



Application for License Agreement							
Applicant <i>(Must be Licensee)</i>	Parcel ID #: <small>(adjacent to r-o-w)</small>						
	Name or Business:						
	Contact Person:						
	Address:						
	City:		State:		Zip:		
	Phone:		or				
	Fax:		E-Mail:				
Purpose of License Agreement							
Property Owner	Name:		Signature:				
	Address:						
	City:		State:		Zip:		
	Phone:		or				
	Fax:		E-Mail:				
	<input type="checkbox"/> Same as Applicant	Legal Description: <small>(property adjacent to right-of-way)</small> <small>(attach separate copy if necessary)</small>					

<p>Signature</p> <p>X _____ Signature of Applicant</p> <p>STATE OF MICHIGAN, COUNTY OF OAKLAND ss:</p> <p>On this _____ day of _____, A.D., 20____, Before me personally appeared the above named person, who being dully sworn, says that he/she has read the foregoing application for site plan review, by him/her signed and knows the contents thereof, and that the same is true of his/her own knowledge, except as to the matters therein stated to be upon information and belief, and as to those matters, he/she believes it to be true.</p> <p>X _____ Notary Public of Oakland County, Michigan</p> <p>My Commission Expires: _____</p>	<table border="1"> <tr> <th colspan="2" data-bbox="867 201 1536 247">Fees</th> </tr> <tr> <td data-bbox="867 247 1386 949"> <p>Non-Refundable Application Fee</p> </td> <td data-bbox="1386 247 1536 949"> <p>\$ 500</p> </td> </tr> </table>	Fees		<p>Non-Refundable Application Fee</p>	<p>\$ 500</p>
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Procedure:

Separate payments of the non-refundable application fee and performance bond fee can be made to the “City of Royal Oak” at the Treasurer’s Office on the first floor of City Hall or by mail to 203 S. Troy St., Royal Oak, MI 48067.

For a list of the information that must accompany this application please contact the Planning Division.

<p>Treasurer’s Office (Staff Use Only):</p> <p>This application is valid when signed by the cashier at the Treasurer’s Office confirming payment of fee.</p> <p>Application Account Number: 101.000.62902</p> <p>Receipt Number:</p>	<p>Taxes & Water Bills:</p> <p><input type="checkbox"/> Paid</p> <p><input type="checkbox"/> Not Paid in Full Amount Owed: \$ _____</p> <p>Cashier’s Signature:</p>
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