

General Business License Registration Application



Business Name:		Business owner Phone #	
Physical Address:		Additional Information:	
Mailing Address (if different than physical address):		Type of Business:	
City:			
State:	Zip:		
Email Address:			
Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Non-Profit <input type="checkbox"/>		Sign: <input type="checkbox"/> Yes <input type="checkbox"/> No	# of stories:
Federal Tax ID #:		# of Employees:	# of Handicap Parking Spaces:
Business Owner Name:		Ordinance 434 Regulations: (1) No license shall be assigned, sold or transferred, nor shall any license authorize any person other than the applicant to conduct business under such license. (2) The applicant or licensee shall have a duty to notify the City Clerk of any changes in the information contained in an application which is pending or which is the basis for issuance of a license. (3) All licenses shall be prominently displayed on the business premises at all times. (4) No person shall add to, alter, deface, forge, or counterfeit any license which has been issued by the City. (5) All licensees shall comply with all applicable City and State Laws.	
Building Owner Information (If different from business owner)			
Name:			
Address:			
City:			
State:			
Home Phone:			
Business Phone:			
Cellular Phone:			
Email Address:			

Signature & Date:

By signing this application, I hereby swear or affirm that I am the Owner/Agent/Operator of the above property and that the information contained on this application is true.

Fees: Registration and Inspection Fee is \$150.00 per business. Fees not paid **within 15 days after** commencement of business will be subject to a 50% fine of the business license. This license does not apply to home based businesses.

***\$60 Re-inspection fee Failure to renew after expiration/15 days after opening/not obtaining: \$225**

OFFICE USE ONLY	Date Application Received: _____
	Date & Amount Paid: _____
	Check No. CC Payment or Cash: _____

INSTRUCTIONS

1. Complete a separate form for each business to be registered.
2. Please make checks payable to: **City of Montrose**
3. Mail completed application and payment to:
4. Review Checklist-address any issues
5. Schedule an inspection (810) 639-6168 ext. 6
Or email: permits@cityofmontrose.us

City of Montrose
Attn: General Business License
139 S. Saginaw St.
Montrose, MI 48457

City of Montrose - General Code Compliance Inspection

Exterior
Name of business shall be provided on the front of the building or on a sign
Address shall be posted on the front of the building. Numbers shall be at least 4" in height, with a minimum of
No combustible storage within 15 feet of a building
Dumpsters shall be kept in approved enclosures
No abandoned or unlicensed vehicles
Posted fire lanes must always be kept clear
ADA parking provided and posted
No sheds, containers, storage or temporary structures
Fences are in good condition
Parking, walkway, alley is properly lit
Exterior is in a "maintained" condition.
Lawn is mowed, trees and bushes trimmed, leaves cleaned up/snow is removed
No loose garbage
No harborage of pests
No chipped or peeling paint
No broken glass

Interior
Occupant load posted
Doors and exits are not blocked and do not require a key for exiting
Fire extinguishers shall be provided at each exit and 75 feet in between extinguishers (maximum). Fire extinguisher size and type is determined by occupancy type and building code
Fire extinguishers shall be installed 42 inches from finished floor to hanger
Fire suppression systems shall be inspected and tested annually by a certified contractor
Fire alarm systems shall be inspected and tested annually by a certified contractor
Storage height is limited to 12 feet if the building does not have a fire suppression system
Emergency lighting is required along the entire path of egress. A photometric plan may be required
Exit lighting shall always be illuminated with a back-up system
Extension cords may not take the place of fixed wiring. Extension cords are intended for temporary use
Compressed gas cylinders shall always be secured
Supply and drain plumbing shall have proper air gap, backflow or other sanitary protection device and
Stairs, rail, and guard rails are code compliant
ADA compliant restroom(s)
Hygiene products are provided
Building is kept neat and clean
No potential for the harborage of pests
No chipped or peeling paint
No broken glass

This list is not meant to be all inclusive. It simply highlights some of the items that the inspector will be looking for.

Should you have any questions regarding this matter, please contact me at the City of Montrose Offices at (810) 639-6168 ext. 6 or via email at permits@cityofmontrose.us

Respectfully,
Building Official, Matthew Leoni
139 S. Saginaw Street
Montrose, MI 48457
(810) 639-6168 ext. 6
permits@cityofmontrose.us