APPLICATION for a BUSINESS REGULATORY LICENSE

VILLAGE OF EAST ALTON, ILLINOIS

119 W. Main St.• East Alton, Illinois 62024
Telephone: (618) 259-1185
E-mail: zoning@villageofeastaltonil.gov
Website: www.villageofeastaltonil.com

Landlord License

PRINT OR TYPE ONLY

BUSINESS LICENSEE INFORMATION: ***Please attach a copy of Driver's License, information to be used by Police Department only***

Last Name: _____ First Name: _____ Middle Name: _____

Company name, if applicable: _____ Telephone: _____

Address: _____ city _____ state _____ zip _____

E-mail Address: _____ Cell Phone: _____

Date of Birth: _____

(LOCAL CONTACT) INFO: ***Please attach a copy of Driver's License, information to be used by Police Department only***
(Necessary only if Licensee lives outside Madison County)

Last Name: _____ First Name: _____ Middle Name: _____

Company name, if applicable: _____ Telephone: _____

Address: _____ city _____ state _____ zip _____

E-mail Address: _____ Cell Phone: _____

Date of Birth: _____

All indebtedness to the Village must be paid in full before any Regulatory License Is issued.
Landlord must register ALL rental properties with the Department of Building and Zoning.
Failure to register all properties may result in a suspension of Business License.

AFFIDAVIT

I _____, d/b/a _____,
have completed and submitted an application for a Business License in the Village of East Alton, Illinois, with the knowledge that the rental units must be inspected and approved for occupancy. The business license may be revoked if occupancy inspections are not completed and approved.

Signature:_____ _____
Owner Date

For office use only:

_____ _____

BUSINESS LICENSE (LANDLORD)
PROPERTY REGISTRATION

Name:		Business License #
Address:		
City:	State:	Zip Code:
Phone:	Email:	

PROPERTY INFORMATION (MAYBE CONTINUED ON ADDITONAL PAPER)

Property Address:	
PPN#:	# of Dwelling Units:
Titled Name of Parcel (Name on Deed):	
List All Beneficial Owners of Property:	
Property Address:	
PPN#:	# of Dwelling Units:
Titled Name of Parcel (Name on Deed):	
List All Beneficial Owners of Property:	
Property Address:	
PPN#:	# of Dwelling Units:
Titled Name of Parcel (Name on Deed):	
List All Beneficial Owners of Property:	
Property Address:	
PPN#:	# of Dwelling Units:
Titled Name of Parcel (Name on Deed):	
List All Beneficial Owners of Property:	

SIGNATURE

Signature:	Date:

BUSINESS LICENSE (LANDLORD)
PROPERTY REGISTRATION

Use this space to continue Property Owned by License holder in the Village of East Alton	
Property Address:	
PPN#:	# of Dwelling Units:
Titled Name of Parcel (Name on Deed):	
List All Beneficial Owners of Property:	
Property Address:	
PPN#:	# of Dwelling Units:
Titled Name of Parcel (Name on Deed):	
List All Beneficial Owners of Property:	
Property Address:	
PPN#:	# of Dwelling Units:
Titled Name of Parcel (Name on Deed):	
List All Beneficial Owners of Property:	
Property Address:	
PPN#:	# of Dwelling Units:
Titled Name of Parcel (Name on Deed):	
List All Beneficial Owners of Property:	
Property Address:	
PPN#:	# of Dwelling Units:
Titled Name of Parcel (Name on Deed):	
List All Beneficial Owners of Property:	
Property Address:	
PPN#:	# of Dwelling Units:
Titled Name of Parcel (Name on Deed):	
List All Beneficial Owners of Property:	