



Village of Bridgeview

7500 SOUTH OKETO AVENUE • BRIDGEVIEW, ILLINOIS 60455 • (708) 594-2525

TEMPORARY APPLICATION FOR BUSINESS LICENSE

Please Note: Any misrepresentations or falsification of the information provided below may result in denial or revocation of license applied for.

LICENSE INFORMATION:

LICENSE #:

DATE RECEIVED:

DATE ISSUED:

ISSUED BY:

BUSINESS INFORMATION:

NAME OF BUSINESS:

BUSINESS ADDRESS:

BUSINESS PHONE #:

EMERGENCY PHONE #:

ILLINOIS RETAILERS OCCUPATION TAX NUMBER: (Note: When applicable, Retailers Occupation Tax Number must be on this application or Business License will not be issued.)

Nature or Type of Business:

BUSINESS OWNER INFORMATION:

NAME:

EMAIL ADDRESS:

MAILING ADDRESS:

CITY:

STATE:

ZIP CODE:

HOME PHONE #:

DATE OF BIRTH:

DRIVER'S LICENSE NUMBER:

HAVE YOU EVER BEEN CONVICTED OF A FELONY? Yes No IF YES, STATE YEAR OF CONVICTION:

GIVE EXPLANATION:

STATUS OF OWNERSHIP:

INDIVIDUAL PROPRIETORSHIP:

PARTNERSHIP:

CORPORATION:

WILL THERE BE THE SALE OF TOBACCO? Yes No

EVENT DATE:

EVENT NAME:

It is understood that no business may commence and until approval has been granted the issuance of a temporary business license. I agree to comply with all statutes and village ordinances and regulations relating to the above business.

Designate Signature as Owner/Proprietor or Manager:

Date:

X