

Canton Clerk's Office

Charter Township of Canton
Application of Teen Club Establishment License

Applicant: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____

Business Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Property Owner: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____

Proposed Licensee: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____

Principal Sponsor: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____

Attach Written Personal References

Attach Written Previous Business References



Where the address, legal description and proof of ownership is not vested in the prospective licensee, an affidavit, accompanying the application, from the owner, indicating consent to the use of the site for the proposed teen club.

Proof of current valid premises liability, workers compensation, and general liability insurance in the amount of two hundred fifty thousand (\$250,000) dollars.

Statement of kind and character of Teen Club: _____

Club Type: A ___ or B ___

Days of the week establishment is open and hours of operation:

Sun: _____ Mon: _____ Tue: _____ Wed: _____ Thur: _____

Fri: _____ Sat: _____

Seating and occupancy capacity: _____

Minimum number of security personnel on site during hours of operation: _____

Zoning Class _____ Legal Description: _____

Description of Building: _____

Required building documents attached:

Layout of Plat including proposed parking facilities

Photo or architect's drawing

Detailed explanation of the plans to provide for the following:

Public Safety protection, and on-and-off site traffic control if applicable

Noise control and abatement

Vehicle access and parking facilities

Illumination facilities for the parking lot

All the statements made in the application and attached exhibits are considered material representations, and all the Exhibits are a material part hereof and are incorporated herein as if set out in full in the application. Under penalty of perjury, I attest that all information contained in this application is true and accurate to the best of my knowledge, belief, and information. I authorize the Township of Canton,

its agents, and employees to seek information and conduct an investigation into the truth of the statements set forth in the application and qualification of the applicant for the permit.

Signature: _____

Printed Name: _____

Title: _____

Application Fee: \$100.00 annually

Building Department Recommends:

Approval _____ Denial _____ Signature _____

Public Safety Recommends:

Approval _____ Denial _____ Signature _____

Clerks Signature _____

Date of Public Hearing _____