CITY OF PLANO
General Business License Application

Date_____ **Business Type** _____

This application is for: a new license an annual renewal (please circle one)

Annual Fee: $20.00

1. General Information

Business Name _____

Business Address _____

Business Telephone _____

Corporation Name _____

Corporation Address _____

Sales Tax Number _____

Persons to be notified in case of emergency

Name _____ **(please circle one) Owner Manager Employee**

Telephone _____

Email Address _____

Name _____ **(please circle one) Owner Manager Employee**

Telephone _____

Email Address _____

Number of vending machines on premises _____ (list individually on separate sheet)

May we include your company's name, address, and phone number on a list of City of Plano Licensed Businesses that may be distributed to the Public? Yes No

THE FOLLOWING INFORMATION SHALL REMAIN CONFIDENTIAL AND SHALL BE MADE AVAILABLE ONLY TO THE POLICE DEPARTMENT.

2. Police Department Information

Burglar Alarm **Yes** **No** **(please circle one)**

If Yes, circle type: **Auto dial telephone alarm**

Direct Line to Police (Ken Com)

Perimeter Sounding Alarm

Direct Line to Private Security Company

Hold-up Alarm **Yes** **No** **(please circle one)**

If Yes, circle type: **Auto dial telephone alarm**

Direct Line to Police (Ken Com)

Perimeter Sounding Alarm

Direct Line to Private Security Company

Night watchman / private security **Yes** **No**

Security guard dog **Yes** **No**

Hours and days someone would normally be in the building

_____

_____

_____

Windows on	**North**	**South**	**East**	**West**
Doors on	**North**	**South**	**East**	**West**
Roof Entry Point	**Yes**	**No**		

PLANO POLICE DEPARTMENT

111 E. Main St Plano, IL 60545

Phone: 630-552-3122 Fax: 630-552-3197

BUSINESS DIRECTORY INFORMATION SHEET

NAME OF BUSINESS
ADDRESS, CITY, & PHONE:

LOCAL & MAIN BRANCH if APPLICABLE:

MANAGER NAME & ADDRESS:

OWNER ADDRESS & PHONE NUMBER:

BUSINESS HOURS:

IS BUSINESS ALARMED?:
EXPLAIN:

KEY HOLDERS NAME & PHONE NUMBERS:

All of the above information will be confidential. Our knowledge of the above information will aid us in giving you the best police protection possible

THE FOLLOWING INFORMATION SHALL REMAIN CONFIDENTIAL AND SHALL BE MADE AVAILABLE ONLY TO THE LITTLE ROCK FOX FIRE PROTECTION DISTRICT.

3. Fire Department Information

Fire Alarm	**Yes**	**No**	**(please circle one)**
Smoke Detection	**Yes**	**No**	
Sprinkler System	**Yes**	**No**	

Other Fire Suppression System _____

Are hazardous materials on the premises? **Yes** **No**
If yes, please submit a list of those materials.

THE FOLLOWING INFORMATION WILL BE APPROVED AND ISSUED BY THE CITY OF PLANO BUILDING, PLANNING, AND ZONING DEPARTMENT.

4. Building, Planning, and Zoning

Are you planning on signage for your business? Yes No (please circle one)
If yes, please fill out the appropriate application, pay required fees, and get approval from the Building, Planning, and Zoning Department.

Are you planning on doing any type of remodeling or additional building? Yes No
If yes, please fill out the appropriate applications, pay required fees, and get approval from the Building, Planning, and Zoning Department.

YOU MUST RECEIVE AN OCCUPANCY PERMIT FROM THE BUILDING, PLANNING, AND ZONING DEPARTMENT BEFORE YOU OPEN YOUR BUSINESS IF BUILD OUT OR REMODELING HAS TAKEN PLACE.

Business is in _____Zoning District.

Business is is not a permitted use in that district.

By_____ Date: _____