



City of Joliet  
Terry D'Arcy, Liquor Commissioner  
James O'Connell, Deputy Liquor Commissioner  
150 West Jefferson Street Joliet, IL 60432-4158 [www.joliet.gov](http://www.joliet.gov)  
[liquorcommission@joliet.gov](mailto:liquorcommission@joliet.gov)  
PHONE: 815-724-3710 FAX: 815-724-3715

**APPLICATION FOR CLASS "H" (Extra Hour) PERMIT**

1. APPLICANT'S NAME/PHONE # \_\_\_\_\_

2. ADDRESS OF PREMISES \_\_\_\_\_

3. CURRENT CLASS & LICENSE NUMBER \_\_\_\_\_

4. BRIEFLY DESCRIBE WHAT SECURITY MEASURES WILL BE IN PLACE ON THE PREMISES IF A CLASS "H" PERMIT IS ISSUED:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. ATTACH PROOF THAT THE DRAM SHOP OF THE LICENSEE WILL COVER THE LICENSEE IF A CLASS "H" PERMIT IS ISSUED.

The undersigned, being duly sworn on oath, deposes and says that the facts alleged in the foregoing application are true in substance and in fact, and that said representations are made for the purpose of inducing the Liquor Commissioner of the City of Joliet to issue the permit hereinabove requested.

\_\_\_\_\_  
Applicant / President or Chairman / Officer

Subscribed and sworn to before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ the above current licensee(s) did appear before me and signed the above application in my presence.

\_\_\_\_\_  
NOTARY PUBLIC

My Commission expires on \_\_\_\_\_

<b>Approved by:</b>
_____
<b>Signature/Title</b>
_____
<b>Date</b>