

**AGENDA**  
**HAMPSHIRE LIQUOR COMMISSION MEETING**  
**June 7, 2018**  
**6:15 P.M.**

- 1. Call to Order.**
- 2. Establish Quorum.**
- 3. Approve Meeting Minutes of May 17, 2018.**
- 4. Liquor License: Coon Creek Country Days: August 2 - August 5, 2018**
- 5. Adjournment.**

## HAMPSHIRE LIQUOR COMMISSION

May 17, 2018

Jeff Magnussen, Chairman, called the meeting to order at 6:30 p.m.

Present: Trustees Klein, Kraus

Absent: None

Also present: Hampshire Police Chief Brian Thompson

Trustee Kraus moved to approve the minutes for March 1, 2018.

Seconded by Klein

Motion carried by voice vote

Ayes: Klein, Kraus, Magnussen

Nays: None

Absent: None

The Hampshire Chamber partnered with Chandra Kanakeris for the liquor license at their Summer on State one day event scheduled for June 9 from 3-8 p.m. The applicant did not appear at the meeting to explain the application or answer questions.

Police Chief Thompson also mentioned he is waiting to sit down with the Hampshire Chamber on the large gathering permit.

Village President Magnussen asked Police Chief Thompson to call the Pingree Grove Police Chief to ask if they had any issues at Niko's Tavern in Pingree Grove, which is a licensed liquor retailer owned by the applicant.

Trustee Kraus moved to approve the one day liquor license for Summer on State June 9, 2018 from 3-8 p.m. with the following conditions to be met before the license is released by the Village Clerk:

- File BASSETT certificates for servers with Village Clerk
- Provide name of the manager on site for the event
- Describe the process to be used to check ID's
- Describe how sales will be controlled – wristbands, hand stamped
- Identify where the fence will be placed
- Describe how the fenced-in area will be policed – everyone must stay in the fence area to drink
- Describe means of service – plastic cups? Other?
- Describe the types of alcoholic beverages to be served – beer only? Beer and Wine?
- File a Certificate of Insurance, naming the Village of Hampshire as additional insured – with Village Clerk
- File a surety bond with the Village Clerk
- File copy of Illinois State Liquor License with Village Clerk

Seconded by Klein

Motion carried by roll call vote

Ayes: Klein, Kraus, Magnussen

Nays: None

Absent: None

Adjournment

Trustee Kraus moved, to adjourn the Liquor Commission meeting at 6:42 p.m.

Seconded by Klein

Motion carried by voice vote

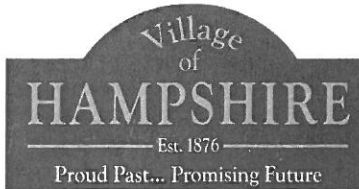
Ayes: Klein, Kraus, Magnussen

Nays: None

Absent: None

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Jeff Magnussen, Village President



234 S. State Street  
Hampshire, IL 60140

Phone: (847)683-2181  
Fax: (847) 683-4915  
www.hampshireil.org

APPLICATION FOR ALCOHOLIC LIQUOR

DATE: 05-25-18

NAME OF BUSINESS: HAMPSHIRE COON CREEK DAYS SALES TAX ID: \_\_\_\_\_

NAME OF APPLICANT: CARL PALMISANO

ADDRESS OF BUSINESS: 234 S. STATE ST

BUSINESS PHONE NO.: 224-402-3273

MAILING ADDRESS: SOME

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 | <u>X</u> _____ Class <u>G</u> - \$ <u>75.00</u> |
| _____ 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, \_\_\_\_\_ and ending December 31, \_\_\_\_\_ or  
Commencing on AUGUST 2 2018 and ending ~~December 31,~~ AUGUST 5, 2018

3. Type of Business Entity (check one):

- |                                      |  |
|--------------------------------------|--|
| <input type="checkbox"/> Individual  | <input type="checkbox"/> Corporation   |
| <input type="checkbox"/> Partnership | <input checked="" type="checkbox"/> Other (specify)<br><u>NON-PROFIT (501C3)</u> |

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: CARL PALMISANO  
BIRTHDAY: 5-12-52  
HOME ADDRESS: 316 CENTURY  
DRIVERS LICENSE# P 452 1365 2136 HOME PHONE# \_\_\_\_\_  
BUSINESS STATUS: 501 C(3)  
PERCENTAGE OF STOCK HELD: 0

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? 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. ANNUAL FESTIVAL

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. TOWN PLACE RD  
DOWNTOWN HAMPSHIRE (ALLEN ROAD + STATE ST)

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. STATE OF ILLINOIS (2017)

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. YES (JUNE 2016)

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. CARL PALMISANO  
State whether said manager has been fingerprinted by the Illinois State Police and, if so the date thereof. YES (JUNE 2016)

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? YES  
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? NONE

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? NONE

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? NONE  
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? 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? —

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

INDIVIDUAL OR PARTNERSHIP SIGNATURES

Pres. Curt Palmisto

\_\_\_\_\_

Sec. \_\_\_\_\_

\_\_\_\_\_

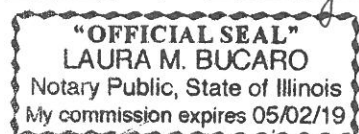
STATE OF ILLINOIS )  
 ) SS  
County of KANE )

The undersigned swears that all statements are true and correct.

\_\_\_\_\_

CORPORATE SEAL

Subscribed and sworn to before me this 26th day of May, 2018.



Laura M. Bucaro  
Notary Public



CONTINUATION CERTIFICATE

In consideration of the sum of FIFTY AND 00/100 (\$ 50.00\*\*\*\*\*) Dollars,

the Pekin Insurance Company hereby continues in force Bond No. BL78007 OLL&P010001

in the sum of ONE THOUSAND FIVE HUNDRED AND 00/100 (\$ 1,500.00\*\*\*\*) Dollars,

on behalf of HAMPSHIRE COON CREEK COUNTRY DAYS INC

in favor of VILLAGE OF HAMPSHIRE, ILLINOIS

described as LIQUOR SALES

for the term beginning on the FIFTEENTH day of JULY, 2018, and ending

on the FIFTEENTH day of JULY, 2019, subject to all the covenants and

conditions of said Bond heretofore issued.

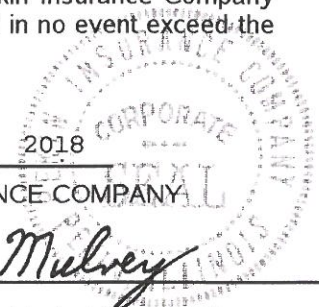
This confirmation is issued upon the express condition that the liability of the Pekin Insurance Company under said Bond and this and all continuations thereof shall not be cumulative and shall in no event exceed the total sum above written.

Dated this FIRST day of MAY, 2018

PEKIN INSURANCE COMPANY

By Edward A. Mulvey

Edward A. Mulvey, Vice President - Personal Lines







# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
05/10/2018

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).

<b>PRODUCER</b>  J L Jones Agency PO Box 959 Huntley, IL 60142	<b>CONTACT NAME:</b> PHONE (A/C No. Ext): 847 669 1600      FAX (A/C, No): 847 669 1647	
	<b>E-MAIL ADDRESS:</b>	
<b>INSURED</b>  Hampshire Coon Creek Country Days Inc PO Box 927 Hampshire, IL 60140	<b>INSURER(S) AFFORDING COVERAGE</b> <b>NAIC #</b>	
	INSURER A : Echelon Property & Casualty Insurance Co      11702	
	INSURER B :	
	INSURER C :	
	INSURER D :	
	INSURER E :	
INSURER F :		

**COVERAGES      CERTIFICATE NUMBER:      REVISION 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.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	X		EPP0001949	08/01/18	08/07/18	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<input type="checkbox"/> <b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <input type="checkbox"/> <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DED    RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		Y/N N/A				<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
A	<b>Liquor Liability</b>			EPP0001949	08/01/18	08/07/18	Policy Aggregate 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
Special Event Coverage  
Hampshire Coon Creek Country Days  
Village of Hampshire is additional insured with respect to general liability

<b>CERTIFICATE HOLDER</b>  Village of Hampshire 234 S State St PO Box 457 Hampshire, IL 60140	<b>CANCELLATION</b>  SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE  <i>Lonna J. Roesslein</i>