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

AF	APPLICATION FOR BUSINESS IN THOMAS TOWNSHIP							
BUSINESS NAME		DATE						
BUSINESS MAIL ADDRESS								
BUSINESS PROPERTY ADDRESS								

BUSINESS PHONE	BUSINESS FA	<
OWNER'S NAME		
OWNER'S MAIL ADDRESS		
OWNER'S PHONE	EMAIL	

BUSINESS WEBSITE												
BUSINESS EMAIL				EMERGENCY PHONE NO.			10.					
TYPE OF BUSINESS (please che	eck)	DINING FINANCIAL		GAS ST	GAS STATION HE		HEALTH SERVICES					
LODGING		SERVICE		RET		Ĺ		INDUSTRIAL/MANUFAC		MANUFACT	JFACTURING	
		<u>_</u>										
HOURS OF OPERATION							NUMBER O			F EMPLOYEES		
INSURANCE COMPANY NAME												
SIGNATURE											DATE	
BY SIGNING THIS APPLICATION YOU HEREBY AFFIRM THAT THE FOREGOING ARE FULL AND TRUE STATEMENTS.												
APPROVALS			/AL		□ FIRE	APPRC	OVAL		] ZONI	NING APPROVAL		
		DPW APPROV	AL				TOWNSHIP MANAGER					

## <u>COMPLETE AND RETURN THIS FORM WITH THE \$10.00 FEE NO LATER THAN DECEMBER 15th PLEASE</u> <u>COMPLETE ALL FIELDS.</u>