

**APPLICATION FOR BUSINESS LICENSE
CITY OF MORRIS, ILLINOIS**

Date _____

The undersigned hereby makes application for a local business license under the Ordinances of the City of Morris and makes the following statements of facts and representations in support of such application. This application is made on behalf of _____ and the place of business to be located at: _____

(Name of Business)

Morris, IL 60450

1. Applicants Name _____ Date of Birth _____

| | | | |
|--|-------|----------------|------|
| | First | Middle Initial | Last |
|--|-------|----------------|------|

Applicant Address _____
Social Security Number _____ Corporate FEIN# (If applicable) _____
Driver's License Number _____ Telephone Number _____
2. Names of other partner(s) if applicable.

3. Are you an illegal or unauthorized alien? Yes No
If you are a legal/authorized alien, can you Yes No N/A
submit documentation as to your
immigration status?
4. The character of my business is _____
5. Length of time applicant has been engaged in this business is _____
6. The amount of goods, wares and merchandise of the business on hand at date of application is \$ _____
7. Applicant (has/has not) made application for a similar license on other premises. Is so, give disposition of other application _____
8. Have you been convicted of a felony within the last ten years? Yes No
9. I certify that I have reviewed the licensing requirements and am Yes No
not disqualified from receiving a license for any reason.
10. Has a previous license issued by the State of Illinois or by the Yes No
Federal Government ever been revoked?
If yes, give reason _____
11. Do you state you will not violate any of the laws of the State of Illinois, the United States and of the Ordinances of the City of Morris, Illinois, in the conduct of your business? Yes No
12. Is the business to be conducted by a manager or agent? Yes No
If yes, please supply name and address _____
13. Do you own the premises wherein the business will be operated Yes No
under the license applied for here?
If no, attach a copy of the lease and answer the following:
Name and address of landlord _____
Expiration date of lease _____
14. Subject to all criteria in Ordinance #3623 of the Morris Municipal Code.

Fee tendered herewith: **\$25.00**

Signature of Applicant _____