

ILLINOIS DEPARTMENT OF PUBLIC HEALTH  
 DIVISION OF ENVIRONMENTAL HEALTH  
 525 WEST JEFFERSON  
 SPRINGFIELD, ILLINOIS 62761  
 217-782-5830  
 217-785-0253 (Fax)

**MIGRANT LABOR CAMP LICENSE RENEWAL/ORIGINAL APPLICATION**

Section 4(d) of the Migrant Labor Camp Law requires that the licensee complete and submit this renewal application at least 60 days prior to occupancy of the camp and that the camp be ready for an occupancy inspection at least 30 days prior to the first day of occupancy. Occupancy shall not be allowed until issuance of a current license from this Department.

- I do not intend to reopen this camp.\*  
 The camp will be opened next year, but will not provide housing for 10 or more workers or their family members.\*  
 \*Please fill in the "CAMP INFORMATION" box below.

CAMP INFORMATION				LICENSEE/APPLICANT INFORMATION			
Camp Name:				Name:			
Address: (street, route, or P.O. box)				Address: (street, route, or P.O. box)			
	† (City)	† (County)	† (ZIP)		† (City)	† (State)	† (ZIP)
Phone #:	(      )			Phone #:	(      )		

\* If licensee is a partnership, provide the names and addresses of all partners. If the licensee is a corporation, the names and addresses of the principal officers of the corporation must be provided:


Anticipated Dates of Occupancy:	From:	To:
<i>Please advise the regional office indicated on the back of this form if your facility will not be ready for an occupancy inspection at least 30 days prior to the initial date of occupancy indicated above.</i>		
Approximate Number of Occupants:		

Changes to the camp: Prior to making any major changes to the camp, plans must be submitted to the central office at the address indicated above and approved before construction starts. If changes have been made since last year, please describe them below.

Signature of Applicant/Licensee:		Date:	
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Return this form with the \$100 annual licensure fee in the form of a check made payable to the Illinois Department of Public Health to the address indicated at the top of this form.

**IMPORTANT NOTICE**

This state agency is requesting disclosure of information that is necessary to accomplish the statutory authority under Ill. Rev. Stat., ch. 111 ½, par. 185.1 et seq. Disclosure of this information is mandatory.

ILLINOIS DEPARTMENT OF PUBLIC  
HEALTH REGIONAL OFFICES

OFFICES THAT ADMINISTER THE  
MIGRANT LABOR CAMP PROGRAM

**ROCKFORD REGION**

Illinois Department of Public Health  
Div. of Environmental Health  
4302 North Main Street  
Rockford, Illinois 61103  
815-987-7511  
Fax: 815-987-7822

**PEORIA REGION**

Illinois Department of Public Health  
Div. of Environmental Health  
5415 North University Street  
Peoria, Illinois 6161  
309-693-5360  
Fax: 309-691-2985

**EDWARDSVILLE REGION**

Illinois Department of Public Health  
Div. of Environmental Health  
22 Kettle River Drive  
Glen Carbon, Illinois 62034  
618-656-6680  
Fax: 618-656-5863

**MARION REGION**

Illinois Department of Public Health  
Div. of Environmental Health  
2309 West Main Street  
Marion, Illinois 62959  
618-993-7010  
Fax: 618-993-6840

**CHAMPAIGN REGION**

Illinois Department of Public Health  
2125 South First Street  
Champaign, Illinois 61820  
217-278-5900  
Fax: 217-278-5959

**WEST CHICAGO REGION**

Illinois Department of Public Health  
Div. of Environmental Health  
245 West Roosevelt Road, Building 5  
West Chicago, Illinois 60185  
630-293-6800  
Fax: 630-293-6908

**CENTRAL OFFICE**

Illinois Department of Public Health  
Div. Of Environmental Health  
525 West Jefferson Street, Third Floor  
Springfield, Illinois 62761  
217-782-5830  
Fax: 217-785-0253  
TDD: 1-800-547-0466  
(For hearing impaired use only)

