

City of East Peoria  
401 W. Washington St., East Peoria, IL 61611  
Phone: 309.698.4715 Fax: 309.698.4747

New [ ] Renewal [ ]

## APPLICATION FOR HOTEL/MOTEL LICENSE

Business Name of Hotel/Motel: \_\_\_\_\_

Address of Hotel/Motel: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Name of Owner: \_\_\_\_\_

Address of Owner: \_\_\_\_\_

Name of Hotel/Motel Manager: \_\_\_\_\_

Number of Hotel/Motel Rooms or Units: \_\_\_\_\_

Maximum Number of Vehicles that may be accommodated: \_\_\_\_\_

Email Address for future renewals and communications: \_\_\_\_\_

I, the undersigned, hereby declare that I have carefully read the Section of the City Code relating to this business; that I understand it thoroughly and will carry out every provision thereof. I further state that the statements and answers contained in this application are true to the best of my knowledge and belief, knowing that any false statement will be sufficient cause for denial or revocation of said license and/or prosecution.

\_\_\_\_\_  
(Signature of applicant) Date: \_\_\_\_\_

\_\_\_\_\_  
(Name of application – print)

\_\_\_\_\_  
(Title)

For City Office Use Only:

Fee \$ 25.00 Date Received \_\_\_\_\_ Accepted by \_\_\_\_\_