



# TOWN OF CICERO

## *Business License Department*

4949 W CERMAK RD • CICERO, ILLINOIS 60804  
708.656.3600 ext. 250, 253, 206 • FAX 708.656.0859

**Larry Dominick**  
Town President

**Ismael Vargas**  
Business License - Director

### OPERATING A BUSINESS FROM HOME ACKNOWLEDGMENT

I, THE UNDERSIGNED, DO STATE THAT I AM APPLYING FOR A BUSINESS LICENSE TO DO BUSINESS AS:

BUSINESS NAME: \_\_\_\_\_

AND THAT I INTEND TO OPERATE THAT BUSINESS FROM MY RESIDENCE AT: \_\_\_\_\_

I AGREED TO COMPLY WITH ALL FEDERAL OR STATE LAWS AND ALL ORDINANCES OF THE TOWN OF CICERO. I UNDERSTAND THAT I MAY OPERATE THIS BUSINESS FROM THE PROPERTY WHICH IS MY RESIDENCE SO LONG AS THE BUSINESS USE IS INCIDENTAL TO ITS USE AS MY RESIDENCE. I ALSO UNDERSTAND THAT NO TRUCKS ARE ALLOWED TO BE PARKED ON ANY RESIDENTIAL STREET. NO PEDESTRIAN TRAFFIC, NO STORAGE OF MATERIALS OR EQUIPMENT ON PROPERTY.

YOUR  
SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

PRINT NAME \_\_\_\_\_

LOCATION OF RESIDENCE AND BUSINESS \_\_\_\_\_

### NOTE

**IF PROPERTY IS OWNED BY SOMEONE OTHER THAN THE APPLICANT, THE APPLICANT MUST BRING A LETTER FROM THE OWNER OF THE PROPERTY GIVING HIS AUTHORIZATION TO CONDUCT A BUSINESS FROM HIS PROPERTY. PLEASE HAVE OWNER INCLUDE HIS NAME, ADDRESS AND PHONE NUMBER ON THE LETTER ALSO**