



APPLICATION FOR BUSINESS LICENSE

Welcome! We are excited that you have decided to make Berkley your home!

Applications for a Business License shall be submitted to Berkley Building Department. They can be dropped off at City Hall, 3338 Coolidge Hwy, Berkley, MI 48072 **OR** can be emailed to building@berkleymich.net.

Type of Business License

- New Transfer Locations Change in Ownership

If relocating, note the current address: _____

Name of Business: _____

Business Address: _____

Parcel ID: _____ Zoning District: _____

Is the subject property located in the DDA? Yes No

Property Information

Applicant / Business Owner Name: _____

Mailing Address: _____

Phone: _____ Email: _____

Type of Business: Co. Inc. LLC Partnership Other _____

Does the applicant own or lease the property / building? Own Lease

Business Owner's Driver's License #: _____

Description of Business: _____

Days and Hours of Operation: _____ # of Employees: _____

Method of Refuse Collection: _____

Sq. ft. of property: _____ Sq. ft. of building: _____

OFFICE USE ONLY			
Fees: \$200 New Business	\$100 Transfer of Location or Change in Ownership		
Cert. # _____	Date Received: _____	Sidwell _____	
Amount \$ _____	Zoning _____	Land Use Category _____	

Property Owner Name: _____

Address: _____

Phone: _____ Email: _____

Emergency Contact (First listed will be the first contact in an emergency)

	Name	Telephone	City
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

Scope of Work

- New Development/Construction
- Interior Alterations
- Other Site Improvements, including, but not limited to, parking area, landscaping, drainage
- Move in and Operate As-Is
- Exterior, Façade Alterations

If other approvals from State, County, or other regulatory agencies are required for the business to operate, please submit with the application or include written documentation that you are in process of securing the required approvals and when those approvals are expected from each agency.

Business Vehicles

If there are to be commercial vehicles associated with the business stored on-site, please provide the following information:

Vehicle Year, Make, Model, Color	License #

Parking

Location of parking area: _____ Number of Parking Spaces: _____

Is the business located within 500 ft. of a municipal parking area? Yes No

Bicycle Racks on Site: No Yes Location: _____

Parking shall be verified during site inspection. On-street parking spaces shall not be counted to satisfy the parking requirement. Shared parking agreements may be accepted.

Do you have a shared parking agreement with a nearby business? Yes No

If yes, please submit the agreement with your application or note the date as to when we should receive it. _____

Submit with Application

Aerial of the property, showing locations of the building, sidewalks, parking area, utilities, exterior lighting, etc.

Internal layout of the building, clearly label all rooms, tables and chairs, counters, etc.

Shared parking agreement, if applicable.

Check all that apply:

I am interested in receiving the newsletter and email updates from the City of Berkley.

I am interested in receiving the newsletter and email updates from the Berkley Downtown Development Authority.

I am interested in receiving the newsletter and email updates from the Berkley Area Chamber of Commerce.

Endorsement

I hereby acknowledge that all information contained herein is true and accurate to the best of my knowledge. I acknowledge that if it is determined that the business license may be revoked if the information provided is proven false.

Applicant Name (print)

Applicant Signature

Date

Property Owner Name (print)

Property Owner Signature

Date

APPLICANT ACKNOWLEDGEMENT

Before you submit your application, ***please read, review and initial*** each item below and acknowledge that you have been informed of City Codes, Ordinances, policies, procedures, reviews and inspections that pertain to opening a business in Berkley.

_____ An application for a business license **must** include an aerial of the property, showing locations of the building, sidewalks, parking area, utilities, exterior lighting, etc. **and** a rendering of the internal layout of the building with all rooms and fixtures clearly labeled.

_____ The submission of a business license application **does not** constitute the right to occupy a commercial structure or conduct a business until receipt of a Business License following an inspection of the premises by the City of Berkley and express approval to occupy.

_____ The Community Development Director will review and certify that the subject property is zoned for the proposed use and sufficient parking is provided to support the business.

_____ Application fees shall be paid to the City of Berkley Building Department, **after** review by the Community Development Director, but *before* any inspections can be scheduled.

_____ That prior to occupancy and/or use, the Building Official and Fire Inspector have reviewed and certified to the Building Department that the subject property has complied with all applicable City Codes and Ordinances.

_____ That upon the completion of required inspections, the applicant is responsible to contact the Building Department and secure the list of any or all City Code and Ordinance violations.

_____ That the applicant, upon compliance with the correction(s) of said City Codes and Ordinances, is responsible to contact and schedule a re-inspection of the subject property prior to the issuance of a Business License and/or the occupancy and use of said premises in any manner.

_____ That the applicant does herein acknowledge that no signage or advertising upon the premises shall be erected, installed, or otherwise permitted without the express approval of the City and with full knowledge that the violation of the Sign Ordinance will result in the issuance of citation.

_____ That the applicant may occupy said premises and conduct a business therein only **after** receiving a signed and duly executed Business License from the Building Official.

The applicant has reviewed and acknowledges the above steps that must take place prior to occupying the subject property and prior to conducting business on the premises.

Name of Business _____ Property Address _____

Applicant Name (Print) _____ Applicant Signature _____ Date _____

**BERKLEY PUBLIC SAFETY DEPARTMENT
FIRE MARSHAL DIVISION**

Name of Business: _____

Applicant / Business Owner Name: _____

Business Address: _____

Phone: _____ Email: _____

Property Owner Name (*if different*): _____

Address: _____

Phone: _____ Email: _____

Emergency Contact (First listed will be the first contact in an emergency)

	Name	Telephone	City
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

Fire Protection Features

Sprinkler System No Yes

Automatic Fire Alarms No Yes

Provide Location: _____

Fire Extinguishers No Yes

Provide Location: _____

Alarm Company: _____

Name: _____ Phone: _____

Chemical Survey

Information: This survey is requested to determine the quantity of specific chemical groups used, produced or stored in your facility. Fire Chiefs are required to collect chemical data under the Michigan Occupational Safety and Health Act (MIOSHA), P. A. 154 of 1974, as amended, and the Fire Prevention Code, PA 207 of 1974, as amended.

Instructions: Indicate below whether your site uses or produces any of the chemical types listed. Check all the categories that apply when a chemical has more than one characteristic, (example: both a Class 3 flammable and a Class 6 poison), see definitions. Each chemical group listed in this survey, includes a specified quantity. Indicate the quantity category for each chemical group on your site. To complete this survey, you may need to reference material Safety Data Sheets, SARA Title III reporting forms, along with the attached definitions.

(Note: You must complete each line. Do not leave blanks. If you do not use a chemical group listed, mark "DO NOT HAVE" box.)

When substantial changes occur in the quantity or type of chemical use, manufacture or related storage, a revised survey must be submitted to the Fire Chief. In addition, a revised survey will be requested periodically as the Fire Chief determines necessary, but at least once every five years.

This survey may be followed-up with a request for more detailed information. This may include a request for Material Safety Data Sheets, chemical lists maintained under the Employee Right to Know provisions of MIOSHA and other information.

Please return this questionnaire as indicated in the attached cover letter.

This site is:

- Chemical User** – (Chemicals consumed in activities on site)
- Chemical producer** – (Chemicals manufactured at this site, includes Packaging)
- Other** – Mark this box if chemicals are stored on site, but not used or produced.
Please specify (Examples: service station, retail store, storage facility.)

Date Completed: _____

Site Address: _____

Name of Premises: _____

Site Telephone: _____

Respond based on the maximum quantity you would have on-site, including storage, at any one time during the year.

Chemical Type	Quantity	Have at or Above Specified Quantity	Have, but Below Specified Quantity	DO NOT HAVE
Class 1				
Explosives & Blasting Agents (not including Class C Explosives)	Any Quantity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Class 2				
Poison Gas	Any Quantity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Flammable Gas	100 gal. water capacity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Nonflammable Gas	100 gal. water capacity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Class 3				
Flammable Liquid	1000 gal.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Combustible Liquid	10000 gal.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Class 4				
Flammable Solid (dangerous when wet)	100 lbs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Flammable Solid	500 lbs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Spontaneously Combustible Material	100 lbs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Class 5				
Oxidizer	500 lbs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Organic Peroxide	250 lbs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Class 6				
Poison	500 lbs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Irritating Material:				
Liquid	1000 gal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Solid	500 lbs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Class 7				
Radioactive Material (Yellow III Label)	Any Quantity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Class 8				
Corrosives:				
Liquid	1000 gal.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Solid	500 gal.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No DOT Category				
Known Human Carcinogen	Any Quantity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

HAZARDOUS CHEMICAL DEFINITIONS

CHEMICAL TYPE	DEFINITIONS
POISON GAS	Extremely dangerous poisons, highly toxic poisonous gases or liquids – a very small amount of the gas, or vapor of the liquid, mixed with air is dangerous to life.
POISON	Less dangerous poisons, toxic – Substances, liquid or solids (including pastes and semi-solids) so toxic to man that they are a hazard to health during transportation.
FLAMMABLE GAS	A gas that can burn with the evolution of heat and a flame. Flammable compressed gas is any compressed gas of which: (1) a mixture of 13 percent or less (by volume) with air is flammable, or (2) the flammable range with air is under 12 percent.
NON FLAMMABLE GAS	Any compressed gas other than a flammable compressed gas.
FLAMMABLE LIQUID	Any liquids having a flashpoint below 100 degrees F (37.8 degrees C), except any mixture having components with flashpoints of 200 degrees F (37.8 degrees C) or higher, the total of which makes up 99 percent or more of the total volume of the mixture.
COMBUSTIBLE LIQUID	Any liquid having a flashpoint at or above 100 degrees F (37.8 degrees C), but below 200 degrees F (93.3 degrees C), except any mixture having components with flashpoints of 200 degrees F (93.3 degrees C), or higher, the total volume of which rake up 99 percent or more of the volume of the mixture.
CORROSIVES-LIQUID AND SOLID	Any liquid or solid that causes visible destruction or irreversible damage to human skin tissue. Also, it may be a liquid that has a severe corrosion rate on steel.
IRRITATING MATERIAL - LIQUID AND SOLID	A liquid or solid substance which, upon contact with fire or air, gives off dangerous or intensely irritating fumes.
EXPLOSIVES AND BLASTING AGENT (not including Class C Explosives)	“Explosive” means a chemical that causes a sudden, almost instantaneous release of pressure, gas, and heat when subjected to sudden shock, pressure, or high temperature. Blasting Agent: A material designed for blasting. It must be so insensitive that there is very little probability of (1) accidental explosion or (2) going from burning to detonation.
RADIOACTIVE MATERIAL (yellow 111 label)	Any material, or combination of materials, that spontaneously gives off ionizing radiation.
FLAMMABLE SOLID (Dangerous when wet)	Water Reactive Material (Solid) – Any solid substance (including sludges and pastes) which

	react with water by igniting or giving off dangerous quantities of flammable or toxic gases. (Sec. 171.8)
FLAMMABLE SOLID	A solid, other than a blasting agent, or explosive, that is liable to cause fire through friction, absorption of moisture, spontaneous chemical change, or retained heat from manufacturing or processing, or which can be ignited readily and when ignited burns so vigorously and persistently as to create a serious hazard.
SPONTANEOUSLY COMBUSTIBLE MATERIAL	Spontaneously Combustible Material (Solid) – A solid substance (including sludges and pastes) which may undergo spontaneous heating or self-burning under normal transportation conditions. These materials may increase in temperature and ignite when exposed to air.
OXIDIZER	A chemical that initiates or promotes combustion in other materials, thereby causing fire either of itself or through the release of oxygen or other gases. Example being chlorate, permanganate, inorganic peroxide, or a nitrate, that yields oxygen readily.
ORGANIC PEROXIDE	Means an organic compound that contains the bivalent -O-O structure and which may be considered to be a structural derivative of hydrogen peroxide where one or both of the hydrogen atoms has been replaced by an organic radical.
CARCINOGEN	A chemical is considered to be a carcinogen if: (a) It has been evaluated by the International Agency for Research on Cancer (IARC), and found to be a carcinogen or potential carcinogen; or (b) It is listed as a carcinogen or potential carcinogen in the Annual Report on Carcinogens published by the National Toxicology program (NTP) (latest edition); or, (c) It is regulated by OSHA as a carcinogen.