



## Village of Worth

7112 W. 111<sup>th</sup> St. Worth, IL 60482

Phone: 708-923-7507 Fax: 708-448-1193

tkrueger@villageofworth.com

Monday thru Friday 9am to 5pm Third Monday open to 7pm

### 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) You must have a diagram with the layout of the proposed business before completion of the business application. The diagram must include the square footage of the business. If the business is retail we will need the square footage of the sales area as well.
- 3) Completely fill out a Village of Worth Business License 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.
- 4) If you have any questions about the application, contact the Building Department at 708-923-7507.
- 5) The application will be introduced to the Village Board. The Board meets the first (1<sup>st</sup>) and third (3<sup>rd</sup>) Tuesday of each month at 7:00 p.m. held in the Village Hall meeting room 7112 W. 111<sup>th</sup> 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 your business is ready to open for business for the pre-opening inspections performed by the North Palos Fire Protection District and the Building Commissioner.

#### Office Use

Application needs to be returned by \_\_\_\_\_ for this to be placed on the agenda

for the Village Board Meeting to be held on \_\_\_\_\_

Applicant Copy



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Village Copy



VILLAGE OF WORTH
7112 W. 111TH St. •Worth, IL 60482• (708) 448-1181

Business License Application

Date
Business Name
DBA Corporate Yes No
Business Phone Business Owner E-mail
Business Location City Zip
Billing Address City Zip
Sales Tax # (8 digit number with a dash) Fein#
Manager's Name Manager's Phone
Business Owner Owner's Phone
Owner's Address City Zip
Date of Birth Drivers License#
Describe Operation of Business
Prior Business in Worth: Yes No Seasonal: Yes No Time Period?
Store Type: Store Front Other Total Sq. Footage of Business Area
If Retail Total Sq. Footage of Sales Area
Floor 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 Village Board meeting for Board 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

FOR OFFICE USE ONLY

Number of parking spaces on the premises
Number of parking spaces required for this business
B1 Zoning B2 Zoning Permitted Special Use
REDB Meeting Date
REDB: Approved Denied
Meeting Date Approved Denied

## Business Signage

Will the business have a sign?  Yes  No If yes, the Building Permit # \_\_\_\_\_

Total square footage of sign \_\_\_\_\_

### Sign Location:

Secured to Building Structure  Secured to Roof  Free Standing

Other (please describe) \_\_\_\_\_

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

### **Restaurants, Banquet Halls, Bars or Lounges:**

Will you be serving or selling any 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 Style Video Games (non-gambling) \_\_\_\_\_

State Video Gaming License # \_\_\_\_\_ Number of Terminals \_\_\_\_\_

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

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### **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

**Worth Police Department**

7114 W. 111<sup>th</sup> St. • Worth, IL 60482 • 708 448-3979

**North Palos Fire Protection**

10629 S. Roberts Road • Palos Hills, IL 60465 • (708) 974-4474

Date \_\_\_\_\_

Business Name \_\_\_\_\_

Business Address \_\_\_\_\_

Business Phone \_\_\_\_\_

Type of Business \_\_\_\_\_

Business Owner Name \_\_\_\_\_ Business Owner Phone \_\_\_\_\_

Business Owner Address \_\_\_\_\_

Business Insurance Name \_\_\_\_\_

Insurance Address \_\_\_\_\_

Insurance Phone \_\_\_\_\_

Building Owner \_\_\_\_\_

Owner Address \_\_\_\_\_ Owner Phone \_\_\_\_\_

**Hours of Operation:**

Monday \_\_\_\_\_ Tuesday \_\_\_\_\_ Wednesday \_\_\_\_\_ Thursday \_\_\_\_\_

Friday \_\_\_\_\_ Saturday \_\_\_\_\_ Sunday \_\_\_\_\_

**Does your business/location have any of the following?**

Cleaning Service    Knox Box    Sprinkler System    Alarm

What type of alarm?    Burglar    Fire    Panic

How is the alarm transmitted?    Direct Telephone    Telephone by Private Security

Direct to Alarm Board    Outside Ringer Only

Will your business produce and/or store hazardous material on the property? \_\_\_\_\_

*Please notify the Village Hall of any changes made to the information above*

**Emergency Contacts:**

Name \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

If business is approved will you be doing the following work. Please check that applies.

	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"/>

A permit is required for doing any work. Applications are available in the village hall or online at [villageofworth.com](http://villageofworth.com).