PLAINFIELD CHARTER TOWNSHIP APPLICATION FOR LICENSE

SEASONAL SALES

CHRISTMAS TREES, FIREWORKS, PUMPKIN, AND FLOWER SALES ONLY

Name of Applicant:	
Contact Person:	
Address:	City, State, Zip:
Telephone Number:	Fax Number:
Email address:	
Property Owner's Name:	
Address:	City, State, Zip:
Telephone Number:	Fax Number:
Location of Operation:	
Dates of Operation:	
Hours of Operation:	
Item(s) Being Sold:	

REGULATIONS

You must comply with the rules and regulations established in Chapter 10 - Article III - Division 6 Seasonal Sales and the Temporary & Permanent Tents, Canopies, and Membrane Structure requirements, if applicable.

You must submit

- A site plan showing the following:
 - 1. Any existing structures on the premise including ingress and egress locations on the site
 - 2. If using a tent, canopy or membrane structure please include the size and location
 - 3. Setback measurements from property lines to your location
 - 4. Identify customer parking areas
 - 5. Sign details, including size and specific location (one sign is permitted, no greater thant 16 square feet in size)- *no flags, pennants or flashing lights*)

- A letter of authorization from the property owner for the use of their property.
- Certificate of Liability Insurance (if applicable)

If selling fireworks:

- Submit a copy of your certificate to sell consumer fireworks issued by the State of Michigan's Bureau of Fire Services. The certificates are site specific so if you will be selling at multiple locations within our jurisdiction you will need to include a certificate for each location.
- Submit an inventory list of fireworks for sale.
- Once your site is set-up you need to contact the Plainfield Fire Department for a site inspection prior to selling fireworks at 616-361-2895.
- A fireworks sale may operate for a period not to exceed ten consecutive days.

CERTIFICATION

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• •	oly with the rules and regulations established in Chapter 10 easonal Sales and the Temporary & Permanent Tents nts, if applicable.
Signature	Date

PAYMENT METHOD

☐ Cash (in person payments only)		
□ Check		
☐ Credit Card (A 2.5% convenience fee is charged)	ged on credit or debit card payments)	
CREDIT CARD PAYMENT INFORMATION		
Credit Card Type (check box):	DISCOVER	
Cardholders Name:		
Card Number:		
Expiration Date:	CVV Code*:	
*The CVV number is the three digit number located on the Express, the four digit number above the credit card account	e back of Visa, MasterCard and Discover credit cards, or for American nt number on the front of the card.	
Billing Information: Address:		
City:	State: Zip:	
E-mail address for receipt:		
charged on the credit or debit card payment. Signature of Credit Card Holder:		
OFFICE USE ONLY		
Inspections/Approvals:		
Community Development Department - Zoning	Initials:	
Fire Department - All Regulations	Initials:	
Security Deposit (if required): \$200.00 (refun	dable)	
Date received:	Date returned:	
Fee: \$30.00		
Date received:	Initials:	
License number:	_	