

Derrick N. Burgess  
Mayor



Marva Campbell-Pruitt  
Village Clerk

21801 Torrence Avenue, Sauk Village, IL 60411

Phone: 708-758-3330

www.SaukVillage.org

**APPLICATION FOR GENERAL BUSINESS**

**NON-REFUNDABLE PROCESSING FEE \$100.00 DUE AT TIME OF APPLICATION & APPLICABLE TO LICENSE FEE.**

*(NOTE: Application will expire 90 days from date of application; one 30-day extension granted upon written request of applicant)*

**TO VILLAGE OF SAUK VILAGE: THE UNDERSIGNED HEREBY MAKES APPLICATION TO ESTABLISH OR CONDUCT A GENERAL BUSINESS WITHIN THE VILLAGE OF SAUK VILLAGE.**

*Office use only:* Name of Business: \_\_\_\_\_  
License # \_\_\_\_\_ Date Applied \_\_\_\_\_ Date Issued \_\_\_\_\_

**Applicant Name** \_\_\_\_\_ **Title** \_\_\_\_\_ **Phone** \_\_\_\_\_ **Mobile** \_\_\_\_\_

**Type of business:** Sole Owner \_\_\_ Partnership \_\_\_ LLC \_\_\_ Corporation \_\_\_ Non-Profit \_\_\_ other \_\_\_

*Select the general type of business that best describes your operations (See page 9 for descriptions if you're unsure)*

Industrial  Retail Business  Hotel  Fuel/Service Station  Scavenger **Are you open to the public:**  Yes  No

**Legal Business Name / Doing Business As** \_\_\_\_\_

**Business Location:** \_\_\_\_\_

**Location Phone #** \_\_\_\_\_ **Fax #** \_\_\_\_\_

**Store Manager** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Corporation:** Yes \_\_\_ No \_\_\_ **President** \_\_\_\_\_

*Corporation: Attach copy of Articles of Incorporation & FEIN Federal Employer Identification # Certificate*

**Business Website & Email Address** \_\_\_\_\_

**FEIN # - Federal Employer Identification Number:** \_\_\_\_\_ **TOTAL EMPLOYEES #** \_\_\_\_\_

**Illinois Sales Tax #:** \_\_\_\_\_ (attach copy of sales tax certificate)

*Illinois Sales Tax Certificate must be submitted within 30 days of license issuance.*

**Illinois License Type Required** \_\_\_\_\_ **Number** \_\_\_\_\_

*Attach copies of licenses: DCFS, Food Sanitation, Cosmetology, Consumer Installment Loan, Dealer, Trucking, Recycler, 501(c) 3, & any other government required licenses.*

**Has State license ever been suspended or revoked?** Yes \_\_\_ No \_\_\_ **State reason and date** \_\_\_\_\_

**Describe business activity in detail** \_\_\_\_\_

**# of SIGNS:** Driveway(s) \_\_\_ Electric Sign \_\_\_ Non-Electric Sign \_\_\_ Awning \_\_\_ Marquee \_\_\_ Banner \_\_\_ Other \_\_\_

**NOTE: PROOF OF SCAVENGER SERVICE / REFUSE PICK UP REQUIRED BEFORE LICNESE CAN BE ISSUED**

**HOMEWOOD DISPOSAL** \_\_\_\_\_ **REPUBLIC** \_\_\_\_\_ **PROOF IS REQUIRED**

**Number of Vending Machines:** \_\_\_ Soda \_\_\_ Snack \_\_\_ Toy \_\_\_ Game \_\_\_ Video Gaming \_\_\_ Other

**Vending Machine Owner, Address, Phone** \_\_\_\_\_

# VILLAGE OF SAUK VILLAGE

## BUSINESS LICENSE PROCESS

Dear Applicant,

Sauk Village has adopted a new Business License Application process. This new Business License Application process now requires a multi-level review process to ensure compliance to Sauk Village codes while providing full transparency to applicants. To obtain a Business License, your business will undergo a series of inspections and reviews and must attain sign-off from specific Department. A listing of the Village Departments and a description of their responsibilities in the approval process is listed for your convenience:

**Community Development**—will follow your application process until the Village’s responsibilities are completed. If any infractions are noted, this department will inform you and it will be your responsibility to have them corrected before Your Business license can be issued. The Community Development Department issues the Occupancy Permit following receipt of the Fire Inspection Please note: Health Inspections will not delay the issuance of a license if there has been a change in ownership or a change in tenants.

Businesses that sell food and/or beverages - A semiannual (twice per year) health inspection is required. The inspections will be ordered automatically by the Community Development Department. The then current inspection rate will be billed along with your license fees.

*Business Licenses Renewal- inspections will be performed automatically, there is no need to contact us. You will be sent a renewal package at least within 30 days of your Business license’s expiration date.*

**Zoning Administrator** – Will review application ensure business complies with the Village’s zoning.

**Economic Development** – Will review license/application ensure complies with the Village’s overall Economic Development Plan and objectives.

**Police Department** - Will conduct a background check, and due diligence as necessary.

**Fire Department** - this department will perform a fire inspection of your premises. It will look for clear exit ways, exit signs, smoke and carbon monoxide detectors, emergency lights, fire extinguishers and fire alarm systems. If you’re prepared for your fire inspection you may call the number listed below to schedule your inspection. \$100 for initial and annual inspections any re-inspections will be \$20 each.

**Water Department**— (INITIAL APPLICATIONS) —If you will be responsible for the water usage, you will need to set up an account with Water Department. If the water usage will be paid by the landlord and an account is already set-up, the account will have to be paid to date for approval by the water department. Regardless, two water account forms are attached to your business license application; both forms must be completed and turned in with your application.

**SCAVENGER SERVICE**—*Proof of service is required for the business location.* You may call a licensed waste hauler (numbers provided below) and have them fax the Clerk’s office proof of service. Or, you may bring a copy of your scavenger service agreement or paid invoice to the Clerk’s Office. **FOR RENEWALS**— A copy of your most current invoice is adequate.

**Village Clerk’s Office**—The Village Clerk’s Office will issue your business license once all inspections have been passed, all license fees paid, and all required documentation has been submitted. In the meantime, ***YOU CANNOT OPERATE YOUR BUSINESS WITHOUT A BUSINESS LICENSE***. Please feel free to contact the Village Clerk’s Office with any questions during your process. Thank you and well wishes and prosperity to you on your new business venture.

Very truly yours,

***Derrick Burgess, Mayor***

Police Department:	708-758-1331
Water Billing:	708-758-3330
Community Development:	708-758-3330
Fire Department:	708-758-2225
Village Clerk’s Office:	708-753-5121 Village Clerk Fax: 708-758-1634
Homewood Disposal:	708-798-1004 (Licensed Commercial/Industrial Waste Hauler)
Republic Services	708-754-5460 (Licensed Residential/Commercial Waste Hauler)

BUSINESS NAME \_\_\_\_\_

**ADDITIONAL BUSINESS OWNER(S):**

Name & Address \_\_\_\_\_ Phone # \_\_\_\_\_ Cell # \_\_\_\_\_

Name & Address \_\_\_\_\_ Phone # \_\_\_\_\_ Cell # \_\_\_\_\_

**EMERGENCY CONTACTS**

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

HOURS OF OPERATION: (OPEN: \_\_\_\_\_ ) (CLOSE: \_\_\_\_\_ ) # of SHIFTS: \_\_\_\_\_

ALARM COMPANY NAME: \_\_\_\_\_

ALARM COMPANY PHONE NUMBER: \_\_\_\_\_

**BUILDING SPECIFICS:**

Total Square Feet	_____
Total Dock Doors, including rail	_____

**Total number of pumps dispensing:**

# of Diesel Pumps	_____
# of Reg. Unleaded Fuel Pumps	_____
# of Mid-Grade Fuel Pumps	_____
# of Premium Fuel Pumps	_____
#E-85 Fuel Pumps or Flex Fuel	_____

**OFFICE USE ONLY**

APPROVED BY ZONING \_\_\_\_\_ DATE \_\_\_\_\_

APPROVED BY ECON DEV: \_\_\_\_\_ DATE \_\_\_\_\_

APPROVED BY POLICE: \_\_\_\_\_ FAVORABLE \_\_\_\_\_ UNFAVORABLE \_\_\_\_\_ DATE \_\_\_\_\_

APPROVED BY COMM DEV: \_\_\_\_\_ DATE \_\_\_\_\_

HEALTH INSPECTION: Required-  Yes  No

1st Inspection: PASS \_\_\_\_\_ FAIL \_\_\_\_\_ DATE \_\_\_\_\_

2nd Inspection: PASS \_\_\_\_\_ FAIL \_\_\_\_\_ DATE \_\_\_\_\_

APPROVED BY FIRE SAFETY \_\_\_\_\_ DATE \_\_\_\_\_

1st Inspection: PASS \_\_\_\_\_ FAIL \_\_\_\_\_ DATE \_\_\_\_\_

2nd Inspection: PASS \_\_\_\_\_ FAIL \_\_\_\_\_ DATE \_\_\_\_\_

APPROVED BY WATER \_\_\_\_\_ DATE \_\_\_\_\_

APPROVED BY VILLAGE CLERK \_\_\_\_\_ DATE \_\_\_\_\_

LICENSE # \_\_\_\_\_ DATE PAID \_\_\_\_\_ AMOUNT PAID \_\_\_\_\_ DATE ISSUED \_\_\_\_\_

DATE LICENSE MAILED OR RELEASED \_\_\_\_\_ LICENSE RELEASED TO \_\_\_\_\_

**APPLICATION FOR GENERAL BUSINESS:**

**BUSINESS NAME** \_\_\_\_\_

**BUILDING OWNER/LANDLORD INFORMATION**

**Building Owner Name (PRINT)** \_\_\_\_\_ **Home Address** \_\_\_\_\_  
(INDIVIDUAL)

**Building Owner Name (COMPANY)** \_\_\_\_\_ **Company Address** \_\_\_\_\_

**Building Owner Business Address** \_\_\_\_\_

**Building Owner Home Phone** \_\_\_\_\_ **Business Phone** \_\_\_\_\_

**Building Property Tax ID Number** \_\_\_\_\_

**Primary Contact Person: Name** \_\_\_\_\_ **Address** \_\_\_\_\_

**Phone #** \_\_\_\_\_ **Cell Phone #** \_\_\_\_\_ **Fax #** \_\_\_\_\_ **E-mail** \_\_\_\_\_

**CORRESPONDENCE TO BUILDING OWNER SHOULD BE MAILED TO:**

\_\_\_\_\_  
**Building Insurance Company / Agent** \_\_\_\_\_ **Phone** \_\_\_\_\_

**BUSINESS OWNER: AFFIRMATION AND CONSENT**

*I AGREE TO ABIDE BY ALL THE RULES, REGULATIONS AND ORDINANCES OF THE VILLAGE OF SAUK VILLAGE. I AFFIRM THAT ALL STATEMENTS MADE ARE TRUE. HAVING APPLIED FOR A BUSINESS LICENSE WITH THE VILLAGE OF SAUK VILLAGE (VILLAGE), I DO HEREBY GRANT THE VILLAGE DEPARTMENTS AND AGENTS THEREOF, PERMISSION TO PERFORM ANY/ALL CRIMINAL AND NON-CRIMINAL BACKGROUND CHECKS ON ME. I DO HEREBY KNOWINGLY GIVE MY CONSENT TO THE AUTHORITIES TO RUN MY DRIVERS LICENSE RECORD AS WELL AS AN AUTOMATED COMPUTERIZED RECORDS CHECK AND/OR FINGERPRINT VERIFICATION RECORDS CHECK IF REQUESTED, TO DETERMINE ANY PRIOR CRIMINAL HISTORY I MAY OR MAY NOT HAVE PURSUANT TO MY APPLICATION WITH THE VILLAGE. I UNDERSTAND THAT THE INFORMATION OBTAINED WILL ONLY BE UTILIZED FOR THE PURPOSE OF LICENSING AND WILL NOT BE SHARED WITH OR RELEASED PURSUANT TO ILLINOIS LAW. FAILURE TO DISCLOSE MAY RESULT IN A NEW APPLICATION FEE.*

**Business Owner Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Business Owner's Name PRINTED:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_ **Place of Birth:** \_\_\_\_\_

**Driver's License #** \_\_\_\_\_ **State Issued:** \_\_\_\_\_

**ITIN #** \_\_\_\_\_

Attach readable copies of *valid* identification.

**HAVE YOU EVER BEEN ARRESTED, CHARGED, OR CONVICTED OF ANY CRIMINAL OFFENSE?**

**YES** \_\_\_\_ **NO** \_\_\_\_ . ***IF YES, STATE WHEN, WHERE AND THE CHARGE. USE OTHER SIDE OF THIS APPLICATION IF MORE SPACE IS NEEDED FOR DETAILS.***

\_\_\_\_\_  
\_\_\_\_\_

**BUSINESS OWNERS CONTACT INFORMATION**

**Business Owner Home Address** \_\_\_\_\_ **ST** \_\_\_\_\_ **ZIP** \_\_\_\_\_

**Business Owner Home Phone** \_\_\_\_\_ **Business Phone** \_\_\_\_\_

**Business Owner E-mail & Website** \_\_\_\_\_ **Cell Phone** \_\_\_\_\_