



2026 RENEWAL APPLICATION FOR BUSINESS REGISTRATION

Please complete all of the information requested in the renewal form. If a section does not apply, please mark "N/A." The Village of New Lenox's Ordinance 2436 requires that each business submit a completed renewal with a payment before December 31st. Please submit at your earliest convenience. The payment may be made by check payable to the Village of New Lenox, cash, or by credit card (a service fee is charged). If you prefer to pay by credit card, submit this form first. If deemed complete, an email will be sent to the registration contact with a license number and information on how to pay on the Village's online portal. Incomplete forms will be returned.

RENEWAL FEES:
\$25 - For-Profit Business
\$15 - Home-Based Business (Optional Registration)

Has any information changed from the Previous Application: Yes No Unsure?
If yes, please fill out the changed information. If no, please sign under Representations and Acknowledgements on page 2. If unsure, please call 815-462-6490 to receive the most recent copy of your Business Registration Application.

Local Applicant Information (Must manage in New Lenox; residency is not required)

Business Name:
Name: Title:
Address:
City: State: IL Zip Code: 60451
Phone Number: Cell Business Home
Local Manager's Email:

Registration or Corporate Contact

Name: Title:
Mailing Address:
City: State: Zip Code:
Illinois Business Tax #: Federal ID#: Sales Tax #:
Website URL: Business Email:
of Employees in New Lenox (expected): Full Time: Part Time: Independent Contractors:
Do you: Own the property Lease the property Business Square Footage:

Coin-Operated Amusement Device License

Coin-operated amusement devices are required by Village ordinance to carry a separate license. These devices include any mechanical or electronic amusement device, operated by deposit of a payment, including those capable of reproducing vocal or instrumental sounds, for amusement or skill (including: pinball, claw, arcade, shooting gallery, etc.). Vending machines, musical devices (such as jukeboxes), and pool/billiard tables are excluded from the license. Video gaming terminals require a separate license from the Village Clerk. A fee of \$100 per machine per year applies. Please include this fee with the application. Stickers for each machine will be mailed out with your Business Registration Certificate
How many Coin-Operated Amusement Devices do you have at your place of business?

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Business Descriptions

- **Description of Business:**

Fully describe all business activities that will take place at the business location, including products and/or services to be provided or dispensed. Events inviting the public into the business and their frequency should be disclosed. Please contact the Village for special events as additional permits may be required.

- **My business will: (check all that apply)**

Store/Sell Alcohol (submit liquor license application)

Manufacture/Store/Sell hazardous, flammable, dangerous, or explosive materials.

If so, describe: _____

- **Is the business open past 10 p.m.?:** Yes No

Emergency Contact Information-For Fire/Police/Dispatch (must provide two)

Name #1: _____ Title: _____

After-hours Phone #: _____ Email: _____

Name #2: _____ Title: _____

After-hours Phone #: _____ Email: _____

Gas Stations' Ground Water Monitoring

All gas stations utilizing underground storage tanks ("USTs") are required to annually test the groundwater from the monitoring well on the property of the gas station for indicator contaminants, using industry-standard screening applicable to the material stored in the USTs on the property. Owner or operator shall annually provide to the Village with the Business Registration renewal a written statement from the laboratory conducting the testing of the monitoring well, confirming that the levels of the indicator contaminants do not exceed the actionable limits prescribed in the Illinois EPA Tier 1 groundwater remedial objectives.

Massage Establishments (as primary use)

All massage establishments and massage therapists are required to submit copies of valid state licenses annually. Please attach copies of the licenses. Renewals for massage establishments will not be accepted without the state license copies.

Property Owner Contact Information

Property Owner's Corporate or Individual Name: _____

Property Owner's Name of Individual Contact/Agent: _____

Property Owner's Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Phone #: _____ Email: _____

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Representations and Acknowledgements

- All statements in this application are true, correct, and complete.
- I will notify the Village within 15 days of any changes to the information in this application.
- I will abide by all Ordinances of the Village of New Lenox, as amended from time to time.

Representative's Signature: _____ Printed Name: _____ Date: _____

Business Ownership

**List all owner(s) information below with an interest of 10% or more and add a second sheet if necessary:
Provide the following information regarding how the business was created and is owned:**

Individual Partnership Limited Liability Corporation Private Limited Corporation Corporation

Is the applicant or business own 100% of the applying business? Yes _____ No _____ (f no, complete the following):

Name: _____ Title: _____

Home Address: _____

City: _____ State: _____ Zip Code: _____

Cell #: _____ Email: _____ % of Ownership: _____

Name: _____ Title: _____

Home Address: _____

City: _____ State: _____ Zip Code: _____

Cell #: _____ Email: _____ % of Ownership: _____

Name: _____ Title: _____

Home Address: _____

City: _____ State: _____ Zip Code: _____

Cell #: _____ Email: _____ % of Ownership: _____

Name: _____ Title: _____

Home Address: _____

City: _____ State: _____ Zip Code: _____

Cell #: _____ Email: _____ % of Ownership: _____