



City of Highland Park

City of Highland Park
Office of Business Development
1707 St Johns Avenue
Highland Park, Illinois 60035

Phone 847.926.1027 Fax 847.432.7625

Business Registration Form

Please complete **ALL** sections of this form and return it to the address above with a \$35 check made payable to the City of Highland Park for the annual registration fee. After July 1, the fee is prorated to \$17.50. **(Fees are waived for Non-Profit Organizations).**

PLEASE PRINT

Business Name: _____ D/B/A: _____

Business Address (include suite#): _____ Highland Park, IL 60035

Ground Floor Above/Below Ground Floor Other: _____ Business Location Phone: _____

Business E-Mail: _____ Website: _____

Mailing Address (if different): _____

Mailing Phone: _____ Illinois Business Tax Identification Code: _____

Description of Business: _____

Does this business offer massage services? Yes No Does this business sell products containing CBD oil? Yes No

Number of Employees (including independent contractors) Full-Time: _____ Part-Time: _____

Days and Hours of Operation: _____

Type (check one): Corporation LLC PC Individual Partnership Non-Profit Other: _____

Owner: _____ Phone & Email: _____

On-Site Manager: _____ Phone & Email: _____

Emergency Contacts for Police, Fire, or Other:

1. Contact: _____ email: _____ Cell: _____

2. Contact: _____ email: _____ Cell: _____

Alarm Systems (check one): Yes No Type(s) check all that apply: Fire Theft

Property Owner or Management Co.: _____ Phone: _____

Lease Expiration Date: _____ Square Footage: _____ Expected Date of Opening: _____

Please include business information on/in: City's Website: Yes No

Bi-Weekly Newsletter Announcement: Yes No

Highlander Announcement: Yes No

Please Read and Sign Below. I certify that the above information is correct:

Print Name: _____ Position/Title: _____

Signature: _____ Date: _____