

2024 JUNK PEDDLER BUSINESS LICENSE APPLICATION

Office of the City Clerk - Business Services Office Use Only: 150 West Jefferson Street Date Received: _____ Date Issued: _____ Joliet, Illinois 60432 Office 815-724-3905 Fax 815-724-3904 Business Account ID: _____ Email: businessservices@ioliet.gov Website: http://www.joliet.gov Please print legibly. All information and supplemental information must be completed and submitted. Incomplete forms will be returned. Please allow a minimum of twenty (20) business days for processing. **GENERAL INFORMATION** Name: Address: City: _____ State: _____ Zip Code: _____ Cell Phone Number: Home Phone Number: E-mail: Driver's license number: _____ State where issued: _____ **VEHICLE INFORMATION** Vehicle Identification Number (VIN): _____ Model: Make: Plate Number: _____ Year: Color: Location of where refuse will be deposited (Business Name and Complete Address): Business Name (DBA): Address:

State: _____

Zip Code: _____

<u>ADDITIONAL INFORMATION TO BE PROVIDED AT TIME OF SUBMITTAL:</u> □ Copy of valid state issued driver's license ☐ Copy of vehicle registration □ Copy of vehicle insurance; and ☐ Visit Business Services to have your photo taken as part of the vehicle placard tag prior to collecting any items. Please email application and documentation in .pdf format to:businessservices@joliet.gov I hereby certify that the information provided in this application is true and correct to the best of my knowledge and that I have not provided false or misleading information. I understand that the failure to supply adequate or correct information will be subject to suspension or revocation of the City of Joliet's business license. I agree to the following rules: 1. Licensees are not allowed to go through recycle bins. 2. Items to be collected must be visible and located on the public right-of-way and not on private property. 3. Items collected cannot be stored outdoors. 4. The Joliet issued placard must be displayed at all times, and 5. The Joliet issued placard cannot be transferred to a different vehicle or individual.

Name of applicant (please print)

Date

Signature of applicant