

APPLICATION FOR BUSINESS REGISTRATION

City of Allen Park

Michael I. Mizzi – City Clerk

16630 Southfield Road, Suite 3100, Allen Park, MI 48101

Business Information

Name of Business* _____

Address of Business* _____

Type of Business* _____

Type of Goods or Services to be Sold* _____

Website _____

Business Telephone Number* () _____ Extension if applicable _____

Fax Number () _____ E-MAIL _____

*Required information

1) Name of Owner (s) _____ Home Telephone () _____

Home Address _____

2) Name of Owner (s) _____ Home Telephone () _____

Home Address _____

Are there any of the following on premises;

Juke Box, Pool Tables, Mechanical/Amusement Devices. Y N

In case of Fire or Police emergency after closing hours, person or persons to be contacted who are in possession of keys:

Name _____ Telephone Number _____

Name _____ Telephone Number _____

APPLICANT'S

SIGNATURE _____



For Clerks office use only

AMOUNT OF FEE \$70 DATE PAID _____ STAFF INITIALS _____

RECEIPT NO. _____ LICENSE NUMBER _____