

# Village of Itasca New Business Packet

For offices uses in the O-R or ROC Districts ONLY

All other uses must use the Itasca New Business Packet



**Village of Itasca**  
550 W. Irving Park Road  
Itasca, IL 60143  
PHONE: 630-773-5568  
FAX: 630-773-0852  
[www.itasca.com](http://www.itasca.com)

*An electronic version of this packet can be downloaded and completed at [www.itasca.com/newbusiness](http://www.itasca.com/newbusiness)*

Revised May 2017

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# Village of Itasca New Business Packet

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550 W. Irving Park Road, Itasca, Illinois 60143-2018  
630-773-0835 • Fax 630-773-2505 • www.itasca.com



## Welcome to Itasca

Dear Business Owner:

On behalf of the residents and businesses of Itasca, I would like to welcome you and your business to our community.

We strive to make Itasca a great place to do business. Itasca is conveniently located just five miles west of O'Hare International Airport at the crossroads of I-290, I-355, and IL-390. Our strategic location provides easy access to destinations throughout the Chicagoland region, nation, and international business world. Itasca offers some of the lowest tax rates in DuPage County, superior municipal services, a high quality of life, and on-going business support.

The Village created this packet in order to help ensure the new business permitting process is transparent, predictable, and efficient. If you have questions at any time, please do not hesitate to contact Itasca's Community Development Department at (630) 773-5568. Village staff are available to answer any questions you may have and to meet one-on-one with you, should you desire.

In cooperation with the Itasca Chamber of Commerce and the Greater O'Hare Business Association (GOA), the Village offers a number of resources and networking events for your business. You may wish to consider joining this organization and information about the Itasca Chamber of Commerce is included in this packet. Also, watch for upcoming events on our economic development social media pages. Follow us on facebook at "Itasca Means Business," and on twitter at @ItascaMeans.

Thank you for choosing Itasca as your business home.

Sincerely,

Jeff Pruyn, Mayor



## **Mission**

The mission of the Itasca Chamber of Commerce is to promote business alliances and advance the professional, economic, and industrial welfare of Itasca.

## **Benefits**

- ***Networking***  
The Itasca Chamber of Commerce can be a terrific source of business for your firm. Monthly meetings, committee involvement and special events offer you the opportunity to develop valuable business connections.
- ***Timely Business Seminars***  
Throughout the year the Itasca Chamber of Commerce will sponsor seminars on a wide variety of topics. These seminars are informative, educational and designed to further enhance your business, making you more competitive in your market.
- ***Annual Events/Community Involvement***  
Our yearly events include the elegant Wine & Beer Tasting, sold-out Summer Golf Outing, the hugely successful Multi Chamber Expo and a premier Fall Event. Both businesses and residents are invited to attend.
- ***Economic Development***  
The Itasca Chamber of Commerce and the Village of Itasca cooperate to stimulate commercial activity, attract business into our area and encourage financial investment within the community.
- ***Advertising & Promotion***  
As a member, your company will be listed on the Itasca Chamber of Commerce website with a link to your website and will be listed in our membership directory. Members can also take advantage of advertising in the newsletter and special event sponsorships to market their company.
- ***InterAction Newsletter and Pipeline News***  
Members are kept informed of current topics, activities and member news through the InterAction and Pipeline New Publications. You will also receive separate mailings notifying you of special events and meetings throughout the year.
- ***Affiliate of the Greater O'Hare Association***  
The Itasca Chamber of Commerce is an affiliate of the Greater O'Hare Association, Illinois' premier regional business organization. Through this affiliation you also may have a membership with the Greater O'Hare Association if you choose.

## **Joining the Itasca Chamber of Commerce**

For more information or to join, please call the Itasca Chamber of Commerce at (630) 773-2949 or visit our website at [www.itascachamber.com](http://www.itascachamber.com).

## Overview of New Business Licensing for Offices in the O-R or ROC Districts

The following is an overview of the process to become a properly licensed business in the Village of Itasca. Please contact the Community Development Department at (630) 773-5568 with any questions.

1. **Submission of Application Forms and Fees:** Business completes and submits all applicable forms found in this New Business Packet, with required fees, to the Village of Itasca, Community Development Department, 550 W. Irving Park Rd., Itasca, IL 60143. A checklist to help determine what forms and fees is included below.
2. **Staff Review and Board Approval of Use:** Village staff will review the application to ensure it is complete and that the proposed office use is compatible with the zoning district in which it will be located. If the use is compatible and the application is complete, staff will administratively approve the proposed use. If the use does not comply with the existing zoning regulations, you will be contacted by staff regarding further steps that need to be taken.
3. **Business License Issued:** Following staff review and approval, the Village Clerk's office will issue the Business License. Questions about Business Licenses can be directed to the Business License staff at (630)-773-0835.

### New Business in O-R or ROC Districts Application Checklist

Forms and Fees		Required with Application?
	New Business Application Form	Yes Form Included in Packet
	Affadavit of Office Use Form	Yes Form Included in Packet
	Wastewater Survey Form	Yes Form Included in Packet
	Itasca Police Department Key Holder Information Form	Yes Form Included in Packet
	Payment of Licensing Fees	Yes



# Village of Itasca New Business Application

*Return completed form with applicable fees to:*  
Village of Itasca, Community Development Department  
550 W. Irving Park Road  
Itasca, Illinois 60143  
Phone: 630-773-0835 Fax: 630-773-2505

*Please Note: The business name, address, phone, fax, e-mail, website, and description will be listed in the Itasca Online Business Directory.*

## General Information

Application Date: \_\_\_\_\_ Move-In Date: \_\_\_\_\_ Date you assume(d) control of property through lease or purchase: \_\_\_\_\_

Business Name: \_\_\_\_\_

Proposed Itasca Address: \_\_\_\_\_

Current Address: \_\_\_\_\_

Mailing Address (if different from Proposed Itasca Address): \_\_\_\_\_

Parent Company and Address (if applicable): \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Illinois Business Tax Number: \_\_\_\_\_

Email: \_\_\_\_\_ Website: \_\_\_\_\_

Does your business collect retail sales tax?  Yes  No

Complete Description of Business Activities: \_\_\_\_\_

## Owner/Principal/Site Manager Information

## Contact Information (if different from owner/principal/site manager)

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Title: \_\_\_\_\_

Phone: \_\_\_\_\_

Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

E-mail: \_\_\_\_\_

## Site Information

Sq. Ft. of Retail Space: \_\_\_\_\_

Number of Company Vehicles Parked On-Site: \_\_\_\_\_

Sq. Ft. of Office Space: \_\_\_\_\_

Number of Vending Machines On-Site: \_\_\_\_\_

Sq. Ft. of Warehousing / Industrial Space: \_\_\_\_\_

Total # of Parking Spaces Assigned to Your Business: \_\_\_\_\_

Sq. Ft. of Other Space: \_\_\_\_\_

Total # of Employees at Location: \_\_\_\_\_

Total Sq. Ft. of Facility: \_\_\_\_\_

Number of Shifts: \_\_\_\_\_

Zoning: \_\_\_\_\_

Number of Employees On-Site During Peak Shift: \_\_\_\_\_

Co-tenant Names and Uses (if any): \_\_\_\_\_

**Tenant Information**

Do or will you sub-lease a portion of your space to another company at the proposed Itasca location? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please provide the name and phone number of each company. Please attach additional sheets if necessary.

<u>Tenant Name</u>	<u>Use</u>	<u>Phone Number</u>
1. _____	_____	_____
2. _____	_____	_____

**Other Itasca Sites (if applicable)**

Do you occupy more than one location in Itasca? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please list the other addresses and square footage. Please attach additional sheets if necessary.

<u>Address</u>	<u>Square Feet</u>
1. _____	_____
2. _____	_____

**Fee Calculator**

Please use the table below to calculate the inspection and licensing fees for your new business. Please note: Additional fees may be required if the facility requires inspection(s) and/or requests a Temporary Occupancy Certificate.

<b>Business License Fee</b>	1.	Using the information below, please enter the Business License Fee for the business	1.	
		<b>Square Feet of Office</b>	<b>Annual Business License Fee</b>	
			<u>Prior to June 30</u>	<u>After July 1</u>
		0 to 5,000 sq. ft.	\$75	\$37.50
		5,001 to 10,000 sq. ft.	\$90	\$45
		10,001 to 50,000 sq. ft.	\$200	\$100
		50,001 to 100,000 sq. ft.	\$400	\$200
	100,001 to 200,000 sq. ft.	\$500	\$250	
	Over 200,000 sq. ft.	\$800	\$400	
<b>Vending Machine License</b>	2.	If the facility will have vending machines onsite, enter \$25 per machine.	2.	
<b>Total</b>	3.	Add lines 1 and 2. This is your <b>Total Business License Fee due</b> . This fee is payable to the Village of Itasca.	3.	

**Certification**

Under the penalties as provided by law, I declare that to the best of my knowledge and belief, the information on this form is true, correct, and complete, and the proposed use(s) is/are in full compliance with Section 11.02 of the Itasca Zoning Ordinance, a copy of which is available online at [www.itasca.com/comdev](http://www.itasca.com/comdev).

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**OFFICE USE ONLY**

<b>Fee</b>	<b>Amount Paid</b>	<b>Date</b>	<b>Received By</b>
Total Business License			

STATE OF ILLINOIS        )  
  )  
COUNTY OF DUPAGE        )

AFFIDAVIT OF OFFICE USE

I, \_\_\_\_\_, being first duly sworn, state the following on personal knowledge:  
(Print Full Name)

1.) I am the \_\_\_\_\_ of the property located at \_\_\_\_\_, in the  
(Specify either Landlord or Tenant) (Insert Address)  
Village of Itasca, hereinafter referred to as the "Subject Property."

2.) The Subject Property is located in the O-R Office Research District or the ROC Regional Office Center District zoning classification.

3.) The Subject Property is to be occupied by \_\_\_\_\_, which  
(Insert Company Name)  
is engaged in the business of \_\_\_\_\_.  
(Insert Nature of Business or Use)

4.) The use of the Subject Property is strictly office in nature, in that the Subject Property is used solely for the conducting of affairs of a business, profession, service, or industry, or government, and that no other uses are conducted from the Subject Property.

FURTHER AFFIANT SAITH NOT

\_\_\_\_\_  
(Affiant's Signature)

\_\_\_\_\_  
(Company)

Subscribed and Sworn to before me this  
\_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
(Title)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
NOTARY PUBLIC                (Seal)





550 W. Irving Park Road • Itasca, Illinois 60143-2018  
630.773.0835 • Fax 630.773.2505 • www.itasca.com

### Non-Residential Wastewater Survey

Business: \_\_\_\_\_

Address: \_\_\_\_\_ Authorized Rep: \_\_\_\_\_

\_\_\_\_\_ Title: \_\_\_\_\_

Phone at Site: \_\_\_\_\_ Email Address: \_\_\_\_\_

1. Number of Employees: Office (Avg and Max) \_\_\_\_\_ All Other (Avg and Max) \_\_\_\_\_

2. Hours of Operation: Days/Week: M Tu W Th F Sa Su Shifts/day: \_\_\_\_\_ Hrs/Shift: \_\_\_\_\_  
Shift Details: \_\_\_\_\_

3. What service is performed at this site? (Include details about processes to create product, if applicable)  
\_\_\_\_\_  
\_\_\_\_\_

4. Please check applicable processes and sub-processes on site:

- |   |   |  |  |
|---|---|--|--|
| <input type="checkbox"/> Retail             | <input type="checkbox"/> Office           | <input type="checkbox"/> Wholesale Distributor | <input type="checkbox"/> Assembling    |
| <input type="checkbox"/> Food Establishment | <input type="checkbox"/> Medical Office   | <input type="checkbox"/> Warehouse             | <input type="checkbox"/> Fabricating   |
| <input type="checkbox"/> Auto/Truck Repair  | <input type="checkbox"/> R & D Lab        | <input type="checkbox"/> Packaging             | <input type="checkbox"/> Manufacturing |
| <input type="checkbox"/> Vehicle Wash       | <input type="checkbox"/> Photo-developing | <input type="checkbox"/> Printing              | <input type="checkbox"/> Other _____   |
| <input type="checkbox"/> Laundry            | <input type="checkbox"/> Computer Center  | (not copying)                                  | _____                                  |

5. What materials are received at the facility? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. Is process wastewater discharged?  Yes  No  
If yes, please describe: \_\_\_\_\_

7. Are liquids stored on-site?  Yes  No  
If yes, please list liquid(s), number of container(s), and container size(s): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

8. Is water used in any process such as fouling, cleaning, mixing, painting, manufacturing, rinsing, etc? Circle those that apply, or check "No". If "Yes", please provide general details on back.  No

9. Is any chemical, paint, oil, ink, dye, or solvent used in your business? Circle those that apply, or check "No". If "Yes", please provide general details on back.  No

**By signing below, you endorse the following statement:**

"I certify that all the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for willingly submitting false information, including the possibility of fine and imprisonment."

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# ITASCA POLICE DEPARTMENT

*"An Illinois Accredited Police Agency"*



540 W Irving Park Road, Itasca, Illinois 60143-2018  
Phone: 630-773-1004      www.itasca.com/police

Dear Business or Property Owner,

The Itasca Police Department needs your help in updating key holder information for your business located in Itasca. This information is used in the event of an emergency after normal business hours and all other times when your business is closed. If you have multiple locations, with the same responder information, please send a list of the property addresses when returning this letter.

This information will be used for LAW ENFORCEMENT AND FIRE PURPOSES ONLY. The following information is needed to complete our records. You will be asked to complete this form every twelve (12) months.

General Information	
Business Name:	
Business Address:	
Mailing Address (if different from mailing address):	
Phone:	Fax:
Email:	

Key Holder Contact Information	
Please provide three (3) names and contact information in the order that they are to be contacted in the event of an emergency after normal business hours. These people <b>must</b> have keys to the property.	
1. Name:	
Home Address:	
Home Phone:	Cell Phone:
2. Name:	
Home Address:	
Home Phone:	Cell Phone:
3. Name:	
Home Address:	
Home Phone:	Cell Phone:

Thank you for your cooperation, please return to:

**Mail:** Itasca Police Department      -OR-      **Fax:** Itasca Police Department  
Attn: Records      Attn: Records  
540 W. Irving Park Road      630-773-1805  
Itasca, IL 60143



540 W Irving Park Road, Itasca, Illinois 60143-2018  
Phone: 630-773-1004 Fax: 630-773-1805

## Village of Itasca False Alarm Fees

Dear Alarm Permit Holder:

In 2001, the Village of Itasca Board of Trustees passed the amended ordinance 993-98 pertaining to the regulation of licensed burglar alarm systems within the Village. Specifically, the false alarm fine schedule is currently as follows:

1-3 False Alarms	No Charge
4-5 False Alarms	\$75.00 per false alarm
6-7 False Alarms	\$150.00 per false alarm
8-9 False Alarms	\$350.00 per false alarm
10 <sup>th</sup> False Alarm and above	<b>\$500.00 per false alarm and initiation of the revocation process</b>

We hope you continue to make efforts to reduce the number of false alarms occurring at your address.

If you have any questions concerning your alarm permit or need assistance with your alarm system, please do not hesitate to contact the Itasca Police Department, Records Division at 630-228-5711, Monday through Friday from 8:00 am to 4:00 pm.

Sincerely,

Robert O'Connor  
Director of Police