CITY OF WHEATON Illinois

CITY MANAGER'S OFFICE
303 W WESLEY STREET, WHEATON, IL, 60187
630.260.2012 | www.wheaton.il.us

Tobacco License Application

Return To: City Clerk
City of Wheaton
P.O. Box 727
Wheaton, IL 60187-0727

Phone: 630-260-2012
Fax: 630-260-2017

Please choose one: ☐ New Business Application ☐ Renewal Application

Business Legal Name: _____

Doing business as (d/b/a) or corporate name (if different from above): _____

_____

Business Address: _____ ☐ Owned ☐ Leased

Business Phone: _____ Illinois Sales Tax #: _____

Type of Business: _____

Owner Information:

Name (Please Print): _____

Home Address: _____ Home Phone: _____

Email Address: _____

License Mailing Address (if different from business address): _____

_____

Manager Information (If manager is different from owner):

Name: _____ Home Phone: _____

Home Address: _____

Email Address: _____

Is County, State or Federal Registration, License or Other Approval Required? ☐ Yes ☐ No
(If Yes, explain; attach sheet to this form)

Application Date: _____

Signature of Applicant: _____ Title: _____

_____

For Office Use Only:

Date Received: _____ License No.: _____ Date $125 Annual Fee Paid: _____

*Please Note: Your Business May Be Subject to a Business License, Call 630-260-2028 (Finance Dept.)