



ONE VILLAGE CIRCLE, WILLOW SPRINGS, IL. 60480

708-467-3700 | FAX 708-467-3710

CONTACT@WILLOWSPRINGS-IL.GOV

Application for Home Base Business Registration

No signs allowed (in residential zoned areas)



New Application



Renewal

The undersigned hereby makes application for the issuance of a business registration for the period beginning _____ and ending _____

Business Name:_____	Phone:_____
Address:_____	
City, State, Zip:_____,IL_____	
Type of Business _____	
Business Owner Name:_____	Phone:_____
Address:_____	
City, State, Zip:_____,IL_____	
Email Address:_____	

Emergency contact :	
Name: _____	Phone: _____
Address: _____	
City, State, Zip _____	

Is the owner of the business also the owner of the building? _____

If not please provide a current lease _____

Name and Title (Please Print)

Signature and Date
