

CHARTER TOWNSHIP OF YPSILANTI

OFFICE OF COMMUNITY STANDARDS

Building Safety • Planning & Zoning • Ordinance Enforcement • Police Services

BUSINESS REGISTRATION APPLICATION

Non-Refundable Registration Fee - \$200.00

A business registration certificate shall be valid until the business establishment is transferred to a new owner or if the business expands its use to include uses not listed in the original application.

NAME OF BUSINESS

BUSINESS ADDRESS

OWNER /AGENT INFORMATION

OWNER / AGENT FULL NAME (PRINTED)

OWNER / AGENT BUSINESS ADDRESS

CITY

STATE

ZIP

OWNER / AGENT RESIDENCE ADDRESS

CITY

STATE

ZIP

PHONE

EMAIL ADDRESS

24-HOUR EMERGENCY CONTACT:

EMERGENCY CONTACT FULL NAME (PRINTED)

PHONE

EMAIL ADDRESS

PROPERTY OWNER INFORMATION

PROPERTY OWNER FULL NAME (PRINTED)

PROPERTY OWNER ADDRESS

CITY

STATE

ZIP

PHONE

EMAIL ADDRESS

IF YOU DO NOT OWN THE PROPERTY, A COPY OF YOUR LEASE OR OPTION TO PURCHASE MUST BE PROVIDED. ALL FINANCIAL AND OTHER SENSITIVE INFORMATION MAY BE REDACTED.

1. EXPLAIN THE NATURE AND KIND OF BUSINESS ESTABLISHMENT TO BE CONDUCTED: _____

BUSINESS REGISTRATION

PAGE 2

2. LIST THE NATURE AND CHARACTER OF GOODS AND MERCHANDISE TO BE SOLD OR SERVICES TO BE PROVIDED:

3. WILL ANY HAZARDOUS MATERIALS WILL BE STORED, KEPT OR USED AT THE BUSINESS ESTABLISHMENT PREMISES?
HAZARDOUS MATERIALS ARE THOSE CHEMICALS OR SUBSTANCES DEFINED AS SUCH IN THE INTERNATIONAL FIRE
CODE ADOPTED BY REFERENCE IN SECTION 30-26 OF THE TOWNSHIP CODE OF ORDINANCES.

_____ NO _____ YES IF YES, LIST ALL HAZARDOUS MATERIALS: _____

SIGNATURE OF APPLICANT

PRINTED NAME OF APPLICANT

DATE



ZONING COORDINATOR

___ APPROVED ___ DENIED

DATE

COMMENTS: _____

BUILDING OFFICIAL

___ APPROVED ___ DENIED

DATE

COMMENTS: _____

FIRE SPECIALIST

___ APPROVED ___ DENIED

DATE

COMMENTS: _____

