



KOCHVILLE TOWNSHIP NEW BUSINESS LICENSE APPLICATION

5851 MACKINAW ROAD, SAGINAW, MI 48604-9767

PH: (989) 792-7596 FAX: (989) 793-7498 kochvilletwp.com

2021

LICENSE FEE SCHEDULE

\$25.00 IF PAID BY APRIL 1ST

\$50.00 IF PAID BY MAY 1ST

\$100.00 IF PAID BY JUNE 1ST - WARNING: AFTER JUNE 1ST - DEFAULT

NEW BUSINESSES - \$25.00

TOWNSHIP ORDINANCE SEC. 110.04 - "No person may commence or continue a business, as herein defined, within the township without having first obtained a township license therefore as hereinafter provided and without maintaining the license in current effect during any business operation or activity". PENALTY: FAILURE TO OBTAIN BUSINESS LICENSE - CIVIL INFRACTION - \$250.00 FINE + \$100.00 LIC. FEE

THIS APPLICATION MUST BE COMPLETELY FILLED OUT WITH ALL APPLICABLE INFORMATION, OR THE APPLICATION CANNOT BE PROCESSED

BUSINESS INFORMATION:

BUSINESS FULL NAME
BUSINESS ADDRESS PHONE FAX
BUSINESS WEB SITE EMAIL ADDRESS
OWNERS FULL NAME PHONE/CELL #
OWNERS ADDRESS CITY STATE ZIP
MANAGERS NAME PHONE/CELL #
MANAGERS ADDRESS CITY STATE ZIP
NATURE AND TYPE OF BUSINESS

BUILDING INFORMATION:

BUILDING OWNER PHONE/CELL #
BUILDING SQUARE FOOTAGE (IF LEASED INCLUDE SIZE OF LEASED AREA ONLY) SQ. FT.
WALL CONSTRUCTION FLOOR CONSTRUCTION
NUMBER OF FLOORS ROOF CONSTRUCTION
BASEMENT: YES NO IF YES, LIST STAIRWELL LOCATION
ROOF HATCH LOCATION (IF AVAILABLE)

BUILDING INFORMATION CONTINUED:

MEZZANINE/LOFT AREAS YES NO IF YES, LIST LOCATION
BURGLAR ALARM YES NO FIRE ALARM YES NO
ALARM COMPANY PHONE NUMBER
ALARM PANEL LOCATION
FIRE SUPPRESSION SYSTEM YES NO IF YES, FIRE DEPT CONNECTION LOCATION...
STAND PIPE LOCATION



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AFTER HOURS CONTACT INFORMATION (REQUIRED):

- 1. _____ PHONE/CELL # _____
- 2. _____ PHONE/CELL # _____
- 3. _____ PHONE/CELL # _____

HOURS OF OPERATION _____ AM TO _____ PM DAYS PER WEEK _____ # EMPLOYEES _____

IS THIS A SEASONAL BUSINESS Y N IF YES PLEASE LIST WEEKS OR MONTHS OF OPERATION

HOME OCCUPATION INFORMATION:

IS THIS BUSINESS A HOME OCCUPATION? YES NO IF YES, DOES THIS BUSINESS REQUIRE OR UTILIZE DELIVERIES FROM VEHICLES OVER ONE TON CAPACITY? YES NO FREQUENCY OF DELIVERIES _____

ALSO COMPLETE THE ATTACHED SUPPLIMENTARY APPLICATION FOR HOME OCCUPATIONS

THE UNDERSIGNED HEREBY MAKES APPLICATION FOR LICENSE AND EXPRESSLY AGREES, IF THE LICENSE IS GRANTED TO OBSERVE ALL OF THE PROVISIONS OF THE TOWNSHIP ORDIANCES OF KOCHVILLE NOW IN FORCE OR WHICH MAY HEREINAFTER BE ENACTED, REGULATING SUCH BUSINESS AND THAT SAID LICENSE MAY BE REVOKED UPON DUE NOTICE AND PROOF OF VIOLATION OF ANY SUCH PROVISIONS. IT IS ALSO EXPRESSLY UNDERSTOOD AND AGREED THAT SAID LICENSE IS NOT TRANSFERRABLE AND KOCHVILLE TOWNSHIP MUST BE PROMPTLY NOTIFIED OF ANY CHANGES IN OWNERSHIP, LOCATION, OR OPERATION OF SUCH BUSINESS(S).

PLEASE PRINT AND SIGN YOUR NAME:

Printed Name	Signature	Date
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Small Business Taxpayer Exemption – MCL 211.9o

The small business taxpayer personal property exemption provides a complete exemption from personal property tax for industrial or commercial personal property when the combined true cash value of all industrial personal property and commercial personal property owned by, leased by or in the possession of the owner or a related entity claiming the exemption is less than \$80,000 in the local tax collecting unit and the property is not leased to or used by a person that previously owned the property or a person that, directly or indirectly controls, is controlled by, or under common control with the person that previously owned the property. **Form 5076 must be filed with the local tax collecting unit no later than February 20.**

- https://www.michigan.gov/taxes/0,4676,7-238-43535_72736-358292--,00.html
- https://www.michigan.gov/documents/treasury/5076f_493854_7.pdf

KOCHVILLE OFFICE USE ONLY

DATE RECEIVED _____
 RECEIPT # _____
 METHOD OF PAYMENT: CASH/ CHECK/ OTHER
 CHECK # _____
 AMOUNT PD \$ _____

CODE ENFORCEMENT _____
 FIRE DEPARTMENT _____
 BUILDING DEPT _____
 TREASURER’S OFFICE _____

BUSINESS LICENSE NUMBER: _____
DATE ISSUED: _____