



## MUNICIPAL OFFICES

David Hanselman  
Mayor

John B. Michrina  
City Manager-Clerk

### **REQUIREMENTS FOR OBTAINING A BUSINESS LICENSE**

The following is a list of requirements for obtaining a Business License in the City of Center Line.

1. An application for a Business License must be filed with the City Clerk's Office. You will be notified in writing upon approval of the license. A fee of \$100 will then be due.
2. A criminal history waiver must be completed for **each** person listed on the application.
3. An application for a Certificate of Occupancy must be filled with the Building Department and the inspection must be completed before the Business license application can be approved. Fee for Certificate of Occupancy: \$300 for businesses under 50,000 square feet. \$400 for businesses over 50,000 square feet.
4. An Electrical Permit must be obtained for any electrical repairs or replacements. This permit must be obtained by a licensed contractor.
5. A Plumbing Permit must be obtained for any plumbing repairs or replacements. This permit must be obtained by a licensed contractor.
6. A Building Permit must be obtained for any interior or exterior building alterations.
7. If food will be offered for sale, a permit must be obtained from the Macomb County Health Department.
8. All inspections must be completed and departmental approvals received **prior** to approval of a Business License and Certificate of Occupancy.

**A business MAY NOT BE OPENED until a Business License has been issued.**

If there are any questions, contact the City of Center Line at 757-6800.

Roger A. Pinch  
Chief Building Inspector

**CITY OF CENTER LINE  
CERTIFICATE OF OCCUPANCY APPLICATION**

---

---

**PLEASE READ THE PARAGRAPH'S BELOW, CONCERNING YOUR INSPECTION**

**RESULTS WILL BE GIVEN IN WRITING WITHIN 7 TO 10 DAYS  
NO INFORMATION WILL BE GIVEN OVER THE PHONE OR BY FAX**

Due to the volume of inspections, we are unable to schedule specified times. Inspections are performed between 9:00 A.M. and 4:00 P.M. on Tuesday and Thursday of each week, unless otherwise notified.

**PLEASE NOTE!!** The fee includes **one (1)** re-inspection, however, it does **not** include any permit fees, should there be any required by the inspection results. Fee by square footage: \$300 for up to 50,000 square feet, \$400 for over 50,000 square feet.

There will be two (2) inspectors that will inspect the property. The inspectors do **not** travel together. Persons unable to be present during the inspection may leave a key with City Hall or install a lockbox and leave the combination with City Hall. **\*\*Inspectors do not call before going to a property for inspection.**

---

Building Address: \_\_\_\_\_

Business Name: \_\_\_\_\_

Building Use: Comm: \_\_\_\_\_ Lt. Indus.: \_\_\_\_\_ Heavy Indus.: \_\_\_\_\_ Other: \_\_\_\_\_

Explain Use: \_\_\_\_\_

Applicant/Tenant Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

Telephone #: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Driver's License# (of applicant) \_\_\_\_\_

(A copy of the applicant's driver's license is also needed)

Building Owner: \_\_\_\_\_

Owner address: \_\_\_\_\_

Total Square footage/Tenant Usage: \_\_\_\_\_ No. of Floors: \_\_\_\_\_

Width/Length: \_\_\_\_\_ Max. Number of Employees: \_\_\_\_\_ Largest Single Shift: \_\_\_\_\_

Date: \_\_\_\_\_ Applicant's Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

---

**OFFICE USE ONLY:**

DATE OF INSPECTION \_\_\_\_\_ RECEIPT # \_\_\_\_\_

Circle Fee:	\$300	\$400
	0-50,000 sq. ft.	Over 50,000 sq. ft.



## MUNICIPAL OFFICES

David W. Hanselman  
Mayor

John B. Michrina  
City Manager-Clerk

I, the undersigned, authorize **City of Center Line** to conduct a criminal history file check by name and identifiers to determine the existence of any arrest resulting in conviction.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ State: \_\_\_\_\_

Name of Business: \_\_\_\_\_

Business Address: \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

Date: \_\_\_\_\_



## MUNICIPAL OFFICES

David W. Hanselman  
Mayor

John B. Michrina  
City Manager-Clerk

I, the undersigned, authorize **City of Center Line** to conduct a criminal history file check by name and identifiers to determine the existence of any arrest resulting in conviction.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ State: \_\_\_\_\_

Name of Business: \_\_\_\_\_

Business Address: \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

Date: \_\_\_\_\_



## MUNICIPAL OFFICES

David W. Hanselman  
Mayor

John B. Michrina  
City Manager-Clerk

I, the undersigned, authorize **City of Center Line** to conduct a criminal history file check by name and identifiers to determine the existence of any arrest resulting in conviction.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ State: \_\_\_\_\_

Name of Business: \_\_\_\_\_

Business Address: \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

Date: \_\_\_\_\_



## MUNICIPAL OFFICES

David W. Hanselman  
Mayor

John B. Michrina  
City Manager-Clerk

I, the undersigned, authorize **City of Center Line** to conduct a criminal history file check by name and identifiers to determine the existence of any arrest resulting in conviction.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ State: \_\_\_\_\_

Name of Business: \_\_\_\_\_

Business Address: \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

Date: \_\_\_\_\_

