



VILLAGE OF SKOKIE

APPLICATION FOR CERTIFICATE OF OCCUPANCY

Community Development Department
Building & Zoning Division
5127 Oakton St. 1st Floor, Skokie, IL 60077
Phone (847) 933-8223 • Fax (847) 933-8230

(Please Type or Print Clearly and Complete All Sections)

GENERAL INFORMATION

Date of Application _____

Is this application being submitted because of a (please check all that apply):

New Use or Change in Use _____ New Business Owner _____ New Property Owner _____

On which date do you intend to open or did you first open? _____

BUSINESS INFORMATION

Name of Business _____

Address _____ Suite or Unit # _____

Skokie, IL Zip Code _____ Business Phone # _____

Business Website _____ Total Square Footage of Tenant Space _____

BUSINESS OWNER INFORMATION

Full Name _____ Title (CEO, manager, etc) _____

Address _____ City/State/Zip _____

Email Address _____ Cell Phone # _____

Driver's License or State ID # _____ State _____

BILLING INFORMATION

Contact Name _____ Title (Manager, Accountant, etc) _____

Billing Address _____ City/State/Zip _____

Email Address _____ Phone # _____

For Office Use Only:

Application # _____	Inspection Date & Time _____
Building Permit # _____	Date of Occupancy _____
Zoning District: _____	Land Use _____
LBCS Function Code # _____	Use: Per. _____ Spec. _____ Not Per. _____ Rest. _____
Parking Analysis Required _____	Zoning Board of Appeals / Plan Commission Approval _____

ADDITIONAL BUSINESS INFORMATION

Type of Business _____

Please describe the day-to-day activities of your proposed business:

Is your business a non-profit institution? _____ Religious assembly/services ? _____

Retail goods or service(s) provided on site? _____ Manufacturer or Wholesaler? _____

of Tables and Seats (Food Service Uses Only) _____ Will food be prepared or sold on site? _____

Maximum # of employees on site at one time _____ Total # of Employees _____

FEIN # _____ Illinois Retailer's Occ. # _____

Will liquor be served on premises or sold from the premises? _____

Will cigarettes or tobacco be sold on the premises? _____

of amusement devices or vending machines: Amusement _____ Vending _____

PROPERTY INFORMATION

*Property Owner _____ Phone # _____

Address _____ City/State/Zip _____

Email Address _____ Single or Multiple Tenant(s) Site _____

Driver's License or State ID # _____ State _____

*If more than one owner please list the primary contact above and secondary contact below

Property Owner (Secondary Contact) _____

of Parking Spaces on Site _____ Name and Use of Prior Business (If Known) _____

BUSINESS OWNER SIGNATURE _____ **DATE** _____

PROPERTY OWNER SIGNATURE _____ **DATE** _____

EMERGENCY CONTACT INFORMATION

Please list the emergency contact information for any person who can access the tenant space after normal business hours.

PRIMARY BUSINESS CONTACT (OTHER THAN BUSINESS OWNER)

Full Name _____ Email Address _____

Home Address _____ City/State/Zip _____

Daytime Phone # _____ Cell Phone # _____

ALTERNATE CONTACT

Full Name _____ Email Address _____

Home Address _____ City/State/Zip _____

Daytime Phone # _____ Cell Phone # _____

Fee Schedule: (Application fees are based upon the gross floor area of your tenant space)

All uses except within the Southeast Industrial District

Uses located within the Southeast Industrial District
(South of Oakton St and east of Hamlin Ave only)

Less than 1,001 sq. ft.	\$ 225.00	Less than 1001 sq. ft.	\$ 425.00
1,001 to 3,000 sq. ft.	\$ 250.00	1,001 to 3,000 sq. ft.	\$ 450.00
3,001 to 10,000 sq. ft.	\$ 300.00	3,001 to 10,000 sq. ft.	\$ 500.00
10,001 to 100,000 sq. ft.	\$ 400.00	10,001 to 100,000 sq. ft.	\$ 600.00
Over 100,000 sq. ft.	\$ 700.00	Over 100,000 sq. ft.	\$ 900.00

***The fee for a certificate of occupancy obtained subsequent to the occupancy shall be double what the cost of the certificate of occupancy would have been.**