

## CITY OF SPRINGFIELD OFFICE OF THE CITY CLERK **CHUCK REDPATH**

For City of Springfield Use Only Treasurer's Stamp				
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## **License Application**

Applicant Name:	Business Name:			
Address:				
Mailing Address:				
Phone Number:		Email Address:		
Select	t Type of Lice	ense(s) Applied Fo		
Auctioneer	\$100 (LA)	Housemovers **	\$50 (PHM)	
Bowling Alley Number of Alleys	\$100 (LBA) \$25 per Alley	Mobile Home Court Number of Spaces	\$100 (LMHC) _ \$3 per Space	
Coin Operator Less than 2 Devices More than 2 Devices	\$50 per Device (LDCO) \$100 \$250	Sign **  Class A  Class B  Class C	(LSC) \$150 \$125 \$100	
Convenience Store Without Gas	\$100 (CSNF)	Shooting Gallery	\$55 (LMCC)	
Dry Cleaners	\$50 (LCE)	Skating Rink	\$50 (LMCC)	
Florist	\$25 (LF)	Movie Theater Number of Screens	\$200 (TTE) _ \$100 per Screen	
Funeral Home  Gaming Table Operator  Number of Tables	\$50 (LFD) \$75 (LMCC) \$10 per Table	Tobacco Dealer Number of Devices	\$25 (LCD) _ \$25 per Device	
Applicant Signature:		Date:		
For City of Springfield Use Only:  Approved: Denied:  Inspector or Approving Authority:	Date:			

Return Application To: 300 South Seventh Street

Room 106, Municipal Center West

Springfield, IL 62701

www.springfield.il.us

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