



VILLAGE OF POPLAR GROVE
"A Great Place to Call Home"

CIGARETTE & TOBACCO RETAIL REGISTRATION

Fee: \$20.00 due upon application
Annual Expiration Date: June 30th

**Attached is a copy of Chapter 10 Comprehensive Regulation of Tobacco Products*

1. Applicant:

Name: _____ Phone: _____

2. Name under which business is to be conducted:

_____ Business Phone: _____

3. Business Address:

4. Mailing Address (if different):

5. Location where retail tobacco sales will take place:

I hereby apply for a license to sell, expose for sale, possess with intent to sell, exchange, or barter, dispose of or give away cigarettes or tobacco products during this license year. Further, I understand that I must follow the provisions of Section 2, Chapter 10 of the Poplar Grove Municipal Code, as amended, and other laws governing such sale, exchange, or barter.

Additionally, I understand the Illinois Department of Revenue requires proper State Licensing in addition to Village registration.

Signature of Agent _____ Date: _____

OFFICE USE ONLY

CK: _____ CASH: _____ CC: _____ DATE RECEIVED: _____

LICENSE NUMBER: _____ DATE ISSUED: _____