

21 E. Church Street Lake Orion, MI 48362 Phone: 248-693-8391

Fax: 248-693-5874 www.lakeorion.org

BUSINESS INFORMATION FORM

SITE ADDRESS									
Business Name:									
							\/F0	Date	T
Are you doing any exterior or interior structural alterations, changing the use of the site or changing the building floor plan? If YES, please see the zoning administrator for the appropriate the structural alterations.							YES Opriate per	NO mit appl	lications
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Address:	Otros et Autoria						11-2011		
	Street Address						Unit #		
	City				Star	te	ZIP Co	de	
Phone:		,	Alternate Ph	one:					
Email:									
Specify Type of Business: (Retail, Restaurant, Service, Storage, Assembly or Explain Other)									
Business Description in Detail:									
Business Owner			Cell						
Name:		Emergency Phon	e: Phone:			Email:			
Property Owner (Landlord):		Street Address, City, State, Zip			Phone:				
Business Hours of Operation:		•	1	Square	e Footage ied:				
Describe Number of Employees (full-time, part-time, include per shift & weekends)					Alarm Compa & Phone:	ny			
Emergency Contact Information									
Contact Name #1:			hone:						
Contact Name #2:			hone:						
Contact Name #3:			hone:						
Please list any chemica chemical listed.	als that are stored on site	e and their location within	the building.	Submit N	ASDS to Orion To	wnship Fire	Departmer	nt for ea	ch
Information Submitted by Title Phone									
OFFICE USE ONLY									
Date Received: Cc: Police Dept., Fire Dept., Street File									
1. 4.1.4 2 op., 1. 4.2 op., 5.1.4 10									
Update Reason:	New Business	New Eme	rgency Contact		Nev	v Owner			

Business Information Form 10/22/2015