



**CITY OF MUSKEGON
BUSINESS REGISTRATION APPLICATION
\$35.00 REGISTRATION FEE**

Enclose the Fire Safety Audit Worksheet with the application. If you are non-profit, please enclose a copy of your Non-Profit Status for waiver of fee. Return all correspondence to Clerk Office, 933 Terrace St., Muskegon MI 49440.

PLEASE TYPE OR PRINT -FOR QUESTIONS CALL; (231) 724-6705

BUSINESS NAME:		Check one box only: <input type="checkbox"/> Individual <input type="checkbox"/> Corp <input type="checkbox"/> Partnership <input type="checkbox"/> Non-Profit <input type="checkbox"/> LLC <input type="checkbox"/> Government <input type="checkbox"/> Other (Explain) <input type="checkbox"/> Single Member LLC *	
COMPLETE COMPANY NAME:			
TYPE OF BUSINESS CONDUCTED:			
FEIN#	HOURS OF OPERATION:	NUMBER OF EMPLOYEES:	
BUSINESS PHONE:		START-UP-DATE:	
MAILING ADDRESS (for renewal and correspondence): Number and Street: City, State, Zip:			
PHYSICAL ADDRESS OF BUSINESS IN MUSKEGON: Number and Street: City, State, Zip:			
OWNER/MANAGER:		TITLE:	
DRIVER'S LICENSE NUMBER:		EMAIL:	
RESIDENCE ADDRESS: Number and Street: City, State, Zip:		HOME TELEPHONE: BUSINESS TELEPHONE:	
EMERGENCY CONTACT: Name: Address: Phone:			

I certify that the above information is correct to the best of my knowledge.

Signature of Applicant

Date