

## 2025

## Village of Birch Run & Birch Run Township Business License Application



	Local Business Name:					
LOCAL	Type of Business:					
	Local Address:	Suite #:	P.O. Box:			
	Local Contact/Phone:					
	Local Contact Email:					
CORPORATE	Corporate Name:					
	Corporate Address:		P.O. Box:			
	City:	State: Zip: _				
	Corporate Contact/Phone:					
	Corporate Contact Email:					
<b>PAYMENT</b>	PLEASE REMIT PAYMENT TO:  Village of Birch Run 12060 Heath St. P.O. Box 371 Birch Run, MI 48415	[ ] <b>New</b> Business License with Alarm Permit* [ ] <b>New</b> Business License (no alarm)	\$160.00			
		[ ] <b>Renew</b> Business License with Alarm Perm: [ ] <b>Renew</b> Business License (no alarm)	it* <b>\$205.00</b>			
	continue a business, as herein defined hereinafter provided and without mai	Village of Birch Run Code of Ordinances states: "No person, within the Village without having first obtained the Village ntaining such license in current effect during any business Copy of ordinance is available upon request.	ge license therefore as			
	Business license certific	cates will be delivered to the local busines	s for display			
SEND FUTURE RENEWAL APPLICATIONS TO: (SELECT ONE)						
	[ ] Local Business [ ] Corporate Address [ ] E-mail:					



## **Emergency Contact & Alarm System Information**

Please update the emergency contact and alarm system information for the Birch Run Police Department.

_	Business Name:		Phone: _			
CONTACT	Emergency Contac	et Name/Title:				
TA	Emergency Contac	et Phone:				
N EX	Backup Emergency	y Contact Name/Title:				
E C	Backup Emergency	y Phone:				
_ <b>V</b>	*All businesses acquiring an Alarm Permit must fill out Alarm System Information					
NE E	Property Owner: _		Phone: _			
ALAKM SYSTEM	Alarm Company: _		Phone:			
∢ N	Do you have exterior security cameras at your business? [ ] Yes [ ] No					
	Chapter 114 of the Village of Birch Run Code of Ordinances requires annual licensing of Alarm Systems in the Village of Birch Run and prescribes fines for false alarm violations. The cost of false alarms after two in a calendar year is billed to you as provided in Section 114.12 and 114.13.  Copy of ordinance is available upon request.					
	I, as applicant of the above-described business, have read this application and agree to abide by the ordinances adopted by Birch Run Township and the Village of Birch Run.					
	SIGNA	TURE OF APPLICANT / TITLE		DATE		
	FOR OFFICE USE ONLY					
	License #: 25	Date Received:	Business Group:			
	Fee Paid: \$	Check/Money Order #		□ Cash □ CC		