



OPENING A BUSINESS IN FLAT ROCK

An important first step in starting your business is to meet with the Economic Development Director of Flat Rock. The following step-by-step instructions and additional information should help you through the process. If you have any problems or need help getting a business license, please call our Clerk's Office at 734.782.2455, extension 6. We are happy that you are growing your business here and we want to help!

The City of Flat Rock's Code of Ordinance requires a business to have an active business license along with a certificate occupancy and pay the required fees. Your proposed business will be routed through several departments to obtain the license. Below you will find a brief procedure on opening your business in Flat Rock. More detailed information can be obtained if needed.

Step 1: Economic Development Director

- a) Contact the Economic Development Director to start the process.
 - a. Director will guide you on the procedure and inform you of grant opportunities, zoning districts, Downtown Development Authority information, etc.

Step 2: Building Department – Certificate of Occupancy (Please see the attached detailed description)

- a) Applicant completes a Certificate of Occupancy (C of O) application and submits the required \$100 application fee.
- b) If required, a building inspection will be scheduled.
- c) Once the building is inspected and approved the building department will issue the C of O and provide the Clerk's office with a copy.

Step 3: Clerk's Office – Business License

- a) Applicant completes a Business License application and submits the required \$80 application fee. This can be done when submitting the C of O application.
- b) The Business License application is routed to the police, fire, treasurer, water and building department.
- c) Once routing is complete and if approved, the Clerk's Office will issue the business license.

Simply submitting a Business License Application and Certificate of Occupancy Application doesn't permit the applicant to open the business to the public.

The Business License and the Certificate of Occupancy must be completed and issued before the business can open.



DEPARTMENT OF BUILDING AND SAFETY
PROCEDURES FOR OBTAINING A CERTIFICATE OF OCCUPANCY

If you wish to open a new business, or purchase an existing business or building, in Flat Rock, you need to obtain a Certificate of Occupancy in accordance with Article 24.07 of the City of Flat Rock Zoning Ordinance. All existing Certificates expire upon a change in ownership of the business or building or a change in use.

1. APPLICATION:

All prospective business owners must obtain and submit a certificate of occupancy application to the Department of Building & Safety located at 25500 Gibraltar Road, Flat Rock. Office hours are from 8 a.m. to 4:30 p.m.

2. INSPECTIONS:

To obtain a certificate of occupancy the building must pass inspection done thru the Building Department. **You** must schedule the inspection. The department phone numbers and office hours are listed below.

As the PROSPECTIVE BUSINESS OWNER, **you** are responsible for scheduling initial inspections and all follow-up inspections if needed. You may not open a business prior to receiving an occupancy certificate **and** a business license.

FLAT ROCK BUILDING DEPARTMENT
CALL (734) 782-0445 TO SCHEDULE INSPECTIONS
24 HOUR NOTICE IS REQUIRED FOR ALL INSPECTIONS

3. CORRECTIONS:

You may receive a list of required corrections from the inspector. These corrections need to be made and re-inspected within ten (10) days for existing businesses and before occupancy for a new business, after you have made corrections you will need to call the department number shown above to schedule a re-inspection(s). All corrections requiring a permit **MUST** be done by license contractors.

4. RE-INSPECTIONS:

When corrections have been completed, it is your responsibility to call our department to schedule re-inspections. Inspectors will not come out automatically.

5. FINAL APPROVAL:

Once each Inspector has given final approval, your Certificate of Occupancy will be issued. You will receive your Certificate of Occupancy via mail.

IF A BUSINESS LICENSE IS REQUIRED:

If your business requires a Business License a separate application must be filed with the Clerk's office. The Building Department will forward the Occupancy Certificate to the Clerk upon issue. The Business License will be issued only after the Clerk receives approval from all departments and the Occupancy Certificate has been issued.



CITY OF FLAT ROCK
BUILDING & SAFETY DEPARTMENT
APPLICATION FOR CERTIFICATE OF OCCUPANCY - \$100.00

(Please Type or Print)

Building Address: _____ Property Tax ID No.: _____ Zoning: _____

APPLICANT INFORMATION

Business Name: _____

Business Phone No.: _____ Fax No.: _____

Owner Manager Name: _____ After Hours Contact No.: _____

Driver's License No.: _____ Date of Birth: _____

Home Address: _____ City: _____ Zip: _____

IF A BUSINESS LICENSE IS REQUIRED FOR THIS OCCUPANCY A SEPARATE APPLICATION MUST BE FILED WITH THE CLERKS OFFICE.

BUILDING & BUSINESS INFORMATION

Type of Application New Business Relocation within City Change of Ownership

Anticipated Opening Date: _____ Hours of operation: _____

Explain Use in Detail: _____

(Describe all goods sold and Services Provided)

Square Footage: _____ No. of Parking Spaces: _____ Private Lot D Shared Lot D

No. of Floors: _____ Max. No. of Employees: _____ No. On Largest Single Shift: _____

No. of Seats for Restaurant* or Assembly Uses: _____ ***Attach a Copy of the Health Dept. Approval**

Will Additions or Alterations to the Building be Required? _____

Explain: _____

Building Owner Name: _____ Phone No.: _____ Fax: _____

Address: _____ City: _____ Zip: _____

- **ALL SIGNS REQUIRE PERMITS**
- **APPLICANT MUST CALL 24 HOURS IN ADVANCE TO SCHEDULE INSPECTIONS AND RE-INSPECTIONS IF NECESSARY**
- **CERTIFICATE OF OCCUPANCY WILL NOT BE ISSUED WITHOUT INSPECTION**

I have read and understand the above information and am authorized to act on behalf of the business listed above.

Applicant Signature

Date

City of Flat Rock

25500 Gibraltar Road
Flat Rock, Michigan 48134-1399



Phone (734) 782-2455
Fax (734) 783-0304
Website: www.flatrockmi.org

Re: 20__-20__ Business License

Dear Business Owner:

Enclosed you will find an application for a City of Flat Rock Business License. This license application is valid for two (2) years - January 1, 20__ through December 31, 20__. No person shall, directly or indirectly, operate, conduct, maintain or manage any commercial establishment without first procuring a license from the city. A separate license shall be required for each location of a commercial establishment. The full text of the business license ordinance can be viewed by visiting: www.flatrockmi.org, Chapter 22 of the Code of Ordinance section under Clerk's Office web page.

Please complete all fields on the application along with your signature as it is essential for emergency records in the fire/police departments. Return the application along with a check or money order payable to the "City of Flat Rock" for the amount as outlined below. You may also pay in person by credit or debit card for an additional processing fee. It will take approximately 4 weeks to process your license.

Business License (each location or business) - \$80.00

MAIL OR DELIVER TO:

City of Flat Rock
ATTN: CLERKS OFFICE
25500 Gibraltar Road
Flat Rock, MI 48134-1399

Should you have any questions, please feel free to contact the Clerk's Office at 734-789-2313.

Regards,

Meaghan K. Bachman
Meaghan Bachman, City Clerk

**SAMPLE
LETTER**



CITY OF FLAT ROCK CLERK'S OFFICE

25500 GIBRALTAR ROAD, FLAT ROCK, MI 48134

734-782-2455 - WWW.FLATROCKMI.ORG

OFFICE USE ONLY

BUSINESS ID

APPLICATION FOR GENERAL BUSINESS LICENSE **\$80.00**

BUSINESS INFORMATION

This business is a: New Business/New Owner Renewal

Business Name: _____

Business Address (Flat Rock Location): _____

Mailing Address (if different from above): _____

Business Phone Number: _____ Business Fax No.: _____

Email: _____ Website: _____

Business Owner Name: _____

Home Address: _____ City/State: _____ Zip: _____

Home/Cell Phone No.: _____ Fax No.: _____

Driver's License No.: _____ Date of Birth: _____

State License and/or Tax ID Number: _____

Anticipated Opening Date: _____ Hours / Days of Operation: _____

Type of Business (e.g. retail, restaurant, manufacturing): _____ # of Employees: _____

Business Activity: List your business activity, including merchandise and services to be sold or offered : _____

Has the applicant or person conducting or managing the applicant's business been convicted of a crime, misdemeanor or the violation of any municipal ordinance and, if so, explain full particulars in connection therewith. NO YES – if yes, explain:

OWNER OF BUILDING (STRUCTURE)

Building Owner Name: _____ Phone No.: _____

Building Owner HOME Address (not Flat Rock business location): _____

Confidential
Information
For use in
police or fire
emergencies
only

EMERGENCY CONTACTS

Emergency Contact Name: _____ Phone: _____

Emergency Contact Name: _____ Phone: _____

I am the owner/agent of said business making application for this license or an authorized representative of said business and depose and say that I have read the foregoing application and know the contents thereof, and that the same is true to the best of my ability. I further understand this business license must be renewed as of December 31st of the following even-numbered year.



Applicant Signature

Date