



BANQUET AND EVENT FACILITY LICENSE APPLICATION

101-045.000-476.000

BSA #

License #

DATE _____

☐ NEW – \$530.00

☐ RENEWAL - \$265.00

SUBMIT TO: CITY CLERK
CITY OF STERLING HEIGHTS
40555 UTICA ROAD
P.O. BOX 8009
STERLING HEIGHTS, MI 48311-8009

The undersigned hereby applies to the City of Sterling Heights for a license to utilize a Banquet and Event Facility. In support of this application, the following representations are made:

1. Name of Applicant: _____
Provide full name
☐ Individual ☐ Corporation ☐ Partnership ☐ Other Business Entity
2. Name of Business: _____
Must provide a copy of current business registration
3. Business Address: _____
City: _____ State: _____ Zip Code: _____
Phone No.: _____ Cell No.: _____ Email: _____
Website: _____
4. Property Owner: _____
If not owned by business owner – must supply evidence of the signed lease for the business premises and written consent of the owner to utilize a banquet and event facility or an accessory banquet or event use on the premises.
5. Site Plan or Special Land Use: # _____ Date Approved: _____
6. Attach a copy of a **detailed layout plan**, including:
 - ☐ Overall design and placement of the facility on a scaled site plan;
 - ☐ Location of all facilities, with floor plan showing areas or separate rooms available for banquet or event rental or use; kitchen and bar areas used for the preparation of food and/or beverages; and areas for outdoor congregation;
 - ☐ Speakers, amplifiers, televisions, display screens, stages or performance areas, and similar installations designed to facilitate entertainment.
7. If this is a RENEWAL, are there any proposed changes/modifications? ☐ YES ☐ NO ☐ N/A
If YES, explain the proposed changes/modifications: _____

8. List of all managers and those principally in charge of business operations:

Name: _____ Email: _____

Address: _____ Phone No.: _____ Cell No.: _____

Name: _____ Email: _____

Address: _____ Phone No.: _____ Cell No.: _____

Attach additional pages if necessary. Must be updated immediately if this information changes.

9. Detailed summary of the nature and type of service to be offered/permitted within the banquet and event facility or accessory banquet or event use:

Occupant load of the facility and/or each room for rental: _____ Square Footage: _____

10. Date Certificate of Occupancy Issued: _____

Date Use Approval Granted: _____

If neither was obtained, date facility or use proposed to open for business: _____

11. Days and hours of operation/availability for banquet and event facility or accessory banquet or event use:

Days: _____

Hours: _____

Include time used for setup, preparation, cleanup, and/or teardown, before or after events.

12. I hereby release and authorize the City, through its agents and employees, to seek information and conduct an investigation into the truth of the statements set forth in this Application and the qualification of the Applicant for a banquet and event facility license: _____ *initials*

13. List all business establishments with similar activities that have been owned and/or operated by the Applicant, in whole or in part, within the last ten (10) years (*Attach additional pages if necessary*).

14. Additional documents to submit with this application:

- ☐ **A fully executed maintenance agreement** acceptable to the City Attorney, assuring the upkeep and maintenance of, and the prevention of nuisances created by operation of, the banquet and event facility. The agreement shall remain in effect for as long as the banquet and event facility is operated and properly licensed, and shall include the Applicant's agreement to cease operating the banquet and event facility until the operation is in full compliance with the requirements of the maintenance agreement. Any modifications to the banquet and event facility may require an amended maintenance agreement.
- ☐ **A public liability and property damage insurance policy** insuring the establishment and its personnel against any liability arising out of its utilization of a banquet and event facility on the premises. The City, including its employees, agents, officials, officers, and volunteers, shall be named as an additional insured. No person or entity shall maintain, utilize, or allow to be utilized any banquet and event facility unless the insurance required by this section is in force at the time of such operation.
- ☐ **A fully executed indemnity agreement**, approved by the City Attorney, whereby the Applicant and property owner agree to indemnify and hold harmless the City and its officers, agents, and employees from any claim arising or resulting in any manner from the operation of the banquet and event facility or accessory banquet or event use .

NOTICE – The City reserves the right to request additional information as deemed necessary.

CERTIFICATION

I hereby declare and certify, under oath or affirmation and under penalty of perjury, that the foregoing APPLICATION is true and correct to the best of my knowledge and belief.

I understand that inaccuracies may result in denial of the application.

I UNDERSTAND THAT OMISSIONS WILL BE CONSTRUED AS AN INTENTIONAL FAILURE TO DISCLOSE A MATERIAL FACT AND WILL BE SUFFICIENT GROUNDS FOR DENIAL.

I understand that a renewal application must be submitted prior to the expiration of the current license.

I understand that any/all changes made to the operation as they relate to this application must be reported to the City Clerk immediately.

I have reviewed the City's Zoning Ordinance and Code of Ordinances and I understand all of the obligations and responsibilities that apply to the operation of a banquet and event facility or accessory banquet or event use in the City of Sterling Heights.

By: _____

Signature *Title*

Type or Print Name

STATE OF MICHIGAN
COUNTY OF

On this _____ day of _____, 20____, before me, a Notary Public in and for the County of _____, personally appeared _____ known to me to be the said person named in and who executed the foregoing application and made oath that the statements and representations set forth herein are true to the best of his/her knowledge and belief.

Notary Public Signature _____

Notary Printed Name _____

Acting in _____ County

My Commission Expires: _____

Checklist for Banquet and Event Facility License

Business Name _____

Address _____

LICENSE FEE: _____ Paid Date: _____

New \$530 _____ Renewal \$265 _____ Date Current License Expires or Expired: _____

(CITY CLERK'S OFFICE USE ONLY)

Copies to the following departments for review, investigation, and recommendation:

Police Department Approved _____ Denied _____

Fire Department Approved _____ Denied _____

Building/Code Enforcement Approved _____ Denied _____

Planning/Zoning Approved _____ Denied _____

Site plan # _____ Date approved _____

City Development Approved _____ Denied _____

Upon receipt of favorable recommendation from each of the investigation officials listed:

Banquet and Event Facility License Number _____ Date _____

LICENSE VALID TWO (2) YEARS FROM DATE OF ISSUANCE

Approved by: _____

City Clerk

Forward a copy of issued license to the following:

- ☐ Chief of Police
- ☐ Building Official
- ☐ Fire Marshal
- ☐ City Planner
- ☐ City Development Director
- ☐ City Manager