MAPLE GROVE TOWNSHIP 17010 LINCOLN ROAD NEW LOTHROP, MI 48460 PHONE (989) 845-6155 FAX (989) 845-3554

www.maplegrovetownship.org

Al	PPLICATION FOR	BUSI	NESS	INI	MAPLI	GRO	VE	TOWNS	SHIP	
BUSINESS NAME	DATE						DATE			
BUSINESS MAIL ADDRESS										
BUSINESS PROPERTY ADDRESS										
BUSINESS PHONE			BUSINESS FAX							
OWNER'S NAME										
OWNER'S MAIL ADDRESS										
OWNER'S PHONE					EMAIL					
BUSINESS WEBSITE										
BUSINESS EMAIL					EMERG	ENCY PHO	PHONE NO.			
TYPE OF BUSINESS (please check)	DINING	FINA	NCIAL		GAS STATION		HEALTH S	ERVICES		
LODGING	SERVICE		RETAIL			INDUSTR	DUSTRIAL/MANUFACTURING			
DESCRIBE BUSINESS/SERVICE										
	 									
HOURS OF OPERATION		NUMB					IUMBER OF	JMBER OF EMPLOYEES		
INSURANCE COMPANY NAME										
SIGNATURE									DATE	
BY SIGNING THIS APPLICA	ATION YOU HEREBY A	AFFIRN	1 ТНАТ	THE	FOREG	DING A	RE F	ULL AND	TRUE STATEME	NTS.
APPROVALS	☐ BUILDING APPROVAL		☐ FIRE APPROVAL ☐ ZONING APPROVAL							
	☐ DPW APPROVAL				TOWNS	HIP MAN	IAGEI	3		

COMPLETE AND RETURN THIS FORM WITH THE \$10.00 FEE NO LATER THAN DECEMBER 15th PLEASE

COMPLETE ALL FIELDS.

BUSINESS LICENSE NUMBER ASSIGNED:):	BER ASSIGNE	NUMBER	LICENSE	BUSINESS