Print

Reset Form

BUILDING DEPARTMENT

One South Huron ✦ Ypsilanti, MI 48197
Phone: (734) 482-1025 ✦ Fax: (734) 483-7444
www.cityofypsilanti.com

Change of use: $150 ❑

No change of use: $75 ❑

Business Occupancy Application

Business Owner Information:			
Name:		Phone:	
Home Address:	City:	State:	Zip:

Property Owner Information:			
Name:		Phone:	
Home Address:	City:	State:	Zip:

Application to conduct the following business: ❑ Permanent use ❑ Temporary use

Business Information:			
Business Name:		Phone:	
Business Address:	City: Ypsilanti	State: MI	Zip:
Detailed description of proposed use:			
For temporary use – Proposed dates: From _____ to _____			

Business floor plan/layout required (use reverse of application or a separate sheet of paper):
Show merchandise racks, counters, seating arrangements, aisles, restrooms, exits, office(s), storage, etc., including width measurements of doorways and aisles.

Food establishments: Washtenaw County Health Department occupancy inspection and approval is required prior to issuance of City Certificate of Occupancy Permit by this office.

Applicant Signature: _____ Date: _____

*****Office Use Only*****

Change of use? Yes ❑ No ❑ Zoning District: _____

Site plan required? Yes ❑ No ❑

Previous use: _____ Year(s): _____

Building Official/Inspector: _____ Date: _____

Fire Marshal/Inspector: _____ Date: _____

City Planner/Zoning Admin: _____ Date: _____

Inspection Date/Time: _____

Notes: _____

_____

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