



CITY OF WEST CHICAGO  
 DEPARTMENT OF COMMUNITY DEVELOPMENT  
**BUSINESS REGISTRATION APPLICATION**

DATE PAID  
  
 FOR OFFICIAL USE ONLY

**Type of Application**

- New Business Registration**  
\$50.00 (for new businesses or expansions; occupancy permit required)
- Annual Registration Renewal**  
\$25.00 (for existing businesses; postmarked before 12/31 of registration year; \$100 if past due)
- Business Registration Transfer**  
\$50.00 (for existing businesses with change in ownership; occupancy permit required)
- Fee Exempt**  
\$0.00 (for business relocations; gov. agency, not-for-profit, religious, or charitable organization)

**Business Entity Information**

**Type of Business**    Sole Proprietor    Partnership (LP, LLP)    Corp. (LLC, S)    Gov./Non-Profit

**Legal Name of Business**

The exact "legal name" as it appears in the official business formation documentation.

\_\_\_\_\_

**"Doing Business As" Name**

(If applicable)

\_\_\_\_\_

**Business Activity and Location**

**Business Activity**

List your business activities, including all products and/or services offered.

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

If selling goods, what type of sales?  
 Do you offer products/services in:

- Retail (consumers Only)    Wholesale (Business to Business)    Both
- English    Spanish    Both   Other: \_\_\_\_\_

**Primary Contact Person**

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Title \_\_\_\_\_

**Contact Phone #**

Phone # \_\_\_\_\_ Fax# \_\_\_\_\_

**Contact E-mail Address**

Email notifications regarding registration renewal and business support will be provided at this address.

Email Address (required) \_\_\_\_\_

**Business website**

Web address \_\_\_\_\_

**Business Site Address**

Provide the full business location address where business transactions and/or activities occur.

Street Number   Street Name   Ave. /St.   Bldg.   Suite/Unit/Floor

(If multiple, add site addresses on next page)

City   State   Zip Code

**Square footage at this site:**

\_\_\_\_\_, \_\_\_\_\_ Number of employees at this site: \_\_\_\_\_

**Please check if you are:**

- Building Owner    Tenant, provide lease renewal date: \_\_\_\_\_

**If an existing business owner:**

Provide year established: \_\_\_\_\_ # Years in operation: \_\_\_\_\_

## Owner and Officer Information

- **Sole Proprietors** are required to provide information about the **Individual** who owns the business.
- **Partnerships & Limited Partnerships** are required to provide information about all the **Partners** of the organization.
- **Limited Liability Companies** are required to provide information about the organization's **Member shareholder(s)** with a major beneficial interest.
- **Corporations** are required to provide information about the organization's **President**.
- **Non-Profit Corporations** are required to provide information about the organization's **President or Executive Director**.

**Title**  
 Sole Proprietor     Partner     President     Managing Member     Executive Director    **Other:**

<b>First Name</b>	<b>Middle Name</b>	<b>Last Name</b>		
<b>Address</b>	<b>Suite/Apt. #</b>	<b>City</b>	<b>State</b>	<b>Zip Code</b>
<b>Phone Number</b>		<b>Email Address</b>		

**Title**  
 Sole Proprietor     Partner     President     Managing Member     Executive Director    **Other:**

<b>First Name</b>	<b>Middle Name</b>	<b>Last Name</b>		
<b>Address</b>	<b>Suite/Apt. #</b>	<b>City</b>	<b>State</b>	<b>Zip Code</b>
<b>Phone Number</b>		<b>Email Address</b>		

## Business Site Addresses (cont'd)

### Second Site Address

(If applicable)

Street Number    Street Name    Ave. /St.    Unit    Floor#

Site Contact

Site Phone Number

### Third Site Address

(If applicable)

Street Number    Street Name    Ave. /St.    Unit    Floor#

Site Contact

Site Phone Number

### TO SUBMIT APPLICATION AND REMIT PAYMENT:

- **Mail:** Please submit the application and remit payment by mail, or in-person, at the address below. Make payment payable to City of West Chicago.
- **Email:** Application forms may also be sent via e-mail attachment to [bregistration@westchicago.org](mailto:bregistration@westchicago.org).

### IMPORTANT INFORMATION:

- Annual Business Registration is required by Municipal Code ([Chaper 9 - Article 3](#)).
- While government agencies, not-for-profit and charitable organizations are not required to pay the fee, we do ask that you submit a completed application.
- Registration Renewal fee is \$100.00, plus applicable fines, if postmarked after end of the calendar year.