Annual Business Registration
(Munster Municipal Code Chapter 10)

This application is for registering or renewing your business for the new calendar year with the Town of Munster. Your information is shared with the Fire and Police Departments for emergency purposes.

(SEE BELOW FOR CONTRACTOR INFO)

Watch for your GREEN POSTCARD in November of each year reminding you to renew for the following year beginning December 1st. The registration forms may be found on our website www.munster.org. Please follow the link on the home page under "Forms and Applications".

The fees for the business registration are as follows:

- $75.00 – Registration received by February 26th and all new businesses
- $100.00 – Renewals received after February 26th

Please complete the Registration and Recycling forms and return them to us by 2/26/21 to avoid late fees.

If you are a CONTRACTOR and your business is in Munster:

You must file all applicable paperwork for Contractor Licensing IN ADDITION TO this Business Registration form. The Contractor's form is available on our website at www.munster.org, search “Contractor License”. If you need further information, please call Community Development at 219-836-6990.

*If required, please forward this form to your corporate office for completion and payment.

**If your business is no longer in operation, please notify our office in writing.
**BUSINESS REGISTRATION & BUSINESS INFORMATION**

**TOWN OF MUNSTER**  
**BUSINESS REGISTRATION & EMERGENCY INFORMATION**

Town of Munster, Clerk-Treasurer’s Office BUS REG, 1005 Ridge Road, Munster, Indiana 46321-1849  
(219)836-6940 FAX (219)836-8350  
achew@munster.org

**PLEASE PRINT LEGIBLY OR TYPE**

<table>
<thead>
<tr>
<th>Year of Request</th>
<th>2021 (valid through 12/31)</th>
<th>Date Submitted:</th>
</tr>
</thead>
</table>

- **☐ Please check if this business is in a home**  
- **☐ RENEWAL ☐ NEW (FEE FOR ALL NEW BUSINESS $75.00)**

<table>
<thead>
<tr>
<th>**BUSINESS INFORMATION **</th>
<th><strong>OWNER/MANAGER INFORMATION</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Business Name:</strong></td>
<td><strong>Owner/Mgr. Name:</strong></td>
</tr>
<tr>
<td><strong>ADDRESS:</strong> (incl. STE #)</td>
<td><strong>Owner/Mgr. Address:</strong></td>
</tr>
<tr>
<td><strong>CITY, STATE &amp; ZIP</strong></td>
<td><strong>CTTY, STATE &amp; ZIP</strong></td>
</tr>
<tr>
<td><strong>Local Bus Phone #:</strong></td>
<td><strong>Owner/Mgr. Phone #:</strong></td>
</tr>
<tr>
<td><strong>E-MAIL ADDRESS:</strong></td>
<td><strong>wk.</strong></td>
</tr>
</tbody>
</table>

Reminders are sent for annual registrations - please provide current e-mail address each year.

**BUSINESS WEBSITE:**

**Signature of Owner:**

**NATURE OF BUSINESS:**  
- Number of employees located here? ______
- The above named person is the [OWNER] [MANAGER] [OTHER] ______

Names of persons to be called in case of emergency or business irregularity after business hours. List in order of preference in which you wish them to be contacted. Please notify the Clerk-Treasurer’s Office in writing by fax or U.S. mail of any changes.

1. ___________________________________________________________  
   ___________________________  

2. ___________________________________________________________  
   ___________________________  

3. ___________________________________________________________  
   ___________________________

**Automatic & Manual Alarm Systems on Property**

**TYPE OF ALARMS:** (Check all that Apply)

- [ ] Burglary  
- [ ] Robbery  
- [ ] Fire  
- [ ] Trouble  
- [ ] Outside Audible  
- [ ] Silent  
- [ ] No Alarm

**ALARM EQUIPMENT:**

Monitoring agency and emergency/after hours phone:

<table>
<thead>
<tr>
<th>Name</th>
<th>Address</th>
<th>Phone</th>
</tr>
</thead>
</table>

Seller: ____________________________________________  
Installer: __________________________________________

Firm Inspecting or Maintaining if different:

**Verification of information and of equipment compliance with standard (UL, NFPA, etc.)**

I acknowledge that the information above is correct and that I am subject to Town of Munster Municipal Code Chapter 14, Article III which regulates automatic and manual alarm systems. The fine structure is understood to be first two false alarms, no charge; 3rd false alarm, $75.00; in excess of three false alarms $100.00 each in a calendar year.

**Signature**  
**Date**

**FOR OFFICE USE ONLY**

**BUILDING INSPECTOR APPROVAL**  
**SIGNATURE** **DATE**  
**COMMENTS:**

**FIRE INSPECTOR APPROVAL**  
**SIGNATURE** **DATE**  
**COMMENTS:**

**PLANNING DIRECTOR APPROVAL**  
**SIGNATURE** **DATE**  
**COMMENTS:**

**FEE $:** $75  
**DATE REC’D:**  
**REC’D BY:**  
**DATE ISSUED:**

**RECEIPT #:**  
**LATE FEE:** [ ] (IF AFTER 2/26)  
**BUSINESS ID #:**  
**DATA ENTERED:**
RECYCLING QUESTIONNAIRE FOR MUNSTER BUSINESSES
(REQUIRED to be on file for all Munster Businesses)
(Questions about this form? Call Public Works at 219/836-6970)

Business name: _______________________________________________________

Business address: _____________________________________________________

Recycling program contact person: _______________________________________
(If your business doesn't handle recycling, please list owner/manager who handles recycling.)

Building Type: □ FREE STANDING □ COMPLEX

Service Provider: __________________

RECYCLING METHOD USED:
__ WE DO NOT RECYCLE
__ Separation from trash into recycling bins
__ Take recycling off site. Where? __________________________________________

WHAT MATERIALS DO YOU RECYCLE (✓ all that apply)
__ Corrugated Cardboard            __ Plastic Containers            __ Mixed Paper
__ Wooden Pallets                  __ Magazines/Catalogs          __ High Grade Paper
__ Newspaper                       __ Plastic Film                __ Ferrous Metals
__ Metal Containers (including aluminum, steel and bi-metal) __ Fluorescent Bulbs
__ Glass Containers (including clear, green and brown) __ High Density Discharge Lamps
__ Other Measures: __________________________________________

HOW DO YOU REDUCE WASTE (✓ all that apply)
__ Double-sided Copying            __ Circulating and Routing Memos
__ Inter-Office/Company envelopes
__ Installing reusable furnace or air conditioning filters
__ Installing long-lasting energy efficient light bulbs or fixtures
__ Reducing fax transmission cover pages to ½ page or stick-on notes
__ Using Packaging Alternatives Made of Post-Consumer recycled materials
__ Other Measures: _________________________________________________

EDUCATIONAL PROGRAMS IMPLEMENTED (✓ all that apply)
__ Flyers with all proposals and contracts outlining the recycling plan, the importance of
  recycling and identifying recyclable materials and collection points (attach copy)
__ Annual recycling program updates to all employees (attach copy)
__ Signs identifying recyclable materials
__ Other: __________________________________________________________________

ADDITIONAL INFORMATION (✓ all that apply)
__ Semi-Annual refuse hauler/recycling service provider’s recyclable quality report (attach copy)
__ Correspondence with the Town (attach copy)

It is required by Lake County for all Munster Businesses to complete this form
before a Business Registration Certificate will be issued.