway   Belvidere   IL   6008-4018   Beer & Wine sales   Speedway   0004293   885 Est Toulhy Avenue   Des Plalines   IL   60018-701   Beer & Wine sales   Speedway   0004290   2000450   885 Est Toulhy Avenue   Des Plalines   IL   60018-701   Beer & Wine sales   Speedway   0005304   8000 Brook Forest Avenue   Shorewood   IL   60					Contract of the last		The state of the s
Speedway         0001414         19855 la Grange Road         Mokena         IL         60448-8348         Beer & Wine sales           Speedway         0001415         2925 Riverstone Court         Kankakee         IL         60301-4503         Beer & Wine sales           Speedway         0001417         4032 US Highway 34         Oswego         IL         60543-9823         Beer & Wine sales           Speedway         0001419         15060 South Bell Road         Homer Glen         IL         60949-1837         Beer & Wine sales           Speedway         0001420         15551 West 143rd Street         Homer Glen         IL         60491-7879         Beer & Wine sales           Speedway         0001421         2315 Osuth La Grange Road         Frankfort         IL         60491-7879         Beer & Wine sales           Speedway         0001422         900 Brook Forest Avenue         Shorewood         IL         6040-8807         Beer & Wine sales           Speedway         0001423         1870 Wolf Road         Mokena         IL         6048-8945         Beer & Wine sales           Speedway         0001425         1870 Wolf Road         Mokena         IL         6048-8945         Beer & Wine sales           Speedway         0001425         1830 Us 30         <							
Speedway         0001415         2925 Riverstone Court         Kankakee         IL         60901-4503         Beer & Wine sales           Speedway         0001416         11151 West Lincoln Highway         Frankfort         IL         60423-7428         Beer & Wine sales           Speedway         0001418         1202 Us Highway 34         Oswego         IL         60439-893         Beer & Wine sales           Speedway         0001419         15060 South Beil Road         Homer Glen         IL         60491-7851         Beer & Wine sales           Speedway         0001421         23210 South La Grange Road         Frankfort         IL         60491-7851         Beer & Wine sales           Speedway         0001421         23210 South La Grange Road         Frankfort         IL         60491-7851         Beer & Wine sales           Speedway         0001424         18701 Wolf Road         Mokena         IL         60448-88945         Beer & Wine sales           Speedway         0001425         10250 Lemont Rd, Suite A         Darien         IL         60451-2206         Beer & Wine sales           Speedway         0001425         333 Us 30         Oswego         IL         60451-2206         Beer & Wine sales           Speedway         0001210         133 Us 33	•						
Speedway         0001416         11151 West Lincoln Highway         Frankfort         II.         60423-7428         Beer & Wine sales           Speedway         0001417         4032 US Highway 34         Oswego         II.         6043-9823         Beer & Wine sales           Speedway         0001419         12502 West 143rd Street         Homer Glen         II.         60491-7879         Beer & Wine sales           Speedway         0001420         15551 West 143rd Street         Homer Glen         II.         60491-7879         Beer & Wine sales           Speedway         0001421         22310 South La Grage Road         Frankfort         II.         60423-8312         Beer & Wine sales           Speedway         0001424         1870 Wolf Road         Mokena         II.         60448-8945         Beer & Wine sales           Speedway         0001425         10250 Lemont Rd, Suite A         Darien         II.         6048-8945         Beer & Wine sales           Speedway         0001431         393 South Cedar Road         Willow Springs         II.         6048-1023         Beer & Wine sales           Speedway         0001210         1330 US 30         Oswego         II.         6048-1023         Beer & Wine sales           Speedway         0003950         591 Eas		• • • • • • • • • • • • • • • • • • • •	•				
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Speedway         0004250         885 East Touhy Avenue         Des Plaines         IL         60018-2701         Beer & Wine sales           Speedway         0005004         38980 N Green Bay Rd.         Beach Park         IL         60018-1923         Beer & Wine sales           Speedway         0005004         2700 Algonquin Rd         Lake In The Hills         IL         60140-7656         Beer & Wine sales           Speedway         0005340         800 Brook Forest Avenue         Shorewood         IL         60140-8608         Beer & Wine sales           Speedway         0005343         9059 Kingery Highway         Burr Ridge         IL         60527-6145         Beer & Wine sales           Speedway         0005344         8301 Lemont Road         Darien         IL         60551-1767         Beer & Wine sales           Speedway         0005380         301 West Maple Street         New Lenox         IL         60451-1633         Beer & Wine sales           Speedway         0005393         15 South Randall Road         North Aurora         IL         60541-1633         Beer & Wine sales           Speedway         0006207         1495 E Wilson St         Batavia         IL         60510-2280         Beer & Wine sales           Speedway         0006210         2854				•			
Speedway         0004440         38980 N Green Bay Rd.         Beach Park         IL         60087-1923         Beer & Wine sales           Speedway         0005004         2700 Algonquin Rd         Lake In The Hills         IL         60146-7656         Beer & Wine sales           Speedway         0005036         110 Arrowhead Dr         Hampshire         IL         60140-7656         Beer & Wine sales           Speedway         0005340         800 Brook Forest Avenue         Shorewood         IL         60404-8608         Beer & Wine sales           Speedway         0005343         9059 Kingery Highway         Burr Ridge         IL         60527-6145         Beer & Wine sales           Speedway         0005362         800 West Maple Street         New Lenox         IL         60451-1639         Beer & Wine sales           Speedway         0005380         301 West Maple Street         New Lenox         IL         60451-1633         Beer & Wine sales           Speedway         0005393         15 South Randall Road         North Aurora         IL         60542-1585         Beer & Wine sales           Speedway         0006207         1495 E Wilson St         Batavia         IL         60510-2280         Beer & Wine sales           Speedway         0006210         285				•			
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Speedway	0007572	24520 Western Avenue	University Park	IL	60484-3438	Beer & Wine sales
Speedway	0007610	2001 University Parkway	University Park	IL	60484-4111	Beer & Wine sales
Speedway	0007612	7218 West Lincoln Highway	Frankfort	IL	60423-9407	Beer & Wine sales
Speedway	0007613	12007 W 159th St	Homer Glen	IL	60491-7849	Beer & Wine sales
Speedway	0007616	115 North 8th Street	West Dundee	IL	60118-2013	Beer & Wine sales
Speedway	0007649	201 Milwaukee Ave	Buffalo Grove	IL	60089-1878	Beer & Wine sales
Speedway	0007760	16649 Kedzie Avenue	Markham	IL	60428-5512	Beer & Wine sales
Speedway	0007765	7502 South Cass Avenue	Darien	IL	60561-4442	Beer & Wine sales
Speedway	0008327	701 East Lake Street	Addison	IL	60101-2827	Beer & Wine sales
Speedway	0008440	701 North Independence Boulevard	Romeoville	IL	60446-1131	Beer & Wine sales
Speedway	0008799	6800 S Archer Rd	Bedford Park	IL	60501-2079	Beer & Wine sales
Speedway	0008883	3151May Road	Peru	IL	61354-9619	Beer & Wine sales
Speedway	0007077	2330 West Station Street	Kankakee	IL	60901-3072	Beer & Wine sales
Speedway	0008313	5800 South Harlem Avenue	Summit	IL	60501-1408	Beer & Wine sales
Speedway	0001144	2001 W Walnut St	Oglesby	IL	61348-0000	Beer & Wine sales
Speedway	0003715	20750 Patrick Drive	Crest Hill	IL	60403-1467	Beer & Wine sales
Speedway	0003961	4895 Dinius Rd	Williamsville	IL	62693-9207	Beer & Wine sales
Speedway	0007269	5401 State Route 111	Pontoon Beach	IL	62040-2860	Beer & Wine sales
Speedway	0007764	1031 E Main St	East Dundee	IL	60118	Beer & Wine sales
Speedway	0008544	23730 West Eames Street	Channahon	IL	60410-3332	Beer & Wine sales
Speedway	0008851	1775 N Lafox St	South Elgin	IL	60177-1207	Beer & Wine sales

9	Has the applicant ever had any previous liquor license revoked?
٥.	If answer is in the affirmative, state the date and reason for such revocation. See  Attachments 1+2
10.	Has the applicant and the designated managers read and do they understand and agree not to violate any of the liquor laws of the United States, the State of Illinois or any of the ordinances of the Village of Hampshire in conducting business?
11.	State whether all individual owners, partners, officers, directors, persons holding more than 5% of the corporate stock have been fingerprinted by the Illinois State Police and, if so the date thereof. <u>Officers reside in Ohio + have On numership / Stock</u> Note: This application will remain incomplete and will not be considered until question #11 can be answered in the affirmative.
12.	State the name of the person who will generally be managing the ongoing affairs of this business at these premises
	State whether said manager has been fingerprinted by the Illinois state Police and, if so the date thereof.
	Note: This application will remain incomplete and will not be
	considered until question #12 can be answered in the
	affirmative.
13.	Has the applicant attached Surety Bond and Certificate of Liability Insurance to this application or already furnished it to the Village? $\sqrt{e5}$ .
14.	If the applicant does not own the premises for which the license is sought, does the applicant have a lease for the full period for which the license is to be issued?
	If the answer is in the affirmative, attach a copy of said lease to the application.
15.	State whether the applicant has ever been convicted of a felony offense under any Federal or State law? $No$
16.	State whether the applicant has ever been convicted of a violation of any Federal or State law concerning the manufacture, possession or sale of alcoholic liquor?
	State whether a Federal Gaming Device Stamp or Federal Wagering Stamp has been issued to the applicant, the premises, or to any corporation in which the applicant holds 5% or more Stock?
	If answer is in the affirmative, has the stamp been issued for any portion or all of the time to be covered by this applicant?
18.	Is the premises within 100 feet of any real property of any church, school, hospital, home for the aged or indigent persons or for veterans, their wives or children, or any military or naval station?
19.	Are the premises for which license is herein applied for a store or other place of business where the majority of customers are minors of school age or where the principal business transacted consists of school books, school supplies, food, lunches or drinks for such minors?

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Licensing Department P. O. Box 1580 Springfield, Ohio 45501 Telephone 937-864-3000

### **ATTACHMENT 1**

Speedway LLC ("Speedway") owns and operates gasoline stations and convenience stores in multiple states coast to coast within the United States of America.

Speedway holds in excess of 1,500 alcoholic beverage licenses.

Despite an aggressive training program for employees, from time to time, on occasion, Speedway has been subject to disciplinary action for allegedly selling alcohol or tobacco to an underage person or failure to properly post permits or signage. Speedway's disciplinary action is typically a fine or brief suspension of permitted privileges.

{Speedway had five (5) alcoholic beverage permits in Ohio revoked in 2002. These permits were eventually re-instated.}

Additionally, on occasion, Speedway may have been denied an alcoholic beverage license after it was determined that the property was statutorily too close to a church, school, or other protected property. Records of such denials are not maintained.

Licensing Department
P. O. Box 1580
Springfield, Ohio 45501
Telephone 937-864-3000

### **ATTACHMENT No. 2**

Speedway LLC ("Speedway") owns and operates gasoline stations and convenience stores in multiple states coast to coast within the United States of America.

Speedway holds in excess of 1,500 alcoholic beverage licenses.

Despite an aggressive training program for employees, from time to time, on occasion, Speedway has been subject to disciplinary action for allegedly selling alcohol or tobacco to an underage person or failure to properly post permits or signage. Speedway's disciplinary action is typically a fine or brief suspension of permitted privileges.

Additionally, on occasion, Speedway may have been denied an alcoholic beverage license after it was determined that the property was statutorily too close to a church, school, or other protected property. Records of such denials are not maintained.

{In Illinois, 5 locations have been ordered to serve a suspension of alcoholic beverage licenses for a brief time ranging from 2 to 30 days. These locations are as follows:

- Speedway #4237 8000 W. 95th St., Hickory Hills, IL 60457
- Speedway #5393 15 Randall Rd., North Aurora, IL 60542
- Speedway #5464 111 S. Kinzie Ave., Bradley, IL 60915
- Speedway #7077 2330 W. Station, Kankakee, IL 60901
- Speedway #7448 3004 111th St., Naperville, IL 60564

No store operated by Speedway in Illinois has ever had an alcoholic beverage license revoked.

20. Does the applicant understand and agree that State or Village laws and ordinances will be refetate that such violation may result in the suspension	ferred to the Local Liquor Control Commission and
21. Does the applicant understand and agree that and/or Hampshire Police Department shall have premises licensed hereunder to determine wh have been or are being violated, and at such the connection therewith?	ve the authority to enter at any time upon the ether any State or Village laws and ordinances
22. Does the applicant understand and agree that shall not constitute property, nor shall it be sul nor shall it be alienable or transferable, volunt encumbered or hypothecated?	bject to attachment, garnishment or execution,
	please list and briefly describe, any and all ment during the period of this license. (If any period of this license this license period of this license that must be Hampshire Liquor Commission prior to being
SIGNATURE OF APPLICANT (S) CORPORATION SIGNATURES	INDIVIDUAL OR PARTNERSHIP SIGNATURES
Pres. 7 4 1 1 Timothy T. Griffith. President for Speedway Sec. N/A · Vacant	NA
STATE OF Ohio ) SS County of Clark }	
The under the sale are that all statements are tr	rue and correct.
JILL M SHAW NOTARY PUBLIC - OHIO CLARK COUNTY MY COMMISSION EXPIRES 07/08/2023	- ZALA
Subscribed and sworn to before me this  8th, day of Movember, 2021	
	e m. Shaw

**Notary Public** 



### CONTINUATION CERTIFICATE FIDELITY OR SURETY BONDS/POLICIES

In consideration of \$ 100.00 dollars renewal premium, the term of Bond/Policy No. 104087488-291 in the
amount of \$ 1,500.00 , issued on behalf of SPEEDWAY ILC ,
whose address is 3200 Hackberry Road Irving, TX 75063
n favor of VILLAGE OF HAMPSHIRE
whose address is 234 S State Street Hampshire, IL 60140
in connection with Liquor License Bond - Speedway #Unit #5038 @ 110 Arrowhead Orive, is hereby extended to
subject to all covenants and conditions of said bond/policy.
This certificate is designed to extend only the term of the bond/policy. It does not increase the amount which may be
payable thereunder. The aggregate liability of the Company under the said bond/policy together with this certificate shall
be exactly the same as, and no greater than it would have been, if the said bond/policy had originally been written to
expire on the date to which it is now being extended.
Signed, sealed and dated November 10, 2021
TRAVELERS CASUALTY AND SURETY COMPANY OF AMERICA
By: Will With rock
Kelly A. Westbrook Attorney-in-Fact

License No.

Effective Date: 12/31/2021



Travelers Casualty and Surety Company of America Travelers Casualty and Surety Company St. Paul Fire and Marine Insurance Company

### **POWER OF ATTORNEY**

KNOW ALL MEN BY THESE PRESENTS: That Travelers Casualty and Surety Company of America, Travelers Casualty and Surety Company, and St. Paul Fire and Marine Insurance Company are corporations duly organized under the laws of the State of Connecticut (herein collectively called the "Companies"), and that the Companies do hereby make, constitute and appoint Kelly A. Weatbrook of DALLAS , their true and lawful Attorney(s)-in-Fact to sign, execute, seal and acknowledge any and all bonds, recognizances, conditional undertakings and other writings obligatory in the nature thereof on behalf of the Companies in their business of guaranteeing the fidelity of persons, guaranteeing the performance of contracts and executing or guaranteeing bonds and undertakings required or permitted in any actions or proceedings allowed by law.

IN WITNESS WHEREOF, the Companies have caused this instrument to be signed, and their corporate seals to be hereto affixed, this 21st day of April, 2021,







State of Connecticut

City of Hartford ss.

On this the 21st day of April, 2021, before me personally appeared Robert L. Raney, who acknowledged himself to be the Senior Vice President of each of the Companies, and that he, as such, being authorized so to do, executed the foregoing instrument for the purposes therein contained by signing on behalf of said Companies by himself as a duly authorized officer.

IN WITNESS WHEREOF, I hereunto set my hand and official seal.

My Commission expires the 30th day of June, 2026



Anna P. Nowik, Notary Public

Robert L. Raney, Senior Vice President

This Power of Attorney is granted under and by the authority of the following resolutions adopted by the Boards of Directors of each of the Companies, which resolutions are now in full force and effect, reading as follows:

RESOLVED, that the Chairman, the President, any Vice Chairman, any Executive Vice President, any Senior Vice President, any Vice President, any Senior Vice President, any Vice President, any Second Vice President, the Treasurer, any Assistant Treasurer, the Corporate Secretary or any Assistant Secretary may appoint Attorneys-in-Fact and Agents to act for and on behalf of the Company and may give such appointee such authority as his or her certificate of authority may prescribe to sign with the Company's name and seal with the Company's seal bonds, recognizances, contracts of indemnity, and other writings obligatory in the nature of a bond, recognizance, or conditional undertaking, and any of said officers or the Board of Directors at any time may remove any such appointee and revoke the power given him or her; and it is

FURTHER RESOLVED, that the Chairman, the President, any Vice Chairman, any Executive Vice President, any Senior Vice President or any Vice President may delegate all or any part of the foregoing authority to one or more officers or employees of this Company, provided that each such delegation is in writing and a copy thereof is filled in the office of the Secretary; and it is

FURTHER RESOLVED, that any bond, recognizance, contract of indemnity, or writing obligatory in the nature of a bond, recognizance, or conditional undertaking shalf be valid and binding upon the Company when (a) signed by the President, any Vice Chairman, any Executive Vice President, any Senior Vice President or any Vice President, any Second Vice President, the Treasurer, any Assistant Treasurer, the Corporate Secretary or any Assistant Secretary and duly attested and sealed with the Company's seal by a Secretary or Assistant Secretary; or (b) duly executed (under seal, if required) by one or more Attorneys-in-Fact and Agents pursuant to the power prescribed in his or her certificate or their certificates of authority or by one or more Company officers pursuant to a written delegation of authority; and it is

FURTHER RESOLVED, that the signature of each of the following officers: President, any Executive Vice President, any Senior Vice President, any Vice President, any Assistant Vice President, any Secretary, and the seal of the Company may be affixed by facsimile to any Power of Attorney or to any certificate relating thereto appointing Resident Vice Presidents, Resident Assistant Secretaries or Attorneys-in-Fact for purposes only of executing and attesting bonds and undertakings and other writings obligatory in the nature thereof, and any such Power of Attorney or certificate bearing such facsimile signature or facsimile seal shall be valid and binding upon the Company and any such power so executed and certified by such facsimile signature and facsimile seal shall be valid and binding on the Company in the future with respect to any bond or understanding to which it is attached.

I. Kevin E. Hughes, the undersigned, Assistant Secretary of each of the Companies, do hereby certify that the above and foregoing is a true and correct copy of the Power of Attorney executed by said Companies, which remains in full force and effect.

Dated this 10th day of November , 2021







Kevin E. Hughes, Assistant Secretary



DATE(MM/DD/YYYY)

CER CER	RTIFIC	ATE OF L	IABILI	TY INS	URAN	CE		06/08/2021
HIS CERTIFICATE IS ISSUED AS A ERTIFICATE DOES NOT AFFIRMATIVEL HIS CERTIFICATE OF INSURANCE	MATTER Y OR NE	OF INFORMATION GATIVELY AMEND,	ONLY AND	CONFERS N	O RIGHTS	UPON THE CERTIFE AFFORDED BY T	HE POLIC	OLDER. THIS HES BELOW. AUTHORIZED
EPRESENTATIVE OR PRODUCER, AND THE	CERTIFICA	ATE HOLDER.						
PORTANT: If the certificate holder is UBROGATION IS WAIVED, subject to ertificate does not confer rights to the certifi	the term	s and conditions o	f the policy,	must have certain polic	ADDITIONAL cles may rec	. INSURED provision puire an endorsemen	ns or be t. A state	endorsed. If ment on this
NUCER	louto notabl	111100 01 00011 011011	CONTACT					
Risk Services Southwest, Inc.			PHONE (A/C, No. I	(866) 2	283-7122	FAX (A/C. No.):	300) 363-0	105
las TX Office 5 Lyndon B Johnson Freeway			E-MAIL			j gyc. No.;		
te 1500 las TX 75244 USA			ADDRESS				=>	
143 17 77244 007				IN	ISURER(S) AFFOI	RDING COVERAGE		NAIC#
RED			INSURER			surance Company		22667
Speedway Holdings, LLC O Hackberry Road			INSURER	B: Irons	shore Speci	alty Insurance C	ompany	25445
ing TX 75063 USA			INSURER	C:				
			INSURER	D:				
			INSURER					
			INSURER	F:	DE	WISION NUMBER		
IS IS TO CEPTIEV THAT THE POLICIES	OF INSUE	ANCE LISTED BELOV	W HAVE BEEL	N ISSUED TO	THE INSUR	VISION NUMBER:	OR THE P	OLICY PERIOD
DICATED MOTAITHSTANDING ANY REOL	IIDEMENT	TERM OR CONDITION	ON OF ANY	CONTRACT (	OR OTHER I	DOCUMENT WITH RE	SPECT TO	WHICH THIS
ERTIFICATE MAY BE ISSUED OR MAY I	PERTAIN, ICIES. LIMIT	THE INSURANCE AFF S SHOWN MAY HAVE E	FORDED BY BEEN REDUCE!	BY PAID CLA	IMS.			n are as requested
TOTAL OF INCUINANCE	ADDL SUBR	POLICY NUMB		POLICY EFF	POLICY EXP		LIMITS	
COMMERCIAL GENERAL LIABILITY	INSD WYD			LIMINGERICALITAL	Immooraa-tata	EACH OCCURRENCE		
CLAIMS-MADE OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)		
						MED EXP (Any one person)		
						PERSONAL & ADV INJURY		
GEN'L AGGREGATE LIMIT APPLIES PER						GENERAL AGGREGATE		
POLICY PRO- JECT LOC						PRODUCTS - COMP/OP AGG		
OTHER:								
AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)		
ANYAUTO						BODILY INJURY ( Per person		
SCHEDULED						BODILY INJURY (Per acciden	1)	
AUTOS ONLY HIRED AUTOS ONLY ONLY AUTOS ONLY AUTOS ONLY						PROPERTY DAMAGE (Per accident)		
1						EACH OCCURRENCE		
UMBRELLA LIAB OCCUR						AGGREGATE	_	
EXCESS LIAB CLAIMS-MADE								
DED RETENTION  WORKERS COMPENSATION AND						PER STATUTE	отн	
EMPLOYERS' LIABILITY ANY PROPRIETOR / PARTNER / EXECUTIVE						E.L. EACH ACCIDENT	-	
OFFICER/MEMBER EXCLUDED? (Mandatory In NH)	N/A					E.L. DISEASE-EA EMPLOYEE		
If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE-POLICY LIMIT		
Liquor Liab Cvg		HDOG71453558		01/01/2021	01/01/2022	Each Occurrence		\$500,000
		Liquor Liability	у			Aggregate		\$300,00
CRIPTION OF OPERATIONS/LOCATIONS/VEHICLES (ACC: 5036 / 110 Arrowhead Dr., Hami	ORD 101, Addition	Liquor Liability	oe attached if more s	space is required)		Aggregate		\$500,00
3030 / IIO Allowieau Dr., Haiii	vanile, l	E GOTTO, EIGUOI	FICHISE WA	44/ 44/	16/	,,		
RTIFICATE HOLDER			CANCELLA	TION				
			SHOULD A	ANY OF THE	ABOVE DESC	RIBED POLICIES BE C	ANCELLED I	BEFORE THE
			EXPIRATION POLICY PRO	DATE THERE	OF, NOTICE WI	ILL BE DELIVERED IN	ACCORDANCE	WITH THE
Village of Hampshire			EXPIRATION	DATE THEREO	OF, NOTICE WI	ILL BE DELIVERED IN	ACCORDANCE	WITH THE

AGENCY CUSTOMER ID:

10039991

LOC #:



### ADDITIONAL REMARKS SCHEDULE

Page _ of _

AGENCY		NAMED INSURED
Aon Risk Services Southwest, Inc.		SEI Speedway Holdings, LLC
POLICY NUMBER See Certificate Number: 570087674420		
CARRIER	NAIC CODE	
See Certificate Number: 570087674420		EFFECTIVE DATE:

### ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: ACORD 25 FORM TITLE: Certificate of Liability Insurance
Named Insured Schedule

Speedway LLC;
Speedway Prepaid Card LLC
WIP LLC
Speedway.com LLC
SWTO LLC;
PFJ Southeast LLC
Speedway of Massachusetts LLC
Tesoro Northstore Company;
Speedway Western Holdings LLC
TRMC Retail LLC
Tesoro South Coast Company LLC;
Tesoro South Coast Company LLC;
Tesoro Sierra Properties, LLC;
2Go Tesoro Company;
Western Refining Retail TRS II, LLC
Western Refining Retail TRS I, LLC
Western Refining Texas Retail Services, LLC
Western Refining Retail, LLC
Giant Stop-N-Go of New Mexico LLC;
Giant Four Corners, LLC;
Northern Tier Bakery LLC

Jacques LaFond
General Manager Trainer
District 183 Elgin (SO00000026)

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Staff Staff				
Shelley Acker	Whitney Ferraro			
Customer Service Representative Lead FT	Assistant Manager Lead 50			
Angelic Korst	CLAIRE LEGO			
Assistant Manager Lead 50	Customer Service Representative FT			
Michael McGuire	Anne Roche			
Customer Service Representative FT	Customer Service Representative PT			
Cynthia Sabin	Jerrick Weston			
Customer Service Representative FT	Cafe Manager			



This Certificate of Completion is to Certify that

### Jacques Lafond

has met all training requirements and successfully completed the following course and/or exam.

### Illinois BASSET Responsible Beverage Server Training

Date of Completion: August 12, 2020

Expiration Date: August 12, 2023 unless otherwise mandated by your local jurisdiction

State Student ID: 305185 Course/Exam Provider Number: 5A-0079696 BASSETpermit.com is approved by the Illinois Liquor Control Commission. Your training information has been submitted to the Illinois Liquor Control Commission. This is a temporary certificate and your official BASSET certification card will be mailed to you directly from them.



Authorized Signature

Diversys Learning, Inc. 1101 Arrow Point Drive, Suite 302 Cedar Park, TX 78613

# N FoodAndBev Training. Con

This is to certify that

# Wy Food A Shelley Acker in inc.

has successfully completed the

### Food&Bevtraining.

**BASSET Off-Premise Alcohol Training** 

This is your course completion certificate, valid for three years from the date of completion below. This certificate also serves as your temporary BASSET permit, valid as such for 30 days from the date of completion below. Your official BASSET card will be mailed to you by the ILCC.

Completed on: June 9, 2021

975913

Student ID:

L BASSETT License # 5A-1141366

Jonny White
Johny White
Authorized Signature
MyFoodAndBevTraining.com



This Certificate of Completion is to Certify that

### Angelic Korst

has met all training requirements and successfully completed the following course and/or exam.

### Illinois BASSET Responsible Beverage Server Training

Date of Completion: August 22, 2019

Expiration Date: August 21, 2022 unless otherwise mandated by your local jurisdiction

State Student ID: 304549

Course/Exam Provider Number: 5A-0079696

BASSETpermit.com is approved by the Illinois Liquor Control Commission. Your training information has been submitted to certificate and your official BASSET certification card will be the Illinois Liquor Control Commission. This is a temporary mailed to you directly from them.



Authorized Signature

Diversys Learning, Inc. 1101 Arrow Point Drive, Suite 302 Cedar Park, TX 78613

# A FoodAndBev Training. Consadasser Off-Premise Alcohol Training

This is to certify that

AND THE PARTY AND A PARTY.

# My Food Michael McGuire

has successfully completed the

### Food&Bevtraining.

**BASSET Off-Premise Alcohol Training** 

This is your course completion certificate, valid for three years from the date of completion below. This certificate also serves as your temporary BASSET permit, valid as such for 30 days from the date of completion below. Your official BASSET card will be mailed to you by the ILCC.

Completed on: October 25, 2021

Student ID: 1022316

|L BASSETT License # 5A-1141366

Jonny White
Johny White
Authorized Signature
MyFoodAndBevTraining.com

# N FoodAndBev Training.com

This is to certify that

# My Food A Cynthia Sabining Com

has successfully completed the

### Food&Bevtraining.

**BASSET Off-Premise Alcohol Training** 

rom the date of completion below. This certificate also serves This is your course completion certificate, valid for three years from the date of completion below. Your official BASSET card as your temporary BASSET permit, valid as such for 30 days will be mailed to you by the ILCC.

May 28, 2021 Completed on:

972064 L BASSETT License # Student ID:

54-1141366

Jonny White **Authorized Signature** 

MyFood And Bev Training.com

# N FoodAndBev Training.com

This is to certify that

# WyFood Mhitney Ferraroning.

has successfully completed the

### Food&Bevtraining.

**BASSET Off-Premise Alcohol Training** 

This is your course completion certificate, valid for three years from the date of completion below. This certificate also serves as your temporary BASSET permit, valid as such for 30 days from the date of completion below. Your official BASSET card will be mailed to you by the ILCC.

Completed on: July 28, 2021

991275

Student ID:

L BASSETT License # 5A-1141366

Jonny White Johny White Authorized Signature

MyFoodAndBevTraining.com

# N FoodAndBev Training. Co.

This is to certify that

# MVFOODA CLAIRE LEGOINING.

has successfully completed the

### Food&Bevtraining.

**BASSET Off-Premise Alcohol Training** 

This is your course completion certificate, valid for three years rom the date of completion below. This certificate also serves rom the date of completion below. Your official BASSET card as your temporary BASSET permit, valid as such for 30 days will be mailed to you by the ILCC.

June 4, 2021 Completed on:

5A-1141366 L BASSETT License #

972322

Student ID:

MyFoodAndBevTraining.com Jonny White **Authorized Signature** 



This Certificate of Completion is to Certify that

### Anne Roche

has met all training requirements and successfully completed the following course and/or exam.

### Illinois BASSET Responsible Beverage Server Training

Date of Completion: May 05, 2020

Expiration Date: May 05, 2023

unless otherwise mandated by your local jurisdiction

State Student ID: 305078

Course/Exam Provider Number: 5A-0079696

BASSETpermit.com is approved by the Illinois Liquor Control Commission. Your training information has been submitted to the Illinois Liquor Control Commission. This is a temporary certificate and your official BASSET certification card will be mailed to you directly from them.



Authorized Signature

Diversys Learning, Inc. 1101 Arrow Point Drive, Suite 302 Cedar Park, TX 78613

### MFOOdAndBevTraining.com **BASSET Off-Premise Alcohol Training**

This is to certify that

# Wy Food A Jernick Weston ming.

has successfully completed the

### Food&Bevtraining.

**BASSET Off-Premise Alcohol Training** 

rom the date of completion below. This certificate also serves his is your course completion certificate, valid for three years rom the date of completion below. Your official BASSET card as your temporary BASSET permit, valid as such for 30 days will be mailed to you by the ILCC.

June 22, 2021 975074 Completed on:

54-1141366 IL BASSETT License # Student ID:

MyFood And Bev Training.com Jonny White **Authorized Signature** 



EMBRACE OPPORTUNITY HONOR TRADITION

### Village of Hampshire 234 S. State Street, Hampshire, IL 60140

Phone: 847-683-2181 • www.hampshireil.org

### APPLICATION FOR LIQUOR LICENSE

DATE:
NAME OF BUSINESS: Hampshire Gasoline Inc sales TAX 10:4020-3778
NAME OF APPLICANT: HITESH Patel
ADDRESS OF BUSINESS: 1000 S. State Street, Hampshine 12 6014
BUSINESS PHONE NO.: 847-683-7180
MAILING ADDRESS: 1000 S. State Street Hampshire IL GOIGO
TO: Local Liquor Control Commission Village of Hampshire, Illinois
Pursuant to the provisions of Chapter IIIV, Alcoholic Liquor Regulations, of the Municipal Code of Hampshire, Illinois, as amended, and pursuant to Chapter 43 of the Illinois Revised Statutes, as amended, the undersigned hereby makes application for an Alcoholic Liquor License as follows:
1. License Class and Annual Fee (check one):
Class A-1 - \$1,500.00 Class C-4 - \$1,500.00
Class A-2 - \$1,250.00 Class D - \$1,750.00
Class B-1 - \$1,500.00 Class E - \$1,750.00
——————————————————————————————————————
Class C-1 - \$1,500.00 Class G - \$ 75.00
Class C-2 - \$1,500.00 Class H- \$ 500.00
Class C-3 - \$1,750.00 Class I- \$ 500.00
2. License Period:
Commencing on January 1, 2012 and ending December 31, 2022 or Commencing on and ending December 31,
3. Type of Business Entity (check one):
Individual Corporation
Partnership Other (specify)

4. The following information must be provided with respect to any and all individual owners, partners, corporate officers, corporate directors, resident managers, and, if a corporation, all persons owning directly or beneficially more than 5% of the corporation stock:

NOTE: Full names must be listed with middle initials. Furthermore, the applicant must notify the Local Liquor Control Commission of change in the partnership, officers, directors, persons holding directly or beneficially more than 5% in interest of the stock or ownership interest, or managers of the establishment within ten (10) days of said change.

	me: -titesh Patel
BIR	THDAY: 05/29/1965
HOI	ME ADDRESS: 1545 Rulland CT, Schaumburg 1L 6017.  IVERS LICENSE# P340-3376-5153 HOME PHONE# 847-845-71
DRI	IVERS LICENSE# P340-3376- 5153 HOME PHONE# 847-845-71
BUS	SINESS STATUS: CURVEIL
PEF	RCENTAGE OF STOCK HELD: 150 0
Nai	me:
BIR	THDAY:
	ME ADDRESS:
DR	IVERS LICENSE# HOME PHONE#
	SINESS STATUS:
PE	RCENTAGE OF STOCK HELD:
	(if additional space is required, please attach a separate sneet of paper)
5.	Is the applicant a citizen of the United States?
	If an Illinois corporation, state date of corporation:
	business corporation Act.
6.	State the character of the applicant's business, and in case of a corporation, the objects for which it was formed. Retail Gas Charles With Convenience Sto
7.	State the location and physical description of the premises which is to be operated under such license and the nature of the business at such location.
: 	State whether the applicant has ever had a liquor license issued by the Federal government, any State government or any municipality. VILLAGE OF CAMPS WILL  If answer is in the affirmative, state the name of the licensing unit of government, when and where said of license was issued. Hamps Shide-

9.	Has the applicant ever had any previous liquor license revoked?  If answer is in the affirmative, state the date and reason for such revocation.
10.	Has the applicant and the designated managers read and do they understand and agree not to violate any of the liquor laws of the United States, the State of Illinois or any of the ordinances of the Village of Hampshire in conducting business?
11.	State whether all individual owners, partners, officers, directors, persons holding more than 5% of the corporate stock have been fingerprinted by the Illinois State Police and, if so the date thereof.
	Note: This application will remain incomplete and will not be considered until question #11 can be answered in the affirmative.
12.	State the name of the person who will generally be managing the ongoing affairs of this business at these premises. Named Chitkara  State whether said manager has been fingerprinted by the Illinois State Police and, if so the date
	Note: This application will remain incomplete and will not be considered until question #12 can be answered in the affirmative.
13.	Has the applicant attached Surety Bond and Certificate of Liability Insurance to this application or already furnished it to the Village?
14.	If the applicant does not own the premises for which the license is sought, does the applicant have a lease for the full period for which the license is to be issued?
15.	State whether the applicant has ever been convicted of a felony offense under any Federal or State law?
16.	State whether the applicant has ever been convicted of a violation of any Federal or State law concerning the manufacture, possession or sale of alcoholic liquor?
	State whether a Federal Gaming Device Stamp or Federal Wagering Stamp has been issued to the applicant, the premises, or to any corporation in which the applicant holds 5% or more Stock?
	If answer is in the affirmative, has the stamp been issued for any portion or all of the time to be covered by this applicant?
18.	Is the premises within 100 feet of any real property of any church, school, hospital, home for the aged or indigent persons or for veterans, their wives or children, or any military or naval station?
19.	Are the premises for which license is herein applied for a store or other place of business where the majority of customers are minors of school age or where the principal business transacted consists of school books, school supplies, food, lunches or drinks for such minors?

20. Does the applicant understand and agree that du	ing the license period, any violation of Federal
State or Village laws and ordinances will be referr	ed to the Local Liquor Control Commission and
that such violation may result in the suspension o	r revocation of said license?
21 Does the applicant understand and agree that me	malhan
21. Does the applicant understand and agree that me	moers of the Local Liquor Control Commission
and/or Hampshire Police Department shall have t	ne authority to enter at any time upon the
premises licensed hereunder to determine wheth	er any State or Village laws and ordinances
have been or are being violated, and at such time	to examine the premises of said licensee in
connection therewith?	<u> </u>
22 Departure of the second sec	
22. Does the applicant understand and agree that a lie	ense shall be purely a personal privilege, and
shall not constitute property, nor shall it be subject	t to attachment, garnishment or execution,
nor shall it be alienable or transferable, voluntarily	or involuntarily, or subject to being
encumbered or hypothecated?	and the second s
23. (If applying for other classes except Class B. 1 and I	
23. (If applying for other classes except Class B-1 and I	3-2): Does the applicant understand that the
acceptability of all entertainment shall be subject	to review by the Local Liquor Control
Commission?	
On the attached addendum for Entertainment, ple	ase list and briefly describe, any and all
entertainment to be provided in your establishme	nt during the period of this license. (If any
additional entertainment is planned during the pe	riod of this license, such entertainment must
be listed and described for, and approved by, the I	Hampshire Liquor Commission prior to being
conducted or performed. Additional entertainmen	t forms are available at the Office of the
Village Clerk.	The state of the office of the
CORPORATION SIGNATURES IN  Pres	DIVIDUAL OR PARTNERSHIP SIGNATURES HITESH Patel
Sec	
والمسكر والمسترور يبيب والمستنسب ويعتقن سروا يتابعون والمتحاويون والمسترسدي ويتواكر والمتحاوية	and the second of the second o
STATE OF }	
) SS	
County of COL	
/	
The undersigned swears that all statements are true a	and correct.
}	· ·
MIGUEL A CORTEZ	
Official Seal Notary Public - State of Illinois	<u> </u>
CORPORATE SEAL My Commission Expires Aug 6, 2023	
Subscribed and sworn to before me this	Λ
$\frac{20^{+}}{20^{+}}$ day of $\frac{100}{20^{-}}$ , $\frac{202}{20^{-}}$	110 11 011 0
<u> </u>	11 11 N/ V. //
	MANUV X-1 MILL
	Motory Dubli-
	//Nothry Public
	v



### CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 11/30/2021

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on

th	is cer	rtificate does	not	confer rights t	to the	cert	terms and conditions of fficate holder in lieu of st	uch en	dorsement(s)		require an endorsemer	n. As	tatement on
PRODUCER Cooper & Allison and Hub International Ltd 100 Tower Dr. Ste 129					CONTACT Georgie Chico NAME: PHONE (A/C, No, Ext): (630) 908-4292  FAX (A/C, No): (630) 468-1361								
												je, IL 60527	
									INS	SURER(S) AFFOI	RDING COVERAGE		NAIC #
								INSUR	ERA: Acuity				14184
INSU	RED							INSUR	_{ERB} : Employ	ers Insura:	nce Co		
		Hampshii	re G	iasoline, inc.				INSUR	ERC:				
		1000 S St						INSURER D:					
		Hampshii	re, I	L 60140				INSUR	ERE:				
								INSUR	ERF:				
	<u>VERA</u>					ICATE NUMBER:			•		REVISION NUMBER:		
IN C: E:	IDICAT ERTIFI XCLUS	IED. NOTWIT ICATE MAY B SIÓNS AND CO	HS E IS NDI	TANDING ANY F SSUED OR MAY TIONS OF SUCH	REQU POU	IREM CTAIN CIES	SURANCE LISTED BELOW ENT, TERM OR CONDITIO , THE INSURANCE AFFOR LIMITS SHOWN MAY HAVE	NOF.	ANY CONTRA: Y THE POLIC! REDUCED BY	CT OR OTHER IES DESCRIB PAID CLAIMS	R DOCUMENT WITH RESP: SED. HEREIN IS SUBJECT :	ЕСТ ТО	WHICH THIS
INSR LTR		TYPE OF I			insp	SUBP	POLICY NUMBER		POLICY EFF (MM/QQ/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMI.	TS.	
Α	X	COMMERCIAL GE	_	_							EACH OCCURRENCE	s	2,000,000
	$\vdash$	CLAIMS-MAD	E	X OCCUR		1	Z63529		2/1/2021	2/1/2022	DAMAGE TO RENTED PREMISES (Ea occurrence)	s	300,000
	⊢,					1				•	MED EXP (Any one person)	<b>↓</b> ≇	10,000
	ᅰ.										PERSONAL & ADV INJURY	s	2,000,000
	_	LAGGREGATE LI									GENERAL AGGREGATE	<u>  \$</u>	4,000,000
		Роцсу 💹 🏗	ČŤ	LOC							PRODUCTS - COMP/OP AGG	s	4,000,000
	i - '-	DTHER: Liquo		aphiey	_	-					Aggregate Limit	\$	1,000,000
Α	$\overline{}$	MOBILE LIABILIT	Y			ļ					COMBINED SINGLE LIMIT (Ee eccident)	\$	2,000,000
		ANY AUTO		SCHEDULED		Z63529			2/1/2021	2/1/2022	BODILY INJURY (Per person)	s	
	_	OWNED AUTOS ONLY		SCHEDULED AUTOS							BODILY INJURY (Per accident)	\$	
	<b>X</b>	HIRED AUTOS ONLY	Х	NOTES VONER							PROPERTY DAMAGE (Per accident)	\$	
				<u></u>								\$	
	$\vdash$	UMBRELLA LIAB	H	OCCUR	_						EACH OCCURRENCE	\$	
	<u></u>	EXCESS LIAB		CLAIMS-MADE	=						AGGREGATE .	\$	
В		DED RETS			┿	-	<u> </u>				M DED IN OTH	\$	<del></del>
_		ERS COMPENSA MPLOYERS' LIAB				N/A EIG263848203			7/1/2021	7/1/2022	X PER X OTH-		4 000 000
	OFFICE	ROPRIETOR/PART ER/MEMBER EXCI atory in NH)	NER UDE	EXECUTIVE N	N/A						E.L. EACH ACCIDENT	\$	1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below				1					1	E.L. DISEASE - EA EMPLOYEE	\$	1,000,000
A	Build		RATIO	ONS below	╁	1	Z63529		2/1/2021	2/1/2022	E.L. DISEASE - POLICY LIMIT RC \$1,000 DED	\$	1,000,000
	BPP						Z63529		2/1/2021		' '		1,359,181
••				İ	İ	7.00023		E IIZUZ I	21 112022	RC \$1,000 DED		156,000	
Build Bld 1 Bld 2 Stora Crun Polic	ling Li I: C-Si I: Can age Ta n & Fo ey # Si	imit Breakdov tore- \$946,857 opy, Tanks, P ank Pollution I	um; Liab y In	ility: Surance Period 4-18-21			t 9 101, Additional Remarks Schedu	ule, may k	oe attached if mor	e spaca is requir	red)	l	<u> </u>
CEF	RTIFIC	CATE HOLDE	ER			•		CAN	CELLATION	<del></del> -			<u>.</u>
		Village of 234 S. Sta Hampshir	te S	št.				ACC	EXPIRATION	N DATE TH THITHE POLIC	ESCRIBED POLICIES BE C EREOF, NOTICE WILL LY PROVISIONS.	ANCEL BE DE	LED BEFORE ELIVÉRED IN
								Sala	LANUQ "	•			



### **CONTINUATION CERTIFICATE**

RLI Insurance Compa	hereby continues in force Bond No. LSM1131456
briefly described as	Liquor Liability For Retail Sales
bound unto the	Village Of Hampshire
on behalf of	Hampshire Gasoline Inc
Eocation:Name & Address	Bill To Name & Address (if different);
Hampstire Casiline Inc. 1999 S. State Specie	
Hamashires (11/60/40	
	red upon the express condition that the Undersigned company's liability under
	on Certificates issued in connection therewith shall not be cumulative and
shall not in any event exceed the amount of	said bond as hereinbefore set forth.
Dated this <u>13th</u> day of <u>April</u>	, <u>2021</u> .
	AND ANGE
THE THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPER	RLI Insurance Company  SEAL  By  By
	Barton W. Davis Vice President

THIS MUST BE FILED WITH THE OBLIGEE.

\$ 1200 11-30-51



### Village of Hampshire

234 S. State Street, Hampshire, IL 60140 Phone: 847-683-2181 • www.hampshireil.org

### APPLICATION FOR LIQUOR LICENSE

DATE: 11-20-21					
NAME OF BUSINESS: Rosatis of Hampshire sales Tax ID: 36-4426203					
NAME OF APPLICANT: Marianna Gigele					
ADDRESS OF BUSINESS: 826 Centennial Drive Hampshire IL 60140					
BUSINESS PHONE NO.: 847-683-1111					
MAILING ADDRESS: 826 Centennial Dr. Hampshire, IL 60140					
TO: Local Liquor Control Commission Village of Hampshire, Illinois					
Pursuant to the provisions of Chapter IIIV, Alcoholic Liquor Regulations, of the Municipal Code of Hampshire, Illinois, as amended, and pursuant to Chapter 43 of the Illinois Revised Statutes, as amended, the undersigned hereby makes application for an Alcoholic Liquor License as follows:					
1. License Class and Annual Fee (check one):					
Class A-1 - \$1,500.00Class C-4 - \$1,500.00Class A-2 - \$1,250.00Class D - \$1,750.00Class B-1 - \$1,500.00Class E - \$1,750.00Class B-2 - \$1,500.00Class F - \$1,500.00Class C-1 - \$1,500.00Class G - \$ 75.00Class C-2 - \$1,500.00Class H - \$ 500.00Class C-3 - \$1,750.00Class I - \$ 500.00					
2. License Period:					
Commencing on January 1, 2022 and ending December 31, 2022 or Commencing on and ending December 31,					
3. Type of Business Entity (check one):					
☐ Individual ☐ Corporation					
Partnership Other (specify)					

4. The following information must be provided with respect to any and all individual owners, partners, corporate officers, corporate directors, resident managers, and, if a corporation, all persons owning directly or beneficially more than 5% of the corporation stock:

NOTE: Full names must be listed with middle initials. Furthermore, the applicant must notify the Local Liquor Control Commission of change in the partnership, officers, directors, persons holding directly or beneficially more than 5% in interest of the stock or ownership interest, or managers of the establishment within ten (10) days of said change.

Name: Mariannal Gigele & Richard & Gigele				
BIRTHDAY: 7-22-59 9 4-11-59				
HOME ADDRESS: 1411 Westbourne Pkuy Algorquin, IL 60102				
DRIVERS LICENSE#6240-5525-9808 /6240-33-9104 HOME PHONE# 847-458-0446				
BUSINESS STATUS: ACTIVE				
PERCENTAGE OF STOCK HELD: 25%				
Name: Anthony M Patti				
BIRTHDAY: 8-10-1949				
HOME ADDRESS: 28052 W. Niagara St. Lakemoor, IL 60051				
DRIVERS LICENSE# \$\overline{P300}  0134  9227  Home \text{PHONE} \(\overline{L30-688-4150}\)				
BUSINESS STATUS:				
PERCENTAGE OF STOCK HELD: 50 % (If additional space is required, please attach a separate sheet of paper)				
i de la companya de la companya de la companya de la companya de la companya de la companya de la companya de				
5. Is the applicant a citizen of the United States?				
If naturalized, state date and place of naturalization:				
If an Illinois corporation, state date of corporation: <u>June 2000</u>				
If a foreign corporation, state date qualified to transact business in Illinois pursuant to the Illinois Business Corporation Act				
6. State the character of the applicant's business, and in case of a corporation, the objects for which it was formed. Restaurant Pizzalia DiNe-IN, Take Dut				
7. State the location and physical description of the premises which is to be operated under such license and the nature of the business at such location. 826 (Internal Dr. Hampshire IL 6014				
——————————————————————————————————————				
8. State whether the applicant has ever had a liquor license issued by the Federal government, any				
State government or any municipality				
If answer is in the affirmative, state the name of the licensing unit of government, when and where said of license was issued. Nuable of Hampshire				
where said of ficelise was issued. 1100100 01 HUMPSHILL				

9.	Has the applicant ever had any previous liquor license revoked?
10	Has the applicant and the designated managers read and do they understand and agree not to violate any of the liquor laws of the United States, the State of Illinois or any of the ordinances of the Village of Hampshire in conducting business?
11.	State whether all individual owners, partners, officers, directors, persons holding more than 5% of the corporate stock have been fingerprinted by the Illinois State Police and, if so the date thereof.
	Note: This application will remain incomplete and will not be considered until question #11 can be answered in the affirmative.
12.	State the name of the person who will generally be managing the ongoing affairs of this business at these premises. ANTHONY PATTI
	State whether said manager has been fingerprinted by the Illinois State Police and, if so the date thereof
	Note: This application will remain incomplete and will not be considered until question #12 can be answered in the affirmative.
13.	Has the applicant attached Surety Bond and Certificate of Liability Insurance to this application or already furnished it to the Village?
14.	If the applicant does not own the premises for which the license is sought, does the applicant have a lease for the full period for which the license is to be issued?
15.	State whether the applicant has ever been convicted of a felony offense under any Federal or State law?
16.	State whether the applicant has ever been convicted of a violation of any Federal or State law concerning the manufacture, possession or sale of alcoholic liquor?
	State whether a Federal Gaming Device Stamp or Federal Wagering Stamp has been issued to the applicant, the premises, or to any corporation in which the applicant holds 5% or more Stock?
	If answer is in the affirmative, has the stamp been issued for any portion or all of the time to be covered by this applicant?
18.	Is the premises within 100 feet of any real property of any church, school, hospital, home for the aged or indigent persons or for veterans, their wives or children, or any military or naval station?
19.	Are the premises for which license is herein applied for a store or other place of business where the majority of customers are minors of school age or where the principal business transacted consists of school books, school supplies, food, lunches or drinks for such minors?

20. Does the applicant understand and agree that State or Village laws and ordinances will be re-	during the license period, any violation of Federal, ferred to the Local Liquor Control Commission and
that such violation may result in the suspension	on or revocation of said license?
21. Does the applicant understand and agree that and/or Hampshire Police Department shall have premises licensed hereunder to determine wh have been or are being violated, and at such the connection therewith?	ve the authority to enter at any time upon the ether any State or Village laws and ordinances
22. Does the applicant understand and agree that shall not constitute property, nor shall it be sul nor shall it be alienable or transferable, volunts encumbered or hypothecated?	bject to attachment, garnishment or execution,
	please list and briefly describe, any and all ment during the period of this license. (If any period of this license, such entertainment must he Hampshire Liquor Commission prior to being
SIGNATURE OF APPLICANT (S) CORPORATION SIGNATURES	INDIVIDUAL OR PARTNERSHIP SIGNATURES
Pres.  Sec. Manana L Migle	
STATE OF	
County of KANE ) SS	
The undersigned swears that all statements are tre	ue and correct.
CORPORATE SEAL	OFFICIAL SEAL
Subscribed and sworn to before me this day of,	M BRANDES NOTARY PUBLIC - STATE OF ILLINOIS MY COMMISSION EXPIRES: 10/18/23
	Notary Public



### **CONTINUATION CERTIFICATE**

Western Surety Company hereby continues in force	Bond No. 62893474 briefly
described as LIQUOR LICENSE VILLAGE OF HAMPSHI	LRE
for T RICKS LTD DBA ROSATI'S PIZZA OF HAMPSH	ŢŖĒ
	, as Principal,
in the sum of \$ ONE THOUSAND FIVE HUNDRED AND I	NO/100 Dollars, for the term beginning
August 26 , 2021 , and ending _	August 26 , 2022 , subject to all
the covenants and conditions of the original bond referred to above.	
This continuation is issued upon the express condition that the liability of Western Surety Company	
under said Bond and this and all continuations thereof shall not be cumulative and shall in no event exceed	
the total sum above written.	
Dated this 22nd day of July,	2021 .
	By Paul T. Brufat, Vice President

THIS "Continuation Certificate" MUST BE FILED WITH THE ABOVE BOND.

Form 90-A-8-2012

# Western Surety Company

#### **POWER OF ATTORNEY**

#### KNOW ALL MEN BY THESE PRESENTS:

That WESTERN SURETY COMPANY, a corporation organized and existing under the laws of the State of South Dakota, and authorized and licensed to do business in the States of Alabama, Alaska, Arizona, Arkansas, California, Colorado, Connecticut, Delaware, District of Columbia, Florida, Georgia, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Michigan, Minnesota, Mississippi, Missouri, Montana, Nebraska, Nevada, New Hampshire, New Jersey, New Mexico, New York, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Utah, Vermont, Virginia, Washington, West Virginia, Wisconsin, Wyoming, and the United States of America, does hereby make, constitute and appoint

	yoming, and the United State Paul T. Bruflat	of .			
State of		its regularly	elected	Vice President	
as Attorney-i	n-Fact, with full power and au half as Surety and as its act a	thority hereby confer	red upon h	im to sign, execut	e, acknowledge and deliver for
One <u>LI</u>	OUOR LICENSE VILLAGE	OF HAMPSHIRE			
bond with bo	nd number <u>62893474</u>				
for T RIC	KS LTD DBA ROSATI'S	PIZZA OF HAMPS	HIRE		
as Principal i	n the penalty amount not to ex	ceed: \$1,500.00		<b>_</b> •	
Company duly Section 7. name of the C Board of Dire Attorneys-in-F seal is not ne signature of al	adopted and now in force, to-wit: All bonds, policies, undertakings, ompany by the President, Secreta ctors may authorize. The Presid act or agents who shall have aut cessary for the validity of any bor ny such officer and the corporate s	Powers of Attorney, or oury, any Assistant Secreta ent, any Vice President hority to issue bonds, policies, undertaking ands, policies, undertaking eal may be printed by fa	ther obligations, Treasure Secretary, or ungs, Powers occimile.	ons of the corporation er, or any Vice Presid any Assistant Secret dertakings in the nar of Attorney or other o	of the by-laws of Western Surety in shall be executed in the corporate lent, or by such other officers as the tary, or the Treasurer may appoin me of the Company. The corporate obligations of the corporation. The
In Witnes	ss Whereof, the said WEST ent with the corpo	ERN SURETY COM rate seal affixed this _	PANY has 22nd	caused these pr	esents to be executed by its
ATTEST	Al Southers	er/	W E	STEPN SU	Buflet
	P. Leitheiser, As	sistant Secretary			Paul T. Bruflat, Vice Presiden
STATE OF	SOUTH DAKOTA				
COUNTY O	F MINNEHAHA				ary Public, personally appeared
	Paul T. Bruflat	and		P. Leitneis	ary Public, personally appeared
who, being k	ov me dulv sworn, acknowleda	ed that they signed th	e above Po	wer of Attorney as	Vice President
and Assista	nt Secretary, respectively, of t	the said WESTERN S	SURETY C	OMPANY, and acl	knowledged said instrument to
be the volun	tary act and deed of said Corp ১৬১৬১৬১৯১৬১৬১৬১৯১১	oration.		82 ca	1
\$ \$ \$ \$	M. BENT	3 3 3 3		mi	Bent

To validate bond authenticity, go to <a href="https://www.cnasurety.com">www.cnasurety.com</a> > Owner/Obligee Services > Validate Bond Coverage.

Notary Public

Form F1975-5-2021

#### **CERTIFICATE OF LIABILITY INSURANCE**

American Family Insurance Company 
American Family Mutual Insurance Company, S.I. if selection box is not checked.
6000 American Pky Madison, Wisconsin 53783-0001

Insured's Name and Address Rosatis Of Hampshire DBA as T-Ricks Ltd. 826 Centennial Dr Hampshire, IL 60140

Agent's Name, Address and Phone Number (Agt./Dist.)
Martin W Walsh
790 W BARTLETT RD
BARTLETT, IL 60103
(630) 893-1461 (076/809)

(630) 893-1461 (076/809)

This certificate is issued as a matter of information only and confers no rights upon the Certificate Holder.

This certificate does not amend, extend or after the coverage afforded by the policies listed below.

COVERAGES						
This is to certify that policies of insurance lis	ted below have been issued to the insur-	ed named above for the	policy period indica	ted, notwithstanding any requirement, term or con erein is subject to all the terms, exclusions, and co	dition of an	y contract or other such policies.
document with respect to which this certains	ne may be issued of may pertain, the mo		Y DATE	1		
TYPE OF INSURANCE	POLICY NUMBER  EFFECTIV (Mo, Day, Y		EXPIRATION (Mo, Day, Yr)	LIMITS OF LIABILIT		
Homeowners/		(IVIO, Day, TT)	(NO, Day, 11)	Bodily Injury and Property Damage		
Mobilehomeowners Liability				Each Occurrence	\$	,000
Boatowners Liability				Bodily Injury and Property Damage		
Doctownion Liability				Each Occurrence	\$	,000
Personal Umbrella Liability				Bodily Injury and Property Damage	\$	,000
				Each Occurrence Farm Liability & Personal Liability	Φ	,00
				Each Occurrence	\$	,00
Farm/Ranch Liability				Farm Employer's Liability		,,,,
				Each Occurrence	\$	,00
				Statutory		<b>大会大会大会大会大会</b>
Workers Compensation and	40 2/110400 00	00/00/0004	00/00/0000	Each Accident	\$	500,000
Employers Liability †	12-XH6108-93	08/02/2021	08/02/2022	Disease - Each Employee	\$	500,000
				Disease - Policy Limit	\$	500,000
General Liability				General Aggregate	\$	,00
Commercial General				Products - Completed Operations Aggregate	\$	,00
Liability (occurrence)				Personal and Advertising Injury	\$	,00
				Each Occurrence	\$	,00
				Damage to Premises Rented to You	\$	,00
				Medical Expense (Any One Person)	\$	,00
B 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	42 VIIC409 04	08/02/2021	08/02/2022	Each Occurrence††	\$	1,000,000
Businessowners Liability	12-XH6108-04	00/02/2021	06/02/2022	Aggregate††	\$	2,000,000
1 Santa - 1 Santa St. Santa	10 VIIC109 05	08/02/2021	08/02/2022	Common Cause Limit	\$	1,000,000
Liquor Liability	12-XH6108-05	00/02/2021	00/02/2022	Aggregate Limit	\$	2,000,000
Automobile Liability				Bodily Injury - Each Person	\$	,00
☐ Any Auto				Bodily Injury - Each Accident	\$	,00
☐ All Owned Autos				Bodhy Injury Cook / Corocon.	Ψ	,00
☐ Scheduled Autos				Property Damage	\$	,00
☐ Hired Auto						
Nonowned Autos				Bodily Injury and Property Damage Combined	\$	,00
Excess Liability						200
Commercial Blanket Excess				Each Occurrence/Aggregate	\$	,00
	<u> </u>		<u> </u>		-	
Other (Miscellaneous Coverag	es)					
DESCRIPTION OF OPERATIONS / LOCAT	TIONS / VEHICLES / RESTRICTIONS /	SPECIAL ITEMS		LThe individual	or nortnor	
BESCHI HON OF OF EIGHTONO FEGGA	note, verious, resultante in the	o, _o,		†The individual shown as insu	red elected	d to
						olicy. Have no
						erations aggregate nce limit and is
				included in po	licy aggreg	ate.
CERTIFICATE HOL	DER'S NAME AND ADDRES	s		CANCELLATION		
		13	Should any of	the above described policies be cancelled	before th	e expiration date
Attention: Linda Vasq	uez	th	ereof, the compan	y will endeavor to mail *( 30 days) writt ailure to mail such notice shall impose no obli	en notice	to the Certificate
Village of Hampshire		l H	pon the company,	its agents or representatives. *10 days unles	s differen	t number of days
234 S. State St			hown.			
			This certifies of ubject to cancellation	overage on the date of issue only. The ab on in conformity with their terms and by the law	ove desc vs of the s	nbed policies are tate of issue.
Hampshire, IL 60140			ATE ISSUED	AUTHORIZED REPRE		

## To verify this card holder go to Reerving, convverify

Return or refuse the ID. A sk for personal information when you suspect fraud. Examine the ID visually for photo and security features. Feel for pin holes, thickness, and rough surface.

Use the FEAR method to check IDs:



Alcohol Card Responsible Serving®



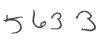
### Responsible Serving of Alcohol Marianna Gigele

Approved BASSET Program by the IL Logist Control Commission License # 5A 0092892 Identification Number: PSCC10000435041

Date of Issuance: 11-25-2019

Date of Expiration: 11-24-2022







HONOR TRADITION

# Village of Hampshire 234 S. State Street, Hampshire, IL 60140

Phone: 847-683-2181 • www.hampshireil.org

## APPLICATION FOR LIQUOR LICENSE

ATT DICATION TO A DIQUON ETCDINGE								
DATE: 11 30 (2)								
NAME OF BUSINESS: Block's Fresh Market SALES TAX ID: 4298 - 0607								
NAME OF APPLICANT: Mital R Pali								
ADDRESS OF BUSINESS: 199 Maple Place, Hampshire, II, 60140.								
BUSINESS PHONE NO.: 847 - 683 - 253 1.								
MAILING ADDRESS: 5ame								
TO: Local Liquor Control Commission Village of Hampshire, Illinois								
Pursuant to the provisions of Chapter IIIV, Alcoholic Liquor Regulations, of the Municipal Code of Hampshire, Illinois, as amended, and pursuant to Chapter 43 of the Illinois Revised Statutes, as amended, the undersigned hereby makes application for an Alcoholic Liquor License as follows:								
1. License Class and Annual Fee (check one):								
Class A-1 - \$1,500.00 Class C-4 - \$1,500.00								
Class A-2 - \$1,250.00 Class D - \$1,750.00								
Class B-1 - \$1,500.00 Class E - \$1,750.00								
Class B-2 - \$1,500.00 Class F - \$1,500.00								
Class C-1 - \$1,500.00 Class G - \$ 75.00								
Class C-2 - \$1,500.00								
Class C-3 - \$1,750.00 Class I- \$ 500.00								
2. License Period:								
Commencing on January 1, and ending December 31, or Commencing on and ending December 31,								
3. Type of Business Entity (check one):								
Individual Corporation								
Partnership Other (specify)								

4. The following information must be provided with respect to any and all individual owners, partners, corporate officers, corporate directors, resident managers, and, if a corporation, all persons owning directly or beneficially more than 5% of the corporation stock:

NOTE: Full names must be listed with middle initials. Furthermore, the applicant must notify the Local Liquor Control Commission of change in the partnership, officers, directors, persons holding directly or beneficially more than 5% in interest of the stock or ownership interest, or managers of the establishment within ten (10) days of said change.

Na	ame: Mital. R. Pali
BIF	RTHDAY: 10   3   1975
НС	OME ADDRESS: 211 BURNSide Cir, Bartlett, Il, 60/03.
DR	RIVERS LICENSE# 1-340 5561-5882 HOME PHONE# 630-110-0959
BU	ISINESS STATUS: GROCERY + liquox Stare (Retail) Block's Fresh Most
PE	RCENTAGE OF STOCK HELD: 95 1.
Na	nme:
BIF	RTHDAY:
	OME ADDRESS:
DF	RIVERS LICENSE# HOME PHONE#
BU	USINESS STATUS:
PE	RCENTAGE OF STOCK HELD:(If additional space is required, please attach a separate sheet of paper)
5.	Is the applicant a citizen of the United States?
	If an Illinois corporation, state date of corporation: <u>Doxang UVU 9 LLC 9 24 2018</u> If a foreign corporation, state date qualified to transact business in Illinois pursuant to the Illinois Business Corporation Act.
6.	State the character of the applicant's business, and in case of a corporation, the objects for which it was formed. For operation of Block's Fresh Market
7.	State the location and physical description of the premises which is to be operated under such license and the nature of the business at such location. I go Mayle Pl
	State whether the applicant has ever had a liquor license issued by the Federal government, any State government or any municipality H

9	Has the applicant ever had any previous liquor license revoked?
٦.	If answer is in the affirmative, state the date and reason for such revocation.
10	Has the applicant and the designated managers read and do they understand and agree not to violate any of the liquor laws of the United States, the State of Illinois or any of the ordinances of the Village of Hampshire in conducting business?
11.	State whether all individual owners, partners, officers, directors, persons holding more than 5% of the corporate stock have been fingerprinted by the Illinois State Police and, if so the date thereof.  Note: This application will remain incomplete and will not be considered until question #11 can be answered in the affirmative.
12.	State the name of the person who will generally be managing the ongoing affairs of this business at these premises
13.	Has the applicant attached Surety Bond and Certificate of Liability Insurance to this application or already furnished it to the Village?
14.	If the applicant does not own the premises for which the license is sought, does the applicant have a lease for the full period for which the license is to be issued? O which the application.
15.	State whether the applicant has ever been convicted of a felony offense under any Federal or State law?O`
16.	State whether the applicant has ever been convicted of a violation of any Federal or State law concerning the manufacture, possession or sale of alcoholic liquor?
	State whether a Federal Gaming Device Stamp or Federal Wagering Stamp has been issued to the applicant, the premises, or to any corporation in which the applicant holds 5% or more Stock?
	covered by this applicant?
18.	Is the premises within 100 feet of any real property of any church, school, hospital, home for the aged or indigent persons or for veterans, their wives or children, or any military or naval station?
19.	Are the premises for which license is herein applied for a store or other place of business where the majority of customers are minors of school age or where the principal business transacted consists of school books, school supplies, food, lunches or drinks for such minors?

_3	<u>80</u> day of <u>Nov</u> , <u>202</u>	Care & k	mani
Sub	RPORATE SEAL		"OFFICIAL SEAL" CAROL L. ROMANO Notary Public, State of Illinois My Commission Expires 08-10-2024
	Ĉ	Qu .	
	e undersigned swears that all statements are tr	ue and correct.	
Cou	ATE OF <u>Illinois</u> ) unty of <u>Kanu</u> )		
CT A	ATE OF DULINAS		
Sec.	S		
Pres	es. Mital R Pafel Que	20	
	REPORATION SIGNATURES	INDIVIDUAL OR PART	NERSHIP SIGNATURES
	On the attached addendum for Entertainment, entertainment to be provided in your establish additional entertainment is planned during the be listed and described for, and approved by, the conducted or performed. Additional entertainment Village Clerk.	ment during the period period of this license, ne Hampshire Liquor C	d of this license. (If any such entertainment must ommission prior to being
23.	. (If applying for other classes except Class B-1 ar acceptability of all entertainment shall be subjections.)	nd B-2): Does the appliect to review by the Lo	cal Liquor Control
	Does the applicant understand and agree that a shall not constitute property, nor shall it be sub nor shall it be alienable or transferable, volunta encumbered or hypothecated?	oject to attachment, ga arily or involuntarily, o	rnishment or execution,
	Does the applicant understand and agree that is and/or Hampshire Police Department shall have premises licensed hereunder to determine when have been or are being violated, and at such time connection therewith?	e the authority to ente ether any State or Villa	er at any time upon the ge laws and ordinances
	. Does the applicant understand and agree that or State or Village laws and ordinances will be reformed that such violation may result in the suspension	erred to the Local Liqu	or Control Commission and



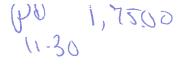
#### CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 11/30/2021

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed

If SUBROGATION IS WAIVED, subject this certificate does not confer rights to	to the te	erms and conditions of the	policy, certain polic	ies may req	uire an endorsement. A	stater	nent on
PRODUCER			CONTACT	H PATEL			
KWIK INSUREU INC.	PHONE (A/C, No, Ext): 630-605-8695 (A/C, No): 866-869-2596						
2815 FORBS AVE. SUITE 107	ADDRESS: DAVE@KWIKINSUREU.COM						
HOFFMAN ESTATES, ILLINOIS 60192							
11011 11111 25111125, 12211(015 001)2		INSURER A: GUARD				NAIC #	
INSURED	INSURER B :	/ INSURANC.	L COMI AIVI				
PARAMGURU 9 LLC			INSURER C :				
DBA BLOCKS FRESH MARK	ET		INSURER D :				
199 SOUTH MAPLE PLACE	CL1		INSURER E :				
HAMPSHIRE, IL 60140							
	TIEICAT	TE NUMBER:	INSURER F :		REVISION NUMBER:		
THIS IS TO CERTIFY THAT THE POLICIES OF INDICATED. NOTWITHSTANDING ANY REQUIRED FOR MAY PER EXCLUSIONS AND CONDITIONS OF SUCH PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE	INSURA JIREMEN TAIN, TH OLICIES JADDUSU	ANCE LISTED BELOW HAVE BE NT, TERM OR CONDITION OF AI HE INSURANCE AFFORDED BY I. LIMITS SHOWN MAY HAVE BE IBRI	NY CONTRACT OR OT THE POLICIES DESCR	NSURED NAM THER DOCUM RIBED HEREIN D CLAIMS.	ED ABOVE FOR THE POLIC ENT WITH RESPECT TO W I IS SUBJECT TO ALL THE	HICH TH TERMS,	HIS
COMMERCIAL GENERAL LIABILITY	INSD W	VD POLICY NUMBER	(MM/DD/YYYY)	(MM/DD/YYYY)	LIMI	T	00.000
CLAIMS-MADE X OCCUR					EACH OCCURRENCE DAMAGE TO RENTED		00,000
CLAIMS-MADE CCCOR					PREMISES (Ea occurrence)	\$ 50,0	
A		PABP298692	11/20/2021	11/20/2022	MED EXP (Any one person)	\$ 5,00	
GEN'L AGGREGATE LIMIT APPLIES PER:		FADF290092	11/29/2021	11/29/2022	PERSONAL & ADV INJURY		00,000
POLICY PRO- LOC					GENERAL AGGREGATE	<u> </u>	00,000
OTHER:					PRODUCTS - COMP/OP AGG	\$ 2,00	00,000
AUTOMOBILE LIABILITY					COMBINED SINGLE LIMIT	\$	
ANY AUTO					(Ea accident) BODILY INJURY (Per person)	\$	
OWNED SCHEDULED					BODILY INJURY (Per accident)	-	
AUTOS ONLY AUTOS NON-OWNED					PROPERTY DAMAGE	\$	
AUTOS ONLY AUTOS ONLY					(Per accident)	\$	
UMBRELLA LIAB OCCUR	-				E40H 000HBBENOE	-	
EXCESS LIAB CLAIMS-MADE					AGGREGATE	\$	
DED RETENTION\$	1 1				AGGREGATE	S	
WORKERS COMPENSATION					PER OTH-	Ψ	
AND EMPLOYERS' LIABILITY  ANY PROPRIETOR/PARTNER/EXECUTIVE					E.L. EACH ACCIDENT	\$	
OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N/A			8	E.L. DISEASE - EA EMPLOYEE	<u> </u>	
If yes, describe under DESCRIPTION OF OPERATIONS below					E.L. DISEASE - POLICY LIMIT	\$	
SECOND FICH OF CV ENVITORS BOOM					AGGERGATE	<del></del>	00,000
A LIQUOR LIABILITY		PABP298692	11/29/2021	11/29/2022	AGGERGATE	1,00	70,000
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHIC	LES (ACC	ORD 101, Additional Remarks Sched	ule, may be attached if me	ore space is requ	uired)		
			SHOULD ANY OF T	ATE THEREO	ESCRIBED POLICIES BE C PF, NOTICE WILL BE DELIV Y PROVISIONS.		
		Ī	AUTHORIZED REPRESEI	NTATIVE			
	DIVVESH PATEL Nov 30, 2021						





# Village of Hampshire 234 S. State Street, Hampshire, IL 60140

Phone: 847-683-2181 • www.hampshireil.org

# **APPLICATION FOR LIQUOR LICENSE**

DATE: 11-30-21							
NAME OF BUSINESS: Copper Barrel on State SALES TAX ID:4284-8814							
NAME OF APPLICANT: Copper Barrel Trx							
ADDRESS OF BUSINESS: 172 S. State St							
BUSINESS PHONE NO.: 224-218-1300							
MAILING ADDRESS: P.O. Box 365 Hampshire IL 60140							
TO: Local Liquor Control Commission Village of Hampshire, Illinois							
Pursuant to the provisions of Chapter IIIV, Alcoholic Liquor Regulations, of the Municipal Code of Hampshire, Illinois, as amended, and pursuant to Chapter 43 of the Illinois Revised Statutes, as amended, the undersigned hereby makes application for an Alcoholic Liquor License as follows:							
1. License Class and Annual Fee (check one):							
Class A-1 - \$1,500.00 Class A-2 - \$1,250.00 Class B-1 - \$1,500.00 Class B-2 - \$1,500.00 Class C-1 - \$1,500.00 Class C-2 - \$1,500.00 Class C-3 - \$1,750.00 Class C-4 - \$1,500.00 Class C-4 - \$1,500.00 Class C-3 - \$1,750.00 Class C-3 - \$1,750.00 Class C-4 - \$1,500.00 Class C-4 - \$1,500.00 Class C-3 - \$1,750.00 Class C-4 - \$1,500.00 Class C-4 - \$1,500.00 Class C-3 - \$1,750.00 Class C-3 - \$1,750.00 Class C-4 - \$1,500.00 Class C-4 - \$1,500.00 Class C-4 - \$1,500.00 Class C-3 - \$1,750.00 Class C-4 - \$1,500.00 Class C-4 - \$1,500.00 Class C-4 - \$1,500.00 Class C-3 - \$1,750.00 Class C-4 - \$1,500.00 Class C-3 - \$1,750.00 Class C-4 - \$1,500.00 Class C-3 - \$1,750.00 Class C-3 - \$1,500.00 Class C-4 - \$1,500.00 Class C-3 - \$1,750.00 Class C-4 - \$1,500.00 Class C-3 - \$1,750.00 Class C-3 - \$1,500.00 Class C-3 - \$1,750.00 Class C-3 - \$1,750.00							
2. License Period:							
Commencing on January 1, 2022 and ending December 31, 2022 or Commencing on and ending December 31,							
3. Type of Business Entity (check one):							
Individual Corporation							
Partnership Other (specify)							

4. The following information must be provided with respect to any and all individual owners, partners, corporate officers, corporate directors, resident managers, and, if a corporation, all persons owning directly or beneficially more than 5% of the corporation stock:

NOTE: Full names must be listed with middle initials. Furthermore, the applicant must notify the Local Liquor Control Commission of change in the partnership, officers, directors, persons holding directly or beneficially more than 5% in interest of the stock or ownership interest, or managers of the establishment within ten (10) days of said change.

Name: Michelle Bunkowskie
BIRTHDAY: 07/27/63
HOME ADDRESS: 806 Elm St. Hampshire EL 60140
DRIVERS LICENSE# 6522-54/6-3813 HOME PHONE# 847-638-715
BUSINESS STATUS: ACTUR
PERCENTAGE OF STOCK HELD: 5090
Name: Kristie Perez
BIRTHDAY: 02/08/79
HOME ADDRESS: 43W498 R+72 Humpshire
DRIVERS LICENSE# PG80-5127-9639 HOME PHONE#
BUSINESS STATUS: Active
PERCENTAGE OF STOCK HELD: 50%
(If additional space is required, please attach a separate sheet of paper)
5. Is the applicant a citizen of the United States?
If naturalized, state date and place of naturalization:
If an Illinois corporation, state date of corporation:
If a foreign corporation, state date qualified to transact business in Illinois pursuant to the Illinois
Business Corporation Act
6. State the character of the applicant's business, and in case of a corporation, the objects for which it was formed.
7. State the location and physical description of the premises which is to be operated under such license and the nature of the business at such location. 1725 3 to 45 State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State
8. State whether the applicant has ever had a liquor license issued by the Federal government, any
State government or any municipality. The Ligor Licence
If answer is in the affirmative, state the name of the licensing unit of government, when and where said of license was issued.

9.	If answer is in the affirmative, state the date and reason for such revocation.
10.	Has the applicant and the designated managers read and do they understand and agree not to violate any of the liquor laws of the United States, the State of Illinois or any of the ordinances of the Village of Hampshire in conducting business?
11.	State whether all individual owners, partners, officers, directors, persons holding more than 5% of the corporate stock have been fingerprinted by the Illinois State Police and, if so the date thereof.
	Note: This application will remain incomplete and will not be considered until question #11 can be answered in the affirmative.
12.	State the name of the person who will generally be managing the ongoing affairs of this business at these premises.  State whether said manager has been fingerprinted by the Illinois State Police and, if so the date thereof.  Note: This application will remain incomplete and will not be considered until question #12 can be answered in the
13.	affirmative.  Has the applicant attached Surety Bond and Certificate of Liability Insurance to this application or already furnished it to the Village?
14.	If the applicant does not own the premises for which the license is sought, does the applicant have a lease for the full period for which the license is to be issued?
15.	State whether the applicant has ever been convicted of a felony offense under any Federal or State law?
16.	State whether the applicant has ever been convicted of a violation of any Federal or State law concerning the manufacture, possession or sale of alcoholic liquor?
17.	State whether a Federal Gaming Device Stamp or Federal Wagering Stamp has been issued to the applicant, the premises, or to any corporation in which the applicant holds 5% or more Stock?
	covered by this applicant?
18.	Is the premises within 100 feet of any real property of any church, school, hospital, home for the aged or indigent persons or for veterans, their wives or children, or any military or naval station?
19.	Are the premises for which license is herein applied for a store or other place of business where the majority of customers are minors of school age or where the principal business transacted consists of school books, school supplies, food, lunches or drinks for such minors?

20.		during the license period, any violation of Federal erred to the Local Liquor Control Commission and n or revocation of said license?
21.	Does the applicant understand and agree that and/or Hampshire Police Department shall have premises licensed hereunder to determine who have been or are being violated, and at such the connection therewith?	ether any State or Village laws and ordinances
	, , , , , , , , , , , , , , , , , , , ,	
22.		a license shall be purely a personal privilege, and bject to attachment, garnishment or execution, arily or involuntarily, or subject to being
		V
23.	acceptability of all entertainment shall be subjection.  Commission?  On the attached addendum for Entertainment, entertainment to be provided in your establish additional entertainment is planned during the	please list and briefly describe, any and all ment during the period of this license. (If any period of this license, such entertainment must he Hampshire Liquor Commission prior to being
SIG	NATURE OF APPLICANT (S)	
	RPORATION SIGNATURES	INDIVIDUAL OR PARTNERSHIP SIGNATURES
Pre	s. Michelle Bunkouste	MuchileBenethe
Sec		,
360		
STA	ate of <u>TL</u> ) ss ) ss )	
	, , , , , , , , , , , , , , , , , , ,	
The	e undersigned swears that all statements are to	rue and correct.
		Iffunity Smile
CO	RPORATE SEAL	OFFICIAL SEAL M BRANDES
Suk	day of day of	NOTARY PUBLIC - STATE OF HILINOIS MY COMMISSION EXPIRES: 10/18/23

**Notary Public** 



## **CERTIFICATE OF LIABILITY INSURANCE**

9/21/2021

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

certificate holder in lieu of such endors	emen	n policies may require an e		ent. A St	atement on ti	nis certificate does not o	conter	rights to the						
PRODUCER CHUCK P QUICK (04624) 822 CENTENNIAL HAMPSHIRE, IL 60140-0000				CONTACT										
										INSURER(S) AFFORDING COVERAGE NAIC #				
										OOLIN		nsurance Company		20990
				INSURED 4564483				INSURER A: COUNTRY Mutual insurance Company INSURER B:						
				COPPER BARREL INC			INSURER C:							
PO BOX 365			INSURER D :											
HAMPSHIRE, IL 60140														
			INSURER E											
COVERAGES CFR1	TIEICA	TE NUMBER:	INSURER F	:										
THIS IS TO CERTIFY THAT THE POLICIES			/E DEEN !	IOOUED T	THE MAIN	REVISION NUMBER:								
INDICATED. NOTWITHSTANDING ANY REC CERTIFICATE MAY BE ISSUED OR MAY P EXCLUSIONS AND CONDITIONS OF SUCH F	ERTAL	MENT, TERM OR CONDITION N. THE INSURANCE AFFORDS	OF ANY C	CONTRACT	OR OTHER	DOCUMENT WITH RESPE	OT TO 1	MALICUL TUIC						
INSR A	NSR W	BR			POLICY EXP (MM/DD/YYYY)	LIMIT	's							
GENERAL LIABILITY		, AM0297262				EACH OCCURRENCE	\$ 1.000	3.000						
A COMMERCIAL GENERAL LIABILITY	٧	AINI320/303	8/1	0/2021	8/10/2022	DAMAGE TO RENTED								
CLAIMS-MADE ✓ OCCUR						PREMISES (Ea occurrence)	\$ 50,00							
✓ BUSINESSOWNERS						MED EXP (Any one person)	\$ 5,000							
						PERSONAL & ADV INJURY	1 1,11							
GEN'L AGGREGATE LIMIT APPLIES PER:					1	GENERAL AGGREGATE	\$ 2,000							
PRO.						PRODUCTS - COMP/OP AGG	\$ 2,000	0,000						
AUTOMOBILE LIABILITY	_					COMBINED SINGLE LIMIT	\$							
		AV9300679	8/1	0/2021	8/10/2022	(Ea accident)	\$ 1,000	0.000						
A ANY AUTO ALL OWNED SCHEDULED						BODILY INJURY (Per person)								
AUTOS V AUTOS						BODILY INJURY (Per accident)	\$							
HIRED AUTOS AUTOS						PROPERTY DAMAGE (Per accident)	\$							
							\$							
UMBRELLA LIAB V OCCUR		AU9288070	8/10	0/2021	8/10/2022	EACH OCCURRENCE	\$ 1,000	0,000						
EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$ 1.000	0.000						
DED V RETENTION\$ 10,000							\$							
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						WC STATU- TORY LIMITS ER								
ANY PROPRIETOR/PARTNER/EXECUTIVE	I/A					E.L. EACH ACCIDENT	\$							
(Mandatory in NH)						E.L. DISEASE - EA EMPLOYEE								
If yes, describe under DESCRIPTION OF OPERATIONS below							\$							
LIQUOR LIABILITY		AM9287363	0.44	0/2024										
		AIVI9207303	8/10	0/2021	8/10/2022	Each Person BI Limit AGGREGATE	\$ 0 \$ 2,000	),000						
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLE: POLICY INFORMATION: Each Person Property Damage Limit and Los Illinois Statute (CONTINUED)						Liability Coverage and so	ubject to	)						
CERTIFICATE HOLDER			0.110											
PER III IVATE HOLDER			CANCEL	LATION										
VILLAGE OF HAMPSHIRE 234 S STATE HAMPSHIRE, IL 60140			SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.											
17 W. O. M.C., IL 00 140		[A	AUTHORIZED	REPRESEN	ITATIVE	N								
			Why Co											

AGENCY CUSTOMER ID:	
LOC #·	



### **ADDITIONAL REMARKS SCHEDULE**

Page ¹ of ¹

AGENCY		NAMED INSURED COPPER BARREL INC			
POLICY NUMBER AM9287363		PO BOX 365 HAMPSHIRE, IL 60140			
COUNTRY Mutual Insurance Company	NAIC CODE 20990				
	_0000	EFFECTIVE DATE: 9/21/2021			

#### **ADDITIONAL REMARKS**

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: ACORD 25 FORM TITLE: CERTIFICATE OF LIABILITY INSURANCE

WAIVERS:

THE INSURING COMPANY WAIVES ITS RIGHTS OF SUBROGATION (RIGHTS TO RECOVER) AGAINST THE CERTIFICATE HOLDER NAMED BELOW WITH RESPECT TO ANY PAYMENTS MADE FOR LIABILITY COVERAGE(S) UNDER THE POLICY(IES) SHOWN IN THE GENERAL LIABILITY SECTION OF THIS CERTIFICATE. THE INSURANCE AFFORDED BY THIS POLICY FOR THE ADDITIONAL INSURED(S) IS PRIMARY INSURANCE AND ANY OTHER INSURANCE MAINTAINED BY OR AVAILABLE TO THE ADDITIONAL INSURED(S) IS NON-CONTRIBUTORY.



SURETY COMPANY . ONE OF AMERICA'S OLCEST BONDING COMPANIES

# Western Surety Company

#### **CONTINUATION CERTIFICATE**

Western Surety Company hereby continues in for	ce Bond No. <u>64887997</u> briefly
described as LIQUOR SALES VILLAGE OF HAMPSHI	
	,
	, as Principal,
in the sum of \$ TEN THOUSAND AND NO/100	Dollars, for the term beginning
November 30 , 2021 , and ending	November 30, 2022, subject to all
the covenants and conditions of the original bond refe	rred to above.
This continuation is issued upon the express con	ndition that the liability of Western Surety Company
under said Bond and this and all continuations thereo	of shall not be cumulative and shall in no event exceed
the total sum above written.	
Dated this 6th day of 0ctober,	
	By Paul T. Brunat, Vice President

THIS "Continuation Certificate" MUST BE FILED WITH THE ABOVE BOND.

Form 90-A-8-2012





# Village of Hampshire 234 S. State Street, Hampshire, IL 60140

Phone: 847-683-2181 • www.hampshireil.org

## **APPLICATION FOR LIQUOR LICENSE**

DATE: 101, 29, 202							
NAME OF BUSINESS: COMER Spot INC. THE KANESALES TAX ID: 210-16-7433							
NAME OF APPLICANT: DOVID RULD							
ADDRESS OF BUSINESS: 123 Washington Ave., P.O. Bxx 484							
BUSINESS PHONE NO.: 847- 340-8165							
MAILING ADDRESS: P.D. POX484 HOMOSHIRE IC LOOKED							
MAILING ADDRESS. 1. U. TAN 101, IMITED THAT I'M							
TO: Local Liquor Control Commission Village of Hampshire, Illinois							
Pursuant to the provisions of Chapter IIIV, Alcoholic Liquor Regulations, of the Municipal Code of Hampshire, Illinois, as amended, and pursuant to Chapter 43 of the Illinois Revised Statutes, as amended, the undersigned hereby makes application for an Alcoholic Liquor License as follows:							
1. License Class and Annual Fee (check one):							
Class A-1 - \$1,500.00 Class C-4 - \$1,500.00							
Class A-2 - \$1,250.00 Class D - \$1,750.00							
Class B-1 - \$1,500.00 Class E - \$1,750.00							
Class B-2 - \$1,500.00 Class F - \$1,500.00 Class G - \$ 75.00							
Class C-1 - \$1,500.00 Class G - \$ 75.00  Class C-2 - \$1,500.00 Class H- \$ 500.00							
Class C-3 - \$1,750.00 Class I- \$ 500.00							
2. License Period:							
Commencing on January 1, 2022 and ending December 31, 2072 or Commencing on and ending December 31,							
3. Type of Business Entity (check one):							
Individual Corporation							
Partnership Other (specify)							

4. The following information must be provided with respect to any and all individual owners, partners, corporate officers, corporate directors, resident managers, and, if a corporation, all persons owning directly or beneficially more than 5% of the corporation stock:

NOTE: Full names must be listed with middle initials. Furthermore, the applicant must notify the Local Liquor Control Commission of change in the partnership, officers, directors, persons holding directly or beneficially more than 5% in interest of the stock or ownership interest, or managers of the establishment within ten (10) days of said change.

Name:	vid Ruth
BIRTHDAY: 3	-30-1982
HOME ADDRESS:	I I COVCOIL
DRIVERS LICENSE	200 1760 2:101
BUSINESS STATU	Desided
PERCENTAGE OF	inno
Name:	
BIRTHDAY:	
	E# HOME PHONE#
BUSINESS STATU	JS:
PERCENTAGE OF	STOCK HELD:(If additional space is required, please attach a separate sheet of paper)
	(If additional space is required, please attach a separate sheet of paper)
5. Is the applica	ant a citizen of the United States? UPS
	d, state date and place of naturalization:
If an Illinois o	corporation, state date of corporation: $1-9-2013$
	orporation, state date of corporationorporation, state date of corporation.
	poration Act
6. State the cha	aracter of the applicant's business, and in case of a corporation, the objects for sformed.
7. State the loc license and t	the nature of the business at such location. 123 NASHING AND.
	r the applicant has ever had a liquor license issued by the Federal government, any
•	ment or any municipality
	the affirmative, state the name of the licensing unit of government, when and
wnere said of	flicense was issued

9.	Has the applicant ever had any previous liquor license revoked?
	If answer is in the affirmative, state the date and reason for such revocation.
10.	Has the applicant and the designated managers read and do they understand and agree not to violate any of the liquor laws of the United States, the State of Illinois or any of the ordinances of the Village of Hampshire in conducting business?
11.	State whether all individual owners, partners, officers, directors, persons holding more than 5% of the corporate stock have been fingerprinted by the Illinois State Police and, if so the date thereof.
	Note: This application will remain incomplete and will not be considered until question #11 can be answered in the affirmative.
12.	State the name of the person who will generally be managing the ongoing affairs of this business at these premises.  State whether said manager has been fingerprinted by the Illinois State Police and, if so the date
	Note: This application will remain incomplete and will not be considered until question #12 can be answered in the affirmative.
13.	Has the applicant attached Surety Bond and Certificate of Liability Insurance to this application or already furnished it to the Village?
	If the applicant does not own the premises for which the license is sought, does the applicant have a lease for the full period for which the license is to be issued?  If the answer is in the affirmative, attach a copy of said lease to the application.
15.	State whether the applicant has ever been convicted of a felony offense under any Federal or State law?
16.	State whether the applicant has ever been convicted of a violation of any Federal or State law concerning the manufacture, possession or sale of alcoholic liquor?
	State whether a Federal Gaming Device Stamp or Federal Wagering Stamp has been issued to the applicant, the premises, or to any corporation in which the applicant holds 5% or more Stock?
	Stock?
18.	Is the premises within 100 feet of any real property of any church, school, hospital, home for the aged or indigent persons or for veterans, their wives or children, or any military or naval station?
19.	Are the premises for which license is herein applied for a store or other place of business where the majority of customers are minors of school age or where the principal business transacted consists of school books, school supplies, food, lunches or drinks for such minors?

20. Does the applicant understand and agree that of State or Village laws and ordinances will be refetate that such violation may result in the suspension	erred to the Local Liquor Control Commission and					
21. Does the applicant understand and agree that members of the Local Liquor Control Commissio and/or Hampshire Police Department shall have the authority to enter at any time upon the premises licensed hereunder to determine whether any State or Village laws and ordinances have been or are being violated, and at such time to examine the premises of said licensee in connection therewith?						
22. Does the applicant understand and agree that a shall not constitute property, nor shall it be submor shall it be alienable or transferable, volunta encumbered or hypothecated?	ject to attachment, garnishment or execution,					
	please list and briefly describe, any and all ment during the period of this license. (If any period of this license, such entertainment must the Hampshire Liquor Commission prior to being					
SIGNATURE OF APPLICANT (S) CORPORATION SIGNATURES Pres.  Sec.	INDIVIDUAL OR PARTNERSHIP SIGNATURES					
11						
STATE OF						
County of KANE						
The undersigned swears that all statements are tr	ue and correct.					
CORPORATE SEAL	OFFICIAL SEAL M BRANDES					
Subscribed and sworn to before me this day of,	NOTARY PUBLIC - STATE OF ILLINOIS MY COMMISSION EXPIRES: 10/18/23					

**Notary Public** 



# Western Surety Company

#### CONTINUATION CERTIFICATE

Western Surety Company hereby continues in force Bond No. 64732586 briefly  described as LIQUOR LICENSE VILLAGE OF HAMPSHIRE
described as
for CORNER SPOT
, as Principal,
in the sum of \$ ONE THOUSAND FIVE HUNDRED AND NO/100 Dollars, for the term beginning
July 24,2021, and endingJuly 24,2022, subject to all
the covenants and conditions of the original bond referred to above.
This continuation is issued upon the express condition that the liability of Western Surety Company
under said Bond and this and all continuations thereof shall not be cumulative and shall in no event exceed
the total sum above written.
Dated this 4th day of August, 2021.
WESTERN SURETY COMPANY  By Paul T. Brudat, Vice President

THIS "Continuation Certificate" MUST BE FILED WITH THE ABOVE BOND.

MESTERN SUBETY COMPANY . ONE OF A HERICA'S OLDEST BONDING COMPANIES

Form 90-A-8-2012

Page: 2 of 2

2021-01-14 23:29:52 GMT

12242413000

CORNSPO-01

From: GIS Cornerstone

**JPORTZEN** 

DATE (MM/DD/YYYY)

#### CERTIFICATE OF LIABILITY INSURANCE

1/14/2021

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on

ti	is c	ertificate does not confer rights t	o the	cert	ificate holder in lieu of su							
PRO	DUCE	R				CONTA						
GIS Cornerstone, LLC DBA Cornerstone Risk Management			PHONE (A/C, No, Ext): (224) 655-2494 FAX (A/C, No): (224) 241-3000									
		/. Northwest Highway Suite 203 rrington, IL 60010				E-MAIL ADDRESS:						
		3,						URER/S) AFFO	RDING COVERAGE			NAIC #
				INGLIER	RA Society					15261		
INSURED				I								
Corner Spot, Inc. dba The Kave				INSURER B:								
		David Ruth				INSURER C:						
320 Jake Lane				INSURER D:								
		Hampshire, IL 60140							1.51			
			- MARCED.	INSURE	RF:		DELEGION MIN	DED.				
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	X	OTHER: Liquor Liability							CSL	OP AGG	s	1,000,000
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	ANY	PROPRIETOR/PARTNER/EXECUTIVE CER/MEMBER EXCLUDED?	N/A						E.L. EACH ACCIDEN	T	5	
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VILLAGE OF HAMPSHIRE PO BOX 451 HAMPSHIRE, IL 60140	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
Than ormal, in solve	AUTHORIZED REPRESENTATIVE
	gring-

ACORD 25 (2016/03)

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