

BUSINESS LICENSE RENEWAL APPLICATION

**CITY OF BURBANK
6530 WEST 79TH STREET
BURBANK, ILLINOIS 60459
708-599-5500
708-599-8088 (FAX)**

**PLEASE NOTE: ANY MISREPRESENTATION OR FALSIFICATION OF THE INFORMATION SOUGHT BELOW
MAY RESULT IN REVOCATION OF THE LICENSE AS GRANTED AND FINES MAY BE APPLICABLE. FOR
INFORMATION OR QUESTIONS, PLEASE CALL 708-599-5500.**

DATE: _____

NAME OF BUSINESS: _____

D.B.A. (SAME _____): _____

PHYSICAL ADDRESS: _____

MAILING ADDRESS (SAME _____): _____

CITY, STATE, ZIP CODE: _____

BUSINESS PH. #: _____

BUSINESS E-MAIL: _____

II. SALES TX. I.D. (ATTACH COPY)

RESALE#: _____

FED. EMP. I.D. # _____

OWNER (S) INFORMATION:

NAME: _____

ADDRESS: _____

CITY, STATE, ZIP CODE: _____

PHONE: _____ E-MAIL: _____

NAME: _____

ADDRESS: _____

CITY, STATE, ZIP CODE: _____

PHONE: _____ E-MAIL: _____

HAS APPLICANT (S) EVER BEEN CONVICTED OF A FELONY? Y _____ N _____

IF YES, LIST OFFENSE _____

JURISTICTION _____

DATE OF OFFENSE _____

DATE OF CONVICTION _____

HAVE ANY CHANGES BEEN MADE TO THE BUSINESS OR OPERATION OF BUSINESS SINCE LAST RENEWAL? Y _____ N _____. IF YES, PLEASE DOCUMENT BELOW.

I / WE UNDERSTAND THAT THE ISSUANCE OF THIS LICENSE IS CONDITIONAL UPON COMPLIANCE WITH ALL CITY ORDINANCES, STATE AND FEDERAL LAW, AND THE RESULT OF ANY INSPECTIONS REQUIRED BY ORDINANCE AT THIS TIME AND ANY FURTHER INSPECTIONS WHILE IN FORCE. I / WE HAVE READ THIS RENEWAL FORM AND ANSWERED ALL QUESTIONS FULLY AND THE INFORMATION I / WE HAVE SUBMITTED IN THIS RENEWAL IS COMPLETE AND TRUTHFUL TO THE BEST OF MY KNOWLEDGE. OWNER(S) AND / OR MANAGER(S) MUST SIGN TO VERIFY ALL INFORMATION. ANY FALSIFICATION OF THE INFORMATION SOUGHT ABOVE MAY RESULT IN THE REVOCATION OF THE CERTIFICATE AS GRANTED. TO ASSURE COMPLIANCE WITH THE CITY OF BURBANK'S HEALTH ORDINANCES (CHAPTER 7) AND THE STICKNEY TOWNSHIP ENVIRONMENTAL HEALTH DEPARTMENT RULES AND REGULATIONS, ANY BUSINESS DISTRIBUTING, SELLING OR PREPARING FOOD PRODUCTS MUST HAVE THE APPROVAL OF THE HEALTH DEPARTMENT BEFORE A BUSINESS REGULATORY CERTIFICATE IS ISSUED.

THE UNDERSIGNED, BEING THE APPLICANT HEREUNDER AND BEING THE OWNER OR THE MANAGER OF THE AFOREMENTIONED BUSINESS, HEREBY GIVES THE PERMISSION OF THE CITY OF BURBANK, ITS OFFICERS, AGENTS AND EMPLOYEES TO ENTER UPON THE LICENSED PREMISES AT ANY TIME FOR THE PURPOSE OF MAKING INSPECTION OF THE LICENSED PREMISES. BUSINESS REGULATORY CERTIFICATES ARE NON-TRANSFERABLE. IF A BUSINESS IS SOLD, A NEW APPLICATION MUST BE FILLED OUT AND INSPECTIONS CONDUCTED IN THE SAME MANNER AS FOR A NEW BUSINESS. A BUSINESS REGULATORY CERTIFICATE WILL NOT BE ISSUED UNTIL ALL APPROVED INSPECTION FORMS ARE RECEIVED BY THE CITY CLERK'S OFFICE. AT THAT TIME, YOU WILL BE NOTIFIED TO COME IN AND PAY THE PROPER FEES. BUSINESS REGULATORY FEES MUST BE PAID BEFORE YOU CAN OPEN FOR BUSINESS AND BEFORE YOUR BUSINESS REGULATORY CERTIFICATE IS ISSUED.

SIGNATURE (MANDATORY)

DATE

SIGNATURE (MANDATORY)

DATE