

## **Temporary Business License Application**

(A Temporary Business License shall not exceed 30 consecutive calendar days per year at any location.)

Business Information		Dhama	
Business Name:		Phone:	
Federal Employment Identification Numb	oer (FEIN):		
State of Illinois Taxpayer I.D. Number:		<del></del>	
Business to Be Conducted from:	to		
Temporary Location:		, Gurnee, IL	
Mailing Address:	City:	State:Zip:	
Did You Obtain a Temporary Use/Event Per	mit from Community Development	? Yes 🗌 No 🗌	
Description of Business:			
Ownership: Corporation LLP	☐ LLC ☐ Sole Proprietor ☐	Government  Non-Profit	
Billing Party Information			
Owner Name:			
Owner Mailing Address:			
Manager Name:			
anager Phone: Email:			
Emergency Contact Name:			
Emergency Phone:	Email:		
The foregoing information is correct to the best of my in violation of any zoning ordinance and additional strictly in accordance with the laws and ordinances could be responsibility of the licensee to renew all necessar	licenses or endorsements are required. I agovering such businesses, and that no other t	gree to conduct the described business type of business shall be conducted. It is	
By signing below, I agree that all sales tax generat Department of Revenue as point-of-sale in Gurnee.	ed from temporary business within Villag	e limits will be reported to the Illinois	
Business Owner Name:		Date:	
Business Owner Signature:		Phone:	

## **IMPORTANT INFORMATION**

The fee for a temporary business license is \$50.00. Make checks payable to: **The Village of Gurnee**.

Non-profit organizations do not have to pay the \$50.00 license fee.

Before a license is issued, a temporary permit may be required from the Community Development Department. Please contact this department at 847-599-7550 for further information.