Ann B. Taylor, Mayor
Janet E. Kilkelly, City Clerk
Dr. John R. Schwab, Treasurer

WAUKEGAN
City of Progress Illinois

Finance Department

finance@waukeganil.gov
Office: (847) 599-2540

Terminal Operator Registration

Operator Name: _____ Operator Phone: _____
Address: _____ EIN: _____
City, State, Zip: _____ State License No: _____

DBA (if any) _____

Mailing Address: Same as above - ☐
Mailing Address: _____ _____
Mailing City, State, Zip: _____ _____

Contact Name: _____ Contact Title: _____
Contact email: _____ Contact Phone: _____

Contact Name: _____ Contact Title: _____
Contact email: _____ Contact Phone: _____

Ordinance No. 20-O-28, Sec. 3-95 (d)(1)
Push Tax payments accompanied by tax returns prescribed by the City shall be remitted to the City on or before the 20th day of the month following the month in which the payment for the Push Tax is made.

I declare that I have examined this registration form, and to the best of my knowledge, the information entered on this form is true, correct and complete.

6/10/20

_____

Applicant Name Signature Title Date

Please return completed form;

Via Email:___ finance@waukeganil.gov

Via Mail: ___ City of Waukegan
Attention: Push Tax
100 N. Martin Luther King Jr. Ave
Waukegan, IL 60085