

BUSINESS LICENSE APPLICATION INFORMATION

Zoning Approval

New business owners are advised to contact Community Development for preliminary zoning approval.

Remodeling / New Construction

Businesses seeking new construction or remodeling permits need to have received an approved business license application before Community Development can grant construction permits.

If a Building Permit is issued, please call when an inspection is required. 630-981-6250 is the direct number for Community Development. On-site inspections may take longer than anticipated and some problems may have to be resolved.

Required Inspections

In every instance, a Building and Fire Inspection is required from the Village of Westmont prior to opening your business.

Food / Liquor

All establishments selling food must submit a Places for Eating Tax Registration Form to our Finance Department.



31 West Quincy Street • Westmont, Illinois 60559
Tel: 630-981-6200

BUSINESS LICENSE APPLICATION

License Year _____ **Partial or Full**

| | | |
|---|-----------------|------|
| Date: | | |
| <i>Check the appropriate box:</i> <input type="checkbox"/> New Business <input type="checkbox"/> Existing Business, Name Change Only <input type="checkbox"/> Ownership Change <input type="checkbox"/> Address Change | | |
| Business Name: | | |
| Business Address: | | |
| City: | State: | Zip: |
| Business Phone Number: | Business email: | |
| Corporate Name (if different from Business Name): | | |
| Principal Business Activity: _____ | | |
| Secondary Business Activity: _____ | | |
| Type of Application: <input type="checkbox"/> Individual <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation | | |
| If Individual, list owner only. If Corporation, list or attach all partners or principal officers. | | |
| Person in Charge | | |
| Name: | Phone Number: | |
| Address: | | |
| City: | State: | Zip: |
| Email address: | | |
| Owner / Remit To | | |
| Name: | Phone Number: | |
| Address: | | |
| City: | State: | Zip: |
| Property Owner | | |
| Name: | Phone Number: | |
| Address: | | |
| City: | State: | Zip: |

| | |
|---|-----------------|
| Emergency Contacts (Please list in order of priority) | |
| Name: | Title: |
| Address: | Phone: |
| Name: | Title: |
| Address: | Phone: |
| Additional Business Information | |
| *FEIN Number (Required) : | |
| Illinois Retail Occupation Tax Number: | |
| Date Opened: ___/___/___ | Square Footage: |
| Anticipated # of Employees on site at any given time? | |
| Does your business activity require outside storage of product, equipment, or fleet? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| *Does the business serve or sell food products? (Y/N) _____ If Yes, registration is required. | |
| Does the business have a vending machine? (Y/N) _____ If yes, how many _____ | |
| Restaurant Seating: | |
| Hours of Operation: | |

Print Name: _____ Title: _____

Signature X _____

I hereby certify that there are no willful misrepresentations in, or falsification of, the above statements, answers, and attachments.

Approval for application of license / permit shall not be held to permit, or be an approval of, any violations of the provisions of the ordinances and codes of the Village of Westmont in general, or the specific ordinances and codes under this license / permit would be issued.

Note: Build-outs and signage require plans and permits.

FOR OFFICE USE ONLY

Notice Sent To: Village Planner Code Enforcement Fire Dept Police Dept Finance

Approval: _____ Zoning _____ Fire Inspection _____ Building Inspection

Notes: _____

Special Use Ord# _____ **Zoning District** _____

Use Classification _____

Business ID: _____ **Business License #** _____

| <u>Code</u> | <u>Amount</u> | <u>Code</u> | <u>Description</u> | <u>Amount</u> | | | |
|---|---------------|--|--------------------------|---|-------|--|-------|
| Food Establishment License | | | | | | | |
| <input type="checkbox"/> | | 00100 | General Business License | \$25 | | | |
| <input type="checkbox"/> | 18201 | 1 - 25 Seating | \$50 | <input type="checkbox"/> | 18101 | Antique Store | \$50 |
| <input type="checkbox"/> | 18202 | 26 - 50 Seating | \$75 | <input type="checkbox"/> | 01200 | Auto, Truck Repair, MC Repair | \$50 |
| <input type="checkbox"/> | 18203 | 51 - 100 Seating | \$100 | <input type="checkbox"/> | 01400 | Auto Accessory Sales | \$50 |
| <input type="checkbox"/> | 18204 | Over 101 Seating | \$150 | <input type="checkbox"/> | 01600 | Auto Body Repair | \$50 |
| *Please call the Finance Dept to discuss Places for Eating tax at 630-981-6233 | | | | | | | |
| <input type="checkbox"/> | 03300 | Catering | \$50 | <input type="checkbox"/> | 10300 | Advertising Bench | \$25 |
| <input type="checkbox"/> | 03200 | Carry-out Restaurant | \$50 | <input type="checkbox"/> | 02100 | Beauty Salon | \$50 |
| <input type="checkbox"/> | 20700 | Food & Beverage Sales | \$50 | <input type="checkbox"/> | 02200 | Barber Shop | \$50 |
| <input type="checkbox"/> | 13200 | Meat Market | \$50 | <input type="checkbox"/> | 02500 | Bowling Alley | \$100 |
| <input type="checkbox"/> | 02300 | Bakery | \$50 | <input type="checkbox"/> | 21000 | Christmas Tree Sales | \$50 |
| <input type="checkbox"/> | 20900 | Ice Cream Sales | \$50 | <input type="checkbox"/> | 03100 | Dry Cleaners | \$50 |
| <input type="checkbox"/> | 20500 | Ice Sales | \$25 | <input type="checkbox"/> | 20600 | Flower Sales | \$50 |
| <input type="checkbox"/> | 21100 | Food Vendor Mobile/Catering Truck | \$200 | <input type="checkbox"/> | 06100 | Funeral Parlor | \$50 |
| <input type="checkbox"/> | 21101 | Food Vendor Ice Cream Truck | \$200 | <input type="checkbox"/> | 13300 | Hotel Motel | \$60 |
| Gas Stations | | | | | | | |
| <input type="checkbox"/> | 07100 | Gas Pumps (each) | \$10 | <input type="checkbox"/> | 12100 | Laundry | \$50 |
| <input type="checkbox"/> | 20200 | Gas Station / Service Station | \$50 | <input type="checkbox"/> | 20800 | Lumber Sales | \$50 |
| Grocery Store | | | | | | | |
| <input type="checkbox"/> | 07201 | 0-10,000 Floor Area in SSF | \$50 | <input type="checkbox"/> | 13100 | Manufacturing / Printing | \$50 |
| <input type="checkbox"/> | 07202 | 10,000 - 25,000 | \$75 | <input type="checkbox"/> | 00050 | Massage Establishment | \$400 |
| <input type="checkbox"/> | 07203 | 25,001 - 50,000 | \$100 | <input type="checkbox"/> | 00060 | Note: Massage Establishment Yearly Renewal | \$100 |
| <input type="checkbox"/> | 07204 | 50,001 - over | \$125 | <input type="checkbox"/> | 14100 | Nursing Home | \$100 |
| Tobacco Sales | | | | | | | |
| <input type="checkbox"/> | 20400 | Initial Class A: Grocery + 5,000 SF, Restaurant, Gas Station | \$200 | <input type="checkbox"/> | 20300 | Paint Sales | \$25 |
| <input type="checkbox"/> | 20401 | Initial Class B: Any Business that sells tobacco that does not meet Class A Criteria | \$500 | <input type="checkbox"/> | 16100 | Parking Lot (0 - 50 Spaces) | \$50 |
| <input type="checkbox"/> | 39901 | Cigarette Vending Machines | \$100 | <input type="checkbox"/> | 16101 | Parking Lot (51 - over) | \$75 |
| Note: Yearly renewal is \$100 | | | | | | | |
| Vending Machine (per machine) | | | | | | | |
| <input type="checkbox"/> | 39900 | Gumball/Variety | \$25 | <input type="checkbox"/> | 01000 | Peddlers License | \$50 |
| <input type="checkbox"/> | 39902 | Beverage Machines | \$25 | <input type="checkbox"/> | 01001 | Peddlers License (one day) | \$20 |
| <input type="checkbox"/> | 39903 | Food Machines | \$25 | <input type="checkbox"/> | 16000 | Pet Grooming | \$50 |
| <input type="checkbox"/> | 39904 | Other | \$25 | <input type="checkbox"/> | 16200 | Pet Shop | \$50 |
| <input type="checkbox"/> | 39905 | Coke, Beverage | \$25 | <input type="checkbox"/> | 16300 | Pool Tables | \$100 |
| Machines: Other | | | | | | | |
| <input type="checkbox"/> | 09100 | Juke Box (per machine) | \$35 | <input type="checkbox"/> | 29800 | Recycling Scavenger | \$25 |
| <input type="checkbox"/> | 40001 | Video Gaming Terminal (each) | \$25 | <input type="checkbox"/> | 18100 | Resale or 2nd Hand Store | \$50 |
| <input type="checkbox"/> | 01101 | Amusement Machines (1 - 5) | \$25 | <input type="checkbox"/> | 20100 | Skating Rink | \$150 |
| <input type="checkbox"/> | 01102 | Amusement Machines (6 - over) | \$100 | <input type="checkbox"/> | 15100 | Taxi Cab Corporate License | \$200 |
| X _____ | | | | | | | |
| | | | | <input type="checkbox"/> | 16010 | Veterinarian | \$50 |
| | | | | SUB TOTAL: | | \$ | |
| | | | | <input type="checkbox"/> | NBC | Fire Inspection Certificate of Occupancy | \$100 |
| | | | | Note: new business, ownership change, location change | | | |
| | | | | TOTAL AMOUNT DUE: | | \$ | |
| *If application is recieved on or after July 1, the annual fee is reduced to one-half the listed fee. | | | | | | | |

Signature