Village of Mokena
11004 Carpenter Street
Mokena, Illinois 60448
(708) 479-3900
Fax: (708) 479-4844
Email:
administration@mokena.org
Web Site: www.mokena.org

Village President
Frank A. Fleischer

Village Clerk
Patricia C. Patt

Trustees
Joseph E. Budzyn
Debbie Engler
John J. Mazzorana
George J. Metanias
Jim Richmond
Joseph M. Siwinski

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,

Alan Zordan

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) 479-3930.

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.
- 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: _____

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Revised 3/9/2016

Village of Mokena
General Business License Application

For Office Use Only

Date Received _____
Application Complete Yes No
Fee Required _____
Amount Paid _____
Payment Method _____

License Number _____

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) 479-3930.

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: _____

Address: _____ Unit (if applicable) _____

City: _____ State: _____ Zip Code: _____

Business Phone (__ __ __) __ __ __ - __ __ __ __ Emergency Phone (__ __ __) __ __ __ - __ __ __ __

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

_____

_____

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Revised 7/25/2016

Business/Store Name _____

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

Business/Store Name _____

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 ___ 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.*

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

For Office Use Only	
Date Received	_____
Business License Application Complete	Yes No
Occupancy Approved	Yes No
Date Approved	_____

Please return form to Samantha upon approval. Thank you.

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:

- [ ] Accounting & Tax Preparation
- [ ] Advertising, Marketing, Promotions, & Signs
- [ ] Arts, Culture, Entertainment, & Music
- [ ] Automotive, RVs, & Small Engines
- [ ] Banking & Mortgage Services
- [ ] Child Care
- [ ] Cleaners
- [ ] Commercial-Industrial, Equipment, & Maintenance
- [ ] Community & Civic Organizations
- [ ] Computers, Electronics, Telecommunications, & Security
- [ ] Education
- [ ] Engineering
- [ ] Financial Services & Planning
- [ ] Gas, Fuel, & Convenience Stores
- [ ] Gifts, Parties, Special Events
- [ ] Grocery
- [ ] Health Care, Wellness, & Pharmacy
- [ ] Home & Garden / Landscape
- [ ] Home Improvement
- [ ] Insurance & Investments
- [ ] Janitorial & Maintenance
- [ ] Legal Services
- [ ] Liquor, Wine, & Tobacco
- [ ] Lodging & Travel
- [ ] Manufacturing, Production, Wholesale, & Distribution
- [ ] Moving, Storage, & Warehouse
- [ ] Pets & Veterinary Services
- [ ] Photography
- [ ] Printing, Office Equipment, & Supplies
- [ ] Real Estate & Property Management
- [ ] Restaurants, Catering, Foods, & More
- [ ] Retail Shopping, Furniture, & Specialty Stores
- [ ] Salons, Spas, Tanning, & Barbershops
- [ ] Specialized Business & Other
- [ ] Sports, Recreation, & Exercise
- [ ] Transportation & Towing

Printed Name: _____

Signature: _____ Date: _____

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Revised 4/23/2015

Village of Mokena
Business License & Occupancy Questionnaire

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) 479-3930.

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

	Yes Important factor	No Not a factor
Proximity to major highways		
Available tenant space		
Low Will County taxes		
Commuter rail service		
Skilled work force		
Business-friendly		
Close to your customer base		
Other	_____ _____	

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_____

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Revised 3/9/2016

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) 479-3930.

Business Information (Required)

Business Name: _____

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

_____ Unit (if applicable) _____

City: _____ State: _____ Zip Code: _____

Business Phone (__ __ __) __ __ __ - __ __ __ __ Emergency Phone (__ __ __) __ __ __ - __ __ __ __

Description of Home Occupation

Type of Business: _____

_____

Percentage of home use for home occupation: _____

Number of deliveries/shipments made from home each day: _____

Number of clients/customers seen per day: _____

Hours of operation of the home occupation: _____

Describe business-related materials stored outside (if any): _____

_____

_____

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.

Owner's Signature: _____ Date: _____/_____/_____

Owner's Printed Name: _____

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Revised 1/27/2016

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.