



Business License Application

LINCOLN CHARTER TOWNSHIP | VILLAGE OF STEVENSVILLE

Reference Municode Chapter 20

Ordinance No. 080922-2



Business Information:

Name: _____

Address: _____

City/State/Zip : _____

Business Phone: _____

Email Address: _____

Mailing Address (if different): _____

Contact Information:

Name: _____

Phone: _____

Name: _____

Phone: _____

Fax Number: _____

Please indicate below:

- ☐ Individual Applicant
- ☐ Partnership Applicant
- ☐ Corporation Applicant
- ☐ LLC Applicant

List selected applicant information:

Owner/s _____

Address: _____

City/State _____

Phone: _____

List the applicant's State or Federal Tax ID Number: _____

Parcel Number: _____

Additional information may be required; Lincoln Charter Township will contact you.

Please select one from below that applies to your business:

- ☐ Home Based or up to 400 square feet of office space.\$25.00
- ☐ Residential Group Home\$35.00
- ☐ 401 square feet - 3,000 square feet\$65.00
- ☐ 3,001 square feet - 6,000 square feet\$75.00
- ☐ 6,001 square feet - 10,000 square feet\$115.00
- ☐ 10,001 square feet - Above.....\$165.00
- ☐ Hotels/Motels Under 50 Rooms.....\$75.00
- ☐ Hotels/Motels Over 50 Rooms.\$165.00
- ☐ Church / Exempt / No Common Area.....No Charge

Make check payable to Lincoln Charter Township. Mail check along with application to Lincoln Charter Township, PO Box 279, Stevensville, MI 49127.

Applicant's signature verifying that any inaccurate or erroneous information on this application or failure to abide with any requirements of the Licensing Ordinance including any approved rules of operation, shall be grounds for revocation of the license:

Signature: _____

Date: _____

#