

Village of Bellwood
3200 Washington Blvd
Tel: 708-547-3500 X1504
Fax: 708-547-0464
Email: ctrice@vil.bellwood.il.us



NEW
 RENEWAL

APPLICATION DEADLINE APRIL 30TH

Name of Business: _____

Type of Business: _____ Bus Tax ID: _____

Business Category: _____ Commercial _____ Home _____ Online _____ Vending _____ Delivery _____ Non-Profit

Address of Business: _____ Bus. Phone: _____

Mailing Address of Business: _____

Business Owner's Full Name: _____ Contact Name: _____
(If Different)

Home/Corporate Address: _____ City _____ Zip _____

Same as Business Address Same as Mailing Address

Email Address: _____ Fax: _____

Please describe the nature of the operations in detail: _____

Will any flammable/hazardous materials be used or stored? Yes _____ No _____
If yes, please explain: _____

Number of Full Time Employees: _____ Number of Part Time Employees: _____ Number of Delivery Vehicles: _____

Days and Hours of Operation: _____



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Select all boxes that apply:

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> Automotive Supply/Repair | <input type="checkbox"/> Currency Exchange | <input type="checkbox"/> Laundromat | <input type="checkbox"/> Print shop |
| <input type="checkbox"/> Bakery | <input type="checkbox"/> Electronics/Cell phones Bakery | <input type="checkbox"/> Lawyer Office | <input type="checkbox"/> Real Estate |
| <input type="checkbox"/> Bank | <input type="checkbox"/> Florist | <input type="checkbox"/> Liquor Distributor | <input type="checkbox"/> Resale Shop |
| <input type="checkbox"/> Barber Shop | <input type="checkbox"/> Food Vendors | <input type="checkbox"/> Manufacturer | <input type="checkbox"/> Restaurant |
| <input type="checkbox"/> Beauty Shop | <input type="checkbox"/> Funeral Home | <input type="checkbox"/> Medical Office | <input type="checkbox"/> Scavenger Service |
| <input type="checkbox"/> Beauty Supply Store | <input type="checkbox"/> Gas Station | <input type="checkbox"/> Music Store | <input type="checkbox"/> Towing Service |
| <input type="checkbox"/> Candy | <input type="checkbox"/> General Merchandise Store | <input type="checkbox"/> Music Studio | <input type="checkbox"/> Used/ New Car Lot |
| <input type="checkbox"/> Car Wash | <input type="checkbox"/> General Office | <input type="checkbox"/> Nail Shop | <input type="checkbox"/> Vending Machines |
| <input type="checkbox"/> Cigarettes/Tobacco Shop | <input type="checkbox"/> Grocery Store | <input type="checkbox"/> New Car Lot | <input type="checkbox"/> Video Shop |
| <input type="checkbox"/> Cleaners | <input type="checkbox"/> Hardware Store | <input type="checkbox"/> Pharmacy/Medical Supplies | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Clothing Store | <input type="checkbox"/> Landscapers | <input type="checkbox"/> Pre-School | |

Signature of Owner/Manager _____ Date: _____

Fees:

FEE TYPE	Number	FEE\$	AMOUNT DUE
Application Fee & Processing	1	\$ 40.00	40.00
Square Footage less than 10,000 SQFT		\$ 125.00	
Square Footage over 10,000 SQFT		\$ 300.00	
Manufacturing/Warehouse (Please verify Rates)		Various	
Tobacco Over the Counter		\$ 200.00	
Electronic Coin Operated Games - Each		\$ 450.00	
Food Vending Service 1st Truck		\$ 350.00	
Food Vending Service each additional		\$ 150.00	
Gas Station		\$ 175.00	
Gas Nozzle - Each		\$ 45.00	
Laundromat		\$ 125.00	
Washer/Dryer Coin Operated Each		\$ 75.00	
Vending Machines - Each		\$ 75.00	
Cook County health Inspections (2 Required if Applicable)	2	\$ 100.00	
Delivery Truck		\$ 100.00	
Video Gaming Machines - Each		\$ 1,000.00	
Late fee			
Other			
Total Amount Due			

FOR OFFICE USE ONLY

Finance Approval: _____ Date: _____