



**Coal City Business Registration**  
 515 South Broadway Street \* Coal City, Illinois 60416  
 815-634-8608/Fax#815-634-2487  
 www.coalcity-il.gov

**OFFICE USE ONLY:**

BUSINESS CODE: \_\_\_\_\_

Business Name:				
Type of Business:				
Business Address:				
Mailing Address (If Different):				
Business Phone #:			Fax#:	
Email Address:				
Website address:				
Business Hours:				
Do you have hazardous/flammable material on site?				
If yes please describe:				
Do you have a Knox Box (per Village Ordinance 05-29) installed?				
Location:				
Property Owner Name:				
Home Address:				
Contact#:				
Business Owner/Manager Name:				
Home Address:				
Contact#:				
Alarm Type:	Burglar	Hold up/Panic	Fire	None
Alarm Company Name:				
Address:				
Phone#:				

Please complete as applicable. It will allow the Fire Protection District to provide a better service to you, the merchant and a safer environment for our firefighters in the event that your occupancy would have a need for emergency services.

Completed by: \_\_\_\_\_ Date: \_\_\_\_\_