



Village of Round Lake

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BUSINESS ZONING COMPLIANCE

CHANGE OF LOCATION

NEW BUSINESS

STATE-LICENSED BUSINESS

BUSINESS INFORMATION

BUSINESS NAME (DBA): _____

PROPOSED ADDRESS: _____

PHONE: _____

BUSINESS FAX: _____

CURRENT USE: _____

PROPOSED USE: _____

UNIT SQUARE FOOTAGE: _____

NUMBER OF EMPLOYEES: _____

OUTDOOR SEATING AREA: YES NO

BUSINESS OWNER INFORMATION

OWNER NAME: _____

ADDRESS: _____

PHONE: _____

FAX: _____

EMAIL ADDRESS: _____

DESCRIPTION OF BUSINESS/SERVICES (BE SPECIFIC, USE ADDITIONAL PAGE WHERE NEEDED)

PARKING DESCRIPTION

WILL TRUCKS/EQUIPMENT BE PARKED ON SITE? _____

NUMBER OF DEDICATED PARKING SPACES ON SITE FOR YOUR SPACE? _____

NUMBER OF PARKING SPACES SHARED WITH OTHER BUSINESSES? _____

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

FOR OFFICE USE

ZONING SUMMARY

Permitted Use

Not a Permitted Use

Special Use Required Special Use Received _____ / _____ / _____

Zoning Classification: _____

Signature of Zoning Administrator