



100 W. RANDOLPH ST., SUITE 7-801  
CHICAGO, ILLINOIS 60601  
TELEPHONE: 312 814-2206

300 W. JEFFERSON ST., SUITE 300  
SPRINGFIELD, ILLINOIS 62702  
TELEPHONE: 217 782-2136  
WEBSITE: ILCC.Illinois.gov

## APPLICATION FOR STATE OF ILLINOIS BROKER'S LIQUOR LICENSE

All new applicants can email completed applications and attachments to  
[LCC.Licensing@illinois.gov](mailto:LCC.Licensing@illinois.gov)

**BROKER'S LIQUOR LICENSE**

**FEE**

**\$1,000.00**

**DEFINITION:** "Broker" means (i) a person who solicits orders for or offers to sell or supply alcoholic liquors to retailers for a fee or commission, for or on behalf of a person authorized to manufacture or sell at wholesale alcoholic liquors within or without the state, or (ii) a person within this state, other than a retail licensee, who, for a fee or commission, promotes, solicits, or accepts orders for alcoholic liquor, for use or consumption and not for resale, to be shipped from this state and delivered to residents outside of this state by an express company, common carrier, or contract carrier. This section does not apply to any person who promotes, solicits, or accepts orders for wine as specifically authorized in Section 6-29 of the Illinois Liquor Control Act.

**Make check or money order payable to: ILLINOIS LIQUOR CONTROL COMMISSION**

*The Commission does not accept U.S. currency/cash as payment.*

**Please print or type the information requested in the spaces provided. The application form must bear an original signature. Rubber stamped, photocopied, or faxed documents are not accepted.**

### General Information

- Brokers **CANNOT** for a fee or commission promote, solicit, or accept orders for alcoholic liquor at retail, for use and consumption and not for resale, to Illinois residents.
- Brokers **CAN** for a fee or commission promote, solicit, or accept, orders for alcoholic liquor at retail, for use and consumption and not for resale, to residents of other states outside of Illinois, pursuant to the laws of those states.
- Brokers, located within or outside of Illinois, **CAN** for a fee or commission promote, solicit, or accept orders for alcoholic liquor, from licensed Illinois retailers. **NOTE:** All alcoholic liquors sold to licensed Illinois retailers must be shipped by licensed Illinois distributors, importing distributors, or foreign importers.
- Brokers, located within or outside of Illinois, **CAN** on behalf of a licensed Illinois retailer make contact with distillers, rectifiers, brewers or manufacturers or any other party within or outside of Illinois in order that alcoholic liquors be shipped to a licensed Illinois distributor, importing distributor or foreign importer, whether such solicitation or offer is consummated within or outside of Illinois.

### **Who Does Not Need to be Licensed as a Broker?**

Persons who promote, solicit or accept orders for wine products on behalf of a lawfully licensed entity as part of a reciprocal wine shipment to residents over the age of 21 for personal use and not for resale as long as it is not more than 18 liters of wine.

### **What Will Happen to Persons Making Prohibited Sales of Alcoholic Liquor?**

Any person discovered making unlawful sales of alcoholic liquors is in violation of the Illinois Liquor Control Act of 1934 and shall receive a "Cease and Desist Order" from the Illinois Liquor Control Commission. Furthermore, such person will also be subject to appropriate action by the Illinois Department of Revenue and the States' Attorney in the county in which the alcoholic liquor product was delivered.

IMPORTANT NOTICE: THE ILLINOIS LIQUOR CONTROL COMMISSION IS REQUESTING DISCLOSURE OF INFORMATION THAT IS NECESSARY UNDER THE ILLINOIS LIQUOR CONTROL ACT (235 ILCS 5/1 ET SEQ.). DISCLOSURE OF THIS INFORMATION IS MANDATORY. FAILURE TO PROVIDE ANY INFORMATION WILL RESULT IN THE NON-ISSUANCE OF YOUR LICENSE.



## 2. STATUS OF BUSINESS

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

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

- A.  Sole Proprietorship      Date Filed With County Clerk: \_\_\_\_\_
- B.  Partnership      Date Of Formation: \_\_\_\_\_
- C.  Illinois Corporation      Date Of Incorporation: \_\_\_\_\_
- D.  Foreign Corporation      State Of Incorporation: \_\_\_\_\_ Date Qualified To Do Business In Illinois: \_\_\_\_\_
- E.  Limited Liability Company      Date Formed: \_\_\_\_\_

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

## 3. OWNERSHIP INFORMATION

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

The following information must be provided for each individual applicant, sole proprietor, partner, corporate officer or director (whether or not they own any stock), shareholder owning aggregate stock equal to or more than five percent, (including officers, directors and shareholders with stock equal to or more than five percent for all corporate shareholders), and/or manager or agent conducting the business. Indicate the total percentage of stock of the corporation, if any, which is held by persons who hold less than a five percent interest. If additional space is needed, provide information on a separate sheet(s) in the same format as this application. **Before completing this section, check the questions in Section 6 - Eligibility.**

For each owner/officer/partner/five percent shareholder, provide full name, home address, city, state, ZIP code, Social Security number, date of birth, sex, title/position, home telephone number, and ownership percentage. Total ownership percentage should equal 100 percent. If there are a number of shareholders owning less than five percent, indicate the aggregate total of ownership under Line E.

A.

NAME (LAST, FIRST, MIDDLE INITIAL)			HOME ADDRESS		CITY	STATE	ZIP
SOCIAL SECURITY NO.	DATE OF BIRTH	SEX	TITLE/POSITION	AREA CODE/HOME TELEPHONE NO.		% OWNED	
				( )			

B.

NAME (LAST, FIRST, MIDDLE INITIAL)			HOME ADDRESS		CITY	STATE	ZIP
SOCIAL SECURITY NO.	DATE OF BIRTH	SEX	TITLE/POSITION	AREA CODE/HOME TELEPHONE NO.		% OWNED	
				( )			

C.

NAME (LAST, FIRST, MIDDLE INITIAL)			HOME ADDRESS		CITY	STATE	ZIP
SOCIAL SECURITY NO.	DATE OF BIRTH	SEX	TITLE/POSITION	AREA CODE/HOME TELEPHONE NO.		% OWNED	
				( )			

D.

NAME (LAST, FIRST, MIDDLE INITIAL)			HOME ADDRESS		CITY	STATE	ZIP
SOCIAL SECURITY NO.	DATE OF BIRTH	SEX	TITLE/POSITION	AREA CODE/HOME TELEPHONE NO.		% OWNED	
				( )			

E. Total percentage of all stock held by all persons with less than five percent interest. \_\_\_\_\_%

