



# Finance Department

fdepartment@hpil.org  
Office: (630) 823-5790

## 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: \_\_\_\_\_

Village of Hanover Park Municipal Code, Chapter 94, Sec. 94-386 (c).  
"Push tax payments accompanied by tax returns prescribed by the village shall be remitted to the village on or before the 20<sup>th</sup> 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.*

Applicant Name	Signature	Title	Date
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**Please return completed form;**  
Via Email: [fdepartment@hpil.org](mailto:fdepartment@hpil.org)

Via Mail: \_\_\_\_\_ Village of Hanover Park  
Attention: Push Tax (Finance Department)  
2121 W. Lake Street  
Hanover Park, IL 60133