



Village of South Holland
 16226 Wausau Avenue
 South Holland, Illinois 60473-2193
 (708) 210-2900
APPLICATION FOR BUSINESS LICENSE
 Chapter 4A1-2 Section A-1

Effective January 1, 20__ through December 31, 20__

Home Business General Business Public Safety Registration

FEE \$ _____
<input type="checkbox"/> NEW
<input type="checkbox"/> UPDATE
<input type="checkbox"/> NAICS CODE _____

Business Name _____

Sole Proprietorship Partnership Corporation Non-profit

Business Address _____ Business Telephone () _____ - _____

Describe service or product _____ # of Employees _____

Number and type of company vehicles _____

Illinois business or sales tax number _____

Do you have hazardous or flammable material on premises? Yes No

If yes, please specify:

Do you have a security alarm? Yes No If yes, please furnish company name & phone number.

Name _____ Telephone Number () _____ - _____

Check type of vending machines (include quantity): Food/Chips _____ Tobacco _____ Other _____

If hotel or motel, check one of the following: 1-50 rooms 51-100 rooms Over 100 rooms

Are there any other businesses within your place of business? Yes No

If so, please list: _____

Are you a Renter ? Owner? Name and phone number of building owner _____

To be completed by business owner(s) or principal officer(s):

Name _____ Home Address _____

Email _____ Telephone Number () _____ - _____

Name _____ Home Address _____

Email _____ Telephone Number () _____ - _____

(If more than two principals, please list on the reverse side the name, address, e-mail and phone number of the additional individuals.)

Please list names and telephone numbers of at least (2) persons as emergency contact.

(These are the persons the police or fire department will contact first in an emergency)

Name _____ Telephone Number (_____) _____ - _____

Name _____ Telephone Number (_____) _____ - _____

I/We understand the issuance of this License is conditioned upon compliance with Village Ordinances and the results of any inspection of the above premises at this time or any subsequent inspections while this License is in force. I/We also understand that any falsification or willful misrepresentation of the above statements or answers will result in the revocation of this license.

Signature _____ Date _____

Signature _____ Date _____

FOR OFFICE USE ONLY

Fire Department: Approved/Denied _____ Date _____

Building Department: Approved/Denied _____ Date _____

Economic Development: Approved/Denied _____ Date _____