Customer Acct #: _____

FOOD & BEVERAGE TAX REGISTRATION FORM

1. **Name of Business (DBA)** _____ **Business Telephone** _____

Business Location Address _____ **City** _____ **State** _____ **Zip Code** _____

Date Open for Business _____

2. **Company/Corporate Name,** *if different from DBA* _____ **Corporate Telephone** _____

Mailing Address (Company/Corporate) _____ **City** _____ **State** _____ **Zip Code** _____
Must be different than business location address

3. **Name of Owner or Manager** _____ **Owner Telephone** _____
Must be different than business phone

Owner Driver License Number _____ **Email Address** _____

4. **Nature of Business (i.e. restaurant, tavern, liquor store, etc)** _____

Check any which applies to your business location:

Liquor (On-premise consumption)

Packaged Liquor

Food and non-alcoholic beverages

5. **Estimated Annual Sales Subject to Food & Beverage Tax:** _____

6. **Illinois Retailer Occupation Tax Number (IBT):** _____

7. **Federal Taxpayer ID Number:** _____

8. **Name of Food and Beverage Tax Return Preparer:** _____

Preparer's Telephone _____ **Preparer's Email** _____

I declare that I have examined this registration form, and to the best of my knowledge, the information entered on this form is true, correct, and complete.

Signature of Applicant _____ **Date** _____

Please return the completed form to:

Village of Downers Grove
c/o Finance Dept., Food & Beverage Tax
801 Burlington Avenue
Downers Grove, IL 60515
Phone: 630-493-8810 / Fax: 630-434-5571
Email: Foodandbeveragetax@downers.us