Village of Beecher

625 Dixie Highway PO Box 1154 Beecher, Illinois 60401 Phone: 708-946-2261

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President
Marcy Meyer
Clerk
Janett McCawley
Administrator
Charity Mitchell
Treasurer
Donna Rooney

Trustees
Todd Kraus
Benjamin Juzeszyn
Joe Tieri
Roger Stacey
Joseph Gianotti
Erik Gardner

APPLICATION FOR TOBACCO LICENSE

Please Return Completed Application to the Village Clerk
License Fee: \$50.00/Year
License Period November 1 through October 31 of the following year

1.	Name of Establishment:			
2.	Address of Establishment:			
	Business Phone Number:	Fax:		
	Billing Address for License Renewal:			
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3.	Illinois Municipal Retailer's Use and Service Occupation Tax Number:			
4.	Applicant Information: Owner/Proprietor of Establishment: Home Address: Contact Phone Number:			
			Manager of Establishment:	
			Home Address:	
	Contact Phone Number:			
	5.	Owner or Agent for Building:		
		Business Address:		
Contact Phone Number:				
Not	te: If Applicant is a corporation, give full name and ad	dress of registered agent.		
l ce	ertify that I intend to sell tobacco products in compliand	ce with all applicable City, County, State and Federal laws.		
Signature of Applicant		Date		
Print Name		Title		