



Franco A. Coladipietro
Village President

Jane E. Michelotti
Village Clerk

BUSINESS LICENSE APPLICATION VILLAGE OF BLOOMINGDALE

201 S. Bloomingdale Road, Bloomingdale, IL 60108
(630) 671-5660

THIS FORM MUST BE FILLED OUT COMPLETELY AND RETURNED FOR PROCESSING.

Type of Business: _____ Gross Sq. Footage: _____

Business Name: _____ Business Phone: _____

Business Address: _____ Shopping Center: _____

Corporate Name (if applicable): _____

Corporate Address: _____
(Street Address) (City, State, Zip) (Phone #)

Renewal Notice/Business License should be sent directly to Corporate Office YES _____ NO _____

Illinois Business Tax Number (IBT #) (8-digits): _____ - _____

Owners Name: _____ Home Ph: _____ D.O.B. _____

Owners Home Address: _____

Mgr. Name: _____ Home Ph: _____ D.O.B. _____

Mgr. Home Address: _____

Over-the-Counter Tobacco Sales: _____ Jukebox Machines: _____ Vending Trucks: _____

Other Vending Machines: _____
(Number and Type/Product)

Amusement Games: _____
(Number and Game Type)

Vending/Amusement Device Lessor: _____
(Company Name, Street Address, City, State, Zip)

NOTE: Coin operated devices & machines require a license before being displayed or used. The Business Owner is responsible for obtaining a license before using or displaying the machine. Not to do so is a violation and subject to fine.

The applicant does hereby agree to operate the aforesaid place of business in accordance with regulations and ordinances of the Village of Bloomingdale, DuPage County, IL, now in force, and any others that may be enacted during the duration of this license.

The petitioner is ready and willing and does hereby agree to operate the aforesaid place of business in accordance with the Police regulations and ordinances of the Village of Bloomingdale, DuPage County, Illinois, now in force, and any others that may be enacted during the duration of this license.

Owner's Signature _____ Date _____

This Business License application for _____

located at _____ has been reviewed and

is hereby APPROVED for issue. The location is zoned appropriately for the use as applied for.

Director of Village Services

Date

This Business License application for _____

located at _____ has been reviewed and is

hereby DENIED due to the following:

Property not zoned for use.

Building not up to code.

Other

Director of Village Services

Date

**BLOOMINGDALE POLICE DEPARTMENT
BUSINESS EMERGENCY AFTER HOURS INFORMATION**

Date: _____

BUSINESS NAME: _____

BUSINESS ADDRESS: _____

BUSINESS TELEPHONE: _____

OWNER'S NAME: _____

OWNER'S ADDRESS: _____

OWNER'S TELEPHONE: _____

*In case of an emergency or when we respond to an alarm at the business, the following people will be contacted as listed by your preference. If there is no answer at the first number, the next listed keyholder will be contacted in order until the list has been exhausted. These people should have a **KEY** to the premises, be authorized to sign criminal complaints on behalf of the owner, and be able to respond to the location in a reasonable amount of time.*

<u>NAME</u>	<u>TOWN OF RESIDENCE</u>	<u>PHONE NUMBER</u>
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1. _____

2. _____

3. _____

4. _____

5. _____

DO YOU HAVE AN ALARM INSTALLED ON THE PREMISES? YES ___ NO ___

IS THE ALARM: SILENT ___ OUTSIDE RINGER ___

TYPE OF ALARM: BURGLARY ___ HOLD UP ___ FIRE ___

NAME AND PHONE NUMBER OF ALARM CO: _____

BUSINESS HOURS: _____

SIGNATURE OF OWNER/MANAGER: _____

The Bloomingtondale Police Department requests your assistance in maintaining up-to-date business and keyholder information. We ask that you notify us of any change in the above listed information.

THANK YOU FOR YOUR COOPERATION.

CHIEF FRANK GIAMMARESE AND THE BLOOMINGDALE POLICE DEPARTMENT



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03/15/01

Dear Vending Machine / Amusement Game Provider:

Please complete the information detailing the number, type and location of *all* vending and/or amusement games which you provide to businesses located in the Village of Bloomingdale. This form **MUST** be returned with your completed Business License Application/Renewal Invoice. Copy this form to list additional machines and devices.

<u>NUMBER</u>	<u>TYPE (PRODUCT) VENDING MACHINE</u>	<u>LOCATION</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

<u>NUMBER</u>	<u>AMUSEMENT DEVICE</u>	<u>LOCATION</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Vending/Amusement Company Name