COUNTRY CLUB HILLS
Est. 1958
The Crossroads of Opportunity

New_____
Renewal_____
License Year_____

Application to Conduct a Home Occupation

Please complete the application and return along with your payment of $100.00 to the Office of the City Clerk/Collector's Office. Please complete the application and type or print clearly.

Name of Applicant: _____ Business Phone: _____

Business Address: _____

Name of Business: _____

Type of Business_____

Email: _____

Illinois Retailer's Occupation Tax (Sale Tax No. Or Social Security Number)

_____

Number of Employees (Inclusive of Owners): _____ Floor Area (ft.): _____

Do you expect package deliveries:_____ Frequency:_____

Individual Owner_____ Partnership_____ Corporation _____ (Please check one)

For a partnership please provide the name and residence address of each. For a corporation please provide the name, official title and residence address of each principal officer.

_____

_____

I understand that I cannot operate a business as designated herein until approval has been granted by the issuance of a home occupation permit/license. I further agree to allow authorized inspection as prescribed by Law or Ordinance. I also understand that all of the information supplied on this application may be subject to the Freedom of Information Act.

Signature/Title _____ Date _____

Please attach the following:

- State of Illinois Business License
- Certificate of Insurance
- Illinois Business Report (Certificate in good standing)
- Photo copy of the business owner's I.D.