

# BUSINESS LICENSE APPLICATION

PLEASE CHECK ONE: New Application:  Change of Ownership:  Change of Location Address:

Saginaw Charter Township Clerk's Office  
4980 Shattuck Rd  
Saginaw, MI 48603

License Fee: \$10.00

Renewal Date: January 15<sup>th</sup> of every year  
Township Clerk (989) 791-9830

**\*\*MUST FILL OUT ATTACHED CHEMICAL SURVEY\*\***

**(APPLICATION NEEDS TO BE FILLED OUT COMPLETELY)**

BUSINESS NAME \_\_\_\_\_ STARTING DATE \_\_\_\_\_

BUSINESS ADDRESS \_\_\_\_\_ BUSINESS PH # \_\_\_\_\_

City State Zip  
FAX# \_\_\_\_\_ FED ID/MI TAX ID# \_\_\_\_\_

DESCRIBE NATURE & TYPE OF BUSINESS \_\_\_\_\_

BUSINESS OWNER'S NAME \_\_\_\_\_

CORPORATE PHONE# \_\_\_\_\_ **or** HOME PHONE# \_\_\_\_\_

CELL# \_\_\_\_\_ CORPORATE CONTACT PERSON \_\_\_\_\_

DRIVER'S LICENSE# \_\_\_\_\_ D.O.B. \_\_\_\_\_

BUSINESS OWNER HOME/CORPORATE ADDRESS \_\_\_\_\_

CITY/STATE/ZIP \_\_\_\_\_ E-MAIL ADDRESS \_\_\_\_\_

MANAGER NAME \_\_\_\_\_ CELL# \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_ CITY/STATE/ZIP \_\_\_\_\_

HOME PH# \_\_\_\_\_ DRIVER'S LICENSE# \_\_\_\_\_ D.O.B. \_\_\_\_\_

BUILDING OWNER'S NAME \_\_\_\_\_ PHONE# \_\_\_\_\_

BUSINESS ADDRESS \_\_\_\_\_ CITY/STATE/ZIP \_\_\_\_\_

STATUS OF OCCUPANCY: LC/PURCHASER \_\_\_\_\_  
DEED HOLDER \_\_\_\_\_ OCCUPIED SQ. FOOTAGE \_\_\_\_\_  
TENANT \_\_\_\_\_

HOURS/ DAYS OF OPERATION \_\_\_\_\_ # OF EMPLOYEES \_\_\_\_\_

ALARM COMPANY \_\_\_\_\_ PHONE# \_\_\_\_\_

TYPE OF ALARM: BURGULAR \_\_\_\_\_ FIRE \_\_\_\_\_ BOTH \_\_\_\_\_

SPRINKLERS: (Y/N) \_\_\_\_\_ FIRE EXTINGUISHERS (Y/N) \_\_\_\_\_ HEAT/SMOKE DETECTORS: (Y/N) \_\_\_\_\_

SIGNATURE OF APPLICANT: \_\_\_\_\_ PRINT NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

The undersigned hereby makes application for license and expressly agrees, if the license is granted to observe all of the provisions of the Charter and Ordinances of said Township now in force or which may hereafter be enacted, regulating such business (es) and that said license may be revoked upon due notice and proof of violation of any such provisions. It is also expressly understood and agreed that said license is **NOT TRANSFERABLE**, and the office of the Township Clerk must be promptly notified of any changes in ownership, location, or operation of such business (es).

## **OFFICE USE ONLY**

Business License # \_\_\_\_\_ License Printed \_\_\_\_\_

Zoning Classification \_\_\_\_\_

Comm. Development \_\_\_\_\_

Fire Department \_\_\_\_\_

Method of Payment: CHECK # \_\_\_\_\_ CASH \_\_\_\_\_