

CITY OF DEWITT  
COUNTY OF CLINTON

Filing is mandatory  
required by Chapter 18,  
Art. II of City Code

APPLICATION FOR REGISTRATION OF BUSINESS

The undersigned hereby certifies that he, she, (it) now owns and intends to conduct or transact business at:

\_\_\_\_\_ in the CITY of DEWITT under the business name of: \_\_\_\_\_  
(Street and Number)

\_\_\_\_\_  
(Name of Business)

Is this a home occupation? \_\_\_\_\_ or \_\_\_\_\_ Contact Phone Number: \_\_\_\_\_  
Yes No

This business entity is (check one): \_\_\_\_\_ Proprietorship \_\_\_\_\_ Partnership \_\_\_\_\_ Corporation \_\_\_\_\_  
\_\_\_\_\_ Limited Liability Company \_\_\_\_\_ Other

Business is a franchise: \_\_\_\_\_ or \_\_\_\_\_ If Yes, indicate nature of franchised business \_\_\_\_\_  
Yes No

Nature of Business \_\_\_\_\_

**\*A letter detailing your business must be included with this application for registration of business.\***

**Owner Information:**

NAME	DRIVER'S LICENSE	HOME ADDRESS
_____	_____	_____

In Witness Whereof, I/We have this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, made and signed this registration.

SIGNATURE(S) OF OWNER(S) OR CORPORATE OFFICER(S)  
AND DATE OF BIRTH

\_\_\_\_\_  
\_\_\_\_\_

STATE OF MICHIGAN)  
COUNTY OF \_\_\_\_\_) On \_\_\_\_\_, 20\_\_\_\_, before me, a Notary Public, personally appeared the above named person or persons, whose signature(s) appear above, and who executed the foregoing instrument, and \_\_\_he \_\_\_ acknowledged to me that \_\_\_he\_\_\_ executed the same, and that they are all of the persons now owning, conducting and transacting or who intend to own, conduct and transact business under the above name, style and designation.

\_\_\_\_\_  
Notary Public, \_\_\_\_\_ County, Michigan  
My Commission Expires: \_\_\_\_\_

Date Received \_\_\_\_\_

REVIEWED BY: \_\_\_\_\_  
GAIL A. WATKINS, CITY ASSESSOR

REGISTRATION NO. \_\_\_\_\_

ISSUED BY: \_\_\_\_\_  
DANIEL COSS, CITY ADMINISTRATOR DATE