



CITY OF SPRINGFIELD
OFFICE OF THE CITY CLERK
CHUCK REDPATH

For City of Springfield Use Only
Treasurer's Stamp

License Application

Applicant Name: _____ Business Name: _____
Address: _____
Mailing Address: _____
Phone Number: _____ Email Address: _____
Manager Name: _____ Manager Phone: _____

Select Type of License(s) Applied For

****Please submit proof of Insurance and/or Bond along with License Application**

- | | | | |
|--|------------------------|--|------------------|
| ☐ Auctioneer | \$100 (LA) | ☐ Housemovers ** | \$50 (PHM) |
| ☐ Bowling Alley | \$100 (LBA) | ☐ Mobile Home Court | \$100 (LMHC) |
| Number of Alleys _____ | \$25 per Alley | Number of Spaces _____ | \$3 per Space |
| ☐ Coin Operator | \$50 per Device (LDCO) | ☐ Sign ** | (LSC) |
| ___ Less than 2 Devices | \$100 | ___ Class A | \$150 |
| ___ More than 2 Devices | \$250 | ___ Class B | \$125 |
| | | ___ Class C | \$100 |
| ☐ Convenience Store Without Gas | \$100 (CSNF) | ☐ Shooting Gallery | \$55 (LMCC) |
| ☐ Dry Cleaners | \$50 (LCE) | ☐ Skating Rink | \$50 (LMCC) |
| ☐ Florist | \$25 (LF) | ☐ Movie Theater | \$200 (TTE) |
| ☐ Funeral Home | \$50 (LFD) | Number of Screens _____ | \$100 per Screen |
| ☐ Gaming Table Operator | \$75 (LMCC) | ☐ Tobacco Dealer | \$25 (LCD) |
| Number of Tables _____ | \$10 per Table | Number of Devices _____ | \$25 per Device |

Applicant Signature: _____ Date: _____

For City of Springfield Use Only:

Approved: _____ Denied: _____ Date: _____

Inspector or Approving Authority: _____

Return Application To: 300 South Seventh Street
Room 106, Municipal Center West
Springfield, IL 62701

www.springfield.il.us
cityclerk@cwlp.com
Phone: (217)789-2216 Fax: (217)789-2144