



**TENTS & TEMPORARY STRUCTURES
PERMIT APPLICATION**
CITY OF LIVONIA – BUILDING INSPECTION
33000 CIVIC CENTER DRIVE
LIVONIA, MI 48154
(734) 466-2580



MCLL# _____

BUILDING PERMIT # _____

FILL IN ALL ITEMS LISTED BELOW

APPLICANT EMAIL: _____

APPLICANT OR CONTRACTOR

PHONE

Address

City

State

Zip

PROPERTY OWNER

PHONE

Address

City

State

Zip

OCCUPANT (NAME OF BUSINESS)

PHONE

LOCATION (# and Street):

Between (nearest cross streets)

St. and

St.

Lot Number

Lot Size:

ft. WIDE by

ft. DEEP

TO CONSTRUCT:
Check Box

Temp Tent

Temp Structure

Both

Number of Tents _____ Tent Dimensions _____

Other Information on Project:

GENERAL INFORMATION REQUIRED

Seating Capacity –

Number of Tables -

Chairs -

Parking Spaces Required:

Provided:

Number of employees: Male

Female

Number of Rest Rooms:

Does this Building have a Fire Suppression System?

Cost: \$102.00

I HEREBY CERTIFY THAT THE PROPOSED WORK IS AUTHORIZED BY THE OWNER OF RECORD AND THAT I HAVE BEEN AUTHORIZED BY THE OWNER TO MAKE THIS APPLICATION AS HIS AUTHORIZED AGENT AND WE AGREE TO CONFORM TO ALL APPLICABLE ORDINANCES OF THE CITY OF LIVONIA.

AS THE APPLICANT OR CONTRACTOR, YOU WILL BE RESPONSIBLE FOR OBTAINING ALL BUILDING INSPECTIONS!

SIGNATURE OF APPLICANT OR OWNER

PRINT NAME: _____

DRIVER'S LICENSE #: _____

WITNESSED BY: _____
(INSPECTION DEPARTMENT)

DATE: _____

NOT TO BE FILLED IN BY APPLICANT

ZONING EXAMINATION:

Permit is to be issued for: _____

Bldg: _____ Employees: _____ Last Use: _____

Zoning Grant: _____ P.C.# _____ C.R.# _____

Zoning District: _____ Section: _____ Use Group: _____

REMARKS: _____

Approved by: _____, Examiner Date: _____

ENGINEERING EXAMINATION:

Type: _____ Use Group: _____ sq. ft. _____ cu. ft. _____

Approved by: _____, Examiner Date: _____

Estimated Cost _____ Permit Fee _____

Construction Bond _____ Zoning Fee \$60.00

Admin Fee \$42.00

Other _____

Total Fee \$102.00