



Village Of Worth
7112 W. 111th St. Worth, IL 60482
Ph: 708-448-1181 Fx: 708-448-1193

Business License Application

1. Have a location chosen for the business. Check with the building department to make sure your business is zoned correctly. We recommend not signing a lease until the Business License application has been approved.
2. Completely fill out a Village of Worth Business Application. The Building Department will need a copy of your FEIN# and Illinois Sales Tax# when submitting your application and corporation papers. If you are licensed with the State of Illinois, the Village will need a copy of your State Certification.
3. If you have any questions about the application, contact the Building Department at 708-923-7507.
4. Attend the Economic Development Meeting. The meetings are the second (2nd) Thursday of each month at 7:00 p.m. in the Village Hall meeting room 7112 W. 111th St. This is an opportunity for you to ask questions. The EDC may give you suggestions. The EDC will make their recommendations to the Village Board.
5. The application will be introduced to the Village Board. The Board meets the first (1st) and third (3rd) Tuesday of each month at 7:00 p.m. held in the Village Hall meeting room 7112 W. 111th St. You **must** attend this meeting. The Board may ask you questions regarding your business.
6. If you are approved by the Village Board you will need to come to the Building Department within the next (7) seven days to pay for your license. You will need to let us know when you are ready to open for the pre-opening inspections performed by the Fire Department and the Building Commissioner.
7. If you are licensed by the State of Illinois, the Village will need a copy of your State Certification.
8. A fee will be determined which will be paid at this time. You will be given your business license after payment has been paid.

EDC Meeting Date _____

Village Board Meeting Date _____

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Date _____

Business Application

B1 Zoning

B2 Zoning

Permitted

Special Use

Business Name _____

d/b/a _____ Corporate Yes No

Business Phone _____ Business Owner Email _____

Business Location _____ City _____ Zip _____

Billing Address _____ City _____ Zip _____

Sales Tax (8 digit number with a dash) _____ FEIN _____

Property Owner Name _____ Phone _____

Property Owner Address _____

Business Owner _____ Phone _____

Owner's Address _____ City _____ Zip _____

Date of Birth _____ Drivers License _____

Describe Operation of Business _____

Number of Parking Spaces _____

Prior Business in Worth Yes No Seasonal Yes No Time Period? _____

Store Type Store Front Other Total Sq. Footage of Business Area _____

Tentative Business Open Date (must attend meeting prior to open date) _____

Cigarette Sales Yes No Vending Machines Yes No Total Number _____

Type of Vending Machines _____

All new businesses must attend a Economic Development Committee meeting and Village Board meeting for approval prior to the business opening. The signature below indicates full examination of this completed form. ***Any misrepresentation or falsification of the information sought may result in revocation of the license granted.***

Applicant Signature

Date

Business Signage

Will the business have a sign? Yes No if yes, permit number _____

Total square footage of sign _____

Sign Location

Secure to Building Structure Secured to Roof Free Standing

Other (please describe) _____

Please find your business type below and answer the applicable questions.

Restaurants, Banquet Halls, Bars or Lounges

Will you be serving or selling milk or related dairy products, bread or related bakery goods, meat or other forms of prepared food? Yes No

****If yes, please include a copy of your Food Service & Sanitation Certificate****

Total Number of seats _____ Total Number of parking spaces available _____

Specify the number and the type of amusement devices operated at your establishment

Juke Box _____ Bowling Games _____ Pool Table _____ Dart Board _____

Pinball Machines _____ Arcade (non gambling) video games _____

State Video Gaming License _____ Number of terminals _____

*****Please include Video Gaming Application and copy of Illinois Gaming Board Certification*****

Automobile & Truck Sales, Repair, Rental and Parking

Will your business be involved in any of the following (please indicate all that apply)

Automobiles Trucks/Trailers

Sales Rental Repair Rebuilding Parking Space Rental Number of Spaces

Fuel & Service Stations ****Please submit Vehicle Fuel Tax application****

Number of Pumps _____ Storage Capacity in Gallons _____

Have the tanks been pressure tested? Yes No If so when? _____

Vehicle Repair Bay on site? Yes No If so, what is the square footage _____

Car Wash on site?

Automated Attendant Operated DIY

N.P.F.P.D. /Worth Police Department
BUSINESS EMERGENCY CONTACT INFORMATION
(ALL INFORMATION IS CONFIDENTIAL – THIS WILL BE USED IN AN EMERGENCY ONLY)

PLEASE PRINT INFORMATION AND COMPLETE THE ENTIRE FORM

Name of Business: _____

Address: _____ Suite # _____

Business Phone # _____ Business Fax # _____

Type of Business: _____

Business Hours: _____

Business Owner Contact Information:

1. Name: _____ Position/Relation: _____

Cell Phone: _____ Home: _____ Other: _____

2. Name: _____ Position/Relation: _____

Cell Phone: _____ Home: _____ Other: _____

3. Name: _____ Position/Relation: _____

Cell Phone: _____ Home: _____ Other: _____

4. Name: _____ Position/Relation: _____

Cell Phone: _____ Home: _____ Other: _____

Alarm Information (Check All That Apply)

Alarm Type: Burglar Fire Hold Up/Panic Alarm None

Alarm Company Phone Number: _____

Is there a safe on site? Yes No Location: _____

Janitorial Service ? Yes No

If yes,

Name _____ Address _____ Phone _____

Insurance Company: _____

Insurance Company Phone Number: _____

Any other relevant information _____

Completed By: _____ Date: _____

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Will you be doing any of the following work to the business once approved. Please check.

| | Yes | No |
|-------------------|--------------------------|--------------------------|
| Remodeling Permit | <input type="checkbox"/> | <input type="checkbox"/> |
| Electrical Permit | <input type="checkbox"/> | <input type="checkbox"/> |
| Plumbing Permit | <input type="checkbox"/> | <input type="checkbox"/> |
| Sign Permit | <input type="checkbox"/> | <input type="checkbox"/> |

If work will be done please fill out the permit application that corresponds with the work. Applications are available in the village hall or online villageofworth.com.

FOR OFFICE USE ONLY

Date Received: _____ Time: _____

Application Accepted

by: _____

EDC Meeting Date _____ Approved Denied

Village Meeting Date _____ Approved Denied

Comments: _____
