



Village of Round Lake

442 N. Cedar Lake Road Round Lake, IL 60073

Ph. 847-546-5400 Fax 847-546-5405

www.eroundlake.com

BUSINESS REGISTRATION

BUSINESS OWNER INFORMATION

NAME:

ADDRESS:

CITY:

STATE:

ZIP:

PHONE:

FAX:

EMAIL ADDRESS:

BUSINESS INFORMATION

NAME:

ADDRESS:

CITY:

STATE:

ZIP:

PHONE:

FAX:

WEBSITE:

BUSINESS EMAIL:

FEIN:

IL BUSINESS TAX NUMBER (IBT):

PROPERTY OWNER INFORMATION

NAME:

ADDRESS:

CITY:

STATE:

ZIP:

PHONE:

FAX:

EMAIL ADDRESS:

COMMUNICATION

I WOULD LIKE TO HAVE MY BUSINESS NAME AND CONTACT INFORMATION PUBLISHED ON THE LOCAL BUSINESS DIRECTORY ON THE VILLAGE'S WEBSITE.

TYPE OF BUSINESS ENTITY

CORPORATION

LIMITED LIABILITY COMPANY

PARTNERSHIP

SOLE PROPRIETOR

NON-FOR PROFIT

OTHER:

FOR SOLE PROPRIETORS

ASSUMED BUSINESS CERTIFICATE FROM LAKE COUNTY ATTACHED

YES

FOR PARTNERSHIPS

DATE OF FORMATION:

PARTNERSHIP AGREEMENT ATTACHED

 YES

APPLICANT INFORMATION PAGE COMPLETED AND ATTACHED FOR EACH PARTNER

 YES**FOR CORPORATIONS**

NAME OF CORPORATION/ LLC:

DATE OF INCORPORATION:

ARTICLES OF INCORPORATIONS DEPICTING THE NAMES OF ALL STOCKHOLDERS,
OFFICERS, DIRECTORS AND THEIR POSITIONS IS ATTACHED. YES**COIN OPERATED MACHINE SUMMARY**

	MACHINE COUNT	PRICE	TOTAL
AMUSEMENT DEVICE (I.E. BILLIARD TABLES, DARTS)	#	(\$35 EACH)	\$
MUSIC DEVICE (JUKE BOX)	#	(\$25 EACH)	\$
TOBACCO VENDING	#	(\$20 EACH)	\$
VENDING (I.E. FOOD/BEVERAGE, VACUUM/AIR, GUMBALL)	#	(\$10 EACH)	\$
GRAND TOTAL			\$

ACKNOWLEDGEMENTS

A permit is required for parking lot sealing/restripping. Initial to acknowledge:

A permit is required for permanent & temporary signs (including banners, etc). Initial to acknowledge:

Outdoor storage may not permitted; dumpsters shall be within enclosures. Initial to acknowledge:

I UNDERSTAND THE ISSUANCE OF THIS REGISTRATION IS CONDITIONAL UPON COMPLIANCE WITH ALL VILLAGE CODES AND ORDINANCES, STATE AND FEDERAL LAW, AND THE RESULTS OF ANY INSPECTIONS REQUIRED BY ORDINANCE AT THIS TIME AND ANY FURTHER INSPECTIONS WHILE THIS LICENSE IS IN FORCE. I HAVE READ THIS APPLICATION AND ANSWERED ALL QUESTIONS FULLY. THE INFORMATION I HAVE SUBMITTED IN THIS APPLICATION IS COMPLETE AND TRUTHFUL TO THE BEST OF MY KNOWLEDGE.

*SIGNATURE OF APPLICANT**DATE*

FEE SUMMARY		STAFF APPROVALS	
ANNUAL BUSINESS LICENSE:	\$ _____	_____	ZONING APPROVAL
PARTIAL YEAR BUSINESS LICENSE:	\$ _____	_____	COMPLETED APPLICATION
OCCUPANCY INSPECTION:	\$ _____	_____	BUILDING DEPARTMENT APPROVAL
VENDING TOTAL:	\$ _____	_____	FIRE DEPARTMENT APPROVAL
		_____	HEALTH DEPARTMENT APPROVAL
TOTAL LICENSE FEE:	\$ _____		