

VILLAGE OF NEW BADEN

1 EAST HANOVER ST
NEW BADEN IL 62265
(618) 588-3813 FAX: (618) 588-7105
www.NewBadenIL.com

Business Registration Application & Certification

Pursuant to Ordinance #737, "Requiring Business Licenses," I hereby file this written registration with the Office of the Village Clerk of the Village of New Baden and submit the \$25.00 fee. Application is renewable annually by May 1 and expires on April 30th of the next year following its issue.

Name of Business: _____

Business Address: _____

Business Phone Number: _____ Business Fax: _____

Website: _____ E-mail: _____

Nature of Business: _____

Type of Business: _____ Business Hours: _____
(Ex.: Sole Proprietor, Partnership, Corporation or Organization)

IBT (Illinois Business Tax) #: _____ FEIN: _____
(Federal Employee Identification Number)

Business Owner: _____ Phone: _____

Owner Address: _____

Name of Manager: _____

Manager Address: _____ Phone: _____

Emergency Contact Name: _____ Phone: _____

If you rent/lease the property in which this business is located:
Landlord Name & Address: _____

Has the applicant ever had a license in this municipality? [] YES [] NO If so, when: _____

Has a license to this applicant ever been revoked? [] YES [] NO If "yes", explain: _____

Has the applicant ever been convicted of a violation of any of the provisions of this code, etc.? [] YES [] NO
If "yes", explain: _____

Has the applicant ever been convicted of the commission of a felony? [] YES [] NO
If "yes", explain: _____

Applicant's Signature

Date

OFFICE USE ONLY

Registration Number: _____

Expiration Date: _____