



# City of Ecorse Business License Application

Name of Business: \_\_\_\_\_

Business Owner: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Owner Address: \_\_\_\_\_

Fax Number: \_\_\_\_\_

Owner Address2 \_\_\_\_\_

Email Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Driver License #: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Social Security #: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

BACKGROUND CHECK AVAILABLE AT [WWW.MICHIGAN.GOV/ICHAT](http://WWW.MICHIGAN.GOV/ICHAT) (\$10.00)

Doing Business As: \_\_\_\_\_

This business application must be approved before a business license can be issued. No business activity can be conducted until a business license has been issued. Incomplete applications will not be processed and returned to the applicant. The business license year begins May 1<sup>st</sup> and ends April 30<sup>th</sup> of the following year. It is the responsibility of the applicant to maintain an active license by renewing the license each year. Failure to do so will lead to extensive fees and possible termination of license.

Applicant Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Official Use Only**

Public Safety Dept: \_\_\_\_\_

Date: \_\_\_\_\_

Building Dept: \_\_\_\_\_

Date: \_\_\_\_\_

City Clerk: \_\_\_\_\_

Date: \_\_\_\_\_

City Treasurer: \_\_\_\_\_

Date: \_\_\_\_\_