



**HOME-BASED BUSINESS
LICENSE APPLICATION**

Application Date: _____
Business Legal Name: _____
Doing Business As: _____
Physical Business Address: _____

Business Phone Number: _____
Business Email Address: _____
Business Website Address: _____

OWNERSHIP TYPE AND CONTACT INFORMATION:

- If Partnership, list information for all Managing Partners (use another sheet of paper if needed)
- If Sole Proprietorship, list information for the sole owner/operator.
- If Corporation, list information for the President and Chief Financial Officer.

Owner's Name: _____
Owner's Position within the Business: _____
Owner's Home Address: _____

Owner's [Cell or Home] Phone Number: _____
Owner's Email Address: _____

Type of Business: _____ _____	Federal Tax Identification Number (EIN): _____ List of Items or Commodities to Be Sold or Ordered: _____ _____
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Please list an emergency contact who can be notified by the Police or Fire Department in case of an emergency:

Name: _____ Relationship to You: _____ [Cell or Home] Phone Number: _____

I confirm that I have read [Section 16.18.020 – Accessory buildings, structures, and uses](#) – of the Village of Carpentersville Code and my home-based business meets the requirements listed under A.6.

Business Owner's Signature: _____

Please send completed form to licenses@cville.org ; Processing usually takes 1 – 2 weeks.