

VILLAGE OF OAKWOOD  
PO BOX 31  
106 S. SCOTT ST.  
OAKWOOD, IL 61858  
Ph: 217-354-4255  
Fax: 217-354-4901  
email: [oakwood-village@comcast.net](mailto:oakwood-village@comcast.net)  
website: oakwoodil.org

Date of application: \_\_\_\_\_

Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

Business Phone: \_\_\_\_\_

Owner \_\_\_\_\_ Cell Phone # \_\_\_\_\_

Owner SS# \_\_\_\_\_ Date of birth \_\_\_\_\_

Are you the sole owner or is this a partnership? (circle YES or NO) If yes please list names of other owners: \_\_\_\_\_

LIABILITY INSURANCE

Insurance Co. Name \_\_\_\_\_ (must provide proof of insurance)

Insurance Contact: \_\_\_\_\_ Phone \_\_\_\_\_

VEHICLE INSURANCE

Insurance Co. Name \_\_\_\_\_ (must provide proof of insurance)

Insurance Contact: \_\_\_\_\_ Phone \_\_\_\_\_

Type of Service Offered:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Items not accepted:

\_\_\_\_\_  
\_\_\_\_\_

Charges: per week/per month/per can or bag(list price for each or attach pricing list to application)

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Service charge for items over limit: \_\_\_\_\_

Pick up day(s)/Estimated time: \_\_\_\_\_

What other municipalities do you service? \_\_\_\_\_

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Has a license issued to this applicant ever been revoked? (circle YES OR NO.) If yes please explain:

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Has the applicant or any of your current employees ever been convicted of a felony? (circle YES OR NO) If yes please explain: \_\_\_\_\_

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**IF OWNER, CURRENT EMPLOYEES, OR FUTURE HIREES, HAVE A CURRENT OR PRIOR FELONY IT IS THE DUTY OF THIS APPLICANT TO NOTIFY THE VILLAGE OF OAKWOOD'S PRESIDENT OF THE BOARD IMMEDIATELY.**

\_\_\_\_\_\*  
**BUSINESS OWNER**

**Vehicle(s)**

**Plate#**

**Trailer Plate #**

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

I have read and understand the rules established by the Village of Oakwood in accordance to Village Ordinance # 15-4-13-2. I understand that if I do not follow the rules clearly stated in the ordinance and that all is truthful in the filing of this application that my permit to provide services to residents in the Village of Oakwood can and will be revoked.

\_\_\_\_\_  
Business Owner

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness