

PLEASE KEEP THIS PAGE FOR REFERENCE

**Town of Munster
Clerk-Treasurer's Office
Business Registrations
1005 Ridge Road, Munster, Indiana 46321
Phone: (219) 836-6940 Fax: (219) 836-8350
KLOPEZ@munster.org**

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 2nd. The registration forms may be found on our website www.munster.org. Please follow the link on the home page under "Forms and Applications". ***NO ONLINE PAYMENTS***

The fees for the business registration are as follows:

- **\$75.00 – Registration received by February 28th and all new businesses**
- **\$100.00 – Renewals received after February 28th**

Please complete the Registration and Recycling forms and return them to us by 2/28/25 to avoid late fees.

Town of Munster
Clerk-Treasurer's Office
ATTN: Business Registrations
1005 Ridge Road
Munster, Indiana 46321-1849

If this business has an Amusement Device (gaming or mechanical machine) please check the box on form

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.***

2025

TOWN OF MUNSTER

FEE: \$75.00

BUSINESS REGISTRATION & EMERGENCY INFORMATION

RENEWALS Rec'd AFTER FEBRUARY 28TH \$100.00

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

PLEASE PRINT LEGIBLY OR TYPE

| | | | |
|------------------------|----------------------------|------------------------|--|
| Year of Request | 2025 (valid through 12/31) | Date Submitted: | |
|------------------------|----------------------------|------------------------|--|

| | |
|---|--|
| Business Number _____ | Please check if business has Amusement Device(s) <input type="checkbox"/> |
| <input type="checkbox"/> Please check if this business is in a home | <input type="checkbox"/> RENEWAL <input type="checkbox"/> NEW (FEE FOR ALL NEW BUSINESS \$75.00) |

| BUSINESS INFORMATION ↗ | OWNER/MANAGER INFORMATION ↗ |
|------------------------|-----------------------------|
|------------------------|-----------------------------|

| | |
|---|---|
| Business Name: | Owner/Mgr. Name: |
| ADDRESS: (incl. STE #) _____ | <input type="checkbox"/> if new address Owner/Mgr. Address: _____ |
| CITY, STATE & ZIP Munster, IN 46321 | CITY, STATE & ZIP |
| Local Bus Phone #: | Owner/Mgr. Phone #: _____ <input type="checkbox"/> wk. <input type="checkbox"/> hm <input type="checkbox"/> cell |
| E-MAIL ADDRESS: _____ | BUSINESS WEBSITE: _____ |
| Mail Cert. to: | |
| NATURE OF BUSINESS: | Number of employees located here? _____ <i>The above named person is the</i> <input type="checkbox"/> OWNER <input type="checkbox"/> MANAGER <input type="checkbox"/> 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.

| | [Please print legibly] NAME AND TITLE | PHONE NUMBER | KEY HOLDER (Yes or No) |
|----|---------------------------------------|--------------|------------------------|
| 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: _____

| | | |
|---------------|------------------|-------------|
| Name _____ | Address _____ | Phone _____ |
| 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: _____ |
| RECEIPT #: | LATE FEE: <input type="checkbox"/> (IF AFTER 2/28) | REC'D BY: _____ |
| | BUSINESS ID #: _____ | DATE ISSUED: _____ |
| | | DATA ENTERED: _____ |

Please return this *completed* form with
your annual business registration form.
Thank you for your cooperation.

2025

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 Renderings (including fat, oils and greases)

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.**