

2024 Village of Birch Run & Birch Run Township Business License Application



	Local Business Name:					
LUCAL	Type of Business:					
	Local Address:	_ Suite #:	P.O. Box:			
	Local Contact/Phone:					
	Local Contact Email:					
ATE	Corporate Name:					
	Corporate Address:		P.O. Box:			
OR	City: S	State:	Zip:			
CORPORAT	Corporate Contact/Phone:					
	Corporate Contact Email:					
PAYMENT			Please remit payment to:			
	 [] New Business License with Alarm Permit* \$18 [] New Business License (no alarm) \$13 		Village of Birch Run 12060 Heath St. P.O. Box 371 Birch Run, MI 48415			

Business License Ordinance No. 5-82, Section 4, as amended, states: "No person may commence or continue a business, as herein defined, within the Village without having first obtained the Village license therefore as hereinafter provided and without maintaining such license in current effect during any business operation or activity." Copy of ordinance is available upon request.

SEND FUTURE RENEWAL APPLICATIONS TO: (SELECT ONE)

[] Local Business [] Corporate Address [] E-mail:

Physical Certificates will be delivered to the local business to display



Emergency Contact & Alarm System Information

Please update the emergency contact and alarm system information for the Birch Run Police Department.

	CONTACT	Business Name:		Phone:			
IERGENC		Emergency Contac	t Name/Title:				
		Emergency Contac	t Phone:				
		Backup Emergency	Contact Name/Title:				
EN		Backup Emergency	Phone:				
	I	*All businesses acquiring an Alarm Permit must fill out Alarm System Information					
RN	SYSTEM	Property Owner:		Phone:			
LA		Alarm Company: _		Phone:			
V	\mathbf{N}	Do you	at your business? [] Yes	[] No			
		Alarm Ordinance #3-90 requires annual licensing of Alarm Systems in the Village of Birch Run and prescribes fines for false alarm violations. The cost of false alarms after three in a calendar year is billed to you as provided in ordinance 17.010, section b. Copy of ordinance is available upon request.					
		I, as applicant of the above-described business, have read this application and agree to abide by the ordinances adopted by Birch Run Township and the Village of Birch Run.					
	SIGNATURE OF APPLICANT / TITLE			DATE			
		FOR OFFICE USE ONLY					
		License #: 24	Date Received:	Business Group:			
		Fee Paid: \$	Check/Money Order #		$_$ \Box Cash \Box CC		