

Co-Applicant's Signature
$\overline{\text { Applicant's Signature }}$

> | Home Phone \# |
| :--- |
| Date of Birth |
| Social Security \# |

Applicant:

## Zoning District


Co-Applicant:
Retailer's Occupation Tax Number (if applicable)

#  

Business:

Staunton, IL 62088
City of Staunton
304 W. Main

## Tity of Staunton

BUSINESS LICENSE APPLICATION
LICENSE FEE - $\$ 25.00$
BACKGROUND CHECK FEE - $\$ 50.00$
License shall commence


|  |  | әuочд |  | ${ }^{\text {ououd }}$ sseulsng |
| :---: | :---: | :---: | :---: | :---: |
| diz 'әexs 'fu! |  | ə\|pp!W | \|S.! | 'amen ise] |

Owner of Property:
4.) If you rented or leased the property, please complete the following information.


1.) Have you previously operated any business?
Previous Business Information Required for New Business License Applicants only.

