

**THOMAS TOWNSHIP**  
**249 NORTH MILLER ROAD**  
**SAGINAW, MI 48609**  
**PHONE (989) 781-0150 FAX (989) 781-0290**  
***www.thomastwp.org***

<b>APPLICATION FOR BUSINESS IN THOMAS TOWNSHIP</b>									
BUSINESS NAME						DATE			
BUSINESS MAIL ADDRESS									
BUSINESS PROPERTY ADDRESS									
BUSINESS PHONE					BUSINESS FAX				
OWNER'S NAME									
OWNER'S MAIL ADDRESS									
OWNER'S PHONE					EMAIL				
BUSINESS WEBSITE									
BUSINESS EMAIL						EMERGENCY PHONE NO.			
TYPE OF BUSINESS (please check)	DINING		FINANCIAL		GAS STATION		HEALTH SERVICES		
LODGING		SERVICE		RETAIL		INDUSTRIAL/MANUFACTURING			
DESCRIBE BUSINESS/SERVICE _____ _____ _____									
HOURS OF OPERATION							NUMBER OF EMPLOYEES		
INSURANCE COMPANY NAME									
SIGNATURE							DATE		
<b>BY SIGNING THIS APPLICATION, YOU HEREBY AFFIRM THAT THE FOREGOING ARE FULL AND TRUE STATEMENTS.</b>									
APPROVALS	<div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> BUILDING APPROVAL  <input type="checkbox"/> DPW APPROVAL         </div> <div> <input type="checkbox"/> FIRE APPROVAL  <input type="checkbox"/> TOWNSHIP MANAGER         </div> <div> <input type="checkbox"/> ZONING APPROVAL         </div> </div>								

**\*\*\*\*\*IF THIS IS A HOME OCCUPATION, PLEASE SEE REVERSE SIDE AND COMPLETE\*\*\*\*\***  
**COMPLETE AND RETURN THIS FORM WITH THE \$10.00 FEE NO LATER THAN DECEMBER 15<sup>TH</sup>.**  
**PLEASE COMPLETE ALL FIELDS. MAKE ALL CHECKS PAYABLE TO "THOMAS TOWNSHIP".**

BUSINESS LICENSE NUMBER ASSIGNED: \_\_\_\_\_

PLEASE NOTE: A HOME OCCUPATION IS NOT REQUIRED TO OBTAIN A BUSINESS LICENSE IN THOMAS TOWNSHIP HOWEVER, YOU ARE REQUIRED TO FOLLOW SPECIFIC GUIDELINES AS DEFINED IN SECTION 2.2 AND LISTED IN SECTION 3.13, “CUSTOMARY HOME OCCUPATIONS” OF THE THOMAS TOWNSHIP ZONING ORDINANCE. PLEASE VERIFY THE FOLLOWING:

YES	NO	
		IS YOUR BUSINESS OPERATED IN ITS ENTIRETY WITHIN YOUR PRINCIPAL DWELLING?
		DOES YOUR BUSINESS INCLUDE MORE THAN ONE EMPLOYEE NOT LIVING IN THE DWELLING?
		DOES YOUR BUSINESS INVOLVE ALTERATION OR CONSTRUCTION NOT CUSTOMARILY FOUND IN THE DWELLING?
		DOES YOUR BUSINESS USE ANY MECHANICAL EQUIPMENT EXCEPT THAT WHICH IS USED NORMALLY FOR PURELY DOMESTIC OR HOUSEHOLD PURPOSES?
		DOES YOUR BUSINESS USE MORE THAN TWENTY-FIVE PERCENT (25%) OF THE TOTAL ACTUAL FLOOR AREA OF YOUR DWELLING?
		DOES YOUR BUSINESS DISPLAY, OR CREATE OUTSIDE THE STRUCTURE ANY EXTERNAL EVIDENCE OF THE OPERATION OF THE HOME OCCUPATION EXCEPT FOR ONE UNANIMATED, NONILLUMINATED, WALL SIGN HAVING AN AREA OF NOT MORE THAN ONE SQUARE FOOT?
		CUSTOMARY HOME OCCUPATIONS ARE REQUIRED TO HAVE AT LEAST ONE ADDITIONAL OFF-STREET PARKING SPACE, IN ADDITION TO THAT REQUIRED FOR THE RESIDENTIAL USE, WITH A MAXIMUM OF THREE (3) SPACES. IS THIS PROVIDED FOR?

PLEASE VERIFY THAT THE ANSWERS ABOVE ARE TRUE AND ACCURATE.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_