

# Business Registration

## VILLAGE OF SOUTH JACKSONVILLE

301 Dewey Drive  
South Jacksonville, IL 62650  
Web Site: [www.southjacksonville.org](http://www.southjacksonville.org)



Phone: 217.245.4803  
Fax: 217.245.5641  
Email - [info@southjacksonville.org](mailto:info@southjacksonville.org)

TWO FORMS OF IDENTIFICATION (ONE WITH PHOTO) MUST BE PRESENTED AT TIME OF REGISTRATION FOR BOTH OWNER(S) AND MANAGER

Full Name of Business:

Business Address:

Business City, State, Zip:

Business Telephone(s):

Business Fax:

Business and/or Owner's Email Address:

Type of Business:

List Products or Services your Business Will Provide:

Date Business Begins Operation:

Illinois Business Tax (IBT) ID#:

FEIN OR Owner's Social Security #:

Days and Hours of Operation:

Mon. Hrs. \_\_\_\_\_

Tues. Hrs. \_\_\_\_\_

Wed. Hrs. \_\_\_\_\_

Thur. Hrs. \_\_\_\_\_

Fri. Hrs. \_\_\_\_\_

Sat. Hrs. \_\_\_\_\_

Sun. Hrs. \_\_\_\_\_

### OWNER INFORMATION

Owner's Full Name Including Middle Initial:

Owner's Home Address, City, State, Zip:

Owner's Home/Cell Telephone:

Owner's Date of Birth:

**MANAGER INFORMATION - IF OWNER IS NOT MANAGING THE BUSINESS, PLEASE COMPLETE THIS SECTION PERTAINING TO THE MANAGER, OTHERWISE SKIP TO NEXT SECTION.**

Manager's Full Name Including Middle Initial:

Manager's Home Address, City, State, Zip:

Manager's Home Telephone:

Manager's Date of Birth:

**EMERGENCY CONTACT PERSON AFTER HOURS IF OWNER & MANAGER CANNOT BE REACHED:**

Name:

Phone:

**THIS DOCUMENT IS REQUIRED TO BE ON FILE FOR BUSINESSES WITHIN THE CORPORATE LIMITS OF THE VILLAGE OF SOUTH JACKSONVILLE. THERE IS NO CHARGE FOR BUSINESS REGISTRATION.**