**Village of Lake Barrington**  
**NEW Business License Application**  
**FY 2019-2020**  

Return your signed form along with payment to the Village of Lake Barrington in the amount of **$100**. See Payment Page for payment options.

<table>
<thead>
<tr>
<th>BUSINESS INFORMATION</th>
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<tbody>
<tr>
<td>Name of Business</td>
</tr>
<tr>
<td>D/b/a</td>
</tr>
<tr>
<td>Address of Business</td>
</tr>
<tr>
<td>Mailing Address</td>
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<tr>
<td>List other locations: (Other locations in the Village are no charge)</td>
</tr>
<tr>
<td>Website Address</td>
</tr>
<tr>
<td>Business Phone Number</td>
</tr>
<tr>
<td>Business Email Address</td>
</tr>
<tr>
<td>Contact Name &amp; Title</td>
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</table>

Type:  
- __ Sole Proprietorship (SP)__,  
- __ Club (C)__,  
- __ Partnership (P)__,  
- __ Corporation (Corp)__,  
- __ LLC (LLC)__,  
- __ Not for Profit (NFP)  

Illinois Sales Tax No. (IBT)

Federal Tax ID Number (FEIN)

Specify any planned changes to premises, i.e. new sign, add office, structural changes:

Have you contacted the Building Permit Administrator regarding the proposed changes?  
- __Yes__ or  
- __No__  

If no, please contact the Building Permit Administrator at (847) 381-6010, X105.

<table>
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<tr>
<th>Number of employees</th>
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<tr>
<td>Total square footage</td>
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<tr>
<td>Does your business, occupation, or activity: Y N</td>
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<tr>
<td>Sell alcoholic beverages on or off premises?</td>
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<tr>
<td>Offer food services?</td>
</tr>
<tr>
<td>Sell or offer prepared food for consumption on or off premises?</td>
</tr>
<tr>
<td>Offer Amusement Devices?</td>
</tr>
<tr>
<td>Have an alarm system?</td>
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</table>

Other:  
- __ Petition for Exempt Status__  
  - Fiscal year Gross Sales Under $1,000  
  - State Registered Not-For-Profit: Registration Number  
  - Other, please explain  

Does the business own the building?  
- __Yes__  
- __No__  

If no, complete the following:

| Owner Name: |
| Owner Address: |
| Phone No.: |
| Email: |
DESCRIPTION OF GOODS AND SERVICES

Please describe the goods and services which will be provided by your business if it is located within the Village of Lake Barrington.

This description will be reviewed by the Zoning Enforcement Official to determine if it is a permitted use within the applicable zoning district or whether or not you will be required to request zoning relief to establish this business at the location you propose.

The undersigned applicant does hereby state on oath that he or she knows the property and business to be in compliance with all of the ordinances of the Village of Lake Barrington and that he or she will continue to comply with the said ordinances as well as keep the property and business in compliance during the period of any license issued or during any time such business is open for business. It is further understood that the applicant is aware of the various permit regulations, sanitary regulations, sign regulations, lighting regulations, and other such regulations and will comply with these regulations for their property and business. The applicant further understands that they are to make every effort to maintain their business and surrounding property in a clean and litter-free state.

The applicant further agrees that the Primary Business Contact is an agent for the applicant for the purposes of receiving all notices and communications under the Village Licensing requirements. The applicant also agrees and understands that the Village shall not be limited or estopped to serve citations or process upon such persons and in such manner as permitted by law.

The applicant and the applicants’ officers, principals, and agents understand and agree to all applicable provisions of the Village of Lake Barrington Licensing requirements, including the requirement that the applicant shall agree to permit authorized Village officials to make any necessary inspections to determine whether the applicant-licensee has complied with all regulatory requirements.

The applicant further states that the applicant has complied with all applicable federal and state laws and county and local ordinances applying to the business, occupation or activity sought to be licensed.

Failure to complete all aspects of this application including payment for said license and any outstanding fees due to the Village of Lake Barrington will void license request and require that no business be conducted until license approval has been given. Provide additional signature sheets if needed.
Under penalties as provided by law pursuant to Section 1-109 of the Code of Civil Procedure, the undersigned certifies that he or she is the duly-authorized agent of the Applicant and has the authority to execute this Application on behalf of the Applicant, that the business and premises of the Applicant are in compliance with all ordinances of the Village, and that the statements set forth in this Application are true and correct, except as to matters therein stated to be on information and belief and as to such matters, the undersigned certifies as aforesaid that he or she verily believes the same to be true.

Date of this application: ______________________, ________

Signature of Applicant if Sole Proprietorship

PARTNERSHIP:

Signatures of all Partners if a Partnership

Signatures of all Partners if a Partnership

Signatures of all Partners if a Partnership

CORPORATION:

Signature and Title of President or Vice President if Corporation

Signature of Corporate Secretary

LIMITED LIABILITY COMPANY:

Signatures of all Managers if an LLC

Signatures of all Managers if an LLC
Payment of License Fee

Please return this application with your $100.00 check for the license fee to the address below by May 1, 2019. Make checks payable to the Village of Lake Barrington. Payment can also be made online at LakeBarrington.org. (Click “Make a Payment” button on left side of Home page). A 2.25% processing fee will be added to all credit and debit card payments with a minimum fee of $1.00 for each transaction. This fee is charged by the credit card company, not the Village of Lake Barrington.

VILLAGE OF LAKE BARRINGTON
ATTN: Office of the Village Clerk
23860 N. Old Barrington Road, Lake Barrington, Illinois 60010

Mail your completed application to the Village, or you may fax (847-381-8557) or email it to (lakebarrington@lakebarrington.org).

For inquiries, contact Lisa C. Pena-Tlapa, Village Clerk
Phone (847) 381-6010, X100 or Email - lpenatlapa@lakebarrington.org

PAYMENTS RECEIVED AFTER MAY 31ST OF THE LICENSE YEAR WILL INCUR A $100 LATE FEE

*THANK YOU*

VILLAGE OFFICE USE ONLY:

Business License Number: ___________ Issued Date: _____ Paid $_______

PAYMENT: Cash_____ Check No._______ Credit Card_______ ISSUED BY: ___________
HAZARDOUS CHEMICAL STORAGE PERMIT & PLAN

Please return to: Village of Lake Barrington, 23860 Old Barrington Road, Lake Barrington, IL 60010
(Please print or type all information)

Do you have any Hazardous Chemical Substances from the attached list, which weigh more than ten (10) pounds or have a volume of more than five (5) gallons in any one single container on site?

No ___ Please complete Part I of this form and return this page to the Village of Lake Barrington.

Yes ___ Please complete Parts I & II and submit the completed packet with the following:

A. Written employee practice and education procedures that is in place for all employees responsible for implementing this Spill Containment Plan.

B. Process flow program. (Particularly processes which may be subject to Pretreatment Standards)

<table>
<thead>
<tr>
<th>PART I</th>
</tr>
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<tbody>
<tr>
<td>1. Business Name: ________________________________</td>
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<tr>
<td>2. Address: ______________________________________</td>
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<tr>
<td>3. Contact Name: ________________________________</td>
</tr>
<tr>
<td>Title: __________________________________________</td>
</tr>
<tr>
<td>Telephone Number: ____________________________ Fax Number: __________________________</td>
</tr>
<tr>
<td>E-mail: ________________________________</td>
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I hereby certify that the information given is true and accurate:

Completed by: ________________________________

Printed Name: ________________________________

Title: ________________________________ Date: ________________________________

<table>
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<tr>
<th>PART II</th>
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<tbody>
<tr>
<td>4. Describe all Hazardous Chemical Substances which weigh more than ten (10) pounds or have a volume of more than five (5) gallons in any one single container on site.</td>
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</table>

<table>
<thead>
<tr>
<th>Product Name</th>
<th>Storage Location: Inside or Outside</th>
<th>Quantity Volume or Weight</th>
<th>Spill Containment Method (i.e. diking, absorbents, etc.)</th>
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### PART II continued

5. [REQUIRED] Explain how materials are handled, stored and disposed. 
   i.e. closed system, 5-gallon containers, tanks with pumps, picked up by service, etc.

6. [REQUIRED] Potential safety problems or hazards: i.e. fire, health, corrosive, radioactive, etc.

7. Recent/Proposed changes:

8. Description of Pollution Control equipment that may generate a waste stream, pollutants which are likely to be 
   found in the waste stream and the discharge or disposal methods and location:

9. Deficiencies/Recommendations (Compliance with waste water discharge limitations, reporting requirements, 
   self-monitoring requirements, etc.)

10. Sampling Locations:

11. Pretreatment Facilities: (including operating data)

<table>
<thead>
<tr>
<th>12. Certified Operator Employed?</th>
<th>Name _________________________________</th>
<th>Date Certified ________________________</th>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
</tr>
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<tbody>
<tr>
<td>13. Periodic Compliance Report submitted?</td>
<td>Yes</td>
<td>No</td>
<td>N/A</td>
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<tr>
<td>14. Self-monitoring performed and reports submitted to Control Agency?</td>
<td>Yes</td>
<td>No</td>
<td>N/A</td>
<td></td>
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<tr>
<td>15. Management Plan submitted?</td>
<td>Yes</td>
<td>No</td>
<td>N/A</td>
<td></td>
<td></td>
</tr>
<tr>
<td>16. Sampling and Analysis done by: Identity ___________________________</td>
<td>Control Authority ___________________________</td>
<td>Yes</td>
<td>No</td>
<td>N/A</td>
<td></td>
</tr>
<tr>
<td>17. Sampling and Analysis Procedures in conformance with 40 CFR 136.3</td>
<td>Yes</td>
<td>No</td>
<td>N/A</td>
<td></td>
<td></td>
</tr>
<tr>
<td>18. Sampling date, time, exact location, method and name of person taking the sample(s) recorded?</td>
<td>Yes</td>
<td>No</td>
<td>N/A</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
| 19. Analysis date(s), time, individual performing analysis and analytical 
   techniques/methods used/recorded? | Yes | No | N/A |
| 20. Chain of custody procedures employed? | Yes | No | N/A |
| 21. Q.C./Q.A. programs implemented? | Yes | No | N/A |
| 22. Required reports signed by an authorized representative of the business? | Yes | No | N/A |
| 23. Required reports retained for a minimum of three years? | Yes | No | N/A |
Village Ordinance 13-8-9: GROUNDWATER PROTECTION REGULATIONS

CHEMICAL SUBSTANCE CONTROLS

Chemical Substance” means any “Extremely Hazardous Substance” listed in Appendix A of 40 C.F.R. Part 355; Any “Hazardous Substance” listed in 40 C.F.R. Section 302.4; any petroleum product including crude oil or any fraction thereof, and any of the following chemicals, metals and compounds:

1,1,1-TRICHLOROETHANE
1,1,2-TRICHLOROETHANE
1,1-DICHLOROETHYLENE
1,2,4-TRICHLOROBENZENE
1,2-DICHLOROETHANE
1,2-DICHLOROPROPAINE
2,4,5-TP (SILVEX)
2,4-D ALACHLOR (LASSO)
ALDICARB
ALDICARB SULFONE
ALDICARB SULFOXIDE
ALDRIN
ANTI FREEZE
ANTIMONY
ARSENIC
ATRAZINE
BARIUM
BENZENE
BENZO (A) PYRENE
BERYLLIUM
BHC-GAMMA (LINDANE)
CADMIUM
CARBOFURAN
CARBON TETRACHLORIDE
CHLORDANE
CHROMIUM
CIS
1,2-DICHLOROETHYLENE CUTTING OILS
CYANIDE
DALAPON
DI(2-ETHYHEXYL) – ADIPATE
DI(2-ETHYHEXYL) – PHTHALATE
DIBROMOCHLOROPROPAINE (DBCP)
DICHLOROMETHANE
DIELDRINDINOSEB
DIQUAT
ENDOTHALL
ENDRIN
ETHYLBENZENE
ETHYLENE DIBROMIDE
FLUORIDE
HEPTACHLOR
HEPTACHLOR EPOXIDE
HEXACHLOROBENZENE
HEXACHLORO-CYCLOPENTADIENE
LEACHATE
MERCURY
METHOXYCHLOR
MINERAL OIL
MONOCHLOROBENZENE
0-DICHLOROBENZENE
OXAMYL (VYDATE)
P-DICHLOROBENZENE
PENTACHLOROPHENOL
PICLORAM
POLYCHLORINATED BIPHENYLS (PCB)
SELENIUM
SIMAZINE
STYRENE
TETRACHLOROETHYLENE
THALLIUM
TOLUENE
TOXAPHENE
TRANS-1,2-DICHLOROETHYLENE
TRICHLOROETHYLENEXYLENE