



**CITY OF NORTH CHICAGO
LANDLORD LICENSE APPLICATION**

Department of Economic and Community Development
1850 LEWIS AVE. • NORTH CHICAGO, IL 60064
(847) 596-8650 FAX: (847) 596-8669

Amount Paid \$ _____

Date Paid _____

License Number / Verification
Office Use Only

Property Owner(s) (Attach additional sheets if necessary)

Name: _____

Street Address: _____
(P.O. BOXES NOT ACCEPTED)

City/State/Zip: _____

Home Phone: () _____ Emergency Number: () _____

Email Address: _____ Fax: _____

Owner Occupied

Property Manager Information

Name: _____

Street Address: _____
(P.O. BOXES NOT ACCEPTED)

City/State/Zip: _____

Home Phone: () _____ Emergency Number: () _____

Email Address: _____ Fax: _____

PROPERTY OWNER/AGENT MUST PRESENT DRIVER'S LICENSE OR STATE I.D. TO OBTAIN LICENSE.

I hereby affirm that all the information provided is current and correct.

Signature of Applicant

Date