

PROJECT INFORMATION

SUBMITTAL REQUIREMENTS

APPLICATION FOR RENEWAL OUTDOOR SEATING

City of Novi Community Development 45175 W. Ten Mile, Novi, MI 48375 248.347.0475; 248.735.5600 fax

VIM)								
cityofnovi.org			Projec	t Name			SI # ((City)
Company		Primary Contact			Secondary Contact			
Street Address			Suite City				State	Zip
Phone Number		Fax Number			E-mail address			
Property Address		North	or South	of which road?	East or West of which road?			
Parcel Number(s)	Section	Approximate Square footage of proposed Outdoor Seating Area						
Space for additional information, if necessary								
Submittal Requirements: Original signed copy of this application. Annual Inspection Fee of \$70.00, check made payable to the City of Novi. 3 copies of plan with approved outdoor seating area. ***FURNITURE MUST BE REMOVED FROM EXTERIOR PROPERTY BY NOVEMBER 30TH***								
I do hereby attest that all states accurate to the best of my known of the property owner and I have behalf. I acknowledge that by and/or representatives for all publications. Signature of Applicant	wledge and ve attached making this	I am the produced a notarized a supplication	operty ov d stateme i I have c	vner or I am authorize nt from the owner who onsented to the entry	d to file this o grants me of City offic	application permission ials, emplo	n and act on to act on yees, ager	on behalf his/her nts,
Printed Name of Applicant								