



APPLICATION FOR USE CERTIFICATE

CITY OF PORT HURON, MICHIGAN Planning Department - Inspection Division

Applicant Information: Property Owner Tenant/Lessee

Name: _____ Business/Organization Name: _____

Address: _____ City/State/Zip: _____

Phone (W): _____ Fax: _____ E-mail: _____

Cell Phone: _____ Phone (H): _____

I hereby attest that all information on this application is, to the best of my knowledge, true and accurate:

Print Name/Signature of Applicant: _____ Date: _____
(print name under signature)

**Applicant's driver's license number: _____ ** Date of birth: ___/___/___ day/month/year

The above-signed applicant hereby applies for a Use Certificate for the use of the premises located at:

Proposed use: _____
(Address of property) (Office, Retail Sales, etc.)

to be located on and applied to the above-described premises in accordance with Chapter 52, Zoning Code of Ordinances, for the City of Port Huron

Zoning District: _____ Property Tax ID #: _____

What is the present use of the building? Vacant? _____

If vacant, how long has the building been vacant? _____

What was the former use of the building? _____

Describe all uses to be made of the building: _____

Does the building have an existing barrier free entrance? ___yes ___no Is there a barrier free restroom? ___yes ___no

The building will be renovated/remodeled? ___yes ___no

List nature of construction work or new signage: _____

Number of Parking Spaces Available: _____ Number of Parking Spaces Required: _____

Square Footage of Building: _____ Will there be additions to the building? Size _____ s.f.

Sketch and/or survey of site, building, and designated parking area: Required Not Required

Requires approval from:
 Planning Department Planning Director _____ Approved Denied Date
David Haynes, 810-984-9735 ___/___/___

Approval contingent upon _____

Inspection Department Chief Inspector _____ Approved Denied Date
Marvin Shagena, 810-984-9733 ___/___/___

Approval contingent upon _____

Please contact the Chief Inspector for an inspection before occupying the building. Any renovations may require a building, electrical, HVAC, or signage permit. Call the Inspection Division at 810-984-9733 for more information.

Police Department Police Chief _____ Approved Denied Date
Joseph Platzer, 810-984-9710 ___/___/___

Approval contingent upon _____

Fire Department Fire Marshal _____ Approved Denied Date
Kyle Brunk, 810-984-9750 ___/___/___

Approval contingent upon _____

Please contact the Fire Marshal for a fire inspection before occupying the building

THIS PERMIT DOES NOT CONSTITUTE AN APPROVAL FOR A BUILDING PERMIT

Before a building can be occupied with a new use or change of use, it may be subject to renovations as required by the City Building/Mechanical/Electrical/Fire Code and the Americans Disabilities Act.