

VILLAGE OF HEBRON



P.O. BOX 372
HEBRON, ILLINOIS 60034
PHONE (815) 648-2353
FAX (815) 648-4385

BUSINESS REGISTRATION FORM

(Please print -return to Village Clerk when completed)

1.	Name of Business
2.	Business Location Address:
3.	Business Mailing Address:
4.	Owner(s) of Business:
5.	Owner(s) Mailing Address:
6.	Primary Contact Person and Title in Case of Emergency:
7.	Telephone Number(s):
8.	Secondary Number(s):
9.	Email:
10.	Secondary Contact Person and Title in Case of Emergency
11.	Telephone Number(s)
12.	Type of Business:
13.	Description/General Volume of any Flammable or Hazardous Materials Stored on Premises:
14.	Days and Hours of Operation:
15.	Number of Employees (maximum number on a shift or at any single time:
16.	Name and Telephone Number of Individual Completing this form:
15.	Date Form is Completed:
16.	\$30 Fee Paid: