



CITY OF MILAN

# Adult Use Marihuana Establishment Financial Information Request

Pursuant to the Milan City Code of Ordinances.

A separate form for each individual listed on the Permit application is required, including applicant, stakeholders and facility managers.

Adult Use Establishment Business Information				
Name of Company:				
Federal Employer ID Number:				
Business Address:			Parcel Property ID:	
City:	State:	Zip:	Personal Property ID:	
Phone:	Business Website:	Business Email contact:		
Applicant Information				
Name of Applicant:			Title:	
Address:				
City:	State:	Zip Code:		
Social Security Number:		Date of Birth:		
Michigan ID/Driver's License Number:			Years of Residency:	
Do you, or this business, owe the City of Milan money for any reason? <input type="checkbox"/> Yes <input type="checkbox"/> No				
If yes, please explain:				
Name of any other City of Milan area businesses or properties in which your ownership participation exceeds 25%:				
Please submit this completed form to: City of Milan City Clerk's Office 147 Wabash St Milan, MI 48160  If you have any questions please contact the City Clerk's Office at (734) 439-1501 or via email at: <a href="mailto:lavonnaw@milanmich.org">lavonnaw@milanmich.org</a> <b>The Applicant is responsible for being sufficiently familiar with and having a working knowledge of the ordinance requirements.</b> A copy of the Milan City Code of Ordinances is available on the website: <a href="http://www.milanmich.org">www.milanmich.org</a>				
I hereby certify that the information provided above is accurate to the best of my knowledge. I agree to operate the aforementioned business in compliance with the guidelines established pursuant to the Milan City Code of Ordinances and all applicable ordinances, statutes, regulations, and laws. In addition, I agree to cooperate with the investigator/inspector assigned to screening this application.				
Applicant's Signature: _____			Date: _____	
FOR OFFICE USE ONLY				
City Treasurer	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	Signature: _____	
Comments: _____				