

## CITY OF ROCKWOOD 32409 FORT STREET ROCKWOOD, MICHIGAN PHONE (734) 379-9496

# **BUSINESS LICENSE APPLICATION**

DATE OF APPLICA	ΓΙΟΝ:		<del></del>			
OWNER'S NAME			HOME PHONE #			
OWNER'S HOME A	DDRESS					
	E OF MIC	BY MAKES APPLICATION IN THE CHIGAN, IN ACCORDANCE OF LEGISLES AT:				
NAME OF BUSINES	S:					
BUSINESS ADDRES	SS:					
HAVE YOU EVER E	NGAGE	D IN THIS BUSINESS?				
		ACE OF BUSINESS:				
		RENEWAL				
SIGNATURE:		531.52				
	PPROVED BY WAYNE COUNTY BOARD OF HEALTH:DATE					
APPROVED BY:						
BUILDING INSPECTO	R		DATE	7 110193 (004.00)		
ELECTRICAL INSPEC	TOR		DATE			
HEATING INSPECTOR			DATE	to a second		
PLUMBING INSPECTO	R		DATE			
FIRE INSPECTOR			DATE			
POLICE DEPARTMENT	Г		DATE			
WATER DEPARTMEN	r	111 11/42/2 (1977)	DATE			
ASSESSING DEPARTM	ENT	NEAR COLOR	DATE			
TAX DEPARTMENT		Albayers	DATE	40.000		

## **BUSINESS LICENSE OR CERTIFICATE OF OCCUPANCY**

## **HOME BUSINESS:**

- Charge \$50.00 for the Building Inspector when the application comes in for review.
- The Building Inspector will review the zoning ordinance to determine if it is a permitted use, and he will be looking to see if the home business will cause any traffic or parking issues for the neighbors.
- Have the applicant sign the zoning ordinance for the city file.
- Give the applicant a copy of the zoning ordinance.

#### **BUSINESS WITH A PERMITTED USE – SAME TYPE OF USE:**

- Charge \$50.00 for the Building Inspector when the application comes in for review.
- The Building Inspector will review the zoning ordinance to determine if it is a permitted use and the use is the same. If it is a permitted use and the use is the same, the inspectors and the Fire Department will need to inspect the building (see fees below). If it is a new use, a site plan is required. An Administrative Review might be possible if there are no significant changes (a site plan is still required with an Administrative Review).

## **BUSINESS WITH NO CHANGE IN USE (NEW OWNER):**

- Charge \$50.00 for the Building Inspector when the application comes in for review.
- The Building Inspector will make sure the use is the same and if any new equipment or alterations are made to the building. If a new sign or construction is needed, the applicant must contact the Building Department.
- Applicant to fill out an application for a business license \$25.00 charge.
- Send a copy of the application to the Fire and Police Departments for their signatures. The Building Inspector will be the only inspector that will need to sign this application.

#### **BUSINESS WITH A CHANGE IN USE:**

- The City Planner must review all business applications.
- Have applicant fill out an Application for Site Plan Review.

• Before starting the process, make sure to get money for the pass thru.

1901010 0001	DAY DAME OF DE DAME OF					
	FEE	PAY INSPECTOR	DATE OF INSPEC- TION	RE- INSP. FEE	DATE OF RE-INSP.	COMMENTS
BUILDING INSPECTOR	\$50.00	\$50.00		\$50.00		
ELECTRICAL INSPECTOR	\$40.00	\$32.00		\$40.00		
MECHANICAL INSPECTOR	\$40.00	\$32.00		\$40.00		
PLUMBING INSPECTOR	\$40.00	\$32.00		\$40.00		
FIRE CHIEF	N/C	Fire Chief needs to meet with the applicant, needs to know exactly what type of business is going in the building and will need to do an inspection after the business is in the building.				
POLICE CHIEF	N/C	arter the pasin	ess is in the bu	muing.		
TOTAL	\$170.00		_ 11-0-1-30			

A FURNACE HEAT EXCHANGE TEST IS NEEDED (THE MECHANICAL INSPECTOR WILL INDICATE IF NEEDED ON THE INSPECTION SHEET.) PERMITS MUST BE OBTAINED BY A CONTRACTOR FOR BUILDING, ELECTRICAL, MECHANICAL AND PLUMBING (UNLESS THE APPLICANT IS A LICENSED CONTRACTOR).



32409 Fort Street • Rockwood, Michigan 48173 734-379-5323 • Fax 734-379-5758

## **EMERGENCY CONTACT FORM**

The Rockwood Police/Fire Department is constantly updating the records that provide phone numbers to contact in case of an emergency.

Please complete the following information to allow immediate contact if an emergency or problem occurs at your business location.

NAME OF BUSINESS:	
ADDRESS:	
OWNERS NAME:	
HOME PHONE:	CELL PHONE:
BUSINESS PHONE:	
Please list two other names and phone nur emergency.	mbers that may be contacted in case of
NAME:	PHONE:
NAME:	PHONE:
DATE:	

Thank you for your assistance in this matter. If there are any changes in the above contacts, please notify the Police Department at the above phone number and we will be glad to update the list.