



BUSINESS LICENSE APPLICATION 2025
CONTACT DATA—ADDENDUM

Date: _____
Contact Data Sheet _____ of _____

Please fully complete info for each contact. Use extra sheets as necessary. All contact types that apply should be provided. For individual owners/partners/managers please also include info in blue. For owners/partners/shareholders identify percentage of business owned. Provide updates to the Village within 10 days of any changes.

Contact Type: Owner Partner Corporation Manager Landlord Property Mgr. Security/Alarm BASSET
Name: _____ Phone: (____) ____ - _____ Cell
Address: _____ Phone: (____) ____ - _____
Address2: _____ Phone: (____) ____ - _____
City: _____ State: _____ Zip: _____
Email: _____ %Owned
Driver's License: _____ State of Issue: _____ Male Female
Additional Info: _____

Contact Type: Owner Partner Corporation Manager Landlord Property Mgr. Security/Alarm BASSET
Name: _____ Phone: (____) ____ - _____ Cell
Address: _____ Phone: (____) ____ - _____
Address2: _____ Phone: (____) ____ - _____
City: _____ State: _____ Zip: _____
Email: _____ %Owned
Driver's License: _____ State of Issue: _____ Male Female
Additional Info: _____

Contact Type: Owner Partner Corporation Manager Landlord Property Mgr. Security/Alarm BASSET
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Address: _____ Phone: (____) ____ - _____
Address2: _____ Phone: (____) ____ - _____
City: _____ State: _____ Zip: _____
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Driver's License: _____ State of Issue: _____ Male Female
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