Dear Prospective Business Owner,

I would like to welcome you to Mokena's business community, and thank you for considering bringing your business to Mokena.

We would like to make the relocation of your business to Mokena as smooth as possible, so we have assembled this packet of information to assist you. Inside you will find:

- **A Guide to Conducting Business in Mokena**: This booklet outlines the benefits of locating your business in Mokena, how to navigate the Business License Application process, information regarding building permits, and more.

- **Business License & Occupancy Inspection Procedures for New or Relocating Business**: This form is a checklist for obtaining your Business License and Occupancy.
  - General Business License Application
  - Online Business Directory Registration Form
  - Business License & Occupancy Questionnaire
  - Home Occupancy Description Form

All businesses located within the corporate limits are required to obtain a Business License, per Village ordinance. There are many benefits to having a Business License: your business is listed on our website, you have exclusive access to our Discover Mokena program, and your business can be announced at Village Board meetings in our Category Spotlight.

If you have any questions regarding this process, please do not hesitate to contact the Community Development Department at (708) 479-3930. We look forward to working with you, as your business helps enrich Mokena.

Sincerely,

[Signature]

Alan Zordan, AICP
Economic and Community Development Director
Village of Mokena
Business License & Occupancy Inspection
Procedures for New or Relocating Businesses

Thank you for bringing your business to Mokena. Below you will find the procedures for a New Business moving into an existing building, or an Existing Business relocating to another building. Attached, you will find the Business License Applications. Return all paperwork to the Community Development department. Missing information may delay the approval of your application. For more information, or if you have any questions, please contact Community Development at (708) 479-3900.

Initial each item, sign at the bottom, and return with all applications.

1. Verify that the proposed business is a permitted use within the Village.

2. Complete & submit the following:
   - Business License Application
   - Copy of the first page and signature page of your Lease
   - Fee of $36.00

3. Complete and submit all applications for companion licenses with appropriate fees (i.e. Amusement Devices, Food, Gasoline Pumps, Liquor, Tobacco, Massage, etc.) if applicable.

4. Permits are required for any Interior Remodeling (electrical, plumbing, mechanical, and demolition work) prior to any work being started.
   *For information about permit requirements and/or scheduling inspections, please contact Community Development.*

5. Lighting around window/door perimeters (neon “edge” or any other type of lighting) is strictly prohibited. Any forms of edge lighting must be removed prior to scheduling an occupancy inspection.

6. A Business Occupancy Inspection is required for all businesses. A separate check for $75.00 for the Occupancy must be submitted along with the Business License Application.
   - The Occupancy Inspection is scheduled once the Business License Application is reviewed, all Remodeling Permits have been issued, and all other inspections are completed.
   - It is the responsibility of the Business Owner to call & schedule the Occupancy Inspection with the Community Development Department.
   - The Occupancy Certificate will be issued upon approval of all pertinent parties (Fire Department, Health Department, and Village of Mokena)

7. The Business License, and any companion licenses, will be processed and issued when the Occupancy Inspection has been completed and approved by the Building Department, Fire Department, and Health Department (where applicable).

8. Any new, temporary promotional, or replacement signs will need a separate Sign Permit. All Sign Permits must be submitted with appropriate drawings, and approved prior to the placement of any signs.

Applicant Signature: ___________________________________________ Date: _____ / _____ / _____

Applicant Printed Name: ___________________________________________

Village of Mokena • 11004 Carpenter Street • Mokena, IL 60448
Phone (708) 479-3900 • Fax (708) 479-4844
communitydevelopment@mokena.org • www.mokena.org

Revised 2/28/2019
Village of Mokena
General Business License Application

Please fill out both sides of this application completely. Any missing information may delay the approval of your application. For more information, or if you have any questions, please call (708) 479-3900.

| Date of Application: _____/_____/______ | Anticipated Business Opening Date: _____/_____/______ |
| Illinois Retailers Occupational Tax (Sales Tax) Number: ____________ - ____________ |
| Federal Employer Identification Number: ____________________________ |
| Business Status: ____ New Business  ____ Change of Ownership  ____ New Location |

### License Fees

*All paperwork and fees listed below are due at the time of application.*

- Business License Application (good for one calendar year, Jan – Dec) .................. $ 36.00
- Occupancy Fee .................................................................................. $ 75.00

**Total Due at Time of Application** .. $111.00

### Business Information (Required)

Company Name (ex. Venture Industries): ________________________________________

Business/Store Name as it appears on your signs/literature/etc. (ex. Irish Lassie’s Imported Gifts)

______________________________________________________________________________

Business/Store Address (please include street directional (N,E,S,W) and type (St, Rd, Ln, etc):

______________________________________________________________________________ Unit (if applicable) ____________

Business Phone (___ ___) ___ ___ - ___ ___ ___ Emergency Phone (___ ___) ___ ___ - ___ ___ ___

Business/Store E-Mail address: ____________________________________________________

Local Contact Person: ____________________________________________________________

_____ Please check if Mailing Address is different than above, and provide information below.

Name: __________________________________________________________ Unit (if applicable) ____________

Address: __________________________________________________________ Unit (if applicable) ____________

City: __________________________ State: __________ Zip Code: __________

Business Phone (___ ___) ___ ___ - ___ ___ ___ Emergency Phone (___ ___) ___ ___ - ___ ___ ___

Please provide a short yet detailed description of what your business provides.

______________________________________________________________________________
### Ownership Information (Required)

**If more than one owner/partner, please list all above information on a separate sheet and attach.**

Owners Name: ____________________________________________
Home Address: ____________________________________________ Unit (if applicable) __________
City: __________________________________ State: __________ Zip Code: __________
Home Phone (______) _______ - _______ Cell Phone (______) _______ - _______

### Emergency Contact Information

In the event of an after-hours emergency, please provide local emergency contact info (other than owner).

Name: __________________________________ Phone (______) _______ - _______
Name: __________________________________ Phone (______) _______ - _______
Name: __________________________________ Phone (______) _______ - _______

Type of Ownership: ___ Individual ___ Partnership ___ Corporation ___ LLC

Is this a Home Business? ___ Yes ___ No

Nature of Business (Please check all that apply)

_____ Retail _____ Manufacturing _____ Warehouse/Storage

_____ Office/Professional _____ Services _____ Public/Non-Profit

Hours of Operation: _______________________ Number of Employees: _______________________

Square Footage of Business: _______________________ Number of Vehicles Used: _______________________

Will this Business manufacture, store, or sell any type of hazardous material(s)? ___ Yes ___ No

List types: __________________________________________

Is there outdoor storage of materials? ___ Yes* ___ No

*If yes, please contact the Community Development Department, as a Special Use Permit may be required.

### Property Ownership Information

Are the premises leased? ___ Yes* ___ No

*Please submit a copy of the Lease Agreement with this Application for approval.

Property Owners Name: ________________________________
Owner’s Address: ____________________________________________ Unit (if applicable) _______
City: __________________________________ State: __________ Zip Code: __________
Owner’s Phone (______) _______ - _______ Emergency Phone (______) _______ - _______

Continued on next page
Other Licenses/Forms
Other licenses or forms may be required for your business. Please mark all that apply, and attach to this Application.

- Food License  - Tobacco License  - Liquor License  - Gasoline License
- Amusement License  - Massage License
- Home Occupation Description Form  - Online Business Directory Form

List any Federal, State, and/or Will County agencies that regulate your business:

____________________________________________________________________

*A copy of any required licenses or certificates must be provided prior to Village Occupancy Approval. Failure to maintain Licenses/Certificates from other regulatory agencies may result in the revocation of your Mokena Business License.

PLEASE NOTE: It is the responsibility of the Business Owner to call & schedule the Occupancy Inspection with the Community Development Department.

Certification of Applicant

"I hereby certify that all information provided by me in this application are true and correct to the best of my knowledge, information, and belief."

Business Owner’s Signature: ____________________________ Date: _____ / _____ / _____

Business Owner’s Printed Name: ________________________________________________

For Office Use Only

Zoning District: ____________________ Lot # ____________ Subdivision: __________________________

Comments: _________________________________________________________________

___________________________________________________________________________

Business License approved by: ____________________________ Date: _____ / _____ / _____

Occupancy approved by: ____________________________ Date: _____ / _____ / _____

[ ] AS400 [ ] Access [ ] Website
Village of Mokena
Online Business Directory
Registration Form

If you are interested in having your business listed in our Online Business Directory at www.mokena.org, please fill out the following information completely. Our Business Directory is a central place that residents and potential customers can find your business’s contact information.

Company Name as it appears on your Business License Application (ex. Venture Industries):

__________________________________________________________

Business/Store Name as it appears on your signs/literature/etc. (ex. Irish Lassie’s Imported Gifts)

__________________________________________________________

Business/Store Address (please include street directional (N,E,S,W) and type (St, Rd, Ln, etc):

__________________________________________________________

Unit Number (if applicable) _____________________________

Do you operate your business out of your home? YES NO

*Please note, if YES, your address will not be published for security purposes.

Business/Store Phone Number: (_______)_________________________

Business/Store E-Mail address: ________________________________

Business/Store Website: _______________________________________

Contact Person: _____________________________________________

Please provide a short description of what your business provides

________________________________________________________________

________________________________________________________________

________________________________________________________________

________________________________________________________________

Continued on back page
Please check all boxes that apply to your business/store:

<table>
<thead>
<tr>
<th>Advertising, Marketing, Promotions, &amp; Signs</th>
<th>Home Improvement &amp; Gardening/Landscape Insurance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Arts, Culture, Entertainment, &amp; Music</td>
<td>Legal Services</td>
</tr>
<tr>
<td>Automotive Services, Transportation, &amp; Towing</td>
<td>Lodging &amp; Travel</td>
</tr>
<tr>
<td>Building &amp; Construction Services</td>
<td>Manufacturing/Production, Wholesale, &amp; Distribution</td>
</tr>
<tr>
<td>Business Services</td>
<td>Moving &amp; Storage</td>
</tr>
<tr>
<td>Child Care</td>
<td>Parties/Special Events</td>
</tr>
<tr>
<td>Civic &amp; Community Organizations</td>
<td>Pets &amp; Veterinary Services</td>
</tr>
<tr>
<td>Cleaners/Laundromats</td>
<td>Photography</td>
</tr>
<tr>
<td>Commercial/Industrial, Equipment, &amp; Maintenance</td>
<td>Printing, Office Equipment, &amp; Office Supplies</td>
</tr>
<tr>
<td>Computers, Electronics, Telecommunications, &amp; Security</td>
<td>Real Estate &amp; Property Management</td>
</tr>
<tr>
<td>Education</td>
<td>Restaurants, Catering, &amp; Food</td>
</tr>
<tr>
<td>Financial Services</td>
<td>Retail Shopping, Furniture, &amp; Specialty Stores</td>
</tr>
<tr>
<td>Gas/Fuel, &amp; Convenience Stores</td>
<td>Salons, Spas, Tanning, &amp; Barbershops</td>
</tr>
<tr>
<td>Grocery, Liquor/Wine, &amp; Tobacco</td>
<td>Sports, Recreation, &amp; Exercise</td>
</tr>
<tr>
<td>Health Care &amp; Wellness</td>
<td></td>
</tr>
</tbody>
</table>

Printed Name: ________________________________

Signature: _________________________________ Date: ___________________________
Thank you for bringing your business to Mokena. We appreciate you taking the time to fill out this questionnaire, so that we may improve the service we provide you. For more information, or if you have any questions, please contact Community Development at (708) 479-3900.

1. Which items below factored into your decision to locate your business in Mokena?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Proximity to major highways</td>
<td>Not a factor</td>
</tr>
<tr>
<td>Available tenant space</td>
<td></td>
</tr>
<tr>
<td>Low Will County taxes</td>
<td></td>
</tr>
<tr>
<td>Commuter rail service</td>
<td></td>
</tr>
<tr>
<td>Skilled work force</td>
<td></td>
</tr>
<tr>
<td>Business-friendly</td>
<td></td>
</tr>
<tr>
<td>Close to your customer base</td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td></td>
</tr>
</tbody>
</table>

2. Do you have any comments or suggestions as to how Village Staff can improve service to you, with regards to the business license application and/or occupancy inspections?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

3. We would like to follow up with you in the future. May Village Staff contact you in one year to learn how your business is growing? If so, how would you like us to contact you? *(Please circle one and provide appropriate contact information)*

   In person   Phone Call   Mail   Email

Name ____________________________________________________________

Address _________________________________________________________ Unit ________

City __________________________ State _______ Zip Code _____________

Phone (___ ___) ___ ___ - ___ ___ ___

E-mail ________________________________________________________
Village of Mokena
Home Occupation
Description Form

Please fill out this form completely. Any missing information may delay the approval of your application. For more information, or if you have any questions, please contact Community Development at (708) 479-3900.

### Business Information (Required)

<table>
<thead>
<tr>
<th>Business Name:</th>
<th></th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Business Address (please include street directional (N, E, S, W) and type (St, Rd, Ln, etc):</th>
<th></th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>City:</th>
<th>State:</th>
<th>Zip Code:</th>
<th></th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Business Phone (___) ___ ___ - ___ ___</th>
<th>Emergency Phone (___) ___ ___ - ___ ___</th>
</tr>
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</table>

### Description of Home Occupation

<table>
<thead>
<tr>
<th>Type of Business:</th>
<th></th>
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<table>
<thead>
<tr>
<th>Percentage of home use for home occupation:</th>
<th></th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Number of deliveries/shipments made from home each day:</th>
<th></th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Number of clients/customers seen per day:</th>
<th></th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Hours of operation of the home occupation:</th>
<th></th>
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</thead>
</table>

<table>
<thead>
<tr>
<th>Describe business-related materials stored outside (if any):</th>
<th></th>
</tr>
</thead>
</table>

### Home Occupation Terms

By signing this form, the Business Owner agrees to the following:

1. That no more than 25% of the total floor area of any one story will be utilized for any home occupation.
2. That there will be no indication from the exterior that the building is being utilized for any purpose other than a dwelling.
3. You will comply with all requirements stated in Title 9-14-5 of the Village of Mokena Zoning Ordinance regarding Home Occupations (attached).

I understand that failure to abide by these regulations will result in the termination of my Business License, and the subsequent operation of the home business.

<table>
<thead>
<tr>
<th>Owner's Signature:</th>
<th>Date:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Owner's Printed Name:</th>
<th></th>
</tr>
</thead>
</table>
HOME OCCUPATIONS

9-14-5 Home Occupations.

In addition to conforming to the general regulations for accessory uses and structures set forth in Section 9-14-1 above, all home occupations shall comply with each of the following requirements:

A. The operator of every home occupation shall reside in the dwelling unit in which the home occupation operates;

B. The home occupation shall be conducted entirely within the principal residential structure and shall be incidental and subordinate to the principal residential use of the structure. Furthermore, no work shall be conducted within any attached or detached garage. Limited storage may be allowed in any attached or detached garage provided, such storage does not create a nuisance or prevents the utilization of the garage for parking motor vehicles.

C. The home occupation shall not interfere with the delivery of utilities or other services to the neighborhood in which the principal residential structure is located;

D. The activity shall not generate any noise, vibrations, smoke, dust, odors, heat, glare, or interfere with radio or television reception in the area that would exceed that normally produced by a dwelling unit used solely for residential purposes;

E. No toxic, explosive, flammable, radioactive, or other hazardous materials shall be used, sold, or stored on the site. However, materials common to ordinary household use are permitted, provided the quantity of such materials does not exceed that found in an ordinary household;

F. Alteration of the residential appearance of the principal residential structure designed to promote or draw attention to the home occupation shall not be permitted. Furthermore, no advertising, signs, displays, or other indications of a home occupation in the yard, on the exterior of the dwelling unit, or visible from anywhere outside of the dwelling unit shall be permitted;

G. No more than one motor vehicle shall be used in connection with a home occupation. The home occupation vehicle must be of a type ordinarily used for conventional private passenger transportation, (i.e., passenger automobile, or vans and pickup trucks not exceeding a payload capacity of one (1) ton). Further, the home occupation vehicle shall not require more than a passenger class driver's license nor be a vehicle designed for carrying more than twelve persons. Vehicles designed or used for living quarters shall not be used in conjunction with a home occupation;

H. No visitors in conjunction with the home occupation (clients, patrons, pupils, sales persons, etc.) shall be permitted between the hours of 9:00 p.m. and 6:00 a.m., and the home occupation shall not cause a significant increase in the amount of traffic or parking on any residential street. Furthermore, deliveries for the home occupation shall not restrict traffic circulation and may only occur between 9:00 a.m. and 5:00 p.m. Monday through Friday;

I. No outdoor display or storage of materials, goods, supplies, or equipment shall be permitted on the premises;

J. In person direct sales or rentals of products are not permitted, however, mail or phone sales shall be considered a permitted home occupation;

K. The total interior floor area used for the home occupation shall not exceed twenty percent of the total interior floor area of the dwelling, provided that in no case shall the area of a home occupation exceed three hundred square feet;

L. No person may be employed on the site in connection with the home occupation who is not an actual resident of the dwelling unit; and

M. More than one home occupation may be permitted within an individual dwelling unit, provided all other standards and criteria applicable to home occupations are complied with. Such criteria shall be applied cumulatively to both uses as opposed to singularly to each use.