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|  <p>CITY OF ST. CHARLES ILLINOIS • 1834</p> | AGENDA ITEM EXECUTIVE SUMMARY | | Agenda Item number: 6a |
| | Title: | Recommendation to approve a Proposal for an A-6 Liquor License Application for 7-11, Located at 1705 W. Main St., St. Charles | |
| | Presenter: | Police Chief Keegan | |
| Meeting: Governemnt Operations Committe | | Date: June 17, 2024 | |
| Proposed Cost: | | Budgeted Amount: \$ | Not Budgeted: <input type="checkbox"/> |
| TIF District: Choose an item. | | | |
| Executive Summary (if not budgeted, please explain): | | | |
| <p>The new owners of the 7-11, located at 1705 W. Main St., are requesting approval of an A-6 liquor license application for their business.</p> | | | |
| Attachments (please list): | | | |
| Liquor License | | | |
| Recommendation/Suggested Action (briefly explain): | | | |
| Recommendation to approve a proposal for an A-6 Liquor License application for 7-11 located at 1705 W. Main St., St. Charles. | | | |



Memo

Date: 6/3/2024

To: Lora Vitek, Mayor-Liquor Commissioner

From: James Keegan, Chief of Police *J. Keegan*

Re: Background Investigation/7-11 Mini-Mart/1705 W. Main Street (Class A-6)

The purpose of this memorandum is to document and forward to your attention the results of the background investigation conducted by members of the St. Charles Police Department concerning the above mentioned establishment.

This request allows alcohol sales inside gas station/mini-marts as follows: *(Class A-6 licenses shall authorize the retail sale of alcoholic liquors in original packages only, and not for consumption on the premises, in gas stations containing convenience stores where the retail sale of packaged alcoholic liquor is secondary to the sale of gasoline products and/or miscellaneous convenience store items and the square footage devoted to the retail sale of alcoholic liquor is ten percent (10%) or less of the gross square footage).* Sales can only occur between 7:00 am and 12:00 am daily.

The site location/floor plans and the corresponding application materials were reviewed by my staff as this is reverting back to being franchised. We also reviewed their business plan, floor plan, Dram Shop insurance and liquor training certificates. We found nothing of a derogatory nature that would preclude either the site location or the applicant from moving forward with alcohol sales, subject to City Council approval.

Thank you in advance for your consideration in this matter.



Memo

Date: 5/30/2024
To: Chief James Keegan #300 via Chain of Command
From: Commander Drew Lamela #340 *DL*340* *in 317*
CC: Deputy Chief Eric Majewski #317
Re: Liquor License Background / 7-Eleven

The purpose of this memo is to document the background investigation of Terabyte Group, Inc., d.b.a., 7-Eleven, pursuant to its application for a Class A-6 liquor license. A Class A-6 license shall authorize the retail sale of alcoholic liquors in original packages only, and not for consumption on the premises, in convenience stores or gas stations containing convenience stores where the retail sale of packaged alcoholic liquor is secondary to the sale of gasoline products and/or miscellaneous convenience store items and the square footage devoted to the retail sale of alcoholic liquor is ten percent (10%) or less of the gross square footage. 7-Eleven is currently located at 1705 W. Main St., in St. Charles, Illinois.

Applicant/On-Site Manager

Singh, Sukhdev



Telephone: (708) 955-1084

The application was received on 04/26/2024. The application is complete to include a signed lease, a business plan, floor plan and Certificate of Insurance (dram shop). Sukhdev (Dev) Singh is listed as the applicant and on-site manager of 7-Eleven. The Illinois Liquor Control Commission listed their current state license as active. The Terabyte Group, Inc. has an active status via the Illinois Secretary of State website. A copy of the lease agreement was included with the application. The property is being leased through 7-Eleven, Inc, out of Texas. The agreement is a 15-year lease with a 6-year option

The 7-Eleven is located 1705 W. Main Street and sells packaged liquor (like other convenience stores) for offsite consumption. This will be in addition to their full-service convenience store. The business has an active liquor license, which the Illinois Liquor Control Commission listed their current state license as "Active".

Applicant / On-Site Manager Interview

On 05/29/2024, I met with Sukhdev (Dev) Singh at the St. Charles Police Department where he signed a waiver form, allowing me to conduct this background investigation. Dev resides at [REDACTED] Illinois. Dev advised that he has resided at this address for 10 years. Dev stated that he is in the process of purchasing the 7-Eleven located at 1705 W. Main St., in St. Charles, Illinois. Dev stated that the business is currently operational. Dev stated that he will be taking over the operation on 06/29/2024. Dev stated that he would start selling alcohol the day he takes over the business. Dev stated that he will be the on-site manager for the business and that his wife will be assisting him with operating the business. Dev stated that he plans on hiring approximately 4-5 new employees. Dev stated that he has not purchased any alcohol for business. Dev explained that once he takes over the operation, he will be purchasing the alcohol from 7-Eleven's distributors. Dev stated that he will not be making any renovations to the business. Dev stated that 7-Eleven is mainly a convenience store that will be selling liquor, beer and wine to be consumed off-site. Dev stated that the area in which the alcohol will be sold takes up approximately 10% of the store. Dev provided a 7-Eleven Store Menu and floor plan.

Dev has a current BASSET certification. On 05/20/2024, Dev's fingerprints were submitted to the FBI and Illinois Bureau of Identification.

A check through the Addison Police Department showed three contacts with Dev.

- 05/21/2017 – Traffic Citation – Speeding – 2017TR041720 – Closed
- 05/31/2021 – Complainant – Motor Vehicle Theft – Report #: ADPC2101459
- 09/30/2021 – Complainant – Lost Property – Report #: APDC2102774

A check through the DuPage County Clerk's Office showed the following contacts:

- 05/21/2017 – Traffic Citation – Speeding – 2017TR041720 – Closed
- 05/06/2016 – Traffic Citation – Driver Required to Wear Seatbelt – 2016TR039439 – Closed
- 07/07/2015 – Traffic Citations – Speeding / Improper Overtaking on Left-Motorcycle / Move Mounting Location of Registration Plate – 2016TR06168 – Closed
- 02/21/2014 – Traffic Citation – Speeding – 2014TR015084 – Closed

A search of the Cook County and Kane County Circuit Clerk's Office showed no contacts with Dev.

A search of ICLEAR showed no contacts with Dev.

A search through the Kane County Aegis showed no contacts with Dev.

A search through TLOxp showed no liens, forfeitures or judgements against Dev.

A search through our department's New World system showed one contact with Dev:

- 09/25/2015 – Warning Citation – Geneva Police Department

A search through the Illinois Secretary of State shows Dev to be the Agent of Terabyte Group, Inc. and shows the corporation to be active.

Site Visit

On 05/29/2024, I called Dev to meet with him at the 7-Eleven and he advised that he was currently in training in Chicago. Dev advised that I could conduct the site visit and if there were any issues, to let him know so that he could correct the problem.

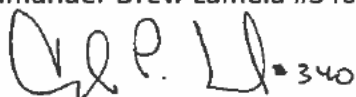
Notes in the application, the business plan indicated the hours of operation will be 24 hours a day, seven days a week, as it is currently. Dev stated he would follow local regulations regarding the times of selling packaged alcoholic beverages. There will be no live music and no outdoor seating. Smoking area will be in front of the building.

I went to 7-Eleven, located at 1705 W. Main Street. The business was clean, stocked with food, beverages and fully operational. The alcohol was displayed on the southwest wall in a refrigerator. There was an isle on the north end of the business that had beer displayed in a small portion of the isle. There was a sign that indicated the product was alcoholic beverages and no one under 21 could purchase the product. I noted that the areas in which the alcohol were being sold was less than 10% of the business. I noted that the business is consistent with the floor plan that was provided in the application.

I spoke with Dev after the site visit. I asked Dev if he would keep the business consistent with where the alcohol is being stored. Dev stated that he was thinking about moving the beer from the first isle to the cooler where the rest of the alcohol is being displayed.

This concludes this background investigation.

Commander Drew Lamela #340

Handwritten signature of Drew Lamela, including the number 340.



Memo

Date: 05/31/2024
To: Chief Keegan #300 (via chain of command)
CC: Cmdr. Lamela #340
From: Det. Sgt. Vicicondi #368 *SV 3/17*
Re: Supplemental Memo - Liquor License Class (A-6) — Background Investigation for Terabyte Group, Inc., d.b.a., 7-Eleven (1705 W. Main St.)

IN SUMMARY:

The purpose of this memo is to outline steps taken during the background investigation for a liquor license application. This investigation was done based on the application submitted for a Class (A-6) – liquor license for the business Terabyte Group, Inc., d.b.a., 7-Eleven – which is located at 1705 W. Main St., St. Charles, IL 60174.

APPLICANT:

Singh, Sukhdev




Telephone: (708) 955-1084

On 05/31/24, I called and spoke with Sukhdev Singh on the phone and learned the following in summary and not verbatim:

I asked Sukhdev if he owns any other businesses and he advised that he did. Sukhdev owns a trucking business – Terabyte Trucking Inc. The business hauls sand, stone, and gravel. The trucks are dump trucks. Sukhdev denied owning Hunter Lines Inc. and Sukhman Inc. Sukhdev advised that Sukhmani Inc. is a very common name in his culture and it's a female name.

I utilized the ilsos.gov website's business entity search to look up Sukhdev. There were (5) results which were (in summary):

- U.S. Petro Mart Inc. – Dissolved – President: Sukhdev Singh (17551 S Coronado Dr Orland Park 60462)
- AKS Cab Co. – Dissolved – President: Sukhdev Singh (180 Martha St Bensenville 60506)
- Sukhdev Enterprises – Dissolved – Sukhdev Singh
- Royal Sub and Grill Inc. – Dissolved – Sukhdev Singh (439 E 79th Chicago IL, 60619)
- Terabyte Trucking Inc. – Active – President: Sukhdev Singh  (60101)



Sukhdev denied owning the above businesses - except Terabyte Trucking Inc. Sukhdev also advised that all of his businesses are registered through his home address [REDACTED].

It should be noted that the Agent Information for Sukhdev Enterprises Inc. lists Sukhdev Singh and address [REDACTED].

-Refer to the attached printouts for further information.

FINGERPRINT RESPONSES:

The ISP Bureau of Identification response had a result of: no record on file. The FBI response revealed no prior arrest data.

-Refer to the attached responses for further information.

This concludes this background investigation.

Respectfully Submitted,

A handwritten signature in black ink, appearing to read "M V M 368".

Det. Sgt. Vicicondi #368

City of St. Charles, Illinois Liquor Control Commission
CITY RETAIL LIQUOR DEALER LICENSE APPLICATION



Incomplete applications will not be accepted.

Applications may be submitted to: 2 E. Main Street, St. Charles, IL 60174-1984

Business Name

APPLICATION CHECKLIST

| Check items to confirm all are attached to this application | Applicant | Office Use |
|--|-------------------------------------|-------------------------------------|
| Application Fee of \$200 (5.08.070C) non-refundable Non-refundable | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Completed Application for all questions applicable to your business. | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Copy of Lease/Proof of Ownership | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Copy of Dram Shop Insurance or a letter from insurance agent with a proposed quote. | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Copy of Articles of Corporation , if applicable. | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Completed B.A.S.S.E.T. (Beverage Alcohol Sellers & Servers Training) form – filled out for all employees. A copy of the B.A.S.S.E.T. certificate is only needed for each manager. It is the business establishment's responsibility to keep copies of all B.A.S.S.E.T. certificates on file for all of their employees. | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Copy of Site Plan for Establishment (Drawn to scale including the parking lot, patio and/or deck, outdoor seating). | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Copy of Floor Plan for Establishment (Drawn to scale and must include the layout of the establishment with tables, chairs, aisles, displays, cash register, bar, and lounge area with dimensions, percentage, and square footage noted for each space). Be sure to also include all fixed objects, such as pool tables, bar stools, vending/amusement machines; as well as all exits. | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Copy of Business Plan, to include: <input type="checkbox"/> Hours of Operation <input type="checkbox"/> Copy of Menu <input type="checkbox"/> Whether or not live music will be played at this establishment <input type="checkbox"/> Will there be outdoor seating and/or outdoor designated smoking area <input type="checkbox"/> Do not include a marketing or financial plan with this business plan | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Are any building alterations planned for this site? If not sure, please contact Building & Code Enforcement at 630.377.4406 and/or Fire Prevention Bureau at 630.377.4458 to discuss whether or not a walk-thru and/or permit are necessary. <i>NO N/A</i> | <input type="checkbox"/> | <input type="checkbox"/> |
| All managers have been fingerprinted who are employed by your establishment. When new management is hired, it is imperative you contact the Mayor's office to be fingerprinted so the City's business files are appropriately updated. <i>must schedule</i> | <input type="checkbox"/> | <input type="checkbox"/> |
| Alcohol Tax Acknowledgement and Business Information Sheet | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |

OFFICIAL USE ONLY

Signature of Investigating Officer

Badge Number & Rank

Approval Recommended*

Approval NOT Recommended

Signature of Chief of Police

Date

***ISSUANCE OF THIS LICENSE IS CONTINGENT ON MEETING ALL REQUIRED BUILDING AND FIRE DEPARTMENT REQUIREMENTS.**

LICENSE INFORMATION:

- A Package \$3200-3600 A1 A2 A4 A5 A6
 B Restaurant \$2400-3600 B1 B2 B3 Late Night Permit 1:00am \$800 (B/C only)
 C Tavern \$2400-3600 C1 C2 C1 Late Night Permit 2:00am \$2300 (B/C only)
 D Hotel/Banquet/Arcada/Q-Center/Entertainment/Club - \$varies **D-Type** _____
 G Brewery/Restaurant or Site License - \$varies G1 G2
 H Catering License - \$varies H1 H2

*Initial Liquor License fees for A, B, C, D, G are reduced by 50% for annual renewals and licenses issued after Nov 1.
 *Licenses are valid until April 30 following issuance and a renewal application is required for the next year (May 1-April 30) (5.08.040)

APPLICANT INFORMATION

1. Type of Business: Individual Partnership Corporation Other (explain):

2. Business Name: Terabyte Group Inc. d/b/a 7-Eleven #33831B

3. Business Address: 1705 W. Main St. St. Charles IL 60174

| | | | |
|---|---|---|---|
| 4. Type of Business (5.08.070-3): <u>Convenience Store</u> | 5. Length of Time in this Business (5.08.070-4): <u>new franchisee</u> | 6. Value of merchandise that normally will be in inventory when in operation (5.08.070-5): \$ | |
| 7. Business Phone: <u>(630) 513-7453</u> | 8. Business E-mail: <u>adsukhdev@gmail.com</u> | 9. Business Website: | 10. Illinois Tax ID Number: <u>4525-3641</u> |
| 11. Applicant/Contact Person Name: <u>Sukhdev Singh</u> | | 12. Title: <u>President/Owner</u> | 13. Email: <u>adsukhdev@gmail.com</u> |

18. If Corporation, Corporation Name:
Terabyte Group Inc

19. Corporation Address (city, state, zip code):
[REDACTED]

ADDITIONAL OWNERS, INVESTORS (greater than 5% interest), and MANAGER INFORMATION

Full Name, include middle initial: Sukhdev Singh Title: President/Owner (100%)

Email Address: adsukhdev@gmail.com

| | | | |
|--|-------------|--------------------|----------------|
| Full Name, include middle initial: | Title: | | |
| Birthdate: | Birthplace: | Driver's License#: | Home Phone: |
| Home Address, and all addresses for the last 10 years: | | | Email Address: |

| | | | |
|--|-------------|--------------------|----------------|
| Full Name, include middle initial: | Title: | | |
| Birthdate: | Birthplace: | Driver's License#: | Home Phone: |
| Home Address, and all addresses for the last 10 years: | | | Email Address: |

| BUSINESS ESTABLISHMENT LOCATION INFORMATION | | | |
|--|--|--|----------------------------------|
| 1. Exact Street Address for liquor license: 1705 W. Main St. | 2. # Parking Spaces: N/A | 3. Outside Dining s.f. [17.20.020-R]: N/A | 4. Total Building s.f.: 2,652 |
| 5. Total # Seats: 0 | 6. Live Entertainment Area s.f. [5.08.010-H]: N/A | | |
| 7. Brief Business Plan description based on type of establishment listed above (5.08.070-6): Convenience store - retail sales | | | |

| PROPOSED FLOOR PLAN/LAYOUT OF PROPERTY | |
|--|--|
| Attach to this application a floorplan or layout of the proposed facility to include the following: | |
| 1. | Every application for Liquor license shall have attached thereto a site drawing of the proposed licensed premises, drawn to scale showing the following: <ul style="list-style-type: none"> a. The location of all rooms, segregated areas, including outdoor seating areas and the square footage thereof; b. The designated use of each room or segregated area (i.e. dining room, holding bar, service bar, kitchen, restrooms, outdoor seating areas, all rooms and segregated areas, including outdoor areas where alcoholic liquor may be served or consumed and all locations where live entertainment may be provided); c. The proposed seating capacity of rooms or segregated areas where the public is permitted to consume food and/or alcoholic beverages and/or live entertainment may be provided. |
| 2. | The site drawing is subject to the approval of the Local Liquor Control Commissioner. The Local Liquor Commissioner may impose such restrictions as he deems appropriate on any license by noting the same on the approved site drawing or as provided on the face of the license. |
| 3. | A copy of the approved site drawing shall be attached to the approved license and is made a part of said license. |
| 4. | It shall be unlawful for any licensee to operate and/or maintain the licensed premises in any manner inconsistent with the approved site drawing. |
| THE FIRE PREVENTION BUREAU WILL FURNISH ALL FINAL, PERMITTED OCCUPANCY NUMBERS FOR THIS LICENSE. | |

CORPORATION / PREMISES QUESTIONS

1. If applicant is an individual or partnership, is each and every person a United States citizen (5.08.070-2)? Yes No

Is any individual a naturalized citizen? Yes No **SUKHDEV SINGH**
 If yes, print name(s), date(s), and place(s) of naturalization: **06/2018, Chicago**

2. Is the premises owned or leased (5.08.070-6A)? Owned Leased

3. If the premises are leased, list the names and addresses of all direct owners or owners of beneficial interests in any trusts, if premises are held in trust (5.08.070-6B):

Name of Building Owner: Heidner Property Management Phone Number: **(630) 894-0099**
Address of Building Owner: [REDACTED] E-mail Address: **bob.dellutri@heidnerinc.com**
Mailing Address of Building Owner (if different):

Name of Building Owner: Phone Number:
Address of Building Owner: E-mail Address:
Mailing Address of Building Owner (if different):

Name of Building Owner: Phone Number:
Address of Building Owner: E-mail Address:
Mailing Address of Building Owner (if different):

4. Does the applicant currently operate, or operated in the past, any other establishment within the City of St. Charles that requires a liquor license? Yes No
 If yes, please list the business name(s) and address(es):

5. Does applicant have any outstanding debt with the City of St. Charles, including, but not limited to, utility bills, alcohol tax, and permit fees, for any current or previous establishment owned, operated or managed by the applicant?
 Yes No
If yes, please note the City of St. Charles requires all debt to be paid in full before consideration of a new or renewed liquor license is issued. (5.08.050)

6. Are any improvements planned for the building and/or site that will require a building permit? Yes No
 If yes, has a building permit been applied for? Yes No Date of permit application _____

7. Has applicant applied for a similar or other license on the premises other than the one for which this license is sought (5.08.070-7)? Yes No
 If yes, what was the disposition of the application? Explain as necessary:

| | |
|-----|---|
| 8. | <p>Has applicant (and all persons listed on page 2 of this application) ever been convicted of a felony under any Federal or State law, or convicted of a misdemeanor opposed to decency or morality (5.08.070-8)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Is applicant (and all persons listed on page 2 of this application) disqualified from receiving a liquor license by reason of any matter contained in Illinois State law and/or City of St. Charles Municipal Ordinances? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> |
| 9. | <p>List previous liquor licenses issued by any State Government or any subdivision thereof (5.08.070-9). Use additional paper if necessary.</p> <p>Government Unit: _____ Location, City/State: _____</p> <p>Date: _____ Special Explanations: _____</p> <p>Government Unit: _____ Location, City/State: _____</p> <p>Date: _____ Special Explanations: _____</p> |
| 10. | <p>Have any liquor licenses possessed ever been revoked (5.08.070-9)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, list all reasons on a separate, signed letter accompanying this application.</p> <p>Has any director, officer, shareholder, or any of your managers, ever been denied liquor license from any jurisdiction? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, proceed to Question 15. If more space is needed, please attach a separate sheet of paper with the information.</p> |
| 11. | <p>Complete ONLY if yes was answered to the question above (10):</p> <p>Name: _____ Name of Business: _____</p> <p>Position with the Business: _____ Date(s) of Denial: _____</p> <p>Reason(s) for Denial of License: _____</p> |
| 12. | <p>Date of Incorporation (Illinois Corporations) (5.08.070-10): 3-13-2024</p> <p>Date qualified under Illinois Business Corporation Act to transact business in Illinois (Foreign Corporation): N/A</p> |
| 13. | <p>Has the applicant and all designated managers read and do they all understand and agree not to violate any laws of the United States, the State of Illinois, and any of the ordinances of the City of St. Charles in conducting business (5.08.070-11)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Have you, or in the case of a corporation, the local manager, or in the case of a partnership any of the partners, ever been convicted of any violation of any law pertaining to alcoholic liquor? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Have you, or in the case of a corporation the local manager, or in the case of a partnership any of the partners, ever been convicted of a felony? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Have you ever been convicted of a gambling offense? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If a partnership or corporation, include all partners and the local manager(s).)</p> <p>Will you and all your employees refuse to serve or sell alcoholic liquor to an intoxicated person or to a minor? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> |

14. All individual owners, partners, officers, directors, and/or persons holding directly or beneficially more than five (5) percent in interest of the stock of owners by interest listed on page 2 of this application must be fingerprinted by the City of St. Charles Police Department (5.08.070-A12).
 Has this been done? Yes No
 If yes, date(s):
15. Has the applicant attached proof of Dram Shop Insurance to this application or already furnished it to the City of St. Charles (5.08.060)? Yes No If already furnished, date of delivery:
16. Is the premises within 100 feet of any real property of any church; school; hospital; home for the aged or indigent persons; home for veterans, their wives/husbands, or children; and/or any military or naval station (5.08.230)?
 Yes No

B.A.S.S.E.T. TRAINING

Please list employees required to have B.A.S.S.E.T training on this page – include all managers, assistant managers, bartenders, and clerks who are permitted to make alcoholic liquor sales. Include copies of certificates for managers only and mark Manager if applicable. Add another page, if needed.

Name (First, Middle, Last): Sukhdev Singh

Date of Course: 5/3/2024 Place Course was Taken: online Certificate Granted? Y/N Expiration: 5/3/2027

Name (First, Middle, Last): Jasleen Kaur

Date of Course: 5/4/2024 Place Course was Taken: online Certificate Granted? Y/N Expiration: 5/4/2027

Name (First, Middle, Last):

Home Street Address, Incl City, State, Zip:

Date of Course: Place Course was Taken: Certificate Granted? Y/N Expiration:

Name (First, Middle, Last):

Home Street Address, Incl City, State, Zip:

Date of Course: Place Course was Taken: Certificate Granted? Y/N Expiration:

NEW MANAGEMENT REQUIREMENTS

Whenever a new manager comes on board, the City must be notified and that person must be fingerprinted.

It is the business establishment's responsibility to keep copies of all B.A.S.S.E.T. certificates on file for their employees.

COMMENTS/ADDITIONAL INFORMATION

Business Name:

SIGNATURES

Applicant's Signature

Subscribed and sworn before me this 26th day of April, 2024

NAYELLI ALVAREZ
Notary Seal
Notary Public - State of Illinois
My Commission Expires Mar 26, 2027

Notary Public

ADDENDUM TO RETAIL LIQUOR LICENSE APPLICATION

To be completed by the City of St. Charles Police Department

Date:

Name of Applicant:

Name of Business:

Address of Business:

Ward Number:

Pursuant to the provision of the City of St. Charles Municipal Code, Chapter 5.08, Alcoholic Beverages, the following guide shall be in effect for the investigation of an applicant for a Retail Dealer's Liquor License:

1. Date on which applicant will begin selling retail alcoholic liquors at this location:
2. Is the location within 100 feet of any church; school; hospital; home for the aged or indigent persons; home for veterans, their wives/husbands or children; or any military or naval station? Yes No
3. If the answer to question 2 is yes, answer the following: Is applicant's place of business a hotel offering restaurant service, a regularly organized club, a restaurant, a food shop, or other place where the sale of alcoholic liquors is not the principal business? Yes No
If yes, answer a, b and c:
 - a. State the kind of such business:
 - b. Give date on which applicant began the kind of business named at this location:
 - c. Has the kind of business designated been established at this location for such purpose prior to February 1, 1934, and carried on continuously since such time by either the applicant or any other person?
 Yes No
4. If premises for which an alcoholic liquor license is herein applied for are within 100 feet of a church, have such premises been licensed for the sale of alcoholic liquor at retail prior to the establishment of such church? Yes No
If yes, have the premises been continuously operated and licensed for the sale of alcoholic liquor at retail since the original alcoholic liquor license was issued therefore? Yes No

| | |
|-----|--|
| 5. | <p>Is the place for which the alcoholic liquor license is sought a dwelling house, flat, or apartment used for residential purposes? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> |
| 6. | <p>Is there any access leading from premises to any other portion of the same building or structure used for dwelling or lodging purposes and which is permitted to be used or kept accessible for use by the public? (Connection between premises and such other portion of building or structure as is used only by the applicant, his/her family and personal guests not prohibited.) <input type="checkbox"/> Yes <input type="checkbox"/> No</p> |
| 7. | <p>If applicant conducts or will conduct in the same place any other class of business in addition to that of City Retailer of Alcoholic Liquor, state the kind and nature of such business: <input type="checkbox"/> Yes <input type="checkbox"/> No</p> |
| 8. | <p>Are all rooms where liquor will be sold for consumption on the premises continuously lighted during business hours by natural light or artificial white light so that all parts of the interior shall be clearly visible? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> |
| 9. | <p>Are premises located in any building belonging to or under the control of the State of Illinois or any other political subdivision thereof, such as county, city, etc.? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> |
| 10. | <p>Are the premises for which license is herein applied for a store or 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 or drinks for such minors? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> |
| 11. | <p>It is required by the City of St. Charles that all employees undergo BASSET training. Provide a copy of the certificate of training completion for each manager. All certificates for managers have been submitted: <input type="checkbox"/> Yes <input type="checkbox"/> No</p> |
| 12. | <p>From your observation and investigation, has applicant—to the best of your knowledge—truthfully answered all questions? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, state exceptions:</p> |
| 13. | <p>Have all persons named in this application been fingerprinted? <input type="checkbox"/> Yes <input type="checkbox"/> No Fingerprinted by: _____ Date: _____</p> |
| 14. | <p>Other necessary data:</p> |



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
05/08/2024

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).

| | |
|---|---|
| PRODUCER Marsh USA LLC IN CA, dba Marsh Risk & Insurance Services PO BOX 14404 Des Moines, IA 50306-9686 | CONTACT NAME: Marsh USA LLC PHONE (A/C, No, Ext): 855-546-5361 E-MAIL ADDRESS: 7-Eleven@marsh.com FAX (A/C, No): |
| | INSURER(S) AFFORDING COVERAGE |
| INSURED TERABYTE GROUP INC D/B/A 7-Eleven #33831B 1705 W MAIN ST SAINT CHARLES IL 60174 Customer Number: 3310225 | INSURER A: AIG Specialty Insurance Company |
| | 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"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Liquor Liability GENL AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER: | | | 015272190 | 07/01/2024 | 10/01/2024 | EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COM/POP AGG \$ 2,000,000 \$ |
| A | <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY | | | 015272190 | 07/01/2024 | 10/01/2024 | COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$ |
| | <input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$ | | | | | | EACH OCCURRENCE \$ AGGREGATE \$ \$ |
| | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> Y/N (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below | | 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 \$ |

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

See Additional Remarks Schedule (Acord 101)

| | |
|---|---|
| CERTIFICATE HOLDER CITY OF ST. CHARLES 2 E. MAIN ST ST CHARLES IL 60174 | CANCELLATION 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 |



AGENCY CUSTOMER ID: _____

LOC #: _____

ADDITIONAL REMARKS SCHEDULE

Page 2 of 2

| | | | |
|---|---------------------------|--|--|
| AGENCY Marsh USA LLC | | NAMED INSURED Sukhdev Singh 689 Western Lane Addison, IL 60101 | |
| POLICY NUMBER 015272190 | | EFFECTIVE DATE: 07/01/2024 | |
| CARRIER AIG Specialty Insurance Company | NAIC CODE 26883 | | |

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: 25 **FORM TITLE:** Certificate Of Liability Insurance

Additional Named Insured:
33831- TERABYTE GROUP INC, 1705 W MAIN ST., SAINT CHARLES, IL, 60174

ARTICLES OF INCORPORATION
Business Corporation Act

Filing Fee: \$150

File #: 74621503

Approved By: AXP

FILED

MAR 13 2024

Alexi Giannoulis
Secretary of State

1. Corporate Name: TERABYTE GROUP INC.

2. Initial Registered Agent: SUKHDEV SINGH

| | | | |
|---------------------------|-------------------|----------------|-------------------|
| | First Name | Middle Initial | Last Name |
| Initial Registered Office | <u>[REDACTED]</u> | | |
| | Number | Street | Suite No. |
| | <u>ADDISON</u> | <u>IL</u> | <u>60101-1595</u> |
| | City | ZIP Code | County |
| | | | <u>DU PAGE</u> |

3. Purposes for which the Corporation is Organized:
The transaction of any or all lawful businesses for which corporations may be incorporated under the Illinois Business Corporation Act.

4. Authorized Shares, Issued Shares and Consideration Received:

| Class | Number of Shares Authorized | Number of Shares Proposed to be Issued | Consideration to be Received Therefor |
|--------|-----------------------------|--|---------------------------------------|
| COMMON | 200 | 200 | \$ 200 |

NAME & ADDRESS OF INCORPORATOR

5. The undersigned incorporator hereby declares, under penalties of perjury, that the statements made in the foregoing Articles of Incorporation are true.

Dated MARCH 13, 2024
Month & Day Year

SUKHDEV SINGH
Name

1705 WEST MAIN STREET
Street

SAINT CHARLES IL 60174
City/Town State ZIP Code

ADDITIONAL PROVISION

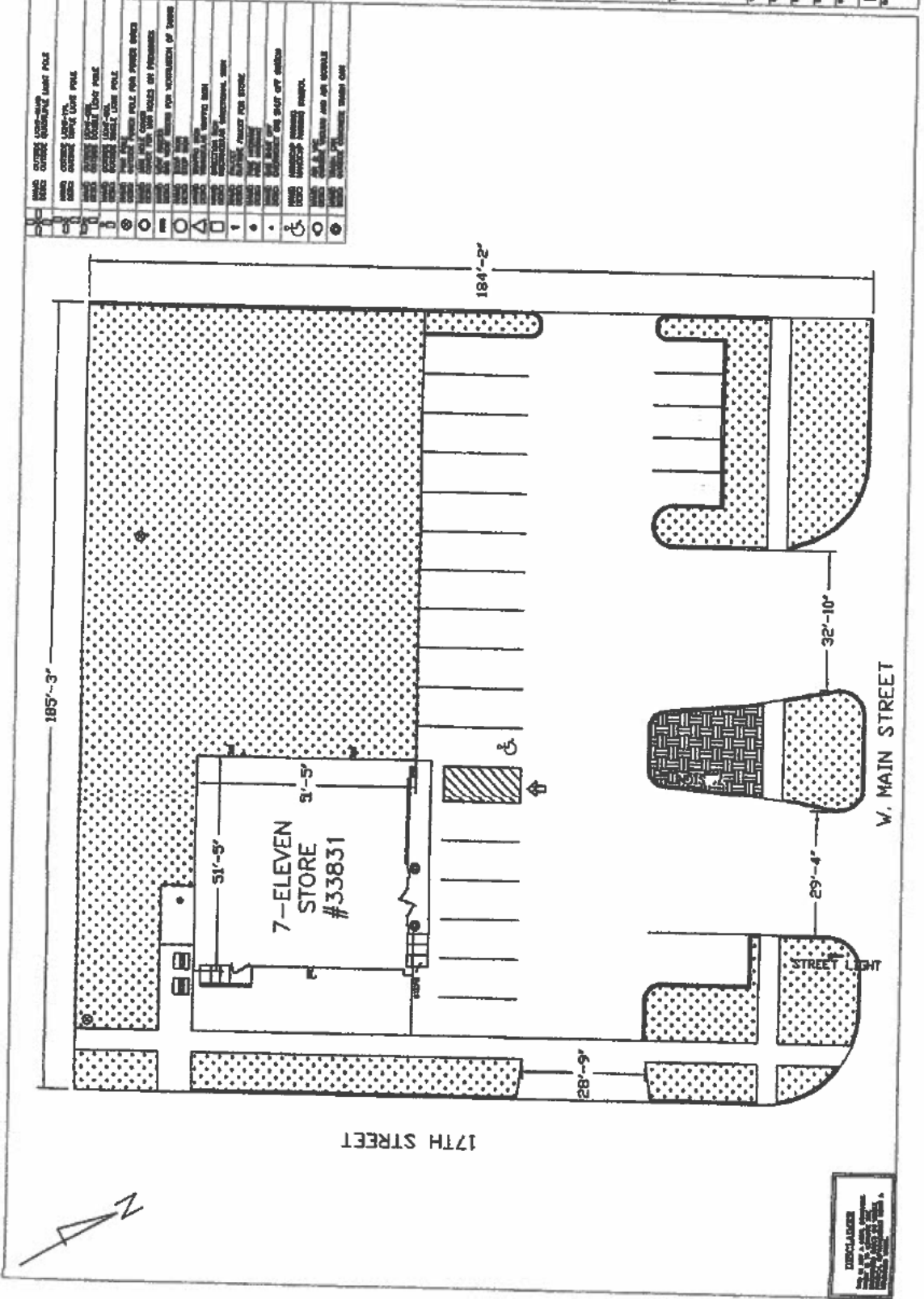
7-ELEVEN PROVISION:

- a) Notwithstanding anything herein to the contrary and unless otherwise required by state law, the sole shareholder(s) of this corporation shall be the "Franchisee(s)." For purposes of this document, "Franchisee(s)" shall mean and include (a) the original signatory(ies), as franchisee, to the 7-Eleven Store Franchise Agreement(s) ["Franchise Agreement(s)"] intended to be, or having been, assigned to this corporation; (b) anyone listed as a shareholder of this corporation who has participated in 7-Eleven, Inc.'s franchise qualification process and has been approved by 7-Eleven, Inc. as a shareholder of this corporation; and (c) anyone added as a franchisee by amendment to the Franchise Agreement(s); however, "Franchisee(s)" shall exclude anyone who was an original signatory or who was later added as a franchisee but who has subsequently been deleted as a franchisee by amendment to the Franchise Agreement(s). Further, each "Franchisee," during the time such person is a "Franchisee," and only while a "Franchisee," must be a shareholder of this corporation.**
- b) Notwithstanding anything herein to the contrary, this corporation is a single-purpose corporation, the single purpose being the operation of one or more 7-Eleven stores in accordance with one or more Franchise Agreements.**
- c) The following restrictive legend must appear clearly and legibly on each stock certificate:
"No shares of this corporation may be issued, encumbered, assigned, held or transferred except with the prior written consent of 7-Eleven Inc., a Texas corporation, and no shares may be held by anyone other than the "Franchisee(s)," as defined in the Articles of Incorporation of this corporation. However, shares may be owned by the fiduciary of the estate of a deceased shareholder pending an approved transfer. These restrictions may not be amended, repealed or revoked except with the prior written consent of 7-Eleven Inc."**
- d) These Articles of Incorporation may not be revised, amended or repealed except with the prior written consent of 7-Eleven, Inc., a Texas corporation.**
- e) Both preemptive rights and cumulative voting must be prohibited.**

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7-ELEVEN
 STORE # 33831
 1705 W. MAIN STREET
 ST. CHARLES TWP, IL. 60174-1631

DATE: 04/19/2008
 TIME: 1:20:00
 DRAWN BY: LCY
 CHECKED BY: DH
 SHEET: 1 of 1
 PROJECT: 33831SP



EXPLANATION
 SEE PLAN FOR SYMBOLS
 SEE PLAN FOR DIMENSIONS
 SEE PLAN FOR NOTES

Terabyte Group Inc. D/B/A 7-Eleven #33831B

1705 W. Main St., St. Charles, IL 60174

- Open 24 Hours/ 7 days a week
- 6-8 Employees
- No live music will be played
- No outdoor seating
- Convenience store engaged in the sale of retail goods for individual and household use and consumption. This store offers the following:
 - Groceries
 - Household Items
 - Dry Goods
 - Prepared take- out foods (hot and cold) intended for consumption off premises
 - Tobacco
 - Lottery
 - Packaged Goods Liquor (off premise consumption)

Copy of menu attached



7-Eleven Store Menu

Note: All animal proteins* are fully pre-cooked under verified HACCP plans in federally inspected production facilities.

*Does not include stores with the Laredo Taco Company or Roost Programs

Basic 7-Eleven Store

- Fresh and Fast Foods
- Refrigerated sandwiches – up to 3-day shelf life
- Freeze to thaw sandwiches, burritos, Hot Pockets, burgers and sandwiches – up to 14-days shelf life
- Whole and cut fruits – up to 9-days shelf life
- Green Salads – up to 7-days shelf life
- Pasta/potato salads – up to 14-days shelf life
- Fresh donuts and pastries – 24-hour shelf life
- Fresh packaged bakery items – up to 14-day shelf
- Pre-cooked (re-heated at store level) breakfast sandwiches – up to 2-hours shelf life held $\geq 140^{\circ}\text{F}$
- Pre-cooked (re-heated at store level) chicken tenders, chicken wings, tacos, meat patties empanadas - heated $\geq 140^{\circ}\text{F}$ with a shelf life up to 4-hours held $\geq 140^{\circ}\text{F}$
- Pre-cooked (re-heated and assembled at store level) products i.e. Chicken sandwiches, Beef Burgers and Breakfast Sandwiches
- Shelf stable sauces, decanted, held at ambient temperatures up to 72-hours
- Re-thermalized par-cooked potato products, cheese sticks and pizzas – heated $\geq 165^{\circ}\text{F}$ with a shelf life of up to 2 hours held $\geq 140^{\circ}\text{F}$.
- Pre-cooked (re-heated at store level) hot dogs, corn dogs, Taquitos and egg rolls – up to 4-hour shelf life $\geq 140^{\circ}\text{F}$
- Pre-cooked (re-heated at store level) chili and cheese sauces – up to 48-hour shelf life held $\geq 140^{\circ}\text{F}$
- Nachos
- Fresh and processed condiments (held $\leq 40^{\circ}\text{F}$)
 - Onions
 - Tomatoes
 - Pico di Gallo
 - Lettuce
 - Pickled products i.e. relish, jalapenos and sauerkraut
 - Fresh and/or bottled salsa

Beverages – Self Serve

- Assorted brewed coffees and teas
- Assorted powder based hot chocolates and cappuccinos
- Assorted iced coffees
- Wide assortment of fountain beverages
- Wide assortment of Slurpee (frozen carbonated beverages)
- Iced Tea

Grocery and Pre-packaged foods

- Large assortment of packaged grocery items:
- Cereals
- Canned goods
- Condiments
- Crackers
- Fresh Breads
- Ice Cream (take home and novelty)

- Frozen Meals
- Snacks
- Chips
- Dried Meat Jerky
- Nuts/seeds
- Confectionary
- Chocolate
- Non-chocolate
- Gums
- Hard Candies
- Novelty

Cold Vault

- Canned/bottled Soda
- Juices
- Energy Drinks
- Bottled Water
- Alcoholic Beverages
- Beer
- Wine
- Hard liquor (some stores with a limited selection)
- Fresh Dairy
- Fluid dairy
- Yogurt
- Butter
- Eggs
- Refrigerated Food Products
- Packaged Deli Meats and cheeses

Non – Food Items

- Cigarettes and tobacco
- Large assortment of health and beauty items
- Cleaning products
- Auto products
- Motor Oil
- Antifreeze
- Various auto fluids
- Home use paper products
- Stationary
- Film & batteries
- Cell phones/accessories

Bake In Store – (Some Stores – Refer to Plan)

- Basic Menu: Cookies, croissants and Danish – baked from frozen pucks
- Shelf life: up to 24 hours displayed unpackaged; up to 3-days displayed packaged and labeled
- Select stores will offer a limited breakfast menu
- Breakfast Sandwiches, (in-store cooked eggs, par-cooked and fully pre-cooked meats, cheeses and breads), par-cooked hashbrowns
- Shelf life: up to 2 hours held $\geq 140^{\circ}\text{F}$. Products will be discarded at the end of the held hot shelf life.
- The menu type will be identified in the Plan Review application.

Recommended Suppliers

Product assortment list may vary from store to store and area by area.

Refer to the plans submitted for specific store/program details

02.01.2020

ACKNOWLEDGEMENT OF ALCOHOL TAX

By signing below, I acknowledge that I have received the updated information on the City's alcohol tax. I understand that it is my responsibility to collect said tax on any alcohol sales effective immediately. It is also my responsibility to remit said taxes to the City by the due dates specified in the alcohol tax ordinance. I understand that any violation of the alcohol tax ordinance can result in the imposition of fines, penalties, or sanctions including suspension or revocation of the liquor license granted by the City of St. Charles. **The tax rate on alcohol sales will be changed to 3% of the purchase price effective September 1, 2018. Please apply the tax at a rate of 3% on all alcohol sales at your establishment beginning on September 1, 2018.**

Name Sukhdev Singh

Title Owner/franchisee

Business Name Terabyte Group Inc. d/b/a 7-Eleven #33831B

Address 1705 W. Main St. St. Charles IL 60174



Signature

04/26/24

Date

Please return the signed acknowledgement form to the City of St. Charles Administration Office .