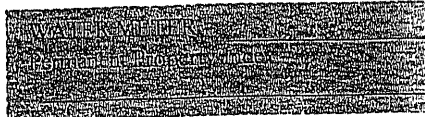


5 pages

VILLAGE OF BROADVIEW
BUSINESS LICENSES
APPLICATION PROCEDURES, PROCESS,
REQUIREMENTS, AND SCHEDULED FEES

- I APPLICATION FORM AND ALL PERTINENT INFORMATION ARE AVAILABLE AT THE VILLAGE HALL, FROM THE VILLAGE CLERK OR VILLAGE ADMINISTRATOR UPON REQUEST.
- II THE APPLICATION FORM MUST BE SUBMITTED COMPLETE AS APPLICABLE FOR THE SPECIFIC BUSINESS DESIRED. AN INCOMPLETE APPLICATION FORM WILL NOT BE PROCESSED UNTIL ALL INFORMATION HAS BEEN PROVIDED. (Please provide copies of State Sales Tax / Corporation Papers)
- III A COMPLETED APPLICATION FORM WILL BE PROCESSED BY THE VILLAGE CLERK - COPIES OF WHICH WILL BE DISTRIBUTED TO THE BUILDING DEPARTMENT, LICENSE COMMITTEE. ONCE ALL INSPECTION HAVE BEEN COMPLETED AND APPROVED, THE LICENSE WILL BE FORWARDED TO THE MAYOR AND BOARD OF TRUSTEES. BOARD ACTION ON ANY APPLICATIONS WILL TAKE PLACE ONLY ON REGULAR BUSINESS MEETING DAY. 1ST & 3RD MONDAYS OF EVERY MONTH.
- IV. THE VILLAGE CLERK WILL NOTIFY THE APPLICANT OF THE SCHEDULING PROCESS FOR INSPECTION. THE INDIVIDUAL INSPECTOR WILL NOTIFY THE APPLICANT AND SCHEDULE PROPERTY INSPECTION: IF ANY DEFICIENCIES ARE FOUND ALL CORRECTIONS MUST BE MADE, AND SCHEDULE A RE-INSPECTION WITH APPROPRIATE INSPECTOR.
- V. THE APPLICANT WILL BE NOTIFIED FROM THE APPROPRIATE BOARD, COMMITTEE, OR COMMISSION FOR SCHEDULING OF ANY MEETING OR HEARING RESULTING FROM THE REFERRAL. UPON CONCLUSION OF THE MEETING OR HEARING A WRITTEN REPORT INCLUDING A RECOMMENDATION WILL BE SENT TO THE BOARD OF TRUSTEES FOR FINAL ACTION.
- VI THE VILLAGE CLERK WILL NOTIFY THE APPLICANT AFTER ALL INSPECTIONS HAVE BEEN APPROVED. THE APPLICATION WILL BE FORWARD TO THE LICENSE COMMITTEE FOR REVIEW. THE APPLICATION WILL BE PLACED ON THE LICENSE CHAIRMAN AGENDA AT THE NEXT REGULAR BUSINESS MEETING FOR RECOMMENDATION TO THE FULL BOARD OF TRUSTEES FOR CONSIDERATION.
- VII. THE VILLAGE CLERK WILL NOTIFY THE APPLICANT AS TO THE BOARD'S ACTION OF THE APPLICATION. BOARD DENIAL ENDS FURTHER PROCESSING. REFERRAL OF THE APPLICATION BY THE BOARD TO ANOTHER BOARD, COMMITTEE, OR COMMISSION WILL BE PROCESSED BY THE VILLAGE CLERK.
- VIII NO BUSINESS WILL BE ALLOWED TO OPEN OR OPERATE WITHOUT A VALID BUSINESS LICENSE.
- IX NO BUSINESS LICENSE WILL BE ISSUED UNTIL PAID IN FULL.
- X A BUSINESS LICENSE IS VALID FOR 12 MONTHS BEGINNING JANUARY 1ST OF EACH YEAR. RENEWABLE THE 11TH MONTH OF THAT YEAR. UNPAID BUSINESS LICENSE BECOME PAST DUE ON JANUARY 1ST OF THE FOLLOWING YEAR. ANY BUSINESS LICENSE APPROVED DURING THE YEAR WILL THE SCHEDULED FEE PRORATED ON A MONTHLY BASIS FOR THE REMAINDER OF THE CALENDAR YEAR. BUSINESS LICENSES ARE NON-REFUNDABLE.
- XI A BUSINESS LICENSE IS NOT TRANSFERABLE EITHER FROM ADDRESS TO ADDRESS OR PERSON TO PERSON. A BUSINESS LICENSE FEE IS TRANSFERABLE PROVIDED THE FEE IS THE SAME OR GREATER THAN THAT ORIGINALLY PAID.
- XII A BUSINESS FOUND OPERATING WITHOUT A VALID BUSINESS LICENSE WILL BE SHUT DOWN AND FINED THE MAXIMUM AMOUNT AS ALLOWED BY THE LAW.



Fire Dept.	<input type="checkbox"/>	___/___/___	Electrical Dept.	<input type="checkbox"/>	___/___/___
Building Dept.	<input type="checkbox"/>	___/___/___	Plumbing Dept.	<input type="checkbox"/>	___/___/___
Health Dept.	<input type="checkbox"/>	___/___/___	Village Clerk	<input type="checkbox"/>	___/___/___

VILLAGE OF BROADVIEW
APPLICATION FOR BUSINESS LICENSE
(Village Code Title 3 – Chapter 1 – Section 2)

New business Change of Ownership Change of Name

Date: _____

(P.O. BOX ADDRESSES NOT VALID)

Section 1

Business Name _____
D/B/A _____
Address _____
City _____ State _____ Zip _____
Telephone _____ Fax # _____
Email _____

FEIN NUMBER STATE SALES TAX #

Sole Proprietorship Partnership Not For Profit Corporation

State of Incorporation _____ Date _____
Name of Corporation _____
Address _____
City _____ State _____ Zip _____
Telephone _____ Fax # _____
Federal License # _____ (Copy of License will be required with application)
State License # _____ (Copy of License will be required with application)

Section 2 – Owners/Partners/Officers

This section must be completed

Name	Title	SSN #	Address	City	State

I, the Applicant, do hereby personally in my capacity as _____ of _____ Corporation do hereby certify and represent that I/the Corporation have not heretofore had a business license revoked by any municipality or government agency, and further state that I/the Corporation will otherwise comply with all Village Codes and other applicable Statutes and laws in the operation and conduct of the business.

Section 3

Nature of Business _____
Brief Description _____



Business Type					
Manufacturing	<input type="checkbox"/>	Retail Sales	<input type="checkbox"/>	Day Care	<input type="checkbox"/>
Professional	<input type="checkbox"/>	Vending	<input type="checkbox"/>	Food/Beverage	<input type="checkbox"/>
Towing	<input type="checkbox"/>	Service	<input type="checkbox"/>		
Livery	<input type="checkbox"/>	Transportation	<input type="checkbox"/>		
Fuel Service Station	<input type="checkbox"/>	Warehousing	<input type="checkbox"/>		

Applicant Name _____
 Address _____
 City _____ State _____ Zip Code _____
 DOB _____ Social Security # _____
 Telephone _____ Fax _____ Email _____
 Property Owner Name _____

Section 4 - Business Profile

President _____
 Vice President _____
 Treasurer _____

Business Contacts

Name _____	Phone _____
Name _____	Phone _____
Name _____	Phone _____

Hours of Operation _____ to _____

Number of Employees _____
Seating Capacity _____ (If applicable)

Company Vehicles _____ No _____ Yes _____

Pop/Water <input type="checkbox"/>	Coffee <input type="checkbox"/>	Food/Snacks <input type="checkbox"/>	Cigarettes <input type="checkbox"/>
Food Truck <input type="checkbox"/>	Ice Cream Truck <input type="checkbox"/>	Washing Machines <input type="checkbox"/>	Dryers <input type="checkbox"/>
			Candy <input type="checkbox"/>
			Detergent/Bleach <input type="checkbox"/>
			Amusement <input type="checkbox"/>
			Gumball/Novelty <input type="checkbox"/>

Hazardous Materials on Premise Yes No

If yes to above, list Generic Name & Quantity

Name	Quantity
_____	_____
_____	_____
_____	_____

Section 5

Property Owned Leased Lease Term _____
 Building Size _____ Square Feet _____ Parking Stalls _____

If leased, provide the following:

Property Owner's Name _____
 Address _____ State _____ Zip _____
 City _____

BUSINESS LICENSES SHALL BE DISPLAYED IN A VISIBLE LOCATION

Violation of any law of the State of Illinois, the United States of American, or any ordinance of the Village of Broadview in force and effect during all or part of the period covered by any license issued pursuant to this application in the conduct of said business, will result in a revocation of the license issued hereunder

Signature _____ Date _____





RAYMOND K. PELLETIER
Chief of Police

BROADVIEW POLICE DEPARTMENT
2350 SOUTH 25th AVENUE • BROADVIEW, IL 60155-3800

708/345-6550
Fax: 708/681-0248

Emergency Information

Business Name: _____ Address: _____

Business Phone: _____ Fax: _____ Business Email _____

Alarm Company: _____ Phone: _____

Business Hours: Mon _____ Tues: _____ Wed: _____ Thurs: _____

Fri: _____ Sat: _____ Sun: _____

Key holders to be contacted, please list as many as possible.
(Please list in the order you wish calls to be made for after hours emergencies. Be sure to include area codes.)

#1 Name _____ Home Phone: _____

Address _____ Cell phone/Pager _____

City/State _____

#2 Name _____ Home Phone: _____

Address _____ Cell phone/Pager _____

City/State _____

#3 Name _____ Home Phone: _____

Address _____ Cell phone/Pager _____

City/State _____

#4 Name _____ Home Phone: _____

Address _____ Cell phone/Pager _____

City/State _____

OFFICE USE ONLY

SIGN INSPECTION FEE: _____
BUSINESS LICENSE FEE: _____
COOK COUNTY HEALTH INSPECTION FEE: _____
ELEVATOR INSPECTION FEE: _____
ANNUAL BUILDING INSPECTION FEE: _____

LICENSE NO. _____

