

**CITY OF CREST HILL  
CITY CLERK'S OFFICE  
1610 PLAINFIELD ROAD  
CREST HILL, IL 60403**

APPLICANT'S NAME \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

DRIVER'S LICENSE # \_\_\_\_\_ SOCIAL SECURITY# \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_  
STREET CITY

STATE ZIP CODE PHONE#

BUSINESS NAME \_\_\_\_\_ PHONE# \_\_\_\_\_

BUSINESS ADDRESS \_\_\_\_\_  
STREET

CITY STATE ZIP CODE

NUMBER OF PERSONS ENGAGED OR EMPLOYED IN PLACE OF BUSINESS IN CREST HILL, INCLUSIVE OF OWNER OR OWNERS \_\_\_\_\_

ILLINOIS STATE SALES TAX NUMBER \_\_\_\_\_

FEDERAL WEAPONS DEALERS NUMBER \_\_\_\_\_

STATE OF ILLINOIS F.O.I. \_\_\_\_\_

\_\_\_\_\_  
APPLICANTS SIGNATURE

\_\_\_\_\_  
DATE

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DO NOT WRITE BELOW THIS LINE

DATE PAID \_\_\_\_\_

AMOUNT \_\_\_\_\_

PERMIT NUMBER \_\_\_\_\_