



BUSINESS REGISTRATION FORM

Business Name:	
Business Address:	
Mailing Address (If different than business address):	
Business Phone:	Business Fax:
*Email Address (Required):	
<input type="checkbox"/> Yes, Please add my e-mail to the Village E-News Blast Subscriber List	
Website Address:	

Business Owner(s) Name:	
Business Owner(s) Address:	
Business Owner(s) Phone Number:	

Nature of Business:		
Business Hours:	No. of Shifts:	No. of Employees:
Illinois Retailers Occupation Tax, Service Occupation Tax and/or Use Tax No.:		
Hazardous Materials: Yes:	No:	
If Yes, please specify:		

NOTE: The information contained on this form is subject to public distribution

****Reminder****

**Building permits are required for all improvements and signs.
Please contact the Village Hall at (815) 678-4040 for additional information.**

Office Use Only

Zoning Classification: _____	Date Payment Received: _____
Habitable Inspection Needed: Yes ____ No ____	Method of Payment: _____
Fiscal Year of Registration: _____	Registration No.: _____