

**CARROLLTON TOWNSHIP
BUSINESS LICENSE APPLICATION
1645 Mapleridge Rd, Saginaw, MI 48604-1798 (989) 754-4611 ex. 104**

Expiration Date:	March 31		
Fee:	New License	\$10.00	Receipt Number _____
Renewal:	If Paid by March 31	\$10.00	Amount Paid _____
	If Paid by April 30	\$20.00	
	If Paid after April 30	\$35.00	
If you are operating a business in Carrollton Township and have not renewed your business license by May 31, you will be subject to civil infraction citations.			

Business Name _____ Business Phone _____

Business Address _____ Home Occupation Yes No

Business Mailing Address _____ Home/Cell/Pager Phone _____

City _____ Zip _____

Owner Name _____ Owners Address _____

City _____ Zip _____ Type of Business _____

Number of Employees _____ Days of Operations _____ Hours of Operation _____

Seasonal or Year Round _____ If Seasonal, List Time of Year _____

If business will be run out of your home, a home occupation form (available at Township Office) will need to be attached to this application.

Signature Title Date

EMERGENCY INFORMATION:
Contact person (other than business owner) and his/her phone number in case of fire or other emergency:

Building Owner Name _____ Phone _____

Security Alarm Company and Phone _____

OFFICE USE ONLY									
Zoning Classification _____	Delinquent Taxes	Yes	No	Home Occupation	Yes	No			
Special Use Permit	Yes	No	Variance	Yes	No	Non Conforming Use	Yes	No	
Approval: Zoning Administrator _____				Date _____					