



BUILDING DEPARTMENT

Robert Binson
Mayor

Ronald Lapham
Mayor Pro-Tem

Nicholas Chakur
Council Member

Mary Hafner
Council Member

James Reid
Council Member

Roger Pinch
Chief Building Inspector

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



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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: _____



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