

Bus ID: _____

Date Paid: _____

Method: _____ By: _____

Village of Hoffman Estates HOME BUSINESS License Application - \$25 per year fee
1900 HASSELL ROAD HOFFMAN ESTATES IL 60169 Village Clerk Phone: 847-781-2625

New

Address Change

Do You Own or Rent This Property?

Own

Rent

Business Information:

Business Name _____

H.E. Business Address _____ Suite # _____ Zip _____

Business Phone _____ Business Fax _____

Business Email _____ Business Website _____

Expected Start Date _____ TAX ID # _____

(Required if your business charges sales tax)

Description of Business _____

Owner Information:

Individual Owner or *Corporation Name _____

Address *only if different* _____

*Local Contact _____ Local Contact Phone _____

Please Read Carefully & Initial:

_____ **I have read and understand** Section 8-11-4 "Home Occupations" of the HE Municipal Code.

Please Note: All companies doing business in the State of Illinois must conform to the laws and regulations pertaining to the State of Illinois. I understand the issuance of this License is conditioned upon compliance with all Village Ordinances and the results of any inspection of above premises at this time or any subsequent time or any subsequent inspection while this license is in force. **Return** with payment by mail or in person - **Attention: Village Clerk's Office.** Checks should be made out to the Village of Hoffman Estates.

Applicant Signature

Today's Date