Lisle

THE ARBORETUM VILLAGE

Mayor
Joseph J. Broda

Trustees
Mark Boyle
Catheryn Cawiezel
Lee LaFond
Ken Modaff
Joe Schmitt
Ed Young

Village Clerk
Timothy J. Seeden

Business Office/General
630-271-4100
630-271-4104 Fax
630-271-4142 TDD

Community Development
630-271-4150

Economic Development
630-271-4148

Police Administration
630-271-4200

Public Works
Administration/Engineering
630-271-4170
Operations
630-271-4180

Dear Applicant:

Businesses located within the Village of Lisle must register on an annual basis. **The attached Business Registration application must be submitted immediately upon passing final inspections and obtaining a certificate of occupancy. Applications will not be accepted prior to passing final inspections.** If a certificate of occupancy is not required, the attached application and payment must be submitted prior to moving into the premises. If some of the information requested on the form will not be known until after the premises have been occupied, please call (630)271-4100 to request additional time to submit the application and payment.

The following are exempt from this registration requirement; governmental, educational, religious, and political organizations. **However, these organizations are highly encouraged to submit the registration form with at least emergency contact and alarm information filled out. Regardless, all security alarms are required to be registered with the police department. Submitting the enclosed registration form satisfies this requirement. The fee is waived for exempt organizations.**

If your business also requires a business license, the business registration fee is waived, but the registration form must be completed and submitted.

Please submit the completed registration form and fee to the Village of Lisle Business Office, 925 Burlington Avenue, Lisle, IL 60532. Once your registration application has been processed, a certificate will be mailed which must be displayed on the registered premises. Those paying online at www.villageoflisle.org should email the completed application to businessofficedept@villageoflisle.org or fax it to (630)271-4104. **The Village will not accept the application and payment prior to passing final inspections by the Community Development Department.**

Please call (630)271-4100 with any questions.

Sincerely,

Kristine Curran

Kristine Curran
Business Office Manager
Deputy Village Clerk

cc: Gerald Sprecher, Village Manager
Joseph J. Broda, Mayor
James Kosatka, Chief of Police

Village of Lisle
Business Office
925 Burlington Avenue
Lisle, Illinois 60532
(630) 271-4100
Mon-Fri 7 a.m. to 5 p.m.
E-mail: businessofficedept@villageoflisle.org

Lisle
THE ARBORETUM VILLAGE

Office Use: Reg. No. _____
Distribution:
☐ Community Development
☐ Finance / Water Billing
☐ Police Department
☐ Other _____

ANNUAL BUSINESS REGISTRATION APPLICATION

(See Page 3 for Exemptions)

1. Please check one: ☐ New Business ☐ New Owner of Existing Business ☐ Renewal

2. Type of Ownership: ☐ Corporation ☐ LLC, LLP ☐ Sole Proprietor ☐ Other

3. Name of Corporation, LLC, LLP, Sole Proprietor, etc.:_____

Local Business Name (if different than above) _____

Lisle Address (**NO PO BOX**)_____
(Please include suite numbers)

Mailing Address (if different than above)_____

_____

Local Business Phone: _____

Illinois Tax No.
or FEIN: _____
(**Note:** Sole proprietors who use their social security number as their tax number, please leave blank)

4. Name, title, phone number and email address of contact person located onsite during business hours:

_____
Name Title / Position Phone

Email address:_____

5. After hours emergency contacts (key holders – list in calling order):

Name:_____ Phone Number:_____

Address: _____

Name:_____ Phone Number:_____

Address:_____

Name:_____ Phone Number:_____

Address:_____

6. Do you have a Knox Box (authorized by Lisle Woodridge Fire Protection District)? ☐ Yes ☐ No

7. Security Systems Information: ☐ N/A – no security system or tenant in secured building

Burglary:_____
Name of Alarm Company Phone Number

_____
Address

8. Approximate Number of Employees: Full-time_____ Part-time _____

9. Days & Hours of Operation:

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday

10. If premises are not owned, please provide landlord or management company information:

Name:_____ Address:_____

Phone: _____ _____

11. Are flammable liquids or hazardous chemicals used, sold or stored in the operation of this business?
☐ Yes ☐ No

If yes, please provide the following (attach additional pages if necessary):

Type(s) of hazardous chemicals:_____

Number, capacity, and location of storage tanks:_____

_____

_____

12. Description of Business – Check type of business & provide product, service, or other brief description:

☐ Retail / Wholesale_____
☐ Office / Research _____
☐ Service _____
☐ Manufacturing / Distribution / Warehousing_____
☐ Dining Establishment_____
☐ Other_____

13. Are there food, beverage, or tobacco vending machines, coin-op games or musical devices onsite?

☐ Yes – If yes, attach listing of machine(s) by type, and provide name(s) of distributer / supplier.

☐ No

14. For new businesses and new owners of existing businesses only:

Expected move-in date: _____

Has appropriate building /remodeling permit been applied for? ☐ Yes ☐ Not yet
☐ N/A – moving into existing building without remodeling

Has occupancy permit been applied for? ☐ Yes ☐ Not yet

If changing/adding signage, has permit been applied for? ☐ Yes ☐ Not yet ☐ N/A – no new signage

Registration Certificates are for a 12 month period beginning July 1 and ending June 30. Renewal applications will be mailed on or about April 30th of each year. The following are exempt from registering: educational, governmental, religious, or political organizations or institutions. **However, these organizations are highly encouraged to register (fee is waived), and must as a minimum provide security alarm information.**

PLEASE NOTE: The fee is waived for all not-for-profits and charitable organizations. The fee is also waived for businesses that have paid for a current business, liquor, or tobacco license. Please call 630-271-4100 with questions.

FEES

New Certificate of Registration:	$40 ($20 if new business begins operation after December 31)
Renewal Registration:	$25 if submitted on or prior to June 15
	$30 if submitted after June 15 but prior to July 1
	$40 if submitted on or after July 1 (also subject to a penalty of no less than $40)
	Note: When mailing, postmark date is submitted date.

The information provided in this registration application is true and correct to the best of my knowledge and belief. I understand that if there are any changes in the information provided on this application, it is my responsibility to notify the Village of the correct information as soon as possible. I acknowledge that the issuance of this certificate is conditional upon compliance with Village ordinances and the results of any and all inspections. **The requirement of this certificate of registration is in addition to any business licensing requirements required per Village ordinance or through the State of Illinois.**

I understand that if I open for business prior to receiving my registration certificate I will be subject to monetary penalties. I also may not open for business without obtaining any required business licenses or certificates of occupancy.

_____ _____

Signature of Owner, Officer, or Agent Title

_____ _____

Printed Name Date

Office Use Only:

Zoning Classification: _____

Rec'd By: _____ Date: _____ Zoning Approval: _____