



VILLAGE OF RIVER GROVE

DAVID B. GUERIN, PRESIDENT
2621 THATCHER AVE
RIVER GROVE, ILLINOIS 60171
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ZONING VERIFICATION REQUEST

NAME OF BUSINESS: _____

SPECIFIC ACTIVITIES OF BUSINESS: _____

BUSINESS ADDRESS: _____, RIVER GROVE, IL 60171.

WILL THERE BE PUBLIC ACCESS? ☐ YES ☐ NO SQUARE FOOTAGE: _____

NAME OF APPLICANT: _____ TITLE: _____

APPLICANT HOME ADDRESS: _____

PHONE NUMBER: _____ EMAIL ADDRESS: _____

SIGNATURE

DATE

OFFICE USE ONLY

THE ZONING OFFICE OF THE VILLAGE OF RIVER GROVE, ILLINOIS HEREBY AFFIRMS THE BUSINESS LICENSE APPLIED FOR ABOVE IS IN COMPLIANCE WITH LOCAL ZONING LAWS AND REGULATIONS TO CONDUCT THIS TYPE OF BUSINESS.

BUILDING DEPARTMENT EXECUTIVE ADMINISTRATOR

DATE

CURRENT ZONING DESCRIPTION: _____

CONFORMING USE: ☐ YES ☐ NO

ADEQUATE PARKING: ☐ YES ☐ NO NUMBER OF PARKING SPOTS REQUIRED: _____

COMMENTS: