CONTRACTOR'S BUSINESS LICENSE APPLICATION

Village of Indian Head Park
201 Acacia drive
Indian Head Park, IL. 60525
Telephone (708) 246-3080
Fax (708) 246-7094
www.indianheadpark-il.gov

Date of Application: _____/_____/_____ ***Certificate of Insurance required (please attach)**

(Please print)

Name of Business:	
Address:	Town:
State:	Zip Code:
Telephone:	E-Mail Address:
Signature of Applicant:	
Method of Payment Check _____ Cash_____	

Annual Contractor's Licensing Fee Schedule:

General Contractor: $75.00 *All Other Contractors: $50.00*

For Office Use Only:

Fee$	***Date Paid:***

License Valid:_____/_____/_____ to _____/_____/_____