



Franco Coladipietro  
Village President

Pamela Hager  
Village Clerk

**BUSINESS LICENSE APPLICATION  
VILLAGE OF BLOOMINGDALE**

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

License# _____ Paid _____
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**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 sent directly to Corporate Office? YES \_\_\_\_\_ NO \_\_\_\_\_

Illinois Business Tax Number (IBT) (8 digits) \_\_\_\_\_ - \_\_\_\_\_ (necessary to obtain license)

Owner Name \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Owners Home Address: \_\_\_\_\_

Mgr. Name: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_

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.

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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 \_\_\_\_\_

Approved by:  
Michael Gricus, Building Commissioner \_\_\_\_\_ Date \_\_\_\_\_