

**FRENCHTOWN CHARTER TOWNSHIP
APPLICATION FOR CERTIFICATE OF OCCUPANCY
2744 VIVIAN ROAD, MONROE, MI 48162
PHONE: 734.242.5900 EXTENSION #4
FAX: 734.242.1634**

Application Date: _____

Address for which Certificate of Occupancy is requested: _____

Name of Business: Intended to occupy space: _____

Detailed Description of Business Proposed to Occupy Building: _____

Type of Certificate of Occupancy Requested (full or temporary) _____

Property Owner's Name: _____

Property Owner's Address: _____

Property Owner's Telephone Number: _____

Applicant's Name: _____

Applicant's Relationship to Property Owner (i.e. Lessee, Tenant, etc.): _____

Indicate whether Applicant is an Individual, LLC, Corp. and if Applicant is an entity indicate state where incorporated or organized _____

Applicant's Resident Agent's Name, Address and Phone Number: _____

Applicant's Telephone Number: _____

Indicate whether Owner or Applicant is indebted to Township for any fees, charges, taxes or other indebtedness or whether there are outstanding sums owing as to Property? _____

If yes please explain: _____

I hereby state and affirm that the information above is true and correct.

Owner's Signature: _____

Print Name and Title: _____

Applicant's Signature: _____

Print Name and Title: _____

Building Official Approval: (Full or Temporary) _____

Fire Inspector Approval: (Full or Temporary) _____